

1 PROPERTY INFORMATION
 Municipality: _____ County: _____
 Block: _____ Lot: _____ Qualification: _____ Acct. #: _____
 Property Location: _____
 Owner Name: _____
 Owner Mailing Address: _____

2 MORTGAGEE INFORMATION
 Name: _____
 Address: _____
 Contact: _____ Phone #: _____
 Bank Code # _____ Loan Number: _____

3 SERVICING ORGANIZATION INFORMATION
 Name: _____
 Address: _____
 Contact: _____ Phone #: _____
 Bank Code # _____ Loan Number: _____

4 SEND DUPLICATE TAX BILL? Yes: Fee Enclosed \$ _____

TAX BILL INSTRUCTIONS

5 OWNER AUTHORIZATION *(Do not use for mortgage purchase)*

This form is to serve as authorization to indicate on the municipality's tax collection records that all current and future tax bills on the property described above are to be forwarded to the mortgagee or its designee noted herein unless otherwise indicated. This authorization is assignable in the event the mortgagee or servicing organization sells, assigns or transfers the servicing of the mortgage loan to another mortgagee or servicing organization, pursuant to P.L. 1990, c. 69 and N.J.A.C. 5:33-4.1 et seq.

Owner's Signature: _____
 Type Name: _____ Date: _____

Owner's Signature: _____
 Type Name: _____ Date: _____

6 SELECTION OF ALTERNATE TAX BILL RECIPIENT
 (Tax bill will be sent to the mortgagee unless this section is completed)

Until further written notice from the undersigned, the mortgagee hereby authorizes the tax collector to send all current and future tax bills for the property described above to the following organization:

Servicing Organization (#3 above):

Tax Processor: (fill in the following)
 Name: _____
 Address: _____
 Contact: _____ Phone #: _____
 Bank Code #: _____ Loan Number: _____

Mortgagee's Authorization:
 Signature: _____
 Name: _____
 Title: _____

7 FORECLOSURE NOTICE REQUEST
 (pursuant to N.J.S.A. 54:5-104.48)

This form is to serve as notice that the undersigned mortgagee requests notice of foreclosure in the event of In Rem tax foreclosure proceedings on the above listed property.

Signature of mortgagee representative *Date*

Typed Name and Title: _____

8 ACKNOWLEDGEMENT BY COLLECTOR

Date: _____

Tax Collector: _____

Municipality: _____

9 This form prepared on (date) _____, by (name), _____, for (company), _____ at (phone) _____.