VIRIDIAN
Environmental Consultants

February 9, 2018

Township of Newton
39 Trinity Street
Newton, NJ 07860

Re: Ground Water Classification Exception Area (CEA) Biennial Certification for NJDEP Requirements

Dear Sir or Madam:

Viridian® Inc., Environmental Consultants (Viridian), on behalf of the property owners of 237 Spring Street in Newton (Block 15.03 Lots 1&2), is requesting information pertaining to the following:

- Within the past two years have there been any changes to, or development of, a municipal master plan regarding ground water use at or in the vicinity of the above-referenced site?
- Within the past two years have there been any changes in the regional or municipal 25-year water use planning horizon that could impact ground water flow or usage in the vicinity of the above-referenced site?
- Within the past two years have there been any changes to municipal or county ordinances that restrict or impact the installation of potable wells?
- Within the past two years have any plans been approved to install water or sewer lines in the vicinity of the above-referenced site?

The purpose of this information is to determine whether any local or regional plans for water use could affect the ground water remediation being undertaken at 237 Spring Street. Presently, ground water is undergoing remediation by Natural Attenuation within an NJDEP-approved Classification Exception Area (CEA). Any significant changes in the movement or quality of the ground water in the vicinity of the site would require that the calculations used to create the CEA be reevaluated.

Every two years, owners of properties with a CEA are required to submit a Biennial Certification to the NJDEP answering the above questions. Please call me or email me if you have any questions or information: Redacted per N.J.S.A. 47:1A-1.1 Thank you in advance for your assistance.

Sincerely,
Viridian® Inc. Environmental Consultants

Paige Kinkade, CHMM
Project Manager

PO Box 3009, Upper Montclair NJ 07043-3009
Phone 973•746•7600 Fax 973•746•7602 Email: Mail@ViridianInc.com

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 Elias MI Last Name Casado

E-mail Address [redacted]

Mailing Address 101 Cornelius Ave

City Clifton State NJ Zip 07013

Telephone [redacted] FAX [redacted]

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 3/27/18

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

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.

Looking to purchase a home at 10 Longview Rd, Newton, NJ 07860
Would like to know if Property has underground oil Tank.
Also if all permits are up to date.

RECEIVED
MAR 27 2018
NEWTON TOWN CLERK

opra not our location in Andover, Twp.

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 # 72-2018
Rec'd Date 3/27/2018
Ready Date 3/27/2018
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due -0-
Balance Paid _____

Records Provided

Custodian Signature _____ Date _____

RECEIVED
MAR 26 2018
NEWTON TOWN CL

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

Important Notice

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Requestor Information – Please Print

First Name Alp MI ____ Last Name Akturk

E-mail Address [redacted]

Mailing Address 139 Belmont Ave

City Garfield State NJ Zip 07026

Telephone [redacted] 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 3/26/18

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

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

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Hi, I am in process of buying 5 Linmor Ave Newton NJ 07860.
Block 22.06 Lot 12.
I'd like to learn any info pertaining to a "survey" being done on the property. There is a fence on the property so I'm guessing that it must of been done.
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.

In Progress - Open ____
Denied - Closed ____
Filed - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 71-2018
Rec'd Date 3/26/2018
Ready Date 3/28/2018
Total Pages 2

Final Cost
Total N/C
Deposit
Balance Due
Balance Paid email

Records Provided

M. Estevez 3/28/18
Custodian Signature Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
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Lorraine A. Read, RMC

Important Notice

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Requestor Information – Please Print

First Name Clayton MI _____ Last Name Pannasch

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 265 Sparta Ave

City Sparta State NJ Zip 07871

Telephone Redacted per N.J.S.A. 47:1A-1.1 FAX _____

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

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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

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.

Property: 14 Halsted Street, Newton
Block: 14.03 Lot: 5

All Certificates of Occupancy issued
All Open & Closed/Completed construction permits

RECEIVED
MAR 26 2018
NEWTON TOWN CLERK

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 # 10-2018
Rec'd Date 3/26/18
Ready Date 3/27/18
Total Pages 2 files

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid email

Records Provided

M. Estremera 3/27/18
Custodian Signature Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
clerk@newtontownhall.com
Lorraine A. Read, RMC

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 **Henry** MI _____ Last Name **Savelli**

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address **60 Wendell Place**

City **Clark** State **NJ** Zip **07068**

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 Henry Savelli Date **3/6/2018**

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

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

Extras: Special service charge dependent upon request.

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Mr. Henry Savelli is submitting an OPRA request to the Town Of Newton for any and all purchasing records from 12/11/2017 to current. The request is limited to readily available records without physically copying, scanning or printing paper documents.

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**

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MAR 19 2018
NEWTON TOWN CLERK

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 # 69-2018
Rec'd Date 3/19/18
Ready Date 3/26/18
Total Pages 10

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid emailed

Records Provided

M. Estrella
Custodian Signature

3/26/18
Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 LINDA MI ____ Last Name BADGLEY

E-mail Address [redacted]

Mailing Address Weichert REALTORS 500 Rt 10 W. Ledgewood

City Ledgewood State NJ Zip 07852

Telephone [redacted] 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 Linda Badgley Date 3-16-18

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

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.

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NEWTON TOWN CLERK

UST 7 Kelsey Ave
Newton 07860

Has there been any UST removed or decommissioned from this address. Are there any UST remaining on this property

AGENCY USE ONLY

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

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
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In Progress - Open ____
Denied - Closed ____
Filled - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 61-2018
Rec'd Date 3-16-2018
Ready Date 3-20-18
Total Pages 6

Final Cost
Total ____
Deposit N/C
Balance Due ____
Balance Paid email

Records Provided

M. Estremera 3/20/18
Custodian Signature Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
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Lorraine A. Read, RMC

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Requestor Information – Please Print

First Name Merdiana MI Last Name Minic

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 165 E Main St

City Rockaway State NJ Zip 07866

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1 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 3/14/2018

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

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 or closed Code violations

construction open or closed permits or any tank removals,

address: 5 Linmor Ave Newton, NJ 07860

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MAR 15 2018
NEWTON TOWN CLERK

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 # 160-2018
Rec'd Date 3-15-18
Ready Date 3-19-18
Total Pages 6

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid emailed

Records Provided

M. Estremera
Custodian Signature

3/19/18
Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

Important Notice

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Requestor Information – Please Print

First Name RONALD MI D. Last Name CHIARELLO

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 469 MORRIS AVE.

City SUMMIT State NJ Zip 07901

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1 FAX [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 RDChiarello Date 3/15/18

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

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.

41-63 Main St.
Copies of property cards

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MAR 15 2018
NEWTON TOWN CLERK

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 # 0065-2018
Rec'd Date 3/15/18
Ready Date 3/15/18
Total Pages 3

Final Cost

Total $0.15
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Michelle Esten 3/15/18
Custodian Signature Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

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Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

Important Notice

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Requestor Information – Please Print

First Name Clayton MI C Last Name Gunheim

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 784 Pfeiffer Blvd. Apt. 2H

City Hopelawn State NJ Zip 08861

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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

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Signature Clayton Gunheim Date 3/13/2018

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

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 request for Property at:
Homestead Rehab and Healthcare Center
129 Morris Turnpike
Newton, NJ 07860
(See attached sheet)

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MAR 14 2018
NEWTON TOWN CLERK

AGENCY USE ONLY

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

Deposit Date _____

AGENCY USE ONLY

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

AGENCY USE ONLY

Tracking Information

Tracking # 104-2018
Rec'd Date 3-14-18
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Not our opra Request location is in Frankford

James Reels 3/14/18
Custodian Signature Date

March 13, 2018

Clayton Gunheim
Partner Engineering & Science
Redacted per N.J.S.A. 47:1A-1.1

Lorraine A. Read, RMC
Municipal Clerk
39 Trinity Street
Newton, NJ 07860
973-383-3521 ext. 232

My name is Clayton Gunheim, Partner Associate. I am submitting a records request for copies of records at the below addressed property.

Homestead Rehab and Healthcare Center
129 Morris Turnpike
Newton, NJ 07860

1. Outstanding building code violations, or if none please state. Please provide name of Dept. Official providing information.
2. Permit history including open permits if applicable.
3. Original Certificate of Occupancy. Most recent Certificate of Continuing Occupancy if applicable
4. Outstanding zoning violations, or if none please state. Please provide name of Dept. Official providing information.
5. Confirmation property is being used to its permitted use; or otherwise noncompliant permitted use.
6. Open fire code violations. Or if none please state. Please provide name of Dept. Official providing information.
7. Date of last annual fire code inspection. Copy of fire code compliance certificate if one is issued. Confirmation that fire code inspections are done on an annual basis.
8. Tax map for property
9. Property Record Card
10. Record of annual certification of fire sprinkler backflow preventer if applicable and/or domestic water backflow preventer if applicable.

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
clerk@newtontownhall.com
Lorraine A. Read, RMC

Important Notice

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

Requestor Information – Please Print

First Name Daniel MI _____ Last Name Marroquin

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address c/o PEMCO Ltd, 820 Bear Tavern Rd

City West Trenton State NJ Zip 08628

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 Daniel Marroquin Date 3/12/18

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

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

Extras: Special service charge dependent upon request.

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

This OPRA request is in regard to property address:

92 TRINITY STREET, NEWTON, NJ.
Block: 15.02 Lot: 9

RECEIVED
MAR 13 2018
NEWTON TOWN CLERK

Please provide the following information:

1. Copies of open code violations attached to the property of reference that could result in a fine, summons, or prevent the sale of the property.
2. This property foreclosed and is vacant, if this property has been registered as such please include a copy.

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 # 63-2018
Rec'd Date 3/13/18
Ready Date 3/19/18
Total Pages 2

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid Emailed

Records Provided

M. Estremera
Custodian Signature

3/19/18
Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

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opra@newtontownhall.com
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Requestor Information – Please Print

First Name Steven MI _____ Last Name Gorelick

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 153 Halsey St, PO BOX 47023

City Newark State NJ Zip 07101

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 Steven Gorelick Date 3/5/18

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
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Other materials (CD, DVD, etc) – actual

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

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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 letter.

RECEIVED
MAR 12 2018
NEWTON TOWN CLERK

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 # 62-2018
Rec'd Date 3/12/18
Ready Date 3/12/18
Total Pages 4

Final Cost

Total N/C
Deposit
Balance Due
Balance Paid emailed

Records Provided

M. Esteves
Custodian Signature

3/12/18
Date

New Jersey Motion Picture & Television Commission

March 5th, 2018

Lorraine A. Read
Town of Newton
39 Trinity Street
Newton, NJ 07860

Dear Ms. Read,

We are requesting that you provide our office with copies of all film permits issued by **AND FILM PERMITS APPLICATIONS** received by your municipality in calendar year 2017. These copies are required in order to enable the Motion Picture and Television Development Commission established pursuant to N.J.S.A 34:1B-22 et seq. to fulfill one of its statutory requirements which is to prepare and present to the Governor and the State Legislature an annual report which, among other things, includes a listing of all film and television productions made within the State of New Jersey during each calendar year. (See N.J.S.A 34:1B-26). In order for the Commission to prepare such a report, it is necessary for us to procure information from your municipality. The Commission is authorized pursuant to N.J.S.A. N.J.S.A 34:1B-27(c) to procure such information from municipalities and counties.

Your cooperation in providing this information to our office in a timely manner is greatly appreciated. If you have any questions, please do not hesitate to contact me.

Thank you for your assistance in this matter.

Sincerely,

Steven Gorelick
Executive Director

Cc: George Cohen, Deputy Attorney General

153 Halsey Street, PO Box 47023, Newark, NJ 07101 (973) 648-6279 FAX (973) 648-7350
njfilm@sos.nj.gov www.film.nj.gov

Janien Roberts opra # 161-2018 3/9/18

From: Terri Oswin <toswin@newtontownhall.com>
ent: Thursday, March 08, 2018 4:46 PM
To: opra@newtontownhall.com
Subject: [Spam] FW: New Jersey Open Public Records Act Request

RECEIVED
MAR 09 2018
NEWTON TOWN CLERK

Please see below.

From: Glenn [redacted] Redacted per N.J.S.A. 47:1A-1.1
Sent: Thursday, March 8, 2018 4:39 PM
To: Dmillikin
Subject: New Jersey Open Public Records Act Request

Pursuant to the New Jersey Open Public Records Act, I am requesting an electronic copy of the complete vendor list (in Excel or CSV format) for the Town of Newton, New Jersey. For each vendor, please provide the company name, contact person, contact email, telephone, and address. If available, include the category/subcategory and product code for each company.

I am mainly looking for lists containing companies in the water and wastewater area, from Jan 1, 2016 to the present (contractors and suppliers). You can limit your response to those companies, if possible. Otherwise send the entire list and we will sort it out on our end. You can also send the information in whatever format you have it in, even if you do not have all of the requested information (such as categories or product codes).
Note: This request includes vendors and companies that have registered to receive notifications of new bids.

