PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 7/12/93.
Date Issued 7/15/93.
Control #
Permit # 93-0412.

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

Block 10 Lot 4
Work Site Location 3107 Route 22
Somerville, NJ 08876
Owner in Fee Frank Chillemi
Address 3107 Route 22
Somerville, New Jersey
Tele. (908) 526-0041
Contractor Low Cost Plumbing & Heating
Address 720 old York Rd. Branchburg 08876
Tele. (908) 704-9873
Lic. No. 8256
Federal Emp. No. _____ or Social Security No. 150-66-3546-J

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____
Water Service Size 3/4" Copper or 1" CTS Plastic
Estimated Cost of Plumbing Work $ 900.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[ ] Plumb. Plans Approved
Date: 7-12-93
Approved by: JJK

SUBCODE APPROVAL:
[ ] CO [ ] CCO [X] CA
Approved by: JJK
Date: 7-21-93

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water			7-21-93	JJK
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

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

Signature-Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List 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	
	Gas Piping	
	Fuel Oil Piping	
	Water Heater	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
+	Water Service Connection	40-
	Gas Service Connection	
	Active Solar System	
	Other	

Administrative Surcharge $ _____
Paid [✓] Check #0948 Minimum Fee $ 40-
Collected by: JOT. TOTAL $ _____

U.C.C. Form F-130A 1 White = Office Copy 2 Canary = Office Copy 3 Pink = Applicant Copy 4 Hard = Inspector Copy

CERTIFICATE

Date Issued 3/26/90
Control #
Permit # 8540

IDENTIFICATION

Block 10 Lot 4
Work Site Location 3107 Rt. #22

Owner in Fee CHELLEMI, Frank
Address 3107 Rt. #22
Somerville, N.J. 08876
Tele. (201) 526-0041
Contractor
Address

Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No.
Use Group R3A
Maximum Live Load
Description of Work/Use:

Install Propane gas Fireplace Stove

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

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ **CERTIFICATE OF OCCUPANCY**

☒ **CERTIFICATE OF APPROVAL**

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

☐ **CERTIFICATE OF CONTINUED OCCUPANCY**

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

☐ **TEMPORARY CERTIFICATE OF OCCUPANCY**

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

Fee $
Paid [ ] Check No.
Collected by:

CONSTRUCTION OFFICIAL

U.C.C. Form F-260A

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

PRO 123

TOWNSHIP OF BRANCHBURG
1077 Route #202
Branchburg, N.J. 08876
(908) 526-1300 x 228

NEW JERSEY UNIFORM CONSTRUCTION CODE

CERTIFICATE

Date Issued 12/18/98
Control #
Permit # 98-0696

IDENTIFICATION

Block 10 Lot 4
Work Site Location 3107 Route 22

Owner in Fee/Occupant FRANK CHILLEMI
Address 3107 Route 22
Somerville, NJ 08876

Tele. ( )
Contractor Modern Times
Address 13 Gates Road
Somrville, NJ 08876
Tele. ( ) 469-4740 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2516586

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

SIDING/ROOF

☐ **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 _____ , 19_____ or the owner will be subject to fine or order to vacate:

☐ **CERTIFICATE OF CLEARANCE — LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:

[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (_____ years); see file

☐ **CERTIFICATE OF CONTINUED OCCUPANCY**

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

☐ **CERTIFICATE OF COMPLIANCE**

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

John P. Daniels

CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

UCC/PRO F-260 (REV 3/96)
Professional Printing
(609) 468-7933

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