

**TOWNSHIP OF EASTAMPTON
POLICE DEPARTMENT
725 SMITHVILLE ROAD
EASTAMPTON, N.J. 08060
609-261-1717
www.eastamptonpolicenj.us**

REQUEST FOR ACCESS TO POLICE DEPARTMENT RECORDS

THIS SECTION FOR MUNICIPAL USE ONLY

SEE ADDITIONAL INSTRUCTIONS ON NEXT PAGE

Name: _____

Address: _____

Telephone[Day] _____

Information Requested:

[_____] **Police Accident Report** [identify incident]: _____

[_____] **Other** [specify]: _____

A request for a copy of Public Records should be submitted on this form which has been adopted by the Custodian of Records for requests related to Police Department Records. Some records will be immediately available during normal business hours. Some records will require time to locate and to make the copies requested, but will normally be available during normal business hours and within seven (7) business days. If any document or copy which has been requested is not a public record or cannot be provided within the seven (7) business days, you will be provided with a response with that information within the seven (7) business days. Some requests have specific fees or other response times established by statute. There is no fee involved in simply inspecting a document during normal business hours. In general:

- Except as otherwise provided by law or regulation, the fee assessed for the duplication of a printed record shall be: **first page to tenth page, \$0.75 per page; eleventh page to twentieth page, \$0.50 per page; all pages over twenty, \$0.25 per page;** for a police accident report there is an additional fee when the request is not made in person of \$5.00 for the first 3 pages and \$1.00 for each additional page, as provided by N.J.S.A. 39:4-131.

- Where a legal determination must be made as to whether records are "public records" as provided by law, the request will be reviewed by the Municipal Attorney.

The term "public records" generally includes those records determined to be public in accordance with N.J.S.A. 47:1A-1. The term does not include employee personnel files, police investigation records, or other matters in which there is a right of privacy or confidentiality or which is specifically exempted by law.

The Applicant hereby acknowledges receipt of this form with the date on which the 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 the victim or the victim's family as provided by N.J.S.A. 47:1A-1 et. seq.

This form, when signed by the municipal official, shall constitute a receipt for any deposit received.

The information requested will be ready on _____ Estimated Number of Pages _____

Estimated Cost _____ Deposit _____
[required where the anticipated cost of reproduction exceeds \$5.00]

 Applicant Municipal Officer

Date: _____ Date: _____

PUBLIC RECORDS REQUEST RESPONSE

TO: _____ **DATE:** _____

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

You have the right to appeal the decision that the document or documents are not public records. You may take your appeal to the Government Records Council or to the New Jersey Superior Court, as provided by N.J.S.A. 47:1A-1 et seq.. If your request has been denied, a statement of the procedures for the appeal will be attached.

Date: _____ Municipal Custodian of Records: _____

ACKNOWLEDGEMENT

I hereby acknowledge that I have received the documents requested except for any documents specifically listed above on which a determination as been made that the documents will not be provided. If any documents have not been provided, I have received information on the procedures to any appeal of the determination.

Date: _____ Applicant: _____