If you are not the right person to receive this request, please forward this email to the appropriate person.

Please feel free to contact me if you have any questions.

N/C emailed
3/19/18
1 Excel File
M. Esthemer

Glenn D. Oliver
H2bid, Inc.
www.h2bid.com
Redacted per N.J.S.A. 47:1A-1.1

Michelle Estremera

From: Lorraine A. Read <lread@newtontownhall.com>
Sent: Thursday, March 08, 2018 12:03 PM
To: mestremera@newtontownhall.com; Janien Roberts
Subject: FW: Brady OPRA request

RECEIVED
MAR 08 2018
NEWTON TOWN CLERK
OPRA # 60-2018
3/8/18
Reffered to Newton PD

Did you receive this? It doesn't show who it was sent to.

Lorraine A. Read, RMC, CMR
Municipal Clerk/Registrar
(973) 383-3521 ext. 232

From: Ford, Andrew [redacted] Redacted per N.J.S.A. 47:1A-1.1
Sent: Wednesday, March 07, 2018 7:02 PM
Subject: Brady OPRA request

The following request for records is made pursuant to N.J.S.A. 47:1A-1 et. seq. "OPRA" and the common law on behalf of the USA Today Network and the Asbury Park Press, a daily newspaper of general circulation. Please confirm receipt of this request. Please include "Brady OPRA request" and the name of your agency in the subject line of all email correspondence.

1. **The "Brady list," "Giglio list," "potential impeachment disclosure list,"** or records that set forth information on law enforcement officers in your municipality's department whose involvement in a criminal proceeding must be disclosed as potentially exculpatory evidence in accordance with Brady v. Maryland, 373 U.S. 83 (1963) and Giglio v. United States, 450 U.S. 150 (1972). Where possible, please include all information on these officers as reflected in your list, including: the officer's full name, agency of employment, date of inclusion on the list, and description of the reason for inclusion on the list.

We ask that these records be provided electronically and sent by e-mail (aford3@gannett.com) or through a cloud-based file storage system such as DropBox. An upload link can be provided.

We respectfully request that any fees be waived since the records will be used for newsgathering purposes and ultimately released to the public in some form to shed light on the operations of government. If the agency expects to require payment for copies, record location or other elements of the request, please provide a fee estimate before proceeding so that I may weigh the cost and consider my options.

If you claim any portion of the above public records are exempt from disclosure under the law, please provide a Vaughn index identifying which records exist, which portion or portions you claim are exempt and the legal provisions you contend apply, and release the remainder of such records, redacting only the portion or portions you claim are exempt.

Thanks for your time and consideration. If you have any questions, please feel free email or call.

Sincerely,

Andrew Ford
Redacted per N.J.S.A. 47:1A-1.1
Reporter
@AndrewFordNews
Redacted per N.J.S.A. 47:1A-1.1

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 David MI T Last Name Nelson

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 130 New Rd J14

City Parsippany State NJ Zip 07054

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 3/5/18

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

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 looking for all records pertaining to 15 Orchard Street including, but not limited to, all open/closed permits. This is block # 22.5 and lot #4.

RECEIVED
MAR 08 2018
NEWTON TOWN CLERK

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 # 59-2018
Rec'd Date 3-8-18
Ready Date 3-19-18
Total Pages 6 files

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid email

Records Provided

YM Estremera 3/19/18
Custodian Signature Date

Janien Roberts Tracking Opra # 58-2018

From: Lorraine A. Read <lread@newtontownhall.com>
Sent: Tuesday, March 06, 2018 1:10 PM
To: mestremera@newtontownhall.com; Janien Roberts
Subject: FW: New OPRA - Town of Newton submitted on 03/05/2018

Importance: High

RECEIVED
MAR 06 2018
NEWTON TOWN CLERK

Lorraine A. Read, RMC, CMR
Municipal Clerk/Registrar
(973) 383-3521 ext. 232

3/19/2018
1 Excel file
M. Estremera

From: New Jersey [redacted] Redacted per N.J.S.A. 47:1A-1.1
Sent: Monday, March 05, 2018 5:51 PM
To: lread@newtontownhall.com
Subject: New OPRA - Town of Newton submitted on 03/05/2018
Importance: High

03/05/2018

Lorraine A. Read:

Pursuant to the OPRA, this is a request for a copy of the following records: An electronic copy of any and all employees for year of 2017, (fiscal or calendar year). Each employee record should contain the employer name, employer zip code, year of compensation, first name, middle initial, last name, hire date (mm-dd-yyyy), base salary amount, bonus amount, overtime amount, gross annual wages and position title. This data should be broken down by employer, employee and year.

The principal purpose of this is to make this information more accessible to the public and to access and disseminate information regarding the health, safety, and welfare of the general public. This request is not principally for personal or commercial benefit. Our agency is just exercising the general rights of the public. For these reasons, we are requesting a waiver of fees. If there is a charge for this service, please obtain my approval in writing prior to proceeding with request.

All documents can be e-mailed to [redacted] Redacted per N.J.S.A. 47:1A-1.1 (preferred format would be .csv or .xls). If any documents are not provided in the format specified, please provide the state or federal statutes relied upon for that decision. If any record or portion of a record responsive to this

request is contained in a record or portion of a record deemed unresponsive to the request, I would like to inspect the entire document. Under the Open Records Act/Freedom of Information Act, all non-exempt portions of any partially-exempt documents must be disclosed. If any records or portions of records are withheld, please state the exemption on which you rely, the basis on which the exemption is invoked, and the name of the individual responsible for the decision.

Thank you for your prompt consideration of my request. If you have any questions, or if I can be of any assistance, please e-mail me at [redacted] Redacted per N.J.S.A. 47:1A-1.1

Sincerely,

Denise Cattoni

American Transparency

P.O. Box 970999

Boca Raton, FL 33497-0999

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
clerk@newtontownhall.com
Lorraine A. Read, RMC

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 Ginny MI _____ Last Name Schouten

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 216 E Broadway

City Monticello State New York Zip 12701

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I ***HAVE / HAVE NOT*** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Ginny Schouten Date March 2, 2018

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

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.

Looking for Permit Activity Report for February 2018.

RECEIVED
MAR 05 2018
NEWTON TOWN CLERK

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 # 57-2018
Rec'd Date 3/5/18
Ready Date 3/6/18
Total Pages 1 file

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid email

Records Provided

M. Estermann Custodian Signature 3/6/18 Date

Place Logo Here

AGENCY NAME HERE

OPEN PUBLIC RECORDS ACT REQUEST FORM

Agency Address
Agency Telephone Number & Fax Number
Agency e-mail address
Name of Agency Custodian

Place Logo Here

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 JOHN MI N Last Name GIORGI

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 2092 MORRIS AVENUE

City UNION State NJ Zip 07083

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 John Giorgi Date 2/13/2018 ~~7/26/2017~~

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 AND ALL MUNICIPAL LIENS, OPEN PERMITS, CODE VIOLATIONS AND / OR FINES SINCE 2010 TO THE PRESENT DATE ON THE FOLLOWING PROPERTY

149 Mill Street Newton NJ 07860

RECEIVED
MAR 05 2018
NEWTON TOWN CLERK

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 # 50-2018
Rec'd Date 3-5-2018
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature _____ Date _____

OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street07860-1823
973-383-3521 Fax 973-383-8961
E-mail: www.newtontownhall.com
Clerk: Lorraine A. Read, RMC, CMR

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 James MI G Last Name Devine

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 29 Pidgeon Hill Road

City Wantage State New Jersey Zip 07461

Telephone Redacted per N.J.S.A. 47:1A-1.1 FAX N/A

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

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I ***HAVE / HAVE NOT*** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature James Devine Date March 1, 2018

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

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

Extras: Special service charge dependent upon request.

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

All documents, records, notes, transcripts of public meetings and maps contained in the Newton Planning Board file Application of John E. Mulhern, Application # MSV 3-2007, Approved May 16, 2007 and memorialized June 20, 2007

B: 3.01 L: 22

FOR: 29 Slate Hill Rd., Newton

RECEIVED
MAR 05 2018
NEWTON TOWN CLERK

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 # 55-2018
Rec'd Date 3/5/18
Ready Date 3/9/18
Total Pages 102

Final Cost

Total 5.24
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

James Devine 3/9/18
Custodian Signature Date

Janien Roberts

From: Dan Pagano [redacted]
Sent: Sunday, March 04, 2018 4:44 PM
To: Lorraine A. Read
Cc: Janien Roberts; ddanzis@njherald.com; Nick Bennett
Subject: open Public Meeting Act Violation

Ms. Read,

Please consider this email a request for information under the New Jersey Open Public Records Act. I am requesting any records including but not limited to; minutes, emails, notes or electronic recordings of the communications between the council council members, the administration, or the township attorney regarding the 3/5/18 "Special Meeting" of the Town Council. I cannot find any reference to a discussion of such a meeting at any previous public meeting therefore, I believe these discussions took place in private in violation on New Jersey's Open Public Meetings Act.

I have provided a copy of the definition of a "meeting" as determined by the law. If the discussions were held in private the "Special Meeting" will be in violation of the law. I fiully intend to file an ethics complaint with the NJ division of Community Affairs, Local Board of Finance.

Thank you for your time,
Dan Pagano

b. "Meeting" means and includes any gathering whether corporeal or by means of communication equipment, which is attended by, or open to, all of the members of a public body, held with the intent, on the part of the members of the body present, to discuss or act as a unit upon the specific public business of that body. Meeting does not mean or include any such gathering (1) attended by less than an effective majority of the members of a public body, or (2) attended by or open to all the members of three or more similar public bodies at a convention or similar gathering.

http://www.njslom.org/OPMA/OPMA%20COMPLETE%20BOOK.pdf

OPRA # 54-2018
3/29/18
Sent via email
N/C
M. Estremera 3/29/18

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 Andrew MI L Last Name Weinstein

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 110 Fairview Avenue, Suite 3

City Verona State NJ Zip 07044

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 3/2/2018

Payment Information

Maximum Authorization Cost $20

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

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 list of any permits issued for 921 Ridge Road, Newton, and the current status of any such permits (open/closed). Thanks!

RECEIVED
MAR 05 2018
NEWTON TOWN CLERK

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 # 53-2018
Rec'd Date 3/5/18
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature **Date**

RECEIVED

MAR 05 2018

NEWTON TOWN CLERK

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 Alessandra MI ____ Last Name Ostuni

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 299 Market St Suite 220

City Saddle Brook State NJ Zip 07663

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 3/2/18

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

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 Mason Ave.

- Any open fines / violations ?
- Any owed back taxes on property ?

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.

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

AGENCY USE ONLY

Tracking Information

Tracking # 52-2018
Rec'd Date 3/5/18
Ready Date 3/6/18
Total Pages 2

Final Cost

Total N/C
Deposit
Balance Due
Balance Paid email

Records Provided

M. Gaston 3/6/18
Custodian Signature Date

Janien Roberts

OPRA #51-2018 Log in 3/1/2018

From: Chris Robertozzi [redacted] Redacted per N.J.S.A. 47:1A-1.1
Sent: Thursday, March 01, 2018 7:15 AM
To: opra@newtontownhall.com
Subject: Contact information

To Whom It May Concern:

Pursuant to OPRA I am requesting the contact information for the owner of the Newco property on the corner of Hicks and Newton-Sparta Road.

Thank you,
Chris Robertozzi

N/C email
1 page
3/1/2018
M. Estremera

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 William MI B. Last Name Thayer

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 60 Blue Heron Road

City Sparta State NJ Zip 07871

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 _____ Date 2/28/18

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

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

Extras: Special service charge dependent upon request.

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

All documents relating to the construction of Fitness Nation located at 75 Sparta Avenue in Newton, NJ.

All construction plans related to Fitness Nation located at 75 Sparta Avenue in Newton, NJ.

All architectural drawings, permit documents, inspection reports, correspondence, certificates of occupancy, or other similar documents that are on file with the Town of Newton Building Department, regarding Fitness Nation located at 75 Sparta Avenue in Newton, NJ.

RECEIVED
FEB 28 2018
NEWTON TOWN CLERK

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 # 50-2018
Rec'd Date 2/28/18
Ready Date 3-16-18
Total Pages —

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature 3/16/18 Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 C Last Name Obropta

E-mail Address [redacted]

Mailing Address 14 College Farm Rd

City New Brunswick State NJ Zip 08901

Telephone [redacted]

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

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I ***HAVE / HAVE NOT*** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [signature] Date 2/28/18

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

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.

Development Plans + stormwater Report for:

1) Kohls 11 N. Park Dr.
2) Townhomes 160 Sparta Ave
3) Aba Eye Care Assoc.
4) Kenneth Martin
5) Wachovia Bank
6) N. Park Urban Renewal
7) Walgreens
8) Jersey Central Power + Light
9) Thor Labs
10) Warehouse – 42 Hicks Ave
11) Maintenance Enterprise
12) Newton Town Center LP1
13) " " " LP2
14) " " " LP3
15) Dunkin Donuts
16) Auto Zone
17) All Access Staging Production

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
FEB 28 2018
NEWTON TOWN CLERK

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

AGENCY USE ONLY

Tracking Information

Tracking # 49-2018
Rec'd Date 2/28/18
Ready Date ____
Total Pages 0

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Viewed files only - no copies made

[signature] 2/28/18
Custodian Signature Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 Ralph MI G Last Name CARCHIA

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 13 Birch Drive Newton NJ.

City Newton State NJ Zip 07860

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 2/27/18

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

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 copies of all Building permits (Violations, Building or Zoning) and all Construction permits related to (19 Linnor Ave BL 22.6 Lot 5) all tax records and property survey if available. Also any other violations related to the property.

RECEIVED
FEB 28 2018
NEWTON TOWN CLERK

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 # 48-2018
Rec'd Date 2/28/18
Ready Date 3/6/18
Total Pages 8

Final Cost

Total ____
Deposit N/C
Balance Due ____
Balance Paid emailed

Records Provided

M. Estremera 3/6/18
Custodian Signature Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 VIVEK MI _____ Last Name NAIR

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address P.O. BOX 447

City NEWTON State NJ Zip

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 2/28/18

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

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.

OIL TANK information &/permits on removal or installation

74A TRINITY ST

NEWTON, NJ

RECEIVED
FEB 28 2018
NEWTON TOWN CLERK

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 # 47-2018
Rec'd Date 2/28/18
Ready Date 3/1/18
Total Pages 1

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid email

Records Provided

M. Esteves
Custodian Signature

3/1/18
Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

RECEIVED
FEB 27 2018
NEWTON TOWN CLERK

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 VIVIAN MI _____ Last Name NADAJAL

E-mail Address [Redacted per N.J.S.A. 47:1A-1.1]

Mailing Address P.O BOX 442

City NEWTON State NJ Zip _____

Telephone [Redacted per N.J.S.A. 47:1A-1.1]

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 2/27/18

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

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.

74A TRINITY ST Open code violation
NEWTON NJ
BLOCK=15.3 PRC
LOT = 8 PRC
ZON = I5
ANY DOCUMENT SERVED
ANY OPEN VIOLATIONS / OPEN CONDITIONS REPORT

AGENCY USE ONLY

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

Deposit Date _____

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information

Tracking # 46-2018
Rec'd Date 2/27/18
Ready Date 2/27/18
Total Pages 5

Final Cost

Total $0.25
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature

2/27/18
Date

Michelle Estremera

From: McBride, Cynthia A. [redacted]
Sent: Monday, February 26, 2018 3:13 PM
To: OPRA@newtontownhall.com
Cc: McBride, Cynthia A.
Subject: 2-26-18 OPRA REQUEST

Good Afternoon Ms. Reed/Municipal Clerk/Records Custodian

Please consider this an official OPRA request.

I am a requesting a copy of the list as kept and maintained by the Town of Newton, of the parcels currently being charged (or just required to register) vacant property registration fees. 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
Phone 609-359-7033
Cell [redacted]
Please consider the environment before printing

RECEIVED
FEB 26 2018
NEWTON TOWN CLERK
OPRA # 45-2018
2 pages
N/C emailed
2/27/18

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 Michelle MI M. Last Name Beatty

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address Morris, Downing & Sherred, LLP
One Main Street, P.O. Box 67

City Newton State NJ Zip 07860

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 Michelle M Beatty Date 2/26/18

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

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 permits and approvals, including, but not limited to oil tank removal/installation, electrical, plumbing, etc., relating to property located at 36 Hillside Avenue, Block 4.05, Lot 7 (formerly known as Block 102, Lot 7), Town of Newton, Sussex County, New Jersey

RECEIVED
FEB 26 2018
NEWTON TOWN CLERK

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 # 44-2018
Rec'd Date 2/26/18
Ready Date 3/6/18
Total Pages 3

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid email

Records Provided

Custodian Signature

3/6/18
Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 Rachel MI ____ Last Name Bucci

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 12 Maple Ave

City Newton State NJ Zip 07860

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 Rachel Bucci Date 2-24-18

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

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.

30 Madison St
Block 14.02 Lot 21

Code enforement
any open and closed code violations.

RECEIVED
FEB 26 20[illegible]
NEWTON TOWN[illegible]

AGENCY USE ONLY

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

D[illegible] Date ____

AGENCY USE ONLY

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

RECEIVED
FEB 26 2018
NEWTON TOWN CLERK

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

AGENCY USE ONLY

Tracking Information

Tracking # 43-2018
Rec'd Date 2/26/18
Ready Date 2/27/18
Total Pages 2 files

Final Cost

Total ____
Deposit N/C
Balance Due ____
Balance Paid email

Records Provided

M. Estes 2/27/18
Custodian Signature Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 Rachel MI ____ Last Name Bucci

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 12 Maple ave

City Newton State NJ Zip 07860

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 / I HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Rachel Bucci Date 2-24-18.

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

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.

33 Woodside Ave
Block 18.04 Lot 7

RECEIVED
FEB 26 2018
NEWTON TOWN CLERK

Request any open and closed construction permits.

AGENCY USE ONLY

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

posit 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 # 42-2018
Rec'd Date 2/26/18
Ready Date 3/6/18
Total Pages 4

Final Cost

Total ____
Deposit N/C
Balance Due ____
Balance Paid cancel

Records Provided

M. Estevez Custodian Signature 3/6/18 Date

Place Logo Here

AGENCY NAME HERE

OPEN PUBLIC RECORDS ACT REQUEST FORM

Agency Address
Agency Telephone Number & Fax Number
Agency e-mail address
Name of Agency Custodian

Place Logo Here

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 JOHN MI N Last Name GIORGI

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 2092 MORRIS AVENUE

City UNION State NJ Zip 07083

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 John Giorgi Date 2/13/2018 ~~7/26/2017~~

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.

.NY AND ALL MUNICIPAL LIENS, OPEN PERMITS, CODE VIOLATIONS AND / OR FINES SINCE 2010 TO THE PRESENT DATE ON THE FOLLOWING PROPERTY

149 Mill Street Newton NJ 07860

RECEIVED
FEB 26 2018
NEWTON TOWN CLERK

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 # 41-2018
Rec'd Date 2/26/18
Ready Date 3/6/18
Total Pages 2 files

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid emailed

Records Provided

Custodian Signature M. Estremera Date 3/6/18

Michelle

DPW

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 JUDY MI ____ Last Name GOLLAND

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 17 OAKWOOD TRAIL

City SPARTA State NJ Zip 07871

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 Judy Golland Date 2-23-18

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

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 RELATING TO A CURB CUT FOR A DRIVEWAY FOR PARKING AT 127 HIGH ST. A 2005 LISTING FOR SALE OF THIS PROPERTY MADE REFERENCE TO THE OWNER HAVING "APPROVAL FOR A CURB CUT WITH PARKING FOR (4) CARS.

ANY RECORDS WITH REFERENCE TO OFF STREET PARKING WOULD BE VERY HELPFUL.

THANK YOU!

Judy Golland

2/27/2018 – DPW - nothing on file this address is on a State Hwy.

RECEIVED
FEB 23 2018
NEWTON TOWN CLERK

Deb Danielson

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 # 40-2018
Rec'd Date 2/23/18
Ready Date 2/28/18
Total Pages 1

Final Cost

Total ____
Deposit N/C
Balance Due ____
Balance Paid email

Records Provided

Custodian Signature Date

TOWN OF NEWTON
OPEN PUBLIC RECORDS ACT REQUEST FORM

39 Trinity Street, Newton, NJ 07860
Phone: (973) 383-3521x232 Fax:(973) 300-1208
opra@newtontownhall.com
Lorraine A. Read, RMC

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 J Last Name Burn

E-mail Address [redacted] Redacted per N.J.S.A. 47:1A-1.1

Mailing Address 151 Hobart Avenue

City Short Hills State NJ Zip 07078

Telephone [redacted] Redacted per N.J.S.A. 47:1A-1.1

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 Christopher J Burn Date 23 Feb 2018

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

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 / Minutes of Newton Planning Board Meeting November 30, 1992 ~~and~~

RECEIVED
FEB 23 2018
NEWTON TOWN CLERK

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 # 39-2018
Rec'd Date 2/23/18
Ready Date 2/26/18
Total Pages 9

Final Cost

Total _____
Deposit N/C
Balance Due _____
Balance Paid email

Records Provided

M. Estrella
Custodian Signature

2/26/18
Date