

WARWICK TOWNSHIP POLICE DEPARTMENT

1733 Township Greene Jamison, PA 18929-1621 Phone: (215) 343-6102 Fax: (215) 343-8165

STANDARD RIGHT-TO-KNOW REQUEST FORM

Date Requested:
Name of Requestor:
Requestor's Email Address:
Street Address:
City/State/Zip/County (required):
Telephone Number (optional):
Records requested: * Provide as much specific detail as possible so the Department can identify the information.
Do you want copies? Yes No
Do you want to inspect the records? \square Yes \square No
Do you want copies of records? \square Yes \square No
Right-To-Know Officer: Chief Mark Goldberg
Date request received by Department:
Agency Five (5) Day Response Due:
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** 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) A written request need not include an explanation why information is sought or the intended use of the information, unless otherwise required by law. (Section 703).

Upon completion of this request, this document should be emailed to: warwickpolice@comcast.net

or, mailed to: Chief Mark Goldberg

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