

OPRA

#23-1289

From: Dominique <opra+request-51998-37ea4cb9@requests.opramachine.com>
Sent: Thursday, August 31, 2023 3:10 PM
To: OPRA
Subject: OPRA request - Opened and Closed Building/Construction Department Permits

Dear Bayonne City,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested:

Please provide copies of all open and closed building/construction department permits for property located at 73 W 14th Street, specifically noting any permits that are open.

Yours faithfully,

Dominique Garcia

257/15

Please deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-51998-37ea4cb9@requests.opramachine.com

Is oprarequest@baynj.org the wrong address for OPRA requests to Bayonne City? If so, please contact us using this form:

https://opramachine.com/change_request/new?body=bayonne_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/opened_and_closed_buildingconstr_18

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.

2023 SEP -1 A 9:37
RECEIVED
BAYONNE CITY



BUILDING SUBCODE TECHNICAL SECTION



CITY OF BAYONNE
BUILDING DEPARTMENT
630 AVENUE C
BAYONNE, NEW JERSEY 07002

Date Received
Control # 77-122
Date Issued
Permit # 77-122

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

Block 257 Lot 135 Qualification Code 11
Work Site Location 75 West 11th Street, Bayonne

Owner in Fee: Michael Michael and Louis Michael
Tel. [redacted] e-mail [redacted]

Address 7310 14th St. Bayonne NJ
Contractor: L & M Construction Tel. 973 464-4884
Address 122 (off St) Newark Ave. e-mail lmc@lmc.com

Contractor License No. or Builder Registration No. 13WH11447200 Exp. Date 08-23
Home Improvement Contractor Registration No. or Exemption Reason
Federal Emp. ID No. [redacted] FAX: [redacted]

JOB SUMMARY (Office Use Only)			
PLAN REVIEW		DATES (Month/Day)	
No Plans Required	Initial	Failure	Approval
☐ No Plans Required			
☐ All			
☐ Footings/Foundations			
☐ Structural/Framework			
☒ Exterior			
☐ Interior			
Joint Plan Review Required:			
☐ Elec.	☐ Plumb.	☐ Fire	☐ Elevator
SUBCODE APPROVAL FOR PERMIT			
Date: 1/14/12			
Approved by: [Signature]			
SUBCODE APPROVAL FOR CERTIFICATE			
☐ CO	☐ CCO	☒ CA	
Date: 1/14/12			
Approved by: [Signature]			

B. BUILDING CHARACTERISTICS			
Use Group	Present	Proposed	Constr. Class Present
No. of Stories			If Industrialized Building:
Height of Structure			State Approved
Area — Largest Floor			HUD
New Bldg. Area/All Floors			Est. Cost of Bldg. Work:
Volume of New Structure			1. New Bldg. \$ 30000
Max. Live Load			2. Rehabilitation \$
Max. Occupancy Load			3. Total (1 + 2) \$

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Construction for a 6 st
Parking

TYPE OF WORK:	Sq. Ft.
☐ New Building	
☐ Addition	
☒ Rehabilitation	
☐ Roofing	
☐ Siding	
☐ Fence	
☐ Sign	
☐ Pool	
☐ Retaining Wall	
☐ Asbestos Abatement Subchapter 8	
☐ Lead Haz. Abatement NJAC 5:17	
☐ Radon Remediation	
☐ Other	
☐ Demolition	

Administrative Surcharge \$	
Minimum Fee \$	
DCA Training Fee \$	
TOTAL FEE \$	

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



PLUMBING 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 201 Lot 15 Qualification Code in Rio
Work Site Location 73 W 14th St Bayonne, NJ 07000

Owner in Fee: ANDREA DELMAK e-mail: [redacted]
Tel. [redacted]

Address 73 W 14th St ZIP code 07002

Contractor: ROTO-ROOTER SERVICES COMPANY Tel. (732) 448-0130 X 11
Address 80 VERONICA AVENUE e-mail: dwarnar@rrsc.com
SOMERSET, N.J. 08873

Contractor License No. 12871 Exp. Date 6/20

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

Federal Emp. ID No. [redacted] FAX: (732) 448-1019

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed X

Building Sewer Size 4 Public Sewer X Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work \$ 6,822

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

☐ Partial - Underslab Utilities Approved

Date: 3/21/20 Approved by: [signature]

☐ Plumbing Plans Approved

Date: 3/21/20 Approved by: [signature]

Joint Plan Review Required:

☐ Bldg. ☐ Elec. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL for PERMIT

Date: 3/21/20

Approved by: [signature]

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ LCCO ☐ CA

Date: 3/21/20

Approved by: [signature]

INSPECTION

Type: Slab

[signature] Dates (Month/Day)

Final Approval Initial

[signature]

[signature]

[signature]

[signature]

[signature]

[signature]

[signature]

[signature]

[signature]

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[signature]

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:

Print name here:

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: we are having sewerage on broken section in basement with new PVC pipe and clean out

QTY. 1

FIXTURE/EQUIPMENT

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

Stacks

Other

FEE (Office Use Only)

\$

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$

To reorder call:

