

BOROUGH OF FRENCHTOWN

Mayor
Brad Myhre

Incorporated April 4, 1867

Municipal Clerk
Brenda S. Shepherd, RMC

29 Second Street
Frenchtown, NJ 08825

December 29, 2023

Anonymous

<opra+request-55738-36d705d7@requests.opramachine.com>

Re: Open Public Records Request received on December 27, 2023

Dear Mr. Mineer:

I, as the Custodian of Records for the Borough of Frenchtown, received your Open Public Records Act request on December 27, 2023. Accordingly, the seven (7) business day deadline to respond to your request is Monday, January 8, 2024. This response is being provided to you on the second business day after my receipt of the request.

Your OPRA request seeks the following:

For 215 Milford Rd, Frenchtown NJ 08825

1. Record of certificate of occupancy
2. Construction permits
3. Zoning permit history
4. Tax assessment history
5. History of code violations

Responsive to your OPRA request are the following:

For 215 Milford Rd., Frenchtown, NJ 08825

1. Copies of record of certificate of occupancies attached.
2. Copies of construction permits attached.
3. Copy of zoning permits attached.
4. Property record cards showing the tax assessment from 2001 to current.
5. There are no code violations on record for this property.

The Clerk of the Borough of Frenchtown desires to provide the document or documents requested. If the documents supplied are not fully responsive, please provide the Clerk with further identification of the document or documents sought.

If your request for access to a government record has been denied or unfilled within the seven business days required by law, you have a right to challenge the decision by the Borough of Frenchtown to deny access. At your option, you may either institute a proceeding in the Superior Court of New Jersey or file a complaint with the Government Records Council (GRC) by completing the Denial of Access Complaint Form. You may contact the GRC by toll-free telephone

BOROUGH OF FRENCHTOWN

Mayor
Brad Myhre

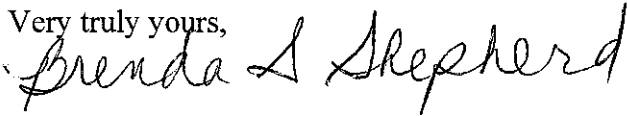
Incorporated April 4, 1867

Municipal Clerk
Brenda S. Shepherd, RMC

29 Second Street
Frenchtown, NJ 08825

at 866-850-0511, by mail at P.O. Box 819, Trenton, NJ 08625, by –email at grc@dca.state.nj.us, or at their website at www.state.nj.us/grc. The GRC can also answer other questions about the law. All questions regarding complaints filed in Superior Court should be directed to the Court Clerk in your County.

Very truly yours,



Brenda S. Shepherd, Records Custodian
Borough of Frenchtown



Frenchtown Borough
18 York Street
Lambertville, NJ 08530

Certificate

Construction Code Division
(Certificate of Approval)

Date Issued 8/28/2023
Control Number C-23-00097
Permit Number 2311073
Permit Issue Date 6/15/2023
Certificate Number 2311073

Identification

Block: 37 Lot: 12 Qual: _____
Work Site Location: 215 MILFORD ROAD Frenchtown Borough, NJ
Owner in Fee: CARR, HARRY E & LOUISE M
Owner Address: 215 MILFORD ROAD FRENCHTOWN NJ 08825
Telephone: _____

Contractor RICHARD E YARD PLUMBING AND HEATING
Address 58 PINE HILL ROAD STOCKTON NJ 08559
Telephone: (908) 996-2249 Fax: _____
License Number or Builders Registration Number: _____
Federal Emp. Number: _____

☐ Certificate of Occupancy

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

☒ Certificate of Approval

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ Certificate of Continued Occupancy

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ Temporary Certificate of Compliance

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

Conditions to be met:

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private
Construction Classification: _____ Use Group: R-5
Maximum Occupancy Load: _____ Maximum Live Load: _____
Description of Work/Use: REPLACE WATER SERVICE

Certificate Comments: _____

☐ Certificate of Clearance - Lead Abatement 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ Certificate of Clearance - Asbestos Abatement

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

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

☐ Certificate of Compliance

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____

☐ Temporary Certificate of Occupancy

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

Conditions to be met:

Check Number: _____

Collected By: _____

Fee: \$0.00

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

Construction Official



Lambertville Interlocal Office
18 York Ave Second Floor
Lambertville NJ 08530
(609)397-0803

CERTIFICATE

1011 - FRENCHTOWN BORO

Date Issued: 11/19/2012
Permit #: 12-11096
Certificate: 1211096.1

IDENTIFICATION

Block 37 Lot 12 Qualifier

Work Site Location
215 MILFORD ROAD
FRENCHTOWN, NJ 08825

Owner in Fee
Address
CARR, HARRY E & LOUISE M
215 MILFORD ROAD
FRENCHTOWN, NJ 08825

Telephone
Contractor
Address
HOMEOWNER

Telephone
Lic No/Bids Reg No.
FAX
Fed. Emp. No.
Homeowner

Home Imprv. Reg No. / Exempt
Reason -

☐ 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 the 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.

