

OPEN PUBLIC RECORDS ACT REQUEST FORM

BOROUGH OF RED BANK

90 Monmouth Street Red Bank, NJ 07701
 PH: 732-530-2740 FAX: 732-530-2757
 pborgh1@redbanknj.org
 Pamela Borghi, Municipal Clerk



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 <u>JOHN</u>		Last Name <u>WARD</u>		MI <u>I</u>
E-mail Address <u>johnward@redbanknj.org</u>				
Mailing Address <u>PO BOX 6683</u>				
City <u>RED BANK</u> State <u>NJ</u> Zip <u>07701</u>				
Telephone <u>732 996 5475</u>		FAX _____		
Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ Inspect		On-Site ☐ 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 <u>HAVE</u> / <u>HAVE NOT</u> been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.				
Signature <u>[Signature]</u>		Date <u>10.19.17</u>		

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.

All correspondence with NJ Department of Transportation regarding a requested or proposed traffic signal at Bodman Place and Riverview Avenue, RED BANK.

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	
Total	_____
Deposit	_____
Balance Due	_____
Balance Paid	_____
Records Provided	_____
Tracking #	_____
Rec'd Date	_____
Ready Date	_____
Total Pages	_____
Custodian Signature	_____
Date	_____