

BOARD OF COMMISSIONERS

E. JANE REBHUHN  
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**GREAT NECK  
WATER POLLUTION CONTROL DISTRICT**

236 EAST SHORE ROAD  
GREAT NECK, NEW YORK 11023

TEL: (516) 482-0238

FAX: (516) 482-8713

**GREAT NECK WATER POLLUTION CONTROL DISTRICT  
APPLICATION FOR PUBLIC ACCESS TO RECORDS**

To: Superintendent  
Great Neck Water Pollution Control District  
236 East Shore Road  
Great Neck, NY 11023

I HERBY APPLY TO REQUEST THE FOLLOWING RECORD:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature

Print Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Representing

A \$0.25 per page copy charge shall be paid to the District prior to the release of any requested documentation.

FOR DISTRICT USE ONLY

- |   |            |   |
|---|------------|---|
| <input type="checkbox"/> Approved Release   | Date _____ | Department File _____   |
| <input type="checkbox"/> Denied - For the reason(s) checked below:                            |            |   |
| <input type="checkbox"/> Confidential Disclosure  |            | <input type="checkbox"/> Part of Investigatory Files                                      |
| <input type="checkbox"/> Record Not Maintained by Great Neck Water Pollution Control District |            | <input type="checkbox"/> Unwarranted Invasion of Personal Privacy                         |
| <input type="checkbox"/> Exempted by Statute Other Than the Freedom of Information Act        |            | <input type="checkbox"/> Record of which this District is Legal Custodian Cannot be Found |
| <input type="checkbox"/> Other (specify) _____  |            |   |

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

NOTICE: You have a right to appeal a denial of this application to the Board of Commissioners.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

Who Must Fully Explain His/Her Reasons for Denial in Writing Within 7 Days of Receipt of Appeal:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date