

# Borough of Spotswood

## Division of Assessment

77 Summerhill Road, Spotswood, NJ 08884

732-251-0700 ext. 835

732-251-1359 Fax

*djasko@spotswoodboro.com*



David Jasko, CTA

Tax Assessor

### Property Owners' 200 Ft. List Request Form \$10.00 for each Block/Lot

Name of Applicant \_\_\_\_\_ Fax Number \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Address of Affected  
Premise \_\_\_\_\_ Spotswood Block \_\_\_\_\_ Lot \_\_\_\_\_

Request for List(s) for (Use one line for each individual Block and Lot):

1). Street Address \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

2). Street Address \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

3). Street Address \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

4). Street Address \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

5). Street Address \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Please note preferred method of Record Delivery:

\_\_\_\_\_ E-mail \_\_\_\_\_

\_\_\_\_\_ Fax \_\_\_\_\_

\_\_\_\_\_ Mail \_\_\_\_\_

For office Use only

Fee of \$10.00 for each Block/Lot \_\_\_\_\_ Cash \_\_\_\_\_ Check#

Date completed by the Tax Assessor: \_\_\_\_\_