



Mount Laurel Township
750 Centerton Rd.
Mount Laurel, NJ 08054
Phone: (856) 234-9686
Fax: (856) 273-0106

Permit Number: **23-CP-2070**
Update Number:
Control Number: **2023-002235**
Application Date: **9/12/2023**
Permit Date: **10/5/2023**

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/ PROPERTY DETAILS

Block: **1202** Lot: **3.01** Qualifier:

Work Site Location **515 FELLOWSHIP RD**
MT LAUREL NJ 08054

Owner in Fee **EZ SIGNS LLC**
Telephone **(267)307-5965**

Address **2177 BENNETT RD**
PHILADELPHIA PA 19116

Use Group(s): **B**

Contractor **EZ SIGNS LLC**
Telephone **(267)307-5965**
Address **2177 BENNETT RD**
PHILADELPHIA PA 19116

Lic. No. / Bldrs. Reg. No
Federal Emp. No. **020566091**

is hereby granted permission to perform the following work:

☒ **Building** ☒ **Electrical**

DESCRIPTION OF WORK:

INSTALL SIGNS WITH ELECTRIC

ESTIMATED COST OF WORK:

Cost of Construction: **\$0.00**

Cost of Alteration: **\$10,000.00**

Cost of Demolition: **\$0.00**

Total Cost: \$10,000.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void

Date: **2/9/2024**

Robert Gates

Construction Official

- :: 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)

Building	\$932.00
Electrical	\$800.00
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$19.00
DCA Minimum Fee	
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$1,751.00
No Fees Waived	

Amount to be Paid: \$0.00

Check Amount: **\$1,751.00**
Payment Date: **10/5/2023**
Collected By: **Alyssa DiPatri**
Reference No: **16504**

Total Check Amount \$1,751.00

Grand Total: \$1,751.00

Notes:



Mount Laurel Township

**BUILDING SUBCODE
TECHNICAL SECTION #1**

Date Received **9/12/2023**
 Control # **2023-002235**
 Date Issued **10/5/2023**
 Permit # **23-CP-2070**

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

Block **1202** Lot **3.01** Qualification Code

Work Site Location **515 FELLOWSHIP RD**

Owner in Fee **EZ SIGNS LLC**

Telephone **(267)307-5965** e-mail **xxxxxxx@xxxxxxxxxxxxx.xxx**

Address **2177 BENNETT RD, PHILADELPHIA PA 19116**

Contractor **EZ SIGNS LLC**

Telephone **(267)307-5965** e-mail **xxxxxxx@xxxxxxxxxxxxx.xxx**

Address **2177 BENNETT RD, PHILADELPHIA PA 19116**

Contractor License No. or Builder Registration Number Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. **020566091** Fax

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	INSPECTIONS
			Failure Failure Approval Initial
☐ No Plans Required			Type:
☒ All	09/26/2023		Footing
☐ Footings/ Foundations			Footing Bonding
☐ Structural/ Framework			Foundation
☐ Exterior			Slab
☐ Interior			Frame
Joint Plan Review Required:			Truss Sys./Bracing
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Barrier-Free
SUBCODE APPROVAL for PERMIT			Insulation
Date: 09/26/2023			Finishes-Base Layer
Approved by:			Finishes-Final
SUBCODE APPROVAL for CERTIFICATE			Energy
☐ CO ☐ CCO ☒ CA			Mechanical
Date:			TCO
Approved by:			Other
			Final
			Barrier-Free

B. BUILDING CHARACTERISTICS

Use Group Present **B** 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.

Total Land Area Distributed sq. ft.

Max. Live Load Max. Occupancy Load

Constr. Class Present Proposed

If Industrialized Building:

State Approved ☐ HUD ☐

Est. Cost of Bldg. Work:

1. New Building
 2. Rehabilitation **\$ 6,500.00**
 3. Demolition
 4. Total (1+2+3) **\$ 6,500.00**

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:

Print name here:

D. TECHNICAL SITE DATA**DESCRIPTION OF WORK**

INSTALL SIGNS WITH ELECTRIC

TYPE OF WORK:

- ☐ New Building
☐ Addition
☒ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence Height (exceeds 6')
☐ Pylon Sign Sq. Ft.
☒ Ground or Wall Sign **466.81** Sq. Ft.
☐ Pool (above ground)
☐ Pool (below ground)
☐ Retaining Wall **466.81** Sq. ft.
☐ Asbestos Abatement subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Radon Remediation
☐ Other 1
☐ Other 2
☐ Other 3
☐ Other 4
☐ Other 5
☐ Other 6
☐ Demolition

FEE (Office Use Only)

\$ 932.00

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee (Volume)

State Permit Surcharge Fee (Alterations)

TOTAL FEE

\$ 12.00

\$ 944.00

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

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



Mount Laurel Township

**ELECTRICAL SUBCODE
TECHNICAL SECTION #1**Date Received **9/12/2023**
Control # **2023-002235**Date Issued **10/5/2023**
Permit # **23-CP-2070****A. IDENTIFICATION - APPLICANT:** COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.Block **1202** Lot **3.01** Qualification CodeWork Site Location **515 FELLOWSHIP RD**Owner in Fee **EZ SIGNS LLC**Telephone **(267)307-5965** e-mail **xxxxxxx@xxxxxxxxxxxxx.xxx**Address **2177 BENNETT RD, PHILADELPHIA PA 19116**Contractor **JERSEY SHORE ELECTRICAL**Telephone **(732)552-1537** e-mail **xxxxxx@xxxxx.xxx**Address **704 ATLANTIC AVEN, POINT PLEASANT NJ**Contractor License No. **34EB00849200** Exp. Date **3/31/2024**

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. **46-1641449** Fax**B. ELECTRICAL CHARACTERISTICS**Use Group Present **B** Proposed

[] Pole/ Pad # [] Temporary [] Other:

Building Occupied as Utility Co.

1. New/ Addition: 2. Rehabilitation: **\$ 3,500.00**3. Demolition: Est. Cost of Electrical Work (1+2+3): **\$ 3,500.00**

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)			
		Type:	Failure	Failure	Approval	Initial	
PLAN REVIEW							
[] No Plans Required		Rough	_____	_____	_____	_____	
[] Partial - Underslab Utilities Approved		Barrier Free	_____	_____	_____	_____	
Date: _____ Approved by: _____		Trench	_____	_____	_____	_____	
[x] Electric Plans Approved		Temp. Serv	_____	_____	_____	_____	
Date: <u>10/03/2023</u> Approved by: <u>[Signature]</u>		Constr. Serv	_____	_____	_____	_____	
Joint Plan Review Required:		TCO	_____	_____	_____	_____	
[] Bldg. [] Plumb. [] Fire [] Elevator		Other	_____	_____	_____	_____	
SUBCODE APPROVAL for PERMIT		Service	_____	_____	_____	_____	
Date: <u>10/03/2023</u> Approved by: <u>[Signature]</u>		Final	_____	_____	_____	_____	
SUBCODE APPROVAL for CERTIFICATE		Barrier Free	_____	_____	_____	_____	
[] CO [] CCO [x] CA		Temp Cut-In-Card Date Issued	_____				
Date: _____ Approved by: _____		Final Cut-In-Card Date Issued	_____				
		Annual Pool Inspection	_____	_____	_____	_____	
		Date of Grounding and Bonding Cert.	_____				

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: _____

Print name here: _____

[] Licensed Electrical Contractor [] Exempt Applicant

[] Licensed Landscape Irrigation Contractor

D. TECHNICAL SITE DATADESCRIPTION OF WORK
INSTALL SIGNS WITH ELECTRIC

QTY.	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motor - Fract. HP
		Emergency & Exit Lights
		Communication Points
		Alarm Devices/ F.A.C. Panel
		Microinverters
		Other 1:
		Other 2:

TOTAL NUMBERS

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/ Receptacle
KW Dishwasher
HP Garbage Disposal
KW Central A/C Unit
HP/ KW Space Htr./ Air
KW Baseboard Heat
HP Motors 1/ +HP
KW Transformer/ Generator
AMP Service
AMP Subpanels
AMP Motor Control Center
KW Elec. Sign/ Outlet Light
KW Photovoltaic Systems
Other 3:
Other 4:
Other 5:
Other 6:
Other 7:
Other 8:
Other 9:

8**1.00****\$ 800.00**

Administrative Surcharge
Minimum Fee
State Permit Surcharge Fee
TOTAL FEE

\$ 0.00**\$ 7.00****\$ 807.00**