

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 04/28/93
Control #
Permit # 930974

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 22.05 Lot 19 Qual _____

Work Site Location 145 MAPLEWOOD AVE

Owner in Fee GIACOBEE HORACE WF

Address 145 MAPLEWOOD AVE 7013

Telephone CLIFTON, NJ 7013

Contractor SHAMROCK DESIGN

Address 106 MC COSH RD
CLIFTON, NJ

Telephone (973) 778-7400

Lic. No. or Bldrs. Reg. No. 05106

Federal Emp. No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ROOFING

PAYMENTS (Office Use Only)

Building	40
Electrical	0
Plumbing	0
Fire Protection	0
Mechanical	0
Elevator Devices	0
Other	
DCA State Permit Fee	2
Cert. of Occupancy	15
Other	
Total	57

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 \$ 2,000

Check No.

Cash

Collected By

X

RMV

04/28/93

Date

Construction Official

CITY OF CLIFTON
CLIFTON, NJ 07013
973-470-5809

Date Issued 12/08/05
Control #
Permit # 055330

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 22.05 Lot 19 Qual _____
Work Site Location 145 MAPLEWOOD AVE HWH
Owner in Fee GIACOBEE HORACE WF
Address 145 MAPLEWOOD AVE
CLIFTON, NJ 07013-
Telephone _____

Contractor
Address

Telephone ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

Is hereby granted permission to perform the following work:

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

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 \$ _____ 0

Construction Official _____

12/08/05

Date

PAYMENTS (Office Use Only)
Building _____ 0
Electrical _____ 0
Plumbing _____ 0
Fire Protection _____ 0
Mechanical _____ 0
Elevator Devices _____ 0
Other _____
DCA State Permit Fee _____ 0
Cert. of Occupancy _____ 0
Other _____
Total _____ 0
Check No. _____
Cash _____
Collected By _____

Date Issued 12/16/11
Control #
Permit # 114168

IDENTIFICATION	Block 22.05	Lot 19	Qual
Work Site Location	145 MAPLEWOOD AVE		
Owner in Fee Address	GIACOBBE HORACE WF 145 MAPLEWOOD AVE		
Telephone	CLIFTON, NJ 07013-		
Contractor Address	R.E.N. REMODELING 18 SEGER AVE		
Telephone	CLIFTON, NJ 07011- (973) 773-1978		
Lic. No.	or Bldrs. Reg. No.	13VH08895400	
Federal Emp. No.			

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

DCA State Permit Fee	1
Cert. of Occupancy	0
Other	
Total	61
Check No.	
Cash	X
Collected By	SS

Estimated Cost of Work	\$	850

12/16/11