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: Nekate Tatiane Barbosa | Date:
Organization (If Applicable):
Mailing Address: 405 Gable lane
City, State, Zip: Linden NJ 07036
Home/Business Phone E-MAIL
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

Complete

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

Copy of own marriage application for Brazilian Wedding

☐ INSPECT / VIEW DOCUMEI
☐ PREPARE PHOTOCOPIES O
☐ SEND RESPONSE BY E-MAI
☐ COPY OF MINUTES (SPECIF
☐ COPY OF ORDINANCE OR

file in completed opra's → ask Chelsea.

RS)
E
IDENTIFYING INFORMATION)
IER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Nekate Barbosa

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

#2017-459

(PLEASE PRINT)

Name: Maryllizette Jimenez | Date: 07|31|2017
Organization (If Applicable): Law Office of Jessica Chanin, LLC
Mailing Address: 80 Main St. STE 350
City, State, Zip: West Orange, NJ 07052
Home/Business Phone: [redacted] E-MAIL mary@chaninlaw.net
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Attorney Request for copy of police incident report.
Date of Incident: 04|05|2015
Victim: Lizeth Rodriguez (DOB 06|25|1985)
Defendant: Griendo Bresseyda Cerritos Rodriguez (DOB 09|18|1989)

☐ 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
AUG 01 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: _____

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

#2017-460

(PLEASE PRINT)

Name: Leslie Blanchard | Date: 8/1/17
Organization (If Applicable): Keller Williams NJ Metro Group
Mailing Address: 15 Bloomfield Ave.
City, State, Zip: Montclair NJ 07042
Home/Business Phon[redacted] MAIL LBlanchardRE@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)
Would like to know if there was ever a fire at 81 E. Curtis St.

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

☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

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☒ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 81 E Curtis St.
BLOCK/LOT: 119/18

PPLICATION FORM

EQUEST FOR PUBLIC RECORDS

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

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(2017-462)

LEASE PRINT)
Name: Wilkia Exy Louis | Date: 08-02-17
Organization (If Applicable):
Mailing Address: 720 A Cleveland AVE
City, State, Zip: Linden, New Jersey 07036
Home/Business Phone [redacted] E-MAIL wilkiaalmonte@yahoo.com
EQUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

Delinquent tax List For ~~2015~~ 2016-2017 taxes

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:
NFORMATION ON A SPECIFIC PROPERTY:
DDRESS:
LOCK/LOT:

CITY OF LINDEN

PPLICATION FORM

EQUEST FOR PUBLIC RECORDS

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

(#0017-463)

LEASE PRINT)

Name: Deborah Holder | Date: 9.2.2017

Organization (If Applicable):

Mailing Address: 1522 S. Wood AVE.

City, State, Zip: Linden, NJ 07036

Home/Business Phone E-MAIL Holderdeb72@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)

Inspection report of residence 1522 S. Wood AVE. Linden, NJ 07036 1st floor.

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

☑ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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☐ COPY OF 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: D. Holder

NFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1522 S. Wood AVE Linden, NJ 07036 1st floor

BLOCK/LOT:

627194

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

(#2017-464)

(PLEASE PRINT) Date: 8/2/17

Name: Theresa Specht

Organization (If Applicable):

Mailing Address: 35 Hensler Ln.

City, State, Zip: Saureville, NJ 08870

Home/Business Phone: [redacted] E-MAIL: theresaspecht0521@gmail.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

I am seeking police reports involving both Gary Specht and Rose Cimaglia from 2003.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL theresaspecht0521@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)

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CLERK'S OFFICE

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: T. Specht

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) (#2017-465)

Name: Devin Reiner Date: 8/2/17

Organization (If Applicable): Weichert Realtors

Mailing Address: 185 Elm St

City, State, Zip: Westfield NJ 07090

Home/Business Phone [redacted] E-MAIL dreiner@weichert.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

Requesting any open or closed construction permits. Also any permits for removal of any oil tanks or any removal or abandonment of septic tanks

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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CLERK'S OFFICE

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Devin Reiner

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 933 Baldwin Ave
BLOCK/LOT: 204/3

CITY OF LINDEN
APPLICATION FORM

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AUG 02 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 (#2017-466)

(PLEASE PRINT)

Name: Kelvin Mena	Date: 8/2/17
Organization (If Applicable):	
Mailing Address: 23 Delaware Ave	
City, State, Zip: Jersey City NJ 07304	
Home/Business Phone: [redacted] E-MAIL: Kmena10@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)

Information of existing oil tank on the property
OR
Any records of removal. If there is still one; where is located.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL Kmena10@yahoo.com

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Kelvin Mena

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 513 Alexander Ave Linden NJ 07036

BLOCK/LOT: 27.13.

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 (#2017-467)

(PLEASE PRINT)

Name: Sylvia M. Whitcomb | Date: 8/2/2017

Organization (If Applicable): Construction Journal

Mailing Address: 400 SW 7th Street

City, State, Zip: stuart FL 34994

Home/Business Phone [redacted] E-MAIL s.whitcomb@constructionjournal.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

Good Afternoon,
May I get a copy of the Building permit for the renovation of the Seaois industrial Warehouse at 340 Stiles Street ?

The permit should have been issued 2017

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 340 Stiles Street

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(#2017-468)

(PLEASE PRINT)

Name: issac Leskowitz | Date: 08/02/2017

Organization (If Applicable): 1122 Walnut St. LLVC

Mailing Address: 181 North Ave. East

City, State, Zip: Cranford, NJ 07016

Home/Business Phone [redacted] E-MAIL karen@elitebhg.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 you please provide record of any open permit or closed permit regarding oil tank issue with the property and or other open permit

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1122 Walnut St. Linden, NJ 07036

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT) # 2017-469

Name: Anna Altman	Date: 8/03/17
Organization (If Applicable): Environmental Affiliates Inc	
Mailing Address: 3 Lodi Lane	
City, State, Zip: Monsey, NY 10952	
Home/Business Phone: [redacted]	E-MAIL fbils@enafco.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)

615 West Elizabeth Ave, Linden, NJ 07036
Block: 321
Lot: 7
Please provide documentation concerning above ground/underground heating oil storage tanks (ASTs/USTs) spills, leaks and site remediation at the property listed above.

☐ 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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☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 615 West Elizabeth Ave, Linden, NJ 07036

BLOCK/LOT: 321-7

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) (#2017-430)

Name: Angela Bellis	Date: 08-03-17
Organization (If Applicable): PEMCO Limited C/O Fannie Mae	
Mailing Address: 4600 South Ulster Street, Suite 530	
City, State, Zip: Denver, CO 80237	
Home/Business Phone [redacted]	E-MAIL Angela.Bellis@PEMCO-Limited.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 would like to verify if there are any new open code violations on this property ina sale.

☐ 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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☐ LICENSE INFORMATION (SPECIFY)

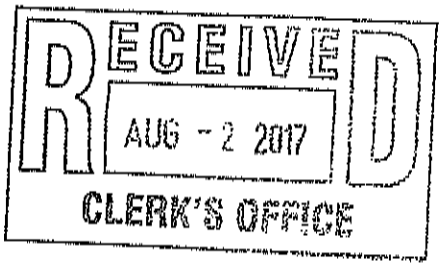
SIGNATURE: Angela Lee Bellis

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

BLOCK/LOT: Block 143 Lot 3

Print Management Solutions
P O Box 350
Trexlertown, PA 18087

Open Record Officer
LINDEN CITY
301 North Wood Avenue
Linden, NJ 07036



06/15/2017

Re: NJ Open Records Law

Dear Open Records Officer,

Under the provisions of the NJ Open Records Law. We are requesting access to the following information: We are asking for information about your **mail machine**, or postage equipment from Manufacturers Neopost, Hasler, MailFinance, Francotyp Postalia (FP Mailing), or Pitney Bowes

A copy of the MOST RECENT, CURRENT lease agreements or Most Recent Purchase Order for your current mailing equipment which shows lease commencement date and term of contract for mail machine from vendors Neopost, Hasler, Pitney Bowes, FP Mailing

Or

If the equipment was purchased, we are requesting a copy of your MOST RECENT meter rental bill, equipment rental bill, and maintenance / service contract bill or bill from last service call.

We will entertain suggestions you feel will make my request more responsive and thereby ensure that you can meet our request. If possible we would like to have the data sent to us at the address below.

Please email your request to me at adorward@printandmailing.net or mail to my attention at:

Print Management Solutions
Attn: Amy Dorward
P O Box 350
Trexlertown, PA 18087

If all or any part of this request is denied, please cite the specific exemption(s) that you think justifies your refusal to release the information, and inform me of the appeal procedures available to me under the law.

We would appreciate you handling this request as quickly as possible, and look forward to hearing from you.

Respectfully,

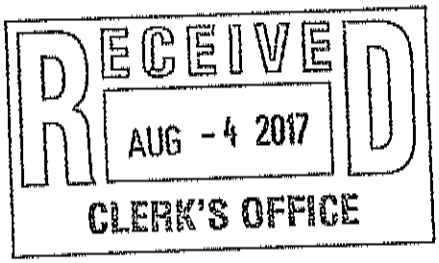
Amy Dorward
P O Box 350
Trexlertown, PA 18087

ATLANTIC ENVIRONMENTAL SOLUTIONS, INC

(#2017 - 471)

July 31, 2017

Linden City Clerk
301 North Wood Ave # 1
Linden NJ 07036



Re: ***Freedom of Information (FOI) Request***
620 – 628 W Saint George Avenue
Linden, New Jersey, Union County
Block: 375, Lot: 5
Addl Lots: 199, 76-B to 79

Dear Sir or Madam:

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

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

Thank you in advance for your help regarding this matter. In the event that there is a fee associated with obtaining this information, or if your office would rather make the file available for my review, please do not hesitate to contact me at (201) 876-9400. Our fax number is (201) 876-9563.

Sincerely,

M. Sobilo

Marzena Sobilo
Environmental Scientist

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(#2017-470)

(PLEASE PRINT)

Name: David Surowiec | Date: 8/4/17

Organization (If Applicable):

Mailing Address: 1007 Clinton St

City, State, Zip: Linden NJ 07036

Home/Business Phone [redacted] E-MAIL David.Surowiec1@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 Open lien request

☐ 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: D A Cu

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

TY OF LINDEN
PLICATION FORM

EQUEST FOR PUBLIC RECORDS

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

(#2017-473)

(EASE PRINT)
ame: Manitza Colon | Date: 8/4/17
rganization (If Applicable):
ailing Address: 2901 N Wood Ave
ity, State, Zip: Linden NJ 07036
ome/Business Phone E-MAIL Janeia21@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)
- 01 Tank Removal.
- Any Violation.
- Any. Open & Closed Permits.
- any, past inspections on property.

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

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL

Janeia21@yahoo.com

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

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

OTHER (SPECIFY)
Copy of c/o inspection from 10 years ago, when she purchased the home.

LICENSE INFORMATION (SPECIFY)

IGNATURE: Manitza Colon
NFORMATION ON A SPECIFIC PROPERTY:
DDRESS: 2901 N. Wood Ave, Linden N.J. 07036
LOCK/LOT:

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) #2017-474

Name: Giulliana Hernandez | Date: 08-04-2017
Organization (If Applicable):
Mailing Address: 307 W Stimeson Ave, Linden NJ 07036.
City, State, Zip:
Home/Business Phone [redacted] E-MAIL Gulyhernandez@outlook.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 Housing Inspections and Summons Issued on Property 307 W Stimeson Ave, Linden NJ 07036 on Wednesday August 02, 2017. By Gregory

☐ 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: Giulliana Hernandez

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 307 W Stimeson Ave, Linden NJ 07036

BLOCK/LOT: _____

Talia Pena-Marin # 2017-475

From: Michael Mchale <jerseyshorescannernews@gmail.com>
Sent: Friday, August 04, 2017 3:49 PM
To: Talia Pena-Marin
Subject: Opra

Please accept this email correspondence as request for public records in accordance with the open public records act, (OPRA).

The undersigned hereby certifies under penalty of perjury that he has NOT been convicted of an indictable offense either under the laws of the State of New Jersey or the laws of the United States.

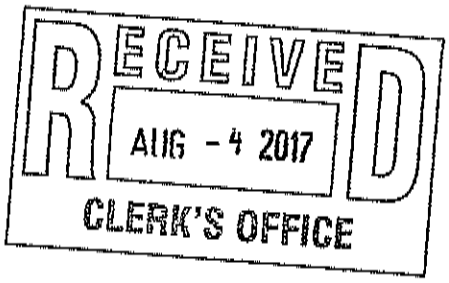
1-Body camera footage involving the arrest of Edward Grimes by badge # 277 on Friday Aug.4th including footage from the police vehicle if applicable.

Michael N McHale

[redacted]

Editor

Www.jerseyshorescannernews.com



* call requestor *

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) #2017-476

Name: Brenda Fajardo | Date: 8/7/17
Organization (If Applicable):
Mailing Address: 1024 Hussa Street
City, State, Zip: Linden NJ 07036
Home/Business Phone [redacted] E-MAIL bfajardo33@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 know if an oil tank has ever been on my property. If so when was it there, how was it removed what type of oil tank, what was used to fill in tank if placed underground when was it placed under ground, if applicable.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL Also include all COs that have been created within the last 50 years and home inspector reports

☐ 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
AUG - 7 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Brenda Fajardo

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1024 Hussa Street Linden, NJ 07036
BLOCK/LOT: Block 99 / Lot 18

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

2017-477

(PLEASE PRINT)

Name: Nathan Mammarella Date: 8/7/17
Organization (If Applicable): Daniel Rosenberg + Associates
Mailing Address: 911 Garden Street
City, State, Zip: Mt. Holly NJ. 08060
Home/Business Phone [redacted] E-MAIL nmammarella@danielmrosenberg.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 police records of reports relating to Adam Szczesny, DOB: 8/13/76 for the Months of March and April of 2015.

☐ 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)
Police Reports

RECEIVED
AUG - 7 2017
CITY 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

#2017-478

(PLEASE PRINT)

Name: Kyle Chan, Esq | Date: 8/6/17
Organization (If Applicable): Chan Law LLC
Mailing Address: 173 North Union Ave Suite 305
City, State, Zip: Cranford NJ 07016
Home/Business Phone [redacted] E-MAIL kchanlaw@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)

Any and all open or closed permits for 1421 Emma Place, Linden, NJ for the past 50 years 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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AUG - 8 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1421 Emma Place, Linden, NJ
BLOCK/LOT: Block 524 | Lot 41

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

#2017-479

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 1250 Liberty Ave

City Hillside State NJ Zip 07205

Telephone [redacted] FAX (908)353-3107

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 Carly Kaminsky Date 8/7/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

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

Delivery: Delivery / postage fees 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: 206 Bradford Ave, Linden, NJ 07036

Block # 425 Lot # 14

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 ____

RECEIVED
Records Provided
AUG -8 2017
CLERK'S OFFICE

Custodian Signature ____ Date ____

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

#2017-480

PLEASE PRINT)

Name: John Gaffney | Date: 8/8/17

Organization (If Applicable): Hueston McNulty

Mailing Address: 256 Columbia Turnpike, Suite 207

City, State, Zip: Florham Park NJ 07932

Home/Business Phone: [redacted] E-MAIL: jgaffney@huestonmcnulty.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 reports for 632 North Wood Ave, Linden
From 11/16 to 11/17

any kind of inspections

☐ 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
AUG 8 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 632 North Wood Ave Linden NJ

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

(#2017-484)

(PLEASE PRINT)

Name: William Nichols Date: 8/9/17

Organization (If Applicable): Tum Inc.

Mailing Address: 135 Lincoln Boulevard

City, State, Zip: Middlesex NJ 08846

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

Permits and records regarding underground storage tanks, hazardous materials and spills for Block 212, Lot 2405, 322-348 N. Wood 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)

RECEIVED
AUG - 9 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 322-348 N. Wood Avenue

BLOCK/LOT: Block 212, Lot 2405

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

(#2017-482)

(PLEASE PRINT)

Name: Nicole Persiano	Date: August 9, 2017
Organization (If Applicable): BAND	Property Group, LLC
Mailing Address: 1202 Tilton Road, Suite 1	
City, State, Zip: Northfield, NJ 08225	
Business Phone: [redacted]	E-MAIL: nicole@bandipropertygroup.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE	X FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary): All code records (including, but not limited to, violation notices, abatement notices, penalties, certificates of approval and occupancy, etc.), all building permit records (including, but not limited to, approvals, correction lists, permits, etc.), all zoning records (including, but not limited to, current zoning, variances, etc.), any open municipal charges, and all tax assessment records (including, but not limited to, tax assessment notice, tax assessor's property card, etc.)
PROPERTY ADDRESS: 1112 FOREST DRIVE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

x SEND RESPONSE BY E-MAIL: Please email all documents to nicole@bandipropertygroup.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)

RECEIVED
AUG 9 2017
CLERK'S OFFICE

SIGNATURE: NP

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1112 FOREST DRIVE

BLOCK/LOT: 414/9

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

(#2017-483)

(PLEASE PRINT)

Name: Nicole Persiano	Date: August 9, 2017
Organization (If Applicable): BAND Property Group, LLC	
Mailing Address: 1202 Tilton Road, Suite 1	
City, State, Zip: Northfield, NJ 08225	
Business Phone: [redacted]	E-MAIL: nicole@bandipropertygroup.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE X FAX	

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary): All code records (including, but not limited to, violation notices, abatement notices, penalties, certificates of approval and occupancy, etc.), all building permit records (including, but not limited to, approvals, correction lists, permits, etc.), all zoning records (including, but not limited to, current zoning, variances, etc.), any open municipal charges, and all tax assessment records (including, but not limited to, tax assessment notice, tax assessor's property card, etc.)
PROPERTY ADDRESS: 1118 FOREST DRIVE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

X SEND RESPONSE BY E-MAIL: Please email all documents to nicole@bandipropertygroup.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
AUG - 9 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1118 FOREST DRIVE

BLOCK/LOT: 414/10

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(#2017 - 484)

(PLEASE PRINT)

Name: Nehal Modi	**Date:** 08/09/2017
Organization (If Applicable): Steven P. Haddad, P.C.	
Mailing Address: 510 Thomall St, Suite 270	
City, State, Zip: Edison, New Jersey 08873	
Home/Business Phone [redacted]	**E-MAIL** nehal@sphlaw.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX ☑ E-mail	

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

Kindly provide this office with a complete copy of the investigative file from the Linden Police Department from the accident mentioned above including but not limited to investigation reports, photographs, witness statements, test results, skid mark findings etc. See attached letter. dashcam footage

☐ 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: Nehal Modi 8/9/2017

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

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 - 485

(LEASE PRINT)

Name: Nathan Feuer Date: Aug 9 '17

Organization (If Applicable): Prominent Homes Inc.

