OPRA 2024 - 240

Property History

101 NO MAIN ST

Block/Lot **31/1.02**
Owner **SSK FUEL CORPORATION**
73 LINWOOD TER
CLIFTON, NJ 07012

Log of Actions, Letters and Contacts

Date	Type	Name	Summary

(None on File)

Construction Permits

Permit No.	Date	Description (May be Shortened)	Subcodes	Cert Date	Est Value
200600301	9/18/06	ROOF Closed	BLD		1500
201200086	3/27/12	HOT WATER HEATER	ELE PLU		950
202400003	1/03/24	Remove awning over pumps	BLD		2000
202400058	2/29/24	UST Removal 2 - 6,000 & 1 - 8,000UST Installation 2 - 12,000	FIR		150000
202400229	9/16/24	Install 2 New FuelTanks and Lines	BLD ELE FIR PLU		327000

Planning/Zoning Applications

Applic No.	Type	Venue	Date Applic	Status	Project	Applicant

(None on File)

Construction Permit Inspections

Date	Permit No.	Type	Subcode	P/F	By	Result(May be Shortened)

(None on File)

Code Enforcement & Zoning Inspections

Insp#	Date	P/F	Type	Regist#	Unit	Inspctr	Zone	Z-Type	Board Action	Apprvl Type/Date	Comment (May be Shortened)
							If Zoning-Related				
74	6/21/07	F	INS	0		MGM					
1230	5/23/13	F	INS	0		MGM					
2461	3/12/20	F	INS	0		MGM					
265	2/15/08	A	PER	0	105		B-1		Y	P 2/15/08	No vehicles permitted to be parked or st

Tickets Issued

Ticket No.	Date	Inspector	Violation	Hearing	Disposition	Fine w Costs

(None on File)

Photos

(None on File)

Borough of Milltown
39 Washingotn Avenue
Milltown, NJ 08850
(732)828-2100 FAX *(732)342-7105*

9/23/24

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 1/2/24

Permit # 24-003

IDENTIFICATION Block 31 Lot 1.02 Qualification Code

Work Site Location 101 N Main St Milltown, NJ

Owner in Fee SSK Inc/Corp

Address 78 Linwood Ter Clifton

Tel. ( )

Contractor BR+GL Construction

Address 111 N Main St Milltown 08850

Tel. (732) 546-1111

Lic. No. or Bldrs. Reg. No. 13VH09102000

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

remove awning over pumps

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 $ 2000

Thomas Paem
Construction Official

12/21/23
Date

PAYMENTS (Office Use Only)

Building	65.-
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	4.-
Cert. of Occupancy	
Other	
Total	$69.-
Check No.	6469
Cash	
Collected by	BG

(see reverse side)

emailed 1/2/24

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 1/2/24

Date Issued / Permit # 24003

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

Block 21 Lot 4 Qualification Code

Work Site Location 1 Hudson St

Owner in Fee:

Tel. ( ) e-mail

Address (street / municipality / zip code)

Contractor: Tel. ( )

Address e-mail

Contractor License No. or Builder Registration No. Exp. Date

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

Federal Emp. ID No. [redacted] FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior	12/14/23	
[ ] 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				

B. BUILDING CHARACTERISTICS

Use Group Present 1 Proposed R

Constr. Class Present 5B Proposed 5B

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

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $ 24
3. Total (1+ 2) $

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Remove awning over pumps

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)

$ 65

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

U.C.C. F110
(rev. 12/07)

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

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 2/29/24

Permit # 24-058

IDENTIFICATION Block 31 Lot 1.02 Qualification Code

Work Site Location 101 No. Main Street Milltown, NJ 08850

Owner in Fee Harman Singh

Address Same as above

Tel. [redacted]

Contractor Highlander Enviromental

Address 7 Ivy Street Pompton Lakes, NJ 07442

Tel. (973) 903-3820

Lic. No. or Bldrs. Reg. No. 86-372 22252 US937123

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
UST Removal 2-6000 + 1-8000
UST Installation 2-12000

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 $ 150,000

Thomas Paum
Construction Official

2/27/24
Date

PAYMENTS (Office Use Only)

Building	
Electrical	
Plumbing	
Fire Protection	195
Elevator Devices	
Other	
DCA State Permit Fee	
Cert. of Occupancy	
Other	
Total	195
Check No.	1084
Cash	
Collected by	BJ

(see reverse side)

Spoke to Bret 2/28/24 MC

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

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 24-058
Permit #

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

Block _____ Lot _____ Qualification Code _____

Work Site Location 101 MAIN STREET NORTH MILLTOWN NJ 08850

Owner in Fee: NARMAN SINGH

Tel. [redacted] e-mail [redacted]

Address 101 MAIN STREET NORTH MILLTOWN NJ 08850

Contractor: (street) HIGHLANDER ENVIRONMENTAL (municipality) Tel. 973 902-5720

Address 7 IVY STREET 07462 (zip code) e-mail [redacted]
POMPTON LAKES NJ

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

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

Fire Alarm Contractor No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason NJDEP US 937123

Federal Emp. ID No. 86-3722254 FAX: ____ N/A

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present X Proposed _____

Constr. Class: Present X Proposed _____

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [X] Other GASOLINE

Location: SIDE OF BUILDING

Total Cost of Fire Protection Work $ _____

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [X] Combustible
Capacity 2-6000 & 1-8000 GALLON

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel: _____

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: _____ Approved by: _____
[ ] Fire Protection Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
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.

Applicant/Contractor sign here: [signature]

Print name here: Ricky Fitzgerald

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

DESCRIPTION OF WORK: REMOVE 2 6000 GALLON & 1 8000 GALLON UST'S INSTALL 2 12000 GALLON UST'S

Water Supply Source INSTALL 2 12000 GALLON UST'S

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, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices _____		
TOTAL	0	196
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		
CO_2 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 UST REMOVAL	3	
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

U.C.C. F140 (rev. 02/11) Internet version

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

9/16/24

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 9/16/24
Permit # 24-229

IDENTIFICATION Block 31 Lot 1.02
Work Site Location 101 No Main Street Milltown, NJ 08850
Owner in Fee Harman Singh
Address Same as above
Tel. [redacted]

Qualification Code
Contractor Boulder Petroleum LLC, unit 5
Address 111 Squankum Yellowbrook Rd Farmingdale, NJ 07727
Tel. (732) 751-0153
Lic. No. or Bldrs. Reg. No. 204190049 US291922

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: Install 2 new D/W fuel tanks + lines

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 $

Thomas Pasco 9/4/24
Construction Official Date

PAYMENTS (Office Use Only)	
Building	6,626.–
Electrical	225.–
Plumbing	950.–
Fire Protection	400.–
Elevator Devices	
Other	
DCA State Permit Fee	~~$~~ 621.–
Cert. of Occupancy	
Other	~~$8217.–~~
Total	$8822.00
Check No.	1007
Cash	
Collected by	BJ

(see reverse side) emailed

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

Reorder at: ucc.allegramarmora.com • (609) 390-1400 • Allegra Marketing, Print & Mail - Marmora, NJ

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 9/16/24
Date Issued / Permit # 24-229

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

Block _____ Lot _____ Qualification Code _____
Work Site Location 101 North Main Street, Milltown, NJ 08850

Owner in Fee: Harman Singh
Tel. [redacted] e-mail [redacted]
Address 101 North Main Street, Milltown NJ 08850
(street / municipality / zip code)
Contractor: Boulder Petroleum, LLC Tel. (732) 751-0153
Address 111 Squankim Yellowbrook Road, e-mail boulderpetrollc@comcast.net
Unit 5, Farmingdale, NJ 07727
Contractor License No. or Builder Registration No. US291922 Exp. Date 07/31/2027
Home Improvement Contractor Registration No. or Exemption Reason _____
Federal Emp. ID No [redacted] FAX: (732) 751-0154

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[X] Exterior	9/4/24	AT
[ ] 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:	Dates (Month/Day) Failure	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				

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. $ 125,000
2. Rehabilitation $ _____
3. Total (1+ 2) $ 0

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

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: Anthony Tedeschi
Print name here: Anthony Tedeschi

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK Install 2- new D/W Fuel Tanks, New D/W Product Lines, New Canopy w/ Footings New Electric, New concrete Drive & Tank mats

5 X $40 = $200
-5
170
÷ 5
165

5 X 40 = $ 200
5 X 25 = $ 125
165 X 20 = $3,300
TOTAL 6,626

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
[X] Other Fuel Tanks & Lines
[ ] Demolition

FEE (Office Use Only)
$ $6,626

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 9/16/24
Control #
Date Issued
Permit # 24-229

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

Block _____ Lot _____ Qualification Code _____

Work Site Location 101 North Main Street Milltown NJ 08850

Owner in Fee: Harman Singh

Tel. [redacted] e-mail [redacted]

Address 101 North Main Street Milltown NJ 08850
(Street, municipality, zip code)

Contractor: Robert Dzwonek Tel. 215 391 8754

Address 9 Sunflower Rd e-mail DZElectrical@aol.com
Levittown PA 19056

Contractor License No. 13976 Exp. Date 2027

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. [redacted] FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ 22,000

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: Robert Dzwonek

Print name here: Robert Dzwonek

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Pipe up new fuel tanks, canopy & Dispensers

QTY.	SIZE	ITEMS	FEE (Office Use Only)
6		Lighting Fixtures canopy	
		Receptacles	
1		~~Switches~~ Kiosk	
		~~Detectors~~	
		Light Poles	
3	1.5	Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
8		Low Voltage Sensors	
8		TOTAL NUMBERS	$ 75
		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	
3		Fuel Dispensers	150
		Administrative Surcharge	$ 225
		Minimum Fee	$
		State Permit Surcharge Fee	$
		TOTAL FEE	$

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: _____ Approved by: _____

[ ] Electric Plans Approved
Date: _____ Approved by: _____

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 9/23/24
Approved by: [signature]

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____
Annual Pool Inspection _____
Date of Grounding and Bonding Certification _____

U.C.C. F120 (rev. 11/05)
Internet version

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

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 9/16/24

Date Issued / Permit # 24-229

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

Block _____ Lot _____ Qualification Code _____

Work Site Location 101 North Main Street, Milltown, NJ 08850

Owner in Fee: Harman Singh

Tel. [redacted] e-mail [redacted]

Address 101 North Main Street (street) Milltown, NJ (municipality) 08850 (zip code)

Contractor: Boulder Petroleum, LLC Tel. (732) 751-0153

Address 111 Squankum Yellowbrook Road, e-mail boulderpetrollc@comcast.ne

Unit 5, Farmingdale, NJ 07727

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

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

Fire Alarm Contractor No. US291922 Exp. Date 07/31/2027

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No [redacted] FAX: (732) 751-0154

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other _____

Location: _____

Total Cost of Fire Protection Work $ 65,000

Fuel Storage Tank:
Fuel Type: [X] Flammable OR [X] Combustible
Capacity 24,000

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel: _____

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing

Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: _____ Approved by: _____
[ ] Fire Protection Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 9/4/24
Approved by: M

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
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.

Applicant/Contractor sign here: Anthony Tedeschi

Print name here: Anthony Tedeschi

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

DESCRIPTION OF WORK: 2-New Fuel Tanks & Fuel Lines

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, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices _____		
TOTAL	0	
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		
CO_2 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 2-Fuel Tanks & Lines	(2)	$200
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

TOTAL 2 TANKS M $200 + $200 = $400

U.C.C. F140 (rev. 02/11) Internet version

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

PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 9/16/24

Date Issued / Permit # 24-229

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

Block _____ Lot _____ Qualification Code _____

Work Site Location 101 North Main Street, Milltown, NJ 08850

Owner in Fee: Harman Singh

Tel. [redacted] e-mail [redacted]

Address 101 North Main Street (street) Milltown, NJ (municipality) 08850 (zip code)

Contractor: Boulder Petroleum, LLC Tel. (732) 751-0153

Address 111 Squankum Yellowbrook Road, Unit 5, Farmingdale, NJ 07727 e-mail boulderpetrollc@comcast.net

Contractor License No. US291922 Exp. Date 07/31/2024

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. [redacted] FAX: (732) 751-0154

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 $ 65,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date:_____ Approved by: _____

[ ] Plumbing Plans Approved

Date:_____ Approved by: _____

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 9-27-24

Approved by: [signature]

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

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: Anthony Tedeschi

Print name here: Anthony Tedeschi

DEP [X] Licensed Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK 2-new Fuel Tanks & Fuel Lines

QTY.	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	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
2	Stacks Vent gas/D.Vessel	150
2	Other Fuel Tanks	800

Administrative Surcharge $	
Minimum Fee $	950
State Permit Surcharge Fee $	
TOTAL FEE $	

U.C.C. F130 (rev. 10/17)
Internet version

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