



Westchester Joint Water Works

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PUBLIC RECORDS INQUIRY FORM

DATE OF REQUEST: _____

REQUESTOR NAME: _____

ADDRESS: _____

TELEPHONE NUMBERS: Home: _____ Business: _____

I would like to have a copy of the following records (describe fully): _____

I have read Article 8 of the WJWW Rules and Regulations for Freedom of Information at www.wjww.com and understand that there will be a fee for making copies of the information requested and I agree to make such payment upon request. I further state that I understand the procedure set forth in the Rules and Regulations.

Signed: _____ Date: _____

FOR OFFICE USE ONLY

☐ Request Granted

☐ Request Denied

Date: _____

By: _____

Public Records Access Officer