HARMONY BOROUGH
PUBLIC RECORD REVIEW/DUPLICATION REQUEST

Please print legibly

Date of Request: _____ Requester's Telephone Number: _____

Requester's Name: _____

Requester's Address: _____

I request [ ] **review** [ ] **duplication** (check applicable boxes) of the following records. **Important**: You must identify or describe the records with sufficient specificity to enable the Borough to determine which records are being requested. (i.e., exact property address) Use additional sheets if necessary.

_____

_____

_____

I certify that I am a legal resident of the United States:

_____ _____

Signature of Requester Mailing Address (if different than above)

Requests may be submitted in person, by mail (217 Mercer Street, Harmony, PA 16037) or email (HarmonyBorough@zoominternet.net) to:

Amy Brown
Borough Secretary
Designee for Document Requests

TO BE COMPLETED BY BOROUGH:

Date Received: _____ Request No._____ Date Completed:_____

Action Taken:	[ ] Approved	Date of Approval: _____
	[ ] Denied	Date Notice Mailed: _____
	[ ] Other	Date Notice Mailed: _____

Duplication Costs:

Copies:	8 ½ x 11 #_____ @ .25 each:	Amount:	_____
	Plans #_____ @ actual cost per page:	Amount:	_____
	Electronic Conversion actual cost per page:	Amount:	_____
		Total Amount:	_____

Signature:_____ Date:_____