...LICATION FORM

...QUEST FOR PUBLIC RECORDS

RECEIVED
MAY 01 2017
CLERK'S OFFICE

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

...ASE PRINT) # 2017-172

...ne: JEFFREY G. EPHRAIM — Date: 5-1-17

...anization (If Applicable): DiGiovanni & Ephraim, LLC

...ling Address: 315 RAHway AVE

..., State, Zip: Elizabeth NJ 07202

...ne/Business Phone [redacted] E-MAIL info@legal315.com

...QUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

...SCRIPTION OF PUBLIC RECORD(S):
...ase be specific and attach additional pages of information if necessary)

...l permits taken on property. (roof, etc.)

...il tank removal / filling

...whether there are any ~~not~~ old permits that need closing.

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)

...GNATURE:

...FORMATION ON A SPECIFIC PROPERTY:

...DRESS: 913-915 W. Blancke St.

...OCK/LOT: 358/9

:TY OF LINDEN
?PLICATION FORM

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

EQUEST FOR PUBLIC RECORDS

2017 - 174

LEASE PRINT)

Name: Izzy Azevedo **Date:** 05/01/2017

)rganization (If Applicable): All Towne Realty

Mailing Address: 30 Brant Ave

:ity, State, Zip: Clark NJ 07066

Home/Business Phon [redacted]

EQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

)ESCRIPTION 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)

RECEIVED
MAY 01 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 401 Fernwood ter Linden NJ 07036

BLOCK/LOT: 364/1

[TY OF LINDEN
PPLICATION FORM

EQUEST FOR PUBLIC RECORDS

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

LEASE PRINT) # 2017-175

Name: Izzy Azevedo | Date: 05/01/2017

Organization (If Applicable): All Towne Realty

Mailing Address: 30 Brant Ave

City, State, Zip: Clark NJ 07066

Home/Business Phone: [redacted]

EQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

ESCRIPTION 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)

RECEIVED
MAY 01 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

NFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 211 Gesner St Linden NJ 07036

BLOCK/LOT: 310/27

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

2017 - 176

(PLEASE PRINT)

Name: Jonathan Roldan | Date: 05/01/2017
Organization (If Applicable):
Mailing Address: 1614 Orchard Terrace
City, State, Zip: Linden, NJ 07036
Home/Business Phone: [redacted] E-MAIL: jonroldan92@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 if there were any property or land surveys done. If there were, I would like to receive the copies of them. I am trying to find the boundary limits on my property before hiring a land surveyor.

☐ 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
MAY 01 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1614 Orchard Terrace 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) #2017-178

Name: James G. O'Donohue	Date:
Organization (If Applicable): Hill Wallack LLP	
Mailing Address: 21 Roszel Road	
City, State, Zip: Princeton, NJ 08543	
Home/Business Phone [redacted]	E-MAIL jodonohue@hillwallack.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 documents related to the use of Union County Cooperative Pricing System bid award BA #UCCP 28-2015 to obtain document image scanning services from DRS Imaging.

_____ All documents setting forth any amounts paid to DRS Imaging for document image scanning services.

_____ All documents setting forth any amounts billed or invoiced by DRS for document image scanning services.

☐ _____ (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
MAY 02 2017
CLERK'S OFFICE

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: _____

BLOCK/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

EQUEST FOR PUBLIC RECORDS

#2017-179

EASE PRINT)

ame: Christopher Lombardi Date: 01st May 2017

rganization (If Applicable): Alliance Polygraph, LLC

ailing Address: Post Office Box 1@150

ity, State, Zip: New Providence, New Jersey 07974

ome/Business Phone [redacted] E-MAIL calombardi2@msn.com

EQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

ESCRIPTION OF PUBLIC RECORD(S):

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

Time of Reference - Approx. 1987. Complainant - Millie Galletta. Location - 311 Morning Side Avenue. Accused - Philip Clemente. Nature of the Accusation - [redacted] Apparently Millie Galletta accused Philip Clemente of Assaulting Stephen Galletta. Has the potential to be used in a pending legal matter.

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)

RECEIVED
MAY - 4 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

IGNATURE: Christopher Lombardi

NFORMATION ON A SPECIFIC PROPERTY:

DDRESS: _____

LOCK/LOT: _____

. Y OF LINDEN
PLICATION FORM

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

QUEST FOR PUBLIC RECORDS

EASE PRINT)

me: Juan Ramos #2017-180 | Date: 5/4/17

ganization (If Applicable):

iling Address: 407 Bower ST

y, State, Zip: Linden N.J. 07036 & jrdriver

me/Business Phone [redacted] E-MAIL JR_Diesel13@yahoo.com

QUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

SCRIPTION OF PUBLIC RECORD(S):

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

Copy of Complaint made to the board of Health on 4/24/2017 Re. 407 Bower Street

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)

GNATURE: Juan Ramos

FORMATION ON A SPECIFIC PROPERTY:

DRESS: 407 Bower ST Linden

OCK/LOT:

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MAY 04 2017
CLERK'S OFFICE

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: Gina Gros # 2017-181 **Date:** 5/4/17

Organization (If Applicable): Gallas Surveying Group

Mailing Address: 2865 US Route 1

City, State, Zip: North Brunswick, NJ 08902

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)

This request is for information pertaining to the following properties located in Linden, NJ:

1065 Edward St (Lot 8, Block 580), 1015 Edward St (Lot 10, Block 580), 1741 W Edgar Rd (Lot 11, Block 580) and 1701 W Edgar Rd (Lot 12.01, Block 580)

The information I am requesting is the following:

- Most current surveys and site plans you may have on file
- Mapping illustrating the location of water and sewer lines running in the area, as well as any possible connections to the buildings

Our office is preparing a Boundary & Topographic Survey of these properties and will utilize any mapping provided solely for reference purposes on same.

Thank you for your help and please contact me with any questions. GSG Project #G17068

☐ 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)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

NFORMATION ON A SPECIFIC PROPERTY:

DDRESS: 1065 Edward St, 1015 Edward St, 1741 W Edgard Rd and 1701 W Edgar Rd

LOCK/LOT: 580 / 8, 10, 11 & 12.01

IY OF LINDEN
PLICATION FORM

:QUEST FOR PUBLIC RECORDS

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

EASE PRINT)

ume: NICK VERO #2017-182 | Date: 5-4-2017

ganization (If Applicable): OPTION 1 REALTY GROUP.

ailing Address: 456 WASHINGTON ST

y, State, Zip: NEWARK NJ 07102

me/Business Phone [redacted] MAIL NICK260@AOL.COM

QUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

SCRIPTION OF PUBLIC RECORD(S):

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

WOULD LIKE TO KNOW IF AN OIL TANK REMEDIATION PERMIT WAS EVER ISSUED FOR SUBJECT PROPERTY

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
MAY 04 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

NATURE:

ORMATION ON A SPECIFIC PROPERTY:

RESS: 241 ELMWOOD TERRACE

CK/LOT: 297 - 8

CITY OF LINDEN
APPLICATION FORM

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MAY - 5 2017
CLERK'S OFFICE

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) #2017-184

Name: Ibrahim Hughes	**Date:** 5/4/17
Organization (If Applicable):	
Mailing Address: 4 Bloomfield Avenue	
City, State, Zip: Bloomfield, NJ 07003	
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)

I would like a copy of the city's most recent Abandoned or Vacant Property List.

☐ 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) Please email to ihughes1970@gmail.com or fax to 973-378-1557. Thank you.

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Ibrahim Hughes

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

RECEIVED
MAY - 5 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) #2017-185

Name: Jennifer Ramos Date: 5/5/17

Organization (If Applicable): Calcagno & Associates

Mailing Address: 213 South Ave

City, State, Zip: Cranford NJ 07016

Home/Business Phone: [redacted] E-MAIL: Lori@calcagnolawfirm.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 MVA Reports Dated:

4/30/17 — 5/6/17

☐ 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: Jennifer Ramos

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

#2017-186

PLEASE PRINT)

Name: Damaris Crespo | Date: 5/4/2017

Organization (If Applicable): D&N Holdings II, LLC

Mailing Address: 913 Saint George Ave

City, State, Zip: Roselle, NJ 07203

Home/Business Phone [redacted] E-MAIL admin@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)

Any and All Permits Open and Closed
Please provide Current and Up to Date tax information, any open liens on property
Please provide information if Oil Tank was and/or if Oil Tank is still on site

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL
admin@florostone.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
MAY 05 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Damaris Crespo

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 813 E. Curtis St

BLOCK/LOT: 14/119

State of New Jersey Standard

Open Public Records Act Request Form

#2017-187

Important Notice

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

Requestor Information – Please Print

First Name Doris MI ____ Last Name Kobza

E-mail Address Permit@NJPella.com

Mailing Address 4 Dedrick Place

City West Caldwell State NJ Zip 07006

Telephone [redacted] FAX 866-396-9931

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

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

Signature [signature] Date 5/01/2017

Payment Information

Maximum Authorization Cost $ 10.00

Select Payment Method

Cash Check Money Order

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

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

Extras: Special service charge dependent upon request.

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

Please provide a Permit Fee Log Detail Report or Permit Activity April 2017
If the municipality cannot separate new construction houses or additions, then I would like a copy of all residential new construction, renovations, additions and alterations permitted.
Copies can be faxed or emailed using the information above.
I can also pick up the information in person if that is preferred.
I realize there may be charges associated with providing this information. Please call me if there are any questions.
I respect your time and appreciate your help.
Please let me know if you have any suggestions that will help the municipality process this request more efficiently.

AGENCY USE ONLY AGENCY USE ONLY AGENCY USE ONLY

Y OF LINDEN
PLICATION FORM

QUEST FOR PUBLIC RECORDS

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

ASE PRINT) #2017-200

me: Luis Colon | Date: 5/8/17

ganization (If Applicable):

iling Address: 2123 Dill Avenue

y, State, Zip: Linden NJ 07036

me/Business Phone [redacted] MAIL jillcolon1999@gmail.com

QUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

location of underground oil / storage tank
- if removed please provide documentation

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
MAY 08 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

GNATURE: [signature]

FORMATION ON A SPECIFIC PROPERTY:
DRESS: 2123 Dill Avenue

OCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

RECEIVED
MAY 09 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: MICHAEL PELLERIN #2017-201 Date: MAY 9 2017

Organization (If Applicable):

Mailing Address: 145 PENNYPACKER DRIVE

City, State, Zip: WILLINGBORO NEW JERSEY 08046

Home/Business Phone: [redacted] E-MAIL: m_pellerin@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)

RECORDS, REPORTS, PHOTOGRAPHS, ETC.
CONCERNING FORMER RESIDENT: ANTHONY W. FANNIEL, A.K.A. ANTHONY FANNIEL, AKA TONY FANNIEL, BIRTH DATE JUNE 13, 1968.

MR. Anthony Fanniel

☐ 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: [signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

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CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

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City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

(PLEASE PRINT)

Name: James T. Ryan #2017-202 | Date:
Organization (If Applicable): Stavitsky & Associates
Mailing Address: 350 Passaic Ave
City, State, Zip: Fairfield, NJ 07004
Home/Business Phone [redacted] E-MAIL jamesr@proptaxappeal.net
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

The property record card for
Block 580, Lot 31.06
(701-799 W. Edgar Rd)

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY [redacted] FAX (973-227-1925)

☐ 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: JT Ryan

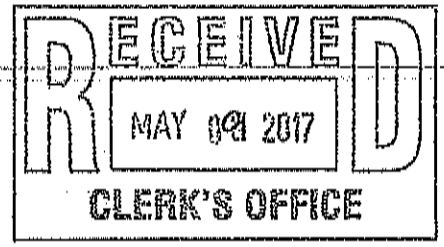
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 701-799 W. Edgar
BLOCK/LOT: 580 / 31.06

ennifer Honan

rom: Elana Knopp <eknopp@thelocalsource.com>
ent: Tuesday, May 09, 2017 12:06 AM
o: Jennifer Honan
ubject: OPRA request

#2017-203

Ii Jen, I'd like to put in the following OPRA request: Annual salary for Alexis Zack. Thanks!



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: Regina Gilmartin #2017-204 | Date: 5-9-17
Organization (If Applicable): Construction Information Systems
Mailing Address: 170 Kinnelon Rd
City, State, Zip: Kinnelon NJ 07405
Home/Business Pho[redacted] E-MAIL regina@cisleads.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 a copy of only those pgs of the Planning Bd. Application for SP 1079 Linam Realty Inc. 201-301 (a) Ease. Rd.
Please exclude phone numbers & addresses for owner, applicant, architect, engineer & attorney.

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

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☐ OTHER (SPECIFY)

RECEIVED
MAY 09 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Regina Gilmartin

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

OF LINDEN

LICATION FORM

UEST FOR PUBLIC RECORDS

City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

SE PRINT) Nathaniel Sutain

e: Nathaniel Sutton #2017-205 | Date: 5-10-17

nization (If Applicable): Sandy Realty

ing Address: 243 West St Georges Ave

State, Zip: Linden NJ 07036

e/Business Phone: [redacted] E-MAIL Sandyrealtyco@gmail.com

UEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

Any + All property owner w/ contact 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)

RECEIVED
MAY 10 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

NATURE:

ORMATION ON A SPECIFIC PROPERTY:
DRESS: 221 Morningside Avenue Linden NJ 07036

CK/LOT:

City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

LICATION FORM

UEST FOR PUBLIC RECORDS

SE PRINT) Nathaniel Sutain

ne: NAMANIEL SUTAIN #2017-206 | Date: 5-10-17.

nization (If Applicable): SANOU REALTY

ing Address: 243 West St Georgia Ave.

, State, Zip: Linden NJ 07036

ne/Business Phone [redacted] E-MAIL Sandyrealtycorp@gmail.com

UEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

~~Any + All~~

property owner w/ contact 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)

RECEIVED
MAY 10 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

NATURE: N Sut

ORMATION ON A SPECIFIC PROPERTY:
DRESS: 243 West St Georgia Avenue.

CK/LOT: Block 309/Lot 2

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

RECEIVED
MAY 10 2017
CLERK'S OFFICE

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

(PLEASE PRINT)

Name: ETHAN REED #2017-207 Date: 5/10/17

Organization (If Applicable): RPRG

Mailing Address: 10400 LITTLE PATUXENT PKY

City, State, Zip: COLUMBIA, MD 21044

Home/Business Phone [redacted] E-MAIL ereed@[redacted]rprg.net

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 A LIST OF ANY APARTMENT RENTAL PROJECTS ACTIVE IN THE PLANNING OR CONSTRUCTION STAGE IN LINDEN

INFO NEEDED: • PROPERTY ADDRESS
• NUMBER OF UNITS
• NAME OF APPLICANT / OWNER

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL ereed@rprg.net

☐ 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

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

REQUEST FOR PUBLIC RECORDS

#2017-208

PLEASE PRINT)
Name: Paula Alves | Date: 5-8-2017
Organization (If Applicable): WHELAN ADJUSTMENT INC.
Mailing Address: 122 ELMORA AVENUE
City, State, Zip: ELIZABETH, NEW JERSEY 07202
Home/Business Phone [redacted] E-MAIL palves@whelanadj.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 Police Report for attached request.

DOL: 5/5/17
Loc: 628 W. Elizabeth Ave, 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)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

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

.Y OF LINDEN
PLICATION FORM

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

QUEST FOR PUBLIC RECORDS

EASE PRINT)

ime: Michael Rabadi #2017-210 | Date: 5/11/17

ganization (If Applicable):

iling Address: 1116 N Styles

y, State, Zip: ~~NY~~ New Jersey 07036

ome/Business Phone [redacted] E-MAIL

QUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

SCRIPTION OF PUBLIC RECORD(S):

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

House # 14303
Board of Health report

1013A University Terrace

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
MAY 11 2017
CLERK'S OFFICE

OTHER (SPECIFY)

LICENSE INFORMATION (SPECIFY)

GNATURE:

FORMATION ON A SPECIFIC PROPERTY:

DDRESS:

OCK/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) #2017-211

Name: Jeanne You, Esq	**Date:** 5/11/2017
Organization (If Applicable): Lindgren, Lindgren, Oehm & You, LLP	
Mailing Address: 246 Bridge Street, Metuchen, NJ 08840	
City, State, Zip:	
Home/Business Phone: [redacted] **E-MAIL** Jyou@lloylaw.com **Our Fax:** 732-218-3792	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

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

My client is looking to purchase 117 Maple Ave, Linden, NJ 07036. Kindly send the complete permit records for the subject property by either fax or email, whichever is more convenient for you.

Please don't hesitate to contact me by phone or email should you request additional information.

Thank you.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL (or fax, whichever is more convenient)

☐ 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 Maple Ave, Linden, NJ 07036.

