#146

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name William MI F Last Name Nehls

E-mail Address iwmnehls@aol.com

Mailing Address IWM Inc., 135 Lincoln Boulevard

City Middlesex State NJ Zip 08846

Telephone 732-271-1490 FAX 732-271-1458

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

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 _____ Date 11/15/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1491 Route 38 **Block** 85.01 **Lot** 1

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

X **Other** Permits and records regarding underground storage tanks, hazardous materials, spills and septic systems

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

Paula L Kosko
Custodian Signature

11.17.17
Date

11/17/17 emailed & Closed

#145

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name PATRICIA MI A Last Name HARRINGTON

E-mail Address paringdale@aol.com

Mailing Address 7 N. MAIN STREET, SUITE A - c/o ARMANDO V. RICCIO, ESQUIRE

City MEDFORD State NJ Zip 08055

Telephone 609-654-9629 FAX 609-654-9629

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail XX

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 Patricia A. Harrington Date NOVEMBER 14, 2017

Revised 8-2016 ps

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium requested. Also, please note that our 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.

Specific Property Information: Address _____ Block _____ Lot _____

_____ Review Public Records (Specify plans, maps, contracts, department) _____

_____ Copy of Minutes (specify board, date, topic, or other identifying information) _____

_____ Ordinance or Resolution (specify date, number, or other identifying information) _____

_____ Municipal Lien Search/200 Foot List _____

XX Other SEE ATTACHED

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

Paula L Kosko
Custodian Signature

11 17 17
Date

11/21/17 emailed + closed

#144 copy

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name RYAN MI _____ Last Name N

E-mail Address HABBAHOW191@GMAIL.COM

Mailing Address _____

City _____ State _____ Zip _____

Telephone _____ FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

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 _____ Date _____

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address _____ **Block** _____ **Lot** _____

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

X **Other** NAME AND HOURLY RATES FOR THE AFFORDABLE HOUSING ATTORNEY - SPECIAL COUNSEL FOR 2016 & 2017

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

Paula L. Kosko 11/7/17
Custodian Signature **Date**

11/17/17 emailed

143
copy

Paula Kosko

From: Anna Evans [opra+request-82-08d98816@requests.opramachine.com]
Sent: Tuesday, November 14, 2017 12:34 PM
To: OPRA requests at Hainesport Township
Subject: Open Public Records Act request - Name of, and documents pertaining to, electric supplier authorized in Res. 2017-148-11

Follow Up Flag: Follow Up
Flag Status: Flagged

Dear Hainesport Township,

This is a request for public records made under OPRA and the common law right of access. I certify under penalty of NJSA 2C:28-3 that I have not been convicted of an indictable offense. Please acknowledge receipt of this message.
Records requested:

The name of the third party electricity supplier authorized in Resolution 2017-147-11 The proposal and/or contract with said supplier Copies of any written correspondence between Hainesport Township (staff and elected officials) and said supplier

Yours faithfully,

Anna Evans

Please use this email address for all replies to this request:
opra+request-82-08d98816@requests.opramachine.com

Is acosnoski@hainesporttownship.com the wrong address for Open Public Records Act requests to Hainesport Township? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=hainesport_township

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
https://opramachine.com/help/officers

If you find this service useful as an OPRA officer, please ask your web manager to link to us from your organisation's OPRA page.

Paula K. Kosko
10.17.2017
received 11.14.2017

#142 Copy

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Louis MI ____ Last Name Cappelli, Jr

E-mail Address lcappelli@fpsflawfirm.com

Mailing Address 1010 Kings Highway South - Bldg 2

City Cherry Hill State NJ Zip 08034

Telephone 856-853-5530 FAX 856-354-8318

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 _____ Date 11/10/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also, please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1289 Route 38 West Block 101.02 Lot 2

____ Review Public Records (Specify plans, maps, contracts, department) _____

____ Copy of Minutes (specify board, date, topic, or other identifying information) _____

____ Ordinance or Resolution (specify date, number, or other identifying information) _____

X Municipal Lien Search/200 Foot List

____ Other _____

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

Paula L Kosko 11.13.17
Custodian Signature Date

11/13/17 completed PR

#141
copy

TOWNSHIP OF HAINESPORT

OPEN PUBLIC RECORDS ACT REQUEST FORM

1401 Marne Hwy., Hainesport, New Jersey 08036
(609)267-2730
Construction/Building Department

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 Bonnie MI H. Last Name Hanlon, Esq.

E-mail Address Ktalluto@goldbergsegalla.com

Mailing Address 902 Carnegie Blvd West, Suite 100

City Princeton State NJ Zip 08540

Telephone 609-986-1300 FAX 609-986-1301

Preferred Delivery: Pick Up _____ US Mail X 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 _____ Date 11.8.17

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.

Any and all initial inspection reports and approvals performed by any and all building inspector employed for the following street addresses within the development of Woods at Creekview:

54 Lenox Drive, 52 Lenox Drive, 53 Lenox Drive, 51 Lenox Drive, 49 Lenox Drive, 47 Lenox Drive, 45 Lenox Drive, 43 Lenox Drive, 41 Lenox Drive, 39 Lenox Drive, 37 Lenox Drive, 35 Lenox Drive, 33 Lenox Drive, 2 Tyler Place, 4 Tyler Place, 6 Tyler Place, 8 Tyler Place, 10 Tyler Place, 12 Tyler Place, 11 Tyler Place, 9 Tyler Place, 7 Tyler Place, 5 Tyler Place, 3 Tyler Place, 1 Tyler Place, 1 Chaucer Circle, 3 Chaucer Circle, 5 Chaucer Circle, 7 Chaucer Circle, 9 Chaucer Circle, 11 Chaucer Circle, 12 Chaucer Circle, 10 Chaucer Circle, 8 Chaucer Circle, 6 Chaucer Circle, 4 Chaucer Circle, 2 Chaucer Circle, 1 Lansbury Circle, 3 Lansbury Circle, 5 Lansbury Circle, 7 Lansbury Circle, 8 Lansbury Circle, 6 Lansbury Circle, 4 Lansbury Circle, 1 Dorset Circle, 3 Dorset Circle, 5 Dorset Circle, 7 Dorset Circle, 6 Dorset Circle, 4 Dorset Circle, 2 Dorset Circle, 1 Weldon Circle, 3 Weldon Circle, 5 Weldon Circle, 7 Weldon Circle, 6 Weldon Circle, 4 Weldon Circle, 2 Weldon Circle, 28 Heather Lane, 2 Newton Place, 4 Newton Place, 6 Newton Place, 8 Newton Place, 7 Newton Place, 5 Newton Place, 3 Newton Place, 1 Newton Place, 23 Heather Lane, 21 Heather Lane, 17 Heather Lane, 4 Whitney Place, 6 Whitney Place, 8 Whitney Place, 10 Whitney Place, 12 Whitney Place, 14 Whitney Place, 13 Whitney Place, 11 Whitney Place, 9 Heather Lane, 5 Heather Lane, 3 Heather Lane, 26 Heather Lane, 24 Heather Lane, 22 Heather Lane, 20 Heather Lane, 18 Heather Lane, 16 Heather Lane, 14 Heather Lane, 12 Heather Lane, 10 Heather Lane, 8 Heather Lane, 6 Heather Lane, 4 Heather Lane, 24 Lenox Drive, 32 Lenox Drive, 28 Lenox Drive, 24 Lenox Drive, 22 Lenox Drive, 20 Lenox Drive, 2 Heather Lane, 14 Lenox Drive, 10 Lenox Drive, 8 Lenox Drive, 4 Lenox Drive, 2 Lenox Drive, 1 Lenox Drive, 3 Lenox Drive, 5 Ardsley Place, 7 Ardsley Place, 10 Ardsley place, 8 Ardsley Place, 6 Ardsley Place, 4 Ardsley Place, 2 Ardsley Place, 9 Lenox Drive, 11 Lenox Drive, 13 Lenox Drive, 15 Lenox Drive, 17 Lenox Drive, 1 Hastings Lane, 3 Hastings Lane, 7 Hastings Lane, 11 Hastings Lane, 13 Hastings Lane, 15 Hastings Lane, 17 Hastings Lane, 19 Hastings Lane, 18 Hastings Lane, 14 Hastings Lane, 12 Hastings Lane, 10 Hastings Lane, 8 Hastings Lane, 6 Hastings Lane, 4 Hastings Lane, 2 Hastings Lane, 52 Brancroft Lane, 50 Brancroft Lane, 48 Brancroft Lane, 46 Brancroft Lane, 44 Brancroft Lane, 42 Brancroft Lane, 40 Brancroft Lane, 38 Brancroft Lane, 3 Wharton Place, 7 Wharton Place, 11 Wharton Place, 8 Wharton Place, 6 Wharton Place, 2 Wharton Place, 33 Brancroft Lane, 35 Brancroft Lane, 37 Brancroft Lane, 108 Hastings Lane.

