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MAY 2 2012

pennsylvania
OFFICE OF OPEN RECORDS

STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED:

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

NAME OF REQUESTER: Paul C. Stein III

STREET ADDRESS

CITY/STATE/COUNTY/ZIP(Required):

TELEPHONE (Optional).

RECORDS REQUESTED: *Provide as much specific detail as possible so the agency can identify the information.
Please use additional sheets if necessary Address of Residents in your township who have a pool permit in the Last 4 months. Please Fax or email if it is easier for you. If you have any questions please contact me, thank you in advance for your Cooperation.

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)

**** PLEASE NOTE: RETAIN A COPY OF THIS REQUEST FOR YOUR FILES ****
**** IT IS A REQUIRED DOCUMENT IF YOU WOULD NEED TO FILE AN APPEAL ****

FOR AGENCY USE ONLY

RIGHT TO KNOW OFFICER:

DATE RECEIVED BY THE AGENCY:

AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE:

***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.)*