



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Cathy MI A Last Name DiMiceli
E-mail Address [REDACTED]@optonline.net
Mailing Address 1 Steward Court
City Millstone Twp State NJ Zip 08510
Telephone [REDACTED] 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 Cathy DiMiceli Date 3/21/19

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.

property survey
1 Steward Court
Millstone Twp
Block 48
Lot 14.18

Sent to
Const
3/21/19

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

Maria Dellasala
Custodian Signature

3/21/19
Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
 Millstone Township, NJ 08510
 Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
 m-dellasala@millstonenj.gov
 Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name DANIEL MI C Last Name VILLALBA
 E-mail Address [REDACTED] AOL.COM
 Mailing Address 14 VAN HISE DR.
 City MILLSTONE State MT Zip 08535
 Telephone [REDACTED] FAX [REDACTED]
 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 3/18/19

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.

Survey of property
B39 L 8

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

Records Provided

[Signature] 3/18/19
 Custodian Signature Date

~~CONFIDENTIAL~~

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

paid
05.4

3/18/19
Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name Andrew MI _____ Last Name Pursell
E-mail Address: [REDACTED]@gmail.com
Mailing Address 245 Frankfort Ave
City Neptune State NJ Zip 07753
Telephone [REDACTED] 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 Andrew Pursell Date 3/14/2019

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 to get a record of all permits filled for the property located at 415 Millstone Road, Millstone, NJ.

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
<u>Completed to cust</u>			
Custodian Signature <u>Maria Dellasala</u>		Date <u>3/14/19</u>	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
 Millstone Township, NJ 08510
 Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
 m-dellasala@millstonenj.gov
 Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name DONALD MI 6 Last Name POWELL
 E-mail Address [REDACTED]@HOTMAIL.COM
 Mailing Address 97 HGRESS RD.
 City CLARKSBURG State NJ Zip 08570
 Telephone [REDACTED] 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 / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
 Signature [Signature] Date 3-13-2019

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.

97 Agress Rd
B1 37.03 lot 26.03
well permit

called 3/15 LM No INFO found by 1987

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	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
<u>[Signature]</u> Custodian Signature		<u>3/13/19</u> Date	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Megan MI C Last Name Byrne
E-mail Address [REDACTED]@ey.com
Mailing Address 6 Craig Ct.
City Millstone Twp State NJ Zip 08535
Telephone [REDACTED] 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 Megan L. Byrne Date 3/14/19

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.

Conservation easement deed block 43, Lot 15.14

3/15/19
copy attached
& emailed jpd

AGENCY USE ONLY

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

Deposit Date _____

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>Maria Dellasala</u>		Date <u>3/14/19</u>	

Given to
DA - Conch
PD - Land Use
3/13/19

ENTERED
3/18/19

TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM	
470 Stagecoach Road Millstone Township, NJ 08510 Telephone 873-445-4249, x.1701 Fax 873-609-208-2438 m.dellaseale@millstone.nj.gov Maria Dellaseale, Municipal Clerk	
Important Notice The last page of this form contains important information related to your rights concerning government records. Please read it carefully.	
Requestor Information - Please Print	Payment Information
First Name <u>Marianne Rullo</u> MI Last Name <u>Rullo</u>	Maximum Authorization Cost \$
E-mail Address <u>[redacted]@w.com</u>	Select Payment Method
Mailing Address <u>10 Hawthorne Ct.</u>	Cash ☐ Check ☐ Money Order ☐
City <u>Freehold</u> State <u>NJ</u> Zip <u>07728</u>	Fees: Letter size pages - \$0.05 per page Legal size pages - \$0.07 per page Other materials (CD, DVD, etc) - actual cost of material
Telephone <u>[redacted]</u> FAX <u>[redacted]</u>	Delivery: Delivery / postage fees additional depending upon delivery type.
Preferred Delivery: Up ☐ US Mail ☐ On-Site ☐ Inspect ☐ Fax ☐ E-mail ☒	Extras: Special service charge dependent upon request.
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 <u>Marianne Rullo</u> Date <u>3/12/19</u>	
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) I am requesting authorization + what is necessary to install a pool, in the back yard @ 273 Disbrow Hill Rd, Millstone. 2) Any permits + inspections construction for construction &/or remediation performed at 273 Disbrow Hill Rd, Millstone. 3) What part of the property is wet lands? 4) What Part of the property (if any) is Conservation Easement? 5) wetlands permits on the property?	
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 _____ Filed - Closed _____ Partial - Closed _____
	AGENCY USE ONLY
	Tracking Information
	Final Cost
	Tracking # _____ Total _____ Rec'd Date _____ Deposit _____ Ready Date _____ Balance Due _____ Total Pages _____ Balance Paid _____ Records Provided _____ Custodian Signature _____



6/7.05 Construction Code



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM
 470 Stagecoach Road
 Millstone Township, NJ 08510
 Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
 m-dellasa@millstonenj.gov
 Maria Dellasa, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name Eric MI _____ Last Name Payne
 E-mail Address _____@gmail.com
 Mailing Address 350 Nassau St
 City Princeton State NT Zip 08540
 Telephone _____ FAX (609)921-0880
 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 March 8 2019

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 information you have on 30 Nurko Rd
 I need to verify 1 code violation
 2 denio orders or citations.

B6
 L7.05

AGENCY USE ONLY

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

AGENCY USE ONLY

Disposition Notes
 Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.
 In Progress - Open _____
 Denied - Closed _____
 Filled - Closed _____
 Partial - Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided _____			
3/8/19 Sent by mail		3/8/19	
Custodian Signature _____		Date _____	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Margaret MI M Last Name Ecke
E-mail Address [redacted]@yahoo.com
Mailing Address 42 yellow meeting house rd
City Millstone State NJ Zip 08510
Telephone [redacted] FAX [redacted]
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 3/7/19

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 to request the following information on 122 stillhouse rd in Millstone:

Block 45
Lot 4.01

- ① Any open/closed permits existing
- ② If the property is on any wetlands or preserved or protected area.

Please contact me via phone and email the following information.

Thank you. - Margaret Ecke

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

Forwarded to Const/24
LH = emailed 3/7/19

[Signature] 3/7/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Alex MI _____ Last Name SMOLENSKI
E-mail Address [REDACTED]@gmail.com
Mailing Address 54 3rd Ave
City NEPTUNE CITY State NJ Zip 07753
Telephone [REDACTED] 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 3/6/19

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 PERMIT INFORMATION FOR
THE PROPERTY AT 414 MILLSTONE RD, LOT 23 BLOCK 50
(OPEN + CLOSED PERMITS, CERTIFICATES OF OCCUPANCY, ETC)

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

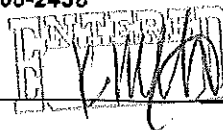
[Signature]
Custodian Signature

3/6/19
Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

**470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk**



Important Notice

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

Requestor Information - Please Print

First Name Eric MI MI Last Name Payne

E-mail Address _____@gmail.com

Mailing Address 350 Nassau St

City Princeton State NT 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 [Signature] Date March 8 2019

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 information
you have on 30 Nurko Rd
I need to verify ① code violations
② demo orders or ③ citations.

B6
L7.05

Zoning/Code = None
Construction = None

AGENCY USE ONLY

Est. Document Cost

Est. Delivery Cost

Est. Extras Cost

Total Est. Cost

Deposit Amount

Estimated Balance

Deposit Date

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

Records Provided

Records Provided
emailed - no info 3/8/17

Kathleen Paul 2/8/19
Custodian Signature

Доб



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Abraham MI D Last Name Brander
E-mail Address [REDACTED]tryko.com
Mailing Address Trystone Capital Asset LLC PO Box 1030
City Brick State NJ Zip 08723
Telephone [REDACTED] FAX [REDACTED]
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 [REDACTED] Date 3/8/19

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.

Cancelled checks for lien redemption certificate number 12-00002 for 65 Stillhouse Road"

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information

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

Final Cost

Total _____

Deposit _____

Balance Due _____

Balance Paid _____

Records Provided

email sent 3/8/19 lrm

Kathleen [Signature] 3/8/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Daniel MI S Last Name Lichtman

E-mail Address [REDACTED]@absolar.com

Mailing Address 272 Millstone Rd

City Perrineville State NJ Zip 08535

Telephone [REDACTED] FAX [REDACTED]

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 _____

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.

448 stage coach Rd
I would like to know if a permit was ever issued and closed for an oil tank de-commissioning at the above property.

no Tank Removal found Aug 3/5/19

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 _____ Deposit _____
Ready Date _____ Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

emailed 3/8/19

manuscript 3/5/19
Custodian Signature _____

Date _____



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Paul MI Last Name Kenny

E-mail Address [REDACTED]@outlook.com

Mailing Address 4 Sheffield Drive

City Marlton State NJ Zip 08053

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 [Signature] Date 2/28/19

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.

Environmental records, documents or reports related to underground storage tanks, spills discharges

36 Pine Hill Road
Block 28, Lot 12.02

*E/C ✓ 3/2/19
Cnstr ✓ 3/8/19 emailed
D/S ✓ 3/16/19 emailed
P/D ✓ 3/4/19 emailed*

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> </u>	Deposit	<u> </u>
Ready Date	<u> </u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>

Records Provided

[Signature]
Custodian Signature

3/1/19
Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



ENTERED
11/11/19

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 Kristen MI M Last Name Ondu
E-mail Address [REDACTED]@gmail.com
Mailing Address 158 Harrow Dr.
City Samersett State NJ Zip 08873
Telephone [REDACTED] 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 03/05/19

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.

We put an offer down for 509 Ely Harmony Rd. Millstone Twp. 08510. The house has had two additions completed. We would like confirmation that the work was permitted and there is nothing outstanding before we complete this purchase.

62/19.03 1964

forwarded to
construction
3/5/19

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

Emailed 3/6/19 no open permits
All Alterations permitted
Maurice [Signature] 3/5/19
Custodian Signature _____ Date _____



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dallasala@millstonenj.gov
Maria Dallasala, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name Geoffrey MI W Last Name Warren
E-mail Address [REDACTED]@redimix.com
Mailing Address 1939 Rt. 206
City Southampton State NJ Zip _____
Telephone [REDACTED] 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 Geoffrey Warren Jr. 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.

Regarding Const. of new Storage Facility on Monmouth Rd., I would like to know:
owner, GC, Developer Name and Contact info.
Lot & Block

3/4/19
2:00PM PD
Save info

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

Maria Dallasala 3/4/19
Custodian Signature Date

Maria Dellasala

From: Laura Nelson [ln@surenian.com]
Sent: Friday, March 01, 2019 11:25 AM
To: Laura Nelson
Subject: OPRA REQUEST

Importance: High



Good morning:

Kindly accept this email as a formal OPRA request for a copy of the following documents with respect to the Affordable Housing Litigation:

1. All settlement agreements and amendments together with Exhibits between the municipality and Fair Share Housing Center from 2015-present;
2. All orders approving the Settlement Agreement ;
3. All conditional orders of compliance;
4. All Final orders of judgment of compliance and repose;
5. Master's Report for the Fairness Hearing; and
6. Master's Report for the Compliance Hearing.
7. Name and **email** information for your attorney handling the Affordable Housing matters.

Please provide responsive documents to LN@Surenian.com

If you have any questions or require clarification, please call.

Thank you

Laura Nelson

Assistant to Jeffrey R. Surenian, Esq &
Michael J. Edwards, Esq.

Phone:	Jeffrey R. Surenian and Associates, LLC
Fax:	707 Union Avenue, Suite 301
Direct:	Brielle, New Jersey 08730
Email:	ln@surenian.com

The information contained in this message is intended only for the personal and confidential use of the designated recipients named above. This message may be an attorney-client communication, and as such is privileged and confidential. If the reader of this message is not the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, distribution or copying of this message is strictly prohibited. If you have received this communication in error, please notify us immediately by reply e-mail message or by telephone and delete the original message from your e-mail system and/or computer database.



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name JESUS MI _____ Last Name SAÑEZ
E-mail Address [REDACTED]@OPTONLINE.NET
Mailing Address 8 STEWART CT
City MILLSTONE State NJ Zip 08510
Telephone [REDACTED] 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 2/28/19

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 FORECLOSURE OR UNPAID PROPERTIES IN MILLSTONE

EMADUC 3-1-19 10:55 AM

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

Records Provided

[Signature]
Custodian Signature

2/28/19
Date



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



INTERNAL

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 Tetrowe MI M Last Name Mante
E-mail Address [REDACTED]@ptd.net
Mailing Address PO Box 381
City E. Stroudsburg State PA Zip 18301
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 [Signature] Date 2/26/19

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.

could you please send me any open permits or any problems known on this property including water & sewer if applicable.
422 Monmouth Rd. Millstone Twp. Lot 18.04 Block 61
Any questions please call mobile above or email.
Thanks Jerry

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	100
Records Provided			
2/26 gave H/O report DA			
Custodian Signature		Date	
[Signature]		2/26/19	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name THANE MI M Last Name GALLAGHER
E-mail Address [REDACTED]@aol.com
Mailing Address 29 CARRS TAVERN ROAD
City CLARKSBURG State NT Zip 08510
Telephone [REDACTED] 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 2/26/19

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.

60-02 LOT 2.02
SURVEY
OPEN PERMITS
3 copies 15K

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>[Signature]</u>		Date <u>2/26/19</u>	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Jim Mr. Last Name BeFarch
E-mail Address [REDACTED]@bhhnj.com
Mailing Address 222 Millstone Rd
City M. Millstone State NJ Zip 08535
Telephone [REDACTED] AX [REDACTED]
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 2-26-19

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.

Block 16 Lot 9.07
1100 Rike Pr.
Any approvals

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>[Signature]</u>		Date <u>2/26/19</u>	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
 Millstone Township, NJ 08510
 Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
 m-dellasala@millstonenj.gov
 Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Jim MI _____ Last Name BeFara
 E-mail Address [REDACTED]@bhsny.com
 Mailing Address 222 Millstone Rd
 City M. Millstone State NJ Zip 08535
 Telephone [REDACTED] FAX [REDACTED]
 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 2-26-19

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.

1700 Rike Pr.
Block 16 Lot 9.10
any approvals

AGENCY USE ONLY

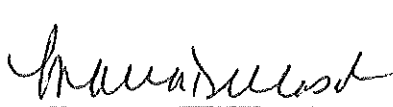
Est. Document Cost _____
 Est. Delivery Cost _____
 Est. Extras Cost _____
 Total Est. Cost _____
 Deposit Amount _____
 Estimated Balance _____
 Deposit Date _____

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
 Custodian Signature		<u>2/26/19</u> Date	



264554

08:21:02 a.m. 02-22-2019

1/4

31.06/13.04



TOWNSHIP OF MILLSTONE

OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name Brian MI Last Name Brenner
E-mail Address [redacted]@robinsonburns.com
Mailing Address 586 East Main Street
City Bridgewater State NJ Zip 08807
Telephone [redacted] FAX [redacted]
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 B. Brenner Date 2/22/19

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 information regarding permit applications, open permits or permit approvals relating to septic and/or underground oil tanks at:
32 Witches Hollow Road, Millstone, NJ 08535 - LOT 31.06, Block 13.04

31.06 / 13.04

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> </u>	Deposit	<u> </u>
Ready Date	<u> </u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>

Records Provided

2/26 Sent email OP

M. Dellasala 2/22/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dallasala@millstonenj.gov
Maria Dallasala, Municipal Clerk



COPY to Wash KCC 2/27

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 M Last Name O'Reilly
E-mail Address [REDACTED]@actionplusrealty.com
Mailing Address 2 Lawrence Spring Dr.
City Millstone State NJ Zip 08510
Telephone [REDACTED] FAX [REDACTED]
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 Linda O'Reilly Date [REDACTED]

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.

Survey, zoning, violations
well, septic

122 Stillhouse Rd

Block 45 Lot 4.02

NO VIOLATIONS CODE ENFORCEMENT (M) 3-8-19.

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

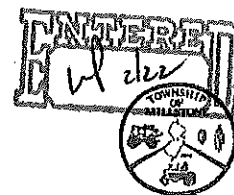
AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
2/27 Gene report of closed permits (M)		2/27/19	
Custodian Signature		Date	



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

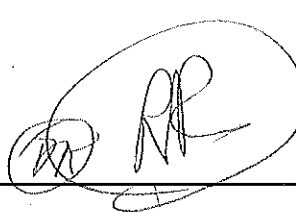
First Name ROSALIND MI C Last Name RESSNER
E-mail Address PEARTH FRIENDLY ORGANIC FARM.COM
Mailing Address 17 OLDE NOAH HUNT ROAD
City CLARKSBURG State NJ Zip 08510
Telephone [REDACTED] FAX [REDACTED]
Preferred Delivery: Pick Up ☒ US Mail ☐ On-Site ☐ Inspect ☐ Fax ☐ E-mail ☒
If you are requesting records 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 Rosalind Resner Date 2/19/19

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 need inspection report/certificate
that oil tank was removed at above address.
Block 54 - Lot 2. 10*

2/22/19 gave 4/6 copies of certificates 

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

Records Provided

Kalman Burt 2/19/19
Custodian Signature Date

Millstone Township
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stage Coach Road Millstone Township 08510

Maria Dellasala
m-dellasala@millstonenj.gov

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 Omar MI _____ Last Name Salem

E-mail Address [REDACTED]@gmail.com

Mailing Address 96 Schulyer Dr

City Edison State NJ Zip 08817

Telephone [REDACTED] FAX _____

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

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

Signature Omar Salem Date 2019-02-19

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 to request a report showing all of the open property tax liens in the township (AKA - condensed lien account status report) or whatever report name you may use. Thank you!



Handwritten signature and date 2/20/19

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
 Millstone Township, NJ 08510
 Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
 m-dellasala@millstonenj.gov
 Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name Cassandra MI _____ Last Name Hill
 E-mail Address [REDACTED]@aol.com
 Mailing Address 30 Sunrise Road
 City Old Bridge State NJ Zip 08857
 Telephone [REDACTED] FAX [REDACTED]
 Preferred Delivery: ☒ Pick Up ☐ US Mail ☐ On-Site Inspect ☒ Fax ☒ E-mail ☒
 (which ever is fastest)
 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 Cassandra Hill Date 02/14/19

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.

Looking for information on 73 Baird Road Millstone, NJ 08535
 Need information on any past or current permits.
 Information on oil removal, any information on wells & septic

B/28
 w/15.01

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking # _____	Total _____		
Rec'd Date _____	Deposit _____		
Ready Date _____	Balance Due _____		
Total Pages _____	Balance Paid _____		
Records Provided			
Copy to Construction 2/15/19			
Custodian Signature <u>[Signature]</u>		Date <u>2/15/19</u>	



**TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM**

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasa@millstonenj.gov
Maria Dellasa, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Art MI _____ Last Name Bernard
E-mail Address [REDACTED]@gmail.com
Mailing Address 77 N. Union St.
City Lambertville State NJ Zip 08550
Telephone [REDACTED] FAX [REDACTED]
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 2/14/19

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 the Township's current balance in its affordable housing trust fund.

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 (n seven business days, detail reasons here.

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided _____			
Custodian Signature <u>[Signature]</u>		Date <u>2/14/19</u>	



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Carl MI Last Name Torres
E-mail Address buildzoom.com
Mailing Address 301 Howard Street, Suite 1410
City San Francisco State CA Zip 94105
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 Carl Torres Date 02/13/2019

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.

Report of all building permits processed by your department from December 19, 2018 to January 31, 2019.

- Are referred to as a Permit Activity Report, a Permit Fee Log or a Monthly Permit Report.
- 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.

*emailed to
Construction
2/14/19*

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 #	<u> </u>	Total	<u> </u>
Rec'd Date	<u> </u>	Deposit	<u> </u>
Ready Date	<u> </u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>
Records Provided			
Custodian Signature <u> </u>		Date <u>2/14/19</u>	

CC: Construction



**TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM**

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Pischel MI E Last Name William
 E-mail Address [Redacted]@Gmail.Com
 Mailing Address 482 Monmouth RD
 City millstone State NJ Zip 08510
 Telephone [Redacted] 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 2/13/19

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 Survey of Property located in millstone
 Lot 23.02/23.01
 Block 46

AGENCY USE ONLY

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

AGENCY USE ONLY

Disposition Notes
 Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.
 In Progress - Open _____
 Denied - Closed _____
 Filled - Closed _____
 Partial - Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
 Custodian Signature		<u>2/13/19</u> Date	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name GRETA MI _____ Last Name TORNO
E-mail Address [REDACTED]@gmail.com
Mailing Address PO Box 306
City Clarksburg State NJ Zip 08510
Telephone [REDACTED] 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 2/13/19

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.

Certificate for tank removal
232 Paint Island Spring Road
Millstone Twp NJ 08510
Block 48 lot 102

Mailed 2/15/19 by

1986

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

Records Provided

[Signature] 2/13/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Amalia MI - Last Name Vacca
E-mail Address [REDACTED]@optonline.net
Mailing Address 867 No Stiles Street
City Linden State NJ Zip 07036
Telephone [REDACTED] FAX [REDACTED]
Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On-Site ☐ Inspect ☐ Fax ☐ E-mail XXX
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature Amalia Vacca Date February 11, 2019

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.

Hi - This is a new Listing Assignment and I would like to know if there are any open permits and what they are for. In addition, are there any violations & what are they, when was the last Certificate or Temporary Certificate of occupancy? Are there any outstanding Taxes or liens?

I know there is gas, but no sewer? it's Well Water and Septic? DS

The lot size is: 6.63 acres - can it be "Farm Assessed?" What's allowable? ✓

There is a stream nearby, is it considered a "Flood Area"? DS

5 Sawmill Pond 22

Forwarded to
AY, RB, DS, PS, LM
2/12/19
8:16AM

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 _____ Deposit _____
Ready Date _____ Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

Maria Dellasala

Custodian Signature

Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
 Millstone Township, NJ 08510
 Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
 m-dellasala@millstonenj.gov
 Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name MICHAEL MI S Last Name EGIERD
 E-mail Address [REDACTED]@Yahoo.com
 Mailing Address 797 Riverside Rd.
 City MILLSTONE State N.J. Zip 08535
 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 [Signature] Date 2-11-2019

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 the necessary list of property owners within 200 ft. per pending Sub-Div. Application Block 12 Lot 702
 Please Forward Email to
 MARY WILLIAMS Mary@superiorpasalegal services
 and ATT: Gerald Gioia giciliau@gmail.com

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.
email
 In Progress - Open
 Denied - Closed
 Filled - Closed 2/13/19
 Partial - Closed

Tracking Information		Final Cost	
Tracking #	<u> </u>	Total	<u> </u>
Rec'd Date	<u> </u>	Deposit	<u> </u>
Ready Date	<u> </u>	Balance Due	<u>\$10.-</u>
Total Pages	<u> </u>	Balance Paid	<u> </u>
Records Provided			
<u>2/11/19</u>		<u>cash</u>	
<u>[Signature]</u> Custodian Signature		<u>2/11/19</u> Date	



**TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM**

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Jason MI A. Last Name Leacock
E-mail Address [redacted]@wall-lawyers.com
Mailing Address 4814 Outlook Drive, Suite 112
City Wall State NJ Zip 07753
Telephone [redacted] FAX [redacted]
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 Jason A. Leacock Date 2/7/19

Payment Information

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

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

All correspondence, including letters/emails and enclosures/attachments, that the Township sent to or received from the New Jersey Department of Environmental Protection relating to approvals or disapprovals of the following Millstone Township Ordinances:

- (a) Ordinance No. 01-41
- (b) Ordinance No. 02-05
- (c) Ordinance No. 2017-02

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 _____ Deposit _____
Ready Date _____ Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

Custodian Signature

Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Jamie MI M Last Name Bennett

E-mail Address [redacted]@sweetbennett.com

Mailing Address 37 Court Street

City Freehold State NJ Zip 07728

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 Jamie M. Bennett Date 2-6-19

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 copies of any and all records relating to the removal of an underground storage tank from the property located at 451 Stage Coach Road a/k/a Block 51, Lot 2.

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

Records Provided

Forwarded to Construction 2/6/19

Maria Dellasala
Custodian Signature

2/6/19
Date



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dallasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Construction

48/14.21

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 L Last Name Brown Jr.
E-mail Address [redacted]@gmail.com
Mailing Address 3 Clayton Dr.
City Clarksburg State NJ Zip 08510
Telephone [redacted] FAX [redacted]
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 L. Brown Date 2-6-19

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.

Block 48 Lot 14.21
Copy of Land Survey (8 1/2 x 11)

Year Built: 1992

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 # _____ Total _____
Rec'd Date _____ Deposit _____
Ready Date _____ Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

2/6/19 sent copy of Survey
[Signature]
Custodian Signature _____ Date _____

25 H



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name CHRISTOPHER MI P Last Name ROSATI
E-mail Address [REDACTED]@com
Mailing Address 18 FWH ASSOCIATES 1856 Route 9
City TOMS RIVER State NJ Zip 08755
Telephone [REDACTED] FAX [REDACTED]
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 1-28-19

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.

FOR BLOCK 22 LOT 2.03
COPIES OF APPROVED SITE PLAN DRAWINGS (FULL SIZE)
COPIES OF ALL ARCHITECTURAL / BUILDING PERMIT PLANS
FOR THE STRUCTURE, INCLUDING ELECTRICAL, MECHANICAL, PLUMBING
STRUCTURAL.

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>[Signature]</u>		Date <u>1/28/19</u>	



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name Aubrey MI R Last Name Conway
E-mail Address [REDACTED].com
Mailing Address 85 Racitan Ave #200
City Highland Park State NJ Zip 08094
Telephone [REDACTED] FAX [REDACTED]
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 LEAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature ACC Date 1-22-19

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.

Town map indicating drug free school zones surrounding schools and parks in your town.

1/23/19 - Spoke to Aubrey - will mail \$7- for Drug Free School Map

9:45 AM 1/22
4m map will cost \$7 we do not have an email copy

1/24/19 - Called applicant to see if they want Drug Free School Zone or Public Property (including parks)

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.

2/15/19 1:41 PM
make payable to LSA \$7
will put in mail next week.

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

AGENCY USE ONLY

Tracking Information

Tracking # _____ Total _____
Rec'd Date _____ Deposit _____
Ready Date _____ Balance Due _____
Total Pages _____ Balance Paid _____

Records Provided

2/14/19 AS per Annette
Sison mld Millstone Twp
and pay to the order
of Leon S. Avakian

Maria Dellasala
Custodian Signature

1/25/19
Date

1/24/19 4m map
Aubrey

2/15/19 mls to send map

2019.12.12

ENTERED

Karleen Felt 1/22/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
 Millstone Township, NJ 08510
 Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
 m-dellasala@millstonenj.gov
 Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name JEFF MI _____ Last Name TORNO
 E-mail Address [REDACTED]@YAHOO.COM
 Mailing Address PO Box 306
 City CLANDSBURG State NJ Zip 08510
 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 [Signature] Date 1/14/19

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.

PLANNER'S REPORT
TRUP ENGINEER'S REPORT
BOARD OF ADJUSTMENT (NOREIKA Application)
1/23/19
mailed as rec'd 2/11/19 p. dandrea

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

[Signature] 1/14/19
 Custodian Signature Date

40/41



INTEREST

Requestor Information – Please Print

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.

First Name Megan MI Last Name Guido
E-mail Address [REDACTED]@Gmail.com
Mailing Address 4 Nolan Dr
City Millstone State NS Zip 08510
Telephone [REDACTED] 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 M C / [Signature] Date 1-4-19

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.

4 Nolan Drive - Copy of survey

Block 40

Lot 41

1/9/19 20¢ for 2 copies (DA) MC
1/9/19 y/w Megan - will be in tomorrow. (DA)

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 204
Balance Paid _____

Records Provided

1/9/19 2 copies 204 DA

Custodian Signature

Date _____



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Allie MI 11 Last Name Caporusso
E-mail Address [REDACTED]@yahoo.com
Mailing Address 12 Springhouse
City Manalapan State NJ Zip 07726
Telephone [REDACTED] 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 1/8/19

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.

zoning office determination
8 Mineral Springs Rd
Shed and CO
and open permits
6/2/21.06

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 _____	Deposit _____	Balance Due _____
Rec'd Date _____	Balance Paid _____	Records Provided _____	
Ready Date _____			
Total Pages <u>9</u>			
Custodian Signature <u>[Signature]</u>		Date <u>1/8/19</u>	



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



30/1.01

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 Baccus MI _____ Last Name Baccus
E-mail Address [REDACTED]@GMAIL.COM
Mailing Address 56 Brookside Rd
City Millstone State NJ Zip 08510
Telephone [REDACTED] 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 1/4/19

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.

B 30
L 1.01

3 Acres Road
ReBuccus copy of ~~Survey~~ Survey.

1/7/19 Give a copy \$54 @ TRS

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 1054
Records Provided
1/7/19 Give copy of Survey @ TRS
[Signature] 1/4/19
Custodian Signature _____ Date _____



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name JOHN MI _____ Last Name SEARD
E-mail Address [REDACTED]@yahoo.com
Mailing Address 1200 N. STILES ST.
City LINDEN State NJ Zip 07036
Telephone [REDACTED] 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 [Handwritten Signature] Date 1-02-19

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 AND CLOSED PERMITS
OIL TANK

ANY CODE VIOLATION - NONE

BLOCK 30 LOT 14.20

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	<u>6</u>	Balance Paid	<u>30 cents</u>
Records Provided		<u>1/2/19</u>	
<u>Copy of Survey</u>			
<u>Kathleen Hart</u>		<u>1/2/19</u>	
Custodian Signature		Date	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Jason MI A. Last Name Leacock
E-mail Address [REDACTED]@com
Mailing Address McLaughlin Stauffer & Shaklee PC, 4814 Outlook Drive, Suite 112
City Wall State NJ Zip 07753
Telephone [REDACTED] FAX [REDACTED]
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 Jason A. Leacock Date 2/5/19

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 copy of Millstone Ordinance Nos. 01-41 and 02-05

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

Maria Dellasala
Custodian Signature

2/5/19
Date

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	OLGA	MI	Last Name	NAZAROVA
E-mail Address	[REDACTED]@HOTMAIL.COM			
Mailing Address	101 Tyrellan Ave			
City	Staten Island	State	NY	Zip 10309
Telephone	[REDACTED]		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 / HAVE NOT</u> been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.				
Signature	[Signature]			Date 1/29/2019

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 to request delinquent tax property lists for your municipality:

- Property type 1 (vacant land)
- Bill year range 2018 – 2018
- Detailed tax account delinquent report
- In PDF or Excel format (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	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____

Records Provided

[Signature]
Custodian Signature

1/24/19
Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name DOUGLAS MI J Last Name HERBST
E-mail Address [REDACTED]@aol.com
Mailing Address 272 HOUND ST.
City MORGAN State UT Zip 84050
Telephone [REDACTED] 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 2/1/2019

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 FURNISH INFORMATION ON ANY PERMITS FOR
451 STAGECOACH RD CLARKSBURG AS WE ARE PENDING
ITS PURCHASE AS A SECOND HOME. THE PERMITS
SHOULD INCLUDE THE FILLING OR DEMOLITION OF AN
IN-GROUND POOL AS WELL AS THE CONSTRUCTION OF
A DETACHED 3-CAR GARAGE. 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 # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature

Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk

ENTERED
EPL 2/5



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 GARY MI — Last Name Hoagland, (Esq.)
E-mail Address [REDACTED]@hoaglandlong.com / jbenett@hoaglandlong.com
Mailing Address 40 Paterson Street
City New Brunswick State NJ Zip 08901
Telephone [REDACTED] FA [REDACTED]
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 1/30/2019

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/ALL Permits / Construction Permits for the property located at:
17 Alpine Drive, Millstone, New Jersey, 08535.

Please email Request Results to: ghoagland@hoaglandlong.com
jbenett@hoaglandlong.com

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>[Signature]</u>		Date <u>1/31/19</u>	



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name BRENDALY MI _____ Last Name CANTATORE

E-mail Address [REDACTED]@HOTMAIL.COM

Mailing Address 673 A STATE RT 33

City MILLSTONE State NJ Zip 08535

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 1/30/19

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.

4 ABATE DR, MILLSTONE, NJ - B45 L 5 29
pages ✓ • CURRENT REAL ESTATE STATUS - DUE & OVERDUE / DELINQUENT
MR. ✓ • ANY FORECLOSURE NOTICE & ACTIVITY for Code Violations
EMAILED
✓ • ANY LIEN NOTICE & ACTIVITY no current open liens
N/A ✓ PROPERTY SALE STATUS - need to ✓ w/ realtor
LM - 2 pages .10¢
EMAILED 1-30-19 NO FORECLOSURE
NO CODE VIOLATIONS

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	<u>.10¢</u>

Records Provided

[Signature] 1/30/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk

ENTERED
JAN 21 2010



31.02/10

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 Colin MI A Last Name FISHBEIN
E-mail Address _____
Mailing Address 24 Dumas Rd
City OLD BRIDGE State NJ Zip 08857
Telephone [REDACTED] 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 / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature [Signature] Date 1/29/2019

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.

31.02 / 10 - 17 Alpine Drive
needed survey

1/29 2 copies, but no survey (initials)

AGENCY USE ONLY

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

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.
In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	<u>1.104</u>
Records Provided			
1/29/19 2 copies (initials)			
Katherine Hart		1/29/19	
Custodian Signature		Date	



**TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM**

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



61/12.01

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 Jim MI A Last Name DeFara
E-mail Address [redacted]@blhsnj.com
Mailing Address 222 Mt Hope Rd
City Mt Hope State NJ Zip 08531
Telephone [redacted] FAX [redacted]
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 1-29-19

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.

Bl. 61 Lot 12.01
20 Brookside Rd
house plans for
1/29/19 Jim took a picture. (DA)

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
<u>1/29/19 Jim took picture for H/O (DA)</u>			
<u>[Signature]</u> Custodian Signature		<u>1/29/19</u> Date	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Paul MI _____ Last Name Kenny
E-mail Address [REDACTED]@outlook.com
Mailing Address 4 Sheffield Drive
City Marlton State NJ Zip 08053
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 [Signature] Date 1/21/19

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.

Block 44, Lots 7.05 and 7Q
227 Sweetmans Lane

All records, documents and reports related to underground storage tanks, spills, discharges, cleanups

All Records

mailed 1/28/19

1920

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

[Signature]
Custodian Signature

1/21/19
Date

ENTERED
11/21/54

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

Maximum Authorization Code 3

Extras: Special services charge
dependent upon request.

Date _____

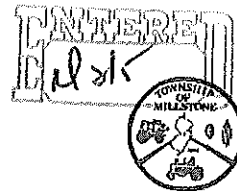
28 Brookside Road, Clarkburg, NJ

1/25/9



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Emily MI _____ Last Name Wille
E-mail Address [REDACTED]@gmail.com
Mailing Address 198 Sweetmans Ln.
City Millstone Twp State NJ Zip 08535
Telephone [REDACTED] 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 Emily Wille Date 1/25/19

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 a survey of the property located at 5 Craig Ct, Millstone Twp.

B 43

L 15.13
1999

Emailed 1/30/19 aw

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	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____

Records Provided

[Signature]
Custodian Signature

1/25/19
Date

Construction

TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Jennifer MI _____ Last Name Hader
E-mail Address [REDACTED]@att.net
Mailing Address 130 Trenton Lakewood Road
City Millstone State NJ Zip 08510
Telephone [REDACTED] FAX X
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 1/24/2019

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.

For 301 Dabrow Hill Road; ~~15~~ Block 15, Lot 2.01

- survey of property
- permits for transition from oil to gas heat/oil tank removal?
- permits for addition in 1970s?
- outstanding permits

mailed 1/28/19 ay

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 _____
Ready Date _____
Total Pages _____
Final Cost
Total _____
Deposit _____
Balance Due _____
Balance Paid _____
Records Provided

[Signature] 1/24/19
Custodian Signature Date



lu

TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Richard & Tricia MI _____ Last Name Marceante
E-mail Address [REDACTED]@gmail.com
Mailing Address 1 Quail Hill
City Clarksburg State NJ Zip 08510
Telephone [REDACTED] Cell [REDACTED] FAX [REDACTED]
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 1/23/19

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.

Planning Board -
Resolution of Quail Hill Estates
1985-1987

BLK 36, LOT 8

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

Records Provided

[Signature] 1/23/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk

ENTERED
Clerk



Important Notice

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

Requestor Information - Please Print

First Name Slane MI Last Name Weinstein
E-mail Address [Redacted]@dweichert.com
Mailing Address 431 Rte 18 South
City Fairbriar State NJ Zip 08814
Telephone [Redacted] 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 Jan 22 2019

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.

Hollo -
CAN you provide a list of any open/closed permits
pertaining to 20 Brookside (Block 61 - lot 1201)
(Thank you)
Slane Weinstein

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> </u>	Deposit	<u> </u>
Ready Date	<u> </u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>
Records Provided			
<u>[Signature]</u> Custodian Signature		<u>1/22/19</u> Date	



**TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM**

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Alfred MI H Last Name Dunham
E-mail Address [REDACTED]@Verizon.net
Mailing Address 194 Stillhouse Rd
City Millstone Twp State NJ Zip 08510
Telephone [REDACTED] 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 1-22-19

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.

Lot Survey Lot 31.11 BLK 62

15-283
99-231

Mailed 1/28/19

1990

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

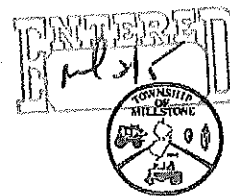
Records Provided _____

[Signature] 1/22/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
 Millstone Township, NJ 08510
 Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
 m-dellasala@millstonenj.gov
 Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Elizabeth MI R Last Name Bellonio
 E-mail Address [REDACTED]@aol.com
 Mailing Address 51 Phalanx Road
 City Colts Neck State NJ Zip 07722
 Telephone [REDACTED]
 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 Elizabeth Bellonio Date 01/21/19

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.

- RENTAL REGISTRATION RECORDS FOR THE MONTH OF 9/18, 10/18, 11/18, 12/18 & 1/19.
- RENTAL CONSTRUCTION DEPT PERMIT APPROVALS FOR THE MONTHS OF 9/18, 10/18, 11/18, 12/18 & 1/19.

413 called 1/23/19
 2:48 PM
 she rec'd email

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	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>Maria Dellasala</u>		Date <u>1/23/19</u>	



TOWNSHIP OF MILLSTONE OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



43/15.19

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 Dennis MI Y Last Name Villavicencio
E-mail Address [REDACTED]@gmail.com
Mailing Address 36 Shield Rd
City Millstone State NJ Zip 08535
Telephone [REDACTED] FAX [REDACTED]
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 1/18/19

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.

Block 43 Lot 15.19 36 Shield Rd.

Closed Poolhouse Permit Application

Can pick up if it is too many pages to scan.

1/29 not file found (DA)
1/23 SW Denial - will be in (DA)

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 _____
Ready Date _____
Total Pages _____
Final Cost
Total _____
Deposit _____
Balance Due _____
Balance Paid _____
Records Provided
1/29/19 sent email (DA)
Katherine [Signature] 1/18/19
Custodian Signature _____ Date _____



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name Barry MI R Last Name SZABLEWSKI
E-mail Address [REDACTED] Hotmail.com
Mailing Address 24 Netherwood Ave
City PRISATAWAY State NJ Zip 08854
Telephone [REDACTED] 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 1/17/19

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 the Planning Board Application showing Contact Info including Phone Number of Applicant + Owner
* Resolutions Granting Approval
* Copy of Building Permit Application
BIR 48 Lt 21 12 Whispering Spring DR
P18-04 Travers/Grau
BIR 48 Lt 22 11 Whispering Spring DR

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 #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
[Signature]		1/17/19	
Custodian Signature		Date	



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Nikki MI _____ Last Name Caine

E-mail Address [REDACTED]@bhhsnj.com

Mailing Address 222 Millstone Road

City Millstone Twp State NJ Zip 08535

Telephone [REDACTED] FAX [REDACTED]

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 Nikki Caine Date 1/14/19

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.

Lot 4 Block 9 Tax ID 33-00009-0000-00004 - 1041 Windsor Rd, Millstone Twp 08535

Please provide permit and any other information for an above ground oil tank that was removed prior to my client purchasing the home in 2015. Would you be able to provide septic information as well as septic design including any information on the underground extension drains in the backyard.

Also, can you tell me of any closed and/or open permits?

Thank You

1/14/19
2:55 PM
spoke w/
Nikki -
call BOA for
septic info

AGENCY USE ONLY

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

Deposit Date _____

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

Records Provided

Maria Dellasala
Custodian Signature

1/14/19
Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dallasala@millstonenj.gov
Maria Dallasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Megan MI Last Name Guido
E-mail Address [REDACTED]@Gmail.com
Mailing Address 4 Nolan Dr
City Millstone State NJ Zip 08510
Telephone [REDACTED] 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 M C Guido Date 1-4-19

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.

4 Nolan Drive - Copy of survey
Block 40
Lot 41

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> </u>	Deposit	<u> </u>
Ready Date	<u> </u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>
Records Provided			
Custodian Signature <u>Maria Dallasala</u>		Date <u>1/4/19</u>	



**TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM**

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information -- Please Print

First Name Melanie MI Last Name Herbert
E-mail Address [REDACTED]@cbmoves.com
Mailing Address 630 Blueberry Hill
City Freehold State NJ Zip 07728
Telephone [REDACTED] 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 Melanie Herbert Date 1/23/19

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.

Block 61 Lot 12.01
20 Brookside Rd.
Clarksburg
copy of open/closed permits

Emailed 1/23/19 ay

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> </u>	Total <u> </u>	
Rec'd Date <u> </u>	Deposit <u> </u>	
Ready Date <u> </u>	Balance Due <u> </u>	
Total Pages <u> </u>	Balance Paid <u> </u>	
Records Provided		

Katherine [Signature] 1/23/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name Francis MI Last Name Grigoli
E-mail Address X [redacted]@yahoo.com
Mailing Address 8 Mineral Springs Rd
City Millstone State NJ Zip 08510
Telephone X [redacted] 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 1/11/19

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.

B 62 L 21.06

copy of certificate for resale 2015

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 Deposit
Ready Date Balance Due
Total Pages Balance Paid
Records Provided

1/11/19 Emailed to [signature]
[signature] 1/11/19
Custodian Signature Date



TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information - Please Print

First Name Wendy MI _____ Last Name Baumann
E-mail Address [REDACTED]@dpkconsulting.net
Mailing Address 220 Old New Brunswick Rd.
City Piscataway State NJ Zip 08854
Telephone [REDACTED] 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 Wendy Baumann Date 1/9/19

Payment Information

Maximum Authorization Cost \$ 35
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.

We are surveying in Lot 103, Block 28, 162 Millstone Rd, Millstone Township, Monmouth County, NJ. Can you please send us any Roadway/Highway Plans, ROW, construction, & as-built plans beginning at the intersection of Millstone Rd/Route 12 & Baird Rd/Route 18, running 1000' south on Millstone/RT 12 & also running 500' west on Baird/RT 18 from the intersection.

Thank you,
Wendy

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
Custodian Signature <u>Maria Dellasala</u>		Date <u>1/10/19</u>	

TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM



470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice



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

Requestor Information – Please Print

First Name Jim MI Last Name DeFara
E-mail Address [REDACTED]@bhhswj.com
Mailing Address 222 M. Millstone Rd V
City M. Millstone State Zip
Telephone [REDACTED] AX [REDACTED]
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 1-3-18

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 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.

Image Estates
Block 23 Lots 14.02 – 14.24
Block 23.01 Lots 1-6
Resolution Subdivision
(1988)

attached -
emailed 1/7/19
P. D. Andre

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> </u>	Deposit	<u> </u>
Ready Date	<u> </u>	Balance Due	<u> </u>
Total Pages	<u> </u>	Balance Paid	<u> </u>
Records Provided			
<u>emailed 1/7/19</u>			
<u>Kathleen Hart</u>		<u>1/3/19</u>	
Custodian Signature		Date	



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	\$ 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.

First Name Doris MI MI Last Name Kobza

E-mail Address NJPella.com

Mailing Address **4 Dedrick Place**

City West Caldwell State NJ Zip 07006

Telephone [REDACTED] FAX [REDACTED]

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 1/03/2019

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 December 2018

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.

emailed report 1/8/19 ag

Kallenbach

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY



**TOWNSHIP OF MILLSTONE
OPEN PUBLIC RECORDS ACT REQUEST FORM**

470 Stagecoach Road
Millstone Township, NJ 08510
Telephone # 732-446-4249, x 1701 Fax # 609-208-2438
m-dellasala@millstonenj.gov
Maria Dellasala, Municipal Clerk



Important Notice

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

Requestor Information – Please Print

First Name Ravinder MI _____ Last Name Pasad
E-mail Address [redacted]@gmail.com
Mailing Address 48 Carriage way,
City Millstone Twp. State NJ Zip 08510
Telephone [redacted] 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 1/9/18

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 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.

Need the floor plan of the house 48 Carriage Way. I am the ~~one~~ new owner of the house.
Block 44.01 Lot 27 Floorplan

1/9/18 took pictures of house plans [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	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			
1/9/18 took pictures <u>[Signature]</u>			
Kathleen Hart		1/9/19	
Custodian Signature		Date	

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

From: ADRIANA ONDARZA [mailto:opra+request-3469-213ee049@requests.opramachine.com]
Sent: Sunday, January 06, 2019 5:24 PM
To: OPRA requests at Millstone Township
Subject: OPRA request - Open Construction Permits and Oil Tank

Dear Millstone Township,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested:

I would like to know if there are open construction permits or liens for these properties. Also, I would like to know information regarding the presence of an underground oil tank, if applicable, including permits, remediation reports, environmental reports, and surveys showing underground oil tank location.

1 ABATE DR CLARKSBURG NJ 8510

Yours faithfully,

ADRIANA ONDARZA

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:

opra+request-3469-213ee049@requests.opramachine.com

Is m-dellasala@millstonenj.gov the wrong address for OPRA requests to Millstone Township? If so, please contact us using this form:

<https://opramachine.com/change request/new?body=millstone township>

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

<https://opramachine.com/help/officers>

View this OPRA request & responses online:

<https://opramachine.com/request/open construction permits and oi 8>

Please note that in some cases publication of requests and responses will be delayed.

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