

RULE 509 REQUEST FORM

ATTN: Rule 509 Administrator
Court Administration
P.O. Box 311, Courthouse
Norristown, PA 19404
Ph: (610) 278-3229 Fx: (610) 278-1233
Email: Rule509Admin@montcopa.org

Name of Requester _____

Mailing Address _____

Telephone Number _____ Fax _____

E-mail Address _____

Signature _____ Date _____

Please identify each of the documents that are requested. It is important that your request be as specific as possible so that we may determine whether we have these documents.

Fee Schedule:

- Photocopying: \$0.25 per page
- Retrieval/Redaction: \$8.00 / 15 minutes for complex or voluminous requests
- CD: \$5.00 Each
- Postage: Actual Cost

Note: Standard fees are outlined above. The Court may levy additional fees as necessary to cover costs it incurs in fulfilling specific information requests. Pre-payment will be required if expected compliance costs exceed \$100.