7-26-2021

200-2021

Cindy DiDomenico

From: Vanessa Parent
Sent: Wednesday, July 14, 2021 2:53 PM
To: Cindy DiDomenico
Subject: FW: OPRA request - OPRA/OPEN & CLOSE PERMITS - 341 Hudson St Gloucester City 08030

Please process this request today.
Thank you

Vanessa L. Parent, RMC, CMR
City Clerk, Certified Municipal Registrar
512 Monmouth Street
Gloucester City, NJ 08030
856-456-0205, ext. 203
vanessa@cityofgloucester.org

-----Original Message-----
From: Breean Stumpf <opra+request-24584-aa3d35c3@requests.opramachine.com>
Sent: Wednesday, July 14, 2021 2:43 PM
To: Vanessa Parent <Vanessa@cityofgloucester.org>
Subject: OPRA request - OPRA/OPEN & CLOSE PERMITS - 341 Hudson St Gloucester City 08030

Dear Gloucester City,

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 - 341 Hudson St Gloucester City 08030

Yours respectfully,

Breean Stumpf

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-24584-aa3d35c3@requests.opramachine.com

Is vanessa@cityofgloucester.org the wrong address for OPRA requests to Gloucester City? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=gloucester_city

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:

200-2021 17 pages
7-14-2021
7/26/2021 Completed
Housing

CAD 7-14-2021

7-26-2021

200-2021

Cindy DiDomenico

From: Vanessa Parent
Sent: Wednesday, July 14, 2021 2:53 PM
To: Cindy DiDomenico
Subject: FW: OPRA request - OPRA/OPEN & CLOSE PERMITS - 341 Hudson St Gloucester City 08030

Please process this request today.
Thank you

Vanessa L. Parent, RMC, CMR
City Clerk, Certified Municipal Registrar
512 Monmouth Street
Gloucester City, NJ 08030
856-456-0205, ext. 203
vanessa@cityofgloucester.org

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To: Vanessa Parent <Vanessa@cityofgloucester.org>
Subject: OPRA request - OPRA/OPEN & CLOSE PERMITS - 341 Hudson St Gloucester City 08030

Dear Gloucester City,

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 - 341 Hudson St Gloucester City 08030

Yours respectfully, 2015-0035 2008-0354
2015-0035A 2008-0354A
Breean Stumpf 1997-0044-Not available

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-24584-aa3d35c3@requests.opramachine.com

Is vanessa@cityofgloucester.org the wrong address for OPRA requests to Gloucester City? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=gloucester_city

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:

200-2021
7-14-2021
Housing
CAD 7-14-2021

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

Date Issued 8/15/08
Control # C-36-15
Permit # 08-354

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 36 Lot 15.01 Qual

Work Site Location 341 HUDSON STREET

Owner in Fee SEATON, ROSE
Address 341 HUDSON STREET
GLOUCESTER, NJ 08030-
Telephone

Contractor URBAN RENOVATORS
Address 524 E. 21ST STREET
CHESTER, PA 19103- "
Telephone
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ALTERATIONS-SEE ATTACHED RCA WORK WRITE-UP. NEED PERMIT UPDATE FOR ELECTRIC AND FIRE.

PAYMENTS (Office Use Only)

Building	629
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	28
Cert. of Occupancy	0
Other	
Total	657
Check No.	1196
Cash	
Collected By	

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 $ 20,975

Robert Scowden
Construction Official

8/15/08
Date

U.C.C. PI70 (rev. 3/96)

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

Final

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 07/29/2008
Date Issued 8/15/08
Control # C-36-15
Permit # 08-354

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

Block 36 Lot 15.01 Qual
Work Site Location 341 HUDSON STREET

Owner in Fee SEATON, ROSE
Address 341 HUDSON STREET
GLOUCESTER, NJ 08030-
Tele
Contractor URBAN RENOVATORS
Address 524 E. 21ST STREET
CHESTER, PA 19103-
Tele Fax
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

JOB SUMMARY (Office Use Only)

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

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [X] CA
Date: 9-25-08
Approved By: NF

INSPECTIONS	Dates (Month/Day)			
Type	Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			9-25-08	NF
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 20,975
3. Total (1+2) $ 20,975

Industrialized Building:
[ ] State Approved
[ ] HUD

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

ALTERATIONS-SEE ATTACHED RCA WORK WRITE-UP. NEED PERMIT UPDATE FOR ELECTRIC AND FIRE.

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	529
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 529
DCA State Permit Fee	$ 28

Paid [ ] Check # Collected by:

U.C.C. F110 (rev. 3/96)

Gloucester City
700 Somerset St
Gloucester City, NJ 08030
(856)456-7689 FAX *(856)456-0289*

Permit No. **20080354**
Control No. **92010851**
Block/Lot 36./15.01
Date 9/25/08

Certificate of Approval

IDENTIFICATION

Block/Lot 36./15.01
Work Site Location 341 HUDSON STREET

Owner in Fee/Occupant SEATON, ROSE
Address 341 HUDSON STREET
GLOUCESTER, NJ 08030-
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:

ALTERATIONS-SEE ATTACHED RCA WORK WRITE-UP. NEED PERMIT UPDATE FOR ELECTRIC AND FIRE.

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

Robert Scouler, Construction Official CM

Fee $
Paid [ ] Check No.
Collected by:

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

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

Date Issued 9/19/08
Control # C-36-15
Permit # 08-354-A

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 36 Lot 15.01 Qual

Work Site Location 341 HUDSON STREET

Owner in Fee SEATON, ROSE
Address 341 HUDSON STREET
GLOUCESTER, NJ 08030-
Telephone

Contractor JEM ELECTRIC
Address 700 IRISH HILL ROAD
RUNNEMEDE, NJ 08078-
Telephone
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
6 FIXTURES, 4 SWITCHES, 4 SMOKE DETECTORS, 1 WATER HEATER, PROVIDE CHIMNEY CERT.

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 $ 2,600

Robert Scrudlyon
Construction Official

9/19/08
Date

PAYMENTS (Office Use Only)

Building	0
Electrical	55
Plumbing	35
Fire Protection	35
Elevator Devices	0
Other	
DCA State Permit Fee	4
Cert. of Occupancy	0
Other	
Total	129
Check No.	1257
Cash	
Collected By	JR

U.C.C. PI70 (rev. 3/96)

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 09/09/2008
Date Issued 9/12/08
Control # C-36-15
Permit # 08-354+A

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

Block 36 Lot 15.01 Qual
Work Site Location 341 HUDSON STREET

Owner in Fee SEATON, ROSE
Address 341 HUDSON STREET
GLOUCESTER, NJ 08030-
Tele.
Contractor JEK ELECTRIC
Address 700 IRISH HILL ROAD
RUNNEMEDE, NJ 08078-
Tele.
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

B. SLECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 9/23/08
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final			9/30	EC

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
6		Lighting Fixtures	
0		Receptacles	
4		Switches	
4		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
14		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 55
DCA State Permit Fee $ 2

U.C.C. F120 (rev. 3/96)

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 09/09/2008
Date Issued 9/12/08
Control # C-36-15
Permit # 08-354+A

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

Block 36 Lot 15.01 Qual

Work Site Location 341 HUDSON STREET

Owner in Fee SEATON, ROSE
Address 341 HUDSON STREET
GLOUCESTER, NJ 08030-
Tele.
Contractor TWO GUYS PLUMBING INC.
Address 645 ELWOOD AVENUE
SOMERDALE, NJ 08083-
Tele.
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 700

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] DCA
Approved By:
Date: 8-7-08

INSPECTIONS Type	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures	9/23/08		9/23/08	
Gas Equip.	9/23/08		8-7-08	
Gas Piping				
Solar				
TCO			8-1-08	

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an 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)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
1	Water Heater	15
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Paid [ ] Check #
Collected by:

Administrative Surcharge	$	0
Minimum Fee	$	20
TOTAL FEE	$	35
DCA State Permit Fee	$	1

U.C.C. F130 (rev. 3/96)

GLOU CITY CONSTR OFFICE
313 MONMOUTH STREET
456-7689

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 09/09/2008
Date Issued 9/17/08
Control # C-36-15
Permit # 08-3541-A

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

Block 36 Lot 15.01 Qual
Work Site Location 341 HUDSON STREET
Owner In Fee SEATON, ROSE
Address 341 HUDSON STREET
GLOUCHSTER, NJ 08030-
Tele
Contractor JRH ELECTRIC
Address 700 IRISH HILL ROAD
RUNNEMEDE, NJ 08078-
Tele.
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 400

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO 14 CA
Date: 9/28/08
Approved By: Jones

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final			9/28/08	DM
Other				

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:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid		
[ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected		
[ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other 4 SMOKE DETECTR		35
Other		0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 35
	DCA State Permit Fee	$ 1

U.C.C. F140 (rev. 3/96)

Gloucester City
700 Somerset St
Gloucester City, NJ 08030
(856)456-7689 FAX *(856)456-0289*

Permit No. **20080354 A**
Control No. **92010926**
Block/Lot 36./15.01
Date 8/01/09

Certificate of Approval

IDENTIFICATION

Block/Lot 36./15.01
Work Site Location 341 HUDSON STREET

Owner in Fee/Occupant SEATON, ROSE
Address 341 HUDSON STREET
GLOUCESTER, NJ 08030-

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:

6 FIXTURES, 4 SWITCHES, 4 SMOKE DETECTORS, 1 WATER HEATER, PROVIDE CHIMNEY CERT.

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 6:17
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

Robert Scouler, Construction Official CM

Fee $
Paid [ ] Check No.
Collected by:

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

Gloucester City
700 Somerset St
Gloucester City, NJ 08030
(856)456-7689 FAX *(856)456-0289*

Permit No. **20150035**
Control No. **92014500**
Parcel(Block/Lot) **36/15.01**
Date

Construction Permit

Work Site Location 341 HUDSON ST

Owner in Fee..... BOOTH, ROBERT & SUSAN HATCHCOCK
Address..... 114 N BROADWAY
GLOUCESTER CITY, NJ 08030
Phone.....

Contractor.... JORIC INC.
Address..... 807 CHERRY STREET
GLOUCESTER, NJ 08030-
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:

4 FIXTURES, 3 RECEPTACLES, 6 SWITCHES,
1-100 AMP SERVICE, REPLACE BASEMENT
WIRING

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: $1,800

Michael DePalma Sr/ 2-12-15
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	134
Plumbing	0
Fire Protection	0
Elevator Devices	0
Mechanical	0
State Training Fee	3
Certificate of Occupancy	0
Other	0
Total	$137

Check#/Cash 3457
Paid 137
Collected By C

Total Administrative Fee: $0

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

Gloucester City
ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Receiv 1/13/2015
Control # 92014500

Date Issued
Permit # 20150035

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

Block/Lot 36/15.01

Work Site Location 341 HUDSON ST

Owner in Fee: BOOTH, ROBERT & SUSAN HATCHCOCK

Tel. _____ e-mail _____

Address: 114 N BROADWAY (Street) GLOUCESTER CITY, NJ 08030 (municipality, zip code)

Contractor: JORIC INC. Tel _____

Address: 807 CHERRY STREET, GLOUCESTER, NJ 08030- e-mail _____

Contractor License No. _____ Exp. Date _____

Federal Emp. ID No. _____ FAX. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed R-5

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ 1800 Descript: 4 FIXTURES, 3 RECEPTACLES, 6 SWITCHES, 1 -100 AMP SERVICE, REPLACE BASEMENT WIRING

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: 6/12/15
Approved by: [signature]

INSPECTIONS

Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			6/12	CS
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			6/12	EC
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)
4		Lighting Fixtures	
3		Receptacles	
6		Switches	
		Detectors	
		Light Pole	
		Motors—Fract. H	
		Emergency & Exit Lights	
		Communications Paints	
		Alarm Devices/F.A.C. Panel	
13		TOTAL NUMBERS	$ 65
		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	
1	100	AMP Service	69
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $ 0
Minimum Fee $ _____
State Permit Surcharge Fee $ _____
TOTAL FEE $ 134

U.C.C. F120 (rev. 07/08) Interactive Version

Applicant Note: In addition to this permit, Local construction code Enforcement Officials may require one or more additional trade permits.

Gloucester City
700 Somerset St
Gloucester City, NJ 08030
(856)456-7689 FAX *(856)456-0289*

Permit No. **20150035**
Control No. **92014500**
Block/Lot 36/15.01
Date 7/11/18

Certificate of Approval

IDENTIFICATION

Block/Lot 36/15.01
Work Site Location 341 HUDSON ST

Owner in Fee/Occupant BOOTH, ROBERT & SUSAN HATCHCOCK
Address 114 N BROADWAY
GLOUCESTER CITY, NJ 08030

Telephone
Contractor JORIC INC.
Address 807 CHERRY STREET
GLOUCESTER, NJ 08030-

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:

4 FIXTURES, 3 RECEPTACLES, 6 SWITCHES, 1-100 AMP SERVICE, REPLACE BASEMENT WIRING

CERTIFICATE OF OCCUPANCY
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

CERTIFICATE OF APPROVAL
This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than or the owner will be subject to fine or order to vacate:

CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:

[ ] Total removal of lead-based paint hazards in scope of work

[ ] Partial or limited time period (years); see file

CERTIFICATE OF CONTINUED OCCUPANCY
This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

CERTIFICATE OF COMPLIANCE
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

Michael DaPalma Sr., Construction Official

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

Permit Fee $ 137
Paid [ ] Check No. 3457
Collected by: CM

Gloucester City
700 Somerset St
Gloucester City, NJ 08030
(856)456-7689 FAX (856)456-0289

Permit No. **20150035 A**
Control No. **92014869**
Parcel(Block/Lot) **36/15.01**
Date

Construction Permit

Work Site Location 341 HUDSON ST
Owner in Fee..... BOOTH, ROBERT & SUSAN HATCHCOCK
Address..... 114 N BROADWAY
GLOUCESTER CITY, NJ 08030
Phone.....

