BOROUGH OF HOPATCONG
BUILDING DEPARTMENT
RIVER STYX ROAD
HOPATCONG, N.J. 07843
TEL: (201) 398-6161

C. of O. ISSUED 7/20/85

636

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

NO. ______ STREET ______

IMPORTANT – *Applicant to complete all items in sections: I, II, III, IV, and IX.*

I. LOCATION OF BUILDING

AT (LOCATION) 106 (NO.) Camp Trail (STREET) ZONING DISTRICT ______

BETWEEN ______ (CROSS STREET) AND ______ (CROSS STREET)

SUBDIVISION ______ LOT 3 BLOCK 41103 LOT SIZE ______

II. TYPE AND COST OF BUILDING – *All applicants complete Parts A – D*

A. TYPE OF IMPROVEMENT

1 ☐ New building
2 ☒ Addition (*If residential, enter number of new housing units added, if any, in Part D, 13*)
3 ☐ Alteration (*See 2 above*)
4 ☐ Repair, replacement
5 ☐ Wrecking (*If multifamily residential, enter number of units in building in Part D, 13*)
6 ☐ Moving (relocation)
7 ☐ Foundation only

D. PROPOSED USE – *For "Wrecking" most recent use*

Residential
12 ☐ One family
13 ☐ Two or more family – *Enter number of units* → ______
14 ☐ Transient hotel, motel, or dormitory – *Enter number of units* → ______
15 ☐ Garage
16 ☐ Carport
17 ☐ Other – *Specify* ______

Nonresidential
18 ☐ Amusement, recreational
19 ☐ Church, other religious
20 ☐ Industrial
21 ☐ Parking garage
22 ☐ Service station, repair garage
23 ☐ Hospital, institutional
24 ☐ Office, bank, professional
25 ☐ Public utility
26 ☐ School, library, other educational
27 ☐

B. OWNERSHIP

FIELD COPY

Elec ok

BOROUGH OF HOPATCONG
BUILDING DEPARTMENT
RIVER STYX ROAD
HOPATCONG, N. J. 07843
TEL.: (201) 398-6161
[redacted]

BUILDING PERMIT

C. of O. ISSUED 7/20/85

10/7/83
10/13/83

DATE July 27 19 81 PERMIT NO. 636

Wm. Bulger
APPLICANT ______ ADDRESS R. D. # 2 (NO.) Box 418, Andover 07821 (STREET) (CONTR'S LICENSE)

PERMIT TO Addition – 2nd Story (TYPE OF IMPROVEMENT) NO. ______ STORY ______ (PROPOSED USE) NUMBER OF DWELLING UNITS ______

AT (LOCATION) 106 (NO.) Camp Tr (STREET) ZONING DISTRICT ______

BETWEEN ______ (CROSS STREET) AND ______ (CROSS STREET)

SUBDIVISION ______ LOT 3 BLOCK 41103 LOT SIZE ______

BUILDING IS TO BE ______ FT. WIDE BY ______ FT. LONG BY ______ FT. IN HEIGHT AND SHALL CONFORM IN CONSTRUCTION

TO TYPE ______ USE GROUP ______ BASEMENT WALLS OR FOUNDATION ______ (TYPE)

REMARKS: R. Horak Contractor

AREA OR VOLUME 7363 (CUBIC/SQUARE FEET) ESTIMATED COST $ 9,000 ~~108.33~~ PERMIT FEE $ 108.33

OWNER same
ADDRESS same

BUILDING DEPT.
BY Robert L. Yates

FORM NO. BOCA-BP 1969

BOROUGH OF HOPATCONG, NEW JERSEY

Application for Zoning Permit.

Office Use Only

Date Rec'd 7/7/81 Time 10:00 By DLM

#5437 636

INSTRUCTIONS

1. Please use ball pen or type. Do not use pencil.
2. Please answer all questions. If the answer is "none", state "none".
3. Attach a plot plan or survey map, drawn to scale, showing what exists now on the property and what changes you propose to make. Include existing and proposed structures, paved areas, signs, etc and show their dimensions and distances from all property lines and roads.

Name of Applicant
William Bulger

Name of Owner (if different from applicant)

Address of Applicant
106 Camp Trail, Hop.

Address of Owner (if different)
Mail RD#2 Box 418 Andover, NJ 07821

Phone number of applicant: [redacted]

What is the present use of the principal building?
Home

What is the proposed use of the principal building?
1 fam dw

What are the present uses of any accessory buildings?
PROPERTY

What are the proposed uses of any accessory buildings?

What are the proposed uses of any new structures or additions for which a zoning permit is requested?
1 Fam dw

State whether the premises or property has been the subject of any prior application(s) to the Zoning Board of Adjustment or the Planning Board. If none, state none. If so, state the nature of the application, the date, and the action(s) of the Board(s).

None

Street Address of premises: 106 Camp Trail Block # 41103 Lot # 3. Zone

I hereby make application for a zoning permit for the changes described above and on the attached plot plan or survey map. I understand that this is not a building permit, which requires a separate application. I certify that the answers to the above questions and any statements or representations made on attachments to this application are true and complete to the best of my knowledge.

Date 7/7/81

William T Bulger
Signature of Applicant (individual)

Name of Corporation or Association

Attest _____ *Secretary*

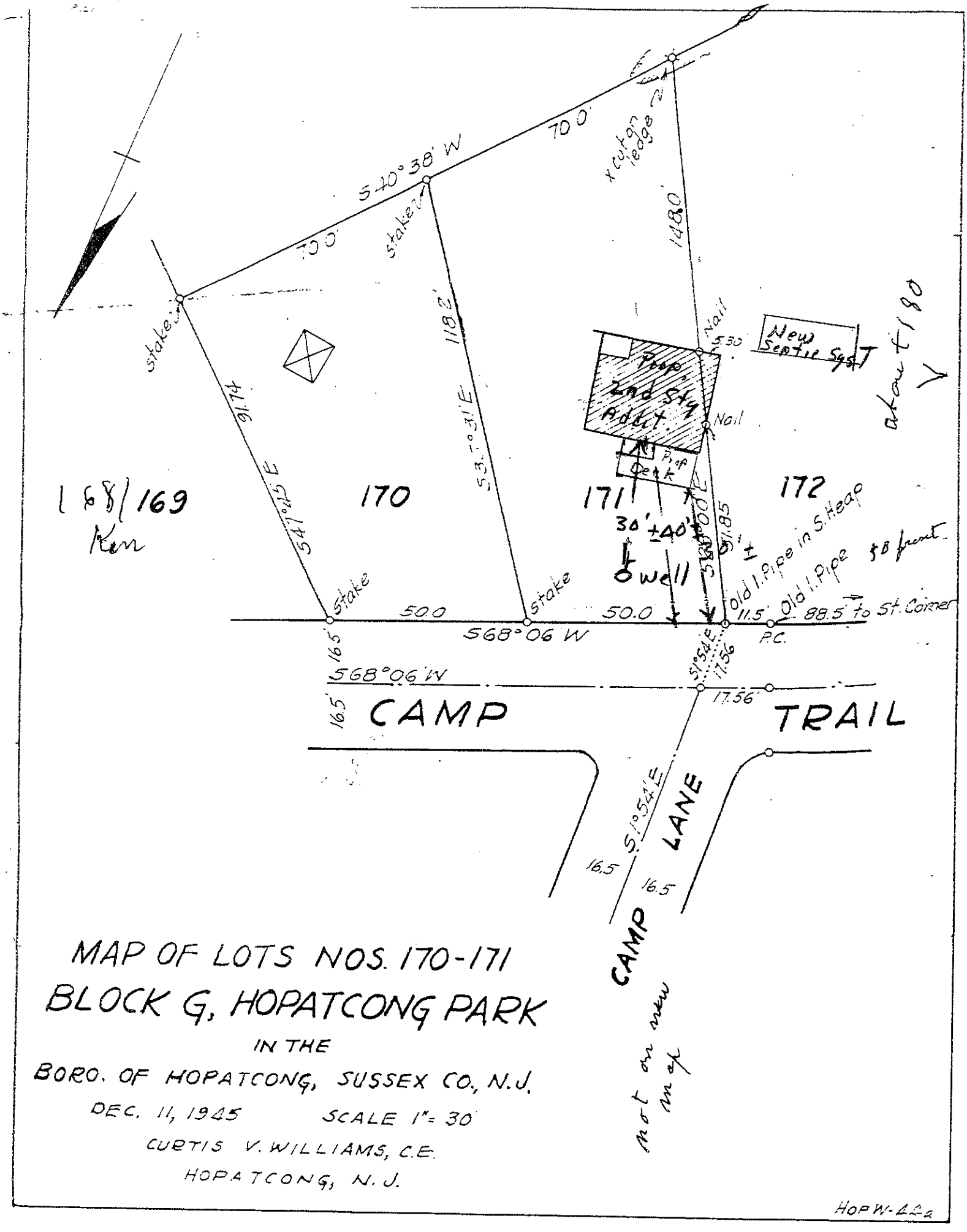
By: _____

DO NOT WRITE IN THIS SPACE

( ) The use or change is permitted by ordinance. Permit issued - No. _____ Date _____

( ) Variance application recommended.

per RM Lantz 7/24/81



MAP OF LOTS NOS. 170-171
BLOCK G, HOPATCONG PARK
IN THE
BORO. OF HOPATCONG, SUSSEX CO., N.J.

DEC. 11, 1945 SCALE 1" = 30'

CURTIS V. WILLIAMS, C.E.
HOPATCONG, N.J.

HOP W-44a

Apr 1/93

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2629
DATE ISSUED 2/16/88
Block 4103 Lot 3
Subdivision

A. IDENTIFICATION

Owner Wm. Bulger
Address Rt 2 Box 418 Andover NJ
Tel. ( ) [redacted]
Work Site Address 106 Camp Tr

Agent
Address
Tel. ( )
Lic. No.
Federal Emp. No.

PAYMENTS

Permit Fee $ 30.00
Fees Remitted $ 30.00
☐ Check No. 4904
☐ Cash
☐ Other
Collected By: CE
Date: 2/16/88

is hereby granted permission to perform the following work:

☒ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☒ OTHER Zoning

Description of work:

Alterations, Dormer
Windows label file

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: $ 1000

Robert S. Yates
CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

RECEIVED
FEB 16 1988

BUILDING SUBCODE TECHNICAL SECTION

PERMIT NO. 1631
DATE ISSUED 2/16/88
REVISION DATE
Block 4103 Lot 3
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner Wm Bulger
Address R.D.#2 Box 418 Andover, NJ 07821
Tel. (201) 39[redacted]
Work Site Address 106 Camp Tr

Contractor owner
Address
Tel. ( )
Lic. No.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Mary Bulger
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Give detail description including materials used, dimensions, etc.

Install Insulation
~~sk~~ dry wall
Windows
Level floor +
new sheating (floor)

☐ See Plans

TYPE OF WORK:
- ☐ New Building
- ☐ Addition
- ☒ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☑ Other see desc.
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

Fee Basis	Fee
[redacted]	
[redacted]	
SUBTOTAL	
Minimum Building Fee (if applicable)	
Total Building Fee (Greater of Minimum or Subtotal)	15.00

C. BUILDING CHARACTERISTICS

USE GROUP: R-3 Present R-3 Proposed

No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
Total Building Area—All Floors Sq. Ft.
Volume of Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.
Estimated Cost of Building Work: $ 1000

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

5/17/88 JA

RECEIVED
MAY 16 1988
BORO OF HOPATC

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 93605
DATE ISSUED 5/18/88
REVISION DATE
Block 4103 Lot 3
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

Owner Mary Bolger
Address 166 Camp trail
Hopatcong NJ
Tel. (201) [redacted]
Work Site Address Same

When changing contractors, notify this office

Contractor Kenneth O'Donnell
Address 247 Maxim Dr
Hopatcong NJ 07843
Tel. (201) 398-6743
Lic.No./Bus. Permit. 600
Federal Emp. No. [redacted]

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Kenneth O'Donnell
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK: R# R0436261

No.	Item	Fee	No.	Item	Fee
	Switching Outlets	$		H.V.A.C. Equipment	$
	Lighting Outlets			Switching Devices	
	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric				
	Heating, Electric				
	Switches				
	Lighting Fixtures			Other	
	Receptacles			Other	
	Bonding, Pool/Vault			Other	
100 ✓	Service/Feeders			Other	
	COLUMN 1	$		COLUMN 2	$

Fee	
COLUMN 1	$
COLUMN 2	
SUBTOTAL	$
Minimum Electrical Fee (If applicable)	$
Total Electrical Fee *(Greater of Minimum or Subtotal)*	$ 20

C. ELECTRICAL CHARACTERISTICS

USE GROUP: Altering Present _____ Proposed
Service: 100 Amps 4w Phase 1Ø System Type
1004 Wire _____ Volts Cable Wiring Method
Total No. of Meters: _____
Estimated Cost of Electrical Work: $ 130

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

White = Applicant Copy Purple = Inspector Copy

CERTIFICATE

Date Issued 2/1/93
Control #
Permit # 7628 - 2 16 88

IDENTIFICATION

Block 41103 Lot 3
Work Site Location 106 Campl Trail

Owner in Fee W. Bulger
Address RD#2 Box 418
Andover, NJ 07821
Tele. ( ) [redacted]
Contractor
Address

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

Home Warranty No.
Use Group R3
Maximum Live Load 40
Description of Work/Use:

Alteration Renovation
dry wall, windows, level floor

Type of Warranty Plan: [ ] State [ ] Private
Construction Classification 5-B
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ CERTIFICATE OF OCCUPANCY XXXXXXCERTIFICATE OF APPROVAL

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

☐ TEMPORARY CERTIFICATE OF OCCUPANCY

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

CONSTRUCTION OFFICIAL Paul R. Stewart

Fee $ 10.00
Paid [ ] Check No. 4704
Collected by: ef

U.C.C. Form F-260A

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

BOROUGH OF HOPATCONG, NEW JERSEY

Application for Zoning Permit | Office Use Only | Date Rec'd | Time | By

RECEIVED FEB 16 1988 BORO OF HOPATCONG

7628

INSTRUCTIONS

1. Please use ball pen or type. Do not use pencil.
2. Please answer all questions. If the answer is "none," state "none."
3. Attach a plot plan or survey map, drawn to scale, showing what exists now on the property and what changes you propose to make. Include existing and proposed structures, paved area, signs, etc. and show their dimensions and distances from all property lines and roads.

Name of Applicant	Name of Owner (if different from applicant)
Wm Bolger	Same
Address of Applicant	**Address of Owner (if different)**
R.D. #2 Box 418 Andover, NJ 07821	Same

Phone number of applicant: 201-[redacted]

What is present use of principal building? 1 Fam Dw

What is proposed use of princial building? 1 Fam Dw

What are the present uses of any accessory buildings? Vend

What are the proposed uses of any accessory buildings? None

What are the proposed uses of any new structures or additions for which a zoning permit is requested? Interior Repair Renovations

State whether the premises or property has been the subject of any prior application(s) to the Zoning Board of Adjustment or Planning Board. If none, state none. If so, state the nature of the application, the date, and the action(s) of the Board(s).

106 Camp Tr	41103	3	
Street Address of premises:	Block#	Lot#	Zone

I hereby make application for a zoning permit for the changes described above and on the attached plot plan or survey map. I understand that this is not a building permit, which requires a separate application. I certify that the answers to the above questions and any statements or representations made on attachments to this application are true and complete to the best of my knowledge.

Mary Bolger
Signature of Applicant (individual)

Date _____

_____
Name of Corporation or Association

Attest _____ By: _____
Secretary

DO NOT WRITE IN THIS SPACE

(✓) The use or change is permitted by ordinance. Permit issued - No. _____ Date 2/16/88
( ) Variance application recommended.

Per Paul R. Stewart
Paul R. Stewart, Zoning Officer

As existing NO Changes in Remodel
Re Paint

Issued 1/25/93

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Block 4103 Lot 3
Subdivision

A. IDENTIFICATION

Owner Wm. Bulger
Address 106 Camp Tr
Hopatcong 07843
Tel. ( ) [redacted]
Work Site Address 106 Camp Tr

Agent
Address
Tel. ( )
Lic. No.
Federal Emp. No.

PAYMENTS

$ 45.00

is hereby granted permission to perform the following work:

- [x] BUILDING
- [ ] ELECTRICAL
- [ ] PLUMBING
- [ ] FIRE PROTECTION
- [ ] OTHER

Description of work:

Wood Stove/Chim

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: $ 450.00

Robert S. Yates (Est)
CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 3577
DATE ISSUED 9/18/89
REVISION DATE
Block 4103 Lot 3
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner William Bulger
Address 106 Camp Trail
Hopatcong N.J. 07843
Tel. ( ) 3[redacted]

Work Site Address 106 Camp Tr.

Contractor
Address
Tel. ( )
Lic. No.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Mary Bulger
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

install wd burning stove
3' from combustibles
18" from protected
surfaces
metal chimney

☐ See Plans

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☒ Other chimney
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

	Fee Basis	Fee
	$10 per 1000	$ 10.00
SUBTOTAL		$ 10.00
Minimum Building Fee (if applicable)		$
Total Building Fee *(Greater of Minimum or Subtotal)*		$ 10.00

C. BUILDING CHARACTERISTICS

USE GROUP: R-3 Present R-3 Proposed

No. of Stories
Total Building Area—All Floors Sq. Ft.
Height of Structure Ft.
Volume of Structure Cu. Ft.
Area—Largest Floor Sq. Ft.
Total Land Area Disturbed Sq. Ft.
Estimated Cost of Building Work: $ 450.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

CA 2/1/93

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2207
DATE ISSUED 3/16/88
Block 4103 Lot 3
Subdivision

A. IDENTIFICATION

Owner M Bulger
Address RD 2 Box 418
Andover NJ
Tel. ( ) [redacted]
Work Site Address 106 Campton

Agent
Address
Tel. ( )
Lic. No.
Federal Emp. No.

PAYMENTS

Permit Fee $ 45 -
Fees Remitted $ 45 -
☐ Check No. 4768
☐ Cash
☐ Other
Collected By
Date: 3/16/88

is hereby granted permission to perform the following work:

☒ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☒ OTHER Fencing

Description of work:

Deck

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: $ 2369.84

Robert A. Yates
CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

RECEIVED

MAR 16 1988

'ORO OF HOPATCO

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2201
DATE ISSUED 3/16/88
REVISION DATE

Block 41103 Lot 3
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only* When changing contractors, notify this office

Owner M. Bulger
Address RD2 Box 418
Oldmans N.J.
Tel. ( ) 3[redacted]
Work Site Address 106 Dempsey Dr.

Contractor
Address
Tel. ( )
Lic. No.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Mary Bulger
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

Deck

☐ See Plans

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☒ Other deck
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

For Use	Fee
[redacted]	
[redacted]	
	SUBTOTAL
	Minimum Building Fee (if applicable)
	Total Building Fee (Greater of Minimum or Subtotal) $ 30.00

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories _____ Total Building Area–All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area–Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: $ 2369.84

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

CERTIFICATE

Date Issued 2/1/93
Control #
Permit # 7707 - 3 16 88

IDENTIFICATION

Block 41103 Lot 3
Work Site Location 106 Camp Trail

Owner in Fee W. Bulger
Address RD#2 Box 418
Andover, N.J. 07821
Tele. ( ) [redacted]
Contractor
Address

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

Home Warranty No.
Use Group R-3
Maximum Live Load 60 (Deck)
Description of Work/Use:

Deck

Type of Warranty Plan: [ ] State [ ] Private
Construction Classification 5-B
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ CERTIFICATE OF OCCUPANCY XXXXCERTIFICATE OF APPROVAL

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

☐ TEMPORARY CERTIFICATE OF OCCUPANCY

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

CONSTRUCTION OFFICIAL Paul P. Stewart

Fee $ 10.00
Paid [ ] Check No. 4768
Collected by: ef

U.C.C. Form F-260A

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

7707

BOROUGH OF HOPATCONG, NEW JERSEY

Application for Zoning Permit | Office Use Only | Date Rec'd | Time | By

RECEIVED
MAR 16 1988
BORO OF HOPATCONG

INSTRUCTIONS

1. Please use ball pen or type. Do not use pencil.
2. Please answer all questions. If the answer is "none," state "none."
3. Attach a plot plan or survey map, drawn to scale, showing what exists now on the property and what changes you propose to make. Include existing and proposed structures, paved area, signs, etc. and show their dimensions and distances from all property lines and roads.

Name of Applicant	Name of Owner (if different from applicant)
Wm. Bulger & (Mary)	
Address of Applicant	Address of Owner (if different)
106 Campt. RD 2 Box 418 Andover N.J.	

Phone number of applicant: [redacted]

What is present use of principal building?

What is proposed use of princial building?

What are the present uses of any accessory buildings?

What are the proposed uses of any accessory buildings?

What are the proposed uses of any new structures or additions for which a zoning permit is requested?

Porch & Deck

State whether the premises or property has been the subject of any prior application(s) to the Zoning Board of Adjustment or Planning Board. If none, state none. If so, state the nature of the application, the date, and the action(s) of the Board(s).

106 Camp Trail — 4403 — 3 — 1

Street Address of premises: Block# 41103 Lot# 3 Zone R-1

I hereby make application for a zoning permit for the changes described above and on the attached plot plan or survey map. I understand that this is not a building permit, which requires a separate application. I certify that the answers to the above questions and any statements or representations made on attachments to this application are true and complete to the best of my knowledge.

Date 3-16-88

M. Bulger
Signature of Applicant (individual)

Name of Corporation or Association

Attest _____ By: _____
Secretary

DO NOT WRITE IN THIS SPACE

(✓) The use or change is permitted by ordinance.
( ) Variance application recommended.