BLOCK/LOT: Block 199, Lot 2

CITY OF LINDEN
APPLICATION FORM

RECEIVED
MAY 11 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) # 2017-212

Name: STEVEN NARDINI	Date: 5-11-17
Organization (If Applicable): STAR REAL ESTATE AGENCY	
Mailing Address: 155 RIVER RD	
City, State, Zip: N. ARLINGTON NJ 07031	
Home/Business Phone: [redacted]	E-MAIL SNARDINI@STARREALESTATEAGENCY.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)

INFORMATION ON ANY OPEN AND CLOSED PERMITS.
INFORMATION ON ANY VIOLATIONS

☐ 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: Steven Nardini

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 2012 orchard terr, LINDEN, NJ 07036.
BLOCK/LOT: 00273 / 00015

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MAY 11 2017
CLERK'S OFFICE

TY OF LINDEN
PLICATION FORM

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

:QUEST FOR PUBLIC RECORDS

EASE PRINT) # 2017-213

ame: Kimberly Fleak | Date: May 11, 2017
ganization (If Applicable): Coldwell Banker Res. Brokerage
ailing Address: 360 Franklin Avenue
ty, State, Zip: Wyckoff NJ 07481
ome/Business Phone [redacted] MAIL Kimberly-fleak@yahoo.com
QUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

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

opies of open and closed building permits
opies of tank removal permits
opy of property record card
opies of septic permits and septic as-built
opy of survey, if available
opy of decommissioned oil tank permit

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)

GNATURE: Kimberly Fleak

FORMATION ON A SPECIFIC PROPERTY:
DDRESS: 1211 Bower Street
OCK/LOT: 150* / 3*

Place Logo Here

AGENCY NAME HERE

OPEN PUBLIC RECORDS ACT REQUEST FORM

Agency Address

Agency Telephone Number & Fax Number

Agency e-mail address

Name of Agency Custodian

#2017-214

908-477-8451

Place Logo Here

Important Notice

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

Requestor Information – Please Print

First Name Carly MI ____ Last Name Kaminsky

E-mail Address Carly@brinksconsulting.com

Mailing Address 125e Liberty Ave

City Hillside State NJ Zip 07205

Telephone [redacted] FAX 9083533-3107

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

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

Signature Carly Kaminsky Date 5/11/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

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

Delivery: Delivery / postage fees addition al depending upon delivery type.

Extras: Special service charge dependent upon request.

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

Please provide a list of permit applications for the installation, Removal or the decommissioning of Underground Storage tanks at: 435 washington Ave, Linden, NJ 07036

Block # 212 Lot # 2

AGENCY USE ONLY

Est. Document Cost ____

Est. Delivery Cost ____

Est. Taxes Cost ____

Total Est. Cost ____

Deposit Amount ____

Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes

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

In Progress - Open ____

Denied - Closed ____

Filled - Closed ____

Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____

Rec'd Date ____

Ready Date ____

Total Pages ____ Records Provided

Final Cost

Total ____

Deposit ____

Balance Due ____

Balance Paid ____

RECEIVED
MAY 12 2017
CLERK'S OFFICE

Custodian Signature ____ Date ____

2017-215

n: Kristy Bays <kbays@atr.guru>
:: Friday, May 12, 2017 6:51 AM
City Clerk
ject: OPRA (ASAP please)

Open Public Records Request

se provide the following information on the property shown below:

ny current/unpaid balances of the water,sewer, and trash utility billing
ny OPEN Code Violations
ny OPEN/EXPIRED Permits
ny OPEN special assessments (open invoices such as tall grass mowing, trash clean up, snow removal, etc)

ress: 629 Lindegar Street
k: 381 Lot: 3
#: 479291

nks,

ty Bays
erican Tax Reporting
7 LBJ Freeway Suite 420
las TX 75234
[redacted]
888-226-7791

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

#2017-214

(PLEASE PRINT).

Name: Meir Morzel | Date: 5/11/17
Organization (If Applicable): Riverside Abstract
Mailing Address: 212 Second Street, Suite 502
City, State, Zip: Lakewood, NJ 08701
Home/Business Phone: [redacted] E-MAIL Morzel@rsabstract.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 a report that shows the following:
- violations
- Permits
- Work done
- Certificate of Occupancy
- other filings etc. for/against the building/property

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL
Please send response to Morzel@rsabstract.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
MAY 12 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Meir Morzel

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 2400 Beale Place
BLOCK/LOT: Block 478 Lot 2

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

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

#2017-217

(PLEASE PRINT)
Name: SALIJA KOLIC | Date: 5-11-17
Organization (If Applicable):
Mailing Address:
City, State, Zip:
Home/Business Phone E-MAIL SKOLIC@ICLOUD.COM
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Property Record Card
Open and Closed Permits
History of Oil Tank

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

SALIJA KOLIC
REALTOR
973-970-8692
SKOLIC@ICLOUD.COM
YTR
5 MAPLE AVE
MORRISTOWN NJ 07960
[redacted]

RECEIVED
MAY 12 2017
CLERK'S OFFICE

SIGNATURE:
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 328 Dewitt St Linden NJ
BLOCK/LOT:

kw TOWNE SQUARE
KELLERWILLIAMS. REALTY

222 Mt Airy Rd
Basking Ridge, NJ
908-766-0085
www.MicheleKlugTeam.com

THE MICHELE KLUG TEAM

To: City of Linden - Construction Department
Fax 908-474-8451

From: Gisele Neres
Fax number: 908-766-2254

Date: May 11, 2017

Regarding: OPRA Request (Construction Dept.)

Contact for follow-up: [redacted]
gisele@micheleklug.com

Comments:

Hi, good morning!

#2017-218

When you have a chance, could you please send a list of applications with all closed and open permits for the property located at:

447 North Stiles St, Linden
Lot: 421
Block: 20

Thank you and have a great week!

Gisele Neres
Transaction Coordinator
[redacted]
The Michele Klug Team
Keller Williams Towne Square Realty

kw TOWNE SQUARE
KELLERWILLIAMS. REALTY

ITY OF LINDEN
PPLICATION FORM

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

EQUEST FOR PUBLIC RECORDS

2017-219

LEASE PRINT)

Name: Brooks E. Doune | Date: 5/11/17

Organization (If Applicable): McElroy, Deutsch, Mulvaney & Carpenter

Mailing Address: 300 Mt. Kemble Ave., P.O. Box 2075

City, State, Zip: Morristown NJ 07962

Home/Business Phone [redacted] E-MAIL bdoune@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)

Copies of contracts, purchase orders, invoices, receipts, proofs of payment, board resolutions and any other documents evidencing payment to The DRS Group for services rendered from January 1, 2014 to the 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)

] LICENSE INFORMATION (SPECIFY)

RECEIVED
MAY 12 2017
CLERK'S OFFICE

IGNATURE:

NFORMATION ON A SPECIFIC PROPERTY:

DDRESS:

LOCK/LOT:

:ITY OF LINDEN
.PPLICATION 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) #2017 - 220

Name: Crystal Ramos | Date: 5/11/2017

Organization (If Applicable): Associatio Online

Mailing Address: 2809 E. Harmony Rd. Suite 100

City, State, Zip: Fort Collins, CO 80528

Home/Business Phone [redacted] E-MAIL CRamos@associationonline.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 writing to find out if there are any open or pending code enforcement issues or open/ expired building permits on the subject property, located in 241 Elmwood Terrace; Linden, NJ 07036. If there are, please provide details of the violations/permits as well as any fee/fine information that may be relevant so they can be resolved at settlement. This is to assist with a closing currently scheduled for 6/9/2017.

☐ 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) PLease provide any and all bills for water/sewer/storm water/trash for the property located at 241 Elmwood Terrace; Linden, NJ 07036.

RECEIVED
MAY 12 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 241 Elmwood Terrace; Linden, NJ 07036

BLOCK/LOT: ______

ITY OF LINDEN
PPLICATION FORM

EQUEST FOR PUBLIC RECORDS

RECEIVED
MAY 12 2017
CLERK'S OFFICE

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

PLEASE PRINT) #2017-221

Name: HARRIS SANDLER | Date: 05/11/2017

Organization (If Applicable): TERRA PARTNERS

Mailing Address: 500 CENTENNIAL AVE

City, State, Zip: CRANFORD, NJ 07016

Home/Business Phone [redacted] E-MAIL HARRIS@TERRAREALTORS.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 STATUS,CODE VIOLATIONS,MUNICIPAL LIENS,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:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 629 S PARK AVE

BLOCK/LOT: 466/13

CITY OF LINDEN
APPLICATION FORM

RECEIVED
MAY 12 2017

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

REQUEST FOR PUBLIC RECORDS

#2017-222

(PLEASE PRINT)

Name: Joanne Bedkowski (E-mail: jbedkowski@hillmanngroup.com) Date: 5/9/2017

Organization (If Applicable): Hillmann Consulting, LLC

Mailing Address: 1600 Route 22 East

City, State, Zip: Union, NJ

Home/Business Phon[redacted]

REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

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

Records regarding above and underground storage tanks, permits and/or violations, spills, and hazardous materials.

☒ 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: Joanne Bedkowski 5/9/2017

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 568 East Elizabeth Avenue, Linden, NJ

BLOCK/LOT: Block: 177, Lot: 1

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

#2017-223

(PLEASE PRINT)

Name: Tina Mulligan Date: 5-12-2017

Organization (If Applicable):

Mailing Address: 409 W. Stimpson Ave.

City, State, Zip: Linden NJ 07036

Home/Business Phone [redacted] E-MAIL PICK UP.

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 looking for a report from a complaint filed on 409 W. Stimpson Ave. Linden on January 12 2017.
and copy of summons issued

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
MAY 12 2017
CLERK'S OFFICE

SIGNATURE: T. Mulligan

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

#2017-224

(PLEASE PRINT)

Name: Jennifer Ramos Date: 5/7/17
Organization (If Applicable): Calcagno & Associates
Mailing Address: 213 South Ave
City, State, Zip: Cranford NJ 07016
Home/Business Phone [redacted] E-MAIL Lori@calcagnolawfirm.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 MVA Reports Dated:
5/7/17 — 5/13/17

☐ 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
MAY 12 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Jennifer Ramos

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: John P Weber JR #2017-226 | Date: 5/10/2017
Organization (If Applicable): =
Mailing Address: 406 West Linden Ave
City, State, Zip: Linden, NJ 07036
Home/Business Phone [redacted] E-MAIL Jne04@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)
CDRSS Report on myself. John P. Weber Jr. DoB [redacted]
Report should be filed on CR about February 2017.
Disease reported: Campylobacteriosis
Case investigator: Arlen - Linden Health Dept

☐ 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
MAY 15 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

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) #2017-227

Name:	Marlane For:
Organization (If Applicable):	HOWARD CHERNOFF
Mailing Address:	2414 MORRIS AVE., SUITE 301
City, State, Zip:	UNION, NJ 07083
Home/Business Phone: [redacted]	E-MAIL: MARLANEC12@GMAIL.COM

Date: May 15, 2017

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

WE REQUEST the decommissioning PAPERWORK FOR UST.
" " " conversion to GAS paperwork.

WE REQUEST ANY OPEN PERMITS ON THE PROPERTY.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL MARLANEC12@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)

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MAY 15 2017
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SIGNATURE:

NFORMATION ON A SPECIFIC PROPERTY

DDRESS: 1157 PASSAIC AVE

LOCK/LOT: BLOCK 74 LOT 12

CITY OF LINDEN
APPLICATION FORM

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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: Diane Mitchell #2017228 Date: 5-15-2017

Organization (If Applicable): TRIPLE J Appraisals LLC

Mailing Address: 100 Creola Ave

City, State, Zip: Nutley, NJ 07110 The number one

Home/Business Phone: [redacted] E-MAIL Dianepov1@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)

Please Send Property Records For:

25 E 14th Street Block 534 Lot 16 owner (Rui)

2132 Caroline Ave Block 4 Lot 8 owner (Alemaw)

☐ 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: Diane Mitchell

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 25 E 14th ST + 2132 Caro Tr Ave

BLOCK/LOT: 534 Lot 16 Block 4 Lot 8

Please E-Mail to My Email is Dianepov1@AOL.com

Cell [redacted] #one

ChildNet
Leading abused children to safety and stability

May 11, 2017

Linden City Clerk
301 N Wood Ave
Linden NJ 07036

RE: Diligent Search on **Stephanie Johanna Casas**

Records Personnel:

Presently, ChildNet, Inc., an authorized provider of the Florida Department of Children and Families, is seeking the **whereabouts** of the above-mentioned individual in reference to a Department of Children and Families Dependency matter. This request is pursuant to the PUBLIC RECORDS LAW (Chapter 119, Florida Statutes). This diligent search is being sought as required by Florida Statute.

NAME: **Stephanie Johanna Casas**
DOB [redacted] SSN: [redacted]
SEX: **Female** RACE: [redacted]
Last Known Addresses: **300 W Morris Ave Apt 1B, Linden NJ 07036**

If information is available regarding this individual's **whereabouts (last known address and/or phone number from 2015 to present)**, please forwarded to along with this letter to my attention.

If no information is available on the above-noted individual, please indicate that on the letter as well. Thank you for your time and cooperation.

Cordially,

Cristina Morris
Diligent Search Specialist
4100 Okeechobee Blvd
West Palm Beach FL 33409
Office #: (561)352-2500, ext. 2471
Fax#: (561) 352-2481
E-mail: cmorris@Childnet.us

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MAY 15 2017
CLERK'S OFFICE

CITY OF LINDEN
APPLICATION FORM

RECEIVED
MAY 15 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: Megan Flynn #2017-229 Date: 5/15/17
Organization (If Applicable): Allstate New Jersey Insurance Company
Mailing Address: 35 North Main st
City, State, Zip: Marlboro, NJ 07746
Home/Business Phone [redacted] E-MAIL MeganFlynn@Allstate.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 I please Have a Copy of the property Card for Block: 425 Lot: 16
Address: 214 Bradford Ave 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: Megan Flynn

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

Place Logo Here

AGENCY NAME HERE

OPEN PUBLIC RECORDS ACT REQUEST FORM

Agency Address
Agency Telephone Number & Fax Number
Agency e-mail address 908-474-8451
Name of Agency Custodian

Place Logo Here

Important Notice

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

Requestor Information – Please Print #2017-230

First Name Carly MI ____ Last Name Kaminsky

E-mail Address Carly@brinksconsulting.com

Mailing Address 125e Liberty Ave

City Hillside State NJ Zip 07205

Telephone [redacted] FAX (908)353-3107

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

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

Signature Carly Kaminsky Date 5/15/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

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

Delivery: Delivery / postage fees addition al depending upon delivery type.

Extras: Special service charge dependent upon request

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

Please provide a list of permit applications for the installation, Removal or the decomissioning of Underground Storage tanks at: 2124 Alberta Ave, Linden, NJ 07036

Block# 5 Lot# 6

AGENCY USE ONLY

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

Deposit Date ____

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information

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

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____
Records Provided

RECEIVED
MAY 15 2017
CLERK'S OFFICE

Custodian Signature ____ Date ____

'Y OF LINDEN
'LICATION FORM

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

QUEST FOR PUBLIC RECORDS

(LEASE PRINT)
me: George Cooper Date: 5/15/17
ganization (If Applicable):
iling Address: #2017-231
y, State, Zip: [redacted]
me/Business Phone [redacted] E-MAIL
QUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

Board of Health Complaints
Copy of code violations
Copy of board of health summons

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
MAY 15 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

IGNATURE:
FORMATION ON A SPECIFIC PROPERTY:
DDRESS: 823 DeWitt Street

OCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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: NORA ZUKERMAN #2017-232 | Date: 06-15-17
Organization (If Applicable): STRUKER REALTY
Mailing Address: 188 ESSEX ST
City, State, Zip: HILLSIDE NEW JERSEY 07041
Home/Business Phone [redacted] E-MAIL NORA@THEDANGROUP.NET
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

I WILL LIKE TO RECEIVE ALL PAST & PRESENT PERMITS OPEN OR CLOSE FOR THE PROPERTY LISTED BELOW.

I WOULD ALSO LIKE TO RECEIVE INFORMATION ON A BURIED OR 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)

RECEIVED
MAY 15 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Nora Zukerman

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 2411 ORCHARD TERRACE LINDEN, NJ 07036
BLOCK/LOT: 262 / 2

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

RECEIVED
MAY 15 2017
CLERK'S OFFICE

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

(PLEASE PRINT) #2017-233 Date: 5-15-2017

Name: Sarah Smoone

Organization (If Applicable): Triad Professional Svcs.

Mailing Address: 1720 Windward Concourse, Ste. 330

City, State, Zip: Alpharetta, GA 30005

Home/Business Phone [redacted] E-MAIL Smoone@triadpros.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

smoone@triadpros.com

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

Any municipal liens filed on the following
address:

2500 Allen Street, Linden NJ 07036

ANY MUNICIPAL liens filed 2500 ALLEN STREET

☐ 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)

Thank you!

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Sarah Smoone

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 2500 Allen Street, Linden NJ 07036

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

RECEIVED
MAY 16 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

2017-234

(PLEASE PRINT)

Name: JACQUELINE VENEZIO-HOGAN Date: 5-15-17
Organization (If Applicable): ALL TOWNE REALTY
Mailing Address: 30 BRANT AVE
City, State, Zip: CLARK NJ 07066
Home/Business Phon [redacted], E-MAIL JackiVenezio@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)

REQUESTING TO SEE IF A PERMIT WAS TAKEN OUT TO REMOVE 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
JACKIVENEZIOQGMAIL.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) 1539681 NJ REAL ESTATE COMMISSION

SIGNATURE: Jacqueline Venezio

INFORMATION ON A SPECIFIC PROPERTY
ADDRESS: 1507 LENAPE RD, LINDEN
BLOCK/LOT BLOCK 393 LOT 24

'Y OF LINDEN
'LICATION FORM

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

QUEST FOR PUBLIC RECORDS

2017-235

ASE PRINT)

me: Rebecca Santiago | Date: 5/16/17

ganization (If Applicable):

iling Address: 568 W. 6th Ave

y, State, Zip: Roselle, NJ 07203

me/Business Phone [redacted] E-MAIL santiare@yahoo.com

QUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

SCRIPTION OF PUBLIC RECORD(S):

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

Years: 2011-2014 SSN: [redacted]

DOB: 09/03/1991

escription: arrested for shoplifting at the target in linden

ICE Case Number: 2012-338307

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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CLERK'S OFFICE

GNATURE: Rebecca Santiago

FORMATION ON A SPECIFIC PROPERTY:

DRESS:

OCK/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) 2017-236

Name: BERNADETA GODEK	Date: 05.15.2017
Organization (If Applicable): RE/MAX 1ST ADVANTAGE	
Mailing Address: 727 RARITAN RD.	
City, State, Zip: CLARK NJ 07066	
Home/Business Phone [redacted] E-MAIL BERNADETA.E.GODEK@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 1960 TO PRESENT

OIL TANK HISTORY FROM 1960 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)

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CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: B. Godek

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 418 CABLE LN
BLOCK/LOT: 563 / 35

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

#2017-237

(PLEASE PRINT)

Name: Andrew Kesler	Date: 5/16/17
Organization (If Applicable):	
Mailing Address: 270 Rutherford Blvd	
City, State, Zip: Clifton NJ 07014	
Home/Business Phon[redacted]	E-MAIL MAKAppraiser@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)

Current use, potential use and most recent Certificate of Occupancy for:

1905 North Wood Ave - Block 232 Lot 2

Is this Residential or Commercial use if it is a legal office

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL MAKAppraiser@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)

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MAY 16 2017
CLERK'S OFFICE

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1905 North Wood Ave

BLOCK/LOT: 232/2

ITY OF LINDEN
PPLICATION FORM

EQUEST FOR PUBLIC RECORDS

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

#2017-238

'LEASE PRINT)

Name: Donna Brillante — Date: 05/16/2017

Organization (If Applicable): L. Paradise Appraisals Co.

Mailing Address: 33 Clinton Rd, Su e 103

City, State, Zip: West Caldwell, N J 7006

Home/Business Phone: [redacted] E-MAIL r.paradiseappraisals@verizon.net

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RE RD(S):

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

We are doing an Appraisal on 138 S. Stiles S , Linden and would appreciate a copy of the Property Record Card

Block: 469 Lot: 12

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

☐ PREPARE PHOTOCOPIES OF AL EQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPEC F)

RECEIVED
MAY 16 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 138 S. Stiles Street

BLOCK/LOT: 469/12

'Y OF LINDEN
'LICATION FORM

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

QUEST FOR PUBLIC RECORDS

#2017-239

ASE PRINT)

me: BLAZEJ ORZECHOWSKI | Date: 5/16/17

ganization (If Applicable):

iling Address: 130 OXFORD RD

y, State, Zip: CINNAMINSON NJ 08077

me/Business Phone [redacted] E-MAIL stoneagegranite@yahoo.com

QUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

SCRIPTION OF PUBLIC RECORD(S):

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

I need police report and las report.

case #: 04-360752

lazej Orzechowski 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)

LICENSE INFORMATION (SPECIFY)

RECEIVED
MAY 16 2017
CLERK'S OFFICE

GNATURE:

FORMATION ON A SPECIFIC PROPERTY:

DRESS:

OCK/LOT:

Y OF LINDEN
PLICATION FORM

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

QUEST FOR PUBLIC RECORDS

#2017-240

EASE PRINT)

me: ISAAC GUILLEN | Date: 5/16/17

ganization (If Applicable):

iling Address: 67 Fenmore Ave

y, State, Zip: Elizabeth NJ 07202

me/Business Phone [redacted] E-MAIL igghomes@gmail.com

QUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

if there was an oil tank remove from the property
If not where is it located

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)

GNATURE:

FORMATION ON A SPECIFIC PROPERTY:

DRESS: 426 Ainsworth St, Linden NJ

OCK/LOT: 247 / 21

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

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

#2017-241

PLEASE PRINT)

Name: Danielle Zabala | Date: 5/17/17

Organization (If Applicable):

Mailing Address:

City, State, Zip:

Home/Business Phone E-MAIL

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX (718) 472-1402

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

Any open 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:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 10 N. Wood Ave Unit 210

BLOCK/LOT: 210 | 12

CITY OF LINDEN
APPLICATION FORM

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) # 2017-243

Name: Sheneetra Scroggins | Date: 5/16/2017

Organization (If Applicable): Planning and Zoning Resource Company

Mailing Address: 1300 South Meridian Ave, Suite 400

City, State, Zip: Oklahoma City, OK, 73108

Home/Business Phone: [redacted] E-MAIL: sheneetra.scroggins@pzr.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 copies of any open/active zoning, building and fire code violations, certificates of occupancy, final approved site plan, variances and special/conditional use permits for the property mentioned below. Please do not exceed $35 in fees without prior approval. (PZR Ref #102719-1)

☐ 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
MAY 18 2017
CLERK'S OFFICE

SIGNATURE: Sheneetra Scroggins

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 2500 Allen Street

BLOCK/LOT: Block 586 / Lot 1

TY OF LINDEN
PLICATION FORM

:QUEST FOR PUBLIC RECORDS

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

#2017-244

EASE PRINT)

ame: Tricia Murch | Date: 5/22/17

:ganization (If Applicable): Permit Solutions Inc.

ailing Address: 161 Delaware Ave

ty, State, Zip: Oakhurst NJ 07755

ome/Business Phone [redacted] E-MAIL permitsolutions@optonline.net

EQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

ESCRIPTION OF PUBLIC RECORD(S):

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

Verify current use as 1 commercial unit (1st floor) and 3 residential units are a legal [redacted] non-conforming, pre-existing use.

Verify if any open permits exist or any violations have been issued

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

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE commercial & apt building.

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
MAY 22 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

IGNATURE: Tricia Murch - 732 642 5262

IFORMATION ON A SPECIFIC PROPERTY:

)DRESS: 609 Roselle St

LOCK/LOT: 171 / 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

2017-245

(PLEASE PRINT) Date: 5/19/17

Name: Jennifer Ramos

Organization (If Applicable): Calcagno & Associates

Mailing Address: 213 South Ave

City, State, Zip: Cranford NJ 07016

Home/Business Phone: [redacted] E-MAIL Lori@calcagnolawfirm.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 MVA Reports Dated:

5/14/17 — 5/20/17

☐ 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
MAY 19 2017
CLERK'S OFFICE

SIGNATURE: Jennifer Ramos

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

RECEIVED
MAY 22 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

#2017-240

(PLEASE PRINT)

Name: Vincenzo Bonello

Date: 5/22/17

Organization (If Applicable):

Mailing Address: 164 Serpentine Dr.

City, State, Zip: Morganville NJ 07751

Home/Business Phone [redacted] E-MAIL VBonello@optonline.net

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 Police report made against Jayson Fiba and Bartsman Tucker between 3/10/17 to present @ 526 E St. Georges Avenue

☐ 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: Vincenzo Bonello

NFORMATION ON A SPECIFIC PROPERTY:

DDRESS:

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

#2017-247

(PLEASE PRINT)

Name: Diana Montgomery | Date: 05.02.17

Organization (If Applicable): Massey Consulting Group

Mailing Address: 1801 NE 135th St, Suite B

City, State, Zip: Oklahoma City OK 73131

Home/Business Phone [redacted] E-MAIL dianam@masseyzoning.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 a copy of any open building or zoning code violations for the property at 1001 & 1051 E Edgar Rd, Block 437, Lots 5.02 & 5.01

☐ 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
MAY 22 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1001 & 1051 E Edgard Road

BLOCK/LOT: 437/5.02 & 5.01

Rafael Grandolff
2017-249

The Vertex Companies is conducting a Property Condition and Environmental Site Assessment of the Preferred Freezer Services building at 2710 Allen Street Extension Linden, NJ 07036. As part of our due diligence process we would like to request files from the following departments:

Construction / Building Department

1) Are there any open building code violations, or unresolved building safety issues on file for the property? Please Provide brief description of any violation(s) or open issue(s)
2) Does the building have a current Certificate of Occupancy? If yes, can a copy be provided?
3) Are there specific items (such as elevators, backflow preventors) that the municipality may require updating to current codes, even if no renovations or use changes are planned? In other words, are there any "non-grandfathered" items required at the property due at a certain date? If yes, please describe 4) Are there any available records of original building plans or Underground Storage Tanks pertaining to
the property? If yes, please provide copies

Fire Department / Fire Prevention

1) Are there any open fire code violations, or unresolved fire safety issues on file for this property? If yes, please describe
2) Does your Department inspect the property regularly? If yes, can a copy of the most recent inspection be provided?
3) Are there any available records of Tier II Reports, hazardous materials, spills or releases from tanks at this property?

Zoning Department

1) What is the current zoning at the property?
2) Are there any open zoning code violations, or unresolved zoning issues on file for the property?

Water Department

1) any available records regarding sewer connection date, evidence of septic tanks or drywells, or reports of discharges or spills at the above referenced property.

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) #2017-250

Name: Joseph Tomaino | Date: 5/22/17
Organization (If Applicable): Landman Corsi Ballaine & Ford P.C.
Mailing Address: One Gateway Center 4th Floor
City, State, Zip: Newark NJ 07102
Home/Business Phone [redacted] E-MAIL jtomaino@lcbf.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Inspection Records, Certificates of occupancy, Job Specifications, blue prints, drawings, Engineer or Architect designs / Violations, and 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)

RECEIVED
MAY 22 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 126 East Lincoln Avenue - Building 92 aka TBZ Building, Linden NJ 07036

BLOCK/LOT:

TY OF LINDEN
PLICATION FORM

QUEST FOR PUBLIC RECORDS

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

#2017-251

EASE PRINT)

ame: ELIZABETH PRZYDZIAL | Date: 05/22/17

ganization (If Applicable): REALTOR

ailing Address: 21 BRANT AVE

ty, State, Zip: CLARK, N.J. 07066 COLDWELL BANKER.COM

ome/Business Phone [redacted] E-MAIL ELIZABETH.PRZYDZIAL@

QUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

PLEASE PROVIDE ALL PERMITS TAKEN FOR THE PROPERTY LOCATED AT 24 E PRICE STREET, OIL TANK REMOVAL AND COPY OF TITLE SURVEY. ANY INFORMATION PERTAINING THE DRIVEWAY (IF IT'S SHARED)

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL
ELIZABETH.PRZYDZIAL@COLDWELLBANKER.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
MAY 22 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

IGNATURE:

NFORMATION ON A SPECIFIC PROPERTY:
DDRESS: 24 E. PRICE ST. LINDEN, N.J. 07036

LOCK/LOT:

TY OF LINDEN
PLICATION FORM

QUEST FOR PUBLIC RECORDS

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

#2017-252

EASE PRINT)
ame: Aleysys Lazo | Date: 5/23/2017
rganization (If Applicable):
ailing Address:
ty, State, Zip:
ome/Business Phor [redacted] MAIL Alaz089@yahoo.com
EQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

Copies of any and 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)

RECEIVED
MAY 23 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

IGNATURE:
IFORMATION ON A SPECIFIC PROPERTY:
DDRESS: 825 Laurita Street
OCK/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: Fred Puglese 650 # 2017-253

Organization (If Applicable):

Date: 5-23-17

Mailing Address: 503 Washington AVE

City, State, Zip: Kenilworth NJ 07033

Home/Business Phone [redacted] E-MAIL FmPG@Hotmail-NewJersey.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

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

REC PB App # SP-1057-16

1) List of all Property Owners who recieved Notice of Application

2) Copy of Notice

3) Certified Mail reciept for delivery to 2301 E. Edgar Road

☐ 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
MAY 23 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

GNATURE:

ORMATION ON A SPECIFIC PROPERTY:

DRESS: 2309 E. Edgar Road, Linden

CK/LOT: Block 434 Lots 10, 11, 12

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) #2017-254

Name: Lucy Izzundu	Date: 05/23/17
Organization (If Applicable): Progressive Insurance	
Mailing Address: 162 West St.	
City, State, Zip: South Plainfield NJ 07080	
Home/Business Phone [redacted] E-MAIL A104649@progressive.com	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

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

Surveillance footage of an accident on 04/30/17 at the intersection of S. Stiles and US1 at 5:32 am. Our insured was in a white Red Edge and the other driver in a grey Honda Odyssey. One driver left the scene in an ambulance.

☐ 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
MAY 23 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

ITY OF LINDEN
PPLICATION FORM

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

EQUEST FOR PUBLIC RECORDS

2017-255

LEASE PRINT)

Name: MALIK JENKINS | Date: 5-22-17

Organization (If Applicable):

Mailing Address: 520 BUCHANAN ST

City, State, Zip: HILLSIDE NEW JERSEY 07205

Home/Business Phone [redacted] E-MAIL SMBROTHER13@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)

I WOULD LIKE A LIST OF VACANT PROPERTIES IN THE CITY OF 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)

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MAY 23 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Malik Jenkins

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

#2017-250

(PLEASE PRINT)

Name: Connor Montferrat | Date: 5/24/2017
Organization (If Applicable): Otteau Group, Inc.
Mailing Address: 100 Matawan Road, Suite 320
City, State, Zip: Matawan, NJ 08520
Home/Business Phone [redacted] E-MAIL connor.montferrat@otteau.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☒ FAX

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

* The permitted uses and bulk zoning requirements for Block 91, Lots 1-12, and Block 84, Lots, 1, 4, 5, 6, and 7.
* The resolution from the city and/or planning board naming the redeveloper of the property pertaining to Block 91, Lots 1-12, and Block 84, Lots, 1, 4, 5, 6, 7
* The resolution from the city and/or planning board naming Block 91, Lot 1-12, and Block 84, Lots, 1, 4, 5, 6, 7 as an "area of redevelopment."
* The Redevelopment Plan for Block 91, Lots 1-12, and Block 84, Lots 1, 4, 5, 6, and 7.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

RECEIVED
MAY 24 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) Redevelopment Plan for Block 91, Lots 1-12 & Block 84, Lots 1, 4, 5, 6, 7; if it exists, if not please advise.

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: East Saint Georges Ave, East Baltimore Avenue, John St, Union St, Charles St
BLOCK/LOT: 91/1-12 & 84/1, 4-7

'Y OF LINDEN
'LICATION FORM

RECEIVED
MAY 24 2017
CLERK'S OFFICE

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) #2017-258
ne: Pat Lhoncek Date: 5/24/2017
anization (If Applicable):
ling Address: 200 Croton Lake rd.
, State, Zip: KATONAH NY
me/Business Phon[redacted] E-MAIL peklast@yahoo.com
QUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

SCRIPTION OF PUBLIC RECORD(S):
ase be specific and attach additional pages of information if necessary)
CASE #: Copy of police report - case #1999-013042
1999 Dated 4/23/1999

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)

GNATURE: Pat Lhoncek

ORMATION ON A SPECIFIC PROPERTY:
DRESS:
OCK/LOT:

RECEIVED
MAY 24 2017
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) #2017-259

Name: Ron Virgilio	**Date:** 5/23/17
Organization (If Applicable): RE/MAX Properties Unlimited	
Mailing Address: 143 Elmer Street	
City, State, Zip: Westfield, NJ 07090	
Home/Business Phone [redacted] **E-MAIL** ronvirgilio@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)

Requesting copies of all open or closed permits issued since 1990 for 437 N. Stiles St. Also need a copy of the property record card.

