



122
(v)

CITY OF ELIZABETH

CITY CLERK'S OFFICE

50 WINFIELD SCOTT PLAZA
ELIZABETH, N.J. 07201

February 8, 2022

EMAIL: opra+request-29158-7595db12@requests.opramachine.com
Noah Burton

RE: 56 – 64 BROAD STREET
(OPRA #122)

Dear Mr. Burton

Pursuant to your OPRA request dated February 4, 2022, enclosed please find the memos and documents from various department within the City Hall.

Should you have any questions with regards to this matter, please feel free to contact me at (908) 820-4134.

Very truly yours,

Vicki Eanes

Vicki Eanes
City Clerk's Office



ELIZABETH FIRE DEPARTMENT

FIRE PREVENTION BUREAU

411 Irvington Avenue, Elizabeth, NJ 07208
Office (908) 820-4040 Fax (908) 629-0292

RECEIVED

February 8, 2022

FEB 8 2022

NOAH BURTON

CITY OF ELIZABETH

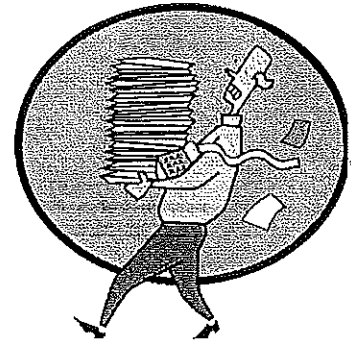
Re: 56-64 BROAD STREET, ELIZABETH, NEW JERSEY 07202

This letter is in regard to the recent environmental assessment request that was submitted to the Elizabeth Fire Prevention Bureau. Our records indicate that we have information only on 64 Broad Street, regarding underground storage tanks or violations. Records are viewed by appointment only. Please contact our office to set up time and date.

Thank You,

Ms. Sandie Ciaramella
Elizabeth Fire Prevention Bureau

Memorandum



To Vicki Eanes, Clerk 2
From: Paloma Rodrigues, Secretarial Asst.
Date February 4, 2022
Re: 56-64 Broad St

As per your request there are 0 complaints for the above-mentioned property.

RECEIVED

FEB 4 2022

CITY CLERK'S OFFICE

MEMORANDUM

Memo

To: Vicki Eanes, Clerk 2
From: Lisa M. Hernandez, Health Department
Date: February 4, 2022
Re: 56-64 Broad Street



THESE ARE ALL THE FILES ON RECORD IN THE CITY OF ELIZABETH HEALTH DEPARTMENT AS PER YOUR REQUEST. THERE ARE NO OPEN FILES OR VIOLATIONS ON RECORD PERTAINING TO ENVIRONMENTAL CONCERNS OR HAZARDOUS MATERIAL INCIDENTS FOR THE AFOREMENTIONED ADDRESS.

RECEIVED

FEB 7 2022

CITY CLERK'S OFFICE



City of Elizabeth

50 Winfield Scott Plaza
Elizabeth, NJ 07201
908-820-4000
www.elizabethnj.org

Report a Concern

Admin

Reference # RAC-2020-07351
Status: Closed
Date In Progress: 11/30/2020
Disposition:

Date Entered: 11/30/2020 4:39:00 PM
Created By: Paola Moreno
Closed Date: 01/13/2021

Concern Details

Type: Unsanitary Conditions
Source: Inspector Walkaround
Description: Unsanitary conditions dirty boxes in way of walking

Location Details

Address: 56 BROAD ST (DOLLAR TREE) # 64
Block: 6 Lot: 45
Description:

Complainant Details

Name:
Address:
Email: Phone #

Property Owner Details

Name: BROAD ST RLTY ENTERPRISES LLC
Address: 64 BROAD ST, ELIZABETH ,NJ 07201
Email: Phone #

Work Details

Total Hours Worked: 0.00
Total Material Cost: \$0.00
Total Labor Cost: \$0.00
Total Cost: \$0.00

Work Details

Status	Date Assigned	Date Completed	Employee Assigned	Work Cost	License Plate #
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Violation Details

Notice Date: Comply Date:
Officer Assigned: Hajja Abdur-Rahman

Ordinances Cited

Status	Ordinance	Comments
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Summons Details

Summons #	Ordinance	Fine	Ordinance	Disposition
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Internal Notes

