

Completed OPRA

cc: Police email 7/10/17

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 802
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Ben MI - Last Name Lukovsky
 E-mail Address _____
 Mailing Address 50 US Highway 9, Suite 202
 City Morganville State NJ Zip 07751
 Telephone _____ 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 7/10/17

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.

Motor Vehicle Accident Reports
From 7/3/17 Through 7/9/17

AGENCY USE ONLY

Est. Document Cost _____
 Est. Delivery Cost _____
 Est. Extra 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 7/10/17
 Ready Date 7/19/17
 Total Pages _____

Final Cost

Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Records Provided _____

[Signature] 7/10/17
 Custodian Signature Date

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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Requestor Information - Please Print

First Name Matthew MI Last Name Anderson
 E-mail Address
 Mailing Address 4 Stratton Place
 City Middletown State NJ Zip 07748
 Telephone 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 7/10/17

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

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I am respectfully requesting the approved budgets of the Matawan Borough Council from 1970 to 1979.

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

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

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

In Progress ☐ Open
 Denied ☐ Closed
 Filled ☐ Closed
 Partial ☐ Closed

Tracking Information

Final Cost

Tracking # Total
 Rec'd Date 7/11/17 Deposit
 Ready Date 7/20/17 Balance Due
 Total Pages Balance Paid

Records Provided

Robin Kluge
 Custodian Signature

7/11/17
 Date

File Completed OPRA

cc: Construction
+ Property Maint.
Fire Prevention
Fire collector
PK
7/11
win
email



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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Requestor Information - Please Print

First Name Samantha MI L Last Name Nadler
E-mail Address _____
Mailing Address 10 Emerald Dr
City Morristown State NJ Zip 07751
Telephone _____ FAX _____
Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax 2 E-mail 1
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 7/10/17

Payment Information

Maximum Authorization Cost \$ 5
Select Payment Method
Cash ☒ 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.

- Copy of permit for installation/removal of above/underground oil storage tank
 - property maintenance code violations
 - fire prevention code violations
 - list of construction permits applied for
 - tax liens
- 158 Washington Avenue
Matawan, NJ 07747
Block: 83, Lot: 3

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	<u>7-11-17</u>	Deposit	_____
Ready Date	<u>7-20-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____

Records Provided
7-14-17
- File complete
- See attached email
Custodian Signature [Signature] Date 7-11-17

File - Complete dOPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



cc - Construction
 - ~~Prevention~~
 - ~~Property Maint~~

 RK
 7/12
 via
 email

Important Notice

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Requestor Information – Please Print

First Name William MI Last Name Troy
E-mail Address
Mailing Address 2400 Hwy 88 - Veitri Realto
City Point Pleasant State NJ Zip 08742
Telephone 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 William Troyse Date 07-11-17

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.

202 Main Street Block 37 Lot 4

- * Open Permits — List of Construction Applications
- * Code Violations — Property maintenance
— Fire Prevention

[Signature]

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	7-12-17	Deposit
Ready Date	7-21-17	Balance Due
Total Pages		Balance Paid

Records Provided

7-21-17
- See attached email
- File complete (PK)

K. M. [Signature] 2-7-17
Custodian Signature Date



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747

Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

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Requestor Information - Please Print

First Name Jennifer MI A Last Name Brown
E-mail Address _____
Mailing Address 269 Middlesex Rd
City Matawan State NJ Zip 07747
Telephone _____ 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 Jennifer Brown Date 7/14/17

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.

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I am requesting a copy of all construction permits and zoning requests submit and approved for 28 Somerset Place Matawan, NJ 07747.
Block 123 lot 44.

I am purchasing this home and want to confirm all work previously done was permitted.

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
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In Progress ☐ Open ☐
Denied ☐ Closed ☐
Filled ☐ Closed ☐
Partial ☐ Closed ☐

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #		Total	
Rec'd Date	<u>7-14-17</u>	Deposit	
Ready Date	<u>7-25-17</u>	Balance Due	
Total Pages		Balance Paid	
Records Provided			
<u>7-25-17</u>			
- File complete			
- See attached email			
Custodian Signature <u>Karen Wynne</u>		Date <u>7-14-17</u>	
Clerk			

OPRA Complete

C. J. Pate



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

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201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
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karen.wynne@matawanborough.com

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Requestor Information - Please Print

First Name Ben MI MI Last Name Lynovsky
 E-mail Address _____
 Mailing Address 50 US Highway 9, Suite 202
 City Morganville State NJ Zip 07751
 Telephone _____ 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 7/17/17

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.

Motor Vehicle Accident Reports
From 7/12/17 Through 7/16/17

AGENCY USE ONLY

Est. Document Cost _____
 Est. Delivery Cost _____
 Est. Extra Cost _____
 Total Est. Cost _____
 Deposit Amount _____
 Estimated Balance _____
 Deposit Date _____

AGENCY USE ONLY

Disposition Notes
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In Progress ☐ Open ☐
 Denied ☐ Closed ☐
 Filled ☐ Closed ☐
 Partial ☐ Closed ☐

AGENCY USE ONLY

Tracking Information
 Tracking # 7-17-17
 Rec'd Date 7-26-17
 Ready Date _____
 Total Pages _____
Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____
 Records Provided _____
 Custodian Signature [Signature] Date 7-17-17

Matawan Borough

OPEN PUBLIC RECORDS ACT REQUEST FORM

Ph: 732-290-1657

Fax: 732-290-7585

OPRA complete
PUBLIC RECORDS

cc: Pot. email 7/17/17

Important Notice

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Requestor Information – Please Print

First Name Jeffrey MI _____ Last Name Devlin

E-mail Address _____

Mailing Address 2022 WASHINGTON BLVDCity ROBBINSVILLE State NJ Zip 08691

Telephone _____ FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax X E-mail XIf 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 NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.Signature [Signature] Date 7/17/2017

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash _____ Check _____ Money Order _____

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.

Motor vehicle accident reports for the dates listed below. Please email to _____

1.

Start Date 7/9/2017End Date 7/15/2017

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

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In Progress	-	Open	_____
Denied	-	Closed	_____
Filled	-	Closed	_____
Partial	-	Closed	_____

AGENCY USE ONLY

Tracking Information

Tracking # _____

Rec'd Date 7-17-17Ready Date 7-26-17

Total Pages _____

Final Cost

Total _____

Deposit _____

Balance Due _____

Balance Paid _____

Records Provided

[Signature]
Custodian Signature

7-17-17
Date



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
 201 Broad Street, Matawan, New Jersey 07747
 Karen Wynne, RMC
 (732) 566-3898 ext. 602
 Fax (732) 290-7585
 karen.wynne@matawanborough.com



cc: Construction
 Fire Prevention
 7/21
 via email

Important Notice
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Requestor Information - Please Print

First Name Alice MI _____ Last Name Houston
 E-mail Address _____
 Mailing Address 998 Holmdel Rd
 City Holmdel State NJ Zip 07733
 Telephone _____ 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 Alice Houston Date 7/20/2017

Payment Information

Maximum Authorization Cost \$ _____
 Select Payment Method
 Cash ☐ ☒ Check Money Order
 Fees: Letter size pages - \$0.05 per page
 Legal size pages - \$0.07 per page
 Other materials (CD, DVD, etc) - actual cost of material
 Delivery: Delivery / postage fees additional depending upon delivery type.
 Extras: Special service charge dependent upon request.

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RE 262 Broad St MATAWAN
 Block 39 Lot 19

Please provide all permits for removal of an underground oil tank. Please provide most recent roof, furnace & A/C permits.

Thank you!

Alice

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
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In Progress - Open _____
 Denied - Closed _____
 Filled - Closed _____
 Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
 Rec'd Date 7-20-17 Total _____
 Ready Date 7-31-17 Deposit _____
 Total Pages _____ Balance Due _____
 Balance Paid _____
 Records Provided _____

Karen Wynne Clerk 7-20-17
 Custodian Signature Date

File-Completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



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201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
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Fax (732) 290-7585
karen.wynne@matawanborough.com



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Requestor Information - Please Print

First Name David MI J Last Name Ulric
E-mail Address _____
Mailing Address Plosia Cohen LLC, 385 Route 24
City Chester State NJ Zip 07930
Telephone _____ 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 /s/ David J. Ulric, Esq. Date July 19, 2017

Payment Information

Maximum Authorization Cost \$ _____
Select Payment Method
Cash ☐ Check ☐ Money Order ☐
Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.
Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

1. Job postings, announcements and/or advertisements for the hiring or appointment of Fire Inspectors from March 2010 through present.
2. Job postings, announcements and/or advertisements for the hiring or appointment of Fire Officials from March 2010 through present.
3. Resolutions appointing or otherwise hiring Fire Inspectors from March 2010 through present.
4. Resolutions appointing or otherwise hiring Fire Officials from March 2010 through present.
5. Employment contracts for Fire Inspectors and/or Fire Officials appointed or hired from March 2010 through present.
6. The Municipality's policy or regulation setting forth residency requirements for hiring or appointing employees.
7. To avoid further OPRA requests, please state whether the positions referenced above were open to applicants from outside the municipality.

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
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In Progress ☐ Open ☐
Denied ☐ Closed ☐
Filled ☐ Closed ☐
Partial ☐ Closed ☐

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	Total		
Rec'd Date <u>7-20-17</u>	Deposit		
Ready Date <u>7-31-17</u>	Balance Due		
Total Pages	Balance Paid		
Records Provided			
<u>8/3/17</u> <u>-File Complete</u> <u>-See attached email</u> <u>Ka</u>			
Custodian Signature <u>[Signature]</u>		Date <u>7-20-17</u>	

Completed - OPRA

- Police via email
7/24/17

State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

**Important Notice**

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Requestor Information - Please Print

First Name Ben MI --- Last Name Lynovsky
E-mail Address _____
Mailing Address 50 US Highway 9, Suite 202
City Morganville State NJ Zip 07751
Telephone _____ 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 7/24/17

Payment Information

Maximum Authorization Cost \$

Select Payment MethodCash ☐ 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.

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Motor Vehicle Accident Reports
From 7/16/17 Through 7/23/17

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		Final Cost	
Tracking #	<u>7/24/17</u>	Total	_____
Rec'd Date	<u>8/2/17</u>	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>Robin Kluger</u>		Date <u>7/24/17</u>	

File - Completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



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201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



Important Notice

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Requestor Information - Please Print

First Name Nancy MI Last Name MASUELLI
E-mail Address
Mailing Address 196 Biscayne Way
City Manalapan State NJ Zip 08738-1104
Telephone 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 (H)AVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature Nancy Masuelli Date 07/25/2017

Payment Information

Maximum Authorization Cost \$
Select Payment Method
Cash Check Money Order
Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.
Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

A Survey(s) of the following properties:
Block 2 LOT 2
Block 2 LOT 7
Block 3 LOT 1

AGENCY USE ONLY

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

AGENCY USE ONLY

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

In Progress Open
Denied Closed
Filled Closed
Partial Closed

AGENCY USE ONLY

Tracking Information
Tracking # Total
Rec'd Date 7-26-17 Deposit
Ready Date 8-4-17 Balance Due
Total Pages Balance Paid
Records Provided
8-3-17
- File complete
- see attached email.
Custodian Signature Karen Wynne Date 7-26-17
Clerk



FILE WITH COMPLETES FOR



Star-Ledger

File - Completed OPRA cc: Police

CRAIG MCCARTHY, REPORTER

Woodbridge Corporate Plaza
485 Route 1 South, Building E, Suite 300
Iselin, NJ 08830-3009

kw
8/3
via
email

7/25/2017

Dear Custodian,

Please consider this a formal OPRA request for the unredacted Use of Force reports for incidents occurring in the calendar years 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015 and 2016 from your municipality's police department.

We are entitled to these unredacted reports under N.J.S.A. 47:1A3(b) as a result of the state Supreme Court ruling on July 11, 2017, in the case North Jersey Media Group v. Lyndhurst.

The court wrote in its opinion, "The law calls for disclosure of 'the identity of the investigating and arresting personnel' and adds that the exception on which defendants rely 'shall be narrowly construed.'"

Under that ruling, the court also ruled that "OPRA's criminal investigatory records exception does not apply to records that are 'required by law to be made, maintained or kept on file.' N.J.S.A. 47:1A-1.1. As a result, the exemption does not cover Use of Force Reports, which the Attorney General requires officers to prepare after the use of deadly force."

Therefore, this request cannot be denied under the exemption of an "ongoing investigation" since they are required under the Attorney General's Use of Force Policy, which has "the force of law for police entities." (NJMG v. Lyndhurst)

If your agency chooses to deny, citing safety concerns, please provide a statement for each incident stating why officer or officers' names "will jeopardize the safety of any person . . . or any investigation in progress" or "would be harmful to a bona fide law enforcement purpose or the public safety." (NJMG v. Lyndhurst)

Please email scanned digital copies of the unredacted original Use Of Force forms as PDFs. If the file is too large, we will accept a CD with the requested documents mailed to the address above.

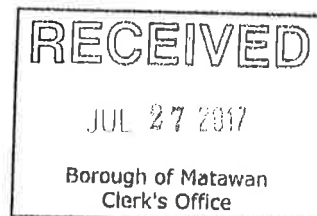
Under penalty of N.J.S.A. 2C:283, I certify that I have not been convicted of any indictable offense under the laws of New Jersey, or any other state, or in the United States.

Please note, this request clearly notes New Jersey's Open Public Record Act, therefore does not need to be on local OPRA forms.

We reserve the right to appeal your decision to withhold any information.

I look forward to your reply via email. We request all correspondence referencing this OPRA be via email.

Thank you for your assistance.
CRAIG MCCARTHY





OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Thomas MI _____ Last Name McCabe
E-mail Address _____
Mailing Address 43 E MAIN ST
City Holmdel State NJ Zip 07733
Telephone _____ 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 Thomas McCabe Date 7/28/17

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.

OPEN PLUMBING PERMIT
closed
OPEN ELECTRICAL PERMIT
closed
OPEN CONSTRUCTION PERMIT
closed
2 WYCKOFF STREET
MATAWAN NJ 07747

AGENCY USE ONLY

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 7-28-17
Ready Date 8-8-17
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

8-7-17
- File complete
- see attached email
(110)

Karen Wynne Clark 7-28-17
Custodian Signature Date

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

File - Completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Ben MI — Last Name Lynovsky
 E-mail Address _____
 Mailing Address 50 US Highway 9, Suite 202
 City Morganville State NJ Zip 07751
 Telephone — 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 7/31/17

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.

Motor Vehicle Accident Reports
From 7/24/17 Through 7/30/17

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 7/31/17
 Ready Date 8/9/17
 Total Pages _____
Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____
 Records Provided
8/9/17
- File complete
- See attached email (K)
[Signature] 7/31/17
 Custodian Signature Date

File - Completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747

Karen Wynne, RMC
(732) 566-3898 ext. 602

Fax (732) 290-7585

karen.wynne@matawanborough.com



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 Karen MI B. Last Name Miller
E-mail Address _____
Mailing Address McGovern Legal Services, LLC; PO Box 1111
City New Brunswick State NJ Zip 08903
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 [Signature] Date 7/31/17

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.

