



## Passaic County Document Summary Sheet



PASSAIC COUNTY CLERK GRAND STREET ROOM 113 PATERSON NJ 07501	Return Name and Address
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Official Use Only	Submitting Company			
	Document Type			
	Document Date <i>(mm/dd/yyyy)</i>			
	No. of Pages of the Original Signed Document <i>(Including the cover sheet)</i>			
	Consideration Amount <i>(If applicable)</i>			

<b>First Party</b> <i>(Grantor or Mortgagor or Assignor)</i> <i>(Enter up to five names)</i>	<b>Name(s)</b> <i>(Last Name First Name Middle Initial Suffix)</i> <i>(or Company Name as written)</i>	<b>Address (Optional)</b>

<b>Second Party</b> <i>(Grantee or Mortgagee or Assignee)</i> <i>(Enter up to five names)</i>	<b>Name(s)</b> <i>(Last Name First Name Middle Initial Suffix)</i> <i>(or Company Name as written)</i>	<b>Address (Optional)</b>

<b>Parcel Information</b> <i>(Enter up to three entries)</i>	Municipality	Block	Lot	Qualifier	Property Address

<b>Reference Information</b> <i>(Enter up to three entries)</i>	Book Type	Book	Beginning Page	Instrument No.	Recorded/File Date

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