

LOWER MILFORD TOWNSHIP

--BOARD OF SUPERVISORS--

Attn: AORO

7607 Chestnut Hill Church Road
Coopersburg, PA 18036- 3712

Telephone (610) 967-4949

Fax (610) 967-1013

www.lowermilford.org

openrecords@lowermilford.org



Board Members

Donna L. Wright, Chair

Ellen L. Koplin, Vice-Chair

John C. Quigley, Supervisor

Standard Right-to-Know Law Request Form

Good communications 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.

DATE OF REQUEST (Required): _____

REQUEST SUBMITTED BY: _____ E-MAIL _____ U.S. MAIL _____ FAX _____ IN-PERSON

PERSON MAKING REQUEST/COMPANY (if applicable) (Required): _____

MAILING Street Address (Required): _____

City: _____ State: _____ Zip: _____ Email: _____

TELEPHONE : _____ FAX (Optional): _____

REQUESTER SIGNATURE (Required): _____

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, property address of requested information, 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 (\$1 extra per) ☐ No

RTKL requests require payment at the time of retrieval of records.

Do you want to be notified in advance if the cost exceeds \$100? YES _____ NO _____

IF COST EXCEEDS \$100, THEN DEPOSIT OF \$50.00 IS REQUIRED WITH REQUEST

ITEMS BELOW THIS LINE FOR AGENCY 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 Requestor: \$ _____

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

NOTE: in most cases, a completed RTKL request is a public record.

More information about the RTKL is available at <https://www.openrecords.pa.gov>

I have reviewed and/or received documents of the above request on _____.

DATE

SIGNATURE