Please provide a complete copy of the recording of the January 17, 2017 Borough Council meeting.

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	<u>7-31-17</u>	Deposit	_____
Ready Date	<u>8-2-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
<u>8-2-17</u> <u>File complete</u> <u>See attached email</u>			
Custodian Signature <u>[Signature]</u>		Date <u>7-31-17</u>	

File - Completed OPRA

cc: construction
RK
8/11
via
email

State of New Jersey Standard
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 PrintFirst Name Doris MI Last Name KobzaE-mail Address Mailing Address 4 Dedrick PlaceCity West Caldwell State NJ Zip 07006Telephone 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 8/01/2017**Payment Information**Maximum Authorization Cost \$ 10.00

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.

Please provide a Permit Fee Log Detail Report or Permit Activity July 2017

If the municipality cannot separate new construction houses or additions, then I would like a copy of all residential new construction, renovations, additions and alterations permitted.

Copies can be faxed or emailed using the information above.

I can also pick up the information in person if that is preferred.

I realize there may be charges associated with providing this information. Please call me if there are any questions.

I respect your time and appreciate your help.

Please let me know if you have any suggestions that will help the municipality process this request more efficiently.

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here. In Progress - Open _____ Denied - Closed _____ Filled - Closed _____ Partial - Closed _____	<table border="0"> <tr> <th>Tracking Information</th> <th>Final Cost</th> </tr> <tr> <td>Tracking # _____</td> <td>Total _____</td> </tr> <tr> <td>Rec'd Date <u>8/1/17</u></td> <td>Deposit _____</td> </tr> <tr> <td>Ready Date <u>8/10/17</u></td> <td>Balance Due _____</td> </tr> <tr> <td>Total Pages _____</td> <td>Balance Paid _____</td> </tr> <tr> <td colspan="2">Records Provided <u>8/9/17</u></td> </tr> <tr> <td colspan="2">- File complete - see attached email <u>(E)</u></td> </tr> <tr> <td><u>Rosini Khuyar</u></td> <td><u>8/1/17</u></td> </tr> <tr> <td>Custodian Signature</td> <td>Date</td> </tr> </table>	Tracking Information	Final Cost	Tracking # _____	Total _____	Rec'd Date <u>8/1/17</u>	Deposit _____	Ready Date <u>8/10/17</u>	Balance Due _____	Total Pages _____	Balance Paid _____	Records Provided <u>8/9/17</u>		- File complete - see attached email <u>(E)</u>		<u>Rosini Khuyar</u>	<u>8/1/17</u>	Custodian Signature	Date
Tracking Information	Final Cost																			
Tracking # _____	Total _____																			
Rec'd Date <u>8/1/17</u>	Deposit _____																			
Ready Date <u>8/10/17</u>	Balance Due _____																			
Total Pages _____	Balance Paid _____																			
Records Provided <u>8/9/17</u>																				
- File complete - see attached email <u>(E)</u>																				
<u>Rosini Khuyar</u>	<u>8/1/17</u>																			
Custodian Signature	Date																			

DEPOSITS

The custodian may require a deposit against costs for reproducing documents sought through an anonymous request whenever the custodian anticipates that the documents requested will cost in excess of \$5 to reproduce.

Where a special service charge is warranted under OPRA, that amount will be communicated to you as required under the statute. You have the opportunity to review and object to the charge prior to it being incurred. If, however, you approve of the fact and amount of the special service charge, you may be required to pay a deposit or pay in full prior to reproduction of the documents.

YOUR REQUEST FOR RECORDS IS DENIED FOR THE FOLLOWING REASON(S):

(To be completed by the Custodian of Records – check the box of the numbered exemption(s) as they apply to the records requested. If multiple records are requested, be specific as to which exemption(s) apply to each record. **Response is due to requestor as soon as possible, but no later than seven business days.**)

N.J.S.A. 47:1A-1.1

- ☐ Inter-agency or intra-agency advisory, consultative or deliberative material
- ☐ Legislative records
- ☐ Law enforcement records:
 - ☐ Medical examiner photos
 - ☐ Criminal investigatory records (however, N.J.S.A. 47:1A-3.b. lists specific criminal investigatory information which must be disclosed)
 - ☐ Victims' records
- ☐ Trade secrets and proprietary commercial or financial information
- ☐ Any record within the attorney-client privilege
- ☐ Administrative or technical information regarding computer hardware, software and networks which, if disclosed would jeopardize computer security
- ☐ Emergency or security information or procedures for any buildings or facility which, if disclosed, would jeopardize security of the building or facility or persons therein
- ☐ Security measures and surveillance techniques which, if disclosed, would create a risk to the safety or persons, property, electronic data or software
- ☐ Information which, if disclosed, would give an advantage to competitors or bidders
- ☐ Information generated by or on behalf of public employers or public employees in connection with:
 - ☐ Any sexual harassment complaint filed with a public employer
 - ☐ Any grievance filed by or against an employee
 - ☐ Collective negotiations documents and statements of strategy or negotiating
- ☐ Information that is a communication between a public agency and its insurance carrier, administrative service organization or risk management office
- ☐ Information that is to be kept confidential pursuant to court order
- ☐ Certificate of honorable discharge issued by the United States government (Form DD-214) filed with a public agency
- ☐ Social security numbers

AGENCY NAME HERE

Agency Address

Agency e-mail address

Name of Agency Custodian

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

E-mail Address

Telephone 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 7/31/17

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.

Please see attached

AGENCY USE ONLY

Est. Document Cost

Est. Delivery Cost

Est. Extras Cost _____

Total Est. Cost 1,000,000.00

Deposit Amount

Estimated Balance _____

Deposit Date 2017-07-20 12:00:00

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 8-1-17

Ready Date

Total Pages

Final Cost

Total

Deposit

Balance Due

Balance Paid

Records Provided

Karen Wozniak 8-1-17
Custodian Signature Date
Clerk

Pursuant to the New Jersey Open Public Records Act, New Jersey Common Law Right of Access, I make the request for copies of the following documents.

This document is an attachment request to the O.P.R.A form provided on the municipal website, specifically enumerating the government documents for which I have requested. Respectfully, please do not send by mail, please e-mail information that is in electronic format to

According to N.J.S.A. 47: 1A-5b, which was amended in April of 2008, access to records that are available in electronic and non-printed formats should be provided free of charge.

(1) Township Organizational Chart that includes all departments and personnel with their names and titles.

(2): I am interested in knowing all the public employees and appointees within this jurisdiction. Please provide a list of all employees and appointees and include the following information:

- Employee or appointee name
- Start Date
- % Longevity
- Employee Status (Union, Non-Union, Unclassified, etc.)
- Department
- Job Title
- Salary Step
- Base Salary
- Overtime Pay
- Actual Salary
- Hourly rate (if applicable)

(3A) List of employees, appointees or professionals that are assigned official vehicles exclusively for 24/7 (full time) usage. As clarification, law enforcement or vehicles used in the process of law enforcement are excluded from this request.

(3B) In the event vehicles are assigned to public officials for full time use (24/7) please provide the written policy guidelines concerning the use of these vehicles.

(4A) Please provide us with the following health benefits information for all employees, appointed professionals, and public officials within your jurisdiction.

- Coverage selection plan type or types to include health benefits, prescription benefits, dental care benefits, eye care benefits...

- Coverage tier (example: enrollee only, enrollee and child, enrollee and spouse, family coverage...)

- The cost of coverage (monthly or annual premium) for plans that are available to XXX Twp Employees for all coverage plans and coverage tiers.

(4B) Please provide a list of employees that receive a monetary remuneration (waveout) for opting out of Health Coverage and the amount of such payment, if any.

Pursuant to the New Jersey Open Public Records Act and New Jersey Common Law Right of Access, I make the request for copies of the following documents.

This document is an attachment request to the O.P.R.A form provided on the municipal website, specifically enumerating the government documents for which I have requested. Respectfully, please do not send by mail, please e-mail information that is in electronic format to

According to N.J.S.A. 47: 1A-5b, which was amended in April of 2008, access to records that are available in electronic and non-printed formats should be provided free of charge.

- (1) Please provide the approved budgets for the following years: 2017-2007. Please provide them as separate files.
- (2) Please provide the approved annual audit for the following years: 2017-2012 . Please provide these documents in separate pdf files for each year.
- (3) Please provide the approved resolutions appointing the professionals for the following years of 2017-2012 Please provide these documents in separate pdf files for each year.
- (4) Vendor activity report (detailed) for ALL VENDORS for the years 2017-2012 . Please provide these reports in separate pdf files for each calendar year. Please sort the files according to vendor (If using the Edmunds Financial Software, the Print Sequence should be Vendor Name). Include the aggregate amount for each Vendor for the Calendar year. If using the Edmunds Financial Software, the Report Type should be "Paid" and the "Paid Date Range" should be 1/1/xx to 12/31/xx for each calendar year referred to above. Please select the report format to be "detail". For "Status to include" please select "all".

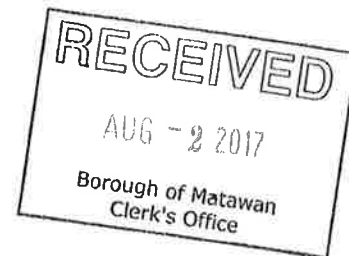
Print Management Solutions
P O Box 350
Trexlerstown, PA 18087

File - Completed OPRA

cc: Finance

kw
8/3
via
email

Open Record Officer
MATAWAN BORO
201 Broad Street
Matawan, NJ 07747



06/15/2017

Re: NJ Open Records Law

Dear Open Records Officer,

Under the provisions of the NJ Open Records Law. We are requesting access to the following information: We are asking for information about your mail machine, or postage equipment from Manufacturers Neopost, Hasler, MailFinance, Francotyp Postalia (FP Mailing), or Pitney Bowes

A copy of the MOST RECENT, CURRENT lease agreements or Most Recent Purchase Order for your current mailing equipment which shows lease commencement date and term of contract for mail machine from vendors Neopost, Hasler, Pitney Bowes, FP Mailing

Or

If the equipment was purchased, we are requesting a copy of your MOST RECENT meter rental bill, equipment rental bill, and maintenance / service contract bill or bill from last service call.

We will entertain suggestions you feel will make my request more responsive and thereby ensure that you can meet our request. If possible we would like to have the data sent to us at the address below.

Please email your request to me at

or mail to my attention at:

Print Management Solutions
Attn: Amy Dorward
P O Box 350
Trexlerstown, PA 18087

If all or any part of this request is denied, please cite the specific exemption(s) that you think justifies your refusal to release the information, and inform me of the appeal procedures available to me under the law.

We would appreciate you handling this request as quickly as possible, and look forward to hearing from you.

Respectfully,

Amy Dorward
P O Box 350
Trexlerstown, PA 18087

File - Completed OPRA

cc. Construction

R/K
8/14
via
Email

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
 karen.wynne@matawanborough.com



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 NINA MI MI Last Name HANNINGSVAAG

E-mail Address _____

Mailing Address 28 JUBILEE CIRCLE

City ABERDEEN State NJ Zip 07141

Telephone _____ 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 Karen Hanningvaag Date 8/6/17

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.

RE: 48 RAVINE DRIVE, BLOCK 82, LOT 11

1. COPY OF DECK PERMITS

2. COPY OF RETAINING WALL 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		Final Cost	
Tracking #		Total	
Rec'd Date	8-2-17	Deposit	
Ready Date	8-11-17	Balance Due	
Total Pages		Balance Paid	
Records Provided			
8/9/17			
- File complete			
- See attached email			
Karen Wynne Clerk		8-2-17	
Custodian Signature		Date	

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747

Karen Wynne, RMC
(732) 566-3898 ext. 602

Fax (732) 290-7585

karen.wynne@matawanborough.com

**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 Feng MI M Last Name Lu
 E-mail Address *
 Mailing Address 150 Woodcliff Blvd
 City Morganville State NJ Zip 07751
 Telephone _____ 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 8/4/17

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.

52 Little St
Matawan NJ 07747

Open and Closed permit for construction, electric.

List of Construction Applications
[Signature]

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
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In Progress _____ Open _____
 Denied _____ Closed _____
 Filled _____ Closed _____
 Partial _____ Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	<u>8/4/17</u>	Deposit	_____
Ready Date	<u>8/15/17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided		_____	
<u>8/4/17</u>		_____	
<u>- File complete</u>		_____	
<u>- see attached email @</u>		_____	
<u>Robin Kluge</u>		<u>8/4/17</u>	
Custodian Signature		Date	

Matawan Borough

OPEN PUBLIC RECORDS ACT REQUEST FORM

Ph: 732-290-1657

Fax: 732-290-7585

Completed OPRA
PUBLIC RECORDScc: Police w
8/7
via
email

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 Jeffrey MI _____ Last Name Dovlin

E-mail Address _____

Mailing Address 2022 WASHINGTON BLVDCity ROBBINSVILLE State NJ Zip 08691

Telephone _____ FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax X E-mail XIf 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 NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.Signature [Signature] Date 8/7/2017

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash _____ Check _____ Money Order _____

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.

Motor vehicle accident reports for the dates listed below. Please email to

Start Date 7/30/2017End Date 8/5/2017

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 8-7-17

Ready Date 8-16-17

Total Pages _____

Final Cost

Total _____

Deposit _____

Balance Due _____

Balance Paid _____

Records Provided

[Signature] 8-7-17
Custodian Signature Date

Completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747

Karen Wynne, RMC
 (732) 566-3898 ext. 602

Fax (732) 290-7585

karen.wynne@matawanborough.com



cc: Police & W
 8/7
 via
 email

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 ben MI Last Name Lynovsky
 E-mail Address
 Mailing Address 50 US Highway 9, Suite 202
 City Morganville State NJ Zip 07751
 Telephone 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 8/7/17

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.

Motor Vehicle Accident Reports
 From 7/31/17 Through 8/6/17

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 # 8-7-17
 Rec'd Date 8-16-17
 Ready Date 8-16-17
 Total Pages
 Records Provided
 Final Cost
 Total
 Deposit
 Balance Due
 Balance Paid
 Custodian Signature [Signature] Date 8-7-17

File - Completed OPRA

cc: Construction

10/14
8/14
via
email

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Subash MI K Last Name Bharadwaj
 E-mail Address _____
 Mailing Address 4 Van Over Dr
 City Old Bridge State NJ Zip 08857
 Telephone _____ 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 S. Bharadwaj Date 8/10/2017

Payment Information

Maximum Authorization Cost \$ _____
 Select Payment Method
 Cash _____ Check _____ Money Order _____
 Fees: Letter size pages - \$0.05 per page
 Legal size pages - \$0.07 per page
 Other materials (CD, DVD, etc) - actual cost of material
 Delivery: Delivery / postage fees additional depending upon delivery type.
 Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

CONTENTS OF BUILDING FILE ON 31 ORCHARD ST, MATAWAN, NJ
 BLOCK 31 LOT 10
~~PLUMBING AND CONSTRUCTION PERMIT APPLICATIONS~~
~~PLUMBING, HEATING, ELECTRICAL PERMIT APPLICATIONS~~
~~INSPECTION REPORTS~~
 CODE VIOLATION NOTICES
 Building PK
 List of 8-14-17
 Construction Applications
 - As per Requester by phone
 8/17/17 CONSTRUCTION DEPARTMENT AS REQUESTED, PLEASE FIND LIST OF APPLICATIONS FOR 31 ORCHARD STREET, BLOCK 31, LOT 10. ALSO, THERE ARE 2 OTHER PERMITS NOT LISTED IN COMPUTER. 85-80/JIMMORA CONSTRUCTION/PLUMBING WORK & 85-104- JIMMORA CONSTRUCTION/RENOVATIONS, REPAIRS & REPLACEMENT LYNN 242

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 _____
 Borough of Matawan
 Clerk's Office
 Custodian Signature Karen Wynne Date 8-14-17

Completed OPRA

cc: police
email 8/14/17State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORMBorough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

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 Ben MI MI Last Name Lymovsky
 E-mail Address MI
 Mailing Address 50 US Highway 9, Suite 202
 City Morganville State NJ Zip 07751
 Telephone MI FAX MI
 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 8/14/17

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.

Motor Vehicle Accident Reports
 From 8/7/17 Through 8/13/17

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 8/14/17
 Ready Date 8/13/17
 Total Pages _____

Final Cost

Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Records Provided

Robin Kluge
 Custodian Signature

8/14/17
 Date

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

Mailing Address 272 La Cascata

City Clementon State NJ Zip 08021

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 [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.

Can you please provide me with a list of the latest quarter's tax delinquent homes with owner's information (i.e. name, mailing addresses, etc) and the total delinquent amount from current to previous year(s) in excel format via email. *As per Requestor property address + total tax due Karen Wignone*

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

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.

8-17-17

Clerk's voice mail

& email confirms

extension to 8-28-17

In Progress Open

Denied Closed

Filled Closed

Partial Closed

AGENCY USE ONLY

Tracking Information

Tracking #

Rec'd Date 8-16-17

Ready Date 8-28-17

Total Pages

Final Cost

Total

Deposit

Balance Due

Balance Paid

Records Provided

8/28/17

- File - complete

- Sent Attached email

[Signature] 8-16-17

Custodian Signature Clerk Date

Completed OPRA

cc: Construction
Fire Prevention
Kw
8/17
vln
pma:1



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Kurtis MI MI Last Name Rainstad
E-mail Address _____
Mailing Address 13 Church Street
City Matawan State NJ Zip 07747
Telephone _____ FAX _____
Preferred Delivery: ☒ Rick ☒ 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 8/16/17

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.

~~Records requested pertain only to the construction/permit file (u)~~
~~of property: 205 Jackson Street Matawan NJ 07747~~
~~Lot 12, Block 37. Request documentation is for~~
List of
Construction applications and copies of installation/removal
of above/underground oil storage tanks 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		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	<u>8-16-17</u>	Deposit	_____
Ready Date	<u>8-25-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>[Signature]</u>		Date <u>8-16-17</u>	

Completed OPRA

cc: Construction
File & retention
KW
VW
emery



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Shirleen MI K Last Name Olahan
E-mail Address _____
Mailing Address 161 WASHINGTON VALLEY Rd Ste 207
City WARREN State NJ Zip 07059
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 [Signature] Date 8/16/17

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.

Owner: Wilmington Savings Bank
Property: 30 Clinton Street BL 34 L7
Aberdeen Township
I request a copy of all permits and approvals for work done at the above referenced property.
List of Construction Applications
Thank you.
- Revised as per telephone conversation 8/17/17

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	<u>8-17-17</u>	Deposit	_____
Ready Date	<u>8-28-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>Karen Wynne</u>		Date <u>8-17-17</u>	

Karen Wynne

From: Karen Wynne
Sent: Thursday, August 17, 2017 2:18 PM
To: 'McBride, Cynthia (RIS-PHL)'
Subject: OPRA Request-McBride
Attachments: Vacant Property Registration List as of August 17, 2017.pdf

Good Afternoon,

Attached please find the requested documentation.

We trust this satisfies this Request and finalizes the matter; however, should you require anything further or have any questions, please do not hesitate to contact our office.

Thank you,

Karen

Karen Wynne, RMC
Borough Clerk
Borough of Matawan
201 Broad Street
Matawan, New Jersey 07747

ext. 602

WARNING: Email received or sent to Borough Officials are subject to the Open Public Records Act (OPRA). If you are in any way concerned about the contents of your email being read by someone other than the person(s) you are contacting, you should consider alternate ways of contacting them.

This message is intended only for the use of the addressees. It may contain privileged and/or confidential information that should not be disclosed under applicable law. If you are not an addressee, or the employee or agent responsible to deliver this message to an addressee, you are notified that any use or dissemination of this message is prohibited, and that you should destroy/delete it immediately and advise the sender. Thank you for your cooperation.

From: McBride, Cynthia (RIS-PHL)
Sent: Thursday, August 17, 2017 12:19 PM
To: _____
Cc: McBride, Cynthia (RIS-PHL)
Subject: 8-17-17 OPRA REQUEST

Good Morning Ms. Wynne/ Matawan Borough Municipal Clerk/Records custodian

Please consider this an official OPRA request.

I am requesting a copy of the list as kept and maintained by the Borough of Matawan of the parcels currently being charged (or just required to register) vacant property registration fees. In addition I am also requesting the specific dollar amounts currently owed or paid on each of these parcels (could be on the same list or a different one) if that information is kept and maintained by the Borough.

Please scan and email this same list to my email address.

Any questions concerning this request please contact me as I can then discuss this with you. Please know that Signature Information does third party searches and this information will be used in that respect in an effort to report and get this registration fee paid upon closing.

Thank you!
Cindy

Cynthia A. McBride C. T. C.

Government Relations Specialist

Signature Information Solutions

Home of Charles Jones & Data Trace products and services

300 Phillips Blvd Suite 400

Trenton, NJ 08650-0488

 Please consider the environment before printing



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Completed O PRA

cc: police
email
8/21/17

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 802
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Ben MI MI Last Name Lynovsky

E-mail Address

Mailing Address 50 US Highway 9, Suite 202
City Morristown State NJ Zip 07757

Telephone _____ 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. C: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 8/21/17

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.

Motor Vehicle Accident Reports
From 8/14/17 Through 8/20/17

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 8/21/17
Ready Date 8/30/17
Total Pages _____

Final Cost

Total	_____
Deposit	_____
Balance Due	_____
Balance Paid	_____

Records Provided

Robin Kluger
Custodian Signature

8/21/11
Date

File - Completed OPRA

Bla... email
8/23/17

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Jeff MI MI Last Name Henningsen
 E-mail Address _____
 Mailing Address 788 Shrewsbury Ave, Suite 2209
 City Tinton Falls State NJ Zip 07724
 Telephone 1-201-261-1111 FAX 1-201-261-1111
 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 NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
 Signature [Signature] Date 8/22/17

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.

Requesting all criminal records (especially theft, burglaries) against any person or the property located at
 301 Broad St, Matawan, NJ (20 years)
 and
 62 Route 79, Matawan

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.

9/1/17
 Clerk's email of today requested extension - see attached Karen Wynne
 In Progress - Open
 Denied - Closed
 Filled - Closed
 Partial - Closed

AGENCY USE ONLY

Tracking Information

Tracking # 8/23/17
 Rec'd Date 8/23/17
 Ready Date 9/1/17
 Total Pages _____

Final Cost

Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Records Provided

9-8-17
 - File complete
 - see attached email
 Robin Klynn
 Custodian Signature
 Date 8/23/17

File - completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



cc Tax collector
 Water Dept
 Construction
 Fire Prevention
 Code Enforcement
 email 8/24/17

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 Kaya MI 7 Last Name Sawczuk
 E-mail Address _____
 Mailing Address 402 Gallya Grove
 City Morristown State N.J. Zip 07751
 Telephone _____ 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 08/23/17

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.

Is this a commercial zone. 1022 Hwy 34
 Are there any liens on the property. Block 120.01
 Are there any violations. Construction, code enforcement - copies
 Are there any permits opened that have not been closed. copies of open
 Are there any construction done without permits. Closed permits
 Are there any other faults with the property that I should know.

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	<u>8/24/17</u>	Deposit	
Ready Date	<u>9/5/17</u>	Balance Due	
Total Pages		Balance Paid	
Records Provided			
<u>9-5-17</u>			
<u>- File complete</u>			
<u>- See attached email</u>			
Custodian Signature <u>[Signature]</u>		Date <u>8/24/17</u>	

completed OPRA

cc: foster

BK
8/28
via
email

State of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 556-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

**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 Ben MI Last Name Lynovsky
E-mail Address
Mailing Address 50 US Highway 9, Suite 202
City Morganville State NJ Zip 07757
Telephone 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 8/28/17

Payment InformationMaximum 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.

MOTOR VEHICLE Accident Reports
From 8/21/17 Through 8/27/17

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 8/28/17
Ready Date 9/7/17
Total Pages

Final Cost

Total
Deposit
Balance Due
Balance Paid

Records Provided

Robin Kling
Custodian Signature

8/28/17
Date

Karen Wynne

From: _____ FOIA >
Sent: Friday, August 18, 2017 6:39 PM
To:
Subject: Freedom of Information Act Request: Building Permit Records

To whom it may concern, I am writing to request permit records from Matawan, New Jersey on behalf of Buildzoom. BuildZoom helps people hire the best local contractors, and we strive to give consumers a clear picture of contractors' track records. In particular, we post information on building permits pulled by every contractor online as a free service to the public. We do business in Matawan and would like to provide the service to its residents. Can you please provide us with a report of all building permits processed by your department to date? Such reports typically: - Are referred to as a Permit Activity Report, a Permit Fee Log or a Monthly Permit Report. - Cover at least the last ten years. - Include all permits broadly related to work on new and existing structures, such as structural, electrical, plumbing, mechanical, demolition, solar, HVAC, and gas permits, as well as any other kind of permit related to construction, renovation and maintenance. - Contain (i) property address fields, (ii) permit type fields, (iii) a permit value or estimated job value, (iv) a permit status field and (v) dates associated with the permit, such as an application date, an issue date and an expiry date, as well as (vi) the details of the contractor(s) who performed the work and, of course, (vii) a description of the permitted work. We would like to request the records either via FTP or email delivery. An Excel or CSV format would be ideal, but a PDF or scanned file would also work. We intend to ask for this data regularly: monthly for the prior month. What do you recommend as the best process to acquire this data? Please feel free to email me or call Vidhan Agrawal, the Product Manager for our Data Platform at assistance! We greatly appreciate your help and thank you in advance for your

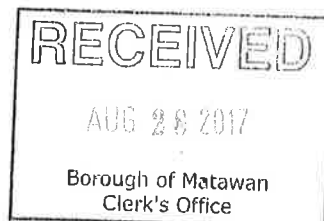
--
BuildZoom

A better way to remodel

301 Howard Street, Suite 1410

San Francisco, CA, 94105

www.buildzoom.com



Ready Date: 9/7/17

Karen Wynne
Municipal Clerk

File - Completed OPRA

Construction
cc: Prevention
Kup
8/28
wa
email



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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

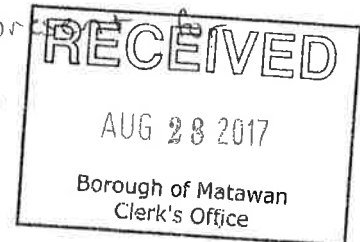
First Name Robert MI G Last Name Goodman
E-mail Address _____
Mailing Address 171 Main Street
City Woodbridge State NJ Zip 07095
Telephone _____ FAX _____
Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail ☒
If you are requesting records containing personal information, 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 Robert Goodman Date _____

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.

Request for any variance applications and/or certificate of occupancy requests made from January 2013- present
278 Broad Street, Matawan, NJ.
B49/L31.01



AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

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

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

In Progress	-	Open	_____
Denied	-	Closed	_____
Filled	-	Closed	_____
Partial	-	Closed	_____

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	<u>8-28-17</u>	Deposit	_____
Ready Date	<u>9-7-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
<u>9/8/17</u> - File Complete - See attached email			
Custodian Signature <u>Karen Wynne</u>		Date <u>8-28-17</u>	

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Kristine MI L Last Name Opaleski

E-mail Address _____

Mailing Address 19 Morford Pl, Apt 2E

City Red Bank State NJ Zip 07701

Telephone _____ 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 Kristine L Opaleski Date Aug/29/17

Payment Information

Maximum Authorization Cost \$ 50.00

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.

I would like to request a copy of open and closed permits for 18 Orchard St, Matawan, NJ 07747: Roofing, Siding, Porches, Satellite dish/solar panels, Air Conditioning, Heating Conversion or Replacements, Water Heaters, Oil Tank Removals/Sandfills/Petrofills, Oil Tank Installation, Gas Piping, Replace/Upgrade Electrical Service, Lawn Sprinkler Systems, Basement Renovations, Fireplace/Wood Stoves, Water Connections, Radon Mitigation, Fire & Burglar Alarm Systems, Propane Tanks, Generators

delivered via email if possible

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 <u>8-30-17</u>	Deposit		
Ready Date <u>9-11-17</u>	Balance Due		
Total Pages	Balance Paid		
Records Provided			
<u>9-11-17</u>			
- File complete			
- see attached email			
Custodian Signature <u>Karen Wynne</u>		Date <u>8-30-17</u>	

completed OFRA

c.c: Construction
Kobza
9/1

State of New Jersey Standard
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 Doris MI Last Name Kobza
 E-mail Address
 Mailing Address 4 Dedrick Place
 City West Caldwell State NJ Zip 07006
 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 [Signature] Date 9/01/2017

Payment InformationMaximum Authorization Cost \$ 10.00

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.

Please provide a Permit Fee Log Detail Report or Permit Activity August 2017

If the municipality cannot separate new construction houses or additions, then I would like a copy of all residential new construction, renovations, additions and alterations permitted.

Copies can be faxed or emailed using the information above.

I can also pick up the information in person if that is preferred.

I realize there may be charges associated with providing this information. Please call me if there are any questions.

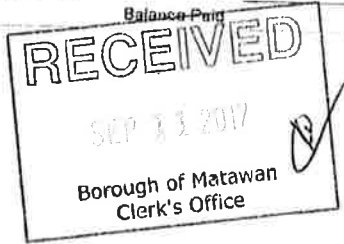
I respect your time and appreciate your help.

Please let me know if you have any suggestions that will help the municipality process this request more efficiently.

