

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 M Last Name YANUARIA
 E-mail Address byanuaria@bbgres.com
 Mailing Address BBG REAL ESTATE SERVICES STAMFORD CT 9 WEST BROADST
 City STAMFORD State CT Zip 06902 SUITE 460
 Telephone MOBILE (213) 507-6480 FAX _____
 Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On-Site Inspect ☐ Fax ☐ E-mail byanuaria@bbgres.com

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 09/09/2022

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.

PLEASE SEE ATTACHED SHEET FOR BUILDING RECORDS BEING REQUESTED.
 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		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature _____		Date _____	

State of New Jersey GOVERNMENT RECORDS
REQUEST FORM

Important Notice

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Requestor Information – Please Print

First Name Harry MI C Last Name Senopoulos
E-mail Address DSHCRCO@gmail.com
Mailing Address PO Box 524
City Plainsboro State NJ Zip 08536
Telephone 609.750.1800 FAX 215.970.5055
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 Electronically Date 9/9/2022

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.
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we are preparing for the Carteret tax sale.

We are requesting a detailed tax receipts report in Edmunds from Jan 1, 2022 to the present. (3 + quarters) We request this report from jurisdictions that uses Edmunds. A sample report of what you sent in prior years is enclosed for reference. Thanks

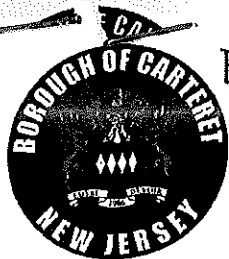
Regards,

DSHC

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY



BOK

BOROUGH OF CARTERET

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Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



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Requestor Information – Please Print

First Name	Angela	MI		Last Name	Marra
E-mail Address	Admin@newjerseyresidence.com				
Mailing Address	198 US 9 Highway Suite 102				
City	Manalapan	State	NJ	Zip	07726
Telephone	732-829-2448		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	Angela Marra		Date		09/11/2022

dotloop verified
09/12/22 7:53 AM SGT
07XL-TVGG-QHRN-OPMD

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.

Any open and closed construction permits, c/o for all work.
Address: 7 Sumutka Ct, Carteret, NJ 07008
Block #: 4005
Lot #: 4
Any open and closed construction permits, c/o for all work.
Any zoning violations.
Any tax liens and tax sale certifications, unpaid taxes, water, or sewer.
Any municipal or health violations on the property, outside fines, judgments, and liens on the property.
A copy of any surveys on record.
Date Range: 1969 - 2021

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



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Carmela Pogorzelski, Borough Clerk

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Requestor Information - Please Print

First Name	Navdeep	MI		Last Name	Sandhu
E-mail Address	nsandhu@bus@gmail.com				
Mailing Address	194 Pleasant Valley Road				
City	Morganville	State	NJ	Zip	07751
Telephone	732-887-8734		FAX	732-834-9674	
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.	

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Need Resulation when
125 Washington Ave.
Bld. was approved
Carteret NJ 07008

AGENCY USE ONLY

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

AGENCY USE ONLY

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Filled	-	Closed	_____
Partial	-	Closed	_____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
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Ready Date	_____	Balance Due	_____
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Requestor Information - Please Print

First Name SARA MI B Last Name HODL

E-mail Address hodl@brilliantenvironmental.com

Mailing Address 534 Whitesville Road

City Jackson State NJ Zip 08527

Telephone 732-818-3380 ext 108

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 SARA HODL

Date 09/12/2022

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.

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I am completing an environmental assessment of the property located at:

1375 Roosevelt Avenue (Block 2503, Lots 3, 4, 5 & 6), Carteret, Middlesex County, NJ

I am interested in any documents on file for the site from the following departments and ranging in date from historic (1960s) to Present (2022):

Construction or Building Dept permits or violations (looking for all permits, but specifically any permits or records that reference ASTs or USTs)

The tax card for the property/property record card

Any potential records or violations on file with the local health department (specifically citing any releases of haz material or substances)

Any potential releases of hazardous material that may be on file with the Fire Department

Please feel free to reach out for clarification. I understand historic records may not be available.

Thank you, Sara

AGENCY USE ONLY

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

Deposit Date _____

AGENCY USE ONLY

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In Progress ☐ Open _____
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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



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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



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Requestor Information – Please Print

First Name Megha MI K Last Name Patel
E-mail Address megha@lawmvp.com
Mailing Address 1549 Finnegans Lane, North Brunswick, NJ 08902
City _____ State _____ Zip _____
Telephone 732-305-0241 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 Megha K. Patel, Esq. Date 9/8/2022

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.

