



**Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723**

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Identifiable Information of Township Employee(s).

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- Information in a personal income or other tax return
- Information describing a natural person's finances, income, assets, liabilities, net worth, bank balances, financial history or activities, or creditworthiness, except as otherwise required by law to be disclosed.


Bryan J. Dickerson, CA, CMR
Township Archivist

BLOCK 210-03 LOT 8 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 21-2774



CONSTRUCTION PERMIT APPLICATION

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

C-21003965

I. IDENTIFICATION

1. Proposed Work Site at: 12 Hollycrest Dr. Brick NJ
2. Name of Owner in Fee: Lucy Hayslip Tel. ()
Address 12 Hollycrest Dr. Brick NJ 08125
street municipality zip code
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: MJ Electric LLC Tel. (82) 749-3596
Address 201 W. Sylvia Avenue, Neptune
License No. OR, if new home. Builder Reg. No. 15150 Exp. Date 3/24
Federal Employee No. _____ FAX: ()
5. Architect or Engineer _____ Tel. ()
Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Mike Masch
Tel. (82) 749 3596 FAX: ()

Electric Alterations

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical	\$	<u>1750</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>7-</u>	
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$	<u>182-</u>	

VI. BUILDING/SITE CHARACTERISTICS

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. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____
no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

OPTIONAL (for office use only)

II. PROPOSED WORK	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building		<u>MJ</u>	<u>10/20/11</u>						
3. ☐ Addition									
4. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing ☐ Mechanical									
7. ☒ Electrical					<u>10-21-21</u>	<u>MJ</u>			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS									

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/
• Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1) IBC 2018 NJ
2. ☐ Multi-Family (R-2) IBC 2018 NJ
3. ☐ Two-Family (R-3) IBC 2018 NJ
4. ☐ Two-Family (R-5) IRC 2018 NJ
5. ☐ One-Family (R-3) IBC 2018 NJ
6. ☐ One-Family (R-5) IRC 2018 NJ

No. of dwelling units:

Before Construction _____

After Construction _____

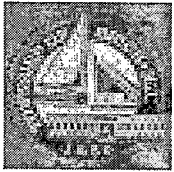
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change In Use Group, Indicate Former:



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 11/10/2021
Control Number C-21-003965
Permit Number 21-2774
Permit Issue Date 10/25/2021
Certificate Number 21-2774

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 12 HOLLYCREST DR. Brick Township, NJ Block: 210.03 Lot: 8 Qual: _____
Owner in Fee: HAYSLIP, LUKE
Owner Address: 12 HOLLYCREST DRIVE BRICK NJ 08723
Telephone: _____
Contractor: MM Electric, LLC
Address: 209 W SYLVANIA AVE Neptune NJ 07753
Telephone: (732) 749-3596 Fax: (732) 749-3597 Federal Emp. Num: _____
License Number or Builders Registration Number: _____

Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: ELECTRICAL ALTERATIONS

Certificate Comments:

☐ **Certificate of Occupancy**

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

☒ **Certificate of Approval**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **Certificate of Continued Occupancy**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ **Temporary Certificate of Compliance**

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

This certificate has an expiration date of:

Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**

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

This certificate has an expiration date of:

Conditions to be met:

Construction Official

Date Printed: 11/10/2021

U.C.C. F260 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received
Control #

Issued
Permit

10/25/21
21-2774

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

Block 210-03 Lot 8 Qualification Code _____

Work Site Location 12 Hollycrest Drive

Brick, NJ 08723

Owner in Fee Luxe Itay Slip

Address 12 Hollycrest Drive

Brick, NJ 08723

Tel (_____) _____

Contractor MM Electric LLC

Address 209 West Synagogue Avenue

North Plainfield, NJ 07753

Tel (_____) 749-3570 FAX (_____) _____

Contractor License No. 154171

Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

[] Pole/Pad # _____ [] Temporary [] Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 3518.03

JOB SUMMARY (Office Use Only)					
PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
	Date Initial	Type:	Failure	Failure	Approval Initial
[] No Plans Required		Rough	_____	_____	_____
Joint Plan Review Required:		Barrier-Free	_____	_____	_____
[] Building [] Plumbing		Trench	_____	_____	_____
[] Fire [] Elevator		Temp. Serv.	_____	_____	_____
☒ Elec. Plans Approved		Constr. Serv.	_____	_____	_____
Date: <u>10-21-21</u>		TCO	_____	_____	_____
Approved by: <u>[Signature]</u>		Other	_____	_____	_____
		Service	_____	_____	_____
		Final	_____	_____	_____
		Barrier-Free	_____	_____	_____
SUBCODE APPROVAL		Temp. Cut-in-Card Date Issued	_____	_____	_____
[] CO [] CCO ☒ CA		Final Cut-in-Card Date Issued	_____	_____	_____
Date: <u>10-28-21</u>		Annual Pool Inspection	_____	_____	_____
Approved by: <u>[Signature]</u>		Date of Grounding and Bonding Certification	_____	_____	_____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the agent of record on record and am authorized to make this application and perform the work shown on this application.

Applicant's Signature/Contractor's Seal and Signature

[] Licensed Elec. Contractor [] Permit Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
<u>2</u>		Lighting Fixtures
<u>7</u>		Receptacles
_____		Switches
_____		Detectors
_____		Light Poles
_____		Motors—Fract. HP
_____		Emergency & Exit Lights
_____		Communications Points
_____		Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

_____	Pool Permit/with UW Lights
_____	Storable Pool/Spa/Hot Tub
_____	KW Elec. Range/Receptacle
_____	KW Oven/Surface Unit
_____	KW Elec. Water Heater
_____	KW Elec. Dryer/Receptacle
_____	KW Dishwasher
_____	HP Garbage Disposal
_____	KW Central A/C Unit
_____	HP/KW Space Heater/Air Handler
_____	KW Baseboard Heat
_____	HP Motors 1/+ HP
_____	KW Transformer/Generator
_____	AMP Service
<u>1</u>	AMP Subpanels
<u>30</u>	AMP Motor Control Center
_____	KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

Handwritten signature

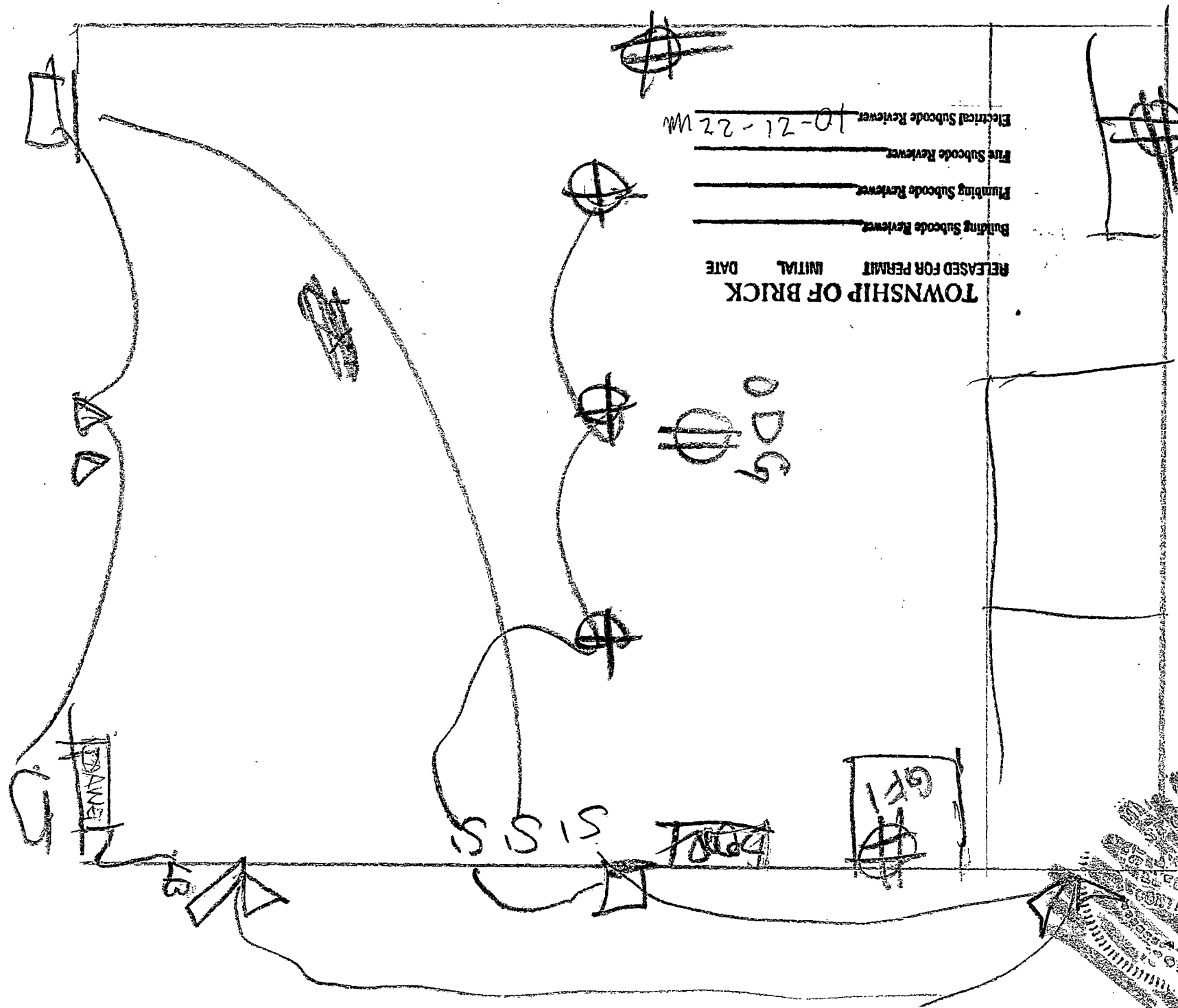
RECEIVED
TOWNSHIP OF BRICK
PLUMBING
ELECTRICAL
FIRE
DEPARTMENT
JAN 10 2002

TOWNSHIP OF BRICK
RELEASED FOR PERMIT INITIAL DATE

Building Subcode Reviewer _____
Plumbing Subcode Reviewer _____
Fire Subcode Reviewer _____
Electrical Subcode Reviewer _____

10-21-22 VM

ODG





CONSTRUCTION PERMIT

Date Issued 10/25/11
Control # C-21-003965
Permit # 21 2774

IDENTIFICATION Block: 210.03 Lot: 8 Qualifier _____
Work Site Location: 12 HOLLYCREST DR. Brick Township, NJ Contractor MM Electric, LLC
Address 209 W SYLVANIA AVE Neptune NJ 07753
Owner in Fee HAYSLIP, LUKE
12 HOLLYCREST DRIVE BRICK NJ 08723 Telephone: (732) 749-3596
Lic. No. or Bldrs. Reg. No. 15050
Federal Employee No. _____

Is hereby granted permission to perform the following work:

- | | | |
|--|--|--|
| ☐ BUILDING | ☐ PLUMBING | ☐ LEAD HAZARD ABATEMENT |
| ☒ ELECTRICAL | ☐ FIRE PROTECTION | ☐ DEMOLITION |
| ☐ ELEVATOR DEVICES | ☐ ASBESTOS ABATEMENT
(Subchapter 8 only) | ☐ OTHER |

DESCRIPTION OF WORK:

ELECTRICAL ALTERATIONS

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$3,518

Daniel Z. Nardella
Construction Official

10/25/11
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$175
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$7
CO Fee	
Other	\$0
Total	\$182

Check No. _____
Cash \$0.00
Credit \$0.00
Collected By [Signature]

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

RELEASED FOR PERMIT	INITIAL	DATE
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Pumping Station Review

File Subcode: Narrative

Electrical Subcode Reviewer 10-20-01 WWC

MM Electric
209 W Sylvania Ave
Neptune City, NJ 07753 US
732-749-3596
mike@mmelectricnj.com



Estimate

ADDRESS

Luke Hayslip
12 Hollycrest Drive
Brick Township, New Jersey
08723 United States

ESTIMATE # 6983

DATE 09/28/2021

ACTIVITY	QTY	RATE	AMOUNT
GARAGE Install a 30 amp Sub panel in the garage using existing pipe from basement to garage. Rewire 3 existing lights on new switch Install Three 20 amp quad outlets on each wall of the shed Install 2 new spot lights on the yard side of the shed Remove old wiring and fixtures	1	3,300.00	3,300.00T
Sales Install outlet for garage door. Replace light in bedroom closet	1	550.00	550.00T
Permit application is included, permit fees are NOT included.	SUBTOTAL		3,850.00
Estimate is subject to change based on changes to location and/or scope of work. Any holes cut to perform the work discussed with homeowner prior to the service is their responsibility to repair . Thank you and have a great day!	TAX (6.625%)		255.06
	TOTAL		\$4,105.06

An additional 3% Convenience Fee is added to the total amount if paying with a Credit Card

Accepted By

Accepted Date