

4. Copy of each apprentice's N.Y.S. Department of Labor Indenture Papers (Form AT -401).

Please respond to each and every request of the information requested. If, for any reason, any portion of my request is denied, please inform me of the reason for the denial in writing and provide the name and address of the person or body to whom an appeal should be directed.

If there are any fees involved for the records requested, please inform me so I may forward payment immediately.

As you know, the Freedom of Information Law requires a response within five (5) business days of receipt of a request; so I would appreciate a response as soon as possible.

The information requested above pertains to all work performed on project:

(Enter The Name of The Project And The Address of Where It is Being Done)

Prime Contractor:

(Enter The Name and
Address Of The Prime
Contractor)

Sub-Contractor:

(All subs of the Prime
Contractor)

Sincerely yours,

Enter Support Agent's
Name and Business
Address

Typists
Initials