

Osborne, Elizabeth

From: Eric Kapnick, Esq. <opra+request-8519-6d067ed4@requests.opramachine.com>
Sent: Friday, December 6, 2019 12:25 PM
To: Clerk
Subject: OPRA request - copies of all permits and approvals for 14 Division Avenue, Madison, NJ 07976

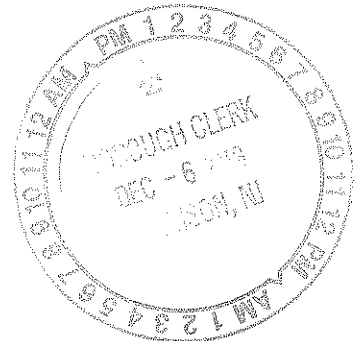
Dear Madison Borough,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested:

copies of all permits and approvals for 14 Division Avenue, Madison, NJ 07976

Yours faithfully,
Eric S. Kapnick, Esq.
Fein, Such, Kahn & Shepard, P.C.
7 Century Drive, Suite 201
Parsippany, NJ 07054



Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-8519-6d067ed4@requests.opramachine.com

Is clerk@rosenet.org the wrong address for OPRA requests to Madison Borough? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=madison_borough

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
<https://opramachine.com/help/officers>

View this OPRA request & responses online:
https://opramachine.com/request/copies_of_all_permits_and_approv

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.



CONSTRUCTION PERMIT

Date Issued 7/28/2017
Control # C-17-00806
Permit # 17-634

IDENTIFICATION Block: 5201 Lot: 11.03 Qualifier _____
Work Site Location: 14 DIVISION AVE Madison, NJ Contractor STUBECK CONSTRUCTION, LLC
Owner in Fee MILLENNIUM DEVELOPMENT GROUP LLC Address 62 WASHINGTON AVE CHATHAM NJ 07928
15 MILLER RD NEW VERNON NJ 07976 Telephone: (201) 400-4782
Telephone: (973) 445-8866 Lic. No. or Bldrs. Reg. No. 044947
Federal Employee No. 0600342795

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

TEMPORARY ELECTRIC SERVICE

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 \$300

Construction Official _____ Date 7/28/2017

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$116
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$116
Check No.	1318
Cash	\$0
Credit	\$0
Collected By	LISA QUINN

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



ELECTRICAL 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 5201 Lot 11.03 Qualification Code _____
Work Site Location: 14 DIVISION AVE Madison, NJ
Owner in Fee: MILLENNIUM DEVELOPMENT GROUP LLC
Address 15 MILLER RD. NEW VERNON NJ 07976 Email _____
Tel. (973) 445-8866
Contractor: RONJON ELECTRIC
Address 128 GREAT MEADOW LANE EAST HANOVER NJ 07936 Email _____
Tel. (973) 560-9198 Fax. (973) 560-9559
Lic No. 17494A Exp. Date 3/31/2018
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Employee No. 464065932

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____ U _____
☐ Pole/Pad # _____ ☒ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Estimated Cost of Electrical Work \$300

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
	Date	Type	Failure	Approval	Initial
☐ No Plan Required					
Partial Underslab Utilities Approved		Rough			
Date: _____ by: _____		Barrier-Free			
Electric Plans Approved		Trench			
Date: _____ by: _____		Temp. Serv.			
Joint Plan Review Required		Constr. Serv.			
☐ Building ☐ Plumbing		TCO			
☐ Fire ☐ Elevator		Other			
☐ Electrical Plans Approved		Service			
SUBCODE APPROVAL for PERMIT		Final			
Date: _____ by: _____		Barrier-Free			
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued			
☐ CO ☐ CCO ☐ CA		Final Cut-in-Card Date Issued			
Date: _____		Annual Pool Inspection			
Approved by: _____		Date of Grounding and Bonding Certification			

U.C.C F120 (rev. 11/09)

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

Date Received 7/24/2017
Date Issued 7/28/2017
Control # C-17-00806
Permit # 17-634

C. CERTIFICATION IN LIEU OF OATH
I hereby certify 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 Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Contr ☐ Certifd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TEMPORARY ELECTRIC SERVICE.

QTY.	SIZE	ITEMS	FEE (Office Use Only)
1		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
1		TOTAL NUMBERS	\$50
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		KW Baseboard Heat	
		HP Motors 1/4 HP	
1	100	KW Transformer/Generator	\$65
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee \$1

TOTAL FEE \$116



CONSTRUCTION PERMIT

Date Issued 8/14/2017
Control # C-17-00729
Permit # 17-674

IDENTIFICATION Block: 5201 Lot: 11.03 Qualifier _____
Work Site Location: 14 DIVISION AVE. MADISON, NJ 07940 Contractor MILLENNIUM DEVELOPMENT GROUP, LLC
Owner in Fee MILLENNIUM DEVELOPMENT GROUP, LLC Address 15 MILLER ROAD NEW VERNON NJ 07976
15 MILLER ROAD NEW VERNON NJ 07976 Telephone: (973) 445-8866
Telephone: (973) 445-8866 Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. 0600342795

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

NEW SINGLE FAMILY DWELLING

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 \$285,650

Construction Official _____ Date 8/14/2017

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$1,856
Electrical	\$324
Plumbing	\$935
Fire Protection	\$50
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$230
CO Fee	\$50.00
Other	\$8,346
Total	\$11,791
Check No.	1341/1346 1062 1062
Cash	\$0
Credit	\$0
Collected By	RUSSELL BROWN

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



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 5201 Lot 11.03 Qualification Code _____
Work Site Location: 14 DIVISION AVE MADISON, NJ 07940

Owner in Fee: MILLENNIUM DEVELOPMENT GROUP, LLC
Address 15 MILLER ROAD NEW VERNON NJ 07976
Tel. (973) 445-8866 Email _____
Contractor: STUBECK CONSTRUCTION, LLC
Address 62 WASHINGTON AVE CHATHAM NJ 07928
Email jim.stubeck@yahoo.com Fax _____
Tel. (201) 400-4782
Contractor License No. or, if new home, Bldrs Reg. No. 044947 Exp. 9/30/2019
Home improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. 0600342795

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required	_____	_____
☐ All	_____	_____
☐ Footing/Foundation	_____	_____
☐ Struct/Framework	_____	_____
☐ Exterior	_____	_____
☐ Interior	_____	_____
Joint Plan Review Required	_____	_____
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator	_____	_____
SUBCODE APPROVAL for PERMIT	_____	_____
Date: _____	_____	_____
Approved by: _____	_____	_____
SUBCODE APPROVAL for CERTIFICATE	_____	_____
☐ CO ☐ CCO ☐ CA	_____	_____
Date: _____	_____	_____
Approved by: _____	_____	_____

INSPECTIONS				Dates (Month/Day)	
Type:	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	_____	_____	_____		
Barrier-Free	_____	_____	_____		

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	R-5	If Industrial Building:	_____
Constr. Class	Present	Proposed	_____	State Approved	_____
Number of Stories	2	_____	_____	HUD	_____
Height of Structure	33.5	_____	_____	Est. Cost of Bldg. Work:	_____
Area - Largest Floor	1715	_____	_____	1. New Bldg.	\$245,000
New Bldg. Area / All Floors	3224	_____	_____	2. Rehabilitation	_____
Volume of New Structure	61878	_____	_____	3. Total (1+2)	\$245,000
Total Land Area Disturbed	_____	_____	_____		_____

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

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

Date Received 7/5/2017
Control # C-17-00729
Date Issued 8/14/2017
Permit # 17-674

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

Print Name Here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NEW SINGLE FAMILY DWELLING,

TYPE OF WORK

- ☒ New Building
☐ Addition
☐ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6') _____ Sq. Ft.
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Retaining Wall _____ Sq. Ft.
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz Abatement NJAC 5:17
☐ Radon Remediation
☐ Other _____
☐ Demolition

FEE (Office Use Only)

\$1,856

Administrative Surcharge
Minimum Fee
State Permit Surcharge Fee
TOTAL FEE

\$230
\$2,086



PLUMBING 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 5201 Lot 11.03 Qualification Code _____

Work Site Location: 14 DIVISION AVE MADISON, NJ 07940

Owner in Fee: MILLENNIUM DEVELOPMENT GROUP, LLC

Address 15 MILLER ROAD NEW VERNON NJ 07976

Tel. (973) 445-8866 Email _____

Contractor: GALLAGHERS PLUMBING & HEATING

Address 115 RT 46 HACKETTSTOWN NJ 07480

Tel. (908) 852-1700 Fax (908) 852-0458

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

Contractor License No. 6853 Expiration Date: 6/30/2019

Federal Employee No. 222790132

B. PLUMBING CHARACTERISTICS

Use Group _____ Present _____ Proposed R-5

Building Sewer Size _____ ☒ Public Sewer ☐ Private Septic

Water Service Size _____ ☒ Public Water ☐ Private Well

Estimated Cost of Plumbing Work \$16,900

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plan Required

Partial Underslab Utilities Approved

Date: _____ by: _____

☐ Plumbing Plans Approved

Date: _____

Approved by: _____

Joint Plan Review Required

☐ Building ☐ Electrical

☐ Fire ☐ Elevator

SUBCODE APPROVAL FOR PERMIT

Date: _____ by: _____

SUBCODE APPROVAL FOR CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date: _____

Approved by: _____

INSPECTIONS

Type:

Slab

Rough

Water

Sewer

Fixtures

Gas Equipment

Gas Piping

LP Gas Tank

Fuel Oil Piping

Solar

TCO

Final

Dates (Month/Day)

Failure

Approval

Initial

☐ Licensed Plumbing Contractor

☐ Exempt Applicant

U.C.C.F. 130 (rev. 11/09)

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name
D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
NEW SINGLE FAMILY DWELLING,

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
5	Water Closet	\$75
	Urinal/Bidet	
2	Bath Tub	\$30
7	Lavatory	\$105
3	Shower	\$45
	Floor Drain	
2	Sink	\$30
1	Dishwasher	\$15
	Drinking Fountain	
1	Washing Machine	\$15
2	Hose Bibb	\$30
1	Water Heater	\$15
	Fuel Oil Piping	
6	Gas Piping	\$90
	LP Gas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
1	Backflow Preventor	\$91
	Greasetrap	
1	Sewer Connector	\$91
1	Water Service Connection	\$91
2	Stacks	\$30
2	Other <u>A/C</u>	\$182

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee

TOTAL FEE

\$935

Date Received 7/5/2017

Control # C-17-00729

Date Issued 8/14/2017

Permit # 17-674

C. CERTIFICATION IN LIEU OF OATH

I hereby certify 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.



ELECTRICAL 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 5201 Lot 11.03 Qualification Code _____

Work Site Location: 14 DIVISION AVE MADISON, NJ 07940

Owner in Fee: MILLENNIUM DEVELOPMENT GROUP, LLC

Address 15 MILLER ROAD, NEW VERNON NJ 07976

Tel. (973) 445-8866 Email _____

Contractor: FOGLIA ELECTRICAL, LLC

Address 17 SHERBROOKE DRIVE FLORHAM PARK NJ 07832

Tel. (973) 879-3652 Email fogliaelectric@hotmail.com

Lic No. 14433 Fax. (973) 377-7726

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

Federal Employee No. 45-5338623

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R-5

☐ Pole/Pad # _____ ☐ Temporary ☐ Other

Building Occupied as RESIDENCE Utility Co. _____

Estimated Cost of Electrical Work \$22,800

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
	Date	Type	Failure	Approval	Initial
☐ No Plan Required					
Partial Underslab Utilities Approved					
Date: _____ by: _____					
Electric Plans Approved					
Date: _____ by: _____					
Joint Plan Review Required					
☐ Building ☐ Plumbing					
☐ Fire ☐ Elevator					
☐ Electrical Plans Approved					
SUBCODE APPROVAL for PERMIT					
Date: _____ by: _____					
SUBCODE APPROVAL for CERTIFICATE					
☐ CO ☐ CCO ☐ CA					
Date: _____					
Approved by: _____					
Date of Grounding and Bonding		Annual Pool Inspection		Final Cut-in-Card Date Issued	
Certification		Barrier-Free		Temp. Cut-in-Card Date Issued	

U.C.C F120 (rev. 11/09)

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

Date Received 7/5/2017

Date Issued 8/14/2017

Control # C-17-00729

Permit # 17-674

C. CERTIFICATION IN LIEU OF OATH

I hereby certify 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 Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Contr ☐ Certifd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NEW SINGLE FAMILY DWELLING,

QTY.	SIZE	ITEMS	FEE (Office Use Only)
139		Lighting Fixtures	
103		Receptacles	
62		Switches	
9		Detectors	
		Light Poles	
5		Motors - Fract. HP	
		Emergency & Exit Lights	
7		Communication Points	
		Alarm Devices/F.A.C. Panel	
325		TOTAL NUMBERS	\$149
		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	
1	2	KW Dishwasher	\$15
		HP Garbage Disposal	
2	3.5	KW Central A/C Unit	\$30
		HP/KW Space Heater/Air	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
1	22	KW Transformer/Generator	\$65
1	200	AMP Service	\$65
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee

TOTAL FEE

\$324



FIRE 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 5201 Lot 11.03 Qualification Code

Work Site Location: 14 DIVISION AVE MADISON NJ 07940

Owner in Fee: MILLENIUM DEVELOPMENT GROUP, LLC
Address 15 MILLER ROAD NEW VERNON NJ 07976 Email
Tel. (973) 445-8866
Contractor: FOGLIA ELECTRICAL, LLC Tel. (973) 879-3652
Address 17 SHERBROOKE DRIVE FLORHAM PARK NJ 07832 Email fogliaelectric@hotmail.com
Fire Protection Equipment, NJ Div of Fire Safety Permit No.
Fire Protection Equipment, NJ Div of Fire Safety Installer No.
Fire Alarm Contractor No. Expiration Date:
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Employee No. 45-5338623 Fax (973) 377-7726

B. FIRE PROTECTION CHARACTERISTICS
Use Group Present Proposed R-5 Fuel Type ☐ Flammable or ☐ Combustible
Constr. Class Present Proposed Capacity
Heating Systems: ☐ New or ☐ Modification to Existing ☐ New or ☐ Existing
or ☐ Conversion or ☐ Replacement
Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
☐ Other
Location:
Total Cost of Fire Protection Work \$950

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
☐ No Plan Required	Alarm System				
Partial Underslab Utilities Approved	Suppression Sys.				
Date: by:	Standpipe				
☐ Fire Protection Plans Approved	Fire Pump				
Date:	Pre-Eng. System				
Approved by:	Mechanical				
Joint Plan Review Required	Smoke Control				
☐ Building ☐ Plumbing	TCO				
☐ Electrical ☐ Elevator	Flam/Cumbust Tank				
SUBCODE APPROVAL for PERMIT		Fireplace Venting			
Date: by:	Final				
SUBCODE APPROVAL for CERTIFICATE		Other			
☐ CO ☐ CCO ☐ CA					
Date: by:					

U.C.C.F140 (rev. 11/09)

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

Date Received 7/5/2017
Control # C-17-00729
Date Issued 8/14/2017
Permit # 17-674

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.

Applicant's Signature/Contractor's Seal and Signature and Printed Name
☐ Certified Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK
NEW SINGLE FAMILY DWELLING,
Water Supply Source
Method of Alarm/Suppression System Supervision:

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
☐ System		
☒ 110v Interconnected		
☒ CO Detectors/110v		
Alarm Devices (i.e. smoke, heat, pulls, water/flow)	10	
Supervisory Devices (tamper, low/high air)		
Signaling Devices (horn/strobes, bells)		
Other Devices		
TOTAL	10	\$50.00
Suppression Systems		
Fire Pump GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fire Appliances ☐ Gas ☐ Oil ☐ Solid		
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge
Minimum Fee
State Permit Surcharge Fee
TOTAL FEE \$50



PERMIT UPDATE

Date Update Issued 8/14/2017
Control # C-17-00729+A
Permit # 17-674+A

IDENTIFICATION Block: 5201 Lot: 11.03 Qualifier _____
Work Site Location: 14 DIVISION AVE. MADISON, NJ 07940 Contractor MILLENIUM DEVELOPMENT GROUP, LLC
Owner in Fee MILLENIUM DEVELOPMENT GROUP, LLC Address 15 MILLER ROAD NEW VERNON NJ 07976
15 MILLER ROAD NEW VERNON NJ 07976 Telephone: (973) 445-8866
Telephone: (973) 445-8866 Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. 0600342795

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

PRE-FAB FIREPLACE-GAS

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 \$3,000

Construction Official _____ Date 8/14/2017

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$0
Plumbing	\$0
Fire Protection	\$65
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$65
Check No.	1341
Cash	\$0
Credit	\$0
Collected By	LISA QUINN

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



FIRE 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 5201 Lot 11.03 Qualification Code

Work Site Location: 14 DIVISION AVE MADISON NJ 07940

Owner in Fee: MILLENIUM DEVELOPMENT GROUP, LLC
Address 15 MILLER ROAD NEW VERNON NJ 07976 Email

Contractor: FIRESIDE HEARTH & HOME
Address 770 BRAAN AVENUE WYCKOFF NJ 07841 Tel. (973) 886-6882 / Cell: (866) 333-1106

Fire Protection Equipment, NJ Div of Fire Safety Permit No.
Fire Protection Equipment, NJ Div of Fire Safety Installer No.
Fire Alarm Contractor No. Expiration Date:
Home improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Employee No. Fax.

B. FIRE PROTECTION CHARACTERISTICS
Use Group Present Proposed R-5 Fuel Type ☐ Flammable or ☐ Combustible Capacity
Constr. Class Present Proposed
Heating Systems: ☐ New or ☐ Modification to Existing
or ☐ Conversion or ☐ Replacement
Type: ☒ Gas ☐ Oil ☐ Electric ☐ Solar
☐ Other
Location:
Fire Alarm System: ☐ New or ☐ Existing
Location of Panel:
Fire Suppression/Standpipe System:
☐ New or ☐ Existing
Location of Main Control Valve:

Total Cost of Fire Protection Work \$2,000

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
☐ No Plan Required	Alarm System				
Partial Underslab Utilities Approved	Suppression Sys.				
Date: by:	Standpipe				
☐ Fire Protection Plans Approved	Fire Pump				
Date:	Pre-Eng. System				
Approved by:	Mechanical				
Joint Plan Review Required	Smoke Control				
☐ Building ☐ Plumbing	TCO				
☐ Electrical ☐ Elevator	Flam/Cumbust Tank				
SUBCODE APPROVAL for PERMIT		Fireplace Venting			
Date: by:	Final				
SUBCODE APPROVAL for CERTIFICATE		Other			
☐ CO ☐ CCO ☐ CA					
Date: by:					

U.C.C F140 (rev. 11/09)

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

Date Received 7/5/2017
Control # C-17-00729+A
Date Issued 8/14/2017
Permit # 17-674+A

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.

Applicant's Signature/Contractor's Seal and Signature and Printed Name
☐ Certified Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK
PRE-FAB FIREPLACE-GAS,
Water Supply Source
Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
☐ System		
☐ 110v Interconnected		
☐ CO Detectors/110v		
Alarm Devices (i.e. smoke, heat, pulls, water/flow)		
Supervisory Devices (tamper, low/high air)		
Signaling Devices (horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fire Appliances ☒ Gas ☐ Oil ☐ Solid	1	\$65
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge
Minimum Fee
State Permit Surcharge Fee
TOTAL FEE \$65



PERMIT UPDATE

Date Update Issued 8/14/2017
Control # C-17-00729+B
Permit # 17-674+B

IDENTIFICATION Block: 5201 Lot: 11.03 Qualifier _____
Work Site Location: 14 DIVISION AVE MADISON, NJ 07940 Contractor MILLENIUM DEVELOPMENT GROUP, LLC
Owner in Fee MILLENIUM DEVELOPMENT GROUP, LLC Address 15 MILLER ROAD NEW VERNON NJ 07976
15 MILLER ROAD NEW VERNON NJ 07976 Telephone: (973) 445-8866
Telephone: (973) 445-8866 Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. 0600342795

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

NEW HVAC SYSTEM (2)

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 \$21,300

Construction Official _____

8/14/2017
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$0
Plumbing	\$0
Fire Protection	\$130
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$130
Check No.	1341
Cash	\$0
Credit	\$0
Collected By	LISA QUINN

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



FIRE SUBCODE
TECHNICAL SECTION



Date Received 7/5/2017
Control # C-17-00729+B
Date Issued 8/14/2017
Permit # 17-674+B

A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000
Block 5201 Lot 11.03 Qualification Code

Work Site Location: 14 DIVISION AVE MADISON, NJ 07940

Owner in Fee: MILLENIUM DEVELOPMENT GROUP, LLC
Address 15 MILLER ROAD NEW VERNON NJ 07976 Email
Tel. (973) 445-8866
Contractor: COMFORT AIR HEATING & COOLING, LLC Tel. (732) 822-6218
Address 13 HILLSIDE AVE MONMOUTH JUNCTION NJ 08852 Email
Fire Protection Equipment, NJ Div of Fire Safety Permit No.
Fire Protection Equipment, NJ Div of Fire Safety Installer No.
Fire Alarm Contractor No. Expiration Date:
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Employee No. Fax.

B. FIRE PROTECTION CHARACTERISTICS
Use Group Present Proposed R-5 Fuel Type Flammable or Combustible Capacity
Constr. Class Present Proposed
Heating Systems: New or Modification to Existing Fire Alarm System: New or Existing
or Conversion or Replacement Location of Panel:
Type: Gas Oil Electric Solar New or Existing
Other Location of Main Control Valve:
Location:
Total Cost of Fire Protection Work \$21,300

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Failure	Approval	Initial
☐ No Plan Required	Alarm System				
Partial Underslab Utilities Approved	Suppression Sys.				
Date: by:	Standpipe				
☐ Fire Protection Plans Approved	Fire Pump				
Date:	Pre-Eng. System				
Approved by:	Mechanical				
Joint Plan Review Required	Smoke Control				
☐ Building ☐ Plumbing	TCO				
☐ Electrical ☐ Elevator	Flam/Cumbust Tank				
SUBCODE APPROVAL for PERMIT	Fireplace Venting				
Date: by:	Final				
SUBCODE APPROVAL for CERTIFICATE	Other				
☐ CO ☐ CCO ☐ CA					
Date: by:					

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.

Applicant's Signature/Contractor's Seal and Signature and Printed Name
☐ Certified Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA	DESCRIPTION OF WORK	NUMBER	FEE (Office Use Only)
NEW HVAC SYSTEM, (2)			
Water Supply Source			
Method of Alarm/Suppression System Supervision			
Flammable/Combustible Tanks			
Alarm Systems			
☐ System			
☐ 110v Interconnected			
☐ CO Detectors/110v			
Alarm Devices (i.e. smoke, heat, pulls, water/flow)			
Supervisory Devices (tamper, low/high air)			
Signaling Devices (horn/strobes, bells)			
Other Devices			
TOTAL			
Suppression Systems			
Fire Pump GPM Type			
Dry Pipe/Alarm Valves			
Pre-action Valves			
Sprinkler Heads (Dry and Wet)			
Standpipes			
Pre-engineered Systems			
Wet Chemical			
Dry Chemical			
CO2 Suppression			
Foam Suppression			
FM200 Suppression			
Other			
Other Systems			
Kitchen Hood Exhaust System			
Smoke Control System			
Fire Appliances Gas Oil Solid			
Fireplace Venting/Metal Chimney			
Other			
Administrative Surcharge			
Minimum Fee			
State Permit Surcharge Fee			
TOTAL FEE			\$130