Received

APR 16 2020

Township Clerk's

Due 4/27

COMPLETED

SCANNED

E MAILED
4.17.2020 SD

-----Original Message-----
From: jessica martin <opra+request-10843-820ed869@requests.opramachine.com>
Sent: Thursday, April 16, 2020 12:47 PM
To: Amy Cosnoski <ACosnoski@pemberton-twp.com>
Subject: OPRA request - 210 Montana, Block 724, Lot 6

Dear Pemberton 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:

Copies of construction and zoning permits from 2/28/2019 to present. Please specify if any are open

Yours faithfully,

jessica martin

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-10843-820ed869@requests.opramachine.com

Is acosnoski@pemberton-twp.com the wrong address for OPRA requests to Pemberton Township? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=pemberton_township

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/210_montana_block_724_lot_6

4.16.2020 Sent to D. Benedetti for review. SD
4.17.2020 Emailed email info to requestor. Complete. SD

BLOCK 724 LOT 6 QUALIFICATION CODE 917520 ADDRESS (SITE) 210 Montana Trl PERMIT NO. 19-0267

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: 210 Montana Trail Browns Mills
2. Name of Owner in Fee: (Jesse) US Bank Trust
   Tel. 732-580-7792 e-mail
   Address
   street municipality zip code
3. Ownership in Fee: Public Private ✓
4. Principal Contractor: Flash Electric NJ Corp Tel. (856) 369-0202
   Address 396 Catalba Ave e-mail
   Mickleton, NJ 08056
   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 Contact
   Address e-mail
   Tel. FAX:
6. Responsible Person in Charge once Work has Begun Jesse
   Tel. 732-580-7792 FAX:

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 42.		
2. Electrical			
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	31.		
13. TOTAL	$ 74.		

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	100				4/8/19 RAff				
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									

TOTAL COST 100 $0

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

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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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.

(X) Check if contractor.

Agent Name Flash Electric NJ Corp

Address 396 Catalba Ave, Mickleton NJ 08085

Telephone (856) 369-0202

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

TOWNSHIP OF PEMBERTON
500 PEMB-BROWNS MILLS RD
PEMBERTON, NJ 08068
609-8943330

CERTIFICATE
IDENTIFICATION

Date Issued: 04/12/2019
Control #: 917520
Permit #: 20190267

Block: 724 Lot :6

Work Site Location: 210 MONTANA TR
PEMBERTON

Owner in Fee: US BANK TRUST
Address: 13801 WIRELESS WAY
OKLAHOMA CITY OK 73134
Telephone: 732 580-7792

Agent/Contractor: FLASH ELECTRIC NJ CORP
Address: 396 CATALBA AVENUE
MICKLETON NJ 08056
Telephone: 856 369-0202

Lic. No./ Bldrs. Reg.No.: 16464 Federal Emp. No.: 82-3789958

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: SERVICE RESTART

Update Desc. of Wk/Use:

[ ] **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

Daniel A. Wassenar Construction Official

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

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

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

Job Location 210 MONTANA

NOTE: ITEMS CHECKED ARE REQUIRED INSPECTIONS FOR THIS PROJECT.

- ☐ 1. Bottom of footing before concrete is poured.
- ☐ 1a. Pool Collar (concrete) after poured, prior to backfilling.
- ☐ 2. Forms for concrete wall with rebar (if required by plans) set in place.
- ☐ 3. Foundation walls prior to backfilling on either side. Perimeter drain in place.
- ☐ 4. Slab (Building) - Basemen, Crawl Space, Porches, Garage, Grade Beams prior to placement of concrete. Must have all required reinforcements/insulation and vapor barrier in place.
- ☐ 4a. Under Slab Electric - all wires and conduits to be exposed.
- ☐ 4b. Under Slab Plumbing - all piping & HVAC to be exposed (with test in place).
- ☐ 5. Underground Rough Electric
- ☐ 6. Underground Exterior Plumbing (Water, Sewer & Gas [with test in place]).
- ☐ 7. Sill Plate (anchor inspection) can be with open deck. Survey & top of foundation for new homes.
- ☐ 8. Open deck (before sub-floor or deck boards are installed).
- ☐ 9. Sheathing (walls & roof).
- ☐ 9a. Roof truss inspection (with all required bracing installed).
- ☐ 10. Rough Electric.
- ☐ 10a. Service.
- ☐ 11. Rough Plumbing/HVAC/Gas Piping & Test.
- ☐ 12. Framing *All plans must be on site at the time of this inspection, along with approved rough electric and plumbing stickers.
- ☐ 12a. Framing with filled out & signed Framing Checklist as well as all items listed in #12 above.
- ☐ 13. Above Ceiling (Building).
- ☐ 13a. Above Ceiling (Electrical).
- ☐ 13b. Above Ceiling (Plumbing).
- ☐ 13c. Above Ceiling (Fire) Commercial Only.
- ☐ 14. Insulation (with approved Res Check or Com Check, on site).
- ☐ 15. Final Fire.
- ☒ 16. Final Electric.
- ☐ 17. Final Plumbing.
- ☐ 18. Final Building.
- ☐ 19. Air balance report for commercial properties required.
- ☐ 20. Air Barrier or Door Blow Test.
- ☐ 21. Other _____
- ☐ 22. Other _____

Note: After all final inspections have been approved, a Certificate of Occupancy or a Certificate of Approval prior to using or occupying any building or structure.

Note: State laws states that the Property Owner(s) is not required to pay the contractor their final payment until all final inspections are approved.

(Note: <u>Failure to call for a required inspection may result in a $500.00 fine per N.J.A.C. 5:23-2.31.(B).4)</u>

X 4/09/19 — X _____

Date — Signature of applicant/agent

Block _____ Lot _____ Permit # _____

THIS NOTICE MUST BE POSTED AT THE JOB SITE AT ALL TIMES.

TOWNSHIP OF PEMBERTON
500 PEMB-BROWNS MILLS RD
PEMBERTON, NJ 08068
609 - 8943330

19-0267
4/09/19

Control Number: 917520
Application Date: 03/18/2019

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 724 Lot: 6 Qualification Code:
Work Site Location: 210 MONTANA TR PEMBERTON

Owner In Fee: US BANK TRUST
Address: 13801 WIRELESS WAY
OKLAHOMA CITY OK 73134

Telephone: (732) 580-7792

Use Group(s): R-5

Contractor: FLASH ELECTRIC NJ CORP
Address: 396 CATALBA AVENUE
MICKLETON NJ 08056

Telephone: (856) 369-0202
Lic. No. / Bldrs. Reg. No.: 16464
Federal Emp. No.: 82-3789958

is hereby granted permission to perform the following work :

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

DESCRIPTION OF WORK:
SERVICE RESTART

ESTIMATED COST OF WORK:

Cost of Construction:	0.00
Cost of Rehabilitation:	100.00
Cost of Demolition:	0.00
Total Cost:	$100.00

PAYMENTS (Office Use Only)	
Building	
Electrical	$73.00
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	
DCA Minimum Fee	$1.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	$74.00
All Fees Waived:	No

Amount to be Paid: **$74.00**

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.

Daniel A. Wassenar
Construction Official

03.25.19
Date

Note:

ELECTRICAL SUBCODE TECHNICAL SECTION

TOWNSHIP OF PEMBERTON

Date Received: 03/18/2019
Control #: 917520

Date Issued: 4/09/19
Permit #: 0

19-0267

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

Block: 724 Lot: 6 Qualification Code:

Work Site Location: 210 MONTANA TR

Owner in Fee: US BANK TRUST

Address: 13801WIRELESS WAY
OKLAHOMA CITY OK 73134

E-mail:

Telephone: (732) 580-7792

Contractor: FLASH ELECTRIC NJ CORP
ATTN:

Address: 396 CATALBA AVENUE
MICKLETON NJ 08056

E-mail:

Telephone: (856) 369-0202

Fax:

Home Improvement Registration No. or Exemption Reason:

Contractor License No.: 16464 Exp Date: 3/31/2021

Federal Emp. No.: 82-3789958

DESCRIPTION OF WORK:
SERVICE RESTART

DR#342944928

B. ELECTRICAL CHARACTERISTICS

Use Group: Present R-5 Proposed

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

Building Occupied as Utility Co.

1. New Building $0.00 2. Rehabilitation $100.00

3. Demolition $0.00 Est.Cost of Elec.Work (1+2+3) $100.00

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
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 4/12/19
Approved by:

INSPECTIONS Type:	Dates(Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp.Serv				
Constr.Serv				
TCO				
Other				
Service			4/12	RCH
Final				
Barrier-Free				
Temp Cut-in-Card Date Issued				
Final Cut-in-Card Date Issue				
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's Signature/Contractor's seal and Signature

Print Name

[ ] Licensed Electrical Contractor [ ] Certified Landscape Irrigation Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motor-Fract.HP
		Emergency&Exit Lights
		Communication Points
		Alarm Devices/F.A.C. Panel
		Other 1:
		Other 2:
		TOTAL NUMBER
		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 Htr./Air Handler
		KW Baseboard Heat
		HP Motors 1/+HP
		KW Transformer/Generator
1	100.00	AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light
		KW Photovoltaic Systems
		Other 3:
		Other 4:
		Other 5:
		Other 6:
		Other 7:
		Other 8:
		Other 9:

FEE (Office Use Only)

$65.00

Administrative Surcharge	$31.00
Minimum Fee	
State Permit Surcharge Fee	
TOTAL FEE	$73.00

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

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

ELECTRICAL SUBCODE TECHNICAL SECTION

TOWNSHIP OF PEMBERTON

Date Received: 03/18/2019
Control #: 917520

Date Issued: 4/09/19
Permit #: 0

19-0267

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

Block: 724 Lot: 6 Qualification Code:

Work Site Location: 210 MONTANA TR

Owner in Fee: US BANK TRUST

Address: 13801WIRELESS WAY
OKLAHOMA CITY OK 73134

E-mail:

Telephone: (732) 580-7792

Contractor: FLASH ELECTRIC NJ CORP
ATTN:

Address: 396 CATALBA AVENUE
MICKLETON NJ 08056

E-mail:

Telephone: (856) 369-0202

Fax:

Home Improvement Registration No. or Exemption Reason:

Contractor License No.: 16464 Exp Date: 3/31/2021

Federal Emp. No.: 82-3789958

DESCRIPTION OF WORK:
SERVICE RESTART

B. ELECTRICAL CHARACTERISTICS

Use Group: Present R-5 Proposed _____

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

Building Occupied as _____ Utility Co. _____

1. New Building $0.00 2. Rehabilitation $100.00

3. Demolition $0.00 Est.Cost of Elec.Work (1+2+3) $100.00

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
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
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 Issue				
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's Signature/Contractor's seal and Signature Print Name

[ ] Licensed Electrical Contractor [ ] Certified Landscape Irrigation Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motor-Fract.HP
		Emergency&Exit Lights
		Communication Points
		Alarm Devices/F.A.C. Panel
		Other 1:
		Other 2:
		TOTAL NUMBER
		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 Htr./Air Handler
		KW Baseboard Heat
		HP Motors 1/+HP
		KW Transformer/Generator
1	100.00	AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light
		KW Photovoltaic Systems
		Other 3:
		Other 4:
		Other 5:
		Other 6:
		Other 7:
		Other 8:
		Other 9:

FEE (Office Use Only)

AMP Service	$65.00
Administrative Surcharge	$31.00
Minimum Fee	
State Permit Surcharge Fee	
TOTAL FEE	$73.00

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control # 917520
Date Issued
Permit #

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

Block 724 Lot 6 Qualification Code

Work Site Location 210 Montana Trail, Browns Mills, NJ 08015

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

Tel. (732) 580-7792 e-mail

Address 3630 PEACHTREE RD NE 1500 (street) ATLANTA (municipality) GA 30326 (zip code)

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

Address 396 Catalba 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 $ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: 3/18/19 Approved by:

[ ] Electric Plans Approved
Date: Approved by:

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

SUBCODE APPROVAL for PERMIT
Date: 3/18/19
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: Todd J Fisher

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Inspection of Servcie for Cut-In-Card

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	
0		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	100	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

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

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

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

New Jersey Office of the Attorney General

Division of Consumer Affairs
Board of Examiners of Electrical Contractors
124 Halsey Street, 6th Floor, Newark NJ 07102

GURBIR S. GREWAL
Attorney General

PAUL R. RODRÍGUEZ
Acting Director

Mailing Address:
P.O. Box 45006
Newark, NJ 07101
(973) 504-6410

September 19, 2018

TO WHOM IT MAY CONCERN

Our records indicate that the holder of License and Business Permit No. 34EB01646400 has applied to the Board of Electrical Contractors for a pressure seal which has not yet been issued to him/her by the vendor.

Please accept this sealed letter as an interim device pending the furnishing of a seal to:

TODD J FISHER
FLASH ELECTRIC NJ CORP
396 Catalba Avenue
Mickleton NJ 08056

This letter will be rendered invalid **180 days** after the date of its issuance.

Please be advised according to **N.J.A.C. 13:31-3.3 (c) "Pressure Seal and Signature Requirements"**, your old seal is the property of the board, we **MUST** be in receipt of your original seal before the issuance of your new seal can be obtained. Failure to return your old seal may result in a civil penalty assessed against you. If your seal is lost or stolen you **MUST** contact the board immediately.

Sincerely,

Philameana L. Tucker
Executive Director

PLT:gkb