

**REQUEST FOR COPIES OF DOCUMENT(S)**  
**BOROUGH OF MIDLAND PARK**  
280 Godwin Avenue  
Midland Park, N.J. 07432

---

1. Person/entity requesting information \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Telephone Day: ( ) \_\_\_\_\_

Evening: ( ) \_\_\_\_\_

---

2. Type of information sought:

( ) **Borough Council Minutes** (open session)

Please specify date(s) (include year): \_\_\_\_\_

( ) **Zoning Board/Planning Board Minutes**

Please specify specific item(s) \_\_\_\_\_

---

( ) **Permit information**

Specify: \_\_\_\_\_

( ) **Zoning Certificate**

Specify: \_\_\_\_\_

---

( ) **Planning/Land Use Documents**

Specify: \_\_\_\_\_

( ) **List of adjacent Owners 200'**

Lot/Block or Address: \_\_\_\_\_

---

( ) **Resolution of approval Subdivision/**

**Site Plan** - Block/Lot or Property :

\_\_\_\_\_

( ) **Prerequisite information for Building:**

Specify what information is needed (setbacks, etc.) \_\_\_\_\_

---

( ) **Zoning Map(s) or Tax Map(s)**

Specify which Map you want a copy of \_\_\_\_\_

( ) **Zoning Ordinance**

Cost is \$30.00 (If being mailed, add mailing cost) \_\_\_\_\_

---

( ) **Miscellaneous Police Reports** ( )

Specify type: \_\_\_\_\_

( ) **Motor Vehicle Accident Reports:** \_\_\_\_\_

Name/Date: \_\_\_\_\_

---

( ) **Police Dept. Discovery:** \_\_\_\_\_

Specify: \_\_\_\_\_

**Other** (Specify in detail): \_\_\_\_\_

\_\_\_\_\_

---

\*The individual seeking the information with asterisks above acknowledges that, in any case where access to items of public records regarding municipal liens or municipal improvement ordinances are provided and the individual seeking the information is not being supplied with certificates as described in N.J.S.A. 54:5-11 et. seq. Or N.J.S.A. 54:-18.5, neither the individual seeking the information nor any third party may make claim for damages against the Borough, nor shall any act of the individual seeking the information constitute or be construed as creating an estoppel as to a Borough's right to collect any outstanding balance or lien.

3. Date which Borough will endeavor to have the information ready: \_\_\_\_\_

5. Other related costs: \$ \_\_\_\_\_

6. Approx. # of pages: \_\_\_\_\_

4. Approximate cost for reproduction\*\*:\$ \_\_\_\_\_

\*\*Final cost shall be determined at time of reproduction and no document shall be released without payment of any copying and/or related costs.

Individual Seeking Public Records

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

Borough Clerk or Designee

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

**THE APPLICANT AND THE BOROUGH CLERK OR DESIGNEE HEREBY ACKNOWLEDGE  
RECEIPT OF A COPY OF THIS COMPLETED FORM.**