West Milford Township
1480 UNION VALLEY ROAD
WEST MILFORD, NJ 07480

Date Issued 4/27/1998
Control Number
Permit Number 97-0203
Permit Issue Date 3/3/1997
Certificate Number 97-0203

Certificate

Construction Code Division
(Certificate of Occupancy)

Identification

Work Site Location: 53 EATONTOWN ROAD HEWITT, NJ 07421 , NJ Block: 2413 Lot: 9 Qual:

Owner In Fee: ANDERSON, MICHELENE

Owner Address: 24 GWYNETH ROAD WEST MILFORD NJ 07480-

Telephone: [redacted]

Contractor M & T CONSTRUCTION, INC.

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480-

Telephone: 201/7288786 Fax: Federal Emp. Number:

License Number or Builders Registration Number: 26495

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

Use Group: R-3 Construction Classification:

Maximum Live Load: Maximum Occupancy Load:

Description of Work/Use: - NEW SINGLE FAMILY STICK BUILT DWELLING

Certificate Comments: NEW SINGLE FAMILY STICK BUILT DWELLING

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

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

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

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

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

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

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

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

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

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

Construction Official

Fee: $25.00
Check Number: 1026
Collected By:

Date Printed: 3/7/2024 U.C.C. F280 (rev. 08/05)

West Milford Township
1480 UNION VALLEY ROAD
WEST MILFORD, NJ 07480

Date Issued 4/27/1998
Control Number
Permit Number 97-0204
Permit Issue Date 3/3/1997
Certificate Number 97-0204

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 53 EATONTOWN ROAD WEST MILFORD,NJ 07480 , NJ Block: 2413 Lot: 9 Qual:
Owner in Fee: ANDERSON, MICHELENE
Owner Address: 24 GWYNETH ROAD WEST MILFORD NJ 07480-
Telephone: [redacted]
Contractor ANDERSON, MICHELENE
Address 24 GWYNETH ROAD WEST MILFORD NJ 07480
Telephone: [redacted] Fax: Federal Emp. Number: HO-
License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private
Use Group: R-3 Construction Classification:
Maximum Live Load: Maximum Occupancy Load:
Description of Work/Use: - DEMO OF HOUSE

Certificate Comments: DEMOLITION OF DWELLING

☐ **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.

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Conditions to be met:

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☐ Partial or limited time period (years); see file

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

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

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

Construction Official
Date Printed: 3/7/2024

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

Fee: $0.00
Check Number:
Collected By:

West Milford Township
1480 UNION VALLEY ROAD
WEST MILFORD, NJ 07480

Date Issued 9/24/2007
Control Number
Permit Number 07-0238
Permit Issue Date 3/15/2007
Certificate Number 07-0238

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 53 EATONTOWN ROAD HEWITT NJ 07421 , NJ Block: 2413 Lot: 9 Qual:

Owner in Fee: DERBRECKI

Owner Address: 53 EATONTOWN ROAD HEWITT NJ 07421-

Telephone: [redacted]

Contractor KG BUILDERS

Address 83 MCKINLEY PLACE WEST MILFORD NJ 07480-

Telephone: 973/7281800 Fax: Federal Emp. Number: 22-3650138

License Number or Builders Registration Number: 13VH00197900

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

Use Group: R-5 Construction Classification:

Maximum Live Load: Maximum Occupancy Load:

Description of Work/Use: - RENOVATE EXISTING BASEMENT AND ADD NEW BATHROOM

Certificate Comments: RENOVATE EXISTING BASEMENT AND ADD NEW BATHROOM

☐ **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.

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 3/7/2024 U.C.C. F280 (rev. 08/05)

West Milford Township
1480 UNION VALLEY ROAD
WEST MILFORD, NJ 07480

Date Issued 7/11/2014
Control Number C-14-0108
Permit Number 14-0107
Permit Issue Date 2/5/2014
Certificate Number 14-0107

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 53 EATONTOWN RD HEWITT, NJ 07421 Block: 2413 Lot: 9 Qual:

Owner In Fee: DEBRECKI, MERCEDES & ROBERT

Owner Address: 53 EATONTOWN RD HEWITT NJ 07421

Telephone: [redacted]

Contractor JKR & SON CONST

Address 527 LAKESIDE RD HEWITT NJ 07421

Telephone: (973) 506-4363 Fax:

License Number or Builders Registration Number: 13VH05305600 Federal Emp. Number: 26-4815862

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: RENOVATE KITCHEN, INSTALL SLIDING DOOR AND REPLACE CENTER SUPPORT BEAM

Certificate Comments:

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

☑ **Certificate of Approval**
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Conditions to be met:

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☐ Partial or limited time period (years); see file

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 7/11/2014 U.C.C. F260 (rev. 08/05)

West Milford Township
1480 UNION VALLEY ROAD
WEST MILFORD, NJ 07480

Date Issued 8/7/2014
Control Number C-14-0700
Permit Number 14-0683
Permit Issue Date 6/30/2014
Certificate Number 14-0683

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 53 EATONTOWN RD HEWITT, NJ 07421 Block: 2413 Lot: 9 Qual:

Owner In Fee: DEBRECKI, MERCEDES & ROBERT

Owner Address: 53 EATONTOWN RD HEWITT NJ 07421

Telephone: [redacted]

Contractor DEBRECKI,MERCEDES & ROBERT

Address 53 EATONTOWN RD HEWITT NJ 07421

Telephone: [redacted] Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: 37X20 DECK WITH 12X12 WRAPAROUND

Certificate Comments:

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

☑ **Certificate of Approval**
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This certificate has an expiration date of:
Conditions to be met:

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☐ Partial or limited time period (years); see file

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 8/7/2014 U.C.C. F260 (rev. 06/05)

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 3/3/1997
Control #
Date Issued 3/3/1997
Permit # 97-0203

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN ROAD HEWITT, NJ 07421 , NJ

Owner in Fee: ANDERSON, MICHELENE

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480-

Tel. [redacted] Email

Contractor: M & T CONSTRUCTION, INC.

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480-

Email

Tel. 201/7288786 Fax.

Contractor License No. or, if new home, Bldrs Reg. No. 26495 Exp. 1/31/1999

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Emp. ID No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☐ All		
☐ Footing/Foundation		
☐ Struct/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:	Failure	Dates (Month/Day) 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				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed If Industrial Building:
Constr. Class Present Proposed State Approved
HUD
Number of Stories 2
Height of Structure 22 Ft.
Area - Largest Floor 1120 Sq. Ft.
New Bldg. Area / All Floors 2240 Sq. Ft.
Volume of New Structure 23392 Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $50,000
2. Rehabilitation
3. Total (1+2) $50,000

C. CERTIFICATION IN LIEU OF OATH

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

Signature

Print Name Here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NEW SINGLE FAMILY STICK BUILT DWELLING

TYPE OF WORK

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

FEE (Office Use Only)

	$304
Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	[illegible]
TOTAL FEE	[illegible]

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

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

PLUMBING SUBCODE

TECHNICAL SECTION

Date Received 3/3/1997
Control #
Date Issued 3/3/1997
Permit # 97-0203

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN ROAD HEWITT, NJ 07421 , NJ

Owner in Fee: ANDERSON, MICHELENE

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480-

Email

Tel. [redacted]

Contractor: FRANK DAYON

Address 230 MORSETOWN ROAD WEST MILFORD NJ 07480-

Email

Tel. [redacted] Fax.

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Contractor License No. 6053 Expiration Date: 6/30/1995

Federal Employee No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-3

Building Sewer Size ☐ Public Sewer ☐ Private Septic

Water Service Size ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work $7,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☐ Partial Underslab Utilities Approved
Date: by:

☐ Plumbing Plans Approved
Date:
Approved by:

Joint Plan Review Required
☐ Building ☐ Electrical
☐ Fire ☐ Elevator

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
☐ CO ☐ CCO ☐ CA
Date:
Approved by:

Truss Sys./Bracing

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				
Other				

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
NEW SINGLE FAMILY STICK BUILT DWELLING

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
2	Water Closet	$14
	Urinal/Bidet	
1	Bath Tub	$7
2	Lavatory	$14
	Shower	
	Floor Drain	
1	Sink	$7
1	Dishwasher	$7
	Drinking Fountain	
1	Washing Machine	$7
2	Hose Bibb	$14
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LP Gas Tank	
	Steam Boiler	
1	Hot Water Boiler	$42
	Sewer Pump	
	Interceptor/Separator	
1	Backflow Preventor	$7
	Greasetrap	
1	Sewer Connector	$42
1	Water Service Connection	$42
	Stacks	
	Other	

☐ Private Septic

☑ Private Well

Administrative Surcharge	$37
Minimum Fee	
State Permit Surcharge Fee	
TOTAL FEE	

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 3/3/1997
Date Issued 3/3/1997
Control #
Permit # 97-0203

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN ROAD HEWITT, NJ 07421 , NJ

Owner in Fee: ANDERSON, MICHELENE

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480-

Email

Tel. [redacted]

Contractor: ROBERT GUHR

Address 28 SYCAMORE LANE HEWITT NJ 07421-

Email

Tel. [redacted] Fax.

Lic No. 13005 Exp. Date 4/30/1999

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Employee No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R-3

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co. ROCKLAND ELECTRIC

Estimated Cost of Electrical Work $3,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☐ Partial/Underslab Approved

Partial Underslab Utilities Approved

Date: by:

☐ Electrical Plans Approved

Date: by:

Joint Plan Review Required

☐ Building ☐ Plumbing

☐ Fire ☐ Elevator

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date:

Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
NEW SINGLE FAMILY STICK BUILT DWELLING

QTY.	SIZE	ITEMS	FEE (Office Use Only)
4		Lighting Fixtures	
30		Receptacles	
15		Switches	
4		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
55		TOTAL NUMBERS	$28
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
1	4	KW Elec. Dryer/Recepticle	$7
1	2	KW Dishwasher	$7
		HP Garbage Disposal	
		KW Central A/C Unit	
1		HP/KW Space Heater/Air Hand	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	200	AMP Service	$30
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge	$11
Minimum Fee	
State Permit Surcharge Fee	[illegible]
TOTAL FEE	$[illegible]

U.C.C F120 (rev. 11/96)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

FIRE SUBCODE
TECHNICAL SECTION

Date Received 3/3/1997
Control #
Date Issued 3/3/1997
Permit # 97-0203

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN ROAD HEWITT, NJ 07421 , NJ

Owner in Fee: , ANDERSON, MICHELENE

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480- Email

Tel. [redacted]

Contractor: M & T CONSTRUCTION, INC. Tel. 201/7288786

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480- Email

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

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

Fire Alarm Contractor No. Expiration Date:

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Employee No. Fax.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed R-3

Constr. Class Present Proposed

Heating Systems: ☐ New or ☐ Modification to Existing or ☐ Conversion or ☐ Replacement

Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar ☐ Other

Location:

Total Cost of Fire Protection Work $250

Fuel Storage Tank:

Fuel Type ☐ *Flammable* or ☐ *Combustible*

Capacity

Fire Alarm System: ☐ New or ☐ Existing

Location of Panel:

Fire Suppression/Standpipe System:

☐ New or ☐ Existing

Location of Main Control Valve:

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 Seal and Signature and Printed Name

☐ Certified Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NEW SINGLE FAMILY STICK BUILT DWELLING

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)		
Supervisory Devices (tampers, low/high air)		
Signaling Devices (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		
CO2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fire Appliances ☐ Gas ☐ Oil ☐ Solid		
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	
TOTAL FEE	

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☐ Partial Underslab Utilities Approved Date: by:

☐ Fire Protection Plans Approved Date:

Approved by:

Joint Plan Review Required

☐ Building ☐ Plumbing ☐ Electrical ☐ 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
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Cumbust Tank				
Fireplace Venting				
Final				
Other				

U.C.C F140 (rev. 11/09)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 3/3/1997
Control #
Date Issued 3/3/1997
Permit # 97-0204

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN ROAD WEST MILFORD,NJ 07480 , NJ

Owner in Fee: ANDERSON, MICHELENE

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480-

Tel. [redacted] Email

Contractor: ANDERSON, MICHELENE

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480

Email

Tel. [redacted] Fax.

Contractor License No. or, if new home, Bldrs Reg. No. Exp.

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Emp. ID No. HO-

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☐ All		
☐ Footing/Foundation		
☐ Struct/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:	Failure	Dates (Month/Day) 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				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed If Industrial Building:
Constr. Class Present Proposed State Approved
Number of Stories HUD
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 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg.
2. Rehabilitation $500
3. Total (1+2) $500

C. CERTIFICATION IN LIEU OF OATH

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

Signature

Print Name Here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

DEMO OF HOUSE

TYPE OF WORK

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

FEE (Office Use Only)

	$50

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	
TOTAL FEE	

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

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 6/4/1997
Date Issued 6/4/1997
Control #
Permit # 97-0203+A

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN ROAD HEWITT, NJ 07421 , NJ

Owner in Fee: ANDERSON, MICHELENE

Address 24 GWYNETH ROAD WEST MILFORD NJ 07480- Email

Tel. [redacted]

Contractor: ROBERT GUHR

Address 28 SYCAMORE LANE HEWITT NJ 07421- Email

Tel. [redacted] Fax.

Lic No. 13005 Exp. Date 4/30/1999

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Employee No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R-3

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $200

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☐ Partial/Underslab Approved

Partial Underslab Utilities Approved

Date: by:

☐ Electrical Plans Approved

Date: by:

Joint Plan Review Required

☐ Building ☐ Plumbing

☐ Fire ☐ Elevator

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date:

Approved by:

INSPECTIONS — Dates (Month/Day)

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

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
1		TOTAL NUMBERS	$24
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Hand	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	200	AMP Service	$30
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge	$8
Minimum Fee	
State Permit Surcharge Fee	
TOTAL FEE	$62

U.C.C F120 (rev. 11/09)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 3/15/2007
Control #
Date Issued 3/15/2007
Permit # 07-0238

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN ROAD HEWITT NJ 07421 , NJ

Owner in Fee: DERBRECKI

Address 53 EATONTOWN ROAD HEWITT NJ 07421-

Email

Tel. [redacted]

Contractor: NORTH STAR ELECTRICAL

Address 12 BECKS COURT OAKRIDGE NJ 07438

Email

Tel. 973/7288900 Fax. (973) 598-5120

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Contractor License No. 8100 Expiration Date: 6/30/1900

Federal Employee No. 262827647

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5

Building Sewer Size ☐ Public Sewer ☐ Private Septic

Water Service Size ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work $2,900

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☐ Partial Underslab Utilities Approved
Date: by:

☐ Plumbing Plans Approved
Date:
Approved by:

Joint Plan Review Required
☐ Building ☐ Electrical
☐ Fire ☐ Elevator

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
☐ CO ☐ CCO ☐ CA
Date:
Approved by:

Truss Sys./Bracing

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
RENOVATE EXISTING BASEMENT AND ADD NEW BATHROOM

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	$25
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	$25
1	Shower	$25
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LP Gas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventor	
	Greasetrap	
	Sewer Connector	
	Water Service Connection	
	Stacks	
	Other	

☐ Private Septic
☐ Private Well

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	
TOTAL FEE	

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

U.C.C F130 (rev. 11/09)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 3/15/2007
Date Issued 3/15/2007
Control #
Permit # 07-0238

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN ROAD HEWITT NJ 07421 . NJ

Owner in Fee: DERBRECKI

Address 53 EATONTOWN ROAD HEWITT NJ 07421-

Email

Tel. [redacted]

Contractor: ALL ABOUT ELECTRIC, INC.

Address 48 LAKESIDE AVENUE HASKELL NJ 07420-

Email

Tel. 201/6169647 Fax

Lic No. 11752 Exp. Date 4/30/1994

Home Improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Employee No. 22-3184895

B. ELECTRICAL CHARACTERISTICS

Use Group Present R-5 Proposed R-5

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $3,100

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☐ Partial/Underslab Approved

Partial Underslab Utilities Approved

Date: by:

☐ Electrical Plans Approved

Date: by:

Joint Plan Review Required

☐ Building ☐ Plumbing

☐ Fire ☐ Elevator

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date:

Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
RENOVATE EXISTING BASEMENT AND ADD NEW BATHROOM

QTY.	SIZE	ITEMS	FEE (Office Use Only)
16		Lighting Fixtures	
11		Receptacles	
10		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
37		TOTAL NUMBERS	$80
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Hand	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec Sign/Outline Light	

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	
TOTAL FEE	

U.C.C F120 (rev. 11/09)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 3/15/2007
Control #
Date Issued 3/15/2007
Permit # 07-0238

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN ROAD HEWITT NJ 07421 , NJ

Owner in Fee: DERBRECKI

Address 53 EATONTOWN ROAD HEWITT NJ 07421-

Tel. [redacted] Email

Contractor: KG BUILDERS

Address 83 MCKINLEY PLACE WEST MILFORD NJ 07480-

Email

Tel. 973/7281800 Fax.

Contractor License No. or, if new home, Bldrs Reg. No. Exp.

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Emp. ID No. 22-3650138

C. CERTIFICATION IN LIEU OF OATH

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

Signature

Print Name Here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

RENOVATE EXISTING BASEMENT AND ADD NEW BATHROOM

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☐ All		
☐ Footing/Foundation		
☐ Struct/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:	Failure	Dates (Month/Day) 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				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed If Industrial Building:
Constr. Class Present Proposed State Approved
Number of Stories HUD
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 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg.
2. Rehabilitation $14,000
3. Total (1+2) $14,000

TYPE OF WORK

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

FEE (Office Use Only)

$378

Administrative Surcharge
Minimum Fee
State Permit Surcharge Fee
TOTAL FEE

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

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 6/24/2014
Control # C-14-0700
Date Issued 6/30/2014
Permit # 14-0683

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN RD HEWITT, NJ 07421

Owner in Fee: DEBRECKI, MERCEDES & ROBERT

Address 53 EATONTOWN RD HEWITT NJ 07421

Tel. [redacted] Email

Contractor: DEBRECKI,MERCEDES & ROBERT

Address 53 EATONTOWN RD HEWITT NJ 07421

Email

Tel. [redacted] Fax.

Contractor License No. or, if new home, Bldrs Reg. No. Exp.

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Emp. ID No.

C. CERTIFICATION IN LIEU OF OATH

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

Signature

Print Name Here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

37X20 DECK WITH 12X12 WRAPAROUND

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☐ All		
☐ Footing/Foundation		
☐ Struct/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:	Failure	Dates (Month/Day) 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				
Barrier-Free				

TYPE OF WORK

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

FEE (Office Use Only)

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	$26
TOTAL FEE	$476

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed R-5 If Industrial Building:
Constr. Class Present Proposed State Approved
Number of Stories HUD
Height of Structure Ft. Est. Cost of Bldg. Work:
Area - Largest Floor Sq. Ft. 1. New Bldg.
New Bldg. Area / All Floors Sq. Ft. 2. Rehabilitation
Volume of New Structure Cu. Ft. 3. Total (1+2) $15,000
Total Land Area Disturbed Sq. Ft.

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

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 2/3/2014
Control # C-14-0108
Date Issued 2/5/2014
Permit # 14-0107

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN RD HEWITT, NJ 07421

Owner in Fee: DEBRECKI, MERCEDES & ROBERT

Address 53 EATONTOWN RD HEWITT NJ 07421

Tel. [redacted] Email

Contractor: JKR & SON CONST

Address 527 LAKESIDE RD HEWITT NJ 07421

Email

Tel. (973) 506-4363 Fax.

Contractor License No. or, if new home, Bldrs Reg. No. Exp.

Home Improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Emp. ID No. 26-4815862

C. CERTIFICATION IN LIEU OF OATH

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

Signature

Print Name Here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

RENOVATE KITCHEN, INSTALL SLIDING DOOR AND REPLACE CENTER SUPPORT BEAM

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☐ All		
☐ Footing/Foundation		
☐ Struct/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:	Failure	Dates (Month/Day) 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				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed R-5 If Industrial Building:
Constr. Class Present Proposed State Approved
Number of Stories HUD
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 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg.
2. Rehabilitation $8,000
3. Total (1+2) $8,000

TYPE OF WORK

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

FEE (Office Use Only)

Rehabilitation	$240

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	$14
TOTAL FEE	$254

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

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 2/3/2014
Control # C-14-0108
Date Issued 2/5/2014
Permit # 14-0107

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN RD HEWITT, NJ 07421

Owner in Fee: DEBRECKI, MERCEDES & ROBERT

Address 53 EATONTOWN RD HEWITT NJ 07421

Email

Tel. [redacted]

Contractor: BSE MECHANICAL LLC

Address 1165 GREENWOOD LAKE TPK RINGWOOD NJ 07456

Email

Tel. (973) 728-0765 Fax.

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Contractor License No. 12145 Expiration Date:

Federal Employee No. 20-1051058

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5

Building Sewer Size ☐ Public Sewer ☐ Private Septic

Water Service Size ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work $1,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☐ Partial Underslab Utilities Approved
Date: by:

☐ Plumbing Plans Approved
Date:
Approved by:

Joint Plan Review Required
☐ Building ☐ Electrical
☐ Fire ☐ Elevator

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
☐ CO ☐ CCO ☐ CA
Date:
Approved by:

Truss Sys./Bracing

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				
Other				

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
RENOVATE KITCHEN, INSTALL SLIDING DOOR AND REPLACE CENTER SUPPORT BEAM

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
1	Sink	$30
1	Dishwasher	$30
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LP Gas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventor	
	Greasetrap	
	Sewer Connector	
	Water Service Connection	
	Stacks	
	Other	

☐ Private Septic
☐ Private Well

Administrative Surcharge	
Minimum Fee	$70
State Permit Surcharge Fee	$3
TOTAL FEE	$73

U.C.C F130 (rev. 11/09)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 2/3/2014
Date Issued 2/5/2014
Control # C-14-0108
Permit # 14-0107

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN RD HEWITT, NJ 07421

Owner in Fee: DEBRECKI, MERCEDES & ROBERT

Address 53 EATONTOWN RD HEWITT NJ 07421

Email

Tel. [redacted]

Contractor: SWITCH ELECTRIC INC

Address 58 SECOND AVE LITTLE FALLS NJ 07424

Email

Tel. (973) 890-1147 Fax.

Lic No. 11177 Exp. Date

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Employee No. 22-3239097

B. ELECTRICAL CHARACTERISTICS

Use Group Present R-5 Proposed R-5

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $500

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☐ Partial/Underslab Approved

Partial Underslab Utilities Approved

Date: by:

☐ Electrical Plans Approved

Date: by:

Joint Plan Review Required

☐ Building ☐ Plumbing

☐ 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
Rough				
Barrier-Free				
Trench				
Temp. Serv				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
RENOVATE KITCHEN, INSTALL SLIDING DOOR AND REPLACE CENTER SUPPORT BEAM

QTY.	SIZE	ITEMS	FEE (Office Use Only)
4		Lighting Fixtures	
10		Receptacles	
6		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
20		TOTAL NUMBERS	$70
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
1	2	KW Dishwasher	$30
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Hand	
		KW Baseboard Heat	
1	2	HP Motors 1/+ HP	$30
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	$1
TOTAL FEE	$131

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 5/30/2024
Control # C-24-0725
Date Issued 6/12/2024
Permit # 24-0636

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN RD HEWITT, NJ 07421

Owner in Fee: DEBRECKI MERCEDES

Address 53 EATONTOWN RD HEWITT NJ 07421

Tel. [redacted] Email

Contractor: OBAR SYSTEMS INC.

Address 2969 ROUTE 23 SOUTH NEWFOUNDLAND NJ 07435

Email

Tel. 973/6970112 Fax.

Contractor License No. or, if new home, Bldrs Reg. No. Exp.

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Emp. ID No. 22-2706419

C. CERTIFICATION IN LIEU OF OATH

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

Signature

Print Name Here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

RADON REMEDIATION SYSTEM

open

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☐ All		
☐ Footing/Foundation		
☐ Struct/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:	Failure	Dates (Month/Day) 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				
Barrier-Free				

TYPE OF WORK

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

FEE (Office Use Only)

Rehabilitation	$70
Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	$2
TOTAL FEE	$72

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed R-5 If Industrial Building:
Constr. Class Present Proposed State Approved
Number of Stories HUD
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 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg.
2. Rehabilitation $1,000
3. Total (1+2) $1,000

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 5/30/2024
Date Issued 6/12/2024
Control # C-24-0725
Permit # 24-0636

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

Block 2413 Lot 9 Qualification Code

Work Site Location: 53 EATONTOWN RD HEWITT, NJ 07421

Owner in Fee: DEBRECKI MERCEDES

Address 53 EATONTOWN RD HEWITT NJ 07421

Email

Tel. [redacted]

Contractor: MARTIN MARIANI ELECTRIC

Address 221 OAKWOOD AVE NORTH HALEDON NJ

Email

Tel. (201) 704-4348 Fax.

Lic No. Exp. Date

Home Improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Employee No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present R-5 Proposed R-5

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $175

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☐ Partial/Underslab Approved

Partial Underslab Utilities Approved

Date: by:

☐ Electrical Plans Approved

Date: by:

Joint Plan Review Required

☐ Building ☐ Plumbing

☐ Fire ☐ Elevator

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date:

Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
RADON REMEDIATION SYSTEM

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
1		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
2		TOTAL NUMBERS	$70
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Hand	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge	
Minimum Fee	$70
State Permit Surcharge Fee	
TOTAL FEE	$70

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.