AGENCY USE ONLY AGENCY USE ONLY AGENCY USE ONLY

#140
L087

TOWNSHIP OF HAINESPORT

OPEN PUBLIC RECORDS ACT REQUEST FORM

1401 Marne Hwy., Hainesport, New Jersey 08036

(609)267-2730

Construction/Building Department

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: Bonnie MI: H. Last Name: Hanlon, Esq.

E-mail Address: Ktalluto@goldbergsegalla.com

Mailing Address: 902 Carnegie Blvd West, Suite 100

City: Princeton State: NJ Zip: 08540

Telephone: 609-986-1300 FAX: 609-986-1301

Preferred Delivery: Pick Up ____ US Mail X 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: [signature] Date: 11/8/17

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.

Any and all initial inspection reports and approvals performed by any and all building inspector employed for the following street addresses within the development of Lakeside at Creekview:

1 Newport Drive, 5 Newport Drive, 3 Sailor Court, 6 Sailor Court, 11 Anchor Court, 13 Anchor Court, 15 Anchor Court, 19 Anchor Court, 21 Anchor Court, 22 Anchor Court, 20 Anchor Court, 18 Anchor Court, 12 Anchor Court, 8 Anchor Court, 6 Anchor Court, 31 Brancroft Lane, 16 Newport Drive, 14 Newport Drive, 12 Newport Drive, 10 Newport drive, 8 Newport Drive, 6 Newport Drive, 9 Brancroft Lane, 13 Brancroft Lane, 15 Brancroft Lane, 17 Brancroft Lane, 19 Brancroft Lane, 21 Brancroft Lane, 1 Anchor Court, 1 Cove Court, 3 Cove Court, 5 Cove Court, 7 Cove Court, 9 Cove Court, 11 Cove Court, 13 Cove Court, 15 Cove Court, 17 Cove Court, 19 Cove Court, 22 Cove Court, 20 Cove Court, 18 Cove Court, 16 Cove Court, 14 Cove Court, 12 Cove Court, 10 Cove Court, 8 Cove Court, 6 Cove Court, 4 Cove Court, 24 Brancroft Lane, 18 Brancroft Lane, 16 Brancroft Lane, 40 Edgewater Drive, 38 Edgewater Drive, 36 Edgewater Drive, 34 Edgewater Drive, 32 Edgewater Drive, 1 Tidewater Court, 3 Tidewater Court, 5 Tidewater Court, 7 Tidewater Court, 9 Tidewater Court, 11 Tidewater Court, 6 Tidewater Court, 4 Tidewater Court, 2 Tidewater Court, 20 Edgewater Drive, 18 Edgewater Drive, 10 Edgewater Drive, 8 Edgewater Drive, 6 Edgewater Drive, 4 Edgewater Drive, 2 Edgewater Drive, 1 Edgewater Drive, 3 Edgewater Drive, 11 Edgewater Drive, 12 Brancroft Lane, 10 Brancroft Lane, 8 Brancroft Lane, 6 Brancroft Lane.

AGENCY USE ONLY | AGENCY USE ONLY | AGENCY USE ONLY

extension granted on 11/17/17.

Kathy will work on when return from vacation

11/27/17

7771853.1

#139

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name MARIO ~~NELSON~~ MI Y. Last Name NELSON

E-mail Address Vetango@Comcast.net

Mailing Address P.O. BOX 492710

City LAWRENCEVILLE State GA Zip 30049

Telephone 770-359-9654 FAX

Preferred Delivery: Pick Up X 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 Mario Nelson Date 11-8-2017

Revised 8-2016 ls

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1420 LARK Lane **Block** ____ **Lot** ____

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

____ **Other** Survey & all Constructions

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

Paula L Kosko Custodian Signature 11.7.17 Date

#138

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name WAYNE MI _____ Last Name SMITH

E-mail Address WSMITH2INC@GMAIL.COM

Mailing Address 243 RILEYVILLE ROAD

City HOPEWELL State NJ Zip 08525

Telephone 908-797-8027 FAX 908-325-0040

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

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 Wayne Smith Date 11-07-17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 9 BANCROFT LANE **Block** _____ **Lot** _____

X **Review Public Records (Specify plans, maps, contracts, department)** PROPERTY SURVEY

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

X **Other** COPIES OF ANY OPEN PERMITS

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

Paula L. Kosko 11-7-17
Custodian Signature **Date**

#137
Closed 11-7-17

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

n/c

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Mark MI E Last Name Carr

E-mail Address mcarr@vericonbuilds.com

Mailing Address 1063 rt 22 East

City Mountainside State NJ Zip 07092

Telephone (908)9634904 FAX

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

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 _____ Date 11/6/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1302 Rt 38 Hainesport, NJ **Block** 106.03 **Lot** 3

____ **Review Public Records (Specify plans, maps, contracts, department)** _____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

____ **Municipal Lien Search/200 Foot List** _____

X **Other** Looking for name, number, and address for architect on record who originally designed building

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

11-7-17 spoke w/Mark

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

Paula L Kosko
Custodian Signature

11-7-17
Date

Received Plan 11-7-17

#136
11-2-17
N/C
(10-26

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name WILLIAM MI A Last Name SOKOLOWSKI

E-mail Address BILLSOKO1@VERIZON.NET

Mailing Address 413 RANCOCAS AVENUE

City HAINESPORT State N.J. Zip 08036

Telephone 609 774 1793 FAX

Preferred Delivery: Pick Up X 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 [signature] Date 11/6/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** So,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 409 RANCOCAS AVE Block 3901 Lot 405

____Review Public Records (Specify plans, maps, contracts, department) ____

____Copy of Minutes (specify board, date, topic, or other identifying information) ____

____Ordinance or Resolution (specify date, number, or other identifying information) ____

____Municipal Lien Search/200 Foot List ____

____Other TO SEE ANY AND ALL CONSTRUCTION PERMITS

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

Paula L Kosko 11/6/17
Custodian Signature Date

11-8-17
Received letter

#135

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Alexandria MI _____ Last Name Brown

E-mail Address Alexandria.brown@pemco-limited.com

Mailing Address 820 Bear Tavern

City West Trenton State NJ Zip 08628

Telephone 720-509-3238 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail Apply

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 Alexandria Brown Digitally signed by Alexandria Brown Date: 2017.10.30 10:13:38 -06'00' Date 10/30/2017

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium requested. Also, please note that our 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.

Specific Property Information: Address 14 Adams Lane, Hainesport, NJ, 08036 **Block** 9.02 **Lot** 6

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

Apply **Other** In search of any open code violations and open permits. Please provide copies of open documents.

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

Paula L Kosko 10-30-17
Custodian Signature Date

11/3/17 emailed, no response
11/13/17 closed

134 copy

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 417, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Diane MI _____ Last Name Beharry

E-mail Address diane_beharry@yahoo.com

Mailing Address 7 Melodie Ct

City Hainesport State NJ Zip 08036

Telephone 609-234-6825 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

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 _____ Date 09-Nov-17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address _____ **Block** _____ **Lot** _____

X **Review Public Records (Specify plans, maps, contracts, department)** _____

X **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

X **Other** _____

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

Paula L Kosko
Custodian Signature

10-30-17
Date

#133

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036

609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Richard MI ____ Last Name Yu

E-mail Address richard.yu.mail@gmail.com

Mailing Address 156-09 45 Ave Ste A22

City Flushing State NY Zip 11355

Telephone 347-926-3386 FAX ____

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

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 [signature] Date 10/29/17

Revised 8-2016 lls

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address ____ **Block** ____ **Lot** ____

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

X **Other** Copy of Tax Delinquent list (excel spreadsheet preferred), include information such as name, address, amount...

