

2019-54

RECEIVED

MAY 15 2019

CALN TWP
RTKO



pennsylvania
OFFICE OF OPEN RECORDS

STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 5-9-2019

REQUEST SUBMITTED BY: E-MAIL U.S. MAIL FAX IN-PERSON

REQUEST SUBMITTED TO (Agency name & address): Caln Township Municipal

NAME OF REQUESTER: Stephen Ferraioli

STREET ADDRESS: 403 Municipal Drive

CITY/STATE/COUNTY/ZIP(Required): Thorndale, PA 19372

TELEPHONE (Optional) _____ EMAIL (optional): _____

RECORDS REQUESTED: **Provide as much specific detail as possible so the agency can identify the information. Please use additional sheets if necessary*

I need records of the township inspection performed at my current residence at 403 Municipal Drive in 2011 when I purchased the home. I would also like a copy of the inspection previous to that if available.

- DO YOU WANT COPIES? YES NO
- DO YOU WANT TO INSPECT THE RECORDS? YES NO
- DO YOU WANT CERTIFIED COPIES OF RECORDS? YES NO
- DO YOU WANT TO BE NOTIFIED IN ADVANCE IF THE COST EXCEEDS \$100? YES NO

**** PLEASE NOTE: RETAIN A COPY OF THIS REQUEST FOR YOUR FILES ****
**** IT IS A REQUIRED DOCUMENT IF YOU WOULD NEED TO FILE AN APPEAL ****

FOR AGENCY USE ONLY

OPEN-RECORDS OFFICER: *A. Juan*

I have provided notice to appropriate third parties and given them an opportunity to object to this request

DATE RECEIVED BY THE AGENCY: 5/15/19

AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: 5/22/19

***Public bodies may fill anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies provided for in this Act, the request must be in writing. (Section 702.) Written requests need not include an explanation why information is sought or the intended use of the information unless otherwise required by law. (Section 703.)*

TOWNSHIP OF CALN
253 MUNICIPAL DR
THORNDALE, PA. 19372
610/384-0400

CERTIFICATE OF OCCUPANCY

Building Permit No. _____ UCC Certificate
of Occupancy No. 2008-00048-UORS

Zoning District R3

Permission is hereby given:

TARSA BERNARD S & LORETTA
(owner of use)
SCHOLL, JARED & DELGRIPPO, KRISTEN
owner (new)

contractor

REMARKS

Use Type: SINGLE FAMILY DETACHED DWELLING

(Lot & Development)

At: 403 MUNICIPAL DR, THORNDALE, PA 19372-1021

Description RESIDENTIAL DWELLING

Joseph Arcy 3/28/08
Building Code Official DATE

Jim Byr 3/28/08
Zoning Officer DATE

1

FIELD CORRECTION NOTICE

LOCATION 403 MUNICIPAL DRIVE PERMIT NO. _____

ISSUED TO TARSA
PERMIT HOLDER AND/OR ALL RESPONSIBLE PARTIES. (2)

NOTICE DELIVERED TO _____

Upon inspection, violations of the CALIF. CODE Sec. _____ were in evidence.

The following orders are hereby issued for their correction: _____

EXHAUST FAN IN DOWNSTAIRS (FIRST FLOOR)
POWERED NEEDS TO OPERATE

GUARD RAIL SYSTEM IS NEEDED ON BASEMENT
STAIRS WITH OPENINGS NOT TO EXCEED 4"

PRESSURE RELEASE VALVE NEEDS TO BE
EXTENDED ON HOT WATER HEATER TO WITHIN
4" OF FLOOR

DOCUMENTATION OF FURNACE SERVICE WITHIN
PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND
APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED. ALL CORRECTIONS MUST BE
THE PAST YEAR KEEPS TO BE SUBMITTED
MADE ON OR BEFORE CONDITIONAL

DATE 3-17-08 BY JOSEPH ARVA
INSPECTOR

ORIGINAL

FIELD CORRECTION NOTICE

LOCATION 403 MUNICIPAL DRIVE PERMIT NO. _____

ISSUED TO TARSA
PERMIT HOLDER AND/OR ALL RESPONSIBLE PARTIES.

NOTICE DELIVERED TO _____

Upon inspection, violations of the CALL CODE Sec. _____ were in evidence.

The following orders are hereby issued for their correction: _____

OK → ELECTRIC FACE PLATE NEEDS TO BE INSTALLED
IN LIVING ROOM

OK → A WORKING SMOKE DETECTOR IS NEEDED
1) IN BASEMENT 2) FIRST FLOOR 3) 2ND FLOOR
4) IN ALL BEDROOMS

OK → SEWER VENT PIPE NEEDS A SECURED CAP

OK → UTO REQUIREMENT SHEET NEEDS TO BE SIGNED

OK → BY BOTH PARTIES AND SUBMITTED

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED. ALL CORRECTIONS MUST BE

MADE ON OR BEFORE CONDITIONAL UTO

DATE 3-17-08

BY JOSEPH ARKAY
INSPECTOR

ORIGINAL

**CALN TOWNSHIP
RESIDENTIAL U & O INSPECTION**

Permit # 2008-00048-UORS Date of Inspection _____
Address of Unit 403 MUNICIPAL DR, THORNDALE, PA

EXTERIOR STRUCTURE

Roof good Windows good Trim (woodwork) good
Gutters/Leaders good Foundatio good
Chimney good Address Posting good

EXTERIOR AREAS

Sanitatio good Sidewalks/Driveway good
Railing N/A Safety hazards no
Public Sidewalks/Curbin good
Sewer trap riser (vent) above grade cap needed

INTERIOR STRUCTURE

Sanitatio good Surfaces (walls, etc.) good
Smoke Detectors: 1st no 2nd no base no Dryer Ex. metal leaf
Railings guardrail needed HVAC good
Electrical Connection good Panel good Washer yes
Ventilation of bathroom fan needs to operate
Woodstove/Fireplace/Chimne good

MISCELLANEOUS

Sewer public Sump Pump to sewer? no Sewer Cert. Rec'd N/A
Water Source public Water test results? N/A
PRV on water service yes
Other _____

COMMENTS

FAX 610-524-4014
0655

faxed
3/28/08
to
Leslie

Person Present LESLIE AXERY Inspected By: JOSEPH ARVAY



CALN TOWNSHIP
 253 Municipal Drive, Thorndale, PA 19372
 610/384-0600, Fax - 610/384-0689
USE & OCCUPANCY TRANSFER/LEASING APPLICATION

Exton Alliance

1058

3-11-08

Zoning District:

PROPERTY ADDRESS: 403 MUNICIPAL DRIVE
THORNDALE PA 19372

CURRENT OWNER INFORMATION:

Name: BER TARSA
 Address: 403 MUNICIPAL DR
THORNDALE, Pa 19372
 Phone #: _____

NEW OWNER /LEASEE INFORMATION:

Name: JARED C. SCHOU &
KRISTEN D. DEL GRIPPO
 Address: _____
 Phone #: _____

RESIDENTIAL PROPERTIES ONLY
FEE: \$50.00 (NON-REFUNDABLE)

RESIDENTIAL DWG. TYPE:

Bi-Level Ranch Cape Cod Two Story Townhome
 Owner occupied Rental

REALTOR INFORMATION:

Name: LESLIE AVERY / C21 ALLIANCE - EXTON Phone 610-524-4000 Fax 484-879-2470
 Settlement date: 3-20-08

COMMERCIAL PROPERTIES ONLY:
FEES ARE NON-REFUNDABLE

RESALE:

Up to 5,000 sq. ft. \$100.00
 5,001 to 15,000 sq. ft. \$125.00
 Above 15,000 sq. ft. \$155.00

CHANGE OF USE

Fee: \$100.00)
 w/renovations Bldg. permit required

Existing Use: _____ **Proposed Use:** _____
 Sq. Ft. _____ Lot Size _____ %Bldg. Coverage _____
 Bldg. Size _____ No. Stories _____ % Impervious Coverage _____
 Bldg. Hgt. _____ # of Employees _____ # Parking Spaces Available _____
 Floodway Yes No Conforming Yes No

Are or have there been hazardous materials on property? _____
 Are or have there been storage tanks located on property? _____
 Underground _____ Above Ground _____ Number _____ Reg. # _____

REALTOR INFORMATION:

Name: _____ Phone _____ Fax _____
 Settlement date: _____

PERMIT # _____ **APPROVED** _____ **FEE:** _____ **DATE:** _____

SIGNATURE OF APPLICANT Leslie Avery **DATE:** 3-4-08

SCHEDULING OF APPOINTMENTS FOR INSPECTION ARE THE RESPONSIBILITY OF THE APPLICANT. THE APPLICANT (AGENT) NAMED ON THIS DOCUMENT UNDERSTANDS THAT SETTLEMENT (TRANSFER OF OWNERSHIP) SHALL NOT OCCUR PRIOR TO OBTAINING THE CERTIFICATE OF USE & OCCUPANCY. If settlement does not occur within six (6) months of the approval date of certificate, the certificate will be invalid and another certificate will be required.

CALN TOWNSHIP USE AND OCCUPANCY REQUIREMENTS FOR A RESIDENTIAL RESALE PROPERTY

1. Sanitary System inflow:
 - a. Sewer nor any on-lot wastewater system
 - b. (Public sewer only) Exterior vent/trap and cleanout for the sewer lateral must be properly capped. The vent must be six (6) inches above the ground.
2. Public water supply must have a pressure reducing valve on the service line and the curb box must be intact if applicable.
3. Handrails and guardrails:
 - a. Handrails (exterior and interior) are to be on one side of the stairs with four or more risers, securely attached, and in good condition. If handrail is to be replaced or installed it must comply with current codes.
 - b. Guardrails (exterior and interior) to be on both sides of open stairs or surfaces exceeding 30 inches above floor/grade, securely attached, and in good condition. If guardrail is to be replaced or installed, it must comply with current codes.
4. Fuel Burning System:
 - a. Verification within the last 365 days that the oil or gas heating system has been serviced by a qualified service contractor. In lieu of such verification, a copy of the fuel burning system section of a home inspector's report completed within the last 80 days which confirms that the fuel burning heating system is in proper working order will suffice.
5. The face end of the mail box is to be located behind the curb or edge of road.
6. House numbers, at least four (4) inches high shall be visible and attached to at least one side of the mail box.
7. All blank spaces (if any) in the fuse box are to be properly filled.
8. All windows and doors shall operate as designed from inside each room without the use of keys or tools. (Example: all windows when raised must remain in raised position).
9. All hot water heaters must have a "blow off" pipe attached to the emergency relief valve. Said pipe must be extended to just above floor level.
10. An operable smoke detector shall be installed in each room used for sleeping. In addition, one operable smoke detector shall be placed in the hallway adjacent to the sleeping areas, and on each level of the property, including the basement.

THE ABOVE ITEMS ARE INSPECTED IN THE INTEREST OF THE TOWNSHIP ONLY AND ARE IN NO WAY TO BE CONSIDERED A PROFESSIONAL PROPERTY HOME INSPECTION.

Signatures by all parties to the real estate transaction must be completed before a Use and Occupancy Certificate is issued.

PROPERTY ADDRESS: 403 Municipal Dr Thorndale Pa 19372

SIGNATURES:

Loetta Tarsa 3.8.08
 Sellers Date

[Signature] / Kristin D. DelGrosso 3/28/08
 Buyers Date

RECEIVED

MAR 28 2008

CODES

ATTN: Joe Aubry
Calm Twp

**AFFIDAVIT REGARDING
USE AND OCCUPANCY REPAIRS**

PROPERTY: 403 MUNICIPAL DRIVE

BUYERS: Jared Scholl / Kristen DelGripo

SELLERS: Loretta Tarsa

DATE OF SETTLEMENT: 3-28-2008

It is understood and agreed that _____
buyer(s) of the property at _____ have
agreed to repair all items noted on the Field Correction Notice dated _____
within 30 days of settlement and have the property reinspected by Calm Township Code
Enforcement Department to verify completion. The premises will not be occupied until
reinspection is completed.

Buyers telephone number is _____

Signature(s) *Jared Scholl*
Kristen D. DelGripo

**THIS DOCUMENT MUST BE NOTORIZED AND
DATED.**

RECEIVED
MAR 28 2008
CODES

Work #3645

Battavio / B&F Service Co.

640 Snyder Avenue, Suite M
West Chester, PA. 19382

(610) 692-7960

DATE

3/25/08

Order:

SERVICE DATE

Loretta Tarsa
403 Municipal Drive
Thorndale, PA 19372

PHONE

Ms. Tarsa
(610) 384-6446

ALTERNATE
PHONE

Schedule Date:

3/27/2008

COMMENTS:
SPECIAL
INSTRUCTIONS

PM collect for PM and balance due of
\$115.00 for Invoice 41910 12-2
call Ms. Avery 610-416-0570 1/2 hr before

QTY.	PART #	DESCRIPTION	UNIT PRC	TOTAL PRC	DATE	SRV REP.	START TIME	STOP TIME	WORK CODE	HOURS	LABOR CHARG
					3/27/08	Av.				1.0	80.00
1		Air filter		3.00							

TOTAL MATERIAL

3.00

TOTAL LABOR

80.00

EQUIPMENT COVERED
BY CONTRACT / WARRANTY

TYPE	SUB	TYPE	MFG.	MOD.	SER.
------	-----	------	------	------	------

Checked gas furnace unit operating ok. Change Air filter.
Pulled cover off outside unit and put it in garage area. Turned power on to outside unit checked freon level ok. Washed outdoor unit. Checked temperature Return 60° Supply 40°.

PREVIOUS SERVICE CALLS

DATE	TICKET	EMPLOYEE
------	--------	----------

Call Type	Hvac Bill
Problem Code	Preventive Main
PO Number	
Payment	Check

WORK DESCRIPTION

MILES

TRAVEL
HOURS

CHARGES	TOTALS	COVERED S/C	CHARGEABLE AMOUNT	TOTAL SERVICE COST
LABOR	80.00			
MATERIALS	3.00			
TRIP CHARGE				
TRAVEL	Invoice 45726			
MISC. CHARGE	Bill from 5/17/06			
PAID BY:	CHARGE CARD	CASH CHK #		

Bill To:
#

Paid
3/27/08
Check # 48

RECEIVED
MAR 28 2008

CODES

Signature: *Leslie Avery*

CHARGE CARD

EXP. DATE

TOWNSHIP OF CALN
253 MUNICIPAL DR
THORNDALE, PA. 19372
610/384-0400

CERTIFICATE OF OCCUPANCY

Building Permit No. _____ UCC Certificate
of Occupancy No. 2011-00051-UORS

Zoning District R3

REMARKS

Permission is hereby given:

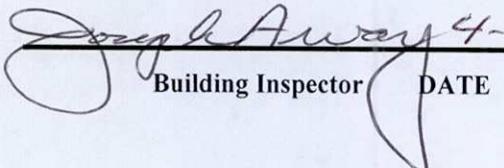
SCHOLL, JARED & DELGRIPPO, KRISTEN
(owner of use)
FERRAIOLI, STEPHEN & AMANDA
owner (new)
contractor

Use Type: SINGLE FAMILY DETACHED DWELLING

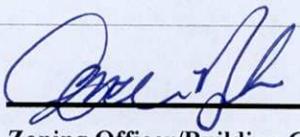
(Lot & Development)

At: 403 MUNICIPAL DR, THORNDALE, PA 19372-1021

Description: RESIDENTIAL DWELLING



Building Inspector DATE

 4/27/2011

Zoning Officer/Building Code Official DATE

SCANNED
MAY 5 2011
ELECTRONICALLY FILED

FIELD CORRECTION NOTICE

LOCATION 403 MUNICIPAL DRIVE PERMIT NO. _____

ISSUED TO SCHOLL & DELGRIPPO
PERMIT HOLDER AND/OR ALL RESPONSIBLE PARTIES.

NOTICE DELIVERED TO _____

Upon inspection, violations of the RAW CODE Sec. _____ were in evidence.

The following orders are hereby issued for their correction: _____

^{OK}
⁴⁻²⁶⁻¹¹ BUYER/SELLER SHEET NEEDS TO BE SIGNED
BY BOTH PARTIES AND SUBMITTED

^{OK}
⁴⁻²⁶⁻¹¹ - GFI TO LEFT OF KITCHEN SINK NEEDS TO
OPERATE PROPERLY (NOT TRIPPING)

^{OK}
⁴⁻²²⁻¹¹ DOCUMENTATION OF FURNACE SERVICE WITHIN
THE PAST YEAR NEEDS TO BE SUBMITTED

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED. ALL CORRECTIONS MUST BE

MADE ON OR BEFORE USE & OCCUPANCY PERMIT IS ISSUED

DATE 4-18-11

BY JOSEPH ARVAY
INSPECTOR

ORIGINAL

**CALN TOWNSHIP
RESIDENTIAL U & O INSPECTION**

Permit # 2011-00051-UORS Date of Inspection 4-18-11

Address of Unit 403 MUNICIPAL DR, THORNDALE, PA

EXTERIOR STRUCTURE

Roof good Windows good Trim (woodwork) good
Gutters/Leaders good Foundatio good
Chimney good Address Posting good

EXTERIOR AREAS

Sanitation good Sidewalks/Driveway _____
Railing good Safety hazards none
Public Sidewalks/Curbin _____
Sewer trap riser (vent) above grade _____

INTERIOR STRUCTURE

Sanitation good Surfaces (walls, etc.) good
Smoke Detectors: 1st 2nd base Dryer Ex. metal fleep
Railings good HVAC good
Electrical Connections GFI in kitchen Panel good Washer yes
Ventilation of bathroom window
Woodstove/Fireplace/Chimne good

MISCELLANEOUS

Sewer public Sump Pump to sewer? no Sewer Cert. Rec'd N/A
Water Source public Water test results? N/A
PRV on water service yes
Other _____

COMMENTS

**CALL FOR PICK UP
484-614-9574**

Person Present KRISTEN Inspected By: JOSEPH ARVAY



CALN TOWNSHIP
 253 Municipal Drive, Thorndale, PA 19372
 610/384-0800, Fax - 610/384-0889
USE & OCCUPANCY TRANSFER - RESIDENTIAL

Zoning District:

PROPERTY ADDRESS:

403 MUNICIPAL DRIVE

CURRENT OWNER INFORMATION:

Name: Joseph Schollano
Kristen DeGrippe
 Address: 403 MUNICIPAL DRIVE
Thorndale PA 19372
 Phone #: 484 614 9574

NEW OWNER /LEASER INFORMATION:

Name: Stephen & Amanda Ferragoli
 Address: 1601 Barker Circle
West Chester PA 19380
 Phone #: 570-977-2147

REALTOR INFORMATION:

Name: Lou Marchegiano Phone: 610 212 6380 Fax: 610 666 1942
 Settlement date: MAY 12 2011

RESIDENTIAL PROPERTIES ONLY
FEE: \$75.00 (NON-REFUNDABLE)

Owner Occupied
 Rental

(Requires rental application)

RESIDENTIAL DWG. TYPE:

Two Story Townhome
 Bi-Level Ranch
 Cape Cod

DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY

PERMIT # _____ APPROVED _____ FEE: _____ DATE: _____

REMARKS

SCHEDULING OF APPOINTMENTS FOR INSPECTION ARE THE RESPONSIBILITY OF THE APPLICANT. THE APPLICANT (AGENT) NAMED ON THIS DOCUMENT UNDERSTANDS THAT SETTLEMENT (TRANSFER OF OWNERSHIP) SHALL NOT OCCUR PRIOR TO OBTAINING THE CERTIFICATE OF USE & OCCUPANCY. If settlement does not occur within six (6) months of the approval date of certificate, the certificate will be invalid and another certificate will be required.

SP

Municipal Information

Inspection of Residential Properties: Inspection of residential properties shall include the following items IN ADDITION to those outlined in the current edition of the International Property Maintenance Code:

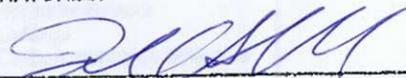
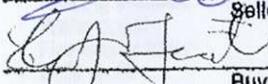
1. Sanitary sewer system inflow:
 - (a) Sump pumps, floor drains and roof downspout drains are not to be connected to the public sanitary sewer nor any on-lot wastewater system.
 - (b) (Public sewer only) Exterior vent/trap and cleanout for the sewer lateral must be properly capped. The vent must be a minimum of six inches about the ground.
2. Public water supply must have a pressure reducing valve on the service line and the curb box must be intact if applicable.
3. Handrails and guardrails:
 - a. Graspable handrails (exterior and interior) are to be on one side of the stairs with four or more risers capable of supporting a 200 lb. load. If handrail is to be replaced or installed it must comply with current codes.
 - b. Guardrails (exterior and interior) to be on both sides of open stairs or surfaces exceeding 30 inches above floor/grade, securely attached, and in good condition. Guardrails shall be a minimum of 36" in height and prevent the passage of a 4" sphere.
4. Fuel burning heating system. Verification within the last 365 days that the oil or gas heating system has been serviced by a qualified service contractor. In lieu of such verification, a copy of the fuel burning system section of a home inspectors report completed within the last 60 days which confirms that the fuel burning heating system is in proper working order will suffice.
5. Mail box shall be located behind the curb or edge of road.
6. An operable smoke detector shall be installed in each room used for sleeping. In addition, one operable smoke detector shall be placed in the hallway adjacent to the sleeping areas, and on each level of the property, including the basement.
7. All dwellings shall have approved address numbers placed in a position to be plainly legible and visible from the street or road fronting the property. The numbers shall contrast with their background. Address numbers shall be Arabic numerals or alphabet letters. Numbers shall be a minimum of 4 inches high with a minimum stroke width of 0.5 inches.
8. Electrical service panel shall be secured. All knockout voids shall be completed filled.
9. All windows and doors shall operate as designed from inside each room without the use of keys or tools. (Example: all windows when raised must remain in raised position).
10. Pressure relief extension piping shall be installed on all hot water tanks and be located within 4" of the floor.

THE ABOVE ITEMS ARE INSPECTED IN THE INTEREST OF THE TOWNSHIP ONLY AND ARE IN NO WAY TO BE CONSIDERED A PROFESSIONAL PROPERTY HOME INSPECTION.

Signatures by all parties to the real estate transaction must be completed before a Use and Occupancy Certificate is issued.

PROPERTY ADDRESS: 403 MUNICIPAL DRIVE

SIGNATURES:

	<u>4/20/2011</u>
Sellers	Date
	<u>04/20/2011</u>
Buyers	Date
Stephen J Ferraioli	Amanda Ferraioli



CALN TOWNSHIP
 253 Municipal Drive, Thorndale, PA 19372
 610/384-0600, Fax - 610/384-0689
USE & OCCUPANCY TRANSFER - RESIDENTIAL

*SCHOLL
 # 218
 \$75*

Zoning District:

PROPERTY ADDRESS:

403 MUNICIPAL DRIVE

CURRENT OWNER INFORMATION:

Name: Jared Scholl and
Kristen DeGripPO
 Address: 403 MUNICIPAL DRIVE
Thorndale PA 19372
 Phone #: 484 614 9574

NEW OWNER / LEASEE INFORMATION:

Name: Stephen & Amanda Ferrigoli
 Address: _____
 Phone #: _____

REALTOR INFORMATION:

Name: LOW MARCHEGIANO Phone 610 212 6380 Fax 610 666 1942
 Settlement date: MAY 12 2011

*Ach
 4/18
 2pm*

RESIDENTIAL PROPERTIES ONLY
FEE: \$75.00 (NON-REFUNDABLE)

Owner Occupied
 Rental (Requires rental application)

RESIDENTIAL DWG. TYPE:

Two Story Townhome
 Bi-Level Ranch
 Cape Cod

DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY

PERMIT # _____ APPROVED _____ FEE: _____ DATE: _____

REMARKS

RECEIVED
 APR 13 2011
 CALN TWP.

SCHEDULING OF APPOINTMENTS FOR INSPECTION ARE THE RESPONSIBILITY OF THE APPLICANT. THE APPLICANT (AGENT) NAMED ON THIS DOCUMENT UNDERSTANDS THAT SETTLEMENT (TRANSFER OF OWNERSHIP) SHALL NOT OCCUR PRIOR TO OBTAINING THE CERTIFICATE OF USE & OCCUPANCY. If settlement does not occur within six (6) months of the approval date of certificate, the certificate will be invalid and another certificate will be required.

