



350 Hudson Ave, Twp. of Washington, NJ 07676-4799, Tel: 201-664-44256 Fax 201-664-8281
Office of the Township Clerk, Susan Witkowski



December 12, 2024/OPRA 655

Concerned Citizen
opra+request-69495-f1e67cf2@requests.opramachine.com

Concerned Citizen,

The Township of Washington received your Open Public Records Act (OPRA) request on December 2, 2024. The official Records Custodian, Susan Witkowski, received your OPRA request on December 2, 2024. As such, the seven (7) business day deadline to respond to your request is December 11, 2024. This response to your request is being provided to you on the 8th day after custodian's receipt of said request.

The table below identifies the records that being denied in whole or in part as well as the legal basis for each denial, as is required by N.J.S.A. 47:1A-6.

List of all records responsive to OPRA request (include the number of pages for each record).	List of all records provided, <u>with redactions</u> , or denied in their entirety.	If records are disclosed with redactions, give a general nature description of the redactions.	If records were denied in their entirety, give a general nature description of the record.	List the legal explanation and statutory citation for the denial of access to records in their <u>entirety</u> or <u>with redactions</u> .
N/A	Please send any and all records regarding the volunteer and/or employment of Benjamin P. Ritter (Ben Ritter) with your municipality from 2014 until the present.	N/A	Denied because the request for "any and all records re: the volunteer and/or employment of Benjamin Ritter": Request is invalid as overbroad and therefore should be denied. "Any and all reports" fails to request specific identifiable government records and would require the custodian to conduct research. Under OPRA, agencies are required to disclose only identifiable government records not otherwise	<u>N.J.S.A. 47:1A-5(g)</u>

			exempt. It does not allow open-ended searches of an agency's files. See <u>MAG Entm't, LLC v. Division of Alcohol Beverage Control</u> , 375 N.J. Super. 534 (App. Div. 2005); <u>N.J.S.A. 47:1A-5(g)</u> .	
Twp. of Washington Volunteer Fire Dept. Membership Application-4 pages NJS Firemen's Assn. Application for Membership-1 page Oath of Office-1 page Training certificates-16 pages Clothing allowance/SAFER Grant monies received as noted-1 page	Please send a copy of the entire personnel file of Benjamin P Ritter (Ben Ritter) and any/all training records, licensures, or credentials in your possession from 2014 until present	Personal identifying information	Denied as <u>N.J.S.A. 47:1A-10</u> exempts personnel records from disclosure	<u>N.J.S.A. 47:1A-10</u>
Please refer to the above-mentioned information provided	Records relating to the hiring, discharge, performance, awards, credentials, Salary history, benefits, information such as leave balances and usage of dates, date of hire, and any and all paystubs during the time of Benjamin Ritter's volunteer or employment with your municipality from 2014 until the present	Personal identifying information	Denied as <u>N.J.S.A. 47:1A-10</u> exempts personnel records from disclosure	<u>N.J.S.A. 47:1A-10</u>
N/A	Please send as well any and all records pertaining to any background investigation done on Benjamin P Ritter (Ben Ritter) from 2014 until the present	N/A	Denied as <u>N.J.S.A. 47:1A-10</u> exempts personnel records from disclosure	<u>N.J.S.A. 47:1A-10</u>

* A list of OPRA's exemptions is attached to this response letter.

If your request for access to a government record has been denied or unfilled within the seven (7) business days required by law, you have a right to challenge the decision by the Township of Washington to deny access. At your option, you may either institute a proceeding in the Superior Court of New Jersey or file a complaint with the Government Records Council ("GRC") by completing the Denial of Access Complaint Form. You may contact the GRC by toll-free telephone at 866-850-0511, by mail at P.O. Box 819, Trenton, NJ, 08625, by e-mail at grc@dca.state.nj.us, or at their web site at www.state.nj.us/grc. The Council can also answer other questions about the law. All questions regarding complaints filed in Superior Court should be directed to the Court Clerk in your County.

Sincerely,

Susan Witkowski

Susan Witkowski, RMC
Township of Washington
201-664-4425
switkowski@twpofwashington.us

OR-655

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

From: Concerned Citizen <opra+request-69495-f1e67cf2@requests.opramachine.com>

Sent: Monday, December 2, 2024 8:03 AM

To: Town Clerk <townclerk@twpofwashington.us>

Subject: OPRA request - Benjamin P Ritter

RECEIVED

DEC - 2 2024

TOWNSHIP CLERK

Caution: External E-mail

Dear Washington Township (Bergen),

Please accept this electronic request for public records made under OPRA and the common law right of access. I am not required to fill out an official form or use a particular software platform to submit my request per NJSA 47:1A-6(f), which states that an email from a requestor including all of the information required on the adopted form shall suffice in place of a completed form as a valid government record request.

I HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

I WILL NOT use the requested government records for a commercial purpose.

I AM NOT seeking records in connection with a legal proceeding.

Records requested:

Please send any and all records regarding the volunteer and/or employment of Benjamin P. Ritter (Ben Ritter) with your municipality from 2014 until the present.

Please send a copy of the entire personnel file of Benjamin P Ritter (Ben Ritter) and any/all training records, licensures, or credentials in your possession from 2014 until present

Records relating to the hiring, discharge, performance, awards, credentials, Salary history, benefits, information such as leave balances and usage of dates, date of hire, and any and all paystubs during the time of Benjamin Ritter's volunteer or employment with your municipality from 2014 until the present

Please send as well any and all records pertaining to any background investigation done on Benjamin P Ritter (Ben Ritter) from 2014 until the present

My preferred delivery method for response(s) to this request is by E-mail as attachments. Please confirm you have received this request. If you are not the custodian of records, please forward my request to that person and provide their email address to me for future reference.

Yours faithfully,

Concerned Citizen



TOWNSHIP OF WASHINGTON VOLUNTEER FIRE DEPARTMENT MEMBERSHIP APPLICATION

A \$15.00 application fee is to be returned along with this membership application. Please also enclose a 5-year driver's abstract from the New Jersey Department of Motor Vehicles. Upon appointment, the application fee will be applied towards your first year membership dues. Checks should be made out to Township of Washington Volunteer Fire Department.

Date: 9/30/19

Please print or type:

Everything MUST be filled in completely. Please do not leave any empty spaces. Please print legibly.

Name: Ritter Benjamin Praugh SSN: _____
(Last) (First) (Middle)

Address: 699 Jacquelyn Ford Twp. of Washington, NJ Home phone: _____

Cell phone: _____ E-mail address: _____

Length of time at current residence: 17 years Age: 18

Date of Birth: 1/01 Height: 5' 7" Weight: 155

Eye color: Brown Hair color: Brown

Driver's License #: _____ State: NJ Class: D

Marital status: Single Spouse's name: N/A

Initials: BR

Occupation: Full time student, Demarest Farms

Employer Name: Jason DeGise

Employer Address: 244 Wierimas Road, Hillsdale, NJ

Phone Number: _____ Contact person: Jason DeGise

Hours of employment: 7-4 Days: Saturday & Sunday

Have you ever been **arrested** for a criminal offense? No If yes, please describe in detail. Include date, location, and disposition:

Have you ever been **convicted** of a criminal offense? No If yes, please describe in detail. Include date, location, and disposition:

Have you ever been convicted of any motor vehicle offenses? (i.e. DWI, etc...) If yes, please describe in detail. Include date, location, and disposition:

N/A

Have you been or are you currently a member of a career or volunteer fire department? Y (N)

If yes, please indicate department: _____

*Initial here to allow WTFD to contact Department Chief: _____
(initials)

Length of service: _____ Chief's name: _____

Chief's contact number: _____

Have you had any fire service training? Yes If yes, please enclose any relevant documentation.

List any other previous emergency services experience and/or training you have received (i.e. CPR training, etc...) :

Firefighter 1, CPR training

Are you currently, or have you ever been a member of another emergency services organization? No If yes, please include where, years of service, and highest rank held:

Are you currently prescribed any medications? No If yes, please list:

Do you have any illness, condition, or special needs that the Twp. Of Washington Volunteer Fire Department should be aware of? No If yes, please list:

Emergency Contact Person: Elizabeth Ritter -

Timothy Ritter -

List two personal references, other than relative. (Include address and phone number)

1. Pete Neary 276 West Place Twp of Washington
(Name) (Address) (Phone number)

2. Glenn Ender 21 Johnson Place Twp of Washington
(Name) (Address) (Phone number)

Please list all previous addresses including dates:

N/A

The information provided will not be released to any other outside party or agency, and will not be used for any other purposes other than for information regarding membership consideration to the Township of Washington Volunteer Fire Department. This membership application will be held in a secure file created for you by the Chief of the Township of Washington Volunteer Fire Department.

