

NANCY TAGGART DAVIS
MAYOR

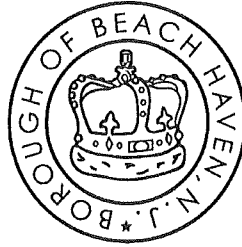
JAMIE BAUMILLER
COUNCILWOMAN

DAN ALLEN
COUNCILMAN

THOMAS LYNCH
COUNCILMAN

CHARLES E. MASCHAL
COUNCILMAN

SHERRY MASON, RMC, CMR, CMC
MUNICIPAL MANAGER
MUNICIPAL CLERK



"The Queen City, Six Miles at Sea"
300 Engleside Avenue
Beach Haven, NJ 08008

July 30, 2019

Robert & Susan Blauth
779 Route 537
Cream Ridge NJ 08514

RE: Property Maintenance at 825 N Beach Avenue, Beach Haven

Dear Robert & Susan Blauth,

Please be advised this letter is to notify you that your bushes on the corner of Taylor Avenue and Beach Avenue have become a safety hazard to the public. We are kindly requesting you to cut back any trees, shrubbery, plantings and or weeds. This will need to be addressed yearly or periodically. I am including in this mailing the requirements that the State has set forth for street safety.

I have also enclosed Ticket #010536.

Please contact me at 609-492-0111 x 202 should you have any further questions or concerns regarding this issue.

Thank you in advance for your prompt attention to this matter.

Regards,

Patrick O'Donnell
Beach Haven Code Enforcement Department
Podonnell@beachhaven-nj.gov

COURT I.D. PREFIX COMPLAINT NUMBER
1503 SC 010536

**BEACH HAVEN BOROUGH
MUNICIPAL COURT**
420 Pelham Avenue
Beach Haven, NJ 08008

Complaint

The State of New Jersey
(Please Print) **VS.**
Defendant's Name: First Initial Last
Address City
State Zip Code Telephone SOCIAL SECURITY NUMBER
Birth Date: Mo. Day Yr. Sex Eyes Height Restrictions
DL #
State Exp. Date

STATE OF NEW JERSEY
COUNTY OF **OCEAN** } SS:

COMPLAINT

COMPLAINT

Complaining Witness: _____
(Name)
of _____
(Identify Dept./Agency Represented) (Badge No.)
Residing at _____
by certification or on oath, says that to the best of his/her knowledge or
information and belief, the named defendant on or about the _____
Month Day Year Time
in **BEACH HAVEN** **1503** County of **OCEAN** NJ
did commit the following offense:

in violation of (one charge only)

(Statute, Regulation or Ordinance Number)
LOCATION OF OFFENSE Describe Location

OATH: Subscribed and sworn to before
me this _____ day of _____, yr. _____

CERTIFICATION: I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

OR
(Signature of Complaining Witness) (Date)
(Signature of Person Administering Oath) (Signature of Complaining Witness)

PROBABLE CAUSE DETERMINATION FOR ISSUANCE OF PROCESS:

COURT USE ONLY
Probable cause is found for the issuance Of this Complaint-Summons
☐ Yes
☐ No (Signature of Judicial Officer)
☐ Yes
☐ No (Signature of Judge)

LAW / CODE ENFORCEMENT USE ONLY
☐ The complaining witness is a law enforcement officer or a code enforcement officer with territorial and subject matter jurisdiction and a judicial probable cause determination is not required prior to the issuance of this Complaint-Summons.

SUMMONS

SUMMONS

YOU ARE HEREBY SUMMONED TO APPEAR
BEFORE THIS COURT TO ANSWER THIS COMPLAINT. IF YOU FAIL TO APPEAR ON THE DATE AND AT THE TIME STATED, A WARRANT MAY BE ISSUED FOR YOUR ARREST.

NOTICE TO APPEAR
☐ COURT APPEARANCE REQUIRED
COURT DATE Month Day Year Time : AM PM

(Date Summons Issued) (Signature of Person Issuing Summons)

DISPOSITION OF CASE

COURT ID: **1503** COUNTY: **SC** COMPLAINT NUMBER: **011170**

BEACH HAVEN BOROUGH
MUNICIPAL COURT
420 Pelham Avenue
Beach Haven, NJ 08008

Complaint

The State of New Jersey
(Please Print) **VS.**

Defendant's Name: First Initial Last
KATRINE McCollum WILLEY

Address City
377 RABBIT FARM RD. WAREEN

State Zip Code Telephone: *ME 01804*

Birth Date: Mo. Day Yr. Sex Eyes Height Restrictions

DL # State Exp. Date

STATE OF NEW JERSEY } SS:
COUNTY OF **OCEAN**

Complaining Witness: *GARY SCHEINER* (Name)
of *CODE ENFORCEMENT* (Identify Dept./Agency Represented) (Badge No.)

Residing at _____
by certification or on oath, says that to the best of his/her knowledge or information and belief, the named defendant on or about the

8-21-19 21 2019 10:45 AM
Month Day Year Time
in **BEACH HAVEN** **1503** County of **OCEAN** NJ

did commit the following offense:
REMOVAL OF TREE / UNLAWFUL
ORD. 157-1906/10005

in violation of (one charge only) _____ (Statute, Regulation or Ordinance Number)

LOCATION OF OFFENSE	CODE	Describe Location
		<i>428 ANGER ST</i>

OATH: Subscribed and sworn to before
me this _____ day of _____, yr. _____

CERTIFICATION: I certify that the fore-going statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

(Signature of Complaining Witness) **OR** (Date) *8-21-19*
(Signature of Person Administering Oath) (Signature of Complaining Witness)

PROBABLE CAUSE DETERMINATION FOR ISSUANCE OF PROCESS:

COURT USE ONLY	LAW / CODE ENFORCEMENT USE ONLY
Probable cause is found for the issuance of this Complaint-Summons Yes ☐ No ☐ (Signature of Judicial Officer) Yes ☐ No ☐ (Signature of Judge)	☒ The complaining witness is a law enforcement officer or a code enforcement officer with territorial and subject matter jurisdiction and a judicial probable cause determination is not required prior to the issuance of this Complaint-Summons.

