

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 08/24/94
Control #
Permit # 942296

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 25.07 Lot 10 Qual _____

Work Site Location 15 SHERWOOD ST Contractor HOMEOWNER
Address _____
Telephone () _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. HO- _____

Owner in Fee WALLER KENNETH
Address 15 SHERWOOD ST
CLIFTON, NJ 07013
Telephone _____

Is hereby granted permission to perform the following work:

[X] BUILDING [] PLUMBING [] ASBESTOS ABATEMENT (Subchapter 8 only)
[] ELECTRICAL [] FIRE PROTECTION [] LEAD HAZARD ABATEMENT
[] ELEVATOR DEVICES [] MECHANICAL [] DEMOLITION
[] OTHER _____

DESCRIPTION OF WORK:

DECK & PATIO.

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 \$ 2,000

PAYMENTS (Office Use Only)

Building	40
Electrical	0
Plumbing	0
Fire Protection	0
Mechanical	0
Elevator Devices	0
Other	
DCA State Permit Fee	2
Cert. of Occupancy	15
Other	
Total	57
Check No.	
Cash	X
Collected By	MS

Construction Official _____ Date 08/24/94

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 04/21/97
Control #
Permit # 970830

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 25.07 Lot 10 Qual _____

Work Site Location 15 SHERWOOD ST (ROOFING) Contractor _____
Address _____ Address _____

Owner in Fee WALLER KENNETH Telephone () _____
Address 15 SHERWOOD ST Lic. No. or Bldrs. Reg. No. _____
CLIFTON, NJ 07013 Federal Emp. No. _____
Telephone _____

Is hereby granted permission to perform the following work:

[X] BUILDING [] PLUMBING [] ASBESTOS ABATEMENT (Subchapter 8 only)
[] ELECTRICAL [] FIRE PROTECTION [] LEAD HAZARD ABATEMENT
[] ELEVATOR DEVICES [] MECHANICAL [] DEMOLITION
[] OTHER _____

DESCRIPTION OF WORK:

ROOFING

PAYMENTS (Office Use Only)
Building 40
Electrical 0
Plumbing 0
Fire Protection 0
Mechanical 0
Elevator Devices 0
Other _____
DCA State Permit Fee 2
Cert. of Occupancy 0
Other _____
Total 42
Check No. _____
Cash X
Collected By RMY

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 \$ 2,000

Construction Official _____ Date 04/21/97

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 12/03/04
Control #
Permit # 045352

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 25.07 Lot 10 Qual _____
Work Site Location 15 SHERWOOD ST (CAR PORT)
BOA 10/6/2004
Owner in Fee WALLER KENNETH
Address 15 SHERWOOD ST
CLIFTON, NJ 07013
Telephone _____

Contractor D & S CONSTRUCTION
Address 60 ROSEDALE AVE
ELMWOOD PARK, NJ 07407-
Telephone (201) 873-7757
Lic. No. or Bldrs. Reg. No. NO LIC
Federal Emp. No. _____

Is hereby granted permission to perform the following work:

[X] BUILDING [] PLUMBING [] ASBESTOS ABATEMENT (Subchapter 8 only)
[] ELECTRICAL [] FIRE PROTECTION [] LEAD HAZARD ABATEMENT
[] ELEVATOR DEVICES [] MECHANICAL [] DEMOLITION
[] OTHER _____

DESCRIPTION OF WORK:

CAR PORT BOA OCT 6, 2004

PAYMENTS (Office Use Only)
Building 90
Electrical 0
Plumbing 0
Fire Protection 0
Mechanical 0
Elevator Devices 0
Other _____
DCA State Permit Fee 8
Cert. of Occupancy 25
Other _____
Total 123
Check No. _____
Cash _____
Collected By DB

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 \$ 6,000

Construction Official _____ Date 12/03/04

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 08/29/06
Control #
Permit # 063759

UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 25.07 Lot 10 Qual _____

Work Site Location 15 SHERWOOD SIDING Contractor BOB HOOGMOED HOME IMPROVEMENTS

Owner in Fee WALLER KENNETH Address 490 MACOPIN ROAD

Address 15 SHERWOOD ST Telephone (201) 838-6073

Telephone CLIFTON, NJ 07013- Lic. No. or Bldrs. Reg. No. 13VH02470900

Federal Emp. No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

SIDING

PAYMENTS (Office Use Only)

Building	75
Electrical	0
Plumbing	0
Fire Protection	0
Mechanical	0
Elevator Devices	0
Other	
DCA State Permit Fee	7
Cert. of Occupancy	0
Other	
Total	82
Check No.	
Cash	X
Collected By	DR

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 \$ 5,000

Construction Official _____ Date 08/29/06

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 11/19/12
Control #
Permit # 124067

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 25.07 Lot 10 Qual _____

Work Site Location 15 SHERWOOD ST

Owner in Fee WALLER KENNETH

Address 15 SHERWOOD ST

CLIFTON, NJ 07013-

Telephone _____

Contractor ROMAR ELECTRICAL CONTRACTORS

Address 185 C MADISON AVE

NEW MILFORD, NJ 07646-

Telephone (866) 729-7662

Lic. No. or Bldrs. Reg. No. 14023A

Federal Emp. No. _____

Is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ ASBESTOS ABATEMENT (Subchapter 8 only)

☒ ELECTRICAL ☐ FIRE PROTECTION ☐ LEAD HAZARD ABATEMENT

☐ ELEVATOR DEVICES ☐ MECHANICAL ☐ DEMOLITION

☐ OTHER _____

DESCRIPTION OF WORK:

LOAD CONTROL DISCONNECT FOR A/C UNIT

PAYMENTS (Office Use Only)

Building _____ 0

Electrical _____ 60

Plumbing _____ 0

Fire Protection _____ 0

Mechanical _____ 0

Elevator Devices _____ 0

Other _____

DCA State Permit Fee _____ 1

Cert. of Occupancy _____ 0

Other _____

Total _____ 61

Check No. _____

Cash _____ X

Collected By _____ LH

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 \$ 200

Construction Official _____ Date 11/19/12

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 01/23/13
Control #
Permit # 130269

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 25.07 Lot 10 Qual _____

Work Site Location 15 SHERWOOD ST Contractor KEVIN J. DOYLE
Address 14 ESSEX PL
MADISON, NJ 07940-
Owner in Fee WALLER KENNETH Telephone (201) 486-8040
Address 15 SHERWOOD ST Lic. No. or Bldrs. Reg. No.
CLIFTON, NJ 07013- Federal Emp. No. _____
Telephone _____

Is hereby granted permission to perform the following work:

[] BUILDING [X] PLUMBING [] ASBESTOS ABATEMENT (Subchapter 8 only)
[X] ELECTRICAL [X] FIRE PROTECTION [] LEAD HAZARD ABATEMENT
[] ELEVATOR DEVICES [] MECHANICAL [] DEMOLITION
[] OTHER _____

DESCRIPTION OF WORK:

REPLACE BOILER AND HWH

PAYMENTS (Office Use Only)
Building _____ 0
Electrical _____ 60
Plumbing _____ 150
Fire Protection _____ 60
Mechanical _____ 0
Elevator Devices _____ 0
Other _____
DCA State Permit Fee _____ 7
Cert. of Occupancy _____ 0
Other _____
Total _____ 277
Check No. _____
Cash _____ X
Collected By _____ SS

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 \$ 4,500

Construction Official _____ Date 01/23/13

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 05/14/14
Control #
Permit # 142277

UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 25.07 Lot 10 Qual _____

Work Site Location 15 SHERWOOD ST

Owner in Fee WALLER KENNETH

Address 15 SHERWOOD ST

 CLIFTON, NJ 07013-

Telephone _____

Contractor ACCURATE ELECTRIC

Address 2 INDUSTRIAL RD

 FAIRFIELD, NJ 07004-

Telephone (973) 887-7550

Lic. No. or Bldrs. Reg. No. 12331

Federal Emp. No. _____

Is hereby granted permission to perform the following work:

☐ BUILDING ☒ PLUMBING ☐ ASBESTOS ABATEMENT (Subchapter 8 only)

☒ ELECTRICAL ☐ FIRE PROTECTION ☐ LEAD HAZARD ABATEMENT

☐ ELEVATOR DEVICES ☐ MECHANICAL ☐ DEMOLITION

☐ OTHER _____

DESCRIPTION OF WORK:

A/C (DIRECT) REPLACEMENT

PAYMENTS (Office Use Only)

Building	0
Electrical	160
Plumbing	70
Fire Protection	0
Mechanical	0
Elevator Devices	0
Other	
DCA State Permit Fee	11
Cert. of Occupancy	0
Other	
Total	241
Check No.	
Cash	X
Collected By	LH

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 \$ 6,667

Construction Official 05/14/14
Date

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 02/17/15
Control #
Permit # 150186

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 25.07 Lot 10 Qual _____

Work Site Location 15 SHERWOOD ST Contractor ROMAR ELECTRICAL CONTRACTORS

Owner in Fee WALLER KENNETH Address 185 C MADISON AVE

Address 15 SHERWOOD ST NEW MILFORD, NJ 07646-

CLIFTON, NJ 07013- Telephone (866) 729-7662

Telephone Federal Emp. No. 14023A

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

DESCRIPTION OF WORK:

LOAD CONTROL DISCONNECT FOR A/C UNIT

PAYMENTS (Office Use Only)
Building 0
Electrical 60
Plumbing 0
Fire Protection 0
Mechanical 0
Elevator Devices 0
Other _____

DCA State Permit Fee 1
Cert. of Occupancy 0
Other _____
Total 61
Check No. _____
Cash X
Collected By LH

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 \$ 200

Construction Official _____ Date 02/17/15

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 03/16/17
Control #
Permit # 170794

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 25.07 Lot 10 Qual _____

Work Site Location 15 SHERWOOD ST Contractor KB ELECTRIC INC

Owner in Fee WALLER KENNETH Address 78-80 BROUGHTON AVE

Address 15 SHERWOOD ST BLOOMFIELD, NJ -

Telephone CLIFTON, NJ 07013- Telephone (973) 744-6201

Lic. No. or Bldrs. Reg. No. 11421

Federal Emp. No. _____

Is hereby granted permission to perform the following work:

[] BUILDING [X] PLUMBING [] ASBESTOS ABATEMENT (Subchapter 8 only)
[X] ELECTRICAL [] FIRE PROTECTION [] LEAD HAZARD ABATEMENT
[] ELEVATOR DEVICES [] MECHANICAL [] DEMOLITION
[] OTHER _____

DESCRIPTION OF WORK:

1ST FLOOR KITCHEN RENOVATION - PLUMBING & ELECTRIC ONLY

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 \$ 2,598

Construction Official _____

03/16/17
Date

PAYMENTS (Office Use Only)

Building	0
Electrical	80
Plumbing	60
Fire Protection	0
Mechanical	0
Elevator Devices	0
Other	
DCA State Permit Fee	5
Cert. of Occupancy	25
Other	
Total	170
Check No.	
Cash	X
Collected By	BR