Permit issued - No. 77 Date 3/16/88

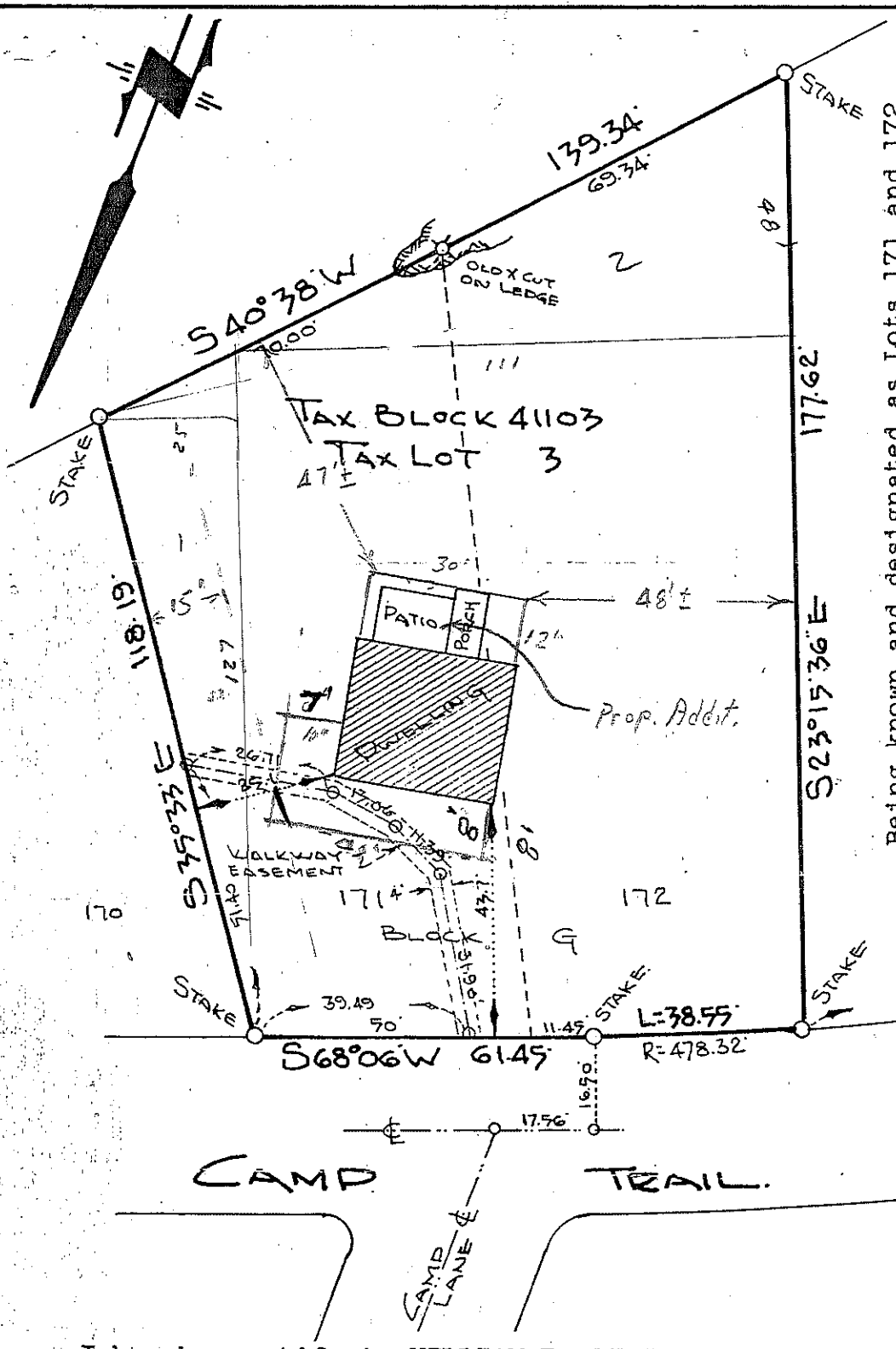
Per Paul R. Stewart

Paul R. Stewart, Zoning Officer

OK Rec; OK 77-22 E(1)

Hop. 689A

1707.



Being known and designated as Lots 171 and 172, Block G, as shown upon a certain map entitled: "Map of lots at Lake Hopatcong and Bear Pond, Property of Hopatcong Park and Bear Pond Land Company, Borough of Hopatcong and Township of Byram, Sussex County, New Jersey, dated May 1914, made by P.E. Boomer, C.E.," said map being filed in the Sussex County Clerk's Office on June 12, 1916 as Registered Map No. 60C.

RECEIVED
MAR 16 1988
ORO OF HOPATCO

I hereby certify to WILLIAM T. BULGER, MARY A. BULGER, his wife, CONTINENTAL TITLE INSURANCE COMPANY OF PENNSAUKEN, NJ., CORBIN & LANG, ESQS., and to all current parties interested in title to premises surveyed that I made a survey of the above mapped property which is, to the best of my knowledge and belief, correct.

Walter B. Sarles

Walter B. Sarles, L. S.
N.J. Lic. No. 18605
Hop 689A

MAP OF LOT 3 TAX BLOCK 41103

IN THE

BORO. OF HOPATCONG — SUSSEX CO. N.J.

JULY 8, 1975 SCALE 1"=30'

WALTER B. SARLES, L.S.

HOPATCONG, N.J.

REV-7-16-79

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

Date Issued 9/22/04
Control # C41103/3
Permit # 04-1022

UCC NEW JERSEY

CONSTRUCTION PERMIT

IDENTIFICATION Block 41103 Lot 3 Qual

Work Site Location 106 CAMP TR
SIDING
Owner in Fee BULGEN WILLIAM
Address SAME
HOPATCONG, NJ 07843-
Telephone (973[redacted]

Contractor AMERICAN HOME IMP
Address 1188 SUSSEX TPKE
MT FREEDOM, NJ
Telephone (973)895-7000
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. [redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SIDING

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 $ 9,000

William O'Connor
Construction Official

9/8/04
Date

PAYMENTS (Office Use Only)

Building	65
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	12
Cert. of Occupancy	0
Other	
Total	77
Check No.	2690
Cash	
Collected By	SAP

U.C.C. F170 (rev. 3/96) NJ UCCARS 5.24E

)ROUGH OF HOPATCONG
1 RIVER STYX RD
)PATCONG, N.J. 07843

Date Issued 12/10/2004
Control #
Permit # 04-1022

UCC NEW JERSEY

CERTIFICATE

IDENTIFICATION

ock 41103 Lot 3 Qual
rk Site Location 106 CAMP TR
SIDING
ner in Fee/Occupant BULGEN WILLIAM
dress SAME
HOPATCONG, NJ 07843-
lephone (9[redacted]
ntractor AMERICAN HOME IMP
dress 1188 SUSSEX TPKE
MT FREEDOM, NJ
lephone (973)895-7000 Fax ( )
c. No. or Bldrs. Reg. No.
deral Emp. No. [redacted]

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

SIDING

CERTIFICATE OF OCCUPANCY
is serves notice that said building or structure has been constructed in
ordance with the New Jersey Uniform Construction Code and is approved
r occupancy.

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

TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
this is a Temporary Certificate of Occupancy or Compliance, the following
nditions must be met no later than _____, ___ or the owner will be
bject 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 _____, ___.

Fee $ 0
Paid [X] Check No. 2690
Collected by: SJH

William O'Connor
)NSTRUCTION OFFICIAL

C.C. F260 (rev. 3/96) NJ UCCARS 5.24E

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 9/22/04
Control #
Date Issued
Permit # 04-1022

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 HOPATCONG, N.J. 07821
Owner in Fee WILLIAM + MARY BULGER
Address 106 CAMP TRAIL HOPATCONG, N.J. 07821
Tel. (973) [redacted]
Contractor American Home Improvement
Address 1188 Sussex Tpke Mt Freedom NJ 07970
Tel. (973) 895-2500 FAX (973) 895-3333
Contractor License No. or Builder Registration No.
Federal Emp. No [redacted]

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

INSTALL ROYAL WOODLAND VINYL SIDING.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Required	9/28/04	CWOC
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 11/24/04
Approved by: CWOC

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other Siding OK 11/16/04 CWOC			11/24/04 CWOC	
Final				
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[X] 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)
$ _____

Administrative Surcharge $ _____
Minimum Fee $ _____
State Permit Surcharge Fee $ _____
TOTAL FEE $ 65.-

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area — Largest Floor _____ 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. Rehabilitation $ _____
3. Total (1+ 2) $ 9000.00