



**BOROUGH OF MT. OLIVER**

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150 Brownsville Road Pittsburgh, PA 15210

Ph: 412-431-8107 Fax: 412-431-0184

www.MtOliver.com

**RIGHT TO KNOW REQUEST**

Date Requested: \_\_\_\_\_

Request Submitted By:  E-Mail  Fax  U.S. Mail  In-Person

Name of Requestor: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Records Requested (please provide as much detail as possible so the agency can identify the information):

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

Do you want copies?  Yes  No

Do you want to inspect the records?  Yes  No

Do you want certified copies?  Yes  No

**For Official Use Only:**

Request Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Response Due (5 days): \_\_\_\_\_  Accepted  Rejected

Comments: \_\_\_\_\_

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

Fees: \$ \_\_\_\_\_ Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Completed By: \_\_\_\_\_ Date: \_\_\_\_\_