

CITY OF ASBURY PARK
ONE MUNICIPAL PLAZA
ASBURY PARK, NEW JERSEY 07712

PHONE: (732) 775-2100
WWW.CITYOFASBURY PARK.COM



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AMY QUINN, DEPUTY MAYOR
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LISA ESPOSITO, RMC, CITY CLERK

Today's Date _____ (FAX ONLY TO: 732-502-9658)

LIEN REDEMPTION REQUEST

Block #: _____, Lot #: _____, Qual #: _____

Property Location: _____

Tax Sale Certificate #: _____

I _____ hereby request redemption figures on the lien referenced above. I certify that I am the OWNER or qualified party of interest with the legal authority to remit redemption.

Please calculate figures through _____ . <PAYMENT DATE

Date must be at least 2 business days from the request date

I understand that all payments must be in the form of CASH, CERTIFIED/BANK CHECK or MONEY ORDER.

Signature _____

Printed Name _____

(Owner?)

Legal Interest in property?

Please provide proof of interest in property with this form

CONTACT INFO:

Phone: _____ Fax: _____

Email: _____

Please complete the entire form and supply a copy of photo ID

Last Updated: 1/10/23