Howell Township
4567 ROUTE 9 NORTH (2nd FLOOR)
PO BOX 580
HOWELL, NJ 07731

Date Issued 6/24/2015
Control Number C-29566
Permit Number 20150432
Permit Issue Date 3/9/2015
Certificate Number 20150432

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1 DESAI COURT FREEHOLD, NJ 07728 Block: 175.01 Lot: 1 Qual:

Owner in Fee: MARRO, ROBERT A JR & WENDY GINA

Owner Address: 1 DESAI CT FREEHOLD NJ 07728

Telephone: [redacted]

Contractor HEALTHY WAY WATERPROOFING & MOLD REMEDIATION

Address 137 MECHANIC STREET RED BANK NJ 07701

Telephone: (732) 741-1103 Fax: (732) 741-8028

License Number or Builders Registration Number: 13VH05618400 Federal Emp. Number: [redacted]

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: 5B

Maximum Live Load: 40 Maximum Occupancy Load: 0

Description of Work/Use: FRENCH DRAIN, SUMP PUMP

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

Fee: $0.00
Check Number:
Collected By:

Date Printed: 6/24/2015

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 3-9-15
Control #
Date Issued C-29566
Permit # 2015-0432

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

Block 175.01 Lot 1 Qualification Code

Work Site Location 1 Desai Ave

Owner in Fee: Robert Marro

Tel. [redacted] e-mail robertmarro@live.com

Address 1 Desai Ave (street) Freehold (municipality) 07728 (zip code)

Contractor: Healthy Way LLC Tel. (732) 741-1103

Address 1901 Route 71, Suite 2D e-mail info@healthywaynj.com

Wall, NJ 07719

Contractor License No. or Builder Registration No. Exp. Date 12/31/2014

Home Improvement Contractor Registration No. or Exemption Reason 13VH05618400

Federal Emp. ID No. [redacted] FAX: (732) 741-8028

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[X] Interior	2/19/15	CG

Joint Plan Review Required:
[ ] Elec. [X] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 2-19-15
Approved by: CG

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 5-14-15
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab	5/6/15		5/7/15	SD
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			5/19/15	SD
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present R5 Proposed R5
No. of Stories
Height of Structure ft.
Area — Largest Floor N/A sq. ft.
New Bldg. Area/All Floors sq. ft.
Volume of New Structure cu. ft.
Max. Live Load
Max. Occupancy Load

Constr. Class Present VB Proposed VB

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Rehabilitation $ 800 8000 W
3. Total (1+ 2) $ 800 800 W

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.

Sign here: Kelly Chrystal

Print name here: Kelly Chrystal

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Installing french drains

TYPE OF WORK:
[ ] New Building
[ ] Addition
[X] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence Height (exceeds 6')
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Retaining Wall Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other
[ ] Demolition

FEE (Office Use Only)

$	
	240-
Administrative Surcharge $	
Minimum Fee $	
State Permit Surcharge Fee $	15-
TOTAL FEE $	

U.C.C. F110 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

175.01 - 1

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 3-9-15
Control # C-29566
Date Issued
Permit # 2015-0432

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

Block 175.01 Lot 1 Qualification Code

Work Site Location 1 Desai Ave

Owner in Fee: Robert Marro

Tel. [redacted] e-mail robertmarro@live.com

Address 1 Desai Ave Freehold 07728
(street) (municipality) (zip code)

Contractor: Healthy Way LLC Tel. (732) 741-1103

Address 1901 Route 71, Suite 2D e-mail info@healthywaynj.com

Wall, NJ 07719

Contractor License No. Exp. Date 12/31/2014

Home Improvement Contractor Registration No. or Exemption Reason 13VH05618400

Federal Emp. ID No. [redacted] FAX: (732) 741-8028

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 $ 750

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[4] 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: 3-3-15
Approved by: [signature]

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 5-13-15
Approved by: [signature]

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			5/13/15	[signature]

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: Kelly Chrystal

Print name here: Kelly Chrystal

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Installing one sump pump.

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	
	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	
1	Other Sump Pump(s)	

Administrative Surcharge $	
Minimum Fee $	65
State Permit Surcharge Fee $	1
TOTAL FEE $	66

U.C.C. F130 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.