

# NORTH LONDONDERRY TOWNSHIP

655 EAST RIDGE ROAD, PALMYRA PA 17078  
717-838-1373

## PUBLIC RECORD REVIEW/DUPLICATION REQUEST

Date of Request: \_\_\_\_\_

Requester's Name: \_\_\_\_\_

Requester's Address: \_\_\_\_\_

Requester's Telephone No.: \_\_\_\_\_

Request to [ ] inspect [ ] duplicate the following public records. (Check applicable box)

Description of Record(s) Requested:

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I hereby acknowledge that copying blueprints and other such oversized documents may incur additional costs. I understand that I am responsible for any additional costs that may be associated with requests for duplication.

Instructions (Circle one):                      Pick Up                      Mail

\_\_\_\_\_  
Signature

### FOR OFFICIAL USE ONLY:

Date Received: \_\_\_\_\_ Date Approved/Denied: \_\_\_\_\_

Copies: \_\_\_\_\_ Certified: \_\_\_\_\_ Postage: \_\_\_\_\_

Total Cost: \_\_\_\_\_

Denied Notice Mailed: \_\_\_\_\_

Records Mailed To/Reviewed By Requestor: \_\_\_\_\_

Staff Member's Signature: \_\_\_\_\_

Copy - \$.25 / Page / Side 3rd Party Copy – Actual Cost Certified - \$1.00 / Record Postage – Actual Cost  Fees Exceeding \$100 Prepayment Required
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