

REQUEST FOR CERTIFIED LIST OF OWNERS

To: City Clerk's Office
 Absecon City
 Municipal Complex
 500 Mill Road
 Absecon NJ 08201

Staff Only

Date received _____ Check received _____

I hereby request the Administrative Officer prepare a certified list of property owners from current tax duplicates within a 200 feet in all directions of the following property:

Block(s) _____

Lot(s) _____

Property address _____

This request is being made in accordance with NJSA 40:55D-12c. Enclosed is a check (or money order) in the amount of \$10.00. It is acknowledged that in the event that the number of property owners in the list exceed 40 names, the undersigned agrees to pay an additional \$0.25 per name over 40 names in accordance with NJSA 40:55D-12c. It is understood that the requested list of property owners will be provided within 7 days of the receipt of the written request in accordance with NJSA 40:55D-12c.

Please send property owners list to:

Name _____

Address _____

Signed _____ Date _____