

**Elizabethtown Area Water Authority
211 W Hummelstown St.
Elizabethtown, PA 17022
717-367-7448
717-367-7496 (Fax)**

RIGHT-TO-KNOW ACT REQUEST FORM

- Retain a copy of this request as it may be necessary if you want to file an appeal.
- Agencies may respond to anonymous verbal or written requests. However, if the requestor wishes to pursue relief and remedies provided for in this Act, the request must be in writing.
- EAWA shall impose fees pursuant to the RTK Act to fulfill this request. If the fees to fulfill the request are expected to exceed \$100, requestor shall prepay an estimate of the fees prior to granting request for access / copies.
- EAWA may ask for an additional 30-day time extension if a timely response cannot be provided due to bona fide staffing limitation, legal review, or other specified reason.

DATE REQUESTED: _____

REQUEST SUBMITTED BY: E-MAIL MAIL FAX IN-PERSON

NAME OF REQUESTOR: _____

STREET ADDRESS: _____

CITY/STATE/COUNTY/ZIP: _____

TELEPHONE # _____

RECORDS REQUESTED: _____

Provide as much specific detail as possible so we can identify the information desired. EAWA may deny a request if insufficient information is provided.

DO YOU WANT COPIES? YES or NO

DO YOU WANT TO INSPECT THE RECORDS? YES or NO

DO YOU WANT CERTIFIED COPIES OF RECORDS? YES or NO

***** Space below to be completed by EAWA *****

RIGHT TO KNOW OFFICER: Del Becker, Authority Manager

DATE RECEIVED BY EAWA: _____

REQUEST #: _____

AGENCY FIVE (5)-DAY RESPONSE DUE: _____

AGENCY ACTION: _____ **EXTENSION:** _____

LAWFUL PR EXCEPTIONS (S.708): _____