38/12

21:45D
pd CK 294

Borough of Stratford
Application for Dumpster/Construction Container Permit

Date: 11/23/2021 Fee: $25.00

Name: Rhodora Burke

Address: 114 Princeton Ave. Stratford

Street location of proposed dumpster (description or diagram): In driveway

Please note the container may not block the flow of vehicular or pedestrian traffic

What circumstances necessitates the use of the dumpster and/or construction container on a sidewalk, street, or public place in the Borough? : New roof installation

What length of time will the dumpster and/or construction container be on the site, such time not exceeding 30 days?: Less than 7 days

Description of Dumpster/Container
Name of Manufacturer or Company: _____

Capacity: _____ Location of reflectors: _____

Issuance of Permit
Date Approved: 11.23.21

----------Office Use Only----------

- Certificate of Insurance has been received? **Yes/No**
- Chief of Police was consulted and has determined that the proposed use of dumpster and/or construction container **does/does not** constitute a traffic and/or safety hazard.
- The Construction Official shall issue said permit if it appears that the applicant has a reasonable need to use a dumpster/or construction container. **Approved/Not Approved**

CC: Police Department
Construction Department

BOROUGH OF STRATFORD

307 UNION AVENUE
STRATFORD, NEW JERSEY 0808

856.783.0600 856.783.7949

FENCE PERMIT

Number: 15-11F

Block 38 Lot 12 Date 7-9-15

Address: 114 Princeton Avenue, Stratford NJ 08084

Owner Michael / Rhodora Burke Phone (856) 506 1735

Address 114 Princeton Avenue City Stratford State NJ Zip 08084

Contractor ATCO Fence Co. Phone (856) 767 4735

Address 653 White Horse Pike City Atco State NJ Zip 08004

Type of Fence White Vinyl & Chain Link fence Height 4 ft.

A plot plan or survey showing all existing buildings, sheds, pools, driveways, patios, walkways and the proposed FENCE must be submitted.

Cost $ 6395 —

Date Issued 7-9-15

Permit Fee $25.00

Code Official Christopher Mecca

CALL BEFORE YOU DIG (800) 272.1000

1 0709'15 N073131 TND CASH $25.00

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 8-30-12 ✓

Permit # 12-147

$65.00

IDENTIFICATION Block 38 Lot 12 Qualification Code

Work Site Location 114 Princeton Ave

Owner in Fee Chris Kerr

Address 114 Princeton Ave
Stratford NJ 08084

Tel. (856) 784-0535

Contractor RJM Construction Svcs

Address 936 10th St.
Gloucester City NJ 08030

Tel. (856) 456-1052

Lic. No. or Bldrs. Reg. No.

is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [X] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:

Demo IN GRD pool

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 $ 4800.

Construction Official

8/23/12
Date

PAYMENTS (Office Use Only)

Building 65.00
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee —
Cert. of Occupancy
Other
Total 65.00
Check No. 14107
Cash
Collected by M.G.

2 0830 12 N071040 TMD

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

CERTIFICATE

NEW JERSEY UNIFORM CONSTRUCTION CODE

Permit # 12-147
Date Issued 8-30-12
- or -
Control #
Certificate Issued Date: 10-5-12

IDENTIFICATION

Block 38 Lot 12 Qualification Code
Work Site Location 114 PRINCETON AVE.

Owner in Fee KERR, CHRIS
Address SAME

Tel. (856) 784-0535
Contractor RJM CONSTRUCTION SERVICES
Address 936 10TH ST.

Tel. (856) 456-1052 FAX (856) 456-1053
Lic. No. or Bldrs. Reg. No.
Federal Employer No. 22-3771422

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R5
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work/Use:

INGROUND POOL REMOVAL

☐ **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 the 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:

☐ **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 _____.

[signature] 10/8/12
CONSTRUCTION OFFICIAL DATE

Fee $ 0
Paid [ ] Check No.
Collected by: MC.

U.C.C. F260
(rev. 8/05)

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

CONSTRUCTION PERMIT

Date Issued 6-1-05

Permit # 05-116

IDENTIFICATION Block 38 Lot 12 Qualification Code

Work Site Location 114 Princeton Ave

Owner in Fee J Blake Owings

Address same as above

Tel. ( ) 7838270

Contractor Red Bank Roofing

Address 1183 Red Bank Ave Thorofare NJ 08086

Tel. ( ) 845 3239

Lic. No. or Bldrs. Reg. No. 20EB01893

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT

[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION

[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:

reroof

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 $ 8480.00

Christopher Mecca
Construction Official

6-1-05
Date

PAYMENTS (Office Use Only)

Building	216.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	12.00
Cert. of Occupancy	
Other	
Total	228.00
Check No.	404
Cash	
Collected by	CM

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

Date Issued 3-3-08
Control #
Permit # 05-116

CERTIFICATE

IDENTIFICATION

Block 38 Lot 12
Work Site Location 114 Princeton Ave.

Owner in Fee/Occupant J. Blake + Linda Owings
Address 114 Princeton Ave
Stratford NJ 08084
Tele. (856) 783-8270
Contractor Red Bank Roofing + Siding
Address 313 Hickstown Rd.
Erial NJ 08081
Tele. (856) 229-2833 Fax (856) 228-2833
Lic. No. or Bldrs. Reg. No. 19948811.5
Federal Emp. No. 202201893

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

Reroof

☐ **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.

☐ **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 _____.

Christopher Meers
CONSTRUCTION OFFICIAL

Fee $ Ø
Paid [ ] Check No.
Collected by:

U.C.C. F260
(rev. 12/99)

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

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 9-5-03
Control #
Permit # 03-184

IDENTIFICATION Block 38 Lot 12

Work Site Location 114 PRINCETON STRATFORD N.J. 08084

Owner in Fee J. BLAKE OWINGS

Address SAME

Tel. (856) 783-8270

Contractor HEARTLAND

Address 117 S. WHP Somerdale, N.J. 08083

Tel. (856) 784-9312

Lic. No. or Bldrs. Reg. No.

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:

10'X 20' SHED

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 $ 1000.00

Construction Official

9-5-03
Date

PAYMENTS (Office Use Only)

Building 24.00
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee 1.00
Cert. of Occupancy
Other
Total 25.00
Check No. 800
Cash
Collected by CR

U.C.C. F170
(rev. 5/2K)

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

(see reverse side)

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 05-15-03
Control #
Permit # 03-088

IDENTIFICATION Block _____ Lot _____

Work Site Location 114 PRINCETON AVE
STRATFORD N.J. 08084

Owner in Fee OWNERS

Address 114 PRINCETON AVE
STRATFORD N.J. 08084

Tel. (856) _____

Contractor JULIANO CONCRETE

Address 285 WATERFORD Rd.
HAMMONTON, N.J.

Tel. (856) 790-0474

Lic. No. or Bldrs. Reg. No. _____

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [X] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER _____

DESCRIPTION OF WORK:

DEMO GARAGE / SLAB

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 $ 2100.00

Construction Official

05-15-03
Date

PAYMENTS (Office Use Only)

Building 65.00
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA Training Fee —
Cert. of Occupancy _____
Other _____
Total 65.00
Check No. 1659
Cash _____
Collected by L.K.

(see reverse side)

U.C.C. F170
(rev. 5/2K)

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

CONSTRUCTION PERMIT

Date Issued 03-20-00
Control #
Permit # 00-043

IDENTIFICATION Block 38 Lot 12

Work Site Location 114 PRINCETON AVE. STRATFORD, N.J. 08084

Owner in Fee BLAKE LINDA OWINGS

Address 114 PRINCETON AVE. STRATFORD, N.J.

Tel. (856) 783-8270

Contractor R. KALLER & SONS

Address ONE UNION HILL ROAD WEST CONSHOHOCKEN, PA 19428

Tel. (856) 429-8814

Lic. No. or Bldrs. Reg. No.

Fed. Emp. No.

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK: ROOFING

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 $ 7379.00

Construction Official

March 15, 2000
Date

PAYMENTS (Office Use Only)

Building 192.00
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee 6.00
Cert. of Occupancy
Other
Total $198.00
Check No. 191
Cash
Collected by L.H.

U.C.C. F170
(rev. 3/96)

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

(see reverse side)

Date Issued 6-1-06
Control #
Permit # 00-043

old
clean-u

CERTIFICATE

IDENTIFICATION

Block 38 Lot 12
Work Site Location 114 Princeton Ave
Owner in Fee/Occupant OWINGS
Address 114 Princeton Ave
Stratford NJ 08084
Tele. ( )
Contractor
Address
Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

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

- reroof

☐ **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.

☐ **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 _____.

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

Christopher Mecca TR
CONSTRUCTION OFFICIAL

U.C.C. F260
(rev. 12/99)

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

CALL 1-800-882-8344 FOR INSPECTION

Garden State Electrical Inspection Services, Inc.

MUNICIPALITY Stratford

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received 7-29-97
Date Issued 7-29-97
Control #
Permit # 97-07-131E

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

Block 38 Lot 12
Work Site Location 114 Princeton Ave. Stratford NJ.
Owner in Fee Mr+Mrs Owings
Address Same
Tele. (609) 783-8270
Contractor Mike Ellis Electric
Address 11 Beaver Dr Barrington NJ 08007
Tele. (609) 547-4570
Lic. No. NJ 10357
Federal Emp. No. _____ or Social Security No. 139-46-2374

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as Residencial Utility Co. Atlantic Electric
Est. Cost of Elec. Work $ 700

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: _____
Approved by: _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 8/5/97
Approved By _____

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Temporary				
Constr. Serv.				
TCO				
Other				
Service			8/5	JEM
Final				

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued 8/5/97

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.

Signature—Contractor Seal

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
		Fixtures (1)	
		Receptacles (2)	
		Switches (3)	
		Total 1 + 2 + 3	
	___ Kw	Range	
	___ Kw	Oven(s)	
	___ Kw	Surface Unit	
	___ hp	Dishwasher	
	___ hp	Garbage Disposal	
	___ Kw	Dryer	
	___ Kw	A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
	___ hp	Whirlpool/spa	
		Pool Bonding	
	___ hp	Pool Filter Motor	
		Pool Lights	
	___ Kw	Water Heater(s)	
	___ Kw	Central heat: oil, gas or elec.	
	___ Kw	Baseboard Heat Units	
		Thermostats	
	___ hp	Heat Pump	
	___ hp	Pump(s)	
	___ Amp	Motor Control Center/Sub Panels	
		Signs	
		Light Standards	
	___ hp	Motors—Fractional H.P.	
	___ hp	Motors—All Others	
	___ Kw	Transformers	
	___ Kw	Generators	
1	200 Amp	Service Entrance Only	32
		Other	

Paid [✓] Check # 2376
Collected by: CR

Administrative Surcharge	$ 5
Minimum Fee	$
DCA Training Fee	$ 1
TOTAL FEE	$ 38

U.C.C. Form F-120B

APPLICANT COPY

For Inspection call 1-800-882-8344

MDIA — MIDDLE DEPARTMENT INSPECTION AGENCY — INSPECTIONS — SINCE 1963

STRATFORD
MUNICIPALITY

NEW JERSEY UNIFORM CONSTRUCTION CODE

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 8-14-97
Date Issued
Control #
Permit # 97-8-136P

C 10-24-97

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

Block 38 Lot 12
Work Site Location 114 Penn Ave Stratford
Owner in Fee Owens
Address Same
Tele. ( )
Contractor KCA PLUMBING.
Address PO BOX 154
AUDUBON N.J.
Tele. (609) 547-1252
Lic. No. 5904
Federal Emp. No. 22-3064249 or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Estimated Cost of Plumbing Work $ 700

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[✓] Plumb. Plans Approved
Date: 8-14-97
Approved by: LW

SUBCODE APPROVAL:
[✓] CO [ ] CCO [ ] CA
Approved By: LW
Date: 1-21-98

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Slab				
Rough			8-14-97	LW
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas 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.

Mark D Von Art
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	
2	Sink	20 14
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Active Solar System	
1	Other Washer - Dryer	10 7

Administrative Surcharge $ 5.00
Paid [✓] Check # 598 Minimum Fee $ 30
DCA Training Fee $ 6.00
Collected by LW TOTAL $ 36.00

GS 24.00 LW

U.C.C. Form F-130B

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 8/13/97
Date Issued 8/13/97
Control #
Permit # 97-08-136B

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

Block 38 Lot 12
Work Site Location 114 Princeton Ave - Stratford NJ
Owner in Fee Blake Owens
Address 114 Princeton Ave - Stratford NJ
Tele. (609) 783-8270
Contractor Newcomb Installations
Address 1212 White Horse Pike Oaklyn NJ 08107
Tele. (609) 858-1909
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-1945800 or Social Security No.

JOB SUMMARY (Office Use Only)

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

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 $ 2500.
3. Total (1+2) $ 2500.

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.

