

1/27/2020

25-2020
Housing/assessor

Kim Morrell

Due 2/6/20

From: Vanessa Parent
Sent: Sunday, December 29, 2019 2:34 PM
To: Kim Morrell; clerks office
Subject: FW: OPRA request - 412 MIDDLESEX ST GLOUCESTER NJ 08030

Please process this OPRA request Monday morning.
Thank you

Vanessa L. Parent, RMC, CMR
City Clerk, Certified Municipal Registrar
512 Monmouth Street
Gloucester City, NJ 08030
856-456-0205, ext. 203
vanessa@cityofgloucester.org

-----Original Message-----

From: Jessica martin <opra+request-8886-36dba3e3@requests.opramachine.com>
Sent: Friday, December 27, 2019 1:22 PM
To: Vanessa Parent <Vanessa@cityofgloucester.org>
Subject: OPRA request - 412 MIDDLESEX ST GLOUCESTER NJ 08030

Dear Gloucester City,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested:

- All construction permits - please specify if any are open - ~~closed~~ *No permit*
- Any information regarding the presence of an underground oil tank, if applicable, including permits, remediation reports, environmental reports
- Survey showing underground oil tank location (if applicable)
- Information regarding the presence of a septic system (permits, drawings, survey, etc)
- Property Record Card

Yours faithfully,

Jessica martin

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-8886-36dba3e3@requests.opramachine.com

Is vanessa@cityofgloucester.org the wrong address for OPRA requests to Gloucester City? If so, please contact us using this form:

https://opramachine.com/change_request/new?body=gloucester_city

GLOW CITY CONSENT OFFICE
313 MONMOUTH STREET
456-7689

IDENTIFICATION

UCC NEW JERSEY
CERTIFICATE

Date Issued 12/19/2005
Control #
Permit # 05-784

Block 37 Lot 6
Work Site Location 412 MONMOUTH STREET
Owner in Fee/Occupant FRANKLIN, JOYCE
Address 8500 ISLAND PINES PL. #4
WATNEVILLE, OH 45039
Telephone (513) 470-6670
Contractor PK MECHANICAL, REGENERATION
Address P O BOX 135
RUMBLEBROOK, NJ 08078
Telephone (856) 310-0124 Fax ()
Lic. No. or Bldgs. Reg. No.
Federal Emp. No. 22-304112

1] 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.

1] 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.

1] 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.

Home Warranty No.
Type of Warranty Plan: ☐ State ☐ Private
Use Group R-3
Maximum Live Load @
Construction Classification
Maximum Occupancy Load @
Description of Work/Use:
1. HOT WATER BOILER

1] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per HJAC 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

1] 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.

1] 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 _____.

CONSTRUCTION OPTION
U.C.C. 1260 (rev. 3/96)

Fee \$ 0
Paid [X] Check No. 14228
Collected by: CM

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 12/5/05
Control # C-37-7
Permit # 05-784

IDENTIFICATION Block 37 Lot 6 Qual

Work Site Location 412 MIDDLESEX STREET

Owner in Fee FRANKLIN, JOYCE

Address 8500 ISLAND PINES PL #4

MAINEVILLE, OH 45039-

Telephone (513)470-6670

Contractor PK MECHANICAL REFRIGERATION
Address P O BOX 135

RUNNEMEDE, NJ 08078-

Telephone (856)310-0124

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-384112

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:
1 HOT WATER BOILER

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 \$ 900

[Signature]
Construction Official Date 11/1

U.C.C. 1170 (rev. 3/01) On any inspections, this Department will make a Smoke Detector inspection. Smoke Detectors must be installed correctly and in working order.

CARBON MONOXIDE DETECTOR

INSTALLED

CARBON MONOXIDE DETECTOR
REQUIRED

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	75
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	1
Cert. of Occupancy	0
Other	
Total	76
Check No. 14538	
Cash	
Collected By <i>[Signature]</i>	

GLIOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/30/2005
Date Issued 12/5/05
Control # C-37-7
Permit # 05-784

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 37 Lot 6 Parcel
Work Site Location 412 HINDENSBY STREET

NO.

FIXTURE/EQUIPMENT

FEES (Office Use Only)

Owner in Fee FRANKLIN JOYCE
Address 8500 ISLAND PINES PL #4
NAINHEVILLE, OH 45039-
Tele. (513) 470-6670
Contractor PX MECHANICAL REFRIGERATION
Address P O BOX 135
NORTHENSBURG, NJ 08878-
Tele. (956) 310-0124
Lic. No. or Bids. Reg. No.
Federal Emp. No. 22-384112

0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	75
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
0	Other	0
0	Other	0

B. PLUMBING CHARACTERISTICS
Use Group Present R-3 Proposed R-3
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 900

JOB SUMMARY (Office Use Only)

PLAN REVIEW

INSPECTIONS

Dates (Month/Day)

[] No Plans Required

Type

Failure Failure Approval Initial

Joint Plan Review Required;

Slab

[] Bidg [] Blest

Rough

[] Fire [] Elevator

Water

[] Plumb. Plans Approved

Sewer

Date:

Fixtures

Approved By: JK

Gas Equip.

1-31 JK

SUBCODE APPROVAL

Gas Piping

[] CO [] CCO JK

Solar

Approved By: JK

FCO

Date:

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.

Paid [] Check #
Collected by:

Administrative Surcharge \$
Minimum Fee \$
TOTAL FEE \$ 75
DCA State Permit Fee \$ 1

Signature/Contractor Seal
[] Licensed Plumbing Contractor [] Rempt Applicant

GLIOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

IDENTIFICATION

UCC NEW JERSEY
CERTIFICATE

Date Issued 12/08/2005
Control #
Permit # 05-782

Block 37 Loc 6 Qual
Work Site Location 412 MIDDLESEX STREET
Owner in Fee/Occupant FRANKLIN, JOTCH
Address 8500 ISLAND PINES BL #4
MALDENVILLE, OH 44649-
Telephone (513)479-6670
Contractor G.F. SMITH ELECTRIC INC.
Address 5407 BROWNING ROAD
PENNSAUKEN, NJ 08109-
Telephone (856)665-6376 Fax ()
Lic. No. or Bldgs. Reg. No. 14300
Federal Emp. No. 01-0736892

☐ 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:

Home Warranty No. _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group R-3

Maximum Live Load 0

Construction Classification _____

Maximum Occupancy Load 0

Description of Work/Use: _____

3 SMOKE DETECTORS

☐ CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:1

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 _____.

CONSTRUCTION OFFICIAL
U.C.C. 3260 (rev. 3/99)

Fee \$ _____
Paid ☒ Check No. 14227
Collected by: JRM

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 12/2/05
Control # C-37-6
Permit # 05-782

IDENTIFICATION Block 37 Lot 6 Qual
Work Site Location 412 MIDDLESEX STREET
Owner In Fee FRANKLIN, JOYCE
Address 8500 ISLAND PINES PL #4
MAINEVILLE, OH 45039-
Telephone (513)470-6670

Contractor G.E. SMITH ELECTRIC INC.
Address 5407 BROWNING ROAD
PENNSAUKEN, NJ 08109-
Telephone (856)665-6376
Lic. No. or Bids. Reg. No. 14300
Federal Emp. No. 01-0736892

Is hereby granted permission to perform the following work:

- ☐ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☒ ELECTRICAL ☒ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER

DESCRIPTION OF WORK:
3 SMOKE DETECTORS

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 \$ 750

Construction Official

Paul A. Hargrave

Date

12/2/05

U.C.C. #170 (Rev. 3/96)

On any inspections, this Department
will make a Smoke Detector inspection.
Smoke Detectors must be installed
correctly and in working order.

CARBON MONOXIDE DETECTOR
INSTALLED

CARBON MONOXIDE DETECTOR
REQUIRED

PAYMENTS (Office Use Only)

Building _____ 0
Electrical _____ 15
Plumbing _____ 0
Fire Protection _____ 15
Elevator Devices _____ 0
Other _____
DCA State Permit Fee _____ 1
Cert. of Occupancy _____ 0
Other _____
Total _____ 31
Check No. _____
Cash _____
Collected By _____

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/23/2005
Date Issued / /
Control # C-37-6
Permit # 05-782

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

Block 37 Lot 6 Qual
Work Site Location 412 HINDLER STREET

Owner in Fee FRANKLIN, JOYCE
Address 8300 ISLAND PINES PL #4
HAIRVILLE, OH 45039

Tele. (513) 478-6670

Contractor G.R. SMITH ELECTRIC INC.

Address 5407 BROWNING ROAD
PENNSAUKEN, NJ 08109-

Tele. (856) 665-6376

Lic. No. or Bltgs. Reg. No. 14300

Federal Emp. No. 01-0736892

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3
☐ Pole/Pad # ☐ Temporary ☐ Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work \$ 725

JOH SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

Joint Plan Review Required:

☐ Blgd ☐ Plumb

☐ Fire ☐ Elevator

☐ Elect Plans Approved

Date:

Approved By:

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Date: 12/8/05

Approved By:

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 Electrical Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

NO. SIZE

ITEM

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors-Track RP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/With UV Lights

Storable Pool/Spa/Hot Tub

KW Elect Range/Receptacle

KW Oven/Surface Unit

KW Elect Water Heater

KW Elect Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

Baseboard Heat

HP Motors 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elect Sign/Outline Light

Other 3 SMOKE DETECTOR

Other

Administrative Surcharge

Paid ☐ Check #

Collected by:

NCA State Permit Fee

FEE (Office Use Only)

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 11/23/2005
Date Issued 12/18/05
Control # C-37-6
Permit # 05-782

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

Block 37 lot 6 Quad
Work Site Location 412 KIDDERSEE STREET

Owner In Fee FRANKLIN, JOYCE
Address 8500 ISLAND PINES PL #4
KALIBVILLE, OH 45039-

Tele. (513) 470-6670

Contractor G.E. SMITH ELECTRIC INC.

Address 5407 BROMMING ROAD
PENNMARKEN, NJ 08109-

Tele. (856) 665-6376

Lic. No. or Bldgs. Reg. No.

Federal Emp. No. 01-0736892

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr Class Present Proposed

Heating Systems () New () Existing () HVAC

Type: () Gas () Oil () Elect () Solar

() Other

Location:

Total Est Cost of Fire Prot Work \$ 25

JOE SUMMARY (Office Use Only)

PLAN REVIEW

() No Plans Required

Joint Plan Review Required:

() Bldg () Elect

() Plumb () Elevator

() Fire Plans Approved

Date:

Approved By:

SUBCODE APPROVAL

() CO () CCO () CA

Date: 12-05-05

Approved By: [Signature]

Other

INSPECTIONS

Type

Alarm Sys

Suppr Test

Standpipe

Fire Pump

Prebldg Sys

Mechanical

Smoke Ctl

FCO

Final

Other

Dates (Month/Day)

Failure Failure Approval Initial

Failure Failure Approval Initial

D. TECHNICAL SITE DATA

Description of Work:

Water Supply Source

Method of Alarm/Suppr Sys Superv

Storage Tanks

Type: () Flammable Liquid () Combust Liquid

() LPG () LRG Capacity 0 Fuel

Alarm Systems () 110V Interconnected NUMBER

() System

Alarm Devices (Smoke, heat, pulls, water/flow)

Supervisory Devices (tamper, low/high air)

Signalling Devices (horn/strobes, bells)

Other Devices

TOTAL

Suppression Systems

Fire Pump 0 GPM Type

Dry Pipe/Alarm Valves

Pre-action Valves

Sprinkler Heads (Dry and Wet)

Standpipes

Pre-Engineered Systems

Wet Chemical

Dry Chemical

CO2 Suppression

Foam Suppression

Kalon Suppression

Other

Kitchen Hood Exhaust System

Smoke Control System

Gas () or Oil () Fired Appliances

Other 3 SMOKE DETECTOR

Other

Other

Other

Other

Other

Other

Other

Other

Other

Other

Administrative Surcharge

Minimum Fee

TOTAL FEE

DCA State Permit Fee

Signature

Block: 37 Land Desc: 14X90 Owners Name: US BANK TRUST NA C/O RESICAP Land: 9,900 Exemption Net Taxable Value Deductions
Lot: 6 Bldg Desc: 2S8 Street Address: 3650 PEACHTREE RD NE 1500 Bank: 00000 Impr: 29,100 Code: 0 Value: 0 39,000 Cd No-Ow
Qual: Addl Lots: City & State: ATLANTA GA Zip: 30326 Zone: 01 Total: 39,000 Map: 04 GLOUCESTER CITY
Card: M (#1 of 1) Acreage: 0.000 Class: 2 Property Loc: 412 MIDDLESEX ST

SALES HISTORY

Grantor	Date	Book/Page	Price	Nu#
SHERIFF OF CAMDEN COUNTY	04/21/17	10640/1793	100.12	1995
SHERIFF OF CAMDEN COUNTY	04/07/17	10640/1701	100.12	2019
HOMER DORIS	03/09/15	10168/148	1.1	
FRANKLIN, JOYCE	02/27/06	8188 /1843	68000	

ASSESSMENT HISTORY

Year	Land	Impr	Total
1995	8000	32200	40200
2019	9900	29100	39000

BUILDING PERMITS/REMARKS

Date	Work Description	Amount	Compl.

LAND CALCULATIONS

Est	Rt	SB	T	FF	Avgd	Tabl	EaF	Rate	Site	Cond	Value	
				14.90	0.96			400	5000	100	10376	
ECONOMIC	95							Units	Rate	Site	Cond	Value

Net Adj: 95.00 SF: 0 Auto: Y Land Value: 9,857

ACROSS FROM COMM, AVG BRICK FRONT, OLDER WINDS, REAR
EST-NO ACCESS, LCBFD, LC W/MR ON CB-NOT A GOOD TIME

BUILDING INFORMATION

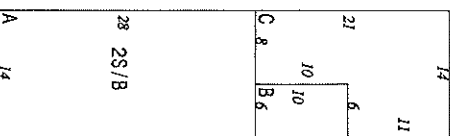
Type and Use:	ONE FAMILY	Class/Quality:	35
Story Height:	TWO STORY	Condition:	AVERAGE
Style:	ROW/TOWNHOUSE	Year Built/EtA:	1853 / 39 (N)
Exterior Finish:	BRICK	Info By:	

Basement
BASEMENT 392 x 9,580 + 2112 x1.00 x1.00= 5867
Main Bldg
FIRST STORY 686 x 48,120 + 9786 x1.00 x1.00= 42796
UPPER STORY 452 x 30,100 + 2640 x1.00 x1.00= 16245
BRICK SF 200 x 9,500 + 72 x1.00 x1.00= 1972

Heat/AC
FORCED HOT AIR 1138 x 2,380 + 960 x1.00 x1.00= 3668

Plumbing
3 FIXTURE BATH 2- 1 x2595,000 + 0 x1.00 x1.00= 2595

Fireplace
Attic
Deck/Patio/Garage/Misc



Road:	PAVED	Utilities:	Sewer: YES
Curbs:	YES	Water:	YES
Sidewalk:	YES	Gas:	YES
Measured:	JU	Topo:	LEVEL
Info:		Neigh:	01
Inspected:		VCS:	01RT

Roof Type:	FLAT/SHED	Liveable Area:	1138 SF
Roof Material:	TAR AND GRAVEL	Interior Cond:	AVERAGE
Foundation:	BRICK	Interior Wall:	PLASTER
Baths:	M: A:2 O:		
Kitchens:	M: A:1 O:		

ROOM COUNT	B	1	2	3/A	Tot
Living Rm		1			1
Dining Rm		1			1
Kitchen		1			1
Dinette					
5 Fixt Bath					
4 Fixt Bath					
3 Fixt Bath		1			2
2 Fixt Bath					
Bed Room			2		2
Pan Room					
Den/Other					

Base Cost: 73143 CCF: 120 CLA:100 Cost New: 87772
Phys Depr: 39.00 (Y) Func Depr: Net Depr: 57.95
Loc Depr: 5 Mkt+: Mkt-: Bldg Value: 50864
Detached Items: 2018 APPEAL JDMANT -21,800

A: 2S/B
B: 2S/CR
C: 1S/CR
D: 1S/CR
E: 1S/CR
F: 1S/CR
G: 1S/CR
H: 1S/CR
I: 1S/CR
J: 1S/CR
K: 1S/CR
L: 1S/CR
M: 1S/CR
N: 1S/CR
O: 1S/CR
P: 1S/CR