



CITY OF HARRISBURG Right-to-Know Request Form

Complete this form thoroughly and retain a copy; it is required should an appeal be necessary. You have 15 business days to appeal after a request is denied or deemed denied.

Date of Request: _____

PERSON MAKING REQUEST:

Name: _____ Company (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Telephone: _____ Fax: _____

RECORDS REQUESTED: *Be clear and concise. Provide as much specific detail as possible, ideally including subject matter, time frame, and type of record or party names. Use additional sheets if necessary. RTKL requests should seek records, not ask questions. Requesters are not required to explain why the records are sought or the intended use of the records unless otherwise required by law.*

- DO YOU WANT COPIES?** Yes, electronic copies preferred if available
 Yes, printed copies preferred
 No, in-person inspection of records preferred (*may request copies later*)

RTKL requests may require payment or prepayment of fees. See the [Official RTKL Fee Schedule](#) for more details.

The request may be submitted in person, via e-mail, or by fax to:

Office of the City Solicitor
The City of Harrisburg
Rev. Dr. Martin Luther King Jr. City Government Center
10 North Second Street, Suite 402
Harrisburg, PA 17101

Emily A. Farren, Esq. Right-To-Know Officer
e-mail: righttoknow@harrisburgpa.gov
Fax: 717.255.3056 • Phone: 717.255.3065

ITEMS BELOW THIS LINE FOR AGENCY USE ONLY

Request Number: _____ Date Received: _____ Response Due(5 bus. days): _____

30-Day Ext.? Yes No (If Yes, Final Due Date: _____) Actual Response Date: _____

Request was: Granted Partially Granted & Denied Denied Cost to Requester: \$ _____

*NOTE: In most cases, a completed RTKL request form is a public record.
More information about the RTKL is available at <https://www.openrecords.pa.gov>*

Form updated February 25, 2021