



JOSEPH C. BODEK, RMC, R.P.P.O

City of Linden
UNION COUNTY, NEW JERSEY
OFFICE OF CITY CLERK
City Hall – 301 North Wood Avenue
Linden, New Jersey 07036
(908) 474-8452
Fax: (908) 474-8451

December 29, 2017

Mr. Jack Roberts
opra+request-744-076aa31f@requests.opramachine.com

File Number: 2017-764

Re: OPRA Request – City Clerk's Office Records

Dear Mr. Jack Roberts:

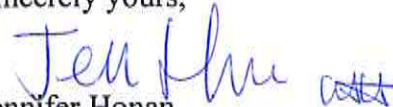
The City of Linden received your Open Public Records Act (OPRA) request on December 4, 2017. The official Records Custodian, Joseph C. Bodek, received your OPRA request on December 4, 2017. As such, the seventh (7th) business day deadline to respond to your request is Wednesday, December 13, 2017. This response to your request is being provided to you on the same business day after the custodian's receipt of said request. On the same business day we provided a response indicating that a 5-week extension was necessary at the request of the City Clerk's Office due to the extensive amount of documents, therefore the response is being provided to you on the 18th business day.

You requested the following: "I'm requesting copies of all OPRA Requests from January 1, 2017 to December 1, 2017."

In accordance with N.J.S.A 47:1A-9(22) which upholds exceptions contained in other State or Federal statutes and regulations, Executive Orders of the Governor, rules of Court, Constitution of this State, or juridical case law or exempt as their disclosure would violate the U.S Department of Health & Human Services Health Information Privacy Rule (HIPPA). The Privacy Rule protects all "individually identifiable health information" held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper or oral. The Privacy Rule calls this information "protected health information" (PHI). And in accordance with N.J.S.A. 47:1A-1 (24) Privacy Interest – "a public agency has a responsibility and an obligation to safeguard from public access a citizen's personal information with which it has been entrusted when disclosure thereof would violate the citizen's reasonable expectation of privacy."

If you feel that your request for access to a government record has been improperly denied or unfilled within the seven (7) business days required by law, you have a right to challenge the decision of the City of Linden to deny access. I have attached information, from the Government Records Council regarding the process to file a complaint.

Sincerely yours,


Jennifer Honan
Deputy Records Custodian
City of Linden



JOSEPH C. BODEK, RMC,
R.P.P.O

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Re: OPRA Request – City Clerk's Office Records

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The City of Linden received your Open Public Records Act (OPRA) request on December 4, 2017. The official Records Custodian, Joseph C. Bodek, received your OPRA request on December 4, 2017. As such, the seventh (7th) business day deadline to respond to your request is Wednesday, December 13, 2017. This response to your request is being provided to you on the same business day after the custodian's receipt of said request.

You requested the following: "I'm requesting copies of all OPRA Requests from January 1, 2017 to December 1, 2017."

Please be advised that your request requires additional time beyond the seven (7) business days to fulfill. OPRA allows custodians to seek extensions of time pursuant to N.J.S.A. 47:1A-5.i. The City Clerk's Office is requesting a five week extension to Monday, January 8, 2018 due to the extensive amount documents that need to be reviewed. Shall the response be provided to this office prior to the extension deadline the response will then be provided to you.

If you feel that your request for access to a government record has been improperly denied or unfilled within the seven (7) business days required by law, you have a right to challenge the decision of the City of Linden to deny access. I have attached information, from the Government Records Council regarding the process to file a complaint.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "Jen Honan", is written over a red circular stamp. The signature is written in black ink.

Jennifer Honan
Deputy Records Custodian
City of Linden

New Jersey Government Records Council ("GRC")



What to do if your request for a record has been denied

The New Jersey Open Public Records Act (N.J.S.A. 47:1A-1 et seq.) permits a person who believes that he or she has been unlawfully denied access to a public record either to file a complaint with the GRC or to file suit in Superior Court to challenge the decision and compel disclosure. This poster describes the procedures for taking such actions.

To file a complaint with the GRC:

- Visit the GRC's website at www.nj.gov/grc for information and to register your complaint. In the alternative, you may contact the GRC by telephone at 1-866-850-0511 or by e-mail at government.records@dca.nj.gov.
- When you file the written complaint, the GRC will offer both you and the public agency non-adversarial, impartial mediation. If mediation is not accepted or is not successful, the GRC will investigate the complaint.
- In some cases, the GRC can award attorney's fees to a complainant or impose a fine against a records custodian.
- There is no fee to file a complaint with the GRC.

To file a complaint in Superior Court:

- A requestor may start a summary (expedited) lawsuit in the Superior Court. A written complaint and order to show cause must be filed with the court.
- The court requires a filing fee, and you must serve the lawsuit papers on the appropriate parties.
- The court will schedule a hearing to resolve the dispute.
- If you disagree with the court's decision, you may appeal the decision to the Appellate Division of the Superior Court.
- If you are successful, you may be entitled to reasonable attorney's fees.
- You may wish to consult with an attorney to learn about initiating and pursuing a summary lawsuit in the Superior Court.
- Filing suit in Superior Court may result in a faster resolution, because the courts adjudicate cases every day, whereas the GRC only meets once a month.

Government Records Council, P.O. Box 819, Trenton, New Jersey 08625-0819

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Jessie Pina Date: 12-12-16
Organization (If Applicable):
Mailing Address: 1369 St George Ave
City, State, Zip: Lakewood NJ 07065
Home/Business Phone: [REDACTED] E-MAIL: J.M.Pina@hotmail.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

Jessie Pina Kenneth Wilkerson Police Report Needed
601 Carnegie St Linden Cops had to come to have Kenneth
leave due to his anger issued he [REDACTED] wall at time
and was taking property out of the house that was mine

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

RECEIVED

JAN - 3 2017

☐ LICENSE INFORMATION (SPECIFY)

RECEIVED

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 601 Carnegie St Linden

BLOCK/LOT: _____

LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: MALGORZATA BOBER Date: 1-3-17
Organization (If Applicable): TERRA REALTORS
Mailing Address: 500 CENTENNIAL AVE,
City, State, Zip: CRANFORD NJ 07065
Home/Business Phone: [REDACTED] E-MAIL MARGARET@TERRAREALTORS
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX 104

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

PLEASE PROVIDE ANY DOCUMENTATION ~~SEA~~
REGARDING LEGALITY OF KITCHEN IN THE
BASEMENT OF 611 BIRCHWOOD RD LINDEN

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

RECEIVED

JAN 03 2017

Clerks Office

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 611 BIRCHWOOD RD, LINDEN

LOCK/LOT: _____



Malgorzata "Margaret" Bober
REALTOR / ASSOCIATE
I speak Polish & Russian
RESIDENTIAL SPECIALIST
500 CENTENNIAL AVE, CRANFORD NJ 07016
OFFICE FAX 908 325 5308
MOBILE
Margaret@TerraRealtors.com

LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

EASE PRINT
Name: CM Adams-Diakite Date: 1/3/17
Organization (If Applicable):
Mailing Address: 707 Washington Ave
City, State, Zip: Linden, NJ 07036
Home/Business Phone: E-MAIL
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Complaint(s) received property at 707 Washington Ave,
Linden NJ.
(all - property violations and
police calls.)

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
SEND RESPONSE BY E-MAIL
COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
OTHER (SPECIFY)

RECEIVED
JAN 03 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)
SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 707 Washington Ave.
BLOCK/LOT:

RECEIVED

CITY OF LINDEN
APPLICATION FORM

JAN -3 2017

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS CLERK'S OFFICE

(PLEASE PRINT)

Name: <u>Nassandra T Jimenez</u>	Date: <u>12/30/16</u>
Organization (If Applicable): <u>Brinks Tank Services</u>	
Mailing Address: <u>1856 Liberty Ave</u>	
City, State, Zip: <u>Hillside, NJ, 07205</u>	
Home/Business Phone: <u>[REDACTED]</u> Email: <u>carly@brinksconsulting.com</u>	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	
FAX# <u>(908) 353-3107</u>	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
<u>Please provide a list of permit applications for the installation</u> <u>removal or the decommissioning of underground storage tanks</u> <u>at:</u> <u>387 Ashton Ave, Linden, NJ 07036</u>	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☐ SEND RESPONSE BY E-MAIL	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 387 Ashton Ave, Linden, NJ 07036

BLOCK/LOT: Block #: 430 Lot #: 8

LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

EASE PRINT)

Name: Janet Santoro Date: 1/4/17
Organization (If Applicable):
Mailing Address: 704 Boselle Street
City, State, Zip: Linden NJ 07036
Home/Business Phone: [REDACTED] E-MAIL: janet.0227@comcast.net
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

Need all police reports pertaining to [REDACTED]
that I called the police in the past months. Need
reports for court on 1/6/17 for my [REDACTED]
final hearing. Showing he prevented me from
having any of our vehicles, harassment against me,
and [REDACTED] Victim is myself.

[REDACTED] Giuseppe Santoro [REDACTED]
INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

RECEIVED

JAN 4 2017

LICENSE INFORMATION (SPECIFY)

CLERK'S OFFICE

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

Chelsea Libreros

From: Racioppi, Dustin <Racioppi@northjersey.com>
Sent: Thursday, January 05, 2017 3:49 PM
To: Chelsea Libreros
Subject: FW: OPRA request

From: Racioppi, Dustin
Sent: Thursday, January 05, 2017 3:48 PM
To: 'vbertani@linden-nj.org'
Subject: OPRA request

Good afternoon.

Under the Open Public Records Act, I am writing to request a vendor history report detailing the total paid by Linden in each of the last three fiscal years for legal notices in newspapers. If possible, please note the reason for the legal notice(s) and the newspaper(s) in which they were published. Please note that I am not seeking each individual purchase order, only a listing.

If possible, please provide each year as its own attachment.

I agree to pay any reasonable duplication fees for the processing of this request in an amount not to exceed \$25. If the cost will be more than this amount, please contact me as soon as possible to discuss the fee. My email is racioppi@northjersey.com and my cell phone is [REDACTED]

If there are portions of a record(s) which must be redacted, please identify the record that has been redacted and the legal basis for your contention that the redacted portion(s) is exempt from disclosure under OPRA. If a record(s), in its entirety, is exempt from disclosure under OPRA, kindly notify me, in writing, of the exemption under OPRA upon which you are relying. I reserve the right to appeal any decision to withhold any information and/or to dispute fees charged.

Because such information must be made readily available, I anticipate receiving it as soon as possible but, in no event, later than the seven (7) business days required by law.

Dustin Racioppi
State House reporter

The Record



Mobile: [REDACTED]
Office: [REDACTED]
racioppi@northjersey.com
@dracioppi

NorthJersey.com

RECEIVED

JAN 05 2017

OFFICE

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name:	LYDIA WATSON	Date:	1/5/17
Organization (If Applicable):	CENTURY 21 ALLIANCE REALTY		
Mailing Address:	867 N. STILES ST.		
City, State, Zip:	LINDEN, NJ 07036		
Home/Business Phone:	[REDACTED] -MAIL LYDIA WATSON@Century21.com		
REQUEST MADE VIA:	☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX		

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)

PLEASE EMAIL COPY OF ANY PERMIT / CITY RECORDS CONCERNING AN OIL TANK BEING REMOVED FOR BLOCK 21, 22 LOT 540 ADDRESS 1907-11 SOUTH WOOD AVENUE, LINDEN, NJ 07036.

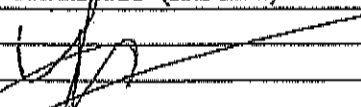
I REPRESENT THE SELLERS WHO SAID IT SHOULD HAVE BEEN REMOVED WHEN THE FURNACE WAS CONVERTED APPROXIMATELY 5 YRS AGO.

☐	INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐	PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒	SEND RESPONSE BY E-MAIL

☐	COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐	COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐	OTHER (SPECIFY)
--------------------------	-----------------

RECEIVED
JAN 05 2017
CLERK'S OFFICE

☐	LICENSE INFORMATION (SPECIFY)
SIGNATURE: 	

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1907-11 S. WOOD AVE, LINDEN, NJ 07036

BLOCK/LOT: 21, 22 / 540

RECEIVED

JAN 05 2016

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

Y OF LINDEN
PLICATION FORM

QUEST FOR PUBLIC RECORDS

NAME (PRINT) Susan McCann Date: Jan 5, 2016
Organization (If Applicable): Keller Williams
Billing Address: 24 S Holmdel Road
City, State, Zip: Holmdel, NJ
Home/Business Phone: [REDACTED] EMAIL: SusanMcCann@kw.com
QUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Block 243 lot 3
623 North Wood Ave Linden
open permits?
Does any Department have Floor Plan? Thank you
INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
IF Floor Plan
☐ SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

LICENSE INFORMATION (SPECIFY)

SIGNATURE: Susan McCann
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 623 North Wood Ave Linden
BLOCK/LOT: Block 243 - lot 3

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: <u>Wissandra I Jimenez</u>	Date: <u>1/5/17</u>
Organization (If Applicable): <u>Brinks tank Services</u>	
Mailing Address: <u>1256 Liberty Ave</u>	
City, State, Zip: <u>Hillside, NJ 07205</u>	
Home/Business Phone: <u>[REDACTED]</u> MAIL <u>carly@brinksconsulting.com</u>	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Please provide a list of permit applications for the installation, removal or the decommissioning of underground storage tanks at:
40 Elmwood Terrace, Linden, NJ 07036

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
- ☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
- ☐ SEND RESPONSE BY E-MAIL
- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
- ☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
- ☐ OTHER (SPECIFY)
- ☐ LICENSE INFORMATION (SPECIFY)

RECEIVED
JAN 05 2017
CLERK'S OFFICE

SIGNATURE:
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 40 Elmwood Terrace, Linden, NJ 07036
BLOCK/LOT: B# : 229 L# : 8

CITY OF LINCOLN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Lincoln, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Henry Phair Date: 01.05.2017
Organization (if applicable):
Mailing Address: 413 W 2nd Ave
City, State, Zip: ROSELLE NJ 07068
Home/Business Phone: [REDACTED] Email: henry.phair@holmail.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
I'm in process of purchasing PROPERTY "111 WOOD LAWN AVE" I'm told that approval of Town Appeal is complete. I would like to verify this information. I'm also told that old tank was already removed from PROPERTY as I would like to verify this also!

- ☐ INSPECT / VIEW DOCUMENTS ONLY (DURING NORMAL BUSINESS HOURS)
☐ PURCHASE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY EMAIL

RECEIVED
JAN 05 2017
CITY OF LINCOLN

- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☒ OTHER (SPECIFY) MY ONLY REAL CONCERN ARE TANKS AS OF 2017 TANKS HAVE BEEN REMOVED FOR TANKS AND OLD TANK REMOVAL WAS COMPLETED SOME TIME AGO AND LINCOLN HAS RECORDS OF THAT FACT!

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 111 WOOD LAWN AVE LINCOLN NJ 07036
BLOCK/LOT: _____

TY LINDEN
PLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

EASE PRINT)

Name: Jerzy Tomaszewski Date: 1/5/2017
Organization (If Applicable):
Mailing Address: 605 S. Wood Ave.
City, State, Zip: Linden NJ 07036
Home/Business Phone E-MAIL call Mrs. Tango
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX social services

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

303 W. Gilobans Street. - police were called
called in october 2016
this police report or CAD entry regarding
this call + address
Jerzy Tomaszewski DOB [REDACTED]

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

RECEIVED

JAN 05 2017

CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

LOCK/LOT:

LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

EASE PRINT)

Name: Angel E. Tijon	Date: 1/5/2017
Organization (if Applicable):	
Mailing Address: 918 Roosevelt Street	
City, State, Zip: Elizabeth NJ 07202	
Home/Business Phone: [REDACTED]	PICK-UP: [REDACTED]
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

Looking for a police report regarding a robbery
at BP Gas station 1642 SE George Avenue.
The victim is [REDACTED] DOB - [REDACTED]
The robbery occurred twice at the gas station
once in 2014 another in 2015 and doesn't
remember the month.

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

jerc2721@hotmail.com

COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

LICENSE INFORMATION (SPECIFY)

SIGNATURE: Angel E. Tijon

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

LOCK/LOT:

TY OF LINDEN
PLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: ROBERT REINHART	Date:
Organization (If Applicable):	
Mailing Address: 33 HUSSA ST #A	
City, State, Zip: LINDEN NJ 07036	
Home/Business Phone: [REDACTED]	MAIL: [REDACTED] Jan 5/51 @GMAIL.COM
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):
Please be specific and attach additional pages of information if necessary)

HIT BY COMCAST TRUCK TWICE MAY 27, 2016
needs the report.

VICTIM: Robert Reinhart
DOB - [REDACTED] SS - [REDACTED]

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

RECEIVED

☐ OTHER (SPECIFY) JAN 05 2017

CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:
BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: <u>Stuart D. Minion, Esq.</u>	Date: <u>1-6-17</u>
Organization (If Applicable): <u>Minion & Sherman</u>	
Mailing Address: <u>33 Clinton Rd. Suite 105</u>	
City, State, Zip: <u>West Caldwell NJ 07006</u>	
Home/Business Phone: <u>[REDACTED]</u>	E-MAIL <u>Sminion@minionsherman.com</u>
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX <u>[REDACTED]</u>	

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

Any open / closed permits pertaining to 742 N. Stiles Street
BLK: 402 Lot. 17☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE☒ SEND RESPONSE BY E-MAILOR Fax☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)☐ OTHER (SPECIFY)

RECEIVED

JAN 06 2017

☐ LICENSE INFORMATION (SPECIFY)

CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 742 N. Stiles StreetBLOCK/LOT: BL. 402 Lot. 17

IN THE CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Huriva Edens-Kelley

Date: 1/16/16

Organization (If Applicable):

Mailing Address: 1418 E. Henry Street

City, State, Zip: Linden, NJ 07036

Home/Business Phone: [REDACTED]

E-MAIL huriva918@gmail.com

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

(police)
Any report with my name, Huriva Edens-Kelley, from
September 2016 to January 5, 2016. Custody disputes with
[D.O.B. [REDACTED]] ex-husband, Christopher Kelley, [REDACTED]

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

LICENSE INFORMATION (SPECIFY)

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JAN 06 2017

CLERK'S OFFICE

SIGNATURE: Huriva Edens-Kelley

INFORMATION ON A SPECIFIC PROPERTY:

DRESS:

BOOK/LOT:

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: <u>Lonor O'Brien</u>	Date: <u>1/9/17</u>
Organization (If Applicable): <u>NAI DiLeo-Bram Property Management Services</u>	
Mailing Address: <u>1315 Stelton Road</u>	
City, State, Zip: <u>Piscataway, NJ, 08854</u>	
Home/Business Phone: <u>[REDACTED]</u>	E-MAIL: <u>lobrien@naidb.com</u>
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Any and all certificates of occupancy for 1026 West Elizabeth Avenue, Linden, NJ 07036

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
☐ OTHER (SPECIFY)
☐ LICENSE INFORMATION (SPECIFY)

RECEIVED
JAN 09 2017
CLERK'S OFFICE

SIGNATURE: Lonor O'Brien
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1026 West Elizabeth Avenue, Linden, NJ 07036
BLOCK/LOT: _____

TO: City Clerk
FROM: Gloria O'Brien at NAI DiLeo-Bram Property Management
DATE: 1/9/17 # PAGES: 2
(Incl cover)
RE: OPRA request for certificates of occupancy 1026 V. Elizabeth Ave
Fax # 908-474-8451

fax

THANK YOU

PLEASE TELEPHONE US AT (732) 985-3020 IF ANY
PAGE IS ILLEGIBLE OR IF ALL PAGES ARE NOT
RECEIVED

- ☒ Original WILL NOT follow
☐ Original WILL follow VIA Regular Mail
☐ Original WILL follow VIA _____

Individual Member Of

**CITY OF LINDEN
APPLICATION FORM**

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS**(PLEASE PRINT)**

Name: Eileen Bloom	Date: January 9, 2017
Organization (If Applicable): Saybolt LP	
Mailing Address: 1026 West Elizabeth Avenue	
City, State, Zip: Linden, New Jersey 07036	
Home/Business Phone: [REDACTED]	E-MAIL: eileen.bloom@corelab.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary) Any or All Certificate of Occupancy for Saybolt LP 1026 West Elizabeth Avenue Linden, New Jersey 07036	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☐ SEND RESPONSE BY E-MAIL	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDENANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE:	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: Saybolt LP 1026 West Elizabeth Avenue Linden, New Jersey 07036	
BLOCK/LOT: Block # 422 Lot # 11	

RECEIVED

JAN 09 2017

CITY OF LINDEN

FAX MESSAGE

SAYBOLT LP
Linden, NJ USA



Fax number : 908-474-8451
To : Linden City Clerk Department
From : Saybolt LP
Date : 1/9/17
Subject : OPRA Request for COO
No. of Pages : 2 (including this one)

Phone: (908) 523-2000 / Fax: (908) 474-1503 / E-Mail: saybolt.kenilworthlab@corelab.com
Mail Address: 1026 West Elizabeth Avenue, Linden, NJ 07036



Fast, to the point. Time is money.



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If you are satisfied with our services do tell others. If you are NOT satisfied, please do tell us: <http://www.corelab.com/saybolt/complaint/>

All our activities are carried out under our general terms and conditions and in accordance with our code of practice. The general conditions can be consulted and downloaded at www.corelab.com/saybolt/legal

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All analytical reports, inspection results, interpretations or information faxed by Saybolt to its customers are preliminary data only. Due to the problems that can occur with the transmission of data via facsimile, Saybolt will not guarantee or assume responsibility for the following transmission of data.

LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

EASE PRINT)

Name: Joseph Pizzi Date: 1/9/17
Organization (If Applicable):
Mailing Address: 138 Westfield Ave.
City, State, Zip: Clark, NJ 07066 Email: Joe.knowshornes@gmail.com
Home/Business Phone: [REDACTED] MAIL: Joe.knowshornes@gmail.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

Underground Oil tank permit verification

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

RECEIVED

JAN 09 2017

LICENSE INFORMATION (SPECIFY)

CLERK'S OFFICE

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 538 Fernwood Terrace

LOCK/LOT: _____

I am requesting the gas and mileage consumption of Mayor Derek Armstead .Starting from 1/1/2016 to 12/31/2016.

To include the gas and mileage consumption from 1/1/2016 to the date the Crown Victoria was removed from service with the Mayor. Also please provide me with the date the Tahoe was put into service and the gas and mileage consumption to 12/31/2016.

Also can you please provide me with the cost of the Tahoe and all its features included.

A copy of the window sticker would be deeply appreciated.

ITY OF LINDEN
PPLICATION FORM

301 N. Wood Avenue
City Hall, Room #105
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

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JAN 10 2017
CLERK'S OFFICE

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Erica Burkert Date: 12/12/2016
Organization (If Applicable): Ecolab
Mailing Address: 1601 West Diehl Road
City, State, Zip: Naperville, IL 60563
Home/Business Phone: [REDACTED] erica.burkert@ecolab.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):
Please be specific and attach additional pages of information if necessary)

We are searching for food safety inspections for the following locations:
Buffalo Wild Wings: 1701 West Edgar Road, Linden - We are searching for any inspections conducted after 01/01/2015.
Checker's: 901 West Edgar Road, Linden - We are searching for any inspections conducted after 02/19/2015.

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
- ☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
- ☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
- ☐ OTHER (SPECIFY)
- ☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:
BLOCK/LOT:

Joe Bodek

From: inspections@activeviewhdi.com
Sent: Tuesday, January 10, 2017 10:02 AM
To: Joe Bodek
Subject: Public Information Request: 01/10/2017
Attachments: Linden NJ FOIA-signed8.pdf

Tuesday, January 10, 2017

Good afternoon Mr. Bodek,

I hope this finds you doing well and having a great start to the new year!

On Monday, December 12, 2016, we sent a request for copies of health inspections for the facilities listed below.

We are following-up in case you did not receive our request.

We are working with several national restaurant chains and food service companies to gather inspection data as part of their corporate Quality Assurance programs.

If you have any questions or concerns, please let us know.

1. **Buffalo Wild Wings**

1701 West Edgar Road Linden, NJ 07036

Please send any inspections performed AFTER 01/01/2015. If there are no inspections after that date, please let us know. We do not need any inspections performed on or before 01/01/2015.

2. **Checker's**

901 W. Edgar Road Linden, NJ 07036

Please send any inspections performed AFTER 02/19/2015. If there are no inspections after that date, please let us know. We do not need any inspections performed on or before 02/19/2015.

This request is made in accordance with your State's Open Records law and under the Freedom of Information Act, 5 U.S.C. Sec. 552.

Please advise if there is a cost for copies, and how that needs to be paid. If possible, we would like to receive the reports in an electronic format or by e-mail or fax. However, if there are too many pages U.S. mail is fine - we will pay the postage.

Thank you for all of your help, as well as your hard work with this request. Your assistance with our inquiry is truly appreciated, and I look forward to hearing from you soon.

Best Regards,

Erica Burkert [B3F3-134]
Ecolab

1601 West Diehl RD, Naperville, IL 60563
Email: inspections@activeviewhdi.com
Phone: [REDACTED]
Fax: (800) 724-9178

ATT: FOIA Form (Linden NJ FOIA-signed8.pdf)

REF #: 58FC17AC-5056-A521-7E94ED013E435882

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CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

EASE PRINT)

Name: Krystal Norg Date: 1/10/16
Organization (If Applicable):
Mailing Address: 622 Aclarkson Ave
City, State, Zip: Elizabeth NJ 07202
Home/Business Phone: [REDACTED] E-MAIL: Krystal-2398@hotmail.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

Krystal-2395

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

I'm looking for a copy of the report for 11/28/15
when I was [REDACTED] with all supporting statements
copy of the municipal court complaint and disposition
copy of paid fines/costs

social security: [REDACTED]
phone number: [REDACTED]

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION) -----

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

RECEIVED

JAN 10 2017

CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room #105
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Anita R. Erickson	Date: 1/11/17
Organization (If Applicable): Decker Associates	
Mailing Address: 800 Mountain Avenue, Ste 3B	
City, State, Zip: Springfield, NJ 07081	
Home/Business Phone	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	973-258-1530
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
Copy of Fire Report - January 10, 2017	
712 Willick Road, Linden (property owner: Placido Rodriguez)	
Our File No. DE-1754463	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY) Received 1/10/2017 CLERK'S OFFICE	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE:	

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

OF LINDEN
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JAN 12 2017

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: Victoria Reed	Date: January 12, 2017
Organization (If Applicable): EWMA	
Mailing Address: 100 Misty Lane	
City, State, Zip: Parsippany NJ 07054	
Home/Business Phone: [REDACTED]	E-MAIL victoria.Reed@ewma.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary

975 E. Linden Ave, Block 438, Lot 17
EWMA is seeking environmental documentation on the property site from the following
depts: Building UST/AST permits, Health/Fire Dept. chemical inventory, spill
records, NJDEP Correspondence, chemical inspection reports, Engineering: Septic
System construction and Tax Assessor: Property Cards

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
- ☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
- ☒ SEND RESPONSE BY E-MAIL
- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
- ☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
- ☐ OTHER (SPECIFY)
- ☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: *[Signature]*
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 975 E. Linden Ave
BLOCK/LOT: Block # 438, Lot # 19

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Jenifer DiVirgilio	Date: 1-13-17
Organization (If Applicable): Keller Williams Realty	
Mailing Address: 188 Elm St	
City, State, Zip: Westfield, NJ 07080	
Home/Business Phone: [REDACTED]	E-MAIL: Jeni@WelcomeHome123.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
Looking for history of UST and IN BASEMENT oil tank (s) removal	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE:	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: 62 Elmwood Terr, Linden	
BLOCK/LOT:	

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CLERK'S OFFICE

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: ANA M. NOCEDA	Date: 1-13-2017
Organization (If Applicable):	
Mailing Address: 109 W. MUNSELL AVE	
City, State, Zip: LINDEN, NJ 07036	
Home/Business Phone: [REDACTED]	E-MAIL Antanait@hotmail.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

oil Tank present in the property.
if it was remove "date" and certificate
Any open or close in the property.
permits.

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

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CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 817 Milford St. Linden NJ 07036

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: <u>Constanza Paz</u>	Date: <u>11/12/2017</u>
Organization (If Applicable):	
Mailing Address: <u>72 Florida St</u>	
City, State, Zip: <u>Elizabeth NJ 07206</u>	
Home/Business Phone	E-MAIL <u>henrypaz69@hotmail.com</u>
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

I need to know if there is any records of the
oil tank.

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
- ☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
- ☐ SEND RESPONSE BY E-MAIL
- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
- ☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
- ☐ OTHER (SPECIFY)
- ☐ LICENSE INFORMATION (SPECIFY)

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JAN 18 2017
CLERK'S OFFICE

SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 651 Meachan St Linden NJ 07036
BLOCK/LOT: 472 / 31

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CITY OF LINDEN
APPLICATION FORM

JAN 17 2017

CLERK'S OFFICE

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: <u>Anthony Vignier Esq.</u>	Date: <u>1-17-17</u>
Organization (If Applicable): <u>J</u>	
Mailing Address: <u>115 Kearny Ave</u>	
City, State, Zip: <u>Kearny NJ 07032</u>	
Home/Business Phone: <u>[REDACTED]</u> MAIL <u>Anthony@anthonyjvignierlaw.com</u>	
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☒ FAX	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
<u>Please provide Any information regarding open permits ad oil tank abandonment documents on record with the construction zoning dept regarding 227 1st Ave, Linden NJ</u>	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE.	
☒ SEND RESPONSE BY E-MAIL <u>with Attachments - see my letterhead for email.</u>	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE: <u>/ First</u>	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: <u>227 1st Ave Linden NJ 07036</u>	
BLOCK/LOT: <u>Lot 5 Block 191</u>	

ANTHONY J. VIGNIER

Attorney-at-Law

115 KEARNY AVENUE
KEARNY, NEW JERSEY 07032

NJ, NY & FLBARS

Email: Anthony@Anthonyjvignierlaw.com

Telephone [REDACTED]
Fax (201) 955-2312

January 17, 2017

Linden City Hall
Att: Construction Department
301 North Wood Avenue
Linden NJ 07036
VIA MAIL AND FAX (908) 474-8451

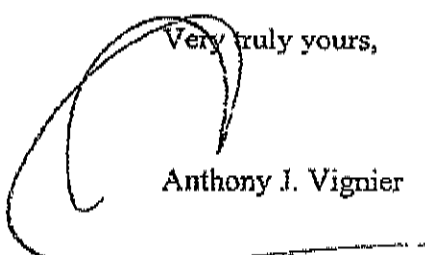
Re: 227 First Avenue, Linden, NJ 07036
Lot 5 Block 191

Dear Sir or Mdm.:

I have attached an OPRA Form. Please advise if this property is two family house and advise if there are any open permits. Finally, please advise if an oil tank was removed or decommissioned and if so please provide all related documents. You may email or fax me the information.

This closing is scheduled to take place on or about January 30, 2017, your timely response is therefore appreciated.

Very truly yours,


Anthony J. Vignier

cc: Joanne P. Carvalho VIA EMAIL ONLY

CITY OF LINDEN
APPLICATION FORM

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301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

JAN 17 2017

REQUEST FOR PUBLIC RECORDS

CLERKS OFFICE

(PLEASE PRINT)

Name: <u>Eric Hugo</u>	Date: <u>1/16/17</u>
Organization (If Applicable):	
Mailing Address: <u>324 Brook St</u>	
City, State, Zip: <u>LINDEN NJ 07036</u>	
Home/Business Phone: <u>[REDACTED]</u>	E-MAIL: <u>erichugo@Comcast.net</u>
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)

Please provide all records for house at 137 Livingston Rd Linden NJ 07036 since 1918. Also any record of underground oil tanks, soil testing, roofs, electrical work etc

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
☐ OTHER (SPECIFY)
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: _____

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 137 LIVINGSTON RD LINDEN NJ 07036

BLOCK/LOT: 261 / 13

Chelsea Libreros

From: Jennifer Honan
Sent: Tuesday, January 17, 2017 10:37 AM
To: Chelsea Libreros
Subject: FW: New OPRA - City of Linden submitted on 01/17/2017

Importance: High

Chelsea
Please see an opra received this morning.
Jenn

From: New Jersey [mailto:newjersey@openthebooks.com]
Sent: Tuesday, January 17, 2017 9:52 AM
To: Jennifer Honan <jhonan@linden-nj.org>
Subject: New OPRA - City of Linden submitted on 01/17/2017
Importance: High

01/17/2017

RECEIVED
JAN 17 2017
CLERK'S OFFICE

Jennifer Honan:

Pursuant to the OPRA, this is a request for a copy of the following records: An electronic copy of any and all employees for years of 2016, (fiscal or calendar year). Each employee record should contain the employer name, employer zip code, year of compensation, first name, middle initial, last name, hire date (mm-dd-yyyy), base salary amount, bonus amount, overtime amount, gross annual wages and position title. This data should be broken down by employer, employee and year.

The principal purpose of this is to make this information more accessible to the public and to access and disseminate information regarding the health, safety, and welfare of the general public. This request is not principally for personal or commercial benefit. Our agency is just exercising the general rights of the public. For these reasons, we are requesting a waiver of fees. If there is a charge for this service, please obtain my approval in writing prior to proceeding with request.

All documents can be e-mailed to newjersey@openthebooks.com or mailed in electronic format (preferred format would be .csv or .xls). If any documents are not provided in the format specified, please provide the state or federal statutes relied upon for that decision. If any record or portion of a record responsive to this request is contained in a record or portion of a record deemed unresponsive to the request, I would like to

inspect the entire document. Under the Open Records Act/Freedom of Information Act, all non-exempt portions of any partially-exempt documents must be disclosed. If any records or portions of records are withheld, please state the exemption on which you rely, the basis on which the exemption is invoked, and the name of the individual responsible for the decision.

Thank you for your prompt consideration of my request. If you have any questions, or if I can be of any assistance, please e-mail me at newjersey@openthebooks.com

Sincerely,

Courtney Cunningham

American Transparency

P.O. Box 970999

Boca Raton, FL 33497-0999

TY OF LINDEN
PLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

RECEIVED

JAN 17 2017

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: NORBERT SIECZKOWSKI

CLEARING OFFICE

Date: 1/17/17

Organization (If Applicable):

Mailing Address: 422 DEWITT ST.

City, State, Zip: LINDEN, NJ 07036

Home/Business Phone: [REDACTED] E-MAIL: BERTSKI17@GMAIL.COM

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

I would like to request a copy of my criminal record. I believe I was charged with a [REDACTED] in 2008/2009 but have no record of it and would like to see what I was charged with. I was also deployed to IRAQ at the time of the hearing and had a lawyer take care of the legal proceedings.

DOB: [REDACTED] Please see attached

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

LICENSE INFORMATION (SPECIFY)

SIGNATURE: Norbert S. Siczkowski

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: [REDACTED]

LOCK/LOT:

CITY OF LINDEN
 APPLICATION FORM

301 N. Wood Avenue
 City Hall, Room
 Linden, New Jersey 07036
 Telephone: (908) 474-8445
 Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

NAME:	Edward Hagan	DATE:	1-17-17
ORGANIZATION (If Applicable):	Shamrock Auto Rentals		
MAILING ADDRESS:	1118 Main Street		
CITY, STATE, ZIP:	Red Bank, N.J. 07065		
HOME/BUSINESS PHONE:	[REDACTED]	E-MAIL:	ehagan78@hotmail.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX			

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary

Can we please find out who was driving
 vehicle at the time of the incident.
 * most likely the person they arrested
 Saturday, January 14, 2017 = Thank you.
 Case # [REDACTED] # if arrest report exists please provide

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

RECEIVED

JAN 17 2017

CLERK'S OFFICE

SIGNATURE: _____

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

RECEIVED

JAN 17 2017

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

CLERK'S OFFICE

(PLEASE PRINT)

Name: <u>Sangeeta Kumari</u>	Date: <u>1/16/17</u>
Organization (if Applicable): <u>Environmental Investigations</u>	
Mailing Address: <u>PO Box 380</u>	
City, State, Zip: <u>Ledgewood NJ 07832</u>	
Home/Business Phone: <u>[REDACTED]</u>	E-MAIL: <u>reception@theenvironmentalgroup.net</u>
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
<u># See Attached</u>	
<u>reception @ the env group . net .</u>	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	

SIGNATURE: Sangeeta Kumari

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 601-721 West Linden Ave, Linden, NJ 07036

BLOCK/LOT: 469/41

The Environmental Group

Environmental Investigations, LLC

Environmental Remediations, LLC

Brown₂ Green

Facsimile: (908) 474-8451

January 16, 2017

Town Clerk
City of Linden
301 N. Wood Avenue
City Hall, Room
Linden, NJ 07036

Re: EI Project #'s: 17-004

Dear Sir or Madam:

Per ASTM Environmental Site Assessment Phase I due diligence regulations we are requesting documents for health files pertaining to spills, UST, asbestos, demolition, etc., and all construction/building permit files for the following properties:

Property Location:
601-721 West Linden Ave
Linden, NJ 07036

Lot: 41 Block: 469

Requestor Information:
Sonali Kumari
Environmental Investigations, LLC
PO Box 380
Ledgewood, NJ 07852
reception@theenvironmentalgroup.net

Sincerely,

Sonali Kumari

Sonali Kumari
Administrative Assistant

30 Years • Creative Environmental Solutions • Since 1985

NJ Office: 261 Main Street / PO Box 380 Ledgewood, NJ 07852 Phone: 973-539-4111 Fax: 973-539-4441
NY Office: 805 Third Avenue, 10th Floor New York, NY 10022 Phone: 212-688-1923 Fax: 212-688-1924

FAX COVER SHEET

TO	
COMPANY	
FAXNUMBER	19084748451
FROM	Lynn Scamazzo
DATE	2017-01-16 15:32:48 GMT
RE	17-004 OPRA 601-721 West Linden Ave, Linden, NJ

COVER MESSAGE

Good morning,

Attached is a OPRA Request for 601-721 West Linden Ave, Linden, NJ.

Best Regards,

Sonali Kumari

Administrative Assistant

The Environmental Group

Environmental Investigations, LLC

Environmental Remediations, LLC

Mailing Address: PO Box 380

Building Location: 261 Main Street

Ledgewood, NJ 07852

[REDACTED]

[REDACTED] Fax

reception@theenvironmentalgroup.net

CITY OF LINDEN
APPLICATION FORM

RECEIVED

JAN 18 2017 301 N. Wood Avenue
City Hall, Room

CLERK'S OFFICE Linden, New Jersey 07036

Telephone: (908) 474-8445

Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: *Grisela Flores*

Organization (If Applicable): *Floro Stone Realty Inc.*

Date: *1/18/17*

Mailing Address: *918 St. George Ave.*

City, State, Zip: *Roselle NJ 07208*

Home/Business Phone: [REDACTED]

E-MAIL: *Johanna@Florostone.com*

REQUEST MADE VIA: ☐ OFFICE VISIT

☐ CORRESPONDENCE

☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

*Requesting for any open permits or violations
for said property as well as
backed up taxes*

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL.

COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

LICENSE INFORMATION (SPECIFY)

NATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: *906 Mc Candless St. Linden NJ 07036*

BLK/LOT: *00121 / 00011*

RECEIVED

CITY OF LINDEN
APPLICATION FORM

JAN 18 2017

CLERK'S OFFICE

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Andre Carrasquillo	Date: 2/18/17
Organization (If Applicable):	
Mailing Address: 765 Mrtyle St	
City, State, Zip: Elizabeth NJ 07208	
Home/Business Phone: [REDACTED] E-MAIL Andre.carrasquillo84@gmail.com	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
Event - Date: 12/20/13 - CIS A POLIC Involved in Accident - Police Report Post - Date: 5/6/14	
* I Need This Police report for proof of the Accident for a Driving Job.	
☒ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL Andre.Carrasquillo84@gmail.com	
☒ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☒ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☒ LICENSE INFORMATION (SPECIFY) DOB: [REDACTED] DL # [REDACTED]	
SIGNATURE: [Signature] Andre Carrasquillo	
INFORMATION ON A SPECIFIC PROPERTY: ADDRESS:	
BLOCK/LOT:	

CLERK'S OFFICE

JAN 18 2017

RECEIVED

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

**OFFICE OF LINDEN
APPLICATION FORM**

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: <u>Jose Perez</u>	Date: <u>1/18/17</u>
Organization (If Applicable): <u>COLDWELL BANKER Residential Brokerage</u>	
Mailing Address: <u>367 Chestnut St</u>	
City, State, Zip: <u>Union, NJ 07083</u>	
Home/Business Phone: <u>[REDACTED]</u>	E-MAIL: <u>JPerez@TOPPRODUCER.COM</u>
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

I Like to HAVE A COPY OF TAX CARD
I Like to HAVE A COPY OF ALL OPEN & closed permits
I Like to HAVE A COPY OF certificate of compliance
Address: 707 CLARK St, LINDEN, NJ 07036

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
- ☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
- ☒ SEND RESPONSE BY E-MAIL
- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
- ☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
- ☐ OTHER (SPECIFY)
- ☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 707 CLARK Street, LINDEN, NJ 07036
BLOCK/LOT: Block: 183 Lot: 03

Application Form
REQUEST FOR PUBLIC RECORDS

City Hall, Room #105
Linden, New Jersey 07036
Telephone: (908) 474-8452
Fax: (908) 474-8451

RECEIVED

LINDEN BOARD OF HEALTH
City Hall, Room #5
Linden, New Jersey 07036

Telephone: (908) 474-8409
Fax: (908) 474-1836

JAN 18 2017

CLERK'S OFFICE

Please Print)

Name: Rimeo C. Poulson Date: 1-18-16

Organization (If Applicable): N/A

Mailing Address: 1424 McCandless St

City, State, Zip: Linden NJ 07036

Home/Business Phone: [REDACTED] Fax: [REDACTED]

Request Made Via: ☐ Office Visit ☐ Correspondence ☐ Fax

DESCRIBE RECORD(S) BEING REQUESTED (be specific):

March/April - 2015 - Call for leaking ceiling
landlord refused to repair

Dec - 2016 - plumbing issues

☐ Copy of Minutes (Specify Board or entity, date, topic or other identifying information)

☒ Copy of Ordinance or Resolution (Specify Date, Number or other Identifying information)

☒ Other (Specify) Report of Inspectors Observations

☐ License Information (Specify)

Information on a Specific Property:
Address: _____ Block/Lot: _____

BOARD OF HEALTH USE ONLY		Signature
Date:	Collected By:	
Pages Distributed:	Fee Collected:	

Count Jan 24, 2017

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: BERNADETA CODEK Date: 01.19.2017
Organization (If Applicable): REMAX 1ST ADVANTAGE
Mailing Address: 727 KARITAN RD,
City, State, Zip: CLARK NJ 07066
Home/Business Phone: [REDACTED] E-MAIL: BERNADETA.E.CODEK@GMAIL.COM
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

PERMIT HISTORY FROM 1920 TO PRESENT

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

RECEIVED

JAN 10 2017

CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: B. CODEK

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 300 W. CURTIS ST.

BLOCK/LOT: 277 / 7

Chelsea Libreros

From: Jennifer Honan
Sent: Wednesday, January 18, 2017 1:29 PM
To: Chelsea Libreros
Cc: cblanding@smartprocure.us
Subject: FW: SmartProcure OPRA Request City of Linden For PO/Vendor Information
Attachments: Edmunds and Associates Sample Reports.pdf

Chelsea

Please process this as a new opra. After speaking with Curt yesterday, I believe this was one that was stuck in limbo with Vivian leaving.

Thank You
Jenn

RECEIVED

JAN 19 2017

CLERK'S OFFICE

From: Curtis Blanding [mailto:cblanding@smartprocure.us]
Sent: Tuesday, January 17, 2017 3:23 PM
To: Jennifer Honan <jhonan@linden-nj.org>
Subject: Fwd: SmartProcure OPRA Request City of Linden For PO/Vendor Information

Good Afternoon Jennifer,

Thank you very much for taking the time to speak with me over the phone today in regards to our request. I have forwarded our original request to you below.

The reports from Edmunds & Associates that can be used to fulfill our request are the "Purchase Order Listing by P.O. Number (Please ensure Format: Detail with Line Item Notes is included) as well as the "Vendor Listing by Vendor Id" report. For your reference, I have attached to this email samples of these reports.

I appreciate your attention to this matter and should you have any questions or concerns, please do not hesitate to reach out to me.

Best Regards,

Curtis Blanding
Data Acquisition Specialist
SmartProcure
Direct: [REDACTED] Support: [REDACTED]
Email: cblanding@smartprocure.us | www.smartprocure.us
700 W. Hillsboro Blvd. Suite 4-100, Deerfield Beach, FL 33441

----- Forwarded message -----

From: cblanding@smartprocure.us
Subject: SmartProcure OPRA Request City of Linden For PO/Vendor Information
Date: Dec 15, 2016 at 04:08:15 PM
To: jhonan@linden-nj.org

Dear Jennifer or Custodian of Public Records,

SmartProcure is submitting an OPRA request to the City of Linden for any and all purchasing records from 2016-09-02 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 City of Linden 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=CityofLinden>

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

If you have any questions, please feel free to respond to this email or I can be reached at [REDACTED]

Regards,

Curtis Blanding

Data Acquisition Specialist

SmartProcure

Direct: [REDACTED] Supp: [REDACTED]

Email: cblanding@smartprocure.us | www.smartprocure.us

700 W. Hillsboro Blvd. Suite 4-100, Deerfield Beach, FL 33441.

CITY OF LINDEN
APPLICATION FORM

~~NOT POSTED~~

~~JAN 17 2017~~

~~CLERK'S OFFICE~~

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

EASE PRINT)

Name: ROBIN MARTINOS

Date: 1-16-17

Organization (If Applicable): CONSTRUCTION JOURNAL

Mailing Address: 400 SW 7TH ST

City, State, Zip: STUART FL 34994

Home/Business Phone: [REDACTED] E-MAIL r.martinos@thecl.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

SEE ATTACHED

RECEIVED

JAN 19 2017

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

CLERK'S OFFICE

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

1 COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

1 COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY) REDEVELOPMENT OF ONE PARCEL WITHIN THE CITY

PLEASE VERIFY DUE DATE AND PROVIDE ESTIMATE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Robin Martinos

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

Chelsea Libreros

From: Robin Martinos <R.Martin@constructionjournal.com>
Sent: Wednesday, January 18, 2017 9:20 AM
To: Chelsea Libreros
Subject: FW: OPRA REQUEST
Attachments: doc04847220170117110123.pdf

United Lacquer Redevelopment Area shown on the City tax map as Block 423, Lot 4.02, 1001 W. Elizabeth Avenue, consisting of approximately 2.72 acres.

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

From: Chelsea Libreros [mailto:CLibreros@linden-nj.org]
Sent: Tuesday, January 17, 2017 10:58 AM
To: Robin Martinos <R.Martin@constructionjournal.com>
Subject: FW: OPRA REQUEST

Good Morning,

Attached please find a photo copy of your request that was received by the City Clerk's Office today, Tuesday, January 17, 2017.

Can you please specify what parcel within the city you are looking for in regards to your OPRA request. Without this information I cannot begin the process of obtaining information for your response.

Thank you in advance for your cooperation.

Best,
Chelsea Libreros-Cortes
Part-Time Clerk 1

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

From: LindenClerkScanner@linden-nj.org [mailto:LindenClerkScanner@linden-nj.org]
Sent: Tuesday, January 17, 2017 11:01 AM
To: Chelsea Libreros
Subject:

CS 5501i
[00:c0:ee:3f:44:8d]

Chelsea Libreros

From: Chelsea Libreros
Sent: Tuesday, January 17, 2017 10:58 AM
To: 'r.martinos@thecj.com'
Subject: FW: OPRA REQUEST
Attachments: doc04847220170117110123.pdf

Good Morning,

Attached please find a photo copy of your request that was received by the City Clerk's Office today, Tuesday, January 17, 2017.

Can you please specify what parcel within the city you are looking for in regards to your OPRA request. Without this information I cannot begin the process of obtaining information for your response.

Thank you in advance for your cooperation.

Best,
Chelsea Libreros-Cortes
Part-Time Clerk 1

~~Original Message~~

From: LindenClerkScanner@linden-nj.org [mailto:LindenClerkScanner@linden-nj.org]
Sent: Tuesday, January 17, 2017 11:01 AM
To: Chelsea Libreros
Subject:

CS 5501i
[00:c0:ee:3f:44:8d]

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Joseph M Lipscomb Date: 1-20-2017
Organization (If Applicable): ML Realty Group LLC
Mailing Address: 15942 2nd Street
City, State, Zip: Scotch Plains, NJ 07076
Home/Business Phone _____ E-MAIL ML.Realtygroup@att.net
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

623 North Wood Ave.
1) when was last electrical box inspection
2) when was last bldg inspection
3) last fire inspection of bldg - results } include report

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

RECEIVED

JAN 20 2017

CITY OF LINDEN

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Joseph M Lipscomb

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 623 North Wood Ave.

BLOCK/LOT: _____

**CITY OF LINDEN
APPLICATION FORM**

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Sunil Antony	Date: 01/20/2017
Organization (If Applicable): American Tax Reporting	
Mailing Address: #2727 LBJ Freeway Suite 420	
City, State, Zip: Dallas TX 75234	
Home/Business Phone: [REDACTED]	E-MAIL: cls@slkgroup.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

Please advise if there are any open code violations; Open/expired building permits for the below mentioned property:

Address: 925 East Blancke Street Linden NJ 07036

Parcel: BLOCK: 110 LOT: 6

Ref#: 539739

Fax: 888-908-3471

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Sunil Antony

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 925 East Blancke Street Linden 07036

BLOCK/LOT: BLOCK: 110 LOT: 6

**CITY OF LINDEN
APPLICATION FORM**

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: <u>Melissa Marte</u>	Date: <u>01/20/2017</u>
Organization (If Applicable): <u>Partner Engineering & Science</u>	
Mailing Address: <u>10 Mountainview Road</u>	
City, State, Zip: <u>Upper Saddle River, NJ</u>	
Home/Business Phone: <u>[REDACTED]</u>	E-MAIL: <u>mmarte@partneresi.com</u>
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)

19 E Elizabeth Avenue, Linden, NJ (Block: 200, Lot: 27)

Please forward to following Departments: Building, Clerk Health, Construction, Engineering, Fire, Licensing, Tax Assessor, Zoning

Pursuant to the Freedom of Information Law, please forward available records regarding Underground/Aboveground Storage Tanks (USTs/ASTs), Oil Tank Closure Records/Testing/Reports, Spill Records, Remediation Sites, Previous Subsurface Investigations, Dump Sites, Certificate of Occupancy, Building Permits Contamination, Water Quality, Storage of Hazardous Material, Hazardous Material Activities, Asbestos, Lead Poisoning or Lead-Based Paint, Mold Growth or any other information that relates to the environmental condition regarding the above referenced property to us as soon as possible. Please let me know if there are any costs associated with this request prior to processing same. Your response can either be faxed or mailed or e-mailed to us at the fax number and/or location identified above. If you have any questions, please call me. Thank you for your attention to this matter.

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL and please call me
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
☐ OTHER (SPECIFY)
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 19 E Elizabeth Avenue, Linden, NJ

BLOCK/LOT: (Block: 200, Lot: 27)

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: Millicent Copes-Adams Date: 1/23/17
Organization (If Applicable): _____
Mailing Address: 823 Middlesex St
City, State, Zip: Linden NJ 07036
Home/Business Phone: [REDACTED] E-MAIL: madams@weichert.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Requesting List of Foreclosures and the Foreclosure
From September 2016 - January 23, 2017
OR Access to view if listed on websites

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL
madams@weichert.com

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

RECEIVED

JAN 23 2017

CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Millicent Copes-Adams
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: _____
BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Charles J. Denis Date: 1/23/17

Organization (If Applicable):

Mailing Address: 314 Ashton Ave

City, State, Zip: Linden NJ 07036 CharlesJ.Denis@aol.com

Home/Business Phone: [REDACTED] E-MAIL CharlesJ.Denis@aol.com

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

House inspection of 314 Ashton Ave Linden NJ, November 2016

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

RECEIVED

JAN 23 2017

CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Charles J. Denis

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 314 Ashton Ave Linden NJ 07036

BLOCK/LOT: _____

ITY OF LINDEN
PPPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

EQUEST FOR PUBLIC RECORDS

LEASE PRINT)

Name:	Pam LaPlante	Date:	1/23/2017
Organization (If Applicable):	Elite Property Rersearch		
Mailing Address:	3569 Cortez Rd W #110		
City, State, Zip:	Bradenton, FL 34210		
Home/Business Phone	[REDACTED]	E-MAIL	pam@elitepropertyresearch.com
REQUEST MADE VIA:	☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX		

DESCRIPTION OF PUBLIC RECORD(S):
Please be specific and attach additional pages of information if necessary)
I am requesting information on any open or expired building permits and any outstanding code violations. Also, balance/past due balance and payoff information (incl address) for sewer and garbage utilities on the following property:
906 McCandless St
Linden, NJ 07036
block 121 lot 11

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
☐ OTHER (SPECIFY)

RECEIVED
JAN 23 2017
CLERK OF SUPERIOR COURT

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Pam LaPlante
NFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 906 Mc Candless St
BLOCK/LOT: block 121 lot 11

**CITY OF LINDEN
APPLICATION FORM**

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Pam LaPlante Date: 1/23/2017

Organization (If Applicable): Elite Property Research

Mailing Address: 3569 Cortez Rd W #110

City, State, Zip: Bradenton FL 34210

Home/Business Phone: [REDACTED] E-MAIL pam@elitepropertyresearch.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX
X

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

I am requesting information on any open or expired permits and any code violations on the following property.
Additionally, I am requesting balance/past due balance and payoff information for the sewer and garbage pick up
for this location.

203 Main St

Linden, NJ 07036

Block 571 lot 4

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Pam Laplante

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 203 Main St Linden NJ 07036

BLOCK/LOT: 571 4

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: John LaGraca Date: 1/23/2017
Organization (If Applicable):
Mailing Address: 216 E. Price St
City, State, Zip: Linden, NJ 07036
Home/Business Phone: E-MAIL: GRECO2255@GMAIL.COM
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Permit History for 216 E. Price St.
open & closed
history of an oil tank.

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)
RECEIVED
JAN 23 2017
CLERK'S OFFICE
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 216 E. Price St. Linden
BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

RECEIVED

JAN 23 2017

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

CLERK'S OFFICE

(PLEASE PRINT)

Name: JOHN ZAWOYSKI Date: 1/19/2017
Organization (If Applicable): _____
Mailing Address: 518-7 OLD POST RD #105
City, State, Zip: EDISON, NJ 08817
Home/Business Phone: _____ E-MAIL JZACK26@yahoo.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary) *(construction dept.)*
Copies of any CO - temporary permits for property
location 1601 W. Blanche St. ~~from~~ either Benzino LLC or
Everest Mulaaj or?

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☐ SEND RESPONSE BY E-MAIL
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
☐ OTHER (SPECIFY)

Send VIA eMail to: JZACK26@yahoo.com

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: *[Signature]*

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: _____
BLOCK/LOT: _____

ITY OF LINDEN
PPPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

EQUEST FOR PUBLIC RECORDS

LEASE PRINT)

Name: <u>Anne Sank</u>	Date: <u>1/23/17</u>
Organization (If Applicable): <u>Prominent Properties S/R</u>	
Mailing Address: <u>200 North Avenue, East</u>	
City, State, Zip: <u>Westfield, NJ 07090</u>	
Home/Business Phone: <u>[REDACTED]</u>	E-MAIL: <u>asankdavis@gmail.com</u>
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)

Please provide information regarding all CLOSED and OPEN
permits on
2842 Verona Avenue

Thank you.

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL
ASANKDAVIS@GMAIL.COM

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 2842 VERONA AVENUE

BLOCK/LOT: 00359/00051

CITY OF LINDEN
 APPLICATION FORM

RECEIVED

JAN 23 2017

301 N. Wood Avenue
 City Hall, Room
 Linden, New Jersey 07036
 Telephone: (908) 474-8445
 Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS/CLERK'S OFFICE

(PLEASE PRINT)

Name: ROBERT HANTMAN, ESQ. Date: 1-19-17
 Organization (If Applicable): HANTMAN AND ASSOCIATES
 Mailing Address: 1120 AVENUE OF THE AMERICAS 4TH FL.
 City, State, Zip: NEW YORK NY 10036
 Home/Business Phone: MAIL RHANTMAN@HANTMANLAW.COM
 REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
 Please be specific and attach additional pages of information if necessary
 ALL E-MAILS, CORRESPONDENCE, EXHIBITS AND ANY RECORDS
 OF ANY NATURE WHATSOEVER FROM ALL DEPARTMENTS,
 AGENCIES, EMPLOYEES AND BOARDS, TO, FROM, OR CONCERNING
 HOMAS MADDEN, COMPLAINTS TO THE CITY CONCERNING
 LINDEN AIRPORT AND/OR ITS EMPLOYEES, AND LINDEN AIRPORT
 TOL, FROM JAN 1, 2015 TO DATE.

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☐ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

RECEIVED

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

JAN 23 2017

CLERK'S OFFICE

(PLEASE PRINT)

Name: Nancy Repetto Date: January 22, 2017
Organization (If Applicable): EBI Consulting
Mailing Address: 6876 Susquehanna Trail S
City, State, Zip: York, PA 17403 nrepetto@ebiconsulting.com
Home/Business Phone: [REDACTED] E-MAIL: reresearchgroup@ebiconsulting.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary) For the property located at 350 Cantor Avenue
(Block, 421, Lot 72), the following as applicable: current and historical building permits and certificates of occupancy, dates of public water and sewer connection,
installation or removal of storage tanks (above and underground), hazardous materials storage or release, hazardous waste generation or discharge, asbestos or
lead based paint abatement.

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Kim Holland on behalf of Nancy Repetto

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

Email to Fax Delivery

To: 19084748451
From: reresearchgroup@ebiconsulting.com
Date: January 22, 04:06:59 PM EST
Subj: OPRA request
Pages: 2

Disclaimer

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CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

RECEIVED
JAN 24 2017
CLERKS OFFICE

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

PLEASE PRINT)

Name: Sunil Antony	Date: 01/24/2017
Organization (If Applicable): American Tax Reporting	
Mailing Address: #2727 LBJ Freeway Suite 420	
City, State, Zip: Dallas TX 75234	
Home/Business Phone: [REDACTED]	E-MAIL: cts@slkgroup.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Please advice if there are any open code violations; Open/expired building permits
for the below mentioned property:
Address: 207 MCCANDLESS STREET, LINDEN NJ 07036
Parcel: BLOCK: 143 LOT: 3
Ref#: 540752

Fax: 888-908-3471

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☐ SEND RESPONSE BY E-MAIL
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
☐ OTHER (SPECIFY)
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Sunil Antony

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 207 MCCANDLESS STREET, LINDEN NJ 07036

BLOCK/LOT: BLOCK: 143 LOT: 3

FAX

Date:	01/24/2017
Pages including cover sheet:	2

To:	9084748451@rcfax.com
Phone	
Fax Number	(908) 474-8451

From:	SLK Group
	American Tax Reporting
	2727 LBJ Freeway
	Dallas
	TX 75234
Phone	
Fax Number	(888) 908-3471

NOTE:	
Fax-9084748451	

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: Antonieta Mexico Date: 1/24/17
Organization (If Applicable):
Mailing Address: 7610 134th Ave
City, State, Zip: Brooklyn, NY 11228
Home/Business Phone: [REDACTED] E-MAIL law@attorneysmexico.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Amherdall -
Open & Close permits from 2000 to date
including but limited to:
(demo, new construction, electrical, plumbing, sprinkler etc.)

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
- ☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
- ☐ SEND RESPONSE BY E-MAIL
- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
- ☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

RECEIVED
JAN 24 2017
CLERK'S OFFICE

- ☐ OTHER (SPECIFY)
- ☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 401 Roselle Street, Linden
BLOCK/LOT: 173 / 1.01

CITY OF LINDEN
APPLICATION FORM

RECEIVED
JAN 24 2017
CLERK'S OFFICE

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: JOSE CASTANON Date: 1/24/17
Organization (If Applicable): Professional CLAIMS solutions
Mailing Address: 4 Industrial way west
City, State, Zip: Eatontown, NJ 07724
Home/Business Phone: [REDACTED] E-MAIL JCASTANON@PROCLAIMSOLUTIONS.COM
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

- IN reference to your police report (CASE # [REDACTED])
*we need a copy of the photographs/diagram indicated in the report
*we also need a copy of the DVD indicated in the report
(video surveillance of scene)

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
- ☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
- ☐ SEND RESPONSE BY E-MAIL
- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
- ☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
- ☐ OTHER (SPECIFY)
- ☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:
BLOCK/LOT:

TOWN OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: Marco Ortiz (SS# [REDACTED]) Date: January 25, 2017
Organization (If Applicable):
Mailing Address: 439 saint andreas place
City, State, Zip: Manalapan NJ 07726
Home/Business Phone: [REDACTED] E-MAIL marcoortiz@gmail.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
Please be specific and attach additional pages of information if necessary
I was arrested in Linden nj one time. I need the arrest papers.
Route 9 north, 2013.

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

RECEIVED
JAN 25 2017
CLERK'S OFFICE

☐ OTHER (SPECIFY)
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:
BLOCK/LOT:

**TOWN OF LINDEN
APPLICATION FORM**

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

RECEIVED
JAN 26 2017
CLERK'S OFFICE

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Jasmine Ramos	Date: 1/25/2017
Organization (If Applicable): Century 21 Alliance Realty	
Mailing Address: 867 N Stiles St	
City, State, Zip: Linden NJ 07036	
Home/Business Phone: [REDACTED]	E-MAIL: jasmineireneramos@gmail.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

I am requesting to see if the property 345 Amon Terr in Linden NJ 07036 has any open permits, Any records of Oil Tanks.

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
☐ OTHER (SPECIFY)
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: *Jasmine Ramos*

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 345 Amon Terr Linden NJ 07036

LOCK/LOT: 421 block lot 29

RECEIVED

JAN 26 2017

CITY OF LINDEN
APPLICATION FORM

CLERK'S OFFICE

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Justin Kilszek	Date: 1/26/17
Organization (If Applicable): Keller Williams Metropolitan	
Mailing Address: 55 Madison Ave. Morristown, NJ 07960	
City, State, Zip:	
Home/Business Phone: [REDACTED]	E-MAIL: Lauren@agentjustin.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	
Fax: 973-306-3620	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
Please advise on any open code violations on 1122 Stuart Pl including fire, health, and building.	
Thank you	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE:	

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1122 Stuart Pl.

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Valerie Daberkoo Date: 1/26/17

Organization (If Applicable): EnviroSure, Inc.

Mailing Address: 319 South High Street, 18th Floor

City, State, Zip: West Chester, PA 19382

Home/Business Phone: E-MAIL: valerie@envirosureinc.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX ☒ Email

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

Envirosure is conducting a Phase I ESA at 501 West Edgar Road. In that regard, we are requesting a search of all files pertaining to the property. Especially, underground storage tanks, environmental concerns and ownership records.

☒ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL Please email if able.

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

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JAN 26 2017

☐ LICENSE INFORMATION (SPECIFY)

CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 501 West Edgar Road (Hampton Inn)

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

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Paid
complete

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: Joseph L. Wright Jr. Date: 1-26-2017
Organization (If Applicable):
Mailing Address: P.O. Box 5874
City, State, Zip: Somerset NJ 08873
Home/Business Phone: [REDACTED] E-MAIL: J3ASSOCIATES@COMCAST.NET
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Request copy of Application for license
of FALLUW BARE REST
854 Ganges Ave

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
- ☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
- ☐ SEND RESPONSE BY E-MAIL
- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
- ☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
- ☐ OTHER (SPECIFY)
- ☐ LICENSE INFORMATION (SPECIFY)

RECEIVED
JAN 26 2017
CLERK'S OFFICE

SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:
BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

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JAN 26 2017

CITY CLERK'S OFFICE

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name:	Jasmine Ramos	Date:	1/25/2017
Organization (If Applicable):	Century 21 Alliance Realty		
Mailing Address:	867 N Stiles St		
City, State, Zip:	Linden NJ 07036		
Home/Business Phone:	[REDACTED]	E-MAIL:	jasmineireneramos@gmail.com
REQUEST MADE VIA:	☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX		

DESCRIPTION OF PUBLIC RECORD(S):

Please be specific and attach additional pages of information if necessary)

I am requesting to see if there are any open permits open in regards to the property 544 Jackson Ave Linden NJ 07036. Also any records of oil ta

- ☒ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
- ☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
- ☒ SEND RESPONSE BY E-MAIL

- ☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
- ☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Jasmine Ramos
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 544 Jackson Ave Linden NJ 07036
BLOCK/LOT: Block 164 Lot 11

**CITY OF LINDEN
APPLICATION FORM**

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS**PLEASE PRINT)**

Name: Andy James

Date: 01/27/2017

Organization (If Applicable): American Tax Reporting

Mailing Address: #2727 LBJ Freeway Suite 420

City, State, Zip: Dallas TX 75234

Home/Business Phone: [REDACTED] E-MAIL: cls@slkgroup.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX**DESCRIPTION OF PUBLIC RECORD(S):**

Please be specific and attach additional pages of information if necessary)

Please advise if there are any open code violations; Open/expired building permits
on the below mentioned property:

Address: 345 Amon Terrace, Linden NJ 07036

Parcel: BLOCK: 421 LOT: 29

Ref #: 527380

Fax: 888-908-3471

☒ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE☒ SEND RESPONSE BY E-MAIL☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)☐ OTHER (SPECIFY)☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Andy James

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 345 Amon Terrace, Linden NJ 07036

BLOCK/LOT: BLOCK: 421 LOT: 29

CITY OF LINDEN
APPLICATION FORM301 N. Wood Avenue
City Hall, Room #105
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: IBRAHIM HUGHES

Date: 1/30/17

Organization (If Applicable):

Mailing Address: 188 JEFFERSON ST - #304

City, State, Zip: NEWARK, NJ 07105

Home/Business Phone [REDACTED]

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):

(Please be specific and attach additional pages of information if necessary)

Hi, I am requesting copies of all " Notice of Intent to Foreclose" letters

that have been filed with the townships Tax collector (NOT the City Clerk) for the property at 1223 W Baltimore Avenue (Block 103, Lot 6)

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)☐ OTHER (SPECIFY)

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JAN 30 2017

CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: *Ibrahim Hughes*

BLOCK/LOT: 103/6

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Annette malin-Jones	Date: January 30, 2017
Organization (If Applicable): C21 Ratzman	
Mailing Address: 203A Chestnut Street	
City, State, Zip: Roselle, NJ 07203	
Home/Business Phone	E-MAIL jonesann4@gmail.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary) Please provide any / all open permits, CO inspections and oil tank details for the last 15 years for: 111 Swarthmore Road, Linden NJ	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE: <i>Annette Malin-Jones</i>	
INFORMATION ON A SPECIFIC PROPERTY: ADDRESS: 111 Swarthmore Road - Linden, NJ	
BLOCK/LOT: 00270 / 00021	

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JAN 30 2017

CLERK'S OFFICE

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 0703
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: Joe Garba Kimberlyn Hudson Date: 1/30/16
Organization (If Applicable):
Mailing Address: 803 Laurita Street
City, State, Zip: Linden, NJ 07036
Home/Business Phone: MAIL deliella@gmail.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Copy of Complaint I made in August of 2015
on Nyisha Johnson for [redacted]
Complaint made by - Kimberlyn Hudson - Garba
[redacted] \$
JOE GARBA [redacted]

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☐ SEND RESPONSE BY E-MAIL
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
☐ OTHER (SPECIFY)
☐ LICENSE INFORMATION (SPECIFY)

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JAN 31 2017
CLERK'S OFFICE

SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:
BLOCK/LOT:

ITY OF LINDEN
PPPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Kimberly Taylor Date: 1/30/17

Organization (If Applicable): 1010 Well Bunker Residential BRRG.

Mailing Address: 145 MARLEWOOD AVE

City, State, Zip: MARLEWOOD, NJ 07040

Home/Business Phone: [REDACTED] E-MAIL: KIMBERLY@CBMOVES.COM

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)

OPEN/CLOSED PERMIT SEARCH
OIL TANK REMEDIATION SEARCH

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

RECEIVED
JAN 31 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1424 HUSSA ST, LINDEN, NJ 07036

BLOCK/LOT: B: 47 L: 5

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: Kimberly Taylor Date: 1/30/17
Organization (If Applicable): Crowell BANNER RESIDENTIAL BRRB.
Mailing Address: 145 MAPLEWOOD AVE
City, State, Zip: MAPLEWOOD NJ 07040
Home/Business Phone: [REDACTED] E-MAIL: Kimberly.Taylor@CBMINDS.COM
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Open / Closed Permit Search
Oil Tank Remediation Search

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY; DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

RECEIVED
JAN 31 2017
CLERK'S OFFICE

☐ OTHER (SPECIFY)
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 631 E. Elm St, Linden, NJ 07036
BLOCK/LOT: B1 154 L18

Y OF LINDEN LOCATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

QUEST FOR PUBLIC RECORDS

ASE PRINT)

ne: Vincent R. Glorisi, Esq.

Date: 1-30-17

anization (If Applicable):

ling Address: 1816 Englishtown Rd, Suite 104

, State, Zip: Old Bridge, NJ 08857

me/Business Phone: [REDACTED] E-MAIL: [REDACTED] Fax: 732-251-1339

QUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

SCRIPTION OF PUBLIC RECORD(S):

ase be specific and attach additional pages of information if necessary)

ed copy of run report from [REDACTED] who came to
e scene of the accident.

A. [REDACTED]
ie No. [REDACTED]
ven Sussie Hudekpor-Torta

INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)

OTHER (SPECIFY)

RECEIVED

JAN 31 2017

CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

GNATURE:

FORMATION ON A SPECIFIC PROPERTY:

DDRESS:

OCK/LOT: