

LANDLORD INFORMATION STATEMENT

(Public Law 1974, Chapter 50)

DATE:

FOR PREMISES LOCATED AT:

4/29/2022
19-21 E 3rd Street
MOORESTOWN, NEW JERSEY 08057

1. Name and Address of Owner(s) of Record:

Moorestown Ecumenical Neighborhood Development, Inc.
99 E. 2nd St. P.O. Box 828 Moorestown, NJ 08057

2. Record owner(s) of rental business (if any):

3. If Record Owner(s) is a corporation, name corporate officers:

Eileen Wirth, President; Stephanie Blackwell, Secretary

☐ Record Owner is not a corporation.

4. If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the county in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefor and to accept service of process on behalf of the Record Owner:

☐ The address of record owner in the county in which dwelling is located:

99 E. 2nd St. P.O. Box 828
Moorestown, NJ 08057

5. Name and address of managing agent of the premises, if any:

☒ There is no managing agent.

6. Superintendent, janitor, custodian or other individual employed to provide regular maintenance service, if any:

Elliot Wolf, Director of Maintenance
99 E. 2nd St. P.O. Box 828 Moorestown, NJ 08057

☐ There is no superintendent, janitor, custodian or other individual employed to provide regular maintenance service.

7. Name, address, and telephone number of an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system, and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith:

Betsy Owens, Director of Property Management
99 E. 2nd St. P.O. Box 828
Moorestown, NJ 08057 856-722-7070

8. Name and address of every holder of a recorded mortgage on the premises:

Cornerstone Bank
6000 Midland Dr.
Suite 120 S.
MT Laurel, NJ 08054

Registrant Signature

Date

FOR OFFICIAL USE ONLY:

Date Received:

Time Received:

Received By:

4-29-2022

1:45 p.m.

[Signature]

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THIS FORM WILL NOT BE ACCEPTED IF IT IS ALTERED IN ANY WAY.

LANDLORD INFORMATION STATEMENT

(Public Law 1974, Chapter 50)

DATE:

FOR PREMISES LOCATED AT:

4/29/2022
27-29 E 3rd St.
MOORESTOWN, NEW JERSEY 08057

1. Name and Address of Owner(s) of Record:

Moorestown Ecumenical Neighborhood Development, Inc.
99 E. 2nd St. P.O. Box 828 Moorestown, NJ 08057

2. Record owner(s) of rental business (if any):

3. If Record Owner(s) is a corporation, name corporate officers:

Eileen Wirth, President; Stephanie Blackwell, Secretary

☐ Record Owner is not a corporation.

4. If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the county in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefor and to accept service of process on behalf of the Record Owner:

☐ The address of record owner in the county in which dwelling is located:

99 E. 2nd St. P.O. Box 828
Moorestown, NJ 08057

5. Name and address of managing agent of the premises, if any:

☒ There is no managing agent.

6. Superintendent, janitor, custodian or other individual employed to provide regular maintenance service, if any:

Elliot Wolf, Director of Maintenance
99 E. 2nd St. P.O. Box 828 Moorestown, NJ 08057

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Betsy Owens, Director of Property Management
99 E. 2nd St. P.O. Box 828
Moorestown, NJ 08057 856-722-7070

8. Name and address of every holder of a recorded mortgage on the premises:

Cornerstone Bank
6000 Midlantic Dr.
Suite 120 S
Mt Laurel, NJ 08054

Registrant Signature

Date

FOR OFFICIAL USE ONLY:

Date Received:

Time Received:

Received By:

4-29-2022

4:45 p.m.

John

This document is being provided online in Word format for ease in use to the user. It cannot be altered in any way.

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(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:57 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Landlord
Registration
262 Linden

Rental Property Location 262 Linden Street

Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. Erynn Capriotti

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name *Field not completed.*

Phunt
Rec'd 6/6/2023

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable *Field not completed.*

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Managing Agent

Select N/A below if not applicable

N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable

N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

(Section Break)

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or

any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Vincent & Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

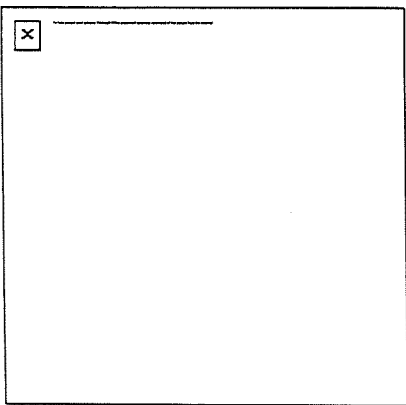
Electronic Signature Vincent Capriotti

Are you a "Covered Person" under "Daniels Law?" No

(Section Break)

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Prime Realty Partners
Vincent Capriotti
332 Haddon Avenue, Suite 200
Westmont, NJ 08108
Office: 856-210-3000
Cell: 609-923-1065
Email: Vince@TheCapriottiGroup.com

Caution: This email originated outside of our organization. Please take care when clicking links or opening attachments. When in doubt, please contact the IT help desk.

