

Chester County Conservation District
Right-To-Know Request Form *(revised 04/07/10)*

Date Requested: _____

Request Submitted by: E-Mail U.S. Mail Fax In-Person

Name of Requestor (Optional) _____

Street Address (Optional) _____

City/State/County (Required) _____

Telephone (Optional): _____

Fax number (Optional): _____

Records being requested:

Please provide as much specific detail as possible so the agency can identify the information:

Township(s): _____

Known Permit Number(s): _____

Dates or time frame of records requested: _____

Submit request to: Christian E. Strohmaier, District Manager
 Chester County Conservation District
 688 Unionville Road, Suite 200
 Kennett Square, PA 19348
 Phone 610-925-4920 Fax 610-925-4925

Approved: _____ Date: _____

**** Public bodies must 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)*

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Office Use Only

Date Called: _____ Date Viewed: _____ Copies Made: _____