

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

David M. Smith

Date

Sept 10-2003

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

MATHIS STEVEN

Address

16200 Princeton Ave

Bank HT 08723

Telephone (732)

458-7633

Signature

David Smith

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)

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/10/2003

Control #

Permit # 03-4056

UCC NEW JERSEY
CONSTRUCTION
PERMITS

IDENTIFICATION Block 673 Lot 13 Qual

Work Site Location 741 BRICK BLVD. FRIENDLY'S
SEPTIC FILL

Owner in Fee FRIENDLY'S ICE CREAM CORP

Address 1855 BOSTON RD

MILBRAH, NJ 01095-

Telephone (413)543-2400

Contractor MATHIS SEWER SERV

Address 1612 W PRINCETON AVE

BRICK, NJ 08723-

Telephone (732)458-7633

Lic. No. or Bldg. Reg. No.

Federal Emp. No. 13-6282414

Is 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:

SEPTIC FILL

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 \$ 3,600

DF Neumann
Construction Official

09/10/2003

Date

U.C.C. F170 (rev. 3/96) NJ UCCARS 5.24E

PAYMENTS (Office Use Only)

Building 0
Electrical 05
Plumbing 35
Fire Protection 0
Elevator Devices 0
Other
DCA State Permit Fee 2
Cert. of Occupancy 0
Other
Total 37.00
Check No.
Cash X
Collected By JB

09/10/03 10:55AM 000000H3555
XX06 SERV.006

#034056
PLUMBING
DCA
XXXTOTAL
CASH
CHANGE

\$35.00
\$2.00
\$37.00
\$40.00
\$3.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
**CONSTRUCTION
PERMITS**

Date Issued 09/10/2003

Control #

Permit # 03-4056

IDENTIFICATION Block 673 Lot 13 Qual

Work Site Location 741 BRICK BLVD FRIENDLY'SSEPTIC FILLOwner in Fee FRIENDLY'S ICE CREAM CORPAddress 1855 BOSTON RDWILBRAHAM, MA 01095-Telephone (413)543-2400Contractor MATHIS SEWER SERV.Address 1612 W PRINCETON AVEBRICK, NJ 08723-Telephone (732)458-7633Lic. No. or Bldrs. Reg. No. Federal Emp. No. 13-6282414

Is hereby granted permission to perform the following work:

☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☒ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 9 only)

DESCRIPTION OF WORK:

SEPTIC FILL

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 \$ 3,600

DF Neumann 09/10/2003
Construction Official

Date

U.C.C. F170 (rev. 3/96) NJ UCCARS 5.24E

PAYMENTS (Office Use Only)

Building 0
Electrical 25
Plumbing 35
Fire Protection 0
Elevator Devices 0
Other
DCA State Permit Fee 2
Cert. of Occupancy 0
Other
Total 2 37.00
Check No.
Cash 1
Collected By JB

09/10/03 10:55AM 000000#3555
XX06 SERV.006

#034056
PLUMBING
DCA
XXXTOTAL
CASH
CHANGE

\$35.00
\$2.00
\$37.00
\$40.00
\$3.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMITS

Date Issued 09/10/2003
Control #
Permit # 03-4056

VOID

9/10/03
H.

IDENTIFICATION Block 673 Lot 13 Qual

Work Site Location 741 BRICK BLVD FREINDLY'S
SEPTIC FILL

Contractor MATHIS SEWER SERV
Address 1612 W PRINCETON AVE

Owner in Fee FRIENDLY'S ICE CREAM CORP

BRICK, NJ 08723-

Address 1855 BOSTON RD.

Telephone (732)458-7633

WILBRAHAM, MA 01095-

Lic. No. or Bldrs. Reg. No.

Telephone (413)543-2400

Federal Emp. No. 13-6282414

Is 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:
SEPTIC FILL

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 \$ 3,600

DP Newman
Construction Official

09/10/2003

Date

PAYMENTS (Office Use Only)

Building 0
Electrical 35
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other 0
DCA State Permit Fee 2
Cert. of Occupancy 0
Other 0
Total 37.00
Check No.
Cash X
Collected By JB

ELEC ENTER
IN ERROR

09/10/03 10:55AM 000000#3555
XX06 SERV.006

#034056
PLUMBING \$35.00
DCA \$2.00
XXXTOTAL \$37.00
CASH \$40.00
CHANGE \$3.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/10/2003
Control #
Permit # 03-4059

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 673 Lot 13 Qual

Work Site Location 741 BRICK BLVD FREINDLY'S
SEPTIC FILL

Owner in Fee FRIENDLY'S ICE CREAM CORP
Address 1855 BOSTON RD
WILBRAHAM, MA 01095-
Telephone (413)543-2400

Contractor HATHIS SEWER SERV
Address 1612 W PRINCETON AVE
BRICK, NJ 08723-
Telephone (732)458-7633
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 13-6282414

Is hereby granted permission to perform the following work:

☐ BUILDING	☒ PLUMBING	☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL	☐ FIRE PROTECTION	☐ DEMOLITION
☐ ELEVATOR DEVICES	☐ ASBESTOS ABATEMENT	☐ OTHER <u></u>

(Subchapter 8 only)

DESCRIPTION OF WORK:
SEPTIC FILL

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 \$ 1,800

D Newman Jr
Construction Official

09/10/2003
Date

U.C.C. F170 (rev. 3/96) NJ UCCARS 5.24E

PAYMENTS (Office Use Only)

Building	<u>0</u>
Electrical	<u>0</u>
Plumbing	<u>35</u>
Fire Protection	<u>0</u>
Elevator Devices	<u>0</u>
Other	<u></u>
DCA State Permit Fee	<u>2</u>
Cert. of Occupancy	<u>0</u>
Other	<u></u>
Total	<u>37</u>
Check No.	<u></u>
Cash	<u>X</u>
Collected By	<u>TL</u>

PAID
CASH

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/10/2003
Control #
Permit # 03-4059

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 673 Lot 13 Qual

Work Site Location 741 BRICK BLVD FREINDLY'S
SEPTIC FILL

Owner in Fee FRIENDLY'S ICE CREAM CORP
Address 1855 BOSTON RD
WILBRAHAM, MA 01095-
Telephone (413)543-2400

Contractor MATHIS SEWER SERV
Address 1612 W PRINCETON AVE
BRICK, NJ 08723-
Telephone (732)458-7633
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 13-6282414

Is 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:
SEPTIC FILL

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 \$ 1,800

D Newman Jr.
Construction Official

09/10/2003
Date

PAYMENTS (Office Use Only)

Building 0
Electrical 0
Plumbing 35
Fire Protection 0
Elevator Devices 0
Other
DCA State Permit Fee 2
Cert. of Occupancy 0
Other
Total 37
Check No.
Cash X
Collected By TL

PAID
CASH

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 09/10/2003
Date Issued 9/10/03
Control # C10-05
Permit # 03-4056

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

Block 673 Lot 13 Qual _____
Work Site Location 741 BRICK BLVD FRIENDLY'S
SEPTIC FILL
Owner in Fee FRIENDLY'S ICE CREAM CORP
Address 1855 BOSTON RD
WILBRAHAM, MA 01095-
Tele. (413) 543-2400
Contractor MATHIS SEWER SERV
Address 1612 W PRINCETON AVE
BRICK, NJ 08723-
Tele. (732) 458-7633
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 13-6282414

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 \$ 1,800

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required
Joint Plan Review Required:

[] Bldg [] Elect

[] Fire [] Elevator

[] Plumb. Plans Approved

Date: 9-10-03

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Approved By: _____

Date: _____

INSPECTIONS

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

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (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 <u>SEPTIC FILL</u>	35
0	Other	0

Administrative Surcharge \$ _____

Paid [] Check # _____ Minimum Fee \$ _____

Collected by: _____ TOTAL FEE \$ 35

DCA State Permit Fee \$ 2

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

C3 NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 09/10/2003
Date Issued 9/10/03
Control # C10-05
Permit # 03-4056

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

Block 673 Lot 13 Qual _____
Work Site Location 741 BRICK BLVD FRIENDLY'S
SEPTIC FILL
Owner in Fee FRIENDLY'S ICE CREAM CORP
Address 1855 BOSTON RD
WILBRAHAM, MA 01095-
Tele. (413) 543-2400
Contractor MATHIS SEWER SERV
Address 1612 W PRINCETON AVE
BRICK, NJ 08723-
Tele. (732) 458-7633
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 13-6282414

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 \$ 1800

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required
Joint Plan Review Required:
[] Bldg [] Elect
[] Fire [] Elevator
[] Plumb. Plans Approved
Date: 9-10-03
Approved By: [Signature]
SUBCODE APPROVAL
[] CO [] CCO [] CA
Approved By: _____
Date: _____

INSPECTIONS

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

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	FEE (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 <u>SEPTIC FILL</u>	35
0	Other	0

Administrative Surcharge	\$	0
Paid [] Check # _____	Minimum Fee	\$ 0
Collected by: _____	TOTAL FEE	\$ 35
	DCA State Permit Fee	\$ 2

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 09/10/2003

Date Issued 9/10/03

Control # C10-05

Permit # 03-4056

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

Block 673 Lot 13 Qual

Work Site Location 741 BRICK BLVD FRIENDLY'S

SEPTIC FILL

Owner in Fee FRIENDLY'S ICE CREAM CORP

Address 1855 BOSTON RD

WILBRAHAM, MA 01095-

Tele. (413) 543-2400

Contractor NATHIS SEWER SERV

Address 1612 W PRINCETON AVE

BRICK, NJ 08723-

Tele. (732) 458-7633

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 12-6282414

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 \$ 1,800

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Fire [] Elevator

[] Plumb. Plans Approved

Date: 9-10-03

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Approved By:

Date:

INSPECTIONS

Type Failure Failure Approval Initial

Slab

Rough

Water

Sewer

Fixtures

Gas Equip.

