



SHELTER ISLAND TOWN POLICE DEPARTMENT

44 NORTH FERRY ROAD - P.O. BOX 1056
SHELTER ISLAND, NEW YORK 11964-1056

631-749-0600 / Fax 631-749-0637

Email townpolice@shelterislandtown.us



Application For Public Access to Records

Section I: To be completed by applicant

To: James J. Read Chief of Police
44 North Ferry Road P.O. Box 1056
Shelter Island NY 11964-1056

Mail Report To:

I hereby apply for a copy of the record/report described below

Applicant full name (print):

Applicant signature:

Date:

Applicant address:

Applicant represents:

Check either Motor vehicle accident report Other report / record

Description of report or record (other than MVA report):

Name of drivers:

Name of victim:

Name of complainant:

Blotter / Case number:

Date of occurrence:

Location of occurrence:

Section II: To be completed by Chief of Police

Approved

Fee \$ _____

Denied (for reasons checked below)

- Confidential disclosure
- Record not maintained
- Record cannot be found
- Inter-Agency material

- Part of investigative file
- Unwarranted invasion of privacy
- Exempted by statute
- Other: _____

Signature:

Title:

Date:

Notice to Applicant: You have the right to appeal a denial of this application in writing to the office of the Town Attorney at 38 North Ferry Road PO Box 970 Shelter Island, New York 11964-0970 within thirty days of denial.