

Catherine Underwood

From: Valerie Daberkoe <opra+request-14265-8c867254@requests.opramachine.com>
Sent: Wednesday, June 10, 2020 10:21 AM
To: Catherine Underwood
Subject: OPRA request - Environmental Records

Dear Berlin Township,

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:

EnviroSure is conducting a Phase I ESA at 436 Commerce Lane (Block 1203; Lot 52). In that regard, we are requesting a search of all files pertaining to the property. Especially, underground storage tanks, environmental concerns, building permits and ownership records.

Thank you.
Valerie Daberkoe
EnviroSure, Inc.

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-14265-8c867254@requests.opramachine.com

Is cunderwood@berlintwp.com the wrong address for OPRA requests to Berlin Township? If so, please contact us using this form:

https://opramachine.com/change_request/new?body=berlin_township

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/environmental_records_21

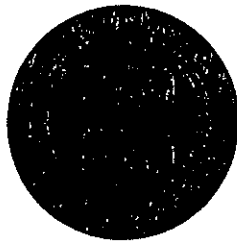
Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.

DAVID MC PEAK
Council President

Council Members

FLORENCE M. HILL
CHRISTOPHER T. MORRIS
PHYLLIS A. MAGAZZU



THOMAS J. DIGANGI
Mayor

ANN J. STILLWELL
Township Clerk

TOWNSHIP OF BERLIN
MUNICIPAL BUILDING
170 Bate Avenue
West Berlin, New Jersey 08091
(609) 767-1854

FEBRUARY 22, 1995

GEORGE J. BOTCHEOS, Esq.
1878 EAST ROUTE 70, SUITE 10
CHERRY HILL, NJ 08003

RE: RESOLUTION GRANTING PRELIMINARY
AND FINAL SITE PLAN APPROVAL AND
SUBDIVISION TO RONALD H. BIGLIN, JR.
BLOCK 1201, LOTS 43&44

DEAR MR. BOTCHEOS,

ENCLOSED FOR YOUR RECORDS IS A COPY OF THE RESOLUTION ADOPTED BY
THE BERLIN TOWNSHIP PLANNING BOARD REGARDING THE ABOVE-CAPTIONED.
NOTICE OF THIS RESOLUTION WILL APPEAR IN THIS WEEK'S EDITION OF
THE JOURNAL.

SINCERELY,

DIANE DAYTON,
LAND USE SECRETARY

ENCL.

RESOLUTION NO. 95-4

RESOLUTION OF THE BERLIN TOWNSHIP PLANNING BOARD
CONDITIONALLY GRANTING SUBDIVISION APPROVAL
AND PRELIMINARY AND FINAL SITE PLAN APPROVAL
FOR BLOCK 1201, LOTS 43 AND 44, COMMERCE LANE,
ON THE TAX MAP OF THE TOWNSHIP OF BERLIN

WHEREAS, the applicant, Ronald H. Biglin, Jr., is the owner of the property and premises situated on Commerce Lane in the Township of Berlin, also known as Block 1201, Lots 43 and 44, on the Tax Map of the Township of Berlin; and

WHEREAS, the applicant has applied for subdivision approval to eliminate the lot line between Lot 43 and Lot 44, so as to create one lot; and

WHEREAS, the applicant has also applied for Site Plan approval to erect a building and related parking for proposed office/warehouse use; and

WHEREAS, the applicant has made a presentation to the Board concerning the application, including testimony, plans, and other evidence; and

WHEREAS, the matter was opened to the public for response, comments and questions concerning the application; and

WHEREAS, the Planning Board of the Township of Berlin, after careful consideration of the evidence presented to it, has found the following facts:

1. Applicant is the owner of the subject property, and he proposes to eliminate the lot line between Lots 43 and 44 in Block 1201, and to erect a building and related parking for office/warehouse use.
2. The proposed Subdivision and Site Plan improvements will not adversely impact the neighboring properties in the district and will best serve the use of the property, as well as the health, safety and welfare of the community. The zone plan of the Township will not be impaired by the Subdivision and improvements as proposed.

WHEREAS, the Planning Board as further come to the determination that the granting of the application for a Subdivision and Site Plan improvements would be in the best interest of the Township of Berlin.

NOW, THEREFORE, BE IT RESOLVED, by the Planning Board of the Township of Berlin, that the application for a Subdivision so as to eliminate the lot line between Lot 43 and Lot 44 in Block 1201 be granted preliminary and final approval, contingent upon the following conditions:

1. Applicant shall prepare and file a Deed of Consolidation. The proposed Deed is to be submitted to the Planning Board Solicitor.

2. The aforementioned Deed of Consolidation shall address the issue of the encroachment of the Site Plan improvements onto the utility easement, as addressed below under the conditions for Site Plan approval.

NOW, THEREFORE, BE IT FURTHER RESOLVED, by the Planning Board of the Township of Berlin, that the application for preliminary and final Site Plan approval for the erection of a building and related parking for office/warehouse use, be granted preliminary and final Site Plan approval contingent upon the following conditions:

1. The parking stall widths are to be reduced to 9 feet.
2. All applicable improvements must comply with the New Jersey Barrier Free Subcode and the Americans With Disabilities Act. One handicap sign must also note van accessibility.
3. The exit radius at the westerly drive at Commerce Lane is to be increased to 20 feet.
4. The proposed development is to be shifted 10 feet eastwardly to provide for the entrance radius, at the westerly drive, to remain within the extended sidelines of the property.
5. Directional arrows and/or signage is to be placed at each driveway. Stop signs with stop bars are to be placed at each exit drive.
6. A painted island and line striping is to be placed along the rear of the building to direct vehicles toward the rear of the site.
7. Signage is to be placed at each side driveway, at the front of the building, noting "For Pickup and Deliveries Only".
8. A portion of the proposed pavement area, curb and trash enclosure encroach onto the utility easement at the rear of the site. The applicant is to acknowledge, and to place a clause in the Deed of Consolidation, indicating that the applicant will be

responsible for the replacement of these encroaching improvements in the event it becomes necessary for another party to utilize the easement.

9. The trash enclosure at the southeast corner of the site is to be increased to a size of 12 x 20 feet, and is to be constructed of a material which will match the facade of the building. The enclosure is to be oriented so that the gates are not visible from Commerce Lane. The plan detail of the enclosure must note that the gates shall be self-closing and self-locking. There shall be no outside dumpsters permitted on the site without an enclosure.

10. The Plan is to note the limits of the truck pavement along the easterly drive.

11. The Design Engineer is to demonstrate, by providing documentation, that the existing drainage system and basin will accommodate the runoff from this site, to the satisfaction of the Township Engineer. In the event this requirement cannot be met, the applicant is to provide the necessary storm water management to handle the runoff which may exceed the original design for the area.

12. With respect to landscaping, the applicant must comply with the following:

- a. Low-growing evergreens are to be included in the islands which are noted for "annuals only".
- b. All landscaping is to be removed from within the right-of-way of Commerce Lane.
- c. Low evergreen landscaped areas and trees are to be placed along each side of the property, and in the front of the site.

- d. A landscaped area consisting of arborvitae is to be constructed along the front wall of the trash enclosure.
- e. The wooded area along the rear of the site, which is to be removed for the construction of the proposed storm drainage pipe, is to be noted as a "grass area".
- f. The Plan is to be revised to note the installation of an irrigation system for all landscaped areas. A separate, metered line shall service the irrigation system.
- g. The size of the landscaped island along Commerce Lane, as noted on the proposed Plan, is to be increased, and one additional landscaped island is to be provided in this area. Additionally, the landscaped island along the front of the building is to be increased in size.

13. The Plan is to be revised to provide a minimum illumination of a one-foot candle for all areas utilized by motorists and pedestrians.

14. The applicant is to revise the Plan to address the items noted in the Sewer Engineer's report.

15. The applicant is to obtain approval and the necessary permits from the Borough of Berlin for the ductile iron pipe water service. The Plan is also to be revised to reflect the meter(s) backflow preventers and irrigation system service line. The applicant is to demonstrate that the proposed service is large enough to provide adequate supply to the domestic and irrigation system.

16. The applicant is to provide a copy of the Deed, including Deed restrictions and protective covenants pertaining to the site.

17. The following details are to be revised:

- a. Retaining Wall - Depth of footing to slab for the concrete loading area.
- b. Concrete Vertical Curb - Slope across concrete sidewalk. The sidewalk is to be haunched along the curb to reduce the potential for settlement in this area.
- c. Depressed Curb at Driveway - The top of the curb shall have a slope of 1/2" from back to front.
- d. Type "B" Inlet - Note the dimensions of stage 2 channel construction. The grate shall be a bicycle-type grate.
- e. Detail must be provided for the 12' x 12' inlet at the northern areas.

18. The applicant is obtain development approval from the Camden County Soil Conservation District.

19. The applicant is to obtain Site Plan approval or waiver from the Camden County Planning Board.

20. The applicant is to post the necessary cash escrow for engineering and legal review. Further, the applicant must post the necessary performance and maintenance sureties and inspection escrow at the appropriate times.

21. The applicant is to submit a certification from the Tax Collector that all taxes due have been paid to date.

22. Any consideration for approval or denial of the Site Plan is further conditional upon the comments of the Police Department and Fire Marshal.

23. The applicant is to obtain all necessary approvals and permits from all applicable agencies.

24. The applicant is to comply with all applicable Federal, State, County and Township laws, rules and regulations.

Upon motion duly seconded to approve the foregoing application, a roll-call vote was conducted on February 7, 1995. The motion was approved unanimously.

ATTEST:

BERLIN TOWNSHIP PLANNING BOARD

Diane Dayton
DIANE DAYTON, Secretary

Arthur L. Oppmann
ARTHUR L. OPPMANN, Chairman

CERTIFICATION

I HEREBY CERTIFY that the foregoing is a true and correct copy of a Resolution adopted by the Berlin Township Planning Board at a meeting held on the 21st day of February, 1995.

Diane Dayton
DIANE DAYTON, Secretary

INSPECTIONS: TUESDAY/THURS
CALL DAY BEFORE BY 3:00PM
856-767-1854 EXT. 230

IDENTIFICATION

UCC NEW JERSEY
CERTIFICATE

Date Issued 11/22/13
Control #
Permit # 2013-227

Block 1203 Lot 52 Qual
Work Site Location 436 COMMERCE LANE
UNIT D
Owner in Fee/Occupant BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08055-
Telephone (856) 767-4870
Contractor P & B PARTITIONS
Address 444 COMMERCE LANE
WEST BERLIN, NJ 08091-
Telephone () - Fax () -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2429360

[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:

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

INT REHABING

[] 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 _____, _____.

Fee \$ 100
Paid [X] Check No. 7826
Collected by: KM

Construction Official

U.C.C. 1260 (rev. 3/96)



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 1203 Lot 52 Qualification Code _____
 Work Site Location 436 COMMERCE LANE UNIT D
WEST BERLIN, N.J. 08091
 Owner in Fee: BIGLIN RONALD H JR
 Tel. (856) 767-4870 e-mail RBIGLINEPANDPACITIVUS.COM
 Address 436 COMMERCE LA #A WEST BERLIN, N.J. 08091
 Contractor: BIGLIN RONALD H JR municipality Tel. (856) 767-4870 zip code
 Address 436 COMMERCE LANE #A e-mail RBIGLINEPANDPACITIVUS.COM
WEST BERLIN, NJ 08091
 Contractor License No. or Builder Registration No. _____ Exp. Date _____
 Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
 Federal Emp. ID No. 000409360 FAX: (856) 767-4875

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Type:	Failure	Failure	Approval	Dates (Month/Day)	Initial
☐ No Plans Required				Footings					
☐ All				Footings Bonding					
☐ Footings/Foundations				Foundation					
☐ Structural/Framework				Slab					
☐ Exterior				Frame					
☐ Interior				Truss Sys./Bracing					
Joint Plan Review Required:				Barrier-Free					
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator				Insulation					
SUBCODE APPROVAL for PERMIT				Finishes -Base Layer					
Date: _____				Finishes -Final					
Approved by: _____				Energy					
SUBCODE APPROVAL for CERTIFICATE				Mechanical					
☒ CO ☐ CCO ☐ CA				TCO					
Date: _____				Other					
Approved by: _____				Final					
				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. \$ 5,000

2. Rehabilitation \$ 3,000

3. Total (1+2) \$ 8,000

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

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

INT. Rehab

* No Plumbing Work

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)

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

Date Received _____
 Control # _____
 Date Issued _____
 Permit # _____

2013-227



FIRE PROTECTION 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 1203 Lot 32 Qualification Code _____

Work Site Location 436 Commerce Lane #1

Owner In Fee: Ronald H. Biehl Jr.

Tel. (856) 747-4870 e-mail rbiehl@paiddpermits.com

Address 436 Commerce Lane West Belvidere, NJ 08019

Contractor: SHANNON FIRE PROTECTION Tel. (856) 227-6530

Address 1135 HARTVILLE RD - Bldg M e-mail shannonfireprotection@gmail.com

DEPT 600 N.J. 08016 POL 326

Fire Protection Equipment, NJ Div of Fire Safety Permit No. 5396

Fire Protection Equipment, NJ Div of Fire Safety Permit No. 5396

Fire Alarm Contractor No. 5396 Exp. Date 04-2015

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 691276

Federal Emp. ID No. 202495903 FAX: (856) 227-6530

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____ Fuel Storage Tank: _____

Constr. Class: Present _____ Proposed _____ Fuel Type: [] Flammable or [] Combustible

Heating System: [] New or [] Modification to Existing Fire Alarm System: [] New or [] Existing

Fuel Type: [] Gas [] Oil [] Electric [] Solar Location of Panel: [] New or [] Existing

Location: [] Other _____ Location of Main Control Valve: Scotch-A

Total Cost of Fire Protection Work \$ 5,940.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW _____ INSPECTIONS _____

[] No Plans Required _____ Type: _____ Failure _____ Approval _____ Initial _____

[] Partial - Underslab Utilities Approved _____ Alarm System _____

Date: _____ Approved by: _____ Suppression Sys. _____

[] Fire Protection Plans Approved _____ Standpipe _____

Date: _____ Approved by: _____ Fire Pump _____

Joint Plan Review Required: _____ Pre-Eng. System _____

[] Bldg. [] Elec. [] Plumb. [] Elev. _____ Mechanical _____

SUBCODE APPROVAL for PERMITS _____ Smoke Control _____

Date: _____ TCO _____

Approved by: _____ Flam/Combust Tanks _____

SUBCODE APPROVAL for CERTIFICATE _____ Fireplace Venting _____

Date: _____ Final _____

Approved by: _____ Other _____

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 sign/Contractor sign and seal here: Ronald H. Biehl Jr.

Print name here: Ronald H. Biehl Jr.

D. TECHNICAL SITE DATA [X] Certified Contractor [] Exempt Applicant

DESCRIPTION OF WORK: new sprinkler heads to

Water Supply Source new ceiling height

Method of Alarm/Suppression System Supervision _____

Flammable/Combustible Tanks _____

Alarm Systems [] System _____

[] 110V Interconnected _____

[] CO Detectors/110V _____

Alarm Devices (i.e., smoke, heat, pull, water/fow) _____

Supervisory Devices (i.e., tamper, low/high air) _____

Signaling Devices (i.e., horns/strobes, bells) _____

Other Devices _____

TOTAL _____

Suppression Systems _____

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) 33

Standpipes _____

Pre-engineered Systems _____

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

FM200 Suppression _____

Other _____

Other Systems _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Fuel-Fired Appliances [] Gas [] Oil [] Solid _____

Fireplace Venting/Metal Chimney _____

Other _____

To reprint call (609) 390-1400

Marketing - Print - Mail

Date Received _____

Control # _____

Date Issued _____

Permit # _____

2013-227

NUMBER \$ (Office Use Only)



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 1A03 Lot 52 Qualification Code UNIT D

Work Site Location 436 Commerce Lane

WEST BERLIN, N.J. 08091

Owner in Fee: BIGLIN, RONALD H. JR.

Tel. (856) 767-4870 e-mail ABIGUNEPA@PARTIONS.COM

Address 436 Commerce Ln #4 WEST BERLIN, N.J. 08091

Contractor: 5th Electric Tel. (856) 753-1311

Address 230 Bayser Ave W. Berlin NJ e-mail

Contractor License No. 14483 Exp. Date 9/15

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

Federal Emp. ID No. 136748091 FAX: ()

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co. PS&G

Est. Cost of Elec. Work \$ 5000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[] Partial Under-slab Utilities Approved

Date 12/17/13 Approved by: [Signature]

[] Electric Plans Approved

Date 12/17/13 Approved by: [Signature]

Joint Plan Review Required:

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

SUBCODE APPROVAL for PERMIT

Date: 12/17/13

Approved by: [Signature]

SUBCODE APPROVAL for CERTIFICATE

[] CO [] CQ [] CA

Date: 11/14/13

Approved by: [Signature]

INSPECTIONS

Dates (Month/Day)

Type: Rough over Failure 12/17/13 Approval Initial ABG

Barrier-Free 12/17/13

Trench 12/17/13

Temp. Serv. 12/17/13

Const. Serv. 12/17/13

TCO 12/17/13

Other ABG

Service 12/17/13

Final 12/17/13

Barrier-Free 12/17/13

Temp. Cut-in-Card Date Issued 12/17/13

Final Cut-in-Card Date Issued 12/17/13

Annual Pool Inspection 12/17/13

Date of Grounding and Bonding 12/17/13

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: Harry Stevens

[] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

WIRE OFFICES

QTY. SIZE ITEMS

32 Lighting Fixtures

42 Receptacles

12 Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

91

TOTAL NUMBERS

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/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

KW Baseboard Heat

HP Motors 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$ 600

Date Received 2013-227
Control #
Date Issued
Permit #

Administrative Surcharge \$ 01-
Minimum Fee \$
State Permit Surcharge Fee \$
TOTAL FEE \$

Department of Health &
Human Services



Carmen G. Rodriguez
Freeholder Liaison
Patrick Shuttleworth
Director
Ralph Green
Division Director

Making It Better, Together

www.camdencounty.com

May 20, 2009

Berlin Twp. Dept. of Public Works
Edgewood Avenue
Berlin Twp. NJ 08091
Attn: Michael McGee, Supt. of Public Works

Re: 09-0505-0900C
Township Records (Berlin)

Dear Mr. McGee,

As per your request on 5/5/09, fungal sample results were taken from the Township Records stored currently in the warehouse on Edgewood Avenue. Since there are various types of boxes and bags of records from different time frames, we took swab, tape, viable and non-viable samples from 14 different bags or boxes of records. This amount of samples gives an overall representation of all the records.

An Anderson One-Stage sampler was used to take the viable fungal samples. An SKC Quick Take 30 series sampler was used to take non-viable air-o-cell samples. Both machines were calibrated one day prior to sampling. Fresh swabs and tape slides were obtained from laboratory one day prior to sampling.

We also took viable and non-viable samples from the warehouse in which the records are currently being stored and the trailer where they were originally stored. The samples in the warehouse and trailer were taken to help determine if any remediation was needed to be done in those areas.

The conditions during the sampling event, was rainy and humid. Relative humidity inside the trailer and warehouse was close to relative humidity outside (79%R.H.).

All samples were immediately delivered to EMLab P&K for growth, enumeration and differentiation. The results are attached to the file for your review.

A marker was used to label the bags and/or boxes where samples were taken.

The following is a list of sample types and labels which were taken:

VIALS / CULTURABLE

1A - Outside / Comparison sample
2A - Inside Warehouse
3A - Inside Bag 3A
4A - Inside Bag 4A
5A - inside Trailer

DIVISION OF ENVIRONMENT HEALTH - C.E.H.A.

Michael J. DiPiero, Building, 512 Lakeland Road, Suite 301, Blackwood, NJ 08012
Phone#: (856) 374-6049 Fax (856) 374-6212
Email: cehacdh@camdencounty.com

NON-VIABLE / AIR-O-CELL

6A - Outside
7A - Inside Warehouse
8A - Inside Bag 8A
9A - Inside Bag 9A
10A - Inside Trailer

SWAB SAMPLES / TAPE

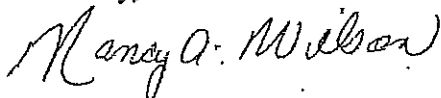
BTS-1	-	swab	BTS-6	-	swab
BTS-2	-	swab	BTS-7	-	tape
BTS-3	-	swab	BTS-8	-	tape
BTS-4	-	swab	BTS-9	-	tape
BTS-5	-	swab	BTS-10	-	tape

The combination of all results shows significant evidence of fungal growth on the records. Nine out of ten tape/swab samples showed evidence of fungi. Some of the samples had *Penicillium*/*Aspergillus* spores on them which are capable of producing mycotoxins. *Basidiomycetes* and *Cladosporium* are ubiquitous in the outside air but will not be found on all surfaces unless the moisture content/humidity conditions are higher than 50% and food such as cellulose containing paper are available. The records were stored in a trailer with no environmental controls. Therefore as substantiated by all sample results the majority of the records have evidence of fungal growth. Therefore, due to the presence of mycotoxin producing and allergenic molds, it is strongly recommended that all records be freeze dried to remove all spores and mycotoxins. No one should open any bags or boxes or handle the records without personal protective equipment until the freeze drying is done. Individual's sensitive to mold, or mycotoxins or immo-compromised individuals can be affected negatively with any exposure. It is also important to note that the trailer and warehouse should be vacuumed with a HEPA vacuum to remove all spores. When the records are being removed from the warehouse, more spores will be spread through the air while moving. Therefore, it is recommended that vacuuming be done after the removal and that PPE be worn during any entry to the facilities prior to HEPA vacuuming.

Note in the lab report that spores were found in significant levels inside the record bags tested. As long as the records have an Aw of 0.65 and the RH in the storage space is above 50%, the spore levels will continue to multiply due to their presence and the constant food source.

If you have any questions, please call. It has been a pleasure working with you to insure good indoor air quality and the proper handling of the records.

Sincerely,



Nancy A. Wilson
Senior Environmental Health Specialist
(Hazardous Substances)

NAW/vp
Attachments

cc: File

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT.227

Date Issued 10/26/05
Control #
Permit # 2005-94

UCC NEW JERSEY CERTIFICATE

IDENTIFICATION

Block 1203 Lot 52 Qual
Work Site Location 436 COMMERCE LANE
WEST BERLIN
Owner in Fee/Occupant BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08055-
Telephone (856) 767-4870
Contractor P & B PARTITIONS
Address 444 COMMERCE LANE
WEST BERLIN, NJ 08091-
Telephone () - () - ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2429360

[] 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.

[X] 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:

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

TFO

[] 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 .

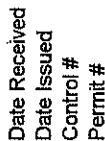
Fee \$ 28
Paid [X] Check No. 24485
Collected by: KM

Construction Official

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



Block 1003 Lot 52
Work Site Location 436 COMMERCE LANE
UNIT 5
Owner in Fee ROBUND BIGLIN JR
Address 58 REMBERTON ROAD
SOUTHAMPTON, NJ 08055
Tele. (856) 767 4870
Contractor P4 B PARTITIONS
Address 436 COMMERCE LANE
WEST BERLIN, NJ 08091
Tele. (856) 767 4870 Fax (856) 767 4825
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 22-2429360



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

Joseph J. Hendler
Signature/

DESCRIPTION OF WORK

TEST FIT FOOT

PLAN REVIEW		Date	Initial	INSPECTIONS		Failure	Approval	Initial
☐	No Plans Required			Type:				
☐	All			Footing			8/18	
☐	Footing			Foundation				
☐	Foundation			Slab			8/18	
☐	Frame			Frame				
☐	Other			Barrier-Free			8/23	
Joint Plan Review Required:				Insulation				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator				Finishes				
SUBCODE APPROVAL:				Energy				
☐	CO			Mechanical				
☐	CCO			TCO				
Date: 10/4/02				Other				
Approved by: [Signature]				Final				
				Barrier-Free				

Use Group	Present	Proposed	<u>B</u>	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	<u>2C</u>	
No. of Stories				
Height of Structure				Ft.
				1. New Bldg. \$
				2. Alteration \$ <u>12000</u>
				3. Total (1 + 2) \$

Area — Largest Floor _____ Sq. Ft. _____
 New Bldg. Area/All Floors _____ Sq. Ft. _____
 Volume of New Structure _____ Cu. Ft. _____
 Total Land Area Disturbed _____ Sq. Ft. _____

U.C.C. F110
(rev. 3/96)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

TYPE OF WORK:

☐ New Building
☐ Addition
☐ Alteration
☐ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6')
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Other TENANT FITOUT
☐ Demolition

FEE (Office Use Only)

Administrative Surcharge
Minimum Fee
DCA Training Fee
TOTAL FEE



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

Block 1203 Lot 529.53
 Work Site Location 436 COMPATENCE LANE
WEST BERNH N.Y.
 Owner in Fee RONALD H BURLIN JR
 Address WEST 444 COMPATENCE LANE
WEST BERNH N.Y.
 Tele. (856) 767-4870
 Contractor CREATION PLING & H49 INC
 Address P.O. BOX 675
DOORHES N.Y. 08043
 Tele. (856) 719-9444 Fax (856) 719-9464
 Lic. No. 6755
 Federal Emp. No. 32-3095997

B. PLUMBING CHARACTERISTICS

Use Group	Present	Proposed
Building Sewer Size	4" _____	Public Sewer _____
Water Service Size	_____	Public Water _____
Est. Cost of Plumbing Work	\$ 3000 _____	Private Well _____

JOB SUMMARY (Office Use Only)

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Failure	Approval
☐ No Plans Required	Slab				Initial
Joint Plan Review Required:		Rough			
☐ Building	☐ Electric	Water			
☐ Fire	☐ Elevator	Sewer			
☒ Plumbing Plans Approved		Fixtures			
Date: 7-5-05		Gas Equipment			
Approved by: <i>K. S. [Signature]</i>		Gas Piping			
SUBCODE APPROVAL		Solar			
☐ CO	☐ CCO	TCO			
☐ CA					
Date: 10-25-05					
Approved by: <i>K. S. [Signature]</i>					

C. CERTIFICATION IN LIEU OF BATH

I hereby certify that I am the (agent or) owner of record and am authorized to make this application and perform the work listed on this application.

Signature — Contractor's Seal

☒ Licensed Plumbing Contractor ☐ Exempt Applicant



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA (List of all fixtures.)

NO. FIXTURE/EQUIPMENT

	Quantity	Unit	Price	Total
Water Closet	1			
Urinal/Bidet				
Bath Tub	1			
Lavatory				
Shower				
Floor Drain				
Sink	1			
Dishwasher				
Drinking Fountain				
Washing Machine				
Hose Bibb				
Water Heater	1			
Fuel Oil Piping				
Gas Piping				
Steam Boiler				
Hot Water Boiler				
Sewer Pump				
Interceptor/Separator				
Backflow Preventer	1			
Greasetrap				
Sewer Connection	1			
Water Service Connection	1			
Stacks				
Other	3 ^{1/2}	Unit		
Other	1	Box	Receptacle	
Other				

Administrative Surcharge	\$
Minimum Fee	\$
DCA Training Fee	\$
TOTAL FEE	\$

U.C.C. F130
(rev. 3/96)

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



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 1203 Lot 52
Work Site Location 436 Commerce Lane Unit 5
Owner in Fee/Occupant Ronald Biglin JR
Address 58 Pemberton Rd
Sarthampton
Tele. (856) 767-4870
Contractor Raynor Electric
Address 2 Hidden Acres Dr
Abernacle
Tele. (268-8489) Fax ()
Lic. No. 12725
Federal Emp. No. 22-3511026

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
☐ Pole/Pad # ☐ Temporary ☐ Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work \$ 2500

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required			Type: <u>NO</u>	Failure <u>8/18/05</u>
Joint Plan Review Required:			<u>Plans 8/18/05</u>	Approval <u>8/18/05</u>
☐ Building ☐ Plumbing			Temp. Serv. <u> </u>	Initial <u> </u>
☒ Fire ☐ Elevator			Constr. Serv. <u> </u>	
☐ Elec Plans Approved			TCO <u> </u>	
Date: <u>8/19/05</u>			Other <u>APR 11/05</u>	
Approved by: <u> </u>			Service <u> </u>	
			Final <u> </u>	
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued <u> </u>	
☒ CO ☐ CPO ☐ CA			Final Cut-in-Card Date Issued <u> </u>	
Date: <u>8/25/05</u>				
Approved by: <u> </u>				

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's Signature/Contractor's Seal and Signature
Raynor Electric

☒ Licensed Electrical Contractor ☐ Exempt Applicant



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA

QTY	SIZE	ITEMS
<u>24</u>	<u>1/2"</u>	Lighting Fixtures
<u>18</u>	<u>1/2"</u>	Receptacles
<u>8</u>	<u>1/2"</u>	Switches
<u> </u>	<u> </u>	Detectors
<u> </u>	<u> </u>	Light Poles
<u>5</u>	<u> </u>	Motors—Fract. HP
<u> </u>	<u> </u>	Emergency & Exit Lights
<u> </u>	<u> </u>	Communications Points
<u> </u>	<u> </u>	Alarm Devices/F.A.C. Panel
TOTAL NUMBERS		
<u>53</u>	<u> </u>	Pool Permit/with UW Lights
<u> </u>	<u> </u>	Storable Pool/Spa/Hot Tub
<u> </u>	<u> </u>	KW Elec. Range/Receptacle
<u> </u>	<u> </u>	KW Oven/Surface Unit
<u> </u>	<u> </u>	KW Elec. Water Heater
<u> </u>	<u> </u>	KW Elec. Dryer/Receptacle
<u> </u>	<u> </u>	KW Dishwasher
<u> </u>	<u> </u>	HP Garbage Disposal
<u> </u>	<u> </u>	KW Central A/C Unit
<u> </u>	<u> </u>	HP/KW Space Heater/Air Handler
<u> </u>	<u> </u>	KW Baseboard Heat
<u> </u>	<u> </u>	HP Motors 1/+ HP
<u> </u>	<u> </u>	KW Transformer/Generator
<u> </u>	<u> </u>	AMP Service
<u> </u>	<u> </u>	AMP Subpanels
<u> </u>	<u> </u>	AMP Motor Control Center
<u> </u>	<u> </u>	KW Elec. Sign/Outline Light

Administrative Surcharge \$ 42
Minimum Fee \$ 42
DCA Training Fee \$ 3
TOTAL FEE \$ 45

2005-94+A

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT.227

Date Issued 09/29/05
Control #
Permit # 2005-197

UCC NEW JERSEY CERTIFICATE

IDENTIFICATION

Block 1203 Lot 52 Qual
Work Site Location 436 COMMERCE LANE
UNIT B (5)
Owner in Fee/Occupant BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08055-
Telephone (856) 767-4870
Contractor P & B PARTITIONS
Address 436 COMMERCE LANE
WEST BERLIN, NJ 08091-
Telephone (856) 767-4870 Fax () -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. -

☐ 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:

Home Warranty No.
☐ State ☐ Private
Use Group B-
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

SPRINKLER HEADS

☐ 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 , .

Fee \$ 0
Paid ☒ Check No. 24906
Collected by: KM



Construction Official
U.C.C. 7260 (rev. 3/96)

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT.227

Date Issued 09/15/05
Control #
Permit # 2005-197

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE
UNIT E (5)
Owner in Fee BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08055-
Telephone (856)767-4870
Contractor P & B PARTITIONS
Address 436 COMMERCE LANE
WEST BERLIN, NJ 08091-
Telephone (856)767-4870
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

I am hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SPRINKLER HEADS

PAYMENTS (Office Use Only)
Building 0
Electrical 0
Plumbing 0
Fire Protection 65
Elevator Devices 0
Other
DCA State Permit Fee 6
Cert. of Occupancy 0
Other

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

Michael R. G. [Signature]

Construction Official

09/15/05
Date

Total 71
Check No. 24906
Cash
Collected By *[Signature]*
9/16/05



FIRE PROTECTION 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 1203 Lot 52 Qualification Code _____
Work Site Location 436 COMMERCE LANE

Owner in Fee UNIT 5 (E)
Address 58 PEMBERTON RD

Contractor TEL (256) 7674870
Address 436 COMMERCE LN

Contractor TEL (256) 7674870
Address 436 COMMERCE LN

Contractor TEL (256) 7674870
Address 436 COMMERCE LN

Contractor TEL (256) 7674870
Address 436 COMMERCE LN

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Address 436 COMMERCE LN

Contractor TEL (256) 7674870
Address 436 COMMERCE LN

Contractor TEL (256) 7674870
Address 436 COMMERCE LN

Contractor TEL (256) 7674870
Address 436 COMMERCE LN

Date Received
Control #
Date Issued
Permit #

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Signature

[] Certified Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA DESCRIPTION OF WORK:

Water Supply Source _____
Method of Alarm/Suppression System Supervision _____
Flammable/Combustible Tanks _____
Alarm System _____
[] System
[] 110v Interconnected
[] CO Detectors/110v
Alarm Devices (i.e., smoke, heat, pulls, water/flow) _____
Supervisory Devices (i.e., tampers, low/high air) _____
Signaling Devices (i.e., 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 _____
Fired Appliances [] Gas or [] Oil _____
Fireplace Venting/Metal Chimney _____
Other _____

TECHNICAL SITE DATA
DESCRIPTION OF WORK:
TENANT FITOUT
SPRINKLER UPDATE

FEE (Office Use Only)

NUMBER

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

B. FIRE PROTECTION CHARACTERISTICS
Use Group: Present _____ Proposed _____ Fire Alarm System: [] New or [] Existing
Constr. Class: Present _____ Proposed _____ Location of Panel: _____
Heating System: [] New or [] Existing [] HVAC Fire Suppression/Standpipe System: _____
Type: [] Gas [] Oil [] Electric [] Solar [] New or [] Existing
[] Other _____ Location of Main Control Valve: _____
Location: _____
Fuel Storage Tank: _____
Fuel Type: [] Flammable or [] Combustible Capacity _____
Total Cost of Fire Protection Work \$ 4500

JOB SUMMARY (Office Use Only)		INSPECTIONS			Dates (Month/Day)		
PLAN REVIEW		Type:	Failure	Approval	Initial		
[] No Plans Required		Alarm System					
Joint Plan Review Required:		Suppression Sys.					
[] Building [] Plumbing		Standpipe					
[] Electric [] Elevator		Fire Pump					
[] Fire Plans Approved		Pre-Eng. System					
Date: <u>9-18-05</u>		Mechanical					
Approved by: _____		Smoke Control					
SUBCODE APPROVAL		TCO					
[] CO [] CCO [] CA		Flam/Combust Tanks					
Date: <u>9-28-05</u>		Fireplace Venting					
Approved by: _____		Final					
		Other					

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT.227

Update Issued 07/06/05
Control #
Permit # 2005-94+B
Permit Issued 06/02/05

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 1203 Lot 52 Qual _____

Work Site Location 436 COMMERCE LANE
WEST BERLIN UNIT 5

Owner in Fee BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08055-

Telephone (856)767-4870

Contractor CLEMENTON PLUMBING & HTG.
Address PO BOX 1639
LAUREL SPRINGS, NJ 08021-
Telephone () _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 22-3095997

Is hereby granted permission to perform the following work:

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

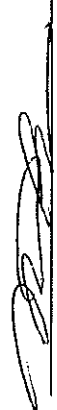
DESCRIPTION OF WORK:

TFO FOR UNIT 5 (PLUMBING)

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	255
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	7
Cert. of Occupancy	0
Other	
Total	262
Check No	24670
Cash	
Collected By	KM

Estimated Cost of Work \$ 5,000


Construction Official

07/06/05
Date

70
7.19.05



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 1203 Lot 52453
Work Site Location 436 COMMENCE LAKE
Owner in Fee WEST BEACH N.J.
Address 10240 1135 LIN DR
Address WEST 444 COMMENCE LAKE
Tele. (056) 167-4610
Contractor C. LEMMON P189 & H19 INC
Address P.O. BOX 673
Tele. (056) 117-9444 Fax (056) 117-9464
Lic. No. 6133
Federal Emp. No. 22-3095977

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size 4" Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Est. Cost of Plumbing Work \$ 5000

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	Joint Plan Review Required:	Type:	Failure	Approval	Initial
☐ Building	☐ Electric	Slab			
☐ Fire	☐ Elevator	Rough			
☒ Plumbing Plans Approved		Water			
Date: <u>7-5-85</u>		Sewer			
Approved by: <u>K. Smith</u>		Fixtures			
		Gas Equipment			
		Gas Piping			
		Solar			
		TCO			
SUBCODE APPROVAL					
☒ CO-2	☒ CGOS	☐ CA			
Date: _____					
Approved 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 and perform the work listed on this application.

Signature — Contractor's Seal
Mr. K. Smith

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

Date Received _____
Date Issued _____
Control # _____
Permit # _____

D. TECHNICAL SITE DATA (List of all fixtures.)

FIXTURE/EQUIPMENT

NO.	FIXTURE/EQUIPMENT
1	Water Closet
1	Urinal/Bidet
1	Bath Tub
1	Lavatory
1	Shower
1	Floor Drain
1	Sink
1	Dishwasher
1	Drinking Fountain
1	Washing Machine
1	Hose Bibb
1	Water Heater
1	Fuel Oil Piping
1	Gas Piping
1	Steam Boiler
1	Hot Water Boiler
1	Sewer Pump
1	Interceptor/Separator
1	Backflow Preventer
1	Greasetrap
1	Sewer Connection
1	Water Service Connection
1	Stacks
1	Other <u>3" VENT</u>
1	Other <u>PROP RECEPTOR</u>
1	Other _____

Administrative Surcharge

Minimum Fee

DCA Training Fee

TOTAL FEE

FEE (Office Use Only)

\$ 10

\$ 10

\$ 10

\$ 10

\$ 60

\$ 60

\$ 60

\$ 10

\$ 10

\$ 255

\$ 746.70

\$ 1.00

\$ 1.00

\$ 1.00

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Update Issued 06/15/05
Control #
Permit # 2005-94+A
Permit Issued 06/02/05

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 1203 Lot 52 Qual _____

Work Site Location 436 COMMERCE LANE
WEST BERLIN

Owner in Fee BIGLIN, RONALD JR

Address 58 PEMBERTON ROAD

Telephone (856) 767-4870

Contractor RAYNOR ELECTRIC

Address 2 HIDDEN ACCESS DRIVE

TABERNACLE, NJ 85626-8899

Telephone ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-3511026

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:

ELECTRIC UPDATE LIGHTING FIXTURES, RECEPTACLES, SWITCHES
EMERGENCY & EXIT LIGHTS

PAYMENTS (Office Use Only)

Building	0
Electrical	42
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	

DCA State Permit Fee	3
Cert. of Occupancy	0
Other	

Total	24590	45
-------	-------	----

Check No.	
-----------	--

Cash	
------	--

Collected By	KM
--------------	----

Estimated Cost of Work \$ 2,500

Construction Official

06/15/05
Date

pd
6-27-05



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 1203 Lot 52
Work Site Location 436 Commerce Lane
Unit 5
Owner in Fee/Occupant Ronan Biglin Jr
Address 58 Pemberton Rd
Southampton
Tele. (856) 767-4870
Contractor Raynor Electric
Address 2 Hidden Acres Dr
Tabernacle
Tele. () 768-8989 Fax ()
Lic. No. 12725
Federal Emp. No. 22-3511026

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 2500

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
[] No Plans Required			Type:	Failure Approval Initial
Joint Plan Review Required:			Rough	
[] Building [] Plumbing			Temp. Serv.	
[] Fire [] Elevator			Constr. Serv.	
[] Elec. Plans Approved			TCO	
Date: <u>6/9/85</u>			Other	
Approved by: _____			Service	
			Final	
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued	
[] CO [] TCO [] CA			Final Cut-in-Card Date Issued	
Date: _____				
Approved 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 and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Electrical Contractor [] Exempt Applicant

U.C.C. F120
(rev. 3/96)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA

QTY SIZE ITEMS
89 24 Lighting Fixtures
18 Receptacles
8 Switches
Detectors
Light Poles
Motors—Fract. HP
Emergency & Exit Lights
Communications Points
Alarm Devices/F.A.C. Panel

TOTAL NUMBERS
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/Receptacle
KW Dishwasher
HP Garbage Disposal
KW Central A/C Unit
HP/KW Space Heater/Air Handler
KW Baseboard Heat
HP Motors 1/4 HP
KW Transformer/Generator
AMP Service
AMP Subpanels
AMP Motor Control Center
KW Elec. Sign/Outline Light

\$ 42-

Administrative Surcharge
Minimum Fee
DCA Training Fee
TOTAL FEE

\$ 42-
\$ 42-
\$ 42-
\$ 42-

2005-94+A

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 05/19/05
Control #
Permit # 2005-94

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE
WEST BERLIN
Owner in Fee BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08055-
Telephone (856) 767-4870

Contractor P & B PARTITIONS
Address 444 COMMERCE LANE
WEST BERLIN, NJ 08091-
Telephone ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2429360

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

TFO

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 \$ 18,000

[Signature]
Construction Official

05/19/05
Date

PAYMENTS (Office Use Only)
Building 432
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
DCA State Permit Fee 24
Cert. of Occupancy 28
Other
Total 484
Check No. 24485
Cash
Collected By *[Signature]*



**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 1203 Lot 52
Work Site Location 436 COMMERCE LANE
UNIT 5
Owner in Fee RONALD BIGLIN JR
Address 58 REMBERTON ROAD
SOUTHAMPTON, NJ 08055
Tele. (856) 767 4870
Contractor P & B PARTITIONS
Address 436 COMMERCE LANE
WEST BERLIN, NJ 08091
Tele. (856) 767 4870 Fax (856) 767 4825
Lic. No. or Bldrs. Reg. No. 22-2424360
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	☐ All			Type:	Failure	Approval	Initial
☐	☐			Footings			
☐	☐			Foundation			
☐	☐			Slab			
☐	☐			Frame			
☐	☐			Barrier-Free			
Joint Plan Review Required:				Insulation			
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator				Finishes			
SUBCODE APPROVAL				Energy			
☐	☐	☐	☐	Mechanical			
☐	☐	☐	☐	TCO			
Date: _____				Other			
Approved by: _____				Final			
				Barrier-Free			

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed B
Constr. Class Present _____ Proposed 2C
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 Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ 18000
3. Total (1+2) \$ _____



Date Received _____
Date Issued _____
Control # _____
Permit # _____

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.

Signature Joseph J. Henderson

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TENANT FIT OUT

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration
- ☐ Roofing
- ☐ Siding
- ☐ Fence
- ☐ Sign
- ☐ Pool
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Other TENANT FIT OUT
- ☐ Demolition

FEE (Office Use Only)

Administrative Surcharge \$ _____
Minimum Fee \$ 432
DCA Training Fee \$ 24
TOTAL FEE \$ 456

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT.227

Date Issued 10/26/05
Control #
Permit # 2005-167

UCC NEW JERSEY CERTIFICATE

IDENTIFICATION

Block 1203 Lot 52 Qual
Work Site Location 436 COMMERCE LANE
UNIT 5 (E)
Owner in Fee/Occupant BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08055-
Telephone (856) 767-4870
Contractor RAYNOR ELECTRIC
Address 2 HIDDEN ACCESS DRIVE
TABERNACLE, NJ 85626-8899
Telephone () - Fax () -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3511026

[] 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.

[X] 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:

11 COMMUNICATION POINTS

[] 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 , .

Fee \$ 0
Paid [X] Check No. 24788
Collected by: KM

Construction Official

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





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 1003 Lot 5 Qualification Code Unit 5

Work Site Location 436 Commerce Lane

Owner in Fee Berlin
Address 436 Commerce Lane

Tel (856) 767-4870
Contractor Kaynor Electric
Address 2 Hidden Acres Dr
1A Barnack

Tel (268-8889) FAX ()
Contractor License No. 12725
Federal Emp. No. 22-351026

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
☐ Pole/Pad # ☐ Temporary ☐ Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work \$ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☒ No Plans Required			Type: Rough	Failure
Joint Plan Review Required:			Barrier-Free	Approval <u>8/18/06</u>
☐ Building ☐ Plumbing			Trench	
☐ Fire ☐ Elevator			Temp. Serv.	
☐ Elec. Plans Approved			Constr. Serv.	
Date: <u>8/18/06</u>			TCO	
Approved by: <u>[Signature]</u>			Other	
			Service Final	
			Barrier-Free	
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued	
☒ VCO ☐ CCO ☐ CA			Final Cut-in-Card Date Issued	
Date: <u>9/28/06</u>			Annual Pool Inspection	
Approved by: <u>[Signature]</u>			Date of Grounding and Bonding Certification	

U.C.C. F120 (rev. 07/03)

Date Received
Control # 205-167
Date Issued
Permit #

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's Signature/Contractor's Seal and Signature [Signature]

☐ Licensed Elec. Contractor ☐ Certif'd Landscape Irrigation Contr'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	\$ <u>36.00</u>
		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/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge \$ 36.00
Minimum Fee \$ 1
State Permit Surcharge Fee \$ 37
TOTAL FEE \$ 37

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT.227

Date Issued 10/06/05
Control #
Permit # 2005-166

UCC NEW JERSEY CERTIFICATE

IDENTIFICATION

Block 1203 Lot 52 Qual
Work Site Location 436 COMMERCE LANE
UNIT 5 (E)
Owner in Fee/Occupant BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08055-
Telephone (856) 767-4870
Contractor BJ KILPATRICK
Address 136 SOUTH WHP
BERLIN, NJ 08009-
Telephone () - Fax () -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2280924

☐ 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:

Construction Official

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

Home Warranty No.
☐ State ☐ Private
Use Group B-
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

INSTALLATION OF A 4TON A/C UNIT WITH GAS HEAT

☐ 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 , .

Fee \$ 0
Paid ☒ Check No. 24788
Collected by: KM



**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 1203 Lot 52
Work Site Location 436 Commerce Lane Unit F
Owner in Fee W. Bealwood, Jr.
Address 58 Hamilton Blvd
Telephone (856) 768-4870 08055
Contractor B.G. Ryan Inc.
Address 136 S. White Horse Pike
Telephone (856) 768-4747 Fax (856) 768-5782
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 22-2280924

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
	Date	Initial	Failure	Approval	Initial
☐ No Plans Required					
☐ All					
☐ Footing					
☐ Foundation					
☐ Frame					
☐ Other					
Joint Plan Review Required:					
☐ Elec.	☐ Plumb.	☐ Fire	☐ Elevator		
SUBCODE APPROVAL:					
☐ CO	☐ CCO	☐ CA			
Date:	<u>10/4/05</u>				
Approved by:	<u>[Signature]</u>				
Barrier-Free					

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	1. New Bldg. \$
No. of Stories			2. Alteration \$
Height of Structure			3. Total (1+2) \$ <u>10,000.00</u>
Area — Largest Floor			
New Bldg. Area/All Floors			
Volume of New Structure			
Total Land Area Disturbed			



Date Received
Date Issued
Control #
Permit #

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.

Signature [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Installation of a 4 ton A.C. unit with gas heat

TYPE OF WORK:

- ☐ New Building
☐ Addition
☐ Alteration
☐ Roofing
☐ Siding
☐ Fence
☐ Sign
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☒ Other 4 ton A.C. Unit
☐ Demolition

FEE (Office Use Only)

Administrative Surcharge	\$
Minimum Fee	\$ <u>640</u>
DCA Training Fee	\$ <u>14</u>
TOTAL FEE	\$ <u>654</u>



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 1303 Lot 52 Qualification Code _____
Work Site Location 436 Commerce Lane

Owner in Fee Ronald Bigline
Address 436 Commerce Lane

Tel (856) 2768-4747
Contractor Ryanor Electric
Address 2 Haddon Avenue Dr
TA Bernacle

Tel () 268-8889 FAX () _____
Contractor License No. 12725
Federal Emp. No. 02-351026

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 1,000

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	INSPECTIONS
☒ No Plans Required	Type: Rough _____ Failure _____ Dates (Month/Day) Initial _____
Joint Plan Review Required:	Barrier-Free _____
☐ Building ☐ Plumbing	Trench _____
☐ Fire ☐ Elevator	Temp. Serv. _____
☐ Elec. Plans Approved	Constr. Serv. _____
Date: <u>8/1/05</u>	TCO _____
Approved by: _____	Other _____
	Service (Final) _____
	Barrier-Free _____
SUBCODE APPROVAL	Temp. Cut-in-Card Date Issued _____
☒ CO ☐ CSO ☐ CA	Final Cut-in-Card Date Issued _____
Date: <u>10/1/05</u>	Annual Pool Inspection _____
Approved by: _____	Date of Grounding and Bonding Certification _____

Date Received
Control # 205-166
Date Issued
Permit # _____

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's Signature/Contractor's Seal and Signature

☐ Licensed Elec. Contractor ☐ Certifd Landscape Irrigation Contr'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
_____	_____	Lighting Fixtures	_____
_____	_____	Receptacles	_____
_____	_____	Switches	_____
_____	_____	Detectors	_____
_____	_____	Light Poles	_____
_____	_____	Motors—Fract. HP	_____
_____	_____	Emergency & Exit Lights	_____
_____	_____	Communications Points	_____
_____	_____	Alarm Devices/F.A.C. Panel	_____
_____	_____	TOTAL NUMBERS	_____
_____	_____	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/Receptacle	_____
_____	_____	KW Dishwasher	_____
_____	_____	HP Garbage Disposal	_____
_____	_____	KW Central A/C Unit	_____
_____	_____	HP/KW Space Heater/Air Handler	_____
_____	_____	KW Baseboard Heat	_____
_____	_____	HP Motors 1/4 HP	_____
_____	_____	KW Transformer/Generator	_____
_____	_____	AMP Service	_____
_____	_____	AMP Subpanels	_____
_____	_____	AMP Motor Control Center	_____
_____	_____	KW Elec. Sign/Outline Light	_____

Administrative Surcharge \$ 97.00
Minimum Fee \$ 1
State Permit Surcharge Fee \$ 93
TOTAL FEE \$ _____



**PLUMBING
SUBCODE
TECHNICAL S**

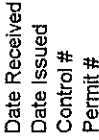
Block 1203 Lot 52
Work Site Location 436 Commerce Lane Unit E
Owner in Fee W. Berlin, M. J.
Address Ronald Berlin Inc
531 Pennington Road
Southampton, N. J.
Tele. (856) 768-4870
Contractor B. L. Kilpatrick Inc
Address 1361 S. White Horse Pike
Berlin, N. J.
Tele. (856) 768-4747 Fax (856) 768-5782
Lic. No. _____
Federal Emp. No. 22-2280924

Use Group	Present	Proposed
Building Sewer Size		Public Sewer
Water Service Size		Public Water
Est. Cost of Plumbing Work	\$	700.00
		Private Septic
		Private Well

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
[] No Plans Required		Type:	Failure	Approval	Initial
Joint Plan Review Required:					
[] Building	[] Electric	Slab			
[] Fire	[] Elevator	Rough			
[] Plumbing Plans Approved		Water			
		Sewer			
		Fixtures			
		Gas Equipment		9-25-05	JS
		Gas Piping			
		Solar			
		TCO			
SUBCODE APPROVAL					
[] CO	[] CCO	[] CA			
Date: 8-11-05					
Approved by: [Signature]					
SUBCODE APPROVAL					
[] CO	[] CCO	[] CA			
Date: 9-25-05					
Approved by: [Signature]					

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.

☐ Licensed Plumbing Contractor	☐ Exempt Applicant
---	---



Date Received
Date Issued
Control #
Permit #

NO. FIXTURE/EQUIPMENT

Water Closet	
Urinal/Bidet	
Bath Tub	
Lavatory	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bibb	
Water Heater	
Fuel Oil Piping	✓
Gas Piping	
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Sewer Connection	
Water Service Connection	
Stacks	1
Other	
Other	
Other	1

Administrative Surcharge	
Minimum Fee	
DCA Training Fee	
TOTAL FEE	

[illegible]

2 Canary # Office Copy
4 Gold # Applicant Copy

CAMDEN COUNTY PLANNING BOARD

CHARLES J. DePALMA PUBLIC WORKS COMPLEX • 2311 EGG HARBOR ROAD • LINDENWOLD, NJ 08021

Phone: (856) 566-2940 FAX: (856) 566-2988

BOARD MEMBERS

BARRY MALESICH
Chairperson

CAROLE MILLER
Vice Chairperson

THOMAS QUACKENBUSH
WILLIAM J. SNYDER
MARGARET YOUNG
GEORGE JONES

ALTERNATES
GEORGE STRACHAN



JEFFREY L. NASH
Freeholder-Director

THOMAS J. GURICK
Freeholder Committee Chairperson

ANNETTE CASTIGLIONE-DEGAN
Freeholder Alternate

ROBERT E. KELLY
County Engineer

MICHAEL G. BRENNAN, ESQ.
Counsel

January 25, 2001

STAFF
J. DOUGLAS GRIFFITH, P.P., AICP
PLANNING DIRECTOR

THOMAS B. CHAMBERLIN
Supervising Planner

Berlin Twp. Planning Board
170 Bate Avenue
W. Berlin, NJ 08091

RE: Ronald Biglin, Jr.
PLAN: SP-6-4-00
PLATE(S): N/A
BLOCK(S): 1203
LOT(S): 52,53

Dear Sir:

On January 24, 2001 at the County Planning Board Meeting, approval was granted for the subject application.

Your attention is called to the attached copy of the County Engineer's report, which constitutes part of this approval and its contents should be well noted.

The Camden County Planning Board approval concerns itself primarily with a review of factors that have a direct impact upon County facilities. All other reviews and compliance procedures, which fall within the guidelines established under the Municipal Land Use Act, are the responsibility of the appropriate Local Board.

Thank you for this opportunity to be of assistance in your planning process.

Very truly yours,

A handwritten signature in black ink, appearing to read "Thomas B. Chamberlin", is written over a horizontal line.

Thomas B. Chamberlin
Supervising Planner
Land Development & Review

TCB/mp

cc: George Jones, Acting Chairman
Robert Kelly, County Engineer
Applicant, Applicant Engineer
Local Engineer
Steven Botcheos, Esq.

CAMDEN COUNTY PLANNING BOARD
COUNTY ENGINEER'S REVIEW
OF SUBDIVISIONS AND
SITE DEVELOPMENT PLANS

PLAN # SP-6-4-00

LOG # 210

BIGLIN

PROJECT NAME

BERLIN TWP.

MUNICIPALITY

TYPE OF PLAN

TAX MAP DATA

REVIEW STATUS

☒ SITE PLAN

PLATE: N/A

☒ APPROVED AS NOTED
SEE COMMENTS BELOW

☐ PRELIMINARY PLAN

BLOCK: 1203

☐ OTHER

LOT(s): 52, 53

NAME: RONALD BIGLIN, JR.

ADDRESS: 58 PEMPERTON ROAD

CITY: SOUTHAMPTON

STATE: NJ ZIP: 08088

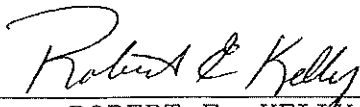
SITE ABUTS COUNTY HIGHWAY N/A

ROUTE #

COUNTY ENGINEER'S REVIEW COMMENTS (see review status above)

1. All sections of the subdivision and site plan review act are to be complied with and shall become a part of the approval.
2. All construction or reconstruction within the County right-of-way is to be at County standards.

1/25/01
DATE


ROBERT E. KELLY
COUNTY ENGINEER

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT.227

Date Issued 08/10/05
Control #
Permit # 2002-110

UCC NEW JERSEY CERTIFICATE

IDENTIFICATION

Block 1203 Lot 52 Qual
Work Site Location 436 COMMERCE LANE
UNIT 5
Owner in Fee/Occupant BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08091-
Telephone () -
Contractor RC JAMES
Address PO BOX 574
WATERFORD, NJ 08089-
Telephone (856)768-8072 Fax () -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

[] 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.

[X] 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:

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

Gas Piping.

[] 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 , .

Fee \$ 0
Paid [X] Check No. 5564
Collected by: KM



Construction Official

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

Unit 5 (E)



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 1203 Lot 52
 Work Site Location 436 COMMERCE
WEST BERLIN, NJ
 Owner in Fee RONALD H. BIGLIN JR
 Address 58 PEMBROKE ROAD
SOUTHAMPTON, NJ 08088
 Tele. (356) 767 4870
 Contractor R.C. JAMES
 Address P.O. BOX 574
WATERFORD NJ 08089
 Tele. (856) 768 8072 Fax ()
 Lic. No.
 Federal Emp. No.

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 \$

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
Type:		Failure	Approval	Failure	Initial
☐ No Plans Required					
☐ Building ☐ Electric					
☐ Fire ☐ Elevator					
☒ Plumbing Plans Approved					
Date: <u>6-4-02</u>					
Approved by: <u>[Signature]</u>					
SUBCODE APPROVAL					
☐ CO ☐ CCO ☐ CA					
Date: <u>8-9-05</u>					
Approved by: <u>[Signature]</u>					

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's Seal

☐ Licensed Plumbing Contractor ☒ Exempt Applicant

U.C.C. F130
(rev. 3/96)

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



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other <u>gas app</u>	
	Other	
	Other	
	Administrative Surcharge	
	Minimum Fee	
	DCA Training Fee	
	TOTAL FEE	

GAS PIPING (UNIT #5 OR E)
2 UNIT HEATERS
RUS FUTURE HVAC

2002-110



State of New Jersey
DEPARTMENT OF COMMUNITY AFFAIRS
101 SOUTH BROAD STREET
PO BOX 816
TRENTON NJ 08625-0816

JAMES E. MCGREEVY
Governor

SUSAN BASS LEVIN
Commissioner

TRANSMITTAL LETTER

Date: 9/23/2002

TO: CONSTRUCTION OFFICIAL
Berlin Twp.

FROM: Elevator Safety Unit
PO Box 816, Trenton, NJ 08625

PROJECT: *436 Commerce Lane*
Berlin
(P & B Partitions)

Construction Permit Number – 2001-132

ESU Project Review Control Number - ***ESU-PR-0406-586-01***

Inspection _____

Re-inspection X

The elevator device (s) located at the above address was (were) inspected
by this unit and we recommend the certificate (s) be issued:

Device # 01

If you have any questions, you may contact us at 609-984-7833.

Cc: Applicant
Owner
Attachment
0201M/16



PJB Partitions
Berlin NJ



ELEVATOR 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 1803

Lot 52

Work Site Location 436 Commerce Lane

Owner In Fee PJB Partitions

Address 443 Commerce Lane
Berlin, NJ

Telephone () 609

Contractor/Installer Schindler Elev.

Address 7161 Fifth Ave.
King of Prussia, PA 19406

Telephone (610) 992-9901 Fax (610) 992-0888

Federal Emp. No. 34-1270056

Maintenance/Service Contractor Schindler Elev.

Address 7161 Fifth Ave.
King of Prussia, PA

Telephone (610) 992-9901 Fax (610) 992-0888

B. ELEVATOR CHARACTERISTICS

Building Use Group S.E.C. Building Registration No. _____

Manufacturer S.E.C. Device I.D. _____

Machine Room Location Adjacent

No. of Stops 2 No. of Openings 2

Travel (ft.) 17'3" Speed (f.p.m.) 125

Type of Control Miconic HX Type of Operation Simplex

Passenger X Freight _____

Capacity (lbs.) 2500

Year of Installation _____ Year of Alteration _____

Estimated Cost of Elevator Work \$ 33,900

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

Joint Plan Review Required:

☒ Building ☐ Plumbing

☒ Fire ☐ Electric

☒ Elevator Plans Approved

Date: 11/1/01

Approved by: [Signature]

INSPECTIONS

Type: _____

Temporary _____

Final _____

Dates (Month/Day)

Failure _____

Failure _____

Approval _____

Initial _____

SUBCODE APPROVAL:

Date: 9/11/02

Approved by: [Signature]



Date Received 10/22/01
Date Issued _____
Control # ESU-PR-044586-01
Permit # 2001-132

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.

Signature [Signature] Date 10-16-01

D. TECHNICAL SITE DATA

NO. _____

ITEM _____

Traction or Winding Drum

1 to 10 Floors

Over 10 Floors

Hydraulic

Roped Hydraulic

Escalator/Moving Walk

Dumbwaiter

Stairway Chairlift, Inclined and

Vertical Wheelchair Lifts and Man Lifts

Oil Buffers

Counterweight Governor and Safeties

Auxiliary Power Generator

Alterations

Other PE

Other _____

Administrative Surcharge \$ _____
DCA Training Fee \$ _____
TOTAL FEE \$ 476.00

FEE (Office Use Only)

\$ _____

\$ 216.00

\$ _____

\$ _____

\$ _____

\$ 260.00

\$ _____

2476.00
#1050928
#105019201
ESU

F = Freight

U.C.C. F310-1
(rev. 3/85)

ELEVATOR INSPECTION



Name P & B PARTITIONS
 Address 436 COMMERCE LANE
BERLIN, N.J.

Date 7/26/02

TYPE OF INSPECTION/TEST

① = FA 4 = 3 Yr
 2 = 6 Mo 5 = 5 Yr
 3 = 1 Yr 6 = Reinspection

7 = Alteration
 8 = Passenger
 F = Freight

BUILDING REGISTRATION NO. _____

If FA, Permit No. 0406-586-01

Block/Lot #: 1203/52

DEVICE TYPE
 DEVICE NUMBER

TYPE OF INSPECTION/TEST

S = SATISFACTORY U = UNSATISFACTORY (Use NA When Not Applicable)

		S	U	S	U	S	U	S	U	S	U	S	U	S	U
A. MACHINE ROOM & MACHINE ROOM EQUIPMENT															
1.	Enclosure/Lighting/Vents	U													
2.	Machine/Breaker/Gears/Motor	NA													
3.	Hydro Power Motor Unit	S													
4.	Motor Generator Set/SCR Drive	NA													
5.	Controller/Selector	S													
6.	Governor(s)	NA													
7.	Relief & Check Valves	S													
8.	Required Disconnects	S													
9.	Oil/Hydro Fluid, Leaks, Level	S													
10.	Hydro Fluid Hoses or Pipe	S													
11.	Seals, Plates, Labels, Unit ID, Tags, Signs	S													
12.	Routine Maintenance	S													
13.															
B. ELEVATOR CAR AND COUNTERWEIGHT															
1.	Car Enclosure/Platform/Sling/Flooring	U													
2.	Guide Shoes/Rollers	S													
3.	Car Gate/Door/Accessories/Car Door Reclosing Device(s)	S													
4.	Car Gate or Door Operator	S													
5.	Car Lighting/Standard & Emergency	S													
6.	Rope Hitches/Platen Hitch	S													
7.	Top-of-Car Operating Station/Stop Switch	S													
8.	Car Operating Station/Stop Switch/Indicators	S													
9.	Emergency Signals & Communication	U													
10.	Emergency Exit/Top/Side	S													
11.	Safeties & Accessories	NA													
12.	Seals, Plates, Labels, Unit ID, Tags, Signs	S													
13.	Firefighter Service PHI & II	S													
14.	Counterweight/Car & Counterweight Sheaves	NA													
15.	Routine Maintenance	S													
16.															
C. HOISTWAY, HOISTWAY ENTRANCES AND PIT															
1.	Enclosure	U													
2.	Door, Closers & Accessories	S													
3.	Door Interlocks/Emergency Key/Access Keys	S													
4.	Guide Rails: Main & Counterweight	S													
5.	Switches and Cams	S													
6.	Pit/Stop Switch/Light/Ladder	S													
7.	Counterweight Guard	NA													
8.	Buffers: Spring or Oil	S													
9.	Ropes: Hoist, Governor, Counterweight, Compensating, Tail	NA													
10.	Traveling Cable and Wiring	S													
11.	Plunger, Cylinder and Gland	S													
12.	Governor Rope Tension Sheave & Assembly	NA													
13.	Compensating Sheave or Chain	NA													
14.	Clearances and Runby	S													
15.	Seals, Plates, Labels, Tags	S													
16.	Hall Station/Hall Position Indicator (If required): Hall Lantern	S													
17.	Routine Maintenance	S													
18.															

NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS
DIVISION OF CODES AND STANDARDS
BUREAU OF CODE SERVICES
ELEVATOR SAFETY UNIT

NOTICE OF VIOLATION AND ORDER TO TERMINATE

DATE: 7/26/02 INSPECTOR: W. Carey OWNER NAME: P & B Partitions.
REGISTRATION #: 0406-586-01 OWNER ADDRESS: 436 Commerce Lane
PROJECT LOCATION: Same Berlin, NJ.
NAME OF PERSON, CONTRACTOR/MAINTENANCE CO. PERFORMING TESTS: Schindler

Be advised that during today's inspection/test, the following irregularities/nonconformances/violations were noted, and you are required to ensure that they be corrected before _____.

DEVICE #: 01 (PI)

[] The elevator device may be operated during repairs/corrections.

[X] The elevator device is locked out until the repairs/corrections are satisfactorily completed, the device is reinspected, and applicable certificate is received. [ASME A17.1 1993; BOCA _____; NJAC 5:23 _____]

A1- S. 7 I Receptical in machine room

B9- a means of 24 hr 2 way communication

211.1

A1-B1-C1-Heat detectors shall work & be within 24" of sprinkles

B1- A sump hole cover is required.

B1- Finish floor in cab shall be installed

A1- Machine room door shall be self-locking

B1- Air gap on sump pipe going to waste retention

Should you wish to contest the validity of the above action in accordance with N.J.A.C. 5:23-2.35 et seq., you may do so by filing within 20 business days from the receipt of this notice a written request for a hearing before an Administrative Law Judge. Forward the request to:

Hearing Coordinator
Division of Codes and Standards
CN 802
Trenton, N.J. 08625-0802

A timely request for an administrative hearing shall stay these orders until a final determination on the merits is reached by the Commissioner.

If you have any questions concerning this matter, please call the Elevator Safety Unit at (609) 530-8833. Our mailing address is: Elevator Safety Unit, CN 816, Trenton, New Jersey 08625.

SIGNATURE OF SUBCODE OFFICIAL: Walter D. Carey Date: 7/26/02

White - Owner; Yellow - File; Pink - Reinspection
0370M

Page _____ of _____

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 09/19/2002
Control #
Permit # 2002-63

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1203 Lot 52 Qual
Work Site Location 436 COMMERCE LANE
Owner in Fee/Occupant BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08091-
Telephone ()
Contractor P & B PARTITIONS
Address 444 COMMERCE LANE
WEST BERLIN, NJ 08091-
Telephone () Fax ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2429360

Home Warranty No.
Type of Warranty Plan: [X] State [] Private
Use Group B
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

TENANT FIT OUT UNIT D

(Unit 41)

[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 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 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.

[] 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/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 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 ___.

CONSTRUCTION OFFICIAL

O.C.C. 1760 (Rev. 3/96)

Fee \$ 0
Paid [X] Check No. 20428
Collected by: KM

**BUILDING
SUBCODE
TECHNICAL S**

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

Block 1603 Lot 52
Work Site Location 436 COMMERCE LANE
WEST BERLIN, NJ 08091
Owner in Fee RONALD H. BIGLIN JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08088
Tele. (856) 767 4870
Contractor P & B PARTITIONS, INC
Address 444 COMMERCE LANE
WEST BERLIN, NJ 08091
Tele. (856) 767 4870 Fax (856) 767 4825
Lic. No. or Bldrs. Reg. No. 227A29360
Federal Emp. No. _____



Date Received
Date Issued
Control #
Permit #

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.

Joseph J. Henderson
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

3
1004
TENZ
(D) A # 120

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
☐	☐ No Plans Required			Type:	Failure	Approval	Initial
☐	☐ All			Footing			
☐	☐ Footing			Foundation			
☐	☐ Foundation			Slab			
☐	☐ Frame			Frame			
☐	☐ Other			Barrier-Free			
Joint Plan Review Required:				Insulation			
☐ Fire ☐ Elevator				Finishes			
☐ Elec. ☐ Plumb. ☐				Energy			
SUBCODE APPROVAL:				Mechanical			
☒ CO ☐ CCO ☐ CA				TCO			
Date: 7/11/2007				Other			
Approved by: [Signature]				Final			
				Barrier-Free			

B. BUILDING CHARACTERISTICS

Use Group	Present	B/S	Proposed	M/S
Constr. Class	Present	2C	Proposed	2C
No. of Stories		2		
Height of Structure		32		Ft.
Area — Largest Floor		35,600		Sq. Ft.
New Bldg. Area/All Floors		47,600		Sq. Ft.
Volume of New Structure				Cu. Ft.
Total Land Area Disturbed				Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$
2. Alteration \$
3. Total (1 + 2) \$

U.C.C. F110
(rev. 3/96)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 06/04/2002
Control #
Permit # 2002-116

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual _____

Work Site Location 436 COMMERCE LANE
UNIT 4

Owner in Fee BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08091-
Telephone () _____

Contractor EXCEL ELECTRIC INC
Address 40 SPRING LAKE DRIVE
CLEMENTON, NJ 08021-
Telephone () _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 22-3442968

I am hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

PAYMENTS (Office Use Only)

Building	0
Electrical	62
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	0
DCA Training Fee	2
Cert. of Occupancy	0
Other	0
Total	64
Check No.	5564
Cash	
Collected By	KM

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 \$ 2,500

[Signature]
Construction Official Date 06/04/2002

UNIT #4
UPDATE



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 1203 Lot 52
Work Site Location 436 COMMERCE LANE
WEST BERLIN NJ 08091
Owner in Fee/Occupant ROBERT H. BIGUN JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08088
Tele. (856) 767 4870
Contractor Excel Electric Inc
Address 40 Spring Lake Drive
Clementon NJ 08021
Tele. (856) 435-5364 Fax ()
Lic. No. 15775
Federal Emp. No. 22-3442968

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial INSPECTIONS Type: Rough Temp. Serv. Constr. Serv. TCO Other Service Final
☐ No Plans Required
Joint Plan Review Required:
☐ Building ☐ Plumbing ☐ Elevator
☒ Fire ☒ Elec. Plans Approved
Date: 6-27-99 Approved by: [Signature]
Subcode Approval
☒ CO ☐ CA
Date: 6-27-99 Approved by: [Signature]

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's Signature/Contractor's Seal and Signature
[Signature]

☒ Licensed Electrical Contractor ☐ Exempt Applicant

U.C.C. F120
(rev. 3/96)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



Date Received
Date Issued
Control #
Permit #

202-116

D. TECHNICAL SITE DATA

QTY	SIZE	ITEMS	FEE (Office Use Only)
41		Lighting Fixtures	
14		Receptacles	
9		Switches	
		Detectors	
		Light Poles	
3		Motors—Fract. HP	
7		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
74		TOTAL NUMBERS	42
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	10
1	2	KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
1	5/16	KW Central A/C Unit	10
1	5/16	HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/4 HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		Administrative Surcharge	\$ 62
		Minimum Fee	\$ 62
		DCA Training Fee	\$ 62
		TOTAL FEE	\$ 64

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 06/04/2000
Control #
Permit # 2002-115

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE

UNIT 4

Contractor RC JAMES

Address PO BOX 574

Owner in Fee BIGLIN, RONALD JR

Address 58 PEMBERTON ROAD

SOUTHAMPTON, NJ 08091-

Telephone ()

Telephone (856)768-8072

Lic. No. or Bldrs. Reg. No.

Federal Emp. No.

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:

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 \$ 2,800

Construction Official

06/04/2002

Date

U.C.C. F170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	85
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	2
Cert. of Occupancy	0
Total	87
Check No.	5564
Cash	
Collected By	KM

Unit 4(D)



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 1203 Lot 52 & 53
Work Site Location 440 Commercial Lane
Owner in Fee W. Ballin ny 08091
Address Ronald Biggio
Tele. ()
Contractor RC James Mechanical Co Inc.
Address PO Box 574 Waterford NJ 08089
Tele. (856) 7168-8072 Fax (856) 7167-8434
Lic. No. 223059087

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 \$ 2,800.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	Type:	Failure	Approval	Failure	Initial
☐ Building ☐ Electric	Slab				
☐ Fire ☐ Elevator	Rough				
☒ Plumbing Plans Approved	Water				
Date: <u>6-4-03</u>	Sewer				
Approved by: <u>K. Sniff</u>	Fixtures				
	Gas Equipment				
	Gas Piping				
	Solar				
	TCO				
	Final				

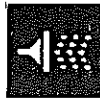
SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
Date: 9-26-04
Approved by: K. Sniff

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 — James Jones
Contractor's Seal

☐ Licensed Plumbing Contractor ☐ Exempt Applicant



Date Received
Date Issued
Control #
Permit #

2002-115

D. TECHNICAL SITE DATA (List of all fixtures.)

NO. FIXTURE/EQUIPMENT

Water Closet
Urinal/Bidet
Bath Tub
Lavatory
Shower
Floor Drain
Sink
Dishwasher
Drinking Fountain
Washing Machine
Hose Bibb
Water Heater
Fuel Oil Piping
Gas Piping
Steam Boiler
Hot Water Boiler
Sewer Pump
Interceptor/Separator
Backflow Preventer
Greasetrap
Sewer Connection
Water Service Connection
Stacks
Other
Other gas app
Other 2

63,000

2.00

Administrative Surcharge \$
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$

1-188-01



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 1203 Lot 52
Work Site Location 436 COMMERCIAL LANE
WEST BERLIN NJ 08091
Owner in Fee RONALD H. BIGLIN JR
Address 585 PENNINGTON ROAD
SOUTHAMPTON, NJ 08088
Tele. (856) 716-7487
Contractor MAJEL FIRE PROTECTION
Address 1707 IMPERIAL WAY
HADDON-ARLE NJ 08086
Tele. (856) 845-4800 Fax (856) 845-5944
Lic. No. _____
Federal Emp. No. 22-2396080

B. FIRE PROTECTION CHARACTERISTICS

Use Group 1 Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
Heating Systems ☐ New ☐ Existing ☐ HVAC
Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
☐ Other _____
Location: _____
Fire Alarm System
New ☐ Existing ☐
Location of Panel: _____
Fire Suppression/Standpipe System
New ☐ Existing ☐
Location of Main Control Valve: _____

Total Cost of Fire Protection Work \$ 4,200.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	☐ Joint Plan Review Required	Type:	Failure	Approval	Initial
☐ Building	☐ Plumbing	Alarm System			
☐ Electric	☐ Elevator	Suppression Sys.			
☐ Fire Plans Approved		Standpipe			
Date: <u>6/11/2014</u>		Fire Pump			
Approved by: <u>[Signature]</u>		Pre-Eng. System			
SUBCODE APPROVAL		Mechanical			
☐ CO	☐ CCO	Smoke Control			
Date: _____	☐ CA	TCO			
Approved by: _____		Final			
		Other			

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.

[Signature]
Signature



Date Received _____
Date Issued _____
Control # _____
Permit # _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

UNIT #4

Water Supply Source Existing
Method of Alarm/Suppression System Supervision Existing

Storage Tanks

Type: ☐ Flammable Liquid ☐ Combustible Liquid
☐ LPG ☐ LNG Capacity _____ Fuel _____

Alarm Systems ☐ 110v Interconnected ☐ System **NUMBER** _____

Alarm Devices (i.e., smoke, heat, pulls, water/flow) _____

Supervisory Devices (i.e., tampers, low/high air) _____

Signaling Devices (i.e., 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 _____

Halon Suppression _____

Other Relocate Existing **30**

Auto. SPK.

Kitchen Hood Exhaust System _____

Smoke Control System _____

Gas ☐ or Oil ☐ Fired Appliances _____

Other _____

FEE (Office Use Only)

Administrative Surcharge \$ 46
Minimum Fee \$ 3
DCA Training Fee \$ 49
TOTAL FEE \$ 98

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 07/12/2002
Control #
Permit # 2002-165

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE
UNIT 3

Owner in Fee BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08091-

Telephone ()

Contractor MAJEK FIRE PROTECTION
Address 1707 IMPERIAL WAY
THOROFARE, NJ 08086-

Telephone ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-2396080

Is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☒ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER

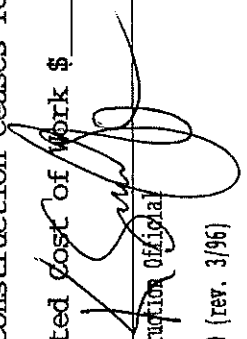
(Subchapter 8 only)

DESCRIPTION OF WORK:

24 SPRINKLER HEADS

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 \$ 5,192


Construction Official
Date 07/12/2002

U.C.C. PL70 (rev. 3/96)

PAYMENTS (Office Use Only)
Building 0
Electrical 0
Plumbing 0
Fire Protection 120
Elevator Devices 0
Other
DCA Training Fee 4
Cert. of Occupancy 0
Other
Total 124
Check No. 28612
Cash
Collected By KM

PD
8-14-02

UNIT # 302 "C"



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 1203 Lot 52
Work Site Location 436 COMMERCE UNIT #302 "C"
Owner in Fee WEST BERLIN NJ 08091
Address PO BOX H. BIGNIN JR
58 PEMBERTON ROAD
SOUTHAMPTON NJ 08088
Tele. (856) 767 4870
Contractor MAKIE FIRE PROTECTION
Address 1207 IMPERIAL WAY THORNTON NJ
08086
Tele. (856) 845-4800 Fax (856) 845-5194
Lic. No. _____
Federal Emp. No. 22-2396080

B. FIRE PROTECTION CHARACTERISTICS

Use Group	Present	Proposed
Const. Class	Present	Proposed
Heating Systems	☐ New ☐ Existing	☐ HVAC
Type:	☐ Gas ☐ Oil ☐ Electric ☐ Solar	
	☐ Other	

Location: _____
Total Cost of Fire Protection Work \$ 5,192.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)		
	Type:	Failure	Approval	Initial
☐ No Plans Required	Alarm System			
☐ Building ☐ Plumbing	Suppression Sys.			
☐ Electric ☐ Elevator	Standpipe			
☐ Fire Plans Approved	Fire Pump			
Date: <u>1/20/02</u>	Pre-Eng. System			
Approved by: <u>[Signature]</u>	Mechanical			
SUBCODE APPROVAL	Smoke Control			
☐ CO ☐ CCO ☐ CA	TCO			
Date: _____	Final			
Approved by: _____	Other			

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.

[Signature]
Signature



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source Existing
Method of Alarm/Suppression System Supervision Existing

Storage Tanks
Type: ☐ Flammable Liquid ☐ Combustible Liquid
☐ LPG ☐ LNG Capacity _____ Fuel _____
Alarm Systems ☐ 110v Interconnected ☐ System NUMBER _____
Alarm Devices (i.e., smoke, heat, pulls, water/flow) _____
Supervisory Devices (i.e., tampers, low/high air) _____
Signaling Devices (i.e., horn/strobes, bells) _____
Other Devices _____
TOTAL _____
Suppression Systems
Fire Pump _____ GPM Type _____
Dry Pipe/Alarm Valves _____
Pre-action Valves _____
Sprinkler Heads (Dry and Wet) 241
Standpipes _____
Pre-engineered Systems
Wet Chemical _____
Dry Chemical _____
CO₂ Suppression _____
Foam Suppression _____
Halon Suppression _____
Other _____
Kitchen Hood Exhaust System _____
Smoke Control System _____
Gas ☐ or Oil ☐ Fired Appliances _____
Other _____

Administrative Surcharge \$ 120
Minimum Fee \$ 4
DCA Training Fee \$ 124
TOTAL FEE \$ _____

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 07/12/20
Control #
Permit # 2002-166

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 1203 Lot 52 Qual _____

Work Site Location 436 COMMERCE LANE
UNIT 2

Owner in Fee BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08091-

Telephone ()

Contractor MAJEK FIRE PROTECTION
Address 1707 IMPERIAL WAY
THOROFARE, NJ 08086-

Telephone ()

Lic. No. or Bldrs. Reg. No. _____

Federal Emp. No. 22-2396080

I am 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:
32 SPRINKLER HEADS

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 \$ 6,116

Construction Official _____
Date 07/12/2002

U.C.C. F170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	120
Elevator Devices	0
Other	0
DCA Training Fee	5
Cert. of Occupancy	0
Other	0
Total	125
Check No.	28612
Cash	
Collected By	KM

PD
8.14.02

1203



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 1203 Lot 52
Work Site Location 4362 COMMERCE LANE UNIT 200
Owner in Fee WEST BERNHARDT, DANIEL
Address 58 PEMBERON ROAD
Telephone 856-845-5194
Contractor MADEIRA PROTECTION LLC
Address 1707 Imperial Way Thorofair NJ
Telephone 856-845-5194
Lic. No. 22-2396080
Federal Emp. No. 22-2396080

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
Heating Systems [] New [] Existing [] HVAC
Type: [] Gas [] Oil [] Electric [] Solar
[] Other _____
Location: _____
Fire Alarm System New [] Existing []
Location of Panel: _____
Fire Suppression/Standpipe System New [] Existing []
Location of Main Control Valve: _____

Total Cost of Fire Protection Work \$ 136,160.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
[] No Plans Required	Type: _____	Failure Approval Initial
Joint Plan Review Required:	Alarm System	
[] Building [] Plumbing	Suppression Sys.	
[] Electric [] Elevator	Standpipe	
[] Fire Plans Approved	Fire Pump	
Date: _____	Pre-Eng. System	
Approved by: _____	Mechanical	
SUBCODE APPROVAL	Smoke Control	
[] CO [] CCO [] CA	TCO	
Date: _____	Final	
Approved by: _____	Other	

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.

Signature Jack Wilkerson

UNIT #2000



Date Received
Date Issued
Control #
Permit #

2002-166

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source Existing
Method of Alarm/Suppression System Supervision Existing

Storage Tanks

Type: [] Flammable Liquid [] Combustible Liquid
[] LPG [] LNG Capacity _____ Fuel _____
Alarm Systems [] 110v Interconnected _____ NUMBER _____
[] System _____

Alarm Devices (i.e., smoke, heat, pulls, water/flow) _____

Supervisory Devices (i.e., tamper, low/high air) _____

Signaling Devices (i.e., 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 _____

Halon Suppression _____

Other _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Gas [] on/off [] Fired Appliances _____

Other _____

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

U.C.C. F140.
(rev. 3/96)

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 07/01/2002
Control #
Permit # 2002-155

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE
UNIT 2

Owner in Fee BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08091-

Telephone ()

Contractor RC JAMES
Address PO BOX 574
WATERFORD, NJ 08089-
Telephone (856)768-8072
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

I am hereby granted permission to perform the following work:

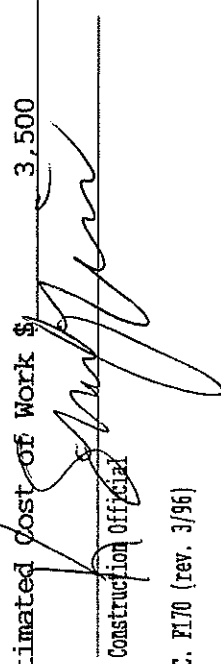
☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

NEW SERVICE TO SPLIT SYSTEM

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 \$ 3,500

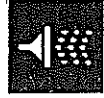
Construction Official 

07/01/2002
Date

U.C.C. PL70 (rev. 3/96)

PAYMENTS (Office Use Only)
Building 0
Electrical 0
Plumbing 75
Fire Protection 0
Elevator Devices 0
Other
DCA Training Fee 3
Cert. of Occupancy 0
Other
Total 78
Check No. 5589
Cash
Collected By RM

Gas Pipelines



Date Received
Date Issued
Control #
Permit #

Block 1203 Lot 52
Work Site Location 436 COMMERCE LANE
WEST BERLIN NJ 08091
Owner in Fee RONALD A. BIGLIN, JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08088
Tele. (856) 767 4870
Contractor RC JAMES
Address PO BOX 574
WATERFORD NJ 08089
Tele. (856) 768 8072 Fax ()
Lic. No. _____
Federal Emp. No. _____

Use Group	Present	Proposed
Building Sewer Size		Public Sewer
Water Service Size		Public Water
Est. Cost of Plumbing Work	\$	3500
		Private Septic
		Private Well

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
[] No Plans Required		Type:	Failure	Approval	Initial
Joint Plan Review Required:					
[] Building	[] Electric	Slab			
[] Fire	[] Elevator	Rough			
[] Plumbing Plans Approved		Water			
Date: 6-25-02		Sewer			
Approved by: K. S. [Signature]		Fixtures			
		Gas Equipment			
		Gas Piping			
		Solar			
		TCO			
SUBCODE APPROVAL					
[] CO	[] CCO				
[] CA					
Date: 9-26-02					
Approved by: K. S. [Signature]				9-26-02	K.S.

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.

Joseph J. Henderson
Signature — Contractor's Seal

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

2 Canary = Office Copy
4 Gold = Applicant Copy

NO.	FIXTURE/EQUIPMENT	PRICE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	
	Other	

Administrative Surcharge	\$
Minimum Fee	\$
DCA Training Fee	\$
TOTAL FEE	\$

Stacks	
Other	New Service TO
Other	3 1/2 T SPRIT SYSTEM
Other	- 3/4" -

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 06/04/2002
Control #
Permit # 2002-112

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE

UNIT 3

Contractor RC JAMES

Address PO BOX 574

Owner in Fee BIGLIN, RONALD JR

Address WATERFORD, NJ 08089-

Address 58 PEMBERTON ROAD

Telephone (856)768-8072

SOUTHAMPTON, NJ 08091-

Lic. No. or Bldrs. Reg. No.

Telephone ()

Federal Emp. No.

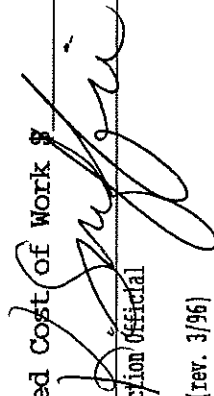
Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

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 \$ 2,800


Construction Official

06/04/2002
Date

U.C.C. F170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	95
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	2
Cert. of Occupancy	0
Other	
Total	97
Check No.	3564
Cash	
Collected By	Km

Unit 3(c)



**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 1203 Lot 52
Work Site Location 436 COMMERCE LANE
WEST BERLIN, NJ
Owner in Fee RONALD H. BIGNLIN JR
Address 53 PENBERTON ROAD
SOUTHAMPTON, NJ 08088
Tele. () 767 4870
Contractor RC JAMES
Address P.O. BOX 514
WATERFORD NJ 08084
Tele. (Ext.) 768 8012 Fax ()
Lic. No.
Federal Emp. No.

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 \$

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	Joint Plan Review Required:	Type:	Failure	Failure	Approval
☐ Building	☐ Electric	Slab			
☐ Fire	☐ Elevator	Rough			
☒ Plumbing Plans Approved		Water			
Date: <u>6-4-02</u>		Sewer			
Approved by: <u>[Signature]</u>		Fixtures			
		Gas Equipment			
		Gas Piping			
		Solar			
		TCO			
SUBCODE APPROVAL					
☐ CO	☐ CCO	☐ CA			
Date: <u>6-4-02</u>					
Approved by: <u>[Signature]</u>					

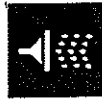
C. CERTIFICATION IN LIEU OF OATH

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 [Signature]

Contractor's Seal

☐ Licensed Plumbing Contractor ☒ Exempt Applicant



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA (List of all fixtures.)

NO. FUTURE/EQUIPMENT

Water Closet	
Urinal/Bidet	
Bath Tub	
Lavatory	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bibb	
Water Heater	
Fuel Oil Piping	
Gas Piping	<u>65.00</u>
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Sewer Connection	
Water Service Connection	
Stacks	
Other	<u>30.00</u>
Other	
Other	

Administrative Surcharge \$ 95
Minimum Fee \$ 2
DCA Training Fee \$ 97
TOTAL FEE \$

GAS PIPING (UNIT #3 OR C)
2 UNIT HEATERS
POS FUTURE HVAC

U.C.C. F130
(rev. 3/95)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 07/01/2000
Control #
Permit # 2002-154

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE

UNIT 3

Owner in Fee BIGLIN, RONALD JR

Address 58 PEMBERTON ROAD

SOUTHAMPTON, NJ 08091-

Telephone ()

Contractor RC JAMES

Address PO BOX 574

WATERFORD, NJ 08089-

Telephone (856)768-8072

Lic. No. or Bldrs. Reg. No.

Federal Emp. No.

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:

SERVICE TO NEW SPLIT SYSTEM

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	75
Fire Protection	0
Elevator Devices	0
Other	0
DCA Training Fee	3
Cert. of Occupancy	0
Total	78
Check No.	5589
Cash	
Collected By	AM

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 \$ 3,500

07/01/2002
Date

Construction Official

U.C.C. F170 (rev. 3/96)

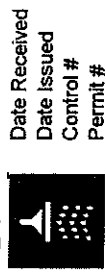
PD
7.2-02

Gas Piping



PLUMBING
SUBCODE
TECHNICAL SECTION

UNIT # 302 "C"



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

Block 1203 Lot 52
Work Site Location 436 Commerce
Owner in Fee WEST BERLIN NJ 08091
Address RONALD H. BIGLIN JR
58 PEMBERTON ROAD
SOUTH DUNELTON, NJ 08088
Tele. (856) 767 4870
Contractor RC JAMES
Address PO BOX 574
WATERFORD NJ 08089
Tele. (856) 768 8012 Fax ()
Lic. No. _____
Federal Emp. No. _____

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 \$ 3500

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	Joint Plan Review Required:	Type:	Failure	Approval	Initial
☐ Building	☐ Electric	Slab			
☐ Fire	☐ Elevator	Rough			
☐ Plumbing Plans Approved		Water			
Date: <u>6-25-02</u>		Sewer			
Approved by: <u>R. S. J.</u>		Fixtures			
SUBCODE APPROVAL		Gas Equipment			
☐ CO	☐ CCO	Gas Piping			
☐ CA		Solar			
Date: <u>9-24-02</u>		TCO			
Approved by: <u>R. S. J.</u>		Final			<u>9-24-02 R.S.J.</u>

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's Seal

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal/Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Water Heater
	Fuel Oil Piping
	Gas Piping
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
	Sewer Connection
	Water Service Connection
	Stacks
	Other
	Other
	Other

Administrative Surcharge \$
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 09/26/2002
Control #
Permit # 2001-132

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1293 Lot 52 Qual
Work Site Location 436 COMMERCE LANE
WEST BERLIN
Owner in Fee/Occupant BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08091-
Telephone ()
Contractor P & B PARTITIONS
Address 444 COMMERCE LANE
WEST BERLIN, NJ 08091-
Telephone () Fax ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2429360

Home Warranty No.
Type of Warranty Plan: [] State [] Private
Use Group 5-1
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

NEW BUILDING BLOCK WALLS STEEL ROOF

Unit 1 & shell

[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 R3AC 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 _____.

Fee \$ 174
Paid [X] Check No. 5702
Collected by: RM

CONSTRUCTION OFFICIAL

U.C.C. #260 (rev. 3/96)



**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 1203 Lot 52
Work Site Location 436 COMMERCE LANE
Owner in Fee WEST BERLIN, NJ 08091
Address RONALD H. BIGLIN, JR.
58 PEMBERTON RD
SOUTHAMPTON, NJ 08091
Tele. (856) 767-4870
Contractor P&B PARTITIONS, INC.
Address 444 COMMERCE LANE
WEST BERLIN, NJ 08091
Tele. (856) 767-4870 Fax (856) 767-4825
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 222429360

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
	Initial	Type:	Failure	Approval	Initial
☐ No Plans Required		Footings			
☐ All		Foundation			
☐ Footings		Slab			
☐ Foundation		Frame			
☐ Frame		Barrier-Free			
☐ Other		Insulation			
Joint Plan Review Required:					
☐ Elec.		☐ Plumb.		☐ Elevator	
SUBCODE APPROVAL					
☐ CO		☐ CCO		☐ CA	
Date: <u>7/13/2009</u>					
Approved by: <u>[Signature]</u>					
Other above ceiling					
Final					
Barrier-Free					

B. BUILDING CHARACTERISTICS

Use Group Present VACANT Proposed B/S1
Constr. Class Present VACANT Proposed 2C
No. of Stories 2
Height of Structure 32 Ft.
Area — Largest Floor 35,600 Sq. Ft.
New Bldg. Area/All Floors 47,600 Sq. Ft.
Volume of New Structure 935,893 Cu. Ft.
Total Land Area Disturbed 2.0 ± AC. Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ 550,000.
2. Alteration \$ _____
3. Total (1+2) \$ 550,000.



Date Received
Date Issued
Control #
Permit #

2001-132

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.

Ronald H. Biglin
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NEW BLDG.
BLOCK WALLS
STEEL ROOF.
OK Footing & Foundation
Slab poured CHECK
per m.t. & plans

TYPE OF WORK:

☒ New Building
☐ Addition
☐ Alteration
☐ Roofing
☐ Siding
☐ Fence
☐ Sign
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Other
☐ Demolition

FEE (Office Use Only)

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____

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

U.C.C. F110
(rev. 3/98)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



**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 1203 Lot 52
Work Site Location 436 COMMERCE LANE
WEST BERLIN, NJ 08091
Owner in Fee RONALD H. BIGLIN, JR.
Address 58 PEMBERTON RD
SOUTHAMPTON, NJ 08091
Tele. (856) 767-4870
Contractor P&B PARTITIONS, INC.
Address 444 COMMERCE LANE
WEST BERLIN, NJ 08091
Tele. (856) 767-4870 Fax (856) 767-4825
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 222429360

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	☐ All			Type:	Failure	Approval	Initial
☐	☐			Footings			
☐	☐			Foundation			
☐	☐			Slab			
☐	☐			Frame			
☐	☐			Barrier-Free			
Joint Plan Review Required:				Insulation			
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator				Finishes			
SUBCODE APPROVAL				Energy			
☐ CO ☐ CCO ☐ CA				Mechanical			
Date: _____				TCO			
Approved by: _____				Other			
				Final			
				Barrier-Free			

B. BUILDING CHARACTERISTICS

Use Group Present VACANT Proposed B/SI
Constr. Class Present VACANT Proposed B2C
No. of Stories 2
Height of Structure 32 Ft.
Area — Largest Floor 35,600 Sq. Ft.
New Bldg. Area/All Floors 47,600 Sq. Ft.
Volume of New Structure 935,893 Cu. Ft.
Total Land Area Disturbed 2.0 ± AC. Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ 550,000.
2. Alteration \$ _____
3. Total (1+2) \$ 550,000.



Date Received _____
Date Issued _____
Control # _____
Permit # _____

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.

Ronald H. Biglin
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NEW BLDG.
BLOCK WALLS
STEEL ROOF.
OK Footing & Foundation only

TYPE OF WORK:

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

FEE (Office Use Only)
\$ _____

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

part OK
Footings
5/24/01
U.C.C. F110 (rev. 3/96)

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



NOTIS ARCHITECTS ENGINEERS

1926 GREENTREE ROAD, SUITE 200
CHERRY HILL, NJ 08003
PHONE: (856) 751-5661 FAX: (856) 751-5662

November 1, 2001

Mr. John White
Construction Code Official
170 Bate Road
W. Berlin, NJ 08091

RE: Ron Biglin Building
Commerce Lane, Berlin NJ

CERTIFICATION

The undersigned was present at the time of the concrete footing pourings and concrete floor slab placement. The soil under the footings was compacted properly and met the specifications. Similarly, the placement and the size of the footing reinforcement was proper. Also, the underslab area was compacted to 95% compaction, a six-mil vapor barrier was installed and a 3,500-PSI concrete mix was poured. (The drawings called for 3,000 PSI.) Both the footing and the floor slab work met or exceeded the specifications for this project.

Signature _____
NJ Licensed Architect # 10857
NJ Licensed Engineer # 31035
Date 11/1/01

10/10/01
x 4/20/01



**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 1203 Lot 52853
Work Site Location 436 COMMERCE LANE WEST BORDEN N.J.
Owner in Fee RONALD H. BIGNARD JR
Address 444 COMMERCE LANE WEST BORDEN N.J. 07001
Tele. (856) 767-4810
Contractor CLEMENT PLUMBING & HEATING
Address P.O. BOX 675 VOORHEES N.J. 07043
Tele. (856) 719-9444 Fax ()
Lic. No. 6755
Federal Emp. No. 22 009-309-5917

B. PLUMBING CHARACTERISTICS

Use Group Present VACANT Proposed B/SI
Building Sewer Size 4" Public Sewer Private Septic
Water Service Size 2" Public Water Private Well
Est. Cost of Plumbing Work \$ 23,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plans Required
Joint Plan Review Required:
☐ Building ☐ Electric
☐ Fire ☐ Elevator
☐ Plumbing Plans Approved
Date: 5.3.2001
Approved by: [Signature]

INSPECTIONS
Type: Slab Rough Water Sewer Fixtures Gas Equipment Gas Piping
Dates (Month/Day) Failure Approval Initial
6-26-01 6-28-01 K.S.
6-26-01 6-26-01 K.S.
6-26-01 6-26-01 K.S.
6-25-01 6-25-01 K.S.

SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
Date: 9.26.01
Approved by: [Signature]

C. CERTIFICATION IN SUE 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's Seal
[Signature]

Licensed Plumbing Contractor [] Exempt Applicant



Date Received
Date Issued
Control #
Permit #

2001-132

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT
9	Water Closet
1	Urinal/Bidet
1	Bath Tub
1	Lavatory
2	Shower
	Floor Drain
6	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
7	Water Heater
	Fuel Oil Piping
	Gas Piping
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
1	Sewer Connection
1	Water Service Connection
10	Stacks
	Other
	Other
	Other

Administrative Surcharge	\$
Minimum Fee	\$
DCA Training Fee	\$
TOTAL FEE	\$ <u>480</u>



ELECTRICAL
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

2001-132

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

Block 1203 Lot 52
Work Site Location 436 COMMERCE LANE
Owner in Fee/Occupant WEST BURLIN
Address 58 PERMBELTON ROAD
504TH APT ON NJ 08088
Tele. () 607-4870
Contractor Excel Electric Inc.
Address 405 Spring Lake Dr
Clemont, NJ 08021
Tele. () 435-5364 Fax ()
Lic. No. 13775
Federal Emp. No. 22-3442968

B. ELECTRICAL CHARACTERISTICS

Use Group Present VACANT Proposed OFFICE/WH.
[] Pole/Pad # [] Temporary [] Other
Building Occupied as OFFICE/WH. Utility Co.
Est. Cost of Elec. Work \$ 40,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
[] No Plans Required			Type:	
Joint Plan Review Required:			Rough	
[] Building [] Plumbing			Temp. Serv.	
[] Fire [] Elevator			Constr. Separa	
[] Elec. Plans Approved			TCO	
Date: <u>6-1-01</u>			Other Trans	
Approved by: <u>[Signature]</u>			Service	
			Final	
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued	
[] CO [] CCO [] CA			Final Cut-in-Card Date Issued	
Date: _____				
Approved by: _____				

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
72		Lighting Fixtures	
50		Receptacles	
44		Switches	
		Detectors	
4		Light Poles	
17		Motors-Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
TOTAL NUMBERS			\$ 78
		Pool Permit/with UVW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	138
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	15
		KW HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	92
		AMP Motor Control Center	104
		KW Elec. Sign/Outline Light	

Administrative Surcharge \$
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$

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's Signature/Contractor's Seal and Signature
Mark Stang

[X] Licensed Electrical Contractor [] Exempt Applicant

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 09/26/2002
Control #
Permit # 2002-150

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1203 Lot 52
Work Site Location 436 COMMERCE LANE
Owner in Fee/Occupant BIGLIN, RONALD JR
Address 50 PENNINGTON ROAD
SOUTHAMPTON, NJ 08091-
Telephone ()
Contractor P & B PARTITIONS
Address 444 COMMERCE LANE
WEST BERLIN, NJ 08091-
Telephone () Fax ()
Lic. No. or Bldgs. Reg. No.
Federal Emp. No. 22-2429360

Home Warranty No.
Type of Warranty Plan: ☒ State ☐ Private
Use Group B
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

TENANT FIT OUT

☒ 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 as 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

Fee \$ 28
Paid ☒ Check No. 5599
Collected by: 101

CONSTRUCTION OFFICIAL
U.C.C. 7260 (rev. 3/96)

UNIT #3 or C



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 1203 Lot 52
 Work Site Location 436 COMMERCE - UNIT #3 or C
WEST BERLIN, NJ 08091
 Owner in Fee RONALD H. BIGLIN JR.
 Address 53 PEMBERTON ROAD
SOUTHAMPTON NJ 08088
 Tele. (856) 767 4870
 Contractor P+B PARTITIONS INC.
 Address 443 COMMERCE LA.
WEST BERLIN NJ
 Tele. (856) 767 4870 Fax (856) 767 4885
 Lic. No. or Bldrs. Reg. No. _____
 Federal Emp. No. 222429360

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	INSPECTIONS
☐ No Plans Required			Type:
☐ All	<u>6/25/2002</u>		☐ Footing
☐ Footing			☐ Foundation
☐ Foundation			☐ Slab
☐ Frame			☐ Frame
☐ Other			☐ Barrier-Free
Joint Plan Review Required:			
☐ Elec.	☐ Plumb.	☐ Fire	☐ Elevator
SUBCODE APPROVAL			
☒ CO	☐ CCO	☐ CA	
Date: <u>4/19/2002</u>			
Approved by: <u>[Signature]</u>			
			Barrier-Free

B. BUILDING CHARACTERISTICS

Use Group Present B/S1 Proposed _____
 Constr. Class Present 2-C Proposed _____
 No. of Stories 2
 Height of Structure 32 Ft.
 Area — Largest Floor 35600 Sq. Ft.
 New Bldg. Area/All Floors 47600 Sq. Ft.
 Volume of New Structure _____ Cu. Ft.
 Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
 2. Alteration \$ 16900
 3. Total (1+2) \$ 18600



Date Received
 Date Issued
 Control #
 Permit #

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.

[Signature]
 Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TENANT ALTERATIONS

TYPE OF WORK:

☐ New Building
☐ Addition
☒ Alteration
☐ Roofing
☐ Siding
☐ Fence
☐ Sign
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Other
☐ Demolition

FEE (Office Use Only)

\$ _____
1200

Administrative Surcharge \$ _____
 Minimum Fee \$ 1200
 DCA Training Fee \$ 5
 TOTAL FEE \$ 1205

U.C.C. F110
 (rev. 3/95)

1 White = Inspector Copy
 3 Pink = Office Copy

2 Canary = Office Copy
 4 Gold = Applicant Copy

2002-150

UNIT #3 OR "C"



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 1203 Lot 52
Work Site Location 436 COMMERCE WEST BERLIN
Owner in Fee/Occupant RONALD H. BIGLIU, JR.
Address 588 PENABERTON ROAD
SOUTHAMPTON NJ 08088
Tele. (856) 767 4870
Contractor Excel Electric Inc
Address 40 Spring Lake Dr
Clemington NJ 08021
Tele. (856) 435-5364 Fax ()
Lic. No. 13773
Federal Emp. No. 22-3442968

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 13,900.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required			Type:	Failure
Joint Plan Review Required:			Rough	Approval
☐ Building	☐ Plumbing		Temp. Serv.	Initial
☐ Fire	☐ Elevator		Constr. Serv.	
☒ Elec. Plans Approved			TCO	
Date:			Other	
Approved by:			Service	
			Final	
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued	
☒ CO	☒ CA		Final Cut-in-Card Date Issued	
Date:				
Approved 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 and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature
Mark Stang

☒ Licensed Electrical Contractor ☐ Exempt Applicant

U.C.C. F120
(rev. 3/96)

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



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
27		Lighting Fixtures	
19		Receptacles	
10		Switches	
10		Detectors	
3		Light Poles	
9		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
68		TOTAL NUMBERS	\$ 42
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
1	3	KW Elec. Range/Receptacle	10
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
	3/24	KW Central A/C Unit	10
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	46
	200	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		Administrative Surcharge	\$ 114
		Minimum Fee	\$ 11
		DCA Training Fee	\$ 125
		TOTAL FEE	\$ 125



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 1203 Lot 52A53
Work Site Location 436 COMMERCE LANE
WEST BORDEN NJ
Owner in Fee ROMANA H BISHOP JR
Address 436 COMMERCE LANE
WEST BORDEN NJ
Tele. (856) 767-4870
Contractor CLEMENT PLUMBING & HEATING INC
Address P.O. BOX 675
NORRATON NJ 08043
Tele. (856) 719-9444 Fax (856) 719-9444
Lic. No. 6755
Federal Emp. No. 223095997

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 \$ 4000

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required	Type: _____	Failure _____
Joint Plan Review Required:	Slab _____	Approval <u>8-15-05</u>
☐ Building ☐ Electric	Rough _____	Initial <u>K.S.</u>
☐ Fire ☐ Elevator	Water _____	<u>K.C.</u>
☐ Plumbing Plans Approved	Sewer _____	
Date: <u>6-4-05</u>	Fixtures _____	
Approved by: <u>[Signature]</u>	Gas Equipment _____	
	Gas Piping _____	
SUBCODE APPROVAL	Solar _____	
☐ CO ☐ GCO ☐ CA	TCO _____	
Date: <u>9-24-05</u>		
Approved by: <u>[Signature]</u>		

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's Seal _____

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

Unit 3
202-150
Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT
1	Water Closet
1	Urinal/Bidet
1	Bath Tub
1	Lavatory
1	Shower
1	Floor Drain
1	Sink (MOP. RELOCATE)
1	Dishwasher
1	Drinking Fountain
1	Washing Machine
1	Hose Bibb
1	Water Heater
1	Fuel Oil Piping
1	Gas Piping
1	Steam Boiler
1	Hot Water Boiler
1	Sewer Pump
1	Interceptor/Separator
1	Backflow Preventer
1	Greasetrap
1	Sewer Connection
1	Water Service Connection
1	Stacks
1	Other 3" vent
1	Other
1	Other

Administrative Surcharge \$ 46
Minimum Fee \$ 3
DCA Training Fee \$ 49
TOTAL FEE \$ 98

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 06/04/2002
Control #
Permit # 2002-113

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE

UNIT 2

Owner in Fee BIGLIN, RONALD JR

Address 58 PEMBERTON ROAD

SOUTHAMPTON, NJ 08091-

Telephone ()

Contractor RC JAMES

Address PO BOX 574

WATERFORD, NJ 08089-

Telephone (856)768-8072

Lic. No. or Bldrs. Reg. No.

Federal Emp. No.

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:

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 \$ 2,800

06/04/2002

Date

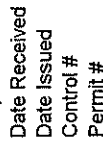
Construction Official

U.C.C. F170 (rev. 3/96)

PAYMENTS (Office Use Only)
Building 0
Electrical 0
Plumbing 95
Fire Protection 0
Elevator Devices 0
Other
DCA Training Fee 2
Cert. of Occupancy 0
Other
Total 97
Check No. 3364
Cash
Collected By km



**PLUMBING
SUBCODE
TECHNICAL SECTION**



202-113

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

Block 1203 Lot 52
Work Site Location 436 COMMERCE LANE
WEST BEELIN, NJ
Owner in Fee BRAND H. BIGNARD JR
Address 58 DEMPSTER RD
SOUTHAMPTON, NJ 08088
Tele. () 761 4570
Contractor RC INDUST
Address PO BOX 574
WATERFORD NJ 08084
Tele. (609) 762 8077 Fax ()
Lic. No. _____
Federal Emp. No. _____

B. PLUMBING CHARACTERISTICS

Use Group	Present	Proposed
Building Sewer Size		Public Sewer
Water Service Size		Public Water
Est. Cost of Plumbing Work	\$	7800
		Private Septic
		Private Well

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
[]	No Plans Required	Type:	Failure	Approval	Initial
Joint Plan Review Required:					
[]	Building	[] Electric			
[]	Fire	[] Elevator			
[X]	Plumbing Plans Approved				
Date:	6-4-02				
Approved by:	<i>K. S. S.</i>				
SUBCODE APPROVAL					
[]	CO	[]	CCO	[]	CA
Date:	6-26-02				
Approved by:	<i>K. S. S.</i>				

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.

Joseph J. Henderson

Signature _____ Contractor's Seal _____

1 Licensed Plumbing Contractor

☒ Exempt ApplicantU.C.C. F130
(rev. 3/96)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
1	Fuel Oil Piping	655.00
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
3	Other <u>Septic</u>	30.00
	Other	
	Other	

Administrative Surcharge
Minimum Fee
DCA Training Fee
TOTAL FEE

1202 4-2
GAS PIPING - UNIT #2 (F)
2 UNIT HENTERS
POOR FUTURE HVC

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 02/13/2002
Control #
Permit # 2002-21

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE

Contractor RAYNOR ELECTRIC
Address 106 HOLLY DRIVE
SHAMONG, NJ

Owner in Fee BIGLIN, RONALD JR

Address 58 PEMBERTON ROAD

SOUTHAMPTON, NJ 08091-

Telephone ()

Telephone ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 13-9720169

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:

LIGHTING FIXTURES

PAYMENTS (Office Use Only)
Building 0
Electrical 36
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
DCA Training Fee 6
Cert. of Occupancy 0
Other

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 \$ 8,000

02/13/2002

Date

Construction Official

U.C.C. F170 (rev. 3/96)

Paul



**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 1203 Lot 52
Work Site Location 436 Commerce Lane
West Berlin
Owner in Fee/Occupant Ron Biglin
Address 58 Pemberton Rd
Southampton
Tele. (856) 767-4870
Contractor Raggar Electric
Address 106 Hollydr
Shamong
Tele. () 265-8989 Fax ()
Lic. No. 12725
Federal Emp. No. 139-72-0169

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 8,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW ☒ No Plans Required _____
Joint Plan Review Required: _____
☐ Building ☐ Plumbing
☐ Fire ☐ Elevator
☒ Elec. Plans Approved _____
Date: 12/1/11
Approved by: [Signature]

INSPECTIONS
Type: _____
Rough _____
Temp. Serv. _____
Constr. Serv. _____
TCO _____
Other _____
Service _____
Final _____

Dates (Month/Day)
Failure _____
Approval _____
Initial _____

SUBCODE APPROVAL

☐ CO 14900 CA
Date: _____
Approved by: [Signature]

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]

Applicant's Signature/Contractor's Seal and Signature

☒ Licensed Electrical Contractor ☐ Exempt Applicant



Date Received _____
Date Issued _____
Control # _____
Permit # _____

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS
12 Lighting Fixtures
Receptacles
Switches
Detectors
Light Poles
Motors—Fract. HP
Emergency & Exit Lights
Communications Points
Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

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/Receptacle
KW Dishwasher
HP Garbage Disposal
KW Central A/C Unit
HP/KW Space Heater/Air Handler
KW Baseboard Heat
HP Motors 1/4 HP
KW Transformer/Generator
AMP Service
AMP Subpanels
AMP Motor Control Center
KW Elec. Sign/Outline Light

\$ 36

FEE (Office Use Only)

Administrative Surcharge \$
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$

U.C.C. F120
(rev. 3/96)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



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 1203 Lot 52
Work Site Location 436 COMMERCIAL LANE
WEST BERLIN NJ
Owner in Fee P&B PARTITIONS
Address 436 COMMERCIAL LANE
WEST BERLIN NJ 08091
Tele. ()
Contractor MAVERICK FIRE PROTECTION
Address 1107 IMPERIAL WAY
ROSELAND NJ 08068
Tele. () 845-4800 Fax ()
Lic. No. 22-23-9680
Federal Emp. No. 22-23-9680

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
Heating Systems [] New [] Existing [] HVAC
Type: [] Gas [] Oil [] Electric [] Solar
[] Other
Location:
Fire Alarm System
New [] Existing []
Location of Panel:
Fire Suppression/Standpipe System
New [] Existing []
Location of Main Control Valve:
Total Cost of Fire Protection Work \$ 40,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[] No Plans Required
Joint Plan Review Required:
[] Building [] Plumbing
[] Electric [] Elevator
[] Fire Plans Approved
Date:
Approved by:
SUBCODE APPROVAL
[] CO [] CCO [] CA
Date:
Approved by:

INSPECTIONS
Type:
Alarm System
Suppression Sys.
Standpipe
Fire Pump
Pre-Eng. System
Mechanical
Smoke Control
TCO
Final
Other

Dates (Month/Day)
Failure Approval Initial

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.

Walter Lugin
Signature



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

INSTALLING SPRINKLER SYSTEM
IN WAREHOUSE & OFFICES

Water Supply Source

Method of Alarm/Suppression System Supervision

Storage Tanks

Type: [] Flammable Liquid [] Combustible Liquid

[] LPG [] LNG Capacity

Alarm Systems [] 110v Interconnected

[] System

Alarm Devices (i.e., smoke, heat, pulls,

water/flow)

Supervisory Devices (i.e., tamperers, low/high air)

Signaling Devices (i.e., 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

Halon Suppression

Other

Kitchen Hood Exhaust System

Smoke Control System

Gas [] or Oil [] Fired Appliances

Other

FEE (Office Use Only)

Administrative Surcharge
Minimum Fee
DCA Training Fee
TOTAL FEE

TOWNSHIP OF BERLIN
170 BATE AVE.
W. BERLIN, NJ 08091

Date Issued 12/10/20
Control #
Permit # 2001-239

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE

Owner in Fee BIGLIN, RONALD JR

Address 58 PEMBERTON ROAD

SOUTHAMPTON, NJ 08091-

Telephone ()

Contractor MAJEK FIRE PROTECTION

Address 1707 IMPERIAL WAY

THOROFARE, NJ 08086-

Telephone ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-2396080

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:

INSTALL IN SPRINKLER

Installing 579 Sprinkler Heads.

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.

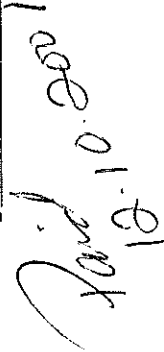
Estimated Cost of Work \$ 40,000


Construction Official

12/10/2001
Date

U.C.C. F170 (rev. 3/96)

PAYMENTS (Office Use Only)
Building 0
Electrical 0
Plumbing 0
Fire Protection 822
Elevator Devices 0
Other
DCA Training Fee 32
Cert. of Occupancy 0
Other
Total 854
Check No. 20754
Cash
Collected By KM


Paid 12.10.2001

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 09/12/2002
Control #
Permit # 2002-153

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1203 Lot 52 Qual
Work Site Location 436 COMMERCE LANE
UNIT 2

Owner in Fee/occupant EIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08091-

Telephone ()

Contractor P & B PARTITIONS

Address 444 COMMERCE LANE

Telephone () Fax ()

Lic. No. or Bldgs. Reg. No.

Federal Emp. No. 22-2429360

Home Warranty No.
Type of Warranty Plan: [] State [] Private
Use Group R-3
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

[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 of 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 HHC 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

Fee \$ 0
Paid [X] Check No. 5589
Collected by: RM

UNIT #2 02 15



**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 1203 Lot 52
Work Site Location 436 COMMERCE LANE
WEST BERLIN, NJ 08091
Owner in Fee RONALD H. BIGLIN JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08088
Tele. (856) 767 4870
Contractor P & S PRETIONS, INC.
Address 443 COMMERCE LANE
WEST BERLIN NJ
Tele. (856) 767 4870 Fax (856) 767 4825
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 222429360

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
				Type:	Failure	Initial	
☐	No Plans Required			Footing			
☐	All			Foundation			
☐	Footing			Slab			
☐	Foundation			Frame			
☐	Frame			Barrier-Free			
☐	Other			Insulation			
Joint Plan Review Required:				Finishes			
☐	Elec.	☐	Plumb.	☐	Fire	☐	Elevator
SUBCODE APPROVAL:				Energy			
☐	CO	☐	CCO	☐	CA		
Date:	<u>7/1/99</u>			Mechanical			
Approved by:	<u>[Signature]</u>			TCO			
				Other	<u>above ceiling</u>		
				Final			
				Barrier-Free			

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class	<u>B151</u>	Proposed	1. New Bldg. \$
No. of Stories	<u>2</u>	Proposed	2. Alteration \$ <u>6500</u>
Height of Structure	<u>32</u>		3. Total (1+2) \$ <u>25,403</u>
Area — Largest Floor	<u>35,600</u>		
New Bldg. Area/All Floors	<u>47,600</u>		
Volume of New Structure			
Total Land Area Disturbed			



Date Received
Date Issued
Control #
Permit #

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.

[Signature]
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TENANT ALTERATIONS

TYPE OF WORK:

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

FEE (Office Use Only)

\$ 156

Administrative Surcharge \$
Minimum Fee \$ 156
DCA Training Fee \$ 20
TOTAL FEE \$ 176



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 1203 Lot 52
Work Site Location 436 COMMERCE LAKE
WEST BERLIN NJ 08091
Owner in Fee/Occupant RONALD H. BIGLIN JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON NJ 08088
Tele. (856) 7674870
Contractor Excel Electric Inc
Address 40 Spring Lake Dr
Clementon NJ 08040
Tele. (856) 435-5364 Fax ()
Lic. No. 13775
Federal Emp. No. 22-3442968

B. ELECTRICAL CHARACTERISTICS

Use Group Present B151 Proposed
[] Pole/Pad # [] Temporary [] Other
Building Occupied as
Est. Cost of Elec. Work \$ 14,903.00 Utility Co.

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[] No Plans Required
Joint Plan Review Required:
[] Building [] Plumbing
[] Fire [] Elevator
[] Elec. Plans Approved
Date: Approved by: [Signature]
SUBCODE APPROVAL
[] CO [] CCO [] CA
Date: Approved by: [Signature]
INSPECTIONS
Type: Failure Dates (Month/Day)
Rough Approval Initial
Temp. Serv. [Signature]
Constr. Serv. [Signature]
TCO [Signature]
Other [Signature]
Service [Signature]
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]
Applicant's Signature/Contractor's Seal and Signature

☒ Licensed Electrical Contractor [] Exempt Applicant

UNIT # 2-02-D



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA

QTY	SIZE	ITEMS	FEE (Office Use Only)
33		Lighting Fixtures	
27		Receptacles	
12		Switches	
		Detectors	
		Light Poles	
3		Motors—Fract. HP	
10		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
85		TOTAL NUMBERS	\$ <u>48</u>
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
1	3	KW Oven/Surface Unit	<u>10</u>
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
1	3 1/2 ton	HP Garbage Disposal	<u>10</u>
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/4 HP	
		KW Transformer/Generator	
		AMP Service	
1	200	AMP Subpanels	<u>2/6</u>
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge \$ 114
Minimum Fee \$ 114
DCA Training Fee \$ 114
TOTAL FEE \$ 126



PLUMBING
SUBCODE
TECHNICAL SECTION

Unit 1(A)

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

Block 1203 Lot 52
Work Site Location 436 COMMERCE WEST BERLIN, NJ
Owner in Fee RONALD H. BIGLIN JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08088
Tele. (856) 767 4870
Contractor P.C. JAMES
Address P.O. Box 574
WATERFORD, NJ 08089
Tele. (856) 768 8072 Fax ()
Lic. No. _____
Federal Emp. No. _____

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 \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	Type:	Failure	Approval	Failure	Initial
☐ Building	☐ Electric				
☐ Fire	☐ Elevator				
☒ Plumbing Plans Approved					
Date: <u>6-4-83</u>					
Approved by: <u>[Signature]</u>					
SUBCODE APPROVAL					
☐ CO	☐ CCO	☒ CA			
Date: _____					
Approved 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 and perform the work listed on this application.

[Signature]

Signature — Contractor's Seal

☐ Licensed Plumbing Contractor ☒ Exempt Applicant

U.C.C. F130
(rev. 3/95)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other <u>gas piping</u>	
	Other	
	Other	
	Administrative Surcharge	\$ <u>105</u>
	Minimum Fee	\$ <u>2</u>
	DCA Training Fee	\$ <u>107</u>
	TOTAL FEE	\$ <u>212</u>

GAS PIPING - UNIT # 1 OR 2
3 UNIT HEATERS, 2 PTU'S
1 SPLIT SYSTEM AND GAS BOILER

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 06/04/20
Control #
Permit # 2002-114

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual _____

Work Site Location 436 COMMERCE LANE
UNIT 1

Owner in Fee BIGLIN, RONALD JR
Address 58 PEMBERTON ROAD
SOUTHAMPTON, NJ 08091-

Telephone () _____

Contractor RC JAMES
Address PO BOX 574
WATERFORD, NJ 08089-

Telephone (856)768-8072
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____

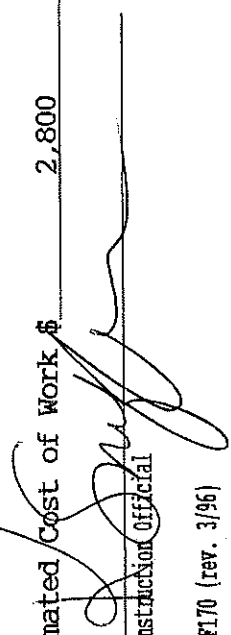
Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

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 \$ 2,800


Construction Official Date 06/04/2002

O.C.C. F170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	125
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	2
Cert. of Occupancy	0
Other	
Total	127
Check No.	5364
Cash	
Collected By	KM



PLUMBING
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

2002-114

Unit 1(A)

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

Block 1203 Lot 52
Work Site Location 436 COMMERCE
WEST BERNARD NJ
Owner in Fee RONALD H. BIGLIN JR
Address 55 REMINGTON ROAD
SOUTHAMPTON, NJ 08088
Tele. (856) 767 4810
Contractor P. J. JAMES
Address P.O. BOX 514
WATERFORD, NJ 08081
Tele. (856) 768 8012 Fax ()
Lic. No.
Federal Emp. No.

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 \$

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plans Required
Joint Plan Review Required:
☐ Building ☐ Electric
☐ Fire ☐ Elevator
☒ Plumbing Plans Approved
Date: 6-4-02
Approved by: R. S. Smith
SUBCODE APPROVAL
☐ CO ☐ CCO ☒ CA
Date: 9-15-02
Approved by: R. S. Smith
INSPECTIONS
Type:
Slab
Rough
Water
Sewer
Fixtures
Gas Equipment
Gas Piping
Solar
TCO
Dates (Month/Day)
Failure Approval Initial
 6-13-02 RS
 9-19-02 RS

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's Seal
Joseph J. Henderson

☐ Licensed Plumbing Contractor ☒ Exempt Applicant

U.C.C. F130
(rev. 3/96)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
1	Gas Piping	65.00
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
6	Other <u>gas piping</u>	60.00
	Other	
	Other	
	Administrative Surcharge	
	Minimum Fee	125
	DCA Training Fee	2
	TOTAL FEE	127

GAS PIPING - UNIT # 1 OR D
3 UNIT HEATERS, 2 PTU'S
1 SPLIT SYSTEM AND GAS RAIGIE

TOWNSHIP OF BERLIN
170 BATE AVE W. BERLIN NJ
856-767-1854 EXT. 27

Date Issued 04/08/2002
Control #
Permit # 2002-50

UCC NEW JERSEY
**CONSTRUCTION
PERMIT**

IDENTIFICATION Block 1203 Lot 52 Qual

Work Site Location 436 COMMERCE LANE

Contractor ANCHOR PROTECTIVE SYSTEMS, INC.
Address 112 9TH AVE.

Owner in Fee BIGLIN, RONALD JR

Telephone () HADDON HEIGHTS, NJ 08035-

Address 58 PEMBERTON ROAD

Telephone () SOUTHAMPTON, NJ 08091-

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-2119119

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

ALARM

PAYMENTS (Office Use Only)
Building 0
Electrical 36
Plumbing 0
Fire Protection 65
Elevator Devices 0
Other
DCA Training Fee 3
Cert. of Occupancy 0
Total 104
Check No. 6829
Cash
Collected By KJ

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 \$ 4,525

04/08/2002
Date

U.C.C. P170 (rev. 3/96)

PD
4-12-2002



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 1203 Lot 52
Work Site Location 436 Commercial Lane
West Belmar, N.J. 08051
Owner in Fee/Occupant Ronald H. Beglin SR.
Address 58 Pemberton Rd
Southampton, N.J. 08090
Tele. (856) 767-4898
Contractor Anchor Protective Systems Inc.
Address 112 8th Ave
Haddon Heights, N.J. 08033
Tele. (856) 546-4458 Fax (856) 547-6682
Lic. No. _____
Federal Emp. No. 222 119 119

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other []
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 3925.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Date	Type:	Failure	Approval	Initial
☒ No Plans Required		Rough			
☐ Building [] Plumbing		Temp. Serv.			
☐ Fire [] Elevator		Constr. Serv.			
☐ Elec. Plans Approved		TCO			
Date: _____		Other			
Approved by: _____		Service			
		Final			
SUBCODE APPROVAL		Temp. Cut-in-Card Date Issued			
[] CO [] CCO		Final Cut-in-Card Date Issued			
Date: _____					
Approved 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 and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature
[Signature]

[] Licensed Electrical Contractor [X] Exempt Applicant



Date Received _____
Date Issued _____
Control # _____
Permit # _____

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		TOTAL NUMBERS
		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/Receptacle
		KW Dishwasher
		HP Garbage Disposal
		KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
		HP Motors 1/+ HP
		KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

Administrative Surcharge \$
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$