Date Issued 8/15/12
Control #
Permit # 11-313

CERTIFICATE

IDENTIFICATION

Block 128 Lot 24
Work Site Location 37 CRESCENT AVENUE
TOTOWA BOROUGH, NEW JERSEY 07512
Owner in Fee/Occupant PATRICK FIORITO
Address 37 CRESCENT AVENUE
TOTOWA BOROUGH, NEW JERSEY 07512
Tele. (973) 277-9472
Contractor HOMEOWNER
Address
Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

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

KITCHEN RENOVATION, ADDITION (1 BEDROOM & 1 BATHROOM)
NEW ROOF & SIDING

☒ **CERTIFICATE OF OCCUPANCY**

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

☐ **CERTIFICATE OF APPROVAL**

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

☐ **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____ or the owner will be subject to fine or order to vacate:

☐ **CERTIFICATE OF CLEARANCE — LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:

[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (_____ years); see file

☐ **CERTIFICATE OF CONTINUED OCCUPANCY**

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

☐ **CERTIFICATE OF COMPLIANCE**

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

Fee $
Paid [ ] Check No.
Collected by:

ALLAN BURGHARDT/ 8/15/12
CONSTRUCTION OFFICIAL

U.C.C. F260
(rev. 12/99)

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 8/25/11

Date Issued Permit # 11-313

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

Block 128 Lot 24 Qualification Code

Work Site Location 37 CRESCENT AVE
TOTOWA, NJ 07512

Owner in Fee: PATRICK FIORITO JR

Tel. (973) 277-9472 e-mail

Address 37 CRESCENT AVE (street), TOTOWA (municipality) NJ 07512 (zip code)

Contractor: OWNER 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: ( )

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

RENOVATE KITCHEN (UPDATE)
BUILD ADDITION 2ND FLOOR & ADD 1 BED & 1 BATH
NEW ROOF
NEW SIDING

10/14/11 - Framing checklist.
2/27/12 - Framing checklist still outstanding.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	7/25/11	AM
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame	10/14/11			
Truss Sys./Bracing				
Barrier-Free				
Insulation			11/1/11	AM
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			2/27/12	AM
Barrier-Free				

TYPE OF WORK:
- [ ] New Building
- [X] Addition
- [X] Rehabilitation
- [X] Roofing
- [X] 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
- [X] Other CO
- [ ] Demolition

Pick # 277

(N)

FEE (Office Use Only)

$	43.00
	180.00
	40.00
Administrative Surcharge $	
Minimum Fee $	263.00
State Permit Surcharge Fee $	30.00
TOTAL FEE $	293.00

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3

No. of Stories 2

Height of Structure 27 ft.

Area — Largest Floor 646 sq. ft.

New Bldg. Area/All Floors 153 sq. ft.

Volume of New Structure 1224 cu. ft.

Max. Live Load

Max. Occupancy Load

Constr. Class Present VB Proposed VB

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $ 20,000
2. Rehabilitation $ 26,177 (03)
3. Total (1+ 2) $ 46,177 (03)

1224 X .035 = 42.84

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 8/25/11
Date Issued
Control #
Permit # 11-313

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

Block 128 Lot 24 Qualification Code

Work Site Location 37 Cresent Ave Totowa

Owner in Fee Patrick Fiorito

Address 37 Cresent Ave Totowa

Tel (973) 277 9472

Contractor VINCENT MARCIANO ELECTRICAL CONTRACTOR, LLC

Address 28 MELISSA DRIVE TOTOWA, NEW JERSEY 07512

Tel (973) 256-5112 FAX ( )

Contractor License No. 10432

Federal Emp. No. 136-72-4394

B. ELECTRICAL CHARACTERISTICS

Use Group Present ______ Proposed ______

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

Building Occupied as ______ Utility Co. ______

Est. Cost of Elec. Work $ 5,000 -

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]

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
40		Lighting Fixtures	
35		Receptacles	
20		Switches	
6		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
101 →		TOTAL NUMBERS	$ 120
		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	25
1	2	KW Dishwasher	
		HP Garbage Disposal	25
1	2½ Ton	KW Central A/C Unit	25
1		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	100
1	200	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Pd CK# 277 (R)

Administrative Surcharge	$ 295.00
Minimum Fee	$
State Permit Surcharge Fee	$ 9.00
TOTAL FEE	$ 304.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[X] Elec. Plans Approved