Reason for TCO:

Home Warranty No.
Type of Warranty Plan [] State [] Private
Use Group I/R-5
Maximum Live Load
Construction Class
Max. Occupancy Load
Description of Work/Use
HOOK UP FOR NEW GAS FURNACE - CONNECTING ELECTRIC; INSTALLING NEW GAS FURNACE; INSTALL NEW SMOKE DETECTOR;

☐ 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 _____.

Fee \$0.00

Paid [] \$0.00 Check No.

Collected by:

PermitsNJ

PNJF260 rev. (3/2012)

Printed On: 11/19/2012 11:38

CONSTRUCTION OFFICIAL



CONSTRUCTION PERMIT

Date Issued 10/19/12
Permit # 12-1096

IDENTIFICATION Block 37 Lot 12 Qualification Code
Work Site Location 215 Milford Rd. Contractor Daniel Smith Plumbing & Heating
Frenchtown NJ 08825 Address P.O. Box 206
Owner in Fee Harry Carr SR. Appraisals NJ 08801
Address 215 Milford Rd. Tel. (908) 735 4040
Frenchtown NJ 08825 Lic. No. or Bldrs. Reg. No. 10010
Tel. (908) 996 2206

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:

Reo Castaneda

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 \$ 6,850.00

Construction Official *[Signature]* Date 10/18/12

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

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT

(see reverse side)

PAYMENTS (Office Use Only)	
Building	83.00
Electrical	202.00
Plumbing	60.00
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	13.00
Cert. of Occupancy	
Other	
Total	358.00
Check No.	2850
Cash	
Collected by	CL



ELECTRICAL 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 37 Lot 12 Qualification Code _____
 Work Site Location 215 Whitford Rd
 Owner in Fee: HARRY S. CO. INC.
 Tel. (908) 996-2206 e-mail carriem@hscmail.com
 Address 215 Whitford Rd Fredericktown, NJ 08825 Zip code _____
 Contractor: Same as above Tel. () _____
 Address Fredericktown e-mail _____
 Contractor License No. _____ Exp. Date _____
 Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
 Federal Emp. ID No. _____ FAX: () _____

B. ELECTRICAL CHARACTERISTICS

Use Group _____ Present _____ Proposed _____
 [] Pole/Pad # _____ [] Temporary [] Other _____
 Building Occupied as _____ Utility Co. _____
 Est. Cost of Elec. Work \$ 100.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
Type:	Failure	Approval	Initial	Failure	Approval
☒ No Plans Required					
☐ Partial—Underslab Utilities Approved					
Date: <u>10/14</u> Approved by: <u>[Signature]</u>					
☐ Electric Plans Approved					
Date: _____ Approved by: _____					
Joint Plan Review Required:					
[] Bldg. [] Plumb. [] Fire. [] Elev. Service					
SUBCODE APPROVAL FOR PERMIT					
Date: <u>10/13/12</u>					
Approved by: <u>[Signature]</u>					
SUBCODE APPROVAL FOR CERTIFICATE					
[] CO [] CCO [] CA					
Date: <u>10/19/12</u>					
Approved by: <u>[Signature]</u>					
Temp. Cut-in-Card Date Issued					
Final Cut-in-Card Date Issued					
Annual Pool Inspection					
Date of Grounding and Bonding Certification					

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.

[] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr' [] Exempt Applicant
 Applicant's Signature/Contractor's Seal and Signature

D. TECHNICAL SITE DATA

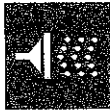
QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	
		Pool Permit/with UW Lights	\$ <u>22.00</u>
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		Administrative Surcharge	\$
		Minimum Fee	\$
		State Permit Surcharge Fee	\$
		TOTAL FEE	\$ <u>22.00</u>

DESCRIPTION OF WORK Remove old oil furnace
Hook up new gas furnace, connecting
electric

Date Received: 10/10/12
 Control # 000000
 Date Issued: 10/19/12
 Permit # 1211090



PLUMBING 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 37 Lot 12 Qualification Code _____

Work Site Location 215 Melford Rd. Frenchtown NJ 08825

Owner in Fee: Harry Carr Sr.

Tel. (908) 996-2206 e-mail cariscarp@hotmail.com

Address 215 Melford Rd Frenchtown NJ 08825 zip code

Contractor: Daniel Smith street municipality Tel. (908) 735-4040

Address P.O. Box 206 e-mail _____

Contractor License No. 10010 Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. _____ FAX: () _____

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 \$ 6850.00

JOB SUMMARY (Office Use Only)		DATES (Month/Day)	
PLAN REVIEW	INSPECTIONS	Failure	Approval
☐ No Plans Required	Type: _____	_____	Initial
☐ Partial - Underslab Utilities Approved	Slab _____	_____	_____
Date: _____	Rough _____	_____	_____
☐ Plumbing Plans Approved	Water _____	_____	_____
Date: _____	Sewer _____	_____	_____
Joint Plan Review Required:	Fixtures _____	_____	_____
☐ Bldg. ☐ Elec. ☐ Fire ☐ Elev.	Gas Equipment _____	_____	_____
SUBCODE APPROVAL FOR PERMIT	Gas Piping _____	_____	_____
Date: <u>10/18/12</u>	LPGas Tank _____	_____	_____
Approved by: _____	Fuel Oil Piping _____	_____	_____
SUBCODE APPROVAL FOR CERTIFICATE	Solar _____	_____	_____
☐ CO ☐ COP ☐ CA	TCO _____	_____	_____
Date: <u>11/29/12</u>	Final _____	_____	_____
Approved by: _____	_____	_____	_____

C. CERTIFICATION IN 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

[] Licensed Plumbing Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK Remove old oil furnace
installing new gas furnace

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
_____	Water Closet	_____
_____	Urinal/Bidet	_____
_____	Bath Tub	_____
_____	Lavatory	_____
_____	Shower	_____
_____	Floor Drain	_____
_____	Sink	_____
_____	Dishwasher	_____
_____	Drinking Fountain	_____
_____	Washing Machine	_____
_____	Hose Bibb	_____
_____	Water Heater	_____
_____	Fuel Oil Piping	_____
_____	Gas Piping <u>New Service</u>	_____
_____	LPGas Tank	_____
_____	Steam Boiler	_____
_____	Hot Water Boiler	_____
_____	Sewer Pump	_____
_____	Interceptor/Separator	_____
_____	Backflow Preventer	_____
_____	Greasetrap	_____
_____	Sewer Connection	_____
_____	Water Service Connection	_____
_____	Stacks	_____
_____	Other	_____
_____	Other	_____

Administrative Surcharge	\$
Minimum Fee	\$
State Permit Surcharge Fee	\$
TOTAL FEE	\$



FIRE PROTECTION 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 37 Lot 12 Qualification Code _____
Work Site Location 215 Milford Rd. Frenchtown NJ 08825
Owner in Fee: Harry Carr Sr.
Tel. (908) 996-7206 e-mail cariscarpet@hotmail.com
Address 215 Milford Rd Frenchtown NJ 08825 zip code _____
Contractor: Hammuner Tel. () _____
Address same as above e-mail _____

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____
Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____
Fire Alarm Contractor No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____ FAX: () _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____ Fuel Storage Tank: _____
Constr. Class: Present _____ Proposed _____ Fuel Type: [] Flammable or [] Combustible
Heating System: [] New or [] Modification to Existing Fire Alarm System: [] New or [] Existing
OR [] Conversion or [X] Replacement Location of Panel: _____
Fuel Type: [X] Gas [] Oil [] Electric [] Solar Fire Suppression/Standpipe System: _____
Other _____ Location of Main Control Valve: _____
Location: _____

Total Cost of Fire Protection Work \$ 50.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
[] No Plans Required	Alarm System				
[] Partial - Underslab Utilities Approved	Suppression Sys.				
Date: _____ Approved by: _____	Standpipe				
[X] Fire Protection Plans Approved	Fire Pump				
Date: <u>10-18-12</u> Approved by: <u>PC</u>	Pre-Eng. System				
Joint Plan Review Required:	Mechanical				
[] Bldg. [] Elec. [] Plumb. [] Elev.	Smoke Control				
SUBCODE APPROVAL FOR PERMIT	TCO				
Date: <u>10-18-12</u>	Flam/Combust Tanks				
Approved by: <u>PC</u>	Fireplace Venting				
SUBCODE APPROVAL FOR CERTIFICATE	Final				
[] CO [] CCO [X] CA	Other				
Date: <u>11-14-12</u>					
Approved by: <u>PC</u>					

Date Received 10-10-12
Control # 0002-12
Date Issued 10-19-12
Permit # 12-11096

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.

Applicant's Signature/Contractor's Signature
[] Certified Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Install smoke detector (battery)

Install new gas furnace

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

NUMBER _____
FEE (Office Use Only) _____

Flammable/Combustible Tanks _____

Alarm Systems _____

[] System _____

[X] 110v Interconnected _____

[] CO Detectors/110v _____

Alarm Devices (i.e., smoke, heat, pulls, water/flow) _____

Supervisory Devices (i.e., tampers, low/high air) _____

Signaling Devices (i.e., horn/strobes, bells) _____

Other Devices _____

TOTAL _____

Suppression Systems _____

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) _____

Standpipes _____

Pre-engineered Systems _____

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

FM200 Suppression _____

Other _____

Other Systems _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Fuel-Fired Appliances [X] Gas [] Oil [] Solid _____

Fireplace Venting/Metal Chimney _____

Other _____

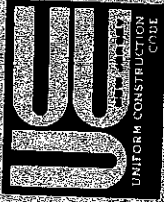
Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ 60.00

N/C
Exempt



CONSTRUCTION PERMIT

A. IDENTIFICATION

Owner CORA CLARR Agent Langer Electric, Inc
Address 215 Hickford Road Address 22 Ewing Drive
Greentown, MO 65635 Flemingtown, VA 22041
Tel. (201) 996-2835 Tel. (201) 788-6036
Work Site Address SAME AS ABOVE Lic. No. 7308
Federal Emp. No. YV-2476649

is hereby granted permission
to perform the following work:

- ☐ BUILDING ☒ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER _____

Description of work:

100 Amp SERVICE

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: \$ 325

CONSTRUCTION OFFICIAL

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

PERMIT NO. 9856
DATE ISSUED 2/27/88
Block 37 Lot 12
Subdivision _____

PAYMENTS

Permit Fee \$2750
Exam Fee \$2750
☐ Check ☒ Cash
Collection By [Signature]
Date 2/27/88



PERMIT NO. 8856
DATE ISSUED 1/2/78
REVISION DATE _____
Block 37 Lot 12
Subdivision _____

COUNTY

Middle Department Inspection Agency, Inc.
900 Haddon Avenue
Collingswood, NJ 08108

NOT

INSPECTOR

DATE INSPECTED

SUB-CODE

NUMERICAL CODING

ELECTRIC SUB-CODE

1. Rough
2. Service (new building)
3. T-Pole/Service Change
4. Final

PLUMBING SUB-CODE

5. Slab
1. Rough
6. Sewer/Water Lateral
4. Final

BUILDING SUB-CODE

7. Footing
8. Foundation
9. Framing
10. Insulation
11. Sheetrock
4. Final

FIRE SUB-CODE

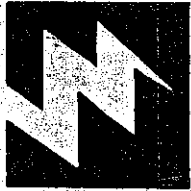
1. Rough
4. Final

FIFTY SUB-CODE

- ## 12. Miscellaneous

TEXT

- | | |
|----|-----------|
| 01 | Progress |
| 02 | Defective |
| 03 | Final |



PERMIT NO. 8836
 DATE ISSUED 06/24/1988
 REVISION DATE _____
 Block 37 Lot 12
 Subdivision _____

A. IDENTIFICATION

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner	COPA CARP	Contractor	LPALCONE, ESTHER M.
Address	215 MILL ROAD RD. FRENCH TOWNSHIP NJ 08825	Address	22 FLEMING DRIVE FLORHAM PARK NJ
Tel. ()	996-2835	Tel. (201)	788-6036
Work Site Address	SAME	Lic. No./Bus. Permit	733668
		Federal Emp. No.	922476649

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 wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee	Fee
	Switching Outlets	\$		H.V.A.C. Equipment	\$	COLUMN 1
	Lighting Outlets			Switching Devices		COLUMN 2
	Receptacle Outlets			Transformers		SUBTOTAL \$
	Range/Oven			Motors/Generators/ Compressors (rate no. and size of each)		Minimum Electrical Fee (if applicable) \$27.50
	Dryer, Electric					Total Electrical Fee (Greater of Minimum or Subtotal) \$27.50
	Water Heater, Electric					
	Heating, Electric					
	Switches			Other		
	Lighting Fixtures			Other		
	Receptacles			Other		
	Bonding, Pool/Vault			Other		
	Service/Feeders					COLUMN 2
						COLUMN 1

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____
 Service: 100 Amps 1d Phase 0.4 System Type _____
2-2 Wire 110 Volts 0 Wiring Method _____
 Total No. of Meters: 1 _____
 Estimated Cost of Electrical Work: \$ 325 _____

D. COMMENTS

☐ Partial Releases

☒ Prototype Processing # 246158

(F)

25

DAILY/WEEKLY INSPECTION REPORT
Middle Department Inspection Agency, Inc.
900 Haddon Avenue
Collingswood, NJ 08108

ITN003
NIDB
French

French

Handwritten signature

11-1-11

[Signature]

ELECTRIC SUB-CODE

1. Rough
2. Service (new building)
3. T-Pole/Service Change
4. Final

PLUMBING SUB-CODE

5. Slab
1. Rough
6. Sewer/Water Lateral
4. Final

BUILDING SUB-CODE

7. Footing
8. Foundation
9. Framing
10. Insulation
11. Sheetrock
4. Final

FIRE SUB-CODE

1. Rough
4. Final

ANY SUB-CODE

- ## 12. Miscellaneous

TYPE

- | | |
|----|-----------|
| 01 | Progress |
| 02 | Defective |
| 03 | Final |

[illegible]

BOROUGH OF FRENCHTOWN

Incorporated April 4, 1867

Borough Hall Second Street
Frenchtown, N. J. 08825

Zoning
Code Enforcement
Richard DeCroce
908-996-6565

ZONING PERMIT

NO. 6-04

DATE OF APPLICATION: 3-1-04 BLOCK 37 LOT 12

APPLICATION: # _____ OWNER: HARRY CAIR

DATE OF PERMIT: 3-1-04 ADDRESS: 215 N. 1st St. 126

ZONING DISTRICT: R2 TELEPHONE NO. 996 2206

This is to certify that the above described premises together with any building thereon, are used or proposed to be used as or for:

8x8 ADDITION ON HOME

Harry Cair

Applicant's Signature

Which is a:

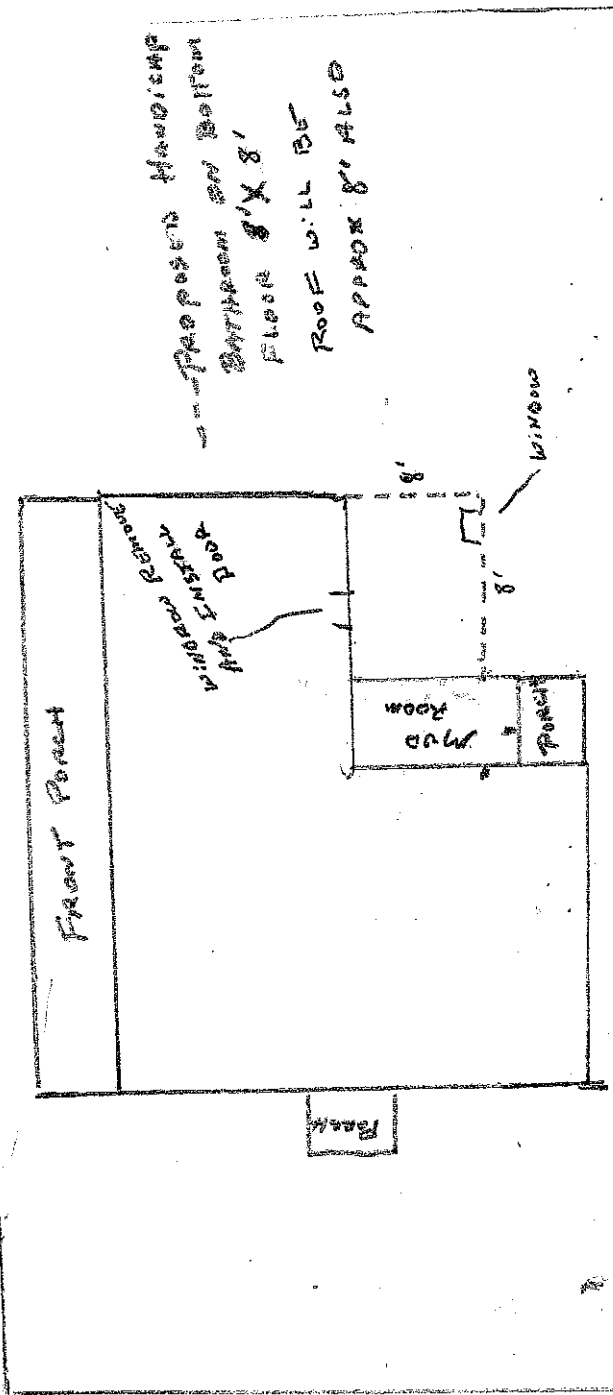
- ☒ Use permitted by Ordinance
- () Use permitted by variance approved on _____ subject to any special conditions attached to the grant thereof.
- () Valid non-conforming use as established by
- () finding of the Zoning Board of Adjustment or
 - () by the undersigned Zoning Officer on the basis of evidence supplied by applicant as specified on the reverse hereof. Also specified on the reverse hereof is a detailed statement of all aspects of the non-conforming use.
- () There is a non-conforming structure on the premises by reason of insufficient () set-back () side yard () rear yard () other (specify): _____
- () Development Tax Required

Richard DeCroce

Richard DeCroce, Zoning Officer

BLOCK 37 - LOT 12
215 MILFORD ROAD

MILFORD RD



3rd Street

BOROUGH OF FRENCHTOWN

Mayor
Warren E. Cooper

Incorporated April 4, 1867
Borough Hall 29 Second Street
Frenchtown, NJ 08825

Municipal Clerk
Brenda S. Shepherd, R.M.C.

