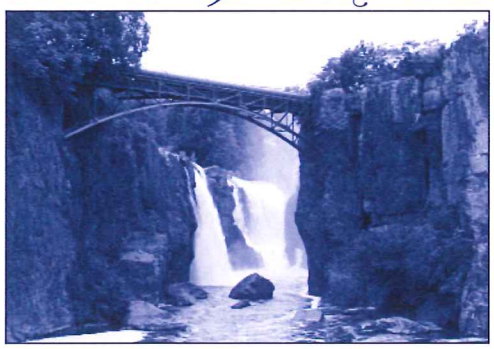
Office of the City Clerk



SONIA L. GORDON, RMC
City Clerk

CITY HALL - 3RD FLOOR
155 MARKET STREET
PATERSON, NEW JERSEY 07505

OFFICE: (973) 321-1310
FAX: (973) 321-1311
E-MAIL: sgordon@patersonnj.gov

July 5, 2019

opra+request-6117-df6523b2@requests.opramachine.com
Ms. Alicia Jones

FILE NO: CA19:1127

Dear Ms. Jones:

Enclosed please find the information you have requested from the City of Paterson under the Open Public Records Act (OPRA).

The response is in full and final satisfaction of your OPRA request submitted to the City Clerk's Office.

If you have additional questions, please submit a new OPRA request.

Sincerely,

Sonia L. Gordon

SONIA L. GORDON
CITY CLERK

/th

Enc.

CH/9: 1127
Due Date: 7/9/19

Twydaisha Hilbert

From: Alicia Jones <opra+request-6117-df6523b2@requests.opramachine.com>
Sent: Thursday, June 27, 2019 9:17 PM
To: Opra Request
Subject: OPRA request - All open/closed construction permits and/or violation from 1/2000 to present

Dear Paterson 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:I am requesting an OPRA asking for all open/closed construction permits,violations or liens for this property/properties from 1/2000 to present. Also, I would like to know information regarding the presence of an underground oil tank, if applicable, including permits, remediation report,environmental reports, and surveys showing underground oil tank location. 934 e 19th St
BLOCK 6410 LOT 23

Yours faithfully,

Alicia Jones

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-6117-df6523b2@requests.opramachine.com

Is oprarequest@patersonnj.gov the wrong address for OPRA requests to Paterson City? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=paterson_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/all_openclosed_construction_perm_21

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.

RECEIVED
CITY OF PATERSON, NJ
2019 JUN 28 A 8:59
SONIA L. GORDON
CITY CLERK

DIVISION OF COMMUNITY AFFAIRS
BUREAU OF INSPECTIONS
Municipal Complex - 111 Broadway
(973) 321-1232

Ward:
Area:

Date: 09/16/15
To: DISLA, MODESTO R.
934 E 19TH ST
PATERSON NJ 07501

Notice: V5-00419
Property Location:
934 E 19TH ST
Block/Lot/Qual: 6410. 23.

NOTICE OF VIOLATION(S)

The Housing/Property Maintenance Code of the City of Paterson requires all buildings be maintained in a safe and sanitary condition, as per Chapter 271.

Upon inspection, we find the reference property in violation and hereby notify you to correct all violations listed below by 09/24/15 .

Phone 973-321-1232
8:30 - 9:30 AM
4:00 - 4:30 PM

Very truly yours,
DAVID B. GILMORE, PHM, DIRECTOR
BUREAU OF INSPECTIONS

ORDINANCE	DESCRIPTION
271-26.A	Clean or remove rubbish or garbage
271-27.B1	Repair/replace exterior stairs, porches, and railings.

GUILTY COURT 2-20-15 2ND COURT REQUEST 4-2-15 PREVIOUS VIOL;ATIN V4-01909

PLACED ON INSP. DESK 06/10/15 (LC) SEE ATTACHED.

COURTDATE: 8/7/15 DOCKET# S-15-3987
GUILTY $100+30 NM
GAVE TO HEREDIA TO REASSIGN

SENT NOTICE 9-16-15 3RD TIME FOR PREVIOUS VIOLATIONS NOT CORRECTED..JJ

COURT REQUEST SENT DID NOT CORRECT VIOLATIONS ON DUE DATE 9-24-15..JJ

ACTIONS REQUIRED

271-26A Clean or remove rubbish or garbage from SIDE AND REAR REMOVE ALL DEBRI MUST MAINTAIN
271-27B Repair/replace exterior stairs, porches, and railings.REPAIR STEPS AT FRONT AND MISSING RAILING AT
PORCH

YOU MAY APPEAL THIS NOTICE OF VIOLATIONS OR ANY PORTION THEREOF BEFORE HOUSING APPEALS PURSUANT TO THE HOUSING PROPERTY MAINTENANCE CODE, SECTION 271-19.

PERMITS MAY BE REQUIRED FOR SOME REPAIRS. FOR MORE INFORMATION CALL THE ABOVE NUMBER.

Juan Jimenez
Housing & Zoning Insp.
(973)321-1232 Ext: 2528
jjimenez@patersonnj.gov

DIVISION OF COMMUNITY AFFAIRS
BUREAU OF INSPECTIONS
Municipal Complex - 111 Broadway
(973) 321-1232

Ward:
Area:

Date: 09/20/17
To: DISLA, MODESTO R.
13801 WIRELESS WAY
c/o CALIBER HOME LOANS
OKLAHOMA CITY,OK 73134

Notice: FIN00216
Property Location:
934 E 19TH ST
Block/Lot/Qual: 6410. 23.

NOTICE OF VIOLATION(S)

The Housing/Property Maintenance Code of the City of Paterson requires all buildings be maintained in a safe and sanitary condition, as per Chapter 271.

Upon inspection, we find the reference property in violation and hereby notify you to correct all violations listed below by _____.

Phone 973-321-1232
8:30 - 9:30 AM
4:00 - 4:30 PM

Very truly yours,
DAVID B. GILMORE, PHM, DIRECTOR
BUREAU OF INSPECTIONS

ORDINANCE	DESCRIPTION
FORCLOSURE	ORDINANCE REQUIRING CREDITORS FORCLOSING ON A PROPERTY WITHIN THE CITY TO REGISTER WITH THE DIVISION OF COMMUNITY IMPROVEMENTS.
FORCLOSURE	ORDINANCE REQUIRING CREDITORS FORCLOSING ON A PROPERTY WITHIN THE CITY TO REGISTER WITH THE DIVISION OF COMMUNITY IMPROVEMENTS.

SEE NOTES

ACTIONS REQUIRED

YOU MAY APPEAL THIS NOTICE OF VIOLATIONS OR ANY PORTION THEREOF BEFORE HOUSING APPEALS PURSUANT TO THE HOUSING PROPERTY MAINTENANCE CODE, SECTION 271-19.

PERMITS MAY BE REQUIRED FOR SOME REPAIRS. FOR MORE INFORMATION CALL THE ABOVE NUMBER.

DIANA VAZQUEZ
Inspector
DVAZQUEZ@PATERSONNJ.GOV

DIVISION OF COMMUNITY AFFAIRS
BUREAU OF INSPECTIONS
Municipal Complex - 111 Broadway
(973) 321-1232

Ward:
Area:

Date: 12/09/14
To: DISLA, MODESTO R.
934 E 19TH ST
PATERSON NJ 07501

Notice: V4-01889
Property Location:
934 E 19TH ST
Block/Lot/Qual: 6410. 23.

NOTICE OF VIOLATION(S)

The Housing/Property Maintenance Code of the City of Paterson requires all buildings be maintained in a safe and sanitary condition, as per Chapter 271.

Upon inspection, we find the reference property in violation and hereby notify you to correct all violations listed below by 12/11/14 .

Phone 973-321-1232
8:30 - 9:30 AM
4:00 - 4:30 PM

Very truly yours,
DAVID B. GILMORE, PHM, DIRECTOR
BUREAU OF INSPECTIONS

ORDINANCE	DESCRIPTION
COMPLAINT	COMPLAINT

General inspection required by Housing
referral by zoning inspector M. Lopez
Legal attic
tc NE 12-11-14 12-16-14 12-30-14 NO CONTACT NO ENTRY CLOSE CASE

ACTIONS REQUIRED

YOU MAY APPEAL THIS NOTICE OF VIOLATIONS OR ANY PORTION THEREOF BEFORE HOUSING APPEALS PURSUANT TO THE HOUSING PROPERTY MAINTENANCE CODE, SECTION 271-19.

PERMITS MAY BE REQUIRED FOR SOME REPAIRS. FOR MORE INFORMATION CALL THE ABOVE NUMBER.

Lisette Heredia
Chief Hosuing Inspector
(973)321-1232 Ext: 2569
lheredia@patersonnj.gov

DIVISION OF COMMUNITY AFFAIRS
BUREAU OF INSPECTIONS
Municipal Complex - 111 Broadway
(973) 321-1232

Ward:
Area:

Date: 12/11/14
To: DISLA, MODESTO R.
934 E 19TH ST
PATERSON NJ 07501

Notice: V4-01909
Property Location:
934 E 19TH ST
Block/Lot/Qual: 6410. 23.

NOTICE OF VIOLATION(S)

The Housing/Property Maintenance Code of the City of Paterson requires all buildings be maintained in a safe and sanitary condition, as per Chapter 271.

Upon inspection, we find the reference property in violation and hereby notify you to correct all violations listed below by 12/29/14 .

Phone 973-321-1232
8:30 - 9:30 AM
4:00 - 4:30 PM

Very truly yours,
DAVID B. GILMORE, PHM, DIRECTOR
BUREAU OF INSPECTIONS

ORDINANCE	DESCRIPTION
271-26.A	Clean or remove rubbish or garbage
271-27.B1	Repair/replace exterior stairs, porches, and railings.

EXTERIOR COURT REQUEST 1-5-15

GIVEN TO INSPECTOR ON 01/14/15 (LC)
COURTDATE: 2/20/15 DOCKET# S-15-611
GUILTY $100+30 NM 2ND COURT REQUEST 4-2-15 V5-00419

ACTIONS REQUIRED

271-26A Clean or remove rubbish or garbage from SIDE AND REAR REMOVE ALL DEBRI WOOD ECT... AND TOILET MUST
MAINYAIN
271-27B Repair/replace exterior stairs, porches, and railings.REPAIR BROKEN BRICK AT FRONT STEPS AND PROVIDE
RAILING AROUND FRONT FIRST FL PORCH

YOU MAY APPEAL THIS NOTICE OF VIOLATIONS OR ANY PORTION THEREOF BEFORE HOUSING APPEALS PURSUANT TO THE HOUSING PROPERTY MAINTENANCE CODE, SECTION 271-19.

