

**COUNTY OF GLOUCESTER  
PUBLIC RECORDS REQUEST FORM**

To request access to public records, complete this form and file with Laurie J. Burns, County Custodian of Records. Her office is located at 2 South Broad Street, 3rd Floor, Woodbury, NJ 08096, and her phone number is (856) 853-3271. The fax number is (856) 384-6894. The Custodian is generally required (subject to certain exceptions) to fill a records request within seven business days after receiving the request.

**REQUESTER INFORMATION: (PLEASE PRINT)**

First Name _____	MI _____	Last Name _____	
Mailing Address _____			
City _____	State _____	Zip _____	E-Mail _____
Business Hours Telephone _____	Area Code _____	Number _____	Extension _____
Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspection _____ Email if possible _____			
<p>Under penalty of N.J.S.A. 2C:28-3, I certify that I <b>HAVE/HAVE NOT (Circle One)</b> been convicted of any indictable offense under the laws of New Jersey, of any other state, of the United States, and I am not seeking government records containing personal information pertaining to the victim of a crime or the victim's family.</p>			
Signature _____		Date _____	

**Payment Information**

<b>Select Payment Method:</b>	Cash _____ Check _____ Money Order _____
<b>Fees:</b>	<i>Letter size pages - \$0.05 per page Legal size pages - \$0.07 per page Other materials (CD, DVD, Etc.) - actual cost of material</i>
<b>Delivery:</b>	Delivery / postage fees additional depending upon delivery type.
<b>Extras:</b>	<i>Special service charge dependent upon request.</i>

**Record Request Information:** To expedite the request, be specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium 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.

**RECORD(S) BEING REQUESTED:**

**Specific property information must include: street address (including city) and lot and block numbers.**


Date Request Received _____	Signature of County Representative Receiving Request _____
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