BLOCK 65 LOT 16.05 QUALIFICATION CODE 12540 ADDRESS (SITE) 8 Poppy Lane Howell PERMIT NO.

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Propsed Work Site at: 8 Poppy Lane Howell NJ
2. Name of Owner in Fee: Stephen Gibbs Tel. [redacted]
   Address 8 Poppy Lane (street) Howell (municipality) 07731 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Owner Tel. ( ) _____
   Address _____
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: ( ) _____
5. Architect or Engineer _____ Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work Owner
   Tel. ( ) _____ FAX ( ) _____

Basement Reno

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

		(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.	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	

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☐ Alteration	2315				1/24/02	GB			
5. ☐ Fire Protection	5.00								
6. ☐ Plumbing									
7. ☒ Electrical	180.00				2/26/02	CP			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS									

OPTIONAL (for office use only)

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 HW-B 10505823

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 1/16/02

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.

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.				

HOWELL TOWNSHIP
251 PREVENTORIUM ROAD
HOWELL NJ 07731
732-938-4500

CERTIFICATE

IDENTIFICATION

Date Issued: 10/24/2003
Control #: 25288
Permit # 20032390

Block: 65 Lot : 16.05 Qual:

Work Site : 8 POPPY LANE
HOWELL

Owner in Fee: BARR, STEPHEN L & KYNA D
Address: 8 POPPY LANE
HOWELL NJ 07731
Telephone: [redacted]

Agent/Contractor: BARR, STEPHEN L & KYNA D
Address: 8 POPPY LANE
HOWELL NJ 07731
Telephone: [redacted]

Lic. No./ Bldrs. Reg.No.: Federal Emp. No.:

Social Security No.:

Home Warranty No:

Type of Warranty Plan: [ ] State [ ] Private

Use Group: R-3

Maximum Live Load:

Construction Classification:

Maximum Occupancy Load:

Certificate Exp Date:

Description of Work/Use: REINSTATE BASEMENT RENO PERMIT 20020516 & DECK PERMIT #19981427

[ ] **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.

[X] **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.

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _or the owner will be subject to fine or order to vacate.

C. Phillips 11/5/03

Chet Phillips Construction Official

[ ] **CERTIFICATE OF CLEARANCE-LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17 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 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.

[ ] **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

Fees $0.00
Paid [X]Check No
Collected by JM

U.C.C 360 (rev. 3/96)

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

HOWELL TOWNSHIP
251 PREVENTORIUM ROAD
HOWELL NJ 07731
732-938-4500

CERTIFICATE

IDENTIFICATION

Date Issued: 10/24/2003
Control #: 17540
Permit # 20020516

Block: 65 Lot : 16.05 Qual:

Work Site : 8 POPPY LANE
HOWELL NJ 07731

Owner in Fee: BARR, STEPHEN L & KYNA D
Address: 8 POPPY LANE
HOWELL NJ 07731
Telephone: [redacted]

Agent/Contractor: BARR, STEPHEN L & KYNA D
Address: 8 POPPY LANE
HOWELL NJ 07731
Telephone: [redacted]

Lic. No./ Bldrs. Reg.No.: Federal Emp. No.:
Social Security No.:

Home Warranty No:
Type of Warranty Plan: [ ] State [ ] Private
Use Group: R-3
Maximum Live Load:
Construction Classification:
Maximum Occupancy Load:
Certificate Exp Date:
Description of Work/Use: BASEMENT FINISH

[X] **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.

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _or the owner will be subject to fine or order to vacate.

C. Phillips 11/5/03

Chet Phillips Construction Official
U.C.C 360 (rev. 3/96)

[ ] **CERTIFICATE OF CLEARANCE-LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17 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 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.

[ ] **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

Fees $20.00
Paid [X]Check No 1656
Collected by JM

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

APPLICATION FOR CERTIFICATE

Date Received
Date Permit Issued
Control #
Permit #
Date Issued

IDENTIFICATION

Block 65 Lot 16.05
Work Site Location 8 Poppy Lane Howell NJ 07731
Owner in Fee
Address same
Tele. [redacted]

Contractor
Address
Tele. ( )
Lic. No.
Federal Emp. No.
or Social Security No.

ACTION

☐ CERTIFICATE OF OCCUPANCY
☑ CERTIFICATE OF CONTINUED OCCUPANCY ☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF COMPLIANCE ☐ TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
USE GROUP _____ Previous _____ Current

FINAL COST OF CONSTRUCTION: $ 6,500.00
(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

NONE

If you are requesting a Temporary Certificate of Occupancy or Compliance, please explain why in the space below.

DESCRIPTION OF WORK/USE: FINISHED BASEMENT

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy or Compliance will be completed by the date on the Certificate.

SIGNED: Stephen L Bau
OWNER/AGENT

☑ Owner
☐ Agent

U.C.C. Form F-270B

HOWELL TOWNSHIP
251 PREVENTORIUM ROAD
HOWELL, NJ 07731
732 - 938-4500

Permit Number: 20020516
Permit Date: 03/15/2002
Update Number:
Control Number: 17540
Application Date: 01/23/2002

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 65 Lot : 16.05 Qualifier :

Work site Location: 8 POPPY LANE HOWELL NJ 07731
Owner In Fee: BARR, STEPHEN L & KYNA D
Address: 8 POPPY LANE
HOWELL NJ 07731
Telephone: [redacted]
Use Group(s): R-3

Contractor: BARR, STEPHEN L & KYNA D
Address: 8 POPPY LANE
HOWELL NJ 07731
Telephone: [redacted]
Lic. No. / Bldrs. Reg. No.:
Federal Emp. No.:

is hereby granted permission to perform the following work :

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

DESCRIPTION OF WORK:

BASEMENT FINISH

ESTIMATED COST OF WORK:

Cost of Construction:	0.00
Cost of Alteration:	2,865.00
Cost of Demolition:	0.00
Total Cost:	$2,865.00

PAYMENTS (Office Use Only)

Building	$42.00
Electrical	$36.00
Plumbing	
Fire Protection	$46.00
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	$2.00
Other Fees	
CO Fee	$20.00
CCO Fee	
Minimum Fee	
Total	**$146.00**
All Fees Waived :	No

Amount to be Paid: **$146.00**
Check Number: 1656
Check amount: $146.00

If construction does not commence within one year of date of issuance, or if construction ceases for a period of six months, this permit is void.

CM 3-15-02

Edward Mack — Date
Construction Official

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times

Collected by: JM
Receipt No:
Total Cash Amount
Total Check Amount $146.00
Total CC Amount
Grand Total $146.00

Note:

HOWELL TOWNSHIP
251 PREVENTORIUM ROAD
HOWELL, NJ 07731
732 - 938-4500

Permit Number: 20032390
Permit Date: 09/15/2003
Update Number:
Control Number: 25288
Application Date: 09/15/2003

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 65 Lot : 16.05 Qualifier :

Work site Location:	8 POPPY LANE HOWELL	Contractor:	BARR, STEPHEN L & KYNA D
Owner In Fee:	BARR, STEPHEN L & KYNA D	Address:	8 POPPY LANE
Address:	8 POPPY LANE		HOWELL NJ 07731
	HOWELL NJ 07731	Telephone:	[redacted]
Telephone:	[redacted]	Lic. No. / Bldrs. Reg. No.:	
Use Group(s):	R-3	Federal Emp. No.:	

is hereby granted permission to perform the following work :

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

DESCRIPTION OF WORK:

REINSTATE BASEMENT RENO PERMIT 20020516 & DECK PERMIT #19981427

ESTIMATED COST OF WORK:

Cost of Construction:	0.00
Cost of Alteration:	0.00
Cost of Demolition:	0.00
Total Cost:	$0.00

PAYMENTS (Office Use Only)

Building	$16.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	**$16.00**
All Fees Waived :	No

Amount to be Paid: **$16.00**

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

Chet Phillips — 9-15-03 (Date)
Construction Official

Cash amount: $16.00

Collected by: JM
Receipt No:
Total Cash Amount $16.00
Total Check Amount
Total CC Amount
Grand Total $16.00

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times

Note: FIELD COPY MUST BE ON SITE AT ALL TIMES WHEN INSPECTORS COME TO INSPECT!!!!!

Township of Howell
Preventorium Road
P.O. Box 580
Howell, NJ 07731

CONSTRUCTION PERMIT

Date Issued 9-15-03
Control # 25288
Permit # 20032390

IDENTIFICATION Block 65 Lot 16.05

Work Site Location 8 Poppy Lane Howell NJ 07731

Owner in Fee AAA

Address 8 Poppy Lane

Tel. ([redacted]

Contractor NONE

Address [redacted]

Tel. ([redacted]

Lic. No. or Bldrs. Reg. No.

Fed. Emp. No.

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: Basement Renovation (1) 20020516 (2) 19981427

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 $ 30K

Construction Official

9-15-03
Date

PAYMENTS (Office Use Only)

Building (1) 8.00 (2) 8.00
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee
Cert. of Occupancy
Other
Total 16.00
Check No.
Cash 16.00
Collected by

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

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

If you do not understand any of this information, please ask.

U.C.C. Form F-170D

Township of Howell
Preventorium Road
P.O. Box 580
Howell, NJ 07731

CONSTRUCTION PERMIT

Date Issued 9·15·03
Control # 25288
Permit # 20032390

IDENTIFICATION Block 65 Lot 16.05
Work Site Location 8 Karen Ln. Howell NJ 07731

Owner in Fee BARR
Address 8 Karen Lane

Tel. ([redacted]

Contractor NONE
Address [redacted]

Tel. ([redacted]
Lic. No. or Bldrs. Reg. No.
Fed. Emp. No.

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: Basement Renovation (1) 20020516 (2) 19981427

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 $ 30K

Construction Official

9·15·03
Date

PAYMENTS (Office Use Only)
Building (1) 8.00 (2) 8.00
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee
Cert. of Occupancy
Other
Total 16.00
Check No.
Cash 16.00
Collected by

(see reverse side)

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

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

If you do not understand any of this information, please ask.

Township of Howell
Preventorium Road
P.O. Box 580
Howell, NJ 07731

CONSTRUCTION PERMIT

Date Issued 3-15-02
Control # 12540
Permit # 20020516

IDENTIFICATION Block 65 Lot 16.05

Work Site Location 8 POPPY LANE
HOWELL, N.J. 07731

Owner in Fee STEPHEN L BAAR

Address 8 POPPY LANE
HOWELL, N.J. 07731

Tel. [redacted]

Contractor SELF

Address

Tel. ( )

Lic. No. or Bldrs. Reg. No.

Fed. Emp. No.

is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: Finish Basement

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 $ 2800.00

Construction Official

3-15-02
Date

2/2

PAYMENTS (Office Use Only)

Building	42.00
Electrical	56.00
Plumbing	
Fire Protection	46.00
Elevator Devices	
Other	
DCA Training Fee	2.00
Cert. of Occupancy	
Other	
Total	146.00
Check No.	1656
Cash	
Collected by	

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

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

If you do not understand any of this information, please ask.

Township of Howell
Preventorium Road
P.O. Box 580
Howell, NJ 07731

CONSTRUCTION PERMIT

Date Issued 3-15-02
Control # 12540
Permit # 20020516

IDENTIFICATION Block 15 Lot 1.01

Work Site Location 331

Owner in Fee

Address 331

Tel. [redacted]

Contractor

Address

Tel. ( )

Lic. No. or Bldrs. Reg. No.

Fed. Emp. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

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 $

Construction Official

3-15-02
Date

PAYMENTS (Office Use Only)

Building	42.00
Electrical	26.00
Plumbing	
Fire Protection	46.00
Elevator Devices	
Other	
DCA Training Fee	2.00
Cert. of Occupancy	
Other	
Total	146.00
Check No.	1871
Cash	
Collected by	

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

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

If you do not understand any of this information, please ask.

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

BUILDING SUBCODE TECHNICAL SECTION

Date Received 3-15-02
Date Issued
Control # 17540
Permit # 20020516

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

Block 65 Lot 16.05
Work Site Location 8 Poppy Lane
Howell, N.J.
Owner in Fee Stephen L Baer
Address 8 Poppy Lane
Howell, N.J. 07731
Tele. [redacted]
Contractor Owner
Address
Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	1/24/02	GB
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 9/23/03
Approved by: GB

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Foundation				
Slab				
Frame	4/30/02		5-2-02	CG
Barrier-Free				
Insulation			5/6/02	ECo
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final	9/15/03	9/15/03	9-17-03	RM
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present ____ Proposed R-3
Constr. Class Present ____ Proposed 5-B
No. of Stories
Height of Structure Ft.
Area — Largest Floor Sq. Ft.
New Bldg. Area/All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ 2315.00
3. Total (1+ 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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Finish Basement - frame, insulate, sheetrock ceiling + walls. Add electric to code. Install doors to 3 closets.

Remove

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence ____ Height (exceeds 6')
- [ ] Sign ____ Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [✓] Other Finish Basement

[ ] Demolition

FEE (Office Use Only)

$ 42 -

Administrative Surcharge	$
Minimum Fee	$ -
DCA Training Fee	$ 2
TOTAL FEE	$

U.C.C. F110 (rev. 3/98)
1 White = Inspector Copy
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3 Pink = Office Copy
4 Gold = Applicant Copy

4/30/02 Fireblocking not Done MG

1-15-03 CG ① Need to Reinstall handrail OK

② Louvered door or high/low grilles for furnace room

Reinstate permit Need Low

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

BUILDING SUBCODE 540 TECHNICAL SECTION

Date Received 3-15-02
Date Issued
Control # 17540
Permit # 20020516

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

Block 65 Lot 16.05
Work Site Location 8 POPPY LANE
HOWELL, N.J.
Owner in Fee STEPHEN L BARR
Address 8 POPPY LANE
HOWELL, N.J. 07731
Tele. ([redacted]
Contractor OWNER
Address
Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

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.

Signature

D: TECHNICAL SITE DATA

DESCRIPTION OF WORK

Finish Basement - frame, insulate, sheetrock ceiling & walls. Add electric to code. Install doors to 3 closets.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	1/24/02	GB
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed R-3
Constr. Class Present Proposed 5B
No. of Stories
Height of Structure Ft.
Area — Largest Floor Sq. Ft.
New Bldg. Area/All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Alteration $ 2315.00
3. Total (1+ 2) $

TYPE OF WORK:

[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [✓] Other Finish Basement

[ ] Demolition

FEE (Office Use Only)

$ 42.-

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$ 2
TOTAL FEE	$

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

BUILDING SUBCODE TECHNICAL SECTION

Date Received 3-15-02
Date Issued
Control # 17540
Permit # 20020516

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

Block _____ Lot 03

Work Site Location [illegible]
Howell, N.J.

Owner in Fee Stephen L Bare

Address [illegible]
Howell, N.J. 07731

Tele. ([redacted]

Contractor [illegible]

Address _____

Tele. (_____) _____ Fax (_____) _____

Lic. No. or Bldrs. Reg. No. _____

Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	1/24/02	GB
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed R-3
Constr. Class Present _____ Proposed 5B
No. of Stories _____
Height of Structure _____ Ft.
Area — Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Alteration $ 2315.00
3. Total (1+ 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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

[illegible]

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Fence _____ Height (exceeds 6')
  [ ] Sign _____ Sq. Ft.
  [ ] Pool
  [ ] Asbestos Abatement Subchapter 8
  [ ] Lead Haz. Abatement NJAC 5:17
  [ ] Other _____
[ ] Demolition

FEE (Office Use Only)

	$
	41
Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$ 2
TOTAL FEE	$

U.C.C. F110 (rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 3-15-02
Date Issued
Control # 17540
Permit # 20020516

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

Block 65 Lot 16.05
Work Site Location 8 Poppy Lane
Howell, N.J. 07731
Owner in Fee/Occupant Stephen L Barr
Address 8 Poppy Lane
Howell N.J. 07731
Tele. [redacted]
Contractor ~~Owner~~
Address ~~8 Poppy Lane~~ same
Tele. ( ) Fax ( )
Lic. No.
Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as R-3 Utility Co.
X Est. Cost of Elec. Work $ 180.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[/] Elec. Plans Approved
Date: 2/26/02
Approved by: C. Phillips

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough	4-30-02		5-2-02	
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			1-15-03	

Dates (Month/Day)

SUBCODE APPROVAL
[✓] CO [ ] CCO [ ] CA
Date: 1/15/03
Approved by: C. Phillips

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
18		Lighting Fixtures	
18		Receptacles	
2		Switches	
1		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
39		TOTAL NUMBERS	$ 36-
		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 $ $36-
Minimum Fee $
DCA Training Fee $
TOTAL 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.

Stephen L Barr
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

U.C.C. F120
(rev 3/98)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

4-30-02 PV

1) NO INSULATORS IN STEEL STUDS.

2) ROMEX NOT SUPPORTED OUT OF BOX'S.

3) REMOVE OUTLETS

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 3-15-02
Date Issued
Control # 17540
Permit # 20020516

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

Block 65 Lot 16.05
Work Site Location 8 Poppy Lane
Howell, N.J. 07731
Owner in Fee/Occupant Stephen L Barr
Address 8 Poppy Lane
Howell N.J. 07731
Tele. ([redacted]
Contractor ~~[illegible]~~
Address ~~[illegible]~~ Ally
Tele. (_____) _____ Fax (_____)
Lic. No.
Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as R-3 Utility Co. _____
X Est. Cost of Elec. Work $ 180.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[/] Fire [ ] Elevator
[/] Elec. Plans Approved
Date: 2/26/02
Approved by: C. Phillips

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

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.

Stephen L. Barr
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
16		Lighting Fixtures	
18		Receptacles	
2		Switches	
1		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
39		TOTAL NUMBERS	$ 36-
		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	$ $36-
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F120
(rev. 3/96)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received 3-15-02
Date Issued
Control # 17540
Permit # 20020516

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

Block _____ Lot _____
Work Site Location _____
_____
Owner in Fee/Occupant _____
Address _____
_____
Tele. (_____) _____
Contractor _____
Address _____
_____
Tele. (_____) _____ Fax (_____) _____
Lic. No. _____
Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
X Est. Cost of Elec. Work $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[/] Elec. Plans Approved
Date: 2/26/02
Approved by: _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

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's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
16		Lighting Fixtures
11		Receptacles
2		Switches
1		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		.....
29		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
		.....
		.....

FEE (Office Use Only)	
TOTAL NUMBERS	$ 36-
Administrative Surcharge	$ $ 36-
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F120 (rev 3/96)
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

FIRE SUBCODE TECHNICAL SECTION

Date Received 3-15-02
Date Issued
Control # 17540
Permit # 20020516

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

Block 65 Lot 16.05
Work Site Location 8 POPPY LANE
HOWELL N.J. 07731
Owner in Fee Stephen L. Baer
Address 8 POPPY LANE
HOWELL, N.J. 07731
Tele. ([redacted])
Contractor Owner
Address
Tele. ( ) Fax ( )
Lic. No.
Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other
Location:
X Total Cost of Fire Protection Work $ 5100

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe System
New [ ] Existing [ ]
Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[ ] Fire Plans Approved
Date: 1/24/02
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 10/9/03
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control	1/18/03	Need Contact Air Vents		RMS
TCO				
Final			10/9/03	RMS
Other				

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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Finish Basement

Water Supply Source
Method of Alarm/Suppression System Supervision

		FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combustible Liquid [ ] LPG [ ] LNG Capacity ___ Fuel ___		
Alarm Systems [ ] 110v Interconnected [ ] System	**NUMBER**	
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	1 smoke	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
Halon Suppression		
Other BASEMENT RENO		
Kitchen Hood Exhaust System		
Smoke Control System		
Gas or Oil Fired Appliances		46
Other COMB AIR - UNDER #604		

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

U.C.C. F140
(rev. 3/96)

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

FIRE SUBCODE TECHNICAL SECTION

Date Received 3-15-02
Date Issued
Control # 17540
Permit # 20020516

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

Block 65 Lot 16.05
Work Site Location 8 Poppy Lane
Howell N.J. 07731
Owner in Fee Stephen L Baab
Address 8 Poppy Lane
Howell, N.J. 07731
Tele. [redacted]
Contractor Owner
Address
Tele. ( ) Fax ( )
Lic. No.
Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other
Location:
X Total Cost of Fire Protection Work $ 5.00

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe System
New [ ] Existing [ ]
Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[ ] Fire Plans Approved
Date: 3/24/02
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Final				
Other				

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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Finish Basement

Water Supply Source
Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combustible Liquid [ ] LPG [ ] LNG Capacity ___ Fuel ___		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	1	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
Halon Suppression		
Other BASEMENT RENO		
Kitchen Hood Exhaust System		
Smoke Control System		
Gas [ ] or Oil [ ] Fired Appliances		46.
Other COMB AIR - UNIT HEAT		

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

U.C.C. F140
(rev. 3/98)

HOWELL TOWNSHIP

Agent : BARR, STEPHEN L & KYNA D
8 POPPY LANE
HOWELL, NJ-07731
Ph: (732) [redacted]

Contractor : BARR, STEPHEN L & KYNA D
POPPY LANE
HOWELL, NJ-732
Ph: [redacted]

Ref : Application #. 17540

Subject : Electrical Review for 8, POPPY LANE

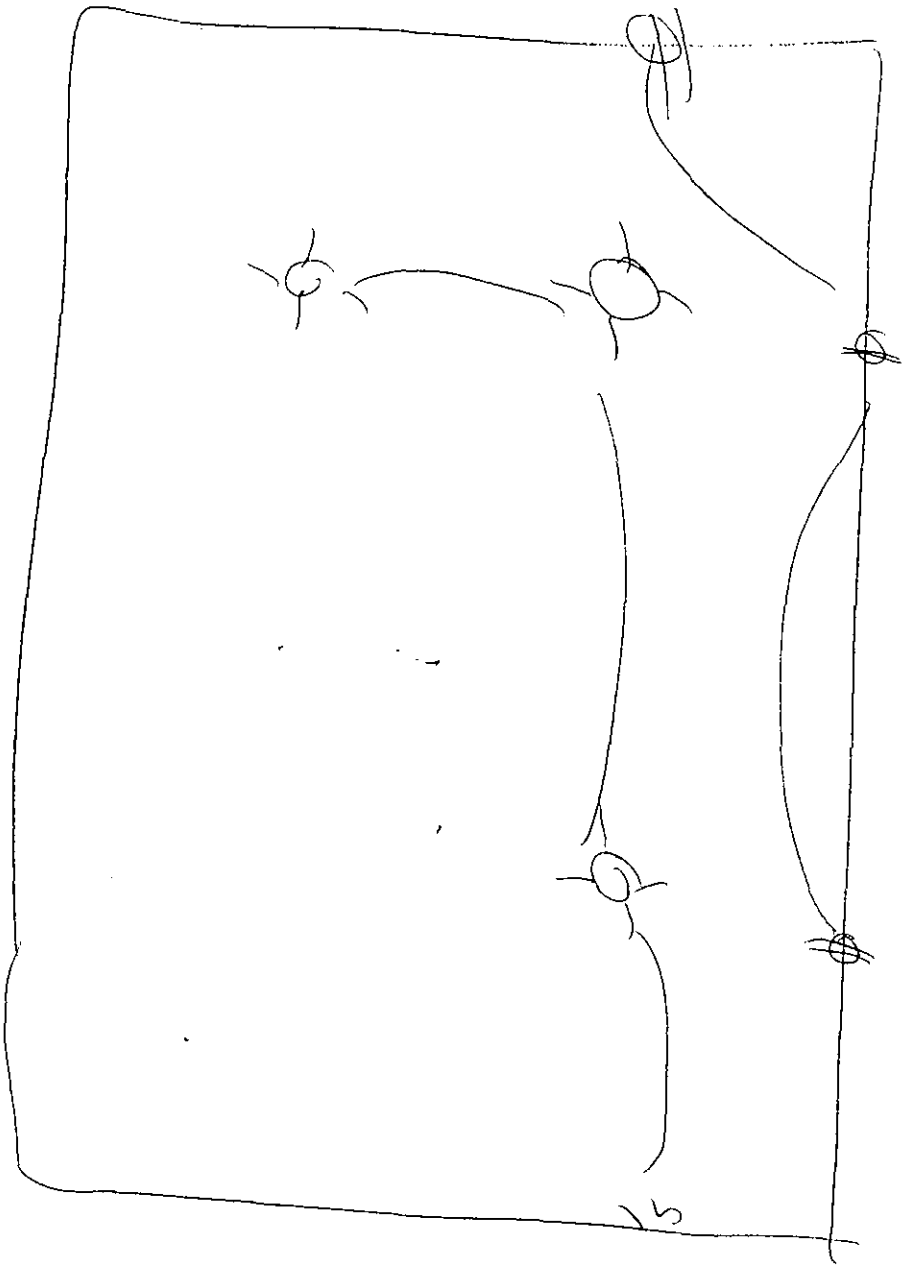
Date : January 24, 2002

Subcode Notes

1/24/02 1) Need to show all circuits on drawing. 2) Show size of wire being used. 3) List type of fixtures and wattages. 3) What is the size of existing service in amperes.

4

All wire is 14/2



HOWELL TOWNSHIP

Agent : BARR, STEPHEN L & KYNA D
8 POPPY LANE
HOWELL, NJ-07731
Ph: [redacted]

Contractor : BARR, STEPHEN L & KYNA D
POPPY LANE
HOWELL, NJ-732
Ph: [redacted]

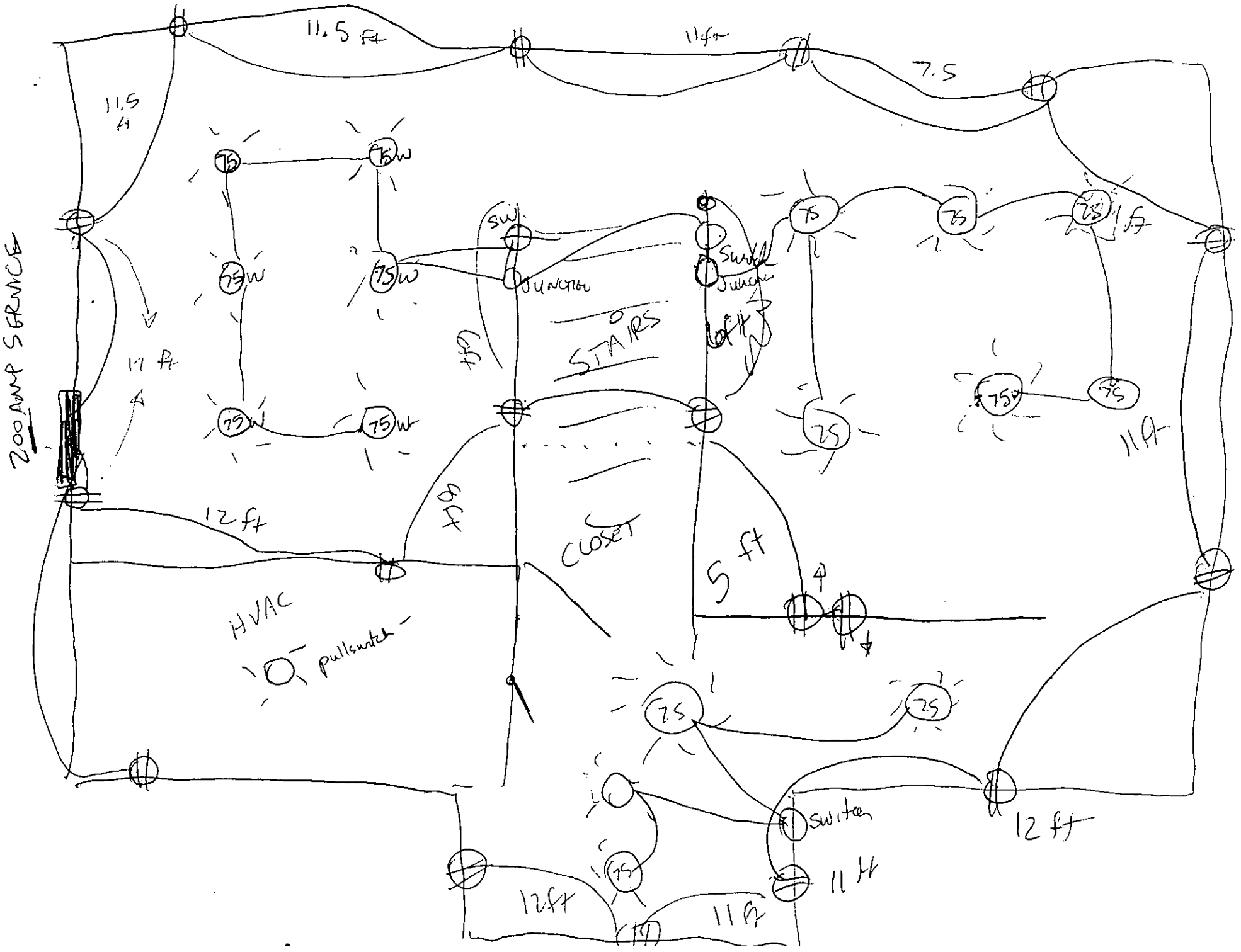
Ref : Application #. 17540

Subject : Electrical Review for 8, POPPY LANE

Date : January 24, 2002

Subcode Notes

1/24/02 1) Need to show all circuits on drawing. 2) Show size of wire being used. 3) List type of fixtures and wattages. 3) What is the size of existing service in amperes.


200 AMP SERVICE
11.5 ft
11 ft
7.5
11.5 ft
17 ft
12 ft
8 ft
8 ft
5 ft
11 ft
12 ft
11 ft
12 ft
11 ft
STAIRS
CLOSET
HVAC
pullswitch
switch
JUNCTION
75
75W
SW

TOWNSHIP OF HOWELL CONSTRUCTION DEPARTMENT

PLAN REVIEW CHECK LIST

NAME Barr BLOCK 65 LOT 16.05

ADDRESS 8 Poppy Ln ZONING RELEASE _____

DATE SUBMITTED 1-23-02 Bsmt Reno

DEVELOPMENT (If any) _____

	Reviewed By:	Approved	Comments
FIRE ✓	1/24/02	OK	
BUILDING ✓	1/24/02	OK	
ELECTRICAL ✓	CP	~~1/24/02~~ ~~Test~~ 2/26/02 OK	~~See sheet 3~~
PLUMBING			
MECHANICAL			
OTHER			
SEPTIC			