PERMITS MAY BE REQUIRED FOR SOME REPAIRS. FOR MORE INFORMATION CALL THE ABOVE NUMBER.

Lisette Heredia
Chief Hosuing Inspector
(973)321-1232 Ext: 2569
lheredia@patersonnj.gov

DIVISION OF COMMUNITY AFFAIRS
BUREAU OF INSPECTIONS
Municipal Complex - 111 Broadway
(973) 321-1232

Ward:
Area:

Date: 01/11/19
To: DISLA, MODESTO R.
934 E 19TH ST
PATERSON NJ 07501

Notice: V9-00076
Property Location:
934 E 19TH ST
Block/Lot/Qual: 6410. 23.

NOTICE OF VIOLATION(S)

The Housing/Property Maintenance Code of the City of Paterson requires all buildings be maintained in a safe and sanitary condition, as per Chapter 271.

Upon inspection, we find the reference property in violation and hereby notify you to correct all violations listed below by _____.

Phone 973-321-1232
8:30 - 9:30 AM
4:00 - 4:30 PM

Very truly yours,
DAVID B. GILMORE, PHM, DIRECTOR
BUREAU OF INSPECTIONS

ORDINANCE	DESCRIPTION
RAP INSPECTION	Verification of occupancy/ vacancy inspection for RAP pursuant to T.C.O.P. Chapter 271 Housing-Property Maintenance Code, Ordinance No. 14-004
RAP-HOUSING-PRO	Chapter 271 Housing-Property Maintenance Code, Ordinance No. 14-004 Verification of occupancy/ vacancy inspection for RAP pursuant to T.C.O.P. Chapter 271 Housing-Property Maintenance Code, Ordinance No. 14-004

ACTIONS REQUIRED

YOU MAY APPEAL THIS NOTICE OF VIOLATIONS OR ANY PORTION THEREOF BEFORE HOUSING APPEALS PURSUANT TO THE HOUSING PROPERTY MAINTENANCE CODE, SECTION 271-19.

PERMITS MAY BE REQUIRED FOR SOME REPAIRS. FOR MORE INFORMATION CALL THE ABOVE NUMBER.

Jose Fermin
Housing Inspector
(973)321-1232 Ext: 2564
jfermin@patersonnj.gov

DIVISION OF COMMUNITY AFFAIRS
BUREAU OF INSPECTIONS
Municipal Complex - 111 Broadway
(973) 321-1232

Ward:
Area:

Date: 01/06/15
To: DISLA, MODESTO R.
934 E 19TH ST
PATERSON NJ 07501

Notice: V5-00016
Property Location:
934 E 19TH ST
Block/Lot/Qual: 6410. 23.

NOTICE OF VIOLATION(S)

The Housing/Property Maintenance Code of the City of Paterson requires all buildings be maintained in a safe and sanitary condition, as per Chapter 271.

Upon inspection, we find the reference property in violation and hereby notify you to correct all violations listed below by _____.

Phone 973-321-1232
8:30 - 9:30 AM
4:00 - 4:30 PM

Very truly yours,
DAVID B. GILMORE, PHM, DIRECTOR
BUREAU OF INSPECTIONS

ORDINANCE	DESCRIPTION
COMPLAINT	COMPLAINT

3RD FL SEE NOTES

ACTIONS REQUIRED

YOU MAY APPEAL THIS NOTICE OF VIOLATIONS OR ANY PORTION THEREOF BEFORE HOUSING APPEALS PURSUANT TO THE HOUSING PROPERTY MAINTENANCE CODE, SECTION 271-19.

PERMITS MAY BE REQUIRED FOR SOME REPAIRS. FOR MORE INFORMATION CALL THE ABOVE NUMBER.

Lisette Heredia
Chief Housing Inspector
(973)321-1232 Ext: 2569
lheredia@patersonnj.gov

DIVISION OF COMMUNITY AFFAIRS
BUREAU OF INSPECTIONS
Municipal Complex - 111 Broadway
(973) 321-1232

Ward:
Area:

Date: 07/20/18
To: DISLA, MODESTO R.
934 E 19TH ST
PATERSON NJ 07501

Notice: V8-11599
Property Location:
934 E 19TH ST
Block/Lot/Qual: 6410. 23.

NOTICE OF VIOLATION(S)

The Housing/Property Maintenance Code of the City of Paterson requires all buildings be maintained in a safe and sanitary condition, as per Chapter 271.

Upon inspection, we find the reference property in violation and hereby notify you to correct all violations listed below by 08/03/18 .

Phone 973-321-1232
8:30 - 9:30 AM
4:00 - 4:30 PM

Very truly yours,
DAVID B. GILMORE, PHM, DIRECTOR
BUREAU OF INSPECTIONS

ORDINANCE	DESCRIPTION
271-27.B1	Repair/replace exterior stairs, porches, and railings.

ACTIONS REQUIRED

271-27B Repair/replace exterior stairs, porches, and railings. MISSING RAILINGS AT FRONT.

COURT DATE: 9.21.18
OUTCOME: ADJOURNED 10.12.18

LRV

COURT DATE: 10.12.18
OUTCOME: ADJOURNED 11.16.18

LRV

COURT DATE: 12.7.18
OUTCOME: GUILTY $100 + $33

LRV

YOU MAY APPEAL THIS NOTICE OF VIOLATIONS OR ANY PORTION THEREOF BEFORE HOUSING APPEALS PURSUANT TO THE HOUSING PROPERTY MAINTENANCE CODE, SECTION 271-19.

PERMITS MAY BE REQUIRED FOR SOME REPAIRS. FOR MORE INFORMATION CALL THE ABOVE NUMBER.

Juan Jimenez
Housing & Zoning Insp.
(973)321-1232 Ext: 2528
jjimenez@patersonnj.gov

CITY OF PATERSON CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: _____
2. Owner Name: _____ Tel. (___) _____
   Address _____
3. Principal Contractor: _____ Tel. (___) _____
   Address _____
   Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
4. Architect or Engineer: _____ Tel. (___) _____
   Address _____
5. Responsible Person in Charge of Work _____ Tel. (___) _____

II. PROPOSED WORK

A. TYPE OF WORK

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

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☐	Building/ Structural	$ _____
2. ☐	Plumbing	_____
3. ☐	Electrical	_____
4. ☐	Fire Protection	_____
5. ☐	Other _____	_____
6. ☐	Other _____	_____
	TOTAL COST	$ _____

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

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

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R–1)
2. ☐ Multi-Family (R–2)
   HMD Reg. No.: _____
3. ☐ Two Family (R–3b)
4. ☐ One-Family (R–3a)

If new construction, enter no. of dwelling units _____

If other than new construction, enter no. of dwelling units:

Before Construction: _____
After Construction: _____
Net Gain (or loss): _____

B. NON-RESIDENTIAL

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

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

B. HEATING FUEL

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

C. TYPE OF SEWAGE DISPOSAL

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

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

14. No. of Stories _____
15. Height of Structure _____ Ft.

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

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

A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.

B. ☐ I further certify that I will perform the work below.

B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing

C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 46:3B-1 et. seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

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

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

SIGNATURE _____ DATE _____

II. AGENT SECTION

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

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

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

☐ **Check if contractor.**

AGENT NAME _____ TEL.( ) _____

ADDRESS _____

_____

SIGNATURE _____

PRIOR APPROVALS CHECKLIST

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

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

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

PERMIT CONTROL

I. PLAN REVIEW STATUS

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

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

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

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

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

III. CERTIFICATES ISSUED

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

IV. ON-GOING INSPECTIONS

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

V. FEE SUMMARY

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

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

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

DATE _____ Collected By _____

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			
OTHER			
OTHER			
– LESS: Refunds			(_____)
TOTAL COLLECTED AFTER PERMIT ISSUED			$ _____

C. TOTAL CONSTRUCTION FEES COLLECTED

CITY OF
PATERSON

CONSTRUCTION PERMIT

PERMIT NO. 3601A
DATE ISSUED 1-15-92
Block R1186 Lot 22
Subdivision

A. IDENTIFICATION

Owner Kahn
Address 934 E. 19th St
Pat., NJ
Tel. ( )

Agent
Address
Tel. ( )
Lic. No.
Federal Emp. No.

Work Site Address Same

PAYMENTS

Permit Fee $ 32.-
Fees Remitted $
☑ Check No. 10720
☐ Cash
☐ Other
Collected By
Date 1-15-92

is hereby granted permission
to perform the following work:

☐ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER

Description of work:
Re-Roof
Replacing Sheetrock
on walls

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: $ 4000-

P. T. Baldini
CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

CITY OF
PATERSON

CONSTRUCTION PERMIT

PERMIT NO. 3488
DATE ISSUED 8-4-87
Block 446 Lot 22
Subdivision

A. IDENTIFICATION

Owner Khan
Address 934 E. 19th St
City
Tel. ( )
Work Site Address Same

Agent
Address
Tel. ( )
Lic. No.
Federal Emp. No.

PAYMENTS

Permit Fee: $ 20
Fees Remitted: $
☐ Check No. 196
☒ Cash
☐ Other
Collected By: [illegible]
Date:

is hereby granted permission
to perform the following work:

☐ BUILDING ☒ ELECTRICAL

☐ PLUMBING ☐ FIRE PROTECTION

☐ OTHER

Description of work:

6 Receptacles

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: $ 200

PTB
CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

CITY OF
PATERSON

CONSTRUCTION PERMIT

PERMIT NO. 8486
DATE ISSUED 10-21-dd
Block 446 Lot 32
Subdivision

A. IDENTIFICATION

Owner Khan
Address 934 E 19th St
Paterson

Agent
Address

Tel. ( )
Work Site Address Same

Tel. ( )
Lic. No.
Federal Emp. No.

