LEHIGH COUNTY

MUNICIPAL REQUEST FOR PROPERTY CONTACT INFORMATION

Act 29 of 2026 - 68 Pa.C.S. § 2506

Date of Request: _____

1. REQUESTING MUNICIPALITY

Municipality:

Municipal Department / Office:

Municipal Address:

Municipal Official / Employee Making Request:

Title:

Telephone: **Email:**

2. PROPERTY INFORMATION

Property Address:

Parcel Identification Number:

Property Owner Name:

Municipality:

3. CONTACT INFORMATION REQUESTED

Please identify the information being requested:

☐ Owner / Company Name

☐ Owner Address

☐ Telephone Number

☐ Email Address

☐ Property Maintenance / Responsible Contact

☐ All contact information maintained by the Chief Assessor

☐ Other: _____

4. REASONABLE NEED AND USE

Does the request concern discussion with the real property owner regarding **property maintenance or upkeep**?

☐ Yes ☐ No

If no, briefly identify the reasonable need and use for the contact information:

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5. REQUIRED MUNICIPAL AFFIRMATION

I, the undersigned municipal official or authorized employee, affirm that:

1. The requested contact information is being requested for the reasonable municipal need and use identified above;
2. The information will be used only for the purpose stated in this request;
3. The requested information **will not be used for commercial purposes**; and
4. The information **will not be used for any purpose other than the purpose identified in this request**.

Authorized Municipal Official – Printed Name _____

Title: _____

Signature: _____ **Date:** _____

Return Completed Form to:

Lehigh County Government Center

Office of Assessment

17 S 7th St. Room 517

Allentown PA 18101-2401

Or

Email to: LCAData@lehighcounty.org

FOR COUNTY USE ONLY

Date Received: _____ **Request Approved:** ☐ Yes ☐ No

Received By: _____

Reason if Denied:

Information Released:
☐ Yes ☐ No ☐ Partial

Date Released: _____ **County Official:** _____