

**TO: UPPER PITTSBORO TOWNSHIP**  
431 Route 77  
Elmer, NJ 08318

**Attn: Custodian of Government Records**

**REQUEST FOR GOVERNMENT RECORD**

**INSTRUCTIONS:**

Government records not exempt from public access, may be inspected, examined, and copied during regular business hours at the office of the Custodian of Government Records. Copies may be purchased upon payment of the reproduction fee prescribed. Special Services Charges will be added where the requested records are voluminous, are not in the format or medium requested, cannot be reproduced by ordinary document copying equipment, reproduction requires a substantial amount of manipulation, or where extensive use of information technology is required.

Completion of items 1, 2 & 3 is optional. If you prefer to deliver this form anonymously you must arrange to return to the office of the Custodian of Government Records to pay any fees required and to receive access to the requested documents. A deposit may be required from anonymous requestors.

Payment of the applicable Reproduction Fee and any Special Service Charges must be made prior to release or transmission of the record.

A statement of your rights to access government records of the Township and your rights to appeal a denial of access will be provided.

Where additional space is required you may attach additional sheets to this form.

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1. Name of Requestor \_\_\_\_\_

2. Address of Requestor \_\_\_\_\_

3. Telephone number of other means of contacting the requestor  
\_\_\_\_\_

4. Description of the government records to be [circle applicable words]  
examined, reproduced, transmitted:  
\_\_\_\_\_  
\_\_\_\_\_

5. If you wish the above records to be duplicated or transmitted indicate:  
a. how many copies you wish to receive \_\_\_\_\_

6. Reproduction Fees - Except as otherwise provided by law or regulation, fees will be charged pursuant to *N.J.S.A. 47:1A-1 et seq.* as follows: 8½" x 11" @ \$.05 per copy and 8½" x 14" @ \$.07 per copy. Documents unable to be copied on our copying equipment will be charged as per Ordinance No. 2002-07.

7. Check the method of receiving record(s) and provide an address/number:

\_\_\_\_\_ Records will be picked up  
\_\_\_\_\_ Mail to: \_\_\_\_\_  
\_\_\_\_\_ Fax to: \_\_\_\_\_  
\_\_\_\_\_ E-mail to: \_\_\_\_\_  
\_\_\_\_\_ Other: \_\_\_\_\_

8. If you wish the above records to be reproduced by a means other than ordinary copy equipment in ordinary business size and format, describe the special reproduction requested. [NOTE: A Special Service Charge may be imposed for this service.]

9. If the records are not electronically formatted and you wish the Township to convert the records to electronic format, describe the conversion and transmission format you are requesting. [NOTE: A Special Service Charge may be imposed for this service.]

\_\_\_\_\_  
DATE SIGNED \_\_\_\_\_  
\_\_\_\_\_  
Signature of Requestor

THE SECTION BELOW IS TO BE COMPLETED BY CUSTODIAN OF GOVERNMENT RECORDS

\_\_\_\_\_  
Date form was received \_\_\_\_\_ Method of delivery of request to Custodian

Inspection, reproduction, transmittal of the requested document is

GRANTED \_\_\_\_\_ DENIED \_\_\_\_\_  
GRANTED IN PART \_\_\_\_\_ (describe part denied) \_\_\_\_\_

REASON FOR DENIAL

\_\_\_\_\_  
The records for which access is granted will be available by \_\_\_\_\_  
The records cannot be reproduced within the time otherwise specified because

\_\_\_\_\_  
Reproduction Fee \$ \_\_\_\_\_  
Special Service Charge \$ \_\_\_\_\_  
TOTAL \$ \_\_\_\_\_  
Deposit Required \$ \_\_\_\_\_  
Balance Due \$ \_\_\_\_\_

\_\_\_\_\_  
Date Form returned to requestor

\_\_\_\_\_  
Date request fulfilled \_\_\_\_\_ Signature of Custodian