



BOROUGH OF PAULSBORO
 1211 DELAWARE STREET, PAULSBORO, NEW JERSEY 08066
 (856) 423-1500 / (856) 423-9117 Fax



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 Paul MI F Last Name Hellyar
 E-mail Address PFHCMH-1@comcast.net
 Mailing Address 723 Duke Drive
 City Wenonah State NJ Zip 08090
 Telephone 856-761-4761 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-7A-7, 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 Buttany Kaizer for Paul Hellyar (agent) Date 11-2-2016

Payment Information

Maximum Authorization Cost \$15.00
 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.

Electrical, Plumbing, Structural, Roof, HVAC Systems, Removal
~~of Oil Tank~~, or abandonment of Underground
 Oil Tank.

Address of Records Requested: 721 Billings Avenue

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

Custodian Signature _____

Date _____