Date & Time	By	Note
1/13/2021 9:49:00 AM	Paola Moreno	12/30/2020 On 12/30/2020 observed unsanitary conditions ceiling leaking in the aisle with buckets and cardboards on floor, litter, dirt and items on floor throughout establishment. An inspection was conducted and establishment was ordered to close per health officer. PIC informed must correct violations in order to re-open business.
1/13/2021 9:53:00 AM	Paola Moreno	On 1/8/2021 all violations has been corrected, no new violations observed at this time. Establishment will be allowed to re-open for business. No further action to be taken at this time. Case to be closed. Nicole Flores (Manager)
11/30/2020 4:40:00 PM	Paola Moreno	Complaint #I23727

Notes to Complainant

Date & Time	By	Note
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CITY OF ELIZABETH BUREAU OF CONSTRUCTION

INTEROFFICE MEMORANDUM

FEBRUARY 4, 2022

TO: Vicki Eanes, City Clerk

FROM: Jasmin Torres, Bureau of Construction

SUBJECT: Request for Government Records

**RE: 56-64 Broad Street
OPRA # 122**

We did a thorough review of our current records and we were **able** to locate requested documents under the above-mentioned property. Attached are copies. If you have any questions or concerns, please contact us at (908)820-4084.

Thank you.

RECEIVED

FEB 4 2022

CITY CLERK'S OFFICE

Call 510-1414



CONSTRUCTION PERMIT APPLICATION

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

BLOCK 60 LOT 45 QUALIFICATION CODE _____ ADDRESS (SITE) 58 Broad St PERMIT NO. 14-0831

I. IDENTIFICATION

1. Proposed Work Site at: 58 Broad St

2. Name of Owner in Fee: THE HANARI Tel. [REDACTED]

Address [REDACTED] Zip code [REDACTED]

3. Ownership in Fee: Public [REDACTED] Private [REDACTED]

4. Principal Contractor: WINNER DEVELOPMENT License No. OR, if new home, Builder Reg. No. [REDACTED] Exp. Date 05-30-15

Federal Employee No. [REDACTED] FAX: [REDACTED] Tel. [REDACTED]

5. Architect or Engineer: [REDACTED] Contact [REDACTED]

6. Responsible Person in Charge: Work has Begun 2 Month PERSCO

Tel. [REDACTED] FAX: [REDACTED]

Stor

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
							Approval	Rejection
1. ☐ Minor Work								
2. ☐ New Building								
3. ☐ Addition								
4. ☐ a. Repair								
☒ b. Alteration								
☐ c. Renovation								
☐ d. Reconstruction								
5. ☐ Fire Protection								
6. ☐ Plumbing								
7. ☐ Electrical								
8. ☐ Elevator Devices								
9. ☐ Asbestos Abat. Subct. B								
10. ☐ Lead Hazard Abatement								
11. ☐ Demolition								
TOTAL COSTS								

OPTIONAL (for office use only)

V. FEE SUMMARY (for office use only)

	Update	Update
1. Building	\$ 150	
2. Electrical		
3. Plumbing		
4. Fire Protection		
5. Elevator Devices		
6. Subtotal	\$	
7. Less 20% for State Plan Review		
8. Subtotal	\$ 12	
9. State Permit Surcharge Fee	\$	
10. Subtotal		
11. Cert. of Occupancy		
12. Other		
13. TOTAL	\$ 162	

VI. BUILDINGSITE CHARACTERISTICS

1. Number of Stories		(office use only)
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	
11. Max. Live Load	no	
12. Max. Occupancy Load		

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change in Use Group, Indicate Former:

4. No. of dwelling units: All Units Income-restricted

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change in Use Group, Indicate Former:

III. DO YOU WANT: (optional)

1. ☐ Partial Releases

2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts

2. ☐ Dumbwaiters/Moving Walks

3. ☐ High Pressure Boilers

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

10. ☐ Swimming Pools, Spas and Hot Tubs

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

- A. ☐ I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 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.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

- B. ☐ I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

- C. ☐ I further certify that I will perform or supervise the following work:

C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical C.4. ☐ Plumbing

- 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 further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

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

Signature _____

Date

05/18/14

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

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 _____

Address _____

Telephone (_____) _____

Signature _____

III. ☐ LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

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									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐ COAH									
☐									

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

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

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. _____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____



CITY OF ELIZABETH
50 WINFIELD SCOTT PLAZA
ELIZABETH, NJ 07201
908-8204091

CERTIFICATE IDENTIFICATION

Date Issued: 05/20/2015
Control #: 653
Permit #: 20140831

Block: 6 Lot: 45 Quali: _____

Work Site Location: 56-64 BROAD ST

ELIZABETH

Owner in Fee: BROAD ST RLTY ENTERPRISES L L C

Address: 64 BROAD ST

ELIZABETH NJ 07201

Telephone: _____

Agent/Contractor: WINDSOR DEVELOPERS

Address: 965 WEST COUNTY LINE RD.

LAKEWOOD NJ 08701

Telephone: _____

Lic. No./ Bldrs. Reg. No.: _____ Federal Emp. No.: _____

Social Security No.: _____

☐ 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 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 _____

RAYWANT P. SARRAN Construction Official

U.C.C 260 (rev. 5/03)

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

Fees: \$0.00

Paid [X] Check No.: 1137-1208

Collected by: MP



CITY OF ELIZABETH
50 WINFIELD SCOTT PLAZA
ELIZABETH, NJ 07201
908 - 8204091

5/21/14
Control Number: 653
Application Date: 05/19/2014

14-0831

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 6	Lot: 45	Qualification Code:	
Work Site Location:	56-64 BROAD ST ELIZABETH		
Owner In Fee:	BROAD ST RLTY ENTERPRISES L L C		Contractor: WINDSOR DEVELOPERS
Address:	64 BROAD ST ELIZABETH NJ 07201		Address: 965 WEST COUNTY LINE RD. LAKEWOOD NJ 08701
Telephone:	[REDACTED]		Telephone: [REDACTED]
Use Group(s):	M		Lic. No. / Bids. Reg. No.: [REDACTED]
			Federal Emp. No.: [REDACTED]

is hereby granted permission to perform the following work :

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

(Subchapter 8 only)

DESCRIPTION OF WORK:
INTERIOR DEMOLITION

ESTIMATED COST OF WORK:

Cost of Construction: 0.00
Cost of Rehabilitation: 10,000.00
Cost of Demolition: 0.00

Total Cost: \$10,000.00

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.

RAYWANT P. SARRAN

Construction Official

5/19/14
Date

PAYMENTS (Office Use Only)	
Building	\$150.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$17.00
DCA Minimum Fee	\$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$167.00
All Fees Waived:	No

Amount to be Paid: \$167.00

Checks #
1137
1208
[Signature]

Note:

CITY OF ELIZABETH

BUILDING SUBCODE TECHNICAL SECTION

Date Received: 05/19/2014
Control #: 653

Date Issued: 5/21/14
Permit #: 14-0831

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE.

Block: 6 Lot: 45 Qualification Code:

Work Site Location: 56-64 BROAD ST.

Owner Details

Name: BROAD ST RTY ENTERPRISES L.L.C.

Address: 64 BROAD ST
ELIZABETH NJ 07201

Telephone:

E-mail:

Contractor Details

Contractor: WINDSOR DEVELOPERS

ATTN:

Address: 965 WEST COUNTY LINE RD.
LAKEWOOD NJ 08701

Telephone:

E-mail:

Federal Emp. No.:

Lic No. or Bids Reg. No.: Expiration Date:

Home Improvement Registration No. or Exemption Reason:

B. BUILDING CHARACTERISTICS

Use Group Present: M

Constr. Class Present:

No. of Stories

Height of Structure

Area - Largest Floor

New Bldg. Area/All Floors

Volume of New Structure

Total Land Area Disturbed

Max. Live Load

Max. Occupancy Load

Proposed:

If Industrialized Building

State Approved HUD

Est. Cost of Bldg. work:

1. New Building 0.00

2. Rehabilitation 10,000.00

3. Demolition 0.00

4. Total (1+2+3) \$10,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[] All

[] Footings/Foundations

[] Structural/Framework

[] Exterior

[] Interior

[] Other: *5/14/14*

Joint Plan Review Required:

[] Elec. [] Plumb. [] Fire [] Elev.

SUBCODE APPROVAL FOR PERMIT

Date:

Approved by:

SUBCODE APPROVAL FOR CERTIFICATE

[] CO [] CCO [] CA

Date:

Approved by:

INSPECTIONS

Dates (Month/Day)

Failure Failure Approval Initial

Type: 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

[X] Rehabilitation

[] Roofing

[] Siding

[] Fence

[] Pylon Sign

[] Ground or Wall Sign

[] Pool

[] Retaining Wall

[] Asbestos Abatement

[] Lead Haz. Abatement

[] Radon Remediation

[] Other 1:

[] Other 2:

[] Other 3:

[] Demolition

[]

[]

[]

[]

[]

[]

FEE (Office Use Only)

\$150.00

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee

TOTAL FEE

\$17.00

\$167.00



BUILDING SUBCODE TECHNICAL SECTION



6-45

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

Block 6 Lot 45 Qualification Code _____

Work Site Location 58 Broad St

Owner In Fee: FRED HARTAL

Address 58 Broad St City ALBANY State NY Zip 12202

Contractor ALBANY DEVELOPERS Tel. [REDACTED] Fax [REDACTED]

Address ALBANY DEVELOPERS City ALBANY State NY Zip 12202

Contractor License No. or Builder Registration No. [REDACTED] Exp. Date 04-30-15

Home Improvement Contractor Registration No. or Exemption Reason [REDACTED]

Federal Emp. ID No. [REDACTED] FAX [REDACTED]

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	INSPECTIONS
Date	Initial
☐ No Plans Required	☐ Footing
☐ All	☐ Footing Bonding
☐ Footings/Foundations	☐ Foundation
☐ Structural/Framework	☐ Slab
☐ Exterior	☐ Frame
☐ Interior	☐ Truss Sys./Bracing
☐ Joint Plan Review Required	☐ Barrier-Free
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator	☐ Insulation
SUBCODE APPROVAL FOR PERMIT	
Date:	Finishes -Base Layer
Approved by:	Finishes -Final
SUBCODE APPROVAL FOR CERTIFICATE	
☐ CO ☐ CCO ☐ CA	TCO
Date:	Mechanical
Approved by:	Energy
Barrier-Free	

B. BUILDING CHARACTERISTICS

Use Group Present M Proposed Store

No. of Stories 1

Height of Structure 14'16" ft.

Area — Largest Floor 14916 sq. ft.

New Bldg. Area/All Floors 14916 sq. ft.

Volume of New Structure 14916 cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:

State Approved _____ HUD _____

Est. Cost of Bldg. Work: _____

1. New Bldg. \$ 13,000

2. Rehabilitation \$ _____

3. Total (1+2) \$ 13,000

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

C. CERTIFICATION IN LIEU OF OATH

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

Sign here: [Signature]

Print name here: ALBANY DEVELOPERS

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Dem. of interior

of store per plan

Interior

of floor to floor

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Rehabilitation

☐ Roofing

☐ Siding

☐ Fence _____ Height (exceeds 6') _____ Sq. Ft. _____

☐ Sign _____ Height (exceeds 6') _____ Sq. Ft. _____

Date Received 5/19/14
Control # [Signature]
Date Issued [Signature]
Permit # [Signature]

Administrative Surcharge \$ _____

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.

OPRA request - 56-64 Broad Street, Elizabeth NJ

100
(V)

Noah Burton <opra+request-29158-7595db12@requests.opramachine.com>

Wed 2/2/2022 5:54 PM

To: Yolanda M. Roberts <yroberts@elizabethnj.org>

*** CAUTION ***

This message came from an EXTERNAL address. DO NOT click on links or attachments unless you know the sender and the content is safe. Suspicious? Forward the message to spamreport@elizabethnj.org <<mailto:spamreport@elizabethnj.org>>

RECEIVED
FEB 4 2022

Dear Elizabeth City,

CITY CLERK'S OFFICE
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:

Copies of any Certificates of Occupancy or Violations for 56-64 Broad Street, Elizabeth NJ

Yours faithfully,

Noah Burton

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-29158-7595db12@requests.opramachine.com

Is yroberts@elizabethnj.org the wrong address for OPRA requests to Elizabeth City? If so, please contact us using this form:

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

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:

<https://opramachine.com/help/officers>

View this OPRA request & responses online:

https://opramachine.com/request/56_64_broad_street_elizabeth_nj

Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.
