

Right to Know Request – Town of Orford, NH

Pursuant to the NH Right-To-Know law (RSA 91-A), the stated filer requests to see public information from Orford departments and/or representatives:

Requester's Name (or Organization): _____

Phone and/or email address: _____

Mailing Address (only if you want information mailed): _____

Request Date: _____

How would I like to obtain information?

☐ I would like to inspect information only

*Upon submission of this form, a Town of Orford representative will contact you to discuss date/time you can come to Town Offices to inspect information. **There is no charge for this service.***

☐ I would like electronic information emailed (or saved upon a USB flash drive I provide)

*Upon submission of this form, a Town of Orford representative will contact you to discuss when documents would be available and whether you want documents emailed, or when you will come to the Town Offices to provide a USB flash drive. **To protect our town computers, the USB drive must be new and in a sealed package.***

There is no charge** to email or save any unredacted information that is available via electronic format (i.e. Microsoft Word, Adobe .pdf, .jpg). **However, all document requiring redaction (because they contain information exempt from 91-A), will cost the requester (*see rate below), as they must be printed, manually redacted, and presented to the requester as a hard-copy. The town representative will inform the requester of the number of redacted documents and cost, and must receive permission from the requester before proceeding.

☐ I would like hard copies mailed to me (USPS postage charges apply)*

☐ I would like hard copies faxed to me at fax #_____*

☐ I would like hard copies held for me at the Orford Selectboard Office*

****There is a charge of \$0.50 per page 8-1/2x11; \$1.00 per page 11x17, payable by cash, money order or personal check, upon completion (as allowed by state law). Upon receipt of this request, a Town of Orford representative will follow up to make sure you are prepared to pay this cost, and must receive a written agreement to accept the cost from the requester before proceeding with the document printing.***

*While state law does not require a written RTK request, written requests assure all parties have a verifiable copy of the request, and there is no ambiguity as to what is being requested***

If there are any other questions or concerns in regard to this Right-To-Know request, please contact the Orford Selectboard Office between 8:00 a.m. and 3:00 p.m. Monday-Thursday, and a member of the staff can work with you to address said issues (#603-353-4889 or via email: orfordselectmen@orfordnh.us)

Reasonably describe (RSA 91-1:4, IV) the records you want the Town of Orford to make available to you– please submit one RTK request per topic.

*****If the requester chooses to verbally submit their request, this section will be completed by the person receiving the request. The requester will review the written RTK request and sign their approval:*** _____ (requesters signature)

Mail, fax, email or hand deliver this completed form to:
Orford Selectboard Office, 2529 Route 25A, Orford, NH 03777
Fax #603-353-4489, Email: Orfordselectmen@Orfordnh.us

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THIS SECTION TO BE COMPLETED BY TOWN OFFICIAL

Name of person receiving request (Print)

Signature

Date

RESPONSE

Date the information was provided: _____ Format: _____

Charge \$: _____ Note: _____

☐ Check here if information requested is not available

Reason: (attach explanation if necessary): _____

Name of person responding (Print)

Signature

Date