CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: 13 BROWN AVE. LAVALLETTE, N.J.
2. Owner Name: YOLANDA M. SIMONELLI Tel. [redacted]
   Address 13 BROWN AVE.
3. Principal Contractor: HOLMART CONST. INC. Tel. [redacted]
   Address 301 GRAND CENTRAL AVE LAVALLETTE, N.J.
   Lic. No. or Builder Reg. No. _____ Federal Emp. No. 22-1958301
4. Architect or Engineer: OWNER Tel. (___) _____
   Address _____
5. Responsible Person in Charge of Work J. HART Tel. (201) 929-3084

II. PROPOSED WORK

A. TYPE OF WORK

1. ☐ Minor Work (Single Trade)
2. ☐ Small Job ($5,000 and no Prior Approvals)
   Complete only II.B., III and IV.A. and Page 2
3. ☐ New Building
4. ☐ Addition
5. ☒ Alteration
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☐ Other: _____

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☒	Building/ Structural	$ 11,000
2. ☐	Plumbing	
3. ☒	Electrical	500
4. ☐	Fire Protection	
5. ☐	Other _____	
6. ☐	Other _____	
	TOTAL COST	$ 11,500

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

1. ☐ Elevators/Dumbwaiters
2. ☐ High-Pressure Boilers
3. ☐ Refrigeration Systems
4. ☐ Pressure Vessels
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Cross-connections/ Backflow Preventors
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R–1)
2. ☐ Multi-Family (R–2) HMD Reg. No.: _____
3. ☐ Two Family (R–3b)
4. ☒ One-Family (R–3a)

If new construction, enter no. of dwelling units _____

If other than new construction, enter no. of dwelling units:
Before Construction: _____
After Construction: _____
Net Gain (or loss): _____

B. NON-RESIDENTIAL

5. ☐ Theatres with Stage (A–1–A)
6. ☐ Movie Theatres (A–1–B)
7. ☐ Night Clubs (A–2)
8. ☐ Restaurants, Libraries, Museums (A–3)
9. ☐ Religious Assembly (A–4)
10. ☐ Outdoor Assembly (A–5)
11. ☐ Business (B)
12. ☐ Educational (E)
13. ☐ Moderate-Hazard Factory (F–1)
14. ☐ Low-Hazard Factory (F–2)
15. ☐ High-Hazard (H)
16. ☐ Institutional Detention Center (I–1)
17. ☐ Hospitals, Infirmaries (I–2)
18. ☐ Group Homes (I–3)
19. ☐ Mercantile (M)
20. ☐ Moderate-Hazard Warehouse (S–1)
21. ☐ Low-Hazard Warehouse (S–2)
22. ☐ Temporary, Misc. (U)
23. ☐ Other _____

State Specific Use: HOME.

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☒ Private (Individual, Corp., Non-profit Inst., Etc.)
2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

	Principal	Secondary	Type
3.	☒	☐	Gas
4.	☐	☐	Oil
5	☐	☐	Electric
6.	☐	☐	Solid (Wood, Coal, Etc.)
7.	☐	☐	Propane
8.	☐	☐	Solar
9.	☐	☐	Other _____

C. TYPE OF SEWAGE DISPOSAL

10. ☒ Public or Private Company
11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☒ Public or Private Company
13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories 2
15. Height of Structure 25 Ft.
16. Area–Largest Floor _____ Sq. Ft.
17. Bldg. Area–All Fls. _____ Sq. Ft.
18. Volume of Structure _____ Cu. Ft.
19. Total Land Area Disturbed _____ Sq. Ft.

BUILDING SUBCODE TECHNICAL SECTION

UNIFORM CONSTRUCTION CODE — NEW JERSEY

PERMIT NO. 6415
DATE ISSUED 12/11/86
REVISION DATE
Block 10 Lot 18
Subdivision

IDENTIFICATION

LICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Yolanda M. Simunelli
13 Brown Ave.
Lavallette, N.J.
[redacted]
Site Address 13 Brown Ave

Contractor Holmart Const. Inc.
Address 301 Grand Central Ave
Lavallette, N.J.
Tel. [redacted]
Lic. No.
Federal Emp. No. 22-1958-301.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

H. E. Hart
AGENT SIGNATURE

TECHNICAL SITE DATA

SCRIPTION OF WORK

e detail description including materials used, ensions, etc.

