City of Hoboken
Custodian of Records
GOVERNMENT RECORDS REQUEST FORM
94 Washington Street
Hoboken, NJ 07030
Phone: 201-420-2000 ext. 2005 Fax: 201-420-2085
Email: opra@hobokennj.gov | Website: www.hobokennj.gov

OPRA REQUEST COVER SHEET

Original Date: 5/15 **Follow Up Date:** 5/21

To: Mario Paturno **Department:** C/C

The attached OPRA Request was received by the City Clerk. Records responsive are due from your department on or before the due date listed herein. If you require additional time you **MUST** inform the Clerk's office immediately upon receipt of this packet. Failure to follow the requirements of OPRA and the procedural requirements enacted by the City of Hoboken to assure compliance with OPRA may subject you to discipline up to and including removal as well as penalties from the State of New Jersey Government Records Council.

Log # 25-1240 **Due to Clerk:** 5/21 **Date due to Requestor:** 5/13

Clerk Notes:

- ○ Responsive records are attached and provided (# of pages ____)
- ○ No responsive records exist in this department.
- ○ Responsive records are privileged and/or Confidential for the following reasons:

  _____
- ○ The Department requires more time to respond until _____ because _____
- ○ Other: _____

IMPORTANT

X _____

Signature of Department Responder

_____

Date

PLEASE ATTACH RESPONSIVE RECORDS TO THIS DOCUMENT AND RETURN BOTH TO THE CITY CLERKS' OFFICE ON OR BEFORE THE DUE DATE LISTED HEREIN

25-1240
CC

City of Hoboken
OPEN PUBLIC RECORDS ACT REQUEST FORM
94 Washington St, Hoboken, NJ 07030, USA
(Phone) (201) 420-2000 & (Fax) 201 420-2085
opra@hobokennj.gov

5/21

RECEIVED
2025 MAY 15 AM 9:00
CITY CLERK
HOBOKEN, NJ 07030

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: Monica MI: F Last Name: Gimlett

E-mail Address: Monica.Gimlett@gmail.com

Mailing Address: 720 Willow Ave, Apt 5

City: Hoboken State: NJ Zip: 07030

Telephone: 9174391961 FAX: ____

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

Under penalty of N.J.S.A. 2C:28-3, I certify that

1. I ☐ ***HAVE*** / ● ***HAVE NOT*** been convicted of any indictable offense under the laws of New Jersey, any other state, or ● United States;
2. I, or another person, ☐ ***WILL*** / ● ***WILL NOT*** use the requested government records for a commercial purpose;
3. I ☐ ***AM*** / ● ***AM NOT*** seeking records in connection with a legal proceeding.

Signature: eSigned via SeamlessDocs.com *Monica F Gimlett* Key: 720edd04-3d6f-4a1c-b7ea-89d2e20b... Date: 05-14-2025

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.

Note: ***If you confirmed above that the records sought are in connection with a legal proceeding, identification of that proceeding is required below.***

Requesting all records of permits, certificates, or other documents related to 720 Willow Avenue, Unit 5, Hoboken, NJ 07030. I would like a record of all city documentation related to this property, which I own.

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 ____

Marybeth Rotondi

From: Hoboken OPRA <noreply@seamlessdocs.com>
Sent: Wednesday, May 14, 2025 8:17 PM
To: OPRA
Subject: You have a new OPRA submission from Monica Gimlett Monica.Gimlett@gmail.com
Attachments: Model_OPRA_Request_Form__2024__AxGlAMxlMrYsfv5a.pdf

New Submission

You have a new OPRA submission. Please process accordingly.

Form name	Model OPRA Request Form (2024)

Submission Details:

First Name
Monica

MI
F

Last Name
Gimlett

E mail Address
Monica.Gimlett@gmail.com

Mailing Address
720 Willow Ave, Apt 5

City
Hoboken

State
NJ

Zip
07030

Telephone
9174391961

Indictable Offense
Have Not

Commercial Purpose
Will Not

Legal Proceeding
Am Not

Record Request Information
Requesting all records of permits, certificates, or other documents related to 720 Willow Avenue, Unit 5, Hoboken, NJ 07030. I would like a record of all city documentation related to this property, which I own.

Preferred Delivery
Email

View the submission and any attachments by following the link below and using this unique access code: 2FxZSWRyIGKtklCj

View Submission

Log in to view in Submission Manager

City of Hoboken | 94 Washington Street, Hoboken, NJ 07030