Gas Piping

Solar

TCO

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (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 SEPTIC FILL	35
0	Other	0

Administrative Surcharge \$ 0

Paid [] Check # Minimum Fee \$ 0

Collected by: TOTAL FEE \$ 35

DCA State Permit Fee \$ 2

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

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 09/10/2003
Date Issued 09/10/2003
Control #
Permit # 03-4059

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

Block 673 Lot 13 Qual
Work Site Location 741 BRICK BLVD FREINDLY'S
SEPTIC FILL
Owner in Fee FRIENDLY'S ICE CREAM CORP
Address 1855 BOSTON RD
WILBRAHAM, MA 01095-
Tele. (413) 543-2400
Contractor MATHIS SEWER SERV
Address 1612 W PRINCETON AVE
BRICK, NJ 08723-
Tele. (732) 458-7633
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 13-6282414

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 \$ 1,800

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required
Joint Plan Review Required:

[] Bldg [] Elect
[] Fire [] Elevator
[] Plumb. Plans Approved

Date 9-10-03

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCD [] CA

Approved By:

Date:

INSPECTIONS

Type	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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	FEE (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 SEPTIC FILL	35
0	Other	0

Administrative Surcharge	\$	0
Paid [] Check #	Minimum Fee	\$ 0
Collected by:	TOTAL FEE	\$ 35
	DCA State Permit Fee	\$ 2

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 09/10/2003
Date Issued 09/10/2003
Control #
Permit # 03-4059

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

Block 673 Lot 13 Dual _____
Work Site Location 741 BRICK BLVD FREINDLY'S
SEPTIC FILL
Owner in Fee FRIENDLY'S ICE CREAM CORP
Address 1855 BOSTON RD
WILBRAHAM, MA 01095-
Tele. (413)543-2400
Contractor MATHIS SEWER SERV
Address 1612 W PRINCETON AVE
BRICK, NJ 08723-
Tele. (732)458-7633
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 13-6282414

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 \$ 1,800

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☒ No Plans Required
Joint Plan Review Required:
[] Bldg [] Elect
[] Fire [] Elevator
[] Plumb. Plans Approved
Date: 9-10-03
Approved By: [Signature]
SUBCODE APPROVAL
[] CO [] ECO [] CA
Approved By: _____
Date: _____

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

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (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 <u>SEPTIC FILL</u>	35
0	Other _____	0

Administrative Surcharge \$ _____
Paid [] Check # _____ Minimum Fee \$ _____
Collected by: _____ TOTAL FEE \$ 35
DCA State Permit Fee \$ 2

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

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

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SUBCODE
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Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 13-6282414

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Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 1,800

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Joint Plan Review Required:
[] Bldg [] Elect
[] Fire [] Elevator
[] Plumb. Plans Approved
Date 9-10-03
Approved By: [Signature]
SUBCODE APPROVAL
[] CO [] CCD [] CA
Approved By:
Date:

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

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D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (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 SEPTIC FILL	35
0	Other	0

Administrative Surcharge	\$	0
Paid [] Check #	Minimum Fee	\$ 0
Collected by:	TOTAL FEE	\$ 35
	DCA State Permit Fee	\$ 2

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 09/10/2003
Date Issued 09/10/2003
Control #
Permit # 03-4059

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Tele. (413) 543-2400
Contractor MATHIS SEWER SERV
Address 1612 W PRINCETON AVE
BRICK, NJ 08723-
Tele. (732) 458-7633
Lic. No. or Bldgs. Reg. No.
Federal Emp. No. 13-6282414

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 \$ 1,800

JOB SUMMARY (Office Use Only)

PLAN REVIEW

No Plans Required
Joint Plan Review Required:
[] Bldg [] Elect
[] Fire [] Elevator
[] Plumb. Plans Approved
Date 9-10-03
Approved By: [Signature]
SUBCODE APPROVAL
[] CO [] CCO [] CA
Approved By: [Signature]
Date: 9-15-03

INSPECTIONS

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

Septic Fill

9/11/03

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (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 SEPTIC FILL	35
0	Other	0

Administrative Surcharge \$ 0

Paid [] Check # Minimum Fee \$ 0

Collected by: TOTAL FEE \$ 35

DCA State Permit Fee \$ 2

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Contractor: MATHIS Sewer-Serv
Address: 16120 Penacum Ave
Bach NY. 08723
Phone #: 732-468-7633
Lis #: [REDACTED]
Federal Emp # or SSN: _____

Contractor: _____
Address: _____
Phone #: _____
Lis #: _____
Federal Emp # or SSN: _____

☒ **Technical Data**
Fixtures

Quantity
Water Closets (Toilet) _____
Urinals/Bidets _____
Bath Tub (w/or w/out shower head) _____
Lavatory (BR Sink) _____
Shower _____
Floor Drain _____
Sink _____
Dishwasher _____
Drinking Fountain _____
Washing Machine _____
Hose Bib _____
Gas Piping _____
Fuel Oil Piping _____
Water Heater _____
Steam Boiler _____
Hot Water Boiler _____
Sewer Pump _____
Interceptor/Separator _____
Backflow Preventer _____
Greasetrap _____
Air Conditioner (Condensate Drain) _____
Septic Tank Closure _____
Sewer Service Connection _____
Water Service Connection _____
Active Solar System _____
Auxiliary Meter _____
Sprinkler Heads _____
Sump Pump _____
Pool Heater _____
Other: File in cesspool

☒ Estimated Cost of Plumbing Work \$1800.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: [Signature]
Please Print Name: HAROLD E MATHIS

CONTRACTOR'S SEAL

Technical Data

Description of Work:

Heating Type: Gas _____ Oil _____ Electric _____ Solar _____
Heating System is _____ New _____ Existing _____
Location of Furnace/Boiler: _____
Water Supply Source _____
Method of Valve Supervision _____
Local Alarm Supervision _____
Central Supervision: _____
Proprietary Supervision: _____

Flammable Storage Tanks _____ capacity _____ fuel _____
Combustible Storage Tanks _____ capacity _____ fuel _____
LPG Storage Tanks _____ capacity _____ fuel _____

Item _____ Quantity _____
Wet Sprinkler Heads _____
Dry Sprinkler Heads _____
Total _____

Smoke Detectors _____
Heat Detectors _____
Total _____

Stand Pipes _____
Kitchen Hood Exhaust System _____

Pre-Engineered Systems:
CO2 Suppression _____
Halon Suppression _____
Foam Suppression _____
Dry Chemical _____
Wet Chemical _____

Gas/ Oil Fired Appliances:
Gas Stove _____
Gas Dryer _____
Furnace (Gas or Oil) _____
Gas Fireplace _____
Gas Logs _____
Total Appliances _____

Wood Burning Stove _____
Wood Fireplace _____
Other: _____

Estimated Cost of Fire Work _____

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work

Site Location: 141 BRICK BLVD
Block: 673 Lot: 13
Owner's Name: FRIENDLY Ice Cream
Owner's Mailing Address: 741 BRICK BLVD PAID

Phone: (732) 477-7139

BUILDING

Contractor: MATHIS Steven Gary
Address: 161201 Princeton Ave
BRICK NJ
Phone#: 732 458-7633
Lis # [REDACTED]
Federal Emp # or SSN: [REDACTED]

Technical Data

Description of Work:

Fill in Septic Tank

ELECTRICAL

Contractor: _____
Address: _____
Phone#: _____
Lis #: _____
Federal Emp # or SSN: _____

Technical Data

Item	Quantity
Lighting Fixtures	_____
Receptacles	_____
Switches	_____
Detectors	_____
Light Poles	_____
Motors w/ Fract. HP	_____
Emergency & Exit Lights	_____
Communication Points	_____
Alarm Devices/FAC Panel	_____
Total	_____

Type of Work

New Building _____ Siding _____ sq ft
Addition _____ Fence _____
Alteration _____ Pool _____
Roofing _____ Demolition _____
Asbestos Abatement _____ Sign _____
Fireplace wd/gas _____

Building Characteristics

Use Group Present: _____ Proposed: _____
No of Stories: _____
Height of Structure: _____
Area of the largest floor: _____
Area of New Structure: _____
Volume of New Structure: _____
Total Land Disturbed: _____

Cost of Alteration: \$ 1800
Cost of New Building: \$ _____
Cost of Site Work \$ _____

Total Cost of New Building Work: \$ _____

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Pool (Receptacles, Switches, Lights, Motor 1HP) _____
Spa/Hot Tub/Storable Pool _____ KW
Electric Range _____ KW
Oven/Surface Unit _____ KW
Electric Water Heater _____ KW
Electric Dryer _____ KW
Dishwasher _____ KW
Garbage Disposal _____ HP
A/C Unit -Central Air _____ KW
Space Heater/Air Handler _____ KW
Baseboard Heating _____ KW
Motors 1+ HP _____
Transformer/Generator _____ KW
Light Stander _____ AMP
Service _____ AMP
Subpanel _____ AMP
Motor Control Center _____ AMP
Sign/Outline Light _____ KW
Furnace _____
Steam Boiler _____
Other: _____

Estimated Cost of Electrical Work: _____

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.