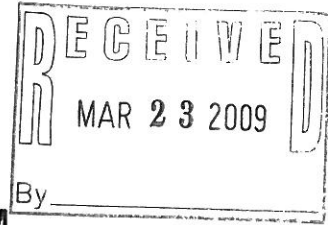




pennsylvania
OFFICE OF OPEN RECORDS



STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 3/20/09

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.*

List of Issued Pool Permits in township from 4 months back to present. Just need name and address. List can be faxed Mailed or pickup in person, whatever is easier. Thank you for your time.

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 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.)*