

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: VESELIN VUJOSEVIC	Date: 2-1-2017
Organization (If Applicable):	
Mailing Address: 590 ARUNATON AVE	
City, State, Zip: PHILLIPSBURG, NJ 08865	
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)
I WAS [REDACTED] AT UNCLE CHARLIE'S GOGO BAR IN
LINDEN IN DECEMBER 1980 ON A [REDACTED]
[REDACTED] CHARGE. I NEED A COPY OF THE
OUTCOME AND A COPY OF [REDACTED]
IF POSSIBLE.
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)

RECEIVED
FEB 01 2017
CLERK'S OFFICE

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

CITY OF LINDEN
APPLICATION FORM

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301 N. Wood Avenue
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Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: FANNY R. LOOK

Date: 2/1/17

Organization (If Applicable):

Mailing Address: 2181 ST. GEORGES AVE.

City, State, Zip: RAHWAY N.J.

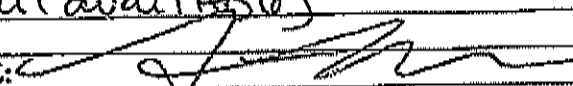
Home/Business Phone: (908) 474-8445 MAIL FANUSKA84@GMAIL.COM

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

DUI, DEC 30, 2005 (Date/year may be off by one date/year or so). Please provide full police report. IF possible, please include any paperwork that indicates all fines showing as paid and all sentence requirements fulfilled/met.

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE☒ SEND RESPONSE BY E-MAIL FANUSKA84@GMAIL.COM
LOOKFA@VBHC.RUTGERS.EDU☒ 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) Suspension and reinstatement
(if at all available)SIGNATURE:  2/1/17

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: LINDEN, NJ.

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS OFFICE

(PLEASE PRINT)

Name: Justin Kilszek	Date:
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	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
Please advise on any open code violations on 46 W 17th St. 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: 46 W 17th St.

BLOCK/LOT:

TY OF LINDEN
PLICATION FORM

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Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

EASE PRINT)

Name: Abraham Zagelbaum Date: Feb 1, 2017
Organization (If Applicable): 550 Union Street Holdings LLC
Mailing Address: 5308 13th Ave Suite #126
City, State, Zip: Brooklyn, NY 11219
Home/Business Phone: [REDACTED] E-MAIL: Abe@argylemgmt.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX 973 564 0015

DESCRIPTION OF PUBLIC RECORD(S):

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

Certificate of Occupancy
record of open violations.

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

CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: ~~550 Union St~~ 550-552 Union Street Linden, NJ 07036
BLOCK/LOT: B:166 L:13

CITY OF LINDEN
APPLICATION FORM

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Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Ana Stoilov

Date: 02/02/17

Organization (If Applicable):

Mailing Address: 323 Mitchell Ave

City, State, Zip: Linden, NJ 07036

Home/Business Phone: [REDACTED] MAIL anabarokova@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)

Every Police Report of [REDACTED] on 323 Mitchell Ave, Linden, NJ
under the names of Nikolay Stoilov (DOB [REDACTED]) and [REDACTED]
Ana Stoilov (victim, DOB [REDACTED])
between 01/01/2016 and 12/31/2016

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Ana Stoilov

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
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REQUEST FOR PUBLIC RECORDS
CLERK'S OFFICE

PLEASE PRINT)

Name:	Joshua Zielinski	Date:	January 23, 2017
Organization (If Applicable):	McElroy, Deutsch, Mulvaney & Carpenter, LLC		
Mailing Address:	570 Broad Street, 15th Floor		
City, State, Zip:	Newark, New Jersey, 07102		
Home/Business Phone	[REDACTED]	E-MAIL	jzielinski@mdmc-law.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 and all documents and records, including electronically stored information in your possession or control, submitted in relation to the physical structures that are situated on the following blocks and lot numbers, including but not limited to any plans, proposals, agreements and correspondence.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

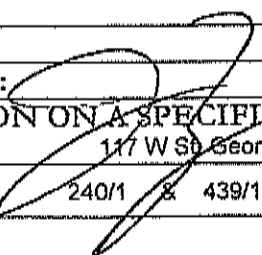
☒ SEND RESPONSE BY E-MAIL

☐ 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: 117 W St Georges Avenue & 701 E Edgar Road

BLOCK/LOT: 240/1 & 439/13

**CITY OF LINDEN
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REQUEST FOR PUBLIC RECORDS**PLEASE PRINT)**

Name: Sharon Ritchie		Date: 02/02/2017
Organization (If Applicable): American Tax Reporting		
Mailing Address: 2727 LBJ Freeway, Suite 420		
City, State, Zip: Dallas, TX 75234		
Home/Business Phone	E-MAIL	Cls@silkgroup.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 check and advise

- 1) if there are any open code violation
- 2) Any open or expired permits
- 3) Any special assessments due/citations like tall grass, weeds/Liens

Address: 710 McCandless Street Linden NJ 07036	Block: 123 Lot: 13	Owner: NORVELL, KATHLEEN
File#: 543080		
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)		
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE		
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- ☐ 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)

For below mentioned property address please check and advise if there are any open code violations /open or expired building building permits which needs inspections to close the cases as well as if there any liens or citations like tall grass, weeds, debris, junks with the due date of 02/28/2017.

☐ LICENSE INFORMATION (SPECIFY)**SIGNATURE:****INFORMATION ON A SPECIFIC PROPERTY:****ADDRESS:** 710 McCandless Street Linden NJ 07036**BLOCK/LOT:** Block: 123 Lot: 13

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CLERK'S OFFICE

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REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: ROBIN MARTINOS	Date: +26-17 2-6-17
Organization (If Applicable): CONSTRUCTION JOURNAL	
Mailing Address: 400 SW 7TH ST	
City, State, Zip: STUART FL 34994	
Home/Business Phone: [REDACTED] MAIL R.martinos@theoj.com	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

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

RECEIVED

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☒ OTHER (SPECIFY) REDEVELOPMENT OF TWO PARCELS PROPOSALS OPENED 1-12-17

PLEASE PROVIDE COPY OF LIST OF RESPONDENTS

United Laquer &

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Robin Martinos

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:
BLOCK/LOT: 423 / 4.02 1001 W. Elizabeth Avenue.
496 / 3 Beddle Pl, North & Park Avenue

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REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: ROBIN MARTINOS

Date: 1-26-17 2-6-17

Organization (If Applicable): CONSTRUCTION JOURNAL

Mailing Address: 400 SW 7TH ST

City, State, Zip: STUART FL 34994

Home/Business Phone: [REDACTED] MAIL r.martinos@theoj.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

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FEB 05 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

☐ 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) RECONSTRUCTION OF CURBING & SIDEWALK IN VARIOUS STREETS
BIDS OPENED 11-10-17

PLEASE PROVIDE COPY OF BID TABULATION

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Robin Martinos

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

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: Marla Crowley Date: 2/6/17
Organization (If Applicable): _____
Mailing Address: 2810 Morris Ave Sec 302
City, State, Zip: Union NJ 07083
Home/Business Phone: [REDACTED] E-MAIL: Contact Marla Today @ 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)

Status of oil tank at 116 West Gibbons Street Linden

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

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☐ 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: _____

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 116 West Gibbons Street

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>ROBIN MARTINOS</u>	Date: <u>1-26-17 2-6-17</u>
Organization (If Applicable): <u>CONSTRUCTION JOURNAL</u>	
Mailing Address: <u>400 SW 7TH ST</u>	
City, State, Zip: <u>STUART FL 34994</u>	
Home/Business Phone: <u>[REDACTED]</u> MAIL <u>R.martinos@theaj.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)

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

☒ OTHER (SPECIFY) ENGINEERING SERVICES AND ENVIRONMENTAL SERVICES AT THE LINDEN LANDFILL
QUALIFICATIONS OPENED 1-17-17

PLEASE PROVIDE COPY OF LIST OF RESPONDENTS

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Robin Martinos

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

CITY OF LINDEN
APPLICATION FORM

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Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: MONIK DOPART Date: 2/6/17
Organization (If Applicable):
Mailing Address: 16 JEFFERSON ST
City, State, Zip: NOTLEY, NJ 07110
Home/Business Phone: [REDACTED] E-MAIL: namonia75@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)

POLICE REPORT OF ARREST 4/19/2006

PAWEL DOPART 3/18/76

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: *Wendie Roper*
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:
BLOCK/LOT:

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CLERK'S OFFICE

ITY OF LINDEN
PPPLICATION FORM

301 N. Wood Avenue
City Hall, Room
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Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

LEASE PRINT)

Name: Ana Augusto Date: 2/6/17
Organization (If Applicable): _____
Mailing Address: 26 W. Price St.
City, State, Zip: Linden, NJ 07036
Home/Business Phone: _____ E-MAIL Boneca2696@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)

Requesting any/all permits for the past 6 years for
residence at 350 Livingston Rd. in Linden
Any open or closed permits and any violations

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

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FEB 14 2017
CLERK OF BOARD
- ☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Ana Augusto
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: _____
BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Bianca Camas Date: February 6, 2016
Organization (If Applicable): _____
Mailing Address: 1041 Husa Street
City, State, Zip: Linden NJ 07036
Home/Business Phone: [REDACTED] E-MAIL twilight0483@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)

All permits for work done on the house.

- oil tank records.

- all certificates of occupancy.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL twilight0483@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: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1041 Husa Street Linden NJ 07036.

BLOCK/LOT: _____

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REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: Linda Quick Date: 2/6/2017
Organization (If Applicable): Keller Williams Elite Realtors
Mailing Address: 260 Walnut St Apt 5
City, State, Zip: Westfield NJ 07090
Home/Business Phone: [REDACTED] E-MAIL: QUICKRealtor@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)
if permits, any info on underground oil tank
only open or closed

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
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- ☐ 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: Linda Quick

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 239 Rosewood Terrace, Linden
BLOCK/LOT: 296 / 11

CITY OF LINDEN
APPLICATION FORM301 N. Wood Avenue
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Telephone: (908) 474-8445
Fax: (908) 474-8451REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: <u>Yassandra T Jimenez</u>	Date: <u>2/6/17</u>
Organization (If Applicable): <u>Banks tank services</u>	
Mailing Address: <u>1256 Liberty Ave</u>	
City, State, Zip: <u>Hillside, NJ 07035</u>	
Home/Business Phone: <u>[REDACTED]</u>	MAIL <u>early@banksconsulting.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 a list of permit applications for the installation</u> <u>removal or the decommissioning of underground storage</u> <u>tanks at:</u> <u>1102 Winans Ave, Linden, NJ 07036</u>	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
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☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE:	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: <u>1102 Winans Ave, Linden, NJ 07036</u>	
BLOCK/LOT: <u>356, 11</u>	

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(PLEASE PRINT)

Name: <u>CARLY KAMINSKY</u>	Date:
Organization (If Applicable): <u>BRINKS TANK SERVICES</u>	
Mailing Address: <u>1256 Liberty Ave</u>	
City, State, Zip: <u>Hillside, NJ 07035</u>	
Home/Business Phone: <u>[REDACTED]</u>	E-MAIL <u>CARLY@BRINKSCONSULTING.COM</u>
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX (908) 353-3107	

DESCRIPTION OF PUBLIC RECORD(S):

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

Please provide a list of permit applications
for underground storage tanks☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE☒ SEND RESPONSE BY E-MAIL CARLY@BRINKSCONSULTING.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: Carly Kaminsky

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1704 Mildred AveBLOCK/LOT: 31 / 2

RECEIVED

FEB 08 2017

CLERK'S OFFICE

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: CARLY KAMINSKY Date: 2/8/17
Organization (If Applicable): BRINKS TANK SERVICES
Mailing Address: 1250 Liberty Ave
City, State, Zip: Hillside, NJ 07005
Home/Business Phone: [REDACTED] E-MAIL: CARLY@BRINKSCONSULTING.COM
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX (908) 353-3107

DESCRIPTION OF PUBLIC RECORD(S):

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

Please provide a list of permit applications
for underground storage tanks

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE☒ SEND RESPONSE BY E-MAIL CARLY@BRINKSCONSULTING.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: Carly Kaminsky

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 807 N. Wood AveBLOCK/LOT: 241/5

RECEIVED

FEB 8 2017

CLERK'S OFFICE

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

ITY OF LINDEN
PPPLICATION FORM

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: ERICK TORREZ Date: 2/2/2017
Organization (If Applicable): THE PROPERTY SHOP, INC.
Mailing Address: 943 Broadway
City, State, Zip: BAYONNE NJ 07002
Home/Business Phone: [REDACTED] E-MAIL: ETORREZJR@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)

Any open Permits
" close Permits
" violations

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL ETORREZJR@AOL.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: 1312 MIDDLESEX ST LINDEN, NJ 07036

BLOCK/LOT: 52 / 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: AVION TOW Date: 2/8/17
Organization (If Applicable): AKW group LLC
Mailing Address: 476 Lafayette St
City, State, Zip: LINDEN NJ 07036
Home/Business Phone: [REDACTED] MAIL AVIONTOW@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)
TAX MAPS OF LINDEN PROPERTY TAX LIST ON RESIDENTIAL
PROPERTIES IN LINDEN NJ INCLUDING QUINCY OWNED AND
YEAR: 2010

☐ 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
FEB 08 2017
CLERK'S OFFICE

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

CITY OF LINDEN
APPLICATION FORM

RECEIVED

FEB 08 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: Emily Duggan	Date: 02/07/2017
Organization (If Applicable): Brinkerhoff Environmental Services, Inc.	
Mailing Address: 1805 Atlantic Avenue	
City, State, Zip: Manasquan, NJ 08736	
Home/Business Phone: [REDACTED]	E-MAIL: eduggan@brinkenv.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

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

Site: 1021-1027 N. Wood Ave
Block 238, Lot 12
Linden, Union County, NJ 07036

We are requesting records regarding underground storage tanks, natural gas installation permits, wells, septic systems, notices of violation, hazardous materials usage or storage, or land use restrictions located on the above-referenced property. Please refer to attached letter.

- ☐ 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: 1021-1027 N Wood Ave Linden, Union County NJ 07036

BLOCK/LOT: Block 238, Lot 12

ITY OF LINDEN
PPPLICATION FORM

EQUEST FOR PUBLIC RECORDS

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

LEASE PRINT)

James: Jennifer Roy

Date: 02/08/2017

Organization (If Applicable): American Tax Reporting

Mailing Address: 2727 LBJ Freeway Suite 420

City, State, Zip: Dallas TX 75234

Home/Business Phone: 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 check and advise if there are any

1) Open/expired building permits

2) Open code violations

3) Any Liens/Special assessments like weed cutting/lot mowing/debris

for the below mentioned address:

File#: 429093

Address: 57 Robbinwood 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

RECEIVED
FEB -9 2017
CLERK'S OFFICE

☐ 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: Sharon

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: Address: 57 Robbinwood Terrace Linden NJ 07036

BLOCK/LOT: Block 231 Lot 20

CITY OF LINDEN
APPLICATION FORM

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

RECEIVED

REQUEST FOR PUBLIC RECORDS

FEB 10 2017

(PLEASE PRINT)

CLERK'S OFFICE

Name: Joseph L. WRIGHT J. Date: 2-10-2017
Organization (If Applicable):
Mailing Address: P.O. Box 5874 08823
City, State, Zip: Somers NJ
Home/Business Phone: [REDACTED] E-MAIL: J3 ASSOCIATES @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)

DVD video's

ALL video statements made pertaining to
CASE # [REDACTED] (see attached sheet
1 through 5 as highlighted)

☐ 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: Joseph L. Wright

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:	Dan Webb	Date:	2/10/17
Organization (If Applicable):	Lasser Sussman Assoc.		
Mailing Address:	469 Morris Ave.		
City, State, Zip:	Summit, NJ 07901		
Home/Business Phone	[REDACTED]	MAIL	dwebb@lassersussman.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.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

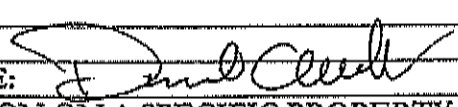
☐ SEND RESPONSE BY E-MAIL

☐ 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 OPRA Request

Please provide copies of the Tax Assessor's Property Record Card for the following properties:

- 1) Block 421, Lot 79
1540 West Blancke Street
 - 2) Block 435, Lot 4.1
1301 E. Linden Avenue
 - 3) Block 421, Lot 50
1300 West Blancke Street
-

**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: 2-10-17
Organization (If Applicable): Keller Williams Realty	
Mailing Address: 188 Elm St	
City, State, Zip: Westfield, NJ 07090	
Home/Business Phone: [REDACTED]	E-MAIL: Team@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)**

Please forward copies of all closed permits on 62 Elmwood Terrace, Linden

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE☒ SEND RESPONSE BY E-MAIL Team@WelcomeHome123.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:** Jenifer DiVirgilio**INFORMATION ON A SPECIFIC PROPERTY:****ADDRESS:** 62 Elmwood Terrace, Linden, NJ**BLOCK/LOT:**

Thank You!

JAL

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

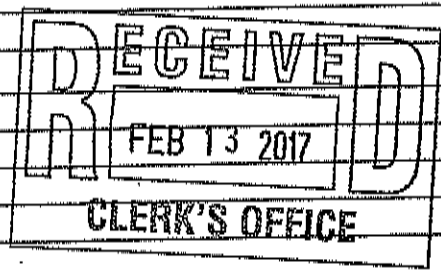
Name: PALA PINTO Date: 2/13/17
Organization (If Applicable): KV2eClaim Solutions
Mailing Address: 30 Valleyway
City, State, Zip: W. ORANGE NJ 07052
Home/Business Phone: [REDACTED] E-MAIL PALA.PINTO@KV2eclaims.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Name + address of landlord for #241 W. St George Ave.
phone # 0

- ☐ 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: *Pala Pinto*
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 241 W. St George Ave, Linden
BLOCK/LOT: _____

REQUEST FOR PUBLIC RECORDS

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

(PLEASE PRINT)

Name: Don Webb Date: 2/13/17
 Organization (If Applicable): Lasser Sussman Assoc.
 Mailing Address: 469 Main Ave.
 City, State, Zip: Summit NJ 07901
 Home/Business Phone: [REDACTED] E-MAIL: dwebb@lasser-sussman.com
 REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX
 DESCRIPTION OF PUBLIC RECORD(S):
 (Please be specific and attach additional pages of information if necessary)

☐ 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)
Copy of Tax Assessed Property Record Card
Block 421, Lot 87
333 Hurst Street
☐ LICENSE INFORMATION (SPECIFY)
 SIGNATURE: [Signature]
 INFORMATION ON A SPECIFIC PROPERTY:
 ADDRESS: 333 Hurst Street
 BLOCK/LOT: Block 421 Lot 87

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)

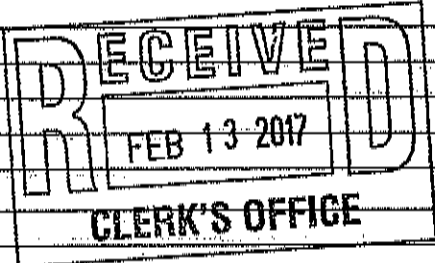
Name: Erica Burkert	Date: 02/10/2017
Organization (If Applicable): Ecolab	
Mailing Address: 1601 West Diehl Road	
City, State, Zip: Naperville, IL 60563	
Home/Business Phone: [REDACTED]	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

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

We are searching for food safety inspections for the following locations:

1. Buffalo Wild Wings: 1701 West Edgar Road, Linden - We are searching for any inspections conducted after 01/01/2016.
2. Checker's: 901 West Edgar Road, Linden - We are searching for any inspections conducted after 01/01/2016.
3. Moe's Southwest Grill: 1701 West Edgar Road, Linden - We are searching for any inspections conducted after 01/01/2016.