YOU ARE HEREBY SUMMONED TO APPEAR
BEFORE THIS COURT TO ANSWER THIS COMPLAINT. IF YOU FAIL TO APPEAR ON THE DATE AND AT THE TIME STATED, A WARRANT MAY BE ISSUED FOR YOUR ARREST.

NOTICE TO APPEAR

☐ COURT APPEARANCE REQUIRED	COURT DATE	Month	Day	Year	Time	AM PM
		<i>8</i>	<i>30</i>	<i>19</i>	<i>700</i>	

(Date Summons Issued) *8-21-19* (Signature of Person Issuing Summons)

COMPLAINT

COMPLAINT

SUMMONS

SUMMONS

COURT NO. 1503
FILE NO. SC
COMPLAINT NUMBER 011169
BEACH HAVEN BOROUGH
MUNICIPAL COURT
420 Pelham Avenue
Beach Haven, NJ 08008

The State of New Jersey
(Please Print) vs.
Defendant's Name: First Initial Last
Address City
State Zip Code Telephone: Birth Date: Mo. Day Yr. Sex Eyes Height Restrictions
DL # State Exp. Date

STATE OF NEW JERSEY
COUNTY OF OCEAN } SS:
Complaining Witness: (Name)
of (Identify Dept./Agency Represented) (Badge No.)
Residing at
by certification or on oath, says that to the best of his/her knowledge or information and belief, the named defendant on or about the
Month Day Year
in BEACH HAVEN 1503 County of OCEAN NJ
did commit the following offense:

in violation of (one charge only)
(Statute, Regulation or Ordinance Number)
LOCATION OF OFFENSE CODE Describe Location

OATH: Subscribed and sworn to before
me this day of , yr.
(Signature of Complaining Witness) OR (Date)
(Signature of Person Administering Oath) (Signature of Complaining Witness)

PROBABLE CAUSE DETERMINATION FOR ISSUANCE OF PROCESS:
COURT USE ONLY
Probable cause is found for the issuance of this Complaint-Summons
Yes No (Signature of Judicial Officer)
Yes No (Signature of Judge)
LAW / CODE ENFORCEMENT USE ONLY
The complaining witness is a law enforcement officer or a code enforcement officer with territorial and subject matter jurisdiction and a judicial probable cause determination is not required prior to the issuance of this Complaint-Summons.

YOU ARE HEREBY SUMMONED TO APPEAR
BEFORE THIS COURT TO ANSWER THIS COMPLAINT. IF YOU FAIL TO APPEAR ON THE DATE AND AT THE TIME STATED, A WARRANT MAY BE ISSUED FOR YOUR ARREST.
NOTICE TO APPEAR
COURT APPEARANCE REQUIRED COURT DATE Month Day Year Time AM PM
11-26-18
(Date Summons Issued) (Signature of Person Issuing Summons)

1503 SC 011168

BEACH HAVEN BOROUGH
MUNICIPAL COURT
420 Pelham Avenue
Beach Haven, NJ 08008

Complaint

The State of New Jersey
(Please Print) **VS.**
Defendant's Name: First Initial Last
Kathy LEROUX
Address
PO BOX 134 YORK
State Zip Code Telephone: ME 3109
Birth Date: Mo. Day Yr. Sex Eyes Height Restrictions
DL #
State Exp. Date

STATE OF NEW JERSEY
COUNTY OF OCEAN } SS:

COMPLAINANT
Complaining Witness: (Name)
of Code Enforcement (Identity Dept./Agency Represented) (Badge No.)
Residing at
by certification or on oath, says that to the best of his/her knowledge or information and belief, the named defendant on or about the
JUNE 10 2014
in BEACH HAVEN 1503 County of OCEAN NJ
did commit the following offense:

In violation of (one charge only)
LOCATION OF OFFENSE CODE Describe Location: 123-4A
(Statute, Regulation or Ordinance Number)

OATH: Subscribed and sworn to before
me this day of yr.
(Signature of Complaining Witness) OR (Date)
(Signature of Person Administering Oath) (Signature of Complaining Witness)

PROBABLE CAUSE DETERMINATION FOR ISSUANCE OF PROCESS:
COURT USE ONLY **LAW / CODE ENFORCEMENT USE ONLY**
Probable cause is found for the issuance Of this Complaint-Summons
Yes No (Signature of Judicial Officer)
Yes No (Signature of Judge)
The complaining witness is a law enforcement officer or a code enforcement officer with territorial and subject matter jurisdiction and a judicial probable cause determination is not required prior to the issuance of this Complaint-Summons.

SUMMONS
YOU ARE HEREBY SUMMONED TO APPEAR
BEFORE THIS COURT TO ANSWER THIS COMPLAINT. IF YOU FAIL TO APPEAR ON THE DATE AND AT THE TIME STATED, A WARRANT MAY BE ISSUED FOR YOUR ARREST.
NOTICE TO APPEAR
☐ COURT APPEARANCE REQUIRED
COURT DATE 06 21 19 9:00 AM PM
(Date Summons Issued)
Complaint-Summons (Signature of Person Issuing Summons)
SF (9/09)