Email mail your Right-to-Know request to general@sgtwp.org. Please be specific and not general or vague with your request.



## Standard 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.

should an appear be necess	-					
SUBMITTED TO AGENCY	NAME:					(Attn: AORO)
Date of Request:		Submitted via:	🗆 Email	🗆 U.S. Mail	□ Fax	□ In Person
PERSON MAKING REQUE	ST:					
Name:		Company (if	applicable	e):		
Mailing Address:						
City:	State:	Zip:	Email:			
Telephone:		Fax	:			
How do you prefer to be c	ontacted if the a	gency has questions	s? 🗆 Telej	phone 🗆 Em	ail 🗆 U.	S. Mail
matter, time frame, and type records, not ask questions. Re records unless otherwise requ	equesters are not					
DO YOU WANT COPIES?		nic copies preferred copies preferred	if available	2		
	-	on inspection of reco	ords preferi	red ( <i>may requ</i>	iest copie	es later)
Do you want <u>certified copi</u> <i>RTKL requests may require</i> <b>Please notify me if fees a</b>	e payment or pre	payment of fees. See	the <u>Official</u>	<u> RTKL Fee Scl</u>	2	
	ITEMS BELOW	W THIS LINE FOR A	GENCY US	E ONLY		
Tracking:	_ Date Received	l:	Response I	Due (5 bus. da	iys):	
30-Day Ext.? □ Yes □ No	(If Yes, Final Du	e Date:	) Actu	al Response D	Date:	
Request was: 🗆 Granted	🗆 Partially Gra	anted & Denied 🛛 I	Denied Co	st to Request	er: \$	
□ Appropriate third parti	es notified and	given an opportunit	y to object	to the release	e of reque	ested records.
NOTE: In most cases, a con More information about the					Form upda	ted Nov. 27, 2018