



Kevin Cain
Construction Official
Phone 609.484.3614
Fax 609.677.4804

February 22, 2019

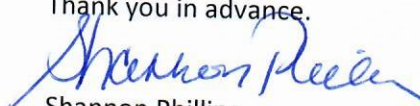
Jessica Martin

46 Greenfield Ave.
Block 68 lot(s) 5

Dear Sir/Madam:

Please see attached the information you requested for the above listed property. If I may assist you further please contact me at 609-484-3614.

Thank you in advance.



Shannon Phillips
Technical Assistant

CITY OF PLEASANTVILLE
18 N. FIRST ST. - 08232
(609) 484-3614

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 12/27/99
Control #
Permit # 0632/99

IDENTIFICATION Block 68 Lot 5 Qual _____
Work Site Location 46 E. GREENFIELD
Owner in Fee PORTERFIELD, BARRY
Address 58 BLUEGRASS BLVD.
BRANCHBERG, NJ 08876-
Telephone (908) 725-5952
Contractor CONROY ELECTRIC
Address 44 E. CHURCH ST
ABSECON, NJ 08201-
Telephone (609) 646-7484
Lic. No. or Bldrs. Reg. No. 12267
Federal Emp. No. 22-2486057

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:
RENOVATIONS

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 \$ 14,800

Construction Official _____ Date 12/27/99

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

PAYMENTS (Office Use Only)
Building 300
Electrical 46
Plumbing 80
Fire Protection 0
Mechanical 0
Elevator Devices 0
Other _____
DCA State Permit Fee 12
Cert. of Occupancy 40
Other _____
Total 478
Check No. 1820
Cash _____
Collected By SRP

CITY OF PLEASANTVILLE
18 N. FIRST ST. - 08232
(609) 484-3614

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 12/22/99
Date Issued 12/27/99
Control #
Permit # 0632/99

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

Block 68 Lot 5 Qual

Work Site Location 46 E. GREENFIELD

Owner in Fee PORTERFIELD, BARRY

Address 58 BLUEGRASS BLVD.

BRANCHBERG, NJ 08876-

Tel. (608) 725-5952

Contractor CONROY ELECTRIC

Address 44 E. CHURCH ST

ABSECON, NJ 08201-

Tel. (609) 646-7484 Fax () -

Lic. No. or Bldrs. Reg. No. 12267

Federal Emp. No. 22-2486057

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plans Req Type: Failure Failure Approval Initial

☐ All Footing

☐ Foot/Found Footing Bond

☐ Struct/Frame Foundation

☐ Exterior Slab

☐ Interior Frame

Joint Plan Review Required: Truss/Brac

☐ Elect ☐ Plumb ☐ Fire Insulation

SUBCODE APPR - PERM ☐ Elev Finishes-Bas

Date: Finishes-Fin

Approved By: Energy

SUBCODE APPR - CERTIF Mechanical

☐ CO ☐ CCO ☐ CA TCO

Date: Other

Approved By: Final

BarrierFree

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3

Constr. Class Present Proposed

No. of Stories 2

Height of Structure 20 Ft.

Area Largest Floor 0 Sq. Ft.

New Bldg. Area/All Floors 0 Sq. Ft.

Volume of New Structure 0 Cu. Ft.

Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ 0

2. Alteration \$ 12,500

3. Total (1+2) \$ 12,500

Industrialized Building:

☐ State Approved

☐ HUD

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

RENOVATIONS

TYPE OF WORK

☐ New Building

☐ Addition

☒ Rehabilitation

☐ Roofing

☐ Siding

☐ Fence 0 Height (exceeds 6') Sq. Ft.

☐ Sign 0 Sq. Ft.

☐ Pool - Above Ground

☐ Pool - In Ground

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☐ Other

Other

Other

☐ Demolition

FEE (Office Use Only)

\$ 0

0

300

0

0

0

0

0

0

0

0

0

0

0

0

0

Paid ☒ Check # 1820 Administrative Surcharge \$ 0

Minimum Fee \$ 0

TOTAL FEE \$ 300

Collected by: SRP State Permit Surcharge Fee \$ 10

CITY OF PLEASANTVILLE
18 N. FIRST ST. - 08232
(609) 484-3614

UCC NEW JERSEY
ELECTRICAL
SUBCODE

TECHNICAL SECTION

Date Received 12/22/99
Date Issued 12/27/99
Control #
Permit # 0632/99

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

Block 68 Lot 5 Qual
Work Site Location 46 E. GREENFIELD

Owner in Fee PORTERFIELD, BARRY
Address 58 BLUEGRASS BLVD.

BRANCHBERG, NJ 08876-
Tel. (609) 725-5952

Contractor STARLIGHT ELECTRIC CONTR.
Address 220 OAKLAND AVE.

EHT, NJ 08201-
Tel. (609) 517-4195 Fax () -

Lic. No. or Bldrs. Reg. No. 9032
Federal Emp. No. 22-3493802

B. ELECTRICAL CHARACTERISTICS

Use Group -Present R-3 Proposed R-3
[] Pole/Pad # [] Temporary [] Other
Building Occupied as R3 Utility Co. CONNECTIV
Estimated Cost of Electrical Work \$ 800

JOB SUMMARY (Office Use Only) INSPECTIONS Dates (Month/Day)
PLAN REVIEW Type Failure Failure Approval Initial
[] No Plans Required Rough
[] Partial -Underslab Util Appr BarrierFr
Date: Appr by: Trench
[] Elect Plans Approved Temp Serv
Date: Appr by: Const Serv
Joint Plan Review Required: TCO
[] Build [] Plumb [] Fire Other
SUBCODE APPR - PERM [] Elev Service
Date: Appr by: Final
SUBCODE APPR - CERTIF BarrierFr
[] CO [] CCO [] CA Temp. Cut-in-Card Date Issued
Date: Appr by: Final Cut-in-Card Date Issued
AnnPoolIns
Date of Gnd/Bond Certification

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 Elect Contr [] Certif Landscape Irrig Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

NO. SIZE

ITEM

FEE (Office Use Only)

4	Lighting Fixtures	
12	Receptacles	
4	Switches	
0	Detectors	
1	Light Poles	
0	Motors-Fract HP	
0	Emergency & Exit Lights	
0	Communications Points	
0	Alarm Devices/F.A.C. Panel	
22	TOTAL NUMBERS	36
0	Pool Permit/with UW Lights	0
0	Storable Pool/Spa/Hot Tub	0
0	KW Elect Range/Receptacle	0
0	KW Oven/Surface Unit	0
0	KW Elect Water Heater	0
0	KW Elect Dryer/Receptacle	0
1	KW Dishwasher	0
0	HP Garbage Disposal	0
0	KW Central A/C Unit	0
0	HP/KW Space Heater/Air Handler	0
0	Baseboard Heat	0
0	HP Motors 1/+ HP	0
0	KW Transformer/Generator	0
0	AMP Service	0
0	AMP Subpanels	0
0	AMP Motor Control Center	0
0	KW Elect Sign/Outline Light	0
0	Other	0
0	Other	0
0	Other	0

Paid [X] Check # 1820 Administrative Surcharge \$ 0
Collected by: SRP Minimum Fee \$ 10
TOTAL FEE \$ 46
DCA State Permit Fee \$ 1

CITY OF PLEASANTVILLE
18 N. FIRST ST. - 08232
(609) 484-3614

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 12/22/99
Date Issued 12/27/99
Control #
Permit # 0632/99

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 68 Lot 5 Qual
Work Site Location 46 E. GREENFIELD

NO.

FIXTURE/EQUIPMENT

FEE (Office Use Only)

Owner in Fee PORTERFIELD, BARRY
Address 58 BLUEGRASS BLVD.
BRANCHBERG, NJ 08876-
Tel. (908) 725-5952
Contractor FDM PLUMBING & HEATING
Address 1501 OHIO AVE
ATLANTIC CITY, NJ 08401-
Tel. (609) 347-4755 Fax ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

2	Water Closet	20
0	Urinal / Bidet	0
1	Bath Tub	10
1	Lavatory	10
0	Shower	0
0	Floor Drain	0
2	Sink	20
1	Dishwasher	10
0	Drinking Fountain	0
0	Washing Machine	0
1	Hose Bibb	10
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
0	Other	0
0	Other	0
0	Other	0

B. PLUMBING CHARACTERISTICS
Use Group - Present R-3 Proposed R-3
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 1,500

0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
0	Other	0
0	Other	0
0	Other	0

JOB SUMMARY (Office Use Only)
PLAN REVIEW
[] No Plans Required
[] Partial - Underslab Util Appr
Date: Appr by:
[] Plumb Plans Approved
Date: Appr by:
Joint Plan Review Required:
[] Build [] Elect [] Fire
SUBCODE APPR - PERM [] Elev
Date: Appr by:
SUBCODE APPR - CERTIF
[] CO [] CCO [] CA
Date: Appr by:
Final

0	Administrative Surcharge \$	0
0	Minimum Fee \$	0
80	TOTAL FEE \$	80
1	DCA State Permit Fee \$	1

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

CITY OF PLEASANTVILLE
18 N. FIRST ST. - 08232
(609) 484-3614

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 06/01/04
Control #
Permit # 0361/04

IDENTIFICATION Block 68 Lot 5 Qual _____
Work Site Location 46 E. GREENFIELD
Owner in Fee ALAM, NAHID
Address 114 N. MISSISSIPPI AVE
ATLANTIC CITY, NJ 08401-
Telephone (609) 345-0537
Contractor HOME OWNER
Address _____
Telephone () _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. HO- _____

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:
GAS FIRED APPLIANCE

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 \$ 1,100

Construction Official _____ Date 06/01/04

PAYMENTS (Office Use Only)
Building _____ 0
Electrical _____ 0
Plumbing _____ 0
Fire Protection _____ 46
Mechanical _____ 0
Elevator Devices _____ 0
Other _____
DCA State Permit Fee _____ 1
Cert. of Occupancy _____ 0
Other _____
Total _____ 47
Check No. _____ 662
Cash _____
Collected By _____ SRP

CITY OF PLEASANTVILLE
18 N. FIRST ST. - 08232
(609) 484-3614

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 06/01/04
Date Issued 06/01/04
Control #
Permit # 0361/04

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. DO UTILITY DIG NO: 1-800-272-1000
Block 68 Lot 5 Qual
Work Site Location 46 E. GREENFIELD

D. TECHNICAL SITE DATA

Owner in Fee ALAM, NAHID
Address 114 N. MISSISSIPPI AVE
ATLANTIC CITY, NJ 08401-
Tel. (609) 345-0537
Contractor HOMEOWNER
Address
Tel. () Fax ()
Lic. No. or Bids. Reg. No.
Federal Emp. No. HO-

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv
Storage Tanks
Type: [] Flammable Liquid [] Combust Liquid
[] LPG [] LNG Capacity 0 Fuel
Alarm Systems [] 110v Interconnected NUMBER
[] System

FEE (Office Use Only)

B. FIRE PROTECTION CHARACTERISTICS
Use Group - Present R-3 Proposed R-3
Constr Class - Present Proposed
Heating Systems [] New [] Existing [] HVAC
Type: [] Gas [] Oil [] Elect [] Solar
[] Other
Location:
Total Est Cost of Fire Prot Work \$ 1,100

Alarm Devices (smoke, heat, pulls, water/flow) 0
Supervisory Devices (tamper, low/high air) 0
Signaling Devices (horn/strobes, bells) 0
Other Devices 0
TOTAL 0

Fire Alarm System
New [] Existing []
Location of Panel:
Fire Suppression/Standpipe Sys
New [] Existing []
Location of Main Control Valve

Suppression Systems
Fire Pump 0 GPM Type 0
Dry Pipe/Alarm Valves 0
Pre-action Valves 0
Sprinkler Heads (Dry and Wet) 0
Standpipes 0
Pre-Engineered Systems 0
Wet Chemical 0
Dry Chemical 0
CO2 Suppression 0
Foam Suppression 0
Halon Suppression 0
Other 0

JOB SUMMARY (Office Use Only) INSPECTIONS
PLAN REVIEW Type Failure Failure Approval Initial
[] No Plans Required Alarm Sys
[] Partial -Underslab Util Appr Suppr Test
Date: Appr by: Standpipe
[] Fire Plans Approved Fire Pump
Date: Appr by: PreEng Sys
Joint Plan Review Required: Mechanical
[] Build [] Elect [] Plumb Smoke Ctl
SUBCODE APPR - PERM [] Elev TCO
Date: Appr by: FI/Comb Tnk
SUBCODE APPR - CERTIF Firepl Vnt
[] CO [] CCO [] CA Final
Date: Appr by: Other

Kitchen Hood Exhaust System 0
Smoke Control System 0
Gas [] or Oil [] Fired Appliances 1 46
Other 0
Other 0
Other 0

Administrative Surcharge \$ 0
Paid [X] Check # 662 Minimum Fee \$ 0
Collected by: SRP TOTAL FEE \$ 46
DCA State Permit Fee \$ 1

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/Contractor Seal

CITY OF PLEASANTVILLE
18 N. FIRST ST. - 08232
(609) 484-3614

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 09/23/05
Control #
Permit # 0754/05

IDENTIFICATION	Block 68	Lot 5	Qual
Work Site Location	46 E. GREENFIELD		
Owner in Fee	BROWN, RUSS		
Address	46 E. GREENFIELD AVE PLEASANTVILLE, NJ 08232-		
Telephone	(609) 442-7613		
Contractor	HOME MECHANICS		
Address	P.O. BOX 977 OCEAN CITY, NJ 08226-		
Telephone	()		
Lic. No. or Bldrs. Reg. No.			
Federal Emp. No.	22-4427613		

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:
INSTALL NEW GAS HEATER

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 \$ 1,800

Construction Official _____ Date 09/23/05

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	46
Mechanical	0
Elevator Devices	0
Other	
DCA State Permit Fee	2
Cert. of Occupancy	0
Other	
Total	48
Check No.	
Cash	X
Collected By	NIR

CITY OF PLEASANTVILLE
18 N. FIRST ST. - 08232
(609) 484-3614

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 09/23/05
Date Issued 09/23/05
Control #
Permit # 0754/05

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

Block 68 Lot 5 Qual
Work Site Location 46 E. GREENFIELD

Owner in Fee BROWN, RUSS

Address 46 E. GREENFIELD AVE

PLEASANTVILLE, NJ 08232-

Tel. (609) 442-7613

Contractor HOME MECHANICS

Address P.O. BOX 977

OCEAN CITY, NJ 08226-

Tel. () Fax ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-4427613

B. FIRE PROTECTION CHARACTERISTICS

Use Group - Present R-5 Proposed R-5

Constr Class - Present Proposed

Heating Systems [X] New [] Existing [] HVAC

Type: [X] Gas [] Oil [] Elect [] Solar

[] Other

Location:

Total Est Cost of Fire Prot Work \$ 1,800

Fire Alarm System

New [] Existing []

Location of Panel:

Fire Suppression/Standpipe Sys

New [] Existing []

Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[] Partial -Underslab Util Appr

Date: Appr by:

[] Fire Plans Approved

Date: Appr by:

Joint Plan Review Required:

[] Build [] Elect [] Plumb

SUBCODE APPR - PERM [] Elev

Date: Appr by:

SUBCODE APPR - CERTIF

[] CO [] CCO [] CA

Date: Appr by:

INSPECTIONS
Type Failure Dates (Month/Day) Approval Initial

Alarm Sys

Suppr Test

Standpipe

Fire Pump

PreEng Sys

Mechanical

Smoke Ctl

TCO

FI/Comb Tnk

Firepl Vnt

Final

Other

D. TECHNICAL SITE DATA

Description of Work:

Water Supply Source

Method of Alarm/Suppr Sys Superv

Storage Tanks

Type: [] Flammable Liquid [] Combust Liquid

[] LPG [] LNG Capacity 0 Fuel

Alarm Systems [] 110v Interconnected NUMBER

[] System

Alarm Devices (smoke,heat,pulls,water/flow) 0

Supervisory Devices (tamper,low/high air) 0

Signaling Devices (horn/strobes, bells) 0

Other Devices 0

TOTAL 0

Suppression Systems

Fire Pump 0 GPM Type 0

Dry Pipe/Alarm Valves 0

Pre-action Valves 0

Sprinkler Heads (Dry and Wet) 0

Standpipes 0

Pre-Engineered Systems

Wet Chemical 0

Dry Chemical 0

CO2 Suppression 0

Foam Suppression 0

Halon Suppression 0

Other 0

Kitchen Hood Exhaust System

Smoke Control System 0

Gas [X] or Oil [] Fired Appliances 1 46

Other 0

Other 0

Other 0

Administrative Surcharge \$ 0

Paid [X] Check # Cash Minimum Fee \$ 0

Collected by: NTR TOTAL FEE \$ 46

DCA State Permit Fee \$ 2

Signature/Contractor Seal