Closed

Township of Union
Code Enforcement Agency
1976 Morris Avenue
Union, NJ 07083
(908) 851-8509

Date Issued 1-15-99
Control #
Permit # 97-351

CERTIFICATE

IDENTIFICATION

Block 2208 Lot 20
Work Site Location 1836 LONG TERR.

Owner in Fee/Occupant KEVIN T. CARRICANE
Address 1836 LONG TERR.
UNION, NJ 07083
Tele. [redacted]
Contractor OWNER
Address

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

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R3
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work/Use:

CERTIFICATE OF APPROVAL

REMOVE CONTENTS OF BATHROOM - INSTALL NEW PLUMBING FIXTURES, NEW LIGHTING & INSULATION, SHEETROCK, TILES, ETC.

☐ **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 _____, 19_____ 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 _____.

Fee $ -0-
Paid [ ] Check No.
Collected by: KEN

Robert Mattola
CONSTRUCTION OFFICIAL

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

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

T.C.

Closed

ELECTRICAL SUBCODE
TECHNICAL SECTION
NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 3-6-97
Date Issued
Control #
Permit # 97-235

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

Block 2208 Lot 20
Work Site Location 1836 Long Terr.
[illegible]
Owner in Fee Kevin T. Garrigan
Address [illegible]
[illegible] 07083
Tele. [redacted]
Contractor [illegible]
Address [illegible]
[illegible]
Tele. ([illegible]) [illegible]
Lic. No. [illegible]
Federal Emp. No. [illegible] or Social Security No. [redacted]

B. ELECTRICAL CHARACTERISTICS
Final 3/26/97

Use Group Present [illegible] Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 800.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Temporary				
Constr. Serv.				
TCO				
Other				
Service			3/26/97	RI
Final				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued 3/26/97

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 3/26/97
Approved By: [signature]

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]
Signature—Contractor Seal

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
		Fixtures (1)	
		Receptacles (2)	
		Switches (3)	
		Total 1 + 2 + 3	
	Kw	Range	
	Kw	Oven(s)	
	Kw	Surface Unit	
	hp	Dishwasher	
	hp	Garbage Disposal	
	Kw	Dryer	
	Kw	A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
		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	$ 7-
Paid [ ] Check # [illegible]	Minimum Fee	$
	DCA Training Fee	$ 1
Collected by: [illegible]	TOTAL FEE	$ 54

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

6546

BUILDING SUBCODE
TECHNICAL SECTION

Closed

Date Received 7/29/2022
Control # 00009929

Date Issued 8/30/2022
Permit # 22-1647

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

Block 2208 Lot 20 Qualification Code

Work Site Location 1836 LONG TERR
UNION TWP, NJ 07083

Owner in Fee: RIVERA, CARLOS AND EVELYN

Tel [redacted] e-mail

Address 1836 LONG TERR, UNION, NJ 07083
street municipality zip code

Contractor: SOLAR MITE SOLUTIONS LLC Tel. (732) 796-1996

Address 1525 CORLIES AVENUE e-mail shannon@solarmitesolutions.com
NEPTUNE, NJ 07753

Contractor License No. or Builder Registration No. 34EB01829900 Exp. Date 3/31/2021

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

Federal Emp. ID No. 27-0524433 FAX: (732) 757-0831

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 08/11/2022
Approved by: JD

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

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

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
No. of Stories 0
Height of Structure 0 ft.
Area — Largest Floor 0 sq. ft.
New Bldg. Area/All Floors 0 sq. ft.
Volume of New Structure 0 cu. ft.
Max. Live Load 0
Max. Occupancy Load 0

Constr. Class Present Proposed

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:

1. New Bldg. $ 0.00
2. Rehabilitation $ 3,000.00
3. Total (1+ 2) $ 3,000.00

U.C.C. F110
(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.

