

UPPER DARBY TOWNSHIP AND SELLERS MEMORIAL  
FREE PUBLIC LIBRARY

RIGHT-TO-KNOW REQUEST FORM



DATE OF REQUEST: \_\_\_\_\_

REQUESTOR:

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

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

\_\_\_\_\_

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

Type of document (please be specific) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

All requests must be in writing and may be submitted in person to the Library Office, mailed or faxed.

UD Twp/Sellers Main Library  
76 S. State RD  
Upper Darby, PA 19082  
Attention: Right to Know Officer  
Fax: 610-789-5319

Initial response time is five (5) business days. If additional time is needed to process the request, requestor will be notified within the initial five (5) business days.

All requests for Library records covered by the Right-To-Know Law must be made in accordance with, and are governed by, Pennsylvania State Law and the Upper Darby Township policy.

Paper copy of response - \$.25 per page, plus mailing costs.

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Library Use Only:

Request processed by: \_\_\_\_\_ Date: \_\_\_\_\_

Date Information Released to Requestor: \_\_\_\_\_

Amount Due: \$ \_\_\_\_\_ Amount Received: \$ \_\_\_\_\_