

Borough of Ben Avon Heights
Right-To-Know Law
Request Form

Name of Requester _____
Last First MI

Signature of Requester _____

Mailing Address _____

Telephone Number _____

Fax Number _____

E-mail Address _____

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. You may also state your reason for the request.

Please check all that apply:

- I am requesting a copy of the documents identified and understand that there is a \$.15 cent fee per page side copied – please see fee schedule for other applicable fees.
- I am requesting physical access to the documents identified above.
- I am requesting a copy in the following format: _____

Note: Requester is responsible for paying any applicable processing costs. Pre-payment will be required if expected compliance costs exceed \$100. The Borough charges \$0.15 per page side for copying, plus any applicable costs for postage, certification, redaction, formatting 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.

Mail or deliver Request Forms to: The Borough of Ben Avon Heights, 6 Lynton Lane, Pittsburgh, PA 15202.