

CLIFFSIDE PARK BLDG DEPT.
525 PALISADE AVENUE
CLIFFSIDE PK, NJ 07010

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 06/17/20
Date Issued 06/17/20
Control #
Permit # 2020-177

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

Block 3101 Lot 5 Qual
Work Site Location 64 GRANT AVE

Owner in Fee ALASIO, VICTOR & VICTORIA
Address 64 GRANT AVE
CLIFFSIDE PARK, NJ 07010-

Tel. (201) 370-8650

Contractor STEVEN RICH & ASSOCIATES
Address 222 DELAWARE AVE.
CLIFTON, NJ 07014-

Tel. (973) 458-1188 Fax () -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3536789

B. FIRE PROTECTION CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
Constr Class - Present Proposed
Heating Systems [] New [] Existing [] HVAC
Type: [] Gas [] Oil [] Elect [] Solar
[] Other
Location:
Total Est Cost of Fire Prot Work \$ 1,395

JOB SUMMARY (Office Use Only) INSPECTIONS
PLAN-REVIEW Type Failure Failure Approval Initial

[] No Plans Required Alarm Sys
[] Partial - Underslab Util. Appr Suppr Test
Date: 6/13/20 Appr by: MM Standpipe
[] Fire Plans Approved Fire Pump
Date: Appr by: PreEng Sys
Joint Plan Review Required: Mechanical
[] Build [] Elect [] Plumb Smoke Ctl
SUBCODE APPR - PERM [] Elev TCO
Date: Appr by: Fl/Comb Tnk
SUBCODE APPR - CERTIF Firepl Vnt
[] CO [] CCO [] CA Final
Date: Appr by: Other

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature/Contractor Seal

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks
Type: [X] Flammable Liquid [X] Combust Liquid
[] LPG [] LNG Capacity 0 Fuel
Alarm Systems [] 110v Interconnected NUMBER
[] System

Alarm Devices (smoke, heat, pulls, water/flow) 0
Supervisory Devices (tamper, low/high air) 0
Signaling Devices (horn/strobes, bells) 0
Other Devices 0
TOTAL 0

Suppression Systems
Fire Pump 0 GPM Type 0
Dry Pipe/Alarm Valves 0
Pre-action Valves 0
Sprinkler Heads (Dry and Wet) 0
Standpipes 0
Pre-Engineered Systems 0

Wet Chemical 0
Dry Chemical 0
CO2 Suppression 0
Foam Suppression 0
Halon Suppression 0
Other 0

Kitchen Hood Exhaust System 0
Smoke Control System 0
Gas [] or Oil [] Fired Appliances 0
Other 0
Other 0
Other 0

Administrative Surcharge \$ 0
Paid [X] Check # 199 Minimum Fee \$ 0
Collected by: JR TOTAL FEE \$ 100
DCA State Permit Fee \$ 3

CLIFFSIDE PARK BLDG DEPT.
525 PALISADE AVENUE
CLIFFSIDE PK, NJ 07010

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 07/07/20
Date Issued 07/07/20
Control #
Permit # 2020-222

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 3101 Lot 5 Qual
Work Site Location 64 GRANT AVE
Owner in Fee ALASIO, VICTOR & VICTORIA
Address 64 GRANT AVE
CLIFFSIDE PARK, NJ 07010-
Tel. (201) 370-8650
Contractor BRIAN JOHNSON PLUMBING
Address 221 RAMBLER AVE.
NEW MILFORD, NJ 07646-
Tel. (651) 206-5368 Fax () -
Lic. No. or Bids. Reg. No. 12215
Federal Emp. No. 04-0842288

B. PLUMBING CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 3,500

JOB SUMMARY (Office Use Only) INSPECTIONS Dates (Month/Day)
PLAN REVIEW Type Failure Failure Approval Initial
[] No Plans Required Slab
[] Partial - Underslab Util Appr Rough
Date: Appr by: Water
[] Plumb Plans Approved Sewer
Date: Appr by: Fixtures
Joint Plan Review Required: Gas Equip
[] Build [] Elect [] Fire Gas Piping
SUBCODE APPR - PERM [] Elev LPGas Tank
Date: Appr by: FuelOil Pip
SUBCODE APPR - CERTIF Solar
[] CO [] CCO [] CA TCO
Date: Appr by: Final

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of record and am authorized
to make this application and perform the work listed on this application.

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

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bibb	0
1	Water Heater	50
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	50
0	Sewer Pump	0
0	Interceptor / Separator	0
1	Backflow Preventer	50
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
0	Other	0
0	Other	0
0	Other	0

Paid [X] Check # 204 Administrative Surcharge \$ 0
Collected by: JR Minimum Fee \$ 0
TOTAL FEE \$ 150
DCA State Permit Fee \$ 7

CLIFFSIDE PARK BLDG DEPT.
525 PALISADE AVENUE
CLIFFSIDE PK, NJ 07010

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 07/07/20
Date Issued 07/07/20
Control #
Permit # 2020-222

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING

CONTRACTORS. NOTIFY THIS OFFICE. DO UTILITY DIG NO: 1-800-272-1000

Block 3101 Lot 5 Qual
Work Site Location 64 GRANT AVE

Owner in Fee ALASIO, VICTOR & VICTORIA

Address 64 GRANT AVE

CLIFFSIDE PARK, NJ 07010-

Tel. (201) 370-8650

Contractor JSEPH ELECTRICAL SERVICES

Address 553 DUKE ST

NEW MILFORD, NJ

Tel. () - Fax () -

Lic. No. or Bldgs. Reg. No. 15467

Federal Emp. No. 20-5441631

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 \$ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW INSPECTIONS Dates (Month/Day)

[] No Plans Required Type Rough Failure Failure Approval Initial

[] Partial -Under-slab Util Appr BarrierFr

Date: Appr by: Trench

[] Elect Plans Approved Temp Serv

Date: Appr by: Const Serv

Joint Plan Review Required: TCO

[] Build [] Plumb [] Fire Other

SUBCODE APPR - PERM [] Elev Service

Date: Appr by: Final

SUBCODE APPR - CERTIF BarrierFr

[] CO [] CCO [] CA Temp. Cut-in-Card Date Issued

Date: Appr by: Final Cut-in-Card Date Issued

AnnPoolins

Date of Gnd/Bond Certification

C. CERTIFICATION IN LIEU OF OATH

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

Signature/Contractor Seal

[] Licensed Elect Contr [] Certif Landscape Irrig Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

NO. SIZE

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors-Fract HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights

Storable Pool/Spa/Hot Tub

KW Elect Range/Receptacle

KW Oven/Surface Unit

KW Elect Water Heater

KW Elect Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

Baseboard Heat

HP Motors 1/+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elect Sign/Outline Light

Other

Other

Other

FEE (Office Use Only)

50

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

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0

0

0

0

Administrative Surcharge \$ 0

Paid [X] Check # 204 Minimum Fee \$ 0

Collected by: JR TOTAL FEE \$ 50

DCA State Permit Fee \$ 0