



Richard A LaGarde  
Director of Buildings & Grounds

**COPY REQUEST FOR  
TOWN OF RAMAPO RECORDED PROGRAMS**

Name: Last \_\_\_\_\_ Today's Date: \_\_\_\_\_

First \_\_\_\_\_ Date of Event: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Phone:

Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

Copy on VHS: \_\_\_\_\_ Copy on DVD: \_\_\_\_\_ Number of Copies: \_\_\_\_\_

Blank tape or DVD Supplied: Yes \_\_\_\_\_ No \_\_\_\_\_

Date when needed by (min. 2 weeks): \_\_\_\_\_ Town Fee: \_\_\_\_\_

Signature: \_\_\_\_\_

Note: This form may be returned via fax to 845-369-8747.