

FOIL REQUESTS

Requests for review of files are handled as FOILS.

All FOIL requests must be made in writing to:

**FREEDOM OF INFORMATION OFFICER
WESTCHESTER COUNTY DEPARTMENT OF HEALTH
145 HUGUENOT STREET
NEW ROCHELLE, NY 10801**

OR

FAXED TO: 914-813-5014

OR

E-MAILED TO: HWEB@WESTCHESTERGOV.COM