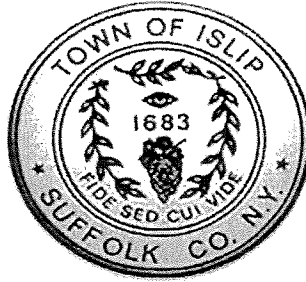


Town Clerk  
**RECEIVED**  
 OCT 27 2023  
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*Town of*  
**Islip**

OCT 30 2023

**FOIL**

**FREEDOM OF INFORMATION LAW (F.O.I.L.)  
 APPLICATION FOR ACCESS TO PUBLIC RECORDS**

**FOIL**

**SECTION 1 - TO BE COMPLETED BY APPLICANT**  
 I HEREBY APPLY TO REVIEW OR HAVE COPIED THE RECORD(S) DESCRIBED BELOW:

<b>Name of Applicant:</b> Alfred Banks	<b>Mailing Address of Applicant (include suite if applicable):</b> 2605 Maitland Center Parkway, Suite C,
<b>Name of Business or Firm:</b> Stellar Innovations	<b>City:</b> Maitland, FL <b>State:</b> FL <b>Zip Code:</b> 32751
<b>Signature of Applicant:</b> <i>Alfred Banks</i>	<b>Date of Application:</b> 10/27/2023
<b>Telephone Number:</b> 3022619069 <b>Email:</b> MLS@stellaripl.com	<b>Department if known:</b>

**DESCRIPTION OF RECORD SOUGHT TO INSPECT AND ANY SPECIAL INSTRUCTIONS.** Please describe the record(s) sought in as specific detail as possible, with address, date or time frame, if applicable. If we cannot determine what record(s) you seek, your application will be denied. Under the NYS FOIL Law, the Town of Islip is only required to supply **DOCUMENTS THAT ALREADY EXIST (NYS POL Article 6)**. Please advise if the address has any OPEN/PENDING/EXPIRED Permits & demolition permits that need attention and any fees due currently (If Yes Provide Permit Number and Type) Also advise if there are any Code Violation or fines due that needs attention currently (if Yes, Provided Case Number & Type) Any unrecorded liens/fines/special assessments due. Property Address: 972 THOMPSON DR, BAY SHORE, NY 11706

**Parcel: 05004380001000730000000 FEE SCHEDULE**  
 Be advised that there is a statutory fee due (\$.25 per page, not in excess of 9x14) for copies. For anything else, including digital formats, cost of reproduction will be charged. Deposits may be required for voluminous requests. Copy fees are to be paid for any pages required to be redacted prior to viewing a file. FOIL requests will not be processed for any person or company who fails to pay any outstanding FOIL fees due for a prior FOIL request. Copies will be prepared unless specifically requested otherwise.

**SECTION 2 - TO BE COMPLETED BY AGENCY RECORDS ACCESS (FOIL) OFFICER**

Receipt of this request is hereby acknowledged. Please allow Twenty (20) business days for processing before contacting this office. A copy of this form is being mailed to you indicating your request is being processed.

10/31/23 *Lou Fisher* M 102378  
 Date Records Access Officer Application Number

Office of the Town Attorney, 655 Main Street, Islip, NY 11751 (631) 224-5550

Please note: The Public Officer's Law requires a municipality to acknowledge receipt of this FOIL request within five (5) business days.

Application Number: M102378

FOR AGENCY USE ONLY BELOW  
SECTION 3 - NOTICE TO APPLICANT

DEPOSIT REQUIRED

Before we may continue processing your FOIL Application, a deposit in the amount of \$ \_\_\_\_\_ is required within thirty (30) days of this response. Please forward a check payable to the "Town of Islip" in the deposit amount to the attention of the Records Access Officer, Office of the Town Attorney, 655 Main Street, Islip, New York 11751. For questions, please call (631) 224-5550. If we do not receive your deposit within thirty (30) days of this response, your FOIL will be deemed closed.

RECORDS PROVIDED

The records have been fully provided.  The records have been partially provided or redacted.

The document(s) you requested are available. The cost of reproduction is \$ 5<sup>00</sup> - Tax Bill. Please bring your cash, check or money order payable to the "Town of Islip" and submit to the Town of Islip-Town Clerk's Office, 655 Main Street, Islip, NY 11751. If necessary, please contact the Records Access Officer at (631) 224-5550 to make other arrangements for the receipt of your documents if you are unable to pick them up in our Town Clerk's Office.

Please call (631) 224-5550 to schedule an appointment to view the documents requested. If we are not contacted within thirty (30) days to schedule a viewing, your FOIL will be deemed closed.

A redaction fee in the amount of \$ \_\_\_\_\_ is due at the time of viewing appointment.

RECORDS DENIED, PARTIALLY PROVIDED OR REDACTED

- Request needs to be more specific because cannot determine what record(s) you seek
- Records not possessed by the Town of Islip
- After a diligent search, open permits/demo permits/lien no documents were found responsive to your request.
- If a record exists, would be a law enforcement record. Please contact our Code Enforcement Department at (631) 224-5548 for a violation search - a fee applies.
- Law Enforcement Records
- Are trade secrets or commercial enterprise documents which if disclosed, would cause injury to the competitive position of the subject enterprise
- Municipalities are only required to search for specific documents requested that are in existence

- Complainant's name cannot be disclosed pursuant to the Public Officers Law Article 6A, Sec. 89-2(a)
- Could endanger the life or safety of any person
- Municipalities are not required to respond to questions or inquiries, only to provide documents
- Unwarranted invasion of personal privacy
- Exempt inter-agency or intra-agency materials
- Would impair present or imminent contract awards or collective bargaining negotiations
- Exempt by statute other than the Freedom of Information Law
- Exempt examination questions or answers
- Other:

You may want to contact the Suffolk County Clerk regarding your lien request.

Name of Records Access Officer:  
X LORI J. HAHN

Records Access Officer Signature:  
X [Signature]

Date:  
X 11/27/23

This Freedom of Information Request will remain on file for six (6) months from the date of final determination. Thereafter, it will be destroyed.

You have the right to appeal a denial of this application in writing within thirty (30) days to Ernest J. Cannava, Senior Assistant Town Attorney, Islip Town Hall, 655 Main Street, Islip, New York 11751. You are entitled to an explanation of the reason for such denial in writing within ten (10) business days of the appeal.

I hereby appeal: \_\_\_\_\_  
Signature Date