



321East 3rd Street, Bethlehem, PA 18015 phone (610) 868-2971 | fax (610) 868-1446

Standard Right-to-Know Law Request Form

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

SUBMITTED TO AGENCY	NAME:		(Attn: Theresa Vinci, RTK Officer)
Date of Request:		Submitted via: Email	☐ U.S. Mail ☐ Fax ☐ In Person
PERSON MAKING REQUI	EST:		
Name:		Company (if applicable)):
Mailing Address:			
City:	State:	Zip:	Email: _
Telephone:			Fax:
How do you prefer to be c	ontacted if the ag	gency has questions? Telep	hone □ Email □ U.S. Mail
time frame, and type of recor	d or party names. I	RTK requests should seek records,	l as possible, ideally including subject matter, not ask questions. Requesters are not required therwise required by law. Use additional pages
DO YOU WANT COPIES?	☐ Yes, printed	copies (default if none are che	cked)
	☐ Yes, electron	ic copies preferred if available	
	Yes (may be s	subject to additional costs) \Box	red (<i>may request copies later</i>) Do No <u>I RTKL Fee Schedule</u> for more details.
Please notify me if fees associated with this request will be more than \square \$100 (or) \square \$			
Tracking:		OW THIS LINE FOR AGENCYResponse D	USE ONLY vue (5 bus. days):
30-Day Ext.? ☐ Yes ☐ No	(If Yes, Final Du	e Date:) Actu	al Response Date:
Request was: \Box Granted	☐ Partially Gran	ted & Denied \square Denied Cost	to Requester: \$
☐ Appropriate third part	ies notified and g	given an opportunity to object	to the release of requested records.