



Office Of The City Clerk  
**THE CITY *of* EAST ORANGE**

44 CITY HALL PLAZA  
EAST ORANGE, NEW JERSEY 07018  
WWW.EASTORANGE-NJ.GOV

PHONE  
973.266.5110

FAX  
862.930.7812

CYNTHIA S. BROWN  
CITY CLERK  
November 19, 2021

**TED R. GREEN**  
MAYOR

Mr. Barron  
Opra+request-26375-35b6b60d@requests.opramachine.com

**Re: OPRA Request**

Dear Mr. Barron:

I am writing to respond to your request for government records from the City of East Orange. You requested the following for properties located at 135 Norman St; 15 Melmore Gardens, and 191 Greenwood Ave:

1. All open, closed, pending permits and building or code violations
2. A copy of the Property Record Card
3. Annual City Tax Amount, Water Bill, Sewer Amounts, Tax Ledger
4. Any Survey or Lot Size Information that may be on file
5. Copies of any documents related to the removal or install of any AST and/or UST (Oil Tank Removal)
6. Report of any Soil Contamination
7. Inspection Reports and Property and Status
8. Reports of any Mold

Items #1 & #7 listed above can be found on our SDL Portal, which is on the City's website at <http://www.eastorange-nj.gov>. Select the "OPEN DATA" tab to be connected to the portal. Once you complete the sign-up process, you will be able to review all properties in East Orange. Under the "Advanced Search" option, you will be able to search by block and lot.

Item #2, see attached.

For Item #3, the requested Water Bill is attached. For Tax information, a Tax Search must be completed for a \$10.00 fee. Contact the Office of the Tax Collector at 973.266.5130 for assistance.

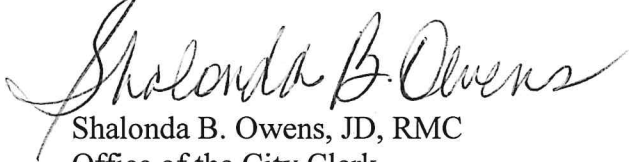
For Item #4, The City does not maintain surveys on file.

For Item #5, per the Department of Property Maintenance, there are no oil tank records on file for properties located at 135 Norman Street and 15 Melmore Gardens. Please see attached for property located at 191 Greenwood Ave.

For Item #6, per the Fire Department, there is no report of fuel spill, tank removal or hazardous material spill at any of the three property locations; For Item #6 and #8 P\per the Health Department, a file search was made of the records within the environmental Division and the file search yielded negative results for all three properties.

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in black ink, reading "Shalonda B. Owens". The signature is fluid and cursive, with the first name being the most prominent.

Shalonda B. Owens, JD, RMC  
Office of the City Clerk  
'sbo

BLOCK 580 LOT 40 QUAL  
PROP LOC 135 NORMAN ST.  
TAX MAP 1-7  
ZCNING  
PROP CLS 2  
LAND DES 100X64 & REAR  
BLDG DES 25-F-CL

- 50.00 NEIGHBORHOOD QF
- 01 TYPICAL
  - 02 INFERIOR
  - 03 SUPERIOR
  - 04 STABLE
  - 05 DECLINING
  - 06 IMPROVING
  - 07 RURAL
  - 08 CROSSROADS
  - 09 SUBURBAN
  - 10 URBAN
  - 11 SUBDIVISION
  - 12 MIXED
- 51.00 VIEW QF
- 01 TYPICAL
  - 02 DETRIMENTAL
  - 03 ENHANCING
  - 04 LAKE VIEW
  - 05 UTILITIES
- 52.00 UTILITIES QF
- 01 ALL
  - 02 ELECTRIC
  - 03 GAS
  - 04 WATER
  - 05 SEWER
  - 06 WELL
  - 07 SEPTIC
  - 08 SUMP/SEW CON.
  - 09 SUMP/NO SEW
  - 10 NONE
  - 11 INFO. BY
- 53.00 INFO. BY
- 01 OWNER
  - 02 SPOUSE
  - 03 TENANT
  - 04 AGENT
  - 05 AT DOOR
  - 06 REFUSED
  - 07 ESTIMATED
- 54.00 ROAD QF
- 01 PAVED
  - 02 GRAVEL
  - 03 DIRT
  - 04 PRIVATE
  - 05 NONE
  - 06 CURBING
  - 07 YES
  - 08 NONE
  - 09 SIDEWALK
  - 10 YES
  - 11 NONE
- 55.00 CURBING QF
- 01 YES
  - 02 NONE
  - 03 SIDEWALK
  - 04 YES
  - 05 NONE
  - 06 POWER LINES
  - 07 NO STR. LIGHT
  - 08 INFERIOR SERV
  - 09 SUPERIOR SERV
  - 10 HEAVY TRAFFIC
  - 11 LIGHT TRAFFIC
  - 12 UNDERGRD UTIL
  - 13 ECON OBST.
  - 14 FENC. OBST.
  - 15 ECON OBST.
  - 16 FENC. OBST.
  - 17 ECON OBST.
  - 18 FENC. OBST.
- 56.00 SIDEWALK QF
- 01 YES
  - 02 NONE
  - 03 SIDEWALK
  - 04 YES
  - 05 NONE
  - 06 POWER LINES
  - 07 NO STR. LIGHT
  - 08 INFERIOR SERV
  - 09 SUPERIOR SERV
  - 10 HEAVY TRAFFIC
  - 11 LIGHT TRAFFIC
  - 12 UNDERGRD UTIL
  - 13 ECON OBST.
  - 14 FENC. OBST.
  - 15 ECON OBST.
  - 16 FENC. OBST.
  - 17 ECON OBST.
  - 18 FENC. OBST.
- 57.00 LAND COND. QF
- 01 NO RIGHT TO BLDG.
  - 02 ALLEY SHAPE
  - 03 FLAG LOT
  - 04 SEVERE EASEMENTS
  - 05 UNIMPRV ROAD
  - 06 SLOPE
  - 07 LAND LOCKED
  - 08 FLOOD PLAIN
  - 09 SHARED DRIVEWAY
  - 10 POOR LOCATION
  - 11 TOPOGRAPHY
  - 12 TRIANGLE
  - 13 IRREGULAR
  - 14
  - 15
  - 16
- 58.00 LAND INFLUENCE QF
- 01 COMMERCIAL
  - 02 VIEW
  - 03 MISC.
  - 04
  - 05
  - 06
  - 07
  - 08
  - 09
  - 10
  - 11
  - 12
  - 13
  - 14
  - 15
  - 16

Block: 580 Lot: 40 CARD OF

New Owner- OWNER

Your Dream House, LLC

Arnshtang, Cynthia

RECORD OF OWNERSHIP

| DEED DATE | DATE REC. | BOOK  | PAGE  | SRLA NO. | NUM | RATIO | SALE PRICE |
|-----------|-----------|-------|-------|----------|-----|-------|------------|
| 4-22-16   | 5-11-16   | 20160 | 40326 |          | 13  |       | \$61,000   |
| 5-11-16   | 5-11-16   | 20170 | 4445  |          |     |       | \$23,000   |

| CODE                 | SIZE / AREA         | QUALITY FACTOR | NET CONDITION     | FIELD PRICE |
|----------------------|---------------------|----------------|-------------------|-------------|
| 01 = DET. GARAGE     | 09 = POOL VINYL     |                | 17 = FARM SHED    |             |
| 02 = DET. CARPORT    | 10 = POOL ASV GRND  |                | 18 = POLE BARN    |             |
| 03 = SHED 1 STORY    | 11 = C.C. PAVING    |                | 19 = STABLE       |             |
| 04 = SHED 1.5 STORY  | 12 = ASPHALT PAVING |                | 20 = ROULTRY SHED |             |
| 05 = SHED 2 STORY    | 13 = TENNIS COURT   |                | 21 = SILO         |             |
| 06 = FIN. SHED 1 STY | 14 = BARN           |                | 22 = SMALL SHED   |             |
| 07 = FIN. SHED 1.5 S | 15 = DAIRY BARN     |                | 23 =              |             |
| 08 = POOL GUNITE     | 16 = BARN W/LOFT    |                | 24 =              |             |

85.00 COMMENTS

| MEAS. | BY    | DATE   | #1 | BY | DATE |
|-------|-------|--------|----|----|------|
| CD    |       | 9-6-12 | CD |    |      |
| LIST  | PRICE | REVIEW | #2 | #3 | #4   |
|       |       |        |    |    |      |

House 100% complete

DEPT OF PROPERTY TAXATION

RECEIVED

2012 OCT 18 A 4:00

CITY OF EAST ORANGE

70.00 LAND SCHEDULE (FRONT FOOT METHOD)

| LAND ZONE | FRONT FOOTAGE | AVERAGE DEPTH | UNIT RATE | ADJ. PCT. | ADJ. PCT. | ADJ. PCT. |
|-----------|---------------|---------------|-----------|-----------|-----------|-----------|
| 1         |               |               |           |           |           |           |
| 2         |               |               |           |           |           |           |
| 3         |               |               |           |           |           |           |
| 4         |               |               |           |           |           |           |

71.00 LAND SCHEDULE (UNIT RATE METHOD)

| LAND ZONE | FRONT FOOTAGE | AVERAGE DEPTH | UNIT RATE | ADJ. PCT. | ADJ. PCT. | ADJ. PCT. |
|-----------|---------------|---------------|-----------|-----------|-----------|-----------|
| 1         |               |               |           |           |           |           |
| 2         |               |               |           |           |           |           |
| 3         |               |               |           |           |           |           |
| 4         |               |               |           |           |           |           |

INSPECTION SIGNATURE

DATE

9/12/12

[illegible]

RECEIVED  
DEPT OF PROPERTY TAXATION  
OCT 18 A 9:00  
CITY OF EAST ORANGE

BLOCK 551 LOT 78 QUAL  
PROP LOC 15 MELMORE GARDENS  
TAX MAP 2-3  
ZONING  
PROP CLS 2  
LAND DES 24X159  
BLDG DES 25-B-CL

ABDL LUIS  
BARNES, LARRY THOMAS & STEVEN  
15 MELMORE GARDENS  
EAST ORANGE, N.J.  
07017

SALE HIST  
SALE DATE  
SALE PRICE

CURRENT 1ST PREV 2ND PREV VAL IVAL

CURRENT ASSESSED - LAND VAL 63,800  
IMPR VAL 51,500  
TOTL VAL 115,300

50.00 NEIGHBORHOOD

|                                                  |                                               |                                           |
|--------------------------------------------------|-----------------------------------------------|-------------------------------------------|
| <input checked="" type="checkbox"/> 01 TYPICAL   | <input checked="" type="checkbox"/> 01 PAVED  | <input type="checkbox"/> 01 OVERBUILT     |
| <input type="checkbox"/> 02 INFERIOR             | <input type="checkbox"/> 02 GRAVEL            | <input type="checkbox"/> 02 UNDERIMPROVED |
| <input type="checkbox"/> 03 SUPERIOR             | <input type="checkbox"/> 03 DIRT              | <input type="checkbox"/> 03 POOR LAND OUT |
| <input type="checkbox"/> 04 STABLE               | <input type="checkbox"/> 04 PRIVATE           | <input type="checkbox"/> 04 NEXT COMM.    |
| <input type="checkbox"/> 05 DECLINING            | <input type="checkbox"/> 05 NONE              | <input type="checkbox"/> 05 TRANSITIONAL  |
| <input type="checkbox"/> 06 IMPROVING            | <input type="checkbox"/> 06 NONE              | <input type="checkbox"/> 06 NO PARKING    |
| <input type="checkbox"/> 07 RURAL                | <input type="checkbox"/> 07 CURBING           | <input type="checkbox"/> 07 POOR STYLE    |
| <input type="checkbox"/> 08 CROSSROADS           | <input checked="" type="checkbox"/> 01 YES    | <input type="checkbox"/> 08 NO GARAGE     |
| <input type="checkbox"/> 09 SUBURBAN             | <input type="checkbox"/> 09 NONE              | <input type="checkbox"/> 09 INDUS. LOC.   |
| <input type="checkbox"/> 10 URBAN                | <input type="checkbox"/> 09 NONE              | <input type="checkbox"/> 10 POWER LINES   |
| <input type="checkbox"/> 11 SUBDIVISION          | <input type="checkbox"/> 56.00 SIDEWALK       | <input type="checkbox"/> 11 NO STR. LIGHT |
| <input type="checkbox"/> 12 MIXED                | <input checked="" type="checkbox"/> 01 YES    | <input type="checkbox"/> 12 INFERIOR SERV |
| <input type="checkbox"/> 51.00 VIEW              | <input type="checkbox"/> 01 NONE              | <input type="checkbox"/> 13 SUPERIOR SERV |
| <input checked="" type="checkbox"/> 01 TYPICAL   | <input type="checkbox"/> 01 YES               | <input type="checkbox"/> 14 HEAVY TRAFFIC |
| <input type="checkbox"/> 02 DETRIMENTAL          | <input type="checkbox"/> 01 NONE              | <input type="checkbox"/> 15 LIGHT TRAFFIC |
| <input type="checkbox"/> 03 ENHANCING            | <input type="checkbox"/> 01 NONE              | <input type="checkbox"/> 16 UNDERGRD UTIL |
| <input type="checkbox"/> 04 LAKE VIEW            | <input type="checkbox"/> 01 NONE              | <input type="checkbox"/> 17 FUNG. OBSOL.  |
| <input type="checkbox"/> 52.00 UTILITIES         | <input type="checkbox"/> 01 NONE              | <input type="checkbox"/> 18 ECON OBSOL.   |
| <input checked="" type="checkbox"/> 01 ALL       | <input type="checkbox"/> 62.00 LAND COND.     | <input type="checkbox"/> 01 COMMERCIAL    |
| <input type="checkbox"/> 02 ELECTRIC             | <input type="checkbox"/> 01 NO RIGHT TO BLDG. | <input type="checkbox"/> 02 VIEW          |
| <input type="checkbox"/> 03 GAS                  | <input type="checkbox"/> 02 ALLEY SHAPE       | <input type="checkbox"/> 03 MISC.         |
| <input type="checkbox"/> 04 WATER                | <input type="checkbox"/> 03 FLAG LOT          | <input type="checkbox"/> 04               |
| <input type="checkbox"/> 05 SEWER                | <input type="checkbox"/> 04 SEVERE EASEMENTS  | <input type="checkbox"/> 05               |
| <input type="checkbox"/> 06 WELL                 | <input type="checkbox"/> 05 UNIMPRV ROAD      | <input type="checkbox"/> 06               |
| <input type="checkbox"/> 07 SEPTIC               | <input type="checkbox"/> 06 SLOPE             | <input type="checkbox"/> 07               |
| <input type="checkbox"/> 08 SUMP/SEW CON.        | <input type="checkbox"/> 07 LAND LOCKED       | <input type="checkbox"/> 08               |
| <input type="checkbox"/> 09 SUMP/NO SEW          | <input type="checkbox"/> 08 FLOOD PLAIN       | <input type="checkbox"/> 09               |
| <input type="checkbox"/> 90 NONE                 | <input type="checkbox"/> 09 SHARED DRIVEWAY   | <input type="checkbox"/> 10               |
| <input type="checkbox"/> 53.00 INFO. BY          | <input type="checkbox"/> 10 POOR LOCATION     | <input type="checkbox"/> 11               |
| <input type="checkbox"/> 01 OWNER                | <input type="checkbox"/> 11 TOPOGRAPHY        | <input type="checkbox"/> 12               |
| <input type="checkbox"/> 02 SPOUSE               | <input type="checkbox"/> 12 TRIANGLE          | <input type="checkbox"/> 13               |
| <input type="checkbox"/> 03 TENANT               | <input type="checkbox"/> 13 IRREGULAR         | <input type="checkbox"/> 14               |
| <input type="checkbox"/> 04 AGENT                | <input type="checkbox"/> 14                   | <input type="checkbox"/> 15               |
| <input type="checkbox"/> 05 AT DOOR              | <input type="checkbox"/> 15                   | <input type="checkbox"/> 16               |
| <input type="checkbox"/> 06 REFUSED              | <input type="checkbox"/> 16                   |                                           |
| <input checked="" type="checkbox"/> 07 ESTIMATED |                                               |                                           |

61.00 MARKET INFLUENCE

15.00 ACCESSORY & FARM BUILDINGS

| CODE         | SIZE / AREA | QUALITY FACTOR | NET CONDITION | FIELD PRICE |
|--------------|-------------|----------------|---------------|-------------|
| DET Part 182 | 182         | 1.00           | A-V           | Old         |
|              |             |                |               |             |
|              |             |                |               |             |
|              |             |                |               |             |
|              |             |                |               |             |
|              |             |                |               |             |
|              |             |                |               |             |
|              |             |                |               |             |
|              |             |                |               |             |
|              |             |                |               |             |

CODE LEGEND:

01 = DET. GARAGE  
02 = DET. CARPORT  
03 = SHED 1 STORY  
04 = SHED 1.5 STORY  
05 = SHED 2 STORY  
06 = FIN. SHED 1 STY  
07 = FIN. SHED 1.5 S  
08 = POOL, GUNITE  
09 = POOL VINYL  
10 = POOL ABY GRND  
11 = C.C. PAVING  
12 = ASPHALT PAVING  
13 = TENNIS COURT  
14 = BARN  
15 = DAIRY BARN  
16 = BARN W/LOFT  
17 = FARM SHED  
18 = POLE BARN  
19 = STABLE  
20 = FOLITRY SHED  
21 = SILO  
22 = SMALL SHED  
23 =  
24 =

70.00 LAND SCHEDULE (FRONT FOOT METHOD)

| LAND ZONE | FRONT FOOTAGE | AVERAGE DEPTH | DEPTH | UNIT RATE | ADJ. CODE | ADJ. PCT. | ADJ. CODE | ADJ. PCT. |
|-----------|---------------|---------------|-------|-----------|-----------|-----------|-----------|-----------|
| 1         |               |               |       |           |           |           |           |           |
| 2         |               |               |       |           |           |           |           |           |
| 3         |               |               |       |           |           |           |           |           |
| 4         |               |               |       |           |           |           |           |           |

71.00 LAND SCHEDULE (UNIT RATE METHOD)

| LAND ZONE | DESC. CODE | NUMBER OF UNITS | UNIT RATE | ADJ. CODE | ADJ. PCT. | ADJ. CODE | ADJ. PCT. |
|-----------|------------|-----------------|-----------|-----------|-----------|-----------|-----------|
| 1         |            |                 |           |           |           |           |           |
| 2         |            |                 |           |           |           |           |           |
| 3         |            |                 |           |           |           |           |           |
| 4         |            |                 |           |           |           |           |           |

80.00 WORK RECORD

| MEAS.  | BY   | DATE     |
|--------|------|----------|
| MEAS.  | MEER | 10/18/12 |
| LIST   |      |          |
| PRICE  |      |          |
| REVIEW |      |          |

81.00 FIELD CALLS

| #1   | BY   | DATE     |
|------|------|----------|
| MEER | MEER | 10/18/12 |
| #2   |      |          |
| #3   |      |          |
| #4   |      |          |

85.00 COMMENTS

|    |  |
|----|--|
| 01 |  |
| 02 |  |
| 03 |  |
| 04 |  |
| 05 |  |
| 06 |  |
| 07 |  |
| 08 |  |
| 09 |  |

RECEIVED  
DEPT OF PROPERTY TAXATION  
2012 OCT 18 A 9:01  
CITY OF EAST ORANGE

|                      |
|----------------------|
| INSPECTION SIGNATURE |
| DATE                 |

Kane 10/12

[illegible]

BLOCK 162 LOT 26 QUAL  
PROP LOC 191 GREENWOOD AVE.  
TAX MAP 5-3  
ZONING  
PROP CLS 2  
LAND DES 33X100  
BLDG DES 25-F-CL-DG

Block: 162 Lot: 26 CARD OF  
GRI 191 New Owner-  
EAS Christiana Trust  
OWNER  
DEED DATE 5-27-16 DATE REC. 6-22-16 BOOK 20160 PAGE 52158 SRIA NO. 18 RATIO SALE PRICE \$10-  
CUP

50.00 NEIGHBORHOOD

01 TYPICAL  
02 INTERIOR  
03 SUPERIOR  
04 STABLE  
05 DECLINING  
06 IMPROVING  
07 RURAL  
08 CROSSROADS  
09 SUBURBAN  
10 URBAN  
11 SUBDIVISION  
12 MIXED  
51.00 VIEW  
01 TYPICAL  
02 DETRIMENTAL  
03 ENHANCING  
04 LAKE VIEW  
52.00 UTILITIES  
01 ALL  
02 ELECTRIC  
03 GAS  
04 WATER  
05 SEWER  
06 WELL  
07 SEPTIC  
08 SUMP/SEW CON.  
09 SUMP/NO SEW  
90 NONE  
53.00 INFO. BY  
01 OWNER  
02 SPOUSE  
03 TENANT  
04 AGENT  
05 AT DOOR  
06 REFUSED  
07 ESTIMATED

54.00 ROAD

01 PAVED  
02 GRAVEL  
03 DIRT  
04 PRIVATE  
90 NONE  
55.00 CURBING  
01 YES  
90 NONE  
56.00 SIDEWALK  
01 YES  
90 NONE

61.00 MARKET INFILL

01 OVERBUILT  
02 UNDERIMPROVED  
03 POOR LAYOUT  
04 NEXT COMM.  
05 TRANSITIONAL  
06 NO PARKING  
07 POOR STYLE  
08 NO GARAGE  
09 INDUS. LOC.  
10 POWER LINES  
11 NO STR. LIGHT  
12 INTERIOR SERV  
13 SUPERIOR SERV  
14 HEAVY TRAFFIC  
15 LIGHT TRAFFIC  
16 UNDERGRD UTIL  
17 FLUNG OBSC.  
18 ECON OBSC.  
62.00 LAND COND.  
01 NO RIGHT TO BLDG.  
02 ALLEY SHAPE  
03 FLAG LOT  
04 SEVERE EASEMENTS  
05 UNIMPRV ROAD  
06 SLOPE  
07 LAND LOCKED  
08 FLOOD PLAIN  
09 SHARED DRIVEWAY  
10 POOR LOCATION  
11 TOPOGRAPHY  
12 TRIANGLE  
13 IRREGULAR  
14  
15  
16

| CODE | SIZE / AREA | QUALITY FACTOR | CONDITION | PRICE |
|------|-------------|----------------|-----------|-------|
| 01   | 20x20       | 1.00           | AVG       | 600   |

CODE LEGEND:

01 = DET. GARAGE  
02 = DET. CARPORT  
03 = SHED 1 STORY  
04 = SHED 1.5 STORY  
05 = SHED 2 STORY  
06 = FIN. SHED 1 STY  
07 = FIN. SHED 1.5 S  
08 = POOL. GUNITE  
09 = POOL. VINYL  
10 = POOL. ABV GRND  
11 = C.C. PAVING  
12 = ASPHALT PAVING  
13 = TENNIS COURT  
14 = BARN  
15 = DAIRY BARN  
16 = BARN W/LOFT  
17 = FARM SHED  
18 = POLE BARN  
19 = STABLE  
20 = POULTRY SHED  
21 = SILO  
22 = SMALL SHED  
23 =  
24 =

85.00 COMMENTS

| MEAS. | LIST | PRICE | REVIEW |
|-------|------|-------|--------|
| 01    | 01   | 01    | 01     |

| #1 | #2 | #3 | #4 |
|----|----|----|----|
| 01 | 01 | 01 | 01 |

70.00 LAND SCHEDULE (FRONT FOOT METHOD)

| LAND ZONE | FRONT FOOTAGE | AVERAGE DEPTH | DEPTH | UNIT RATE | ADJ. CODE | ADJ. FCT. | ADJ. CODE | ADJ. FCT. |
|-----------|---------------|---------------|-------|-----------|-----------|-----------|-----------|-----------|
| 1         |               |               |       |           |           |           |           |           |
| 2         |               |               |       |           |           |           |           |           |
| 3         |               |               |       |           |           |           |           |           |
| 4         |               |               |       |           |           |           |           |           |

71.00 LAND SCHEDULE (UNIT RATE METHOD)

| LAND ZONE | DESC. CODE | NUMBER OF UNITS | UNIT RATE | ADJ. CODE | ADJ. FCT. | ADJ. CODE | ADJ. FCT. |
|-----------|------------|-----------------|-----------|-----------|-----------|-----------|-----------|
| 1         |            |                 |           |           |           |           |           |
| 2         |            |                 |           |           |           |           |           |
| 3         |            |                 |           |           |           |           |           |
| 4         |            |                 |           |           |           |           |           |

01  
02  
03  
04  
05  
06  
07  
08  
09

INSPECTION SIGNATURE  
DATE

2021 OCT 18 A 8:02  
RECEIVED PROPERTY TAXATION  
CITY OF EAST ORANGE

1-16-13

|                      |  |                         |  |                         |     |                           |       |
|----------------------|--|-------------------------|--|-------------------------|-----|---------------------------|-------|
| 21.00 TYPE + USE     |  | 25.00 ROOF MATERIAL     |  | 30.00 BASEMENT AREA QF  |     | 35.00 FIREPLACE NO. QF    |       |
| 10 ONE FAMILY        |  | 01 BUILT-UP             |  | 01 SF FINISH            | 500 | 01 1 STORY                |       |
| 20 DUPLEX            |  | 02 METAL                |  | 02 SF LIVING            |     | 02 1 1/2 STORY            |       |
| 30 ROW/TOWNHOUSE     |  | 03 ROLL                 |  | 90 NONE                 |     | 03 2 STORY                |       |
| 31 END ROW/TOWN      |  | 04 ASPHALT SHINGLE      |  | 31.00 HEATING SOURCE    |     | 04 SAME STACK             |       |
| 42 MULTIFAMILY 2     |  | 05 SLATE                |  | 01 ELECTRIC             |     | 05 FREESTANDING           |       |
| 43 MULTIFAMILY 3     |  | 06 TILE                 |  | 02 GAS                  |     | 06 HEAT/DRAIN             |       |
| 44 MULTIFAMILY 4     |  | 07 WOOD SHINGLE         |  | 03 OIL                  |     | 07 NONE                   |       |
| 51 CONVERSION 1      |  | 80 OTHER                |  | 04 COAL                 |     | 37.00 ATTIC-DORM. AREA QF |       |
| 52 CONVERSION 2      |  | 25.00 EXT. FIN. AREA QF |  | 05 SOLAR                |     | X 02 FINISH ATTIC         |       |
| 53 CONVERSION 3      |  | 01 WOOD SIDING          |  | 90 NONE                 |     | X 03 DORMER (U)           | 16.00 |
| 54 CONVERSION 4      |  | 02 WOOD SHINGLE         |  | 32.00 HEAT SYS. AREA QF |     | 04 DORMER (L)             |       |
| 55 CONVERSION 5      |  | 03 ALUMINUM VINYL       |  | 01 FLOORWALL            |     | 39.00 UNF AREAS AREA QF   |       |
| 60 CONDOMINIUM       |  | 04 ASBESTOS             |  | 02 AIRGRNTY             |     | 01 FULL STORY             |       |
|                      |  | 05 STUCCO               |  | 03 FORCED AIR           |     | 02 HALF STORY             |       |
|                      |  | 06 CINDERBLK            |  | 04 HOTWATER BD          |     | 01 RANGE/OVEN             |       |
| 22.00 STORY HEIGHT   |  | 07 PLYWOOD PNL          |  | 05 WATER RAD            |     | 02 FRESHND RANGE          |       |
| 01 1 STORY           |  | 08 ALL BRICK            |  | 07 RACNT ELEC           |     | 03 ELECTRIC OVEN          |       |
| 02 1 STORY W/ATTIC   |  | 09 ALL STONE            |  | 08 HEAT PUMP            |     | 04 DISHWASHER             |       |
| 03 1 1/2 STORY       |  | 10 PT BRICK             |  | 09 UNIT HEATER          |     | 05 EXTRA KITCHEN          |       |
| 04 2 STORY           |  | 11 PT STONE             |  | 90 NONE                 |     | 06 HIDDEN KITCHEN         |       |
| 05 2 STORY W/ATTIC   |  | 27.00 FOUNDATION        |  | 33.00 ELECTRIC          |     | 07 OLD RASH KIT           |       |
| 06 2 1/2 STORY       |  | 01 PILING               |  | X 01 ADEQUATE           |     | 08 CENTRAL VACUUM         |       |
| 07 3 STORY           |  | 02 BLOCK/CONCRETE       |  | 02 LIMITED              |     | 09 INTERIOD               |       |
| 08 3 STORY W/ATTIC   |  | 03 BRICK                |  | 90 NONE                 |     | 10 SECURITY SYS           |       |
| 09 3 1/2 STORY       |  | 04 STONE                |  | 34.00 AIR COND. AREA QF |     | 11 SMOKE DETECT           |       |
|                      |  | 05 POST/RIER            |  | 01 ALL SEPARATE         |     | 12 ELEC OMID DOOR         |       |
| 23.00 DESIGN + STYLE |  | 06 CONCRETE SLAB        |  | 02 ALL COMBINE          |     | 13 SPRINKLER              |       |
| 01 CONVENTIONAL      |  | 28.00 INTERIOR FINISH   |  | 04 PT SEPRIT            |     | 14                        |       |
| 02 COLONIAL          |  | X 01 DRYWALL            |  | 05 PT COAL              |     | 15                        |       |
| 03 RANCH             |  | 02 PLASTER              |  | 06 PT UNIT              |     | 16                        |       |
| 04 RAISED RANCH      |  | 03 KNOTTY PINE          |  | 35.00 PLUMBING NO. QF   |     | 40.00 WRITE-INS VALUE QF  |       |
| 05 CAPE              |  | 04 WOOD PANEL           |  | 01 4 RYR BWH            |     | 01                        |       |
| 06 SPLIT LEVEL       |  | 05 WALL BOARD           |  | 02 3 RYR BWH            |     | 41.00 GARAGES NO CARS     |       |
| 07 BI-LEVEL          |  | 06 PAINTED CB           |  | X 03 2 RYR BWH          |     | 01                        |       |
| 08 CONTEMPORARY      |  | 29.00 FLOOR FINISH      |  | 04 1 RYR BWH            |     | 01                        |       |
| 09 COTTAGE           |  | 01 HARDWOOD             |  | 05 KITCHEN SINK         |     | 01                        |       |
| X 10 OLD STYLE       |  | 02 PINE                 |  | 06 SQUARHOT             |     | 01                        |       |
| 00 OTHER             |  | 03 MIXED                |  | 07 LAUNDRY TB           |     | 01                        |       |
|                      |  | 04 SINGLE               |  | 08 WATERHTR             |     | 01                        |       |
| 24.00 ROOF TYPE      |  | 05 COMPOST TILE         |  | 09 HOT TUB              |     | 01                        |       |
| 01 FLAT/SHED         |  | 06 PART CARPET          |  | 10 JACOZZI              |     | 01                        |       |
| 02 GABLE             |  | 07 PART TILE            |  | 90 NONE                 |     | 01                        |       |
| 03 GAMBLE            |  | 08 CERAMIC TILE         |  |                         |     | 01                        |       |
| 04 HIP               |  | 09 CONCRETE SLAB        |  |                         |     | 01                        |       |
| 05 MANSARD           |  | 10 EARTH BASEMENT       |  |                         |     | 01                        |       |
| 06 CONTEMPORARY      |  |                         |  |                         |     | 01                        |       |
| 00 OTHER             |  |                         |  |                         |     | 01                        |       |

BLOCK 162 LOT 26 QUAL 4 CARD 1 OF 1 V.C.S.

BLDG. CLASS 16  
PROP. CLASS 2  
YEAR BUILT 1925

BUILDING SKETCH (1 SQUARE EQUALS 4')

11.00 ATTACHED ITEMS

| CODE | SEG. | AREA | ATTACH CODE LEGEND |
|------|------|------|--------------------|
| 01   |      |      | 01-WOOD DECK       |
| 02   |      |      | 02-CONC PATIO      |
| 03   |      |      | 03-FLAG PATIO      |
| 04   |      |      | 04-BRICK PATIO     |
| 05   |      |      | 05-OPEN PORCH      |
| 06   |      |      | 06-GLAZ PORCH      |
| 07   |      |      | 07-ENCL PORCH      |
| 08   |      |      | 08-BSMT GAR        |
| 09   |      |      | 09-ATT GAR         |
| 10   |      |      | 10-ATT CARPORT     |
| 11   |      |      | 11-ATT CANOPY      |
| 12   |      |      | 12-BI GARAGE       |
| 13   |      |      | 13-BI OPN PCH      |
| 14   |      |      | 14-BI ENC PCH      |

65.00 CAPITAL IMPROVEMENTS

| CODE | DATE | COST |
|------|------|------|
| 01   |      |      |
| 02   |      |      |
| 03   |      |      |

CITY OF EAST ORANGE

CAPITAL IMPROVE CODES:  
01=ADDN  
02=REPAIR  
03=REPLACE  
04=ATTIC  
05=BASEMENT  
06=ADDITION

CODES: 1=EXCEL 2=GOOD 3=FAIR 4=POOR 5=C

60.00 NET CONDITION  
01 INTERIOR FINISH  
02 EXTERIOR FINISH  
03 LAYOUT

45.00 ROOM CNT.

|               | B | 1 | 2 |
|---------------|---|---|---|
| 01 LIVING RM  |   | 1 |   |
| 02 DINING RM  |   | 1 |   |
| 03 KITCHEN    |   | 1 |   |
| 04 BATH       |   | 1 |   |
| 05 BEDROOM    |   | 1 |   |
| 06 REC. ROOM  |   | 1 |   |
| 07 DEN/OFFICE |   |   |   |

## Account Information

[Print](#)

16806-0  
CYNTHIA ARNSTROM

Tenant/Owner: O  
Credit Rating: B  
Customer Number: 106806  
Home Phone: 973-495-8702  
Bus. Phone:

### Active Account

| More Info         |        |
|-------------------|--------|
| Active Accounts   | 1      |
| Finalled Accounts | 0      |
| Customer Balance  | \$0.00 |
| Premise Accounts  | 1      |

**SERVICE ADDRESS**  
135 NORMAN ST  
EAST ORANGE NJ  
07017

**MAILING ADDRESS**  
135 NORMAN ST  
EAST ORANGE NJ  
07017



## Services



| Service | Category | Bill Code | Balance | Due Date  | Last Bill Date | Last Bill Amount |
|---------|----------|-----------|---------|-----------|----------------|------------------|
| WATER   | RE       | WRQ58     | \$0.00  | 8/23/2021 | 7/23/2021      | \$38.30          |
| SEWER   | RE       | SRQ58     | \$0.00  | 8/23/2021 | 7/23/2021      | \$38.40          |
| Total   |          |           | \$0.00  |           |                |                  |

## Call History



## Balance History



## Bill History



## Usage History



## Sentinel Lights



## Deposit



## Miscellaneous Billing



## Electric Meter Info



## Water Meter Info



## Gas Meter Info



## Electric Read Info



## Water Read Info



## Gas Read Info



## Contact Info



## Grid Rates



## Account Information

[Print](#)

17123-0  
BARNES, LARRY J &

Tenant/Owner: O  
Credit Rating: B  
Customer Number: 107123  
Home Phone: 000-677-1470  
Bus. Phone:

### Active Account

| More Info         |         |
|-------------------|---------|
| Active Accounts   | 1       |
| Finalled Accounts | 0       |
| Customer Balance  | \$84.79 |
| Premise Accounts  | 1       |

**SERVICE ADDRESS**  
15 MELMORE GDNS  
EAST ORANGE NJ  
07017

**MAILING ADDRESS**  
THOMAS & STEVEN  
15 MELMORE GDNS  
EAST ORANGE NJ  
07017-2548



## Services

| Service | Category | Bill Code | Balance | Due Date   | Last Bill Date | Last Bill Amount |
|---------|----------|-----------|---------|------------|----------------|------------------|
| WATER   | RE       | WRQ58     | \$42.32 | 10/27/2021 | 9/27/2021      | \$42.34          |
| SEWER   | RE       | SRQ58     | \$42.47 | 10/27/2021 | 9/27/2021      | \$42.47          |
| Total   |          |           | \$84.79 |            |                |                  |

## Call History

## Balance History

## Bill History

## Usage History

## Sentinel Lights

## Deposit

## Miscellaneous Billing

## Electric Meter Info

## Water Meter Info

## Gas Meter Info

## Electric Read Info

## Water Read Info

## Gas Read Info

## Contact Info

## Grid Rates

## Account Information

[Print](#)

20217-0  
KIMBERLY MITCHELL

Tenant/Owner: O  
Credit Rating: Y  
Customer Number: 112417  
Home Phone:  
Bus. Phone:

### Active Account

| More Info         |          |
|-------------------|----------|
| Active Accounts   | 1        |
| Finalled Accounts | 0        |
| Customer Balance  | \$670.38 |
| Premise Accounts  | 1        |

**SERVICE ADDRESS**  
191 GREENWOOD AVE  
EAST ORANGE NJ  
07017

**MAILING ADDRESS**  
1491 STERLING PL, 1ST FL  
BROOKLYN NY  
11213



## Services

| Service | Category | Bill Code | Balance  | Due Date  | Last Bill Date | Last Bill Amount |
|---------|----------|-----------|----------|-----------|----------------|------------------|
| WATER   | RE       | WRQ58     | \$357.29 | 9/23/2021 | 8/24/2021      | \$38.30          |
| SEWER   | RE       | SRQ58     | \$313.09 | 9/23/2021 | 8/24/2021      | \$38.40          |
| Total   |          |           | \$670.38 |           |                |                  |

## Call History

## Balance History

## Bill History

## Usage History

## Sentinel Lights

## Deposit

## Miscellaneous Billing

## Electric Meter Info

## Water Meter Info

## Gas Meter Info

## Electric Read Info

## Water Read Info

## Gas Read Info

## Contact Info

## Grid Rates



# CONSTRUCTION PERMIT

Date Issued 1/25/2002  
Control # 12157  
Permit # 20020092

IDENTIFICATION Block: 162 Lot: 26 Qualifier \_\_\_\_\_  
Work Site Location: 191 GREENWOOD AVE. East Orange, NJ Contractor IANIRO CONSTRUCTION  
Address 419 VALLEY STREET ORANGE NJ 07050  
Owner in Fee Darren Gultson  
191 GREENWOOD AVE. EAST ORANGE NJ Telephone: (973) 678-2545  
07017 Lic. No. or Bldrs. Reg. No. \_\_\_\_\_  
Telephone: (732) 921-8687 Federal Employee No. -400273

Is hereby granted permission to perform the following work:

- |                                              |                                                                    |                                                |
|----------------------------------------------|--------------------------------------------------------------------|------------------------------------------------|
| <input checked="" type="checkbox"/> BUILDING | <input type="checkbox"/> PLUMBING                                  | <input type="checkbox"/> LEAD HAZARD ABATEMENT |
| <input type="checkbox"/> ELECTRICAL          | <input type="checkbox"/> FIRE PROTECTION                           | <input checked="" type="checkbox"/> DEMOLITION |
| <input type="checkbox"/> ELEVATOR DEVICES    | <input type="checkbox"/> ASBESTOS ABATEMENT<br>(Subchapter 8 only) | <input type="checkbox"/> OTHER                 |

DESCRIPTION OF WORK:

sandfill 1 550 gallon home heating oil tank

**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 \$750

## PAYMENTS (Office Use Only)

|                  |        |
|------------------|--------|
| Building         | \$100  |
| Electrical       | \$0    |
| Plumbing         | \$0    |
| Fire Protection  | \$0    |
| Elevator Devices | \$0    |
| Other            | \$0.00 |
| DCA Training Fee | \$0    |
| CO Fee           |        |
| Other            | \$0    |
| Total            | \$100  |
| Check No.        | m/o    |
| Cash             | \$0    |
| Credit           | \$0    |
| Collected By     | gt     |

Construction Official \_\_\_\_\_

Date \_\_\_\_\_

U.C.C. F170  
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

## REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



# BUILDING SUBCODE TECHNICAL SECTION



Date Received 1/18/2002  
Control # 12157  
Date Issued 1/25/2002  
Permit # 20020092

**A. IDENTIFICATION - APPLICANT:** COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000  
Block 162 Lot 26 Qualification Code \_\_\_\_\_  
Work Site Location: 191 GREENWOOD AVE. East Orange, NJ

Owner in Fee: Darren Gultson

Address 191 GREENWOOD AVE. EAST ORANGE NJ 07017

Tel. (732) 921-8687 Email \_\_\_\_\_

Contractor: JANIRO CONSTRUCTION

Address 419 VALLEY STREET ORANGE NJ 07050

Email \_\_\_\_\_

Tel. (973) 678-2545 Fax \_\_\_\_\_

Contractor License No. or, if new home, Bids Reg. No. \_\_\_\_\_ Exp. \_\_\_\_\_

Home Improvement Contractor Registration No. or Exemption Reason(s) applicable): \_\_\_\_\_

Federal Emp. ID No. 22-1634921

## JOB SUMMARY (Office Use Only)

| PLAN REVIEW                                                                                                                    | Date  | Initial |
|--------------------------------------------------------------------------------------------------------------------------------|-------|---------|
| <input type="checkbox"/> No Plan Required                                                                                      | _____ | _____   |
| <input type="checkbox"/> All                                                                                                   | _____ | _____   |
| <input type="checkbox"/> Footing/Foundation                                                                                    | _____ | _____   |
| <input type="checkbox"/> Struct/Framework                                                                                      | _____ | _____   |
| <input type="checkbox"/> Exterior                                                                                              | _____ | _____   |
| <input type="checkbox"/> Interior                                                                                              | _____ | _____   |
| <input type="checkbox"/> Joint Plan Review Required                                                                            | _____ | _____   |
| <input type="checkbox"/> Elec. <input type="checkbox"/> Plumb. <input type="checkbox"/> Fire <input type="checkbox"/> Elevator | _____ | _____   |
| SUBCODE APPROVAL for PERMIT                                                                                                    |       |         |
| Date: _____                                                                                                                    |       |         |
| Approved by: _____                                                                                                             |       |         |

## INSPECTIONS

| Type:               | Failure | Dates (Month/Day) | 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 <u>U</u> | Proposed _____ | If Industrial Building: |
| Constr. Class | Present _____    | Proposed _____ | State Approved _____    |

Number of Stories \_\_\_\_\_

Height of Structure \_\_\_\_\_ 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. Rehabilitation | <u>\$750</u> |
| 3. Total (1+2)    | _____        |

## C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of the record and am authorized to make this application.

Signature \_\_\_\_\_

Print Name Here: \_\_\_\_\_

## D. TECHNICAL SITE DATA

### DESCRIPTION OF WORK

sandfill 1 550 gallon home heating oil tank

### TYPE OF WORK

|                                                          |                           |
|----------------------------------------------------------|---------------------------|
| <input type="checkbox"/> New Building                    | _____                     |
| <input type="checkbox"/> Addition                        | _____                     |
| <input type="checkbox"/> Rehabilitation                  | _____                     |
| <input type="checkbox"/> Roofing                         | _____                     |
| <input type="checkbox"/> Siding                          | _____                     |
| <input type="checkbox"/> Fence _____                     | Height (exceeds 6') _____ |
| <input type="checkbox"/> Sign _____                      | Sq. Ft. _____             |
| <input type="checkbox"/> Pool                            | _____                     |
| <input type="checkbox"/> Retaining Wall _____            | Sq. Ft. _____             |
| <input type="checkbox"/> Asbestos Abatement Subchapter 8 | _____                     |
| <input type="checkbox"/> Lead Haz Abatement NJAC 5:17    | _____                     |
| <input type="checkbox"/> Radon Remediation               | _____                     |
| <input type="checkbox"/> Other _____                     | _____                     |
| <input checked="" type="checkbox"/> Demolition           | _____                     |

### FEE (Office Use Only)

|                            |       |
|----------------------------|-------|
| Administrative Surcharge   | _____ |
| Minimum Fee                | _____ |
| State Permit Surcharge Fee | _____ |
| TOTAL FEE                  | _____ |

\$100