Mailing Address: 134 Bradway #405

City, State, Zip: Brooklyn NY 11249

Home/Business Phone [redacted] E-MAIL Prominenthomes1@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)

List of Tax Delinquent properties of 2016 & 2017

Please email to Prominenthomes1@gmail.com

Thanks

☐ 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:

NFORMATION ON A SPECIFIC PROPERTY:

DDRESS:

LOCK/LOT:

RECEIVED
AUG -9 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

#2017-486

(PLEASE PRINT)

Name: Izzy Azevedo	**Date:** 08/09/2017
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)

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)

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AUG 09 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 617 Woodlawn Ave Linden

BLOCK/LOT: 439/44

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) #2017-487

Name: Brittany Smith Date: 08/09/17
Organization (If Applicable): Construction Information Systems
Mailing Address: 170 Kinnelon Road
City, State, Zip: Kinnelon, NJ 07405
Home/Business Phone [redacted] E-MAIL brittanys@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)
A copy of the building permit containing the name, address, and telephone number for the general contractor for 901 West Linden Ave (Blue Apron Fulfillment Center)

☐ 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: Brittany Smith

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 901 West Linden Ave., Linden, NJ

BLOCK/LOT: _____

Block 461 Lot 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

#2017-488

(PLEASE PRINT)

Name: Stephanie Blumert	Date: 8/7/17
Organization (If Applicable): RE/MAX	
Mailing Address: 3108 Route 10	
City, State, Zip: Denville NJ 07834	
Home/Business Phone [redacted]	E-MAIL blumertstephanie@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)

Open and closed permits
Tax Card
Tank sweeps or removals
property survey
Lot map from tax department?

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL
blumertstephanie@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)

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AUG 10 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 216 Penn Avenue Linden

BLOCK/LOT: Block 461 Lot 4

CITY OF LINDEN
APPLICATION FORM

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AUG 10 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

2017-489

(PLEASE PRINT)

Name: KATARZYNA STRZECZKOWSKI Date: 08/10/17

Organization (If Applicable):

Mailing Address: 626 SHERMAN AV

City, State, Zip: ROSELLE PARK NJ 07204

Home/Business Phone [redacted] E-MAIL strzeczkowski@yahoo.com

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

copies of all building permits

open code violations

any leans on the 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)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 340 S. WOOD AV ROSELLE 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) #2017-490

Name: Philip Joel	**Date:** 8/11/2017
Organization (If Applicable): SLK Global Solution America	
Mailing Address: 2727 LBJ Fwy Suite 420	
City, State, Zip: Dallas TX 75234	
Home/Business Phon [redacted] **E-MAIL** mervyn.samson@slkgroup.com **FAX:** 888-908-3471	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX ☑ EMAIL	

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

Please advise if there are any Code Violations/Citations and/or Monies due and or any Open, Pending or Expired Permits, impact fees for the property listed below.

File #: 500728
Add: 500 McCandless Street Linden, NJ 07036
Block: 125 Lot: 11.01

☐ 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)

☐ LICENSE INFORMATION (SPECIFY)

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AUG 10 2017
CLERK'S OFFICE

SIGNATURE: philipjoel

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

#2017-491

(PLEASE PRINT)

Name: Marcia Moore | Date: 08/11/2017

Organization (If Applicable): Keller Williams Metropolitan

Mailing Address: 17 Jaime Drive

City, State, Zip: Rockaway, NJ 07866

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

- Is there or has the property ever had underground tank? If, so has the tank been removed and does the town have the permit to provide?
Has owner got any permit to work on the property within the last 10 years?

RECEIVED
AUG 11 2017
CLERK'S OFFICE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Marcia Moore dotloop verified 08/11/17 11:09AM EDT JDC6-KBWH-Z28J-1FSD

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 710 Lindegar St, Linden, NJ 07036

BLOCK/LOT: Block 343, Lot 10

Jennifer Honan

From: Louwagie, Pam <Pam.Louwagie@startribune.com>
Sent: Monday, August 14, 2017 2:39 PM
To: Jennifer Honan
Subject: Attention Jennifer - public records request

Dear Jennifer,

Please accept this as an open records request to the Linden Police Department.
I would like a copy of the public police report for case number 16004282.
Please send me a copy electronically. If there will be a charge for the information, please let me know beforehand, either through email or the phone number listed below.
Also, please put a rush on this request. I made my initial request to the police department for this information on August 2, and got no response. I was not informed that I needed to contact you.
Thanks very much,

Pam Louwagie
Staff Writer
[redacted]
pam.louwagie@startribune.com

Star Tribune Building | 650 3rd Ave S, Suite #1300 | Minneapolis, MN | 55488

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

#2017-492

(PLEASE PRINT)

Name: STATE FARM ENSURANCE Date: 7/26/2017

Organization (If Applicable): CLAIM # 30-5J22-484

Mailing Address: PO BOX 106169

City, State, Zip: ATLANTA, GA 30348-6169

Home/Business Phone [redacted] E-MAIL STATEFARMFIRECLAIMS@STATEFARM.COM

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE FAX 844-236-3646

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

REQUESTING NAME OF PROPERTY OWNER FOR 1017 LINCOLN ST. LINDEN NJ 07036 ON THE DATE OF NOV. 13, 2014.

ANY QUESTIONS PLEASE CONTACT CLAIM REPRESENTATIVE JEFF FEY @ [redacted] THANK YOU.

☐ INSPECT / VIEW DOCUMENTS ONLY DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

RECEIVED
AUG 14 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1017 LINCOLN ST. LINDEN NJ 07036

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

#2017-494

(PLEASE PRINT)

Name: Anita R. Erickson | **Date:** 8/15/17

Organization (If Applicable): Decker Associates

Mailing Address: 899 Mountain Avenue, Suite 3B

City, State, Zip: Springfield, NJ 07081

Home/Business Phon [redacted] **E-MAIL** notify@deckerclaims.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX 973-258-1530

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

Copy of Police Report - August 14, 2017 - Accident

601 East Edgar Road, Linden - Property struck by vehicle after accident on highway

Our File No. DE-1758351

☐ 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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AUG 15 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

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

(PLEASE PRINT) # 2017 - 495

Name: Milena Wilson	Date: 8/15/2017
Organization (If Applicable):	
Mailing Address: 320 Park Ave	
City, State, Zip: Plainfield, NJ 07060	
Home/Business Phone [redacted]	E-MAIL: milena@mawlaw.net
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	
FAX: 908-769-1712	

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

From (1) Division of Inspections/Building Department and (2) Fire Department: Both open and closed permits and approvals on file for this property. Also, from the (3) Construction Office a UCC compliance certification regarding, but not limited to, the finished attic, if any, finished basement, if any, and both open and closed permits and approvals on file for this property. All documents shall be from 1920 to Present. Also, any information regarding underground tanks on the premises. This will be reviewed by the purchaser of the property.
Re: 2014 Ingalls Avenue. Block 7, Lot 3.

