



## Polk Township Right-To-Know Request Form

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Date Requested: \_\_\_\_\_

Request Submitted by:            E-Mail            U.S. Mail            Fax            In-Person

Name of Requestor: \_\_\_\_\_

Home Address:  
Street \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone Number: (Day) \_\_\_\_\_ (Night) \_\_\_\_\_

Email Address: \_\_\_\_\_

Description of Record Requested:

(\*Please provide as much specific detail as possible so the record can be identified.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Way(s) I prefer to receive requested information (check as many that apply):

Review record(s) in person – No fee

Paper copy – 25¢ per single-sided page

Need certification of record – \$1 additional charge

Other (please specify below):

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\*\*For further pricing information, please check the **Fee** schedule on back or refer to the Township Policy.

\*\*Please return this form to the Open Records Officer – see back of page for details.

**Requestor Certification:** I hereby certify by my signature below that I am the person named above, that I am a legal resident of the United States, and that the personal information contained herein is true and correct to the best of my knowledge. I recognize that all fees due must be paid before the requested information is released. In addition, I assume financial responsibility for and will pay for any copying, retrieval, and certification fees associated with this request.

Signature of Requestor: \_\_\_\_\_

Official Township Use

Right to Know Officer: Annie Chamberlin, Open Records Officer (contact info. on back)

Date Received by Polk Township: \_\_\_\_\_

Agency Five (5)-Day Response Due: \_\_\_\_\_

Date Released/Denied to Requestor: \_\_\_\_\_ Amount Due: \$ \_\_\_\_\_

## Right-to-Know Fee Schedule

The following fees shall be due and be paid by any person or entity for access to Public Records:

- No fees for viewing Public Records that the Township determines are on-site and readily available during normal business hours.
- Postage fee (actual) on any mailing made in response to a request.
- \$1.00 fee if a certification is being requested of the records being produced.
- Paper copies – 25¢ per single-sided page.
- Facsimile/Microfiche/CD/Other Media – Actual Cost.
- Specialized Documents (for example, but not limited to, blueprints, color copies, plotter documents) – Actual Cost.
- If a request is made for a copy of any Public Record that cannot be reasonably duplicated on the facilities available at the offices of the Township, either due to the physical size or shape of the record or to the volume of the records being requested, the Township shall have the requested records duplicated at a commercial copying service or similar location, and the person or entity requesting the record shall be responsible for the amount charged by such outside source.
- Payment is due at the time of delivery of the copies if the costs are expected not to exceed \$100. If the Township expects that the fees of the copies being requested will exceed \$100, then the Township shall notify the Requester that the copies will not be made until the cost of the copies, as estimated by the Township is paid in advance. Either a supplemental bill or a refund shall be made if actual copying fees are different than the Township's estimate.

## Polk Township Open Records Officer

Please submit this form via email, fax, or in person as follows:

Annie Chamberlin  
Open Records Officer  
Polk Township  
11382 Richardsville Rd.  
Brookville, PA 15825  
[annie.chamberlin@polktwp.com](mailto:annie.chamberlin@polktwp.com)  
(p) (814) 328-2970  
(f) (814) 328-2970