

**TULPEHOCKEN TOWNSHIP
22 REHRERSBURG ROAD
PO BOX 272
REHRERSBURG PA 19550
PHONE: 717-933-5747 FAX: 717-933-2014
tulpytwp@comcast.net**

TULPEHOCKEN TOWNSHIP RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: _____
REQUEST SUBMITTED BY: E-MAIL U.S. MAIL FAX IN-PERSON
NAME OF REQUESTOR: _____
STREET ADDRESS: _____
CITY/STATE/COUNTY/ZIP (Required): _____
TELEPHONE (Optional): _____ EMAIL (Optional): _____

RECORDS REQUESTED:

*Provide as much specific detail as possible so the agency can identify the information. Please use additional sheets if necessary

DO YOU WANT COPIES? YES or NO
DO YOU WANT TO INSPECT THE RECORDS? YES or NO
DO YOU WANT CERTIFIED COPIES OF RECORDS? YES or NO
DO YOU WANT TO BE NOTIFIED IN ADVANCE IF THE COST EXCEEDS \$100? YES NO
** PLEASE NOTE: RETAIN A COPY OF THIS REQUEST FOR YOUR FILES **
** IT IS A REQUIRED DOCUMENT IF YOU WOULD NEED TO FILE AN APPEAL**

FOR AGENCY USE ONLY

OPEN-RECORDS OFFICER:

I have provided notice to appropriate third parties and given them an opportunity to object to this request
 N/A

DATE RECEIVED BY THE AGENCY: _____

AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: _____

TIME EXTENSION TO RESPOND TAKEN: YES or NO

RESPONSE DUE UNDER TIME EXTENSION: _____

***Public bodies may fill anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies provided for in the 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.)*