BLOCK 382.35 LOT 2. QUALIFICATION CODE _____ ADDRESS (SITE) 3 Bow Dr PERMIT NO. 17-0925

CONSTRUCTION PERMIT APPLICATION C-16-006139

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Proposed Work Site at: 3 Bow Dr
2. Name of Owner in Fee: Richard Dopf
   Tel. [redacted] e-mail [redacted]
   Address 3 Bow Dr (street) Brick (municipality) zip code
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: DEFENDERS Tel. (609) 297-8103
   Address 353 Rt 46W Bldg 1, Ste 100 Fairfield, NJ 07004 e-mail njpermits@defenderdirect.com
   License No. OR, if new home, Builder Reg. No. 34BF00021800 Exp. Date 01/31/2017
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 352042072 FAX: (317) 564-2547
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. _____ FAX: _____
6. Responsible Person in Charge once Work has Begun Crystal Wesley
   Tel. (609) 297-8103 FAX: (317) 564-2547

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 150.-	✓	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	1.-		
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 151.-		

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area — Largest Floor _____ 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 (Alarms)
- ☐ 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)

	Est. Cost	FOR OFFICE USE ONLY (Optional) Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building									
☒ Electrical	249. #								
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST	$0								

DEC 22 2016

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

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 _____

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.

(X) Check if contractor.

Agent Name **Defender** Security Company

Address 3750 Priority Way South Drive, Suite #200

Indianapolis, IN 46240

Telephone (317) 810-4720

Signature _____

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition		
Building	_____	Energy	_____	Other _____
Electrical	_____	Barrier Free	_____	_____
Plumbing	_____	Flood Hazard	_____	_____
Fire Protection	_____	As Built Elevation Cert.	_____	_____
Mechanical	_____	Other	_____	_____

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

ailed 3/15/17 CW

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 4/27/2017
Control Number C-16-006139
Permit Number 17-0925
Permit Issue Date 3/24/2017
Certificate Number 17-0925

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 3 BOW DRIVE Brick Township, NJ Block: 382.35 Lot: 2 Qual:

Owner in Fee: DOPF, RICHARD W & CARLEEN A

Owner Address: 3 BOW DR BRICK NJ 08723

Telephone: [redacted]

Contractor Defender Security Company

Address 363 RT 46 W BLDG. 1 STE 100 Fairfield NJ 07004

Telephone: (609) 297-8103 Fax: (317) 564-2541

License Number or Builders Registration Number: 34BF00021800
34BA00037000
34FA00032000
34BA00188300

Federal Emp. Number: 35-2042072

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: ALARM SYSTEM (BURGLAR OR FIRE)

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 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.

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 4/27/2017

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	4/27/2017
Control Number	C-16-006139
Permit Number	17-0925
Permit Issue Date	3/24/2017
Certificate Number	17-0925

Certificate

Construction Code Division

(Certificate of Approval)

☐ **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:

☐ 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: 4/27/2017

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 3/27/17
Date Issued / Permit # 17-0925

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

Block 382.35 Lot 2 Qualification Code

Work Site Location 3 Bow Dr

Owner in Fee: Richard Dopf

Tel. [redacted] e-mail [redacted]

Address 3 Bow Dr (street) (municipality) (zip code)

Contractor: DEFENDERS, Inc. Tel. (609) 297-8103

Address 27 Horseneck Road, Suite 2 e-mail njpermits@defenderdirect.com

Fairfield, NJ 07004

Contractor License No. 34BF00021800 Exp. Date 01/31/2017

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

Federal Emp. ID No. 352042072 FAX: (317) 564-2547

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 249.0

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: John A. Sorell

Print name here: John A. Sorell

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Low Voltage Burglar Alarm:

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
0	20.	Alarm Devices/F.A.C. Panel	
0	20.	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/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

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.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [X] CA

Date: 4/26/17

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final	4/19/17		4-25-17	
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 11/09) Internet version

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

4-18-07 PROTECT WIRE FROM DAMAGE CAUSE—

SCREW FOR TRANSFORMER TO RECEPTACLE

401 Chambers Bridge Road
Brick, NJ 08723
732-262-1030

Brick Township

CORRECTION NOTICE

ADDRESS 3 Bow DR

PERMIT NUMBER 17-0925 BLOCK 382.35 LOT 2

OWNER DOPF

Upon inspection, violations of the ____ Building ___ Plumbing ___ Electric ___ Fire Code were in evidence and the following orders are hereby issued for their correction:

PROTECT TRANS WIRE FROM DAMAGE
SCREW FOR ALARM TRANSFORMER TO RECEPTACLE

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED.

DATE 4 18-17 INSPECTOR

1/3/17

CONSTRUCTION PERMIT

Date Issued 3/24/17
Control # C-16-006139
Permit # 17-0925

IDENTIFICATION Block: 382.35 Lot: 2 Qualifier

Work Site Location: 3 BOW DRIVE Brick Township, NJ

Owner in Fee: DOPF, RICHARD W & CARLEEN A
3 BOW DR BRICK NJ 08723

Telephone: [redacted]

Contractor: Defender Security Company
Address: 363 RT 46 W BLDG. 1 STE 100 Fairfield NJ 07004
Telephone: (609) 297-8103
Lic. No. or Bldrs. Reg. No. 34BA00188300 34BF00021800
Federal Employee. No. 35-2042072

Is hereby granted permission to perform the following work:

- [ ] BUILDING
- [ ] PLUMBING
- [ ] LEAD HAZARD ABATEMENT
- [x] ELECTRICAL
- [ ] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:

ALARM SYSTEM (BURGLAR OR FIRE)

PAYMENTS (Office Use Only)	
Building	$0
Electrical	$150
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$1
CO Fee	
Other	$0
Total	$151
Check No.	009757
Cash	$0
Credit	$0
Collected By	

03/24/17 1:24PM 7001 558W0196 SERV.003
ELECTRIC $150.00
DCA $1.00
CHECK $151.00

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 $249

Construction Official Date 12/31/16

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.

- [x] 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:

- [x] 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.

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Control #
Date Issued
Permit # 17-0925

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

Block 302.35 (302.35) Lot 2 Qualification Code

Work Site Location 3 Bow Dr

Owner in Fee: Richard Dopf

Tel. [redacted] e-mail [redacted]

Address 3 Bow Dr [redacted]
street municipality zip code

Contractor: DEFENDERS, Inc. Tel. (609) 297-8103

Address 27 Horseneck Road, Suite 2 e-mail njpermits@defenderdirect.com

Fairfield, NJ 07004

Contractor License No. 34BF00021800 Exp. Date 01/31/2017

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

Federal Emp. ID No. 352042072 FAX: (317) 564-2547

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 249.0

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.

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
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

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: John D. Sorell

Print name here:

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Low Voltage Burglar Alarm:

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
0	20.	Alarm Devices/F.A.C. Panel	
0	20.	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/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

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

Ex. 2 Pl. 12

Welcome to
Ocean County, New Jersey
Government Online The Shore and More...

- Tax Board Home
- Board of Taxation
- Searches
- Tax Rates
- Property Tax Relief Programs
- Statistical Reports
- Tax Appeals
- Revaluations
- Ocean County Tax Assessors
- Ocean County Tax Collectors
- Links
- Glossary
- Foreclosures
- Contact Us
- Tax Board History

Tax List Details - Current Year			
Municipality:	Brk	Deed date:	3/24/2016
Owner:	DOPF, RICHARD W & CARLEEN A	Block:	382.35
Mailing address:	3 BOW DR	Lot:	2
City/State:	BRICK NJ 08723	Qual:	
Location:	3 BOW DRIVE		
Prop class:	2	Land val:	40,000
Bldg desc:	1SF1G 1300	Improvement val:	78,300
Land desc:	49X100	Exemption 1:	
Addtl lots:		Exemption 2:	
Zone:	RR2	Exemption 3:	
Map:	32.5	Exemption 4:	
Year blt:	1980	Net value:	118,300
Book/page:	16356/632	Last yr taxes:	2326.57
Sale price:	187,000	Prev block:	
Nonusable code:		Prev lot:	
Spcl tax codes:	F01, , ,	Prev qual:	
Exmt Prop Code	000	Init/Fur file date	NA / NA
Statue:		Facility:	

Assessment History				
Year	Prop cls	Land Value	Imprv Val	Net Val
2015	2	40,000	78,300	118,300
2014	2	40,000	78,300	118,300
2013	2	40,000	78,300	118,300
2012	2	40,000	78,300	118,300

Cama Details			
Type/use:	One Family	Story hgt:	1 Story
Design:	Ranch	Roof type:	Gable
Roof mtrl:	Asphalt Shingle	Ext Finish:	AlumVinyl, Pt Brick
Foundation:	Concrete Slab	Basement:	0
Heating src:	Electric	Heat system:	Elec BB
Electric:	Adequate	A/C:	All Separate
Plumbing:			
Fireplace:	None(0)	SFLA:	1300
Attic area:	0	Unf area:	0
# bedrooms:	2	# bathrooms:	2
Attchd items:	Att Gar, Encl Porch, Conc Patio		
Detchd items:			

Sr1a Details			
Book/page:	16356/632	Deed date:	3/24/2016
Grantee:	DOPF, RICHARD W & CARLEEN A	Grantor:	SHEEHAN, DONALD T & CATHERINE
Street	3 BOW DR	Street	303 COLONY DR
City	BRICK NJ	City	N MYRTLE BEACH SC
Zip	08723	Zip	29582
Sales price:	187,000	Rec date:	04/04/16

Ocean County Board of Taxation Home | Privacy Statement | Ocean County Home Page

Authorized
Premier Provider

DEFENDERS, Inc.
3750 Priority Way S. Dr., #200
Indianapolis, IN 46240
Attn: Permits Dept. /NJ

To Construction Department;

Enclosed is a permit application for the installation of security systems in your township. Per NJAC 5:23-2.17 A©, we understand that these wireless installations of burglar alarms are considered "Minor Work," but may still require a permit application. Note that the system is composed of an alarm panel with a wire that goes behind the wall and the rest of the system consists of wireless pieces. If smoke sensors are installed, these are secondary wireless battery operated detectors that do not modify pre-existing primary systems.

Please review the enclosed documents:

- Construction Permit Application: UCCF100-1 (Short form UCCF170)
- Electrical Sub-code Technician Form: UCCF120
- Optional: Fire Sub-code Technician Form: UCCF140 (if smoke detectors are installed)
- A copy of our Licenses (contractor's and license holder's NJ state license)
- Optional: Spec/UL cut sheets & wiring pages for panels or smoke detectors

Once you have determined the Permit Fee, we need the following in order to mail a payment:

- Your name, phone number, and municipality
- Property Owner name and address
- Fee amount (please notify us if you need separate checks for DCA fees, etc.)

For your convenience, please notify our office of any fee or forms due by:

Email: njpermits@homedefenders.com
Phone: 609-297-8103
Fax: 317-564-2547

Once the permits has been issued and the inspection completed, please fax or mail a copy of the Certificate of Approval to our office.

Sincerely,

Kyrie Forrester
Permits Manager
kf11362@gomedefenders.com

DEFENDERS

DEFENDERS, Inc.
DBA Protect Your Home
3750 Priority Way South Drive
Indianapolis, IN 46240-3815

Protect Your Home

State of New Jersey

FIRE ALARM LICENSE

34FA00032000
EXPIRES: 08/31/2019
DOB: 05/23/1965

JOHN D SORRELL

State of New Jersey

BURGLAR ALARM LICENSE

34BA00037000
EXPIRES: 08/31/2019
DOB: 05/23/1965

JOHN D SORRELL

CA-20

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

THIS IS TO CERTIFY THAT THE
Fire Alarm, Burglar Alarm & Locksmith Adv Comm

HAS REGISTERED

Defenders Inc DBA Protect Your Home
John D Sorrell
363 Route 46 West
Suite 207
Fairfield NJ 07004

FOR PRACTICE IN NEW JERSEY AS A(N): BA and FA Business

12/16/2013 TO 01/31/2017
VALID

Signature of Licensee/Registrant/Certificate Holder

34BF00021800
LICENSE/REGISTRATION/CERTIFICATION #

ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Fire Alarm, Burglar Alarm & Locksmith Adv Comm
HAS REGISTERED
Defenders Inc DBA Protect Your Home
BA and FA Business

12/16/2013 TO 01/31/2017
VALID

34BF00021800

SIGNATURE

ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Fire Alarm, Burglar Alarm & Locksm
P.O. Box 45006
Newark, NJ 07101

PLEASE DETACH HERE