BLOCK 606 LOT 8 QUALIFICATION CODE _____ ADDRESS (SITE) 17 Holly Road PERMIT NO. 15-4021

CONSTRUCTION PERMIT APPLICATION

(LH)

C-15-004370

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

I. IDENTIFICATION

1. Proposed Work Site at: 17 Holly Road
2. Name of Owner in Fee: Rock Silvestri
   Tel. [redacted] e-mail [redacted]
   Address 17 Holly Road (street) Brick (municipality) 08723 (zip code)
3. Ownership in Fee: Public ____ Private ✓
4. Principal Contractor: Homeowner Tel. ( ) ____
   Address ____ e-mail ____
   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. ____ FAX: ( ) ____
5. Architect or Engineer ____ Contact ____
   Address ____ e-mail ____
   Tel. ( ) ____ FAX: ( ) ____
6. Responsible Person in Charge once Work has Begun Rock Silvestri
   Tel. ( ) ____ FAX: ( ) ____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical			
3. Plumbing	190 ✓		
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	5		
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 195		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	2	
2. Height of Structure	ft.	
3. Area — Largest Floor	600 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)*

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building									
☐ Electrical									
☑ Plumbing				9-15-15	11/4/15	DM			DM
☐ Fire Protection									
☐ Elevator									
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:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☑ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 12/14/2015
Control Number C-15-004370
Permit Number 15-4021
Permit Issue Date 11/19/2015
Certificate Number 15-4021

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 17 HOLLY RD. Brick Township, NJ 08723 Block: 606 Lot: 8 Qual:

Owner in Fee: SILVESTRI, BROCK

Owner Address: 17 HOLLY RD BRICK NJ 08723

Telephone: [redacted]

Contractor SILVESTRI, BROCK

Address 17 HOLLY RD BRICK NJ 08723

Telephone: [redacted] Fax:

License Numbe[redacted]nber: Federal Emp. 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: NEW PVC PIPING

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:

David J. Newman Jr

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 12/14/2015

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

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. (✓) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. (✓) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(f)1.ix:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. (✓) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. (✓) Electrical C.4. ( ) Plumbing

D. (✓) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date 8/27/15

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (____) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 11/19/15

Date Issued / Permit # 15-4021

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

Block 606 Lot 8 Qualification Code

Work Site Location 17 Holly Road Brick NJ 08723

Owner in Fee: Brock Silvestri

Tel. [redacted] e-mail [redacted]

Address 17 Holly Road (street) Brick (municipality) 08723 (zip code)

Contractor: Homeowner Tel. ( )

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 2,500

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:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 11-17-15
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 11-30-15
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final	11-30-15			

C. CERTIFICATION IN LIEU OF OATH

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 sign and seal here:

Print name here: Brock Silvestri

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
New PVC Pipes to drain existing Fixtures

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
1	Water Closet	
1	Urinal/Bidet	
1	Bath Tub	
	Lavatory	
	Shower	
1	Floor Drain	
1	Sink	
	Dishwasher	
	Drinking Fountain	
1	Washing Machine	
1	Hose Bibb	
1	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
2	Stacks AAV	
	Other	

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

11/18 Brock

CONSTRUCTION PERMIT

Date Issued 11/19/15
Control # C-15-004370
Permit # 15-4621

IDENTIFICATION Block: 606 Lot: 8 Qualifier
Work Site Location: 17 HOLLY RD. Brick Township, NJ 08723
Owner in Fee SILVESTRI, BROCK
17 HOLLY RD BRICK NJ 08723
Telephone: [redacted]

Contractor SILVESTRI, BROCK
Address 17 HOLLY RD BRICK NJ 08723
Telephone [redacted]
Lic. No. or Bldrs. Reg. No.
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:
NEW PVC PIPING

Note: If constuction 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 $2,500

Daniel J. Newman Jr
Construction Official

Date 11/19/15

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$190
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$5
CO Fee	
Other	$0
Total	$195
Check No.	223
Cash	$0
Credit	$0
Collected By	

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

1 WHITE - INSPECTOR 2 CANARY - OFFICE **3 PINK - TAX ASSESSOR** 4 GOLD - APPLICANT

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.

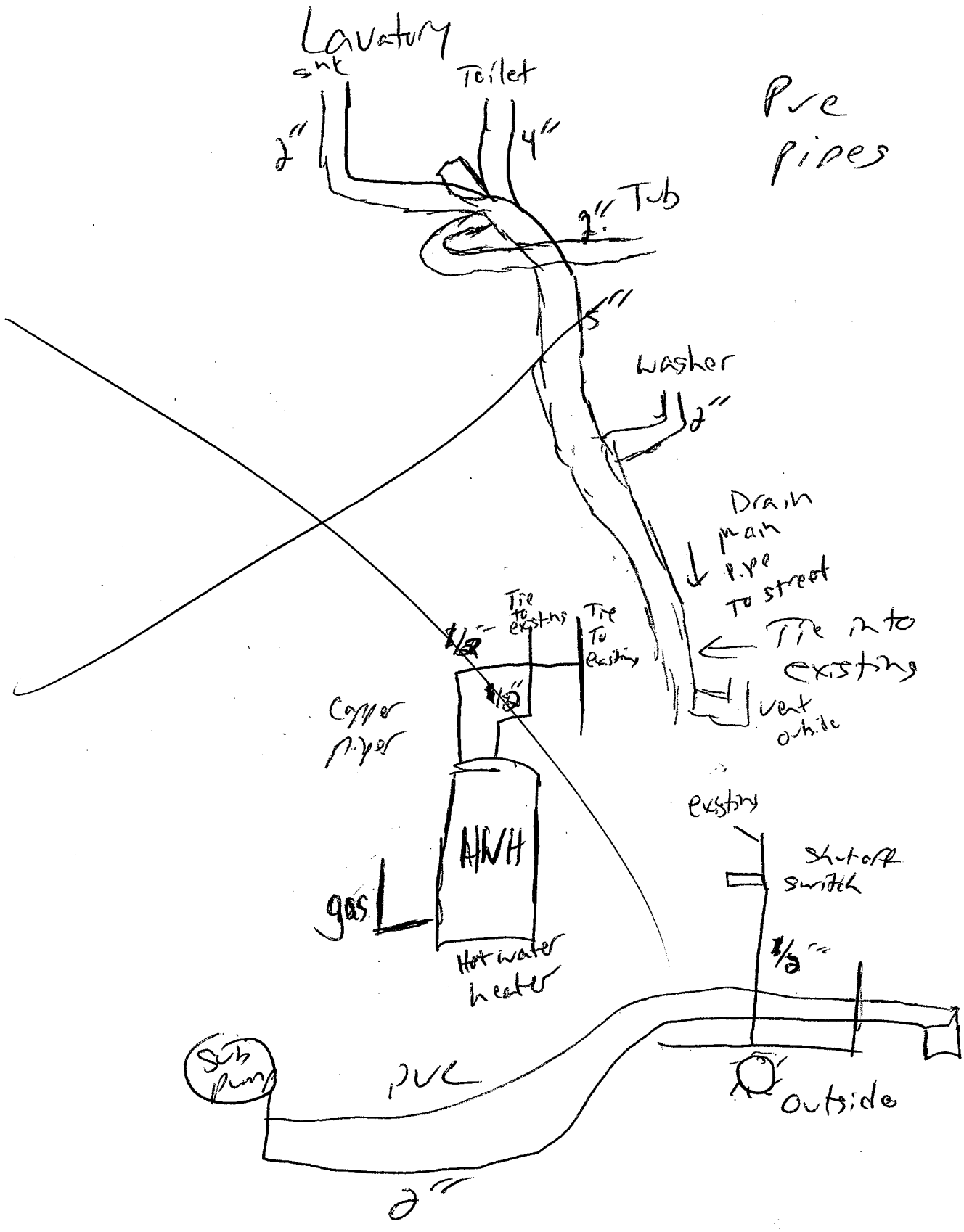
☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☑ 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.

Homeowner


Lavatory
sink
Toilet
2"
4"
2" Tub
Pvc
pipes
3"
washer
2"
Drain
main
pipe
to street
Tie in to
existing
vent
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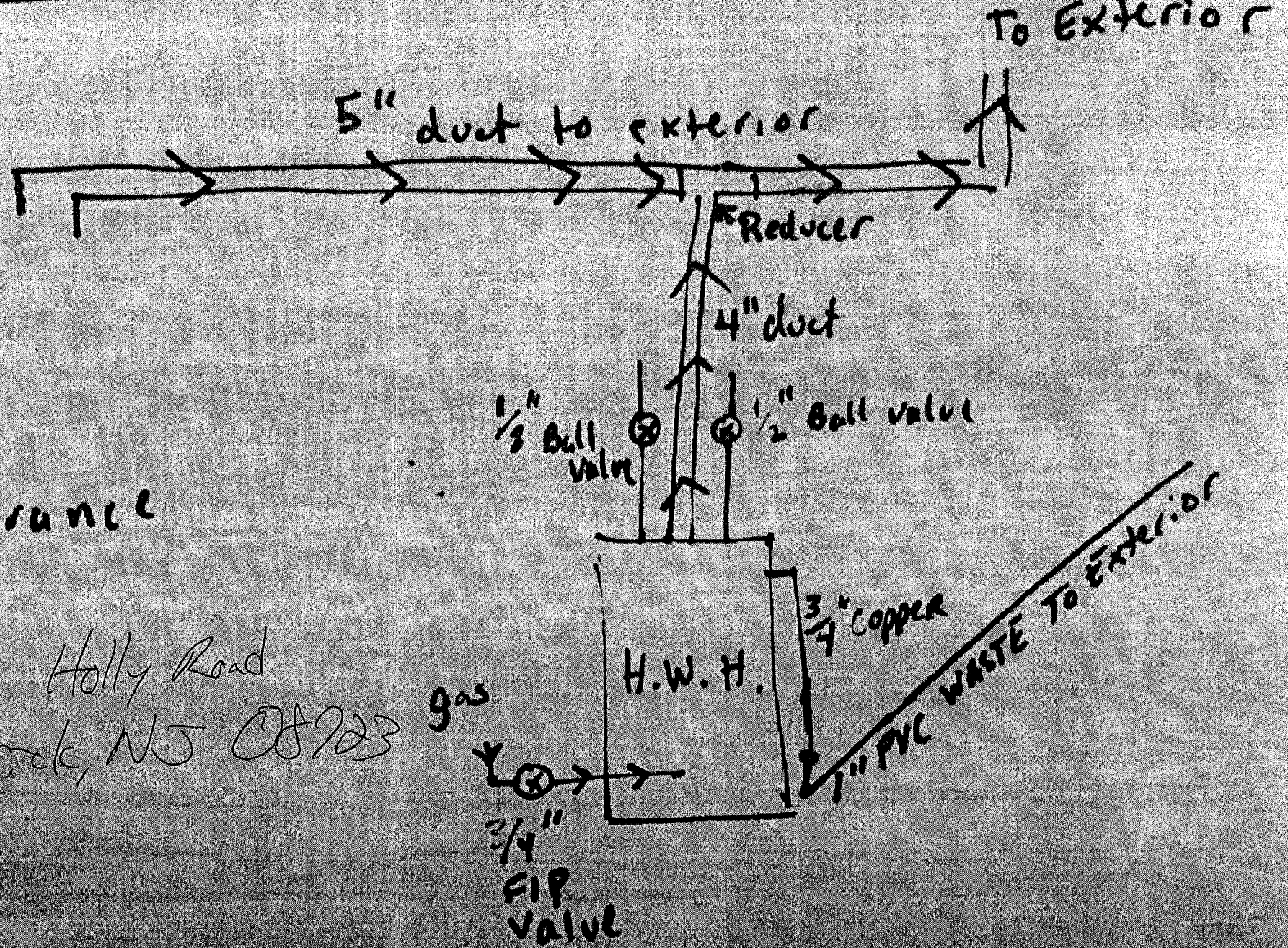
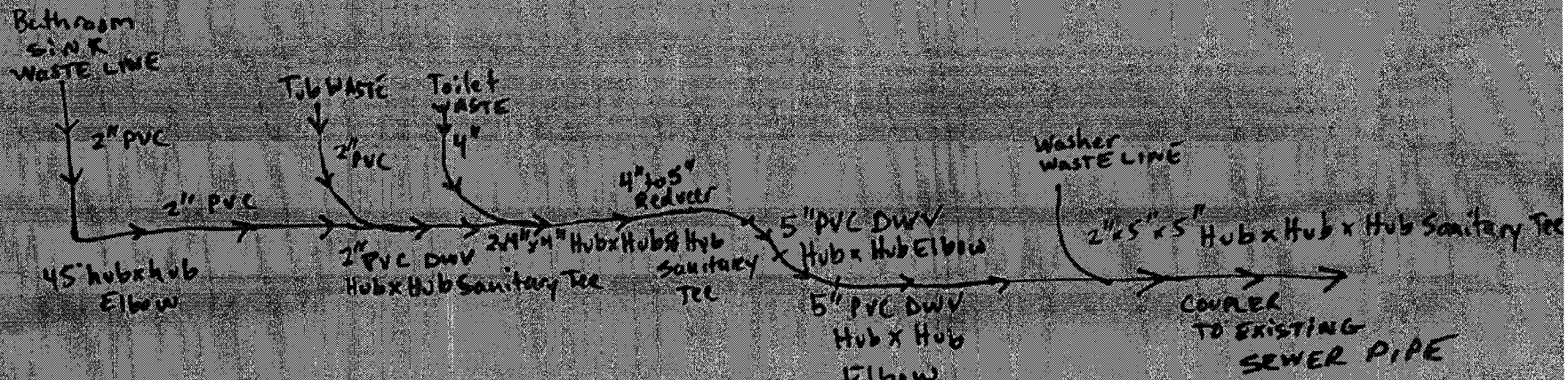
1/2"
Copper
pipe
AWH
gas
Hot water
heater
existing
Shutoff
switch
1/2"
Sub
pump
PVC
outside
2"

Hot water Heater ; Replace & Revent



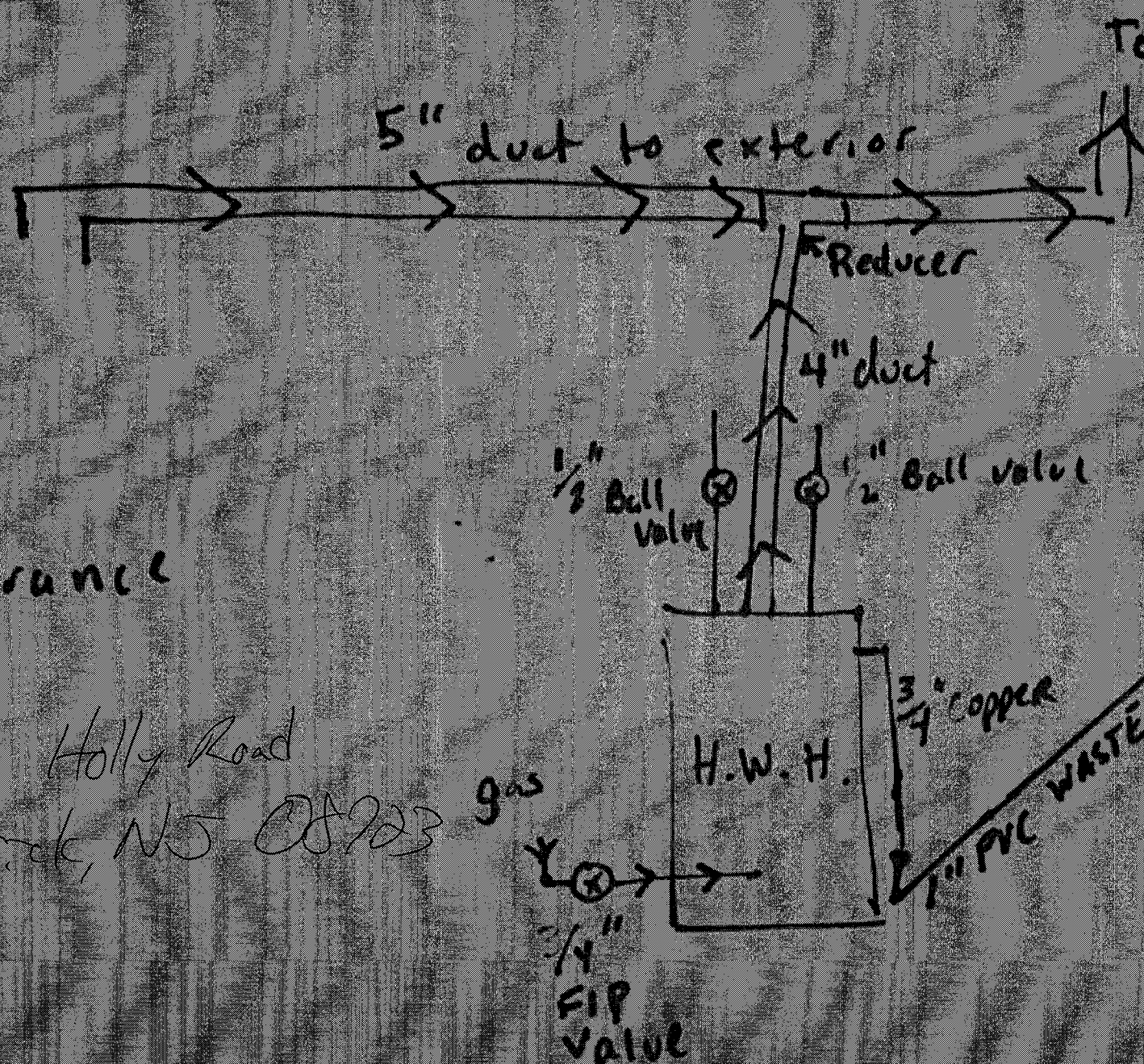
Bathroom: Old Waste lines replaced w/ 2" PVC DWV / 4" PVC DWV / 5" PVC DWV



17 Holly Road

Brick, NJ 08723

Hotwater Heater; Replace & Reveut



Furunce

17 Holly Road
Brick, NJ 08723

Copy of H. I. C. Registration

CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK 1016 LOT 8 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 17 Hulls Rd Brick NJ. 08723

Owner in Fee Brick Silvestri

Verifying Individual Paul Schmick Company Chimney-Tech

Address 17 Sylvan Ave. Jackson NJ. 08527
(Street, City, State, Zip Code)

Tel: 732 928-1060 Fax: 732 928-2653

Check the Appropriate Box(es):

Type of Replacement:

- [ ] Oil to Gas Conversion
- [ ] Gas to Oil Conversion
- [X] Gas Appliance Replacement
- [ ] Oil to Oil Replacement
- [ ] Other _____

Existing Vent/Chimney: Size 5"

- [ ] "B" Label Vent
- [ ] "L" Label Vent
- [X] Flexible Liner
- [ ] Power Vent/Exhauster
- [ ] Chimney-Interior
- [ ] Chimney-Exterior
- [ ] Masonry Chimney-Tile Lined
- [ ] Masonry Chimney-Unlined
- [ ] Other _____

	Type	Fuel Type	BTU Rating (input/hour)
Appliance 1:	Furnace	Oil / Gas / Other: Gas	75,000
Appliance 2:	Hot water	Oil / Gas / Other: Gas	40,000
Appliance 3:		Oil / Gas / Other:	

CHIMNEY LINER

If a chimney liner is being installed, all documentation on the liner must accompany the Permit application.

Manufacturer: _____ Model: _____ UL Listing: _____

Material of Liner: Stainless Steel _____ Aluminum X

Size of Appliance Vent: 4" Size of Liner: 5" Height of Chimney: 20'

Length of Connector: 3' Vent Connector Rise: 2'

How does the appliance vent? [X] Natural Draft [ ] Fan-assisted [ ] Other: _____

PLEASE SIGN ONE OF THE FOLLOWING VERIFICATION STATEMENTS

For Oil or Coal to Gas Conversions:

I have verified that the chimney/vent is in good repair and clear of obstruction and is substantially clean of residue from its previous use serving an oil or coal appliance. I have verified that the chimney/vent is appropriately lined and sized for the appliance(s) being installed.

_____ Signature _____ Date

Oil to Oil or Gas to Gas Replacements or New/Additional Appliances:

I have verified that the existing chimney/vent is in good repair and clear of obstruction. I have verified that the existing chimney/vent is appropriately lined and sized for the appliance(s) being installed and/or remaining.

Paul Schmick Signature 9/2/15 Date

Direct Vent Appliance:

I hereby verify that the appliance(s) being installed is a direct vent appliance. I further verify that the existing chimney/vent is appropriately lined and sized for any remaining appliances.

_____ Signature _____ Date

Verification Not Submitted:

I choose not to submit verification. I understand that I will be required to be present for the inspection to remove and reinstall the chimney vent connector.

_____ Signature _____ Date

FOR MINOR AND EMRGENCY WORK, THIS FORM MUST BE PROVIDED WITH YOUR PERMIT APPLICATION. FOR ALL OTHER WORK, THIS FORM MUST BE PRESENTED TO THE CODE OFFICIAL PRIOR TO FINAL INSPECTION.

All applicable information requested on this form must be supplied.
This form may not be submitted by a homeowner in lieu of the required inspection.

U.C.C. F370 (rev. 01/12)

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

CHIMNEY-TECH INC.
Paul Schmidt
17 Sydor Ave.
Jackson NJ 08527

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

03/31/2015 TO 03/31/2016
VALID

13VH02204500
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED
CHIMNEY-TECH INC.
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