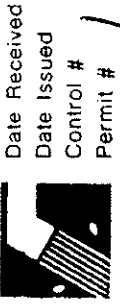
Allegra Marketing, Print & Mail

609-390-1400

CITY OF BAYONNE
Department of Engineering
630 Avenue "C"
Bayonne, New Jersey 07002



PLUMBING
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

1/25/12
12-01-162

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

Block 251 Lot 15
Work Site Location 73 W 14th St
Owner in Fee Bayonne HS 07002
Address 73 W 14th St
Contractor The Magers PA H C LLC
Address 279 MARSHALL ST
Telephone 201 832 1444
Lic. No. 12234
Federal Emp. No. [REDACTED] or Social Security No. [REDACTED]

B. PLUMBING CHARACTERISTICS

Use Group Present
Building Sewer Size [REDACTED]
Water Service Size [REDACTED]
Estimated Cost of Plumbing Work \$ 4500

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS:	
☐ No Plans Required	Type: <u>Slab</u>	Dates (Month/Day)	Initial
☐ Joint Plan Review Required:	<u>Slab</u>	Failure	Approval
☐ Bldg. [] Elec. [] Fire	<u>Rough</u>		
☐ Plumb. Plans Approved	<u>Water</u>		
Date: <u>1/24/12</u>	<u>Sewer</u>		
Approved by: <u>[Signature]</u>	<u>Fixtures</u>		
SUBCODE APPROVAL:		Gas Equipment	
☐ CO [] CCO [] CA	<u>Gas Final</u>		
Approved by: <u>[Signature]</u>	<u>Solar</u>		
Date: <u>1/24/12</u>	<u>TCO</u>		

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.

☒ 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	
	Greasetrapp	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Gas Service Connection	
	Active Solar System	
	Other	

Paid by: Check # [REDACTED] Minimum Fee \$ 60
Collected by: [Signature] TOTAL \$ 60

CITY OF BAYONNE
Department of Engineering
630 Avenue "C"
Bayonne, New Jersey 07002



**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 251 Lot 15
Work Site Location 73 62 1457 BAYVIEW RD
Owner in Fee IN HERALD VESTMENT BY MARIC BRY LLC
Address 15 BROADWAY DRIVE MEDFORD
Tel 781 2945
Contractor SCHE
Address _____

Tele. () _____ Fax () _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Dates (Month/Day)	Approval	Initial
☐ No Plans Required			Type:				
☐ All			Footings			5-10-10	JMS
☐ Footings			Foundation				
☐ Foundation			Slab			5-10-10	JMS
☒ Frame	12/15/10	JMS	Frame			5-10-10	JMS
☐ Other			Barrier-Free				
Joint Plan Review Required:							
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator							
SUBCODE APPROVAL							
☐ CO ☐ CA							
Date: 6/10/10							
Approved by: [Signature]							

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class			1. New Bldg. \$
No. of Stories			2. Alteration \$ 6,000
Height of Structure			3. Total (1+2) \$
Area — Largest Floor			
New Bldg. Area/All Floors			
Volume of New Structure			
Total Land Area Disturbed			

Date Received 12/15/09
Date Issued 1/20/10
Control # 09-375
Permit # 10-01-111



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 [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
REPLACE GLAZERS
COVER DOOR & WINDOWS.
INSTALL NEW 3 1/2 x 1 1/8
PARAMETERS TO CODE

TYPE OF WORK

☐ New Building	
☐ Addition	
☒ Alteration	
☐ Roofing	
☐ Siding	
☐ Fence	
☐ Sign	
☐ Pool	
☐ Asbestos Abatement Subchapter 8	
☐ Lead Haz Abatement NJAC 5:17	
☐ Other	
☐ Demolition	

FEE (Office Use Only)
\$ 144
\$ 30
\$ 114
\$ 10
\$ 124

U.C.C. F110 (rev. 3/98)
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

CITY OF BAYONNE
Department of Engineering
630 Avenue "C"
Bayonne, New Jersey 07002



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**

Date Received
Date Issued
Control #
Permit #



1/4/10 EPF
10-01-007

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

Block 251 Lot 13
Work Site Location Bayonne, NJ 07002
Owner in Fee Bayonne, NJ 07002
Address Bayonne, NJ 07002
Tele. () Dynamic Realty
Contractor PETE MAYER PUMPING & HEATING LLC
Address BILLING: 206 AVENUE E
Office: 88 EAST 21ST STREET
BAYONNE, NEW JERSEY 07002
Lic. No. PHONE: (201) 438-8750
Federal Emp. No. [REDACTED] or Social Security No. [REDACTED]

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present [REDACTED] Proposed [REDACTED]
Constr. Class. Present [REDACTED] Proposed [REDACTED]
Heating Systems () New () Existing
Type: () Gas () Oil () Electrical () Solar
() Other [REDACTED]
Location: [REDACTED] () Other [REDACTED]

Total Est. Cost of Fire Prot. Work \$ 200.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS:	
Type:	Dates (Month/Day)	Failure	Approval
Joint Plan Review Required:			
() Bldg. () Plumb.	Suppression Test		
() Elec. () Elevator	Fire Alarm Test		
() Fire Plans Approved	Smoke Test		
	Mechanical		
	TCO		
	Other		
	Other		
	Other		
Date: <u>4/3/10</u>			
Approved by: <u>[Signature]</u>			
SUBCODE APPROVAL:			
() CO () CO2 () CA			

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.

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks
Combustible Liquid Storage Tanks
L.P.G. Storage Tanks
L.N.G. Storage Tanks

() Capacity
() Capacity
() Capacity
() Capacity

Number

Wet Sprinkler Heads
Dry Sprinkler Heads
TOTAL

Smoke Detectors
Heat Detectors
TOTAL

Stand Pipes
Kitchen Hood Exhaust Systems

Pre-Engineered Systems
CO₂ Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas 1 Oil Fired Appliance
OTHER

FEE (Office Use Only)

Paid () Check # 3224 Administrative Surcharge \$
Minimum Fee \$
Collected by: [Signature] DCA Training Fee \$
TOTAL FEE \$ 600

CITY OF BAYONNE
Department of Engineering
630 Avenue "C"
Bayonne, New Jersey 07002



**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 25
Work Site Location 173 W 14th St
Owner in Fee/Occupant Michael Kushnir
Address Dynamic Realty LLC
736 W 14th St
Tele. () 736 W 14th St
Contractor PETE MANN EV PLUMBING & HEATING LLC
Address BILLING: 238 AVENUE E
OFFICE: 88 EAST 21ST STREET
BAYONNE, NEW JERSEY 07002
Tele. () PHONE: (201) 435-8750
Lic. No. [REDACTED]

Federal Emp. No. [REDACTED]
B. ELECTRICAL CHARACTERISTICS
Use Group Present [REDACTED]
[] Pole/Pad # [] Temporary [] Other
Building Occupied as [REDACTED] Utility Co. [REDACTED]
Est. Cost of Elec. Work \$ 300.00

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	INSPECTIONS
[] No Plans Required			Type: Rough
Joint Plan Review Required:			
[] Building	[] Plumbing		Temp. Serv.
[] Fire	[] Elevator		Constr. Serv.
[] Elec. Plans Approved			TCO
Date: <u>11/4/10</u>			Other
Approved by: <u>[Signature]</u>			Service
SUBCODE APPROVAL			
[] CO	[] CCO	[] CA	Temp Cut-in-Card Date Issued
Date: <u>11/4/10</u>			Final Cut-in-Card Date Issued
Approved by: <u>[Signature]</u>			

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's Signature/Contractor's Seal and Signature
[] Licensed Electrical Contractor [] Exempt Applicant



Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
TOTAL NUMBERS		
		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 1/4 HP
		KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

Administrative Surcharge \$
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$

60*3029
61



U.S. G. 6120

CITY OF BAYONNE
Department of Engineering
630 Avenue "C"
Bayonne, New Jersey 07002



**ELECTRICAL
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

12/15/09
09-12-085

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

Block 25 Lot 15
Work Site Location 73 W 14th STREET
BAYONNE, NJ 07008
Owner in Fee/Occupant MIKE KUSNER/DYNAMIC REALTY STATE
Address 1506 MARSH DR.
MEDFORD, NJ 07345
Tele. ()
Contractor WEAVER ELECTRIC INC
Address 636 AVENUE E
BAYONNE NJ 07008
Tele. (201) 339-7909 Fax (201) 339-7547
Lic. No. 7317
Federal Emp. No. [REDACTED]

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[] Pole/Pad # [] Temporary [] Other
Building Occupied as Drive Thru Utility Co.
Est. Cost of Elec. Work \$ 7,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial INSPECTIONS Dates (Month/Day)
[] No Plans Required Type: Failure Failure Approval Initial
Joint Plan Review Required: Rough
[] Building [] Plumbing Temp. Serv.
[] Fire [] Elevator Constr. Serv.
[] Elec. Plans Approved TCO
Date: Other
Approved by: Service
Final

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date:

Approved by:

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
20		Lighting Fixtures
30		Receptacles
18		Switches
		Detectors
		Light Poles
2		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		TOTAL NUMBERS
		Pool Permit/with UW Lights
		Storable Pool/Spa/Hot Tub
		KW Elec. Range/Receptacle
		KW Oven/Surface Unit
		KW Elec. Water Heater
1	1.0	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 1/4 HP
1	150	KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
1	1.0	KW Elec. Sign/Outline Light
		<u>KW Pump - Boiler</u>

FEE (Office Use Only)

30
70
15
40
55
210 Cash
13 Cash
TOTAL FEE \$

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's Signature/Contractor's Seal and Signature

[] Licensed Electrical Contractor [] Exempt Applicant

USE
FROM JUNE 1997
INTERNETWORKING

12/1/09
09 12-004

Federal Emp. No. _____

2 Canary = Office Copy
4 Gold = Applicant Copy



USF
UNIVERSITY OF SOUTH FLORIDA
TALLAHASSEE, FLORIDA 32306-1600
TEL: 904/644-2000

11/6/09
09-11-048

2 Canon = Junior Copy
4 Gold = Applicant Copy