pennsylvania
OFFICE OF OPEN RECORDS

# STANDARD RIGHT-TO-KNOW REQUEST FORM

**DATE REQUESTED:** MAY 15, 2018

**REQUEST SUBMITTED BY:** ☐ **E-MAIL** ☐ ~~U.S. MAIL~~ ☐ ~~FAX~~ ☐ ~~IN PERSON~~

**REQUEST SUBMITTED TO (Agency name & address):**
State College Borough Water Authority, 1201 West Branch Road, State College PA
c/o RTK Officer Brian Heiser, brian@scbwa.org

**NAME OF REQUESTER** : KATHERINE WATT

**STREET ADDRESS**: 156 WEST HAMILTON AVE.

**CITY/STATE/COUNTY/ZIP(Required)**: STATE COLLEGE PA 16801

**TELEPHONE (Optional)**: **EMAIL (optional):** kw.investigations.llc@gmail.com

**RECORDS REQUESTED**: **Provide as much specific detail as possible so the agency can identify the information.* ***Please use additional sheets if necessary***

1. Complete, unredacted SCBWA insurance policies, including any and all provisions voiding said policies if the insurer can prove misrepresentation, fraud and/or non-disclosure of risks and/or risk factor reports by the insured entity – SCBWA - to the insurer, and/or negligence and/or gross negligence on the part of the insured party during engagement in project siting, design, review, endorsement, approval, permitting, construction, operation and/or maintenance.

2. Emails, letters, reports, meeting minutes and all other written records relating to legal identification of responsible party and assignment of financial liability for potential public water contamination related to a sewage pump station, sewage transmission pipelines and/or stormwater basins to be located on or adjacent to facilities and/or land owned and controlled by SCBWA – such records created, transmitted by and/or received by your public entity between Jan. 1, 2015 and the present.

**DO YOU WANT COPIES**? ☐ **YES** ☐ NO
**DO YOU WANT TO INSPECT THE RECORDS?** ☐ **YES** ☐ NO
**DO YOU WANT CERTIFIED COPIES OF RECORDS**? ☐ YES ☐ **NO**
**DO YOU WANT TO BE NOTIFIED IN ADVANCE IF THE COST EXCEEDS $100?** ☐ **YES** ☐ NO

**** PLEASE NOTE: RETAIN A COPY OF THIS REQUEST FOR YOUR FILES ****
**** IT IS A REQUIRED DOCUMENT IF YOU WOULD NEED TO FILE AN APPEAL ****

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***FOR AGENCY USE ONLY***

**OPEN-RECORDS OFFICER:**

☐ I have provided notice to appropriate third parties and given them an opportunity to object to this request

**DATE RECEIVED BY THE AGENCY:**
**AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE:**

***Public bodies may fill anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies provided for in this Act, the request must be in writing. (Section 702.) Written requests need not include an explanation why information is sought or the intended use of the information unless otherwise required by law. (Section 703.)*