Borough of Allendale
500 West Crescent Avenue
Allendale, NJ 07401
(201) 818-4400

CERTIFICATE

IDENTIFICATION

Date Issued: 08/23/2013
Control # 18813
Permit # 20130132

Block: 1701 Lot: 23 Qual:

Work Site Location: 49 DALE AVE

Owner in Fee: BUCKLEY MICHAEL D AND SARA B

Address: 49 DALE AVE
ALLENDALE, NJ 07401

Telephone:

Agent/Contractor PAUL ALIANO CONTRACTING LLC

Address: 21 BROOK HOLLOW COURT
HAWTHORNE, NJ 07506

Telephone: 9734172789

Lic. No./Bldrs. Reg. No.: 0 Federal Emp No.:

Social Security No.:

Home Warranty No.:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5

Maximum Live Load: 0

Construction Classification:

Maximum Occupancy Load: 0

Certificate Exp Date:

Description of Work Use:
Roofing---Tear off AND Reroof

☐ **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 will be subject to fine or order to vacate:

ANTHONY HACKETT Construction Official

☐ **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

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500 West Crescent Avenue
Allendale, NJ 07401
(201) 818-4400

Permit Number 20130132
Update Number
Control Number 18813
Application Date: 04/04/2013
Permit Date: 04/04/2013

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 1701 Lot: 23 Qualification Code:

Work Site Location: 49 DALE AVE
ALLENDALE, NJ 07401

Owner In Fee: BUCKLEY MICHAEL D AND SARA B
Address: 49 DALE AVE
ALLENDALE, NJ 07401
Telephone:

Use Group(s): R-5

Contractor: PAUL ALIANO CONTRACTING LLC
Address: 21 BROOK HOLLOW COURT
HAWTHORNE, NJ, 07506
Telephone: 9734172789
Lic. No./Bldrs. Reg No.:
Federal Emp. No.:

is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ROOFING---TEAR OFF AND REROOF

PAYMENTS	(Office Use Only)
Building	$100.00
Electrical	$0.00
Plumbing	$0.00
Fire Protection	$0.00
Elevator Devices	$0.00
Mechanical	$0.00
DCA Fees	$8.00
Other Fees	$0.00
Certificate Fees	$0.00
TOTAL	$108.00

Amount to be Paid: $108.00

ESTIMATED COST OF WORK:

Cost of Construction:	$4,500.00
Cost of Rehabilitation:	$4,500.00
Cost of Demolition:	$0.00
Total Cost:	$9,000.00

Collected By	GG
Total Cash Amount	
Total CC Amount	
Total Check Amount	$108.00
Check #	210
Receipt #	PMT-16-17321
Grand Total	$108.00

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

ANTHONY HACKETT
Construction Official

04/04/2013
Date

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 4/4/2013
Control # 18813

Date Issued 4/4/2013
Permit # 20130132

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

Block 1701 Lot 23 Qualification Code

Work Site Location 49 DALE AVE
ALLENDALE, NJ 07401

Owner in Fee: BUCKLEY MICHAEL D AND SARA B

Tel. e-mail

Address 49 DALE AVE, ALLENDALE, NJ 07401
(street, municipality, zip code)

Contractor: PAUL ALIANO CONTRACTING LLC Tel. (973) 417-2789

Address 21 BROOK HOLLOW COURT e-mail
HAWTHORNE, NJ, 07506

Contractor License No. or Builder Registration No. 0 Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/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	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed R-5
No. of Stories 0
Height of Structure 0 ft.
Area — Largest Floor 0 sq. ft.
New Bldg. Area/All Floors 0 sq. ft.
Volume of New Structure 0 cu. ft.
Max. Live Load 0
Max. Occupancy Load 0

Constr. Class Present Proposed

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:

1. New Bldg. $ 0.00
2. Rehabilitation $ 4,500.00
3. Total (1+ 2) $ 4,500.00

U.C.C. F110 (rev. 11/09)

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.

Sign here:

Print name here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
ROOFING---TEAR OFF AND REROOF

TYPE OF WORK:	FEE (Office Use Only)
[ ] New Building	$ 0.00
[ ] Addition	0.00
[X] Rehabilitation	100.00
[X] Roofing	0.00
[ ] Siding	0.00
[ ] Fence ____ Height (exceeds 6')	0.00
[ ] Sign 0 Sq. Ft.	0.00
[ ] Pool	0.00
[ ] Retaining Wall 0 Sq. Ft.	0.00
[ ] Asbestos Abatement Subchapter 8	0.00
[ ] Lead Haz. Abatement NJAC 5:17	0.00
[ ] Radon Remediation	0.00
[ ] Other	0.00
[ ] Demolition	0.00
Administrative Surcharge	$ 0.00
Minimum Fee	$ 0.00
State Permit Surcharge Fee	$ 8.00
TOTAL FEE	$ 108.00

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