



Woodbury City Police Department
OPEN PUBLIC RECORDS ACT REQUEST FORM
 220 South Broad Street Woodbury NJ 08096
 (856) 845-0065 x113; Fax (856) 845-6258
www.woodburypd.com; Email KForsman@woodburypd.com
 Thomas R. Ryan, Chief of Police



Requester Information – Please Print CLEARLY

First Name _____ MI _____ Last Name _____
 E-mail Address _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Telephone _____ FAX _____
 Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail _____

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 _____

PROCESS
TAKES
7-10
BUSINESS
DAYS

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.

AGENCY USE ONLY	AGENCY USE ONLY	AGENCY USE ONLY																
Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	<p align="center">Disposition Notes</p> 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 _____	<table style="width:100%;"> <thead> <tr> <th style="width: 50%;">Tracking Information</th> <th style="width: 50%;">Final Cost</th> </tr> </thead> <tbody> <tr> <td>Tracking # _____</td> <td>Total _____</td> </tr> <tr> <td>Rec'd Date _____</td> <td>Deposit _____</td> </tr> <tr> <td>Ready Date _____</td> <td>Balance Due _____</td> </tr> <tr> <td>Total Pages _____</td> <td>Balance Paid _____</td> </tr> <tr> <td align="center" colspan="2">Records Provided</td> </tr> <tr> <td align="center">_____</td> <td align="center">_____</td> </tr> <tr> <td align="center">Custodian Signature</td> <td align="center">Date</td> </tr> </tbody> </table>	Tracking Information	Final Cost	Tracking # _____	Total _____	Rec'd Date _____	Deposit _____	Ready Date _____	Balance Due _____	Total Pages _____	Balance Paid _____	Records Provided		_____	_____	Custodian Signature	Date
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