CHERRY HILL TOWNSHIP

OPEN PUBLIC RECORDS ACT REQUEST FORM

Cherry Hill Township

Date Received: 7/17/2024

Tracking Number: OPRA-Req-24-1188

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information

Name: Breann Stumpf

Address:

City: State: NJ Zip:

Telephone: Fax:

Email: xxxxxxxxxxxxxxxxxxxxxxxxxxx@xxxxxxxx.xxxxxxxxxxx.xxx

Preferred Delivery: E-Mail

☐ If you are requesting records containing personal information: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature: Date:

Payment Information

Maximum Authorized Cost 0

Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) - actual cost of material

Record Request Information:

Location: 33 MADISON AVE

☐ Includes Common Law Request

Records requested:

OPRA/OPEN & CLOSE PERMITS - 33 Madison Ave, Cherry Hill, NJ 08002

AGENCY USE ONLY:

Est. Document Cost:
Est. Delivery Cost:
Est. Extras Cost:
Total Est. Cost:
Deposit Amount:
Estimated Balance:
Deposit Date:

AGENCY USE ONLY:

Disposition Notes:

Custodian: If any part of request cannot be delivered in seven business days, detail reason here.

In Progress - Open
Denied - Closed
Filled - Closed
Partial - Closed

AGENCY USE ONLY:

Tracking Information:

Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost:

Total
Deposit
Bal. Due
Bal. Paid

Records Provided:

Custodian Signature: Date:

BLOCK 386.01 LOT 28 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. _____

32144

CONSTRUCTION PERMIT APPLICATION

Application Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 33 MADISON AVE
2. Name of Owner in Fee: FAY GITZES Tel. (856) 795-4452
   Address 33 MADISON AVE (street) CHERRY HILL (municipality) 08034 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: FRANK SLAWINSKI Tel. (856) 429-7935
   Address 23 STANFORD RD CHERRY HILL, NJ 08034
   License No. OR, If new home Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. [redacted] FAX: (____) _____
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person in Charge of Work FRANK SLAWINSKI
   Tel. (856) 429-7935 FAX (____) _____

RE-ROOF

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 46.00		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee	2.00		
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 48.00		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ft.	
3. Area — Largest Floor sq. ft.	
4. New Building Area sq. ft.	
5. Volume of New Structure cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ft.	
10. Wetlands yes	
no	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

	Est. Cost	OPTIONAL (for office use only) Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☒ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☐ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	1625.00								

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☒ One-Family (R-4) CABO

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS CH-B 10404775

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

(✓) Check if contractor.

Agent Name Frank Slavinski

Address 23 Stanford Rd

Cherry Hill NJ 08034

Telephone (856) 429-7935

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition			
Building	_____	Energy	_____	Other	_____
Electrical	_____	Barrier Free	_____		_____
Plumbing	_____	Flood Hazard	_____		_____
Fire Protection	_____	As Built Elevation Cert.	_____		_____
Mechanical	_____	Other	_____		_____

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

TOWNSHIP OF CHERRY HILL
820 MERCER STREET
CHERRY HILL, NJ 08002
856-488-7855

CERTIFICATE

IDENTIFICATION

Date Issued: 10/20/2000
Control #: 32144
Permit #: 20000774

Block : 386.01 Lot : 28 Qual :

Work Site Location: 33 Madison Ave.

Owner in Fee: KAY GITZES
Address: 33, Madison Ave.
Cherry Hill, NJ
Telephone: 856 795-4452
Agent: SLAVINSKI, FRANK
Address: 23 STANFORD ROAD
CHERRY HILL, NJ -
Telephone: 609 429-7935
Lic. No./ Bldrs. Reg.No.: _____ Federal Emp. No.: _____
Social Security No.: [redacted]

Home Warranty No: _____
Type of Warranty Plan: [ ] State [ ] Private
Use Group: R-4
Maximum Live Load: 0
Construction Classification: _____
Maximum Occupancy Load: _____
Certificate Exp Date: _____
Description of Work/Use: Roofing

[ ] **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.

[X] **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 a 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 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

Bill Cotter Asst. 10/20/00

Anthony Saccomanno, Construction Official

Fees $0.00
Paid [ ] Check No _____
Collected by _____

U.C.C 360 (rev. 3/96) 1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

PAID APR 04 2000

Township Of Cherry Hill
820 MERCER STREET
CHERRY HILL, NJ 08002
856 - 488-7855

CONSTRUCTION PERMIT

Permit Number: 20000774
Permit Date: 4/4/2000
Update Number:
Control Number: 32144
Application Date: 04/04/00

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 386.01 Lot: 28 Qualifier:

Work site Location: 33 Madison Ave.
Owner In Fee: KAY GITZES
Address: 33 Madison Ave.
Cherry Hill NJ
Telephone: (856) - 795-4452
Use Group(s): R-4

Contractor: SLAVINSKI, FRANK
Address: 23 STANFORD ROAD
CHERRY HILL NJ -
Telephone: (609) - 429-7935
Lic. No. / Bldrs. Reg. No.:
Federal Emp. No.:

is hereby granted permission to perform the following work :

[X] BUILDING
[ ] ELECTRICAL
[ ] ELEVATOR DEVICES
[ ] LEAD HAZARD ABATEMENT
[ ] ASBESTOS ABATEMENT
(Subchapter 8 only)

[ ] PLUMBING
[ ] FIRE PROTECTION
[ ] MECHANICAL
[ ] DEMOLITION
[ ] OTHER

DESCRIPTION OF WORK:

Roofing

ESTIMATED COST OF WORK:

Cost of Construction:	$0.00
Cost of Alteration:	$1,625.00
Cost of Demolition:	$0.00
Total Cost:	$1,625.00

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.

Anthony Saccomanno 4-4-00

Anthony Saccomanno — Date

Contruction Official

:: 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.

Note:

PAYMENT (Office Use Only)

[70-43]	Building	$46.00
[70-48]	Electrical	
[70-36]	Plumbing	
[70-37]	Fire Protection	
[70-61]	Elevator Devices	
[70-38]	Mechanical	
[70-91]	VolFee (DCA)	
[70-91]	AltFee (DCA)	$2.00
[70-50]	CO Fee	
[70-50]	CCO Fee	
[70-45]	Engineering	
[71-78]	Sewer	
[70-62]	Shade Tree	
[70-53]	Street Opening	
[73-83]	Street Opening Escrow	

Total: $ 48.00
All Fees Waived: No
Amount to be Paid: $ 48.00

Cash amount:	$48.00
Collected by:	SD
Total Cash Amount	$48.00
Total Check Amount	
Grand Total	$48.00

BUILDING SUBCODE TECHNICAL SECTION

Date Received 4/4/00
Date Issued 4/4/00
Control #
Permit # 2000-0774

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

Block 386.01 Lot 28
Work Site Location 33 MADISON AVE
Chuck Hill
Owner in Fee KAY GITZES
Address 33 MADISON AVE · CHURCH HILL
Tele. (856) 795-4452
Contractor FRANK SLAVINSKI
Address 93 STANFORD RD
CHURCH HILL NJ 08034
Tele. (856) 429-7935 Fax ( )
Lic. No. or Bldrs. Reg [redacted]
Federal Emp. No.

JOB SUMMARY (Office Use Only)

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

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 10/20/00
Approved by: JES

INSPECTIONS Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			10/20/00	JES
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. Alteration $
3. Total (1+ 2) $ 1625.00

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

Reroof over Existing Roof
Has one Roof on there.
Using GAF 25yr Shingles

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

FEE (Office Use Only)
$ 46.00

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

U.C.C. F110
(rev. 3/98)

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

One and Two Family Inspections Only!

Item.	Date	Insp.	Pass	Fail	Footing, Foundation and Slab Inspections
1	_____	_____	[ ]	[ ]	Approved plans and zoning approval are on site.
2	_____	_____	[ ]	[ ]	Footing location complies with approved plan.
3	_____	_____	[ ]	[ ]	Verifies the excavation and soil conditions.
4	_____	_____	[ ]	[ ]	Verifies reinforcement is in place (if required).
5	_____	_____	[ ]	[ ]	Inspects foundation wall forms: Verifies reinforcement Verifies window and vent openings Verifies anchorage bolts or strap size and spacing. Verifies keyway is clean.
6	_____	_____	[ ]	[ ]	Inspects masonry wall: Correct block size and type pier/pilasters locations Verifies window and vent openings Verifies anchorage bolt or strap size and spacing.
7	_____	_____	[ ]	[ ]	Inspects parging and waterproofing.
8	_____	_____	[ ]	[ ]	Inspects perimeter drainage system
9	_____	_____	[ ]	[ ]	Inspects fill, vapor barrier, slab thickness, prim insulation, reinforcement, haunch footing and isolated piers.

Item.	Date	Insp.	Pass	Fail	Framing and Insulation Inspections
10	_____	_____	[ ]	[ ]	Checks sill plate for proper anchorage and for termite and decay protection.
11	_____	_____	[ ]	[ ]	Verify rooms, doors, and windows for size, height, light and ventilation requirements.
12	_____	_____	[ ]	[ ]	Inspects wall framing and bracing.
13	_____	_____	[ ]	[ ]	Inspects floor, ceiling, and roof framing. Checks size, grade, species, spacing, span, nailing, hardware, support, and bearing.
14	_____	_____	[ ]	[ ]	Inspects beams, girders, columns, and post for spacing, span, size, grade, species, bearing, and installation.
15	_____	_____	[ ]	[ ]	Verifies trusses match approved drawings and layouts. All bracing, hangers, bearing, and lumber grades match approved drawings
16	_____	_____	[ ]	[ ]	Inspects exterior walls and roof sheathing.
17	_____	_____	[ ]	[ ]	Inspects subflooring.
18	_____	_____	[ ]	[ ]	Inspects all stairs and stairway framing.
19	_____	_____	[ ]	[ ]	Verifies that allowable limits of cutting, notching, and boring have not been exceeded.
20	_____	_____	[ ]	[ ]	Inspects fireplace construction and installation.
21	_____	_____	[ ]	[ ]	Checks for clearances from combustibles.
22	_____	_____	[ ]	[ ]	Checks for firestopping and draft stopping.
23	_____	_____	[ ]	[ ]	Inspects attics and crawl spaces for access and ventilation.
24	_____	_____	[ ]	[ ]	Inspects fire rated assemblies.
25	_____	_____	[ ]	[ ]	Verifies that framed structures complies with approved plans.
26	_____	_____	[ ]	[ ]	Checks all insulation: walls, ceilings, floors, and ductwork.

Item.	Date	Insp.	Pass	Fail	Final Inspection Tasks
27	_____	_____	[ ]	[ ]	Checks interior finishes.
28	_____	_____	[ ]	[ ]	Verify exhaust fan and dryer vent operations
29	_____	_____	[ ]	[ ]	Checks egress windows and safety glazing.
30	_____	_____	[ ]	[ ]	Inspects mechanical units. For attic units are lights, receptacles, and 24 inch walkways
31	_____	_____	[ ]	[ ]	Inspects exterior siding, roofing, and flashin
32	_____	_____	[ ]	[ ]	Inspects all stairs, balconies, and decks for handrails and guards.
33	_____	_____	[ ]	[ ]	Verifies compliance with approved plans or are as-builts and permit updates required
34	_____	_____	[ ]	[ ]	Inspects concrete flat work.
35	_____	_____	[ ]	[ ]	Inspects exterior grading for topo compliance

Comments

This inspection check off list shall serve as a general guide line and may not include all the necessary inspections required to insure code compliance.

Emergency

ELECTRICAL SUBCODE
TECHNICAL SECTION

856 577 9364
Attention

Please call owner for permit fees

Date Received
Control #
Date Issued
Permit #

170629
8/5/2020
2020-1407

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

Block 386.01 Lot 28 Qualification Code

Work Site Location 33 N/A Gibson Ave Camden NJ 08102

Owner in Fee: Andres Di Ayala

Tel. (8569860338 e-mail

Address

Contractor George Cassidy Electric Tel. ( )

Address 2963 Mt. Ephraim Avenue e-mail

Camden N.J. 08104

Contractor License No. N.J. LIC 11322 Exp. Date 4/2021

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

(609) 352-6971

FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required 7/17/20 KK

[ ] 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 7/17/20

Approved by KK

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date

Approved by

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type				
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: George Cassidy

Print name here: George Cassidy

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: 150 AMP Service

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		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 A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	150	AMP Service	65.00
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$

George Cassidy Electric
2963 Mt. Ephraim Avenue
Camden N.J. 08104
N.J. LIC 11622
(609) 562-8071

BLOCK 3860 LOT 3528 ADDRESS (SITE) 33 MADISON AVE. PERMIT NO. 9200704

C# 26817 called 3/31

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI and VII

I. IDENTIFICATION

1. Proposed Work-site at: 33 MADISON AVE, CHERRY HILL N.J.
2. Name of Owner in Fee: ROBERT R BRADER Tel. (609) 795-4452
   Address 33 MADISON AVE, (street) CHERRY HILL, (municipality) N.J. 08002 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: VALLEY BROOK CONTRACTORS Tel. (609) 354-2250
   Address 1107 W. VALLEY BROOK RD. CHERRY HILL, N.J. 08034
   License No. OR, if new home Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. [redacted] Social Security No. _____
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person In Charge of Work ZIGGY OSINSKI Tel. (609) 354-2250

R# 7189

Engr.: _____ Rec'd: 3/ Computer: N

V. FEE SUMMARY (for office use only)

			Update	Update
(1)	Building	$	33.00	
(2)	Electrical		38.00	
(3)	Plumbing		10.00	
4.	Fire Protection			
5.	Other			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
(9)	DCA Training Fee		1.00	
10.	Subtotal	$		
(11)	Cert. of Occupancy		85.00	
12.	Other			
13.	TOTAL	$	167.00	

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ____ ft.	
3. Area—Largest Floor ____ sq. ft.	
4. Building Area—All Floors ____ sq. ft.	
5. Volume of Structure ____ cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed ____ sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ____ ft.	
10. Wetlands yes ____ sq. ft. / no	
11. Fire Grading	
12. Max. Live Load	
13. Max. Occupancy Load	

II. PROPOSED WORK

Enlarge laundry room.

	Est. Cost
1. ☐ Minor Work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☑ Addition	
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☑ Plumbing	
8. ☑ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS	7500.00

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
			Mar 30 92				
			3/30/92	DC			
			3-27-92	JP			

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☑ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction 1
After Construction 1
Net gain or loss 0

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

U.C.C. Form F-100A

LDS CH-B 10410572

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( )I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( )I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature Robert R Brooks Date _____

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor

Agent Name Gregory J Osinski · VALLEYBROOK CONST.

Address 1107 W. Valleybrook Rd.
Cherry Hill, N.J.

Telephone (609) 354-2250

Signature Gregory J Osinski Date 3/24/92

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☐ Other									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE **(office use only—optional)**

Name of Code & Edition		Name of Code & Edition			
Building		Energy		Other	
Electrical		Barrier Free			
Plumbing		Flood Hazard			
Fire Protection		As Built Elevation Cert.			
Mechanical		Other			

X. CERTIFICATES ISSUED **(office use only)**

			DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.		
☐ Temporary Certificate of Occupancy	No.		
☐ Continued Certificate of Occupancy	No.		
☐ Certificate of Occupancy	No.		
☐ Certificate of Approval	No.		
☐ None			

CONSTRUCTION PERMIT

Date Issued 4-1-92
Control #
Permit # 9200704

IDENTIFICATION Block 386.01 Lot 28

Work Site Location 33 Madison Ave.
Cherry Hill, N.J.

Owner in Fee Robert Brader
Address 33 Madison Ave.
Cherry Hill, N.J.
Tele. (609) 795-4452

Contractor Valleybrook Contractors
Address 1107 West Valleybrook Rd.
Cherry Hill, N.J. 08034
Tele. (609) 354-2250
Lic. No. or Bldrs. Reg. No. [redacted] Exp. Date
Federal Emp. No. [redacted]
or Social Security No.

is hereby granted permission to perform the following work:
[XX] BUILDING [XX] PLUMBING [ ] OTHER
[XX] ELECTRICAL [ ] FIRE PROTECTION

DESCRIPTION OF WORK:

Laundry room addition, total 60 sq.ft.

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 $ 7,500.00

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

PAYMENTS (Office Use Only)

Building	33.00
Plumbing	10.00
Electrical	38.00
Fire Protection	
Other	
Other	
DCA Training Fee	1.00
Cert. of Occ.	85.00
Other	
Total	167.00
Check No.	2708
Cash	
Collected By:	AO

(see reverse side)

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 3-26-97
Date Issued 4-1-97
Control #
Permit # 9700704

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

Block 386.01 Lot 31 28
Work Site Location 33 MADISON AVE. CHERRY HILL N.J

Owner in Fee ROBERT R BRADER
Address 33 MADISON AVE.
CHERRY HILL, N.J. 08002
Tele. (609) 795-4452
Contractor VALLEY BROOK CONTRACTORS
Address 1107 WEST VALLEY BROOK ROAD
CHERRY HILL N.J. 08034
Tele. (609) 354-2250
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. [redacted] or Social Security 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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

ENLARGE EXISTING LAUNDRY ROOM

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type:				
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present 12.3 Proposed
Constr. Class Present 5B Proposed
No. of Stories
Height of Structure 11 Ft.
Area—Largest Floor 60 Sq. Ft.
Total Bldg. Area/All Floors Sq. Ft.
Volume of Structure 660 Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ 6900.00
3. Total (1+2) $

TYPE OF WORK:
[ ] New Building
[X] Addition 5 x 12 x 11 = 660 Cu.ft.
[ ] Alteration
[ ] Roofing 660 x .019 = 12.54
[ ] Siding
[ ] Other
[ ] Demolition
[ ] Miscellaneous
[ ] Fence Height
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Elevator
[ ] Asbestos Abatement
[ ] Other

(Office Use Only)

FEE $

Administrative Surcharge $ 33.00
Paid [ ] Check # 2708 Minimum Fee $
Collected by: XXX TOTAL FEE $

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

Cherry Hill
MUNICIPALITY 17

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received 3-26-92.
Date Issued 4-1-92
Control #
Permit # 9200704

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

Block 386.01 Lot 37 28
Work Site Location 33 MADISON AVE.
CHERRY HILL N.J.
Owner in Fee ROBERT R RADER
Address 33 MADISON AVE.
CHERRY HILL N.J. 08002
Tele. (609) 795-4452
Contractor VALLEY BROOK CONTRACTORS
Address 1107 WEST VALLEY BROOK ROAD
CHERRY HILL N.J 08034
Tele. (609) 354-2260
Lic. No. 10361
Federal Emp. No. [redacted] or Social Security No.

B. ELECTRICAL CHARACTERISTICS

[ ] Reinspection [ ] Resale [ ] Meter Set
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 300.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire
[ ] Elec. Plans Approved
Date: 5-21-92
Approved by:

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

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

Temp. Cut-in-Card Date Issued:
Final Cut-in-Card Date Issued:
Line Dept.

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.

Michael H. Quinn
Signature-Contractor Seal

[V] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
4		Fixtures (1)	
3		Receptacles (2)	
1		Switches (3)	
6		Total 1 + 2 + 3	33-
		Range	
		Oven(s)	
		Surface Unit	
		Dishwasher	
		Garbage Disposal	
		Dryer	
	1	A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
		Whirlpool/spa	
		Pool Bonding	
		Pool Filter Motor	
		Pool Lights	
		Water Heater(s)	
		Central heat:	
		oil, gas or elec.	
		Baseboard Heat Units	
		Thermostats	
		Heat Pump	
		Pump(s)	
		Motor Control Center/Sub Panels	
		Signs	
		Light Standards	
		Motors—Fractional H.P.	
		Motors—All Others	
		Transformers	
		Generators	
		Service Entrance	
		Other	(33-)

Administrative Surcharge $ 5.00
Paid [ ] Check # 2708 Minimum Fee $
Collected by: TOTAL FEE $ 38.00

U.C.C. Form E-120A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 3-26-92
Date Issued 4-1-92
Control #
Permit # 9200704

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

Block 386.01 Lot ~~34~~ 28
Work Site Location 33 MADISON AVE CHERRY HILL, N.J.

Owner in Fee ROBERT R BRADER
Address 33 MADISON AVE
CHERRY HILL N.J. 08002
Tele. (609) 795-4452
Contractor VALLEYBROOK CONTRACTORS
Address 1107 WEST VALLEYBROOK ROAD
CHERRY HILL, NJ. 08034
Tele. (609) 354-2250
Lic. No. #130
Federal Emp. No [redacted] or Social Security No. N

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed RE LOWCAL LUNDRY ROOM.
Building Sewer Size 1 1
Water Service Size
Estimated Cost of Plumbing Work $ 300.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[ ] Plumb. Plans Approved
Date: 4/6/92
Approved by: MC

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

INSPECTIONS:

Type:	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
Solar				
TCO				

Dates (Month/Day)

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 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	
	Sink	
	Dishwasher	
	Drinking Fountain	
1 EXT	Washing Machine	7.-
	Hose Bibb	
	Gas Piping	
	Fuel Oil Piping	
	Water Heater	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Gas Service Connection	
	Active Solar System	
	Other	

Administrative Surcharge $ 1.00
Paid [ ] Check # 2708 Minimum Fee $
Collected by: MC TOTAL $ 11.00

U.C.C. Form F-130A

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

TOWNSHIP OF CHERRY HILL

820 Mercer Street
Cherry Hill, NJ 08002

ZONING APPROVAL - 92 17376

☐ Building Permit ☐ Certificate of Occupancy

Block 386 Lot 31 Zone

Property Owner ROBERT BRADER

Address of Property 33 MADISON AVE.

Address of Owner SAME Phone No. 795-4452

Existing Use PRIVATE Proposed Use PRIVATE

Type of Structure Proposed 5X12 ADDITION

THIS APPROVAL ALLOWS THE APPLICANT TO APPLY FOR A BUILDING PERMIT OR, IF NO FURTHER CONSTRUCTION IS REQUIRED, CERTIFICATE OF OCCUPANCY. NO USE OR CONSTRUCTION MAY COMMENCE WITHOUT ALL NECESSARY APPROVALS.

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all application laws of this jurisdiction.

Signature | 1107 W. VALLEYBROOK RD Address | 354-5550 Telephone

SETBACKS: ☐ Corner Lot ☐ Inside Lot

Front ____ Rear 26' Smallest side 10' Aggregate ____ Second front ____

Sq. Ground Floor 60 Height ____ Gross Floor Area 60

For swimming pool only:

Distance of pool from the foundation wall ____ Front ____ Rear ____ Side ____

ZONING BOARD ACTION	P.O.A. ____	Date Granted ____
PLANNING BOARD ACTION	P.B.C. ____	Date Granted ____

THIS APPROVAL IS BASED ON THE INFORMATION ON THIS FORM AND THE ATTACHED PLAN(S).

COMMENTS: ____

OTHER PAYMENTS AND FEES:

Shade Tree $.75 per lineal feet of street frontage ____

Contributions-in-Aid:	Housing Impact Fee:
Road Improv. $ ____	Residential ____ per sq. ft X ____ sq. ft. = $ ____
Sewer Improv. $ ____	Non-Residential:
Other ____ $ ____	(a) Total construction cost $ ____ X 0.03 = $ ____
	(b) Gross floor area ____ X $1.00 a sq. ft. = $ ____
	IMPACT FEE IS THE LARGER OF (a) OR (b).

[signature] | ZONING OFFICER | 3-26-92

Name | Title | Date

IM ' PPCo.

TOWNSHIP OF CHERRY HILL

820 MERCER STREET, CHERRY HILL, NEW JERSEY 08002
DEPARTMENT OF CODE ENFORCEMENT

21975

RECEIPT FOR BLDG. PERMIT NO.: 9200704

DOCUMENT NO.: _____ BLOCK 384.01 LOT 28

RECEIVED BY: LOD Addition

☐ CASH ☒ CHECK 2708

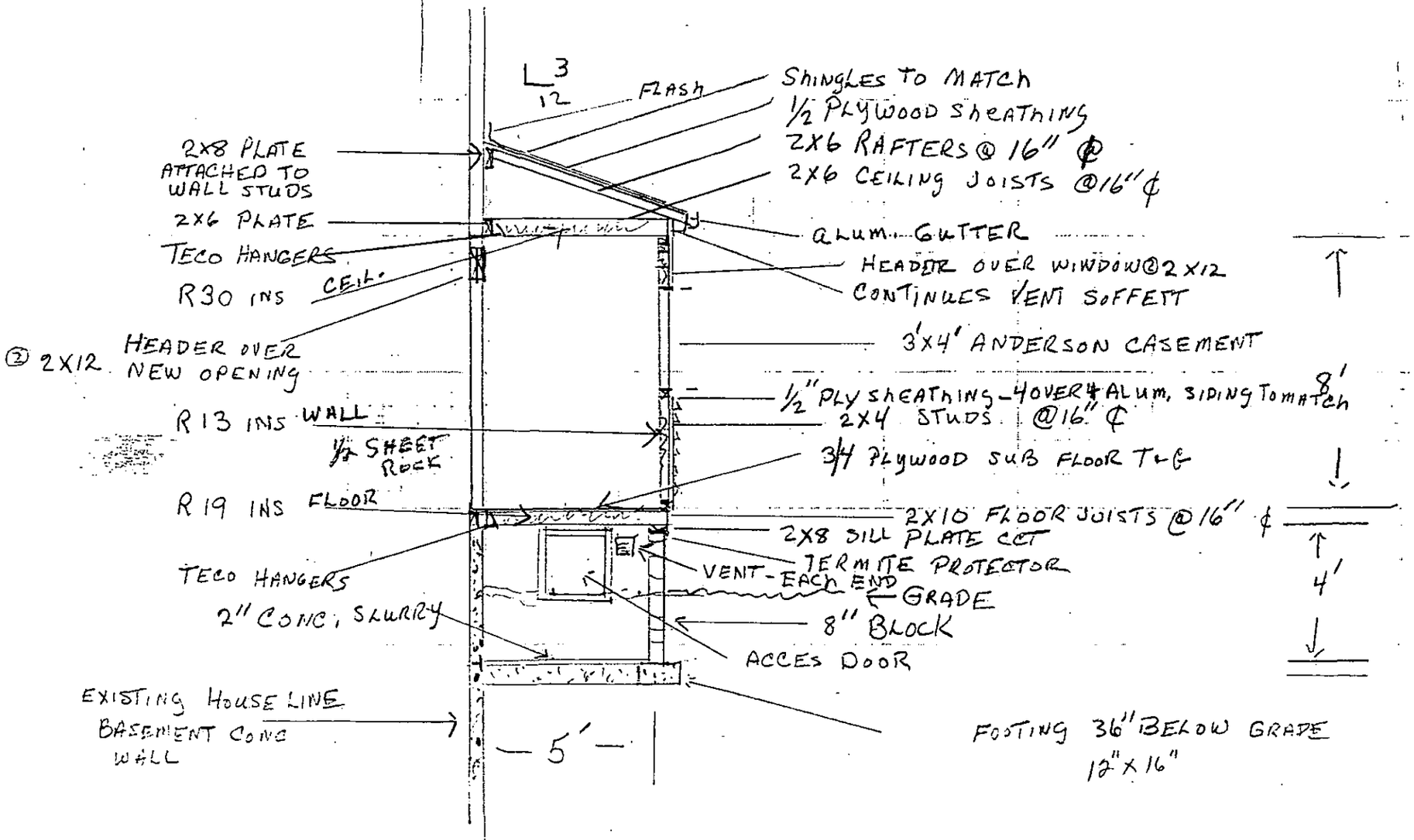
DATE: 4/1/92

NAME: Valleybrook Contractors

ADDRESS: 4107 West Valleybrook Rd

CITY: Cherry Hill NJ

CODE	AMOUNT
70 - 36	$ 10.00
70 - 37	$
70 - 38	$
70 - 43	$ 33.00
70 - 45	$
70 - 48	$ 38.00
70 - 50	$ 85.00
70 - 62	$
71 - 78	$
70 - 91	$ 1.00
	$
TOTAL	$ 167.00



Valleybrook
CONTRACTORS CORP.
1107 West Valleybrook Road
CHERRY HILL, NEW JERSEY 08034
(609) 354-2250

JOB _____

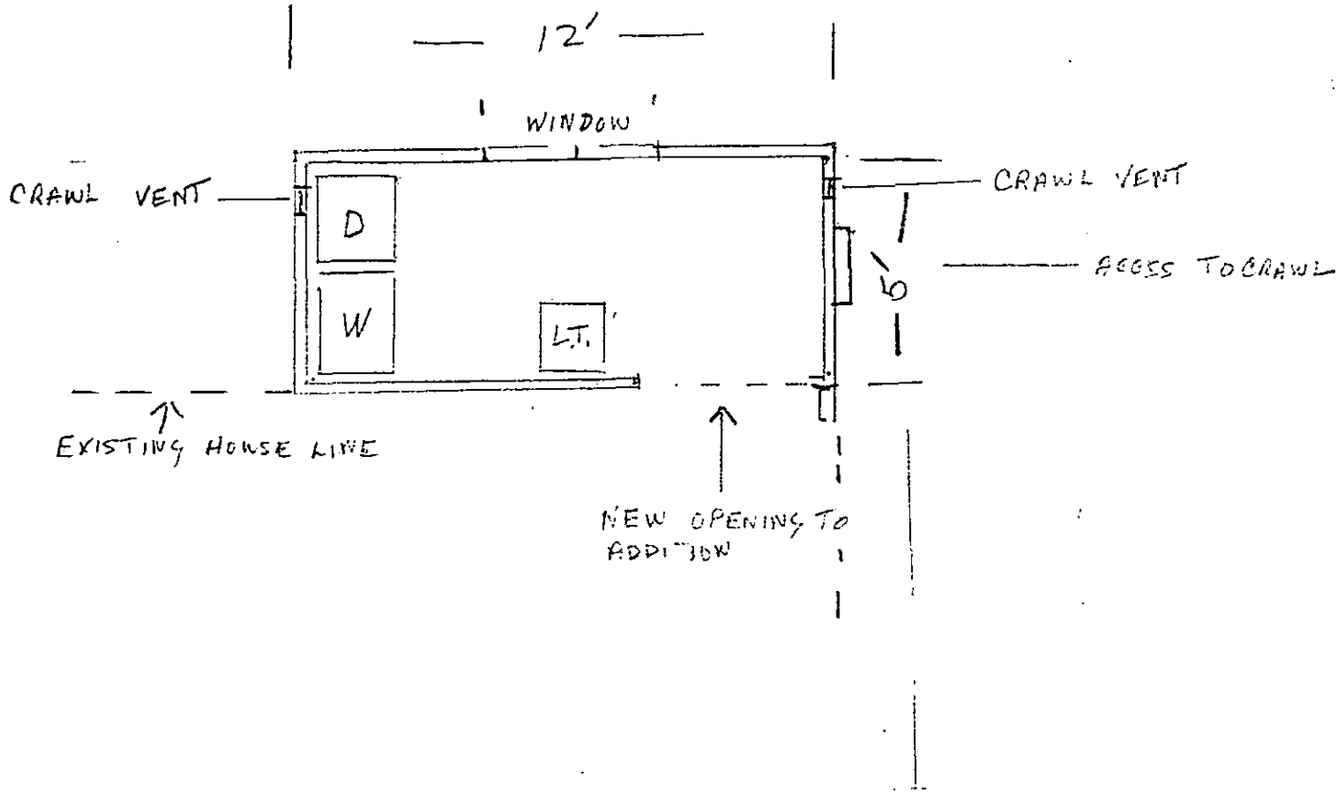
SHEET NO. _____ OF _____

CALCULATED BY _____ DATE _____

CHECKED BY _____ DATE _____

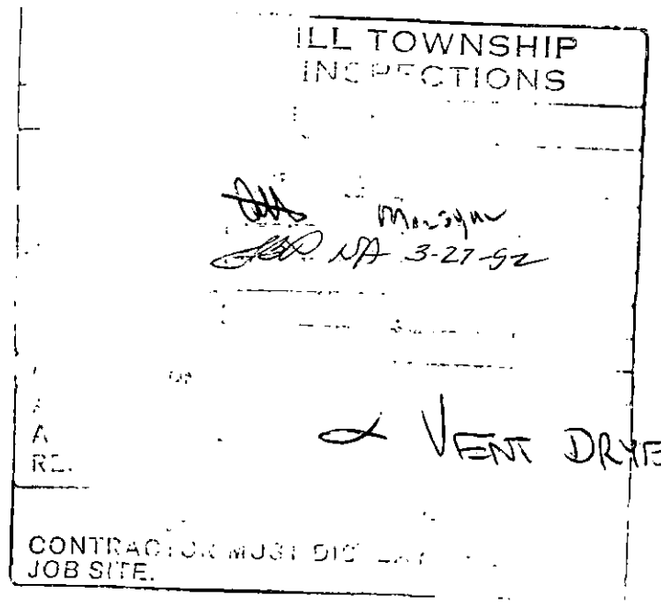
SCALE _____

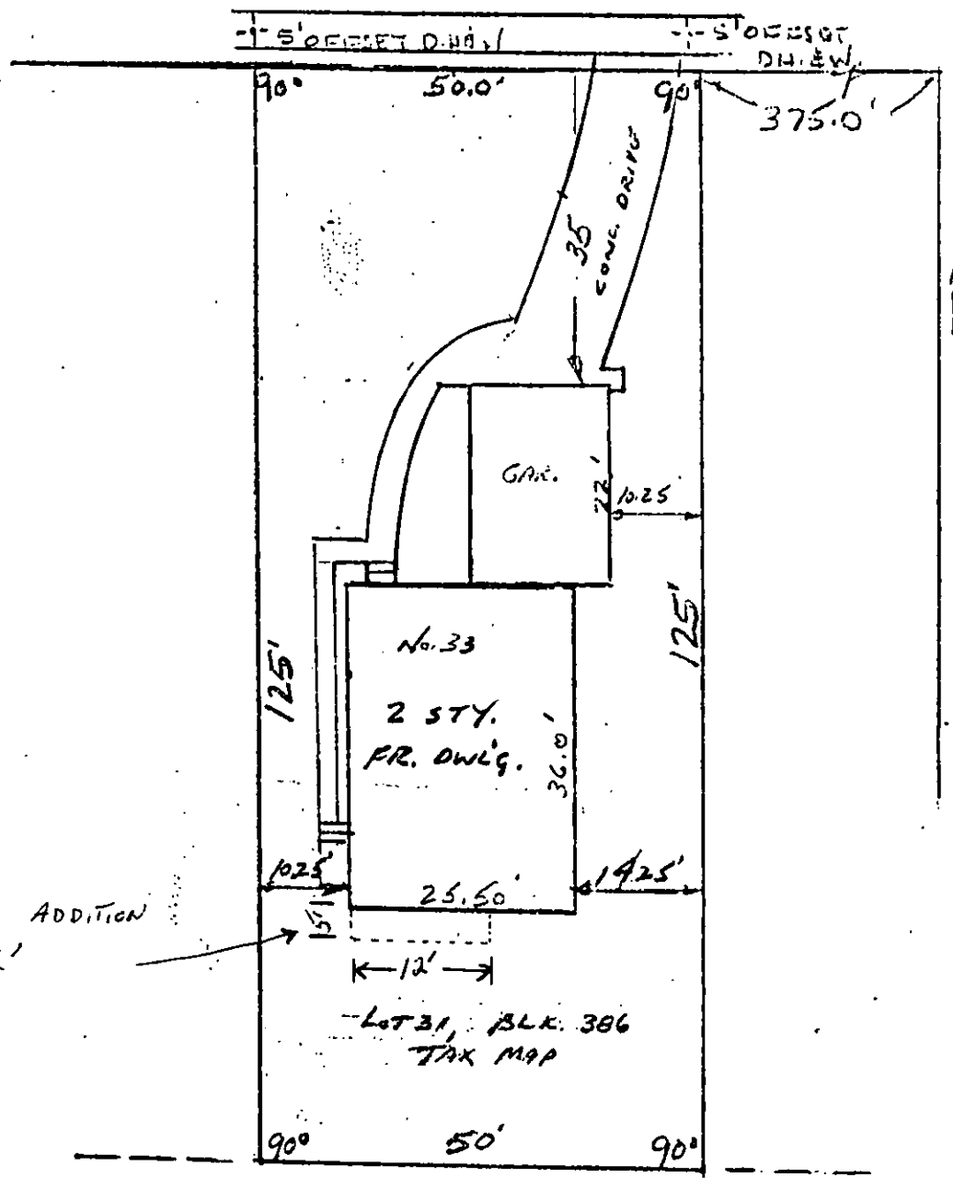
Floor Plan



2 6 1992

office copy





PLAN OF SURVEY

MADISON AVE.

CHERRY HILL TWP.

CAMDEN CO., N. J.

SCALE 1" = 20' 4/11/74

REV. 4/16/74

CHRIS NIELSEN, L.S. 10886

302 ENGARD AVE.

PENNSAUKEN, N. J.

...any insurer of Title relying hereon and any other party in interest ... consideration of the fee paid for making this survey, I hereby certify ... is accurate (except such easements, if any, that may be located below ... surface of the lands or on the surface of the lands and not visible) ... inducement for any insuror of title to insure the title to the lands ... premises shown thereon. This responsibility limited to the current ... as of the date of this survey."

(Surveyor)

...ADDITIONAL DWL'G. REV. 2/3/76

CHERRY HILL, TOWNSHIP OF

(BUILDING DEPT.)

PERMIT WITHOUT A JACKET

CHERRY HILL
DEPARTMENT OF
CODE ENFORCEMENT

CERTIFICATE

Date Issued
Control #
Permit # 9200704
No. 26817

IDENTIFICATION

Block 386.01 Lot 28
Work Site Location 33 Madison Ave.
Cherry Hill, N.J.
Owner in Fee Robert Brader
Address 33 Madison Ave
Cherry Hill, N.J.
Tele. (609) 795-4452
Contractor Valleybrook Contractors
Address 1107 West Valleybrook Rd.
Cherry Hill, N.J. 08034
Tele. (609) 354-2250
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. [redacted]
or Social Security No.

Home Warranty No.
Use Group R3
Maximum Live Load
Description of Work/Use:

Laundry room addition, total 60 sq.ft.

Type of Warranty Plan: [ ] **State** [ ] **Private**
Construction Classification 5B
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☒ **CERTIFICATE OF OCCUPANCY** ☐ **CERTIFICATE OF APPROVAL**

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

☐ **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.

☐ **TEMPORARY CERTIFICATE OF OCCUPANCY**

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate:

Fee $ 85.00
Paid [ ] Check No. 2708
Collected by: [signature]

CONSTRUCTION OFFICIAL

U.C.C. Form F-260A 1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR IM 4-89 PPCo.

60

BUILDING SUBCODE TECHNICAL SECTION

Date Received 3-26-92
Date Issued 4-1-92
Control #
Permit # 9200704

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

Block 386, 01 Lot 3+ 28
Work Site Location 33 MADISON AVE, CHERRY HILL, N.J

Owner in Fee ROBERT R BRADER
Address 33 MADISON AVE.
CHERRY HILL, N.J. 08002
Tele. (609) 795-4452
Contractor VALLEY BROOK CONTRACTORS
Address 1107 WEST VALLEY BROOK ROAD
CHERRY HILL, N.J. 08034
Tele. (609) 354-2250
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. [redacted] or Social Security 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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

ENLARGE EXISTING LAUNDRY ROOM

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	No-31-92	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA 3.92
Date: 6.23.92
Approved By:

INSPECTIONS	Dates (Month/Day)			
Type:	Failure	Failure	Approval	Initial
Footing	4-2		4-3	
Foundation			4-7	
Slab				
Frame			4-10	
Insulation			4/15	
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed
Constr. Class Present 5D Proposed
No. of Stories
Height of Structure 11' Ft.
Area—Largest Floor 60 Sq. Ft.
Total Bldg. Area/All Floors 660 Sq. Ft.
Volume of Structure 660 Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ 6900.00
3. Total (1+2) $

TYPE OF WORK:
[ ] New Building
[X] Addition 5 x 12 x 11 = 660 Cu Ft
[ ] Alteration
[ ] Roofing 660 x .019 = 12.54
[ ] Siding
[ ] Other
[ ] Demolition
[ ] Miscellaneous
[ ] Fence Height
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Elevator
[ ] Asbestos Abatement
[ ] Other

(Office Use Only) FEE

	$
Administrative Surcharge	$ 33.00
Minimum Fee	$
TOTAL FEE	$

Paid [ ] Check # 2708
Collected by:

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

Cherry Hill
MUNICIPALITY

ELECTRICAL SUBCODE TECHNICAL SECTION H5

Date Received 3-26-92
Date Issued 4-1-92
Control #
Permit # 9200704

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

Block 386.01 Lot ~~31~~ 28
Work Site Location 33 MADISON AVE., CHERRY HILL, N.J.
Owner in Fee ROBERT R. BRADER
Address 33 MADISON AVE. CHERRY HILL, N.J. 08002
Tele. (609) 795-4452
Contractor VALLEY BROOK CONTRACTORS
Address 1107 WEST VALLEY BROOK ROAD CHERRY HILL, N.J. 08034
Tele. (609) 354-2250
Lic. No. 10294
Federal Emp. No. [redacted] Social Security No.

B. ELECTRICAL CHARACTERISTICS

[ ] Reinspection [ ] Resale [ ] Meter Set
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 300.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire
[ ] Elec. Plans Approved
Date: 3-27-92
Approved by:

SUBCODE APPROVAL:
[X] CO [ ] CCO [ ] CA
Date: 6-29-92
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			9-17	JP
Temporary				
Constr. Serv.				
TCO				
Other				
Service				
Final			6-29	JP

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

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. Michael Hopkins
Signature-Contractor Seal

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
2		Fixtures (1)	
3		Receptacles (2)	
1		Switches (3)	
6		Total 1 + 2 + 3	33-
		Range	
		Oven(s)	
		Surface Unit	
		Dishwasher	
		Garbage Disposal	
		Dryer	
		A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
		Whirlpool/spa	
		Pool Bonding	
		Pool Filter Motor	
		Pool Lights	
		Water Heater(s)	
		Central heat: oil, gas or elec.	
		Baseboard Heat Units	
		Thermostats	
		Heat Pump	
		Pump(s)	
		Motor Control Center/Sub Panels	
		Signs	
		Light Standards	
		Motors—Fractional H.P.	
		Motors—All Others	
		Transformers	
		Generators	
		Service Entrance	
		Other	(33-)

Administrative Surcharge $ 5.00
Paid [ ] Check # 2708 Minimum Fee $
Collected by: AC TOTAL FEE $ 38.00

U.C.C. Form F-120A
1 White=Inspector Copy 2 Canary=Office Copy
3 Pink=Office Copy 4 Gold=Applicant Copy

386.01
28

TOWNSHIP OF CHERRY HILL

820 Mercer Street
Cherry Hill, NJ 08002

ZONING APPROVAL № 17376

☐ Building Permit ☐ Certificate of Occupancy

Block 386 Lot 31 Zone

Property Owner ROBERT BRADER

Address of Property 33 MADISON AVE.

Address of Owner SAME Phone No. 795-4452

Existing Use PRIVATE Proposed Use PRIVATE

Type of Structure Proposed 5X12 ADDITION

THIS APPROVAL ALLOWS THE APPLICANT TO APPLY FOR A BUILDING PERMIT OR, IF NO FURTHER CONSTRUCTION IS REQUIRED, CERTIFICATE OF OCCUPANCY. NO USE OR CONSTRUCTION MAY COMMENCE WITHOUT ALL NECESSARY APPROVALS.

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all application laws of this jurisdiction.

Signature | 807 W. VALLEYBROOK RD. Address | 354-2250 Telephone

SETBACKS: ☐ Corner Lot ☐ Inside Lot

Front Rear 26' Smallest side 10' Aggregate Second front

Sq. Ground Floor 60 Height Gross Floor Area 60

For swimming pool only:

Distance of pool from the foundation wall Front Rear Side

ZONING BOARD ACTION	P.O.A.	Date Granted
PLANNING BOARD ACTION	P.B.C.	Date Granted

THIS APPROVAL IS BASED ON THE INFORMATION ON THIS FORM AND THE ATTACHED PLAN(S).

COMMENTS:

OTHER PAYMENTS AND FEES:

Shade Tree $.75 per lineal feet of street frontage

Contributions-In-Aid:

Road Improv. $

Sewer Improv. $

Other $

Housing Impact Fee:

Residential ____ per sq. ft X ____ sq. ft. = $

Non-Residential:

(a) Total construction cost $ ____ X 0.03 = $

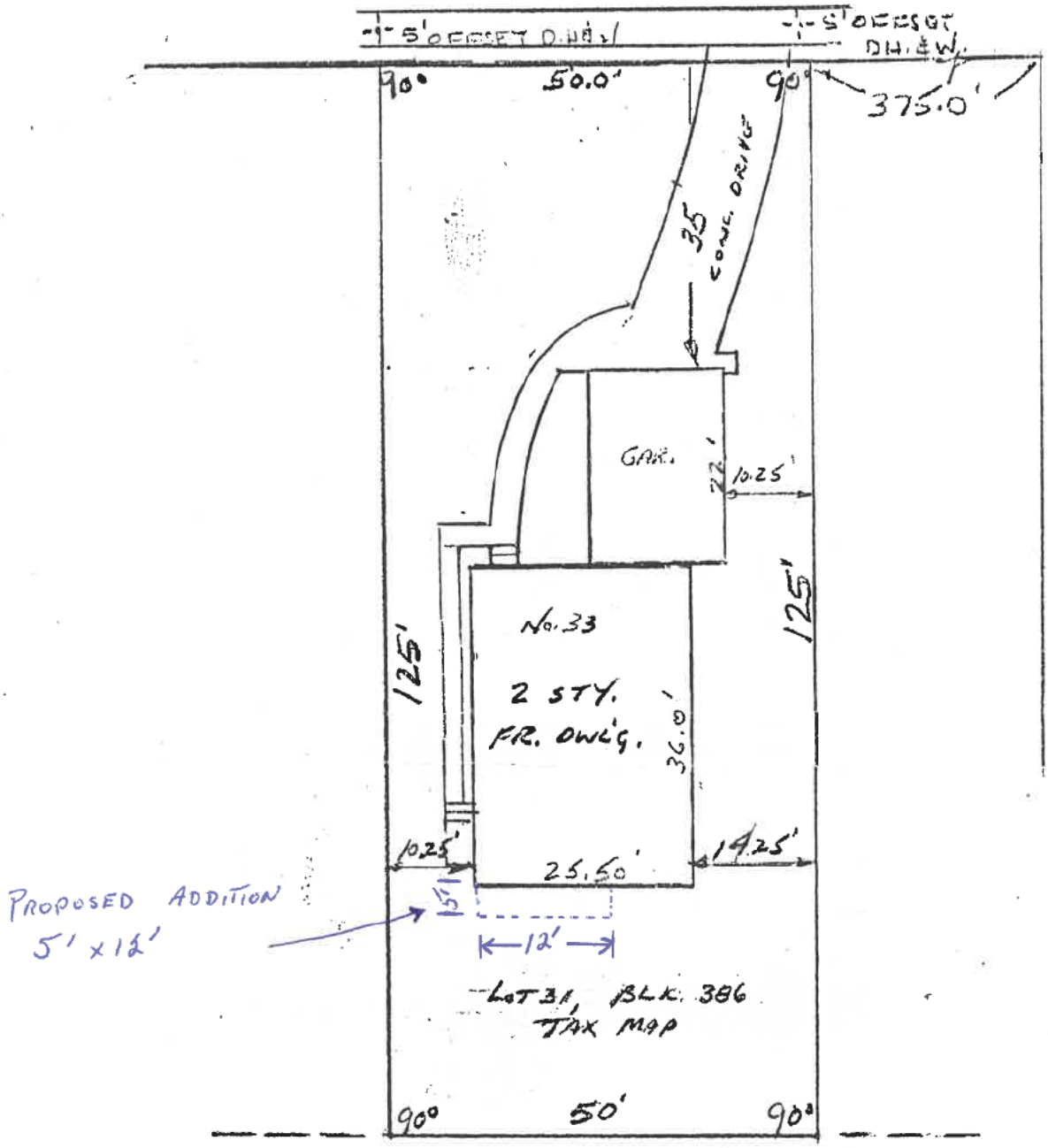
(b) Gross floor area ____ X $1.00 a sq. ft. = $

IMPACT FEE IS THE LARGER OF (a) OR (b).

Name | ZONING OFFICER Title | 3-26-92 Date

IM PPCo.

(60' WIDE)



33 Madison

PLAN OF SURVEY
MADISON AVE.
CHERRY HILL TWP.
CAMDEN CO., N.J.

SCALE 1"=20' 4/11/74
REV. 4/16/74

CHRIS NIELSEN, LS. 10886
302 ENGARD AVE.
PENNSAUKEN, N.J.

...any insurer of Title relying hereon and any other party in interest consideration of the fee paid for making this survey, I hereby certi... its accuracy (except such easements, if any, that may be located belo... surface of the lands or on the surface of the lands and not visibl... inducement for any insuror of title to insure the title to the lan... premises shown thereon. This responsibility limited to the curre... ...of the date of this survey."

(Surveyor)

proposed dwl'g. Rev. 2/9/76