CHERRY HILL TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

Cherry Hill Township

Date Received: 2/24/2026

Tracking Number: OPRA-Req-26-0378

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

Name: Breean Stumpf

Address:

City: State: NJ Zip:

Telephone: Fax:

Email: xxxxxxxxxxxxxxxxxxxxxxxxxxx@xxxxxxxx.xxxxxxxxxxx.xxx

Preferred Delivery: ☐ Pick Up ☐ US Mail ☐ On Site Insp ☐ Fax ☑ E-Mail

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

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

Signature: Date:

Payment Information

Maximum Authorized Cost 0

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: Specialservice 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.

☐ Includes Common Law Request Location: 207 SUSSEX HOUSE Block/Lot: 339.11/14/C0207

Any currently open permits for 207 Sussex House Cherry Hill NJ 08034.

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 reason here.

In Progress - Open
Denied - Closed
Filled - Closed
Partial - Closed

AGENCY USE ONLY:

Tracking Information:

Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost:

Total
Deposit
Bal. Due
Bal. Paid

Records Provided:

Custodian Signature: Date:

From: Breean Stumpf
To: Patti Chacker
Subject: OPRA request - Any open permits - 207 Sussex House Cherry Hill NJ 08034
Date: Monday, February 23, 2026 3:44:47 PM

Dear Cherry Hill Township,

Please accept this electronic request for public records made under OPRA and the common law right of access. I am not required to fill out an official form or use a particular software platform to submit my request per NJSA 47:1A-6(f), which states that an email from a requestor including all of the information required on the adopted form shall suffice in place of a completed form as a valid government record request.

I HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

I WILL NOT use the requested government records for a commercial purpose.

I AM NOT seeking records in connection with a legal proceeding.

Records requested: Any currently open permits for 207 Sussex House Cherry Hill NJ 08034.

My preferred delivery method for response(s) to this request is by E-mail as attachments. Please confirm you have received this request. If you are not the custodian of records, please forward my request to that person and provide their email address to me for future reference.

Thanks!

Breean Stumpf

Please deliver records electronically via email to the below UNIQUE address for all replies to this request:

xxxxxxxxxxxxxxxxxxxxxxxxxxxx@xxxxxxxx.xxxxxxxxxxx.xxx

Is xxxxxxxx@xxxx.xxx the wrong address for OPRA requests to Cherry Hill Township? If so, please contact us using this form:

https://linkprotect.cudasvc.com/url?
a=https%3a%2f%2fopramachine.com%2fchange_request%2fnew%3fbody%3dcherry_hill_township&c=E,1,NMG67vGwNw-

gTdzmpPSCb8arGJEfxi_6Pa_7QNFWQxXNK8OkX_B-dfe2DwvtBaac7LbM1SbwqF5pK19399iXNjQCjd3BdqYPkGvXvVB4JwLy3etUl7mLot1n4efB&typo=1

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

https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fopramachine.com%2fhelp%2fofficers&c=E,1,KkkJAllOmVGg3HK6x7A7SVaBhs2OXu7qkEV2bYavVkB1k3vF-I9v_GkMLM-ek4dwdpuovD71a37Vj4FyvJ1qFqsy07sI1pUlYYRXgZKhtqh3bLFo&typo=1

View this OPRA request & responses online:

https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fopramachine.com%2frequest%2fany_open_permits_207_sussex_hous&c=E,1,E395IgCemo2ug-YCk7ou4Cb15vO8mQIsA1gbeQcWZzJuia9ZPoAMWtWdK1ZZkRaN-n049nncx2VX3Vj_yNGt4eqNhqoZj-JxPgqlPpuy0Jf78DXU_I76Ngt_2Q.,&typo=1

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.

"OPRAmachine’s mission is to give people easy and affordable access to New Jersey public records.

For more information, contact us at: (732) 707-1628 or PO Box 3180, New Brunswick, NJ 08903."

Block 339.11 Lot 14 Qualification Code C0207 Address (Site) 207 SUSSEX HOUSE Permit No. 20201387

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 207 SUSSEX HOUSE CHERRY HILL TOWNSHIP NJ 08034
2. Name of Owner in Fee: DAVIDSON BRIAN WILLIAM Tel. [redacted]
   Address 1001 N KINGS HIGHWAY #207 CHERRY HILL NJ 08034
3. Ownership in Fee: ☐ Public ☑ Private Email
4. Principal Contractor: HUTCHINSON Tel. (856) 429-5807
   Address 621 CHAPEL AVENUE CHERRY HILL NJ 08002
   Email CarlCanfield@hutchbiz.com
   License No. OR, if new home, Builder Reg. No. Exp. Date
   Home improvement Contractor Registration No. or Exemption Reason (if applicable):
   Federal Em. ID No. [redacted] Fax.
5. Architect or Engineer Contact
   Address e-mail
   Tel. Fax.
6. Responsible Person in Charge once Work has Begun
   Tel. Fax.

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building			
2. Electrical	65		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	125		
7. Less 20% for State Plan Review			
8. Subtotal	125		
9. State Permit Surcharge Fee	16		
10. Subtotal	141		
11. Cert of Occupancy			
12. Other			
13. TOTAL	141		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories		
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. Max. Live Load		
7. Max. Occupancy Load		
8. If Industrialized Building: State Approved ____ HUD ____		
9. Total Land Area Disturbed	sq. ft.	
10. Flood Hazard Zone		
11. Base Flood Elevation	ft.	
12. Wetlands	yes ____ no ____	

IIa. PROPOSED WORK

☐ Minor Work ☐ New Building ☐ Addition ☐ Demolition
☐ Repair ☑ Alteration ☐ Renovation ☐ Reconstruction
☐ Asbestos Abat. Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Reviewer	Resubmission Dates Approval	Rejection	Reviewer
☐ Building									
☑ Electrical	3935	JV	6/23/2020		6/24/2020				
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									

TOTAL COST 7870

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)
1. State Spcific Use:
2. Use Group R-5
3. Change in Use Group, Indicate Former:

4. No. of dwelling units:	*All Units*	*Income-restricted*
Before Construction		
After Construction		
Net Gain or Loss		

B. NON-RESIDENTIAL (primary use)
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

C. MIXED USE -List secondary use(s):

D. Construction Classification: TYPE VB

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
☐ High Pressure Boiler
☐ Pressure Vessel
☐ Refrigeration Systems
☐ Cross-Connections/ Backflow Preventers
☐ Hazradous Uses/Places of Assembly
☐ Sprinklers
☐ Smoke Control Systems in Open Wells
☐ Underground Storage Tanks
☐ Swimming Pools, Spas and Hot Tubs
☐ LPGas Tanks
☐ Fire Alarm

CHERRY HILL TOWNSHIP
Construction Department
820 Mercer St.
Cherry Hill, NJ 08002
(856) 488-7855

Date Applied	6/23/2020
Date Issued	8/4/2020
Control #	120466
Permit #	20201387

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 339.11 Lot: 14 Qualifier C0207 Use Group R-5

Work Site Location:	207 SUSSEX HOUSE CHERRY HILL TOWNSHIP, NJ 08034	Contractor Address	HUTCHINSON 621 CHAPEL AVENUE CHERRY HILL NJ 08002
Owner in Fee	DAVIDSON BRIAN WILLIAM		
Address	1001 N KINGS HIGHWAY #207 CHERRY HILL NJ 08034	Telephone:	(856) 429-5807
		Lic. No. or Bldrs. Reg. No.	19HC00055300 36BI00504100
Telephone:	[redacted]	Federal Employee. No.	[redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

CONDENSATE, REPLACEMENT A/C UNIT

Note: If constuction 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 $7,870

Construction Official _____ Date _____

:: Failure to obtain all required inspections may result in administrative action.

:: Final Inspections are required before final payment is to be made to contractor.

:: An Approved set of plans must be kept at the worksite at all times.

