

CONSTRUCTION CODE DEPT.
BOROUGH OF CLEMENTON
101 GIBBSBORO RD.

Date Issued 10/19/15
Control #
Permit # 15140

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 90 Lot 21 Qual

Work Site Location 40 TROUT AVE.

Contractor BROOKSTONE MGMT
Address 1970 SWATHMORE AVE

Owner in Fee FEDERAL HOME LOAN MTG
Address 1470 SWATHMORE AVE

LAKEWOOD, NJ 08701-

Telephone (856) 229-4802

Telephone (732) 534-7192

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 13-0542650

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

PAYMENTS (Office Use Only)
Building 60
Electrical 0
Plumbing 0
Fire Protection 0
Mechanical 0
Elevator Devices 0
Other

DCA State Permit Fee 11
Cert. of Occupancy 0
Other
Total 71

Check No.

Cash X

Collected By GR

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 \$ 6,000

10/19/15
Date

Construction Official

CONSTRUCTION CODE DEPT.
BOROUGH OF CLEMENTON
101 GIBBSBORO RD.

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 10/08/15
Date Issued 10/19/15
Control #
Permit # 15140

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

Block 90 Lot 21 Qual
Work Site Location 40 TROUT AVE.

Owner in Fee FEDERAL HOME LOAN MTG
Address 1470 SWATHMORE AVE

LAKEWOOD, NJ 08701-

Tel. (856) 229-4802

Contractor BROOKSTONE MGMT

Address 1970 SWATHMORE AVE

LAKEWOOD, NJ 08701-

Tel. (732) 534-7192 Fax () -

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 13-0542650

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

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Date Initial	Type:	Failure	Approval	Initial
☐ No Plans Req		Footing			
☐ All		Footing Bond			
☐ Foot/Found		Foundation			
☐ Struct/Frame		Slab			
☐ Exterior		Frame			
☐ Interior		Truss/Brac			
Joint Plan Review Required:		BarrierFree			
☐ Elect	☐ Plumb	☐ Fire			
SUBCODE APPR - PERM		☐ Elev			
Date:		Finishes-Fin			
Approved By:		Energy			
SUBCODE APPR - CERTIF		Mechanical			
☐ CO ☐ CCO ☐ CA		TCO			
Date:		Other			
Approved By:		Final			
		BarrierFree			

B. BUILDING CHARACTERISTICS

Use Group	Present R-5	Proposed R-5	Est. Cost of Bldg. Work:
Constr. Class Present	Proposed		1. New Bldg. \$ 0
No. of Stories	0		2. Alteration \$ 6,000
Height of Structure	0	Ft.	3. Total (1+2) \$ 6,000
Area Largest Floor	0	Sq. Ft.	Industrialized Building:
New Bldg. Area/All Floors	0	Sq. Ft.	☐ State Approved
Volume of New Structure	0	Cu. Ft.	☐ HUD
Total Land Area Disturbed	0	Sq. Ft.	

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	\$ 0
☐ Addition	0
☒ Rehabilitation	0
☒ Roofing	60
☐ Siding	0
☐ Fence	0
☐ Sign	0
☐ Pool - Above Ground	0
☐ Pool - In Ground	0
☐ Asbestos Abatement Subchapter 8	0
☐ Lead Haz. Abatement NJAC 5:17	0
☐ Other	0
Other	0
Other	0
☐ Demolition	0

Paid ☒ Check #	Cash	Administrative Surcharge	\$ 0
Collected by: GR		Minimum Fee	\$ 0
		TOTAL FEE	\$ 60
		State Permit Surcharge Fee	\$ 11

CONSTRUCTION CODE DEPT.
BOROUGH OF CLEMENTON
101 GIBBSBORO RD.