☐ 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: EB

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

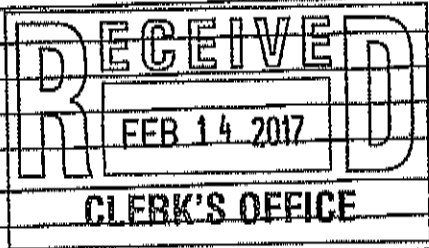
CITY OF LINDEN
APPLICATION FORM

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: Emily Duggan	Date: 02/13/2017
Organization (If Applicable): Brinkerhoff Environmental Services, Inc.	
Mailing Address: 1805 Atlantic Avenue	
City, State, Zip: Manasquan, NJ 08736	
Home/Business Phone: [REDACTED]	E-MAIL: eduggan@brinkenv.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
Site: 1103 N. Wood Ave Block 238, Lot 11 Linden, Union County, NJ 07036	
We are requesting records regarding underground storage tanks, natural gas installation permits, wells, septic systems, notices of violation, hazardous materials usage or storage, or land use restrictions located on the above-referenced property. Please refer to attached letter.	
☐ 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>Emily Duggan</i>	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: 1103 N Wood Ave Linden, Union County NJ 07036	
BLOCK/LOT: Block 238, Lot 11	



CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 070
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: ERWESTINE Taylor Date: 2-14-17
Organization (If Applicable): Cultural-Heritage Committee, Vice Pres.
Mailing Address: 1120 Roselle Street
City, State, Zip: Linden NEW JERSEY 07036
Home/Business Phone: [REDACTED] MAIL mickens329@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)

A Copy of the Mayor's By-Laws
for our Committee, for holding elections

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

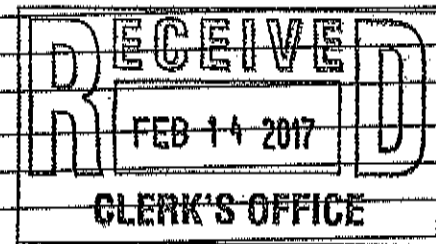
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

no charge, as
she is a committee representative OK
☐ 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: Erwestine Taylor
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: _____

BLOCK/LOT: _____

ITY OF LINDEN
PLICATION 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: Chris Jones

Date: 02/14/2017

Organization (If Applicable): American Tax Reporting

Mailing Address: #2727 LBJ Freeway Suite 420

City, State, Zip: Dallas TX 75234

Home/Business Phone: E-MAIL: cjs@slkgroup.com

EQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

Fax: 888-908-3471

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 or the below mentioned property:

Address: 36 Hillcrest Ter, Linden NJ 07036

Parcel: Block: 215 Lot: 38

Ref#: 545906

RECEIVED

FEB 14 2017

CLERK'S OFFICE

☐ 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)

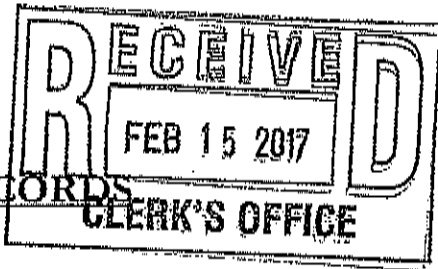
SIGNATURE: Chris Jones

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 36 Hillcrest Ter, Linden NJ 07036

BLOCK/LOT: Block: 215 Lot: 38

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: Manny Ruffin	Date: 02/15/2017
Organization (If Applicable): American Tax Reporting	
Mailing Address: 2727 LBJ Freeway Suite 420,	
City, State, Zip: Dallas TX 75234	
Home/Business Phone: [REDACTED]	Email - 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 unrecorded special assessments presently any OPEN/EXPIRED Building permits and / or OPEN Code violations that needs to be addressed.

Add : 103 W 11th Street Linden NJ 07036

Parcel # Block : 553 Lot : 5

- ☐ 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)

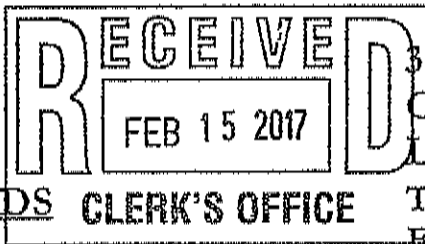
SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1600 Winans Avenue linden NJ 07036

BLOCK/LOT: Block 556 / Lot 10

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)

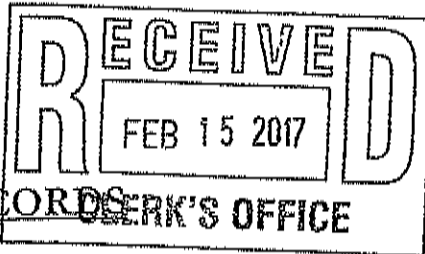
Name: Jorge Uno Date: Feb. 13, 2017
Organization (If Applicable): uno financial services
Mailing Address: 960 fourth rd suite 201
City, State, Zip: wilmington DE 19803
Home/Business Phone: [REDACTED] E-MAIL uno financialservices@yahoo.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
full history of 1001-1007 (some records will indicate 1005)
east elizabeth ave, construction permits, variances,
mechanic shop permits, any records (dates in front of any
city of linden-board

☐ 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)
please e-mail documents to
uno financialservices@yahoo.com
☐ 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
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: uno financial services Date: feb. 13, 2017
Organization (If Applicable): jorge uno
Mailing Address: 910 foulk rd suite 201
City, State, Zip: wilmington DE 19803
Home/Business Phone: [REDACTED] E-MAIL unofinancialservices@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)

copies of publication notice, ordinance number
council meeting date, re-zoning 1001-1007 e elizabeth ave
from CL (light commercial) to LI (light industrial)