☐ 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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AUG 16 2017
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☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Milena Wilson

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 2014 Ingalls Avenue

BLOCK/LOT: 7, 3

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

#2017-496

(PLEASE PRINT)

Name: Erica Burkert **Date:** 08/16/2017

Organization (If Applicable): Ecolab

Mailing Address: 1601 West Diehl Road

City, State, Zip: Naperville, IL 60563

Home/Business Phone [redacted]

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

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

1. Applebee's: 671 West Edgar Rd - We are searching for any inspections conducted after 03/02/2016.
2. McDonald's: 107 West Edgar Rd - We are searching for any inspections conducted after 01/01/2016.
3. Moe's: 1701 West Edgar Rd - We are searching for any inspections conducted after 02/02/2016.
4. Popeye's: 1190 E Saint George Ave - We are searching for any inspections conducted after 07/28/2016.
5. TGI Friday's: 400 South Park Ave - We are searching for any inspections conducted after 07/28/2016.

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

☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

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

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

☐ OTHER (SPECIFY)

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AUG 16 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

#2017 - 497

(PLEASE PRINT)

Name: Patricia Abrusia | Date: 8/17/2017

Organization (If Applicable): Weichert Realtors

Mailing Address: 1625 Rt 10 E

City, State, Zip: Morris Plains, NJ 07950

Home/Business Phone: [redacted] E-MAIL pabrusia@weichert.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

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

I am the realtor and I represent seller for 1859 Barnett St., Linden, NJ 07036
I would like to know if there are any permits (open or closed) on record for this property.

I would also like to know if you have any records of underground oil tank or septic installation or removal or remediation.
Request the following Docs:

~~1.Construction permits summary report.~~
2. List of applications
3. Extract of permits.

RECEIVED
AUG 17 2017
CLERK'S OFFICE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Patricia Abrusia

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1859 Barnett St., Linden, NJ 07036

BLOCK/LOT: 151/33

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

(#2017-498)

(PLEASE PRINT)

Name: Carrie Stowell | **Date:** 08/17/17

Organization (If Applicable): SCI Shared Resources, LLC/SCI New Jersey Funeral Services/Wein & Wein

Mailing Address: 1929 Allen Parkway, Mailstop 529-C

City, State, Zip: Houston TX 77019

Home/Business Phon [redacted] **E-MAIL** carrie.stowell@sci-us.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

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

Request for a current copy of the health inspection report for Deli King, 628 W. St. George Ave, Linden 07036. We request this information as part of our vendor management process for all restaurants and caterers who provide catering to our local offices.

RECEIVED
AUG 18 2017
CLERK'S OFFICE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL
carrie.stowell@sci-us.com

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

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

(#2017-499)

(PLEASE PRINT)

Name: Stuart D. Minion, Esq. | Date: 8-17-17

Organization (If Applicable): Minion & Sherman

Mailing Address: 33 Clinton Rd. Suite 105

City, State, Zip: West Caldwell NJ 07006

Home/Business Phone [redacted] E-MAIL sminion@minionsherman.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

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

Permits open and/or closed for 906 McCandless Street from 8/1/2010 through 8/17/17 BL: 121 LOT: 11

RECEIVED
AUG 18 2017
CLERK'S OFFICE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☑ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Stuart D. Minion Esq.

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 906 McCandless Street

BLOCK/LOT: BLOCK: 121 LOT: 11

The Environmental Group

Environmental Investigations, LLC
Environmental Remediations, LLC

Brown 2 Green

Facsimile: 1-908-474-8451

August 18, 2017

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

Re: EI Project #'s: 17-100

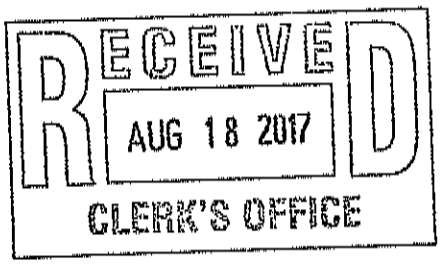
Dear Sir or Madam:

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

Property Location:
1003 West St. Georges Ave
Linden, NJ 07036

Lot: 10 Block: 421

Requestor Information:
Sonali Kumari
Environmental Investigations, LLC
PO Box 380
Ledgewood, NJ 07852
reception@theenvironmentalgroup.net
973-539-4111 x100



Sincerely,

Sonali Kumari

Sonali Kumari
Administrative Assistant

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

(#2017-500)

(PLEASE PRINT)

Name: PAWEL HAJDUK Hajduk | Date: 08/18/17
Organization (If Applicable):
Mailing Address: 46 Lepine Way
City, State, Zip: Clark NJ 07066
Home/Business Phone [redacted] E-MAIL
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Permit History for 807 Encdo St. Linden NJ open & closed.
Oil Tank? Removal or If Still on property?

PMHHOME@verizon.net

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 807 Encdo St. Linden NJ
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

(#2017-502)

(PLEASE PRINT)

Name: H. Chael B. Campagna | Date: 8/17/17

Organization (If Applicable):

Mailing Address: PO Box 15

City, State, Zip: Elizabeth N.J 07208

Home/Business Pho [redacted] E-MAIL law.office@michaelbcampagna

REQUEST MADE VIA: ☐ OFFICE VISIT ☑ CORRESPONDENCE ☑ FAX

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

Complete Case file St. v. Orrie McNeil 04-22-07

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

☑ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Michael B. Campagna

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

(#2017-503)

(PLEASE PRINT)

Name: Jose Quezada | Date: 8/18/17

Organization (If Applicable):

Mailing Address: 1110 Hollywood Rd

City, State, Zip: Linden N.J. 07036

Home/Business Phon [redacted] E-MAIL

REQUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

Opra/report done at my home by inspector from city of Linden, copy of board of health inspection done in August 2017.

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AUG 18 2017
CLERK'S OFFICE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL - gatoquezada84@gmail.com

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Jose Quezada

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

fax. 908-474-8451

AGENCY NAME HERE

Place Logo Here

OPEN PUBLIC RECORDS ACT REQUEST FORM

Agency Address
Agency Telephone Number & Fax Number
Agency e-mail address
Name of Agency Custodian (#2017-504)

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 Caely MI ____ Last Name Kaminsky

E-mail Address Caely@brinksconsulting.com

Mailing Address 1250 Liberty Ave

City Hillside State NJ Zip 07205

Telephone [redacted] Fax (908)353-3107

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 Caely Kaminsky Date ____

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of 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 list of permit applications for the installation, Removal or the decommissioning of Underground Storage tanks at: 513 Alexander Ave Linden.

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AUG 18 2017
CLERK'S OFFICE

BLOCK # 27 LOT # 13

AGENCY USE ONLY

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

AGENCY USE ONLY

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

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

AGENCY USE ONLY

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

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

Records Provided

Custodian Signature Date

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

#2017-505

(PLEASE PRINT)

Name: Nicholas Sciales Date: 8-21-17

Organization (If Applicable): NS Associates & Comcast.Net

Mailing Address: PO Box 35

City, State, Zip: Scotch Plains NJ 07076

Home/Business Phone: [redacted] E-MAIL: NSassociates@Comcast.Net

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

nsassociates@comcast.net

DESCRIPTION OF PUBLIC RECORD(S):

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

Please Provide Copies of the following Records to:

James M. Corson

DOB [redacted]

SSN [redacted]

SBI [redacted]

All police investigative reports, arrest reports, incident reports, crash reports

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

all police investigative reports, arrest reports, incident

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE & crash reports

☒ 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
AUG 21 2017
CLERK'S OFFICE

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT) #2017-506

Name: Wilton Mei | Date: 8/21/2017
Organization (If Applicable):
Mailing Address: 7 Hampton Rd.
City, State, Zip: Monroe Twp. NJ 08831
Home/Business Phone [redacted] E-MAIL wiltonmei1991@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)

open & closed permits
any violations

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CLERK'S OFFICE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL wiltonmei1991@gmail.com

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Wilton Mei

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 908 Cranford Ave. 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) #2017-507

Name: Nick Sowa | Date: 08/21/2017

Organization (If Applicable): PEMCO Limited

Mailing Address: 4600 S. Ulster Street #530

City, State, Zip: Denver, CO 80237

Home/Business Pho[redacted] E-MAIL nick.sowa@pemco-limited.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

EMAIL to Chelsea Libreros - clibreros@linden-nj.org

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

Please send any documentation regarding OPEN code violations or LIENS on the property listed below -

Please assist with verification on the same property listed below has been registered with your Municipality as Vacant -

315 Princeton Rd

Linden, NJ 07036

Lot 23 Block 334

☐ 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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AUG 21 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Nick Sowa

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 315 Princeton Rd Linden, NJ 07036

BLOCK/LOT: Block 334 Lot 23

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

#2017-508

(PLEASE PRINT)

Name: Kim O'Brien Date: 8/21/17

Organization (If Applicable): Commonwealth Title - Monmouth Agency

Mailing Address: 64 West Main Street

City, State, Zip: Freehold NJ. 07728

Home/Business Phone [redacted] E-MAIL docs@commonwealthtitleagency.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 to confirm and get written confirmation that this dwelling is a legal 2 unit.
Any documentation to support is needed.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL
docs@commonwealthtitleagency.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
AUG 21 2017
CITY CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 3038 S. Wood Avenue
BLOCK/LOT: 569 / 13 Helen B. "Pointek"

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

#2017-509

(PLEASE PRINT)

Name: Melissa Secret | Date: 08/22/17

Organization (If Applicable):

Mailing Address: 120 Arthur St 2nd Floor

City, State, Zip: Linden NJ 07036

Home/Business Phone [redacted] E-MAIL Helysen3033@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)

LPD case # 17038416
Copy of Report that I am named in

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

☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL
Or Regular 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
AUG 22 2017
CLERK'S OFFICE
CITY OF LINDEN

SIGNATURE: Melissa Secret

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

#2017-510

PLEASE PRINT)

Name: TEKAH CLARKE | Date: 8/22/2017

Organization (If Applicable): ELITE PROPERTY RESEARCH

Mailing Address: 37 MAIN STREET

City, State, Zip: SPARTA, NJ 07871

Home/Business Phone [redacted] E-MAIL TEKAH@ELITEPROPERTYRESEARCH.COM

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

PLEASE PROVIDE INFORMATION FOR ALL OPEN/EXPIRED PERMITS.
PLEASE PROVIDE INFORMATION FOR ALL OPEN CODE ENFORCEMENT 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)

RECEIVED
AUG 22 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 906 MCCANDLESS ST. LINDEN NJ 07036

BLOCK/LOT: BLOCK 121 LOT 11

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT) #2017-511

Name: Priscilla Lewis Williams | Date: 08-22-2017
Organization (If Applicable):
Mailing Address: 819 Cranford Ave Apt 2
City, State, Zip: Linden NJ 07036
Home/Business Phone: [redacted] E-MAIL Priscilewis@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)
A Copy of Inspection Report Done on August 21, 2017 @ 819 Cranford Ave Linden, NJ 2nd floor

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL Priscilewis@yahoo.com

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

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

☐ OTHER (SPECIFY)

RECEIVED
AUG 22 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: P Lewis

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

#2017-512

(PLEASE PRINT)

Name: Lakeisha J Zinamon | Date: 8/22/2017

Organization (If Applicable): Claims Management Resources

Mailing Address: 726 West Sheridan Avenue

City, State, Zip: Oklahoma City, OK 73102

Home/Business Phone [redacted] E-MAIL lzinamon@cmrclaims.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 IN SEARCH OF AN INCIDENT / ACCIDENT REPORT INVOLVING VERIZON POLE DAMAGED IN A MVA AT THE INTERSECTION OF N STILES ST & MORRISTOWN RD ON OR BEFORE 5/11/2017.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL

If there is a fee associated PLEASE LET ME KNOW

☐ 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
AUG 23 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

OPRA Request

#2017-513

to City of Linden

Submitted via Fax to 908-474-8451 on Wednesday, August 23, 2017

Requestor: **Libertarians for Transparent Government, a NJ Nonprofit Corporation.**

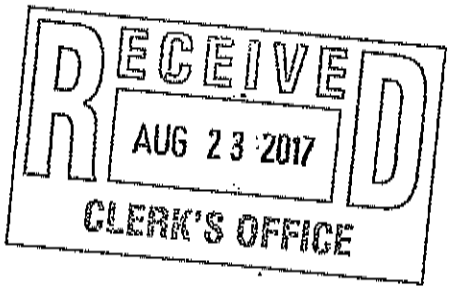
This is our request under the Open Public Records Act (OPRA) and the common law right of access. Please send all responses and responsive records via e-mail to NJTransparency@yahoo.com. If you have any questions please call [redacted]

Records Requested:

For the case of Wendell Kirkland et al, v. City, Case No. 2:12-cv-1196, which the court's computer system shows as having settled on April 24, 2017, we would like the following records:

1. The most recently amended civil complaint filed by the Plaintiff or, if there are no amendments, please send the original civil complaint. Please do not send us summonses, case information statements, etc.

