

Halladay, Jennifer

From: Halladay, Jennifer
Sent: Tuesday, May 6, 2025 1:04 PM
To: 'mtcrealtor1@gmail.com'
Subject: OPRA 16 wheeler
Attachments: 25-72.pdf

Attached are the records we have regarding your request. If you have any future requests, please feel free to contact the Carteret Municipal Clerks office.

Jennifer Halladay

Borough of Carteret
Administrative Clerk
Union President- Local 385
61 Cooke Avenue
Carteret, NJ 07008
(732) 541-3803
Halladayj@carteret.net

25.72



Borough of Carteret OPEN PUBLIC RECORDS ACT REQUEST FORM

61 Cooke Avenue Carteret, NJ 07008
(732) 541-3800 & (732) 541-8925 (Fax)
clerkoffice@carteret.net

Carmela Pogorzelski, Municipal Clerk



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name MariaTheresa MI _____ Last Name Carranza

E-mail Address MTCRealtor1@gmail.com

Mailing Address 16 Wheeler Ave,

City Carteret State NJ Zip 07008

Telephone 732-425-2867 FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail ☒

Under penalty of N.J.S.A. 2C:28-3, I certify that

- ☐ I **HAVE** / ☒ I **HAVE NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States;
- I, or another person, ☐ **WILL** / ☒ **WILL NOT** use the requested government records for a commercial purpose;
- ☐ I **AM** / ☒ I **AM NOT** seeking records in connection with a legal proceeding.

Signature MariaTheresa Carranza Date 04/28/2025

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Note: If you confirmed above that the records sought are in connection with a legal proceeding, identification of that proceeding is required below.

We request information and if possible copies of the following:

- 1) Any oil tank removed.
- 2) Any open permit.
- 3) Any violations.
- 4) Fire issues.
- 5) Flood issues.

Thank you.

I am a buyer's agent for my client looking to buy this property.

AGENCY USE ONLY

Est. Document Cost _____

Est. Delivery Cost _____

Est. Extras Cost _____

Total Est. Cost _____

Deposit Amount _____

Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____

Denied - Closed _____

Filled - Closed _____

Partial - Closed _____

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided			

Custodian Signature _____

Date _____

BUILDING SUBCODE TECHNICAL SECTION



Date Received 4-18-94
 Date Issued
 Control # 94-577
 Permit #

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE CALL UTILITY DIG NO: 1-800-372-1000.

Block _____ Lot _____
 Work Site Location 16 Wheeler Ave.
 Owner in Fee Richard T. & C. Co. (Corporation)
 Address 14 Hammond Ave.
 Tele. (603) 541-3406
 Contractor Paul Wade
 Address 29000 Fallow St
 City Capitoway
 Tel. () 541-4416
 Lic. to. or Bids. Reg. No. 68
 Federal Emp. No. _____ or Social Security No. _____

C. CERTIFICATION IN LIEU OF OATH

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Removal of ground storage tank in back of shed

JOB SUMMARY (Office Use Only)		PLAN REVIEW		Date		Initial		INSPECTIONS		Type:		Failure		Failure		Approval		Initial	
☐	No Plans Req.																		
☐	All																		
☐	Footings																		
☐	Foundation																		
☐	Frame																		
☐	Other																		
Joint Plan Review Required:																			
☐	Elec.	☐	Plumb.	☐	Fire														
SUBCODE APPROVAL																			
☐	CO	☐	CCO	☐	CA														
Date:																			
Approved By:																			

TYPE OF WORK:		(Office Use Only)	
☐	New Building		
☐	Addition		
☐	Alteration		
☐	Roofing		
☐	Siding		
☐	Fence		
☐	Sign		
☐	Pool		
☐	Asbestos Abatement		
☒	Other <u>Storage Tank (Fuel)</u>		
☐	Demolition		

B. BUILDING CHARACTERISTICS

Use Group _____ Present _____ Proposed _____
 Constr. Class _____ Present _____ Proposed _____
 No. of Stories _____
 Height of Structure _____ Ft.
 Area—Largest Floor _____ Sq. Ft.
 New Bldg. Area/All Floors _____ Sq. Ft.
 Volume of New Structure _____ Cu. Ft.

Est. Cost of Bldg. Work

1. New Bldg. \$ _____
 2. Alteration \$ _____
 3. Total (1 + 2) \$ _____

Paid ☒ Check # <u>1454</u>	Administrative Surcharge	\$ _____
Collected by: <u>PA</u>	Minimum Fee	\$ _____
	DCA TRAINING FEE	\$ _____
	TOTAL FEE	\$ <u>11.11</u>



CONSTRUCTION
PERMIT

Date Issued
Control #
Permit #

7-10-94

94-577

IDENTIFICATION Block 171 Lot 16

Work Site Location 16 Wheeler Ave.

Owner in Fee Carlton Thayer (Deceased)

Address 14 Wheeler Ave.

Tele. (928) 544-2466

Contractor Maal Thair

Address 15000 Avenue ST.

Tele. (928) 544-4466

Lic. No. or Bids. Reg. No. 008 Exp. Date 9/1

Federal Emp. No. _____

or Social Security No. 68

is hereby granted permission to perform the following work:

- ☐ BUILDING ☐ PLUMBING ☐ OTHER _____
☐ ELECTRICAL ☐ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Removal in ground storage tank
in back of yard.

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 \$ Agg. 00

[Signature]
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building	_____
Electrical	_____
Plumbing	_____
Fire Protection	_____
Elevator Devices	_____
Other	_____
DCA Training Fee	_____
Cert. of Occ.	_____
Other	_____
Total	<u>50.-</u>
Check No.	_____
Cash	_____
Collected By	<u>ATL</u>

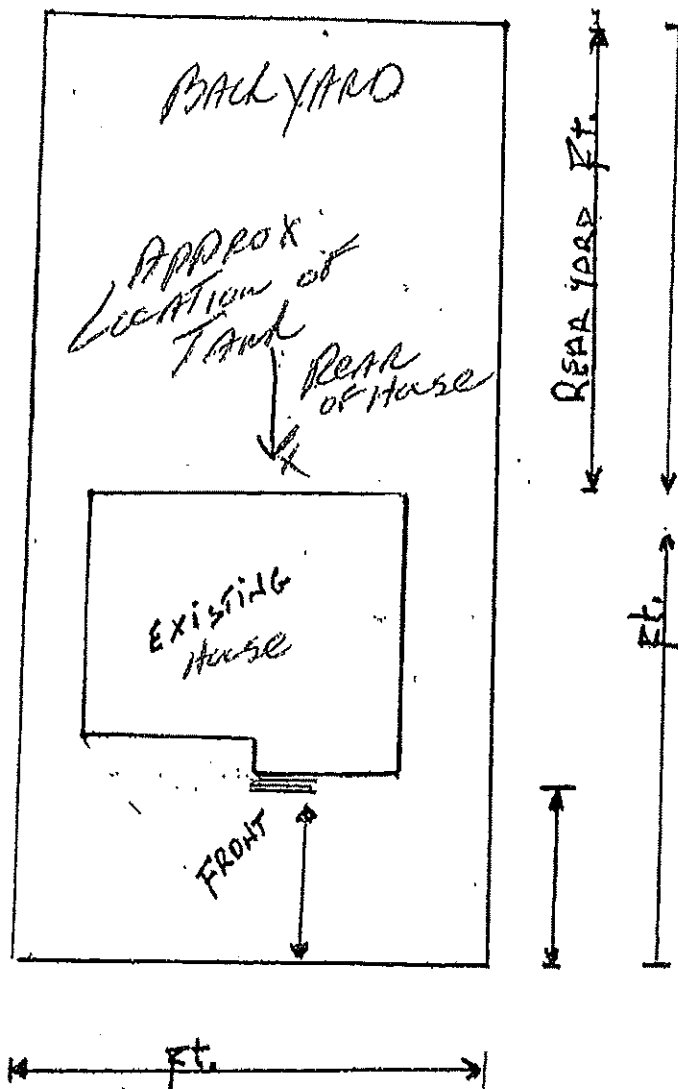
(see reverse side)

Lot size Ft.

160-9B - 160-28

ACCESSORY USES

GARAGE
SHED
FENCE
SWIMMING POOL



MINIM. FRONT YARD	20 Ft.	{ FOR R. 50 - LOT COVERAGE 35% }
MINIM. REAR YARD	25 Ft.	
MIN. SIDE YARD	4' Ft.	
COMBINE SIDE YARD	12' Ft.	

MINIM FRONT YARD	15'	{ FOR R. 25 - LOT COVERAGE 60% }
REAR	25'	
SIDE	3.5'	
COMBINE	7'	

MINIMUM Lot size:
50' X 100'

Hornak Enterprises, Inc.
915 E. Hazelwood Ave.
Rahway, N.J. 07065

Mr. Fire Inspector:

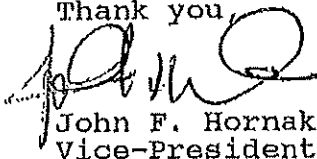
We have taken possession of 15 gallons of waste oil from Mark Virag

on 7/21 from 16 Wheeler.

We have added it to our waste oil tank which will be pumped out by L & L

Oil of Aberdeen, N.J. licensed haulers.

Thank you,



John F. Hornak, Jr.
Vice-President



BOROUGH OF CARTERET
CARMELA POGORZELSKI, R.M.C.
MUNICIPAL CLERK

25:72
Daniel J. Reiman, Mayor
(732) 541-3800

OPRA Request Form

To: Bldg. Dept.

Re: 16
Wheeler

From: Carmela Pogorzelski, RMC
Municipal Clerk

Date: 4.30.25

According to law, a response to this request **MUST** be provided within Seven (7)
business days which is 5.9.25

cc: Mayor

____ Information provided on _____
____ Applicant has been contacted to review files.
____ I do not have the requested information.

Bergen
Bellino

Signed: _____ Date: _____

Arroyo, Elijah

From: Halladay, Jennifer
Sent: Wednesday, April 30, 2025 12:12 PM
To: Arroyo, Elijah
Subject: OPRA #25-72
Attachments: 20250430123029076.pdf

Please see the attached OPRAI

Jennifer Halladay

Borough of Carteret
Administrative Clerk
Union President- Local 385
61 Cooke Avenue
Carteret, NJ 07008
(732) 541-3803
Halladayj@carteret.net

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

From: clerkscan@carteret.net [mailto:clerkscan@carteret.net]
Sent: Wednesday, April 30, 2025 12:30 PM
To: Halladay, Jennifer <Halladayj@carteret.net>
Subject: Message from "RNP583879236AC3"

This E-mail was sent from "RNP583879236AC3" (IM C4500).

Scan Date: 04.30.2025 12:30:29 (-0400)
Queries to: clerkscan@carteret.net



BUILDING SUBCODE TECHNICAL SECTION



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

Block 171 Lot 16 Qualification Code _____
Work Site Location 16 Wheeler Ave
Contractor Carter N3
Owner in Fee Maria Osorio
Address 16 Wheeler Ave
Tel. (917) 922-2059
Contractor 3D All Construction Inc
Address PO Box 5418
Tel. (201) 960-8684 FAX (201) 960-8684
Contractor License No. or Builder Registration No. 13VH0172900
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	Initial
☒ No Plans Required	<u>6/17/19</u>	<u>JS</u>	
☐ All			
☐ Footing			
☐ Foundation			
☐ Frame			
☐ Other			
Joint Plan Review Required:			
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			
SUBCODE APPROVAL			
☐ CO ☐ CCO ☐ CA			
Date: <u>6/17/19</u>			
Approved by: <u>[Signature]</u>			

