



MARLBOROUGH TOWNSHIP

6040 Upper Ridge Road, Green Lane, PA 18054-2221

Paul A. Williams
Township Manager

www.marlboroughpa.org

Office: (215) 234-9300
Fax: (215) 234-4294

Marlborough Township **RIGHT – TO – KNOW REQUEST FORM**

DATE REQUESTED: _____

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

NAME OF REQUESTOR: _____

STREET ADDRESS: _____

CITY/STATE/COUNTY (Required): _____

TELEPHONE (Optional): _____

RECORDS REQUESTED:

Provide as much specific detail as possible so the agency can identify the information.

DO YOU WANT COPIES? YES or NO

DO YOU WANT TO INSPECT THE RECORDS? YES or NO

DO YOU WANT CERTIFIED COPIES OF RECORDS? YES or NO

For Office use only

RIGHT TO KNOW OFFICER: _____

DATE RECEIVED BY THE AGENCY: _____

AGENCY FIVE (5)- DAY RESPONSE DUE: _____

DATE REQUEST FULFILLED: _____

PICKED UP _____ MAILED _____ FAX _____

COPIES _____ POSTAGE _____ FAX _____

REDACTION FEE _____ CERTIFICATION FEE _____ TOTAL COST _____

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.)

“Marlborough is not just a place to live, Marlborough is a way to live.”