



Pemberton Township
500 Pemberton-Browns Mills Road
Pemberton, NJ 08068

Chase

Certificate
Construction Code Division
(Certificate of Approval)

Date Issued 8/5/2011
Control Number 907590
Permit Number 20110436
Permit Issue Date 6/10/2011

Certificate Number 20110436

Identification

Block: 623 Lot: 11 Qual: _____

Work Site Location: 316 IRIQUOIS TR BROWNS MILLS, NJ

Owner in Fee: GRIMM

Owner Address: 316 IRIQUOIS TR BROWNS MILLS NJ 08015

Telephone: _____

Contractor _____

Address _____

Telephone: _____ Fax: _____

License Number or Builders Registration Number: _____

Federal Emp. Number: _____

☐ **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.

☐ **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 Compliance**

The following conditions must be met no later than _____
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: _____

Conditions to be met:

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Construction Classification: _____ Use Group: R-5

Maximum Occupancy Load: 0 Maximum Live Load: 0

Description of Work/Use:
DECK REPLACEMENT 10 X 20

Certificate Comments:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ **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 _____

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: _____
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: _____

Conditions to be met:

Construction Official _____

U.C.C. F260 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____

Date Printed: 5/26/2022

Page 1



CONSTRUCTION PERMIT

Date Issued 6/10/2011
Control # 907590
Permit # 20110436

IDENTIFICATION Block: 623 Lot: 11 Qualifier _____
Work Site Location: 316 IRIQUOIS TR BROWNS MILLS, NJ Contractor SUNDANCE MGMT
Address 532 OLD MARLTON PIKE MARLTON NJ 08053
Owner in Fee GRIMM
316 IRIQUOIS TR BROWNS MILLS NJ 08015 Telephone: (856) 751-6535
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. 20-2172055

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

DECK REPLACEMENT 10 X 20

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 \$9,050

PAYMENTS (Office Use Only)

Building	\$150
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$15
CO Fee	
Other	\$38
Total	\$203
Check No.	
Cash	\$203
Credit	\$0
Collected By	

Construction Official _____

Date _____

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



BUILDING SUBCODE TECHNICAL SECTION



Date Received 5/31/2011
Control # 907590
Date Issued 6/10/2011
Permit # 20110436

A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000
Block 623 Lot 11 Qualification Code _____
Work Site Location: 316 IRIQUOIS TR BROWNS MILLS, NJ

Owner in Fee: GRIMM
Address 316 IRIQUOIS TR BROWNS MILLS NJ 08015
Tel. _____ Email _____
Contractor: SUNDANCE MGMT
Address 532 OLD MARLTON PIKE MARLTON NJ 08053
Tel. _____ Email _____
Tel. (856) 751-6535 Fax. _____
Contractor License No. or, if new home, Bldrs Reg. No. _____ Exp. _____
Home improvement Contractor Registration No. or Exemption Reason(is applicable): _____
Federal Emp. ID No. 20-2172055

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
☐ No Plan Required _____
☐ All _____
☐ Footing/Foundation _____
☐ Struct/Framework _____
☐ Exterior _____
☐ Interior _____
Joint Plan Review Required
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator
SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____
SUBCODE APPROVAL for CERTIFICATE
☐ CO ☐ CCO ☐ CA
Date: _____
Approved by: _____

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

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

Print Name Here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

DECK REPLACEMENT 10 X 20

TYPE OF WORK

- ☐ New Building
☐ Addition
☒ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6')
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Retaining Wall _____ Sq. Ft.
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz Abatement NJAC 5:17
☐ Radon Remediation
☐ Other _____
☐ Demolition

FEE (Office Use Only)

_____ \$217

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed _____ If Industrial Building: _____
Constr. Class Present _____ Proposed _____ State Approved _____
Number of Stories _____ HUD _____
Height of Structure _____ Ft. **Est. Cost of Bldg. Work:**
Area - Largest Floor _____ Sq. Ft. 1. New Bldg. _____
New Bldg. Area / All Floors _____ Sq. Ft. 2. Rehabilitation \$9,050
Volume of New Structure _____ Cu. Ft. 3. Total (1+2) _____
Total Land Area Disturbed _____ Sq. Ft.

Administrative Surcharge _____ \$38
Minimum Fee _____
State Permit Surcharge Fee _____ \$15
TOTAL FEE _____ \$203



Pemberton Township
500 Pemberton-Browns Mills Road
Pemberton, NJ 08068

Inspection Activity Report

Inspections for Permit Number 20110436

Permit Number

20110436

Inspection Date	Inspection Type	Inspector	Subcode	Result	Owner Location	Work Type	Work Description	Inspection Comments
06/15/2011		Building Underwriters	Building	Pass	GRIMM	Alteration		Inspection: Inspection Type 1: Footings Date Requested: 6/15/2011 Date Inspected: 6/15/2011 Requested by: Requested by Phone: Inspector: BUB Entered By: Admin Special Instructions: Comments:
06/22/2011	FRAMING	Building Underwriters	Building	Pass	316 IRIQUOIS TR GRIMM	Alteration		Inspection: Inspection Type 1: Framing Date Requested: 6/22/2011 Date Inspected: 6/22/2011 Requested by: Requested by Phone: Inspector: BUB Entered By: Admin Special Instructions: Comments:
07/15/2011	Final	Building Underwriters	Building	Fail	316 IRIQUOIS TR GRIMM	Alteration		Inspection: Inspection Type 1: Final Date Requested: 7/15/2011 Date Inspected: 7/15/2011 Requested by: Requested by Phone: Inspector: BUB Entered By: Admin Special Instructions: Comments:
					316 IRIQUOIS TR			



Pemberton Township
500 Pemberton-Browns Mills Road
Pemberton, NJ 08068

Inspection Activity Report

Inspections for Permit Number 20110436

20110436

08/05/2011

Final

Building
Underwriters

Building

Pass

GRIMM

Alteration

Inspection: Inspection Type 1: Final
Date Requested: 8/5/2011
Date Inspected: 8/5/2011
Requested by:
Requested by Phone:
Inspector: BUB
Entered By: Admin
Special Instructions:
Comments:

316 IRIQUOIS TR



Pemberton Township
500 Pemberton-Browns Mills Road
Pemberton, NJ 08068

Closed

Certificate
Construction Code Division
(Certificate of Approval)

Date Issued 11/30/2007
Control Number 902318
Permit Number 20071266
Permit Issue Date 11/7/2007
Certificate Number 20071266

Identification

Block: 623 Lot: 11 Qual: _____
Work Site Location: 316 IRIQUOIS TR BROWNS MILLS, NJ

Owner in Fee: GRIMM
Owner Address: 316 IRIQUOIS TR BROWNS MILLS NJ 08015
Telephone: _____

Contractor _____
Address _____
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____
Federal Emp. Number: _____

☐ **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.

☐ **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 Compliance**

The following conditions must be met no later than _____
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: _____
Conditions to be met:

Home Warranty Number: _____
Type of Warranty Plan: ☐ State ☐ Private
Construction Classification: _____ Use Group: R-5
Maximum Occupancy Load: 0 Maximum Live Load: 0
Description of Work/Use: _____
150 AMP SERVICE/2-DEDICATED LINES

Certificate Comments:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ **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 _____

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: _____
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: _____
Conditions to be met:

Construction Official _____ Fee: \$0.00
U.C.C. F260 (rev. 08/05)

Check Number: _____
Collected By: _____

Date Printed: 5/26/2022
Page 1



CONSTRUCTION PERMIT

Date Issued 11/7/2007
Control # 902318
Permit # 20071266

IDENTIFICATION Block: 623 Lot: 11 Qualifier
Work Site Location: 316 IRIQUOIS TR BROWNS MILLS, NJ Contractor GOLD MEDAL HEATING AND COOLING INC
Owner in Fee GRIMM Address 11 COTTERS LANE EAST BRUNSWICK NJ 08816
316 IRIQUOIS TR BROWNS MILLS NJ 08015 Telephone: (732) 246-4714
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. 83-0357354

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

150 AMP SERVICE/2-DEDICATED LINES

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 \$5,900

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$53
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$8
CO Fee	
Other	\$13
Total	\$74
Check No.	
Cash	\$74
Credit	\$0
Collected By	

Construction Official _____

Date _____

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

- ☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:
1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
 2. Foundations and all walls up to grade level prior to back filling.
 3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
 4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

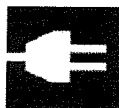
☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received 11/2/2007
Date Issued 11/7/2007
Control # 902318
Permit # 20071266

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

Block 623 Lot 11 Qualification Code _____

Work Site Location: 316 IRIQUOIS TR BROWNS MILLS, NJ

Owner in Fee: GRIMM

Address 316 IRIQUOIS TR BROWNS MILLS NJ 08015

Email _____

Tel. _____

Contractor: GOLD MEDAL HEATING AND COOLING INC

Address 11 COTTERS LANE EAST BRUNSWICK NJ 08816

Email _____

Tel. (732) 246-4714 Fax. (732) 940-0321

Lic No. _____ Exp. Date _____

Home improvement Contractor Registration No. or Exemption Reason(is applicable): _____

