



## Peters Township Record Request Form

Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Description of Records: (use additional sheets if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I request  **Review** or  **Copies** of the above stated records.

**How would you like to obtain these records? Please choose one:**

US Mail      Fax      E-mail      CD      I will pick these records up

Do you want certified Copies of these Records?      Yes      or      No

\* Certified Copies have an additional charge of \$1.00 per record

- Peters Township will assess exact postage plus \$.25 per page of copied documents
- Requestor will be invoiced for copies, postage, any electronic storage medium, and any document retrieval if necessary.

When completed, please return to:

**Tom Gromek, Executive Assistant**  
**Peters Township**  
**610 East McMurray Road**  
**McMurray, PA 15317**

or e-mail:  
**managersassistant@peterstownship.com**

Phone: 724-941-4180

Fax: 724-942-5022

### FOR TOWNSHIP USE ONLY:

Date Received: \_\_\_\_\_ 5-day Request expires on: \_\_\_\_\_

Extension needed? Yes or No      Date Filled \_\_\_\_\_

Total Cost \$ \_\_\_\_\_