BOROUGH OF METUCHEN
Construction Code Office
500 Main St.
Metuchen, N. J. 08840

PLUMBING SUBCODE TECHNICAL SECTION

PERMIT NO. 443-88
DATE ISSUED 12/16/88
REVISION DATE
Block 40 Lot 37
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

Owner MRS Vega
Address 326 Durham Ave
Metuchen NJ
Tel. [redacted]
Work Site Address Same.

When changing contractors, please notify this office

Contractor Frank Sabatino Plmbg.
Address PO Box 695.
Metuchen NJ.
Tel. (201) 548-6798.
Lic.No./Bus. Permit 7271
Federal Emp. No. [redacted]

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.

Frank Sabatino
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
	Water Closet/Bidet/Urinal	$		Garbage Disposal	$
	Bathtub			Air Conditioner Unit	
	Lavatory/Sink			Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
1	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	$		**COLUMN 2**	$

Fee	
COLUMN 1	$
COLUMN 2	$
SUBTOTAL	$
Minimum Plumbing Fee (If applicable)	$ 10.00
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 10.00

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

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☐ CO ☐ CCO ☑ CA

Date: 12-23-98

Inspected By: James Meyer

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Slab				
☐ Rough				
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other _____				

BOROUGH of METUCHEN
Construction Code Office
500 Main Street
Metuchen, N.J. 08840
(732) 632-8515

NEW JERSEY UNIFORM CONSTRUCTION CODE

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 11-5-04
Date Issued 11-8-04
Control #
Permit # 04-0832

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

Block 40 Lot 31
Work Site Location 326 Durham Ave Metuchen
Owner in Fee/Occupant Gladys Vega
Address same
Tele. ([redacted])
Contractor Current Electric
Address 694 Wood Ave North Brunswick 08902
Tele. (232) 433 8930 Fax ( ) _____
Lic. No. 6667
Federal Emp. No. 22-3540456

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 750

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: 11-5-04
Approved by: [signature]

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 12-16-04
Approved by: [signature]

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			12-16-04	[signature]
Final				

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued 12-16-04

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.

[signature]
Applicant's Signature/Contractor's Seal and Signature

[✓] Licensed Electrical Contractor [ ] Exempt Applicant

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	
		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	
1	100	AMP Service Change	35 one
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		.....	
		.....	

Administrative Surcharge	$	
Minimum Fee	$	
DCA Training Fee	$	2
TOTAL FEE	$	35

UCC/PRO F-120 (REV3/96)
Professional Printing
(856) 468-7933

BOROUGH OF METUCHEN
CONSTRUCTION CODE OFFICE
500 MAIN STREET
METUCHEN, NEW JERSEY 08840
(732) 632-8515

NEW JERSEY UNIFORM CONSTRUCTION CODE

BUILDING SUBCODE TECHNICAL SECTION

Date Received 2/21/08
Date Issued 10/30/08
Control #
Permit # 08-0749

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 DURHAM AVE METUCHEN NJ.

Owner in Fee: Andres Perez.

Tel. ([redacted]) e-mail

Address 326 DURHAM AVE (street) METUCHEN. (municipality) (zip code)

Contractor: IVAN HEREDIA. Tel. (908) 406-1423.

Address 227 CONANT ST. e-mail
Hillside NJ 07205.

Contractor License No. or Builder Registration No. 13VH03704000 Exp. Date 12/31/08.

Federal Emp. ID No. FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Required	2/21/08	JC
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 11/6/08
Approved by: 11/10/08 JC

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			11/6/08	
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 $
3. Total (1+ 2) $ 2500.-

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.

IVAN HEREDIA
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
ROOFING.

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

FEE (Office Use Only)
$ 45

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

1. White-Inspector copy 2. Canary-Applicant copy
3. Pink-Office copy 4. White Tag- Office copy

UCC/F-110 (REV. 08/05)
Professional Printing
(856) 468-7933

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 12/19/22
Control #

Date Issued 12/30/22
Permit # 22-0961

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham Ave Metuchen 326.

Owner in Fee: Aamir Motivala (Grand Hope Investments)

Tel. (732 233 4144) e-mail aamirali@motivala.com

Address 5266, FOSTER Street, Piscataway. NJ 08854

Contractor: MAKSPON & SONS CONSTRUCTION LLC (street, municipality) Tel. (646) 236 6588 (zip code)

Address 152 Delacy Ave North e-mail –

Plainfield N.J 07060

Contractor License No. or Builder Registration No. 13VH06398100 Exp. Date 03/31/23

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

Federal Emp. ID No. FAX: (–) –

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: MA

Print name here: Tsering Ngodup

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Addition & Renovation on first floor. Addition of second floor.

FRAME 10/11/22 NO NEEDS TT

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

- [ ] No Plans Required
- [X] All — 12/23/22
- [ ] Footings/Foundations
- [ ] Structural/Framework
- [ ] Exterior
- [ ] Interior

Joint Plan Review Required:

[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT

Date: 12/23/22

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing			1/18/23	
Footing Bonding				
~~Foundation~~ BACKFILL			1/23/23	BL
~~Slab~~ PASSED				
Frame 10/25/22 1/19/23 12/29/22			1/31/23	BL
Truss Sys./Bracing				
~~Barrier-Free~~ Sheeting Finished			2/20/23	BL
Insulation PASSED			2/28/23	BL
Finishes -Base Layer				
Finishes -Final				
~~Energy~~ Permit Finaled			4/13/23	BL
Mechanical				
TCO				
Other Sheetrock 3/28/23				
Final				
Barrier-Free				

TYPE OF WORK:

- [X] New Building
- [X] Addition
- [X] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] 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)

$ 496
450
946

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

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____

No. of Stories 2

Height of Structure 30 ft.

Area — Largest Floor 1486+44 sq. ft.

New Bldg. Area/All Floors ~~1530~~ 1600 sq. ft.

Volume of New Structure 16544 cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:

State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $ 40,000
2. Rehabilitation $ 15,000
3. Total (1+ 2) $ 55,000

DCA 41 29-90

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 12/19/22
Control #

Date Issued 12/30/22
Permit # 22-0961

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham Ave, Metuchen, NJ 08840

Owner in Fee: Aquiy Motiwala,

Tel. ([redacted] e-mail [redacted]

Address 5266 Oster St Piscataway NJ 08854
(street, municipality, zip code)

Contractor: Valencia Air LLC Tel. (908) 247-5384

Address 281 Van Buren Street e-mail ValenciaAir2019@gmail.com
Lyndhurst, NJ 07071

Contractor License No. or Builder Registration No. 19HC00568100 Exp. Date 06/30/2022

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

Federal Emp. ID No. 84-3214007 FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] 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 (Dates Month/Day)	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 _____
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.
Max. Live Load _____
Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____
If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Rehabilitation $ 2000
3. Total (1+ 2) $ 2000

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: [signature]

Print name here: Humberto Correa

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Duct work HVAC
26 GA (lined)
R-8 Insulation

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] 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)
$ 75

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

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 9/12/23
Control #

Date Issued 10/2/23
Permit # 22-09661

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham St Metuchen NJ 08840

Owner in Fee: Grand Home Investments IX LLC

Tel. [redacted] e-mail [redacted]

Address 5266 Foster St (street) Piscataway (municipality) NJ 08854 (zip code)

Contractor: Makspon & Sons Construction LLC Tel. ( )

Address ~~152 Delacy Ave North Plainfield NJ 07060~~ e-mail

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

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH06398100

Federal Emp. ID No. FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[ ] ~~All~~	9/12/23	
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 9/12/23
Approved by:

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

INSPECTIONS

Types:	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
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.
Max. Live Load
Max. Occupancy Load

Constr. Class Present Proposed
If Industrialized Building:
State Approved HUD
Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $ 2000.00
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.

Sign here:

Print name here: Makspon & Sons Construction LLC (Tsering Ngodup)

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Updated plans for inside changes as requested by inspector

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence Height (exceeds 6')
[ ] 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)

$ 70

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 12/19/22
Control #

Date Issued 12/30/22
Permit # 22-0961

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham Ave Metuchen

Owner in Fee: Aamir Motiwala.

Tel. (732) 223-4744 e-mail [redacted]

Address 5266 Foster Street Piscataway NJ 08854
street municipality zip code

Contractor: Plumbing, Heating By Colin Tel. (609) 383-1059

Address 202 Country Ln. Port e-mail [redacted] 08241

Contractor License No. 9479 Exp. Date 06/23

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

Federal Emp. ID No. 223-304-875 FAX: (609) 383-1059

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 $ 11,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[✓] Plumbing Plans Approved

Date: 12/28/22

Approved by: ✓

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough			6/14/23	✓
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping			6/14/23	✓
LPGas Tank				
Fuel Oil 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.

Colin Mandorff

Applicant's Signature/Contractor's Seal and Signature

[✓] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Addition of Bathrooms & Renovation of house

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
5	Water Closet	100
	Urinal/Bidet	
2	Bath Tub	40
	Lavatory	
2	Shower	40
8	Floor Drain	160
8	Sink	
1	Dishwasher	20
	Drinking Fountain	
1	Washing Machine	20
2	Hose Bibb	40
1	Water Heater	75
	Fuel Oil Piping	
2	Gas Piping	110
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
6	Stacks Vents	120
	Other	75
	Other	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

MECHANICAL INSPECTION
TECHNICAL SECTION

Date Received Control # 12/19/22

Date Issued Permit # 12/30/22
22-0961

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham Ave, Metuchen, NJ 08840

Owner in Fee: Aamir Hotwani

Tel. [redacted] e-mail [redacted]

Address 5266 Foster Street Piscataway NJ 08854
street municipality zip code

Contractor: Valencia Air LLC Tel. (908) 247-5384

Address 281 Van Buren Street e-mail ValenciaAir2019@gmail.com
Lyndhurst, NJ 07071

Contractor License No. 19HC00568100 Exp. Date 06/30/2022

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 84-3214007 FAX:

B. MECHANICAL CHARACTERISTICS

Use Group Present: R-3-or R-5

Heating System work: [X] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Estimated Cost of Mechanical Work $ 4000

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 sign/Contractor sign and seal here:

Print name here: Humberto Cunet

[ ] Licensed Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Instalation of 2 3tons A/C Condenser, 13 Seer 208/230 A/C
-Furnace 80% 80.000 Btu/h
Duct Wrk 26 GA Lined R-8 Insulation

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[X] Mechanical Plans Approved
Date: 12/28/22 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 12/28/22
Approved by:

SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date:
Approved by:

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Water Heater				
Appliance				
Chimney/Vent				
Piping				
Tank				
Cooling/AC				
Generator				
Fireplace				
Chimney Cert.				
Other				
Other				
Final				

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Heater	
	Fuel Oil Piping Connections	
	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
~~2~~	Hot Air Furnace	~~150~~
	Oil Tank	
2	LPG ~~Tank~~ Cranks	~~40~~
	Fireplace	
	Generator	10
2	Other 3Ton Condenser	11
		340
	Administrative Surcharge $	
	Minimum Fee $	
	State Permit Surcharge Fee $	
	TOTAL FEE $	

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 12/19/22
Control #

Date Issued 12/30/22
Permit # 22-0961

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham Ave, Metuchen, NJ 08840

Owner in Fee: Amit Mahiwala

Tel. (3) 283 4149 e-mail [redacted]

Address 5266 foster st Piscataway NJ 08854
street municipality zip code

Contractor: Valencia Air LLC Tel. 908 247-5384

Address 281 Van Buren Street e-mail Valencia Air2019@gmail.com
Lyndhurst, NJ 07071

Contractor License No. 19HC00568100 Exp. Date 06/30/2022

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 84-3214007 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 $ 1000

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Humberto Gonzalez

[ ] Licensed Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK 3/4 pvc pipe A/C unit

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: 12/28/22 Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 12/28/22
Approved by:

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

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

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	
	LPGas Tank	
	Steam Boiler	75
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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

U.C.C. F130 (rev. 10/17)

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received / Control # 12/9/22

Date Issued 12/30/22

Permit # 22-0961

2

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham Ave Metuchen

Owner in Fee: Aamir Motiwala

Tel. 732-223-4144 e-mail aamiralic@hotmail.com

Address 5266 Foster St Piscataway NJ 08854.

Contractor: La Master Electrical (street / municipality) Tel. (201) 669 0416 (zip code)

Address 5 CURTIS DR Flanington NJ 08822 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 3-2024

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 16006

Federal Emp. ID No. 06-0658594 FAX: ( )

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Existing [ ] HVAC

Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System: [ ] New OR [ ] Existing

Location of Main Control Valve:

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible Capacity

Total Cost of Fire Protection Work $ 1000

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: Smoke & Carbon Alarms

Water Supply Source Municipal SDS method Above

Method of Alarm/Suppression System Supervision Mid-Registered

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v	3	
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	13	13
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		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [ ] Gas or [ ] Oil		
Fireplace Venting/Metal Chimney		
Other		
		125
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[X] Fire Plans Approved

Date: 12/21/22

Approved by: B. MATHEW

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS

Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System	Rough	Final	6/19	23BL
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

U.C.C. F140 (rev. 10/06)

White = Applicant Copy Canary = Office Copy Index = Inspector Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received / Control # 12/9/22

Date Issued / Permit # 12/30/22 / 22-0961

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham Ave, Metuchen, NJ, 08840

Owner in Fee: Aamir Motiwala

Tel. 732 233-4744 e-mail [redacted]

Address 5266 Foster St Piscataway NJ 08854
street municipality zip code

Contractor: Valencia Air LLC Tel. 908 247-5384

Address 281 Van Buren St e-mail Valenciaair2019@gmail.com
Lyndhurst, NJ 07071

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

Federal Emp. ID No. 84-3214007 FAX:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

Heating System: [X] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 1000

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: _____ Approved by: _____
[X] Fire Protection Plans Approved
Date: 12/21/22 Approved by: BS
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 12/21/22
Approved by: By LATHERUM

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
CO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

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/Contractor sign here:

Print name here: Humberto Gonzalez

D. TECHNICAL SITE DATA [ ] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK: (2) HVAC Installation

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 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	0	
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		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid	(2)	150
Fireplace Venting/Metal Chimney		
Other Furnaces		

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F140 (rev. 02/11) Internet version

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 12/19/22
Control #
Date Issued 12/30/22
Permit # 22-0961

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham Ave Metuchen NJ 08840

Owner in Fee: Aamir Motiwala

Tel. [redacted] e-mail

Address 526 foster St Piscataway NJ 08854
street municipality zip code

Contractor: La Master Electric Tel. 201 6690416

Address 5 CURTIS DR e-mail
Flamington NJ 08822

Contractor License No. 16006 Exp. Date 3-2024

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

Federal Emp. ID No. 06-0658599 FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 9500

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here:

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Electric work for Addition & renovation 2 - 100 Amp Sub Panels

QTY.	SIZE	ITEMS	FEE (Office Use Only)
48		Lighting Fixtures	2017 NEC
62		Receptacles	
40		Switches	
11		Detectors	
		Light Poles	
5		Motors—Fract. HP	50—
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
18		TOTAL NUMBERS	$ 275—
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
1		KW Dishwasher	75
		HP Garbage Disposal	
2	3 Ton	KW Central A/C Unit	150—
2		HP/KW Space Heater/Air Handler	150—
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
6	~~200~~	AMP Service	
2	100	AMP Subpanels / FEEDERS	200—
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
			$ 900—

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[X] Electric Plans Approved
Date: 12/22/22 Approved by: D

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 12/22/22
Approved by: D

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

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough			6.7.23	
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			6.7.23	
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 11/09) White = Applicant Copy Canary = Office Copy Index = Inspector Copy

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 12/19/22
Control #
Date Issued 12/30/22
Permit # 22-0961

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

Block 40 Lot 37 Qualification Code

Work Site Location 326 Durham Ave, Metuchen, NJ 08840

Owner in Fee: Aamir Motiwala

Tel. 732 4749 e-mail aamirali@hotmail.com

Address 5266 foster St Piscataway NJ 08854
street municipality zip code

Contractor: Valencia Air LLC Tel. (908) 247 5384

Address 281 Van Buren Street e-mail Valencia Air 2019@gmail.com
Lyndhurst, NJ 07071

Contractor License No. 19HC00568100 Exp. Date 06/30/2022

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

Federal Emp. ID No. 84-3214007 FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 4000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[X] Electric Plans Approved
Date: 12/22/22 Approved by: (D)

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 12/22/22
Approved by: (D)

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

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Dates (Month/Day)

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.

Applicant sign/Contractor sign and seal here:

Print name here: Humberto Gonzalez

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: 115 V Furnace
208/230 A/C condenser

QTY.	SIZE	ITEMS	FEE (Office Use Only)
2		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	
		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	
2	3 Tons	KW Central A/C Unit	150
2		HP/KW Space Heater/Air Handler	150
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	300
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

U.C.C. F120 (rev. 01/21) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

BOROUGH OF METUCHEN

MIDDLESEX COUNTY

Tel. 732-632-8540 • Fax 732-632-8100 • 500 Main Street • Metuchen, NJ 08840

ZONING PERMIT APPLICATION

SUBMIT WITH ZONING COVERAGE CHECKLIST AND SURVEY / PLANS INDICATING IMPROVEMENT(S)

Permit #	22-526
Received	7-29-22
Issued	12/30/22
Payment	155
Amount	$150

1. Location

Street Address: 326 Durham Ave, Metuchen

Block: 40 Lot: 37 Zone: R-2

2. Applicant

Name: Ismail ELALAOUI Phone: [redacted]

Street Address: 99A Cedar lane. Fax:

City / State: Highland Park Zip: 08904 Email: [redacted]

3. Owner (If other than Applicant)

Name: Aamir Motiwala Phone: [redacted]

Street Address: 5266 Foster Ave Fax:

City / State: Piscataway Zip: 08854 Email: [redacted]

4. Present or Previous Use of Building and/or Land

☐ Detached Single-Family ☒ Attached Single-Family ☐ Two-Family Residence ☐ Multi-Family Residence

☐ Commercial ☐ Office ☐ Industrial ☐ Other

5. Proposed Use of Building and/or Land

☐ New Principal Structure ☐ Addition / Alteration / Deck / Porch ☐ New Accessory Structure

☐ Parking Lot / Driveway ☐ Patio / Walkway ☐ Fence / Wall

☐ Change of Use / Occupancy ☐ Sign ☒ Other Addition & Renovation on 1st floor addition of 2nd floor

6. Describe Proposed Work or New Use

Addition & Renovation on first floor
addition of Second floor.
(2) AC UNITS.

7. Non-Residential Use Data

	Present	Proposed
Total Floor Area of Building		
Floor Area to be Occupied		
On-Site Parking Spaces		
Off-Site Parking Space		
Numbers of Employees		
Days & Hours of Operation		

I, THE UNDERSIGNED, HEREBY MAKE APPLICATION FOR A ZONING PERMIT ONLY FOR THE LOCATION AND THE WORK DESCRIBED HEREIN AND CERTIFY TO THE ACCURACY OF THAT INFORMATION. I ACKNOWLEDGE THAT IT IS MY RESPONSIBILITY TO BE AWARE OF AND COMPLY WITH ALL ZONING REQUIREMENTS OF THE BOROUGH OF METUCHEN RELATING TO THIS APPLICATION. I UNDERSTAND THAT FAILURE TO PROVIDE ACCURATE INFORMATION OR TO COMPLY WITH ANY PROVISIONS OF THE PERMIT RENDERS IT NULL AND VOID AND MAY RESULT IN AN ENFORCEMENT ACTION. I UNDERSTAND IT IS MY RESPONSIBILITY TO ENSURE THE PROPERTY SURVEY IS CURRENT.

Name: Ismail ELALAOUI Date: 7-29-22

Signature:

Location

Address 326 Durham Avenue Permit

Block 40 Lot 37 Zone R-2

This is to certify that the ☐ existing ☒ proposed use of the building and/or land on the subject property is a:

☒ Use complying with the Land Development Ordinance

☐ Use permitted by variance/exception/waiver …

☐ Valid non-conforming use as established by…

☐ Use requiring the following approval(s) before issuance of a Zoning Permit:

PLANNING BOARD	
Type of Approval	*Ordinance Reference*
☐ Bulk Variance	
☐ Conditional Use	
☐ Site plan	
☐ Minor Subdivision	
☐ Major Subdivision	

ZONING BOARD OF ADJUSTMENT	
Type of Approval	*Ordinance Reference*
☐ Bulk Variance	
☐ Use Variance	
☐ Site Plan	
☐ Minor Subdivision	
☐ Major Subdivision	

Zoning Permit is: ☒Approved ☐Denied

Comments

1.0 Proposed addition and renovation to the first and addition to second floor of the existing dwelling complies with §110-64 and §110-108 of the Metuchen Land Development Ordinance (MLDO).

2.0 Proposed improvements shall be constructed in accordance to architectural plans prepared by John Riggio, RA, dated May 12, 2022.

3.0 Proposed two A/C condenser units shall comply with §110-112.6 of the Metuchen Land Development Ordinance (MLDO).

3.1 Proposed unit shall not be located in the primary front yard area and be at least 3'-0" from the side and rear lot lines; if located in the secondary front yard area, unit shall be at least 15'-0" from the front lot line along the secondary street.

4.0 Proposed unit shall be buffered & screened with landscaping and/or decorative fencing

5.0 Proposed improvement(s) shall not inhibit natural drainage nor cause drainage issues for adjacent properties or in the public R.O.W.

6.0 Applicant shall obtain any and all other required permits for the work performed from all other jurisdictional agencies/departments.

7.0 Applicant shall notify the Zoning Official when proposed improvement(s) have been completed for a final inspection.

8.0 Applicant shall provide pictures prior to the issuance of a Certificate of Approval/Occupancy.

9.0 Applicant shall maintain proposed improvement(s) and all aspects of the property at all times.

Initial Approval

Zoning Officer's Signature [signature] Date 12/30/22

Final Approval

Zoning Officer's Signature Date

If the information given is not accurate and current, this permit will be rendered null and void.