

RECEIVED
DATE 3-24-97



CONSTRUCTION PERMIT
APPLICATION

COAH FEE

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

I. IDENTIFICATION

1. Proposed Work-site at: 22 mountain view Dr.

2. Name of Owner in Fee: Adey, Richard & Betsy Tel. [REDACTED]

Address 22 mountain view Chester 07930
street municipality zip code

3. Ownership in Fee: Public _____ Private /

4. Principal Contractor: Foreman Contracting Co. Tel. (201) 927-9200

Address Po Box 262 Chester, N.J. 07930

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

Federal Emp. No. _____ Social Security No. 146 36 4974

5. Architect or Engineer Heyrich Arch. Tel. (908) 279-0620

Address Rt. 24 Chester N.J. 07930

6. Responsible Person Tom Foreman Tel. (201) 927-9200
In Charge of Work

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>240</u>		
2. Electrical	\$ <u>32</u>		
3. Plumbing	\$ <u>72</u>		
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
8. Subtotal	\$		
9. DCA Training Fee	\$ <u>23</u>		
10. Subtotal	\$		
11. Cert. of Occupancy	\$ <u>15</u>		
12. Other			
13. TOTAL <u>MCS 8411</u>	\$ <u>322-</u>		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

1. Number of Stories		
2. Height of Structure	<u>16</u>	ft.
3. Area—Largest Floor	<u>2279</u>	sq. ft.
4. New Building Area	<u>93</u>	sq. ft.
5. Volume of New Structure	<u>750</u>	cu. ft.
6. Construction Classification	<u>R-4 S-B</u>	
7. Total Land Area Disturbed	<u>App. 20</u>	sq. ft.
8. Flood Hazard Zone		
9. Base Flood Elevation		ft.
10. Wetlands	yes _____ no _____	sq. ft.
11. Max. Live Load		
12. Max. Occupancy Load		

II. PROPOSED WORK

	Est. Cost	OPTIONAL (for office use only)							
		Plans Rec'd By	Date Rec'd	Rejection Date	Ap. D.	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor work (single trade)									
2. ☐ Small Job (\$5,000 and no prior approvals)									
3. ☐ New Building									
4. ☐ Addition									
5. ☒ Alteration	<u>22,900</u>								
6. ☐ Fire Protection									
7. ☒ Plumbing	<u>1700</u>								
8. ☒ Electrical	<u>3200</u>								
9. ☐ Elevator Devices									
10. ☐ Asbestos Abatement									
11. ☐ Demolition									
TOTAL COSTS	<u>27,800</u>								

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING? no

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks	3. ☐ Pressure Vessels	6. ☐ Hazardous Uses/Places of Assembly
2. ☐ High Pressure Boilers	4. ☐ Refrigeration Systems	7. ☐ Sprinklers
	5. ☐ Cross-Connections/Backflow Preventers	8. ☐ Smoke Control Systems in Open Wells
		9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)

2. ☐ Multi-Family (R-2)

3. ☐ Two-Family (R-3) BOCA

4. ☐ Two-Family (R-4) CABO

5. ☐ One-Family (R-3) BOCA

6. ☒ One-Family (R-4) CABO

No of dwelling units:

Before Construction 1

After Construction 1

Net gain or loss 0

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change in Use Group, Indicate Former:

PRO 101 B

FOLD

FOLD

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(e)1.vii:

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 W. Richard Oddy Date 3/16/97

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(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 Tom FOREMAN - FOREMAN CONTRACTING Co.

Address PO Box 262
Chester, N.J. 07930

Telephone (201) 927-9200

Signature John A. Foreman Date 3/7/97

F-100B

☐ Temporary Certificate of Occupancy ☐ Temporary Certificate of Compliance ☐ Continued Certificate of Occupancy ☐ Certificate of Compliance ☐ Certificate of Occupancy ☐ Certificate of Approval	☐ X CERTIFICATES ISSUED ☐ (office use only)	☐ No. ☐ No. ☐ No. ☐ No. ☐ No. ☐ No.	DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
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IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)	
Name of Code & Edition	Name of Code & Edition
Building _____	Energy _____
Electrical _____	Barrier Free _____
Plumbing _____	Flood Hazard _____
Fire Protection _____	As Built Elevation Cert. _____
Mechanical _____	Other _____

VII. PRIOR APPROVALS CHECKLIST (OFFICE USE ONLY)	LOCAL APPROVAL	COUNTY APPROVAL	REGIONAL APPROVAL	STATE APPROVAL	COMMITTEE
☒ Zoning Officer	Prelimin. Initial	Prelimin. Initial	Prelimin. Initial	Prelimin. Initial	COAH Report Rep'd by C. J. O'Neil
☐ Planning Board	Final Date	Final Date	Final Date	Final Date	
☐ Zoning Board					
☐ Sewer Authority					
☐ Water Authority					
☐ Fire Department					
☐ Police Department					
☐ Health Department					
☐ Soil Conservation					
☐ NJ Department of Community Affairs					
☐ NJ Department of Transportation					
☐ NJ Department of Environmental Protection					
☐ Utility Dig No.					
☐					
☐					

G



CERTIFICATE

Date Issued 10-30-97

Control #

Permit # 146-97

IDENTIFICATION

Block 10.03 Lot 9
 Work Site Location 22 Mountain View Drive
Chester Township, N.J. 07930
 Owner in Fee/Occupant Adey Richard & Betsy
 Address 22 Mountain View Drive
Chester, N.J. 07930
 Tele. () _____
 Contractor Foreman Contracting Co.,
 Address P.O. Box 262
Chester, N.J. 07930
 Tele. () _____ Fax () _____
 Lic. No. or Bldrs. Reg. No. _____
 Federal Emp. No. _____

Home Warranty No. _____
 Type of Warranty Plan: [] State [] Private
 Use Group R-3
 Maximum Live Load _____
 Construction Classification _____
 Maximum Occupancy Load _____
 Description of Work/Use: _____

Kitchen Alteration

☒ 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.

☐ TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

If this is a temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, 19____ or the owner will be subject to fine or order to vacate:

☐ CERTIFICATE OF CLEARANCE — LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

☐ 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 _____.

Fee \$ _____

Paid [] Check No. _____

Collected by: _____

CONSTRUCTION OFFICIAL

UCC/PRO F-260 (REV. 3/96)
 Professional Printing
 (609) 468-7933

1 WHITE — APPLICANT

2 CANARY — OFFICE

3 PINK — TAX ASSESSOR

TOWNSHIP OF CHESTER

1 PARKER ROAD
CHESTER, NEW JERSEY 07930
908-879-5100
FAX: 908-879-8281

SARAH JANE NOLL
Zoning Official
Ext. 41

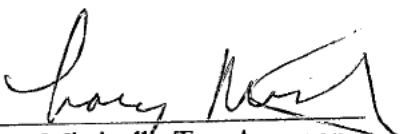
DEVELOPMENT FEE
based on the equalized assessed value

BLOCK 10.03, LOT 9 STREET ADDRESS 22 Mountainview Rd
NAME Richard B. & Adey TELEPHONE [REDACTED]
AREA(s) TO BE ASSESSED addition to kitchen & bow window

DATE OF INSPECTION FOR ASSESSMENT 8/20/97
EQUALIZED ASSESSED VALUE 4,000

1/2 OF 1% OF E.A.V. = \$ 20.00 Development Fee to be collected

COMMENTS


Larry Misticelli, Tax Assessor

When the the development fee is determined, please return this completed form to the zoning officer.

**CHESTER TOWNSHIP
1 PARKER ROAD
CHESTER, NEW JERSEY 07930
908-879-5100**

Zoning Official
Sarah Jane Noll
Ext. 41

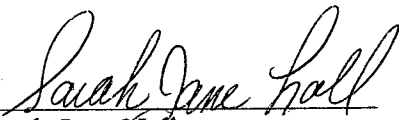
COAH FEE

BLOCK 10.03, LOT 9

STREET ADDRESS: 22 Mountainview Drive

COAH FEE HAS BEEN PAID: \$400.00

COAH FEE NOT APPLICABLE: _____


Sarah Jane Noll
Zoning Officer

DATED: 10/29/97

This form is to be received and signed by the Zoning Officer prior to the issuance of a Certificate of Occupancy for all construction.

**CHESTER TOWNSHIP
1 PARKER ROAD
CHESTER, NEW JERSEY 07930
908-879-5100**

**Zoning Official
Sarah Jane Noll
Ext. 41**

October 20, 1997

Mr. & Mrs. Richard Adey
22 Mountainview Road
Chester, New Jersey 07930

RE: Block 10.03, Lot 9 - 22 Mountainview Road - COAH FEE

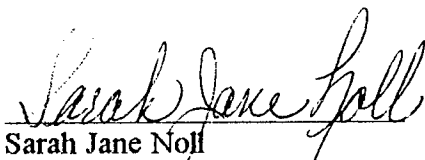
Dear Mr. & Mrs. Adey:

The Chester Township Tax Assessor has assessed the addition to your residence consisting of an addition to your kitchen, including but not limited to the bow window, at \$4,000.00

As you are aware, prior to the issuance of the Certificate of Occupancy, a COAH (Council on Affordable Housing) fee must be paid to the Township. The Assessor has calculated this fee, which represents $\frac{1}{2}$ of 1 % of the assessed value, to be \$400.00. Please forward a check, made out to Chester Township, to this office so that clearance for the issuance of the Certificate of Occupancy can be forwarded to the construction office.

Thank you for your cooperation in this matter.

Very truly yours,


Sarah Jane Noll
Zoning Officer

cc: Construction Office



Date Received
Date Issued 5-13-97
Control #
Permit # 146-97

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

Block 10.03 Lot 9
Work Site Location 22 Mountain View
CHRSTER, NJ. 07930
Owner in Fee ADY, Richard & Betty
Address 22 Mountain View
CHRSTER, NJ 07930
Contractor FOREMAN CONTRACTING CO.
Address PO BOX 262
CHRSTER, NJ 07930
Tele. (201) 927-9200
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No. 146 36 4976

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.

Signature John G. For

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Interior Renovations
as per enclosed plans

(Office Use Only)

FEE

\$ 11

279

TYPE OF WORK:

- ☒ New Building
☒ Addition
☒ Alteration
☐ Roofing
☐ Siding
☐ Fence _____ Height (6' or over)
☒ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other _____
☐ Other _____
☐ Demolition

Administrative Surcharge \$ _____
Paid ☐ Check # _____ Minimum Fee \$ _____
Collected by: _____ DCA TRAINING FEE \$ _____
TOTAL FEE \$ 240

PRO 210B

JOB SUMMARY (Office Use Only)

Footing Patch @ 6-10-97
PLAN REVIEW Date Initial INSPECTIONS Dates (Month/Day)
☐ No Plans Req. 3/14/97 Type: Failure Failure Approval Initial
☒ All Footing Patch 5-14-97
☐ Footing Foundation
☐ Foundation Slab
☐ Frame Partic 5/21/97
☐ Other 5/28/97
Joint Plan Review Required: Finishes: 6-25-97
☐ Elec. ☐ Plumb. ☐ Fire Energy 6-25-97
SUBCODE APPROVAL Mechanical
☒ CO ☐ CCO ☐ CA TCO
Date: 7-23-97 Other
Approved By: 7/23/97 Final

B. BUILDING CHARACTERISTICS

Use Group Present R4 Proposed R4
Constr. Class Present S13 Proposed S13
No. of Stories 1
Height of Structure 16 Ft.
Area—Largest Floor 2279 Sq. Ft.
New Bldg. Area/All Floors 93 Sq. Ft.
Volume of New Structure 750 Cu. Ft.
Total Land Area Disturbed 20 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ 22,900
3. Total (1+2) \$ 22,900

