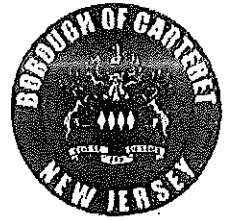


BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM
61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name	Frank	MI		Last Name	Ferraro
E-mail Address	frankf@ferrarostamos.com				
Mailing Address	22 Paris Avenue, Suite 105				
City	Rockleigh	State	NJ	Zip	07647
Telephone	201-767-4122		FAX	201-767-4223	
Preferred Delivery:	Pick Up	US Mail	On-Site Inspect	Fax	E-mail ☒
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.					
Signature				Date	8/22/22

Payment Information

Maximum Authorization Cost \$		
Select Payment Method		
Cash	Check	Money Order
Fees:	Letter size pages - \$0.05 per page Legal size pages - \$0.07 per page Other materials (CD, DVD, etc) – actual cost of material	
Delivery:	Delivery / postage fees additional depending upon delivery type.	
Extras:	Special service charge dependent upon request.	

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Copies of any and all Zoning Board of Adjustment and /or Planning Board approval resolutions pertaining to the monopole /antenna facility located at 399 Roosevelt Avenue, Block 404, Lot 1

339

AGENCY USE ONLY

Est. Document Cost	_____
Est. Delivery Cost	_____
Est. Extras Cost	_____
Total Est. Cost	_____
Deposit Amount	_____
Estimated Balance	_____
Deposit Date	_____

AGENCY USE ONLY

Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.	
In Progress	Open
Denied	Closed
Filled	Closed
Partial	Closed

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature		Date	



BOROUGH OF CARTERET



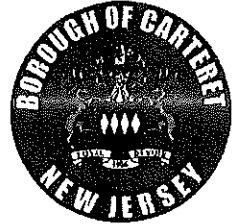
OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Kevin MI J. Last Name Hayes, Sr.
E-mail Address kevin.hayes@insiteeng.net
Mailing Address InSite Engineering, LLC, 1955 Route 34, Suite 1A
City Wall State NJ Zip 07719
Telephone 732-531-7100 FAX 732-531-7344
Preferred Delivery: Pick Up ☐ US Mail ☐ On-Site ☐ Inspect ☐ Fax ☐ E-mail ☒
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature [Signature] Date 7/27/22

Payment Information

Maximum Authorization Cost \$ 25.00

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Seeking site plans, stormwater management reports, Redeveloper agreements including associated financial documents, PILOT agreement and approved resolution for the project at block 302, lots 6 & 7 (aka The Lexington) on Roosevelt Avenue.

180
182L
Pb15-02

Athn.

Fedex # 410-410

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress ☐ Open _____
Denied ☐ Closed _____
Filled ☐ Closed _____
Partial ☐ Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____ Total _____
Rec'd Date _____ Deposit _____
Ready Date _____ Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

Custodian Signature

Date

BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information - Please Print

First Name Bankover MI _____ Last Name EllenE-mail Address belken@bancorpplanning.netMailing Address 315 Route 34, Suite 129City Columbia Neck State NJ Zip 07702Telephone 932 845 8103

FAX _____

Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On-Site Inspect ☐ Fax ☒ E-mailIf you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature _____

Date 8/18/22

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash ☐ Check ☐ Money Order ☐Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Block 304, Lots 4 & 5 OFF Roosevelt Basin Holdings -
& Lot 5 is 351 Roosevelt.
Please provide copies of any/all building, zoning, & fire code
violations since 2010.

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____
Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.In Progress - ☐ Open ☐
Denied - ☐ Closed ☐
Filled - ☐ Closed ☐
Partial - ☐ Closed ☐

AGENCY USE ONLY

Tracking Information

Tracking # _____ Total _____
Rec'd Date _____ Deposit _____
Ready Date _____ Balance Due _____
Total Pages _____ Balance Paid _____
Records Provided _____

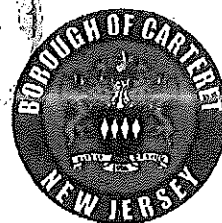
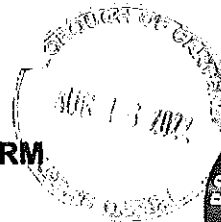
Custodian Signature _____

Date _____



BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 · Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Barbara MI Last Name Ehlen
E-mail Address behlen@beaconplanning.net
Mailing Address 315 Route 34, Suite 129
City Colts Neck State NJ Zip 07722
Telephone 732-845-8103 FAX
Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On-Site Inspect ☐ Fax ☐ E-mail 10
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature [Signature] Date 8/18/11

Payment Information

Maximum Authorization Cost \$
Select Payment Method
Cash ☐ Check ☐ Money Order ☐
Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.
Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Block 6504, Lot 11

Copies of any and all zoning, Etc, & building code violations issued since 2010.

21-25 Cooke Avenue.

Bank of America Property.

AGENCY USE ONLY

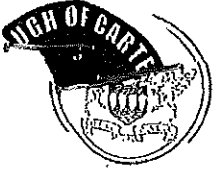
Est. Document Cost	_____
Est. Delivery Cost	_____
Est. Extras Cost	_____
Total Est. Cost	_____
Deposit Amount	_____
Estimated Balance	_____
Deposit Date	_____

AGENCY USE ONLY

Disposition Notes	
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.	
In Progress	- Open _____
Denied	- Closed _____
Filled	- Closed _____
Partial	- Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature		Date	



BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM
 81 COOKE AVENUE, CARTERET, NEW JERSEY 07008

Telephone - 732-541-3800 Fax - 732-541-8925
 www.carteret.nj.net

KATHLEEN M. BARNEY, MMC, Municipal Clerk



Important Notice
 The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information - Please Print

First Name Cheryl MI Last Name Mount
 E-mail Address permits@constructionmonitor.com
 Mailing Address Po Box 2202
 City Cedar City State Utah Zip 84720
 Telephone 800-925-6085 FAX 800-604-9480
 Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On-Site Inspect ☐ Fax ☒ E-mail
 If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey or any other state or the United States.
 Signature Cheryl Mount Date 8/18/2022

Payment Information

Maximum Authorization Cost \$
 Select Payment Method
 Cash ☐ Check ☐ Money Order ☐
 Fees: Letter Size @\$0.05
 Legal Size @0.07
 Delivery: Delivery / postage fees additional depending upon delivery type.
 Extras: Special service charges dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Requesting a report of ALL issued building permit information for Residential & Commercial properties

From 08/01/2022 to 08/11/2022

Report to include if possible:

Permit #'s & Dates

Site Addresses

Valuation of Jobs

Description of work being Done

Contractor information & Owner name

AGENCY USE ONLY

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress ☐ Open ☐
 Pending ☐ Closed ☐
 Filled ☐ Closed ☐
 Partial ☐ Closed ☐

AGENCY USE ONLY

Tracking Information

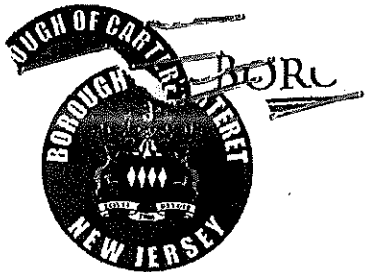
Tracking # <u> </u>	Total <u> </u>
Rec'd Date <u> </u>	Deposit <u> </u>
Ready Date <u> </u>	Balance Due <u> </u>
Total Pages <u> </u>	Balance Paid <u> </u>

Records Provided

Custodian Signature

Date

1. Document Cost
 Est. Delivery Cost
 Est. Labor Cost
 Total Est. Cost
 Payment Amount
 Estimated Balance
 Deposit Date



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information - Please Print

First Name JOHN MI W. Last Name SPOGANETZ, ESQ.E-mail Address mrl@jspoganetzlaw.comMailing Address 1 HOLMES STREETCity Carteret State NJ Zip 07008Telephone 732-541-4300 FAX 732-541-8584Preferred Delivery: Pick Up ☐ US Mail ☐ On-Site Inspect ☐ Fax ☐ E-mail ☒ XX

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature JOHN W. SPOGANETZ, ESQ. Date 08/18/2022

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

RE: 67 EDGAR ST BLOCK 6202 LOT 6

1. Opened and closed permits for work at the property.
2. Documents regarding any variance pending, granted or denied for the property.
3. Complaints filed by the municipality and other citations for code or other violations at the property.
4. Any pending or finalized assessments for the property
5. Tax Assessor records, tax card and tax valuations
6. Any deed easement or other restriction of record for the property
7. Inspections for environmental issues, water wells, sanitary disposal systems and underground fuel tanks for the property
8. The current Certificate of Occupancy for the property
9. Any document indicating if the property is in a flood zone
10. Any & all records reflecting the removal of an underground oil tank and/or change in the heating system

AGENCY USE ONLY

Est. Document Cost	_____
Est. Delivery Cost	_____
Est. Extras Cost	_____
Total Est. Cost	_____
Deposit Amount	_____
Estimated Balance	_____
Deposit Date	_____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress	-	Open	_____
Denied	-	Closed	_____
Filled	-	Closed	_____
Partial	-	Closed	_____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature		Date	



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information - Please Print

First Name	Milagros	MI		Last Name	Rodriguez
E-mail Address	millie.rodriguez@Cbrealty.com				
Mailing Address	953 Salem Rd				
City	Union	State	NJ	Zip	07083
Telephone	(908) 838-1207				
Preferred Delivery:	Pick Up	US Mail	On-Site Inspect	Fax	E-mail
					X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Milagros Rodriguez Date 8/19/22

Payment Information

Maximum Authorization Cost	\$	
Select Payment Method		
Cash	Check	Money Order
Fees:	Letter size pages - \$0.05 per page	
	Legal size pages - \$0.07 per page	
	Other materials (CD, DVD, etc) - actual cost of material	
Delivery:	Delivery / postage fees additional depending upon delivery type.	
Extras:	Special service charge dependent upon request.	

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Re: 82 Bernard St. Block 1705 - Lot 8
Building dept copie of Existing Permits and Status
Information on oil tank, septic removal, decommission

AGENCY USE ONLY

Est. Document Cost	_____
Est. Delivery Cost	_____
Est. Extras Cost	_____
Total Est. Cost	_____
Deposit Amount	_____
Estimated Balance	_____
Deposit Date	_____

AGENCY USE ONLY

Disposition Notes	
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.	
In Progress	- Open
Denied	- Closed
Filled	- Closed
Partial	- Closed

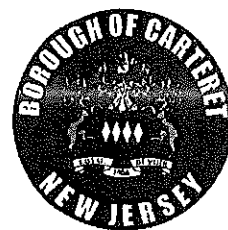
AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature		Date	



BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Shawntasia MI _____ Last Name Matthews

E-mail Address Charlottesmines0224@gmail.com

Mailing Address 4633 Woolcomber St

City Las Vegas State NV Zip 89115

Telephone 702-201-8517

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail ☒ X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature S. Matthews Date 8/20/2022

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash _____ Check _____ Money Order _____

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

100 Middlesex Ave-

1. Open/Active zoning code violations
2. Open/Active building code violations
3. Open/Active fire code violations
4. Planning Approvals such as approved Variances, Special/Conditional Use Permits, Planned Unit Development Approval Records and Site Plan Approval)
5. Certificate of Occupancy / Certificates of Completions / or Final Building Permit(s)-
 - A. Was a certificate of occupancy issued on the subject property?
 - B. If so, how many units were approved during issuance?
6. Please provide copies of any Open Building Permits

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

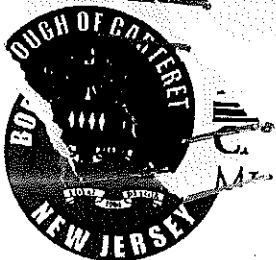
In Progress - Open _____
Denied - Closed _____
Filed - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost
Tracking #	_____	Total _____
Rec'd Date	_____	Deposit _____
Ready Date	_____	Balance Due _____
Total Pages	_____	Balance Paid _____
Records Provided _____		

Custodian Signature _____

Date _____



BOROUGH OF CARTERET

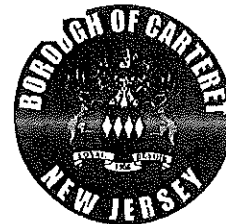
OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information - Please Print

First Name Paul MI Last Name Alders

E-mail Address paulalders@outlook.com

Mailing Address 160 Grove Street, Montclair, NJ 07042

City State Zip

Telephone FAX

Preferred Delivery: Pick Up US Mail On-Site Inspect Fax E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I **HAVE** **HAVE NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Paul Date 12/15/22

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Please let me know if there are any Building, Fire, or Zoning violations at 833 Roosevelt Avenue in Carteret.

Thank you

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress Open
Denied Closed
Filled Closed
Partial Closed

AGENCY USE ONLY

Tracking Information

Tracking #	Total
Rec'd Date <u> </u>	Deposit <u> </u>
Ready Date <u> </u>	Balance Due <u> </u>
Total Pages <u> </u>	Balance Paid <u> </u>

Records Provided

Custodian Signature

Date



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cook Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name	Siobhan	MI		Last Name	Vassallo
E-mail Address	svassallo@msmlaborlaw.com				
Mailing Address	838 Green Street, Suite 102				
City	Iselin	State	NJ	Zip	08830
Telephone	732-636-0040		FAX	732-636-5705	
Preferred Delivery:	Pick Up	US Mail	On-Site Inspect	Fax	E-mail X
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.					
Signature	/s/ Siobhan Vassallo			Date	08/16/2022

Payment Information

Maximum Authorization Cost	\$	
Select Payment Method		
Cash	Check	Money Order
Fees:	Letter size pages - \$0.05 per page Legal size pages - \$0.07 per page Other materials (CD, DVD, etc) – actual cost of material	
Delivery:	Delivery / postage fees additional depending upon delivery type.	
Extras:	Special service charge dependent upon request.	

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Monthly premium costs of health insurance benefits, including medical, prescription, vision and dental, as offered to the police department.

AGENCY USE ONLY

Est. Document Cost	_____
Est. Delivery Cost	_____
Est. Extras Cost	_____
Total Est. Cost	_____
Deposit Amount	_____
Estimated Balance	_____
Deposit Date	_____

AGENCY USE ONLY

Disposition Notes	
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.	
In Progress	- Open _____
Denied	- Closed _____
Filled	- Closed _____
Partial	- Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost
Tracking #	_____	Total _____
Rec'd Date	_____	Deposit _____
Ready Date	_____	Balance Due _____
Total Pages	_____	Balance Paid _____
Records Provided		
Custodian Signature _____		Date _____



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name TAJINDER MI MI Last Name SINGH
E-mail Address Tajinder6230@yahoo.com
Mailing Address 66 Victoria Way
City Sewaren State NJ Zip 07077
Telephone 732-762-6230 FAX _____
Preferred Delivery: Pick Up ☒ On-Site ☐ US Mail ☐ Inspect ☐ Fax ☐ E-mail ☐
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature Tajinder Singh Date 12/16/2022

Payment Information

Maximum Authorization Cost \$ _____
Select Payment Method
Cash ☐ Check ☐ Money Order ☐
Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.
Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

OPRA SEARCH to Determine if there are any open Permits, confirm all Permits were taken out and closed out. Check for any Fines or Penalties against the Property and other Issues.

67 Sharot St CARTERET NJ 07008

AGENCY USE ONLY

st. Document Cost _____
st. Delivery Cost _____
st. Extras Cost _____
tal Est. Cost _____
posit Amount _____
limited Balance _____
osit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

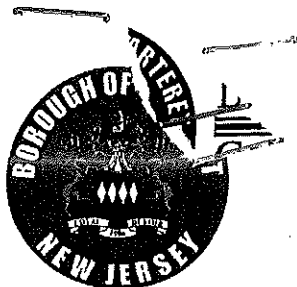
Tracking Information

Tracking #	Total
Rec'd Date	Deposit
Ready Date	Balance Due
Total Pages	Balance Paid

Records Provided

Custodian Signature

Date



BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Jose MI J Last Name Cardenas

E-mail Address josec@srnjteam.com

Mailing Address 357 Springfield ave

City Summit State NJ Zip 07901

Telephone 908-316-2141

FAX _____
Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I **HAVE / HAVE NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Jose Cardenas Date 12/21/2022

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash _____ Check _____ Money Order _____

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Open permits and/ or violations for property address 104 Washington Ave, Carteret NJ 08054

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____ Total _____
Rec'd Date _____ Deposit _____
Ready Date _____ Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

Custodian Signature _____

Date _____



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Jennifer MI J Last Name Light

E-mail Address jlight@trccompanies.com

Mailing Address 41 Spring Street Suite 102

City New Providence State NJ Zip 07974

Telephone 908-379-9873 FAX _____

Preferred Delivery: Pick Up _____ On-Site Inspect _____ Fax _____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Jennifer Light Date 8/23/2022

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash _____ Check _____ Money Order _____

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

All environmentally-related records for property located at 500 Roosevelt Avenue, Carteret Boro, NJ (Block: 503 Lot:2) including spills, violations, compliance, aboveground and underground storage tanks, septic systems, hazardous materials and petroleum products, wells, ownership and operator history, discharges, hazardous wastes, permits, historic fill material, sumps, process activities, transformers, all previous environmental and geotechnical reports, and all subsurface environmental sampling data.

Please copy the following departments on this request, to the extent that the department may maintain environmentally-pertinent documents listed above:

Engineering Department
Environmental Commission
Fire Division
Health Department
Public Works

Thank you!

AGENCY USE ONLY

Est. Document Cost _____

Est. Delivery Cost _____

Est. Extras Cost _____

Total Est. Cost _____

Deposit Amount _____

Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filed - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____	Total _____
Rec'd Date _____	Deposit _____
Ready Date _____	Balance Due _____
Total Pages _____	Balance Paid _____

Records Provided

Custodian Signature _____

Date _____



BOROUGH OF CARTERET

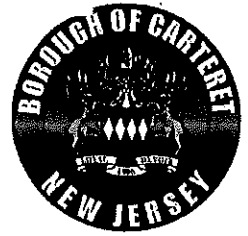
OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name	Heath	MI	D	Last Name	Doherty
E-mail Address	heath.doherty@gscs.carteret.com				
Mailing Address	580 Port Carteret Dr				
City	Carteret	State	NJ	Zip	07008
Telephone	732 664 4437		FAX		
Preferred Delivery:	Pick Up ☒	US Mail ☐	On-Site Inspect ☐	Fax ☐	E-mail ☐
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I <u>HAVE</u> / <u>HAVE NOT</u> been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.					
Signature				Date	11/8/22

Payment Information

Maximum Authorization Cost	\$	
Select Payment Method		
Cash	Check	Money Order
Fees:	Letter size pages - \$0.05 per page	
	Legal size pages - \$0.07 per page	
	Other materials (CD, DVD, etc) – actual cost of material	
Delivery:	Delivery / postage fees additional depending upon delivery type.	
Extras:	Special service charge dependent upon request.	

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Blueprints
layout
schematic
Maps
evacuation plans

Looking for the following.
As we do not have any on file.

580 Port Carteret.
Garden state cold storage.

Facilities Maintenance Manager

AGENCY USE ONLY

Est. Document Cost	_____
Est. Delivery Cost	_____
Est. Extras Cost	_____
Total Est. Cost	_____
Deposit Amount	_____
Estimated Balance	_____
Deposit Date	_____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress	-	Open	_____
Denied	-	Closed	_____
Filled	-	Closed	_____
Partial	-	Closed	_____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature		Date	



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Michele MI Last Name GomezE-mail Address Admin@TGTSells.comMailing Address 2355 Route 33City Robbinsville State NJ Zip 08691Telephone 848-203-2432FAX Preferred Delivery: Pick Up US Mail On-Site Inspect Fax E-mail ☒If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I **HAVE / HAVE NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.Signature Michele GomezeSIGNED verified
08/23/2022 12:12 PM EDT
X510-G014-UBR-JLRJDate 08/23/2022

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash Check Money Order Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

My name is Michele Gomez and I am the listing agent for the Sellers of 10 Spoganetz Avenue. I am requesting the following records on this property:

- 1) All open and closed permits for work done on the property. Building, Plumbing, Electrical, Mechanical, etc.
- 2) Any open or closed permits for the removal of an underground oil tank.
- 3) The latest Certificate of Occupancy on file.

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open
Denied - Closed
Filled - Closed
Partial - Closed

AGENCY USE ONLY

Tracking Information

Tracking # Total
Rec'd Date Deposit
Ready Date Balance Due
Total Pages Balance Paid

Records Provided

Custodian Signature Date



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information - Please Print

First Name MUHAMMAD MI K Last Name KHALID REHMANI

E-mail Address rehmani.khalid313@gmail.com

Mailing Address 71 Charles St

City Carteret State NJ Zip 07008

Telephone 929-293-3770 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail ☒

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [Signature] Date 8-26-22

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Roof Permit

71 Charles St.

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature _____

Date _____



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information - Please Print

First Name JOHN MI W. Last Name SPOGANETZ, ESQ.

E-mail Address mrl@jspoganetzlaw.com

Mailing Address 1 HOLMES STREET

City Carteret State NJ Zip 07008

Telephone 732-541-4300 FAX 732-541-8584

Preferred Delivery: Pick Up ☐ US Mail ☐ On-Site Inspect ☐ Fax ☐ E-mail ☒

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature JOHN W. SPOGANETZ, ESQ. Date 08/18/2022

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

RE: 30 MERCER STREET BLOCK 268 LOT 8

1. Opened and closed permits for work at the property.
2. Documents regarding any variance pending, granted or denied for the property.
3. Complaints filed by the municipality and other citations for code or other violations at the property.
4. Any pending or finalized assessments for the property
5. Tax Assessor records, tax card and tax valuations
6. Any deed easement or other restriction of record for the property
7. Inspections for environmental issues, water wells, sanitary disposal systems and underground fuel tanks for the property
8. The current Certificate of Occupancy for the property
9. Any document indicating if the property is in a flood zone
10. Any & all records reflecting the removal of an underground oil tank and/or change in the heating system

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filed - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____ Total _____
Rec'd Date _____ Deposit _____
Ready Date _____ Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

Custodian Signature

Date



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8925

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains Important information related to your rights concerning government records. Please read it carefully.

Requestor Information - Please Print

First Name Aylin MI _____ Last Name Reyes
E-mail Address aylin.jonglaw@gmail.com
Mailing Address 2092 Morris Ave
City Union State NJ Zip 07083
Telephone 908-688-1000 FAX _____
Preferred Delivery: Pick Up _____ On-Site Inspect _____ Fax _____ E-mail ☒
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature [Signature] Date 08/24/2022

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash _____ Check _____ Money Order _____

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Requesting all open and closed permits, violations, tax liens and oil tank documents from 1988-present.

PA: 100 Emerson St, Carteret, NJ 07008.

Block: 06702

Lot: 31

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____
Deposit Date _____

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature

Date



5 Marine View Plaza, Suite 401,
Hoboken, NJ 07030 | USA
(201) 876-9400
jsheld.com

August 24, 2022

Borough of Carteret

Re: Freedom of Information (FOI) Request
1100 Milik Street
Carteret, New Jersey
Block: 2702, Lot: 20

Dear Sir or Madam:

J.S. Held, LLC. (J.S. Held) has been retained to perform an environmental assessment of the referenced property. The purpose of this letter is to request any information which may be in your files in connection with the subject property. Please review your files for any of the following:

- Environmental violations, incidents, complaints, etc.
- Community Right to Know (RTK) Information
- Underground Storage Tank (UST) registrations, installation or removal permits
- Hazardous substance (including petroleum) discharges, leaks, spills, etc.
- Monitoring well, potable well, or other well installation records
- Industrial Site Recovery Act (ISRA) or ECRA correspondence:
- Groundwater contamination reports, including Classification Exception Areas (CEAs)
- Declaration of Environmental Restrictions (DERs)
- Hazardous Substance Inventories
- Air emission permits, records
- Solid waste or sanitary waste permits, records
- Previous Fire Incidences
- Septic system records
- Hazardous Waste Manifests and disposal documentation
- Groundwater or soil sample analyses data
- Copy of Subject Property Tax Map
- History of Building Construction, Previous Owners and Operators

Please forward this request to the following departments:

Health Department, Building Department, Tax Assessor, Fire Department

Thank you in advance for your help regarding this matter. In the event that there is a fee associated with obtaining this information, or if your office would rather make the file available for my review, please do not hesitate to call me at (201) 876-9400. Our fax number is (201) 876-9563.

Sincerely,

A handwritten signature in cursive script that reads 'Danielle Pomponio'.

Danielle Pomponio
Environmental Scientist II



BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM
61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Danielle MI Last Name Pomponio
E-mail Address dpomponio@jsheld.com
Mailing Address 5 Marine View Plaza, Suite 401
City Hoboken State NJ Zip 07030
Telephone 201-876-9400 FAX
Preferred Delivery: Pick On-Site
Up US Mail Inspect Fax E-mail X
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A.
2C:28-3, I certify that I **HAVE** **HAVE NOT** been convicted of any indictable offense under the laws of New
Jersey, any other state, or the United States.
Signature Danielle Pomponio Date 8/24/22

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - \$0.05
per page
Legal size pages - \$0.07
per page
Other materials (CD, DVD,
etc) – actual cost of material
Delivery: Delivery / postage fees
additional depending upon
delivery type.

Extras: Special service charge
dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Please see attached letter

interchange 12 Redev. Plan
Salt Meadow Redev.

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be
delivered in seven business days,
detail reasons here.

In Progress - Open
Denied - Closed
Filed - Closed
Partial - Closed

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	<u> </u>	Total	<u> </u>
Rec'd Date	<u> </u>	Deposit	<u> </u>
Ready Date	<u> </u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>

Records Provided

Custodian Signature

Date

OPEN PUBLIC RECORDS ACT REQUEST FORM

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Riley MI Last Name Yates
E-mail Address njamopra@gmail.com
Mailing Address 485 Route 1 South, Building E, Suite 300
City Iselin State NJ Zip 08830-3009
Telephone 732-259-5193 FAX
Preferred Delivery: Pick Up US Mail On-Site Inspect Fax E-mail X
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature Riley Yates Date Sept. 1, 2022

Payment Information

Maximum Authorization Cost \$ 100.00

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

The following request is made under OPRA and the Common Law right of access.

The records I seek relate to the police department. I am requesting all documents responsive to this request from the time frame of Jan. 1, 2019, through year-to-date 2022.

Specially, I am seeking:

Any and all settlement agreements, releases and payments that resolved misconduct claims against the police department and/or its officers or administrators, including but not limited to claims of excessive force, civil rights violations, sexual harassment, false arrest and similar claims.

By way of further clarification, I am not seeking documents or information evidencing settlements or payments related to worker's compensation claims, health insurance settlements or payouts, or similar non-misconduct claims.

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY


Otero Jennifer

From: FOIA@Buildzoom <foia@buildzoom.com>
Sent: Tuesday, September 06, 2022 10:16 AM
To: Clerk Office
Subject: Request: Building Permit Records

To whom it may concern,

My name is Janine Rugas and I'm contacting you on behalf of BuildZoom to request a copy of your building permit records for Carteret borough, New Jersey.

Can you please provide us with a report of all building permits processed by your department since Aug 3, 2022 to present?

BuildZoom analyzes permit data to identify real estate patterns and trends. We integrate building permit data with information from other public sources to provide a localized understanding of historical, current, and future development activity for government forecasts and university research. We also provide free data to homeowners in your area to help connect them to qualified contractors.

Please include any fields that your permitting system tracks. This includes but is not limited to:

- o Permit Number
- o Applied/Issued Dates
- o Work Address
- o Permit Type
- o Permit Status
- o Description of the work being done
- o Contractor and Architect Details
- o Job Valuations

The preferred file type is .xls/.csv but we also accept .txt, .pdf, .xlsx, etc.
We greatly appreciate your help and thank you in advance for your assistance!

Regards,
Janine Rugas

--
BuildZoom

A better way to remodel
548 Market St. Suite 14554
San Francisco, CA, 94104
www.buildzoom.com





BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM
61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name	Rebecca	MI		Last Name	Seitzmeyer
E-mail Address	rseitzmeyer@wbengineering.com				
Mailing Address	1101 Wootton Pkwy, Suite 1050				
City	Rockville	State	MD	Zip	20852
Telephone	301-279-6319		FAX		
Preferred Delivery:	Pick Up	US Mail	On-Site Inspect	Fax	E-mail ☒
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.					
Signature				Date	

Payment Information

Maximum Authorization Cost \$	
Select Payment Method	
Cash	Check Money Order
Fees:	Letter size pages - \$0.05 per page Legal size pages - \$0.07 per page Other materials (CD, DVD, etc) – actual cost of material
Delivery:	Delivery / postage fees additional depending upon delivery type.
Extras:	Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

For ShopRite Carteret - Wakefern #511 at 801 Roosevelt Ave, Carteret, NJ 07008,
Please provide approved site plan drawings with approved parking calculations/tabulations
Please provide approved site plan, landscape plan, or approved land use plan drawings with approved landscape, buffering, tree, and permeable area calculations/tabulations.

This may come from the Zoning Board.

AGENCY USE ONLY

Est. Document Cost	_____
Est. Delivery Cost	_____
Est. Extras Cost	_____
Total Est. Cost	_____
Deposit Amount	_____
Estimated Balance	_____
Deposit Date	_____

AGENCY USE ONLY

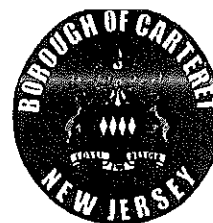
Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.	
In Progress	- Open _____
Denied	- Closed _____
Filled	- Closed _____
Partial	- Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature		Date	



BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM
61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Brian MI S Last Name Ridger
E-mail Address bridger@bbgrees.com
Mailing Address _____
City New York State NY Zip 10016
Telephone 646 327-9165 FAX _____
Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail ☒
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature [Signature] Date 9/2/2022

Payment Information

Maximum Authorization Cost \$ _____
Select Payment Method
Cash _____ Check _____ Money Order _____
Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.
Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Phase 1 ESA Request
100 Middlesex Avenue
See attached for details

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____
Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here

In Progress - Open _____
Denied - Closed _____
Filed - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature		Date	



BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM
61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Virginia MI A Last Name Weeks

E-mail Address: vmeeks@igxsolutions.com

Mailing Address 2214 University Park Dr. Suite

City Okemos State MI Zip 48864

Telephone 248-224-5879 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site _____ Inspect _____ Fax _____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I **HAVE / HAVE NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Virginia A. Meeks Date 9/6/22

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

I'm writing to submit a public records request for a list of all Grants that Carteret, NJ, has applied for between 2019 and 2022. Please identify the funding source, date of application, outcome and the amount received if the Grant was awarded to Carteret, NJ.

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

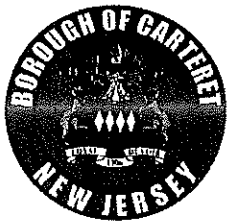
In Progress - Open
Denied - Closed
Filled - Closed
Partial - Closed

AGENCY USE ONLY

Tracking Information		Final Cost
Tracking #	_____	Total
Rec'd Date	_____	Deposit
Ready Date	_____	Balance Due
Total Pages	_____	Balance Paid
Records Provided		_____

Custodian Signature

Date



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Stephen MI Last Name LaFalce

E-mail Address steve@njvaluation.com

Mailing Address 71 Brakenbury Dr

City Toms River State NJ Zip 08757

Telephone 732-439-0168

FAX

Preferred Delivery: Pick Up US Mail On-Site Inspect Fax E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I **HAVE / HAVE NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Stephen LaFalce

Date 09/06/2022

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

I am performing an appraisal on the following single-family property and would like to request a copy of the Property Record Card:

10 Spoganetz Avenue
Block: 2402
Lot: 7

Thank you.

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open
Denied - Closed
Filled - Closed
Partial - Closed

AGENCY USE ONLY

Tracking Information

Tracking #	<u> </u>	Total	<u> </u>
Rec'd Date	<u> </u>	Deposit	<u> </u>
Ready Date	<u> </u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>

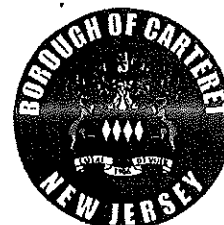
Records Provided

Custodian Signature

Date



BOROUGH OF CARTERET
OPEN PUBLIC RECORDS ACT REQUEST FORM
61 Cooke Avenue, Carteret, NJ 07008
Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
clerkoffice@carteret.net www.Carteret.net



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Ashley MI MI Last Name Molson
E-mail Address ashley@molsonlawfirm.com
Mailing Address 191 Mount Horeb Road
City Warren State NJ Zip 07059
Telephone 201-987-0030 FAX 617-752-3756
Preferred Delivery: Pick Up US Mail On-Site Inspect Fax ☒ E-mail ☒
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature Ashley Molson Date September 7, 2022

Payment Information

Maximum Authorization Cost \$
Select Payment Method
Cash ☐ Check ☐ Money Order ☐
Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.
Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

My client is looking to purchase 110 Carteret Avenue, Carteret Boro, NJ 07008
Also known as block 6604 lot 3.

Please send us the following by fax or email, whichever is more convenient for you:

- a. Complete permit history (open and closed) dating back 50 years if possible and if available
b. Any notices of current or pending violations with code enforcement or zoning; dating back 50 years if possible and if available
c. Any Board of Health Complaints; dating back 50 years if possible and if available
d. Any documents pertaining to an oil tank or environmental remediation - incidents, cases, reports, and any other records; if applicable
e. Any documents/records that will indicate the number of bedrooms and bathrooms listed for the above-mentioned property address. *Prop Card*
f. Request of confirmation of no current, pending or outstanding assessments
- Provide confirmation that there are no current, pending, or contemplated tax assessments or violations on this property from any recent or past work performed by the current owner, or any prior owner. If there are such items, please provide details and available documents.
- Advise whether this request has or will trigger any department (including the building or construction dept. and/or the tax office) to review old, recent, or current photos of the property that could result in findings of violations and/or tax assessments. If so, please provide details and available documents.

Please do not hesitate to contact me by phone or email should you require additional information.

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____
Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature		Date	