

BLOCK 103303 LOT 23 QUALIFICATION CODE _____ ADDRESS (SITE) 26 Oak Knoll Dr PERMIT NO. 17-3946



CONSTRUCTION PERMIT APPLICATION

17-004962

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

I. IDENTIFICATION

1. Proposed Work Site at: 86 Oak Knoll Dr.

2. Name of Owner in Fee: Debra R.

Tel. [REDACTED] e-mail _____

Address 86 Oak Knoll Dr. Brick NJ 08723

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: G.D. Construction Tel. (732) 889-6898

Address 990 Cedar Bridge Ave. e-mail Gdbuildersllc@gmail.com

Suite B-7-317 Brick NJ 08723

License No. OR, if new home, Builder Reg. No. 13VH09194800 Exp. Date 3/31/2018

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

Federal Emp. ID No. 81-0708587 FAX: () _____

5. Architect or Engineer Andy Contact _____

Address _____ e-mail _____

Tel. (732) 889-6898 FAX: () _____

6. Responsible Person in Charge once Work has Begun Andy Lentoni

Tel. (732) 889-6898 FAX: () _____

V. FEE SUMMARY (for office use only)		Update	Update
1. Building	\$ <u>150</u>		
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	\$ <u>2</u>		
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other	\$ <u>150</u>		
13. TOTAL	\$		

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 ☐ 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)

- ☐ Building
- ☐ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
<u>\$1200</u>	<u>[Signature]</u>			<u>12-1-17</u>	<u>JEP</u>		
<u>[Signature]</u>	<u>11/8/17</u>						

TOTAL COST

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 Jason Radant Date 11/4/2017

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.

☒ Check if contractor.

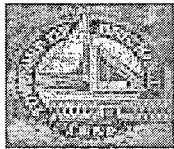
Agent Name Andy Lenton

Address 990 Cedar Bridge Dr. Suite B7-317
Brick NJ 08723

Telephone (732) 889-6898

Signature Andy Lenton

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 8/17/2018
Control Number C-17-004962
Permit Number 17-3946
Permit Issue Date 12/4/2017
Certificate Number 17-3946

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 86 OAK KNOLL DR. Brick Township, NJ Block: 1033.03 Lot: 23 Qual: _____
Owner in Fee: RADEMACHER, JASON R
Owner Address: 86 OAK KNOLL DR BRICK NJ 08724
Telephone: [REDACTED]
Contractor G & D CONSTRUCTION LLC
Address 990 CEDARBRIDGE AVE STE B4-317 BRICK NJ 08723
Telephone: (732) 889-6898 Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: 810708587

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: ALTERATION - RESIDENTIAL - ...KITCHEN RENOVATION & REMOVE WALL BETWEEN KITCHEN & FAMILY ROOM

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: _____



Date: Thursday, June 21, 2018

To: Brick Township Building Department

RE: Building Sub Code

86 Oak Knoll Dr., Brick, NJ

Dear reviewing agent,

Upon review of the structural modifications at the property listed above the fink truss is adequate as is. The reinforced section consisting of (2)1/2" plywood gusset plates makes roof truss system stronger in case of a fire but are not required throughout the rest of the structure.

Released For use

8-14-18



RECEIVED

AUG 14 2018

BUILDING

Regards,

FILE COPY

Jeffrey G. Bell, Architect
NJ LIC# 19745

PROPOSED

RECEIVED

AUG 14 2018

BUILDING

Family Room

Kitchen

Truss Joist span Full Span.

* New Plywood Gussets
Installed on each side
of Truss Joist (2 per)
(as per engineer)

Living Room

JR



Date: Thursday, June 21, 2018

To: Brick Township Building Department

RE: Building Sub Code

86 Oak Knoll Dr., Brick, NJ

Dear reviewing agent,

Upon review of the structural modifications at the property listed above the fink truss is adequate as is. The reinforced section consisting of (2)1/2" plywood gusset plates makes roof truss system stronger in case of a fire but are not required throughout the rest of the structure.

Released For use
8-14-18

RECEIVED
AUG 14 2018
BUILDING

JOB COPY

Regards

Jeffrey G. Bell, Architect
NJ LIC# 19745

PROPOSED

RECEIVED

AUG 14 2018

BUILDING

Family
Room.

Kitch.

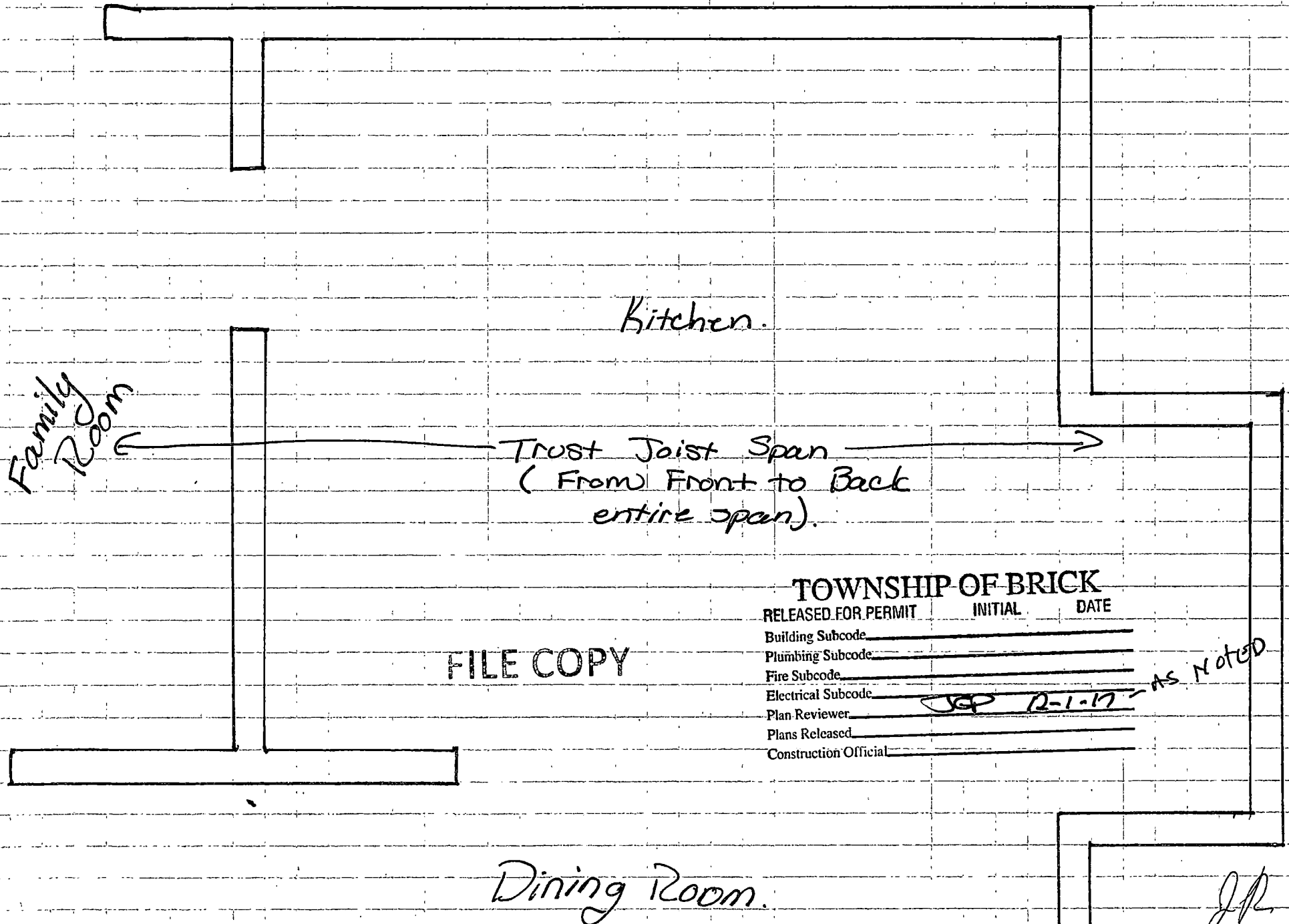
Truss Joist span Full
Span.

