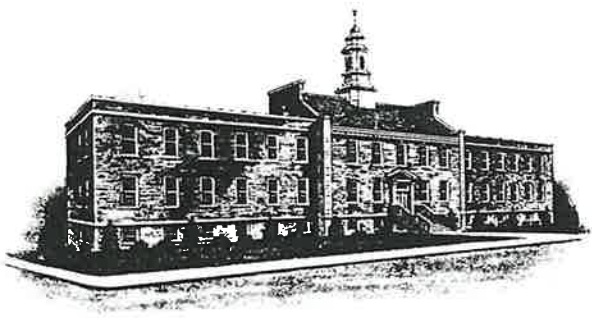




The Borough of Sayreville

MUNICIPAL CLERK'S OFFICE

167 MAIN STREET

SAYREVILLE, NEW JERSEY 08872

TEL. 732-390-7020 • FAX 732-390-0509

May 11, 2021

Stella Bodnar
Law Office of Stella V. Bodar, Esq., P.C.
P.O. Box 6671
East Brunswick, NJ 08816

Re: Request for Access to Public Records

Dear Ms. Bodnar:

As requested pursuant to the Open Public Records Act, enclosed is the response from the Borough of Sayreville Construction Department.

If I can be of any further assistance, please do not hesitate to call my office.

Very truly yours,

Jessica Morelos, RMC
Municipal Clerk

JM/jo

Succeed in Sayreville

Sayreville is an Equal Opportunity Employer

www.sayreville.com

INTER
OFFICE

MEMO

To: Jessica Morelos, RMC

From: Kirk J. Miick, Director of Code Enforcement

Date: May 11, 2021

RE: OPRA Request
27 Vandeventer Ct

Please be advised that the above request has been processed. Please advise Stella V. Bondar Esq. that the information we have on file pertaining to the above address is attached. Any questions, feel free to contact me.

KJM/ah



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 10 Lot 1007 Qualification Code 1007
Work Site Location 27 Vandeventer Ct Sayreville

Owner in Fee: Sullivan
Tel. [redacted] e-mail [redacted]

Address: 27 Vandeventer Ct Sayreville
municipality zip code [redacted]

Contractor: Romar Electrical Contractors Inc. Tel. [redacted]
Address 185 C Madison Avenue
New Milford, New Jersey 07646

Contractor License No. 34FR01402300 Exp. Date 3/31/2021
Home Improvement Contractor Registration No. or Exemption Reason [redacted]

Federal Emp. ID No. [redacted] FAX: [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group [redacted] Present [redacted] Proposed [redacted]
☐ Pole/Pad # [redacted] ☐ Temporary ☐ Other [redacted]
Building Occupied as [redacted] Utility Co. [redacted]
Est. Cost of Elec. Work \$ 227.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type	Failure	Approval	Initial	
☐ No Plans Required	Rough				
☐ Partial Underlab Utilities Approved	Barrier Free				
Date <u>[redacted]</u> Approved by <u>[redacted]</u>	Trench				
☐ Electric Plans Approved	Temp. Serv.				
Date <u>[redacted]</u> Approved by <u>[redacted]</u>	Constr. Serv.				
Joint Plan Review Required	TOC				
☐ Bldg. ☐ Plumb. ☐ Elec. ☐ Elev.	Other				
SUBCODE APPROVAL FOR PERMIT	Service				
Date <u>[redacted]</u> Approved by <u>[redacted]</u>	Final				
SUBCODE APPROVAL FOR CERTIFICATE	Barrier Free				
Date <u>[redacted]</u> Approved by <u>[redacted]</u>	Temp. Cut-in Card Date Issued				
☐ CO ☐ ECO ☐ CA	Final Cut-in Card Date Issued				
Date <u>[redacted]</u> Approved by <u>[redacted]</u>	Annual Pool Inspection				
Date of Grounding and Bonding					
Certification					

U.C.C. F120 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

Date Received
Control #
Date Issued
Permit #

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.
Applicant sign/Contractor sign and seal here:

Print name here: Robert Martin

☒ Licensed Elec. Contractor ☐ Certified Landscape Irrigation Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Furnace / A/C Section

QTY. SIZE ITEMS
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 Elec. Dishwasher
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 1/4 HP
KW Transformer/Generator
AMP Service
AMP Subpanels
AMP Motor Control Center
KW Elec. Sign/Outline Light

Carbon Monoxide Alarms Required

Administrative Surcharge
Minimum Fee
State Permit Surcharge Fee
TOTAL FEE



PLUMBING 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 601 Lot 20 Qualification Code 0507
Work Site Location 20 Vardevente R

Owner in Fee: Sullivan e-mail _____
Tel. _____
Address _____
Contractor: PSE&G Tel. _____
Address 40 Rock Avenue e-mail _____
Plainfield, NJ 07063

Contractor License No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 221212800
Federal Emp. ID No. _____ FAX: (908) 412-9562

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 \$ 2,880

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type	Slab	Rough	Failure	Approval
☒ No Plans Required					
☐ Partial Under-slab Utilities Approved					
Date: _____ Approved by: _____					
☐ Plumbing Plans Approved					
Date: _____ Approved by: _____					
Joint Plan Review Required:					
☐ 1 Bldg. ☐ 1 Elec. ☐ 1 Fire ☐ 1 Elev.					
SUBCODE APPROVAL FOR PERMIT					
Date: <u>2/15/13</u>					
Approved by: _____					
SUBCODE APPROVAL FOR CERTIFICATE					
☐ 1 CO ☐ 1 CCC ☐ 1 CA					
Date: _____					
Approved by: _____					

Date Received _____
Control # _____

Date Issued 1/9/19
Permit # 2018 20180036

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here: _____

Print name here: _____

D. TECHNICAL SITE DATA ☐ Licensed Plumbing Contractor ☒ Exempt Applicant

DESCRIPTION OF WORK

Replace furnace / A/C system

FIXTURE/EQUIPMENT

Water Closet _____
Urinal/Bidet _____
Bath Tub _____
Laundry _____
Shower _____
Floor Drain _____
Sink _____
Dishwasher _____
Drinking Fountain _____
Washing Machine _____
Hose Bibb _____
Water Heater _____
Fuel Oil Piping _____
Gas Piping _____
LP Gas Tank _____
Hot Water Boiler _____
Sewer Pump _____
Interceptor/Separator _____
Backflow Preventer _____
Grease trap _____
Sewer Connection _____
Water Service Connection _____
Stacks Furnace _____
Other A/C system _____

FEE (Office/Use Only) \$ _____

Carbon Monoxide Alarms Required

All work subject to field inspection

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

To reorder call:
Allegra Marketing, Print & Mail
609-390-1400



Borough of Sayreville
49 Dolan Street
Sayreville, NJ 08872
732-3907077

Block: 61 Lot: 9 Qual: 0507

Work Site Location: 27 Vandeventer Ct

Sayreville

Owner in Fee:

Sullivan, Norma

Address:

27 Vandeventer Ct

Sayreville NJ 08872

Telephone:

Agent/Contractor:

PSE&G

Address:

150 How Lane

New Brunswick NJ 08901

Telephone:

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

Federal Emp. No.:

Social Security No.:

[] 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 will be subject to fine or order to vacate:

Kirk J. Mirek 2/27/19
Kirk J. Mirek Construction Official

U.C.C 260 (rev. 5/03)

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

CERTIFICATE IDENTIFICATION

Date Issued: 02/27/2019
Control #: 65174
Permit #: 20190036

Home Warranty No:

Type of Warranty Plan:

Use Group:

Maximum Live Load:

Construction Classification:

Maximum Occupancy Load:

Certificate Exp Date:

Description of Work/Use:

Replace Furnace and a/c system

[] State [] Private

R-5

Update Desc. of Wk/Use:

Tax Collector Approval
Water & Sewer Approval

Date
Date

[] CERTIFICATE OF CLEARANCE-LEAD ABATEMENT §:17

This serves notice that based on written certification, lead abatement was performed as per NJAC §: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.

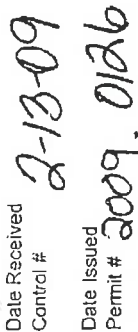
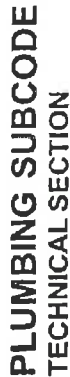
[] CERTIFICATE OF COMPLIANCE

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

Fees: \$0.00

Paid [X] Check No.: 12929

Collected by: tr



A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1030.

Block 61
Work Site Location 27 Vandewater Ct
Sayreville NJ 08872
Owner In Fee: [redacted] Norma Sullivan
Tel. [redacted] street Sahl municipally [redacted] zip code 417-0099
Address [redacted] Exp. Date [redacted]
Contractor: P & L PLUMBING
Address 300 COLUMBUS CIRCLE • EDISON, NJ 08837 e-mail _____
Contractor License No. 12108
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. [redacted] FAX: ([redacted])
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 \$ 859 -

B. PLUMBING CHARACTERISTICS

Use Group	Present	Proposed
Building Sewer Size		Public Sewer
Water Service Size		Public Water
Est. Cost of Plumbing Work	\$ 859	

JOB SUMMARY (Office Use Only)		DATES (Month/Day)	
PLAN REVIEW		Failure	Approval
☐ No Plans Required			
Joint Plan Review Required:			
☐ Building	☐ Electric		
☐ Fire	☐ Elevator		
☐ Plumbing Plans Approved <i>As Noted</i>			
Date	2/12/69		
Approved by:	<i>[Signature]</i>		
SUBCODE APPROVAL:			
CCO	☐ CCO		
CA	☐ CA		
Date	3/11/69		
Approved by:	<i>[Signature]</i>		
INSPECTIONS			
Type			
Slab			
Rough			
Water			
Sewer			
Fixtures			
Gas Equipment			
Gas Piping			
LP Gas Tank			
Fuel Oil Piping			
Solar			
TCO			

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

REORDER from OCS Printing 609-390-1400

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Replacement Hot Water Heater

FIXTURE/EQUIPMENT

Water Closet
Unrinal/Bidet

**Carbon Monoxide
Alarms Required**

Sink

Dishwasher

Drinking Fountain

Washing Machine

Jose Bibb

Water Heater

Fuel Oil Piping

Gas Piping

LPGas Tank

Steam Boiler

Hot Water Boiler

Sewer Pump

Intercenter/Cor

Backflow Preventer

0

de la 1999

Sewer Connection

Water Service Connection

Stacks

Other:

Other:

Administrative Surcharge \$

Club Golf Fee

State	Permit	Surcharge Fee
Alabama	100	100
Alaska	100	100
Arizona	100	100
Arkansas	100	100
California	100	100
Colorado	100	100
Connecticut	100	100
Delaware	100	100
District of Columbia	100	100
Florida	100	100
Georgia	100	100
Hawaii	100	100
Idaho	100	100
Illinois	100	100
Indiana	100	100
Iowa	100	100
Kansas	100	100
Kentucky	100	100
Louisiana	100	100
Maine	100	100
Maryland	100	100
Massachusetts	100	100
Michigan	100	100
Minnesota	100	100
Mississippi	100	100
Missouri	100	100
Montana	100	100
Nebraska	100	100
Nevada	100	100
New Hampshire	100	100
New Jersey	100	100
New Mexico	100	100
New York	100	100
North Carolina	100	100
North Dakota	100	100
Ohio	100	100
Oklahoma	100	100
Oregon	100	100
Pennsylvania	100	100
Rhode Island	100	100
South Carolina	100	100
South Dakota	100	100
Tennessee	100	100
Texas	100	100
Utah	100	100
Vermont	100	100
Virginia	100	100
Washington	100	100
West Virginia	100	100
Wisconsin	100	100
Wyoming	100	100

SELECTIONS

All work subject to field inspection

U.C.C. F130 (rev. 10/06)
Internal version