

Prop	erty Information	Request Information	Update Information
File#:	BS-X01567-682284422	Requested Date: 02/14/2024	Update Requested:
Owner:	JORGE JARAMILLO	Branch:	Requested By:
Address 1:	765 VIVIAN TER	Date Completed:	Update Completed:
Address 2:		# of Jurisdiction(s):	
City, State Zip	: UNION, NJ	# of Parcel(s):	

Notes

CODE VIOLATIONS Per Union Township Department of Zoning there are no Open Code Violation case on this property.

Collector: Union Township

Payable Address: 1976 Morris Ave, Union, NJ 07083

Business# (908) 688-2800

PERMITS Per Union Township Department of Building there are Multiple Open permit on this property.

Collector: Union Township

Payable Address: 1976 Morris Ave, Union, NJ 07083

Business# (908) 688-2800

Comments: Per Union Township Department of Building there are Multiple Open permit on this property.

Please refer to the attached document for more information.

SPECIAL ASSESSMENTS Per Union Township Department of Finance there are no Special Assessments/liens on the property.

Collector: Union Township

Payable Address: 1976 Morris Ave, Union, NJ 07083

Business# (908) 688-2800

DEMOLITION NO



UTILITIES Water

Account #: NA Payment Status: NA Status: Pvt & Non Lienable

Amount: NA Good Thru: NA Account Active: NA

Collector: New Jersey American Water Company Payable Address: 1709 Union Ave, Hazlet, NJ 07730

Business # 1 800-272-1325

NOTE: UNABLE TO PROVIDE INFORMATION TO THIRD PARTIES. HOMEOWNERS

AUTHORISATION NEEDED

SEWER

Account#: Block: 203 Lot: 14

Status: Lienable Amount: \$0.00 Due Date: 03/04/2024 Payment Status: Paid Account Active: Active Collector: Township of Union

Payable Address: 1976 Morris Ave. Union, NJ 07083

Business#: 908-688-2800

UNABLE TO PROVIDE DOCUMENTATION TO THIRD PARTIES. VERBAL INFO ACQUIRED.

Garbage:

Garbage bills are included in the real estate property taxes.



ELECTRICAL SUBCODE TECHNICAL SECTION





Date Received Control#

5/14/2015 525484

Date Issued Permit #

7/10/2001 01-1082

			CALA CINE	C. CERTIFICATION IN LIEU OF OATH
ATION-	-APPLICANT: COMPLETE ALL APPLICABLE INF	ORMATION WHEN CHA	ANGING	0, 02, ((), (), (), (), (), (), (), (), (), (

	1-800-272-	1000.					
Block 203 Lot 14 Qualification Code Work Site Location 765 VIVIAN TERR							
TORRES, C AND D		***************************************					
e-mail							
07083	**********						
municipality			zip code				
	e-mall	······································					
	E F	S-1-					
		Jate					
No. or Exemption Reas	son		***************************************				
Visiting Land	FAX:						
Propos	ed R-3						
0.00							

INSPECTIONS		Dates (M	onth/Day)				
Туре:	Fallure	Failure	Approval	Initial			
Rough	·						
Barrier-Free		-]			
Hench							
•							

Other							
		• • • • • • • • • • • • • • • • • • • •	02/05	HS			
Final		01/24	02/05	HS			
- Barrier-Free							
Town Cut-in-Cord Do	to lection			ļ			
•							
		-					
-							
	a Bonding			1			
	TORRES, C AND D e-mail	TORRES, C AND D e-mail	TORRES, C AND D e-mail	TORRES, C AND D e-mail 07083 ES, C AND D Tel. e-mail Exp. Date No. or Exemption Reason FAX: Proposed R-3 [] Temporary [] Other Utility Co. 0.00 INSPECTIONS Dates (Month/Day) Type: Failure Failure Approval Rough Barrier-Free Trench Temp. Serv. Constr. Serv. TCO Other Service Final Barrier-Free Temp. Cut-in-Card Date Issued Final Cut-in-Card Date Issued			

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.
Applicant sign/Contractor
niam and analiams.

sign and seal here:

	me here:		
		. Contractor [] Certifd Landscape Irrigati	ion Cont'r [] Exempt Applica
		SITE DATA	
DESCRI	PTION OF	F WORK: ELECT - 30 AMP WITH 100 A	AMP SERVICE
L			BHM-t-conversation
QTY.	SIZE	ITEMS Lighting Fixtures	FEE (Office Use Only)
		Receptacles	
• • • • • • • • • • • • • • • • • • • •		Switches	· ·
		Detectors	
		Light Poles	
		Motors—Fract. HP	

		Emergency & Exit Lights	- Laboration of the Control of the C
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	\$ 0.00
		Pool Permit/with UW Lights	0.00
		*	0.00
***************************************	0	Storable Pool/Spa/Hot Tub	0.00
	0	KW Elec. Range/Receptacle KW Oven/Surface Unit	0.00
	0		0.00
	0	KW Elec. Water Heater	0.00
***************************************	0	KW Elec. Dryer/Receptacle KW Dishwasher	0.00
	0		0.00
	0	HP Garbage Disposal	0.00
	0	KW Central A/C Unit	0.00
	0	HP/KW Space Heater/Air Handler	1-11-1-11-11-11-11-11-11-11-11-11-11-11
	0	KW Baseboard Heat	0.00
	-0	HP Motors 1/+ HP	
	0	KW Transformer/Generator	0.00
	-0	AMP Service	0.00
	0	AMP Subpanels	0.00
	0	AMP Motor Control Center	0.00
		KW Elec. Sign/Outline Light	0.00
			0.00
		Administrative Surcharg	ge \$0.00



ELECTRICAL SUBCODE





TECHNICAL SECTION A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000. Block 203 Lot 14 Qualification Code _____ Applicant sign/Contractor Work Site Location 765 VIVIAN TERR UNION, NJ 07083 Owner in Fee: _____TORRES, M AND M - TORRES, C AND D Tel. e-mail Address 765 VIVIAN TERR, UNION, NJ 07083 municipality Contractor: A.J. PERRI, INC. (732) 720-2116 Tel. Address 1162 PINE BROOK ROAD TINTON FALLS, NJ 07724 _____ Exp. Date _____ Contractor License No.____ Home Improvement Contractor Registration No. or Exemption Reason Federal Emp. ID No. 000000000 **B. ELECTRICAL CHARACTERISTICS** Present R-5 Use Group Proposed _____ [] Pole/Pad # ______ [] Temporary [] Other ______ Building Occupied as _____ __ Utility Co.__ 2.580.00 Est. Cost of Elec. Work \$ _____ JOB SUMMARY (Office Use Only) INSPECTIONS Dates (Month/Day) PLAN REVIEW [] No Plans Required Type: Failure Failure Approval initial Rough [] Partial -Underslab Utilities Approved Barrier-Free Date:_____Approved by:____ Trench Temp. Serv. [] Electric Plans Approved Constr. Serv. Date:_____ Approved by: _____ 0 KW Central A/C Unit TCO Joint Plan Review Required: HP/KW Space Heater/Air Handler Other [] Bldg. [] Plumb. [] Fire. [] Elev. KW Baseboard Heat Service HP Motors 1/+ HP SUBCODE APPROVAL for PERMIT Final Date: -KW Transformer/Generator Barrier-Free 0 Approved by: AMP Service Temp. Cut-in-Card Date Issued 0 **AMP Subpanels** SUBCODE APPROVAL for CERTIFICATE Final Cut-in-Card Date Issued 0 AMP Motor Control Center [] CO [] CO [] CA Annual Pool Inspection ____



Date Received Control #

5/2/2018 730316 5/4/2018

Date Issued Permit # 18-00860

C. CERTIFICATION IN LIEU OF OATH

I hereby ce	rtify that	I am the	(agent of)	owner o	of record	and am	authorized	to make	this
application	and perfe	orm the v	vork listed	l on this	applicati	on.			

	d seal here		
Print na	me here:		
[] Llcei	nsed Elec.	Contractor [] Certif'd Landscape Irrigation	on Cont'r [] Exempt Applicar
D. TEC	CHNICAL	SITE DATA	
DESCR	IPTION O	F WORK: INSTALL DUCTLESS MINI SI	PLIT
QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles Switches	
		Detectors	1.5
			
		Light Poles Motors—Fract, HP	
		Emergency & Exit Lights	
		Communications Points	·
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	s 0.00
		Pool Permit/with UW Lights	0.00
		Storable Pool/Spa/Hot Tub	0.00
	0	KW Elec, Range/Receptacle	0.00
	0	KW Oven/Surface Unit	0.00
	0	KW Elec. Water Heater	0.00
	0	KW Elec. Dryer/Receptacle	0.00
	0	KW Dishwasher	0.00
	0	HP Garbage Disposal	0,00

KW Elec. Sign/Outline Light

0

į.		
Administrative Surcharge	\$	0.00
Minimum Fee	\$	40.00
State Permit Surcharge Fee	,	5.00
TOTAL FEE		45.00

20.00

20.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

Date of Grounding and Bonding

Certification

Date: _____

Approved by:



PLUMBING SUBCODE **TECHNICAL SECTION**







C. CERTIFICATION IN LIEU OF OATH

Date Received Control #

5/2/2018 730316

Date Issued Permit #

State Permit Surcharge Fee \$ __

TOTAL FEE \$ _____

5/4/2018 18-00860

12.00

182.00

CONTRACTORS, NOTIFY THIS OFFICE. CA Block 203 Lot 14 Work Site Location 765 VIVIAN TERR UNION, NJ 07083		Qualificatio	n Code			I hereby certi application ar Applicant sign	nd perform the worl n/Contractor	ent of) owner of record and a clisted on this application.	
Owner in Fee:TORRES, M AND M - To	ORRES, C AND D					Print name he	ere:		
Tel Address 765 VIVIAN TERR, UNION, NJ 0	e-mall 7083					D. TECHNIC		licensed Plumbing Contracto	
Contractor: A.J. PERRI, INC. Address 1162 PINE BROOK ROAD TINTON FALLS, NJ 07724	e	-mail		111111111111111111111111111111111111111		QTY.	UCTLESS MINI S FIXTURE/EQU Water Closet		FEE (Office Use Only) \$ 0.00
Contractor License No.		_ Exp. Dat	te				Urinal/Bidet		0.00
Home Improvement Contractor Registration No. or Exemption Reason Federal Emp. ID No. 000000000 FAX: B. PLUMBING CHARACTERISTICS Use Group Present R-5 Proposed						- 0	Bath Tub Lavatory Shower Floor Drain		0.00 0.00 0.00 0.00
Building Sewer Size Pub	olic Sewer	Priva	ite Septio			_0_	Sink		0.00
Water Service Size Pub	olic Water	Priva	ite Well_			Dishwasher		0.00	
Est. Cost of Plumbing Work \$	6,020.00						Drinking Founta		0.00
JOB SUMMARY (Office Use Only) PLAN REVIEW [] No Plans Required [] Partial -Underslab Utilities Approved Date: Approved by: [] Plumbing Plans Approved Date: Approved by: Joint Plan Review Required: [] Bidg. [] Elec. [] Fire. [] Elev. SUBCODE APPROVAL for PERMIT Date: Approved by: SUBCODE APPROVAL for CERTIFICATE [] CO [] CCO [] CA Date: Approved by:	INSPECTIONS Type: Slab Rough Water Sewer Fixtures Gas Equipment Gas Piping LPGas Tank Fuel Oil Piping Solar TCO Final	Failure f	Pates (Mo	Approval	Initial	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Washing Machi Hose Bibb Water Heater Fuel Oil Piping Gas Piping LPGas Tank Steam Boiler Hot Water Boile Sewer Pump Interceptor/Sep Backflow Preve Greasetrap Sewer Connect Water Service Glacks Other A/C	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	
								Administrative Surcharge	



BUILDING SUBCODE TECHNICAL SECTION





U.C.C. F110 (rev. 11/09)

