

**Township of Wall**  
Land Use Department

**APPLICATION FOR CERTIFIED LIST**

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Date: \_\_\_\_\_

1) Property Description:

Block \_\_\_\_\_, Lot(s) \_\_\_\_\_

Block \_\_\_\_\_, Lot(s) \_\_\_\_\_

Block \_\_\_\_\_, Lot(s) \_\_\_\_\_

Block \_\_\_\_\_, Lot(s) \_\_\_\_\_

Block \_\_\_\_\_, Lot(s) \_\_\_\_\_

Block \_\_\_\_\_, Lot(s) \_\_\_\_\_

2) Person to receive list:

Name \_\_\_\_\_

Email Address \_\_\_\_\_

3) Mailing Address: ***Complete only if you prefer to have a hard copy mailed instead of an emailed copy.***

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Zip Code \_\_\_\_\_

4) Applicant/Agent Signature \_\_\_\_\_

**Application fee of \$10.00 must be submitted with this form.**

If the property is not located within Wall Township, please obtain a current tax map sheet depicting the property from the municipality in which the property is located and submit it with this form.