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Please provide all permits, approvals, violations and any other documentation on record for the following property:

32 Saint Ann Street, Carteret, NJ 07008

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
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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 _____

Otero Jennifer

From: Christina Hogue <Chogue@remine.com>
Sent: Thursday, September 08, 2022 2:51 PM
To: Clerk Office
Subject: OPRA - Carteret Borough NJ Q3-4 2022 Tax Roll

Good afternoon,

Please accept this email as my OPRA request to receive a Tax Roll file for all parcels in the Borough for the 2022 Tax Year for the final two quarters (you sent us Q1-2 in July). Please provide this file in electronic format such as XLS, CSV, TXT, or MDB. I am requesting a file that shows the tax amount billed for each parcel quarterly by due date including the ad valorem tax amount, tax exemptions, special taxes (such as Fire, school, or library, etc), entity taxes, and adjustments. Please include the parcel number, owner name, situs and mailing address, assessed value, and legal description.

Please let me know if there is a cost associated with this request or if you have any questions.

Thank you and have a great day,
Christy Hogue
Associate Data Acquisition Analyst
1660 International Dr. Ste. 600 | McLean VA 22102
(571) 356-9892 | chogue@remine.com

Remine Mobile is now available in the App Store and Google Play!

-----Original Message-----

From: Christina Hogue
Sent: Monday, July 11, 2022 4:18 PM
To: Otero Jennifer <oteroj@carteret.net>
Subject: RE: OPRA 22-203

Thank you. I will check next month for the remaining two quarters.

Have a great day!

Christy Hogue
Associate Data Acquisition Analyst
1660 International Dr. Ste. 600 | McLean VA 22102
(571) 356-9892 | chogue@remine.com



BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

Telephone: 732-541-3800 Fax: 732-541-8928

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

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Requestor Information - Please Print

First Name Amy MI P Last Name Burr, Esq.
 E-mail Address admin@burr.lawgroup.com
 Mailing Address 100 Bingham Ave
 City Rumson State N.J. Zip 07760
 Telephone 732-7611-1435 FAX 732-907-1825
 Preferred Delivery: Pick Up ☐ US Mail ☐ On-Site Inspect ☐ Fax ☐ E-mail ☒

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Signature Amy Burr Esq. Date 9/8/22

Payment Information

Maximum Authorization Goal \$

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.

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43 Saint Ann StBlock: 5402Lot: 4

Open + closed permits
Variance Applications
Violation Notices

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

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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

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Requestor Information - Please Print

First Name Miguel MI Last Name Rodriguez
E-mail Address LMCARVALHO@yahoo.com
Mailing Address 24 Bernath St. Co
City Carteret State NJ Zip 07008
Telephone 908-967-0438 FAX
Preferred Delivery: Pick Up ☒ US Mail ☐ On-Site ☐ 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 Linda Covatta 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.

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all open and closed permits
for 24 Bernath St Carteret
and any oil tank issues
block 3802
lot 28

AGENCY USE ONLY

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

Deposit Date

AGENCY USE ONLY

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In Progress - Open
Denied - Closed
Filled - 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



BOROUGH OF CARTERET

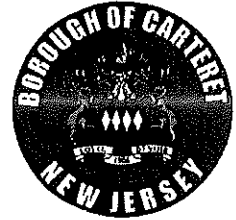
OPEN PUBLIC RECORDS ACT REQUEST FORM

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

Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



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Requestor Information – Please Print

First Name	Carlos	MI		Last Name	Sanchez
E-mail Address	1@sanchez.lawyer				
Mailing Address	Sanchez Law, 216 North Avenue East				
City	Cranford	State	NJ	Zip	07016
Telephone	908.557.5630		FAX	908.379.3057	
Preferred Delivery:	Pick Up	US Mail	On-Site	Fax	E-mail
			Inspect		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				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.

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Please provide property records for 77 Pujaski Avenue, Carteret, NJ including permit history and violations. Thank you.

AGENCY USE ONLY

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

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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	

Otero Jennifer

From: Temba HomeResearch <gradstudentresearchaid@gmail.com>
Sent: Tuesday, September 13, 2022 2:51 PM
To: Clerk Office
Subject: Re: OPRA REQUEST APPLICATION

Good Day,

The OPRA request seeks access to the following records:

-Municipal OPEN property tax liens, within time frame of December 31st, 2015 to January 1st, 2021;
(Please include Sewer Liens and indicate if included);

-All Municipal addresses having WATER SHUT OFF for 5 days or longer, within the time frame of December 31st, 2015 to September 21st, 2022;. If not worrisome, kindly indicate the length of water shut off;

Hopefully, we're not daunting: a CSV or PDF of all above requested data (it's for our compassionate-project).

We appreciate it.

Regards.

On Sun, Sep 11, 2022 at 4:35 PM Temba HomeResearch <gradstudentresearchaid@gmail.com> wrote:
Good Day,

Please Kindly assist with the above Subject, See attached file below.
Thank you, I appreciate it.

Best Regards.



OPEN PUBLIC RECORDS ACT REQUEST FORM

61 COOKE AVENUE, CARTERET, NEW JERSEY 07008
 Telephone - 732-641-3600 FAX - 732-641-6920
www.carteret.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.

First Name Cheryl MI Last Name Mount
 E-mail Address permtoc@carteretnj.com

Mailing Address Po Box 2202

Telephone 800-925-6085 FAX 800-604-9480

Preferred Delivery: ☐ Pick up ☐ On-Site inspection ☒ 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 Cheryl Mount Date 09/15/2022

Maximum Authorization Cost \$

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 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 compromised.

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

From 9/1/2022 to 9/14/2022

Report to include if possible:

Permit #'s & Dates

Description of work being done

Contractor information & Owner name

AGENCY USE ONLY

1. Document 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,

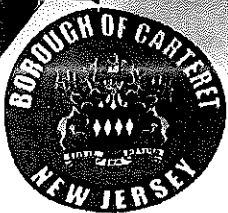
In Progress - Open _____
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AGENCY USE ONLY

Tracking Information

Tracking # _____ Total _____
 Total Pages _____ Records Provided _____

Final Cost



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 Susan MI B Last Name Kennedy
E-mail Address Susan.Kennedy@iir.com
Mailing Address 25A Vreeland Rd Ste 100
City Floham Park State NJ Zip 07932
Telephone 973 422-9800 ext. 0014 FAX n/a
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 Susan B Kennedy Date 9/16/22

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.

trying to confirm parking approved for Apt Complex
We are conducting work for the Borough of Carteret and are in need of the Site Plan Resolutions for the following:
① B: 302 L: 2, 3 & 4 - Roosevelt Ave - Meridian II - Built 2009
② B: 17306 L: 1.01 - 101 Roosevelt Ave - Gateway at Carteret - Built 2009
③ B: 6704 L: 6.03 & 6.03 Ave 1X - 29 Washington Ave - 29 Washington Ave Apts - Built 2019
④ B: 302 L: 6 - 180-182 Roosevelt Ave - The Lexington - Built 2019
⑤ B: 6704 L: 3 on the Washington Ave - 21 Washington Ave Apts - Built 2022
⑥ B: 6502 L: 1 - 36 Washington Ave - Washington Lofts - Built 2022
Kindly Expedite + Enjoy the Weekend. Thank you!
Please call with any questions! Susan

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	

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Requestor Information – Please Print

First Name Stephen MI Last Name LaFalceE-mail Address steve@njvaluation.comMailing Address 71 Brakenbury DrCity Toms River State NJ Zip 08757Telephone 732-439-0168FAX 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 09/18/2022

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.

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

46 Charlotte St
Block: 3005
Lot: 13

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
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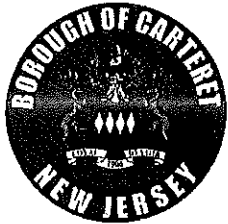
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Filled - Closed
Partial - Closed

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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

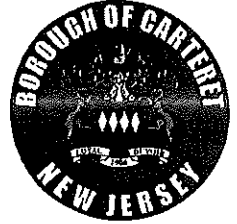
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Requestor Information – Please Print

First Name Lacey MI Last Name Jock

E-mail Address Lacey.Jock@assetmc.com

Mailing Address 12841 Fitzwater Drive

City Nokesville State VA Zip 20181

Telephone 703-594-3100 ext. 104 FAX 703-594-2187

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 Lacey Jock Date 9/19/2022

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.

We are requesting a copy of one of the following Edmunds reports, utilizing the specified parameters:

1. Project Transaction Audit Trail by Project ID
 - Range of Accounts: First to Last (Construction related accounts only)
 - Transaction Date: 01/01/2000 – 06/28/2022 (Even if the Edmunds Software was not in use yet)
 - Project Status: ActiveTo include the following key points of information: Project ID, Date, Description, Developer, Category, Begin Balance, and Project Balance
2. Budget Transaction Audit Trail
 - Range of Accounts: First to Last (Construction related accounts only)
 - Transaction Date Range: 01/01/2000 – 06/28/2022 (Even if the Edmunds Software was not in use yet)To include the following key points of information: Account No., Date, Transaction Data/Comment, Description (Name of Depositor), Trans Amount, Begin Balance and Current/Budget Balance

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
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In Progress - Open
Denied - Closed
Filed - 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

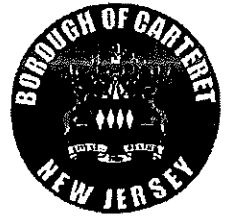
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Requestor Information - Please Print

First Name JOHN MI W. Last Name SPOGANETZ, ESQ.
E-mail Address mri@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 9/20/2022

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.

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RE: PORT CARTERET DRIVE BLOCK 304 LOTS 1 & 2.01

1. ANY AND ALL RECORDS FOR ENVIRONMENTAL CLEANUP OF LOTS 1 & 2.01 IN BLOCK 304 OF THE BOROUGH OF CARTERET TAX MAP OWNED BY CYPRUS AMAX

2. ANY AND ALL SITE PLANS, SUREVYES, PERMITS FOR BLOCK 304 LOTS 1 & 2.01

AGENCY USE ONLY

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

Deposit Date _____

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Total Pages _____ Balance Paid _____

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Date



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Requestor Information – Please Print

First Name Dahlia MI Last Name MoyalE-mail Address dahlia.moyal@gmail.comMailing Address 251 Main StCity Metuchen State NJ Zip 08840Telephone 201-978-4351FAX 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 Dahlia Moyaldotloop verified
09/20/22 10:49 AM EDT
ISLH-9DNZ-AHIO-403EDate

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
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All open and closed permits on 33 Liberty St, Carteret

Any violations on the property

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Records Provided Custodian Signature Date



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Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net

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Requestor Information – Please Print

First Name DAWN MI L Last Name POST
E-mail Address dawn.post@arcadis.com
Mailing Address 63 Washington Street
City Carteret State NJ Zip 07008
Telephone 973-222-8308 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 Dawn Post Date 9/21/2022

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
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NEED OWNER INFORMATION FOR BLOCK 7704, LOT 1. I WORK FOR ARCADIS BUT WE ARE WORKING FOR THE USMR PROJECT. I WAS INFORMED THAT THIS PROPERTY WAS SUB-DIVIDED. I AM LOOKING FOR CURRENT OWNERSHIP / BLOCK AND LOT 1 FOR THE SWALE ON BLOCK 7704, LOT 1.

AGENCY USE ONLY

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

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Custodian Signature _____

Date _____



BOROUGH OF CARTERET

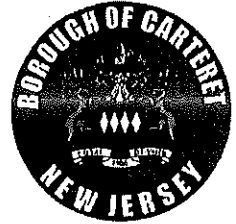
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Requestor Information – Please Print

First Name	Lizette	MI		Last Name	Pagan
E-mail Address	Lizettepagan@kw.com				
Mailing Address	481 Memorial Pkwy				
City	Metuchen	State	NJ	Zip	08840
Telephone	732-687-0604		FAX		
Preferred 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	Lizette Pagan			Date	09/27/2022

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.	

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Property Address: 19 Post Blvd Carteret - Lot # 7 / Block # 903

- 1- Looking for any Open / Closed permits for the last 15 years
- 2- Any underground UST / oil tanks permit, taken out or filed
- 3- Any violations on the property
- 4- Any liens on the property
- 5- Copy of Property Tax card

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Est. Document Cost	_____
Est. Delivery Cost	_____
Est. Extras Cost	_____
Total Est. Cost	_____
Deposit Amount	_____
Estimated Balance	_____
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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	09/27/2022

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	
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Extras:	Special service charge dependent upon request.	

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RE: 283 WASHINGTON AVENUE

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
11. Any Zoning/Planning Board Resolutions

AGENCY USE ONLY

Est. Document Cost	_____
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BOROUGH OF CARTERET

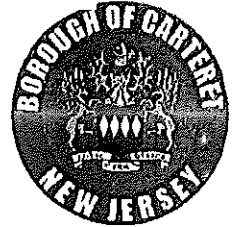
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Requestor Information - Please Print

First Name MICHAEL MI R. Last Name MORTON JR
E-mail Address MMORTON@BERTEINC.COM
Mailing Address 700 BLAIR ROAD
City CARTERET State NJ Zip 07008
Telephone 862-810-9611 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 9/28/2022

Payment Information

Maximum Authorization Cost \$ _____
Select Payment Method
Cash ☐ Check ☐ Money Order ☐
Fees: Letter size pages - \$0.05 per page
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I WORK FOR BERTE INC AT THE ABOVE ADDRESS.
NEED A COPY OF OUR CERTIFICATE OF OCCUPANCY.

AGENCY USE ONLY

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

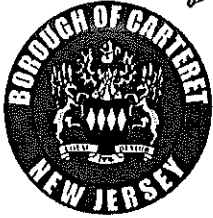
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Records Provided			
Custodian Signature		Date	



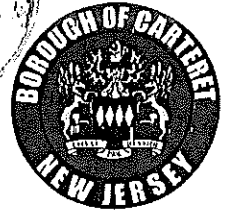
BOROUGH

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Requestor Information – Please Print

First Name	BRAYAN	MI		Last Name	FERNANDEZ CIPRIAN
E-mail Address	ELPURE@LIVE.COM				
Mailing Address	6 LIBERTY ST				
City	CARTERET	State	NJ	Zip	07008
Telephone	516-851-7295	FAX			
Preferred Delivery:	Pick Up	US Mail	On-Site Inspect	Fax	E-mail
					ELPURE@LIVE.COM
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 / HAVE NOT</u> been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.					
Signature	BRAYAN FERNANDEZ			Date	09/29/2022

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.

ANY OPEN PERMITS, ANY INFORMATION ABOUT UNDERGROUND OIL TANK PRE CLOSING PROPERTY LOCATED AT 35 LOUIS ST , CARTERET NJ 07008 BLOCK 5003 LOT 13

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	_____
Denial	-	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 Magalix MI _____ Last Name Gonzalez
E-mail Address jaycob2411@gmail.com
Mailing Address 5302 Bristol Station Court
City Carteret State NJ Zip 07008
Telephone (732) 829-0405 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 Magaly Gonzalez Date 9/22/2022

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 need the ordinance of the water department and of the sewage department. I also need to know how often do you bill tenants for water and sewage. It is for Bristol Station Court apartments.

Thank You.

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

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

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 _____

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



BOROUGH OF CARTERET

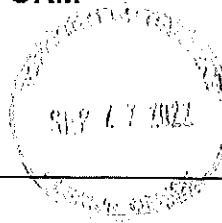
OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue, Carteret, NJ 07008

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Carmela Pogorzelski, Borough Clerk

clerkoffice@carteret.net www.Carteret.net



Important Notice

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Requestor Information - Please Print

First Name Fnu Mi _____ Last Name Anjubal
E-mail Address Anjubal91433@gmail.com
Mailing Address 46 N Whittier St Carteret NJ 07008
City Carteret State NJ Zip 07008
Telephone 9089928922 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 Fnu Anjubal Date 09/27/22

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 request for my Property Survey copy. Because I lost it.

(Kaniwal Jit.)

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

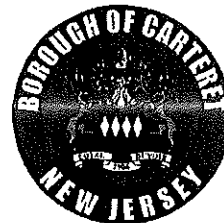


BOROUGH OF CARTERET

OPEN PUBLIC RECORDS ACT REQUEST FORM

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Telephone: 732-541-3800 Fax: 732-541-8925
Carmela Pogorzelski, Borough Clerk
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Important Notice

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Requestor Information – Please Print

First Name	Bill	MI		Last Name	Donohue
E-mail Address	bill@preferredindustrialproperties.com				
Mailing Address	90 Anderson Street Hackensack NJ 07601				
City		State		Zip	
Telephone	201.287.1000		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	Bill Donohue			Date	9/26/2022

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 would like to obtain all records related to the yearly tax assessments for 760 Port Carteret Blvd (Block 102 Lot 5.01) since 2014. This includes the amounts themselves, together with the methodology used and all assessor's notes and spreadsheets and any and all other supporting documentation used in arriving at the valuation of the land and the valuation of the improvements.

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

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

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 _____

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

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Requestor Information – Please Print

First Name Leonard MI C Last Name Schiro

E-mail Address Ischiro@msmlaborlaw.com

Mailing Address 838 Green St., Suite 102

City Iselin State NJ Zip 08830

Telephone 732-636-0040

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 Leonard C. Schiro

Date 09/29/2022

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.

COBRA rates for all health insurance

AGENCY USE ONLY

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

Deposit Date _____

AGENCY USE ONLY

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