A. IDENTIFICATION—APPLICANT: COMPL CONTRACTORS, NOTIFY THIS OFFICE. C Block 203 Lot 1	ALL UTILITY DIG NO	1-800-272			C. CERTIFICATION IN LIEU OF OATH i hereby certify that I am the (agent of) ow
Work Site Location 765 VIVIAN TERR		a canno			application.
UNION, NJ 07083					Sign here:
Owner in Fee; TORRES, M AND M - 1	FORRES, C AND D				Print name here:
Tel.	e-mail				D. TECHNICAL SITE DATA
Address 765 VIVIAN TERR, UNION, NJ					DESCRIPTION OF WORK
street	municipality		zip code		BLDG - ROOF
Contractor: TORRES, M AND M - TORRE					
		_ e-mail			
UNION, NJ 07083,					
Contractor License No. or Builder Registration			Exp. Date		
Home Improvement Contractor Registration			<u></u>		
Federal Emp. ID No.		FAX:			.
JOB SUMMARY (Office Use Only) PLAN REVIEW Date Initial [] No Plans Required	Finishes -Base La	ng		Initial	TYPE OF WORK: [] New Building [] Addition [] Rehabilitation [] Roofing [] Siding [] Fence Height (excelling to the context of the context
[] CO [] CCO [] CA	Olher			—	[] Asbestos Abatement Subchapte
Date:	Final				Lead Haz, Abatement NJAC 5:1
Approved by:	Barrier-Free			<u></u>	Radon Remediation
B. BUILDING CHARACTERISTICS					[] Other
Use Group Present R-5 Proposed -		tr. Class Pr	esent Propos	sed	[] Demolition
No. of Stories		ustrialized E	uilding:		
Height of Structure		State Appr	oved HUD		Adminis
Area — Largest Floor	0 sq. ft.	est. Cost of	Bidg. Work:		
New Bidg, Area/All Floors	U sa. ft.	1. New Blo	g. \$	0.00	State Perr
Volume of New Structure		2. Rehabilit	ation \$	0.00	
Max, Live Load		3. Total (1+	- 2) \$	0.00	L
Max. Occupancy Load	0_		U.C.C. £110 (rev	v. 11/09\	Applicant When submitting this form to your Local Co



Date Received 5/14/2015 580647 Control#

Date Issued Permit #

11/20/2006 06-2484

i hereby certify that I am the (a appilcation, Sign here:		l am	authorized to make this
Print name here: D. TECHNICAL SITE DATA			
DESCRIPTION OF WORK BLDG - ROOF			
TYPE OF WORK:			EE (Office Use Only)
[] New Building		\$ -	0.00
[] Addition [] Rehabilitation		-	0.00
[] Roofing		-	0.00
[] Siding		•	0.00
	leight (exceeds 6')	-	0.00
[] Fence F	Sq. Ft.	-	0.00
[] Pool			0.00
[] Retaining Wall	0 Sq. Ft.	_	0.00
[] Asbestos Abatement	Subchapter 8	_	0.00
[] Lead Haz. Abatemen	t NJAC 5:17		0.00
[] Radon Remediation			0.00
[] Other		_	0.00
[] Demolition		_	0.00
	Administrative Surcharge		==
	Minimum Fee		
	State Permit Surcharge Fee TOTAL FEE		
	TOTALILL	- Ф -	

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



BUILDING SUBCODE





TECHNICAL SECTION A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000. Lot _14 Qualification Code _____ Work Site Location 765 VIVIAN TERR UNION, NJ 07083 TORRES, M AND M - TORRES, C AND D Owner in Fee: ___ Tel. _ e-mail 765 VIVIAN TERR, UNION, NJ 07083 Address TORRES, M AND M - TORRES, C AND D Contractor: 765 VIVIAN TERR Address UNION, NJ 07083, Contractor License No. or Bullder Registration No. ____ Exp. Date ____ Home Improvement Contractor Registration No. or Exemption Reason Federal Emp. ID No. _ FAX: JOB SUMMARY (Office Use Only) PLAN REVIEW Date Initial INSPECTIONS Dates (Month/Day) [] No Plans Required Type: Fallure Approval Footing IIA I **Footing Bonding** [] Footings/Foundations ____ Foundation [] Structural/Framework Slab [] Exterior Frame [] Interior Truss Sys./Bracing Barrier-Free Joint Plan Review Required: [] Elec. [] Plumb. [] Fire [] Elevator Insulation Finishes -Base Layer SUBCODE APPROVAL for PERMIT Finishes -Final Date: Energy Approved by: ____ Mechanical SUBCODE APPROVAL for CERTIFICATE TCO [] CO [] CCO [] CA Other Date: Final Approved by: ____ Barrier-Free B. BUILDING CHARACTERISTICS Use Group Present R-5 Constr. Class Present ___ Proposed 0 No. of Stories If Industrialized Building: 0 Height of Structure ____ State Approved _____ HUD 0 sq. ft. Area - Largest Floor _ Est. Cost of Bidg, Work: 0 sq. ft. New Bidg. Area/All Floors _____ 0.00 1. New Bldg. 0 cu. ft. Volume of New Structure _____ 0.00 2. Rehabilitation \$ 0 0.00 Max. Live Load __ 3. Total (1+2) Max. Occupancy Load U.C.C. F110 (rev. 11/09)

