



WHITEMARSH TOWNSHIP  
616 Germantown Pike  
Lafayette Hill, PA 19444  
610-825-3535

REQUEST NUMBER: \_\_\_\_\_

DATE DUE: \_\_\_\_\_

**RIGHT-TO-KNOW REQUEST FORM**

DATE COMPLETED: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Requestor's Name (optional): \_\_\_\_\_

Street Address/City/State/Zip (Optional/ Unless Mail Delivery): \_\_\_\_\_

Requester's Telephone/ FAX (optional): \_\_\_\_\_

**By checking this box, I affirm that my full name and contact information is true and correct, and that I am a legal resident of the United States. I understand that failure to check this box may result in the denial of my request and the dismissal of any appeal filed with the Office of Open Records.**

**\*\*Records Requested:** You must identify or describe the records with sufficient specificity to enable the Township to determine which records are being requested. Use additional sheets or reverse side if necessary. If the requestor wishes to pursue the relief and remedies provided for in the right-to-know law, the request must be in writing. The Township is not required to and will not compile lists, prepare summaries, or create documents that do not exist.

**PLEASE NOTE: THE TOWNSHIP HAS FIVE (5) BUSINESS DAYS TO RESPOND TO YOUR REQUEST.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DO YOU WISH TO OBTAIN COPIES? YES or NO**

**\*\*The Township will charge a fee to recover its costs in the duplication and mailing of public records. I acknowledge the Township does not have to provide me with copies I have requested until I pay the fee in full.**

Acknowledgement Initials: \_\_\_\_\_

**DO YOU WISH TO EXAMINE THE RECORDS? YES or NO**

**DATE INSPECTED:** \_\_\_\_\_

**DO YOU WISH A COPY OF THE PUBLIC RECORD MAILED? YES OR NO**

**DATE MAILED:** \_\_\_\_\_

**DO YOU WISH TO HAVE THE PUBLIC RECORD SENT ELECTRONICALLY? YES OR NO**

Email address: \_\_\_\_\_

**DATE EMAILED:** \_\_\_\_\_

\_\_\_\_\_

**RETAIN A COPY OF THIS REQUEST FOR YOUR FILES IT IS A REQUIRED DOCUMENT IF YOU WOULD FILE AN APPEAL**

\_\_\_\_\_  
**FOR AGENCY USE ONLY**

**RIGHT TO KNOW OFFICER:**

**DATE RECEIVED BY THE AGENCY:**

**AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE:**

*\*\*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.)*