



# SALEM COUNTY CLERK'S DOCUMENT SUMMARY SHEET

All information is to be typed or legibly Printed

Salem County Clerk's Office  
Dale A. Cross, Clerk  
110 Fifth Street, Suite 200  
Salem, NJ 08079-1073  
856-935-7510 | salemcountyclerk.org

Return Name and Address:

*FOR OFFICIAL USE*

Submitting Company	
Document Date (mm/dd/yyyy)	
Document Type	
No. of pages of the original Signed Document (include the Document Summary Sheet)	
Consideration Amount (if applicable)	

<b>First Party</b> (Grantor or Mortgagor or Assignor or Defendants) (Enter up to five names)	<b>Name (s)</b> (Last Name First Name M.I. Suffix) (Company Name as written)	<b>Address</b> (Required for Deeds)

<b>Second Party</b> (Grantee or Mortgagee or Assignee or Plaintiff) (Enter up to five names)	<b>Name (s)</b> (Last Name First Name M.I. Suffix) (Company Name as written)	<b>Address</b> (Required for Deeds)

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

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

**\*\*\*DO NOT DISCARD THIS PAGE\*\*\***

*THIS COVER SHEET [DOCUMENT SUMMARY] IS A PERMANENT PART  
OF THE SALEM COUNTY, NJ RECORDING DOCUMENT*

\*\*\* Disclaimer: This Sheet was Prepared by the Submitter\*\*\*