

Permit #	Issue Date	Location Address	Block	Lot	Application Date	Application Status	Subcodes Used	Work Type	Work Description	Total Constr Cost	Close Date
25-0445	7/31/2025	21 BREAKNECK RD	3102	2	7/31/2025	Open	B	Demolition	DEMOLITION OF ASSESSORY STRUCTURE	\$ 1,000.00	
25-0427	7/24/2025	21 BREAKNECK RD	3102	2	7/12/2025	Open	B	Demolition	DEMOLITION OF DETACHED GARAGE DEMOLITION SINGLE FAMILY DWELLING	\$ 11,000.00	
23-0428	8/23/2023	21 BREAKNECK RD	3102	2	8/17/2023	CA and Close Date Issued	E	Alteration	SERVICE	\$ 1,000.00	8/30/2023
20-0383	8/17/2020	21 BREAKNECK RD	3102	2	8/17/2020	CA and Close Date Issued	E M	Alteration	REPLACEMENT A/C UNIT	\$ 4,000.00	10/6/2020
17-0333	6/6/2017	21 BREAKNECK RD	3102	2	6/1/2017	CA and Close Date Issued	E	Alteration	SERVICE	\$ 500.00	6/15/2017
14-0723	11/20/2014	21 BREAKNECK RD	3102	2	11/20/2014	CA and Close Date Issued	E	Alteration	ELECTRICAL ALTERATIONS	\$ 1,255.00	6/15/2015
13-0442	7/16/2013	21 BREAKNECK RD	3102	2	7/9/2013	CA and Close Date Issued	E P F	Alteration	GENERATOR	\$ 12,796.00	9/3/2013
13-0286	5/8/2013	21 BREAKNECK RD	3102	2	4/26/2013	CA and Close Date Issued	B E P	Alteration	AIR CONDITION UNIT...	\$ 14,450.00	1/22/2014
13-0247	4/23/2013	21 BREAKNECK RD	3102	2	4/23/2013	CA and Close Date Issued	B	Alteration	ROOFING (VISUAL PARTS ONLY)	\$ 38,000.00	9/3/2013
13-0186	4/3/2013	21 BREAKNECK RD	3102	2	4/4/2013	CA and Close Date Issued	B	Demolition	REMOVAL OF UNDERGROUND STORAGE TANK	\$ 1,750.00	4/10/2013
00-0571	8/29/2000	21 BREAKNECK RD	3102	2	8/29/2000	CA and Close Date Issued	B	Alteration	ROOFING (VISUAL PARTS ONLY)	\$ 3,500.00	8/30/2000
94-160	5/9/1994	21 BREAKNECK ROAD	3102	2	5/9/1994	CA and Close Date Issued	E	Alteration	SERVICE	\$ 750.00	5/10/1994

Permit #	Issue Date	Location Address	Block	Lot	Application Date	Application Status	Subcodes Used	Work Type	Work Description	Total Constr Cost	Close Date
15-0331	6/1/2015	21A BREAKNECK RD	3102	1	5/27/2015	CA and Close Date Issued	B	Alteration	ROOFING (VISUAL PARTS ONLY)	\$ 4,000.00	8/5/2015
14-0490	8/22/2014	21A BREAKNECK RD	3102	1	8/19/2014	CA and Close Date Issued	B	Alteration	ROOFING (VISUAL PARTS ONLY)	\$ 1,000.00	11/18/2014
97-0558	10/20/1997	21A BREAKNECK ROAD	3102	1	10/20/1997	CA and Close Date Issued	B	Alteration	ROOFING (VISUAL PARTS ONLY)	\$ 5,000.00	10/21/1997
97-0125	4/17/1997	21 A BREAKNECK ROAD	3102	1	4/17/1997	CA and Close Date Issued	B	Alteration	ROOFING (VISUAL PARTS ONLY)	\$ 2,000.00	4/18/1997
		21A BREAKNECK RD	3102	1	7/24/2025	Under Review	B	Demolition	DEMOLITION OF ASSESSORY STRUCTURE	\$ 1,000.00	



CONSTRUCTION PERMIT

Date Issued 7/24/2025
Control # C-25-0587
Permit # 25-0427

IDENTIFICATION Block: 3102 Lot: 2 Qualifier _____
Work Site Location: 21 BREAKNECK RD Oakland Borough, NJ Contractor MARTUCCI CONSTRUCTION INC
Owner in Fee _____ Address 351 BOULEVARD POMPTON PLAINS NJ 07444
21 BREAKNECK RD OAKLAND NJ 07436 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:

DEMOLITION OF DETACHED GARAGE, DEMOLITION SINGLE FAMILY DWELLING

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 \$11,000

[Signature]
Construction Official

7/24/2025
Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$100
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$100
Check No.	9157
Cash	\$0
Credit	\$0
Collected By	Michelle Delyannis

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.



BUILDING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

7/24/25
25-0427

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

Block 3102 Lot 2 Qualification Code _____

Work Site Location 21 Breakneck Road
Oakland NT

Owner in Fee: _____

Tel. _____ e-mail _____

Address _____

Contractor: Marucci Construction Inc. street _____ municipality _____

Address 351 Boulevard e-mail _____

Pompton Plains, NJ 07444

Contractor License No. or Builder Registration No. _____ Exp. Date 3/31/26

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

Federal Emp. ID No. _____ FAX: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
				Type:	Failure	Failure	Approval
☐	No Plans Required	<u>7/14/25</u>	<u>[Signature]</u>	Footing			
☐	All			Footing Bonding			
☐	Footings/Foundations			Foundation			
☐	Structural/Framework			Slab			
☐	Exterior			Frame			
☐	Interior			Truss Sys./Bracing			
Joint Plan Review Required:				Barrier-Free			
☐	Elec.	☐	Plumb	Insulation			
☐	Fire	☐	Elevator	Finishes -Base Layer			
SUBCODE APPROVAL for PERMIT				Finishes -Final			
Date: _____				Energy			
Approved by: <u>[Signature]</u>				Mechanical			
SUBCODE APPROVAL for CERTIFICATE				TCO			
☐	CO	☐	CCO	Other			
Date: _____				Final			
Approved by: _____				Barrier-Free			

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ Constr. Class Present _____ Proposed _____

No. of Stories _____ If Industrialized Building: _____

Height of Structure _____ ft. State Approved _____ HUD _____

Area — Largest Floor _____ sq. ft. Est. Cost of Bldg. Work:

New Bldg. Area/All Floors _____ sq. ft. 1. New Bldg. \$ _____

Volume of New Structure _____ cu. ft. 2. Rehabilitation \$ _____

Max. Live Load _____ 3. Total (1+2) \$ 11,000

Max. Occupancy Load _____

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: Phil Marucci President

Print name here: Phil Marucci

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Demo Structure
Including garage

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence _____ Height (exceeds 6')
- ☐ Sign _____ Sq. Ft.
- ☐ Pool
- ☐ Retaining Wall _____ Sq. Ft.
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☐ Other _____
- ☒ Demolition

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

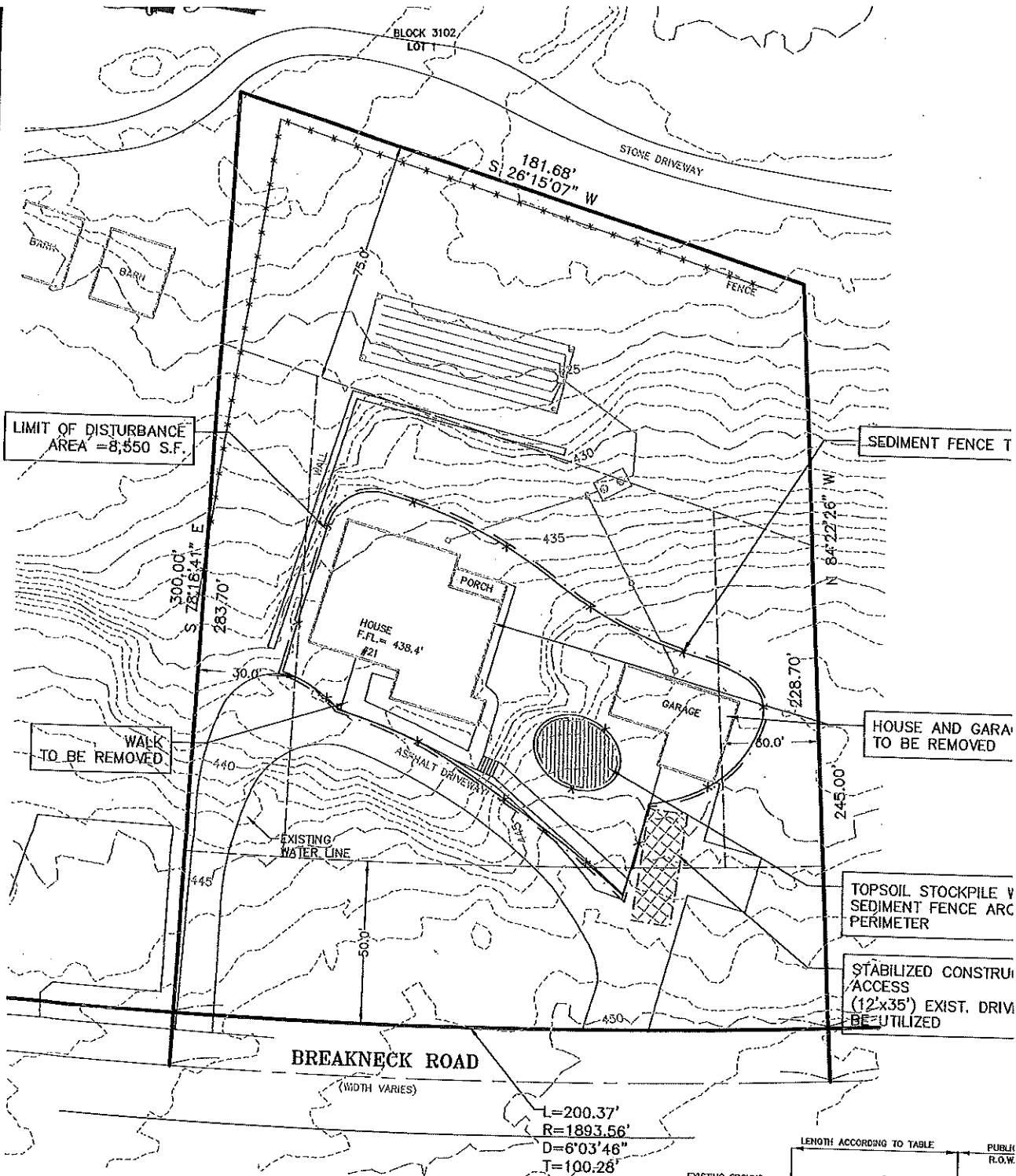
State Permit Surcharge Fee \$ 100

TOTAL FEE \$ _____

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Hard = Applicant Copy

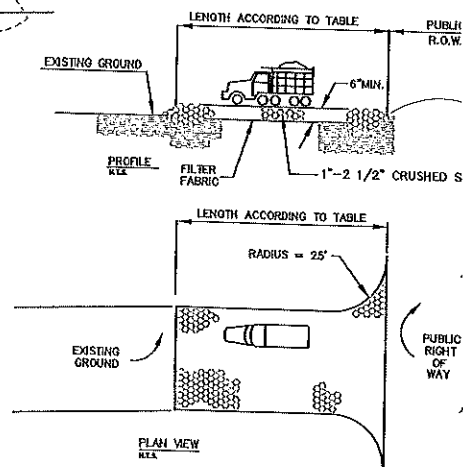
U.C.C. F110
(rev. 11/09)



SOIL MANAGEMENT NOTE:
 ACCORDING TO STATE OF NEW JERSEY LAND USE CLASSIFICATION SYSTEM, THE SITE IS UNDER URBAN REDEVELOPMENT AREA, LAND USE CODE 1,110. THEREFORE, THE PROPOSED PROJECT DOES NOT REQUIRE COMPACTION REMEDIATION, AS PER EXEMPTION #6 UNDER SOIL MANAGEMENT AND PREPARATION STANDARDS FOR SOIL AND SEDIMENT CONTROL IN NEW JERSEY.

SEQUENCE OF CONSTRUCTION

1. INSTALL FILTER BARRIERS AND STABILIZED CONSTRUCTION ACCESS. (1 DAY)
2. CLEAR, STRIP AND STOCKPILE TOPSOIL. (1 DAY)
3. REMOVE HOUSE, GARAGE AND WALKS (3 WEEKS)
4. TOPSOIL & SEED - PERMANENTLY STABILIZE ALL DISTURBED AREAS. (1 DAY)
5. FOLLOWING THE COMPLETION OF THE PROJECT PERMANENTLY STABILIZE ALL DISTURBED AREAS ON SITE (1 DAY)



PERCENT SLOPE OF ROADWAY	LENGTH OF STONE REQUIRED	
	COARSE GRAINED SOILS	FINE GRAINED SOILS
0 TO 2%	50 FT	100 FT
2 TO 6%	100 FT	200 FT
>6%	ENTIRE SURFACE STABILIZED WITH FINE BASE COURSE	

* AS PRESCRIBED BY LOCAL ORDINANCE OR OTHER GOVERNING AUTHORITY

NOTES: - PROVIDE APPROPRIATE TRANSITION BETWEEN STABILIZED CONSTRUCTION ENTRANCE AND PUBLIC R.O.W.
 - INDIVIDUAL LOT ACCESS PORTS MAY REQUIRE STABILIZATION
 - THICKNESS SHOWN IS FOR STONE CONSTRUCTION ENTRANCE ONLY

BERGEN COUNTY SOIL CONSERVATION DISTRICT SOIL EROSION AND SEDIMENT CONTROL NOTES

ALL SOIL EROSION AND SEDIMENT CONTROL PRACTICES WILL BE INSTALLED IN ACCORDANCE WITH THE NJ STANDARDS FOR SOIL EROSION AND SEDIMENT CONTROL IN NEW JERSEY (NJ STANDARDS), AND WILL BE INSTALLED IN PROPER SEQUENCE AND MAINTAINED UNTIL PERMANENT STABILIZATION IS ESTABLISHED.

ANY DISTURBED AREA THAT WILL BE LEFT EXPOSED FOR MORE THAN THIRTY (30) DAYS AND NOT SUBJECT TO CONSTRUCTION TRAFFIC SHALL IMMEDIATELY RECEIVE A TEMPORARY SEEDING AND MULCHING. IF THE SEASON PROHIBITS TEMPORARY SEEDING, THE DISTURBED AREA WILL BE MULCHED WITH UNROTATED STRAW AT A RATE OF 2 TONS PER ACRE ANCHORED BY APPROVED METHODS (I.E. PEG AND TWINE, MULCH NETTING, OR LIQUID MULCH BINDER).

IMMEDIATELY FOLLOWING INITIAL DISTURBANCE OR ROUGH GRADING, ALL CRITICAL AREAS SUBJECT TO EROSION WILL RECEIVE A TEMPORARY SEEDING IN COMBINATION WITH STRAW MULCH OR A SUITABLE EQUIVALENT, AT A RATE OF 2 TONS PER ACRE, ACCORDING TO THE NJ STANDARDS.

STABILIZATION SPECIFICATIONS:

TEMPORARY SEEDING AND MULCHING:

GROUND LIMESTONE - APPLIED UNIFORMLY ACCORDING TO SOIL TEST RECOMMENDATIONS.
FERTILIZER - APPLY 11 LBS./1,000 S.F. OF 10-20-10 OR EQUIVALENT WITH 50% WATER INSOLUBLE NITROGEN (UNLESS A SOIL TEST INDICATES OTHERWISE) WORKED INTO THE SOIL A MINIMUM OF 4".
SEED - PERENNIAL RYEGRASS 100 LBS./ACRE (2.3 LBS./1,000 SF) OR OTHER APPROVED SEED; PLANT BETWEEN MARCH 1 AND MAY 15 OR BETWEEN AUGUST 15 AND OCTOBER 1.

MULCH - UNROTATED STRAW OR HAY AT A RATE OF 70 TO 80 LBS./1,000 SF APPLIED TO ACHIEVE 95% SOIL SURFACE COVERAGE. MULCH SHALL BE ANCHORED BY APPROVED METHODS (I.E. PEG AND TWINE, MULCH NETTING, OR LIQUID MULCH BINDER).

PERMANENT SEEDING AND MULCHING:

TOPSOIL - A UNIFORM APPLICATION TO AN AVERAGE DEPTH OF 5", MINIMUM OF 4" FIRMED IN PLACE.

GROUND LIMESTONE - APPLIED UNIFORMLY ACCORDING TO SOIL TEST RECOMMENDATIONS.
FERTILIZER - APPLY 11 LBS./1,000 S.F. OF 10-20-10 OR EQUIVALENT WITH 50% WATER INSOLUBLE NITROGEN (UNLESS A SOIL TEST INDICATES OTHERWISE) WORKED INTO THE SOIL A MINIMUM OF 4".
SEED - TURF TYPE TALL FESCUE (BLEND OF 3 CULTIVARS) 350 LBS./ACRE (8 LBS./1,000 SF) OR OTHER APPROVED SEED; PLANT BETWEEN MARCH 1 AND OCTOBER 1. (SUMMER SEEDING REQUIRES IRRIGATION)

MULCH - UNROTATED STRAW OR HAY AT A RATE OF 70 TO 80 LBS./1,000 SF APPLIED TO ACHIEVE 95% SOIL SURFACE COVERAGE. MULCH SHALL BE ANCHORED BY APPROVED METHODS (I.E. PEG AND TWINE, MULCH NETTING, OR LIQUID MULCH BINDER).

THE SITE SHALL, AT ALL TIMES BE GRADED AND MAINTAINED SUCH THAT ALL STORMWATER RUN-OFF IS DIVERTED TO SOIL EROSION AND SEDIMENT CONTROL FACILITIES.

SOIL EROSION AND SEDIMENT CONTROL MEASURES WILL BE INSPECTED AND MAINTAINED ON A REGULAR BASIS, INCLUDING AFTER EVERY STORM EVENT.

STACKPILES ARE NOT TO BE LOCATED WITHIN 50' OF A FLOODPLAIN, SLOPE, ROADWAY OR RAINAGE FACILITY. THE BASE OF ALL STACKPILES SHALL BE CONTAINED BY A HAYBALE EROSION BARRIER OR SILT FENCE.

CRUSHED STONE, VEHICLE WHEEL-CLEANING BLANKET WILL BE INSTALLED WHEREVER A CONSTRUCTION ACCESS ROAD INTERSECTS ANY PAVED ROADWAY. SAID BLANKET WILL BE COMPOSED OF 1"-2 1/2" CRUSHED STONE, 6" THICK, WILL BE AT LEAST 30' X 100' AND SHOULD BE UNDERLAIN WITH A SUITABLE SYNTHETIC SEDIMENT FILTER FABRIC AND MAINTAINED.

MINIMUM SIDE SLOPES OF ALL EXPOSED SURFACES SHALL NOT EXCEED 3:1 UNLESS OTHERWISE APPROVED BY THE DISTRICT.

RIVEWAYS MUST BE STABILIZED WITH 1"-2 1/2" CRUSHED STONE OR SUBBASE PRIOR TO INDIVIDUAL LOT CONSTRUCTION.

IF SOIL WASHED, DROPPED, SPILLED OR TRACKED OUTSIDE THE LIMIT OF DISTURBANCE OR ONTO PUBLIC RIGHT-OF-WAYS, WILL BE REMOVED IMMEDIATELY. PAVED ROADWAYS MUST BE KEPT CLEAN AT ALL TIMES.

ATCH BASIN INLETS WILL BE PROTECTED WITH AN INLET FILTER DESIGNED IN ACCORDANCE WITH SECTION 28-1 OF THE NJ STANDARDS.

STORM DRAINAGE OUTLETS WILL BE STABILIZED, AS REQUIRED, BEFORE THE DISCHARGE POINTS BECOME OPERATIONAL.

SWATERING OPERATIONS MUST DISCHARGE DIRECTLY INTO A SEDIMENT CONTROL BAG OR OTHER APPROVED FILTER IN ACCORDANCE WITH SECTION 14-1 OF THE NJ STANDARDS.

WATER SHALL BE CONTROLLED VIA THE APPLICATION OF WATER, CALCIUM CHLORIDE OR OTHER APPROVED METHOD IN ACCORDANCE WITH SECTION 10-1 OF THE NJ STANDARDS.

AREAS TO REMAIN AFTER CONSTRUCTION ARE TO BE PROTECTED WITH A SUITABLE FENCE INSTALLED AT THE DRIP LINE OR BEYOND IN ACCORDANCE WITH SECTION 9-1 OF THE NJ STANDARDS.

THE PROJECT OWNER SHALL BE RESPONSIBLE FOR ANY EROSION OR SEDIMENTATION THAT MAY OCCUR BELOW STORMWATER OUTFALLS OR OFF-SITE AS A RESULT OF CONSTRUCTION OF THE PROJECT.

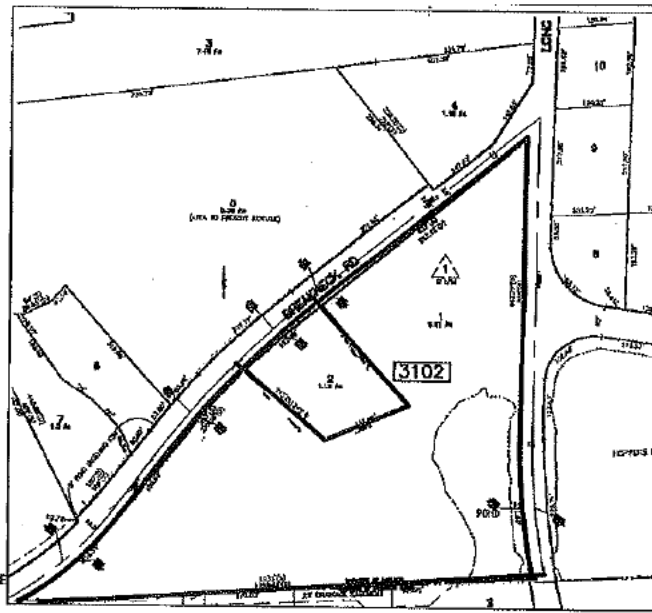
ANY REVISION TO THE CERTIFIED SOIL EROSION AND SEDIMENT CONTROL PLAN MUST BE SUBMITTED TO THE DISTRICT FOR REVIEW AND APPROVAL PRIOR TO IMPLEMENTATION IN THE FIELD.

COPY OF THE CERTIFIED SOIL EROSION AND SEDIMENT CONTROL PLAN MUST BE AVAILABLE AT THE PROJECT SITE THROUGHOUT CONSTRUCTION.

THE BERGEN COUNTY SOIL CONSERVATION DISTRICT MUST BE NOTIFIED, IN WRITING, AT LEAST 3 HOURS PRIOR TO ANY LAND DISTURBANCE: BERGEN COUNTY SCD, 700 KINDERKAMACK ROAD, SUITE 106, ORADELL, NJ 07848 TEL NO. 201-261-4407; FAX 201-261-7573.

THE BERGEN COUNTY SOIL CONSERVATION DISTRICT MAY REQUEST ADDITIONAL MEASURES TO MINIMIZE ON OR OFF-SITE EROSION PROBLEMS DURING CONSTRUCTION.

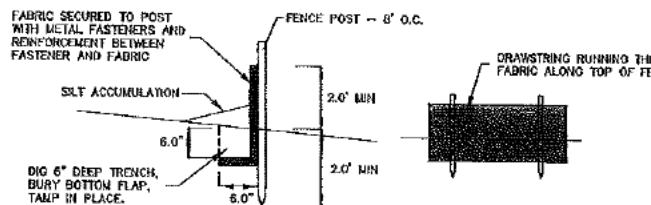
THE OWNER MUST OBTAIN A DISTRICT ISSUE REPORT OF COMPLIANCE PRIOR TO THE ISSUANCE OF ANY CERTIFICATE OF OCCUPANCY. THE DISTRICT REQUIRES AT LEAST ONE WEEK'S NOTICE TO FACILITATE THE SCHEDULING OF ALL REPORTS OF COMPLIANCE. SPECIFICATIONS. ALL SITE WORK MUST BE COMPLETED, INCLUDING TEMPORARY/PERMANENT STABILIZATION OF ALL EXPOSED AREAS, PRIOR TO THE ISSUANCE OF A REPORT OF COMPLIANCE BY THE DISTRICT.



KEY MAP

GENERAL NOTES:

- PROPERTY LINE AND EXISTING CONDITION INFORMATION BASED ON THE FOLLOWING:
 - PROPERTY KNOWN AS LOT 2 IN BLOCK 3102 ON THE CURRENT TAX MAP OF THE BOROUGH OF OAKLAND SHEET No. 31.
 - A MAP ENTITLED "LOCATION SURVEY, PROPERTY OF ROBERT T. NORMA A. HOLLAND, H/W, BOROUGH OF OAKLAND, BERGEN COUNTY, NEW JERSEY" PREPARED BY ROBERT P. BOSLAND, DATED 8-27-87.
- LOT AREA: 48,167 S.F. / 1.106 Ac.
- OWNER/APPLICANT: NOEL AND JULIE HOLLAND
21A BREAKNECK ROAD
OAKLAND, NJ 07436
- ELEVATIONS BASED ON NVAD 1988 DATUM, TOPOGRAPHY FROM NJ HIGHWAY COUNCIL 2018 LIDA DATA.
- CONTRACTOR TO VERIFY LOCATION OF ALL EXISTING UTILITIES PRIOR TO BEGIN CONSTRUCTION.



SEDIMENT FENCE

SOIL EROSION AND SEDIMENT CONTROL

DEMOLITION PLAN BLOCK 3102 - LOT 2 21 BREAKNECK ROAD FOR

BOROUGH OF OAKLAND, BERGEN CO., N.J.

SCHWANEWEDE HALS & VINCE

ENGINEERING • LAND SURVEYING • PLANNING
111 LITTLETON ROAD - SUITE 200 - PARLISSE, N.J. 07054

DAVID A. HALS, PE, LS, PP
N.J. PROFESSIONAL ENGINEER AND
LAND SURVEYOR LIC. NO. 29994

JOSEPH F. VINCE, PE, LS
N.J. PROFESSIONAL ENGINEER AND
LAND SURVEYOR LIC. NO. 68421

SCALE
1"=30'

DATE: JUNE 16, 202



CONSTRUCTION PERMIT

Date Issued 7/31/2025
Control # C-25-0646
Permit # 25-0445

IDENTIFICATION Block: 3102 Lot: 2 Qualifier _____
Work Site Location: 21 BREAKNECK RD Oakland Borough, NJ Contractor MARTUCCI CONSTRUCTION INC
Address 351 BOULEVARD POMPTON PLAINS NJ 07444
Owner in Fee _____ Telephone: _____
21 BREAKNECK RD OAKLAND NJ 07436 Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ 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:

DEMOLITION OF ASSESSORY STRUCTURE DEMO BARN

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 \$1,000

[Signature]
Construction Official

7/31/2025
Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$100
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$100
Check No.	9158
Cash	\$0
Credit	\$0
Collected By	Krystal Berkowitz

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.



Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Date Issued 8/5/2015
Control Number C-15-0399
Permit Number 15-0331
Permit Issue Date 6/1/2015
Certificate Number 15-0331

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 21A BREAKNECK RD. Oakland Borough, NJ Block: 3102 Lot: 1 Qual: _____

Owner In Fee: _____

Owner Address: 21 BREAKNECK RD. OAKLAND NJ 07436

Telephone: _____

Contractor HOLLAND, ROBT, NORMA, JULIE & NOEL

Address 21 BREAKNECK RD. OAKLAND NJ 07436

Telephone: _____ Fax: _____

License Number or Builders Registration Number: _____ Federal Emp. 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: ROOFING (VISUAL PARTS ONLY) (BARN)

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

Date Printed: 8/5/2015

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

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1



BUILDING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

6/1/15
15-0331

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

Block 3102 Lot 1 Qualification Code _____

Work Site Location 212 RUSSELL RD

DAKIN, N.J. 07436

Owner in Fee: _____

Tel. _____ e-mail _____

Address 212 RUSSELL RD DAKIN, NJ 07436

Contractor: HUMPHREY Tel. (____) _____

Address _____ e-mail _____

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	INSPECTIONS
			Type: Failure Failure Approval Initial
☐ No Plans Required			Footings
☐ All			Footings/Bonding
☐ Footings/Foundations			Foundation
☐ Structural/Framework			Slab
☐ Exterior			Frame
☐ Interior			Truss Sys./Bracing
Joint Plan Review Required:			Barrier-Free
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation
SUBCODE APPROVAL for PERMIT			Finishes -Base Layer
Date: _____			Finishes -Final
Approved by: _____			Energy
SUBCODE APPROVAL for CERTIFICATE			Mechanical
☐ CO ☐ CCO ☒ CA			TCO
Date: <u>8/6/15</u>			Other
Approved by: <u>[Signature]</u>			Final
			Barrier-Free

B. BUILDING CHARACTERISTICS

Use Group Present Residential Proposed _____ Constr. Class Present _____ Proposed _____

No. of Stories 1 If Industrialized Building: _____

Height of Structure 10 ft. State Approved _____ HUD _____

Area — Largest Floor 1500 sq. ft. Est. Cost of Bldg. Work:

New Bldg. Area/All Floors _____ sq. ft.

Volume of New Structure _____ cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Replace Barn Roof after removing existing roof

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☒ Roofing
- ☐ Siding
- ☐ Fence _____ Height (exceeds 6') _____
- ☐ Sign _____ Sq. Ft. _____
- ☐ Pool
- ☐ Retaining Wall _____ Sq. Ft. _____
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☐ Other _____
- ☐ Demolition

FEE (Office Use Only)

\$	_____

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

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Hard = Applicant Copy

U.C.C. F110
(rev. 12/07)



PERMIT ~~UPDATE~~

Date Update Issued
Permit #
Date Permit Issued

6/1/14
15-2381

IDENTIFICATION Block 3102 Lot 1 Qualification Code _____
Work Site Location 21A Breakneck Rd Contractor Homeowner
Address _____
Owner in Fee _____
Address 21A Breakneck Rd Tel. (____) _____
Oakland NJ 07436 Lic. No. or Bldrs. Reg. No. _____
Tel. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Replace Barn Roof After removing
Existing roof

Estimated Cost of Work \$ 4000

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.

Construction Official

Date

U.C.C. F190 (rev. 1/04)

1 WHITE—INSPECTOR

2 CANARY—OFFICE

3 PINK—OFFICE

4 GOLD—APPLICANT

PAYMENTS (Office Use Only)

Building 80
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
State Permit Surcharge Fee 8
Cert. of Occupancy _____
Other 88
Total 88
Check No. 41259
Cash _____
Collected by AB



Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Date Issued 11/18/2014
Control Number C-14-0574
Permit Number 14-0490
Permit Issue Date 8/22/2014
Certificate Number 14-0490

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 21A BREAKNECK RD Oakland Borough, NJ Block: 3102 Lot: 1 Qual: _____
Owner in Fee: _____
Owner Address: 21 BREAKNECK RD OAKLAND NJ 07436
Telephone: _____
Contractor HOLLAND, ROBT, NORMA, JULIE & NOEL
Address 21 BREAKNECK RD OAKLAND NJ 07436
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. 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: ROOFING (VISUAL PARTS ONLY)

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: _____



8/22/14

14-0490

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of
record and am authorized to make this application.

Signature _____

TECHNICAL SITE DATA

DESCRIPTION OF WORK

Revised Spec

And layal ok Pol Dan

TYPE OF WORK:

- ☐ New Building
☐ Addition
☒ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6')
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Retaining Wall _____ Sq. Ft.
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC.5:17
☐ Radon Remediation
☐ Other _____
☐ Demolition

FEE (Office Use Only)

[illegible]**JOB SUMMARY (Office Use Only)**

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)			
				Type:	Failure	Failure	Approval	Initial	
☒	No Plans Required			Footings					
☒	All			Footings Bonding					
☒	Footings/Foundations			Foundation					
☒	Structural/Framework			Slab					
☒	Exterior			Frame					
☒	Interior			Truss Sys./Bracing					
Joint Plan Review Required:				Barrier-Free					
☒	Elec.	☒	Plumb.	☒	Fire	☒	Elevator	Insulation	
SUBCODE APPROVAL for PERMIT				Finishes -Base Layer					
Date:				Finishes -Final					
Approved by:				Energy					
SUBCODE APPROVAL for CERTIFICATE				Mechanical					
☒	CO	☒	CCO	TCO					
Date:				Other					
Approved by:				Final					
				Barrier-Free					

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____	Constr. Class Present _____ Proposed _____
No. of Stories _____	If Industrialized Building:
Height of Structure _____ ft.	State-Approved _____ HUD _____
Area — Largest Floor _____ sq. ft.	Est. Cost of Bldg. Work:
New Bldg. Area/All Floors _____ sq. ft.	1. New Bldg. \$ _____
Volume of New Structure _____ cu. ft.	2. Rehabilitation \$ _____
Max. Live Load _____	3. Total (1+ 2) \$ _____
Max. Occupancy Load _____	U.C.C. F110

U.C.C. F110
(rev. 12/07)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Hard = Applicant Copy



CONSTRUCTION PERMIT

Date Issued

8/22/14

Permit #

14-0490

IDENTIFICATION Block 3102 Lot 1

Qualification Code

Work Site Location

21A BRECKENRIDGE ROAD

Contractor

Address

Midland Park, NJ 07432

Owner in Fee

Address

21A BRECKENRIDGE ROAD
Midland NJ 07436

Tel. ()

Lic. No. or Bldrs. Reg. No.

Tel.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

RE ROOF BARN

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 \$

Construction Official

Date

8/14/14

PAYMENTS (Office Use Only)

Building	<u>00-</u>
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	<u>2-</u>
Cert. of Occupancy	
Other	
Total	<u>60-</u>
Check No.	<u>#7314</u>
Cash	
Collected by	<u>MB</u>

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT

OAKLAND BOARD OF HEALTH

One Municipal Plaza, Oakland, NJ 07436

Phone: 201-337-9254

FAX: 201-337-9212

e-mail: health@oakland-nj.org

SEPTIC SYSTEM PERMIT

PERMIT NO.: 43-25

DATE OF ISSUE: 4/9/25

PERMIT APPLICANT: BRODERICK'S CONSTRUCTION CO., INC.
ADDRESS: 154 CUPSAW DRIVE, RINGWOOD, NJ 07456
PROPERTY OWNER: ~~BICKERT~~ HOLL AND
ADDRESS: 21A BREAKNECK ROAD, OAKLAND, NJ 07436
BLOCK/LOT: 3102/1

NEW CONSTRUCTION

Test Holes & Plan Review _____ \$450.00
Installation & Inspection _____ \$525.00

ALTERATION

Test Holes & Plan Review X \$350.00
Installation & Inspection _____ \$350.00

ATU (Alternate Treatment Unit) _____ 100.00

REPAIR

Application Review & Inspection of:
Baffles, Pipes, Lids, Pump, Float _____ \$ 90.00
All Other _____ \$175.00

ABANDONMENT _____ \$ 90.00

TOTAL PAID: 350.00

APPLICATION REQUIREMENTS AS OF 3/16/2022:

1. All septic contractors working in Oakland must be licensed by the Oakland Board of Health.
2. All work shall be performed by the original septic installer licensee named herein and whose signature appears on the septic permit application. No work is to be delegated to a subcontractor or other entity.
3. The Oakland Board of Health shall be notified at least 2 business days (48 hours) in advance of the date work will commence. Applicant shall notify the Board of Health's Health Inspector immediately of any cancellations, delays or changes in scheduled work.
4. Septic contractor must contact Board of Health's Health Inspector to have work inspected before it is covered.
5. Inspections of septic tank installations must include witnessing of water tight testing. (N.J.A.C. 7:9A-8.2(m).
6. Advanced Pretreatment Devices:
 - a) Advanced Pretreatment Devices are to be installed only by an Oakland-licensed septic installer, who has submitted a letter to the Health Department from the manufacturer of the particular ATU being installed that certifies that the installer has sufficient knowledge to install that particular manufacturer's proprietary technology (the alternate treatment unit). Example: Hoot, Jet, etc.
 - b) The Installation Permit must be issued to the Oakland-licensed Certified Installer.
 - c) An authorized installer shall be physically present at all times during installation of an advanced pretreatment device and either install or directly oversee the installation of the advanced pretreatment device.
 - d) The authorized installer must be present at the inspection of the vacuum test/water tightness of the pre-treatment device.
7. The septic contractor must notify the Oakland Shade Tree Commission if trees need to be removed other than those within the immediate area of the septic system as per the approved site plan. All trees removed require homeowner to obtain a permit from the Shade Tree Commission (applications are available at the Oakland DPW Bldg., 63 Oak Street); however trees within a 25' radius of the septic installation, alteration or repair are exempt from the fee requirement. Call 201-337-8104 X3022 prior to commencing with any work. If there is no answer, leave a message on the machine.

White – applicant copy Yellow – inspector copy Pink – office copy

OAKLAND BOARD OF HEALTH

One Municipal Plaza, Oakland, NJ 07436

Phone: 201-337-9254

FAX: 201-337-9212

e-mail: health@oakland-nj.org

SEPTIC SYSTEM PERMIT

PERMIT NO.: 137-24

DATE OF ISSUE: 8/9/24

PERMIT APPLICANT HOLLAND
ADDRESS: 21A BREAKNECK ROAD, OAKLAND, NJ 07436
PROPERTY OWNER [REDACTED]
ADDRESS 21A BREAKNECK ROAD, OAKLAND, NJ 07436
BLOCK/LOT: 3102/1

NEW CONSTRUCTION

Test Holes & Plan Review _____ \$450.00
Installation & Inspection _____ \$525.00

ALTERATION

Test Holes & Plan Review X \$350.00
Installation & Inspection _____ \$350.00

ATU (Alternate Treatment Unit) _____ \$100.00

REPAIR

Application Review & Inspection of:
Baffles, Pipes, Lids, Pump, Float _____ \$ 90.00
All Other _____ \$175.00

ABANDONMENT _____ \$ 90.00

TOTAL PAID: 350.00

APPLICATION REQUIREMENTS AS OF 3/16/2022:

1. All septic contractors working in Oakland must be licensed by the Oakland Board of Health.
2. All work shall be performed by the original septic installer licensee named herein and whose signature appears on the septic permit application. No work is to be delegated to a subcontractor or other entity.
3. The Oakland Board of Health shall be notified at least 2 business days (48 hours) in advance of the date work will commence. Applicant shall notify the Board of Health's Health Inspector immediately of any cancellations, delays or changes in scheduled work.
4. Septic contractor must contact Board of Health's Health Inspector to have work inspected before it is covered.
5. Inspections of septic tank installations must include witnessing of water tight testing. (N.J.A.C. 7:9A-8.2(m).
6. Advanced Pretreatment Devices:
 - a) Advanced Pretreatment Devices are to be installed only by an Oakland-licensed septic installer, who has submitted a letter to the Health Department from the manufacturer of the particular ATU being installed that certifies that the installer has sufficient knowledge to install that particular manufacturer's proprietary technology (the alternate treatment unit). Example: Hoot, Jet, etc.
 - b) The Installation Permit must be issued to the Oakland-licensed Certified Installer.
 - c) An authorized installer shall be physically present at all times during installation of an advanced pretreatment device and either install or directly oversee the installation of the advanced pretreatment device.
 - d) The authorized installer must be present at the inspection of the vacuum test/water tightness of the pre-treatment device.
7. The septic contractor must notify the Oakland Shade Tree Commission if trees need to be removed other than those within the immediate area of the septic system as per the approved site plan. All trees removed require homeowner to obtain a permit from the Shade Tree Commission (applications are available at the Oakland DPW Bldg., 63 Oak Street); however trees within a 25' radius of the septic installation, alteration or repair are exempt from the fee requirement. Call 201-337-8104 X3022 prior to commencing with any work. If there is no answer, leave a message on the machine.

RESOLUTION
BOARD OF ADJUSTMENT
Borough of Oakland
County of Bergen, N.J.

May 5, 1987

Introduced by: Feliziani

Seconded by: Kamm

WHEREAS, Robert T. Holland, Norma Holland, Noel R. Holland and Julie E. Holland, trading as Breakneck Hill Farm have applied to the Board of Adjustment of the Borough of Oakland for a variance from the provisions of Ordinance #79 Code 749, Section 59-49 of the Zoning Ordinance as applicable to premises known as 21A Breakneck Road, Lot 1 in Block 3104 as shown on the Tax Assessment Map of the Borough of Oakland to erect on said premise a second one family dwelling in the RA1 (residential) zone.

WHEREAS, the Board, after carefully considering the evidence presented by the applicant and the adjoining property owners who appeared in opposition, the Board has made the following factual findings:

1. All owners of property within 200 feet of the subject lot were notified of the hearing pursuant to R.S.40:55-44.

2. This application is an appeal from the decision of the Building Inspector denying the applicant's application to erect on the premises a second one family dwelling in the RA-1 (residential) zone pursuant to R.S.40:55-D-70(d).

3. The lot as shown on the sketches submitted to the Board of Adjustment consists of a corner parcel of property on the Southeasterly corner of Breakneck Road and Franklin Lake Road consisting of 10.73 acres having a frontage of approximately 1200 feet on Breakneck Road and 1000 feet on Franklin Lake Road (Long Hill Road). The premises are located in the R-1 Zone which only permits the use for one (1) one family dwelling on each parcel of property.

4. The existing dwelling on the premises fronts on Breakneck Road is used for one of the applicants and is approximately 1100 square feet in size. The applicants propose to construct another dwelling to be used by the remaining applicants as a residence.

5. The applicants presently operate a horse farm and board horses on the premises which they propose to continue.

6. That the premises could be subdivided and the second dwelling erected in accordance with the Zoning Ordinance.

7. That the applicants have not shown sufficient special reasons within the terms of R.S.40:55-70(d).

WHEREAS, the Board has determined, based upon the foregoing facts, that the relief requested by the applicant can not be granted without substantial detriment to the public good and without substantially impairing the intent and purpose of the Zoning Plan and Zoning Ordinance of the Borough of Oakland.

NOW, THEREFORE, BE IT RESOLVED by the Board of Adjustment of the Borough of Oakland that the application of Robert T. Holland, Norma Holland, Noel R. Holland and Julie E. Holland, trading as Breakneck Hill Farm, for a variance pursuant to 40:55D 70(d) to erect a second one family dwelling on the premises be denied.

ROLL CALL VOTE

Those in Favor: Brisby, Kamm, Feliziani, and Stride

Those Opposed: Rowan

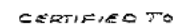
Abstained: None

Absent: Reap, Schwagger

The foregoing is a true copy of a resolution adopted by the Board of Adjustment of the Borough of Oakland at its meeting on the 5th day of May 1987 as copied from the minutes of said meeting.

Dated: May 5, 1987.

Senda Schwager
Secretary, Board of Adjustment





Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Certificate
Construction Code Division
(Certificate of Approval)

Date Issued 8/30/2023
Control Number C-23-0548
Permit Number 23-0428
Permit Issue Date 8/23/2023
Certificate Number 23-0428

Identification

Work Site Location: 21 BREAKNECK RD. Oakland Borough, NJ Block: 3102 Lot: 2 Qual: _____
Owner in Fee: _____
Owner Address: 21 BREAKNECK RD. OAKLAND NJ 07436
Telephone: _____
Contractor HAITZ ELECTRIC
Address 108 GREENWOOD AVE. MIDLAND PARK NJ 07432
Telephone: _____ 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: _____ Maximum Occupancy Load: _____
Description of Work/Use: 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:



Construction Official

Date Printed: 8/30/2023

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

Fee: \$0.00
Check Number: _____
Collected By: _____

Page 1



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 _____ Qualification Code _____

Work Site Location 31 Brookside Rd

Owner in Fee: _____

Tel. (____) _____ e-mail _____

Address 31 Brookside Rd _____

Contractor: **Haitz Electric Company, Inc.**

Address **108 Greenwood Avenue**

Midland Park, New Jersey 07432

Contractor License No. _____ Exp. Date 03/24

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

Federal Emp. ID No. _____ FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as Residence Utility Co. Public

Est. Cost of Elec. Work \$ 1000

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Approval	Initial
[] No Plans Required		Rough			
[] Partial - Underslab Utilities Approved		Barrier-Free			
Date: _____ Approved by: _____		Trench			
[] Electric Plans Approved		Temp. Serv.			
Date: _____ Approved by: _____		Constr. Serv.			
Joint Plan Review Required:		TCO			
[] Bldg. [] Plumb. [] Fire [] Elev.		Other			
SUBCODE APPROVAL for PERMIT		Service			
Date: _____		Final			
Approved by: _____		Barrier-Free			
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued			
[] CO [] CCO [] CA		Final Cut-in-Card Date Issued			
Date: <u>8/30/23</u>		Annual Pool Inspection			
Approved by: _____		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: **Fred Haitz**

☒ Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Repair AC Amp Service

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	\$ _____
_____	_____	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	_____
_____	_____	AMP Service	_____
_____	_____	AMP Subpanels	_____
_____	_____	AMP Motor Control Center	_____
_____	_____	KW Elec. Sign/Outline Light	_____

To reorder call: ALLEGRA
Marketing • Print • Mail
609-390-1400

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

Oakland Borough
Building Department (201) 337-8111
2023



DRUR # 20230840145-100

CUT-IN-CARD

MUNICIPALITY Oakland Borough

LOCATION 21 BREAKNECK RD

UTILITY CO O&R

Oakland Borough, NJ

BLK 3102

LOT 2

OWNER

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 ____ days

DESCRIPTION OF SERVICE 100AMP 1Ø

INSTALLED BY HAITZ ELECTRIC

LICENSE NO 7026

DATE 8/30/2023

PERMIT # 23-0428

INSPECTOR Jason Francese

☒ FAXED IN 8/30/2023

Lic. No: [REDACTED]

emailed 8-30-23

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR



CONSTRUCTION PERMIT

Date Issued 8/23/2023
Control # C-23-0548
Permit # 23-0428

IDENTIFICATION Block: 3102 Lot: 2 Qualifier _____
Work Site Location: 21 BREAKNECK RD Oakland Borough, NJ Contractor HAITZ ELECTRIC
Address 108 GREENWOOD AVE MIDLAND PARK NJ 07432
Owner In Fee 21 BREAKNECK RD OAKLAND NJ 07436 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:

SERVICE

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 \$1,000

[Signature]
Construction Official

8/23/23
Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$65
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$2
CO Fee	
Other	\$0
Total	\$67
Check No.	184
Cash	\$0
Credit	\$0
Collected By	Michelle Delyannis

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:

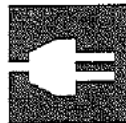
☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; 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.



