



CONSTRUCTION PERMIT APPLICATION

RECEIVED

JUL 17 / 86

BUILDING

901-22

45

LDS BR 10513349

I. IDENTIFICATION

1. Proposed Work at: 28 Lenape TR. Brick, NJ

2. Owner Name: Joel Lockhart Tel. (201) 892 4863

Address 28 Lenape TR Brick Town NJ

3. Principal Contractor: self Tel. ()

Address

Lic. No. or Builder Reg. No. Federal Emp. No.

4. Architect or Engineer: Tel. ()

Address

5. Responsible Person in Charge of Work Tel. ()

II. PROPOSED WORK

A. TYPE OF WORK	B. CATEGORIES OF WORK	D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?																
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: <u>Deck</u>	<table border="1"> <thead> <tr> <th>Permit/Category</th> <th>Estimated</th> </tr> </thead> <tbody> <tr> <td>1. ☐ Building/Structural</td> <td>\$</td> </tr> <tr> <td>2. ☐ Plumbing</td> <td></td> </tr> <tr> <td>3. ☐ Electrical</td> <td></td> </tr> <tr> <td>4. ☐ Fire Protection</td> <td></td> </tr> <tr> <td>5. ☐ Other</td> <td></td> </tr> <tr> <td>6. ☐ Other</td> <td></td> </tr> <tr> <td colspan="2">TOTAL COST \$ 2000.00</td> </tr> </tbody> </table> C. DO YOU WANT: 1. ☐ Partial Releases 2. ☐ Prototype Processing	Permit/Category	Estimated	1. ☐ Building/Structural	\$	2. ☐ Plumbing		3. ☐ Electrical		4. ☐ Fire Protection		5. ☐ Other		6. ☐ Other		TOTAL COST \$ 2000.00		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
Permit/Category	Estimated																	
1. ☐ Building/Structural	\$																	
2. ☐ Plumbing																		
3. ☐ Electrical																		
4. ☐ Fire Protection																		
5. ☐ Other																		
6. ☐ Other																		
TOTAL COST \$ 2000.00																		

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL	
1. ☐ Hotels (R-1)	If new construction, enter no. of dwelling units
2. ☐ Multi-Family (R-2) HMD Reg. No.:	
3. ☐ Two Family (R-3b)	If other than new construction, enter no. of dwelling units:
4. ☒ One-Family (R-3a)	Before Construction: _____
	After Construction: _____
	Net Gain (or loss): _____

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

State Specific Use: _____

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
3. ☐	☐
4. ☐	☐
5. ☐	☐
6. ☐	☐
7. ☐	☐
8. ☐	☐
9. ☐	☐
	Type
	Gas
	Oil
	Electric
	Solid (Wood, Coal, Etc.)
	Propane
	Solar
	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	
15. Height of Structure	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.

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

- A. ☒ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.
- B. ☐ I further certify that I will perform the work below.
- B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.
- 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 understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE

DATE

II. AGENT SECTION

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

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

TEL. ()

ADDRESS

SIGNATURE

PERMIT CONTROL

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

- ☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN - FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date	Receiver	Approval Date	Reviewer	Comments
☐	BUILDING			7/21/86	ED	
	Footings/Foundations					
	Framing					
	Architectural					
	Other <u>long</u>			7/18/86	JK	
☐	PLUMBING					
☐	ELECTRICAL					
☐	FIRE PROTECTION					
☐	OTHER					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
	BUILDING			
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
	PLUMBING			
	ELECTRICAL			
	FIRE PROTECTION			
	OTHER			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

- ☐ Temporary Certificate of Occupancy
 Date Expired _____ Date Issued _____
☐ Temporary Certificate of Occupancy
 Date Expired _____
☐ Certificate of Occupancy
 No. _____
☐ Certificate of Continued Occupancy
 No. _____
☐ Certificate of Approval
 No. _____
☐ None

IV. ON-GOING INSPECTIONS

On-going Inspections Required (See Page 1, II.D.)	Date Posted to Log and Tickler

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$ 15.00
PLUMBING	
ELECTRICAL	
FIRE PROTECTION	
OTHER	
SUBTOTAL	\$ 15.00
- LESS: 20% of subtotal (when plan review performed by state agency).	
	(5.00)
D.C.A. TRAINING FEE .0006 x	
CERTIFICATE OF OCCUPANCY	20.00
OTHER	
OTHER	
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ 40.00
DATE _____	Collected By _____

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			
OTHER			
OTHER			
- LESS: Refunds			(
TOTAL COLLECTED AFTER PERMIT ISSUED			\$

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	\$
COLLECTED AFTER PERMIT (VB)	
TOTAL	\$

TOWNSHIP OF BRICK



BUILDING SUBCODE TECHNICAL SECTION



PERMIT NO. 1991
 DATE ISSUED 7/23/96
 REVISION DATE _____
 Block 22 Lot 45
 Subdivision _____

A. IDENTIFICATION

APPLICANT — Complete unshaded areas only When changing contractors, notify this office

Owner Joe E. Eckhart Contractor Self

Address 28 Lenoxe Tr Address _____

Bricktown MD

Tel. (201) 832 4863 Tel. (_____) _____

Work Site Address _____ Lic. No. _____

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.

AGENT SIGNATURE _____

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK
 Give detail description including materials used, dimensions, etc.

Deck

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)

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____

No. of Stories _____ Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

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

Estimated Cost of Building Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

