

Vito Sciscioli
Commissioner



James Blakeman
Director of Codes

DEPARTMENT OF COMMUNITY DEVELOPMENT
DIVISION OF CODE ENFORCEMENT
Matthew J. Driscoll, Mayor
www.syracuse.ny.us
FREEDOM OF INFORMATION APPLICATION

PROPERTY ADDRESS OF INTEREST: _____

DATE OF REQUEST: _____

NAME OF PERSON REQUESTING RECORDS: _____

ADDRESS OF PERSON REQUESTING RECORDS: _____

CITY, STATE AND ZIP CODE: _____

PHONE NUMBER: (____) _____

IDENTIFICATION OF PERSONS REQUESTING RECORDS: _____ **TENANT** _____ **INSURANCE ADJUSTER**
_____ **ATTORNEY** _____ **CONCERNED NEIGHBOR** _____ **LANDLORD** _____ **PROSPECTIVE BUYER**
_____ **REALTOR** _____ **OTHER (SPECIFY)** _____

RECORD(S) REQUESTED: (SPECIFY YEAR IF APPLICABLE) _____

REASON FOR REQUEST: _____

IF COPIES REQUESTED, SPECIFY BELOW (PLEASE CHECK):

- 1) **FILE** _____
- 2) **MICROFILM** _____
- 3) **CURRENT VIOLATIONS** _____
- 4) **ZONE CHECK** _____
- 5) **COPY OF CO, CA, CC** _____

NUMBER OF COPIES: _____

FEE PAID*: _____

***FEE PAID FOR EACH COMPUTER PAGE OR PRINTED PAGE IS \$.25 AND \$.35 FOR EACH MICROFILM PAGE.**

REQUEST APPROVED: _____ **REQUEST DISAPPROVED:** _____

REASON FOR DISAPPROVAL: _____

SIGNATURE OF PERSON REQUESTING RECORDS: _____

SIGNATURE OF OFFICIAL GRANTING/DENYING REQUEST: _____

SIGNATURE OF CORPORATION COUNCIL (IF APPLICABLE): _____

****MAIL or FAX IN WITH ORIGINAL SIGNATURE TO:**

DIVISION OF CODE ENFORCEMENT
201 EAST WASHINGTON STREET, ROOM 101
SYRACUSE, NEW YORK 13202

****QUESTIONS? PHONE: (315)448-8600**
FAX: (315) 448-8615