



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

Date Issued 2/6/2019
Control Number C-45213
Permit Number 20190217
Permit Issue Date 1/28/2019
Certificate Number 20190217

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 384 ALDRICH ROAD Howell Township, NJ 07731 Block: 59 Lot: 1.17 Qual:

Owner in Fee: CLOVE INVESTMENTS LLC

Owner Address: P.O. BOX 1030 BRICK NJ 08723

Telephone: (347) 435-6872

Contractor BAKST ELECTRIC

Address 164 BENJIMAN STREET TOMS RIVER NJ

Telephone: (732) 489-8393 Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: 5B

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: SERVICE ELECTRIC - DR#342334585

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:



ELECTRICAL SUBCODE TECHNICAL SECTION



meter reset
DR#
349334565

Date Received 1-28-19
Control # 45213
Date Issued 2019-02-17
Permit #

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

Block 59 Lot 117 Qualification Code 06000

Work Site Location 384 Aldrich Road Howell

Owner in Fee: love investments llc

Tel. (347) 435-6872 e-mail _____

Address 20304 1030 Bridge N.J. zip code 08723

Contractor: Bakst Electric Tel. (732) 459-8303 zip code 08723

Address 164 Benjamin St. Mans River e-mail gabriel@bakst.com

Contractor License No. 1705300 Exp. Date 3/31/2021

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

Federal Emp. ID No. _____ FAX: (____) _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 450.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[x] No Plans Required

[] Partial - Underslab Utilities Approved

Date: _____ Approved by: _____

[] Electric Plans Approved

Date: _____ Approved by: _____

Joint Plan Review Required

[] Bldg. [] Plumb. [] Fire. [] Elev. Other _____

SUBCODE APPROVAL - PERMIT

Date: _____ Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

[] CO [] CPO [] CA

Date: _____ Approved by: _____

INSPECTIONS

Type: _____ Failure: _____ Approval: _____ Initial: _____

Rough _____

Barrier-Free _____

Trench _____

Temp. Serv. _____

Constr. Serv. _____

TGO _____

Other _____

Service _____

Barrier-Free _____

Temp. Cut-In-Card Date Issued _____

Final Cut-In-Card Date Issued _____

Annual Pool Inspection _____

Date of Grounding and Bonding _____

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: _____

[] Licensed Elec. Contractor [] Certified Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

change outside wire for service

QTY. SIZE ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors - Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights

Storable Pool/Spa/Hot Tub

KW Elec. Range/Receptacle

KW Oven/Surface Unit

KW Elec. Water Heater

KW Elec. Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

KW Baseboard Heat

HP Motors 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

change outside wire for service

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$

FEE (Office Use Only)

\$

Howell Township
Building Department (732) 938-4500
EVT 2445



DRUR # 342334585

CUT-IN-CARD

MUNICIPALITY Howell Township

LOCATION 384 ALDRICH ROAD

UTILITY CO JCPL

Howell Township, NJ 07731

BLK 59

LOT 1.17

OWNER CLOVE INVESTMENTS LLC

OCCUPANT CLOVE INVESTMENTS LLC

"Installation in the above premises has been inspected and
is in accordance with N.E.C. and DCA requirements."

☒ FINAL

☐ TEMPORARY

This approval void after ____ days

DESCRIPTION OF SERVICE 200

INSTALLED BY BAKST ELECTRIC

LICENSE NO _____

DATE 2/6/2019

PERMIT # 20190217

INSPECTOR James Kaiser

☒ FAXED IN 2/6/2019

Lic. No: 010063

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR