

20-0152

Darlene Abreu

From: Theresa Lopez
Sent: Wednesday, August 26, 2020 10:33 AM
To: Darlene Abreu
Cc: Irving Lozada
Subject: FW: OPRA request - Property Information

Hi Darlene,

Please see below OPRA request.

Thanks!

-----Original Message-----

From: Victoria Ann Kupsch
Sent: Wednesday, August 26, 2020 10:11 AM
To: Theresa Lopez <tlopez@perthamboynj.org>
Subject: FW: OPRA request - Property Information

DUE on:
9/4/2020

-----Original Message-----

From: ADRIANA ONDARZA [mailto:opra+request-16249-987fab12@requests.opramachine.com]
Sent: Wednesday, August 26, 2020 10:07 AM
To: Victoria Ann Kupsch <victoria@perthamboynj.org>
Subject: OPRA request - Property Information

Dear Perth Amboy 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:

I would like to know if there are any open permits that need to be closed for this property:

535 S. Park Dr.
Block: 399.27 Lot: 9

Yours faithfully,

ADRIANA ONDARZA

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-16249-987fab12@requests.opramachine.com

Is victoria@perthamboynj.org the wrong address for OPRA requests to Perth Amboy City? If so, please contact us using this form:

https://opramachine.com/change_request/new?body=perth_amboy_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/property_information_108

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.

Victoria Ann Kupsch, Municipal Clerk
City of Perth Amboy
Clerks Office
Email: victoria@perthamboynj.org <<mailto:victoria@perthamboynj.org>>
Phone: (732) 826-0290 ext. 4018

#PerthAmboyCountsOnYou

[https://www.perthamboynj.org/UserFiles/Servers/Server_11204924/Image/2020CensusLogo.jpg]

DISCLAIMER: The filters and firewalls needed in the current internet environment may delay receipt of emails, particularly those containing attachments. We strongly urge you to use delivery receipt and/or telephone calls to confirm receipt of important email.

CONFIDENTIALITY NOTICE: Some emails and files transmitted might be considered privileged and confidential that may also be considered advisory, consultative and deliberative (ACD) material under OPRA. If the reader of this e-mail is not the intended recipient or his or her authorized agent, the reader is hereby notified that any dissemination, distribution or copying of this e-mail is prohibited. If you have received this e-mail in error, please notify the sender by replying to this message and delete this e-mail immediately.

WARNING: Email received by or sent to City officials is subject to the Open Public Records Act (OPRA). This means that absent some specific privilege, all such communications are considered a public record and are subject to publication and/or dissemination to the public upon request.



CONSTRUCTION PERMIT

Date Issued 2/21/2020
Control # C-50358
Permit # 19-0172+C

IDENTIFICATION Block: 399.27 Lot: 9 Qualifier _____
Work Site Location: 535 S. PARK DR. Perth Amboy City, NJ Contractor RESI PRO
Address 3630 PEACHTREE ROAD NE STE 1500 ATLANTA GA
30326
Owner in Fee US BANK TRUST, NA C/O RESICAP Telephone: (732) 991-5098
13801 WIRELESS WAY OKLAHOMA CITY OK Lic. No. or Bldrs. Reg. No. 13VH09095800
73134 Federal Employee No. _____
Telephone: (267) 270-2866

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:

REPLACE SECTION OF BSMT WALL, CINDER BLOCK
15' X 7"

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work \$20,000

PAYMENTS (Office Use Only)

Building \$500
Electrical \$0
Plumbing \$0
Fire Protection \$0
Elevator Devices \$0
Other \$0.00
DCA Training Fee \$38
CO Fee _____
Other \$0
Total \$538
Check No. 5552/5553
Cash \$0
Credit \$0
Collected By Maria Wesson-Pineiro

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.



CONSTRUCTION PERMIT

Date Issued 5/1/2006
Control # 6872
Permit # 20060505

IDENTIFICATION Block: 182 Lot: 17 Qualifier _____
Work Site Location: 535 SAYRE AVE. PERTH AMBOY, NJ Contractor VALDEZ, MARIO
Address 535 SAYRE AVE. PERTH AMBOY NJ 08861
Owner in Fee VALDEZ, MARIO
535 SAYRE AVE. PERTH AMBOY NJ 08861 Telephone: (732) 277-4772
Telephone: (732) 277-4772 Lic. No. or Bids. 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:

REMOVE KITCHEN CABINETS AND REPAIR PARTITION WALL IN GARAGE

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 _____

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	\$24
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$4
Total	\$29
Check No.	4502/4491
Cash	\$0
Credit	\$0
Collected By	mh

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**

A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000
Block 182 Lot 17 Qualification Code _____
Work Site Location: 535 SAYRE AVE. PERTH AMBOY, NJ

Owner in Fee: VALDEZ, MARIO
Address 535 SAYRE AVE. PERTH AMBOY NJ 08861
Tel. (732) 277-4772 Email _____
Contractor: VALDEZ, MARIO
Address 535 SAYRE AVE. PERTH AMBOY NJ 08861
Tel. (732) 277-4772 Fax _____
Contractor License No. or, if new home, Bldrs Reg. No. _____ Exp. _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____

JOB SUMMARY (Office Use Only)		INSPECTIONS	
PLAN REVIEW	Date	Type:	Dates (Month/Day)
	Initial	Failure	Approval
☐ No Plan Required	_____	Footing	_____
☐ All	_____	Footing Bonding	_____
☐ Footing/Foundation	_____	Foundation	_____
☐ Struct/Framework	_____	Slab	_____
☐ Exterior	_____	Frame	_____
☐ Interior	_____	Truss Sys./Bracing	_____
Joint Plan Review Required	_____	Barrier-Free	_____
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator	_____	Insulation	_____
SUBCODE APPROVAL for PERMIT	_____	Finishes-Base Layer	_____
Date: _____	_____	Finishes-Final	_____
Approved by: _____	_____	Energy	_____
SUBCODE APPROVAL for CERTIFICATE	_____	Mechanical	_____
☐ CO ☐ CCO ☐ CA	_____	TCO	_____
Date: _____	_____	Other	_____
Approved by: _____	_____	Final	_____
	_____	Barrier-Free	_____

B. BUILDING CHARACTERISTICS

Use Group _____ Present R-5 _____ Proposed _____
Constr. Class _____ Present _____ Proposed _____
Number of Stories _____
Height of Structure _____ Ft.
Area - Largest Floor _____ Sq. Ft.
New Bldg. Area / All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. _____
2. Rehabilitation \$1,000
3. Total (1+2) _____

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
REMOVE KITCHEN CABINETS AND REPAIR PARTITION WALL IN GARAGE

TYPE OF WORK

☐ New Building
☐ Addition
☒ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6') _____ Sq. Ft.
☐ 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)

Administrative Surcharge \$4
Minimum Fee _____
State Permit Surcharge Fee \$1
TOTAL FEE \$29

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.