Date Issued 04/11/16
Control #
Permit # 160065

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 90 Lot 21 Qual
Work Site Location 40 TROUT AVE.
Owner in Fee FEDERAL HOME LOAN MTG
Address 1470 SWATHMORE AVE
LAKEWOOD, NJ 08701-
Telephone (856) 229-4802

Contractor HAHN, DON
Address 72 SPRINGHILL DR
LAUREL SPRINGS, NJ
Telephone () 783-9128
Lic. No. or Bldrs. Reg. No. 4546
Federal Emp. No. 22-3295882

Is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
☒ ELECTRICAL ☐ FIRE PROTECTION ☐ LEAD HAZARD ABATEMENT
☐ ELEVATOR DEVICES ☐ MECHANICAL ☐ DEMOLITION
☐ OTHER

DESCRIPTION OF WORK:

200 AMP SERVICE

PAYMENTS (Office Use Only)
Building 0
Electrical 60
Plumbing 0
Fire Protection 0
Mechanical 0
Elevator Devices 0
Other
DCA State Permit Fee 2
Cert. of Occupancy 0
Other
Total 62
Check No. 124
Cash
Collected By KB

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 \$ 1,000

Construction Official
Date 04/11/16

CONSTRUCTION CODE DEPT.
BOROUGH OF CLEMENTON
101 GIBBSBORO RD.

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 04/04/16
Date Issued 04/11/16
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A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING

CONTRACTORS. NOTIFY THIS OFFICE. DO UTILITY DIG NO: 1-800-272-1000

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B. ELECTRICAL CHARACTERISTICS

Use Group -Present R-5 Proposed R-5
[] Pole/Pad # [] Temporary [] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work \$ 1,000

JOB SUMMARY (Office Use Only) INSPECTIONS Dates (Month/Day)

PLAN REVIEW
[] No Plans Required
[] Partial -Underslab Util Appr BarrierFr
Date: Appr by:
[] Elect Plans Approved
Date: Appr by:
Joint Plan Review Required:
[] Build [] Plumb [] Fire
SUBCODE APPR - PERM [] Elev
Date: Appr by:
SUBCODE APPR - CERTIF
[] CO [] CCO [] CA
Date: Appr by:
Final Cut-in-Card Date Issued
AnnPoolIns
Date of Gnd/Bond 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.

Signature/Contractor Seal

[] Licensed Elect Contr [] Certif Landscape Irrig Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	0
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
1	200	AMP Service	58
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0
		Other	0

Administrative Surcharge \$ 0
Paid [X] Check # 124 Minimum Fee \$ 2
Collected by: KB TOTAL FEE \$ 60
DCA State Permit Fee \$ 2

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☐ OTHER

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Estimated Cost of Work \$ 1,000

Construction Official

04/11/16
Date

PAYMENTS (Office Use Only)
Building 0
Electrical 60
Plumbing 0
Fire Protection 0
Mechanical 0
Elevator Devices 0
Other
DCA State Permit Fee 2
Cert. of Occupancy 0
Other
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Check No. 124
Cash
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Estimated Cost of Electrical Work \$ 1,000

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PLAN REVIEW
[] No Plans Required
[] Partial -Underslab Util Appr BarrierFr
Date: Appr by: Trench
[] Elect Plans Approved Temp Serv
Date: Appr by: Const Serv
Joint Plan Review Required: TCO
[] Build [] Plumb [] Fire
SUBCODE APPR - PERM [] Elev
Date: Appr by: Final
SUBCODE APPR - CERTIF BarrierFr
[] CO [] CCO [] CA Temp. Cut-in-Card Date Issued
Date: Appr by: Final Cut-in-Card Date Issued
AnnPoolIns
Date of Gnd/Bond Certification

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0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	0
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0		KW Elect Range/Receptacle	0
0		KW Oven/Surface Unit	0
0		KW Elect Water Heater	0
0		KW Elect Dryer/Receptacle	0
0		KW Dishwasher	0
0		HP Garbage Disposal	0
0		KW Central A/C Unit	0
0		HP/KW Space Heater/Air Handler	0
0		Baseboard Heat	0
0		HP Motors 1/+ HP	0
0		KW Transformer/Generator	0
1	200	AMP Service	58
0		AMP Subpanels	0
0		AMP Motor Control Center	0
0		KW Elect Sign/Outline Light	0
0		Other	0
0		Other	0
0		Other	0

Administrative Surcharge \$
Paid [X] Check # 124 Minimum Fee \$
Collected by: KB TOTAL FEE \$
DCA State Permit Fee \$