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 _____ Qualification Code _____

Work Site Location 31 Breakneck Rd

Oakland

Owner in Fee: _____

Tel. (____) _____ e-mail _____

Address 31 Breakneck Rd Oakland UT

Contractor: Haitz Electric Company, Inc. Tel. _____

Address 108 Greenwood Avenue e-mail _____

Midland Park, New Jersey 07432

Contractor License No. _____ Exp. Date 03/24

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

Federal Emp. ID No. _____ FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as Dwelling Utility Co. Rockland

Est. Cost of Elec. Work \$ 1000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] 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 8-21-23

Approved by: [Signature]

SUBCODE APPROVAL for CERTIFICATE

[] CO [] CCO [] CA

Date _____

Approved by: _____

INSPECTIONS

Type: _____ 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 _____

Dates (Month/Day)

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: [Signature]

Print name here: Fred Haitz

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Repair 100 Amp Service

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	\$ _____
_____	_____	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	_____
<u>1</u>	<u>100</u>	AMP Service	_____
_____	_____	AMP Subpanels	_____
_____	_____	AMP Motor Control Center	_____
_____	_____	KW Elec. Sign/Outline Light	_____

To reorder call: ALLEGRA
Marketing • Print • Mail
609-390-1400

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ 67



Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Date Issued 10/6/2020
Control Number C-20-0469
Permit Number 20-0383
Permit Issue Date 8/17/2020
Certificate Number 20-0383

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 21 BREAKNECK RD Oakland Borough, NJ Block: 3102 Lot: 2 Qual: _____

Owner in Fee: _____

Owner Address: 21 BREAKNECK RD OAKLAND NJ 07436

Telephone: _____

Contractor REINER GROUP INC.

Address 11-07 RIVER ROAD P.O.BOX 1128 FAIR LAWN NJ 07410

Telephone: _____ 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: REPLACEMENT A/C UNIT - (DUCTLESS)

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

Date Printed: 10/6/2020

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

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1



CONSTRUCTION PERMIT

Date Issued

Permit #

8/17/20
20-0323IDENTIFICATION Block 3102 Lot 2 Qualification Code _____Work Site Location 21 Breakneck Rd Contractor Reiner GroupOakland NJ 07436Address 11-07 River Road, PO Box 1128

Owner in Fee _____ Fair Lawn, NJ 07410

Address above Tel. _____

Tel. _____ Lic. No. or Bldrs. Reg. No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Replace
single zone ductless

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 \$ 5660.00

Construction Official

Date

8/17/20

U.C.C. F170 (rev. 01/04)

1 WHITE—INSPECTOR

2 CANARY—OFFICE

3 PINK—TAX ASSESSOR

4 GOLD—APPLICANT

PAYMENTS (Office Use Only)

Building _____
Electrical 05
Plumbing 05
Fire Protection _____
Elevator Devices _____
Other _____
DCA State Permit Fee 8
Cert. of Occupancy _____
Other _____
Total 138
Check No. 5026497
Cash _____
Collected by 12

(see reverse side)



Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Date Issued 6/15/2017
Control Number C-17-0375
Permit Number 17-0333
Permit Issue Date 6/6/2017
Certificate Number 17-0333

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 21 BREAKNECK RD Oakland Borough, NJ Block: 3102 Lot: 2 Qual: _____

Owner In Fee: _____

Owner Address: 21 BREAKNECK RD OAKLAND NJ 07436

Telephone: _____

Contractor HAITZ ELECTRIC

Address 108 GREENWOOD AVE MIDLAND PARK NJ 07432

Telephone: _____

Fax: _____

License Number or Builders Registration Number: _____

Federal Emp. 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: SERVICE (100 AMP)

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 NJACS: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

Date Printed: 6/15/2017

U.C.C. F280 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____



CONSTRUCTION PERMIT

Date Issued

Permit #

6/6/11
17-1333

IDENTIFICATION Block 302 Lot 2
Work Site Location 21 Breakneck Rd
Oakland NJ
Owner in Fee [REDACTED]
Address 21 Breakneck Rd
Oakland
Tel. ()

Qualification Code
Contractor Hartz Electric Co
Address 108 Greenwood Ave
Midland Park NJ
Tel. [REDACTED]
Lic. No. or Bldrs. Reg. No. [REDACTED]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Replace damaged 100 Amp Service

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 \$ 1500
[Signature]
Construction Official

Date

6/6/11

PAYMENTS (Office Use Only)

Building 65
Electrical 65
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee 1
Cert. of Occupancy
Other
Total 160
Check No. 1731
Cash
Collected by [Signature]

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT



Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Date Issued 6/15/2015
Control Number C-14-0860
Permit Number 14-0723
Permit Issue Date 11/20/2014
Certificate Number 14-0723

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 21 BREAKNECK RD Oakland Borough, NJ Block: 3102 Lot: 2 Qual: _____
Owner in Fee: _____
Owner Address: 21 BREAKNECK RD OAKLAND NJ 07436
Telephone: _____
Contractor REINER GROUP INC.
Address 11-07 RIVER ROAD P.O.BOX 1128 FAIR LAWN NJ 07410
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. 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: ELECTRICAL ALTERATIONS ADDING (2) 4GANG OUTLETS

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

Date Printed: 6/15/2015

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

Fee: \$0.00

Check Number: _____

Collected By: _____



CONSTRUCTION PERMIT

Date Issued

Permit #

IDENTIFICATION Block 3102 Lot 2 Qualification Code Q Farm
Work Site Location 21 Breakneck Road Contractor Reiner Group
Oakland NJ 07436 Address 11-07 River Road, PO Box 1128
Owner in Fee [REDACTED] Fair Lawn, NJ 07410
Address 21 Breakneck Road Tel. [REDACTED]
Oakland NJ 07436 Lic. No. or Bldrs. Reg. No. [REDACTED]
Tel. [REDACTED]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Install (2) 4 gang outlets

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 \$ 1255.00

Construction Official

Date

U.C.C. F170 (rev. 01/04)

1 WHITE—INSPECTOR

2 CANARY—OFFICE

3 PINK—TAX ASSESSOR

4 GOLD—APPLICANT

PAYMENTS (Office Use Only)

Building 605
Electrical 605
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA State Permit Fee 2
Cert. of Occupancy _____
Other 107
Total 1255.00
Check No. 1562104
Cash _____
Collected by AS

(see reverse side)



Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Date Issued 9/3/2013
Control Number C-13-0510
Permit Number 13-0442
Permit Issue Date 7/16/2013
Certificate Number 13-0442

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 21 BREAKNECK RD Oakland Borough, NJ Block: 3102 Lot: 2 Qual: _____
Owner In Fee: _____
Owner Address: 21 BREAKNECK RD OAKLAND NJ 07436
Telephone: _____
Contractor REINER AC AND HEATING CO
Address 1100 BLANCHE AVENUE NORWOOD NJ 07648
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. 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: GENERATOR

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: 9/3/2013

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

Page 1



CONSTRUCTION PERMIT

Date Issued

Permit #

7/16/13
13-0412IDENTIFICATION Block 3102 Lot 2Work Site Location 21 Breakneck RdOwner in Fee [REDACTED]Address sameTel. [REDACTED]

Qualification Code _____

Contractor Reiner GroupAddress 11-07 River Road, PO Box 1128Fair Lawn, NJ 07410Tel. [REDACTED]Lic. No. or Bldrs. Reg. No. [REDACTED]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: 20kW Generator InstalledInstall on its own base

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 \$ 12,000

Construction Official

Date

7/12/13

PAYMENTS (Office Use Only)

Building	_____
Electrical	<u>816.4</u>
Plumbing	<u>63</u>
Fire Protection	_____
Elevator Devices	_____
Other	<u>23.7</u>
DCA State Permit Fee	<u>25</u>
Cert. of Occupancy	_____
Other	_____
Total	<u>900</u>
Check No.	<u>102300</u>
Cash	_____
Collected by	<u>AP</u>

(see reverse side)

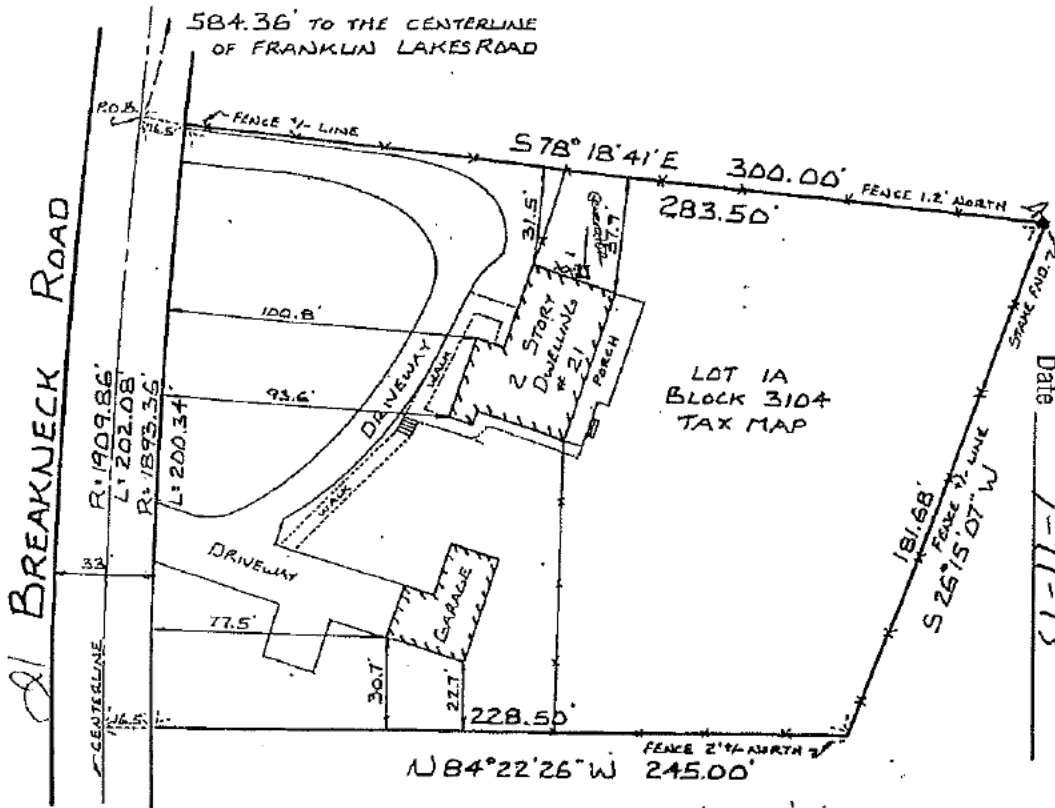
U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT



MARKING OF THE PROPERTY CORNERS
HAS BEEN OMITTED AT THE INSTRUCTION
OF THE OWNER OR HIS AGENT

REFERENCE:

DEED

CERTIFIED TO:

LAWYERS TITLE INSURANCE CORPORATION
COLUMBIA SAVINGS AND LOAN ASSOCIATION
ANDERSEN AND HOLLAND, ESQS.

BOROUGH OF OAKLAND BERGEN COUNTY NEW JERSEY

C.S. BRIGGS ASSOCIATES
LAND SURVEYING
MIDLAND PARK NEW JERSEY

SCALE
1"=50'

DRAWN BY
D.M.D.
REVISED

LAND SURVEYOR

ROBERT P. BOSLAND

N.J. LIC. NO.

DATE

8-27-87

Robert P. Bosland

DRAWING NUMBER



Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Date Issued 9/3/2013
Control Number C-13-0295
Permit Number 13-0247
Permit Issue Date 4/23/2013
Certificate Number 13-0247

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 21 BREAKNECK RD Oakland Borough, NJ Block: 3102 Lot: 2 Qual: _____
Owner in Fee: _____
Owner Address: 21 BREAKNECK RD OAKLAND NJ 07436
Telephone: _____
Contractor BRAUIUS BROS INC
Address P.O.BOX 298 MIDLAND NJ 07432
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. 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: ROOFING (VISUAL PARTS ONLY)

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: _____



CONSTRUCTION PERMIT

Date Issued

Permit #

4/23/13
13-0547

IDENTIFICATION Block

Lot

Qualification Code

Work Site Location

Owner in Fee

Address

Tel.

Contractor

Address

Tel.

Lic. No. or Bids. Reg. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Rip & Repl Roofing

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 \$

Construction Official

Date

PAYMENTS (Office Use Only)

Building

Electrical

Plumbing

Fire Protection

Elevator Devices

Other

DCA State Permit Fee

Cert. of Occupancy

Other

Total

Check No.

Cash

Collected by

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT



Albert Martorano
ARCHITECT

4/6/13

Oakland Building Dept.

Re: [REDACTED]
21 Breakneck Rd.
Oakland, N.J.

I have investigated and reviewed the existing roof system of the oldest portion of the Holland residence. This roof system is constructed of the following components: A standing seam tin roof which is at the end of its useful life and is beginning to leak, over wood shingles, over 5/4" x 3" horizontal nailers at 5-1/2" o.c., over 5" x 5" hand hewed timbers ranging from 2'-7" to 2'-11" o.c. with a 10'-6" horizontal span at an 11/12 roof pitch.

Paul Braunius of Braunius Brothers Inc., a local builder, recommends removing the standing seam tin roofing throughout the steep portion of the original structure which also contains six small gable dormers. After removing the tin roofing, a layer of 1/2" CDX plywood would be installed directly above the existing wood shingles. New cedar shingles, over a proper cedar breather, would be installed above the new plywood.

I agree with this method of installing the new roof system and substantiate that the existing original rafter-nailer-wood shingle system can support the additional proposed weight of the new plywood, cedar breather, and cedar shingles.

Sincerely,

Albert Martorano A.I. 12572

22 Smokey Ridge Road
Ringwood, NJ 07456

PHONE: [REDACTED]
FAX: [REDACTED]



Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Date Issued 6/5/2013
Control Number C-13-0308
Permit Number 13-0286
Permit Issue Date 5/8/2013
Certificate Number 13-0286

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 21 BREAKNECK RD. Oakland Borough, NJ Block: 3102 Lot: 2 Qual: _____
Owner In Fee: _____
Owner Address: 21 BREAKNECK RD. OAKLAND NJ 07436
Telephone: _____
Contractor REINER GROUP INC.
Address 11-07 RIVER ROAD P.O.BOX 1128 FAIR LAWN NJ 07410
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. 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: AIR CONDITION UNIT... (2)

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

Date Printed: 6/5/2013

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

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1



CONSTRUCTION PERMIT

Date Issued

Permit #

5/8/13
13-0286IDENTIFICATION Block 5102 Lot 2

Qualification Code

Work Site Location 21 Break Neck RdContractor Reiner GroupAddress 11507 River Rd

Owner in Fee

Address same

Tel.

Lic. No. or Bldrs. Reg. No. 12/40007400

Tel.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

2 Central Air Systems
Installed

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 \$

Construction Official

Date

PAYMENTS (Office Use Only)

Building 250
Electrical 125
Plumbing 125
Fire Protection _____
Elevator Devices _____
Other Removal of old
DCA State Permit Fee 25
Cert. of Occupancy _____
Other old
Total 500
Check No. #050005
Cash _____
Collected by [Signature]

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT



Oakland Borough
ONE MUNICIPAL PLAZA
OAKLAND, NJ 07436

Date Issued 4/10/2013
Control Number C-13-0223
Permit Number 13-0186
Permit Issue Date 4/3/2013
Certificate Number 13-0186

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 21 BREAKNECK RD. Oakland Borough, NJ Block: 3102 Lot: 2 Qual: _____
Owner In Fee: _____
Owner Address: 21 BREAKNECK RD. OAKLAND NJ 07436
Telephone: _____
Contractor TRI-STATE ENVIRONMENTAL CONSULTANTS INC.
Address 372 HIL-RAY AVE. WYCKOFF, NJ 07481
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: REMOVAL OF UNDERGROUND STORAGE TANK (550 GALLON)

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

Date Printed: 4/10/2013

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

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1



CONSTRUCTION PERMIT

Date Issued

Permit #

4/13/13
13-0186

IDENTIFICATION Block

Lot

Qualification Code

Work Site Location

Owner in Fee

Address

Tel.

Contractor

Address

Tel.

Lic. No. or Bldrs. Reg. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

remove 550 gallon underground
#2 oil storage tankNOTE: 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 \$

Construction Official

Date

PAYMENTS (Office Use Only)

Building

Electrical

Plumbing

Fire Protection

Elevator Devices

Other

DCA State Permit Fee

Cert. of Occupancy

Other

Total

Check No.

Cash

Collected by

(see reverse side)

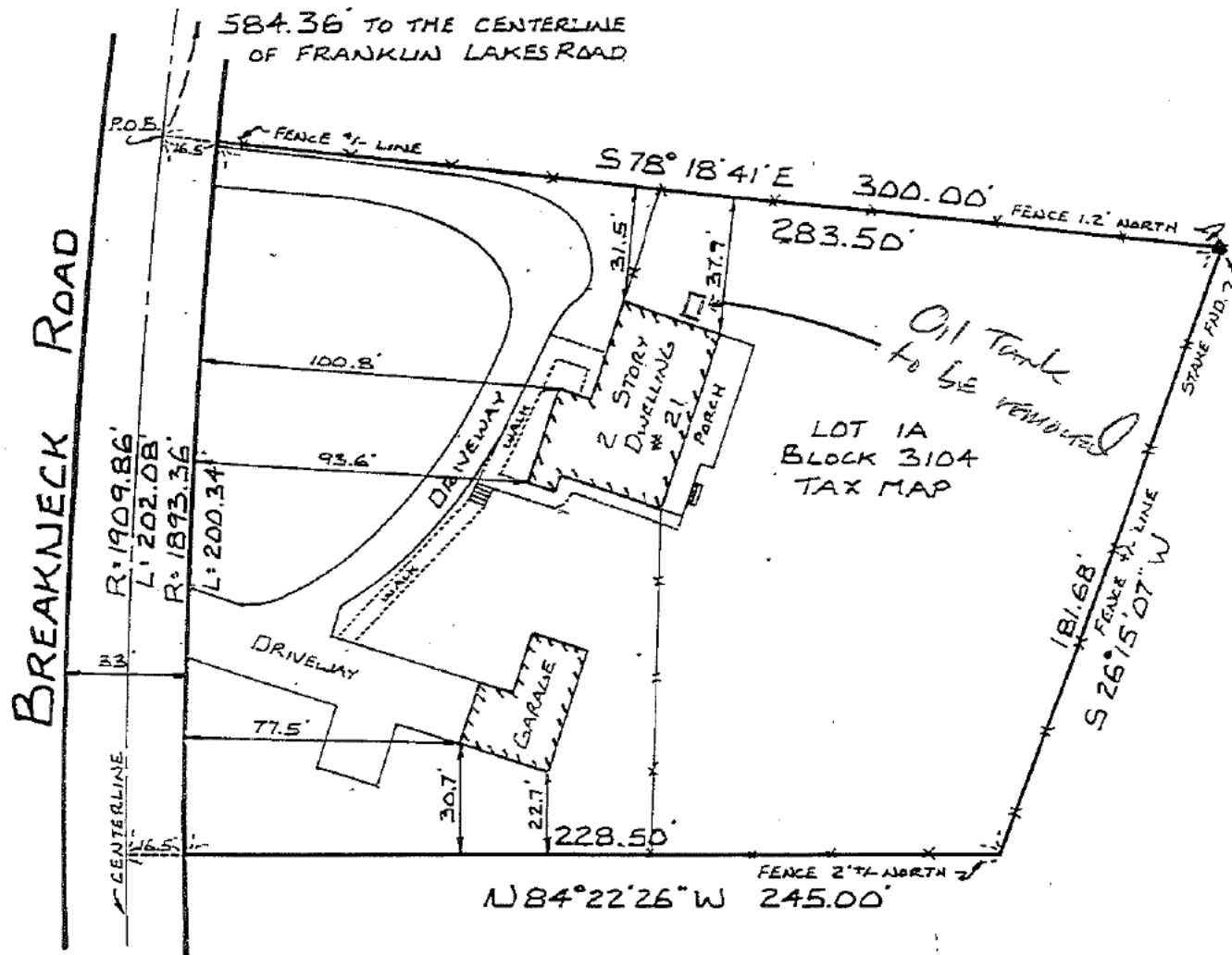
U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT



MARKING OF THE PROPERTY CORNERS
HAS BEEN OMITTED AT THE INSTRUCTION
OF THE OWNER OR HIS AGENT

REFERENCE:

DEED

CERTIFIED TO:

LAWYERS TITLE INSURANCE CORPORATION
COLUMBIA SAVINGS AND LOAN ASSOCIATION
ANDERSEN AND HOLLAND, ESQS.

BOROUGH OF OAKLAND

BERGEN COUNTY

NEW JERSEY

C.S. BRIGGS ASSOCIATES
LAND SURVEYING
MIDLAND PARK NEW JERSEY

SCALE

1"=50'

DRAWN BY

D. M. D.

REVISED

LAND SURVEYOR

ROBERT P. BOSLAND

N.J. LIC. NO.

DATE

8-27-87

DRAWING NUMBER

Robert P. Bosland

OAKLAND BOARD OF HEALTH

One Municipal Plaza, Oakland, NJ 07436

Phone: 201-337-9254

FAX: 201-337-9212

e-mail: health@oakland-nj.org

SEPTIC SYSTEM PERMIT

PERMIT NO.: 49-25
DATE OF ISSUE: 4/21/25

PERMIT APPLICANT: BRODERICK'S CONSTRUCTION CO., INC.
ADDRESS: 154 CUPSAW DRIVE, RINGWOOD, NJ 07456
PROPERTY OWNER: [REDACTED]
ADDRESS: 21 BREAKNECK ROAD, OAKLAND, NJ 07436
BLOCK/LOT: 3102/2

NEW CONSTRUCTION

Test Holes & Plan Review _____ \$450.00
Installation & Inspection _____ \$525.00

ALTERATION

Test Holes & Plan Review X \$350.00
Installation & Inspection _____ \$350.00

ATU (Alternate Treatment Unit) _____ 100.00

REPAIR

Application Review & Inspection of:
Baffles, Pipes, Lids, Pump, Float _____ \$ 90.00
All Other _____ \$175.00

ABANDONMENT _____ \$ 90.00

TOTAL PAID: 350.00

APPLICATION REQUIREMENTS AS OF 3/16/2022:

1. All septic contractors working in Oakland must be licensed by the Oakland Board of Health.
2. All work shall be performed by the original septic installer licensee named herein and whose signature appears on the septic permit application. No work is to be delegated to a subcontractor or other entity.
3. The Oakland Board of Health shall be notified at least 2 business days (48 hours) in advance of the date work will commence. Applicant shall notify the Board of Health's Health Inspector immediately of any cancellations, delays or changes in scheduled work.
4. Septic contractor must contact Board of Health's Health Inspector to have work inspected before it is covered.
5. Inspections of septic tank installations must include witnessing of water tight testing. (N.J.A.C. 7:9A-8.2(m)).
6. Advanced Pretreatment Devices:
 - a) Advanced Pretreatment Devices are to be installed only by an Oakland-licensed septic installer, who has submitted a letter to the Health Department from the manufacturer of the particular ATU being installed that certifies that the installer has sufficient knowledge to install that particular manufacturer's proprietary technology (the alternate treatment unit). Example: Hoot, Jet, etc.
 - b) The Installation Permit must be issued to the Oakland-licensed Certified Installer.
 - c) An authorized installer shall be physically present at all times during installation of an advanced pretreatment device and either install or directly oversee the installation of the advanced pretreatment device.
 - d) The authorized installer must be present at the inspection of the vacuum test/water tightness of the pre-treatment device.
7. The septic contractor must notify the Oakland Shade Tree Commission if trees need to be removed other than those within the immediate area of the septic system as per the approved site plan. All trees removed require homeowner to obtain a permit from the Shade Tree Commission (applications are available at the Oakland DPW Bldg., 63 Oak Street); however trees within a 25' radius of the septic installation, alteration or repair are exempt from the fee requirement. Call 201-337-8104 X3022 prior to commencing with any work. If there is no answer, leave a message on the machine.

White – applicant copy Yellow – inspector copy Pink – office copy

OAKLAND BOARD OF HEALTH

One Municipal Plaza, Oakland, NJ 07436

Phone: 201-337-9254

FAX: 201-337-9212

e-mail: health@oakland-nj.org

SEPTIC SYSTEM PERMIT

PERMIT NO.: 138-24

DATE OF ISSUE: 8/9/24

PERMIT APPLICANT HOLLAND
ADDRESS: 21 BREAKNECK ROAD, OAKLAND, NJ 07436
PROPERTY OWNER [REDACTED]
ADDRESS 21 BREAKNECK ROAD, OAKLAND, NJ 07436
BLOCK/LOT: 3102/2

NEW CONSTRUCTION

Test Holes & Plan Review _____ \$450.00
Installation & Inspection _____ \$525.00

ALTERATION

Test Holes & Plan Review X \$350.00
Installation & Inspection _____ \$350.00

ATU (Alternate Treatment Unit) _____ \$100.00

REPAIR

Application Review & Inspection of:
Baffles, Pipes, Lids, Pump, Float _____ \$ 90.00
All Other _____ \$175.00

ABANDONMENT _____ \$ 90.00

TOTAL PAID: 350.00

APPLICATION REQUIREMENTS AS OF 3/16/2022:

1. All septic contractors working in Oakland must be licensed by the Oakland Board of Health.
2. All work shall be performed by the original septic installer licensee named herein and whose signature appears on the septic permit application. No work is to be delegated to a subcontractor or other entity.
3. The Oakland Board of Health shall be notified at least 2 business days (48 hours) in advance of the date work will commence. Applicant shall notify the Board of Health's Health Inspector immediately of any cancellations, delays or changes in scheduled work.
4. Septic contractor must contact Board of Health's Health Inspector to have work inspected before it is covered.
5. Inspections of septic tank installations must include witnessing of water tight testing. (N.J.A.C. 7:9A-8.2(m).
6. Advanced Pretreatment Devices:
 - a) Advanced Pretreatment Devices are to be installed only by an Oakland-licensed septic installer, who has submitted a letter to the Health Department from the manufacturer of the particular ATU being installed that certifies that the installer has sufficient knowledge to install that particular manufacturer's proprietary technology (the alternate treatment unit). Example: Hoot, Jet, etc.
 - b) The Installation Permit must be issued to the Oakland-licensed Certified Installer.
 - c) An authorized installer shall be physically present at all times during installation of an advanced pretreatment device and either install or directly oversee the installation of the advanced pretreatment device.
 - d) The authorized installer must be present at the inspection of the vacuum test/water tightness of the pre-treatment device.
7. The septic contractor must notify the Oakland Shade Tree Commission if trees need to be removed other than those within the immediate area of the septic system as per the approved site plan. All trees removed require homeowner to obtain a permit from the Shade Tree Commission (applications are available at the Oakland DPW Bldg., 63 Oak Street); however trees within a 25' radius of the septic installation, alteration or repair are exempt from the fee requirement. Call 201-337-8104 X3022 prior to commencing with any work. If there is no answer, leave a message on the machine.

BOROUGH OF OAKLAND

Municipal Building — Oakland, N. J.

PLUMBING PERMIT

No. 19/ 69

Date 6/21/69

Permit is granted in accordance with the plans and description that have been duly filed in this office, to:-

NAME

ADDRESS 807-10 1st Ave

OWNER [REDACTED] AT

BLOCK NO. 310/ LOT NO. 21 Break neck RD.

FOR INSTALLATION OF PLUMBING AND SEWER CONNECTION in accordance with Borough Ordinances and Regulations.

FILING FEE \$.....

PERMIT PLUS 1 FIXTURE FEE \$.....

ADDITIONAL FIXTURES FEE \$.....

SEWER CONNECTION FEE \$.....

TOTAL FEES \$.....

Oakland Board of Health

by [Signature] Secretary

**NO WORK SHALL BE COVERED
UNTIL IT HAS BEEN INSPECTED.**

Copy of permit to:- Plumbing Inspector, Building Inspector, Water Superintendent.
Copy to be retained by Secretary.

BOROUGH OF OAKLAND

Municipal Building — Oakland, N. J.

SEPTIC SYSTEM PERMIT

No. 21-89

Date March 7, 1989

Permit is granted in accordance with the plans and description that have been duly filed in this office, to:-

NAME Saddle River Septic

ADDRESS Midland Park

OWNER [REDACTED] AT 21 Resatment Road

BLOCK NO. 3104 LOT NO. 1A

TO LOCATE SEPTIC SYSTEM AREA AND
CONSTRUCT SEPTIC SYSTEM in accordance with Bor-
ough Ordinances and regulations.

APPLICATION NO.

LOCATION and INSPECTION.

FEE \$.....

SEPTIC CONSTRUCTION.

FEE \$.....

SEPTIC REPAIR

FEE \$...15.00

TOTAL FEES \$...15.00

Oakland Board of Health

by [Signature]
Secretary

Before work is started, YOU MUST get in touch
with the inspector.

**NO WORK SHALL BE COVERED
UNTIL IT HAS BEEN INSPECTED.**

Copy of permit to:
Superintendent,
Copy to be retained by Secretary.

Building Inspector, Water