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work
Constr. Class			1. New Bldg. \$ <u>4100</u>
No. of Stories			2. Rehabilitation \$ _____
Height of Structure			3. Total (1+2) \$ _____
Area — Largest Floor			
New Bldg. Area/All Floors			
Volume of New Structure			
Total Land Area Disturbed			

6-29-07
07-0524

Date Received
Control #
Date Issued
Permit #

C. CERTIFICATION IN LIEU OF OATH

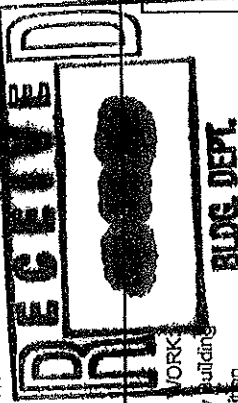
I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Take off existing roof layers
Install New Ice Shield
Install New Ice Shield
Install New timbering single



TYPE OF WORK	Height (exceeds 6')	Sq. Ft.
☐ New Building		
☐ Addition		
☐ Rehabilitation		
☒ Roofing		
☐ Siding		
☐ Fence		
☐ Sign		
☐ Pool		
☐ Asbestos Abatement Subchapter 8		
☐ Lead Haz. Abatement NJAC 5:17		
☐ Other		
☐ Demolition		

FEE (Office Use Only)
Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

U.C.C. F110 (rev. 07/03)
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

BOROUGH OF CARTERET
61 COOKE AVE
(732) 541-3810

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 6/24/07
Control # CC171
Permit # 07-0524

IDENTIFICATION Block 171 Lot 16 Qual

Work Site Location 16 WHEELER AVENUE Contractor J D ALL CONSTRUCTION INC.
CARTERET, NJ 07008 Address PO EX 5418
Owner in Fee OSORIO, MARIA Telephone ENGLEWOOD, NJ 07631-
Address 16 WHEELER AVENUE (201) 960-8684
CARTERET, NJ 07008- Lic. No. or Bldrs. Reg. No. 13VH0172900
Telephone (917) 922-2059 Federal Emp. No. 20-1960864

I am hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
ROOFING

PAYMENTS (Office Use Only)
Building 84
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
DCA State Permit Fee 6
Cert. of Occupancy 0
Other

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 \$ 4,200

[Signature]
Construction Official Date 6/19/07

Total 90
Check No. 2409
Cash
Collected By

02-0315
4-2-02

BOROUGH OF CARTERET
51 COOKE AVE
(732) 541-3810

Date Issued 1/1
Control # C171-16
Permit #

UCC NEW JERSEY
CONSTRUCTION
PERMIT

DEMOLITION Block 172 Loc 16

Work Site Location 16 WHEELER

Owner in Fee GRASCO-STEPS-
Address 16 WHEELER
CAPESIDE, NJ 07033-
Telephone (908) 889-3609

Contractor ECKHART
Address
Telephone
Lic. No. or Hlors. Reg. No.
Federal Emp. No. 30-

I hereby granted permission to perform the following work:

- | | | |
|--|--|---|
| ☒ BUILDING | ☒ PLUMBING | ☐ LEAD PAINT REMOVAL |
| ☒ ELECTRICAL | ☒ FIRE PROTECTION | ☐ DEMOLITION |
| ☒ ELEVATOR DEVICES | ☒ ASBESTOS ABATEMENT | ☐ OTHER |
- (Subchapter 2 only)

DESCRIPTION OF WORK:
REPAIR STEPS

PAYMENTS (Office Use Only)

Building	40
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	0
DOA Training Fee	0
Cont. of Occupancy	0
Other	0
Total	40
Check No.	654
Cash	
Collected By	

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 \$ 150

C. J. J. J. Date 3/18/02

Construction Official