

BOROUGH OF EDGEWOOD

RIGHT-TO-KNOW REQUEST FORM

Please submit this Request Form to the Borough of Edgewood Open Records Officer indicated as follows:

Donna Lewis
Borough of Edgewood
2 Race Street
Pittsburgh, PA 15218
(412) 242-4027 (Fax)

Email: openrecords@edgewoodboro.com

DATE REQUESTED: _____

REQUEST SUBMITTED BY (Please Circle One): E-MAIL U.S. MAIL FAX IN-PERSON

NAME OF REQUESTER: _____

STREET ADDRESS: _____

CITY/STATE/COUNTY (Required): _____

TELEPHONE (Optional): _____

RECORDS REQUESTED:

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

DO YOU WANT COPIES? (A per page copying fee, plus postage, may apply): YES or NO

DO YOU WANT TO INSPECT THE RECORDS?: YES or NO

DO YOU WANT CERTIFIED COPIES OF RECORDS? (A per record certification fee, plus notarization fees and/or postage, if applicable, may apply): YES or NO

FOR INTERNAL USE:

DATE RECEIVED BY EDGEWOOD: _____

EDGEWOOD FIVE (5)-DAY RESPONSE DUE: _____