New Jersey Courts
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Independence · Integrity Fairness · Quality Service

New Jersey Judiciary

Request Date	Preferred Delivery			
	☐ Pick Up			
	☐ US Mail			
Request Needed By	☐ On Site Inspection			
	☐ Fax			
	☐ Email			

Records Request Form						quest Needed By	US Mail On Site Inspection			
Independence - Integrity Fairness - Quality Sensice							☐ Fax ☐ Email			
Part A: Requestor Identification										
Last Name Middle Initial First Name										
Address Daytime Telephone (Include area code ext.										
City State Zip					9	Fax/Email (option				
Part B: Records Request Processing Location										
	ocations below to process y		equest.							
	•	ate Division (•	ice		Office of the Admi	nistrative Director			
Division		ne Court Cle	rk's Office	:		Municipal Court _				
☐ Superior Court Cleri	k's Office Tax Co	ourt Clerk's C	Office			Other				
Part C: Case Ider	ntification									
Case Name Docket/Complaint/Ticket Number*										
*In Criminal and Municipal Ca Defendant Name and alia	ases, if you do not know the do as(es), if any	cket number, p	olease provi	ide Defenda		endant Birth Date	Last 4 digits of Defendant's Social Security Number			
	Indictment/Accusation/ Complaint/Municipal Number	Appeal Numb	per Se	entencing Da	ate	Name of Sentencir	ng Judge			
Part D: Records Requested by Division										
Please describe records r Attach additional pages if	equested as completely as necessary.	possible. Inc	clude any o	case numb	ers,	dates and names	of individuals involved.			
Part E: Copy Fee										
Copy Fees: Special Copy Requests - Additional fees will be charged 5¢ per page letter size Seal only Certified without Seal						attor	ou a named party or ney in this case?			
7¢ per page legal size	☐ Certified with Se			olified (inclu	ıdes	Seal)]Yes ☐ No			
For Judiciary Use Only										
Disposition ☐ Delivered ☐ Delivered	nied 🔲 Unavailable	Disposition	n Date							
	ords are unavailable, explai	l n here. Attac	h addition	al pages if	nece	essary.				

Revised: 07/12/2011, CN: 10200