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

#2017-605

(PLEASE PRINT)

Name: Donald Cramer | Date: 9/25/2017
Organization (If Applicable): BBC Assessment
Mailing Address: 11 Silver Avenue
City, State, Zip: Glas[redacted]028
Home/Business Phon[redacted] E-MAI[redacted]
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary) I am requesting any information on file with the Building Department, the Fire Department and the Health Department specifically related to underground and aboveground storage tanks, hazardous materials use and storage and spill/release incidents.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL dcramer-env@hotmail.com

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

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 02 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 316 Dalziel Road
BLOCK/LOT: 421/53

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) #2017-606

Name: Yadira Galan | Date: 10/02/17
Organization (If Applicable): Brinks Tank Services
Mailing Address: 256 Liberty Ave
City, State, Zip: Hillside NJ 07205
Home/Business Phone [redacted] E-MAIL carly@brinksconsulting.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

RECEIVED
OCT 02 2017
CLERK'S OFFICE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PICK-UP

☒ SEND RESPONSE BY E-MAIL

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

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

☒ OTHER (SPECIFY) please provide a list of permit applications for the decomissioning of underground storage tanks at: 611 Hussa St

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Yadira Galan

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:
BLOCK/LOT: 611 Hussa St Block 158 Lot 11

ITY OF LINDEN
PPLICATION FORM

EQUEST FOR PUBLIC RECORDS

RECEIVED
OCT 03 2017
CLERK'S OFFICE

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

LEASE PRINT) #2017-608

Name: Nancy Jean G. Walker | Date: Oct. 2. 2017

Organization (If Applicable):

Mailing Address: 600 North Ave. West

City, State, Zip: Westfield N.J. 07090

Home/Business Pho[redacted] E-MAIL thewalkerteam1@gmail.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

Permits for
oil tank removal
gas furnace
new hot water heater
new roof
new windows
central air compressor

Final CCO - closing Oct. 27. 2017

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL thewalkerteam1@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: Nancy Jean G. Walker

NFORMATION ON A SPECIFIC PROPERTY:

DDRESS: 214 Grand Street Linden NJ. 07036

LOCK/LOT: Blk 37 Lot 1

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT) #2017-608

Name: Michelle Mirigliano | Date: October 3, 2017
Organization (If Applicable): Fennelly Environmental Associates, LLC
Mailing Address: 116 Village Blvd, Suite 200
City, State, Zip: Princeton, New Jersey 08540
Home/Business Phon[redacted] E-MAIL: mmirigliano@fennellyea.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Documents related to the presence of underground storage tanks, releases, fires, or other contamination, and/or investigation and remediatin of Areas of Concern at the following properties:
100 to 128 South Wood Avenue, Linden, NJ 07036
Block 458, Lots 1, 2, 3, 4, 5.01, 5.02, 6, 7, and 8

☐ 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
OCT 03 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Michelle Mirigliano

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 100 to 128 South Wood Avenue, Linden, NJ 07036

BLOCK/LOT: 458/ 1, 2, 3, 4, 5.01, 5.02, 6, 7, and 8

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

#2017-609

PLEASE PRINT)

Name: FRANK KRETCHMER | Date: OCT 3 2017

Organization (If Applicable): COLDWELL BANKER

Mailing Address: 367 CHESTNUT ST

City, State, Zip: LINDEN NJ 07083

Home/Business Phone [redacted] E-MAIL: YANKEEFRANK6@HOTMAIL.COM

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S): PROPERTY 203 MAIN ST LINDEN (BLOCK 571 LOT 4)
(Please be specific and attach additional pages of information if necessary)

- LOOKING FOR ANY EVIDENCE OF AN OIL TANK (UNDERGROUND) BEING ON THE PREMISES OR REMOVED FROM
- ANY CONTAMINATION OIL, ASBESTOS, LEAD BASE PAINT ETC.
- FLOODING
- ANY PERMITS TAKEN OUT PREVIOUSLY ANY OPEN PERMITS

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 03 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 203 MAIN ST. LINDEN

BLOCK/LOT: 571 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

(PLEASE PRINT) #2017-610

Name: Deborah Zamora | Date: 10-3-17
Organization (If Applicable): Panache Realty LLC
Mailing Address: 51 S. 21st St
City, State, Zip: Kenilworth NJ 07033
Home/Business Phone [redacted] E-MAIL debbiezamora726@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 Permits
Underground Oil Tanks / Above ground oil tanks
Municipal Lien Search
Code 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
OCT 04 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 207 W. Linden Ave
BLOCK/LOT: 464/17

CITY OF LINDEN
APPLICATION FORM

RECEIVED
OCT - 4 2017
CLERK'S OFFICE

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT) #2017-611

Name: Marsha L. Bloom, Esq. Date: 10-04-2017
Organization (If Applicable):
Mailing Address: 1241 Lenape Way
City, State, Zip: Scotch Plains, NJ 07076 email: mlbloomesq@gmail.com
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)

Building Dept.: copies of existing permits, nature of permits, status of permits

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL mlbloomesq@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: Marsha L. Bloom

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1092 W. Price St.
BLOCK/LOT: 253/35

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT) #2017-612

Name: Stephanie Hartson | Date: 10-2-2017
Organization (If Applicable): Langan Engineering and Environmental Services
Mailing Address: 989 Lenox Drive, Suite 124
City, State, Zip: Lawrenceville NJ 08648
Home/Business Phone [redacted] E-MAIL shartson@langan.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
We are requesting the Traffic Signal Plans and Timing Directives for the following intersections: (see attached Straight Line Diagrams for intersection locations).

- Linden Avenue and Stiles Street
- Linden Avenue and Wood Avenue
- Elizabeth Avenue and Stiles Street

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL
- Please email pdf copies of Traffic Signal Plans and Timing Directives to shartson@langan.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
OCT 04 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Stephanie Hartson

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

clibreros@linden-nj.org

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

#2017-613

(PLEASE PRINT)

Name: KARAN SHAH | Date: 10/4/2017

Organization (If Applicable):

Mailing Address: 7 IRVING ST, JERSEY CITY, NJ

City, State, Zip: NJ 07307

Home/Business Phone: [redacted] E-MAIL INFO@VALUEPLUS.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 VACANT PROPERTIES AS OF TODAY
~~ALL FORECLOSURES WITH OWNER OF THE PROPERTY AS OF TODAY~~

☐ 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
OCT 05 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: LINDEN

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

#2017-614

(PLEASE PRINT)

Name: Jeana Hancock | Date: 10/04/17

Organization (If Applicable): The Planning and Zoning Resource Company

Mailing Address: 1300 South Meridian Avenue, Suite 400

City, State, Zip: Oklahoma City, OK 73108

Home/Business Phone [redacted] E-MAIL Jeana.Hancock@pzr.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☑ CORRESPONDENCE ☐ FAX

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

Please provide copies of any open/unresolved zoning, building, and fire code violations, variances (special/conditional use permits), certificates of occupancy, and final approved site plan (excluding plumbing, grading, and mechanical) documents on file for the property listed below.

*Please notify us if fees will exceed $50.00 (Our Ref# 107131-3)

☐ 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)

RECEIVED
OCT 05 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Jeana Hancock

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1026 West Elizabeth Avenue

BLOCK/LOT: Block: 422/ Lot: 11

:ITY OF LINDEN
:PPLICATION FORM

:EQUEST FOR PUBLIC RECORDS

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

#2017-615

'LEASE PRINT)

Name: Zakiyyah Austin | Date: 10/5/17

Organization (If Applicable): RE/MAX First Realty

Mailing Address: 10 Main St Ste 206

City, State, Zip: Woodbridge NJ 07095

Home/Business Phone [redacted] E-MAIL: Kia.Austin@remax.net

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

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

Properties w/ Code violations
property tax delinquencies
abandoned properties

☐ 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
OCT 05 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

#2017-1016

(PLEASE PRINT)

Name: Terry Fletcher Date: 10/5/17

Organization (If Applicable): Construction Information Systems (CIS)

Mailing Address: 176 Kinnelon Rd

City, State, Zip: Kinnelon NJ 07405

Home/Business Phone: [redacted] E-MAIL Terry.f@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)

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL - Please forward the complete list of contractors (company name/city) who bid, and their amounts for the Milling & Resurfacing, Bower St & W. Twelfth Street project - Bid tabulations as opened.
thank you.

☐ 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
OCT 05 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Terry Fletcher

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

#2017-617

(PLEASE PRINT)

Name: Terry Futcher Date: 10/5/17

Organization (If Applicable): Construction Information Systems (CIS)

Mailing Address: 176 Kunelon Rd

City, State, Zip: Kunelon NJ 07846

Home/Business Phone [redacted] E-MAIL Terry.f@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)

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL Please forward the complete list of contractors (Company/City who bid and their amounts for the Milling & Resurfacing of Park Ave & Lower Rd project. Bid tabulations as opened.
Thank-you

☐ 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
OCT 05 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Terry Futcher

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

#2017-618

(PLEASE PRINT)

Date: October 4, 2017

Name: Taylor Rodenberg

Organization (If Applicable): Partner Engineering and Science, Inc. (Partner)

Mailing Address: 611 Industrial Way West

City, State, Zip: Eatontown, NJ 07724

Home/Business Phone [redacted] E-MAIL trodenberg@partneresi.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

Partner is conducting a Phase I Environmental Site Assessment on the following property:
933 Smith Street
Linden, NJ 07036
Block 470, lot 61
Please see the attached detailed requests for the Building, Fire and Zoning Departments.

☐ 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
OCT 05 2017
CLERK'S OFFICE

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 933 Smith Street, Linden, NJ 07036

BLOCK/LOT: 470/61

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

RECEIVED
OCT - 6 2017
CLERK'S OFFICE

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

(PLEASE PRINT) #2017-1019

Name: STEVE SMITH | Date: 10/5/2017

Organization (If Applicable): DRN DEFINITE SOLUTIONS LLC

Mailing Address: 3240 East State Street

City, State, Zip: Hamilton, NJ, 08619

Home/Business Phone: [redacted] E-MAIL: taxteam@drnds.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

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

Hello
Please provide information on code violation and permit on the following address listed below
If there is any open cases or permit and is this property scheduled for demolition.
PROPERTY ADDRESS: 927 BERGEN AVE, LINDEN, NJ 07036
OWNER: ARVELO MARIA

☐ 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: STEVE SMITH

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 927 BERGEN AVE, LINDEN, NJ 07036

BLOCK/LOT: 112/6

: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) #2017-021

Name: MARY REPOUSIS Date: 10/6/17

Organization (If Applicable):

Mailing Address:

City, State, Zip: [redacted]

Home/Business Phor [redacted] E-MAIL: maryrepousis@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)

police records: S 2015 1158

2C:20-4A

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL maryrepousis@aol.com

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

RECD 10/10/17

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

REQUEST FOR PUBLIC RECORDS

2017-1022

PLEASE PRINT)

Name: Donald Severe | Date: 10/10/17

Organization (If Applicable):

Mailing Address: 91-18 216 Street

City, State, Zip: Queens Village, NY 11428

Home/Business Phone [redacted] E-MAIL donaldsevere@ymail.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 or permit history

☐ 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: 548 Ziegler Avenue

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

REC'D 10/6/17

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

REQUEST FOR PUBLIC RECORDS

2017-623

(PLEASE PRINT)

Name: Jeana Andersen | Date: 10/5/17

Organization (If Applicable):

Mailing Address: 81 Mountain View Blvd

City, State, Zip: Wayne NJ 07470

Home/Business Phone: [redacted] E-MAIL Tim@appcland.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)

Could you please send me the property record card for 42 E Henry St, Block 211, Lot 23.

Thank you!

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 42 E. Henry St.

BLOCK/LOT: 211, 23

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

#2017-1024

(PLEASE PRINT)

Name: Sun West Mortgage Co | Date: 10/06/17
Organization (If Applicable): SAME
Mailing Address: 18000 Studebaker Rd Ste 200
City, State, Zip: Cerritos CA 90703
Home/Business Phon[redacted] E-MAIL christina.estrada@swmc.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 for property address: 1151e Passaic Ave Linden, NJ 07036 April 11, 2017

Smoke Certificate for property address: 1151e Passaic Ave Linden, NJ 07036

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

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

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

☒ OTHER (SPECIFY)

FAX TO 818-558-5043 or
EMAIL: Christina.estrada@swmc.com or,
Call [redacted]

☐ LICENSE INFORMATION (SPECIFY)

RECEIVED
OCT 06 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1151e PASSAIC AVENUE 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

#2017-625

(PLEASE PRINT)

Name: ADAM SMITH

Date: 10/06/2017

Organization (If Applicable): DRN Definite Solutions LLC

Mailing Address: 3240 East State Street

City, State, Zip: Hamilton NJ 08619

Home/Business Phone: [redacted] E-MAIL taxteam@drnds.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

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

Hello

Please provide information on code violation and permit on the following address. If there is any open cases or permit

Address: 211 Monroe St, LINDEN, NJ, 07036

Name: GARCIA MARISOL

Thanks & Regards

ADAM SMITH

☐ 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
OCT 06 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

ROBERT K. MARCHESE, ESQ., P.C.
A Professional Corporation
Executive Center
27 West Street, 2nd Floor
Red Bank, New Jersey 07701-1168
[redacted]
PLEASE NOTE NEW FAX NUMBER
FAX (888) 522-5615

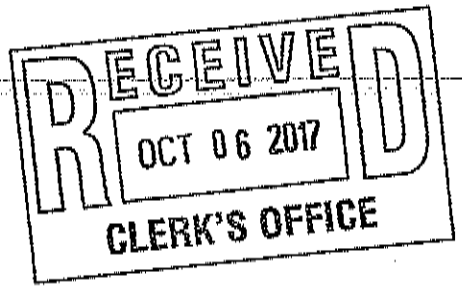
ROBERT K. MARCHESE †*^«
(Inactive in DC & FL)

Admitted in:
† NY * NJ
^ DC « FL

Of Counsel
FREDERICK J. MARTORELL †*
PAUL C. BIERMAN †«

2017-626

October 6, 2017



VIA FAX (908) 474-8451
City of Linden
Municipal Building
301 North Wood Avenue
Linden, NJ 07036

Re: William Mocharski to Joseph Cantarelli
Premises: 404 East Price Street, Linden, NJ 07036
Block 199, Lot 6

Dear Madam or Sir:

Please be advised that I am the attorney for the potential buyer of the above referenced premises.

Please advise if there are any open permits or violations on this property.

Thank you.

Very truly yours,
ROBERT K. MARCHESE, ESQ., P.C.

By: Robert K. Marchese
Robert K. Marchese, Esq.

RKM/cs

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

2017-627

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

(PLEASE PRINT)

Name: CRAIG LONG Craig Long Date: 10/6/17

Organization (If Applicable): SCARINCI HOLLENBECK

Mailing Address: 1100 VALLEY BROOK ROAD 1100 Valley Brook Road

City, State, Zip: LYNDHURST NJ 07071 Lyndhurst, NJ 07071

Home/Business Phone [redacted] E-MAIL CLONG@SH-LAW.COM

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

clong@sh-law.com

DESCRIPTION OF PUBLIC RECORD(S):

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

PLEASE PROVIDE ONE COPY OF THE COLLECTIVE BARGAINING AGREEMENT PRESENTLY IN EFFECT BETWEEN THE CITY OF LINDEN AND PBA LOCAL 42

please provide one copy of the collective bargaining agreement presently in effect between the City of Linden & PBA Local 42

☐ INSPECT DRAWING(S) "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 TITLE, NUMBER OR OTHER IDENTIFYING INFORMATION)

☐ OTHER (SPECIFY)

RECEIVED
OCT 06 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Craig Long

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

#2017-628

LEASE PRINT)
Name: SARAH FITZPATRICK | Date: 10/6/2017
Organization (If Applicable): NBC News
Mailing Address: 30 Rockefeller Plaza - Investigative Unit
City, State, Zip: New York, NY 10020
Home/Business Phon[redacted]AIL sarah.fitzpatrick@nbcuni.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 inspection records and citations of the Blue Apron facility at 901 W. Linden Ave, Linden, NJ.
Copy Records of any complaints regarding this facility that have been submitted to the Linden Health Department

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL
to sarah.fitzpatrick@nbcuni.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
OCT 06 2017
CLERK'S OFFICE

SIGNATURE: Sarah Fitzpatrick
NFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 901 W. Linden 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

RECEIVED
OCT 10 2017
CLERK'S OFFICE

(PLEASE PRINT) #2017-629

Name: Jennifer Roy Date: 10/09/2017

Organization (If Applicable): American Tax Reporting

Mailing Address: 2727 LJB Freeway,

City, State, Zip: Suite 420 Dallas TX 75234

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

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX 888-908-3471

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

Please let us know if there are any special assessments or any open code violations or any open/expired building permits for the below mentioned property address :

