



REQUEST FOR PUBLIC RECORD

TOWNSHIP OF HAMILTON

2090 Greenwood Avenue

Hamilton, NJ 08609

(609) 890-3622 Phone

REQUESTS VIA FAX WILL NOT BE ACCEPTED

Important Notice

The reverse side of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name _____ MI _____ Last Name _____

Company _____

Mailing Address _____

City _____ State _____ Zip _____ Email _____

Business Hours Telephone: Area Code _____ Number _____ Extension _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____

Circle One: 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.

Signature _____ Date _____

Payment Information

Max. Authorized Cost \$ _____

Select Payment Method:

Cash ___ Check ___ Money Order ___

Fee: \$0.05 per page
(letter/legal)

Delivery: Delivery / postage fees
additional depending upon
delivery type.

Extras: Extraordinary service fees
dependent upon request.

Record Request Information: Please provide the following information:

Definition of government record – any paper, written or printed book, document, drawing, map, plan, photograph, microfilm, data-processed or image-processed document, info stored or maintained electronically or by sound-recording or in a similar device. An open-ended request that fails to identify records with particularity will be deemed invalid.

Property Address: _____ Block: _____ Lot(s): _____

Specifically Describe Identifiable Record(s) Sought:

ROUTING INFO

Mayor's Office	_____
Dept. of Administration	_____
Personnel	_____
Budget & Purchase	_____
Finance	_____
Revenue Collection	_____
Assessor	_____
Legal Department	_____
Economic Devel & Tech.	_____
Dept. of C. P. & C.	_____
Land Use	_____
Engineering	_____
Planning	_____
Housing	_____
Inspections	_____
"DUE TO CLERK'S OFFICE"	_____

Police Department	_____
Dept. Health, Rec. & S.V.	_____
Health Division	_____
Recreation	_____
Senior Services	_____
Veterans Services	_____
Dept. of Public Works	_____
Walt Bronek	_____
Dept. of W.P.C	_____
Municipal Court Clerk	_____
Other _____	_____
"DUE TO CLERK'S OFFICE"	_____

REGISTRAR'S 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	

Requesting Access to Government Records Under the New Jersey Open Public Records Act (N.J.S.A. 47:1A-1 et seq.)

1. This form should only be used to submit records requests to the ***Hamilton Township Municipal Clerk's Office***.
2. In order to request access to government records under OPRA, you must complete all the required portions of the (dated) request form. You may deliver it in person during regular business hours or mail the request. Your request is not considered filed until the appropriate department/division that holds the original record has received a completed request form from the Municipal Clerk's Office. If you submit the request form to any other officer or employee of the ***Township of Hamilton***, that officer or employee does not have the authority to accept your request form on behalf of the ***Municipal Clerk*** and your request will not be considered filed until received by the ***Municipal Clerk's Office***. The seven business day response time will not commence until the proper department/division custodian reviews the request to determine if it is complete.
3. If you submit a request for access to government records to someone other than the appropriate custodian, do not complete the ***Hamilton Township*** request form, or attempt to make a request for access by telephone or fax; the Open Public Records Act and its deadlines, restrictions and remedies will not apply to your request.
4. 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 check or money order payable to the ***Township of Hamilton***.
5. If it is necessary for the records custodian to contact you concerning your request, providing identifying information, such as your name, address and telephone number or an e-mail address is required. Where contact is not necessary, anonymous requests are permitted; except that anonymous requests for personal information are not honored.
6. ***You may be charged a 50% or other deposit when a request for copies exceeds \$10.*** The ***Municipal Clerk*** (custodian) will contact you and advise you of any deposit requirements. Anonymous requests, when permitted, require a deposit of 100% of estimated fees. You agree to pay the balance due upon delivery of the records.
7. Under OPRA, a custodian must deny access to a person who has been convicted of an indictable offense in New Jersey, any other state, or the United States, and who is seeking government records containing personal information pertaining to the person's victim or the victim's family.
8. By law, the ***Municipal Clerk*** must notify you that it grants or denies a request for access to government records within seven business days after the custodian of the record requested receives the request, provided that the record is currently available and not in storage. If the record requested is not currently available or is in storage, the custodian will advise you within seven business days when the record can be made available and the estimated cost. You may agree with the custodian to extend the time for making records available, or granting or denying your request.
9. 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.
10. If the ***Township of Hamilton*** 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.
11. Except as otherwise provided by law or by agreement with the requester, if the custodian of the record requested fails to respond to you within seven business days of receiving a request form, the failure to respond will be considered a denial of your request.
12. 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 Hamilton*** 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 866-850-0511, by mail at PO Box 819, Trenton, NJ, 08625, by e-mail at grc@dca.state.nj.us, or at their web site at www.state.nj.us/grc. The Council can also answer other questions about the law.
13. Information provided on this form may be subject to disclosure under the Open Public Records Act.