Sign here:

Print name here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
SOLAR PANELS

TYPE OF WORK:	FEE (Office Use Only)
[ ] New Building	$ 0.00
[ ] Addition	0.00
[X] Rehabilitation	90.00
[ ] Roofing	0.00
[ ] Siding	0.00
[ ] Fence ____ Height (exceeds 6')	0.00
[ ] Sign 0 Sq. Ft.	0.00
[ ] Pool	0.00
[ ] Retaining Wall 0 Sq. Ft.	0.00
[ ] Asbestos Abatement Subchapter 8	0.00
[ ] Lead Haz. Abatement NJAC 5:17	0.00
[ ] Radon Remediation	0.00
[ ] Other ____	0.00
[ ] Demolition ____	0.00

Administrative Surcharge	$ 0.00
Minimum Fee	$ 90.00
State Permit Surcharge Fee	$ 6.00
TOTAL FEE	$ 96.00

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Closed

Date Received 7/29/2022
Control # 00009929
Date Issued 8/30/2022
Permit # 22-1647

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

Block 2208 Lot 20 Qualification Code

Work Site Location 1836 LONG TERR
UNION, NJ 07083

Owner In Fee: RIVERA, CARLOS AND EVELYN

Tel. [redacted] e-mail

Address 1836 LONG TERR, UNION, NJ 07083
street municipality zip code

Contractor: SOLAR MITE SOLUTIONS LLC Tel. (732) 796-1996

Address 1525 CORLIES AVENUE e-mail shannon@solarmitesolutions.com
NEPTUNE, NJ 07753

Contractor License No. 34EB01829900 Exp. Date 3/31/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 27-0524433 FAX: (732) 757-0831

B. ELECTRICAL CHARACTERISTICS

Use Group Present R-5 Proposed R-5

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 4,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Understab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 08/02/2022
Approved by: DG

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

INSPECTIONS

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

Dates (Month/Day)

Temp. Cut-In-Card Date Issued

Final Cut-In-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

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:

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: SOLAR PANELS

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
17		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
17		TOTAL NUMBERS	$ 60.00
		Pool Permit/with UW Lights	0.00
		Storable Pool/Spa/Hot Tub	0.00
	0	KW Elec. Range/Receptacle	0.00
	0	KW Oven/Surface Unit	0.00
	0	KW Elec. Water Heater	0.00
	0	KW Elec. Dryer/Receptacle	0.00
	0	KW Dishwasher	0.00
	0	HP Garbage Disposal	0.00
	0	KW Central A/C Unit	0.00
	0	HP/KW Space Heater/Air Handler	0.00
	0	KW Baseboard Heat	0.00
	0	HP Motors 1/+ HP	0.00
	0	KW Transformer/Generator	0.00
1	30	AMP Service	65.00
1	125	AMP Subpanels	65.00
	0	AMP Motor Control Center	0.00
	0	KW Elec. Sign/Outline Light	0.00
1	6.8	SEE BELOW	80.00

KW Solar/Photovoltaic

Administrative Surcharge	$	0.00
Minimum Fee	$	205.00
State Permit Surcharge Fee	$	8.00
TOTAL FEE	$	213.00

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

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

Closed

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 7/29/2022
Control # 00009929

Date Issued 8/30/2022
Permit # 22-1647

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

Block 2208 Lot 20 Qualification Code

Work Site Location 1836 LONG TERR
UNION, NJ 07083

Owner in Fee: RIVERA, CARLOS AND EVELYN

Tel. [redacted] e-mail

Address 1836 LONG TERR, UNION, NJ 07083
street municipality zip code

Contractor: SOLAR MITE SOLUTIONS LLC Tel. (732) 796-1996

Address 1525 CORLIES AVENUE e-mail shannon@solarmitesolutions.com
NEPTUNE, NJ 07753

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. 34EB01829900 Exp. Date 3/31/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 27-0524433 FAX: (732) 757-0831

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present R-5 Proposed R-5

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 100.00

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

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

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

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date: 08/03/2022
Approved by: JP

SUBCODE APPROVAL for CERTIFICATE
[ ] 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				

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/Contractor sign here:

Print name here:

D. TECHNICAL SITE DATA [ ] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK: SOLAR PANELS

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks	0	$ $0.00
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	0	$0.00
Supervisory Devices (i.e., tampers, low/high air)	0	$0.00
Signaling Devices (i.e., horn/strobes, bells)	0	$0.00
Other Devices	0	$0.00
TOTAL	0	$0.00
Suppression Systems		
Fire Pump GPM Type	0	$0.00
Dry Pipe/Alarm Valves	0	$0.00
Pre-action Valves	0	$0.00
Sprinkler Heads (Dry and Wet)	0	$0.00
Standpipes	0	$0.00
Pre-engineered Systems		
Wet Chemical	0	$0.00
Dry Chemical	0	$0.00
CO_2 Suppression	0	$0.00
Foam Suppression	0	$0.00
FM200 Suppression	0	$0.00
Other	0	$0.00
Other Systems		
Kitchen Hood Exhaust System	0	$0.00
Smoke Control System	0	$0.00
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid	0	$0.00
Fireplace Venting/Metal Chimney	0	$0.00
Other SOLAR	0	$60.00
Administrative Surcharge $		0.00
Minimum Fee $		60.00
State Permit Surcharge Fee $		1.00
TOTAL FEE $		61.00

U.C.C. F140 (rev. 02/11) Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Closed

Date Received 3/13/2020
Control # 00002916
Date Issued 7/1/2020
Permit # 20-849

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

Block 2208 Lot 20 Qualification Code

Work Site Location 1836 LONG TER
UNION, NJ 07083

Owner in Fee: RIVERA, CARLOS AND EVELYN

Tel. e-mail

Address 1836 LONG TERR, UNION, NJ 07083
street municipality zip code

Contractor: ARTIC AIR CONDITIONING Tel. (732) 251-1111

Address 1 PLEASANT VALLEY ROAD e-mail jessica@arcticac.com
OLD BRIDGE, NJ 08857

Contractor License No. 13VH01741400 Exp. Date 3/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX: 7322511147

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R-5

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] 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: 03/17/2020
Approved by: DG

SUBCODE APPROVAL for CERTIFICATE
[ ] 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			08/18	DG
Barrier-Free				

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

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:

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: REPLACE AC/FURNACE/HUMIDIFIER

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
1		TOTAL NUMBERS	$ 60.00
		Pool Permit/with UW Lights	0.00
		Storable Pool/Spa/Hot Tub	0.00
	0	KW Elec. Range/Receptacle	0.00
	0	KW Oven/Surface Unit	0.00
	0	KW Elec. Water Heater	0.00
	0	KW Elec. Dryer/Receptacle	0.00
	0	KW Dishwasher	0.00
	0	HP Garbage Disposal	0.00
	0	KW Central A/C Unit	0.00
	0	HP/KW Space Heater/Air Handler	0.00
	0	KW Baseboard Heat	0.00
	0	HP Motors 1/+ HP	0.00
	0	KW Transformer/Generator	0.00
	0	AMP Service	0.00
	0	AMP Subpanels	0.00
	0	AMP Motor Control Center	0.00
	0	KW Elec. Sign/Outline Light	0.00
	0		0.00

Administrative Surcharge	$ 0.00
Minimum Fee	$ 100.00
State Permit Surcharge Fee	$ 2.00
TOTAL FEE	$ 102.00

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

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

Closed

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 3/13/2020
Control # 00002916