☐ 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: *Ronald Virgilio*

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 437 N. Stiles St.

BLOCK/LOT: 421/22

TOWNSHIP OF LINDEN
OPEN PUBLIC RECORDS ACT REQUEST FORM

MUNICIPAL BUILDING,
301 N. WOOD AVE., LINDEN, NEW JERSEY 07036
Fax: 908-474-8461

#2017-260

Important Notice

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

Requestor Information – Please Print

First Name W. LANE MI ____ Last Name MILLER

E-mail Address lane@wlmillerlaw.com

Mailing Address 1203 US Highway 9 South

City Woodbridge State NJ Zip 07095

Telephone [redacted] FAX 732-855-9898

Preferred Delivery: Up ____ US Mail ____ On-Site Inspect 3 Fax 2 E-mail 1
NUMBERED IN ORDER OF PREFERENCE

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

Signature W. Lane Miller Date 5-24-17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

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

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

Extras: Special service charge dependent upon request.

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

PROPERTY: Block 421, Lot 15.02. aka 1200 Fuller Road, Linden, New Jersey

FROM THE ZONING DEPARTMENT,
CONSTRUCTION/BUILDING DEPARTMENT,
CODE ENFORCEMENT DEPARTMENT,
FIRE DEPARTMENT AND
HEALTH DEPARTMENT
AS RELEVANT/AVAILABLE:

Any documents relating to-

OPEN OR PENDING NOTICES OF VIOLATIONS,
PERMITS/APPROVALS,
CERTIFICATE OF OCCUPANCY (Building and each Tenant/Unit)
USE RESTRICTIONS,
RECORDS RELATING TO UNDERGROUND TANKS OR RELEASE OF HAZARDOUS WASTES/CONTAMINENTS

RECEIVED
MAY 24 2017
CLERK'S OFFICE

AGENCY USE ONLY

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

Deposit Date ____

AGENCY USE ONLY

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

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

AGENCY USE ONLY

Tracking Information

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

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

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

#2017-201

(PLEASE PRINT)

Name: JOSE CASTANON | Date: 5/25/17

Organization (If Applicable): Professional Claims Solutions on behalf of NJPLIGA

Mailing Address: 4 Industrial way west

City, State, Zip: Eatontown, NJ 07724

Home/Business Phone [redacted] E-MAIL JCASTANON@PROCLAIMSSOLUTIONS.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 need a copy of the video surveillance footage from Park View Tavern from the accident/incident on 11/6/16 (CASE # 16049015)

- we also need a copy of the final police report conducted by Investigator Hammer stating there were no charges issued and investigation is complete.

☐ 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
MAY 25 2017
CLERK'S OFFICE

SIGNATURE: [signature]

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 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

#2017-262

(PLEASE PRINT)

Name: Vera Soares / Elionai Mercedes | Date: 5/25/2017

Organization (If Applicable): Keller Williams MidTown Direct

Mailing Address: 444 Westminester Ave Apart. #29

City, State, Zip: Elizabeth NJ 07208

Home/Business Ph[redacted] E-MAIL verasoaresrealtor@gmail.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)

I need to know if this property has any open permits, if there was ever a inground oil tank removed.

☐ 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
MAY 25 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Vera Soares dotloop verified 05/25/17 11:28AM EDT TTJV-DFRK-SPIX-P1G8

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 151 E Stimpson Ave.

BLOCK/LOT: Block 443 Lot 11

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

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MAY 25 2017
CLERK'S OFFICE

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

(PLEASE PRINT) # 2017-263

Name: PAULA MATOS Date: 5/25/17

Organization (If Applicable): Coldwell Banker

Mailing Address:

City, State, Zip:

Home/Business Phone [redacted] E-MAIL paula.matos@cbnewjersey.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 records and any open permits pertaining to:

41 W 18th St. 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)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Paula Matos

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 41 W 18th St.

BLOCK/LOT: 549 / 2

RUSH PLEASE

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) #2017-204

Name: Marisol Holloway | Date: 5/25/17

Organization (If Applicable): Everbank

Mailing Address: 10 Woodbridge Center Dr 7th Floor

City, State, Zip: Woodbridge NJ 07095

Home/Business Phone: [redacted] E-MAIL: Request.holloway@everbank.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX 732-543-4505

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

Please provide copy of all permits for this property & certificate of occupancy.

Please send us an estimate ASAP as request is pending.

☐ 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: 435 Washington Ave Linden NJ 07036

BLOCK/LOT: 212 Lot 2

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

2017 - 265

(PLEASE PRINT)

Name: Casey Hart | Date: 05/25/2017

Organization (If Applicable): The ELM Group, Inc.

Mailing Address: 345 Wall Street, Research Park

City, State, Zip: Princeton, NJ 08540

Home/Business Phone: [redacted] E-MAIL chart@elminc.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 review all files maintained by your Construction Code Department, Engineering Department, Health Department, Fire Department, Environmental Commission and Tax Assessor regarding the below referenced property. Files of importance include but are not limited to self-reporting, violations, NJDEP correspondence, USTs, ASTs, hazardous materials (use, storage or spills), wetlands, historic property ownership and development, zoning, health issues, septic fields, fires and on-site potable wells. Please also include any maps, site plans, building plans, aerials, zoning or tax maps for the property.

Please provide any available files via email (chart@elminc.com) if available. Otherwise, I would like to review the files in person.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL
Please send any available documents via email. If documents are not available electronically then I would like to review the documents in person.

☐ 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
MAY 25 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1711 West Elizabeth Avenue, Linden, Union County, New Jersey

BLOCK/LOT: Block 423, Lot 20

Y OF LINDEN
'LICATION FORM

)UEST FOR PUBLIC RECORDS

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

ASE PRINT) # 2017 - 2660

ne: RUDY WONG | Date: MAY 26, 2017

anization (If Applicable): 1719 LEXINGTON AVE. REALTY INC.

ling Address: 511 OLD POST ROAD

, State, Zip: EDISON NJ 08817

me/Business Phone [redacted] E-MAIL RUDY.WONG@GMAIL.COM

QUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

LL CONSTRUCTION PERMITS, DRAWINGS, AND RELATED BUILDING INFORMATION
OR 601 EAST LINDEN AVE BETWEEN 1940 TO 2007

IF THE FILE IS LARGE REQUESTOR
WILL REVIEW THEM IN PERSON

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
MAY 26 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

GNATURE:

FORMATION ON A SPECIFIC PROPERTY:
DRESS: 601 EAST LINDEN AVE, LINDEN NJ

OCK/LOT: BLOCK 438 LOT 12

ITY OF LINDEN
PPLICATION FORM

EQUEST FOR PUBLIC RECORDS

RECEIVED
MAY 30 2017
CLERK'S OFFICE

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

2017-268

'LEASE PRINT)

Name: David High | Date: May 25, 2017

Organization (If Applicable): EBI Consulting

Mailing Address: 241 E. Orange Street

City, State, Zip: Lancaster, PA 17602

Home/Business Phone [redacted] E-MAIL dhigh@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)

Regarding the property at 2710 Allen Street, Linden, NJ (Lot 4, Block 586), I am requesting a list of any and all open building and / or fire code violations. I am also requesting a copy of the Certificate 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:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 2710 Allen Street, Linden NJ

BLOCK/LOT: Block 4 Lot 586

Chelsea Libreros # 2017-267

From: mike pellerin <m_pellerin@hotmail.com>
Sent: Sunday, May 28, 2017 1:47 PM
To: Chelsea Libreros
Subject: Re: OPRA REQUEST RESPONSE

From: **Michael Pellerin**
145 Pennypacker Drive
Willingboro, NJ. 08046

To: **Linden, NJ. Police Department**

re: **Open Public Records Act (OPRA) Request**
Anthony William FANNIEL [redacted], a.k.a. 'Tony'
Shirley A. FANNIEL [redacted] by Anthony W. FANNIEL in Roselle, NJ)
George T. FANNIEL [redacted] of same on 10.2.1991 by Anthony W. FANNIEL in Roselle, NJ)

Update

I have reason to believe that the aforementioned subjects resided at the following Linden, NJ address:

712 Lincoln, Linden, NJ.

Approximate date of residency:

Residency at this location is believed to have **ended in 1990-1991.**

It is my understanding that this family moved/relocated to 343 East 7th Avenue in early 1991. It was later that year that Anthony [redacted] Shirley), an Essex County Family Court employee, and [redacted] George), a retired truck driver and church deacon.

I am looking for any police contact with one, or more members of this family, particularly as it might illustrate criminal tendencies in the case of Anthony.

Please conduct a diligent search of your records for the requested information. I look forward to hearing from you as soon as possible.

Sincerely,
Mike Pellerin

From: Chelsea Libreros <CLibreros@linden-nj.org>
Sent: Friday, May 12, 2017 2:45 PM
To: m_pellerin@hotmail.com
Subject: FW: OPRA REQUEST RESPONSE

TY OF LINDEN
PPLICATION FORM

EQUEST FOR PUBLIC RECORDS

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

#2017-269

EASE PRINT)

Name: Izzy Azevedo | Date: 05/26/2017

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

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

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MAY 30 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: X

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 443 Fernwood Ter Linden NJ 07036

BLOCK/LOT: 364/11

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

Rec'd 5/30/17

(PLEASE PRINT) #2017-270

Name: Erica Perez | Date:
Organization (If Applicable): Coldwell Banker Liberty
Mailing Address: 67 Elmora Ave
City, State, Zip: Elizabeth NJ 07202
Home/Business Phone [redacted] E-MAIL erica@homesliberty.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 any open permits and final approval for above ground pool and boiler

☐ 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 permits and fina approval for above ground pool and boiler

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 111 Thelma Ter, Linden, NJ 07036
BLOCK/LOT: 274/13

TY OF LINDEN
PLICATION FORM

QUEST FOR PUBLIC RECORDS

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

2017-271

EASE PRINT)
me: RANDOLPH BRAVO | Date: 5-30-17
ganization (If Applicable):
iling Address: 1844 ARBOR LANE
y, State, Zip: UNION, NJ 07083
me/Business Phone [redacted] E-MAIL RANDY@RANDYBRAVO.COM
QUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

SCRIPTION OF PUBLIC RECORD(S):
ease be specific and attach additional pages of information if necessary)
ALL LIQUAR LICENCES RENEWED IN 2016 FOR THE
ITY OF LINDE PLEASE PROVIDE BUSINESS NAME,
DDRESS AND BUSINESS OWNER

LEASE ALSO. PROVIDE ALL BEAUTY SALON LICENSES
UED IN 2015-2016. PROVIDE BUSINESS NAME, OWNER
ND ADDRESS

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

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL RANDY@RANDYBRAVO.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)

RECEIVED
MAY 30 2017
CLERK'S OFFICE

OTHER (SPECIFY)

LICENSE INFORMATION (SPECIFY)

GNATURE:

FORMATION ON A SPECIFIC PROPERTY:
DDRESS:
OCK/LOT:

:TY OF LINDEN
:PLICATION FORM

EQUEST FOR PUBLIC RECORDS

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

2017-272

LEASE PRINT)

Date: 5/30/2017

Name: James Valliere

Organization (If Applicable): ADA Solutions, Inc.

Mailing Address: 323 Andover St. Suite 3

City, State, Zip: Wilmington, MA 01887

Home/Business Phone [redacted] E-MAIL James@ADAtile.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

am requesting the Bid Results for the project titled "Milling and Resurfacing" that Bid on May 5, 2017. Please send the results via James@adatile.com
f emailing the results is not possible send them to 978-262-9125 "attn: James or Paul"

☐ 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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MAY 30 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

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

2017-273

(PLEASE PRINT)

Name: Brittany Smith Date: 5/30/17
Organization (If Applicable):
Mailing Address: 170 Kinnelon Road
City, State, Zip: Kinnelon, NJ 07405
Home/Business Phone [redacted] E-MAIL Brittany S@cisleads.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 a copy of only those pages of the Planning Board application for Swan Recreation Inc. 281-301 W. Edgar Road please include the name, address, and telephone number for the owner, applicant, architect, engineer, and attorney.

☐ 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
MAY 30 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Brittany Smith

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

2017-274

(PLEASE PRINT)

Name: Juliana Gibbs | Date: 05/30/2017

Organization (If Applicable): RE/MAX PROPERTIES UNLIMITED

Mailing Address: 137 ELMER ST

City, State, Zip: WESTFIELD, NJ, 07090

Home/Business Phon[redacted] E-MAIL juliana@rehomepros.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 Permits

Open Permits

Permits Taken Last 25 years

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL
Juliana@rehomepros.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)

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MAY 30 2017
CLERK'S OFFICE

SIGNATURE *Juliana Gibbs* docloop verified 05/30/17 3:43PM EDT PLYU-ZAEO-L7K0-VWVS

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 824 Allen St. Linden NJ 07036

BLOCK/LOT: 473/4

Y OF LINDEN
'LICATION FORM

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MAY 31 2017
CLERK'S OFFICE

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

QUEST FOR PUBLIC RECORDS

2017-275

ASE PRINT)

ne: Alida Holden | Date: 5-31-17

anization (If Applicable): ERA Suburbs

ling Address: 1773 E 2nd St

, State, Zip: Scotch Plains NJ 07076

me/Business Phone [redacted] E-MAIL AlidaHoldenERA@gmail.com

QUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

SCRIPTION OF PUBLIC RECORD(S):

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

Please provide CLOSED permits for underground oil tank removal permit 13-0599 and for conversion from oil to gas furnace installation.

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)

GNATURE: [signature]

ORMATION ON A SPECIFIC PROPERTY:

DRESS: 350 Livingston Rd, Linden

OCK/LOT: 326 / 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

2017 - 276

(PLEASE PRINT)

Name: Qi Zhang | Date: 5/31/2017

Organization (If Applicable): Prestige Environmental, Inc.

Mailing Address: 220 Davidson Ave, Suite 307

City, State, Zip: Somerset, NJ 08873

Home/Business Phone [redacted] E-MAIL qi@prestige-environmental.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 conducting an Environmental Site Assessment at the property and seeking all records relating to hazardous waste, underground, aboveground storage tank, environmental violations or emergency response.

We are looking for the following documents:

UST removal permits, construction permits, plumbing permits, hazmat response, AST records, notice of violations issued, hazardous chemicals inventory, right to know information, building permits, pumping excavation, spills and remediation documents.

☐ 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
MAY 31 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: Site Address: 40 W Price St., Union County, Linden, NJ 07036

BLOCK/LOT: Block 252, Lot 11

ITY OF LINDEN
PPLICATION FORM

EQUEST FOR PUBLIC RECORDS

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

2017-277

LEASE PRINT)

lame: AMALIA VACCA | Date: 5/31/2017

rganization (If Applicable): CENTURY 21 ALLIANCE

Iailing Address: 867 NO. STILES ST

ity, State, Zip: LINDEN NJ 07036

Iome/Business Phone [redacted] E-MAIL VAMALIA@OPTONLINE.NET

EQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

ESCRIPTION OF PUBLIC RECORD(S):

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

RESULTS OF CERT OF OCC INSPECTION (LAST)

ANY OPEN PERMITS

open liens and/or sewer bills balances

Board of Health inspection reports

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
MAY 31 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

IGNATURE:

NFORMATION ON A SPECIFIC PROPERTY:

DDRESS: 315 ROSELLE ST, LINDEN, NJ

LOCK/LOT: 3 BLOCK: 174

Century 21
ALLIANCE REALTY
867 North Stiles Street
Linden, NJ 07036
908-587-5222 Office
[redacted]
908-925-5495 Fax
amalia.vacca@CENTURY21.com
WWW.C21AR.NET
Each Office is Independently Owned and Operated

Amalia "Amy" Vacca, GRI, CDPE
Broker/Associate
REO Specialist

Y OF LINDEN
PLICATION FORM

QUEST FOR PUBLIC RECORDS

RECEIVED
MAY 31 2017
CLERK'S OFFICE

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

ASE PRINT) # 2017-278

me: Yvette Padilla Date: 5/31/17

ganization (If Applicable): Neuhaus Realty

iling Address: 409 Woodlawn Ave

y, State, Zip: Linden NJ 07036

me/Business Phone [redacted] MAIL Yvette.homesweethome@gmail.com

QUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

SCRIPTION OF PUBLIC RECORD(S):
ase be specific and attach additional pages of information if necessaty)

oil tank
open / closed 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)

GNATURE: Yvette Padilla

ORMATION ON A SPECIFIC PROPERTY:
DRESS: 903 Summit Street Linden NJ 07036

OCK/LOT: