-----Original Message-----
From: John Feltz <opra+request-44154-77fa0550@requests.opramachine.com>
Sent: Friday, May 26, 2023 10:46 AM
To: Deborah Zupan <dzupan@metuchen.com>
Subject: OPRA request - Opra Request: 228 Newman St, Metuchen 08840

CAUTION: This email originated from outside the Borough of Metuchen . Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Metuchen Borough,

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:

Open/closed permits for 228 Newman St, Metuchen

Yours faithfully,
John Feltz
6465791200

Please deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-44154-77fa0550@requests.opramachine.com

Is dzupan@metuchen.com the wrong address for OPRA requests to Metuchen Borough? If so, please contact us using this form:

#253 (1981)
438-89
93-116
17-0603
18-0484

10 pages

A. Hall 5/31/23

CONSTRUCTION PERMIT APPLICATION

BOROUGH OF METUCHEN CONSTRUCTION CODE ENFORCEMENT DEPT.
Borough Hall Metuchen, New Jersey 08840 Tel: 201 - 549-3600

No. 253
Date

Location 228 NEWMAN St. Block 153 Lot 4
Owner C. GRANHALF Add. 228 NEWMAN St. Phone [redacted]
Agent A.J. CHIUSANO Add. 40 Winding Rd. ISELIN Phone 283 - 2147
Architect Add. Phone
Engineer Add. Phone
Description of Proposed Work REPLACE Hot WATER HEATER

Zone R-4 Total Bldg. Area, S.F. Subdivision No. Apvl. Date
Use Group R-3 Lot Area, S.F. Site Plan No. Apvl. Date
Fire Grade Percent Lot Coverage-Bldgs. Variance No. Apvl. Date
Construction Type 4-B Percent Lot Coverage-Bldgs. & Pvmt. Cost of Building
No. of Occupants Per Floor No. of Stories Site Improvement Cost
Live Load Total Bldg. Height, Ft. Integral Equip. & Furn. Cost
Building Dimensions Total Bldg. Volume, C.F. Total Cost of Construction

Indicate In What Subcodes Work Will Be Performed:

☐ Building ☑ Plumbing ☐ Electrical ☐ Fire

Building Subcode

Building Fee
Alteration/Repairs – Fee $ ____ X $ ____ M = ____
New Construction – Fee $ ____ X ____ CF = ____
If State Plan Review, Less 20% =
Total New Construction Fee
State Surcharge $ ____ X ____ CF = ____
Certificate of Occupancy Fee

Other
Building Subcode Fee

Approved Date

Electrical Subcode

Service Change ____ Size ____ Fee
Rough Wiring ____ No. Outlets ____ Fee
Final Wiring ____ No. Fixtures ____ Fee
Heating ____ Fee
A/C ____ Fee
Motors ____ Fee
Pools ____ Fee
Other ____ Fee
Other
Total Electrical Fee
If State Plan Review, Less 20%
Electrical Subcode Fee

Approved Date

RECEIVED
APR 21 1981
BORO OF METUCHEN
CONSTRUCTION OFFICIAL

Plumbing Subcode

Application/Plan Fee – Plumbing 10.00
Fixtures ____ No. ____ Fee
Stacks ____ No. ____ Fee
Hot Water Heaters ____ No. 1 Fee 2.00
Special Fixtures ____ No. ____ Fee
Sewer ____ Fee
Water Service ____ Fee
Rough Test ____ Fee
Final Test ____ Fee
Other
Application/Plan Fee – Heating
Furnance or Boilers ____ No. ____ Fee
Unit Heaters ____ No. ____ Fee
Oil Tanks ____ Size ____ No. ____ Fee
Other
Total Plumbing & Heating Fee 12.00
If State Plan Review, Less 20% =
Plumbing Subcode Fee

Approved J. Mast Date 4-14-81

Fire Subcode

Oil Tanks ____ Size ____ No. ____ Fee
Furnance or Boilers ____ No. ____ Fee
Sprinklers ____ No. of Heads ____ Fee
Standpipe ____ Size ____ No. ____ Fee
Other
Total Fire Fee
If State Plan Review, Less 20% =
Fire Subcode Fee

Approved Date

CONTRACTORS:

General Add. Phone Lic.
Str. Add. Phone Lic.
Plbg. A.J. Chiusano Add. 40 Winding Rd. ISELIN Phone 283-2147 Lic. # 4117
Elec. Add. Phone Lic.
Other Add. Phone Lic.
Construction Superintendent Job Phone
Name of Person Responsible to Assure Conformity to Codes Phone

The applicant agrees to conform to all applicable Laws of this jurisdiction.

SIGNATURE OF APPLICANT A.J. Chiusano DATE 4/15/81

216-242 NEWMAN ST (1018.03, 04, 05)

BOROUGH OF METUCHEN
Construction Code Office
500 Main Street
Metuchen, N. J. 08840
(201) 632-8515

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 10/30/89
Control #
Permit # 438-89

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

Block 153.1 Lot 4 (C205A - C205N)
Work Site Location Builder 33/34/35 ~~216-242~~ 216-242 NEWMAN ST
Owner in Fee FIRST JEFFERSON CONDO ASSOC
Address 111 NEWMAN ST SAME
Tele. ( )
Contractor DENNIS NORTHUP
Address 305 BOUND BROOK ACE PISCATAWAY NJ
Tele. ( ) 572 4344
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No. [redacted]

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
Roofing & gutters

Note: Cannot Exceed two overlays over existing roof.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [✓] CA		
Date: 1-24-90		
Approved By: [signature]		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[✓] Roofing
[ ] Siding
[ ] Other
[ ] Demolition
[ ] Miscellaneous
[ ] Fence Height
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Elevator
[ ] Asbestos Abatement
[ ] Other

(Office Use Only)
FEE

	25.00
Administrative Surcharge	
Minimum Fee	
TOTAL FEE	25.00

B. BUILDING CHARACTERISTICS

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

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

Paid [✓] Check # 464
Collected by: SH

U.C.C. Form F-110A
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

PRO 102

BOROUGH OF METUCHEN
Construction Code Office
500 Main Street
Metuchen, N.J. 08840
(908) 632-8515

CERTIFICATE

Date Issued 5-20-93
Control #
Permit # 93-116

IDENTIFICATION

Block 153.1 Lot 4 (C205H)
Work Site Location 228 Newman Street
Metuchen, NJ 08840
Owner in Fee Robert Schott
Address 105 Union Street
Cranford, NJ 07016
Tele. ([redacted])
Contractor O'Zanni Mechnical
Address 670 King Georges Road
Fords, NJ 08863
Tele. (908) 738-1212
Lic. No. or Bldrs. Reg. No. 8556
Federal Emp. No. 222-419-001/000
or Social Security No.

Home Warranty No. n/a
Type of Warranty Plan: [ ] **State** [ ] **Private**
Use Group R3A
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work/Use:

furnace

☐ **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.

☐ **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/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _____, 19____ or the owner will be subject to fine or order to vacate:

Fee $ 10.00
Paid [x] Check No. 9465
Collected by: sh

CONSTRUCTION OFFICIAL

U.C.C. Form F-260B

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

TOWNSHIP OF WOODBRIDGE
CODE ENFORCEMENT AGENCY
BUILDING DEPARTMENT
1 MAIN STREET
WOODBRIDGE, N.J. 07095
(908) 634-4500

PLUMBING SUBCODE TECHNICAL SECTION

Date Received 11-19-92
Date Issued 3-29-93
Control #
Permit # 93-116

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

Block 153.1 Lot 4 (C2054)
Work Site Location 228 NEWMAN STREET
NETCHEN, NJ 08840
Owner in Fee MR. & MRS. ROBERT SCHOTT
Address 105 UNION AVENUE
CRANFORD, NJ 07016
Tele. [redacted]
Contractor ~~O. ZANONI Mechanical Contractors, Inc.~~
Address 670 King Georges Post Road
Fords, NJ 08863
Tele. (908) 738-1212
Lic. No. 8556
Federal Emp. No. 222-419-001/000 or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size
Water Service Size
Estimated Cost of Plumbing Work $ 2900.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[✓] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[ ] Plumb. Plans Approved
Date: 11-29-92
Approved by: afm.

SUBCODE APPROVAL:
[ ] CO [ ] CCO [✓] CA
Approved by: afm
Date: 5-4-93

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
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.

Robert Cassidy
Signature-Contractor Seal

[✓] 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	
1	Gas Piping	
	Fuel Oil Piping	
	Water Heater	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Gas Service Connection	
	Active Solar System	
1	Other HOT AIR FURNACE	25.-

Administrative Surcharge $ 10.-
Paid [✓] Check # 9465 Minimum Fee $
Collected by: JH TOTAL $ 35.00

U.C.C. Form F-130A
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 11-19-92
Date Issued
Control # 3-29-92
Permit # 93-116

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

Block 153.1 Lot 4 (C2054)
Work Site Location 228 NEWMAN STREET
METUCHEN, NJ 08840
Owner in Fee MR. + MRS. ROBERT SCHOTT
Address 105 UNION AVENUE
CRANFORD, NJ 07016
Tele. ([redacted])
Contractor O. Zanoni Mechanical Contractors, Inc.
Address 670 KingGeorges Post Road
Fords, NJ 08863
Tele. (908) 738-1212
Lic. No. 8556
Federal Emp. No 222-419-001/000 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[✓] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date: 11/19/92
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [✓] CA
Date: 5/4/93
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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

D. TECHNICAL SITE DATA

Description of Work ~~Hot~~ AIR FURNACE REPLACEMENT (OIL TO GAS)
Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas ~~Oil Fired~~ Appliance	1	25
OTHER		

Administrative Surcharge $
Paid [✓] Check # 9465 Minimum Fee $
Collected by SN TOTAL FEE $ 25

U.C.C. Form F-140A
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 8/14/17
Control #
Date Issued 8/21/17
Permit # 17-0603

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

Block 153.1 Lot 4 Qualification Code

Work Site Location 228 Newman St. Metuchen, NJ 08840

Owner in Fee: Jefferson Park Sect 2 c/o Homestead Management

Tel. (908) 874-6991 e-mail

Address 328 Changebridge Rd. Pine Brook NJ 07058
street municipality zip code

Contractor: Matteo Plumbing & Heating LLC Tel. (732) 418-0011

Address 160 Liberty St Unit 3B

Metuchen, NJ 08840 e-mail

Contractor License No. 12085 Exp. Date 2019

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

Federal Emp. ID No. [redacted] FAX: (732) 623-9754

B.PLUMBING CHARACTERISTICS

Use Group: Present Proposed X

Building Sewer Size 4 Public Sewer ✓ Private Septic

Water Service Size 1 Public Water Private Well

Est. Cost of Plumbing Work $ 2000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: 8/17/17 Approved by: ✓

[ ] Plumbing Plans Approved

Date: Approved by:

Joint Plan Review Required

[ ] Bldg. [ ] Elec. [ ] Fire [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 8/18/17

Approved by: ✓

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: 8/28/17

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				
FINAL			8/28/17	✓

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and I am authorized to make this application, and perform the work listed on this application.

Applicant Sign / Contractor Sign AND Seal here:

Print name here: Matt Vivadelli

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

DESCRIPTION OF WORK
Sewer replace

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	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
1	Sewer Connection	50
	Water Service Connection	
	Stacks	
	Garbage Disposal	
	Other	

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

UCC/F-130
(rev. 11/09)
Professional Printing
(856) 468-7933

1. White-Inspector Copy 2. Canary-Applicant Copy 3. Pink-Office Copy 4. White Tag-Office Copy

BOROUGH OF METUCHEN
500 MAIN STREET
METUCHEN, NJ 08840

Date Issued 09/25/18
Control #
Permit # 18-0484

UCC NEW JERSEY CERTIFICATE

IDENTIFICATION

Block 153.1 Lot 4 Qual C205H
Work Site Location 228 NEWMAN ST.
METUCHEN, NJ 08840
Owner in Fee/Occupant FELTZ, KRISTINA
Address 228 NEWMAN STREET
METUCHEN, NJ 08840-
Telephone [redacted]
Contractor C & C CABINET DIST. LLC
Address 652 EXETER ROAD
LINDEN, NJ 07036-
Telephone (908)925-3369 Fax ( ) -
Lic. No. or Bldrs. Reg. No. 13VH01336200
Federal Emp. No. -

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

BATH REMODEL

[ ] 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.

[X] 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.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ____.

Ronald Maryk ACO 9-26-18
Construction Official

Fee $ 0
Paid [X] Check No. 1881
Collected by: JC

U.C.C. F260 (rev. 3/96)

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 6/26/18
Control #
Date Issued 7/2/18
Permit # 18-0484

2

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

Block 153.1 Lot 4 Qualification Code

Work Site Location 228 NEWMAN ST. METUCHEN NJ 08840

Owner in Fee: KRISTINA FELTZ

Tel. [redacted] e-mail [redacted]

Address 228 NEWMAN ST. (street) METUCHEN (municipality) 08840 (zip code)

Contractor: C+C CABINET DISTRIBUTORS, LLC Tel. (908) 925-3369

Address 652 EXETER RD LINDEN NJ 07036 e-mail

Contractor License No. or Builder Registration No. 13VH01336200 Exp. Date 3/31/19

Federal Emp. ID No. FAX: (908) 925-3369

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

- [X] No Plans Required — 6/26/18 — BL
- [ ] All
- [ ] Footing/Foundations
- [ ] Structural/Framework
- [ ] Exterior
- [ ] Interior

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

SUBCODE APPROVAL for PERMIT

Date: 6/26/18

Approved by: B. LATHERON

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: 9/19/18

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame Rough			8/8/18	BL
Truss Sys./Bracing				
Barrier-Free				
Insulation SM Bathroom			8/8/18	BL
Finishes-Base Layer				
Finishes-Final				
Energy Final Sys Pgm			8/8/18	BL
Mechanical				
TCO				
Other				
Final			9/19/18	
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group: Present ____ Proposed ____

Constr. Class Present ____ Proposed ____

No. of Stories ____

If Industrialized Building:

Height of Structure ____ Ft. State Approved ____ HUD ____

Area — Largest Floor ____ Sq. Ft. **Est. Cost of Bldg. Work:**

New Bldg. Area/All Floors ____ Sq. Ft. 1. New Bldg. $ ____

Volume of New Structure ____ cu. ft. 2. Rehabilitation $ 5000.00

Max. Live Load ____ 3. Total (1+2) $ 5000.00

Max Occupancy Load ____

C. CERTIFICATION IN LIEU OF OATH

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

Sign here [signature]

Print name here: PAUL R. CYMBALUK

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

BATH REMODEL - DIRECT REPLACEMENT REPLACEMENT WINDOW

TYPE OF WORK

- [ ] New Building
- [ ] Addition
- [X] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence ____ Height (exceeds 6')
- [ ] Sign ____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall ____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other ____
- [ ] Demolition

FEE (Office Use Only)

$ 125

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

UCC/F-110
(rev. 11/09)
Professional Printing
(856) 468-7933

1. White-Inspector Copy 2. Canary-Applicant Copy 3. Pink-Office Copy 4. White Tag-Office Copy

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 6/26/18
Control # 7/2/18
Date Issued
Permit # 18-0484

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

Block 153.1 Lot 4 Qualification Code

Work Site Location 228 NEWMAN ST. METUCHEN NJ

Owner in Fee: KRISTINA FOLTZ

Tel. [redacted] e-mail [redacted]

Address 228 NEWMAN ST. METUCHEN 08840
street municipality zip code

Contractor: M A Z Plumbing Tel. (908) 232 5428

Address 1722 Blvd

Westfield NJ 07090 e-mail

Contractor License No. 11940 Exp. Date July 2019

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

Federal Emp. ID No. FAX: (908) 232 5428

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 $ 600.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial - Underslab Utilities Approved

Date: 6/26/18 Approved by:

[ ] Plumbing Plans Approved

Date: Approved by:

Joint Plan Review Required

[ ] Bldg. [ ] Elec. [ ] Fire [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 6/26/18

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: 9/19/18

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough			8/14/18	
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
FINAL			9/19/18	

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and I am authorized to make this application, and perform the work listed on this application.

Applicant Sign / Contractor Sign AND Seal here: Michael Posluszny

Print name here: Michael Posluszny

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

DESCRIPTION OF WORK

Powder Rm / DIRECT REPLACEMENT

NO	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
✓	Water Closet	
	Urinal/Bidet	
✓	Bath Tub	50
✓	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	
	Garbage Disposal	
	Other	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

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ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 6/20/18
Date Issued 7/2/18
Control #
Permit # 18-0484

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

Block 153.1 Lot 4 Qualification Code

Work Site Location 228 Newman St. Metuchen

Owner in Fee: Kristina Feltz

Tel. [redacted] e-mail [redacted]

Address 228 Newman St. (street) Metuchen (municipality) 08840 (zip code)

Contractor: M Poz Electric Tel. (908) 232-5428

Address 1727 Blvd Westfield NJ 07090 e-mail

Contractor License No. 12010 Exp. Date March 2021

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

Federal Emp. ID No. FAX: (908) 232-5428

B. ELECTRICAL CHARACTERISTICS

Use Group: Present Proposed

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

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $ 1000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial-Underslab Utilities Approved

Date: 6-27-18 Approved by: RM

[ ] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:

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

SUBCODE APPROVAL for PERMIT

Date: 6-27-18

Approved by: Ronald Maupin

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: 9/15/18

Approved by:

INSPECTIONS

Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Rough			7/2	RM
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			9/19/18	
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 I am authorized to make this application, and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Michael Poslusny

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Powder Rm

QTY.	SIZE	ITEMS	FEE (Office Use Only)
2		Lighting Fixture	
1		Receptacles	
4		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$ 50
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Rang/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	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

1. White-Inspector Copy 2. Canary-Applicant Copy 3. Pink-Office Copy 4. White Tag-Office Copy

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