

PENNSAUKEN SEWERAGE AUTHORITY

**OPEN PUBLIC RECORDS ACT REQUEST FORM**

1250 John Tipton Blvd., P O Box 518

Pennsauken, NJ 08110

Phone: 856-663-5542 & Fax: 856-663-5718

customerservice@psewer.com

Requestor Information – Please Print Payment Information

Maximum Authorized Cost: $\_\_\_\_\_\_\_\_\_\_ Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05/page

Legal size pages - $0.07/page

Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery/postage fees - additional

depending upon delivery type.

Extras: Special service charge dependent

upon request.

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

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Delivery: Pick Up: \_\_\_\_\_\_\_\_ US Mail: \_\_\_\_\_\_\_

On Site Inspection: \_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_

If you are requesting records containing personal information, please 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Record Request Information:** Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

FOR AGENCY USE ONLY

Tracking Information Final Cost

Tracking #\_\_\_\_\_\_\_\_\_ Total: \_\_\_\_\_\_\_\_\_\_\_

Rec’d Date \_\_\_\_\_\_\_\_ Deposit:\_\_\_\_\_\_\_\_\_

Ready Date\_\_\_\_\_\_\_\_ Bal Due:\_\_\_\_\_\_\_\_\_

Total Pages \_\_\_\_\_\_\_\_ Bal Paid:\_\_\_\_\_\_\_\_\_

Records Provided

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Custodian Signature Date

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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 \_\_\_\_\_\_\_\_\_

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Est Document Cost: $\_\_\_\_\_\_\_\_\_\_

Est Delivery Cost: $\_\_\_\_\_\_\_\_\_\_

Est Extras Cost: $\_\_\_\_\_\_\_\_\_\_

**TOTAL EST COST**: $\_\_\_\_\_\_\_\_\_\_

Deposit Amount: $\_\_\_\_\_\_\_\_\_\_

Estimated Bal: $\_\_\_\_\_\_\_\_\_\_

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