

21-0148

Maria Piñeiro

From: Eileen Garcia
Sent: Thursday, July 1, 2021 10:05 AM
To: Maria Piñeiro
Cc: Victoria Ann Kupsch
Subject: FW: OPRA request - Local FOIA Request

Good morning Maria

Just follow-up with this OPRA submitted to Darlene Abreu and Zoning Offices on June 28, 2021.

Thank you

-----Original Message-----

From: Eileen Garcia
Sent: Monday, June 28, 2021 11:00 AM
To: Edward A. Mullen <emullen@perthamboynd.org>; Darlene Abreu <dabreu@perthamboynd.org>; JRios@perthamboynd.org; Rudy Rodriguez <r.rodriguez@perthamboynd.org>
Subject: FW: OPRA request - Local FOIA Request

Please see OPRA request below.

-----Original Message-----

From: Victoria Ann Kupsch
Sent: Monday, June 28, 2021 9:18 AM
To: Eileen Garcia <egarcia@perthamboynd.org>
Subject: FW: OPRA request - Local FOIA Request

Due on : 7/15/21

* No Records Found on open violations, Ast/ust tank permits,

-----Original Message-----

From: Ammar Ali [mailto:opra+request-24327-a58795fe@requests.opramachine.com]
Sent: Monday, June 28, 2021 2:45 AM
To: Victoria Ann Kupsch <victoria@perthamboynd.org>
Subject: OPRA request - Local FOIA Request

Permit# 15-1092 = Open
Permit# 2014076 = Open

Hello,

all other permits attached = closed

RSB Environmental is currently conducting Phase I Environmental Site Assessment for the below mentioned property:

Located at: 774 Convery Blvd Perth Amboy, NJ 08861

As a part of these assessment, we wish to determine whether government agencies possess records on the subject property that may include potential concerns. We request the following information:

Copies of any records of outstanding or open building or fire code violations at the property.

Copies of any records indicating the installation and/or removal of an above ground or underground storage tank at the property.

Copies of any records indicating that the fire department has responded to the property for the purpose of cleaning up a release of hazardous materials.

Copies of any building permits or any open building permits at the property.

Copies of Certificates of Occupancy for the property.

Please call (832.291.3473) or email (assessments@rsbenv.com) me to discuss the file information or if you require further information. Thank you for your time and attention regarding this matter.

Thank you,

Ammar Ali
Project Coordinator
Corporate Office: 6001 Savoy Dr., Ste. 110 Houston, Texas 77036
Office: 832.291.3473
Project Offices Nationwide
www.rsbenv.com

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-24327-a58795fe@requests.opramachine.com

Is victoria@perthamboynj.org the wrong address for OPRA requests to Perth Amboy City? If so, please contact us using this form:

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

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/local_foia_request

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.

Victoria Ann Kupsch, Municipal Clerk
City of Perth Amboy
Clerks Office
Email:victoria@perthamboynj.org<<mailto:victoria@perthamboynj.org>>
Phone:(732) 826-0290 ext. 4018
Website:www.perthamboynj.org<<https://www.perthamboynj.org>>

Receive alerts from the City of Perth Amboy: Text 08861 to 888777 for mobile alerts or sign up at
<https://local.nixle.com/register/>

HELP PREVENT THE SPREAD OF COVID-19

MASK-UP ♦ KEEP 6 FEET APART ♦ SANITIZE AND WASH HANDS FREQUENTLY _____

DISCLAIMER: The filters and firewalls needed in the current internet environment may delay receipt of emails, particularly those containing attachments. We strongly urge you to use delivery receipt and/or telephone calls to confirm receipt of important email.

CONFIDENTIALITY NOTICE: Some emails and files transmitted might be considered privileged and confidential that may also be considered advisory, consultative and deliberative (ACD) material under OPRA. If the reader of this e-mail is not the intended recipient or his or her authorized agent, the reader is hereby notified that any dissemination, distribution or copying of this e-mail is prohibited. If you have received this e-mail in error, please notify the sender by replying to this message and delete this e-mail immediately.

WARNING: Email received by or sent to City officials is subject to the Open Public Records Act (OPRA). This means that absent some specific privilege, all such communications are considered a public record and are subject to publication and/or dissemination to the public upon request.

CITY OF PERTH AMBOY

Department of Code Enforcement
436 Market Street
Perth Amboy, NJ 08861

Cert. No. 3827-00

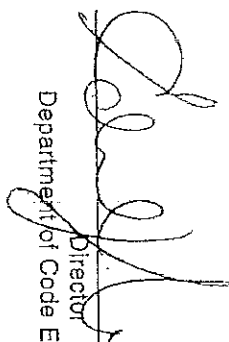
Certificate of Code Compliance

This is to Certify that

774 CONVEYER BLD

BLOCK 379.05 LOT 14

has been inspected and found to be in compliance
with the code of the City of Perth Amboy


Director
Department of Code Enforcement

DATE ISSUED Dec. 1 2000

DATE EXPIRED _____

ORDINANCE # 683-93

ZONING COMMERCIAL, RESTAURANT

CONDITIONS _____

CITY OF PERTH AMBOY

Department of Code Enforcement
436 Market Street
Perth Amboy, NJ 08861

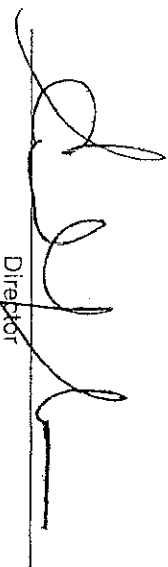
Cert. No. **4651-002**

Certificate of Code Compliance

This is to Certify that

1111 CONVEY BLVD BLOCK 37, LOT 11

has been inspected and found to be in compliance
with the code of the City of Perth Amboy


Director

Department of Code Enforcement

CONFORMANCE

ZONING **RESTAURANT**

DATE ISSUED **5-8-2002**
DATE EXPIRED _____
ORDINANCE # 683-93

CONDITIONS _____

FIRE PREVENTION BUREAU
CITY OF PERTH AMBOY

436 Market Street
Perth Amboy, NJ 08861

Cert. No. 11-0202

Certificate of Inspection

This is to Certify That

Donato Restaurant 774 Conway Blvd.
Has been inspected and found to be in compliance
with the New Jersey Uniform Fire Code. 080729 08061

Vito Fumelle
Fire Official

Reg. No. 1119 Use Code Commercial

Date Issued:

July 2002

CITY OF PERTH AMBOY

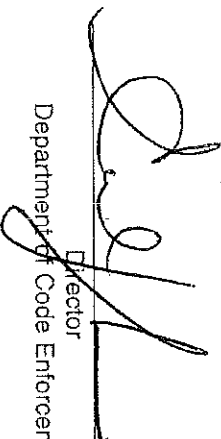
Department of Code Enforcement
436 Market Street
Perth Amboy, NJ 08861

Cert. No. 5928-004

Certificate of Code Compliance

This is to Certify that

774 CONVERY BLVD BLOCK 379.05 LOT 14-15.16
has been inspected and found to be in compliance
with the code of the City of Perth Amboy


Director
Department of Code Enforcement

DATE ISSUED 10-13-2004
DATE EXPIRED _____
ORDINANCE # 683-93

1 COMMERCIAL
ZONING 1 APARTMENT
CONDITIONS _____



City of Perth Amboy

DEPARTMENT OF CODE ENFORCEMENT

Joseph Vas, Mayor

Edward Sczta, Director

CERTIFICATE

Date: 10-13-2004

Applicant: ROROS. / DANIELLO
34. BLUE GRASS BLVD
BRADBURY, N.J. 08876

Property Location: TH. CONVEY. BLVD
Block: 379.05 Lot(s) 14-15-16.

One Family ☒ Two Family ☐

Dear Applicant:

An inspection of the above referenced property has been conducted. This property has been found to be in compliance with the New Jersey Department of Community Affairs, Division of Fire Safety Regulation, NJAC 5:70-2.3, for carbon monoxide detectors in one- and two-family dwellings.

Very truly yours,

Vito Finetti (signature)

Vito Finetti
Fire Official

Xc: File



FIRE PREVENTION BUREAU
CITY OF PERTH AMBOY
NEW JERSEY

Department of Code Enforcement

436 MARKET STREET
PERTH AMBOY, NJ 08861
(732) 826-0183

DATE: 12/1/03

CERTIFICATE OF APPROVAL

NAME Cynthia Boros / Tobia D'Aniello
ADDRESS 54 Bluegrass Blvd. Branchburg NJ 08876
TELEPHONE# 908.392.7766
ADDRESS OF PREMISES TO BE INSPECTED 774 Convery Blvd.
BLOCK 374E 379.05 LOT(S) 14, 15, 16
SINGLE FAMILY - \$15.00 ☒ TWO FAMILY - \$30.00
FEE COLLECTED BY Jatty Valencia

[Signature]
FIRE OFFICIAL (Acting)

THIS IS TO CERTIFY THAT THE ABOVE-MENTIONED PREMISE MEETS ALL THE REQUIREMENTS OF THE PERTH AMBOY SMOKE DETECTOR ORDINANCE.

SMOKE DETECTOR APPROVAL: SINGLE FAMILY ☒ TWO FAMILY ☐

[Signature]
FIRE INSPECTOR

10-13-2004
DATE OF INSPECTION

CERTIFICATE VOID AFTER SIXTY (60) DAYS FROM DATE OF INSPECTION

CITY OF PERTH AMBOY

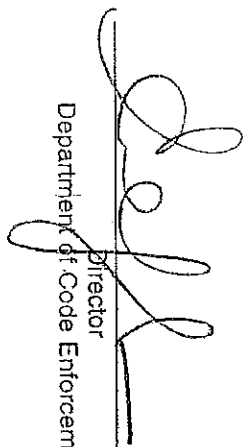
Department of Code Enforcement
436 Market Street
Perth Amboy, NJ 08861

Cert. No. 6053.004

Certificate of Code Compliance

This is to Certify that

774 CONVEY BLVD BLOCK 379, 05 LOT 14, 15, 16
has been inspected and found to be in compliance
with the code of the City of Perth Amboy


Director
Department of Code Enforcement

DATE ISSUED MAY-5-2004
DATE EXPIRED _____
ORDINANCE # 683-93

ZONING COMMERCIAL / RESTAURANT
CONDITIONS _____

FIRE PREVENTION BUREAU
CITY OF PERTH AMBOY

436 Market Street
Perth Amboy, NJ 08861

Cert. No. N-0165

Certificate of Inspection

This is to Certify That

DUNAJ RESTAURANT 774 CONVERY BLVD. PERTH AMBOY, N.J.

Has been inspected and found to be in compliance
with the New Jersey Uniform Fire Code.

W. J. Smith
Fire Official

Reg. No. N/A Use Code COMMERCIAL

Restaurant

Date Issued: APRIL, 2004

CITY OF PERTH AMBOY
260 High Street
Perth Amboy, NJ 08861

Cert. No. 610-94

Certificate of Code Compliance

This is to Certify that

774 Convery Blvd.

has been inspected and found to be
in compliance with the code of
the City of Perth Amboy.

William J. Francis

Director
Department of Environmental
Control

Reg. No. 31194-91194

Use Code Commercial

CITY OF PERTH AMBOY

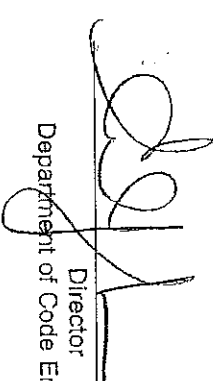
Department of Code Enforcement
436 Market Street
Perth Amboy, NJ 08861

Cert. No. 6762-005

Certificate of Code Compliance

This is to Certify that

774. CONVEYER BVD BLOCK 379.05 LOT 14-16
has been inspected and found to be in compliance
with the code of the City of Perth Amboy


Director
Department of Code Enforcement

DATE ISSUED 5-25-2005
DATE EXPIRED _____

ORDINANCE # 683-93

ZONING Commercial (RESTURANT)
CONDITIONS _____

FIRE PREVENTION BUREAU
CITY OF PERTH AMBOY

436 Market Street
Perth Amboy, NJ 08861

Cert. No. N-0107

Certificate of Inspection

This is to Certify That

774 CONVERY BLVD. PERTH AMBOY, N.J. 08861

Has been inspected and found to be in compliance
with the New Jersey Uniform Fire Code.

W. J. Farrell
Fire Official

Reg. No. N/A

Use Code 1 - COMMERCIAL UNIT

This Certificate Must be posted in a conspicuous location at above premises

Date Issued: **MAY, 2005**

CITY OF PERTH AMBOY
Department of Code Enforcement
436 Market Street
Perth Amboy, New Jersey 08861

Cert. No. 7243-006

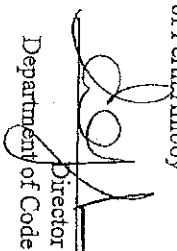
Certificate of Code Compliance

This is to Certify that

774 Convery Blvd

Block: 379.05 Lot(s): 14

has been inspected and found to be in compliance
with the Code of the City of Perth Amboy


Director
Department of Code Enforcement

DATE ISSUED: March 17, 2006

OCCUPANCY: Commercial / Restaurant

ORDINANCE NO. 569-91

ZONE: C-1

**FIRE PREVENTION BUREAU
CITY OF PERTH AMBOY**

436 Market Street
Perth Amboy, NJ 08861

Cert No. N - 0055

Certificate of Inspection

This is to Certify That

774 CONVEY BLVD. PERTH AMBOY, N.J. 08861

Has been inspected and found to be in compliance
with the New Jersey Uniform Fire Code.

Wito J. Smith
Fire Official

Reg. No. NA

Use Code 1 - COMMERCIAL UNIT

THIS CERTIFICATE MUST BE PLACED IN A CONSPICUOUS LOCATION AT THE ABOVE PROPERTY

Date Issued: April 3, 2006

BLOCK: 379.05 LOT(S): 14

CITY OF PERTH AMBOY

Department of Code Enforcement
436 Market Street
Perth Amboy, New Jersey 08861

Cert. No. 7870-007

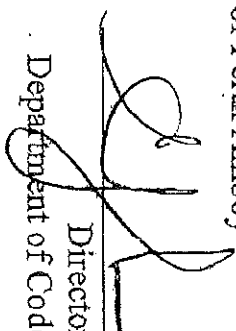
Certificate of Code Compliance

This is to Certify that

774 Convery Blvd

Block: 379.05 Lot(s): 14,15,16

has been inspected and found to be in compliance
with the Code of the City of Perth Amboy



Director
Department of Code Enforcement

DATE ISSUED: June 5, 2007

OCCUPANCY: Commercial / Restaurant

ORDINANCE NO. 569-91

ZONE: C-1

FIRE PREVENTION BUREAU
CITY OF PERTH AMBOY

436 Market Street
Perth Amboy, NJ 08861

Cert. No. N - 0082

Certificate of Inspection

This is to Certify That

774 CONVERY BLVD. PERTH AMBOY, N.J. 08861

Has been inspected and found to be in compliance
with the New Jersey Uniform Fire Code.

Vito J. Smith
Fire Official

Reg. No. NA

Use Code 1 - COMMERCIAL / 1 UNIT

THIS CERTIFICATE MUST BE PLACED IN A CONSPICUOUS LOCATION AT THE ABOVE PROPERTY

Date Issued: June 5, 2007

BLOCK: 379.05 LOT (S): 14

CITY OF PERTH AMBOY
Department of Code Enforcement
375 New Brunswick Avenue
Perth Amboy, New Jersey 08861

Cert. No. 8585 - 09

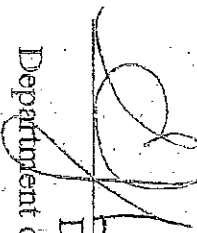
Certificate of Code Compliance

This is to Certify that

774 Convery Blvd.

block: 379.05 Lot(s): 14, 15 - 16

has been inspected and found to be in compliance
with the Code of the City of Perth Amboy



Director
Department of Code Enforcement

DATE ISSUED: September 29, 2009

OCCUPANCY: Commercial Restaurant

ORDINANCE NO. 569-91

ZONE: C-1

FIRE PREVENTION BUREAU

CITY OF PERTH AMBOY

375 New Brunswick Avenue
Perth Amboy, NJ 08861

Cert. No. N - 0361

Certificate of Inspection

This is to Certify That

774 CONVERY BLVD. PERTH AMBOY, N.J. 08861

Has been inspected and found to be in compliance
with the New Jersey Uniform Fire Code.

[Signature]
Fire Official

Reg. No. N/A

Use Code 1 Commercial Unit

THIS CERTIFICATE MUST BE PLACED IN A CONSPICUOUS LOCATION AT THE ABOVE PROPERTY

Valid for one year

Date Issued: September 25, 2009

Block: 379.05

Lot (s): 14

ccc

CITY OF PERTH AMBOY

Department of Code Enforcement
375 New Brunswick Ave.
Perth Amboy, New Jersey 08861

Cert No. 9181-11

Certificate of Code Compliance
This is to Certify that

774 Convery Blvd

Block: 379.05 Lot(s): 14/15, 16

has been inspected and found to be in compliance
with the Code of the City of Perth Amboy

Director

Department of Code Enforcement

DATE ISSUED: 6/10/2011

OCCUPANCY: Commercial- Restaurant

ORDINANCE NO. 569-91

ZONE: C-1

FIRE PREVENTION BUREAU

CITY OF PERTH AMBOY

375 New Brunswick Avenue
Perth Amboy, NJ 08861

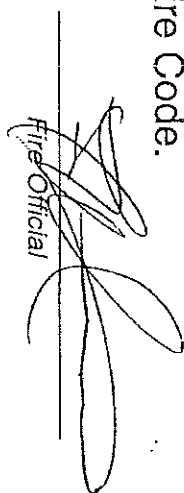
Cert. No. N - 0161

Certificate of Inspection

This is to Certify That

~~GOLDEN CITY RESTAURANT / 774 CONVEYRY BLVD. PERTH AMBOY N.J. 08861~~

Has been inspected and found to be in compliance
with the New Jersey Uniform Fire Code.


Fire Official

Reg. No. N/A

Use Code 1 Commercial

THIS CERTIFICATE MUST BE PLACED IN A CONSPICUOUS LOCATION AT THE ABOVE PROPERTY

Valid for one year

Date Issued: June 7, 2011

Block: 379.05 Lot: 14

CITY OF PERTH AMBOY
Department of Code Enforcement
375 New Brunswick Avenue
Perth Amboy, New Jersey 08861

Cert. No. 1068 - 15

Certificate of Code Compliance

This is to certify that

774 Convery Blvd.

Block: 379.05 Lot(s): 14 - 16

has been inspected and found to be in compliance
with the Code of the City of Perth Amboy



Director
Department of Code Enforcement

DATE ISSUED: July 24, 2015

OCCUPANCY: Retail - Car Dealership Used

ORDINANCE NO. 569-91

CITY ZONE / FLOOD ZONE: C - 1 / X

FIRE PREVENTION BUREAU
CITY OF PERTH AMBOY
375 New Brunswick Avenue
Perth Amboy, NJ 08861

Cert. No. _____ N-0313

Certificate of Inspection

This is to Certify That

EMPIRE AUTO GALLERY / 774 CONVERY BLVD. PERTH AMBOY N.J. 08861

Has been inspected and found to be in compliance
with the New Jersey Uniform Fire Code.

Fire Official

Reg. No. _____ N/A _____ Use Code _____ 1 Commercial unit - CCC

THIS CERTIFICATE MUST BE PLACED IN A CONSPICUOUS LOCATION AT THE ABOVE PROPERTY
Valid for one year

Date Issued: July 23, 2015

Block: 379.05 Lot(s): 14

CITY OF PERTH AMBOY

Department of Code Enforcement
375 New Brunswick Ave.
Perth Amboy, New Jersey 08861

Cert. No. 10316-14

Certificate of Code Compliance
This is to Certify that

774 Convery Blvd. Block: 379.05 Lot(s): 14, 15, 16
has been inspected and found to be in compliance
with the Code of the City of Perth Amboy


Director
Department of Code Enforcement

DATE ISSUED: August 27, 2014

OCCUPANCY: One Family Dwelling

ORDINANCE NO. 569-91

ZONE: C-1

FIRE PREVENTION BUREAU

CITY OF PERTH AMBOY

375 New Brunswick Avenue
Perth Amboy, NJ 08861

Cert. No. N-0496

Certificate of Inspection

This is to Certify That

NEW JAPANESE REST / 774 CONVERY BLVD. PERTH AMBOY, N. J. 08861

Has been inspected and found to be in compliance
with the New Jersey Uniform Fire Code.

(Signature)
Fire Official

Reg. No. N/A

Use Code I COMMERCIAL CCC

THIS CERTIFICATE MUST BE PLACED IN A CONSPICUOUS LOCATION AT THE ABOVE PROPERTY

Valid for one year

Date Issued: **AUGUST 21, 2014**

Block: 379.05 Lot (s): 14



CONSTRUCTION PERMIT

Date Issued 12/18/2015
Control # C-42577
Permit # 15-1092

IDENTIFICATION Block: 379.05 Lot: 14 Qualifier _____
Work Site Location: 774 CONVERY BLVD. Perth Amboy, NJ 08861 Contractor Sign Empire
Address 167 Gould Ave Paterson NJ 07503
Owner in Fee ROROS, CYNTHIA & D'ANIELLO, TOBIA
774 CONVERY BLVD. Perth Amboy NJ 08861 Telephone: _____
Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ Federal Employee No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

SIGN INSTALLATION WITH ELEC

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 \$5,301

Construction Official _____

Date _____

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$318
Electrical	\$27
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$11
CO Fee	
Other	\$11
Total	\$367
Check No.	1887/88
Cash	\$0
Credit	\$0
Collected By	Mildred Ramos

REQUIRED INSPECTIONS

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

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

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

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

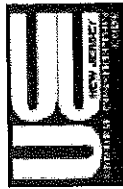
Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

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

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

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

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



BUILDING SUBCODE TECHNICAL SECTION

A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000
Block 379.05 Lot 14 Qualification Code _____
Work Site Location: 774 CONVERY BLVD., Perth Amboy, NJ 08861

Owner in Fee: BOROS, CYNTHIA & DANIELLO, IOBIA
Address 774 CONVERY BLVD., Perth Amboy NJ 08861
Tel. _____ Email _____
Contractor: Sign Emplate
Address 167 Gould Ave Paterson NJ 07503
Tel. _____ Fax _____
Contractor License No. or, if new home, Bldrs Reg. No. _____ Exp. _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Date	Type:	Failure	Failure	Approval
☐ No Plan Required	_____	Footing	_____	_____	Initial
☐ All	_____	Footing Bonding	_____	_____	_____
☐ Footing/Foundation	_____	Foundation	_____	_____	_____
☐ Struct/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	_____	_____	_____
B. BUILDING CHARACTERISTICS	_____	Barrier-Free	_____	_____	_____
Use Group _____	Present _____	Proposed R-5 _____	If Industrial Building: _____	State Approved _____	HUD _____
Constr. Class _____	Present _____	Proposed _____	_____	_____	_____
Number of Stories _____	_____	_____	_____	_____	_____
Height of Structure _____	_____	_____	_____	_____	_____
Area - Largest Floor _____	_____	_____	_____	_____	_____
New Bldg. Area / All Floors _____	_____	_____	_____	_____	_____
Volume of New Structure _____	_____	_____	_____	_____	_____
Total Land Area Disturbed _____	_____	_____	_____	_____	_____

B. BUILDING CHARACTERISTICS
Use Group _____ Present _____
Constr. Class _____ Present _____
Number of Stories _____
Height of Structure _____
Area - Largest Floor _____
New Bldg. Area / All Floors _____
Volume of New Structure _____
Total Land Area Disturbed _____

Est. Cost of Bldg. Work:
1. New Bldg. _____
2. Rehabilitation _____
3. Total (1+2) \$5,001

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

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

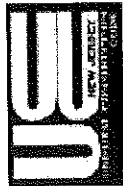
C. CERTIFICATION IN LIEU OF OATH

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

Signature _____
Print Name Here: _____
D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
SIGN INSTALLATION WITH ELEC.

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	_____
☐ Addition	_____
☐ Rehabilitation	_____
☐ Roofing	_____
☐ Siding	_____
☐ Fence _____ Height (exceeds 6')	_____
☒ Sign _____ Sq. Ft. <u>106</u>	<u>\$127</u>
☐ Pool	_____
☐ Retaining Wall _____ Sq. Ft.	_____
☐ Asbestos Abatement Subchapter 8	_____
☐ Lead Haz Abatement NJAC 5:17	_____
☐ Radon Remediation	_____
☐ Other _____	_____
☐ Demolition	_____
Administrative Surcharge _____	
Minimum Fee _____	
State Permit Surcharge Fee <u>\$10</u>	
TOTAL FEE <u>\$327</u>	



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received 9/24/2015
Date Issued 12/18/2015
Control # C-42577
Permit # 15-1092

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Contr ☐ Certifd Landscape Irrigation Contr ☐ Exempt Applicant
D. TECHNICAL SITE DATA

DESCRIPTION OF WORK SIGN INSTALLATION WITH ELEC.

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
<u>1</u>		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	<u>\$45</u>
<u>1</u>		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge \$11
Minimum Fee _____
State Permit Surcharge Fee \$1
TOTAL FEE \$39

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

Block 379.05 Lot 14 Qualification Code _____
Work Site Location: 774 CONVERY BLVD. Perth Amboy, NJ 08861

Owner in Fee: ROBOS, CYNTHIA & D'ANIELLO, IOBIA
Address 774 CONVERY BLVD. Perth Amboy NJ 08861

Tel. _____ Email _____

Contractor: Sign Empire
Address 167 Gould Ave. Paterson NJ 07503

Tel. _____ Email _____
Fax. _____

Lic No. _____ Exp. Date _____

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

Federal Employee No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group _____ Present _____ Proposed R-5

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Estimated Cost of Electrical Work \$300

JOB SUMMARY (Office Use Only)

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



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 379.05 Lot 14 Qualification Code

Work Site Location: 774 CONVERY BLVD PERTH AMBOY, NJ

Owner in Fee: MOURAD FARAH

Address 774 CONVERY BLVD PERTH AMBOY NJ 08861 Email

Tel. (732) 442-9399

Contractor: Tel. Email

Address NJ Email

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

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Expiration Date:

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

Federal Employee No. Fax.

B. FIRE PROTECTION CHARACTERISTICS Fuel Storage Tank:

Use Group Present Proposed R-5 Fuel Type Flammable or Combustible Capacity

Constr. Class Present Proposed

Heating Systems: New or Modification to Existing Fire Alarm System: New or Existing

or Conversion or Replacement Location of Panel:

Type: Gas Oil Electric Solar New or Existing

Other Location of Main Control Valve:

Location:

Total Cost of Fire Protection Work

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

Date Received 5/19/2005
Control # 4492
Date Issued 5/24/2005
Permit # 20050561

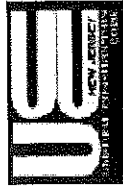
C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

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

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK
APPLIANCE CHANGE/NOZZLE CHANGE
Water Supply Source
Method of Alarm/Suppression System Supervision

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

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	
TOTAL FEE	\$92



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 379.05 Lot 14 Qualification Code

Work Site Location: 774 CONVEY BLVD. PERTH AMBOY, NJ

Owner in Fee: BLUE FLAME RESTAURANT

Address 774 CONVEY BLVD. PERTH AMBOY NJ 08861

Tel. (201) 873-7225 Email

Contractor: BLUE FLAME RESTAURANT

Address 774 CONVEY BLVD. PERTH AMBOY NJ 08861

Tel. (201) 873-7225 Fax

Contractor License No. or, if new home, Bldrs Reg. No. Exp.

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

Federal Emp. ID No.

JOB SUMMARY (Office Use Only)

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

B. BUILDING CHARACTERISTICS

Use Group	Present	B	Proposed		If Industrial Building:	
Constr. Class	Present		Proposed		State Approved	
Number of Stories					HUD	
Height of Structure					Est. Cost of Bldg. Work:	
Area - Largest Floor					1. New Bldg.	
New Bldg. Area / All Floors					2. Rehabilitation	\$4,800
Volume of New Structure					3. Total (1+2)	
Total Land Area Disturbed						

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

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

Date Received 3/9/2006
Control # 6801
Date Issued 3/31/2006
Permit # 20060374

C. CERTIFICATION IN LIEU OF OATH

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

Signature

Print Name Here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

SIGN

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 40sqft. sign
- ☐ Demolition

FEE (Office Use Only)

Administrative Surcharge \$24
Minimum Fee
State Permit Surcharge Fee \$6
TOTAL FEE \$190



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 379.05 Lot 14 Qualification Code _____

Work Site Location: 774 CONVERY BLVD. PERTHAMBQY, NJ _____

Owner in Fee: GOLDEN CITY RESTAURANT _____

Address 774 CONVERY BLVD PERTHAMBQY NJ 08861 _____

Tel. (732) 826-2388 Email _____

Contractor: _____

Address NJ Email _____

Tel. _____ Fax. _____

Contractor License No. or, if new home, Bldrs Reg. No. _____ Exp. _____

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

Federal Emp. ID No. _____

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Date	Type:	Failure	Approval	Initial
☐ No Plan Required	_____	Footing	_____	_____	_____
☐ All	_____	Footing Bonding	_____	_____	_____
☐ Footing/Foundation	_____	Foundation	_____	_____	_____
☐ Struct/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 R-5 _____

Constr. Class Present _____

Number 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. Rehabilitation \$8,000 _____

3. Total (1+2) _____

Date Received 11/15/2010
Control # 16793
Date Issued 12/7/2010
Permit # 20101078

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

Print Name Here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

CONNECT EXISTING WIRE TO SIGN

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 \$89
Minimum Fee
State Permit Surcharge Fee \$14
TOTAL FEE \$398



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 379.05 Lot 14 Qualification Code _____
Work Site Location: 774 CONVEY BLVD. PERTHAMBOY, NJ

Owner in Fee: GOLDEN CITY RESTAURANT
Address 774 CONVEY BLVD. PERTHAMBOY NJ 08861

Tel. (732) 826-2388 Email _____
Contractor: GOLDEN CITY RESTAURANT
Address 774 CONVEY BLVD. PERTHAMBOY NJ 08861

Tel. (732) 826-2388 Fax _____
Lic No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Employee No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group _____ Present _____ Proposed R-5
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Estimated Cost of Electrical Work \$150

JOB SUMMARY (Office Use Only)

PLAN REVIEW		DATES (MONTH/DAY)	
No Plan Required	Initial	Failure	Approval
☐ Partial/Underslab Approved			
☐ Partial Underslab Utilities Approved			
Date: _____ by: _____			
☐ Electrical Plans Approved			
Date: _____ by: _____			
Joint Plan Review Required			
☐ Building ☐ Plumbing			
☐ Fire ☐ Elevator			
SUBCODE APPROVAL for PERMIT			
Date: _____			
Approved by: _____			
SUBCODE APPROVAL for CERTIFICATE			
☐ CO ☐ CCO ☐ CA			
Date: _____			
Approved by: _____			

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

U.C.C.F.120 (rev. 11/09)

Date Received 11/15/2010
Date Issued 12/7/2010
Control # 16793
Permit # 20101078

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Contr ☐ Certif'd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
CONNECT EXISTING WIRE TO SIGN

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
<u>1</u>		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
<u>1</u>		TOTAL NUMBERS	
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		KW Baseboard Heat	
<u>1</u>	<u>2</u>	HP Motors 1/+ HP	<u>\$13</u>
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge \$14
Minimum Fee _____
State Permit Surcharge Fee \$14
TOTAL FEE \$74



CONSTRUCTION PERMIT

Date Issued 9/12/2011
Control # 18035
Permit # 20110763

IDENTIFICATION Block: 379.05 Lot: 14 Qualifier _____
Work Site Location: 774 CONVERY BLVD. PERTH AMBOY, NJ Contractor HAPPY SIGN INC.
Address 338 N 10TH ST. PHILADELPHIA NJ 19145
Owner in Fee ROROS CYNTHIA & DANIELLO TOBIA
54 BLUEGRASS BLVD. BRANCHBURG NJ 08876 Telephone: (215) 238-2688
Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. _____
Telephone: _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

REPLACE CHANNEL LETTER SIGN.

