

**REQUEST FOR INFORMATION FORM  
FRANKLIN TOWNSHIP  
P.O. Box 118  
20 Municipal Lane  
Kemblesville, PA 19347**

Date Requested: \_\_\_\_\_

Request Submitted By:  E-MAIL  U.S. MAIL  FAX  IN-PERSON

Name of Requestor: \_\_\_\_\_  
(attach business card if applicable)

Street Address: \_\_\_\_\_

City/State/County: \_\_\_\_\_

Telephone (Optional): \_\_\_\_\_ Fax (Optional): \_\_\_\_\_

Email address (Optional): \_\_\_\_\_

**DESCRIPTION OF REQUESTED INFORMATION** (Provide as much specific detail as possible so the Township can identify the information) (If additional sheets are required they must be stapled and the total pages included below)

\_\_\_\_\_  
\_\_\_\_\_

Specify year(s) for material being requested (if applicable): \_\_\_\_\_

Do you want to inspect the records? YES or NO      Do you want copies? YES or NO

**If yes instructions for delivery of requested information**

PICK-UP  FAX  MAIL  E-MAIL  DISK/CD(provided)  
 OTHER (explain \_\_\_\_\_)

Do you want certified copies of records? YES or NO

\* 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.)

\*\*\*Requests are subject to the fees established by the Township as allowed by the Act.

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**For Office Use Only:**

Date Request for Information Received \_\_\_\_\_ Open Records Officer \_\_\_\_\_

5 Business Days from Date of Receipt of Request \_\_\_\_\_

Extension Letter Mailed Y/N (circle one) Approval of Extension beyond 30 days Y/N

Date Extension Letter Provides for Fulfilling Request \_\_\_\_\_

DATE REQUEST FULFILLED \_\_\_\_\_ Open Records Officer \_\_\_\_\_

Request Fulfilled by:

Picked Up \_\_\_\_\_ Faxed \_\_\_\_\_ Mailed \_\_\_\_\_ Emailed \_\_\_\_\_ Other \_\_\_\_\_