

**Borough of Middlesex**  
**Open Public Records Act (OPRA) Request**

**Reference #** OPR-2024-00313

**Date Entered:** 7/21/2024 1:57:00 PM

Dear Dhasarathi R,

Your Open Public Records Act (OPRA) Request has been Fulfilled on .

The request sought access to the following records:

Please advise if the below address has any OPEN/PENDING/EXPIRED Permits and demolition permits that needs attention and any fees due currently.

Also advise if there are any Code Violation or fines due that needs attention currently.

Any unrecorded liens/fines/special assessments due.

Address: 529 Lorraine Ave, Middlesex, NJ 08846  
Block 303-Lot 49

**Fulfilled Reasons:**

The records are being transmitted to you via . Pursuant to N.J.S.A. 47:1A-5.b. the cost associated with this request is \$0.00.

Please do not reply directly to this email; this address is not monitored. If you have any questions please feel free to contact us at (732) 356-7400.

Sincerely,

Borough of Middlesex

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Please download these attachments from the links below:

- [9413b038-12024173855\\_Document\\_240826\\_095353.pdf](#)

BOROUGH OF MIDDLESEX  
1200 MOUNTAIN AVENUE  
MIDDLESEX, NJ 08846-2037

Date Issued 12/10/96  
Control #  
Permit # 96-491

UCC NEW JERSEY  
CERTIFICATE

IDENTIFICATION

Block 303 Lot 49  
Work Site Location 529 LORRAINE AVE  
Owner in Fee STERN(18,E)  
Address 529 LORRAINE AVE  
MIDDLESEX, NJ 08846-  
Telephone (908)627-2366  
Contractor STONE RIDGE RADON  
Address 27-2 IRONIA RD  
FLANDERS, NJ 07836-  
Telephone (201)927-7303  
Lic. No. or Bldrs. Reg. No. MLB90001  
Federal Emp. No. 22-3140424  
or Social Security No. \_\_\_\_\_

Home Warranty No. \_\_\_\_\_  
Type of Warranty Plan: [ ] State [ ] Private  
Use Group R-4  
Maximum Live Load 0  
Construction Classification \_\_\_\_\_  
Maximum Occupancy Load 0  
Description of Work/Use:

INSTALL ONE SUB PANEL SLAB VENTILATION SYSTEM IN  
WORKSHOP AREA OF THE BASEMENT

CERTIFICATE OF OCCUPANCY/APPROVAL

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 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 the following conditions must be met no later than \_\_\_\_\_, \_\_\_\_\_ or the owner will be subject to fine or order to vacate:

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 \_\_\_\_\_, \_\_\_\_\_.

Nancy A Kolly dm  
CONSTRUCTION OFFICIAL

Fee \$ 0  
Paid  Check No. 10189  
Collected by: 773/ DM

BOROUGH OF MIDDLESEX  
1200 MOUNTAIN AVENUE  
MIDDLESEX, NJ 08846-2037

Date Issued 02/05/96  
Control #  
Permit # 96-025

UCC NEW JERSEY  
CERTIFICATE

IDENTIFICATION

Block 303 Lot 49  
Work Site Location 529 LORRAINE AVE

Owner in Fee HOLLISTER(P)ROBERT  
Address 529 LORRAINE AVE  
MIDDLESEX, NJ 08846-  
Telephone (908)805-0243  
Contractor H O M E O W N E R  
Address \_\_\_\_\_

Telephone ( )  
Lic. No. or Bldrs. Reg. No. \_\_\_\_\_  
Federal Emp. No. HO-  
or Social Security No. \_\_\_\_\_

Home Warranty No. \_\_\_\_\_  
Type of Warranty Plan: [ ] State [ ] Private  
Use Group R-4  
Maximum Live Load 0  
Construction Classification \_\_\_\_\_  
Maximum Occupancy Load 0  
Description of Work/Use:

WATER HEATER

CERTIFICATE OF OCCUPANCY/APPROVAL

[ ] 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 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 the following conditions must be met no later than \_\_\_\_\_, \_\_\_ or the owner will be subject to fine or order to vacate:

[ ] 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. \_\_\_\_\_ 3385  
Collected by: 6691 DM

CONSTRUCTION OFFICIAL

BOROUGH OF MIDDLESEX  
1200 MOUNTAIN AVENUE  
MIDDLESEX, NJ 08846-2037

Date Issued 05/11/95  
Control #  
Permit # 95-147

UCC NEW JERSEY  
CERTIFICATE

IDENTIFICATION

Block 303 Lot 49  
Work Site Location 529 LORRAINE  
Owner in Fee HOLLISTER(1)ROBERT  
Address 529 LORRAINE AVE  
MIDDLESEX, NJ 08846-  
Telephone (908)805-0243  
Contractor THOMAS O'BRIEN  
Address 204A WILTON AVE  
MIDDLESEX, NJ 08846-  
Telephone (908)752-6639  
Lic. No. or Bldrs. Reg. No. \_\_\_\_\_  
Federal Emp. No. \_\_\_\_\_  
or Social Security No. 140-52-3279

Home Warranty No. \_\_\_\_\_  
Type of Warranty Plan: [ ] State [ ] Private  
Use Group R-4  
Maximum Live Load 0  
Construction Classification \_\_\_\_\_  
Maximum Occupancy Load 0  
Description of Work/Use:

REMOVE OLD ROOF REPLACE SHINGLES INSTALL SKYLIGHT  
FINAL COST OF WORK \$2500

CERTIFICATE OF OCCUPANCY/APPROVAL

[ ] 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 the following conditions must be met no later than \_\_\_\_\_, \_\_\_\_\_ or the owner will be subject to fine or order to vacate:

[ ] 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 \$ \_\_\_\_\_ 5  
Paid [X] Check No. 3254  
Collected by: 5699 DM

*Nancy A. Kolb/dm*  
CONSTRUCTION OFFICIAL

CONSTRUCTION OFFICIAL  
MUNICIPAL BUILDING  
1200 MOUNTAIN AVE.  
MIDDLESEX, N.J. 08846  
PHONE 356-3666



# CERTIFICATE

Date Issued 9/19/90  
Control #  
Permit # 3269

## IDENTIFICATION

Block 303 Lot 49  
Work Site Location 529 Lorraine Avenue  
Owner in Fee Robert R. Hollister  
Address 529 Lorraine Avenue  
Middlesex, N.J. 08846  
Tele. (      ) 805-0243  
Contractor Homeowner  
Address \_\_\_\_\_  
Tele. (      ) \_\_\_\_\_  
Lic. No. or Bldrs. Reg. No. \_\_\_\_\_  
Federal Emp. No. \_\_\_\_\_  
or Social Security No. \_\_\_\_\_

Home Warranty No. \_\_\_\_\_  
Use Group R4  
Maximum Live Load \_\_\_\_\_  
Description of Work/Use:  
12'-3" x 18'-5" Deck  
  
Final Cost: \$600.00  
  
Type of Warranty Plan: [    ] State [    ] Private  
Construction Classification \_\_\_\_\_  
Maximum Occupancy Load \_\_\_\_\_

## CERTIFICATE OF OCCUPANCY/APPROVAL

CERTIFICATE OF OCCUPANCY

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

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

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than \_\_\_\_\_, 19\_\_\_\_ or the owner will be subject to a fine or order to vacate:

Harry A. Kolbham  
CONSTRUCTION OFFICIAL

Fee \$ 5.00  
Paid [ cx ] Check No. 2243  
Collected by: dc 0349

CONSTRUCTION OFFICIAL  
MUNICIPAL BUILDING  
1200 MOUNTAIN AVE.  
MIDDLESEX, N. J. 08848  
PHONE 356-3666



# CERTIFICATE

Date Issued 12/27/89  
Control #  
Permit # 2562

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## IDENTIFICATION

Block 303 Lot 49  
Work Site Location 529 Lorraine Avenue  
Owner in Fee Robert R. Hollister  
Address 529 Lorraine Avenue  
Middlesex, N.J. 08846  
Tele. (      ) 805-0243  
Contractor John Kellogg  
Address 117 Birchview Drive  
Piscataway, N.J. 08854  
Tele. (      ) 563-7862  
Lic. No. or Bldrs. Reg. No. \_\_\_\_\_  
Federal Emp. No. \_\_\_\_\_  
or Social Security No. \_\_\_\_\_

Home Warranty No. \_\_\_\_\_  
Use Group R-3a  
Maximum Live Load \_\_\_\_\_  
Description of Work/Use:  
Rebuild Steps  
  
Final Cost: ~~\$1,400~~ \$2,000  
  
Type of Warranty Plan: [ ] State [ ] Private  
Construction Classification \_\_\_\_\_  
Maximum Occupancy Load \_\_\_\_\_

## CERTIFICATE OF OCCUPANCY/APPROVAL

CERTIFICATE OF OCCUPANCY

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

CERTIFICATE OF APPROVAL

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

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than \_\_\_\_\_, 19\_\_\_\_ or the owner will be subject to a fine or order to vacate:

Harry Kolb Cham  
CONSTRUCTION OFFICIAL

Fee \$ 21.00  
Paid [  ] Check No. 1277  
Collected by: dc 9064

BOROUGH OF MIDDLESEX  
1200 MOUNTAIN AVENUE  
MIDDLESEX, NJ 08846

Date Issued 12/18/91  
Control #  
Permit # 91-0057

UCC NEW JERSEY  
CERTIFICATE

IDENTIFICATION

Block 303 Lot 49  
Work Site Location 529 LORRAINE AVE  
Owner in Fee HOLLISTER(P/E) ROBERT  
Address 529 LORRAINE AVENUE  
MIDDLESEX, NJ 08846-  
Telephone (908)805-0243  
Contractor \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone ( ) \_\_\_\_\_  
Lic. No. or Bldrs. Reg. No. \_\_\_\_\_  
Federal Emp. No. \_\_\_\_\_  
or Social Security No. \_\_\_\_\_

Home Warranty No. \_\_\_\_\_  
Use Group R-4  
Maximum Live Load 0  
Description of Work/Use:  
ONE-HALF BATH  
FINAL COST: \$200  
Type of Warranty Plan: [ ] State [ ] Private  
Construction Classification \_\_\_\_\_  
Maximum Occupancy Load 0

CERTIFICATE OF OCCUPANCY/APPROVAL

[ ] CERTIFICATE OF OCCUPANCY

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

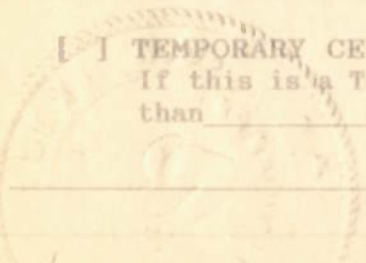
[X] CERTIFICATE OF APPROVAL

[ ] 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

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



Harry A. Kolb Ham  
CONSTRUCTION OFFICIAL

Fee \$ \_\_\_\_\_ 5  
Paid [X] Check No. \_\_\_\_\_ 2482  
Collected by: 1043 BM