



CONSTRUCTION PERMIT

Date Issued 10/3/06
Permit # 06-330

IDENTIFICATION Block 233 Lot 1.01 Qualification Code D
Work Site Location 591 Woodhaze - Accorac Rd. Contractor Alana Builders
Dean Reed Address 2510 Industrial Way
Owner in Fee RIS Apartments Richard W 0810
Address P.O. Box 229 Tel. (856) 798-1990
CARL W 0810 Lic. No. or Bids. Reg. No. 22-2389820
Tel. () 226-815

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Warehouse / Office

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 \$ _____

Construction Official *[Signature]*

Date _____

PAYMENTS (Office Use Only)	
Building	<u>1548</u>
Electrical	_____
Plumbing	_____
Fire Protection	_____
Elevator Devices	_____
Other	_____
DCA State Permit Fee	<u>292</u>
Cert. of Occupancy	<u>65</u>
Other	_____
Total	<u>1897</u>
Check No.	<u>12526</u>
Cash	_____
Collected by	<u>gcm</u>

U.C.C. F170 (rev. 01/04)

- 1 WHITE-INSPECTOR 2 CANARY-OFFICE 3 PINK-TAX ASSESSOR 4 GOLD-APPLICANT

(see reverse side)



PERMIT UPDATE

Date Update Issued
Control #
Permit #
Date Permit Issued

11/13/66
06-3304A
10/03/66

IDENTIFICATION Block 223 Lot 1.01
Work Site Location 'D' Bldg.
331 Looking - Demerit Rd.
Owner in Fee RDS Investments
Address P.O. Box 279
CMCH, NJ 08210
Tele. () 226-8715

Contractor Allene Bros.
Address 350 Industrial Way
Kineland NJ
Tele. () 856-794-9440
Lic. No. or Bids. Reg. No. _____
Federal Emp. No. _____
or Social Security No. _____

is hereby granted permission to perform the following work:

- ☐ BUILDING ☒ PLUMBING ☐ OTHER _____
☒ ELECTRICAL ☒ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Estimated Cost of Work \$ 100,000

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building	_____
Electrical	<u>231</u>
Plumbing	<u>255</u>
Fire Protection	<u>38</u>
Elevator Devices	_____
Other	_____
DCA Training Fee	_____
Cert. of Occ.	_____
Other	_____
Total	<u>584</u>
Check No.	<u>12927</u>
Cash	_____
Collected By:	