



Springfield Township, Bucks County  
2320 Township Road, Quakertown, PA 18951  
610-346-6700, Ext 12 – Fax: 610-346-8777  
Email: [rschilling@springfieldbucks.org](mailto:rschilling@springfieldbucks.org)  
[www.springfieldbucks.org](http://www.springfieldbucks.org)

**STANDARD RIGHT-TO-KNOW REQUEST FORM**

**DATE REQUESTED:** \_\_\_\_\_

**REQUEST SUBMITTED BY:**       E-MAIL       U.S. MAIL       FAX       IN-PERSON

**NAME OF REQUESTOR :** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY/STATE/COUNTY (Required):** \_\_\_\_\_

**TELEPHONE (Optional):** \_\_\_\_\_

**RECORDS REQUESTED:**

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

**DO YOU WANT COPIES?**                       YES               NO

**DO YOU WANT TO INSPECT THE RECORDS?**               YES               NO

**DO YOU WANT CERTIFIED COPIES OF RECORDS?**               YES               NO

**RIGHT TO KNOW OFFICER:**                      Richard H. Schilling

**DATE RECEIVED BY THE AGENCY:** \_\_\_\_\_

**AGENCY FIVE (5)-DAY RESPONSE - DATE 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 information is sought or the intended use of the information unless otherwise required by law. (Section 703.)*  
*(Form adapted from Pennsylvania Office of Open Records)*