By signing this application, I hereby affirm that the information provided is true and complete. I understand that I will be subject to immediate dismissal if these statements are untrue. I understand that prior to appointment I will have to take and pass a physical examination including screening for illegal drug use at a Township of Washington approved physician and at the Township of Washington Volunteer Fire Department's expense. Upon appointment, I will follow and comply with all regulations and by-laws set forth by the Township of Washington Volunteer Fire Department.

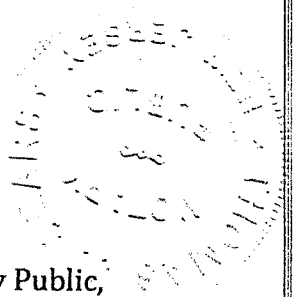
Signature: *Benjamin P. Ritter* Print name: Benjamin Ritter

Date: 9/30/19

State of New Jersey
County of Berben

Thomas J Sears
ID# 2008358
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 1/30/2021

[Signature]



Sworn and subscribed before me, Thomas J. Sears, Notary Public,
(Name of Notary Public)
this 30 day of September, 2019 by Benjamin Ritter.
(Day) (Month) (Year) (Name of applicant)

ASSOCIATION #	COMPANY #	LINE #
FOR STATE OFFICE USE ONLY		

New Jersey State
Firemen's Association
Application for Membership

Form 100 - REV 5/19

Date 10/28/19

Twp. of Washington 455 Twp of Washington Bergen
Relief Association Name Assoc. Number Municipality County

Twp of Washington Fire Department
Fire Company Name Fire Department Name

Applicant Name Benjamin P Ritter
First Middle Initial Last Suffix

Home Address 699 Jacquelyn Road Township of Washington 07676 18
Street Municipality Zip Code # of years

Date of Birth 1/1/2001 Birth Place Phoenix, Arizona SS # (REQUIRED)

Applicant Phone Number Applicant Email Address

Have you ever applied to be a member of the NJSFA? ☐ Yes ☒ No If yes, when where

If you have a line number with another Relief Association: ☐ Stay with previous Association ☐ Move records to new Association

Signature of Applicant (witnessed by a Notary Public): [Signature]

State of New Jersey, County of BERGEN

On 28 October 2019 before me, Jeffrey D Siconolfi, Notary Public in and for said county, personally appeared

Benjamin P Ritter (signer) who has satisfactorily identified himself/herself as the signer to the above referenced document.

My Commission Expires: 2/1/22 [Signature] JEFFREY D SICONOLFI
Notary Public Signature Notary Public - State of New Jersey
My Commission Expires Feb 1, 2022

[Signature] OWEE P. [Signature] 451
Signature of Relief Association Secretary Signature of Chief of Department

Type of Firefighter the Applicant will be: ☐ Career (full time paid) ☐ Volunteer

Municipal/Fire District Approval: I hereby certify that this applicant was admitted to active membership in the Department and has been approved by the governing body of Township of Washington on the 25 day of November, 20 19.

Signature of Municipal Clerk/Board of Fire Commissioners: [Signature]

- Application portion should be completed by Applicant - Typed or Printed ONLY
- Application must have the Physical Test Record completed by a New Jersey Licensed Physician, Nurse Practitioner or Physician's Assistant
- The completed Application and Physical Test Record must be returned to the Local Relief Secretary
- The Local Relief Secretary shall review the application for completeness, attain the proper signatures, and forward to the NJSFA State office.

The Applicant is not a member of the NJSFA until the completed **ORIGINAL** application is received **AND** approved at the NJSFA State office.



350 Hudson Ave, Twp. of Washington, NJ 07676-4799, Tel: 201-664-44256 Fax 201-664-8281

OATH OF OFFICE

State of New Jersey

County of Bergen

I, BENJAMIN P. RITTER do solemnly swear that I will support the Constitution of the United States and the Constitution of the State of New Jersey, and that I will bear true faith and allegiance to the same and to the governments established in the United States and in this State under the authority of the people and that I do solemnly swear that I will faithfully, impartially and justly perform all the duties as a member of the Volunteer Fire Department in the Township of Washington, in the County of Bergen, in the State of New Jersey according to the best of my ability so help me God.

Signature of Officer

Subscribed and Sworn To
Before me this 25th day of November, 2019

Susan Witkowski,

Township Clerk/Notary (Seal)

Susan Witkowski
Notary Public
New Jersey

My Commission Expires 2/27/2023
No. 2297260

BASIC LIFE SUPPORT

**BLS
Provider**



**American
Heart
Association®**

Ben Ritter

**has successfully completed the cognitive and skills
evaluations in accordance with the curriculum of the
American Heart Association Basic Life Support
(CPR and AED) Program.**

Issue Date

8/13/2019

Recommended Renewal Date

08/2021

Training Center Name

Bergen County Vo-Tech EMS Training Center

Instructor Name

Douglas Lavery

Training Center ID

NJ00550

Instructor ID

05060086890

Training Center Address

281 Pascack Road
Paramus NJ 07652 USA

eCard Code

195506040841

**Training Center Phone
Number**

(201) 967-0751

QR Code

To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to www.heart.org/cpr/mycards.

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COUNTY OF BERGEN
DEPARTMENT OF PUBLIC SAFETY
LAW AND PUBLIC SAFETY INSTITUTE • POLICE, FIRE & EMS ACADEMIES
281 Campgaw Road • Mahwah, N.J. 07430
(201)785-5700 • FAX (201)785-6036

James J. Tedesco III
County Executive

Ralph Rivera, Jr.
Director of Public Safety

Richard Blohm
Director of Law & Public Safety Institute

Date: 07/12/19

Fire Department: Washington Township Fire Department

Student Name: Ben Ritter

Class Number: 548

Lessons Missed: None

Homework / Quizzes Missed: None

Mid Term Test Score: N/A

Final: N/A

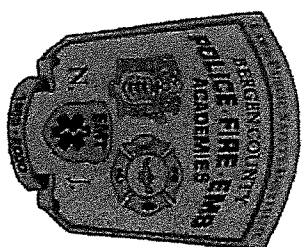
Comments: Student is on time and participates

A handwritten signature in black ink, appearing to read "Scott J. Russo", is written over the comments section.

Scott J. Russo
Fire Instructor



COUNTY OF BERGEN
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY EDUCATION
LAW & PUBLIC SAFETY INSTITUTE
FIRE — POLICE — EMS ACADEMIES



This Certificate is Awarded to

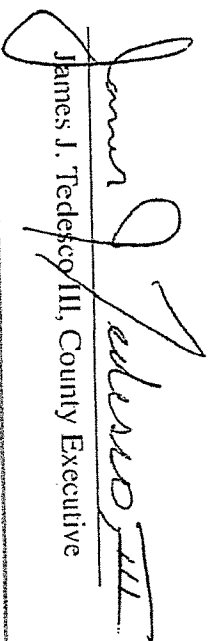
Benjamin Ritter

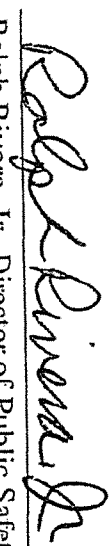
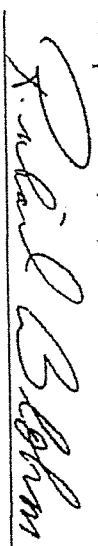
For Satisfactorily Completing a Course Entitled

I-200

on this date

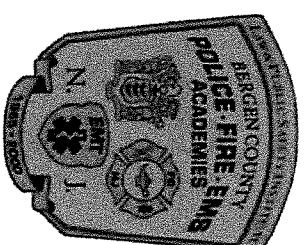
4/28/2023


James J. Tedesco III, County Executive


Ralph Rivera, Jr., Director of Public Safety

Richard Blohm, Director LPSI



COUNTY OF BERGEN
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY EDUCATION
LAW & PUBLIC SAFETY INSTITUTE
FIRE — POLICE — EMS ACADEMIES



1965 – 50 Years of Serving Those Who Serve – 2015

This Certificate is Awarded to

Ben Ritter

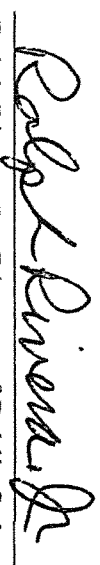
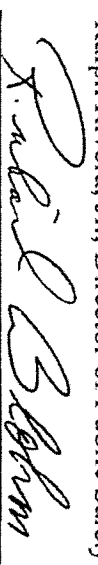
For Satisfactorily Completing a Course Entitled

IMS-I-100

on this date

10/9/2019


James J. Tedesco III, County Executive


Ralph Rivera, Jr., Director of Public Safety

Richard Blohm, Director LPSI



COUNTY OF BERGEN
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY EDUCATION
LAW & PUBLIC SAFETY INSTITUTE
FIRE — POLICE — EMS ACADEMIES



1965 — 50 Years of Serving Those Who Serve — 2015

This Certificate is Awarded to

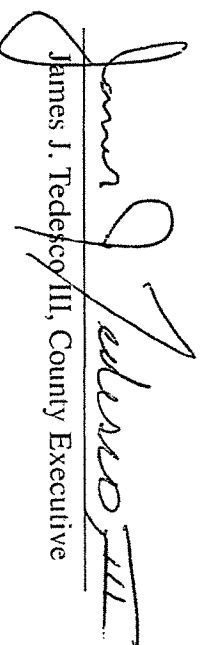
Ben Ritter

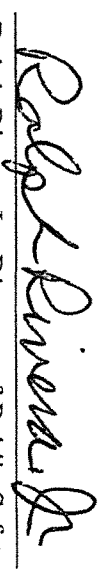
For Satisfactorily Completing a Course Entitled

Firefighter One 2019

on this date

10/9/2019


James J. Tedesco III, County Executive


Ralph Rivera, Jr., Director of Public Safety


Richard Blohm, Director LPSI

THE INTERNATIONAL

ASSOCIATION OF FIRE FIGHTERS

A L W A Y S O N T H E F R O N T L I N E

Through accreditation by the
National Board on Fire Service Professional Qualifications
certifies that

Benjamin Ritter

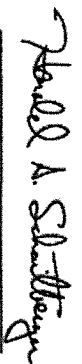
is internationally certified in

Operations and Mission-Specific PPE and Product Control

as prescribed by the National Fire Protection Association's
1072 Standard for Hazardous Materials/Weapons of Mass Destruction
Response Personnel Professional Qualifications
2017 Edition, Chapters 5, 6.2 and 6.6



1443765
Pro Board
Number


HAROLD A. SCHAITBERGER
General President


EDWARD A. KELLY
General Secretary-Treasurer

Funded all or in part by:
National Institute of Environmental Health Sciences
National Institute for Occupational Safety and Health
Department of Transportation
Department of Homeland Security



Class Dates: 08/05/2019 - 08/07/2019



COUNTY OF BERGEN
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY EDUCATION
LAW & PUBLIC SAFETY INSTITUTE
FIRE – POLICE – EMS ACADEMIES



1965 – 50 Years of Serving Those Who Serve – 2015

This Certificate is Awarded to

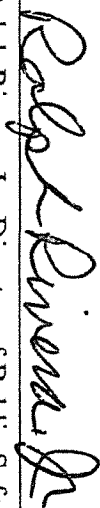
Ben Ritter

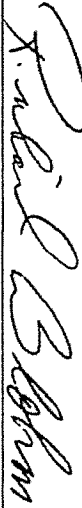
For Satisfactorily Completing a Course Entitled

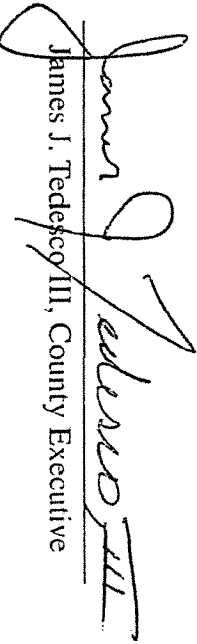
Weapons of Mass Destruction - Awareness

on this date

10/9/2019


Ralph Rivera, Jr., Director of Public Safety


Richard Blohm, Director LPSI


James J. Tedesco III, County Executive



COUNTY OF BERGEN
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY EDUCATION
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FIRE — POLICE — EMS ACADEMIES



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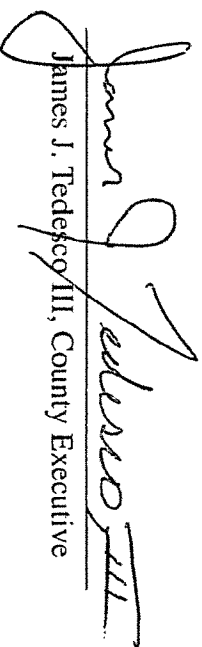
Ben Ritter

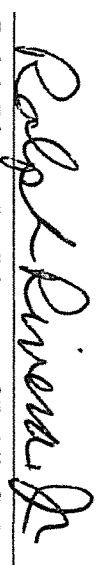
For Satisfactorily Completing a Course Entitled

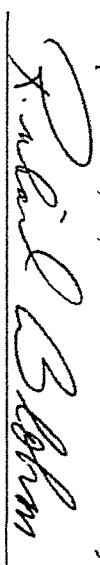
Hazardous Materials Operational: Level 2

on this date

10/9/2019

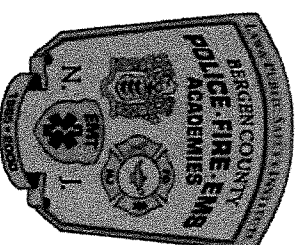

James J. Tedesco III, County Executive


Ralph Rivera, Jr., Director of Public Safety


Richard Blohm, Director LPSI



COUNTY OF BERGEN
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY EDUCATION
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FIRE — POLICE — EMS ACADEMIES



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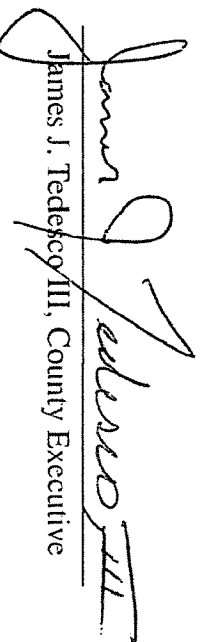
Ben Ritter

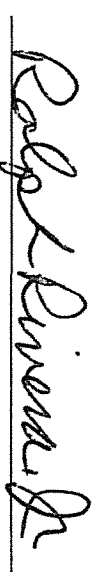
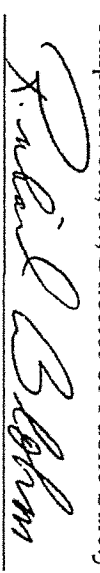
For Satisfactorily Completing a Course Entitled

Hazardous Materials Awareness: Level 1

on this date

10/9/2019


James J. Tedesco III, County Executive


Ralph Rivera, Jr., Director of Public Safety

Richard Blohm, Director LPSI



New Jersey

Department of Community Affairs

Division of Fire Safety



This Certificate is Awarded to

BENJAMIN RITTER

for the completion of the course

ICS I-200 (12 HRS)

on

APRIL 28, 2023



CEU Credit: 1.00 Technical

Certification No. 194113

Dear BENJAMIN RITTER,

Congratulations on successfully completing the fire service training program entitled ICS I-200 (12 HRS).

Let me commend you on your professional attitude and desire to provide a valuable service to your community. The Division of Fire Safety staff joins me in congratulating you on having demonstrated your competency in this specialty.

I trust you will be placing the above course completion certificate on your wall with justifiable pride. Please do not hesitate to contact the Division of Fire Safety, Office of Training and Certification at (609) 777-3552 if we may further assist your educational needs.

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.



State of New Jersey
Department of Community Affairs
Division of Fire Safety



Hereby Issues To
BENJAMIN RITTER (194113)

The Following Certification As
**HAZMAT: OPERATIONAL
COMPETENCIES 6.6**

07/11/2023

Issue Date

STATE

Accreditation Standard

Lieutenant Governor Sheila Y. Oliver
Commissioner

194113
DFSID Number

STATE OF NEW JERSEY
DIVISION OF FIRE SAFETY

This is to certify that: BENJAMIN RITTER
Has been certified as: HM:OPS 6.6

07/11/2023
Issue Date

PLEASE DETACH HERE

If your certification card is lost please notify

Office of Training & Certification
Division of Fire Safety
P.O. Box 809
Trenton, NJ 08625-0809

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State of New Jersey
Department of Community Affairs
Division of Fire Safety



Hereby Issues To
BENJAMIN RITTER (194113)

The Following Certification As
**HAZMAT: OPERATIONAL
COMPETENCIES 6.2**

07/11/2023

Issue Date

STATE

Accreditation Standard

Lieutenant Governor Sheila Y. Oliver
Commissioner

STATE OF NEW JERSEY
DIVISION OF FIRE SAFETY

This is to certify that: **BENJAMIN RITTER**
Has been certified as: **HM-OPS 6.2**

194113
DFSID Number

07/11/2023
Issue Date

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Division of Fire Safety
P.O. Box 809
Trenton, NJ 08625-0809

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State of New Jersey
Department of Community Affairs
Division of Fire Safety



Hereby Issues To
BENJAMIN RITTER (194113)

The Following Certification As
**HAZARDOUS MATERIALS:
OPERATIONS CORE**

07/11/2023

Issue Date

STATE

Accreditation Standard

Lieutenant Governor Sheila Y. Oliver
Commissioner

STATE OF NEW JERSEY
DIVISION OF FIRE SAFETY

This is to certify that: BENJAMIN RITTER
Has been certified as: HM:OPERATIONS

07/11/2023
Issue Date

194113
DFSID Number

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Office of Training & Certification
Division of Fire Safety
P.O. Box 809
Trenton, NJ 08625-0809

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State of New Jersey
Department of Community Affairs
Division of Fire Safety



Hereby Issues To
BENJAMIN RITTER (194113)

The Following Certification As
INCIDENT MANAGEMENT LEVEL 1

07/12/2023

Issue Date

STATE

Accreditation Standard

Lieutenant Governor Sheila Y. Oliver
Commissioner

STATE OF NEW JERSEY
DIVISION OF FIRE SAFETY

This is to certify that: BENJAMIN RITTER
Has been certified as: IML1

07/12/2023
Issue Date

194113
DFSID Number



PLEASE DETACH HERE

If your certification card is lost please notify

Office of Training & Certification
Division of Fire Safety
P.O. Box 809
Trenton, NJ 08625-0809

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State of New Jersey
Department of Community Affairs
Division of Fire Safety



Hereby Issues To
BENJAMIN RITTER (194113)

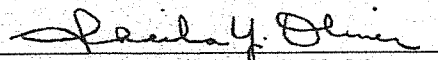
The Following Certification As
HAZARDOUS MATERIALS:
AWARENESS

07/11/2023

Issue Date

STATE

Accreditation Standard


Lieutenant Governor Sheila Y. Oliver
Commissioner

STATE OF NEW JERSEY
DIVISION OF FIRE SAFETY

This is to certify that: **BENJAMIN RITTER**
Has been certified as: **HM: AWARENESS**

07/11/2023
Issue Date

194113
DFSID Number



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State of New Jersey
Department of Community Affairs
Division of Fire Safety



Hereby Issues To
BENJAMIN RITTER (194113)

The Following Certification As
FIREFIGHTER 1

07/11/2023

Issue Date

NFPA 1001, EDITION 2013
Accreditation Standard



02766915

Lieutenant Governor Sheila Y. Oliver
Commissioner



NJ039627

STATE OF NEW JERSEY DIVISION OF FIRE SAFETY	This is to certify that: BENJAMIN RITTER Has been certified as: FF1	194113 DFSID Number	NJ039627
		07/11/2023 Issue Date	02766915

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Division of Fire Safety
P.O. Box 809
Trenton, NJ 08625-0809

Ben Ritter

Range of Dates: First to 12/11/24

All Purchase Orders

P.O. No.	Order Date	Description	P.O. Total	Void Total	Status
20-01631	12/02/20	FIRE - CLOTHING ALLOWANCE 2020	675.00	0.00	CLOSED
21-01710	10/13/21	SAFER GRANT DISTRIBUTION 2021	742.50	0.00	CLOSED
21-01938	11/29/21	FIRE - CLOTHING ALLOWANCE 2021	725.00	0.00	CLOSED
22-01843	08/23/22	SAFER GRANT DISTRIBUTION 2022	640.09	0.00	CLOSED
22-02725	12/15/22	CLOTHING ALLOWANCE 2022	725.00	0.00	CLOSED
23-01717	08/29/23	SAFER GRANT DISTRIBUTION 2023	501.69	0.00	CLOSED
23-02554	12/26/23	CLOTHING ALLOWANCE 2023	725.00	0.00	CLOSED
Grand Total:			4,734.28	0.00	