

Lorraine Baker

From: Breean Stumpf <opra+request-26535-3a241071@requests.opramachine.com>
Sent: Tuesday, October 19, 2021 5:41 PM
To: GT Clerk
Subject: OPRA request - OPRA/OPEN & CLOSE PERMITS - 504 Cecelia Dr, Blackwood, NJ 08012

Dear Gloucester Township,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested: OPRA/OPEN & CLOSE PERMITS - 504 Cecelia Dr, Blackwood, NJ 08012

Yours respectfully,

Breean Stumpf

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-26535-3a241071@requests.opramachine.com

Is GTclerk@glotwp.com the wrong address for OPRA requests to Gloucester Township? If so, please contact us using this form:

https://opramachine.com/change_request/new?body=gloucester_township

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:

<https://opramachine.com/help/officers>

View this OPRA request & responses online:

https://opramachine.com/request/opraopen_close_permits_504_cecel

Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.

Received 10/20/21



Interoffice

MEMORANDUM

To: Nancy Power, Township Clerk

From: Cookie Pessagno

Re: Records Request

Date: Monday October 25, 2021

Dear Nancy,

This letter is regarding the records request from Breean Stumpf for information on: **Block: 11905, Lot: 20. Attached please find all permits for the address 504 Cecelia Dr all permits are closed.**

Thank you,

Cookie Pessagno

Gloucester Township

1261 Chews Landing Rd

Laurel Springs, NJ 08021

(856)374-3500 FAX (856)232-6229

Permit No. **19981648**Control No. **17043**Parcel(Block/Lot). **11905/20**Applic/Issued. **10/20/98 / 10/20/98****Construction Permit**Work Site Location **504 CECELIA AVENUE**

Contractor...

Owner in Fee..... **FANELLE**

Address.....

Address.....

Phone.....

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:

PAYMENTS * (Office Use Only)

Building	<u>\$0</u>
Electrical	<u>0</u>
Plumbing	<u>66</u>
Fire Protection	<u>0</u>
Elevator Devices.....	<u>0</u>
Mechanical.....	<u>0</u>
State Training Fee	<u>1</u>
Certificate of Occupancy	<u>0</u>
Other	<u>0</u>
Total	<u>\$67</u>

Check#/Cash.....	
Paid	<u>\$67</u>
Collected By	

Total Administrative Fee: \$0

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**

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*

History for Permit

504 CECELIA AVENUE

19981648

Unit

Block/Lot 11905/20

Owner FANELLE

Application 10/20/98

Permit 10/20/98

Inspections and Reviews

----- Dates -----

<u>Done</u>	<u>Sched</u>	<u>Permit No.</u>	<u>Type</u>	<u>Subcode</u>	<u>P/F</u>	<u>By</u>	<u>Comment</u>
10/21/98	10/21/98	19981648	SEWE	PLUM	F	DB	
10/22/98	10/22/98	19981648	WATE	PLUM	P	DB	
10/22/98	10/22/98	19981648	SEWE	PLUM	P	DB	

Gloucester Township

1261 Chews Landing Rd

Laurel Springs, NJ 08021

(856)374-3500 FAX (856)232-6229

10/21/21



Gloucester Township PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Control # 17043
Date Issued
Permit # 19981648

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

Block/Lot 11905/20
Work Site Location 504 CECELIA AVENUE
Owner in Fee: FANELLE
Tel. _____ e-mail _____
Address: _____ Street _____ Municipality _____ Zip code _____
Contractor: _____ Tel. _____
Address: _____ e-mail _____
Contractor License No. 9906 Exp. Date 3/31/19 FAX _____
Federal Emp. ID No. _____
B. PLUMBING CHARACTERISTICS
Use Group Present _____ Proposed R-3
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Septic _____
Est. Cost of Plumbing Work \$ 1400

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
[] No Plans Required	Type:	Failure	Approval	Initial
Joint Plan Review Required:	Slab			
[] Building [] Plumbing	Rough			
[] Fire [] Elevator	Water			
[] Plumbing Plans Approved	Sewer			
Date: _____	Fixtures			
Approved by: _____	Gas Equipment			
SUBCODE APPROVAL	Gas Piping			
[] CO [] CCO [] CA	LP Gas Tank			
Date: _____	Fuel Oil Piping			
Approved by: _____	Solar			
	TCO			

