

**BOROUGH OF AMBLER**  
**Standard Right-to-Know Law Request Form**

**SUBMITTED TO:** Borough of Ambler (Attention: Right to Know Officer)

Date of Request: \_\_\_\_\_ Submitted via: ☐ Email ☐ U.S. Mail ☐ Fax ☐ In Person

**PERSON MAKING REQUEST:**

Name: \_\_\_\_\_ Company (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

How do you prefer to be contacted if the Borough has questions? ☐ Phone ☐ Email ☐ U.S. Mail

**RECORDS REQUESTED:** Be clear and concise. Provide as much specific detail as possible, ideally including subject matter, time frame, and type of record or party names. RTKL requests should seek records, not ask questions. Requesters are not required to explain why the records are sought or the intended use of the records unless otherwise required by law. Use additional pages as necessary.

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**DO YOU WANT COPIES?** ☐ Yes, printed copies (*default if none are checked*)  
☐ Yes, electronic copies preferred if available  
☐ No, in-person inspection of records preferred (*may request copies later*)  
Do you want certified copies? ☐ Yes (*may be subject to additional costs*) ☐ No

*RTKL requests may require payment or prepayment of fees.*  
*Please notify me if fees associated with this request will be more than ☐ \$100 (or) more than ☐ \$\_\_\_\_\_.*

More information about RTKL is available at <https://www.openrecords.pa.gov>

**RTKL REQUESTS MAY BE SUBMITTED IN PERSON (Office Hours 8:00 a.m. – 4:30 p.m.)**

**BY MAIL TO:** Borough Manager, Borough of Ambler, 131 Rosemary Ave., Ambler PA 19002

**BY EMAIL TO:** [manager@borough.ambler.pa.us](mailto:manager@borough.ambler.pa.us) **BY FAX TO:** 215-641-1355

ITEMS BELOW THIS LINE FOR AMBLER BOROUGH USE ONLY

Tracking: \_\_\_\_\_ Date Received: \_\_\_\_\_ Response Due (5 bus. Days) \_\_\_\_\_

30 Day Extension? ☐ Yes ☐ No (If Yes, Final Due Date \_\_\_\_\_ ) Actual Response Date: \_\_\_\_\_

Request was: ☐ Granted ☐ Partially Granted & Denied ☐ Denied Cost to Requester: \$ \_\_\_\_\_

☐ Appropriate third parties notified and given an opportunity to object to the release of requested records. [Form 11-3-21]