2. The agreement(s) or release(s) that sets forth the terms and amount of settlement, i.e. the "settlement agreement(s)" related to this case.



Aug. 24. 2017 2:02pm

CITY OF LINDEN
APPLICATION FORM

RECEIVED
AUG 24 2017
CLERK'S OFFICE

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

REQUEST FOR PUBLIC RECORDS

(#2017-514)

(PLEASE PRINT)

Name: Melissa Seurt | Date: 08/23/17

Organization (If Applicable):

Mailing Address: 120 Arthur St 2nd FL

City, State, Zip: Linden NJ 07036

Home/Business Pho[redacted] E-MAIL Melyseu3033@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)

information on Health department complaints about garbage not being taken out from 120 Arthur St Linden.

I believe there are 2 complaints, I do not have incident or report numbers for either.

☐ 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: Melissa Seurt

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

(#2017-315)

(PLEASE PRINT)

Name: William Magyar | Date: 08/23/17

Organization (If Applicable):

Mailing Address: 120 Arthur St 2nd Floor

City, State, Zip: Linden NJ 07036

Home/Business Phone: [redacted] E-MAIL: WMagyar80@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)

LPD 17037639 — and — incident that occured at 120 Arthur st at and 2100 hrs on 05/13/17.
2nd Report was made by officer McPhail, I do not have the case #

☐ 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)

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AUG 24 2017
CLERK'S OFFICE

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

RECEIVED
AUG 23 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

(#2017516)

(PLEASE PRINT)

Name: Corey Curtis | Date: 8/29/17

Organization (If Applicable):

Mailing Address:

City, State, Zip:

Home/Business Phone [redacted] E-MAIL curtiscorey41@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)

All police reports relative to Corey K. Curtis
2011 - present
8/6/1992 DOB -
901 McCandless Street, 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: X Corey Curtis

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

fax - 908-474-8451

AGENCY NAME HERE

Place Logo Here

OPEN PUBLIC RECORDS ACT REQUEST FORM

Agency Address
Agency Telephone Number & Fax Number
Agency e-mail address
Name of Agency Custodian (#2017-517)

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 120e Liberty Ave

City Hillside State NJ Zip 07205

Telephone [redacted] FAX (908)353-3107

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 Carly Kaminsky Date ____

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of 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 list of permit applications for the installation, Removal or the decommissioning of Underground Storage tanks at: 220 Orchard Terr. Linden.

RECEIVED
AUG 24 2017
CLERK'S OFFICE

Block # 263 Lot # 3

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

(#207-518)

(PLEASE PRINT)

Name: Elease Edmontson | Date: 08/26/17
Organization (If Applicable): Westchester County Dept. of Social Services
Mailing Address: 100 East 1st Street, 4th Fl. Mount Vernon, NY 10550
City, State, Zip: Mount Vernon, N.Y. 10550
Home/Business Phone [redacted] AIL Elease.Edmontson@dfa.state.ny.us
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

My agency is working with an individual by name of Michael Shelton (DOB-10/19/77). I am requesting any police reports on this individual.
Thank you very much.

☐ 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
AUG 25 2017
CLERK'S OFFICE

SIGNATURE: Elease Edmontson

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

#2017-579

(PLEASE PRINT)

Name: Giovanni Saetticchio | Date: August 28th 2017

Organization (If Applicable):

Mailing Address:

City, State, Zip:

Home/Business Phone [redacted] E-MAIL Giova_27C 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)

Open or Closed Permits. btw the years of 2004-2012 main line Plumbing work done in the basement. 2 Bathroom

☐ 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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AUG 28 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 31 West 12th Street Linden NJ 07036

BLOCK/LOT:

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

#2017-520

LEASE PRINT)
Name: KARAN SHAH | Date: 8/28/2017
Organization (If Applicable):
Mailing Address: 7 IRVING ST., #22
City, State, Zip: JERSEY CITY, NJ 07307
Home/Business Phone [redacted] E-MAIL PRIYANKA@VALUEPLUSPS.COM
REQUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
Please be specific and attach additional pages of information if necessary)
- OPEN PERMITS
- PERMITS ISSUED IN LAST 20 YEARS
- OIL TANK INFORMATION
- ~~CURRENT FLOOR PLANS (WHEN~~ LAST CO ISSUED DOCUMENT

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL
PRIYANKA@VALUEPLUSPS.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
AUG 28 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:
NFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 925 ESSEX AVE, LINDEN
BLOCK/LOT: 113/6

TY 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 - 521

EASE PRINT)

lame: KARAN SHAH | Date: 8/28/2017

rganization (If Applicable):

lailing Address: 7 IRVING ST., #2L

ity, State, Zip: JERSEY CITY, NJ 07307

ome/Business Phone [redacted] E-MAIL PRIYANKA@VALUEPLUSPS.COM

EQUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

ESCRIPTION OF PUBLIC RECORD(S):

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

OPEN PERMITS
PERMITS ISSUED IN LAST 20 YEARS
OIL TANK INFORMATION
~~COPIES OF FINAL PLANS & PRINT~~ LAST CO ISSUED DOCUMENT

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

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

SEND RESPONSE BY E-MAIL
PRIYANKA@VALUEPLUSPS.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)

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AUG 28 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

IGNATURE:

FORMATION ON A SPECIFIC PROPERTY:

DDRESS: 1016 BISHOP EVANS WAY

OCK/LOT: 72/11

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 - 524)

(PLEASE PRINT)

Name: JIGNESH MEHTA | Date: 8/29/17

Organization (If Applicable): SOUTHWOOD RITA PHARMACY

Mailing Address: 937 SOUTH WOOD AVE

City, State, Zip: LINDEN NJ 07036

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

CERTIFICATE OF OCCUPANCY
CURRENT.

☐ 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
AUG 29 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: J. Mehta

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 937 SOUTH WOOD AVE 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

#2017-525

(PLEASE PRINT)

Name: JOHN ZAWOYSKI | Date: 8/23/2017

Organization (If Applicable):

Mailing Address: 518-7 Old post rd #105

City, State, Zip: edison, NJ. 08817

Home/Business Phone E-MAIL JZACK26C@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)

thru Health Dept, VIA "NANCY ROBLES"
pictures of 221 Morningside Ave. (complaint of high grass later JEA)
taken August 2015.

☐ 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)
can't SENT VIA email to.
JZACK26C@yahoo.com

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: John Zawoysk

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CLERK'S OFFICE

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

2017-526

(PLEASE PRINT)

Name: Mindi Kurmaik | Date: 8/30/17

Organization (If Applicable):

Mailing Address: City Hall - 301 N. Wood Ave.

City, State, Zip: Linden NJ 07036

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

Copy of Recordings from City Hall Video taping system of the fall on Aug 25, 2017 between 10:30 - 1:30. 1st Floor cameras by Traffic Bureau.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

☐ OTHER (SPECIFY)

RECEIVED
AUG 30 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Mindi Kurmaik

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

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AUG 30 2017
CLERK'S OFFICE

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

2017-527

(PLEASE PRINT)
Name: Pierre Dalmacy. Date: 8/29/2017
Organization (If Applicable):
Mailing Address: 1709 S. wood ave. Apt 3.
City, State, Zip: Linden, NJ 07036
Home/Business Phone [redacted] IL pdalmacy@yahoo.fr
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

Open and Closed permits, property cards

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Pierre Dalmacy

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 207 McCandless Street

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

#2017-528

(PLEASE PRINT)

Name: Mark Lee — Date: 8-30-17
Organization (If Applicable):
Mailing Address: 534 Boulevard 2nd Fl.
City, State, Zip: Westfield NJ 07090
Home/Business Phone — E-MAIL
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

Please forward me any police records
Adina Lee
201 Maple Ave.
Linden NJ
for the dates
July 27, 2017 to the Present days

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL marklee555@yahoo.com

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

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

RECEIVED
AUG 30 2017
CLERK'S OFFICE

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

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

PLEASE PRINT) #2017-529

Name: Arthur E. Balsamo, Esq. Date: August 30, 2017
Organization (If Applicable):
Mailing Address: 355 Nelson Ave., Post Office Box 2234
City, State, Zip: Cliffside Park, NJ 07010
Home/Business Phone [redacted] E-MAIL arthurebalsamoesq@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)

~~A copy of all records and reports pertaining to a hazmat response by the Linden Fire Department in connection with a surface spill of gasoline motor~~ fuel at 301 W. St. Georges Avenue on a date that is unknown to this applicant, but is believed to have occurred between April 2011 and March 2013.

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

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☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

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CITY CLERK'S OFFICE

SIGNATURE:

FORMATION ON A SPECIFIC PROPERTY:
DRESS: 301/309 W. St. Georges Avenue
OCK/LOT: Block 339, Lot 6

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

LEASE PRINT) # 2017-530

Name: CARLOS GUTIERREZ | Date: 8/30/17

Organization (If Applicable):

Mailing Address: 305 E. GRANT AVE

City, State, Zip: ROSELLE PARK NJ. 07204

Home/Business Phon[redacted] E-MAIL KAGUTIER@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)

- OPEN / CLOSED PERMITS
- VIOLATIONS
- TANK OIL TANK REMOVAL PERMITS
- POOL 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:

NFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 313 FERNWOOD TR. LINDEN

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

#2017-533

PLEASE PRINT)

Name: James Carey | Date: August 30, 2017
Organization (If Applicable): Building Evaluation Services & Technology
Mailing Address: 5115 Pegasus ct. Suite F
City, State, Zip: Frederick, MD 21704
Home/Business Phone: [redacted] E-MAIL jcarey@bestinspections.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

Meridia Lifestyles Apt. Homes
101-137 S. Wood Ave.
Linden, NJ 07036

← For the referenced property, records of outstanding building and fire code violations, copies of certificates of occupancy, records of aboveground or underground storage tanks, petroleum spills or releases, or hazardous materials incidents.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL
jcarey@bestinspections.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)

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CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: James Carey

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 101-137 S. Wood Ave
BLOCK/LOT: Block 449, Lot 1.01

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

#2017-534

(PLEASE PRINT)

Name: MALGORZATA BOBER | Date: 8/31/17
Organization (If Applicable): Terra Realtors
Mailing Address: 500 Centennial Ave
City, State, Zip: Cranford NJ 07036
Home/Business Phone [redacted] E-MAIL MARGARET@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)

- PLEASE PROVIDE OPEN/CLOSED ELECTRIC, PLUMBING, BUILDING PERMITS, INFORMATION
- PLEASE PROVIDE INFORMATION REGARDING UNDERGROUND OIL TANK OR ABOVE 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)

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CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 940 McCandless Place, Linden
BLOCK/LOT: 491/6

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

2017-535

EASE PRINT)
ame: STEVEN PUZZO — Date: 8/31/17
rganization (If Applicable):
ailing Address: 104 RAVINE AVE
ty, State, Zip: WEST CALDWELL NJ. 07006
ome/Business Phone [redacted] E-MAIL SPUZZO1290@COMCAST.NET
EQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

TO
Property Records CARDS FOR
2210 ORCHARD TERRACE LINDEN N.J.
BLOCK 229 LOT 16

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL SPUZZO1290@COMCAST.NET
OR VIA FAX 973-228-8993

☐ 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

SIGNATURE:

NFORMATION ON A SPECIFIC PROPERTY:
DDRESS:
LOCK/LOT:

TY 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

(#2017-537)

EASE PRINT)

Name: Kailah Brown | Date: 9-01-17
rganization (If Applicable):
Mailing Address: 1143 Dill Avenue
ity, State, Zip: Linden, NJ 07036
Home/Business Phone [redacted] E-MAIL brownkail@kean.edu
EQUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

ESCRIPTION OF PUBLIC RECORD(S):
Please be specific and attach additional pages of information if necessary)
I need copies of a police report of an physical altercation between my mother nd myself dating as afar back as 6-7 years back. The report was involving fight between my mother and I in the residence of 1143 Dill Avenue. I also need a copy of an incident involving my step brother and I approximately years ago. There was an investigation on my brother for when [redacted] me en 14yrs 14yrs old. He ended up pleading [redacted] If I could have a copy of these two cases I would appreciate it. They are for schoo

NSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS) purposes.

PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE (1) # 12046939
(1) # 11033014

) 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
SEP 01 2017
CLERK'S OFFICE

LICENSE INFORMATION (SPECIFY)

IGNATURE: Kailah Brown
NFORMATION ON A SPECIFIC PROPERTY:
DDRESS:
LOCK/LOT:

#