



**STATE OF NEW JERSEY  
BOROUGH OF PAULSBORO DEPARTMENT OF POLICE  
MUNICIPAL RECORDS REQUEST FORM**



**Requestor Information – Please Print and fill in all highlighted areas**

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Company (if applicable) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

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.

**X** Signature \_\_\_\_\_ Date \_\_\_\_\_

**Payment Information**

Max. Authorization Cost \$ \_\_\_\_\_

Select Payment Method

Cash \_\_\_\_\_ Money \_\_\_\_\_  
Check \_\_\_\_\_ Order \_\_\_\_\_

**Fees Pages 1-10 @ 0.75**  
11-20 @ 0.50  
21- @ 0.25

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

Extras: Extraordinary service fees depend upon request.

**Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.**

**Motor Vehicle Accident: Yes No (circle one) If NO, what type of incident?**

**Date of incident:**

**Location:**

**Any details that would be helpful:**

**AGENCY USE ONLY**

Est. Document Cost \_\_\_\_\_

Est. Delivery Cost \_\_\_\_\_

Est. Extra Cost \_\_\_\_\_

Total Est. Cost \_\_\_\_\_

Deposit Amt. \_\_\_\_\_

Estimated Bal. \_\_\_\_\_

Deposit Date \_\_\_\_\_

**AGENCY USE ONLY**

**Disposition Notes**

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open \_\_\_\_\_

Denied - Closed \_\_\_\_\_

Filled - Closed \_\_\_\_\_

Partial - Closed \_\_\_\_\_

**AGENCY USE ONLY**

Tracking Information	Final Cost
Tracking # _____	Total _____
Rec'd Date _____	Deposit _____
Ready Date _____	Balance Due _____
Total Pages _____	Balance Paid _____
<b>Records Provided</b>	
_____	_____
Custodian Signature	Date