

AGENCY NAME HERE



OPEN PUBLIC RECORDS ACT REQUEST FORM

Agency Address

Agency Telephone Number & Fax Number

Agency e-mail address

Name of Agency Custodian

2017-129



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 DANIEL MI D Last Name FISHER

E-mail Address _____

Mailing Address 1372 MOUNTAIN ROAD

City EASTAMPTON State N.J. Zip 08060

Telephone 609-536-7740 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 Daniel D Fisher Date 10-19-2017

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.

TO THE TAX COLLECTOR;
 DEAR SIR/MS: I WOULD LIKE A COPY OF THE
 TAX SALES LIST FOR 2009 AND 2010 FOR PROPERTIES
 THAT HAD NOT PAID THEIR TAXES
 THANK YOU,
 Daniel D Fisher

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 # _____ Total _____
 Rec'd Date _____ Deposit _____
 Ready Date _____ Balance Due _____
 Total Pages _____ Balance Paid _____

Records Provided _____

Custodian Signature _____

Date _____