Permits

Permit Number	Permit Issue Date	Control Number	Location Address	Block	Lot	Application Date	Application Status	Subcodes Used	Change of Contractor
22-0038	02/14/2022	C-21-00263	219 CHICAGAMI TR	20017	423	09/21/2021	CA and Close Date Issued	P	False
22-0039	02/14/2022	C-22-00030	219 CHICAGAMI TR	20017	423	01/28/2022	CA and Close Date Issued	M	False
21-0023	01/28/2021	C-21-00029	219 CHICAGAMI TR	20017	423	01/28/2021	CA and Close Date Issued	B	False
20-0241	12/01/2020	C-20-00300	219 CHICAGAMI TR	20017	423	11/03/2020	CA and Close Date Issued	P E F B	False
20-0080+A	06/03/2020	C-20-00110	219 CHICAGAMI TR	20017	423	05/21/2020	CA and Close Date Issued	E	False
20-0080	05/19/2020	C-20-00106	219 CHICAGAMI TR	20017	423	05/19/2020	CO and Close Date Issued	E B	False
13-0169	09/24/2013	C-13-00209	219 CHICAGAMI TR	20017	423	09/13/2013	Voided	P E F	False

Grand Totals

02-0091
7233

Master Permit Number	Is Prototype	Prototype Name	Qualifier	Subcode SignOff	Project Name	Project Number	Pick Up Date	Incomplete Application	Ward
	False			0/1 - P				False	
	False			0/1 - M				False	
	False			0/1 - B				False	
	False			0/4 - B P E F				False	
20-0080	False			0/1 - E				False	
	False			0/2 - B E				False	
	False							False	

(All Data, Location Address Like '219 chic' - 7 records)

Location Address 2	Location City	Location Zipcode	Work Type	Work Description
	MEDFORD LAKES	08055	Alteration	SEWER CONNECTION
	MEDFORD LAKES	08055	Alteration	GAS LINE FOR OUTDOOR GRILL
	MEDFORD LAKES	08055	Alteration	DECK
	MEDFORD LAKES	08055	Alteration	KITCHEN RENOVATION BATH RENOVATION BEDROOM ALTERATIONS
	MEDFORD LAKES	08055	Alteration	200 AMP SERVICE
	MEDFORD LAKES	08055	New	DETACHED GARAGE 60 AMP SUBPANEL
	MEDFORD LAKES	08055	Alteration	

BOROUGH OF MEDFORD LAKES
MEDFORD LAKES, NJ 08055
(609) 654-8898

Date Issued 06/27/2002
Control #
Permit # 02-0091

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 20017 Lot 423 Qual
Work Site Location 220 CHICAGAMI TR.

Owner in Fee/Occupant TUE RON
Address 220 CHICAGAMI TR.
MEDFORD LAKES, NJ 08055-
Telephone (609)654-7563
Contractor CMB GENERAL CONST. CO.
Address 71 JACKSON RD.
MEDFORD, NJ 08055-
Telephone (953)179-8 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3233369

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R-3
Maximum Live Load 0
Construction Classification 5B
Maximum Occupancy Load 0
Description of Work/Use:

REROOF TEAR OFF RECEIPHT FOR RECYCLING REQUIRED.

[ ] CERTIFICATE OF OCCUPANCY
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

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

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ___ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:
[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (___ years); see file

[ ] CERTIFICATE OF CONTINUED OCCUPANCY
This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] CERTIFICATE OF COMPLIANCE
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____, ___.

Thomas L. Heck
CONSTRUCTION OFFICIAL

Fee $ 0
Paid [X] Check No. 10147
Collected by: SR

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

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 7233
DATE ISSUED 4-11-88
Block 26017 Lot 423
Subdivision

A. IDENTIFICATION

Owner Ronald Tice
Address 219 Chicagram Trail
Medford Lakes NJ 08055
Tel. ( )

Agent Lydon Construction
Address 182 Kenoosha Trail
Medford Lakes NJ 08055
Tel. (609) 654 0536

Work Site Address Same
Lic. No.
Federal Emp. No. 157-24-0342

PAYMENTS

Permit Fee $ 39.00
Fees Remitted $
☒ Check No. 1918
☐ Cash
☐ Other

Collected By: C.O.
Date: 4-11-88

is hereby granted permission to perform the following work:

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

Description of work:

remove old shingle
reroof
Historic approvals
Thomas 4-11-88

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: $ 4,000.00

Thomas R. Heck
CONSTRUCTION OFFICIAL

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

1150

Medford Lakes Borough
1 CABIN CIRCLE

MEDFORD LAKES, NJ 08015
(609) 654-8898

Date Issued: 5/9/12
Application Number: ZA-12-00044
Application Date: 5/8/2012
Project Number:
Permit Number: ZP-12-00049
Fee: $50

Zoning Permit

Worksite Location: **219 CHICAGAMI TR**
Medford Lakes Borough, NJ

Block: **20017**
Lot: **423**
Qualifier:
Zone: **LR**

Owner: **LYONS, JUSTIN**
Address: **219 CHICAGAMI TR**
MEDFORD LAKES, NJ 08055

Applicant: **LYONS, JUSTIN**
Address: **219 CHICAGAMI TR**
MEDFORD LAKES, NJ 08055

Application Approved Date: _____

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: (None)

Nonconforming Use is: _____

Work Description:
12' X 36.5' PARKING PAD

Upon review it was determined that the Development Application:

- ☐ Permitted by Ordinance
- ☐ Permitted by Variance approved on: _____
- ☐ Valid Nonconforming Use is established by
  - ☐ Zoning Board of Adjustment
  - ☐ Zoning Officer

Julie H Keizer

JULIE HORNER-KEIZER, ZONING OFFICER

5/9/12
Date

CONSTRUCTION PERMIT

Date Issued
Control # C-13-00209
Permit # 13-0169

IDENTIFICATION Block: 20017 Lot: 423 Qualifier
Work Site Location: 219 CHICAGAMI TR MEDFORD LAKES, NJ 08055
Contractor
Address
Owner in Fee LYONS, JUSTIN
219 CHICAGAMI TR MEDFORD LAKES NJ 08055
Telephone:
Telephone:
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☑ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:

Note: If constuction 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 $4,950

Construction Official

9-16-13
Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$69
Plumbing	$69
Fire Protection	$50
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$9
CO Fee	
Other	$0
Total	$197
Check No.	24513
Cash	$0
Credit	$0
Collected By	Mes

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

Medford Lakes Borough
1 Cabin Circle Drive
Medford Lakes, NJ 08055

Date Issued	11/24/2020
Control Number	C-20-00110
Permit Number	20-0080+A
Permit Issue Date	6/3/2020
Certificate Number	20-0080+A

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 219 CHICAGAMI TR MEDFORD LAKES, NJ 08055 Block: 20017 Lot: 423 Qual:

Owner in Fee: FEAST, DAVE

Owner Address: 219 CHICAGAMI TR MEDFORD LAKES NJ 08055

Telephone: (609) 381-0968

Contractor: ULRICH BUILDERS LLC

Address: 277 WHITE HORSE PIKE STE B101 ATCO NJ 08004

Telephone: (609) 743-1638 Fax: Federal Emp. Number:

License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: Type V

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: 200 AMP SERVICE

Certificate Comments:

☐ **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.

☐ **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 Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **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

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Keith Rawding

Construction Official

Date Printed: 11/25/2020

U.C.C. F260 (rev. 08/05)

Fee: $0.00

Check Number:

Collected By:

Medford Lakes Borough
1 Cabin Circle Drive
Medford Lakes, NJ 08055

Date Issued	4/13/2021
Control Number	C-20-00300
Permit Number	20-0241
Permit Issue Date	12/1/2020
Certificate Number	20-0241

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 219 CHICAGAMI TR MEDFORD LAKES, NJ 08055 Block: 20017 Lot: 423 Qual:

Owner in Fee: FEAST, DAVE

Owner Address: 219 CHICAGAMI TR MEDFORD LAKES NJ 08055

Telephone: (609) 381-0968

Contractor FEAST, DAVE

Address 219 CHICAGAMI TR MEDFORD LAKES NJ 08055

Telephone: (609) 381-0968 Fax: Federal Emp. Number:

License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: BATH RENOVATION, BEDROOM ALTERATIONS, KITCHEN RENOVATION

Certificate Comments:

☐ **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.

☐ **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 Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **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

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Keith Rawling (KR)
Construction Official
Date Printed: 4/13/2021

U.C.C. F260 (rev. 08/05)

Fee: $0.00
Check Number:
Collected By:

Medford Lakes Borough
1 CABIN CIRCLE
MEDFORD LAKES, NJ 08055
(609) 654-8898

Date Issued:	3/2/2020
Application Number:	ZA-20-00004
Application Date:	2/19/2020
Project Number:	
Permit Number:	ZP-20-00004
Fee:	$50.00

Zoning Permit

Worksite **219 CHICAGAMI TR**
Location: **Medford Lakes Borough, NJ**

Owner: **Dave & Cindy Feast**
Address: **219 CHICAGAMI TR**
MEDFORD LAKES, NJ 08055

Applicant: **Dave & Cindy Feast**
Address: **219 CHICAGAMI TR**
MEDFORD LAKES, NJ 08055

Block: **20017** Lot: **423** Qualifier: _____ Zone: **LR**

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Present Use: **RESIDENTIAL**

☐ Non Conforming Use ☐ Non Conforming Structure

Proposed Use: **RESIDENTIAL**

Work Description:

New Building, Deck/Porch - Detached Garage 24' x 20'
Deck 27 X 12

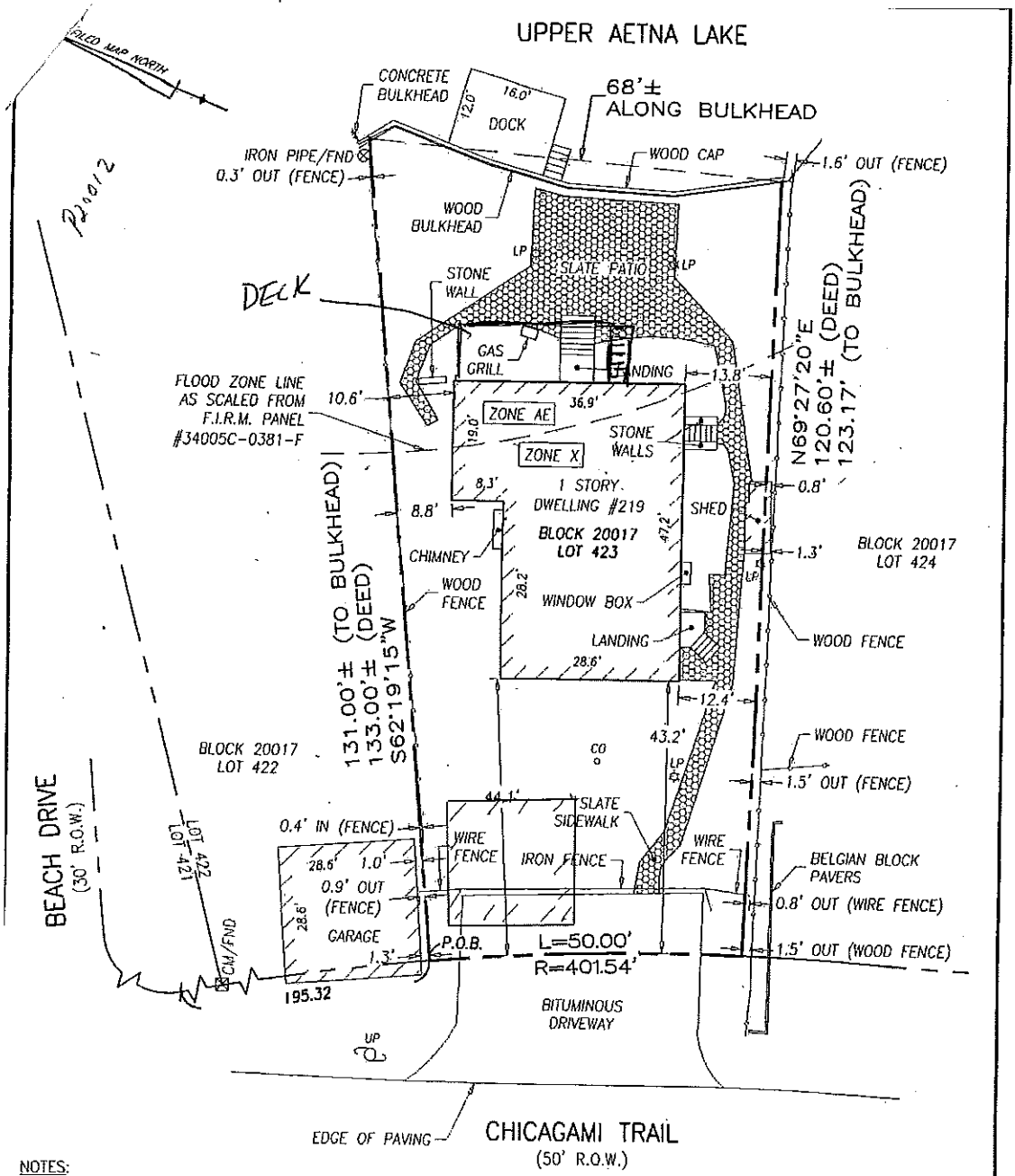
Application Approved Date: _____

Upon review it was determined that the Zoning Permit:

☑ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Approved with Conditions
☐ Valid Nonconforming Use/Structure is established by
☐ Zoning Board of Adjustment ☐ Zoning Officer

ROBERT J. BURTON, ZONING OFFICER

1/27/2021
Date



NOTES:

1. SURVEY PERFORMED WITHOUT BENEFIT OF A TITLE REPORT. PROPERTY SUBJECT TO ANY EASEMENTS OR RESTRICTION OF RECORD.
2. SURVEY BASED ON DEED BOOK 6668 PAGE 547.
3. LOT AND BLOCK NUMBERS REFER TO MEDFORD LAKES BOROUGH TAX MAPS, SHEET #2.
4. PROPERTY CORNERS WERE FOUND AT TIME OF SURVEY OR ARE TO BE SET AT A LATER DATE.
5. PROPERTY LIES IN ZONE "X" (AREA OF MINIMAL FLOOD HAZARD) AND ZONE "AE" (65.0), AS SHOWN ON F.I.R.M. COMMUNITY-PANEL #34005C-0381-F, DATED 12/21/2017.
6. PROPOERTY ALSO KNOWN AS PLOT 423 IN BLOCK 17AS SHOWN ON A PLAN ENTITLED "PLAN B, MEDFORD LAKES IN THE PINES, "THE YEAR 'ROUND PLAYROUND', MEDFORD TOWNSHIP, BURLINGTON COUNTY N.J.", DATED DECEMBER 1930, FILED IN THE BURLINGTON COUNTY CLERK'S OFFICE.
7. LOT AREA: 7,176 S.F. (0.16474 ACRES)
8. THE SURVEYOR RESERVES THE RIGHT TO REVISE THIS PLAN IF MORE INFORMATION BECOMES AVAILABLE.

PLAN OF SURVEY

SCALE : 1"=20'

GRAPHIC SCALE

0 10 20 40

(IN FEET)
1 inch = 20 ft.

