

BREAKDOWN OF ADDED, OMITTED & ROLLBACK TAXES

13 EDGEWATER

02 BERGEN

	ASSESSED VALUATIONS	TOTAL AMOUNT OF TAXES	TAXES DUE COUNTY	TAXES DUE CTY LIBRARY	TAXES DUE CTY HEALTH	TAXES DUE CTY OPEN SP	TOTAL TAXES DUE COUNTY
2010 OMIT ASSMT	0	.00	.00	.00	.00	.00	.00
2011 OMIT ASSMT	0	.00	.00	.00	.00	.00	.00
2012 OMIT ASSMT	0	.00	.00	.00	.00	.00	.00
2013 OMIT ASSMT	0	.00	.00	.00	.00	.00	.00
2014 OMIT ASSMT	0	.00	.00	.00	.00	.00	.00
2010 RLBK ASSMT	0	.00	.00	.00	.00	.00	.00
2011 RLBK ASSMT	0	.00	.00	.00	.00	.00	.00
2012 RLBK ASSMT	0	.00	.00	.00	.00	.00	.00
2013 RLBK ASSMT	0	.00	.00	.00	.00	.00	.00
2014 RLBK ASSMT	0	.00	.00	.00	.00	.00	.00
2013 ADDED ASSMT	0	.00	.00	.00	.00	.00	.00
2014 ADDED ASSMT	0	.00	.00	.00	.00	.00	.00
2013 OM/AD ASSMT	0	.00	.00	.00	.00	.00	.00
** TOTAL **	0	.00	.00	.00	.00	.00	.00

I, -----, ASSESSOR OF EDGEWATER
DO SWEAR (OR AFFIRM) THAT THE FOREGOING LIST CONTAINS THE VALUATIONS MADE
BY ME, TO THE BEST OF MY ABILITY, OF ALL THE PROPERTY LIABLE TO TAXATION
IN THE TAXING DISTRICT IN WHICH I AM THE ASSESSOR AND THAT I HAVE VALUED
THE SAME, WITHOUT FAVOR OR PARTIALITY, AND HAVE MADE SUCH DEDUCTIONS ONLY
FOR DEBT AND EXEMPTIONS AS ARE PRESCRIBED BY LAW.

ASSESSOR

SWORN AND SUBSCRIBED BEFORE ME THIS ____ DAY OF _____,

COUNTY TAX ADMINISTRATOR

THIS IS TO CERTIFY THAT THE ABOVE ADDED AND OMITTED
LISTS ARE A TRUE AND COMPLETE RECORD OF THE ADDED
AND OMITTED TAXES ASSESSED FOR THE YEAR _____ IN THE
TAXING DISTRICT OF EDGEWATER
IN THE COUNTY OF BERGEN

COMMISSIONER

COMMISSIONER

COMMISSIONER

COMMISSIONER

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BREAKDOWN OF ADDED, OMITTED & ROLLBACK TAXES

	13	EDGEWATER		02	BERGEN
	ASSESSED	TOTAL AMOUNT	TOTAL TAXES	TAXES DUE	TAXES DUE
	VALUATIONS	OF TAXES	DUE COUNTY	MUN OPEN SP	MUN LIBRARY
					BALANCE DUE
					DISTRICT
2010 OMIT-ASSMT	0	.00	.00	.00	.00
2011 OMIT-ASSMT	0	.00	.00	.00	.00
2012 OMIT-ASSMT	0	.00	.00	.00	.00
2013 OMIT-ASSMT	0	.00	.00	.00	.00
2014 OMIT-ASSMT	0	.00	.00	.00	.00
2010 RLBK ASSMT	0	.00	.00	.00	.00
2011 RLBK ASSMT	0	.00	.00	.00	.00
2012 RLBK ASSMT	0	.00	.00	.00	.00
2013 RLBK ASSMT	0	.00	.00	.00	.00
2014 RLBK ASSMT	0	.00	.00	.00	.00
2013 ADDED ASSMT	0	.00	.00	.00	.00
2014 ADDED ASSMT	0	.00	.00	.00	.00
2013 OM/AD ASSMT	0	.00	.00	.00	.00
** TOTAL **	0	.00	.00	.00	.00

I, -----, ASSESSOR OF EDGEWATER
DO SWEAR (OR AFFIRM) THAT THE FOREGOING LIST CONTAINS THE VALUATIONS MADE
BY ME, TO THE BEST OF MY ABILITY, OF ALL THE PROPERTY LIABLE TO TAXATION
IN THE TAXING DISTRICT IN WHICH I AM THE ASSESSOR AND THAT I HAVE VALUED
THE SAME, WITHOUT FAVOR OR PARTIALITY, AND HAVE MADE SUCH DEDUCTIONS ONLY
FOR DEBT AND EXEMPTIONS AS ARE PRESCRIBED BY LAW.

ASSESSOR

SWORN AND SUBSCRIBED BEFORE ME THIS ____ DAY OF _____,

THIS IS TO CERTIFY THAT THE ABOVE ADDED AND OMITTED
LISTS ARE A TRUE AND COMPLETE RECORD OF THE ADDED
AND OMITTED TAXES ASSESSED FOR THE YEAR _____ IN THE
TAXING DISTRICT OF EDGEWATER
IN THE COUNTY OF BERGEN

COMMISSIONER

COMMISSIONER

COMMISSIONER

COMMISSIONER

COMMISSIONER

COMMISSIONER

TABLE OF AGGREGATES, ADDED ASSESSMENTS

		SUMMARY OF ADDED ASSESSMENTS AND APPORTIONMENT OF TAXES		
			2013	2014
I, (WE,) _____		ADDED ASSESSED VALUATION OF LAND		
_____		ADDED ASSESSED VALUATION OF BUILDINGS		
_____	ASSESSOR(S)	TOTAL VALUE OF ADDED ASSESSMENTS		
OF _____	DO SWEAR (OR AFFIRM)	TOTAL VALUE OF PRORATED ASSESSMENTS		
THAT THE FOREGOING LIST CONTAINS THE VALUATIONS MADE BY ME (US),		REAL PROP TAX RATE PER \$100 VALUATION	\$1.626	\$1.701
TO THE BEST OF MY (OUR) ABILITY, OF ALL THE PROPERTY LIABLE TO		TOTAL TAXES ON ADDED ASSESSMENTS	\$.00	\$.00
TAXATION IN THE TAXING DISTRICT IN WHICH I AM (WE ARE) THE		VETERANS & SENIOR CITIZEN DEDUCTIONS	\$.00	\$.00
ASSESSOR(S) AND THAT I (WE) HAVE VALUED THE SAME, WITHOUT FAVOR		NET TAXES ON ADDED ASSESSMENTS	\$.00	\$.00
OR PARTIALITY, AND HAVE MADE SUCH DEDUCTIONS ONLY FOR DEBT AND				
EXEMPTIONS AS ARE PRESCRIBED BY LAW.		AMOUNT DUE COUNTY, FEB. 15, 2015 AT:		
_____		COUNTY RATE: 2013 \$.267 PER \$100	\$.00	\$.00
_____		2014 \$.262 PER \$100	\$.00	\$.00
_____		CTY LIBRARY RATE: 2013 \$.000 PER \$100	\$.00	\$.00
_____		2014 \$.000 PER \$100	\$.00	\$.00
_____		CTY HEALTH RATE: 2013 \$.000 PER \$100	\$.00	\$.00
_____		2014 \$.000 PER \$100	\$.00	\$.00
_____		CTY OPEN SP RATE: 2013 \$.003 PER \$100	\$.00	\$.00
_____		2014 \$.003 PER \$100	\$.00	\$.00
_____		MUN OPEN SP RATE: 2013 \$.000 PER \$100	\$.00	\$.00
_____		2014 \$.000 PER \$100	\$.00	\$.00
_____		MUN LIBRARY RATE: 2013 \$.037 PER \$100	\$.00	\$.00
_____		2014 \$.036 PER \$100	\$.00	\$.00
	ASSESSOR(S)	TOTAL DUE COUNTY	\$.00	\$.00
		TOTAL DUE MUNICIPALITY	\$.00	\$.00

SWORN AND SUBSCRIBED BEFORE ME, THIS _____		THIS IS TO CERTIFY THAT THE FOREGOING ADDED ASSESSMENTS LIST		
DAY OF _____, 20____.		IS A TRUE AND COMPLETE RECORD OF THE ADDED TAXES ASSESSED FOR THE		
_____		YEAR 2014, IN THE TAXING DISTRICT OF EDGEWATER ,		
		COUNTY OF BERGEN ,		
		ATTEST:		
		_____ PRESIDENT		
		_____ COUNTY TAX ADMINISTRATOR		