



SOUTH JERSEY TRANSPORTATION AUTHORITY
OPEN PUBLIC RECORDS ACT (OPRA) REQUEST FORM
Farley Service Plaza, P.O. Box 351 Hammonton, N.J. 08037
(609) 965-6060 • 800-658-0606 • Fax (609) 965-7315 • Email: opra@sjta.com
www.sjta.com

Print Form

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information - All shaded fields must be complete prior to submission.

First Name	Kathy	MI		Last Name	Lyons
Company Name	Construction Journal				
Email	k.lyons@constructionjournal.com				
Mailing Address	400 SW 7th Street				
City	Stuart	State	FL	Zipcode	34994
Telephone	800-785-5165 x442		Fax	800-581-7204	
Preferred Delivery:	Pick Up ☐	US Mail ☐	On-Site Inspection ☐	Fax ☐	Email ☒
If you are requesting records containing personal information, please check 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	Kathy Lyons		Date	11/10/17	

Payment Information

Maximum Cost Authorized By Requestor:	\$
Select Payment Method:	
Cash ☐ Check ☐ Money Order ☐	(No Credit Card Payments)
Fees:	Letter Sized Page @ \$.05 Legal Sized Page @ \$.07
Electronic Transfer -	FREE OF CHARGE (i.e. records sent via email and fax)
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 have a copy of the list of firms submitting Letters of Interest for the following:
Intercept Lot Development Opportunity (letters were due 8/30/17)

CJ # 1471114



AGENCY USE ONLY

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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 _____