41158

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 12/18/12

Permit # 12-2155

IDENTIFICATION Block 7506 Lot 6 Qualification Code

Work Site Location 749 Dalton

Owner in Fee Paul Howard

Address

Tel. (201) 652-0110

Contractor A1 Heating

Address 749 Dalton Ave

Tel. (201) 652-0110

Lic. No. or Bldrs. Reg. No. 13VH01457100

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT

[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION

[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER Conversion

DESCRIPTION OF WORK:

NATURAL GAS

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 $ 650

Construction Official

12/12/12
Date

PAYMENTS (Office Use Only)

Building	
Electrical	150.00
Plumbing	75.00
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	1.00
Cert. of Occupancy	
Other	
Total	226.00
Check No.	3650
Cash	
Collected by	KG

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

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

(see reverse side)

65

PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #

Date Issued 12/18/12
Permit # 12-2155

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

Block 7506 Lot 6 Qualification Code

Work Site Location 749 Walnut + Paran

Owner in Fee: Lewis Hoagies

Tel. (201) 652-0110 e-mail

Address

Contractor: A-1 Heat & Cool (street, municipality) Tel. (201) 652-0110 (zip code)

Address 749 Walnut + Paran e-mail

Contractor License No. 13VH01957100 Exp. Date 12/31/12

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

Federal Emp. ID No. 222266469 FAX: ( )

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 $ 150 E

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Plumbing Plans Approved
Date: 12/19/12 Approved by: M.T.O.
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 12/19/12
Approved by: M.T.O.

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				

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.

Joe Homeowner
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
NATURAL GAS GENERATOR 10KW

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	
3	Water Heater 35 GAL	
	Fuel Oil Piping	
1	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other GENERATOR	
	Other	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$ 1.75
TOTAL FEE	$

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #
Date Issued 12/15/12
Permit # 12-2155

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

Block 1506 Lot 6 Qualification Code

Work Site Location 749 Walnut

Paran

Owner in Fee: Lewis Howard

Tel. (201) 652-0110 e-mail

Address

Contractor: ~~[illegible]~~ LEWIS HOWARD Tel. (201) 652-0110

Address 749 Walnut e-mail

Paran

Contractor License No. ~~[illegible]~~ Exp. Date ~~[illegible]~~

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): ~~222286469~~

Federal Emp. ID No. 222 286 469 FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 4002

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[X] Electric Plans Approved

Date: 12/17/12 Approved by: JG

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS — Dates (Month/Day)

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

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding 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] Lewis Howard

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NATURAL GAS GENERATOR

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
	10KW	Generator	400.00
		TS	50.00

Administrative Surcharge $

Minimum Fee $ 150.00

State Permit Surcharge Fee $

TOTAL FEE $

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 12/15/97
Control #
Permit # 97-2196

IDENTIFICATION Block 7506 Lot 6

Work Site Location 749 Walnut st Paramus NJ 07652

Owner in Fee Mr. [illegible]

Address 749 Walnut st Paramus NJ 07652

Tel. (201) 652-0110 (Howard)

Contractor Renaissance Remodeling

Address 14 Ridge RD Bloomingdale NJ 07403

Tel. (973) 838-0923

Lic. No. or Bldrs. Reg. No. 7400-1998

Fed. Emp. No. 22-2660184

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
Vinyl Siding

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 $ 6400.00

______________________ Construction Official

12/15/97 Date

PAYMENTS (Office Use Only)	
Building	60—
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	6—
Cert. of Occupancy	
Other	
Total	66—
Check No.	1028
Cash	
Collected by	[illegible]

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

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 12/15/97
Control #
Permit # 97-2196

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

Block 7506 Lot 6
Work Site Location 749 Walnut st. Paramus NJ 07652

Owner in Fee Mr Howard
Address 749 Walnut st Paramus NJ 07652

Tele. (201) 652-0110
Contractor Renaissance Remodeling
Address 14 Ridge RD Bloomingdale NJ 07403

Tele. (973) 838-0923 Fax (973) 838-0923
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2660184

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

Vinyl Siding

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: ______
Approved by: ______

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

Dates (Month/Day)

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Alteration
  - [ ] Roofing
  - [✓] Siding
  - [ ] Fence ______ Height (exceeds 6')
  - [ ] Sign ______ Sq. Ft.
  - [ ] Pool
  - [ ] Asbestos Abatement Subchapter 8
  - [ ] Lead Haz. Abatement NJAC 5:17
  - [ ] Other ______
- [ ] Demolition

FEE (Office Use Only)
$ ______
60—

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

B. BUILDING CHARACTERISTICS

Use Group Present ______ Proposed ______
Constr. Class Present ______ Proposed ______
No. of Stories ______
Height of Structure 18 Ft.
Area — Largest Floor ______ Sq. Ft.
New Bldg. Area/All Floors ______ Sq. Ft.
Volume of New Structure ______ Cu. Ft.
Total Land Area Disturbed ______ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ ______
2. Alteration $ ______
3. Total (1+ 2) $ 6400.00

Bal - 12/15/97
V - 1028
BM

U.C.C. F110
(rev. 3/96)

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

8928

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 7-14-00
Control #
Permit # 00-1147

IDENTIFICATION Block 7506 Lot 6
Work Site Location 749 Walnut St.
Paramus 07652
Owner in Fee Linda Howard
Address SAME

Tel. (201) 652-7082

Contractor Brink's Home Security
Address 110 S. Main St., 3rd Fl.
South Amboy, NJ 08879
Tel. (732) 316-0303
Lic. No. or Bldrs. Reg. No. N/A 7801 10/00
Fed. Emp. No. 06-1077936

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

BURGLAR ALARM

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 $ 515-

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical 40 00
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee
Cert. of Occupancy
Other
Total 40 00
Check No. 2642
Cash
Collected by CL

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

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 7-14-00
Date Issued
Control #
Permit # 00-1147

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

Block 7506 Lot 6
Work Site Location 749 Walnut St.
Paramus 07652
Owner in Fee/Occupant Linda Havard
Address SAME

Tele. (201) 652-7082
Contractor Brink's Home Security
Address 110 S. Main St., 3rd Fl.
South Amboy, NJ 08879
Tele. (732) 316-0303 Fax (732) 316-0255
Lic. No. N/A
Federal Emp. No. 06-1077936

B. ELECTRICAL CHARACTERISTICS

Use Group Present R-3 Proposed R-3
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 515-

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required 7/11/00 Date 2J Initial
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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 [X] Exempt Applicant

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
13		BURG
		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/+ HP
		KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

FEE (Office Use Only)

$ 40.00

Administrative Surcharge $
Minimum Fee $ 40.00
DCA Training Fee $
TOTAL FEE $

2642
a

U.C.C. F120
(rev. 3/96)

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