



Right-to-Know Request Form

Date *



Month Day Year

Request Submitted By:

Fax

Mail

E-Mail

Name *

First Name

Last Name

Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Phone Number *

Area Code

Phone Number

Fax Number

Phone Number

Area Code

E-mail

example@example.com

Records Requested: *

Provide as much specific detail as possible so the Township can identify the records

Do you want copies *

Do you want to Inspect the Records *

Do you want Certified Copies of the Record(s). Additional fees apply. *

Public bodies may fill anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies provided for in this Act, the request must be in writing (Section 702). Written requests need not include an explanation why information is sought or the intended use of the information, unless otherwise required by law (Section 703). You will receive an email confirmation within 72 hours of your request if you have provided your email address. Fees apply for paper copies. Questions may be directed to our Right-to-Know Officer at (610) 953-0017.