

**CERTIFIED PROPERTY OWNER LIST REQUEST FORM**

DATE: \_\_\_\_\_

Sabina T. Skibo, R.M.C.  
Township of Manchester  
1 Colonial Dr.  
Manchester, NJ 08759  
(732) 657-8121 Ext. 3200  
(732) 657-2071 Facsimile

RE: Block \_\_\_\_\_ Lot: \_\_\_\_\_

Address: \_\_\_\_\_

Dear Ms. Skibo:

Enclosed is \$10.00 (check/cash) to cover the fee for a list of adjacent property owners within 200 feet of the above mentioned property.

Thank you.

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_ Check here if you prefer to be called to pick up the list.  
Otherwise it will be mailed to you.