C. CERTIFICATION IN UEU OF OATH

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

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

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

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

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

Description of Work:

Gloucester Township

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

Permit No. **19981648**
Control No. **17043**
Block/Lot **11905/20**
Date **10/26/98**

Certificate of Approval

IDENTIFICATION

Block/Lot 11905/20
Work Site Location 504 CECELIA AVENUE
Owner in Fee/Occupant FANELLE
Address _____
Telephone _____
Contractor _____
Address _____
Telephone _____ FAX _____
Lic. No. or Bldrs. Reg. No. None
Federal Emp. No. _____

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

CERTIFICATE OF OCCUPANCY

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

CERTIFICATE OF APPROVAL

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

TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

If this is a temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____ or the owner will be subject to 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 _____

(Bernard Shepherd, Construction Official)

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

Gloucester Township

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

Permit No. **20151049**
Control No. **64557**
Parcel(Block/Lot). **11905/20**
Applic/Issued. **5/28/15 / 6/23/15**

Construction Permit

Work Site Location **504 CECELIA DR**
Owner in Fee..... **FANELLE ROBERT D & CAROL**
Address..... **504 CECELIA DRIVE**
BLACKWOOD NJ 08012
Phone..... **(856)228-8268**

Contractor... **PSE&G**
Address..... **300 Connecticut Drive**
Burlington Twp., NJ 08016
Phone..... **(609)239-2433**
Lic No.....
Fed Emp No. **221-212-800**

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:

Gas furnace replace and AC

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: **\$7,600**

PAYMENTS * (Office Use Only)

Building	<u>\$0</u>
Electrical	<u>65</u>
Plumbing	<u>65</u>
Fire Protection	<u>0</u>
Elevator Devices.....	<u>0</u>
Mechanical.....	<u>0</u>
State Training Fee	<u>14</u>
Certificate of Occupancy	<u>0</u>
Other	<u>0</u>
Total	<u>\$144</u>

Check#/Cash.....	<u>8953</u>
Paid	<u>\$144</u>
Collected By	<u>RR</u>

Total Administrative Fee: \$0

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*

History for Permit

504 CECELIA DR

20151049

Unit

Block/Lot 11905/20

Owner FANELLE ROBERT D & CAROL

504 CECELIA DRIVE

BLACKWOOD NJ 08012

Application 5/28/15

Permit 6/23/15

Gas furnace replace and AC

Inspections and Reviews

----- Dates -----

<u>Done</u>	<u>Sched</u>	<u>Permit No.</u>	<u>Type</u>	<u>Subcode</u>	<u>P/F</u>	<u>By</u>	<u>Comment</u>
	7/30/15	20151049	FIN	PLUM	X	WS	Final re-inspect
	Result	Rescheduled for 8/13/14, homeowner forgot that he has a Dr's Appt.					
7/21/15	7/21/15	20151049	FIN	PLUM	F	WS	Final
7/22/15	7/21/15	20151049	FIN	ELEC	P	JC	Final
8/18/15	8/18/15	20151049	FIN	PLUM	P	WS	final, wants Morning before 12 P.M.

Gloucester Township

1261 Chews Landing Rd

Laurel Springs, NJ 08021

(856)374-3500 FAX (856)232-6229

10/21/21



Gloucester Township ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block/Lot 11905/20

Work Site Location 504 CECELIA DR

Owner in Fee: FANELLE ROBERT D & CAROL

Tel. (856)228-8268 e-mail _____

Address: 504 CECELIA DRIVE BLACKWOOD NJ 08012
Street Municipality zip code

Contractor: PR SANDERS INC. dba PR SANDERS ELEC Tel. (856)429-3086

Address: 100 PARK DRIVE, VOORHEES, NJ 08043 e-mail permits@prsanders.com

Contractor License No. 4701B- / / Exp. Date _____

Federal Emp. ID No. 222769644 FAX: (856)429-6043

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed R-5
☐ Pole/pad # _____ ☐ Temporary Service ☐ Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 100 Descript: Gas furnace replace and AC

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
[] No Plans Required	Date Initial	Type:	Failure	Approval	Initial
Joint Plan Review Required:					
[] Building [] Plumbing		Rough			
[] Fire [] Elevator		Barrier-Free			
[] Elec. Plans Approved		Trench			
Date: _____		Temp. Serv.			
Approved by: _____		Const. Serv.			
		TCO			
		Other			
		Service			
		Final			
		Barrier-Free			
SUBCODE APPROVAL					
[] CO [] CCO [] CA		Temp. Cut-in-Card Date Issued			
		Final Cut-in-Card Date Issued			
		Annual Pool Inspection			
Date: _____		Date of Grounding and Bonding			
Approved by: _____		Certification			

U.C.C. #120 (rev. 07/05) Applicant When submitting this form to your Local construction code Enforcement Office please provide one original plus three photocopies internet version

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

Lighting Fixtures _____
Receptacles _____
Switches _____
Detectors _____
Light Pole _____
Motors—Fract. H _____
Emergency & Exit Lights _____
Communications Paints _____
Alarm Devices/F.A.C. Panel _____

TOTAL NUMBERS

Pool Permit/with UW Lights _____
Storable Pool/Spa/Hot Tub _____
KW Elec. Range/Receptacle _____
KW Oven/Surface Unit _____
KW Elec. Water Heater _____
KW Elec. Dryer/Receptacle _____
KW Dishwasher _____
HP Garbage Disposal _____
KW Central AC Unit 4
HP/KW Space Heater/Air Handler _____
KW Baseboard Heat _____
HP Motors 11+ HP _____
KW Transformer/Generator _____
AMP Service _____
AMP Subpanels _____
AMP Motor Control Center _____
KW Elec. Sign/Outline Light _____

\$

FEE (Office Use Only)

Administrative Surcharge \$ 0
Minimum Fee \$ 65
State Permit Surcharge Fee \$ 65
TOTAL FEE \$



Gloucester Township PLUMBING SUBCODE TECHNICAL SECTION



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

Block/Lot 11905/20
Work Site Location 504 CECELIA DR

Owner in Fee: FANELLE ROBERT D & CAROL

Tel. (856)228-8268 e-mail

Address: 504 CECELIA DRIVE BLACKWOOD NJ 08012
Street Municipality Zip code

Contractor: PSE&G Tel. (609)239-2433

Address: 300 Connecticut Drive, Burlington Twp., NJ 08011 e-mail

Contractor License No. Exp. Date

Federal Emp. ID No. 221-212-800 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 \$ 7500

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
[] No Plans Required			Type:	Failure Approval Initial
Joint Plan Review Required:				
[] Building [] Plumbing			Slab	
[] Fire [] Elevator			Rough	
[] Plumbing Plans Approved			Water	
			Sewer	
			Fixtures	
			Gas Equipment	
			Gas Piping	
			LP Gas Tank	
			Fuel Oil Piping	
			Solar	
			TCO	
Date: <u></u>				
Approved by: <u></u>				
SUBCODE APPROVAL				
[] CO [] CCO [] CA				
Date: <u></u>				
Approved by: <u></u>				

C. CERTIFICATION IN UEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[] Licensed Plumbing Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.) FIXTURE/EQUIPMENT

Water Closet	
Urinal/Bidet	
Bath Tub	
Lavatory	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Hose Bibb	
Water Heater	
Washing Machine	
Fuel Oil Piping	
Gas Piping	
LP Gas Tank	
Steam Boiler	
Hot WaterBoiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Grease Trap	
Sewer Connection	
Water Service Connection	
Stacks	
Other A/C	1
Other condensate	

Administrative Surcharge \$	0
Minimum Fee \$	65
State Permit Surcharge Fee \$	
Total Fees \$	65

Description of Work:
Gas furnace replace and AC

5/28/2015
64557
6/23/2015
20151049

Date Received
Control #
Date Issued
Permit #

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

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

Gloucester Township

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

Permit No. **20151049**
Control No. **64557**
Block/Lot **11905/20**
Date **10/07/15**

Certificate of Approval

IDENTIFICATION

Block/Lot 11905/20
Work Site Location 504 CECELIA DR
Owner in Fee/Occupant FANELLE ROBERT D & CAROL
Address 504 CECELIA DRIVE
BLACKWOOD NJ 08012
Telephone (856)228-8268
Contractor PSE&G
Address 300 Connecticut Drive
Burlington Twp., NJ 08016
Telephone (609)239-2433 FAX
Lic. No. or Bldrs. Reg. No. None
Federal Emp. No. 221-212-800

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: _____

Home Warranty No. _____
Type of Warranty Plan: [] State [] Private
R-5
Use Group _____
Maximum Live Load _____
Construction Classification _____
Maximum Occupancy Load _____
Description of Work/Use: _____

Gas furnace replace and AC

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 _____

144

Permit Fee \$

8953

Paid [] Check No.

RR

Collected by:

CBernard Shepherd, Construction Official

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

Gloucester Township

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

Permit No. **20151049 A**
Control No. **64558**
Parcel(Block/Lot). **11905/20**
Applic/Issued. **5/28/15 / 6/23/15**

Construction Permit

Work Site Location 504 CECELIA DR
Owner in Fee..... FANELLE ROBERT D & CAROL
Address..... 504 CECELIA DRIVE
BLACKWOOD NJ 08012
Phone..... (856)228-8268

Contractor.... PSE&G
Address..... 300 Connecticut Drive
Burlington Twp., NJ 08016
Phone..... (609)239-2433
Lic No.....
Fed Emp No. 221-212-800

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:

wiring and connections for replacement AC system

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

Estimated Cost of Work: \$300

PAYMENTS * (Office Use Only)

Building	<u>\$0</u>
Electrical	<u>65</u>
Plumbing	<u>0</u>
Fire Protection	<u>0</u>
Elevator Devices.....	<u>0</u>
Mechanical.....	<u>0</u>
State Training Fee	<u>0</u>
Certificate of Occupancy	<u>0</u>
Other	<u>0</u>
Total	<u>\$0</u>

Exempt Permit
Part/All Fees Waived

Check#/Cash.....

Paid

Collected By RR

Total Administrative Fee: \$0

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*



Gloucester Township ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block/Lot 11905/20

Work Site Location 504 CECELIA DR

Owner in Fee: FANELLE ROBERT D & CAROL

Tel. (856)228-8258

e-mail

Address: 504 CECELIA DRIVE BLACKWOOD NJ 08012

Street

Zip code

Contractor: PSE&G

Tel. (609)239-2433

Address: 300 Connecticut Drive, Burlington Twp., NJ 08011

e-mail

Contractor License No.

Exp. Date

Federal Emp. ID No. 221-212-800

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 \$ 300

Descript: wiring and connections for replacement A

C system

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

INSPECTIONS

Dates (Month/Day)

Type:

Rough

Barrier-Free

Joint Plan Review Required:

[] Building [] Plumbing

[] Fire [] Elevator

[] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date:

Approved by:

Date of Grounding and Bonding

Certification

U.C.C. F120 (rev. 07/10) Applicant: When submitting this form to your local construction code Enforcement Office please provide one original plus three photocopies

Date Received 5/28/2015

Control # 64558

Date Issued 6/23/2015

Permit # 20151049 A

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 Applic

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Pole

Motors—Fract. H

Emergency & Exit Lights

Communications Paints

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights

Storable Pool/Spa/Hot Tub

KW Elec. Range/Receptacle

KW Oven/Surface Unit

KW Elec. Water Heater

KW Elec. Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central AC Unit

HP/KW Space Heater/Air Handler

KW Baseboard Heat

HP Motors 11+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$

0

65

65

65

Gloucester Township

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

Permit No. **20151049 A**
Control No. **64558**
Block/Lot **11905/20**
Date **10/21/21**

Certificate of Approval

IDENTIFICATION

Block/Lot 11905/20
Work Site Location 504 CECELIA DR
Owner in Fee/Occupant FANELLE ROBERT D & CAROL
Address 504 CECELIA DRIVE
BLACKWOOD NJ 08012
Telephone (856)228-8268
Contractor PSE&G
Address 300 Connecticut Drive
Burlington Twp., NJ 08016
Telephone (609)239-2433 FAX
Lic. No. or Bldrs. Reg. No. None
Federal Emp. No. 221-212-800

Home Warranty No. _____
Type of Warranty Plan: [] State [] Private
R-5
Use Group _____
Maximum Live Load _____
Construction Classification _____
Maximum Occupancy Load _____
Description of Work/Use: _____

wiring and connections for replacement AC system

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 _____

Permit Fee \$ 0
Paid [] Check No. RR
Collected by: _____

Bernard Shepherd, Construction Official