

Chartiers Township

2 Buccaneer Drive, Houston, PA 15342
Phone: 724-745-3415 Fax: 724-745-1744
www.chartierstwp.com

RECORD REQUEST FORM

DATE: _____

REQUEST SUBMITTED BY _____ Email _____ US Mail _____ Fax _____ In Person _____

NAME: _____

ADDRESS: _____

EMAIL ADDRESS: _____

TELEPHONE: _____

FAX: _____

DESCRIPTION OF SPECIFIC RECORDS REQUESTED *(Use back if necessary)*:

DO YOU WANT COPIES? _____ Yes _____ No
DO YOU WANT TO INSPECT THE RECORDS? _____ Yes _____ No
DO YOU WANT CERTIFIED COPIES OF THE RECORDS? _____ Yes _____ No

Method(s) of delivery: pickup / mail / email / fax / disk

Signature of requestor *(upon completion of request)* _____

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For Office Use Only

Date Received _____ Date Due: _____ Extension Date *(if applicable)* _____

Number of pages reproduced _____ Postage _____ Fax _____ Disk _____

Total cost _____ Date Completed _____

Date mailed _____ Date Faxed _____ Date picked up _____

Staff member completing request _____