

New Jersey Judiciary Records Request Form

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

	Records Req	cords Request Form				Request Needed By		On Site Inspection			
Independence - Integrity Fairness - Quality Service								☐ Fax ☐ Email			
Part A: Requestor Identification											
Last Name First Name							Middle Initial				
Address Daytime Telephone (Include area code) ext.											
City		State	e Zip Code		Fax/Email (optional)						
,											
Part B: Records Request Processing Location											
Please select one of the locations below to process your records request.											
County											
	Division Supreme Court Clerk's Office Municipal Court										
☐ Superior Court Clerk's Office ☐ Tax Court Clerk's Office ☐ Other											
Part C: Case Identification											
Case Name					ı	Docket/Compl	laint/Tio	cket Number*			
*In Criminal and Municipal Cases, if you do not know the docket number, please provide Defendant's information:											
Defendant Name and alias(es), if any Defendant Birth Date Last 4 digits of Defendant's Social Security Number											
Indictment/Arrest Date	dictment/Arrest Date Indictment/Accusation/ Appear		mber	Sentencing Date		Name of Sentencing Jud		Judge			
Dort D. Bookda	Doguested by Divisio	<u> </u>									
Part D: Records Requested by Division											
Please describe records requested as completely as possible. Include any case numbers, dates and names of individuals involved. Attach additional pages if necessary.											
Part E: Copy Fe	AGC										
Copy Fees:	Special Copy Reques	ts - Additio	nal fees	will be cha	raed		Are vo	u a named party or			
5¢ per page letter size			☐ Certified without Seal				attorney in this case?				
7¢ per page legal size	per page legal size				ludes	s Seal)		∕es □ No			
For Judiciary Use Only											
Disposition ☐ Delivered ☐ D	enied 🔲 Unavailable	Dispositi	on Date								
If request is denied or records are unavailable, explain here. Attach additional pages if necessary.											

For Tax Court Records return this form to: txctrecords.mailbox@njcourts.gov
For all other requests return this form to: Judiciary Electronic Documents Submission system (JEDS)

Revised: 08/2020, CN: 10200 page 1