

TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

Date Issued 03/09/01  
Control #  
Permit # 01-034

### UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 9 Lot 5 Qual \_\_\_\_\_

Work Site Location 14 CRANBURY STATION/HGHTSWN Contractor \_\_\_\_\_  
Address \_\_\_\_\_

Owner in Fee ROBERT A. DEBAUN, JR.  
Address \_\_\_\_\_

Telephone ( \_\_\_\_\_ )

Lic. No. or Bldrs. Reg. No. \_\_\_\_\_

Telephone ( \_\_\_\_\_ )

Federal Emp. No. \_\_\_\_\_

Is hereby granted permission to perform the following work:

- BUILDING
- PLUMBING
- ASBESTOS ABATEMENT
- ELECTRICAL
- FIRE PROTECTION
- ELEVATOR DEVICES
- MECHANICAL
- DEMOLITION
- OTHER \_\_\_\_\_

PAYMENTS (Office Use Only)

Building 40

Electrical 0

Plumbing 0

Fire Protection 0

Mechanical 0

Elevator Devices 0

Other \_\_\_\_\_

DCA State Permit Fee 3

Cert. of Occupancy 0

DESCRIPTION OF WORK:

VINYL SIDING - TAN

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

Total 43

Estimated Cost of Work \$ 4,000

Check No. 3396

Cash \_\_\_\_\_

Collected By KJ

03/09/01

Construction Official

Date

TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

UCC NEW JERSEY  
BUILDING  
SUBCODE  
TECHNICAL SECTION

Date Received 03/09/01  
Date Issued 03/09/01  
Control #  
Permit #01-034

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN SUBMITTING IN LIEU OF OATH

CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000. I hereby certify that I am the (agent of) owner

Block 9 Lot 5 Qual Qual of record and am authorized to make this application.

Work Site Location CRANBURY STATION/HGHTSWN

Owner in Fee ROBERT A. DEBAUN, JR. Signature \_\_\_\_\_

Address \_\_\_\_\_

D. TECHNICAL SITE DATA

Tel. ( ) \_\_\_\_\_ DESCRIPTION OF WORK

Contractor \_\_\_\_\_

Address \_\_\_\_\_ VINYL SIDING - TAN

Tel. ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ TYPE OF WORK FEE (Office Use Only)

Lic. No. or Bldrs. Reg. No. \_\_\_\_\_ [ ] New Building \$ \_\_\_\_\_ 0

Federal Emp. No. \_\_\_\_\_ [ ] Addition \_\_\_\_\_ 0

[X] Rehabilitation \_\_\_\_\_ 40

JOB SUMMARY (Office Use Only) INSPECTIONS Dates (Month/Day) [ ] Roofing \_\_\_\_\_ 0

PLAN REVIEW Date Initial Type: Failure/Approval Initial [ ] Siding \_\_\_\_\_ 0

[ ] No Plans Req \_\_\_\_\_ Footing \_\_\_\_\_ [ ] Fence 0 Height (exceeds 6') \_\_\_\_\_ 0

[ ] All \_\_\_\_\_ Footing Bond \_\_\_\_\_ [ ] Sign 0 Sq. Ft. \_\_\_\_\_ 0

[ ] Foot/Found \_\_\_\_\_ Foundation \_\_\_\_\_ [ ] Pool - Above Ground \_\_\_\_\_ 0

[ ] Struct/Frame \_\_\_\_\_ Slab \_\_\_\_\_ [ ] Pool - In Ground \_\_\_\_\_ 0

[ ] Exterior \_\_\_\_\_ Frame \_\_\_\_\_ [ ] Asbestos Abatement Subchapter 8 \_\_\_\_\_ 0

[ ] Interior \_\_\_\_\_ Truss/Brac \_\_\_\_\_ [ ] Lead Haz. Abatement NJAC 5:17 \_\_\_\_\_ 0

Joint Plan Review Required: BarrierFree \_\_\_\_\_ [ ] Other \_\_\_\_\_ 0

[ ] Elect [ ] Plumb [ ] Fire/Plum \_\_\_\_\_ Other \_\_\_\_\_ 0

SUBCODE APPR - PERM [ ] Electrical \_\_\_\_\_ Other \_\_\_\_\_ 0

Date: \_\_\_\_\_ Finishes-Fin \_\_\_\_\_ [ ] \_\_\_\_\_ 0

Approved By: \_\_\_\_\_ Energy \_\_\_\_\_ [ ] \_\_\_\_\_ 0

SUBCODE APPR - CERTIF Mechanical \_\_\_\_\_ [ ] \_\_\_\_\_ 0

[ ] CO [ ] CCO [ ] CA TCO \_\_\_\_\_ [ ] \_\_\_\_\_ 0

Date: \_\_\_\_\_ Other \_\_\_\_\_ [ ] \_\_\_\_\_ 0

Approved By: \_\_\_\_\_ Final \_\_\_\_\_ [ ] \_\_\_\_\_ 0

BarrierFree \_\_\_\_\_ [ ] \_\_\_\_\_ 0

B. BUILDING CHARACTERISTICS [ ] \_\_\_\_\_ 0

Use Group Present R-3 Propose R-3 Est. Cost of Bldg. Work: [ ] Demolition \_\_\_\_\_ 0

Constr. Class Present \_\_\_\_\_ Proposed \_\_\_\_\_ 1. New Bldg. \$ \_\_\_\_\_ 0

No. of Stories \_\_\_\_\_ 0 2. Alteration \$ \_\_\_\_\_ 4,000 Administrative Surcharge \_\_\_\_\_ 0

Height of Structure \_\_\_\_\_ 0 Est. Total (1+2) \$ \_\_\_\_\_ 4,000 Paid [X] Check # 396 Minimum Fee \_\_\_\_\_ 0

Area Largest Floor \_\_\_\_\_ 0 Sq. Ft. Collected by KJ \_\_\_\_\_ TOTAL FEE \_\_\_\_\_ 40

New Bldg. Area/All Floors \_\_\_\_\_ 0 Sq. Ft. Industrialized Building: \_\_\_\_\_

Volume of New Structure \_\_\_\_\_ 0 Cu. Ft. State Approved \_\_\_\_\_ State Permit Surcharge Fee \_\_\_\_\_ 3

Total Land Area Disturbed \_\_\_\_\_ 0 Sq. Ft. HUD \_\_\_\_\_ U.C.C. F110 (rev. 11/09)

TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

Date Issued 08/06/98  
Control #  
Permit # 08-194

UCC NEW JERSEY  
CONSTRUCTION  
PERMIT

IDENTIFICATION Block 9 Lot 5 Qual \_\_\_\_\_

Work Site Location 14 CRANBURY STATION/HGHTSWN Contractor \_\_\_\_\_  
Address \_\_\_\_\_

Owner in Fee ROBERT A. DEBAUN, JR.  
Address \_\_\_\_\_

Telephone ( \_\_\_\_\_ )

Lic. No. or Bldrs. Reg. No. \_\_\_\_\_

Telephone ( \_\_\_\_\_ )

Federal Emp. No. \_\_\_\_\_

Is hereby granted permission to perform the following work:

- BUILDING
- PLUMBING
- ASBESTOS ABATEMENT
- ELECTRICAL
- FIRE PROTECTION
- LEAD HAZARD ABATEMENT
- ELEVATOR DEVICES
- MECHANICAL
- DEMOLITION
- OTHER \_\_\_\_\_

PAYMENTS (Office Use Only)

Building 56  
 Electrical 0  
 Plumbing 0  
 Fire Protection 0  
 Mechanical 0  
 Elevator Devices 0  
 Other \_\_\_\_\_  
 DCA State Permit Fee 3  
 Cert. of Occupancy 0

DESCRIPTION OF WORK:

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

Estimated Cost of Work \$ 3,500

Total 59  
 Check No. 2301  
 Cash \_\_\_\_\_  
 Collected By KW

08/06/98

Construction Official

Date

TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

UCC NEW JERSEY  
BUILDING  
SUBCODE  
TECHNICAL SECTION

Date Received 08/06/98  
Date Issued 08/06/98  
Control #  
Permit #98-194

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN SUBMITTING IN LIEU OF OATH

CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000. I hereby certify that I am the (agent of) owner

Block 9 Lot 5 Qual Qual of record and am authorized to make this application.

Work Site Location CRANBURY STATION/HGHTSWN

Owner in Fee ROBERT A. DEBAUN, JR. Signature \_\_\_\_\_

Address \_\_\_\_\_

D. TECHNICAL SITE DATA

Tel. ( ) \_\_\_\_\_ DESCRIPTION OF WORK \_\_\_\_\_

Contractor \_\_\_\_\_

Address \_\_\_\_\_

Tel. ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ TYPE OF WORK FEE (Office Use Only)

Lic. No. or Bldrs. Reg. No. \_\_\_\_\_ [ ] New Building \$ \_\_\_\_\_ 0

Federal Emp. No. \_\_\_\_\_ [ ] Addition \_\_\_\_\_ 0

[X] Rehabilitation \_\_\_\_\_ 56

JOB SUMMARY (Office Use Only) INSPECTIONS Dates (Month/Day) [ ] Roofing \_\_\_\_\_ 0

PLAN REVIEW Date Initial Type: Failure/Approval Initial [ ] Siding \_\_\_\_\_ 0

[ ] No Plans Req \_\_\_\_\_ Footing \_\_\_\_\_ [ ] Fence 0 Height (exceeds 6') \_\_\_\_\_ 0

[ ] All \_\_\_\_\_ Footing Bond \_\_\_\_\_ [ ] Sign 0 Sq. Ft. \_\_\_\_\_ 0

[ ] Foot/Found \_\_\_\_\_ Foundation \_\_\_\_\_ [ ] Pool - Above Ground \_\_\_\_\_ 0

[ ] Struct/Frame \_\_\_\_\_ Slab \_\_\_\_\_ [ ] Pool - In Ground \_\_\_\_\_ 0

[ ] Exterior \_\_\_\_\_ Frame \_\_\_\_\_ [ ] Asbestos Abatement Subchapter 8 \_\_\_\_\_ 0

[ ] Interior \_\_\_\_\_ Truss/Brac \_\_\_\_\_ [ ] Lead Haz. Abatement NJAC 5:17 \_\_\_\_\_ 0

Joint Plan Review Required: BarrierFree \_\_\_\_\_ [ ] Other \_\_\_\_\_ 0

[ ] Elect [ ] Plumb [ ] Fire/Plum \_\_\_\_\_ Other \_\_\_\_\_ 0

SUBCODE APPR - PERM [ ] Electrical \_\_\_\_\_ Other \_\_\_\_\_ 0

Date: \_\_\_\_\_ Finishes-Fin \_\_\_\_\_ [ ] \_\_\_\_\_ 0

Approved By: \_\_\_\_\_ Energy \_\_\_\_\_ [ ] \_\_\_\_\_ 0

SUBCODE APPR - CERTIF Mechanical \_\_\_\_\_ [ ] \_\_\_\_\_ 0

[ ] CO [ ] CCO [ ] CA TCO \_\_\_\_\_ [ ] \_\_\_\_\_ 0

Date: \_\_\_\_\_ Other \_\_\_\_\_ [ ] \_\_\_\_\_ 0

Approved By: \_\_\_\_\_ Final \_\_\_\_\_ [ ] \_\_\_\_\_ 0

BarrierFree \_\_\_\_\_ [ ] \_\_\_\_\_ 0

B. BUILDING CHARACTERISTICS [ ] \_\_\_\_\_ 0

Use Group Present R-3 Propose R-3 Est. Cost of Bldg. Work: [ ] Demolition \_\_\_\_\_ 0

