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 NAME: ______________________________________________ (Attn: AORO)

Date of Request: _______________________ Submitted via: □ Email □ U.S. Mail □ Fax □ In Person

PERSON MAKING REQUEST:

Name: ___________________________________________ Company (if applicable): ____________________________

Mailing Address: _______________________________________________________________________________________

City: __________________________ State: _______ Zip: _______ Email: ________________________________

Telephone: ______________________ Fax: __________________________

How do you prefer to be contacted if the agency has questions? □ Telephone □ Email □ U.S. Mail

RECORDS REQUESTED: Be clear and concise. Provide as much specific detail as possible, ideally including subject matter, time frame, and type of record or party names. Use additional sheets if necessary. RTKL requests should seek records, not ask questions. Requesters are not required to explain why the records are sought or the intended use of the records unless otherwise required by law.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

DO YOU WANT COPIES? □ Yes, electronic copies preferred if available
□ Yes, printed copies preferred
□ No, in-person inspection of records preferred (may request copies later)

Do you want certified copies? □ Yes (may be subject to additional costs) □ No

RTKL requests may require payment or prepayment of fees. See the Official RTKL Fee Schedule for more details.

Please notify me if fees associated with this request will be more than □ $100 (or) □ $_________.

____________________________________________________________________________________

ITEMS BELOW THIS LINE FOR AGENCY USE ONLY

Tracking: ________________ Date Received: _______________ Response Due (5 bus. days): ________________

30-Day Ext.? □ Yes □ No (If Yes, Final Due Date: _______________) Actual Response Date: ________________

Request was: □ Granted □ Partially Granted & Denied □ Denied Cost to Requester: $______________

□ Appropriate third parties notified and given an opportunity to object to the release of requested records.