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition Notes Custodian: if any part of request cannot be delivered in seven business days, detail reasons here. In Progress _____ Denied _____ Filled _____ Partial _____ Open _____ Closed _____ Closed _____ Closed _____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Tracking Information</th> <th style="text-align: left;">Final Cost</th> </tr> <tr> <td>Tracking # _____</td> <td>Total _____</td> </tr> <tr> <td>Rec'd Date <u>9-1-17</u></td> <td>Deposit _____</td> </tr> <tr> <td>Ready Date <u>9-13-17</u></td> <td>Balance Due _____</td> </tr> <tr> <td>Total Pages _____</td> <td>Balance Paid _____</td> </tr> <tr> <td>Records Provided _____</td> <td></td> </tr> </table>  Custodian Signature <u>[Signature]</u> Clerk Date <u>9-1-17</u>	Tracking Information	Final Cost	Tracking # _____	Total _____	Rec'd Date <u>9-1-17</u>	Deposit _____	Ready Date <u>9-13-17</u>	Balance Due _____	Total Pages _____	Balance Paid _____	Records Provided _____	
Tracking Information	Final Cost													
Tracking # _____	Total _____													
Rec'd Date <u>9-1-17</u>	Deposit _____													
Ready Date <u>9-13-17</u>	Balance Due _____													
Total Pages _____	Balance Paid _____													
Records Provided _____														

DEPOSITS

The custodian may require a deposit against costs for reproducing documents sought through an anonymous request whenever the custodian anticipates that the documents requested will cost in excess of \$5 to reproduce.

Where a special service charge is warranted under OPRA, that amount will be communicated to you as required under the statute. You have the opportunity to review and object to the charge prior to it being incurred. If, however, you approve of the fact and amount of the special service charge, you may be required to pay a deposit or pay in full prior to reproduction of the documents.

YOUR REQUEST FOR RECORDS IS DENIED FOR THE FOLLOWING REASON(S):

(To be completed by the Custodian of Records – check the box of the numbered exemption(s) as they apply to the records requested. If multiple records are requested, be specific as to which exemption(s) apply to each record. Response is due to requestor as soon as possible, but no later than seven business days.)

N.J.S.A. 47:1A-1.1

- ☒ Inter-agency or intra-agency advisory, consultative or deliberative material
- ☒ Legislative records
- ☒ Law enforcement records:
 - ☒ Medical examiner photos
 - ☒ Criminal investigatory records (however, N.J.S.A. 47:1A-3.b. lists specific criminal investigatory information which must be disclosed)
 - ☒ Victims' records
- ☒ Trade secrets and proprietary commercial or financial information
- ☒ Any record within the attorney-client privilege
- ☒ Administrative or technical information regarding computer hardware, software and networks which, if disclosed would jeopardize computer security
- ☒ Emergency or security information or procedures for any buildings or facility which, if disclosed, would jeopardize security of the building or facility or persons therein
- ☒ Security measures and surveillance techniques which, if disclosed, would create a risk to the safety or persons, property, electronic data or software
- ☒ Information which, if disclosed, would give an advantage to competitors or bidders
- ☒ Information generated by or on behalf of public employers or public employees in connection with:
 - ☒ Any sexual harassment complaint filed with a public employer
 - ☒ Any grievance filed by or against an employee
 - ☒ Collective negotiations documents and statements of strategy or negotiating
- ☒ Information that is a communication between a public agency and its insurance carrier, administrative service organization or risk management office
- ☒ Information that is to be kept confidential pursuant to court order
- ☒ Certificate of honorable discharge issued by the United States government (Form DD-214) filed with a public agency
- ☒ Social security numbers

cc: ~~Construction~~
~~Property Maint.~~
KW
9/1
via
email



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

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.	

Add : 7 Lakeland Road, Matawan, NJ - 7747

AGENCY USE ONLY	
Tracking Information	Final Cost
Tracking #	Total
Rec'd Date <u>9-1-17</u>	Deposit
Ready Date <u>9-13-17</u>	Balance Due
Total Pages	Balance Paid
Records Provided	
 Custodian Signature <u>9-1-17</u> Date	

Matawan Borough

OPEN PUBLIC RECORDS ACT REQUEST FORM

Ph: 732-290-1657

Fax: 732-290-7585

Completed OPRA
PUBLIC RECORDScc: Police
RIS
9/5
via
email

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 Jeffrey MI Last Name Devlin
E-mail Address
Mailing Address 2022 WASHINGTON BLVD
City ROBBINSVILLE State NJ Zip 08691
Telephone FAX
Preferred Delivery: Pick Up US Mail On-Site Inspect Fax X 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 NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature [Signature] Date 9/4/2017

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

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.

Motor vehicle accident reports for the dates listed below. Please email to

Start Date 8/27/2017End Date 9/2/2017

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		Final Cost	
Tracking #	<u>9-5-17</u>	Total	<u> </u>
Rec'd Date	<u>9-14-17</u>	Deposit	<u> </u>
Ready Date	<u>9-14-17</u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>
Records Provided			
Custodian Signature <u>[Signature]</u>		Date <u>9-5-17</u>	

Completed OPRA

cc Police
RK
9/5
nr
CmmtState Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORMBorough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 586-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

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 Ben MI Last Name Lymovsky
E-mail Address
Mailing Address 50 US Highway 9, Suite 202
City Morganville State NJ Zip 07751
Telephone 732-290-7585 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 offenses under the laws of New Jersey, any other state, or the United States.
Signature [Signature] Date 9/5/17

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.

Motor Vehicle Accident Reports
From 8/28/17 Through 9/4/17

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 # 9-5-17
Rec'd Date 9-14-17
Ready Date
Total Pages
Balance Due
Balance Paid

Final Cost

Records Provided

Custodian Signature [Signature] Date 9-5-17

completed OPRA

cc: Construction
Fire Prevention
Jaelma
9/5/17



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Dave MI Last Name Meisels
E-mail Address maxine@meisels.com
Mailing Address P.O. Box 2008
City Teaneck State NJ Zip 07666
Telephone
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 Dave Date 8/28/17

Payment Information

Maximum Authorization Cost \$ None
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.

RE: 1022 Rt 34. Block 120.01 Lot 12.

This property is located in the R-75 according to the 2015 zoning map.
The last use of the property was a commercial florist. Is there a variance issued? Could the property be used for commercial?

There is no kitchen or shower in the building.

In addition, was there a c.o. or similar certificate issued to the florist?

Thank You

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.

RECEIVED

Borough of Matawan
Clerk's Office

In Progress Open
Denied Closed
Filled Closed
Partial Closed

AGENCY USE ONLY

Tracking Information

Tracking #
Rec'd Date 9-5-17
Ready Date 9-14-17
Total Pages

Final Cost

Total
Deposit
Balance Due
Balance Paid

Records Provided

Custodian Signature Karen Wynne Clerk

Date 9-5-17

Completed OPRA

— Construction
 — Property Maint.
 — Tax Collector ✓
 — Water/Sewer Clerk ✓



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747

Karen Wynne, RMC
(732) 566-3898 ext. 602

Fax (732) 290-7585
 karen.wynne@matawanborough.com

**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 Nicole MI A Last Name Guesseco
 E-mail Address _____
 Mailing Address 521 Ambury Ave
 City Woodbridge State NY Zip 07095
 Telephone _____ FAX _____
 Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax X 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 9/6/17

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.

I would like any pertinent information for a property located at 21 Park Ave, Matawan NJ 07747 Block: 19 Lot: 11 within the last 10 years regarding: As per Requestor,
 - open & closed permits Construction, electrical, plumbing
 - liens & judgement tax lien, sewer lien
 - code violation Property code violation
 - fines water/sewer account statement
 - water/sewer bills past due.

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 9-6-17
 Ready Date 9-15-17
 Total Pages _____
Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____
 Records Provided _____
 Custodian Signature [Signature] Date 9-6-17

File - Completed OPRA

cc: Police
email 9/11/17
RKState Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORMBorough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

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 Ben MI Last Name Lynovsky
E-mail Address
Mailing Address 50 US Highway 9, Suite 202
City Morristown State NJ Zip 07757
Telephone 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 9/11/17

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.

Motor Vehicle Accident Reports
From 9/4/17 Through 9/16/17

RECEIVED

SEP 11 2017

Borough of Matawan
Clerk's Office

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 9/11/17
Ready Date 9/20/17
Total Pages

Final Cost

Total
Deposit
Balance Due
Balance Paid

Records Provided

9-21-17
- File complete
- See attached email from WynneRobin Klynova 9/11/17
Custodian Signature Date

OPEN PUBLIC RECORDS ACT REQUEST FORM

Fax: 732-290-7585

Completed OPRA
PUBLIC RECORDS

Q: Police
Edward G. Hill
RA

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

Payment Information

Signature Date 9/18/2017

Cash	Check	Money Order
------	-------	-------------

End Date 9/16/2017

AGENCY USE ONLY

Deposit Date _____

Partial Closed

Records Provided

Robin Klinge 9/18/17
Custodian Signature Date

Completed OPRA

cc: Police
email 9/18/17
KAW

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 802
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 ben MI Last Name Lynovsky
 E-mail Address
 Mailing Address 50 US Highway 9, Suite 202
 City Morristown State NJ Zip 07751
 Telephone FAX
 Preferred Delivery: Pick Up US Mail On-Site Fax E-mail ✓
 If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 17:28-3, 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 9/18/17

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.

Motor Vehicle Accident Reports
 From 9/11/17 Through 9/17/17

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 9-18-17
 Ready Date 9-27-17
 Total Pages

Final Cost

Total
 Deposit
 Balance Due
 Balance Paid

Records Provided

[Signature] Clerk 9-18-17
 Custodian Signature Date



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Tara MI _____ Last Name Vargo
E-mail Address _____
Mailing Address PO Box 647
City Franklinville State NJ Zip 08322
Telephone _____ 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 Tara Vargo Date 9-15-17

Payment Information

Maximum Authorization Cost \$ 30.00
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.

- A Planning/zoning board file for Minor Subdivision application of Lots 14, 15, 16, 16.01, 17, 18, 32 & 33, Block 1, dated 1995, specifically survey maps and related documents concerning the minor subdivision and the vacation of a portion of Water Street for incorporation into lot 14.01, Block 1.
- B Planning/zoning board file for Major Site Plan, Block 2, Lot 6, specifically boundary survey and site plan maps dated 1997 through 1999.
- C Planning/zoning bd files, if any, for Block 2, Lot 2; Block 2, Lot 7; and Block 3, Lot 1.
- on-site file inspection*

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	<u>9-18-17</u>	Deposit	_____
Ready Date	<u>9-27-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>Karen Wynne Clerk</u>		Date <u>9-18-17</u>	

Completed

Karen Wynne

From: Luisa Rancapan
Sent: Tuesday, September 19, 2017 4:15 PM
To:
Subject: RE: Retail & Residential @ Former C-Town Foodmarket Site

Good Afternoon Karen,

I would like to request for a copy of the planning board application that includes the name address and telephone number of the applicant or developer that is working on the Retail & Residential @ Former C-Town Food market Site (Block: 24 Lot: 3). May I also request for a copy of the permit application that includes the name of the building general contractor on this project. Thank you so much for your help.

Luisa Rancapan
Planning Reporter
Construction Information Systems

cc: ~~Construction~~
- ~~Property Maint.~~
email 9/21/11



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

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

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.	

- List of Construction Applications
- List of Property Maintenance Violation Notices

Steven Wayne

AGENCY USE ONLY

AGENCY USE ONLY		AGENCY USE ONLY	
Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.	Tracking Information Tracking # _____ Rec'd Date <u>9-20-17</u> Ready Date <u>9-29-17</u> Total Pages _____	Final Cost Total _____ Deposit _____ Balance Due _____ Balance Paid _____ Records Provided _____
	In Progress - Open _____ Denied - Closed _____ Filled - Closed _____ Partial - Closed _____	 Custodian Signature Clerk <u>9-20-17</u> Date	

From: Karen Wynne
To:
Cc: Peggy L. Warren; Kathi Fitzgerald
Subject: Monmouth County OPRA Request - Matawan
Date: Wednesday, September 20, 2017 3:36:56 PM
Attachments: Tax Delinquent OPRA Request Form.pdf

Thank you, Amy –

Karen

Karen Wynne, RMC
Borough Clerk
Borough of Matawan
201 Broad Street
Matawan, New Jersey 07747

ext. 602
FAX (732) 290-7585

WARNING: Email received or sent to Borough Officials are subject to the Open Public Records Act (OPRA). If you are in any way concerned about the contents of your email being read by someone other than the person(s) you are contacting, you should consider alternate ways of contacting them.

This message is intended only for the use of the addressees. It may contain privileged and/or confidential information that should not be disclosed under applicable law. If you are not an addressee, or the employee or agent responsible to deliver this message to an addressee, you are notified that any use or dissemination of this message is prohibited, and that you should destroy/delete it immediately and advise the sender. Thank you for your cooperation.

From: Amy Han [mailto:
Sent: Wednesday, September 20, 2017 3:27 PM
To:
Subject: Monmouth County OPRA Request - Matawan

Hello,

I have requested for a list of delinquent homes back a few weeks ago. I have attached the OPRA request again and confirm this request has been received.

I have also included the instructions below on how to generate this report in excel in the Edmund System, hope this helps.

Tax Custom Report:

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

Page 2: Select 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

To attach, go into documents and select file at the very bottom where it asks for the file type(all). Use drop down to select the file.

Thanks in advance,

--

Amy Han

Today is the BEST day ever !!!



Matawan Borough

OPEN PUBLIC RECORDS ACT REQUEST FORM

Ph: 732-290-1657

Fax: 732-290-7585

Completed OPRA
PUBLIC RECORDScc: Police
email 9/25/17
C.A.D.

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 Jeffrey MI Last Name DevlinE-mail Address Mailing Address 2022 WASHINGTON BLVDCity ROBBINSVILLE State NJ Zip 08691Telephone FAX Preferred Delivery: Pick Up US Mail On-Site Inspect Fax X E-mail XIf 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 NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.Signature [Signature] Date 9/25/2017

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash Check Money Order

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.

Motor vehicle accident reports for the dates listed below. Please email to

s1.

Start Date 9/17/2017End Date 9/23/2017

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		Final Cost	
Tracking #	<u> </u>	Total	<u> </u>
Rec'd Date	<u>9/29/17</u>	Deposit	<u> </u>
Ready Date	<u>10/4/17</u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>

Records Provided

[Signature]
Custodian Signature

9/25/17
Date

Completed CPRA

cc: Potter
email 9/25/17
PM

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 ben MI Last Name Lynovsky
 E-mail Address
 Mailing Address 50 US Highway 9, Suite 202
 City Morganville State NJ Zip 07751
 Telephone 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. 17:28-3, 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 9/25/17

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.

