

ASSESSOR
TAX COLLECTOR
BUILDING/ZONING
ENGINEERING
HOUSING

MITCH, JOHN

From: Omar H. Nababteh <opra+request-15516-8ddbddd89@requests.opramachine.com>
Sent: Thursday, July 23, 2020 6:11 PM
To: MITCH, JOHN
Subject: OPRA request - OPRA Request

Dear Woodbridge Township,

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:

PROPERTY RECORD CARD

OPEN LIENS, OPEN VIOLATIONS

ALL OPEN AND CLOSED BUILDING PERMITS,

PERMIT/INSPECTIONS REPORTS,

ZONING/ENGINEERING APPROVALS/REJECTIONS SURVEYS/ELEVATION CERTIFICATES DRAWINGS/PLOT PLANS

ANYTHING REGARDING SEPTIC OR OIL TANK

6-closed Permits
1-Pending Permit
No Open Building Violations
2 Zoning Permits

Property Loc: 261 Berkley Street

Iselin NJ 08830

County: Middlesex

Township: Woodbridge

Block: 376.E

Lot: 22

OPRA Tracking #: 11266
Received Date: 7-24-20
Est'd. Ready Date: 8-3-20
Completed By: [Signature]
Date Completed: 7-27-2020

Yours faithfully,
Omar

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-15516-8ddbddd89@requests.opramachine.com

Is john.mitch@twp.woodbridge.nj.us the wrong address for OPRA requests to Woodbridge Township? If so, please contact us using this form:

https://opramachine.com/change_request/new?body=woodbridge_township

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/opra_request_1310

Please note that in some cases publication of requests and responses will be delayed.



TOWNSHIP OF WOODBRIDGE
1 MAIN STREET
WOODBIDGE, NJ 07095
732 6344500

Pending Permit
Needs to be paid

Control Number: 1112612
Application Date: 05/18/20

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 376.05 Lot : 22 Qualifier :
Work Site Location: 261 BERKLEY ST ISELIN

Owner In Fee: DEDHIA, RAJENDRA M

Address: 261 BERKLEY ST
ISELIN NJ, 08830

Telephone: (732) 925-2762

Use Group(s): R-5

Contractor: WATER MANAGEMENT INC

Address: 1035 OLD GEORGES ROAD
NORTH BRUNSWICK NJ, 08902

Telephone: (908) 723-3999

Lic. No. / Bldrs. Reg. No.: 11128

Federal Emp. No.:

is hereby granted permission to perform the following work :

☐ BUILDING ☒ PLUMBING ☐ DEMOLITION
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ OTHER
☐ ELEVATOR DEVICES ☐ MECHANICAL
☐ ASBESTOS ABATEMENT ☐ LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:

Alterations: Replace sewer line

ESTIMATED COST OF WORK:

Cost of Construction: \$0.00
Cost of Alteration: \$7,500.00
Cost of Demolition: \$0.00

Total Cost: \$7,500.00

PAYMENTS (Office Use Only)

Building	
Electrical	
Plumbing	\$60.00
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$14.00
DCA Minimum Fee	\$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$74.00
All Fees Waived	No

Amount to be Paid: \$74.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

THOMAS J. KELLY

Date

Construction Official

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:



TOWNSHIP OF WOODBRIDGE
1 MAIN STREET
WOODBIDGE, NJ 07095
732 6344500

Permit Number: 20111679
Update Number:
Control Number: 1064005
Application Date: 06/07/11
Permit Date: 6/9/2011
Expiration Date: 06/08/2012

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 376.05 Lot : 22 Qualifier :
Work Site Location: 261 BERKLEY ST ISELIN
Owner In Fee: DEDHIA, RAJENDRA
Address: 261 BERKLEY ST
ISELIN NJ, 08830-2150
Telephone: (732) 283-1571
Use Group(s): R-5
Contractor: SAL MORTILLARO
Address: 60 PLEASANT AVE
ISELIN NJ, 08830
Telephone: (732) 382-1362
Lic. No. / Bldrs. Reg. No.: 13VH01583100
Federal Emp. No.:

is hereby granted permission to perform the following work :

☒ BUILDING ☐ PLUMBING ☐ DEMOLITION
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ OTHER
☐ ELEVATOR DEVICES ☐ MECHANICAL
☐ ASBESTOS ABATEMENT ☐ LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:

Roofing- (2 LAYERS MAXIMUM!)

