

State of New Jersey
WANTAGE TOWNSHIP GOVERNMENT RECORDS REQUEST FORM



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	V	Payment Information
OCT 25	2000	Maximum Authorization Cost \$
First Name Sam MI Last Name Burns MANTAGETON	<i>U23</i>	Select Payment Method
Company Stellar Inovation	IVON	Cash Check Money Order
Mailing Address 2605 Maitland Center Parkway, Suite C, Maitland, FL 32751	_	
City Maitland State FL Zip 32751 Email		Fees: Per Page @\$0.05
Business Hours Telephone: Area Code 302 Number 261-9069 Extension	-	letter @\$0.07 legal
Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On Site Inspect ☐ E-Mail		Delivery: Delivery / postage fees
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.
Scarra Burnes		Extras: Extraordinary service fees dependent upon request.
Signature Date	+	dopondon apon request.
Record Request Information: To expedite the request, be as specific as possible in describing the reinclude the type of access requested (copying or inspection), and if data, the medium requested.	cord	s being requested. Also, please
Please advise if the address has any OPEN/PENDING/EXPIRED Permits & attention and any fees due currently (If Yes Provide Permit Number and Ty		nolition permits that need
attention and any lees due currently. (If tes Provide Permit Number and Ty	Je)	
Also advise if there are any Code Violation or fines due that needs attention Case Number & Type)	curr	ently · (if Yes, Provided
Any unrecorded liens/fines/special assessments due.		
Also Please let us know if you service this property for water and sewer. If yes Please provide us the current due and when it is good until and accour	nt ac	etive or not.
Address: 4 DEWITT RD Block: 138 Lot: 1.01		
AGENCY USE ONLY AGENCY USE ONLY	AGE	NCY USE ONLY
Est. Document Cost Disposition Notes Tracking Inform	ation	Final Cost Total
delivered in seven business days, Est. Delivery Cost detail reasons here.		Deposit
Est. Extras Cost Ready Date Total Pages		Balance Due Balance Paid
Total Est. Cost	R	ecords Provided
Deposit Amount		
Estimated Balance		
Deposit Date In Progress - Open Denied - Closed		
Filled - Closed		
Partial - Closed Custodian S	ignatu	re Date



State of New Jersey

WANTAGE TOWNSHIP GOVERNMENT RECORDS REQUEST FORM Collector

Copied to: Building Zonig Officer Assessor ST FORM



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Requestor Information - Please	Print		1.00				
			no.				formation
			UU_{ij}	25 20,25	iviaximur	n Authorization	Cost \$
First Name Sam	MI	Last Name Burr	ns			Select Payme	ent Method
Company Stellar Inovation					Cash	Check	Money Order
Mailing Address 2605 Maitland Cer	nter Parkway, S	Suite C, Maitla	and, FL 32751				Ó
City Maitland Sta							
Business Hours Telephone: Area Code (302 Numb	per <u>261-9069</u>	Extensio	n	Fees:	Per Page	@\$0.05 letter @\$0.07
Preferred Delivery: Pick Up	US Mail	On Site Inspect	☐ E-Mail				legal
Circle One: Under penalty of N.J.S.A. 2C:2 indictable offense under the laws of New Je	28-3 Loorlife that L. L.	we . h		у	Delivery	 Delivery / p additional d delivery typ 	epending upon
Signature_Sam Sum		Date	10/25/2023		Extras	Extraordina dependent	ry service fees upon request.
Record Request Information: To experinclude the type of access requested (co	- Fyring of mopeonori	, and it data, the	nedium requested				
Please advise if the address hattention and any fees due cur	as any OPFN/I	PENDING/EX	DIDED Dormi	to 0 da	olition	permits	that need
Also advise if there are any Co Case Number & Type)	ode Violation or	fines due tha	it needs atten	tion curre	ently :	(if Yes, P	rovided
Any unrecorded liens/fines/spe	ecial assessme	nts due.					
Also Please let us know if you If yes Please provide us the cu	service this pro	perty for wate when it is goo	er and sewer. d until and ac	count act	ive or	not.	
Address: 4 DEWITT RD Bloc	k: 138 Lot: 1	.01					
AGENCY USE ONLY	AGENCY US						
Est Bases	Disposition		Tracking	AGEN Information	CY USE	ONLY Final	01
Est. Document Cost	Custodian: If any part o delivered in seven	business days,	Tracking #		То		COST
Est. Delivery Cost	detail reaso	ns here.	Rec'd Date		_	posit	
Est. Extras Cost			Ready Date Total Pages		-	lance Due lance Paid	
Total Est. Cost				Dermits Reco			
Deposit Amount			No violat				
Estimated Balance			SKBugho		10/30/	1 23	
Deposit Date		pen		7			
	Filled - CI	losed	Custo	Jutle dian Signature)	10/0	27/23
				9-7-101			Daig

LIST OF APPLICATIONS

Control No	A on Date	Derno								CCTOB	October, 30 2023	2:14:14PM	~
Owner name	7	20110	rer di	rer at UpdateNo CCO No	Ω	CCO Dt	Close Dt		Block	Lot	Qual	Description	
CUFT	SOFT	olle Address		Owner Address			MunWvd	All Wvd		Use Grp			
Cost Const	Alt Const	Cost Daniel	Fire	Plumb Elev	Mech	BFee	EFee	FFee	Pfee	Elev Fee	Mfee	Tr Fee	CCO Fee
App Type	()	Cost Delijor	CO Date CA Date	CA Date	Cfee	Badm	EAdm	FAdm	PADM	VAdm	MAdm	Alt Fee	CO Fee
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