



CONSTRUCTION PERMIT

PERMIT NO. 71113

DATE ISSUED _____

Block 37Lot 7

Subdivision _____

A. IDENTIFICATION

Owner Pawn Pizza Agent _____Address L.N. BHP Address 5014Tel. () 761-0192 Tel. () _____Work Site Address Same Lic. No. _____

Federal Emp. No. _____

PAYMENTS

Permit Fee \$ 62.00Fees Remitted \$ 62.00☐ Check No. _____☐ Cash _____☐ Other _____Collected By: RLDate: 7-27-81

is hereby granted permission
to perform the following work:

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

Description of work:

Walk in
refrigerator

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: \$ 5000.00

CONSTRUCTION OFFICIAL



CONSTRUCTION PERMIT

PERMIT NO.	7045		
DATE ISSUED	4-28-87		
Block	24	Lot	9
Subdivision			

A. IDENTIFICATION

Owner	Papa Pizza Palace	Agent	D. Hargrave Roofing
Address	100 Black Horse Pike M. Collins	Address	1227 Cambridge St Camden
Tel. ()	731-0551	Tel. ()	763-5888
Work Site Address	Same	Lic. No.	
		Federal Emp. No.	22 203 3117

PAYMENTS

Permit Fee	\$	215.00
Fees Remitted	\$	
☐ Check No.		
☐ Cash		
☐ Other		
Collected By:		
Date:	4-28-87	

is hereby granted permission
to perform the following work:

Description of work:

Install a concrete fireproof
Built up Hot Asphalt Roof

☒ BUILDING	☐ ELECTRICAL
☐ PLUMBING	☐ FIRE PROTECTION
☐ OTHER	Roofing

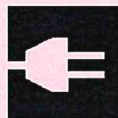
NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work: \$ 1750.00

CONSTRUCTION OFFICIAL



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/Lot/Qual: 34. 9.01
Work Site Location: 1 N BLACK HORSE PK

Owner in Fee: CAROLLO ANTONIO & FRANCESCA

Tel. email:
107 HASTINGS PLACE CINNAMINSON, NJ 08077

Contractor: MIRARCHI BROTHERS Tel. (215)957-2600

2901 SAMUEL DRIVE email:

BENSALEM, PA 19020

Contractor License No.: Exp Date:

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

Federal Emp. ID No. FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present B Proposed B
[] Pole/Pad # [] Temporary [] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work \$ 200.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)		
PLAN REVIEW		Type:	Failure	Failure	Approval	Initial
[] No Plans Required		Rough				
[] Partial -Underslab Utilities Approved		Barrier-Free				
Date: Approved by:		Trench				
[] Electric Plans Approved		Temp. Serv.				
Date: Approved by:		Constr. Serv.				
Joint Plan Review Required:		TCO				
[] Bldg. [] Plumb. [] Fire. [] Elev.		Other				
SUBCODE APPROVAL for PERMIT		Service				
Date:		Final				
Approved by:		Barrier-Free				
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued				
[] CO [] CCO [] CA		Final Cut-in-Card Date Issued				
Date:		Annual Pool Inspection				
Approved by:		Date of Grounding and Bonding Certification				

Permit #: P8-00080

Issue Date: 03/29/18

Application Id: 507

Application Date: 03/08/18

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:

INSTALL NEW WALL SIGN (30 SQ FT)

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
	1	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	
	1	KW Central A/C Unit	15.00
		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 \$ 65.00