Dante Guzzi Engineering Associates
800 South Main Street, Cape May Court House, New Jersey 08210
Telephone (609) 465-3333 NJ. Certificate of Authorization #: 24GA27997500
Facsimile (609) 465-3337 www.guzzlengineering.com

Steven C. Woodrow 02/10/2020

STEVEN C. WOODROW, P.L.S.
PROFESSIONAL LAND SURVEYOR N.J. LICENSE NO. 27514

DATE

PLAN OF SURVEY
219 CHICAGAMI TRAIL
BLOCK 20017, LOT 423
MEDFORD LAKES BOROUGH
BURLINGTON COUNTY, NEW JERSEY

FILE	DATE	DRAWN BY	DRAWING NO.
219CHICAGAMI-SUR	02/07/2020	GB	SV1
SCALE: 1"=20'	PROJECT NO.: P-20-012	CHECKED BY: SCW DATE: 02/07/2020	SHEET 1 OF 1

Medford Lakes Borough
1 Cabin Circle Drive
Medford Lakes, NJ 08055

Date Issued 5/12/2022
Control Number C-21-00029
Permit Number 21-0023
Permit Issue Date 1/28/2021
Certificate Number 21-0023

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 219 CHICAGAMI TR MEDFORD LAKES, NJ 08055 Block: 20017 Lot: 423 Qual:

Owner in Fee: FEAST, DAVID & CINDY

Owner Address: 219 CHICAGAMI TR MEDFORD LAKES NJ 08055

Telephone: (609) 381-0968

Contractor FEAST, DAVID & CINDY

Address 219 CHICAGAMI TR MEDFORD LAKES NJ 08055

Telephone: (609) 381-0968 Fax: Federal Emp. Number:

License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: DECK

Certificate Comments:

☐ **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.

☐ **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 Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **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

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 5/12/2022

U.C.C. F260 (rev. 08/05)

Medford Lakes Borough
1 Cabin Circle Drive
Medford Lakes, NJ 08055

Date Issued	5/12/2022
Control Number	C-22-00030
Permit Number	22-0039
Permit Issue Date	2/14/2022
Certificate Number	22-0039

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 219 CHICAGAMI TR MEDFORD LAKES, NJ 08055 Block: 20017 Lot: 423 Qual:

Owner in Fee: FEAST, DAVID AND CYNTHIA

Owner Address: 219 CHICAGAMI TR MEDFORD LAKES NJ 08055

Telephone: (609) 381-0968

Contractor: GEORGE R. COULTER PLUMBING

Address: 430 COOPER ROAD WEST BERLIN NJ 08091-

Telephone: (856) 753-9871 Fax: (856) 753-9872 Federal Emp. Number:

License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: GAS LINE FOR OUTDOOR GRILL

Certificate Comments:

☐ **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.

☐ **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 Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
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☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **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

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 5/12/2022

U.C.C. F260 (rev. 08/05)

Medford Lakes Borough
1 Cabin Circle Drive
Medford Lakes, NJ 08055

Date Issued 5/12/2022
Control Number C-21-00263
Permit Number 22-0038
Permit Issue Date 2/14/2022
Certificate Number 22-0038

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 219 CHICAGAMI TR MEDFORD LAKES, NJ 08055 Block: 20017 Lot: 423 Qual:

Owner in Fee: FEAST, DAVE

Owner Address: 219 CHICAGAMI TR MEDFORD LAKES NJ 08055

Telephone: (609) 381-0968

Contractor R. D. ZEULI INC

Address PO BOX 350 W. BERLIN NJ 08091

Telephone: (856) 768-1985 Fax: (856) 768-0242 Federal Emp. Number:

License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: SEWER CONNECTION

Certificate Comments:

☐ **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.

☐ **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 Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **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

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 5/12/2022

U.C.C. F260 (rev. 08/05)