



TOWNSHIP OF ABINGTON

Thomas Hecker, *President*
Matthew Vahey, *Vice President*
Christopher Christman, *Township Manager*
Karen Sanchez, *Treasurer*

STANDARD RIGHT TO KNOW REQUEST FORM

DATE: _____ REQUEST SUBMITTED BY: ____ E-mail ____ U.S. Mail ____ Fax ____ In-Person

NAME OF REQUESTOR: _____

SIGNATURE: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____ COUNTY: _____

(all above required)

TELEPHONE: _____ E-MAIL: _____

RECORD REQUESTED:

**Provide as much specific detail as possible so the agency can identify the information. Use additional sheets if necessary.*

Do you want to inspect the record in our office? ____ Yes ____ No

If you want copies, the cost is \$.25 per page or the cost of duplication. Do you want copies? ____ Yes ____ No

OFFICE USE ONLY

OPEN RECORDS OFFICER:

Tara Wehmeyer, Assistant Township Manager
C/O Maria Wyrsta, RTK Coordinator
1176 Old York Road, Abington, PA 19001
Email: righttoknow@abingtonpa.gov
Phone: 267-536-1000 Fax: 215-884-8271

DAY AND TIME STAMP

Date Received: _____

Date Response Due: _____

Response: _____

____ Code ____ Fire Marshal
____ Police ____ Administration
____ Wastewater ____ Finance
____ Public Works ____ Engineering
____ Parks and Recreation
____ Tax Office