Date Issued 7/1/2020
Permit # 20-849

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

Block 2208 Lot 20 Qualification Code

Work Site Location 1836 LONG TER
UNION TWP, NJ 07083

Owner in Fee: RIVERA, CARLOS AND EVELYN

Tel. e-mail

Address 1836 LONG TERR, UNION, NJ 07083
street municipality zip code

Contractor: ARTIC AIR CONDITIONING Tel. (732) 251-1111

Address 1 PLEASANT VALLEY ROAD e-mail jessica@arcticac.com
OLD BRIDGE, NJ 08857

Contractor License No. 13VH01741400 Exp. Date 3/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX: (732) 251-1147

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 6,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
( ] 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: 03/18/2020
Approved by: VF

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 sign/Contractor sign and seal here:

Print name here:

[ ] Licensed Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
REPLACE AC/FURNACE/HUMIDIFIER

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	$ 0.00
0	Urinal/Bidet	0.00
0	Bath Tub	0.00
0	Lavatory	0.00
0	Shower	0.00
0	Floor Drain	0.00
0	Sink	0.00
0	Dishwasher	0.00
0	Drinking Fountain	0.00
0	Washing Machine	0.00
0	Hose Bibb	0.00
0	Water Heater	0.00
0	Fuel Oil Piping	0.00
0	Gas Piping	0.00
0	LPGas Tank	0.00
0	Steam Boiler	0.00
0	Hot Water Boiler	0.00
0	Sewer Pump	0.00
0	Interceptor/Separator	0.00
0	Backflow Preventer	0.00
0	Greasetrap	0.00
0	Sewer Connection	0.00
0	Water Service Connection	0.00
0	Stacks	0.00
0	Other	0.00

Administrative Surcharge	$	0.00
Minimum Fee	$	150.00
State Permit Surcharge Fee	$	12.00
TOTAL FEE	$	162.00

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Closed

Date Received 5/14/2015
Control # 548934
Date Issued 11/3/2000
Permit # 00-1872

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

Block 2208 Lot 20 Qualification Code _____

Work Site Location 1836 LONG TERR
UNION, NJ 07083

Owner In Fee: GARRIGAN, KEVIN T AND LOIS

Tel. _____ _____ e-mail _____

Address 1836 LONG TERRACE, UNION, NJ 07083
street municipality zip code

Contractor: GARRIGAN, KEVIN T AND LOIS Tel. _____ _____

Address 1836 LONG TERRACE e-mail _____
UNION, NJ 07083,

Contractor License No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____ _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present R-3 Proposed R-3

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ 0.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] 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: _____
Approved by: _____

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

INSPECTIONS Type:	Dates (Month/Day) 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 _____

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: _____

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: ELECT - 3 RECEPTACLES AND 1. SWITCH

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	$ 0.00
		Pool Permit/with UW Lights	0.00
		Storable Pool/Spa/Hot Tub	0.00
	0	KW Elec. Range/Receptacle	0.00
	0	KW Oven/Surface Unit	0.00
	0	KW Elec. Water Heater	0.00
	0	KW Elec. Dryer/Receptacle	0.00
	0	KW Dishwasher	0.00
	0	HP Garbage Disposal	0.00
	0	KW Central A/C Unit	0.00
	0	HP/KW Space Heater/Air Handler	0.00
	0	KW Baseboard Heat	0.00
	0	HP Motors 1/+ HP	0.00
	0	KW Transformer/Generator	0.00
	0	AMP Service	0.00
	0	AMP Subpanels	0.00
	0	AMP Motor Control Center	0.00
	0	KW Elec. Sign/Outline Light	0.00
	0	_____	0.00

Administrative Surcharge	$ 0.00
Minimum Fee	$ 0.00
State Permit Surcharge Fee	$ 0.00
TOTAL FEE	$ 0.00

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

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

BUILDING SUBCODE
TECHNICAL SECTION

Closed

Date Received 4/28/2016
Control # 662468

Date Issued 4/28/2016
Permit # 16-00888

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

Block 2208 Lot 20 Qualification Code

Work Site Location 1836 LONG TERR
UNION TWP, NJ 07083

Owner in Fee: GARRIGAN, KEVIN T AND LOIS

Tel. ( ) e-mail

Address 1836 LONG TERRACE, UNION, NJ 07083
street municipality zip code

Contractor: PENYAK ROOFING CO INC Tel. (908) 753-4222

Address 3571 KENNEDY ROAD e-mail
SOUTH PLAINFIELD, NJ 07080

Contractor License No. or Builder Registration No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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

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

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed
No. of Stories 0
Height of Structure 0 ft.
Area — Largest Floor 0 sq. ft.
New Bldg. Area/All Floors 0 sq. ft.
Volume of New Structure 0 cu. ft.
Max. Live Load 0
Max. Occupancy Load 0

Constr. Class Present Proposed

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:

1. New Bldg. $ 0.00
2. Rehabilitation $ 4,200.00
3. Total (1+ 2) $ 4,200.00

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.

Sign here:

Print name here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
ROOF

TYPE OF WORK:	FEE (Office Use Only)
[ ] New Building	$ 0.00
[ ] Addition	0.00
[ ] Rehabilitation	0.00
[X] Roofing	50.00
[ ] Siding	0.00
[ ] Fence Height (exceeds 6')	0.00
[ ] Sign 0 Sq. Ft.	0.00
[ ] Pool	0.00
[ ] Retaining Wall 0 Sq. Ft.	0.00
[ ] Asbestos Abatement Subchapter 8	0.00
[ ] Lead Haz. Abatement NJAC 5:17	0.00
[ ] Radon Remediation	0.00
[ ] Other	0.00
[ ] Demolition	0.00

Administrative Surcharge $	0.00
Minimum Fee $	50.00
State Permit Surcharge Fee $	8.00
TOTAL FEE $	58.00

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

U.C.C. F110
(rev. 11/09)

BUILDING SUBCODE
TECHNICAL SECTION

Closed

Date Received 4/28/2016
Control # 662468

Date Issued 4/28/2016
Permit # 16-00888

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

Block 2208 Lot 20 Qualification Code

Work Site Location 1836 LONG TERR
UNION TWP, NJ 07083

Owner in Fee: GARRIGAN, KEVIN T AND LOIS

Tel. ( ) e-mail

Address 1836 LONG TERRACE, UNION, NJ 07083
street municipality zip code

Contractor: PENYAK ROOFING CO INC Tel. (908) 753-4222

Address 3571 KENNEDY ROAD e-mail
SOUTH PLAINFIELD, NJ 07080

Contractor License No. or Builder Registration No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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

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

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed
No. of Stories 0
Height of Structure 0 ft.
Area — Largest Floor 0 sq. ft.
New Bldg. Area/All Floors 0 sq. ft.
Volume of New Structure 0 cu. ft.
Max. Live Load 0
Max. Occupancy Load 0

Constr. Class Present Proposed

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $ 0.00
2. Rehabilitation $ 4,200.00
3. Total (1+ 2) $ 4,200.00

U.C.C. F110
(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.

Sign here:

Print name here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
ROOF

TYPE OF WORK:

	FEE (Office Use Only)
[ ] New Building	$ 0.00
[ ] Addition	0.00
[ ] Rehabilitation	0.00
[X] Roofing	50.00
[ ] Siding	0.00
[ ] Fence ____ Height (exceeds 6')	0.00
[ ] Sign 0 Sq. Ft.	0.00
[ ] Pool	0.00
[ ] Retaining Wall 0 Sq. Ft.	0.00
[ ] Asbestos Abatement Subchapter 8	0.00
[ ] Lead Haz. Abatement NJAC 5:17	0.00
[ ] Radon Remediation	0.00
[ ] Other	0.00
[ ] Demolition	0.00

Administrative Surcharge	$ 0.00
Minimum Fee	$ 50.00
State Permit Surcharge Fee	$ 8.00
TOTAL FEE	$ 58.00

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