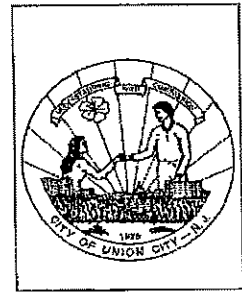




City of Union City
Office of the Municipal Clerk
Department of Revenue and Finance
OPEN PUBLIC RECORDS ACT REQUEST FORM
3715 Palisade Avenue, Union City, NJ 07087
(201)348-5733 (phone)
(201)348-2482 (fax)



015650

CITY CLERK
RECEIVED
CITY OF UNION CITY

2024 AUG 13 AM 11:46

Important Notice

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

Requestor Information - Please Print

Payment Information

First Name Kevin MI _____ Last Name Smith
 E-Mail Address MLS@stellaripl.com
 Mailing Address 2605 Maitland Center Parkway, Suite C
 City Maitland State FL Zip 32751
 Telephone (302) 261-9069 FAX 941-214-1132
 Preferred Delivery: Pick Up _____ On-Site Inspect _____ Fax _____ E-mail
 If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
 Signature Kevin Smith Date 07/19/2024

Maximum Authorization Cost \$ _____
 Select Payment Method
 Cash _____ Check _____ Money Order _____
 Fees: Letter size pages - \$0.05 per page
 Legal size pages - \$0.07 per page
 Other materials (CD, DVD, etc) - actual cost of material
 Delivery: Delivery / postage fees additional depending upon delivery type.
 Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Address: 416 21ST STREET, UNION CITY, NJ 07087
 Block 113-Lot 25
 Owner: ELSA GUZMAN

1. Please advise if the above address has any OPEN/PENDING/EXPIRED Permits and demolition permits that need attention and any fees due currently.
2. Also advise if there are any open Code Violation or fines due that needs attention currently.
3. Advise if there are any unrecorded liens/fines/special assessments due.

AGENCY USE ONLY		AGENCY USE ONLY		AGENCY USE ONLY	
Received by _____ Date _____	Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.		Tracking Information		Final Cost
	In Progress -	Open _____	Tracking # _____	Total _____	Deposit _____
	Denied -	Closed _____	Rec'd Date _____	Balance Due _____	Balance Paid _____
	Filled -	Closed _____	Ready Date _____		
	Partial -	Closed _____	Total Pages _____		
			Records Provided		
			Custodian Signature _____		Date _____

BLQ: 113. 25. Tax Year: 2024 to 2024
Owner Name: GUZMAN, ELSA Property Location: 416 21ST ST

Tax Year: 2024	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Original Billed:	2,302.37	2,302.36	1,603.50	0.00	6,208.23
Payments:	2,302.37	2,302.36	1,603.50	0.00	6,208.23
Balance:	0.00	0.00	0.00	0.00	0.00

Date	Qtr	Type	Code	Check No	Mthd	Reference	Batch Id	Principal	Interest	2024 Prin Balance
								6,208.23		6,208.23
01/30/24	1	Payment	001	VARIOUS	CK	21840	1369 CORELOGI	2,302.37	0.00	3,905.86
		Original Billed								
		CORELOGIC								
05/03/24	2	Payment	001	VARIOUS	CK	22345	1497 CORE	2,302.36	0.00	1,603.50
		CORELOGIC								
07/31/24	3	Payment	001	VARIOUS	CK	22798	1490 CORE	1,603.50	0.00	0.00
		CORELOGIC								

Total Principal Balance for Tax Years in Range: 0.00