ESTIMATED COST OF WORK:

Cost of Construction: \$0.00
Cost of Alteration: \$3,600.00
Cost of Demolition: \$0.00

Total Cost: \$3,600.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

THOMAS J. KELLY

Construction Official

Date

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:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENTS	(Office Use Only)
Building	\$80.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$6.00
DCA Minimum Fee	\$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$86.00
All Fees Waived	No

Amount to be Paid: \$86.00
Check Number: 1198
Check amount: \$86.00

Collected by: db
Receipt No:
Total Cash Amount:
Total Check Amount: \$86.00
Total CC Amount:
Grand Total: \$86.00



TOWNSHIP OF WOODBRIDGE
1 MAIN STREET
WOODBIDGE, NJ 07095
732 6344500

Permit Number: 20153876
Update Number:
Control Number: 1088596
Application Date: 11/05/15
Permit Date: 11/10/2015
Expiration Date: 11/09/2016

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 376.05 Lot : 22 Qualifier :
Work Site Location: 261 BERKLEY ST ISELIN
Owner In Fee: DEDHIA, RAJENDRA M
Address: 261 BERKLEY ST
ISELIN NJ, 08830
Telephone: (732) 283-1571
Use Group(s): R-5

Contractor: Advanced Air Heating & Cooling
Address: 34 Cozy Corner
Avenel NJ, 07001
Telephone: (732) 423-3939
Lic. No. / Bldrs. Reg. No.: 13VH04272000
Federal Emp. No.:

is hereby granted permission to perform the following work :

☐ BUILDING ☒ PLUMBING ☐ DEMOLITION
☒ ELECTRICAL ☒ FIRE PROTECTION ☐ OTHER
☐ ELEVATOR DEVICES ☐ MECHANICAL
☐ ASBESTOS ABATEMENT ☐ LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:

Alterations- Replace HVAC system

ESTIMATED COST OF WORK:

Cost of Construction: \$0.00
Cost of Alteration: \$6,600.00
Cost of Demolition: \$0.00

Total Cost: \$6,600.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

THOMAS J. KELLY

Construction Official

Date

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENTS	(Office Use Only)
Building	
Electrical	\$35.00
Plumbing	\$60.00
Fire Protection	\$46.00
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$13.00
DCA Minimum Fee	\$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$154.00
All Fees Waived	No

Amount to be Paid: \$154.00
Check Number: 2418
Check amount: \$154.00

Collected by: MO
Receipt No:
Total Cash Amount:
Total Check Amount: \$154.00
Total CC Amount:
Grand Total: \$154.00



TOWNSHIP OF WOODBRIDGE
1 MAIN STREET
WOODBIDGE, NJ 07095
732 6344500

Permit Number: 20134641
Update Number:
Control Number: 1078371
Application Date: 12/16/13
Permit Date: 12/23/2013
Expiration Date: 12/23/2014

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 376.05 Lot : 22 Qualifier :
Work Site Location: 261 BERKLEY ST ISELIN
Owner In Fee: DEDHIA, RAJENDRA M
Address: 261 BERKLEY ST
ISELIN NJ, 08830
Telephone: (732) 283-1571
Use Group(s): R-5

Contractor: SLOMINS SECURITY
Address: 125 LAUMAN LANE
HICKSVILLE NY, 11801
Telephone: (516) 932-7024
Lic. No. / Bldrs. Reg. No.:
Federal Emp. No.:

is hereby granted permission to perform the following work :

☐ BUILDING ☐ PLUMBING ☐ DEMOLITION
☒ ELECTRICAL ☐ FIRE PROTECTION ☐ OTHER
☐ ELEVATOR DEVICES ☐ MECHANICAL
☐ ASBESTOS ABATEMENT ☐ LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:

Burglar Alarm System

ESTIMATED COST OF WORK:

Cost of Construction: \$0.00
Cost of Alteration: \$150.00
Cost of Demolition: \$0.00

Total Cost: \$150.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

THOMAS J. KELLY

Construction Official

Date

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENTS	(Office Use Only)
Building	
Electrical	\$45.00
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$1.00
DCA Minimum Fee	\$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$46.00
All Fees Waived	No

Amount to be Paid: \$46.00
Check Number: 328299
Check amount: \$46.00

Collected by: db
Receipt No:
Total Cash Amount:
Total Check Amount: \$46.00
Total CC Amount:
Grand Total: \$46.00



TOWNSHIP OF WOODBRIDGE
1 MAIN STREET
WOODBIDGE, NJ 07095
732 6344500

Permit Number: 20050143

Update Number:

Control Number: 1027087

Application Date: 01/07/05

Permit Date: 1/10/2005

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 376.05	Lot : 22	Qualifier :	
Work Site Location: 261 BERKLEY ST ISELIN			Contractor: CYN JON INC.
Owner In Fee: LEVY, FRED & AUDREY			Address: 138 DOW AVE
Address: 261 BERKLEY ST			ISELIN NJ, 08830
ISELIN NJ, 08830-2150			Telephone: (732) 283-2194
Telephone: (803) 865-7186			Lic. No. / Bldrs. Reg. No.: 4283
Use Group(s): R-5			Federal Emp. No.: 22-1930950

is hereby granted permission to perform the following work :

- | | | |
|--|--|-------------------------------------|
| ☐ BUILDING | ☐ PLUMBING | ☐ DEMOLITION |
| ☒ ELECTRICAL | ☐ FIRE PROTECTION | ☐ OTHER |
| ☐ ELEVATOR DEVICES | ☐ MECHANICAL | |
| ☐ ASBESTOS ABATEMENT | ☐ LEAD HAZARD ABATEMENT | |

(Subchapter 8 only)

DESCRIPTION OF WORK:

Alterations- 100 amp panel change

ESTIMATED COST OF WORK:

Cost of Construction:	\$0.00
Cost of Alteration:	\$400.00
Cost of Demolition:	\$0.00

Total Cost:	\$400.00
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If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

THOMAS J. KELLY

Construction Official

Date

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENTS (Office Use Only)

Building	
Electrical	\$40.00
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$1.00
DCA Minimum Fee	\$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$41.00
All Fees Waived	No

Amount to be Paid: \$41.00

Cash amount: \$41.00

Collected by: db

Receipt No:

Total Cash Amount: \$41.00

Total Check Amount:

Total CC Amount:

Grand Total: \$41.00



TOWNSHIP OF WOODBRIDGE
1 MAIN STREET
WOODBIDGE, NJ 07095
732 6344500

Permit Number: 20092315

Update Number:

Control Number: 1054444

Application Date: 07/16/09

Permit Date: 7/22/2009

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 376.05 Lot : 22 Qualifier :
Work Site Location: 261 BERKLEY ST ISELIN

Contractor: DEDHIA, RAJENDRA

Owner In Fee: DEDHIA, RAJENDRA

Address: 261 BERKLEY ST

Address: 261 BERKLEY ST

ISELIN NJ, 08830-2150

ISELIN NJ, 08830-2150

Telephone: (732) 283-1571

Telephone: (732) 283-1571

Lic. No. / Bldrs. Reg. No.:

Use Group(s): R-5

Federal Emp. No.:

is hereby granted permission to perform the following work :

☒ BUILDING ☐ PLUMBING ☐ DEMOLITION
☐ ELECTRICAL ☒ FIRE PROTECTION ☐ OTHER
☐ ELEVATOR DEVICES ☐ MECHANICAL
☐ ASBESTOS ABATEMENT ☐ LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:

Deck- Rear deck-

ESTIMATED COST OF WORK:

Cost of Construction: \$0.00

Cost of Alteration: \$3,000.00

Cost of Demolition: \$0.00

Total Cost: \$3,000.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

THOMAS J. KELLY

Date

Construction Official

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENTS (Office Use Only)

Building	\$60.00
Electrical	
Plumbing	
Fire Protection	\$35.00
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$5.00
DCA Minimum Fee	\$0.00
Other Fees	
CO Fee	\$30.00
CCO Fee	
Minimum Fee	
Total	\$130.00
All Fees Waived	No

Amount to be Paid: \$130.00

Check Number: 204

Check amount: \$130.00

Collected by: db

Receipt No:

Total Cash Amount:

Total Check Amount: \$130.00

Total CC Amount:

Grand Total: \$130.00



TOWNSHIP OF WOODBRIDGE
1 MAIN STREET
WOODBIDGE, NJ 07095
732 6344500

Permit Number: 20200156
Update Number:
Control Number: 1111406
Application Date: 01/06/20
Permit Date: 1/14/2020
Expiration Date: 01/13/2021

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 376.05 Lot : 22 Qualifier :
Work Site Location: 261 BERKLEY ST ISELIN
Owner In Fee: DEDHIA, RAJENDRA M
Address: 261 BERKLEY ST
ISELIN NJ, 08830
Telephone: (732) 925-2762
Use Group(s): R-5

Contractor: DEDHIA, RAJENDRA M
Address: 261 BERKLEY ST
ISELIN NJ, 08830
Telephone: (732) 925-2762
Lic. No. / Bldrs. Reg. No.:
Federal Emp. No.:

is hereby granted permission to perform the following work :

☒ BUILDING ☐ PLUMBING ☐ DEMOLITION
☐ ELECTRICAL ☒ FIRE PROTECTION ☐ OTHER
☐ ELEVATOR DEVICES ☐ MECHANICAL
☐ ASBESTOS ABATEMENT ☐ LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:

Alterations: Interior renovations. Relocate exterior kitchen door & move non-bearing dining room wall.

ESTIMATED COST OF WORK:

Cost of Construction: \$0.00
Cost of Alteration: \$1,800.00
Cost of Demolition: \$0.00

Total Cost: \$1,800.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

THOMAS J. KELLY

Construction Official

Date

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:

PAYMENTS	(Office Use Only)
Building	\$50.00
Electrical	
Plumbing	
Fire Protection	\$50.00
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$4.00
DCA Minimum Fee	\$0.00
Other Fees	
CO Fee	\$50.00
CCO Fee	
Minimum Fee	
Total	\$154.00
All Fees Waived	No

Amount to be Paid: **\$154.00**
Check Number: 499
Check amount: \$154.00

Collected by: dc
Receipt No:
Total Cash Amount:
Total Check Amount: \$154.00
Total CC Amount:
Grand Total: \$154.00

Township of Woodbridge

Zoning Permit

Application #: 38122 Permit No: 20200011.000 Issue Date: 01/08/2020
Construction Control Number : 1111406
Block: 376.05 Lot: 22 Qualifier:
Work Site: 261 BERKLEY ST Zone: ZONE
Owner: DEDHIA, RAJENDRA M Agent: HOMEOWNER
Address: 261 BERKLEY ST Address:
City/State/Zip: ISELIN NJ 08830 City/State/Zip:
Telephone: 732 9252762 Telephone: ____-____
Fax: () ____-____ Fax: () ____-____
EMail: EMail :
Tenant:

Voucher/Receipt #: 0
Check #:
Amount collected: \$25.00

This is to certify that the above-described premises together with any building thereon, are approved for use as indicated below and as depicted on the Plot Plan:

APPROVED TO RELOCATE KITCHEN EXTERIOR DOOR AND MOVE NON-BEARING DINING ROOM WALL

Which is a:

- ☐ Use permitted by Zoning Ordinance, Article - Section -
- ☐ Use permitted by variance approved on _____, # _____ subject to any special conditions attached to the grant thereof.
- ☐ Valid nonconforming use as established by () findings of the Zoning Board of Adjustment or by () the undersigned zoning officer or by () Planning Board on the basis of evidence supplied by applicant. Conditions, if any:
- ☐ There is a nonconforming structure on the premises by reason of insufficient
- ☐ Other:

COPY

Anthony Tortorello

Zoning Official

This is NOT a Construction Permit

Township of Woodbridge

Zoning Permit

Application #: **34394** Permit No: **20180271.000** Issue Date: **03/19/2018**
Construction Control Number : **1102575**
Block: **376.05** Lot: **22** Qualifier:
Work Site: **261 BERKLEY ST** Zone: **R-6**
Owner: **DEDHIA, RAJENDRA M** Agent: **VIVINT SOLAR DEVELOPER, LLC**
Address: **261 BERKLEY ST** Address: **10 NEW MAPLE AVE/ SUITE 307**
City/State/Zip: **ISELIN NJ 08830** City/State/Zip: **PINE BROOK NJ 07058**
Telephone: **732 925-2762** Telephone: **973 396-8787**
Fax: **() -** Fax: **() -**
EMail: EMail :
Tenant:

Voucher/Receipt #: **0**
Check #: **9163**
Amount collected: **\$25.00**

This is to certify that the above-described premises together with any building thereon, are approved for use as indicated below and as depicted on the Plot Plan:

INSTALL ROOF MOUNTED SOLAR PANELS
SINGLE FAMILY DWELLING

Which is a:

- ☒ [X] Use permitted by Zoning Ordinance, Article - **111** Section - **150-29**
- ☐ [] Use permitted by variance approved on _____, # _____ subject to any special conditions attached to the grant thereof.
- ☐ [] Valid nonconforming use as established by () findings of the Zoning Board of Adjustment or by () the undersigned zoning officer or by () Planning Board on the basis of evidence supplied by applicant. Conditions, if any:
- ☐ [] There is a nonconforming structure on the premises by reason of insufficient
- ☐ [] Other:

COPY

Anthony Tortorello

Zoning Official

This is NOT a Construction Permit

Township of Woodbridge

Zoning Permit

Application #: 14792 Permit No: 20090953.000 Issue Date: 07/16/2009
Construction Control Number : 1054444
Block: 376.05 Lot: 22 Qualifier:
Work Site: 261 BERKLEY ST Zone: R-6
Owner: DEDHIA, RAJENDRA Agent: HOMEOWNER
Address: 261 BERKLEY ST Address:
City/State/Zip: ISELIN NJ 08830-2150 City/State/Zip:
Telephone: 732 283-1571 Telephone: ____-____
Fax: () ____-____ Fax: () ____-____
Email: Email :
Tenant:

Voucher/Receipt #: 0
Check #: 205
Amount collected: \$20.00

This is to certify that the above-described premises together with any building thereon, are approved for use as indicated below and as depicted on the Plot Plan:

RECONSTRUCT REAR DECK 16' X 17.8' **SINGLE FAMILY DWELLING**

Which is a:

- ☒ [X] Use permitted by Zoning Ordinance, Article - 3 Section -
- ☐ [] Use permitted by variance approved on _____, # _____ subject to any special conditions attached to the grant thereof.
- ☐ [] Valid nonconforming use as established by () findings of the Zoning Board of Adjustment or by () the undersigned zoning officer or by () Planning Board on the basis of evidence supplied by applicant. Conditions, if any:
- ☐ [] There is a nonconforming structure on the premises by reason of insufficient
- ☐ [] Other:

COPY

Anthony Tortorello

Zoning Official

This is NOT a Construction Permit