From: Patti Chacker
To: Danielle Gyenge
Subject: FW: OPRA request - 101 Cooper Landing Road, Block 348.01 / Lot 2
Date: Thursday, December 2, 2021 8:38:47 AM

-----Original Message-----
From: Joseph Martella <opra+request-27349-d092c9db@requests.opramachine.com>
Sent: Thursday, December 2, 2021 8:22 AM
To: Nancy L. Saffos, RMC <xxxxxxx@xxxxxxxxxx.xxx>
Subject: OPRA request - 101 Cooper Landing Road, Block 348.01 / Lot 2

Dear Cherry Hill Township,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.
Records requested:

- Open construction permits

- Any information regarding the presence of an underground oil tank, if applicable, including permits, remediation reports, environmental reports

- Survey showing underground oil tank location (if applicable)

- Information regarding the presence of a septic system (permits, drawings, survey, etc)

- Property Record Card

- Property zoning and possible uses.

-any liens against said property

-any violations against said property

-police dispatch records for said property

-owner information/address

Yours faithfully,

Joseph Martella

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
xxxxxxxxxxxxxxxxxxxxxxxxxxxx@xxxxxxxx.xxxxxxxxxxx.xxx

Is xxxxxxx@xxxxxxxxxx.xxx the wrong address for OPRA requests to Cherry Hill Township? If so, please contact us using this form:
https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fopramachine.com%2fchange_request%2fnew%3fbody%3dcherry_hill_township&c=E,1,lCo-7KWXpzr2bWtZxzoYz9IEYK4YbLw1ybeQI8PQCgHh1AaBj4LHo8frEjJsh-2Tt1URlzXZjiudIdz3CZyLZLDr7Y8a7UK76792G4bobQ,,&typo=1

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fopramachine.com%2fhelp%2fofficers&c=E,1,vgYqIAMtzJMto08IdtSvry-V58MelyDWq_d3qDo3aoRtwu7rlof6qM9QOnIJnC54zUVlgBiBGSfUwxbQbIUfrP_bfr_yN4QaQZwChR2-rnJxhJM8r2xi0dpt&typo=1

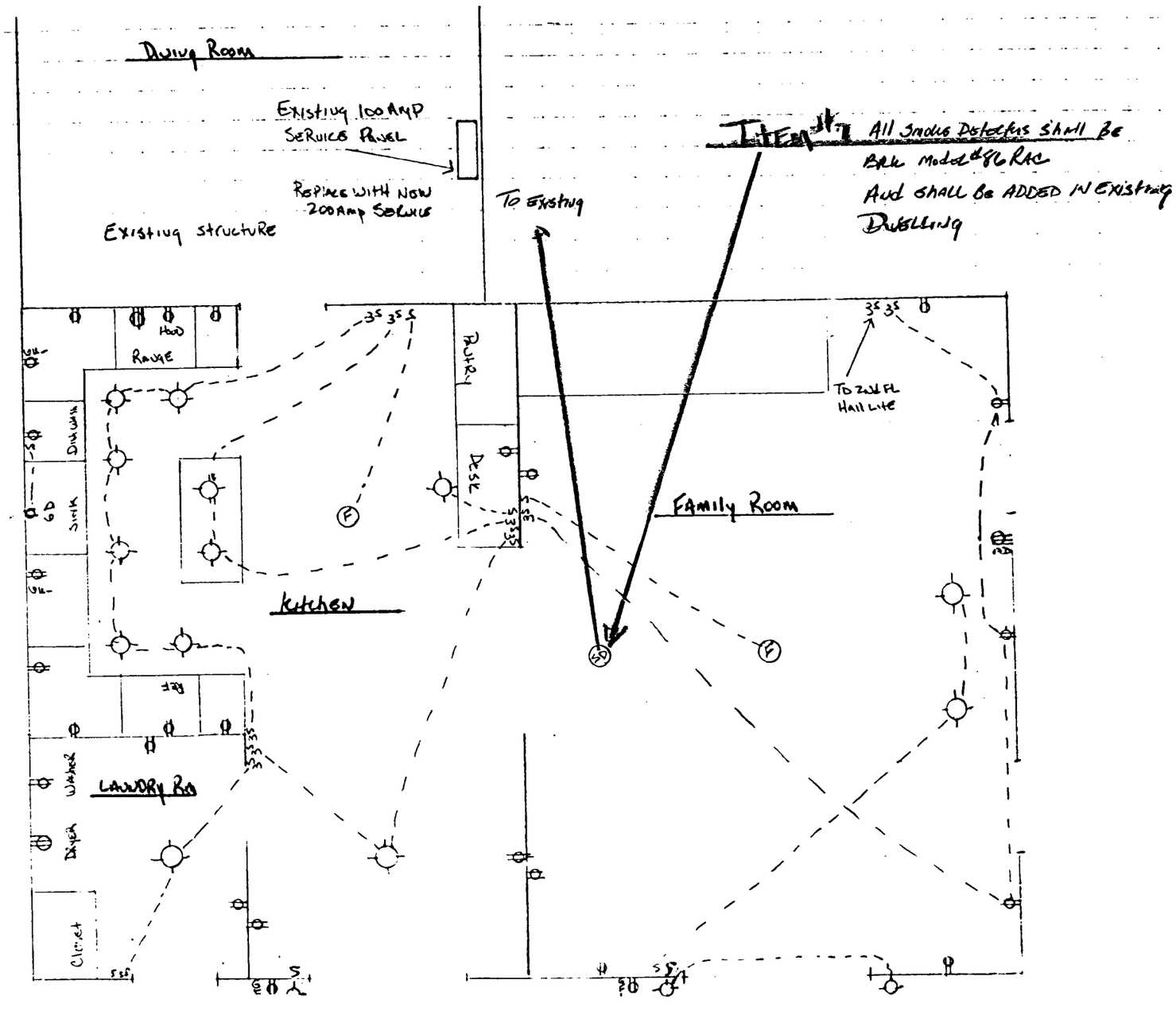
View this OPRA request & responses online:
https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fopramachine.com%2frequest%2f101_cooper_landing_road_block_34&c=E,1,M7LVhGSNJY5wQgiy84L45zwBgf9JfCu3uDnEX-tYqR5BwwoqstdbuPFSf3Pa6o14duJ61zwv9WkNKd6GGxcfBeS07owPm3v2iNBfk8NV_C9mtA,,&typo=1

Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.

C | 1

Electric 1st Floor.



Electrical Legend

S	Single Pole Switch
3s	3way Switch
	110v Receptacle
	220v 30 Amp Receptacle
AC	220v 20 Amp Air Conditioner outlet
AC	110v 20 Amp Air Conditioner Outlet
GFI	Ground Fault Interrupted Receptacle
	Light Fixture
F	Ceiling Fan
SD	110v Inter Connected Smoke Detector with Battery Back up BRK Model #86 RAC

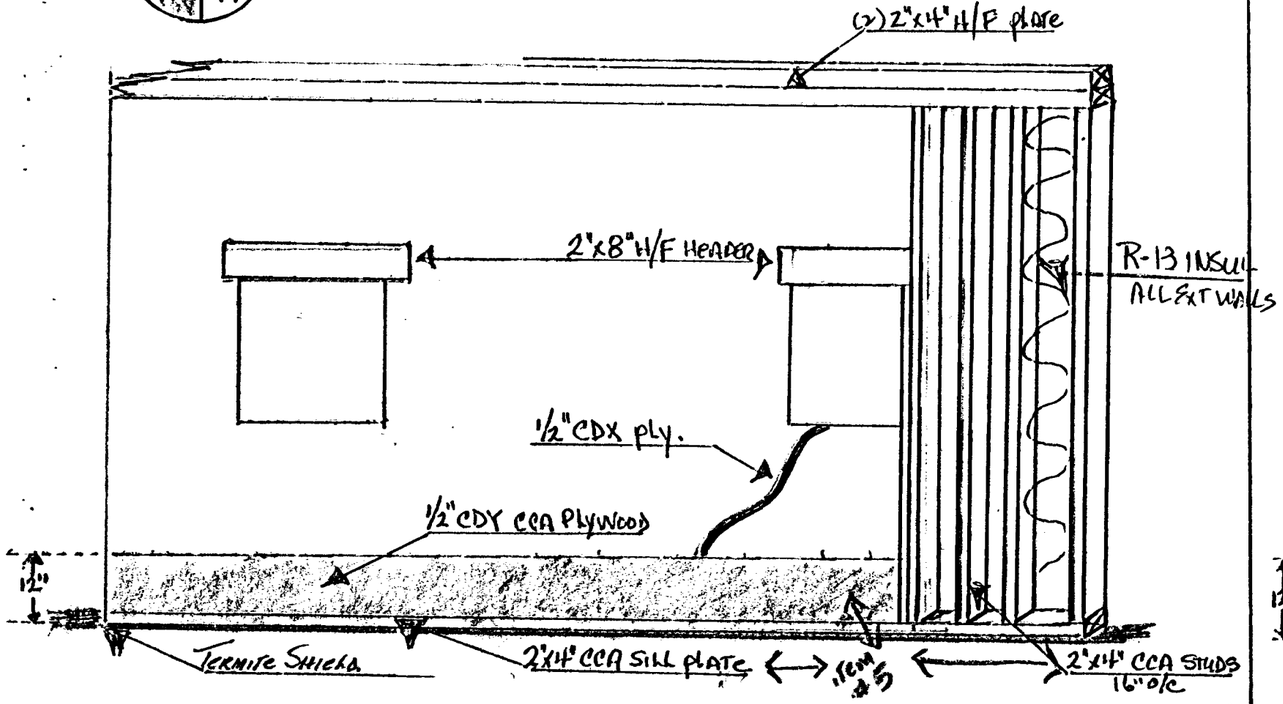
1st Fl Electric Schedule of Distribution

20A	Washer
30A 2P	Dryer
30A 2P	Range
20A	Dishwasher
20A	Garbage Disposal
20A	Refrigerator
20A	GFI Counter top Sm appliances
20A	Countertop Sm Appliances
15A	Recessed Lighting (1)
15A	Recessed Lighting (2)
15A	General Receptacle Kitchen
15A	General Receptacle Family Rm
20A 2P	220 v Air Conditioner
5A	Smoke Detector Circuit
15A	Outdoor Lighting & Receptacle

PERMIT:
LDS CH B 10513913

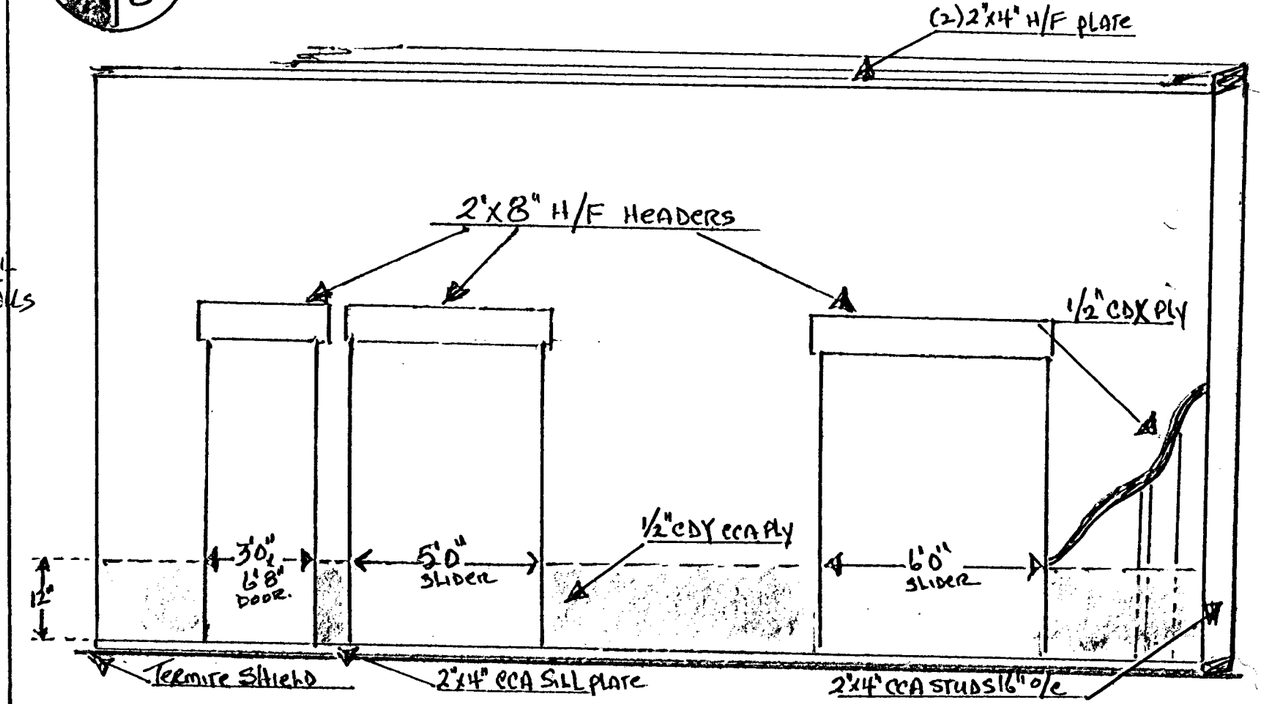
A 1 A

W. SIDE ELEVATION



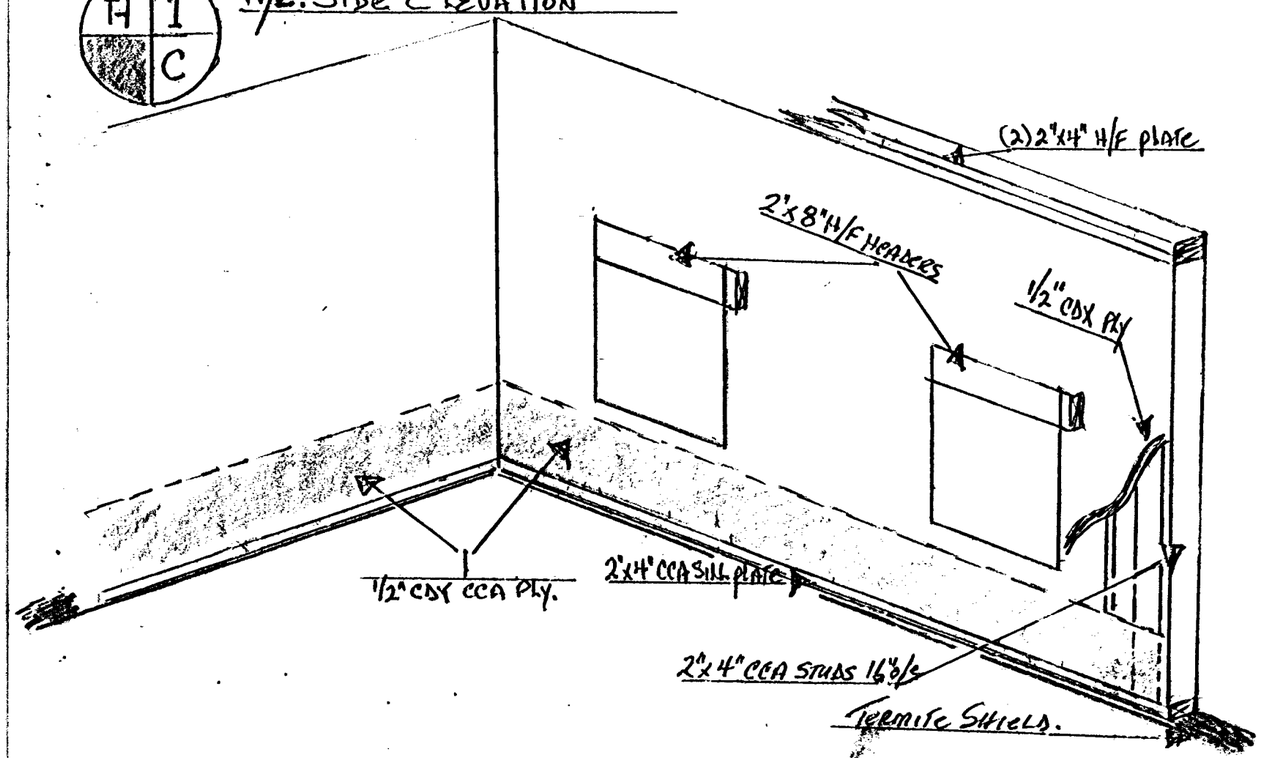
A 1 B

50. REAR ELEVATION.

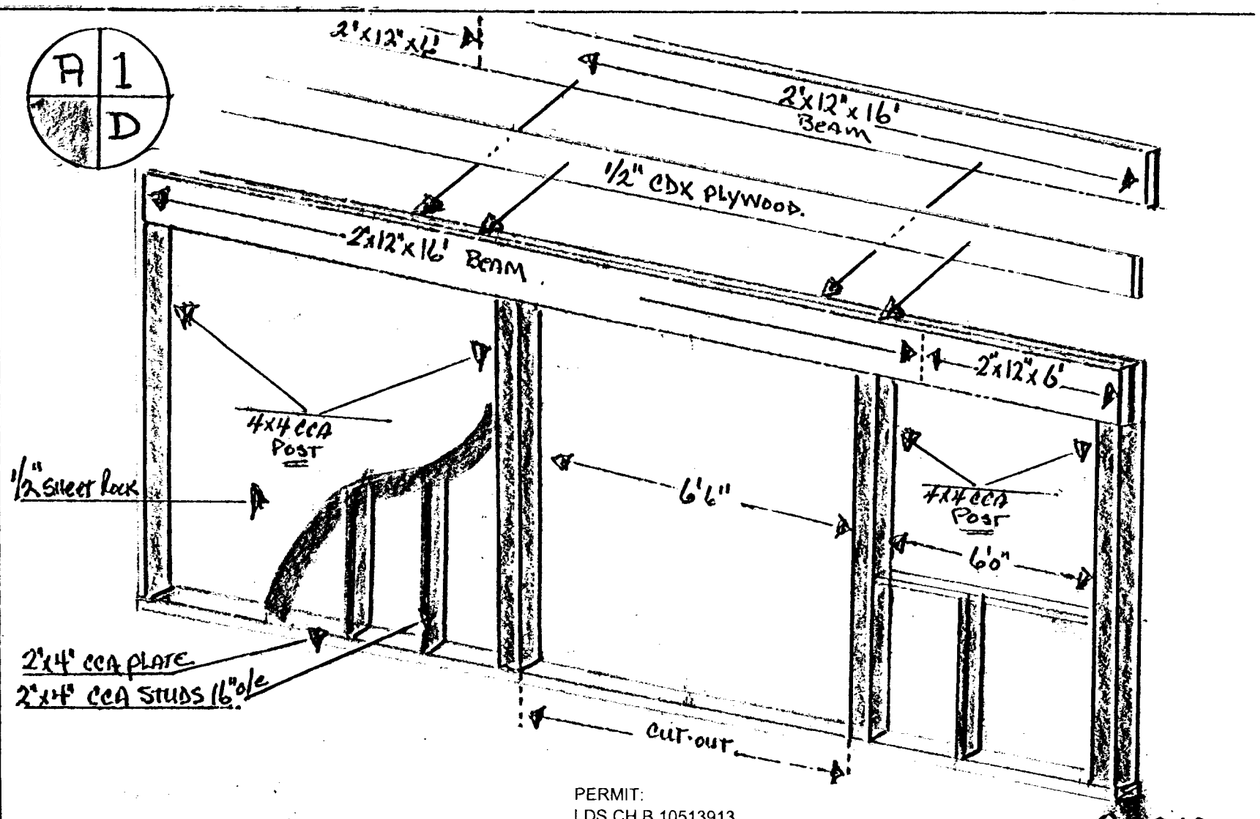


A 1 C

N/E. SIDE ELEVATION



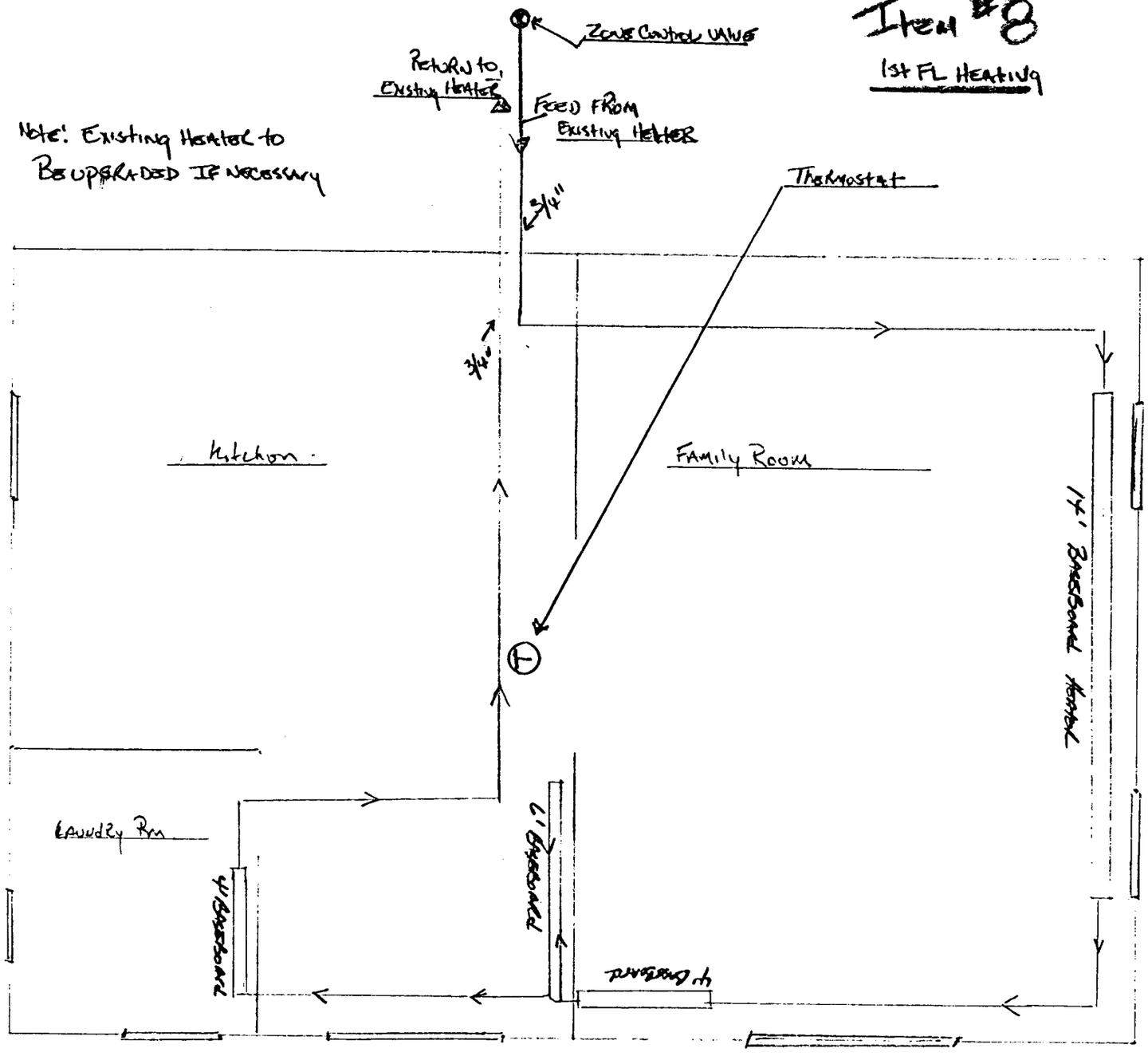
A 1 D



PERMIT:
LDS CH B 10513913

Item #8

1st FL Heating



PERMIT:
LDS CH B 10513913

ILLUSTRATION Support Beam

A 2 D

(Delete Item #1) * (ADD 4x12 LAMB)

22'0"

16'0"

6'0"

1/2" CDX ply

2"x12"x6'

6'0"

2"x12"x16'

16'0"

* Item #3
ADD Double 2x10 Under 2ND Floor Partition

3/4" ULT/G Plywood.

2"x12"x22' Beam (See Illus. Above)

2"x10" Floor Joist x 18' / 16" o/c

Metal Cross Bracing

2'x10" Floor Joist x 18' / 16" o/c

R19 Insulation

(4) - 4"x4" CCA Posts

15'8"

15'8"

32'0"

22'0"

PERMIT:
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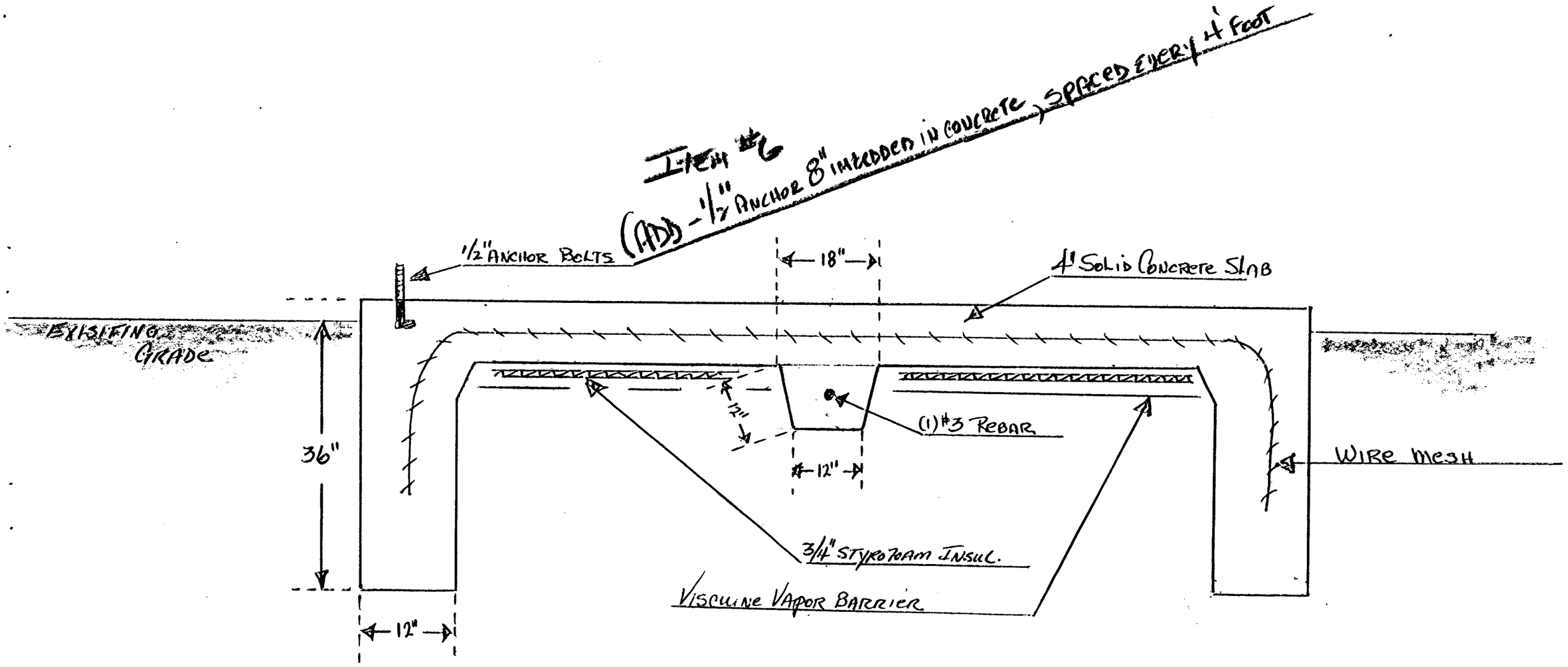
3 OF 12

E 2

ITEM #6



PERMIT:
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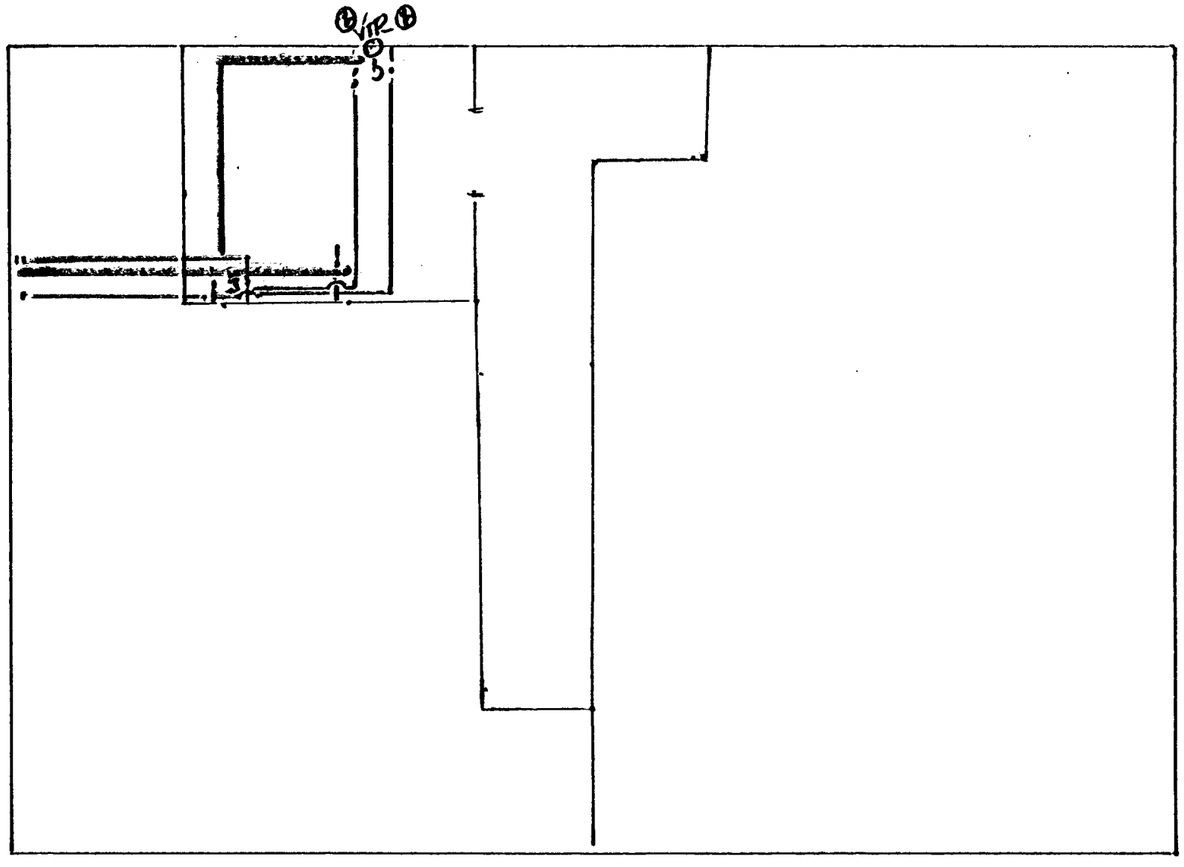
D | 2

Plumbing 2nd Floor

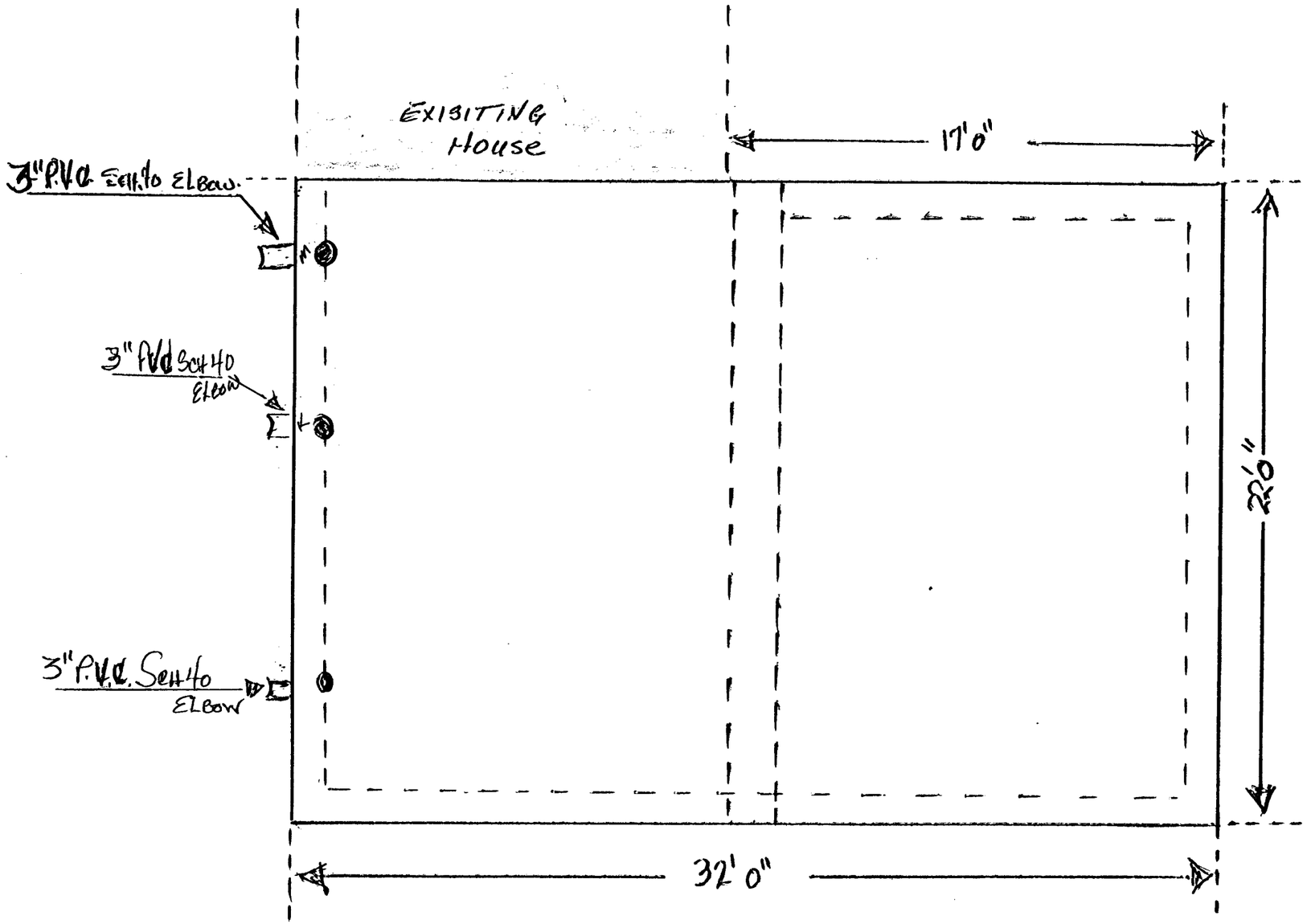


PERMIT:
LDS CH B 10513913

E | 1

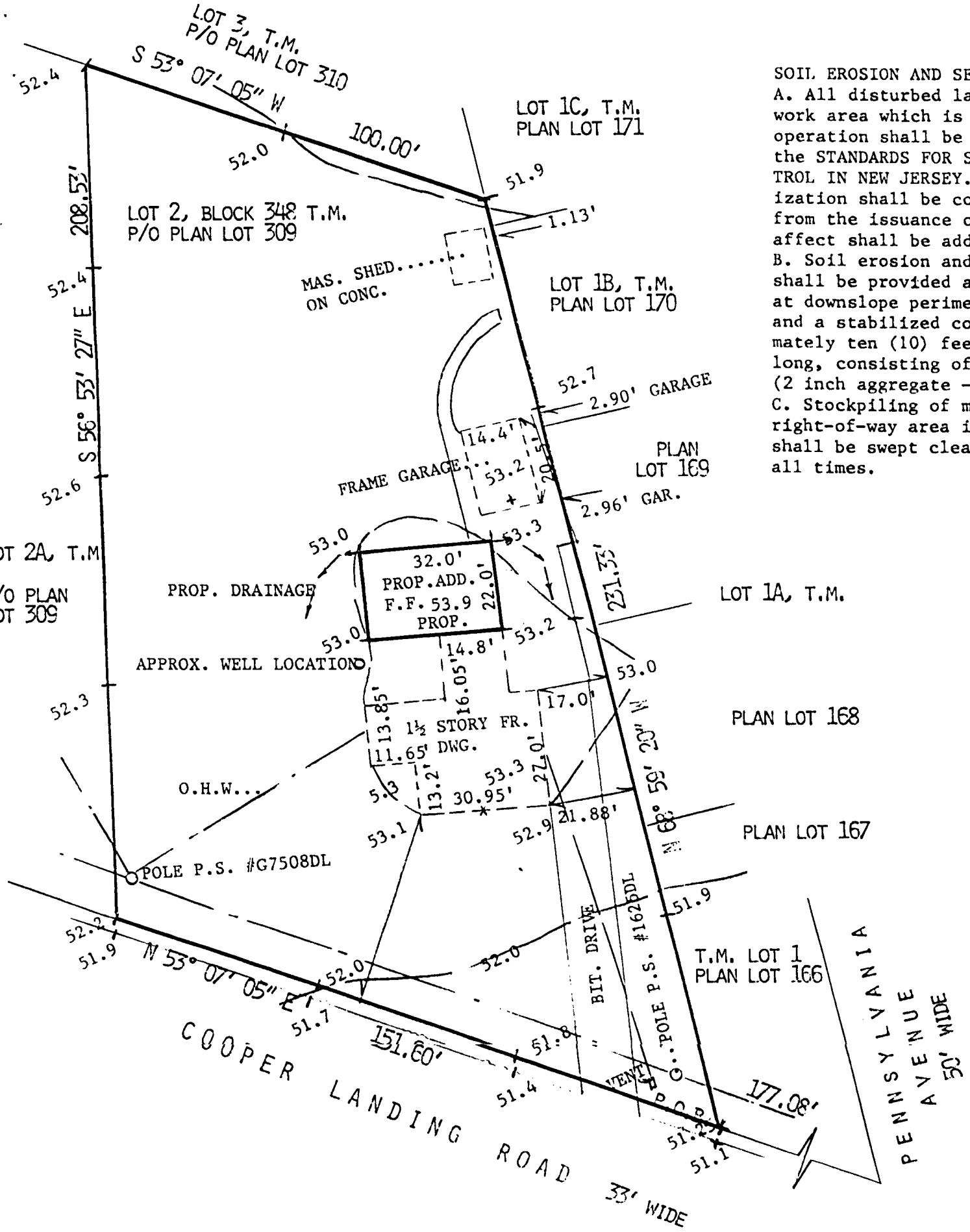
FOUNDATION - (CONCRETE SLAB)

1/4" = 1FT



PERMIT:
LDS CH B 10513913

NOTE: UNDER AND SUBJECT TO ALL CONDITIONS, RESTRICTIONS AND EASEMENTS OF RECORD, WHERE APPLICABLE. MERIDIAN - PLAN BASE
DESCRIPTION: BEING KNOWN AND DESIGNATED AS PART OF LOT 309, PLAN OF TRACT #2, MARLTON PIKE MANOR; A/K/A LOT 2, BLOCK 348 ON THE OFFICIAL TAX MAP; AREA = 24,650.3± S.F.
VERTICAL DATUM USED IS NGVD 1929;



SOIL EROSION AND SEDIMENT CONTROL:
A. All disturbed land within or adjacent to the work area which is the result of the contractor's operation shall be stabilized in accordance with the STANDARDS FOR SOIL EROSION AND SEDIMENT CONTROL IN NEW JERSEY. All grading and soil stabilization shall be completed within thirty (30) days from the issuance of the permit; A note to this affect shall be added to the plan.
B. Soil erosion and sediment control measures shall be provided and shall include silt fences at downslope perimeters of the disturbed area and a stabilized constructions entrance, approximately ten (10) feet wide and twenty (20) feet long, consisting of a six-inch thick stone apron (2 inch aggregate - ASTM size No. 2).
C. Stockpiling of material and debris within the right-of-way area is not permitted. The roadway shall be swept clean of all earth and debris at all times.

APPROVED BY: Kim Hugg DATE: 10-17-94
CHERRY HILL DEPARTMENT OF ENGINEERING

PERMIT:
LDS CH B 10513913

TO THE OWNER: ANTHONY J. DEPIETRO, JR. & MARY T. WALSH

TO THE INSURER OF TITLE relying hereon, in consideration of the fee paid for making this survey in accordance with the description furnished in regard to this transaction only, per below date, I hereby certify to its accuracy (except such easements, if any, that may be located below the surface of lands or on the surface of lands and not visible) as an inducement for the insurer of title to insure the title to the lands and premises shown hereon.

Albert N. Floyd
ALBERT N. FLOYD, JR. P.L.S.

GRADING PLAN OF PREMISES
No. 101 COOPER LANDING ROAD
SITUATE
TOWNSHIP OF CHERRY HILL
CAMDEN COUNTY, NEW JERSEY

ALBERT N. FLOYD & SON
LAND SURVEYORS
ALBERT N. FLOYD ... N.J. LIC. NO. 21759
ALBERT N. FLOYD, JR. N.J. LIC. NO. 36725
P.O. BOX 903, ELMER, NEW JERSEY 08318

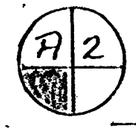
DATE	SCALE	DRAWN	CHECKED	NUMBER
10/17/94	1" = 30'	DKF	A.N.F.	941313

MR. & MRS. A. DE PIETRO
#101 COOPER LANDING ROAD.
CHERRY HILL, NEW JERSEY.
9/17/94

BLOCK 348 LOT 2

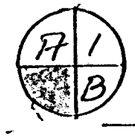
Key:

1ST FLOOR PLAN



2ND FLOOR PLAN

SIDE ELEVATION



REAR ELEVATION

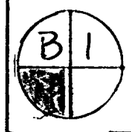
FRONT / SIDE ELEVATION

BEAM & SUPPORTS

FLOOR JOIST, BEAM, SUB-FLOOR

2ND FLOOR EXTERIOR FRAME

2ND FLOOR INTERIOR FRAME.
CEILING RAFTERS

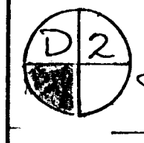


ROOF FRAME

ELECTRIC 1ST FLOOR

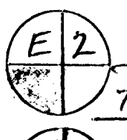
ELECTRIC 2ND FLOOR

PLUMBING 1ST FLOOR



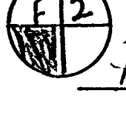
PLUMBING 2ND FLOOR

FOUNDATION



FOUNDATION

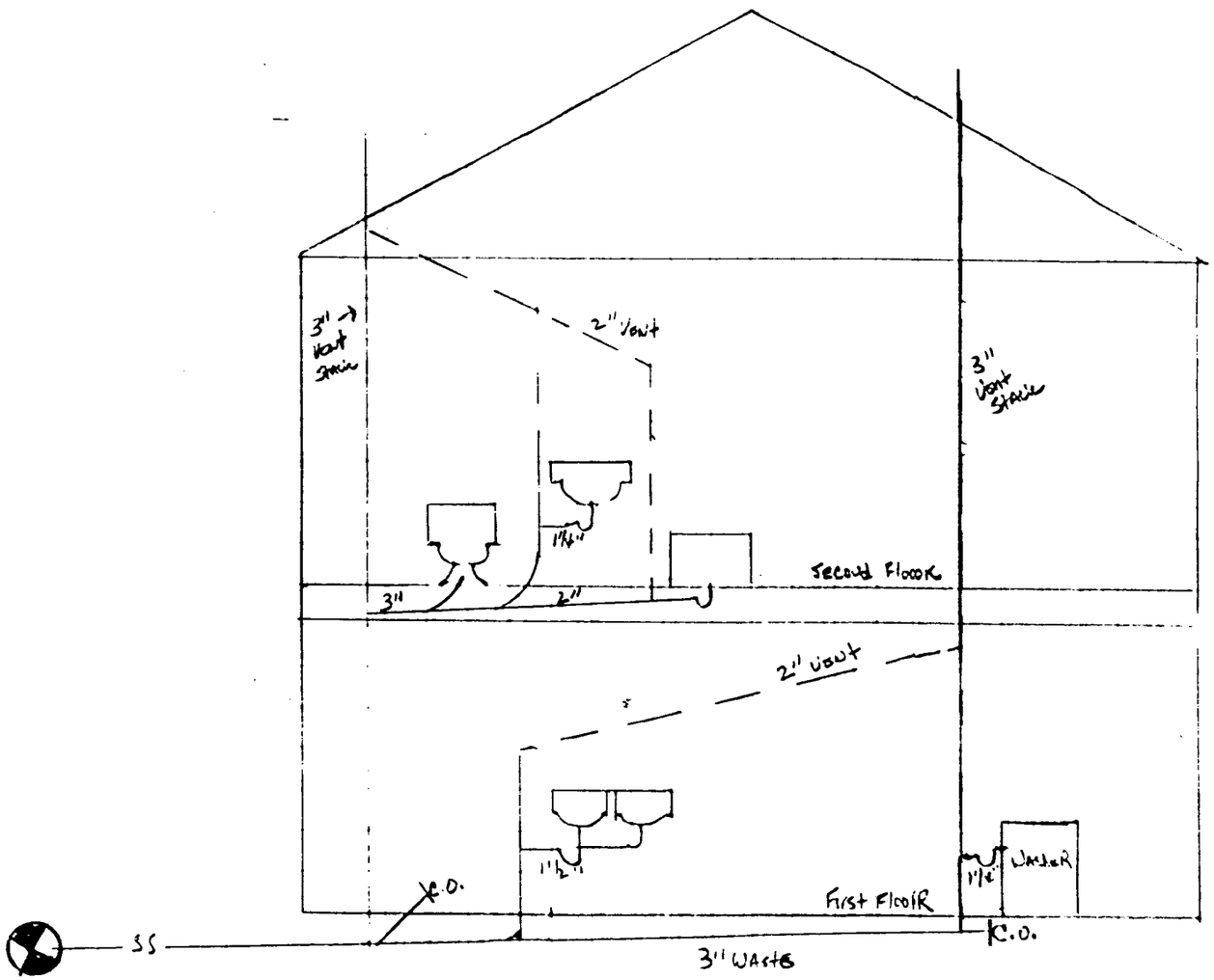
PLUMBING WATER SUPPLY RISER DIAGRAM



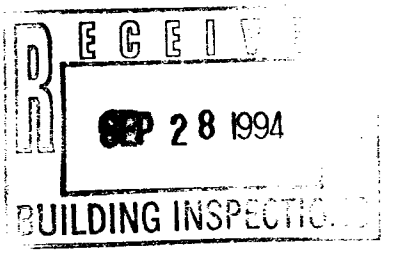
PLUMBING WASTE VENT RISER DIAGRAM

PERMIT:
LDS CH B 10513913

F 2



PERMIT:
LDS CH B 10513913



CHERRY HILL TOWNSHIP
BUILDING INSPECTIONS
PLAN REVIEW

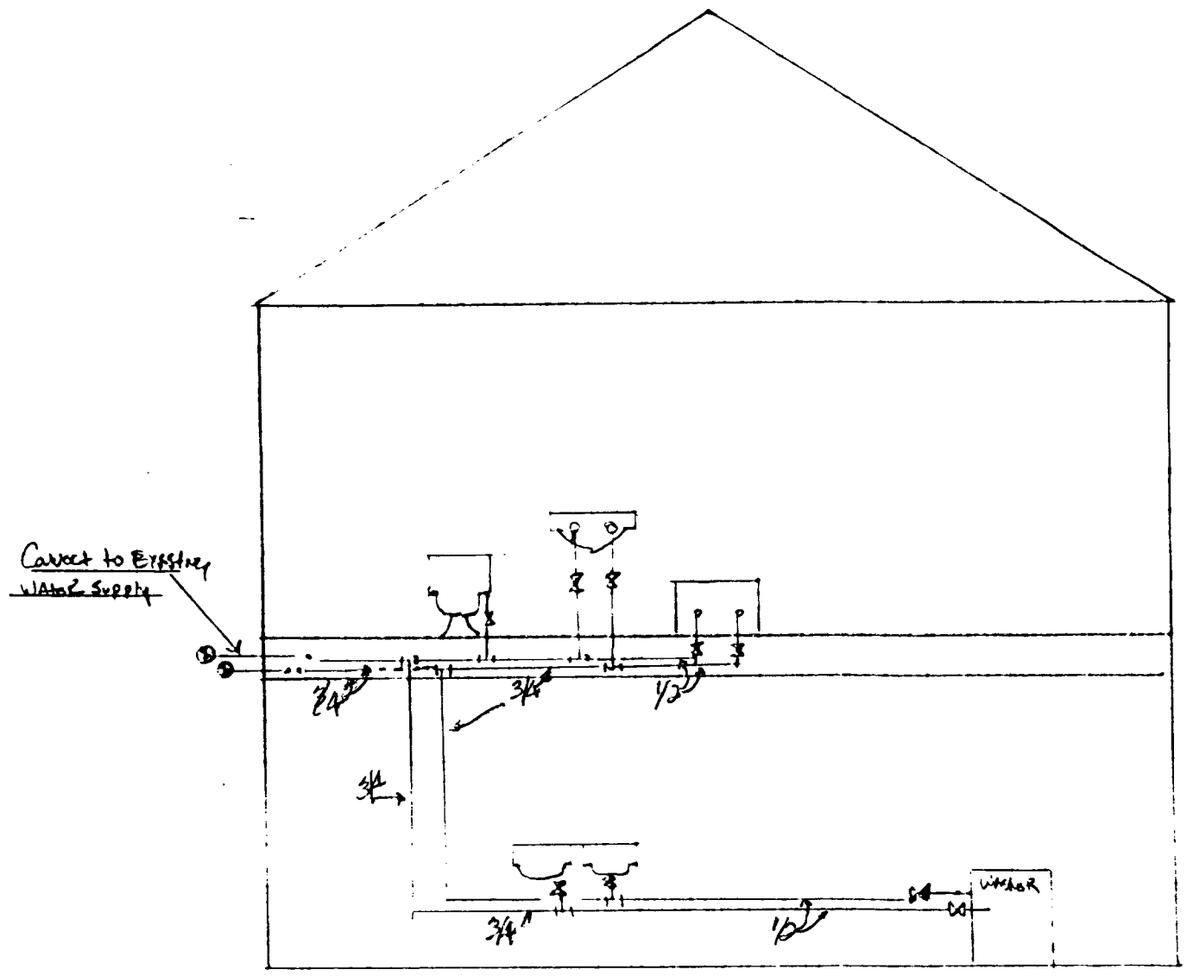
9-29-94
9/29/94

AS NOTED

JOB SITE.

Plumbing second floor bath shall not drain into first floor venting
washer shall drain into 2" drain
no more then one fixture on a ½ water supply
There shall be a backflow preventer on boiler supply

office copy



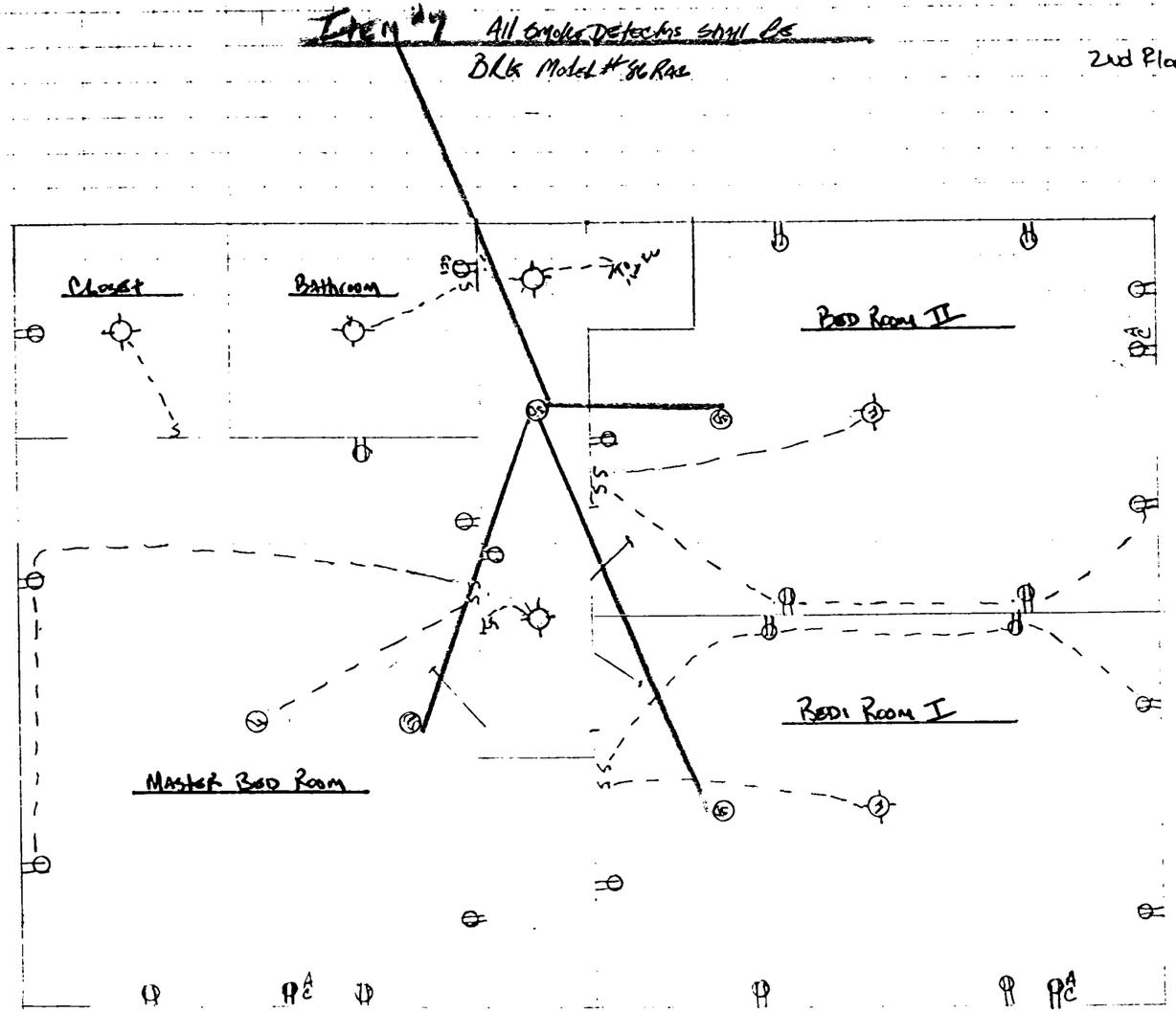
PERMIT:
LDS CH B 10513913

C | 2

ELECTRIC 2ND FLOOR

ITEM #7 All Smoke Detectors shall be BRK Model # 9G RAL

2nd Floor Electrical

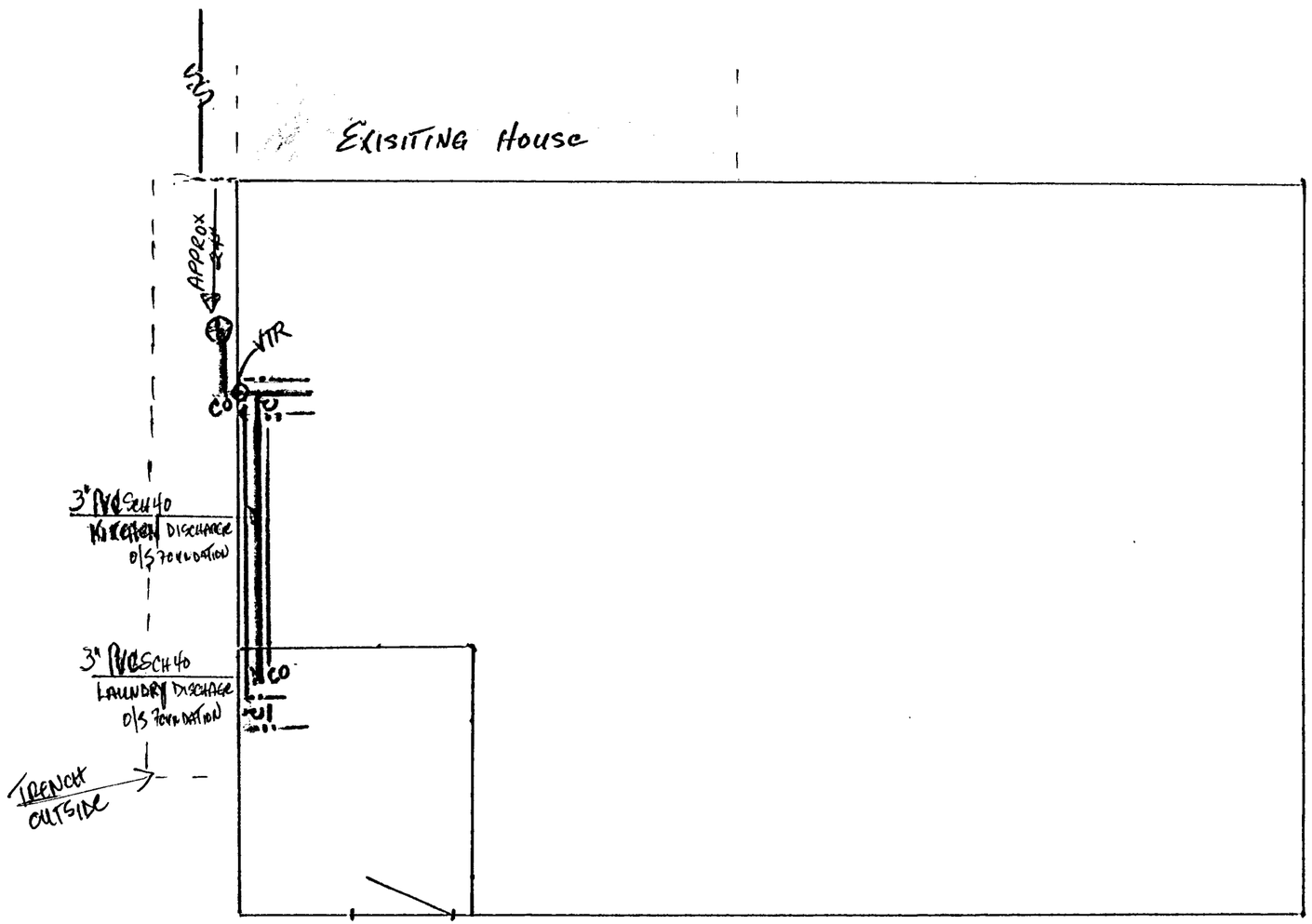


2nd Fl Electrical SCHEDULE OF DISTRIBUTION

15A	MBR Receptacles
15A	BRI Receptacles
15A	BRII Receptacles
15A	Bath Room GFI
15A	BRI + BRII Lighting
15A	MBR - Bath Lighting
20A	MBR A/C
20A	BRI A/C
20A	BRII A/C

D | 1

PLUMBING | ST FLOOR

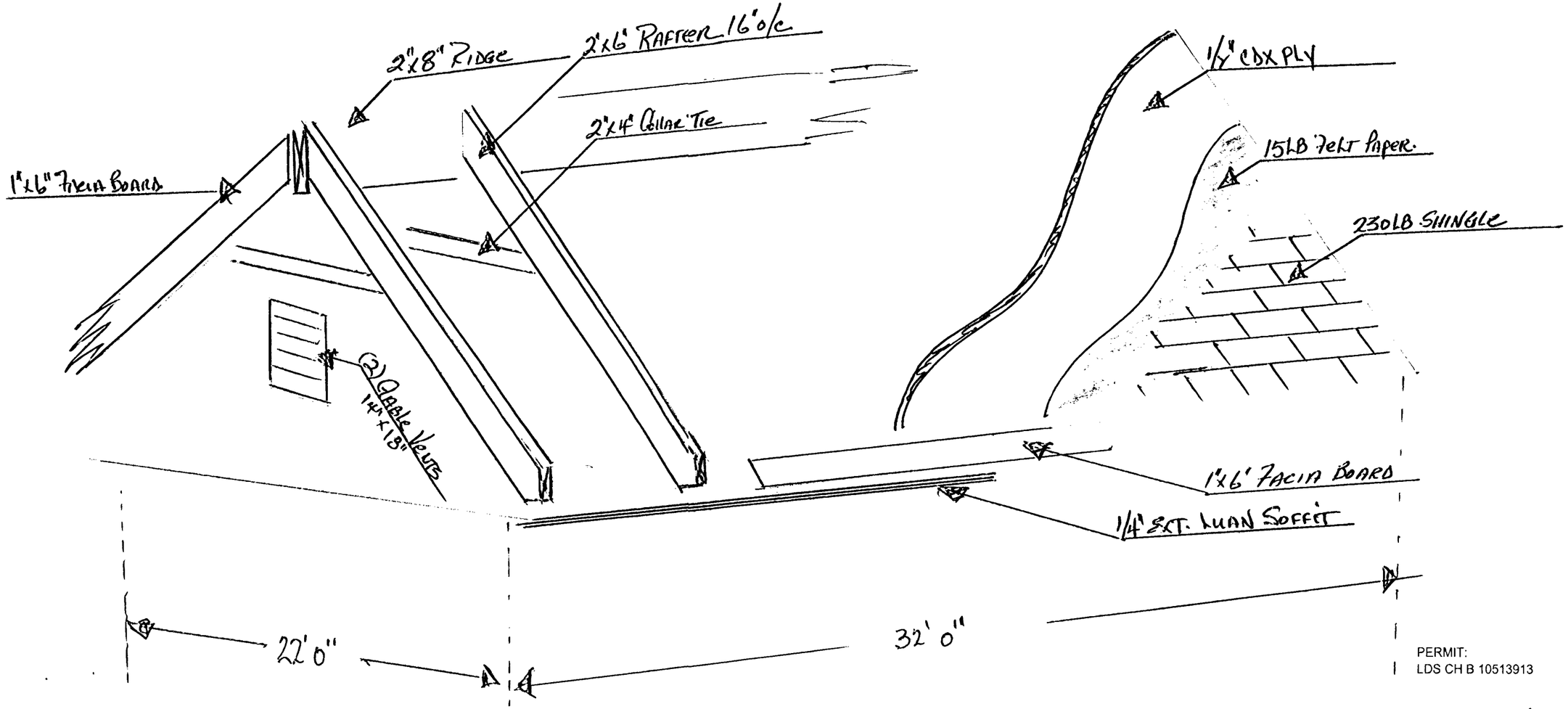


——SS——	EXISITING SANITARY SEWER LINE
————	NEW SANITARY SEWER LINE - CONNECT TO EXISITING MAIN.
—— · ——	COLD WATER LINE - PROVIDE SHUTOFF VALVE @ EACH FIXTURE
—— ·· ——	HOT WATER LINE - PROVIDE SHUTOFF VALVE @ EACH FIXTURE
V.T.R	NEW VENT THRU ROOF
CO	CLEAN OUT
U	TRAP.
1	CONNECT TO EXISITING

PERMIT:
LDS CH B 10513913

B 1

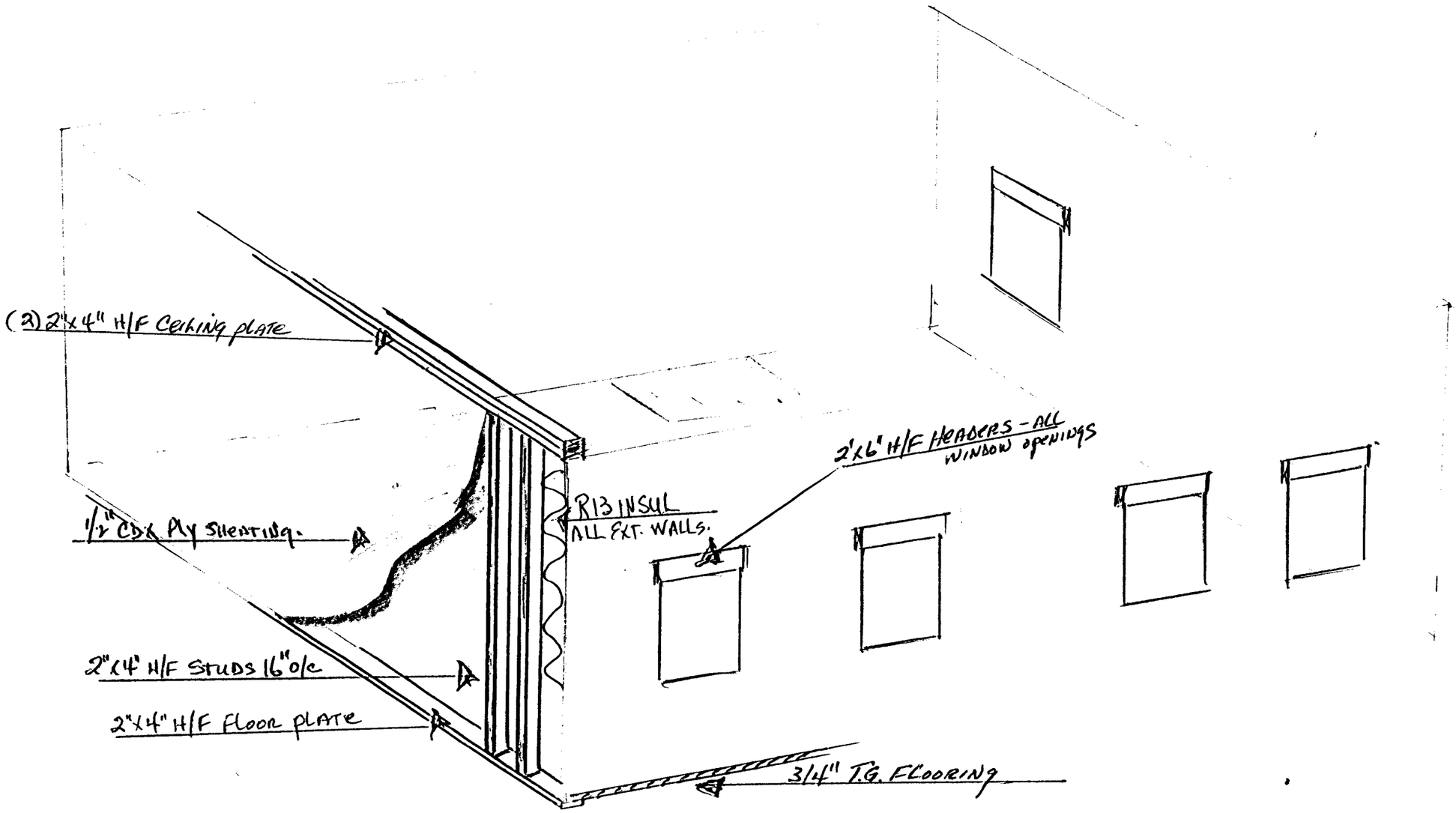
ROOF FRAME, SHEATH, SHINGLE, VENT, & TRIM



PERMIT:
LDS CH B 10513913

A 2 C

2ND FLOOR FRAMING. (EXTERIOR)



PERMIT:
LDS CH B 10513913

BLOCK 348.01 LOT 2 QUALIF /CODE _____ ADDRESS (SITE) 101 Cooper Landing Road PERMIT NO. _____

DEC 27 99

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Applicant Completes: Sections I,II,III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Proposed Work Site at: 101 Cooper Landing Road
2. Name of Owner in Fee: Kevin Dollbaum Tel. [redacted]
   Address: 101 Cooper Landing Road (street) Cherry Hill (municipality) NJ 08002 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Homeowner Tel. [redacted]
   Address 101 Cooper Landing Rd, Cherry Hill NJ 08002
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ Fax ( )
5. Architect or Engineer _____ Tel. ( )
   Address _____
6. Responsible Person in Charge of Work Kevin Dollbaum
   Tel. [redacted] Fax ( )

3120T

Called 12/29/99

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building ✓	$ 46.		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee	3.		
10. Subtotal	$		
11. Cert. of ~~Occupancy~~	APPR.		
12. Other			
13. TOTAL	$ 49.00		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories 2	
2. Height of Structure _____ ft.	
3. Area—Largest Floor _____ sq. ft.	
4. New Building Area _____ sq. ft.	
5. Volume of New Structure _____ cu. ft.	
6. Construction Classification _____	
7. Total Land Area Disturbed _____ sq. ft.	
8. Flood Hazard Zone _____	
9. Base Flood Elevation _____ ft.	
10. Wetlands yes _____ sq. ft.	
no _____	
11. Max. Live Load _____	
12. Max. Occupancy Load _____	

II. PROPOSED WORK

OPTIONAL (for office use only)

II. PROPOSED WORK	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☒ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	3125								

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☒ One-Family (R-4) CABO

No of dwelling units:
Before Construction _____
After Construction _____
Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS CH-B 10404588

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:38-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. (X) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. (X) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature Ka C Dalla Date 12-27-99

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to compiy with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition		
Building		Energy		Other
Electrical		Barrier Free		
Plumbing		Flood Hazard		
Fire Protection		As Built Elevation Cert.		
Mechanical		Other		

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				
☐ Lead Abatement Clearance Certificate	No.				

TOWNSHIP OF CHERRY HILL
820 MERCER STREET
CHERRY HILL, NJ 08002
856-488-7855

CERTIFICATE

IDENTIFICATION

Date Issued: 09/29/2000
Control #: 31202
Permit #: 20000006

Block : 348.01 Lot : 2

Work Site Location: 101 COOPERLANDING RD.
Cherry Hill

Owner in Fee: Dollbaum, Kevin
Address: 101, COOPERLANDING RD.
CHERRY HILL, NJ 08002
Telephone: [redacted]

Contractor: Dollbaum, Kevin
Address: 101 COOPERLANDING RD.
CHERRY HILL, NJ 08002
Telephone: [redacted]

Lic. No./ Bldrs. Reg.No.: _____ Federal Emp. No.: _____
Social Security No.: _____

Home Warranty No: _____
Type of Warranty Plan: [ ] State [ ] Private
Use Group: R-4
Maximum Live Load: 0
Construction Classification: _____
Maximum Occupancy Load: _____
Certificate Exp Date: _____
Description of Work/Use: Roofing

Tax Collector Approval _____ Date _____
Water & Sewer Approval _____ Date _____

[ ] **CERTIFICATE OF OCCUPANCY**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[X] **CERTIFICATE OF APPROVAL**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than or the owner will be subject to fine or order to vacate.

[ ] **CERTIFICATE OF CLEARANCE-LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17 to the following extent:

[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period(_____ years); see file

[ ] **CERTIFICATE OF CONTINUED OCCUPANCY**

This serves notice that based on a general inspection of the visible parts of the building are no imminent hazards and the building is approved for continued occupancy.

[ ] **CERTIFICATE OF COMPLIANCE**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

Anthony Saccomanno, Construction Official

Fees $0.00
Paid [ ] Check No _____
Collected by _____

U.C.C 360 (rev. 3/96) 1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

820 MERCER STREET
CHERRY HILL, NJ 08002
856 488 7855

CONSTRUCTION PERMIT

Permit Number 20000006
Permit Date 1/3/2000
Update Number
Control Number 31202
Application Date 12/27/99

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block 348 01 Lot 2 Qualifier

Work site Location	101 COOPER LANDING RD Cherry Hill	Contractor	Dollbaum Kevin
Owner In Fee	Dollbaum Kevin	Address	101 COOPER LANDING RD
Address	101 COOPER LANDING RD		CHERRY HILL NJ 08002
	CHERRY HILL NJ 08002	Telephone	[redacted]
Telephone	[redacted]	Lic No / Bldrs Reg No	
Use Group(s)	R 4	Federal Emp No	

is hereby granted permission to perform the following work

[X] BUILDING
[ ] ELECTRICAL
[ ] ELEVATOR DEVICES
[ ] LEAD HAZARD ABATEMENT
[ ] ASBESTOS ABATEMENT (Subchapter 8 only)
[ ] PLUMBING
[ ] FIRE PROTECTION
[ ] MECHANICAL
[ ] DEMOLITION
[ ] OTHER

DESCRIPTION OF WORK

Roofing

ESTIMATED COST OF WORK

Cost of Construction	$0 00
Cost of Alteration	$3 125 00
Cost of Demolition	$0 00
Total Cost:	$3 125 00

If construction does not commence within one year of date of issuance or if construction ceases for a period of six months this permit is void

Bill Cook Actng 12/27/99

Anthony Saccomanno
Contruction Official

Date

Failure to obtain all required inspections may result in administrative action.
Final inspections are required before final payment is to be made to contractor
An approved set of plans must be kept at the worksite at all times.

Note PAID JAN 04 2000

PAYMENT (Office Use Only)

[70 43]	Building	$46 00
[70 48]	Electrical	
[70 36]	Plumbing	
[70 37]	Fire Protection	
[70 61]	Elevator Devices	
[70-38]	Mechanical	
[70-91]	VolFee (DCA)	
[70 91]	AltFee (DCA)	$3 00
[70-50]	CO Fee	
[70 50]	CCO Fee	
[70 15]	Engineering	
[71 78]	Sewer	
[70 62]	Shade Tree	
[70 53]	Street Opening	
[73-83]	Street Opening Escrow	
	Total	$ 49 00
	* All Fees Waived	No
	Amount to be Paid	$ 49 00

CHECK #406

Cash amount	$49 00
Collected by	SD
Receipt No	
Total Cash Amount.	$49 00
Total Check Amount	

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued 1-3-2000
Control #
Permit # 2000-0006

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348.01 Lot 2
Work Site Location 101 Cooper Landing Rd

Owner in Fee Kevin Dilbaum
Address 101 Cooper Landing Rd Cherry Hill NJ 08002

Tele. [redacted] or [redacted] (work#)
Contractor Homeowner
Address Same

Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[ ] No Plans Required 1/3/00 RES
[ ] All
[ ] Footing
[ ] Foundation
[ ] Frame
[ ] Other
Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator
SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 9/29/00
Approved by: RES

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			9/29/00	RES
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present R-4 Proposed
Constr. Class Present 5B Proposed
No. of Stories 2
Height of Structure 25' Ft.
Area — Largest Floor 1500 Sq. Ft.
New Bldg. Area/All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $
3. Total (1+ 2) $

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Replace Roof on front ½ of house (original home part)
Roughly 19 square of roofing

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[X] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Other _____
[ ] Demolition

FEE (Office Use Only)
$ 46.

Administrative Surcharge	$	
Minimum Fee	$	
DCA Training Fee	$	3.
TOTAL FEE	$	49.00

One and Two Family Inspections Only!

Item.	Date	Insp..	Pass	Fail	Footing, Foundation and Slab Inspections
1	_____	_____	[ ]	[ ]	Approved plans and zoning approval are on site.
2	_____	_____	[ ]	[ ]	Footing location complies with approved plan.
3	_____	_____	[ ]	[ ]	Verifies the excavation and soil conditions.
4	_____	_____	[ ]	[ ]	Verifies reinforcement is in place (if required).
5	_____	_____	[ ]	[ ]	Inspects foundation wall forms: Verifies reinforcement Verifies window and vent openings Verifies anchorage bolts or strap size and spacing. Verifies keyway is clean.
6	_____	_____	[ ]	[ ]	Inspects masonry wall: Correct block size and type pier/pilasters locations Verifies window and vent openings Verifies anchorage bolt or strap size and spacing.
7	_____	_____	[ ]	[ ]	Inspects parging and waterproofing.
8	_____	_____	[ ]	[ ]	Inspects perimeter drainage system
9	_____	_____	[ ]	[ ]	Inspects fill, vapor barrier, slab thickness, prim insulation, reinforcement, haunch footing and isolated piers.

Item.	Date	Insp.	Pass	Fail	Framing and Insulation Inspections
10	_____	_____	[ ]	[ ]	Checks sill plate for proper anchorage and for termite and decay protection.
11	_____	_____	[ ]	[ ]	Verify rooms, doors, and windows for size, height, light and ventilation requirements.
12	_____	_____	[ ]	[ ]	Inspects wall framing and bracing.
13	_____	_____	[ ]	[ ]	Inspects floor, ceiling, and roof framing. Checks size, grade, species, spacing, span, nailing, hardware, support, and bearing.
14	_____	_____	[ ]	[ ]	Inspects beams, girders, columns, and post for spacing, span, size, grade, species, bearing, and installation.
15	_____	_____	[ ]	[ ]	Verifies trusses match approved drawings and layouts. All bracing, hangers, bearing, and lumber grades match approved drawings
16	_____	_____	[ ]	[ ]	Inspects exterior walls and roof sheathing.
17	_____	_____	[ ]	[ ]	Inspects subflooring.
18	_____	_____	[ ]	[ ]	Inspects all stairs and stairway framing.
19	_____	_____	[ ]	[ ]	Verifies that allowable limits of cutting, notching, and boring have not been exceeded.
20	_____	_____	[ ]	[ ]	Inspects fireplace construction and installation.
21	_____	_____	[ ]	[ ]	Checks for clearances from combustibles.
22	_____	_____	[ ]	[ ]	Checks for firestopping and draft stopping.
23	_____	_____	[ ]	[ ]	Inspects attics and crawl spaces for access and ventilation.
24	_____	_____	[ ]	[ ]	Inspects fire rated assemblies.
25	_____	_____	[ ]	[ ]	Verifies that framed structures complies with approved plans.
26	_____	_____	[ ]	[ ]	Checks all insulation: walls, ceilings, floors, and ductwork.

Item.	Date	Insp.	Pass	Fail	Final Inspection Tasks
27	_____	_____	[ ]	[ ]	Checks interior finishes.
28	_____	_____	[ ]	[ ]	Verify exhaust fan and dryer vent operations
29	_____	_____	[ ]	[ ]	Checks egress windows and safety glazing.
30	_____	_____	[ ]	[ ]	Inspects mechanical units. For attic units are lights, receptacles, and 24 inch walkways
31	_____	_____	[ ]	[ ]	Inspects exterior siding, roofing, and flashin
32	_____	_____	[ ]	[ ]	Inspects all stairs, balconies, and decks for handrails and guards.
33	_____	_____	[ ]	[ ]	Verifies compliance with approved plans or are as-builts and permit updates required
34	_____	_____	[ ]	[ ]	Inspects concrete flat work.
35	_____	_____	[ ]	[ ]	Inspects exterior grading for topo compliance

Comments

This inspection check off list shall serve as a general guide line and may not include all the necessary inspections required to insure code compliance.

BLOCK 348.01 LOT 2 QUALIFICATION CODE _____ ADDRESS (SITE) 101 Cooper Landing Rd PERMIT NO. _____

CONSTRUCTION PERMIT APPLICATION

Application Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 101 Cooper Landing Rd
2. Name of Owner in Fee: Kevin Dillbaum Tel. ([redacted]
   Address 101 Cooper Landing Rd (street) Cherry Hill (municipality) NJ 08002 (zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Kevin Dillbaum Tel. ( ) _____
   Address 101 Cooper Landing Rd Cherry Hill NJ 08002
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: ( ) _____
5. Architect or Engineer _____ Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work _____
   Tel. ( ) _____ FAX ( ) _____

35527

RECEIVED
FEB 23 2001
BUILDING INSPECTIONS

FRONT PORCH

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 52.00		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	4.00		
10.	Subtotal			
11.	Cert. of ~~Occupancy~~			
12.	Other			
13.	TOTAL	$ 56.00		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	
2.	Height of Structure ft.	
3.	Area — Largest Floor sq. ft.	
4.	New Building Area sq. ft.	
5.	Volume of New Structure cu. ft.	
6.	Construction Classification	
7.	Total Land Area Disturbed sq. ft.	
8.	Flood Hazard Zone	
9.	Base Flood Elevation ft.	
10.	Wetlands yes	
	no	
11.	Max. Live Load	
12.	Max. Occupancy Load	

II. PROPOSED WORK

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	~~X~~ Minor Work	~~1500~~								
2.	☐ New Building									
3.	X Addition	$1500				3/2/01	[illegible]			
4.	☐ Alteration									
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☐ Electrical									
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition									
	TOTAL COSTS	1500								

OPTIONAL (for office use only)

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ ~~One~~-Family (R-4) CABO

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS CH-B 10404589

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. (X) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. (X) I further certify that I will perform or supervise the following work:
C.1. (X) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3 (X) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature Ken C Dath Date 2-15-01

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		**Name of Code & Edition**		
Building	_____	Energy	_____	Other _____
Electrical	_____	Barrier Free	_____	_____
Plumbing	_____	Flood Hazard	_____	_____
Fire Protection	_____	As Built Elevation Cert.	_____	_____
Mechanical	_____	Other	_____	_____

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

PAID MAR 02 2001

CONSTRUCTION PERMIT

Permit Number: 20010415
Permit Date 3/2/2001
Update Number:
Control Number: 35527
Application Date: 03/02/01

120 MERCER STREET
CHERRY HILL, NJ 08002
856 - 488-7855

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 348.01 Lot : 2 Qualifier :

Work site Location: 101 COOPERLANDING RD.

Owner In Fee: Kevin Dollbaum

Address: 101 COOPERLANDING RD.
CHERRY HILL NJ 08002

Telephone: [redacted]

Use Group(s): R-4

Agent: Kevin Dollbaum

Address: 101 COOPERLANDING RD.
CHERRY HILL NJ 08002

Telephone: [redacted]

Lic. No. / Bldrs. Reg. No.:

Federal Emp. No.:

is hereby granted permission to perform the following work :

[X] BUILDING
[ ] ELECTRICAL
[ ] ELEVATOR DEVICES
[ ] LEAD HAZARD ABATEMENT
[ ] ASBESTOS ABATEMENT (Subchapter 8 only)
[ ] PLUMBING
[ ] FIRE PROTECTION
[ ] MECHANICAL
[ ] DEMOLITION
[ ] OTHER

DESCRIPTION OF WORK:

Front Porch, 10 Ft. X 16 Ft.

ESTIMATED COST OF WORK:

Cost of Construction:	$1,500.00
Cost of Alteration:	$0.00
Cost of Demolition:	$0.00
Total Cost:	$1,500.00

If construction does not commence within one year of date of issuance,

or if construction ceases for a period of six months, this permit is void.

Anthony Saccomanno — Date 3/2/01

Contruction Official

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENT (Office Use Only)

[70-43]	Building	$52.00
[70-48]	Electrical	
[70-36]	Plumbing	
[70-37]	Fire Protection	
[70-61]	Elevator Devices	
[70-38]	Mechanical	
[70-91]	VolFee (DCA)	$4.00
[70-91]	AltFee (DCA)	
[70-50]	CO Fee	
[70-50]	CCO Fee	
[70-45]	Engineering	
[71-78]	Sewer	
[70-62]	Shade Tree	
[70-53]	Street Opening	
[73-83]	Street Opening Escrow	

Total : $ 56.00
All Fees Waived : No
Amount to be Paid: $ 56.00

Check Number: 1127
Check amount: $56.00

Collected by: SD
Receipt No:
Total Cash Amount:
Total Check Amount: $56.00

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued 3-2-01
Control #
Permit # 2001-0415

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 34/B.01 Lot 2
Work Site Location 101 Cross Landing Rd
Cherry Hill NJ 08002
Owner in Fee Kevin Dallbauman
Address 101 Cross Landing Rd
Cherry Hill NJ 08002
Tele. [redacted]
Contractor Same as Above
Address
Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Front Porch consisting of Concrete Pad & A Frame roof

CALL FOR INSPECTIONS AS NOTED
HAVE APPVD DRWGS ON SITE
CONTRACTOR WILL PROVIDE DIG#

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	3/9/01	GBS
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Footing ✓				
Foundation				
Slab				
Frame ✓				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final ✓				
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[X] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Other _____

[ ] Demolition

FEE (Office Use Only)

$	52.00
Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories 1
Height of Structure 13 Ft.
Area — Largest Floor 160 Sq. Ft.
New Bldg. Area/All Floors NA Sq. Ft.
Volume of New Structure ~~2080~~ 1920 Cu. Ft @ 0.027 52.00
Total Land Area Disturbed 700 ± Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ 1500
3. Total (1+ 2) $ 1500

MIN FEE

U.C.C. F110 (rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

One and Two Family Inspections Only!

Item.	Date	Insp..	Pass	Fail	Footing, Foundation and Slab Inspections
1	_____	_____	[ ]	[ ]	Approved plans and zoning approval are on site.
2	_____	_____	[ ]	[ ]	Footing location complies with approved plan.
3	_____	_____	[ ]	[ ]	Verifies the excavation and soil conditions.
4	_____	_____	[ ]	[ ]	Verifies reinforcement is in place (if required).
5	_____	_____	[ ]	[ ]	Inspects foundation wall forms: Verifies reinforcement Verifies window and vent openings Verifies anchorage bolts or strap size and spacing. Verifies keyway is clean.
6	_____	_____	[ ]	[ ]	Inspects masonry wall: Correct block size and type pier/pilasters locations Verifies window and vent openings Verifies anchorage bolt or strap size and spacing.
7	_____	_____	[ ]	[ ]	Inspects parging and waterproofing.
8	_____	_____	[ ]	[ ]	Inspects perimeter drainage system
9	_____	_____	[ ]	[ ]	Inspects fill, vapor barrier, slab thickness, prim insulation, reinforcement, haunch footing and isolated piers.

Item.	Date	Insp.	Pass	Fail	Framing and Insulation Inspections
10	_____	_____	[ ]	[ ]	Checks sill plate for proper anchorage and for termite and decay protection.
11	_____	_____	[ ]	[ ]	Verify rooms, doors, and windows for size, height, light and ventilation requirements.
12	_____	_____	[ ]	[ ]	Inspects wall framing and bracing.
13	_____	_____	[ ]	[ ]	Inspects floor, ceiling, and roof framing. Checks size, grade, species, spacing, span, nailing, hardware, support, and bearing.
14	_____	_____	[ ]	[ ]	Inspects beams, girders, columns, and post for spacing, span, size, grade, species, bearing, and installation.
15	_____	_____	[ ]	[ ]	Verifies trusses match approved drawings and layouts. All bracing, hangers, bearing, and lumber grades match approved drawings
16	_____	_____	[ ]	[ ]	Inspects exterior walls and roof sheathing.
17	_____	_____	[ ]	[ ]	Inspects subflooring.
18	_____	_____	[ ]	[ ]	Inspects all stairs and stairway framing.
19	_____	_____	[ ]	[ ]	Verifies that allowable limits of cutting, notching, and boring have not been exceeded.
20	_____	_____	[ ]	[ ]	Inspects fireplace construction and installation.
21	_____	_____	[ ]	[ ]	Checks for clearances from combustibles.
22	_____	_____	[ ]	[ ]	Checks for firestopping and draft stopping.
23	_____	_____	[ ]	[ ]	Inspects attics and crawl spaces for access and ventilation.
24	_____	_____	[ ]	[ ]	Inspects fire rated assemblies.
25	_____	_____	[ ]	[ ]	Verifies that framed structures complies with approved plans.
26	_____	_____	[ ]	[ ]	Checks all insulation: walls, ceilings, floors, and ductwork.

Item.	Date	Insp.	Pass	Fail	Final Inspection Tasks
27	_____	_____	[ ]	[ ]	Checks interior finishes.
28	_____	_____	[ ]	[ ]	Verify exhaust fan and dryer vent operations
29	_____	_____	[ ]	[ ]	Checks egress windows and safety glazing.
30	_____	_____	[ ]	[ ]	Inspects mechanical units. For attic units are lights, receptacles, and 24 inch walkways
31	_____	_____	[ ]	[ ]	Inspects exterior siding, roofing, and flashin
32	_____	_____	[ ]	[ ]	Inspects all stairs, balconies, and decks for handrails and guards.
33	_____	_____	[ ]	[ ]	Verifies compliance with approved plans or are as-builts and permit updates required
34	_____	_____	[ ]	[ ]	Inspects concrete flat work.
35	_____	_____	[ ]	[ ]	Inspects exterior grading for topo compliance

Comments

This inspection check off list shall serve as a genera guide line and may not include all the necessary inspections required to insure code compliance.

TOWNSHIP OF CHERRY HILL

820 Mercer Street
Cherry Hill, NJ 08002

ZONING APPROVAL No 40875

☒ Building Permit ☐ Certificate of Occupancy

Block 348.01 Lot 2 Zone R-2

Property Owner Kevin & Kristina Dallbaum

Address of Property 101 Cooper Landing Rd

Address of Owner 101 Cooper Landing Rd Phone No. [redacted]

Existing Use _____ Proposed Use Front Porch Addition

Type of Structure Proposed Front Porch Addition (10'x16')

THIS APPROVAL ALLOWS THE APPLICANT TO APPLY FOR A BUILDING PERMIT OR, IF NO FURTHER CONSTRUCTION IS REQUIRED, CERTIFICATE OF OCCUPANCY. NO USE OR CONSTRUCTION MAY COMMENCE WITHOUT ALL NECESSARY APPROVALS.

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all application laws of this jurisdiction.

[signature] 101 Cooper Landing Rd [redacted]

Signature Address Telephone

SETBACKS: ☐ Corner Lot ☒ Inside Lot

Front 35'min Rear 25'min Smallest side 10'min Aggregate 24'min Second front _____

Sq. Ground Floor _____ Height 35'max Gross Floor Area _____

For swimming pool only:

Distance of pool from the foundation wall _____ Front _____ Rear _____ Side _____

ZONING BOARD ACTION	P.O.A. _____	Date Granted _____
PLANNING BOARD ACTION	P.B.C. _____	Date Granted _____

THIS APPROVAL IS BASED ON THE INFORMATION ON THIS FORM AND THE ATTACHED PLAN(S).

COMMENTS: Approval is given for front porch addition as shown per attached, all setback requirements must be met as noted above.

*all BOCA bldg requirements must be met

OTHER PAYMENTS AND FEES:

Taxes Paid: ✓ Shade Tree Fee $2.00/LF of street frontage _____

Contributions-In-Aid:

Road Improv. $ _____

Sewer Improv. $ _____

Other ZA $ 10.00

Housing Impact Fee:

(a) Estimated equalized value of the improvements $_____

(b) Fee calculation:

1) Residential use - 0.5% of (a) $_____

2) Non-Residential use - 1.0% of (a) $_____

Elizabeth Donohue Zoning Officer 2/22/01

Name Title Date

PPCo

OFFICE Copy

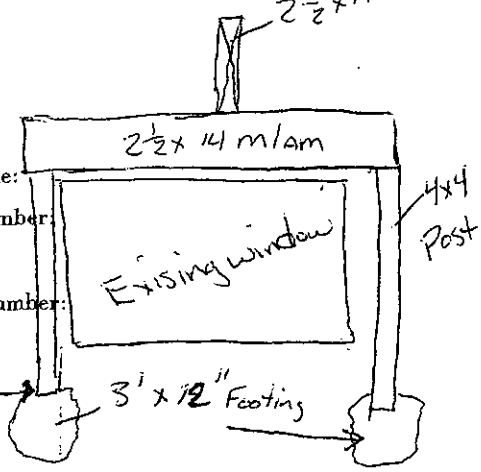
CUH2A

Architecture
Planning
Interior Design

CUH2A, Inc.
211 Carnegie Center
Princeton, NJ
08540-6298
Tel 609-452-1212
Fax 609-452-1943

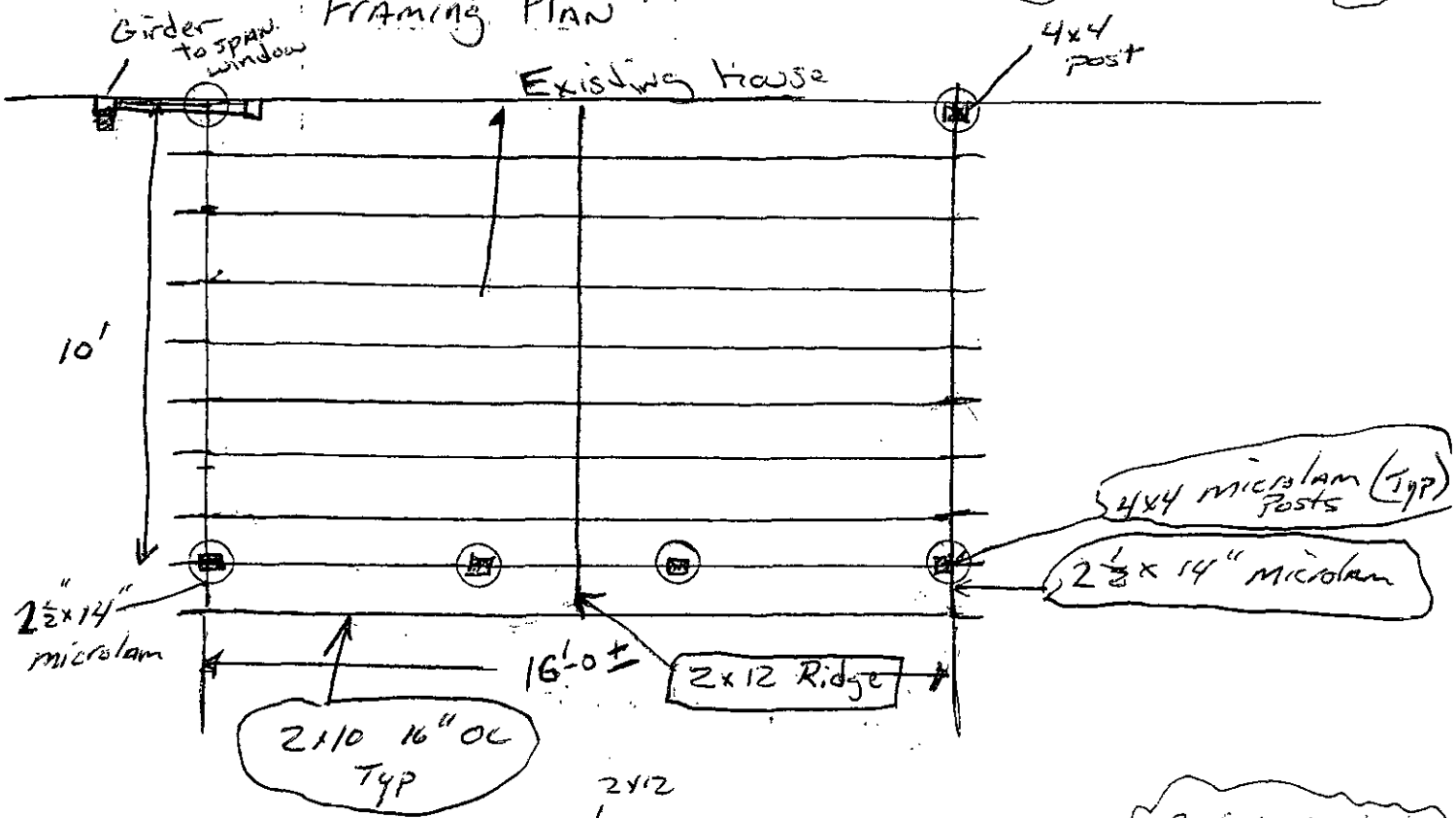
Date:
Project Title:
Project Number:
By:
Drawing Number:

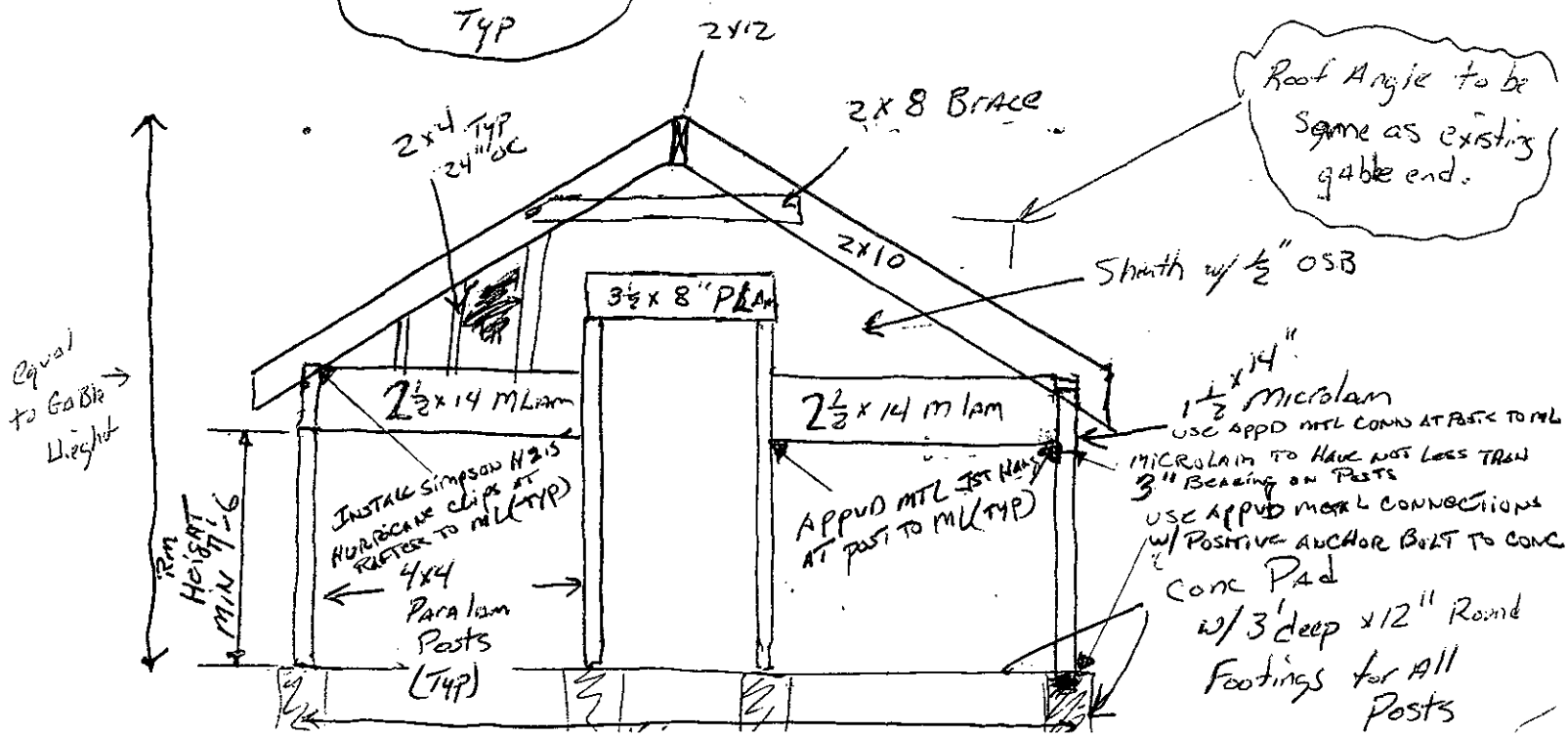
Girder @ window



1/4" = 1'

Framing Plan





Office

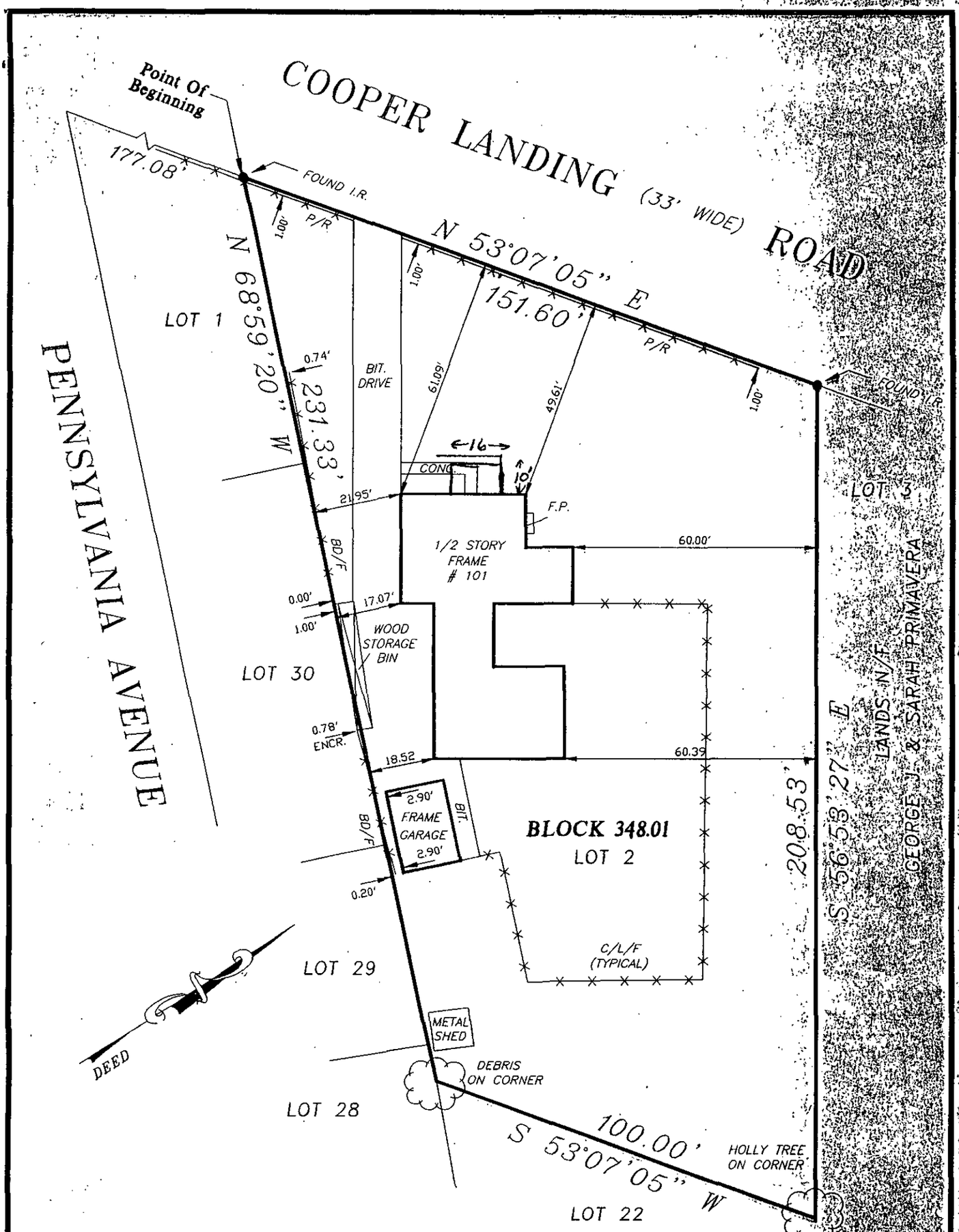
RECEIVED
FEB 23 2001
BUILDING INSPECTIONS

CHERRY HILL TOWNSHIP
BUILDING INSPECTIONS
PLAN REVIEW

	OFFICIAL	ACTION DATE	REC'D DATE
BUILDING	RES	3/2/01	

OFFICIAL COPY

CONTRACTOR MUST DISPLAY THIS SET AT JOB SITE.



BEING LOT 2, BLOCK 348.01 ON TAX MAP, CONTAINING 24,649± S.F. (0.566± AC.) OF LAND.

KEVIN CHARLES DALLBAUM
KRISTINA L. WALKER
LAWYERS TITLE INSURANCE CORP. & CREDIT LENDERS TITLE AGENCY INC.
ATLANTIC COAST MORTGAGE SERVICES, INC.

TO _____ ANY INSUROR OF TITLE RELYING HEREON AND ANY OTHER PARTY IN INTEREST:

"IN CONSIDERATION OF THE FEE PAID FOR MAKING THIS SURVEY, I HEREBY CERTIFY TO ITS ACCURACY (EXCEPT SUCH EASEMENT, IF ANY, THAT MAY BE LOCATED BELOW THE SURFACE OF THE LANDS OR ON THE SURFACE OF THE LANDS AND NOT VISIBLE) AS AN INDUCEMENT FOR ANY INSUROR OF TITLE TO INSURE THE TITLE TO THE LANDS AND PREMISES SHOWN THEREON."

N.J. LAND SURVEYOR LICENSE No. 34866

JOHN McGLINCHEY

SURVEY AND PLAN OF PREMISES

No. 101 COOPER LANDING ROAD
TOWNSHIP OF CHERRY HILL
CAMDEN COUNTY, N.J.

SCALE: 1"=30'	DRAWN BY: ALTIERRA	DRAWING No.: 99-1170
DATE: 11-05-99	REVISED:	

JOHN McGLINCHEY P.L.S., P.P.
5 MARIGOLD COURT MT. LAUREL, N.J. 08054
TEL. (856) 727-4353 FAX (856) 727-4560

2041983

BLOCK 348.01 LOT 2 QUALIFICATION CODE _____ ADDRESS (SITE) 101 Cooper Landing Rd PERMIT NO. _____

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 101 Cooper Landing Rd
2. Name of Owner in Fee: Kevin Dollbaum Tel. [redacted]
   Address 101 Cooper Landing Rd (street) Cherry Hill (municipality) 08002 (zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: SAME AS Above Tel. ( ) _____
   Address _____
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: ( ) _____
5. Architect or Engineer SAME AS Above Tel. ( ) _____
   Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Kevin Dollbaum
   Tel. [redacted] FAX: (856) 429 4252

7/28/04

JUL 12 2004

SD

Addition - 16 x 20'

1ST FL Land Disturbance 300 sq ft

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 442.-		
2.	Electrical	36.-		
3.	Plumbing	42.-		
4.	Fire Protection	23.-		
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$ 44.-		
9.	State Permit Surcharge Fee			
10.	Subtotal	$ 90.-		
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 677.-		

0

CL. UP

2 PAGE

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories 2	
2.	Height of Structure 24 ft.	
3.	Area — Largest Floor 400 sq. ft.	
4.	New Building Area 800 sq. ft.	
5.	Volume of New Structure 6400 cu. ft.	
6.	Construction Classification 5B	
7.	Total Land Area Disturbed 300 sq. ft.	
8.	Flood Hazard Zone	
9.	Base Flood Elevation ft.	
10.	Wetlands yes	
	no	
11.	Max. Live Load	
12.	Max. Occupancy Load	

II. PROPOSED WORK — OPTIONAL (for office use only)

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work									
2.	☐ New Building									
3.	☒ Addition	12000			7.24.04	7.26.04	MES			
4.	☐ a. Repair									
	☐ b. Alteration									
	☐ c. Renovation									
	☐ d. Reconstruction									
5.	☒ Fire Protection	$300				7/27/04	SD			
6.	☒ Plumbing	$1000				7/15/04	SD			
7.	☒ Electrical	$700				07/13/04	JF			
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition									
	TOTAL COSTS	14000								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:

	All Units	Income-restricted
Before Construction		
After Construction		
Net Gain or Loss		

B. NON-RESIDENTIAL

1. State Specific Use: R-5
2. Use Group:
3. Change in Use Group, Indicate Former:

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

LDS CH-B 10522711

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) *I further* certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole *or in* part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. (X) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. (X) I further certify that I will perform or supervise the following work:
C.1. (X) Building C.2. (X) Fire Protection

I further certify that I will perform the following work:
C.3. (X) Electrical C.4. (X) Plumbing

D. (X) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date 6/23/04

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		**Name of Code & Edition**		
Building		Energy		Other
Electrical		Barrier Free		
Plumbing		Flood Hazard		
Fire Protection		As Built Elevation Cert.		
Mechanical		Other		

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				
☐ Lead Abatement Clearance Certificate	No.				

TOWNSHIP OF CHERRY HILL
820 MERCER STREET
CHERRY HILL, NJ 08002
856-488-7855

CERTIFICATE
IDENTIFICATION

Date Issued: 09/23/2009
Control #: 48194
Permit #: 20041983

Block: 348.01 Lot : 2 Qualification Code:

Work Site Location: 101 COOPERLANDING RD.
CHERRY HILL

Owner in Fee: KEVIN DOLLBAUM
Address: 101 COOPERLANDING RD.
CHERRY HILL NJ 08002
Telephone: [redacted]

Agent/Contractor: KEVIN DOLLBAUM
Address: 101 COOPERLANDING RD.
CHERRY HILL NJ 08002
Telephone: [redacted]

Lic. No./ Bldrs. Reg.No.: _____ Federal Emp. No.: _____

Social Security No.: _____

Home Warranty No: _____
Type of Warranty Plan: [ ] State [X] Private
Use Group: R-5
Maximum Live Load: _____
Construction Classification: _____
Maximum Occupancy Load: _____
Certificate Exp Date: _____

Description of Work/Use:

2 STORY ADDITION, TOTAL 1028 SQ.FT.

[X] **CERTIFICATE OF OCCUPANCY**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[ ] **CERTIFICATE OF APPROVAL**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than or will be subject to fine or order to vacate:

[ ] **CERTIFICATE OF CLEARANCE-LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:

[ ] Total removal of lead-based paint hazards in scope of work

[ ] Partial or limited time period(_____ years); see file

[ ] **CERTIFICATE OF CONTINUED OCCUPANCY**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] **CERTIFICATE OF COMPLIANCE**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

Gerald E. Seneski Construction Official

Fees: $90.00
Paid[X]Check No.: 1151
Collected by: SD

U.C.C 260 (rev. 5/03) 1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

TOWNSHIP OF CHERRY HILL
820 MERCER STREET
CHERRY HILL, NJ 08002
856 - 488-7855

Permit Number: 20041983
Permit Date: 07/29/2004
Update/Cont'd Number: 48194
Application Date: 07/27/04

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 348.01 Lot: 2 Qualifier:
Work site Location: 101 COOPERLANDING RD. CHERRY HILL
Owner In Fee: KEVIN DOLLBAUM
Address: 101 COOPERLANDING RD.
CHERRY HILL NJ 08002
Telephone: [redacted]
Use Group(s): R-5

Contractor: KEVIN DOLLBAUM
Address: 101 COOPERLANDING RD.
CHERRY HILL NJ 08002
Telephone: [redacted]
Lic. No. / Bldrs. Reg. No.:
Federal Emp. No.:

is hereby granted permission to perform the following work:

[X] BUILDING
[X] PLUMBING
[X] ELECTRICAL
[X] FIRE PROTECTION
[ ] ELEVATOR DEVICES
[ ] MECHANICAL
[ ] LEAD HAZARD ABATEMENT
[ ] DEMOLITION
[ ] ASBESTOS ABATEMENT
[ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

2 STORY ADDITION, TOTAL 1028 SQ FT.

ESTIMATED COST OF WORK:

Cost of Construction:	$14,000.00
Cost of Alteration:	$0.00
Cost of Demolition:	$0.00
Total Cost:	$14,000.00

If construction does not commence within one year of date of issuance, or if construction ceases for a period of six months, this permit is void.

Anthony Saccomanno
Contruction Official

7/28/04
Date

Failure to obtain all required inspections may result in administrative action.
Final inspections are required before final payment is to be made to contractor.
An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENTS (Office Use Only)

[70-43]	Building	$442.00
[70-48]	Electrical	$36.00
[70-36]	Plumbing	$42.00
[70-37]	Fire Protection	$23.00
[70-61]	Elevator Devices	
[70-38]	Mechanical	
[70-91]	VolFee (DCA)	$44.00
[70-91]	AltFee (DCA)	
[70-50]	CO Fee	$90.00
[70-50]	CCO Fee	
[70-45]	Engineering	
[71-78]	Sewer	
[70-62]	Shade Tree	
[70-53]	Street Opening	
[73-83]	Street Open. Escrow	

Check Number: **Total:** **$ 677.00** 1151
Check amount: All Fees Waived No
Amount to be Paid: **$ 677.00**

PAID

Collected by: SD
Total Cash Amount
Total Check Amount $677.00
Total CC Amount
Grand Total $677.00

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 7-29-04
Permit # 2004-1983

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 34801 Lot 2 Qualification Code
Work Site Location 101 Cooper Landing Rd

Owner in Fee Kevin Dollbaum
Address 101 Cooper Landing Rd
Cherry Hill NJ 08002
Tel. [redacted]
Contractor Same as Above
Address Same

Tel. ( ) FAX (856) 429 4252
Contractor License No. or Builder Registration No.
Federal Emp. No

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Addition to side of home
2 Story Wood Framed
Concrete slab 16x20'

Provide Truss and Parallam Drwgs Prior to Frmg
Call For Inspections As Noted
Have Appld Drwgs on Site

JOB SUMMARY (Office Use Only)

See back

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[X] All	7.26.04	JKS
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 3.16.07
Approved by: JKS

INSPECTIONS

Type:	Failure	Failure	Approval Dates (Month/Day)	Initial
Footing ✓			8.21.04	JKS
Footing Bonding				
Foundation ✓			9.9.06	JKS
Slab ✓			9/18/06	SNK
Frame ✓	10/13/06	11/7/06	11/22/06	SNK
Truss Sys./Bracing				
Barrier-Free				
Insulation ✓	11/20/06		11/22/06	SNK
Finishes -Base Layer	No entry			
Finishes -Final				
~~Energy~~ Pier Footing			2/28/06	SNK
Mechanical				
TCO Stair Correction			1/25/07	SNK
Other				
Final ✓			3/16/07	SNK
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group	Present R-5	Proposed R-5
Constr. Class	Present VB	Proposed VB
No. of Stories	2	
Height of Structure	24 Ft.	
Area — Largest Floor	~~800~~ ~~1035~~ 1035 Sq. Ft.	
New Bldg. Area/All Floors	800 Sq. Ft.	
Volume of New Structure	6400 ~~7200~~ 16560 Cu. Ft.	x 0.027/CF 447.12
Total Land Area Disturbed	300 Sq. Ft.	

Est. Cost of Bldg. Work:
1. New Bldg. $ 12000
2. Rehabilitation $
3. Total (1+ 2) $ 12000

TYPE OF WORK:
[ ] New Building
[X] Addition
~~[X]~~ Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence Height (exceeds 6')
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Other
[ ] Demolition

FEE (Office Use Only)

$	447.12
Administrative Surcharge $	
Minimum Fee $	
State Permit Surcharge Fee $	
TOTAL FEE $	

U.C.C. F110 (rev. 07/03)

SNK 2/8/06 Progress

Shell of addition framed & sided.

All interior work not complete (framing, electric & plumbing)

Left sticker w/ instructions

SNK 10/13/06 Frame (Fail)

Missing hurricane clips ✓

Missing fire blocking & penetrations & floor joists ✓

Ductwork not complete ✓

Shop drawings for all girders (Still need ✓

Lag screws at ledger board ✓

SNK 11/2/06 Frame (Fail)

New 3" steel Colums not on 2' square footings (as per Engineers specs)

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 7.29.04
Permit # 2004 1183

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 249.01 Lot 2 Qualification Code
Work Site Location 101 Cooper Landing Rd

Owner in Fee Kevin Tollbaum
Address 101 Cooper Landing Rd
[redacted]
Tel. [redacted]
Contractor Same as Above
Address Same

Tel. ( ) FAX (856) 429 4252
Contractor License No. or Builder Registration No.
Federal Emp. No

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Addition to side of home
2 Story Wood Framed
Concrete slab 16' x 20'

PROVIDE TRUSS AND PARTICLE DRAWS PRIOR TO FRMG
CALL FOR INSPECTIONS AS NOTED
HAVE APPD DRWGS ON SITE

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[X] All	7.26.04	YES
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Footing ✓				
Footing Bonding				
Foundation ✓				
Slab ✓				
Frame ✓				
Truss Sys./Bracing				
Barrier-Free				
Insulation ✓				
Finishes -Base Layer				
Finishes -Final			RC	
Energy				
Mechanical				
TCO				
Other				
Final ✓				
Barrier-Free				

Dates (Month/Day)

TYPE OF WORK:
[ ] New Building
[X] Addition
[X] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Other _____
[ ] Demolition

FEE (Office Use Only)
$ 442-

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
No. of Stories 2
Height of Structure 24 Ft.
Area — Largest Floor ~~320~~ 10 28 Sq. Ft.
New Bldg. Area/All Floors 800 Sq. Ft.
Volume of New Structure ~~6400~~ 16 32 Cu. Ft. x 0.027/CF 442-
Total Land Area Disturbed 800 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 12000
2. Rehabilitation $
3. Total (1+ 2) $ 12000

U.C.C. F110 (rev. 07/03)

FRAMING CHECK LIST

A. Basement or Crawl Space

1. Anchorage:

Bolts
- ☐ Spacing
- ☐ Size

0.c 9/1/04

Straps
- ☐ Spacing (per manufacturer's specs
- ☐ Size

2. Sill Plates:
- ☐ Size
- ☐ Grade, Species
- ☐ Treatment
- ☐ Laps
- ☐ Sill Sealer
- ☐ Proper Treatment over Foundation Openings (bearing of joist)
- ☐ Termite Protection

3. Beam Pockets:
- ☐ Bearing / Shims
- ☐ Termite Protection or Clearance

4. Columns:
- ☐ Sized per Plan
- ☐ Attachment / Plates
- ☐ Spacing / Location
- ☐ Paint / Coating

B. Floor Framing and Flooring

1. Box or Rim Joist, or Perimeter Band Joist:

1st	2nd	3rd Floor
☐	☐	☐ Size
☐	☐	☐ Grade, Species
☐	☐	☐ Single or Double
☐	☐	☐ Pre-Engineered per Manuf's Specs
☐	☐	☐ Cantilevers as per Design

5. Stair Attachment

1st	2nd	3rd Floor
☐	☐	☐ Bearing
☐	☐	☐ Nailing

2. Girders and Beams:
- ☐ Sized per plan
- ☐ Type
- ☐ Grade, Species
- ☐ Location and Relation to the Plan
- ☐ Nailing
- ☐ Attachment Schedule
- ☐ Bearing
- ☐ Lapping

3. Floor Joist

1st	2nd	3rd Floor
☐	☐	☐ Sized per Plan
☐	☐	☐ Grade, Species
☐	☐	☐ Pre-Engineered Components Specified
☐	☐	☐ Bearing
☐	☐	☐ Nailing
☐	☐	☐ Bridging
☐	☐	☐ Cutting and Notching (as per code)
☐	☐	☐ Point Loads - Supported as per Plan
☐	☐	☐ Span Headers
☐	☐	☐ Headers
☐	☐	☐ Framed Openings

4. Flooring, Sheathing., or Decking

1st	2nd	3rd Floor
Material		
☐	☐	☐ Panel Span, Thickness
Special Requirements		
☐	☐	☐ Edge Blocking (if required)
☐	☐	☐ Gapping
☐	☐	☐ Layout

5. Stair Attachment:

1st	2nd	3rd Floor
☐	☐	☐ Bearing
☐	☐	☐ Nailing

C. Wall Framing

1. Exterior Wall Frame

1st	2nd	3rd Floor
☐	☐	☐ Size
☐	☐	☐ Space
☐	☐	☐ Species and Grade
☐	☐	☐ Cutting, Notching, and Boring
☐	☐	☐ Header Sizes
☐	☐	☐ Jack Stud Bearing

Top Plates

☐	☐	☐ Nailing
☐	☐	☐ Laps
☐	☐	☐ Rafter Ties
☐	☐	☐ Hurricane Straps (as required)

2. Interior Load-Bearing Walls:

1st	2nd	3rd Floor
☐	☐	☐ Size
☐	☐	☐ Space
☐	☐	☐ Layout-Support Below per Code
☐	☐	☐ Species and Grade
☐	☐	☐ Cutting, Notching, and Boring
☐	☐	☐ Fire Blocking
☐	☐	☐ Header Sizes
☐	☐	☐ Jack Stud Bearing

Top Plates

☐	☐	☐ Nailing
☐	☐	☐ Laps
☐	☐	☐ Straps

3. Interior Non-Load-Bearing Walls

1st	2nd	3rd Floor
☐	☐	☐ Size
☐	☐	☐ Space
☐	☐	☐ Species and Grade
☐	☐	☐ Cutting, Notching, and Boring
☐	☐	☐ Fire Blocking
☐	☐	☐ Header Sizes
☐	☐	☐ Top Plate Nailing

D. Roof Framing

1. Truss Roof Framing (as per design):

Approved Documents which show
- ☐ Layout Plans
- ☐ Truss Members
- ☐ Connection Schedule
- ☐ Permanent Bracing Details
- ☐ Dormers / Roof Structures on Manufacturer's Drawing
- ☐ Equipment / Appliances on Manufacturer's Drawings

- ☐ Location as per Layout
  - ☐ Alignment
- ☐ Bearing
- ☐ Spacing
- ☐ Connections to Bearing Points
- ☐ No Connection to Non-Bearing Points
- ☐ Damage and Defects
  - ☐ Engineered Method of Repair

2. Permanent Truss-To-Truss Bracing (as per design)
- ☐ Layout
- ☐ Size
- ☐ Type
- ☐ Nailing
- ☐ Overlap
- ☐ Termination
- ☐ Transition (i.e. cross) Bracing

3. Gable End Bracing (as per Design)
- ☐ Layout
- ☐ Size
- ☐ Type
- ☐ Nailing
- ☐ Overlap
- ☐ Terminating

4. Solid Sawn Roof Framing
- ☐ Size
- ☐ Grades. Species

Layout
- ☐ Spacing
- ☐ Span
- ☐ Bearing
- ☐ Fastening
  - ☐ Damage Caused by Fasteners (rafters not slit by toenails)
- ☐ Cutting, Notching, and Boring
- ☐ Bridging
- ☐ Ridge Size
- ☐ Hurricane Ties Where Applicable

E. Sheathing

1. Sheathing - Exterior Walls:

Material
- ☐ Panel Span, Thickness

Special Requirements
- ☐ Gapping
- ☐ Layout
- ☐ Corner Bracing (if required)

2. Sheathing - Roof:

Material
- ☐ Panel Span, Thickness

Special Requirements
- ☐ Blocking, Edge (if required)
- ☐ Clips (if required)
- ☐ Gapping
- ☐ Layout

Sheathing, FRT - Roof
- ☐ Four Feet from Firewall
- ☐ Noncorrosive Fasteners

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control # 7-29-04

Date Issued
Permit # 2004-1983

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348 01 Lot 2 Qualification Code

Work Site Location 101 Cooper Landing Rd
Cherry Hill NJ 08002

Owner in Fee Kevin Dollbaum

Address Same as Above

Tel [redacted]

Contractor Same As Above

Address

Tel ( ) FAX (856) 429 4252

Contractor License No.

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co. PSEG

Est. Cost of Elec. Work $ 600

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [X] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
7		Lighting Fixtures
20		Receptacles
10		Switches
2		Detectors Smoke Co
-		Light Poles
-		Motors—Fract. HP
-		Emergency & Exit Lights
-		Communications Points
-		Alarm Devices/F.A.C. Panel
39		
		TOTAL NUMBERS
		Pool Permit/with UW Lights
		Storable Pool/Spa/Hot Tub
		KW Elec. Range/Receptacle
		KW Oven/Surface Unit
		KW Elec. Water Heater
		KW Elec. Dryer/Receptacle
		KW Dishwasher
		HP Garbage Disposal
		KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
		HP Motors 1/+ HP
		KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

FEE (Office Use Only)

TOTAL NUMBERS $ 31.-

Administrative Surcharge $ 5-
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator

[X] Elec. Plans Approved
Date: 02/17/04
Approved by: JF

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 3/16/07
Approved by: GF

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough - Portion			3/13/07	JF
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			5/16/07	JF
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 07/03)

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control # 7-27-04

Date Issued
Permit # 2004-1953

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348 01 Lot 2 Qualification Code

Work Site Location 101 Cooper Landing Rd
Cherry Hill NJ 08002

Owner in Fee Kevin / Dillmann

Address Same as Above

Tel ([redacted])

Contractor Same as Above

Address

Tel ( ) FAX (856) 429 4252

Contractor License No.

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co. PSEG

Est. Cost of Elec. Work $ 800

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [X] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
7		Lighting Fixtures	
20		Receptacles	
10		Switches	
2		Detectors Smoke Co	
-		Light Poles	
-		Motors—Fract. HP	
-		Emergency & Exit Lights	
-		Communications Points	
-		Alarm Devices/F.A.C. Panel	
39			
1		TOTAL NUMBERS	$ 31.-
1		Pool Permit/with UW Lights	
1		Storable Pool/Spa/Hot Tub	
1		KW Elec. Range/Receptacle	
1		KW Oven/Surface Unit	
1		KW Elec. Water Heater	
1		KW Elec. Dryer/Receptacle	
1		KW Dishwasher	
1		HP Garbage Disposal	
1		KW Central A/C Unit	
1		HP/KW Space Heater/Air Handler	
1		KW Baseboard Heat	
1		HP Motors 1/+ HP	
1		KW Transformer/Generator	
1		AMP Service	
1		AMP Subpanels	
1		AMP Motor Control Center	
1		KW Elec. Sign/Outline Light	
1			
1			

Administrative Surcharge $ 5.-
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[✓] Elec. Plans Approved

Date: 7/27/04

Approved by: J

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 07/03)

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control # 7.29.04
Date Issued
Permit # 2004-1983

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348.01 Lot 2 Qualification Code
Work Site Location 101 Cooper Landing Rd

Owner in Fee Kevin Dollbaum
Address 101 Cooper Landing Rd

Tel [redacted]
Contractor
Address Same As Above

Tel ( ) FAX ( ) 429 4252
Fire Protection Equipment, NJ Div of Fire Safety Permit No.
Fire Protection Equipment, NJ Div of Fire Safety Installer No.
Fire Alarm Contractor No.
Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present R-5 Proposed
Constr. Class: Present V-B Proposed
Heating System: [ ] New OR [X] Existing [ ] HVAC
Type: [ ] Gas [X] Oil [ ] Electric [ ] Solar
[ ] Other
Location:

Fire Alarm System: [ ] New OR [X] Existing
Location of Panel:
Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible *Capacity*

Total Cost of Fire Protection Work $ 100

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.
Applicant's Signature/Contractor's Signature
[ ] Certified Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK: Addition w/Bdrm - Tie in 2 new Smoke/CO Detectors to existing interconnected System
Water Supply Source
Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[X] 110v Interconnected		
[ ] CO Detectors/~~110v~~ w/c		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	2	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	2	23
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System (Existing)		
Fired Appliances [ ] Gas or [X] Oil		
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $ 23
TOTAL FEE $ 23

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[X] Fire Plans Approved
Date: 7/29/04
Approved by: CM

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 9/23/04
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System			3/16/07	
Suppression Sys.				
Standpipe	M 1&14.2.4			
Fire Pump	O.U. Chim Tie Low [TYPE L]			
Pre-Eng. System				
Mechanical	3/16/07		9/27/04	
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other Probe	2/7/06		10/13/06	

SPOKE TO CHRIS SITE Admin

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control # 7.22.04
Date Issued
Permit # 2004-1783

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348.01 Lot 22 Qualification Code
Work Site Location 101 Cooper Landing Rd

Owner in Fee Kevin Dollbaum
Address 101 Cooper Landing Rd

Tel [redacted]
Contractor Same As Above
Address

Tel ( ) FAX ( ) 429 4252
Fire Protection Equipment, NJ Div of Fire Safety Permit No.
Fire Protection Equipment, NJ Div of Fire Safety Installer No.
Fire Alarm Contractor No.
Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed R5
Constr. Class: Present Proposed V-B
Heating System: [ ] New OR [X] Existing [ ] HVAC
Type: [ ] Gas [X] Oil [ ] Electric [ ] Solar
[ ] Other
Location:

Fire Alarm System: [X] New OR [X] Existing
Location of Panel:
Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible *Capacity*

Total Cost of Fire Protection Work $ 1.0

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.
Applicant's Signature/Contractor's Signature
[ ] Certified Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Addition w/Bonus Tie in 2 new Smoke/CO Detectors to existing interconnected System
Water Supply Source
Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[X] 110v Interconnected		
[ ] CO Detectors/~~110v~~ w/c		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	2	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	2	23
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System (Existing)		
Fired Appliances [ ] Gas or [X] Oil		
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $ 23
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[ ] Fire Plans Approved
Date: 7/27/04
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued 7-29-04
Control #
Permit # 2004-1983

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348.01 Lot 2

Work Site Location 101 Cooper Landing Rd

Owner in Fee Kevin Dollbaum

Address 101 Cooper Landing Rd

Tele. ([redacted]

Contractor

Address Same As Above

Tele. ( ) Fax (856) 429 4252

Lic. No.

Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size 4" Public Sewer X Private Septic

Water Service Size 1" Public Water Private Well X

Est. Cost of Plumbing Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 7/15/04

Approved by: SDA

SUBCODE APPROVAL

[✓] CO [ ] CCO [ ] CA

Date: 3-16-07

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough	10/13/06	10/30/06	11/7/06	MC
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				
Final			3-16-07	

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature — Contractor's Seal

[ ] Licensed Plumbing Contractor [✓] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
1	Water Closet	9
	Urinal/Bidet	
1	Bath Tub	9
1	Lavatory	9
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
1	Stacks	9
	Other	
	Other	
	Other	

Administrative Surcharge	$	6
Minimum Fee	$	36
DCA Training Fee	$	
TOTAL FEE	$	42

2/7/06 C.O.
2/8 Corrected?
(1) N. Plates ✓
(2) Test DWV
(3) View Piping Rise
(4) 3/4 bolts @ lumber need space?? check code requirement but stoe=ok cold only

(over)

U.C.C. F130 (rev. 3/96)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

10/30/06 INCOMPLETE

11/7/06 Rough @ h/o wm @ 1000'c n/p @ cav. top plate
WET TEST
n/c/w thru ceiling

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued 1-29-04
Control #
Permit # 2004-1983

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 548.01 Lot 2

Work Site Location 101 Cooper Landing Rd

Owner in Fee Kevin Dillahunt

Address 101 Cooper Landing Rd

Tele. ([redacted]

Contractor [illegible] AD

Address Same as Above

Tele. ( ) Fax (856) 429 4252

Lic. No.

Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size 4" Public Sewer X Private Septic

Water Service Size 1" Public Water Private Well X

Est. Cost of Plumbing Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 7/15/04

Approved by: [illegible]

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature — Contractor's Seal

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
1	Water Closet	4
	Urinal/Bidet	
1	Bath Tub	9
1	Lavatory	4
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
1	Stacks	9
	Other	
	Other	
	Other	

Administrative Surcharge	$	6
Minimum Fee	$	36
DCA Training Fee	$	—
TOTAL FEE	$	42

PERMIT # 04-1983 LOT: 2 BLOCK: 348.01

FRAMING CHECKLIST

Instructions: Builder or Builder's representative checks boxes marked 'B'. Building Inspector checks boxes marked 'I'. Responsible Person in Charge of Work signs, initials and dates in spaces provided. Building Inspector initials and dates in spaces provided.

NOTE: ALL ITEMS SHOULD BE AS SHOWN ON THE PLANS OR AS REQUIRED BY CODE.

A. BASEMENT OR CRAWL SPACE

1. ANCHORAGE:

BOLTS
- B ✓ I ✓ SPACING
- B ✓ I ✓ SIZE

STRAPS
- B I SPACING (PER MANUFACTURER'S SPECS)
- B I SIZE

2. SILL PLATES:

- B ✓ I ✓ SIZE
- B ✓ I ✓ GRADE, SPECIES
- B ✓ I ✓ TREATMENT
- B ✓ I ✓ LAPS
- B ✓ I ✓ SILL SEALER
- B ✓ I ✓ PROPER TREATMENT OVER FOUNDATION OPENINGS (BEARING OF JOIST)
- B I TERMITE PROTECTION

3. BEAM POCKETS:

N/A

- B I BEARING/SHIMS
- B I TERMITE PROTECTION OR CLEARANCE

4. COLUMNS:

- B ✓ I ✓ SIZED PER PLAN
- B ✓ I ✓ ATTACHMENT/PLATES
- B ✓ I ✓ SPACING/LOCATION
- B ✓ I ✓ PAINT/COATING

B. FLOOR FRAMING AND FLOORING

1. BOX OR RIM JOIST, OR PERIMETER BAND JOIST:

1ST	2ND	3RD	FLOOR
B I	B ✓	B ✓	SIZE
B I	B ✓	B ✓	GRADE, SPECIES
B I	B ✓	B ✓	SINGLE OR DOUBLE
B I	B I	B I	PRE-ENGINEERED PER MANUFACTURER'S SPECS
B I	B I	B I	CANTILEVERS AS PER DESIGN

2. GIRDERS AND BEAMS:

Need shop drawgs

- B ✓ I SIZED PER PLAN
- B ✓ I TYPE
- B ✓ I GRADE, SPECIES
- B ✓ I LOCATION AND RELATION TO THE PLAN
- B ✓ I NAILING
- B ✓ I ATTACHMENT SCHEDULE
- B ✓ I BEARING
- B ✓ I LAPPING

3. FLOOR JOIST:

1ST	2ND	3RD	FLOOR
B I	B ✓	B I	SIZED PER PLAN
B I	B ✓	B I	GRADE, SPECIES
B I	B I	B I	PRE-ENGINEERED COMPONENTS AS SPECIFIED
B I	B ✓	B I	BEARING
B I	B ✓	B I	NAILING
B I	B ✓	B I	BRIDGING
B I	B ✓	B I	CUTTING AND NOTCHING (AS PER CODE)
B I	B I	B I	POINT LOADS – SUPPORTED AS PER PLAN
B I	B ✓	B I	SPAN HANGERS
B I	B ✓	B I	HEADERS
B I	B ✓	B I	FRAMED OPENINGS

4. FLOORING, SHEATHING, OR DECKING:

1ST	2ND	3RD	FLOOR
MATERIAL			
B I	B I	B I	PANEL SPAN, THICKNESS

SPECIAL REQUIREMENTS

B I	B I	B I	EDGE BLOCKING (IF REQUIRED)
B I	B I	B I	GAPPING
B I	B I	B I	LAYOUT

5. STAIR ATTACHMENT:

1ST	2ND	3RD	FLOOR
B I	B I	B I	BEARING
B I	B I	B I	NAILING

Not installed

I hereby certify that I inspected this building using this checklist and it conforms to the released plans and to the requirements of the Uniform Construction Code, N.J.A.C. 5:23.

Responsible Person in Charge of Work: _____ Date: 10/13/06

Building Inspector Initials: SNK

Date: 10/13/06

U.C.C. F390-1 (01/06)

COMPLETE BOTH SIDES

PERMIT # 04-1983 LOT: 2 BLOCK: 348.01

C. WALL FRAMING

1. EXTERIOR WALL FRAME:

1ST	2ND	3RD	FLOOR
B ✓	B ✓	B I	SIZE
B ✓	B ✓	B I	SPACE
B ✓	B ✓	B I	SPECIES AND GRADE
B ✓	B ✓	B I	CUTTING, NOTCHING, AND BORING
B ✓	B ✓	B I	HEADER SIZES
B ✓	B ✓	B I	JACK STUD BEARING
TOP PLATES			
B ✓	B ✓	B I	NAILING
B ✓	B ✓	B I	LAPS
B I	B I	B I	RAFTER TIES
B I	B I	B I	HURRICANE STRAPS (AS REQUIRED)

2. INTERIOR LOAD-BEARING WALLS:

1ST	2ND	3RD	FLOOR
B I	B I	B I	SIZE
B I	B I	B I	SPACE
B I	B I	B I	LAYOUT - SUPPORT BELOW PER CODE
B I	B I	B I	SPECIES AND GRADE
B I	B I	B I	CUTTING, NOTCHING, AND BORING
B I	B I	B I	FIRE BLOCKING
B I	B I	B I	HEADER SIZES
B I	B I	B I	JACK STUD BEARING
TOP PLATES			
B I	B I	B I	NAILING
B I	B I	B I	LAPS
B I	B I	B I	STRAPPING

3. INTERIOR NON-LOAD-BEARING WALLS:

1ST	2ND	3RD	FLOOR
B ✓	B ✓	B I	SIZE
B ✓	B ✓	B I	SPACE
B ✓	B ✓	B I	SPECIES AND GRADE
B ✓	B ✓	B I	CUTTING, NOTCHING, AND BORING
B ✓	B ✓	B I	FIRE BLOCKING
B ✓	B ✓	B I	HEADER SIZES
B ✓	B ✓	B I	TOP PLATE NAILING

D. ROOF FRAMING

1. TRUSS ROOF FRAMING (AS PER DESIGN):

APPROVED DOCUMENTS WHICH SHOW:

- B ✓ LAYOUT PLANS
- B ✓ TRUSS MEMBERS
- B ✓ CONNECTION SCHEDULE
- B ✓ PERMANENT BRACING DETAILS
- B I DORMERS/ROOF STRUCTURES ON MANUFACTURER'S DRAWINGS
- B I EQUIPMENT/APPLIANCES ON MANUFACTURER'S DRAWINGS
- B ✓ LOCATION AS PER LAYOUT
- B I ALIGNMENT
- B ✓ BEARING
- B ✓ SPACING
- B ✓ CONNECTIONS TO BEARING POINTS
- B I NO CONNECTION TO NON-BEARING POINTS
- B I DAMAGE AND DEFECTS
- B I ENGINEERED METHOD OF REPAIR

2. PERMANENT TRUSS-TO-TRUSS BRACING (AS PER DESIGN):

- B ✓ LAYOUT
- B ✓ SIZE
- B ✓ TYPE
- B ✓ NAILING
- B ✓ OVERLAP
- B ✓ TERMINATION
- B ✓ TRANSITION (I.E., CROSS) BRACING

3. GABLE END BRACING (AS PER DESIGN):

- B I LAYOUT
- B I SIZE
- B I TYPE
- B I NAILING
- B I OVERLAP
- B I TERMINATION

N/A

4. SOLID SAWN ROOF FRAMING:

- B ✓ SIZE
- B ✓ GRADES, SPECIES

LAYOUT

- B ✓ SPACING
- B ✓ SPAN
- B ✓ BEARING
- B ✓ FASTENING
- B I DAMAGE CAUSED BY FASTENERS (RAFTERS NOT SPLIT BY TOENAILS)
- B ✓ CUTTING, NOTCHING, AND BORING
- B ✓ BRIDGING
- B ✓ RIDGE SIZE
- B ✓ HURRICANE TIES WHERE APPLICABLE

E. SHEATHING

1. SHEATHING – EXTERIOR WALLS:

MATERIAL

- B ✓ PANEL SPAN, THICKNESS

SPECIAL REQUIREMENTS

- B ✓ GAPPING
- B ✓ LAYOUT
- B ✓ CORNER BRACING (IF REQUIRED)

2. SHEATHING – ROOF:

MATERIAL

- B ✓ PANEL SPAN, THICKNESS

SPECIAL REQUIREMENTS

- B ✓ BLOCKING, EDGE (IF REQUIRED)
- B ✓ CLIPS (IF REQUIRED)
- B ✓ GAPPING
- B ✓ LAYOUT

SHEATHING, FRT – ROOF

- B I FOUR FEET FROM FIREWALL
- B I NONCORROSIVE FASTENERS

COMPLETE BOTH SIDES

U.C.C. F390-2 (01/06)

Initials: Resp. Person in Charge of Work _____ Building Inspector Spiro Kotoulas

INTERNATIONAL PAPER
ENGINEERED WOOD PRODUCTS
KeyBeam® 4.4[3]
lmBeamEngine 6.416a
Materials Database 569

84 Lumber - Deptford, NJ
101 Cooper Landing Rd
Job

10-19-06
11:21am
1 of 1

Member Data

Description: Beam #2

Standard Load:
Live Load: 40 PLF
Dead Load: 15 PLF
DOL: 100%

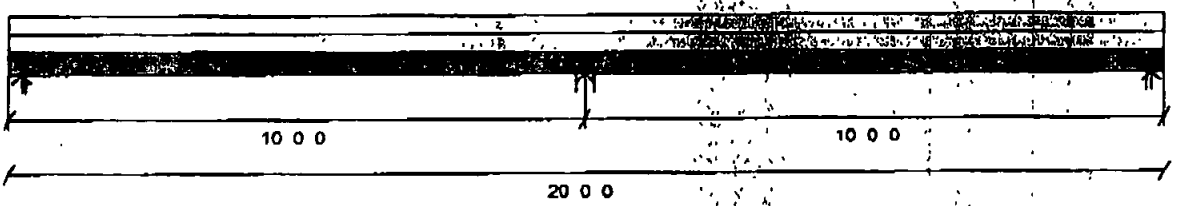
Member Type: Beam
Lateral Bracing: Continuous
Moisture Condition: Dry
Deflection Criteria: L/360 live, L/240 total
Deck Connection: Nailed
Filename : KYB2

Application: Floor

Building Code: IBC / IRC
0.500" max. LL
Member Weight: 8.5 PLF

Non-standard Loads

Type (Description)	Begin	End	Trib. Width	Live Start	Live End	Dead Start	Dead End	DOL
Additional Uniform (PSF)	0' 0.00"	20' 0.00"	8' 0.00"	40		15		100%
Additional Uniform (PLF)	0' 0.00"	20' 0.00"		0		120		100%



Bearings and Reactions

	Location	Type	Input Length	Minimum Length	Total	Worst Case 100%	Dead	Total
1	0' 0.00"	Wall	3.50"	1.50"	2287#	1541#	967#	2508#
2	9' 9.38"	Wall	3.50"	2.90"	7624#	4402#	3222#	7624#
3	19' 6.75"	Wall	3.50"	1.50"	2287#	1541#	967#	2508#

Design spans
9' 9.38" 9' 9.38"

Product: 3 1/2x9 1/2 West Fraser 3000F-1.8E 1 ply
Component Member Design has Passed Design Checks.**
Design assumes continuous lateral bracing for both chords.

Allowable Stress Design

	Actual	Allowable	Capacity	Location	Loading
Positive Moment	5037.'#	13508.'#	37%	3.91'	Odd Spans 100%
Negative Moment	7457.'#	13508.'#	55%	9.78'	Total load 100%
Shear	3318.#	7756.#	42%	9.29'	Total load 100%
Max. Reaction	7623.#	9188.#	82%	9.78'	Dead load
LL Deflection	0.1155"	0.3260"	L/999+	4.4'	Odd Spans 100%
TL Deflection	0.1653"	0.4891"	L/709	4.4'	Odd Spans 100%

Control: Max. Reaction

MIKE REDDING
EASTERN ENGINEERED WOOD PRODUCTS

Keymark ENTERPRISES, LLC

**Passing is defined as when the member, floor joist, beam or girder, shown on this drawing meets applicable design criteria for Loads, Loading Conditions, and Spans listed on this sheet. The design must be reviewed by a qualified designer or design professional as required for approval. This design assumes product installation according to the manufacturer's specifications.

Burgess & Associates, Inc.
6834 Route 130 North
Pennsauken, New Jersey 08110
856-663-0800
856-663-1888 FAX

November 9, 2006

Mr. Kevin Dollbaum
101 Cooper Landing Road
Cherry Hill, NJ 08002

Re: Existing beam at 101 Cooper Landing Road residence

Dear Mr. Dollbaum:

In response to your request I examined the existing "Parallam" beam supporting a portion of the existing roof and floor structure of residence listed above on October 20, 2006.

At that time I found in place a nominal 3 x 9 ¼" Parallam beam spanning approximately 14'6" supporting structure(s) framing an opening between front sitting room and larger main room.

This beam will be supporting existing framing and new floor structure that is currently being completed.

This beam will NOT support the loads being proposed. Indeed, I have not found any reasonable combination of wood or steel plate that will satisfactorily support loads to be applied, meet deflection limitations, and fit into existing framed dimensions (i.e. 9" depth of existing beam).

I suggest that you replace existing inadequate wood beam with steel beam "W8x21" supported on pipe columns of 3" diameter or 6 x 6 timber posts. Columns may bear on existing exterior masonry wall provided 3 cores of masonry block are grout-filled down to existing foundation footing.

Please call me if you have any questions.

Sincerely,

Peter Burgess NJ PE Lic. #30629

Enc.

PGB/rw

INTERNATIONAL PAPER
ENGINEERED WOOD PRODUCTS
FcyBeam® 4.413j
JimBeamEngine 4.416a
Materials Database: 569

84 Lumber - Deptford, NJ
101 Cooper Landing Rd.
Job

10-19-06
11:18am
1 of 1

Member Data

Description: Beam #1

Standard Load:
Live Load: 40 PLF
Dead Load: 15 PLF
DOL: 100%

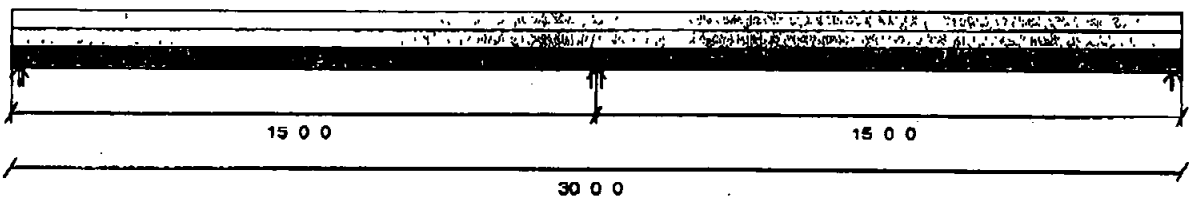
Member Type: Beam
Lateral Bracing: Continuous
Moisture Condition: Dry
Deflection Criteria: L/360 live, L/240 total
Deck Connection: Nailed
Filename : KYB1

Application: Floor

Building Code: IBC / IRC
0.500" max. LL
Member Weight: 12.9 PLF

Non-standard Loads

Type (Description)	Begin	End	Trib. Width	Live Start	Live End	Dead Start	Dead End	DOL
Additional Uniform (PSF)	0' 0.00"	30' 0.00"	8' 0.00"	40		15		100%
Additional Uniform (PLF)	0' 0.00"	30' 0.00"		0		120		100%



Bearings and Reactions

	Location	Type	Input Length	Minimum Length	Total	Worst Case 100%	Dead	Total
1	0' 0.00"	Wall	3.50"	1.50"	3481#	2329#	1485#	3814#
2	14' 9.38"	Wall	3.50"	3.28"	11602#	6652#	4950#	11602#
3	29' 6.75"	Wall	3.50"	1.50"	3481#	2329#	1485#	3814#

Design spans
14' 9.38" 14' 9.38"

Product: 5 7/16 x 9 1/2 Rosboro BigBeam 1 ply
Component Member Design has Passed Design Checks.**
Design assumes continuous lateral bracing for both chords.

Allowable Stress Design

	Actual	Allowable	Capacity	Location	Loading
Positive Moment	11569.'#	20447.'#	56%	23.65'	Even Spans 100%
Negative Moment	17148.'#	20447.'#	83%	14.78'	Total load 100%
Shear	5304.#	10331.#	51%	14.79'	Total load 100%
Max. Reaction	11601.#	12370.#	93%	14.78'	Dead load
LL Deflection	0.3322"	0.4927"	L/533	6.65'	Odd Spans 100%
TL Deflection	0.4781"	0.7391"	L/370	6.65'	Odd Spans 100%

Control: Max. Reaction

Keymark

WARE REDDING
EASTERN ENGINEERED WOOD PRODUCTS

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I suggest that you replace existing inadequate wood beam with steel beam "W8x21" supported on pipe columns of 3" diameter or 6 x 6 timber posts. Columns may bear on existing exterior masonry wall provided 3 cores of masonry block are grout-filled down to existing foundation footing.

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Peter Burgess NJ PE Lic. #30629

Enc.

PGB/rw

INTERNATIONAL PAPER
ENGINEERED WOOD PRODUCTS
KeyBeam® 4.413j
IsmBeamEngine 4.416a
Materials Database: 569

84 Lumber - Deptford, NJ
101 Cooper Landing Rd.
Job

10-19-06
11:18am
1 of 1

Member Data

Description: Beam #1

Standard Load:
Live Load: 40 PLF
Dead Load: 15 PLF
DOL: 100%

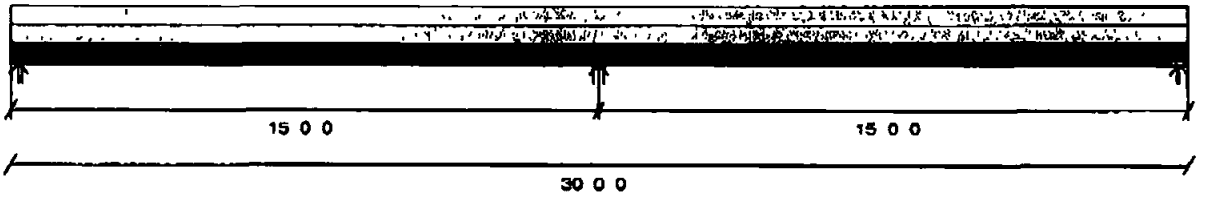
Member Type: Beam
Lateral Bracing: Continuous
Moisture Condition: Dry
Deflection Criteria: L/360 live, L/240 total
Deck Connection: Nailed
Filename : KYB1

Application: Floor

Building Code: IBC / IRC
0.500" max. LL
Member Weight: 12.9 PLF

Non-standard Loads

Type (Description)	Begin	End	Trib. Width	Live Start	Live End	Dead Start	Dead End	DOL
Additional Uniform (PSF)	0' 0.00"	30' 0.00"	8' 0.00"	40		15		100%
Additional Uniform (PLF)	0' 0.00"	30' 0.00"		0		120		100%



Bearings and Reactions

	Location	Type	Input Length	Minimum Length	Total	Worst Case 100%	Dead	Total
1	0' 0.00"	Wall	3.50"	1.50"	3481#	2329#	1485#	3814#
2	14' 9.38"	Wall	3.50"	3.28"	11602#	6652#	4950#	11602#
3	29' 6.75"	Wall	3.50"	1.50"	3481#	2329#	1485#	3814#

Design spans
14' 9.38" 14' 9.38"

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Design assumes continuous lateral bracing for both chords.

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	Actual	Allowable	Capacity	Location	Loading
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LL Deflection	0.3322"	0.4927"	L/533	6.65'	Odd Spans 100%
TL Deflection	0.4761"	0.7391"	L/370	6.65'	Odd Spans 100%

Control: Max. Reaction

MIKE REDDING
EASTERN ENGINEERED WOOD PRODUCTS

Keymark

**Passing is defined as when the member, floor joist, beam or girder, shown on this drawing meets applicable design criteria for Loads, Loading Conditions, and Spans listed on this sheet. The design must be reviewed by a qualified designer or design professional as required for approval. This design assumes product installation according to the manufacturer's specifications.

INTERNATIONAL PAPER
ENGINEERED WOOD PRODUCTS
KeyBeam® 4.413j
ImBeamEngine 4.415s
Materials Database 569

84 Lumber - Deptford, NJ
101 Cooper Landing Rd.
Job

10-19-06
11:21am
1 of 1

Member Data

Description: Beam #2

Standard Load:
Live Load: 40 PLF
Dead Load: 15 PLF
DOL: 100%

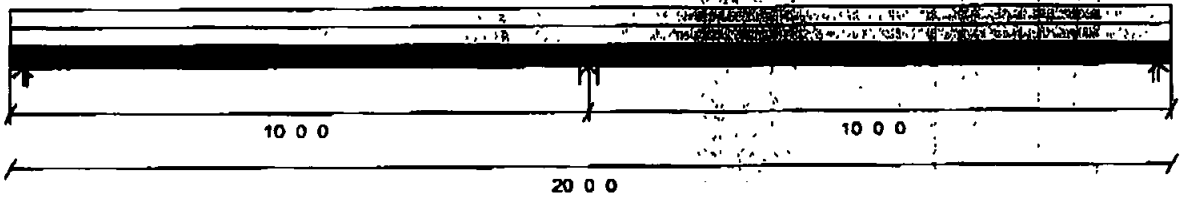
Member Type: Beam
Lateral Bracing: Continuous
Moisture Condition: Dry
Deflection Criteria: L/360 live, L/240 total
Deck Connection: Nailed
Filename : KYB2

Application: Floor

Building Code: IBC / IRC
0.500" max: LL
Member Weight: 8.5 PLF

Non-standard Loads

Type (Description)	Begin	End	Trib. Width	Live Start	Live End	Dead Start	Dead End	DOL
Additional Uniform (PSF)	0' 0.00"	20' 0.00"	8' 0.00"	40		15		100%
Additional Uniform (PLF)	0' 0.00"	20' 0.00"		0		120		100%



Bearings and Reactions

	Location	Type	Input Length	Minimum Length	Total	Worst Case 100%	Dead	Total
1	0' 0.00"	Wall	3.50"	1.50"	2287#	1541#	967#	2508#
2	9' 9.38"	Wall	3.50"	2.90"	7624#	4402#	3222#	7624#
3	19' 6.75"	Wall	3.50"	1.50"	2287#	1541#	967#	2508#

Design spans
9' 9.38" 9' 9.38"

Product: 3 1/2x9 1/2 West Fraser 3000F-1.8E 1 ply
Component Member Design has Passed Design Checks.**
Design assumes continuous lateral bracing for both chords.

Allowable Stress Design

	Actual	Allowable	Capacity	Location	Loading
Positive Moment	5037.'#	13508.'#	37%	3.91'	Odd Spans 100%
Negative Moment	7457.'#	13508.'#	55%	9.78'	Total load 100%
Shear	3318.#	7758.#	42%	9.29'	Total load 100%
Max. Reaction	7623.#	9188.#	82%	9.78'	Dead load
LL Deflection	0.1155"	0.3260"	L/999+	4.4'	Odd Spans 100%
TL Deflection	0.1653"	0.4891"	L/709	4.4'	Odd Spans 100%

Control: Max. Reaction

MIKE REDDING
EASTERN ENGINEERED WOOD PRODUCTS

Keymark ENTERPRISES, LLC

**Passing is defined as when the member, floor joist, beam or girder, shown on this drawing meets applicable design criteria for Loads, Loading Conditions, and Spans listed on this sheet. The design must be reviewed by a qualified designer or design professional as required for approval. This design assumes product installation according to the manufacturer's specifications.

TOWNSHIP OF CHERRY HILL
DEPARTMENT OF CODE ENFORCEMENT

FIRE SUBCODE REQUIREMENTS
DOLLBAUM RESIDENCE
101 COOPER LANDING ROAD
BLOCK 348.01, LOT 2
JULY 27, 2004

Smoke Detector Installation Guidelines:

- Smoke detectors shall be mounted and located as per the manufacturer's installation instructions, NFPA 72-1999, and its UL listing. Smoke detectors shall be located at least three (3) feet from and HVAC supply or return registers (NFPA 72-1999, Section 2-3.5.1).
- Flat Vaulted or Tray Ceilings: Smoke detectors shall be mounted on the upper most section of the ceiling NFPA 72, Section 2-3.4.3.1.
- Peaked or Cathedral ceilings: Smoke detectors shall be mounted within three (3) of the peak, measured horizontally from the peak NFPA 72, Section 2-3.4.7.
- Smoke detectors shall be located at least three (3) feet from any bathroom doors and at least three (3) feet from any kitchen doorways or openings. NFPA 72, Section 8-1.4.2.

Carbon Monoxide Alarm Requirements:

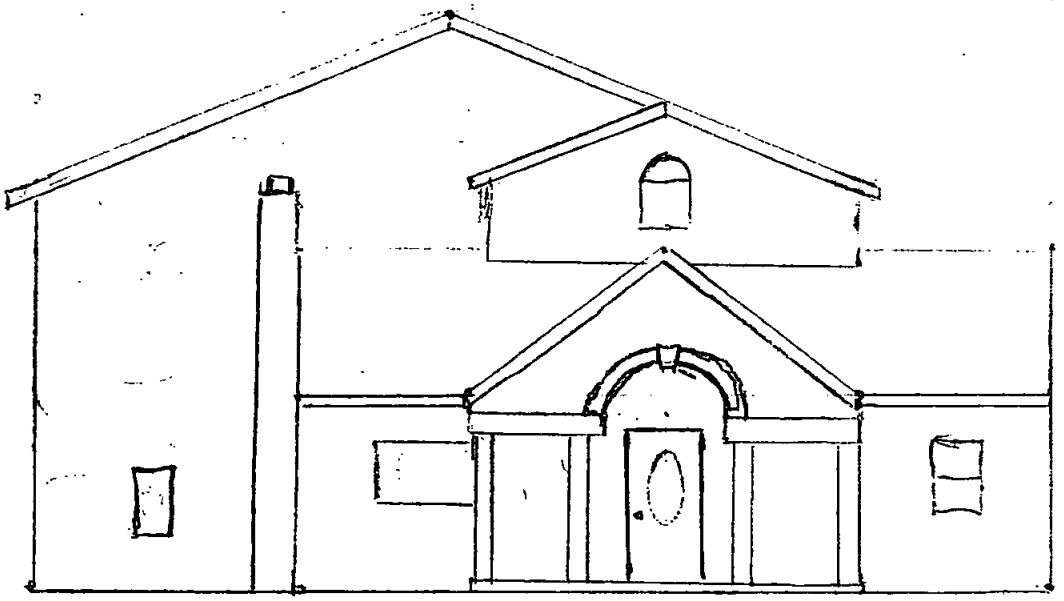
- Provide a carbon monoxide alarm in the immediate vicinity of each sleeping area. N.J.A.C. 5:23-3.20(c).

If you have any questions, please feel free to contact Bill Cattell, Fire Protection Subcode Official, Cherry Hill Township, at 856-488-7855.

Addition

Pg	Description
1	Front Elevation
2	Left Side Elevation
3	Right side Elevation
4	Plan View
5	First Floor Plan
6	Second Floor Plan
7	Second Floor Framing Plan
8	Wall Sections
9	Roof Framing Plan
10	1st Floor Electric
11	2nd Floor Electric
12	Plumbing Riser Diagram
owner	Kevin & Kristina Dollbaum

OFFice Copy

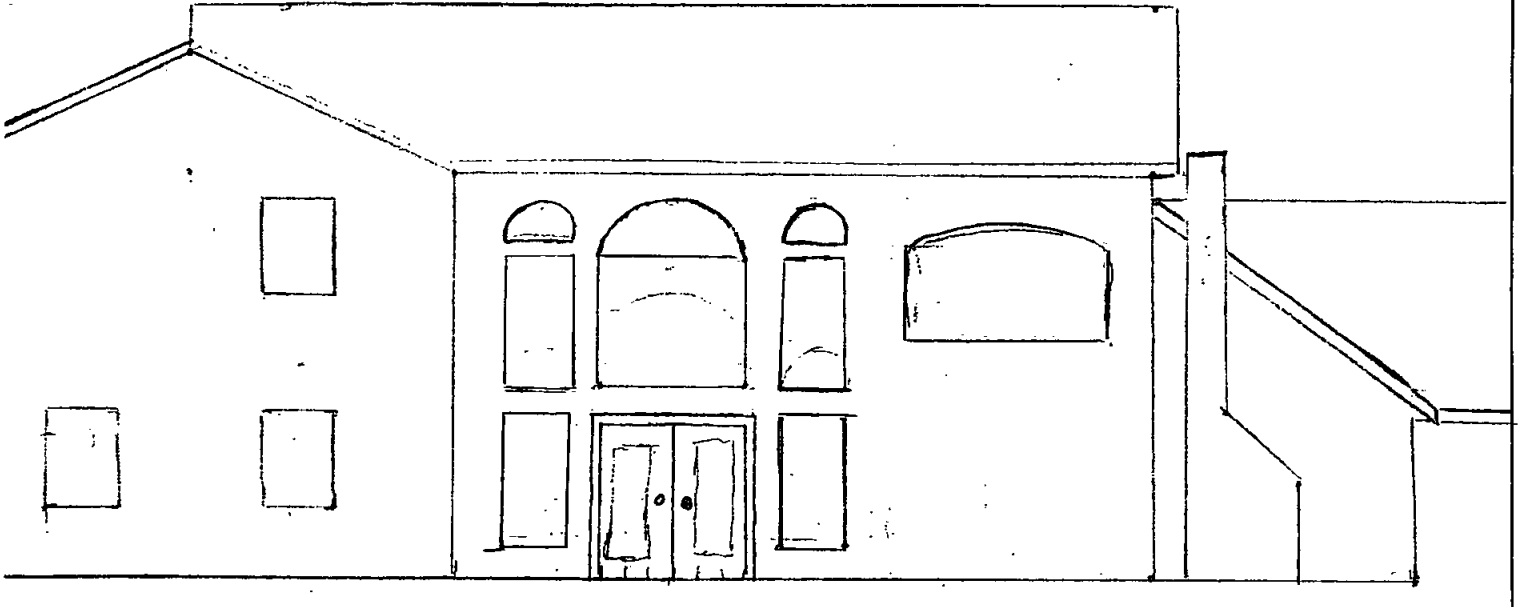


1/8" = 1'

Front Elevation

Pg 1

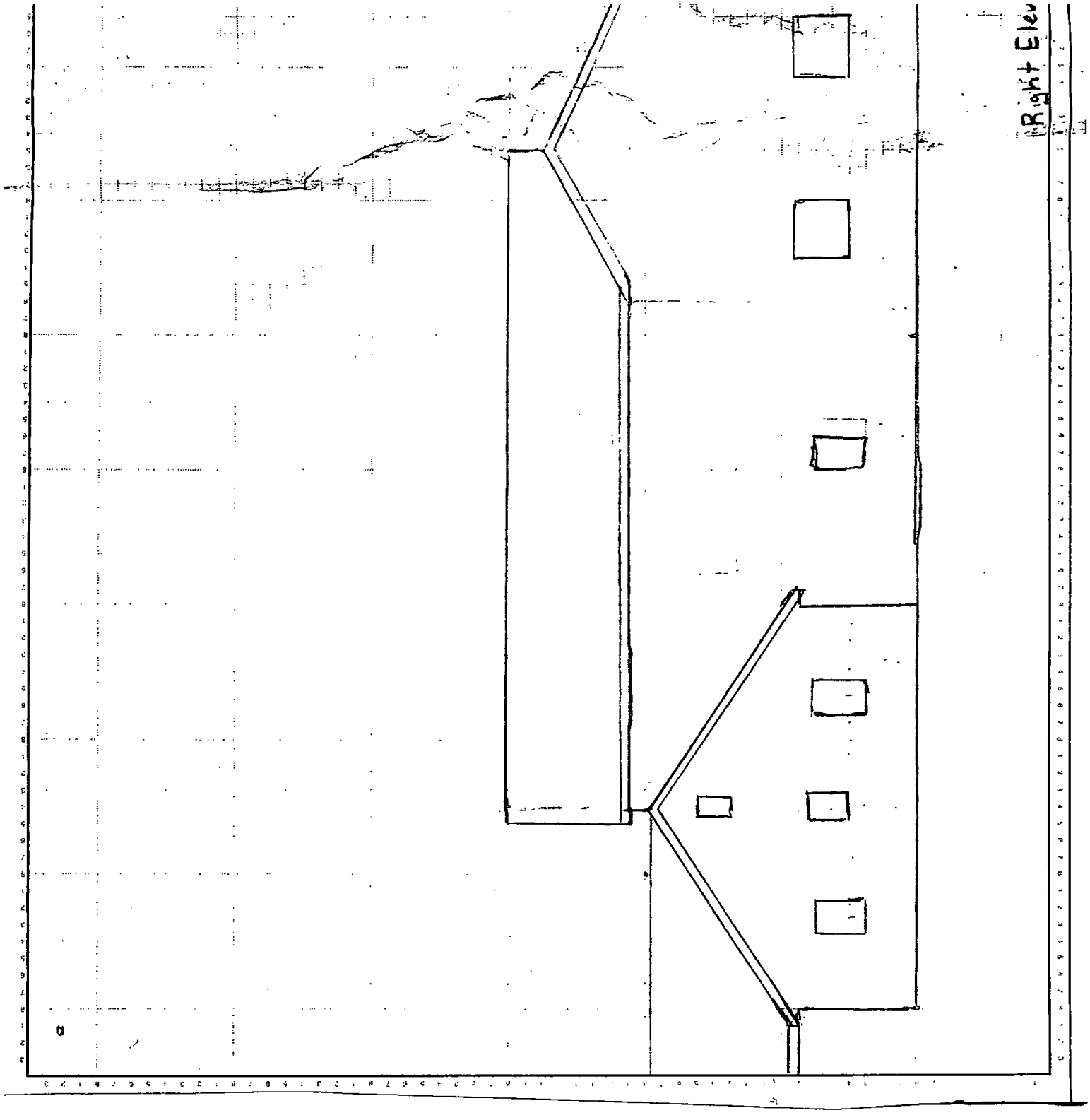
R5 2



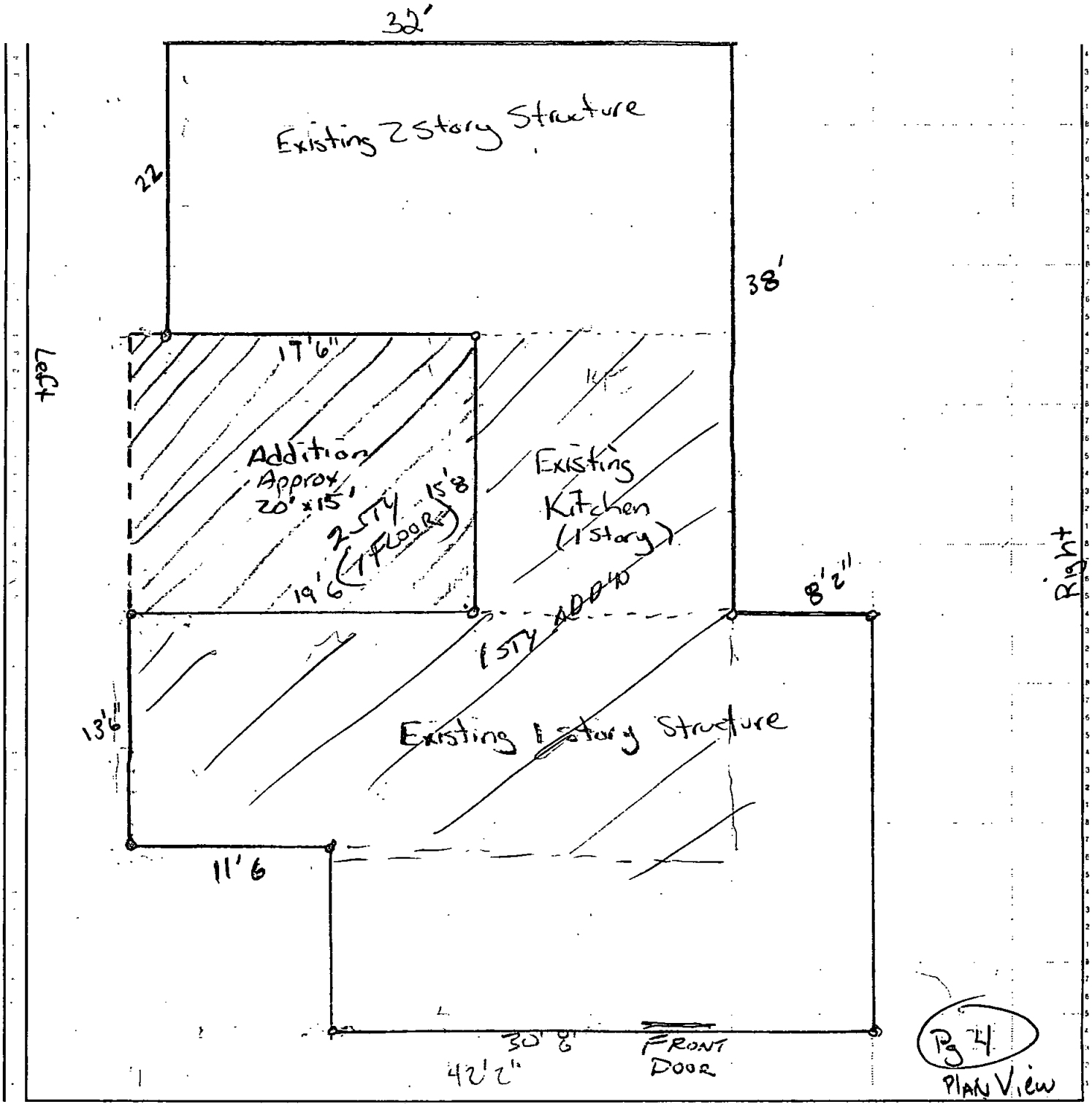
(P2)

1/8 = 1'

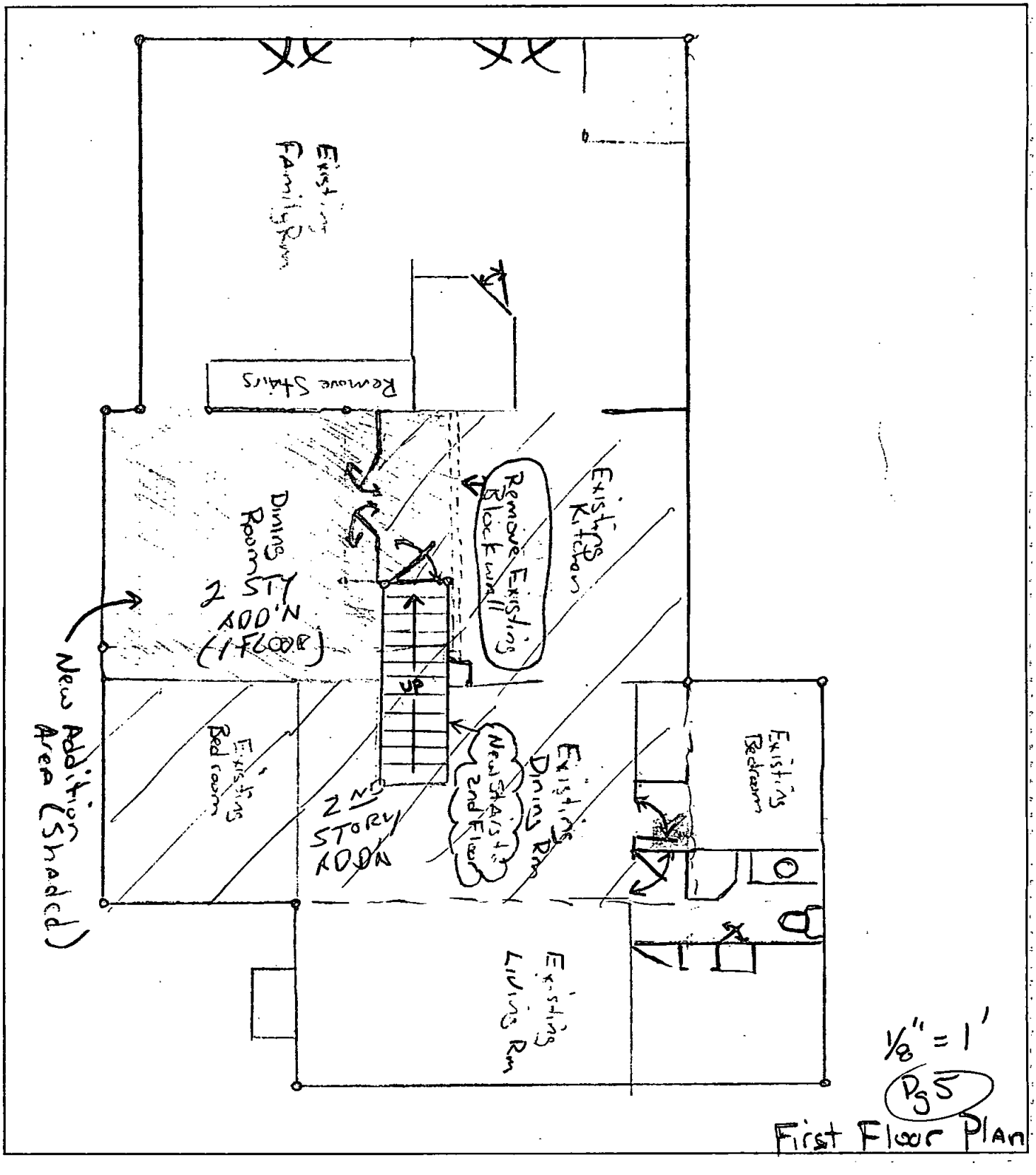
Left Elevation



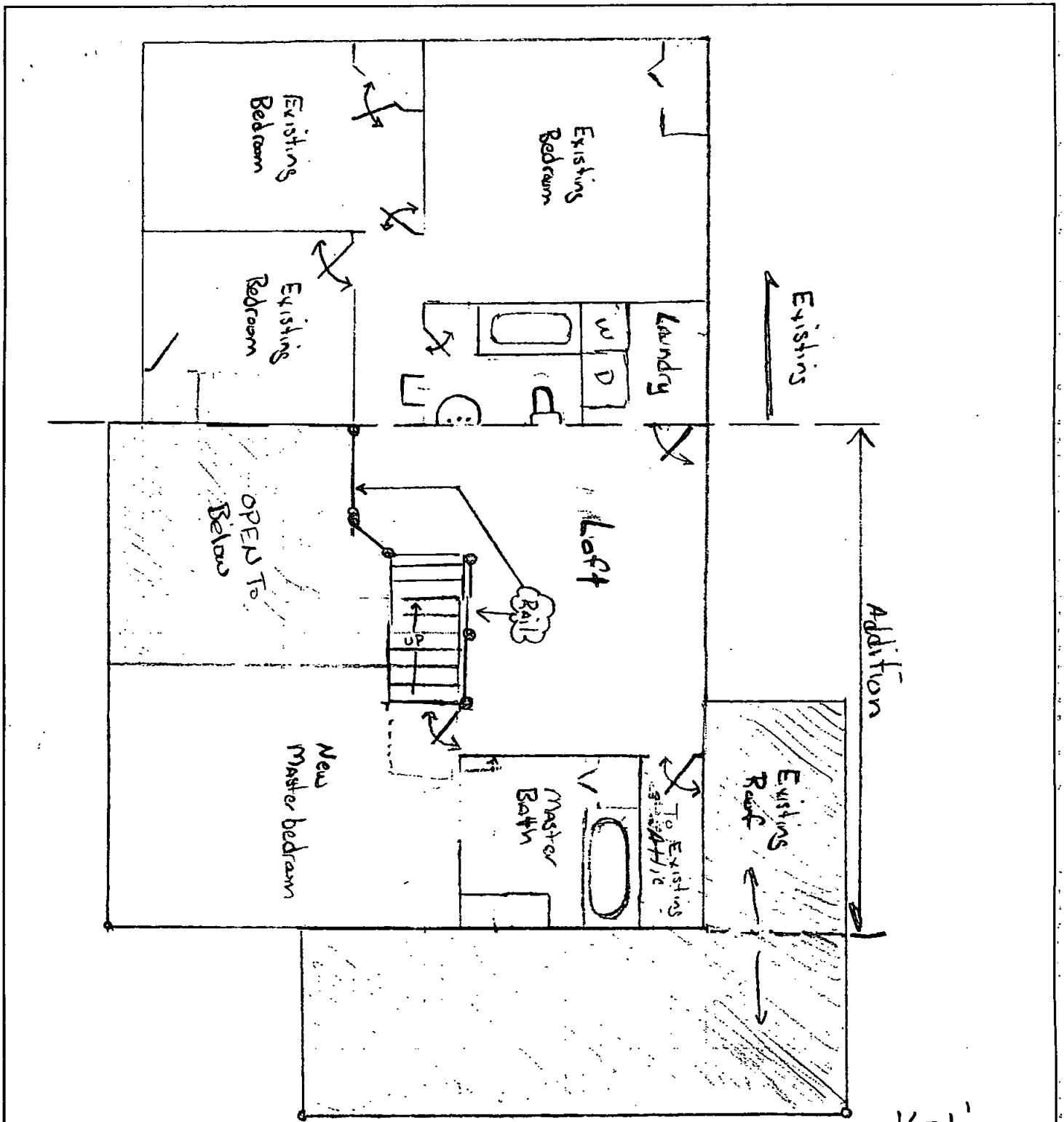
P3


32'
Existing 2 Story Structure
22'
38'
Left
17'6"
Addition
Approx.
20' x 15'
2 STY (1 FLOOR)
15'8
19'6
Existing
Kitchen
(1 story)
8'2"
Right
1 STY ADD'N
13'6"
Existing 1 story Structure
11'6
30'8"
FRONT DOOR
42'2"
Pg 4
PLAN View
Front

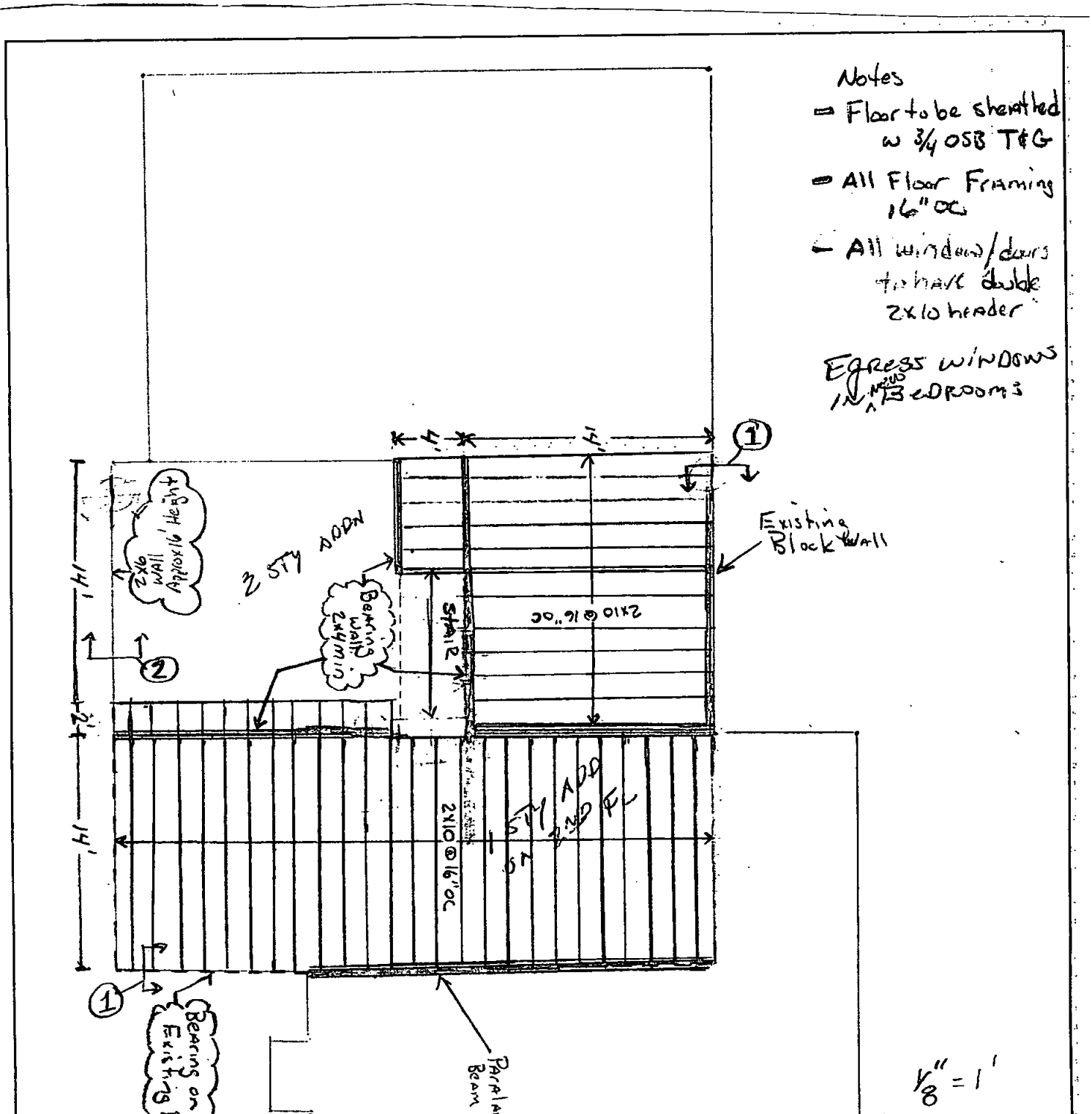
1

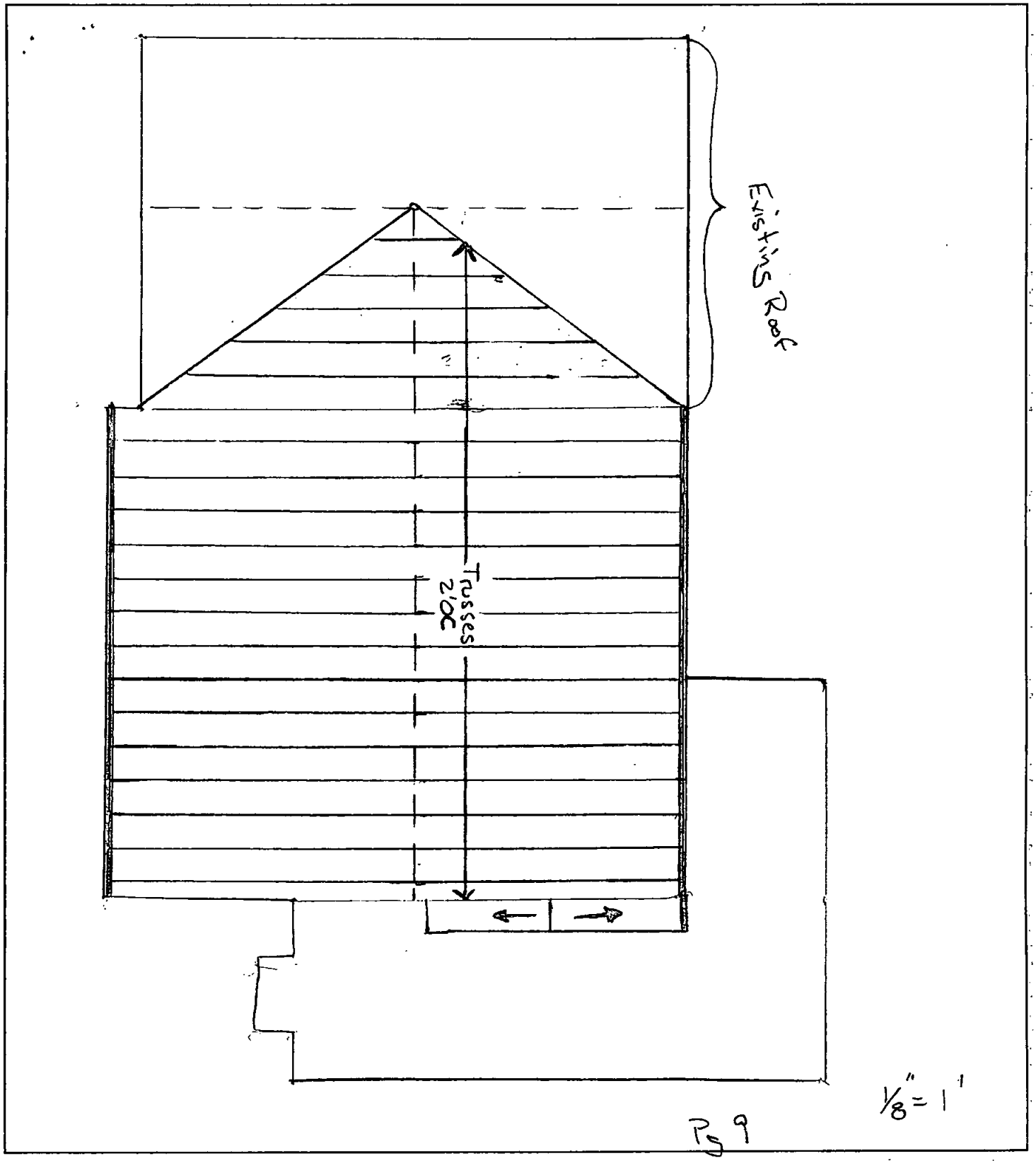


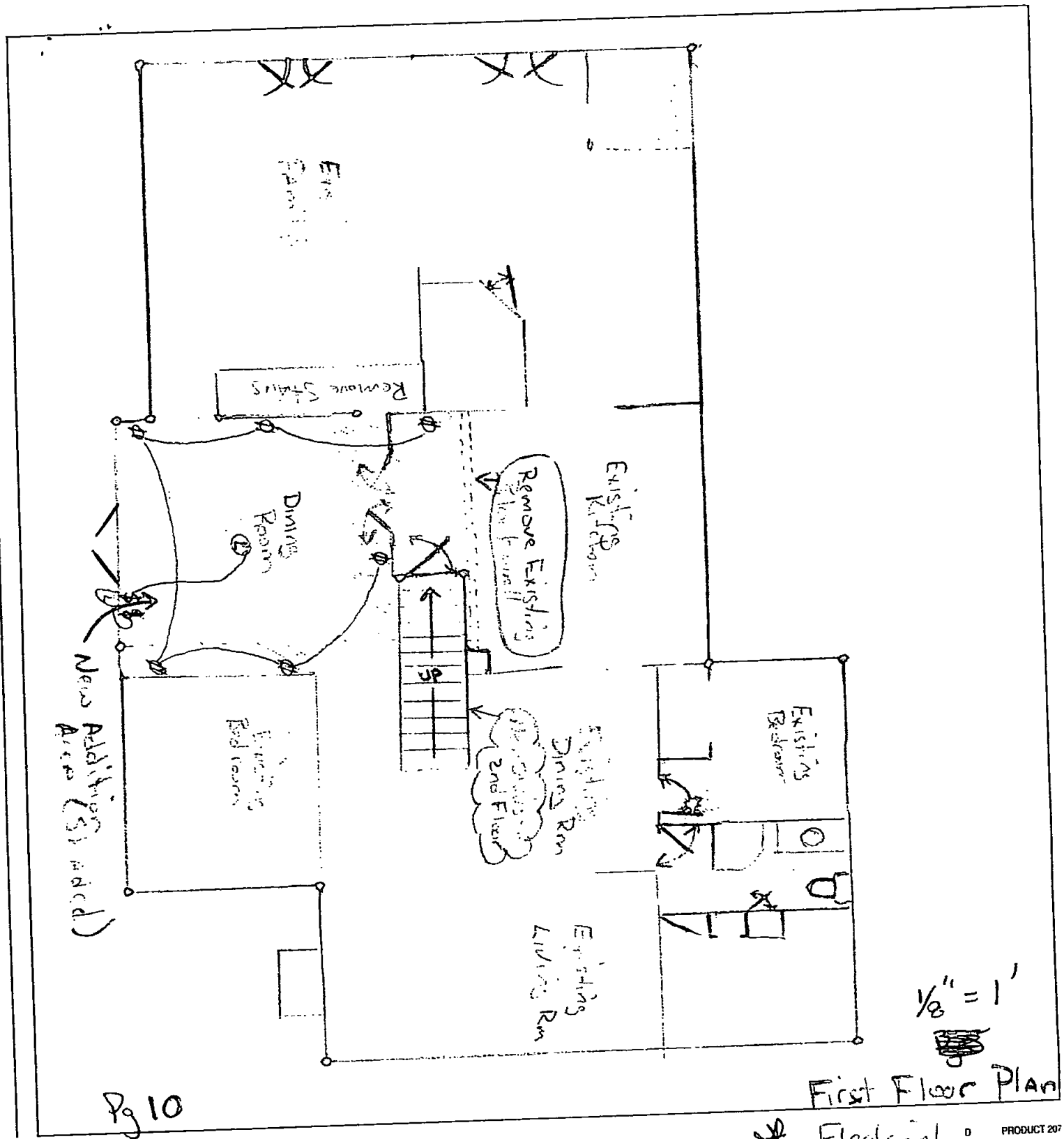
First Floor Plan


Existing Bedroom
Existing Bedroom
Existing Bedroom
W
D
Laundry
Existing
OPEN To Below
Loft
Rail
UP
Addition
New Master bedroom
Master Bath
To Existing Attic
Existing Roof
1/8 = 1'
2ND Floor Plan

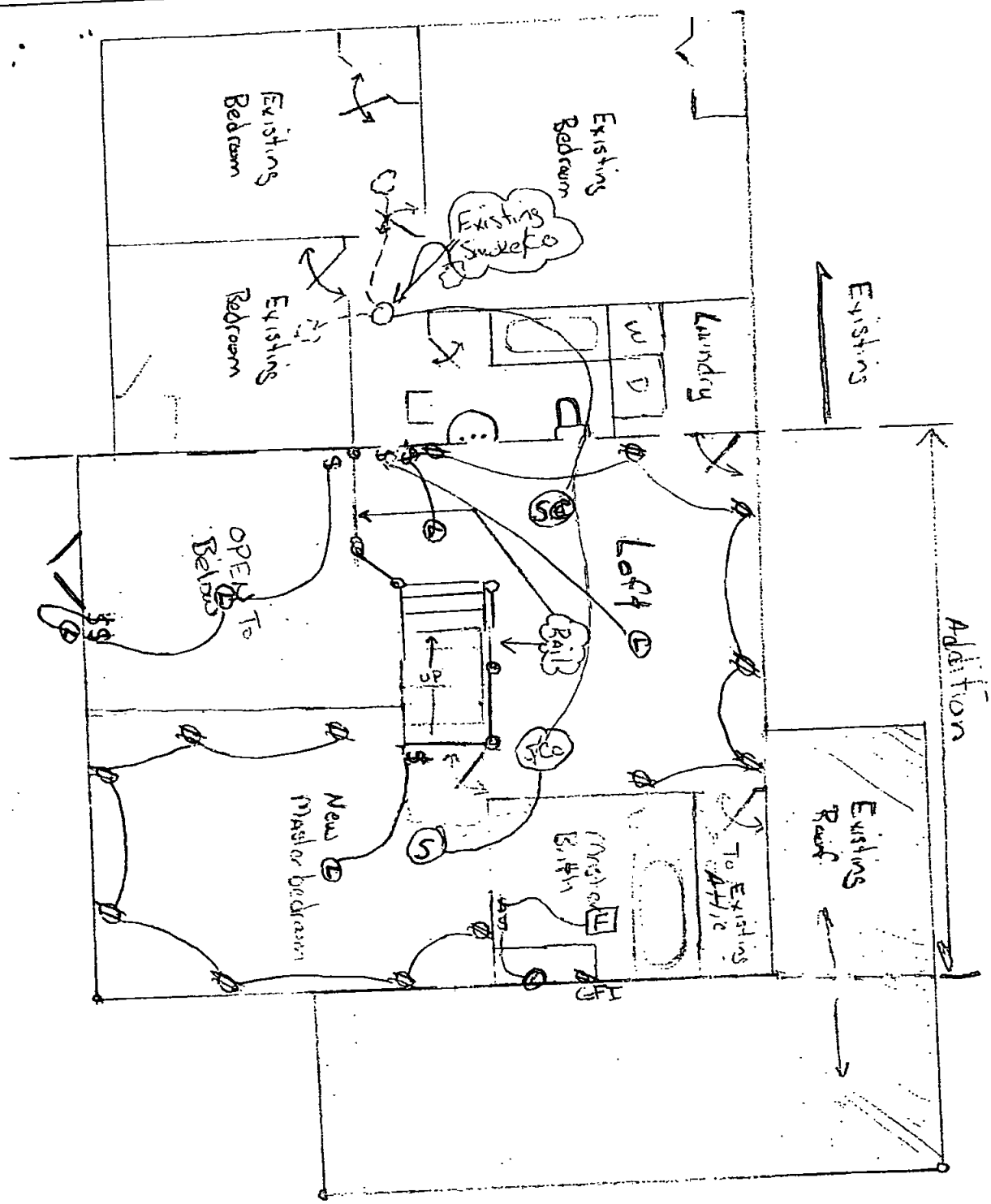
PJ6


Notes
- Floor to be sheathed w 3/4 OSB T&G
- All Floor Framing 16" OC
- All window/doors to have double 2x10 header
Egress windows in MBR and 2 BEDROOMS
1
2
2 STY ADDN
Bearing wall 2x4 @ 16" OC
Existing Block Wall
2x10 @ 16" OC
STAIR
2x10 @ 16" OC
2ND FL
Parapet Beam
Bearing on Existing Block wall
1/8" = 1'
2nd Floor Framing Plan
Pg 7


Existing Roof
Trusses 2'OC
1/8" = 1'
Pg 9



OPENINGS, STAIRWELL, HALLWAY LIGHTING & RECP TO CONFORM TO NEC 2002



PJ #11

D PRODUCT 207

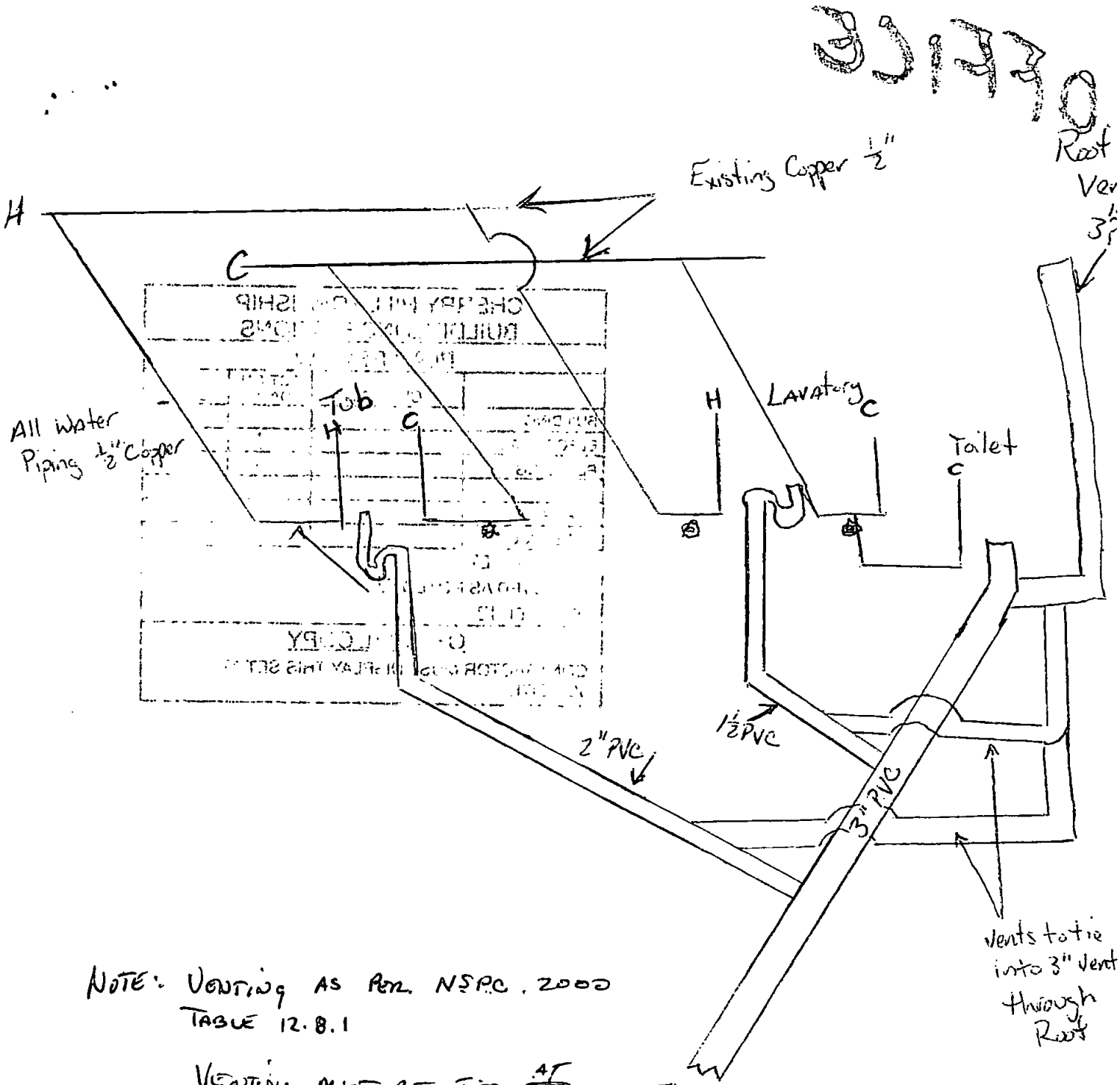
Notes

Electric to tie into existing 200A Panel

Smoke/Co Detectors to tie into existing interconnected system

Electrical Plan

- ⌀ - outlet
- GFI - GFI outlet
- $ - Switch
- ⌀ - Light Fixture
- (S) - Smoke Detector
- (S/C) - Smoke Co Detector



NOTE: VENTING AS PER N.S.P.C. 2000 TABLE 12.8.1

VENTING MUST BE TIED ~~AT~~ LEAST 6" ABOVE FLOOD RIM. 12.11.26

Tie into existing Drain Sewer Line

Plumbing
Riser Diagram

Pg 17.

OFFICE

RECEIVED
JUL 12 2004
BUILDING INSPECTIONS

CHERRY HILL TOWNSHIP BUILDING INSPECTIONS			
PLAN REVIEW			
	OFFICIAL	ACTION DATE	REC'D DATE
BUILDING	[signature]	7.26.04	
ELECTRICAL	[signature]	07/13	
PLUMBING	[signature]	7/15/04	
FIRE	[signature]	7/21/04	
OTHER			
CONSTRUCTION			
APPROVED ☐			
APPROVED AS NOTED ☒ (P)			
REJECTED ☐			
OFFICIAL COPY CONTRACTOR MUST DISPLAY THIS SET AT JOB SITE.			

AS NOTED

SEE RISER DIAGRAM NOTES

TOWNSHIP OF CHERRY HILL
Department of Community Development

820 Mercer Street, Room 202 • Cherry Hill, NJ 08002 • (856) 488-7870 • (856) 661-4746 fax • www.cherryhill-nj.com

ZONING APPROVAL APPLICATION

No. 4229

☒ Building Permit ☐ Certificate of Occupancy Block 348.01 Lot 2 Zone R-2

Property Owner: Kevin Dollbaum Phone Number [redacted]

Address of Property: 101 Cooper Landing Rd Cherry Hill NJ 08002

Address of Owner: Same Existing 2 Story Structure

☐ Fence ☐ Shed ☐ Pool ☐ Patio ☒ Addition ☐ Other _____

Description: Addition to house approx 16x20 Disturbed area

☐ Change of Use: Existing Use _____ Proposed Use _____

THIS APPROVAL ALLOWS THE APPLICANT TO APPLY FOR A BUILDING PERMIT, CERTIFICATE OF OCCUPANCY, OR SIGN PERMIT. **NO USE OR CONSTRUCTION MAY COMMENCE WITHOUT ALL NECESSARY APPROVALS.** I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as an authorized agent. We agree to conform to all application laws of this jurisdiction.

Applicant: [signature] Phone: (856) 429-4252 Email: _____
SIGNATURE

OFFICE USE ONLY

SETBACKS ☐ Corner Lot ☒ Inside Lot Floor Area _____ Height ±24' Depth _____

Front (19.61') Rear ± _____ Smallest Side ±60' Aggregate Sides _____ Second Front _____

ZONING BOARD ACTION	P.O.A. _____	Date Granted _____
PLANNING BOARD ACTION	P.B.C. _____	Date Granted _____

Based on the information on this form and the attached survey and/or plans, this Zoning Approval Application is: ☒ Approved ☐ Denied

Comments: Fence must not exceed (6) feet in height. Horizontal support bars must face in.

PAYMENTS & FEES ☒ Residential: $10 ☐ Non-Residential: $25 Taxes Paid? (Y) N

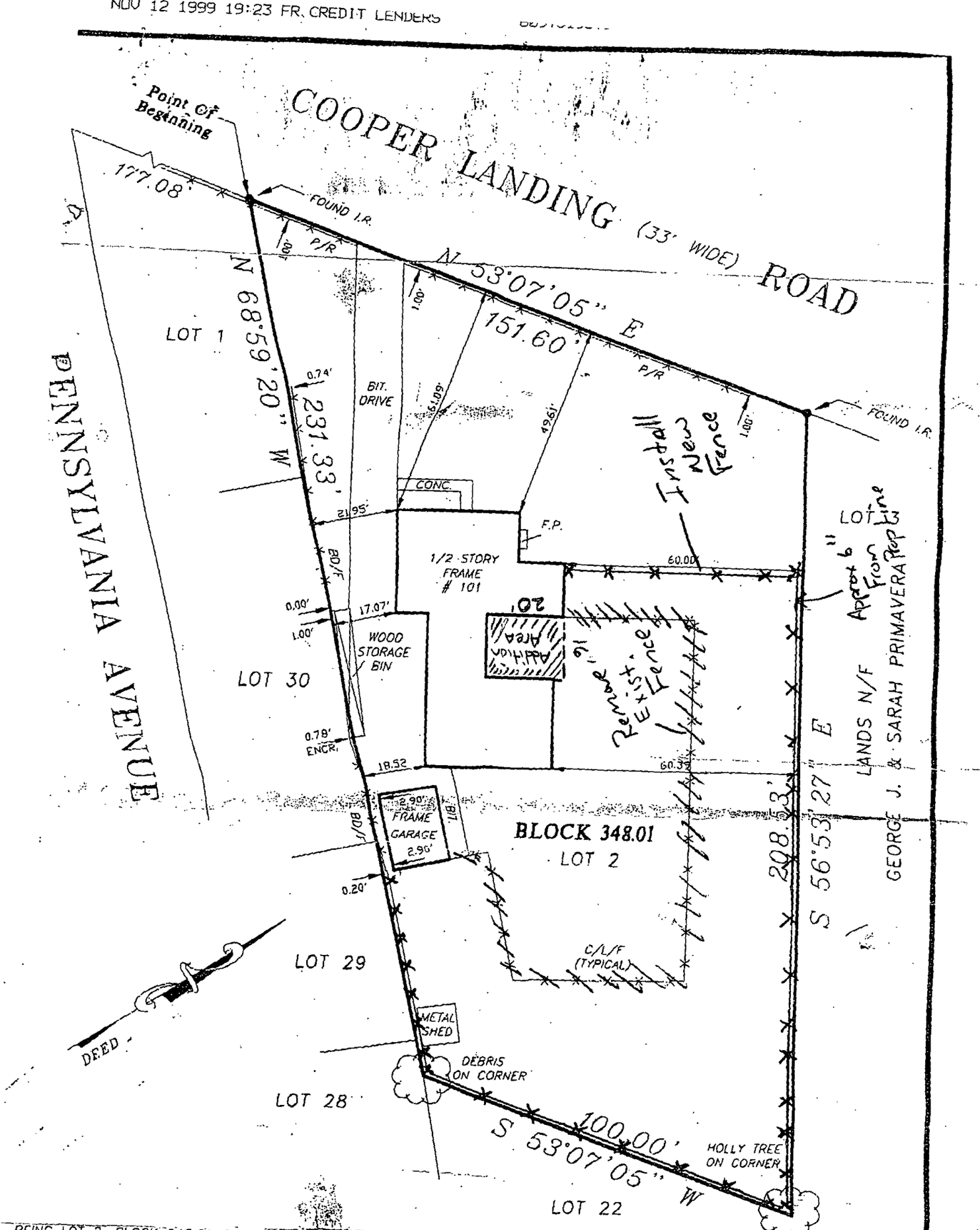
Housing Impact Fee (H.I.F.): Estimated equalized value of improvements $_____

Fee Calculation

☐ Residential (0.5% of value) $_____

☐ Non-Residential (1.0% of value) $_____

[signature] [signature] 7/6/04
Name Title Date



BEING LOT 2, BLOCK 348.01 ON TAX MAP, CONTAINING 24,649± S.F. (0.566± AC.) OF LAND.

KEVIN CHARLES DALLBAUM
KRISTINA L. WALKER
LAWYERS TITLE INSURANCE CORP. &
CREDIT LENDERS TITLE AGENCY INC.
ATLANTIC COAST MORTGAGE SERVICES, INC.

TO _____ ANY INSUROR OF TITLE RELYING HEREON AND ANY OTHER PARTY IN INTEREST:

IN CONSIDERATION OF THE FEE PAID FOR MAKING THIS SURVEY, I HEREBY CERTIFY TO ITS ACCURACY (EXCEPT SUCH EASEMENT, IF ANY, THAT MAY BE LOCATED BELOW THE SURFACE OF THE LANDS OR ON THE SURFACE OF THE LANDS AND NOT VISIBLE) AS AN INDUCEMENT FOR ANY INSUROR OF TITLE TO INSURE THE TITLE TO THE LANDS AND PREMISES SHOWN THEREON.

N.J. LAND SURVEYOR LICENSE No. 34866

JOHN McGLINCHEY

SURVEY AND PLAN OF PREMISES

No. 101 COOPER LANDING ROAD
TOWNSHIP OF CHERRY HILL
CAMDEM COUNTY, N.J.

SCALE: 1"=30'	DRAWN BY: ALTIERRA	DRAWING No. 99-1170
DATE: 11-05-99	REVISED:	

JOHN McGLINCHEY P.L.S. P.P.
5 MARIGOLD COURT • MT. LAUREL, N.J. 08054
TEL. (856) 727-4353 FAX. (856) 727-4360

CHERRY HILL TOWNSHIP
DEPARTMENT OF CODE ENFORCEMENT AND INSPECTIONS
820 MERCER STREET, ROOM 205
CHERRY HILL, NJ 08002
ANTHONY SACCOMANNO, DIRECTOR
PHONE 856-488-7855 FAX 856-486-4575

PLAN REVIEW LIST

Applicant: Kevin Dolbaum **Phone #:**

Address of Job: 101 Cooper Landing Rd **Block #:** 349.01 - 2

Date Received: July 12. 2004 **Date Reviewed:** July 14. 2004

Contact Date:

Subcodes:
Building _____
Plumbing ✓
Electrical _____
Fire _____

Check all that apply:

2000 International Building Code, N.J. _____
2000 International Residential Code, N.J. _____
N.J. Rehabilitation Subcode _____
ICC/ANSI Code- A117- 1998 _____
National Electrical Code 2002 _____
National Standard Plumbing Code 2000 ✓

Use Group _____
Construction Type ____

Comments:

1. Venting of fixtures must be above flood
2. Ok SDD 7/15/04
3.
4.
5.
6.
7.
8.
9.
10.

called 7/14/04 left message SDD

CHERRY HILL, TOWNSHIP OF

(BUILDING DEPT.)

PERMIT WITHOUT A JACKET

TOWNSHIP OF CHERRY HILL
820 MERCER STREET
CHERRY HILL, NJ 08002
856 - 488-7855

Permit Number: 20041983
Permit Date: 07/29/2004
Update Number:
Parcel Number: 48194
Application Date: 07/27/04

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 348.01 Lot : 2 Qualifier :

Work site Location:	101 COOPERLANDING RD. CHERRY HILL	Contractor:	KEVIN DOLLBAUM
Owner In Fee:	KEVIN DOLLBAUM	Address:	101 COOPERLANDING RD.
Address:	101 COOPERLANDING RD.		CHERRY HILL NJ 08002
	CHERRY HILL NJ 08002	Telephone:	[redacted]
Telephone:	[redacted]	Lic. No. / Bldrs. Reg. No.:	
Use Group(s):	R-5	Federal Emp. No.:	

is hereby granted permission to perform the following work :

[X] BUILDING
[X] PLUMBING
[X] ELECTRICAL
[X] FIRE PROTECTION
[ ] ELEVATOR DEVICES
[ ] MECHANICAL
[ ] LEAD HAZARD ABATEMENT
[ ] DEMOLITION
[ ] ASBESTOS ABATEMENT
[ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

2 STORY ADDITION TOTAL 1028 SQ.FT.

ESTIMATED COST OF WORK:

Cost of Construction:	$14,000.00
Cost of Alteration:	$0.00
Cost of Demolition:	$0.00
Total Cost:	$14,000.00

If construction does not commence within one year of date of issuance, or if construction ceases for a period of six months, this permit is void.

Anthony Saccomanno
Contruction Official

7/30/04
Date

PAYMENTS (Office Use Only)

[70-43]	Building	$442.00
[70-48]	Electrical	$36.00
[70-36]	Plumbing	$42.00
[70-37]	Fire Protection	$23.00
[70-61]	Elevator Devices	
[70-38]	Mechanical	
[70-91]	VolFee (DCA)	$44.00
[70-91]	AltFee (DCA)	
[70-50]	CO Fee	$90.00
[70-50]	CCO Fee	
[70-45]	Engineering	
[71-78]	Sewer	
[70-62]	Shade Tree	
[70-53]	Street Opening	
[73-83]	Street Open. Escrow	
	Total :	**$ 677.00**
	All Fees Waived	No

Check Number: 1151
Check amount:
Amount to be Paid: $ 677.00

PAID
2 9 2004

Collected by: SD
Total Cash Amount
Total Check Amount $677.00
Total CC Amount
Grand Total $677.00

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:

348-01

2051585

RECEIVED
JUN 29 2005
BUILDING INSPECTIONS

BLOCK 348-01 LOT 2 QUALIFICATION CODE _____ ADDRESS (SITE) 101 Cooper Landing Rd PERMIT NO. _____

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 101 Cooper Landing Rd
2. Name of Owner in Fee: Kevin C Dallbaum Tel. [redacted]
   Address ~~123~~ Same As Above (street) Cherry Hill (municipality) 08002 (zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Same As Above Tel. ( ) _____
   Address _____
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: ( ) _____
5. Architect or Engineer Owner Tel. ( ) _____
   Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Kevin Dallbaum
   Tel. [redacted] FAX: (856) 429 4252

Relocate panel

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical		92.	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. State Permit Surcharge Fee		1.	
10. Subtotal	$		
11. Cert. of ~~Occupancy~~			
12. Other			
13. TOTAL	$	93.	

Cl. up 2-8-06

0

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ft.	
3. Area — Largest Floor sq. ft.	
4. New Building Area sq. ft.	
5. Volume of New Structure cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ft.	
10. Wetlands yes	
no	
11. Max. Live Load	
12. Max. Occupancy Load	

OPTIONAL (for office use only)

II. PROPOSED WORK	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☒ Electrical	400				7/1/05	✓			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use: R-5
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:

	All Units	Income-restricted
Before Construction		
After Construction		
Net Gain or Loss		

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

LDS CH-B 10104386

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. (X) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, count y, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date 6/13/05

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, count y, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		**Name of Code & Edition**		
Building _____		Energy _____		Other _____
Electrical _____		Barrier Free _____		_____
Plumbing _____		Flood Hazard _____		_____
Fire Protection _____		As Built Elevation Cert. _____		_____
Mechanical _____		Other _____		_____

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No.				

TOWNSHIP OF CHERRY HILL
820 MERCER STREET
CHERRY HILL, NJ 08002
856-488-7855

CERTIFICATE

Date Issued: 06/02/2006
Control #: 51908
Permit #: 20051585

IDENTIFICATION

Block: 348.01 Lot : 2 Qualification Code:
Work Site Location: 101 COOPERLANDING RD.
CHERRY HILL
Owner in Fee: KEVIN C. DOLLBAUM
Address: 101 COOPERLANDING RD.
CHERRY HILL NJ 08002
Telephone: [redacted]
Agent/Contractor: KEVIN C. DOLLBAUM
Address: 101 COOPERLANDING RD.
CHERRY HILL NJ 08002
Telephone: [redacted]
Lic. No./ Bldrs. Reg.No.: _____ Federal Emp. No.: _____
Social Security No.: _____

Home Warranty No: _____
Type of Warranty Plan: [ ] State [ ] Private
Use Group: R-5
Maximum Live Load: _____
Construction Classification: _____
Maximum Occupancy Load: _____
Certificate Exp Date: _____

Description of Work/Use:

Relocation of electrical panel/meter pan --- 200 amp

[ ] **CERTIFICATE OF OCCUPANCY**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[X] **CERTIFICATE OF APPROVAL**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than or will be subject to fine or order to vacate:

[ ] **CERTIFICATE OF CLEARANCE-LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:

[ ] Total removal of lead-based paint hazards in scope of work

[ ] Partial or limited time period(_____ years); see file

[ ] **CERTIFICATE OF CONTINUED OCCUPANCY**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] **CERTIFICATE OF COMPLIANCE**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

_____
Anthony Saccomanno Construction Official

Fees: $0.00
Paid[X]Check No.: 669
Collected by: sd

U.C.C 260 (rev. 5/03) 1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

TOWNSHIP OF CHERRY HILL
820 MERCER STREET
CHERRY HILL, NJ 08002
856 - 488-7855

Permit Number: 20051585
Permit Date: 07/07/2005
Update Number:
Control Number: 51908
Application Date: 07/01/05

CONSTRUCTION PERMIT

IDENTIFICATION

PAID JUL 7 X 2005

OWNER/PROPERTY DETAILS

Block : 348.01 Lot : 2 Qualifier :

Work site Location:	101 COOPERLANDING RD. CHERRY HILL	Contractor:	KEVIN C. DOLLBAUM
Owner In Fee:	KEVIN C. DOLLBAUM	Address:	101 COOPERLANDING RD.
Address:	101 COOPERLANDING RD.		CHERRY HILL NJ 08002
	CHERRY HILL NJ 08002	Telephone:	[redacted]
Telephone:	[redacted]	Lic. No. / Bldrs. Reg. No.:	
Use Group(s):	R-5	Federal Emp. No.:	

is hereby granted permission to perform the following work :

[ ] BUILDING
[X] ELECTRICAL
[ ] ELEVATOR DEVICES
[ ] LEAD HAZARD ABATEMENT
[ ] ASBESTOS ABATEMENT
(Subchapter 8 only)
[ ] PLUMBING
[ ] FIRE PROTECTION
[ ] MECHANICAL
[ ] DEMOLITION
[ ] OTHER

DESCRIPTION OF WORK:

Relocation of electrical panel/meter pan --- 200 amp

ESTIMATED COST OF WORK:

Cost of Construction:	$0.00
Cost of Alteration:	$400.00
Cost of Demolition:	$0.00
Total Cost:	$400.00

If construction does not commence within one year of date of issuance, or if construction ceases for a period of six months, this permit is void.

Anthony Saccomanno
Contruction Official

7/1/05
Date

Failure to obtain all required inspections may result in administrative action.
Final inspections are required before final payment is to be made to contractor.
An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENTS (Office Use Only)

[70-43]	Building	
[70-48]	Electrical	$92.00
[70-36]	Plumbing	
[70-37]	Fire Protection	
[70-61]	Elevator Devices	
[70-38]	Mechanical	
[70-91]	VolFee (DCA)	
[70-91]	AltFee (DCA)	$1.00
[70-50]	CO Fee	
[70-50]	CCO Fee	
[70-45]	Engineering	
[71-78]	Sewer	
[70-62]	Shade Tree	
[70-53]	Street Opening	
[73-83]	Street Open. Escrow	
	Check Number:	669
	Total : $ 93.00	
	Check amount:	$93.00
	All Fees Waived	No

Amount to be Paid: $ 93.00

Collected by:	sd
Total Cash Amount:	
Total Check Amount:	$93.00
Total CC Amount:	
Grand Total:	$93.00

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 7/7/05
Permit # 2005-1585

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348.01 Lot 2 Qualification Code
Work Site Location 101 Sapper Landing Rd
Cherry Hill NJ 08002
Owner in Fee Kevin C Dallbaum
Address Same as above
Tel ([redacted])
Contractor Same As Above
Address
Tel ( ) FAX (856) 429 4252
Contractor License No.
Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [X] Other Relocate Panel/meter pan
Building Occupied as Utility Co. PSE&G
Est. Cost of Elec. Work $ 400.00

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [X] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	200	AMP Service [redacted]	40.00
1	200	AMP Subpanels [redacted]	40.00
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[X] No Plans Required 7/1/05 [illegible]

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved

Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 6-2-2006
Approved by: TBE/GJ

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			6-2-06	TBE
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

Administrative Surcharge $	12.00
Minimum Fee $	80.00
State Permit Surcharge Fee $	
TOTAL FEE $	

U.C.C. F120 (rev. 07/03)

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 7/7/05
Permit # 2005 1545

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 346.01 Lot 2 Qualification Code

Work Site Location 101 Cooper Landing Rd
Cherry Hill NJ 08002

Owner in Fee Kevin C Dollbaum

Address Same as above

Tel ([redacted]

Contractor

Address Same As Above

Tel ( ) FAX (856) 429 4252

Contractor License No.

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present R 5 Proposed R-5

[ ] Pole/Pad # [ ] Temporary [X] Other Relocate Panel/Meter

Building Occupied as Utility Co. PSE&G

Est. Cost of Elec. Work $ 400.00

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [X] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	200	AMP Service	40.00
1	200	AMP Subpanels	40.00
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[X] No Plans Required 7/1/05

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

Administrative Surcharge	$ 12.00
Minimum Fee	$ 80.00
State Permit Surcharge Fee	$
TOTAL FEE	$

U.C.C. F120 (rev. 07/03)

CUT-IN-CARD

MUNICIPALITY Cherry Hill Twp

LOCATION 101 Cooper Landing Rd UTILITY CO PSE+G

Cherry Hill BLK 348.01 LOT 2

OWNER Dollhaum OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C. and DCA requirements."

☒ FINAL ☐ TEMPORARY This approval void after ____ days

DESCRIPTION OF SERVICE 200 Amp Main Service

INSTALLED BY Homeowner LICENSE NO

DATE 6-2-2006 PERMIT # 05-1585 INSPECTOR Tom Evans

☐ CALLED IN ___/___/___ Lic. No: 8902

U.C.C. Form F-350B 1 WHITE–UTILITY 2 CANARY–OFFICE/FILE 3 PINK–OFFICE/CONTRACTOR

BLOCK 34801 LOT 2 QUALIFICATION CODE _____ ADDRESS (SITE) 101 Cooperlanding Rd. Cherry Hill PERMIT NO. 2009 2477

9.29.09

CONSTRUCTION PERMIT APPLICATION

RECEIVED SEP 18 2009 BUILDING INSPECTIONS

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Proposed Work Site at: 101 Cooperlanding Rd. Cherry Hill NJ 08002
2. Name of Owner in Fee: Kevin C. & Kristina L. DeBaum
   Tel. [redacted] e-mail [redacted]
   Address 101 Cooperlanding Rd. (street) Cherry Hill (municipality) NJ (zip code) 08002
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Sam Mosiano & Sons Inc Tel. ( ) _____
   Address 1833 Arlington Drive e-mail _____
   Williamstown NJ. 08094
   License No. OR, if new home, Builder Reg. No. 7091 Exp. Date 6/11
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No [redacted] FAX: (856) 863-5483
5. Architect or Engineer N/A Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun JACK MOSIANO
   Tel. [redacted] FAX: (856) 863-5483

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical			
3. Plumbing		65	
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$	5	
8. Subtotal	$		
9. State Permit Surcharge Fee			
10. Subtotal	$		
11. Cert. of ~~Occupancy~~			
12. Other		70.	
13. TOTAL	$		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area — Largest Floor _____ sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Max. Live Load _____
7. Max. Occupancy Load _____
8. If Industrialized Building: State Approved ____ HUD ____
9. Total Land Area Disturbed _____ sq. ft.
10. Flood Hazard Zone _____
11. Base Flood Elevation _____ ft.
12. Wetlands yes ____ no ____

IIa. PROPOSED WORK

- ☑ Minor Work
- ☐ New Building
- ☐ Addition
- ☐ Demolition
- ☐ Repair
- ☐ Alteration
- ☐ Renovation
- ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Radon Remediation
- ☐ Annual Permit

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building									
☐ Electrical									
☒ Plumbing	2500.00/100				9/3/09				
☐ Fire Protection									
☐ Elevator									
TOTAL COST	2500.00								

Water Service

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use: R5
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale
   Gained, Rental
   Lost, Sale
   Lost, Rental

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks

U.C.C. F100-1 (rev. 12/07)

LDS CH-B 10522712

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(f)1.ix:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name Sam Misiano & Sons Inc

Address 1833 Arlington Drive
Williamstown N.J. 08094

Telephone [redacted]

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition			
Building	_____	Energy	_____	Other	_____
Electrical	_____	Barrier Free	_____		_____
Plumbing	_____	Flood Hazard	_____		_____
Fire Protection	_____	As Built Elevation Cert.	_____		_____
Mechanical	_____	Other	_____		_____

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

TOWNSHIP OF CHERRY HILL
820 MERCER STREET
CHERRY HILL, NJ 08002
856-488-7855

CERTIFICATE
IDENTIFICATION

Date Issued: 10/08/2009
Control #: 69443
Permit #: 20092477

Block: 348.01 Lot : 2 Qualification Code:

Work Site Location: 101 COOPERLANDING ROAD
CHERRY HILL

Owner in Fee: KEVIN C. & KRISTINA L. DOLLBAUM
Address: 101 COOPERLANDING ROAD
CHERRY HILL NJ 08002
Telephone: [redacted]

Agent/Contractor: SAM MESIANO & SONS INC.
Address: 1833 ARLINGTON DR.
WILLIAMSTOWN NJ 08094
Telephone: [redacted]

Lic. No./ Bldrs. Reg.No.: 7091 Federal Emp. No.: [redacted]

Social Security No.:

Home Warranty No:
Type of Warranty Plan: [ ] State [ ] Private
Use Group: R-5
Maximum Live Load:
Construction Classification:
Maximum Occupancy Load:
Certificate Exp Date:

Description of Work/Use:

WATER SERVICE

[ ] **CERTIFICATE OF OCCUPANCY**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[X] **CERTIFICATE OF APPROVAL**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than or will be subject to fine or order to vacate:

[ ] **CERTIFICATE OF CLEARANCE-LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:

[ ] Total removal of lead-based paint hazards in scope of work

[ ] Partial or limited time period(_____ years); see file

[ ] **CERTIFICATE OF CONTINUED OCCUPANCY**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] **CERTIFICATE OF COMPLIANCE**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

Gerald E. Seneski Construction Official

Fees: $0.00
Paid[X]Check No.: 6270
Collected by: kcm

U.C.C 260 (rev. 5/03)

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

TOWNSHIP OF CHERRY HILL
820 MERCER STREET
CHERRY HILL, NJ 08002
856 - 488-7855

Permit Number: 20092477

Control Number: 69443
Application Date: 09/25/09

CONSTRUCTION PERMIT

Permit Date: 10/06/2009

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 348.01 Lot : 2 Qualifier :

Work site Location: 101 COOPERLANDING ROAD CHERRY HILL

Owner In Fee: KEVIN C. & KRISTINA L. DOLLBAUM

Address: 101 COOPERLANDING ROAD
CHERRY HILL NJ 08002

Telephone: [redacted]

Use Group(s): R-5

Contractor: SAM MESIANO & SONS INC.

Address: 1833 ARLINGTON DR.
WILLIAMSTOWN NJ 08094

Telephone: [redacted]

Lic. No. / Bldrs. Reg. No.: 7091

Federal Emp. No.: [redacted]

is hereby granted permission to perform the following work :

[ ] BUILDING
[ ] ELECTRICAL
[ ] ELEVATOR DEVICES
[ ] LEAD HAZARD ABATEMENT
[ ] ASBESTOS ABATEMENT
(Subchapter 8 only)

[X] PLUMBING
[ ] FIRE PROTECTION
[ ] MECHANICAL
[ ] DEMOLITION
[ ] OTHER

DESCRIPTION OF WORK:

WATER SERVICE

ESTIMATED COST OF WORK:

Cost of Construction:	$0.00
Cost of Alteration:	$2,500.00
Cost of Demolition:	$0.00
Total Cost:	$2,500.00

If construction does not commence within one year of date of issuance,

or if construction ceases for a period of six months, this permit is void.

Gerald E. Seneski

Date

Contruction Official

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENTS (Office Use Only)

[70-43]	Building	
[70-48]	Electrical	
[70-36]	Plumbing	$65.00
[70-37]	Fire Protection	
[70-61]	Elevator Devices	
[70-38]	Mechanical	
[70-91]	VolFee (DCA)	
[70-91]	AltFee (DCA)	$5.00
[70-91]	DCA Minimum Fee	$0.00
[70-50]	CO Fee	
[70-50]	CCO Fee	
[70-45]	Engineering	
[71-78]	Sewer	
[70-62]	Document Imaging	
[70-53]	Street Opening	
[73-83]	Street Open. Escrow	
	Total :	**$ 70.00**

All Fees Waived No

Amount to be Paid: $ 70.00

RECEIVED
OCT 6 - 2009
TAX COLLECTOR

Check Number: 6270
Check amount: $70.00

Collected by: kcm
Total Cash Amount:
Total Check Amount: $70.00
~~Total CC Amount:~~
Grand Total: $70.00

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 10-6-09
Control #

Date Issued 2009-2477
Permit #

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348.01 Lot 2 Qualification Code

Work Site Location 101 Cooperlanding Rd. Cherry Hill NJ 08002

Owner in Fee:

Tel. [redacted] e-mail [redacted]

Address 101 Cooperlanding Rd. (street) Cherry Hill (municipality) NJ 08002 (zip code)

Contractor: Sam Mosiano & Sons Inc Tel. (856) 629-5461

Address 1833 Arlington Drive e-mail

Williamstown N.J. 08094

Contractor License No. 7091 Exp. Date 6/11

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No [redacted] FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present R5 Proposed R5

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 2500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Plumbing Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 9.21.09

Approved by: John Hitte

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: 10.8.09

Approved by: John Hitte

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			10.8.09	

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK New water service

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
1	Water Service Connection	65
	Stacks	
	Other	
	Other	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$ 65.00

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 10-6-09
Control #

Date Issued
Permit # 2009-2477

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 34801 Lot 2 Qualification Code

Work Site Location 101 Cooperlanding Rd. Cherry Hill NJ 08002

Owner in Fee:

Tel. [redacted] e-mail [redacted]

Address 101 Cooperlanding Rd. Cherry Hill NJ 08002
street municipality

Contractor: Sons Mechanical & Sons Inc Tel. [redacted]

Address 1833 Arlington Drive e-mail

W. Hammonton NJ 08037

Contractor License No. 7091 Exp. Date 6/11

Home Improvement [redacted] or Exemption Reason (if applicable):

Federal Emp. ID No [redacted] FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present R5 Proposed R5

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 2,500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 10.21.09
Approved by: Louis Pitts

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK New water service

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
1	Water Service Connection	65
	Stacks	
	Other	
	Other	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$

BLOCK 3401 LOT 12 ADDRESS(site) 101 Cooper Landing Rd PERMIT NO 9402728

RECEIVED
SEP 28 1994
BUILDING INSPECTIONS

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI and VII

I. IDENTIFICATION

1. Proposed Work-site at: 101 Cooper Landing Rd
2. Name of Owner in Fee: Anthony V. DePietro JR Tel. [redacted]
   Address 101 Cooper Landing Rd (street) Cherry Hill (municipality) N.J. 08002 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Anthony V. DePietro JR Tel. [redacted]
   Address 101 Cooper Landing Rd Cherry Hill N.J. 08002
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. _____ Social Security No. _____
5. Architect or Engineer Anthony V. DePietro JR Tel. [redacted]
   Address 101 Cooper Landing Rd Cherry Hill N.J. 08002
6. Responsible Person In Charge of Work Anthony V. DePietro JR Tel. [redacted]

Engr.: 9/28/94 Rec. 10/12/94
Filed 10/31/94
Computer: Y - N

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 268.		
2. Electrical	161		
3. Plumbing	138		
4. Fire Protection	46.		
5. Elevator Devices			
6. Subtotal Eng.	$ 25.		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee	23.		
10. Subtotal	$		
11. Cert. of Occupancy	85.		
12. Other			
13. TOTAL	$ 764.00		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ____ ft.	
3. Area—Largest Floor ____ sq. ft.	
4. New Building Area ____ sq. ft.	
5. Volume of New Structure ____ cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed ____ sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ____ ft.	
10. Wetlands yes ____ sq. ft. / no	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

Two Story Addition

	Est. Cost
1. ☐ Minor work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☑ Addition	23000-
5. ☑ Alteration	1200-
6. ☑ Fire Protection	150-
7. ☑ Plumbing	800-
8. ☑ Electrical	
9. ☐ Elevator Devices	
10. ☐ Asbestos Abatement	
11. ☐ Demolition	
TOTAL COSTS	

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
✓		Oct 4 94	Oct 11 94				
			9 29 94				
			9-29-94	BK			

III. DO YOU WANT: (optional) 1. ☑ Partial Releases 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☑ One-Family (R-4) CABO

No of dwelling units:
Before Construction ____
After Construction ____
Net gain or loss ____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS CH-B 10513913

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. (✓) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. (✓) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. (✓) I further certify that I will perform or supervise the following work:
C.1. (✓) Building C.2. (✓) Fire Protection
I further certify that I will perform the following work:
C.3. (✓) Electrical C.4. (✓) Plumbing

D. (✓) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date 9/28/94

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State county, and local prior approvals have been given, including such certification as the construction official may require

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

VII. PRIOR APPROVALS CHECKLIST (OFFICE USE ONLY)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Intial	Final Date	Prelimin. Intial	Final Date	Prelimin. Intial	Final Date	Prelimin. Intial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ NJ Department of Community Affairs									
☐ NJ Department of Transportation									
☐ NJ Department of Environmental Protect.									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE **(office use only—optional)**

	Name of Code & Edition		Name of Code & Edition		
Building		Energy		Other	
Electrical		Barrier Free			
Plumbing		Flood Hazard			
Fire Protection		As Built Elevation Cert.			
Mechanical		Other			

X. CERTIFICATES ISSUED **(office use only)**

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				

VOID
CERTIFICATE

Date Issued
Control #
Permit #

IDENTIFICATION

Block _____ Lot _____
Work Site Location _____
_____
Owner in Fee _____
Address _____
_____
Tele (____) _____
Contractor _____
Address _____
_____
Tele (____) _____
ic No or Bldrs. Reg. No. _____
ederal Emp. No. _____
or Social Security No. _____

Home Warranty No. _____
Type of Warranty Plan: [ ] **State** [ ] **Private**
Use Group R-4
Maximum Live Load _____
Construction Classification 5B
Maximum Occupancy Load _____
Description of Work/Use:

TWO STORY ADDITION
FIRST FLOOR - KITCHEN, FAMILY, LAUNDRY ROOM
SECOND FLOOR - THREE BEDROOMS AND A BATHROOM
TOTAL 1,408 SQ FT

CERTIFICATE OF OCCUPANCY

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

CERTIFICATE OF APPROVAL

This serves notice that the work completed has been constructed / installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ CERTIFICATE OF COMPLIANCE

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____.

☐ TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _____, 19____ or the owner will be subject to fine or order to vacate:

_____

Fee $ _____
Paid [ ] **Check No.** _____
Collected by: _____

_____
CONSTRUCTION OFFICIAL

UCC Form F-260B

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

CERTIFICATE

Date Issued
Control #
Permit #

IDENTIFICATION

Block 348.01 Lot 2
Work Site Location 101 Cooper Landing Rd.

Owner in Fee Anthony J. DePietro Jr.
Address same

Tele. ( ) [redacted]
Contractor same
Address

Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No.
Type of Warranty Plan: [ ] **State** [ ] **Private**
Use Group R.4
Maximum Live Load
Construction Classification 5.B
Maximum Occupancy Load
Description of Work/Use:

Two story addition

☐ **CERTIFICATE OF OCCUPANCY**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☐ **CERTIFICATE OF CONTINUED OCCUPANCY**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for *continued occupancy*.

☐ **CERTIFICATE OF APPROVAL**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **CERTIFICATE OF COMPLIANCE**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____.

☐ **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _____, 19____ or the owner will be subject to fine or order to vacate:

Fee $
Paid [ ] Check No.
Collected by:

CONSTRUCTION OFFICIAL

U.C.C. Form F-260B

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

CONSTRUCTION PERMIT

9402728
Date Issued 10/18/94
Control #
Permit #

PAID OCT 18 1994

IDENTIFICATION Block 348.01 Lot 2

Work Site Location 101 Cooper Landing Rd. CHERRY HILL N.J.

Owner in Fee Anthony J. DePietro Jr.

Address same

Tele. ( ) [redacted]

Contractor same

Address

Tele. ( )

Lic. No. or Bldrs. Reg. No. Exp. Date

Federal Emp. No:
or Social Security No.

is hereby granted permission to perform the following work:

[✓] BUILDING [✓] PLUMBING [ ] OTHER
[✓] ELECTRICAL [✓] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

Two story addition

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 24,200.

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)		
	Code	Amount
Building	70-43	~~268.00~~
Electrical	70-48	~~161.00~~
Plumbing	70-36	~~156.00~~
Fire Protection	70-37	~~46.00~~
Elevator Devices	70-61	
Engineering	70-45	25.00
DCA Training Fee	70-91	23.00
Cert. of Occ.	70-50	85.00
Sewer	71-78	
Total		764.00
Check No.		755
Cash		
Collected By:		S.W.

(see reverse side)

U.C.C. Form F-170C 1 WHITE - RECEIPT 2 WHITE - INSPECTOR 3 CANARY - OFFICE 4 PINK - OFFICE 5 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms to the approved plans and the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode;
2. Foundations and all walls up to grade level prior to back filling;
3. All structural framing and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☒ A complete copy of approved plans must be kept on the job site.

If you do not understand any of this information, please ask.

U.C.C. Form F-170D

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 10/18/94
Control #
Permit # 9402728

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348 01 Lot 2
Work Site Location 101 Cooper Landing Rd
Cherry Hill N.J. 08002
Owner in Fee Anthony J. DePietro JR
Address 101 Cooper Landing Rd.
Cherry Hill N.J. 08002
Tele. [redacted]
Contractor Anthony J. DePietro JR.
Address 101 Cooper Landing Rd
Cherry Hill N.J. 08002
Tele. (___)
Lic. No. of Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[x] All D.N.R.C.	10-17-94	OK
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present Dwelling Proposed Dwelling
Constr. Class Present ___ Proposed ___
No. of Stories 2
Height of Structure 22 Ft.
Area—Largest Floor 714 Sq. Ft.
New Bldg. Area/All Floors SEE 1408 Sq. Ft.
Volume of New Structure ~~14,084~~ 14,084 Cu. Ft. x 0.019 = 267.52
Total Land Area Disturbed 714 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 23,000.00
2. Alteration $ 1,200.00
3. Total (1+2) $ 24,200.00

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Two Story Addition
22' x 32

SEE DRAWING

TYPE OF WORK:
[ ] New Building
[x] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence ___ Height (6' or over)
[ ] Sign ___ Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement
[ ] Other ___
[ ] Other ___
[ ] Demolition

(Office Use Only)
FEE
$ 267.52

Paid [x] Check # 755
Collected by: S.W.

Administrative Surcharge	$
Minimum Fee	$
DCA TRAINING FEE	$ 2.00
TOTAL FEE	$ 269.52

U.C.C. Form F-1108
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued 10/18/94
Control #
Permit # 9402728

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348.01 Lot 2
Work Site Location 101 Cooper Landing Rd
Cherry Hill N.J. 08002
Owner in Fee Anthony J. DePietro JR.
Address 101 Cooper Landing Rd
Cherry Hill N.J. 08002
Tele. [redacted]
Contractor Anthony J. DePietro JR
Address 101 Cooper Landing Rd
Cherry Hill N.J. 08002
Tele. (____) ____
Lic. No.
Federal Emp. No. ____ or *Social Security No.* ____

B. ELECTRICAL CHARACTERISTICS

Use Group Present Dwelling Proposed Dwelling
[ ] Pole/Pad # ____ [ ] Temporary [ ] Other ____
Building Occupied as ____ Utility Co. ____
Est. Cost of Elec. Work $ ____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[X] Elec. Plans Approved
Date: 9-29-94
Approved by: BHewitt

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: ____
Approved By: ____

INSPECTIONS

Type:	Failure	Failure	Approval Dates (Month/Day)	Initial
Rough			12-29	DS
Temporary				
Constr. Serv.				
TCO				
Other				
Service			2-24	AF
Final				

Temp. Cut-in-Card Date Issued ____
Final Cut-in-Card Date Issued ____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature—Contractor Seal

[ ] Licensed *Electrical Contractor* [ ] *Exempt* Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
23		Fixtures (1)	
53		Receptacles (2)	
25		Switches (3)	
106		Total 1 + 2 + 3	54.
1	___ Kw	Range	10.
____	___ Kw	Oven(s)	____
____	___ Kw	Surface Unit	____
1	___ hp	Dishwasher	10.
1	___ hp	Garbage Disposal	10.
1	___ Kw	Dryer	10.
____	___ Kw	A/C Unit	____
____		Burglar Alarms	____
____		Intercoms Panels	____
5		Smoke Detectors	____
____	___ hp	Whirlpool/spa	____
____		Pool Bonding	____
____	___ hp	Pool Filter Motor	____
____		Pool Lights	____
____	___ Kw	*Water Heater(s)*	____
____	___ Kw	Central heat: oil, gas or elec.	____
____	___ Kw	Baseboard Heat Units	____
____		Thermostats	____
____	___ hp	Heat Pump	____
____	___ hp	Pump(s)	____
____	___ Amp	Motor Control Center/Sub Panels	____
____		Signs	____
____	____	Light Standards	____
____	___ hp	Motors—Fractional H.P.	____
____	___ hp	Motors—All Others	____
____	___ Kw	Transformers	____
____	___ Kw	Generators	____
1	200 Amp	Service Entrance	46.
____	____	Other	____

	Administrative Surcharge	$ 21.00
Paid [ ] Check # ____	Minimum Fee	$ 140.00
	DCA Training Fee	$ ____
Collected by: ____	TOTAL FEE	$ 161

U.C.C. Form F-1208 1. White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

3-10-St.

Left message on machine

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued 10/18/94
Control #
Permit # 9402728

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 34.01 Lot 2
Work Site Location 101 Cooper Landing Rd
Cherry Hill N.J. 08002
Owner in Fee Anthony J. DeBartolo Jr.
Address 101 Cooper Landing Rd
Cherry Hill N.J. 08002
Tele. [redacted]
Contractor Anthony J. DeBartolo Jr.
Address 101 Cooper Landing Rd
Cherry Hill N.J. 08002
Tele. (____)
Lic. No.
Federal Emp. No. _____ or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present Dwelling Proposed Dwelling
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[X] Elec. Plans Approved
Date: 9-29-94
Approved by: B. Hurst

INSPECTIONS

Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temporary				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved By: _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature—Contractor Seal

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
23		Fixtures (1)	
53		Receptacles (2)	
25		Switches (3)	
106		Total 1 + 2 + 3	54.
1	___ Kw	Range	10.
____	___ Kw	Oven(s)	____
____	___ Kw	Surface Unit	____
1	___ hp	Dishwasher	10.
1	___ hp	Garbage Disposal	10.
1	___ Kw	Dryer	10.
____	___ Kw	A/C Unit	____
____		Burglar Alarms	____
____		Intercoms Panels	____
5		Smoke Detectors	____
____	___ hp	Whirlpool/spa	____
____		Pool Bonding	____
____	___ hp	Pool Filter Motor	____
____		Pool Lights	____
____	___ Kw	Water Heater(s)	____
____	___ Kw	Central heat: oil, gas or elec.	____
____	___ Kw	Baseboard Heat Units	____
____		Thermostats	____
____	___ hp	Heat Pump	____
____	___ hp	Pump(s)	____
____	___ Amp	Motor Control Center/Sub Panels	____
____		Signs	____
____	____	Light Standards	____
____	___ hp	Motors—Fractional H.P.	____
____	___ hp	Motors—All Others	____
____	___ Kw	Transformers	____
____	___ Kw	Generators	____
1	200 Amp	Service Entrance	46.
____	____	Other	____

	Administrative Surcharge	$ 21.00
Paid [ ] Check # _____	Minimum Fee	$ 140.00
	DCA Training Fee	$ _____
Collected by: _____	TOTAL FEE	$ 161

U.C.C. Form F-120B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Date Issued 10/18/94
Control #
Permit # 9402728

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 34.01 Lot 2
Work Site Location 111 Prospect Landing Rd
Owner in Fee Anthony J. DeBenedetto
Address 101 Prospect Landing Rd
Tele [redacted]
Contractor Anthony J. DeBenedetto
Address 111 Prospect Landing Rd
Tele. (____)
Lic. No.
Federal Emp. No. or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Dwelling Proposed Dwelling R-4
Constr. Class. Present 5A Proposed 5A
Heating Systems [ ] New [✓] Existing
Type: [ ] Gas [✓] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 1500.00 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[✓] Fire Plans Approved
Date: Dec 94
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks	( ) Capacity		Fuel
Combustible Liquid Storage Tanks	( ) Capacity		Fuel
L.P.G. Storage Tanks	( ) Capacity		Fuel
L.N.G. Storage Tanks	( ) Capacity		Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors	5+	
Heat Detectors		
TOTAL		46
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER		

Paid [✓] Check # 755
Collected by: S.W.

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$ 46

U.C.C. Form F-140B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

PLUMBING SUBCODE TECHNICAL SECTION

Date Received 10/18/94
Date Issued
Control #
Permit # 9402728

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 348.01 Lot 2
Work Site Location 101 Cooper Landing Rd. Cherry Hill N.J. 08002
Owner in Fee Anthony J. DePietro Jr.
Address 101 Cooper Landing Rd Cherry Hill N.J. 08002
Tele. ([redacted])
Contractor Anthony J. DePietro Jr.
Address 101 Cooper Landing Rd Cherry Hill N.J. 08002
Tele. (____)
Lic. No.
Federal Emp. No. or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present Dwelling Proposed Dwelling
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Estimated Cost of Plumbing Work $ 800.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date:
Approved by:

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Slab			10/21	MP
Rough			12-24	RP
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature—Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
	Urinal/Bidet	
1	Bath Tub	10
1	Lavatory	10
	Shower	
	Floor Drain	
1	Sink	10
1	Dishwasher	10
	Drinking Fountain	
1	Washing Machine	10
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
1	Backflow Preventer	10
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
1	Sewer Connection	
	Water Service Connection	
	Active Solar System	
1	Other Sewer drains + water lines	65

Administrative Surcharge $ 20
Paid ☒ Check # 7550 Minimum Fee $ 135
S.W DCA Training Fee $
Collected by: TOTAL $ 155.00

2-4-98 called left message 1480 #
12-15-98 - No Entry
2-16-99 Tel # disconnected and not home

U.C.C. Form F-130B 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 10/18/94
Date Issued
Control #
Permit # 94052728

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 3N & 21 Lot 2
Work Site Location 161 Coddak Landing Rd.
Cherry Hill N.J. 08002
Owner in Fee Anthony J. DePietro JR.
Address 161 Coddak Landing Rd.
Cherry Hill N.J. 08002
Tele. [redacted]
Contractor Anthony J. DePietro JR.
Address 161 Coddak Landing Rd
Cherry Hill N.J. 08002
Tele. (____) ____
Lic. No. ____
Federal Emp. No. ____ or Social Security No. ____

B. PLUMBING CHARACTERISTICS

Use Group *Present* Dwelling Proposed Dwelling
Building Sewer Size ____ Public Sewer ____ Private Septic ____
Water Service Size ____ Public Water ____ Private Well ____
Estimated Cost of Plumbing Work $ 800.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: ____
Approved by: ____

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved By: ____
Date: ____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO ____				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature—Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
	Urinal/Bidet	
1	Bath Tub	10
1	Lavatory	10
	Shower	
	Floor Drain	
1	Sink	10
1	Dishwasher	10
	Drinking Fountain	
1	Washing Machine	10
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
1	Backflow Preventer	10
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
1	Sewer Connection	
	Water Service Connection	
	Active Solar System	
1	Other Sewer, trailer, water lines	65

Administrative Surcharge $ 20
Paid [X] Check # 7558 Minimum Fee $ 135
DCA Training Fee $ ____
Collected by: S.W. TOTAL $ 155

1450 #

U.C.C. Form F-130B

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

TOWNSHIP OF CHERRY HILL

820 Mercer Street
Cherry Hill, NJ 08002

ZONING APPROVAL NO. 20301

☐ Building Permit ☐ Certificate of Occupancy

Block 348.01 Lot 2 Zone R2

Property Owner M+M A. Hovy J. DePietro JR.

Address of Property 101 Cooper Landing Rd

Address of Owner 101 Cooper Landing Rd Phone No. [redacted]

Existing Use Single Family Dwelling Proposed Use Single Family Dwelling

Type of Structure Proposed 22X32 two story addition

THIS APPROVAL ALLOWS THE APPLICANT TO APPLY FOR A BUILDING PERMIT OR, IF NO FURTHER CONSTRUCTION IS REQUIRED, CERTIFICATE OF OCCUPANCY. NO USE OR CONSTRUCTION MAY COMMENCE WITHOUT ALL NECESSARY APPROVALS.

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all application laws of this jurisdiction.

Signature _____ Address _____ Telephone _____

SETBACKS: ☐ Corner Lot ☑ Inside Lot

Front 51.82 Rear 99 Smallest side 18.5 Aggregate 30+ Second front 62.0

Sq. Ground Floor 704' Height 22' Gross Floor Area 1408'

For swimming pool only:

Distance of pool from the foundation wall _____ Front _____ Rear _____ Side _____

ZONING BOARD ACTION	P.O.A. _____	Date Granted _____
PLANNING BOARD ACTION	P.B.C. _____	Date Granted _____

THIS APPROVAL IS BASED ON THE INFORMATION ON THIS FORM AND THE ATTACHED PLAN(S).

COMMENTS: Two story addition to rear of house. Single family use only. Grading permit is required. All set backs met

OTHER PAYMENTS AND FEES:

Taxes Paid: yes

Shade Tree Fee $2.00/LF of street frontage _____

Contributions-In-Aid:

Road Improv. $ _____

Sewer Improv. $ _____

Other _____ $ _____

Housing Impact Fee:

(a) Estimated equalized value of the improvements $_____

(b) Fee calculation:

1) Residential use - 0.5% of (a) $_____

2) Non-Residential use - 1.0% of (a) $_____

Name Tracy A. Wilson Title Zoning Officer Date 9/26/94

1M 6-94 PPCo.

TOWNSHIP OF CHERRY HILL

PLAN REVIEW CORRECTION LIST

Revisions submitted 10/13/94

Address: 101 Cooper Landing Road
Block 348.01, Lot 2

Date: October 10, 1994

Owner: Mr. Anthony DePietro

Use Group: R-4 Type Const: 5-B

Contact: Mr. Anthony DePietro
Phone: 427-4423
FAX:

CALLED Oct 11, 94 GAVE MESSAGE TO WIFE - SHE SAID HUSBAND WILL STOP BY Correction List TO PICK UP LIST.

1. The double 2x12 Beam is undersized for the openings between the family room and kitchen.

2. The ceiling joists for the second floor ceiling are undersized for the possible attic loading. Must increase size to 2x8 joist.

3. Double all floor joist under parallel partitions.

4. Verify (make and model number) of the second floor bedroom windows. Must meet egrees window size requirements.

5. Must maintain at least 8 inches between the extrior grade and the wood framing.

6. The anchor bolts must be a minimum of 1/2 inch in diameter; embedded in the foundation to a minimum of 8 inches into the foundation; minimum 2 bolts per plate; spaced a maximum of 8 feet apart; and no more than 12 inches from the end of the plate.

7. Smoke detectors are required through out the dwelling: Minimum one in every bedroom, one in each bedroom hallway and a minimum of one per floor. Detectors shall have primary and secondary power and be interconnected so that activation of one detector will sound all detectors.

8. Provide mechanical drawings showing have the addition will be heated.

9. Provide attic access.

10. The second floor bath shall not drain into the first floor venting, the washer shall drain into a 2 inch drain, and no more than one fixture can be supplied by a 1/2 inch water line.

11. Provide minimum R-30 insulation in the attic.

HUSBAND PICKED UP PLAN & LIST Oct 11, 94

TOWNSHIP OF CHERRY HILL

PLAN REVIEW CORRECTION LIST

Address: 101 Cooper Landing Road
Block 348.01, Lot 2

Date: October 10, 1994

Owner: Mr. Anthony DePietro

Use Group: R-4 Type Const: 5-B

Contact: Mr. Anthony DePietro
Phone: 427-4423
FAX:

Correction List

A2 D

1. The double 2x12 Beam is undersized for the openings between the family room and kitchen. (ADD - 2x12 LAM BEAM)

A2 12

2. The ceiling joists for the second floor ceiling are undersized for the possible attic loading. Must increase size to 2x8 joist. (2x8

A2 D

3. Double all floor joist under parallel partitions.

A2

4. Verify ~~(make and model number) of the second floor bedroom windows. Must meet egrees window size requirements.~~ Wasco 4XT 2846 32"x54"

A

✓ 5. Must maintain at least 8 inches between the extrior grade and the ~~wood framing.~~ (CCA PLATE / CCA CDX 1/2" 1/2 SHEATHING)

E 2

6. The anchor bolts must be a minimum of 1/2 inch in diameter; ~~embedded~~ in the foundation to a minimum of 8 inches into the foundation; minimum 2 bolts per plate; spaced a maximum of 8 feet apart; and no more than 12 inches from the end of the plate.

C1 C2

7. Smoke detectors are required through out the dwelling: Minimum one in every bedroom, one in each bedroom hallway and a minimum of one per floor. Detectors shall have primary and secondary power and be interconnected so that activation of one detector will sound all detectors. BRK Model #86RAC 120VAC WITH Battery Backup (3) to BE ADDED TO EXISTING

8. Provide mechanical drawings showing have the addition will be heated. SEE ATTACHED

A2 P

9. Provide attic access. 22"x30"

10/11/94

10. The second floor bath shall not drain into the first floor venting, the washer shall drain into a 2 inch drain, and no more than one fixture can be supplied by a 1/2 inch water line.

A2 A

✓ 11. Provide minimum R-30 insulation in the attic.

Cherry Hill INTER-OFFICE COMMUNICATION

TO : Tony Saccomanno, Director
Code Enforcement & Inspections

FROM : KIEU H. NGUYEN, P.E.

REF : Grading Plan Review
Ordinance 80-50

Attached is a review checklist for a grading plan submitted to our office for the following application.

RECEIVED
3 1994
BUILDING INSPECTIONS

APPLICANT : Anthony T. Depietro, Jr

ADDRESS : 101 Cooper Landing Rd
Cherry Hill, NJ. 08002

PREPARER : Albert N. Floyd & Son, LS

ADDRESS : P.O. Box 446
Sewell, NJ 08080

LOCATION : Lot 2 of Block 348.01
101 Cooper Landing Rd

RECEIVED : 9-29-94

REVIEWED : 9-30-94

By copy of this communication, the applicant has been informed that their submission is deficient as indicated by those items checked. We request that they provide the additional information within four (4) weeks of the review date, otherwise the application will be considered incomplete and will be returned to your office

Reviewed By Kieu H. Nguyen

CC : Applicant
Preparer

TOWNSHIP OF

Cherry Hill

820 MERCER STREET • P.O. BOX 5002 • CHERRY HILL, NEW JERSEY 08034-0358 • TEL.: (609) 488-7800

STANDARD CHECKLIST FOR GRADING PLAN REVIEWS

Issue Date : November 1987

In accordance with Township Ordinance 80-50, a Grading Permit is required for all grading and earthwork operations on residential lots which results in a land disturbance of 500 square feet or more. Applications for Grading Permits shall be obtained from the Code Enforcement and Inspection Department, Room 205 of the Municipal Building, 820 Mercer Street. Applications shall be accompanied by a grading plan, submitted in triplicate, conforming to the standards contained within.

Applicants will be notified if their Grading Plan submission is found deficient and will be requested to provide additional information within four (4) weeks of the review date. If additional information is not submitted within this time period, the application will be considered incomplete and will be denied by the Code Enforcement and Inspection Department.

Grading Plan Approval in no way affect or negates any approval required by other Federal, State, County or local agencies. Comments or questions concerning these standards should be directed to the Department of Engineering at 424-3203.

The following items must be supplied on the plan :

1. ALL PROFESSIONALLY PREPARED GRADING PLANS

[✓] A. must have a title block indicating the address of the site, lot and block designation, and be titled "GRADING PLAN". The title block must contain the name, address and telephone number of the preparer. The plan must also contain the name and address of the applicant.

[ ] B. must be signed and sealed (embossed) by a Land Surveyor, Professional Engineer, or Architect licensed in the State of New Jersey.

[✓] C. must have note on the plan specifing that the vertical datum used is NGVD 1929. If an assumed datum is used a conversion equation must be indicated on the plan.

[ ] D. must be legible and of sufficient scale and quality to be reproducible.

2. PROPERTY LINES, EASEMENTS, AND SETBACKS

[ ] A. must be clearly shown on the plan and abutting properties must be identified by Lot and Block Numbers.

[ ] B. must have bearings and dimensions of property lines, width and purpose of the easements, and building setbacks lines in accordance with the Zoning Ordinance.

3. RIGHT-OF-WAY IMPROVEMENTS

[ ] A. must be shown on the plan including width of right-of-way and cartway, location of existing/proposed curb, driveway aprons, and sidewalks along the frontage of the property as well as adjacent properties.

[ ] B. must have pertinent information related to the existing/proposed site improvements such as elevation of centerline of roadway, top of curb and gutter, sidewalk and driveway apron. Where no curb exists, pavement edge elevation should be provided.

[ ] C. All work to be performed within the Township Right-Of-Way will require the appropriate municipal right-of-way opening permits. The application may be otained through the Township Clerks Office in Room 107 of the Municipal Building. The Department Of Engineering shall be notified twenty four (24) hours in advance of

4. **All GRADING PLANS**

[✓] A. must include contour lines at one (1) foot intervals and spot elevations of high and low points. Contour lines must clearly show existing characteristics of topography such as existence of lawn swales, ditches, ridge lines and general pattern of drainage flow. Where grade changes and fill is involved, proposed conditions must be superimposed onto the existing. Existing contours shall be indicated as dash lines and proposed contours as bold solid lines.

[ ] B. must show existing/proposed spot elevations of all property corners and intermediate points at intervals not exceeding fifty (50) feet along all property lines. Existing topography shall be extended a minimum of fifty (50) feet beyond the property lines in all directions. Spot elevations of adjacent building corners must be shown.

[✓] C. must show lot layout including all structures and other site improvements with overall dimensions of structures, offset distances from property lines, and locations of driveways, fences, pools and decks, etc.

[ ] D. Based on site inspection, conditions presented on the plan are not consistent with actual field conditions.

5. **WHERE A NEW STRUCTURE OR ADDITION IS PROPOSED,**

[ ] A. the lot shall be graded to direct surface runoff towards the frontage road or other defined drainage paths. Where it is intended to slope the lot towards the frontage road, finish floor of the proposed dwelling shall be set a minimum of three (3) feet above the maximum pavement gutter elevation occurring along the frontage of the lot. Finish grades at the foundation perimeter shall be a minimum of nine (9) inches below the first floor elevation. In no case shall garage floor or any opening to the dwelling be less than one and one-half (1 1/2) feet above the lowest gutter elevation.

[✓] B. elevations of first floor and garage as well as finished grades at all building openings and corners must be shown.

[✓] C. location of existing/proposed utilities service connections (sanitary & water) must be shown. Shuster vent for sanitary lateral should be shown in the park strip between the curb and sidewalk, if it exists. Otherwise, vent shall be shown within six feet of the right-of-way line.

[ ] D. Based on review of subdivision plans for this development, proposed conditions presented on the plan are not consistent with the approved block grading plan.

6. **WHERE A SWIMPOOL INSTALLATION IS PROPOSED**

[ ] A. the lot shall be graded to direct surface runoff towards the frontage road or other defined drainage paths. Finish deck elevation shall be set above the natural grade occurring on the the lot to prevent surface from flowing into the pool.

[ ] B. plan must have pertinent information related to elevations of the existing/proposed site improvements such as proposed pool deck, finish floor of the dwelling, finished grades at all building openings and corners, top of curb and gutter, sidewalk and driveway

[ ] C. plan must show limits of fill and land disturbance. In no case shall fill be placed so as to interrupt existing drainage patterns, or within five (5) of the property line or an easement line.

7. **WHERE LOT ABUTS A STREAM CORRIDOR, FLOODPLAIN, OR WETLANDS**

[ ] A. stream encroachment, flood boundary and/or wetland lines shall be shown and source of the information should be noted on the plan. In cases where no study is available, it shall be so noted on the plan.

[ ] B. must have bearing and distances with NJDEP permit number and date of approval for encroachment line, or if not delineated, must have flood boundary elevation based on an state approved or accepted study.

[ ] C. all construction and grading activities shall comply with the requirements of applicable N.J.D.E.P. Regulations. The applicant is responsible for obtaining a jurisdictional determination from the appropriate authority

8. **MINIMUM GRADING STANDARDS**

[✓] A. Drainage for the total site shall be positive. Lawn areas with gradients of at least two (2) percent shall be sloped away from building foundations. Grassed lawn swales with a desirable slope of two (2) percent, but in no case least more one (1) percent, shall direct surface runoff towards the frontage road or other defined drainage paths. Grading shall not impact adjacent properties by diversion of surface runoff.

[ ] B. Proposed drainage patterns shall be denoted with flow arrows. Spot elevations shall be provided along major drainage paths.

[ ] C. Slopes shall not be steeper than three (3) horizontal to one (1) vertical. Slopes shall be well rounded at top and at bottom to reduce the possibility of erosion. Steeper grade changes shall be confined by retaining structures or other acceptable methods. Terracing is permitted.

[ ] D. Top of an excavation and/or toe of slope of a fill section shall not be closer than five (5) feet to an adjoining property line or structure.

[ ] E. Proposed grading shall not extend beyond the property lines unless the written consent of the adjacent owner is obtained.

[ ] F. Driveways shall not have a slope greater than twelve (12) percent. Where site conditions require a greater slope, a design waiver may be requested.

9. **SOIL EROSION AND SEDIMENT CONTROL**

[✓] A. All disturbed land within or adjacent to the work area which is the result of the contractor's operation shall be stabilized in accordance with the STANDARDS FOR SOIL EROSION AND SEDIMENT CONTROL IN NEW JERSEY. All grading and soil stabilization shall be completed within thirty (30) days from the issuance of the permit. A note to this effect shall be added to the plan.

[✓] B. Soil erosion and sediment control measures shall be provided and shall include silt fences at downslope perimeters of the disturbed area and a stabilized construction entrance, approximatly ten (10) foot wide and twenty (20) foot long, consisting of a six-inch thick stone apron (2 inch aggregate - ASTM Size No. 2).

[✓] C. Stockpiling of material and debris within the right-of-way area is not permitted. The roadway shall be swept clean of all earth and debris at all times.

10. **WHERE RETAINING STRUCTURES OR OTHER SITE DETAILS ARE NEEDED**

[ ] A. retaining structures which must retain more than four (4) feet of material or for riprap bank protection which is steeper than three (3) horizontal to one (1) vertical, calculations prepared by a licensed professional engineer certifying the stability of the structure must be supplied.

[ ] B. Details of all proposed site improvement such as landscape or retaining structures, drainage facilities, etc. shall be submitted with and become part of this application. All proposed site improvements which are subject to building codes shall be submitted to the Code Official for review to determine compliance with applicable standards.

11. **OTHER COMMENTS**

[ ] _____

_____

[ ] _____

_____

[ ] _____

_____

TOWNSHIP OF CHERRY HILL

PLAN REVIEW CORRECTION LIST

Address: 101 Cooper Landing Road
Block 348.01, Lot 2

Date: October 10, 1994

Owner: Mr. Anthony DePietro

Use Group: R-4 Type Const: 5-B

Contact: Mr. Anthony DePietro
Phone: 427-4423
FAX:

Correction List

A2 D

1. The double 2x12 Beam is undersized for the openings between the family room and kitchen. (ADD - 3x12 LAM BEAM)

A2 A

2. The ceiling joists for the second floor ceiling are undersized for the possible attic loading. Must increase size to 2x8 joist. (2x8)

A2 B

3. Double all floor joist under parallel partitions.

A2

4. Verify (make and model number) of the second floor bedroom windows. Must meet egrees window size requirements. WENCO VX72846 32"x54"

A1 A ✓

5. Must maintain at least 8 inches between the extrior grade and the wood framing. (CCA plans / FOR CDX 1/2" PLYSHEATHING)

E 2

6. The anchor bolts must be a minimum of 1/2 inch in diameter; embedded in the foundation to a minimum of 8 inches into the foundation; minimum 2 bolts per plate; spaced a maximum of 8 feet apart; and no more than 12 inches from the end of the plate.

C1 C2

7. Smoke detectors are required through out the dwelling: Minimum one in every bedroom, one in each bedroom hallway and a minimum of one per floor. Detectors shall have primary and secondary power and be interconnected so that activation of one detector will sound all detectors. Blu Model #86RAC 120VAC with Battery Back up (3) TO BE ADDED TO EXISTING

8. Provide mechanical drawings showing have the addition will be heated. SEE ATTACHED

A2 B ✓

9. Provide attic access. 22"x30"

10/11/94

10. The second floor bath shall not drain into the first floor venting, the washer shall drain into a 2 inch drain, and no more than one fixture can be supplied by a 1/2 inch water line.

A2 A ✓

11. Provide minimum R-30 insulation in the attic.

Project Number: Name:
Address: Date: October 10, 1994
Beam ID: 3
BEAM SPAN= 6.0000 Feet.
Uniform Load
The plf on the beam is 775.0 L.L and 325.0 D.L.
Note: Based on top edge having continious lateral support.
HEM-FIR #2
Size = 2 - 2 X 12
Increase in allowable for duration of load = 0 %
BENDING
ALLOWED = 63281.3 inch/lbs
ACTUAL = 59400.0 inch/lbs
Bending OK
SHEAR
ALLOWED = 1687.5 pounds
ACTUAL = 2268.8 pounds
MEMBER OVER STRESSED
DEFLECTION
L/180 = 0.4000 inches
L/240 = 0.3000 inches
L/360 = 0.2000 inches
ACTUAL Total Load Deflection = 0.0644 inches
ACTUAL Live Load Deflection = 0.0453 inches
Deflection OK

Project Number: Name:
Address: Date: October 10, 1994
Beam ID:
BEAM SPAN= 6.6000 Feet.
Uniform Load
The plf on the beam is 775.0 L.L and 325.0 D.L.
Note: Based on top edge having continious lateral support.
MICRO=LAM (1.8E)
ACTUAL MEMBER SIZE = 3.5 X 11.25
Increase in allowable for duration of load = 0 %
BENDING
ALLOWED = 195352.5 inch/lbs
ACTUAL = 71874.0 inch/lbs
Bending OK
SHEAR
ALLOWED = 7481.3 pounds
ACTUAL = 2598.8 pounds
Shear OK
DEFLECTION
L/180 = 0.4400 inches
L/240 = 0.3300 inches
L/360 = 0.2200 inches
ACTUAL Total Load Deflection = 0.0628 inches
ACTUAL Live Load Deflection = 0.0443 inches
Deflection OK

Project Number: Name:
Address: Date: October 10, 1994
Beam ID: 1
BEAM SPAN= 6.5000 Feet.
Uniform Load
The plf on the beam is 775.0 L.L and 325.0 D.L.
Note: Based on top edge having continious lateral support.
HEM-FIR #2
Size = 2 - 2 X 12
Increase in allowable for duration of load = 0 %
BENDING
ALLOWED = 63281.3 inch/lbs
ACTUAL = 69712.5 inch/lbs
MEMBER OVER STRESSED
SHEAR
ALLOWED = 1687.5 pounds
ACTUAL = 2543.8 pounds
MEMBER OVER STRESSED
DEFLECTION
L/180 = 0.4333 inches
L/240 = 0.3250 inches
L/360 = 0.2167 inches
ACTUAL Total Load Deflection = 0.0887 inches
ACTUAL Live Load Deflection = 0.0625 inches
Deflection OK

TOTAL LOAD

LIVE LOAD:

2ND FLOOR 30#/SQFT x 15' 6" = 465 PLF

ATTIC 20#/SQFT x 15' 6" = 310 PLF

775 PLF

DEAD LOAD

2" FL 10#/SQFT x 15' 6" = 155 PLF

ATTIC 10#/SQFT x 15' 6" = 155 PLF

PARTITIONS 15#/LF = 15 PLF

325# PLF

1,100 #/LF

CUT-IN-CARD

MUNICIPALITY Cherry Hill

LOCATION 101 Cooperlandus Rd UTILITY CO. PSE&G

BLK 348.01 LOT 2

OWNER DePietro OCCUPANT Same

"Installation in the above premises has been inspected and is in accordance with N.E.C. and DCA requirements."

☑ FINAL ☐ TEMPORARY This approval void after ____ days

DESCRIPTION OF SERVICE 200 Amp Service

INSTALLED BY DePietro LICENSE NO Homeowner

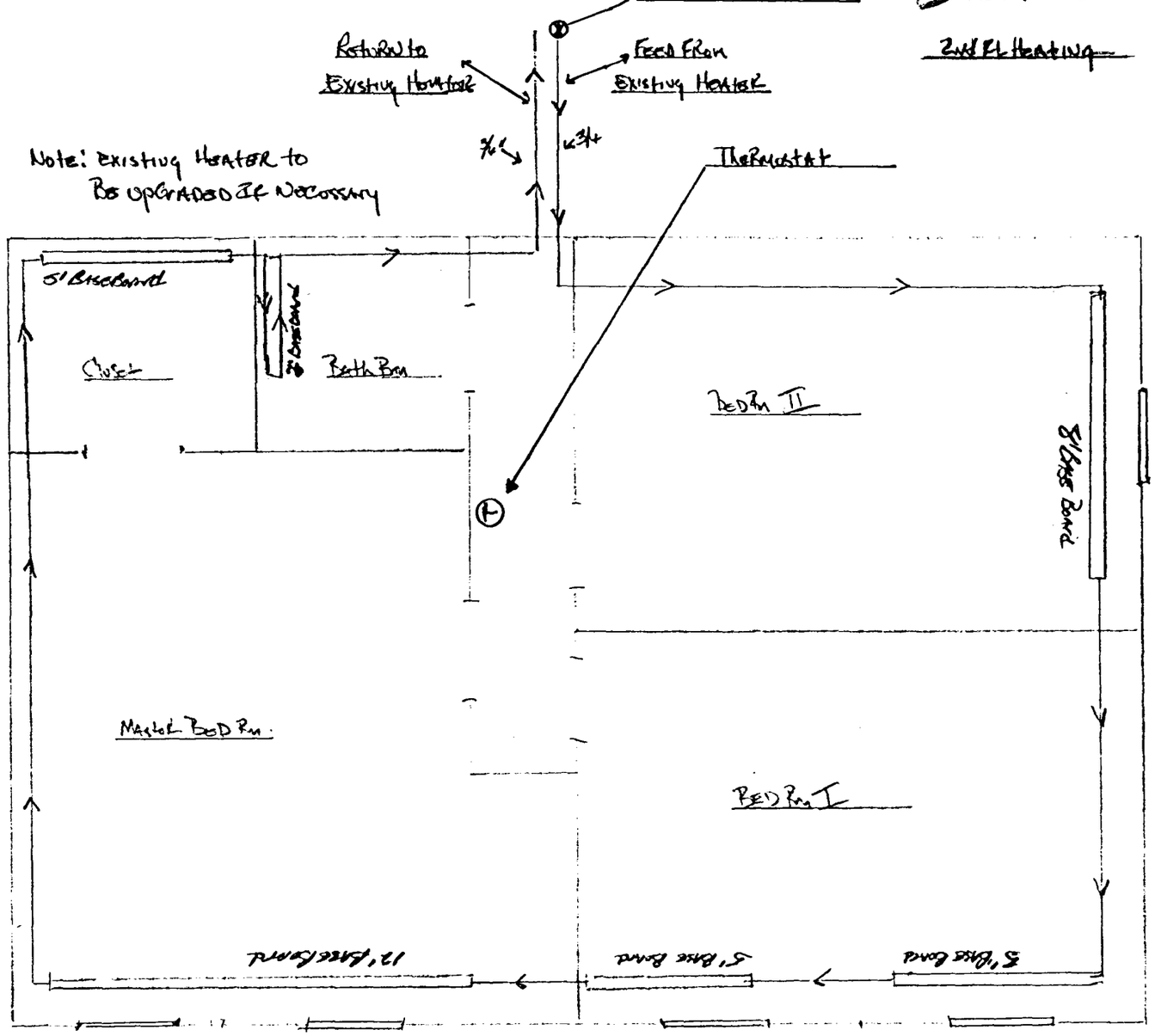
DATE 12-24-96 PERMIT # 94 2228 INSPECTOR [illegible]

☐ CALLED IN / / Lic. No: 7100

U.C.C. Form F-350B 1 WHITE—UTILITY 2 CANARY—OFFICE/FILE 3 PINK—OFFICE/CONTRACTOR

Item # 8

2nd Fl Heating



PERMIT:
LDS CH B 10513913

A 2 / A A

2ND Floor Interior Framing
(Walls and Ceiling)

Item #2 (Delete) ADD (2x8 Ceiling Joist)

2"x6" x 16" Ceiling Rafter 16" o/c

Item #9
(Add Attic Access)

2"x6" Headers - All Interior openings.

2"x4" 16" o/c ALL INTERIOR WALLS

R19 INSULATION

22'0"

32'0"

Item #11
ADD 6" Attic Blanket Over Installed R19

PERMIT:
LDS CH B 10513913

5 of 12

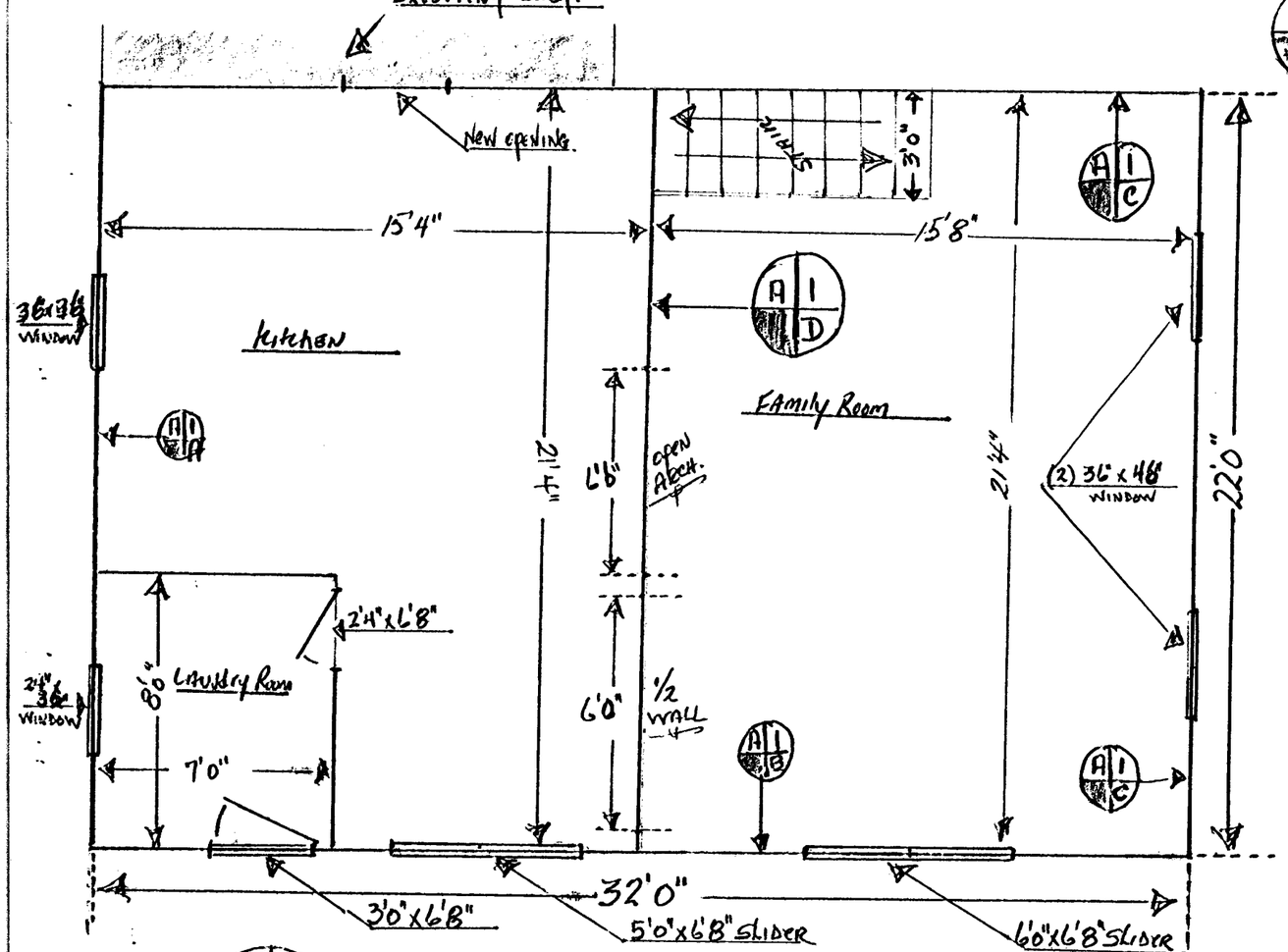
Mr + Mrs. A. DePietro
#101 Cooper Landing Road
Cherry Hill, New Jersey
Block 348, Lot 2

Scale 1/4" = 1 Ft.

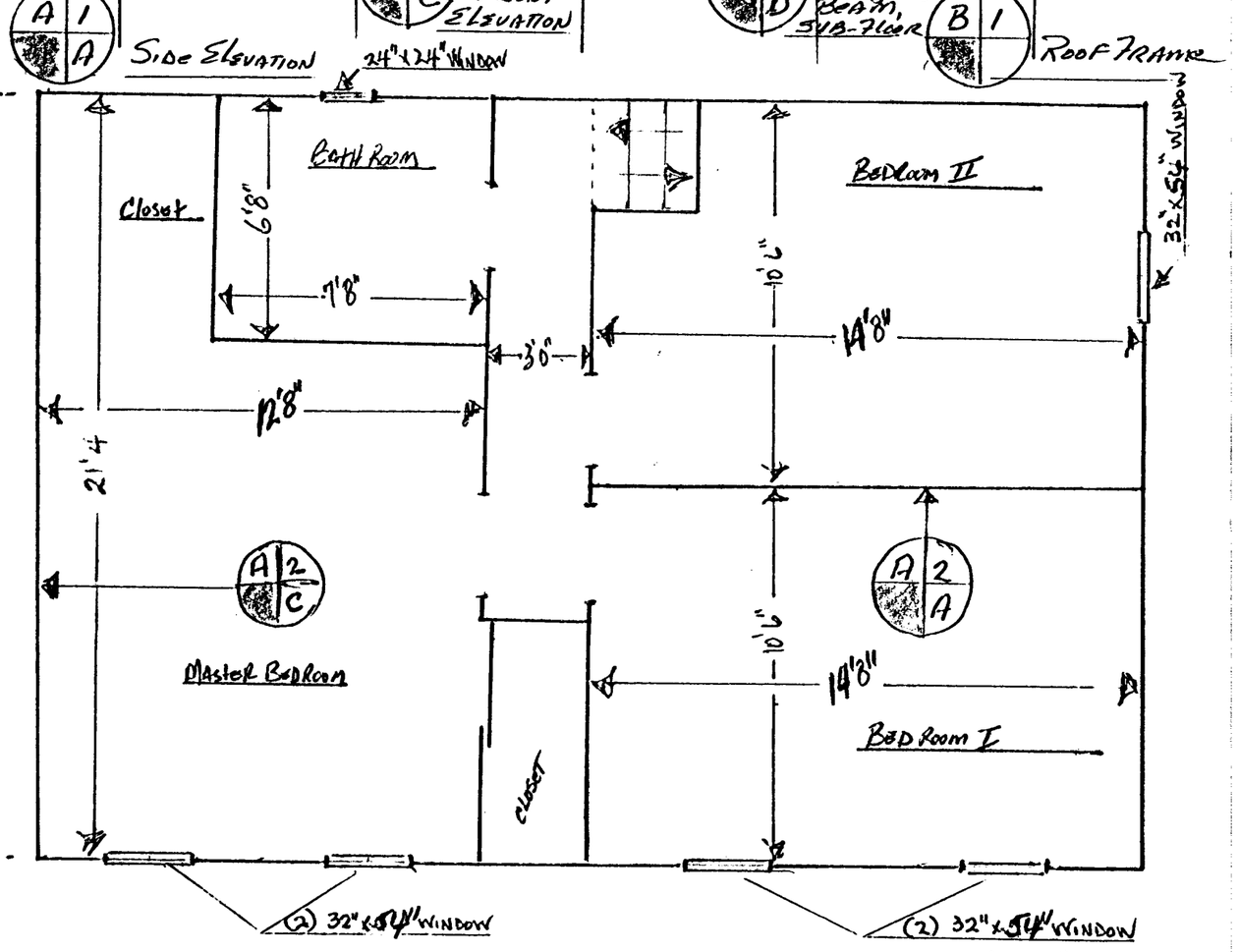
9/17/94

Key:

- A/1 — 1st Floor Plan
- A/2 — 2nd Floor Plan
- A/1 — Side Elevation
- A/1 — Rear Elevation
- A/1 — Side & Front Elevation
- A/1 — Beam & Supports
- A/2 — Floor Joist, Beam, Sub-Floor
- A/2 — 2nd Floor Exterior Frame
- A/2 — 2nd Floor Inter. Frame, Ceiling Rafters
- B/1 — Roof Frame



A/1 — Illustration 1st Floor. Floor Plan



A/2 — Illustration 2nd Floor. Floor Plan

All second floor Bedroom Windows shall be Wenco 1x1 2846 32"x54"

PERMIT:
LDS CH B 10513913

Camden Cherry Hill Twp | Property Record Card | 12/02/21 10:33 AM

Block: 348.01 Lot: 2 Qualifier: Card: 1 | Last Sale: 03/31/17 for $150,000

2314 HARBOR DR LLC
1468 TOWERS ST
LAKEWOOD, NJ 08701

101 COOPERLANDING RD

Units:	1	Nbhd:	Model:	VCS:	EN
SFLA:	3511	Floor:	Bldg Name:	Map Page:	M154
Prop Class:	2	Occupancy:	Zoning:	Year Built:	1950/1980
Bldg Class:	17		Addtl Lot:	NC Interior	GOOD
Bldg Desc:	1SCB		Land Dim: 100X220	NC Exterior	GOOD
Info By:	OWNER (07/15/11)		Style: COLONIAL	NC Layout	GOOD

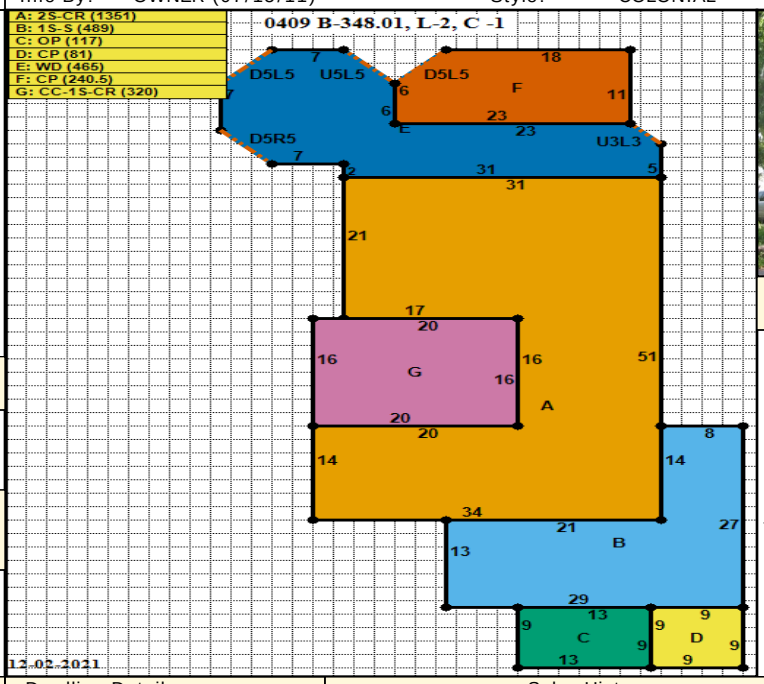
Main Building	220,258
Attached Items Value	7,357
Add/Deduct Value	26,000
Base Replacement Cost	253,615
Cost Conversion Factor	1.30
Replacement Cost New	329,700
Net Condition	0.67
Market Adjustment	0.80
Appraised Value	176,719
Detached Items Value	5,548
Total Land Value	53,775
Total Improvement Value	182,267
Total Value	236,042

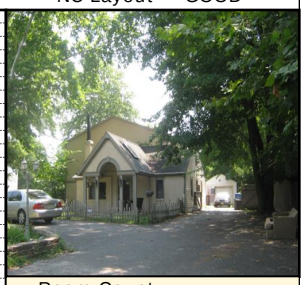
Valuation Summary

	Computed	Override	Summary
Land	53,800		53,800
Improv	182,300		182,300
Total	236,100		236,100

Floor Area (footprint)

Item	Bsmnt	First Floor	Upper Floor	Half Story	Attic
A 2S-CR	0	1,351	1,351	0	0
B 1S-S	0	489	0	0	0
G CC-1S-CR	0	320	0	0	0
Totals	0	2,160	1,351	0	0





Room Count

	B	1	2	3	4	T
Living	0	1	0	0	0	1
Dining	0	1	0	0	0	1
Kitchen	0	1	0	0	0	1
Bath	0	1	2	0	0	3
Bed	0	0	4	0	0	4
Rec	0	1	0	0	0	1
Den	0	0	0	0	0	0
Total	0	5	6	0	0	11

SqFt Living Area

Item	Area
First Floor	2,160
Upper Floor	1,351
Half Story	0
Fin Attic	0
Living Bsmnt	0
Unfin Area (-)	0
Total Area	3,511

Sketch Areas

Description	Sq Ft
A 2S-CR	1,351
B 1S-S	489
C OP	117
D CP	81
E WD	465
F CP	241
G CC-1S-CR	320

Attached Items

Seg	Item	Area
C	OPEN PORCH	117
D	CONC PATIO	81
E	WOOD DECK	465
F	CONC PATIO	241
G	CATH CEIL	320
	Total Area	1,224

Detached Items

Desc	Area	Rate	Const	QF	Cond	Value
DET. GAR.	280	16	3,069	1.00	0.50	4,910
SHED 1STY	169	9	500	1.00	0.25	638

Miscellaneous

Desc	Number
LAND ADJ	1
MARKET ADJ	1
FOR SALE	1

Write Ins

Desc	Value
0	00000

Dwelling Detail

Element	Description
Bldg Class	17
Type	ONE FAMILY
Yr Built	1950/1980
Height	2 STORY
Style	COLONIAL
Roof Type	GABLE
Roof Mat.	ASPH SHNGL
Bsmnt/Fin	
Foundation	CONC. SLAB
Exterior	VINYL
	STUCCO
Interior	DRYWALL
Floor	MIXED
Heat Src	OIL
Heat Sys	3511-FORCED AIR
Air Cond	3511-ALL COMBIN
Fireplace	1-1STY FP
Plumbing	2-3FIX BATH
	1-2FIX BATH

Sales History

Owner	Date	Book-Page	Price	NU
2314 HARBOR DR LLC	03/31/17	10675-01066	150,000	31
KOSE HACI	02/24/17	10597-00063	93,000	12
RUFFIN AVRIL R	10/26/09	08510-01829	314,000	26
DOLLBAUM, KEVIN CHARLES	02/07/07		0	Z

Assessment History

Year	Class	Land	Improv	Net
2022	2	53,800	182,300	236,100
2021	2	53,800	182,300	236,100
2020	2	53,800	182,300	236,100
2019	2	53,800	182,300	236,100
2018	2	53,800	182,300	236,100

Permits

Open Date	Number	Description	Value
07/29/04	04-1983	ADDITION	
03/02/01	01-0415	PORCH	
10/18/94	9402728	ADDITTION	

A. Intent. The R2 Residential zone is intended for single-family detached dwellings on lots of moderate size that stabilize and protect the surrounding neighborhood. Clustering of dwellings to promote the retention of open space is encouraged.

B. Permitted Principal Uses. In the R2 Residential zone, no lot shall be used and no structure shall be erected, altered, or occupied for any purpose except the following:
1. Cemetery.
2. Churches and similar places of worship, parish houses and convents.
3. Conservation.
4. Municipal use.
5. Public parks and recreation.
6. Schools and Institutions of higher education including playgrounds, parks and accessory buildings, not conducted as a business.
7. Single-family detached dwellings.

C. Permitted Accessory Uses & Structures. Any of the following uses and structures may be permitted, when used in conjunction with a principal use and conforming to the applicable subsection:
1. Balconies, chimneys, eaves, and awnings, per §431.I.
2. Decks and patios, per §431.H.
3. Farm stand and consumer crop picking operations when used in conjunction with an agriculture use.
4. Fences, hedges and walls, per §506.
5. Home occupations, per §431.B.
6. Motor vehicle storage, per §431.F.
7. Personal recreational vehicle storage, per §431.E.
8. Personal telecommunications equipment, per §431.L.
9. Playground and recreation equipment, per §431.K.
10. Private parking facilities including garage and carport, per §431.C.
11. Private residential shed and greenhouses, per §431.J.
12. Private residential swimming pool and cabana, per §431.G.
13. Sidewalks and walkways, per §513.
14. Signs, in accordance with §517.
15. Solar energy infrastructure, per §432.C.
16. Temporary construction facilities, per §432.F.

D. Bulk Requirements. Except as otherwise modified, the following bulk standards shall apply to all buildings in the Residential (R2) zone:

Minimum Requirements	Residential Uses		Non-Residential Uses	
	Inside Lot	Corner Lot	Inside Lot	Corner Lot
Lot Size (square feet)	9,200	10,350	20,000	20,000
Lot Frontage	80'	90'	100'	120'
Lot Depth	120'	120'	120'	120'
Front Yard	30'	30'	30'	30'
Secondary Front Yard	n/a	25'	n/a	25'
Side Yard	10'	10'	10'	10'
Aggregate Side Yard	24'	n/a	24'	n/a
Rear Yard	25'	25'	25'	25'
Maximum Height	30'	30'	35'	35'
Maximum Building Cover	35%	35%	35%	35%
Maximum Lot Cover	40%	40%	75%	75%
Open Space	n/a	n/a	25%	25%

Violations

(All Data, Location Address Like '101 coop' - 13 records)

Tracking Number	Location Address	Block	Lot	Owner Name	Issuing Officer	Issue Date	Closed	Closed Date	Statute	Summary
CVIO-18-00824	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	George Redmond	08/08/2018	True	08/31/2018	Sanitation	Remove bags of trash and tree debris in driveway.
CVIO-18-00825	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	George Redmond	08/08/2018	True	08/31/2018	(10 Day) Grass Letter	Cut and trim grass on entire property. Trim bushes back off sidewalk.
CVIO-18-00995	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	Nknight	09/06/2018	True	10/08/2018	Township Cleanup (30 day invoice)	Total amount due for debris clearing on 8/29 and lawn cut completed on 8/30 by the Cherry Hill Public Works Department: $811.04.
CVIO-19-00762	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	George Redmond	06/27/2019	True	07/10/2019	(10 Day) Grass Letter	Cut and trim grass and weeds on entire property.
CVIO-19-00763	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	George Redmond	06/27/2019	True	07/10/2019	General Maintenance	Secure property. Repair window laying on ground at side of property. Remove graffiti at front of building.
CVIO-19-00922	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	Nknight	07/26/2019	True	09/17/2019	Township Cleanup (30 day invoice)	Total amount due for grass cutting completed by the Cherry Hill DPW on 7/9/19: $225.05.
CVIO-19-01273	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	George Redmond	10/02/2019	True	10/21/2019	(10 Day) Grass Letter	1) Cut and trim grass on entire property. 2) Trim weeds and bushes blocking sidewalk.
CVIO-19-01332	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	Nknight	10/24/2019	True	12/05/2019	Township Cleanup (30 day invoice)	Total amount due for grass cutting completed by the Cherry Hill Department of Public Works on 10/19/19: $209.42.
CVIO-20-00433	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	George Redmond	08/05/2020	True	08/23/2020	(10 Day) Grass Letter	Cut and trim grass on entire property.
CVIO-20-00434	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	George Redmond	08/05/2020	True	08/23/2020	Sanitation	Remove trash and debris from property.
CVIO-20-00514	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	Nknight	09/03/2020	True	11/17/2020	Township Cleanup (30 day invoice)	Total amount due for grass cutting completed on 8/20/20 and debris removal completed on 8/27/20: $587.30.
CVIO-21-00279	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	George Redmond	05/24/2021	True	06/11/2021	(10 Day) Grass Letter	Cut and trim grass on entire property.
CVIO-21-00381	101 COOPERLANDING RD	348.01	2	2314 HARBOR DR LLC	Nknight	06/16/2021	True	07/26/2021	Township Cleanup (30 day invoice)	Total amount due for grass cutting completed by Cherry Hill Department of Public Works on 6/10/21: $262.19.

Grand Totals

Call Number: 79779

Nature: Alarm
Reported: 11:26:46 12/01/10
Rcvd By: zz-Hewitt, K How Rcvd: T
Occ Btwn: 11:26:34 12/01/10 and 11:26:34 12/01/10
Type: 1
Priority: 3

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: RUFFIN
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Hewitt,	11:27:52 12/01/10	612	ENRT	2		incid#=10-083735 Enroute to a Call call=1421
zz-Hewitt,	11:27:53 12/01/10	611D	ENRT	2	CHPD	incid#=10-083735 Enroute to a Call call=1421
zz-Kenniff	11:31:01 12/01/10	611D	ARRV	2	CHPD	(MDC) Arrived on scene incid#=10-083735 call=1421
zz-Hewitt,	11:31:56 12/01/10	612	ARRV	2		incid#=10-083735 Arrived on Scene call=1421
zz-Hewitt,	11:33:36 12/01/10	611D	CMPL	2	CHPD	incid#=10-083735 Completed Call 10 call=1421
zz-Hewitt,	11:33:36 12/01/10	612	CMPL	2		incid#=10-083735 Completed Call 10 clr:X call=1421

COMMENTS

DR [redacted]

UNIT HISTORY

Unit	Time/Date	Code
611D	11:27:53 12/01/10	ENRT
611D	11:31:01 12/01/10	ARRV
611D	11:33:36 12/01/10	CMPL

612 11:27:52 12/01/10 ENRT
612 11:31:56 12/01/10 ARRV
612 11:33:36 12/01/10 CMPL

RESPONDING OFFICERS

Unit	Officer
611D	zz-Kenniff, D
612	612

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	10-083735	12/01/10	Alarm 10-083735 101 COOPER L	Initiating Call

Call Number: 79797

Nature: Alarm
Reported: 13:19:05 12/01/10
Rcvd By: zz-Hewitt, K How Rcvd: T
Occ Btwn: 13:18:54 12/01/10 and 13:18:54 12/01/10
Type: 1
Priority: 3

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: RUFFIN
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Hewitt,	13:19:59 12/01/10	612D	ENRT	2	CHPD	incid#=10-083754 Enroute to a Call call=1601
zz-Hewitt,	13:19:59 12/01/10	625D	ENRT	2	CHPD	incid#=10-083754 Enroute to a Call call=1601
zz-Citeron	13:23:36 12/01/10	612D	VHIN	1	CHPD	MDC: pl=KXL55X st=NJ
zz-Hewitt,	13:25:16 12/01/10	612D	ARRV	2	CHPD	incid#=10-083754 Arrived on Scene call=1601
zz-Hewitt,	13:27:51 12/01/10	625D	CMPL	2	CHPD	incid#=10-083754 Reassigned to call 1631, completed call 1601
zz-Hewitt,	13:33:56 12/01/10	612D	CMPL	2	CHPD	incid#=10-083754 Completed Call 10 clr:X call=1601

COMMENTS

[redacted] ..DR

UNIT HI[redacted]RY

Unit	Time/Date	Code
612D	13:19:59 12/01/10	ENRT
612D	13:23:36 12/01/10	VHIN
612D	13:25:16 12/01/10	ARRV
612D	13:33:56 12/01/10	CMPL

625D 13:19:59 12/01/10 ENRT
625D 13:27:51 12/01/10 CMPL

RESPONDING OFFICERS

Unit	Officer
612D	zz-Citerone, L
625D	zz-Sherwood, R

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	10-083754	12/01/10	Alarm 10-083754 101 COOPER L	Initiating Call

Call Number: 80384

Nature: Alarm
Reported: 11:08:26 12/03/10
Rcvd By: zz-Hewitt, K How Rcvd: T
Occ Btwn: 11:08:15 12/03/10 and 11:08:15 12/03/10
Type: 1
Priority: 3

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: RUFFIN
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Hewitt,	11:09:21 12/03/10	620D	ENRT	2	CHPD	incid#=10-084293 Enroute to a Call call=1241
zz-Hewitt,	11:09:21 12/03/10	621D	ENRT	2	CHPD	incid#=10-084293 Enroute to a Call call=1241
zz-Hewitt,	11:09:39 12/03/10	610D	ENRT	2	CHPD	incid#=10-084293 Enroute to a Call call=1241
zz-Hewitt,	11:09:51 12/03/10	621D	CMPL	2	CHPD	incid#=10-084293 Completed Call call=1241
zz-Hewitt,	11:12:21 12/03/10	610D	ARRV	2	CHPD	incid#=10-084293 Arrived on Scene call=1241
Furbert, G	11:13:07 12/03/10	620D	VHIN	2	CHPD	MDC: pl=E28ACG st=NJ
Kirsch, F	11:15:46 12/03/10	610D	VHIN	1	CHPD	MDC: pl=5AYK55 st=MD
zz-Hewitt,	11:16:54 12/03/10	610D	ARRV	2	CHPD	incid#=10-084293 Arrived on Scene call=1241
zz-Hewitt,	11:16:54 12/03/10	620D	ARRV	2	CHPD	incid#=10-084293 Arrived on Scene call=1241
zz-Hewitt,	11:17:04 12/03/10	610D	CMPL	2	CHPD	incid#=10-084293 Completed Call 10 call=1241
zz-Hewitt,	11:17:04 12/03/10	620D	CMPL	2	CHPD	incid#=10-084293 Completed Call 10 clr:X call=1241

COMMENTS

[redacted] DR

11:16:13 12/03/2010 - Kirsch, F

State Response:

NLETS.FULL.1L01
NJ0041248
RR.MD002015V
09:15 12/03/2010 10648
09:15 12/03/2010 09297 NJ0041248
*GDF5888526
TXT
QUERY FORMAT: LIC/5AYK55

LIC.NO.	STICKER	EXPIRE	KEY	TITLE	V.I.N.	YR	MAKE	ST	EXCEPT
5AYK55	5AYK55	09/11	A	38030754	JTHBN30F930102383	03	LEXS	4S	N/A

GR.WGT: +3700 REG.FEE: $76.50 SUB:NO FR:
GR.COMB.WGT: 00N/A RUSH: 5 VANITY: FLAG:YES SDX FLAG:NO
INS.CO: GOVERNMENT EMPLOY INS CO POLICY#: 4041442254

PREV. KEY	PREV. LIC.	* VEHICLE EXPIRE DATE	VEHICLE STATUS	* INSPECTION DATE	INSPECTION STATUS
		022410	N	070109	K

OWNER OLN
A-235-603-200-739 SUS.REV: NO PRIVACY: YES
NAME: MICHAEL EL HASA AUSTIN RACE: 1-BLACK SEX: M
ADDR: 224 SWEET PINE DR HGT: 6'00" WGT: 220 DOB: [redacted]
CITY: LAUREL COUNTY: AA ST: MD ZIP: 20724

EFFECTIVE DATE	UNIT OF ORIGIN		CONTROL
03/03/10	WARNING MAILED - VEIP	-	VE353
03/26/10	TAGS SUSPENDED - VEIP	-	VE354

LIEN HOLDER: MID-ATLANTIC FEDERAL CU
ADDR: PO BOX 279756 DATE: 2007-01-25
CITY: SACRAMENTO STATE: CA ZIP: 95827

SERIAL-FLG/NONE

UNIT HISTORY

Unit	Time/Date	Code
610D	11:09:39 12/03/10	ENRT
610D	11:12:21 12/03/10	ARRV
610D	11:15:46 12/03/10	VHIN
610D	11:16:54 12/03/10	ARRV
610D	11:17:04 12/03/10	CMPL
620D	11:09:21 12/03/10	ENRT
620D	11:13:07 12/03/10	VHIN
620D	11:16:54 12/03/10	ARRV
620D	11:17:04 12/03/10	CMPL
621D	11:09:21 12/03/10	ENRT
621D	11:09:51 12/03/10	CMPL

RESPONDING OFFICERS

Unit	Officer
610D	Kirsch, F
610D	zz-Ackerman, W
620D	Furbert, G
621D	zz-Smith, C

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	10-084293	12/03/10	Alarm 10-084293 101 COOPER L	Initiating Call

Call Number: 87572

Nature: MV Stop
Reported: 11:31:07 12/31/10
Rcvd By: zz-Nixon, L How Rcvd: O
Occ Btwn: 11:31:04 12/31/10 and 11:31:07 12/31/10
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: FURBERT, G
Address:
Phone: ( ) -

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Nixon,	11:31:09 12/31/10	620D	ARRV	2	CHPD	Traffic stop call=1071
zz-Nixon,	11:31:19 12/31/10	6K12	ENRT	2	CHPD	incid#=10-090861 Enroute to a Call call=1071
Furbert, G	11:31:23 12/31/10	620D	NMIN	2	CHPD	MDC: dl=[redacted] state=NJ
zz-Nixon,	11:32:28 12/31/10	6K12	CMPL	2	CHPD	incid#=10-090861 Completed Call call=1071
zz-Nixon,	11:40:50 12/31/10	620D	CMPL	2	CHPD	incid#=10-090861 Completed Call clr:F call=1071

COMMENTS

bl/mer w/m

UNIT HISTORY

Unit	Time/Date	Code
620D	11:31:09 12/31/10	ARRV
620D	11:31:23 12/31/10	NMIN
620D	11:40:50 12/31/10	CMPL
6K12	11:31:19 12/31/10	ENRT
6K12	11:32:28 12/31/10	CMPL

RESPONDING OFFICERS

Unit	Officer
620D	Furbert, G
6K12	Kirsch, F
6K12	zz-Seta, K

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
TW	12912	12/31/10	101 COOPER LANDING RD NJ YCT	Traffic Stop
LW	10-090861	12/31/10	MV Stop 10-090861 101 COOPER	Initiating Call

Call Number: 236372

Nature: Theft
Reported: 13:06:57 07/28/12
Rcvd By: Goldberg, J How Rcvd: T
Occ Btwn: 13:06:50 07/28/12 and 13:06:50 07/28/12
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: AVRIL RUFFIN
Address:
Phone: ([redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Hueston	13:46:35 07/28/12	631D	ENRT	2	CHPD	incid#=12-047851 Enroute to a Call call=701
Jones, Cra	14:00:27 07/28/12	631D	NMIN	3	CHPD	MDC: dl=[redacted] state=NJ
Jones, Cra	14:17:40 07/28/12	631D	ARRV	2	CHPD	(MDC) Arrived on scene incid#=12-047851 call=701
zz-Hueston	14:32:21 07/28/12	631D	CMPL	2	CHPD	incid#=12-047851 Completed Call clr:G call=701

COMMENTS

theft of 2 ac units occuied between wednesday and friday

UNIT HISTORY

Unit	Time/Date	Code
631D	13:46:35 07/28/12	ENRT
631D	14:00:27 07/28/12	NMIN
631D	14:17:40 07/28/12	ARRV
631D	14:32:21 07/28/12	CMPL

RESPONDING OFFICERS

Unit	Officer

631D Jones, Craig

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	12-047851	07/28/12	Theft 12-047851 101 COOPER L	Initiating Call

Call Number: 242373

Nature: Suspicious Inci
Reported: 11:50:33 08/21/12
Rcvd By: zz-Hueston, K How Rcvd: 9
Occ Btwn: 11:50:16 08/21/12 and 11:50:21 08/21/12
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: RUFFIN-AUSTIN
Address: 216 NE HADDON AVE
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Houliha	11:54:03 08/21/12	634D	ENRT	2	CHPD	incid#=12-053326 Enroute to a Call call=931
zz-Houliha	11:54:10 08/21/12	910	ENRT	2	CHPD	incid#=12-053326 Enroute to a Call call=931
zz-Smith,	11:54:34 08/21/12	634D	VHIN	3	CHPD	MDC: pl=KST98J st=NJ
zz-Smith,	11:56:40 08/21/12	634D	VHIN	3	CHPD	MDC: pl=ZKH10U st=NJ
zz-Houliha	11:56:56 08/21/12	910	ARRV	2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Houliha	11:59:58 08/21/12	621D	ENRT	2	CHPD	incid#=12-053326 Enroute to a Call call=931
zz-Houliha	12:00:40 08/21/12	621D	ARRV	2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Smith,	12:00:42 08/21/12	634D	VHIN	3	CHPD	MDC: pl=KCZ25J st=NJ
zz-Houliha	12:01:51 08/21/12	700	ARRV	2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Smith,	12:03:29 08/21/12	634D	VHIN	3	CHPD	MDC: pl=WDM62G st=NJ
zz-Houliha	12:05:16 08/21/12	621D	ARRV	2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Houliha	12:05:16 08/21/12	634D	ARRV	2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Houliha	12:05:16 08/21/12	700	ARRV	2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Houliha	12:05:16 08/21/12	910	ARRV	2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Houliha	12:07:11 08/21/12	821	ARRV	2	CHPD	incid#=12-053326 Arrived on Scene call=931

zz-Houliha	12:08:13 08/21/12	700	CMPL 2	CHPD	incid#=12-053326 Completed Call call=931
zz-Houliha	12:17:33 08/21/12	634D	CMPL 2	CHPD	incid#=12-053326 Completed Call call=931
zz-Houliha	12:18:57 08/21/12	821	CMPL 2	CHPD	incid#=12-053326 Completed Call call=931
zz-Houliha	12:19:46 08/21/12	910	CMPL 2	CHPD	incid#=12-053326 Completed Call call=931
zz-Bindig,	12:23:14 08/21/12	621D	CMPL 2	CHPD	incid#=12-053326 Reassigned to call 1011, completed call 931
zz-Houliha	12:23:47 08/21/12	ID356	ARRV 2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Bindig,	15:26:03 08/21/12	622D	ARRV 2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Bindig,	15:33:17 08/21/12	622D	CMPL 2	CHPD	incid#=12-053326 Reassigned to call 1401, completed call 931
zz-Bindig,	16:09:25 08/21/12	621D	ARRV 2	CHPD	incid#=12-053326 Arrived on Scene call=931
zz-Stewart	17:14:22 08/21/12	ID356	CMPL 2	CHPD	incid#=12-053326 Completed Call call=931
Grimaldi,	18:09:51 08/21/12	621D	VHIN 2	CHPD	MDC: p1=RSU15W st=NJ
Grimaldi,	18:10:37 08/21/12	621D	NMIN 2	CHPD	MDC: dl=[redacted] state=NJ
Grimaldi,	18:37:48 08/21/12	621D	NMIN 2	CHPD	MDC: dl=[redacted] state=NJ
zz-Bindig,	18:38:01 08/21/12	621D	CMPL 2	CHPD	incid#=12-053326 Completed Call clr:G call=931

COMMENTS
---

black bag w/m khaki pants / blue hat came from house/black shirt starw wars/ on georgia headig towards malrton pike going e. in compl garage/
12:05:40 08/21/2012 - Hueston, K
5'11 dark hair

UNIT HISTORY

Unit	Time/Date	Code
621D	11:59:58 08/21/12	ENRT
621D	12:00:40 08/21/12	ARRV
621D	12:05:16 08/21/12	ARRV
621D	12:23:14 08/21/12	CMPL
621D	16:09:25 08/21/12	ARRV
621D	18:09:51 08/21/12	VHIN
621D	18:10:37 08/21/12	NMIN
621D	18:37:48 08/21/12	NMIN
621D	18:38:01 08/21/12	CMPL
622D	15:26:03 08/21/12	ARRV
622D	15:33:17 08/21/12	CMPL
634D	11:54:03 08/21/12	ENRT
634D	11:54:34 08/21/12	VHIN
634D	11:56:40 08/21/12	VHIN
634D	12:00:42 08/21/12	VHIN

634D	12:03:29	08/21/12	VHIN
634D	12:05:16	08/21/12	ARRV
634D	12:17:33	08/21/12	CMPL
700	12:01:51	08/21/12	ARRV
700	12:05:16	08/21/12	ARRV
700	12:08:13	08/21/12	CMPL
821	12:07:11	08/21/12	ARRV
821	12:18:57	08/21/12	CMPL
910	11:54:10	08/21/12	ENRT
910	11:56:56	08/21/12	ARRV
910	12:05:16	08/21/12	ARRV
910	12:19:46	08/21/12	CMPL
ID356	12:23:47	08/21/12	ARRV
ID356	17:14:22	08/21/12	CMPL

RESPONDING OFFICERS

Unit	Officer
621D	Grimaldi, K
622D	Williams, E
634D	zz-Smith, C
700	zz-Robinson, B
821	zz-Brickley, A
910	Jones, Craig

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	12-053326	08/21/12	Suspicious Inci 12-053326 10	Initiating Call

Call Number: 264495

Nature: Theft
Reported: 12:56:51 11/19/12
Rcvd By: zz-Morley, K How Rcvd: T
Occ Btwn: 12:56:37 11/19/12 and 12:56:37 11/19/12
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: GLENN MESSER
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Connell, R	13:26:00 11/19/12	621D	ENRT	2	CHPD	incid#=12-073811 Enroute to a Call call=891
Connell, R	13:30:59 11/19/12	621D	ARRV	2	CHPD	call=891
zz-Albert,	13:39:30 11/19/12	621D	NMIN	2	CHPD	MDC: dl=[redacted]
Connell, R	13:59:45 11/19/12	621D	CMPL	2	CHPD	incid#=12-073811 Completed Call clr:G call=891

COMMENTS

of air condition units

UNIT HISTORY

Unit	Time/Date	Code
621D	13:26:00 11/19/12	ENRT
621D	13:30:59 11/19/12	ARRV
621D	13:39:30 11/19/12	NMIN
621D	13:59:45 11/19/12	CMPL

RESPONDING OFFICERS

Unit	Officer
621D	zz-Albert, B

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	12-073811	11/19/12	Theft 12-073811 101 COOPER L	Initiating Call

Call Number: 330059

Nature: Suspicious Inci
Reported: 14:32:56 07/24/13
Rcvd By: zz-Morley, K How Rcvd: O
Occ Btwn: 14:32:53 07/24/13 and 14:32:53 07/24/13
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact:
Address:
Phone: ( ) -

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Morley,	14:33:27 07/24/13	621D	ARRV	2	CHPD	On-site call=1191
jpena	14:54:28 07/24/13	621D	CMPL	2	CHPD	incid#=13-051843 Completed Call clr:C call=1191

COMMENTS

male sleeping in shed on abandoned property

UNIT HISTORY

Unit	Time/Date	Code
621D	14:33:27 07/24/13	ARRV
621D	14:54:28 07/24/13	CMPL

RESPONDING OFFICERS

Unit	Officer
621D	zz-Albert, B

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	13-051843	07/24/13	Suspicious Inci 13-051843 10	Initiating Call

Call Number: 334811

Nature: Suspicious Inci
Reported: 12:58:37 08/12/13
Rcvd By: zz-Morley, K How Rcvd: T
Occ Btwn: 12:58:28 08/12/13 and 12:58:28 08/12/13
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: , Work Phone:

Contact: DAVID MCINTOSH
Address: 109 CONNECTICUT
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
jpena	13:01:18 08/12/13	621D	ENRT	2	CHPD	incid#=13-056198 Enroute to a Call call=1001
jpena	13:01:18 08/12/13	622D	ENRT	2	CHPD	incid#=13-056198 Enroute to a Call call=1001
jpena	13:01:28 08/12/13	621D	CMPL	2	CHPD	Call reassigned to 624D
jpena	13:01:28 08/12/13	624D	ENRT	2	CHPD	incid#=13-056198 Enroute to a Call call=1001
jpena	13:06:06 08/12/13	622D	ARRV	2	CHPD	call=1001
zz-Morley,	13:08:59 08/12/13	624D	ARRV	2	CHPD	incid#=13-056198 Arrived on Scene call=1001
Brisbin,G	13:10:01 08/12/13	624D	NMIN	2	CHPD	MDC: name=ABR*, G*
Brisbin,G	13:10:20 08/12/13	624D	NMIN	2	CHPD	MDC: name=AB*, G*
jpena	13:34:03 08/12/13	622D	CMPL	2	CHPD	incid#=13-056198 Reassigned to call 1101, completed call 1001
Brisbin,G	13:37:12 08/12/13	624D	NMIN	2	CHPD	MDC: name=MCINTOSH, DAVID
Brisbin,G	13:37:34 08/12/13	624D	NMIN	2	CHPD	MDC: name=MCINTOSH, DAVID LESTER [redacted] sex=M
Brisbin,G	13:38:12 08/12/13	624D	NMIN	2	CHPD	MDC: dl[redacted]
Brisbin,G	13:55:14 08/12/13	624D	NMIN	2	CHPD	MDC: dl=[redacted] state=PA
jpena	14:00:43 08/12/13	624D	CMPL	2	CHPD	incid#=13-056198 Completed Call clr:G call=1001

COMMENTS

shed of abandoned house broken into compl. unsure of address he will point it out

13:17:41 08/12/2013 - Pena, Jonathan - From: Brisbin,G
111 COOPER LANDING RD, 45 NO FORCE ENTERING TO CLEAR

UNIT HISTORY

Unit	Time/Date	Code
621D	13:01:18 08/12/13	ENRT
621D	13:01:28 08/12/13	CMPL
622D	13:01:18 08/12/13	ENRT
622D	13:06:06 08/12/13	ARRV
622D	13:34:03 08/12/13	CMPL
624D	13:01:28 08/12/13	ENRT
624D	13:08:59 08/12/13	ARRV
624D	13:10:01 08/12/13	NMIN
624D	13:10:20 08/12/13	NMIN
624D	13:37:12 08/12/13	NMIN
624D	13:37:34 08/12/13	NMIN
624D	13:38:12 08/12/13	NMIN
624D	13:55:14 08/12/13	NMIN
624D	14:00:43 08/12/13	CMPL

RESPONDING OFFICERS

Unit	Officer
621D	zz-Albert, B
622D	Velazquez, S
624D	Brisbin,G
624D	Walto, E

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	13-056198	08/12/13	Suspicious Inci 13-056198 10	Initiating Call

Call Number: 349811

Nature: Suspicious Inci
Reported: 10:12:18 10/09/13
Rcvd By: zz-Hueston, K How Rcvd: T
Occ Btwn: 10:12:12 10/09/13 and 10:12:12 10/09/13
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: IANNETTA
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Walsh,	10:14:01 10/09/13	611D	ENRT	2	CHPD	incid#=13-070270 Enroute to a Call call=621
zz-Walsh,	10:14:09 10/09/13	614D	ENRT	2	CHPD	incid#=13-070270 Enroute to a Call call=621
zz-Walsh,	10:19:11 10/09/13	6B1	ENRT	2	CHPD	incid#=13-070270 Enroute to a Call call=621
zz-Walsh,	10:19:18 10/09/13	611D	ARRV	2	CHPD	call=621
zz-Walsh,	10:19:21 10/09/13	614D	ARRV	2	CHPD	call=621
zz-Walsh,	10:19:24 10/09/13	6B1	ARRV	2	CHPD	call=621
zz-Hueston	10:26:04 10/09/13	6B1	CMPL	2	CHPD	incid#=13-070270 Completed Call call=621
zz-Hueston	10:29:49 10/09/13	611D	CMPL	2	CHPD	incid#=13-070270 Completed Call clr:C call=621
zz-Hueston	10:29:49 10/09/13	614D	CMPL	2	CHPD	incid#=13-070270 Completed Call call=621

COMMENTS

wht chev pick up blacked out windows / occupied/ in front of vacant house
10:17:22 10/09/2013 - Walsh, P
code 4

UNIT HISTORY

Unit	Time/Date	Code

611D	10:14:01	10/09/13	ENRT
611D	10:19:18	10/09/13	ARRV
611D	10:29:49	10/09/13	CMPL
614D	10:14:09	10/09/13	ENRT
614D	10:19:21	10/09/13	ARRV
614D	10:29:49	10/09/13	CMPL
6B1	10:19:11	10/09/13	ENRT
6B1	10:19:24	10/09/13	ARRV
6B1	10:26:04	10/09/13	CMPL

RESPONDING OFFICERS

Unit	Officer
611D	Ostermueller, J
614D	Jones, Craig
6B1	zz-Henderson, B

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	13-070270	10/09/13	Suspicious Inci 13-070270 10	Initiating Call

Call Number: 405611

Nature: Suspicious Inci
Reported: 15:31:49 05/17/14
Rcvd By: zz-Walsh, P How Rcvd: T
Occ Btwn: 15:31:22 05/17/14 and 15:31:22 05/17/14
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: MIKE IANETTI
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Walsh,	15:33:16 05/17/14	631D	ENRT	2	CHPD	incid#=14-033092 Enroute to a Call call=1381
zz-Walsh,	15:34:01 05/17/14	621D	ENRT	2	CHPD	incid#=14-033092 Enroute to a Call call=1381
Goldberg,	15:35:32 05/17/14	631D	ARRV	2	CHPD	incid#=14-033092 Arrived on Scene call=1381
Goldberg,	15:35:39 05/17/14	626D	ENRT	2	CHPD	incid#=14-033092 Enroute to a Call call=1381
Goldberg,	15:35:45 05/17/14	621D	CMPL	2	CHPD	incid#=14-033092 Reassigned to call 1361, completed call 1381
Goldberg,	15:36:12 05/17/14	626D	ARRV	2	CHPD	incid#=14-033092 Arrived on Scene call=1381
zz-Walsh,	15:36:52 05/17/14	6B1	ENRT	2	CHPD	incid#=14-033092 Enroute to a Call call=1381
zz-Walsh,	15:37:10 05/17/14	656D	ENRT	2	CHPD	incid#=14-033092 Enroute to a Call call=1381
zz-Walsh,	15:37:27 05/17/14	656D	ARRV	2	CHPD	call=1381
Gibbs, E	15:43:07 05/17/14	631D	NMIN	3	CHPD	MDC: name=LETT, AARON*
Gibbs, E	15:43:22 05/17/14	631D	NMIN	3	CHPD	MDC: dl[redacted] state=PA
Gibbs, E	15:45:12 05/17/14	631D	VHIN	3	CHPD	MDC: pl=GXT9247 st=PA
Goldberg,	15:47:12 05/17/14	626D	CMPL	2	CHPD	incid#=14-033092 Reassigned to call 1361, completed call 1381
zz-Walsh,	15:47:24 05/17/14	631D	CMPL	2	CHPD	incid#=14-033092 Completed Call clr:C call=1381

COMMENTS

vacant property b/m on the delta side of the bldg, unsure what he's

UNIT HISTORY

Unit	Time/Date	Code
621D	15:34:01 05/17/14	ENRT
621D	15:35:45 05/17/14	CMPL
626D	15:35:39 05/17/14	ENRT
626D	15:36:12 05/17/14	ARRV
626D	15:47:12 05/17/14	CMPL
631D	15:33:16 05/17/14	ENRT
631D	15:35:32 05/17/14	ARRV
631D	15:43:07 05/17/14	NMIN
631D	15:43:22 05/17/14	NMIN
631D	15:45:12 05/17/14	VHIN
631D	15:47:24 05/17/14	CMPL
656D	15:37:10 05/17/14	ENRT
656D	15:37:27 05/17/14	ARRV
6B1	15:36:52 05/17/14	ENRT

RESPONDING OFFICERS

Unit	Officer
621D	Moore, D
626D	Hensell, R
631D	Gibbs, E
656D	Kaulinis, V
6B1	zz-Ditore, C

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	14-033092	05/17/14	Suspicious Inci 14-033092 10	Initiating Call

Call Number: 566108

Nature: Suspicious Inci
Reported: 16:15:03 01/09/16
Rcvd By: zz-Morley, K How Rcvd: T
Occ Btwn: 16:14:39 01/09/16 and 16:14:39 01/09/16
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: JOSHUA MAIN
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Morley,	16:17:16 01/09/16	614D	ENRT	2	CHPD	incid#=16-002592 Enroute to a Call call=1931
zz-Morley,	16:17:16 01/09/16	621D	ENRT	2	CHPD	incid#=16-002592 Enroute to a Call call=1931
Goldberg,	16:19:12 01/09/16	626D	ENRT	2	CHPD	incid#=16-002592 Enroute to a Call call=1931
Goldberg,	16:19:17 01/09/16	635D	ENRT	2	CHPD	incid#=16-002592 Enroute to a Call call=1931
Goldberg,	16:19:25 01/09/16	621D	ARRV	2	CHPD	call=1931
Goldberg,	16:19:25 01/09/16	635D	ARRV	2	CHPD	call=1931
Cornforth,	16:21:30 01/09/16	626D	VHIN	2	CHPD	MDC: pl=PXL50V st=NJ
Cornforth,	16:21:52 01/09/16	626D	NMIN	2	CHPD	MDC: name=VILLARI
zz-Morley,	16:23:46 01/09/16	626D	ARRV	2	CHPD	incid#=16-002592 Arrived on Scene call=1931
zz-Morley,	16:23:51 01/09/16	614D	ARRV	2	CHPD	incid#=16-002592 Arrived on Scene call=1931
Goldberg,	16:28:03 01/09/16	620D	ENRT	2	CHPD	incid#=16-002592 Enroute to a Call call=1931
Goldberg,	16:28:03 01/09/16	634D	ENRT	2	CHPD	incid#=16-002592 Enroute to a Call call=1931
Goldberg,	16:28:03 01/09/16	6B4	ENRT	2	CHPD	incid#=16-002592 Enroute to a Call call=1931
Goldberg,	16:28:17 01/09/16	616D	ENRT	2	CHPD	incid#=16-002592 Enroute to a Call call=1931
zz-Morley,	16:30:18 01/09/16	6B4	ARRV	2	CHPD	incid#=16-002592 Arrived on Scene call=1931

zz-Morley,	16:30:50 01/09/16	620D	ARRV 2	CHPD	incid#=16-002592 Arrived on Scene call=1931
zz-Morley,	16:31:08 01/09/16	612D	ENRT 2	CHPD	incid#=16-002592 Enroute to a Call call=1931
zz-Morley,	16:31:13 01/09/16	612D	ARRV 2	CHPD	incid#=16-002592 Arrived on Scene call=1931
Panno, R	16:31:19 01/09/16	634D	ARRV 2	CHPD	(MDC) Arrived on scene incid#=16-002592 call=1931
zz-Morley,	16:31:29 01/09/16	616D	ARRV 2	CHPD	incid#=16-002592 Arrived on Scene call=1931
Goldberg,	16:31:30 01/09/16	622D	ARRV 2	CHPD	incid#=16-002592 Arrived on Scene call=1931
Daniello,	16:40:26 01/09/16	612D	VHIN 1	CHPD	MDC: pl=YL326G st=NJ
Daniello,	16:41:37 01/09/16	612D	NMIN 1	CHPD	MDC: name=ABBRUZZESE
Goldberg,	16:42:53 01/09/16	622D	CMPL 2	CHPD	incid#=16-002592 Reassigned to call 1851, completed call 1931
zz-Morley,	16:47:20 01/09/16	634D	CMPL 2	CHPD	incid#=16-002592 Completed Call call=1931
zz-Morley,	16:47:27 01/09/16	635D	CMPL 2	CHPD	incid#=16-002592 Completed Call call=1931
Holodnak,	16:48:09 01/09/16	614D	NMIN 1	CHPD	MDC: name=MAIN
Nord, Alex	17:12:24 01/09/16	616D	NMIN 1	CHPD	MDC: dl=[redacted] state=NJ
Nord, Alex	17:36:28 01/09/16	616D	NMIN 1	CHPD	MDC: name=SIMMS, LARRY
Nord, Alex	17:37:45 01/09/16	616D	NMIN 1	CHPD	MDC: name=SIMMS
zz-Morley,	17:44:37 01/09/16	616D	CMPL 2	CHPD	incid#=16-002592 Completed Call clr:G call=1931

COMMENTS

thin build w/m purple sreaks in hair wearing all blk brn entered rear yard compl. didnt see them come out to a shed thing build w/m wearing looks like possible 1055

UNIT HISTORY

Unit	Time/Date	Code
612D	16:31:08 01/09/16	ENRT
612D	16:31:13 01/09/16	ARRV
612D	16:40:26 01/09/16	VHIN
612D	16:41:37 01/09/16	NMIN
614D	16:17:16 01/09/16	ENRT
614D	16:23:51 01/09/16	ARRV
614D	16:48:09 01/09/16	NMIN
616D	16:28:17 01/09/16	ENRT
616D	16:31:29 01/09/16	ARRV
616D	17:12:24 01/09/16	NMIN
616D	17:36:28 01/09/16	NMIN
616D	17:37:45 01/09/16	NMIN
616D	17:44:37 01/09/16	CMPL
620D	16:28:03 01/09/16	ENRT
620D	16:30:50 01/09/16	ARRV
621D	16:17:16 01/09/16	ENRT
621D	16:19:25 01/09/16	ARRV

622D	16:31:30	01/09/16	ARRV
622D	16:42:53	01/09/16	CMPL
626D	16:19:12	01/09/16	ENRT
626D	16:21:30	01/09/16	VHIN
626D	16:21:52	01/09/16	NMIN
626D	16:23:46	01/09/16	ARRV
634D	16:28:03	01/09/16	ENRT
634D	16:31:19	01/09/16	ARRV
634D	16:47:20	01/09/16	CMPL
635D	16:19:17	01/09/16	ENRT
635D	16:19:25	01/09/16	ARRV
635D	16:47:27	01/09/16	CMPL
6B4	16:28:03	01/09/16	ENRT
6B4	16:30:18	01/09/16	ARRV

RESPONDING OFFICERS

Unit	Officer
612D	Daniello, R
614D	Holodnak, P
616D	Nord, Alex
616D	Sorrentino, A
620D	Leber, J
621D	Cairns, S
622D	Casey, J
622D	Hendy, C
626D	Cornforth, S
634D	Panno, R
635D	Karch, R
6B4	zz-Glatz, J

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	16-002592	01/09/16	Burglary 16-002592 101 COOPE	Initiating Call

Call Number: 616244

Nature: Suspicious Inci
Reported: 12:33:03 06/28/16
Rcvd By: zz-DiColandrea How Rcvd: T
Occ Btwn: 12:32:53 06/28/16 and 12:32:53 06/28/16
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: MICHAEL IANNETTA
Address: 900 PENNSYLVANIA AVE
Phone: ( ) -

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Castagna,	12:36:19 06/28/16	611D	ENRT	2	CHPD	incid#=16-050364 Enroute to a Call call=1371
Castagna,	12:36:19 06/28/16	625D	ENRT	2	CHPD	incid#=16-050364 Enroute to a Call call=1371
Castagna,	12:36:20 06/28/16	621D	ENRT	2	CHPD	incid#=16-050364 Enroute to a Call call=1371
Castagna,	12:38:17 06/28/16	621D	ARRV	2	CHPD	call=1371
Castagna,	12:39:20 06/28/16	622D	ENRT	2	CHPD	incid#=16-050364 Enroute to a Call call=1371
Castagna,	12:39:25 06/28/16	622D	ARRV	2	CHPD	call=1371
Castagna,	12:40:53 06/28/16	625D	ARRV	2	CHPD	call=1371
Castagna,	12:41:58 06/28/16	611D	ARRV	2	CHPD	call=1371
Castagna,	12:47:57 06/28/16	620D	ENRT	2	CHPD	incid#=16-050364 Enroute to a Call call=1371
Castagna,	12:48:05 06/28/16	620D	ARRV	2	CHPD	call=1371
zz-Day, E4	13:03:04 06/28/16	625D	NMIN	2	CHPD	MDC: dl=M15941567310845 state=NJ
zz-Day, E4	13:04:27 06/28/16	625D	NMIN	2	CHPD	MDC: name=IANNETTA, MICHAEL
Grimaldi,	13:40:02 06/28/16	611D	NMIN	1	CHPD	MDC: name=REES, WILLIAM J dob [redacted] sex=M dl=[redacted] state=NJ
Guldin, K	14:14:33 06/28/16	621D	NMIN	2	CHPD	MDC: name=REES, JULIA
Guldin, K	14:19:45 06/28/16	621D	NMIN	2	CHPD	MDC: dl=[redacted] state=NJ
Guldin, K	14:21:21 06/28/16	621D	NMIN	2	CHPD	MDC: NameNumber=149302
Guldin, K	14:21:41 06/28/16	621D	NMIN	2	CHPD	MDC: NameNumber=4014

Castagna, 15:18:30 06/28/16 621D CMPL 2 CHPD incid#=16-050364 Completed
Call clr:G call=1371

COMMENTS
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46 entered through the backdoor, w/m, white hoodie, house is currently abandoned
12:38:27 06/28/2016 - Castagna, N - From: Guldin, K
OUT AT REAR BY CHURCH
12:42:39 06/28/2016 - Castagna, N - From: Guldin, K
ENTERING TO CLEAR
12:48:03 06/28/2016 - Castagna, N - From: Johnstone, R
ONE IN CUSTODY
12:48:12 06/28/2016 - Castagna, N - From: Guldin, K
STILL CHECKING THE HOUSE
12:53:52 06/28/2016 - Castagna, N - From: Guldin, K
CD 4
13:12:30 06/28/2016 - Castagna, N - From: Grimaldi, K
FOLLOWING EMS AND 621D TO JFK
13:15:36 06/28/2016 - Castagna, N - From: Grimaldi, K
OUT AT JFK // CAMERA MALFUNCTION
13:28:14 06/28/2016 - Castagna, N - From: Grimaldi, K
EMAIL SENT

UNIT HISTORY

Unit	Time/Date	Code
611D	12:36:19 06/28/16	ENRT
611D	12:41:58 06/28/16	ARRV
611D	13:40:02 06/28/16	NMIN
620D	12:47:57 06/28/16	ENRT
620D	12:48:05 06/28/16	ARRV
621D	12:36:20 06/28/16	ENRT
621D	12:38:17 06/28/16	ARRV
621D	14:14:33 06/28/16	NMIN
621D	14:19:45 06/28/16	NMIN
621D	14:21:21 06/28/16	NMIN
621D	14:21:41 06/28/16	NMIN
621D	15:18:30 06/28/16	CMPL
622D	12:39:20 06/28/16	ENRT
622D	12:39:25 06/28/16	ARRV
625D	12:36:19 06/28/16	ENRT
625D	12:40:53 06/28/16	ARRV
625D	13:03:04 06/28/16	NMIN
625D	13:04:27 06/28/16	NMIN

RESPONDING OFFICERS

Unit	Officer
611D	Grimaldi, K
620D	Johnstone, R
621D	Guldin, K
622D	Servis, T
625D	zz-Day, E439

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	16-050364	06/28/16	Burglary 16-050364 101 COOPE	Initiating Call

Call Number: 620403

Nature: Burglary
Reported: 09:16:52 07/12/16
Rcvd By: Castagna, N How Rcvd: O
Occ Btwn: 09:16:52 07/12/16 and 09:16:52 07/12/16
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact:
Address:
Phone: ( ) -

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Castagna,	09:16:55 07/12/16	624D	ARRV	2	CHPD	On-site call=661
Castagna,	09:19:24 07/12/16	610D	ENRT	2	CHPD	incid#=16-054252 Enroute to a Call call=661
Castagna,	09:19:24 07/12/16	631D	ENRT	2	CHPD	incid#=16-054252 Enroute to a Call call=661
Castagna,	09:21:51 07/12/16	621D	ENRT	2	CHPD	incid#=16-054252 Enroute to a Call call=661
Castagna,	09:21:55 07/12/16	610D	ARRV	2	CHPD	call=661
Castagna,	09:23:11 07/12/16	631D	ARRV	2	CHPD	call=661
Guldin, K	09:30:17 07/12/16	621D	ARRV	2	CHPD	(MDC) Arrived on scene incid#=16-054252 call=661
Castagna,	09:31:08 07/12/16	621D	CMPL	2	CHPD	incid#=16-054252 Reassigned to call 681, completed call 661
Castagna,	10:16:53 07/12/16	624D	CMPL	2	CHPD	incid#=16-054252 Completed Call clr:G call=661

COMMENTS

09:20:53 07/12/2016 - Castagna, N - From: Lafferty, J
45 W/ FORCE TO REAR DOOR
09:22:14 07/12/2016 - Castagna, N - From: Lafferty, J
EASIEST APPROACH IS SOUTH SIDE TOWARDS RT 70
09:23:27 07/12/2016 - Castagna, N - From: Lafferty, J
HAVE 31 POST AT FRONT
09:23:33 07/12/2016 - Castagna, N - From: Lafferty, J
MYSELF AND 10 ARE ENTERING TO CLEAR

09:28:11 07/12/2016 - Castagna, N - From: Johnstone, R
CD 4
09:38:27 07/12/2016 - Castagna, N - From: Lafferty, J
800 852 8306 EXT 2158 // IS COMPANY RESPONSIBLE FOR THE PROPERTY // NOTIFY THAT PD IS UNABLE TO SECURE
09:39:58 07/12/2016 - Castagna, N
COMPANY WAS NOTIFIED // STATED THEY WERE NO LONGER RESPONSIBLE FOR THE PROPETY HOWEVER THEY WILL CONTACT THE PROPERTY OWNER

UNIT HISTORY

Unit	Time/Date	Code
610D	09:19:24 07/12/16	ENRT
610D	09:21:55 07/12/16	ARRV
621D	09:21:51 07/12/16	ENRT
621D	09:30:17 07/12/16	ARRV
621D	09:31:08 07/12/16	CMPL
624D	09:16:55 07/12/16	ARRV
624D	10:16:53 07/12/16	CMPL
631D	09:19:24 07/12/16	ENRT
631D	09:23:11 07/12/16	ARRV

RESPONDING OFFICERS

Unit	Officer
610D	Johnstone, R
621D	Guldin, K
624D	Lafferty, J
631D	zz-Albert, B

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	16-054252	07/12/16	Vandalism 16-054252 101 COOP	Initiating Call

Call Number: 687660

Nature: Directed Patrol
Reported: 20:59:09 03/04/17
Rcvd By: Tilton, M How Rcvd: O
Occ Btwn: 20:59:05 03/04/17 and 20:59:05 03/04/17
Type: 1
Priority: 1

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact:
Address:
Phone: ( ) -

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Tilton, M	20:59:22 03/04/17	636D	ARRV	2	CHPD	On-site call=2231
Tilton, M	21:01:32 03/04/17	630N	ENRT	2	CHPD	incid#=17-018494 Enroute to a Call call=2231
zz-Morris,	21:01:39 03/04/17	915	ENRT	2	CHPD	incid#=17-018494 Enroute to a Call call=2231
Tilton, M	21:01:48 03/04/17	641N	ENRT	2	CHPD	incid#=17-018494 Enroute to a Call call=2231
zz-Morris,	21:01:52 03/04/17	641N	ENRT	2	CHPD	incid#=17-018494 Enroute to a Call call=2231
Tilton, M	21:01:55 03/04/17	614N	ENRT	2	CHPD	incid#=17-018494 Enroute to a Call call=2231
Martorana,	21:03:11 03/04/17	620N	ENRT	2	CHPD	incid#=17-018494 Enroute to a Call call=2231
Tilton, M	21:03:14 03/04/17	641N	ARRV	2	CHPD	call=2231
zz-Morris,	21:03:17 03/04/17	630N	ARRV	2	CHPD	call=2231
Tilton, M	21:03:34 03/04/17	612D	ARRV	2	CHPD	incid#=17-018494 Arrived on Scene call=2231
zz-Morris,	21:03:34 03/04/17	614N	ARRV	2	CHPD	call=2231
Tilton, M	21:04:12 03/04/17	6B4	ARRV	2	CHPD	incid#=17-018494 Arrived on Scene call=2231
Tilton, M	21:04:37 03/04/17	912	ARRV	2	CHPD	incid#=17-018494 Arrived on Scene call=2231
zz-Bastien	21:04:47 03/04/17	915	ARRV	2	CHPD	call=2231
Tilton, M	21:04:53 03/04/17	611N	ARRV	2	CHPD	incid#=17-018494 Arrived on Scene call=2231
zz-Morris,	21:09:24 03/04/17	630N	CMPL	2	CHPD	
zz-Morris,	21:09:45 03/04/17	620N	CMPL	2	CHPD	

zz-Morris,	21:09:58	03/04/17	611N	CMPL	2	CHPD	
zz-Morris,	21:10:07	03/04/17	915	CMPL	2	CHPD	
Tilton, M	21:10:15	03/04/17	6B4	CMPL	2	CHPD	
Tilton, M	21:10:24	03/04/17	614N	CMPL	2	CHPD	
Tilton, M	21:10:33	03/04/17	641N	CMPL	2	CHPD	
Tilton, M	21:11:46	03/04/17	912	CMPL	2	CHPD	
Tilton, M	21:12:02	03/04/17	612D	10	2	CHPD	2nd, call=2231
zz-Morris,	21:12:05	03/04/17	612D	10	2	CHPD	2ND, call=2231
Tilton, M	21:14:08	03/04/17	636D	CMPL	2	CHPD	incid#=17-018494 Completed Call clr:C call=2231
Tilton, M	21:14:09	03/04/17	612D	CMPL	2	CHPD	incid#=17-018494 Completed Call call=2231

COMMENTS

tfp
21:01:17 03/04/2017 - Bastien, M - From: Hoffman, E
45 REAR DOOR UNK IF FORCE
21:01:41 03/04/2017 - Bastien, M - From: Hoffman, E
DOOR FORCED CODE 2 IN EFFECT B4 ADVISED
21:05:17 03/04/2017 - Tilton, M - From: Hoffman, E
entering to clear
21:08:25 03/04/2017 - Tilton, M - From: Hoffman, E
code 4 2108 hrs
21:14:02 03/04/2017 - Tilton, M - From: Hoffman, E
amend to 10-25

UNIT HISTORY

Unit	Time/Date	Code
611N	21:04:53 03/04/17	ARRV
611N	21:09:58 03/04/17	CMPL
612D	21:03:34 03/04/17	ARRV
612D	21:12:02 03/04/17	10
612D	21:12:05 03/04/17	10
612D	21:14:09 03/04/17	CMPL
614N	21:01:55 03/04/17	ENRT
614N	21:03:34 03/04/17	ARRV
614N	21:10:24 03/04/17	CMPL
620N	21:03:11 03/04/17	ENRT
620N	21:09:45 03/04/17	CMPL
630N	21:01:32 03/04/17	ENRT
630N	21:03:17 03/04/17	ARRV
630N	21:09:24 03/04/17	CMPL
636D	20:59:22 03/04/17	ARRV
636D	21:14:08 03/04/17	CMPL
641N	21:01:48 03/04/17	ENRT
641N	21:01:52 03/04/17	ENRT
641N	21:03:14 03/04/17	ARRV
641N	21:10:33 03/04/17	CMPL
6B4	21:04:12 03/04/17	ARRV
6B4	21:10:15 03/04/17	CMPL
912	21:04:37 03/04/17	ARRV
912	21:11:46 03/04/17	CMPL
915	21:01:39 03/04/17	ENRT

915	21:04:47 03/04/17	ARRV
915	21:10:07 03/04/17	CMPL

RESPONDING OFFICERS

Unit	Officer
611N	Sangiorgio, N
612D	Daniello, R
614N	Calloway,M
620N	zz-Hunter,J
630N	Lawrence, D
636D	Cornforth, S
636D	zz-Hoffman, E
641N	Kaulinis, V
6B4	zz-Buehler, M
912	Glassman, M
912	Harman, J
915	Gares, G
915	Nelms, R

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	17-018494	03/04/17	Suspicious Inci 17-018494 10	Initiating Call

Call Number: 692435

Nature: Open Property
Reported: 10:38:32 03/21/17
Rcvd By: Furbert, G How Rcvd: T
Occ Btwn: 10:37:56 03/21/17 and 10:37:56 03/21/17
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: DANIEL DUVALD
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Garbe, S	11:24:22 03/21/17	6A2	ENRT	2	CHPD	incid#=17-023058 Enroute to a Call call=1001
Garbe, S	11:24:22 03/21/17	711	ENRT	2	CHPD	incid#=17-023058 Enroute to a Call call=1001
Garbe, S	11:25:27 03/21/17	635D	ENRT	2	CHPD	incid#=17-023058 Enroute to a Call call=1001
Garbe, S	11:25:28 03/21/17	6A2	CMPL	2	CHPD	Call reassigned to 635D
Garbe, S	11:25:55 03/21/17	635D	ARRV	2	CHPD	call=1001
Garbe, S	11:29:54 03/21/17	6A3	ARRV	2	CHPD	incid#=17-023058 Arrived on Scene call=1001
Garbe, S	11:53:24 03/21/17	6A3	CMPL	2	CHPD	
Garbe, S	11:59:49 03/21/17	711	ARRV	2	CHPD	call=1001
Scarlett,	12:08:46 03/21/17	635D	NMIN	3	CHPD	MDC: name=KOSE
Garbe, S	12:09:51 03/21/17	635D	CMPL	2	CHPD	incid#=17-023058 Completed Call clr:C call=1001
Garbe, S	12:09:51 03/21/17	711	CMPL	2	CHPD	incid#=17-023058 Completed Call call=1001

COMMENTS

CALLER STATES A HOUSE FOR SALE ON COOPERLANDING NEAR PENNSYLVANIA HAS A BROKEN UPSTAIRS WINDOW AND A POSSIBLE FORCED DOWNSTAIRS WINDOW. CALLER IS UNSURE OF THE EXACT ADDRESS BUT INDICATED THE HOUSE IS CLOSER TO RT 70.
11:27:51 03/21/2017 - Garbe, S - From: Weist, J
45 to side window
11:28:04 03/21/2017 - Garbe, S - From: Scarlett, R
entering to clear

UNIT HISTORY

Unit	Time/Date	Code
635D	11:25:27 03/21/17	ENRT
635D	11:25:55 03/21/17	ARRV
635D	12:08:46 03/21/17	NMIN
635D	12:09:51 03/21/17	CMPL
6A2	11:24:22 03/21/17	ENRT
6A2	11:25:28 03/21/17	CMPL
6A3	11:29:54 03/21/17	ARRV
6A3	11:53:24 03/21/17	CMPL
711	11:24:22 03/21/17	ENRT
711	11:59:49 03/21/17	ARRV
711	12:09:51 03/21/17	CMPL

RESPONDING OFFICERS

Unit	Officer
635D	Scarlett, R
6A2	Velazquez, S
6A3	Branda, C
711	Weist, J

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	17-023058	03/21/17	Open Property 17-023058 101	Initiating Call

Call Number: 698914

Nature: Burglary
Reported: 11:34:48 04/12/17
Rcvd By: Ruff, B How Rcvd: T
Occ Btwn: 11:34:42 04/12/17 and 11:34:42 04/12/17
Type: 1
Priority: 1

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: DAVID MCINTOSH
Address:
Phone: ([redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Connell, R	11:36:24 04/12/17	632D	ENRT	2	CHPD	incid#=17-029234 Enroute to a Call call=1321
Connell, R	11:36:31 04/12/17	915	ENRT	2	CHPD	incid#=17-029234 Enroute to a Call call=1321
Connell, R	11:37:02 04/12/17	612D	ENRT	2	CHPD	incid#=17-029234 Enroute to a Call call=1321
Connell, R	11:37:16 04/12/17	632D	ARRV	2	CHPD	call=1321
Connell, R	11:37:59 04/12/17	912	ARRV	2	CHPD	incid#=17-029234 Arrived on Scene call=1321
Connell, R	11:38:05 04/12/17	612D	ARRV	2	CHPD	call=1321
Connell, R	11:38:22 04/12/17	710	ARRV	2	CHPD	incid#=17-029234 Arrived on Scene call=1321
Ruff, B	11:38:24 04/12/17	6A1	ENRT	2	CHPD	incid#=17-029234 Enroute to a Call call=1321
Connell, R	11:38:40 04/12/17	910	ARRV	2	CHPD	incid#=17-029234 Arrived on Scene call=1321
Ruff, B	11:41:13 04/12/17	714	ARRV	2	CHPD	incid#=17-029234 Arrived on Scene call=1321
Connell, R	11:42:08 04/12/17	6A1	ARRV	2	CHPD	call=1321
Connell, R	11:42:22 04/12/17	915	ARRV	2	CHPD	call=1321
Connell, R	11:46:51 04/12/17	910	CMPL	2	CHPD	incid#=17-029234 Reassigned to call 1341, completed call 1321
Ruff, B	11:46:52 04/12/17	910	CMPL	2	CHPD	incid#=17-029234 Reassigned to call 1341, completed call 1321
Ruff, B	11:47:51 04/12/17	912	CMPL	2	CHPD	

Connell, R	11:51:46	04/12/17	612D	ENRJ	2	CHPD incid#=17-029234 Enroute to Jail 97.9 call=1321
Connell, R	11:55:07	04/12/17	612D	JAIL	2	CHPD incid#=17-029234 Arrived at Jail 99.3 call=1321
Ruff, B	11:57:27	04/12/17	915	CMPL	2	CHPD
Ruff, B	11:57:53	04/12/17	6A1	CMPL	2	CHPD
Connell, R	12:01:56	04/12/17	625D	ENRT	2	CHPD incid#=17-029234 Enroute to a Call call=1321
Ruff, B	12:05:02	04/12/17	632D	30	2	CHPD call=1321
Connell, R	12:05:26	04/12/17	625D	ARRV	2	CHPD call=1321
Johnstone,	12:16:18	04/12/17	612D	NMIN	1	CHPD MDC: dl=[redacted] state=NJ
Ruff, B	12:18:09	04/12/17	625D	30	2	CHPD EVIDENCE, call=1321
Connell, R	13:34:47	04/12/17	612D	CMPL	2	CHPD
Ruff, B	15:45:59	04/12/17	910	ENRT	2	CHPD incid#=17-029234 Enroute to a Call call=1321
Ruff, B	16:15:08	04/12/17	910	CMPL	2	CHPD
Ruff, B	16:25:01	04/12/17	632D	CMPL	2	CHPD incid#=17-029234 Completed Call clr:G call=1321
Ruff, B	16:25:02	04/12/17	625D	CMPL	2	CHPD incid#=17-029234 Completed Call call=1321

COMMENTS

MALE BROKE SIDE DOOR WINDOW AND ENTERED HOUSE
11:40:04 04/12/2017 - Ruff, B
CALLER STATES HE WITNESSED JUVENILE BREAK WINDOW ON DOOR AND ENTER HOUSE - WAS THEN COVERING WINDOWS UP WITH SHEETS - IS NOW HIDING IN CLOSET
11:43:25 04/12/2017 - Ruff, B - From: Steinach, E
CDE 4
11:45:06 04/12/2017 - Connell, R
1 in custody
11:55:31 04/12/2017 - Connell, R
chfd for safety measure

UNIT HISTORY

Unit	Time/Date	Code
612D	11:37:02 04/12/17	ENRT
612D	11:38:05 04/12/17	ARRV
612D	11:51:46 04/12/17	ENRJ
612D	11:55:07 04/12/17	JAIL
612D	12:16:18 04/12/17	NMIN
612D	13:34:47 04/12/17	CMPL
625D	12:01:56 04/12/17	ENRT
625D	12:05:26 04/12/17	ARRV
625D	12:18:09 04/12/17	30
625D	16:25:02 04/12/17	CMPL
632D	11:36:24 04/12/17	ENRT
632D	11:37:16 04/12/17	ARRV
632D	12:05:02 04/12/17	30
632D	16:25:01 04/12/17	CMPL
6A1	11:38:24 04/12/17	ENRT
6A1	11:42:08 04/12/17	ARRV
6A1	11:57:53 04/12/17	CMPL

710	11:38:22 04/12/17	ARRV
714	11:41:13 04/12/17	ARRV
910	11:38:40 04/12/17	ARRV
910	11:46:51 04/12/17	CMPL
910	11:46:52 04/12/17	CMPL
910	15:45:59 04/12/17	ENRT
910	16:15:08 04/12/17	CMPL
912	11:37:59 04/12/17	ARRV
912	11:47:51 04/12/17	CMPL
915	11:36:31 04/12/17	ENRT
915	11:42:22 04/12/17	ARRV
915	11:57:27 04/12/17	CMPL

RESPONDING OFFICERS

Unit	Officer
612D	Johnstone, R
625D	Bryant, S
625D	Mayr, J
632D	McLaughlin, R
6A1	zz-Billings, D
710	Watts, J
714	Dimattia, E
910	Carmolingo, S
910	Shields, J
912	Knoedler, C
915	zz-Steinach, E

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	17-029234	04/12/17	Burglary 17-029234 101 COOPE	Initiating Call

Call Number: 787951

Nature: MVA
Reported: 06:01:22 01/10/18
Rcvd By: Berg, A How Rcvd: T
Occ Btwn: 06:01:14 01/10/18 and 06:01:14 01/10/18
Type: 1
Priority: 1

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: CCFR
Address:
Phone: ( ) -

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Castagna,	06:01:55 01/10/18	621N	ENRT	2	CHPD	incid#=18-002640 Enroute to a Call call=591
Castagna,	06:01:55 01/10/18	911	ENRT	2	CHPD	incid#=18-002640 Enroute to a Call call=591
Castagna,	06:01:55 01/10/18	912	ENRT	2	CHPD	incid#=18-002640 Enroute to a Call call=591
Castagna,	06:03:20 01/10/18	911	ARRV	2	CHPD	call=591
Castagna,	06:04:33 01/10/18	621N	ARRV	2	CHPD	call=591
Castagna,	06:05:12 01/10/18	912	ARRV	2	CHPD	call=591
Castagna,	06:06:29 01/10/18	910	ARRV	2	CHPD	incid#=18-002640 Arrived on Scene call=591
Castagna,	06:06:41 01/10/18	6A7	ARRV	2	CHPD	incid#=18-002640 Arrived on Scene call=591
Martorana,	06:15:25 01/10/18	910	NMIN		CHPD	MDC: dl=[redacted] state=NJ
Mayr, J	06:15:52 01/10/18	621N	NMIN	2	CHPD	MDC: dl=[redacted] state=NJ
Berg, A	06:40:33 01/10/18	620D	ENRT	2	CHPD	incid#=18-002640 Enroute to a Call call=591
Castagna,	06:42:25 01/10/18	634D	ENRT	2	CHPD	incid#=18-002640 Enroute to a Call call=591
Martorana,	06:42:28 01/10/18	910	NMIN		CHPD	MDC: name=AUSTIN, MONTEKA D
Varady, S	06:42:51 01/10/18	911	VHIN		CHPD	MDC: st=NJ
Varady, S	06:42:52 01/10/18	911	NMIN		CHPD	MDC: dl=[redacted] state=NJ
Castagna,	06:49:42 01/10/18	634D	ARRV	2	CHPD	call=591
Castagna,	06:50:33 01/10/18	6A7	CMPL	2	CHPD	

Castagna,	06:50:33	01/10/18	910	CMPL 2	CHPD	
Castagna,	06:50:33	01/10/18	912	CMPL 2	CHPD	
Castagna,	06:50:38	01/10/18	621N	CMPL 2	CHPD	
zz-Morley,	07:05:07	01/10/18	634D	CMPL 2	CHPD	incid#=18-002640 Completed Call call=591
zz-Morley,	07:05:12	01/10/18	620D	ARRV 2	CHPD	incid#=18-002640 Arrived on Scene call=591
Holodnak,	09:27:08	01/10/18	620D	VHIN 2	CHPD	MDC: p1=P38DPY st=NJ
Ruff, B	09:29:57	01/10/18	620D	CMPL 2	CHPD	incid#=18-002640 Completed Call call=591
Ruff, B	09:29:57	01/10/18	911	CMPL 2	CHPD	incid#=18-002640 Completed Call clr:G21 call=591

COMMENTS

CAR FLIPPED OVER OCCUPANT EJECTED
06:04:31 01/10/2018 - Castagna, N - From: Varady, S
OUT W/ FIRE // GONNA BE ON THE LAWN OF 117 COOPER LANDING RD
06:05:10 01/10/2018 - Castagna, N - From: Varady, S
ONE OCCUPANT // CONSCIOUS AND OUT OF VEHICLE
06:05:19 01/10/2018 - Castagna, N - From: Varady, S
RIGHT LANE OF COOPER LANDING WILL BE SHUT DOWN
06:05:43 01/10/2018 - Castagna, N - From: Varady, S
CD 3
06:07:22 01/10/2018 - Castagna, N - From: Varady, S
CD 4
06:15:09 01/10/2018 - Castagna, N - From: Varady, S
POLE #65871DL // NOTIFY PSEG ONE OF THE PRIMARY SUPPORTS IS KNOCKED OFF THE POLE
07:03:26 01/10/2018 - Ruff, B - From: Varady, S
COOPER LANDING RD OPEN

UNIT HISTORY

Unit	Time/Date	Code
620D	06:40:33 01/10/18	ENRT
620D	07:05:12 01/10/18	ARRV
620D	09:27:08 01/10/18	VHIN
620D	09:29:57 01/10/18	CMPL
621N	06:01:55 01/10/18	ENRT
621N	06:04:33 01/10/18	ARRV
621N	06:15:52 01/10/18	NMIN
621N	06:50:38 01/10/18	CMPL
634D	06:42:25 01/10/18	ENRT
634D	06:49:42 01/10/18	ARRV
634D	07:05:07 01/10/18	CMPL
6A7	06:06:41 01/10/18	ARRV
6A7	06:50:33 01/10/18	CMPL
910	06:06:29 01/10/18	ARRV
910	06:15:25 01/10/18	NMIN
910	06:42:28 01/10/18	NMIN
910	06:50:33 01/10/18	CMPL
911	06:01:55 01/10/18	ENRT
911	06:03:20 01/10/18	ARRV
911	06:42:51 01/10/18	VHIN
911	06:42:52 01/10/18	NMIN

911	09:29:57 01/10/18	CMPL
912	06:01:55 01/10/18	ENRT
912	06:05:12 01/10/18	ARRV
912	06:50:33 01/10/18	CMPL

RESPONDING OFFICERS

Unit	Officer
620D	Holodnak, P
621N	Mayr, J
634D	Schuck, D
6A7	Williams, E
910	Martorana, J
911	Varady, S
912	Brisbin,G

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	18-002640	01/10/18	MVA 18-002640 101 COOPER LAN	Initiating Call

WRECKER HISTORY

Dispatcher	Wrecker	Time/Date	Code	Description
Castagna,	CT	06:10:00 01/10/18	ENRT	
Castagna,	CT	06:22:04 01/10/18	ARRV	

Call Number: 816587

Nature: Headquarters
Reported: 21:50:45 04/02/18
Rcvd By: Castagna, N How Rcvd: T
Occ Btwn: 21:50:43 04/02/18 and 21:50:43 04/02/18
Type: 1
Priority: 3

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact:
Address:
Phone: ( ) -

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Castagna,	21:50:53 04/02/18	620N	ENRT	2	CHPD	incid#=18-028018 Enroute to a Call call=3241
Castagna,	21:50:53 04/02/18	640N	ENRT	2	CHPD	incid#=18-028018 Enroute to a Call call=3241
Castagna,	21:50:58 04/02/18	640N	ARRV	2	CHPD	call=3241
Castagna,	21:53:30 04/02/18	620N	ARRV	2	CHPD	call=3241
Kirsch, F	22:09:57 04/02/18	620N	CMPL	2	CHPD	
Castagna,	22:10:59 04/02/18	640N	CMPL	2	CHPD	incid#=18-028018 Completed Call clr:C call=3241

UNIT HISTORY

Unit	Time/Date	Code
620N	21:50:53 04/02/18	ENRT
620N	21:53:30 04/02/18	ARRV
620N	22:09:57 04/02/18	CMPL
640N	21:50:53 04/02/18	ENRT
640N	21:50:58 04/02/18	ARRV
640N	22:10:59 04/02/18	CMPL

RESPONDING OFFICERS

Unit	Officer
620N	zz-Fay, Sean
640N	zz-Coll, T

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	18-028018	04/02/18	Headquarters 18-028018 101 C	Initiating Call

Call Number: 902797

Nature: Burglary
Reported: 15:11:49 12/20/18
Rcvd By: Connell, R How Rcvd: T
Occ Btwn: 15:11:47 12/20/18 and 15:11:47 12/20/18
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact:
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
zz-Garelic	15:17:35 12/20/18	626D	ENRT	2	CHPD	incid#=18-103544 Enroute to a Call call=1661
Connell, R	15:17:36 12/20/18	626D	ENRT	2	CHPD	incid#=18-103544 Enroute to a Call call=1661
zz-Garelic	15:26:11 12/20/18	626D	ARRV	2	CHPD	incid#=18-103544 Arrived on Scene call=1661
Johnstone,	15:51:07 12/20/18	626D	NMIN	2	CHPD	MDC: name=BYRD, JA
Johnstone,	15:51:11 12/20/18	626D	NMIN	2	CHPD	MDC: name=BYRD, JA*
Johnstone,	15:52:50 12/20/18	626D	NMIN	2	CHPD	MDC: dl=[redacted] state=NJ
Ruiz, D	16:09:36 12/20/18	626D	CMPL	2	CHPD	incid#=18-103544 Completed Call clr:G call=1661

COMMENTS

found.. occurred within the last month vacant property

UNIT HISTORY

Unit	Time/Date	Code
626D	15:17:35 12/20/18	ENRT
626D	15:17:36 12/20/18	ENRT
626D	15:26:11 12/20/18	ARRV
626D	15:51:07 12/20/18	NMIN
626D	15:51:11 12/20/18	NMIN

626D 15:52:50 12/20/18 NMIN
626D 16:09:36 12/20/18 CMPL

RESPONDING OFFICERS

Unit	Officer
626D	Johnstone, R

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	18-103544	12/20/18	Burglary 18-103544 101 COOPE	Initiating Call

Call Number: 964106

Nature: Vandalism
Reported: 17:38:13 07/08/19
Rcvd By: Goldberg, J How Rcvd: 9
Occ Btwn: 17:37:44 07/08/19 and 17:37:50 07/08/19
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: ABRAHAM MASHINSKI
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Goldberg,	17:39:47 07/08/19	622D	ENRT	2	CHPD	incid#=19-050527 Enroute to a Call call=2091
Goldberg,	17:47:21 07/08/19	622D	ARRV	2	CHPD	call=2091
Ruff, B	18:15:21 07/08/19	641D	ENRT	2	CHPD	incid#=19-050527 Enroute to a Call call=2091
Berg, A	19:03:08 07/08/19	ID410	ENRT	2	CHPD	incid#=19-050527 Enroute to a Call call=2091
Berg, A	19:03:20 07/08/19	622D	CMPL	2	CHPD	incid#=19-050527 Reassigned to call 2261, completed call 2091
Berg, A	19:17:08 07/08/19	622D	ARRV	2	CHPD	incid#=19-050527 Arrived on Scene call=2091
Berg, A	19:17:14 07/08/19	ID410	CMPL	2	CHPD	
Berg, A	19:17:16 07/08/19	622D	30	2	CHPD	call=2091
Hort, B	19:54:28 07/08/19	622D	NMIN	2	CHPD	MDC: name=SHARMAN, BRETT
Berg, A	19:58:58 07/08/19	622D	CMPL	2	CHPD	incid#=19-050527 Completed Call clr:G call=2091

COMMENTS

to residence..

CALLBACK=??(732)535-7946 LAT=+039.918609 LON=-075.032458 UNC=0000006

UNIT HISTORY

Unit	Time/Date	Code
622D	17:39:47 07/08/19	ENRT
622D	17:47:21 07/08/19	ARRV
622D	19:03:20 07/08/19	CMPL
622D	19:17:08 07/08/19	ARRV
622D	19:17:16 07/08/19	30
622D	19:54:28 07/08/19	NMIN
622D	19:58:58 07/08/19	CMPL
641D	18:15:21 07/08/19	ENRT
ID410	19:03:08 07/08/19	ENRT
ID410	19:17:14 07/08/19	CMPL

RESPONDING OFFICERS

Unit	Officer
622D	Hort, B
641D	Sost, Timothy

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	19-050527	07/08/19	Burglary 19-050527 101 COOPE	Initiating Call

Call Number: 1043725

Nature: PRIU Report
Reported: 11:51:16 04/22/20
Rcvd By: Ruff, B How Rcvd: T
Occ Btwn: 11:51:02 04/22/20 and 11:51:02 04/22/20
Type: 1
Priority: 3

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: TERRY
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Ruff, B	11:53:21 04/22/20	D93	ARRV	2	CHPD	incid#=20-024866 Arrived on Scene call=1171
Ruff, B	11:53:29 04/22/20	D93	CMPL	2	CHPD	incid#=20-024866 Completed Call clr:X call=1171

COMMENTS

3 WHITE VANS PULLING UP TO VACANT PROPERTY - UNSURE IF WORK IS BEING DONE OR IF VANS ARE BEING LEFT ON PROPERTY FOR OTHER REASONS

UNIT HISTORY

Unit	Time/Date	Code
D93	11:53:21 04/22/20	ARRV
D93	11:53:29 04/22/20	CMPL

RESPONDING OFFICERS

Unit	Officer
D93	Ruff, B

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	20-024866	04/22/20	Suspicious Inci 20-024866 10	Initiating Call

Call Number: 1074934

Nature: Open Property
Reported: 16:24:39 08/20/20
Rcvd By: Yanchyshyn, J How Rcvd: T
Occ Btwn: 16:24:24 08/20/20 and 16:24:24 08/20/20
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: DOMINICK ITZI
Address:
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
jpena	16:29:16 08/20/20	616D	ENRT	2	CHPD	incid#=20-050898 Enroute to a Call call=1521
jpena	16:29:16 08/20/20	626D	ENRT	2	CHPD	incid#=20-050898 Enroute to a Call call=1521
jpena	16:29:19 08/20/20	616D	ARRV	2	CHPD	call=1521
jpena	16:34:02 08/20/20	626D	ARRV	2	CHPD	call=1521
Quach, Cal	16:52:59 08/20/20	616D	CMPL	2	CHPD	incid#=20-050898 Completed Call clr:G call=1521
Quach, Cal	16:53:00 08/20/20	626D	CMPL	2	CHPD	incid#=20-050898 Completed Call call=1521

COMMENTS

Dominick, Public Works Supervisor, advised a Public works grass cutting crew is on location cutting the grass at 101 Cooperlanding Road which is a vacant property. They noticed the rear back door was open. Dominick is requesting police check the property and secure the door.
16:36:09 08/20/2020 - jpena - From: Martorana, J
ENTERING TO CLEAR // DOOR TAMPERED W/ BUT APPEARS OLD
16:39:20 08/20/2020 - jpena - From: Martorana, J
CD 4 // CHECK FOR KEYHOLDER
16:46:50 08/20/2020 - jpena
PROPERTY OWNER CONTACTED // OUT OF STATE, WILL ADVISE WHEN HE IS ON LOC IF HE WISHES TO 26 // ABRAHAM MASHINSKY SPILLMAN # 253045 // [redacted]

UNIT HISTORY

Unit	Time/Date	Code
616D	16:29:16 08/20/20	ENRT
616D	16:29:19 08/20/20	ARRV
616D	16:52:59 08/20/20	CMPL
626D	16:29:16 08/20/20	ENRT
626D	16:34:02 08/20/20	ARRV
626D	16:53:00 08/20/20	CMPL

RESPONDING OFFICERS

Unit	Officer
616D	Benavides, M
626D	Martorana, J

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	20-050898	08/20/20	Open Property 20-050898 101	Initiating Call

Call Number: 1082629

Nature: Juvenile Incide
Reported: 17:39:05 09/19/20
Rcvd By: Connell, R How Rcvd: T
Occ Btwn: 17:39:04 09/19/20 and 17:39:04 09/19/20
Type: 1
Priority: 2

Address: 101 COOPER LANDING RD
City:

Alarm:

COMPLAINANT/CONTACT

Complainant: , Name#:
Race: Sex: DOB: **/**/**
Address: ,
Home Phone: Work Phone:

Contact: IANNETTA, TERRI
Address: 900 PENNSYLVANIA AVE
Phone: [redacted]

RADIO LOG

Dispatcher	Time/Date	Unit	Code	Zone	Agnc	Description
Connell, R	17:46:25 09/19/20	634D	ENRT	2	CHPD	incid#=20-057450 Enroute to a Call call=1591
Connell, R	17:47:46 09/19/20	634D	ARRV	2	CHPD	call=1591
Goldberg,	17:48:00 09/19/20	655D	ENRT	2	CHPD	incid#=20-057450 Enroute to a Call call=1591
Connell, R	17:48:40 09/19/20	625D	ENRT	2	CHPD	incid#=20-057450 Enroute to a Call call=1591
Connell, R	17:48:40 09/19/20	655D	CMPL	2	CHPD	Call reassigned to 625D
Goldberg,	17:52:10 09/19/20	655D	ENRT	2	CHPD	incid#=20-057450 Enroute to a Call call=1591
Connell, R	17:55:02 09/19/20	625D	ARRV	2	CHPD	call=1591
Connell, R	17:59:14 09/19/20	655D	ARRV	2	CHPD	call=1591
Connell, R	18:11:31 09/19/20	655D	CMPL	2	CHPD	
Goldberg,	18:15:02 09/19/20	625D	CMPL	2	CHPD	incid#=20-057450 Reassigned to call 1631, completed call 1591
Goldberg,	18:28:20 09/19/20	634D	CMPL	2	CHPD	incid#=20-057450 Completed Call clr:G call=1591

COMMENTS

juvs to the rear of vacant property.. poss 41
17:52:33 09/19/2020 - Goldberg, J
45 rear, posible 45 to interior w/ force

UNIT HISTORY

Unit	Time/Date	Code
625D	17:48:40 09/19/20	ENRT
625D	17:55:02 09/19/20	ARRV
625D	18:15:02 09/19/20	CMPL
634D	17:46:25 09/19/20	ENRT
634D	17:47:46 09/19/20	ARRV
634D	18:28:20 09/19/20	CMPL
655D	17:48:00 09/19/20	ENRT
655D	17:48:40 09/19/20	CMPL
655D	17:52:10 09/19/20	ENRT
655D	17:59:14 09/19/20	ARRV
655D	18:11:31 09/19/20	CMPL

RESPONDING OFFICERS

Unit	Officer
625D	Spitz, T
634D	Williams, C
655D	Bruno, S

INVOLVEMENTS

Type	Record#	Date	Description	Relationship
LW	20-057450	09/19/20	Juvenile Incide 20-057450 10	Initiating Call