

Exhibit "A"

THE PHILADELPHIA PARKING AUTHORITY

RIGHT-TO-KNOW REQUEST FORM

1. DATE REQUESTED: _____

2. REQUEST SUBMITTED BY: E-MAIL U.S. MAIL FAX IN-PERSON
(Strike out those that do not apply.)

3. NAME OF REQUESTOR (Required**): _____

4. ADDRESS (Required): _____

(City) (State) (Zip)

5. TELEPHONE (Optional): _____

6. RECORDS REQUESTED:

**Provide as much specific detail as possible to identify the information.*

7. Strike out the inapplicable response for each of the following:

(a) DO YOU WANT COPIES? YES or NO

(b) DO YOU WANT TO INSPECT THE RECORDS? YES or NO

(c) DO YOU WANT CERTIFIED COPIES OF RECORDS? YES or NO

(OFFICIAL USE ONLY)

STAMP DATE RECEIVED BY THE OFFICER:



FIVE (5)-DAY RESPONSE DUE: _____

***Anonymous verbal or written Requests will not be processed. If the requestor wishes to pursue the relief and remedies provided for in the 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.)*