Zoning Officer

No. 2012-089

Date of Permit 10/10/12 Block 37 Lot 12

Owner Harry Carr Sr.

Address 215 Milford Rd Frenchtown NJ 08825

Zoning District R-2 Telephone No. 908 996-2206

This is to certify that the above described premises together with any building thereon,
are used or proposed to be used as or for:

Installing new gas furnace

Harry Carr Sr.
Applicant's Signature

Which is a:

- ☒ Use permitted by ordinance
- ☐ Use permitted by variance approved on _____ subject to
any special conditions attached to the grant thereof
- ☐ Valid non-conforming use as established by
- ☐ Finding of the Zoning Board of Adjustment or
 - ☐ By the undersigned Zoning Officer on the basis of evidence
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specified on the reverse hereof is a detailed statement of all
aspects of the non-conforming use
 - ☐ There is a non-conforming structure on the premises by reason
of insufficient () setback () side yard () rear yard () specify
- _____
- ☐ Development tax required one half _____
Balance due on issuance of CO

John Barz
Zoning Officer

Hunterdon Frenchtown		Property Record Card		12/27/23 02:55 PM																																																																																																																	
Block: 37 Lot: 12 Qualifier: Card: 1		Last Sale: 05/24/23 for \$389,000																																																																																																																			
SUOZZO, LAURA 215 MILFORD RD FRENCHTOWN NJ 08825		Units: 1	Nbhd:	Model:	VCS: R101																																																																																																																
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		Prop Class: 2	Occupancy:	Zoning: R-2	Year Built: 1890/1890																																																																																																																
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1011

PROCESS DATE 02/11/04

BLK 37 215 MILFORD ROAD
 LOT 12 51X149

CARR, HARRY E & LOUISE M

SALE DATE 011101 PRICE 120000

CLASS= 2

BLDG CLS= 17

INT COND= AVERAGE

CARD 01 OF 01 VCS= R101 ZONE= R-2
 MAP= 3

YR BUILT= 1890

EXT COND= AVERAGE

EXT. FIN= ALUM/VINYL LAY COND= AVERAGE

----- BUILDING CALCULATIONS -----
 DESCRIPT UNITS RATE QFAC VALUE

MAIN BUILDING CALCULATIONS

1ST FLOOR 855 75.42 1.20 77386
 UPPER FLOOR 800 43.31 1.20 41576

** TOTAL MAIN BUILDING VALUE 118962

ATTACHED ITEM CALCULATIONS

OPEN PORCH 180 13.25 1.15 2743
 OPEN PORCH 25 28.44 1.15 818
 OPEN PORCH 42 21.31 1.15 1029

** TOTAL ATTACHED ITEM VALUE 4590

ADD / DEDUCT CALCULATIONS

BASEMENT 512 12.51 1.15 7368
 RADIATORS 1655 4.67 1.12 8649
 3FIX BATH 1- 2595 1.12 2906
 2FIX BATH 1- 1895 1.12 2122

** TOTAL ADD/DEDUCT VALUE 10989

REPLACEMENT COST (1975) 134541

COST CONVERSION FACTOR 1.05

REPLACEMENT COST NEW 141268

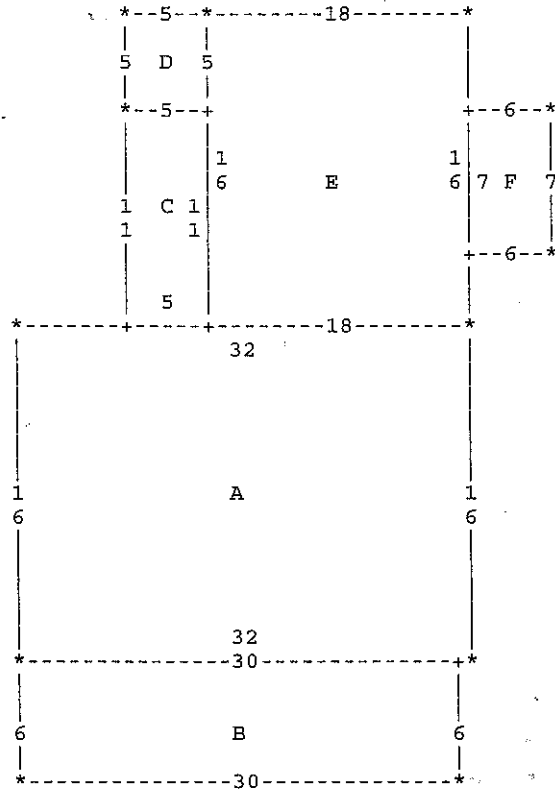
NET CONDITION (1890) .750

MARKET ADJUSTMENT 1.00

APPRAISED BLDG. VALUE 105951

ACCESS/FARM BUILDINGS 4170

TOTAL IMPROVEMENT VALUE 110100



MAIN BUILDING AREAS

DESCRIPT.	BSMT	FRST	UPPR	HALF	ATTC
A 2S-B	512	512	512		
C 1S-CR		55			
E 2S-CR		288	288		
TOTAL	512	855	800		

ATTACHED ITEM AREAS

DESCRIPT.	AREA
B OPEN PORCH	180
D OPEN PORCH	25
F OPEN PORCH	42

DETACHED ITEMS (COST CONV. FAC.=1.05)
 DESCRIPT. AREA RATE QFAC COND VALUE
 BARN 624 18.18 1.00 .35 4169

**** LAND CALCULATIONS ****

FRNT	AVER	DPH	NO OF	UNIT	---ADJUSTMENT---
FOOT	DPH	FAC.	UNITS	RATE	INFL(+) COND(-) VALUE
51	149	1.16	59.16	0	0
SITE VALUE				1 100000	04 .10 90000
FIRST .25AC				.17 200000	04 .10 30600
* TOTAL LAND VALUE					120600

--- FINAL VALUATION SUMMARY ---

LAND IMPROVEMENT	TOTAL
120,600	110,100
	230,700

5% TRAFFIC

PE & USE ONE FAMILY ✓
STORY HEIGHT 2 STORY ✓
DESIGN & STYLE OLD STYLE - CL
EXTERIOR FINISH ALUM/VINYL ✓
ROOF TYPE GABLE ✓
ROOF MATERIAL SLATE ✓
FOUNDATION STONE/RUBBLE ✓
FLOOR FINISH MIXED ✓
INTERIOR FINISH DRY MALL ✓
HEAT SOURCE OIL ✓
HEAT SYSTEM RADIATORS ✓ 1655
AIR CONDITION NONE ✓
ELECTRIC ADEQUATE ✓
PLUMBING 3 FIX BATH A 1

ROOM COUNT
LIVING ROOM
DINING ROOM
KITCHEN
BATHROOMS
BEDROOMS
REC. ROOM
DEN/OFFICE
TOTAL

V.C.S. R201
BUILDING CLASS 16
YEAR BUILT 1890
CONDITION:
INTERIOR AVERAGE ✓
EXTERIOR AVERAGE ✓
LAYOUT AVERAGE ✓
MAIN BUILDING AREAS
SEG. DESCRIPTION BSMNT FIRST UPPER HALF ATTIC
A 2S-B 512 512 512
C 1S-CR 55 55 55
E 2S-CR 288 288 288

ATTACHED ITEMS
SEG. DESCRIPTION AREA
B OPEN PORCH 180
F OPEN PORCH 42
ACCESSORY & FARM BUILDINGS
DESCRIPTION SIZE
BARN ✓ 26X24
QUAL FAC/NET COND FIELD PRICE
1.00 *30

INFO. BY OTHER
INSPECTION DATE
WORK RECORD
MEAS. BY RG 0:
LIST BY
PRICE BY
REVIEW BY
FIELD CALLS
#1
#2
#3

COUNTY BOARD DES
DATE
LAND VAL
IMPR. VAL
TOTAL VAL
TAX COURT DECISION
DATE
LAND VAL
IMPR. VAL
TOTAL VAL
FIXED VALUES
LAND
IMPROVE
TOTAL

OWNERSHIP/SALES HISTORY
OWNER'S NAME
CARR, CORA ESTATE C/O HAR
BUILDING PERMITS
APPLY DATE PERMIT NO. DESCRIPTION COMPLETION DATE

OFFICE USE

ROAD
CURBING
SIDEWALK
NEIGHBORHOOD STABLE ✓
UTILITIES
ELECTRIC ✓
PUBLIC WATER ✓
SEWER ✓
VIEW
TYPICAL ✓

LAND SCHEDULE
FRONTAGE AVG. DPTH DPTH FAC. EQUIV. FRNT.
51 149 1.16 59
FRONT FOOT
SITE VALUE
FIRST ACRES

ADJUSTMENTS (INCREASE) ADJUSTMENTS (DECREASE)

WRITE-INS

QUAL

CARR, HARRY E & LOUISE M

SALE DATE
120,000

01-11-01

215 MILFORD ROAD
FRENCHTOWN NJ

08825

45,400
85,400
130,800

CURRENT ASSESSED - LAND VAL
IMPR VAL
TOTL VAL

81.00 FIELD CALLS

80.00 WORK RECORD

MEAS.	BY	DATE
LIST	KL	9/18/03
PRICE		
REVIEW		

#1	BY	DATE
#2	KL	9/19/03
#3		
#4		

CD 9/19/03

85.00 COMMENTS

15.00 ACCESSORY & FARM BUILDINGS

CODE	SIZE/AREA	QUALITY FACTOR	NET CONDITION	FIELD PRICE
01				
02				
03				
04				
05				
06				
07				
08				
09				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				

CODE LEGEND:
01=DET. GARAGE
02=DET. CARPORT
03=SHED 1 STORY
04=SHED 1.5 STY
05=SHED 2 STORY
06=RN SHED 1STY
07=RN SHED 1.5S
08=POOL GUNITE
09=POOL VINYL
10=POOL ASY GRND
11=C.C. PAVING
12=ASPHALT PAVING
13=TENNIS COURT
14=BARN
15=DAIRY BARN
16=BARN W/OFT
17=FARM SHED
18=POLE BARN
19=STABLE
20=POULTRY SHED
21=SILLO
22=SMALL SHED
23=
24=

63.00 LAND INFLUENCE

01	OVERBUILT
02	UNDERIMPROVED
03	POOR LAYOUT
04	POOR COMM.
05	TRANSITIONAL
06	NO PARKING
07	POOR STYLE
08	NO GARAGE
09	INDUS. LOC.
10	POWER LINES
11	NO STR. LIGHT
12	INFERIOR SERV
13	SUPERIOR SERV
14	HEAVY TRAFFIC
15	LIGHT TRAFFIC
16	UNDERGRD UTIL
17	FUNC OBSOL.
18	ECON OBSOL.

52.00 LAND COND.

01	NO RIGHT TO BLDG
02	ALLEY SHAPE
03	FLAG LOT
04	SEVERE EASEMENTS
05	UNIMPV ROAD
06	SLOPE
07	LAND LOCKED
08	FLOOD PLAIN
09	SHARED DRIVEWAY
10	POOR LOCATION
11	TOPOGRAPHY
12	TRIANGLE
13	IRREGULAR
14	
15	

51.00 UTILITIES

01	ALL
02	ELECTRIC
03	GAS
04	WATER
05	SEWER
06	WELL
07	SEPTIC
08	SUMP/SEW CONN
09	SUMP/PO SEW
10	NONE
11	INFO. BY
12	OWNER
13	SPOUSE
14	TENANT
15	AGENT
16	AT DOOR
17	REFUSED
18	ESTIMATE

50.00 NEIGHBORHOOD

01	TYPICAL
02	INFERIOR
03	SUPERIOR
04	STABLE
05	DECLINING
06	IMPROVING
07	RURAL
08	CROSSROADS
09	SUBURBAN
10	URBAN
11	SUBDIVISION
12	MIXED
13	VIEW
14	TYPICAL
15	DETRIMENTAL
16	ENHANCING
17	LAKE VIEW

54.00 ROAD

01	PAVED
02	GRAVEL
03	DIRT
04	PRIVATE
05	NONE
06	CURBING
07	YES
08	NO
09	NO
10	NO
11	NO
12	NO
13	NO
14	NO
15	NO
16	NO

55.00 CURBING

01	YES
02	NO
03	NO
04	NO
05	NO
06	NO
07	NO
08	NO
09	NO
10	NO
11	NO
12	NO
13	NO
14	NO
15	NO
16	NO

56.00 SIDEWALK

01	YES
02	NO
03	NO
04	NO
05	NO
06	NO
07	NO
08	NO
09	NO
10	NO
11	NO
12	NO
13	NO
14	NO
15	NO
16	NO

57.00 LAND SCHEDULE (FRONT FOOT METHOD)

LAND ZONE	FRONT FOOTAGE	AVERAGE DEPTH	DEPTH TABLE	UNIT RATE	#62	#63
1						
2						
3						
4						

71.00 LAND SCHED (UNIT RATE METHOD)

LAND ZONE	DEED CODE	NUMBER OF UNITS	UNIT RATE	#62	#63
1					
2					
3					
4					

INSPECTION SIGNATURE
DATE 9/19/03