## **TOWNSHIP OF GREEN BROOK**

Municipal Building 111 Greenbrook Road Green Brook, New Jersey 08812 (732) 968-1023

**REQUEST FOR PUBLIC RECORDS** 

For Municipal Use

	SEE INSTRU	JCTIONS ON C	OTHER SIDE	
Name: Address:				
Telephone (	Day)			
Information ()		board or entity, o	late, topic or other identifyin	g
()	<b>Copy of Ordinance or Reso</b> identifying information)	olution (specify	date, number, or other	
()	Police Accident Report Identify Accident:		Fee:	
()	Other (specify)			
()	License Information (speci			
Informa	tion on a Specific Property	Address Block	Lot	
()	Municipal Lien Search Municipal Lien Searches are will be provided within 15 d paid as provided in N.J.S.A.	ays after the req		nd
()	List of Property Owners w		Fee: \$10.00	

A request for a copy of Public Records should be submitted on this form, which has been adopted by the Municipal Clerk as the Custodian of Records. Some records will be immediately available during normal business hours. Some records will require time to compile and to make the copies requested, but will normally be available during normal business hours and within seven (7) business days. If any document or copy which has been requested is not a public record or cannot be provided within the seven (7) business days, you will be provided with a response with that information within seven (7) business days. Some records requested have specific fees or other response times established by statute. There is no fee involved in simply inspecting a document during normal business hours. This request may be filed electronically. In general:

Immediate access is ordinarily available for budgets, bills, vouchers, contracts, including collective negotiations agreements and individual employment contracts, and public employee and overtime information. Minutes of public meetings will be generally available immediately after the minutes have been approved.

Records which are not readily available or which will require a search of records will be made available as soon as possible and the applicant will be provided with an interim report within seven (7) business days indicating the time which will be required to provide the records.

Except as otherwise provided by law or regulation, the fee assessed for the duplication of a printed record shall be: \$.05 for letter sized documents or smaller; \$.07 for legal sized documents or larger; electronic records are free of charge; \$1.00 per disk for CD-ROM/DVD; for a police accident report there is an additional fee when the request is not made in person of \$5.00 for the first 3 pages and \$1.00 for each additional page, as provided by N.J.S.A. 39:4-131.

Where a request is for a copy in a format other than a photocopy, reasonable efforts will be made to provide the information in the format requested. The cost will be based on the costs of producing the format requested.

Where a legal determination must be made as to whether records are õpublic recordsö as provided by law, the request will be reviewed by the Municipal Attorney.

The term õpublic recordsö generally includes those records determined to be public in accordance with N.J.S.A. 47:1A-1. The term does not include employees personnel files, police investigation records, public assistance files or other matters in which there is a right of privacy or confidentiality or which is specifically exempted by law. 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 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.

The information requested will be ready on	
Estimated Number of Pages	
Estimated Cost	
<b>Deposit</b> (required where the anticipated cost of reproduction	exceeds \$5.00)
Applicant	Municipal Official

Date:	
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Date: \_\_\_\_\_