



TOWN OF  
**BEEKMAN**  
*New York*

4 Main Street  
Poughquag, NY 12570  
[www.townofbeekman.com](http://www.townofbeekman.com)  
(845) 724-5300

**FREEDOM OF INFORMATION REQUEST**

TO: Town of Beekman

I hereby apply to inspect the following records: **\*Be as specific as possible\***

---

---

---

Parcel grid #: \_\_\_\_\_

Print Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Phone: \_\_\_\_\_

\*\*\*\*\*

(OFFICE USE ONLY)

Date Received: \_\_\_\_\_ Date Completed: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE TITLE

Approved Denied in Whole Denied in Part

Reason for Denial  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE TITLE DATE

A person denied access has the right to appeal. Please note that requests for appeals must be made in writing within 30 days of the denial to the Appeals Officer, who is the Finance Commissioner. Mail your request to:

**Town of Beekman**  
**4 Main Street**  
**Poughquag, NY 12570**  
or  
**Email to: [townclerk@townofbeekmanny.us](mailto:townclerk@townofbeekmanny.us)**