03/31/2015 TO 03/31/2016
VALID

SIGNATURE

13VH02204500
License/Registration/Certificate #

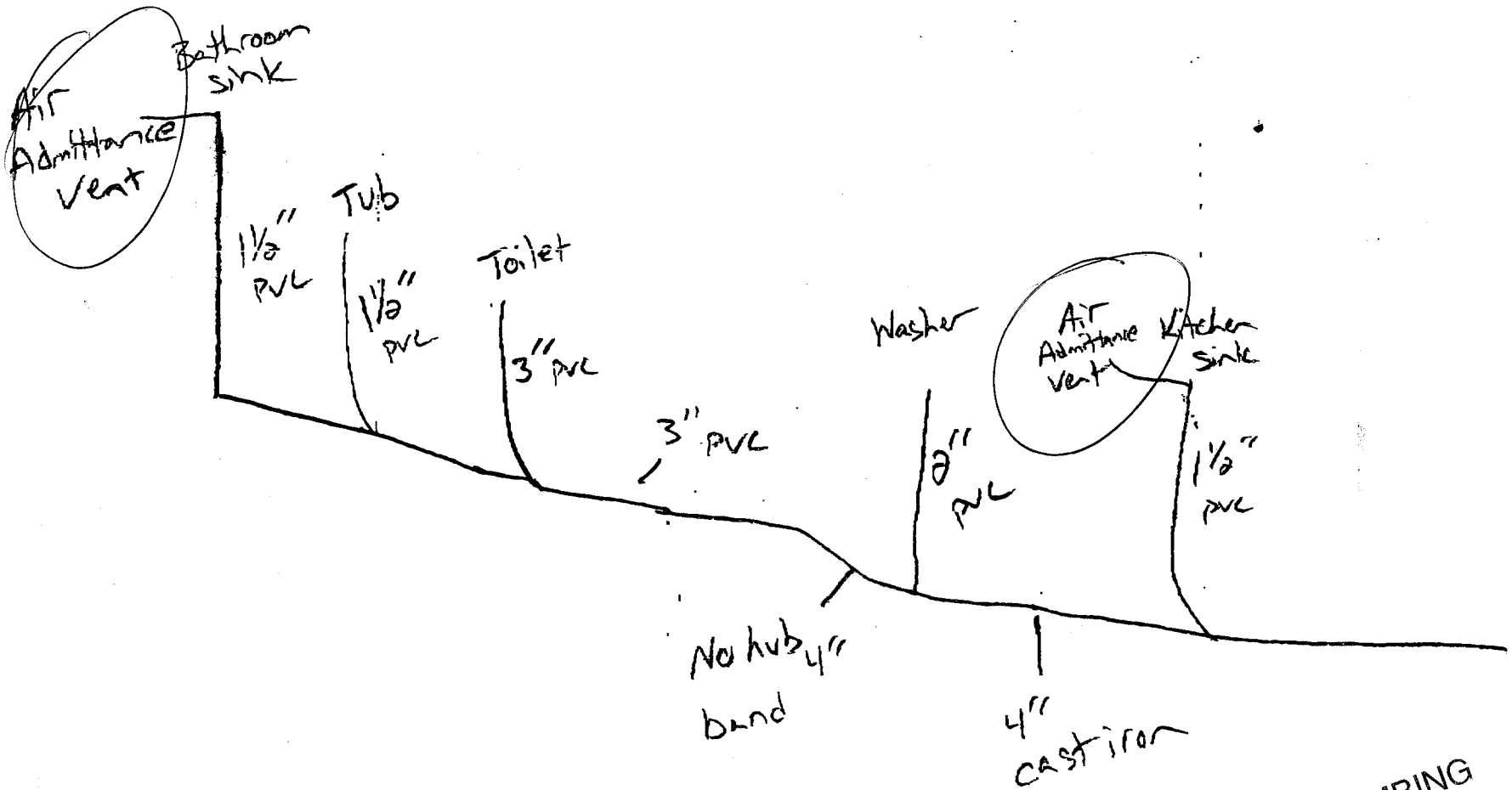
ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:

Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

Brock Silvestri
732-239-6596



PLUMBING
NOV 17 2015
APPROVED

17 Holly Road
Brick, NJ 08723

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Called by DFN on Oct 7

Subcode Official Review

Date: Wednesday, October 07, 2015

To: SILVESTRI, BROCK
17 HOLLY RD
BRICK, NJ 08723

RE: Plumbing Subcode
Block: 606 Lot: 8 Qual:
17 HOLLY RD.
Permit Number: Control Number: C-15-004370
Last Submit Date: Wednesday, September 23, 2015

Dear SILVESTRI, BROCK,

The following comments were made during the Plan Review process:

August 28, 2015
Original paln review

The following comments were made during the Plan Review process:
Denied as per the Nation Standard Plumbing Code 2009. Drain waste vent sketch does not demonstrate code compliance. The sketch does not show a proper venting method as required by Chapter 12. In addition, the sketch indicates fittings and methods of connections that do not conform to materials approved in Chapter 3.

Please provide an isometric sketch that demonstrates code compliance.

October 07, 2015

DWV sketch still does not demonstrate code complaince. The house has an existing 4 inch sewer connection yet the sketch shows a 5 inch line. In addtion the sketch does not show a kitchen connection, venting per chapter 12, cleanouts etc.

Please provide an isometric sketch that demonstrates code compliance. Owner was called on October 7 by Dan Newman. The owner indicated he was unsure if he had the ability to demonstrate code compliance. A licensed master plumber was recommended.

Sincerely,

Daniel F Newman Jr, Subcode Official

CC:

RESUBMIT @

SUBCODES Plumb.

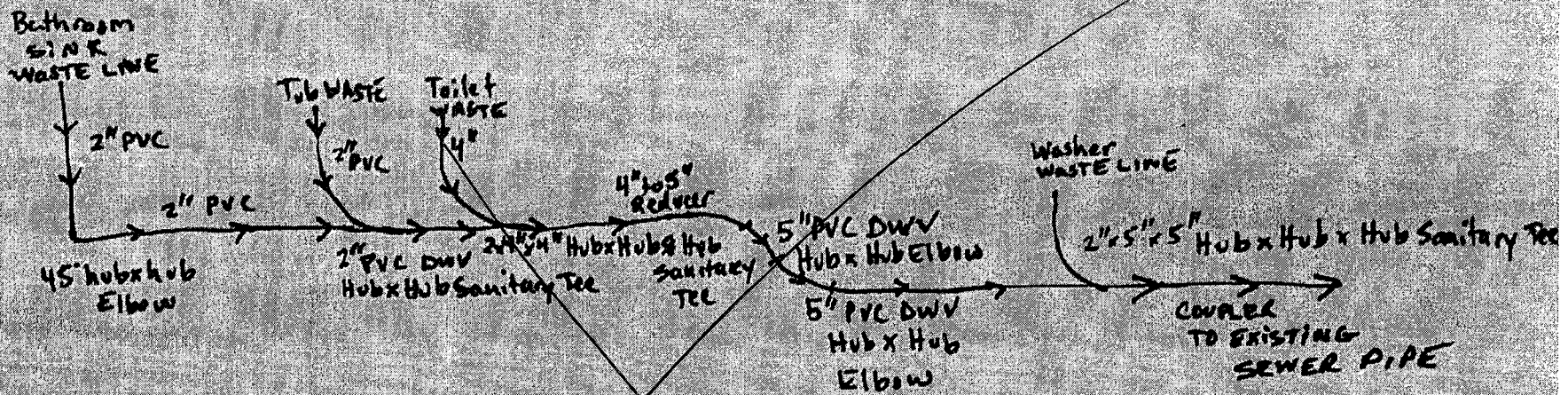
DATES 11/10/15

To whom it may concern,

I am submitting drawings for a permit application for 17 Holly Road Brick, NJ 08723. This is a resubmission of drawings for approval. After speaking with the person in charge of construction permits, he referred me to hire a plumber to help look at my plumbing setup and redo the drawings. This drawing was done by the plumber and he fixed the issues that were in my previous drawings. Please refer these drawings to the plumbing inspector and let me know if you need anything else from me. Thank you!

Brock Silvestri
732-239-6596

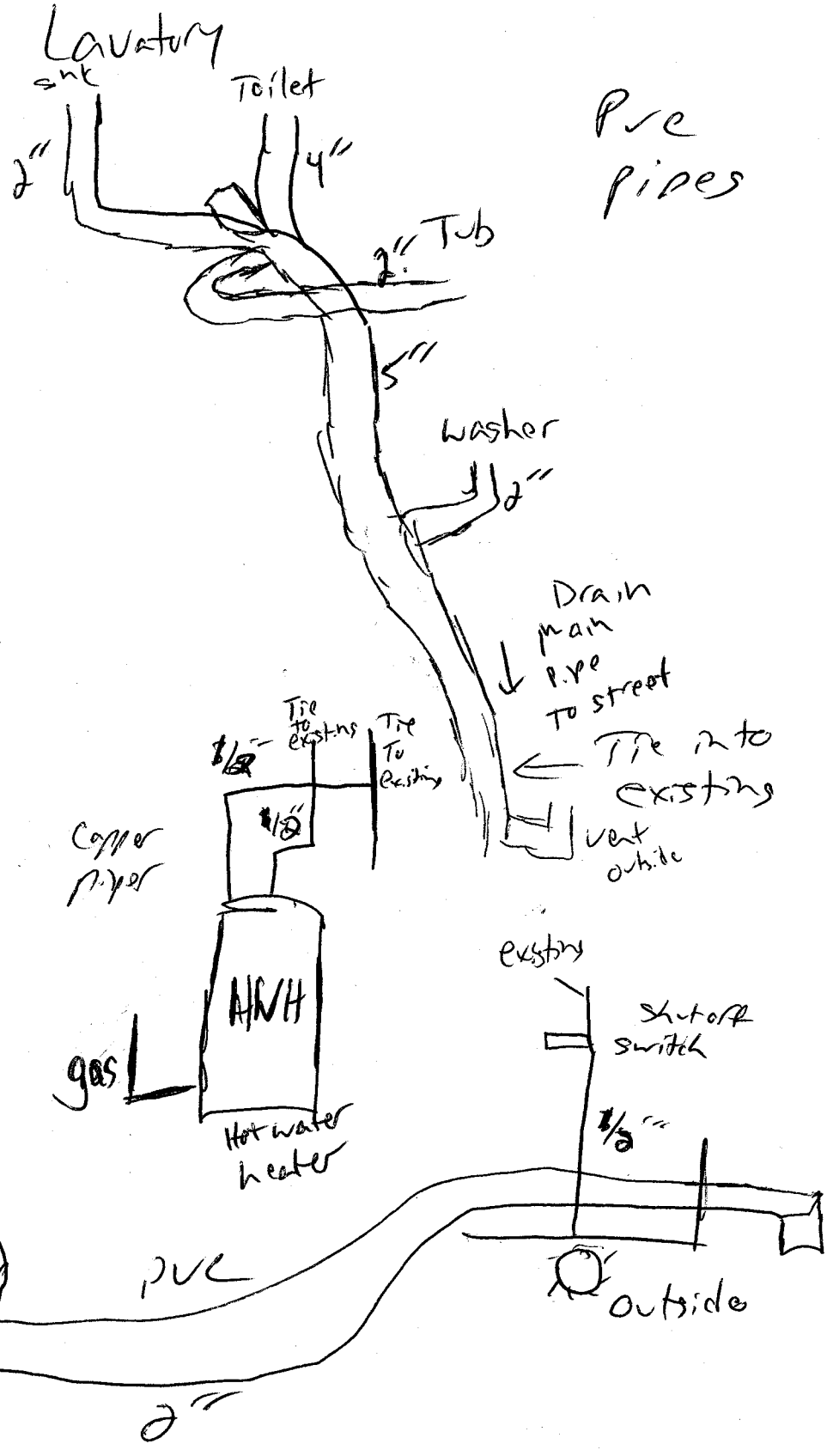
Bathroom: Old Waste lines replaced w/ 2" PVC DWV / 4" PVC DWV / 5" PVC DWV



17 Holly Road

Brick, NJ 08723

Homeowner


Lavatory
sink
Toilet
2"
4"
2" Tub
5"
Pvc
pipes
washer
2"
Drain
main
pipe
to street
Tie in to
existing
vent
outside
Tie
to
existing
Tie
To
Existing
1/2"
1/2"
Copper
pipe
H/WH
gas
Hot water
heater
existing
Shutoff
switch
1/2"
Sub
pump
PVC
Outside
2"

PLUMBING SUBCODE
TECHNICAL SECTION

New Jersey Uniform Construction Code

Date Received
Control #

Date Issued
Permit #

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

Block 6006 Lot 8 Qualification Code

Work Site Location 17 Holly Road Brick, NJ 08723

Owner in Fee: Brock Silvestri

Tel. [redacted] e-mail [redacted]

Address 17 Holly Road (street) Brick (municipality) 08723 (zip code)

Contractor: Homeowner Tel. ( )

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 800

C. CERTIFICATION IN LIEU OF OATH

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 sign and seal here:

Print name here: Brock Silvestri

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK – Replacement of hot water heater

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

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:

[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

9/18/15 email
thebrock724@yahoo.com

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, September 15, 2015

To: SILVESTRI, BROCK
17 HOLLY RD
BRICK, NJ 08723

RE: Plumbing Subcode
Block: 606 Lot: 8 Qual:
17 HOLLY RD.
Permit Number: Control Number: C-15-004370
Last Submit Date: Friday, August 28, 2015

Dear SILVESTRI, BROCK,

The following comments were made during the Plan Review process:
The following comments were made during the Plan Review process:
Denied as per the Nation Standard Plumbing Code 2009. Drain waste vent sketch does not demonstrate code compliance. The sketch does not show a proper venting method as required by Chapter 12. In addition, the sketch indicates fittings and methods of connections that do not conform to materials approved in Chapter 3.

Please provide an isometric sketch that demonstrates code compliance.

Sincerely,

Daniel F Newman Jr, Subcode Official

CC:

Resubmit
9/23/15

Pamela O'Neill

From: Pamela O'Neill
Sent: Friday, September 18, 2015 9:41 AM
To: [redacted]
Subject: 17 HOLLY RD, BRICK NJ - BLOCK 606 LOT 8
Attachments: 17 HOLLY RD- BLOCK 606 LOT 8.pdf

Please see attached Plumbing Subcode Officials Review

Regards,
Pamela O'Neill
Township of Brick – Building Dept.

**** ATTENTION: PLEASE DO NOT REPLY TO THIS EMAIL. ANY QUESTIONS, PLEASE CONTACT SUBCODE OFFICIAL AT 732-262-1030 ****

Pamela O'Neill
Township of Brick
Dept.: Building and Land Use
Intake Clerk
Ph: 732-262-1030 ext. 1328
Fax: 732-262-2941