



MIDDLESEX BOROUGH
OPEN PUBLIC RECORDS ACT REQUEST FORM

1200 Mountain Avenue
Middlesex, New Jersey 08846
732-356-7400, Ext 238
Linda Chismar, Middlesex Borough Clerk
www.middlesexboro-nj.gov

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 _____ MI _____ Last Name _____
E-mail Address _____
Mailing Address _____
City _____ State _____ Zip _____
Telephone _____ 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 – cost(s) incurred by Agency
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. Requests for "any and all" are generally considered too broad and may be returned for clarification. 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.

See Attached
(N. Balcar)

BOROUGH USE ONLY

Est. Records Fees _____
Est. Postage Fees _____
Est. Add'l Fees _____
Est. Total Fees _____
Deposit Amount _____
Estimated Balance _____
Deposit Date _____

BOROUGH USE ONLY

Disposition Notes
If any part of request cannot be delivered in (7) seven business days, requestor must be notified (See reverse side)

Completed - 100 %
Partially Completed - _____ %
Denied - _____ %

W. Balcar
Division Representative Signature
03/14/24
Date Request Completed

BOROUGH USE ONLY

Tracking Information		Final Cost	
Tracking #	<u>010-24</u>	Total	<u>0</u>
Rec'd Date	<u>2/26</u>	Deposit	_____
Ready Date	<u>3/4</u>	Balance Due	_____
	<u>6</u>	Balance Paid	_____
Total Pages	_____		
* Records Provided			
<u>22-013559-CAD (Redacted)</u>			
<u>22-013559-CRASH Report</u>			
<u>2 MVR Recordings (Redacted)</u>			
<u>2 BWC Recordings (Redacted)</u>			
Custodian Signature		Date	

* Records provided via Safefleet cloud.com 03/14/24