New Jersey Department Of Community Affairs
Division of Local Government Services

# ESCROW ACCOUNT TRANSACTION NOTICE

## 1. TRANSACTION TYPE ☐ Sale ☑ Change ☐ Owner Satisfaction ☐ Refinance

## 2. PROPERTY IDENTIFICATION INFORMATION:

Municipality: LIVINGSTON TOWNSHIP County: ESSEX COUNTY
Block: 04702 Lot: 00015 Qualification: Acct. #: 290070208
Property Location: 17 MIDWAY DR, LIVINGSTON NJ 07039-4337
Owner Name: MILLER GAIL, 17 MIDWAY DR
Owner Mailing Address: LIVINGSTON, NJ 07039

## 3. ESCROW ACCOUNTING RESPONSIBILITY

| | *CURRENT* | *NEW* |
|---|---|---|
| **MORTGAGEE** | | |
| Name: | | |
| Address: | | |
| Contact: / Phone Number: | / | / |
| Bank Code #: / Loan Number: | / | / |
| **SERVICER** | | |
| Name: | LERETA, LLC | CoreLogic Corporate Headquarters |
| Address: | 901 Corporate Center Dr.<br>Pomona, CA 91768 | 3001 Hackberry Rd<br>Irving, TX 75063 |
| Contact: / Phone Number: | Brian Downey / 800-537-3821 | / (800) 426-1466 |
| Bank Code #: / Loan Number: | 597 / 2000010785 | 00660 / |
| **PROPERTY TAX PROCESSOR** | | |
| Name: | | |
| Address: | | |
| Contact: / Phone Number: | / | / |
| Bank Code #: / Loan Number: | / | / |

**NOTE** *The rules (N.J.A.C. 5:33-4.5) require that the original tax bill be forwarded to the new property tax payor.*

## 4. PROPERTY SALE OR OWNER SATISFACTION OF MORTGAGE:

Enter Date of Transaction: 06/10/2020

## 5. FORECLOSURE NOTICE REQUEST (pursuant to N.J.S.A. 5-4:5-104.48): Check the following box in the undersigned mortgagee requests notice of forclosure in the event of In Rem Tax foreclosure proceedings on the above listed property **NOTICE REQUESTED** ☐

## 6. APPROVAL, CERTIFICATION AND CONCURRENCE:

The undersigned, being duly authorized submits this Escrow Account Transaction Notice to the Tax Collector of the municipality in which the above listed property is located and attests to its accuracy. The form may be countersigned by the purchaser in satisfaction of N.J.S.A. 17:16F-17(d) prior to submission to the Tax Collector. A copy of this form or other form with the same information must be sent to the mortgagee.

| *Seller's Authorized Agent* | *Purchaser's Authorized Agent* |
|---|---|
| Signature: Sandra Rodarte | Signature: |
| Printed Name:: Sandra Rodarte | Printed Name:: |
| Company Name: LERETA, LLC | Company Name: |
| Phone Number: 800-537-3821 | Phone Number: |
| Date: 06/01/2020 | Date: |