Patricia L. Hunt

From: Patricia L. Hunt
Sent: Tuesday, May 30, 2023 11:34 AM
To: vincent.a.capriotti@gmail.com
Cc: Vicki Gough
Subject: RE: Online Form Submittal: Landlord Information Statement
Attachments: 20230530110506499.pdf

Please see attached (page 3) and revise your form appropriately, or advise otherwise. Thank you.

Patricia L. Hunt, RMC/CMR
Township Clerk/Registrar of Vital Statistic
Township of Moorestown
111 West Second Street, Suite 1
Moorestown, New Jersey 08057
(856) 914-3015 - Telephone
(856) 914-3076 - Fax
phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>
Sent: Monday, May 29, 2023 6:57 PM
To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>
Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street

Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below.

Erynn Capriotti

If there is not more than 1 owner, select none.

Field not completed.

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none.

None

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email

Field not completed.

If Record Owner is a corporation, name corporate officers below.

Field not completed.

Select N/A below if not applicable

Field not completed.

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable

N/A

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

Section Break;

Managing Agent

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

Section Break;

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 260/262 East Linden Street

City Moorestown

State NJ

Zip 08057

Section Break

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

Electronic Signature Vincent Capriotti

Are you a "Covered Person" No
under "Daniels Law?"

(Section Break)

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Patricia L. Hunt

From: noreply@civicplus.com
Sent: Monday, May 29, 2023 6:57 PM
To: Patricia L. Hunt; Vicki Gough
Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street

Moorestown, NJ 08057

Section Break

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. Erynn Capriotti

If there is not more than 1 owner, select none. *Field not completed.*

Section Break

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable *Field not completed.*

Section Break

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable *N/A*

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

Section Break

Managing Agent

Select N/A below if not applicable *N/A*

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

Section 100

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable **N/A**

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 260/262 East Linden Street

City Moorestown

State NJ

Zip 08057

this would be your address, which is different on pg 1

Section 100

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

Electronic Signature Vincent Capriotti

Are you a "Covered Person" under "Daniels Law?" No

Field not completed.

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Patricia L. Hunt

From: vincent capriotti <vincent.a.capriotti@gmail.com>
Sent: Wednesday, May 31, 2023 7:36 PM
To: Patricia L. Hunt
Cc: Vicki Gough
Subject: Re: Online Form Submittal: Landlord Information Statement
Attachments: 20230530110506499.pdf

Follow Up Flag: Follow up
Flag Status: Completed

Sorry for that mistake Patricia. My address is 437 Bridgeboro Road. Revising the form does that require me to start over with a new one at the township website ?

Sent from my iPhone

On May 30, 2023, at 11:34 AM, Patricia L. Hunt <phunt@moorestown.nj.us> wrote:

Please see attached (page 3) and revise your form appropriately, or advise otherwise. Thank you.

Patricia L. Hunt, RMC/CMR
Township Clerk/Registrar of Vital Statistic
Township of Moorestown
111 West Second Street, Suite 1
Moorestown, New Jersey 08057
(856) 914-3015 - Telephone
(856) 914-3076 - Fax
phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>
Sent: Monday, May 29, 2023 6:57 PM
To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>
Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street

Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. Erynn Capriotti

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable *Field not completed.*

(Section Break)

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Select N/A below if not applicable

N/A

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email

Field not completed.

Street Address

Field not completed.

City

Field not completed.

State

Field not completed.

Zip

Field not completed.

(Section Break)

Managing Agent

Select N/A below if not applicable

N/A

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email

Field not completed.

Street Address

Field not completed.

City

Field not completed.

State

Field not completed.

Zip

Field not completed.

(Section Break)

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable

N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 260/262 East Linden Street

City Moorestown

State NJ

Zip 08057

(Section Break)

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every
holder of a recorded
mortgage on the premises: Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not
applicable *Field not completed.*

Electronic Signature
Agreement I agree.

Electronic Signature Vincent Capriotti

Are you a "Covered Person"
under "Daniels Law?" No

(Section Break)

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Caution: This email originated outside of our organization. Please take care when clicking links or opening attachments. When in doubt, please contact the IT help desk.

