Winslow Township
125 South Route 73
Braddock, NJ 08037
(609)567-0700 FAX *(000)000-0000*

Permit No. **202200771**
Control No. **88056981**
Block/Lot 12201/39
Date 7/01/22

Certificate of Approval

IDENTIFICATION

Block/Lot 12201/39
Work Site Location 19 FILLMORE WAY

Owner in Fee/Occupant ANANE MERCY K
Address 19 FILMORE WAY
SICKLERVILLE NJ 08081

Telephone
Contractor
Address

Telephone 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:

12x20 SHED

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 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

Gus Morganti
(Gus Morganti, Construction Official

Permit Fee $ 388
Paid [ ] Check No. CREDIT
Collected by: GP

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 6/9/22

Date Issued / Permit # 20220071

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

Block 12201 Lot 39 Qualification Code

Work Site Location 19 Fillmore Way Sicklerville, NJ 08081

Owner in Fee: Mercy Anane

Tel. e-mail Mercy

Address 19 Fillmore Way (street) Sicklerville (municipality) NJ (zip code) 8081

Contractor: Tel. ( )

Address e-mail

Contractor License No. or Builder Registration No. Exp. Date

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 6/22 CM
- [ ] Footing
- [ ] Foundation
- [ ] Frame
- [ ] Other

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: 6-23-22
Approved by: CM

INSPECTIONS — Dates (Month/Day)

Type:	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			6-23-22 CM	
Barrier-Free				

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. Rehabilitation $
3. Total (1+ 2) $12x20 SQFT = $10,500

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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
12X20 Shed

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [ ] 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)

$ 368

Administrative Surcharge	$
Minimum Fee	$ 368
State Permit Surcharge Fee	$ 20
TOTAL FEE	$ 388

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

Winslow Township
125 South Route 73
Braddock, NJ 08037
(609)567-0700 FAX *(000)000-0000*

Permit No. **202100279**
Control No. **88054177**
Block/Lot 12201/39
Date 4/08/21

Certificate of Approval

IDENTIFICATION

Block/Lot 12201/39
Work Site Location 19 FILLMORE WAY

Owner in Fee/Occupant ANANE, MERCY
Address 19 FILMORE WAY
SICKLERVILLE, NJ 08081

Telephone
Contractor
Address

Telephone 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:

ADDING SHOWER TO EXISTING 1/2 BATH

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Gus Morganti
(Gus Morganti, Construction Official

Permit Fee $ 60
Paid [ ] Check No. CC
Collected by: DH

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 3/8/21
Control #

Date Issued
Permit # 202100279

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

Block 12201 Lot 39 Qualification Code

Work Site Location 19 Fillmore Way

Owner in Fee: Mery Qnane

Tel. ( ) 347-777-1598 e-mail marshabateman1@gmail.com

Address 19 Fillmore Way Siddenville 08081
street municipality zip code

Contractor: [redacted] Self Tel. (347) 777-1598

Address [redacted] e-mail

Contractor License No. [redacted] Exp. Date 3/31/2022

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

Federal Emp. ID No. FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed add shower to existing bathroom

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 800

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 3/4/21 PC

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by: 4/6/21 PC

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough			3/24 PC	
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO			4/6 PC	

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.

[redacted] Mery Qnane

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

add standing shower to existing half bathroom

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
1	Shower	58
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	

Administrative Surcharge $	
Minimum Fee $	58
State Permit Surcharge Fee $	2
TOTAL FEE $	60

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

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