Contractor... JORIC INC.
Address..... 807 CHERRY STREET
GLOUCESTER, NJ 08030-
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:

REPL FRONT WALL HEADER,KITCHEN CEILING
HEADER,1SHWR,1SINK,1DISHWASH,1WASH MACH,1 WTR HTR,HOT WTR BLR,BCKFLW

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: $1,400

Michael DeSalvia Sr 8-27-15
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	$65
Electrical	0
Plumbing	377
Fire Protection	0
Elevator Devices	0
Mechanical	0
State Training Fee	3
Certificate of Occupancy	0
Other	0
Total	$445

Check#/Cash 3523
Paid 445
Collected By

Total Administrative Fee: $0

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

Gloucester City
BUILDING SUBCODE
TECHNICAL SECTION

Date Receiv 8/24/2015
Control # 92014869

Date Issued / /
Permit # 20150035 A

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

Block/Lot 36/15.01

Work Site Location 341 HUDSON ST

Owner in Fee: BOOTH, ROBERT & SUSAN HATCHCOCK

Tel. _____ e-mail _____

Address: 114 N BROADWAY (street) GLOUCESTER CITY, NJ 08030 (municipality, zip code)

Contractor: Homeowner Tel. _____

Address: _____ e-mail _____

Contractor License No. _____ 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 Required
[ ] Elec. [ ] Plumb [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 10/15/15
Approved by: JJ

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Inital
Footing				
Footing Bonding				
Foundation				
Slab				
Frame		10/26/15		JJ
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 $ 600
3. Total (1+2) $ 600

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

REPL FRONT WALL HEADER,KITCHEN CEILING HEADER,1SHWR,1SINK,1DISHWASH,1WASH MACH,1 WTR HTR,HOT WTR BLR,BCKFLW

TYPE OF WORK

- [ ] New Building
- [ ] Addition
- [x] Rehabilitation
- [ ] Roofing
- [ ] 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)

	66
Administrative Surcharge $	0
Minimum Fee $	
State Permit Surcharge Fee $	
TOTAL FEE $	66

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

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

Gloucester City
PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 8/24/2015
Control # 92014869

Date Issued
Permit # 20150035 A

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

Block/Lot 36/15.01
Work Site Location 341 HUDSON ST

Owner in Fee: BOOTH, ROBERT & SUSAN HATCHCOCK
Tel. _____ e-mail _____
Address: 114 N BROADWAY (Street) GLOUCESTER CITY, NJ 08030 (municipality) (Zip code)
Contractor: Homeowner Tel. _____
Address: _____ e-mail _____
Contractor License No. _____ Exp. Date _____
Federal Emp. ID No. _____ FAX _____

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 $ 800

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: 8/24/15
Approved by: [signature]

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 _____				

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'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	
1	Shower	19
	Floor Drain	
1	Sink	19
1	Dishwasher	19
	Drinking Fountain	
	Hose Bibb	
1	Water Heater	19
1	Washing Machine	19
	Fuel Oil Piping	
	Gas Piping	
	LP Gas Tank	
	Steam Boiler	
1	Hot WaterBoiler	94
	Sewer Pump	
	Interceptor/Separator	
1	Backflow Preventer	94
	Grease Trap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	OtherREPL WTR LINES	94
	Other_____	

Administrative Surcharge $	0
Minimum Fee $	
State Permit Surcharge Fee $	
Total Fees $	377

Description of Work: REPL FRONT WALL HEADER,KITCHEN CEILING HEADER,1SHWR,1SINK,1DISHWASH,1WASH MACH,1 WTR HTR,HOT WTR BLR,BCKFLW PREVTR,REPL WTR LN

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

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

Gloucester City
700 Somerset St
Gloucester City, NJ 08030
(856)456-7689 FAX *(856)456-0289*

Permit No. **20150035 A**
Control No. **92014869**
Block/Lot 36/15.01
Date 7/11/18

Certificate of Approval

IDENTIFICATION

Block/Lot 36/15.01
Work Site Location 341 HUDSON ST

Owner in Fee/Occupant BOOTH, ROBERT & SUSAN HATCHCOCK
Address 114 N BROADWAY
GLOUCESTER CITY, NJ 08030

Telephone
Contractor JORIC INC.
Address 807 CHERRY STREET
GLOUCESTER, NJ 08030-

Telephone .AX
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:

REPL FRONT WALL HEADER,KITCHEN CEILING HEADER,1SHWR,1SINK,1DISHWASH,1WASH MACH,1

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Michael DePalma Sr., Construction Official

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

Permit Fee $ 445
Paid [ ] Check No. 3523
Collected by: JH