| New Jersey Judiciary New Jersey Judiciary Records Request Form Part A: Requestor Identification | | | | | | | quest Date quest Needed | Ву | Preferred Delivery Pick Up US Mail On Site Inspection Fax Email |
|--|---|--|--------------|---------|---|-------------------------------|----------------------------------|---------|---|
| Last Name | | | First Nan | 10 | | | | | Middle Initial |
| Last Name | TISTNAI | T inst Nume | | | | | | | |
| Address | | | | | 1 | | Daytime Tele | phone | e (Include area code) ext. |
| City | | | Stat | e | Zip Code | 9 | Fax/Email (op | otional |) |
| | Request Proces | | | | | | | | |
| Please select one of the County Division Superior Court Cle | vision Clerk' | sion Clerk's Office rt Clerk's Office | | | Office of the Administrative Director Municipal Court Other | | | | |
| Part C: Case Identification | | | | | | | | | |
| Case Name | | | | | | ۵ | Docket/Compla | int/Tic | ket Number* |
| *In Criminal and Municipal Defendant Name and a | | w the docket nu | mber, please | provid | de Defenda | | information: endant Birth Dat | | st 4 digits of Defendant's cial Security Number |
| Indictment/Arrest Date | dictment/Arrest Date Indictment/Accusation/ Appeal Number Sentencing Complaint/Municipal Number | | | | | Date Name of Sentencing Judge | | | |
| Part D: Records | s Requested by D | Division | | | | | L | | |
| Please describe records Attach additional pages | if necessary. | tely as possibl | le. Include | any c | ase numb | ers, | dates and nan | nes of | individuals involved. |
| Part E: Copy Fe | | | | | | | | | |
| Copy Fees: 5¢ per page letter size | | Special Copy Requests - Additional fees will be cl | | | | | | | u a named party or y in this case? |
| 7¢ per page legal size | | / _ | | | | | s Seal) | ΠY | |
| | | For Ju | udiciary U | se O | only | | | | |
| Disposition | enied 🗌 Unavaila | | osition Dat | e | | | | | |
| If request is denied or re | cords are unavailable | , explain here | . Attach add | litiona | l pages if | nec | essary. | | |
| | For Tax Court Rec | ords return t | his form to | . txcl | records r | mail | hov@nicourte | s 00V | |
| For Tax Court Records return this form to: txctrecords.mailbox@njcourts.gov For all other requests return this form to: SCCO.Mailbox@njcourts.gov | | | | | | | | | |