

Standard Right-to-Know Request Form

SUBMITTED TO AGENCY	NAME:					_	
Date of Request:		Submit	ted via: □Email	□U.S. Mail	□Fax	□In Person	
PERSON MAKING REQUES	ST:						
Name:	ne:Company (if applicable):						
Mailing Address:							
City:	_State:	Zip:	Email:				
Telephone:			Fax:				
How do you prefer to be co	ntacted if the	he agency has	questions? Te	lephone 🗆 En	ıail 🗆 U.S	S. Mail	
records, not ask questions. intended use of the records i	•	•	-	•		•	
DO YOU WANT COPIES?	□ Yes, ele	ctronic copies	default if none are preferred if avaition of records pr	lable	request	copies later)	
Do you want certified copie RTKL requests may require details.		• •	•	_			
Please notify me if fees as	ssociated w	vith this requ	est will be mor	e than □\$100) (or) 🗆	\$	
RIGHT TO KNOW OFFICER	: Donald L.	Holderman, e	mail requests to	dholderman@	bellefo	ntepa.gov	
DATE RECEIVED BY THE A	GENCY:						
AGENCY FIVE (5)-DAY RES	PONSE DUI	Е:					

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

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