

**PRIVACY WAIVER**  
**NEW VERNON FIRE DEPARTMENT**

TO: Concerned Person or Authorized Representative of Any Organization, Institution or Repository Records.

Applicants Name: \_\_\_\_\_  
(please print)

Date of Birth: \_\_\_\_\_ Social Security Number \_\_\_\_\_

I respectfully request and authorize you to furnish the Township of Harding Police Department on behalf of the New Vernon Volunteer Fire Department (Fire Dept.) any and all information concerning my work record, military record and criminal record.

Please allow a representative from the Harding Township Police Department to review my personal file and photocopy any documents upon request.

This information is to be used to assist the Township of Harding Police Department acting on behalf of the Fire Dept. in determining my qualifications and fitness as a volunteer.

I hereby release you, your organization or others from any liability or damage which may result from furnishing this information requested above.

A photocopy of this waiver shall be considered a valid original.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Town/City

\_\_\_\_\_  
State

**AFFIDAVIT**

STATE OF NEW JERSEY  
COUNTY OF MORRIS

Before me personally appeared the said \_\_\_\_\_ who says that he/she executed the above instrument of his/her own free will and accord, with full knowledge of the purpose therefore.

Sworn to and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

My commission expires \_\_\_\_\_

Notary Public

SEAL