dbrouse1@merchantvillenj.gov

From: Breean Stumpf <opra+request-46642-a6d8f3b6@requests.opramachine.com>
Sent: Monday, June 19, 2023 11:51 AM
To: OPRA requests at Merchantville Borough
Subject: OPRA request - OPRA/OPEN & CLOSE PERMITS - 13 W Cedar Ave, Merchantville, NJ 08109

Dear Merchantville Borough,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.
Records requested: OPRA/OPEN & CLOSE PERMITS - 13 W Cedar Ave, Merchantville, NJ 08109

Yours respectfully,

Breean Stumpf

Please deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-46642-a6d8f3b6@requests.opramachine.com

Is dbrouse@merchantvillenj.gov the wrong address for OPRA requests to Merchantville Borough? If so, please contact us using this form:
https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fopramachine.com%2fchange_request%2fnew%3fbody%3dmerchantville_borough&c=E,1,BpuSTGuZkRq2lQdUaH4VPucYXJh1hhfW79zd8PCgleMqThnyDqs-PsTlJFqU-rMSsEA_pX6TstVvAEii98jDLQSszN6aK2E3vWv43UCDZC4gCu4F7Ws,&typo=1
Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fopramachine.com%2fhelp%2fofficers&c=E,1,Xt5erGkmy3oZG9cmM6V8vcu99X_SydqGJDQdldk9WTodrIFCy9Y4ZqgulDyLKVLfPkRMe7pRZjUZiAgUb6jduF7rDSFHU8AS5v2LATYVXg-b&typo=1

View this OPRA request & responses online:
https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fopramachine.com%2frequest%2fopraopen_close_permits_13_w_ceda&c=E,1,MnnqT1htPCJiXUk27TCFhUJyGPURXHO41C8PwdGrv2TcJJKdSG62Pf9v63oGoCiJhO2RiQYjd2zNkyCNwMAqBKzZ4uIuweS7MFwzhle5&typo=1

Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 3/1/2023
Permit # 22-133+B

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

Block 50 Lot 7 Qualification Code

Work Site Location 13 WEST CEDAR AVE

Owner in Fee: JOSEPH A. CURRIER

Tel. (609) 980-9293 e-mail

Address

Contractor: MJK ELECTRIC (street / municipality) Tel. (856) 547-1173 (zip code)

Address 114 S. LOGAN AVE e-mail
AUDUBON NJ 08106

Contractor License No. 9288 Exp. Date 3/24

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

Federal Emp. ID No. 22-3009120 FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 16,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 2/15/23
Approved by: H.D.S.

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

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: Michael Ksiazek

Print name here: MICHAEL KSIAZEK

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: R+Tube Removal - Whole House Renovation

QTY.	SIZE	ITEMS	FEE (Office Use Only)
50		Lighting Fixtures	
42		Receptacles	
38		Switches	
9		Detectors	
		Light Poles	
1		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
140		TOTAL NUMBERS	$ 125.00
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
1	.2	KW Dishwasher	15.00
1	1/2	HP Garbage Disposal	15.00
2	30A	KW Central A/C Unit	30.00
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service EXISTING	
1	100	AMP Subpanels	75.00
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $
Minimum Fee $ 260.00
State Permit Surcharge Fee $ 30.00

U.C.C. F120 (rev. 11/09) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

...r call: 877-531-2233

PLUMBING SUBCODE
TECHNICAL SECTION

Permit UPDATE

Date Received
Control #

Date Issued 3/6/2023
Permit # 22-1334B

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

Block 50 Lot 7 Qualification Code

Work Site Location 13 W CEDAR AVE Merchantville NJ 08109

Owner in Fee:

Tel. e-mail

Address street municipality zip code

Contractor: PLUMB MADE INC Tel.

Address 2E WALNUT AVE e-mail

Merchantville

Contractor License No. 16540 Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 134283436 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 $ 100.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Plumbing Plans Approved

Date: Approved by:

Joint Plan Review Required:

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

SUBCODE APPROVAL for PERMIT

Date: 3/7/23

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

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: J. Cacciller

[ ] Licensed Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Show Drawing with ARV's

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	75.00
	Stacks	
1	Other ARV	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $ —

TOTAL FEE $ 75.00

U.C.C. F130 (rev. 10/17)
Internet version

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 1/12/23

Date Issued / Permit # 22-13314

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

Block 50 Lot 7 Qualification Code

Work Site Location 13 W. CEDAR AVE. MERCHANTVILLE NJ 08109

Owner in Fee: JOSEPH A CUZZUPE

Tel. (609) 980-9293 e-mail

Address (street, municipality, zip code)

Contractor: Plumb Medic INC Tel. (856) 662-3500

Address 2 F WALNUT AVE e-mail

Merchantville

Contractor License No. 10540 Exp. Date 6/23

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

Federal Emp. ID No. 134283436 FAX: (856) 665-1991

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 $ 15,000

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: Joseph M Cuzzupe

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Rough & Final 2 full B/R 1-1/2 bath, 1 laundry

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
3	Water Closet	45
	Urinal/Bidet	
2	Bath Tub	30
4	Lavatory	60
1	Shower	15
	Floor Drain	
1	Sink	15
1	Dishwasher	15
	Drinking Fountain	
1	Washing Machine	15
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
2	Gas Piping	30
	LPGas Tank	
	Steam Boiler	65
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other AAV	15

Administrative Surcharge	$ 240.00
Minimum Fee	$ 29.00
State Permit Surcharge Fee	$
TOTAL FEE	$ 269.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

MECHANICAL INSPECTION
TECHNICAL SECTION

Date Received
Control # 1/12/23

Date Issued
Permit # 22-133+A

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

Block 50 Lot 7 Qualification Code

Work Site Location 13 WEST COOPER AVE
MERCHANTVILLE, NJ 08109

Owner in Fee: JOSEPH A. COZZUPOLI

Tel. 609 980-9293 e-mail

Address SAME AS ABOVE
street municipality zip code

Contractor: Formella HVAC LLC Tel. 856 889-4773

Address 6 Barclay Drive e-mail Formellajoseph@gmail.com
Blackwood NJ 08012

Contractor License No. 19HC00154500 Exp. Date 6/30/24

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 045074079 FAX:

B. MECHANICAL CHARACTERISTICS

Use Group Present: R-3-or R-5

Heating System work: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [✓] Replacement

Type: [ ] Hydronic [✓] Hot Air

Fuel Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Estimated Cost of Mechanical Work $ NOT TO EXCEED $10,000

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.

Applicant sign/Contractor sign and seal here: Joseph Formella

Print name here: Joseph Formella

[ ] Licensed Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Replace with + coil
Run new supply duct
Modified R/A duct
new heat runs in floor
new high R/A duct on roof
concentric kit chase and intake
Pump PVC drain
new electric
Hook up exist
gas pipe

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire.
[ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 1/12/23
Approved by:
SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Water Heater				
Appliance				
Chimney/Vent				
Piping				
Tank				
Cooling/AC				
Generator				
Fireplace				
Chimney Cert.				
Other				
Other				
Final				

NO.	FIXTURE/EQUIPMENT
	Water Heater
	Fuel Oil Piping Connections
	Gas Piping Connections
	Steam Boiler
	Hot Water Boiler
X	Hot Air Furnace
	Oil Tank
	LPG Tank
	Fireplace
	Generator
	Other

FEE (Office Use Only)

$	
	65
Administrative Surcharge $	
Minimum Fee $	
State Permit Surcharge Fee $	19.00
TOTAL FEE $	84.00

U.C.C. F145 (rev. 12/18)

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 11/2/22
Control #

Date Issued
Permit # 22-133

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

Block 50 Lot 7 Qualification Code

Work Site Location 13 W CEDAR AVE
MARGATE LLC NJ

Owner in Fee: JOSEPH A. CUZZUPE

Tel. (609) 920-9292 e-mail JACUZZUPE@HOTMAIL.COM

Address

Contractor: JOSEPH A CUZZUPE + CO (street) JNE (municipality) Tel. (609) 920-9292 (zip code)

Address 650 OAK RD e-mail
CHERRY HILL NJ.

Contractor License No. or Builder Registration No. 13VH02210500 Exp. Date 2/21/23

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

Federal Emp. ID No. FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[X] Footings/Foundations	10/10	
[X] Structural/Framework	10/10	
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed
No. of Stories 3
Height of Structure ft.
Area — Largest Floor 1500 sq. ft.
New Bldg. Area/All Floors 0 sq. ft.
Volume of New Structure cu. ft.
Max. Live Load
Max. Occupancy Load

Constr. Class Present VB Proposed

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 8500

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
REBUILD EXISTING 7X18 ONE STORY PORTION OF HOUSE SEE PICS. INSTALL NEW FOOTINGS ELECT AND WALL FRAMING EXISTING ROOF STRUCTURE TO REMAIN. STANDARD FRAMING ON WALLS. SEE FOOTING DETAIL ATTACHED

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

FEE (Office Use Only)
$ 255.00
Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $ 16.00
TOTAL FEE $ 271.00

U.C.C. F110
(rev. 12/07)

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