

THE FAIRCHANCE BOROUGH

REQUESTING INFORMATION UNDER THE RIGHT-TO-KNOW LAW

**To request records under Pennsylvania's Right-to-Know Law,
you may file a request with this Agency's Open Records Officer:**

Angelica J. Carr
Fairchance Borough
125 W Church Street
Fairchance, PA 15436
Phone: 724-564-9980
Fax: 724-564-7142
Email: fccheboro@verizon.net

**To challenge this Agency's response to a RTKL request,
you may file an appeal within 15 business days with:**

Office of Open Records
333 Market Street, 16th Floor
Harrisburg, PA 17101-2234
Phone: (717) 346-9903
Fax: (717) 425-5343
Email: openrecords@pa.gov
Website: <http://openrecords.pa.gov>

**To challenge this Agency's response to a RTKL request for criminal investigative records,
you may file an appeal within 15 business days with:**

Fayette County District Attorney's Office
61 E Main Street
Uniontown, PA 15401
Phone: 724-430-1245

**In compliance with Section 504 of the RTKL,
the following documents have also been posted at this Agency:**

A form which may be used to file a request.
This Agency's policy relating to the RTKL.

THE FAIRCHANCE BOROUGH

Right-to-Know Law Request Form

Good communication is vital in the RTKL process. Complete this form thoroughly and retain a copy; it may be required if an appeal is filed. You have 15 business days to appeal after a request is denied or deemed denied.

SUBMITTED TO: The Fairchance Borough

ATTN: Angelica J. Carr

Date of Request: _____ Submitted via: Email U.S. Mail Fax In Person

PERSON MAKING REQUEST:

Name: _____ Company (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Telephone: _____ Fax: _____

How do you prefer to be contacted if the agency has questions? Telephone 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 if necessary.*

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. See the [Official RTKL Fee Schedule](#) for more details.

Please notify me if fees associated with this request will be more than \$100 (or) \$_____.

ITEMS BELOW THIS LINE FOR AGENCY USE ONLY

Tracking: _____ Date Received: _____ Response Due (5 bus. days): _____

30-Day Ext.? 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.

NOTE: In most cases, a completed RTKL request form is a public record.

Form Updated Aug. 23, 2021

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