PAYMENTS (Office Use Only)

035	Building	
039	Electrical	$65
032	Plumbing	
033	Fire Protection	
042	Elevator Devices	
034	Mechanical	$60
046	DCA Training Fee	$16
040	CO Fee	
040	CCO Fee	
040	Other Cert Fee	
060	Admin Sucharge	
043	Other	
060	Admin Fee	
038	Plan Review	
	COAH Fee	
044	Zoning	
	Open Fence	
	Sewer	
	Water	
037	Engineering	
	Shade Tree	
	Escrow	
	Local	
043	Doc Imaging	
	Total	$141

Check No.	66875
Check	$141
Cash	$0
Credit	$0
Collected By	Sharon Walker

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 6/23/2020
Date Issued 8/4/2020
Control # 120466
Permit # 20201387

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

Block 339.11 Lot 14 Qualification Code C0207

Work Site Location 207 SUSSEX HOUSE CHERRY HILL TOWNSHIP, NJ 08034

Owner in Fee: DAVIDSON BRIAN WILLIAM

Tel. [redacted] e-mail

Address 1001 N KINGS HIGHWAY #207 CHERRY HILL NJ 08034
Street Municipality zip code

Contractor: MORE POWER ELECTRIC INC. Tel. (856) 782-0510

Address 205 WHITE HORSE PIKE N MAGNOLIA NJ 08049

e-mail morepowerelectric@comcast.net

Contractor License No. 34EB01325500 Exp. Date

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

Federal Emp. ID No. [redacted] FAX (856) 782-9890

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R-5

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ $3,935

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's sign/Contractor sign and seal here: Print name here:

☐ Licensed Electrical Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
CONDENSATE, REPLACEMENT A/C UNIT,

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
1		TOTAL NUMBERS	$ $50
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
1	2.4	KW Central A/C Unit	$15
		HP/KW Space Heater/Air Hand	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge$
Minimum Fee$ $65
State Permit Surcharge Fee $ $7
TOTAL FEE$ $72

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plan Required
☐ Partial-Underslab Approved
Date: Approved by:
☐ Electrical Plans Approved
Date: Approved by:
Joint Plan Review Required:
☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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

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

Dates (Month/Day)

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

U.C.C F120 (rev. 01/21)

1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

MECHANICAL INSPECTION
TECHNICAL SECTION

Date Received 6/23/2020
Control # 120466
Date Issued 8/4/2020
Permit # 20201387

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

Block **339.11** Lot **14** Qualification Code **C0207**

Work Site Location **207 SUSSEX HOUSE CHERRY HILL TOWNSHIP, NJ 08034**

Owner in Fee: DAVIDSON BRIAN WILLIAM

Tel. [redacted] e-mai

Address 1001 N KINGS HIGHWAY #207 CHERRY HILL NJ 08034
Street Municipality zip code

Contractor: WILLIAM R DADDS-HUTCHINSON Tel. (856) 429-5807

Address 621 CHAPEL AVENUE CHERRY HILL NJ 08034

e-mai CarlCanfield@hutchbiz.com

Contractor License No. _____ Exp. Date _____

Home Improvment Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. [redacted] FAX (856) 429-4995

B. MECHANICAL CHARACTERISTICS

Use Group Present _____

Heating System work: ☐ New or ☐ Modification to Existing or ☐ Conversion or ☑ Replacement

Type: ☐ Hydronic ☐ Hot Air

Fuel Type: ☐ Gas ☐ Oil ☑ Electric ☐ Solar ☐ Other _____

Estimated Cost of Mechanical Work $ **$3,935**

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
☐ No Plan Required
☐ MECHANICAL PLANS APPROVED
Date: _____ Approved by: _____

Joint Plan Review Required
☐ Bldg ☐ Elec. ☐ Plumb ☐ Fire.
☐ Elev.

SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____

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

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Water Heater				
Appliance				
Chimney/Vent				
Piping				
Tank				
Cooling/AC				
Generator				
Fireplace				
Chimney Cert.				
Other				
Other				
Final				

C. CERTIFICATION IN LIEU OF OATH

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

Print Name Here _____
☐ Licensed Electrical Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

CONDENSATE, REPLACEMENT A/C UNIT.

NO.	FIXTURES/EQUIPMENT	FEE (Office Use Only)
	Water Heater	$
	Fuel Oil Piping Connections	
	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
	Hot Air Furnace	
	Oil Tank	
	LPG Tank	
	Fireplace	
	Generator	
1	Other Condensate	

Administrative Surcharge	$
Minimum Fee	$ $60
State Permit Surcharge Fee	$ $7
TOTAL FEE	$ $67

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