

TOWNSHIP OF CEDAR GROVE GOVERNMENT RECORDS REQUEST FORM

IMPORTANT NOTICE

The reverse side of this form contains important information related to your rights to request government records.

PLEASE READ IT CAREFULLY

Requestor Information
See reverse Side for Important Information

Please Print	
First Name _____	MI _____ Last Name _____
Company _____	
Mailing Address _____	
City _____	State _____ Zip _____ E-Mail _____
Business Hours Tel: Area Code _____ Number _____ Ext. _____	
<p>Check One: Under penalty of N.J.S.A.2C:28-3, I certify that I HAVE <input type="checkbox"/></p> <p>HAVE NOT <input type="checkbox"/> been convicted of any indictable offense under the laws of New Jersey or any other State of the United States.</p>	
Signature _____	Date _____

Payment Information	
Maximum Authorized Cost \$ _____	
Select Payment Method	
Cash <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/>	

Fees	Letter size pages \$0.05/ea
	Legal size pages \$0.07/ea
	Other Actual
Delivery:	Delivery/postage fees additional depending upon delivery type
Extras:	Extraordinary service fees dependent upon request.

Record Request Information

To Expedite Your Request Be as Specific as Possible

OFFICE USE ONLY	OFFICE USE ONLY	OFFICE USE ONLY
<p>Est. Document Cost _____</p> <p>Est. Delivery Cost _____</p> <p>Est. Extras Cost _____</p> <p>Total Est. Cost _____</p> <p>Deposit Amount _____</p> <p>Estimated Balance _____</p> <p>Deposit Date: _____</p>	<p style="text-align: center;">Disposition Notes</p> <p>Custodian, if any part of request cannot be delivered in 7 days, detail reasons here</p> <p>In Progress – Open _____</p> <p>Denied – Closed _____</p> <p>Filled – Closed _____</p> <p>Partial – Closed _____</p>	<p style="text-align: right;">Finalized Cost</p> <p>Tracking # _____</p> <p>Rec'd Date _____</p> <p>Ready Date _____</p> <p>Total Pages _____</p> <p style="text-align: center;">Documents Provided</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;">Total _____</p> <p style="text-align: right;">Deposit _____</p> <p style="text-align: right;">Balance Due _____</p> <p style="text-align: right;">Balance Paid _____</p> <p style="text-align: right;">Custodian Signature _____</p> <p style="text-align: right;">Date _____</p>

PUBLIC ACCESS TO GOVERNMENT RECORDS

1. State Law requires that in order to request access to government records under OPRA, you must complete, sign and date this request form and deliver it in person, by mail or electronically during regular business hours to the Municipal Clerk as the Custodian of Records. Your request is not considered filed until the request form has been received by the Custodian of Records. If you submit the request form to any other officer or employee of the Township of Cedar Grove, that officer or employee does not have the authority to accept your request form on behalf of the Township of Cedar Grove and you will be directed to the Custodian of Records.
2. If you submit a request for access to government records to someone other than the appropriate custodian, do not complete the Township of Cedar Grove request form, or attempt to make a request for access by telephone, the Open Public Records Act and its deadlines, restriction and remedies will not apply to your request.
3. The fees for duplication of a government record in printed form are listed on the front of this form. We will notify you of any special charges, special service charges or other additional charges authorized by State law or regulation before processing your request. Payment shall be made by cash, check or money order payable to the Township of Cedar Grove.
4. A request with estimated fees exceeding \$5.00 must be accompanied by a 50% deposit. Anonymous requests, when permitted, require a deposit of 100% of estimated fees. You agree to pay the balance due upon delivery of the records.
5. By law, the Township of Cedar Grove must notify you that it grants or denies a request for access to government records within (7) business days after the custodian of the record requested receives the request, provided that the record is currently available and not in storage or archived. If the record requested is not currently available or is in storage or archived, the custodian will advise you within (7) business days when the record can be made available and the estimated cost. You may agree with the custodian to extend the time for granting or denying your request or making records available. Where a legal determination must be made as to whether records are "public records" as provided by law, the request will be reviewed by the Municipal Attorney.
6. The term "public records" generally includes those records determined to be public in accordance with *N.J.S.A. 47:1A-1*. The term does not include employee personnel files, police investigation records, public assistance files or other matters in which there is a right of privacy or confidentiality or inter-agency or intra-agency advisory, consultative, or deliberative material or other material which is specifically exempted by law.
7. You may be denied access to a government record if your request would substantially disrupt agency operations and the custodian is unable to reach a reasonable solution with you.
8. If the Township of Cedar Grove is unable to comply with your request for access to a government record, the custodian will indicate the reasons for denial on the request form and send you a signed and dated copy.
9. Except as otherwise provided by law or by agreement with the requestor, if the custodian of the record requested fails to respond to you within (7) business days of receiving a written, signed request form, the failure to respond will be considered a denial of your request.
10. If your request for access to a government record has been denied or unfilled within the time permitted by law, you have a right to challenge the decision by the Township of Cedar Grove to deny access. At your option, you may either institute a proceeding in the Superior Court of New Jersey or file a complaint, in writing, with the Government Records Council (GRC). You may contact the GRC by toll-free telephone at 1-866-850-0511, by mail at P.O. Box 819, Trenton NJ 08625, by e-mail at grc@dca.state.nj.us, or at their website at www.state.nj.us/grc.
11. Information provided on this form may be subject to disclosure under the Open Public Records Act.

The Applicant hereby acknowledges receipt of a copy of this form with the date on which the information is expected to be available and the estimated cost. The applicant hereby certifies that he or she has not been convicted of any indictable offense under the laws of this State, any other state or the United States and is not seeking government records containing personal information pertaining to the victim or the victim's family as provided by *N.J.S.A.47:1A-1 et seq.*

This form, when signed by the municipal official shall constitute a receipt for any deposit received.

Applicant

Municipal Official

Date: _____

Date: _____