



West Milford Township
1480 UNION VALLEY ROAD
WEST MILFORD, NJ 07480

Date Issued 12/19/2000
Control Number _____
Permit Number 00-0094
Permit Issue Date 2/15/2000
Certificate Number 00-0094

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 1606 GREENWOOD LAKE TURNPIKE Block: 3902 Lot: 3 Qual: _____
HEWITT, NJ 07421, NJ
Owner in Fee: JORDAN, PAUL
Owner Address: 1606 GREENWOOD LAKE TURNPIKE HEWITT NJ 07421-
Telephone: _____
Contractor VLSM ELECTRIC
Address 4 VIRGINIA AVE POMPTON PLAINS NJ 07444-
Telephone: 973/8398500 Fax: _____ Federal Emp. Number: _____
License Number or Builders Registration Number: 6888

Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-3 Construction Classification: _____

Maximum Live Load: _____ Maximum Occupancy Load: _____

Description of Work/Use: - NEW 200 AMP SERVICE

Certificate Comments: NEW 200 AMP SERVICE

☐ **Certificate of Occupancy**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☒ **Certificate of Approval**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **Certificate of Continued Occupancy**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:

Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJACS:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Date Printed: 7/31/2025

U.C.C. F260 (rev. 08/05)

Fee: \$0.00
Check Number: _____
Collected By: _____



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 3902 Lot 3 Qualification Code _____

Work Site Location 1606 GREENWOOD LAKE TURNPIKE HEWITT, NJ 07421, NJ

Owner in Fee: JORDAN, PAUL

Tel. [REDACTED] e-mail _____

Address 1606 GREENWOOD LAKE TURNPIKE HEWITT NJ 07421-

Street: _____ Municipality: _____ zip code: _____

Contractor: VLSM ELECTRIC Tel. 973/8398500

Address 4 VIRGINIA AVE POMPTON PLAINS NJ 07444-

e-mail _____

Contractor License No. 6888 Exp. Date _____

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

Federal Emp. ID No. _____ FAX _____

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 \$ \$1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plan Required

☐ Partial-Underslab Approved

Date: _____ Approved by: _____

☐ Electrical Plans Approved

Date: _____ Approved by: _____

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

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 _____

Date Received 2/15/2000
Date Issued 2/15/2000
Control # _____
Permit # 00-0094

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 and perform the work listed on this application.

Applicant's sign/Contractor sign _____
and seal here. Print name here. _____

☐ Licensed Electrical Contractor

☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
NEW 200 AMP SERVICE

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 Hand	_____
_____	_____	KW Baseboard Heat	_____
_____	_____	HP Motors 1/+ HP	_____
_____	_____	KW Transformer/Generator	_____
<u>1</u>	<u>200</u>	AMP Service	<u>\$39</u>
_____	_____	AMP Subpanels	_____
_____	_____	AMP Motor Control Center	_____
_____	_____	KW Elec. Sign/Outline Light	_____

Administrative Surcharge\$ \$6

Minimum Fee\$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEES _____