**Laura Burns**



**From:** Valerie Egan
**Sent:** Monday, September 12, 2022 10:21 AM
**To:** Laura Burns
**Subject:** FW: OPRA request - 106 Camp Trail, Hopatcong, NJ 07821-2934

-----Original Message-----
From: Diane Dembiec <opra+request-35288-3125eed5@requests.opramachine.com>
Sent: Monday, September 12, 2022 10:16 AM
To: Valerie Egan <Vegan@hopatcong.org>
Subject: OPRA request - 106 Camp Trail, Hopatcong, NJ 07821-2934

CAUTION:

This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Hopatcong Borough,

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 and Closed Permits for 106 Camp Trail, Hopatcong, NJ 07821-2934.

I represent the Buyer for this Property. Thanks so much!

Yours faithfully,

RE/MAX InStyle Realty

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Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-35288-3125eed5@requests.opramachine.com

Is vegan@hopatcong.org the wrong address for OPRA requests to Hopatcong Borough? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=hopatcong_borough

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
https://opramachine.com/help/officers

View this OPRA request & responses online:
https://opramachine.com/request/106_camp_trail_hopatcong_nj_0782

BOROUGH OF HOPATCONG
111 RIVER STYX RD
HOPATCONG, N.J. 07843

Date Issued 7/13/2022
Control # C41103/3
Permit # 22-627

# UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 41103 Lot 3 Qual

Work Site Location 106 CAMP TR

Owner in Fee BEAVER TRAIL LLC
Address SAME
HOPATCONG, NJ 07843-
Telephone (20[redacted]

Contractor JORGE VELEZ
Address 51 NOEL DRIVE
NORTH ARLINGTON, NJ 07031-
Telephone (201)522-2903
Lic. No. or Bldrs. Reg. No.
Federal Emp. No[redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
AC REPLACEMENT

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 $ 6,000

Construction Official

07/07/2022
Date

PAYMENTS (Office Use Only)

| | |
|---|---|
| Building | 0 |
| Electrical | 55 |
| Plumbing | 65 |
| Fire Protection | 0 |
| Mechanical | 0 |
| Elevator Devices | 0 |
| Other | |
| DCA State Permit Fee | 11 |
| Cert. of Occupancy | 0 |
| Other | |
| Total | 131 |
| Check No. | 97 |
| Cash | |
| Collected By | LB |

RECEIPT # 94160

U.C.C. F170 (rev. 3/96)

BOROUGH OF HOPATCONG
111 RIVER STYX RD
HOPATCONG, N.J. 07843

Date Issued 08/11/22
Control #
Permit # 22-627

# UCC NEW JERSEY
# CERTIFICATE

IDENTIFICATION

Block 41103 Lot 3 Qual
Work Site Location 106 CAMP TR

Owner in Fee/Occupant BEAVER TRAIL LLC
Address SAME
HOPATCONG, NJ 07843-
Telephone (2[redacted]
Contractor JORGE VELEZ
Address 51 NOEL DRIVE
NORTH ARLINGTON, NJ 07031-
Telephone (201)522-2903 Fax ( ) -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. [redacted]

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

AC REPLACEMENT

## [ ] 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 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 _____, ____.

William O'Connor
Construction Official

Fee $ 0
Paid [X] Check No. 97
Collected by: LB

U.C.C. F260 (rev. 3/96)

# ELECTRICAL SUBCODE
## TECHNICAL SECTION

Date Received
Control #
Date Issued 7/13/2022
Permit # 22-627

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

Block 41103 Lot 3 Qualification Code

Work Site Location 106 Camp Trail
Andover, NJ 07821

Owner in Fee: Beaver Trail, LLC

Tel. (201) [redacted] e-mail [redacted].com

Address 179 Rt 46 Suite 15 #149 Rockaway NJ 07866
street municipality zip code

Contractor: Jorge Velez Tel. (201) 960-4286

Address 51 Noel Dr. e-mail milliontechhvac@
North Arlington, NJ 07031 gmail.com

Contractor License No. 19HC00674000 Exp. Date 06/30/2024

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

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

**B. ELECTRICAL CHARACTERISTICS**

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 500

**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 sign/Contractor sign and seal here: Jorge Velez

Print name here: JORGE VELEZ

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK: AC (cooling only) replacement

| 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 | |
| 1 | | 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 | |
| | | | |

Administrative Surcharge $
Minimum Fee $ 50.00
State Permit Surcharge Fee $
TOTAL FEE $

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW
[X] No Plans Required
[ ] Partial Underslab Utilities Approved
Date Approved by:
[ ] Electric Plans Approved
Date Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date 7/13/22
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date
Approved by:

| INSPECTIONS Type: | Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Rough | | | | |
| Barrier-Free | | | | |
| Trench | | | | |
| Temp. Serv. | | | | |
| Const. Serv. | | | | |
| TCO | | | | |
| Other | | | | |
| Service | | | | |
| Final | | | 7/13/22 | |
| Barrier-Free | | | | |
| Temp. Cut-In-Card Date Issued | | | | |
| Final Cut-In-Card Date Issued | | | | |
| Annual Pool Inspection | | | | |
| Date of Grounding and Bonding Certification | | | | |

Mechanical

# PLUMBING SUBCODE
## TECHNICAL SECTION

Date Received
Control #

Date Issued 7/13/2022
Permit # 22-627

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

Block 41103 Lot 3 Qualification Code

Work Site Location 106 Camp Trail
Andover, NJ 07821

Owner in Fee: Beaver Trail, LLC

Tel. 201 [redacted] e-mail [redacted]homes.com

Address 179 Rt. 46 Suite 15 #149 Rockaway, NJ 07866
street municipality zip code

Contractor: Jorge Velez Tel. 201 522-2903

Address 51 Noel Dr. e-mail millionTechHVAC@
North Arlington, NJ 07031 gmail.com

Contractor License No. 19HC00674000 Exp. Date 06/30/2024

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. [redacted] FAX:

**B. PLUMBING CHARACTERISTICS**

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 5500

**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 sign/Contractor sign and seal here: Jorge Velez

Print name here: JORGE VELEZ

[ ] Licensed Contractor [ ] Exempt Applicant

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

AC (cooling only) replacement

| QTY. | FIXTURE/EQUIPMENT |
|---|---|
| | 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 |
| | Water Service Connection |
| | Stacks |
| 1 | Other AC |

FEE (Office Use Only)

$

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $ 65

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW
[X] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date 7/13/22 Approved by: [redacted]
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required
[ ] Bldg. [X] Elec. [ ] Fire [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 7/13/2022
Approved by: [redacted]

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 8/31/2022
Approved by: [redacted]

| 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 | MC | | 8/31/2022 | |