



Heidelberg Township Zoning Office
Lehigh County, Pennsylvania
6272 Route 309 Suite A New Tripoli, PA 18066
Phone 610-767-9297 Fax 484-265-0097

RIGHT-TO-KNOW REQUEST FORM

Request Date:

Request submitted by: E-MAIL U.S. MAIL FAX IN-PERSON

Requestor Information

Name _____ Phone _____

Street Address _____ City _____ State _____ Zip Code _____

Records Requested

**Provide as much specific detail as possible so the agency can identify the information.*

I certify that I am a legal resident of the United States of America.

Signature:

Do you want copies? Yes No

Do you want to inspect the records? Yes No

Do you want certified copies of the records? Yes No



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FOR OFFICE USE ONLY

Right to Know Officer:

Date Received by the Agency:

Agency five (5) 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.)*

FOR TOWNSHIP USE ONLY

Request No. _____

Estimated Costs \$ _____

Acceptance of Costs (signature) _____ Date _____

Date/Time completed _____

Date/Time notified Requestor _____

Person other than requestor notified _____

Material delivered/sent via US Mail/picked up (Date) _____

Picked up by _____

Paid _____ Received by (Initials) _____

Filed (Date) _____

Date request was denied:

Date letter sent: (date/initials)

Date request was approved:

Date letter sent: (date/initials)

Date request was denied in part/approved in part:

Date letter sent: (date/initials)