* New Plywood Gussets
Installed on each side
of Truss Joist (2 per)
(as per engineer)

Living Room

JR

- Existing -



TOWNSHIP OF BRICK

RELEASED FOR PERMIT INITIAL DATE

Building Subcode _____

Plumbing Subcode _____

Fire Subcode _____

Electrical Subcode _____

Plan Reviewer _____

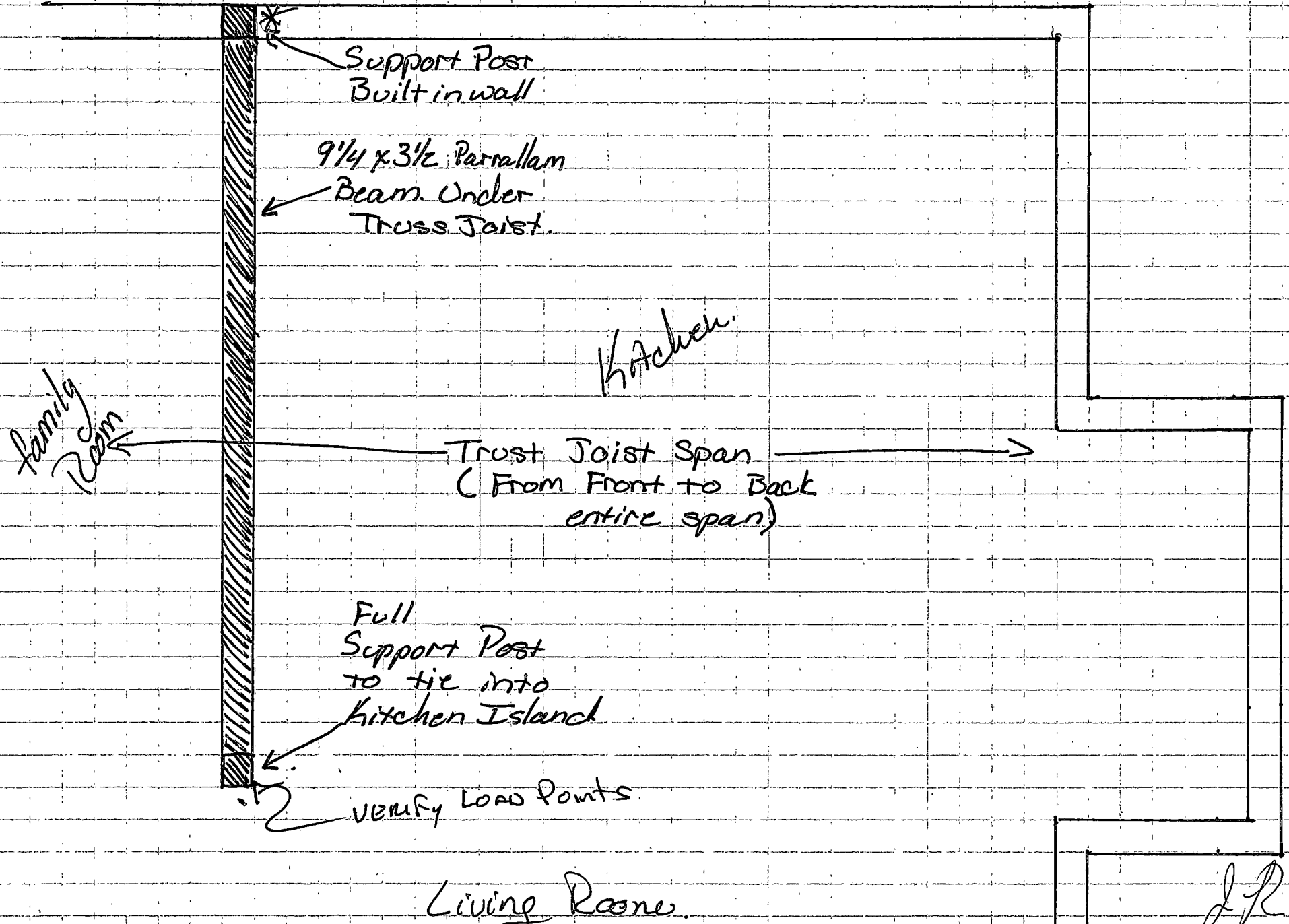
Plans Released _____

Construction Official _____

JEP 12-1-17 AS NOTED

JEP

PROPOSED



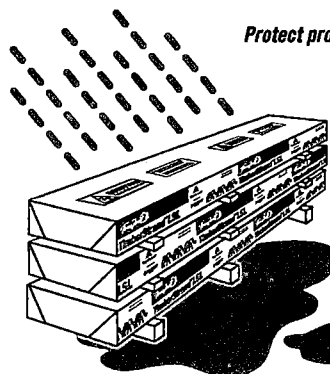
DESIGN PROPERTIES

Allowable Design Properties⁽¹⁾ (100% Load Duration)

Grade	Width	Design Property	Depth											
			4 3/8"	5 1/2"	5 1/2" Plank Orientation	7 1/4"	8 5/8"	9 1/2"	11 1/4"	11 3/8"	14"	16"	18"	
TimberStrand® LSL														
1.3E	3 1/2"	Moment (ft-lbs)	1,735	2,685	1,780	4,550	6,335							
		Shear (lbs)	4,340	5,455	1,925	7,190	8,555							
		Moment of Inertia (in.⁴)	24	49	20	111	187							
		Weight (plf)	4.5	5.6	5.6	7.4	8.8							
1.55E	1 3/4"	Moment (ft-lbs)						5,210		7,975	10,920	14,090		
		Shear (lbs)						3,435		4,295	5,065	5,785		
		Moment of Inertia (in.⁴)						125		244	400	597		
		Weight (plf)						5.2		6.5	7.7	8.8		
	3 1/2"	Moment (ft-lbs)						10,420		15,955	21,840	28,180		
		Shear (lbs)						6,870		8,590	10,125	11,575		
		Moment of Inertia (in.⁴)						250		488	800	1,195		
		Weight (plf)						10.4		13	15.3	17.5		
MicroIam® LVL														
2.0E	1 3/4"	Moment (ft-lbs)		2,125		3,555		5,885		8,925	12,130	15,555	19,375	
		Shear (lbs)		1,830		2,410		3,160		3,950	4,655	5,320	5,985	
		Moment of Inertia (in.⁴)		24		56		125		244	400	597	851	
		Weight (plf)		2.8		3.7		4.8		6.1	7.1	8.2	9.2	
Parallam® PSL														
1.3E	3 1/2"	Moment (ft-lbs)						12,475	13,055	17,970	19,900	27,160	34,955	43,665
		Shear (lbs)						6,430	7,615	8,035	9,475	10,825	12,180	
		Moment of Inertia (in.⁴)						250	415	488	800	1,195	1,701	
		Weight (plf)						10.4	12.3	13.0	15.3	17.5	19.7	
	5 1/4"	Moment (ft-lbs)						18,625	19,585	26,955	29,855	40,740	52,430	65,495
		Shear (lbs)						9,390	9,645	11,420	12,055	14,210	16,240	18,270
		Moment of Inertia (in.⁴)						346	375	623	733	1,201	1,792	2,552
		Weight (plf)						15.2	15.6	18.5	19.5	23.0	26.3	29.5
	7"	Moment (ft-lbs)						24,830	26,115	35,940	39,805	54,325	69,905	87,325
		Shear (lbs)						12,520	12,855	15,225	16,070	18,945	21,655	24,360
		Moment of Inertia (in.⁴)						462	500	831	977	1,601	2,389	3,402
		Weight (plf)						20.2	20.8	24.6	26.0	30.6	35.0	39.4

(1) For product in beam orientation, unless otherwise noted.

PRODUCT STORAGE

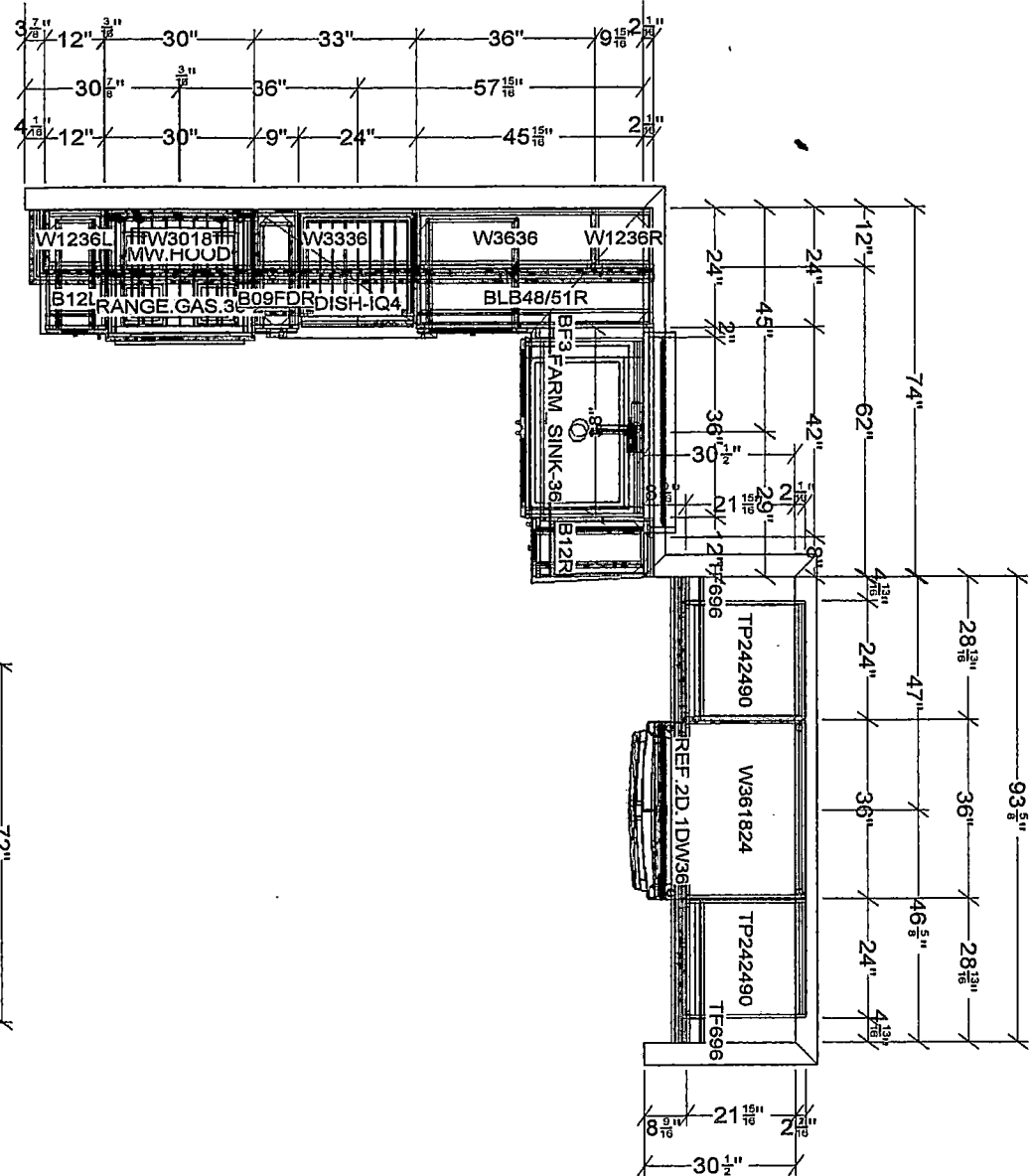


Protect product from sun and water

CAUTION:
Wrap is slippery when wet or icy

Use support blocks (6x6 or larger)
at 10' on-center to keep bundles
out of mud and water

Align stickers (2x3 or larger)
directly over support blocks



Drawing #: 1	No Scale.
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CONSTRUCTION PERMIT

Date Issued 12/14/17
Control # C-17-004962
Permit # 17-3446

IDENTIFICATION Block: 1033.03 Lot: 23 Qualifier _____
Work Site Location: 86 OAK KNOLL DR. Brick Township, NJ Contractor G & D CONSTRUCTION LLC
Address 990 CEDARBRIDGE AVE STE B4-317 BRICK NJ 08723
Owner in Fee RADEMACHER, JASON R Telephone: (732) 889-6898
86 OAK KNOLL DR BRICK NJ 08724 Lic. No. or Bldrs. Reg. No. 13VH09194800 13VH09194800
Telephone: _____ Federal Employee No. 810708587

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

ALTERATION - RESIDENTIAL ...KITCHEN RENOVATION & REMOVE WALL BETWEEN KITCHEN & FAMILY ROOM

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/ \$1,200

[Signature]
Construction Official

12/1/17
Date

U.C.C. F170-
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$150
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$2
CO Fee	
Other	\$0
Total	\$152
Check No.	<u>1008</u>
Cash	\$0
Credit	\$0
Collected By	<u>M. Fagan</u>

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.

☒ 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:

☒ 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.

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 86 Oak Knoll Dr.

BLOCK: _____ LOT: _____

CONTRACTOR: G & D Construction LLC

CONTRACTOR'S ADDRESS: 990 Cedar Bridge Dr. Suite B7-317

Type of Construction(minor, new home): Renovation.

Type of Debris (shingles, siding, wood, etc.): Tile / Kitchen cabinets

Party responsible for removal: Ocean County Recycling

Dumpster Size: 20 yard

Destination of Debris: yard of Ocean County Recycling

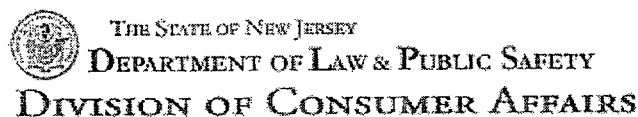
Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclables.

Generator's Certification: "Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."


Signature

10/27/2017.
Date

Andy Lantieri
Print Name



NJHome | Services A to Z | Departments/Agencies | FAQs



OAG Home

OAG Services from A - Z



OAG Contact

DIVISION OF CONSUMER AFFAIRS



OAG Home

Steve C. Lee
Director**License Information****Accurate as of November 08, 2017 12:19 PM**[Return to Search Results](#)

Name: G&D CONSTRUCTION LLC
Owner Name: Andrea Lentoni
Address: 990 Cedarbridge Ave, Ste B7-317
Brick, NJ 08723

Doing Business As:

Profession: Home Improvement Contractors
License Type: Home Improvement Contractor
License No: 13VH09194800

License Status: Active
Issue Date: 10/11/2016

Status Change Reason: License Issuance
Expiration Date: 3/31/2018

For Contractors needing information regarding registration contact the New Jersey Home Improvement Contractors registration section (973) 424-8150 prompt #2. For consumers requiring information concerning Contractor complaints contact the New Jersey Home Improvement Contractors complaints section (973) 424-8150 prompt #6.