

Standard Right-to-Know Law Request Form

Good communication is vital in the RTKL process. Complete this form thoroughly and retain a copy; it is required should an appeal be necessary. You have 15 business days to appeal after a request is denied or deemed denied.

SUBMITTED TO AGENCY	-	-				
Date of Request:						
PERSON MAKING REQUE						
Name:	Company (if applicable):					
Mailing Address:						
City:	State:	Zip:	_ Email:			
Telephone:						
How do you prefer to be c	ontacted if the ag	gency has question	ns? 🗆 Teler	phone 🗆 Ema	ail 🗆 U.	S. Mail
	e of record or part equesters are not r hired by law.	ty names. Use addit equired to explain v	ional sheets i why the record	f necessary. RT	TKL reque	ests should seek anded use of the
DO YOU WANT COPIES? Do you want <u>certified cop</u> <i>RTKL requests may require</i> Please notify me if fees a	☐ Yes, electron ☐ Yes, printed ☐ No, in-person ies? ☐ Yes (may e payment or prep	ic copies preferre copies preferred n inspection of rec be subject to addi payment of fees. Se this request will	d if available cords prefern tional costs) e the <u>Official</u> be more th	e red (<i>may requ</i> □ No ! <u>RTKL Fee Sch</u> an □ \$100 (e	uest copie nedule for	es later) r more details.
	ITEMS BELOW	V THIS LINE FOR	AGENCY US	E ONLY		
Tracking:	_ Date Received	:	_Response I	Due (5 bus. da	ıys):	
30-Day Ext.? 🗆 Yes 🗆 No	(If Yes, Final Due	e Date:) Actua	al Response E)ate:	
Request was: 🗆 Granted	\Box Partially Gra	nted & Denied \Box	Denied Co	st to Request	er: \$	
□ Appropriate third parti	es notified and g	iven an opportun	ity to object	to the release	of reque	ested records.
NOTE: la mont sons a son			ľ		F	07 0040