



Property Information		Request Information		Update Information	
File#:	BS-X01693-8077930099	Requested Date:	07/17/2024	Update Requested:	
Owner:	N/A	Branch:		Requested By:	
Address 1:	142 HICKORY RD	Date Completed:		Update Completed:	
Address 2:		# of Jurisdiction(s):			
City, State Zip:	DINGMANS FERRY, PA	# of Parcel(s):	1		

Notes

- CODE VIOLATIONS** Per Delaware Township Department of Zoning there are no Code Violation cases on this property.
Collector: Delaware Township
Payable: 116 Wilson Hill Road, Dingmans Ferry, PA 18328
Business# 570-828-2347
- PERMITS** Per Delaware Township Building Department there are no Open/Pending/ Expired Permit on this property.
Collector: Delaware Township
Payable: 116 Wilson Hill Road, Dingmans Ferry, PA 18328
Business# 570-828-2347
- SPECIAL ASSESSMENTS** Per Delaware Township Tax Collector Department there are no Special Assessments/liens on the property.
Collector: Delaware Township
Payable: 116 Wilson Hill Road, Dingmans Ferry, PA 18328
Business# 570-828-2347
- DEMOLITION** NO
- UTILITIES**
WATER & SEWER
The house is on a community water and sewer. All houses go to the shared well and septic system.
GARBAGE
GARBAGE PRIVATE HAULER WITH LIEN STATUS AND BALANCE UNKNOWN.

BUILDING PERMIT

AMOUNT PAID

VALIDATION

DATE March 25 2002 PERMIT NO. 7499

APPLICANT Lisa Buckley ADDRESS 12030 Old Marcel Lake, Dingmans
(NO.) (STREET) (CONTR'S LICENSE)

PERMIT TO build (TYPE OF IMPROVEMENT) (1) STORY NO. deck (PROPOSED USE) NUMBER OF DWELLING UNITS _____

AT (LOCATION) 148.04-08-32 ZONING DISTRICT _____
(NO.) (STREET)
BETWEEN Hickory Lane AND _____
(CROSS STREET) (CROSS STREET)

SUBDIVISION ML 160-B LOT _____ BLOCK _____ LOT SIZE _____

BUILDING IS TO BE 12 FT. WIDE BY 20 FT. LONG BY _____ FT. IN HEIGHT AND SHALL CONFORM IN CONSTRUCTION

TO TYPE frame USE GROUP wood BASEMENT WALLS OR FOUNDATION _____ (TYPE)

REMARKS: _____

This structure shall not be occupied until a certificate of occupancy has been issued and electrical certificate has been provided.

FINAL INSPECTION TO BE IN WRITING. 1 year complete exterior ~~2 year~~ to complete the interior. ESTIMATED COST \$ _____ PERMIT FEE \$ 50.00
AREA OR VOLUME (CUBIC SQUARE FEET) 240

OWNER Bldg. Erik Estok
ADDRESS PO Box 214, Milford 18337

BUILDING DEPT. BY Richard Heinbreck

(Affidavit on reverse side of application to be completed by authorized agent of owner)

INSPECTION RECORD

DATE	NOTE PROGRESS - CORRECTIONS AND REMARKS	INSPECTOR
3-27-2	OK TO Pour deck Piers	REB
4-30-2	Final ok	REB

FORM NO. BOCA - BP 1994

required before start of framing or setting of modular.

DELAWARE TOWNSHIP BUILDING APPLICATION FORM

DATE: 3/20/02

TAX MAP # 148.04-08-32

CHECK# 5062

FEE: \$ ~~80.~~⁵⁰ APPLICATION # 7499

OWNERS'S NAME Lisa Buckley BUILDER'S NAME Erik Estok

MAILING ADDR: 12030 Old Marcell Lake MAILING ADDR: P.O. Box 214 Milford Pa 18337

PHONE: 570-828-6775 PHONE: 570-296-4789

SUBDIVISION: Marcell Lake LOT: 160 BLOCK: _____ SECTION B

STREET: Hickory Lane

<u>BUILDING TYPE</u>	<u>FOUNDATION</u>	<u>CONSTRUCTION</u>
RESIDENTIAL _____	CRAWL _____	WOOD _____
# BEDROOMS _____	FULL _____	MASONRY _____
#BATHROOMS _____	PIERS _____	POLE _____
ADDITION _____	SLAB ON GRADE WITH _____	MODULAR _____
DECK(S) <u>X</u> _____	FROST WALL _____	OTHER _____
GARAGE _____	OTHER _____	
COMMERCIAL _____	8",10", OR 12" BLOCK _____	
STORY _____		
OTHER _____		

SIZE OF BUILDING: 12 FT WIDE: 20 FT LONG: _____ FT IGH: _____
TOTAL SQUARE FOOTAGE: 240 ESTIMATED COSTS: _____

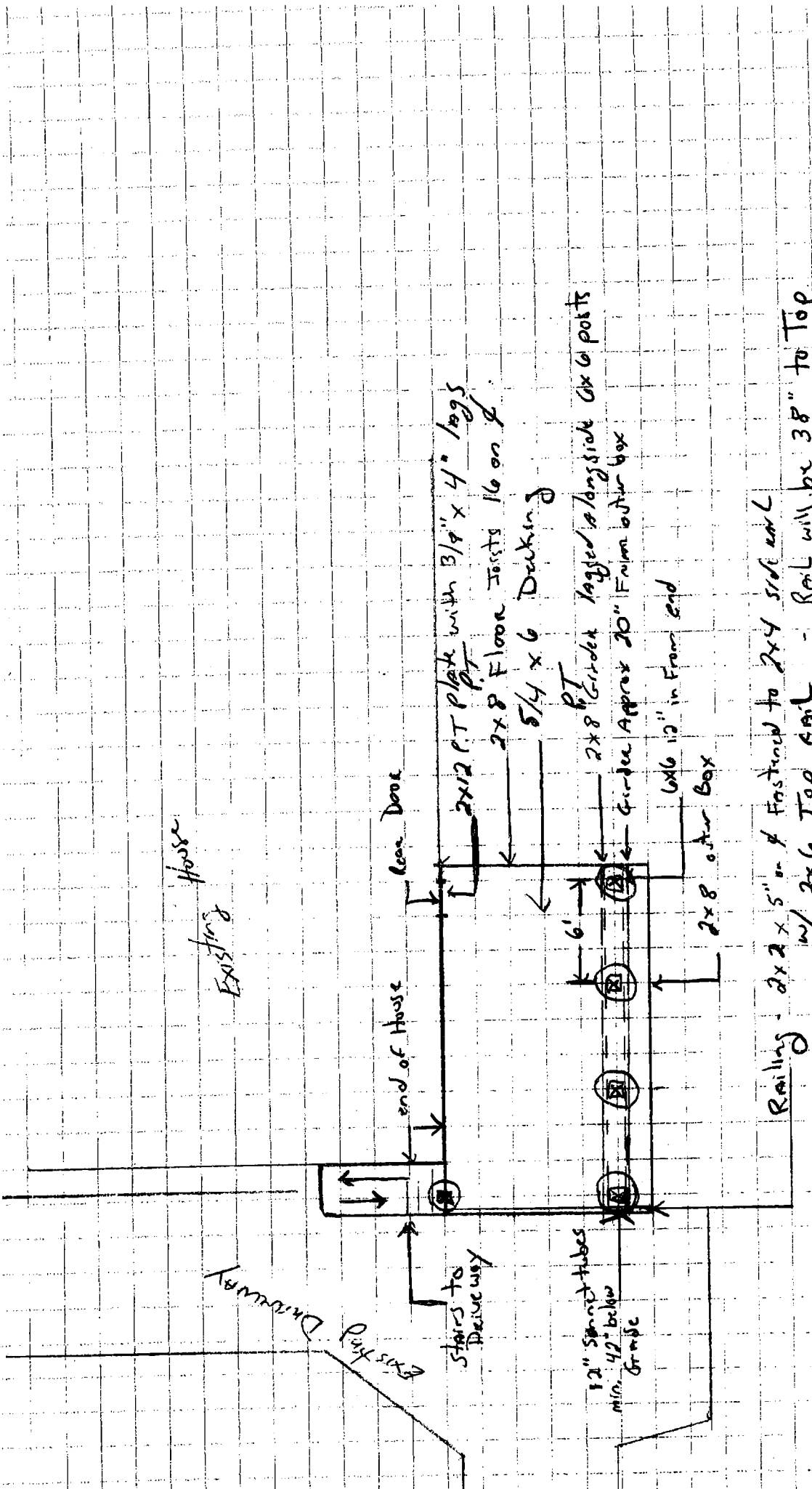
SIGNATURE OF OWNER/AGENT: Erik Estok

IF APPLICABLE: ZONING PERMIT# _____ SEWAGE PERMIT# _____
WELL PERMIT# _____ ROAD ENCROACHMENT PERMIT# _____

(ALL CONTRACTORS MUST FILL OUT WORKERS COMPENSENATION INFORMATION.)

NOTE: SIX (6) MONTHS TO START CONSTRUCTION; ONE (1) YEAR FOR EXTERIOR; TWO (2) YEARS FOR INTERIOR. THERE IS A THIRTY (30) DAY APPEAL PERIOD FOLLOWING THE ISSUANCE OF THIS PERMIT. DURING THIS PERIOD. ANY AGGRIEVED PERSON MAY FILE AN APPEAL TO CONTEST THIS ISSUANCE OF THE PERMIT. ANY PERMIT HOLDER WHO BUILDS DURING THE THIRTY (30) DAY APPEAL PERIOD DOES SO AT THEIR OWN RISK.

DELAWARE TOWNSHIP SEWAGE ORDINANCE PROHIBITS THE USE OF A SEPTIC SYSTEM PRIOR TO THE ISSUANCE OF THE CERTIFICATE OF OCCUPANCY FOR THE STRUCTURE THAT THE SEPTIC SYSTEM IS TO SERVE. FURTHER, THE PROPERTY OWNER AND THE BUILDER OF THE STRUCTURE MAY BE HELD RESPONSIBLE FOR SAID USE, AND THE FINES MAY BE ASSESSED ACCORDINAGLY. AVOID PROBLEMS: DO NOT USE THE SEPTIC SYSTEM UNTIL THE CERTIFICATE OF OCCUPANCY HAS BEEN ISSUED FOR THE BUILDING.



Contractor = Estok Custom Builders
 P.O. Box 214
 Milford Pa 18337
 570-296-4789

Turkey Mound
 Lot 160 Section B

Buckley
 12030 Old Murrel Lake
 888-6775

1442 Hickory Lane

BUILDING PERMIT

AMOUNT PAID

VALIDATION

DATE May 30 2002 PERMIT NO. 7561

APPLICANT Lisa Buckley ADDRESS 142 Hickory Lane 12030 Marcel Lake
(NO.) (STREET) (CONTR'S LICENSE)

PERMIT TO build (TYPE OF IMPROVEMENT) (1) STORY installation of a 6ft (PROPOSED USE) NUMBER OF DWELLING UNITS 1

AT (LOCATION) 148.04-08-32 (NO.) (STREET) ZONING DISTRICT R
BETWEEN Hickory Lane (CROSS STREET) AND _____ (CROSS STREET)

SUBDIVISION ML 160-B LOT _____ BLOCK _____ 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: FINAL INSPECTION TO BE WRITING. GOOD FOR ONE YEAR ONLY.

AREA OR VOLUME _____ ESTIMATED COST \$ _____ PERMIT FEE \$ 50.00
(CUBIC/SQUARE FEET)

OWNER Bldg. Erik Estok BUILDING DEPT. BY Richard S Wainwright
ADDRESS PO Box 214, Milford, PA 18337

(Affidavit on reverse side of application to be completed by authorized agent of owner)

INSPECTION RECORD

DATE	NOTE PROGRESS - CORRECTIONS AND REMARKS	INSPECTOR
6-5-2	Header OK OK TO Finish Finish sheet rock	RJW
6-9-3	Completed Quite some Time No need to send a c/o	RJW

FORM NO. BOCA - BP 1994

Certified foundation location
required before start of
framing or setting of modular.
DELAWARE TOWNSHIP BUILDING APPLICATION FORM

DATE: 5/29/02 TAX MAP # 148.04-08-32
 CHECK# 1059 FEE: \$ 50- APPLICATION # 7561
 OWNERS'S NAME Lisa Buckley BUILDER'S NAME Erik Estok
 MAILING ADDR: 142 Hickory Lane MAILING ADDR: P.O. Box 214
12030 Marcel Lake Milford PA 19337
 PHONE: 828-6775 PHONE: 570-296-4789
 SUBDIVISION: Marcel Lake LOT: 160 BLOCK: _____ SECTION B
 STREET: Hickory Lane

<u>BUILDING TYPE</u>	<u>FOUNDATION</u>	<u>CONSTRUCTION</u>
RESIDENTIAL _____	CRAWL _____	WOOD _____
# BEDROOMS _____	FULL _____	MASONRY _____
# BATHROOMS _____	PIERS _____	POLE _____
ADDITION _____	SLAB ON GRADE WITH _____	MODULAR _____
DECK(S) _____	FROST WALL _____	OTHER _____
GARAGE _____	OTHER _____	
COMMERCIAL _____	8", 10", OR 12" BLOCK _____	
STORY _____		
OTHER _____		

SIZE OF BUILDING: _____ FT WIDE: _____ FT LONG: _____ FT IGH: _____
 TOTAL SQUARE FOOTAGE: _____ ESTIMATED COSTS: _____

SIGNATURE OF OWNER/AGENT: Lisa Buckley

IF APPLICABLE: ZONING PERMIT# _____ SEWAGE PERMIT# _____
 WELL PERMIT# _____ ROAD ENCROACHMENT PERMIT# _____

(ALL CONTRACTORS MUST FILL OUT WORKERS COMPENSENATION INFORMATION.)

NOTE: SIX (6) MONTHS TO START CONSTRUCTION; ONE (1) YEAR FOR EXTERIOR; TWO (2) YEARS FOR INTERIOR. THERE IS A THIRTY (30) DAY APPEAL PERIOD FOLLOWING THE ISSUANCE OF THIS PERMIT. DURING THIS PERIOD, ANY AGGRIEVED PERSON MAY FILE AN APPEAL TO CONTEST THIS ISSUANCE OF THE PERMIT. ANY PERMIT HOLDER WHO BUILDS DURING THE THIRTY (30) DAY APPEAL PERIOD DOES SO AT THEIR OWN RISK.

DELAWARE TOWNSHIP SEWAGE ORDINANCE PROHIBITS THE USE OF A SEPTIC SYSTEM PRIOR TO THE ISSUANCE OF THE CERTIFICATE OF OCCUPANCY FOR THE STRUCTURE THAT THE SEPTIC SYSTEM IS TO SERVE. FURTHER, THE PROPERTY OWNER AND THE BUILDER OF THE STRUCTURE MAY BE HELD RESPONSIBLE FOR SAID USE, AND THE FINES MAY BE ASSESSED ACCORDINAGLY. AVOID PROBLEMS: DO NOT USE THE SEPTIC SYSTEM UNTIL THE CERTIFICATE OF OCCUPANCY HAS BEEN ISSUED FOR THE BUILDING.

WORKERS COMPENSATION INSURANCE COVERAGE INFORMATION

A. The applicant is:

A contractor within the meaning of the Pennsylvania Workers Compensation Law.

Yes

X No

If the answer is "yes", complete Sections B and C, below, as appropriate.

B. Insurance Information:

Name of Applicant: Erik Estok

Federal or State Employer Identification No: _____

Applicant is a qualified self-insurer for workers compensation. Certification Attached

Name of Workers Compensation insurer: _____

Workers Compensation Insurance Policy No.# _____ Certification Attached

Policy Expiration Date: _____

C. Exemption:

Complete Section C if the applicant is a contractor claiming exemption from providing Workers Compensation Insurance.

The undersigned swears or affirms that she is not required to provide Workers Compensation Insurance under the provisions of Pennsylvania Workers Compensation Law for one of the following reasons, as indicated:

Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to Township.

____ Religious exemption under the Workers Compensation Law.

Subscribed and sworn to before me this 20 Day of March 2002

Ileana Hernandez
Signature and Seal of Notary Public
Commission expires: _____

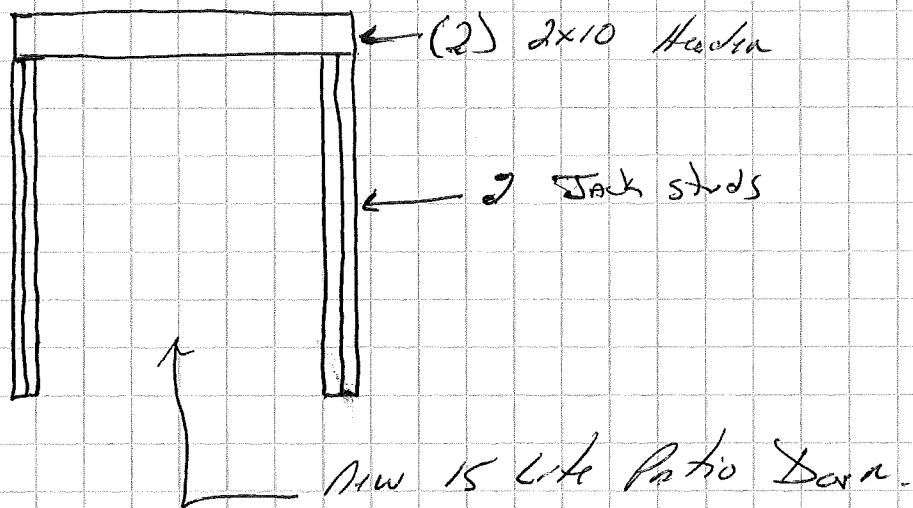
Erik Estok
Signature of Applicant
Address 10 Box 214
Milford
County Pike Municipality _____

Notarial Seal
Ileana Hernandez, Notary Public
Delaware Twp., Pike County
My Commission Expires Mar. 7, 2006
Member, Pennsylvania Association Of Notaries

owner - Lisa Buckley
12030 Laurel Lake
142 Hickory Lane
828-6775

Contractor Erik Estel
P.O. Box 214
Mithrid Pa 18337
570-296-4789

Description of work: We propose to cut through exterior wall and install a double 2x10 Header with two Jack studs on either end to allow for the installation of a 6 ft. patio door.



EGIDIO CONSTRUCTION AUTHORIZED PURSUANT TO THIS PERMIT MUST COMPLY WITH ACT 222 OF 1980 KNOWN AS THE "BUILDING ENERGY CONSERVATION ACT"

BUILDING PERMIT

DEPT. FILE COPY
 AMOUNT PAID \$ 147.60 OR # 2239
 Z # 512
 VALIDATION

DATE October 30 19 87 PERMIT NO. 3042
 APPLICANT Parkside Construction, Inc. ADDRESS St. Rt. By 25 Dingmans Ferry, Pa 18328

PERMIT TO build (TYPE OF IMPROVEMENT) (1) STORY NO. wood frame (PROPOSED USE) NUMBER OF DWELLING UNITS 1 bath 2 beds.

AT (LOCATION) Hickory Road (NO.) (STREET) P.O. 118-4-02-32 ZONING DISTRICT
 BETWEEN (CROSS STREET) AND (CROSS STREET)

SUBDIVISION Old Marcel Lake LOT 160 BLOCK --- LOT SIZE 151' x 159'
Section 2

BUILDING IS TO BE 26 FT. WIDE BY 36 FT. LONG BY 13 FT. IN HEIGHT AND SHALL CONFORM IN CONSTRUCTION

TO TYPE frame USE GROUP wood BASEMENT WALLS OR FOUNDATION concrete crawl (TYPE)

REMARKS: This dwelling shall not be occupied until a certificate of occupancy has been issued and a final electrical certificate has been provided.

AREA OR VOLUME 936 sq. ft. (CUBIC/SQUARE FEET) ESTIMATED COST \$ 72,595.00 PERMIT FEE \$ 147.60

OWNER Victor & Helen Egidio ADDRESS 145 Watchung Avenue West Orange, N.J. BUILDING DEPT. 07052

James Allright
 (Affidavit on reverse side of application to be completed by authorized agent of owner)

INSPECTION RECORD

DATE	NOTE PROGRESS - CRITICISMS AND REMARKS	INSPECTOR
<u>9/15/88</u>	<u>CO. OK</u>	<u>Rmc</u>

FORM NO. BOCA - BP 1969

Delaware Township Board of Supervisors

R.D.#1 — Box 219-D
Dingmans Ferry, Pike County, Pa. 18328
PHONE: 717-828-2347

7512

APPLICATION FOR BUILDING PERMIT

NAME OF OWNER Victor & Helen Egidio
145 Watchung Avenue
MAILING ADDRESS West Orange, N.J. 07052 ZIP _____
NAME OF BUILDER PARKSIDE CONSTRUCTION, INC.
BUILDER'S ADDRESS Star Route Box 25, Dingmans Ferry, PA 18328

PHONE NO. 717-828-2391

DEVELOPMENT NAME Old Marcel Lakes STREET Hickory Road

LOT 160 BLOCK --- SECTION 2

OR NORTH --- SOUTH --- EAST --- WEST --- SIDE OF ---

FEET FROM: _____

LOT SIZE 154 X 159

<u>TYPE OF BUILDING</u>	<u>FOUNDATION</u>	<u>CONSTRUCTION</u>
RESIDENTIAL <u>X</u>	CRAWL <u>X</u>	WOOD <u>X</u>
ADDITION _____	FULL _____	MASONRY _____
SHED _____	PIERS _____	POLE _____
COMMERCIAL _____	SLAB _____	MODULAR _____
OTHER _____	OTHER _____	OTHER _____

SIZE OF BUILDING 26 FT. WIDE 36 FT. LONG 13 FT. HIGH

ESTIMATED COST \$ 72,595.00 SQUARE FOOTAGE 936 sq. ft.

SIGNATURE V. James Rocco, Jr. DATE 10-30-87

PERMIT NO. 3042 CHECK NO. 2239 FEE \$ 147.60

NOTE CAREFULLY: There is a thirty (30) day appeal period following the issuance of this permit. During this period any aggrieved person may file an appeal to contest this issuance of the permit. Any permit holder who builds during the thirty (30) day appeal period does so at his/her own risk.

148,04-08-87

Main Office **ATLANTIC-INLAND, INC.**
(215) 874-8269 115 East Brookhaven Road Brookhaven, PA 19015
(Electrical and Fire Inspection-Enforcing and Consulting Service)

M U N I C I P A L

Owner VICTOR EGIOLO #680

Occupant " "

Location Lot 160-B Hickory Rd., Old Marcel Lake
No. Street Town or City

Installation 200 AMP, 14 SW, 15 L&MS, 24 RECEPT., 7.0 KW Heat

Condition of Wiring: Good () Fair () Defective ()
has been inspected and is in accordance with The National Electrical Code or Atlantic-Inland, Inc. Rules and is Deemed Safe for Introduction of Current.

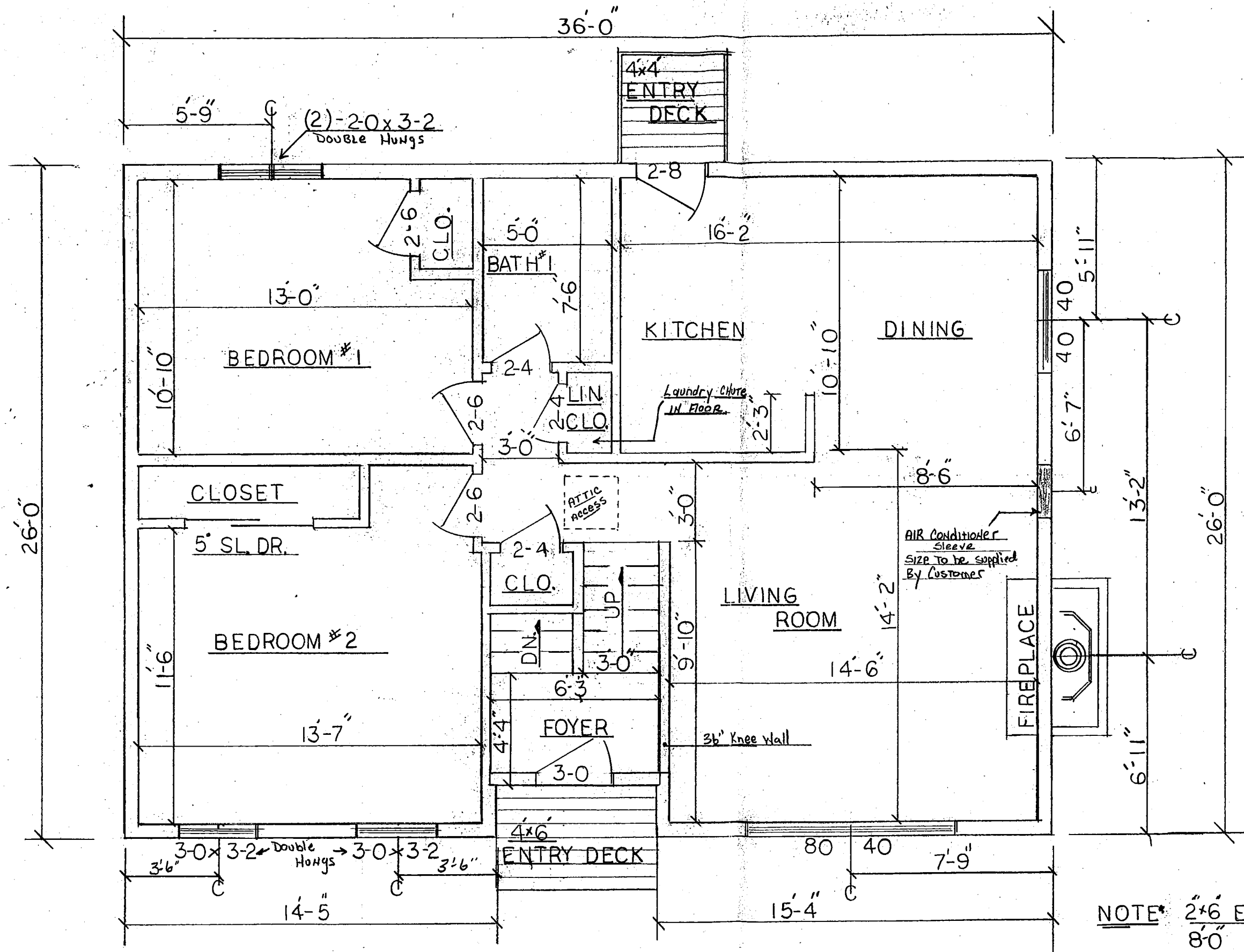
Installed by John Allen

Date 10/8/88

Insp. [Signature]

**FINAL ELEC.
INSPECTION**

MEMBER OF N. F. A. AND I. A. E. I.

