

From: Chris Wood
Sent: Monday, August 19, 2019 9:25 AM
To: Karen Gallagher
Subject: FW: OPRA request - Names, address, phone numbers, email addresses of all condo owners of the Diplomat Beach club 225 East Wildwood Ave 08260

RECEIVED

AUG 19 2019

CITY CLERK'S OFFICE

-----Original Message-----

From: Diplomat Condo Owner [mailto:opra+request-6941-64688b0d@requests.opramachine.com]
Sent: Saturday, August 17, 2019 9:50 PM
To: Chris Wood
Subject: OPRA request - Names, address, phone numbers, email addresses of all condo owners of the Diplomat Beach club 225 East Wildwood Ave 08260

Dear Wildwood City,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested:

Names, addresses, phone numbers, email addresses of all condo owners of the Diplomat Beach club 225 East Wildwood Ave 08260

Yours faithfully, Diplomat Condo Owner

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-6941-64688b0d@requests.opramachine.com

Is cwood@wildwoodnj.org the wrong address for OPRA requests to Wildwood City? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=wildwood_city

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
<https://opramachine.com/help/officers>

View this OPRA request & responses online:
https://opramachine.com/request/names_address_phone_numbers_email

Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.

ACCT# 07853

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Date of Receipt by Clerk's Office:

AUG 05 2016

CITY CLERK'S OFFICE

Bill Mailed: 8/26/16

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application

Property Street Address:	225 E WILLOWOOD AVE UNIT 102 WILDWOOD NJ
Property Trade Name, if applicable:	DIPLOMAT
Name of Property Owner of Record:	CHARLES FLICK
Property Owner's mailing address:	9905 SEASIDE BLVD # 609 WILDWOOD CREST NJ
Property Owner's phone number:	609 217-4454
Property Owner's email:	NONE
Name of Property Manager or Agent:	DIPLOMAT BEACH CLUB
Manager/Agent's address:	225 E WILLOWOOD AVE WILDWOOD NJ
Manager/Agent's phone number:	1-866-599-6674
Manager/Agent's email:	
Emergency Contact person & phone number:	JACK MERRYFIELD 609-217-4450
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: [REDACTED] Policy #: [REDACTED]

Location of Shut Off Valves:

Electric: ELECTRIC BOX Nat. Gas: NONE

Water: BATH CEILING Propane: NONE

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

RECEIVED

APR 04 2014

Bill mailed 4/17/14

ACCOUNT # 03978

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 -- April 30, 2015

Property Street Address:	225 E WILDWOOD AVE #1520
Property Trade Name, if applicable:	DIPLOMAT CONDOMINIUMS
Name of Property Owner of Record:	MARCY GLANTZ & EDWARD DEVER
Property Owner's mailing address:	306 WESTERN DRIVE MARLBOROUGH MA 01501
Property Owner's phone number:	856-785-0137 / cell: 609-217-7536
Property Owner's email:	marcy.glantz@verizon.net
Name of Property Manager or Agent:	SHIRLEY KAUF
Manager/Agent's address:	225 E Wildwood Ave
Manager/Agent's phone number:	609-741-1442
Manager/Agent's email:	info@diplo-mat.com
Emergency Contact person's & phone number:	SHIRLEY KAUF 609-741-1442
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	Approx 55
Number of sleeping rooms, in all dwelling units to be made available to others:	1

225 E Wildwood Ave #520

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Compass Insurance Co Policy # H051129781

Location of Shut Off Valves:

Electric: Kitchen (next to bathroom) Nat Gas: N/A

Water: Kitchen (next to bathroom) Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

Bill Mailed: 3/21/19

ACCT# 08229
DO NOT WRITE ABOVE THIS LINE.

INFORMATION ABOVE THIS LINE IS TO BE PROVIDED BY CITY OFFICIALS

City of Wildwood
Rental Housing Mercantile License Application
License Term: 2019-2020

Property Street Address: 225 E. WILDWOOD AVE, UNIT 103
Property Trade Name, if applicable: THE DIPLOMAT CONDOMINIUMS
Name of Property Owner of Record: VICTOR PARRACHO
Property Owner's mailing address 2441 GREENWICH DRIVE, UNIT 115, OAKVILLE ON, CANADA L6M-0S3
Property Owner's phone number: 609-224-1500 / 289-788-3808
Property Owner's email: VICTOR00@HOTMAIL.COM
Name of Property Manager or Agent: ISLAND REALTY
Manager/Agent's address: 1701 NEW JERSEY AVE, NORTH WILDWOOD, NJ 08260
Manager/Agent's phone number: 609-522-4999
Manager/Agent's email: RENTALS@IRGROUPNJ.COM
Emergency Contact person & phone number: SHIRLY KAULF 609-729-5200
Number of dwelling units on the property: 88
Number of dwelling units to be leased or made available to others: 1
Number of sleeping rooms, in all dwelling units to be made available to others: 1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: LEXINGTON INSURANCE Policy# [REDACTED]

Location of Shut off Valves:

Electric: HALLWAY ON LEFT Nat. Gas: N/A
Water: HALLWAY ON LEFT Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenants or tenants who have year round/12 month lease(s)? NO

Date of Receipt by Clerk's Office:

Bill Mailed: 3/28/14 ACCT# 02880
DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. WILLOWDALE AVE, WILWOOD NJ 8260 #105
Property Trade Name, if applicable:	DIAMOND CROWN CLUB
Name of Property Owner of Record:	LEONARD T. SCHLESSEL
Property Owner's mailing address:	320 W. GREENWAY ST FLEETWOOD, PA 19523
Property Owner's phone number:	610 944 9527
Property Owner's email:	
Name of Property Manager or Agent:	SHIRLEY KAULF
Manager/Agent's address:	225 E WILLOWDALE AVE, WILWOOD NJ 8260
Manager/Agent's phone number:	609 728 5200
Manager/Agent's email:	
Emergency Contact person & phone number:	LEONARD SCHLESSEL 610 944 9527 OR DIANE KAULF 609 728 5200
Number of dwelling units on the property:	20
Number of dwelling units to be leased or made available to others:	20
Number of sleeping rooms, in all dwelling units to be made available to others:	2

388 58 K 388 58 K A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: ESSEX INS Policy # [REDACTED]

Location of Shut Off Valves:

Electric: IN UNIT Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

RECEIVED

Date of Receipt by Clerk's Office:

AUG 06 2014

Bill Mailed: 8/14/14

ACCT# 07408
DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

NEW

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Ave	UNIT # 107
Property Trade Name, if applicable:	Diplomat Suites	
Name of Property Owner of Record:	Joseph DePalito	
Property Owner's mailing address:	6 MADISON ST WAYNE NJ 07470	
Property Owner's phone number:	973 389-0647	
Property Owner's email:	yellab@aol.com	
Name of Property Manager or Agent:	Shirley Kaulf	
Manager/Agent's address:	225 E. Wildwood Ave	
Manager/Agent's phone number:	609-729-5200	609-741-1442
Manager/Agent's email:	SA Kaulf@yahoo.com	
Emergency Contact person's & phone number:	Shirley Kaulf. 609-729-5200	
Number of dwelling units on the property:	88	
Number of dwelling units to be leased or made available to others:	55	
Number of sleeping rooms, in all dwelling units to be made available to others:	N/A 2?	

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Anchor Ins Agency Policy # [REDACTED]

Location of Shut Off Valves:

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

RECEIVED

JUN 13 2018

Bill Mailed: 6/22/18 ACCT # 081502

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Ave. #108
Property Trade Name, if applicable:	Diplomat
Name of Property Owner of Record:	Gino Leonardis
Property Owner's mailing address:	641 P.H. St. South Plainfield N.J. 07080
Property Owner's phone number:	908-821-7732
Property Owner's email:	gleonardis2002@yahoo.com
Name of Property Manager or Agent:	Shirley Kaulf
Manager/Agent's address:	225 E. Wildwood Ave.
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	sakaulf@yahoo.com
Emergency Contact person & phone number:	Shirley Kaulf
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	☒ 1
Number of sleeping rooms, in all dwelling units to made available to others:	88 2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: QBE Policy # [REDACTED]

Location of Shut Off Valves:

Electric: behind kitchen door Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? _____ If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Rcvd Comp -

ACCT# 07096

Date of Receipt by Clerk's Office:

RECEIVED

FEB 03 2014

CITY CLERK'S OFFICE

Incomp.

DO NOT WRITE ABOVE THIS LINE.

Bill Mailed: 3/11/14

City of Wildwood

Rental Housing Mercantile License Application

License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Ave. Wildwood, N.J. 08260 units 115
Property Trade Name, if applicable:	Diplomat Beach Club
Name of Property Owner of Record:	Elaine Ross
Property Owner's mailing address:	22 Astor Ct., Astor, Pa 19014
Property Owner's phone number:	610 494 7398 home, 610 745-7677-cell
Property Owner's email:	Elaine7677@MSN.com
Name of Property Manager or Agent:	Shirley Kaulf - Diplomat Beach Club
Manager/Agent's address:	225 E. Wildwood Ave., Wildwood, N.J.
Manager/Agent's phone number:	1-800-729-5200
Manager/Agent's email:	
Emergency Contact person & phone number:	Susan Chahong 610 358 6396
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	-
Number of sleeping rooms, in all dwelling units to made available to others:	-

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Mount Vernon Ins. Co. Policy # [REDACTED]

Location of Shut Off Valves:

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? Yes If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill Mailed: 3/28/14

Date of Receipt by Clerk's Office:

ACCT# 01204

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave. Wildwood NJ 08260
Property Trade Name, if applicable:	Diplomat #117
Name of Property Owner of Record:	John Dressendorfer
Property Owner's mailing address:	12 Crabapple Cove Hampton NJ 08829
Property Owner's phone number:	408-419-1754 or 973-332-8598
Property Owner's email:	info@dancerspointnj.com
Name of Property Manager or Agent:	Shirley
Manager/Agent's address:	
Manager/Agent's phone number:	
Manager/Agent's email:	
Emergency Contact person & phone number:	John Dressendorfer 973-332-8598
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	
Number of sleeping rooms, in all dwelling units to be made available to others:	

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Lloyd's London Policy # [REDACTED]

Location of Shut Off Valves:

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Charge early fee 5-18-15 ✓

RECEIVED

Date of Receipt by Clerk's Office: APR 17 2015

Bill Mailed: 5/18/15

ACCT # 07494

CITY CLERK'S OFFICE

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. WILDWOOD AVE., 118 WILDWOOD NJ 08260
Property Trade Name, if applicable:	DIPLOMAT
Name of Property Owner of Record:	WILLIAM A. DIEHL, JR.
Property Owner's mailing address:	3 MILLRIDGE DRIVE
Property Owner's phone number:	ASTON PA 19014
Property Owner's email:	BILLDIEHL26@MSN.COM
Name of Property Manager or Agent:	DIPLOMAT SUITES
Manager/Agent's address:	225 E. WILDWOOD AVE. WILDWOOD NJ 08260
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	INFO@DIPLOMATSUITES.COM
Emergency Contact person & phone number:	BILL DIEHL 484-482-3380 AND DIPLOMAT OFFICE 609-729-5200
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	UNKNOWN
Number of sleeping rooms, in all dwelling units to be made available to others:	UNKNOWN

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: LLOYD'S of London Policy # [REDACTED]

Location of Shut Off Valves:

Electric: WALL IN KITCHEN AREA Nat. Gas: N/A

Water: RIGHT OUTSIDE OF BATHROOM Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

Bill Mailed: 8/13/19

ACCT# 08337
DO NOT WRITE ABOVE THIS LINE.

INFORMATION ABOVE THIS LINE IS TO BE PROVIDED BY CITY OFFICIALS

City of Wildwood
Rental Housing Mercantile License Application
License Term: 2019-2020

Property Street Address: 225 E. WILDWOOD AVE, UNIT 120
Property Trade Name, if applicable: DIPLOMAT
Name of Property Owner of Record: TRAVIS LUFT
Property Owner's mailing address 376 MANOR AVE, PLYMOUTH MEETING, PA 19462
Property Owner's phone number: 814-876-7011
Property Owner's email: TRAV3242@HOTMAIL.COM
Name of Property Manager or Agent: SHIRLEY KAUF
Manager/Agent's address: 225 E. WILDWOOD AVE, WILDWOOD, NJ 08260
Manager/Agent's phone number: 609-729-5200
Manager/Agent's email: INFO@DIPLOMATSUITES.COM
Emergency Contact person & phone number: TRAVIS LUFT 814-876-7011
Number of dwelling units on the property: 1
Number of dwelling units to be leased or made available to others: 1
Number of sleeping rooms, in all dwelling units to made available to others: 2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: LLOYDS Policy# [REDACTED]

Location of Shut off Valves:

Electric: WALL OUTSIDE BATHROOM Nat. Gas: N/A
Water: UNDER SINK Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenants or tenants who have year round/12 month lease(s)? NO

RECEIVED

Date of Receipt by Clerk's Office:

FEB 27 2017

CITY CLERK'S OFFICE

Bill Mailed: 3/15/17

ACCT# 07883

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application

Property Street Address:	225 E. WILDWOOD AVE. UNIT #122 WILDWOOD NJ 08260
Property Trade Name, if applicable:	DIPLOMAT CONDO RESORT
Name of Property Owner of Record:	KATHLEEN NITKA / JACQUELINE SCHERNECKE
Property Owner's mailing address:	324 ALBERTS WAY LANG
Property Owner's phone number:	267- 939- 1146
Property Owner's email:	KATWALK 420 @ MSN. COM
Name of Property Manager or Agent:	SHIRLEY KAULF
Manager/Agent's address:	225 E. WILDWOOD AVE. WILDWOOD N.J. 08260
Manager/Agent's phone number:	609- 729- 5200
Manager/Agent's email:	SA KAULF @ YAHOO. COM
Emergency Contact person & phone number:	STEVEN NITKA SR. 215. 676- 1145
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to made available to others:	2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: LLLOYD'S Policy #: [REDACTED]

Location of Shut Off Valves:

Electric: HALLWAY Nat. Gas: —

Water: BATHROOM / KITCHENETTE Propane: —

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? no If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

Bill Mailed: 5/1/19

ACCT#08258

DO NOT WRITE ABOVE THIS LINE.

INFORMATION ABOVE THIS LINE IS TO BE PROVIDED BY CITY OFFICIALS

City of Wildwood
Rental Housing Mercantile License Application
License Term: 2019-2020

Property Street Address: 225 E. WILDWOOD AVE, WILDWOOD, NJ 08260, UNIT #123
Property Trade Name, if applicable: DIPLOMAT SUITES
Name of Property Owner of Record: MOHAMED IBRAHIM
Property Owner's mailing address 45 ANJALI LOOP, STATEN ISLAND, NY 10314
Property Owner's phone number: 917-770-8213
Property Owner's email: MOIBRAHIM7771@YAHOO.COM
Name of Property Manager or Agent: SHIRLEY KAULF - DIPLOMAT BEACH CLUB
Manager/Agent's address: 225 EAST WILDWOOD AVE, NJ 08260
Manager/Agent's phone number: 609-729-5200
Manager/Agent's email: SAKAULF@YAHOO.COM
Emergency Contact person & phone number: MOHAMED IBRAHIM, 917-770-8213
Number of dwelling units on the property: 88
Number of dwelling units to be leased or made available to others: 1
Number of sleeping rooms, in all dwelling units to made available to others: 1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: COASTLINE INSURANCE AGENCY Policy# [REDACTED]

Location of Shut off Valves:

Electric: CIRCUIT BREAKER Nat. Gas: N/A
Water: IN CLOSET-SHUT OFF VALVE Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenants or tenants who have year round/12 month lease(s)? NO

Date of Receipt by Clerk's Office:

Bill Mailed: 3/28/14 ACCT# 03629
DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E WILWOOD AVE, WILWOOD N.J. 8260 # 202
Property Trade Name, if applicable:	DIPLOMAT COORD CLUB
Name of Property Owner of Record:	LEONARD + WILSON SCHLIGER
Property Owner's mailing address:	300 W. GREENWAY ST FLEETWOOD PA 19522
Property Owner's phone number:	610 944 9527
Property Owner's email:	
Name of Property Manager or Agent:	SHIRLEY KAUF
Manager/Agent's address:	225 E WILWOOD AVE, WILWOOD N.J. 8260
Manager/Agent's phone number:	609 729 5200
Manager/Agent's email:	
Emergency Contact person & phone number:	LEONARD SCHLIGER 610 944 9527 or DIPLOMAT CLUB 609 729 5200
Number of dwelling units on the property:	80
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	1

800 5 FT A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: CROSSLAND MORTG Policy # [REDACTED]

Location of Shut Off Valves:

Electric: 100 AMP Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

MAR 31 2014 < Rec'd Compl. CAH

Date of Receipt by Clerk's Office:

CITY CLERK'S OFFICE ON 3/24

DO NOT WRITE ABOVE THIS LINE. Incomp.

Bill marked 6/5/14

Account # 07083

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 East Wildwood Ave. - Unit 206
Property Trade Name, if applicable:	Diplomat Condo
Name of Property Owner of Record:	Melvin Grimm Joyce Grimm
Property Owner's mailing address:	348 Manose Drive Pittsburgh PA 15235
Property Owner's phone number:	412-241-6583
Property Owner's email:	joyce9@gmail.com
Name of Property Manager/Agent:	Shirley Kault - Diplomat Condominium
Manager/Agent's address:	
Manager/Agent's phone number:	609-741-1442 609-729-5200
Manager/Agent's email:	
Emergency Contact person & phone number:	Shirley Kault 609-741-1442 609-729-5200
Number of dwelling units on the property:	
Number of dwelling units to be leased or made available to others:	One - 206
Number of sleeping rooms, in all dwelling units to made available to others:	

335 E Wildwood Ave #306

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Agent-Coastal Agents Alliance Policy # [Redacted]

Location of Shut Off Valves: Broker Billinger

Electric: [Redacted] Nat Gas: [Redacted]

Water: [Redacted] Propane: [Redacted]

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

RECEIVED

Date of Receipt by Clerk's Office:

JUG 20 2015

Bill Mailed: 9/11/15

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

NEW

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	UNIT #208 225 E WILDWOOD AVE WILDWOOD NT 08260
Property Trade Name, if applicable:	
Name of Property Owner of Record:	TERRANCE + MICHELE BOLTON
Property Owner's mailing address:	4944 THIRD AVE BENSALEM PA 19020
Property Owner's phone number:	215-757-4801
Property Owner's email:	ARTYUP @ AOL.COM
Name of Property Manager or Agent:	SHIRLEY KAULF
Manager/Agent's address:	225 E. WILDWOOD AVE WILDWOOD NJ 08260
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	
Emergency Contact person & phone number:	HOWARD SMITH 215-752-1484
Number of dwelling units on the property:	83
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to made available to others:	1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: _____ Policy # _____

Location of Shut Off Valves:

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? _____. If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill Mailed: 3/28/14

Date of Receipt by Clerk's Office:

ACCT# 03004

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave, Unit #215
Property Trade Name, if applicable:	Diplomat
Name of Property Owner of Record:	William + Margot Simons
Property Owner's mailing address:	306 Jays Ave, Williams town NJ 08049
Property Owner's phone number:	609-567-0872
Property Owner's email:	N/A
Name of Property Manager or Agent:	Shirley Kauff
Manager/Agent's address:	225 E. Wildwood Ave, Wildwood, NJ 08260
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	SAKauff@yahoo.com
Emergency Contact person & phone number:	Shirley Kauff - 609-741-1442
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	Not sure Mgr would know this
Number of sleeping rooms, in all dwelling units to made available to others:	Not sure Mgr would know this

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Keen + Meyer Inc

Policy #

Location of Shut Off Valves:

Electric: 1st Floor Outside Elevator Nat. Gas: 1st Floor Outside Elevator
Water: 1st Floor Outside Elevator Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill mailed 3/7/14

Date of Receipt by Clerk's Office:

Account # 01005

RECEIVED

FEB 29 2014

CITY OF WILDWOOD OFFICE

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	UNIT # 217 225 E. WILDWOOD AVE, WILDWOOD
Property Trade Name, if applicable:	DIPLOMAT
Name of Property Owner of Record:	MICHAEL WANNEN
Property Owner's mailing address:	7340 RISING SUN AVE PHILA. PA 19111
Property Owner's phone number:	215-342-1270
Property Owner's email:	mikewannen@roicent.com
Name of Property Manager or Agent:	SHIRLEY A KAUFF
Manager/Agent's address:	225 E. WILDWOOD AVE. WILDWOOD
Manager/Agent's phone number:	1-609-729-5200
Manager/Agent's email:	SAKAUFF@AOL.COM
Emergency Contact person & phone number:	SHIRLEY A. KAUFF 1-609-729-5200
Number of dwelling units on the property:	1 OF 88
Number of dwelling units to be leased or made available to others:	VARIES - NOT KNOWN TO ME
Number of sleeping rooms, in all dwelling units to made available to others:	88 1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: CUMBERLAND INSURANCE Policy # [REDACTED]

Location of Shut Off Valves:

Electric: INSIDE UNIT Nat. Gas: N/A

Water: 1ST FLOOR CLOSET - BLDG. MAIN Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

935 E Wildwood Ave
Condo # 217

Date of Receipt by Clerk's Office:

Called
4-7-14

~~FILED~~

Bill mailed 5/2/14

DO NOT WRITE ABOVE THIS LINE.

Account #02907

City of Wildwood

Rental Housing Mercantile License Application

License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E Wildwood Ave Unit 219
Property Trade Name, if applicable:	Diplomat Beach Club
Name of Property Owner of Record:	Jill Frable
Property Owner's mailing address:	538 Christian St. Phila. Pa 19147
Property Owner's phone number:	215-468-1538
Property Owner's email:	JFSEWEL@hotmail.com
Name of Property Manager or Agent:	Shirley Kault
Manager/Agent's address:	225 E Wildwood Avenue
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	
Emergency Contact person & phone number:	David Easter 267-891-0338
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	88
Number of sleeping rooms, in all dwelling units to be made available to others:	88

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Scottsdale Insurance Co. Policy # [REDACTED]

Location of Shut Off Valves:

Center. Closet (walkway)

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

225 E. Wildwood Ave #219

Date of Receipt by Clerk's Office: **RECEIVED**

Bill Mailed: 4/28/14

ACCT# 072-77/Done 4/25/14
DO NOT WRITE ABOVE THIS LINE.

APR 11 2014

CITY CLERK'S OFFICE

NEW OWNER?

YES

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 East Wildwood Ave #220 Wildwood, NJ 08260
Property Trade Name, if applicable:	Diplomat Condo Association
Name of Property Owner of Record:	VICTOR + OKSANA IDELSON
Property Owner's mailing address:	22-76 FOREST Glen Drive, WALKINGTON, PA 15766
Property Owner's phone number:	215-491-9346
Property Owner's email:	idel1234@verizon.net and idel1234@outlook.com
Name of Property Manager or Agent:	SHIRLEY KAULF
Manager/Agent's address:	225 East Wildwood Ave, Wildwood, NJ, 08260
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	Sakaulf@yahoo.com
Emergency Contact person & phone number:	shirley Kaulf 609-729-5200
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	Approx. 55
Number of sleeping rooms, in all dwelling units to be made available to others:	1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Anchor Insurance Agency Policy # [REDACTED]

Location of Shut Off Valves:

Electric: Kitchen Nat. Gas: N/A
Water: Kitchen Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

RECEIVED

APR 20 2016

Bill Mailed: 5/11/16

DO NOT WRITE ABOVE THIS LINE.

ACCT # 07718

CITY CLERK'S OFFICE

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E Wildwood 222
Property Trade Name, if applicable:	DIPLOMAT
Name of Property Owner of Record:	Miguel S. Ana (420116)
Property Owner's mailing address:	89 East 18th St Paterson NJ 07524
Property Owner's phone number:	(973) 880-8849 or (973) 934-8011
Property Owner's email:	FCG2011@icloud.com
Name of Property Manager or Agent:	Shirley
Manager/Agent's address:	
Manager/Agent's phone number:	
Manager/Agent's email:	
Emergency Contact person & phone number:	Francisco (420116) 802-200-8956
Number of dwelling units on the property:	N/A
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: _____ Policy # _____

Location of Shut Off Valves:

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

RECEIVED

MAY 13 2015

Date of Receipt by Clerk's Office:

CITY CLERK'S OFFICE
New

Bill mailed 6/3/15

Account # 07532
DO NOT WRITE ABOVE THIS LINE.City of WildwoodRental Housing Mercantile License ApplicationLicense Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Ave Unit 223
Property Trade Name, if applicable:	
Name of Property Owner of Record:	David DiGiovanni / Theresa Brown
Property Owner's mailing address:	417A Gaskill St Philadelphia PA 19147
Property Owner's phone number:	215 380 0169
Property Owner's email:	DAVID.DIGIOVANNI@gmail.com
Name of Property Manager or Agent:	Shirley Kaulf
Manager/Agent's address:	The Diplomat 225 E Wildwood Ave Wildwood, NJ 08260
Manager/Agent's phone number:	609 741 1442
Manager/Agent's email:	SAKAULF@yahoo.com
Emergency Contact person & phone number:	David DiGiovanni 215 380 0169 Theresa Brown 215 808 2653
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to made available to others:	1

225 E. Wildwood Ave # 223

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Lloyds of London Policy # [REDACTED]

Location of Shut Off Valves:

Electric: Breaker box Nat. Gas: N/A
 Water: not in unit Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

RECEIVED

MAR 21 2014

CITY CLERK'S OFFICE

Bill Mailed: 4/1/14

DO NOT WRITE ABOVE THIS LINE

ACCT# 02944

RM 304

City of Wildwood

Rental Housing Mercantile License Application

License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 EAST WILLOWOOD AVE
Property Trade Name, if applicable:	DEPLC MAT CONDOMINIUM
Name of Property Owner of Record:	JOEL & JANNETTE DANIELS
Property Owner's mailing address:	746 CEDAR ST, FAIR LAKE, NJ 07410
Property Owner's phone number:	201-794-0109 OR CELL# 201-923-9503
Property Owner's email:	JDANIELS0258@HOTMAIL.COM
Name of Property Manager or Agent:	DEPLC MAT CONDO
Manager/Agent's address:	SAME
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	
Emergency Contact person & phone number:	
Number of dwelling units on the property:	2 UNIT RMS 304 & 402
Number of dwelling units to be leased or made available to others:	88 IN BUILDING
Number of sleeping rooms, in all dwelling units to be made available to others:	1 ROOM 2 BED

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: LEEL & HYER Policy # _____

Location of Shut Off Valves:

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

RECEIVED

MAR 30 2015

Bill Mailed: 4/15/15

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

NEW

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E WILDWOOD AV. WILDWOOD NJ
Property Trade Name, if applicable:	Diplomat Beach Club UNIT 305
Name of Property Owner of Record:	Albert & Theresa Partyka
Property Owner's mailing address:	221 GLENWOOD Rd, Pine Island, NY 10969
Property Owner's phone number:	845 258 3714
Property Owner's email:	ALNTERRY@WARWICK.NET
Name of Property Manager or Agent:	SHIRLEY KAULF
Manager/Agent's address:	Diplomat Motel 225 E Wildwood Av. Wildwood NJ
Manager/Agent's phone number:	
Manager/Agent's email:	SAKAULF@yahoo.com
Emergency Contact person & phone number:	Shirley Kaulf. 609.741.1442
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	? variable
Number of sleeping rooms, in all dwelling units to made available to others:	?

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: E + Kinman Agency Policy # ~~XXXXXXXXXX~~

Location of Shut Off Valves:

Electric: behind Kitchen door Nat. Gas: N/A

Water: In Kitchen Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

RECEIVED

Date of Receipt by Clerk's Office:

MAY 01 2014

Bill Mailed: 5/23/14

ACCT# 02947

Incomp.

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of WildwoodRental Housing Mercantile License ApplicationLicense Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. WILLOWOOD AVE. APT 307
Property Trade Name, if applicable:	Diplomat Condo 307
Name of Property Owner of Record:	Arturo Bossio
Property Owner's mailing address:	9 FORSON CT, MARKHAM, ONT CANADA L6C 1A9
Property Owner's phone number:	416-834-5845
Property Owner's email:	artbossio@hotmail.com
Name of Property Manager or Agent:	
Manager/Agent's address:	
Manager/Agent's phone number:	
Manager/Agent's email:	
Emergency Contact person & phone number:	LINA ZHAO 416-731-2339
Number of dwelling units on the property:	
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	2

Type B
A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Cumberland Mutual Fire Policy # [REDACTED]Location of Shut Off Valves: New Jersey Insurance Underwriting DUF 0311107

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

Bill Mailed: 5/29/19

ACCT#08280

DO NOT WRITE ABOVE THIS LINE.

INFORMATION ABOVE THIS LINE IS TO BE PROVIDED BY CITY OFFICIALS

City of Wildwood
Rental Housing Mercantile License Application
License Term: 2019-2020

Property Street Address: 225 E. WILDWOOD AVE, UNIT 308
Property Trade Name, if applicable: DIPLOMAT BEACH CLUB
Name of Property Owner of Record: DEBRA HASKELL
Property Owner's mailing address 3 RONALD DRIVE, APT. 132, COLONIA, NJ 07067
Property Owner's phone number: 732-397-0042
Property Owner's email: DHASKELL@GOLDBERG-REALTY.COM
Name of Property Manager or Agent: DIPLOMAT BEACH CLUB - SHIRLEY HAULF
Manager/Agent's address: 225 E. WILDWOOD AVE, WILDWOOD, NJ 08260
Manager/Agent's phone number: 609-729-5200
Manager/Agent's email:
Emergency Contact person & phone number: DEBBIE HASKELL, 732-397-0042
Number of dwelling units on the property: 80
Number of dwelling units to be leased or made available to others: 1
Number of sleeping rooms, in all dwelling units to made available to others: 1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: COASTLINE Policy# 

Location of Shut off Valves:

Electric: IN KITCHEN Nat. Gas: N/A

Water: Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

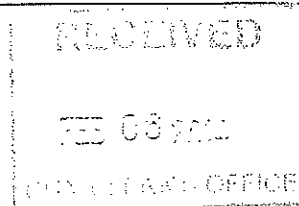
January February March April May June July August September October November December

Is the property fully occupied by a tenants or tenants who have year round/12 month lease(s)? NO

Bill Mailed: 2/28/14

Date of Receipt by Clerk's Office:

ACCT# 06418



DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave., Wildwood, NJ 08260	UNIT 314
Property Trade Name, if applicable:	Diplomat Condominium Association	
Name of Property Owner of Record:	Payne NJ Properties, LLC	
Property Owner's mailing address:	18 McCormick Place, Staten Island, NY 10305	
Property Owner's phone number:	718 447-7315	
Property Owner's email:	Jim1399@Verizon.net	
Name of Property Manager or Agent:	Shirley Kaulf	
Manager/Agent's address:	225 E. Wildwood Ave., Wildwood, NJ 08260	
Manager/Agent's phone number:	609 729-5200	
Manager/Agent's email:	Info@DiplomatSuites.com	
Emergency Contact person & phone number:	Shirley Kaulf 609 741-1442	
Number of dwelling units on the property:	1	
Number of dwelling units to be leased or made available to others:	1 UNIT 314	
Number of sleeping rooms, in all dwelling units to be made available to others:	3	

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Mesa Underwriters Insurance Policy # [REDACTED]

Location of Shut Off Valves:

Electric: In unit by door Nat. Gas: None

Water: Main Valve, Electrical Rm, 1st flr Propane: None

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

ACCT# 02916

Date of Receipt by Clerk's Office: RECEIVED

JUN 28 2014

Bill Mailed: 9/18/14

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood AVE, #318
Property Trade Name, if applicable:	The Diplomat Beach Club
Name of Property Owner of Record:	Vincent + Frances Cuccia
Property Owner's mailing address:	24-Helene Ct Staten Island NY 10309
Property Owner's phone number:	718-948-7655
Property Owner's email:	Vinsgirl18@aol.com
Name of Property Manager or Agent:	Shirley Kaulf
Manager/Agent's address:	225 E. Wildwood AVE
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	
Emergency Contact person & phone number:	Vinny cel 917-9926944
Number of dwelling units on the property:	318
Number of dwelling units to be leased or made available to others:	
Number of sleeping rooms, in all dwelling units to made available to others:	6

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Voyager

Insurance Company: Indemnity Insurance Company Policy # [REDACTED]

Location of Shut Off Valves:

Electric: ~~Outside~~ Kitchen + in Room Nat. Gas: _____

Water: in Room Kitchen Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November DecemberIs the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

ACCT# ~~02917~~

RECEIVED

Date of Receipt by Clerk's Office:

02917

AUG 12 2014

CITY CLERK'S OFFICE

Bill Mailed: 9/18/14

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. WILDWOOD AVE UNIT #319 WILDWOOD NJ 08260
Property Trade Name, if applicable:	DIPLOMAT SUITE HOTEL MOTEL
Name of Property Owner of Record:	RODRIGO AD TUEHE HERNANDEZ
Property Owner's mailing address:	948 GARDENBROOK CT. SE PALM BAY FL. 32909
Property Owner's phone number:	321-3279722
Property Owner's email:	RHERNANDEZ 1407 @ YAHOO.COM
Name of Property Manager or Agent:	SHIRLEY KAULF
Manager/Agent's address:	225 E. WILDWOOD AV. WILDWOOD NJ. 08260
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	SAKAULF @ YAHOO.COM
Emergency Contact person & phone number:	SHIRLEY KAULF 609-729-5200
Number of dwelling units on the property:	88 units
Number of dwelling units to be leased or made available to others:	55 units (1)
Number of sleeping rooms, in all dwelling units to be made available to others:	63 (1)

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: American Modern Ins Policy # [REDACTED]

Location of Shut Off Valves:

Electric: Kitchen Wall behind stove Nat. Gas: NONE

Water: Kitchen Wall behind Stove Propane: NONE

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NONE If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

Bill mailed 3/28/14

Account 103918

~~Incamp~~

DO NOT WRITE ABOVE THIS LINE.

DB 3/24

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 WILDWOOD AVE WILDWOOD NJ 08260
Property Trade Name, if applicable:	DIPLOMAT
Name of Property Owner of Record:	JESSE A. WADSWORTH
Property Owner's mailing address:	104 N WARREN ST WOODBURY NJ 08096
Property Owner's phone number:	856 845 0180
Property Owner's email:	JAWADSWORTH@YAHOO.COM
Name of Property Manager or Agent:	
Manager/Agent's address:	225 WILDWOOD AVE WILDWOOD NJ 08260
Manager/Agent's phone number:	609 724 5200
Manager/Agent's email:	
Emergency Contact person & phone number:	856 845 0180
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: _____ Policy # _____

Location of Shut Off Valves:

Electric: ☒ _____ Nat. Gas: _____

Water: ☒ _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? _____ If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

225 E. Wildwood Ave #330

MAY 05 2014

Bill Hailed: 5/22/14

ACCT# 06465
DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Avenue (Unit 321)
Property Trade Name, if applicable:	Diplomat
Name of Property Owner of Record:	Margaret Ann Colacino
Property Owner's mailing address:	918 Edgegrove Avenue, S.I. NY 10309
Property Owner's phone number:	(718) 614-9148
Property Owner's email:	Macw13@aol.com
Name of Property Manager or Agent:	Shirley Kaulf
Manager/Agent's address:	225 E. Wildwood Avenue 08260
Manager/Agent's phone number:	Diplomat: (1)(609) 729-5200
Manager/Agent's email:	
Emergency Contact person's & phone number:	Shirley Kaulf: (1)(609) 729-5200
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	Contact manager for info
Number of sleeping rooms, in all dwelling units to made available to others:	11

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Coastal Agents Alliance, Policy # [REDACTED]

Location of Shut Off Valves: LLC, state of New Jersey

Electric: Main Building

Nat. Gas: ☒Water: ☒Propane: ☒

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November DecemberIs the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office: **RECEIVED**

Bill Mailed: 3/28/14

MAR 14 2014

ACCT # 03180
DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E Wildwood Ave Unit 323
Property Trade Name, if applicable:	Diplomat Condo
Name of Property Owner of Record:	Matthew + Marie Newell
Property Owner's mailing address:	4119 Pilgrim Rd Ply Mtg PA 19462
Property Owner's phone number:	610-397-1569
Property Owner's email:	mattmarie@aoutlook.com
Name of Property Manager or Agent:	Diplomat Condo Ass:
Manager/Agent's address:	225 East Wildwood Ave
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	
Emergency Contact person & phone number:	Matt Newell 610-761-3370
Number of dwelling units on the property:	
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to made available to others:	A Unit attached

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Cabrillo Coastal Ins Policy # [REDACTED]

Location of Shut Off Valves:

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

RECEIVED

Date of Receipt by Clerk's Office:

APR 04 2014

Bill mailed 4/17/14

ACCOUNT #05603

CITY CLERK'S OFFICE

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. WILLOWOOD AVE #401
Property Trade Name, if applicable:	DIPLOMAT CONDOMINIUMS
Name of Property Owner of Record:	MARCY GLANTZ & ED DEVER
Property Owner's mailing address:	306 WESTERLY DRIVE MARLBOROUGH MA 01853
Property Owner's phone number:	856-985-0137 / cell: 609-217-7536
Property Owner's email:	marcylglantzdever@aol.com
Name of Property Manager or Agent:	SHIRLEY KAUF
Manager/Agent's address:	225 E. WILLOWOOD AVE
Manager/Agent's phone number:	609-741-1442
Manager/Agent's email:	info@diplomatcondos.com
Emergency Contact person & phone number:	Shirley Kauf 609-741-1442
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	58 1
Number of sleeping rooms, in all dwelling units to be made available to others:	1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: COASTLINE INSURANCE Policy # [REDACTED]
 Location of Shut Off Valves: (SOUTHWEST INS CO)
 Electric: Wall next to kitchen Nat. Gas: N/A
 Water: closet Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

225 E Willowood Ave #401

Date of Receipt by Clerk's Office:

RECEIVED

Room 402
MAR 21 2014

Bill Mailed: 4/1/14

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of WildwoodRental Housing Mercantile License ApplicationLicense Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 EAST WILLOWOOD AVE
Property Trade Name, if applicable:	DIPLOMAT CONDOMINIUM
Name of Property Owner of Record:	JOEL & JANNETTE DANIELS
Property Owner's mailing address:	746 CEDAR ST, FAIRLAWN, NJ 07410
Property Owner's phone number:	201-7940108 OR CELL# 201-923-9523
Property Owner's email:	JDANIELS0258@HOTMAIL.COM
Name of Property Manager or Agent:	DIPLOMAT CONDO
Manager/Agent's address:	SAME
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	
Emergency Contact person & phone number:	
Number of dwelling units on the property:	2 UNIT RMS 304 & 402
Number of dwelling units to be leased or made available to others:	88 IN BUILDING
Number of sleeping rooms, in all dwelling units to be made available to others:	1 ROOM 2 BED

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: KEEL-HYER Policy #

Location of Shut Off Valves:

Electric: Nat. Gas:

Water: Propane:

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

Bill mailed 3/2/14

Account No. 05185

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E Wildwood Ave - Wildwood NJ - 08260
Property Trade Name, if applicable:	Diplomat
Name of Property Owner of Record:	Ferdinando Pontoriero
Property Owner's mailing address:	933 Douglas Terrace Union NJ - 07083
Property Owner's phone number:	908-686-8458
Property Owner's email:	fpontoriero@verizon.net
Name of Property Manager or Agent:	
Manager/Agent's address:	
Manager/Agent's phone number:	
Manager/Agent's email:	
Emergency Contact person & phone number:	
Number of dwelling units on the property:	one 88
Number of dwelling units to be leased or made available to others:	one
Number of sleeping rooms, in all dwelling units to be made available to others:	2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: OBE Specialty Insurance Co Policy # [REDACTED]

Location of Shut Off Valves:

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

933 E. Wildwood Ave
Union NJ 07083

RECEIVED

Date of Receipt by Clerk's Office:

MAR 24 2014

Bill mailed 3/28/14 Account # 66554

CITY CLERK'S OFFICE

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. WILDWOOD AVE #405
Property Trade Name, if applicable:	DIPLOMAT
Name of Property Owner of Record:	ROBERT & ROBIN LAUFER
Property Owner's mailing address:	443 HARRISON AVE. HATBORO, PA 19040
Property Owner's phone number:	215-939-6364
Property Owner's email:	HATBORO443@YAHOO.COM
Name of Property Manager or Agent:	SHIRLEY KAULF
Manager/Agent's address:	6/2 225 E. WILDWOOD AVE.
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	SAKAULF@YAHOO.COM
Emergency Contact person & phone number:	ERICA THERN-NETHERBY 609-705-0140
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	88 VARIES
Number of sleeping rooms, in all dwelling units to be made available to others:	VARIES

225 E. Wildwood Ave #405

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

ATTACHED

Insurance Company: _____ Policy # _____

Location of Shut Off Valves:

Electric: PANEL IN HALL Nat. Gas: N/A

Water: ~~PANEL IN HALL~~ ACROSS FROM KITCHEN Propane: N/A

ACROSS FROM KITCHEN

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

JUL 17 2017

Bill Mailed: 8/1/17

ACCT# 07983

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E Wildwood Ave #408
Property Trade Name, if applicable:	The Diplomat Condos
Name of Property Owner of Record:	Lori Younker
Property Owner's mailing address:	550 Woodland View Dr. York, PA 17406
Property Owner's phone number:	717-309-6202
Property Owner's email:	lori.younger27@gmail.com
Name of Property Manager or Agent:	Shirley KAULF, Gen Mgr
Manager/Agent's address:	225 E Wildwood Ave, Wildwood, NJ
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	SAKAULF@yahoo.com
Emergency Contact person & phone number:	Joseph Leong 717-487-2921
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to made available to others:	2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Lloyds of London Policy # [REDACTED]
 Location of Shut Off Valves: (Anchor Insurance Agency)
 Electric: Kitchen Nat. Gas: NA
 Water: 1st Floor Propane: NA

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill mailed: 2/28/14

Date of Receipt by Clerk's Office:

ACCT# 07236

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave. Wildwood, NJ 08260	(Unit 414)
Property Trade Name, if applicable:	Diplomat Condominium Association	
Name of Property Owner of Record:	Payne NJ Properties LLC	
Property Owner's mailing address:	18 McCormick Place, Staten Island, NY 10305	
Property Owner's phone number:	718 447-7315	
Property Owner's email:	Jim 1399 @ Verizon.net	
Name of Property Manager or Agent:	Shirley Kaulf	
Manager/Agent's address:	225 E. Wildwood Ave. Wildwood, NJ 08260	
Manager/Agent's phone number:	609 729-5200	
Manager/Agent's email:	Info @ Diplomat Suites .com	
Emergency Contact person & phone number:	Shirley Kaulf 609 741-1442	
Number of dwelling units on the property:	1	
Number of dwelling units to be leased or made available to others:	1 (UNIT 414)	
Number of sleeping rooms, in all dwelling units to be made available to others:	3	

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Mesa Underwriters Insurance Policy # [REDACTED]

Location of Shut Off Valves:

Electric: in unit by door Nat. Gas: None

Water: Main valve, Electrical Rm, 1st flr Propane: None

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

RECEIVED

FEE \$3.00

Bill Mailed: 2/28/14 Date of Receipt by Clerk's Office:

ACCT# 02931

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Ave., Wildwood, NJ 08260	(UNIT 415)
Property Trade Name, if applicable:	Diplomat Condominium Association	
Name of Property Owner of Record:	Payne NJ Properties, LLC	
Property Owner's mailing address:	18 McCormick Place, Staten Island, NY 10305	
Property Owner's phone number:	718 447-7315	
Property Owner's email:	Jim 1399 @ Verizon.net	
Name of Property Manager or Agent:	Shirley Kaulf	
Manager/Agent's address:	225 E. Wildwood Ave., Wildwood, NJ 08260	
Manager/Agent's phone number:	609 729-5200	
Manager/Agent's email:	Info @ Diplomat Suites.com	
Emergency Contact person & phone number:	Shirley Kaulf 609 741-1442	
Number of dwelling units on the property:	1	
Number of dwelling units to be leased or made available to others:	1 (UNIT 415)	
Number of sleeping rooms, in all dwelling units to be made available to others:	2	

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Mesa Underwriters Insurance Policy # [REDACTED]

Location of Shut Off Valves:

Electric: in unit by door Nat. Gas: None

Water: Main Valve, Electrical Rm, 1st flr Propane: None

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

RECEIVED

Date of Receipt by Clerk's Office:

APR 09 2014

CITY CLERK'S OFFICE

Account #02933

DO NOT WRITE ABOVE THIS LINE.

Bill mailed 4/28/14

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Ave Unit 417
Property Trade Name, if applicable:	Diplomat
Name of Property Owner of Record:	Vincent and Bernadette Pileggi
Property Owner's mailing address:	836 Wickwood Rd, Warrington PA 18976
Property Owner's phone number:	215-491-7150
Property Owner's email:	B. Pileggi@comcast.net
Name of Property Manager or Agent:	Shirley Kaulf
Manager/Agent's address:	225 E Wildwood Ave
Manager/Agent's phone number:	855-886-6835
Manager/Agent's email:	n/a
Emergency Contact person & phone number:	Bernadette Pileggi - 215-801-6209 cell#
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	1

225 E Wildwood Ave #417

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Nationwide Insurance Policy # _____

Location of Shut Off Valves: _____

Electric: _____ Nat. Gas: N/AWater: _____ Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

4-7-14

ACCT# 02934

Incamp. *[initials]*

Bill Mailed: 5/23/14

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E WILDWOOD AVE WILDWOOD NJ 08260	# Unit 418
Property Trade Name, if applicable:	The DIPLOMAT	
Name of Property Owner of Record:	Antonio + Denise LaGala	
Property Owner's mailing address:	151 Smith Circle Point Pleasant NJ 08742	
Property Owner's phone number:	732-714-9486	
Property Owner's email:	dlagala@aol.com	
Name of Property Manager or Agent:	Shirley Kaulf	
Manager/Agent's address:	225 E WILDWOOD AVE WILDWOOD NJ 08260	
Manager/Agent's phone number:	609-741-1442	
Manager/Agent's email:	sakaulf@yahoo.com	
Emergency Contact person & phone number:	Denise LaGala 732-598-5285	
Number of dwelling units on the property:	88	
Number of dwelling units to be leased or made available to others:	I dont know contact manager	
Number of sleeping rooms, in all dwelling units to made available to others:	I dont know contact manager	

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Mercer Insurance Policy # [redacted]
Location of Shut Off Valves: Please contact MANAGER - Shirley Kaulf
Electric: _____ Nat. Gas: _____
Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill Mailed: 2/28/14

Date of Receipt by Clerk's Office:

ACCT # 05143

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Ave, Unit 419, ZIP 08260
Property Trade Name, if applicable:	419 DIPLOMAT LP
Name of Property Owner of Record:	419 DIPLOMAT LP, Janet Miller
Property Owner's mailing address:	57 Covey Ln. HOLLAND, PA 18966
Property Owner's phone number:	215 354 0442
Property Owner's email:	puckshot7@comcast.net
Name of Property Manager or Agent:	
Manager/Agent's address:	Shirley Kaulf 225 E. Wildwood Ave.
Manager/Agent's phone number:	609 729 5200
Manager/Agent's email:	info@diplomasuites.com
Emergency Contact person & phone number:	SAME -
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	I just know of 1 - mine
Number of sleeping rooms, in all dwelling units to be made available to others:	UNKNOWN

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Coastal Insurance Policy # [REDACTED]

Location of Shut Off Valves:

Electric: Behind bedroom door Nat Gas: —

Water: Under sink Propane: —

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

RECEIVED

Date of Receipt by Clerk's Office:

MAR 14 2014

Bill Mailed: 3/28/14

ACCT# 07002

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of WildwoodRental Housing Mercantile License ApplicationLicense Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Avenue #420
Property Trade Name, if applicable:	Diplomat Condo
Name of Property Owner of Record:	RON + Luci Cappelle Deputy
Property Owner's mailing address:	219 So. Bancroft Pkwy Wilmington De 19805
Property Owner's phone number:	302 379 4410 302 379 2109
Property Owner's email:	Luci @ comcast . net
Name of Property Manager or Agent:	Ms Shirley Koffman
Manager/Agent's address:	c/o Diplomat E. Wildwood Ave
Manager/Agent's phone number:	Ms Shirley Koffman 609-741-1442
Manager/Agent's email:	unknown
Emergency Contact person & phone number:	my Brother - Paul A. Cappelle {609-805-2577 609-320-6576
Number of dwelling units on the property:	88 units we have ONE (I believe there are 88 altogether units @ Diplomat)
Number of dwelling units to be leased or made available to others:	ONE
Number of sleeping rooms, in all dwelling units to be made available to others:	TWO

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

21st century Homeowners INS.

Insurance Company: Home-site INS. CO. Policy # [REDACTED]

Location of Shut Off Valves:

Electric: Kitchenette wall behind door Nat. Gas: N/A
 Water: N/A Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO (possibly) If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill Mailed: 2/28/14

Date of Receipt by Clerk's Office:

ACCT# 02892

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave. Wildwood, NJ 08260 (Unit 422)
Property Trade Name, if applicable:	Diplomat Condominium Association
Name of Property Owner of Record:	Payne NJ Properties LLC
Property Owner's mailing address:	18 McCormick Place, Staten Island, NY 10305
Property Owner's phone number:	718 447-7315
Property Owner's email:	Jim1399@Verizon.net
Name of Property Manager or Agent:	Shirley Kaulf
Manager/Agent's address:	225 E. Wildwood Ave., Wildwood, NJ 08260
Manager/Agent's phone number:	609 729-5200
Manager/Agent's email:	Info@DiplomatSuites.com
Emergency Contact person's & phone number:	Shirley Kaulf 609 741-1442
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	1 (Unit 422)
Number of sleeping rooms, in all dwelling units to be made available to others:	2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Mesa Underwriters Insurance Policy # [REDACTED]

Location of Shut Off Valves:

Electric: in unit by door Nat. Gas: None

Water: Main Valve, Electrical Rm., 1st flr Propane: None

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

RECEIVED

APR 11 2014

Bill Mailed: 4/28/14

ACCT# 02887

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	UNIT # 423 225 EAST WILDWOOD AVE., WILDWOOD, NJ 08260
Property Trade Name, if applicable:	DIPLOMAT BEACH CLUBS
Name of Property Owner of Record:	WILLIAM H. STEINSIECK
Property Owner's mailing address:	524 OAK PARK RD., HATFIELD PA 19440
Property Owner's phone number:	215-896-6054
Property Owner's email:	STEINSIECK@GMAIL.COM
Name of Property Manager or Agent:	SHIRLEY KAULF
Manager/Agent's address:	225 E. WILDWOOD AVE. WILDWOOD NJ 08260
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	SA KAULF@YAHOO.COM
Emergency Contact person & phone number:	SHIRLEY KAULF 609-729-5200
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: SCOTTSDALE INSURANCE CO Policy # [REDACTED]

Location of Shut Off Valves:

Electric: BEDROOM Nat. Gas: N/A

Water: BATH Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November DecemberIs the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

RECEIVED

MAY 02 2018

Bill Mailed: 6/7/18

ACCT# 08111

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 East Wildwood Ave, Unit 501 Wildwood Ave 08260
Property Trade Name, if applicable:	Diplomat Suites
Name of Property Owner of Record:	David & Ransit Colofranson
Property Owner's mailing address:	22 SamanTha Drive Hammonter, WJ 0937
Property Owner's phone number:	856-602-1811
Property Owner's email:	Colofran1234@Hotmail.com
Name of Property Manager or Agent:	Shelly
Manager/Agent's address:	225 East Wildwood Ave, Wildwood WJ 08260
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	UNKNOWN
Emergency Contact person & phone number:	856-602-1811
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to made available to others:	1

Block 201 Lot 40501

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: The Barclay Group Policy # [REDACTED]

Location of Shut Off Valves:

Electric: Panel in unit Nat. Gas: None

Water: Down stairs in unit Propane: None

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

523

Done
5-22-14

Date of Receipt by Clerk's Office

RECEIVED

MAY 13 2014

Bill Mailed: 5/23/14

ACCT# 07323

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

NEW?

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	235 E. WILLOW AVE WILWOOD NJ 08260 #503
Property Trade Name, if applicable:	DIPLOMAT COUNTRY CLUB
Name of Property Owner of Record:	LEONARD MONAHAN SCHLESSEL
Property Owner's mailing address:	300 W. GREENWICH ST FLEETWOOD PA 19522
Property Owner's phone number:	610 344 9527
Property Owner's email:	
Name of Property Manager or Agent:	SHIRLEY KAULF
Manager/Agent's address:	235 E. WILLOW AVE WILWOOD NJ 08260
Manager/Agent's phone number:	609 729 5200
Manager/Agent's email:	
Emergency Contact person & phone number:	SHIRLEY KAULF 609 741 4442
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: SCOTTDALE Policy # ~~XXXXXXXXXX~~

Location of Shut Off Valves:

Electric: FOX WOLF Nat. Gas: _____

Water: MARCO BULLS Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November DecemberIs the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill Mailed: 2/28/14

Date of Receipt by Clerk's Office:

ACCT # 02876

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave, Wildwood, NJ 08260 (UNIT 508)
Property Trade Name, if applicable:	DIPLOMAT Condominium Association
Name of Property Owner of Record:	Fayne NJ Properties LLC
Property Owner's mailing address:	18 McCormick Place Staten Island, NY 10305
Property Owner's phone number:	718 447-7315
Property Owner's email:	Jim 1399@Verizon.net
Name of Property Manager or Agent:	Shirley Kautf
Manager/Agent's address:	225 E. Wildwood Ave, Wildwood, NJ 08260
Manager/Agent's phone number:	609 729-5200
Manager/Agent's email:	Info@DiplomatSuites.com
Emergency Contact person & phone number:	Shirley Kautf 609 741-1442
Number of dwelling units on the property:	1
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Mesa Underwriters Insurance Policy # ~~XXXXXXXXXX~~

Location of Shut Off Valves:

Electric: in unit by door Nat. Gas: None

Water: Main Valve, Electrical Rm 1st flr Propane: None

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill Mailed 2/28/14

Date of Receipt by Clerk's Office:

ACCT# 03203



DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave., Wildwood, NJ 08260	(UNIT 514)
Property Trade Name, if applicable:	Diplomat Condominium Association	
Name of Property Owner of Record:	Payne, NJ Properties, LLC	
Property Owner's mailing address:	18 McCormick Place, Staten Island, NY 10305	
Property Owner's phone number:	718 447-7315	
Property Owner's email:	Jim.1399@Verizon.net	
Name of Property Manager or Agent:	Shirley Kaulf	
Manager/Agent's address:	225 E. Wildwood Ave., Wildwood, NJ 08260	
Manager/Agent's phone number:	609 729-5200	
Manager/Agent's email:	Info@DiplomatSuites.com	
Emergency Contact person & phone number:	Shirley Kaulf 609 741-1442	
Number of dwelling units on the property:	1	
Number of dwelling units to be leased or made available to others:	1 (UNIT 514)	
Number of sleeping rooms, in all dwelling units to be made available to others:	3	

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Mesa Underwriters Insurance Policy # [REDACTED]

Location of Shut Off Valves:

Electric: in unit by door Nat. Gas: None

Water: main valve, electrical rm, 1st flr Propane: None

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill Mailed 2/28/14

Date of Receipt by Clerk's Office:

ACCT# 02938

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FEB 08 2014

CLERK'S OFFICE

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave. Wildwood, NJ 08260	(UNIT 515)
Property Trade Name, if applicable:	Diplomat Condominium Association	
Name of Property Owner of Record:	Payne, NJ Properties, LLC	
Property Owner's mailing address:	18 McCormick Place, Staten Island, NY 10305	
Property Owner's phone number:	718 447-7315	
Property Owner's email:	Jim1399@Verizon.net	
Name of Property Manager or Agent:	Shirley Kaulf	
Manager/Agent's address:	225 E. Wildwood Ave. Wildwood, NJ 08260	
Manager/Agent's phone number:	609 729-5200	
Manager/Agent's email:	Info@DiplomatSuites.com	
Emergency Contact person & phone number:	Shirley Kaulf 609 741-1442	
Number of dwelling units on the property:	1	
Number of dwelling units to be leased or made available to others:	1 (UNIT 515)	
Number of sleeping rooms, in all dwelling units to be made available to others:	2	

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Mesa Underwriters Insurance Policy # [REDACTED]

Location of Shut Off Valves:

Electric: in unit by door Nat. Gas: None

Water: Main valve, electrical rm, 1st flr Propane: None

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? No If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

Bill Mailed: 4/29/19

ACCT#08246
DO NOT WRITE ABOVE THIS LINE.

INFORMATION ABOVE THIS LINE IS TO BE PROVIDED BY CITY OFFICIALS

City of Wildwood
Rental Housing Mercantile License Application
License Term: 2019-2020

Property Street Address: 225 E. WILDWOOD AVE, UNIT 516
Property Trade Name, if applicable: DIPLOMAT SUITES
Name of Property Owner of Record: ROSS ANDERTON
Property Owner's mailing address 216 HUGHES AVE, NORTH CAPE MAY, NJ 08204
Property Owner's phone number: 609-328-1273
Property Owner's email: ROSSANDERTON@GMAIL.COM
Name of Property Manager or Agent: DIPLOMAT CONDO ASSOCIATION
Manager/Agent's address: 225 E. WILDWOOD AVE, WILDWOOD, NJ 08260
Manager/Agent's phone number: 609-729-5200
Manager/Agent's email: SAKAULF@YAHOO.COM
Emergency Contact person & phone number: SHIRLEY KAULF 609-741-1442
Number of dwelling units on the property: 88
Number of dwelling units to be leased or made available to others: 1
Number of sleeping rooms, in all dwelling units to made available to others: 2

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: ANCHOR INSURANCE AGENCY Policy# 

Location of Shut off Valves:

Electric: BEHIND KITCHEN DOOR Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenants or tenants who have year round/12 month lease(s)? _____

Date of Receipt by Clerk's Office:

RECEIVED

Bill Mailed: 4/28/14

ACCT# 07276 / Done 4/29/14
DO NOT WRITE ABOVE THIS LINE.

APR 04 2014

CITY CLERK'S OFFICE

NEW OWNER?
YES

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave # 518
Property Trade Name, if applicable:	Diplomat Beach Club
Name of Property Owner of Record:	Kenneth G. and Dorenn M. Romalino
Property Owner's mailing address:	450 Sunnyhill Ave, Franklinville NJ 08322
Property Owner's phone number:	Home: 856-629-6929, Cell: 856-371-7717
Property Owner's email:	kgr590@netscape.net
Name of Property Manager or Agent:	Diplomat Condo Assoc. / Shirley Kaulf
Manager/Agent's address:	225 E. Wildwood Ave
Manager/Agent's phone number:	(609) 729-5200
Manager/Agent's email:	info@diplomatsuites.com
Emergency Contact person & phone number:	Shirley Kaulf (609) 729-5200
Number of dwelling units on the property:	
Number of dwelling units to be leased or made available to others:	One
Number of sleeping rooms, in all dwelling units to be made available to others:	One <u>2</u>

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Scottsdale Insurance Company Policy # [REDACTED]

Location of Shut Off Valves:

Electric: _____ Nat. Gas: N/AWater: _____ Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully-occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

RECEIVED

Date of Receipt by Clerk's Office:

JUL 31 2015

Bill Mailed: 8/12/15. ACCT# 07623

CITY CLERK'S OFFICE

NEW

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood

Rental Housing Mercantile License Application

License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Ave., Wildwood, NJ
Property Trade Name, if applicable:	Unit 519
Name of Property Owner of Record:	Leonard & Nancy Schlegel
Property Owner's mailing address:	300 Greenway St., Fleetwood, PA 19522
Property Owner's phone number:	610 944 9527
Property Owner's email:	
Name of Property Manager or Agent:	Shirley Kaulf
Manager/Agent's address:	225 E. Wildwood Ave., Wildwood, NJ
Manager/Agent's phone number:	609 729 5200
Manager/Agent's email:	
Emergency Contact person & phone number:	Shirley Kaulf 609 729 5200
Number of dwelling units on the property:	82
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	one

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: _____ Policy #: _____

Location of Shut Off Valves:

Electric: 1st floor Nat. Gas: n/a

Water: 1st floor Propane: 2nd floor

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? no If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Bill Mailed: 3/28/14

Date of Receipt by Clerk's Office:

ACCT# 01973

DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Avenue, Unit 521, Wildwood, NJ
Property Trade Name, if applicable:	Diplomat
Name of Property Owner of Record:	Paul Voss / Theresa Walls
Property Owner's mailing address:	8 Adelaide Court, Newark, DE
Property Owner's phone number:	484 574 6267
Property Owner's email:	twalls711@gmail.com
Name of Property Manager or Agent:	Diplomat Condominium Assoc. / Shirley Kaulpf
Manager/Agent's address:	225 E. Wildwood Avenue, Wildwood, NJ
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	sakaulf@yahoo.com
Emergency Contact person & phone number:	Shirley Kaulpf 609-729-5200
Number of dwelling units on the property:	80
Number of dwelling units to be leased or made available to others:	1 my unit.
Number of sleeping rooms, in all dwelling units to be made available to others:	one

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: The Hartford Policy # [REDACTED]

Location of Shut Off Valves:

Electric: Behind door in kitchen Nat. Gas: N/A

Water: First Floor Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? NO If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

RECEIVED

MAY 19 2014

Bill Mailed: 6/11/14

ACCT# 05207

DO NOT WRITE ABOVE THIS LINE.

CITY CLERK'S OFFICE

City of WildwoodRental Housing Mercantile License ApplicationLicense Term: May 1, 2014 - April 30, 2015

Property Street Address:	225 E. Wildwood Ave Unit # 523 (523)
Property Trade Name, if applicable:	DELOMAT
Name of Property Owner of Record:	DOUGLAS T. GORSCHNOTT
Property Owner's mailing address:	18946 KENNEDY DR. STEWART TOWN, PA 17363
Property Owner's phone number:	410-952-2336
Property Owner's email:	dgorschboth@yahoo.com
Name of Property Manager or Agent:	SHIRLEY BLAKE
Manager/Agent's address:	225 E. Wildwood Ave
Manager/Agent's phone number:	609-729-5200
Manager/Agent's email:	SBKALF@yahoo.com
Emergency Contact person & phone number:	SHIRLEY BLAKE 609-729-5200
Number of dwelling units on the property:	98
Number of dwelling units to be leased or made available to others:	98
Number of sleeping rooms, in all dwelling units to made available to others:	98

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: Hyundai Ins. Co. of America Policy # [REDACTED]

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Location of Shut Off Valves:

Electric: Center of Bldg 1st Floor Nat. Gas: N/AWater: Center of Bldg 1st Floor Propane: N/A

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? _____ If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.

Date of Receipt by Clerk's Office:

Bill Mailed: 3/28/14

ACCT# 08106
DO NOT WRITE ABOVE THIS LINE.

City of Wildwood
Rental Housing Mercantile License Application
License Term: May 1, 2014 – April 30, 2015

Property Street Address:	225 E. Wildwood Ave. Wildwood, N.J. 08260
Property Trade Name, if applicable:	#PH4
Name of Property Owner of Record:	Joseph Robert & Terina Debra Pizzella
Property Owner's mailing address:	96 Braisted Ave. Staten Island, NY 10314
Property Owner's phone number:	718-982-9258
Property Owner's email:	fdpizz@yahood.com
Name of Property Manager or Agent:	Debra Pizzella
Manager/Agent's address:	96 Braisted Ave. S.I., NY 10314
Manager/Agent's phone number:	718-982-9258
Manager/Agent's email:	fdpizz@yahood.com
Emergency Contact person & phone number:	Frank Pizzella 646-239-9040
Number of dwelling units on the property:	88
Number of dwelling units to be leased or made available to others:	1
Number of sleeping rooms, in all dwelling units to be made available to others:	1

A floor plan sketch must be attached which shows each sleeping room and the dimensions of ALL rooms, including lavatories and utility rooms.

Insurance Company: _____ Policy # _____

Location of Shut Off Valves:

Electric: _____ Nat. Gas: _____

Water: _____ Propane: _____

Circle all months this property or part of it will be or may be available to be occupied by anyone other than the owner:

January February March April May June July August September October November December

Is the property fully occupied by a tenant(s) who have year round/12 month lease(s)? _____ If yes, attach lease(s) or other proof. If lease(s) or other proof is/are not attached the property will be considered a seasonally rented property.