Ref #: 513073

☐ 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: Mervyn Samson Daniel

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 711 Hussa St Linden NJ 07036

BLOCK/LOT: Block: 141 Lot: 4

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

RECEIVED
OCT 10 2017
CLERK'S OFFICE

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

(PLEASE PRINT) #2017-630

Name: ALBERT AGBONGWA | Date: 10/09/17

Organization (If Applicable):

Mailing Address: 26 Fern Court

City, State, Zip: Sayreville, NJ 08872

Home/Business Phone [redacted] E-MAIL: agbongwa@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 & Close permits

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1513 Winans 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

2017-1032

(PLEASE PRINT)

Name: Lillian Fouche | Date: 10-10-17
Organization (If Applicable): Envi-Platinum Realty
Mailing Address: 200 Clairemont Ave
City, State, Zip: Montclair NJ. 07042
Home/Business Phone [redacted] EMAIL: lillestate@yahoo.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
I am requesting information on all open and closed permits. Also, information if there was ever an oil tank removed from in the ground etc... permit for the roof, too. permit if any rooms were added.

☐ 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
OCT 11 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Lillian Fouche

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 117 Chandler Ave, Linden, NJ 07036
BLOCK/LOT: 81-1

CITY OF LINDEN
APPLICATION FORM

RECEIVED
OCT 11 2017
CLERK'S OFFICE

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT) #2017-1033

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 Melissa MI ____ Last Name Staubitz

E-mail Address asorc@aol.com

Mailing Address 473 Hamburg Turnpike

City West Milford State NJ Zip 07480

Telephone [redacted] FAX (973) 839-6779

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

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

Signature [signature] Date 10/11/2017

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

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

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

Extras: Special service charge dependent upon request.

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.

Good afternoon,

I am inquiring to know if there are any documents on file regarding storage tanks for the referenced property below (Underground storage tank, Aboveground storage tank... looking for permits, Certificate of Approvals, etc.). Anything found can either be emailed or faxed to me, whichever is easiest for you. Thank you in advance for your assistance!

** Address of Inquiry: 27 Robbinwood Terrace, Linden, NJ 07036 **

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
Denied
Open
Closed
Closed

AGENCY USE ONLY

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

Final Cost
Total
Deposit
Balance Due
Balance Paid
Records Provided

RECEIVED
OCT 11 2017
CLERK'S OFFICE

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) # 2017-634

Name: Paul Paravati | Date: 10/11/17
Organization (If Applicable): Todd J. Leonard Law Firm
Mailing Address: 3010 Route 10 West
City, State, Zip: Denville, NJ 07834
Home/Business Phone [redacted] E-MAIL PParavati@LawLeonard.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Videos and/or Surveillance footage which covers the date of our client's accident including of the actual accident footage. Crash occured on US 1 and JT. 278 WB. See attached patrol report for location.

☐ 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)
Video

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: US 1 merge with 278 W.

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

#2017-635

(PLEASE PRINT)

Name: Nitesh M. Patel | Date: 10/12/17
Organization (If Applicable):
Mailing Address: 555 US Hwy 1 South, Suite 100
City, State, Zip: Iselin, NJ 08830
Home/Business Phone: [redacted] E-MAIL: kaja1@mplegal.net
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 permits or violations on the property: 914 Mack Place Linden, NJ 07036 (Block: 504; 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)

☐ LICENSE INFORMATION (SPECIFY)

RECEIVED
OCT 17 2017
CLERK'S OFFICE

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 914 Mack Place, Linden, NJ 07036
BLOCK/LOT: (Block: 504; lot: 3)

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

#2017-1036

(PLEASE PRINT)

Date: 10-12-2017

Name: Robert Melchionne

Organization (If Applicable): Prudential Bank

Mailing Address: 250 Madison Avenue

City, State, Zip: Morristown NJ 07960

Home/Business Phon[redacted] E-MAIL: ROBERT.MELCHIONNE@PRUDENTIAL.BANK

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S): For #401 ROSELLE STREET# [LOT 1.01 Block 173]
(Please be specific and attach additional pages of information, if necessary)
Environmental, Soil + Water Testing, Any Site Remediation from 1996 through 2012
Any Fire Dept, Health Dept, Building + Engineering Records
Previously a Manco Auto Body Now an Apartment Building

☐ 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
OCT 12 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Robert Melchionne

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 401 Roselle Street
BLOCK/LOT: Lot 1.01 Block 173

[TY 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

#2017-637

LEASE PRINT)

Name: Maura Barrett | Date: 10/13/17

Organization (If Applicable): NBC News

Mailing Address: 30 Rockefeller Plaza

City, State, Zip: New York NY

Home/Business Phone [redacted] E-MAIL maura.barrett@nbcuni.com

EQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

ESCRIPTION OF PUBLIC RECORD(S):

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

I am requesting police reports on behalf of NBC News. We are looking for anything filed by/against/involving Blue Apron at any point from 2016/2017. We understand Blue Apron has recently begun operations out of a warehouse in Linden NJ.

Location of warehouse: 901 W Linden Ave, Linden, NJ 07036

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

☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

maura.barrett@nbcuni.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
OCT 13 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

NFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 901 W Linden Ave, Linden NJ 07036

BLOCK/LOT: N/A

CITY OF LINDEN
APPLICATION FORM

RECEIVED
OCT 13 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

#2017-1038

(PLEASE PRINT)

Name: Christopher Buck | Date: 10/13/2017

Organization (If Applicable): Unicorn Management Consultants, LLC

Mailing Address: 52 Federal Road, Suite 2C

City, State, Zip: Danbury, CT, 06811

Home/Business Phone [redacted] IL cbuck@unicormmgt.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

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

Seeking aboveground petroleum storage tank records for the Buckeye - Linden Station property located at 2650 Marshes Dock Road. Including but not limited to tank tightness and inventory control records from 1986 to the present, and any construction records.

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

☑ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL * works for an env clean up team to see if they maintain there tanks, liabity ongoing clean up taking place

☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION) have a number w/ the DEP

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: Buckeye Linden Station, 2650 Marshes Dock Road, Linden, NJ

BLOCK/LOT: 581/14

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

#2017-040

(PLEASE PRINT)

Name: Theodore Moreines | Date: 10/12/17

Organization (If Applicable):

Mailing Address: 516 Gallows Hill Rd Please call Susan Moreines at (908)591-0207 (cell)

City, State, Zip: Cranford, NJ 07016

Home/Business Phone [redacted] E-MAIL: ts2xj@verizon.net

REQUEST MADE VIA: ☑ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

Court ID [redacted] Municipal offense [redacted]
8836 John Halkias D.o.I. 10/10/17
- Dash cam video
- Video body worn cameras of officer in walkway, issuing officer & supervising officer
Incident was on Wood Ave in front of the train station (crosswalk)
Ticket was for $230 for failure to yield to pedestrian

☐ 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
OCT 13 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Susan Moreines (spouse)

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

2017-641

(PLEASE PRINT)

Name: NICHOLAS DANSBY | Date: 09/13/2017

Organization (If Applicable): FANNIE MAE IN C/O PEMCO-LIMITED

Mailing Address: 4600 SOUTH ULSTER ST., SUITE 530

City, State, Zip: DENVER, CO 80237

Home/Business Phon[redacted] E-MAIL: NICHOLAS.DANSBY@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)

May I have the open code violations, open permits for the address below?

Also, has the property been registered vacant under Fannie Mae's ownership? If so, when was it last registered and who paid registration fee?

40 ELMWOOD TERR, LINDED, NJ 07036

BLOCK: 229

LOT: 8

☐ 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: 40 ELMWOOD TERR, LINDED, NJ 07036

BLOCK/LOT: 229/ 8

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

#2017-643

PLEASE PRINT)

Name: Shymir Williams | Date: 10/16/17

Organization (If Applicable):

Mailing Address: 3 Lefferts Ave ST

City, State, Zip: Carteret NJ 07008

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

Incident Report. Involved. Brandon Gilder
Year: 2015 June 2015 - September 2015 Isaiah Ashfo
Charge: City ordinace Chelsey V.
Location: Linden, NJ [redacted] Alshon Apon

Shymir Williams (08/14/1996)

☐ 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
OCT 16 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

#2017-644

PLEASE PRINT)

Name: Julie Kaye | Date: 10/16/2017

Organization (If Applicable): Reclaim Lost Assets

Mailing Address: 2100 valley view pkwy

City, State, Zip:

Home/Business Pho[redacted] E-MAIL Julie@reclaimlostassets.org

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 making a public records request for:
- a list of unclaimed lien redemptions
- a list of unclaimed property tax refunds

☐ 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
OCT 16 2017
CLERK'S OFFICE

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

(2017-645)

(PLEASE PRINT)

Name: Jack E. Potash, Esq. Date: 10/17/17

Organization (If Applicable): Ronan, Tuzzio & Giannone

Mailing Address: One Hovchild Plaza, 4000 Route 66, Suite 231

City, State, Zip: Tinton Falls, NJ 07753-7308 ronanlaw.com

Home/Business Phone [redacted] E-MAIL jpotash@ronanlaw.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX

Our fax no.: 732-918-8505

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

Seeking any and all information regarding any violations issued to the owner of 431 North Wood Avenue Linden, from the City of Linden Building Department, Construction Department, and Health Department. Additionally, seeking all resolutions and/or decisions of the Linden Planning Board and Zoning Board of Adjustment involving 431 North 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
OCT 17 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 431 North Wood Avenue

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

(#2017-646)

(PLEASE PRINT)

Name: Peggy Tomko (Wilgart's Realty) Date: 10/17/17
Organization (If Applicable):
Mailing Address: 21 W. Blancke St
City, State, Zip: Linden NJ 07036
Home/Business Phone [redacted] E-MAIL: PeggoState@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)

Open & Closed Permits for conversion of oil to gas heating and fill of underground oil tank

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 17 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Peggy Tomko

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 2000 Orchard Terr.

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

(#2017-647)

(PLEASE PRINT)

Name: Andrew Stein, Esq.	**Date:** October 17, 2017
Organization (If Applicable): Linden Towers Condominium Association, Inc.	
Mailing Address: 151 Highway 33 East, Suite 204	
City, State, Zip: Manalapan, NJ 07726	
Home/Business Phone [redacted]	**E-MAIL** astein@cutolobarros.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

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

Applications for permits submitted and any permits issued thereby to Dr. Michael S. Maika, Joseph McTernan, Sam Germana, Linden Dialysis Center, and/or Trinitas Regional Medical Center in connection with the installation of a generator at 10 North Wood Avenue, Suite B, Linden, NJ 07036.

RECEIVED
OCT 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:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 10 North Wood Avenue, Suite B, Linden, NJ 07036

BLOCK/LOT: Block 201, Lots 12-17

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

(#2017-648)

(PLEASE PRINT)

Name: Gina Gros **Date:** 10/18/17

Organization (If Applicable): Gallas Surveying Group

Mailing Address: 2865 US Route 1

City, State, Zip: North Brunswick, NJ 08902

Home/Business Phon [redacted]

REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

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

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

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

The information I am requesting is the following:

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

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

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

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

☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

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

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

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

(#2017-649)

(PLEASE PRINT)

Name: Marcia Johnson | Date: 10/18/17
Organization (If Applicable): Public Service Electric & Gas
Mailing Address: 24 Brown Avenue
City, State, Zip: Springfield NJ 07081
Home/Business Phone: [redacted] E-MAIL: Marcia.Johnson@PSEG.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 PSEG Contractor damaged our overhead wires to a utility pole. I need the Fire Report sent to me. The report number is 17005101. The date of accident was 9/21/17 at Locations 422 Princeton Rd, Linden.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 18 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Marcia Johnson

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

(#2017-650)

PLEASE PRINT)
Name: Hugh David O'Hare | Date: 10/18/17
Organization (If Applicable):
Mailing Address: 23 W. 18th St.
City, State, Zip: Linden N.J. 07036
Home/Business Phone [redacted] E-MAIL h.davidohare@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 needed of Police and Health Dept Documents related to [redacted] and [redacted]
The Same Dog yesterday viciously rown all over my backyard and my Gf Michelle was chasing him. They went throw neibor Yard and out front. The people in 31 W. 18th St. Witnessed the

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE dog's address

☐ SEND RESPONSE BY E-MAIL 15 W. 18th Street

☐ 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) Call I'll Pick-up.

☐ LICENSE INFORMATION (SPECIFY)

RECEIVED
OCT 18 2017
CLERK'S OFFICE

SIGNATURE:

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

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

RECEIVED
OCT 18 2017
CLERK'S OFFICE

(#2017-651)

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

PLEASE PRINT)

Name: JOHN MINGATOS | Date: 10-18-17

Organization (If Applicable): EXIT REALTY PREMIER

Mailing Address: 18 HUSSA ST

City, State, Zip:. LINDEN, NJ. 07036

Home/Business Phone E-MAIL.

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

MUNICIPAL LIENS / TAX LIENS
CODE VIOLATIONS

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

JOHN@JOHNMINGATOS.COM
[redacted]

☐ 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: 1809 S. WOOD AVE., LINDEN, N.J. 07036

BLOCK/LOT: 539/23.02

CITY OF LINDEN
APPLICATION FORM

due Oct. 27

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) Robert
Name: Robert Cashwell | Date: 10-18-17
Organization (If Applicable):
Mailing Address: 801 ESSEX Ave
City, State, Zip: Linden N.J. 07036
Home/Business Phone [redacted] IL Cashwell476@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)
17-043341

☐ 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
OCT 18 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Robert Cashwell

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) #2017-652

Name: Harris Sandler | Date: 10/19/2017
Organization (If Applicable): Terra Realtors
Mailing Address: 500 Centennial Ave
City, State, Zip: Cranford, NJ 07016
Home/Business Phone [redacted] E-MAIL harris@terrarealtors.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

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

Municipal Liens, Code Violations, Permits open & closed

☐ 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: 551 Jackson Ave, Linden, NJ 07836
BLOCK/LOT: Block : 163 Lot: 35

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

RECEIVED
OCT 19 2017
CLERK'S OFFICE

(PLEASE PRINT) #2017-652

Name: Stephanie Williams | Date: 10/16/17
Organization (If Applicable): Progressive Ins. Co
Mailing Address: 485a Rt 1 South Suite 400
City, State, Zip: Iselin NJ 08830
Home/Business Phone [redacted] E-MAIL swillis1@progressive.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☑ CORRESPONDENCE ☑ FAX

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

The Progressive Casualty Insurance Company driver was involved in a motor vehicle accident on September 27, 2017 on S Park Ave. & Rt. 1 Linden, NJ. Please provide footage from the traffic cameras located at this intersection. The police report has been included for your review.

Date if accident: 9/27/17
Time of accident: 9:10am
Loss location: S Park Ave. & Rt. 1 Linden, NJ.
Drivers: David Wagshal and Servio Briones-Abad

☐ 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: Stephanie Williams

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

2017-653

(PLEASE PRINT)

Name: MARCO MAYORGA Date: 10-12-2017

Organization (If Applicable):

Mailing Address: 126 WEST CURTIS ST.

City, State, Zip: LINDEN NJ 07036

Home/Business Phone [redacted] MAIL MARDIANI@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)

PLUMBING PERMITS FOR - CELLAR SINGLE SINK -
- CELLAR LAUNDRY SINK - HOT WATER HEATER -
- CELLAR SHOWER STALL -

☐ 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
OCT 19 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 126 WEST CURTIS St. LINDEN N.J. 07036

BLOCK/LOT: 242* 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) #2017-654

Name: Sarah Ryan | Date: 10/13/17
Organization (If Applicable): Tompkins, McGuire, Wachenfeld & Barry
Mailing Address: 3 Becker Farm Road, Suite 402
City, State, Zip: Roseland, NJ 07068
Home/Business Phone [redacted] E-MAIL sryan@tompkinsmcguire.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☑ CORRESPONDENCE ☐ FAX

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

Please provide a copy of any & all reports, photographs, diagrams, etc. generated in connection with a May 11, 2015 motor vehicle accident on US 1 in Linden, NJ involving Boris Platkin and Jose A. Quezada.

☐ 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
OCT 20 2017
CLERK'S OFFICE

SIGNATURE: Sarah Ryan

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

#2017-655

(PLEASE PRINT)

Name: MICHELLE MAGIERA-ARNOLD | Date: 10-20-2017

Organization (If Applicable):

Mailing Address: 612 SHERIDAN AVE

City, State, Zip: ROSELLE PARK, NJ 07204

Home/Business Phone: [redacted] E-MAIL michelle@HALLMARKREALTORS.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 & ALL PERMITS CONCERNING THE REMOVAL OF AN UNDERGROUND OIL TANK OR AN ABOVE GROUND OIL TANK, SINCE 1952

☐ 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
OCT 20 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 326 N. STILES ST LINDEN

BLOCK/LOT: 354 / 14

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

#2017-656

PLEASE PRINT)

Name: Jennifer Hardel | Date: 10/20/2017

Organization (If Applicable):

Mailing Address: 208 E. Elizabeth Ave C2E

City, State, Zip:. Linden NJ 07036

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

case # 17050379
on 10/19/2017 at approx 7am I called Linden Police bc Barry apt C2E my upstairs neighbor was not responding to knocking at his door. He left water running in his bathroom which came thru ceiling of my apt + flooded my bathroom. His apt was found in extreme unsanitary conditions. Officers provided me with case # and advised I would be able to obtain report + also file a complaint if I wished + do so.

☐ 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
OCT 20 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Jennifer Hardel 10/20/17

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

RECEIVED
OCT 20 2017
CLERK'S OFFICE

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT) #2017-657

Name: TAshawn Burrell | Date: 10/20/17
Organization (If Applicable):
Mailing Address: 8 crescent ln apt 1B
City, State, Zip: Irvington, NJ 07111
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)

Body Camera Footage from Case # 17035720 August 4, 2017 @ approx. 3:30 pm involving Tashawn Burrell (DOB [redacted]) Aviation Plaza & MC Theatre.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: _____

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

2017-658

(PLEASE PRINT)

Name: Tonia McKoy | Date: 10/20/17

Organization (If Applicable):

Mailing Address: 40 Princeton Road

City, State, Zip: Linden, NJ 07036

Home/Business Phon[redacted] E-MAIL: tmmckoy@gmail.com

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

All Permits Open / Closed.
Information on Flood Zone designation
Oil tank or removal of tank.
Violations.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL tmmckoy@gmail.com ; ecliff6.jackman@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)

RECEIVED
OCT 23 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Tonia McKoy

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 724 Haven Place, Linden, NJ 07036

BLOCK/LOT: Block 406 Lot 6

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

2017-670

(PLEASE PRINT)

Name: EDWARD GRIMES | Date: 10/23/17
Organization (If Applicable): SATIVACROSS.COM
Mailing Address: 84 HANOVER RD
City, State, Zip: EAST HANOVER NJ 07936
Home/Business Phone [redacted] EMAIL: DJEVELED@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)

I AM REQUESTING BODY CAM FOOTAGE OF OFFICER (BADGE #92) OUTSIDE COURT ON 10/18/17
ALL INTERACTION BETWEEN BADGE #92 ON 10/18/17 5PM-6

☐ 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
OCT 23 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

#2017-671

(PLEASE PRINT)

Name: VINCENT CRICCHIO | Date: 10/23/17

Organization (If Applicable):

Mailing Address: 30 MONMOUTH PLACE

City, State, Zip: LONG BRANCH NJ 07740

Home/Business Phone [redacted] E-MAIL ACIENT1@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)

All Police Reports FOR / AGAINST [redacted]
200 WEST 16TH ST, LINDEN, NJ, 07036
FROM MAY 4, 2014 TO PRESENT

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL ACIENT1@AOL.COM

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

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 23 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 200 WEST 16TH STREET, LINDEN, NJ, 07036

BLOCK/LOT: 555 / 27

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

#2017-672

(PLEASE PRINT)

Name: a Andrew S. Prince, Esq. Date: 10/24/2017

Organization (If Applicable):

Mailing Address: 136 Central avenue

City, State, Zip: Clark, NJ 07066

Home/Business Phon[redacted] E-MAIL jhencivenga@teamlaw.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

The fire department responded to an incident on October 20, 2017 at 324 Ashton Avenue, Linden, NJ at approximately 12:00 pm wherein my client, Michael Ortmann sustained injuries when the garage roof collapsed on Mr. Ortmann.

Please provide a copy of the report.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 25 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: ASP Prince

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

RECEIVED
OCT 25 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

#2017-673

(PLEASE PRINT)

Name: Douglas Ramos Date: 10/25/17
Organization (If Applicable): Century 21 Alliance Realty
Mailing Address: 867 North Stiles Street
City, State, Zip: Linden NJ 07036
Home/Business Phon[redacted] MAIL Douglasr@c21ar.net
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

☐ 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: 621 Amherst Road

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

2017-674

(PLEASE PRINT) Date: 10/26/17

Name: Thomas Myers

Organization (If Applicable): Sovereign Consulting Inc.

Mailing Address: 111A North Gold Drive

City, State, Zip: Robbinsville NJ 08691

Home/Business Phone [redacted] E-MAIL TMyers@sovcon.com

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

Property records for 1200 West Blanche Street, Block 421, Lot 49.01
Copies of Building Department records, Fire Department records and Health Department records for an environmental assessment of the property: any records of USTs and inspections

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL - will conduct on-sit review if e-mail is not an option.

☐ 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
OCT 26 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Thomas Myers

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1200 West Blanche Street

BLOCK/LOT: # 421, Lot 49.01

CITY OF LINDEN
APPLICATION FORM

RECEIVED
OCT 26 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

2017-677

(PLEASE PRINT)

Name: DON ERWIN | Date: 10/26/2017

Organization (If Applicable): ERWIN & BIELINSKI

Mailing Address: 37 W 39TH ST. SUITE 1200

City, State, Zip: NY, NY 10018

Home/Business Phone: [redacted] E-MAIL: DERWIN@EBFORENSIC.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 FILINGS MADE IN CONNECTION WITH BUILDING #92 AT MERCK PLANT IN LINDEN. TRYING TO DETERMINE WHO WAS CONTRACTOR FOR NEW CONSTRUCTION IN MID 1970'S, AND DATES OF CONSTRUCTION

ANY INFO APPRECIATED!

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT: BLOCK 470 LOT 67

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) #2017-1078

Name: Katherine Varela | Date: 10/26/17
Organization (If Applicable):
Mailing Address: 73 W Edgar Rd
City, State, Zip: Linden NJ 07036
Home/Business Phone [redacted] E-MAIL: ewakat@gmail.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please [redacted] and attach additional pages of information if necessary)
[redacted] f/o Katherine Varela 10/27/83
The incident occurred at night around 7pm. The location: Wood Ave. and St. Georges Ave. Intersection.
SS# [redacted]

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☑ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 26 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Katherine Varela

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

(#2017-679)

(PLEASE PRINT)

Name: Hannah Hergenhan | Date: 10/26/17
Organization (If Applicable): Weichert Realtors
Mailing Address: 111 E Bryant St
City, State, Zip: Ra[redacted] NJ 07065
Home/Business Pho[redacted] MAIL hhergenhan@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)

All permit history for 20 E. Henry St

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL
hhergenhan@weichert.com

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 27 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 20 E Henry St
BLOCK/LOT: 211, 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

#2017-1080

(PLEASE PRINT)

Name: Justin Kiliszek	Date: 10/27/17
Organization (If Applicable): Keller Williams Metropolitan	
Mailing Address: 55 Madison Ave, Suite 120	
City, State, Zip: Morristown, NJ 07960	
Home/Business Phone [redacted]	E-MAIL billy@agentjustin.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

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

Please advise of the following for the property located at: 513 W Curtis St

1. Any open code violations for fire, health and building
2. Any and all open permits on the property.
3. If house has a septic, please provide an As-built.

☐ 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
OCT 27 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Justin Kiliszek

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) #2017-681

Name: Diana Francis	Date: 10-20-2017
Organization (If Applicable):	
Mailing Address: 609 Adams Street, Unit #3	
City, State, Zip: Linden, NJ 07036	
Home/Business Phone [redacted]	E-MAIL dianafrancis87@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 respectfully submitting an OPRA Request for environmental/health violations, incidents, complaints; Community Right to Know; UST registrations, installation or removal permits; hazardous substances (including petroleum) inventories, discharges, bulk storage, leaks, spills; monitoring well, potable well, or other well installation records; Industrial Site Recovery Act (ISRA) or ECRA correspondence; groundwater contamination reports, including Classification Exception Areas (CEAs); Declaration of Environmental Restrictions (DERs); air emission permits/records; and solid waste or sanitary waste permits/records concerning 710 Lindegar Street, Linden NJ, 07036. Kindly provide any response electronically to me.

☐ 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
OCT 27 2017
CLERK'S OFFICE

☒ LICENSE INFORMATION (SPECIFY)

SIGNATURE: D.F.

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 710 Lindegar Street, 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

#2017-6082

(PLEASE PRINT)

Name: Angela Outar | Date: 10/27/17
Organization (If Applicable): NJ REO Asset Mgt. & Realty Inc.
Mailing Address: 650 Bloomfield Ave Suite 104
City, State, Zip: Bloo[redacted] 07003
Home/Business Phone [redacted] E-MAIL angela0@newjerseyreo.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 let us know if there's any violations or citations on

851 Gilchrist Ave Linden, NJ

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 27 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 851 Gilchrist 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

#2017-683

(PLEASE PRINT)

Name: George Villegas | Date: 10-27-17
Organization (If Applicable):
Mailing Address: 1435 N. Harbor Bl. #147
City, State, Zip: Fullerton, CA 92835
Home/Business Phone [redacted] E-MAIL info@patrickgoodrich.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, what open permits are on file for: Metropolitan Warehouse & Delivery located at 2565 Brunswick Ave., Linden, NJ 07036.
We do not need copies of those permits at this time - only need to know what permits are open.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL to: info@patrickgoodrich.com
cc: george_v@patrickgoodrich.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
OCT 27 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: George Villegas

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 2565 Brunswick 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) #2017-684

Name: Donna Brillante	Date: 10/31/2017
Organization (If Applicable): R. Paradise Appraisals Co.	
Mailing Address: 33 Clinton Road Suite 103	
City, State, Zip: West Caldwell, NJ 07006	
Home/Business Phone [redacted]	E-MAIL r.paradiseappraisals@verizon.net
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☒ FAX	

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

We are doing an Appraisal on the following property and would appreciate a copy of the Property Record Card

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL r.paradiseappraisals@verizon.net

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

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

☒ OTHER (SPECIFY) Property Record Card

☐ LICENSE INFORMATION (SPECIFY)

RECEIVED
OCT 31 2017
CLERK'S OFFICE

SIGNATURE: Donna Brillante

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 509 Academy Terrace

BLOCK/LOT: 374/13

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

(PLEASE PRINT) #2017-685

Name: Grisela Flores	Date:
Organization (If Applicable):	
Mailing Address: 911-913 St George Ave	
City, State, Zip: Roselle NJ 07203	
Home/Business Phone [redacted] E-MAIL: grisela@florostone.com	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☑ FAX 908-854-0221	

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

I would like a copy of the VACANT/ABANDONED LIST from JAN-NOVEMBER. properties that are being known as VACANT/ABANDONED in the city of Linden

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

RECEIVED
OCT 31 2017
CLERK'S OFFICE

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Grisela Flores

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: _____

BLOCK/LOT: _____