1240

RECEIVED JAN 23 2002

NOTIFIED

HOME OWNER ✓

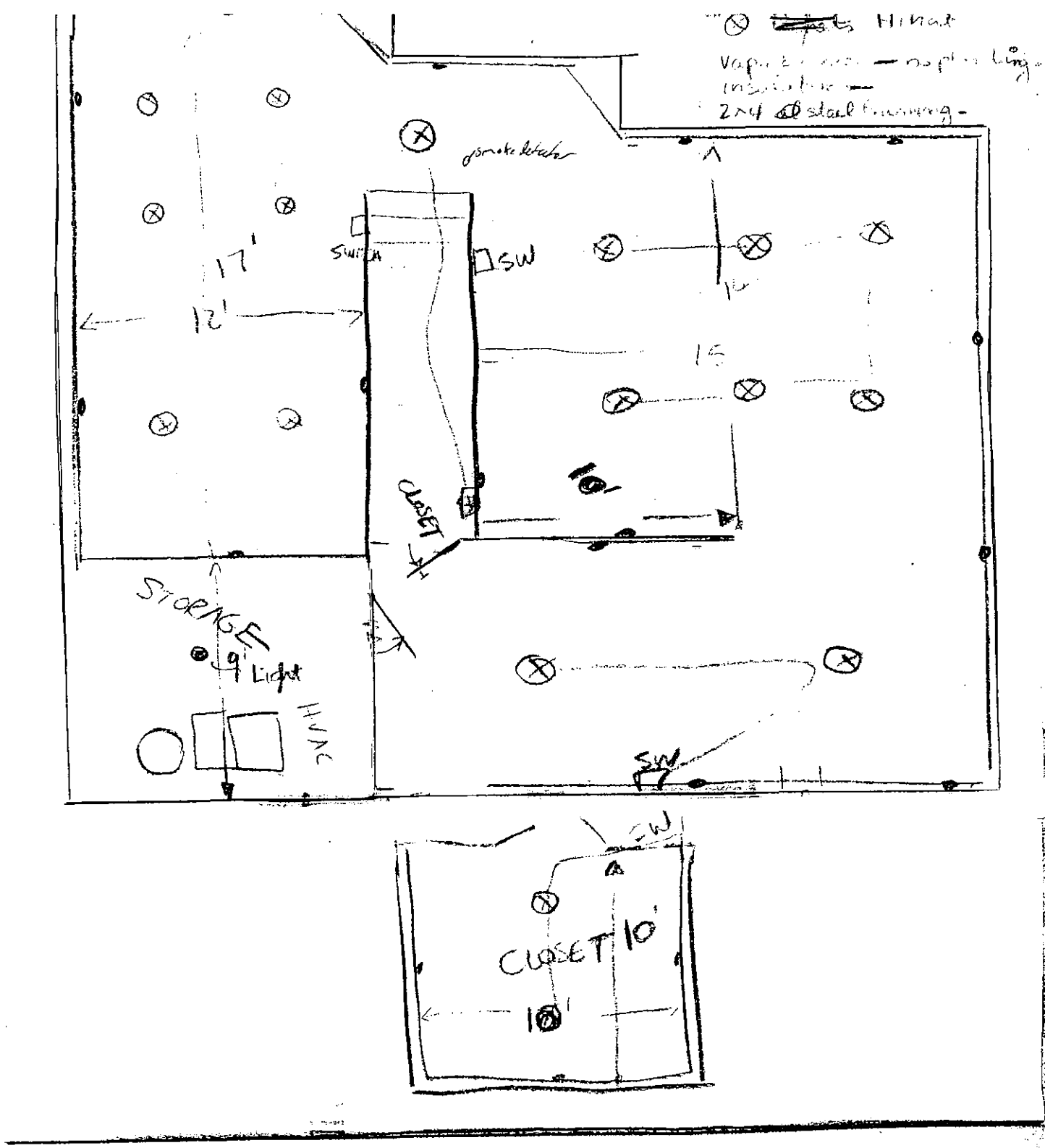
CONTRACTOR _____

DATE 1-28-02

TIME 4:00

RECEIVED FEB 25 2002

Resubmit


Vapor
insulation
2x4 steel framing
smoke detector
17'
12'
SWITCH
SW
15
10'
CLOSET
STORAGE
9' Light
HVAC
SW
SW
CLOSET 10'
10'