



Borough of Madison
Hartley Dodge Memorial
50 Kings Road
Madison, NJ 07940

MEMORANDUM

TO: Construction Department

FROM: Elizabeth Osborne, Borough Clerk

SUBJECT: Open Public Records Act Request

DATE: April 1, 2022

DESCRIPTION: Robert Berg - Request

Attached is a request for public records. According to N.J.S.A. 47:1A-1 et seq., the Borough is required to respond to this request within seven (7) business days.

Please forward the documents requested at your earliest convenience but no later than April 8. Failure to provide the documents within the timelines could result in a formal action being filed against the Borough Clerk and the Borough. In the end, we will still have to provide the documents.

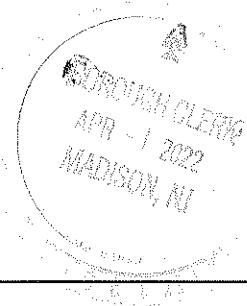
Please do not hesitate to contact me should you have any questions.

cc:



BOROUGH OF MADISON
OPEN PUBLIC RECORDS ACT REQUEST FORM

50 Kings Road
Madison, NJ 07940
Telephone Number: 973-593-3042
Fax Number: 973-593-0125
clerk@rosenet.org
Elizabeth Osborne, Borough 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	Robert	MI	E	Last Name	Berg, Esq.
E-mail Address	realestate@srsreblaw.org				
Mailing Address	210 Haven Avenue-Suite 153				
City	Scotch Plains	State	NJ	Zip	07076
Telephone	908-939-8059		FAX	908-543-1111	
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 <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	Robert C. Berg, Esq.			Date	4/1/22

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 Actual cost	
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 all permits, open and/or closed for the following property 9 Overhill Drive, Madison, NJ 07940

ADDITIONAL INFORMATION NEEDED WHEN REQUESTING POLICE DEPARTMENT INCIDENT REPORTS: (PLEASE NOTE, FOR ACCIDENT REPORTS GO DIRECTLY TO POLICE DESK, NO NEED TO FILL OUT THIS FORM).

DATE OF INCIDENT: _____ APPROXIMATE TIME: _____

DATE REPORTED TO POLICE: _____

NAME OF PERSON ON REPORT _____

WHAT TYPE OF INCIDENT, OR POLICE REPORT NUMBER _____

LOCATION OF INCIDENT: _____

AGENCY USE ONLY

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

AGENCY USE ONLY

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

AGENCY USE ONLY

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