

CITY OF ELIZABETH

CITY CLERK'S OFFICE

July 1, 2019

opra+request-5449-5d5ac56e@requests.opramachine.com
OPRA Machine
J. Kronenberg

RE: 413 Franklin Street

Dear J. Kronenberg:

Pursuant to your OPRA request dated May 21, 2019, enclosed please find the information that you requested.

Should you have any questions with regards to this matter please feel free to contact me at (908) 820-4133.

Very truly yours,

Joanna Ramirez

Joanna Ramirez
City Clerk's Office

CITY OF ELIZABETH

CITY CLERK'S OFFICE

Invoice

May 30, 2019

opra+request-5449-5d5ac56e@requests.opramachine.com

Opra Machine
J. Kronenberg

<u>DATE</u>	<u>DESCRIPTION</u>	<u>COST PER PAGE</u>	
5/30/2019	OPRA- 413 Franklin Street	25 pgs. @ \$0.05	\$1.25
		TOTAL	\$1.25

* Please make check payable to: City of Elizabeth

* If cash is the way of payment please bring exact change

*Once the City of Elizabeth receives payment the documents will be forwarded to you.

*Mail to: City Clerk's Office
City Hall
50 Winfield Scott Plaza
Elizabeth, New Jersey 07201
Attention: Joanna Ramirez

© Wilson Jones, 1989

DATE 7-1-2019 RECEIPT N U M B E R 663678

RECEIVED FROM Helene Office of Esther Onadia

Address 1710 West County Line Rd. Suite 100 Lakeland, NY

One dollar and 25/100 DOLLARS \$1.25

FOR DEFA - 443 Franklin Street

25 mg @ 0.05

ACCOUNT		HOW PAID	
BEGINNING BALANCE		CASH	
AMOUNT PAID		CHECK	
BALANCE DUE		MONEY ORDER	

Allen J. Kroneberg

1450
(5)

OPRA request - Please provide all open permits and/or violations from the past 10 years.

JK

J Kronenberg <opra+request-5449-5d5ac56e@requests.opramachine.com>

Today, 9:52 AM
Yolanda Roberts

RECEIVED

MAY 21 2019

Reply all |

CITY CLERK'S OFFICE

Dear Elizabeth 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:

Please provide all open permits and/or violations on 413 Franklin Street, from the past 10 years.

Yours faithfully,

J Kronenberg

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:

opra+request-5449-5d5ac56e@requests.opramachine.com

Is yroberts@elizabethnj.org the wrong address for OPRA requests to Elizabeth City? If so, please contact us using this form:

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

https://opramachine.com/request/please_provide_all_open_permits

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

Memorandum



To: Grace Pereira, Senor Clerk Typist
From: Paloma Rodrigues, Secretarial Asst.
Date May 22, 2019
Re: 413 Franklin St

As per your request there are 10 complaints on the above mentioned property.

City of Elizabeth**Service Line****Control Number**

HOU193/2110:24 AM

Date and Time

3/21/2019

10:20

Status

Open

Street #:

413

Street Name:

FRANKLIN ST

Ward:

1

Contact's First Name:

Tenant

Contact's Last Name:**Call taken by:**

E KIRK

Contact's Address:**Department directed to:**

Housing Department

Contact's City, State:

ELIZABETH, NJ

Contact's Zip Code:**Type of Property:**

Residential

Contact's Phone Number:**Means of Contact:**

OFFICE VISIT

Type of Residence:

2 Family

Owner Resides at Location:

YES

Description of Problem or Service Call:

#A21858 No gas service.

Disposition**INSPECTOR ASSIGNED:** EDWARD KIRK**DATE ASSIGNED:**

3/21/2019

COMMENTS: Discontinuation of utilities ie; gas service must hire a licensed plumber to properly install temperature and pressure relief piping to within six (6) inches of floor. Uou have 24 hours to correct this violatin or a summons will be issued. F/U 3/22/19**CLOSED:****DATE CLOSED:****FINAL DECISION****Additional Comments**

5/16/2019

City of Elizabeth**Service Line****Control Number**

HOU186/1511:40 AM

Date and Time

6/15/2018

11:47

Status

Closed

Street #:

413

Street Name:

FRANKLIN ST

Ward:

1

Contact's First Name:

VANESSA

Contact's Last Name:**Call taken by:**

NF

Contact's Address:

APT 1

Department directed to:

Housing Department

Contact's City, State:

ELIZABETH, NJ

Contact's Zip Code:**Type of Property:****Type of Residence:****Contact's Phone Number:****Means of Contact:**