Patricia L. Hunt

From: Vincent Capriotti <vince@thecapriottigroup.com>
Sent: Monday, June 5, 2023 6:18 PM
To: Patricia L. Hunt
Cc: Vicki Gough
Subject: Fwd: Online Form Submittal: Landlord Information Statement
Attachments: 20230530110506499.pdf

Follow Up Flag: Follow up
Flag Status: Completed

Hey Patricia,

Here is my 2nd one for 262 Linden Street

----- Forwarded message -----

From: **vincent capriotti** <vincent.a.capriotti@gmail.com>
Date: Mon, Jun 5, 2023 at 6:15 PM
Subject: Fwd: Online Form Submittal: Landlord Information Statement
To: Vincent Capriotti <vince@thecapriottigroup.com>

Sent from my iPhone

Begin forwarded message:

From: "Patricia L. Hunt" <phunt@moorestown.nj.us>
Date: May 30, 2023 at 11:34:04 AM EDT
To: vincent.a.capriotti@gmail.com
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: RE: Online Form Submittal: Landlord Information Statement

Please see attached (page 3) and revise your form appropriately, or advise otherwise. Thank you.

Patricia L. Hunt, RMC/CMR

Township Clerk/Registrar of Vital Statistic

Township of Moorestown

111 West Second Street, Suite 1

Moorestown, New Jersey 08057

(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:57 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street

Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. Erynn Capriotti

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable *Field not completed.*

(Section Break)

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Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Managing Agent

Select N/A below if not applicable

N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable

N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

(Section Break)

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Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Vincent & Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

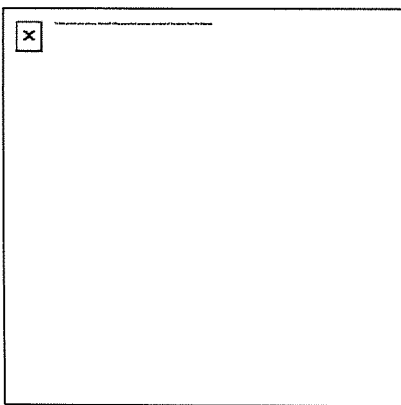
Electronic Signature Vincent Capriotti

Are you a "Covered Person" under "Daniels Law?" No

(Section Break)

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Prime Realty Partners

Vincent Capriotti

332 Haddon Avenue, Suite 200

Westmont, NJ 08108

Office: 856-210-3000

Cell: 609-923-1065

Email: Vince@TheCapriottiGroup.com

Caution: This email originated outside of our organization. Please take care when clicking links or opening attachments. When in doubt, please contact the IT help desk.

Patricia L. Hunt

From: noreply@civicplus.com
Sent: Monday, May 29, 2023 6:57 PM
To: Patricia L. Hunt; Vicki Gough
Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street

Moorestown, NJ 08057

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. Erynn Capriotti

If there is not more than 1 owner, select none. *Field not completed.*

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable *Field not completed.*

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Managing Agent

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

Section 1.1.1

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 260/262 East Linden Street

City Moorestown

State NJ

Zip 08057

this would be your address, which is different on p91

Section 1.1.2

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

Electronic Signature Vincent Capriotti

Are you a "Covered Person" under "Daniels Law?" No

Rev. 11-2020

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Caution: This email originated outside of our organization. Please take care when clicking links or opening attachments. When in doubt, please contact the IT help desk.

Patricia L. Hunt

From: Patricia L. Hunt
Sent: Tuesday, June 6, 2023 6:20 AM
To: Vincent Capriotti
Cc: Vicki Gough
Subject: RE: Online Form Submittal: Landlord Information Statement
Attachments: 20230606061249518.pdf

See attached receipted copy.

Patricia L. Hunt, RMC/CMR
Township Clerk/Registrar of Vital Statistic
Township of Moorestown
111 West Second Street, Suite 1
Moorestown, New Jersey 08057
(856) 914-3015 - Telephone
(856) 914-3076 - Fax
phunt@moorestown.nj.us

From: Vincent Capriotti <vince@thecapriottigroup.com>
Sent: Monday, June 5, 2023 6:18 PM
To: Patricia L. Hunt <phunt@moorestown.nj.us>
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: Fwd: Online Form Submittal: Landlord Information Statement

Hey Patricia,

Here is my 2nd one for 262 Linden Street

----- Forwarded message -----

From: **vincent capriotti** <vincent.a.capriotti@gmail.com>
Date: Mon, Jun 5, 2023 at 6:15 PM
Subject: Fwd: Online Form Submittal: Landlord Information Statement
To: Vincent Capriotti <vince@thecapriottigroup.com>

Sent from my iPhone

Begin forwarded message:

From: "Patricia L. Hunt" <phunt@moorestown.nj.us>
Date: May 30, 2023 at 11:34:04 AM EDT
To: vincent.a.capriotti@gmail.com
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: RE: Online Form Submittal: Landlord Information Statement

Please see attached (page 3) and revise your form appropriately, or advise otherwise. Thank you.

Patricia L. Hunt, RMC/CMR

Township Clerk/Registrar of Vital Statistic

Township of Moorestown

111 West Second Street, Suite 1

Moorestown, New Jersey 08057

(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:57 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street

Moorestown, NJ 08057

Section Break

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. Erynn Capriotti

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable *Field not completed.*

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Managing Agent

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

(Section Break)

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Vincent & Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

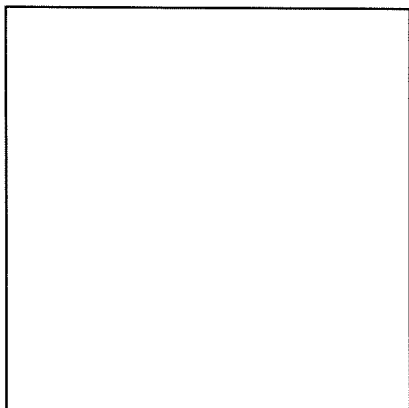
Electronic Signature Vincent Capriotti

Are you a "Covered Person" No
under "Daniels Law?"

[Section Break]

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Prime Realty Partners
Vincent Capriotti
332 Haddon Avenue, Suite 200
Westmont, NJ 08108
Office: 856-210-3000
Cell: 609-923-1065
Email: Vince@TheCapriottiGroup.com

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(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:48 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 260 Linden Street

Moorestown, NJ 08057

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Erynn Capriotti*

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name

Patricia L. Hunt
Rec'd 6/6/2023

(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:57 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street

Moorestown, NJ 08057

Owner of Record

Vincent

Last Name

Capriotti

Phone Number

6099231065

Mobile Number

Field not completed.

Email

vincent.a.capriotti@gmail.com

Street Address

437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1
owner, list others below.

Erynn Capriotti

If there is not more than 1
owner, select none.

Field not completed.

Record Owner of Rental Business (if any)

If not applicable, select
none.

None

First Name

Field not completed.

Patricia L. Hunt
Rec'd 6/6/2023

Patricia L. Hunt

From: Vincent Capriotti <vince@thecapriottigroup.com>
Sent: Monday, June 5, 2023 6:12 PM
To: Patricia L. Hunt
Cc: Vicki Gough
Subject: Fwd: Online Form Submittal: Landlord Information Statement
Attachments: 20230530110448949.pdf

Follow Up Flag: Follow up
Flag Status: Completed

Hi Patricia,

Below is the alterations I made for my rental property at 260 Linden Street

----- Forwarded message -----

From: vincent capriotti <vincent.a.capriotti@gmail.com>
Date: Thu, Jun 1, 2023 at 3:44 PM
Subject: Fwd: Online Form Submittal: Landlord Information Statement
To: Vincent Capriotti <vince@thecapriottigroup.com>

Sent from my iPhone

Begin forwarded message:

From: "Patricia L. Hunt" <phunt@moorestown.nj.us>
Date: May 30, 2023 at 11:36:24 AM EDT
To: vincent.a.capriotti@gmail.com
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: RE: Online Form Submittal: Landlord Information Statement

Please see attached (pages 1, 2 and 3) and revise your form appropriately, or advise otherwise. Thank you.

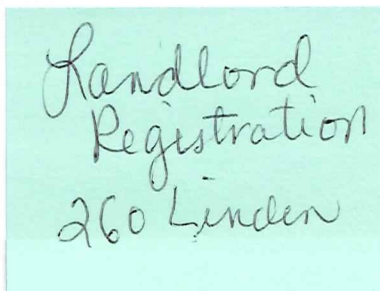
Patricia L. Hunt, RMC/CMR

Township Clerk/Registrar of Vital Statistic

Township of Moorestown

111 West Second Street, Suite 1

Moorestown, New Jersey 08057



Landlord
Registration
260 Linden

(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:48 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 260 Linden Street

Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Erynn Capriotti*

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name

Last Name

Phone Number

Field not completed.

Mobile Number

Email

If Record Owner is a
corporation, name
corporate officers below.

Field not completed.

Select N/A below if not
applicable

N/A

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not
applicable

N/A

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email

Field not completed.

Street Address

Field not completed.

City

Field not completed.

State

Field not completed.

Zip

Field not completed.

(Section Break)

Managing Agent

Select N/A below if not applicable

N/A

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email

Field not completed.

Street Address

Field not completed.

City

Field not completed.

State

Field not completed.

Zip

Field not completed.