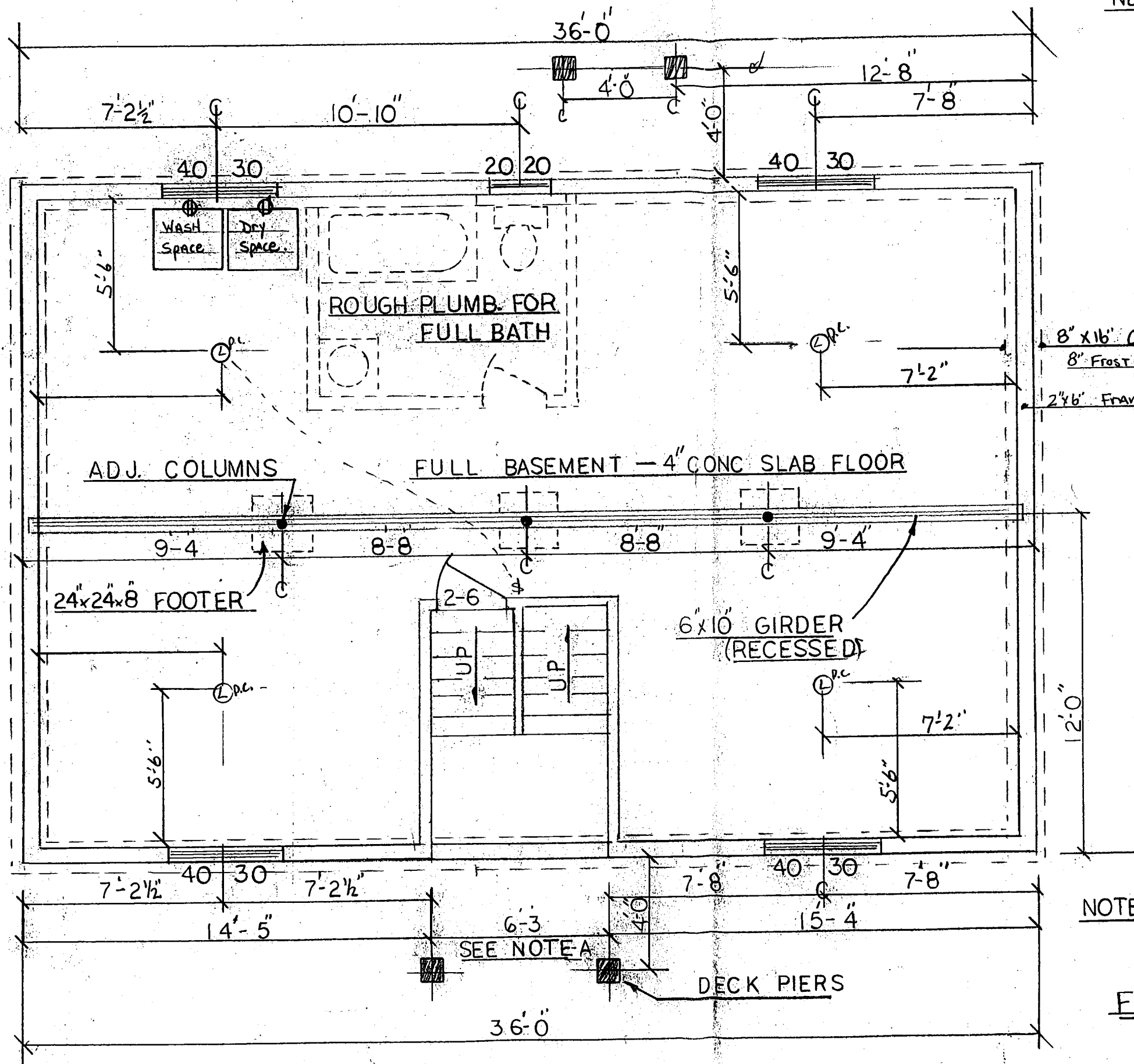


FIRST FLOOR PLAN

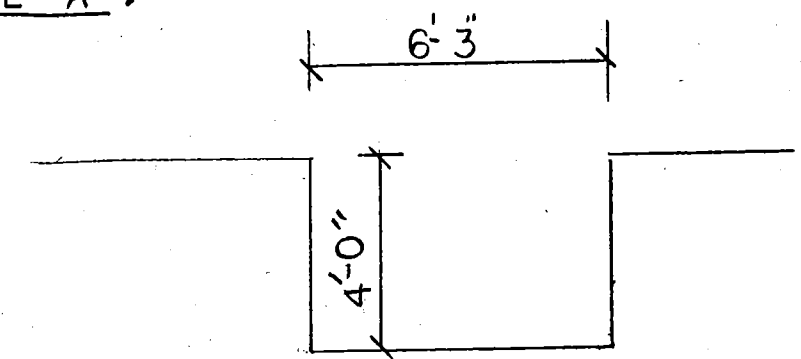
PARKSIDE CONSTRUCTION INC
BUILT FOR: EGIDIO
LOCATION: OLD MARCEL LAKE
JOB# 680 SCALE: 1/4"=1'-0"
MODEL: BENNINGTON
PRELIM SIGN: ON FILE
FINAL SIGN:

REVISED 5-18-87 J.F.D.

NOTE: 2x6 EXTERIOR WALLS
8'0" CEILINGS
REDWOOD SIDING



NOTE - A - :



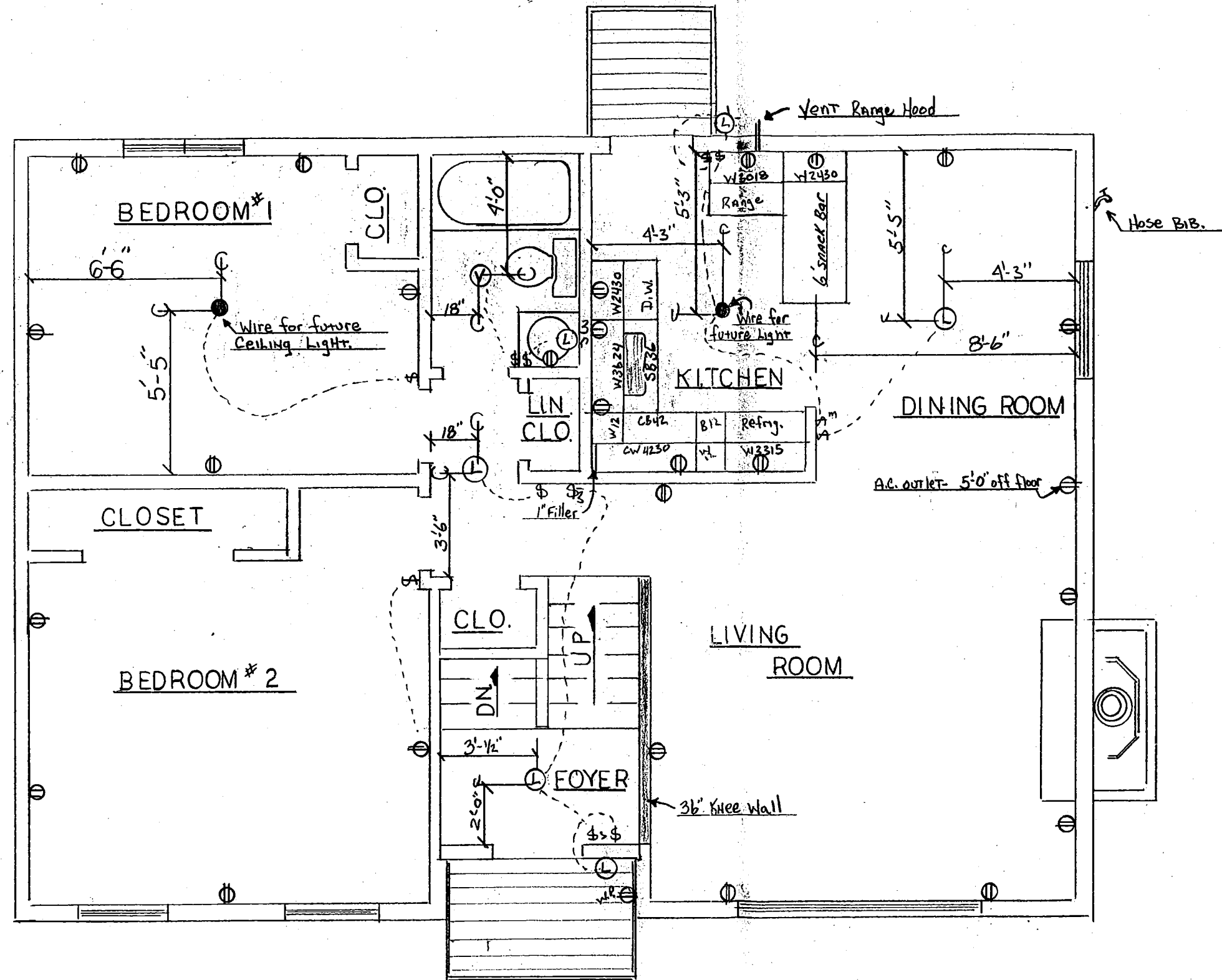
8" x 16" CONC. FOOTER.
8" Frost Wall under Grade.
2"x6" Framed Walls.

PARKSIDE CONSTRUCTION INC	
BUILT FOR: EGIDIO	
LOCATION: OLD MARCEL LAKE	
JOB #680	SCALE: 1/4" = 1'-0"
MODEL: BENNINGTON	
PRELIM SIGN: ON FILE	
FINAL SIGN:	

REVISED 5-18-87 J.F.D.

NOTE: EXTERIOR WALLS TO BE FRAMED (2"x6")

FOUNDATION PLAN



PARKSIDE CONSTRUCTION INC.	
BUILT FOR : EGIDIO	
LOCATION: OLD MARCEL LAKE	
JOB# 680	SCALE: 1/4" = 1'-0"
MODEL : BENNINGTON	
PRELIM SIGN: ON FILE	
FINAL SIGN:	

REVISED, 5-18-87 J.E.D.

FIRST FLOOR ELECTRIC, PLUMBING, AND KITCHEN PLAN