Lorraine Baker

From: Breean Stumpf <opra+request-42499-19d4a9f1@requests.opramachine.com>
Sent: Wednesday, May 10, 2023 10:09 AM
To: GT Clerk
Subject: OPRA request - OPRA/OPEN & CLOSE PERMITS - 24 Randolph Dr, Sicklerville, NJ 08081

Dear Gloucester Township,

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 - 24 Randolph Dr, Sicklerville, NJ 08081

Yours respectfully,

Breean Stumpf

15605/1

Please deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-42499-19d4a9f1@requests.opramachine.com

Is GTClerk@glotwp.com the wrong address for OPRA requests to Gloucester Township? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=gloucester_township
Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
https://opramachine.com/help/officers

View this OPRA request & responses online:
https://opramachine.com/request/opraopen_close_permits_24_randol

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.

Interoffice
MEMORANDUM

To: **Nancy Power**, Township Clerk

From: Cookie Pessagno

Re: Records Request

Date: Wednesday May 10, 2023

Dear Nancy,

This letter is regarding the records request from Breean Stumpf for the information you requested. 24 Randolph Dr **Block 15605 Lot 1. Attached please find all permits pulled on this property. Permit# 2018-1515 remains open and needs an electric inspection to close see attached. There are no open construction violations. If you have any questions, please feel free to contact me at 856-374-3500.**

Thank you,

Cookie Pessagno

Construction Department

Gloucester Township
1261 Chews Landing Rd
Laurel Springs, NJ 08021
(856)374-3500 FAX *(856)232-6229*

Permit No. **19970859**
Control No. **13878**
Parcel(Block/Lot). **15605/1**
Applic/Issued. **6/25/97 / 6/27/97**

Construction Permit

Work Site Location 24 RANDOLPH DR

Owner in Fee..... **WEE, RUSSELL**
Address.....

Phone.....

Contractor....
Address.....

Phone.....
Lic No.....
Fed Emp No.

Permission is hereby granted to do the following work:

☐ BUILDING	☑ PLUMBING	☐ DEMOLITION	☐ ONGOING -
☐ ELECTRIC	☐ FIRE	☐ ASBESTOS ABATEMENT	☐ OTHER
☐ ELEVATOR	☐ MECHANICAL	☐ LEAD HAZARD ABATEMENT	

Description of Work:

Note: If construction does not commence within one (1) year of the date of issuance or if construction ceases for a period of six(6) months, this permit is Void.

Estimated Cost of Work: $300

All Info Sacked no longer Available
Construction Official Date

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

PAYMENTS * (Office Use Only)

Building	$0
Electrical	0
Plumbing	55
Fire Protection	0
Elevator Devices.....	0
Mechanical.....	0
State Training Fee	0
Certificate of Occupancy	0
Other	0
Total	$55
Check#/Cash.....	
Paid	$55
Collected By	

Total Administrative Fee: $0

U.C.C. F190 (Rev. 3/96)

Gloucester Township
PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 6/25/1997
Control # 13878

Date Issued 6/27/1997
Permit # 19970859

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

Block/Lot 15605/1

Work Site Location 24 RANDOLPH DR

Owner in Fee: WEE, RUSSELL

Tel. _____ e-mail _____

Address: _____ (Street) , _____ (municipality) _____ (zip code)

Contractor: _____ Tel. _____

Address: , _____ e-mail _____

Contractor License No. _____ Exp. Date _____

Federal Emp. ID No. _____ FAX _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed R-3

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Septic _____

Est. Cost of Plumbing Work $ 300

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

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

C. CERTIFICATION IN UEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D.TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Hose Bibb	
	Water Heater	
	Washing Machine	
	Fuel Oil Piping	
	Gas Piping	
	LP Gas Tank	
	Steam Boiler	
	Hot WaterBoiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Grease Trap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other _____	
	Other _____	

Administrative Surcharge $ 0

Minimum Fee $ _____

State Permit Surcharge Fee $ _____

Total Fees $ _____

Description of Work:

Applicant: When submitting this term to your Local construction code Enforcement Office, please provide one original plus three photocopies

History for Permit 19970859

24 RANDOLPH DR Unit

Block/Lot 15605/1
Owner WEE, RUSSELL

Application 6/25/97 Permit 6/27/97

Inspections and Reviews

------- Dates ----------							
Done	Sched	Permit No.	Type	Subcode	P/F	By	Comment
1/22/98		19970859	BACK	PLUM	P	DB	

Gloucester Township
1261 Chews Landing Rd
Laurel Springs, NJ 08021
(856)374-3500 FAX (856)232-6229

Gloucester Township
1261 Chews Landing Rd
Laurel Springs, NJ 08021
(856)374-3500 FAX *(856)232-6229*

Permit No. **19970859**
Control No. **13878**
Block/Lot 15605/1
Date 1/26/98

Certificate of Approval

IDENTIFICATION

Block/Lot 15605/1
Work Site Location 24 RANDOLPH DR
SICKLERVILLE, 08081
Owner in Fee/Occupant WEE, RUSSELL
Address
,
Telephone
Contractor
Address

Telephone FAX
Lic. No. or Bldrs. Reg. No. None
Federal Emp. No.

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R-3
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work/Use:

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

James T. Gallagher, Construction Official

Permit Fee $ 55
Paid [ ] Check No.
Collected by:

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

Gloucester Township
1261 Chews Landing Rd
Laurel Springs, NJ 08021
(856)374-3500 FAX *(856)232-6229*

Permit No. **20011127**
Control No. **24159**
Parcel(Block/Lot). **15605/1**
Applic/Issued. **8/01/01 / 8/01/01**

Construction Permit

Work Site Location 24 RANDOLPH DR, Sicklervil

Owner in Fee..... **Kevin Wee**
Address..... 24 Randolph Drive
Sicklerville, NJ 08081
Phone..... (856)374-4323

Contractor....
Address.....
Phone.....
Lic No.....
Fed Emp No.

Permission is hereby granted to do the following work:

☐ BUILDING	☐ PLUMBING	☐ DEMOLITION	☐ ONGOING -
☑ ELECTRIC	☐ FIRE	☐ ASBESTOS ABATEMENT	☐ OTHER
☐ ELEVATOR	☐ MECHANICAL	☐ LEAD HAZARD ABATEMENT	

Description of Work:
Buglar Alarm

Note: If construction does not commence within one (1) year of the date of issuance or if construction ceases for a period of six(6) months, this permit is Void.

Estimated Cost of Work: $150

Construction Official Date

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

PAYMENTS * (Office Use Only)

Building	$0
Electrical	46
Plumbing	0
Fire Protection	0
Elevator Devices.....	0
Mechanical.....	0
State Training Fee	0
Certificate of Occupancy	0
Other	0
Total	$46
Check#/Cash.....	
Paid	$46
Collected By	

Total Administrative Fee: $0

U.C.C. F190 (Rev. 3/96)

Gloucester Township
ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Receive 8/01/2001
Control # 24159

Date Issued 8/01/2001
Permit # 20011127

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

Block/Lot 15605/1

Work Site Location 24 RANDOLPH DR

Owner in Fee: Kevin Wee

Tel. (856)374-4323 e-mail

Address: 24 Randolph Drive (Street) Sicklerville, NJ 08081 (municipality, zip code)

Contractor: Tel.

Address: , e-mail

Contractor License No. Exp. Date

Federal Emp. ID No. FAX.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R-3

☐ Pole/pad # ☐ Temporary Service ☐ Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 150 Descript: Buglar Alarm

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Inital
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

U.C.C. F120 (rev. 07105) Internet version

Applicant: When submitting this term to your Local construction code Enforcement Officeplease provide one original plus three photocopies

C. CERTIFICATION IN UEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Contractor ☐ Cert Landscape Contr ☐ Exempt Applc

D.TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Pole	
		Motors—Fract. H	
		Emergency & Exit Lights	
		Communications Paints	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		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	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central AC Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 11+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $ 0

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

Gloucester Township
1261 Chews Landing Rd
Laurel Springs, NJ 08021
(856)374-3500 FAX *(856)232-6229*

Permit No. **20011127**
Control No. **24159**
Block/Lot 15605/1
Date 8/06/01

Certificate of Approval

IDENTIFICATION

Block/Lot 15605/1
Work Site Location 24 RANDOLPH DR
SICKLERVILLE, 08081
Owner in Fee/Occupant Kevin Wee
Address 24 Randolph Drive
Sicklerville, NJ 08081
Telephone (856)374-4323
Contractor
Address

Telephone FAX
Lic. No. or Bldrs. Reg. No. None
Federal Emp. No.

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R-3
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work/Use:

Buglar Alarm

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

James T. Gallagher, Construction Official

Permit Fee $ 46
Paid [ ] Check No.
Collected by:

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

Gloucester Township
1261 Chews Landing Rd
Laurel Springs, NJ 08021
(856)374-3500 FAX *(856)232-6229*

Permit No. **20102314**
Control No. **52054**
Parcel(Block/Lot). **15605/1**
Applic/Issued. **11/29/10 / 12/02/10**

Construction Permit

Work Site Location 24 RANDOLPH DR, 08081 Sick

Owner in Fee..... **DAVIS, EVERETT J. (TF)**
Address..... 24 RANDOLPH DR
SICKLERVILLE NJ 08081
Phone..... (856)232-0758

Contractor.... **Precision Home Builders**
Address.....2511 Fire Road Suite A1
Egg Harbor Township NJ
Phone.....(609)641-3649
Lic No..... **13vh01096700-**
Fed Emp No.

Permission is hereby granted to do the following work:

☑ BUILDING	☐ PLUMBING	☐ DEMOLITION	☐ ONGOING -
☐ ELECTRIC	☐ FIRE	☐ ASBESTOS ABATEMENT	☐ OTHER
☐ ELEVATOR	☐ MECHANICAL	☐ LEAD HAZARD ABATEMENT	

Description of Work:
Remove existing siding, replace w/new vinyl

Note: If construction does not commence within one (1) year of the date of issuance or if construction ceases for a period of six(6) months, this permit is Void.

Estimated Cost of Work: $8,000

Construction Official Date

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

PAYMENTS * (Office Use Only)

Building	$50
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices.....	0
Mechanical.....	0
State Training Fee	14
Certificate of Occupancy	0
Other	0
Total	$64
Check#/Cash.....	1073
Paid	$64
Collected By	DJ

Total Administrative Fee: $0

U.C.C. F190 (Rev. 3/96)

Gloucester Township
BUILDING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Receive 11/29/2010
Control # 52054

Date Issued 12/02/2010
Permit # 20102314

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

Block/Lot 15605/1

Work Site Location 24 RANDOLPH DR

Owner in Fee: DAVIS, EVERETT J. (TF)

Tel. (856)232-0758 e-mail

Address: 24 RANDOLPH DR (Street) SICKLERVILLE NJ 08081 (municipality) (zip code)

Contractor: Precision Home Builders Tel. (609)641-3649

Address: 2511 Fire Road Suite A1, Egg Harbor Township N e-mail

Contractor License No. 13vh01096700- / / Exp. Date

Federal Emp. ID No. FAX

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Recuired
[ ] Elec. [ ] Plumb [ ] Fire [ ] Elevator

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

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

B. BUILDING CHARACTERISTICS

Use Group Present R-5 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 Disturbet Sq. Ft.

Est. Cost of Bldg. Work :
1. New Bldg. $
2. Rehabilitation $ 8,000
3. Total (1+2) $ 8,000

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.

Signature

D.TECHNICAL SITE DATA

DESCRIPTION OF WORK

Remove existing siding, replace w/new vinyl

TYPE OF WORK

- [ ] New Building
- [ ] Addition
- [ ] Rehabilation
- [ ] Roofing
- [x] Siding
- [ ] Fence Height (exceeds 6')
- [ ] Sign Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8_
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other
- [ ] Demolition

FEE (Office Use Only)

Siding	50
Administrative Surcharge $	0
Minimum Fee $	
State Permit Surcharge Fee $	
TOTAL FEE $	50

U.C.C. F130 (rev. 07/05)
Internet version

Applicant: When submitting this term to your Local construction code Enforcement Office, please provide one original plus three photocopies

Gloucester Township
1261 Chews Landing Rd
Laurel Springs, NJ 08021
(856)374-3500 FAX *(856)232-6229*

Permit No. **20102314**
Control No. **52054**
Block/Lot 15605/1
Date 12/03/14

Certificate of Approval

IDENTIFICATION

Block/Lot 15605/1
Work Site Location 24 RANDOLPH DR
SICKLERVILLE, 08081
Owner in Fee/Occupant DAVIS, EVERETT J. (TF)
Address 24 RANDOLPH DR
SICKLERVILLE NJ 08081
Telephone (856)232-0758
Contractor Precision Home Builders
Address 2511 Fire Road Suite A1
Egg Harbor Township NJ
Telephone (609)641-3649 FAX
Lic. No. or Bldrs. Reg. No. 13vh01096700- / /
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:

Remove existing siding, replace w/new vinyl

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

James T. Gallagher, Construction Official

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

Permit Fee $ 64
Paid [ ] Check No. 1073
Collected by: DJ

Gloucester Township
1261 Chews Landing Rd
Laurel Springs, NJ 08021
(856)374-3500 FAX *(856)232-6229*

Permit No. **20181515**
Control No. **78020**
Parcel(Block/Lot). **15605/1**
Applic/Issued. **7/31/18 / 8/07/18**

Construction Permit

Work Site Location 24 RANDOLPH DR, SICKLERVIL

Owner in Fee..... **DAVIS, EVERETT J. (TF)**
Address..... 24 RANDOLPH DR
SICKLERVILLE NJ 08081
Phone.....

Contractor.... **SERV EXPERTS NJ PLBG dba ATMOSTE**
Address.....215 B OLD EGG HARBOR RD
WEST BERLIN, NJ 08091
Phone.....(856)783-6600
Lic No..... **36B100785000 - 6/30/23**
Fed Emp No. 38-3846191

Permission is hereby granted to do the following work:

☐ BUILDING	☑ PLUMBING	☐ DEMOLITION	☐ ONGOING -
☑ ELECTRIC	☐ FIRE	☐ ASBESTOS ABATEMENT	☐ OTHER
☐ ELEVATOR	☐ MECHANICAL	☐ LEAD HAZARD ABATEMENT	

Description of Work:
HVAC Replacement

Note: If construction does not commence within one (1) year of the date of issuance or if construction ceases for a period of six(6) months, this permit is Void.

Estimated Cost of Work: $5,734

Construction Official Date

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

PAYMENTS * (Office Use Only)

Building	$0
Electrical	65
Plumbing	75
Fire Protection	0
Elevator Devices.....	0
Mechanical.....	0
State Training Fee	11
Certificate of Occupancy	0
Other	0
Total	$151
Check#/Cash.....	011320
Paid	$151
Collected By	RR

Total Administrative Fee: $0

U.C.C. F190 (Rev. 3/96)

Gloucester Township
ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Receive 7/31/2018
Control # 78020

Date Issued 8/07/2018
Permit # 20181515

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

Block/Lot 15605/1

Work Site Location 24 RANDOLPH DR

Owner in Fee: DAVIS, EVERETT J. (TF)

Tel. _____ e-mail _____

Address: 24 RANDOLPH DR (Street) SICKLERVILLE NJ 08081 (municipality) (zip code)

Contractor: SERV EXPERTS NJ PLBG dba ATMOSTEMP Tel. (856)783-6600

Address: 215 B OLD EGG HARBOR RD, WEST BERLIN, NJ e-mail _____

Contractor License No. _____ Exp. Date _____

Federal Emp. ID No. 38-3846191 FAX. (856)753-9491

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed R-5

☐ Pole/pad # _____ ☐ Temporary Service ☐ Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ 2867 Descript: HVAC Replacement

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Inital
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 UEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Contractor ☐ Cert Landscape Contr ☐ Exempt Applc

D.TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Pole	
		Motors—Fract. H	
		Emergency & Exit Lights	
		Communications Paints	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		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	
		KW Dishwasher	
		HP Garbage Disposal	
1	6	KW Central AC Unit	15
1	2	HP/KW Space Heater/Air Handler	15
		KW Baseboard Heat	
		HP Motors 11+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $ 0

Minimum Fee $ 65

State Permit Surcharge Fee $ _____

TOTAL FEE $ 65

U.C.C. F120 (rev. 07105) Internet version

Applicant: When submitting this term to your Local construction code Enforcement Office please provide one original plus three photocopies

Gloucester Township
PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 7/31/2018
Control # 78020

Date Issued 8/07/2018
Permit # 20181515

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

Block/Lot 15605/1
Work Site Location 24 RANDOLPH DR

Owner in Fee: DAVIS, EVERETT J. (TF)
Tel. _____ e-mail _____
Address: 24 RANDOLPH DR (Street) SICKLERVILLE NJ 08081 (municipality, zip code)
Contractor: SERV EXPERTS NJ PLBG dba ATMOSTEMP Tel. (856)783-6600
Address: 215 B OLD EGG HARBOR RD, WEST BERLIN, NJ e-mail _____
Contractor License No. _____ Exp. Date _____
Federal Emp. ID No. 38-3846191 FAX (856)753-9491

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed R-5
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Septic _____
Est. Cost of Plumbing Work $ 2867

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: _____
Approved by: _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

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

C. CERTIFICATION IN UEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Hose Bibb	
	Water Heater	
	Washing Machine	
	Fuel Oil Piping	
	Gas Piping	
	LP Gas Tank	
	Steam Boiler	
	Hot WaterBoiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Grease Trap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other furnace	65
1	Other AC condensate	10
	Administrative Surcharge $	0
	Minimum Fee $	
	State Permit Surcharge Fee $	
	Total Fees $	75

Description of Work:
HVAC Replacement

Applicant: When submitting this term to your Local construction code Enforcement Office, please provide one original plus three photocopies

History for Permit 20181515

24 RANDOLPH DR **Unit**
SICKLERVILLE
HVAC Replacement

Block/Lot **15605/1**
Owner **DAVIS, EVERETT J. (TF)**
24 RANDOLPH DR
SICKLERVILLE NJ 08081
Application **7/31/18** Permit **8/07/18**

Inspections and Reviews

------- **Dates** ----------

Done	Sched	Permit No.	Type	Subcode	P/F	By	Comment
8/28/18	8/28/18	20181515	FIN	ELEC	F	JC	Final
8/28/18	8/28/18	20181515	FIN	PLUM	P	BR	Final