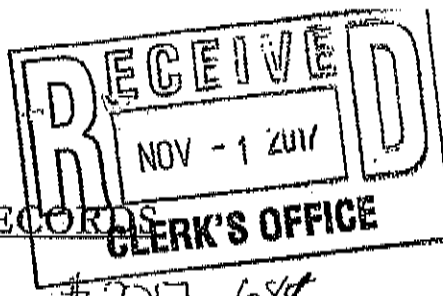


CITY OF LINDEN
APPLICATION FORM



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: Syed Ahsan Date: 11-01-2017
Organization (If Applicable):
Mailing Address: 55 Western Ave
City, State, Zip: Linden, NJ 07307
Home/Business Phone: [REDACTED] E-MAIL: nabeel.ahsan87@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)
Building permits
work done
Sanitary file
Oil tank report

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL (nabeel.ahsan87@gmail.com)

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

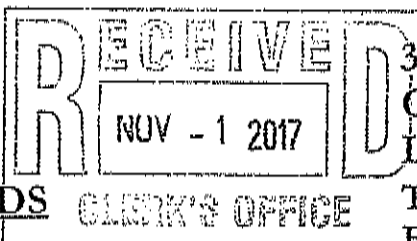
SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1125 N STILES 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

CLERK'S OFFICE

(PLEASE PRINT)

#2017-687

Name: Lisa A. Lehrer Esq	Date: 10/26/2017
Organization (If Applicable): Davis, Saperstein & Salomon, P.C.	
Mailing Address: 375 Cedar Lane	
City, State, Zip: Teaneck, NJ 07666	
Home/Business Phone: [REDACTED]	E-MAIL: ncc@dsslaw.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 this office with a copy of surveillance video located at or near the intersection of East St. George Avenue and Washington Avenue, Linden, NJ 07036. The date and time requested is 8/24/2017 at approximately between 12PM and 1PM

Please see enclosed image of the accident area to help identify the requested images/video.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

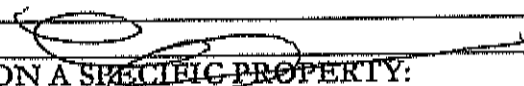
☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: 

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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)

2017-688

Name: Daniel Balassone

Date: 11/2/17

Organization (If Applicable):

Mailing Address: 25 Locust Dr

City, State, Zip: Morris Plains NJ 07950

Home/Business Phone: [REDACTED] E-MAIL dan@planhub.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)

For project CSL Plasma Located at 1601 W. Edgar Rd
please email me the Contractor of records contact
information.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

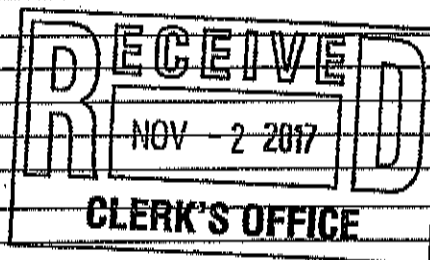
☒ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)



SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1601 W Edgar Rd

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)

2017-689

Name: DOROTA KUMDEBA	Date: 11/2/17
Organization (If Applicable): KELLER WILLIAMS	
Mailing Address: 55 MADISON AVE	
City, State, Zip: LINDEN, NJ 07036	
Home/Business Phone: [REDACTED]	EMAIL: DOROTAKUMDEBA@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)

REF: 154 E MORRIS AVE, LINDEN, NJ BLOCK 442, LOT 12

PLEASE SEND ME COPIES OF ALL CLOSED AND OPEN PERMITS FOR THIS PROPERTY (IF ANY).
I AM A LISTING AGENT.

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

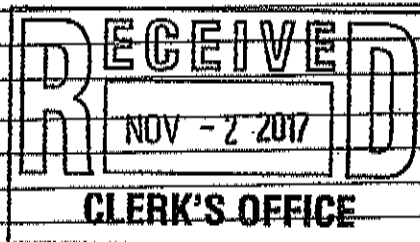
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ 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: 154 E MORRIS AVE

BLOCK/LOT: BLOCK 442, LOT 12

CITY OF LINDEN
APPLICATION FORM

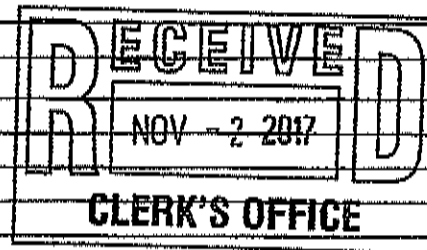
301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

2017-690

Name: Donna Dickson	Date: 11-2-17
Organization (If Applicable): Caldwell Banker	
Mailing Address: 145 Maplewood Ave	
City, State, Zip: Maplewood, NJ 07040	
Home/Business Phone: [REDACTED]	E-MAIL: donna.dickson@cbmatters.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 information on open permits or violations including any information on underground oil tanks.	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	



SIGNATURE: Donna Dickson
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 110 W. 15th ST
BLOCK/LOT: 554/14

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

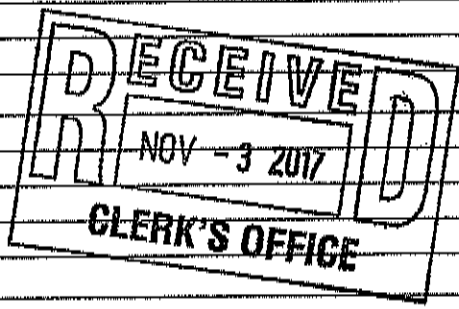
(PLEASE PRINT)

Name: <u>JOE NUNES</u>	Date: <u>11/3/17</u>
Organization (If Applicable):	
Mailing Address: <u>1022 OAK STREET</u>	
City, State, Zip: <u>ROSELIE NJ 07203</u>	
Home/Business Phone <u>908 591 6600</u> E-MAIL <u>NUNESREALESTATE@GMAIL.COM</u>	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

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

FOR 211-307 WEST ELIZABETH AV + 10 LUMBER ST WHICH IS
CURRENTLY OWNED BY TM REAL ESTATE HOLDINGS, LLC
I WOULD LIKE A COPY OF:
1- THE REDEVELOPERS AGREEMENT
2- THE PILOT

☐ 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]

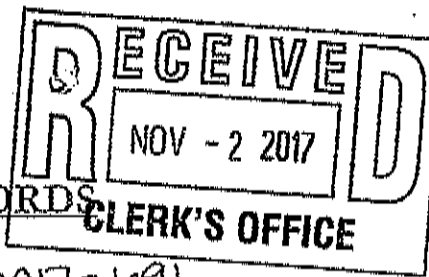
INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 211-307 WEST ELIZABETH AV + 10 LUMBER ST

BLOCK/LOT: BLOCK 288, LOTS 1, 2, 13, 14, 15
BLOCK 254 LOTS 12, 13, 16

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)

2017-691

Name: Logan Ping Date: 11/2/17
Organization (If Applicable): FTI Consulting
Mailing Address: 1375 Piccard Dr., Suite 375
City, State, Zip: Rockville MD 20850
Home/Business Phone: [REDACTED] E-MAIL: logan.ping@fticonsulting.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

CLOSED building permits, fire department registrations
& nuisance/health maintained by the city
records from 1903 - 1995

☐ 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)

CITEC
3301, 3401 - 3433 Tremley Point Road OR
48-53 / 4901 Tremley Point Road

☐ OTHER (SPECIFY)

Dupont

4701 Tremley Point Road

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

#2017-692

Name: Mr. Mohammad Ashraf Date: 10/25/17
Organization (If Applicable): Trade Linker International, Inc
Mailing Address: 570 South Avenue, # C-1
City, State, Zip: Cranford, NJ 07016
Home/Business Phone: [REDACTED] E-MAIL: ashraf@trade-linker.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

1. Records of building permits, inspections #
any violations if any

2. Records of zoning permits, inspection #
any violations including engineering
permits.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

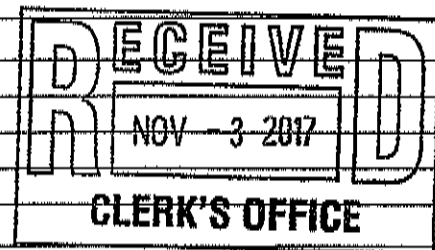
☐ SEND RESPONSE BY E-MAIL

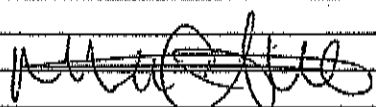
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)



SIGNATURE: 

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 111 Commerce Road, Linden NJ

BLOCK/LOT: 439 / 29

**CITY OF LINDEN
APPLICATION FORM**

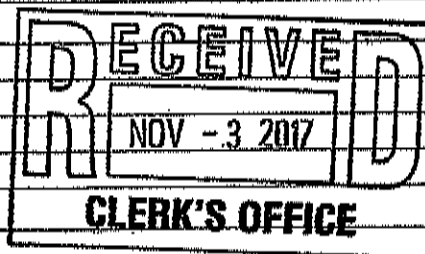
301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

2017-693

Name: Jennifer Roy	Date: 10/10/16
Organization (If Applicable): SLKGA	
Mailing Address: 2121 LJB Freeway,	
City, State, Zip: Suite 420 Dallas TX 75234	
Home/Business Phone: [REDACTED]	E-MAIL: cis@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 #: 614347	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☐ SEND RESPONSE BY E-MAIL	
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
☐ OTHER (SPECIFY)	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE: Jennifer Roy	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: 555 HUSSA STREET Linden	
BLOCK/LOT: Block: 173 Lot: 8	



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)

2017-694

Name: Michael Gar Date: 11/3/17
Organization (If Applicable):
Mailing Address: 105 Union Avenue
City, State, Zip: New Providence, NJ 07974
Home/Business Phone: [REDACTED] E-MAIL: MIKE.CZAR77@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 tax liens

list of properties in the tax sale

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

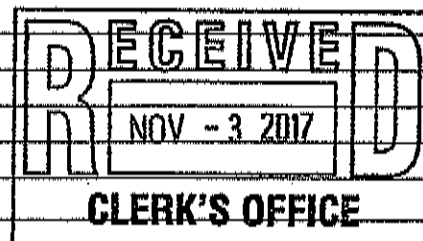
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ 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)



☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

#2017-695

Name: Deborah A Wilcox	Date: 11-4-17
Organization (If Applicable): DW Appraisals, LLC	
Mailing Address: 2055 Greenwich St	
City, State, Zip: South Plain Field	
Home/Business Phone: [REDACTED]	E-MAIL: Deblongoappraisals@gmail.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)

Property Record Card

716 Ercama St
Block 380 Lot 16

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

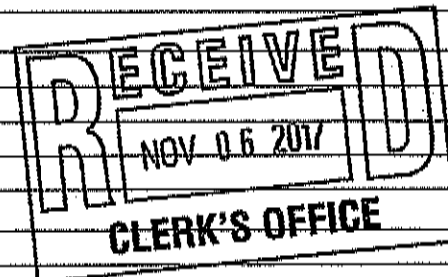
☒ SEND RESPONSE BY E-MAIL

☐ 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: 716 Ercama St

BLOCK/LOT: Block 380 Lot 16

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)

2017-696

Name: <u>PETER FIORINI</u>	Date: <u>11/6/17</u>
Organization (If Applicable):	
Mailing Address: <u>34 Junction Rd</u>	
City, State, Zip: <u>Hamden CT 06522</u>	
Home/Business Phone: <u>[REDACTED]</u> E-MAIL: <u>priorini70@gmail.com</u>	
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

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

COPIES OF LAST 5 YEARS BUILDING PERMITS TAKEN
ON 22 ROBBIN WOOD TERRACE.

SPECIFICALLY LOOKING FOR A PERMIT FOR AN OIL
TANK REMOVAL, IF EXISTS.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

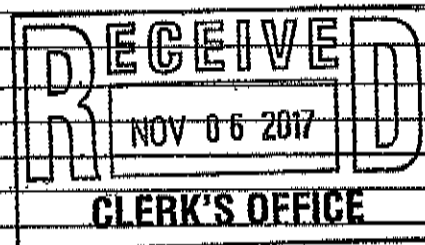
IF POSSIBLE Send e.to.
P.FIORINI70@GMAIL.COM

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)



SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 22 ROBBIN WOOD TERRACE

BLOCK/LOT: 230, 5

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

2017-697

Name: GARY AMINOV Date: 11/6/17

Organization (If Applicable):

Mailing Address: 924 WORTH AV.

City, State, Zip: LINDEN NJ 07036

Home/Business Phone: [REDACTED] E-MAIL: 924WORTHLLC@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)

NAME

- OWNERS INFO ON 924 WORTH AV.

- OPEN PERMITS

- underground oil tank records

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

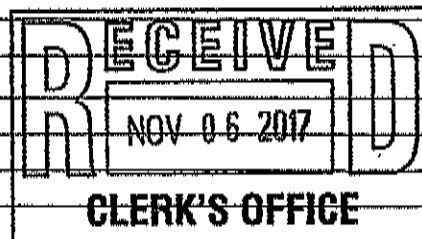
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ 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: 924 WORTH AV.

BLOCK/LOT: 500 / 4

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)

2017-1098

Name: Nestor Lopez Date: 11/6/2017
Organization (If Applicable): Self
Mailing Address: 915 NEW BRUNSWICK AVE
City, State, Zip: RAHWAY, NJ. 07065 bloomingfields
Home/Business Phone: [REDACTED] E-MAIL: bloomingfieldsnj@gmail.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

bloomingfieldsnj@gmail.com

DESCRIPTION OF PUBLIC RECORD(S):

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

Any violations on this property.

Any open permits

Any final inspection within 5 yrs.

* current
certificate of
occupancy

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

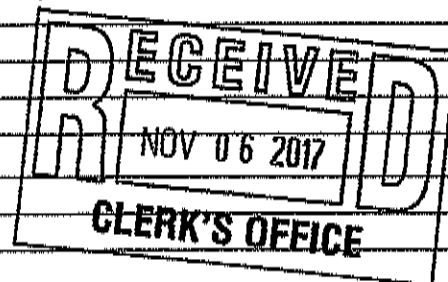
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)



☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Nestor Lopez

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 640-650 N. WOOD AVE, LINDEN

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

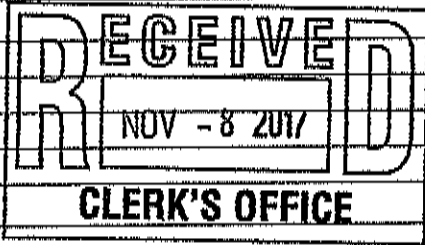
301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

(#2017-699)

Name: Rebecca Panico		Date: Nov. 7, 2017
Organization (If Applicable): Union County Local Source		
Mailing Address: 1291 Stuyvesant Ave.		
City, State, Zip: Union, NJ 07083		
Home/Business Phone: [REDACTED]		E-MAIL rpanico@thelocalsource.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 any and all police reports involving an incident with Daniel Nina, of Elizabeth, between Sept. 2017 and Nov. 3, 2017. The incident may relate to -- but is not limited -- [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) Police reports		
☐ LICENSE INFORMATION (SPECIFY)		



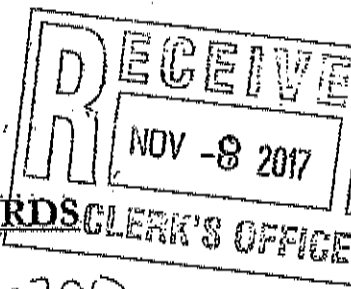
SIGNATURE: *Rebecca Panico*

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)

2017-700

Name: Aimee Pacheco		Date: 11/6/2017
Organization (If Applicable): PEMCO Ltd		
Mailing Address: 820 Bear Tavern Rd		
City, State, Zip: West Trenton, NJ 08628		
Home/Business Phone: [REDACTED]		E-MAIL: aimee.pacheco@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)		
I need a copy of any 1. open permits and 2. open code violations that are attached to this property that could result in a fine, summons and/or prevent the sale of this property to a third party buyer. 3. I need to know if the property is currently registered as a vacant property or if a new registration for Fannie Mae required. If you have a registration on file can you please verify when the last registration was paid, the fee paid, the registrant and the next due date and fee? If we need to register the property can you please provide the proper registration information and instruction along with the cost of any fines that need to be paid and the due dates?		
1150-1190 W St George A18, Linden, NJ 07036 - Block 419 / Lot 25 / Qual: CA018		
Please e-mail me my response to this OPRA request.		
☐	INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐	PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒	SEND RESPONSE BY E-MAIL Please send my response to this OPRA request via email. aimee.pacheco@pemco-limited.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) Please note that I do not need any closed permits or violations. Only copies of open permits and violations.	
☐	LICENSE INFORMATION (SPECIFY)	

SIGNATURE: *Aimee Pacheco*
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 1150-1190 W St George A18

BLOCK/LOT: Block 419 / Lot 25 / Qual: CA018

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)

2017-701

Name: Danny RAPCZAK	Date: 11/8/17
Organization (If Applicable): Re/Max Select	
Mailing Address: 143 Elmer St	
City, State, Zip: Westfield NJ 07090	
Home/Business Phone: [REDACTED]	E-MAIL Danny@rehomepros.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

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

Please provide documents on all open and closed permits
for 1609 Grier Ave. Linden NJ 07036

Please email if possible Thank you

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

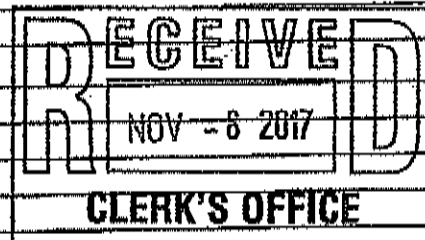
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)



☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1609 Grier Ave. Linden NJ 07036

BLOCK/LOT: 507/13

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)

Name: NICK Scaperola #2017-702
Organization (If Applicable): _____ Date: _____
Mailing Address: 222 E Henry St
City, State, Zip: Linden NJ 07036
Home/Business Phone: [REDACTED] E-MAIL: rsorge42@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)

Any outstanding permits
Condition or status of OIL TANKS

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

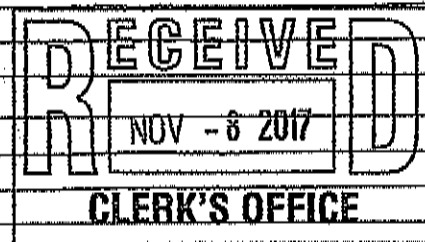
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL rsorge42@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: _____

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 115 Lutzgen St Linden NJ

BLOCK/LOT: _____

From: City Clerk
Sent: Tuesday, November 07, 2017 4:05 PM
To: Chelsea Libreros
Subject: Fw: OPRA Request

From: Peter Monea <pmonea@aeiconsultants.com>
Sent: Tuesday, November 07, 2017 12:07 PM
To: City Clerk
Subject: OPRA Request

Good afternoon,

My firm is completing a zoning analysis report for the property located at 670 East Lincoln Avenue. Can you please provide records of the following:

- outstanding building, zoning, fire code violation
- copies of Certificates of Occupancy (if none are in the file is it a violation?)
- copies of variances, conditional/special use permits
- approved site plans

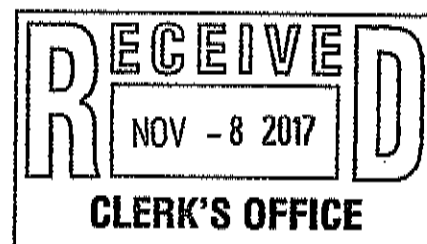
I'd also like to request a zoning verification letter. If there is a fee for this request please let me know and I can send a check.

Thanks,

Pete

Peter D. Monea, LEED Green Associate
Project Manager
AEI Consultants
112 Water Street, 5th Floor
Boston, MA 02109

e. pmonea@aeiconsultants.com
p. [REDACTED]
c. [REDACTED]
f. 857-235-1551
www.aeiconsultants.com



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)

#2017-704

Name: LUKE FORTUNATO	Date: 11/9/2017
Organization (If Applicable): ATD CONSULTANTS, INC.	
Mailing Address: 21 KILROY ROAD,	
City, State, Zip: NEWTON, NJ 07860	
Home/Business Phone: [REDACTED]	E-MAIL luke.fortunato@atdnj.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 permit & certificate of approval for permit no. 13-2316 (550-gal
UST removal at 506 E. Elizabeth Avenue, Linden, NJ).

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

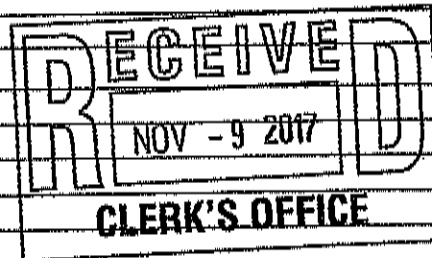
☒ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)



SIGNATURE: _____

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 506-508 EAST ELIZABETH AVENUE, LINDEN, NJ 07036

BLOCK/LOT: 287 / 12

CITY OF LINDEN
APPLICATION FORM

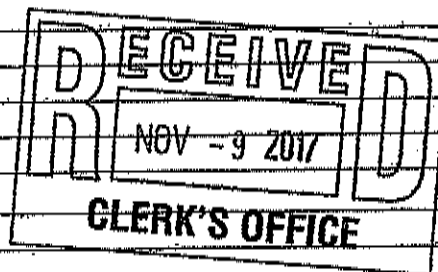
REQUEST FOR PUBLIC RECORDS

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

(PLEASE PRINT)

2017 - 705

Name: Alexandria Brown	Date: 11/9/2017
Organization (If Applicable): Pemco Limited	
Mailing Address: 820 Bear Tavern	
City, State, Zip: West Trenton, NJ, 08628	
Home/Business Phone: [REDACTED]	E-MAIL: Alexandria.brown@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) In search of any open code violations and open permits for property address 1609 Grier Ave, Linden, NJ, 07036, Block:507 Lot:13, 407, 48-b-52-a Please provide a copy of any open violations and open permits	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☐ SEND RESPONSE BY E-MAIL Alexandria.brown@pemco-limited.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: 1609 Grier Ave, Linden, NJ, 070

BLOCK/LOT: Block:507 Lot:13, 407, 48-b-52-a

[Handwritten signature] 11/9/2017

CITY OF LINDEN
APPLICATION FORM

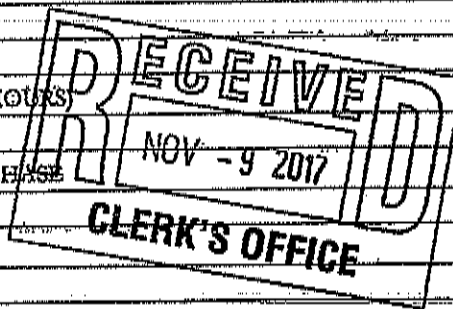
301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

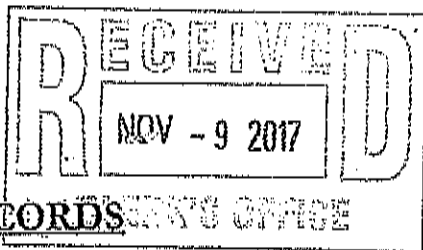
2017-706

Name: KATHY TIEDTKE	Date: 11/09/17
Organization (If Applicable): PEMCO-LIMITED ON BEHALF OF FANNIE MAE	
Mailing Address: 820 BEAR TAVERN ROAD	
City, State, Zip: WEST TRENTON, NJ 08628	
Home/Business Phone: [REDACTED]	E-MAIL: KATHY.TIEDTKE@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)	
1. Copies of open permits	
2. Copies of open code violations attached to the property of reference and could result in a fine/summons and/or prevent the sale of 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)	
PLEASE EMAIL OR FAX OPEN CODE VIOLATIONS OR LIENS.	
IF PAYMENT IS REQUIRED, PLEASE PROVIDE THE INVOICE ALONG WITH FEE BREAKDOWN.	
EMAIL: KATHY.TIEDTKE@PEMCO-LIMITED.COM	
FAX: (303) 284-8028	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE:	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: 601 KNOPF ST, LINDEN, NJ 07036	



BLOCK/LOT: 319 / 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)

2017-707

Name: Aimee K Pacheco	Date: 11/09/2017
Organization (If Applicable): PEMCO Limited	
Mailing Address: 820 Bear Tavern Rd	
City, State, Zip: West Trenton, NJ 08628	
Home/Business Phone: [REDACTED]	E-MAIL: aimee.pacheco@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)	
Please e-mail my response to this OPRA request.	
I need a copy of any 1. open permits and 2. open code violations that are attached to this property that could result in a fine, summons, and/or prevent the sale of this property to a third party.	
717 Union St, Linden, NJ 07036	
Block 134 / Lot 18	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL	
Please e-mail my response to this OPRA request.	
aimee.pacheco@pemco-limited.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: <i>Aimee K Pacheco</i>	

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 717 Union St

BLOCK/LOT: 134 / 18

GOVERNMENT RECORDS REQUEST FORM

OPRA REQUEST

2017-709

Important Notice

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

Requestor Information – Please Print

First Name Anita MI R. Last Name EricksonCompany Decker AssociatesMailing Address Echo Executive Plaza, 899 Mountain Avenue, Suite 3BCity Springfield State NJ Zip 07081 Email notify@deckerclaims.comBusiness Hours Telephone: Area Code [REDACTED] Number [REDACTED] Extension [REDACTED]Preferred Delivery: Pick Up [REDACTED] US Mail X On Site Inspect [REDACTED]

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 Anita R. Erickson Date 11/9/2017

Payment Information

Maximum Authorization Cost \$ [REDACTED]

Select Payment Method

Cash [REDACTED] Check [REDACTED] Money Order [REDACTED]

Fees: Letter size pages \$0.05

(per page)

Legal size pages \$0.07

(per page)

Other materials Actual cost of material (CD, DVD, etc.)

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

Extras: Special service charge dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

This office represents the **Cumberland Insurance Group** in connection with the claim referenced below.

We understand that a report of this occurrence was filed with your department and we are requesting a copy of the **Police Report** for our records. Please email the report to notify@deckerclaims.com or fax a copy to 973-258-1530. Should you wish to mail the report we have enclosed a self-addressed return envelope for your convenience.

We appreciate your prompt response in this matter.

CASE #: 17048940

Our File Number: **DE-1759810 JD**
 Insured: **LBE & J Realty LLC**
 Loss Location: **766 Brunswick Avenue
 Linden, NJ 07036**

Date of Loss: **10/12/2017**
 Cause of Loss: **Vehicle/Property**
 Policy Number: **BOP006428217**
 Claim Number: **20170004757**

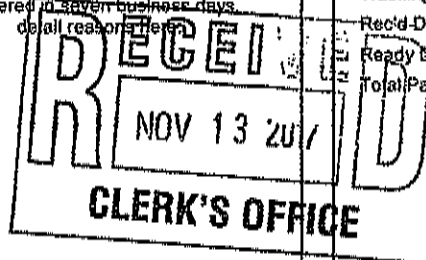
AGENCY USE ONLY

Est. Document Cost [REDACTED]Est. Delivery Cost [REDACTED]Est. Extras Cost [REDACTED]Total Est. Cost [REDACTED]Deposit Amount [REDACTED]Estimated Balance [REDACTED]Deposit Date [REDACTED]

AGENCY USE ONLY

Disposition Notes

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



In Progress - Open [REDACTED]
 Denied - Closed [REDACTED]
 Filled - Closed [REDACTED]
 Partial - Closed [REDACTED]

AGENCY USE ONLY

Tracking Information

Tracking # [REDACTED]
 Rec'd Date [REDACTED]
 Ready Date [REDACTED]
 Total Pages [REDACTED]

Final Cost

Total [REDACTED]
 Deposit [REDACTED]
 Balance Due [REDACTED]
 Balance Paid [REDACTED]

Records Provided [REDACTED]Custodian Signature [REDACTED]Date [REDACTED]



AEI Consultants

30 Montgomery St., Suite 220, Jersey City, NJ 07302

TEL 201-992-1844

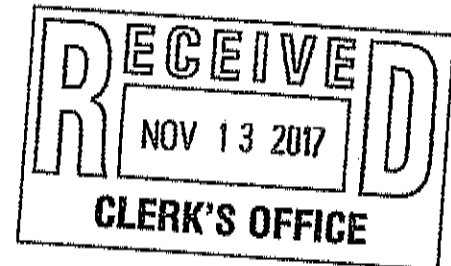
Nov 13, 2017

#2017-711

City of Linden
301 N Wood Ave
Linden, NJ 07036

Subject: Public Records Request
40-46 West Price St Linden, NJ 07036
AEI Project No. 380427

Price street



To Whom It May Concern:

Please accept this request to review files for the above-referenced property. The property is developed with a commercial/retail building with attached parking lot identified as Block 252 Lots 11 and 12, and owned by United Counties C/O Thomson Reuter. AEI Consultants requests all available information regarding this property; specific information from several departments as follows:

TAX ASSESSOR:

- Property cards – historical and current

HEALTH DEPARTMENT:

- Septic tank permits – installation and/or closure
- Well permits – installation and/or closure (potable and/or groundwater monitoring)

BUILDING & PLANNING DEPARTMENTS:

- Certificates of Occupancy – historical and current
- Records of building permits – historical and current
- Building restrictions on the property including Activity and Use Limitations (AULs)
- Environmental liens or environmental violations

FIRE DEPARTMENT:

- USTs & ASTs – installation, closure, and/or release information
- Hazardous material storage or use reporting

Any other miscellaneous environmental information is also appreciated. If possible, I would like any available records faxed or emailed to ghan@aeiconsultants.com. Thank you!

Regards,
Debbie Han
Project Manager

CITY OF LINDEN
APPLICATION FORM

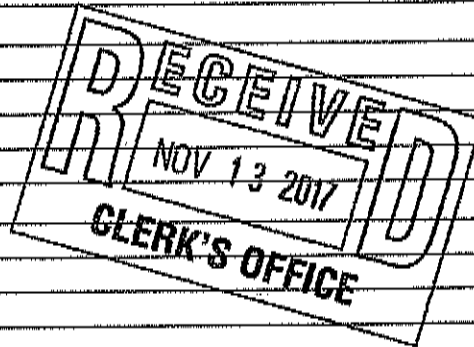
301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

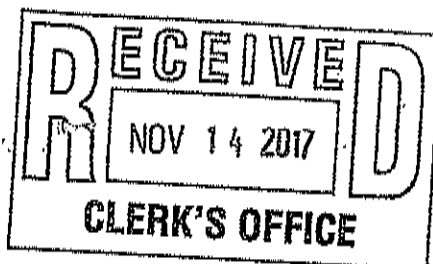
(PLEASE PRINT)

2017-712

Name: Valerie Daberkoff	Date: 11/13/17
Organization (If Applicable): EnviroSure, Inc.	
Mailing Address: 319 South High Street, 1st Floor	
City, State, Zip: West Chester, OH 43082	
Home/Business Phone: [REDACTED]	E-MAIL: Valerie@envirosureinc.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX	
Email	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
EnviroSure is conducting a Phase I ESI at 911 West St. Georges Avenue. In that regard, we are requesting a search of all files pertaining to the property. Especially, underground storage tanks, environmental concerns and ownership records.	
☒ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☐ SEND RESPONSE BY E-MAIL	
☐ COPY OF MINUTES (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: Valerie Daberkoff	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: 911 West St. Georges Avenue	
BLOCK/LOT: Block 400; Lot 30	



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

2017-713

(PLEASE PRINT)

Name: Priscilla J. Reynoso Date: 11/14/17
Organization (If Applicable):
Mailing Address: 445 Liberty Ave
City, State, Zip: Jersey City, NJ 07307
Home/Business Phone: [REDACTED] E-MAIL: Pris2007@hotmail.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)

☐ 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) Property on 204 Buchanan St, Linden NJ
has been identified as being raised/elevated.
kindly, provide any documentation related to this
remodel, specifically the reasons why the property
was raised.

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 204 Buchanan Street 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

(PLEASE PRINT)

2017 - 718

Name: <u>Mona Patterson</u>	Date: <u>11/14/17</u>
Organization (If Applicable): <u>Patterson Appraisal Service LLC</u>	
Mailing Address: <u>60 W. Colfax Ave</u>	
City, State, Zip: <u>Novelle, NJ 07034</u>	
Home/Business Phone: <u>[REDACTED]</u>	E-MAIL: <u>monapatterson2003@yahoo.com</u>
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

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

Please provide any 'approved' + 'open' permits on the below property.

This property has a finished basement as well as converted oil to gas heating with the underground oil storage tank still underground.

Thank you.

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

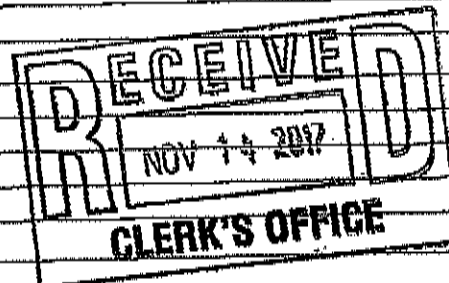
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ 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: Mona Patterson

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 501 Birchwood Rd

BLOCK/LOT: 389 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)

Name: VINCENT C. EARR Date: 11/14/2017
 Organization (If Applicable): NJC APPRAISERS
 Mailing Address: 109 NEWBROOK LANE
 City, State, Zip: SPRINGFIELD N.J. 07081
 Home/Business Phone: [REDACTED] MAIL VCE1@EARTH LINK.NET
 REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

PLEASE E-MAIL TO ME THE PROPERTY RECORD EARR
FOR 410 EDGEWOOD ROAD LINDEN N.J. 07036

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

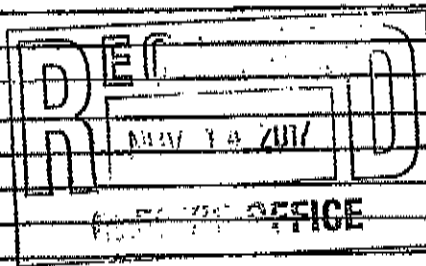
☒ SEND RESPONSE BY E-MAIL VCE1@EARTH LINK.NET

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)



SIGNATURE: Vincent C. Earr

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 410 EDGEWOOD ROAD LINDEN N.J.

BLOCK/LOT: Block 367 Lot 8



OPEN PUBLIC RECORDS ACT REQUEST FORM

Agency Address

Agency Telephone Number & Fax Number

Agency e-mail address (908) 474-8451

Name of Agency Custodian



2017-716

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

Payment Information

First Name	Carly	MI		Last Name	Kaminsky
E-mail Address	Carly@beinksconsulting.com				
Mailing Address	12516 Liberty Ave				
City	Hillside	State	NY	Zip	07005
Telephone				FAX	(908) 353-3107
Preferred Delivery:	Pick Up	US Mail	On-Site Inspect	Fax	Email ☒
If you are requesting records containing personal information, please check one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE <u>HAVE NOT</u> been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.					
Signature	Carly Kaminsky			Date	11/14/17

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: 601 Fairway Rd, Linden, NJ 07036

Block # 369

Lot # 1

AGENCY USE ONLY		AGENCY USE ONLY		AGENCY USE ONLY	
Est. Document Cost		Disposition Notes		Tracking Information	Final Cost
Est. Delivery Cost		Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.		Tracking #	Total
Est. Extras Cost				Rec'd Date	Deposit
Total Est. Cost				Ready Date	Balance Due
Deposit Amount				Total Pages	Balance Paid
Estimated Balance					Records Provided
Deposit Date					
		In Progress	Open		
		Denied	Closed		
		Filed	Closed		
		Partial	Closed		

RECEIVED

NOV 14 2017

CLERK'S OFFICE

Date

**CITY OF LINDEN
APPLICATION FORM**

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

(#2017-717)

Name: Erica Burkert

Date: 11/15/2017

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 Road - We are searching for any inspections conducted after 03/02/2016.
2. Moe's: 1701 West Edgar Road - We are searching for any inspections conducted after 02/02/2016.
3. Popeye's: 1190 East St. George's Avenue - We are searching for any inspections conducted after 07/28/2016.
4. TGI Friday's: 400 South Park Avenue - We are searching for any inspections conducted after 07/28/2016.

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

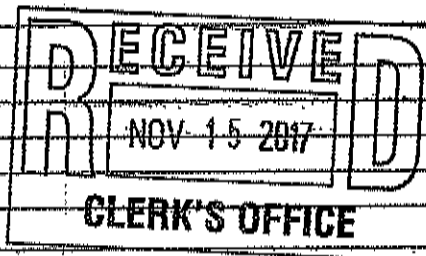
☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ 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)

☐ LICENSE INFORMATION (SPECIFY)



SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:

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

(PLEASE PRINT)

#2017-718

Name: Kara Crampton Date: 11/15/2017
Organization (If Applicable): New Jersey Manufacturers Insurance Group
Mailing Address: PO Box 628
City, State, Zip: West Freehold NJ 08628
Home/Business Phone: [REDACTED] E-MAIL krcrampton@njm.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 CCTV video footage at HQ (as mentioned on attached PR)
- Needed due to my driver denying accident

Time/Date/Location of loss = 10/27/2017, 5:07 pm
2 N WOOD AVE☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE☒ SEND RESPONSE BY E-MAIL - if possible☐ COPY OF MINUTES (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)

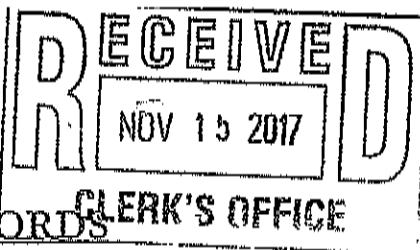
SIGNATURE: Kara Crampton

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 2 N WOOD AVE (Linden train station)

BLOCK/LOT:

CITY OF LINDEN
APPLICATION FORM



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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

Name: Isaac Guillen #2017-719 Date: 11/15/2017
Organization (If Applicable):
Mailing Address: 67 Emory Ave
City, State, Zip: Frambooth NJ 07202 Cell
Home/Business Phone: [REDACTED] E-MAIL: iggghomes@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)

pull out permits to fill out w/ sand oil tank

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

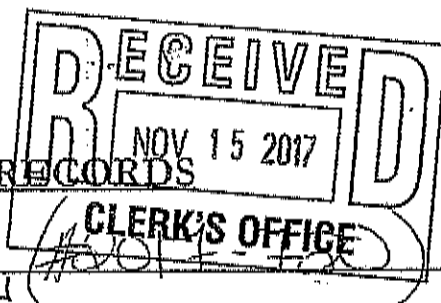
ADDRESS: 815 Dennis Place

BLOCK/LOT: 480 / 13

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

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



(PLEASE PRINT)

Name: Iryna McDonald Date: 11/15/2017

Organization (If Applicable):

Mailing Address: mcdonald.iryna

City, State, Zip:

Home/Business Phone: [REDACTED] E-MAIL: mcdonald.iryna@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)

Copies of any and/or all permits and violations

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 816 Union Street

BLOCK/LOT:

No Relevant Records 12/1/17 DS

#2017-723

Open Public Records Act request from The Star-Ledger / NJ.com

Name: Marisa Iati

Date: November 14, 2017

Organization: NJ Advance Media

Address: 10 Elizabethtown Plaza (Third Floor, Press Room), Elizabeth, NJ 07207

Phone Number: [REDACTED]

Email Address: miati@njadvancemedia.com

I am invoking my rights under the Open Public Records Act and the common law right of access to request digital copies of the following in their original formats:

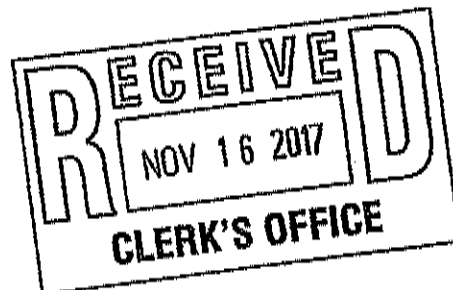
- The police report (including the ticket number) for the traffic incident involving Daniel Nina, 40, on Oct. 15, 2017.

I certify I have not been convicted of a crime in New Jersey or any other state.

A digital copy can be submitted to me at miati@njadvancemedia.com.

Additionally, if there is a cost associated with this request, please inform me before fulfilling this request.

Thank you,
Marisa Iati



CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

2017-724

Name: Manny Ruffin	Date: 11/16/2017
Organization (If Applicable): American Tax Reporting	
Mailing Address: 2727 LBJ Freeway Suite 420,	
City, State, Zip: Dallas TX 75234	
Home/Business Phone: [REDACTED]	Email - cls@slkgroup.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

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

Please advise if there are any unrecorded special assessments presently any OPEN/EXPIRED building permits and / or OPEN Code violations that needs to be addressed.

File # : 621800

Block 184 Lot 10

Add : 640 Maple Avenue Linden NJ 07036

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

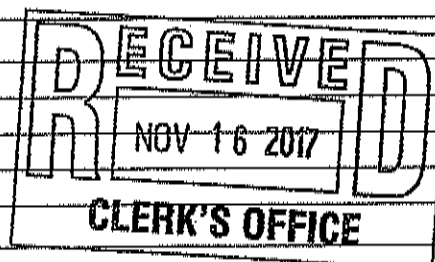
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ 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: Add : 640 Maple Avenue Linden NJ 07036

BLOCK/LOT: Block 184 Lot 10

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

#2017-725

Name: William Gray Date: 11/16/17
Organization (If Applicable): AECOM
Mailing Address: 1255 Broad 1415 Joseph St
City, State, Zip: Point Pleasant NJ 08742
Home/Business Phone: [REDACTED] MAIL: bill.gray@aecom.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

Looking For post 2012 monitoring well analytical data,
well location maps, contour maps, & 2017 Annual Report to
NJDEP. (Environmental Report)

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

Would like to review to determine if photocopies are needed

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

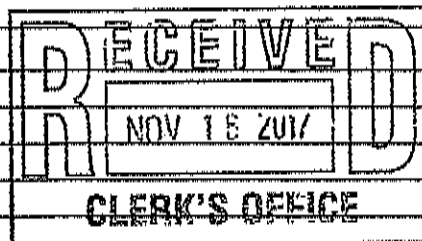
bill.gray@aecom.com

☐ 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: William Gray

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 1200 SYLVAN STREET

BLOCK/LOT: Block 580 LOT 21

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

REQUEST FOR PUBLIC RECORDS

2017-726

(PLEASE PRINT)

Date: 11-17-17

Name: Sima Farid

Organization (If Applicable):

Mailing Address: 531 Jefferson Ave

City, State, Zip: Elizabeth, NJ 07201

Home/Business Phone: [REDACTED] E-MAIL

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

Faridmsw@gmail.com

DESCRIPTION OF PUBLIC RECORD(S):

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

Police Report

Accident Report

Recording of calls related to this incident

Body Camera Footage / Audio

Dashcam Footage / Audio

Case #

17049424

Occurred early Am

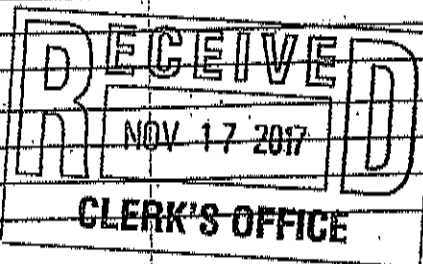
12/15/17

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE☒ SEND RESPONSE BY E-MAIL Faridmsw@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) IF Necessary - Redact any identifying Data
rather than Deny OPRA Request☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS:

BLOCK/LOT:



CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

2017-727

Name: ANNA WICHUR	Date:
Organization (If Applicable):	
Mailing Address: 510 LAURITA ST	
City, State, Zip: LINDEN, NJ 07036	
Home/Business Phone: E-MAIL AWICHUR 323@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 A COPY OF PROPERTY RECORD CARD WITH
A DIGRAM OF THE HOUSE AT BLOCK 348, LOT 9.1
FOR PROPER INSURANCE COVERAGE

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

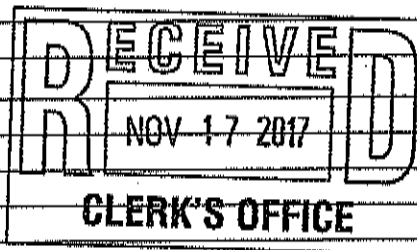
☒ SEND RESPONSE BY E-MAIL

☐ 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: Anna Wichur

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 510 LAURITA ST, LINDEN NJ 07036

BLOCK/LOT: 348 / 9.1

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) Michele Dehl #2017-728

Name: Pryga + Petronko, Eggs. Date: 11/17/17

Organization (If Applicable):

Mailing Address: 163 W. Milton Ave.

City, State, Zip: Rahway, NJ 07065 Fax# 732-381-0052

Home/Business Phone: E-MAIL Prygapetronko@comcast.net

REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

Please forward a permit list + violation history if any, and include whether or not there are any open or outstanding permits for the property located at

116 Melrose Terrace, Linden, NJ
Block 266 - Lot 6

Thank you.

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

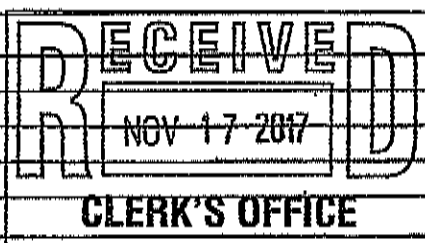
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL or Fax - 732-381-0052

☐ COPY OF MINUTES (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: Michele Dehl

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 116 Melrose Terrace, Linden, NJ 07036

BLOCK/LOT: Block 266 - Lot 6

No Relevant Records 12/1/17

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

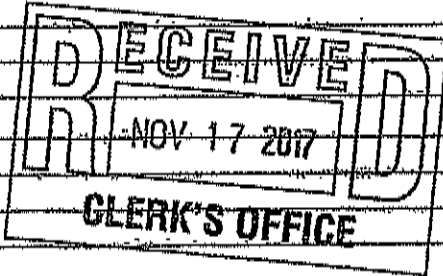
2017-729

Name: Helen M. Quan, Esq.	Date: 11/17/17
Organization (If Applicable): Law Office of Helen M. Quan, LLC	
Mailing Address: 104 Broadway, Ste. 3B,	
City, State, Zip: Denville, New Jersey 07834	
Home/Business Phone: [REDACTED]	E-MAIL: helenm@hquanlaw.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX 973-826-2666	

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Please provide record of all applications and permits for any work done on the property mentioned below
Also, information regarding any previous septic and any applications for regarding the presence or removal of
underground storage tanks. Please, also advise if there are any open permits pending 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: 513 Maple Avenue, Linden, NJ 07036-2807
BLOCK/LOT: 194/6



CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

#2017-730

Name: Shakir Warren-Bey Date: 11/20/17
Organization (If Applicable):
Mailing Address: 1942 Morris Ave #312
City, State, Zip: LINDEN NJ 07036
Home/Business Phone: [REDACTED] MAIL: Vsbgrandrisingenterprises.c
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
on tank removal / cert-s
violations
cert of occupation

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

RECEIVED
NOV 20 2017
CLERK'S OFFICE

SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 40 Elmwood Terr Linden 07036
BLOCK/LOT: 00279 / 00008

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)

#2017-731

Name:	Guillermo Calle	Date:	11/16/17
Organization (If Applicable):			
Mailing Address:	284 William Street		
City, State, Zip:	Hillside, NJ 07205		
Home/Business Phone:	[REDACTED]	E-MAIL:	gocalle12@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)

property tax rate on June 30 1997-2017

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

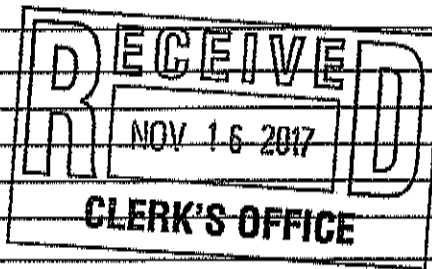
☐ SEND RESPONSE BY E-MAIL

☐ 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:

Guillermo Calle

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)

#2017-732

Name: Guillermo Calle	Date: 11/10/17
Organization (If Applicable):	
Mailing Address: 284 William Street	
City, State, Zip: Hillside, NJ 07205	
Home/Business Phone: [REDACTED]	E-MAIL: gucalle12@gmail.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

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

copy of all OPRA requests January 1, 2017 -
September 1, 2017

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

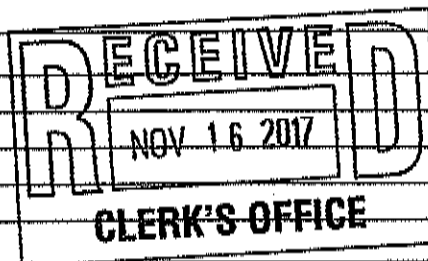
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☐ 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: *Guillermo Calle*

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)

#2017-733

Name: ZAWOYSKI - JOHN	Date: 11/19/2017
Organization (If Applicable):	
Mailing Address: 518-7 Old Post Rd #105	
City, State, Zip: Edison, NJ 08817	
Home/Business Phone: [REDACTED]	E-MAIL: JZACK26@yahoo.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

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

Complete copy of audio transmission/conversation
between Police Officer Nicole Andrews and Dispatch
on Nov. 1, 2017 @ approximately 10:10 AM to 10:23 AM,
location W. Blande St / Lumber St AND

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

to: JZACK26@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)

PLEASE DATE STAMP this open request when received
in your office and email to me ASAP

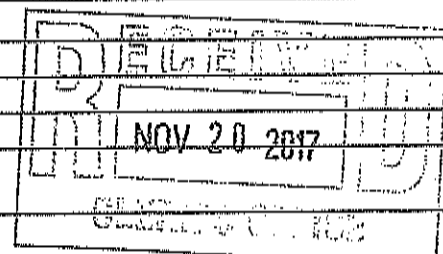
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: John Zawoycki

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:



11/19/17

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)

#2017-734

Name: ZAWOYSKI TOWN	Date: 11/14/2017
Organization (If Applicable):	
Mailing Address: 518-7 old post rd #105	
City, State, Zip: Edison NJ 07307	
Home/Business Phone: [REDACTED]	MAIL JZACK26@yahoo.com
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX	

DESCRIPTION OF PUBLIC RECORD(S):

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

(complete conversation)
copy of audio contact between

Police Officer Nicole Andrews and Dispatch

on Nov. 16, 2017 @ approximately 4:15 pm
location was 410 W. Gibbons St,

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

to: JZACK26@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)

PLEASE DATE STAMP this open request when received
in your office and e-mail to me asap

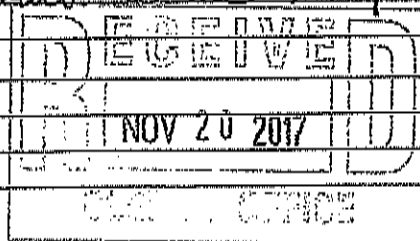
☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: John Zawoyski

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS:

BLOCK/LOT:



11/14/17

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)

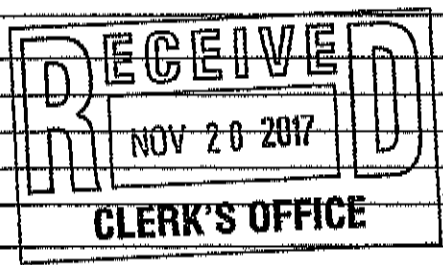
#2017-735

Name: ISHMAEL WALCOLM	Date: 11-20-2017
Organization (If Applicable):	
Mailing Address:	
City, State, Zip:	
Home/Business Phone: [REDACTED]	E-MAIL: ISHMAELWAL2958@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)
VIDEO OR RECORDING THAT WAS MADE BY THE LINDEN
POLICE OFFICER IN MY HOME ON 11-13-2017 AT 910 SEYMOUR AVE
LINDEN NJ 07036. THERE IS EVIDENCE ON THAT RECORDING
THAT WILL DISPUTE ALLEGATION THAT WAS MADE AGAINST
ME.

at approx 6 pm - 9 pm
11/13/17 910 SEYMOUR AVENUE.

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

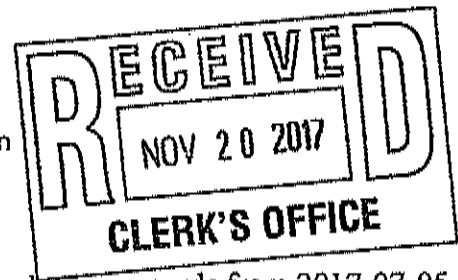


SIGNATURE: [Signature]
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: _____
BLOCK/LOT: _____

From: Jennifer Honan
Sent: Saturday, November 18, 2017 3:09 PM
To: Chelsea Libreros
Subject: FW: SmartProcure OPRA Request City of Linden For PO/Vendor Information

New OPRA
Jenn

From: cblanding@smartprocure.com [mailto:cblanding@smartprocure.com]
Sent: Saturday, November 18, 2017 8:47 AM
To: Jennifer Honan <jhonan@linden-nj.org>
Subject: SmartProcure OPRA Request City of Linden For PO/Vendor Information



Dear Jennifer or Custodian of Public Records,

SmartProcure is submitting an OPRA request to the City of Linden for purchasing records from 2017-07-05 (yyyy-mm-dd) to current. The request is limited to readily available records without physically copying, scanning or printing paper documents. Any editable electronic document is acceptable.

The specific information requested from your record keeping system is:

1. Purchase order number. If purchase orders are not used a comparable substitute is acceptable, i.e., invoice, encumbrance, or check number
2. Purchase date
3. Line item details (Detailed description of the purchase)
4. Line item quantity
5. Line item price
6. Vendor ID number, name, address, contact person and their email address

If you would like to let me know what type of financial software you use, I may have report samples that help to determine how, or if, you are able to respond.

Please email the information or use the following web link. There is no file size limitation:
<http://upload.smartprocure.com/?st=NJ&org=CityOfLinden>

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

If you have any questions, please feel free to respond to this email or I can be reached at 954-637-0742.

Regards,

Curtis Blanding
Data Acquisition Specialist
SmartProcure
Direct: [REDACTED] Email: cblanding@smartprocure.com

CITY OF LINDEN
APPLICATION FORM

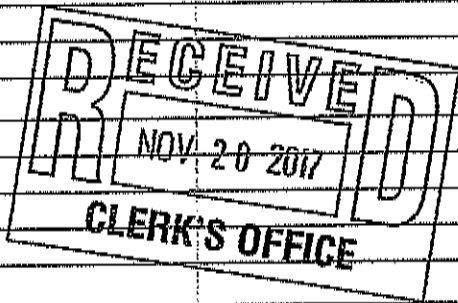
301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

#2017-738

Name: Jennifer Lai	Date: November 20, 2017
Organization (If Applicable): Lai & Ro LLC	
Mailing Address: 1164 Springfield Avenue	
City, State, Zip: Mountainside, NJ 07092	
Home/Business Phone: [REDACTED]	E-MAIL JENNIFER@LAIROLAW.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 all permit records on file for the following property (including both open and closed permits, violations, inspector's notes) If there is any permit documentation relating to a tank removal at the Property, please provide all documentation relating thereto. Property address: 136 Raritan Road, Linden, NJ 07036 (BLOCK 256 / LOT 8)	
Thank you.	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☒ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL Please email results to JENNIFER@LAIROLAW.COM or fax to 908-264-6765	
☐ COPY OF MINUTES (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: 136 Raritan Road, Linden, NJ 07036	
BLOCK/LOT: Block 256 / Lot 8	



CITY OF LINDEN APPLICATION FORM

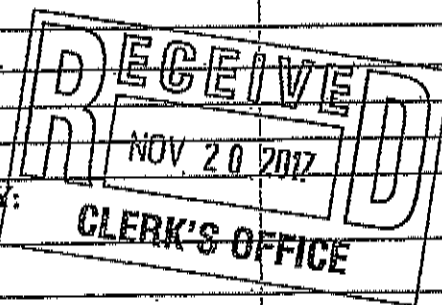
REQUEST FOR PUBLIC RECORDS

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

(PLEASE PRINT)

#2017-739

Name: Alexandria Brown	Date: 11/20/2017
Organization (If Applicable): Pemco Limited	
Mailing Address: 820 Bear Tavern	
City, State, Zip: West Trenton, NJ, 08628	
Home/Business Phone: [REDACTED]	E-MAIL: Alexandria.brown@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)	
In search of any open code violations and open permits for property address	
315 Princeton Rd, Linden, NJ, 07036. Please provide a copy of the open violations and open Permit. Email the response	
☐ 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)	
In search of any open code violations and open permits for property address 315 Princeton Rd, Linden, NJ, 07036. Please provide a copy of the open violations and open Permit. Email the response	
☐ LICENSE INFORMATION (SPECIFY)	
SIGNATURE:	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: 315 Princeton Rd, Linden, NJ, 07036	
BLOCK/LOT: 334/23	



No Results Found 11/29/2017 DS

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) #2017-740

Name: CHRISTOPHER RUEDA Date: 11-21-17

Organization (If Applicable):

Mailing Address: 325 E WESTFIELD AVE

City, State, Zip: ROSELLE PARK NJ 07204

Home/Business Phone: E-MAIL: crueda@atlanticpros.com

REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

IS THERE AN UNDERGROUND OIL TANK PRESENT?

ANY PERMITS FOR OIL TANK REMOVAL

ANY OPEN PERMITS

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

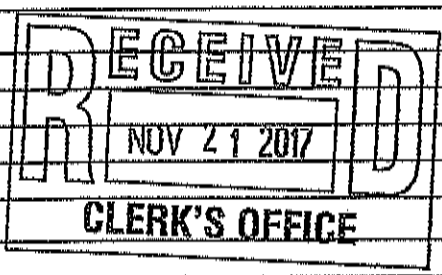
☒ SEND RESPONSE BY E-MAIL - crueda@atlanticpros.com
cc0603@hotmail.com

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)



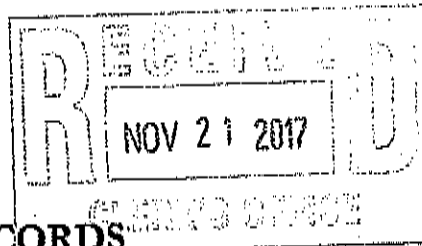
SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 12-16 E 10TH ST LINDEN NJ 07036

BLOCK/LOT: Block: 531 LOT: 02

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)

2017-741

Name: Michael T. Morris	Date: 11/21/17
Organization (If Applicable): Langan Engineering	
Mailing Address: 300 Lincoln Drive	
City, State, Zip: Parsippany, NJ 07054	
Home/Business Phone: [REDACTED]	E-MAIL mmorris@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)

I am performing a Phase I Environmental Site Assessment. I am requesting Building, Tax, Health, Fire and Zoning records associated with the history of the site as well as environmental items including, but not limited to: underground/above ground storage tanks; hazardous materials/wastes/substances; spills/releases/discharges etc.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE:

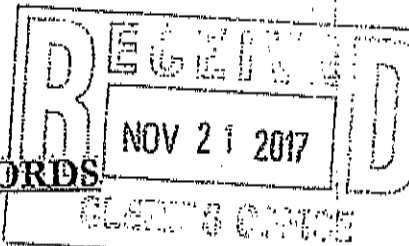
INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 611 Commerce Road

BLOCK/LOT: Block

CITY OF LINDEN
APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

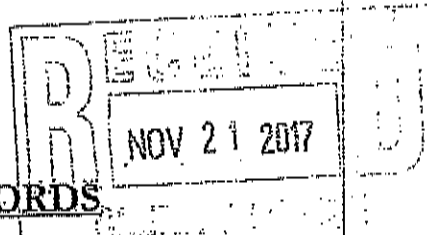


301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

(PLEASE PRINT) #2017-742

Name: Aimee Pacheco	Date: 11/20/2017
Organization (If Applicable): PEMCO Limited	
Mailing Address: 820 Bear Tavern Rd	
City, State, Zip: West Trenton, NJ 08628	
Home/Business Phone: [REDACTED]	E-MAIL: aimee.pacheco@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)	
Please e-mail my response to this OPRA request.	
I need a copy of any 1. open permits and 2. open code violations that are attached to this property that could result in a fine / summons and / or prevent the sale of this property to a third party.	
1036 W Blancke St, Linden, NJ 07036 - Block 421 / Lot 42	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL	
Please email me my response to aimee.pacheco@pemco-limited.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: <i>Aimee Pacheco</i>	
INFORMATION ON A SPECIFIC PROPERTY:	
ADDRESS: 1036 W Blancke St	
BLOCK/LOT: Block 421 / Lot 42	

No Records Found 11/29/2017 DS

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) #2017-748

Name: KATHY TIEDTKE

Date:

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

Mailing Address: PEMCO-LIMITED c/o BUSINESS FILINGS INC. 820 BEAR TAVERN RD.

City, State, Zip: WEST TRENTON, NJ 08628

Home/Business Phone: [REDACTED] E-MAIL: KATHY.TIEDTKE@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)

My name is Kathy and I work for Pemco-Limited on behalf of Fannie Mae.

I am tasked to ensure our properties are in compliance with local municipalities regarding registration and code violations.

The information I am looking for is as follows:

1) Copies of any open permits.

2) Copies of open code violations attached to the property that could result in a fine/summons, and/or prevent the sale of the property.

If there are open invoices, please send copies along with the fee breakdown.

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

KATHY.TIEDTKE@PEMCO-LIMITED.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: 401 KNOFF STREET, LINDEN, NJ 07036

BLOCK/LOT: 285 / 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) #2017-744

Name: Stephen Batisia Date: 11/21/17

Organization (If Applicable): Jeffery Realty Inc

Mailing Address: 116 Route 22

City, State, Zip: North Plainfield, NJ 07060

Home/Business Phone: [REDACTED] MAIL: sbattista@jefferyrealty.com

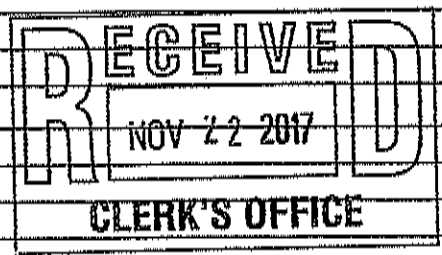
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

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

information on approvals for the development

- ☐ 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: 309 W. Elizabeth Ave (Linden Crossings)
BLOCK/LOT: 288 / 2

CITY OF LINDEN
APPLICATION FORM

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

REQUEST FOR PUBLIC RECORDS

PLEASE PRINT

#2017-745

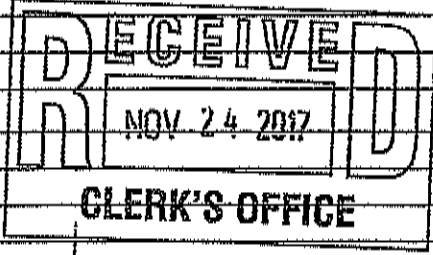
Name: Joseph Quiles Date: 11/24/15
Organization (If Applicable):
Mailing Address: 4 City Hall Plaza
City, State, Zip: Rahway NJ 07065
Home/Business Phone: [REDACTED] E-MAIL: MENAJOE1031@gmail
REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):
(Please be specific and attach additional pages of information if necessary)
Need records of removal of oil tank
@ BL-00007 LOT# 00003 property
2014 Ingalls Ave
Linden NJ

☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☒ SEND RESPONSE BY E-MAIL
MENAJOE1031@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: Joseph Quiles
INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 2014 Ingalls Ave
BLOCK/LOT: Linden NJ BK - 00007
Lot - 00003

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

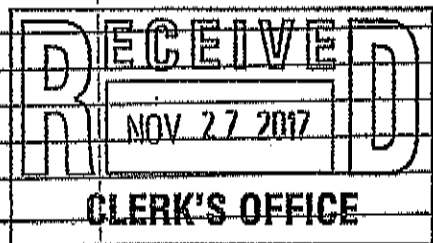
PLEASE PRINT) # 2017-746

Name: Philip Joel	Date: 11/27/2017
Organization (If Applicable): SLK Global America	
Mailing Address: 2727 LBJ Fwy Suite 800	
City, State, Zip: Dallas, TX 75234	
Home/Business Phone: [REDACTED]	E-MAIL Paul.ra@slkgroup.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)
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 #: 622585
Name: CRAIG SMITH
Add: 597 W PRICE ST Linden, NJ 07036 /
Parcel: Block 287-1st-18

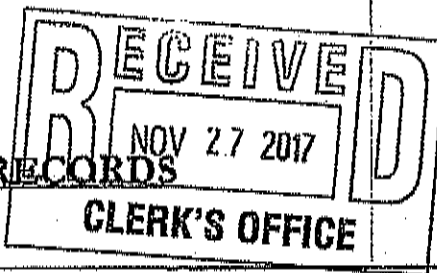
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE
☐ SEND RESPONSE BY E-MAIL
☐ COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)
☐ COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR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



SIGNATURE: *Philip Joel*
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) #2017-747

Name: Yadira Galan Date: 11/27/17
Organization (If Applicable): Brinks Tank Services
Mailing Address: 256 Liberty Ave
City, State, Zip: Hillside NJ 07035
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)

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL

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

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

☒ OTHER (SPECIFY) please provide a list of permit applications
for the decommissioning of underground storage
tanks at: 71+ Union St
Block 134 lot 18

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: Yadira Galan

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) #2017-748

Name: Keith Mourino Date: 11/28/17

Organization (If Applicable): Jersey Home Inspections, LLC

Mailing Address: 28 Swarthmore Drive

City, State, Zip: Carteret, NJ 07008

Home/Business Phone: [REDACTED] E-MAIL: Keith.Mourino@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 permit related to OIL TANK REMOVAL OR ABANDONMENT.

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

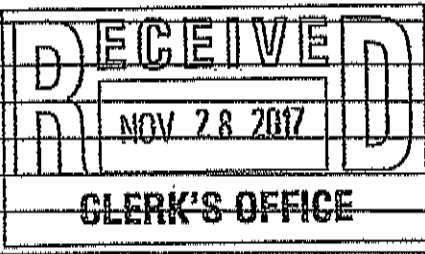
☒ SEND RESPONSE BY E-MAIL Keith.Mourino@gmail.com

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)



SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 513 MAPLE 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)

(#2017-749)

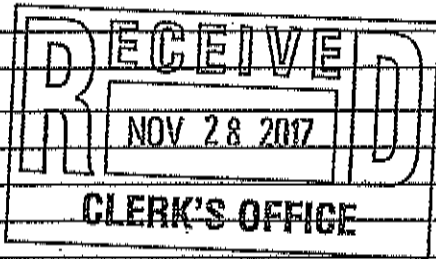
Name: Keith Mourino	Date: 11/28/17
Organization (If Applicable): Jersey Home Inspections, LLC	
Mailing Address: 28 Swarthmore Dr.	
City, State, Zip: Carteret NJ 07008	
Home/Business Phone: [REDACTED]	E-MAIL: KeithMourino@gmail.com
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX	

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

Any permits related to ~~ABANDON~~ OIL TANK REMOVAL OR
ABANDONMENT.
~~WAS House built with gas supply or was it converted~~
~~FROM OIL to GAS?~~

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

☐ OTHER (SPECIFY)
☐ LICENSE INFORMATION (SPECIFY)



SIGNATURE: _____

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 43 W. 19th STREET LINDEN, NJ 07036

BLOCK/LOT: _____

CITY OF LINDEN
APPLICATION FORM

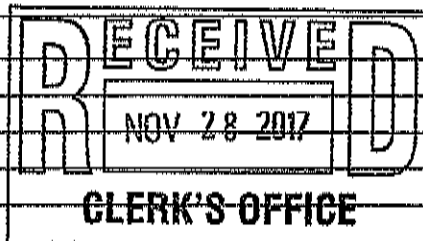
301 N. Wood Avenue
City Hall, Room
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

(#2017-750)

Name: Kelly Vlasic	Date: 11-28-17
Organization (If Applicable):	
Mailing Address: 30 W. Curtis Street	
City, State, Zip: Linden, NJ 07036	
Home/Business Phone: [REDACTED] E-MAIL: Kellyvlasic@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 Linden Case # 17014644	
☐ INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
☒ SEND RESPONSE BY E-MAIL send by email to me for my records	
☐ COPY OF MINUTES (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:

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

(#2017-751)

Date: 11/29/2017

Name: Donna Brillante

Organization (If Applicable): Paradise Appraisals Co.

Mailing Address: 33 Clinton Road, Suite 103

City, State, Zip: West Caldwell, NJ 07006

Home/Business Phone: [REDACTED] E-MAIL: r.paradisearappraisals@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 "ON-SITE" (DURING NORMAL BUSINESS HOURS)

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

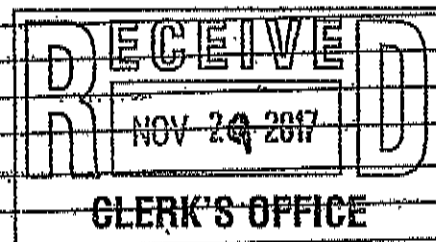
☐ SEND RESPONSE BY E-MAIL

☐ 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) Property Record Card

☐ LICENSE INFORMATION (SPECIFY)

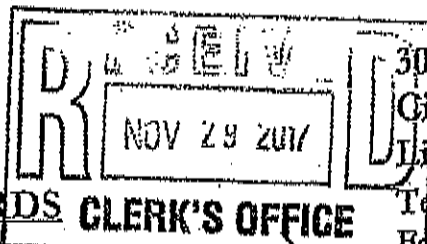


SIGNATURE:

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 400 Miner Terrace, Linden

BLOCK/LOT: 282/16

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 CLERK'S OFFICE

(PLEASE PRINT)

(#2017-752)

Name: Marvis Rothman Date: 11-29-17
 Organization (If Applicable): Keller Williams Towne Square Realty
 Mailing Address: 222 Mt Airy Rd
 City, State, Zip: Basking Ridge NJ 07920
 Home/Business Phone _____ E-MAIL marvis@micheleklug.com
 REQUEST MADE VIA: ☐ OFFICE VISIT ☐ CORRESPONDENCE ☒ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

Please forward all open & closed permits for building and
construction

☐ 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)

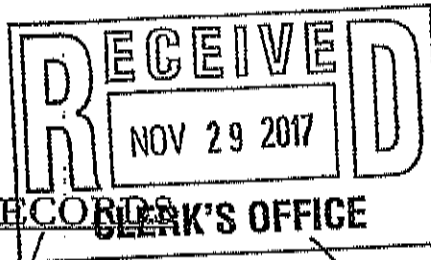
☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)
SIGNATURE: Ma [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 27 Robbinwood TerrBLOCK/LOT: 231 / 25.

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: Romina Slonkowski Date: 11/28/17
Organization (If Applicable): Reflex
Mailing Address: 102 Buchanan St
City, State, Zip: Linden, NJ 07036
Home/Business Phone: [REDACTED] E-MAIL: Romina.homes@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 or record of oil tank and/or removal.
" " " of furnace and water heater
" " " of construction / elevation of property

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

☒ SEND RESPONSE BY E-MAIL Romina.homes@gmail.com

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

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

☐ OTHER (SPECIFY)

☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:
ADDRESS: 204 Buchanan 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)

(#2017-754)

Name: Rosse Mary Mendez	Date: 11-29-17
Organization (If Applicable): Century 21 Alliance	
Mailing Address: 867 N Still St	
City, State, Zip: Linden NJ 07036	
Home/Business Phone: [REDACTED]	E-MAIL: Rosse Mary Mendez
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 know if there is any document about a oil tank in the Back yard / if it was decommissioned

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

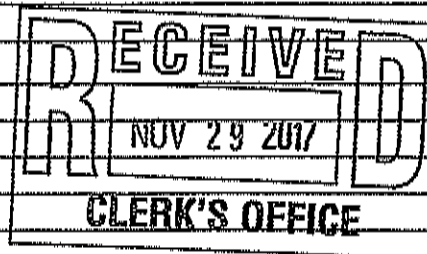
☒ SEND RESPONSE BY E-MAIL

Rosse Mary Mendez @ msn.com

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

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

☐ OTHER (SPECIFY)



☐ LICENSE INFORMATION (SPECIFY)

SIGNATURE: [Signature]

INFORMATION ON A SPECIFIC PROPERTY:

ADDRESS: 513 Maple Ave Linden NJ 07036

BLOCK/LOT: _____

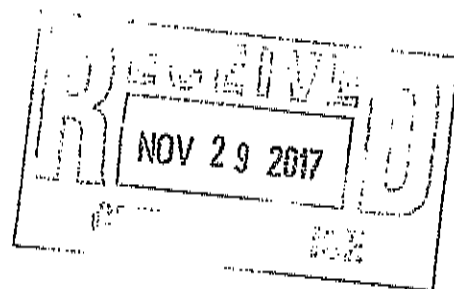


ATLANTIC ENVIRONMENTAL SOLUTIONS, INC

November 27, 2017

City of Linden
Building Department
301 North Wood Avenue
Linden, NJ 07036

2017- 755



Re: *Open Public Records Act (OPRA) Request*
1301 West Elizabeth Avenue
Block: 423, Lot: 12, Addl. Lots: 211, 3
Linden, Union County, New Jersey

Dear Sir or Madam:

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

- ~~Environmental 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

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

Sincerely,

Marzena Sobilo
Environmental Scientist

**CITY OF LINDEN
APPLICATION FORM**

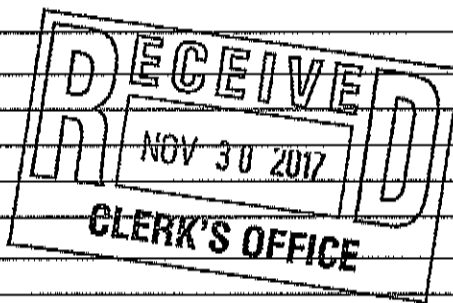
301 N. Wood Avenue
City Hall, Room #105
Linden, New Jersey 07036
Telephone: (908) 474-8445
Fax: (908) 474-8451

REQUEST FOR PUBLIC RECORDS

(PLEASE PRINT)

2017-756

Name: Gina Gros	Date: 11/2/17
Organization (If Applicable): Gallas Surveying Group	
Mailing Address: 2865 US Route 1	
City, State, Zip: North Brunswick, NJ 08902	
Home/Business Phone: [REDACTED]	
REQUEST MADE VIA: ☐ OFFICE VISIT ☒ CORRESPONDENCE ☐ FAX	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
I would like to request the most current surveys and site plans you have on file for the following properties in Linden, NJ:	
- Lots 2, 3 & 4, Block 280 - 1807, 1771 & 1761 West Edgar Road	
- Lots 5, 6 & 7, Block 280 - 1050, 1080 & 1075 Edward Street	
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: [Signature]	



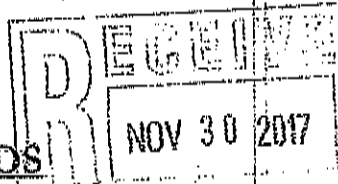
INFORMATION ON A SPECIFIC PROPERTY:

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

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

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)

2017-758

Name: MIKE ANDERSON	Date: 11/29/2017
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 - 330-319-8600	
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)	
Please provide information on code violation and permit on the following address listed below : If there is any open	
☒ 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: 617 Dewitt St, Linden, NJ 07036

BLOCK/LOT: 344 / 6

See ~~the~~ following OPRA 12/7 JS

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)

2017-759

Name: Robert H. Levine Date: 12-1-17
Organization (If Applicable): Staff Investigations
Mailing Address: P.O. Box 170
City, State, Zip: Somerville N.J. 08876
Home/Business Phone: [REDACTED] MAIL: blevine@staffinvestigations.co
REQUEST MADE VIA: ☒ OFFICE VISIT ☐ CORRESPONDENCE ☐ FAX

DESCRIPTION OF PUBLIC RECORD(S):

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

- 1) Any VIDEO Cam Footage at the intersection of US 1 & S. Wood Capturing M.V. accident occurring on 10-5-17 between hours of 3:00pm & 4:02pm Case # 1704786
- * There is a surveillance cam at the intersection.
- 2) Any Pictures or Video from responding officers

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

☐ PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE

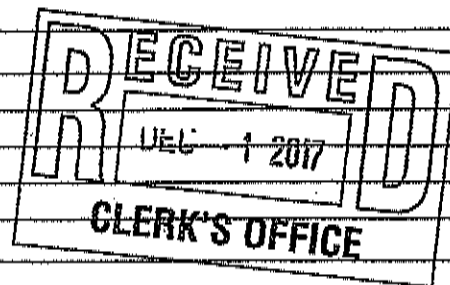
☒ SEND RESPONSE BY E-MAIL

☐ 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: