



LAW OFFICES OF
BYRNES, O'HERN & HEUGLE

Sean F. Byrnes
Daniel J. O'Hern, Jr.°
Robert L. Heugle, Jr.*°

Loryn M. Lawson†
Shawn Wallach†
Donna M. Alkin†
John F. Byrnes

°R 1:40 Qualified Court-Approved Civil Mediator
*Certified by the Supreme Court of NJ as a Civil Trial Attorney (1996-2019)
†Licensed in New York

April 4, 2023

RECEIVED

APR - 5 2023

VIA PRIORITY MAIL

Borough of Sea Bright

Candace B. Mitchell, Board Secretary
Borough of Sea Bright Planning/Zoning Board
1099 Ocean Avenue
Sea Bright, New Jersey 07760

**RE: 1050 Ocean Avenue, Unit 8, Block 16, Lot 9
Exquisite Relief LLC**

Dear Ms. Mitchell:

This firm represents Exquisite Relief LLC, the owner of 1050 Ocean Avenue, Sea Bright, New Jersey. I enclose our Affidavit of Service, which attaches the Affidavit of Publication; Notice of Public Hearing to Property Owners; list of property owners within 200 feet of Block 52, Lot 2; and original green receipt cards and white slips.

Thank you.

Very truly yours,

DANIEL J. O'HERN, JR.

DOH/ald
Enclosures

AFFIDAVIT OF PUBLICATION

Publisher's Fee \$32.56 Affidavit \$35.00

STATE OF WISCONSIN
Brown County

Personally appeared D. Roberts at County of Brown, State of Wisconsin.

Of the **Asbury Park Press**, newspaper printed in Freehold, New Jersey and published in Neptune, in State of New Jersey and Monmouth/Ocean Counties, and of general circulation in Monmouth/Ocean Counties, who being duly sworn, depose and saith that the advertisement of which the annexed is a true copy, has been published in the said newspaper 1 times, once in each issue dated as follows:

03/29/2023 A.D 2023

Nancy Heyrman
Notary Public State of Wisconsin County of Brown
5.15.23
My commission expires

NANCY HEYRMAN
Notary Public
State of Wisconsin

**NOTICE OF PUBLIC HEARING
BOROUGH OF SEA BRIGHT UNIFIED PLANNING BOARD**

Notice is hereby given that the undersigned has applied to the Planning Board of the Borough of Sea Bright to consider an application for approval with respect to premises known as Block 16 Lot 9 on the Tax Map of the Borough of Sea Bright and commonly known as 1050 Ocean Avenue, Sea Bright. The Applicant is seeking minor site plan approval to operate a personal service business providing massage, facials, waxing and related services. Site plan approval is required because the proposed personal service use is a change of use from one class of zoning to another. The Applicant shall also seek any variance relief or other requirements which the Board may deem necessary and/or appropriate.

A hearing will be held on this application by the Planning Board of the Borough of Sea Bright will be held on Tuesday April 11, 2023 at 7:30 p.m. at the Sea Bright Beach Pavilion, 3rd Floor, 1097 Ocean Avenue, Sea Bright, New Jersey, at which time all interested parties may appear in person or by agent or attorney and present any objection to granting this application.

A copy of the maps and application documents have been filed in the office of the Board Secretary and are available for public inspection at the Borough Hall, 1099 Ocean Avenue, Sea Bright, New Jersey during normal business hours and are also available on the Borough website at www.seabrightnj.org.

Date: March 24, 2023 Applicant's Name: Exquisite Relief, LLC
Address: c/o BYRNES O'HERN &
 HEUGLE, LLC, Attorneys
 for the Applicant
 195 East Bergen Place
 Red Bank, NJ 07701
 (p)(732) 219-7711

(\$32.56)

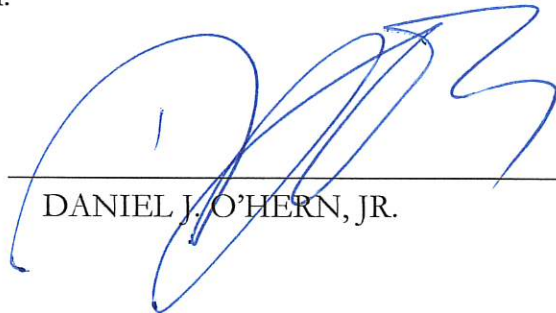
0005644026-01

**AFFIDAVIT OF SERVICE
BOROUGH OF SEA BRIGHT PLANNING BOARD**

Attached to this Affidavit is a list of the property owners served, showing the method of service and date of service.

DANIEL J. O'HERN, JR., ESQUIRE, of full age, being duly sworn according to law, deposes and says that his business is located at Byrnes, O'Hern & Heugle, LLC, 195 E. Bergen Place, Red Bank, New Jersey 07701, and hereby acknowledges that the applicant has submitted an application to the Borough of Sea Bright Planning Board in connection with the property known as Block 16, Lot 9 and also known as 1050 Ocean Avenue, Sea Bright, New Jersey.


And that he gave written notice of the hearing for this application to any and all of the property owners affected, in the form attached, and according to the attached list, and in the manner, on the date indicated there on.



DANIEL J. O'HERN, JR.

Sworn to and subscribed before me

on this ^{4th} day of April, 2023



ANNA L. DICARLO
Notary Public of New Jersey
My Commission Expires 10/12/2023

**NOTICE OF PUBLIC HEARING
BOROUGH OF SEA BRIGHT PLANNING BOARD**

TO ALL OWNERS OF PROPERTY LOCATED WITHIN A RADIUS of TWO HUNDRED FEET FROM BLOCK 16 LOT 9.

PLEASE TAKE NOTICE that the undersigned has applied to the Planning Board of the Borough of Sea Bright to consider an application for approval with respect to premises known as Block 16 Lot 9 on the Tax Map of the Borough of Sea Bright and commonly known as 1050 Ocean Avenue, Sea Bright. The Applicant is seeking minor site plan approval to operate a personal service business providing massage, facials, waxing and related services. Site plan approval is required because the proposed personal service use is a change of use from one class of zoning to another. The Applicant shall also seek any variance relief or other requirements which the Board may deem necessary and/or appropriate.

You are in receipt of this notice because the above referenced property is within 200 feet of your property.

A hearing will be held on this application by the Planning Board of the Borough of Sea Bright will be held on Tuesday April 11, 2023 at 7:30 p.m. at the Sea Bright Beach Pavilion, 3rd Floor, 1097 Ocean Avenue, Sea Bright, New Jersey, at which time you may appear in person or by agent or attorney and present any objection which you may have to granting this application.

A copy of the maps and application documents have been filed in the office of the Board Secretary and are available for public inspection at the Borough Hall, 1099 Ocean Avenue, Sea Bright, New Jersey during normal business hours and are also available on the Borough website at www.seabrightnj.org.

Notice is sent to you by the Applicant, by order of the Planning Board of the Borough of Sea Bright.

Date: March 23, 2023

Applicant's Name: Exquisite Relief, LLC

Address: c/o BYRNES O'HERN &
HEUGLE, LLC, Attorneys
for the Applicant
195 East Bergen Place
Red Bank, New Jersey 07701
(p)(732) 219-7711

**BOROUGH OF SEA BRIGHT
OFFICE OF THE MUNICIPAL CLERK
1099 OCEAN AVENUE
SEA BRIGHT, NJ 07760
732-842-0099 EXT. 119**

Information requested for properties located within 200' of **Block 16, Lot 9, also known as 1050 Ocean Avenue, Unit 8**.

YOU MUST SEND NOTICES TO THE UTILITIES AND APPROPRIATE GOVERNMENTAL AGENCIES NOTED BELOW:

Borough of Sea Bright 1099 Ocean Avenue ✓ Sea Bright, NJ 07760	State of New Jersey (for State Hwy 36) Commissioner, Department of Transportation 1035 Parkway Avenue P.O. Box 600 ✓ Trenton, NJ 08625
Comcast Comcast Center 1701 John F Kennedy Blvd. ✓ Philadelphia, PA 19103	State of New Jersey (for Coastal Waters) Division of Coastal Resources P.O. Box 401 ✓ Trenton, NJ 08625
New Jersey American Water Company 661 Shrewsbury Avenue ✓ Shrewsbury, NJ 07702	Two Rivers Water Reclamation Authority 1 Highland Avenue ✓ Monmouth Beach, NJ 07750
New Jersey Natural Gas Company 1415 Wyckoff Road ✓ Wall, NJ 07719	Verizon 175 W. Main St ✓ Freehold, NJ 07728 Attn: Corporate Secretary/Right of Way Agent
Jersey Central Power & Light Area Manager Central New Jersey 1500 Florance Avenue ✓ Union Beach, NJ 07735	Monmouth County Planning Board Hall of Records Annex – 2 nd Floor 1 East Main Street ✓ Freehold, NJ 07728

Attached is a true list of the Property Owners within 200' of **Block 16, Lot 9, also known as 1050 Ocean Avenue, Unit 8** in the Borough of Sea Bright as submitted by Sea Bright Tax Assessor Timothy Anfuso.


 Candace B. Mitchell, Administrative Assistant
 Borough Clerk's Office

Date: March 6, 2023
 Date Request Received: March 2, 2023
 Amount Paid: \$10.00

Cc. File

OWNER & ADDRESS REPORT

SEA BRIGHT

200 FOOT OWNERS LIST FOR BLOCK 16, LOT 9

03/04/23 Page 1 of 2

BLOCK	LOT	QUAL	CLA	PROPERTY OWNER	PROPERTY LOCATION	Add'l Lots
16	3		4A	LENA, RAYMOND C. & PHYLLIS N. 570 MONMOUTH PLACE LONG BRANCH, NJ 07740	1070 OCEAN AVENUE	
16	4		4A	AMCK, LLC 21 CREST DRIVE SOUTH CRESSKILL, NJ 07624	1066 OCEAN AVENUE	
16	4.01		4A	TREZZA REALTY HOLDING LLC. 183 BERNARD DRIVE RED BANK, NJ 07701	1068 OCEAN AVENUE	
16	5		4A	GBW REALTY, LLC 46 MONMOUTH BLVD. OCEANPORT, NJ 07757	1062 OCEAN AVENUE	
16	6		4A	1060 OCEAN AVENUE LLC 152 DORCHESTER WAY SHREWSBURY, NJ 07702	1060 OCEAN AVENUE	
16	7		1	ADAMS, JAMES R. & JO-ANN 1184 OCEAN AVE UNIT B-1 SEA BRIGHT, NJ 07760	1056 OCEAN AVENUE	
16	8		4A	CHARLOTTE REALTY HOLDINGS, LLC 1054 OCEAN AVENUE SEA BRIGHT, NJ 07760	1054 OCEAN AVENUE	
16	9		4A	SAYI SQUARE, LLC 37 MERIDIAN ROAD EDISON, NJ 08820	1050 OCEAN AVENUE	
16	10		2	ADAMS, JAMES R. & JO-ANN K. 1184 OCEAN AVE UNIT B-1 SEA BRIGHT, NJ 07760	4 PENINSULA AVENUE	
16	11		2	ROSS, MICHAEL T & PAMELA M 6 PENINSULA AVENUE SEA BRIGHT, NJ 07760	6 PENINSULA AVENUE	
16	12		1	SULLIVAN, RICHARD G. 1071 OCEAN AVENUE SEA BRIGHT, NJ 07760	7 BADMINTON COURT	
16	13		1	1060 OCEAN AVENUE LLC 152 DORCHESTER WAY SHREWSBURY, NJ 07702	4 PACKER PLACE	
16	14		2	MARTIN, IVAN WANAT 19 CONOVER LANE RUMSON, NJ 07760	3 BADMINTON COURT	
16	15.01		15F	ASSESSED WITH BLOCK 16 LOTS 15.03 THRU 15.10 AS PART OF COMMON ELEMENTS 07760	2 BADMINTON COURT	
16	15.02		4A	MONMOUTH SQUASH CLUB, LLC 1071 OCEAN AVENUE SEA BRIGHT, NJ 07760	1071 OCEAN AVENUE	
16	15.03		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 1	
16	15.04		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 2	
16	15.05		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 3	
16	15.06		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 4	

OWNER & ADDRESS REPORT

SEA BRIGHT

200 FOOT OWNERS LIST FOR BLOCK 16, LOT 9

03/04/23 Page 2 of 2

BLOCK	LOT	QUAL	CLA	PROPERTY OWNER	PROPERTY LOCATION	Add'l Lots
16	15.07		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 5	
16	15.08		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 6	
16	15.09		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 7	
16	15.10		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 8	
16	15.11		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 9	
16	15.12		2	MURRO, ROBERT P. JR. 7534 RIDGEFIELD LANE LAKE WORTH, FL 33467	2 BADMINTON COURT UNIT 10	
16	16		2	OCEAN RIVER ESTATES, LLC 37 MERIDIAN ROAD EDISON, NJ 08820	14 PENINSULA AVENUE	
16	17		2	BERGEN SINGLE FAMILY HOMES, LLC 37 MERIDIAN ROAD EDISON, NJ 08820	16 PENISULA AVENUE	
16	18.01		1	SULLIVAN, RICHARD G. 1071 OCEAN AVENUE SEA BRIGHT, NJ 07760	14 BADMINTON COURT	
16	19.01		2	CHOTA, GJON & POPOVIC, VERA & MICHAEL 6 MOORE RD BRONXVILLE, NY 10708	12 BADMINTON COURT	
16	20		2	LI, MINGWEI 10 THORESEN ROAD WARREN, NJ 07059	8 BADMINTON COURT	
17	1		1	KALAKA, JOANN 1184 OCEAN AVE UNIT B-1 SEA BRIGHT, NJ 07760	1042 OCEAN AVENUE	
17	2		1	KALAKA REALTY 1184 OCEAN AVE UNIT B-1 SEA BRIGHT, NJ 07760	1 PENINSULA AVENUE	
17	3		4A	SBBP, LLC 95 AVENUE OF TWO RIVERS RUMSON, NJ 07760	1040 OCEAN AVENUE	
23	1		15C	BORO OF SEA BRIGHT 1099 OCEAN AVENUE SEA BRIGHT, NJ 07760	1099 OCEAN AVENUE	
23	2.01		15C	BORO OF SEA BRIGHT 1099 OCEAN AVENUE SEA BRIGHT, NJ 07760	1061 OCEAN AVENUE	

Dup

Dup

Dup

Dup

Dup

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *[Signature]*

B. Received by (Printed Name)

D. Is delivery address different from item 1? If YES, enter delivery address below

**U.S. Postal Service™
 CERTIFIED MAIL® RECEIPT
 Domestic Mail Only**

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Restricted Delivery \$

Postmark Here
 MAR 24 2023

Borough of Sea Bright
 1099 Ocean Avenue
 Sea Bright NJ 07760

Street and Apt. No., or P.O. Box No.
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

1. Article Addressed to:
 Borough of Sea Bright
 1099 Ocean Avenue
 Sea Bright NJ 07760

2. Article Addressed to:
 7020 2450 0000 8019 2280

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery Insured Mail

Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *[Signature]* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Restricted Delivery \$

Postmark Here
 MAR 24 2023

Comcast Center
 1701 John F. Kennedy Blvd.
 Philadelphia, PA 19103

Street and Apt. No., or P.O. Box No.
 City, State, ZIP+4®

PS Form 3811, July 2020 PSN 7530-02-000-9053 See Reverse for Instructions

1. Article Addressed to:
 Comcast Center
 1701 John F. Kennedy Blvd.
 Philadelphia, PA 19103

2. Article Addressed to:
 7020 2450 0000 8019 2204

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery Insured Mail

Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *[Signature]*

B. Received by (Printed Name)
 C-19

D. Is delivery address different from item 1? If YES, enter delivery address below

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Restricted Delivery \$

Postage \$

Total Postage \$

Sent To

Street and Apt. No., or P.O. Box No.

City, State, ZIP+4®

Postmark Here
 MAR 24 2023

NJ American Water Company
 661 Shrewsbury Avenue
 Shrewsbury, NJ 07702

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

1. Article Addressed to:
 NJ American Water Company
 661 Shrewsbury Avenue
 Shrewsbury, NJ 07702

2. Article Addressed to:
 7022 0410 0002 5181 1909

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery Insured Mail

Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
NJNG
 1415 Wyckoff Road
 Wall, NJ 07719

2. Article Number (Transfer from service label)
 7020 2450 0000 8019 2181

COMPLETE THIS SECTION ON MAILPIECE

A. Signature
 [Signature]

B. Received by (Printed Name)
Lisa

D. Is delivery address different from the address on the mailpiece? If YES, enter delivery address

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$
 Total Postage \$

Sent To
 Street and Apt. No., or PO Box No.
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
JCP&L
 Area Manager Central NJ
 1500 Florence Avenue
 Union Beach, NJ 07735

2. Article Number (Transfer from service label)
 7020 2450 0000 8019 2174

COMPLETE THIS SECTION ON MAILPIECE

A. Signature
 [Signature]

B. Received by (Printed Name)
 [Blank]

D. Is delivery address different from the address on the mailpiece? If YES, enter delivery address

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail Restricted Delivery (over \$500)

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$
 Total Postage \$

Sent To
 Street and Apt. No., or PO Box No.
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
State of New Jersey (for State Hwy 36)
 Commissioner, Department of Transportation
 PO Box 600
 Trenton, NJ 08625

2. Article Number (Transfer from service label)
 7020 2450 0000 8019 2167

COMPLETE THIS SECTION ON MAILPIECE

A. Signature
 [Signature]

B. Received by (Printed Name)
 [Blank]

D. Is delivery address different from the address on the mailpiece? If YES, enter delivery address

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$
 Total Postage \$

Sent To
 Street and Apt. No., or PO Box No.
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here: **MARCH 24 2023**

Postage \$ _____
 State of New Jersey (for Coastal Waters)
 Division of Coastal Resources
 PO Box 401 ✓
 Trenton, NJ 08625

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here: **MAR 24 2023**

Postage \$ _____
 Two Rivers Water Reclamation Authority
 1 Highlands Avenue ✓
 Monmouth Beach, NJ 07750

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON

A. Signature *[Signature]*
 B. Received by (Printed Name) _____

1. Article Description
 Two Rivers Water Reclamation Authority
 1 Highlands Avenue
 Monmouth Beach, NJ 07750

2. Article Number (Transfer from service label)
 7020 2450 0000 8019 2396

Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail

PS Form 3811, July 2020 PSN 7530-02-000-9053

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here: **MAR 24 2023**

Postage \$ _____
 Verizon
 Attn: Corporate Secretary/Right of Way Agent
 175 Main Street ✓
 Freehold, NJ 07728

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON

- A. Signature *[Signature]*
- B. Received by (Printed Name) *[Signature]*
- D. Is delivery address different from the address on the mailpiece? Yes No

1. Article # **7020 2450 0000 8019 1672**

Monmouth County Planning Board
Hall of records – 2nd Floor
1 East Main Street
Freehold, NJ 07728



9590 9402 7245 1284 4140 93

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Insured Mail Restricted Delivery (over \$500)

2. Article # **7020 2450 0000 8019 1672** Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

- Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) \$
 - Return Receipt (electronic) \$
 - Certified Mail Restricted Delivery \$
 - Adult Signature Required \$
 - Adult Signature Restricted Delivery \$

Postage

\$

Total

\$

Sent

Street

City,

Monmouth County Planning Board
Hall of records – 2nd Floor
1 East Main Street
Freehold, NJ 07728



PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Domestic Return Receipt

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
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For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To

Street and Apt.

City, State, ZIP+

Raymond & Phyllis Lena
570 Monmouth Place
Long Branch, NJ 07740

Postmark Here
MAR 24 2023

FED BANK, NJ 07701

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7020 2450 0000 8019 2426

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
AMCK LLC
21 Crest Drive South
Cresskill, NJ 07624



9590 9402 7726 2152 7775 24

2. Article 7020 2450 0000 8019 2457 Restricted Delivery (over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

B. Received by (Printed Name)

D. Is delivery address different from the address on the mailpiece? If YES, enter delivery address:

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery

7020 2450 0000 8019 2457

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To

Street and Apt.

City, State, ZIP+

AMCK LLC
21 Crest Drive South
Cresskill, NJ 07624

Postmark Here
MAR 24 2023

FED BANK, NJ 07701

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7020 2450 0000 8019 2440

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Trezza Realty Holding LLC
183 Bernard Drive
Red bank, NJ 07701



9590 9402 7543 2098 0914 24

2. Article 7020 2450 0000 8019 2440 Restricted Delivery (over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

B. Received by (Printed Name)

D. Is delivery address different from the address on the mailpiece? If YES, enter delivery address:

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To

Street and Apt.

City, State, ZIP+

Trezza Realty Holding LLC
183 Bernard Drive
Red bank, NJ 07701

Postmark Here
MAR 24 2023

FED BANK, NJ 07701

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article # **GBW Realty LLC**
46 Monmouth Blvd.
Oceanport, NJ 07757

2. Article # **7020 2450 0000 8019 2433**

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery (over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$ **GBW Realty LLC**
46 Monmouth Blvd.
Oceanport, NJ 07757

Total Postage \$
 Sent To
 Street and Apt
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article # **1060 Ocean Avenue LLC**
152 Dorchester Way
Shrewsbury, NJ 7702

2. Article # **7020 2450 0000 8019 2495**

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$ **1060 Ocean Avenue LLC**
152 Dorchester Way
Shrewsbury, NJ 7702

Total Postage \$
 Sent To
 Street and Apt
 City, State, ZIP+4

U.S. Postal Service™
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 Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$ **James and Joann Adams**
1184 Ocean Avenue Unit B-1
Sea Bright, NJ 07760

Total Postage \$
 Sent To
 Street and Apt
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 2450 0000 8019 2471

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OFFICIAL USE

Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage
\$

Total Postage \$

Sent To
Street and Apt.
City, State, ZIP

Charlette Realty Holdings LLC
 1054 Ocean Avenue
 Sea Bright, NJ 07760

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Savi Square LLC
 37 Meridian Road
 Edison, NJ 08820



COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X

B. Received by (Printed Name)

D. Is delivery address different from item label?

3. Service type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

2. Article Number (Transfer from service label)
 7020 2450 0000 8019 2464

PS Form 3811, July 2020 PSN 7530-02-000-9053

7020 2450 0000 8019 2464

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OFFICIAL USE

Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

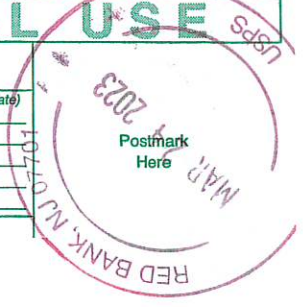
Postage
\$

Total Postage \$

Sent To
Street and Apt.
City, State, ZIP

Savi Square LLC
 37 Meridian Road
 Edison, NJ 08820

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



7020 2450 0000 8019 2242

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OFFICIAL USE

Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage
\$

Total Postage and Fees \$

Sent To
Street and Apt. No.,
City, State, ZIP+4®

Michael & Pamela Ross
 6 Peninsula Avenue
 Sea Bright, NJ 07760

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions





LAW OFFICES OF
BYRNES, O'HERN & HEUGLE

195 E. BERGEN PLACE, RED BANK, NJ 07701

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE
CERTIFIED MAIL®

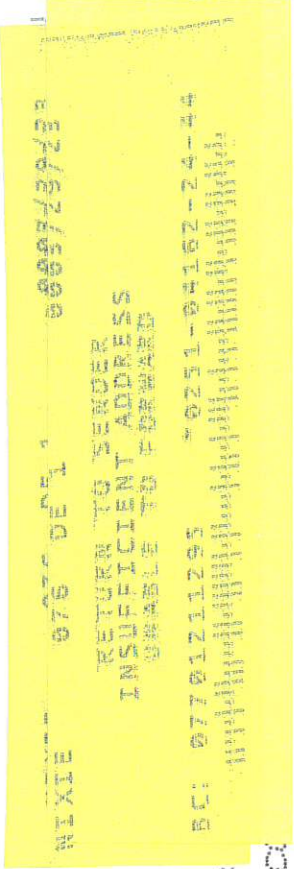


7020 2450 0000 8019 2471



[Handwritten signature]

Charlotte Realty Holdings LLC
1054 Ocean Avenue
Sea Bright, NJ 07760



IA
6761922112
0776082144

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard Sullivan
1071 Ocean Avenue
Sea Bright, NJ 07760



9590 9402 7245 1284 4140 00

2. Article Number (Transfer from cover) 7020 2450 0000 8019 2235

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
- B. Received by (Printed Name) _____
- D. Is delivery address different from item? If YES, enter delivery address below _____

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee

- Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) \$ _____
 - Return Receipt (electronic) \$ _____
 - Certified Mail Restricted Delivery \$ _____
 - Adult Signature Required \$ _____
 - Adult Signature Restricted Delivery \$ _____

Postage

Total Postage \$ _____

Sent To _____

Street and Apt. # _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee

- Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) \$ _____
 - Return Receipt (electronic) \$ _____
 - Certified Mail Restricted Delivery \$ _____
 - Adult Signature Required \$ _____
 - Adult Signature Restricted Delivery \$ _____

Postage

Total Postage \$ _____

Sent To _____

Street and Apt. # _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

- Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) \$ _____
 - Return Receipt (electronic) \$ _____
 - Certified Mail Restricted Delivery \$ _____
 - Adult Signature Required \$ _____
 - Adult Signature Restricted Delivery \$ _____

Postage

Total Postage \$ _____

Sent To _____

Street and Apt. No., or PO BOX # _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Monmouth Squash Club LLC
1071 Ocean Avenue
Sea Bright, NJ 07760



9590 9402 7543 2098 0916 15

2. Article Number (Transfer from cover) 7020 2450 0000 8019 2198

COMPLETE THIS SECTION

- A. Signature
- B. Received by (Printed Name) _____
- D. Is delivery address different from item? If YES, enter delivery address below _____

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery

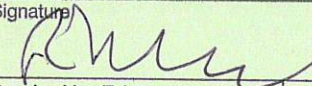
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature
 
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery

1. Article A
 Robert P. Murro Jr.
 7534 Ridgefield Lane
 Lake Worth, FL 33467

D. Is delivery address different from item 1? Yes
 No



9590 9402 7543 2098 0920 87

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

2. Article
 7020 2450 0000 8019 2259

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

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 Domestic Mail Only

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OFFICIAL USE

Postmark Here
 MAR 24 2023
 RED BANKS, NJ 07070

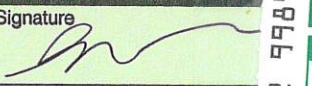
Robert P. Murro Jr.
 Ridgefield Lane
 Lake Worth, FL 33467

PS Form 3811, July 2020 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature
 
 Agent
 Addressee

B. Received by (Printed Name)

1. Article A
 Ocean River Estates LLC
 37 Meridian Road
 Edison, NJ 08820

D. Is delivery address different from item 1? Yes
 No



9590 9402 7780 2152 7581 56

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

2. Article Number (Transfer from service label)
 7020 2450 0000 8012 9989

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™
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 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

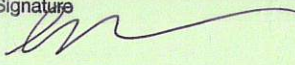

Postmark Here
 MAR 24 2023
 RED BANKS, NJ 07070

Certified Mail Fee
 \$
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage
 \$
 Total Price \$
 Sent To Ocean River Estates LLC
 37 Meridian Road
 Edison, NJ 08820

Street
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X 	
1. Article Bergen Single Family Homes LLC 37 Meridian Road Edison, NJ 08820		B. Received by (Printed Name)	C. Date of Delivery
 9590 9402 7780 2152 7581 63		item 1? <input type="checkbox"/> Yes below: <input type="checkbox"/> No	
2. Article 7020 2450 0000 8019 2211		3. Service Type <ul style="list-style-type: none"> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery 	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™
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 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage \$ _____

Total Post: \$ _____

Sent To **Bergen Single Family Homes LLC**

Street and **37 Meridian Road**

City, State **Edison, NJ 08820**

Postmark Here **MAR 24 2023**

RED BANK, NJ 07101

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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OFFICIAL USE

7020 2450 0000 8019 2273

Certified Mail Fee
\$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage
\$ _____

Total F \$ _____

Sent To **Gjon Chota & Vera & Michael Popovic**
6 Moore Road ✓
Bronxville, NY 10708

Street: _____
 City, State, ZIP: _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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OFFICIAL USE

7022 2410 0003 5254 5677

Certified Mail Fee
\$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage
\$ _____

Total Postage \$ _____

Sent To **Mingwei Li**
10 Thoresen Road ✓
Warren, NJ 07059

Street and Apt: _____
 City, State, ZIP: _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to
Joanne Kalaka
 1184 Ocean Avenue, Unit B-1
 Sea Bright, NJ 07760

7022 2410 0003 5254 6124

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X J A J S C I 9

B. Received by (Printed Name)

D. Is delivery address different from item label? If YES, enter delivery address below

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Certified Mail Restricted Delivery with Signature Restricted Delivery
 Insured Mail (over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

U.S. Postal Service™
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 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage **Joanne Kalaka**

Total Postage \$ **1184 Ocean Avenue, Unit B-1**
Sea Bright, NJ 07760

Sent To _____

Street and Apt _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to
Kalaka Realty
 1184 Ocean Avenue, Unit B-1
 Sea Bright, NJ 07760

7022 2410 0003 5254 6117

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X J A J S C I 9

B. Received by (Printed Name)

D. Is delivery address different from item label? If YES, enter delivery address below

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

U.S. Postal Service™
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 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage **Kalaka Realty**

Total Postage \$ **1184 Ocean Avenue, Unit B-1**
Sea Bright, NJ 07760

Sent To _____

Street _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage **SBBP LLC**

Total Postage \$ **95 Avenue of Two Rivers**
Rumson, NJ 07760

Sent To _____

Street and Apt _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>cm</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>														
<p>1. Article Addressed to: Borough of Sea Bright 1099 Ocean Avenue Sea Bright, NJ 07760</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>														
 9590 9402 7780 2152 7581 49	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™														
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														
<input type="checkbox"/> Collect on Delivery Restricted Delivery															
<input type="checkbox"/> Insured Mail															
<p>2. Article <i>combine label</i> 7022 2410 0003 5254 5653</p>	<p>ted Delivery</p>														

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

7022 2410 0003 5254 5653

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage \$ _____

Total Postage \$ **1099**

Sent To **Borough of Sea Bright**

Street and A **1099 Ocean Avenue**

City, State, Z **Sea Bright, NJ 07760**

Postmark Here

MAR 24 2022

RED BANK, NJ 07001

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions