



Borough of Milltown
Borough Clerk's Office
39 Washington Avenue
Milltown, NJ 08850
(732)828-2100 Ext. 181
Clerk@milltownboro.com

Request for Public Records Form

OPRA # _____

Please submit to Milltown Borough Clerk's Office at Clerk@milltownboro.com or fax to (732)249-4568

Contact Name: _____ Company Name: _____

Address of Applicant _____

Street Town State Zip Code

Phone: (____) _____ Fax: (____) _____ 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: _____ Date: _____

INFORMATION REQUESTED

*Preferred Method of Record Reproduction Scanned/ E-mail Fax Review in Office

Information on a Specific Property (permits, surveys, site maps, etc)

Street Address Town State Zip Block Lot

****Document Requested** Please be specific!**

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

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

Other

The information requested will be ready on or before: ____/____/____ Municipal Official: _____

Estimated # of Pages _____ Estimated Cost _____ Deposit *(required if anticipated cost of reproduction exceeds \$20.00)* _____
(Cost per page of photocopies: 8 1/2" x 11" letter size paper- \$0.05, 8 1/2" x 14" legal size paper- \$0.07)

****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