HOPEWELL TOWNSHIP POLICE DEPARTMENT

Session 216

CHIEF OF POLICE
Donald E. Sedlacek

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STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED:_____

REQUEST SUMITTED BY: ☐E-MAIL ☐U.S. MAIL ☐FAX ☐IN-PERSON

NAME OF REQUESTOR: _____

STREET ADDRESS:_____

CITY/STATE/COUNTY (Required): _____

TELEPHONE (Optional):_____

RECORDS REQUESTED: *Provide as much specific detail as possible so the agency can identify the information.

_____

_____

_____

DO YOU WANT COPIES? ☐YES or ☐NO

DO YOU WANT TO INSPECT THE RECORDS? ☐YES or ☐NO

_____

RIGHT TO KNOW OFFICER: Sgt. Jill Banovsky (jillbanovsky@hopewelltwp.com)

DATE RECEIVED BY HOPEWELL TOWNSHIP POLICE DEPARTMENT:_____

AGENCY FIVE (5)-DAY RESPONSE DUE:_____

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