

BLOCK 1413-11 LOT 70 QUALIFICATION CODE _____ ADDRESS (SITE) 574 Alabama Ave PERMIT NO. 00-3006



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 574 Alabama Ave
2. Name of Owner in Fee: Ferro Tel. ()
Address 574 Alabama Ave Brick NJ 08724
street municipality zip code
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Kevin Schultz Tel. () 792-0999
Address 2 Iron Ore Rd @ RT33 Englishtown, NJ 07726
License No. OR, if new home Builder Reg. No. 9592 Exp. Date _____
Federal Employee No. _____ FAX: () _____
5. Architect or Engineer _____ Tel. () _____
Address _____
6. Responsible Person in Charge of Work Twp of Brick
Tel. () _____ FAX () _____

Aux water meter

V. FEE SUMMARY (for office use only)

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

VI. BUILDING/SITE CHARACTERISTICS

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. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____
no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

II. PROPOSED WORK	Est. Cost	OPTIONAL (for office use only)							
		Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☐ Alteration									
5. ☐ Fire Protection									
6. ☒ Plumbing	<u>\$50</u>				<u>7-25-00</u>	<u>OK</u>			
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	<u>\$50</u>								

III. DO YOU WANT: (optional)

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
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 _____

After Construction _____

Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change in Use Group, Indicate Former:

LDS BR 10103073

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 _____
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. _____	_____	_____	_____

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 _____ 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. 5:32-2.15(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 _____

Address _____

Telephone (_____) _____

Signature _____

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 07/25/2000
Control #
Permit # 00-3006

IDENTIFICATION Block, 1413.11 Lot 70 Qual

Work Site Location 574 ALABAMA AVE
Quinn in Fee FERRO, JOHN JR
Address 574 ALABAMA AVE
BRICK, NJ 08724-
Telephone ()

Contractor KEVIN SCHMALZ
Address 2 IRON ORE RD @ RT 33
ENGLISHTOWN, NJ 07126-
Telephone (732)792-0999
Lic. No. or Bldg. Reg. No. 9592
Federal Emp. No. [REDACTED]

I hereby granted permission to perform the following work:

- ☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
TOWNSHIP AUTHORIZED WATER METER INSTALLATIONS

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 \$ 50

Construction Official *[Signature]*

07/25/2000
Date

U.C.C. F170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building 0
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other 0
PCA Training Fee 0
Cert. of Occupancy 0
Total 0
Check No. 0
Cash 0
Collected By

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 07/25/2000
Date Issued 07/25/2000
Control #
Permit # 00-3006

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 1413.11 Lot 70 Quad
Work Site Location 514 ALABAMA AVE

AUX METER

Owner in Fee FERRO, JOHN JR

Address 514 ALABAMA AVE

BRICK, NJ 08124-

Telephone [] Fax []

Contractor KEVIN SCHWALZ

Address 2 IRON ORE RD @ RT 33

ENGLISHTOWN, NJ 07126-

Telephone 732-792-0999

Lic. No. or Bldg. Div. No. 0509

Federal Emp. No. []

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed U
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required

Joint Plan Review Required:

☐ Bldg ☐ Elect

☐ Fire ☐ Elevator

☐ Plumb. Plans Approved

Date: 7-25-00

Approved By: [Signature]

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Approved By:

Date:

INSPECTIONS		Date (Month/Day)	Failure	Approval	Initial
Type	Slab				
Rough					
Water					
Sewer					
Fixtures					
Gas Equip.					
Gas Piping					
Solar					
TCO					

NO.

FIXTURE/EQUIPMENT

FEE (Office Use Only)

Water Closet

Urinal / Bidet

Bath Tub

Lavatory

Shower

Floor Drain

Sink

Dishwasher

Drinking Fountain

Washing Machine

Hose Bib

Water Heater

Fuel Oil Piping

Gas Piping

Steam Boiler

Hot Water Boiler

Sewer Pump

Interceptor / Separator

Backflow Preventer

GreaseTrap

Sewer Connection

Water Service Connection

Stacks

Other AUX METER

Other

Paid [] Check #
Collected by:

Administrative Surcharge \$
Minimum Fee \$
TOTAL FEE \$
DCA Training Fee \$

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 of Contractor Seal

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE

TECHNICAL SECTION

Date Received 07/25/2000
Date Issued 07/25/2000
Control #
Permit # 00-3006

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

Block 1413.11 Lot 70 Qual
Work Site Location 574 ALABAMA AVE
AUX METER
Owner in Fee FERRO, JOHN JR
Address 574 ALABAMA AVE
BRICK, NJ 08724-
Tele. () Fax ()
Contractor KEVIN SCHMALZ
Address 2 IRON ORE RD 6 RT 33
BRICKSHIRE, NJ 07726-
Tele. (332) 792-0999
Lic. No. or Bldgs. Reg. No. 9592
Federal Emp. No. ()

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size () Public Sewer () Private Septic
Water Sewer Size () Public Water () Private Well
Estimated Cost of Plumbing Work \$ 50

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

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FRB (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
0	Other AUX METER	15
0	Other	0

Paid () Check #
Collected by: DCA Training Fee \$
Administrative Surcharge \$
Minimum Fee \$
TOTAL FRB \$
TOTAL FRB \$

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY
1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
(732) 458-7000 • FAX (732) 458-5378

APPLICATION FOR AUXILIARY WATER METER

Date:

7/20/00

Applicant's Name:

Twp. of Brick

Telephone No.

262-1010

Mailing Address:

401 Chambersbridge Rd.

Service Location:

574 Alabama Ave.

Account Number:

T702401T702512

Block:

1413-11

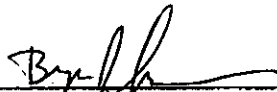
Lot:

70

Size of Existing Service:

3/4"

Size of Existing Meter:

3/4"

Applicant's Signature



Authority Representative

THIS APPLICATION IS VALID FOR 30 DAYS FROM DATE OF APPLICATION.

Please note the following:

At the customer's option, a separate account may be established, subject to all conditions of the rate schedule as applicable to water usage.

After completing this application the following steps must be taken:

1. Obtain a special device permit from the Township of Brick Plumbing Department.
2. A licensed plumber or homeowner must cut into the pipe BEFORE the existing yoke and install a second meter yoke.
3. Call the Township of Brick Plumbing Department (262-1000) for inspection.
4. Call Brick Utilities for installation of the meter. A copy of the completed permit, showing inspection approval, will be required before the meter is installed.
5. It is the customer's responsibility to insure that the meter is installed and the permit was approved. Failure to do so may result in a tampering fee of \$250.00 and service will be terminated.
6. A charge for cost of the meter will be applied to the first billing. Quarterly bills for usage only will be issued at the rate of \$2.74 per 1,000 gallons.