



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 506 Lot 4 Qualification Code _____
Work Site Location 1007 Hudson Ave Deptford NJ 08096

Owner in Fee: Lost Properties LLC

Tel. _____ e-mail _____

Address 318 Salarno CT Mullica Hill 08062

Contractor: Renewable Energy Alliance Tel. (856) 430-2413

Address 525 Rt 73N Suite 104 e-mail shazel@reealliance.com
Marlton, NJ 08053

Contractor License No. 34ei1701600 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 3,500

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	INSPECTIONS
[] No Plans Required	Type: _____
[] Partial -Underslab Utilities Approved	Rough _____
Date: _____ Approved by: _____	Barrier-Free _____
[X] Electric Plans Approved	Trench _____
Date: <u>3/3/21</u> Approved by: <u>[Signature]</u>	Temp. Serv. _____
Joint Plan Review Required:	Constr. Serv. _____
[] Bldg: [] Plumb: [] Fire: [] Elev.	TCO _____
SUBCODE APPROVAL for PERMIT	Other _____
Date: _____	Service _____
Approved by: <u>[Signature]</u>	Final <u>6-29-21</u> <u>7-22</u> <u>[Signature]</u>
SUBCODE APPROVAL for CERTIFICATE	Barrier-Free _____
[] CO [] CCO [] CA	Temp. Cut-In-Card Date Issued _____
Date: <u>7-23-21</u>	Final Cut-In-Card Date Issued _____
Approved by: <u>[Signature]</u>	Annual Pool Inspection _____
	Date of Grounding and Bonding Certification _____

(over)

Date Received
Control #
Date Issued
Permit #

21-0390
4/1/21

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: [Signature]

Print name here: Steve Shazel

☒ Licensed Electrical Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

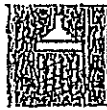
DESCRIPTION OF WORK:
Install new electrical for kitchen, add lights

QTY.	SIZE	ITEMS	FEE (Office Use Only)
<u>48</u>	<u>14</u>	Lighting Fixtures	
<u>10</u>	<u>9</u>	Receptacles	
<u>85</u>		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
<u>31</u>	<u>28</u>	TOTAL NUMBERS	\$ <u>50-</u>
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
<u>1</u>	<u>2</u>	KW Elec. Range/Receptacle	<u>40-</u>
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
<u>1</u>	<u>2</u>	KW Elec. Dryer/Receptacle	<u>40-</u>
<u>1</u>	<u>2</u>	KW Dishwasher	<u>40-</u>
		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 \$ 170-
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____



PLUMBING SUBCODE
TECHNICAL SECTION



113

Date Received
Control #
Date Issued
Permit #

21-0390
4/1/21

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

Block 506 Lot 4 Qualification Code _____
Work Site Location 1007 HUDSON AVE

Owner in Fee: LOST PROPERTIES LLC

Tel. () e-mail

Address SAME AS ABOVE

Contractor: A. Bell + Mechanical Inc. Tel: 609 346-5586

Address 1734 GRANT AVE e-mail
ATLANTIC CITY NJ 08401

Contractor License No. 36B108996200 Exp. Date 6/21

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

Federal Emp. ID No. _____ FAX: () _____

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 \$ 3,500

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	INSPECTIONS
☐ No Plans Required	Type: _____
☐ Partial/Understand Utilities Approved	Slab _____
Date: _____ Approved by: _____	Rough _____
☒ Plumbing Plans Approved	Water _____
Date: <u>3-10-21</u> Approved by: <u>MG</u>	Sewer _____
Joint Plan Review Required:	Fixtures _____
☐ Plumbing ☐ Elec ☐ Life ☐ Elev	Gas Equipment _____
SUBCODE APPROVAL for PERMIT	Gas Piping _____
Date: <u>3-10-21</u>	LPGas Tank _____
Approved by: <u>MG</u>	Fuel Oil Piping _____
SUBCODE APPROVAL for CERTIFICATE	Soil _____
☐ I CO ☐ I ECO ☐ I CA	YCO _____
Date: <u>7/20/21</u>	Final <u>6-29-21</u>
Approved by: <u> </u>	

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: Albert E Bell

Print name here: Albert E Bell

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK INSTANT PLUMBING
REPLACEMENT OF FIXTURES

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
_____	Water Closet	_____
_____	Urinal/Bidet	_____
<u>2</u>	Bath Tub	<u>30</u>
<u>2</u>	Lavatory	<u>30</u>
<u>1</u>	Shower	<u>15</u>
<u>1</u>	Floor Drain	_____
<u>1</u>	Sink	<u>15</u>
<u>1</u>	Dishwasher	_____
<u>1</u>	Drinking Fountain	_____
<u>1</u>	Washing Machine	<u>15</u>
_____	Hose Bibb	_____
_____	Water Heater	_____
_____	Fuel Oil Piping	_____
_____	Gas Piping	_____
_____	LPGas Tank	_____
_____	Steam Boiler	_____
_____	Hot Water Boiler	_____
_____	Sewer Pump	_____
_____	Interceptor/Separator	_____
_____	Backflow Preventer	_____
_____	Greasetrapp	_____
_____	Sewer Connection	_____
_____	Water Service Connection	_____
_____	Stacks	_____
_____	Other	<u>120</u>

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ 7.27
TOTAL FEE \$ 227.27



CONSTRUCTION PERMIT

Date Issued 4/1/2021
Control # 39229
Permit # 20210390

IDENTIFICATION Block: 506 Lot: 4 Qualifier
Work Site Location: 1007 HUDSON AVE. Deptford Township, NJ Contractor MARK KNAUL
Address 342 MERCHANT ST. AUDUBON NJ 08106
Owner in Fee LOST PROPERTIES LLC Telephone: (856) 287-3412
318 SALERNO COURT, MULICA HILL NJ 08062 Lic. No. or Bids. Reg. No. 13VH01931700
Federal Employee. No.

Is hereby granted permission to perform the following work:

- ☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☒ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

ELECTRICAL ALTERATIONS, PLUMBING ALTERATIONS ELECTRICAL AND PLUMBING

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 \$7,000

[Signature] 4/1/2021
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:

- 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.
- Foundations and all walls up to grade level prior to back filling.
- 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.
- 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.

PAYMENTS (Office Use Only)	
Building	\$0
Electrical	\$170
Plumbing	\$120
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$14
CO Fee	
Other	\$0
Total	\$304
Check No.	1404
Cash	\$0
Credit	\$0
Collected By	Karen Heinze



ELECTRICAL SUBCODE TECHNICAL SECTION



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Work Site Location 1007 Hudson Ave Deptford NJ 08096

Owner in Fee: Lost Properties LLC

Tel. _____ e-mail _____

Address 318 Salarno CT Mullica Hill 08062

Contractor: Renewable Energy Alliance Tel. (856) 430-2413

Address 525 Rt 73N Suite 104 e-mail shazel@reealliance.com

Marlton, NJ 08053

Contractor License No. 34ei1701600 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 3,500

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: Steve Shazel

☒ Licensed Electrical Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Install new electrical for kitchen, add lights

QTY.	SIZE	ITEMS	FEE (Office Use Only)
<u>48</u>	<u>14</u>	Lighting Fixtures	
<u>10</u>	<u>9</u>	Receptacles	
<u>85</u>	<u>5</u>	Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
<u>31</u>	<u>28</u>	TOTAL NUMBERS	\$ <u>50.-</u>
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
<u>1</u>	<u>2</u>	KW Elec. Range/Receptacle	<u>40.-</u>
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
<u>1</u>	<u>2</u>	KW Elec. Dryer/Receptacle	<u>40.-</u>
<u>1</u>	<u>2</u>	KW Dishwasher	<u>40.-</u>
		HP Garbage Disposal	<u>40.-</u>
		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	

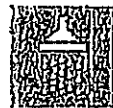
Administrative Surcharge \$ 170.-
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
[] No Plans Required	Type:	Failure Failure Approval Initial
[] Partial -Underslab Utilities Approved	Rough	
Date: _____ Approved by: _____	Barrier-Free	
[X] Electric Plans Approved	Trench	
Date: <u>3/2/21</u> Approved by: <u>[Signature]</u>	Temp. Serv.	
Joint Plan Review Required:	Constr. Serv.	
[] Bldg. [] Plumb. [] Fire. [] Elev.	TCO	
SUBCODE APPROVAL for PERMIT	Other	
Date: _____ Approved by: <u>[Signature]</u>	Service	
SUBCODE APPROVAL for CERTIFICATE	Final	
[] CO [] CCO [] CA	Barrier-Free	
Date: _____ Approved by: _____	Temp. Cut-in-Card Date Issued	
	Final Cut-in-Card Date Issued	
	Annual Pool Inspection	
	Date of Grounding and Bonding Certification	



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 504 Lot 4 Qualification Code _____

Work Site Location 1007 HUDSON AVE

Owner in Fee: LOST PROPERTIES LLC

Tel. () e-mail _____

Address SAME AS ABOVE

Contractor: A. Bell + Mechanical Inc Tel: (609) 346-5586

Address 1734 GRANT AVE e-mail _____
ATLANTIC CITY NJ 08401

Contractor License No. 36B108996200 Exp. Date 6/21

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

Federal Emp. ID No. _____ FAX: (_____)

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 \$ 3500

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type	Failure	Approval	Initial
☐ No Plans Required		Slab			
☐ Partial Under-slab Utilities Approved		Rough			
Date: _____ Approved by: _____		Water			
☒ Plumbing Plans Approved		Sewer			
Date: <u>8-10-21</u> Approved by: <u>MG</u>		Fixtures			
Joint Plan Review Required:		Gas Equipment			
☐ Plbg. ☐ Elec. ☐ Fire ☐ Elev.		Gas Piping			
SUBCODE APPROVAL (OF PERMIT)		LP Gas Tank			
Date: <u>8-10-21</u>		Fuel Oil Piping			
Approved by: <u>MG</u>		Solar			
SUBCODE APPROVAL (OF CERTIFICATE)		ICO			
☐ CO ☐ ECO ☐ CA		Final			
Date: _____					
Approved by: _____					

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: Albert S Bell

Print name here: _____

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK TEST AND PLUMBING
REPLACEMENT OF FIXTURES

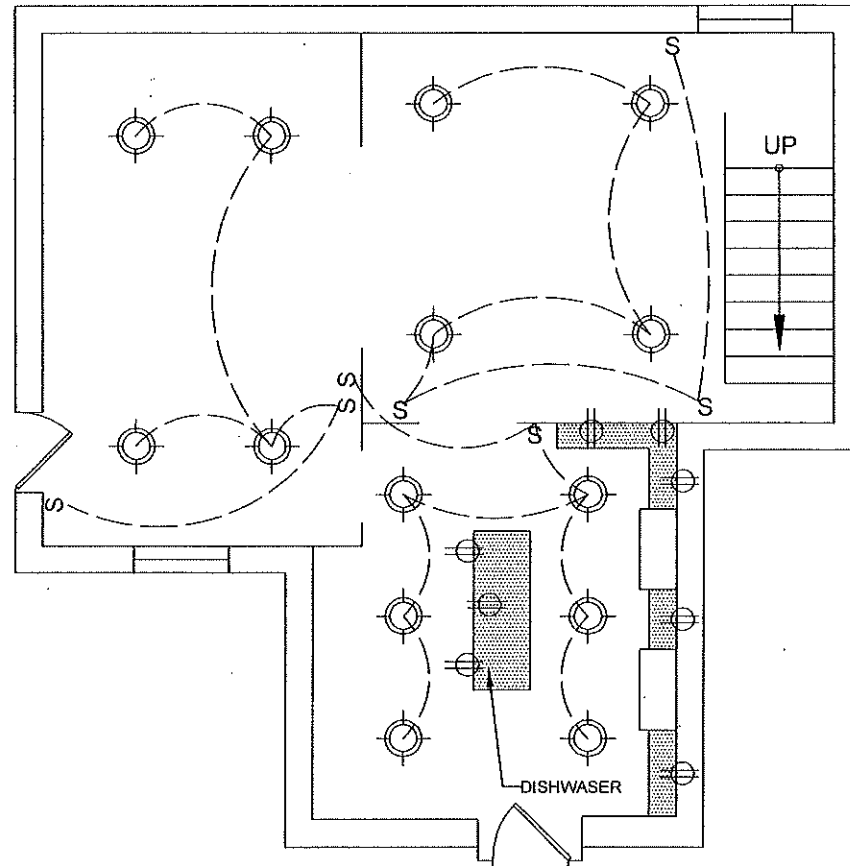
QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
_____	Water Closet	_____
_____	Urinal/Bidet	_____
<u>2</u>	Bath Tub	<u>30</u>
<u>2</u>	Lavatory	<u>30</u>
<u>1</u>	Shower	<u>15</u>
_____	Floor Drain	_____
<u>1</u>	Sink	<u>15</u>
<u>1</u>	Dishwasher	<u>15</u>
<u>1</u>	Drinking Fountain	<u>15</u>
_____	Washing Machine	_____
_____	Hose Bibb	_____
_____	Water Heater	_____
_____	Fuel Oil Piping	_____
_____	Gas Piping	_____
_____	LP Gas Tank	_____
_____	Steam Boiler	_____
_____	Hot Water Boiler	_____
_____	Sewer Pump	_____
_____	Interceptor/Separator	_____
_____	Backflow Preventer	_____
_____	Greasetrap	_____
_____	Sewer Connection	_____
_____	Water Service Connection	_____
_____	Stacks	_____
_____	Other	<u>120</u>

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ 7.27
TOTAL FEE \$ _____

Date Received 21-0340
Control # _____
Date Issued 4/1/21
Permit # _____

1007 HUDSON
B-506 L14

FIRST FLOOR



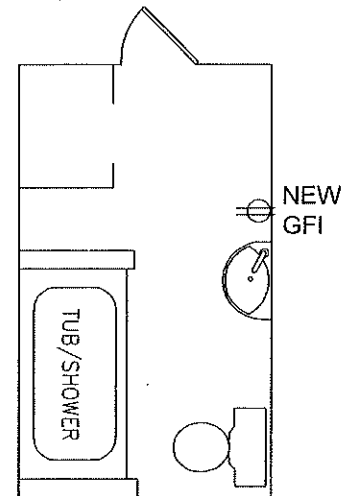
FILE COPY

APPROVED
SUBJECT TO FIELD
INSPECTION

CR
3-31-21



SECOND FLOOR



[Handwritten signature]

REA

856-617-4732

PROJECT

1007 HUDSON AVE
DEPTFORD NJ 08090

TITLE

NEW ELECTRICAL WORK

DESIGN

STHA

FILE No. LP LLC

CADD

3/22/21

SCALE AS SHOWN

REVIEW

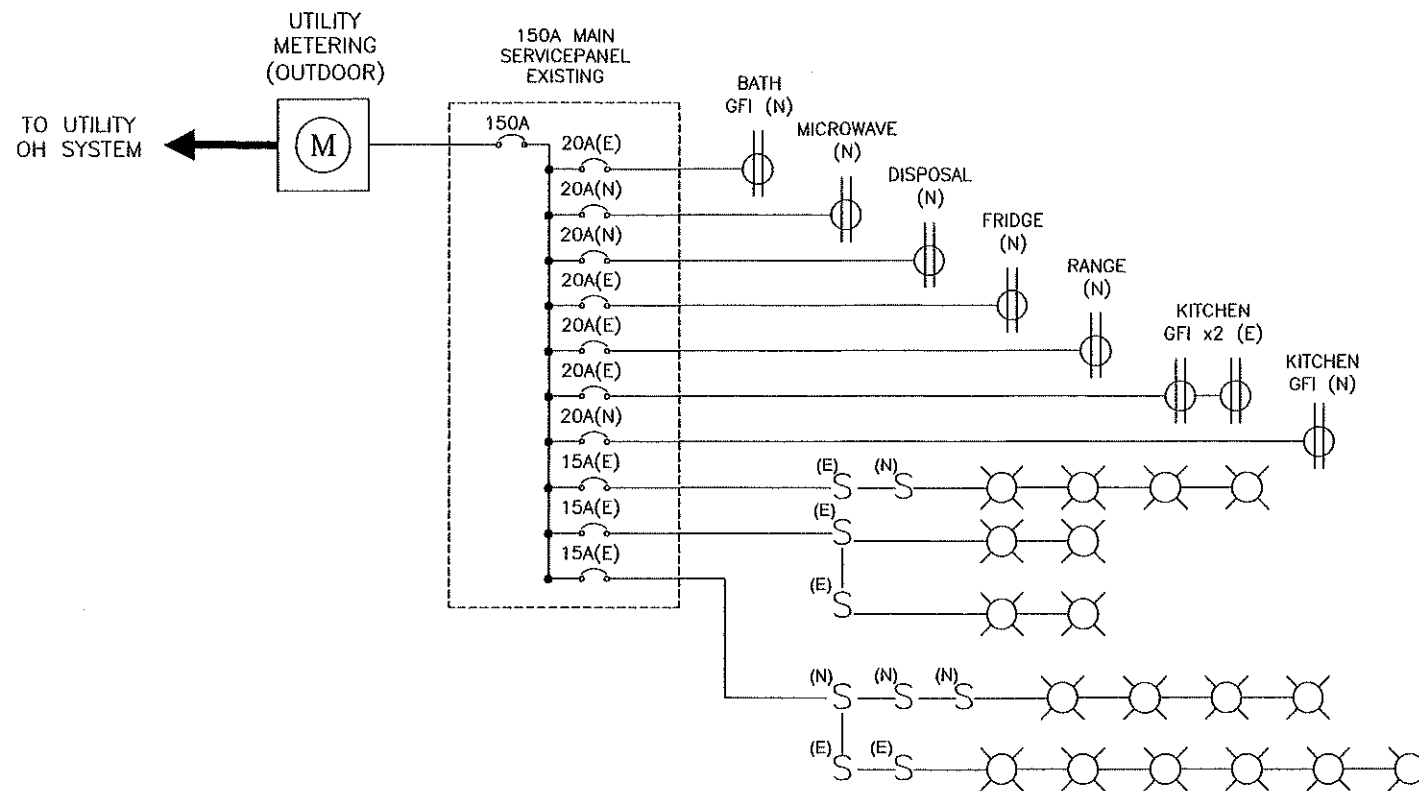
REV.

1

SHEET

FLOOR PLAN

DRAWING: E2



E = Existing
N = New

REA

856-617-4732

PROJECT		
1007 HUDSON AVE DEPTFORD NJ 08096		
TITLE		
SLD		
DESIGN	STHA	FILE No. LP LLC
CADD	2/26/21	SCALE AS SHOWN
REVIEW		REV. 0
SHEET	SLD	
DRAWING: E1		

FILE COPY



APPROVED
SUBJECT TO FIELD
INSPECTION
3-10-21
MJS

A. Bell & Son Mechanical, Inc.

NJ License #9962

Plumbing Riser
1007 Hudson Ave

Plumbing & Heating Service Contracting

1734 Grant Ave.

Atlantic City NJ 08401

609-338-2072

Replace TUB/SHOWER
1 1/2"
EXISTING 4" LATHEAL

4" VTR
FREE STANDING
TUB
2"
EXISTING 4" LATHEAL

Replace Shower Pan
SHOWER 2"
EXISTING 4" LATHEAL

Relocate
CANNERY
AAV
2"
1/2"
EXISTING 4" LATHEAL

A. Bell



BUILDING
SUBCODE
TECHNICAL SECTION



Date Received 9-29-00
Date Issued
Control #
Permit # 00-1076

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

Block 506 Lot 43
Work Site Location 1007 HUNSON AVE
DEPTFORD
Owner in Fee GEORGE ATKINSON
Address 1007 HUNSON AVE
DEPTFORD
Tele. (856) 853-8555
Contractor FRANK P. ATKINSON
Address 5115
Tele. (856) 853-8555 Fax (856) 853-8555
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
☐ No Plans Required	_____	_____	Type:	Failure	Failure	Approval	Initial
☐ All	_____	_____	Footings	_____	_____	_____	_____
☐ Footings	_____	_____	Foundation	_____	_____	_____	_____
☐ Foundation	_____	_____	Slab	_____	_____	_____	_____
☐ Frame	_____	_____	Frame	_____	_____	_____	_____
☒ Other	_____	_____	Barrier-Free	_____	_____	_____	_____
Joint Plan Review Required:	_____	_____	Insulation	_____	_____	_____	_____
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator	_____	_____	Finishes	_____	_____	_____	_____
SUBCODE APPROVAL	_____	_____	Energy	_____	_____	_____	_____
☐ CO ☐ OCO ☐ CA	_____	_____	Mechanical	_____	_____	_____	_____
Date: <u>4/24/01</u>	_____	_____	TCO	_____	_____	_____	_____
Approved by: <u>[Signature]</u>	_____	_____	Other	_____	_____	_____	_____
_____	_____	_____	Final	_____	_____	_____	_____
_____	_____	_____	Barrier-Free	_____	_____	_____	_____

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ Est. Cost of Bldg. Work:
Constr. Class Present _____ Proposed _____ 1. New Bldg. \$ _____
No. of Stories _____ 2. Alteration \$ _____
Height of Structure _____ Ft. 3. Total (1+ 2) \$ 3700
Area — Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

C. CERTIFICATION IN LIEU OF OATH

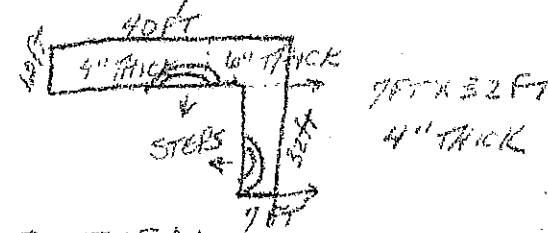
I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature George Atkinson

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Remove existing wood deck and
redo concrete patio



NON STRUCTURAL

TYPE OF WORK:

- ☐ New Building
☐ Addition
☒ Alteration
☐ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6')
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☒ Other patio
☐ Demolition

FEE (Office Use Only)

\$ _____
_____ 100.00

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____
TOTAL FEE \$ 100.00

TOWNSHIP OF DEDFORD
1011 CUMMER STREET
DEDFORD, NJ 08036

856-365-3500

CONSTRUCTION
PERMIT

Permit Number: 1001075
Permit Date: 9/29/00

Update Number:
Contract Number: 12111
Application Date: 09/15/00

OWNER/PROPERTY DETAILS

IDENTIFICATION

Block: 506	Lot: 4	Quarter:	Contractor: ATKINSON, GEORGE
Work site Location: 1907 Hudson Avenue Dedford	Owner or Fee: ATKINSON, GEORGE	Address: 1907 Hudson Avenue	Address: 1907 Hudson Avenue
Address: DEDFORD NJ 08036	Telephone: [REDACTED]	Telephone: [REDACTED]	
Telephone: [REDACTED]	Life No / Dirs. Reg. No.:		
Use Group(s): R-4	Federal Emp. No.:		

is hereby granted permission to perform the following work:

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

(Subchapter S only)

DESCRIPTION OF WORK:

Concrete Slab

ESTIMATED COST OF WORK:

Cost of Construction:	\$0.00
Cost of Alteration:	\$5,200.00
Cost of Demolition:	\$0.00
Total Cost:	\$5,200.00

P A Y M E N T S (Office Use Only)	
Building	\$48.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
Vol Fee (DOCA)	
Al Fee (DOCA)	\$3.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Taxes	\$51.00
All Fees Waived:	No
Amount to be Paid:	\$ 51.00

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.

William F. Coughlin *9-29-00*
William F. Coughlin Date

Construction Official

1. *Permits to obtain all required inspections must reach to administrative action.*
2. *Final inspections are subject to be done final payments to be made to construction.*
3. *All approved set of plans must be kept at the website at all times.*

Note:

Cash amount:	\$51.00
Collected by:	KAA
Receipt No.:	
Total Cash Amount:	\$51.00
Total Check Amount:	
Grand Total:	\$51.00



UB
BUILDING
SUBCODE
TECHNICAL SECTION

Block 306
Lot 4
Work Site Location 1007 Hudson Ave
DEPT FORD
Owner in Fee GEORGE ARRIASON
Address 1007 Hudson Ave
DEPT FORD
Contractor FRANK ~~FRANK~~
Address self
Tele. ()
Lic. No. of Bids, Reg. No.
Federal Emp. No.

PLAN REVIEW		Date		Initial		INSPECTIONS		Type:		Failure		Failure		Approval		Initial	
☐	No Plans Required	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
☐	All	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
☐	Footing	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
☐	Foundation	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
☒	Frame	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
☒	Other	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Joint Plan Review Required:																	
☐	Elev. ☐ Plumb. ☐ Fire ☐ Elevator																
☐	Finishes																
☐	Energy																
☐	Mechanical																
☐	TCO																
☐	Other																
☐	Final																
☐	Barrier-Free																

Est. Cost of Bldg. Work:

1. New Bldg.	\$	
2. Alteration	\$	
3. Total (1 + 2)	\$	3200

_____	Height of Structure
Sq. Ft.	Area — Largest Floor
Sq. Ft.	New Bldg. Area/All Floors
Cu. Ft.	Volume of New Structure
_____	Total Land Area Disturbed
Sq. Ft.	_____

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

[]	New Building
[]	Addition
[X]	Alteration
[]	Roofing
[]	Siding
[]	Fence
[]	Sign
[]	Pool
[]	Asbestos Abatement Subchapter 8
[]	Lead Haz. Abatement NJAC 5:17
[]	Other
[]	Demolition

_____ Sq. Ft.

_____ Height (exceeds 6')

09778

FEE (Office Use Only)

\$	Administrative Surcharge
\$	Minimum Fee
\$	DCA Training Fee
\$	TOTAL FEE

90.84

48-00

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

George Williams Signature

Permit # 00-00-1076

Control #

Date issued

Date Received _____

00-67-1

DESCRIPTION OF WORK

Remove existing wood deck and
redo concrete patio

9'0" 7'0" 4'0" 3'0" 13'0" 10'0"

4" THICK 7'0" X 3'2"

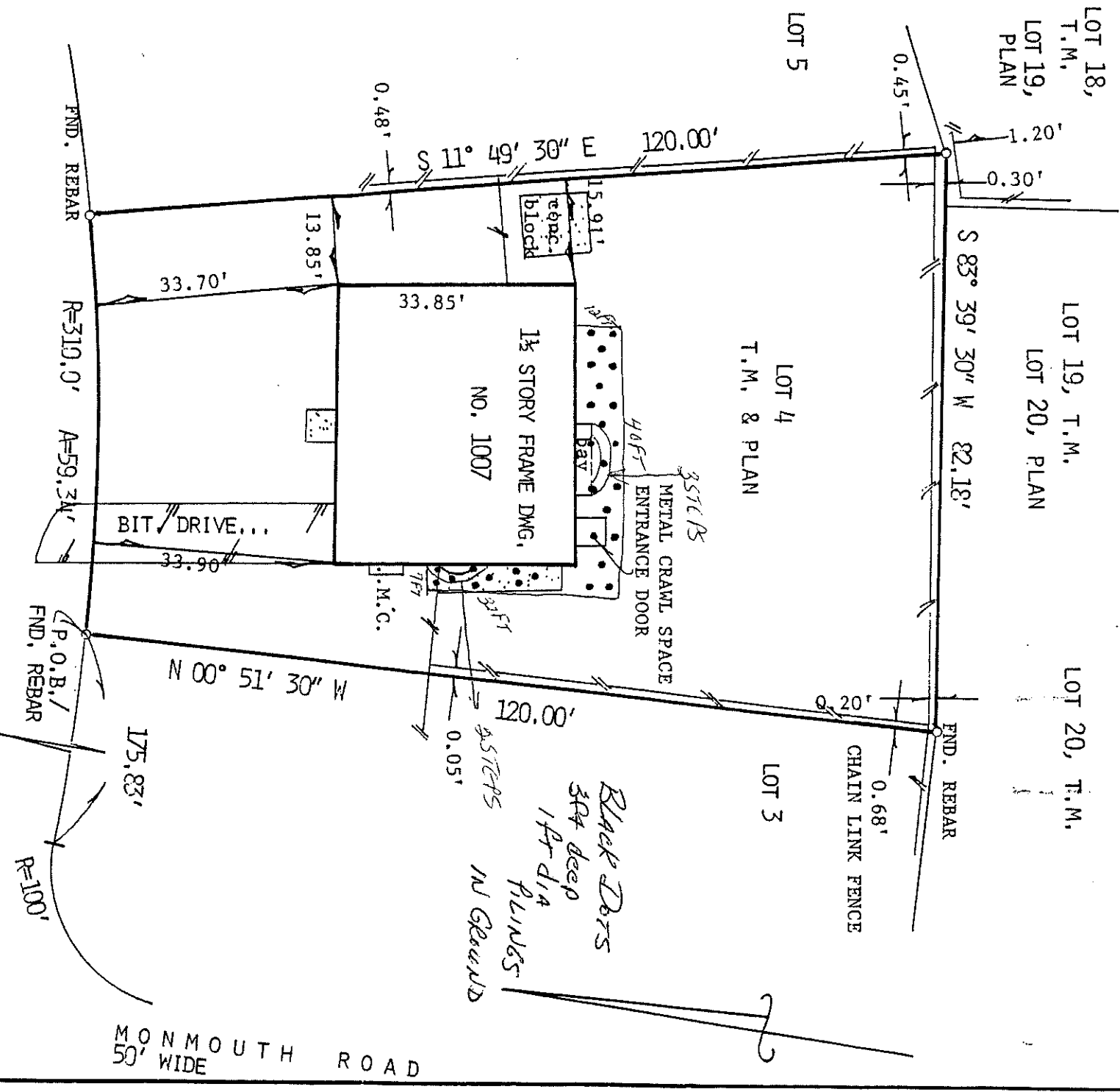
REMOVE EXISTING WOOD DECK AND

REDO CONCRETE PATIO

Non-STRUCTURAL

NOTE: UNDER AND SUBJECT TO ALL CONDITIONS, RESTRICTIONS AND EASEMENTS OF RECORD, WHERE APPLICABLE.

MERIDIAN - DEED BASE TAX MAP BASE PLAN BASE XX FORMER SURVEY BASE
● = REBAR/IRON PIPE SET DESCRIPTION: BEING KNOWN AS LOT 4, BLOCK 506 ON THE OFFICIAL
■ = CONCRETE MONUMENT SET TAX MAP, A/K/A LOT 4, BLOCK 235G, PLAN OF COOPER VILLAGE,
SECTION 3, MADE BY CHARLES P. CAULFIELD, C.E. AREA = 8391.14 S.F.



TO THE OWNER: JOHN A. KENNEALLY & GEORGE E. ATKINSON		SURVEY OF PREMISES NO. 1007 HUDSON AVENUE	
TO THE INSURER OF TITLE relying hereon, in consideration of the fee paid for making this survey in accordance with the description furnished in regard to this transaction only per below date, I hereby certify to its accuracy (except such easements, if any, that may be located below the surface of lands or on the surface of lands and not visible) as an inducement for the insurer of title to insure the title to the lands and premises shown hereon.		SITUATE TOWNSHIP OF DEPTFORD GLOUCESTER COUNTY, NEW JERSEY	
ALBERT N. FLOYD & SON LAND SURVEYORS		ALBERT N. FLOYD & SON	
ALBERT N. FLOYD ... N.J. LIC. NO. 21759 ALBERT N. FLOYD, JR. N.J. LIC. NO. 36725 P.O. BOX 903, ELMER, NEW JERSEY 08318		DATE 4/8/96	
SCALE 1" = 20'		DRAWN DKF	
CHECKED A.N.F.		NUMBER 96-253	

1000

1000

[REDACTED]

08894

Atkinson College

(street, block and lot)

Block	506	LOTS	4

☒ GARAGE ☐ FENCE
☐ OTHER

dimensions, describe materials, and descriptive information)

SEE DIAGRAM explaining each deck 30, 40, 50, 60, 70, 80, 90, 100, 110, 120, 130, 140, 150, 160, 170, 180, 190, 200, 210, 220, 230, 240, 250, 260, 270, 280, 290, 300, 310, 320, 330, 340, 350, 360, 370, 380, 390, 400, 410, 420, 430, 440, 450, 460, 470, 480, 490, 500, 510, 520, 530, 540, 550, 560, 570, 580, 590, 600, 610, 620, 630, 640, 650, 660, 670, 680, 690, 700, 710, 720, 730, 740, 750, 760, 770, 780, 790, 800, 810, 820, 830, 840, 850, 860, 870, 880, 890, 900, 910, 920, 930, 940, 950, 960, 970, 980, 990, 1000, 1010, 1020, 1030, 1040, 1050, 1060, 1070, 1080, 1090, 1100, 1110, 1120, 1130, 1140, 1150, 1160, 1170, 1180, 1190, 1200, 1210, 1220, 1230, 1240, 1250, 1260, 1270, 1280, 1290, 1300, 1310, 1320, 1330, 1340, 1350, 1360, 1370, 1380, 1390, 1400, 1410, 1420, 1430, 1440, 1450, 1460, 1470, 1480, 1490, 1500, 1510, 1520, 1530, 1540, 1550, 1560, 1570, 1580, 1590, 1600, 1610, 1620, 1630, 1640, 1650, 1660, 1670, 1680, 1690, 1700, 1710, 1720, 1730, 1740, 1750, 1760, 1770, 1780, 1790, 1800, 1810, 1820, 1830, 1840, 1850, 1860, 1870, 1880, 1890, 1900, 1910, 1920, 1930, 1940, 1950, 1960, 1970, 1980, 1990, 2000, 2010, 2020, 2030, 2040, 2050, 2060, 2070, 2080, 2090, 2100, 2110, 2120, 2130, 2140, 2150, 2160, 2170, 2180, 2190, 2200, 2210, 2220, 2230, 2240, 2250, 2260, 2270, 2280, 2290, 2300, 2310, 2320, 2330, 2340, 2350, 2360, 2370, 2380, 2390, 2400, 2410, 2420, 2430, 2440, 2450, 2460, 2470, 2480, 2490, 2500, 2510, 2520, 2530, 2540, 2550, 2560, 2570, 2580, 2590, 2600, 2610, 2620, 2630, 2640, 2650, 2660, 2670, 2680, 2690, 2700, 2710, 2720, 2730, 2740, 2750, 2760, 2770, 2780, 2790, 2800, 2810, 2820, 2830, 2840, 2850, 2860, 2870, 2880, 2890, 2900, 2910, 2920, 2930, 2940, 2950, 2960, 2970, 2980, 2990, 3000, 3010, 3020, 3030, 3040, 3050, 3060, 3070, 3080, 3090, 3100, 3110, 3120, 3130, 3140, 3150, 3160, 3170, 3180, 3190, 3200, 3210, 3220, 3230, 3240, 3250, 3260, 3270, 3280, 3290, 3300, 3310, 3320, 3330, 3340, 3350, 3360, 3370, 3380, 3390, 3400, 3410, 3420, 3430, 3440, 3450, 3460, 3470, 3480, 3490, 3500, 3510, 3520, 3530, 3540, 3550, 3560, 3570, 3580, 3590, 3600, 3610, 3620, 3630, 3640, 3650, 3660, 3670, 3680, 3690, 3700, 3710, 3720, 3730, 3740, 3750, 3760, 3770, 3780, 3790, 3800, 3810, 3820, 3830, 3840, 3850, 3860, 3870, 3880, 3890, 3900, 3910, 3920, 3930, 3940, 3950, 3960, 3970, 3980, 3990, 4000, 4010, 4020, 4030, 4040, 4050, 4060, 4070, 4080, 4090, 4100, 4110, 4120, 4130, 4140, 4150, 4160, 4170, 4180, 4190, 4200, 4210, 4220, 4230, 4240, 4250, 4260, 4270, 4280, 4290, 4300, 4310, 4320, 4330, 4340, 4350, 4360, 4370, 4380, 4390, 4400, 4410, 4420, 4430, 4440, 4450, 4460, 4470, 4480, 4490, 4500, 4510, 4520, 4530, 4540, 4550, 4560, 4570, 4580, 4590, 4600, 4610, 4620, 4630, 4640, 4650, 4660, 4670, 4680, 4690, 4700, 4710, 4720, 4730, 4740, 4750, 4760, 4770, 4780, 4790, 4800, 4810, 4820, 4830, 4840, 4850, 4860, 4870, 4880, 4890, 4900, 4910, 4920, 4930, 4940, 4950, 4960, 4970, 4980, 4990, 5000, 5010, 5020, 5030, 5040, 5050, 5060, 5070, 5080, 5090, 5100, 5110, 5120, 5130, 5140, 5150, 5160, 5170, 5180, 5190, 5200, 5210, 5220, 5230, 5240, 5250, 5260, 5270, 5280, 5290, 5300, 5310, 5320, 5330, 5340, 5350, 5360, 5370, 5380, 5390, 5400, 5410, 5420, 5430, 5440, 5450, 5460, 5470, 5480, 5490, 5500, 5510, 5520, 5530, 5540, 5550, 5560, 5570, 5580, 5590, 5600, 5610, 5620, 5630, 5640, 5650, 5660, 5670, 5680, 5690, 5700, 5710, 5720, 5730, 5740, 5750, 5760, 5770, 5780, 5790, 5800, 5810, 5820, 5830, 5840, 5850, 5860, 5870, 5880, 5890, 5900, 5910, 5920, 5930, 5940, 5950, 5960, 5970, 5980, 5990, 6000, 6010, 6020, 6030, 6040, 6050, 6060, 6070, 6080, 6090, 6100, 6110, 6120, 6130, 6140, 6150, 6160, 6170, 6180, 6190, 6200, 6210, 6220, 6230, 6240, 6250, 6260, 6270, 6280, 6290, 6300, 6310, 6320, 6330, 6340, 6350, 6360, 6370, 6380, 6390, 6400, 6410, 6420, 6430, 6440, 6450, 6460, 6470, 6480, 6490, 6500, 6510, 6520, 6530, 6540, 6550, 6560, 6570, 6580, 6590, 6600, 6610, 6620, 6630, 6640, 6650, 6660, 6670, 6680, 6690, 6700, 6710, 6720, 6730, 6740, 6750, 6760, 6770, 6780, 6790, 6800, 6810, 6820, 6830, 6840, 6850, 6860, 6870, 6880, 6890, 6900, 6910, 6920, 6930, 6940, 6950, 6960, 6970, 6980, 69

rear side

other

- If YES, state date and outcome of said matter.

I swear that the above application is true and correct to the best of my knowledge.

date

***FOR OFFICE USE ONLY**

by Donna

not approved

b:disk 2;zoupetu

9/14/00



APPLICABLE.

TAX MAP BASE

PLAN BASE XX FORMER SURVEY BASE

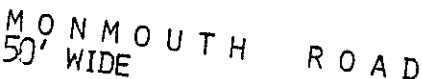
DESCRIPTION: BEING KNOWN AS LOT 4, BLOCK 506 ON THE OFFICIAL TAX MAP, A/K/A LOT 4, BLOCK 233G, PLAN OF COOPER VILLAGE, SECTION 3, MADE BY CHARLES P. CAULFIELD, C.E. AREA = 8391.14 S.

LOT 19, T.M.

LOT 19,

LOT 20, PLAN

LOT 20, T.M.



HUDSON AVENUE 50' WIDE

SURVEY OF PREMISES
NO. 1007 HUDSON AVENUE

SITUATE
TOWNSHIP OF DEPTFORD
GLOUCESTER COUNTY, NEW JERSEY

LAND SURVEYORS

ALBERT N. FLOYD , , N.J. LIC. NO. 21759
ALBERT N. FLOYD, JR. N.J. LIC. NO. 36725

P.O. BOX 903, ELMER, NEW JERSEY 08318

~~ALBERT N. FLOYD~~

L.S.

DATE 4/8/96

SCALE

DRAWN

CHECKED

AN

NUMBER
96-253

TOWNSHIP OF DEPTFORD
1911 COOPER STREET
DEPTFORD, NEW JERSEY
848-5300--EXT. 259



BUILDING
SUBCODE
TECHNICAL SECTION



Date Received 8/31/98
Date Issued
Control #
Permit # 98-0900

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

Block 506 Lot 4
Work Site Location 1007 HUDSON AVE
DEPTFORD
Owner in Fee GEORGE E ATKINSON
Address SAME
Tele. ()
Contractor MASTERWIRE FENCE
Address PO Box 328
HAMMONTON NJ 08037
Tele. () Fax ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

C. CERTIFICATION IN LIEU OF OATH

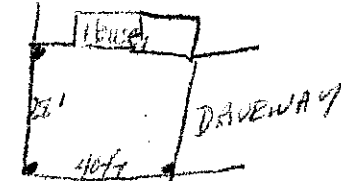
I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature George E. Atkinson

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

3ft HIGH CEDAR FENCE
(DECORATIVE)



JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required			Type:	Failure Failure Approval Initial
☐ All			Footing	
☐ Footing			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			Barrier-Free	
Joint Plan Review Required:			Insulation	
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Finishes	
SUBCODE APPROVAL			Energy	
☐ CO ☐ CCO ☐ CA			Mechanical	
Date:			TCO	
Approved by:			Other	
			Final	
			Barrier-Free	

TYPE OF WORK:

- ☐ New Building
☐ Addition
☒ Alteration
☐ Roofing
☐ Siding
☒ Fence 3ft Height (exceeds 6')
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Other _____
☐ Demolition

FEE (Office Use Only)

\$ _____

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. 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. Alteration \$ _____
3. Total (1+ 2) \$ 5,000

UCC/PRO F-110 (REV 3/96)
Professional Printing
(609) 468-7933

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____
TOTAL FEE \$ _____

1 White = Inspector Copy
3 Pink = Office Copy
2 Canary = Office Copy
4 Gold = Applicant Copy

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NJ 08096
PH: (609) 845-5300

C O N S T R U C T I O N
P E R M I T

Date Permit Issued: 08/31/96
Permit Number: 98-0900
Update Number: 0

Application Type: 08/31/96
Control Number: 0333

I D E N T I F I C A T I O N

Work Site Location: 1007 HUDSON AVE
DEPTFORD

Block: 506 Lot: 4
Unit Number:

Owner in Fee: ATKINSON, GEORGE
Address: 1007 HUDSON AVE
DEPTFORD, NJ 08096
Telephone: [REDACTED]

Agent: MASTER WIRE FENCE
Address: P. O. BOX 328
HAMMINGTON, NJ 08037
Telephone: (609) 567-1616
Lic. No. or Bldrs. Reg. No.:
Federal Emp. No.:

is hereby granted permission to perform the following work:

- (X) BUILDING
() ELECTRICAL
() PLUMBING
() FIRE PROTECTION

- () ELEVATOR DEVICES
() ASBESTOS ABATEMENT
() LEAD HAZARD ABATEMENT
() DEMOLITION

DESCRIPTION OF WORK:

Minor Work

FENCE

() Building.....	\$10.00
() Electric.....	\$
() Plumbing.....	\$
() Fire Protection.....	\$
() Elevator Devices.....	\$
() BCA Training Fee (Vol).....	\$
() BCA Training Fee (Mtl).....	\$1.00
() Cert. of Occupancy.....	\$
() Cert. of Approval.....	\$
() Cert. of Compliance.....	\$
() Cert. Cont Occupancy.....	\$
Total of All Permit Fees.....	\$11.00
Total Amount Due.....	\$11.00

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 alterations: \$ 000.00
TOTAL estimated cost of work: \$ 000.00

Check No.:\$ 0.00
Cash:.....\$11.00
Collected By:..... 0

Use Group(s): R-4

William F. Coughlin
William F. Coughlin, Construction Official
Date 8/31/98

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

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NEW JERSEY
845-5300—EXT. 259



BUILDING
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 504 Lot 4
Work Site Location 1007 Hudson Ave
Owner in Fee George E. Atkinson
Address 504
Tel. () 845-5300
Contractor Masterwire Fence
Address Box 338
Tel. () 800 233-1416
Fax () 800 233-1416
Lic. No. or Bids. Reg. No. 800
Federal Emp. No. 800

B. BUILDING CHARACTERISTICS

Use Group Proposed Present Proposed
Const. Class Proposed Present Proposed
No. of Stories 1
Height of Structure 10 Ft.
Area — Largest Floor 100 Sq. Ft.
New Bldg. Area/All Floors 100 Sq. Ft.
Volume of New Structure 100 Cu. Ft.
Total Land Area Disturbed 100 Sq. Ft.

JOB SUMMARY (Office Use Only)		PLAN REVIEW		INSPECTIONS		Type:		Dates (Month/Day)		Initial	
☐ All	☐ No Plans Required	☐ Foundation	☐ Footing	☐ Foundation	☐ Slab	☐ Frame	☐ Barrier-Free	☐ Insulation	☐ Finishes	☐ Energy	☐ Mechanical
☐ Elec. [] Plumb. [] Fire [] Elevator	☐ Joint Plan Review Required:	☐ Foundation	☐ Footing	☐ Foundation	☐ Slab	☐ Frame	☐ Barrier-Free	☐ Insulation	☐ Finishes	☐ Energy	☐ Mechanical
☐ Subcode Approval	☐ Date:	☐ Foundation	☐ Footing	☐ Foundation	☐ Slab	☐ Frame	☐ Barrier-Free	☐ Insulation	☐ Finishes	☐ Energy	☐ Mechanical
☐ CO [] CC [] CA []	☐ Approved by:	☐ Foundation	☐ Footing	☐ Foundation	☐ Slab	☐ Frame	☐ Barrier-Free	☐ Insulation	☐ Finishes	☐ Energy	☐ Mechanical
☐ Final	☐ Approved by:	☐ Foundation	☐ Footing	☐ Foundation	☐ Slab	☐ Frame	☐ Barrier-Free	☐ Insulation	☐ Finishes	☐ Energy	☐ Mechanical
☐ Barrier-Free	☐ Approved by:	☐ Foundation	☐ Footing	☐ Foundation	☐ Slab	☐ Frame	☐ Barrier-Free	☐ Insulation	☐ Finishes	☐ Energy	☐ Mechanical

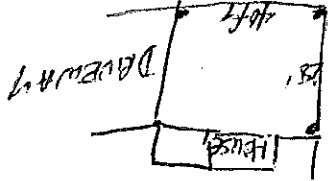
Est. Cost of Bldg. Work:

1. New Bldg. \$ 800
2. Alteration \$ 0
3. Total (1+2) \$ 800

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

34' HIGH Cedar fence
(Decorative)



TYPE OF WORK:

☐ New Building
☒ Alteration
☐ Demolition
☐ Addition
☐ Roofing
☐ Siding
☒ Fence Height (exceeds 6') 34'
☐ Sign Sq. Ft. 0
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Other

\$

FEE (Office Use Only)

Administrative Surcharge \$
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$

UCC/PRO F-110 (REV 3/96)
Professional Printing
(609) 468-7933

1 White = Office Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

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

Signature George E. Atkinson

C. CERTIFICATION IN LIEU OF OATH

Date Received 8/31/98
Date Issued 8/31/98
Control # 98-0900
Permit # 98-0900



[Handwritten signature]

Figure 1

Applicant's NAME ATKINS

Address 1007 Hudson

Owner's NAME Sam E

DESCRIPTION OF LAND TO BE DEVELOPED (street, block and lot)

SUBJECT LOCATION _____

TYPE OF DEVELOPMENT (please check)

NEW CONSTRUCTION
POOL SIGN USE

EXPLANATION (give dimensions, describe materials, and descriptive information)

3ft High Decorative Cedar Picket

Zone Plate

side street frontage

- Has there been any previous appeal, request, or application to any Township Boards or Construction Official involving these premises? Yes _____ No _____
- If YES, state date and outcome of said matter.

I swear that the above application is true and correct to the best of my knowledge

APPLICANT SIGN HERE

8/18/98
date

*****FOR OFFICE USE ONLY*****

date received 8-18-98 by J. H. M. L.

☒ approved ☐ not approved

EXPLANATION:
GOOD SIDE OF FENCE

MUST FACE OUT.

RECOMMENDED LOCATION
b:disk 2,comp path

6 INCHES IN FROM
PROPERTY LINE.

ZONING OFFICER

NOV 19 1964

PROVIDE

26-00

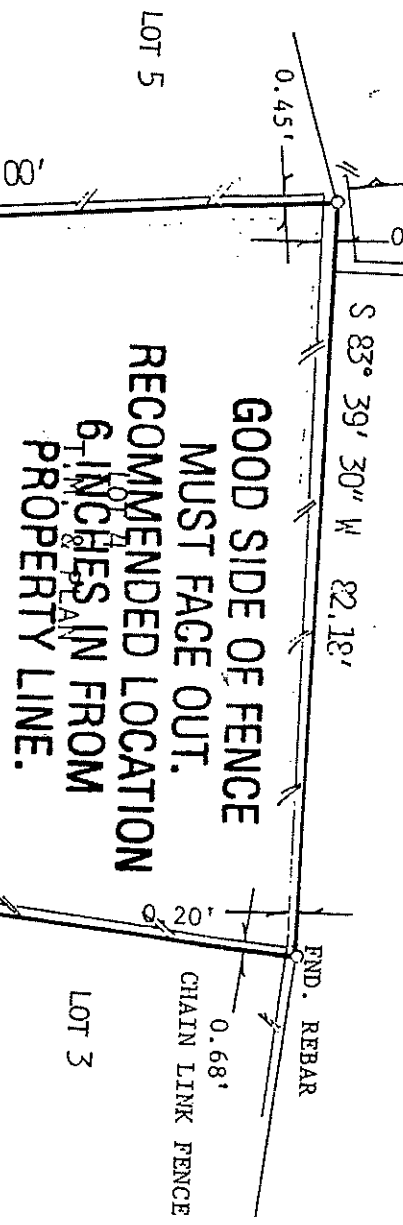
DATE _____

NOTE: UNDER AND SUBJECT TO ALL CONDITIONS, RESTRICTIONS AND EASEMENTS OF RECORD, WHERE APPLICABLE.

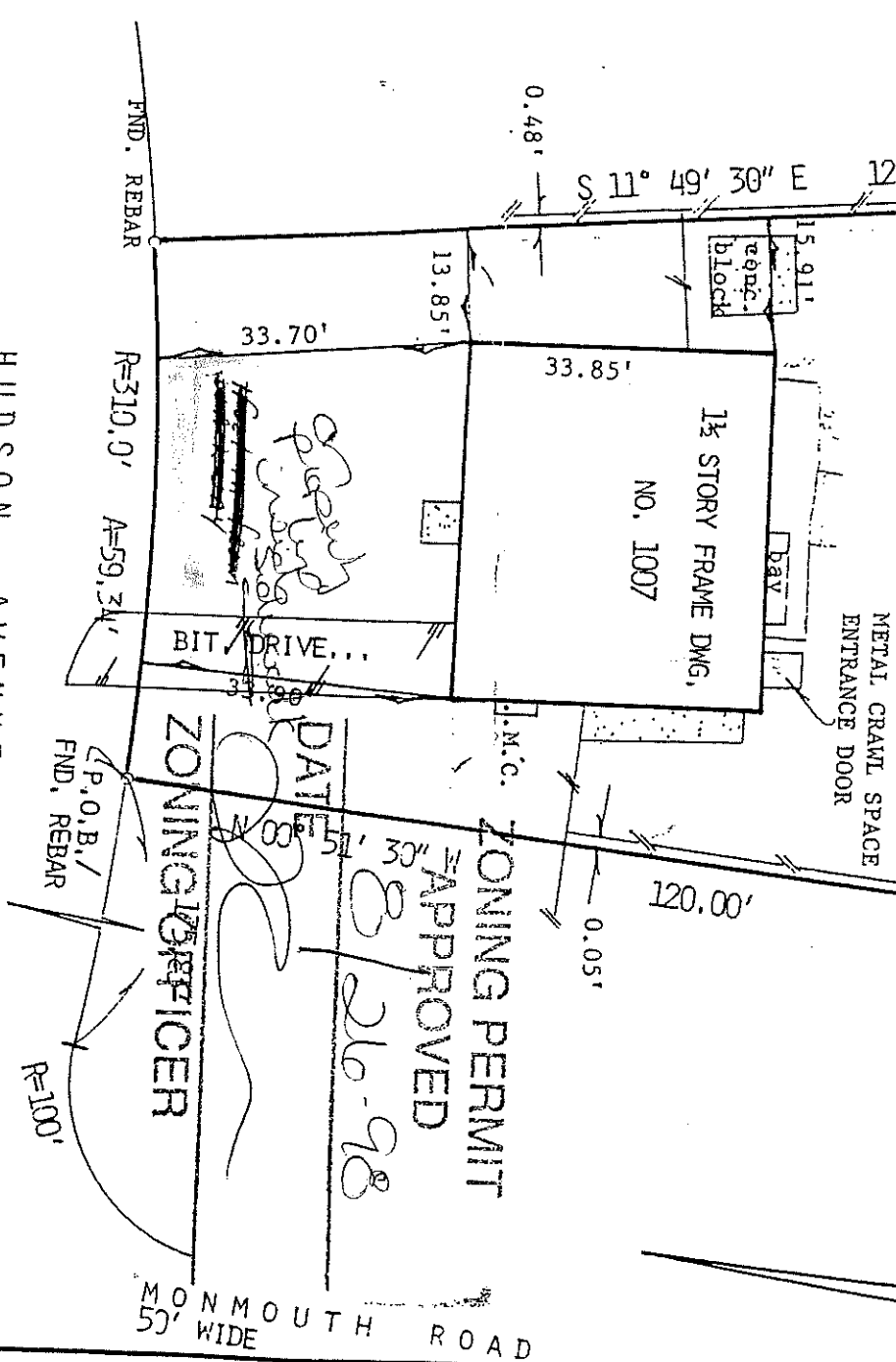
MERIDIAN - DEED BASE
● = REBAR/IRON PIPE SET
■ = CONCRETE MONUMENT SET

TAX MAP BASE — PLAN BASE XX FORMER SURVEY BASE —
DESCRIPTION: BEING KNOWN AS LOT 4, BLOCK 506 ON THE OFFICIAL TAX MAP, A/K/A LOT 4, BLOCK 2336, PLAN OF COOPER VILLAGE, SECTION 3, MADE BY CHARLES P. CAULFIELD, C.E. AREA = 8391.14 S.F.

LOT 18, T.M.
LOT 19, PLAN
LOT 19, T.M.
LOT 20, PLAN
LOT 20, T.M.



GOOD SIDE OF FENCE
MUST FACE OUT.
RECOMMENDED LOCATION
6 INCHES IN FROM
PROPERTY LINE.



TO: CONGRESS TITLE DIVISION
FIDELITY NATIONAL TITLE INSURANCE COMPANY
RYLAND MORTGAGE COMPANY,
ITS SUCCESSORS AND/OR ASSIGNS
AS THEIR INTEREST MAY APPEAR.

TO THE OWNER:
JOHN A. KENNEALLY & GEORGE E. ATKINSON
TO THE INSURER OF TITLE relying hereon, in consideration of the fee paid for making this survey in accordance with the description furnished in regard to this transaction only per below date, I hereby certify to its accuracy (except such easements, if any, that may be located below the surface of lands or on the surface of lands and not visible) as an inducement for the insurer of title to insure the title to the lands and premises shown hereon.

ALBERT N. FLOYD & SON
LAND SURVEYORS
ALBERT N. FLOYD, JR., N.J. LIC. NO. 21759
ALBERT N. FLOYD, JR., N.J. LIC. NO. 36725
P.O. BOX 903, ELMER, NEW JERSEY 08318

SURVEY OF PREMISES			
NO. 1007 HUDSON AVENUE			
SITUATE			
TOWNSHIP OF DEPTFORD			
GLOUCESTER COUNTY, NEW JERSEY			
ALBERT N. FLOYD & SON			
LAND SURVEYORS			
ALBERT N. FLOYD, JR., N.J. LIC. NO. 21759			
ALBERT N. FLOYD, JR., N.J. LIC. NO. 36725			
P.O. BOX 903, ELMER, NEW JERSEY 08318			
DATE	SCALE	DRAWN	CHECKED
4/8/96	1"=20'	DKF	A.N.F.
		NUMBER	96-253

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NEW JERSEY
084-5300-EXT. 200



Date Received
Date Issued
Control #
Permit #

11-20-97
97-0335

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
George E. Johnson

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK
5 ft fence approx 200'

Block 506 Lot 4
Work Site Location 1009 Hudson Ave Deptford
Owner in Fee GEORGE JOHNSON
Address 5411 E
Tel. ()
Contractor PO BOX 308
Address DEPTFORD NJ 08037
Tel. (609) 507-1616
Lic. No. or Bids. Reg. No.
Federal Emp. No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Type:	Dates (Month/Day)	Failure	Failure	Approval	Initial
[] All				Footings					
[] Footing				Foundation					
[] Foundation				Slab					
[] Frame				Frame					
[] Other				Insulation					
Joint Plan Review Required:									
[] Elec. [] Plumb. [] Fire				Energy					
SUBCODE APPROVAL									
[] CO [] CCO [] CA				TCO					
Date: 3-14-99									
Approved By: [Signature]									

B. BUILDING CHARACTERISTICS

Use Group
Constr. Class
No. of Stories
Height of Structure
Area - Largest Floor
New Bldg. Area/All Floors
Volume of New Structure
Total Land Area Distributed

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

TYPE OF WORK:
[] New Building
[] Addition
[X] Alteration
[] Roofing
[] Siding
[X] Fence
Height (6' or over)
Sq. Ft.
[] Sign
[] Pool
[] Asbestos Abatement
[X] Other
[] Other
[] Demolition

Collected by:
DCA TRAINING FEE
TOTAL FEE

Administrative Surcharge
Paid [] Check #
Minimum Fee

(Office Use Only)
FEE

12x18
changed to concrete pad

TOWNSHIP OF DEPTFORD
PAYMENT RECEIPT
CONSTRUCTION DEPARTMENT

077-0385

Name: _____ Address: _____
Block: _____ Lot(s): _____

CURRENT ACCOUNT

<u>CODE</u>	<u>TYPE</u>	<u>PERMIT#</u>	<u>AMOUNT</u>
100	Building	_____	\$ _____
102	Plumbing	_____	\$ _____
103	Electric	_____	\$ _____
104	Fire	_____	\$ _____
106	Certificates	_____	\$ _____
_____	_____	_____	\$ _____
109	Photo Copy Fee	_____	\$ _____
_____	_____	_____	\$ _____
149	Other	_____	\$ _____

TRUST ACCOUNT

620	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

TOTAL COLLECTED WHEN PERMIT ISSUED \$ _____

☒ CASH ☒ CHECK ☐ MONEY ORDER

DATE: _____ ISSUED BY: _____
DATE: _____ RECEIVED BY: _____
DATE: _____ POSTED BY: _____ BATCH#: _____

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NEW JERSEY
845-5300-EXT. 259



Date Received
Date Issued
Control #
Permit #

4-24-97
97-0335

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

C. CERTIFICATION IN LIEU OF OATH

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

5ft fence approx 200'
12x28'
12x28' Deck 12-15 inches high

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANG-
ING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.
Block 506 Lot 4
Work Site Location 1007 Hudson Ave Deptford
Owner in Fee George E. Attwood
Address Same
Tele. () Same
Contractor Self Master Wks & Fence
Address PO Box 338
Address Hammondtown NJ 08037
Lic. No. or Bldrs. Reg. No. (609) 567-1614
Federal Emp. No. _____ or Social Security No. _____

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	Date
INSPECTIONS	Dates (Month/Day)
[] All	
[] Footing	
[] Foundation	
[] Slab	
[] Frame	
[] Other	
Joint Plan Review Required:	
[] Elec. [] Plumb. [] Fire	
SUBCODE APPROVAL	
[] CO [] CCO [] CA	
TCO	
Mechanical	
Energy	
Finishes:	
Insulation	
Frame	
Slab	
Foundation	
Footing	
Type:	
Failure	
Failure	
Initial	

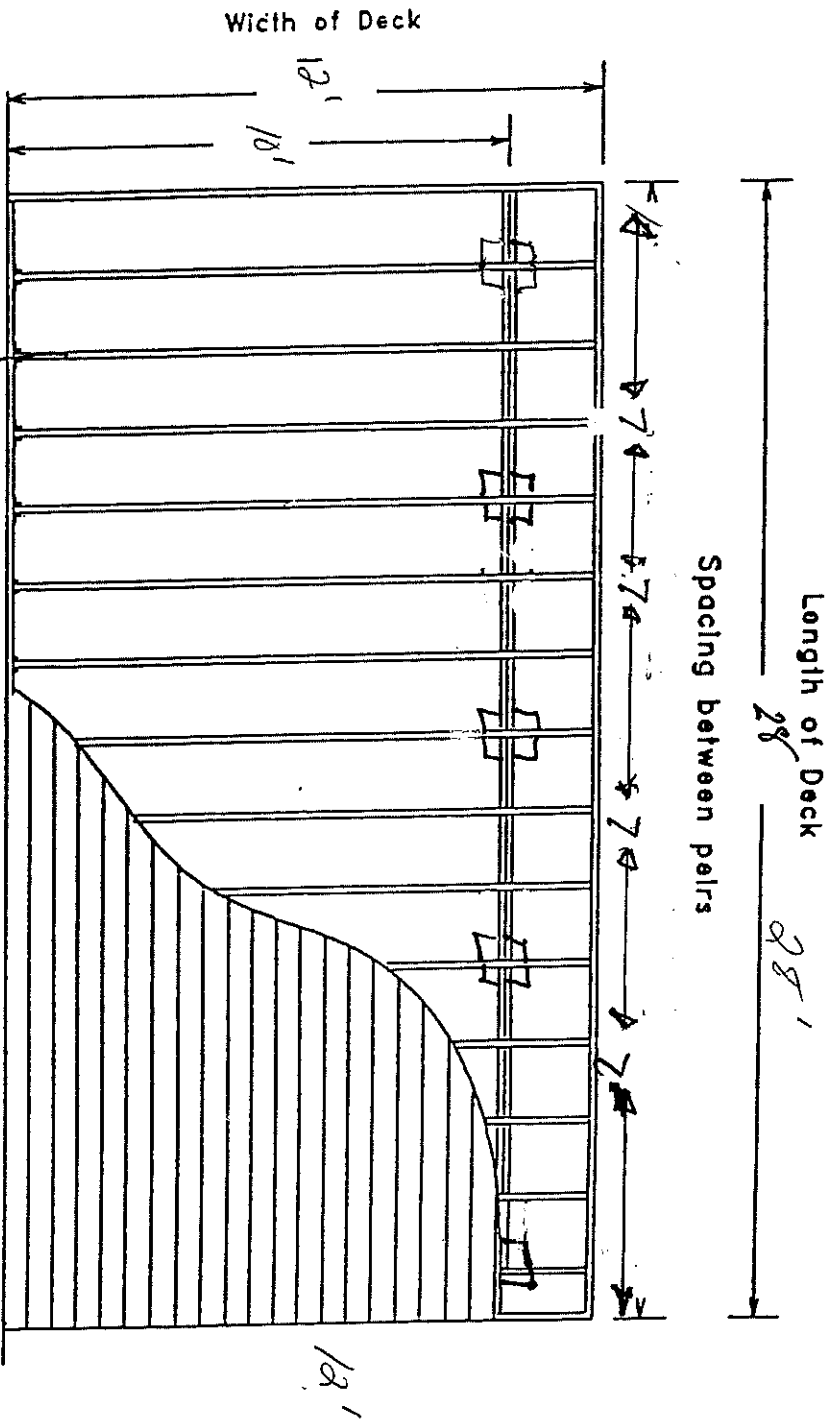
B. BUILDING CHARACTERISTICS

Use Group _____
Constr. Class _____
No. of Stories _____
Height of Structure _____
Area—Largest Floor _____
New Bldg. Area/All Floors _____
Volume of New Structure _____
Total Land Area Disturbed _____

Est. Cost of Bldg. Work:
1. New Bldg. \$ 4,500.00
2. Alteration \$ 2,000.00
3. Total (1+2) \$ 6,500.00

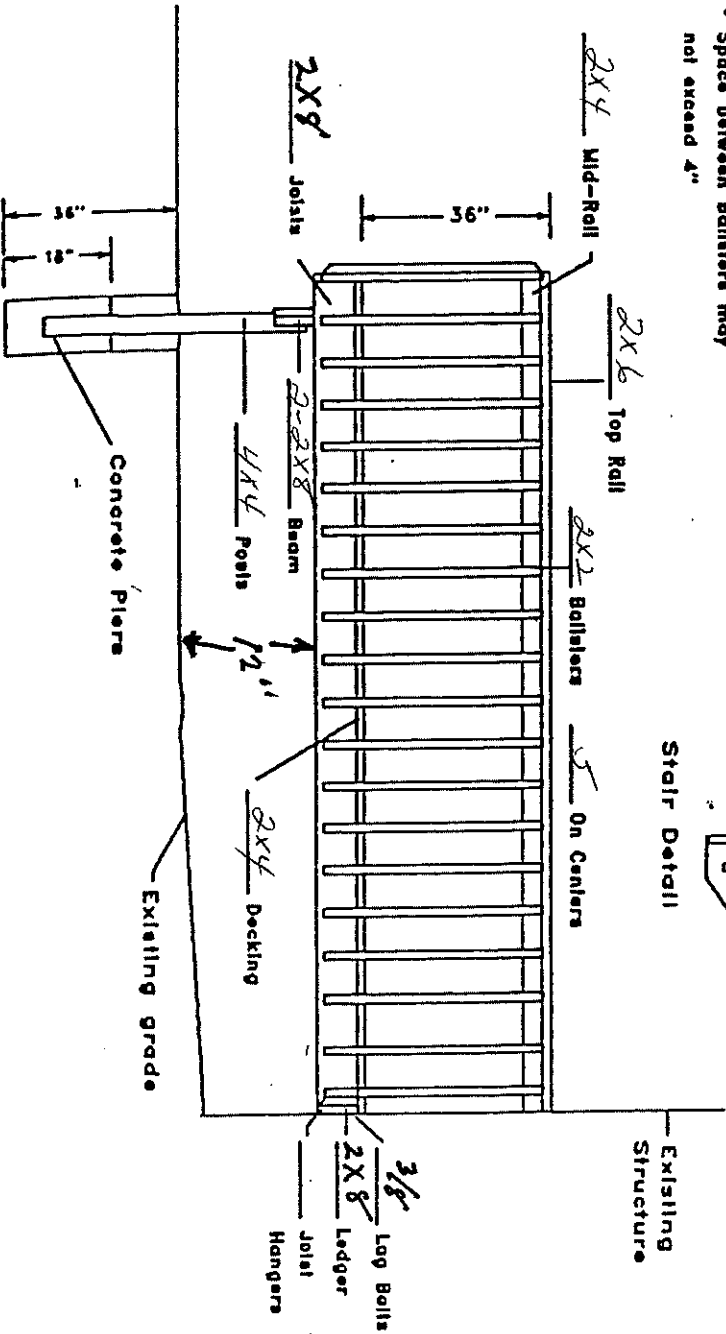
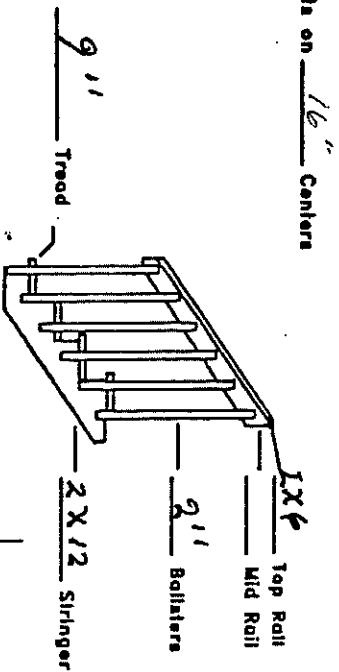
TYPE OF WORK:	
[] New Building	
[] Addition	
[X] Alteration	
[] Roofing	
[] Siding	
[X] Fence	
[] Sign	
[] Pool	
[] Asbestos Abatement	
[X] Other Deck 12x28' x 15" high	
[] Other	
[] Demolition	

Height (6' or over) 5' Sq. Ft. _____
Administrative Surcharge _____
Minimum Fee _____
DCA TRAINING FEE _____
TOTAL FEE 44.00



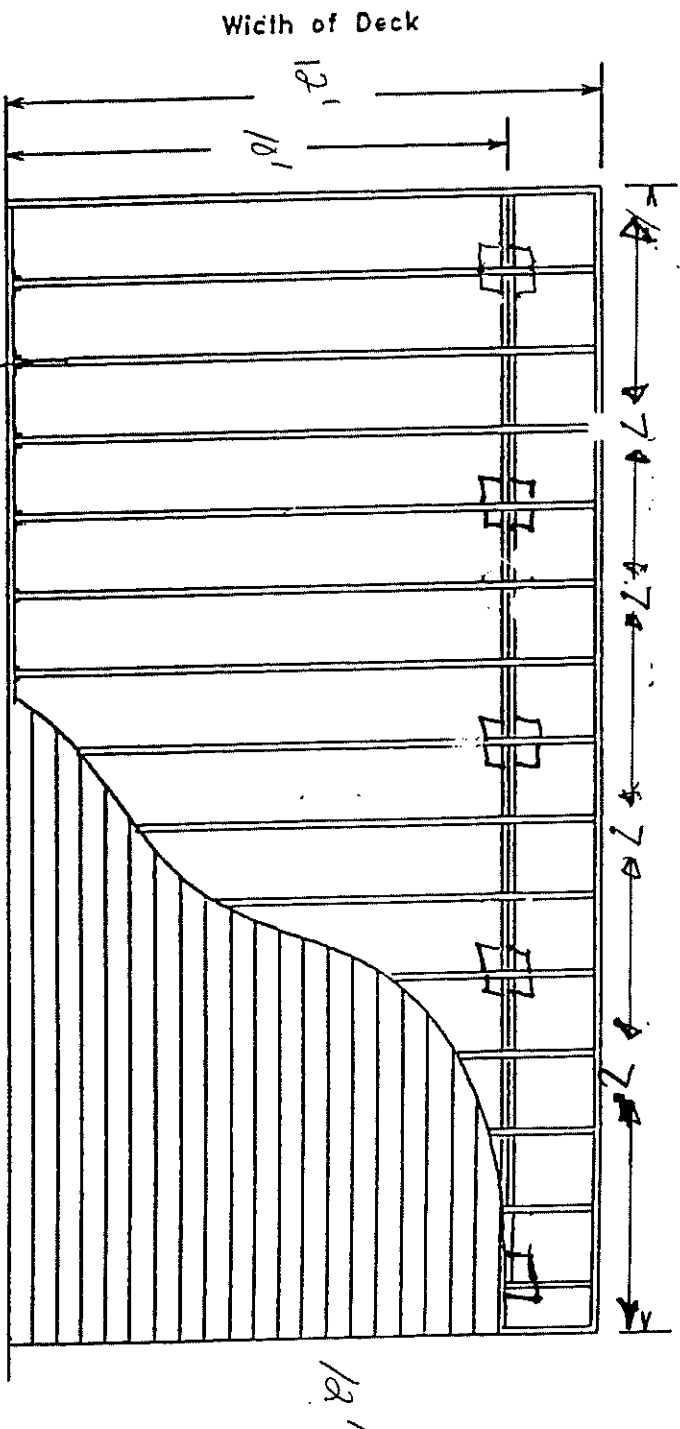
Note

- Concrete Piers are minimum 12" x 12"
- Space Between Balusters may not exceed 4"



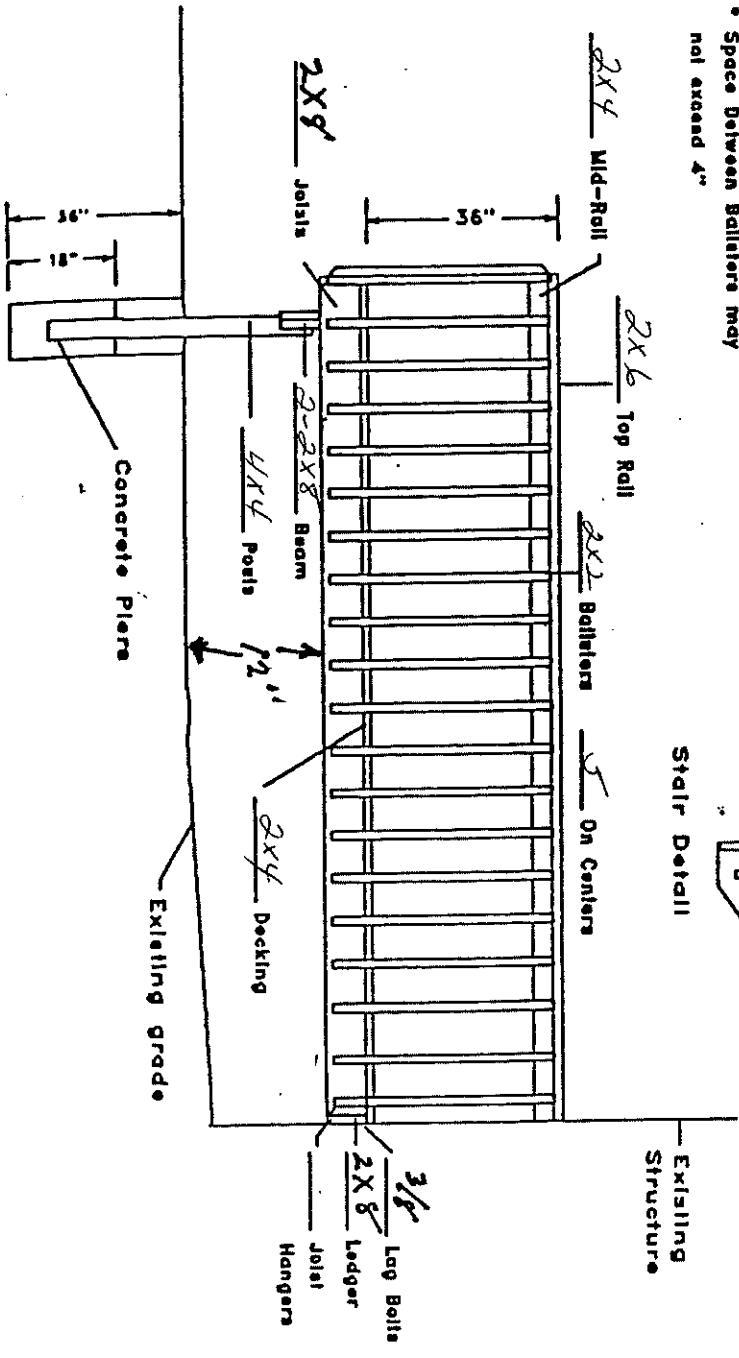
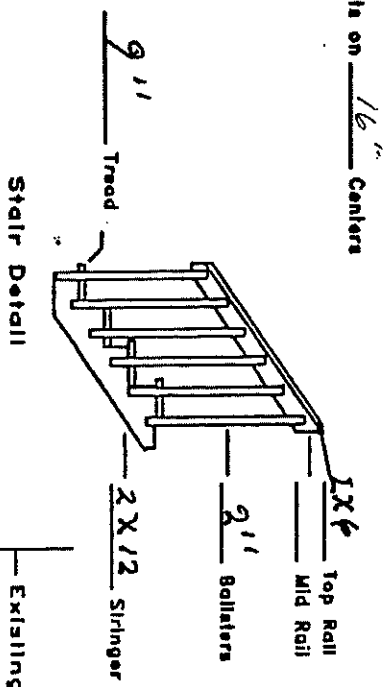
Length of Deck 28' 28'

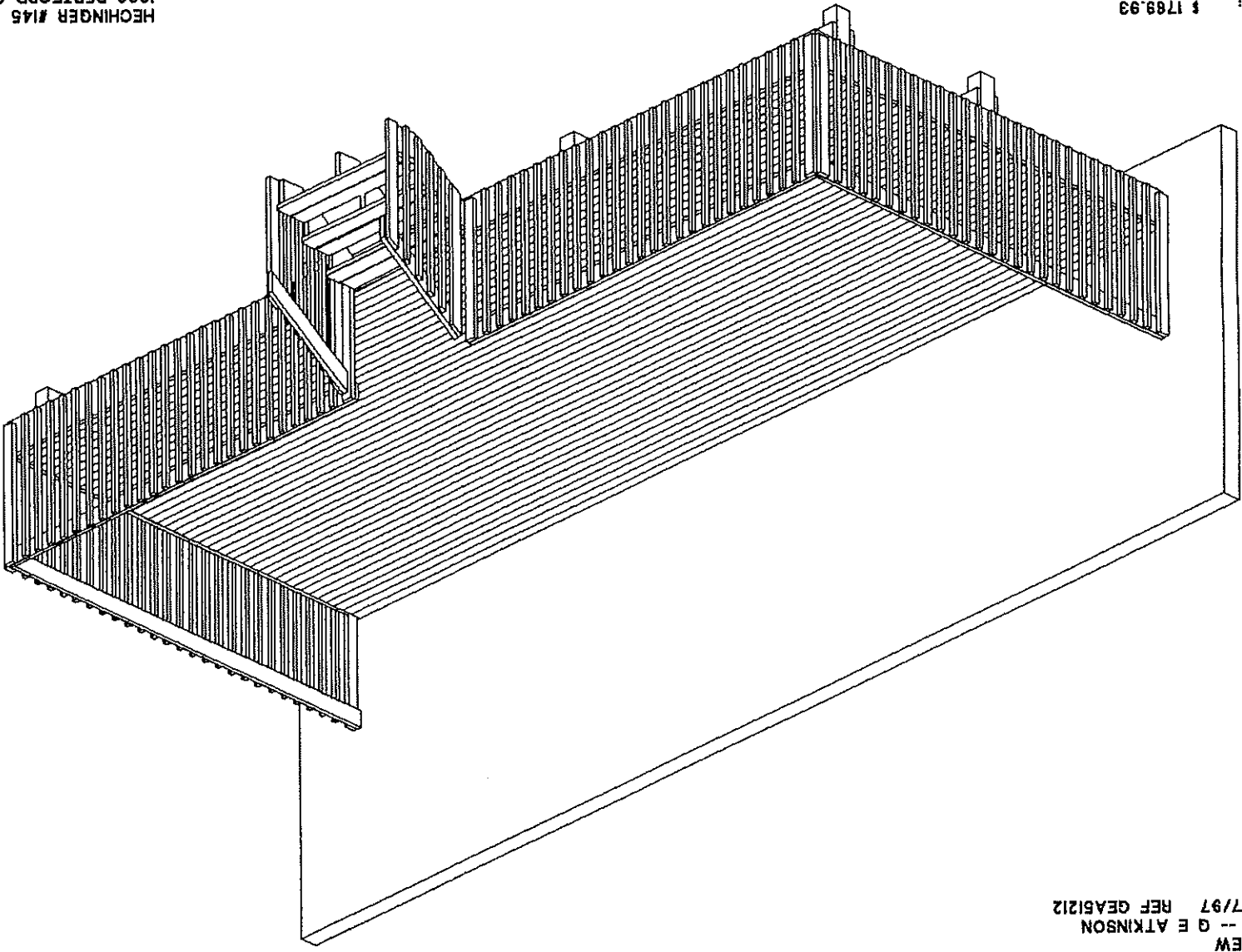
Spacing between pairs



Note

- Concrete Piers are minimum 12" x 12"
- Space Between Ballstere may not exceed 4"

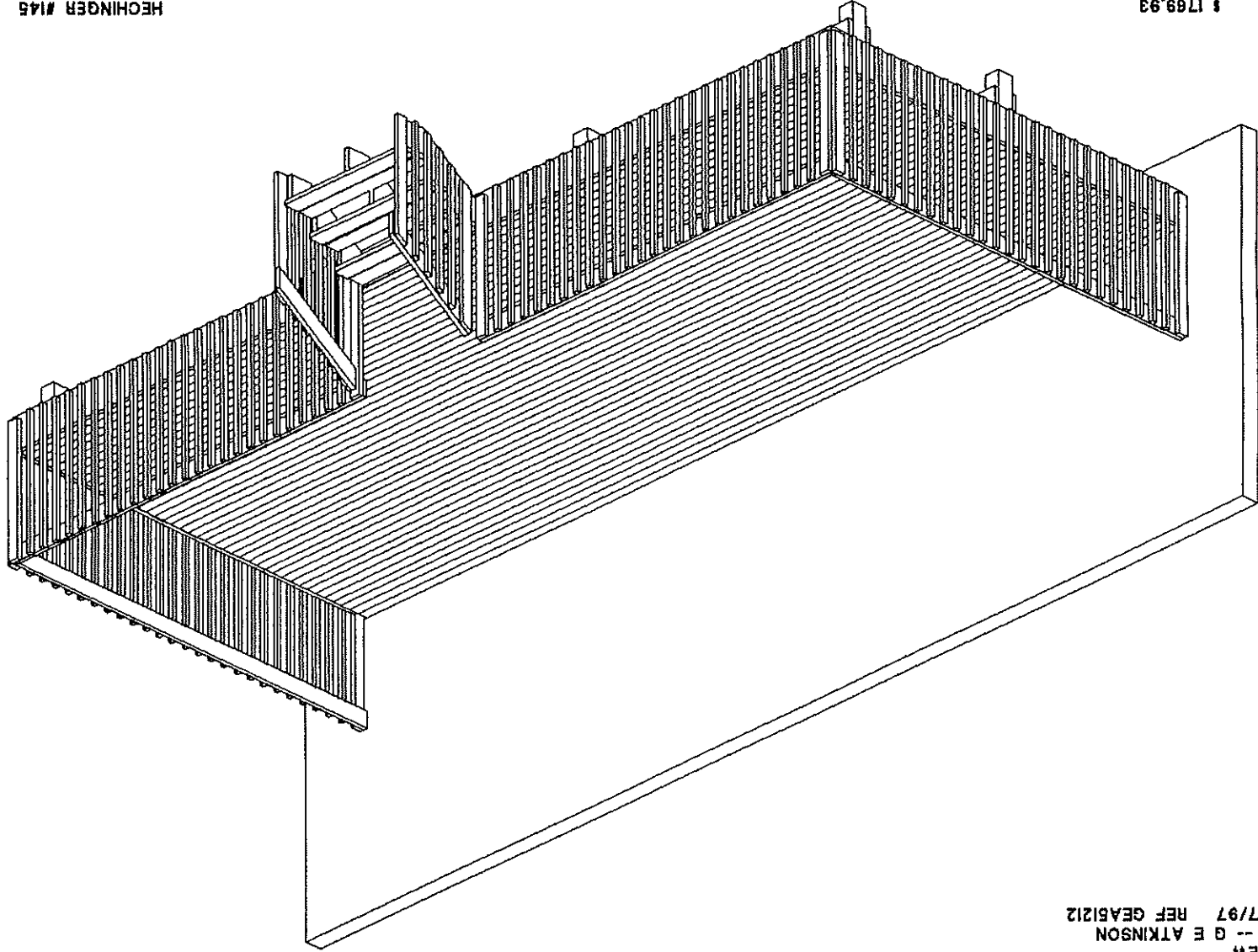




CUSTOM VIEW
CUSTOMER -- G E ATKINSON
DATE 03/27/97 REF GEAS1212

Total Cost: \$ 1789.93
Price Valid for 5 Days.

HECHINGER #145
1800 DEPTFORD CENTER RD.
DEPTFORD N.J.



CUSTOM VIEW
CUSTOMER -- G E ATKINSON
DATE 03/27/97 REF GEAB212

Total Cost: \$ 1789.93
Price Valid for 5 Days.

HECHINGER #145
1800 DEPTFORD CENTER RD.
DEPTFORD N.J.

4-3-97 ? shed
new shed
leaving ✓
DEPTFORD TOWNSHIP
ZONING PERMIT APPLICATION

A Zoning Permit shall be required for each unit prior to the erection or structural alteration of any building or structure (including, signs, storage sheds, fences, pools etc.) or portion thereof and prior to the use or change in use of a building or land in Deptford Township. Construction permits may not be issued until Zoning Approval is received.

Applicant's NAME George Arkuson PHONE # [REDACTED]

Address 1007 Hudson Ave, Deptford Zip Code 18096

Owner's NAME Same

DESCRIPTION OF LAND TO BE DEVELOPED (street, block and lot)

SUBJECT LOCATION BLOCK 506 LOTS 4

TYPE OF DEVELOPMENT (please check)

NEW CONSTRUCTION ADDITION GARAGE FENCE ✓
POOL SIGN USE PERMIT OTHER ✓ Deck #1 Cedar 5" x 6" x 4"

EXPLANATION (give dimensions, describe materials, and descriptive information)

18"-18" HIGH 16' from back of house 28' across back of house w/ ARKUSON'S STEPS
Pressure Treated lumber. (Deck)
Zone Plate SETBACKS: front rear 32' side 18'

- side street frontage lot depth other
- Has there been any previous appeal, request, or application to any Township Boards or Construction Official involving these premises? Yes ✓ No
 - If YES, state date and outcome of said matter.

JUNE 1996 Storage Shed (GRAVATED)
I swear that the above application is true and correct to the best of my knowledge.

APPLICANT SIGN HERE George E. Arkuson
date 3/31/97 signature

***** FOR OFFICE USE ONLY *****

date received 3-31 by JL

approved not approved

EXPLANATION:

b:disk 2;zonperm

ZONING PERMIT

4/3-97

[Signature]
ZONING OFFICER

NOTE: UNDER AND SUBJECT TO ALL CONDITIONS, RESTRICTIONS AND EASEMENTS OF RECORD, WHERE APPLICABLE.

MERIDIAN - DEED BASE

TAX MAP BASE

PLAN BASE XX

FORMER SURVEY BASE

● = REBAR/IRON PIPE SET

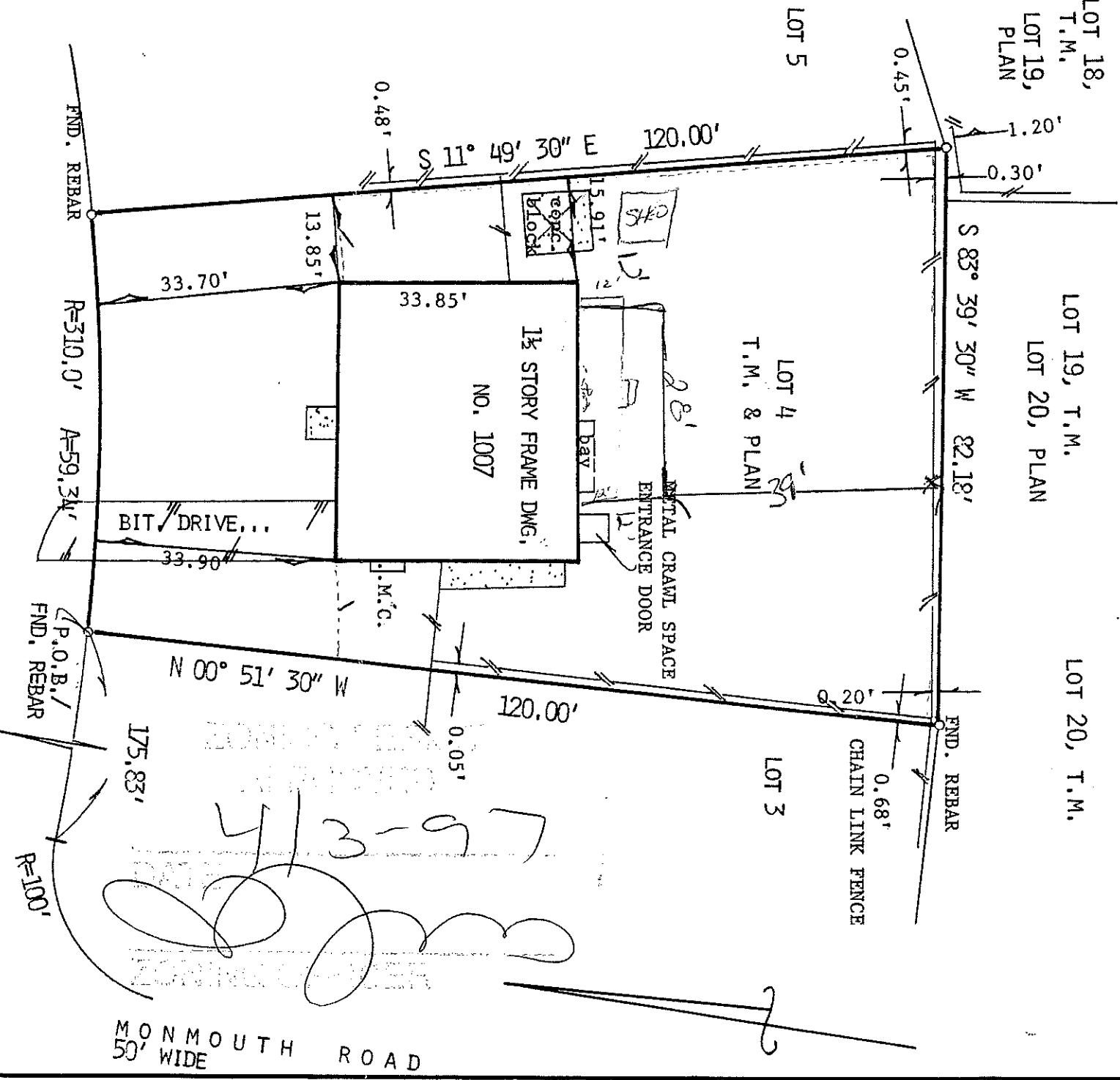
■ = CONCRETE MONUMENT SET

DESCRIPTION: BEING KNOWN AS LOT 4, BLOCK 506 ON THE OFFICIAL TAX MAP, A/K/A LOT 4, BLOCK 235G, PLAN OF COOPER VILLAGE, SECTION 3, MADE BY CHARLES P. CAULFIELD, C.E. AREA = 8391.1± S.F.

LOT 18,
T.M.
LOT 19,
PLAN

LOT 19, T.M.
LOT 20, PLAN

LOT 20, T.M.



TO: CONGRESS TITLE DIVISION
FIDELITY NATIONAL TITLE INSURANCE COMPANY
RYLAND MORTGAGE COMPANY,
ITS SUCCESSORS AND/OR ASSIGNS
AS THEIR INTEREST MAY APPEAR

TO THE OWNER:
JOHN A. KENNEALLY & GEORGE E. ATKINSON

SURVEY OF PREMISES
NO. 1007 HUDSON AVENUE

SITUATE
TOWNSHIP OF DEPTFORD
GLOUCESTER COUNTY, NEW JERSEY

ALBERT N. FLOYD & SON
LAND SURVEYORS

TO THE INSURER OF TITLE relying hereon, in consideration of the fee paid for making this survey in accordance with the description furnished in regard to this transaction only per below date, I hereby certify to its accuracy (except such easements, if any, that may be located below the surface of lands or on the surface of lands and not visible) as an inducement for the insurer of title to insure the title to the lands and premises shown hereon.

ALBERT N. FLOYD ... N.J. LIC. NO. 21759
ALBERT N. FLOYD, JR. N.J. LIC. NO. 36725
P.O. BOX 903, ELMER, NEW JERSEY 08318

ALBERT N. FLOYD

L.S.

DATE	SCALE	DRAWN	CHECKED	NUMBER
4/8/96	1" = 20'	DKF	A.N.F.	96-253

New Search

Block:	506	Prop Loc:	1007 HUDSON AVE	Owner:	GLEESON, MARY J	Square Ft:	1761
Lot:	4	District:	0802 DEPTFORD	Street:	1007 HUDSON AVE	Year Built:	1957
Qual:		Class:	2	City/State:	DEPTFORD, NJ 08096	Style:	CC

Additional Information

Prior Block:	Acct Num:	Add Lots:	EPL Code:	0	0	0
Prior Lot:	Mtg Acct:	Land Desc:	Statute:			
Prior Qual:	Bank Code:	Bldg Desc:	Initial:	0000000	Further:	0000000
Updated:	Tax Codes:	Class4Cd:	Desc:			
Zone:	Map Page:	Acraage:	Taxes:	5376.83	/	0.00

Sale Date:	06/06/08	Book:	4547	Page:	32	Price:	201000	NU#:	0	Grantor	GLEESON, MARY J
More Info	Sr1a	Date	06/06/08	Book	4547	Page	32	Price	201000	NU#	46.26

TAX-LIST-HISTORY

Year	Owner Information	Land/Imp/Tot	Exemption	Assessed	Property
					Class
2014	GLEESON, MARY J	39900	0	185600	2
	1007 HUDSON AVENUE	145700			
	DEPTFORD, NJ 08096	185600			
2013	GLEESON, MARY J	39900	0	185600	2
	1007 HUDSON AVENUE	145700			
	DEPTFORD, NJ 08096	185600			
2012	GLEESON, MARY J	39900	0	185600	2
	1007 HUDSON AVENUE	145700			
	DEPTFORD, NJ 08096	185600			
2011	GLEESON, MARY J	31300	0	93000	2
	1007 HUDSON AVENUE	61700			
	DEPTFORD, NJ 08096	93000			

TWP. OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NEW JERSEY
845-5300—EXT. 259



CONSTRUCTION
PERMIT

Date issued

Control #

Permit #

5-20-96

960415

Heathland/Holly

Lot 4

Contractor

Address

Owner in Fee

Address

Tele. ()

Lic. No. or Bids. Reg. No.

Federal Emp. No.

or Social Security No.

IDENTIFICATION Block

Work Site Location

1007 Kudman

506

Address

Tele. ()

Lic. No. or Bids. Reg. No.

Federal Emp. No.

or Social Security No.

is hereby granted permission to perform the following work:

☒ BUILDING

☐ PLUMBING

☐ ELECTRICAL

☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

8X8X718"

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 \$

695.00

CONSTRUCTION OFFICIAL

[Signature]

(see reverse side)

Collected By:

Cash

Check No.

Total

Other

Cert. of Occ.

DCA Training Fee

Other

Elevator Devices

Fire Protection

Plumbing

Electrical

Building

PAYMENTS (Office Use Only)

35.00

1.00

35.00

PRO 208 B

UCC FORM F-170C

1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT

TWP. OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NEW JERSEY
845-5300—EXT. 259



CONSTRUCTION
PERMIT
4

IDENTIFICATION Block Lot 506
Work Site Location 1007
Contractor 1007
Address 1007
Owner in Fee 1007
Address 1007
Tele. () 1007
Lic. No. or Bids. Reg. No. 1007
Federal Emp. No. 1007
or Social Security No. 1007

Date issued 5-20-96
Control # 960415
Permit # 960415

is hereby granted permission to perform the following work:
☒ BUILDING
☐ PLUMBING
☐ OTHER
☐ ELECTRICAL
☐ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

8x8x718"

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 \$ 695.00

CONSTRUCTION OFFICIAL

[Signature]

PAYMENTS (Office Use Only)
Building 35.00
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee 1.00
Cent. of Occ.
Other
Total 36.00
Check No.
Cash
Collected By:

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NEW JERSEY
845-5300—EXT. 259



Date Received
Date Issued
Control #
Permit #

5-20-96
96-0415

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

Block 506 Lot 4
Work Site Location 1007 Hudson Ave
Owner in Fee George Atkinson
Address Same
Contractor HENRIKSEN INDUSTRIES (SELF)
Address 1007

Tel. ()
Lic. No. or Bids. Reg. No.
Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	PLAN REVIEW
Date	Initial
Footings	Footings
Foundation	Foundation
Slab	Slab
Frame	Frame
Insulation	Insulation
Finishes:	Finishes:
Energy	Energy
Mechanical	Mechanical
TCO	TCO
Other	Other
Final	Final

B. BUILDING CHARACTERISTICS

Use Group Present
Constr. Class Present
No. of Stories 1
Height of Structure 11.8"
Area—Largest Floor 64
Sq. Ft. 64
New Bldg. Area/All Floors 512
Sq. Ft. 512
Volume of New Structure 512
Cu. Ft. 512
Total Land Area Disturbed 512
Sq. Ft. 512

Est. Cost of Bldg. Work: \$1695
1. New Bldg. \$
2. Alteration \$
3. Total (1+2) \$

D. TECHNICAL SITE DATA

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

TYPE OF WORK:	
[] New Building	[] Addition
[] Alteration	[] Demolition
[] Roofing	[] Other
[] Siding	[] Asbestos Abatement
[] Fence	[] Other
[] Sign	[] Pool
[] Sq. Ft.	[] Height (6' or over)

Administrative Surcharge \$
Minimum Fee \$
DCA TRAINING FEE \$
TOTAL FEE \$35.00

PRO 210B

5/17/96

called 5/17/96
4pm
✓

DEPTFORD TOWNSHIP
ZONING PERMIT APPLICATION

A Zoning Permit shall be required for each unit prior to the erection or structural alteration of any building or structure (including, signs, storage sheds, fences, pools etc.) or portion thereof and prior to the use or change in use of a building or land in Deptford Township. Construction permits may not be issued until Zoning Approval is received.

Applicant's NAME George E. Atkinson PHONE # [REDACTED]

Address 1007 Hudson Ave Deptford Zip Code 08096

Owner's NAME Same attached copy of

DESCRIPTION OF LAND TO BE DEVELOPED (street, block and lot)

SUBJECT LOCATION BLOCK 506 LOTS 4

TYPE OF DEVELOPMENT (please check)

NEW CONSTRUCTION ADDITION GARAGE FENCE
POOL SIGN USE PERMIT OTHER STORAGE SHED

EXPLANATION (give dimensions, describe materials, and descriptive information)

1000 + SHEDS 8' X 8' X 7' 8" NO ELECTRIC OR WATER

Zone R-10 Plate 2.1 SETBACKS: front rear side side

- side street frontage lot depth other
- Has there been any previous appeal, request, or application to any Township Boards or Construction Official involving these premises? Yes No ✓
 - If YES, state date and outcome of said matter.

I swear that the above application is true and correct to the best of my knowledge.

APPLICANT SIGN HERE George E. Atkinson
date 5/17/96 signature

*****FOR OFFICE USE ONLY*****

date received 5-10-96 by J. Bruce

approved X 5/17/96 not approved X 5/17/96

EXPLANATION:

Moved shed Setbacks increased 5/17-96
found safe endpoints

ZONING PERMIT

APPROVED

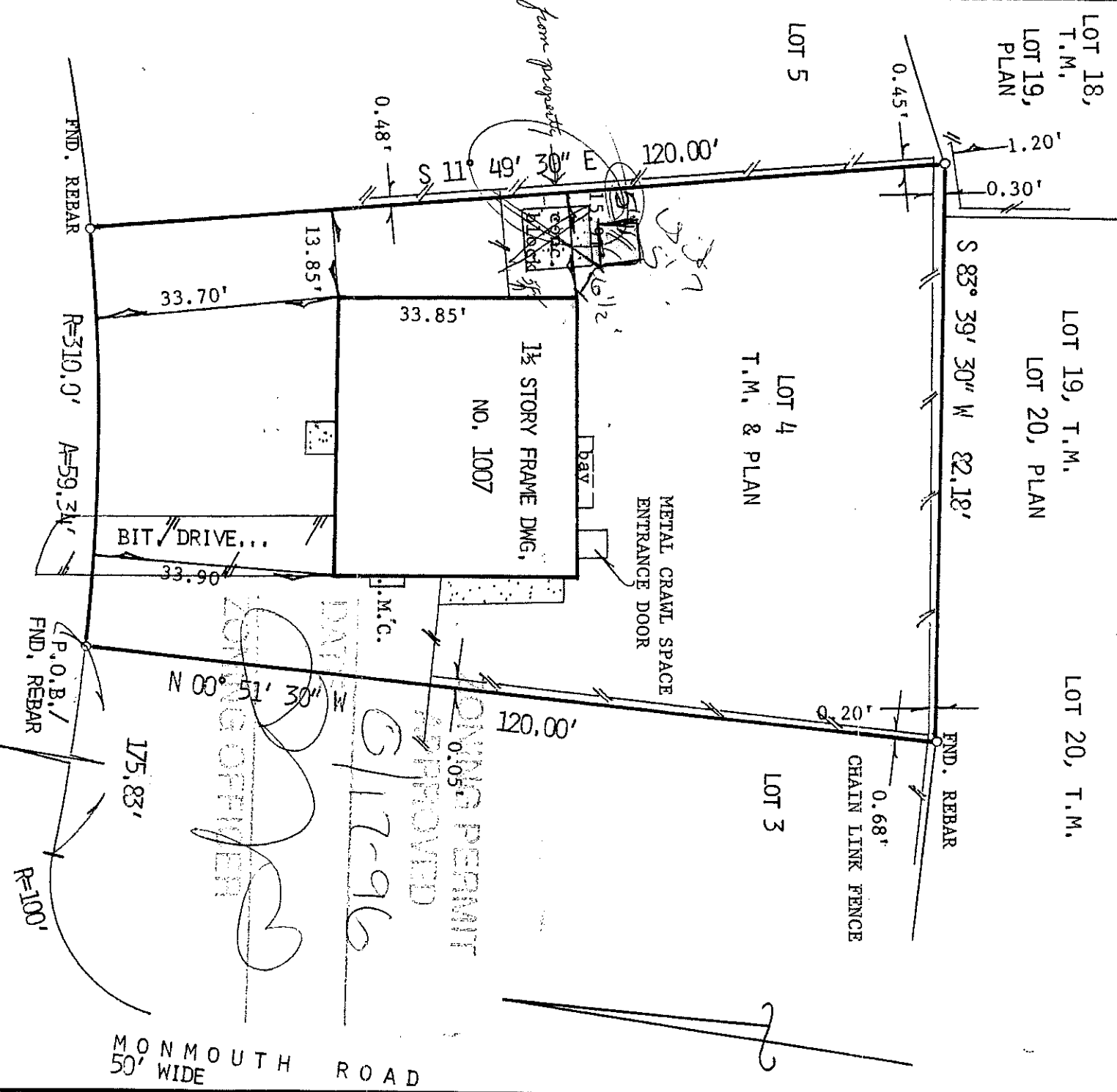
b:\disk 2;zonperm

ZONING OFFICER

NOTE: UNDER AND SUBJECT TO ALL CONDITIONS, RESTRICTIONS AND EASEMENTS OF RECORD, WHERE APPLICABLE.

MERIDIAN - DEED BASE TAX MAP BASE PLAN BASE XX FORMER SURVEY BASE
● = REBAR/IRON PIPE SET
■ = CONCRETE MONUMENT SET

DESCRIPTION: BEING KNOWN AS LOT 4, BLOCK 506 ON THE OFFICIAL TAX MAP; A/K/A LOT 4, BLOCK 233G, PLAN OF COOPER VILLAGE, SECTION 3, MADE BY CHARLES P. CAULFIELD, C.E. AREA = 8391.14 S.F.



TO: CONGRESS TITLE DIVISION
FIDELITY NATIONAL TITLE INSURANCE COMPANY
RYLAND MORTGAGE COMPANY,
ITS SUCCESSORS AND/OR ASSIGNS
AS THEIR INTEREST MAY APPEAR

TO THE OWNER:
JOHN A. KENNEALLY & GEORGE E. ATKINSON

SURVEY OF PREMISES
NO. 1007 HUDSON AVENUE

SITUATE
TOWNSHIP OF DEPTFORD
GLOUCESTER COUNTY, NEW JERSEY

ALBERT N. FLOYD & SON
LAND SURVEYORS

ALBERT N. FLOYD ... N.J. LIC. NO. 21759
ALBERT N. FLOYD, JR. N.J. LIC. NO. 36725

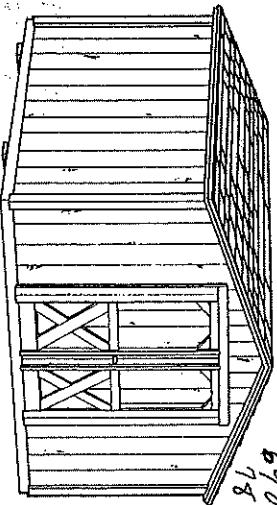
TO THE INSURER OF TITLE relying hereon, in consideration of the fee paid for making this survey in accordance with the description furnished in regard to this transaction only per below date, I hereby certify to its accuracy (except such easements, if any, that may be located below the surface of lands or on the surface of lands and not visible) as an inducement for the insurer of title to insure the title to the lands and premises shown hereon.

P.O. BOX 903, ELMER, NEW JERSEY 08318

Albert N. Floyd
ALBERT N. FLOYD L.S.

DATE	SCALE	DRAWN	CHECKED	NUMBER
4/8/96	1"=20'	DKF	A.N.F.	96-253

STATESMAN



Has tall sidewall and gable roof.

Prices may vary by location.

All dimensions are approximate.

Prices subject to change without notice.

NOT INCLUDED BY HEARTLAND

- ♦ Painting, Staining or Caulking
- ♦ Leveling of building beyond 6"
- ♦ EXCAVATING
- ♦ Building Permits, Zoning or Covenant Searches

PAYMENT PLANS

Payment for your Heartland building may be made in the following ways. All arrangements for payment must be made at the time of ordering the unit.

1. C.O.D. - Payment is made upon completion of unit.
 2. VISA, MasterCard, and Discover
Card number and expiration date are given to and approved by Heartland at the time of the order.
 3. Heartland Bank One MasterCard with 90 day option.
All correspondence concerning payments should be directed to "Receivables Dept." P.O. Box 1770, Carmel, IN 46032.
- All buildings F.O.B. nearest plant. Prices include delivery and set up near one of our plants.

6' SIDEWALL

6x6x7'3"	\$ 639.00
6x8x7'3"	739.00
6x10x7'3"	849.00
6x12x7'3"	959.00

6' SIDEWALL

16x12x9'6"	\$2149.00
16x16x9'6"	2709.00
16x20x9'6"	3169.00
16x24x9'6"	3729.00

8' SIDEWALL

16x12x11'6"	\$2309.00
16x16x11'6"	2929.00
16x20x11'6"	3529.00
16x24x11'6"	4049.00

7' SIDEWALL

10x8x9	\$1049.00
10x10x9	1259.00
10x12x9	1429.00
10x16x9	1729.00
10x20x9	1999.00

10x8x8	\$ 999.00
10x10x8	1189.00
10x12x8	1339.00
10x16x8	1639.00
10x20x8	1919.00
12x8x8'6"	\$1259.00
12x10x8'6"	1429.00
12x12x8'6"	1669.00
12x16x8'6"	2099.00
12x20x8'6"	2519.00
12x24x8'6"	2949.00

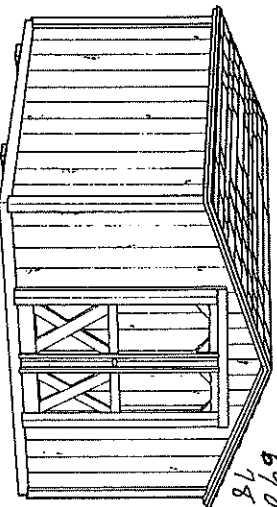
12x8x9'6"	\$1299.00
12x10x9'6"	1499.00
12x12x9'6"	1749.00
12x16x9'6"	2189.00
12x20x9'6"	2629.00
12x24x9'6"	3079.00
16x12x10'6"	\$2229.00
16x16x10'6"	2819.00
16x20x10'6"	3349.00
16x24x10'6"	3889.00

FEATURES OF HEARTLAND BUILDINGS

- ♦ All buildings are hand crafted on your lot with FREE delivery within a limited mileage radius
- ♦ 2 Year Limited Warranty
- ♦ 5 Year Warranty on siding
- ♦ Primed, ready-to-paint surface on siding
- ♦ Floor joist spaced 12" on center
- ♦ 6' Continuous aluminum hinge for added strength
- ♦ Special rigid-door stabilizer
- ♦ 2x4 Door Trim for strength and utility
- ♦ Fast year round service on these weather-tight yard buildings
- ♦ All buildings constructed on 4x4 pressure treated runners
- ♦ Self sealing shingles with choice of black, brown or white
- ♦ All horizontal panel joints are protected by using a plastic Z bar flashing

7/11/95 ESTCST

STATESMAN



Has tall sidewall and gable roof.

Prices may vary by location.

All dimensions are approximate.

Prices subject to change without notice.

NOT INCLUDED BY HEARTLAND

- ♦ Painting, Staining or Caulking
- ♦ Leveling of building beyond 6"
- ♦ EXCAVATING
- ♦ Building Permits, Zoning or Covenant Searches

PAYMENT PLANS

Payment for your Heartland building may be made in the following ways. All arrangements for payment must be made at the time of ordering the unit.

1. C.O.D. - Payment is made upon completion of unit.
2. VISA, MasterCard, and Discover
Card number and expiration date are given to and approved by Heartland at the time of the order.
3. Heartland Bank One MasterCard with 90 day option.
All correspondence concerning payments should be directed to "Receivables Dept." P.O. Box 1770, Carmel, IN 46032.
All buildings F.O.B. nearest plant. Prices include delivery and set up near one of our plants.

6' SIDEWALL

6x6x7'3"	...	\$ 639.00
6x8x7'3"	...	739.00
6x10x7'3"	...	849.00
6x12x7'3"	...	959.00

6' SIDEWALL

16x12x9'6"	....	\$2149.00
16x16x9'6"	....	2709.00
16x20x9'6"	....	3169.00
16x24x9'6"	....	3729.00

8' SIDEWALL

16x12x11'6"	....	\$2309.00
16x16x11'6"	....	2929.00
16x20x11'6"	....	3529.00
16x24x11'6"	....	4049.00

7' SIDEWALL

10x8x9	....	\$1049.00
10x10x9	....	1259.00
10x12x9	....	1429.00
10x16x9	....	1729.00
10x20x9	....	1999.00

10x8x8	....	\$ 999.00
10x10x8	....	1189.00
10x12x8	....	1339.00
10x16x8	....	1639.00
10x20x8	....	1919.00
12x8x8'6"	....	\$1259.00
12x10x8'6"	....	1429.00
12x12x8'6"	....	1669.00
12x16x8'6"	....	2099.00
12x20x8'6"	....	2519.00
12x24x8'6"	....	2949.00

12x8x9'6"	....	\$1299.00
12x10x9'6"	....	1499.00
12x12x9'6"	....	1749.00
12x16x9'6"		2189.00
12x20x9'6"		2629.00
12x24x9'6"		3079.00
16x12x10'6"		\$2229.00
16x16x10'6"		2819.00
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