Laura Burns

From: Valerie Egan
Sent: Thursday, May 26, 2022 9:26 AM
To: Laura Burns
Subject: FW: OPRA request - Verifying status of permits

-----Original Message-----
From: Rodrigo <opra+request-32223-fbf52235@requests.opramachine.com>
Sent: Wednesday, May 25, 2022 7:46 PM
To: Valerie Egan <Vegan@hopatcong.org>
Subject: OPRA request - Verifying status of permits

CAUTION:

This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Hopatcong Borough,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested:

Hello- please provide any documentation regarding open permits or if they are closed and any other possible violations. 115 Monroe Trl Hopatcong, NJ 07843. Thanks.

-NONE

30216-41

NONE

emailed entire file (LB)

Yours faithfully,
Rodrigo

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-32223-fbf52235@requests.opramachine.com

Is vegan@hopatcong.org the wrong address for OPRA requests to Hopatcong Borough? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=hopatcong_borough

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
https://opramachine.com/help/officers

View this OPRA request & responses online:

Recd. 4/2/82 #1233

BOROUGH OF HOPATCONG
BUILDING DEPARTMENT

RIVER STYX ROAD
HOPATCONG, N.J. 07843 - 1599
TEL: (201) 770-1200

30'x16'
4

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

NO. ______ STREET ______

IMPORTANT – *Applicant to complete all items in sections: I, II, III, IV, and IX.*

I. LOCATION OF BUILDING

AT (LOCATION) 115 (NO.) MONROE TRAIL (STREET) ZONING DISTRICT ______

BETWEEN ______ (CROSS STREET) AND ______ (CROSS STREET)

SUBDIVISION ______ LOT 41 BLOCK 30204 LOT SIZE 60' x 100'

II. TYPE AND COST OF BUILDING – *All applicants complete Parts A – D*

A. TYPE OF IMPROVEMENT

1 ☐ New building
2 ☐ Addition (*If residential, enter number of new housing units added, if any, in Part D, 13*)
3 ☒ Alteration (*See 2 above*)
4 ☐ Repair, replacement
5 ☐ Wrecking (*If multifamily residential, enter number of units in building in Part D, 13*)
6 ☐ Moving (relocation)
7 ☐ Foundation only

B. OWNERSHIP

8 ☐ Private (individual, corporation, nonprofit institution, etc.)
9 ☐ Public (Federal, State, or local government)

D. PROPOSED USE – *For "Wrecking" most recent use*

Residential
12 ☐ One family
13 ☐ Two or more family – *Enter number of units* ——→ ______
14 ☐ Transient hotel, motel, or dormitory – *Enter number of units* ——→ ______
15 ☐ Garage
16 ☐ Carport
17 ☒ Other – *Specify* Repair EXISTING Bldg. & change roof line ON foyer Entrance way

Nonresidential
18 ☐ Amusement, recreational
19 ☐ Church, other religious
20 ☐ Industrial
21 ☐ Parking garage
22 ☐ Service station, repair garage
23 ☐ Hospital, institutional
24 ☐ Office, bank, professional
25 ☐ Public utility
26 ☐ School, library, other educational
27 ☐ Stores, mercantile
28 ☐ Tanks, towers
29 ☐ Other – *Specify* ______

C. C

FIELD COPY

BOROUGH OF HOPATCONG
BUILDING DEPARTMENT
RIVER STYX ROAD
HOPATCONG, N. J. 07843
TEL.: (201) ~~398-5161~~ 770-1200
3[redacted]

BUILDING PERMIT

Final 1/18/84

DATE April 5 19 82 PERMIT NO. 1233

APPLICANT James E. Johnson ADDRESS 115 (NO.) Monroe Tr (STREET) ______ (CONTR'S LICENSE)

Repair foyer & Entr. way

PERMIT TO alteration add Spyglight (TYPE OF IMPROVEMENT) ______ NO. STORY ______ (PROPOSED USE) NUMBER OF DWELLING UNITS ______

AT (LOCATION) 115 (NO.) Monroe Trail, Hopatcong, N.J. 07843 (STREET) ZONING DISTRICT ______

BETWEEN ______ (CROSS STREET) AND ______ (CROSS STREET)

SUBDIVISION ______ LOT 41 BLOCK 30216 LOT SIZE ______

BUILDING IS TO BE ______ FT. WIDE BY ______ FT. LONG BY ______ FT. IN HEIGHT AND SHALL CONFORM IN CONSTRUCTION

TO TYPE ______ USE GROUP ______ BASEMENT WALLS OR FOUNDATION ______ (TYPE)

REMARKS: ______

AREA OR VOLUME ______ (CUBIC/SQUARE FEET) ESTIMATED COST $ 75.00 PERMIT FEE $ 15/00

OWNER James E. Johnson
ADDRESS 115 Monroe Tr. Hopatcong, N.J. 07843

BUILDING DEPT. BY Robert S. Yates

FORM NO. BOCA - BP 1969

BOROUGH OF HOPATCONG, NEW JERSEY

Application for Zoning Permit

Office Use Only

Date Rec'd 4/2/82 Time 4:25 By [illegible]

INSTRUCTIONS

1. Please use ball pen or type. Do not use pencil.
2. Please answer all questions. If the answer is "none", state "none".
3. Attach a plot plan or survey map, drawn to scale, showing what exists now on the property and what changes you propose to make. Include existing and proposed structures, paved areas, signs, etc and show their dimensions and distances from all property lines and roads.

Name of Applicant	Name of Owner (if different from applicant)
James E. Johnson	/
Address of Applicant 115 MONROE TRAIL HOPATCONG N.J.	Address of Owner (if different)

Phone number of applicant: 3[redacted]

What is the present use of the principal building?

RESIDENTIAL

What is the proposed use of the principal building?

RESIDENTIAL

What are the present uses of any accessory buildings?

FOYER ENTRANCE WAY

What are the proposed uses of any accessory buildings?

FOYER ENTRACE WAY Was Existing

What are the proposed uses of any new structures or additions for which a zoning permit is requested?

Changed Roof Slope TO PREVENT LEAKING

State whether the premises or property has been the subject of any prior application(s) to the Zoning Board of Adjustment or the Planning Board. If none, state none. If so, state the nature of the application, the date, and the action(s) of the Board(s).

Street Address of premises: 115 MONROE TRAIL Block # 30204 Lot # 41 Zone

I hereby make application for a zoning permit for the changes described above and on the attached plot plan or survey map. I understand that this is not a building permit, which requires a separate application. I certify that the answers to the above questions and any statements or representations made on attachments to this application are true and complete to the best of my knowledge.

Date 4/2/82

James E. Johnson
Signature of Applicant (individual)

Name of Corporation or Association

Attest _____ *Secretary*

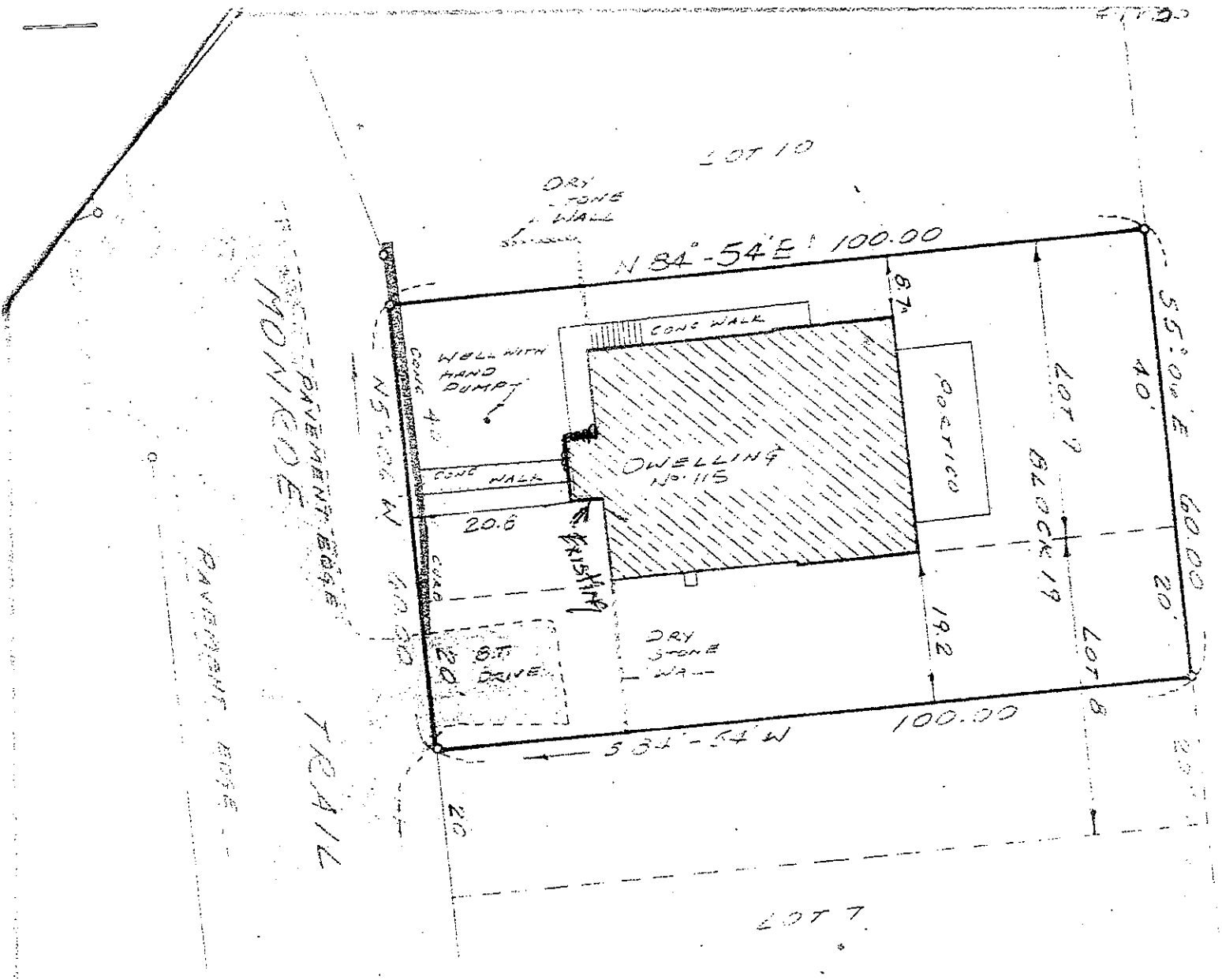
By: _____

DO NOT WRITE IN THIS SPACE

(✓) The use or change is permitted by ordinance. Permit issued - No. _____ Date 4/5/82.

( ) Variance application recommended.

per [illegible]



SURVEY OF

THE WESTERLY ONE HALF OF LOT 8 AND ALL OF LOT 9 IN BLOCK 19
AS SHOWN ON A MAP ENTITLED
"REVISION OF MAP #2
HOPATCONG HILLS
BORO. OF HOPATCONG, SUSSEX CO., N.J.
SCALE 1" = 100' AUG. 1931, WM. EARL, SURVEYOR 732 MAIN ST, BOONTON, N.J.
FILED IN THE SUSSEX COUNTY CLERKS OFFICE 7/19/55 AS MAP #338 A

SCALE 1" = 20' AUGUST 21, 1976
FRANK PESCE, SURVEYOR, LIC. NO 4190
459 U.S. HWY. ROUTE #46, KENVIL, NJ.

CONSTRUCTION PERMIT

Date Issued 8/13/90
Control #
Permit # 10442

IDENTIFICATION Block 3036 Lot 44

Work Site Location 115 Monroe Tpk

Owner in Fee Shea
Address 115 Monroe Tpk
Hope
Tele. ( ) —

Contractor Homecraft
Address 115 Rt. 46
Mt Lakes NJ
Tele. ( ) 402-8480
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:

Siding

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 $ 9477

Paul L Steward (EJ)
CONSTRUCTION OFFICIAL

PAYMENTS **(Office Use Only)**	
Building	50 —
Plumbing	
Electrical	
Fire Protection	
Other	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	50 —
Check No.	
Cash	8/13/90
Collected By:	EJ

U.C.C. Form F-170A

(see reverse side)

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

CEIVE
AUG 13 1990
OF HOPA

BUILDING SUBCODE TECHNICAL SECTION

Date Received 8/13/90 30416-41
Date Issued
Control #
Permit # 10442

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

Block 3026 Lot 41
Work Site Location 115 Monroe Tr. Hopatcong
Owner in Fee Shea
Address [redacted]
Tele. ( ) [redacted]
Contractor Homecraft Const. of NJ Inc
Address 115 Rt 46 Mt. Lakes
Tele. ( ) 402-8150
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. [redacted] 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

Vinyl siding
1/2 insulation
Fascia / soffit
Over existing sidewalls

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[✓] No Plans Req.	8/13/90	PAS
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [✓] CA		
Date:		
Approved By:		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present 5B Proposed 5B
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 $ 9477
3. Total (1+2) $ 9477

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

(Office Use Only)
FEE
$
50

Administrative Surcharge $
Paid [✓] Check # Cash Minimum Fee $
Collected by: (AW) TOTAL FEE $ 57

U.C.C. Form F-110A 1 White=Inspector Copy 2 Canary=Office Copy

BOROUGH OF HOPATCONG
111 RIVER STYX RD
HOPATCONG, N.J. 07843

Date Issued 6/8/05
Control # C30216/41
Permit # 05-843

UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 30216 Lot 41 Qual

Work Site Location 115 MONROE TRAIL
SEWERS
Owner in Fee KHAN
Address SAME
HOPATCONG, NJ 07843-
Telephone ( ) -

Contractor LARRY BANNAT
Address 6 LONGWOOD LAKE RD.
OAK RIDGE, NJ 07438-
Telephone (973) 697-9639
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. [redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SEWER CONNECTION

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 $ 1,200

William O'Connor (SD)
Construction Official

6/8/05
Date

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	65
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	2
Cert. of Occupancy	0
Other	
Total	67
Check No.	# 3196
Cash	
Collected By	(SD)

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

BOROUGH OF HOPATCONG
111 RIVER STYX RD
HOPATCONG, N.J. 07843

Date Issued 05/24/07
Control #
Permit # 05-843

UCC NEW JERSEY
CERTIFICATE

Gravity

IDENTIFICATION

Block 30216 Lot 41 Qual

Work Site Location 115 MONROE TRAIL
SEWERS

Owner in Fee/Occupant KHAN

Address SAME
HOPATCONG, NJ 07843-

Telephone ( ) -

Contractor LARRY BANNAT

Address 6 LONGWOOD LAKE RD.
OAK RIDGE, NJ 07438-

Telephone (973)697-9639 Fax ( ) -

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. [redacted]

Home Warranty No.

[ ] State [ ] Private

Use Group U-

Maximum Live Load 0

Construction Classification

Maximum Occupancy Load 0

Description of Work/Use:

SEWER CONNECTION

[ ] 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 _____, ____.

Fee $ 0
Paid [X] Check No. 3198
Collected by: SJH

Construction Official

U.C.C. F260 (rev. 3/96)

RECEIVED
JUN 07 2005
BOROUGH OF HOPATCONG
CONSTRUCTION DEPT.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 6/8/05
Control #

Date Issued
Permit # 05-843

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

Block 30216 Lot 41 Qualification Code
Work Site Location 115 Monroe Trail
Hopatcong
Owner in Fee Khan
Address
Tel (973) [redacted]
Contractor Bimart
Address Oak Ridge, NJ
Tel (973) 697-9639 FAX ( )
Contractor License No. [redacted]
Federal Emp. No.

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 $ 1200 —

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 6/8/05
Approved by: wide

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: 6/9/05
Approved by: wide

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer			6/9/05	wide
Fixtures				
Gas Equipment				
Gas Piping				
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.

TANK Pumped and Filled - 6/9/05
Field

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

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

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

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $ 6.5
TOTAL FEE $

U.C.C. F130 (rev. 1/04)
Internet version

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

BOROUGH OF HOPATCONG
111 RIVER STYX RD
HOPATCONG, N.J. 07843

Date Issued 1 / 1 / 2306
Control # C30216/41
Permit # 06-153

UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 30216 Lot 41 Qual

Work Site Location 115 MONROE TRAIL
SERVICE
Owner in Fee KHAN
Address SAME
HOPATCONG, NJ 07843-
Telephone (973[redacted]

Contractor COUNTY ELECTRIC CO
Address 74 NOLANS PT RD
LK HOPATCONG, NJ 07849-
Telephone (973) 663-4789
Lic. No. or Bldrs. Reg. No.
Federal 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:

SERVICE

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

Estimated Cost of Work $ 1,300

William O'Connor
Construction Official

1/18/06
Date

PAYMENTS (Office Use Only)

Building	0
Electrical	46
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	2
Cert. of Occupancy	0
Other	
Total	48
Check No.	[illegible]
Cash	
Collected By	[illegible]

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

BOROUGH OF HOPATCONG
111 RIVER STYX RD
HOPATCONG, N.J. 07843

Date Issued 03/07/06
Control #
Permit # 06-153

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 30216 Lot 41 Qual
Work Site Location 115 MONROE TRAIL
SERVICE
Owner in Fee/Occupant KHAN
Address SAME
HOPATCONG, NJ 07843-
Telephone (973) [redacted]
Contractor COUNTY ELECTRIC CO
Address 74 NOLANS PT RD
LK HOPATCONG, NJ 07849-
Telephone (973)663-4789 Fax ( ) -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22[redacted]

Home Warranty No.
[ ] State [ ] Private
Use Group U-
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

SERVICE
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 _____, ____.

William O'Connor

Construction Official

Fee $ 0
Paid [X] Check No. 1126
Collected by: SJH

U.C.C. F260 (rev. 3/96)

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 1/23/06

Date Issued / Permit # 06-153

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

Block 30216 Lot 41 Qualification Code

Work Site Location 115 Monroe Ter

Owner in Fee ZABE KHAN

Address 115 Monroe Ter
Hopatcong, NJ 07843

Tel (973) [redacted]

Contractor COUNTY ELECTRIC Co.

Address 74 Nolan's Point Rd
W Hopatcong, NJ 07849

Tel (973) 663-0199 FAX ( )

Contractor License No. 5089

Federal Emp. No. [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Residence Utility Co. JCP&L

Est. Cost of Elec. Work $ 4300.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[✓] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved

Date: 1/11/06 M

Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date: 1/11/06

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			1/25 LR	
Final				
Barrier-Free				

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.

Frank Abruzzi
Applicant's Signature/Contractor's Seal and Signature

[✓] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] 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	200	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $ 46

TOTAL FEE $

BOROUGH OF HOPATCONG
111 RIVER STYX RD
HOPATCONG, N.J. 07843

Date Issued 8/4/2010
Control # C30216/41
Permit # 10-449

UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 30216 Lot 41 Qual

Work Site Location 115 MONROE TRAIL
ROOF
Owner in Fee WAAL
Address SAME
HOPATCONG, NJ 07843-
Telephone ( ) -

Contractor AMERICAN HOME IMPROVEMENT
Address 45 SO PARK PL
MORRISTOWN, NJ 07960-
Telephone (973)216-7862
Lic. No. or Bldrs. Reg. No. 13VH04654900
Federal Emp. No. -

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ROOF

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 $ 4,300

C. William O'Brien
Construction Official

08/04/10
Date

PAYMENTS (Office Use Only)

Building	65
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	7
Cert. of Occupancy	0
Other	
Total	72
Check No.	1146
Cash	
Collected By	DH

20134

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

BOROUGH OF HOPATCONG
111 RIVER STYX RD
HOPATCONG, N.J. 07843

Date Issued 03/18/15
Control #
Permit # 10-449

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 30216 Lot 41 Qual
Work Site Location 115 MONROE TRAIL
ROOF
Owner in Fee/Occupant WAAL
Address SAME
HOPATCONG, NJ 07843-
Telephone ( ) -
Contractor AMERICAN HOME IMPROVEMENT
Address 45 SO PARK PL
MORRISTOWN, NJ 07960-
Telephone (973)216-7862 Fax ( ) -
Lic. No. or Bldrs. Reg. No. 13VH04654900
Federal Emp. No. -

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

ROOF

[ ] CERTIFICATE OF OCCUPANCY

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

[ ] CERTIFICATE OF 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

[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.

[ ] CERTIFICATE OF CONTINUED OCCUPANCY

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

[ ] TEMPORARY CERTIFICATE OF 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 COMPLIANCE

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

Fee $ 0
Paid [X] Check No. 1146
Collected by: SJH

William O'Connor
Construction Official

U.C.C. F260 (rev. 3/96)

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 8/4/2010

Date Issued Permit # 10-449

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

Block 30216 Lot 41 Qualification Code _____

Work Site Location 115 MONROE TRAIL

Hopatcong NJ

Owner in Fee: WHITE

Tel. (____) _____ e-mail _____

Address 115 MONROE TRAIL
street municipality zip code

Contractor: AMERICAN H. IMP Tel. (973) 216 7866

Address 45 SO PARK PL e-mail _____

MORRISTOWN NJ

Contractor License No. or Builder Registration No. 13VH04654900 Exp. Date _____

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

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[✓] No Plans Required	08/04/10	WJOC
[ ] 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 [ ] TCO [✓] CA

Date: 09/11/15

Approved by: WJOC

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 Roof			09/11/15	WJOC
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 $ _____
3. Total (1+ 2) $ 4300

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.

Ron Jessen
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

New Roof

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)

$ _____

Administrative Surcharge $ 11

Minimum Fee $ 60

State Permit Surcharge Fee $ _____

TOTAL FEE $ _____

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