Inspection of Residential Properties: Inspection of residential properties shall include the following items IN ADDITION to those outlined in the current edition of the International Property Maintenance Code:

1. Sanitary sewer system inflow:
 - (a) Sump pumps, floor drains and roof downspout drains are not to be connected to the public sanitary sewer nor any on-lot wastewater system.
 - (b) (Public sewer only) Exterior vent/trap and cleanout for the sewer lateral must be properly capped. The vent must be a minimum of six inches about the ground.
2. Public water supply must have a pressure reducing valve on the service line and the curb box must be intact if applicable.
3. Handrails and guardrails:
 - a. Graspable handrails (exterior and interior) are to be on one side of the stairs with four or more risers capable of supporting a 200 lb. load. If handrail is to be replaced or installed it must comply with current codes.
 - b. Guardrails (exterior and interior) to be on both sides of open stairs or surfaces exceeding 30 inches above floor/grade, securely attached, and in good condition. Guardrails shall be a minimum of 36" in height and prevent the passage of a 4" sphere.
4. Fuel burning heating system. Verification within the last 365 days that the oil or gas heating system has been serviced by a qualified service contractor. In lieu of such verification, a copy of the fuel burning system section of a home inspectors report completed within the last 60 days which confirms that the fuel burning heating system is in proper working order will suffice.
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8. Electrical service panel shall be secured. All knockout voids shall be completed filled.
9. All windows and doors shall operate as designed from inside each room without the use of keys or tools. (Example: all windows when raised must remain in raised position).
10. Pressure relief extension piping shall be installed on all hot water tanks and be located within 4" of the floor.

THE ABOVE ITEMS ARE INSPECTED IN THE INTEREST OF THE TOWNSHIP ONLY AND ARE IN NO WAY TO BE CONSIDERED A PROFESSIONAL PROPERTY HOME INSPECTION.

Signatures by all parties to the real estate transaction must be completed before a Use and Occupancy Certificate is issued.

PROPERTY ADDRESS: 403 MUNICIPAL DRIVE

SIGNATURES:

[Signature]
Sellers

4/12/2011
Date

Buyers

Date

RECEIVED
APR 13 2011
CALN TWP.

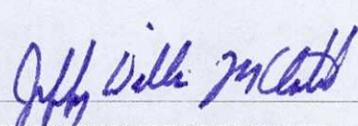
TOWNSHIP OF CALN

PERMIT

Permit No: 2011-00193-ROPE
Date Issued: 5/24/2011
Location of Work: 403 MUNICIPAL DR
Type of Work: ROAD OPENING - INSTALLATION OF VERIZON FIOS

SCANNED
JUN 28 2011
ELECTRONICALLY FILED

Owner: SCHOLL, JARED & DELGRIPPO, KRISTE
Contractor: VERIZION PA INC.
Parcel #: 39-4C-133


TOWNSHIP ENGINEER

THIS PLACARD MUST BE POSTED IN A CONSPICUOUS PLACE ON THE PREMISES, EASILY VISIBLE FROM THE PRINCIPAL STREET, WELL SECURED IF EXPOSED TO THE WEATHER, DURING THE ENTIRE CONSTRUCTION TIME.

WORK MUST BE STARTED WITHIN 6 MONTHS FROM DATE OF ISSUE

03486354

11-109



CALN TOWNSHIP
253 Municipal Drive, Thorndale, PA 19372.
610/384-0600, Fax -610/384-0689
SEWER LATERAL INST./REPAIR, WATER SERVICE, AND RIGHT-OF-WAY PERMIT FEES AND THE
EMERGENCY ROAD OPENING FEES ARE A.T.T. NON-REFUNDABLE.

DATE OF APPLICATION: 5/11/2011

Property Location: Name: <u>Stephen Ferraioli</u>	Contractor Information: Name: <u>VERIZON PA INC</u>
Address: <u>403 Municipal Dr.</u>	Address: <u>180 S HEREE BLVD SUITE 2100</u> <u>EXTON PA 19341</u>
Phone #: <u>570-977-2147</u>	Phone #: <u>610-280-5612</u>

NO ROAD OPENINGS WILL BE ISSUED BETWEEN DECEMBER 1-MARCH 1 PER TOWNSHIP ORDINANCE. IN THE EVENT A PERMIT IS ISSUED PRIOR TO THIS TIME PERIOD AND IS ACTIVE, ANY ROAD OPENING DURING THE DECEMBER 1-MARCH 1 PERIOD WILL REQUIRE AN EMERGENCY FEE OF \$500.00.

PERMIT TYPE		
Sewer Lateral instl.	<input type="checkbox"/>	\$55.00
Sewer lateral repair	<input type="checkbox"/>	\$55.00
Water Service	<input type="checkbox"/>	\$55.00
Right of Way ***	<input checked="" type="checkbox"/>	70.00
Emergency ROW	<input type="checkbox"/>	\$500.00

PERMIT FEES DUE AT TIME OF PERMIT APPLICATION

When work is proposed within a PennDOT right-of-way, the PennDOT Highway Occupancy Permit (HOP) application shall accompany the Right-of-Way Permit as required by Section 134 of the Township Ordinances, and shall be submitted prior to submission of the HOP to PennDOT.

***Pavement Impact Fee based on sq. footage.

1-100 sf = \$3.50/sf
101-500 sf = \$2.50/sf
501-3000 sf = \$2.00/sf
over 3000 sq. ft. = \$1.50/sf

8053245

TYPE AND SIZE OF LINE BEING REPAIRED (if applicable): _____
SEE ATTACHED SKETCH

All contractors installing and/or repairing sewer laterals must be registered in Caln Township. Septic system shall be abandoned per Chester County Health Dept. requirements (if applicable)

All sewer lateral installations and/or repairs must conform to the Caln Township Municipal Authority's Technical Specifications for Construction of Sewer Mains and Appurtenances as amended

Contractors must sign the sewer permit the day the connection is inspected. Right of way openings require separate permit applications. Road restorations must comply with information contained in the Caln Township Sewer Spec Book. All disturbed areas must be stabilized with proper erosion control methods.

Data Applicable to this application

General: Anticipated start date: _____ Anticipated completion date _____

Dimensions: Width of trench: _____ ft Length of trench: _____ ft
Approximate depth of excavation (avg.): _____ ft
Approximate area of excavation: _____ sf

Pipe Lines and Conduits: The improved surface of the road (will) (will not be) be opened.

DO NOT WRITE IN THIS SPACE - FOR OFFICE USE ONLY

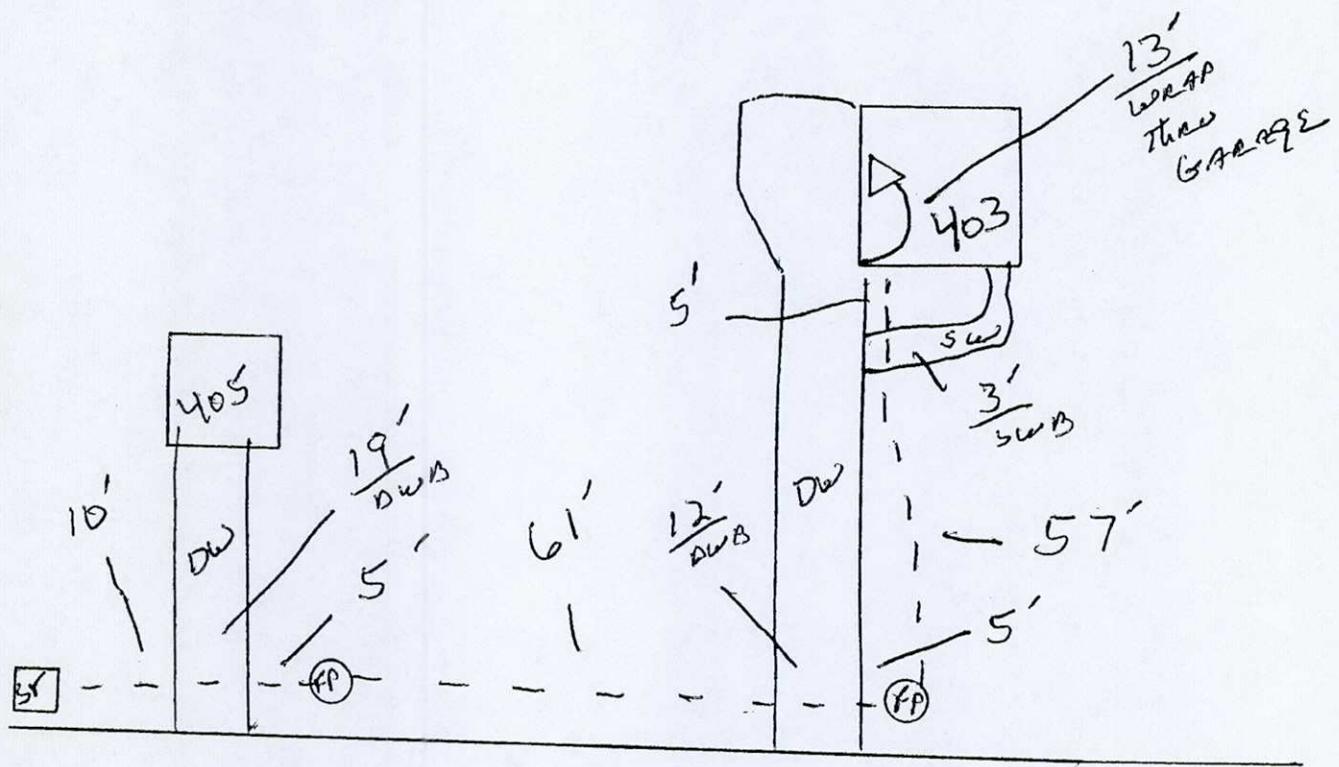
Permit # _____	Approved By: _____	Permit Fee: _____	Date Issued: _____
----------------	--------------------	-------------------	--------------------

REMARKS:

VERIZON PENNSYLVANIA BURIED FIOS SURVEY

Customer Name	STEPHEN FERRAIOLI	BDWO Received	4/29/2011	Job Completed	
Customer Address	403 MUNICIPAL DR	Date Of Survey	5/2/2011	Surveyor:	RICH CLOEREN
Customer City / State	CALN 19372	Serv Ord Number	E2297720	Surveyor Cell:	610-952-2946
Customer Telephone Number	570-977-2147	Date Due	5/14/2011	One Call Ticket #	
Cross Street # 1	Edge Ln	Splitter Hub Name	H2018	Clear Date:	
Cross Street # 2	Sylvan Dr	Home Term Add	F405 MUNICIPAL DR	Fiber Strand #	170
Development Name		PLACEMENT RESULTS		ACTUALS	
Wire Center	COATESVILLE	Actual Total Loop Length			
County	CHESTER	Actual Duct Length in place /Placed			
SURVEY OBSERVATIONS		Actual Loop Length Direct Buried			
Low Voltage Lighting	Y / <input checked="" type="radio"/> N	Driveway Crossing	<input checked="" type="radio"/> Y / <input type="radio"/> N	Actual Length of Pull String Put in Occupied Duct	
Gas/Elec to Pool/BBQ	Y / <input checked="" type="radio"/> N	Sidewalk Crossing	<input checked="" type="radio"/> Y / <input type="radio"/> N	Actual Length of Tracer Wire Placed in Empty Du	
Sprinkler System	Y / <input checked="" type="radio"/> N	Invisible Fence	Y / <input type="radio"/> N	Actual Bore(s), Driveway/Road / Sidewalks	
Temp line placed	Y / <input checked="" type="radio"/> N	Out Buildings	Y / <input checked="" type="radio"/> N	Number of Flower Pots Placed	
Left Neighbor Letter	<input checked="" type="radio"/> Y / <input type="radio"/> N	Left Customer Letter	<input checked="" type="radio"/> Y / <input type="radio"/> N	Number of INT With Flower Pot	
SURVEY RESULTS		Number of Locate Conduit End			
Surveyed Loop Length	250	PERMIT INFORMATION:		State Road:	Y / N
Surveyed Duct Length in place	To place 172	Distance Hand hole/pole to curb		Distance Hand Hole/pole to Center Line	
Surveyed Bore(s) - Dwy/Road	31	Distance White Line to White Line		Distance from Center Line to White Line	
Installation 5845 CV Repair 5845R (circle one)		Total Length in Right of Way		Distance to Nearest Intersection	

13' THRU GARAGE
COPY LARRY



Municipal Dr

TOWNSHIP OF CALN
253 MUNICIPAL DR
THORNDALE, PA. 19372
610/384-0400

CERTIFICATE OF OCCUPANCY

Building Permit No. 2011-00222-BUI UCC Certificate of Occupancy No. 8830

Zoning District R3

REMARKS

Permission is hereby given:
FERRAIOLI, STEPHEN & AMANDA
(owner of use)
owner (new)
1-800-HEATERS INC PA. LIC. #057842
contractor

Use Type: HVAC - WATER HEATER REPLACEMENT
INGLEWOOD
(Lot & Development)

At: 403 MUNICIPAL DR, THORNDALE, PA 19372-1021

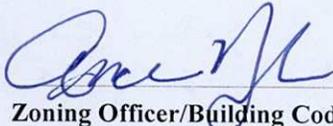
For: HVAC - WATER HEATER REPLACEMENT

SCANNED

DEC 5 - 2011

ELECTRONICALLY FILED


Building Inspector 11/15/11
DATE


Zoning Officer/Building Code Official 11/17/2011
DATE

APPROVED AS TO COMPLIANCE
WITH ZONING ORDINANCE.



CALN TOWNSHIP

DEPARTMENT OF CODE ENFORCEMENT

Andrew F. Reczek, Director of Code Enforcement

Stephen L. Miller, Code Official / Fire Marshal

Raymond Stackhouse, Code Official / Deputy Fire Marshal

Joseph Arvay, Property Maintenance / Housing Inspector

www.calntownship.org

Phone: 610-384-0600 Ext. 145 Fax: 610-384-0689

Email: smiller@calntownship.org

253 Municipal Drive, P.O. Box 72149 Thorndale, Pa. 19372-0149

MISCELLANEOUS INSPECTION REPORT

DATE: 11/8/11 (SM)

LOCATION: 403 Municipal Drive

TYPE OF INSPECTION: Water Heater

- 1 - Replacement Gas water heater installed
- 2 - Venting ok to Existing chimney
- 3 - Existing steel gas line ok w/ shutoff
- 4 - Existing copper feed ok w/ shutoff
- 5 - Expansion tank in place
- 6 - Relief valve piped to floor
- 7 - ok for U&O

(SM)

TOWNSHIP OF CALN
253 MUNICIPAL DR
THORNDALE, PA. 19372
610/384-0600

24 hrs. notice required for inspection scheduling

INSPECTION ASSIGNMENT SHEET

Building Permit No. 2011-00222-BUI

Location 403 MUNICIPAL DR, THORNDALE, PA 19372-1021

Owner FERRAIOLI, STEPHEN & AMANDA

Contractor 1-800-HEATERS INC PA. LIC. #057842 (732-417-0099)

Description HVAC - WATER HEATER REPLACEMENT - SEE COPY OF PERMIT REVIEW

Comments SEE COPY OF PERMIT REVIEW LETTER ATTACHED

FINAL INSPECTION (performed after work is complete and PRIOR TO USING OR OCCUPYING CO



CALN TOWNSHIP

DEPARTMENT OF CODE ENFORCEMENT

Andrew F. Reczek, Director of Code Enforcement

Stephen L. Miller, Code Official / Fire Marshal

Raymond Stackhouse, Code Official / Deputy Fire Marshal

Joseph Arvay, Code Official / Housing Inspector

610.384.0600 fax: 610.384.0689 Email: andy@calntownship.org

253 Municipal Drive, P.O. Box 72149 Thorndale, Pa 19372-0149

www.calntownship.org

September 13, 2011

Steve Ferraioli
403 Municipal Drive
Thorndale, PA 19372

PERMIT REVIEW: Plumbing Permit / Replacement Hot Water Tank (Gas)

1. Water heater shall be installed in accordance with Chapters 20, 28 of the 2009 International Residential Code
2. Combustion, Ventilation and Dilution air shall be provided in accordance with Chapter 24 2009 IRC
3. Provide gas shut off valves as required within six (6) feet of equipment.
4. Clearances shall be provided in accordance with the manufactures specifications, which must be on site during inspection
5. Gas-piping shall be properly bonded in accordance with Section G2410
6. An independent valve shall be installed in the cold water line serving the water heater only. This valve shall interrupt the remaining cold water supply.
7. An approved anti-siphoning device, relief valve and means of shutdown shall be provided in accordance with section 504 IPC
8. Any Contractor performing work shall be registered with the Commonwealth of Pennsylvania Attorney General's office.



BEST | GE 12 Year Gas Water Heaters 12 Year Limited Tank & Parts Warranty – GE Exclusive First Year In Home Warranty

Description			Features			Dimensions (inches)				Energy Info			
Tank Gallon Capacity	Height Description	Model Number / SKU	KBTU's Per Hr. Nat.		Recovery in G.P.H. 90° Rise Nat.	First Hr. Del. G.P.H.	Diam.	Vent Height	Tank Height	Vent Size	Shipping Weight (Pounds)	Energy Factor	Altitude Rating (Feet)
*40	Tall	SG40T12AVG/182-953	40		40.4	68	21	63-1/4	59-3/4	3	135	0.62	10,200
*50	Tall	SG50T12AVG/185-191	40		40.4	83	23	62-1/4	58-3/4	3	165	0.62	10,200
60	Tall	SG60T12YVK/888-489	50		50.5	105	22-1/4	62	58	4	190	0.57	7,700

BETTER | GE 9 Year Gas Water Heaters 9 Year Limited Tank & Parts Warranty – GE Exclusive First Year In Home Warranty

Description			Features			Dimensions (inches)				Energy Info			
Tank Gallon Capacity	Height Description	Model Number / SKU	KBTU's Per Hr. Nat.		Recovery in G.P.H. 90° Rise Nat.	First Hr. Del. G.P.H.	Diam.	Vent Height	Tank Height	Vent Size	Shipping Weight (Pounds)	Energy Factor	Altitude Rating (Feet)
40	Short	PG40S09AVJ/182-786	40		40.4	72	20-1/4	54-1/2	50-1/2	3	130	0.59	10,200
40	Tall	PG40T09AVH/182-906	38		38.4	67	18-1/8	62	58-1/2	3	120	0.59	10,200
50	Tall	PG50T09AVH/184-076	38		38.4	80	20-1/8	61-3/4	58-1/4	3	130	0.58	10,200

GOOD | GE 6 Year Gas Water Heaters 6 Year Limited Tank & Parts Warranty – GE Exclusive First Year In Home Warranty

Description			Features				Dimensions (inches)				Energy Info			
Tank Gallon Capacity	Height Description	Model Number / SKU	KBTU's Per Hr. Nat. LP		Recovery in G.P.H. 90° Rise Nat. LP		First Hr. Del. G.P.H.	Diam.	Vent Height	Tank Height	Vent Size	Shipping Weight (Pounds)	Energy Factor	Altitude Rating (Feet)
30	Short	GG30S06AVG/182-548	30	N/A	30.3	N/A	50	19-3/4	49-3/4	46-1/4	3	118	0.61	10,200
29	Tall	GG30T06AVJ/182-665	32	N/A	32.3	N/A	50	16-1/4	59-1/2	56	3	100	0.62	10,200
29	Tall	GP30T06AVJ/185-332	N/A	30	N/A	30.3	50	16-1/4	59-1/2	56	3	100	0.62	10,200
40	Short	GG40S06AVJ/182-755	36	N/A	36.4	N/A	72	20-1/4	52-3/4	49-1/4	3	130	0.59	7,700
40	Tall	GG40T06AVG/182-757	36	N/A	36.4	N/A	67	18-1/8	62	58-1/2	3	120	0.59	10,200
40	Tall	GP40T06AVR/137-918	N/A	32	N/A	32.3	73	18-1/8	62	58-1/2	3	120	0.59	7,700
50	Tall	GG50T06AVH/183-717	38	N/A	38.4	N/A	80	20-1/8	61-3/4	58-1/4	3	130	0.58	10,200
50	Tall	GP50T06AVR/188-374	N/A	36	N/A	36.4	90	20-1/8	61-3/4	58-1/4	3	130	0.58	7,700
75	Tall	GG75T06ASK/665-179	75.1	N/A	75.8	N/A	141	26-1/4	64-1/4	60-1/4	4	320	N/A	7,700
High Efficiency														
*40	Tall	GG40T06TVG/182-785	40	N/A	40.4	N/A	68	21	63-1/4	59-3/4	3	135	0.62	10,200
*50	Tall	GG50T06TVG/184-045	40	N/A	40.4	N/A	83	23	62-1/4	58-3/4	3	165	0.62	10,200

MOBILE HOME | Richmond 6 Year Gas Water Heaters 6 Year Limited Tank & Parts Warranty

Description			Features				Dimensions (inches)				Energy Info			
Tank Gallon Capacity	Height Description	Model Number / SKU	KBTU's Per Hr. Nat. LP		Recovery in G.P.H. 90° Rise Nat. LP		First Hr. Del. G.P.H.	Diam.	Vent Height	Tank Height	Vent Size	Shipping Weight (Pounds)	Energy Factor	Altitude Rating (Feet)
30	Tall	6V30FT/184-055	32	30	32.3	30.3	48	16-1/4	60	56-1/2	3	100	0.61	5,999
40	Tall	6V40FT/183-965	34	32	34.3	32.3	59	18-1/8	62	58-1/2	3	120	0.59	7,700

POWERVENT | GE 6 Year Gas Water Heaters 6 Year Limited Tank & Parts Warranty – GE Exclusive First Year In Home Warranty

Description			Features				Dimensions (inches)				Energy Info			
Tank Gallon Capacity	Height Description	Model Number / SKU	KBTU's Per Hr. Nat. LP		Recovery in G.P.H. 90° Rise Nat. LP		First Hr. Del. G.P.H.	Diam.	Vent Height	Tank Height	Vent Size	Shipping Weight (Pounds)	Energy Factor	Altitude Rating (Feet)
*40	Tall	GG40T06PVK/125-631	40	N/A	40.4	N/A	68	19-3/4	70-3/4	59	2	140	0.64	7,700
*40	Tall	GP40T06PVK/126-223	N/A	40	N/A	40.4	68	19-3/4	70-3/4	59	2	140	0.64	7,700
*50	Tall	GG50T06PVK/125-645	42	N/A	42.4	N/A	87	21-3/4	69-1/2	58	2	170	0.64	7,700
*50	Tall	GP50T06PVK/126-562	N/A	42	N/A	42.4	87	21-3/4	69-1/2	58	2	170	0.64	7,700

• Check dimensions on carton at time of purchase. Dimensions and specifications are subject to change without notice in accordance with our policy of continuous product improvement.
• Some models may not be available in all markets. • Model number may include a 2 digit suffix indicating model revision.
• All residential gas models have 3/4" NPT water connections except model GG75T06ASK which has 1" water connections.
• See written warranty for complete details.

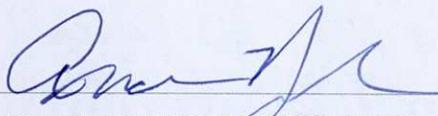
Reverso en Español

TOWNSHIP OF CALN

PERMIT

Permit No: 2011-00222-BUI
Date Issued: 9/13/2011
Location of Work: 403 MUNICIPAL DR
Type of Work: HVAC - WATER HEATER
REPLACEMENT - SEE COPY OF PERMIT
REVIEW LETTER ATTACHED

Owner: FERRAIOLI, STEPHEN & AMANDA
Contractor: 1-800-HEATERS INC PA. LIC. #057842
Parcel #: 39-4C-133



BUILDING CODE OFFICIAL

THIS PLACARD MUST BE POSTED IN A CONSPICUOUS PLACE ON THE PREMISES, EASILY VISIBLE FROM THE PRINCIPAL STREET, WELL SECURED IF EXPOSED TO THE WEATHER, DURING THE ENTIRE CONSTRUCTION TIME.

WORK MUST BE STARTED WITHIN 6 MONTHS FROM DATE OF ISSUE

RECEIVED
SEP 08 2011



CALN TOWNSHIP
 253 Municipal Drive, Thorndale, PA 19372
 610/384-0600, Fax - 610/384-0689
BUILDING PERMIT APPLICATION - PERMIT FEES ARE NON-REFUNDABLE
 Minimum fee due at time of permit application

CODES

Address 403 MUNICIPAL DR. **Subdivision** _____ **Lot #** _____ **Zoning Dist.** _____

- Building Improvement**
- New Building
 - Addition
 - Alteration
 - Basement
 - Deck /Ramp
 - Demolition
 - Driveway
 - Fire Protection
 - Sprinkler/Alarm
 - Hot Tub
 - Tenant fit-out
 - Mechanical
 - Plumbing
 - Pool
 - Roof
 - Shed (>1000 sq. ft.)
 - Tank
 - Other

IDENTIFICATION - To be completed by all applicants
OWNER
 Name: STEVE FERRAIOLI
 Address: 403 MUNICIPAL DR.
THORNDALE, PA 19372
 Phone #: (570) 977-2147

DATE: 9/6/11
Job Cost: 683-

Sewage Disposal
 Public
 Private

Water Supply
 Public
 Private

Contractor Information: Effective 7/1/09 State Cert. number required. PA 057842
 Name: 1800 HEATERS INC
 Address: 2 GOURMET LANE, UNIT G
EDISON, NJ 08837
 Phone #: (932) 417-0099 EXT. 105

Principal Type of Frame

- Frame
- Masonry
- Wood
- Structural Steel
- Reinforced Concrete
- Other/specify

Residential Location: Commercial Location:

Site located in Flood Area
 Yes No

Submit floor plan showing Location w/clearances & material types /Mechanical Central AC?
 Yes No
Will there be an Elevator?
 Yes No

Residential Building Area:
 # of Stories _____
 Basement _____
 Garage _____
 1st. Floor _____
 2nd. Floor _____
 Total Habitable Space _____

Commercial Projects:
 Use Group _____
 Classification _____
 Occupancy _____
 Load _____
 Sprinklered Yes No

Residential Bldg. Only
 # Bedrooms _____
 # Bathrooms _____

Residential Bldg. Only
 # Bedrooms _____
 # Bathrooms _____

Type of Heating Fuel

- Gas
- Oil
- Electric
- Coal
- Other

Lot Area _____ sq.ft.
Building Coverage _____ sq.ft.
Total Impervious Coverage _____ sq.ft.

Off Street Parking Spaces.

SIGNATURE OF APPLICANT: [Signature] **DATE:** 9/6/11
 (MARK MCCLAIN)

DESCRIPTION /COMMERCIAL ACTIVITIES (1) 40 GAL. GAS WATER HEATER REPLACEMENT

DO NOT WRITE IN THIS SPACE - FOR OFFICE USE ONLY

Permit # 222 Approved By: [Signature] Permit Fee: 85.00 Date Issued: 9/13/2011

REMARKS:

10TH
#85.00

OK #1-77
1-2-11
TOL

Date 9/5/11

Township of Caln
Receipt and Proof of Payment

GENERAL FUND

- 01-10-322-910 -- Police Services _____
- 01-10-322-900 -- Street Opening Fee _____
- 01-10-331-125 -- Vehicle/Speed Ctrl/Ordinance _____
- 01-10-361-305 -- Planning Fees _____
- 01-10-361-340 -- Zoning Hearing _____
- 01-10-362-410 -- Building Permit 25.0 _____
- 01-10-362-415 -- Fire Inspection _____
- 01-10-362-452 -- U & O Res & Com _____
- 01-10-362-601 -- Housing Annual Rental Fee _____
- 01-10-362-602 -- Housing Tenant change Fee _____
- 01-10-362-610 -- Contractor License Fee _____
- 01-10-363-700 -- Bus Shelters _____
- 01-10-380-100 -- Miscellaneous _____
- 01-10-380-105 -- Tax Certification Fees _____
- 01-10-380-106 -- Newsletter adversting _____
- 01-10-380-107 -- Ticket Sales _____
- 01-10-380-110 -- Cell Tower Fees _____
- 01-10-314-605 -- Admission Tax _____
- 01-10-314-700 -- Mechanical Tax _____
- 01-10-387-305 -- Parks/Pavilions _____
- 01-10-387-309 -- Recreation Programs _____
- 01- _____ -- _____
- 01- _____ -- _____
- 01- _____ -- _____

SEWER FUND

- 08-10-364-824 -- Inspection Fees _____
- 08- _____ -- _____

OTHER FUNDS

PAID
SEP 08 2011
CODES

Department 1160

Finance _____

TOWNSHIP OF CALN
253 MUNICIPAL DR
THORNDALE, PA. 19372
610-384-0600

CERTIFICATE OF OCCUPANCY

Building Permit No.: 13-00210

Zoning District: R-3

Permission is hereby given:

FERRAIOLI STEPHEN J & AMANDA

(owner of use)

owner (new)

RUSTICRAFT FENCE CO.

contractor

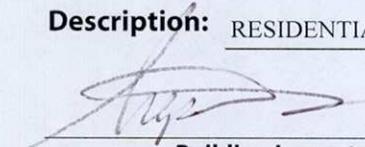
Use Type: R RESIDENTIAL

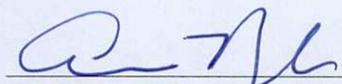
(Lot & Development)

REMARKS

At: 403 MUNICIPAL DR

Description: RESIDENTIAL ACCESSORY STRUCTURE - FENCE

 4/23/13
Building Inspector DATE

 4/23/2013
Zoning Officer/Building Code Official DATE

APPROVED AS TO COMPLIANCE
WITH ZONING ORDINANCE.

SCANNED
APR 26 2013
ELECTRONICALLY FILED



CALN TOWNSHIP

DEPARTMENT OF CODE ENFORCEMENT

Andrew F. Reczek, Director of Code Enforcement

Stephen L. Miller, Code Official / Fire Marshal

Raymond Stackhouse, Code Official / Deputy Fire Marshal

Joseph Arvay, Property Maintenance / Housing Inspector

www.calntownship.org

Phone: 610-384-0600 Ext. 145 Fax: 610-384-0689

Email: smiller@calntownship.org

253 Municipal Drive, P.O. Box 72149 Thorndale, Pa. 19372-0149

MISCELLANEOUS INSPECTION REPORT

DATE: 4/19/13

LOCATION: 403 Municipal Drive

TYPE OF INSPECTION: Final Site & Final

AM: Site Inspection ok per approved plot plan, 4' post & rail w/ wire mesh

PM: Final Inspection ok, work complete, ok for U&O

(Signature)

TOWNSHIP OF CALN
253 MUNICIPAL DR
THORNDALE, PA. 19372
610/384-
0600

24 hrs. notice required for inspection scheduling

INSPECTION ASSIGNMENT SHEET

Building Permit No. 13-00210

Location 403 MUNICIPAL DRIVE, THORNDALE, PA

Owner FERRAIOLI, STEPHEN

Contractor R U S T I C R A F T F E N C E

Description FENCE

Comments SEE COPY OF PERMIT REVIEW LETTER ATTACHED

SITE INSPECTION PRIOR TO BEGINNING CONSTRUCTION

FINAL INSPECTION (performed after work is complete and PRIOR TO USING CERTIFICATE OR OCCUPYING)



www.calntownship.org

CALN TOWNSHIP

DEPARTMENT OF CODE ENFORCEMENT

Andrew F. Reczek, Director of Code Enforcement

Stephen L. Miller, Code Official / Fire Marshal

Raymond Stackhouse, Code Official / Deputy Fire Marshal

Joseph Arvay, Code Official / Housing Inspector

610.384.0600 fax: 610.384.0689 Email: andy@calntownship.org

253 Municipal Drive, P.O. Box 72149 Thorndale, Pa 19372-0149

April 5, 2013

Stephen Ferraioli
403 Municipal Drive
Thorndale, PA 19372

PERMIT REVIEW: Fencing (4'Side and Rear Yard)

1. It is the property owner's responsibility to provide locations of the deeded property corners to assure all structures are installed completely within these property lines and to further verify all structures meet the setback dimensions of the zoning district. If these locations cannot be established, a property survey will be required prior to installation in accordance with Section 155-115 C of the Caln Township Zoning Code
2. Fencing shall be installed so as to place the structure members towards the property being enclosed; thereby presenting the best appears towards the adjacent properties.
3. Fencing shall not be installed within a utility or storm water easement or street right-of-way or within an paper alley used for utilities or access to any other adjacent property.
4. Inspections shall be scheduled allowing a minimum 24-hr. notice by calling 610-384-0600. Required inspections;
1) Site prior to placing any fencing once property lines are established 2) Final



Rusticraft Fence Co.
 439 E King Rd
 Malvern, PA 19355
 ph: 610.644.6770 fx: 610.644.1187
 www.rusticraftfence.com
 HIC Reg # PA002829

PROPOSAL/CONTRACT

Page 1 of 4
 03/10/2013

Customer Information:

Stephen Farraioli
 403 Municipal Drive
 Thorndale, PA 19372

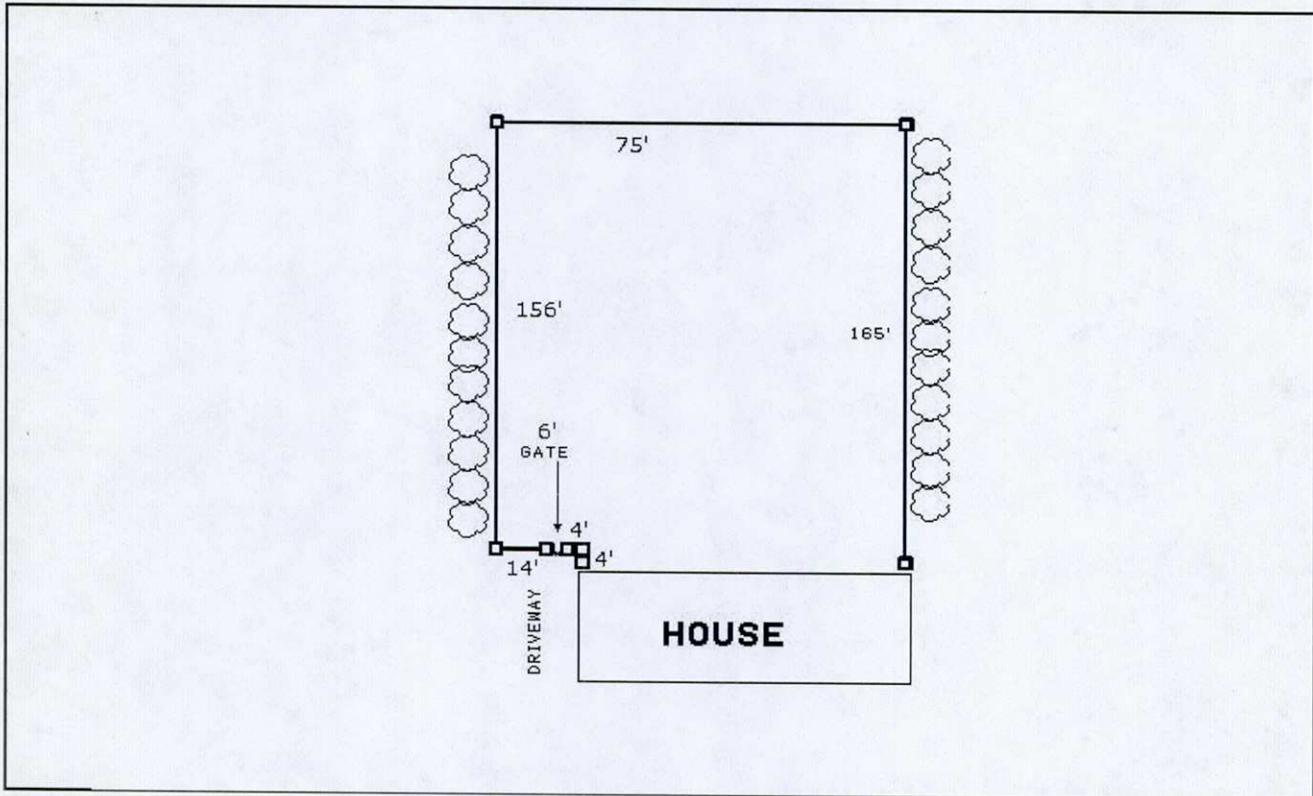
Job Information:

Kevin Paterson
 Fence Consultant
 610-637-8107

Job Description:

- 426' 4' high Split Rail Fencing with Wire
- One 6' wide double gate, Posts set in concrete footers

RECEIVED
 APR 03 2013
 CALN TWP.



Contract Amount: \$ 5163.59
 Deposit: \$ 2700.00
 Balance Due: \$ 2463.59

I Approve the 4 pg. Contract and Itemized Estimate :

 Customer Date

Accepted for Rusticraft Fence Co.:

 Salesperson Date

TOWNSHIP OF CALN

PERMIT

Permit No: 13-00210

Date Issued: 04/03/13

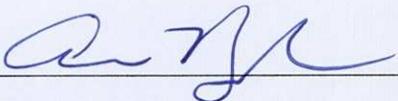
Location of Work: 403 MUNICIPAL DR

Type of Work: FENCE - SEE COPY OF PERMIT REVIEW
LETTER ATTACHED

Owner: FERRAIOLI STEPHEN J & AMANDA

Contractor: RUSTICRAFT FENCE CO.

Parcel #: 39-4C-133.0


ZONING OFFICER

THIS PLACARD MUST BE POSTED IN A CONSPICUOUS PLACE ON THE PREMISES, EASILY VISIBLE FROM THE PRINCIPAL STREET, WELL SECURED IF EXPOSED TO THE WEATHER, DURING THE ENTIRE CONSTRUCTION TIME.

WORK MUST BE STARTED WITHIN 6 MONTHS FROM DATE OF ISSUE



Caln Township
253 Municipal Drive, Thorndale, PA 19372
610/384-0600, Fax 610/384-0689
ZONING PERMIT APPLICATION – PERMIT FEES ARE NON-REFUNDABLE.
Minimum fee due at time of permit application

455 RECEIVED
 APR 03 2013
 CALN TWP.

Address 403 Municipal Drive **Subdivision** _____ **Lot #** _____ **Zoning Dist.** _____

IDENTIFICATION – To be completed by all applicants
OWNER and/or TENANT
Name: Stephen Ferraioli
Address: 403 Municipal Dr
Thorndale, PA 19372
Phone #: 570-977-2147

Contractor Information: Effective 7/1/09 State Cert.
required: # PA002829
Name: Rusticcraft
Address: 437 E King Rd
Malvern PA 19355
Phone #: 610 644 6770

ZONING PERMITS

Fence/Wall Patio
 Forestry Grading Shed
 Sign

DATE: _____
 JOB COST: _____

WALL Type: _____ Hgt. _____
 (less than 4' in height)

No wall shall be erected within a floodway, street right-of-way, utility easement, drainage or sewer easement. Please show all easements that exist on your property.

Show location of wall in relation to structures.
 Walls erected within the require front yard shall not exceed three (3) feet in height

SIGNS

Wall Special Event
 Freestanding (date of event) _____
 Banner Grand Opening
 Signs illuminated yes no
 # Existing Signs _____
 Size of ea. Sign _____
 Type of Signs _____
 Bldg. Dimensions _____
 Wall Frontage _____

FENCE Type: Split Rail, Wood, Wire
 Height: 4 feet

No fence shall be erected within a floodway, street right-of-way, utility easement, drainage or sewer easement. Please show all easements that exist on your property.

Show location of fence in relation to structures.

Fences erected within the required front yard shall not exceed five (5) feet.

SHEDS (Less than 1000 Sq. Ft.)

Size of Shed _____

Type of Shed Type of foundation

Wood Concrete Blocks
 Metal Gravel Bed
 Concrete Slab
 Other

PATIO : Size _____ Type _____ Show location and distances to property line on detailed plot plan.
 Plot plan must give dimensions of all structures (house, driveway, and other accessory structures)

SIGNATURE OF APPLICANT [Signature] DATE: 4/2/13

DO NOT WRITE IN THIS SPACE – FOR OFFICE USE ONLY

Permit # 13-00210 Approved By: [Signature] Permit Fee: \$55 Date Issued: 4/5/2013

REMARKS: See Review Comments

1345

April 20th

Ferraioli CH#196



CALN TOWNSHIP

RECEIVED

Department of Code Enforcement

APR 03 2013

Andrew F. Reczek, Director of Code Enforcement

Stephen L. Miller, Code Official/Fire Marshal

Raymond Stackhouse, Code Official/Deputy Fire Marshal

Joseph Arvay, Property Maintenance/Housing Inspector

CALN TWP.

www.calntownship.org

610-384-0600 fax: 610-384-0689 Email: andyr@calntownship.org
253 Municipal Drive, P.O. Box 72149 Thorndale, Pa. 19372-0149

PROTOCOL FOR ZONING PERMIT SUBMITTAL

1. Provide plot plan showing all existing & proposed construction. No application will be accepted without the above information. Provide setback dimensions from any structure (new or existing, ie - sheds, walls < 4 ft., deck < 30", fences, signs) or paved surface to all property lines.
2. Sign permit shall include plot plan. Building dimension with size & location of all new and existing signs. Freestanding signs - show height.
3. The minimum fee will be collected at time of application. Caln Township Code Official will calculate total fee. Any additional fees will be collected prior to issuance of Permit. Fee schedule is available on line @ www.calntownship.org
4. Caln Township reserves the right to reject any permit application that does not comply with above referenced requirements
5. The Zoning Officer has thirty (30) days to review applications.
6. Pennsylvania Home Improvement Contractor License number required.
7. Forestry Application - Please provide two (2) detailed plot plans showing extent of forestry/grading. Plot plan must show property dimensions as well as all structures (if any) located on same with distances to property line. The applicant must also show limits of disturbances as it pertains to existing structures. Locate all easements, swales, berms, etc. that exist on the property and indicate location of erosion and sedimentation control measures to be used.

Signature of applicant

Date

4/2/13