

Shamong Township

105 Willow Grove Road
Shamong, NJ 08088
(609) 268-2377 FAX (609) 268-2701

Permit No. 20190246
Control No. 92008896
Block/Lot 12.07/8
Date 10/31/19

Certificate of Approval

IDENTIFICATION

Block/Lot 12.07/8

Work Site Location 120 NANTICOKE CT

Owner in Fee/Occupant US BANK TRUST NA C/O RESICAP

Address 3630 PEACHTREE RD NE 1500
ATLANTA GA 30326

Telephone

Contractor FLASH ELECTRIC NJ CORP

Address 396 CATALBA AVE
MICKLETON NJ 08056

Telephone (856) 369-0202 FAX

Lic. No. or Bldrs. Reg. No. None

Federal Emp. No.

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 the owner will be subject to fine or order to vacate.

Ced Toussaint, Construction Official

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

Home Warranty No.

Type of Warranty Plan: ☐ State ☐ Private

Use Group

Maximum Live Load

Construction Classification

Maximum Occupancy Load

Description of Work/Use:

150AMP SERVICE

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 _____

Permit Fee \$ 93

Paid ☐ Check No. VV4669

Collected by: PC

Shamong Township

105 Willow Grove Road
Shamong, NJ 08088
(609)268-2377 FAX (609)268-2701

Permit No. 20190246
Control No. 92008896

Parcel(Block/Lot) 12.07/8

Date

10/17/2019

Construction Permit

Work Site Location

120 NANTICOKE CT

Owner in Fee

US BANK TRUST NA C/O RESICAP

Address

3630 PEACHTREE RD NE 1500

Phone

ATLANTA GA 30326

(732)580-7792

Fed Emp No.

Lic No.

Phone

(856)369-0202

Address

396 CATALBA AVE

MICKLETON NJ 08056

Contractor... FLASH ELECTRIC NJ CORP

Permission is hereby granted to do the following work:

- ☐ BUILDING
- ☒ ELECTRIC
- ☐ ELEVATOR
- ☐ PLUMBING
- ☐ FIRE
- ☐ MECHANICAL
- ☐ DEMOLITION
- ☐ ASBESTOS ABATEMENT
- ☐ LEAD HAZARD ABATEMENT
- ☐ ONGOING -
- ☐ OTHER

Description of Work:

150AMP SERVICE

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

Estimated Cost of Work: \$1,500

Construction 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

CT/TC

Total Administrative Fee: \$0

Building	\$0
Electrical	90
Plumbing	0
Fire Protection	0
Elevator Devices	0
Mechanical	0
State Training Fee	3
Certificate of Occupancy	0
Other	0
Total	\$93
Check#/Cash	VV4669
Paid	\$93
Collected By	PC



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 12.07 Lot 8 Qualification Code SAWMAN'S US 08088

Work Site Location 120 N Atlantic Ct

Owner in Fee: US BANK TRUST NA C/O RESICAP

Tel. 732 580-5772 e-mail _____

Address 3630 PEACHTREE RD NE 1500 ATLANTA GA 30326

Contractor: Flash Electric NJ Corp Tel. (856) 369-0202 zip code 30326

Address 396 Catalpa Avenue e-mail Permits@FlashElectricCorp.com

Mickleton, NJ 08056

Contractor License No. 16464 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 823789958 FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 1500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[] Partial-Underslab Utilities Approved

Date: 12/17 Approved by: [Signature]

[] Electric Plans Approved

Date: _____ Approved by: _____

Joint Plan Review Required:

[] Bldg. [] Plumb. [] Fire. [] Elev.

SUBCODE APPROVAL FOR PERMIT

INSPECTIONS	Dates (Month/Day)	Initial
Type:	Failure	Approval
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 _____

Approved by: _____

U.C.C. F120 (rev. 11/09)

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 sign/Contractor sign and seal here:

Print name here: Todd J Fisher

[X] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: PANEL REPLACEMENT

QTY. SIZE ITEMS

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

1

150

1

1

1

1

1

Date Received _____

Control # _____

Date Issued _____

Permit # _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

FEE (Office Use Only)

\$ _____

NEW JERSEY DIVISION OF CONSUMER AFFAIRS



License Information

Accurate as of September 25, 2019 11:47 AM

[Return to Search Results](#)

Name: FLASH ELECTRIC NJ CORP

Address: Mickleton, NJ

Profession/License Type: Electrical Contractors, Electrical Business Permit

License No: 34EB01646400

License Status: Active

Status Change Reason: Reinstatement

Issue Date: 3/4/2009

Expiration Date: 3/31/2021

NO Board Actions. For more information contact New Jersey State Board of Examiners of Electrical Contractors (973)504-6410

Division	OAG Home	Division Home	Consumer Protection	Licensing Boards	File a Complaint	Adoptions & Rule	Proposals	Internship	Opportunities
Department	OAG Home	Contact OAG	FAQ OAG	OAG News	Services A to Z	Employment			
State	NJ Home	Services A-Z	Departments/Agencies	FAQs					
Legal	Legal Statement	Privacy Notice	Accessibility	Statement					

 **RSS**
Sign up for New Jersey Division of Consumer Affairs RSS feed:
latest information. You can select any category that you are in
and any time the website is updated you will receive a notifica
More information about RSS feeds.

Copyright © 2017 State of New Jersey.



Shamong Township ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block/Lot 12.07/8

Work Site Location 120 NANTICOKE CT

Owner in Fee: US BANK TRUST NA C/O RESICAP

Tel. (732)580-7792 e-mail permits@flashelectriccorp.com

Address: 3630 PEACHTREE RD NE 1500 ATLANTA GA 30326

Contractor: FLASH ELECTRIC NJ CORP Tel. (856)369-0202

Address: 396 CATALBA AVE, MICKLETON NJ 08056 e-mail permits@flashelectriccorp.com

Contractor License No. _____ Exp. Date _____

Federal Emp. ID No. _____ FAX. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present ☐ Temporary Service ☐ Other R-5

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 1500 Descript: 150AMP SERVICE

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required			Type: _____	
Joint Plan Review Required:			Rough	Failure
☐ Building ☐ Plumbing			Barrier-Free	Approval
☐ Fire ☐ Elevator			Trench	Initial
☐ Elec. Plans Approved			Temp. Serv.	
Date: _____			Constr. Serv.	
Approved by: _____			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	

C. CERTIFICATION IN UEU 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.

Date Received 9/25/2019
Control # 92008896

Date Issued 10/17/2019
Permit # 20190246

Applicant's Signature/Contractor's Seal and Signature

☒ Licensed Elec Contractor ☐ Cert Landscape Contr ☐ Exempt Applic

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Pole

Motors—Fract. H

Emergency & Exit Lights

Communications Paints

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 11+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$

Administrative Surcharge \$ 0

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$ 90

CUT-IN-CARD



MUNICIPALITY SHAMONG

LOCATION 120 NANTICOK CT UTILITY CO AC Electric

BLK/LOT 12.07/8

OWNER US BANK TRUST NA C/O RESIC 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 60 days

DESCRIPTION OF SERVICE 150amp Service

INSTALLED BY Flash Electric LICENSE NO.

DATE 10/31/19 PERMIT NO. 20190246 INSPECTOR JH

CALLER IN 11/6/19 Lic No. 7215

UCC Form F350B

BLOCK 12.07 LOT 8 QUALIFICATION CODE ADDRESS (SITE)

PERMIT NO. 201902410



CONSTRUCTION PERMIT APPLICATION

920088910

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

I. IDENTIFICATION

1. Proposed Work Site at: 120 DARTMOUTH CT S4THROCK NJ 08088
2. Name of Owner in Fee: SESSIS US BANK TRUST NA c/o RESIDCO
Tel: 732 580-7792 e-mail: atlanta@atlantagroup.com
Address: 3630 PEACHTREE RD NE 3030 ATLANTA GA 30326
3. Ownership in Fee: Public Private Municipality X zip code
4. Principal Contractor: Flash Electric NJ Corp Tel: (856) 369-0202
Address: 510 Heron Dr, Suite 100 e-mail: Permits@FlashElectricCorp.com
Swedesboro, NJ 08085
License No. OR, if new home, Builder Reg. No. 16464 Exp. Date 03/31/2021
Home Improvement Contractor Registration No. or Exemption Reason
Federal Emp. ID No. 823789958 FAX:
5. Architect or Engineer Address Contact e-mail
Tel. FAX:
6. Responsible Person in Charge once Work has Begun SESSIS
Tel. 732-580-7792 FAX:

IIa. PROPOSED WORK

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

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Approval	Rejection	Re-viewer
<u>\$1500</u>				<u>9/24/10</u>				
☐ Building								
☒ Electrical								
☐ Plumbing								
☐ Fire Protection								
☐ Elevator								

TOTAL COST \$1500 \$0

III. PLAN REVIEW (optional)

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

- DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing
1. ☐ Elevators/Escalators/Lifts/
2. ☐ Dumbwaiters/Moving Walks
3. ☐ High Pressure Boilers
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Fire Alarm
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LP Gas Tanks

V. FEE SUMMARY (for office use only)

	Update	Update
1. Building		
2. Electrical	<u>90</u>	
3. Plumbing		
4. Fire Protection		
5. Elevator Devices		
6. Subtotal		
7. Less 20% for State Plan Review		
8. Subtotal		
9. State Permit Surcharge Fee	<u>3</u>	
10. Subtotal		
11. Cert. of Occupancy		
12. Other		
13. TOTAL	<u>93</u>	

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories _____ (office use only)
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 _____

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____

2. Use Group, Proposed: _____ Select Group _____

3. Change in Use Group, Indicate Present: Select Group _____

4. No. of dwelling units: Total Units Income-restricted

Gained, Sale _____

Lost, Sale _____

Lost, Rental _____

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: _____

2. Use Group, Proposed: _____ Select Group _____

3. Change in Use Group, Indicate Present: Select Group _____

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

D. Construct. Classification: Present _____ Proposed _____