rom: Ray Varneckas <ray@prioritysearchservices.com>

Priority: Normal

To: "marie.taylor@aberdeennj.org" <marie.taylor@aberdeennj.org>,"rdahl@allenhurstnj ...

Subject: Edmunds update for Priority Search Services

d morning all. Please consider this an official OPRA request for an update on your Edmunds tax/utility file.
nks!

nond E. Varneckas
ional Field Manager,
rity Search Services,LLC
ne 732-741-5080
732 -791-1544

rom: Ray Varneckas <ray@prioritysearchservices.com> - Edmunds update for Priority Search Services

Sent: Fri 31/03/17 10:01 AM

Edmunds update for Priority Search - SiteMail - Msg

From: Ray Varneckas <ray@prioritysearchservices.com>

Sent: Thu 30/03/17 10:25 AM

To: "taxes@allentownboronj.com" <taxes@allentownboronj.com>, Barbara Neinstedt<bneins ...

Priority: Normal

Subject: Edmunds update for Priority Search

Morning all. Please consider this an official OPRA request for an edmunds tax/utility update. Thanks!!!

d E. Varneckas
Field Manager,
Search Services,LLC
32-741-5080
791-1544

Ray Varneckas <ray@prioritysearchservices.com> - Edmunds update for Priority Search

ALLENTOWN BOROUGH
MAY 4 2017
RECEIVED

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
juliemartin1@verizon.net
Julie Martin, RMC

Response by 5/15/17.

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Phil MI J Last Name Meara

E-mail Address pmeara1951@gmail.com

Mailing Address PO BOX 55

City Allentown State NJ Zip 08501

Telephone 609-259-7675 FAX

Preferred Delivery: Pick Up X US Mail ____ On-Site Inspect ____ Fax ____ E-mail ____

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE / HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature PJ Meara Date 4/4/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of materia

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Signature Requestor PJ Meara Date 4/4/17

Documents Received ____ Date ____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

On Tuesday April 3, 2017 at the public meeting of the Borough Parking Committee, Council President Borkowski stated that the Borough has three (3) Attorney's opinions stating that a parking lot can not be built on land purchased by the Borough on Water Ave behind Di Matta's. Since this impacts the work of the Parking Committee I would like to see these rulings.

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open ____
Denied - Closed ____
Filled - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

ALLENTOWN BOROUGH
MAY 01 2017
RECEIVED

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
juliemartin1@verizon.net
Julie Martin, RMC

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name William MI _____ Last Name Borkowski

E-mail Address willbork@gmail.com

Mailing Address 39 E. P.O Box 318

City Allentown State NJ Zip 08501

Telephone 609 949 1363 FAX _____

Preferred Delivery: Pick Up ✓ US Mail _____ On-Site Inspect _____ Fax _____ E-mail _____

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE / HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [signature] Date 4/27/17

Signature Requestor [signature] Date 4.1.17

Documents Received _____ Date _____

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of materia

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

ADT (Fire fire permit) file for fire permits for 24, 28, & 30 S. main St., Allentown.

Please provide copies of completed (closed-out) permits.

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

5/2 LVM for Dana Katy Rothensville

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature _____ Date _____

5/9 - Will called for Status - Advised I emailed him + that I Should have by Fri.

OPRA

Nancy Buckalew

From: Laurie Gavin <Clerk@allentownboronj.com>
Sent: Tuesday, March 21, 2017 12:45 PM
To: 'Nancy Buckalew'
Subject: FW: SmartProcure OPRA Request Borough Of Allentown For PO/Vendor Information
Attachments: Preprogrammed Software Reports by Manufacturer.pdf

Hi Nancy,

Could you take care of this? No rush. Thank you.

Laurie A. Gavin, MAS, RMC, CMR
Municipal Clerk/Registrar/Public Information Officer
Allentown Borough
609-259-3151

Visit our website at www.AllentownBoroNJ.com.
Like us on Facebook at www.Facebook.com/AllentownBoroughNJ.
Follow us on Twitter at www.twitter.com/AllentownBoroNJ.
Sign up for our e-mail news blast, by hitting reply to this message and requesting an add.

From: cblanding@smartprocure.us [mailto:cblanding@smartprocure.us]
Sent: Tuesday, March 21, 2017 7:23 AM
To: clerk@allentownboronj.com
Subject: SmartProcure OPRA Request Borough Of Allentown For PO/Vendor Information

Dear Laurie or Custodian of Public Records,

SmartProcure is submitting an OPRA request to the Borough Of Allentown for any and all purchasing records from 2016-12-12 to current. The request is limited to readily available records without physically copying, scanning or printing paper documents. Any editable electronic document is acceptable.

The specific information requested from your record keeping system is:

1. Purchase order number. If purchase orders are not used a comparable substitute is acceptable, i.e., invoice, encumbrance, or check number
2. Purchase date
3. Line item details (Detailed description of the purchase)
4. Line item quantity
5. Line item price
6. Vendor ID number, name, address, contact person and their email address
7. What is the beginning of your fiscal year?

The attached document may be helpful as a reference to fulfill this request if the Borough Of Allentown stores the records using any of the pre-programmed software reports, but the records request is not limited to the reports listed.

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownboronj.com

ALLENTOWN BOROUGH
JUN 14 2017
RECEIVED

Response to request due: 6/23/17

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Otto MI J Last Name Kostbar

E-mail Address ottojkostbar@aol.com

Mailing Address 5 Stockton Avenue

City Jamesburg State NJ Zip 08831

Telephone 732-521-0335 FAX 732-521-1361

Preferred Delivery: Pick Up ✓ US Mail ____ On-Site Inspect ____ Fax ____ E-mail ____

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE* / *HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [signature] Date 06/12/2017

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Signature of Requestor [signature] Date ____ Documents Received ____ Date ____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

✓Zoning Ordinance 75-6; 115 and 115-4.9 JTC
✓All ordinances involving demolition of structures. Laura
All permits issued for the demolition of structure during the period from January 1, 2016 throught June 11, 2017. Robbinsville
✓Bodycam video from any zoning officer for the period from May 8 to May 10, 2017. ✓All telephone logs for the building dept. for 5/9/17

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____
Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open ____
Denied - Closed ____
Filled - Closed ____
Partial - Closed ____

AGENCY USE ONLY Robbinsville

Tracking Information
Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

June 2012

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownboronj.com

Received: 6/21/17 DUE DATE: 6/30/17

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name DAVID MI ____ Last Name BAMFORD

E-mail Address DBAM1@LIVE.COM

Mailing Address 1272 RIVERSIDE AVE

City BALTIMORE State MD Zip 21230

Telephone 732-618-5618 FAX ____

Preferred Delivery: Pick Up ____ US Mail ____ On-Site Inspect ____ Fax ____ E-mail ✓

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE / HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [signature] Date 6/21/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request

Signature Requestor [signature] Date 6/21/17

Documents Received ____ Date ____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

RECORDS REGARDING UST REMEDIATION AT 13 HIGH STREET, ALLENTOWN. WORK DONE ~ 1999/2000; PERMIT H 00-99 LOOKING FOR ALL INSPECTIONS, FINDINGS, TEST RESULTS AND CLOSURE DOCUMENTS

15/9 new

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____
Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open ____
Denied - Closed ____
Filled - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

BOROUGH OF ALLENTOWN
MUNICIPAL CLERK
JUN 21 2017
RECEIVED

Custodian Signature ____ Date ____

ALLENTOWN BOROUGH

JUN 15 2017

RECEIVED

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownboronj.com

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Cesia MI V Last Name Crome

E-mail Address Mayanprincess@aol.com

Mailing Address 509 Titus Rd.