Building upstairs Deck over existing Room. Eliminating upstairs Bedroom. 2 4x12" Beams, Fiberglass

See Plans

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☒ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

Fee Basis	Fee
	$
SUBTOTAL	$
Minimum Building Fee (if applicable)	$
Total Building Fee (Greater of Minimum or Subtotal)	$ 115

BUILDING CHARACTERISTICS

GROUP: _____ Present _____ Proposed

of Stories _____ Total Building Area—All Floors _____ Sq. Ft.

ght of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

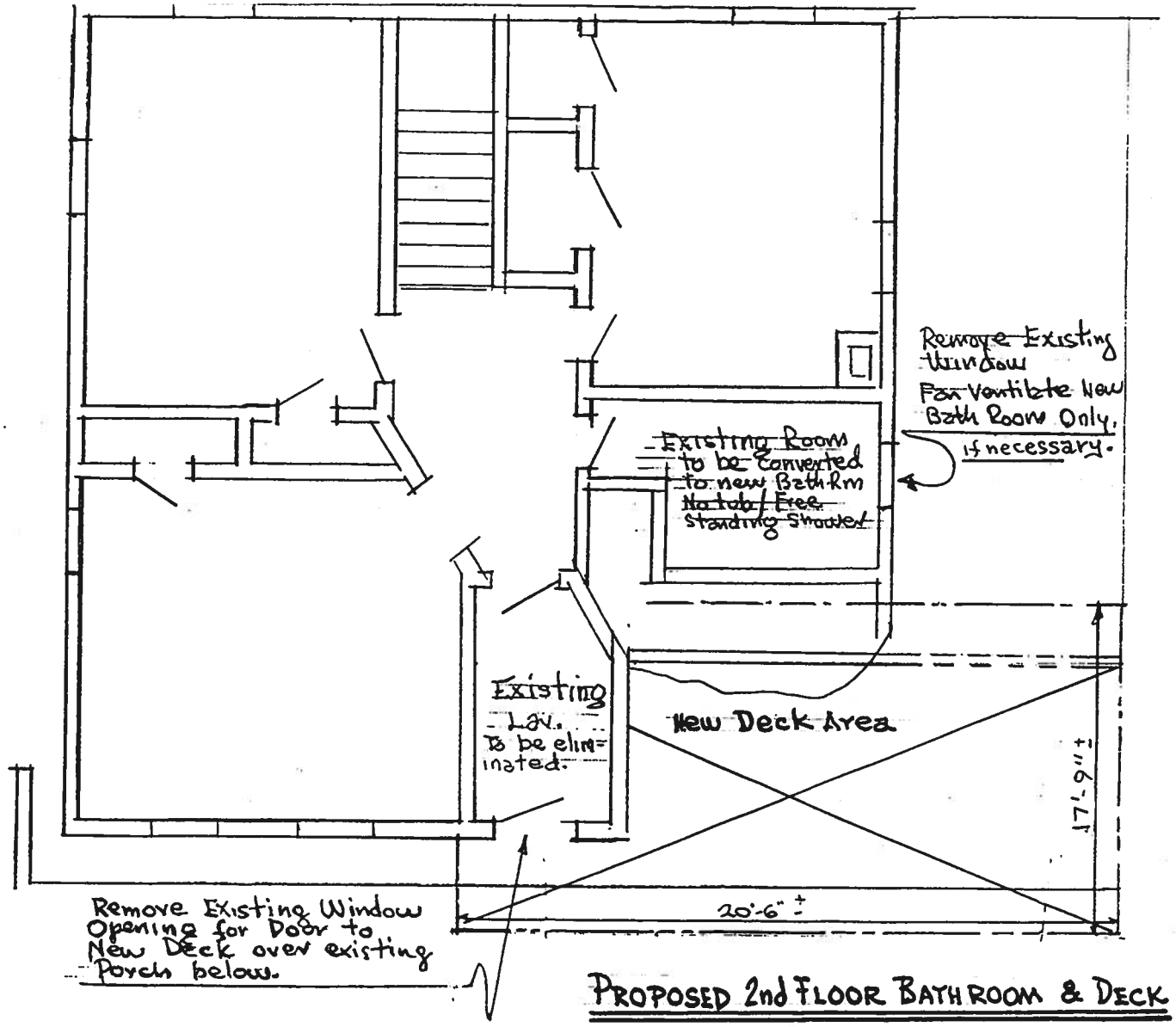
a—Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