(Section Break)

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable

N/A

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email

N/A

Street Address

N/A

City

N/A

State

N/A

Zip

N/A

(Section Break)

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? ☒ Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Vincent & Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

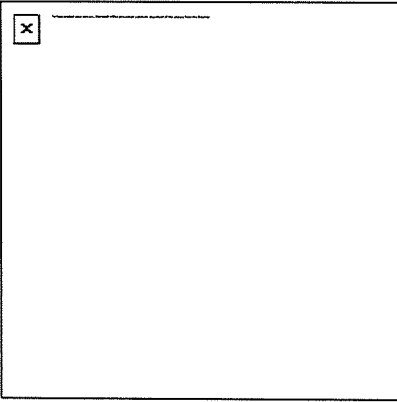
Electronic Signature Vincent Capriotti

Are you a "Covered Person" under "Daniels Law?" ☒ No

(Section Break)

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Prime Realty Partners
Vincent Capriotti
332 Haddon Avenue, Suite 200
Westmont, NJ 08108
Office: 856-210-3000
Cell: 609-923-1065
Email: Vince@TheCapriottiGroup.com

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Vicki Gough

From: Patricia L. Hunt
Sent: Tuesday, June 06, 2023 6:20 AM
To: Vincent Capriotti
Cc: Vicki Gough
Subject: RE: Online Form Submittal: Landlord Information Statement
Attachments: 20230606061249518.pdf

260 + 262
"Rec'd"
proof

See attached receipt copy.

Patricia L. Hunt, RMC/CMR
Township Clerk/Registrar of Vital Statistic
Township of Moorestown
111 West Second Street, Suite 1
Moorestown, New Jersey 08057
(856) 914-3015 - Telephone
(856) 914-3076 - Fax
phunt@moorestown.nj.us

From: Vincent Capriotti <vince@thecapriottigroup.com>
Sent: Monday, June 5, 2023 6:12 PM
To: Patricia L. Hunt <phunt@moorestown.nj.us>
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: Fwd: Online Form Submittal: Landlord Information Statement

Hi Patricia,

Below is the alterations I made for my rental property at 260 Linden Street

----- Forwarded message -----

From: **vincent capriotti** <vincent.a.capriotti@gmail.com>
Date: Thu, Jun 1, 2023 at 3:44 PM
Subject: Fwd: Online Form Submittal: Landlord Information Statement
To: Vincent Capriotti <vince@thecapriottigroup.com>

Sent from my iPhone

Begin forwarded message:

From: "Patricia L. Hunt" <phunt@moorestown.nj.us>
Date: May 30, 2023 at 11:36:24 AM EDT
To: vincent.a.capriotti@gmail.com
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: RE: Online Form Submittal: Landlord Information Statement

2 sided

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Erynn Capriotti*

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. *None*

First Name

Last Name

Phone Number *Field not completed.*

Mobile Number

Email

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable *N/A*

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable *N/A*

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Email N/A

Street Address N/A

City N/A

State N/A

Zip N/A

Section Break

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Vincent & Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:48 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 260 Linden Street

Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Erynn Capriotti*

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name

Patricia L. Hunt
Rec'd 6/6/2023

(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:57 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street

Moorestown, NJ 08057

Owner of Record

Vincent

Last Name

Capriotti

Phone Number

6099231065

Mobile Number

Field not completed.

Email

vincent.a.capriotti@gmail.com

Street Address

437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1
owner, list others below.

Erynn Capriotti

If there is not more than 1
owner, select none.

Field not completed.

Record Owner of Rental Business (if any)

If not applicable, select
none.

None

First Name

Field not completed.

Patricia L. Hunt
Rec'd 6/6/2023

Patricia L. Hunt

From: Patricia L. Hunt
Sent: Tuesday, May 30, 2023 11:36 AM
To: vincent.a.capriotti@gmail.com
Cc: Vicki Gough
Subject: RE: Online Form Submittal: Landlord Information Statement
Attachments: 20230530110448949.pdf

Please see attached (pages 1, 2 and 3) and revise your form appropriately, or advise otherwise. Thank you.

Patricia L. Hunt, RMC/CMR
Township Clerk/Registrar of Vital Statistic
Township of Moorestown
111 West Second Street, Suite 1
Moorestown, New Jersey 08057
(856) 914-3015 - Telephone
(856) 914-3076 - Fax
phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>
Sent: Monday, May 29, 2023 6:48 PM
To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>
Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 260 Linden Street

Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Field not completed.*

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. **None**

First Name **Erynn**

Last Name **Capriotti**

Phone Number *Field not completed.*

Mobile Number **8567451350**

Email **ecapriottic@gmail.com**

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable **N/A**

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable **N/A**

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Managing Agent

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 260/262 East Linden Street

City Moorestown

State NJ

Zip 08057

(Section Break)

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

Electronic Signature Vincent Capriotti

Are you a "Covered Person" No
under "Daniels Law?"

(Section Break)

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Patricia L. Hunt

From: noreply@civicplus.com
Sent: Monday, May 29, 2023 6:48 PM
To: Patricia L. Hunt; Vicki Gough
Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 260 Linden Street

Moorestown, NJ 08057

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Field not completed.*

** did y. mean for Erynn to be listed here?*

If there is not more than 1 owner, select none. *Field not completed.*

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name Erynn *★*

Last Name Capriotti *★*

Phone Number *Field not completed.*

Mobile Number 8567451350 *★*

Email **ecapriotttc@gmail.com**

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable **N/A**

Field not completed.

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable **N/A**

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

Field not completed.

Managing Agent

Select N/A below if not applicable **N/A**

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

Print Name

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable **N/A**

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 260/262 East Linden Street

City Moorestown

State NJ

Zip 08057

this would be your address which is different on pg. 1

Print Name

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

Electronic Signature Vincent Capriotti

Are you a "Covered Person" under "Daniels Law?" No

(Section Blank)

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Patricia L. Hunt

From: Patricia L. Hunt
Sent: Thursday, June 1, 2023 2:30 PM
To: 'vincent capriotti'
Cc: Vicki Gough
Subject: RE: Online Form Submittal: Landlord Information Statement

I do not see where a correction was made and I did not receive a correction back for 260 Linden.

Patricia L. Hunt, RMC/CMR
Township Clerk/Registrar of Vital Statistic
Township of Moorestown
111 West Second Street, Suite 1
Moorestown, New Jersey 08057
(856) 914-3015 - Telephone
(856) 914-3076 - Fax
phunt@moorestown.nj.us

From: vincent capriotti <vincent.a.capriotti@gmail.com>
Sent: Wednesday, May 31, 2023 7:36 PM
To: Patricia L. Hunt <phunt@moorestown.nj.us>
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: Re: Online Form Submittal: Landlord Information Statement

Sorry for that mistake Patricia. My address is 437 Bridgeboro Road. Revising the form does that require me to start over with a new one at the township website ?

Sent from my iPhone

On May 30, 2023, at 11:34 AM, Patricia L. Hunt <phunt@moorestown.nj.us> wrote:

Please see attached (page 3) and revise your form appropriately, or advise otherwise. Thank you.

Patricia L. Hunt, RMC/CMR
Township Clerk/Registrar of Vital Statistic
Township of Moorestown
111 West Second Street, Suite 1
Moorestown, New Jersey 08057
(856) 914-3015 - Telephone
(856) 914-3076 - Fax
phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>
Sent: Monday, May 29, 2023 6:57 PM
To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>
Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street
Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent
Last Name Capriotti
Phone Number 6099231065
Mobile Number *Field not completed.*
Email vincent.a.capriotti@gmail.com
Street Address 437 Bridgeboro Road
Moorestown, NJ 08057

If there is more than 1 owner, list others below. Erynn Capriotti

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None
First Name *Field not completed.*
Last Name *Field not completed.*
Phone Number *Field not completed.*
Mobile Number *Field not completed.*
Email *Field not completed.*
If Record Owner is a corporation, name corporate officers below. *Field not completed.*
Select N/A below if not applicable *Field not completed.*

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable

N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Managing Agent

Select N/A below if not applicable

N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 260/262 East Linden Street

City Moorestown

State NJ

Zip 08057

(Section Break)

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

Electronic Signature Vincent Capriotti

Are you a "Covered Person" under "Daniels Law?" No

(Section Break)

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Caution: This email originated outside of our organization. Please take care when clicking links or opening attachments. When in doubt, please contact the IT help desk.

Patricia L. Hunt

From: Vincent Capriotti <vince@thecapriottigroup.com>
Sent: Monday, June 5, 2023 6:12 PM
To: Patricia L. Hunt
Cc: Vicki Gough
Subject: Fwd: Online Form Submittal: Landlord Information Statement
Attachments: 20230530110448949.pdf

Follow Up Flag: Follow up
Flag Status: Completed

Hi Patricia,

Below is the alterations I made for my rental property at 260 Linden Street

----- Forwarded message -----

From: vincent capriotti <vincent.a.capriotti@gmail.com>
Date: Thu, Jun 1, 2023 at 3:44 PM
Subject: Fwd: Online Form Submittal: Landlord Information Statement
To: Vincent Capriotti <vince@thecapriottigroup.com>

Sent from my iPhone

Begin forwarded message:

From: "Patricia L. Hunt" <phunt@moorestown.nj.us>
Date: May 30, 2023 at 11:36:24 AM EDT
To: vincent.a.capriotti@gmail.com
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: RE: Online Form Submittal: Landlord Information Statement

Please see attached (pages 1, 2 and 3) and revise your form appropriately, or advise otherwise. Thank you.