City Lambertville State NJ Zip 08530

Telephone 609-468-5145 FAX

Preferred Delivery: Pick Up ✓ US Mail ____ On-Site Inspect ____ Fax ____ E-mail ____

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE* / (*HAVE NOT*) been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Cesia V. Crome Date 6/14/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check: Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request

gnature Requestor Cesia V. Crome Date 6/14/17

Documents Received ____ Date ____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

All Permits requested and granted for work done to property located at 26 Probasco DR. Allentown, NJ 08501
This includes Permits open and closed. Thank you.

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open ____
Denied - Closed ____
Filled - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

emailed

Custodian Signature

6/26/17
Date

June 2012

GOVERNMENT RECORDS REQUEST FORM

609-259-3151 x 112

clerk @allentownboro nj.com

ALLENTOWN BOROUGH

MAR 16 2017

RECEIVED

Important Notice

The reverse side of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Joseph MI _____ Last Name Mollica

E-mail Address joseph.mollica@CBMoves.com

Mailing Address Coldwell Banker, 50 Princeton Hightstown Road

City Princeton Jct State NJ Zip 08505

Telephone 609-558-5642 FAX 862-345-1533

Preferred Delivery: Pick Up ☐ US Mail ☐ On-Site Inspect ☐ Fax ☒ Email ☒

If you are requesting records containing personal information, please select one: Under penalty of N.J.S.A. 2C:28-3, I certify that I ☐ *HAVE* / ☒ *HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature _____ Date _____

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

Fees: 8.5" x 11" @$0.05
8.5" x 14" @$0.07
Other - Call for Pricing

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

For : 4 NORTH MAIN ST. ALLENTOWN

Block #: 7 Lot# 41

1. For the past 5-10 years, any open/closed building permits. (Computer prinout is sufficient).
2. Any reports of underground oil tank on the property.
3. Most recent well water/septic system test reports (if applicable)

Please fax or email information. Thank you.

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature _____ Date _____

From: Ray Varneckas <ray@prioritysearchservices.com>

Sent: Mon 27/02/17 12:30 PM

To: "rdahl@allenhurstnj.org" <rdahl@allenhurstnj.org>,"taxes@allentownboronj.com&qu ...

Priority: Normal

Subject: Edmunds update for Priority Search

ood Afternoon. Please consider this an official OPRA request for an update on your Edmunds tax/utility file.
anks!

ymond E. Varneckas
gional Field Manager,
iority Search Services,LLC
one 732-741-5080
x 732 -791-1544

From: Ray Varneckas <ray@prioritysearchservices.com> - Edmunds update for Priority Search

Nancy Buckalew

From: Curtis Blanding <cblanding@smartprocure.us>
Sent: Wednesday, June 21, 2017 2:02 PM
To: utilities@allentownboronj.com
Subject: Re: OPRA response

Dear Nancy,

This email serves as confirmation that we have received records from Borough Of Allentown. SmartProcure thanks you for taking the time to answer our OPRA request. We will begin the process of combining your records with thousands of other government agencies' records nationwide.

Government purchasing agents use the records to save research time, negotiate better pricing with vendors, get quotes, or simply to find new vendors.

Here is a link with more information about what we do with the records. Again, we appreciate your assistance.

Best regards,

Curtis Blanding
Data Acquisition Specialist
SmartProcure
Direct: 954-637-0742 | Support: 888-988-6348
Email: cblanding@smartprocure.us | www.smartprocure.us
700 W. Hillsboro Blvd. Suite 4-100, Deerfield Beach, FL 33441

On Jun 21, 2017, at 11:25 AM, Nancy Buckalew <utilities@allentownboronj.com> wrote:

Curtis,

Attached are the requested reports from your most recent OPRA. Any question please contact us.

Thank you,

Nancy Buckalew, Deputy Municipal Clerk

utilities@allentownboronj.com

Borough of Allentown

ALLENTOWN BOROUGH

OCT 12 2017

RECEIVED

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownbornnj.com

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Ryan MI F Last Name Thomas

E-mail Address RFTETC@YAHOO.COM

Mailing Address 75 Longwood Dr.