Federal Employee No. 83-0357354

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed R-5

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Estimated Cost of Electrical Work \$5,900

JOB SUMMARY (Office Use Only)

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Contr ☐ Certifd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK			FEE (Office Use Only)
150 AMP SERVICE/2-DEDICATED LINES			
QTY.	SIZE	ITEMS	
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
TOTAL NUMBERS			
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
<u>1</u>	<u>150</u>	AMP Service	<u>\$46</u>
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
<u>2</u>	<u>20</u>		<u>\$20</u>
Administrative Surcharge			<u>\$13</u>
Minimum Fee			
State Permit Surcharge Fee			<u>\$8</u>
TOTAL FEE			<u>\$74</u>



Pemberton Township
500 Pemberton-Browns Mills Road
Pemberton, NJ 08068

Inspection Activity Report

Inspections for Permit Number 20071266

Permit Number

20071266

Inspection Date	Inspection Type	Inspector	Subcode	Result	Owner		Work Type	Work Description	Inspection Comments
					Location				
11/30/2007	Final	Electrical Underwriters	Electrical	Pass	GRIMM		Alteration		Inspection: Inspection Type 1: Final Date Requested: 11/30/2007 Date Inspected: 11/30/2007 Requested by: Requested by Phone: Inspector: BUE Entered By: Admin Special Instructions: Comments:
316 IRIQUOIS TR									



Pemberton Township
500 Pemberton-Browns Mills Road
Pemberton, NJ 08068

Closed
Certificate
Construction Code Division
(Certificate of Approval)

Date Issued 4/30/1999
Control Number 888094
Permit Number 19990184
Permit Issue Date 4/7/1999
Certificate Number 19990184

Identification

Block: 623 Lot: 11 Qual: _____
Work Site Location: 316 IRIQUOIS TRAIL PEMBERTON, NJ

Owner in Fee: CHAPMAN DEBORAH
Owner Address: 316 IRIQUOIS TRAIL PEMBERTON NJ 08015
Telephone: [REDACTED]

Contractor _____
Address _____
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____
Federal Emp. Number: _____

☐ **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.

☐ **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 Compliance**

The following conditions must be met no later than _____
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: _____
Conditions to be met:

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Construction Classification: _____ Use Group: M

Maximum Occupancy Load: 0 Maximum Live Load: 0

Description of Work/Use:
SIDING

Certificate Comments:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ **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 _____

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: _____
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: _____
Conditions to be met:

Construction Official _____ Fee: \$0.00
U.C.C. F260 (rev. 08/05)

Check Number: _____
Collected By: _____

Date Printed: 5/26/2022
Page 1



CONSTRUCTION PERMIT

Date Issued 4/7/1999
Control # 888094
Permit # 19990184

IDENTIFICATION Block: 623 Lot: 11 Qualifier _____
Work Site Location: 316 IRIQUOIS TRAIL PEMBERTON, NJ Contractor CHAPMAN DEBORAH
Address 316 IRIQUOIS TRAIL PEMBERTON NJ 08015
Owner in Fee CHAPMAN DEBORAH
316 IRIQUOIS TRAIL PEMBERTON NJ 08015 Telephone: _____
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

SIDING

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 \$4,000

Construction Official _____

Date _____

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$20
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$3
CO Fee	
Other	\$0
Total	\$23
Check No.	
Cash	\$23
Credit	\$0
Collected By	RA

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

- ☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:
1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
 2. Foundations and all walls up to grade level prior to back filling.
 3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
 4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- ☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

- ☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

- ☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



BUILDING SUBCODE TECHNICAL SECTION



Date Received 4/7/1999
Control # 888094
Date Issued 4/7/1999
Permit # 19990184

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

Block 623 Lot 11 Qualification Code _____

Work Site Location: 316 IRIQUOIS TRAIL PEMBERTON, NJ

Owner in Fee: CHAPMAN DEBORAH

Address 316 IRIQUOIS TRAIL PEMBERTON NJ 08015

Tel. _____ Email _____

Contractor: _____

Address NJ

_____ Email _____

Tel. _____ Fax. _____

Contractor License No. or, if new home, Bldrs Reg. No. _____ Exp. _____

Home improvement Contractor Registration No. or Exemption Reason(is applicable): _____

Federal Emp. ID No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required	_____	_____
☐ All	_____	_____
☐ Footing/Foundation	_____	_____
☐ Struct/Framework	_____	_____
☐ Exterior	_____	_____
☐ Interior	_____	_____
Joint Plan Review Required		
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator	_____	_____
SUBCODE APPROVAL for PERMIT		
Date: _____	_____	
Approved by: _____		
SUBCODE APPROVAL for CERTIFICATE		
☐ CO ☐ CCO ☐ CA	_____	_____
Date: _____	_____	
Approved by: _____		

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

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

Print Name Here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

SIDING

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	_____
☐ Addition	_____
☐ Rehabilitation	_____
☐ Roofing	_____
☐ Siding	_____
☐ Fence _____ Height (exceeds 6')	_____
☐ Sign _____ Sq. Ft.	_____
☐ Pool	_____
☐ Retaining Wall _____ Sq. Ft.	_____
☐ Asbestos Abatement Subchapter 8	_____
☐ Lead Haz Abatement NJAC 5:17	_____
☐ Radon Remediation	_____
☐ Other _____	_____
☐ Demolition	_____

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ If Industrial Building: _____

Constr. Class Present _____ Proposed _____ State Approved _____

Number of Stories _____ HUD _____

Height of Structure _____ Ft. **Est. Cost of Bldg. Work:**

Area - Largest Floor _____ Sq. Ft. 1. New Bldg. _____

New Bldg. Area / All Floors _____ Sq. Ft. 2. Rehabilitation _____

Volume of New Structure _____ Cu. Ft. 3. Total (1+2) _____

Total Land Area Disturbed _____ Sq. Ft.

Administrative Surcharge _____

Minimum Fee _____

State Permit Surcharge Fee \$3

TOTAL FEE \$23



Pemberton Township
500 Pemberton-Browns Mills Road
Pemberton, NJ 08068

Inspection Activity Report

Inspections for Permit Number 19990184

Permit Number

19990184

Inspection Date	Inspection Type	Inspector	Subcode	Result	Owner	Work Type	Work Description	Inspection Comments
					Location			
04/29/1999	Final	MK	Building		CHAPMAN DEBORAH	(None)		Inspection: Inspection Type 1: Final Date Requested: 4/29/1999 Date Inspected: Requested by: Requested by Phone: Inspector: MK Entered By: BLS Special Instructions: Comments:
					316 IRIQUOIS TRAIL			

PEMBERTON TOWNSHIP DEPARTMENT OF INSPECTIONS

No 1493

Application for Construction Permit and Certificate of Occupancy

1. Name of Owner Bernard P. DeZalia Phone [REDACTED]
Address 316 Triguois Tr. Browns Mills, NJ. 08015
2. Owner is represented by Orlent Oil Co. Phone [REDACTED]
Address 1591 Range Rd. Browns Mills, N.J.
3. Construction site location 316 Triguois Trail
4. Block 623 Lot 11 Zone District R. 96
5. Type of Construction — ☒ Check Appropriate Box(es)
☐ Dwelling ☐ Industrial ☐ Swimming Pool
☐ Commercial ☐ Addition ☐ Other
 Plumber Lic. # _____
 Electrician Lic. # _____
6. Describe fully the work to be done
Install wood stove + Masonary Chimney
7. Contractor Same AS Above Phone _____
Address _____
8. The following documents are attached:
☐ Architect's Plans ☒ Owner's Drawings ☐ Board of Health Approval
☐ Plot Plan ☐ Affidavit ☐ Sewer Permit
9. Frontage on proper street NA Set Backs: Front NA
 Rear NA Left Side NA Right Side NA
10. Escrow and Road Opening Information
☐ Road Escrow ☐ Road Improvement Permit ☒ Not Applicable
11. Construction Cost \$ 850.00 Permit Fee \$ 20.00 + \$16

I (the applicant) hereby affix my signature in testimony that all of the above statements are true and that all Construction and Zoning Ordinance Requirements will be met.

4/9/81

Date

Bernard P. DeZalia
Applicant's Signature

NOTICE: This permit authorizes you to do the work strictly in accordance with your application. It does not authorize you to occupy the building. The inspector shall be notified 10 days before final inspection; and at that time he will issue a Certificate of Occupancy if the work complies with the application and only for the use set out in the application. Any code violation requiring a re-inspection will be subject to an additional inspection fee of \$10.00 to be paid before the re-inspection is made.

April 9, 1981
Date

M. Hutchinson
Authorized Signature

PEMBERTON TOWNSHIP
DEPARTMENT OF INSPECTIONS

Rec'd - Mark
4/9/81

8 in flue

chimney block

LOT:
Block:

GRADE

6 in flue pipe ring

clean out door

3 ft
concrete

8 in block

on
concrete
floor

4 in brick
1 inch space

Contractor
Orlando DiCarlo