

BLOCK

22

LOT

12

QUALIFICATION CODE

ADDRESS (SITE)

121 Hogate Blvd

PERMIT NO.

18-065



CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Proposed Work Site at: 121 Hogate Blvd

2. Name of Owner in Fee: US Bank Trust
 Tel. (302) 510 0206 e-mail _____
 Address 13801 Wireless Way OKlahoma City OK 73134
street municipality zip code

3. Ownership in Fee: Public Private

4. Principal Contractor: Power Tek Electrical Tel. (856) 237 7608
 Address 1219 Karen Ann Ct. e-mail _____
West Deptford NJ 08086
city state zip code

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. 27-0153360 FAX: (____) _____

5. Architect or Engineer _____ Contact _____
 Address _____ e-mail _____
 Tel. (____) _____ FAX: (____) _____

6. Responsible Person in Charge once Work has Begun Brian Amara
 Tel. (856) 237 7608 FAX: (____) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical		<u>82</u>	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee		<u>3</u>	
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other <u>CR # 247</u>			
13. TOTAL	\$	<u>85</u>	

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure	_____ ft.
3. Area - Largest Floor	_____ sq. ft.
4. New Building Area	_____ sq. ft.
5. Volume of New Structure	_____ cu. ft.
6. Max. Live Load	
7. Max. Occupancy Load	
8. If Industrialized Building: State Approved _____ HUD _____	
9. Total Land Area Disturbed	_____ sq. ft.
10. Flood Hazard Zone	
11. Base Flood Elevation	_____ ft.
12. Wetlands yes _____ no _____	

IIa. PROPOSED WORK

- ☐ Minor Work ☐ New Building ☐ Addition ☐ Demolition
☐ Repair ☐ Alteration ☐ Renovation ☐ Reconstruction
☐ Asbestos Abat. -Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

- ☐ Building
☒ Electrical
☐ Plumbing
☐ Fire Protection
☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>1800.-</u>				<u>5/8/18</u>	<u>TB</u>			

TOTAL COST

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present: _____
4. No. of dwelling units: Total Units Income-restricted
- | | |
|----------------|-------|
| Gained, Sale | _____ |
| Gained, Rental | _____ |
| Lost, Sale | _____ |
| Lost, Rental | _____ |

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present: _____
- C. MIXED USE -List secondary use(s): _____
- D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:

- ☐ Partial Releases
☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

- ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
☐ High Pressure Boilers
☐ Pressure Vessels
☐ Refrigeration Systems
☐ Cross-Connections/Backflow Preventers
☐ Hazardous Uses/Places of Assembly
☐ Sprinklers/Standpipes
☐ Smoke Control Systems in Open Wells
☐ Underground Storage Tanks
☐ Swimming Pools, Spas and Hot Tubs
☐ LPGas Tanks
☐ Fire Alarm

BLOCK

22

LOT

12

QUALIFICATION CODE

ADDRESS (SITE)

PERMIT NO

19-005



CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Proposed Work Site at: 121 Hogate Blvd., Lower Alloways Creek, NJ2. Name of Owner in Fee: US Bank TrustTel. (214) 754-8355

e-mail

Address 13081 Wireless WayOklahoma City731343. Ownership in Fee: Public ☐ Private ☐4. Principal Contractor: Wilson MechanicalTel. (609) 388-8747Address 240 Erial Rd.,e-mail wilsonofficenj@gmail.coPine Hill, NJ, 08021License No. OR, if new home, Builder Reg. No. 12615 Exp. Date 06/30/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 260245801

FAX:

5. Architect or Engineer

Contact

Address

e-mail

Tel.

FAX:

6. Responsible Person in Charge once Work has Begun Michael WilsonTel. (609) 770-1160

FAX:

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical	\$	190	
3. Plumbing	\$	177	
4. Fire Protection Mech	\$	153	
5. Elevator Devices	\$		
6. Subtotal	\$		
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee	\$	15	
10. Subtotal	\$		
11. Cert. of Occupancy	\$	50	
12. Other	\$		
13. TOTAL	\$	585	

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories		
2. Height of Structure	ft.	
3. Area — Largest Floor	sq. ft.	
4. New Building Area	sq. ft.	
5. Volume of New Structure	cu. ft.	
6. Max. Live Load		
7. Max. Occupancy Load		
8. If Industrialized Building: State Approved	HUD	
9. Total Land Area Disturbed	sq. ft.	
10. Flood Hazard Zone		
11. Base Flood Elevation	ft.	
12. Wetlands	yes no	

IIa. PROPOSED WORK

☐ Minor Work☐ New Building☐ Addition☐ Demolition☐ Repair☐ Alteration☐ Renovation☐ Reconstruction☐ Asbestos Abat. -Subch. 8☐ Lead Hazard Abatement☐ Radon Remediation☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

☐ Building☒ Electrical☒ Plumbing☒ Mechanical☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
2,000				7/3/18	TB			
4,000				7-5-18	JD			
3400				1-8-19	JD			

TOTAL COST

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

- State Specific Use:
- Use Group, Proposed: Select Group
- Change in Use Group, Indicate Present: Select Gr
- No. of dwelling units: Total Units Income-restricted

Gained, Sale	
Gained, Rental	
Lost, Sale	
Lost, Rental	

B. NON-RESIDENTIAL (primary use)

- State Specific Use:
- Use Group, Proposed: Select Group
- Change in Use Group, Indicate Present: Select Gr

C. MIXED USE -List secondary use(s):

D. Construct. Classification: Present

Proposed

III. PLAN REVIEW (optional)

DO YOU WANT:

- ☐ Partial Releases
- ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

- ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
- ☐ High Pressure Boilers
- ☐ Pressure Vessels
- ☐ Refrigeration Systems
- ☐ Cross-Connections/Backflow Preventers
- ☐ Hazardous Uses/Places of Assembly
- ☐ Sprinklers/Standpipes
- ☐ Smoke Control Systems in Open Wells
- ☐ Underground Storage Tanks
- ☐ Swimming Pools, Spas and Hot Tubs
- ☐ LPGas Tanks
- ☐ Fire Alarm