DATE _____

JOB CONDITION / COMMENTS

Township of Chester Code Enforcement

Request: Electrical Inspection

Date 7-22-97

Name <u>Adity</u>	Bldg. Permit <u>146-97</u>
Location <u>22 Mountain View Dr</u>	Bl. <u>10-03</u>
Contractor	Lot <u>9</u>

Rough

Service

Final

Failed Date

Approved Date

<u>7/22/97</u>

Date Needed 7-22-97
Comments

Township of Chester Code Enforcement

Request: Electrical Inspection

Date 6-24-97

Name <u>Adey</u>	Bldg. Permit <u>146-97</u>
Location <u>22 Montrose View Dr</u>	Bl. <u>10.03</u>
Contractor	Lot <u>9</u>

Failed Date

Approved Date

Rough

Service

(Final

<u>6/24/97</u>

Date Needed 6-25-97

Comments



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received

Date Issued 5-13-97

Control #

Permit # 146-97

C/AH

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

Block 10.03 Lot 9Work Site Location 22 Mountain View Dr.Chester, NJ. 07930Owner in Fee Adel, Richard S BetsyAddress 22 Mountain View Dr.Chester, N.J. 07930Contractor TEK ElectricAddress 5 Oak StMr. A. Lingbow NJ. 07936Tele. (301) 770-0369Lic. No. 16739Federal Emp. No. _____ or Social Security No. 139-68-7484

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:

[] No Plans Required

Joint Plan Review Required:

[] Bldg. [] Plumb.

[] Fire [] Elevator

[X] Elec. Plans Approved

Date: 3/25/97Approved by: AH

SUBCODE APPROVAL

[] CO [] CCO [X] CA

Date: 7/23/97Approved By: AH

INSPECTIONS

Type:

Rough

Temporary

Constr. Serv.

TCO

Other

Service

Final

Dates (Month/Day)

Failure

Failure

Approval

Initial

6/16/97AH7/22/97AH

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

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.

[X] Licensed Electrical Contractor [] Exempt Applicant

Signature—Contractor Seal

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
<u>14</u>		Fixtures (1)
<u>13</u>		Receptacles (2)
<u>18</u>		Switches (3)
<u>37</u>		Total 1 + 2 + 3
<u>1</u>	<u>8</u>	Kw Range
		Kw Oven(s)
		Kw Surface Unit
<u>1</u>	<u>1/2</u>	hp Dishwasher
		hp Garbage Disposal
		Kw Dryer
		Kw A/C Unit
		Burglar Alarms
		Intercoms Panels
		Smoke Detectors
		hp Whirlpool/spa
		Pool Bonding
		hp Pool Filter Motor
		Pool Lights
		Kw Water Heater(s)
		Kw Central heat:
		oil, gas or elec.
		Kw Baseboard Heat Units
		Thermostats
		hp Heat Pump
		hp Pump(s)
		Amp Motor Control Center/Sub Panels
		Signs
		Light Standards
		hp Motors—Fractional H.P.
		hp Motors—All Others
		Kw Transformers
		Kw Generators
		Amp Service Entrance
		Other

FEE (Office Use Only)

Administrative Surcharge	\$	<u>4.00</u>
Paid [] Check # <u>8411</u>	Minimum Fee	\$
Collected by: <u>MCS</u>	DCA Training Fee	\$
	TOTAL FEE	\$ <u>32.00</u>

[illegible][illegible]

Township of Chester Code Enforcement

Request: Plumbing Inspection

Date 7-22-97

Name <u>Adey</u>	Bldg. Permit <u>146-97</u>
Location <u>22 Mountain View</u>	Bl. <u>10.03</u>
Contractor	Lot <u>9</u>

Slab
Roughing
~~Gas Piping~~
Final

Failed Date

Approved Date

<u>7/22/97</u>

Date Needed 7-22-97
Comments

Plumbing Inspector

AF

**Township of Chester
Code Enforcement**

Request: Plumbing Inspection

Date 6-10-97

Name	<u>Adey-L-</u>	Bldg. Permit	<u>146-97</u>
Location	<u>22 Mountain View Drive</u>	Bl.	<u>10.03</u>
Contractor		Lot	<u>9</u>

Slab

Roughing

Gas Piping

Final

Failed Date

Approved Date

<u>6/12/97</u>

Date Needed 6-12-97
Comments

Plumbing Inspector

Al V...

UCC PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Date Issued 5-13-97
Control #
Permit # 146-97

C/AT

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

Block 10.03 Lot 9
Work Site Location 22 Mountain View Dr.
Chester, N.J. 07970
Owner in Fee Adey, Richard & Betsy
Address 22 Mountain View Dr.
Chester, N.J. 07970
Contractor V. Bello Plumbing & Heating
Address 10 McFarland Lane
Bridgeport, N.J. 07807
Tele. (908) 685-0006
Lic. No. 7802
Federal Emp. No. _____ or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Estimated Cost of Plumbing Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)	Initial
	Type:	Failure	Approval
☐ No Plans Required	Slab		
Joint Plan Review Required:	Rough		<u>4/2/97</u>
☐ Bldg. ☐ Elec.	Water		<u>AT</u>
☐ Fire ☐ Elevator	Sewer		
☒ Plumb. Plans Approved	Fixtures		
Date: <u>5/25/97</u>	Gas Equipment		
Approved by: <u>AT</u>	Gas Piping		
	Solar		
	TCO		

SUBCODE APPROVAL:
☐ CO ☒ CCO ☐ CA
Approved By: AT
Date: 7/22/97

D. TECHNICAL SITE DATA (List all fixtures.)

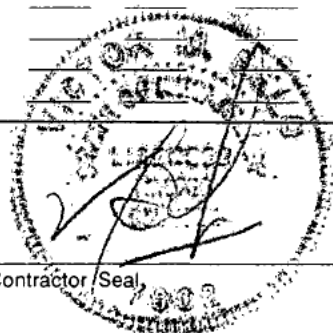
NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
_____	Water Closet	_____
_____	Urinal/Bidet	_____
_____	Bath Tub	_____
_____	Lavatory	_____
_____	Shower	_____
_____	Floor Drain	_____
<u>1</u>	Sink	<u>5.00</u>
_____	Dishwasher	_____
_____	Drinking Fountain	_____
_____	Washing Machine	_____
_____	Hose Bibb	_____
_____	Water Heater	_____
<u>1</u>	Fuel Oil Piping	<u>5.00</u>
_____	Gas Piping	_____
_____	Steam Boiler	_____
_____	Hot Water Boiler	_____
_____	Sewer Pump	_____
_____	Interceptor/Separator	_____
_____	Backflow Preventer	_____
_____	Greasetrapp	_____
_____	Water Cooled A/C	_____
_____	or Refrigeration Unit	_____
_____	Sewer Connection	_____
_____	Water Service Connection	_____
_____	Active Solar System	_____
_____	Other	_____

Administrative Surcharge \$ _____
Paid ☐ Check # 8411 Minimum Fee \$ _____
DCA Training Fee \$ _____
Collected by: MCS TOTAL \$ 17.00

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.

Signature—Contractor/Seal



☐ Licensed Plumbing Contractor ☐ Exempt Applicant

PRO 204 B

UCC FORM F-130 B

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

DATE _____

JOB CONDITION / COMMENTS



CONSTRUCTION PERMIT

Date Issued 5-14-97
Control #
Permit # 146-96

IDENTIFICATION Block 10.03 Lot 9

Work Site Location 22 Mountain View Dr.
Chester, N.J.

Owner in Fee Adley, Richard & Betsy
Address 22 Mountain View Dr.
Chester, N.J.

Contractor Foreman Contracting Co.

Address P.O. Box 262
Chester, N.J.

Tele. (201) 927-9200

Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Federal Emp. No. _____

or Social Security No. _____

is hereby granted permission to perform the following work:

- ☒ BUILDING ☒ PLUMBING ☐ OTHER _____
☒ ELECTRICAL ☐ FIRE PROTECTION
☒ ELEVATOR DEVICES

DESCRIPTION OF WORK:

NEW Kitchen

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 \$ 27,800

CONSTRUCTION OFFICIAL

3-27-97

(see reverse side)

PAYMENTS (Office Use Only)

Building	<u>240-</u>
Electrical	<u>32-</u>
Plumbing	<u>12-</u>
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	<u>2841 = 23</u> 2841
Cert. of Occ.	
Other	<u>15-</u>
Total	<u>322</u> 322
Check No.	<u>8411</u>
Cash	
Collected By:	<u>MCS</u>

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

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



CONSTRUCTION PERMIT

Date Issued 5-14-97
Control #
Permit # 146-96

IDENTIFICATION Block 10.03 Lot 9

Work Site Location 22 Mountain View Dr.
Chester, N.J.

Owner in Fee Adey, Richard E Betsy
Address 22 Mountain View Dr.
Chester, N.J.

Tele. [REDACTED]

Contractor Foreman Contracting Co.
Address P.O. Box 262

Chester, N.J.
Tele. (201) 927-9200

Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Federal Emp. No. _____
or Social Security No. [REDACTED]

Is hereby granted permission to perform the following work:

- ☒ BUILDING ☒ PLUMBING ☐ OTHER _____
☒ ELECTRICAL ☐ FIRE PROTECTION _____
☐ ELEVATOR DEVICES _____

DESCRIPTION OF WORK:
NEW Kitchen

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 \$ 27,800

CONSTRUCTION OFFICIAL

3-27-97

(see reverse side)

PAYMENTS (Office Use Only)

Building	<u>240-</u>
Electrical	<u>32</u>
Plumbing	<u>12-</u>
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	<u>2241 = 23 252</u>
Cert. of Occ.	
Other	<u>15-</u>
Total	<u>222 252</u>
Check No.	<u>8411</u>
Cash	
Collected By:	<u>MCS</u>

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 work installed conforms to the approved plans and the requirements of the Uniform Construction Code.

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- ☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.
- ☐ A complete copy of approved plans must be kept on the job site.

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



Date Received

Date Issued 5-13-97

Control #

Permit # 146-97

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

Block 10.03 Lot 9
Work Site Location 22 Mountain View
Chester, NJ 07930
Owner in Fee Adey, Richard & Betsy
Address 22 Mountain View
Chester, NJ 07930
Contractor Foreman Contracting Co.
Address Po Box 262
Chester, NJ 07930
Tele. (201) 927-9200
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____ or Social Security No. _____

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.

John A. Foreman
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Interior Renovations
as per enclosed plans

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Failure	Failure	Approval	Initial
☐ No Plans Req.	<u>3/14/97</u>	<u>[Signature]</u>	Type:					
☒ All			Footing					
☐ Footing			Foundation					
☐ Foundation			Slab					
☐ Frame			Frame					
☐ Other			Insulation					
Joint Plan Review Required:			Finishes:					
☐ Elec. ☐ Plumb. ☐ Fire			Energy					
SUBCODE APPROVAL			Mechanical					
☐ CO ☐ CCO ☐ CA			TCO					
Date:			Other					
Approved By:			Final					

TYPE OF WORK:

- ☐ New Building
☒ Addition
☒ Alteration
☐ Roofing
☐ Siding
☐ Fence _____ Height (6' or over)
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other _____
☐ Other _____
☐ Demolition

(Office Use Only)

FEE

\$ 11
229

Administrative Surcharge

Paid ☐ Check # _____ Minimum Fee

Collected by: _____ DCA TRAINING FEE

TOTAL FEE

\$ 240

PRO 210B

B. BUILDING CHARACTERISTICS

Use Group Present R4 Proposed R4
Constr. Class Present SB Proposed SB
No. of Stories 1
Height of Structure 16 Ft.
Area—Largest Floor 2279 Sq. Ft.
New Bldg. Area/All Floors 93 Sq. Ft.
Volume of New Structure 250 Cu. Ft.
Total Land Area Disturbed 20 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ 22,900
3. Total (1 + 2) \$ 22,900