Rev. 10/12/2020

21-158

OPRA # Code Bd of Health

Township of Old Bridge
Township Clerk's Office
1 Old Bridge Plaza
Old Bridge, NJ 08857
(732)721-5600

Request for Public Records Form
OPRA

Please submit to Old Bridge Township Clerk's Office at **OpraRequest@oldbridge.com**

Contact Name: Ashley Molson, Esq. **Company Name:** Molson Law Firm, LLC

Address of Applicant 191 Mount Horeb Road (Street) Warren (Town) NJ (State) 07059 (Zip Code)

Phone: (857) 225-1062 **Fax:** 1-617-752-3756 **E-Mail:** @.

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. (*Please Check One)*

Applicant Signature: Ashley Molson, Esq. Date: 02-25-2021

INFORMATION REQUESTED

Preferred Method of Record Reproduction (Choose One) ■ Scanned and e-mailed (E-mail) ☐ Fax (Number) ☐ Review in Office

■ Information on a Specific Property

38 Louis Street (Street Address) | Old Bridge (Town) | 08857 (Zip) | 15551 (Block(s)) | 162 (Lot(s))

Must specify which documents below (*Example: permits, surveys, site maps etc*)

☐ Copy of Minutes, Ordinance or Resolution
(*Specify Board/ Entity, date, Ordinance/ Resolution number or other identifying information)*

☐ License Information (*Specify type of license, date or other identifying information)*

☐ Other

a. Complete permit history dating back 50 years if possible (available); b. Any notices of current or pending violations with code enforcement or zoning; c. Any Board of Health Complaints; and d. Any documents pertaining to an oil tank or environmental remediation

The information requested will be ready on or before: 3 / 8 / 21 **Municipal Official:** NC

Estimated # of Pages_____ Estimated Cost_____ Deposit (*required if anticipated cost of reproduction exceeds $20.00)* _____

(Cost per page of photocopies: 8 ½" x 11" letter size paper- $0.05, 8 ½"x 14" legal size paper- $0.07, CD $0.40)

****ACKNOWLEDGMENT OF DOCUMENTS RECEIVED****

I hereby acknowledge that I have received the documents requested except for documents specifically listed below on which a determination has been made that the documents will not be provided. If any documents have not been provided, I have received information on the procedures for any appeal of the determination.

Applicant Signature **Date** **Municipal Official** **Date**

These document(s) listed below are not being provided because the document(s) are not public record as provided by law for the following reasons: _____

You have the right to appeal the decision that the above document(s) are not public records. You may take your appeal to the Government Records Council or New Jersey Superior Court as provided by N.J.S.A. 47:1A-1 et seq. If your request has been denied, a statement of the procedures will be attached to this notice.

Office Use Only

Date Forwarded to Clerk____/____/____ **By Department** _____

Date Provided ___/___/___ **Medium Provided** ☐ Scanned/ E-mail ☐ Fax ☐ Review in Office