

OWNERSHIP DISCLOSURE STATEMENT

NAME OF CORPORATION, PARTNERSHIP OR LLC: _____

Listed below are the names and addresses of all owners of 10% or more of the stock/interest* in the above referenced corporation or partnership:

	NAME	ADDRESS
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

*If a corporation or a partnership owns 10% or more of the stock of a corporation or 10% or greater interest in a partnership, that corporation or partnership shall list the names and addresses of its stockholders holding 10% or more of its stock or 10% or greater interest in the partnership, and this requirement shall be followed until the names and addresses of the non-corporate stockholders and individual partners exceeding the 10% ownership criterion established have been listed.

SWORN & SUBSCRIBED before me this

_____ day of _____, 20_____

SIGNATURE (applicant)

DATE

NOTARY

PRINT NAME

REQUEST FOR LIST OF PROPERTY OWNERS

To: Haddon Township
 Attn: Tax Assessor
 135 Haddon Avenue
 Haddon Township, NJ 08108

Subject property must be identified by Block, Lot and Street Address. If the property contains multiple lots, list each lot separately. If the property is on multiple blocks, use separate lines for each block.

Street Address	Block	Lot	Lot	Lot

I do hereby request that the Tax Assessor compile and certify a list of Property Owners within 200 feet of the property described above. With this request, I hereby submit the required fee of \$10.00 or \$.25 per name, whichever is greater.

Requestor's Name: _____

Address: _____ Phone: _____

_____ E-mail: _____

Signature: _____ Date: _____

Note—Your request will be processed by the Tax Assessor within seven (7) calendar days of the filing of this form and payment of the required fees as required by N.J.S.A. 40:55D-12c. The seven (7) day time period will begin on the day that this form and the required fee are received by the Municipal Clerk.

Adjoining Municipalities—If the subject property is within 200 feet of an adjacent municipality, notice of your application must be served on the Clerk of that municipality. In addition, you must request a 200' list from the municipality and notice of your application must be served on the persons and entities whose names appear on that list.

OFFICE USE ONLY

AMOUNT: _____ CASH _____ CHECK _____

DATE PAID: _____