Patricia L. Hunt, RMC/CMR

Township Clerk/Registrar of Vital Statistic

Township of Moorestown

111 West Second Street, Suite 1

Moorestown, New Jersey 08057

(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:48 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 260 Linden Street

Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Erynn Capriotti*

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name

Last Name

Phone Number

Field not completed.

Mobile Number

Email

If Record Owner is a corporation, name corporate officers below.

Field not completed.

Select N/A below if not applicable

N/A

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable

N/A

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email

Field not completed.

Street Address

Field not completed.

City

Field not completed.

State

Field not completed.

Zip

Field not completed.

(Section Break)

Managing Agent

Select N/A below if not applicable

N/A

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email

Field not completed.

Street Address

Field not completed.

City

Field not completed.

State

Field not completed.

Zip

Field not completed.

(Section Break)

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable

N/A

First Name

Field not completed.

Last Name

Field not completed.

Phone Number

Field not completed.

Mobile Number

Field not completed.

Email

N/A

Street
Address

N/A

City

N/A

State

N/A

Zip

N/A

(Section Break)

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Vincent & Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

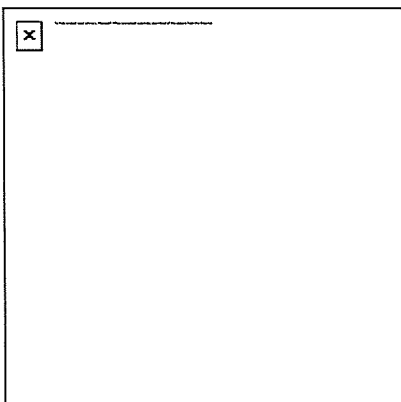
Electronic Signature Vincent Capriotti

Are you a "Covered Person" under "Daniels Law?" No

(Section Break)

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Prime Realty Partners
Vincent Capriotti
332 Haddon Avenue, Suite 200
Westmont, NJ 08108
Office: 856-210-3000
Cell: 609-923-1065
Email: Vince@TheCapriottiGroup.com

Caution: This email originated outside of our organization. Please take care when clicking links or opening attachments. When in doubt, please contact the IT help desk.

Patricia L. Hunt

From: noreply@civicplus.com
Sent: Monday, May 29, 2023 6:48 PM
To: Patricia L. Hunt; Vicki Gough
Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 260 Linden Street

Moorestown, NJ 08057

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Field not completed.*

** did you mean for Erynn to be listed here?*

If there is not more than 1 owner, select none. *Field not completed.*

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name Erynn *

Last Name Capriotti *

Phone Number *Field not completed.*

Mobile Number 8567451350 *

Email **ecapriottito@gmail.com**

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable **N/A**

Field not completed.

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable **N/A**

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

Field not completed.

Managing Agent

Select N/A below if not applicable **N/A**

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

Section 10a

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 260/262 East Linden Street

City Moorestown

State NJ

Zip 08057

this would be your address, which is different on pg. 1

Section 10b

Representative of the Record Owner or Managing Agent

This is an individual representative of the Record Owner or Managing Agent who may be reached or contacted at any time in the event of an emergency affecting the premises or any unit of dwelling space herein, including such emergencies as the failure of any essential service or system and who has the authority to make emergency decisions concerning the building and any repair thereto or expenditure in connection therewith.

Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature Agreement I agree.

Electronic Signature Vincent Capriotti

Are you a "Covered Person" under "Daniels Law?" No

(Section Break)

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Patricia L. Hunt

From: Patricia L. Hunt
Sent: Tuesday, June 6, 2023 6:20 AM
To: Vincent Capriotti
Cc: Vicki Gough
Subject: RE: Online Form Submittal: Landlord Information Statement
Attachments: 20230606061249518.pdf

See attached receipt copy.

Patricia L. Hunt, RMC/CMR
Township Clerk/Registrar of Vital Statistic
Township of Moorestown
111 West Second Street, Suite 1
Moorestown, New Jersey 08057
(856) 914-3015 - Telephone
(856) 914-3076 - Fax
phunt@moorestown.nj.us

From: Vincent Capriotti <vince@thecapriottigroup.com>
Sent: Monday, June 5, 2023 6:12 PM
To: Patricia L. Hunt <phunt@moorestown.nj.us>
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: Fwd: Online Form Submittal: Landlord Information Statement

Hi Patricia,

Below is the alterations I made for my rental property at 260 Linden Street

----- Forwarded message -----

From: **vincent capriotti** <vincent.a.capriotti@gmail.com>
Date: Thu, Jun 1, 2023 at 3:44 PM
Subject: Fwd: Online Form Submittal: Landlord Information Statement
To: Vincent Capriotti <vince@thecapriottigroup.com>

Sent from my iPhone

Begin forwarded message:

From: "Patricia L. Hunt" <phunt@moorestown.nj.us>
Date: May 30, 2023 at 11:36:24 AM EDT
To: vincent.a.capriotti@gmail.com
Cc: Vicki Gough <vgough@moorestown.nj.us>
Subject: RE: Online Form Submittal: Landlord Information Statement

Please see attached (pages 1, 2 and 3) and revise your form appropriately, or advise otherwise. Thank you.