PHONE

Owner Resides at Location:

No

Description of Problem or Service Call:

A21100 LEAKING CEILING IN BATHROOM/ FLOOR IN THE BATHROOM NEEDS TO BE REPAIRED

Disposition**INSPECTOR ASSIGNED:** JOE PEREZ**DATE ASSIGNED:**

6/18/2018

COMMENTS: Evidence of water penetration in ceiling and wall of two (2) bedrooms. Must find source of leak and repair, spackle, sand and paint. Bathroom wall plate switch must have a cover. Bathroom commode not secured to floor. Evidence of mice infestation., must hire a licensed exterminator to perform a comprehensive plan to eliminate same. A copy of contract sent to Division of Housing Att: J Perez. F/U 7/03/18 F/U 9/11/18 @ 11 AM

CLOSED: YES**DATE CLOSED:**

9/13/2018

FINAL DECISION: ABATED**Additional Comments**

90057

City of Elizabeth**Service Line****Control Number**

HOU148/288.087 AM

Date and Time

8/28/2014

8:08

Status

Closed

Street #:

413

Street Name:

FRANKLIN ST

Ward:

1

Contact's First Name:

Marcelina

Contact's Last Name:

Rosa

Call taken by:

JOAN

Contact's Address:**Department directed to:**

Housing Department

Contact's City, State:

ELIZABETH, NJ

Contact's Zip Code:

07206

Type of Property:

Residential

Contact's Phone Number:**Means of Contact:**

PHONE

Type of Residence:

2 Family

Owner Resides at Location:

No

Description of Problem or Service Call:

#A17737 No fire or CO2 alarms , rodents

Disposition**INSPECTOR ASSIGNED:** RODNEY PRICE**DATE ASSIGNED:**

8/27/2014

COMMENTS: No answer on 9/02/14, 9/07/14, 09/09/14**CLOSED:** YES**DATE CLOSED:**

9/9/2014

FINAL DECISION NO RESPONSE**Additional Comments**

9/9/2014

City of Elizabeth**Service Line****Control Number**

NEI1212/12:546 PM

Date and Time

12/12/2012

14:54

Status

Closed

Street #:

413

Street Name:

FRANKLIN ST 1st fl

Ward:

1

Contact's First Name:

Samuel

Contact's Last Name:

Cox

Call taken by:

JOAN N/S

Contact's Address:

1st fl

Department directed to:

Neighborhood Services

Contact's City, State:

ELIZABETH, NJ

Contact's Zip Code:

07206

Type of Property:

Residential

Type of Residence:

2 Family

Contact's Phone Number:**Means of Contact:**

PHONE

Owner Resides at Location:

No

Description of Problem or Service Call:

#A15788 Elec outlets in disrepair

Disposition**INSPECTOR ASSIGNED:** EDWARD KIRK**DATE ASSIGNED:**

12/13/2012

COMMENTS: All egress doors must be air tight to prevent heat loss. Replace door jamb in living room entry door. Must hire a licensed electrician to install GFT switch in bathroom and secure lamp fixture. Replace outlets in same bedroom and kitchen. Must install smoke detectors in dwelling unit. Secure kitchen cabinet counter top. A copy of contract sent to Division of Housing Att: E Kirk. F/U 1/03/13 Sent 2nd notice C & R. Failure to comply will result in a court summons. F/U 1/17/13***FINAL NOTICE F/U 2/4/13**RESENT WRONG ADDRESS 2/14/13 Added install storm gutters on front entry porch, F/U 2/28/13 C & R

CLOSED: YES**DATE CLOSED:**

1/30/2017

FINAL DECISION: NPW**Additional Comments**

City of Elizabeth
Service Line

Control Number

NEI128/2012:11 PM

Date and Time

8/20/2012

12:13

Status

Closed

Street #:

413

Street Name:

FRANKLIN ST 2nd fl

Ward:

1

Contact's First Name:

LATIFA

Contact's Last Name:

GALAWAY

Call taken by:

JE/NS

Contact's Address:

2ND FLOOR TENANT

Department directed to:

Neighborhood Services

Contact's City, State:

ELIZABETH, NJ

Contact's Zip Code:

Type of Property:

Residential

Type of Residence:

Contact's Phone Number:

Means of Contact:

PHONE

Owner Resides at Location:

No

Description of Problem or Service Call:

A15404

BACK PORCH UNSAFE, MOLD IN BATHROOM, FLOOR IN BEDROOM IS SINKING, MICE, ANTS, NO SMOKE OR CARBON DETECTERS.

Disposition

INSPECTOR ASSIGNED: IRIS RAMOS

DATE ASSIGNED:

8/24/2012

COMMENTS:

Bathroom tub has mold that must be removed and recaulked. Holes in walls must be fixed. Hole under bedroom vinyl floor must be repaired and flooring replaced. EOWP in attic ceilings must find source of leak and repair same. All water damaged ceilings and walls must be replaced. Doorbell must be operational and maintained at all times. Evidence of rodent infestation. Must hire a lic. Exterminator to perform a comprehensive plan to eliminate same. A copy of contract sent to Div. Of Housing Att: I Ramos. All electrical outlets must be operational and covered. Fire and carbon monoxide alarms must be provided and maintained at all times. Stairs, back porch and railings must be repaired or replaced. Hallway must be painted. F/U 9/14/12 F/U 10/26. Some repairs made Final notice on balance. F/U 11/28//12 F/U 12/05/12 @ 2:30 pm

CLOSED: YES

DATE CLOSED:

11/6/2012

FINAL DECISION ABATED

Additional Comments

City of Elizabeth**Service Line****Control Number**

NEI128/2010:07 AM

Date and Time

8/20/2012

10:06

Status

Closed

Street #:

413

Street Name:

FRANKLIN ST Apt 1

Ward:

1

Contact's First Name:

CRYSTAL

Contact's Last Name:

COVINGTON

Call taken by:

JE/NS

Contact's Address:

APT-1

Department directed to:

Neighborhood Services

Contact's City, State:

ELIZABETH, NJ

Contact's Zip Code:**Type of Property:**

Apartment Building

Type of Residence:

Other

Contact's Phone Number:**Means of Contact:**

OFFICE VISIT

Owner Resides at Location:

No

Description of Problem or Service Call:

A15401

TENANT STATES MOLD SMELL FROM BASEMENT IS ENTERING HER APARTMENT

Disposition**INSPECTOR ASSIGNED:** IRIS RAMOS**DATE ASSIGNED:**

8/24/2012

COMMENTS:

Wall heat must be repaired or replaced. All light fixtures must have covers. Door bell must be operational at all times. Kitchen counter must be replaced. All mold must be removed from all walls. Evidence of water penetration, source of leak must be found and repaired in basement. Evidence of rodent infestation. A lic. Exterminator must be hired to perform a comprehensive plan to eliminate same. A copy of contract sent to Div. Of Housing Att: I Ramos. Entire unit must be painted. Fire and carbon monoxide alarms must be installed and maintained at all times. Stairs, back porch and railings must be repaired and maintained at all times. F/U 9/14/12. F/U 10/26/12 Rodents resolved balance of repairs sent final notice F/U 11/28/12

CLOSED: YES**DATE CLOSED:**

11/6/2012

FINAL DECISION: ABATED**Additional Comments**

**City of Elizabeth
Service Line**

Control Number
NEI126/261:253 PM

Date and Time
6/26/2012 13:25

Status
Closed

Street #:
413

Street Name:
FRANKLIN ST

Ward:
1

Contact's First Name:
Tenant

Contact's Last Name:

Call taken by:
JE

Contact's Address:

Department directed to: Neighborhood Services

Contact's City, State:
ELIZABETH, NJ

Contact's Zip Code:

Type of Property: Residential

Type of Residence: 2 Family

Contact's Phone Number:

Means of Contact:
OTHER

Owner Resides at Location: YES

Description of Problem or Service Call:

A15183
REAR AND SIDE YARD FULL OF GARBAGE AND DEBRIS
1st fl Baseboard , needs painting Closet door & exterminator.

Disposition

INSPECTOR ASSIGNED: THOMAS NICASTRO

DATE ASSIGNED: 6/26/2012

COMMENTS: 1. All high weeds & grass on and around property must be cut and removed. 2. Area must be cleaned and maintained at all times. 3. Failure to comply will result in legal action taken by the City of Elizabeth including , clean up of property, tax liens assessed against the property to recover all cost incurred and court summons will be issue. 7/10/12 POSTED
First fl. Baseboard must be repaired, Apt must be repainted. ?Closet door must be repaired. A lic exterminator must be hire to treat for pest. Copy of contract sent to Div of Houssing Att: T Nicstro. F/U 7/13/12 Sent2nd notice on repairs. Grass & weeds cut. F/U 7/25/12

CLOSED: YES

DATE CLOSED: 8/9/2012

FINAL DECISION CLOSE

Additional Comments

City of Elizabeth**Service Line****Control Number**

NEI119/1511:51 AM

Date and Time

9/15/2011

11:55

Status

Closed

Street #:

413

Street Name:

FRANKLIN ST 1st fl

Ward:

1

Contact's First Name:

Latia

Contact's Last Name:

Lawsonn

Call taken by:

JB/NS

Contact's Address:

1st fl

Department directed to:

Neighborhood Services

Contact's City, State:

ELIZABETH, NJ

Contact's Zip Code:

07206

Type of Property:

Residential

Type of Residence:

2 Family

Contact's Phone Number:**Means of Contact:**

OTHER

Owner Resides at Location:

No

Description of Problem or Service Call:

#A14319 Multi violation

Disposition**INSPECTOR ASSIGNED:** JENNIFER BOEHM**DATE ASSIGNED:**

9/14/2011

COMMENTS:

All high weeds & grass must be cut & removed. Front porch must be completely replaced (landing, columns etc) Doorbells must be provided for tenant. All exposed wiring on front porch must be removed. Interior hallway must be repainted.

1st fl apt Window throughout must be replaced and provided with screens. Apt must be provided with fire extinguisher. Damage to kitchen cabinets must be repaired. Kitchen ceiling has evidence of water penetration, Source of leak located & repaired. All water damage to ceiling must be repaired & repainted. Bathroom All holes must be closed up. Apt must be repainted. F/U 9/28/11 Sent letter of entry to tenant F/U 10/07/11 Weeds & grass cut. Holes in bathroom covered. 2nd notice sent F/U 10/19/11 Sent final on all F/U 10/31/11

CLOSED: YES**DATE CLOSED:**

12/6/2011

FINAL DECISION: ABATED**Additional Comments**

**City of Elizabeth
Service Line**

Control Number
NEI097/221:490 PM

Date and Time
7/22/2009 13:49

Status
Closed

Street #: 413 **Street Name:** FRANKLIN ST **Ward:** 1

Contact's First Name: J **Contact's Last Name:** Boehm **Call taken by:** JB/NS

Contact's Address:

Department directed to: Neighborhood Services

Contact's City, State: ELIZABETH, NJ **Contact's Zip Code:** **Type of Property:** Residential

Contact's Phone Number: **Means of Contact:** OTHER **Type of Residence:** 2 Family **Owner Resides at Location:** No

Description of Problem or Service Call:

#A11323 High weeds & grass

Disposition

INSPECTOR ASSIGNED: JENNIFER BOEHM **DATE ASSIGNED:** 7/22/2009

COMMENTS: All high weeds & grass on & around the property must be cut & removed. Etc. F/U 8/10/09

CLOSED: YES **DATE CLOSED:** 8/13/2009

FINAL DECISION: SENT TO DPW

Additional Comments

City of Elizabeth
Service Line

Control Number
NEI079/7/2:058 PM

Date and Time
9/7/2007 14:05

Status
Closed

Street #: 413 **Street Name:** FRANKLIN ST **Ward:** 1

Contact's First Name: J **Contact's Last Name:** boehm **Call taken by:** JB/NS

Contact's Address:

Department directed to: Neighborhood Services

Contact's City, State: ELIZABETH, NJ **Contact's Zip Code:** **Type of Property:** Residential

Contact's Phone Number: **Means of Contact:** OTHER **Type of Residence:** 2 Family

Owner Resides at Location: YES

Description of Problem or Service Call:

#A8243 High weeds

Disposition

INSPECTOR ASSIGNED: JENNIFER BOEHM

DATE ASSIGNED: 9/7/2007

COMMENTS: All high weeds & grass etc. F/U 9/20/07

CLOSED: YES

DATE CLOSED: 9/21/2007

FINAL DECISION: ABATED

Additional Comments

stop



**CITY OF ELIZABETH
BUREAU OF CONSTRUCTION**

INTEROFFICE MEMORANDUM

MAY 22, 2019

TO: Joanna Ramirez, City Clerk's Office

FROM: Nicole Campos, Bureau of Construction

SUBJECT: REQUEST FOR GOVERNMENT RECORDS

RE: 413 Franklin St

We did a thorough review of our current records and we were **able** to locate requested documents under the above mentioned property. Attached are copies, if you have any questions or concerns, please contact us at (908)820-4014.

RECEIVED

Thank you

MAY 23 2019

CITY CLERK'S OFFICE

CITY OF ELIZABETH
CONSTRUCTION CODE BUREAU
ELIZABETH, NJ

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 6/12/03
Control # C3409
Permit # 033328

IDENTIFICATION Block 3 Lot 409 Qual 60

Work Site Location 413 FRANKLIN STREET

Owner in Fee HERNANDEZ, SANDALIO

Address 413 FRANKLIN STREET

Telephone ELIZABETH, NJ

Contractor FUTURE-TEK LEDCO

Address 217 MARKET STREET

Telephone KENILWORTH, NJ 07033-

Lic. No. or Bldgs. Reg. No.

Federal Emp. No.

Is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT

☒ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION

☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER

(Subchapter 8 only)

DESCRIPTION OF WORK:

FAN

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: \$ 125

Construction Official Michael May Date 12/22/03

U.C.C. F170 (rev. 3/96) NJ DEAMS 5.14E

PAYMENTS (Office Use Only)

Building 0

Electrical 60

Plumbing 0

Fire Protection 0

Elevator Devices 0

Other

DCA State Permit Fee 0

Cert. of Occupancy 0

Other

Total 60

Check No. #454

Cash

Collected By

NJ UCCARSS.24E
CITY OF ELIZABETH
CONSTRUCTION CODE BUREAU
ELIZABETH, NJ

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/16/2003
Date Issued 12/12/03
Control # C3409
Permit # 033308

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

Block 3 Lot 409 Quad
Work Site Location 413 FRANKLIN STREET

FAN

Owner in Fee HERNANDEZ SAMUELLO

Address 413 FRANKLIN STREET

ELIZABETH NJ

Tele

Contractor FUTURE-TEK LEDCO

Address 217 MARKET STREET

KENILWORTH NJ 07033-

Tele

Lic. No. of Bldgs. Reg. No.

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3

1 1 Pole/Pad 1 1 Temporary 1 1 Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work \$ 125

JOB SUMMARY (Office Use Only)

PLAN REVIEW

1 1 No Plans Required

Joint Plan Review Required:

1 1 Bldg 1 1 Plumb

1 1 Fire 1 1 Elevator

1 1 Elect Plans Approved

Date: 12/23/03

Approved By: [Signature]

SUBCODE APPROVAL

1 1 CO 1 1 CCO 1 1 CA

Date:

Approved By:

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

1 1 Licensed Electrical Contractor 1 1 Exempt Applicant

D. TECHNICAL SITE DATA

NO. SIZE

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

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0

0

FEE (Office Use Only)

25

Administrative Surcharge

Minimum Fee

DCI State Permit Fee

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

CITY OF ELIZABETH
CONSTRUCTION CODE BUREAU
ELIZABETH, NJ

IDENTIFICATION

UCC NEW JERSEY
CERTIFICATE

Date Issued 01/03/2012
Control #
Permit # 11-3020

Block 3 Lot 409 Quad
Work Site Location 413 FRANKLIN STREET
Owner in Fee/Occupant BHARAJ BALDEV
Address 706 GROVE AVENUE
Telephone EDISON, NJ 08820
Contractor OWNER
Address 706 GROVE AVENUE
Telephone EDISON, NJ 08820
Lic. No. or Bldgs. Reg. No. EDISON, NJ 08820
Federal Emp. No. EDISON, NJ 08820

☐ 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 plan 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

Use Group U

Maximum Live Load 0

Construction Classification _____

Maximum Occupancy Load 0

Description of Work/Use: _____

REPAIR PORCH
REPLACE COLUMNS & FLOORS

☐ CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJC 5:17, to the following extent:

☐ Total removal of lead-based paint hazards is scope of work
☐ Partial or limited time period 1 year(s); 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 _____.

Fee \$ 0
Paid FXI Check No. 819
Collected by: MP

CONSTRUCTION OFFICIAL
U.C.C. (REV. 3/96) NJ UCC 5.23

CERTIFICATE

Cert. Number: 40843
Date Issued : 13-Nov-09

Block: Lot:
SubDivision :

IDENTIFICATION

Owner Premier Assets Service US Bank National Association Agent

Address 3476 Stateview Blvd.
Fort Mill SC 29715

Tel.

Work Site Address 413 Franklin Street

ELIZABETH, NEW JERSEY

Add.

Lic. No.

Fed. Emp. No.

PAYMENTS

Fees Rmt: \$65.00

- ☒ Check No. 702
☐ Cash
☐ Other

Collected By: MA

Payment Date: 27-Feb-09

CERTIFICATE OF OCCUPANCY/APPROVAL

- A. ☐ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL

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

- B. ☒ 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.

- C. ☐ TEMPORARY CERTIFICATE OF OCCUPANCY

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

- D. DESCRIPTION OF WORK:

RESALE: Buyer Name: Baldev Bharaj

2 Family

State Reg. # :

**** NO ONE MAY LIVE OR SLEEP IN CELLAR OR ATTIC. ****

USE GROUP R5

FIRE GRADING 1 HR

MAXIMUM LIVE LOAD 40 PSF

MAXIMUM OCCUPANCY LOAD

SPECIFIC USE: **** NO ONE MAY LIVE OR SLEEP IN CELLAR OR ATTIC. ****

FINAL COST OF CONSTRUCTION: _____

Michael Hagg
CONSTRUCTION OFFICIAL



**INTEROFFICE
MEMORANDUM**

Memo

RECEIVED

MAY 29 2019

To: JOANNA RAMIREZ, CLERK 2
From: HASSAN ABDUR-RAHMAN, HEALTH DEPARTMENT
Date: MAY 28, 2019
Re: 413 FRANKLIN STREET

CITY CLERK'S OFFICE

Hassan Abdur Rahman

THESE ARE ALL THE FILES ON RECORD IN THE CITY OF ELIZABETH HEALTH DEPARTMENT FOR 413 FRANKLIN STREET. THERE ARE NO OPEN FILES OR VIOLATIONS ON RECORD PERTAINING TO ENVIRONMENTAL CONCERNS OR HAZARDOUS MATERIAL INCIDENTS FOR THE AFOREMENTIONED ADDRESS.

SERVICE LINE

Complaint Printout

CONTROL NUMBER	DATE REPORTED	Complaint number	TYPE OF COMPLAINT	TIME RECIEVED
HEA1710/310:30 AM	10/31/2017	J3678	Health Department	10:30:00 AM
SITE NUMBER	SITE STREET	STATUS	CALL TAKEN BY	
413	FRANKLIN ST 1ST FL	Closed	BT/HHS	
TYPE OF CONTACT	CONTACT'S FIRST NAME	CONTACT'S LAST NAME		
	VANESSA SILVA			
CONTACT'S ADDRESS	CITY, STATE	ZIP CODE	CONTACT'S AREA COD	CONTACT'SPHONE N
	ELIZABETH, NJ			
OWNER'S INFORMATION	Block	LOT		
PUSHPA & BALDEV BHARAJ - 706 GROVE AVE, EDISON, NEW JERSEY 08820				
DESCRIPTION OF VIOLATION				
J3678 HOUSING FALL APART. CEILING FALLING IN BEDROOM AND BATHROOM, WATER DAMAGE, HOLE IN BEDROOM WALL, PORCH FALLING APART FRONT AND BACK, POSSIBLE TERMITE PROBLEM, ELECTRICAL PROBLEMS, OUTLETS HAVE NO COVERS (THEY DON'T WORK)				
INSPECTOR ASSIGNED	KIND OF COMPLAINT	DATE ASSIGNED	DATE CLOSED	
Maurice Booker		10/30/2017	1/3/2018	
COMMENTS				
10/31/17 No entry - left door knocker				
11/1/17 No entry - left door knocker				
11/2/17 No entry - left door knocker - call no answer				
Addtl COMMENTS				
FINAL DECISION				
VIOLATION ABATED				

SERVICE LINE

Complaint Printout

CONTROL NUMBER	DATE REPORTED	Complaint number	TYPE OF COMPLAINT	TIME RECIEVED
HEA1511/41:469 PM	11/4/2015	I17954	Health Department	1:46:29 PM
SITE NUMBER	SITE STREET	STATUS	CALL TAKEN BY	
413	FRANKLIN ST 1ST FL	Closed	BT/HHS	
TYPE OF CONTACT	CONTACT'S FIRST NAME	CONTACT'S LAST NAME		
	ESTELA	SERRANO		
CONTACT'S ADDRESS	CITY, STATE	ZIP CODE	CONTACT'S AREA COD	CONTACT'SPHONE N
	ELIZABETH, NJ			
OWNER'S INFORMATION	Block	LOT		
PUSHPA & BALDEV BHARAJ - 706 GROVE AVE, EDISON, NEW JERSEY 08820				
DESCRIPTION OF VIOLATION				
I17954 LEAKS COMING FROM CEILING IN BEDROOM, BATHROOM AND KITCHEN ; OUTLETS DON'T WORK ; NO FIRE/CARBON MONOXIDE ALARMS ; MOLD IN BATHROOM ; FRONT / BACK PORCH NEEDS REPAIR ; TERMITES ; RODENTS ; WINDOW IN HALLWAY NEEDS TO BE REPLACED ; WINDOWS AND DOORS RESEALED ; DOOR BOARDERS NEED TO BE REPLACED.				
INSPECTOR ASSIGNED	KIND OF COMPLAINT	DATE ASSIGNED	DATE CLOSED	
Maurice Booker		11/2/2015	12/29/2015	
COMMENTS				
11/4/15 Owner is directed to repair window in bedroom that does not stay up when opened. Must have windows in front of building that is broken repaired. Must have leak in bedroom ceiling checked and repaired and repair wall and ceiling. Must have all outlets in kitchen checked and repaired. Must have window in pantry repaired. Must have hole in wall in pantry				
Addtl COMMENTS				
FINAL DECISION				
VIOLATION ABATED.				

SERVICE LINE

Complaint Printout

CONTROL NUMBER	DATE REPORTED	Complaint number	TYPE OF COMPLAINT	TIME RECIEVED
HEA134/1210:52 AM	4/12/2013	F11933	Health Department	10:53:52 AM
SITE NUMBER	SITE STREET	STATUS	CALL TAKEN BY	
413	FRANKLIN ST	Closed	LM/HHS	
TYPE OF CONTACT	CONTACT'S FIRST NAME	CONTACT'S LAST NAME		
	linda	McConneyhead		
CONTACT'S ADDRESS	CITY, STATE	ZIP CODE	CONTACT'S AREA COD	CONTACT'SPHONE N
	ELIZABETH, NJ			
OWNER'S INFORMATION	Block	LOT		
DESCRIPTION OF VIOLATION				
F11933 litter and debris around property.				
INSPECTOR ASSIGNED	KIND OF COMPLAINT	DATE ASSIGNED	DATE CLOSED	
Linda McConneyhead	HEALTH ISSUES	4/11/2013	4/22/2013	
COMMENTS				
04/11/13 Owner is directed to clean up all litter and debris around property. F/U 04/22/13				
Addtl COMMENTS				
FINAL DECISION				
close out.				

SERVICE LINE

Complaint Printout

CONTROL NUMBER	DATE REPORTED	Complaint number	TYPE OF COMPLAINT	TIME RECIEVED
HEA126/123:588 PM	6/12/2012	F10170	Health Department	3:58:08 PM
SITE NUMBER	SITE STREET	STATUS	CALL TAKEN BY	
413	FRANKLIN ST	Closed	MIM/HHS	
TYPE OF CONTACT	CONTACT'S FIRST NAME	CONTACT'S LAST NAME		
	Insp.McConneyhead			
CONTACT'S ADDRESS	CITY, STATE	ZIP CODE	CONTACT'S AREA COD	CONTACT'SPHONE N
	ELIZABETH, NJ			
OWNER'S INFORMATION	Block	LOT		
Baldev & Pushpa Bharaj - 706 Grove Ave, Edison, NEW JERSEY 07201				
DESCRIPTION OF VIOLATION				
F10170 High weeds and grass				
INSPECTOR ASSIGNED	KIND OF COMPLAINT	DATE ASSIGNED	DATE CLOSED	
Linda McConneyhead	HIGH WEEDS	6/12/2012	7/5/2012	
COMMENTS				
6/12/12 Owner is directed to cut and remove all high weeds and grass and maintain area at all times. F/U 7/5/12				
Addtl COMMENTS				
FINAL DECISION				
Close Out				

SERVICE LINE

Complaint Printout

CONTROL NUMBER	DATE REPORTED	Complaint number	TYPE OF COMPLAINT	TIME RECIEVED
HEA115/1112:39 PM	5/11/2011	F7720	Health Department	12:35:09 PM
SITE NUMBER	SITE STREET	STATUS	CALL TAKEN BY	
413	FRANKLIN ST	Closed	rp/hhs	
TYPE OF CONTACT	CONTACT'S FIRST NAME		CONTACT'S LAST NAME	
	Rodney Price			
CONTACT'S ADDRESS	CITY, STATE	ZIP CODE	CONTACT'S AREA COD	CONTACT'SPHONE N
	ELIZABETH, NJ			
OWNER'S INFORMATION			Block	LOT
DESCRIPTION OF VIOLATION				
#F7720 High weeds				
INSPECTOR ASSIGNED	KIND OF COMPLAINT	DATE ASSIGNED	DATE CLOSED	
Rodney Price		5/11/2011	5/20/2011	
COMMENTS				
5/11/11 All high weeds and grass around property must be cut and removed and area maintained at all times. F/U 5/20/11				
Addtl COMMENTS				
FINAL DECISION				
Violations Abated - Close Out				

SERVICE LINE

Complaint Printout

CONTROL NUMBER	DATE REPORTED	Complaint number	TYPE OF COMPLAINT	TIME RECIEVED
HEA103/2/3:590 PM	3/2/2010	E5393	Health Department	3:59:00 PM
SITE NUMBER	SITE STREET	STATUS	CALL TAKEN BY	
413	FRANKLIN ST 2ND FL	Closed	fc/hhs	
TYPE OF CONTACT	CONTACT'S FIRST NAME	CONTACT'S LAST NAME		
	Brian	Gavilano		
CONTACT'S ADDRESS	CITY, STATE	ZIP CODE	CONTACT'S AREA COD	CONTACT'SPHONE N
413 Franklin Street 2nd fl	ELIZABETH, NJ	07206		
OWNER'S INFORMATION		Block	LOT	
Baldev & Pushpa Bharaj - 706 Grove Ave, ELIZABETH, NEW JERSEY 07201				
DESCRIPTION OF VIOLATION				
#E5393 Holes in walls, No cover on baseboard heater, Windows leaking, No door knob and stairs cracked				
INSPECTOR ASSIGNED	KIND OF COMPLAINT	DATE ASSIGNED	DATE CLOSED	
Maurice Booker		3/2/2010	5/6/2010	
COMMENTS				
3/2/10 Owner is directed to check and repair all windows for cracks and leaks. Must have all exposed radiator pipes covered in apartment. Must clean up all water stains from leaks. Must repair holes in bedroom properly. Must repair all holes in apartment bathroom, bedroom, living room, and closet areas. Must reseal bathroom door. Must rechaulk bathtub to				
Addtl COMMENTS				
FINAL DECISION				
abated				

SERVICE LINE

Complaint Printout

CONTROL NUMBER	DATE REPORTED	Complaint number	TYPE OF COMPLAINT	TIME RECIEVED
HEA068/143:224 PM	8/14/2006		Health Department	3:22:44 PM
SITE NUMBER	SITE STREET	STATUS	CALL TAKEN BY	
413	FRANKLIN ST	Closed	RH/HHS	
TYPE OF CONTACT	CONTACT'S FIRST NAME		CONTACT'S LAST NAME	
	Task Force			
CONTACT'S ADDRESS	CITY, STATE	ZIP CODE	CONTACT'S AREA COD	CONTACT'SPHONE N
	ELIZABETH, NJ			
OWNER'S INFORMATION			Block	LOT
Juan Genad - 54 Maujer St, , NEW JERSEY 07201				
DESCRIPTION OF VIOLATION				
C5882 Possible illegal attic &basement.				
INSPECTOR ASSIGNED	KIND OF COMPLAINT	DATE ASSIGNED	DATE CLOSED	
Richard Higgins/MJ	HEALTH ISSUES	8/9/2006	9/29/2006	
COMMENTS				
Addtl COMMENTS				
FINAL DECISION				
ABATED				

SERVICE LINE

Complaint Printout

CONTROL NUMBER	DATE REPORTED	Complaint number	TYPE OF COMPLAINT	TIME RECIEVED
HEA035/1910:50 AM	5/19/2003	B10705	Health Department	10:52:30 AM
SITE NUMBER	SITE STREET	STATUS	CALL TAKEN BY	
413	FRANKLIN ST 2 fl	Closed	MM/HHS	
TYPE OF CONTACT	CONTACT'S FIRST NAME	CONTACT'S LAST NAME		
	Shlonda	Franklin		
CONTACT'S ADDRESS	CITY, STATE	ZIP CODE	CONTACT'S AREA COD	CONTACT'SPHONE N
	ELIZABETH, NJ			
OWNER'S INFORMATION		Block	LOT	
-				
DESCRIPTION OF VIOLATION				
B10705 Rats in apartment,possible rodent burrows on property,rodents may come from closed bakery on the corner.				
INSPECTOR ASSIGNED	KIND OF COMPLAINT	DATE ASSIGNED	DATE CLOSED	
RODNEY PRICE	HEALTH ISSUES	5/15/2003	6/27/2003	
COMMENTS				
5/14/03 BATHROOM WINDOW MUST BE REPAIRED AND PAINTED. OWNER MUST HIRE AN EXTERMINATOR AND SEND COPY OF THE BILL TO THE HEALTH DEPARTMENT, ATTN: RODNEY PRICE. BEDROOM FLOOR HOLES MUST BE REPAIRED, ALSO HOLE IN WALL AT THE FOOD CLOSET MUST BE REPAIRED. F/U				
Addtl COMMENTS				
FINAL DECISION				
VIOLATIONS ABATED				