



**RIGHT-TO-KNOW WRITTEN REQUEST FORM\***

**DATE REQUEST SUBMITTED:** \_\_\_\_\_

**TO:** Township Manager  
11279 Center Highway  
North Huntingdon, PA 15642

- Request submitted:**
- By e-mail to [jshepherd@nhtpa.us](mailto:jshepherd@nhtpa.us)
  - By Fax: 724-863-9568
  - In-person
  - By US Mail

**Notice:** Employees are directed to promptly forward requests for public records to the open-records officer.

**NAME AND ADDRESS TO WHICH AGENCY'S RESPONSE SHOULD BE ADDRESSED:**

*REQUIRED* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone Number (optional):** \_\_\_\_\_

**E-mail address (optional):** \_\_\_\_\_

(Provision of your telephone number and/or e-mail address will assist the agency in clarifying your request and could expedite the response)

**RECORDS REQUESTED** (Provide as much specific detail as possible so the agency can identify records containing the information you are seeking and fully respond) (Attach additional sheets as needed):

**PLEASE CIRCLE:**

- |  |     |    |
|--|-----|----|
| Do you want to inspect the records?  | Yes | No |
| Do you want copies of the records?   | Yes | No |
| Do you want certified copies of records?   | Yes | No |
| If you have requested copies, what medium do you prefer? e.g., paper or on disk? _____ |     |    |

**NOTE:** Pursuant to the agency's fee schedule, fees may be required in connection with your request. \*If a requester wishes to pursue relief or remedies provided for in the Right-To-Know act, the request for access to records must be in writing, addressed to the designated open records officer, include a name and address for the agency response and identify or describe records with sufficient specificity to enable the agency to ascertain what records are requested. Section 702-703, Right-To-Know law.

**Office use only:** Date of receipt of written request \_\_\_\_\_  
Date five business day initial response period expires \_\_\_\_\_