



TOWN OF DOVER
 37 North Sussex Street
 Dover, NJ 07801-0798
 973-3662200

Block: 1204 Lot: 5 Qualification Code:

Work Site Location: 83 WEST BLACKWELL ST

Owner in Fee: SHEIKU, MOHAMMAD

Address: 83 WEST BLACKWELL ST

DOVER NJ 07801

Telephone:

Agent/Contractor:

Address:

D & S RESTORATION
 20 CALIFORNIA AVE
 PATERSON NJ 07503

Telephone: 201 345-8685

Lic. No./ Bldgs. Reg.No.:

Social Security No.:

Federal Emp. No.:

CERTIFICATE OF OCCUPANCY

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

CERTIFICATE OF APPROVAL

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

TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

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

CERTIFICATE IDENTIFICATION

Date Issued: 09/11/1996
 Control #: 3336
 Permit #: 96430

Home Warranty No:

Type of Warranty Plan:

Use Group:

Maximum Live Load:

Construction Classification:

Maximum Occupancy Load:

Certificate Exp Date:

Description of Work/User: LEAD ABATEMENT

State Private

R-3

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

Thomas Mahoney Construction Official

U.C.C 260 (rev. 5/03)

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

Fees: \$0.00

Paid Check No.: 5392

Collected by: RN



TOWN OF DOVER
 37 North Sussex Street
 Dover, NJ 07801-0798
 973 - 3662200

Permit Number: 96430
 Update Number:
 Control Number: 3336
 Application Date: 08/23/1996
 Permit Date: 08/27/1996

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 1204	Lot: 5	Qualification Code:	
Work Site Location:	83 WEST BLACKWELL ST	Contractor:	D & S RESTORATION
Owner In Fee:	SHEIKU, MOHAMMAD	Address:	20 CALIFORNIA AVE
Address:	83 WEST BLACKWELL ST		PATERSON NJ 07503
	DOVER NJ 07801	Telephone:	(201) 345-8685
Telephone:	[REDACTED]	Lic. No. / Bldrs. Reg. No.:	
Use Group(s):	R-3	Federal Emp. No.:	

is hereby granted permission to perform the following work :

- | | | |
|--|--|-------------------------------------|
| <input checked="" type="checkbox"/> BUILDING | <input type="checkbox"/> PLUMBING | <input type="checkbox"/> DEMOLITION |
| <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> FIRE PROTECTION | <input type="checkbox"/> OTHER |
| <input type="checkbox"/> ELEVATOR DEVICES | <input type="checkbox"/> MECHANICAL | |
| <input type="checkbox"/> ASBESTOS ABATEMENT | <input type="checkbox"/> LEAD HAZARD ABATEMENT | |

(Subchapter 8 only)

DESCRIPTION OF WORK:
 LEAD ABATEMENT

ESTIMATED COST OF WORK:

Cost of Construction: 0.00
 Cost of Rehabilitation: 600.00
 Cost of Demolition: 0.00

Total Cost:	\$600.00
--------------------	-----------------

PAYMENTS	(Office Use Only)
Building	\$50.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	
DCA Minimum Fee	\$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$50.00
All Fees Waived:	No

Amount to be Paid: \$50.00
 Check Number: 5392
 Check amount: \$50.00

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.

Thomas Mahoney
 Construction Official

Date

Collected by: RN
 Receipt No: 88863B
 Total Cash Amount:
 Total Check Amount: \$50.00
 Total CC Amount:
 Grand Total: \$50.00

- :: Failure to obtain all required inspections may result in administrative action.
- :: Final inspections are required before final payment is to be made to contractor.
- :: An approved set of plans must be kept at the worksite at all times

Note: