



CONSTRUCTION PERMIT

Date Issued

12-9-97

Control #

Permit #

9760

IDENTIFICATION Block 701 Lot 6

Work Site Location 10 Lloyd Ave

Contractor Hart + Telford

Address 4 Hampton St.

Owner in Fee SE. + P. Collieran

Newton NJ 07860

Address above

Tele. (973) 383-1421

Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Tele. (973) 948-0385

Federal Emp. No. _____

or Social Security No. _____

is hereby granted permission to perform the following work:

[] BUILDING [☒] PLUMBING [] OTHER _____

[] ELECTRICAL [] FIRE PROTECTION

[] ELEVATOR DEVICES

DESCRIPTION OF WORK:

boiler replacement

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 \$ 3175⁰⁰

William C. Kunkel

XXXXXXXXXXXX
U.C.C. Form F-170C

CONSTRUCTION OFFICIAL

(see reverse side)

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

PRO 108

Drinking Fountain

Washing Machine

Hose Bibb

Gas Piping

Fuel Oil Piping

Water heater

Steam Boiler

☒ Hot Water Boiler replacement

Sewer Pump

Interceptor / Separator

Backflow Preventor

Grease trap

Water Cooled A/C or Refrigeration Unit

Sewer Connection

Water service Connection

Gas Service Connection

Active Solar System

Other _____

Other _____

Estimated Cost of Plumbing Work \$ 3175⁰⁰

Signature: William C. Kunkel

Owner () Contractor (☒)

SUBCODE:

Plans: Required () _____

Approved () SUBCODE SIGNATURE

Date: _____

CONTRACTOR AFFIX SEAL >

☐ Alteration _____

☐ Asbestos Abatement _____

☐ Roofing _____

☐ Demolition _____

☐ Siding _____

☐ Elevator _____

☐ Other _____

☐ Other _____

Building Characteristics

Use Group

Present _____

Proposed _____

Constr. Class

Present _____

Proposed _____

No. Of Stories _____

Height of Structure _____

Area: Largest Floor _____

Total Bldg. Area All Floors _____

Volume Of Structure _____

Total Land Area Disturbed _____

Estimated cost of Building Work

New Building (1) \$ _____

Alteration (2) \$ _____

TOTAL (1 + 2) _____

Signature: _____

Owner () Contractor (☒)

SUBCODE:

Plans: Required () _____

Approved () _____

SUBCODE SIGNATURE



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

7-1-03
03 43

IDENTIFICATION Block # 701 Lot # 6
Work Site Location 10 Lloyd Ave Contractor CRAIG CALLANAN
Branchville NJ 07826 Address P.O.B # 162
Owner in Fee Frank Ostertag Stillwater N.J 07815
Address P.O.B 2896 Tel. (973) 383-3456
Branchville NJ 07826 Lic. No. or Bldrs. Reg. No.
Tel. (973) 948 9677 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 ☐ OTHER _____
(Subchapter 8 only)

DESCRIPTION OF WORK: new ROOF

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 \$ 3000.00

Harold Utter
Construction Official

June 27 03
Date

U.C.C. F170
(rev. 3/98)

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

PAYMENTS (Office Use Only)

Building 25.00
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA Training Fee 200
Cert. of Occupancy _____
Other _____
Total 27.00
Check No. # 1380
Cash _____
Collected by P. Hickman

(see reverse side)



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

6-19-01
01-28

IDENTIFICATION Block 701 Lot 6
Work Site Location 10 LLOYD Av.
BRANCHVILLE NJ 07826
Owner in Fee Frank R. Ostertag
Address 10 LLOYD Av.
Branchville NJ 07826
Tel. (973) 948-9677

Contractor CRAIG CALLAHAN POB 162
Address STILLWATER NJ 07875
Tel. (973) 383-3456
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 ☐ OTHER _____
(Subchapter 8 only)

DESCRIPTION OF WORK:

enclosed Entry Way

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 \$ 3000.00

Howard Zitter
Construction Official

06 19 01
Date

PAYMENTS (Office Use Only)

Building 24.00
Electrical 24.00
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other 4.00
DCA Training Fee 3.00
Cert. of Occupancy _____
Other _____
Total 55.00
Check No. 483
Cash _____
Collected by J. Richman

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)

Borough of Branchville, N.J.
5 Main Street, P.O. Box 840
Branchville, New Jersey 07826-0840

-ZONING PERMIT-

PERMIT NO 201-6-01 DATE 5-24-01
OWNER Frank Ostertag APPLICANT _____
ADDRESS OF PREMISES 10 Lloyd _____
BLOCK 201 LOT 6 ZONING DISTRICT R1 _____
DATE OF APPLICATION 5-24-01 TELEPHONE (978) 943-7677

THIS IS TO CERTIFY THAT THE ABOVE DESCRIBED PREMISES,
TOGETHER WITH ANY BUILDINGS THEREON, ARE USED OR PROPOSED
TO BE USED FOR OR AS:

Building front enclosure over existing porch.

Which is a

☒ use permitted by ordinance.

☐ use permitted by variance approved on _____ subject to any
conditions attached to the grant thereof.

☐ valid non-conforming use established by:
☐ the Zoning Board of Adjustment

☐ the undersigned Zoning Officer on the basis of evidence supplied by the
applicant as specified below or on the addendum hereto, along with a description of
the non-conforming use or conditions.

☐ use that is conforming but with a structure on the premises that is non-
conforming by reason of:

Special Conditions:

Cc: Tax Assessor
Construction Official


Arlene Fisher, Zoning Officer

Borough of Branchville
P.O. Box 840, 5 Main Street
Branchville NJ 07826
973-948-2118

CERTIFICATE
IDENTIFICATION

Date Issued: 04/13/2010
Control #: 291
Permit #: 20090059

Block: 701 Lot : 6 Qualification Code:
Work Site Location: 10 LLOYD AVE
BRANCHVILLE
Owner in Fee: BANSEMER, BRIAN
Address:
BRANCHVILLE NJ 07826
Telephone: 973 250-4214
Agent/Contractor: Gemini Contractors LLC
Address: 150 Rose Morrow Rd.
Wantage NJ 07461
Telephone: 973 875-4924
Lic. No./ Bldrs. Reg.No.: Federal Emp. No.:
Social Security No.:

Home Warranty No:
Type of Warranty Plan: [] State [] Private
Use Group: R-5
Maximum Live Load:
Construction Classification:
Maximum Occupancy Load:
Certificate Exp Date:
Description of Work/Use:
CONSTRUCTION OF PORCH ROOF.

Update Desc. of Wk/Use:

[] CERTIFICATE OF OCCUPANCY

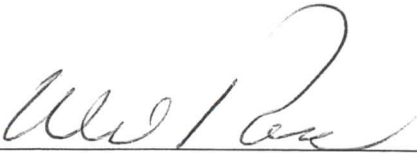
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[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 will be subject to fine or order to vacate:



Wes Powers 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[]Check No.: 5276

Collected by: WP

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTOR, NOTIFY THIS OFFICE.Block: 701 Lot: 6 Qualification Code:Work Site Location: 10 LLOYD AVEOwner DetailsName: BANSEMER, BRIANAddress: BRANCHVILLE NJ 07826Telephone: (973) 250-4214

E-mail:

Contractor DetailsContractor: Gemini Contractors LLCATTN: Bruce RussellAddress: 150 Rose Morrow Rd.Wantage NJ 07461-Telephone: (973) 875-4924 Fax:

E-mail:

Federal Emp. No:

Lic No. or Bldrs Reg. No.: 13VH04506300 Expiration Date:Home Improvement Registration No. or Exemption Reason: 13VH04506300**B. BUILDING CHARACTERISTICS**

Use Group Present: R-5

Proposed:

Constr. Class Present:

Proposed:

No. of Stories

Height of Structure

Ft.

Est. Cost of Bldg. work:

Area - Largest Floor

Sq. Ft.

1. New Building

0.00

New Bldg. Area/All Floors

Sq. Ft.

2. Rehabilitation

2,000.00

Volume of New Structure

Cu. Ft.

3. Demolition

0.00

Total Land Area Disturbed

Sq. Ft.

4. Total (1+2+3)

\$2,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

[] No Plans Required

[] All

[] