



**TOWN OF NISKAYUNA**  
Office of the Town Clerk  
One Niskayuna Circle  
Niskayuna, NY 12309-4381  
www.niskayuna.org

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Town Clerk/Registrar/RMO  
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**TOWN OF NISKAYUNA  
FREEDOM OF INFORMATION APPLICATION**

**REQUESTED BY:** \_\_\_\_\_  
**NAME**  
\_\_\_\_\_  
**ADDRESS**  
\_\_\_\_\_  
**PHONE NUMBER**  
\_\_\_\_\_

**INFORMATION REQUESTED:** Please be as specific as possible, include dates, titles, file designations, or any other information that will help to find the requested records. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE** **DATE**

**FOR OFFICE USE ONLY**

**APPROVED** \_\_\_\_\_ **DENIED** \_\_\_\_\_ **RECORD CANNOT BE FOUND** \_\_\_\_\_  
**RECORD IS NOT MAINTAINED BY TOWN** \_\_\_\_\_

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

**NOTICE:** You have a right to appeal a denial of this application to the Supervisor of the Town of Niskayuna:

**Joe Landry** **One Niskayuna Circle**  
**Niskayuna, NY 12309**

**I hereby appeal:**

\_\_\_\_\_  
**SIGNATURE** **DATE**