



**MIDDLESEX COUNTY LAW ENFORCEMENT**  
**REQUEST FOR PUBLIC RECORDS**  
 (N.J.S.A. 47:1A-1, et. seq.)



**POLICE DEPARTMENT:** \_\_\_\_\_

A request for Public Records must be submitted on this form which has been adopted by the Chief of Police 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: Letter sized pages (8.5" x 11"), \$0.05 per page; Legal sized pages (8.5" x 14"), \$0.07 per page. Pursuant to N.J.S.A. 47:1A-5c., this office 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 office

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 governmental 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: \$ \_\_\_\_\_

This completed form, when signed by a \_\_\_\_\_ Police Department employee, shall constitute a receipt for the deposit made by the applicant.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Police Department

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date