

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: AORO)
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:	i			
How do you prefer to be c	ontacted if the a	gency has questions	s? 🗆 Telep	ohone 🗆 Ema	ail 🗆 U.	S. Mail
matter, time frame, and type are not required to explain w. Use additional pages if necess	of record or party hy the records are	names. RTKL request	s should see	k records, not a	isk questi	ons. Requesters
DO YOU WANT COPIES?	☐ Yes, electron	copies (<i>default if no</i> nic copies preferred on inspection of reco	if available	<u>, </u>	est conic	ne lator)
Do you want <u>certified cop</u> RTKL requests may require Please notify me if fees a	ies? □ Yes (may e payment or pre	y be subject to additi payment of fees. See	onal costs) the <u>Official</u>	□ No RTKL Fee Sch	<u>nedule</u> for	r more details.
	ITEMS BELOV	W THIS LINE FOR A	GENCY US	E ONLY		
Tracking:	_ Date Received	d:	Response I	Due (5 bus. da	ys):	
30-Day Ext.? \square Yes \square No	(If Yes, Final Du	e Date:) Actua	al Response D	ate:	
Request was: ☐ Granted	☐ Partially Gra	nnted & Denied 🛭 I	Denied Co	st to Requeste	er: \$	
☐ Appropriate third parti	es notified and	given an opportunit	y to object	to the release	of reque	ested records.