PAYMENTS

Permit Fee $ 34
Fees Remitted $
☒ Check No. 1795
☐ Cash
☐ Other
Collected By: JM
Date:

is hereby granted permission
to perform the following work:

☐ BUILDING ☒ ELECTRICAL
☐ PLUMBING ☒ FIRE PROTECTION
☐ OTHER

Description of work:

14 Smoke Alarms

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: $ 400

PT Baldini
CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

CITY OF PATERSON

BUILDING SUBCODE TECHNICAL SECTION

PERMIT NO. 3449 C
DATE ISSUED 1-15-87
REVISION DATE
Block R1186 Lot 22
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner MR KAHN
Address 924 EAST 19ST. PATERSON N-J
Tel. ( )
Work Site Address Same

Contractor CLAUDES CONSTRUCTION
Address 314 TRENTON AVE PATERSON N-J
Tel. 201 279-5287
Lic. No. 1676
Federal Emp. No. 22-2726078

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

Re-Roof (1 roof)

Replace Sheetrock on walls

☐ See Plans

TYPE OF WORK:

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

	Fee Basis	Fee
		$
		32
SUBTOTAL		$
Minimum Building Fee (if applicable)		$
Total Building Fee (Greater of Minimum or Subtotal)		$

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories _____ Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area—Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: $ 4,000.00

D. COMMENTS

2 Fan

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F - 110 (8/83) Green = Office Copy White = Applicant Copy Beige = Inspector Copy

CITY OF PATERSON

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 3408 (2)
DATE ISSUED 8-4-87
REVISION DATE
Block 1186 Lot 22
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

Owner Emamuel Khan
Address 934-E. 19th St. Paterson
Tel. ( ) 942-2477
Work Site Address Same

When changing contractors, notify this office

Contractor CANOVA ELEC.
Address 104 LAKEVIEW AV PATERSON NJ.
Tel. 742-4569
Lic.No./Bus. Permit. 1746
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

Robert Canova
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee
	Switching Outlets	$		H.V.A.C. Equipment	$
	Lighting Outlets			Switching Devices	
	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric				
	Heating, Electric				
	Switches				
	Lighting Fixtures			Other [redacted]	
6	Receptacles			Other [redacted]	
	Bonding, Pool/Vault			Other	
	Service/Feeders			Other	
	COLUMN 1	$		COLUMN 2	$

Fee	
COLUMN 1	$
COLUMN 2	
SUBTOTAL	$
Minimum Electrical Fee (If applicable)	$ 10
Total Electrical Fee *(Greater of Minimum or Subtotal)*	$ [redacted]

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed
Service: _____ Amps _____ Phase _____ System Type
_____ Wire _____ Volts _____ Wiring Method
Total No. of Meters: _____
Estimated Cost of Electrical Work: $ 200 —

D. COMMENTS

3-STORIES.

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-120 (8/83) Green = Office Copy White = Applicant Copy Purple = Inspector Copy

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 19416
DATE ISSUED 10-31-18
REVISION DATE
Block R.11816 Lot 22
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* — When changing contractors, notify this office

Owner Mr. & Mrs. Enamul Khan
Address 934 E. 19th St. Pat
Tel. ( )
Work Site Address 934 East 19th Street
Paterson, N.J.

Contractor Par Electric Co.
Address 48 Bourmier Crescent
Elmwood Park, N.J.
Tel. ( ) 791-4837
Lic.No./Bus. Permit. 2816
Federal Emp. No. 141 52 6870

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

Frank J. Bonna
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee
	Switching Outlets	$		H.V.A.C. Equipment	$
	Lighting Outlets			Switching Devices	
	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric		14	Smoke Detectors	
	Heating, Electric				
	Switches			Other	
	Lighting Fixtures			Other	
	Receptacles			Other	
	Bonding, Pool/Vault			Other	
	Service/Feeders				
	COLUMN 1	$		COLUMN 2	$

Fee	
COLUMN 1	$
COLUMN 2	
SUBTOTAL	$
Minimum Electrical Fee (If applicable)	$
Total Electrical Fee *(Greater of Minimum or Subtotal)*	$ 14

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed
Service: _____ Amps _____ Phase _____ System Type
_____ Wire _____ Volts _____ Wiring Method
Total No. of Meters: _____
Estimated Cost of Electrical Work: $ 400

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-120 (8/83)

OFFICE COPY

CITY OF PATERSON

FIRE SUBCODE TECHNICAL SECTION

PERMIT NO. 0184
DATE ISSUED 10-21-88
REVISION DATE
Block 1184 Lot 22
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner Mr. & Mrs. Enaqual Khan
Address 934 E. 19th St Pat
Tel. ( )
Work Site Address 934 East 19th Street Patterson, N.J.

Contractor Bar Electric Co.
Address 48 Fournier Crescent Elmwood Park, N.J.
Tel. ( ) 791-4837
Lic. No. 2815
Federal Emp. No. 141 52 6870

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

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

Mark J. Bermea
AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other
Area Sprinkled: ☐ Full ☐ Partial (specify in comments)
No. of Heads: No. of Spare Heads:
☐ Valves Supervised — Method:
Water Supply — Source: Size:
FD Connection Location:
Estimated Cost of Work: $

FEE $

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other
Manual Pull: ☐ Yes ☐ No
Locations:
Estimated Cost of Work: $

$

B3. ALARM

TYPE: ☐ Manual ☒ Automatic
Supervision Type: ☒ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $

FEE $ 20.-

B4. STAND PIPES

Pipe Size: Pump Size:
Water Source: Size:
FD Connection Location:
Hose Station: ☐ Yes ☐ No
Estimated Cost of Work: $

$

B5. OTHER

$
$
$

Subtotal $
Minimum Fire Protection Fee (If Applicable) $
Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ 20.-

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP Present Proposed
Heating Systems — Location:
Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other
Fuel Storage Tank — Location: Fuel Type: Capacity:
Total Estimated Cost of Fire Protection Work: $

D. COMMENTS

14 SD.
Fournier
10/21/88

☐ Partial Releases ☐ Prototype Processing

CITY OF PATERSON

FIRE SUBCODE TECHNICAL SECTION

PERMIT NO. 1-10
DATE ISSUED 1-0-88
REVISION DATE
Block 1124 Lot 22
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner Mr. & Mrs. Enamual Khan
Address 934 E. 19th St
Tel. ( )

Work Site Address 934 East 19th Street
Patterson, N.J.

Contractor Bar Electric Co.
Address 48 Fournier Crescent
Elmwood Park, N.J.
Tel. ( ) 791-4837
Lic. No. 2816
Federal Emp. No. 141 52 6870

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)
I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

FEE

TYPE: ☐ Wet ☐ Dry ☐ Other
Area Sprinkled: ☐ Full ☐ Partial (specify in comments)
No. of Heads: No. of Spare Heads:
☐ Valves Supervised — Method:
Water Supply — Source: Size:
FD Connection Location:
Estimated Cost of Work: $ $

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other
Manual Pull: ☐ Yes ☐ No
Locations:
Estimated Cost of Work: $ $

B3. ALARM

FEE

TYPE: ☐ Manual ☒ Automatic
Supervision Type: ☒ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $ $ 20.—

B4. STAND PIPES

Pipe Size: Pump Size:
Water Source: Size:
FD Connection Location:
Hose Station: ☐ Yes ☐ No
Estimated Cost of Work: $ $

B5. OTHER

$
$
$

Subtotal $
$ X
Minimum Fire Protection Fee (If Applicable) $
Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ 20.—

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP Present Proposed
Heating Systems — Location:
Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other
Fuel Storage Tank — Location: Fuel Type: Capacity:
Total Estimated Cost of Fire Protection Work: $

D. COMMENTS

14 S.P.
Enamual
10/21/88

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-140 (8/83) Green = Office Copy White Applicant Copy Pink = Inspection Copy

PLAN REVIEW AND INSPECTION – FIRE

DATE	JOB CONDITION/COMMENTS
1-23-19	SD @ app

JOB SUMMARY

☐ No Plans Required

☒ Plan Review Approved

Date: 10/24/18

Approved By: [signature]

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: _____

Inspected By: _____

INSPECTIONS

Type	Failure Date			Approval Date
☐ Fire Suppression Test				
☐ Fire Alarm Test				
☐ Smoke Test				
☐ TCO				
☐ Other _____				
☐ Other _____				
☐ Other _____				
☐ Other _____				

BUILDING BUREAU
INSPECTOR'S REPORT
Paterson, New Jersey

PERMIT # 5[illegible]P

Date 2/26/88

Location 934-E 19th Ave.

Owner [illegible]

Address 22

FINDINGS:

Check floor - improper repair

Inside 3rd floor Apartment there is a section of paint that has blisters on ceiling.

Also sheetrock ceiling in Bath room has open up or away from joists.

Front roof over porch appears that work was not done

Please advise.

Form BLDG-2009

CITY OF PATERSON CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: 934 E 19th St
2. Owner Name: Sydney Roberts Tel. ( )
   Address 493 Park Ave
3. Principal Contractor: Tel. ( )
   Address
   Lic. No. or Builder Reg. No. Federal Emp. No.
4. Architect or Engineer: Tel. ( )
   Address
5. Responsible Person in Charge of Work Tel. ( )

II. PROPOSED WORK

A. TYPE OF WORK

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

B. CATEGORIES OF WORK

Permit/Category	Estimated
1. ☒ Building/ Structural	$ 200
2. ☐ Plumbing	
3. ☐ Electrical	
4. ☐ Fire Protection	
5. ☐ Other	
6. ☐ Other	
TOTAL COST	$

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

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

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R–1)
2. ☐ Multi-Family (R–2)
   HMD Reg. No.:
3. ☒ Two Family (R–3b)
4. ☐ One-Family (R–3a)

If new construction, enter no. of dwelling units

If other than new construction, enter no. of dwelling units:
Before Construction:
After Construction:
Net Gain (or loss):

B. NON-RESIDENTIAL

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

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

B. HEATING FUEL

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

C. TYPE OF SEWAGE DISPOSAL

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

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

14. No. of Stories
15. Height of Structure Ft

LDS PT-B 10414C

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

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

A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.

B. ☐ I further certify that I will perform the work below.

B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing

C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 46:3B-1 et. seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

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

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

SIGNATURE _____ DATE _____

II. AGENT SECTION

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

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

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

☐ **Check if contractor.**

AGENT NAME _____ TEL.( ) _____

ADDRESS _____

_____

SIGNATURE _____

PRIOR APPROVALS CHECKLIST

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

SUBCODES AND SPECIAL REGULATIONS APPLICABLE

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

PERMIT CONTROL

I. PLAN REVIEW STATUS

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

☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN – FILE LOCATION AND NO.

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

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

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

III. CERTIFICATES ISSUED

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

IV. ON-GOING INSPECTIONS

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

V. FEE SUMMARY

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

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

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

DATE _____ Collected By _____

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

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

C. TOTAL CONSTRUCTION FEES COLLECTED

CITY OF
PATERSON

CONSTRUCTION PERMIT

PERMIT NO. 3808
DATE ISSUED 8/22/85
Block 11182 Lot 22
Subdivision

A. IDENTIFICATION

Owner Sydney Roberts Agent
Address 143 Park Pl Address owner
Paterson
Tel. ( ) 742-8385 Tel. ( )
Work Site Address 934 E 19th St Lic. No.
Federal Emp. No.

PAYMENTS

Permit Fee $ 35
Fees Remitted $
☐ Check No.
☑ Cash
☐ Other
Collected By
Date: 8/22/85

is hereby granted permission
to perform the following work:

☒ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER

Description of work:
Enclose 2nd fl. porch - 4 windows

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.

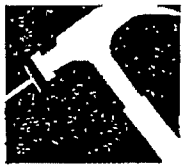
Estimated Cost of Work: $ 300

CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83). Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

CITY OF
PATERSON

BUILDING SUBCODE TECHNICAL SECTION



PERMIT NO. 0805
DATE ISSUED 8/22/15
REVISION DATE
Block K 1186 Lot 22
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner SYDNEY ROBERTS
Address ~~[illegible]~~ 493 PARK ave
Tel. ( ) 742 83 85
Work Site Address 934 East 19 ST

Contractor
Address
Tel. ( )
Lic. No.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

Mapl.
close in the SIDE porch
install 4 window

$ 200

☐ See Plans

TYPE OF WORK:

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

	Fee Basis	Fee
		$
		25
SUBTOTAL		$
Minimum Building Fee (if applicable)		$
Total Building Fee *(Greater of Minimum or Subtotal)*		$

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories _____ Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area—Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: $ 200

D. COMMENTS

2 Fam
- Mason

☐ Partial Releases ☐ Prototype Processing

CITY OF PATERSON

BUILDING SUBCODE TECHNICAL SECTION

PERMIT NO. _____
DATE ISSUED _____
REVISION DATE _____
Block _____ Lot _____
Subdivision _____

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* — When changing contractors, notify this office

Owner _____
Address _____
_____
Tel. ( ) _____
Work Site Address _____
_____

Contractor _____
Address _____
_____
Tel. ( ) _____
Lic. No. 1076
Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

_____
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

☐ See Plans

TYPE OF WORK:

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

	Fee Basis	Fee
		$
SUBTOTAL		$
Minimum Building Fee (if applicable)		$
Total Building Fee *(Greater of Minimum or Subtotal)*		$

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories _____ Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area—Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: $ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION – BUILDING

DATE	JOB CONDITION/COMMENTS

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☐ All		
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: _____

Inspected By: _____

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☐ Frame				
☐ Architectural				
☐ Insulation				
☐ Finishes				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other _____				

BUILDING BUREAU
INSPECTOR'S REPORT

Paterson, New Jersey

PERMIT # 141186

Date 8/12/05 22

Location 934 E 19th St

Owner

Address

FINDINGS:

Roberto Rodriguez & Lucetta

Enclosing Front porch

2ND Floor

NO permit

NO ONE Home

SEND LETTER

RV

Form BLDG-2009

VIOLATION — COMPLAINT

BUILDING DEPARTMENT

CITY OF PATERSON

1935

INSPECTOR

DATE 7/24/35

ADDRESS 934 E 19th St

VIOLATION ☐ COMPLAINT ☒

REMARKS

Working W/o permit

On 20 ft. Please ck

By

CHIEF BUILDING INSPECTOR

UNIFORM CONSTRUCTION CODE

XX NOTICE OF VIOLATION AND ORDER TO TERMINATE

☐ NOTICE AND ORDER TO PAY PENALTY

PERMIT NO. _____
DATE ISSUED _____
Block _____ Lot _____
Subdivision _____
Notice No. _____

IDENTIFICATION

OWNER:
Name Sidney & Lucetta Roberts
Address 934 East 19th Street
Town/State/Zip Paterson, New Jersey
Work Site Address 934 East 19th Street

AGENT:
Name _____
Address _____
Town/State/Zip _____

ACTION

DATE OF NOTICE: 8-15-85 COMPLIANCE DUE DATE: 8-30-85 DATE OF INSPECTION: 8-14-85

TAKE NOTICE that you have been found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder (N.J.A.C. 5:23-2.30 and 2.31) in that:

Enclosing front porch-2nd floor without the required permit.
You must stop work immediately and obtain required permit.

You are hereby ordered to terminate the said violations on or before Aug. 30, 1985. The owner and agent/contractor bear joint responsibility for bringing about compliance. No Certificate of Occupancy or Approval will be issued unless the said violations are corrected.

☒ Failure to comply with this Order will subject you to a penalty of $ 50/$20.00 per day.

☐ You are hereby ordered to pay a penalty in the amount of $_____ for each violation for a tota penalty of $_____. Each day that any of the said violations remain outstanding after _____ shall result in an additional penalty of $ 20.00 per day.

If you wish to contest the validity of the above action, in accord with N.J.A.C. 5:23-2.35 et. seq., you may request a hearing before the Construction Board of Appeals of the City of Paterson, within 20 business days of receipt of these Orders. The Application to the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your address and name, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of your reliance on the Regulations and, if neccessary, a brief statement setting forth you position and the nature of the relief sought by you. You may also append any documents that you conside useful.

The fee for an appeal is $ 50.00 to be forwarded with your application to the Board of Appeals office at 111 Broadway, Paterson, New Jersey 07505

If you have questions concerning this matter, please call: Inspector Iannelli -881-35

NOTICE OF VIOLATION AND ORDER TO TERMINATE: Ralph Iannelli

Paterson Fire Department
300 McBride Ave
Paterson, NJ 07501
Phone: (973) 321-1400
pfd@patersonnj.gov

System ID#: 7505
State Reg#: M1608-17363-001
Local ID: 20091211

To: U.S. Ba Trust, N.A., ,
13801 V eless Way
Oklahon City, OK 73134

Statement Fees and Penalties Due

Municipality: aterson City
Premises: ultiple Dwelling
34 East 19th St
aterson, NJ 07501

LHU Classification: 4

Use Group: None

Date Issued: 07/ /19

Total Amount D e: $1,140.00

As of this date, f s and/or penalties are due for the above referenced property. The fees and /or penalties now due are:

Invoice#	Fee ype	Description	Date Invoiced	Original Amount	Amount Waived	Amount Due	Original Due Date
14-003032	Regi ration	Registration for the year 2014	01/31/14	$190.00	$0.00	$190.00	03/15/14
14-010085	Regi ration	Registration for the year 2015	01/01/15	$190.00	$0.00	$190.00	01/31/15
16-001899	Regi ration	Registration for the year 2016	01/01/16	$190.00	$0.00	$190.00	01/31/16
17-001901	Regi ration	Registration for the year 2017	01/01/17	$190.00	$0.00	$190.00	01/31/17
18-002255	Regi ration	Registration for the year 2018	01/01/18	$190.00	$0.00	$190.00	01/31/18
19-002303	Regi ration	Registration for the year 2019	01/01/19	$190.00	$0.00	$190.00	01/31/19

TOTAL AMOU T DUE: **$1,140.00**

TAKE NOTICE HAT, Pursuant to N.J.A.C. 5:70-2.12, penalty assessments can be compromised or settled only if it shall be likely t result in compliance. Moreover, no such disposition can be finalized while the subject violation continues to ex t.

If you do not un erstand this invoice, need assistance, or desire further information, please call the Paterson Fire Department at 33211400.

By: Brian J. McDermott, F.O.

Brian J.McDermott, Chief of Department/Fire Official

City Hall
155 Market St
Paterson, New Jersey 07505-1467
Phone: (973) 321-1300
Fax: (973) 321-1301 or 1302

DATE: June 29, 2019

PROPERTY: 934 E 19th Street

OWNER: U.S. Bank Trust NA

BLOCK & LOT: 6410-23

Taxes have been paid on the above property through the 2nd qtr of 20 19., as of the Posting Date of 5/8/19.

Please see Attached delinquent sewer charges

Mary Ann Williams
Revenue Collection

NOTE: THIS IS NOT AN OFFICIAL TAX SEARCH. SUBJECT TO SUBSEQUENT PAYMENT OF TAXES, SEWER CHARGES AND, SUBJECT TO ALL PENDING LIENS OR ADJUSTMENTS.

BLQ: 6410. 23. Tax Year: 2019 to 2019
Owner Name: U.S. BANK TRUST,N.A. Property Location: 934 E 19TH ST

Tax Year: 2019	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Original Billed:	2,174.16	2,174.15	0.00	0.00	4,348.31
Payments:	2,174.16	2,174.15	0.00	0.00	4,348.31
Balance:	0.00	0.00	0.00	0.00	0.00

Date	Qtr	Type Description	Code	Check No	Mthd	Reference		Batch Id	Principal	Interest	2019 Prin Balance
		Original Billed							4,348.31		4,348.31
04/19/19	1	Payment	001	410113201	CK	29198	168	T104	2,174.16	0.00	2,174.15
05/08/19	2	Payment CORELOGIC-2019Q2	001		CK	32351	4826	CORELOG	2,174.15	0.00	0.00

Total Principal Balance for Tax Years in Range: 0.00

CITY OF PATERSON

Customer Recent Activity Report

Report Date: 06/29/19 10:53 AM

Account Id: 10001433-0
Owner: U.S. BANK TRUST,N.A.
Property Location: 934 E 19TH ST

Active Services:
Sewer
Spec Assmts

Recent Billings:	Bill Date	Due Date	Amount Billed	Amount Due	Usage	Principal Balance	Interest/Penalty
Spec Assmts	04/26/19	06/14/19	80.00	80.62		80.00	0.62
Sewer	08/23/18	05/30/19	151.75	153.40		151.75	1.65
Sewer	08/23/18	02/28/19	151.75	0.00		0.00	0.00
Sewer	08/23/18	11/03/18	151.75	0.00		0.00	0.00
Sewer	08/23/18	08/31/18	151.75	0.00		0.00	0.00
Sewer	06/27/18	05/31/18	166.75	0.00		0.00	0.00
Sewer	09/06/17	05/31/18	166.75	0.00		0.00	0.00
Sewer	09/06/17	02/28/18	151.75	0.00		0.00	0.00
Sewer	09/06/17	11/03/17	151.75	0.00		0.00	0.00
Sewer	09/06/17	08/03/17	151.75	0.00		0.00	0.00
Sewer	10/25/16	05/03/17	151.75	0.00		0.00	0.00
Sewer	10/25/16	02/02/17	151.75	0.00		0.00	0.00
		Current Balance:		**$234.02**		**$231.75**	**$2.27**

Recent Payments & Adjustments:

Type	Date	Amount	Description
Adjustment	01/31/19	196.20	ZOB()
Payment	06/27/18	680.26	CS
Adjustment	06/27/18	58.26	ZIN(INT)
Payment	05/31/17	657.38	CS