mated Cost of Building Work: $ 11,500 —

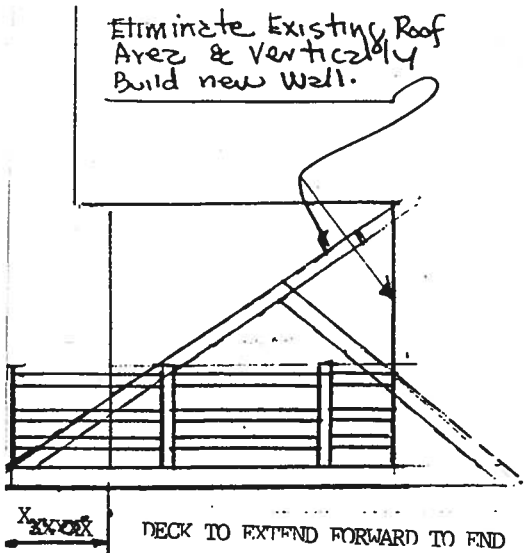
D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

Form F-110 (8/83) Green = Office Copy White = Applicant Copy Beige = Inspector Copy



PROPOSED 2nd FLOOR BATHROOM & DECK



SIDE ELEVATION

OWNER

YOLANDA SIMONELLI

13 BROWN AV. -LAVALLETTE, N.J.

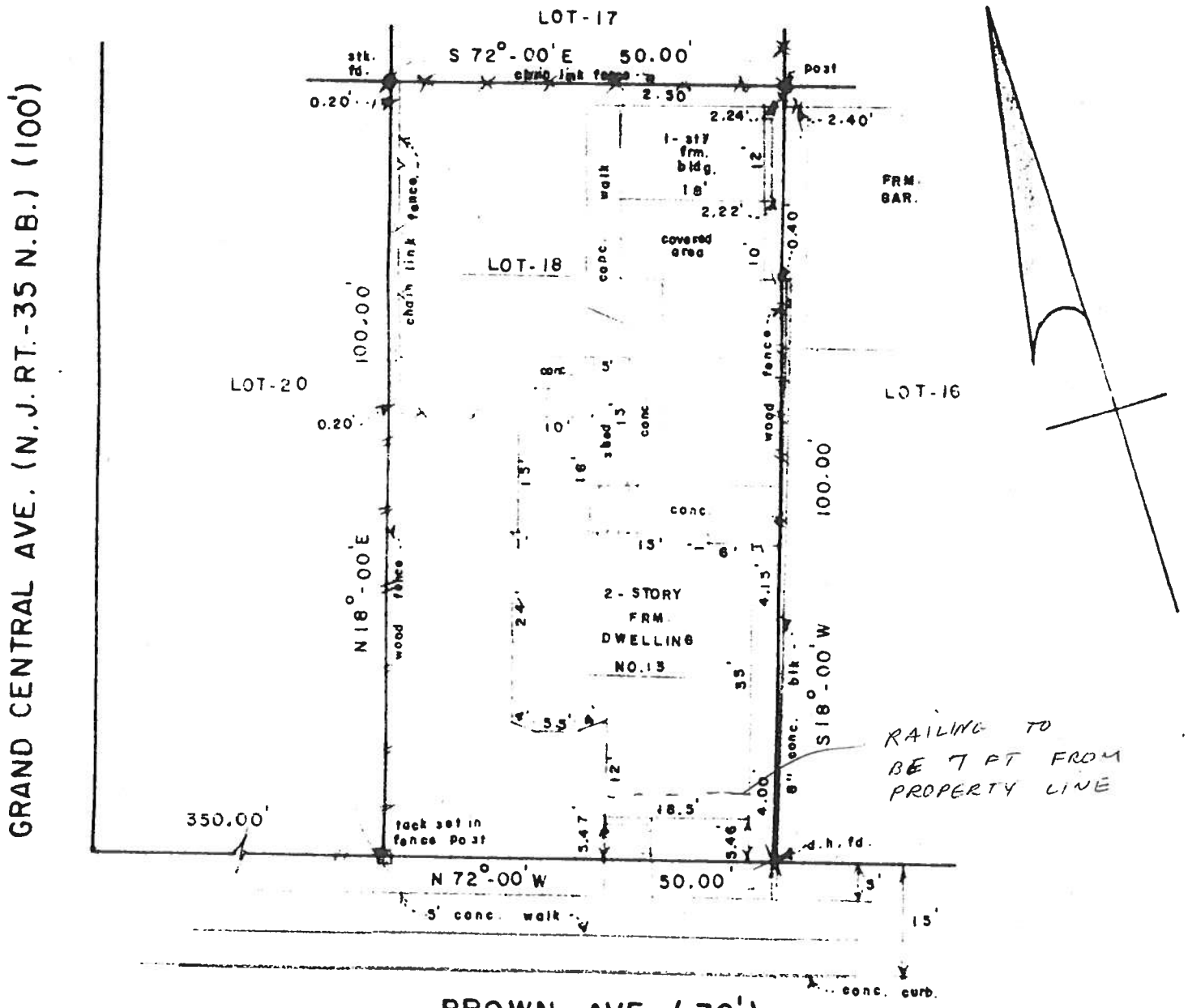
THIS PLAN DRAWN BY OWNER 10/30/86

Yolanda M. Simonelli -13 Brown Avenue, Lavallette

SURVEY OF

LOT-18 BLOCK-10 (T.M.)
BOROUGH OF LAVALLETTE OCEAN COUNTY, N. J.

BEING LOT-18, BLOCK-4, SECTION-B FOR BARNEGAT LAND IMPROVEMENT CO. ON A MAP ENTITLED "MAP OF LAVALLETTE CITY BY THE SEA, SQUAN BEACH, OCEAN COUNTY, N. J."
FILED IN THE O.C.C.O. FEB. 21, 1878 AS MAP NO. A-115



CERTIFIED TO: YOLANDA M. SIMONELLI; FRANCIS GIARDIELLO, ESQ.; & LAWYERS TITLE INSURANCE CORP.

MARTIN BYRNE & ASSOC.
SURVEYOR PLANNER
43 CEDARWOOD DR., TOMS RIVER, N. J.
LIC. LAND SURVEYOR NO. 13913
PROFESSIONAL PLANNER NO. 1545
TEL. 201-240-3106

MARTIN P. BYRNE L.S. NO. 13913

7-6-84	SCALE: 1"= 20'	84-1970

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 6483
DATE ISSUED 6/24/87
REVISION DATE
Block 10 Lot 18
Subdivision

IDENTIFICATION

LICANT — *Complete unshaded areas only*

er Mike Simonelli
ess 439 Parish Drive
Wayne, N.J. 07470
[redacted]
