ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 10/24/18
Control #
Date Issued
Permit # 18-0697

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

Block 170 Lot 69 Qualification Code

Work Site Location 90 Young Avenue Cedar Grove, NJ 07009

Owner in Fee: Tim Pastorino

Tel. (973) 857-1436 e-mail permits@goldmedalservice.com

Address SAME
street municipality zip code

Contractor: Gold Medal Service, LLC Tel. (732) 390-3725

Address 11 Cotters Lane e-mail permits@goldmedalservice.

East Brunswick, NJ 08816

Contractor License No. 18342 Exp. Date

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

Federal Emp. ID No. 830357354 FAX: (732) 390-3793

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 7,400

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 10/24/18
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 11/2/18
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			11/2/18	
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued 11/2/18
Annual Pool Inspection
Date of Grounding and Bonding Certification

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Joseph Todaro

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
replace a/c+furnace+150 amp service

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
2		TOTAL NUMBERS	$ 50
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	50
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	75
1	4	KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	150	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1		furnace	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$ 175
TOTAL FEE	$

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

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

ATTN: Drue 973-857-7105

MECHANICAL INSPECTOR
TECHNICAL SECTION

Date Received / Control # 10/24/18

Date Issued / Permit # 18-0697

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

Block 170 Lot 69 Qualification Code

Work Site Location 90 Young Avenue Cedar Grove, NJ 07009

Owner in Fee: Tim Pastorino

Tel (973) 857-1435 e-mail permits@goldmedalservice.com

Address same

Contractor: Gold Medal Plumbing Heating Cooling Electric, Inc. (street / municipality) Tel (732) 390-3725 (zip code)

Address 11 Cotters Lane e-mail permits@goldmedalservice.c

East Brunswick, NJ 08816

Contractor License No. or Builder Registration No. 1694 Exp. Date

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

Federal Emp. ID No. 830357354 FAX: (732) 390-3793

B. MECHANICAL CHARACTERISTICS

Use Group Present: Proposed:

Heating System work: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Estimated Cost of Mechanical Work $ 8,500

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: Joe Todaro

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

replace a/c+furnace+coil

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

[ ] Mechanical Plans Approved

Date: 10/16/18 Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 10/16/18

Approved by: BC

SUBCODE APPPROVAL for CERTIFICATE

[X] CA [ ] CCO

Date: 11/13/18

Approved by: BC

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Gas Piping				
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
Other HVAC			11/13/18	BC

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Heater	
	Fuel Oil Piping Connections	
	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
1	Hot Air Furnace	
	Oil Tank	
	LPG Tank	
	Fireplace	
1	Other A/C	
	Administrative Surcharge $	
	Minimum Fee $	
	State Permit Surcharge Fee $	
	TOTAL FEE $	160

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

TOWNSHIP OF CEDAR GROVE
525 POMPTON AVENUE
CEDAR GROVE, N.J. 07009

Date Issued 11/20/18
Control #
Permit # 18-0697

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 170 Lot 69 Qual
Work Site Location 90 YOUNG AVENUE

Owner in Fee/Occupant PASTORINO HVAC/AMP SERV
Address 90 YOUNG AVE
CEDAR GROVE, NJ 07009-
Telephone ( ) -
Contractor GOLD MEDAL PLUMBING
Address
, -
Telephone ( ) - Fax ( ) -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. -

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

HVAC/SERVICE

[X] CERTIFICATE OF OCCUPANCY
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[ ] CERTIFICATE OF APPROVAL
This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:
[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (____ years); see file

[ ] CERTIFICATE OF CONTINUED OCCUPANCY
This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] CERTIFICATE OF COMPLIANCE
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____, ____.

John Fuscaldo
Construction Official

Fee $ 0
Paid [X] Check No. 3702
Collected by: MM

U.C.C. F260 (rev. 3/96)

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 7/2/14
Control #
Date Issued
Permit # 14-0358

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

Block 170 Lot 69 Qualification Code

Work Site Location 90 Young Ave Cedar Grove NJ 07009

Owner in Fee: Tim Pastorino

Tel. (973) 857 1436 e-mail

Address 90 Young Ave Cedar Grove NJ 07009
(street / municipality / zip code)

Contractor: ALB-01 LLC Tel. (800) 651 9092

Address 238 Crescent Lane e-mail
Cliffside Park NJ 07010

Contractor License No. or Builder Registration No. 13VH07039800 Exp. Date 12/31/2014

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

Federal Emp. ID No. 461 079 473 FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[X] Footings/Foundations	7/2/14	
[X] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[X] CO [ ] CCO [ ] CA
Date: 7/21/14
Approved by:

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Footing			7/21/14	
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			7/21/14	
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present 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.
Max. Live Load
Max. Occupancy Load

Constr. Class Present Proposed
If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $ ~~4800~~
2. Rehabilitation $ 4800
3. Total (1+ 2) $

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: ALBERT

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Rebuild new brick chimney fireplace.

TYPE OF WORK:
[ ] New Building
[ ] Addition
[X] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence Height (exceeds 6')
[ ] 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)
$ 125

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $ 125 -

TOWNSHIP OF CEDAR GROVE
525 POMPTON AVENUE
CEDAR GROVE, N.J. 07009

Date Issued 08/25/14
Control #
Permit # 14-0358

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 170 Lot 69 Qual
Work Site Location 90 YOUNG AVENUE

Owner in Fee/Occupant PASTORINO CHIMNEY
Address 90 YOUNG AVE
CEDAR GROVE, NJ 07009-
Telephone ( ) -
Contractor ALB-01 ABC
Address 238 CRESCENT LANE
CLIFFSIDE PARK, NJ 07010-
Telephone ( ) - Fax ( ) -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. -

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

CHIMNEY

[X] CERTIFICATE OF OCCUPANCY
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[ ] CERTIFICATE OF APPROVAL
This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:
[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (____ years); see file

[ ] CERTIFICATE OF CONTINUED OCCUPANCY
This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] CERTIFICATE OF COMPLIANCE
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____, ____.

John D'Ascenzo
Construction Official

Fee $ 50
Paid [X] Check No. 1074
Collected by: MM

U.C.C. F260 (rev. 3/96)

PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 12/28/18

Date Issued / Permit # 18-0860

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

Block 170 Lot 69 Qualification Code

Work Site Location 90 YOUNG AVE C.G. BASEMENT

Owner in Fee: TIM PASTORINO

Tel. (973) 857-1436 e-mail

Address

Contractor: SELF (street / municipality / zip code) Tel. ( )

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. SS# 158-34-0322 FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ APPROX. $500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

[ ] Partial -Underslab Utilities Approved Date 12/13/18 Approved by: BC

[ ] Plumbing Plans Approved Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT Date: 12/13/18 Approved by: BC

SUBCODE APPROVAL for CERTIFICATE

[X] CO [ ] CCO [ ] CA Date: 1/24/19 Approved by: BC

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures			1/24/19	BC
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			1/24/19	BC

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: Tim Pastorino

Print name here: TIM PASTORINO

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALL NEW RHEEM HOT WATER HEATER IN MY BASEMENT.

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater	50
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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

CARBON MONOXIDE DETECTOR REQUIRED WITHIN 10 FEET OF A FUEL BURNING APPLIANCE

UCC F130 (rev. 11/09)
For reorder call: (609) 390-1400 Allegra Marketing • Print • Mail

TOWNSHIP OF CEDAR GROVE
525 POMPTON AVENUE
CEDAR GROVE, N.J. 07009

Date Issued 02/04/19
Control #
Permit # 18-0860

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 170 Lot 69 Qual
Work Site Location 90 YOUNG AVENUE

Owner in Fee/Occupant PASTORINO WH
Address 90 YOUNG AVE
CEDAR GROVE, NJ 07009-
Telephone ( ) -
Contractor SELF
Address
, -
Telephone ( ) - Fax ( ) -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. -

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

WATER HEATER

[X] CERTIFICATE OF OCCUPANCY

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[ ] CERTIFICATE OF APPROVAL

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:
[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (____ years); see file

[ ] CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] CERTIFICATE OF COMPLIANCE

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____, ____.

John Fuscaldo
Construction Official

Fee $ 0
Paid [X] Check No. 5068
Collected by: MM

U.C.C. F260 (rev. 3/96)

ELECTRICAL SUBCODE TECHNICAL SECTION

UNIFORM CONSTRUCTION CODE — NEW JERSEY

Date Received
Date Issued
Control #
Permit #

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

Block 110 Lot 27

Work Site Location 90 YOUNG AVE
CEDAR GROVE, N.J. 07009

Owner in Fee MR + MRS PASTORINO

Address SAME

Tele. (201) 857-1436

Contractor D. PETRONELLI ELECTRIC INC.

Address 2 DODD ST
W. CALDWELL N.J. 07006

Tele. (201) 226-9446

Lic. No. 2070

Federal Emp. No. 22-2324632 or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ 1000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: _____
Approved by: _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 7-25-96
Approved By: J. Dunne

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Temporary				
Constr. Serv.				
TCO				
Other Pool Rpmt.			7-25-96	JDL
Service				
Final				

Temp Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

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 and perform the work listed on this application.

_____
Signature—Contractor Seal

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
		Fixtures (1)
		Receptacles (2)
		Switches (3)
		Total 1 + 2 + 3
	___ Kw	Range
	___ Kw	Oven(s)
	___ Kw	Surface Unit
	___ hp	Dishwasher
	___ hp	Garbage Disposal
	___ Kw	Dryer
	___ Kw	A/C Unit
		Burglar Alarms
		Intercoms Panels
		Smoke Detectors
	___ hp	Whirlpool/spa
		Pool Bonding
	___ hp	Pool Filter Motor
		Pool Lights
	___ Kw	Water Heater(s)
	___ Kw	Central heat: oil, gas or elec.
	___ Kw	Baseboard Heat Units
		Thermostats
	___ hp	Heat Pump
	___ hp	Pump(s)
	___ Amp	Motor Control Center/Sub Panels
		Signs
	_____	Light Standards
	___ hp	Motors—Fractional H.P.
	___ hp	Motors--All Others
	___ Kw	Transformers
	___ Kw	Generators
	___ Amp	Service Entrance
X	X	Other

CONSTRUCT MAIN INSTALL A MOUNTING BOARD FOR THE FOLLOWING RE PAIR — REPAIR AND REPLACE EXISTING POOL SWITCHES AND FIXTURES

FEE (Office Use Only)

Administrative Surcharge	$ _____
Minimum Fee	$ _____
DCA Training Fee	$ _____
TOTAL FEE	$ 45.00

Paid [ ] Check # _____
Collected by: _____

U.C.C. Form F-120B

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

CERTIFICATE

Date Issued 9-7-96
Control #
Permit # 96-0382

IDENTIFICATION

Block 170 Lot 69
Work Site Location 90 Yang Ave.
Cedar Grove, NJ 07009
Owner in Fee M/M Rostarica
Address 90 Yang Ave
CG, NJ 07009
Tele. (201) 857-1436
Contractor A. Petrangeli Electric Inc.
Address 2 Dodd Rd.
West Caldwell, NJ 07006
Tele. (201) 226-9446
Lic. No. or Bldrs. Reg. No. 2070
Federal Emp. No. 22-2324632
or Social Security No.

Home Warranty No.
Use Group R-3
Maximum Live Load
Description of Work/Use:

Elec. Repair to pool

Type of Warranty Plan: [ ] State [ ] Private
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ CERTIFICATE OF OCCUPANCY ☒ CERTIFICATE OF APPROVAL

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

☐ CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate:

John Vasquez
CONSTRUCTION OFFICIAL

Fee $
Paid [X] Check No.
Collected by: ALC

U.C.C. Form F-260A

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR