CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2078

DATE ISSUED 10-1-87

Block 199R Lot 10

Subdivision

A. IDENTIFICATION

Owner Evelyn + Walter Hovsep

Address 233 Wilson ST Saddle Brook

Tel. ( )

Work Site Address Same

Agent

Address

Tel. ( )

Lic. No.

Federal Emp. No.

PAYMENTS

Permit Fee $ 113 ZE

Fees Remitted $

☐ Check No.

☐ Cash

☐ Other

Collected By: DS

Date: 10-1-87

is hereby granted permission to perform the following work:

☒ BUILDING ☒ ELECTRICAL

☒ PLUMBING ☐ FIRE PROTECTION

☐ OTHER

Description of work:

Addition to Kitchen + Bathroom

New Deck

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

CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2078
DATE ISSUED 10-1-87
REVISION DATE
Block 199R Lot 10
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner Evelyn Young
Address 233 Wilson ST
Saddle Brook, N.J.
Tel. ( )
Work Site Address Same as Above

Contractor Skyline Builders
Address 51 Roosevelt Ave
~~Saddle Brook~~, Hasbrouck Hgts
Tel. (201) 288 8219
Lic. No.
Federal Emp. No. 22-2560150

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

2880 sq ft add.
&
deck

☐ See Plans

TYPE OF WORK:

- ☐ New Building
- ☒ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other NJTF
- ☐ Demolition
- ☒ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other Deck

	Fee Basis	Fee
		$ 17.80
		20.
		1.78
		20 00
CO		10 00
SUBTOTAL		$ 51 78
Minimum Building Fee (if applicable)		$
Total Building Fee *(Greater of Minimum or Subtotal)*		$ 51 78

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 1
Height of Structure 10 Ft.
Area–Largest Floor 180 Sq. Ft.
Total Building Area–All Floors 1380 Sq. Ft.
Volume of Structure 1440 Cu. Ft.
Total Land Area Disturbed 180 Sq. Ft.
Estimated Cost of Building Work: $ 20,000

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2078
DATE ISSUED 10-1-87
REVISION DATE

Block 199R Lot 10
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner Evelyn + Walter Young
Address 23B Jefferson ST
Saddle Brook, NJ.
Tel. [redacted]
Work Site Address Same

Contractor
Address
Tel. ( )
Lic.No./Bus. Permit.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Evelyn Young
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal	$ 15		Garbage Disposal	$
1	Bathtub	5		Air Conditioner Unit	
1	Lavatory/Sink	5		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
	Water Heater			Reduced Pressure Backflow Device	
	Domestic Boiler/ Furnace			Vent Stack	
	Steam Boiler			Solar System	
	Water Util. Connection			Other	
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 25		COLUMN 2	$

Fee	
COLUMN 1	$ 25
COLUMN 2	$
SUBTOTAL	$ 25
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee (Greater of Minimum or Subtotal)	$ 25

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage — Material _____ Size _____

Building Sewer— Material _____ Size _____

Water Service— Material _____ Size _____

Venting — Material _____ Size _____

Estimated Cost of Plumbing Work: $ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-130 (8/83) Green = Office Copy White = Applicant Copy Blue = Inspector Copy

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2078
DATE ISSUED 10-1-87
REVISION DATE

Block 199K Lot 10
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner Evelyn + Walter Fury
Address 23B Wilson ST Saddle Brook NJ.
Tel. ( )

Contractor
Address
Tel. ( )

Work Site Address Same
Lic.No./Bus. Permit.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal	$ 15		Garbage Disposal	$
1	Bathtub	5		Air Conditioner Unit	
1	Lavatory/Sink	5		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
	Water Heater			Reduced Pressure Backflow Device	
	Domestic Boiler/ Furnace			Vent Stack	
	Steam Boiler			Solar System	
	Water Util. Connection			Other	
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 25		COLUMN 2	$

Fee	
COLUMN 1	$ 25
COLUMN 2	$
SUBTOTAL	$ 25
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 25

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage – Material _____ Size _____
Building Sewer – Material _____ Size _____
Water Service – Material _____ Size _____
Venting – Material _____ Size _____

Estimated Cost of Plumbing Work: $ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-130 (8/83) Green = Office Copy White = Applicant Copy Blue = Inspector Copy

PLAN REVIEW AND INSPECTION — PLUMBING

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: 7/6/88

Inspected By: [signature]

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Slab				
☑ Rough				12/3/87
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other _____				

U.C.C. Form F-130 (8/83)

Garden State Electrical Inspection Services, Inc.

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2078
DATE ISSUED 10-1-87
REVISION DATE
Block 199R Lot 10
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner Evelyn + Walter Young
Address 233 Wilson St
Saddle Brook, NJ.
Tel. ( )
Work Site Address Same

Contractor
Address
Tel. ( )
Lic.No./Bus. Permit.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Evelyn Young
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee
7	Switching Outlets	$ 15-		H.V.A.C. Equipment	$
15	Lighting Outlets	1-		Switching Devices	
12	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric				
	Heating, Electric				
7	Switches	15-			
15	Lighting Fixtures	1		Other	
12	Receptacles			Other	
	Bonding, Pool/Vault			Other	
	Service/Feeders			Other	
	COLUMN 1	$ 32		COLUMN 2	$

Fee	
COLUMN 1	$ 32
COLUMN 2	-
SUBTOTAL	$ 32
Minimum Electrical Fee (If applicable) Town	$ 5
Total Electrical Fee *(Greater of Minimum or Subtotal)*	$ 37

GSE Fee 32

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Service: _____ Amps _____ Phase _____ System Type

_____ Wire _____ Volts _____ Wiring Method

Total No. of Meters: _____

Estimated Cost of Electrical Work: $ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-120 (8/83)

OFFICE COPY

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2028
DATE ISSUED 12-4-87
REVISION DATE

Block 199 R Lot 10
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner Evelyn Kuo
Address 228 W End Ave
Sea Girt, NJ.
Tel. ( )
Work Site Address Same as above

Contractor Skyline Builders
Address 51 Roosevelt Ave
~~Hazlet~~ ~~Keyport~~ Hazlet NJ
Tel. ( ) 222 2217
Lic. No.
Federal Emp. No. 22-2560150

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

288 sq ft add.
&
deck

☐ See Plans

TYPE OF WORK:

- ☐ New Building
- ☒ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other NSF
- ☐ Demolition
- ☒ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other Deck

	Fee Basis	Fee
		$ 17.80
		20.
		1.78
		20 00
CO		10 00
SUBTOTAL		$ 51 78
Minimum Building Fee (if applicable)		$
Total Building Fee *(Greater of Minimum or Subtotal)*		$ 51 78

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 1
Total Building Area—All Floors 1380 Sq. Ft.
Height of Structure 10 Ft.
Volume of Structure 1440 Cu. Ft.
Area—Largest Floor 120 Sq. Ft.
Total Land Area Disturbed 120 Sq. Ft.
Estimated Cost of Building Work: $ 29,000

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-110 (8/83) Green = Office Copy White = Applicant Copy Beige = Inspector Copy

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 929
DATE ISSUED 10-2-85
Block 199.R Lot 10
Subdivision

A. IDENTIFICATION

Owner Evelyn Young
Address 233 Wilson St
Saddle Brook, NJ-
Tel. [redacted]

Agent Skyline Builders
Address 51 Roosevelt Ave
Hasbrouck Hgts, NJ-
Tel. (201) 288 8219

Work Site Address Same as above
Lic. No.
Federal Emp. No. 22-2560150

PAYMENTS

Permit Fee $ 119.00
Fees Remitted $ 119.00
☑ Check No. 207
☐ Cash
☐ Other

Collected By: ZB
Date: 10-2-85

is hereby granted permission to perform the following work:

☒ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER

Description of work:
Dormer

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: $ #8,000

CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

Call for insp. 674-8738

Garden State Electrical Inspection Services, Inc.

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 929
DATE ISSUED 10-2-85
REVISION DATE

Block 199.R Lot 10
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner Evelyn Young
Address 231 Lafayette St
Saddle Brook, N.J.
Tel. (201) [redacted]
Work Site Address Same as above

Contractor SAFETY ELEC CO.
Address 538-57 ST
WEST NEW YORK N.J.
Tel. (201) 865 8544
Lic.No./Bus. Permit. 1727
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Ray Manfred
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee
3	Switching Outlets	$ 15.00		H.V.A.C. Equipment	$
1	Lighting Outlets			Switching Devices	
10	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric			Amp.	15.00
	Heating, Electric			Fan	5.00
	Switches				
	Lighting Fixtures			Other	
	Receptacles			Other	
	Bonding, Pool/Vault			Other	
	Service/Feeders			Other	
	COLUMN 1	$ 15.00		COLUMN 2	$ 20.00

Fee	
COLUMN 1	$ 1500
COLUMN 2	2000
SUBTOTAL	$ 35.00
Minimum Electrical Fee (If applicable)	$
Total Electrical Fee (Greater of Minimum or Subtotal)	$ 3500

GSE. fee
30.00

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Service: _____ Amps _____ Phase _____ System Type

_____ Wire _____ Volts _____ Wiring Method

Total No. of Meters: _____

Estimated Cost of Electrical Work: $ 800

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-120 (8/83)

OFFICE COPY

Garden State Electrical Inspection Services, Inc.

929

Call 11-19-85
for chap
674-8738

OCT 17 1985

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 929
DATE ISSUED 10-2-85
REVISION DATE

Block 199 R Lot 10
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner Evelyn Yun
Address 232 W. 52nd ST
Saddle Brook, NJ.
Tel. ( )
Work Site Address Same as above
SADDLE BROOK

Contractor SAFETY ELEC CO.
Address 538 57 ST
WEST NEW YORK NJ
Tel. (201) 865 5544
Lic.No./Bus. Permit. 1727
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Ray Mayfield
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee
3	Switching Outlets	$ 15 00		H.V.A.C. Equipment	$
1	Lighting Outlets			Switching Devices	
10	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric				
	Heating, Electric		1	Lp	15 00
	Switches				5 00
	Lighting Fixtures			Other	
	Receptacles			Other	
	Bonding, Pool/Vault			Other	
	Service/Feeders			Other	
	COLUMN 1	$ 15 00		COLUMN 2	$ 20 00

Fee	
COLUMN 1	$ 15 00
COLUMN 2	20 00
SUBTOTAL	$ 35 00
Minimum Electrical Fee (If applicable)	$
Total Electrical Fee (Greater of Minimum or Subtotal)	$ 35 00

G.S. 30 - Town chgd 30 - GSE fee
30 00

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Service: _____ Amps _____ Phase _____ System Type

_____ Wire _____ Volts _____ Wiring Method

Total No. of Meters: _____

Estimated Cost of Electrical Work: $ 500

D. COMMENTS

11/14/85 RW Phillips
11-25-85 Final OK Phillips

☐ Partial Releases ☐ Prototype Processing

CR 30 - 11-19-85

U.C.C. Form F-120 (8/83)

INSPECTOR COPY

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 929
DATE ISSUED 10-2-85
REVISION DATE

Block 199R Lot 10
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner Evelyn Young
Address 233 Wilson St
Saddle Brook, NJ.
Tel. (201) [redacted]
Work Site Address Same as above

Contractor Sky Line Builders
Address 51 Roosevelt Ave
Hasbrouck Hgts, N.J.
Tel. (201) 2888219
Lic. No.
Federal Emp. No. 22-2560150

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Richard Gagnone
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

Dormer

☒ See Plans

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☒ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

Fee Basis	Fee
	$
	54 –
SUBTOTAL	$
Minimum Building Fee (if applicable)	$
Total Building Fee (Greater of Minimum or Subtotal)	$ 54

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 2
Height of Structure 18 Ft.
Area–Largest Floor 690 Sq. Ft.

Total Building Area–All Floors 1380 Sq. Ft.
Volume of Structure ~~6,900~~ Cu. Ft.
Total Land Area Disturbed 690 Sq. Ft.

Estimated Cost of Building Work: $ ~~8,800~~

D. COMMENTS

APPROVED FOR PERMIT-A.R
10-1-85

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-110 (8/83) Green = Office Copy White = Applicant Copy Beige = Inspector Copy

NEW JERSEY UNIFORM CONSTRUCTION CODE

BUILDING SUBCODE TECHNICAL SECTION

PERMIT NO. 929
DATE ISSUED
REVISION DATE
Block [illegible] Lot [illegible]
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only* — When changing contractors, notify this office

Owner Evelyn [illegible]	Contractor Skyline Builders
Address 233 [illegible] St. Saddle Brook, NJ.	Address 57 Roosevelt Ave Hasbrouck Hgts NJ
Tel. ( )	Tel. (201) 288-2219
Work Site Address Same as above	Lic. No.
	Federal Emp. No. 22-2560150

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

[signature]
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Give detail description including materials used, dimensions, etc.

Dormer

☐ See Plans

TYPE OF WORK:
- ☐ New Building
- ☐ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

Fee Basis	Fee
	$
	54 —
SUBTOTAL	$
Minimum Building Fee (if applicable)	$
Total Building Fee *(Greater of Minimum or Subtotal)*	$ 54.

C. BUILDING CHARACTERISTICS

USE GROUP: ______ Present ______ Proposed

No. of Stories 2 — Total Building Area—All Floors 1380 Sq. Ft.

Height of Structure 18 Ft. — Volume of Structure [illegible] Cu. Ft.

Area—Largest Floor 690 Sq. Ft. — Total Land Area Disturbed 690 Sq. Ft.

Estimated Cost of Building Work: $ 8,800

D. COMMENTS

Approved for permit [illegible]
10-1-85

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION – BUILDING

DATE	JOB CONDITION/COMMENTS
10/10/85	ROUGH FRAMING (MARINA) APPROVED – A. RIBARRO

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☐ All		
☐ Footing/Foundation		
☒ Frame APPR.	10-1-85	AR
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date:

Inspected By:

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☐ Frame				
☐ Architectural				
☐ Insulation				
☐ Finishes				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

NOTICE OF PERMIT UPDATE

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 929
DATE ISSUED 12/1/85
Block 199R Lot 10
Subdivision

IDENTIFICATION

Owner Evelyn & Walter Young
Address 233 Wilson St. S.B, NJ.
Tel. ( ) [redacted]
Work Site Address Same

Agent
Address
Tel. ( )
Lic. No.
Federal Emp. No.

PAYMENTS

Permit Fee $ 25.00
Fees Remitted $ 25.00
☐ Check No.
☑ Cash
☐ Other
Collected By: LB
Date: 12-1-85

is hereby granted permission to perform the following work:

☐ BUILDING ☐ ELECTRICAL
☒ PLUMBING ☐ FIRE PROTECTION
☐ OTHER

Description of work:

Plumbing

Estimated Cost of Work: $

CONSTRUCTION OFFICIAL

U.C.C. Form F-190 (8/83) Light Green = Office Copy White = Applicant Copy

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 929
DATE ISSUED 12-11-85
REVISION DATE

Block 199.R Lot 10
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner Evelyn + Walter Young
Address 233 Wilson ST
Saddle Brook, NJ.
Tel. ( )
Work Site Address Same as above

Contractor
Address
Tel. ( )
Lic.No./Bus. Permit
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Evelyn Young
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal	$ 15		Garbage Disposal	$
1	Bathtub	5		Air Conditioner Unit	
1	Lavatory/Sink	5		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
	Water Heater			Reduced Pressure Backflow Device	
	Domestic Boiler/ Furnace			Vent Stack	
	Steam Boiler			Solar System	
	Water Util. Connection			Other	
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 25		COLUMN 2	$

Fee	
COLUMN 1	$ 25
COLUMN 2	$ —
SUBTOTAL	$ 25
Minimum Plumbing Fee (If applicable)	$ —
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 25

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage — Material _____ Size _____

Building Sewer — Material _____ Size _____

Water Service — Material _____ Size _____

Venting — Material _____ Size _____

Estimated Cost of Plumbing Work: $ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. _____
DATE ISSUED _____
REVISION DATE _____

Block 109.R Lot 10
Subdivision _____

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner Evelyn + Walter Young
Address 233 Wilson ST
Saddle Brook, NJ.
Tel. (2[illegible]) _____
Work Site Address Same as above

Contractor _____
Address _____
Tel. ( ) _____
Lic.No./Bus. Permit _____
Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Evelyn Young
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal	$ 15		Garbage Disposal	$
1	Bathtub	5		Air Conditioner Unit	
1	Lavatory/Sink	5		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
	Water Heater			Reduced Pressure Backflow Device	
	Domestic Boiler/ Furnace			Vent Stack	
	Steam Boiler			Solar System	
	Water Util. Connection			Other	
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 25		COLUMN 2	$

Fee	
COLUMN 1	$ 25
COLUMN 2	$
SUBTOTAL	$ 25
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee (Greater of Minimum or Subtotal)	$ 25

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage — Material _____ Size _____
Building Sewer — Material _____ Size _____
Water Service — Material _____ Size _____
Venting — Material _____ Size _____

Estimated Cost of Plumbing Work: $ _____

D. COMMENTS

Final 1/5/86

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION – PLUMBING

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: 1/2/86

Inspected By: [signature]

INSPECTIONS

Type	Failure Dates			Approval Date
☑ Slab				12/6/85
☐ Rough				
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other _____				

U.C.C. Form F-130 (8/83)

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 9/10/98
Control #
Permit # 98-544

IDENTIFICATION Block 1703 Lot 11
Work Site Location 233 Wilson St. Saddle brook, NJ. 07663
Owner in Fee Young
Address
Tel.

Contractor ACTIVE PLUMBING AND HEATING
Address 26 TREPTOW STREET
LITTLE FERRY, N.J. 07643
Tel. (201) 807-1800
Lic. No. or Bldrs. Reg. No. 7833
Fed. Emp. No. 22-3505630

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

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 $ 400.00

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical 3
Plumbing 30-
Fire Protection
Elevator Devices
Other
DCA Training Fee
Cert. of Occupancy
Other
Total 30-
Check No.
Cash
Collected by

U.C.C. F170
(rev. 3/96)

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued 9/10/98
Control #
Permit # 98-544

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

Block 1703 Lot 11
Work Site Location 233 Wilson St. Saddle Brook, NJ. 07663
Owner in Fee Young
Address
Tele. ( )
Contractor ACTIVE PLUMBING AND HEATING
Address 26 TREPTOW STREET
LITTLE FERRY, N.J. 07643
Tele. (201) 807-1800 Fax (201) 807-9877
Lic. No. 7833
Federal Emp. No. 22-3505630

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work $ 400.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				

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.

Daniel J. Janssen Jr.
Signature — Contractor's Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

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

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	30 -
X	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	
	Other	

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$ 30 -
TOTAL FEE	$ 30 -

U.C.C. F130
(rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 11/8/04

Permit # 04-732

IDENTIFICATION Block 1703 Lot 11 Qualification Code

Work Site Location 233 Wilson st Saddle Brook, N.J

Owner in Fee Elvegn Young

Address 233 Wilson st Saddle Brook, N.J.

Tel. ( )

Contractor Starrmack Construction L.L.C.

Address 338 Third st. Saddle Brook, N.J.

Tel. (973) 340-2453

Lic. No. or Bldrs. Reg. 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: Roofing

Tear-off/re-roof Install ice/water shield

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 $ 9,700.00

Construction Official

Date

PAYMENTS (Office Use Only)

Building	85.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	4
Cert. of Occupancy	
Other	
Total	89.00
Check No.	
Cash	
Collected by	

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued 11/8/04
Permit # 04-732

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

Block 1703 Lot 11 Qualification Code
Work Site Location 233 Wilson St. Saddle Brook, N.J.
Owner in Fee Elwyn Young
Address 233 Wilson St. Saddle Brook, N.J. 07663
Tel. (201
Contractor Staer Mack Construction LLC.
Address 338 Third St. Saddle Brook, N.J. 07663
Tel. (973) 340-2453 FAX ( ) same
Contractor License No. or Builder Registration No.
Federal Emp. No 200238550

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
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
Constr. Class Present Proposed
No. 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 $ 2700.-
3. Total (1+ 2) $

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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK Roofing
Tear-off
Re-Roof
Install ice/water shield

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[✓] Roofing
[ ] Siding
[ ] Fence Height (exceeds 6')
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Other
[ ] Demolition

FEE (Office Use Only)
$ 85.-

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $ 85.-

Township of Saddle Brook, New Jersey

ZONING PERMIT APPLICATION

540 SADDLE RIVER ROAD
SADDLE BROOK, NEW JERSEY 07663
PHONE: (201) 843-7111 FAX: (201) 843-0697

DEC 7 2009

BLOCK: 1703 LOT(S): 11 ZONE: R-A

PROPERTY ADDRESS

Mr & Mrs Yang

OWNER OF RECORD

223 Wilson St. Saddle Brook

MAILING ADDRESS (IF DIFFERENT)

PHONE: ( ) ( )
HOME WORK CELL

Mark T&M Asphalt & Concrete Co

NAME OF APPLICANT, CONTRACTOR, OR PERSON RESPONSIBLE FOR WORK - IF OTHER THAN OWNER

0-75 Pine Ave Fairlawn NJ (201) 794-0887

ADDRESS CONTACT PHONE #

AUTHORIZATION: ANYONE OTHER THAN ABOVE OWNER IS MAKING THIS APPLICATION, THE FOLLOWING AUTHORIZATION MUST BE EXECUTED.

TO THE ZONING OFFICIAL OF THE TOWNSHIP OF SADDLE BROOK:

NAME OF DESIGNEE

IS HEREBY AUTHORIZED TO MAKE THE WITHIN APPLICATION

12/7/09.

DATE

SIGNATURE OF OWNER

PERMIT REQUEST

(A current survey showing proposed locations and setbacks are required for all permit applications)

PLEASE CHECK ALL THAT APPLY:

		Fee
___	**Accessory Structure (100 sq. ft. or less)(Plans required)**	$75.00
___	**Signs – (Plans Required, showing sizes & colors)**	
___	Application	$50.00
___	Refacing	$35.00
___	Temporary Sign (6 months)	$75.00
___	Temporary Sign Renewal (6 months)	
___	$75.00	
___	**Temporary Trailers (One Year)**	$100.00
___	**Storage Container**	$50.00
___	**Fence**	
___	4' or less	$35.00
___	Over 4'	$50.00
___	**Retaining Walls (Plans Required)**	$50.00
___	4' or less	
___	Over 4' (Engineering Required)	
✓	**Site Work Permit**	$25.00
___	Driveways	
___	Patio/Pavers	
___	Filing (less than 50 cu. ft.)	
___	Sidewalk	
___	**Satellite Dish**	$50.00

Other than listed above:

Anthony Ambrogio
Zoning Official

Approved / Denied

12/7/9
Date

COMMENTS:

Amount Paid:_____Check#_____Received By:_____Date:_____

MB 101

Township of Saddle Brook, New Jersey

MISCELLANEOUS BUILDING PERMIT APPLICATION

540 SADDLE RIVER ROAD
SADDLE BROOK, NEW JERSEY 07663
PHONE: (201) 843-7111 FAX: (201) 843-0697

RECEIVED MAY 02 2016

BLOCK: 1703 LOT(S): 11 ZONE: _____

233 Wilson STREET
PROPERTY ADDRESS

WALTER AND EVELYN YOUNG
OWNER OF RECORD

MAILING ADDRESS (IF DIFFERENT)

PHONE: (2[redacted]) _____ ([redacted]) _____ (____) _____
HOME WORK CELL

NAME OF APPLICANT, CONTRACTOR, OR PERSON RESPONSIBLE FOR WORK - IF OTHER THAN OWNER

ADDRESS (____) _____
CONTACT PHONE #

AUTHORIZATION: ANYONE OTHER THAN ABOVE OWNER IS MAKING THIS APPLICATION, THE FOLLOWING AUTHORIZATION MUST BE EXECUTED.

TO THE ZONING OFFICIAL OF THE TOWNSHIP OF SADDLE BROOK:

NAME OF DESIGNEE - IS HEREBY AUTHORIZED TO MAKE THE WITHIN APPLICATION

The attached survey depicts an accurate rendering of the actual building and any other coverage on my property as it stands today. I understand that providing false or misleading information will lead to fines up to $500.

5/2/16
DATE

Evelyn Young
SIGNATURE OF OWNER

PERMIT REQUEST

(A current survey/site plan showing proposed locations and setbacks are required for all permit applications)

PLEASE CHECK ALL THAT APPLY:

___	**Zoning Permit Application Review Fee**	
	___ Residential	$25.00
	___ Commercial	$100.00
___	**Accessory Structure (≤100 sq. ft. or less)**	$75.00
___	**Signs – (Plans Required, showing sizes & colors)**	
	___ Refacing	$35.00
	___ Temporary Sign (6 months)	$75.00
	___ Temporary Real Estate Sign (6 months)	$20.00
	___ Temporary Sign Renewal (6 months)	$75.00
___	**Temporary Trailers (One Year)**	$100.00
___	**Temporary Construction Trailer (One Year)**	$100.00
___	**Temporary Storage POD (6 months)**	$75.00
___	**Temporary Tent** (30 day maximum)	
	___ < 900 sq. ft. (dates ___/___/___ - ___/___/___)	$75.00
	___ ≥ 900 sq. ft. (dates ___/___/___ - ___/___/___)	$200.00
✓	**Fence - The face or finished side of a fence or wall shall face the adjacent property or street.**	
___	≤ 4 feet	$35.00
✓	> 4 feet 6' vinyl	$50.00
___	Commercial	$100.00
___	Dumpster Enclosure	$100.00
___	**Retaining Walls (Plans Required)**	
	___ ≤ 3 feet	$50.00
	___ > 4 feet (UCC permit application and engineering required)	
___	**Site Work Permit**	
	___ Driveways	$25.00 (commercial $100)
	___ Patio/Pavers	$25.00
	___ Walkway/Sidewalk	$25.00
	___ Soil Movement (less than 50 cu. ft.)	$50.00
___	**Satellite Dish**	$50.00

Other than listed above:

Anthony Ambrogio
Zoning Official

Approved / Denied

5/2/16
Date

COMMENTS:

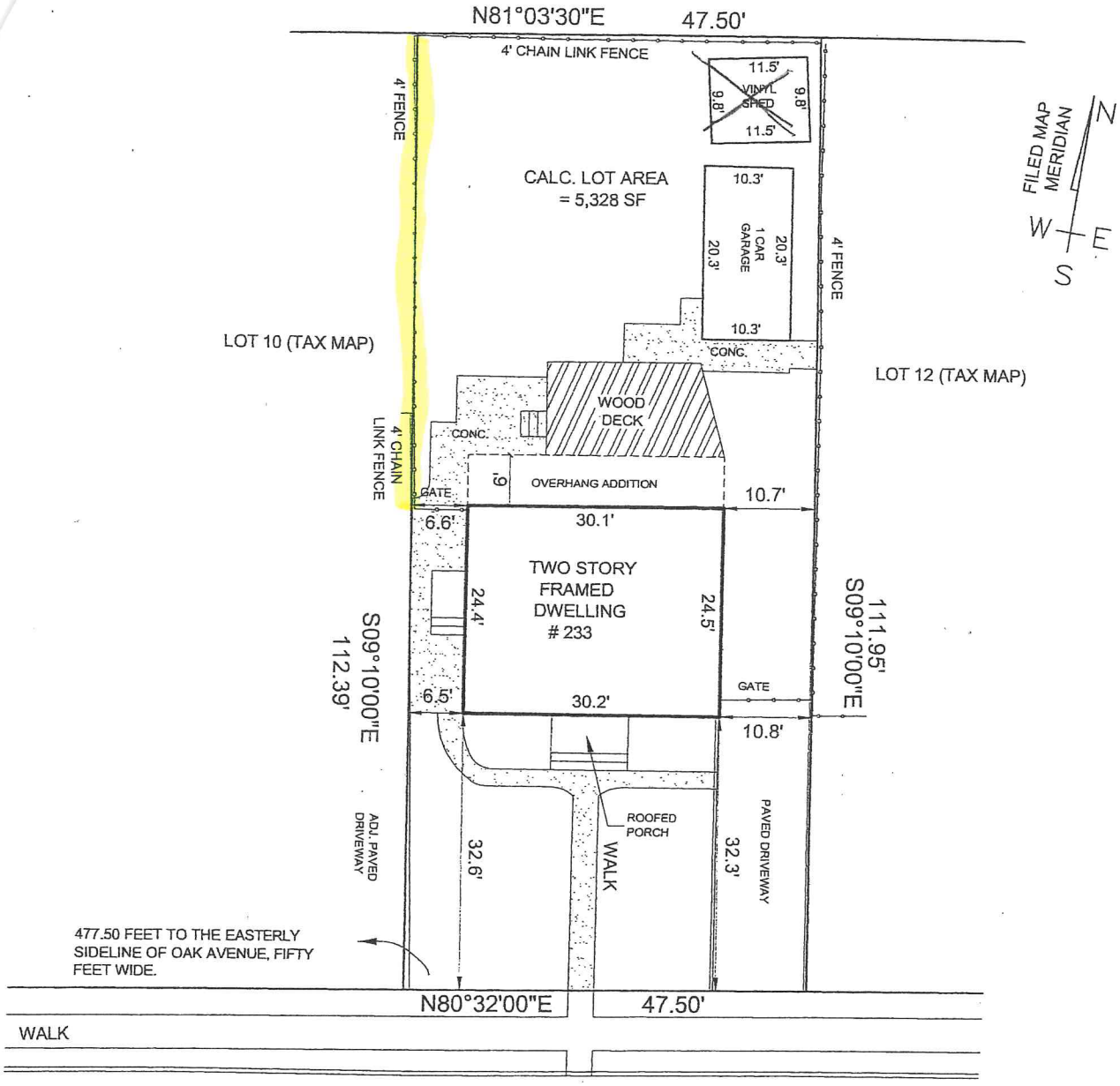
Amount Paid:_____ Check#_____ Received By:_____ Date:_____

CR

OFFSETS SHOWN HEREON SHOULD NOT BE USED AS A BASIS FOR CONSTRUCTION OF FENCES OR OTHER PERMANENT STRUCTURES.

OWNER OR AGENT HAS AGREED TO OMISSION OF ANY OR ALL ITEMS LISTED UNDER N.J.A.C. CHAPTER 40, 13:40-5.1.

A WRITTEN WAIVER AND DIRECTION NOT TO SET CORNER MARKERS HAS BEEN OBTAINED FROM THE ULTIMATE USER PURSUANT TO P.L. 2003, C.14 (NJSA 45:8-36.3) AND NJAC 13:40-5.1(D)



WILSON STREET

50' W

BEING ALSO KNOWN AND DESIGNATED AS THE EASTERLY 22.5' OF ASH AVENUE, LOT 10 AND THE WESTERLY FIVE FEET OF LOT 9 IN BLOCK 201 AS SHOWN ON A MAP ENTITLED, "REVISED MAP OF PART OF PATERSON MANOR", DATED APRIL 15, 1938 AND FILED IN THE BERGEN COUNTY CLERK'S OFFICE AS MAP NO. 2981.

NOTES:
1. DESCRIPTION HAS BEEN OMITTED.
2. NO DEED WAS FURNISHED AS PART OF THE PREPARATION OF THIS SURVEY.

REVISED MF 6-24-2013 FENCE DESIGNATION

THE INFORMATION SHOWN HEREON IS CERTIFIED TO BE CORRECT.

CANGER ENGINEERING ASSOCIATES

By: Paul Joseph Fox

PAUL JOSEPH FOX
PROFESSIONAL LAND SURVEYOR
NEW JERSEY LICENSE NO. GS 36242

DATE: JUNE 13, 2013

PLAN OF SURVEY FOR

WALTER AND EVELYN YOUNG

TOWNSHIP OF SADDLE BROOK, BERGEN COUNTY, NJ

CANGER ENGINEERING ASSOCIATES
A NEW JERSEY CORPORATION SINCE 1948
CERTIFICATE NO. 24GA27985900
CIVIL ENGINEERS, CONSULTANTS, SURVEYORS
6-20 PLAZA RD., FAIR LAWN, NJ. 07410
TEL. NO. 201-796-2776 FAX NO. 201-796-8383

SCALE: 1"= 20'

JOB NO. 17126

LOT 11

BLOCK 1703

MAP
SADDLE BROOK TAX MAPS

FILED MAP NO

TOWNSHIP OF SADDLE BROOK
93 MARKET STREET
SADDLE BROOK, N.J. 07663

Date Issued 4/11/13
Control # C1703-11
Permit # 13-172

UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 1703 Lot 11 Qual

Work Site Location 233 WILSON STREET

Owner in Fee YOUNG
Address 233 WILSON STREET
SADDLE BROOK, NJ 07663-
Telephone

Contractor MM & GCH CONSTRUCTION
Address 7-14 ESSEX PLACE
FAIR LAWN, NJ 07410-
Telephone (973)510-7565
Lic. No. or Bldrs. Reg. No. 13VH06487000
Federal Emp. No. -

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
REBUILD FRONT AND SIDE STEPS AND CLOSE SKY LIGHT

PAYMENTS (Office Use Only)

Building	115
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	9
Cert. of Occupancy	0
Other	
Total	124
Check No.	
Cash	054024
Collected By	

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 $ 5,000

Construction Official

4/10/13
Date

U.C.C. F170 (rev. 3/96)

TOWNSHIP OF SADDLE BROOK
93 MARKET STREET
SADDLE BROOK, N.J. 07663

UCC NEW JERSEY
BUILDING SUBCODE
TECHNICAL SECTION

Date Received / /
Date Issued 4/11/13
Control # C1703-11
Permit # 13-172

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

Block 1703 Lot 11 Qual

Work Site Location 233 WILSON STREET

Owner in Fee YOUNG
Address 233 WILSON STREET
SADDLE BROOK, NJ 07663-
Tele.
Contractor MM & GCH CONSTRUCTION
Address 7-14 ESSEX PLACE
FAIR LAWN, NJ 07410-
Tele. (973) 510-7565 Fax ( ) -
Lic. No. or Bldrs. Reg. No. 13VH06487000
Federal Emp. No. -

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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

REBUILD FRONT AND SIDE STEPS AND CLOSE SKY LIGHT

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req		
[ ] All		
[ ] Foot/Found		
[ ] Struct/Frame		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPR - PERM [ ] Elev
Date:
Approved By:
SUBCODE APPR - CERTIF
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bond				
Foundation				
Slab				
Frame				
Truss/Brac				
BarrierFree				
Insulation				
Finishes-Bas				
Finishes-Fin				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Constr. Class Present Proposed
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.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 5,000
3. Total (1+2) $ 5,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Rehabilitation	115
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool - Above Ground	0
[ ] Pool - In Ground	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
Other	0
[ ] Demolition	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 115
	State Permit Surcharge Fee	$ 9

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