

Requestor Information - Please Print

OPEN PUBLIC RECORDS ACT REQUEST FORM

430 Park Ave, Scotch Plains NJ 07076

908-322-6700 opra@scotchplainsnj.com Bozena Lacina, RMC- Township Clerk



Payment Information

Important Notice

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

First Name Ryan MI Last Name Williams	Maximum Authorization Cost \$			
	Select Payment Method			
E-mail Address MLS@stellaripl.com	Cash Check Money Order			
Mailing Address 2605 Maitland Center Pkwy suite C				
City State FL Zip 32751	Fees: Letter size pages - \$0.05 per page			
Telephone 302-261-9069 FAX 407-210-3113	Legal size pages - \$0.07 per page			
Preferred Delivery: Up US Mail On-Site Inspect Fax E-mail	Other materials (CD, DVD, etc) – actual cost of material Delivery: Delivery / postage fees			
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.	additional depending upon delivery type. Extras: Special service charge			
Signature Date 02-16-2024	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.				
We are currently working with closing on this property scheduled and would need verified. Please provide the requested below info at the earliest.	ed the below records			
Address: 1234 MAPLE HILL ROAD SCOTCH PLAINS NJ 07076 Parcel: Block: 9602 Lot: 6 Owner: RITA LINDER LAVERY Please advise if the above address has any OPEN/PENDING/EXPIRED Permits and demolition permits that needs attention and any fees due currently. Also advise if there are any Code Violation or fines due that needs attention currently. Any unrecorded liens/fines/special assessments due. Kindly reply us back through Fax: 407-210-3113 or Email: MLS@stellaripl.com.				
AGENCY USE ONLY AGENCY USE ONLY AGE	ENCY USE ONLY			
Disposition Notes Est. Document Cost Custodian: If any part of request cannot be Tracking Information	n Final Cost Total			
Est. Document Cost	Deposit			
Fet Extras Cost Ready Date Ready Date	Balance Due			
Total Est. Cost Total Pages	Balance Paid Records Provided			
Deposit Amount FEB 1 6 2024	CONTRACTOR OF THE CONTRACTOR O			
Deposit Date By				
Filled - Closed				
Partial - Closed Custodian Signate	ure Date			

OPE N CONSTRUCTION



PERMIT

Date Issued Control # Permit #

6-14-01 A#13437 61-0530

	Lot	
Work Site Location 1234 Maple Aul	RS Contractor (1)	Mism Smeltzen
frotal Plais		50 Midwood Dr.
Owner in Fee		shupy, ng 07065
AddressAune	Tel. (73) 3	
	Lic. No. or Bldrs. Reg. No	
Tel. ()	Lio. No. of Blats. Neg. No	
Is hereby granted permission to perform the following		PAYMENTS (Office Use Only)
	[] LEAD HAZARD ABATEMENT	Building 200. —
[] ELECTRICAL [] FIRE PROTECTION		Electrical
[] ELEVATOR DEVICES [] ASBESTOS ABATEME	ENT [] OTHER	Plumbing
(Subchapter 8 only)		Fire Protection
DESCRIPTION OF WORK:		Elevator Devices
DESCRIPTION OF WORK: TEST-Off Re-	14 mil	Other
10001 //00		DCA Training Fee
	U	Cert. of Occupancy
NOTE: If construction does not commence within one	(1) year of date of issuance, or	
if construction ceases for a period of six (6) months, t	his permit is void.	Other
Estimated Cost of Work \$	Demograph .	
1000 00 00 00 000000000000000000000000	6-14-01	Check No. 74/0
Construction Official	Date	Cash
U.C.C. F170	Date	Collected by
(rev. 5/2K)		(see reverse side)
1 WHITE—INSPECTOR 2 CANARY—OFFICE	3 PINK—TAX ASSESSOR 4 GC	OLD—APPLICANT

CONSTRUCTION



PERMIT

Date Issued 8-26-05
Control #
Permit #
05-0934

IDENTIFICATION Block 9602 Lot	6
Work Site Location 1234 MARCE HICE PA	Contractor FROTES STOURS
Owner in Fee RATA LAVENS	Address 107 MONROF ST
12-1112	BAHWAY N.T DZOGS
Address 1334 MANCE HELL CO	Tel. (732) 381-8118
S 2 2 2 2 070 70	Lic. No. or Bldrs. Reg. No
Tel. ()	Fed. Emp. No
Is hereby granted permission to perform the following work:	0001101
1 RINIDING	EAD HAZARD ABATEMENT PAYMENTS (Office Use Only)
I DELECTRICAL	EAD HAZARD ABATEMENT PAYMENTS (Office Use Only) Building
I FIEWATOR DEVICES I A ARRESTOS ASSESSED	THER Electrical 65
(Subchapter 8 only)	
DESCRIPTION OF WORK:	Plumbing / 80
\int	Fire Protection 50
Furnace/A	Elevator Devices
NOTE: If construction does not commence within and (4)	Other
NOTE: If construction does not commence within one (1) year of date of if construction ceases for a period of six (6) months, this permit is void	of issuance/or DCA Training Fee/
of the permit is void	Cert. of Occupancy
Estimated Cost of Work \$ 5700	Other A
111	Total #307-110
11. heelle haberta	Check No.
Construction Official	Cash C
UCC F170	Collected by
(rev 3/96)	Oblicated by
1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3	PINK—OFFICE COPY 4 GOLD—APPLICANT COPY (see reverse side)
	TO THE COLL



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	Payment Information
First Name Ryan MI Last Name Williams	Maximum Authorization Cost \$
E-mail Address MLS@stellaripl.com	Select Payment Method
Mailing Address 2605 Maitland Center Pkwy suite C	Cash Check Money Order
City State <u>FL</u> zip <u>32751</u>	Fees: Letter size pages - \$0.05 per page Legal size pages - \$0.07
Telephone 302-261-9069 FAX 407-210-3113 Preferred Delivery: Up US Mail Inspect Fax E-mail	per page Other materials (CD, DVD, etc) – actual cost of material
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.	Delivery: Delivery / postage fees additional depending upon delivery type.
Signature Date <u>02-16-2024</u>	Extras: Special service charge dependent upon request.
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Please advise if the above address has any OPEN/PENDING/EXPIRED Permits that needs attention and any fees due currently.	s and demolition permits
Also advise if there are any Code Violation or fines due that needs attention curr liens/fines/special assessments due. No Responsive Re	rently. Any unrecorded
Kindly reply us back through Fax: 407-210-3113 or Email: MLS@stellaripl.com.	
AGENCY USE ONLY AGENCY USE ONLY AGE	ENCY USE ONLY
Disposition Notes Tracking Information Est. Document Cost Custodian: If any part of request cannot be	The second secon
delivered in seven business days, Est. Delivery Cost detail reasons here.	Deposit
Est. Extras Cost Ready Date Total Pages	Balance Due Balance Paid
Total Fat Cont	ecords Provided
Deposit Amount FEB 1 6 2024	
Estimated Balance	
Deposit Date By_Clue_2/28 In Progress - Open	
Denied - ClosedFilled - Closed	
Partial - Closed Custodian Signatus	re Date

Blog / Violations Collector / assessor

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- Dues	14,000		Maximum Authorization Cost \$
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Mailing Address 2605 Maitland Cent			Cash Check Money Order
City \$ Telephone 302-261-9069 Pick	FAX 407-210-3113	E.mail V	Fees: Letter size pages - \$0.05 per page Legal size pages - \$0.07 per page Other materials (CD, DVD,
If you are requesting records contain 2C:28-3, I certify that I HAVE / HAVE Jersey, any other state, or the United St		Inder penalty of <u>N.J.S.A.</u> der the laws of New	etc) – actual cost of material Delivery: Delivery / postage fees additional depending upon delivery type. Extras: Special service charge
Signature	Date 02-	-16-2024	dependent upon request.
preferred method of delivery will on be jeopardized by such method of o		e technological means and t	he integrity of the records will not
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verified. Please provide the	requested below info at the earli	est.	VED
	L ROAD SCOTCH PLAINS NJ 07	7076	FEB 20 2024
Parcel: Block: 9602 Lot: 6			20 2024
Owner: RITA LINDER LAVE	=RY		TAX COLLECTOR TOWNSHIP OF SCOTCH PLAIN
Diagon advise if the above	Advantage COENTOENDING	0/5/01050	The state of the s
	address has any OPEN/PENDING	G/EXPIRED Permits	and demolition permits
that needs attention and any	y rees due currently.		
Also advise if there are any	Code Violetian or fines due that		
liens/fines/special assessme	Code Violation or fines due that r		
ile is/ilites/special assessine	No R	esponsive Rec	ord Exists
	Fax: 407-210-3113 or Email: MI		
AGENCY USE ONLY	AGENCY USE ONLY		ICY USE ONLY
Est. Document Cost	Disposition Notes Custodian: If any part of request cannot be	Tracking Information	The second secon
	delivered in seven business days,	Tracking # Rec'd Date	Total Deposit
Est. Delivery Cost	detail reasons here.	Ready Date	Balance Due
Est. Extras Cost		Total Pages	Balance Paid
Total Est. Cost		Rec	ords Provided
Deposit Amount	FEB 1 6 2024 J	,	£
Estimated Balance	1 1/00		
Deposit Date	By		
	Denied - Closed	·	
	Filled - Closed Partial - Closed	Custodian Size	
		Custodian Signature	Date

Blog / Violations

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	Maximum Authorization Cost \$
First Name Ryan MI Last Name Williams E-mail Address MLS@stellaripl.com	Select Payment Method
Mailing Address 2605 Maitland Center Pkwy suite C	Cash Check Money Order
CityState FLZip 32751 Telephone 302-261-9069	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.
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Also advise if there are any Code Violation or fines due that needs attention curr liens/fines/special assessments due. Kindly reply us back through Fax: 407-210-3113 or Email: MLS@stellaripl.com.	ently. Any unrecorded
Est. Document Cost Est. Delivery Cost Est. Extras Cost Total Est. Cost Deposit Amount Estimated Balance Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here. Tracking Information Tracking # Rec d Date Ready Date Total Pages A Deposit Amount Estimated Balance	Total Deposit Balance Due Balance Paid Cecords Provided SPOUM ASSOSSMORTS DATE: