OS-100 (8-18)



RIGHT-TO-KNOW REQUEST

REQUESTOR INFORMATION

FIRST NAME	LAST NAME	
MAILING ADDRESS		
CITY	STATE	ZIP CODE
COMPANY (Optional)		<u> </u>
E-MAIL (Optional)	TELEPHONE (Optional)	
RECORDS REQUESTED Please provide as much specific detail as por are location-specific, please also provide the		formation. If the records you request
☐ Request continued on attached page	/file.	
Please choose ONE method below to ac	cess or receive the record(s)	you requested:
☐ I would like copies. (If the records are ava	ailable on the Internet, you will be d	lirected to their online location.)
☐ I would like to inspect the records. (You	will be provided a PennDOT contact	ct with whom to schedule an appointment.)

Requests received by the PennDOT Open Records Officer after 4:30 p.m., or received on a weekend, on a Commonwealth holiday, or during any closure of Commonwealth Offices, will be dated the following business day. See page two for instructions on submitting a request and PennDOT's Fee Schedule.

INSTRUCTIONS

This form is available electronically on the PennDOT website at www.dot.state.pa.us.

Requests received by the PennDOT Open Records Officer after 4:30 p.m., or received on a weekend, on a Commonwealth holiday, or during any closure of Commonwealth Offices, will be dated the following business day. Requests received at PennDOT locations other than the office of the Agency Open Records Officer (AORO) will be dated when received by the AORO.

Requests can be submitted via any of the following methods:

U.S. Mail

PennDOT Open Records Officer Bureau of Office Services Pennsylvania Department of Transportation 400 North Street, 5th Fl. PO Box 3451 Harrisburg, PA 17105-3451

Facsimile

717-787-8779

Attention: PennDOT Open Records Officer

E-mail

PENNDOT-RightToKnow@pa.gov

In Person

You can submit your request in person to the PennDOT office at the address listed above.

FEE SCHEDULE

IF THE RECORDS YOU REQUEST REQUIRE REDACTION, YOU WILL BE CHARGED FOR COPIES NECESSARY TO PERFORM REDACTION, EVEN IF YOU REQUEST TO INSPECT THE RECORDS OR RECEIVE ELECTRONIC FILES.

1.	Photocopies	8.5" x 11" or 8.5" x 14"	\$ 0.25 each
2.	Color Copies	8.5" x 11" or 8.5" x 14"	\$ 0.35 each
3.	Copies of Motor Vehicl	e Records	\$ 9.00 each
4.		11" x 17"	\$ 1.50 each
5.		Half Size (12" x 18") Full Size (22" x 36")	\$ 2.00 each
6.	CD		\$ 3.00 each
7.	Certified Copies		\$ 1.00 each
8.	Postage		actual cost
9.	Fax transmission		\$ 1.50 first page \$ 1.00 each additional page

ONLY CHECKS, MONEY ORDERS OR CREDIT CARDS (MASTERCARD, VISA, DISCOVER, AMERICAN EXPRESS) WILL BE ACCEPTED FOR PAYMENT. WE CANNOT ACCEPT CASH.