Motor Vehicle Accident Reports
From 9/18/17 Through 9/24/17

AGENCY USE ONLY

Est. Document Cost
 Est. Delivery Cost
 Est. Extra 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 9/25/17
 Ready Date 10/4/17
 Total Pages

Final Cost

Total
 Deposit
 Balance Due
 Balance Paid

Records Provided

[Signature]
 Custodian Signature

9/25/17
 Date

File - Completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747

Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585

karen.wynne@matawanborough.com



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 Matt MI 12 Last Name Friedman
E-mail Address _____
Mailing Address 369 5th St #9
City Jersey City State NJ Zip 07302
Telephone _____ 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 9/21/17

Payment Information

Maximum Authorization Cost \$ 100
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 resolutions or agreements regarding the hiring of Rainone, Goughlin and Minichello, LLC since January 1, 2017. Any and all invoices from and records of payments to the firm.

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 _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	<u>9-25-17</u>	Total	_____
Rec'd Date	<u>10-4-17</u>	Deposit	_____
Ready Date	<u>10-4-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
<u>9-25-17</u> - File complete - See attached email @ Karen Wynne Clerk 9-25-17			

cc: Construction
KW
via email
9/26



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

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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.	

List of Construction Applications *

Thank you very much for your time. * See attached email kw

AGENCY USE ONLY		AGENCY USE ONLY	
Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here. In Progress - Open _____ Denied - Closed _____ Filled - Closed _____ Partial - Closed _____	Tracking Information Tracking # Total Rec'd Date 9-25-17 Ready Date 10-4-17 Total Pages _____ <u>10-3-17</u> - File complete - See attached email KW <i>[Signature]</i> Clerk 9-25-17 Custodian Signature Date	Final Cost Deposit _____ Balance Due _____ Balance Paid _____

File - Completed OPRA

cc: Construction email 9/29/17

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
 karen.wynne@matawanborough.com



Important Notice

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Requestor Information - Please Print

First Name MUKESH MI MI Last Name GUPTA

E-mail Address m.gupta@princeton.edu

Mailing Address 343 Nassau St

City Princeton State NJ Zip 08540

Telephone 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 Mukesh Gupta Date 9/28/17

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.

Please send me a copy of List of Construction Application for, 208 Broad St, Matawan, NJ 07747
 Block #38 Lot # 403
 Thanking

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 9-29-17

Ready Date 10-11-17

Total Pages

Final Cost

Total

Deposit

Balance Due

Balance Paid

Records Provided

10-6-17
 - File complete
 - See attached email KW

Karen Wynne 9-29-17
 Custodian Signature Click Date

Completed OPRA

cc: Police
email 10/2/17
KAW

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
 201 Broad Street, Matawan, New Jersey 07747
 Karen Wynne, RMC
 (732) 586-3898 ext. 602
 Fax (732) 290-7585
 karen.wynne@matawanborough.com



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 Ben MI 1 Last Name Lynovsky
 E-mail Address _____
 Mailing Address 50 US Highway 9, Suite 202
 City Morristown State NJ Zip 07757
 Telephone _____ 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. 17:28-3, 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

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.

Motor Vehicle Accident Reports
From 9/25/17 Through 10/1/17

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 #	<u>10/2/17</u>	Total	_____
Rec'd Date	<u>10/12/17</u>	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
<u>[Signature]</u> Custodian Signature		<u>10/2/17</u> Date	

completed OPRA

cc: ~~construction~~

State of New Jersey Standard
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 Doris MI MI Last Name Kobza
 E-mail Address _____
 Mailing Address 4 Dedrick Place
 City West Caldwell State NJ Zip 07006
 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 [Signature] Date 10/02/2017

Payment Information

Maximum Authorization Cost \$ 10.00
 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.

Please provide a Permit Fee Log Detail Report or Permit Activity September 2017

If the municipality cannot separate new construction houses or additions, then I would like a copy of all residential new construction, renovations, additions and alterations permitted.

Copies can be faxed or emailed using the information above.

I can also pick up the information in person if that is preferred.

I realize there may be charges associated with providing this information. Please call me if there are any questions.

I respect your time and appreciate your help.

Please let me know if you have any suggestions that will help the municipality process this request more efficiently.

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.	Tracking Information Tracking # _____ Rec'd Date <u>10/2/17</u> Ready Date <u>10/12/17</u> Total Pages _____ Records Provided _____ <u>Robin Khryer</u> _____ Custodian Signature Date	Final Cost Total _____ Deposit _____ Balance Due _____ Balance Paid _____
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DEPOSITS

The custodian may require a deposit against costs for reproducing documents sought through an anonymous request whenever the custodian anticipates that the documents requested will cost in excess of \$5 to reproduce.

Where a special service charge is warranted under OPRA, that amount will be communicated to you as required under the statute. You have the opportunity to review and object to the charge prior to it being incurred. If, however, you approve of the fact and amount of the special service charge, you may be required to pay a deposit or pay in full prior to reproduction of the documents.

YOUR REQUEST FOR RECORDS IS DENIED FOR THE FOLLOWING REASON(S):

(To be completed by the Custodian of Records – check the box of the numbered exemption(s) as they apply to the records requested. If multiple records are requested, be specific as to which exemption(s) apply to each record. **Response is due to requestor as soon as possible, but no later than seven business days.**)

N.J.S.A. 47:1A-1.1

- Inter-agency or intra-agency advisory, consultative or deliberative material
- Legislative records
- Law enforcement records:
- Medical examiner photos
 - Criminal investigatory records (however, N.J.S.A. 47:1A-3.b. lists specific criminal investigatory information which must be disclosed)
 - Victims' records
- Trade secrets and proprietary commercial or financial information
- Any record within the attorney-client privilege
- Administrative or technical information regarding computer hardware, software and networks which, if disclosed would jeopardize computer security
- Emergency or security information or procedures for any buildings or facility which, if disclosed, would jeopardize security of the building or facility or persons therein
- Security measures and surveillance techniques which, if disclosed, would create a risk to the safety or persons, property, electronic data or software
- Information which, if disclosed, would give an advantage to competitors or bidders
- Information generated by or on behalf of public employers or public employees in connection with:
- Any sexual harassment complaint filed with a public employer
 - Any grievance filed by or against an employee
 - Collective negotiations documents and statements of strategy or negotiating
- Information that is a communication between a public agency and its insurance carrier, administrative service organization or risk management office
- Information that is to be kept confidential pursuant to court order
- Certificate of honorable discharge issued by the United States government (Form DD-214) filed with a public agency
- Social security numbers

Matawan Borough

OPEN PUBLIC RECORDS ACT REQUEST FORM

Ph: 732-290-1657

Fax: 732-290-7585

Completed OPRA
PUBLIC RECORDS

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

Payment Information

First Name	Christina	MI		Last Name	Mota
E-mail Address					
Mailing Address	2022 WASHINGTON BLVD				
City	ROBBINSVILLE	State	NJ	Zip	08691
Telephone			FAX		
Preferred Delivery:	Pick Up	US Mail	On-Site Inspect	Fax	E-mail
				X	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 NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.					
Signature	Christina Mota			Date	10/9/2017

Maximum Authorization Cost \$

Select Payment Method

Cash Check Money Order

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.

Motor vehicle accident reports for the dates listed below. Please email to

Start Date 10/1/2017

End Date 10/7/2017

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		Final Cost	
Tracking #		Total	
Rec'd Date	10/10/17	Deposit	
Ready Date	10/19/17	Balance Due	
Total Pages		Balance Paid	
Records Provided			
Robin Kluge		10/10/17	
Custodian Signature		Date	

cc: Police
via email
10/10/17

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
 201 Broad Street, Matawan, New Jersey 07747
 Karen Wynne, RMC
 (732) 566-3898 ext. 602
 Fax (732) 290-7585
 karen.wynne@matawanborough.com



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 Ben MI --- Last Name Lynovsky
 E-mail Address _____
 Mailing Address 50 US Highway 9, Suite 209
 City Morristown State NJ Zip 07751
 Telephone _____ 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. C:2B-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 10/9/17

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.

Motor Vehicle Accident Reports
 From 10/2/17 Through 10/8/17

AGENCY USE ONLY

Est. Document Cost _____
 Est. Delivery Cost _____
 Est. Extra Cost _____
 Total Est. Cost _____
 Deposit Amount _____
 Estimated Balance _____
 Deposit Date _____

AGENCY USE ONLY

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

In Progress _____ Open _____
 Denied _____ Closed _____
 Filled _____ Closed _____
 Partial _____ Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____ Total _____
 Rec'd Date 10/10/17 Deposit _____
 Ready Date 10/19/17 Balance Due _____
 Total Pages _____ Balance Paid _____

Records Provided

[Signature]
 Custodian Signature

10/10/17
 Date

From:
To:
Subject: SmartProcure OPRA Request Borough Of Matawan For PO/Vendor Information
Date: Wednesday, October 11, 2017 7:30:24 AM
Attachments: [Preprogrammed Software Reports by Manufacturer.pdf](#)

Dear Karen or Custodian of Public Records,

SmartProcure is submitting an OPRA request to the Borough Of Matawan for purchasing records from 2017-07-07 to current. The request is limited to readily available records without physically copying, scanning or printing paper documents. Any editable electronic document is acceptable.

The specific information requested from your record keeping system is:

1. Purchase order number. If purchase orders are not used a comparable substitute is acceptable, i.e., invoice, encumbrance, or check number
2. Purchase date
3. Line item details (Detailed description of the purchase)
4. Line item quantity
5. Line item price
6. Vendor ID number, name, address, contact person and their email address

The attached document may be helpful as a reference to fulfill this request if the Borough Of Matawan stores the records using any of the pre-programmed software reports, but the records request is not limited to the reports listed.

Please email the information or use the following web link. There is no file size limitation:

If this request was misrouted, please forward to the correct contact person and reply to this communication with the appropriate contact information.

If you have any questions, please feel free to respond to this email or I can be reached at :

Regards,

Curtis Blanding

Data Acquisition Specialist

SmartProcure

Direct:

Email: curtis@www.smartprocure.us

700 W. Hillsboro Blvd. Suite 4-100, Deerfield Beach, FL 33441

completed OPRA

cc: Police email 10/16/17



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747

Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Ben MI --- Last Name Lynovskiy
E-mail Address ---
Mailing Address 50 US Highway 9, Suite 202
City Morganville State NJ Zip 07751
Telephone --- 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. 17:28-3, 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 10/16/17

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.

Motor Vehicle Accident Reports
From 10/9/17 Through 10/15/17

AGENCY USE ONLY

Est. Document Cost ---
Est. Delivery Cost ---
Est. Extra Cost ---
Est. Mail 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 10-16-17
Ready Date 10-25-17
Total Pages ---

Final Cost

Total ---
Deposit ---
Balance Due ---
Balance Paid ---

Records Provided

Custodian Signature

[Signature] 10-16-17
Date

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747

Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585

karen.wynne@matawanborough.com



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 Karen MI _____ Last Name Hippner

E-mail Address _____

Mailing Address Davison, Eastman, Munoz

City Freehold State NJ Zip 07728

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 Karen Hippner Date 10/16/2017

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash ☐ Check ☒ Money Order ☐

Fees: Letter size pages - \$0.05 per page

Legal size pages - \$0.07 per page

Other materials (CD, DVD, etc) - actual cost of material

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

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Matawan Building Department - Approved Plot Plan and Survey prepared by Richard Heuser, PE dated April 13, 2004 in relation to construction by Dudas Builders on 2 Monroe Street, Matawan Lot 51, Block 29

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 10-16-17
 Ready Date 10-25-17
 Total Pages _____

Final Cost

Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Records Provided

Karen Wynne Clerk Date 10-16-17
 Custodian Signature

Completed OPRA

State Of New Jersey

CC: Construction
Kw
via
email
10-17-17



OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Susan MI Last Name SAKSINSKY
 E-mail Address
 Mailing Address 292 Cliffwood Ave
 City Cliffwood State NJ Zip 07721
 Telephone 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 Susan Saksinsky Date 10/17/17

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.

look to purchase the property need to know if there any open permits on both buildings. Currently it is a closed flower shop that else can go in there and what would need to be done to accomplish that
List of Construction Applications

833 Rt 34 Matawan (Karma Florist) ✓

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 #	<u> </u>	Total	<u> </u>
Rec'd Date	<u>10-17-17</u>	Deposit	<u> </u>
Ready Date	<u>10-26-17</u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>
Records Provided			
Custodian Signature <u>Karen Wynne</u>		Date <u>10-17-17</u>	
Clerk			

File - Completed OPRA

cc: Construction
File PreparationKW
10/20
via
email

State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

**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 Jane MI R. Last Name Pattwell, Esq.

E-mail Address _____

Mailing Address 225 Broad St., PO Box 896

City Red Bank State NJ Zip 07701-0896

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 Jane Pattwell

Date 10/19/17

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.

Re: Property located at 7 Weldon Road, Matawan, NJ (Block 116, Lot 3)

Copies of all open and closed permits including, but not limited to the removal of an underground fuel storage tank.

Installation

above

- List of Construction Applications

KW

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 10-20-17 Deposit _____
Ready Date 10-31-17 Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

10-31-17
- File complete
- See attached email
Karen Wynne
Custodian Signature CW Date 10-20-17

File - Completed OPR

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



cc: Construction
Fire Prevention
KW
via email
10/20

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 Ellen MI MA Last Name Murphy
E-mail Address _____
Mailing Address 209 Central Ave
City Wright Field State NJ Zip 07090
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 Ellen M. Murphy Date 10-17-17

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.

Please send copies of all open & closed permits for 8 Center Ave. Matawan

Thank you.

List of Construction Applications
& installation/removal of above/underground
oil storage tank
Karen Wynne

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.
10-31-17
Clerk's email requests extension to 11/3 @
In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	<u>10-28-17</u>	Total	_____
Rec'd Date	<u>10-31-17</u>	Deposit	_____
Ready Date	<u>10-31-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
<u>11-1-17</u> - File complete - See attached email @KW			
Karen Wynne Clerk		<u>10-20-17</u>	
Custodian Signature		Date	

Completed OPRA

cc: Police
Kw
10/20
in a
envelope

MATAWAN POLICE DEPT

OPEN PUBLIC RECORDS ACT REQUEST FORM

180 Main Street, Metawan, NJ 07747

732-200-1857 / Fax: 732-580-2033

records@metawanpolice.org



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 Steven MI P. Last Name Haddad
 E-mail Address _____
 Mailing Address 510 Thernall St. Suite # 270
 City Edison State NJ Zip 08837
 Telephone _____ 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 10/16/17

Paymant 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.

Car accident Police Report [Signature]
10/9/17 - 10/15/17

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 10-20-17
 Ready Date 10-31-17
 Total Pages _____
 Records Provided _____
 Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____
 Custodian Signature [Signature] Date 10-20-17

File - Completed OPRA

cc: Police
email 10/23/17
KAWState Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORMBorough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 802
Fax (732) 290-7585
karen.wynne@matawanborough.com

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 Ben MI --- Last Name Lynovsky
E-mail Address _____
Mailing Address 50 US Highway 9, Suite 202
City Morristown State NJ Zip 07757
Telephone _____ FAX _____
Preferred Delivery: Pick Up _____ US Mail _____ On-Site _____ Fax _____ E-mail ☒
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. C: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 10/23/17

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash ☐ Check ☐ Money Order ☐
Fees: Letter size pages - \$0.06 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.

