40pgs.

TOWNSHIP OF MANSFIELD

OPEN PUBLIC RECORDS ACT REQUEST FORM

100 Port Murray Road, Port Murray, NJ 07865
908-689-6151 phone, 908-689-2840 fax
dhrebenak@mansfieldtownship-nj.gov
Dena Hrebenak, Records Custodian

Important Notice

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

Requestor Information – Please Print

First Name Constance MI ____ Last Name Adasavage

E-mail Address Concandershouis @ aol.com

Mailing Address 208 Snyder Road

City Port Murray State NJ Zip 07865

Telephone 908-813-1893 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 2/28/13

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

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

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

Extras: Special service charge dependent upon request.

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

2009-2013

2009-2010 – Can wait, we could upload

2011 + 2013 –

2012 was not needed

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Rec 3/25/2013 DH

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Important Notice

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Requestor Information – Please Print

First Name Donna MI ____ Last Name Muluihill

E-mail Address muldihi@aol.com

Mailing Address 631 Valley Rd

City Oxford State NJ Zip 07863

Telephone 908-797-7976 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 Donna Muluihill Date 3/25/13

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

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- Need a copy of the July 25th, 2012 Town meeting minutes.
- Need ~~the~~ July 25th, 2012 "town" recording put on a disk provided with this request.

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Rec 3/25/2013 DH

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Requestor Information – Please Print

First Name Donna MI ____ Last Name Mulvihill

E-mail Address muldihi@aol.com

Mailing Address 631 Valley Rd

City Oxford State NJ Zip 07863

Telephone 908-797-7976 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 Donna Mulvihill Date 3/25/13

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

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

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

Extras: Special service charge dependent upon request.

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

Mansfield Rec meeting minutes

- Need a copy of Nov 27, 2012 (Requesting minutes)
- Need a copy of Jan 17th, 2013 (Requesting minutes)
- Need a copy of Feb 6th 2013 (Requesting minutes)
- need a copy of Feb 26th 2013 (Requesting minutes)

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Diane.D@cvi1nj.com
OPRA file

TOWNSHIP OF MANSFIELD

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dhrebenak@mansfieldtownship-nj.gov
Dena Hrebenak, Records Custodian

Important Notice

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Requestor Information – Please Print

First Name Charles MI J. Last Name Femminella, Jr.

E-mail Address cvi1@aol.com

Mailing Address 447 Route 10, Suite 8

City Randolph State NJ Zip 07869

Telephone 973-361-2700 FAX 973-361-6854

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

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

Signature _____ Date 7-18-13

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

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

Extras: Special service charge dependent upon request.

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

1. A copy of the "Request for Proposal" concerning the revaluation of the Township of Mansfield.
2. A copy of all proposals submitted to the municipality by appraisal firms for the revaluation program.
3. A copy of the correspondence from the Assessor with his recommendations concerning the awarding of a firm the contract for revaluation.
4. A copy of the Resolution awarding the contract for revaluation.
5. A copy of the contract for revaluation that has been submitted to the Director of the Division of Taxation for approval.
6. A copy of the executed contract for revaluation.
7. A copy of the minutes May 8 and 22, 2013 meeting of the Mansfield Township Committee
8. A copy of the minutes of the Township Committee meeting of June 12, 2013.
9. A copy of Ordinance No. 2013-12

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COL 4, D1

ACCURATE ABSTRACTS

ACCURATE ABSTRACTS by Dolores Dios

OPEN PUBLIC RECORDS ACT REQUEST FORM

ACCURATE ABSTRACTS by Dolores Dios

Mansfield Twp

Important Notice

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Requestor Information – Please Print

First Name Frances MI ____ Last Name Hall

tax@accurateabstracts.com

E-mail Address ____

Mailing Address 3200 Collins Ferry Road Suite C

City Morgantown State WV Zip 26505

Telephone *304-212-3851* FAX 304-241-4687

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

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

Signature Frances Hall Date 1/29/13

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 request a copy of ordinances for special benefit assessments that are presently "unconfirmed"; unconfirmed assessments as defined by N.J.S.A. 40:56. This list or ledger usually includes the ordinance number, purpose, date adopted and may include the block and lots that are affected by the pending improvement, authorized but not yet completed as of the date of our request.

These pending improvements are usually known and tracked by the building department or engineer's office. These type of improvements have included, but not limited to: curbing, street paving, street lighting, sidewalks, sewer or water lines.

You can fax back your response, including a copy of such ordinances, to our fax number listed above.

Thank you,

Frances Hall
Municipal Research Coordinator
Accurate Abstracts

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w/ fees

TOWNSHIP OF MANSFIELD

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Dena Hrebenak, Records Custodian

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Requestor Information – Please Print

First Name Gabriela MI ____ Last Name Goncalves

E-mail Address ggoncalves@bohlerens.com

Mailing Address 855 Technology Drive

City Warren State NJ Zip 07059

Telephone 908-668-8300 FAX 908-754-4401

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 Gabriela Goncalves Date 8/9/13

Payment Information

Maximum Authorization Cost $ 50.00

Select Payment Method

Cash (Check) Money Order

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

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.

Copies of the Taco Bell Site Plan

Block 1105; Lot 11.08

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w/fees

Rec 8/30/13

TOWNSHIP OF MANSFIELD

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Requestor Information – Please Print

First Name Ayla MI B Last Name Harper

E-mail Address ayla.harper@associme.com

Mailing Address 12841 Fitzwater drive

City Nokesville State VA Zip 20181

Telephone (703) 594-3100 x111 FAX (703) 594-2187

Preferred Delivery: Pick Up ____ US Mail 3 On-Site Inspect ____ Fax 2 E-mail 1

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

Signature [signature] Date 8/30/13

Payment Information

Maximum Authorization Cost $10.00

Select Payment Method

Cash (Check) Money Order

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

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

Extras: Special service charge dependent upon request.

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

Please see attached.

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Rec. 8/28/2013
Viewed 9/3/2013

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Requestor Information – Please Print

First Name THOMAS MI D Last Name NORKEVICH

E-mail Address WETLANDS2001@MSN.COM

Mailing Address 301 VISTA DRIVE

City EASTON State PA Zip 18042-7247

Telephone 215 527-7073 FAX 610-258-7882

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

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

Signature Thomas D. Norkevich Date 8/28/2013

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

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

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

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MANSFIELD TWP BLOCK 1104 12.01
#892 ROUTE 57, HACKETTSTOWN NJ -
(OWNER TAHOE PARTNERS) RETAIL BUILDING -
REQUESTING FINAL SITE PLAN APPROVAL MAP.
* TIME FRAME OF MAP LATE 1980's / EARLY 1990's ??

AGENCY USE ONLY AGENCY USE ONLY AGENCY USE ONLY