

COMMUNITY COLLEGE OF ALLEGHENY COUNTY Right-to-Know Law Request Form

Good communication is vital in the RTKL process. Complete this form thoroughly and retain a copy; it is required should an appeal be necessary. You have 15 business days to appeal after a request is denied or deemed denied. Date of Request: ______ Submitted via: □ Email □ U.S. Mail □ Fax □ In Person PERSON MAKING REQUEST: Name: ______ Company (if applicable): _____ Mailing Address: City: ______ State: ____ Zip: _____ Email: _____ Telephone: ______ Fax: _____ How do you prefer to be contacted if the agency has questions? \Box Telephone \Box Email \Box U.S. Mail **RECORDS REQUESTED:** Be clear and concise. Provide as much specific detail as possible, ideally including subject matter, time frame, and type of record or party names. Use additional sheets if necessary. RTKL requests should seek records, not ask questions. Requesters are not required to explain why the records are sought or the intended use of the records unless otherwise required by law. **DO YOU WANT COPIES?** \square Yes, electronic copies preferred if available ☐ Yes, printed copies preferred □ No, in-person inspection of records preferred (*may request copies later*) Do you want <u>certified copies</u>? \square Yes (*may be subject to additional costs*) \square No RTKL requests may require payment or prepayment of fees. See the Official RTKL Fee Schedule for more details. Please notify me if fees associated with this request will be more than \square \$100 (or) \square \$_____ ITEMS BELOW THIS LINE FOR AGENCY USE ONLY Tracking: _____ Date Received: _____ Response Due (5 bus. days): _____ 30-Day Ext.? ☐ Yes ☐ No (If Yes, Final Due Date: ______) Actual Response Date: _____ Request was: ☐ Granted ☐ Partially Granted & Denied ☐ Denied Cost to Requester: \$_____ ☐ Appropriate third parties notified and given an opportunity to object to the release of requested records.