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 _____

Date _____

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$200
Electrical	\$46
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$6
CO Fee	
Other	\$14
Total	\$266
Check No.	2 cks
Cash	\$0
Credit	\$0
Collected By	mew

REQUIRED INSPECTIONS

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

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

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

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

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

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

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

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

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



BUILDING SUBCODE TECHNICAL SECTION

A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000
Block 379.05 Lot 14 Qualification Code _____
Work Site Location: 774 CONVEY BLVD. PERTH AMBOY, NJ

Owner in Fee: ROROS CYNTHIA & D ANIELLO IOBIA
Address 54 BLUEGRASS BLVD. BRANCHBURG NJ 08876
Tel. _____ Email _____
Contractor: _____
Address NJ Email _____ Fax _____
Tel. _____ Exp. _____
Contractor License No. or, if new home, Bldrs Reg. No. _____
Home Improvement Contractor Registration No. or Exemption Reason(s) (if applicable): _____
Federal Emp. ID No. _____

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

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

B. BUILDING CHARACTERISTICS

Use Group Present A-2 Proposed _____ If Industrial Building: _____
Constr. Class Present Proposed _____ State Approved _____ HUD _____

Number 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. Rehabilitation \$3,000
3. Total (1+2) _____

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

Print Name Here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

REPLACE CHANNEL LETTER SIGN.

TYPE OF WORK

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

FEE (Office Use Only)

Administrative Surcharge
Minimum Fee
State Permit Surcharge Fee
TOTAL FEE



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 379.05 Lot 14 Qualification Code _____
Work Site Location: 774 CONVERY BLVD. PERTH AMBOY, NJ

Owner in Fee: ROROS, CYNTHIA & DANIELLO IOBIA
Address 54 BLUEGRASS BLVD. BRANCHBURG, NJ 08876

Tel. _____
Contractor: _____
Address NJ Email _____

Tel. _____
Lic No. _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Employee No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group _____ Present _____ Proposed A-2
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Estimated Cost of Electrical Work \$500

JOB SUMMARY (Office Use Only)

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

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

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

Date Received 8/4/2011
Date Issued 9/12/2011
Control # 18035
Permit # 20110763

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Contr ☐ Certif'd Landscape Irrigation Contr ☐ Exempt Applicant
D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
REPLACE CHANNEL LETTER SIGN.

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

Administrative Surcharge \$13
Minimum Fee \$14
State Permit Surcharge Fee \$6
TOTAL FEE \$66



CONSTRUCTION PERMIT

Date Issued 9/10/2014
Control # 23793
Permit # 20140764

IDENTIFICATION Block: 379.05 Lot: 14 Qualifier _____
Work Site Location: 774 CONVERY BLVD. PERTH AMBOY, NJ Contractor ROROS CYNTHIA & D ANIELLO TOBIA
Address 54 BLUEGRASS BLVD. BRANCHBURG NJ 08876
Owner in Fee ROROS CYNTHIA & D ANIELLO TOBIA
54 BLUEGRASS BLVD. BRANCHBURG NJ 08876 Telephone: (908) 256-4090
Telephone: (908) 256-4090 Lic. No. or Bldrs. Reg. No. _____
Federal Employee. No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

REBUILD DECK

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 \$4,000

PAYMENTS (Office Use Only)

Building	\$100
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$7
CO Fee	
Other	\$0
Total	\$107
Check No.	5311/5300
Cash	\$0
Credit	\$0
Collected By	mb

Construction Official _____

Date _____

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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

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

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

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

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

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



BUILDING SUBCODE TECHNICAL SECTION

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

Block 379.05 Lot 14 Qualification Code _____
Work Site Location: 774 CONVERY BLVD. PERTH AMBOY, NJ _____

Owner in Fee: ROROS CYNTHIA & DANIELLO TOBIA
Address 54 BLUEGRASS BLVD. BRANCHBURG NJ 08876
Tel. (908) 256-4090 Email _____
Contractor: ROROS CYNTHIA & DANIELLO TOBIA
Address 54 BLUEGRASS BLVD. BRANCHBURG NJ 08876
Tel. (908) 256-4090 Fax _____
Contractor License No. or, if new home, Bids Reg. No. _____ Exp. _____
Home improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Date	Type:	Failure	Failure	Approval
☐ No Plan Required	_____	Footings	_____	_____	Initial
☐ All	_____	Footings Bonding	_____	_____	_____
☐ Footing/Foundation	_____	Foundation	_____	_____	_____
☐ Struct/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	_____	_____	_____
☐ CO ☐ CCO ☐ CA	_____	Mechanical	_____	_____	_____
Date: _____	_____	TCO	_____	_____	_____
Approved by: _____	_____	Other	_____	_____	_____
	_____	Final	_____	_____	_____
	_____	Barrier-Free	_____	_____	_____

B. BUILDING CHARACTERISTICS

Use Group Present R-5 _____ Proposed _____ If Industrial Building: _____

Constr. Class Present _____ Proposed _____ State Approved _____ HUD _____

Number 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. Rehabilitation \$4,000

3. Total (1+2) _____

U.C.C.F-110 (rev. 11/09)

Date Received 8/20/2014
Control # 23793
Date Issued 9/10/2014
Permit # 20140764

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

Print Name Here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

REBUILD DECK

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 REHAB
☐ Demolition

FEE (Office Use Only)

Administrative Surcharge _____
Minimum Fee _____
State Permit Surcharge Fee \$7
TOTAL FEE \$107

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