



F0008990639



CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: 22 Babston Dr.
2. Owner Name: Mr. & Mrs. Zappia Tel. ()
- Address 22 Babston Dr.
3. Principal Contractor: Home Owners Tel. ()
- Address _____
- Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
4. Architect or Engineer: _____ Tel. ()
- Address _____
5. Responsible Person in Charge of Work Mr. Zappia Tel. ()

II. PROPOSED WORK

A. TYPE OF WORK

1. ☐ Minor Work (Single Trade)
2. ☐ Small Job (\$5,000 and no Prior Approvals)
Complete only II.B., III and IV.A. and Page 2
3. ☐ New Building
4. ☒ Addition
5. ☐ Alteration
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☐ Other: _____

B. CATEGORIES OF WORK

Permit/Category	Estimated
1. ☒ Building/Structural	\$ <u>3,000</u>
2. ☐ Plumbing	_____
3. ☒ Electrical	_____
4. ☐ Fire Protection	_____
5. ☐ Other _____	_____
6. ☐ Other _____	_____
TOTAL COST \$ _____	

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

1. ☐ Elevators/Dumbwaiters
2. ☐ High-Pressure Boilers
3. ☐ Refrigeration Systems
4. ☐ Pressure Vessels
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Cross-connections/Backflow Preventors
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R-1) If new construction, enter no. of dwelling units _____
2. ☐ Multi-Family (R-2)
HMD Reg. No.: _____
3. ☐ Two Family (R-3b)
4. ☐ One-Family (R-3a) If other than new construction, enter no. of dwelling units: _____
- Before Construction: _____
- After Construction: _____
- Net Gain (or loss): _____

B. NON-RESIDENTIAL

5. ☐ Theatres with Stage (A-1-A)
6. ☐ Movie Theatres (A-1-B)
7. ☐ Night Clubs (A-2)
8. ☐ Restaurants, Libraries, Museums (A-3)
9. ☐ Religious Assembly (A-4)
10. ☐ Outdoor Assembly (A-5)
11. ☐ Business (B)
12. ☐ Educational (E)
13. ☐ Moderate-Hazard Factory (F-1)
14. ☐ Low-Hazard Factory (F-2)
15. ☐ High-Hazard (H)
16. ☐ Institutional Detention Center (I-1)
17. ☐ Hospitals, Infirmeries (I-2)
18. ☐ Group Homes (I-3)
19. ☐ Mercantile (M)
20. ☐ Moderate-Hazard Warehouse (S-1)
21. ☐ Low-Hazard Warehouse (S-2)
22. ☐ Temporary, Misc. (U)
23. ☐ Other _____

State Specific Use: _____

If Change in Use Group, Indicate Former: _____

00094_062849

4901



IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☐ Private (Individual, Corp., Non-profit Inst., Etc.)
2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

Principal	Secondary	Type
3. ☐	☐	Gas
4. ☐	☐	Oil
5. ☐	☐	Electric
6. ☐	☐	Solid (Wood, Coal, Etc.)
7. ☐	☐	Propane
8. ☐	☐	Solar
9. ☐	☐	Other _____

C. TYPE OF SEWAGE DISPOSAL

10. ☐ Public or Private Company
11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☐ Public or Private Company
13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories _____
15. Height of Structure _____ Ft.
16. Area—Largest Floor _____ Sq. Ft.
17. Bldg. Area—All Fls. _____ Sq. Ft.
18. Volume of Structure _____ Cu. Ft.
19. Total Land Area Disturbed _____ Sq. Ft.

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

- A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.
- B. ☐ I further certify that I will perform the work below.
 B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 46:3B-1 et. seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.
- D. ☐ I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE

DATE

II. AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

☐ Check if contractor.

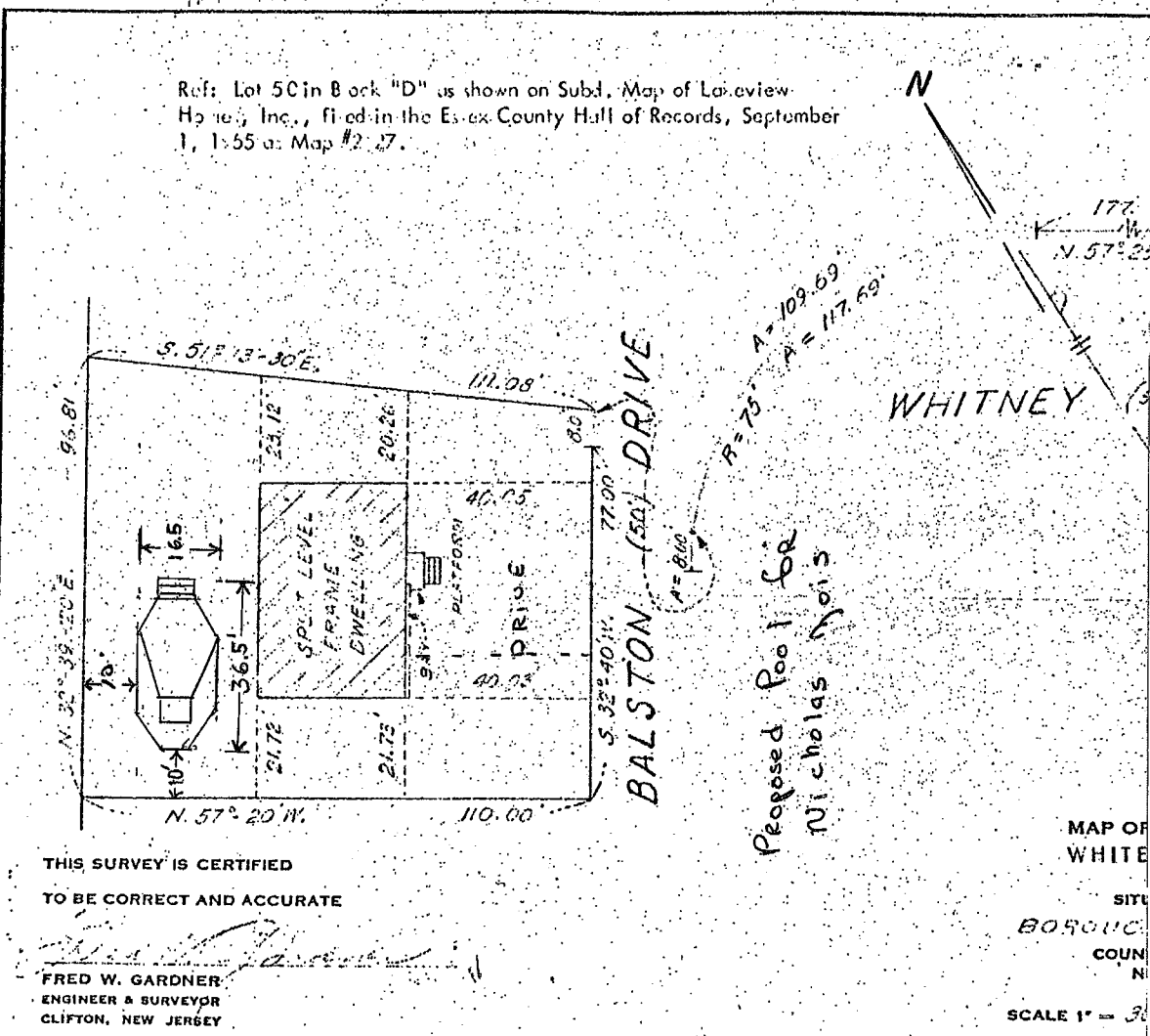
AGENT NAME _____ TEL. () _____

ADDRESS _____

SIGNATURE _____

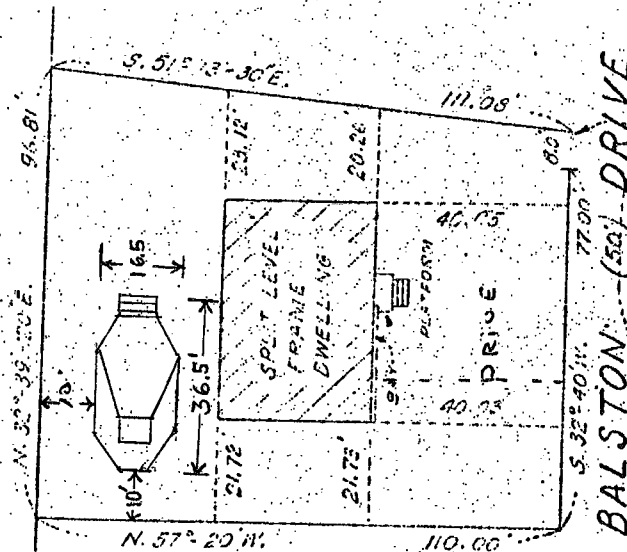
SCALE 1" = 30'

Nicholas W. Zeis
27 DALSTON DR.
VERONA, N.J.



VERONA, N.J.

Ref: Lot 50 in Block "D" is shown on Subd. Map of Lawrence
Housing, Inc., filed in the Essex County Hall of Records, September
1, 1955 as Map #2-27.



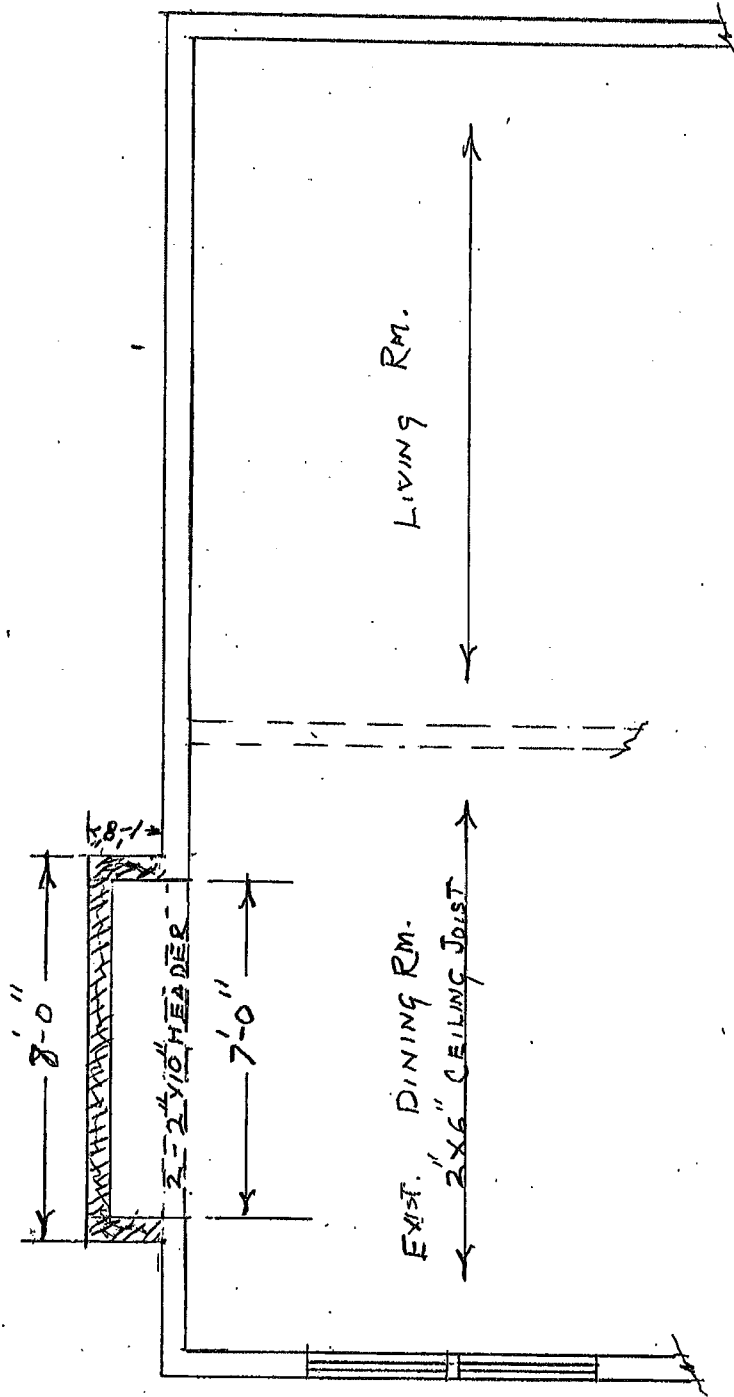
Proposed Pool for
Nicholas No. 3

FRED W. GARDNER
ENGINEER & SURVEYOR
CLIFTON, NEW JERSEY

MAP
WHI

BOYD
CO.

SCALE 1" = 200'



FLOOR PLAN SCALE 1/4" = 1'-0"

NEW ALCOVE IN DINING RM.

NICHOLAS ZOIS

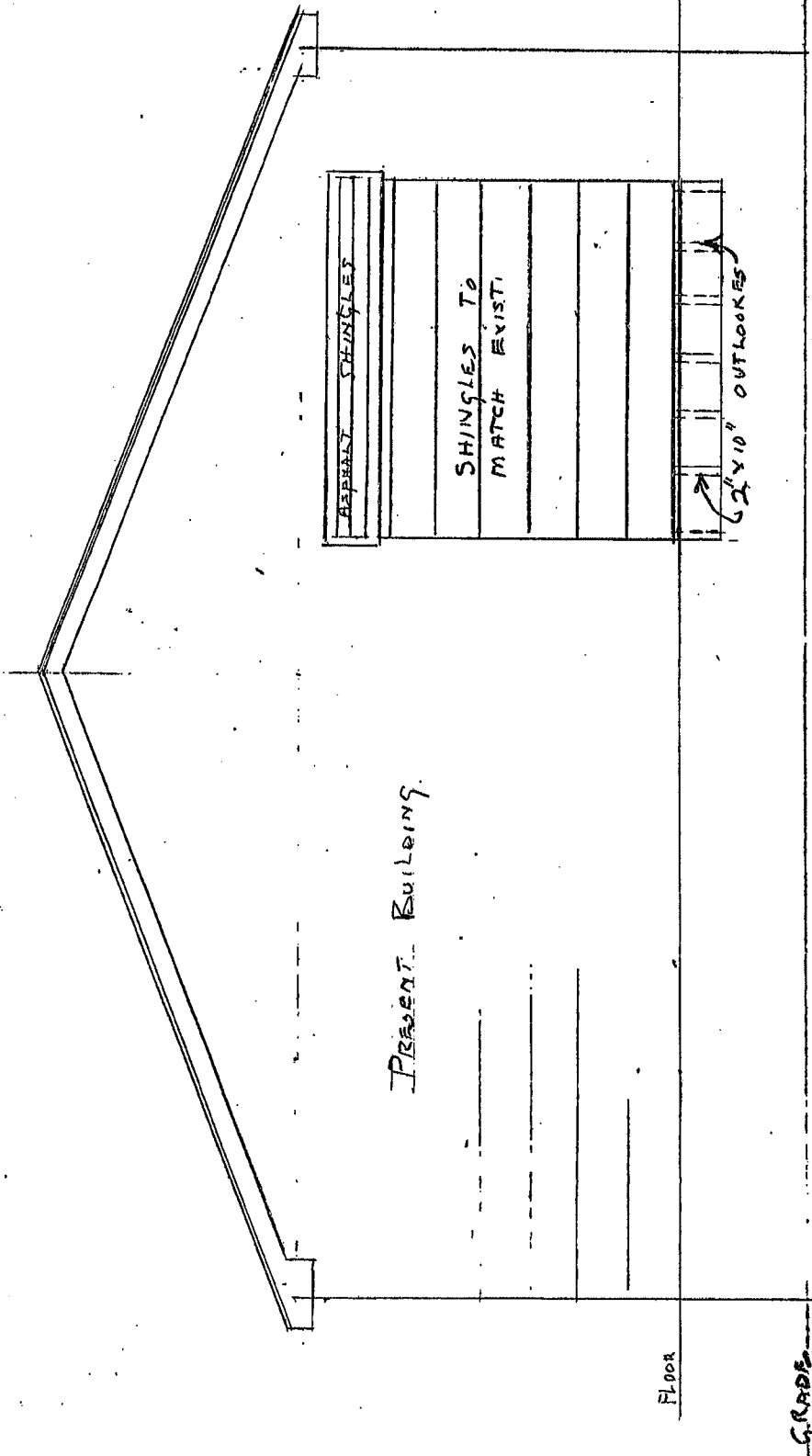
27 BALSON DRIVE,

VERONA, N.J.

NEW WORK

EXIST. WORK

EXIST. HEADERS



PRESENT BUILDING.

SIDE ELEVATION SHOWING NEW ALCOVE.

12192 - May 2 1992

N 2015

27 ABRAHAM 1215.

38-D-50



ELECTRICAL SUBCODE TECHNICAL SECTION



PERMIT NO. 523
DATE ISSUED 3/1/85
REVISION DATE _____
Block _____ Lot _____
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner NICK Zois
Address 21 BALSTON DR
VERONA
Tel. () _____
Work Site Address 21 BALSTON DR
VERONA

Contractor CRICKET ELECTRIC
Address 11 DARLWY AVE.
BLOOMFIELD
Tel. () 338-8738
Lic.No./Bus. Permit _____
Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Richard M. Hawthorn
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee	Fee
<u>3</u>	Switching Outlets	\$		H.V.A.C. Equipment	\$	COLUMN 1 \$
<u>2</u>	Lighting Outlets			Switching Devices		COLUMN 2 \$
<u>4</u>	Receptacle Outlets			Transformers		SUBTOTAL \$
	Range/Oven			Motors/Generators/Compressors (state no. and size of each)		Minimum Electrical Fee (if applicable) \$
	Dryer, Electric					Total Electrical Fee (Greater of Minimum or Subtotal) \$ <u>22.00</u>
	Water Heater, Electric					
<u>2</u>	Heating, Electric			Other		
<u>2</u>	Switches			Other		
	Lighting Fixtures			Other		
	Receptacles			Other		
	Bonding, Pool/Vault			Other		
	Service/Feeders					
COLUMN 1 \$			COLUMN 2 \$			

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed
Service: _____ Amps _____ Phase _____ System Type
_____ Wire _____ Volts _____ Wiring Method
Total No. of Meters: _____
Estimated Cost of Electrical Work: \$ _____

D. COMMENTS

☐ Partial Releases

☐ Prototype Processing



CONSTRUCTION PERMIT

PERMIT NO. 523DATE ISSUED 2/28/85

Block _____ Lot _____

Subdivision _____

A. IDENTIFICATION

Owner Michael J. Zain Agent James DwyerAddress 278 Gallop Dr. Address _____

Tel. (____) _____ Tel. (____) _____

Work Site Address _____ Lic. No. _____

Federal Emp. No. _____

PAYMENTS

Permit Fee \$ 30.00

Fees Remitted \$ _____

☒ Check No. _____☒ Cash _____☐ Other _____Collected By: P. Dwyer

Date: _____

is hereby granted permission
to perform the following work:

- ☒ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER _____

Description of work:

6x26 addition above
garage

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: \$ 3000

P. Dwyer
CONSTRUCTION OFFICIAL



BUILDING SUBCODE TECHNICAL SECTION



PERMIT NO. 523
DATE ISSUED 2/28/85
REVISION DATE _____

Block _____ Lot _____
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner Mr & Mrs Zois

Contractor Home Owner

Address 27 Salston Dr

Address _____

Tel. () _____

Tel. () _____

Work Site Address _____

Lic. No. _____

Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

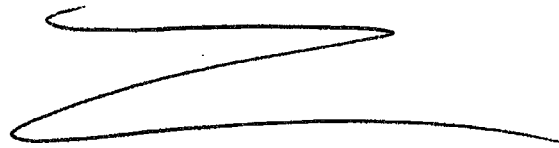
Mr & Mrs Zois
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

6 x 26 addition
above garage



☐ See Plans

TYPE OF WORK:

- ☐ New Building
- ☒ Addition
- ☐ Alteration/Renovation
 - ☐ Roofing
 - ☐ Siding
 - ☐ Other _____
- ☐ Demolition
- ☐ Miscellaneous
 - ☐ Fence
 - ☐ Sign
 - ☐ Pool
 - ☐ Elevator
 - ☐ Other _____

Fee Basis

Fee

\$ 30.00

SUBTOTAL

\$ _____

Minimum Building Fee (if applicable)

\$ _____

Total Building Fee
(Greater of Minimum or Subtotal)

\$ 30.00

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories _____

Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft.

Volume of Structure _____ Cu. Ft.

Area—Largest Floor _____ Sq. Ft.

Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: \$3,000

D. COMMENTS

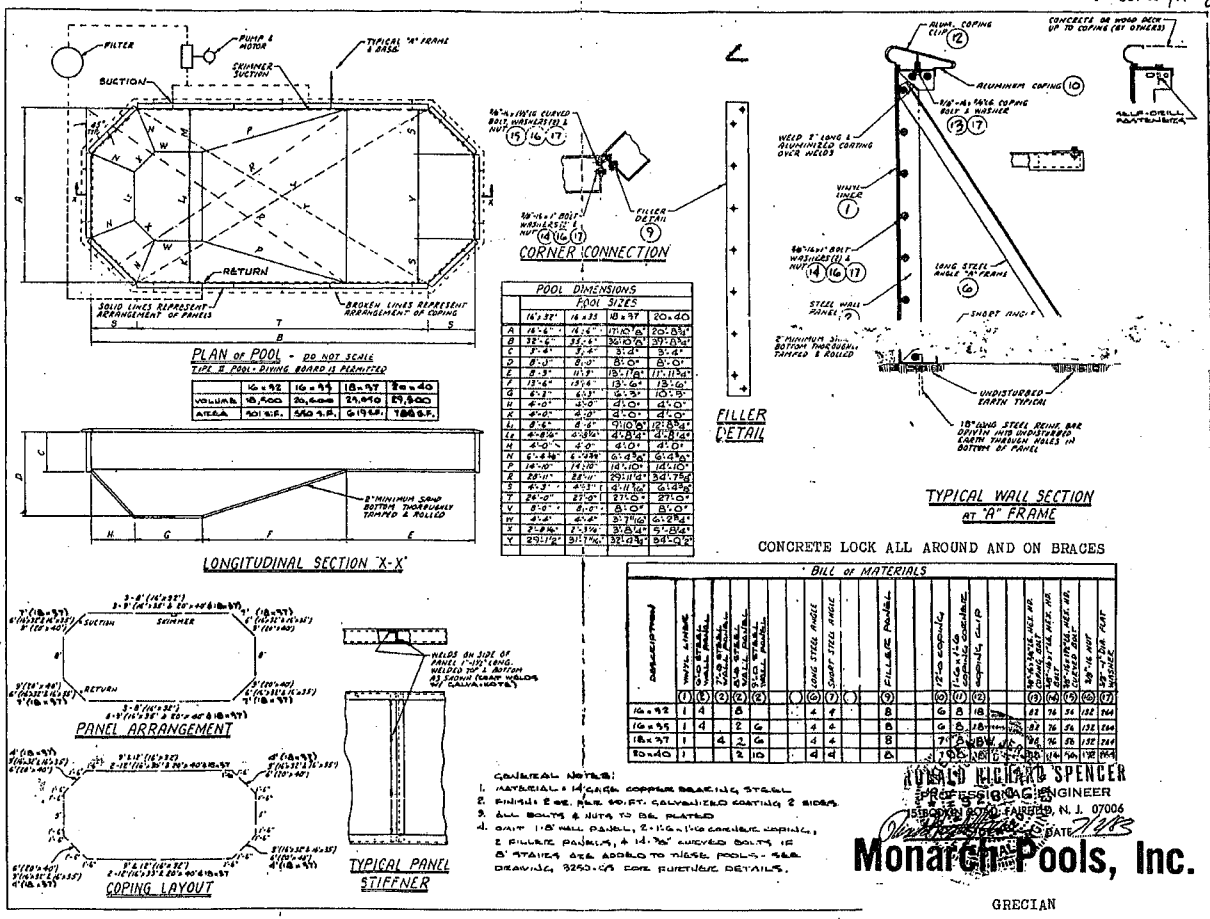
☐ Partial Releases ☐ Prototype Processing

[illegible]

JOB SUMMARY																																																										
PLAN REVIEW	INSPECTIONS																																																									
☐ No Plans Required ☐ All ☐ Footing/Foundation ☐ Frame ☐ Architectural ☐ Other _____ Date Initials 	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%; padding: 5px;">Type</th> <th colspan="3" style="width: 50%; padding: 5px;">Failure Dates</th> <th style="width: 30%; padding: 5px;">Approval Date</th> </tr> </thead> <tbody> <tr><td>☐ Footing/Foundation</td><td></td><td></td><td></td><td></td></tr> <tr><td>☐ Slab</td><td></td><td></td><td></td><td></td></tr> <tr><td>☐ Frame</td><td></td><td></td><td></td><td></td></tr> <tr><td>☐ Architectural</td><td></td><td></td><td></td><td></td></tr> <tr><td>☐ Insulation</td><td></td><td></td><td></td><td></td></tr> <tr><td>☐ Finishes</td><td></td><td></td><td></td><td></td></tr> <tr><td>☐ Energy</td><td></td><td></td><td></td><td></td></tr> <tr><td>☐ Mechanical</td><td></td><td></td><td></td><td></td></tr> <tr><td>☐ TCO</td><td></td><td></td><td></td><td></td></tr> <tr><td>☐ Other _____</td><td></td><td></td><td></td><td></td></tr> </tbody> </table>			Type	Failure Dates			Approval Date	☐ Footing/Foundation					☐ Slab					☐ Frame					☐ Architectural					☐ Insulation					☐ Finishes					☐ Energy					☐ Mechanical					☐ TCO					☐ Other _____				
Type	Failure Dates			Approval Date																																																						
☐ Footing/Foundation																																																										
☐ Slab																																																										
☐ Frame																																																										
☐ Architectural																																																										
☐ Insulation																																																										
☐ Finishes																																																										
☐ Energy																																																										
☐ Mechanical																																																										
☐ TCO																																																										
☐ Other _____																																																										
INSPECTIONS FINAL																																																										
☐ CO ☐ CCO ☐ CA Date: _____ Inspected By: _____																																																										

Survey
+
Site plan

27 Brighton Rd
Verona, N.J. 07066
19,000 gals



BLOCK NO.

98

LOT NO.

42

SUBDIVISION

PERMIT NO.

523 B

Page 3

PRIOR APPROVALS CHECKLIST

APPROVALS	LOCAL		COUNTY		REGIONAL		STATE		COMMENTS				
	Prelim. Approval	Final Approval	Prelim. Approval	Final Approval	Prelim. Approval	Final Approval	Prelim. Approval	Final Approval					
	Init.	Date	Init.	Date	Init.	Date	Init.	Date		Init.	Date	Init.	Date
☐ Planning Board													
☐ Zoning Board													
☐ Sewer Authority													
☐ Water Authority													
☐ Fire Department													
☐ Police Department													
☐ Health Department													
☐ Soil Conservation													
☐ N.J. Dept. of Community Affairs													
☐ N.J. Dept. of Transportation													
☐ N.J. Dept. of Environmental Protection													
☐ Other: _____													

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

EDITION OF CODE ☐ One and Two Family Dwellings _____ ☐ Building _____ ☐ Electrical _____ ☐ Plumbing _____ ☐ Fire Protection _____	EDITION OF CODE ☐ Mechanical _____ ☐ Energy _____ ☐ Barrier Free _____ ☐ Other _____	☐ Flood Hazard _____ ☐ As Built Elevation Certification _____ ☐ Other _____
--	---	--

PERMIT CONTROL

Page 4

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

- ☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN - FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date Receiver	Approval Date	Reviewer	Comments
☐	BUILDING				
	Footings/Foundations				
	Framing				
	Architectural				
	Other _____				
☐	PLUMBING				
☐	ELECTRICAL				
☐	FIRE PROTECTION				
☐	OTHER _____				

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
_____	ALL CONSTRUCTION			
_____	BUILDING			
_____	Footings/Foundations			
_____	Framing			
_____	Architectural			
_____	Other _____			
_____	PLUMBING			
_____	ELECTRICAL			
_____	FIRE PROTECTION			
_____	OTHER _____			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☐ Temporary Certificate of Occupancy	_____
Date Expired _____	
☐ Temporary Certificate of Occupancy	_____
Date Expired _____	
☐ Certificate of Occupancy	_____
No. _____	
☐ Certificate of Continued Occupancy	_____
No. _____	
☐ Certificate of Approval	_____
No. _____	
☐ None	

IV. ON-GOING INSPECTIONS

On-going Inspections Required (See Page 1, II.D.)	Date Posted to Log and Tickler
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$ 30.00
PLUMBING	
ELECTRICAL	22.00
FIRE PROTECTION	
OTHER	
SUBTOTAL	\$.
- LESS: 20% of subtotal (when plan review performed by state agency).	
	(.)
D.C.A. TRAINING FEE .0006 x _____	= .
CERTIFICATE OF OCCUPANCY	
OTHER	
OTHER	
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ 30.00
DATE _____ Collected By _____	

3/1/85

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY		.
OTHER		.
OTHER		.
- LESS: Refunds		(.)
TOTAL COLLECTED AFTER PERMIT ISSUED		\$.

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	\$.
COLLECTED AFTER PERMIT (VB)	
TOTAL	\$.

PERMIT NO. 1993-16



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

1. Proposed Work-site at: 21 WALSTON DR.

2. Name of Owner in Fee: NICHOLAS W ZOIS Tel. (201) 339-7433

Address 27 WALSTON DR. VERONA, N.J.
street municipality zip code

3. Ownership in Fee: Public _____ Private ☒

4. Principal Contractor: SAME Tel. (____) _____

Address _____

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Federal Emp. No. _____ Social Security No. _____

5. Architect or Engineer _____ Tel. (____) _____

Address _____

6. Responsible Person in Charge of Work NICHOLAS W ZOIS Tel. (____) _____

		Update	Update
1. Building	\$ 45.00		
2. Electrical		51	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	4.00		
10. Subtotal	\$		
11. Cert. of Occupancy	25.00		
12. Other			
13. TOTAL	\$ 74.00	51	

1. Number of Stories _____ ft.
2. Height of Structure _____ ft.
3. Area—Largest Floor _____ sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____ sq. ft.
 no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

1. ☒ Minor work
(single trade)
2. ☐ Small Job (\$5,000
and no prior approvals)
3. ☐ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☐ Fire Protection
7. ☐ Plumbing
8. ☐ Electrical
9. ☐ Elevator Devices
10. ☐ Asbestos Abatement
11. ☐ Demolition

TOTAL COSTS

Est. Cost
5700.

[illegible]

1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks

2. ☐ High Pressure Boilers

3. ☐ Pressure Vessels

4. ☐ Refrigeration Systems

5. ☐ Cross-Connections/Backflow
Preventers

6. ☐ Hazardous Uses/Places of Assembly

7. ☐ Sprinklers

8. ☐ Smoke Control Systems in Open Wells

9. ☐ Underground Storage Tanks

A. RESIDENTIAL

- ☐ Hotels (R-1)
- ☐ Multi-Family (R-2)
- ☐ Two-Family (R-3) BOCA
- ☐ Two-Family (R-4) CABO
- ☐ One-Family (R-3) BOCA
- ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction _____
After Construction _____
Net gain or loss _____

1. State Specific Use:

2. Use Group:

3. Change in Use Group, Indicate Former:

Signature _____ Date _____

PERMIT NO.

708

APPLICATION FOR CONSTRUCTION PERMIT

PUBLIC SERVICE NO.

TOWNSHIP OF VERONA 21 GROVE AVENUE TELEPHONE 239-3220

MAP 38 BLOCK D LOT 500 ZONE

Location

27 BALSTON DRIVE

2. Owner

NICHOLAS & DIANE ZOIS

Address

27 BALSTON DR. VERONA

Telephone

939-5884

3. General Contractor

MINARCH POOLS

Address

87-46 FAIRFIELD, N.J.

Telephone

227-5900

4. Electrical Contractor

GARDEN STATE ELEC.

License

0872

Address

8 PARIS AVE. POMPTON PLAIN

Telephone

Plumbing Contractor

License

Address

Telephone

Architect

License

Address

Telephone

Engineer

License

Address

Telephone

Application is made for a permit to perform the following work in accordance with this detailed statement and the plans and specifications filed herewith. I stipulate that all work shall be performed, in accordance with the requirements of all codes, laws, rules, regulations, and ordinances affecting this application and the plans and specifications, and that the statement of cost is correct and further that the owner authorizes this application.

Signature of Application

Diane M. Zois

Date

7/25/83

Application/Work Type Check all applicable types work to be done.

☐ New Construction
☐ Addition
☐ Alteration
☐ Conversion
☐ Repair
☐ Demolition

☐ Reside
☐ Re-roof
☐ Number of Roofs
Presently on Structure

☐ Other

Total Area Per Floor	sq. ft.	Total Number of Stories	Total Floor Area	sq. ft.	Building Height	ft.	Size of Tract	sq. ft.
Total Number of Dwelling Units		Total Number of Rooms		Total Number of Occupants		Total Volume		

Detail statement to cover necessary details and construction costs.

ERECTING INGROUND POOL 16x36 AS
INDICATED ON DIAGRAM
17,000 gallon

\$

7 Write in Number of each Fixture/Service to be installed:

PLUMBING

Water Closet/Commode
Urinals
Laboratories
Sinks
Tubs &/or Showers
Water Heaters
Hot Water Piping

Sewer Ralay
New Sewer
Sewer Ejectors
Oil Separators
Grease Traps
Gas Appliances
Gas Piping

Other (Specify)

Total Number of Fixture
Estimated Cost
Plumbing Work \$
Plumbing
Permit Fees \$

6 Check type sign to be installed.

SIGNS

Flat Sign
Projecting Sign
Pole Sign
Ground Mounted Sign
Building Surface Mounted Sign
Roof Mounted Sign

Sign
Material
Sign
Size ft. X ft.
Sign
Area sq. ft.

Other (Specify)

Sign.
Permit Fee \$

Site Plan Approval

Municipal
County

Date

Date

Approved by the Planning Board

Date

Approved by the Board of Adjustment

Date

Approved by the Construction Official

Date

Soil Erosion Approval

Date

FEES COLLECTED

Building Permit #	\$	27.00
Plumbing Permit #	\$	
Electric Permit #	\$	17.00
State (Cu ft x .0006)	\$	
Certificate of Occupancy #	\$	15.00
Penalties as per sec. 5:23-2.9 (c) 2	\$	

TOTAL FEES COLLECTED

\$

59.00

Monarch Pools, Inc.

665 Route 46
Fairfield, New Jersey 07006
(201) 227-5900

EXCAVATION AND INSTALLATION AGREEMENT

This agreement dated 7-22-83 is an addition to Contract dated 7-22-83
between Monarch Pools, Inc. and NICK & Diane ZOIS

Any extra charges (payable on day work is done) will be as follows:

Above ground tree trunks over 10" diameter removed from ground \$ 25.00 each

Buried tree stumps, boulders, rocks, ledge, etc. that can be easily removed by backhoe but require additional time and possible damage to machine \$ 35.00 hour

Haulaway of Tree Stumps (except those too big to be put on truck) \$ 15.00 - 25.00 each
(No charge if stumps can be buried on property)

Dirt haulaway off property (customer will assist in finding place to dump dirt) \$ 2.00 yard

There will be an additional charge, if underground water is encountered. Price includes, as required, labor, gravel, poly pipe, pumps, check valve and strainer. Additional charge will be \$ 200.00 for first foot of water measured from bottom of excavation and \$ 150.00 for each additional foot of water.

Customer shall be responsible for truck and equipment access to pool site and for rerouting or removal of any and all above ground or underground obstructions. Common obstructions are fences and shrubs; active or inactive septic systems; drainage, gas, and electric lines; boulders, ledge rock, and shale. Customer will get building permit, is responsible for proper location and height of pool and for electrical work. Customer is responsible for all water needed and for additional fill if needed.

It is understood that backfilling includes rough grading by either backhoe or front-end loader (Monarch's discretion). Customer must backfill any area that cannot be reached by these machines. Keep this in mind when locating pool on property.

Monarch cannot be responsible for any damage done to driveway, lawn areas, shrubs, sheds, trees, fences, patios; sidewalks, curbs, buildings, etc. in the process of excavating, grading, delivery, pouring of concrete lock, and installation.

Contract price includes provision for a one day backhoe excavation.

\$550.00

If hole cannot be dug due to underground or above ground problems, customer agrees to pay \$300.00 to cover cost of backhoe, operator and crew chief.

Monarch recommends a vermiculite-cement bottom as being superior to a sand bottom. The vermiculite-cement bottom becomes mandatory in the event any of the following are encountered: underground water, shale, clay buried tree stumps, boulders, or other debris, excessive amount of rocks, etc. Normal additional cost for the vermiculite-cement bottom will be: 16' x 32' and 16½' x 32½' \$465.00; 16½' x 35½' \$475.00, 18' x 36' \$575.00, 20' x 40' and 19' x 9' \$675.00.

[Signature]

Monarch Pools, Inc.

[Signature]

Customer

IN THE MATTER OF THE APPLICATION
OF
NICHOLAS ZOIS

BOARD OF ADJUSTMENT
BOROUGH OF VERONA
ESSEX COUNTY, N.J.

DETERMINATION

WHEREAS, THE APPLICANT, Nicholas Zois, has applied to the Board of Adjustment of the Borough of Verona, Essex County, New Jersey, for a variance to construct underground swimming pool partly in the side and rear yard set back at 27 Balston Drive, Verona, New Jersey, said premises also known as Map 38, Block D, Lot 50.

WHEREAS, the Board after carefully considering the evidence presented by the Applicant at public hearings has made the following factual findings.

1. The premises are located in a R-2 Zone.
2. The Building Inspector properly refused to grant the Applicant a permit.
3. The Applicant intends to construct proposed underground swimming pool partly in the side and rear yard set back.
4. The Applicant will suffer undue and unnecessary hardship if the provisions of the Zoning Ordinance are literally enforced.
5. The proposed pool will enhance the property in the area and will increase their desirability and will in no way be detrimental to the public good.

AND WHEREAS BASED on said findings the Board has concluded that said relief may be granted without substantial detriment to the public good and without substantially impairing the intent and purpose of the Zone Plan and Zoning Ordinance of Verona.

NOW, THEREFORE, BE IT RESOLVED that the variance sought be granted subject to the following conditions.

1. That the application for a building permit be made within six months from the date of the granting of this variance.
2. That construction of the proposed structure begin within one year after granting of said variance.
3. That the Applicant shall comply with all applicable building and fire prevention codes and all ordinances with the exception of the variance herein granted, to the satisfaction of the Building Inspector.

VOTE:

AYES

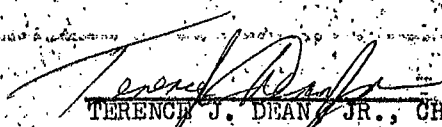
NAYS

ABSTENTION

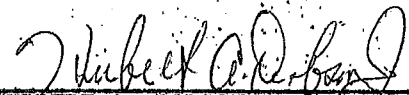
Joseph F. Riesenman
Anson M. Fischer
Walter G. Klefer
Philip A. Blanche
Terence J. Dean

none

none


TERENCE J. DEAN, JR., CHAIRMAN

The foregoing is a true copy of a determination adopted by the Board of Adjustment of the Borough of Verona at its meeting on the 12th day of October 1972.


HERBERT A. DOBSON, JR., SECRETARY

THE SECRETARY OF THE
NAVY
WASHINGTON, D. C.

NAVY DEPARTMENT
WASHINGTON, D. C.

MEMORANDUM

TO: THE SECRETARY OF THE NAVY
FROM: [illegible]
SUBJECT: [illegible]

[illegible text]

[illegible text]

[illegible text]

[illegible text]

[illegible text]

[illegible text]

[illegible text]

[illegible text]

Application for Erection or Alteration of Building

Application is hereby made to ^{alter}~~erect~~ ERECT building as per subjoined detailed statement of Specification for ^{alteration}~~erection~~ of Buildings, and I herewith submit plans and drawings of such proposed building, and I do hereby agree that the provisions of the building law will be complied with, whether the same are specified herein or not.

(Sign here)

Nicholas W. ZoisVerona, N. J., 10-22 1925

1. State how many buildings to be erected 1- Room
2. How occupied; if for dwelling, state number of families ONE
3. Give name of street or avenue and number thereof 27 BALSTON DR. VERONA N.J
4. Give map 29, block D and lot No. 50 Also fill in diagram on back.
5. Give size of lot, front _____; rear _____; depth _____
6. Give size of building, front 27'-10", rear 27'-10", depth 13' No. of stories in height 1
7. Give height of building from grade to highest point of roof beams 15'-0"
8. State cost or value of each building \$8,000.00
9. Depth of foundation wall, top of cellar floor to nearest tier of joists or construction 3'-0"
10. Thickness of foundation walls 1' Kind of mortar used _____
11. Of what material will foundation wall be built? CONG. Depth from surface of ground? 3'-6"
12. Give thickness and material of footing 8" Concrete Width of same 24"
13. Will chimneys be lined with flue lining? YES State size 8" X 12"
14. Will chimneys be capped as required? YES Does yard width comply with zoning ordinance? YES
15. Give material (_____) and thickness of outer walls in inches: Basement _____; 1st story _____; 2d story _____; 3d story _____; 4th story _____; 5th story _____
16. Give material (_____) and thickness of party walls in inches: Basement _____; 1st story _____; 2d story _____; 3d story _____; 4th story _____; 5th story _____
17. Give height (_____), thickness (_____) and material (_____) of parapet walls.
18. Will through partitions be fire-stopped? _____
19. Give size of sills (____ X ____), corner posts (____ X ____), studding (____ X ____), ties (____ X ____), plates (____ X ____), headers (____ X ____), trimmers (____ X ____).
20. Will headers be hung in metal stirrups? _____
21. Will all headers and trimmers be framed away from chimneys and fireplaces? _____
22. State methods of enclosing FRAME
23. Will roof be flat, peak or mansard? PEAK material of roofing? ASPHALT
24. State material of floor beams FIR; of roof beams _____
25. Give sizes of beams or joists: 1st floor 2X10, 2d floor _____; 3d floor _____; ceiling joists 2X8; roof 2X8
26. State distance on centers: 1st floor 16", 2d floor _____; 3d floor _____; ceiling joists 16"; roof 16"
27. Will joists be bridged every 8 feet? _____ Anchored every 8 feet? _____
28. If floors or walls are to be supported by columns or girders, give particulars _____

29. Detailed statement to cover necessary details _____

BULD ADDITION ON REAR 27-10 X 13 FOR FAMILY ROOMWITH FIRE PLACE - 378 SQ. FT.

30. Certificate for occupancy will be required on completion of building.

Remarks: _____

Owner N. ZOISAddress 27 BALSTON DR.Architect A. CHURCHAddress ORANGE, N.J.Builder SELF

Address _____

(To be filed in duplicate)

CARD MADE

If a Wall or Part of a Wall Already Built is to be Used, Fill in the Following:

The undersigned gives notice that.....intends to use the.....wall of building
.....
.....as a party wall in the erection of the building hereinbefore described,
and respectfully requests that the same be examined and a permit granted therefor. The foundation
wall built of.....inches thick;.....feet below curb; the upper
wall built of.....inches thick;.....feet deep;
feet in height.

(Sign here).....

Plan No. 13778

**Application for
Erection or Alteration**

**of
BUILDINGS**

VERONA, N. J.

Submitted Oct 23, 1925

LOCATION

27 Balston Dr.

Owner N. Zois

Architect A. Chuach

Builder Self.

Permit No. 13778 Fee \$ 26.00

Cost \$ 5000.00

Granted Oct. 25, 1925

Robert Cord
Inspector of Buildings

Show location of lot, buildings, set-backs and names of streets.

Application for Erection or Alteration of Building

Application is hereby made to ~~erect~~ Pool building as per subjoined detailed statement of Specification for ~~alteration~~ erection of Buildings, and I herewith submit plans and drawings of such proposed building, and X do hereby agree that the provisions of the building law will be complied with, whether the same are specified herein or not.

(Sign here)

Arthur T. JewellVerona, N. J., Oct 16 1992

1. State how many buildings to be erected 1 Pool
2. How occupied; if for dwelling, state number of families.
3. Give name of street or avenue and number thereof 27 BALSTON DR
4. Give map 38, block D and lot No. 50 Also fill in diagram on back.
5. Give size of lot, front; rear; depth.
6. Give size of building, front; rear; depth. No. of stories in height.
7. Give height of building from grade to highest point of roof beams.
- X 8. State cost or value of each building \$6,000.00
9. Depth of foundation wall, top of cellar floor to nearest tier of joists or construction.
10. Thickness of foundation walls. Kind of mortar used.
11. Of what material will foundation wall be built? Depth from surface of ground?
12. Give thickness and material of footing. Width of same.
13. Will chimneys be lined with flue lining? State size X.
14. Will chimneys be capped as required? Does yard width comply with zoning ordinance?
15. Give material () and thickness of outer walls in inches: Basement; 1st story; 2d story; 3d story; 4th story; 5th story.
16. Give material () and thickness of party walls in inches: Basement; 1st story; 2d story; 3d story; 4th story; 5th story.
17. Give height (), thickness () and material () of parapet walls.
18. Will through partitions be fire-stopped?
19. Give size of sills (X), corner posts (X), studding (X), ties (X), plates (X), headers (X), trimmers (X).
20. Will headers be hung in metal stirrups?
21. Will all headers and trimmers be framed away from chimneys and fireplaces?
22. State methods of enclosing.
23. Will roof be flat, peak or mansard? material of roofing?
24. State material of floor beams. of roof beams.
25. Give sizes of beams or joists: 1st floor; 2d floor; 3d floor; ceiling joists; roof.
26. State distance on centers: 1st floor; 2d floor; 3d floor; ceiling joists; roof.
27. Will joists be bridged every 8 feet? Anchored every 8 feet?
28. If floors or walls are to be supported by columns or girders, give particulars.

29. Detailed statement to cover necessary details.

INGROUND STEEL REINFORCED CONCRETE
X SWIMMING POOL 20 X 40 25,500 GALS.

PLAN ON FILE

30. Certificate for occupancy will be required on completion of building.

Remarks:

Owner MR. Nicholas MoisAddress 27 Balston Dr. VeronaArchitect William ErwinAddress Levittown PaBuilder, SYLVAN POOLSAddress Redschool House Rd

(To be filed in duplicate)

Spring Valley, N.Y.

CARD MADE

If a Wall or Part of a Wall Already Built is to be Used, Fill in the Following:

The undersigned gives notice that _____ intends to use the _____ wall of building _____ as a party wall in the erection of the building hereinbefore described, and respectfully requests that the same be examined and a permit granted therefor. The foundation wall _____ built of _____ inches thick; _____ feet below curb; the upper wall _____ built of _____ inches thick; _____ feet deep; _____ feet in height.

(Sign here) _____

Plan No. 12478

**Application for
Erection or Alteration**

of
BUILDINGS

VERONA, N. J.

Submitted Oct. 16, 19 72

LOCATION

27 Balston Dr.

Owner

N. Zois

Architect

—

Builder

Sylvan Bole

Permit No. 12478 Fee \$ 30.⁰⁰

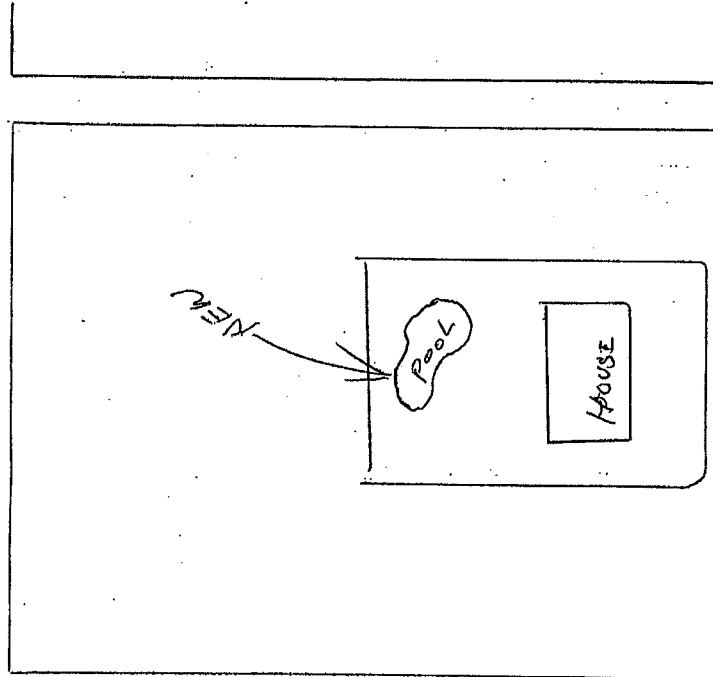
Cost \$ 6,000.⁰⁰

Granted Oct. 16, 19 72

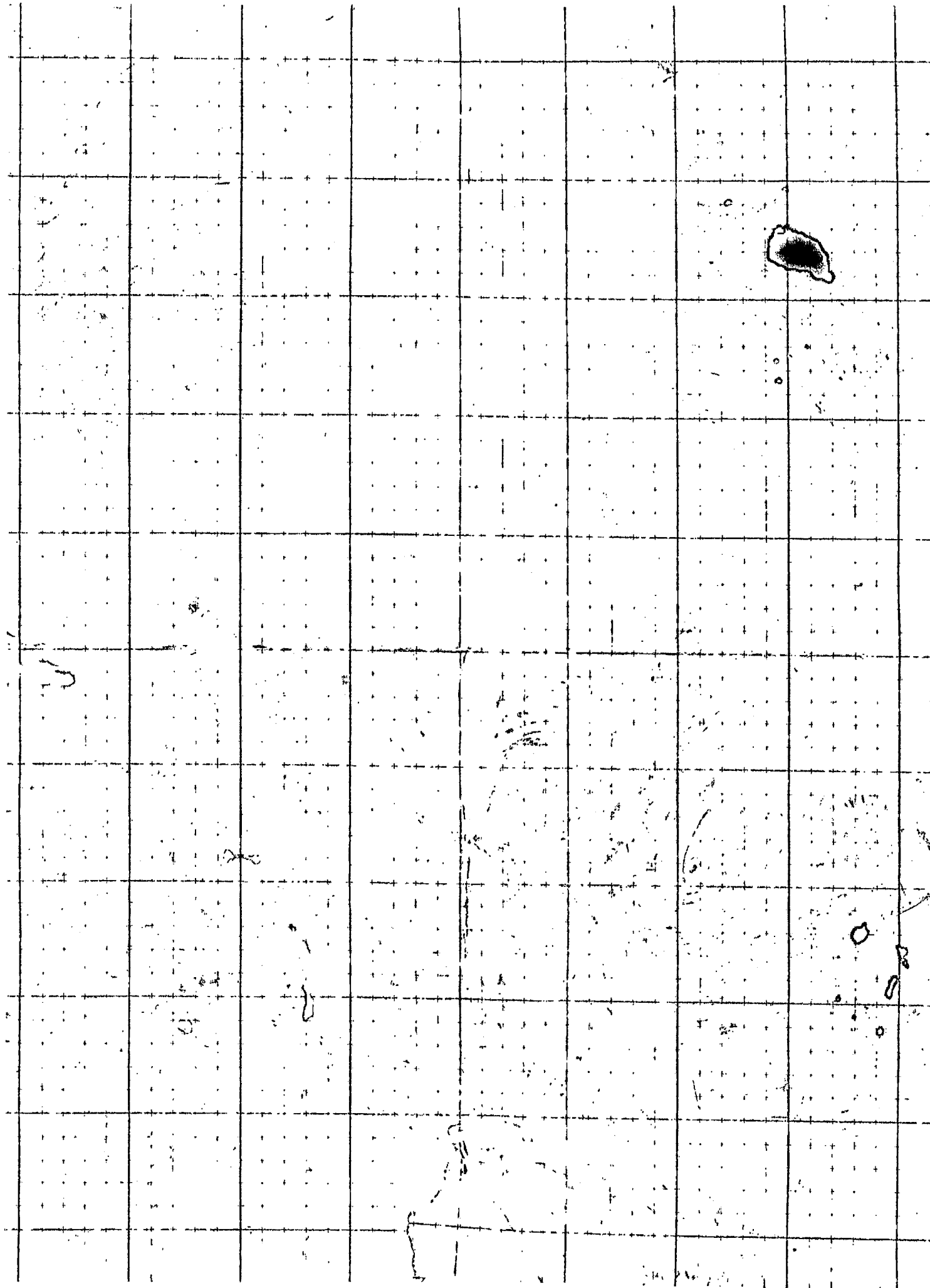
Robert Coad

Inspector of Buildings

Show location of lot, buildings, set-backs and names of streets.



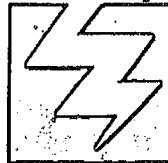
27 BALSTON DR.



Joe 3-6-85
MAR 5 1985



ELECTRICAL SUBCODE TECHNICAL SECTION



523
PERMIT NO. 523/85
DATE ISSUED 3/11/85
REVISION DATE
Block 98 Lot 42
Subdivision

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner NICK ZONE
Address 21 BALSTON DR
VERONA
Tel. ()
Work Site Address 21 BALSTON DR.
VERONA

Contractor CRICKET ELECTRIC
Address 11 DARLING AVE.
Bloomfield
Tel. () 338-8738
Lic.No./Bus. Permit.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Jobs Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Joe Cardelli
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee	Fee
2	Switching Outlets			H.V.A.C. Equipment		
2	Lighting Outlets			Switching Devices		
42	Receptacle Outlets			Transformers		
	Range/Oven			Motors/Generators/Compressors (state no. and size of each)		
	Dryer, Electric					
	Water Heater, Electric					
	Heating, Electric					
2	Switches			Other		
2	Lighting Fixtures			Other		
	Receptacles			Other		
	Bonding, Pool/Vault			Other		
	Service/Feeders			Other		

COLUMN 1

COLUMN 2

674-8738 Joe Cardelli

COLUMN 1
COLUMN 2
SUBTOTAL \$
Minimum Electrical Fee (If applicable) \$
Total Electrical Fee (Greater of Minimum or Subtotal) \$22.00
round up to 22.00

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed
Service: _____ Amps _____ Phase _____ System Type
_____ Wire _____ Volts _____ Wiring Method
Total No. of Meters: _____

Estimated Cost of Electrical Work: \$ _____

D. COMMENTS

3-8-85 - Final - J.C.

☐ Partial Releases

☐ Prototype Processing

JOB CONDITION/COMMENTS

100

JOB SUMMARY																																		
☐ No Plans Required ☐ Plan Review Approved Date: _____ Approved By: _____	INSPECTIONS <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: center; border-bottom: 1px solid black;">Type</th> <th colspan="3" style="text-align: center; border-bottom: 1px solid black;">Failure Dates</th> <th style="text-align: center; border-bottom: 1px solid black;">Approval Date</th> </tr> </thead> <tbody> <tr> <td>☐ Rough</td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>☐ Energy</td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>☐ Mechanical</td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>☐ TCO</td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>☐ Other _____</td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> </tr> </tbody> </table>				Type	Failure Dates			Approval Date	☐ Rough					☐ Energy					☐ Mechanical					☐ TCO					☐ Other _____				
Type	Failure Dates			Approval Date																														
☐ Rough																																		
☐ Energy																																		
☐ Mechanical																																		
☐ TCO																																		
☐ Other _____																																		
INSPECTIONS FINAL ☐ CO ☐ CCO ☐ CA Date: _____ Inspected By: _____	CUT-IN <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;"></th> <th style="text-align: center; border-bottom: 1px solid black;">Date Issued</th> <th style="text-align: center; border-bottom: 1px solid black;">Expiration Date</th> </tr> </thead> <tbody> <tr> <td>Temporary Cut-in-Card</td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Temporary Cut-in-Card</td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Final Cut-in-Card</td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> </tr> </tbody> </table>					Date Issued	Expiration Date	Temporary Cut-in-Card			Temporary Cut-in-Card			Final Cut-in-Card																				
	Date Issued	Expiration Date																																
Temporary Cut-in-Card																																		
Temporary Cut-in-Card																																		
Final Cut-in-Card																																		

Garden State Electrical Inspection Services, Inc.



ELECTRICAL
SUBCODE
TECHNICAL SECTION



Date Received 5/29/93
Date Issued
Control #
Permit # 1993/160

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

Block 98 Lot 52
Work Site Location 27 Balston Dr.
Owner in Fee Mr. & Mrs. Jais
Address same
Tele. ()
Contractor Mr. Jais
Address same
Tele. ()
Lic. No.
Federal Emp. No. or Social Security No.

B. ELECTRICAL CHARACTERISTICS

☐ Reinspection ☐ Resale ☐ Meter Set
☐ Pole/Pad # ☐ Temporary ☐ Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work \$ 200.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
☐ No Plans Required
Joint Plan Review Required:
☐ Bldg. ☐ Plumb. ☐ Fire
☐ Elec. Plans Approved
Date:
Approved by:
SUBCODE APPROVAL:
☐ CO ☐ CCO ☐ CA
Date:
Approved by:

INSPECTIONS:	Dates (Month/Day)			
	Type:	Failure	Approval	Initial
Rough				
Temporary				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Line Dept.

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.
Signature-Contractor Seal
Nicholas W. Z...

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
3		Fixtures (1)
6		Receptacles (2)
3		Switches (3)
12		Total 1 + 2 + 3
		Range
		Oven(s)
		Surface Unit
		Dishwasher
		Garbage Disposal
		Dryer
		A/C Unit
		Burglar Alarms
		Intercoms Panels
		Smoke Detectors
		Whirlpool/spa
		Pool Bonding
		Pool Filter Motor
		Pool Lights
		Water Heater(s)
		Central heat:
		oil, gas or elec.
		Baseboard Heat Units
		Thermostats
		Heat Pump
		Pump(s)
		Motor Control Center/Sub Panels
		Signs
		Light Standards
		Motors—Fractional H.P.
		Motors—All Others
		Transformers
		Generators
		Service Entrance
		Other

FEE (Office Use Only)

Administrative Surcharge \$ 5.00
Paid Check # 9022 Minimum Fee \$ 46.00
Collected by: P. Hyman TOTAL FEE \$ 57.00

857-4834



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received 4/30/93
Date Issued
Control #
Permit # 1993-168

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

Block 98 Lot 42
Work Site Location X 27 BALSTON DR. VERONA, NJ

Owner in Fee X Nicholas W. Zois
Address X 27 BALSTON DR. VERONA

Tele. () 239-7423

Contractor X Nicholas Zois

Address X

Tele. ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Req.			Type:	Failure Failure Approval Initial
☒ All	4/30/93	AK	Footings	
☐ Footing			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			Insulation	
Joint Plan Review Required:			Finishes:	
☐ Elec. ☐ Plumb. ☐ Fire			Energy	
SUBCODE APPROVAL			Mechanical	
☐ CO ☐ CCO ☐ CA			TCO	
Date: 4/30/93			Other	
Approved By: AK			Final	11/4/93 QA

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
New Bldg. Area/All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed 88 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$
2. Alteration \$
3. Total (1+2) \$5000.00

C. CERTIFICATION IN LIEU OF OATH

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

X Nicholas W. Zois
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

STAIRWAY FROM FIRST FLOOR
TO BASEMENT.

TYPE OF WORK:

- ☒ New Building
☒ Addition
☒ Alteration
☐ Roofing
☐ Siding
☐ Fence Height (6' or over)
☐ Sign Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other
☐ Other
☐ Demolition

**(Office Use Only)
FEE**

\$
45

Paid ☒ Check # cash Administrative Surcharge \$
Collected by: AK Minimum Fee \$
DCA TRAINING FEE \$ 4
TOTAL FEE \$ 49.00

U.C.C. Form F-110B

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

857-4834


**BUILDING
SUBCODE
TECHNICAL SECTION**

 Date Received 4/30/93
 Date Issued
 Control #
 Permit # 1993-160

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

 Block 98- Lot 42
 Work Site Location X 27 BALSTON DR. VERONA, NJ
 Owner in Fee X Nicholas W. 2015
 Address X 27 BALSTON DR. VERONA
 Tele. () 239-7423
 Contractor X Nicholas 2015
 Address X
 Tele. ()
 Lic. No. or Bldrs. Reg. No.
 Federal Emp. No. or Social Security No.

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

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

 STAIRWAY FROM FIRST FLOOR
 TO BASEMENT.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
			Type:	Failure	Failure	Approval	Initial
☐ No Plans Req.			Footings				
☒ All	4/29/93	DD	Foundation				
☐ Footing			Slab				
☐ Foundation			Frame				
☐ Frame			Insulation				
☐ Other			Finishes:				
Joint Plan Review Required:			Energy				
☐ Elec. ☐ Plumb. ☐ Fire			Mechanical				
SUBCODE APPROVAL			TCO				
☐ CO ☐ CGO ☐ CA			Other				
Date: 4/30/93			Final				
Approved By: [Signature]							

B. BUILDING CHARACTERISTICS

 Use Group Present R-3 Proposed
 Constr. Class Present Proposed
 No. of Stories
 Height of Structure Ft.
 Area—Largest Floor Sq. Ft.
 New Bldg. Area/All Floors Sq. Ft.
 Volume of New Structure Cu. Ft.
 Total Land Area Disturbed 88 Sq. Ft.

Est. Cost of Bldg. Work:

 1. New Bldg. \$
 2. Alteration \$
 3. Total (1 + 2) \$ 5000.00

TYPE OF WORK:
☐ New Building
☒ Addition
☒ Alteration
☐ Roofing
☐ Siding
☐ Fence Height (6' or over)
☐ Sign Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other
☐ Other
☐ Demolition

**(Office Use Only)
FEE**

 \$
 45

 Paid ☒ Check # cash
 Collected by: [Signature] Administrative Surcharge \$
 Minimum Fee \$
 DCA TRAINING FEE \$ 4
 TOTAL FEE \$ 49.00

U.C.C. Form F-110B

 1 White = Inspector Copy
 3 Pink = Office Copy

 2 Canary = Office Copy
 4 Gold = Applicant Copy



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

4/30/92
1993/160

IDENTIFICATION Block 98 Lot 42
Work Site Location 27 Palstan Dr.
Owner in Fee Mr & Mrs Jois
Address Seneca
Tele. ()

Contractor Homesman
Address _____
Tele. () _____
Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____
Federal Emp. No. _____
or Social Security No. _____

is hereby granted permission to perform the following work:

- ☐ BUILDING ☐ PLUMBING ☐ OTHER _____
☐ ELECTRICAL ☐ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Install stairway to basement
& enclose

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 \$ 5000

[Signature]
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building 45.00
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA Training Fee 4.00
Cert. of Occ. 25.00
Other _____
Total 74.00
Check No. _____
Cash ☒
Collected By: R. Hyman

(see reverse side)

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

- 1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material, plumbing underground services, rough piping, water service, sewer, septic services and storm drains, electrical rough wiring, panels and service installations, insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

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

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



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

4/30/92
1993/160

IDENTIFICATION Block

98

Lot

42

Work Site Location

27 Babston Dr.

Contractor

H. M. O. S. W. N. E. R.

Address

Owner in Fee

H. M. O. S. W. N. E. R.

Address

Same

Tele. ()

Lic. No. or Bldrs. Reg. No.

Exp. Date

Tele. ()

Federal Emp. No.

or Social Security No.

Is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ OTHER☐ ELECTRICAL ☐ FIRE PROTECTION☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Install stairway to basement
& enclosure

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 \$

5000

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building

45.00

Electrical

Plumbing

Fire Protection

Elevator Devices

Other

DCA Training Fee

4.00

Cert. of Occ.

25.00

Other

Total

74.00

Check No.

Cash

Collected By:

P. H. M. E. R.

(see reverse side)

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material plumbing underground services, rough piping, water service, sewer, septic services and storm drains, electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

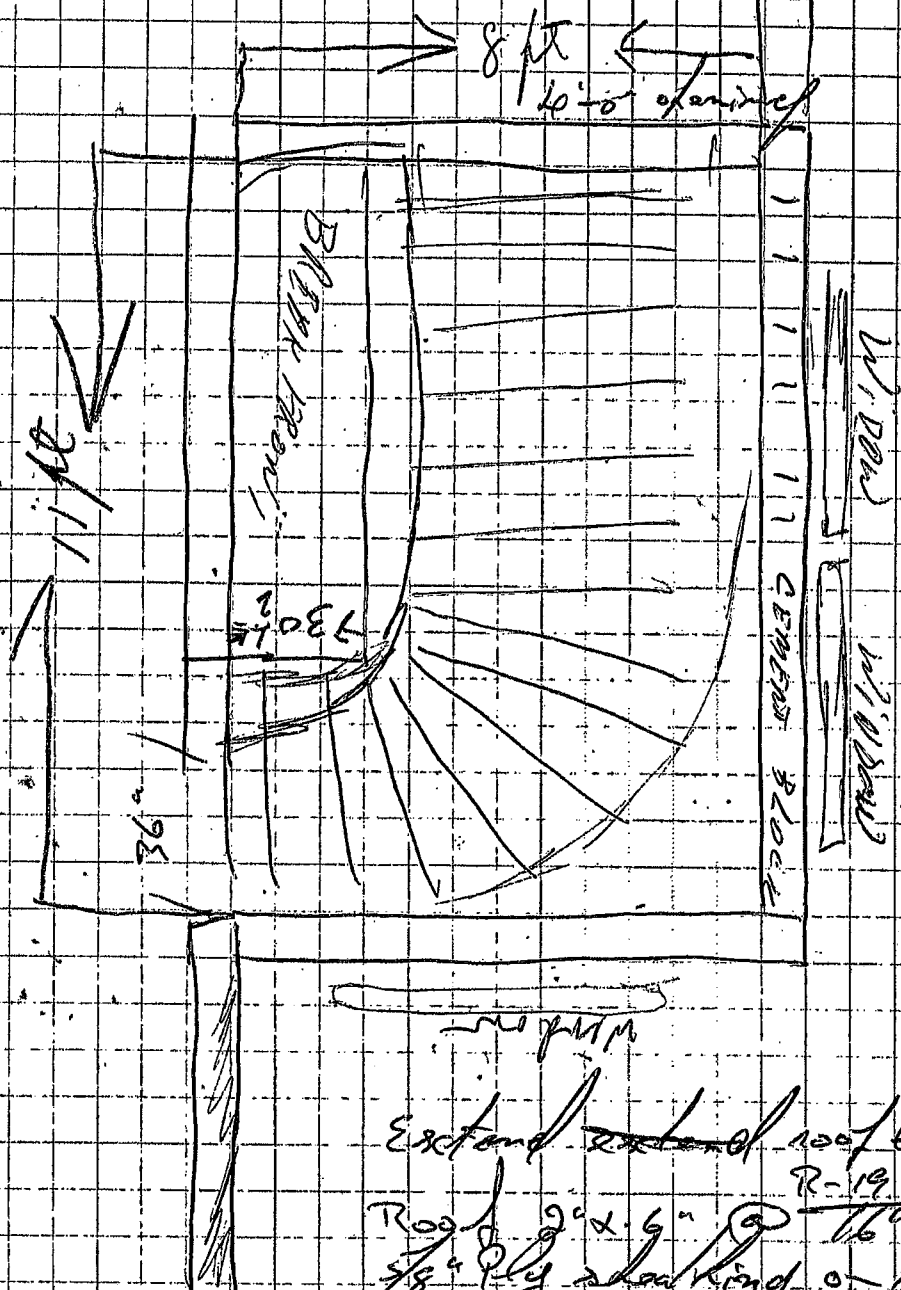
☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

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

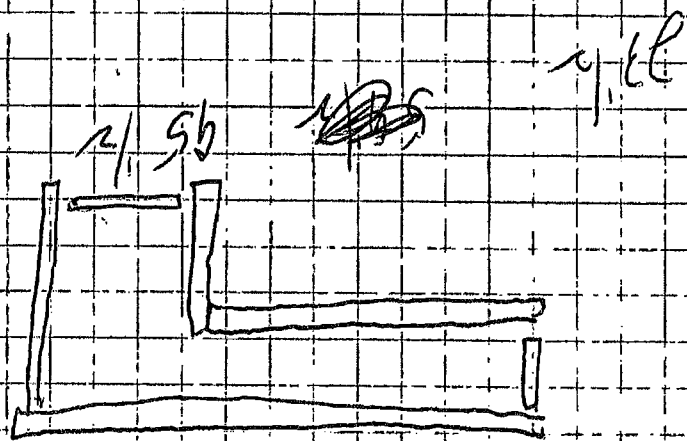
If you do not understand any of this information, please ask.

7 1/2" RISE
12' ROAD



Culley High in basement 8' 3"

Extend extend roof line
R-19
Roof 2" x 6" @ 16" o/c
5/8" Ply sheathing on the roof
2" x 4" 16" o/c R-11
2"



OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition		Other	
Building _____	Energy _____	Barrier Free _____	Other _____		
Electrical _____	Barrier Free _____	Flood Hazard _____			
Plumbing _____	As Built Elevation Cert. _____	Other _____			
Fire Protection _____	Other _____				
Mechanical _____					

X. CERTIFICATES ISSUED

(office use only)

DATE ISSUED

DATE EXPIRED

DATE REISSUED

DATE EXPIRED

☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Approval	No. _____	_____	_____	_____	_____