☐ 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)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)
☒ OTHER (SPECIFY) please e-mail documents to
unofinancialservices@yahoo.com

Due Feb 27th

☐ LICENSE INFORMATION (SPECIFY)
SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:
BLOCK/LOT:

info attached from Bodele

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

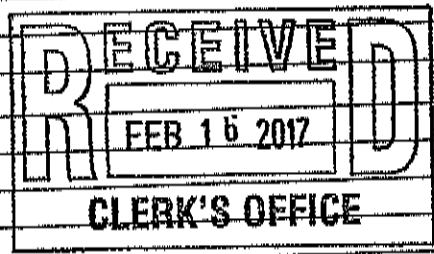
(PLEASE PRINT)

Name: Hernan Osorio Date: 02/16/17
Organization (If Applicable):
Mailing Address: 91 Highland Place
City, State, Zip: Bridgefield Park - NJ 07660
Home/Business Phone: [REDACTED] E-MAIL nan_osorio@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)
* Any permit in the basement (bathroom)
* Any tank with before
* Any open/close 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)
☐ LICENSE INFORMATION (SPECIFY)

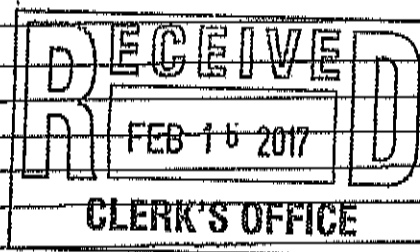


SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1131 Monmouth Ave - Linden NJ
BLOCK/LOT: _____

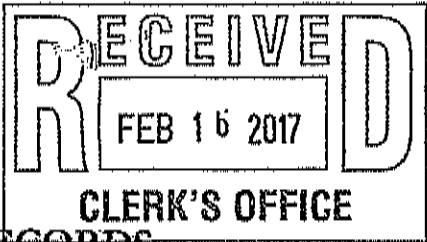
CITY OF LINDEN
APPLICATION FORM301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Justin Kiliszek	Date: 2/16/17
Organization (If Applicable): Keller Williams Metropolitan	
Mailing Address: 55 Madison Ave	
City, State, Zip: Morristown, NJ 07960	
Home/Business Phone: [REDACTED]	E-MAIL: Lauren@agentjustin.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 on any open code violations on 1219 Monmouth Ave 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: <i>Justin Kiliszek</i>	
INFORMATION ON A SPECIFIC PROPERTY: ADDRESS: 1219 Monmouth 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: Sandra Schimchak	Date: 2/16/17
Organization (If Applicable): Reilly, Janice & McDevitt, Kenneth & Children PA	
Mailing Address: 2500 McClellan Blvd, Suite 240	
City, State, Zip: Merchantville, NJ 08109	
Home/Business Phone: [REDACTED]	E-MAIL: sschimchak@rim-law.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 requesting records from the 911 call from Linda Benkovich to Linden Township Police Department on May 14, 2015 at approximately 11 AM.

☐ 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: *Sandra R. Schimchak*

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

ITY OF LINEN
PPPLICATION FORM

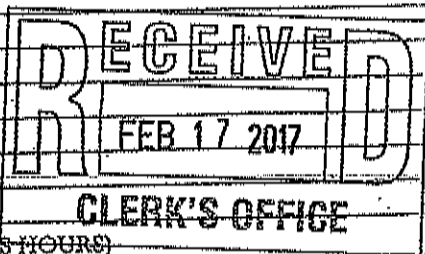
301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: ROBIN MARTINOS Date: 2-16-17
Organization (if applicable): CONSTRUCTION JOURNAL
Mailing Address: 400 SW 7TH ST
City, State, Zip: STUART FL 34994
Home/Business Phone: [REDACTED] Email: rmartinos@theaj.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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



☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTO COPIES 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) REDEVELOPMENT OF ONE PARCEL WITHIN THE CITY
QUALIFICATIONS OPENED 2-15-17
PLEASE PROVIDE LIST OF RESPONDENTS
423 / 4.02 \$ 490 / 3
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Robin Martinos
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) 474-8443
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

Name: PAULA MATOS

Date: 2/17/17

Organization (If Applicable):

Mailing Address: 67 Chestnut St.

City, State, Zip: Union N.J. 07083

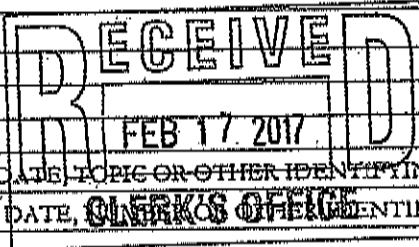
Home/Business Phone: [REDACTED] E-MAIL paula.matos@cbmoves.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

All permits + then, specifically pertaining to 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)

Oil tank

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Paula Matos

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:

220 Maple Ave

BLOCK/LOT: 174 / 24

CITY OF LINDEN
APPLICATION FORM

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

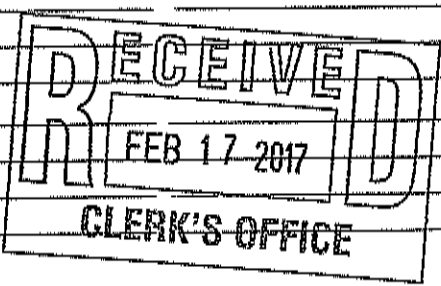
REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

Name: Evan C. Gosney	Date: 02-16-17
Organization (If Applicable): Anchor Consultants, LLC.	
Mailing Address: 1224 Baltimore Pike, Suite 205	
City, State, Zip: Chadds Ford, PA 19317	
Home/Business Phone: [REDACTED]	E-MAIL egosney@anchor-consultants.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):
Please be specific and attach additional pages of information if necessary)
Certified list of Adjacent Property Owners for 4501 Tremley Point Road, Linden, NJ 07036 (Block: 587/Lot: 2.03).

☐ 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: Evan C. Gosney
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 4501 Tremley Point Road, Linden, NJ 07036
BLOCK/LOT: Block: 587, Lot: 2.03

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: Zoila Mejia Date: 2/21/17
Organization (If Applicable): Strike Realty
Mailing Address: 927 Hinsworth St
City, State, Zip: Linden NJ 07036
Home/Business Phone: [REDACTED] E-MAIL: zoila.Homes@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)

1715 Mildred Ave, Linden, NJ 07036
Referent oil tank on property.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

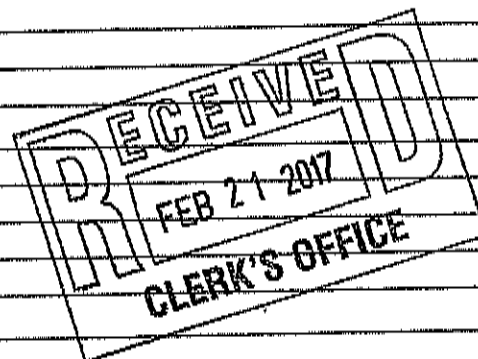
zoila.Homes@yahoo.com

☐ 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)



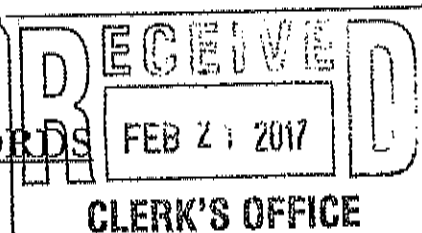
SIGNATURE: Zoila Mejia

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: _____

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS



301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 070
Telephone: (908) 474-8444
Fax: (908) 474-8455

(PLEASE PRINT)

Name: Steven Wnorowski

Date: Feb 21, 2017

Organization (If Applicable):

Mailing Address: 700 West Elm St

City, State, Zip: Linden, NJ, 07036 S Wnorowski@gmail.com

Home/Business Phone: [REDACTED] 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)

Purchasing property on 351 Rosewood Terrace and would like
to see if there is any history of an oil tank on the property
and if there is any history of removal.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

S Wnorowski@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: St Wnorowski

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) 474-8455
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

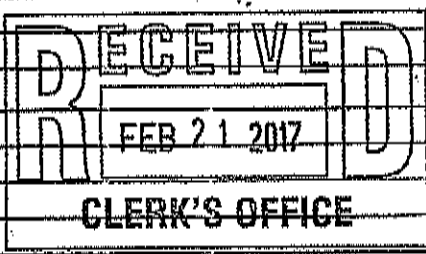
PLEASE PRINT)

Name	Izzy Azevedo	Date:	02/17/17
Organization (If Applicable)	All Towne Realty		
Mailing Address:	30 Brant Ave		
City, State, Zip:	Clark NJ 07066		
Home /Business Phone:	[REDACTED]		
REQUEST MADE VIA:	☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX (888) 446-9005		

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

If for any permit (if any) filed in the past and info on any open permit. (if any) please email to
I elis@leteam@outlook.com

☐	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: 415 Laurita St Linden NJ 07036

BLOCK /LOT: 352/7

**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: Izzy Azevedo Date: 02/17/17
Organization (If Applicable): All Towne Realty
Mailing Address: 30 Brant Ave
City, State, Zip: Clark NJ 07066
Home/Business Phone: [REDACTED]
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX (888) 446-9005

DESCRIPTION OF PUBLIC RECORD(S):

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

Info on any permit (if any) filed in the past and info on any open permit. (if any) please email to
Reliableteam@outlook.com

☐ 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)

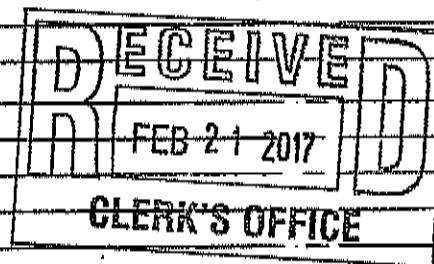
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS 533 Monmouth Ave Linden NJ 07036

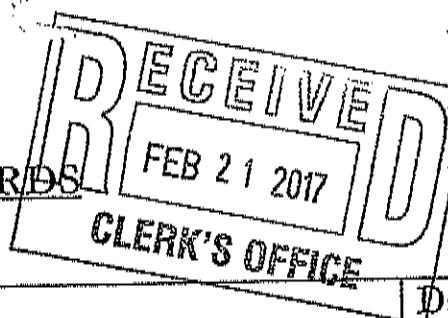
BLOCK/LOT: 171/11



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: Bianca Camas

Date: 2/21/2017

Organization (If Applicable): _____

Mailing Address: 1041 HUSSA Street

City, State, Zip: Linden NJ 07036

Home/Business Phone: [REDACTED] E-MAIL: twilight0483@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)

- Permits that were opened and never closed.
- Permit for removal of oil tank.
- All certificates of occupancy.

☐ 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) _____

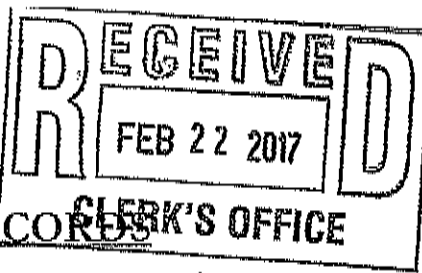
SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1041 HUSSA Street, Linden.

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) Megan Rapisarda
Name: Masimo Rapisarda Date: 2-21-17
Organization (If Applicable):
Mailing Address: 1517 Orchard Terr
City, State, Zip: Linden NJ 07036
Home/Business Phone: [REDACTED] MAIL meganrapisarda213@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)

- ① was there ever a permit to remove an oil tank?
- if so I would like a copy
- ② what permits were on the house since 1953
- if so I would like copies
- ③ Are there any open permits on the house since 1953?

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

☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL Please email everything to
meganrapisarda213@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) would like to know if there was or is an
oil tank at address below. If there is a tank was
it removed or filled. I would like any and all records
of this property listed below. since 1953

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1210 Sunnyfield Dr Linden NJ 07036

BLOCK/LOT: 336 → Block 26 → lot

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: Source D. Astalos

Date: 2/23/17

Organization (If Applicable):

Mailing Address:

City, State, Zip:

Home/Business Phone: [REDACTED] X E-MAIL jdastalos@verizon.net

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

copies of all permits
relative to the removal 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)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Source D. Astalos

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 2842 Verona Ave Linden

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: DON MIDDLETON JR. Date: 2/22/17
Organization (If Applicable): MIDDLETON ENVIRONMENTAL
Mailing Address: 54 GEORGE ST
City, State, Zip: BABYLON NY 11702
Home/Business Phone: [REDACTED] E-MAIL: DONC@MIDENV.COM
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

300, 310 EAST ELIZABETH AVENUE + 321 PENNSYLVANIA RAILROAD AVE

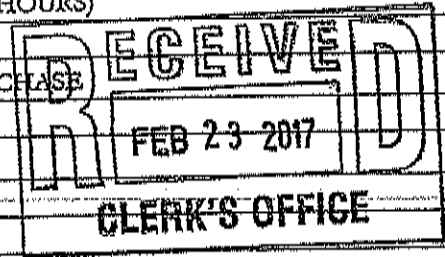
TAX MAP BLOCK 209 LOTS 7, 8 + 9

LOOKING FOR ANY TANK RENTAL INFORMATION

☐ 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: _____

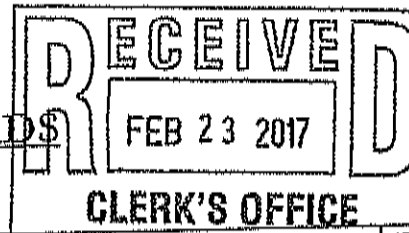
BLOCK/LOT: _____

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: ABE WAXLER Date: 2/23/17
Organization (If Applicable): 220 MAPLE LLC
Mailing Address: 1200 FULLER ST.
City, State, Zip: LINDEN NJ 07036
Home/Business Phone: [REDACTED] E-MAIL: MAPLE NJ PROPERTIES @GMAIL
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX
MAPLE NJ PROPERTIES @GMAIL

DESCRIPTION OF PUBLIC RECORD(S):

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

NEED TO KNOW IF THERE ARE ANY
OPEN PERMITS OR ISSUES
ON MY PROPERTY - 220 MAPLE AVE 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: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 220 MAPLE AVE LINDEN NJ

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 070:
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Jean Rimbach Date: 2/23/17
Organization (If Applicable): The Record
Mailing Address: 1 Varney Martin Plaza
City, State, Zip: Woodlawn Park N.J.
Home/Business Phone: [REDACTED] MAIL rimbach@northjersey.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

- a copy of the current CO - Certificate of Occupancy - for 705 Clinton St. Linden
- a copy of the request for a CO for 705 Clinton (most recent)
- any approval or denial of the most recent request
- Any building permit requested for 705 Clinton NJ ^{from} 2015 - 2017

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

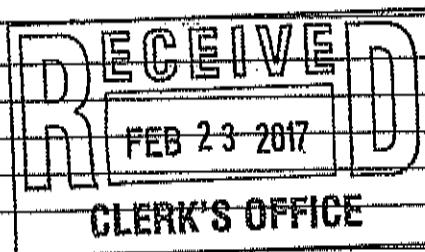
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ 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:

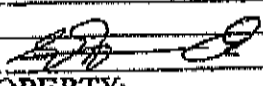
INFORMATION ON A SPECIFIC PROPERTY:

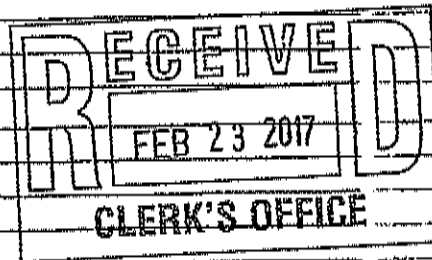
ADDRESS: 705 Clinton

BLOCK/LOT: Jean Rimbach

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	ALF MUZONDA	Date:	2-23-2017
Organization (If Applicable):	MORNING STAR CHURCH		
Mailing Address:	1009 CHANDLER AVENUE		
City, State, Zip:	LINDEN, NJ 07036		
Home/Business Phone:	[REDACTED]	E-MAIL:	ALF.MUZONDA@3MARR.COM
REQUEST MADE VIA:	☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX		
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)			
- SITE PLANS			
- BUILD ARCHITECTURAL DRAWINGS			
- RESOLUTIONS			
RELATED TO 1009 CHANDLER AVENUE			
☐ INSPECT / VIEW DOCUMENTS ONLINE (DURING NORMAL BUSINESS HOURS)			
☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE			
☐ SEND RESPONSE BY E-MAIL			
IF APPLICABLE:			
☐ 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: 1009 CHANDLER AVENUE			
BLOCK/LOT: 72, E48			



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: CLIFFORD SCHWIM

Date: 2/13/17

Organization (If Applicable):

Mailing Address: 2500 BRUNSWICK AVE

City, State, Zip: LINDEN 07036

Home/Business Phone: [REDACTED] E-MAIL: TwoPizzaEtc.com

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

History, VIOLATIONS ETC

416 ALLEN STREET

permits (open & closed)

Tax liens and/or back taxes.

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

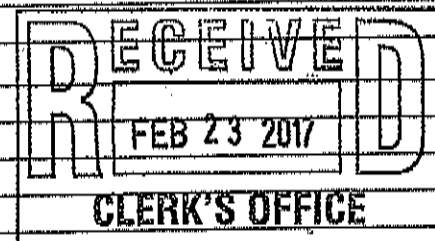
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ 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)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 416 ALLEN STREET

BLOCK/LOT:

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT)

DESCRIPTION OF PUBLIC RECORD(S):

Please email the
blue clipped pages.
Just add an appraisal
form thanks

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 070.
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Maurice Murray Date: 02/24/17
Organization (If Applicable):
Mailing Address: 436 Lawton Place
City, State, Zip: Perth Amboy NJ 08861
Home/Business Phone: [REDACTED] 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)

History of persons / ID check book and SST card
by Arvin Lee Melton and Chenele Rankins Date ~~Aug~~
~~08/01/2013~~ JULY 2013 - Sept 2013

Maurice Murray

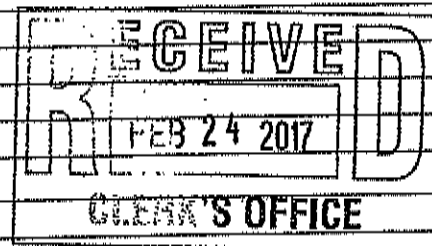
DOB

DL #

- ☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☐ SEND RESPONSE BY E-MAIL maurice murray 723 @ 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: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:

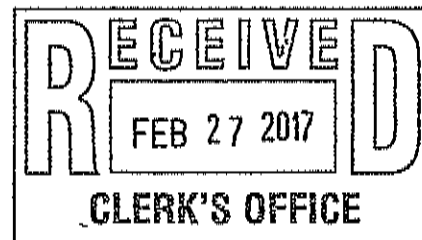
BLOCK/LOT:



ATLANTIC ENVIRONMENTAL SOLUTIONS, INC

February 24, 2017

Linden City Clerk
City Hall
301 North Wood Avenue
Linden, NJ 07036



*Re: Freedom of Information (FOI) Request
1201 West Blancke Avenue
Block: 422 Lot: 29
Linden, Union County, New Jersey*

Dear Sir or Madam:

Atlantic Environmental Solutions, Inc. (AESI) has been retained to perform an environmental assessment of the referenced property. The purpose of this letter is to request any information which may be in your files in connection with the subject property and/or any of the adjacent properties. Please review your files for any of the following:

- Environmental or Health related violations, incidents, complaints, etc.
- Community Right to Know (RTK) Information
- Underground Storage Tank (UST) registration records, installation/removal permits, etc.
- Hazardous substance (including petroleum) inventories, discharges, leaks, spills, etc.
- Monitoring well, potable well, or other well installation records
- Industrial Site Recovery Act (ISRA) or ECRA correspondence
- Groundwater contamination reports, including Classification Exception Areas (CEAs)
- Declaration of Environmental Restrictions (DERs)
- Air emission permits, records
- Solid waste or sanitary waste permits, records

Thank you in advance for your help regarding this matter. In the event that there is a fee associated with obtaining this information, or if your office would rather make the file available for my review, please do not hesitate to call me at [REDACTED]. Our fax number is (201) 876-9563.

Sincerely,

Salvatore DeLucia
Environmental Scientist

sdelucia@solutions
environmental.com.

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 070:
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Cornelius Daves JR Date: 2-27-2017
Organization (If Applicable): _____
Mailing Address: 1120 Monmouth Ave
City, State, Zip: Linden NJ 07036
Home/Business Phone: _____ E-MAIL _____
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX 908-587-1700

DESCRIPTION OF PUBLIC RECORD(S):

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

Car Accident Report Oct 2015

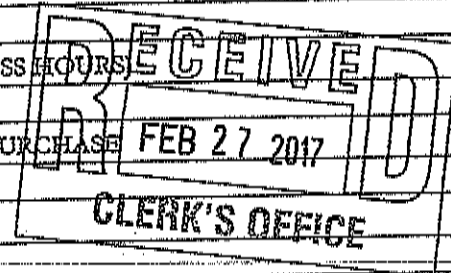
Cornelius Daves JR 4-21-89

1-9 and Styles St

☐ 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: Cornelius Daves JR

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 070
Telephone: (908) 474-8441
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Luis R. Gonzalez

Date: 02, 28, 2017

Organization (If Applicable):

Mailing Address: 419 16TH STREET Apt 4R

City, State, Zip: Union City NJ 07087

Home/Business Phone: [REDACTED] E-MAIL lg39795950@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)

06, 2015

Accident on Route 1 Edgar Road & Wood Ave

Commercial Truck Company I.T.S.
The driver Ran on the side of the Truck

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

DL # [REDACTED]

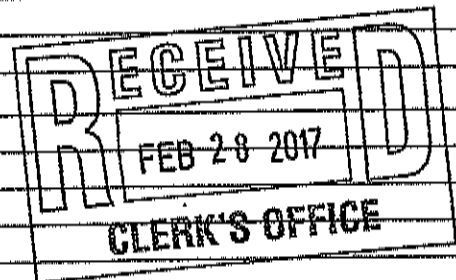
DOB [REDACTED]

Luis R. Gonzalez

☐ 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)



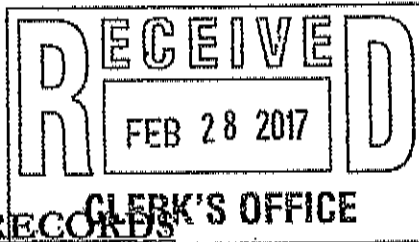
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM301 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: Carol Sussman-Skalka Date: 3/1/17
Organization (If Applicable): Weichert Realtors
Mailing Address: 185 Elm Street #2017-6
City, State, Zip: Westfield NJ 07090
Home/Business Phone: [REDACTED] E-MAIL: Caroljoy9@Verizon.net
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S): re 1122 Debra Drive Linden, NJ
(Please be specific and attach additional pages of information if necessary)

Please check all open & closed permits.
and advise as to any information related
to presence and/or removal or decommission of
an underground 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)

SIGNATURE: Carol J. Sussman-Skalka

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1122 Debra Drive Linden, NJ 07036

BLOCK/LOT: 0047/0000 Lot 00034/0000

Block

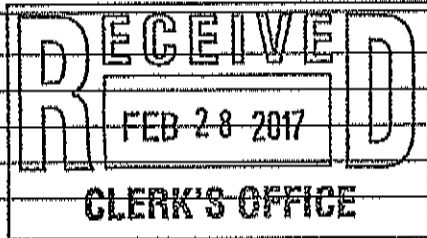
CITY OF LINDEN
APPLICATION FORM

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:	Shawn Paul	# 2017-1	Date:	02/28/2017
Organization (If Applicable):	American Tax Reporting			
Mailing Address:	#2727 LBJ Freeway Suite 420			
City, State, Zip:	Dallas TX 75234			
Home/ Business Phone:	[REDACTED]			
REQUEST MADE VIA:	☐ OFFICE VISIT		☐ CORRESPONDENCE	
E mail-cisesikgroup.com			☒ 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 property listed below:				
Address: 911 Clark Street Linden Nj-07036				
Parcel: Block 181 Lot 2				
Ref # 549043				
☐ 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:				
INFORMATION ON A SPECIFIC PROPERTY:				
ADDRESS: 911 Clark Street Linden Nj-07036				
BLOCK/LOT: Block 181 Lot 2				



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

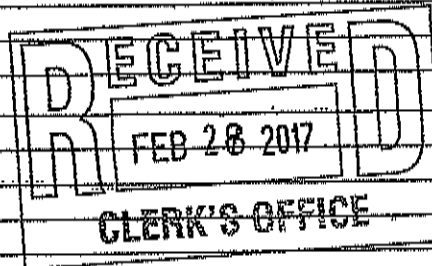
(PLEASE PRINT)

Name: <u>Darren D Lewis</u>	Date: <u>2 - 28 - 17</u>
Organization (If Applicable):	
Mailing Address: <u>17 Fitch St Apt B</u>	
City, State, Zip: <u>Carteret, NJ 07008</u>	
Home/Business Phone: <u>[REDACTED]</u> E-MAIL: <u>1darrenlewisok@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)

To Whom it may concern; I'm wondering if there is any oil tank buried under ground in this property or lot?

☐ 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: 511 E Henry St Linden, NJ 07036

BLOCK/LOT: _____