

OFFICE OF THE CITY CLERK
920 Broad Street
Room 309
Newark, New Jersey 07102
Tel: 973.733.3844
Fax: 973.733.3725

“HEARING OF CITIZENS”

NAME (PLEASE PRINT): _____

HOME ADDRESS: _____

HOME PHONE NO.: _____

WORK PHONE NO.: _____

(Telephone numbers are requested in the event it is necessary to contact you to discuss your subject matter. They will not be published)

DISCUSSION OF ANY INFORMATION PROTECTED BY THE FEDERAL OR STATE
CONSTITUTIONAL RIGHT OF PRIVACY MAY BE RESTRICTED AT PUBLIC MEETINGS.

SPECIFIC SUBJECT MATTER: _____

MEETING DATE: _____

SIGNATURE: _____

Sign Up Sheet Deadline: 48 Hours Prior To Meeting Date No Exceptions
(Window Closes At 4:00 P.M.)

Sign Up Sheet Can Be Faxed In At The Above Referenced Fax Number
As Long As It Meets The Deadline
No Exceptions