



UPPER GWYNEDD POLICE

1 Parkside Place, North Wales, PA 19454

www.uppergwynedd.org policetips@uppergwynedd.org

Emergency: 9-1-1 Non-Emergency: 215-699-5861

Administrative/Records: 215-699-5862 Fax: 215-699-3799



"Community First"

STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: _____

REQUEST SUBMITTED BY: EMAIL US MAIL FAX IN-PERSON

NAME OF REQUESTOR: _____

STREET ADDRESS: _____

CITY/STATE/COUNTY (Required): _____

TELEPHONE: _____

RECORDS REQUESTED:

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

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

** This portion of the form is to be completed by agency**

RIGHT TO KNOW OFFICER : _____

DATE RECEIVED: _____

AGENCY FIVE (5) DAY RESPONSE DUE: _____

**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 the information is sought or the intended use of the information unless required by law. (Section 703.)