City Hamilton State NJ Zip 08620

Telephone 732-820-0208 FAX

Preferred Delivery: Pick Up ____ US Mail ____ On-Site Inspect ____ Fax ____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE / HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [signature] Date 10/12/2017

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Signature Requestor [signature] Date 10/12/2017

Documents Received ____ Date ____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

I have a contract to purchase the property at 8 Hamilton St.
I request any records associated with this property, such as permits, plans, etc. Thank You

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open ____
Denied - Closed ____
Filed - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

ALLENTOWN BOROUGH

OCT 4 2017

RECEIVED

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownboronj.com

Received: 10/04/17 DUE By: 10/16/17.

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Jason MI _____ Last Name Harris

E-mail Address jason@JasonEHarris.com

Mailing Address 81 North Main Street

City Allentown State NJ Zip 08501

Telephone 609-208-1013 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature _____ Date 10/4/2017

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Signature Requestor _____ Date 10/4/2017

Documents Received _____ Date _____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Please see attached

AGENCY USE ONLY

Est. Document Cost _____

Est. Delivery Cost _____

Est. Extras Cost _____

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

AGENCY USE ONLY

Tracking Information

Tracking # _____

Rec'd Date _____

Ready Date _____

Total Pages _____

Final Cost

Total _____

Deposit _____

Balance Due _____

Balance Paid _____

Records Provided

ALLENTOWN BOROUGH

OCT 2 2017

RECEIVED

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownbornnj.com

Response received: 10/10/17 Response due: 10/12/17

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Jason MI ____ Last Name Harris

E-mail Address jason@JasonEHarris.com

Mailing Address 81 North Main Street

City Allentown State NJ Zip 08501

Telephone 609-208-1013 FAX ____

Preferred Delivery: Pick Up ____ US Mail ____ On-Site Inspect ____ Fax ____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature ____ Date 10/2/2017

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Signature Requestor ____ Date 10/2/2017

Documents Received ____ Date ____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Please see attached

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open ____
Denied - Closed ____
Filled - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

TEAL

October 5, 2017

Laurie Gavin, MAS, RMC, CMR
8 North Main Street
PO Box 487
Allentown, NJ 08501

Re: OPRA Request

To whom it may concern:

Under the New Jersey Open Public Records Act, N.J.S.A. 47:1A-1 et seq., I am requesting an opportunity to obtain copies of the following public records:

- The most current record or accounting of outstanding borough issued checks that have not-yet been cashed or turned over to the State as unclaimed property to include payee name, issued date, check number, and amount. If possible, please limit this to check issued 6 or more months from today's date above $899.
- The most current statement or report available containing information on residential and commercial construction Escrow Accounts, Cash Performance/Maintenance Bonds and any other construction or development-related Cash Securities that would be refundable to the depositor upon project completion and acceptance by the borough.

Some common examples of the cash securities we typically see include (but are not limited to) deposits for Land Development, Sewer Taps, Right-of-Way, Landscaping, Sidewalk, Curb & Gutter, Winter Handling, Signage, Street Cut/Opening, Grading, Erosion & Sediment Control, Subdivision, Storm Water Management, Building, Paving, Street Lights, Driveway, Temporary Trailer, Conservation, Certificate of Occupancy and Inspection escrows. Responsive departments *normally* include Building and Development, Engineering, Planning & Zoning, Public Works, Transportation and in some cases, the Finance Department.
It is requested that the information provided in response to escrow portion of this request contain a minimum of the following specific details when available:

o Name of depositor	o Date of Deposit
o Current Balance	o Project Address *[or Block & Lot number]*

Should there be a cost associated with the fulfillment of this records request that exceeds $25.00, kindly notify me via telephone or email with the estimated cost, prior to incurring any charges.

7350 Heritage Village plaza, Suite 202, Gainesville, VA 20155
(571)409-7071
www.teal-usa.com

OPEN PUBLIC RECORDS ACT REQUEST FORM

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Amy MI _____ Last Name Han

E-mail Address amyhan324@gmail.com

Mailing Address 272 La Cascata

City Clementon State NJ Zip 08021

Telephone 856-383-0803 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE* / *HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [signature] Date 8/15/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Can you please provide me with a list of the latest quarter's tax delinquent homes with owner's information (i.e. name, mailing addresss, etc) and the total delinquent amount from current to previous year(s) in excel format via email.

If for any reason you are unable to provide that list, please state the reason in detail. Thanks in advance.

Instructions on how to generate the report in excel in the Edmund System:

Tax Custom Report:

Page 1: Leave all fields open - Select Print to Excel

Page 2: Select Owner Name, Owner Street 1/2, Owner City, St, Owner Zip, Property Class, Property Location

Page 3: Report Type: Delinquent Notice
-Delinquent Notice Suggestions: as of Date Include Current Interest
-Select Interest Date: put a date in, it will allow you to select include Current Interest above

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature _____ Date _____

9/20/2017, 12:00 PM

.v: SmartProcure OPRA Request Borough Of Allentown For PO/Vendor Information

To taxes@allentownboronj.com • Nancy Buckalew

Hi ladies,

This is another OPRA request. Maryann, can you show Kelly how to respond to this one since it comes every six months or so? Thank you.

Take care,

Laurie A. Gavin, MAS, RMC, CMR
Municipal Clerk/Registrar/Public Information Officer
Allentown Borough
609-259-3151

Visit our website at www.AllentownBoroNJ.com.
Like us on Facebook at www.Facebook.com/AllentownBoroughNJ.
Follow us on Twitter at www.twitter.com/AllentownBoroNJ.
Sign up for our e-mail news blast, by hitting reply to this message and requesting an add.

From: cblanding@smartprocure.us [mailto:cblanding@smartprocure.us]
Sent: Wednesday, September 20, 2017 8:12 AM
To: clerk@allentownboronj.com
Subject: SmartProcure OPRA Request Borough Of Allentown For PO/Vendor Information

Dear Laurie or Custodian of Public Records,

SmartProcure is submitting an OPRA request to the Borough Of Allentown for any and all purchasing records from 2017-06-20 to current. The request is limited to readily available records without physically copying, scanning or printing paper documents. Any editable electronic document is acceptable.

The specific information requested from your record keeping system is:

1. Purchase order number. If purchase orders are not used a comparable substitute is acceptable, i.e., invoice, encumbrance, or check number
2. Purchase date
3. Line item details (Detailed description of the purchase)
4. Line item quantity
5. Line item price
6. Vendor ID number, name, address, contact person and their email address

The attached document may be helpful as a reference to fulfill this request if the Borough Of Allentown stores the records using any of the pre-programmed software reports, but the records request is not limited to the reports listed.

Please email the information or use the following web link. There is no file size limitation:
http://upload.smartprocure.us/?st=NJ&org=BoroughOfAllentown

If this request was misrouted, please forward to the correct contact person and reply to this communication with the

NAVAIR 4613

AM

N BOROUGH

P 13 2017

RECEIVED

Received: 9/13/17

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 467
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownboronj.com

Response Due: 9/22/17

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Ryan MI F Last Name Thomas

E-mail Address RFTETC@YAHOO.COM

Mailing Address 75 Longwood Dr.

City Hamilton State NJ Zip 08620

Telephone 732-820-0208 FAX

Preferred Delivery: Pick Up ____ US Mail ____ On-Site Inspect ____ Fax ____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / (HAVE NOT) been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [signature] Date 9/13/2017

Signature Requestor [signature] Date 9/13/2017

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Documents Received ____ Date ____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

I am considering purchasing the property at 99 Lakeview Drive.
I request any records associated with this property, such as permits, plans, etc.

Thank You

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open ____
Denied - Closed ____
Filed - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

June 2012

uh

ALLENTOWN BOROUGH

SEP 19 2017

RECEIVED

Place Logo Here

AGENCY NAME HERE

OPEN PUBLIC RECORDS ACT REQUEST FORM

Agency Address

Agency Telephone Number & Fax Number

Agency e-mail address

Name of Agency Custodian

Place Logo Here

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Steven MI P Last Name Ross, Esq

E-mail Address spross@rossesq.com

Mailing Address 52 Main Street

City Hackensack State NJ Zip 07601

Telephone 201-488-4300 FAX 201-488-7650

Preferred Delivery: Pick Up _____ US Mail X On-Site Inspect _____ Fax ___X___ E-mail ___X___

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE / HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature _____ Date 8/7/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Lawrence

Premises: 10 Harmony Hill Road
Lot: 44.03 Block: 15
Monmouth County, Allentown, NJ 08501

ROBBINSVILLE TOWNSHIP
CONSTRUCTION OFFICE

SEP 19 2017

RECEIVED

Please provide me with copies of all open building permits and outstanding notices of code violations contained in the files of the building department, zoning office and Fire Code Official relating to this property. (Please see the attached letter.)

AGENCY USE ONLY

Est. Document Cost _____

Est. Delivery Cost _____

Est. Extras Cost _____

Total Est. Cost _____

Deposit Amount _____

Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____

Denied - Closed _____

Filled - Closed _____

Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____

Rec'd Date _____

Ready Date _____

Total Pages _____

Final Cost

Total _____

Deposit _____

Balance Due 0

Balance Paid _____

Records Provided

Not in Allentown Boro

Custodian Signature

9-19-17

Date

ALLENTOWN BOROUGH

SEP 06 2017

RECEIVED

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownboronj.com

Received: 9/6/17 Response Due: 9/15/17

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Jason MI ____ Last Name Harris

E-mail Address Jason@JasonEHarris.com

Mailing Address 81 North Main Street

City Allentown State NJ Zip 08501

Telephone 609-208-1013 FAX ____

Preferred Delivery: Pick Up X US Mail ____ On-Site Inspect ____ Fax ____ E-mail ____

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / (HAVE NOT) been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature ____ Date 9/6/1017

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Signature Requestor ____ Date 9/6/2017 Documents Received ____ Date ____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

See attached

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open ____
Denied - Closed ____
Filled - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

Received: 9/14/17 Response Due: 9/25/17

BOROUGH OF ALLENTOWN MUNICIPAL CLERK SEP 14 REC'D RECEIVED

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownboronj.com

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Stephanie MI M Last Name

E-mail Address ssolis@ganett.com

Mailing Address 3600 Route 66

City Neptune State NJ Zip 07754

Telephone 732-403-0074 FAX

Preferred Delivery: Pick Up ____ US Mail ____ On-Site Inspect ____ Fax ____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE / HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [signature] Date 09/14/2017

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Signature Requestor_____ Date_____ Documents Received _____ Date_____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Pursuant to the Open Public Records Act, I am requesting digital copies of all resolutions voted on and/or adopted Tuesday, September 12, 2017.

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature _____ Date _____

ALLENTOWN BOROUGH

AUG 15 2017

RECEIVED

OPEN PUBLIC RECORDS ACT REQUEST FORM

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Amy MI _____ Last Name Han

E-mail Address amyhan324@gmail.com

Mailing Address 272 La Cascata

City Clementon State NJ Zip 08021

Telephone 856-383-0803 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail X

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE* (*HAVE NOT*) been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [signature] Date 8/15/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Can you please provide me with a list of the latest quarter's tax delinquent homes with owner's information (i.e. name, mailing addresss, etc) and the total delinquent amount from current to previous year(s) in excel format via email.

If for any reason you are unable to provide that list, please state the reason in detail. Thanks in advance.

Instructions on how to generate the report in excel in the Edmund System:
In Edmund Billing/Collection Tax Collections Accounts Tax Custom Reports. On Page 3 Select year and date range you want. Check boxes Utility balance as of date (will be date you put in end of range) and Year/Prd Range balance for Taxes. Page 1 on bottom left corner is check box for excel. On page 2 select all the boxes requested by the requester. (name, property address, mailing address, class, etc.)

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit $0
Balance Due _____
Balance Paid _____

Records Provided

emailed

[signature] 8/15/17

Custodian Signature Date

BOROUGH OF ALLENTOWN

OPEN PUBLIC RECORDS ACT REQUEST FORM

8 North Main Street
PO Box 487
Allentown, NJ 08501
Phone 609-259-3151, fax 609-259-7530
clerk@allentownboronj.com

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Steven MI ____ Last Name Smith

E-mail Address taxcerts@stringinformation.com

Mailing Address 8201 Greensboro Drive, Suite #606

City McLean State VA Zip 22102

Telephone 202-470-2172 FAX 240-223-2060

Preferred Delivery: Pick Up ____ US Mail ____ On-Site Inspect ____ Fax ✓ E-mail ✓

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I *HAVE / HAVE NOT* been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Stevensmith Date 8/23/2017

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Signature Requestor ____ Date ____

Documents Received ____ Date ____

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Requesting is there any
-Open/ Expired permits
-Code compliance
-Zoning violation for the property located at
* 8 Farmer Drive, Allentown NJ 08501*

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open ____
Denied - Closed ____
Filled - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Faxed

Custodian Signature 9/7/17 Date

June 2012

B12 L13

Ray Varneckas 8/29/2017, 10:57 AM

Edmunds update for Priority Search Services

To rdahl@allenhurstnj.org • taxes@allentownboronj.com • Kerry McGuigan • mmartelli@bellevillenj.org • bellmawrtax@comcast.net • lroberson@bernardsvilleboro.org • jbruno@bloomfieldtwpnj.com • Barbara Neinstedt • Jeffery Theriault • coral.creed@branchburg.nj.us • cashley@butlerborough.com • sjackson@capemaypoint.org • deblasiop@carteret.net • alibretti@chathamtownship.org • csmith@ci.orange.nj.us • rdejong@fairlawn.org • taxcoll@wclnj.com • taxc@mcsystems.net • gibbytax@comcast.net • blooney@hackensack.org • nkardan@haledonboronj.com • cfocollector@harringtonparknj.gov • holden@haworthnj.org • c.feig@helmettaboro.com • dconrad@highlandsborough.org • ktaylor@jamesburgborough.org • ekiss@boro.lake-como.nj.us • taxcollector@lambertvillenj.org • jdukelow@laurelsprings-nj.com • boroclerk@lawnside.net • rpyle@logan-twp.org • cbento@longbranch.org • angelaw@lyndhurstnj.org • mahlerc@rosenet.org • peggy.warren@matawanborough.com • bcuthbert@metuchen.com • kmccomick@milltownboro.com • ccorcoran@montvillenj.org • Jill Goode • rroth@mendhamtownship.org • clerk@mtolivetwp.org • lamada@netcong.org • ctc@newfieldboro.org • jmaer@northbrunswicknj.gov • mkurzynski@northhaledon.com • kintrav@npmail.org • epettas@nutleynj.org • sstokes@oradell.org • Georjean Widener • laura.giovene@boroughofsouthtomsriver.com • hana721@hotmail.com • kathy.taxes@ramseynj.com • lsimonetti@raritan-nj.org • apassafiume@roselandnj.org • karnitskyt@roxburynj.us • taxcollector@seaside-heightsnj.org • tax@shrewsburyboro.com • kgillila@sbtnj.net • taxcollector@southhackensacknj.org • taxman1328@comcast.net • Elaine Reddin • uftax@uftnj.com • kmacphee@waldwicknj.org • jmuscara@veronanj.org • eerlewein@twpofwashington.us

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Good Afternoon all. Please consider this an official OPRA request for an update on your Edmunds tax utility file.
Thanks.

Raymond E. Varneckas
Regional Field Manager,
Priority Search Services,LLC
Phone 732-741-5080
fax 732 -791-1544