Constr. Class Present \_\_\_\_\_ Proposed \_\_\_\_\_ 1. New Bldg. \$ \_\_\_\_\_ 0

No. of Stories \_\_\_\_\_ 0 2. Alteration \$ \_\_\_\_\_ 3,500 Administrative Surcharge \_\_\_\_\_ 0

Height of Structure \_\_\_\_\_ 0 Est. Total (1+2) \$ \_\_\_\_\_ 3,500 Paid [X] Check # 301 Minimum Fee \_\_\_\_\_ 0

Area Largest Floor \_\_\_\_\_ 0 Sq. Ft. Collected by KW \_\_\_\_\_ TOTAL FEE \_\_\_\_\_ 56

New Bldg. Area/All Floors \_\_\_\_\_ 0 Sq. Ft. Industrialized Building: \_\_\_\_\_

Volume of New Structure \_\_\_\_\_ 0 Cu. Ft. State Approved State Permit Surcharge Fee \_\_\_\_\_ 3

Total Land Area Disturbed \_\_\_\_\_ 0 Sq. Ft. HUD \_\_\_\_\_

TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

Date Issued 06/16/21  
Control #  
Permit # 21-189

## UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 23 Lot 110 Qual \_\_\_\_\_

Work Site Location 14 CRANBURY NECK ROAD Contractor POOL TOWN

Address 5500 US HWY. 9 SOUTH

Owner in Fee SUONAVOLONTA, JOE HOWELL, NJ 07731-

Address 14 CRANBURY NECK ROAD

Telephone 732 901-9071

CRANBURY, NJ 08512-

Lic. No. or Bldrs. Reg. No. \_\_\_\_\_

Telephone 732 966-7750

Federal Emp. No. 2-2763004

Is hereby granted permission to perform the following work:

PAYMENTS (Office Use Only)

BUILDING X  PLUMBING  ASBESTOS ABATEMENT  Chapter 8 only  
 ELECTRICAL  FIRE PROTECTION  LEAD HAZARD ABATEMENT  
 ELEVATOR DEVICES  MECHANICAL  DEMOLITION  
 OTHER \_\_\_\_\_

Building 75

Electrical 53

Plumbing 40

Fire Protection 0

Mechanical 0

Elevator Devices 0

Other \_\_\_\_\_

DCA State Permit Fee 97

Cert. of Occupancy 0

DESCRIPTION OF WORK:

INGROUND POOL

~~Other~~ Total 265

Check No. 101

Cash \_\_\_\_\_

Collected By KW

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

Estimated Cost of Work \$ 51,050

06/16/21

Construction Official

Date

TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

UCC NEW JERSEY  
BUILDING  
SUBCODE  
TECHNICAL SECTION

Date Received 06/07/21  
Date Issued 06/16/21  
Control #  
Permit #21-189

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN SUBSCRIBED IN LIEU OF OATH

CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000. I hereby certify that I am the (agent of) owner

Block 23 Lot 110 Qual of record and am authorized to make this application.

Work Site Location CRANBURY NECK ROAD

Owner in Fee BUONAVOLONTA, JOE Signature

Address 14 CRANBURY NECK ROAD

CRANBURY, NJ 08512-

D. TECHNICAL SITE DATA

Tel. 732 896-7750 DESCRIPTION OF WORK

Contractor POOL TOWN INGROUND POOL

Address 5500 US HWY. 9 SOUTH

HOWELL, NJ 07731-

Tel. 732 901-9071 Fax ( ) - TYPE OF WORK FEE (Office Use Only)

Lic. No. or Bldrs. Reg. No. [ ] New Building \$ 0

Federal Emp. N22-2763004 [ ] Addition 0

[X] Rehabilitation 0

JOB SUMMARY (Office Use Only) INSPECTIONS Dates (Month/Day) [ ] Roofing 0

PLAN REVIEW Date Initial Type: Failure/Approval Initial [ ] Siding 0

[ ] No Plans Req Footing [ ] Fence 0 Height (exceeds 6') 0

[ ] All Footing Bond [ ] Sign 0 Sq. Ft. 0

[ ] Foot/Found Foundation [ ] Pool - Above Ground 0

[ ] Struct/Frame Slab [X] Pool - In Ground 75

[ ] Exterior Frame [ ] Asbestos Abatement Subchapter 8 0

[ ] Interior Truss/Brac [ ] Lead Haz. Abatement NJAC 5:17 0

Joint Plan Review Required: BarrierFree [ ] Other 0

[ ] Elect [ ] Plumb [ ] Fimeulation Other 0

SUBCODE APPR - PERM [ ] E wishes-Bas Other 0

Date: Finishes-Fin [ ] 0

Approved By: Energy [ ] 0

SUBCODE APPR - CERTIF Mechanical [ ] 0

[ ] CO [ ] CCO [ ] CA TCO [ ] 0

Date: Other [ ] 0

Approved By: Final [ ] 0

BarrierFree [ ] 0

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Propose R-5 Est. Cost of Bldg. Work: [ ] Demolition 0

Constr. Class Present Proposed 1. New Bldg. \$ 0

No. of Stories 0 2. Alteration \$ 50,000 Administrative Surcharge 0

Height of Structure 0 Est. Total (1+2) \$ 50,000 Paid [X] Check #01 Minimum Fee 0

Area Largest Floor 0 Sq. Ft. Collected by KW TOTAL FEE 75

New Bldg. Area/All Floors 0 Sq. Ft. Industrialized Building:

Volume of New Structure 0 Cu. Ft. State Approved State Permit Surcharge Fee 95

Total Land Area Disturbed 0 Sq. Ft. HUD

TOWNSHIP OF CRANBURY  
 23-A NORTH MAIN STREET  
 CRANBURY, N.J. 08512

UCC NEW JERSEY  
**ELECTRICAL**  
**SUBCODE**  
**TECHNICAL SECTION**

Date Received 06/07/21  
 Date Issued 06/16/21  
 Control #  
 Permit # 21-189

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. ~~WHEN CHANGING SITE DATA~~

CONTRACTORS. NOTIFY THIS OFFICE. DO UTILITY DIG NO: 1-800-272-1000		QTY	ITEM	QTY	ITEM	
Block <u>23</u>	Lot <u>110</u>	<u>Qual</u>	<u>0</u>	<u>Lighting Fixtures</u>	<u>0</u>	<u>Motors-Fract HP</u>
Work Site Location <u>LAN CRANBURY NECK ROAD</u>			<u>1</u>	<u>Receptacles</u>	<u>0</u>	<u>Emergency &amp; Exit Lights</u>
			<u>2</u>	<u>Switches</u>	<u>0</u>	<u>Communications Points</u>
Owner in Fee <u>BUONAVOLONTA, JOE</u>			<u>0</u>	<u>Detectors</u>	<u>0</u>	<u>Alarm Devices/F.A.C. Panel</u>
Address <u>14 CRANBURY NECK ROAD</u>			<u>0</u>	<u>Light Poles</u>		
<u>CRANBURY, NJ 08512-</u>			QTY	SIZE	ITEM	FEE (Office Use Only)
Tel <u>(732) 896-7750</u>			<u>3</u>		Total Qty: Fixt/Recept/Misc	<u>33</u>
Contractor <u>F.P. HARE ELECTRIC, LLC</u>			<u>1</u>		Pool Permit with UW Lights	<u>10</u>
Address <u>136 CEDAR DRIVE</u>			<u>0</u>		Storable Pool/Spa/Hot Tub	<u>0</u>
<u>LANOKA HARBOR, NJ 08734-</u>			<u>0</u>	<u>0</u>	KW Elect Range/Receptacle	<u>0</u>
Tel <u>(732) 608-3811</u> Fax ( ) -			<u>0</u>	<u>0</u>	KW Oven/Surface Unit	<u>0</u>
Lic. No. or Bldrs. Reg. <u>16020</u>			<u>0</u>	<u>0</u>	KW Elect Water Heater	<u>0</u>
Federal Emp. <u>N26-0684107</u>			<u>0</u>	<u>0</u>	KW Elect Dryer/Receptacle	<u>0</u>
			<u>0</u>	<u>0</u>	KW Dishwasher	<u>0</u>

B. ELECTRICAL CHARACTERISTICS

Use Group Present <u>R-5</u> Proposed <u>R-5</u>			<u>0</u>	<u>0</u>	HP Garbage Disposal	<u>0</u>
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____			<u>0</u>	<u>0</u>	KW Central A/C Unit	<u>0</u>
Building Occupied as _____ Utility Co. _____			<u>0</u>	<u>0</u>	HP/KW Space Heater/Air Handler	<u>0</u>
Estimated Cost of Electrical Work <u>\$00</u>			<u>0</u>	<u>0</u>	KW Baseboard Heat	<u>0</u>
			<u>0</u>	<u>0</u>	HP Motors 1/+ HP	<u>0</u>
			<u>0</u>	<u>0</u>	KW Transformer/Generator	<u>0</u>
JOB SUMMARY (Office Use Only) INSPECTIONS Dates (Month/Day)			<u>0</u>	<u>0</u>	AMP Service	<u>0</u>
PLAN REVIEW Type Failure Approval Initial			<u>0</u>	<u>0</u>	AMP Subpanels	<u>0</u>
[ ] No Plans Required Rough _____			<u>0</u>	<u>0</u>	AMP Motor Control Center	<u>0</u>
[ ] Partial -Underslab Util Appr Fr _____			<u>0</u>	<u>0</u>	KW Elect Sign/Outline Light	<u>0</u>
Date: _____ Appr by: _____ Trench _____					Other <u>1-2HP MOTORS</u>	<u>10</u>
[ ] Elect Plans Approved Temp Serv _____					Other _____	<u>0</u>
Date: _____ Appr by: _____ Const Serv _____					Other _____	<u>0</u>
Joint Plan Review Required: TCO _____			[ ]			<u>0</u>
[ ] Build [ ] Plumb [ ] Other _____			[ ]			<u>0</u>
SUBCODE APPR - PERM [ ] E Service _____			[ ]			<u>0</u>
Date: _____ Appr by: _____ Final _____			[ ]			<u>0</u>
SUBCODE APPR - CERTIF Barrier Fr _____			[ ]			<u>0</u>
[ ] CO [ ] CCO [ ] CA Temp. Cut-in-Card Date Issued _____			[ ]			<u>0</u>
Date: _____ Appr by: _____ Final Cut-in-Card Date Issued _____			[ ]			<u>0</u>
<u>AnnPoolIns</u>			[ ]			<u>0</u>
Date of Gnd/Bond 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	Administrative Surcharge	<u>0</u>
to make this application and perform the work listed on this application	Minimum Fee	<u>0</u>
	TOTAL FEE	<u>53</u>
	DCA State Permit Fee	<u>2</u>

Signature/Contractor Seal

[ ] Licensed Elect Contr [ ] Certif Landscape Irrig Contr [ ] Exempt Applicant

TOWNSHIP OF CRANBURY  
 23-A NORTH MAIN STREET  
 CRANBURY, N.J. 08512

UCC NEW JERSEY  
**PLUMBING**  
**SUBCODE**  
**TECHNICAL SECTION**

Date Received 06/07/21  
 Date Issued 06/16/21  
 Control #  
 Permit # 21-189

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. ~~WHEN CHANGING SITE DATA~~ (List all fixtures)

CONTRACTORS. NOTIFY THIS OFFICE. DO UTILITY DIG NO: 1-800-272-1000	QTY	FIXTURE/EQUIPMENT	FEE (Office Use Only)
Block <u>23</u> Lot <u>110</u> Qual _____	<u>0</u>	Water Closet	<u>0</u>
Work Site Location <u>CRANBURY NECK ROAD</u>	<u>0</u>	Urinal / Bidet	<u>0</u>
	<u>0</u>	Bath Tub	<u>0</u>
Owner in Fee <u>BUONAVOLONTA, JOE</u>	<u>0</u>	Lavatory	<u>0</u>
Address <u>14 CRANBURY NECK ROAD</u>	<u>0</u>	Shower	<u>0</u>
<u>CRANBURY, NJ 08512-</u>	<u>0</u>	Floor Drain	<u>0</u>
Tel. <u>732 896-7750</u>	<u>0</u>	Sink	<u>0</u>
Contractor <u>POOL TOWN</u>	<u>0</u>	Dishwasher	<u>0</u>
Address <u>5500 US HWY. 9 SOUTH</u>	<u>0</u>	Drinking Fountain	<u>0</u>
<u>HOWELL, NJ 07731-</u>	<u>0</u>	Washing Machine	<u>0</u>
Tel. <u>732 901-9071</u> Fax ( ) -	<u>0</u>	Hose Bibb	<u>0</u>
Lic. No. or Bldrs. Reg. No. _____	<u>0</u>	Water Heater	<u>0</u>
Federal Emp. <u>N22-2763004</u>	<u>0</u>	Fuel Oil Piping	<u>0</u>
	<u>0</u>	Gas Piping	<u>0</u>
	<u>0</u>	Steam Boiler	<u>0</u>
	<u>0</u>	Hot Water Boiler	<u>0</u>
	<u>0</u>	Sewer Pump	<u>0</u>
	<u>0</u>	Interceptor / Separator	<u>0</u>
	<u>0</u>	Backflow Preventer	<u>0</u>
	<u>0</u>	Greasetrap	<u>0</u>
	<u>0</u>	Sewer Connection	<u>0</u>
	<u>0</u>	Water Service Connection	<u>0</u>
	<u>0</u>	Stacks	<u>0</u>
	<u>0</u>	Other <u>2 MAIN DRAIN</u>	<u>16</u>
	<u>0</u>	Other _____	<u>0</u>
	<u>0</u>	Other _____	<u>0</u>

B. PLUMBING CHARACTERISTICS

Use Group - Present <u>5</u> Proposed _____	<u>0</u>	Hot Water Boiler	<u>0</u>
Building Sewer Size _____ [ ] Public Sewer [ ] Private Septic _____	<u>0</u>	Sewer Pump	<u>0</u>
Water Sewer Size _____ [ ] Public Water [ ] Private Well _____	<u>0</u>	Interceptor / Separator	<u>0</u>
Estimated Cost of Plumbing Work \$ <u>50</u>	<u>0</u>	Backflow Preventer	<u>0</u>
	<u>0</u>	Greasetrap	<u>0</u>
	<u>0</u>	Sewer Connection	<u>0</u>
	<u>0</u>	Water Service Connection	<u>0</u>
	<u>0</u>	Stacks	<u>0</u>
	<u>0</u>	Other <u>2 MAIN DRAIN</u>	<u>16</u>
	<u>0</u>	Other _____	<u>0</u>
	<u>0</u>	Other _____	<u>0</u>

JOB SUMMARY (Office Use Only)	INSPECTIONS	Dates (Month/Day)	_____	_____	_____
PLAN REVIEW	Type	Failure	Approval	Initial	_____
[ ] No Plans Required	Slab	_____	_____	_____	<u>0</u>
[ ] Partial - Underslab Util. Appr	Water	_____	_____	_____	<u>0</u>
Date: _____ Appr by: _____	Sewer	_____	_____	_____	<u>0</u>
[ ] Plumb Plans Approved	Fixtures	_____	_____	_____	<u>0</u>
Date: _____ Appr by: _____	Gas Equip	_____	_____	_____	<u>0</u>
Joint Plan Review Required: _____	_____	_____	_____	_____	<u>0</u>
[ ] Build [ ] Elect [ ] Gas Piping	_____	_____	_____	_____	<u>0</u>
SUBCODE APPR - PERM [ ] EL Gas Tank	_____	_____	_____	_____	<u>0</u>
Date: _____ Appr by: _____	Fuel Oil Pip	_____	_____	_____	<u>0</u>
SUBCODE APPR - CERTIF Solar _____	_____	_____	_____	_____	<u>0</u>
[ ] CO [ ] CCO [ ] CA TCO _____	_____	_____	_____	_____	<u>0</u>
Date: _____ Appr by: _____	Final	_____	_____	_____	<u>0</u>

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	Administrative Surcharge	<u>0</u>
to make this application and perform the work listed on this application	Minimum Fee	<u>24</u>
	TOTAL FEE	<u>40</u>
	DCA State Permit Fee	<u>0</u>

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant



TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

Update Issue 07/27/18  
Control #  
Permit # 17-258+A  
Permit Issue 08/02/17

## UCC NEW JERSEY PERMIT UPDATE

IDENTIFICATION Block 23 Lot 110 Qual \_\_\_\_\_

Work Site Location 14 CRANBURY NECK ROAD Contractor RFQ TESTING SERVICES

Address 14 DOWNING PLACE

Owner in Fee SUONAVOLONTA, JOE HARRINGTON PARK, NJ 07640-

Address 14 CRANBURY NECK ROAD Telephone 201 814-4009

CRANBURY, NJ 08512- Lic. No. or Bldrs. Reg. 4047

Telephone 732 896-7750 Federal Emp. No. 1-3694756

Is hereby granted permission to perform the following work:

- BUILDING             PLUMBING     ASBESTOS ABATEMENT     Chapter 8 only  
 ELECTRICAL             FIRE PROTECTION     LEAD HAZARD ABATEMENT  
 ELEVATOR DEVICES     MECHANICAL     DEMOLITION  
 OTHER \_\_\_\_\_

DESCRIPTION OF WORK:

ANNUAL BACKFLOW TESTING (1)

Estimated Cost of Work \$ 150

PAYMENTS (Office Use Only)

Building 0

Electrical 0

Plumbing 50

Fire Protection 0

Mechanical 0

Elevator Devices 0

Other \_\_\_\_\_

DCA State Permit Fee 1

Cert. of Occupancy 0

Other \_\_\_\_\_

Total 51

Check No. 7038

Cash \_\_\_\_\_

Collected By KW

07/27/18

Construction Official

Date

TOWNSHIP OF CRANBURY  
 23-A NORTH MAIN STREET  
 CRANBURY, N.J. 08512

UCC NEW JERSEY  
**PLUMBING**  
**SUBCODE**  
**TECHNICAL SECTION**

Date Received 07/24/18  
 Date Issued 07/27/18  
 Control #  
 Permit # 17-258+A

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. ~~WHEN CHANGING SITE DATA~~ (List all fixtures)

CONTRACTORS. NOTIFY THIS OFFICE. DO UTILITY DIG NO: 1-800-272-1000	QTY	FIXTURE/EQUIPMENT	FEE (Office Use Only)
Block <u>23</u> Lot <u>110</u> Qual _____	<u>0</u>	Water Closet	<u>0</u>
Work Site Location <u>CRANBURY NECK ROAD</u>	<u>0</u>	Urinal / Bidet	<u>0</u>
	<u>0</u>	Bath Tub	<u>0</u>
Owner in Fee <u>BUONAVOLONTA, JOE</u>	<u>0</u>	Lavatory	<u>0</u>
Address <u>14 CRANBURY NECK ROAD</u>	<u>0</u>	Shower	<u>0</u>
<u>CRANBURY, NJ 08512-</u>	<u>0</u>	Floor Drain	<u>0</u>
Tel. <u>732 896-7750</u>	<u>0</u>	Sink	<u>0</u>
Contractor <u>RFQ TESTING SERVICES</u>	<u>0</u>	Dishwasher	<u>0</u>
Address <u>14 DOWNING PLACE</u>	<u>0</u>	Drinking Fountain	<u>0</u>
<u>HARRINGTON PARK, NJ 07640-</u>	<u>0</u>	Washing Machine	<u>0</u>
Tel. <u>201 314-4009</u> Fax ( ) -	<u>0</u>	Hose Bibb	<u>0</u>
Lic. No. or Bldrs. Reg. <u>4010</u>	<u>0</u>	Water Heater	<u>0</u>
Federal Emp. No. <u>1-3694756</u>	<u>0</u>	Fuel Oil Piping	<u>0</u>
	<u>0</u>	Gas Piping	<u>0</u>

B. PLUMBING CHARACTERISTICS

Use Group - Present <u>5</u> Proposed _____	<u>0</u>	Hot Water Boiler	<u>0</u>
Building Sewer Size _____ [ ] Public Sewer [ ] Private Septic _____	<u>0</u>	Sewer Pump	<u>0</u>
Water Sewer Size _____ [ ] Public Water [ ] Private Well _____	<u>0</u>	Interceptor / Separator	<u>0</u>
Estimated Cost of Plumbing Work \$ <u>50</u>	<u>0</u>	Backflow Preventer	<u>0</u>
	<u>0</u>	Greasetrap	<u>0</u>

JOB SUMMARY (Office Use Only)	INSPECTIONS	Dates (Month/Day)		
PLAN REVIEW	Type	Failure	Approval	Initial
[ ] No Plans Required	Slab	_____	_____	<u>0</u>
[ ] Partial - Underslab Util. Appr	Water	_____	_____	<u>0</u>
Date: _____ Appr by: _____	Sewer	_____	_____	<u>0</u>
[ ] Plumb Plans Approved	Fixtures	_____	_____	<u>0</u>
Date: _____ Appr by: _____	Gas Equip	_____	_____	<u>0</u>
Joint Plan Review Required:	Gas Piping	_____	_____	<u>0</u>
[ ] Build [ ] Elect [ ] Gas Piping	Gas Tank	_____	_____	<u>0</u>
SUBCODE APPR - PERM [ ] EL	Fuel Oil Pip	_____	_____	<u>0</u>
Date: _____ Appr by: _____	Solar	_____	_____	<u>0</u>
SUBCODE APPR - CERTIF	TCO	_____	_____	<u>0</u>
[ ] CO [ ] CCO [ ] CA	Final	_____	_____	<u>0</u>
Date: _____ Appr by: _____		_____	_____	<u>0</u>

C. CERTIFICATION IN LIEU OF OATH	Administrative Surcharge	<u>0</u>
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	Permit Fee	<u>038</u>
	Minimum Fee	<u>0</u>
	TOTAL FEE	<u>50</u>
	DCA State Permit Fee	<u>1</u>

Signature/Contractor Seal  
 Licensed Plumbing Contractor  Exempt Applicant

TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

Date Issued 08/02/17  
Control #  
Permit # 7-258

### UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 23 Lot 110 Qual \_\_\_\_\_

Work Site Location 14 CRANBURY NECK ROAD Contractor FANA REMODELING, INC.

Address 1612 REED ROAD

Owner in Fee SUONAVOLONTA, JOE PENNINGTON, NJ 08534-

Address 14 CRANBURY NECK ROAD Telephone 609 #77-2855

CRANBURY, NJ 08512- Lic. No. or Bldrs. Reg. No. \_\_\_\_\_

Telephone 732 #96-7750 Federal Emp. N52-2371818

Is hereby granted permission to perform the following work:

PAYMENTS (Office Use Only)

- BUILDING [ ] PLUMBING [ ] ASBESTOS ABATEMENT Chapter 8 only  
[ ] ELECTRICAL [ ] FIRE PROTECTION LEAD HAZARD ABATEMENT  
[ ] ELEVATOR DEVICES [ ] MECHANICAL [ ] DEMOLITION  
[ ] OTHER \_\_\_\_\_

Building 40

Electrical 0

Plumbing 0

Fire Protection 0

Mechanical 0

Elevator Devices 0

Other \_\_\_\_\_

DCA State Permit Fee 15

Cert. of Occupancy 0

DESCRIPTION OF WORK:

REMOVE ROOFING AND REPLACE

Total 55

Check No. 2713

Cash \_\_\_\_\_

Collected By KW

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

Estimated Cost of Work \$ 8,000

08/02/17

Construction Official

Date

TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

UCC NEW JERSEY  
BUILDING  
SUBCODE  
TECHNICAL SECTION

Date Received 07/13/17  
Date Issued 08/02/17  
Control #  
Permit #17-258

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN SUBMITTING IN LIEU OF OATH

CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000. I hereby certify that I am the (agent of) owner

Block 23 Lot 110 Qual of record and am authorized to make this application.

Work Site Location CRANBURY NECK ROAD

Owner in Fee BUONAVOLONTA, JOE Signature

Address 14 CRANBURY NECK ROAD

CRANBURY, NJ 08512-

D. TECHNICAL SITE DATA

Tel. 32 896-7750 DESCRIPTION OF WORK

Contractor FANA REMODELING, INC. REMOVE ROOFING AND REPLACE

Address 1612 REED ROAD

PENNINGTON, NJ 08534-

Tel. 609 477-2855 Fax ( ) - TYPE OF WORK FEE (Office Use Only)

Lic. No. or Bldrs. Reg. No. [ ] New Building \$ 0

Federal Emp. N52-2371818 [ ] Addition 0

[X] Rehabilitation 0

JOB SUMMARY (Office Use Only) [X] Roofing 40

PLAN REVIEW Date Initial Type: Failure/Approval Initial [ ] Siding 0

[ ] No Plans Req Footing [ ] Fence 0 Height (exceeds 6') 0

[ ] All Footing Bond [ ] Sign 0 Sq. Ft. 0

[ ] Foot/Found Foundation [ ] Pool - Above Ground 0

[ ] Struct/Frame Slab [ ] Pool - In Ground 0

[ ] Exterior Frame [ ] Asbestos Abatement Subchapter 8 0

[ ] Interior Truss/Brac [ ] Lead Haz. Abatement NJAC 5:17 0

Joint Plan Review Required: BarrierFree [ ] Other 0

[ ] Elect [ ] Plumb [ ] Fire/Plum [ ] Other 0

SUBCODE APPR - PERM [ ] Electrical-Wishes-Bas Other 0

Date: Finishes-Fin [ ] 0

Approved By: Energy [ ] 0

SUBCODE APPR - CERTIF Mechanical [ ] 0

[ ] CO [ ] CCO [ ] CA TCO [ ] 0

Date: Other [ ] 0

Approved By: Final [ ] 0

BarrierFree [ ] 0

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Propose R-5 Est. Cost of Bldg. Work: [ ] Demolition 0

Constr. Class Present Proposed 1. New Bldg. \$ 0

No. of Stories 0 2. Alteration \$ 8,000 Administrative Surcharge 0

Height of Structure 0 Est. Total (1+2) \$ 8,000 Paid [X] Check #713 Minimum Fee 0

Area Largest Floor 0 Sq. Ft. Collected by KW TOTAL FEE 40

New Bldg. Area/All Floors 0 Sq. Ft. Industrialized Building:

Volume of New Structure 0 Cu. Ft. State Approved State Permit Surcharge Fee 15

Total Land Area Disturbed 0 Sq. Ft. HUD U.C.C. F110 (rev. 11/09)

TOWNSHIP OF CRANBURY  
23-A NORTH MAIN STREET  
CRANBURY, N.J. 08512

Date Issued 08/19/08  
Control #  
Permit # 08-236

UCC NEW JERSEY  
CONSTRUCTION  
PERMIT

IDENTIFICATION Block 23 Lot 110 Qual \_\_\_\_\_

Work Site Location 14 CRANBURY NECK ROAD Contractor CLOVER ELECTRIC SERVICE

Address PO BOX 330

Owner in Fee SUONAVOLONTA, JOE SPOTSWOOD, NJ 08884-

Address 14 CRANBURY NECK ROAD Telephone 732 #16-0126

CRANBURY, NJ 08512- Lic. No. or Bldrs. Reg. # 9721

Telephone 732 #96-7750 Federal Emp. No. 06-1075382

Is hereby granted permission to perform the following work:

- BUILDING  PLUMBING  ASBESTOS ABATEMENT  Chapter 8 only  
 ELECTRICAL  FIRE PROTECTION  LEAD HAZARD ABATEMENT  
 ELEVATOR DEVICES  MECHANICAL  DEMOLITION  
 OTHER \_\_\_\_\_

DESCRIPTION OF WORK:

ELECTRICAL RENOVATIONS

PAYMENTS (Office Use Only)

Building \_\_\_\_\_ 0

Electrical \_\_\_\_\_ 119

Plumbing \_\_\_\_\_ 0

Fire Protection \_\_\_\_\_ 0

Mechanical \_\_\_\_\_ 0

Elevator Devices \_\_\_\_\_ 0

Other \_\_\_\_\_

DCA State Permit Fee 2

Cert. of Occupancy 0

NOTE: If construction does not commence within one (1) year of date of issue, \_\_\_\_\_

or if construction ceases for a period of six (6) months, this permit is void. Total \_\_\_\_\_ 121

Estimated Cost of Work \$ 1,800

Check No. \_\_\_\_\_

Cash \_\_\_\_\_ X

Collected By KW

08/19/08

Construction Official

Date

TOWNSHIP OF CRANBURY  
 23-A NORTH MAIN STREET  
 CRANBURY, N.J. 08512

UCC NEW JERSEY  
**ELECTRICAL**  
**SUBCODE**  
**TECHNICAL SECTION**

Date Received 08/05/08  
 Date Issued 08/19/08  
 Control #  
 Permit #08-236

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. ~~WHEN CHANGING SITE DATA~~

CONTRACTORS. NOTIFY THIS OFFICE. DO UTILITY DIG NO: 1-800-272-1000		QTY ITEM	QTY ITEM
Block 23	Lot 110	Qual	0 Lighting Fixtures
Work Site Location <u>CRANBURY NECK ROAD</u>		1 Receptacles	0 Motors-Fract HP
Owner in Fee <u>BUNONAVOLONTA, JOE</u>		0 Switches	0 Emergency & Exit Lights
Address <u>14 CRANBURY NECK ROAD</u>		0 Detectors	0 Communications Points
<u>CRANBURY, NJ 08512-</u>		0 Light Poles	0 Alarm Devices/F.A.C. Panel
Tel <u>(732) 896-7750</u>		QTY SIZE	ITEM
Contractor <u>GLOVER ELECTRIC SERVICE</u>			FEE (Office Use Only)
Address <u>PO BOX 330</u>		1	Total Qty: Fixt/Recept/Misc 33
<u>SPOTSWOOD, NJ 08884-</u>		0	Pool Permit with UW Lights 0
Tel <u>(732) 416-0126</u>	Fax ( ) -	0	Storable Pool/Spa/Hot Tub 0
Lic. No. or Bldrs. Reg. <u>9N1</u>		0 0	KW Elect Range/Receptacle 0
Federal Emp. <u>N26-1075382</u>		0 0	KW Oven/Surface Unit 0
		0 0	KW Elect Water Heater 0
		0 0	KW Elect Dryer/Receptacle 0
		0 0	KW Dishwasher 0

B. ELECTRICAL CHARACTERISTICS

Use Group Present <u>R-5</u>	Proposed <u>R-5</u>	0 0	HP Garbage Disposal 0
[ ] Pole/Pad # _____	[ ] Temporary	[ ] Other _____	0 0
Building Occupied as _____	Utility Co. _____	0 0	KW Central A/C Unit 0
Estimated Cost of Electrical Work <u>\$00</u>		0 0	HP/KW Space Heater/Air Handler 0
		0 0	KW Baseboard Heat 0
		0 0	HP Motors 1/+ HP 0
		0 0	KW Transformer/Generator 0
JOB SUMMARY (Office Use Only)	INSPECTIONS	Dates (Month/Day)	1 200
PLAN REVIEW	Type	Failure/Approval	Initial
[ ] No Plans Required	Rough		1 200
[ ] Partial - Underslab Util	Appr/Pr		0 0
Date: _____	Appr by: _____	Trench	0 0
[ ] Elect Plans Approved	Temp Serv		0 0
Date: _____	Appr by: _____	Const Serv	0 0
Joint Plan Review Required: TCO			[ ] _____ 0
[ ] Build [ ] Plumb [ ] Other			[ ] _____ 0
SUBCODE APPR - PERM [ ] E	Service		[ ] _____ 0
Date: _____	Appr by: _____	Final	[ ] _____ 0
SUBCODE APPR - CERTIF	Barrier Fr		[ ] _____ 0
[ ] CO [ ] CCO [ ] CA	Temp. Cut-in-Card	Date Issued	[ ] _____ 0
Date: _____	Appr by: _____	Final Cut-in-Card	Date Issued
		AnnPoolIns	[ ] _____ 0
		Date of Gnd/Bond 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	Administrative Surcharge	0
to make this application and perform the work listed on this application	Minimum Fee	0
	TOTAL FEE	119
	DCA State Permit Fee	2

Signature/Contractor Seal

[ ] Licensed Elect Contr [ ] Certif Landscape Irrig Contr [ ] Exempt Applicant

**TOWNSHIP OF CRANBURY**  
*Finance Division*  
*Office of the Tax Assessor*

**MEMORANDUM**

**TO:** Debbie Rubin, Township Clerk

**FROM:** David J. Levy, Tax Assessor

**SUBJECT:** **OPRA Request, 14 Cranbury Neck Road**

**DATE:** June 17, 2024

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There is currently an open permit for an in-ground pool that was issued on June 16, 2021. This permit has not been closed as of this date. Once it is, an added assessment will be imposed upon the property at an amount to be determined.

ADDED ASSESSMENT WORKSHEET

OWNER JOSEPH AND CHERYL BUONAVOLANTA DATE 6/16/2021  
LOCATION 14 CRANBURY NECK ROAD BLOCK 23  
LOT 110  
QUAL CODE \_\_\_\_\_

CLASS (1) (2) (3) (4) (5) (15)  
PERMIT NUMBER 21-189 CO DATE \_\_\_\_\_  
TYPE OF ADDED INGROUND POOL 24 X 41

INSPECTION DATE \_\_\_\_\_  
DATE OF OCCUPANCY \_\_\_\_\_  
TALKED WITH \_\_\_\_\_

ADDED CALCULATION

YEAR	_____
ADDED	_____
MONTHS	_____
PRO RATED	_____

SKETCH AND NOTES