CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 5/6/92.

Control #

Permit # 389-92

IDENTIFICATION Block 53 Lot 56

Work Site Location 16 Mostyn Road
Rando1ph, NJ

Owner in Fee Egil & Vivian Quam

Address 16 Mostyn Rd.
Randolph, NJ 07869

Tele. [redacted]

Contractor Francis Faherty

Address 900 St Johnsons Dwy
Morris Plains, NJ 07950

Tele. (701) 538-7970

Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Federal Emp. No. _____

or Social Security No. _____

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER _____

[ ] ELECTRICAL [ ] FIRE PROTECTION

DESCRIPTION OF WORK:

reroof

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 $ 25,000-

Donald Lomas
CONSTRUCTION OFFICIAL

PAYMENTS **(Office Use Only)**

Building	375-
Plumbing	
Electrical	
Fire Protection	
Other	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	375-
Check No.	1285
Cash	
Collected By:	JW

U.C.C. Form F-170A

(see reverse side)

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

PRO 108

BLOCK 53 LOT 56 ADDRESS(site) _____ PERMIT NO. 389-92

CONSTRUCTION PERMIT APPLICATION

UNIFORM CONSTRUCTION CODE — NEW JERSEY

Applicant Completes: Sections I, II, III (optional), IV, VI and VII

I. IDENTIFICATION

1. Proposed Work-site at: 16 MOSTYN RD
2. Name of Owner in Fee: EGIL & VIVIAN QUAM Tel. [redacted]
   Address 16 MOSTYN RD (street) RANDOLPH (municipality) 07869 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: FRANCIS X DOHERTY Tel. (201) 538-7970
   Address 9 EAST HANOVER AVE MORRIS PLAINS N.J. 07950
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. _____ Social Security No. _____
5. Architect or Engineer _____ Tel. (___) _____
   Address _____
6. Responsible Person In Charge of Work _____ Tel. (___) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Plumbing			
3. Electrical			
4. Fire Protection			
5. Other			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ____ ft.	
3. Area—Largest Floor ____ sq. ft.	
4. Building Area—All Floors ____ sq. ft.	
5. Volume of Structure ____ cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed ____ sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ____ ft.	
10. Wetlands yes ____ sq. ft.	
no	
11. Fire Grading	
12. Max. Live Load	
13. Max. Occupancy Load	

II. PROPOSED WORK

	Est. Cost
1. ☐ Minor Work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS	25,000 -

OPTIONAL (for office use only)

	Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
6. ☐ Fire Protection				5/6/92	JP			

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction ____
After Construction ____
Net gain or loss ____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

U.C.C. Form F-100A

PRO 101

FOLD

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( )I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( )I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature Egil Juam Date 5/6/97

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (___) _____

Signature _____ Date _____

FOLD

BUILDING SUBCODE TECHNICAL SECTION

Date Received 5/6/92
Date Issued
Control #
Permit # 389-92

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

Block 53 Lot 56
Work Site Location SAME

Owner in Fee EGIL AND VIVIAN QUAM
Address 16 MOSTYN RD
07869
Tele. [redacted]
Contractor FRANCIS X DOHERTY
Address 9 EAST HANOVER AVE
MORRIS PLAINS N.J. 07950
Tele. (201) 538-7970
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security 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

REMOVE EXISTING SHINGLES

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
[ ] No Plans Req.			Type:				
[ ] All			Footing				
[ ] Footing			Foundation				
[ ] Foundation			Slab				
[ ] Frame			Frame				
[ ] Other			Insulation				
Joint Plan Review Required:			Finishes:				
[ ] Elec. [ ] Plumb. [ ] Fire			Energy				
SUBCODE APPROVAL			Mechanical				
[ ] CO [ ] CCO [ ] CA			TCO				
Date: 5/6/92			Other				
Approved By: JOT			Final			11/3/94	(RH)

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[X] Roofing
[ ] Siding
[ ] Other
[ ] Demolition
[ ] Miscellaneous
[ ] Fence Height
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Elevator
[ ] Asbestos Abatement
[ ] Other

(Office Use Only)
FEE
$ 975.00

~~Administrative Surcharge~~ $
Paid [ ] Check # Minimum Fee $
Collected by: TOTAL FEE $ 975.00

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
Total Bldg. Area/All Floors Sq. Ft.
Volume of Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $
3. Total (1+2) $25.000

U.C.C. Form F-110A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

PRO 102

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 3/10/97
Control #
Permit # 97-153

IDENTIFICATION Block 53 Lot 56

Work Site Location 16 Moody Rd
Rockaway

Owner in Fee Juan

Address [redacted]

Contractor John C. Nugent

Address 188 Fairview Ln
Newton N.J.

Tele. (201) 383-7886

Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Federal Emp. No. _____
or Social Security No. [redacted]

Is hereby granted permission to perform the following work:

[ ] BUILDING [X] PLUMBING [ ] OTHER _____
[ ] ELECTRICAL [X] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:
Replace
Boiler

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 $ 3375.00

Gary Lillen /s/
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	
Electrical	
Plumbing	30-
Fire Protection	30-
Elevator Devices	
Other	
DCA Training Fee	3-
Cert. of Occ.	
Other	
Total	63-
Check No.	0167
Cash	
Collected By:	MC

(see reverse side)

U.C.C. Form F-170C

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

Bk # 0167
file

RECEIVED
MAR 0 5 1997
RANDOLPH TOWNSHIP
BUILDING DEPARTMENT

Call Nugent

BLOCK 53 LOT 56 ADDRESS (SITE) 16 Mosty Rd PERMIT NO. 97-153

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI and VII

I. IDENTIFICATION

1. Proposed Work-site at: 16 Mosty Rd
2. Name of Owner in Fee: Guan [redacted]
   Address _____ (street) (municipality) (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: John C. Nugent Tel. (201) 583-7886
   Address 188 Fox Run Lk Rd, Newton, NJ 07860
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. _____ Social Security No. _____
5. Architect or Engineer Same Tel. (___) _____
   Address _____
6. Responsible Person in Charge of Work Same Tel. (___) _____

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$			
2. Electrical				
3. Plumbing		30		
4. Fire Protection		30		
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review				
8. Subtotal	$			
9. DCA Training Fee		3		
10. Subtotal	$			
11. Cert. of Occupancy				
12. Other				
13. TOTAL	$	63		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ____ ft.	
3. Area—Largest Floor ____ sq. ft.	
4. New Building Area ____ sq. ft.	
5. Volume of New Structure ____ cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed ____ sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ____ ft.	
10. Wetlands yes ____ sq. ft. / no	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

	Est. Cost
1. ☐ Minor work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Elevator Devices	
10. ☐ Asbestos Abatement	
11. ☐ Demolition	
TOTAL COSTS	

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer

III. DO YOU WANT: (optional) 1 ☐ Partial Releases 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction _____
After Construction _____
Net gain or loss _____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

Mech Plumb. + Fire

U.C.C. Form F-100B

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( )I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( )I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name John C. Nugent

Address 988 Fairview Ave. Rd., Newton, N.J. 07860

Telephone (201) 383-7866

Signature _____ Date 3.5.97

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Date Issued 3/10/97
Control #
Permit # 97-153

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

Block 53 Lot 56
Work Site Location 16 Mosley N. Rd
Randolph
Owner in Fee
Address
[redacted]
Contractor Sohl & Nugent
Address 986 Fairview Lk. Rd
Newton, N.J.
Tele. (201) 383-7856
Lic. No.
Federal Emp. No. or Social Security No. [redacted]

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [X] Existing
Type: [ ] Gas [X] Oil [ ] Electrical [ ] Solar
[ ] Other
Location: Cellar
Total Est. Cost of Fire Prot. Work $ 3375.00 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date: 3/10/97
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] C/O [ ] CA
Date: 1/29/04
Approved by:

INSPECTIONS:

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other			4/4/04	NL

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 Replace Boiler

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER		

Administrative Surcharge $
Paid [✓] Check # 0167 Minimum Fee $
DCA Training Fee $
Collected by: ML TOTAL FEE $ 30.00

U.C.C. Form F-140B
1 White = Office Copy
2 Canary = Office Copy
3 Pink = Applicant Copy
4 Hard = Inspector Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 3/10/97
Date Issued
Control #
Permit # 97-153

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

Block 53 Lot 156
Work Site Location 16 Main St Newton
Owner in Fee
Address
[redacted]
Contractor John C. Nugent
Address 988 Fairview Lk Rd Newton, N.J.
Tele. (201) 383-7886
Lic. No.
Federal Emp. No. or Social Security No. [redacted]

B. PLUMBING CHARACTERISTICS

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[X] Plumb. Plans Approved
Date: 3/6/97
Approved by: TCC

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved By: 4/2/97
Date: 12/2001

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
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.

Signature—Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List 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	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	30
X	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Active Solar System	
	Other	

Paid [ ] Check # 0167
Collected by: MC

Administrative Surcharge	$ 30.00
Minimum Fee	$
DCA Training Fee	$
TOTAL	$

No Town Inspection

U.C.C. Form F-130B

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

CHIMNEY CERTIFICATION
FOR REPLACEMENT OF FUEL FIRED EQUIPMENT

BLOCK 53 LOT 56 PERMIT # _____

WORK SITE ADDRESS 16 Mosby Rd, Randolph

Applicant John C. Nugent

Certifying Individual John C. Nugent Company Same

Address 988 Fairview Ln Ne Newton N.J. 07860
Street City State Zip Code

Tel. (201) 383-7886

Check the Appropriate Box

Type of Replacement:

[ ] Oil to Gas Conversion
[ ] Gas Appliance Replacement
[X] Oil to Oil Replacement
[ ] Other _____

Existing Vent/Chimney:

[ ] B Label Vent
[ ] L Label Vent
[ ] Masonry Chimney — Tile Lined
[ ] Flexible Liner
[ ] Power Vent/Exhauster
[ ] Other _____

PLEASE SIGN ONE OF THE FOLLOWING CERTIFICATION STATEMENTS

CERTIFICATION

For Oil to Gas Conversions:

I herby certify that the chimney/vent is free and clear of obstruction and is substantially clean of residue from its previous use serving an oil appliance. I further certify that the chimney/vent is appropriately lined and sized for the appliance being installed.

_____
Signature Date

Oil to Oil or Gas to Gas Replacements:

I hereby certify that the existing chimney/vent is free and clear of obstruction. I further certify that the existing chimney/vent is appropriately lined and sized for the appliance being installed.

John C. Nugent 3/10/97
Signature Date

Certification Not Submitted:

I choose not to submit a certification. I understand that I will be required to be present for the inspection to remove and reinstall the chimney vent connector.

_____
Signature Date

Direct Vent Appliance:

No certification required:

_____
Signature Date

THIS FORM MUST BE RETURNED TO THE CODE ENFORCEMENT OFFICE PRIOR TO FINAL INSPECTION.

U.C.C. F370
(rev. 3/96)

TOWNSHIP OF RANDOLPH
502 MILLBROOK AVENUE
RANDOLPH TOWNSHIP NJ 07869 3799
973-989-7070

CERTIFICATE

IDENTIFICATION

Date Issued: 07/07/2003
Control #: 21710
Permit # 20030631

Block: 53 Lot : 56 Qual:

Work Site : 16 MOSTYN RD
RANDOLPH TOWNSHIP

Owner in Fee: SJC

Address: 16 MOSTYN RD
RANDOLPH TOWNSHIP NJ

Telephone:

Agent/Contractor: SJC Builders

Address: 879 Route 10
Randolph NJ -

Telephone: 973 927-3731

Lic. No./ Bldrs. Reg.No.: Federal Emp. No.: [redacted]

Social Security No.:

Home Warranty No:

Type of Warranty Plan: [ ] State [ ] Private

Use Group: U

Maximum Live Load:

Construction Classification:

Maximum Occupancy Load:

Certificate Exp Date:

Description of Work/Use: Tank Removal

[ ] **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.

[X] **CERTIFICATE OF APPROVAL**

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

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than or the owner will be subject to fine or order to vacate.

[ ] **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

GARY LINDSAY Construction Official

Fees $0.00
Paid [X]Check No 1867
Collected by kad

U.C.C 360 (rev. 3/96)

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 6/18/03
Control #
Permit # 03-0631

IDENTIFICATION Block 53 Lot 56

Work Site Location 16 MOSTYN RD

Owner in Fee SJC Buildings Inc

Address 879 RT 10

Tel. (973) 927-1003

Contractor SAME

Address

Tel. ( )

Lic. No. or Bldrs. Reg. No. 27201

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:

TANK REMOVAL U.S.T. (1,000 gal.)

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 $ 500

Construction Official

6/17/03
Date

PAYMENTS (Office Use Only)

Building	33 50
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occupancy	
Other	
Total	33 50
Check No.	1860
Cash	
Collected by	Kad

U.C.C. F170
(rev. 5/2K)

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

(see reverse side)

BLOCK 53 LOT 56 QUALIFICATION CODE _____ ADDRESS (SITE) 16 MOSTYN PERMIT NO. 03-0631

6/18/03 called

CONSTRUCTION PERMIT APPLICATION

Application Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 16 MOSTYN RD
2. Name of Owner in Fee: SJC Buildings Tel. (973) 1003
   Address 829 RT 10 (street) RANDOLPH (municipality) (zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: _____ Tel. (____) _____
   Address STAMP
   License No. OR, if new home, Builder Reg. No. 22201 Exp. Date _____
   Federal Employee No. _____ FAX: (____) _____
5. Architect or Engineer _____ Tel. (____) _____
   Address N/A
6. Responsible Person in Charge of Work 321 CAMPO
   Tel. (973) 927-1003 FAX (____) _____

RECEIVED
JUN 16 2002
RANDOLPH TOWNSHIP
BUILDING DEPARTMENT

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 150.00		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee			
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 150.00		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	
2.	Height of Structure ft.	
3.	Area — Largest Floor sq. ft.	
4.	New Building Area sq. ft.	
5.	Volume of New Structure cu. ft.	
6.	Construction Classification	
7.	Total Land Area Disturbed sq. ft.	
8.	Flood Hazard Zone	
9.	Base Flood Elevation ft.	
10.	Wetlands yes	
	no	
11.	Max. Live Load	
12.	Max. Occupancy Load	

II. PROPOSED WORK

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☒ Minor Work	$500								
2.	☐ New Building									
3.	☐ Addition									
4.	☐ Alteration									
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☐ Electrical									
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☒ Demolition					6/16/03	RW			
	TOTAL COSTS	$500								

OPTIONAL (for office use only)

III. DO YOU WANT: (optional)
1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?
1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A., or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

EJM Contracting Company INVOICE

P.O. Box 669 • Madison, NJ 07940
973-895-6059

Date 7/3/03

BILL TO: SJC Builders
879 RT 10 Randolph, NJ

Quantity	Description	Amount
1	ABANDONMENT 1,000 gallon	
	HEATING OIL TANK	550.00
*	Cleaning on tank only	
	23 gallons liquid disposal	
	@ 85¢	19.50
	JOB SITE	
	16 MOSTYN RD	
	SUB-TOTAL	PAID 12/03
	TAX 6%	
	TOTAL	7/11/03
	DEPOSIT	
Thank You for this order!	BALANCE DUE	$569.50

7/21

Need
Manifest
papers
Nancy - SJC Bldrs. to notify
Joy @ Cell #

Paid 7/30/03

BUILDING SUBCODE TECHNICAL SECTION

Date Received 6/18/03
Date Issued
Control #
Permit # 03-0631

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

Block 53 Lot 56
Work Site Location 16 MOSTYN RD KARLTON NJ
Owner in Fee SJC Builders
Address 879 RT 10
Tele. (973) 927-1003
Contractor
Address SAME
Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No. 27201 [redacted]

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

U.S.T. TANK 5 (1,000 gal.) REMOVAL

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Required	6/18/03	
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 7/1/03
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			7/1/03	
Barrier-Free				

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

[X] Demolition

FEE (Office Use Only)
$ 500.00

Administrative Surcharge $
Minimum Fee $
DCA Training Fee $
TOTAL FEE $ 500.00

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. Alteration $ _____
3. Total (1+ 2) $ 500.00

U.C.C. F110
(rev. 3/96)

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

TOWNSHIP OF RANDOLPH
502 MILLBROOK AVENUE
RANDOLPH TOWNSHIP NJ 07869 3799
973-989-7070

CERTIFICATE

IDENTIFICATION

Date Issued: 06/25/2003
Control #: 21711
Permit # 20030632

Block: 53 Lot : 56 Qual:

Work Site : 16 MOSTYN RD
RANDOLPH TOWNSHIP

Owner in Fee: SJC
Address: 16 MOSTYN RD
RANDOLPH TOWNSHIP NJ

Telephone:

Agent/Contractor: HYLAND ELECTRIC
Address: 319 Mt. Way
Morris Plains NJ -

Telephone: 973 290-9022

Lic. No./ Bldrs. Reg.No.: Federal Emp. No.: [redacted]

Social Security No.:

Home Warranty No:

Type of Warranty Plan: [ ] State [ ] Private

Use Group: U

Maximum Live Load:

Construction Classification:

Maximum Occupancy Load:

Certificate Exp Date:

Description of Work/Use: Temp. Service

[ ] **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.

[X] **CERTIFICATE OF APPROVAL**

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

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _or the owner will be subject to fine or order to vacate.

[ ] **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

GARY LINDSAY Construction Official

Fees $0.00
Paid [X]Check No 1868
Collected by kad

U.C.C 360 (rev. 3/96)

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

PERMIT ~~UPDATE~~

Date Update Issued 6/18/03
Control #
Permit #
Date Permit Issued 03-0632

IDENTIFICATION Block 53 Lot 56
Work Site Location 16 MOSTYN
Owner in Fee STC Buildings
Address 879 RT 10 RANDOLPH
Tel. (973) 927-1003

Contractor Hytland Electric
Address Morris Plains
Tel. (973) 290-9022
Lic. No. or Bldrs. Reg. No. 11626
Fed. Emp. No. [redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: E 3611

TEMP SERVICE

Estimated Cost of Work $ 500

Construction Official

6/19/03
Date

PAYMENTS (Office Use Only)

Building	
Electrical	41
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	1
Cert. of Occupancy	
Other	
Total	42
Check No.	1866
Cash	
Collected by	

U.C.C. F190
(rev. 3/96)

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

BLOCK 53 LOT 56 QUALIFICATION CODE _____ ADDRESS (SITE) 16 MOSTYN Rd PERMIT NO. 03-0632

CONSTRUCTION PERMIT APPLICATION

6/18/03 Called

Application Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 16 MOSTYN RD
2. Name of Owner in Fee: SJC Builders Tel. (973) 527-1005
   Address 210 Roxbury RH (street, municipality, zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: SAME Tel. (____) _____
   Address _____
   License No. OR, if new home, Builder Reg. No. 22201 Exp. Date _____
   Federal Employee No. _____ FAX: (____) _____
5. Architect or Engineer N/A Tel. (____) _____
   Address _____
6. Responsible Person in Charge of Work Sal Campo
   Tel. (973) 527-1005 FAX (____) _____

RECEIVED
JUN 16 2002
RANDOLPH TOWNSHIP
BUILDING DEPARTMENT

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 41		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	1		
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 42		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	
2.	Height of Structure ft.	
3.	Area — Largest Floor sq. ft.	
4.	New Building Area sq. ft.	
5.	Volume of New Structure cu. ft.	
6.	Construction Classification	
7.	Total Land Area Disturbed sq. ft.	
8.	Flood Hazard Zone	
9.	Base Flood Elevation ft.	
10.	Wetlands yes	
	no	
11.	Max. Live Load	
12.	Max. Occupancy Load	

II. PROPOSED WORK

		Est. Cost	OPTIONAL (for office use only) Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1.	☐ Minor Work									
2.	☐ New Building									
3.	☐ Addition									
4.	☐ Alteration									
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☒ Electrical					6-18-03	BM			
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition									
	TOTAL COSTS	500								

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A., or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date 6.16.03

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received 6/18/03
Date Issued
Control #
Permit # 03-0632

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

Block 53 Lot 56
Work Site Location 16 MOSTYN RD
Owner in Fee/Occupant SJC BUILDERS
Address
Tele. (973) 927-1003
Contractor HYLAND ELECTRIC
Address MORRIS PLAINS
Tele. (973) 290-9022 Fax ( )
Lic. No. 11626
Federal Emp. No. [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Rad. # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: 6-16-03
Approved by: RA

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 6-25-03
Approved by: LEO RA

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			6-25-03	RA
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued 6-26-03

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'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	36
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		.....	
		.....	

Administrative Surcharge	$	5
Minimum Fee	$	36
DCA Training Fee	$	
TOTAL FEE	$	41

U.C.C. F120
(rev. 3/96)

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

3/23/5/17-6

CUT-IN-CARD

MUNICIPALITY Franklin

LOCATION 16 Mostyn Ed UTILITY CO OC/RE

BLK 53 LOT 36

OWNER SVC OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C. and DCA requirements."

☐ FINAL ☑ TEMPORARY This approval void after ____ days

DESCRIPTION OF SERVICE 100A 1Φ

INSTALLED BY Hyland Electric LICENSE NO 11126

DATE 6-26-09 PERMIT # 09-1193 INSPECTOR

☐ CALLED IN / / Lic. No: 6469

U.C.C. Form F-350B 1 WHITE—UTILITY 2 CANARY—OFFICE/FILE 3 PINK—OFFICE/CONTRACTOR

TOWNSHIP OF RANDOLPH
502 MILLBROOK AVENUE
RANDOLPH TOWNSHIP NJ 07869 3799
973-989-7070

CERTIFICATE

IDENTIFICATION

Date Issued: 11/01/2004
Control #: 22038
Permit # 20030903

Block: 53 Lot : 56 Qual: _____

Work Site : 16 MOSTYN RD
RANDOLPH TOWNSHIP

Owner in Fee: SJC

Address: 16 MOSTYN RD
RANDOLPH TOWNSHIP NJ

Telephone: 973 927-1003

Agent/Contractor: SJC

Address: 16 MOSTYN RD
RANDOLPH TOWNSHIP NJ

Telephone: 973 927-1003

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

Social Security No.: _____

Home Warranty No: _____

Type of Warranty Plan: [ ] State [ ] Private

Use Group: R-3

Maximum Live Load: _____

Construction Classification: _____

Maximum Occupancy Load: _____

Certificate Exp Date: _____

Description of Work/Use: Demolition

[ ] **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.

[X] **CERTIFICATE OF APPROVAL**

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

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _or the owner will be subject to fine or order to vacate.

[ ] **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

Fees $0.00

Paid[X]Check No 1875

Collected by jf

FRANK HOWARDConstruction Official

U.C.C 360 (rev. 3/96)

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 08-05-03
Control #
Permit # 03-0903

IDENTIFICATION Block 53 Lot 56

Work Site Location 16 MCSTYN RD

Owner in Fee SJC Building LLC

Address

Tel. (973) 927-1003

Contractor SAME

Address

Tel. ( )

Lic. No. or Bldrs. Reg. No. 22201

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) [X] OTHER

DESCRIPTION OF WORK:

Demolition

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 $ 21,000

Construction Official

7/31/03
Date

PAYMENTS (Office Use Only)

Building 50
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee
Cert. of Occupancy
Other
Total 50 -
Check No. 1875
Cash
Collected by

U.C.C. F170
(rev. 5/2K)

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

(see reverse side)

BLOCK 53 LOT 56 QUALIFICATION CODE _____ ADDRESS (SITE) 16 MOSTYN PERMIT NO. 03-0903

CONSTRUCTION PERMIT APPLICATION

Application Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 16 MOSTYN RD
2. Name of Owner in Fee: SSC BUILDERS LLC Tel. (973) 927-1003
   Address RT 10 RANDOLPH (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: SAME Tel. (____) _____
   Address _____
   License No. OR if new home Builder Reg. No. 27201 Exp. Date _____
   [redacted] FAX: (____) _____
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person in Charge of Work SAM CIMINO
   Tel. (____) _____ FAX (____) _____

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 50-		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee			
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 50		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	
2.	Height of Structure ____ ft.	
3.	Area — Largest Floor ____ sq. ft.	
4.	New Building Area ____ sq. ft.	
5.	Volume of New Structure ____ cu. ft.	
6.	Construction Classification	
7.	Total Land Area Disturbed ____ sq. ft.	
8.	Flood Hazard Zone	
9.	Base Flood Elevation ____ ft.	
10.	Wetlands yes ____	
	no ____	
11.	Max. Live Load	
12.	Max. Occupancy Load	

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☐ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition	5,000								
TOTAL COSTS									

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A., or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature_____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

16 Mostyn Rd
53/56
03-0631

EJM Contracting Company

FUEL TANK AND SITE RESTORATION SERVICES
Established 1982 ■ Robert Norman, President
P.O. Box 669 ■ Madison, NJ 07940

Randolph 973-895-6059 Fax 973-895-4255

FACSIMILE TRANSMITTAL

To Bldg Dept Fax

From Bob Norman Date 11/4/03

Regarding Disposal Tickets

CC:

Pages

For Review

Please Comment

Please Reply

SJC Builders obtained tank removal permit

Disposal ticket enclosed
Mostyn Road Residence

FTMS, INC.
310-16TH ST
CARLSTADT, NJ 07072
PH: 201-372-9333

Customer's Order No.	Phone No.	Date
		7-3-03

Sold To: EJH - SJC Builders

Address: Mountain Rd

City: Randolph

Sold By	Cash	C.O.D.	Charge	On Acct.	Mdse. Ret'd.	Paid Out	

Qty	Description	Price	Amount	
	Pumped 38 gallons			
	from 1-1000 gal tank			
	Manifest UV6 3797695			

All claims and returned goods MUST be accompanied by this bill.

Tax

Rec'd. By

Total

240114

Thank You

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 08-05-03
Control #
Permit # 03-0907

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

Block 53 Lot 56
Work Site Location 16 MOSTYN RD
Owner in Fee SJC BUILDERS LLC
Address
Tele. (973) 927-1003
Contractor
Address SAME
Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No. [redacted]

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

DEMOLITION

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 [X] CA
Date: 1/2/04
Approved by: [signature]

INSPECTIONS Type:	Failure	Failure	Approval	Initial
			Dates (Month/Day)	
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other PRE DRYW			9/11/03	[signature]
Final			1/2/04	[signature]
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] 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)
$

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

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. Alteration $ _____
3. Total (1+2) $ 5,000

U.C.C. F110
(rev. 3/96)

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

SIGN-OFF SHEET

NAME SJC Builders BLOCK: 53 LOT: 56

ADDRESS: 16 Mostyn Rd PERMIT NUMBER:

DESCRIPTION OF WORK TO BE DONE: Demolition

PRIOR TO PERMIT ISSUE: **PRIOR TO C.O.:**

DEPT.	DATE	SIGNATURE	COMMENTS	DATE	SIGNATURE	COMMENTS
ZONE OFFICER	8/4/03			11/9/04		
PLANNING	↓	↓		↓	↓	
DEVELOPER'S FEE	↓	↓		↓	↓	
SOIL EROSION FEE	↓	↓		↓	↓	
TREE REMOVAL FEE	↓	↓		10/27/04	PL	36 Replaced
STEEP SLOPE	↓	↓		↓	↓	
LANDMARKS	↓	↓		↓	↓	
ENGINEERING						
EASEMENTS						
PUBLIC WATER						
PUBLIC SEWER						
HEALTH (WELL, SEPTIC RECYCLE)	8-5-03		Septic abandoned	10-29-04		Abandoned 8-5-03
CONSTRUCTION OFFICIAL						
BUILDING						
FIRE						
ELECTRIC						
PLUMBING						

Township of Randolph

MUNICIPAL BUILDING
502 MILLBROOK AVENUE
RANDOLPH, N.J. 07869-3799

Telephone (973) 989-7100
FAX (973) 989-7076

ADDENDUM TO CONSTRUCTION PERMIT APPLICATION

All Construction Permit applicants must complete the following form.

Please provide complete and accurate answers to the following questions to determine if your project conforms with the current Land Development Ordinance standards. The accuracy of the answers is the responsibility of the applicant. If an applicant is unsure of any of the questions as they pertain to this particular project, it is strongly suggested that an engineer or other land use specialist be consulted to determine the land characteristics associated with this project.

1. Is this property connected to the public sewer system?
   /___/ yes /X/ no
   If no, the location of the septic system must be indicated on the survey.

2. Is this property connected to the public water system?
   /X/ yes /___/ no
   If no, the location of the well must be indicated on the survey.

3. Has this property been subject to any Planning Board approval?
   /X/ yes /___/ no

4. Has this property been subject to any Zoning Board of Adjustment approval?
   /___/ yes /X/ no

5. Does your project require the removal of 5 or more trees with a diameter of 8 inches or greater?
   /___/ yes /X/ no
   If yes, a Tree Protection Permit must be submitted.

6. Are there any steep sloped areas or hillsides that will be disturbed as part of this project?
   /___/ yes /X/ no
   If yes, a Steep Slope Disturbance application must be submitted.

7. Is your structure over 50 years old?
   /___/ yes /X/ no
   If yes, review by the Landmarks Committee is needed.

8. Is this property located adjacent to or near any river, stream, brook or waterway or in, near or adjacent to any freshwater wetland area or wetland transition area?
   /___/ yes /X/ no
   If yes, they must be delineated on a certified survey submitted with this application.

9. Are there any easements on this property?
   /___/ yes /X/ no
   If yes, they must be indicated on a certified survey submitted with this application.

10. Does this project involve any fill removal or fill deposition?
    /___/ yes /X/ no
    If yes, a Soil Erosion and Sediment Control application must be submitted.

The information provided above is true and correct to the best of my knowledge.

name

date

Demolition of a structure permit requirements
INTERNAL INSPECTION REPORT

Requirement	Complete	Incomplete	Comment
Exterminator certification	7/23/03		
Electric utility certification	7/28/03		
Natural gas utility certification			N/A
Propane tank certification			N/A
Water utility certification	7/7/03		
Sewer utility certification	1/6/99		
Health department certification (septic)	7/9/03		
Underground fuel tanks removed	7/7/03		
Above ground fuel tanks removed			N/A
Abandoned well certification			N/A
Property survey	✓		
Permit issued	✓		
Pre-demolition inspection	8/11/03		
Final inspection	1/2/04		
Certificate of approval			

Block 53 Lot 56 Address 16 Mostyn Rd.

Construction Official Frank Howard Date 1/7/04

Thomas J. Schimminger
Lic. #262878
(973)887-0837

Complete Extermination
Monthly Services
Termite Control

New Jersey Sanitary Services
Pest Control
3 Stonehill Rd.
Randolph N.J. 07869

July 23 2003

Township of Randolph

16 Mostyn Rd., Randolph, N.J.

Re: Pest Control (baited for demolition)

Dear Gentlemen,

This is to certify that the above property was exterminated for rodents and was found vermin free. Should you have any questions, please do not hesitate to contact me.

cell # (973)879-8873

Very Truly Yours,

N.J. Sanitary Service LLC
Bus. Lic. #98133A

Jersey Central
Power & Light
A FirstEnergy Company

Richboynton Road
Dover, NJ 07801

July 28, 2003

Jay Villoresi
16 Mostyn Rd
Randolph, NJ 07869

To Whom It May Concern:

This letter confirms that on July 28, 2003 JCP&L Co. performed a field inspection of the building listed below and has determined that our electric service equipment (cables and meters) have been removed from the following location(s) :

16 Mostyn Rd Meter# G20107565

This notification is effective as of the above listed date and certifies the referenced facility is now electrically safe for demolition. This does not mean, however, that all other utilities are detached from the structure.

If you have any questions, please contact GPU Energy at 973-537-2603 weekdays between 7:00am and 3:00pm.

Sincerely,

Patricia Olsen
Chief Operating Clerk
JCP&L Co.

Township of Randolph

MUNICIPAL BUILDING
502 MILLBROOK AVENUE
RANDOLPH, N.J. 07869-3799

Township Manager
John C. Lovell

Township Clerk
Frances S. Bertrand

Telephone (973) 989-7100
FAX (973) 989-7076

July 17, 2003

Attention: JAY
SJC Builders
879 Route 10
Randolph, NJ 07869

SUBJECT: 16 Mostyn Road
Randolph, NJ 07869

Gentlemen:

Please be advised that the **water connection** to the above mentioned property has been disconnected. The property is not tied into the Township sewer system at this time.

Should you have any questions regarding this, please feel free to contact this office.

Sincerely,

Patrick DiEduardo

Patrick DiEduardo
Water and Sewer Foreman

PD:dl

Township of Randolph

MUNICIPAL BUILDING
502 MILLBROOK AVENUE
RANDOLPH, N.J. 07869-3799

Telephone (973) 989-7100
FAX (973) 989-7076

January 6, 1999

Mr. Egil Quam
16 Mostyn Road
Randolph, NJ 07869

SUBJECT: Block 53, Lot 56
Mt. Fern Sanitary Sewer Project II

Dear Mr. Quam:

Thank you for supplying Mr. Werner's letter dated September 17, 1991, wherein he confirmed that for Randolph Township Municipal Utilities Authority granted your request for a waiver from connection to the sanitary sewers for your home at 16 Mostyn Road.

At the time this office wrote to you requiring that the connection be made we were not aware of this waiver.

Our review of Mr. Werner's letter indicates that you are correct and that the Township will not require a connection to the sanitary sewer system. As you know, the former MUA did install a stub at your property, which would be available to you should you require a connection at a later date so long as gallonage is available at that time.

We will update our files to indicate that the connection of your house in not required at this time.

Sincerely yours,

Carl J. Bressan, P.E., P.P.
Township Engineer

CJB:dl
cc: John Lovell, Township Manager
Clem Ferdinando, Heath Officer
Patrick DiEduardo, Water and Sewer Foreman

Township of Randolph

Municipal Building

MILLBROOK AVENUE • RANDOLPH, N.J. 07869

MEMORANDUM

FROM: Gary Lindsay, Construction Official

TO: Landmarks Committee

PERMIT APPLICATION FORM - LANDMARKS STRUCTURE

Date: 7-30

Please be advised that an application has been received for property known as Block 53 Lot 56.

Applicant's Name: SJC Builders Phone No (973) 927-1003

Address of Structure: 16 Mosyn Rd

The applicant wishes to obtain a permit for:

X Demolition _____ Addition

_____ Other (specify) _____

Description of work to be done i.e. specifics, dimensions: _____

_____

_____

Is applicant: Owner X, Tenant _____, Contractor _____

TOWNSHIP OF RANDOLPH

ADDENDUM TO BUILDING PERMIT APPLICATION

Please provide complete and accurate answers to the following questions to determine if your project conforms with current Land Development Ordinance standards.

1. Does your proposed project require the removal of five or more trees with a diameter of 18"?

   a. If yes, please review Section 15-48.8 and submit a tree removal permit application.

   b. If no, no application is required.

2. Are there any steeply sloped areas or hillsides on your property?

   _____Yes _____X_____No

3. Will there be disturbance of these areas as a part of this project?

   a. If no, no application is required.

   b. If yes, please answer the following questions:

      (1) Are the slopes greater than 15%, or will there be more than a three foot change in elevation over a 20 foot distance?

      _____Yes _____X_____No

      (2) Will the proposed project disturbance in the steep sloped areas of 15% or greater be more than 2,000 sq. ft.?

      _____Yes _____X_____No

      If yes, provide a steep slope disturbance application in conformance with Section 15-44 of the Land Development Ordinance. The steep slope disturbance application shall be submitted and approved prior to obtaining building permit authorization.

4. Is your structure over 50 years old? _____Yes _____X_____No

The information provided above is true and correct to the best of my knowledge.

_____
Printed Name

_____
Legal Signature

Township of Randolph

MUNICIPAL BUILDING
502 MILLBROOK AVENUE
RANDOLPH, N.J. 07869-3799

Telephone (201) 989-7100
FAX (201) 989-7076

RANDOLPH TOWNSHIP HEALTH DEPARTMENT

SEWAGE SYSTEM ABANDONMENT RECORD

Date of Inspection: 7-9-03

Street Address: 16 Mostyn Rd.

Block: 53 Lot: 56 Inspector: PB

Current Owner: SJC Builders

Contractor: owner

Components Abandoned: 1 septic tank(s) _____ pump tank(s) _____ seepage pit(s) _____ cesspool

Total Gallons of Liquid Waste Removed: 1,000

Reason for Abandonment: Existing house to be razed for new development.

Comments: advised Jay that there may be a second septic tank. He will search for same.

• Jay was unable to locate a second tank.

10/07

Kathy re: 16 Mostyn Rd.
Do you have a copy of pumping ticket in file?
NO Thanks JG
Pete inspected 7/9/03
Faxed 11/10/03

TOWNSHIP OF RANDOLPH
CONSTRUCTION OFFICE

DEMOLITION OF A STRUCTURE & PERMIT REQUIREMENTS

Prior to the issuance of a permit to demolish any structure, the following is required:

1. Certification from a licensed exterminator that the premises has been baited and free of vermin.
   Yes___ **No**___ **Date Baited** 7-28 **Exterminator** NJ Sanitary Services

2. Certification that the following utilities have been disconnected and made safe:

a. Electric service from GPU / PSE&G or local electric carrier.	Yes X	No___	N/A___
b. Natural gas service from NJ Natural Gas / PSE&G.	Yes___	No___	N/A X
c. Liquified propane tank(s) from appropriate firm.	Yes___	No___	N/A X
d. City water service from Randolph Township or Town of Dover.	Yes X	No___	N/A___
e. City sewer from Randolph Township.	Yes___	No X	N/A___
f. Septic system abandonment from Randolph Health Department.	Yes X	No___	N/A___

3. All underground fuel tanks of any type are removed under a permit from this office. **Yes** X **No**___ **N/A**___

4. All aboveground fuel tanks are removed. **Yes**___ **No**___ **N/A** X

5. Name of DEP licensed hauler EJM Contracting

6. If any well exists on the property, it is to be properly abandoned in accordance with NJSA 58:4A-4.1 et. seq. Additional information is attached. **Yes** ___ **No**___ **N/A** X

7. A property survey showing all structures on the property with those to be demolished indicated. site plan attached to new plans **Yes** X **No**___ **N/A**___

8. Approval from Landmarks Committee must be included with permit if required when applying for demolition. **Yes**___ **No**___ **N/A** X

All of the above must be submitted with the application prior to the issuance of a permit.

Once a permit is issued, a pre-demolition inspection of the property is required by this office.
Inspection is tentatively scheduled for: Date: ~~8-1-03~~ 8-11-03

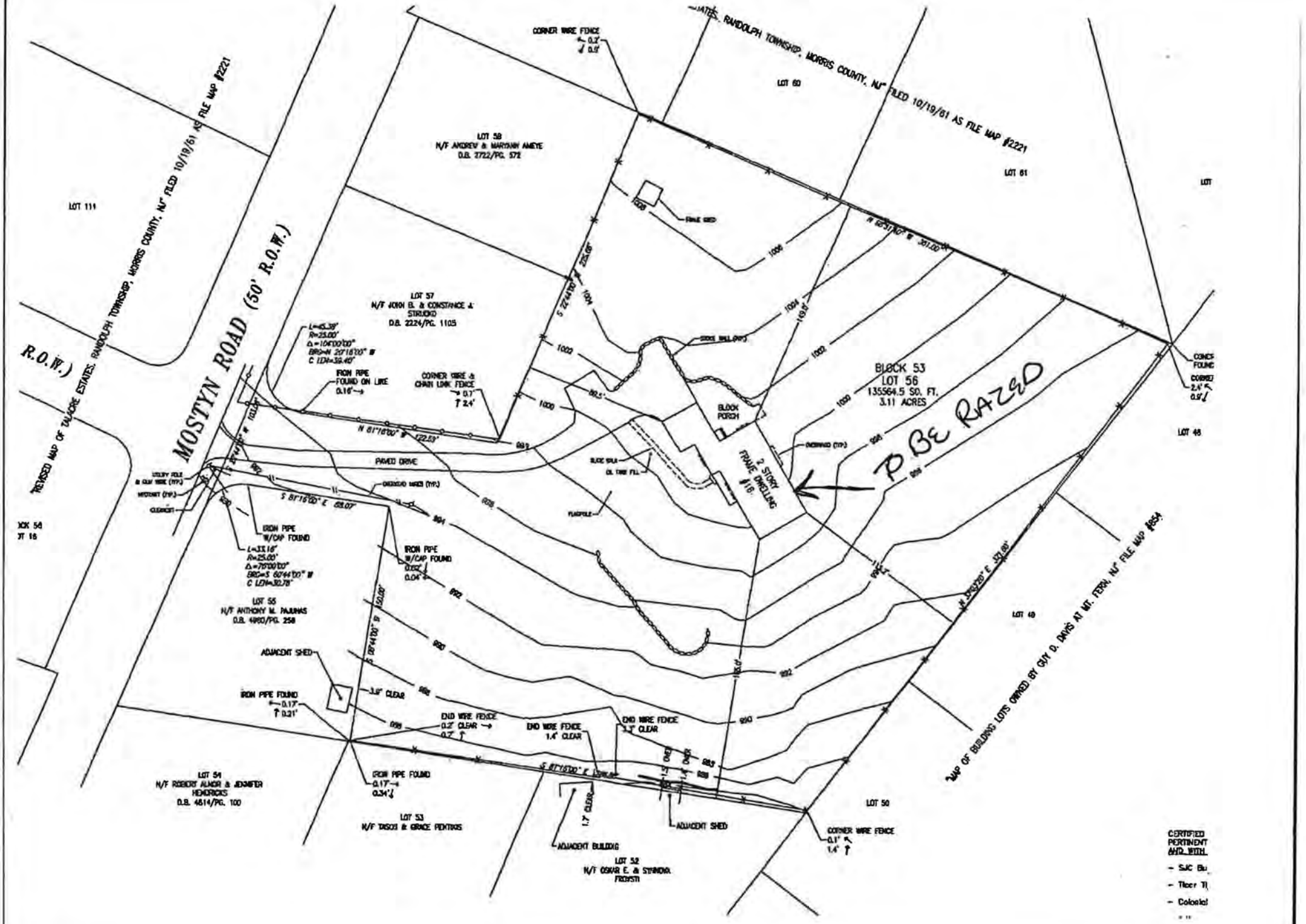
Once the structure is demolished, a final inspection by this office is required. At that time, the well abandonment information is required. All debris from the demolition must be removed from the site by an approved hauler. The property is to be graded off so water will not run off onto adjacent property and is to be seeded.

Once all required information is received, a Certificate of Approval will be issued.

Should you have any questions, please call the Construction Office at 973-989-7070.

Signature of property owner: Sal Campo **Date:** 7-18-03
Print property owner(s) name: _____
Address: 16 Mostyn Rd **Block:** 53 **Lot:** 56

Revised 2/21/2002MPC


MOSTYN ROAD (50' R.O.W.)
REVISED MAP OF VALHORE ESTATES, RANDOLPH TOWNSHIP, MORRIS COUNTY, NJ" FILED 10/19/61 AS FILE MAP #2221
R.O.W.)
LOT 111
LOT 58
N/F ANDREW & MARYANN AMEYE
D.B. 2722/PG. 572
LOT 60
LOT 61
LOT 57
N/F JOHN B. & CONSTANCE J. STRUDKO
D.B. 2224/PG. 1105
BLOCK 53
LOT 56
135564.5 SQ. FT.
3.11 ACRES
2 STORY FRAME DWELLING #18
TO BE RAZED
BLOCK PORCH
FRAME SHED
PAVED DRIVE
IRON PIPE FOUND ON LINE
CORNER WIRE & CHAIN LINK FENCE
CORNER WIRE FENCE
LOT 55
N/F ANTHONY M. PAJUNAS
D.B. 4980/PG. 258
IRON PIPE W/CAP FOUND
ADJACENT SHED
IRON PIPE FOUND
END WIRE FENCE
LOT 54
N/F ROBERT ALNOR & JENNIFER HENDRICKS
D.B. 4614/PG. 100
LOT 53
N/F TASOS & GRACE PENTARIS
ADJACENT BUILDING
LOT 52
N/F OSWAR E. & STRINDA FROYSTH
LOT 50
LOT 49
LOT 48
MAP OF BUILDING LOTS OWNED BY GUY D. DAVIS AT MT. FERN, NJ" FILE MAP #654
CORNER WIRE FENCE
CERTIFIED
PERTINENT
AND WITH
- SJC Bu
- Tiber Ti
- Colonial