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STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 3/23/2020	
REQUEST SUBMITTED BY: E-MAIL U.S. MAIL FAX	N-PERSON
NAME OF REQUESTER : West Easton Borough Constable	
STREET ADDRESS :	_
CITY/STATE/COUNTY/ZIP(Required): West Easton, PA	
TELEPHONE (Optional):	
RECORDS REQUESTED: *Provide as much specific detail as possible so the agency ca Please use additional sheets if necessary	an identify the information.
1. I am seeking electronic copies of all email, texts, memos, & enforcement Heebner/ David Gheman, Mayor, Council members, Solicitor and Joe Hoffn concerning Delta Wash located at 601 East Street, West Easton, January 2	nan (Barry Isset & Assoc)

DO YOU WANT COPIES? YES or NO
DO YOU WANT TO INSPECT THE RECORDS? YES OR NO
DO YOU WANT CERTIFIED COPIES OF RECORDS? 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 **

FOR AGENCY USE ONLY

RIGHT TO KNOW OFFICER: JOAN Heebner

DATE RECEIVED BY THE AGENCY: 3-23-2020

AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: 3-30-2020

* COVID-19 (Pandemic declared)

^{**}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.)