

GARWOOD POLICE DEPARTMENT

Records Request form for the Garwood Police Department

403 South Avenue, Garwood, NJ 07027

908-789-1500

908-789-2804 fax

REQUEST FOR GOVERNMENT RECORDS

(N.J.S.A. 47:1A-1, et seq.)

A request for Government Records must be submitted on this form, which has been adopted by the Municipal Clerk as the Custodian of Records. If your request is approved, it will take some time to compile the records and make the copies requested, but they will normally be available within seven business days pursuant to statute. If a document or copy, which has been requested, is not a public record pursuant to statute or if it cannot be provided within seven business days, you will be provided with a response with that information within the seven business days. Fees for copying public records are established by statute as follows, \$0.2 per page; Pursuant to *N.J.S.A. 47:1A-5c.*, this agency may impose a reasonable special service charge if the nature, format, manner of collation, or volume of a government record is such that it cannot be reproduced by ordinary document copying equipment in ordinary business size or involves an extraordinary expenditure of time and effort to accommodate your request.

The terms "public record" and "government record" in New Jersey do not include:

- Criminal investigatory records
- Victim's records
- Inter-agency or intra agency advisory, consultative, or deliberative material
- Emergency or security information or procedures for buildings or facilities
- Administrative or technical information regarding computer hardware, software and networks which, if disclosed, would jeopardize computer security
- Information regarding labor-management negotiations including statements of strategy or negotiating position
- Pension and personnel records in possession of this department

Name: _____

Address: _____

_____ Telephone: _____

Information Requested: _____

The applicant hereby acknowledges receipt of a copy of this form with the date on which the requested information is expected to be available and the estimated cost. The applicant hereby certifies that he or she has not been convicted of any indictable offense under the laws of this State, any other State or the United States and is not seeking government records containing personal information pertaining to a victim or a victim's family.

- Pre-payment of a deposit for this request is required in the amount of: _____
- Your records will be ready on _____

This completed form, when signed by a authorized representative of the Garwood Police Department, shall constitute a receipt for the deposit made by the applicant.

Applicant

Date

Garwood Police Department

Date

GARWOOD POLICE DEPARTMENT

GOVERNMENT RECORDS REQUEST RESPONSE

TO: _____

- Document(s) provided: _____ pages at total cost of: _____
- Document(s) not provided (see below)

The document or documents listed below and requested by you are not being provided because the document or documents are not public records as provided by law, as noted below:

Privileged or Protected Category

Authority

- | | |
|---|---|
| <input type="checkbox"/> Autopsy Reports | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Child abuse or sex assault victim name or address | N.J.S.A. 2A:82-46b |
| <input type="checkbox"/> Court records sealed | Executive Order 69 |
| <input type="checkbox"/> Computer security information | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Criminal investigatory records | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Credit Card Numbers | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Grand Jury testimony, information | Court Rule 3:6-7 |
| <input type="checkbox"/> Grievance information with public employer | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Domestic Violence data | N.J.S.A. 2C:25-33 |
| <input type="checkbox"/> Drivers' license numbers | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> DYFS information | N.J.S.A. 9:6-8.10 |
| <input type="checkbox"/> Electronic Surveillance Materials | N.J.S.A. 2A:156A-19 |
| <input type="checkbox"/> Emergency or security information or procedures | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Employee sexual harassment complaints | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Fingerprint cards | Executive Order 69 |
| <input type="checkbox"/> Inter-agency or intra agency advisory communications | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Juvenile records | N.J.S.A. 2A:4A-60 |
| <input type="checkbox"/> Labor Negotiation information, strategy or positions | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Medical Examiner Photographs | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Otherwise inappropriate material | Executive Order 69 |
| <input type="checkbox"/> Pension and personnel records | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Photographs | N.J.S.A. 47:1A-1.1, et seq.; Exec. Order 69 |
| <input type="checkbox"/> Pre Sentence Investigations | State v. DeGeorge, 113 NJ Super.542 (App. Div. 1971) |
| <input type="checkbox"/> Public Agency insurance communications | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Safety of persons or public | N.J.S.A. 47:1A-1.1, et seq.; Exec. Order 69 |
| <input type="checkbox"/> Security measures and surveillance techniques | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Social Security Numbers | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Unlisted Telephone Numbers | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Victim locations (Domestic Violence) | N.J.S.A. 2C:25-26c. |
| <input type="checkbox"/> Victim records | N.J.S.A. 47:1A-1.1, et seq. |
| <input type="checkbox"/> Record has been destroyed/not retained pursuant to: | Records Retention and Disposition Schedule
(NJ Dept. of State, Div. of Archives Mgmt.) |
| <input type="checkbox"/> Other | _____ |

You have a right to appeal the decision that the document or documents are not public records. You may take your appeal to the Government Records Council, P.O. Box 819, Trenton, NJ 08625, or to the New Jersey Superior Court as provided by N.J.S.A. 47:1A-6 and -7.

Date: _____

Date: _____

ACKNOWLEDGMENT

I hereby acknowledge that I have received the documents requested except for any documents specifically listed above 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 this form as to the procedures for any appeal of the determination.

Date: _____ Applicant's Signature _____