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

Permit Number: **23-CP-1785**
Update Number:
Control Number: **2023-002145**
Application Date: **8/31/2023**
Permit Date: **9/5/2023**

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/ PROPERTY DETAILS

Block: **1201.04** Lot: **3** Qualifier:

Work Site Location	**907 PLEASANT VALLEY AVE** **MT LAUREL NJ 08054**	Contractor	**NATE RUSSO**
		Telephone	**856-467-7006**
Owner in Fee	**NJ MT LAUREL PLEASANT, LLC**	Address	**403 HELMS AVE** **SWEDESBORO NJ 08085**
Telephone			
Address	**201 RIVERPLACE; STE 400** **GREENVILLE SC 29601**	Lic. No. / Bldrs. Reg. No	
Use Group(s):	**B**	Federal Emp. No.	

is hereby granted permission to perform the following work:

[X] Demolition **[X] Building**

DESCRIPTION OF WORK:
DEMOLITION OF BUILDING

ESTIMATED COST OF WORK:

Cost of Construction:	**$0.00**
Cost of Alteration:	**$0.00**
Cost of Demolition:	**$200,000.00**
Total Cost:	**$200,000.00**

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

Notes:

PAYMENTS (Office Use Only)

Building	**$200.00**
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	
DCA Minimum Fee	
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	**$200.00**
No Fees Waived	

Amount to be Paid: **$0.00**

Credit Card Amount:	$200.00
Payment Date:	9/5/2023
Collected By:	Alyssa DiPatri
Reference No:	2012
Total Credit Card Amount	**$200.00**
Grand Total:	**$200.00**

Mount Laurel Township

BUILDING SUBCODE
TECHNICAL SECTION #1

Date Received **8/31/2023**
Control # **2023-002145**
Date Issued **9/5/2023**
Permit # **23-CP-1785**

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

Block **1201.04** Lot **3** Qualification Code

Work Site Location **907 PLEASANT VALLEY AVE**

Owner in Fee **NJ MT LAUREL PLEASANT, LLC**

Telephone e-mail

Address **201 RIVERPLACE; STE 400, GREENVILLE SC 29601**

Contractor **N.A. RUSSO CORP**

Telephone **856-467-7006** e-mail **xxxxxxx@xxxxxxxxxxxxxxx.xxx**

Address **403 HELMS AVE, SWEDESBORO NJ 08085**

Contractor License No. or Builder Registration Number Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. Fax

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

DEMOLITION OF BUILDING

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[x] No Plans Required		
[ ] All		
[ ] Footings/ Foundations		
[ ] Structural/ Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:

[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [x] CA

Date: 11/15/2023

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes-Base Layer				
Finishes-Final				
Energy				
Mechanical				
TCO				
Other				
Final			10/30	BW
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
3. Demolition **$ 200,000.00**
4. Total (1+2+3) **$ 200,000.00**

TYPE OF WORK:	FEE (Office Use Only)
[ ] NewBuilding	
[ ] Addition	
[ ] Rehabilitation	
[ ] Roofing	
[ ] Siding	
[ ] Fence Height (exceeds 6')	
[ ] Pylon Sign Sq. Ft.	
[ ] Ground or Wall Sign Sq. Ft.	
[ ] Pool (above ground)	
[ ] Pool (below ground)	
[ ] Retaining Wall 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	
[**X**] Demolition	$ 200.00
Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee (Volume)	
State Permit Surcharge Fee (Alterations)	
TOTAL FEE	$ 200.00

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)