Site Address 13 Brown Ave
Lavallette, N.J. 08735

When changing contractors, notify this office

Contractor Ben O'Donnell
Address 8 Jersey City Ave
Lavallette, N.J.
Tel. ( ) [redacted]
Lic.No./Bus. Permit 6436
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Ben O'Donnell
AGENT SIGNATURE

TECHNICAL SITE DATA

all fixtures

E OF WORK:

lo.	Fixture	Fee	No.	Fixture	Fee
	Water Closet/Bidet/Urinal	$ 5		Garbage Disposal	$
	Bathtub			Air Conditioner Unit	
	Lavatory/Sink	5		Indirect Connection	
	Shower/Floor Drain	5		Sewer Ejector	
	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
	Water Heater			Reduced Pressure Backflow Device	
	Domestic Boiler/ Furnace		2	Vent Stack	20
	Steam Boiler			Solar System	
	Water Util. Connection			Other	
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 15		COLUMN 2	$ 10

Fee	
COLUMN 1	$
COLUMN 2	$
SUBTOTAL	$
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee (Greater of Minimum or Subtotal)	$ 25

PL dr # 4062
ar
6/24/87

PLUMBING CHARACTERISTICS

GROUP: CI Present ABS Proposed

nage — Material ABS Size 3" + 4"
ding Sewer— Material CI Size
r Service— Material — Size
ting — Material ABS Size 3" + 2"
nated Cost of Plumbing Work: $ 3500

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

orm F-130 (8/83) Green = Office Copy White = Applicant Copy Blue = Inspector Copy