Burlington City

OPEN PUBLIC RECORDS ACT REQUEST FORM

Date Received: 11/17/2025

Tracking Number: OPRA-Req-25-0102

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

Name: S Marquis

Address:

City: State: NJ Zip:

Telephone: Fax:

Email: xxxxxxxxxxxxxxxxxxxxxxxxxxx@xxxxxxxx.xxxxxxxxxxx.xxx

Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On Site Insp ☐ 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 the 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: Date:

Payment Information

Maximum Authorized Cost 0

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: Specialservice 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.

☐ **Includes Common Law Request** Location: 821 Salem Road Block/Lot: 65/2

Records requested:

To the Custodian of Records,

I am requesting access to the following records:

1. All open, closed, expired, or outstanding permits associated with the property at:

821 Salem Road, Burlington, NJ

(including construction, electrical, plumbing, fire, zoning, or any related permit types)

2. For each permit, please include (if available):

- Permit number
- Type of permit
- Date opened/issued
- Status (open/closed/expired)
- Inspection history

- o Notes on any requirements needed for closure or compliance

I am requesting these records in electronic format (PDF or email attachments).

If any portion of this request is unclear or requires clarification, please contact me before denying the request. If certain records are exempt, please provide the non-exempt portions.

Thank you for your assistance.

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.

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 reason 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 _____

Bal. Due _____

Bal. Paid _____

Records Provided:

_____ _____

Custodian Signature: Date: