



New Rochelle Public Library Freedom of Information Law (FOIL) Policy

1. The New Rochelle Public Library is required to comply with the New York State's Freedom of Information Law (Public Officers Law, Article 6, Sections 84-90).

2. Requesting Public Records

2.1. NRPL FOIL Request Forms may be obtained:

2.1.1. from the NRPL website; or

2.1.2. in person from the Information Desk at either 1 Library Plaza, New Rochelle, NY or the Huguenot Children's Library at 794 North Avenue, New Rochelle, NY; or

2.1.3. by mail from the Administrative Office at 1 Library Plaza, New Rochelle, NY 10801.

2.2 FOIL Request Forms must be submitted to the Record Access Officer or the Library Director:

2.2.1. in person in the Administrative Office; or

2.2.2. by mail addressed to:

Eugenia Schatoff , Library Director
1 Library Plaza
New Rochelle, NY 10801; or

2.2.3. by email to foil@nrpl.org.

2.3. When requesting public records, be as specific as possible in describing the records requested for inspection or to be copied.

2.4. Include your contact information where you can be reached during business hours, if it is necessary to clarify your request.

3. Response

3.1. You will receive a response within five working days. If additional time is required, you will be notified in writing within five working days and given a reason for the delay and the approximate date that the request will be granted or denied.

3.2. If your request is denied, you may obtain a FOIL Appeal Form from the Administrative Office or on the Library website **[link to pdf]** . Submit the Appeal Form to the President of the NRPL Board of Trustees:

3.2.1. in person in the Administrative Office at 1 Library Plaza, New Rochelle, NY; or

3.2.2. by mail addressed to:

President of the Board of Trustees
1 Library Plaza
New Rochelle, NY 10801; or

3.2.3. by email to foil@nrpl.org.

3.3. You may inspect or copy records in person at a mutually convenient time and date during library business hours. A library employee must be present throughout the inspection. Records will be available for inspection in the Administrative Office of the New Rochelle Public Library at 1 Library Plaza, New Rochelle, NY.

3.4. Upon request, records also may be copied by library staff and picked up at the Circulation Desk during regular NRPL hours. Prior to pickup, you will be charged a statutory fee of \$0.25 per page.

3.4.1. Payment must be made by check or money order and made payable to the New Rochelle Public Library.

Adopted by New Rochelle Public Library Board of Trustees on June 11, 2015.

Revised by the New Rochelle Public Library Board of Trustees on August 14, 2025.



**New Rochelle Public Library
Freedom of Information Law (FOIL) Request**

To: Records Access Officer or Library Director

Date: __ / __ / __

Name (please print): _____

E-mail Address: _____

Mailing Address: _____

Phone
number: _____

Under the provisions of the New York Freedom of Information law, Article 6 of the Public Officers Law, I hereby request records or portions thereof pertaining to (or containing the following):

Choose one:

- ☐ I am requesting an appointment to inspect the records at the New Rochelle Public Library at no charge.
- ☐ I am requesting copies of all records. I understand that the fees are \$0.25 per page for employee-copied records.

Per the Freedom of Information Law, the New Rochelle Public Library must reply within five days of receipt of your request. We will call or write if we require more information to answer your request. Should your request be denied, we will inform you in writing and explain why your request was denied.

Denied requests may be appealed to the President of the Board of Trustees if you believe you were unfairly denied access to the requested records.

If requesting a list of names and addresses, I hereby certify that I will not use such list of names and addresses for solicitation or fund-raising purposes and will not sell, give or otherwise make available such lists of names and addresses to any other person for the purpose of allowing that person to use such list of names and addresses for solicitation or fund-raising purposes.

Signature: _____ Date: _____

Space below is reserved for Library use.

Date Received:

Date of Decision:

Decision (circle):

Approved

Denied

If denied, please state why:



**New Rochelle Public Library
Freedom of Information Law (FOIL) Appeal**

To: President, New Rochelle Public Library Board of Trustees

Date:

Name (please print):

Signature:

Address:

Phone:

I hereby appeal the denial of access regarding my request, which was made on
___/___/___ and sent to _____.

The records that were denied include (Please attempt to identify the records in which
you are denied access to as clearly as possible):

Per the Freedom of Information Law, the President of the Board of Trustees must
answer your appeal within ten (10) business days of receipt. Should your appeal be
denied, we will send you a letter fully explaining the reason(s). A copy of your appeal
and the Library's determination will be sent to the Committee on Open Government,

Department of State, One Commerce Plaza, 99 Washington Ave., Albany, New York
12231.

Space below is for Library use.

Date Received:

Date of Decision:

Decision (circle): Approved Denied

If denied, please state why: