_____ _____

Official Use Only
RTK Request Tracking Number

Official Use Only
Date Stamp

RIGHT-TO-KNOW REQUEST FORM

Name of Requestor: _____
(Please print) Last First MI

Signature: _____ Date: _____

Request Submitted By: _____ Email _____ U.S. Mail _____ Fax _____ In-Person

Mailing Address: _____
Street/P.O. Box

_____
City County State Zip Code

Telephone No: _____ Fax No: _____ Email Address: _____
Optional Optional Optional

Please identify each of the documents that are subject to this request. You must identify these documents with sufficient specificity so that we may ascertain whether we have these documents and how to locate them.

_____

_____

_____

_____

Please check all that apply:

- ❑ I am requesting a *copy* of the documents identified above.
- ❑ I am requesting *physical access* to the documents identified above.
- ❑ I am requesting *certified copies* of the documents listed above.

Note: Requester is responsible for paying any applicable processing costs. Pre-payment will be required if expected compliance costs exceed $100. RACW charges $0.25 per page side for copying, plus any applicable costs for postage, certification, redaction, or other costs necessary to process your request. When no specific type of access is requested, the request will be deemed a request for a paper copy of the identified document(s) that will be sent to the requester by first class U.S. Mail.

This request may be submitted in person, by mail, by e-mail or by facsimile to:

Caroline Duffey
Administrative Services Manager
Redevelopment Authority of the County of Washington
90 West Chestnut Street, Suite 700
Washington, Pennsylvania 15301
Fax: (724) 250-8431
caroline.duffey@racw.net