



STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 1/6/2020)			
REQUEST SUBMITTED BY:	● E-MAIL	U.S. MAIL	FAX	O IN-PERSON
NAME OF REQUESTER : Wes	t Easton Borou	gh Constable		
STREET ADDRESS :	and the Annual Control of the Contro	initiation in the second secon		_
CITY/STATE/COUNTY/ZIP(Required): West Easton, PA 18042				
TELEPHONE (Optional):				
RECORDS REQUESTED: *Provide as much specific detail as possible so the agency can identify the information. Please use additional sheets if necessary				
1. I am seeking a policy, ord delinquent sewer/ garbage a the dollar threshold that mus enforcement documents in v sewer/ garbage bills from 20	accounts are su st be met befor which a municip	ubjected to enforce e this action is tak	ement through en, or any oth	n a municipal lien process, ie ner specific factor. 2. All
DO YOU WANT COPIES? YES DO YOU WANT TO INSPECT DO YOU WANT CERTIFIED C	THE RECORDS	S? YES or NO ORDS? YES or NO		
** PLEASE NOTE: <u>RETAIN A COPY</u> OF THIS REQUEST FOR YOUR FILES ** ** IT IS A REQUIRED DOCUMENT IF YOU WOULD NEED TO FILE AN APPEAL **				
		AGENCY USE ONL	.Υ	
RIGHT TO KNOW OFFICER:	Joan HA	ebner		*
DATE RECEIVED BY THE AG	ENCY: 1-6	-2020		
AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: 1-13-2020; 2-12-2020				

**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.) Written requests need not include an explanation why information is sought or the intended use of the information unless otherwise required by law. (Section 703.)

emailed 1-13-2020