Patricia L. Hunt, RMC/CMR

Township Clerk/Registrar of Vital Statistic

Township of Moorestown

111 West Second Street, Suite 1

Moorestown, New Jersey 08057

(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:48 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 260 Linden Street

Moorestown, NJ 08057

(Section Break)

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Erynn Capriotti*

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. *None*

First Name

Last Name

Phone Number *Field not completed.*

Mobile Number

Email

If Record Owner is a corporation, name corporate officers below. *Field not completed.*

Select N/A below if not applicable *N/A*

(Section Break)

If the address of Record Owner is not located in the County in which the premises are located (Burlington County), the name and address of a person who resides in, or has an office in, the County in which the premises are located and is authorized to accept notices from a tenant and to issue receipts therefore and to accept service of process on behalf of the Record Owner:

Select N/A below if not applicable *N/A*

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Managing Agent

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email *Field not completed.*

Street Address *Field not completed.*

City *Field not completed.*

State *Field not completed.*

Zip *Field not completed.*

(Section Break)

Individual Employed to Provide Regular Maintenance Service

Select N/A below if not applicable N/A

First Name *Field not completed.*

Last Name *Field not completed.*

Phone Number *Field not completed.*

Mobile Number *Field not completed.*

Email N/A

Street Address N/A

City N/A

State N/A

Zip N/A

(Section Break)

Representative of the Record Owner or Managing Agent

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Is the same individual as the Owner of Record? Yes

First Name Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

City Moorestown

State NJ

Zip 08057

Name and address of every holder of a recorded mortgage on the premises: Vincent & Erynn Capriotti
437 Bridgeboro Road
Moorestown, NJ 08057

Select N/A below if not applicable *Field not completed.*

Electronic Signature
Agreement

I agree.

Electronic Signature

Vincent Capriotti

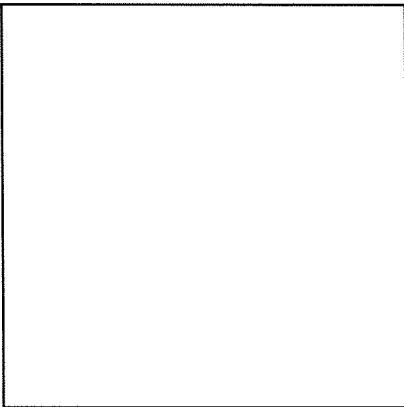
Are you a "Covered Person"
under "Daniels Law?"

No

(Section Break)

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Prime Realty Partners
Vincent Capriotti
332 Haddon Avenue, Suite 200
Westmont, NJ 08108
Office: 856-210-3000
Cell: 609-923-1065
Email: Vince@TheCapriottiGroup.com

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(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:48 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 260 Linden Street

Moorestown, NJ 08057

Owner of Record Vincent

Last Name Capriotti

Phone Number 6099231065

Mobile Number *Field not completed.*

Email vincent.a.capriotti@gmail.com

Street Address 437 Bridgeboro Road

Moorestown, NJ 08057

If there is more than 1 owner, list others below. *Erynn Capriotti*

If there is not more than 1 owner, select none. *Field not completed.*

(Section Break)

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name

Patricia L. Hunt
Rec'd 6/6/2023

(856) 914-3015 - Telephone

(856) 914-3076 - Fax

phunt@moorestown.nj.us

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Monday, May 29, 2023 6:57 PM

To: Patricia L. Hunt <phunt@moorestown.nj.us>; Vicki Gough <vgough@moorestown.nj.us>

Subject: Online Form Submittal: Landlord Information Statement

Landlord Information Statement

Rental Property Location 262 Linden Street
Moorestown, NJ 08057

Owner of Record Vincent
Last Name Capriotti
Phone Number 6099231065
Mobile Number *Field not completed.*
Email vincent.a.capriotti@gmail.com
Street Address 437 Bridgeboro Road
Moorestown, NJ 08057

If there is more than 1 owner, list others below. Erynn Capriotti

If there is not more than 1 owner, select none. *Field not completed.*

Record Owner of Rental Business (if any)

If not applicable, select none. None

First Name *Field not completed.*

Phunt
Rec'd 6/6/2023