Date: 8-22-11

Approved by: [signature]

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: ______

Approved by: ______

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

Dates (Month/Day)

Temp. Cut-in-Card Date Issued ______

Final Cut-in-Card Date Issued ______

Annual Pool Inspection ______

Date of Grounding and Bonding Certification ______

ADD A LEVEL + 1ST FL RENO

1. White-Inspector copy 2. Canary- Applicant copy 3. Pink- Office Copy 4. White Tag- Office copy

UCC/F-120 (REV. 7/03)
Professional Printing
(856) 468-7933

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 8/25/11
Control #

Date Issued 11-313
Permit #

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

Block 128 Lot 24 Qualification Code

Work Site Location 37 CRESCENT AVE
TOTOWA, NJ 07512

Owner in Fee: PATRICK FIORITO JR

Tel. (973) 277-9472 e-mail

Address 5 AVE
street municipality zip code

Contractor: OWNER Tel. ( )

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size 4" Public Sewer X Private Septic

Water Service Size 3/4" Public Water X Private Well

Est. Cost of Plumbing Work $ 6,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[X] Plumbing Plans Approved
Date: 8/24/11
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 1/20/12
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough			10/11/11	MB
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping			1/9/12	MB
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			1/20/12	MB

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
UPDATE KITCHEN
NEW BATHROOM ON 2ND FLOOR (FOR)
MAKE 1ST FLOOR BATH INTO 1/2 BATH

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
2	Water Closet	24.00
	Urinal/Bidet	
1	Bath Tub	12.00
	Lavatory	
X	Shower	
4	Floor Drain	48.00
4	Sink	12.00
1	Dishwasher	
	Drinking Fountain	
1	Washing Machine	12.00
	Hose Bibb	
1	Water Heater	50.00
	Fuel Oil Piping	
X 1	Gas Piping	15.00
	LPGas Tank	
	Steam Boiler	
1	Hot Water Boiler	15.00
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
3	Stacks	15.00
1	Other Alarm	25.00
	Other	
	Administrative Surcharge $	348.00
	Minimum Fee $	
	State Permit Surcharge Fee $	10.00
	TOTAL FEE $	358.00

Rd ck# 277
(N)

U.C.C. F130 (rev. 7/06) 1 White = Inspector Copy. 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received / Control # 8/25/11

Date Issued / Permit # 11-313

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

Block 128 Lot 24 Qualification Code _____

Work Site Location 37 CRESCENT AVE
TOTOWA, NJ 07512

Owner in Fee: PATRICK FIORITO JR

Tel. (973) 277-9472 e-mail _____

Address 37 CRESCENT AVE, TOTOWA, NJ 07512
(street / municipality / zip code)

Contractor: OWNER Tel. ( )

Address _____ e-mail _____

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

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

Fire Alarm Contractor No. _____ Exp. Date _____

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

Federal Emp. ID No. _____ FAX: ( ) _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

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

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

Location: _____

Total Cost of Fire Protection Work $ 100.00

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible

Capacity _____

Fire Alarm System: [X] New OR [ ] Existing

Location of Panel: _____

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial Underslab Utilities Approved
Date: _____ Approved by: _____
[X] Fire Protection Plans Approved
Date: 12/5/11 Approved by: [signature]
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____

SUBCODE APPROVAL for CERTIFICATE
[X] CO [ ] CCO [ ] CA
Date: 1/12/12
Approved by: [signature]

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			1/12/12	[signature]
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) ~~owner of~~ record and am authorized to make this application. _____
Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

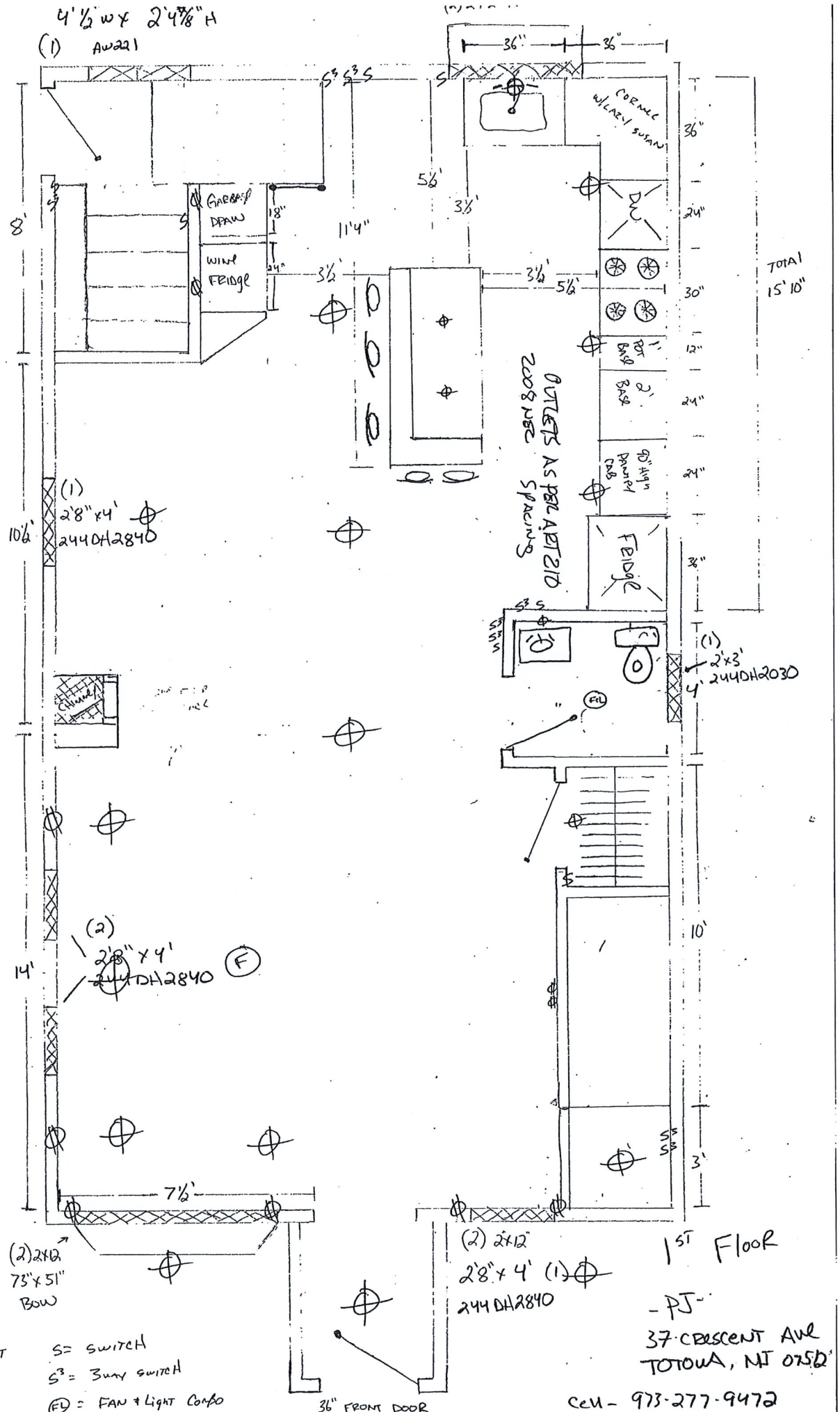
Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

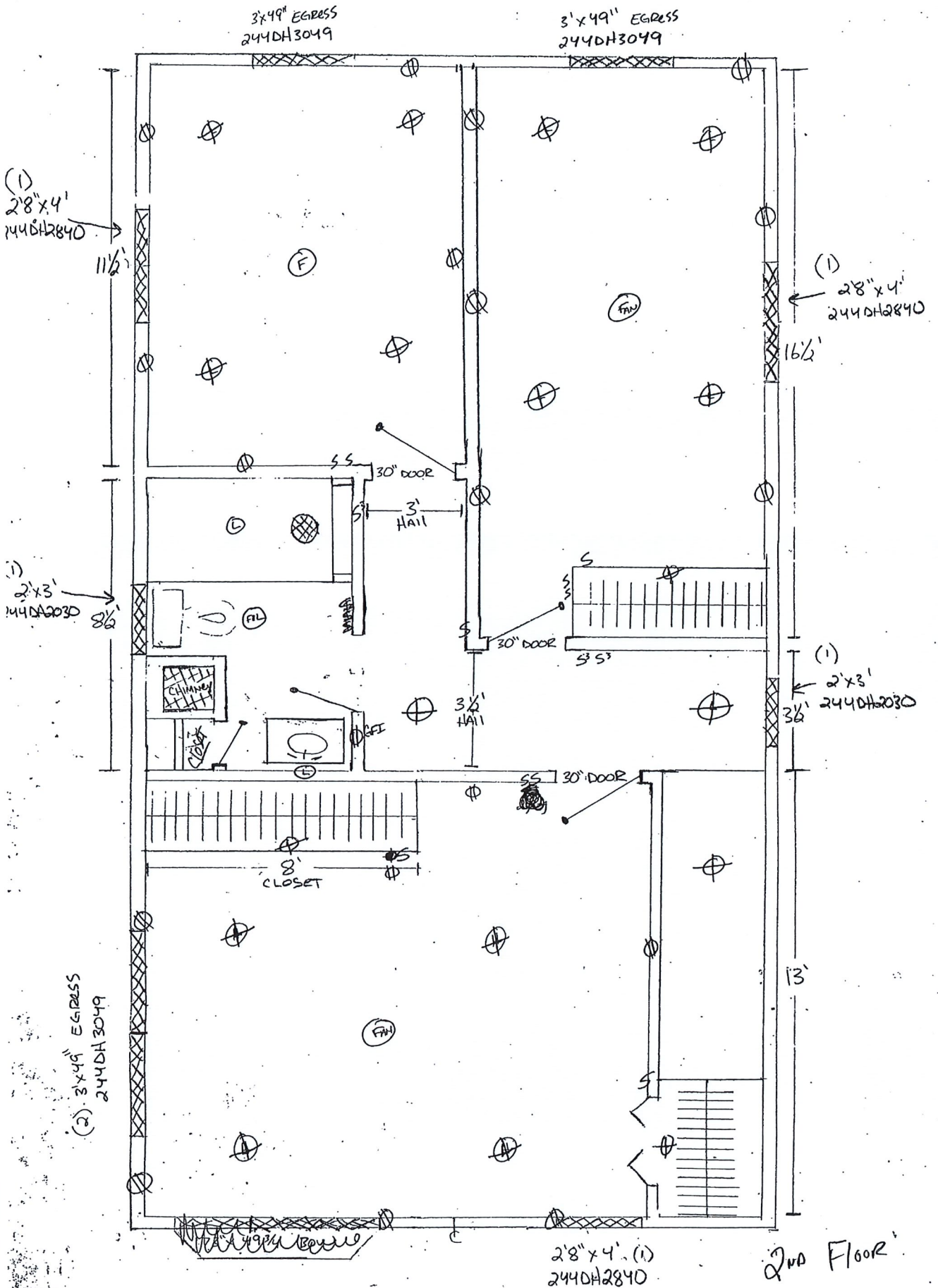
	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	4	50.—
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		

Pd ck # 277 (N)

Administrative Surcharge $	
Minimum Fee $	
State Permit Surcharge Fee $	
TOTAL FEE $	50.00



-PJ-
37 CRESCENT AVE
TOTOWA, NJ 07512
CELL - 973-277-9472



Key:

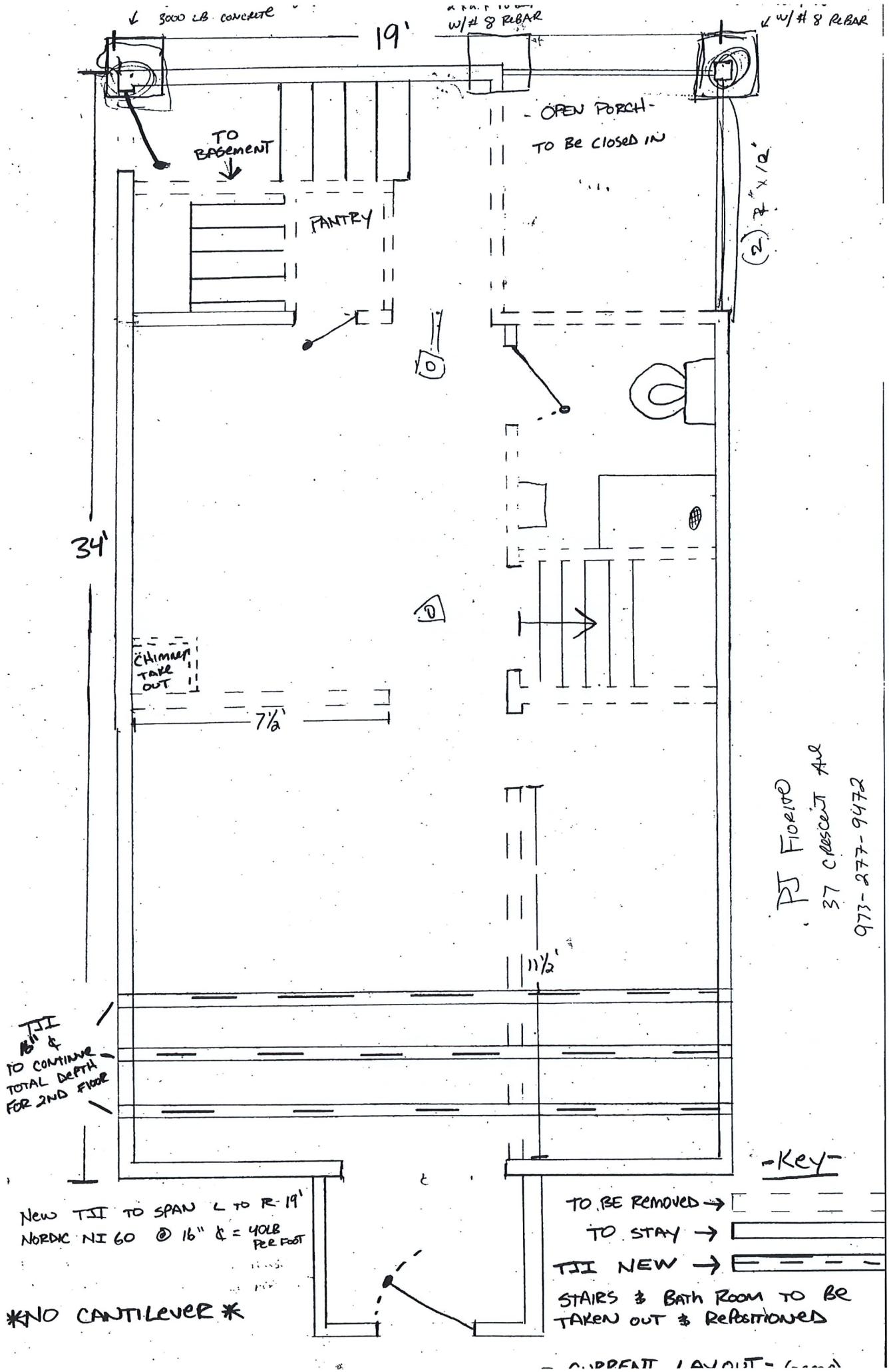
⊕ = Light S = switch

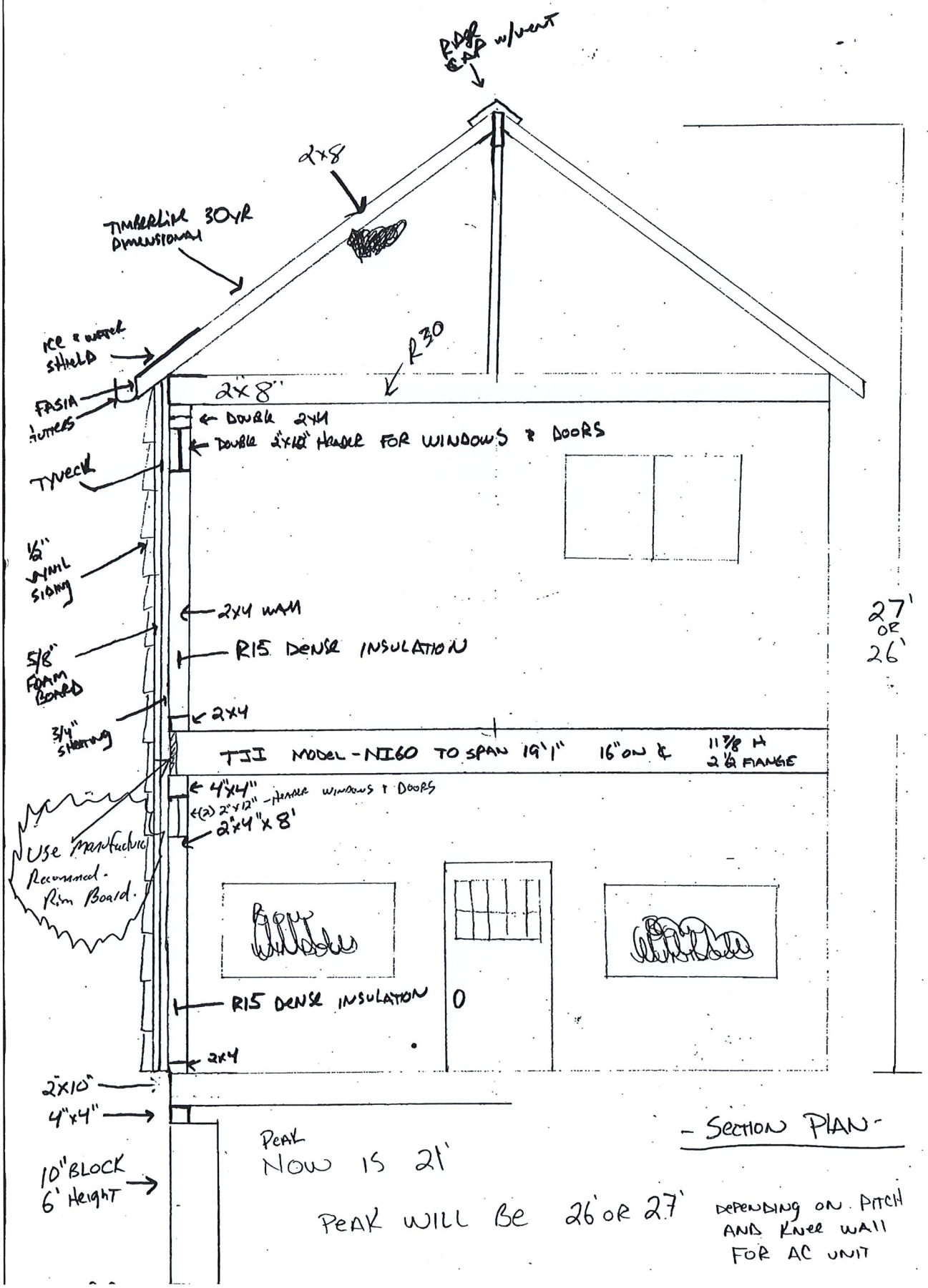
(F) = FAN S^3 = 3 way switch

= outlet (FL) = FAN + Light combo

ELECTRIC

-PJ-
37 CRESCENT AVE
TOTOWA, NJ 07512
CELL- 973-277-9472

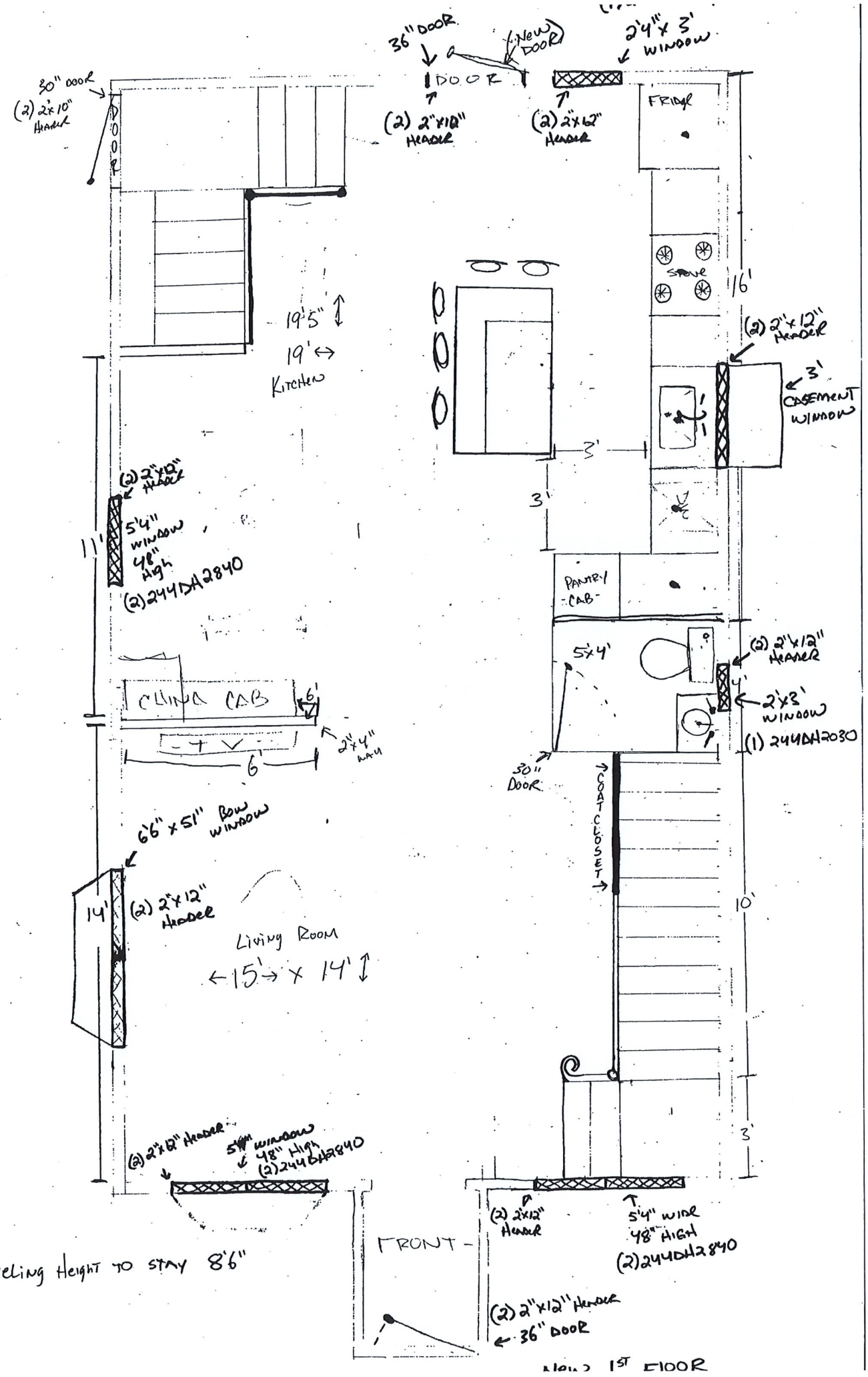

3000 LB CONCRETE
19'
W/# 8 REBAR
W/# 8 REBAR
- OPEN PORCH -
TO BE CLOSED IN
TO BASEMENT
PANTRY
(2) 2" X 12"
34'
CHIMNEY TAKE OUT
7½'
11½'
TJI 16" @ TO CONTINUE TOTAL DEPTH FOR 2ND FLOOR
New TJI TO SPAN L TO R 19'
NORDIC NI 60 @ 16" ℄ = 40LB PER FOOT
NO CANTILEVER
-Key-
TO BE REMOVED →
TO STAY →
TJI NEW →
STAIRS & BATH ROOM TO BE TAKEN OUT & REPOSITIONED
PJ Fiorino
37 Crescent Ave
973-277-9472

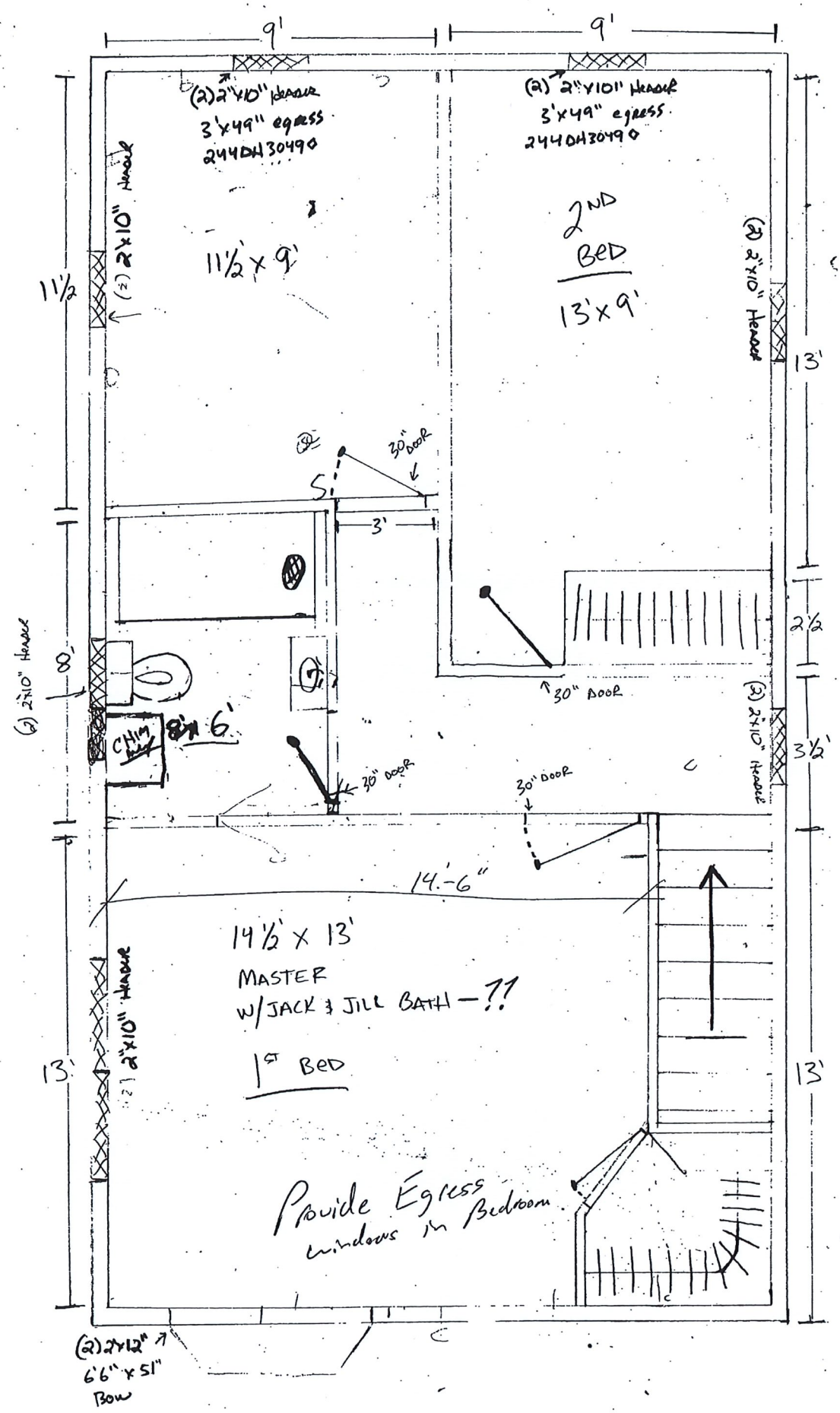


- SECTION PLAN -

PEAK NOW IS 21'

PEAK WILL BE 26' OR 27' DEPENDING ON PITCH AND KNEE WALL FOR AC UNIT


36" DOOR
(NEW DOOR)
2'4" x 3' WINDOW
DOOR
(2) 2"x12" HEADER
(2) 2"x12" HEADER
30" DOOR
(2) 2"x10" HEADER
DOOR
FRIDGE
STOVE
16'
19'5"
19' ↔
KITCHEN
(2) 2"x12" HEADER
3' CASEMENT WINDOW
3'
3'
(2) 2"x12" HEADER
5'4" WINDOW 48" High
(2) 2440H2840
11'
PANTRY CAB
5'x4'
(2) 2"x12" HEADER
4'
2'x3' WINDOW
(1) 2440H2030
CLINA CAB
6'
TV
6'
2"x4" MAN
30" DOOR
COAT CLOSET
66" x 51" BOW WINDOW
(2) 2"x12" HEADER
14'
10'
Living Room
←15'→ x 14'↕
3'
(2) 2"x12" HEADER
5'4" WINDOW 48" High (2) 2440H2840
(2) 2"x12" HEADER
5'4" WIDE 48" HIGH (2) 2440H2840
FRONT
(2) 2"x12" HEADER
36" DOOR
Cieling Height to stay 8'6"
NEW 1ST FLOOR



New 2ND FLOOR

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 2/23/12

Date Issued / Permit # 12-055

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

Block 128 Lot 24 Qualification Code

Work Site Location 37 CRESCENT AVE
TOTOWA NJ 07512

Owner in Fee: PATRICK FIORINO JR

Tel. (973) 277-9472 e-mail

Address
street municipality zip code

Contractor: Home Owner 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

[X] No Plans Required — 2/23/12

[ ] All

[ ] Footings/Foundations

[ ] Structural/Framework

[ ] Exterior

[ ] Interior

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			3/12/12	
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present R5 Proposed R5

Constr. Class Present VB Proposed VB

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.

Max. Live Load

Max. Occupancy Load

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Rehabilitation $ *225.00
3. Total (1+ 2) $

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

OIL TANK Removal

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
- [X] Other
- [ ] Demolition

PL CK # 285

FEE (Office Use Only)

	$
Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$ 75.00

3127
00092_031902
14762 SF

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

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