Cynthia J. Newcomb
Signature

Plumber \ Electrician to apply for their permit

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

Remove old cabinets
Hang new

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

(Office Use Only)
FEE
$ 60.00

Paid [✓] Check # 1538
Collected by OK

Administrative Surcharge	$
Minimum Fee	$
DCA TRAINING FEE	$ 3.00
TOTAL FEE	$ 63.00

PRO 210B

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

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 8-14-97
Date Issued 8-14-97
Control #
Permit # 97-8-136E

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

Block 38 Lot 12
Work Site Location 114 PRINCETON AVE
STRATFORD
Owner in Fee BLAKE ~~QUEEN~~ OWINGS
Address 114 PRINCETON AVE
STRATFORD
Tele. ( )
Contractor BILL McDERMOR ELECTRIC
Address 310 THIRD AVE
HADDON HEIGHTS NJ 08035
Tele. ( ) 546-2762
Lic. No. 8683
Federal Emp. No. 22-3238314 or Social Security No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 1500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 1-20-98
Approved By:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			9/23	
Temporary				
Constr. Serv.				
TCO				
Other				
Service				
Final			1/20/98	

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Signature—Contractor Seal

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

C 9-23-97

NO.	SIZE	ITEM	FEE (Office Use Only)
8		Fixtures (1)	
9		Receptacles (2)	
7		Switches (3)	
24		Total 1 + 2 + 3	25
	___ Kw	Range	
	___ Kw	Oven(s)	
	___ Kw	Surface Unit	
1	1/3 hp	Dishwasher	
1	1/2 hp	Garbage Disposal	
	___ Kw	Dryer	
	___ Kw	A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
	___ hp	Whirlpool/spa	
		Pool Bonding	
	___ hp	Pool Filter Motor	
		Pool Lights	
	___ Kw	Water Heater(s)	
	___ Kw	Central heat: oil, gas or elec.	
	___ Kw	Baseboard Heat Units	
		Thermostats	
	___ hp	Heat Pump	
	___ hp	Pump(s)	
	___ Amp	Motor Control Center/Sub Panels	
		Signs	
		Light Standards	
	___ hp	Motors—Fractional H.P.	
	___ hp	Motors—All Others	
	___ Kw	Transformers	
	___ Kw	Generators	
	___ Amp	Service Entrance	
		Other	

Paid [X] Check # Cash
Collected by: CC

Administrative Surcharge	$ 4.00
Minimum Fee	$
DCA Training Fee	$ 2.00
TOTAL FEE	$ 31.00

U.C.C. Form F-1208 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 White = Applicant Copy PRO 220E

STRATFORD, NEW JERSEY 08084

PERMIT

VALIDATION

APPLICANT FRANCES MATHSON DATE 10/6 19 83 PERMIT NO. 0710

ADDRESS 114 (NO.) PRINCETON (STREET) AVE (CONTR'S LICENSE)

PERMIT TO IN-GROUND POOL (TYPE OF IMPROVEMENT) ( ) NO. STORY RESIDENTIAL (PROPOSED USE) NUMBER OF DWELLING UNITS

AT (LOCATION) SAME (NO.) (STREET) ZONING DISTRICT R-1

BETWEEN CENTRAL AVE (CROSS STREET) AND GRAND AVE (CROSS STREET)

SUBDIVISION LOT 12 BLOCK 38 LOT SIZE 100 X 175

POOL ~~BUILDING~~ IS TO BE 16 FT. WIDE BY 36 FT. LONG BY 4½ FT. IN HEIGHT AND SHALL CONFORM IN CONSTRUCTION

TO TYPE USE GROUP BASEMENT WALLS OR FOUNDATION (TYPE)

REMARKS: TO BUILD IN-GROUND POOL TO REAR OF HOME

~~AREA OR~~ VOLUME 2,304 CU. FT (CUBIC/SQUARE FEET) ESTIMATED COST $ 8,000.00 PERMIT FEE $ 13.00

OWNER Frances Mathson

ADDRESS 114 Princeton Ave - Stratford - N.J.

BUILDING DEPT. BY

(Affidavit on reverse side of application to be completed by authorized agent of owner)

FORM NO. BOCA-BP 1969

Application $ 5.00

Cost of Permit $ 12.00

Total Cost $17.00

BUILDING PERMIT No 2513

Borough of Stratford, N. J.

Estimated Cost $ 3,100.00 August 26, 19 76

Permission is hereby granted to ~~Richard J. Marinucci - 1116 Collings Ave. - W. Collingswood, NJ~~

Contractor, and ~~Phil Dennis, Jr.~~ Owner, for the construction

of Frame construction 8'X8'X16' ~~building for~~ block base 2'X12'floor joists purposes 3/4 plywood floor, asbestos siding & shingle roof, 2'X6' roof rafters, rear of existing ~~house~~ stories in height, dimensions

roof of , location 114 Princeton Avenue

on Lot No. 17 Block No. 38 Plan of

This permit to be considered void at the expiration of six months, unless active operations have been commenced within said time, and shall be rescinded and considered void as to the continuation of the work or the further erection of said buildings by the violation of the terms of any of the Ordinances of the Borough of Stratford relating to buildings or the use of the streets or sidewalks.

Residence of Owner 114 Princeton Avenue

William Powell