Motor Vehicle Accident Reports
From 10/16/17 Through 10/22/17

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extra Cost _____
Total Est. Cost _____
Special 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 10/23/17
Ready Date 11/1/17
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

11-1-17

File complete
- see attached email from WynneRobin Wynne
Custodian Signature10/23/17
Date

File - Completed OPR A

get construction
fire prevention
prep. maint
email 10/13/17
PAM

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Lisa MI M Last Name Heiser

E-mail Address _____

Mailing Address 1000 Commerce Dr., Ste 520

City Pittsburgh State PA Zip 15275

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 Lisa Heiser Date 10/17/2017

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash _____ Check _____ Money Order _____

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Hello

Please provide the following information or who we can contact for the information for the following address/ Block and Lot: 57

Ravine Drive, Matawan, NJ 07747 Block 88, Lot 2.01

Open code violations (Weed cutting, debris, etc.) please provide a copy.

Open permits - (Ex. Construction Code - permits, inspections and approvals and Construction UCC) - please provide a copy.

Does your township require an Occupancy Certificate and Smoke Detector Affidavit? Who would we need to contact?

AGENCY USE ONLY

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

AGENCY USE ONLY

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

In Progress _____ Open _____
Denied _____ Closed _____
Filled _____ Closed _____
Partial _____ Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____ Total _____
Rec'd Date 10/23/17 Deposit _____
Ready Date 11/1/17 Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

11-1-17
File - Completed OPR A
- See attached email
Robin Klynge 10/23/17
Custodian Signature Date

- Health Dept
 - Fire Prevention
 - Tax Collector
 - Water / Sewer Dept
 - Construction
 - *email*
 - *website*
 - *CRAD*



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

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 Amalia MI _____ Last Name Vacca

E-mail Address _____

Mailing Address 867 N. Stiles Street

City Linden State NJ Zip 07036

Telephone _____ FAX _____

Preferred Delivery: Pick Up _____ On-Site Inspection _____ 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 Amalia Vacca Date 10/26/17

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 violations, leins and open or closed permits.

17 Edgewater Drive, Matawan
Block 108 Lot 5

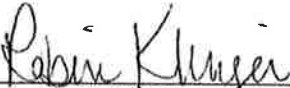
AGENCY USE ONLY

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	10/26/17	Deposit	
Ready Date	11/6/17	Balance Due	
Total Pages		Balance Paid	
Records Provided			
 Custodian Signature		 Date	

File - Completed OPR

cc: Lock enforcement
construction
w/ email
10/26/17

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Brett MI _____ Last Name Cannon
E-mail Address _____
Mailing Address 206 Middlesex Road
City Matawan State NJ Zip 07747
Telephone _____ 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 _____

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.

I am requesting ALL available documents that may be allowed to be seen pertaining to 211 Villanova Place, Matawan, NJ 07747. B60 / L27

Anything that can be provided, I am interested in. Thank you.

copies of code enforcement violations
- construct permits

- Determined
RAC after speaking
w/ MR Cannon

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

96 letters = \$11.80
7 Legal = 494
\$5.29

In Progress ☐ Open _____
Denied ☐ Closed _____
Filled ☐ Closed _____
Partial ☐ Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date 10/26/17
Ready Date 11/6/17
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

11-2-17

- File complete
- See attached email [Signature]

Robin Kling
Custodian Signature

10/26/17
Date

completed OPRA

cc: construction
email 10/31/17

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 NICK MI _____ Last Name SINGER
 E-mail Address _____
 Mailing Address 100 OCEAN AVE, #10
 City BRADLEY BEACH State NJ Zip 07720
 Telephone _____ 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 10/26/17

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.

PLEASE PROVIDE ANY CONSTRUCTION PERMITS OBTAINED FOR
 97 LIBERTY ST, MATAWAN.

* a listing of permits (construction) is okay
 as per requestor 10/31/17 RMC
 via telephone call

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 10/24/17
 Ready Date 11/1/17
 Total Pages _____
Records Provided
Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____
 Custodian Signature [Signature] Date 10/31/17

cc: Police
email
10/30/17

Completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
 201 Broad Street, Matawan, New Jersey 07747
 Karen Wynne, RMC
 (732) 666-3898 ext. 602
 Fax (732) 290-7586
 karen.wynne@matawanborough.com



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 Ben MI MI Last Name Lynovsky
 Email Address _____
 Billing Address 50 US Highway 9, Suite 202
Morganville State NJ Zip 07757
 Telephone _____ 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. 12B-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 10/30/17

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.

Motor Vehicle Accident Reports
 From 10/23/17 Through 10/29/17

AGENCY USE ONLY

1. Document Cost _____
 2. Delivery Cost _____
 3. Extra Cost _____
 4. Est. Cost _____
 5. Total Amount _____
 6. Imputed Balance _____
 7. Total Due _____

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 10/30/17
 Ready Date 11/8/17
 Total Pages 9

Final Cost

Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Records Provided

Robin Klym 10/30/17
 Custodian Signature Date

cc: Construction

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747

Karen Wynne, RMC
(732) 566-3898 ext. 602

Fax (732) 290-7585

karen.wynne@matawanborough.com



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 Robert MI G Last Name Goodman

E-mail Address _____

Mailing Address 171 Main Street

City Woodbridge State NJ Zip 07095

Telephone _____ 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 Robert G Goodman Date 10/31/17

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.

List for construction applications for 278 Broad Street, Matawan, NJ from January 1, 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 10-31-17
 Ready Date 11-13-17
 Total Pages _____

Final Cost

Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Records Provided

Karen Wynne 10-31-17
 Custodian Signature Date

File - Completed OPRA

cc: Fire Prevention

via email



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



cc: Construction

via email
11/2
11/9

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 TODD MI L Last Name CALVIN
E-mail Address _____
Mailing Address 550 WEST C STREET, STE 1100
City SAN DIEGO State CA Zip 92101
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 [Signature] Date 10/31/17

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.

FINAL PASSING INSPECTION RECORDS FOR BUILDINGS 1-8 OF THE PRESERVE AT MATAWAN CONDO COMPLEX. THE BUILDINGS FALL WITHIN BLOCK 120 AND LOT 501 ON THE TAX MAP. SUBJECT BUILDINGS ARE ALSO REFERENCED IN THE MASTER DEED OF THE PRESERVE AT MATAWAN CONDOMINIUM DATED NOVEMBER 13, 2008 - DEED BOOK 8747, PAGE 4361 - SEE EXHIBIT F.

* I NEED COPIES OF THE FINAL PASSING INSPECTION RECORDS AND CERTIFICATES OF OCCUPANCY FOR EACH OF THE 8 BUILDINGS WITHIN THE DEVELOPMENT.

PLEASE ADVISE OF THE TOTAL COST AND I WILL FORWARD A CHECK.

11-9-17, 12:50 PM

* As per telephone call with Requestor [Signature]

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	<u>10-31-17</u>	Deposit	_____
Ready Date	<u>11-13-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
<u>*11-30-17</u>			
<u>11-27-17</u>			
- file complete			
- see attached email [Signature]			
Custodian Signature <u>Karen Wynne Clark</u>		Date <u>10-31-17</u>	

Karen Wynne

From: Larry Higgins
Sent: Friday, October 20, 2017 9:41 PM
To: karen.wynne@matawanborough.com
Subject: OPRA Request (1331.MONMOUTH_MATAWAN BORO)
Attachments: 1331.MONMOUTH_MATAWAN BORO.pdf

Note for clerk: Please discuss this request with your engineering department as they will be the BEST source for the requested documents and information.

The clerk or engineer can fulfil this OPRA easily by visiting our website
www.StateInfoServices.com/opra

We've built this website to avoid sending large files by email, CD, USB, etc. It's a drag/drop file operation and there's no restriction on the file size. You do not need to register or login. You'll receive an email after successfully uploading **all** the requested files and information so you can close the OPRA request.

You can also submit all the requested information & documents by email if you'd like.

Requested Information:

1.a) A complete set of your municipalities **MOST CURRENT** tax maps. **Note:** If your tax maps are on your website, please provide the direct link and **CONFIRM they are the most current maps** available.

1.b) The date the tax maps were last modified/updated.

1.c) The approximate date to check back for newer/updated tax maps. **Note:** If there's currently no plans on updating the maps anytime soon, please mention that to us.

2.a) The **MOST CURRENT** municipality zoning map(s). **Note:** If your zoning map(s) are on your website, please provide the direct link and **CONFIRM they are the most current map(s)** available.

2.b) The date the zoning map(s) was last modified/updated.

2.c) The approximate date to check back for newer/updated zoning map(s). **Note:** If there's currently no plans on updating the map(s) anytime soon, please mention that to us.

3.a) What is the Engineers Company Name, Email, and Phone Number?

NOTE: Fulfil this OPRA easily by visiting our website www.StateInfoServices.com/opra

If you have any questions, please email larry.higgins@unh.edu

PHONE CALLS WILL NOT BE ACCEPTED

Thanks,

Larry Higgins

File - Completed OPRA

State Of New Jersey

cc: Construction
KW
via
email
11/2

OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Christopher MI 1 Last Name Barnes
 E-mail Address agentbarnes1
 Mailing Address 213 Katherine St.
 City Scotch Plains State NJ Zip 07076
 Telephone _____ FAX _____
 Preferred Delivery: Pick Up _____ US Mail _____ On-Site _____ Fax _____ E-mail ☒
 If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I 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 11/2/17

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.

Requesting a list of construction applications +
 installation/removal of above/underground oil storage tank
 For 2 Fountain Ave.
 Matawan, NJ 07747

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 11-2-17
 Ready Date 11-15-17
 Total Pages _____
Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____
 Records Provided
11-14-17
 - File completed OPRA
 - See attached email
[Signature] 11-2-17
 Custodian Signature Date

File - Completed OPRA

cc: Construction
RK
11/3
via
emailState of New Jersey Standard
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	Doris	MI		Last Name	Kobza
E-mail Address					
Mailing Address	4 Dedrick Place				
City	West Caldwell	State	NJ	Zip	07006
Telephone	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 <u>HAVE</u> / <u>HAVE NOT</u> been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.					
Signature					Date 11/03/2017

Payment Information

Maximum Authorization Cost	\$ 10.00
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.

Please provide a Permit Fee Log Detail Report or Permit Activity October 2017
If the municipality cannot separate new construction houses or additions, then I would like a copy of all residential new construction, renovations, additions and alterations permitted.
Copies can be faxed or emailed using the information above.
I can also pick up the information in person if that is preferred.
I realize there may be charges associated with providing this information. Please call me if there are any questions.
I respect your time and appreciate your help.
Please let me know if you have any suggestions that will help the municipality process this request more efficiently.

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here. In Progress - Open _____ Denied - Closed _____ Filled - Closed _____ Partial - Closed _____	<table border="1"> <thead> <tr> <th colspan="2">Tracking Information</th> <th colspan="2">Final Cost</th> </tr> </thead> <tbody> <tr> <td>Tracking #</td> <td>11/3/17</td> <td>Total</td> <td>_____</td> </tr> <tr> <td>Rec'd Date</td> <td>11/16/17</td> <td>Deposit</td> <td>_____</td> </tr> <tr> <td>Ready Date</td> <td>_____</td> <td>Balance Due</td> <td>_____</td> </tr> <tr> <td>Total Pages</td> <td>_____</td> <td>Balance Paid</td> <td>_____</td> </tr> <tr> <td colspan="2">Records Provided</td> <td colspan="2">_____</td> </tr> <tr> <td colspan="2">11-18-17</td> <td colspan="2">_____</td> </tr> <tr> <td colspan="2">- File complete</td> <td colspan="2">_____</td> </tr> <tr> <td colspan="2">- See attached email</td> <td colspan="2">_____</td> </tr> <tr> <td colspan="2">Robin Kluge</td> <td colspan="2">11/3/17</td> </tr> <tr> <td colspan="2">Custodian Signature Deputy Clerk</td> <td colspan="2">Date</td> </tr> </tbody> </table>	Tracking Information		Final Cost		Tracking #	11/3/17	Total	_____	Rec'd Date	11/16/17	Deposit	_____	Ready Date	_____	Balance Due	_____	Total Pages	_____	Balance Paid	_____	Records Provided		_____		11-18-17		_____		- File complete		_____		- See attached email		_____		Robin Kluge		11/3/17		Custodian Signature Deputy Clerk		Date	
Tracking Information		Final Cost																																												
Tracking #	11/3/17	Total	_____																																											
Rec'd Date	11/16/17	Deposit	_____																																											
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Total Pages	_____	Balance Paid	_____																																											
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- See attached email		_____																																												
Robin Kluge		11/3/17																																												
Custodian Signature Deputy Clerk		Date																																												

DEPOSITS

The custodian may require a deposit against costs for reproducing documents sought through an anonymous request whenever the custodian anticipates that the documents requested will cost in excess of \$5 to reproduce.

Where a special service charge is warranted under OPRA, that amount will be communicated to you as required under the statute. You have the opportunity to review and object to the charge prior to it being incurred. If, however, you approve of the fact and amount of the special service charge, you may be required to pay a deposit or pay in full prior to reproduction of the documents.

YOUR REQUEST FOR RECORDS IS DENIED FOR THE FOLLOWING REASON(S):

(To be completed by the Custodian of Records – check the box of the numbered exemption(s) as they apply to the records requested. If multiple records are requested, be specific as to which exemption(s) apply to each record. Response is due to requestor as soon as possible, but no later than seven business days.)

N.J.S.A. 47:1A-1.1

- ☐ Inter-agency or intra-agency advisory, consultative or deliberative material
- ☐ Legislative records
- ☐ Law enforcement records:
 - ☐ Medical examiner photos
 - ☐ Criminal investigatory records (however, N.J.S.A. 47:1A-3.b. lists specific criminal investigatory information which must be disclosed)
 - ☐ Victims' records
- ☐ Trade secrets and proprietary commercial or financial information
- ☐ Any record within the attorney-client privilege
- ☐ Administrative or technical information regarding computer hardware, software and networks which, if disclosed would jeopardize computer security
- ☐ Emergency or security information or procedures for any buildings or facility which, if disclosed, would jeopardize security of the building or facility or persons therein
- ☐ Security measures and surveillance techniques which, if disclosed, would create a risk to the safety or persons, property, electronic data or software
- ☐ Information which, if disclosed, would give an advantage to competitors or bidders
- ☐ Information generated by or on behalf of public employers or public employees in connection with:
 - ☐ Any sexual harassment complaint filed with a public employer
 - ☐ Any grievance filed by or against an employee
 - ☐ Collective negotiations documents and statements of strategy or negotiating
- ☐ Information that is a communication between a public agency and its insurance carrier, administrative service organization or risk management office
- ☐ Information that is to be kept confidential pursuant to court order
- ☐ Certificate of honorable discharge issued by the United States government (Form DD-214) filed with a public agency
- ☐ Social security numbers

Completed OPRA

cc: Police



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 802
Fax (732) 290-7585
karen.wynne@metawanborough.com



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 Ben MI MI Last Name Lynovsky
Email Address MI
Billing Address 50 US Highway 9, Suite 202
Morganville State NJ Zip 07751
Telephone FAX
Preferred Delivery: Pick Up US Mail On-Site Fax E-mail ✓
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 17:28-3, 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

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.

Motor Vehicle Accident Reports
From 10/29/17 Through 11/5/17

AGENCY USE ONLY

1. Document Cost
2. Delivery Cost
3. Extra Cost
4. Est. Cost
5. Cost Amount
6. Unpaid Balance
7. Cost 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 11/6/17
Ready Date 11/7/17
Total Pages

Final Cost

Total
Deposit
Balance Due
Balance Paid

Records Provided

Custodian Signature

Date

completed OPRA

cc: Police



MATAWAN POLICE DEPT
OPEN PUBLIC RECORDS ACT REQUEST FORM
 180 Main Street, Matawan, NJ 07747
 732-200-1657 / Fax: 732-686-2933
 records@matawanpolice.org

**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 Steven MI P. Last Name Haddad
 E-mail Address _____
 Mailing Address 510 Thornall St. Suite # 270
 City Edison State NJ Zip 08837
 Telephone _____ 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 11/6/17

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash ☐ Check ☐ Money Order ☐
 Fees: Letter size pages - \$0.06 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.

10/30/17 - 11/5/17

AGENCY USE ONLY

Evl. 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 # 11-6-17
 Rec'd Date 11-12-17
 Ready Date _____
 Total Pages _____
 Records Provided _____

Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Custodian Signature [Signature] Date 11-6-17

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Melissa MI J Last Name Crawford
 E-mail Address _____
 Mailing Address 2 Sutton Dr. Apt P. 06
 City Matawan State NJ Zip 07747
 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 [Signature] Date Nov 7, 2017

Payment Information

Maximum Authorization Cost \$ _____
 Select Payment Method
 Cash _____ Check _____ Money Order _____
 Fees: Letter size pages - \$0.05 per page
 Legal size pages - \$0.07 per page
 Other materials (CD, DVD, etc) - actual cost of material
 Delivery: Delivery / postage fees additional depending upon delivery type.
 Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

any permits for 15 Bank Street Matawan, NJ
 (building, repair)
 Construction open and/or closed listing
11/8/17

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	<u>11/8/17</u>	Deposit	
Ready Date	<u>11/20/17</u>	Balance Due	
Total Pages		Balance Paid	
Records Provided			
<u>Robin Klynz</u> Custodian Signature		<u>11/8/17</u> Date	

cc: Pet. cc via email
(Att)State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
 201 Broad Street, Matawan, New Jersey 07747
 Karen Wynne, RMC
 (732) 666-3898 ext. 602
 Fax (732) 290-7685
 karen.wynne@matawanborough.com



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 Ben MI MI Last Name Lynovskiy
 Email Address _____
 Billing Address 50 US Highway 9, Suite 202
Morristown State NJ Zip 07757
 Telephone _____ 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.
 12B-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 11/13/17

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - \$0.06
 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: Spooling 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.

Motor Vehicle Accident Reports
 From 11/6/17 Through 11/12/17

AGENCY USE ONLY

Document Cost _____
 Delivery Cost _____
 Extra Cost _____
 Total Cost _____
 Total Amount _____
 Total Balance _____
 All 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 # 11-13-17
 Rec'd Date 11-22-17
 Ready Date _____
 Total Pages _____

Final Cost

Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Records Provided

Custodian Signature

11-13-17
 Date

Completed OPRA

cc: Police



MATAWAN POLICE DEPT
OPEN PUBLIC RECORDS ACT REQUEST FORM
 150 Main Street, Matawan, NJ 07747
 732-290-1687 / Fax: 732-568-2933
 records@matawanpolice.org

**Important Notice**

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

Requester Information - Please Print

First Name Steven MI P. Last Name Haddad
 E-mail Address _____
 Mailing Address 510 Thornall St. Suite # 270
 City Edison State NJ Zip 08837
 Telephone _____ FAX _____
 Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspection _____ 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 11/13/17

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.

Car Accident Police Reports

11/6/17 - 11/12/17

AGENCY USE ONLY

Est. Document Cost _____
 Est. Delivery Cost _____
 Est. Extra 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 # 11/13/17
 Rec'd Date 11/23/17
 Ready Date _____
 Total Pages _____
Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____
 Records Provided _____
 Custodian Signature [Signature] Date 11/13/17

completed OPRA

cc: Construction
Va email
LAWState Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORMBorough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com

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 Luisa MI Last Name Rancapan
 E-mail Address _____
 Mailing Address 170 Kinnelon Road
 City Kinnelon State NJ Zip 07405
 Telephone 1 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 Luisa Rancapan Date 11/10/17

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.

I am requesting for a copy of the building permit application that includes the name, address and telephone number of the General Contractor for the Retail & Residential @ the Former CTown Food market site
 126 Main Street
 Block: 24 Lot 3, 4, 6, 6.01, 7-9

AGENCY USE ONLY

Est. Document Cost _____
 Est. Delivery Cost _____
 Est. Extra 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 11/13/17
 Ready Date 11/22/17
 Total Pages _____
 Records Provided _____
 Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____
 Custodian Signature Robin Khaja Date 11/13/17

Completed OPRA



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7686
karen.wynne@matawanborough.com



cc: Construction
*Property Maintenance
*Tax Collector
Vasanth
Mishra

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 Nora MI - Last Name Kattaria
E-mail Address -
Mailing Address 3 Townsley Ct
City Edison State NJ Zip 08837
Telephone - 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 11/16/17

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.

List of Applications from Construction Department
Open violations from our Property Maintenance
Office
Tax liens from our Tax collector
193 Main St Matawan N.J.

AGENCY USE ONLY

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

AGENCY USE ONLY

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

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____ Total _____
Rec'd Date 11-16-17 Deposit _____
Ready Date 11-29-17 Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

Custodian Signature [Signature] Clerk

11-16-17

cc: Polke

Completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
 201 Broad Street, Matawan, New Jersey 07747
 Karen Wynne, RMG
 (732) 566-3898 ext. 802
 Fax (732) 290-7588
 karen.wynne@matawanborough.com



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 Ben MI Last Name Lynovsky
 Mailing Address 50 US Highway 9, Suite 202
Morristown State NJ Zip 07757
 Telephone FAX
 Preferred Delivery: Pick Up US Mail On-Site Inspection Fax E-mail ✓
 If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2B-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 11/20/17

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.

Motor Vehicle Accident Reports
 From 11/13/17 Through 11/19/17

AGENCY USE ONLY

Document Cost
 Delivery Cost
 Extras Cost
 (Est. Cost)
 Total Amount
 Unpaid Balance
 All Date

AGENCY USE ONLY

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

In Progress Open
 Denied Closed
 Filled Closed
 Partial Closed

AGENCY USE ONLY

Tracking Information
 Tracking # Total
 Rec'd Date 11/20/17 Deposited
 Ready Date 12/1/17 Balance Due
 Total Pages Balance Paid
 Records Provided

[Signature] Deputy Clerk 11/20/17
 Custodian Signature Date

Completed OIRA

cc: Police
email
11/21/17

MATAWAN POLICE DEPT
OPEN PUBLIC RECORDS ACT REQUEST FORM
 150 Main Street, Matawan, NJ 07747
 732-263-1857 / Fax: 732-668-2933
 records@matawanpolice.org

**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 Steven MI P. Last Name Haddad
 E-mail Address _____
 Mailing Address 510 Thornall St. Suite # 270
 City Edison State NJ Zip 08837
 Telephone _____ FAX _____
 Preferred Delivery: Pick Up _____ US Mail _____ On-Site _____
 Inperson _____ 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 11/20/17

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.

11/13/17 - 11/19/17

RECEIVED

NOV 21 2017

Borough of Matawan
Clerk's Office**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
 satisfied in seven business days,
 detail reasons here.

In Progress _____ Open _____
 Denied _____ Closed _____
 Piled _____ Closed _____
 Partial _____ Closed _____

AGENCY USE ONLY**Tracking Information**

Tracking # 11/21/17 Total _____
 Rec'd Date 12/4/17 Deposit _____
 Ready Date _____ Balance Due _____
 Total Pages _____ Balance Paid _____
 Records Provided _____

Robin Klumpp deputy clerk 11/21/17
 Custodian Signature Date

OPEN PUBLIC RECORDS ACT REQUEST FORM

Fax: 732-290-7585

Completed OPR
PUBLIC RECORDS

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

Payment Information

First Name Christina MI Last Name Mota

E-mail Address _____

Mailing Address 2022 WASHINGTON BLVD

City ROBBINSVILLE State NJ Zip 08691

Telephone 6 _____ 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 NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Christina Mota Date 11/27/2017

Maximum Authorization Cost \$

Select Payment Method

Cash	Check	Money Order
------	-------	-------------

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.

Motor vehicle accident reports for the dates listed below. Please email to c

Start Date 11/19/2017

End Date 11/25/2017

AGENCY USE ONLY

Est. Document Cost _____

Est. Delivery Cost _____

Est. Extra Cost _____

Total Est. Cost \$1,000,000

Deposit Amount

Estimated Balance _____

Deposit Date 11/21/2011

AGENCY USE ONLY

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

In Progress | Newly Open | Open | Closed

Denied - Closed

Filled - Closed

Partial - Closed

AGENCY USE ONLY

Tracking Information

Tracking #			
------------	--	--	--

Rec'd Date 11/27/17

Ready Date 12/6/17

Total Pages. _____

Final Cost

Total

Deposit

Balance Due

Balance Paid _____

Records Provided

Robert K. Meyer
Custodian Signature

12/27/17
Date

Completed OPRA

cc: Police email 11/27/17



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7565
karen.wynne@matawanborough.com



Important Notice

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

Requester Information - Please Print

First Name Ben MI 1 Last Name Lynovsky
Email Address _____
Billing Address 50 US Highway 9, Suite 202
Morristown State NJ Zip 07751
Telephone _____ FAX _____
Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspection _____ Fax _____ E-mail ☒
You are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 17-28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offenses under the laws of New Jersey, any other state, or the United States.
Signature [Signature] Date 11/27/17

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.

Motor Vehicle Accident Reports
From 11/26/17 Through 11/26/17

AGENCY USE ONLY

1. Document Cost _____
2. Delivery Cost _____
3. Extra Cost _____
4. Est. Cost _____
5. Total Amount _____
6. Unpaid Balance _____
7. 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 ☐
Partial ☐ Closed ☐
Filled ☐ Closed ☐
Partial ☐ Closed ☐

AGENCY USE ONLY

Tracking Information

Tracking # 11/27/17
Rec'd Date 11/27/17
Ready Date 11/27/17
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

[Signature] 11/27/17
Custodian Signature Date
[Signature]

Completed OPRA

cc: Police
email
11/27/17

MATAWAN POLICE DEPT
OPEN PUBLIC RECORDS ACT REQUEST FORM
 150 Main Street, Matawan, NJ 07747
 732-290-1687 / Fax: 732-886-2833
 records@matawanpolice.org

**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 Steven MI P. Last Name Haddad
 E-mail Address _____
 Mailing Address 510 Thornall St. Suite # 270
 City Edison State NJ Zip 08837
 Telephone _____ FAX _____
 Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On-Site ☐ Fax ☒ E-mail
 If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I 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 11/27/17

Payment Information

Maximum Authorization Cost \$

Select Payment MethodCash ☐ 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.
 Extra: 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.

11/20/17 - 11/26/17

Information - Please Print

Steven P. Haddad
Magistrate's Office
510 Thornall St. Suite # 270
Edison, NJ 08837

AGENCY USE ONLY

Est. Document Cost _____
 Est. Delivery Cost _____
 Est. Extra 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 reasoner here.

In Progress ☐ Open ☐
 Denied ☐ Closed ☐
 Pended ☐ Opened ☐
 Partial ☐ Closed ☐

AGENCY USE ONLY

Tracking Information

Tracking # _____
 Rec'd Date 11/21/17
 Ready Date 11/26/17
 Total Pages _____

Final Cost

Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Records Provided _____

[Signature] 11/27/17
 Custodian Signature Date
 deputy clerk

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Danna Burton MI MI Last Name Burton
E-mail Address _____
Mailing Address 612 1/2 16th Ave
City Belmar State NJ Zip 07719
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 Dan Burton Date 11/28/17

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.

11 Liberty St
Matawan, NJ 07747
I am looking to make sure there are no open permits. I would also like a copy of the documents pertaining to the oil tank showing that it was filled and closed and also the document that shows the soil was tested and free of contamination. I would also like a copy of any other closed permits. - construction (copies)
construction copies of open permits

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

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

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

In Progress _____ Open _____
Denied _____ Closed _____
Filled _____ Closed _____
Partial _____ Closed _____

Tracking Information

Final Cost

Tracking # _____ Total _____
Rec'd Date 11/28/17 Deposit _____
Ready Date 12/7/17 Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

12/4/17
- File complete
- See attached email
Ray

Robin Khuy
Custodian Signature
11/28/17
deputy clerk

Kevin E. Kennedy, Esq.A Limited Liability Company
Attorney at Law165 Highway 35
Middletown, NJ

Phone:

Fax:

Admitted to Practice
NJ & Washington DCMailing Address:
165 Highway 35
Red Bank, NJ 07701

November 29, 2017

VIA FACSIMILE: 732-290-7631Borough of Matawan
Attn: Construction Office
201 Broad Street
Matawan NJ 07747**Re: Murphy from Morillo
11 Liberty Street
Matawan, NJ
Block 86, Lot 4**

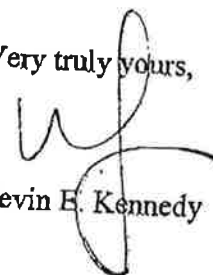
Dear Construction Office:

Please be advised that I am writing to you on behalf of John C. Murphy. In that regard, I would ask that you please note the following:

1. John C. Murphy has executed a Contract to purchase the above-referenced property.
2. Accordingly, and when your schedule permits, can you please review the municipal files and hopefully confirm that there are no open permits/violations?

Thank you for your attention.

Very truly yours,


Kevin E. Kennedy**RECEIVED**

NOV 30 2017

Borough of Matawan
Clerk's Office

KEK/dmp

[https://kevinkennedylaw.sharepoint.com/Real Estate/Purchases/Murphy from Morillo/112917 Matawan Construction Dept..doc](https://kevinkennedylaw.sharepoint.com/Real%20Estate/Purchases/Murphy%20from%20Morillo/112917%20Matawan%20Construction%20Dept..doc)cc: John C. Murphy (e-mail)
Jessie Mitchell, Gloria Nilson

Completed OPRA

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Ronald MI J Last Name Gregorio
E-mail Address _____
Mailing Address 305 Jackson Ave
City MORRISTOWN State NJ Zip 07960
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 _____

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

Certificates of Occupancy for all buildings
Approximately 157 condominium units located in
the development known as the "Preserve at
Matawan Condominiums."

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	<u>12-1-17</u>	Deposit	_____
Ready Date	<u>12-12-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>Karen Wynne</u>		Date <u>12-1-17</u>	

cc: Polke

OPEN PUBLIC RECORDS ACT REQUEST FORM

Ph: 732-290-1657

Fax: 732-290-7585

PUBLIC RECORDS

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 Christina MI _____ Last Name Mota

E-mail Address _____

Mailing Address 2022 WASHINGTON BLVDCity ROBBINSVILLE State NJ Zip 08691

Telephone _____

FAX _____

Preferred Delivery: Pick Up _____ 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 NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Christina Mota Date 12/4/2017

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

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.

Motor vehicle accident reports for the dates listed below. Please email to:

Start Date 11/26/2017End Date 12/2/2017

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		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	<u>12/4/17</u>	Deposit	_____
Ready Date	<u>12/13/17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			

Robin Klump 12/4/17
Custodian Signature Date

no Police

State Of New Jersey

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Kathy MI Last Name Bonilla
 E-mail Address
 Mailing Address: 3 Metrotech Center Office Chase -
 City Brooklyn State NY Zip 11201
 Telephone 112 961 1111 FAX
 Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On-Site ☐ Fax ☒ E-mail ☒
 If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States of America.
 Signature Kathy Bonilla Date 12/1/2017

Payment Information

Maximum Authorization Cost \$
 Select Payment Method
 Cash ☐ Check ☐ Money Order ☐
 Fees: Letter size pages - \$0.05 per page
 Legal size pages - \$0.07 per page
 Other materials (CD, DVD, etc) - actual cost of material
 Delivery: Delivery / postage fees additional depending upon delivery type.
 Extra: 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.

Building & Fire Code Violations that are "OPEN"

Chase Bank
 318 Lloyd Road, Matawan NJ 07747-1882

AGENCY USE ONLY

Est. Document Cost
 Est. Delivery Cost
 Est. Extra 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 12/1/17
 Ready Date 12/1/17
 Total Pages
 Final Cost
 Total
 Deposit
 Balance Due
 Balance Paid
 Records Provided
 Custodian Signature Robin King Date 12/1/17

cc: Police



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 802
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Ben MI --- Last Name Lynovsky
 Email Address _____
 Billing Address 50 US Highway 9, Suite 202
Morristown State NJ Zip 07757
 Telephone _____ FAX _____
 Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspection _____ Fax _____ E-mail ☒
 You are requesting records containing personal information; please circle one: Under penalty of N.J.S.A. 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 12/4/17

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.

Motor Vehicle Accident Reports
 From 11/27/17 Through 12/3/17

AGENCY USE ONLY

Document Cost _____
 Delivery Cost _____
 Extra Cost _____
 Total Cost _____
 Total Amount _____
 Initial Balance _____
 All 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 12/4/17
 Ready Date 12/13/17
 Total Pages _____

Final Cost

Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____

Records Provided

Robin Klinger
 Custodian Signature

12/4/17
 Date

α: Police



MATAWAN POLICE DEPT
OPEN PUBLIC RECORDS ACT REQUEST FORM
 150 Main Street, Matawan, NJ 07747
 732-200-1657 / Fax: 732-566-2633
 records@matawanpolice.org



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 Steven MI P. Last Name Haddad
 E-mail Address _____
 Mailing Address 510 Thorneall St. Suite # 270
 City Edison State NJ Zip 08837
 Telephone _____
 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 12/4/17

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.

11/27/17 - 12/3/17

AGENCY USE ONLY

Est. Document Cost _____
 Est. Delivery Cost _____
 Est. Extra 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	Records Provided	Total	Deposit	Balance Due	Balance Paid
	12/4/17	12/13/17						

Records Provided _____
 Custodian Signature [Signature] Date 12/4/17

OPEN PUBLIC RECORDS ACT REQUEST FORM



Borough of Matawan
201 Broad Street, Matawan, New Jersey 07747
Karen Wynne, RMC
(732) 566-3898 ext. 602
Fax (732) 290-7585
karen.wynne@matawanborough.com



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 Sharen MI _____ Last Name Laporta
 E-mail Address _____
 Mailing Address 5014 60 WASHINGTON ST
 City MATAWAN State NJ Zip 07747
 Telephone _____ 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 Sharen Laporta Date 12/4/17

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.

COPY OF PERMIT FOR INSTALLATION/
 REMOVAL OF UNDER/ABOVE GROUND
 OIL STORAGE TANK ON PROPERTY
 LOCATED AT 24 ANGELICA CT. MATAWAN

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	<u>12-4-17</u>	Deposit	_____
Ready Date	<u>12-13-17</u>	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			

Karen Wynne 12-4-17
 Custodian Signature Date

cc: construction

State of New Jersey Standard 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	Doris	MI	Last Name	Kobza
------------	-------	----	-----------	-------

E-mail Address _____

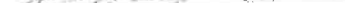
Mailing Address **4 Dedrick Place**

City **West Caldwell** State **NJ** Zip **07006**

Telephone 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 12/04/2017

Payment Information

Maximum Authorization Cost	\$ 10.00
----------------------------	----------

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.

Please provide a Permit Fee Log Detail Report or Permit Activity November 2017

If the municipality cannot separate new construction houses or additions, then I would like a copy of all residential new construction, renovations, additions and alterations permitted.

Copies can be faxed or emailed using the information above.

I can also pick up the information in person if that is preferred.

I realize there may be charges associated with providing this information. Please call me if there are any questions.

I respect your time and appreciate your help.

Please let me know if you have any suggestions that will help the municipality process this request more efficiently.

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here. In Progress * Open _____ Denied * Closed _____ Filled * Closed _____ Partial * Closed _____	Tracking Information Tracking # _____ Rec'd Date <u>12/6/17</u> Ready Date <u>12/15/17</u> Total Pages _____ Records Provided Final Cost Total _____ Deposit _____ Balance Due _____ Balance Paid _____ <i>[Signature]</i> <u>12/6/17</u> Custodian Signature Date
--	--	--

DEPOSITS

The custodian may require a deposit against costs for reproducing documents sought through an anonymous request whenever the custodian anticipates that the documents requested will cost in excess of \$5 to reproduce.

Where a special service charge is warranted under OPRA, that amount will be communicated to you as required under the statute. You have the opportunity to review and object to the charge prior to it being incurred. If, however, you approve of the fact and amount of the special service charge, you may be required to pay a deposit or pay in full prior to reproduction of the documents.

YOUR REQUEST FOR RECORDS IS DENIED FOR THE FOLLOWING REASON(S):

(To be completed by the Custodian of Records – check the box of the numbered exemption(s) as they apply to the records requested. If multiple records are requested, be specific as to which exemption(s) apply to each record. Response is due to requestor as soon as possible, but no later than seven business days.)

N.J.S.A. 47:1A-1.1

- Inter-agency or intra-agency advisory, consultative or deliberative material
- Legislative records
- Law enforcement records:
- Medical examiner photos
 - Criminal Investigatory records (however, N.J.S.A. 47:1A-3.b. lists specific criminal investigatory information which must be disclosed)
 - Victims' records
- Trade secrets and proprietary commercial or financial information
- Any record within the attorney-client privilege
- Administrative or technical information regarding computer hardware, software and networks which, if disclosed would jeopardize computer security
- Emergency or security information or procedures for any buildings or facility which, if disclosed, would jeopardize security of the building or facility or persons therein
- Security measures and surveillance techniques which, if disclosed, would create a risk to the safety of persons, property, electronic data or software
- Information which, if disclosed, would give an advantage to competitors or bidders
- Information generated by or on behalf of public employers or public employees in connection with:
- Any sexual harassment complaint filed with a public employer
 - Any grievance filed by or against an employee
 - Collective negotiations documents and statements of strategy or negotiating
- Information that is a communication between a public agency and its insurance carrier, administrative service organization or risk management office
- Information that is to be kept confidential pursuant to court order
- Certificate of honorable discharge issued by the United States government (Form DD-214) filed with a public agency
- Social security numbers

From: Karen Wynne
To: "Anonymous"
Subject: OPRA Request-Anonymous
Date: Tuesday, December 12, 2017 10:23:54 AM
Attachments: OPRA Request-Anonymous.pdf

Good Morning,

Attached please find the requested documentation.

We trust this satisfies this Request and finalizes the matter; however, should you require anything further or have any questions, please do not hesitate to contact our office.

Thank you,

Karen

Karen Wynne, RMC
Borough Clerk
Borough of Matawan
201 Broad Street
Matawan, New Jersey 07747

ext. 602

WARNING: Email received or sent to Borough Officials are subject to the Open Public Records Act (OPRA). If you are in any way concerned about the contents of your email being read by someone other than the person(s) you are contacting, you should consider alternate ways of contacting them.

This message is intended only for the use of the addressees. It may contain privileged and/or confidential information that should not be disclosed under applicable law. If you are not an addressee, or the employee or agent responsible to deliver this message to an addressee, you are notified that any use or dissemination of this message is prohibited, and that you should destroy/delete it immediately and advise the sender. Thank you for your cooperation.

-----Original Message-----

From: Karen Wynne [mailto:[mailto:](#)]
Sent: Tuesday, December 12, 2017 8:36 AM
To: 'Anonymous'
Subject: Open Public Records Act request - Dog and Cat pet license holders/applications

Thank you, Karen

-----Original Message-----

From: Anonymous)
Sent: Tuesday, December 12, 2017 12:40 AM
To: Karen Wynne
Subject: Re: Open Public Records Act request - Dog and Cat pet license holders/applications

Dear Karen Wynne,

I would like to have a summary listing.

Yours sincerely,

Anonymous

-----Original Message-----

Good Afternoon,

We are in receipt of the attached Request which has been forwarded to the appropriate Department(s). Please note the Ready Date of December 18, 2017.

Can I ask if you would like a summary listing or each individual application?

Thank you,

Karen

Karen Wynne, RMC
Borough Clerk
Borough of Matawan
201 Broad Street
Matawan, New Jersey 07747

[Matawan Borough request email]

WARNING: Email received or sent to Borough Officials are subject to the Open Public Records Act (OPRA). If you are in any way concerned about the contents of your email being read by someone other than the person(s) you are contacting, you should consider alternate ways of contacting them.

This message is intended only for the use of the addressees. It may contain privileged and/or confidential information that should not be disclosed under applicable law. If you are not an addressee, or the employee or agent responsible to deliver this message to an addressee, you are notified that any use or dissemination of this message is prohibited, and that you should destroy/delete it immediately and advise the sender. Thank you for your cooperation.

Please use this email address for all replies to this request:
opra+request-821

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:

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.

Matawan Borough

cc: Police

OPEN PUBLIC RECORDS ACT REQUEST FORM

Ph: 732-290-1657

Fax: 732-290-7585

PUBLIC RECORDS

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 Christina MI Last Name MotaE-mail Address Mailing Address 2022 WASHINGTON BLVDCity ROBBINSVILLE State NJ Zip 08691Telephone 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 NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Christina Mota Date 12/11/2017

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

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.

Motor vehicle accident reports for the dates listed below. Please email to

Start Date 12/3/2017End Date 12/9/2017FAX 609-961-6661

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

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

Disposition Notes: Under penalty of N.J.S.A. 2C:28-3, I certify that I **HAVE NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

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

Tracking Information

Tracking # Rec'd Date 12/11/17Ready Date 12/20/17Total Pages

Final Cost

Total Deposit Balance Due Balance Paid Records Provided

Rabim Khayr
Custodian Signature

12/11/17
Date

deputy clerk

cc: Police



State Of New Jersey
OPEN PUBLIC RECORDS ACT REQUEST FORM

Borough of Matawan
 201 Broad Street, Matawan, New Jersey 07747
 Karen Wynne, RMC
 (732) 556-3898 ext. 602
 Fax (732) 290-7585
 karen.wynne@matawanborough.com

**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 Ben MI M Last Name Lymovsky
 Email Address my
 Billing Address 50 US Highway 9, Suite 202
Morristown State NJ Zip 07757
 Telephone FAX
 Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On-Site ☐ State Of New Jersey ☒ FAX ☒ E-mail ☒

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 17-28-3, 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 12/11/17

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.

Motor Vehicle Accident Reports

From 12/3/17 Through 12/10/17

Payment Information

Maximum Authorization Cost \$

Select Payment MethodCash ☐ 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.

AGENCY USE ONLY

Document Cost
 Delivery Cost
 Extra Cost
 Fee Cost
 Total Amount
 Total Balance
 Date

AGENCY USE ONLY

Disposition Notes
 Custodian: If any part of request cannot be delivered in seven business days, custodian must circle one:
Deny Have Not Have
 Date

In Progress ☐ Open ☐
 Denied ☐ Closed ☐
 Filled ☐ Closed ☐
 Partial ☐ Closed ☐

AGENCY USE ONLY

Tracking Information
 Tracking #
 Request Date 12-11-17
 Ready Date 12-20-17
 Total Pages

Final Cost
 Date Total Delivery / postage
 Deposited / balance due
 Balance Due
 Amount Paid
 Records Provided

Custodian Signature [Signature] Date 12-11-17

cc: Police



Metawan Police Dept OPEN PUBLIC RECORDS ACT REQUEST FORM

160 Main Street, Metawan, NJ 07747

732-888-1657 / Fax: 732-888-2833

records@metawanpolice.org



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 Steven MI P. Last Name Haddad

E-mail Address _____

Mailing Address 510 Thornall St. Suite # 270

City Edison State NJ Zip 08837

Telephone _____ FAX _____

Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On-Site (request) ☐ Fax ☒ E-mail

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 17:28-3, 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 12/11/17

Payment Information

Maximum Authorization Cost \$

Selected Payment Method

Check ☐ Check ☐ Money Order ☐

Fees: Letter size pages - \$0.06 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.

Extra: 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 this custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

12/11/17 - 12/10/17

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First Name Steven MI P. Last Name Haddad

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AGENCY USE ONLY		AGENCY USE ONLY		AGENCY USE ONLY	
Document Delivery: ☐ Up ☐ Down Est. Document Cost _____ Est. Delivery Cost _____ Est. Paper Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition: ☐ Open ☐ Closed Disposition: If any part of request cannot be processed in seven business days, please advise the requestor. Disposition: ☐ Open ☐ Closed Disposition: ☐ Open ☐ Closed Disposition: ☐ Open ☐ Closed Disposition: ☐ Open ☐ Closed	Tracking # _____ Rec'd Date <u>12-11-17</u> Rec'd Date <u>12-20-17</u> Total Pages <u>117</u> Records Provided _____	Final Cost _____ Deposit _____ Balance Due _____ Balance Paid _____	Signature <u>[Signature]</u> Date <u>12-11-17</u> Signature <u>[Signature]</u> Date <u>12-11-17</u>	Signature <u>[Signature]</u> Date <u>12-11-17</u> Signature <u>[Signature]</u> Date <u>12-11-17</u>