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date 11/1/17

Completed by email. SD

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

Paula L Kosko
Custodian Signature

10.30.17
Date

DEL DUCA LEWIS
LAW FIRM

#132

Gina M. Lower, Paralegal
gina@delducalewis.com

October 24, 2017

VIA UPS GROUND
Hainesport Tax Office
1401 Marne Highway
P.O. Box 477
Hainesport, NJ 08036
Attention: James Mancini

QFARM + QFARM QFARM

RE: ~~23~~ PHILLIPS ROAD, BLOCK 110, LOTS 10, 10.02, 10.03, HAINESPORT, NEW JERSEY

Dear Mr. Mancini:

This firm represents Gerard V. Vernose, owner of property located at 123 Phillips Road and designated as block 110, lots 10, 10.02 and 10.03 on the municipal tax map. Kindly provide me with a certified list of property owners that own property located within 200 feet of the tax lot(s) identified above. Please include on the certified list the names and addresses of any public utility, cable television company and local utility which possesses a right-of-way or easement within the municipality and which has registered with your municipality in accordance with N.J.S.A. 40:55D-12.1. N.J.S.A. 40:55D-12(c) requires all municipalities to provide this certified list within seven days. Please also confirm if the subject property is located within 200 feet of an adjoining municipality.

I enclose a check in the amount of $30.00.

Thank you very much for your assistance.

Very truly yours,
DEL DUCA LEWIS, LLC

Gina M. Lower, Paralegal

Enclosure

10/25/17 pd Rec 31504
Chk# 13312 $30.00
10/26/17 completed 002

#131

William H. Nicholson Associates, P.A.
CIVIL ENGINEERING & LAND PLANNING
4 Rancocas Blvd. Rancocas Woods
Mt. Laurel, N.J. 08054 856-778-7447 Fax 856-778-7744

October 23, 2017

Mr. James Mancini, Tax Assessor
Hainesport Township
One Hainesport Centre
1401 Marne Highway
Hainesport Township, NJ 08036

Re: Block 91; Lot 3

Dear Mr. Mancini:

Please consider this request for a Certified List of all properties within 200 feet of the referenced property and the owners with their addresses. We have enclosed our check for $10.00 for the fee. You could transmit the list by email or fax if you wish. My email address is swilliams@whnapa.com and our fax number is 856-778-7744.

Thank you for your assistance with this.

Very truly yours,

Scott G. Williams, P.E., *for*
William H. Nicholson Associates, P.A.

10/23/17
Paid. Ck# 9777
$10.00

Paula K Hesko

#130. Copy

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Lee MI A. Last Name Schneider

E-mail Address L.Schneider@kw.com

Mailing Address PO Box 311

City Hainesport State NJ Zip 08036

Telephone 609 923 5123 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 Lee A. Schneider Date 10/23/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address _____ **Block** _____ **Lot** _____

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

✓ **Other** Performance evaluations or anything regarding disciplinary action of Edith Darnell.

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

Paula L Kosko
Custodian Signature

10.23.17
Date

10/24 in Closed

#129

State of New Jersey
HAINESPORT TOWNSHIP
GOVERNMENT RECORDS REQUEST FORM Fax: (609) 261-4762

Important Notice

Page 2 of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Larry MI ____ Last Name Higgins

Company ____

Mailing Address 174 Lamington Rd, P.O. Box 180

City Oldwick State NJ Zip 08858 Email OPRA@NJPropertyRecords.com

Business Hours Telephone: Area Code 908 Number 255-9919 Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 ____ Date ____

Payment Information

Maximum Authorization Cost $ ____

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees:	8.5 x 11 Pages	@$0.05
	8.5 x 14 Pages	@$0.07
	11 x 17 Pages	@$0.07
	CD Copies	@$1.79
	200' List @ $10/lot	

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

There's not enough space here to write the records being requested. Please view the attached document.

(Use reverse side for additional space, if necessary)

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

Tax Map Info Completed 10/24/17 PU
10/25/17 emailed
11/13/17 no response + closed

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Paula K Kosko
Custodian Signature

10-23-17
Date

#128

Paula Kosko

From: CHRIS MACKEN [c.macken@comcast.net]
Sent: Wednesday, October 11, 2017 11:16 AM
To: Paula Kosko
Subject: OPRA

Dear Ms. Kosko,

Please consider this an OPRA request under the Open Public Records Act and the common law right to public access for the following:

I request a cd of the township meeting of October 10, 2017.

Thank you for your help.

Best regards,

at Macken

Paula L Kosko 10/12/17

From: CHRIS MACKEN [mailto:c.macken@comcast.net]
Sent: Wednesday, October 11, 2017 11:14 AM
To: Paula Kosko
Subject: OPRA

#127 DENIED COPY

Dear Ms. Kosko,

Please consider this an OPRA request under the Open Public Records Act and the common law right to public access for the following:

I request the videos from the cameras in all hallways and the lobby from 6pm to 9pm on the night of October 10, 2017.

Thank you for your help.

Best regards,

Pat Macken

#126

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Catherine MI ____ Last Name McNelis

E-mail Address ____

Mailing Address 407 Bischoff Ave

City Hainesport State NJ Zip 08036

Telephone 609 267 2380 FAX ____

Preferred Delivery: Pick Up X 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 [signature] Date 10-10-17

Revised 8-2016 lls

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address ____ **Block** ____ **Lot** ____

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

X **Other** ALL Contracts Settlements Etc Between Hainesport Township & Hainesport Industrial Rail Road.

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 .35
Deposit ____
Balance Due .35
Balance Paid ____

Records Provided

Paula L Kosko
Custodian Signature

10-10-17
Date

#125

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036

609-267-2730 Office

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Douglas MI L. Last Name Heinold

E-mail Address dheinold@rclawnj.com

Mailing Address 325 New Albany Road

City Moorestown State NJ Zip 08057

Telephone 856-222-0100 FAX 856-222-0411

Preferred Delivery: Pick Up ____ US Mail X On-Site Inspect ____ Fax X 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 [signature] Date 10/2/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1460 Route 38 Block C1.01 Lot 4

____ Review Public Records (Specify plans, maps, contracts, department) ____

____ Copy of Minutes (specify board, date, topic, or other identifying information) ____

____ Ordinance or Resolution (specify date, number, or other identifying information) ____

__X__ Municipal Lien Search/200 Foot List ____

____ Other ____

AGENCY USE ONLY

Est. Document Cost ____

Est. Delivery Cost ____

Est. Extras Cost ____

Total Est. Cost ____

Deposit Amount ____

Estimated Balance ____

Deposit Date ____

117 completed 3/22

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 # 30836

Rec'd Date ____

Ready Date ____

Total Pages ____

Final Cost

Total 10

Deposit ____

Balance Due ____

Balance Paid 10

Records Provided

[signature] Custodian Signature

10.03.17 Date

124

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Alicia MI ____ Last Name Lyons (Appraisal One)

E-mail Address officeappraisalone@gmail.com

Mailing Address 150 Cooper Road Suite A-3

City West Berlin State NJ Zip 08091

Telephone 856-753-3030 FAX 856-753-3046

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

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 Alicia Lyons Date 9/28/17

Revised 8-2016 lfs

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

~~Pay~~ Charge for time 07 26 A

Record Request Information: ***To expedite the request, be as specific as possible in describing the r***
Also,please include the type of access requested (copying or inspection), and if data, the medium reques
your preferred method of delivery will only be accommodated if the custodian has the technological mea
records will not be jeopardized by such method of delivery.

Specific Property Information: Address 1070 Bancroft Lane Block 100 Lot 8.02 & 8.03

X **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

X **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

X **Other** Requesting copy of final approvals specifically number of approved lots.

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 ____

Tracking

Tracking # - Spoke
Rec'd Date 10/6
Ready Date 10.07
Total Pages ____

Paula L. Kosko 9/28/17
Custodian Signature Date

Spoke w/ Appraisal one
9-29-17 Closed N C

#123

Paula Kosko

From: Michelle Farris [michelle@datarole.com]
Sent: Wednesday, September 27, 2017 4:06 PM
To: Paula Kosko
Cc: Kathy Newcomb
Subject: Re: Hainesport township Building Permits - Public Records Request

Hello Paula-

Thanks for all of your help with this, I greatly appreciate your time.

My
request
is for
all building permits issued. This would preferably be a log/report (residential and commercial), from 2000-current. I'd like these logs/reports to be for all issued building permit types, ie electrical, new build, plumbing, hvac, roof, addition/alteration, fence, pool, mechanical, etc.

The information we are looking for is... (*being most important)
address *
work description*
issued date *
permit number *
finaled date or inspection history
contractor name
valuation

This is for digital data
o
nly.
Our preferred formats are csv or excel, but if those are not available we would appreciate any other format. If it is in paper form only then please advise.

Your building inspector may have a spreadsheet that they keep updated with this info in it. I understand this may be an uncommon task and may take longer than the traditional public records request. So I'd like to thank you in advance. Any help you can provide is greatly appreciated.

Thanks again
, please let me know if there is anything further I can assist with,
and have a wonderful day!

Best Wishes,

Michelle Farris
Data Specialist - Datarole
513-276-2088
Michelle@datarole.com

n Mon, Sep 25, 2017 at 4:05 PM, Paula Kosko <pkosko@hainesporttownship.com> wrote:

#122

Paula Kosko

From: Paula Kosko
Sent: Tuesday, September 26, 2017 8:30 AM
To: 'Citizens' Media TV'
Subject: RE: OPRA & Hainesport's recording policy

Good Morning Jeff:

In response to your OPRA request, please see my responses next to each document request in your email below.

Please let me know if I can close out this OPRA request.

Thanks,
Paula

Paula Kosko, MPA/CPRP
Administrator/Acting Township Clerk
Hainesport Township
1401 Marne Highway
PO Box 477
Hainesport NJ 08036
(609) 267-7114 - Phone
(609) 261-4762 - Fax

From: Citizens' Media TV [mailto:citizensmediatv@gmail.com]
Sent: Saturday, September 23, 2017 11:57 AM
To: Paula Kosko
Subject: OPRA & Hainesport's recording policy

- Hi Ms. Kosko.

  Two OPRA requests for you:

  - Officer Colleton told me that he informed the Township of the presentation and its sensitive nature, days before hand. Can I please have a digital copy of that correspondence and any response made to it? **There is not a record of correspondence between me and Sgt. Colleton as it was a verbal conversation. There was no reference to sensitive information during this conversation.**

  - Can I please see the full text of Hainesport Township's meeting recording policy in PDF form? **Hainesport does not have a meeting recording policy. This record does not exist.**

Some questions about your recording policy:

- What are the requirements, requests, and recommendations for those who wish to record township meetings?
- This is a bit of a paradox, but it is what happened, so I'm asking: What is the procedure when it is known that there will be sensitive information stated in a public meeting, as it relates to your recording policy?
- Finally, what is the procedure when truly sensitive information is INADVERTENTLY revealed in a public meeting? How is the press/those who recorded the meeting informed of such?

#121

Paula Kosko

From: Paula Kosko
Sent: Tuesday, September 26, 2017 8:35 AM
To: 'Citizens' Media TV'
Subject: RE: OPRA: Luis Lopez
Attachments: FB Message to Luis Lopez Sept 18 2017.jpg

Good Morning Jeff:

Please see the attached correspondence to Luis Lopez as it relates to Sgt. Colleton's request.

Please let me know if I can close this OPRA request.

Thanks,
Paula

Paula Kosko, MPA/CPRP
Administrator/Acting Township Clerk
Hainesport Township
1401 Marne Highway
PO Box 477
Hainesport NJ 08036
(609) 267-7114 - Phone
(609) 261-4762 - Fax

From: Citizens' Media TV [mailto:citizensmediatv@gmail.com]
Sent: Sunday, September 24, 2017 9:14 AM
To: Paula Kosko
Subject: OPRA: Luis Lopez

Hi Ma. Kosko.

Another OPRA request for you:

Please send all correspondence between the township and Luis Lopez as it relates to Trooper Colleton's NJSP request, in digital form.

Thanks.

Jeff
citizensmediatv@gmail.com

Co-founder and editor of Citizens' Media TV:
- http://citizensmedia.tv
- http://facebook.com/CitizensMediaTV
- http://twitter.com/CitizensMediaTV

#120

OPEN PUBLIC RECORDS ACT REQUEST 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 – Please Print

First Name Amy MI ____ Last Name Han

E-mail Address amyhan324@gmail.com

Mailing Address 272 La Cascata

City Clementon State NJ Zip 08021

Telephone 856-383-0803 FAX ____

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

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 [signature] Date 8/15/17

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.

n you please provide me with a list of the latest quarter's tax delinquent homes with owner's information (i.e. name, mailing addresss, etc) and the total delinquent amount from current to previous year(s) in excel format via email.

If for any reason you are unable to provide that list, please state the reason in detail. Thanks in advance.

Instructions on how to generate the report in excel in the Edmund System:

Tax Custom Report:

Page 1: Leave all fields open - Select Print to Excel

Page 2: Select Owner Name, Owner Street 1/2, Owner City, St, Owner Zip, Property Class, Property Location

Page 3: Report Type: Delinquent Notice
-Delinquent Notice Suggestions: as of Date Include Current Interest
-Select Interest Date: put a date in, it will allow you to select include Current Interest above

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

sent by email
SD completed 9/21/17

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 ____

NC

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Paula L Kosko
Custodian Signature

09.20.17
Date

#119

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Shaina MI M Last Name Tooley

E-mail Address shaina0319@yahoo.com

Mailing Address 1601 Edwin Street

City Hainesport State NJ Zip 08036

Telephone 609-506-1017 FAX

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail Yes

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 _____ Date 9/20/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1601 Edwin Street, Hainesport, NJ 08036 **Block** 64 **Lot** 8

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

_____ **Other** Survey

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

Paula L Kosko
Custodian Signature

9-21-17
Date

9/21/17 email closed NC KN

#118

.osko

ject: FW: OPRA & questions: Audio recording of township meeting

From: Citizens' Media TV [mailto:citizensmediatv@gmail.com]
Sent: Monday, September 18, 2017 12:51 PM
To: Paula Kosko
Subject: OPRA & questions: Audio recording of township meeting

Hello again, Ms. Kosko!

I'm sorry to keep coming at you like this. This is a totally new situation for me. I am learning as I go here.

I would like to OPRA request the audio recording of the September 12th township meeting. I believe that that is the only form of recording made available by the Township.

I don't expect you to be able to answer all of this, but I do need to ask:
- Did the State Police request that the township also delete Officer Culleton's presentation from their audio recording?
- What is the township doing in response to that request?
- And can you please confirm that everyone who recorded this meeting (I believe the only other person was Luis Lopez) has been contacted and asked to comply with the state police's request?

Thank you again.

Jeff
citizensmediatv@gmail.com

Co-founder and editor of Citizens' Media TV:
- http://citizensmedia.tv
- http://facebook.com/CitizensMediaTV
- http://twitter.com/CitizensMediaTV
h

#117

closed

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Closed 10-3-17

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Erin MI M Last Name SHAW

E-mail Address erinshaw1027@yahoo.com

Mailing Address 7 Easton Way

City Hainesport State NJ Zip 08036

Telephone (609) 314-0532 FAX

Preferred Delivery: Pick Up X 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 Erin M Shaw Date 9/15/17

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.

Revised 8-2016 lfs

Record Request Information: ***To expedite the request, be as specific as possible in describing the records being requested.*** so,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 14 Bernwood Rd **Block** 114.04 **Lot** 31

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

X **Other** construction permits and zoning permits

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____
Deposit Date ____

9-19-17 11:11Am

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

Paula L Kosko
Custodian Signature

09.15.17
Date

LM
10-3-17 8:52Am VM - DC to Mail

#116

Tara Wicker

From: Kathy Newcomb
Sent: Thursday, September 14, 2017 7:38 PM
To: Tara Wicker
Subject: Fwd: Permit question OPRA

Sent from my iPhone

Begin forwarded message:

> **From:** Comcast <moe4421@comcast.net>
> **Date:** September 14, 2017 at 4:49:04 PM EDT
> **To:** Kathy Newcomb <knewcomb@hainesporttownship.com>
> **Subject: Re: Permit question OPRA**
>
> Let this request serve as an official OPRA request for the any permits filed and issued for a roof replacement permit on 1102 Park Avenue East in 2017. Please provide the related records in electronic format via email. If you need to speak to me to fulfill this request my number is (856)297-8943.
> Thank you,
> Maureen Mitchell
>
> Sent from my iPhone
>
>> On Sep 14, 2017, at 4:16 PM, Kathy Newcomb <knewcomb@hainesporttownship.com> wrote:
>>
>> I can only tell you through a OPRA request. Hope the sale goes through!
>>
>> -----Original Message-----
>> From: Comcast [mailto:moe4421@comcast.net]
>> Sent: Thursday, September 14, 2017 2:10 PM
>> To: Kathy Newcomb <knewcomb@hainesporttownship.com>
>> Subject: Permit question
>>
>> Kathy,
>>
>> Can you tell me if Lenny pulled a roof replacement permit for 1102 Park Avenue East Hainesport?

Paula L Kosko 9-15-17

#115

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Barbara MI ____ Last Name Haynes

E-mail Address Barbara.Haynes@pemco-limited.com

Mailing Address 820 Bear Tavern Road

City West Trenton State NJ Zip 08628

Telephone 720-50-3249 FAX 303-284-8026

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

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 _____ Date 09/14/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1610 ARK RD **Block** 109 **Lot** 3

____ **Review Public Records (Specify plans, maps, contracts, department)** _____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

____ **Municipal Lien Search/200 Foot List** _____

X **Other** looking for any notice of OPEN permits/or code violations currently pending on the referenced property address to date

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

Paula L Kosko
Custodian Signature

9.14.17
Date

9/18 email - Closed NC

#114

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Jordan MI _____ Last Name Sparacio

E-mail Address jordan.sparacio@pemco-limited.com

Mailing Address 4600 s ulster st

City denver State co Zip 80237

Telephone 720-509-3254 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

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 _____ Date 9/13/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1903 ARK RD **Block** 110 **Lot** 12.01

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

X **Other** I need to know if there are any open code violations on the above

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

Paula L Kosko
Custodian Signature

09.13.17
Date

9/14/17 - No open violations - Code Enforcement - JB
9/15/17 email from Jordan, ok to close NC

#113

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@*hainesporttownship.com*
Paula L. Kosko, Administrator/Acting *Municipal Clerk*

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Chris MI _____ Last Name Jones

E-mail Address manish.kumar@slkgroup.com

Mailing Address 2727 LBJ Freeway, Suite 800

City Dallas State TX Zip 75324

Telephone 855-512-4803 FAX 888-908-3471

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 Chris Jones Date 09/13/2017

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also, please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 2312 Walnut Avenue, Hainesport, NJ - 08036 **Block** 59 **Lot** 1.01

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

✓ **Municipal Lien Search/200 Foot List** 1. Liens & Special assessments - no liens or special assmts

2. Code violations - no violations or open permits

_____ **Other** 3. Open/Expired Building Permits

House Demo Gene Ki

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

Paula L Kosko
Custodian Signature

09-13-2017
Date

9/14/17 emailed, closed NC

#112

JPI Associates, Inc.
Geotechnical & Environmental Services

725 Market St. Gloucester City, NJ 08030
T 856.456.6500
F 856.456.6565
jpiassociates@verizon.net

Ian Peter Ilves, PG, E. Geol.
ic. AK, DE, KY, NJ, PA, TN, TX, WY

LSRP #594638

HAINESPORT TOWNSHIP

; RECORDS ACT REQUEST FORM

Box 477, Hainesport, NJ 08036
609-267-2730 Office
kosko@hainesporttownship.com
Kosko, Administrator/Acting Municipal Clerk

HAINESPORT TOWNSHIP

Important Notice

ion related to your rights concerning government records. Please read it carefully.

NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name JAN MI P Last Name ILVES, PG, LSRP

E-mail Address JPIassociates@verizon.net

Mailing Address 725 Market Street

City Gloucester City State NJ Zip 08030

Telephone 856.261.0438 FAX 856.456.6565

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 [signature] Date 9/12/17

Revised 8-2016 lfs

Payment Information

Maximum Authorization Cost $ 2.30

30.779

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 2303 Marne Highway **Block** 67 **Lot** 16

___ **Review Public Records (Specify plans, maps, contracts, department)** ___

___ **Copy of Minutes (specify board, date, topic, or other identifying information)** ___

___ **Ordinance or Resolution (specify date, number, or other identifying information)** ___

___ **Municipal Lien Search/200 Foot List** ___

✓ **Other** Looking for USTs, hazmat spills, well + environmental records

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

Paula L Kosko 09.12.17
Custodian Signature Date

CM 9-14-17 Closed
1:57 PM 9-25-17
no items
CM on 3 PM

#111

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Christopher MI D Last Name Morris

E-mail Address cmorris@equitynational.com

Mailing Address 317 Iron Horse Way, Suite 301

City Providence State RI Zip 02908

Telephone 888-434-5500 x 4348 FAX 401-709-8064

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax XXXX E-mail XXXX

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 Christopher D. Morris Date 9-12-17

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.

Revised 8-2016 lfs

Record Request Information: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 2312 Walnut Avenue, Hainesport, NJ 08036 **Block** 59 **Lot** 1.01

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

XXX **Other** Property was recently demolished. Looking for document stating demolition complete and no code/building violations.

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

Paula L Kosko 9-13-17
Custodian Signature Date

9/13/17 emailed. closed NC

#110

Joseph R. Arsenault
Environmental Consulting

961 Clark Avenue
Franklinville, New Jersey 08322

Telephone # (856)-697-6044, Fax # 697-6050, E-Mail NJPlants@AOL.Com
Wetland Analysis Environmental Permitting Natural Resource Surveys Landscape Restoration

September 7, 2017

Hainesport Township Tax Assessor
One Hainesport Centre
PO Box 477
Hainesport, New Jersey 08036

RE: Request for 200' Property Owners List, Block 111 Lots 16 and 16.01 Hainesport Twp, Burlington Co NJ

Dear Township Assessor:

I am making an application to the NJ DEP-Division of Land Use Regulation for the property owners, Mr. and Mrs. Carnall, to obtain a Freshwater Wetland Letter of Interpretation. The application procedure requires notification of all owners within 200'. For this reason, I am requesting a certified 200' property owners list. Please provide a certified owners list for:

Block 111 Lot 16, ~~16.01~~ 16.2
Hainesport Twp, Burlington County, NJ

I have enclosed a check in the amount of $10 for this service. Please call if there is an additional fee or a question on my request. Thank you,

Sincerely,

Joseph Arsenault

Paula K Kosko

$10 #30716
9/8/17 mailed closed

#109

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
lselb@hainesporttownship.com
Leo F Selb Jr, Administrator/Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name John MI C. Last Name O'Herron, II

E-mail Address joherronii@msn.com

Mailing Address P. O. Box 126

City Cornwall State Pennsylvania Zip 17016

Telephone 1-717-277-0587 FAX

Preferred Delivery: Pick Up ____ US Mail XXX 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 John C. O'Herron II Date 09/06/17

Revised 8-2016 lfs

Payment Information

Maximum Authorization Cost $25.00
call or email 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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address Block 103.01, Lots 1 and 8 and **Block** 113 **Lot** 4.05

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

XXX **Other** 200-foot list of property owners. Needs to be signed and certified for an application to NJDEP.

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 # 30721
Rec'd Date 9/22/17
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit 10.00
Balance Due ____
Balance Paid ____

Records Provided

Paula K Banko 09.08.17
Custodian Signature **Date**

9/22/17 check recd, OPRA mailed TW

#108

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036

609-267-2730 Office

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Thomas MI C Last Name Alfano Sr

E-mail Address talfa.tv@gmail.com

Mailing Address 6101 Church Rd

City Mount Laurel State NJ. Zip 08054

Telephone 856 905 9861 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 _____ Date 8/06/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium requested. Also, please note that our 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.

Specific Property Information: Address 2609 Fenimore Rd Block 110 Lot 14.05

____ **Review Public Records (Specify plans, maps, contracts, department)** _____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

✓ **Municipal Lien Search/200 Foot List** _____

____ **Other** _____

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 # 723/31083

Rec'd Date _____

Ready Date _____

Total Pages _____

Final Cost

Total _____

Deposit _____

Balance Due _____

Balance Paid 10.00

Records Provided

Custodian Signature _____ Date 9.6.17

9/7/17 Emailed PBZ

#107

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Catherine MI ____ Last Name McNelis

E-mail Address ____

Mailing Address 407 Bischoff Ave

City Hainesport State NJ Zip 08036

Telephone 609 267 2380 FAX ____

Preferred Delivery: Pick Up X 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 [signature] Date 10-5-17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also, please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address ____ **Block** ____ **Lot** ____

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

X **Ordinance or Resolution (specify date, number, or other identifying information)** pertaining to donated

____ **Municipal Lien Search/200 Foot List** ____

~~Other~~ Property to Township.

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.

does not exist. Can not find any ordinances resolutions pertaining to donated property

In Progress - Open ____
Denied - Closed ____
Filled - Closed 9/12/17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 107
Rec'd Date 9-6-17
Ready Date ____
Total Pages 0

Final Cost
Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Paula L. Kosko 9-6-17
Custodian Signature Date

#106

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036

609-267-2730 Office

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Kathleen MI ____ Last Name Quarterman

E-mail Address katquarterman@gmail.com

Mailing Address 22 Edgewater Dr

City Hainesport State NJ Zip 08036

Telephone 609 2658875 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 Kathleen Quarterman Date 8/9/2017

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium requested. Also, please note that our 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.

Specific Property Information: Address 22 Edgewater Dr Hainesport **Block** 100.03 **Lot** 45

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

X **Municipal Lien Search/200 Foot List** ____

____ **Other** ____

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 # 31032

Rec'd Date ____

Ready Date ____

Total Pages ____

Final Cost

Total ____

Deposit ____

Balance Due ____

Balance Paid 10⁻

Records Provided

Paula L Kosko
Custodian Signature

8.31.17
Date

8/31/17 Completed OPR

#105

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Amitkumar MI M Last Name Shah

E-mail Address Amitshah.RealEstate@gmail.com

Mailing Address 1 Nathans Dr

City East Brunswick State NJ Zip 08816

Telephone 917-881-3006(C) FAX

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

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 [signature] Date 08/29/2017

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 505, 1st street **Block** 29 **Lot** 3

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

X **Other** Any Reported Violations on the property. And if all Permits etc. on file.

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

Paula L Kosko — Custodian Signature
8-30-17 — Date

8/30/17 email + response Closed NC

#104

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Valerie MI _____ Last Name Daberkoe

E-mail Address valerie@envirosureinc.com

Mailing Address 319 South High Street, 1st Floor

City West Chester State PA Zip 19382

Telephone 610-696-8980 FAX 610-696-8984

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect X Fax _____ E-mail X

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 Valerie Daberkoe Date 8/29/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address Diamond Diner 1390 Route 38 **Block** 100 **Lot** 8

X **Review Public Records (Specify plans, maps, contracts, department)** Environmental records and underground storage tanks

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

_____ **Other** _____

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 _____
Filed - 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

Paula L Kosko Custodian Signature 8.29.17 Date

No paper work (LW) 8-29-17
no paperwork TW 8/30/17

8/30/17 emailed, closed PC

#103

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name PETER MI A Last Name CANTON

E-mail Address pc234@hotmail.com

Mailing Address 430 Delaware Avenue

City Delanco State NJ Zip 08075

Telephone 609-502-3537 FAX 856-222-9604

Preferred Delivery: Pick Up ___ US Mail ___ On-Site Inspect ✓ Fax ___ E-mail ✓ if possible

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 [signature] Date 8/28/2017

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 23 Phillips Rd. Block 111 Lot 1

✓ **Review Public Records (Specify plans, maps, contracts, department)** surveys, wetlands delineations

✓ **Copy of Minutes (specify board, date, topic, or other identifying information)** JLUB

✓ **Ordinance or Resolution (specify date, number, or other identifying information)** Subdivisions

___ **Municipal Lien Search/200 Foot List** ___

___ **Other** ___

AGENCY USE ONLY

Est. Document Cost ___
Est. Delivery Cost ___
Est. Extras Cost ___
Total Est. Cost ___
Deposit Amount ___
Estimated Balance ___

Deposit Date ___

8-29-17 9:47 AM
Spoke w/ Peter

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

Paula L Kosko 8/29/17
Custodian Signature Date

DW SMITH
ASSOCIATES, LLC
Greengineering®

Jennifer N. Nevins
Timothy P. Lurie
Thomas J. Murphy

Syed B. Husain
Kevin J. Murphy
Lynn A. Voorhees
John T. Harper

#102

8/29/17 Completed OSC
Rec'd 31052 $10.00

August 23, 2017

James Mancini, Tax Assessor
Township of Hainesport
One Hainesport Centre
Hainesport, NJ 08036

RE: 200 FT Certified List of Property Owners
2609 Fenimore Road
Block 110, Lot 14.05
Hainesport Township, Burlington County, NJ
Our Reference No. 17-505.00

Dear Mr. Mancini:

Enclosed please find a fee check in the amount of $10.00 constituting payment for a Certified List of Property Owners within 200 feet of the above-referenced project site. Along with this request, I have enclosed a tax map highlighting the property in question.

If you should have any questions or require additional information, please do not hesitate to contact this office. Thank you.

Very truly yours,

DW SMITH ASSOCIATES, LLC

LYNN M. HOVSEPIAN
Secretary

Enclosures

S:\PROJECTS\2017\17-505\Correspondence\LR1750500-20170823LH-Hainesport TA-200FT List Request.doc

Paula L Horko
8/29/17

#101

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@*hainesporttownship.com*
Paula L. Kosko, Administrator/Acting *Municipal Clerk*

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Akhil MI ____ Last Name Sebastian

E-mail Address akhil.sebastian@slkgroup.com

Mailing Address 2727 LBJ Freeway, Suite 420

City Dallas State TX Zip 75324

Telephone 855-512-4803 FAX 888-908-3471

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 Sebastian Date 08/25/2017

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 2312 Walnut Avenue, Hainesport, NJ - 08036 **Block** 59 **Lot** 1.01

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

✓ **Municipal Lien Search/200 Foot List**
1. Liens & Special assessments
2. Code Violations
3. Open/Expired Building Permits

____ **Other** ____

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

mail Secretary 8-28-17 10:46 Am

for Akhil - not in, will give him message and answered, 8/31/17 Close NC

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

Paula L Kosko
Custodian Signature

8-31-17
Date

#100

Paula Kosko

From: CHRIS MACKEN [c.macken@comcast.net]
Sent: Wednesday, August 23, 2017 9:08 PM
To: Paula Kosko
Subject: opra

Follow Up Flag: Follow Up
Flag Status: Flagged

Dear Ms. Kosko,,

Please consider this an OPRA request under the Open Public Records Act and the common law right to public access for the following:

I request a copy of the title search for the properties of 1404 Rt 38 Block 100 lots 9, 10, 11, 12, 13 and 1411 Rt 38 Block 99 lot 9 which the township has authorized to be conducted.

Thank you for your help.

Best regards,

Pat Macken

8/25/17 email, closed NC

#99

Paula Kosko

From: CHRIS MACKEN [c.macken@comcast.net]
Sent: Wednesday, August 23, 2017 9:05 PM
To: Paula Kosko
Subject: opra

Follow Up Flag: Follow Up
Flag Status: Flagged

Dear Ms. Kosko,

Please consider this an OPRA request under the Open Public Records Act and the common law right to access for records.

I request all emails, records and correspondence between the township committee, Dawn Robertson Touliano, Leo Selb, EPA, and property owners of 1404 Rt 38 Block 100 lots 9, 10,11, 12, 13 and 1411 Rt 38 Block 99 lot 9.

Thank you in advance.

Best regards,

Pat Macken

8/25/17 email, closed NL

#98

Paula Kosko

From: CHRIS MACKEN [c.macken@comcast.net]
Sent: Wednesday, August 23, 2017 9:00 PM
To: Paula Kosko
Subject: opra

Follow Up Flag: Follow Up
Flag Status: Flagged

Dear Ms. Kosko,

Please consider this an OPRA request under the Open Public Records Act and the common law right to access.

I request all documentation, memos, records, EPA records, any environmental studies, clean up reports that involve the properties of 1404 Rt 38 Block 100 and lots, 9, 10, 11, 12, 13 and 1411 Rt 38 Block 99 lot 9 on RT 38 West that Hainesport township in interested in purchasing according to ordinance 2017-10.

Thank you for your help.

(more specific need time frame)

Best regards,

Pat Macken

also i/c George for John

#97

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Richard MI _____ Last Name Schneidereit

E-mail Address richs@rjsenv.com

Mailing Address 15 Oakwood Drive

City Medford State NJ Zip 08055

Telephone 609-304-3970 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect X 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 [signature] Date 8/23/2017

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 2312 Walnut Avenue **Block** 59 **Lot** 1.01

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

X **Other** I WOULD LIKE TO REVIEW OR RECEIVE BY EMAIL COPIES OF ANY PROPERTY RECORD CARD FILES MAINTAINED BY THE TAX ASSESSOR'S OFFICE AND ANY CONSTRUCTION PERMIT FILES

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

8-23-17
Sharon spoke w/ Rich

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

Paula L Kosko
Custodian Signature

8/23/17
Date

[signature]

#96

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Jordan MI _____ Last Name Sparacio

E-mail Address jordan.sparacio@pemco-limited.com

Mailing Address ~~4600 s ulster st~~ 4600 S. Ulster St.

City denver State co Zip 80237

Telephone 720-509-3254 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

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 Jordan Sparacio Digitally signed by Jordan Sparacio Date: 2017.08.21 17:17:00 -06'00' Date 8/21/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address ~~14 SPRING HOLLOW DR~~ 2811 LAKE Ave. **Block** 7 10 **Lot** ~~60~~ 7

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

X **Other** Any open code violations

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

Paula L Kosko
Custodian Signature

8-22-16
Date

No Active Code Enforcement Violations DB 8-29-17
No Zoning Issues DB 8-29-17 Mailed NC

#95

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Christopher MI R Last Name Henderson

E-mail Address Chris.henderson@wolfcre.com

Mailing Address 951 Route 73 N.

City Marlton State NJ Zip 08053

Telephone 856-905-9245 FAX

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

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 _____ Date 8/17/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1345 Route 38 Hainesport, NJ 08036 **Block** 107 **Lot** 3 & 5.02

____ **Review Public Records (Specify plans, maps, contracts, department)** _____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

X **Ordinance or Resolution (specify date, number, or other identifying information)** Need to learn use of property and resolution

____ **Municipal Lien Search/200 Foot List** _____

____ **Other** _____

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

Paula L Kosko
Custodian Signature

8/17/17
Date

8/17/17 Closed NC

#94.

Paula Kosko

From: Paula Kosko
Sent: Thursday, August 17, 2017 3:19 PM
To: 'CHRIS MACKEN'
Subject: RE: OPRA

Hi Pat:

The CD's of July and August township meeting are ready to be picked up (OPRA request #94). The cost per CD is $1.79 for a total of $3.58. The total owed to date for the two CD's ($3.58) and paper copies (.30) is $3.88. Please have the exact amount when you pick up the documents.

Thank You,
Paula

Paula Kosko, MPA/CPRP
Administrator/Acting Township Clerk
Hainesport Township
1401 Marne Highway
PO Box 477
Hainesport NJ 08036
(609) 267-7114 - Phone
(609) 261-4762 - Fax

From: CHRIS MACKEN [mailto:c.macken@comcast.net]
Sent: Tuesday, August 15, 2017 7:27 PM
To: Paula Kosko
Subject: OPRA

Dear Ms. Kosko,

Please consider this a request for records under the Open Public Records Act and the common law right of access to public access.

I request a CD of the July and August township meetings. I will pick them up at the township. I also am requesting the executive session minutes when August minutes are approved.

Thank you,

Paula K Kosko

Pat Macken

116 Masons Woods Ln

8/18/17 pu
Receipt # 30705
$1.79 x 2

#93

OPEN PUBLIC RECORDS ACT REQUEST 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 – Please Print

First Name Amy MI ____ Last Name Han

E-mail Address amyhan324@gmail.com

Mailing Address 272 La Cascata

City Clementon State NJ Zip 08021

Telephone 856-383-0803 FAX ____

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

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 [signature] Date 8/15/17

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 jeopardized by such method of delivery.

Can you please provide me with a list of the latest quarter's tax delinquent homes with owner's information (i.e. name, mailing addresss, etc) and the total delinquent amount from current to previous year(s) in excel format via email.

If for any reason you are unable to provide that list, please state the reason in detail. Thanks in advance.

Instructions on how to generate the report in excel in the Edmund System:
In Edmund Billing/Collection Tax Collections Accounts Tax Custom Reports. On Page 3 Select year and date range you want. Check boxes Utility balance as of date (will be date you put in end of range) and Year/Prd Range balance for Taxes. Page 1 on bottom left corner is check box for excel. On Page 2 select all the boxes requested by the requester. (name, property address, mailing address, class, etc.)

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
ıated Balance ____

Deposit Date ____

8/21/17 no response SAD Closed

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

Paula L Kenka
Custodian Signature

08/15/2017
Date

#92

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Jordan MI _____ Last Name Sparacio

E-mail Address jordan.sparacio@pemco-limited.com

Mailing Address 4600 S ulster

City Denver State CO Zip 80237

Telephone 720-509-3254 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail C

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 _____ Date 8/9/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 81 ARK RD Lumberton **Block** 39 **Lot** 1.03

_____ **Review Public Records (Specify plans, maps, contracts, department)** 816 Ark Road?

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** Block 109 Lot 6

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** (Original request) this is Lumberton

_____ **Municipal Lien Search/200 Foot List** _____

X **Other** Any open code violations that exist at this time

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

8/15/17 email

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

Paula L Kosko
Custodian Signature

8/15/17
Date

8/22/17 closed NC

#91

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name GEORGE MI ____ Last Name SGREDUK

E-mail Address George.Sgreduk@comcast.net

Mailing Address P.O. Box 415

City LUMBERTON State NJ Zip 08048

Telephone 609-731-9477 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 [signature] Date 8/15/2017

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 307 Broad St **Block** 90 **Lot** 1.02

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

✓ **Other** All construction & zoning permits

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

LM on VM & Email 8-15-17 1:35pm

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

Paula L. Kosko 8/15/17
Custodian Signature Date

As per phone 9-14-17 8:18am LA

#90

Paula Kosko

From: CHRIS MACKEN [c.macken@comcast.net]
Sent: Monday, August 14, 2017 12:22 PM
To: Paula Kosko
Subject: OPRA

Follow Up Flag: Follow up
Flag Status: Flagged

Dear Ms. Kosko,

Please consider this a request for records under the Open Public Records Act and the common law right of access to public records.

I request any memo, documentation, letters, emails from our contracted professionals that are involved with the purchase of 1404 Rt 38 property as per ordinance 2017-10. This includes studies, reports, soil boring test etc.

Please email this information to me. Thank you.

Sincerely,

Pat Macken

116 Masons Woods Ln

Hainesport, NJ 08036

609-267-4509

Paula L Kosko

.05
Receipt 30705 8/18/17

#89

Paula Kosko

From: CHRIS MACKEN [c.macken@comcast.net]
ent: Monday, August 14, 2017 12:18 PM
o: Paula Kosko
Subject: OPRA

Follow Up Flag: Follow up
Flag Status: Flagged

Dear Ms. Kosko,

Please consider this a request for records under the Open Public Records Act and the common law right of access to public records.

I request any and all documentation, memos, emails and private emails between the township committee members and you in regards to ordinance 2017-10, which is the purchase of 1404 Rt 38 property.

Please email the above request to me. Thank you.

Sincerely,

Pat Macken

116 Masons Woods Ln

Hainesport, NJ 08036

609-267-4509

Paula L Kosko

.5 Receipt
30705
8/18/17 p/u

#88

Paula Kosko

From: CHRIS MACKEN [c.macken@comcast.net]
Sent: Monday, August 14, 2017 12:15 PM
To: Paula Kosko
Subject: OPRA

Follow Up Flag: Follow up
Flag Status: Flagged

Dear Ms. Kosko,

Please consider this a request for records under the Open Public Records Act and the common law right of access to public records.

I request any and all executive session minutes pertaining to the possible purchase of 1404 Rt 38 property as noted in ordinance 2017-10.

Please email me the information at c.macken@comcast.net. Thank you.

Sincerely,

Pat Macken

116 Masons Woods Ln

Hainesport, NJ 08036

Paula L Kosko

8/18/17 P/U
20 Receipt

#87

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Barbara MI A. Last Name Rich

E-mail Address barbrich37ec@gmail.com

Mailing Address 37 East Central Avenue

City Moorestown State NJ Zip 08057

Telephone 856 334-3787 FAX _____

Preferred Delivery: Pick Up X 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 Barbara A. Rich Date 8/10/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1404 Rt 38 **Block** 100 **Lot** 9-13

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

_____ **Other** Copy of clean-up Report

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 8.14.15
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

Paula L Kosko 8-11-17
Custodian Signature Date

#86

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Paul MI A Last Name Canton

E-mail Address paulcanton@hotmail.com

Mailing Address 293 W Main St

City Moorestown State NJ Zip 08057

Telephone 609 502 3536 FAX 856 222 9604

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

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 Paul Canton Date 8/10/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 2 CLOVERDALE CT AND 7 Clover Dale CT Block 109 Lot 12.02

X **Review Public Records (Specify plans, maps, contracts, department)** HOA documents & plot plan

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

____ **Other** ____

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

sent email
8-14-17
Sue Hacker

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

Paula L. Kosko 8/21/17
Custodian Signature Date

#85

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Jordan MI _____ Last Name Sparacio

E-mail Address jordan.sparacio@pemco-limited.com

Mailing Address 4600 S ulster

City Denver State CO Zip 80237

Telephone 720-509-3254 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail C

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 _____ Date 8/9/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 405 THIRD ST **Block** 36 **Lot** 6

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

X **Other** Any open code violations that exist at this time

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

2 Violations for Construction/Zoning Code Enforcement

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

Paula L. Kosko
Custodian Signature

8-22-17
Date

#84

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Nicole MI R Last Name Huber

E-mail Address Nicole.Huber@redfin.com

Mailing Address 50 Harrison Street, Suite 303

City Hoboken State NJ Zip 07030

Telephone 609-757-1456 FAX

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

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. HAVE NOT!

Signature Nicole Huber Digitally signed by Nicole Huber Dn: cn=Nicole Huber, o=Redfin, ou, email=Nicole.Huber@redfin.com, c=US Date: 2017.08.07 13:05:55 -07'00' Date 8/7/17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 86 Hastings Lane, Hainesport NJ, 08036 **Block** 100.12 **Lot** 19

X **Review Public Records (Specify plans, maps, contracts, department)** Requesting ALL open permits for construction, plumbing & electrical for transfer of sale.

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

____ **Other** Permits within the last 5 years

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

Paula L Kosko
Custodian Signature

08-07-17
Date

8/8 email received

Closed NC

#83

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name ED MI _____ Last Name JAKUBOWSKI

E-mail Address ED.JAKUBOWSKI@TELLURIANENV.COM

Mailing Address P.O. BOX 148

City FLEMINGTON State NJ Zip 08822

Telephone (908) 447-4170 FAX (908) 450-1444

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

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 _____ Date _____

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 1900 PARK AVENUE **Block** 104 **Lot** 20

X **Review Public Records (Specify plans, maps, contracts, department)** BUILDING/FIRE AS RELATED TO UNDERGROUND STORAGE TANKS

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

_____ **Municipal Lien Search/200 Foot List** _____

_____ **Other** _____

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

Paula L Kosko
Custodian Signature

08.07.17
Date

8/7/17 emailed. closed NC

#82

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Kate MI M Last Name Del Duca

E-mail Address Kate@delducalewis.com

Mailing Address DelDuca Lewis LLC, 21 E. Euclid Ave, Suite 100

City Haddonfield State NJ Zip 08033

Telephone 856-427-4200 FAX 856-427-4241

Preferred Delivery: Pick Up X 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 Kate Del Duca Date 8/1/17

Revised 8-2016 lfs

Payment Information

Maximum Authorization Cost $ 51.15

Select Payment Method

Cash (Check) 73276 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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also, please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 23 Phillips Road **Block** ____ **Lot** ____

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

X **Other** copies of planning + zoning board resolutions, review letters, and subdivision plans for the subject property

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

Paula L Kosko 08-02-17
Custodian Signature Date

Item w/ Secretary 8-2-17 9:56 AM

8-4-17 10:30 special w/Kate

Received 8-7-17 Kate Del Duca

#81

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Rebecca MI C. Last Name Lafferty

E-mail Address rclafferty@cooperlevenson.com

Mailing Address c/o Cooper Levenson, P.A., 1125 Atlantic Avenue, 3rd Floor

City Atlantic City State NJ Zip 08401

Telephone 609-572-7550 FAX 609-572-7551

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

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 Rebecca C. Lafferty Date 8-1-17

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also, please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address ____ **Block** ____ **Lot** ____

____ **Review Public Records (Specify plans, maps, contracts, department)** ____

____ **Copy of Minutes (specify board, date, topic, or other identifying information)** ____

____ **Ordinance or Resolution (specify date, number, or other identifying information)** ____

____ **Municipal Lien Search/200 Foot List** ____

X **Other** PLEASE SEE ATTACHED REQUEST

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 ____
Filed - 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

Paula L Kosko Custodian Signature

8-1-17 Date

8/3/17 emailed, received
Closed NC

#80

HAINESPORT TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

PO Box 477, Hainesport, NJ 08036
609-267-2730 Office
pkosko@hainesporttownship.com
Paula L. Kosko, Administrator/Acting Municipal Clerk

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.
NO OPRA REQUESTS WILL BE ACCEPTED VIA FAX.

Requestor Information – Please Print

First Name Shannon MI _____ Last Name Judd

E-mail Address shannon.judd@pemco-limited.com

Mailing Address 4600 s ulster st suite 530

City denver State co Zip 80237

Telephone 770-609-6861 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

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 Jordan Sparacio Digitally signed by Jordan Sparacio 2017.07.28 Date 07/28/2017

Revised 8-2016 lfs

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: ***To expedite the request, be as specific as possible in describing the records being requested.*** Also,please include the type of access requested (copying or inspection), and if data, the medium 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.

Specific Property Information: Address 219 NEW YORK AVE **Block** 48 **Lot** 3

_____ **Review Public Records (Specify plans, maps, contracts, department)** _____

_____ **Copy of Minutes (specify board, date, topic, or other identifying information)** _____

_____ **Ordinance or Resolution (specify date, number, or other identifying information)** _____

X **Municipal Lien Search/200 Foot List** _____

X **Other** any open code violations or permits on

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

Paula L Kosko 8.1.17
Custodian Signature Date

8/1/17 emailed + received
Closed NC