0	wed

5/14/2015 Date Received 543622 Control #

Date Issued Permit #

6/11/2007 07-01000

C. CERTIFICATION IN LIEU C I hereby certify that I am the (a		I am authorized to make this
application. Sign here:		
-		
Print name here: D. TECHNICAL SITE DATA		
DESCRIPTION OF WORK BLDG - DECK		
TYPE OF WORK: [] New Building [] Addition [] Rehabilitation [] Roofing [] Siding [] Fence F [] Sign 0 [] Pool [] Retaining Wall [] Asbestos Abatement [] Lead Haz. Abatement [] Radon Remediation [] Other [] Demolition	O Sq. Ft. Subchapter 8 t NJAC 5:17	FEE (Office Use Only) \$
	Administrative Surcharge Minimum Fee State Permit Surcharge Fee TOTAL FEE	\$ 75.00

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



Max. Occupancy Load _

BUILDING SUBCODE TECHNICAL SECTION





Date Received Control #

5/14/2012 233861

Date Issued Permit #

5/18/2012 12-00858

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

Block 203 Lot 14		Qualifica	tion Code		
Work Site Location 765 VIVIAN TERR					
UNION, NJ 07083					
Owner in Fee: TORRES, M AND M - TO	RRES, C AND I	D			
Tei	e-mail				
Address 765 VIVIAN TERR, UNION, NJ 0					
street Contractor: TORRES, M AND M - TORRES	municipali . C AND D	-		zip code	
	,	Tel		·	
UNION, NJ 07083,	****	e-maii			
Contractor License No. or Bullder Registration	No.		Evn D	ate	
Home Improvement Contractor Registration N			•	ale	
Federal Emp. ID No.					
JOB SUMMARY (Office Use Only) PLAN REVIEW Date Initial [] No Plans Required [] All [] Footings/Foundations [] Structural/Framework [] Exterior [] Interior Joint Plan Review Required: [] Eiec. [] Plumb. [] Fire [] Elevator SUBCODE APPROVAL for PERMIT Date: Approved by: SUBCODE APPROVAL for CERTIFICATE [] CO [] CCO [] CA Date: Approved by:	Barrier-Free Insulation	racing	Failure	onth/Day) Approval	Initial
B. BUILDING CHARACTERISTICS	Dallet-1 leg				
Use Group Present R-5 Proposed No. of Stories	0	onstr. Class Pro Industrialized B	ultding:	•	ed
Height of Structure	ft.	State Appre	oved	HUD	
Area — Largest Floor		Est. Cost of	Bldg. Wo	rk:	
New Bldg, Area/All Floors	0 sq. ft.	1. New Bld		,,,	0.00
Volume of New Structure	O cu, ft.	2. Rehabilit			00.00
Max. Live Load		3, Total (1+	· 2)	ا,د	00.00

U.C.C. F110 (rev. 11/09)

I hereby certify that I am the (a application, Sign here:	gent of) owner of record and	am aut	horized to make this
Print name here:			
D. TECHNICAL SITE DATA			
DESCRIPTION OF WORK REPLACING FENCE			
TYPE OF WORK: [] New Building [] Addition [X] Rehabilitation [] Roofing [] Siding [] Fence	Sq. Ft. O Sq. Ft. Subchapter 8 t NJAC 5:17		(Office Use Only) 0.00 0.00 120.00 0.00 0.00 0.00 0.00 0.
	Administrative Surcharge Minimum Fee State Permit Surcharge Fee TOTAL FEE	\$	120.00 9.00

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



BUILDING SUBCODE TECHNICAL SECTION



Date Received Control # 10-5-2006

Date Issued Permit # 06-2112

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000. Block Qualification Code Work Site Location 765 VIVIAN TEXASE. CNION, N 5 07083	Strature J States C.T.O
Owner In Fee: DAW TORRES	
Tel. e-mail	- DESCRIPTION OF WORK
Address Same UNION	_
Contractor: Pro Tank Services municipality zip code Tel. (908) 851-0057	<u>Remove</u> <u>550</u> Gallon
Address 1 Rahway River Parkway, Union, NJ 07083 e-mail	- Oil Tank mr Side of 1-louse
Contractor License No. or Builder Registration No. 0012283 Exp. Date	
Federal Employee No. <u>20-1140077</u> FAX: (<u>908</u>) <u>851-0313</u>	N I
DOB SUMMARY (Office Use Only) PLAN REVIEW Date Initial INSPECTIONS Dates (Month/Day) [] No Plans Required Type: Failure Failure Approval Initial [] All Footing Footing Footing Footing Foundation [] Foundation Slab Frame Frame Frame Frame [] Other Truss Sys./Bracing Barrier-Free Insulation Finishes -Base Layer Finishes -Final [] CO [] CCO [] CA Energy Context Energy Energy Context Energy Energy	TYPE OF WORK: [] New Building [] Addition [] Rehabilitation [] Roofing [] Siding [] Fence Height (exceeds 6') [] Sign Sq. Ft. [] Pool [] Asbestos Abatement Subchapter 8 [] Léad Haz. Abatement NJAC 5:17 [] Other [ML Demolition]
Use Group Present U Proposed U Est. Cost of Bldg. Work:	
Constr. Class Present Proposed 1. New Bldg. \$	Administrative Surcharge \$
No. of Stories 2. Rehabilitation \$	State Permit Surcharge Fee \$
Height of Structure Ft. 3. Total (1+2) \$ _/300 ex Area - Largest Floor Sq. Ft.	TOTAL FEE \$
New Bidg. Area/Ali Floors Sq. Ft.	
Volume of New Structure Cu. Ft.	
Total Land Area Disturbed Sq. Ft.	U.C.C. F110 1 White = Inspector Copy 2 Canary = Office Copy (rev. 05/05) 3 Pink = Office Copy 4 Gold = Applicant Copy

3 Pink = Office Copy

4 Gold = Applicant Copy

TOWNSHIP OF UNION Code Enforcement Agency 1976 Morris Ave, Union, New Jersey 07083



CERTIFICATE

Permit # 06-2112 Date Issued

Control #

Certificate Issued Date: NOVEMBER 8, 2006

IDENTIFICATION	•
Block 203 Lot 14 Qualification Code	Home Warranty No.
Work Sile Location 765 VIVIAN TERR	Type of Warranty Plan: [] State [] Private
UNION, NEW JERSEY 07083	Use Group R5
Owner in Fee DAWNE TORRES	Maximum Live Load
AddressSAME	Construction Classification
	Maximum Occupancy Load
Tel.	Description of Work/Use:
Contractor PRO TANK SERVICES	
Address 1 RAHWAY RIVER PARKWAY	
UNION, NEW JERSEY 07083	CERTIFCATE OF APPROVAL
Tel. (908) 851-0057 FAX ()	
Lic. No. or Bidrs. Reg. No. 0012283	·
Federal Employer No. 20-1140077	TANK REMOVAL 550
CERTIFICATE OF OCCUPANCY This serves notice that said building or structure has been construced 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 construced 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 the inspection. TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE	☐ 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
if this is a temporary Certificate of Occupancy or Compliance, the following conditions	This serves notice that said potentially hazardous equipment has been installed and/or
must be met no later than or will be subject to fine or	maintained in accordance with the New Jersey Uniform Construction Code and is
order to vacate:	approved for use until
CONSTRUCTION OFFICIAL DATE	Fee \$ ─0─ Pald { } Check No. Collected by: MD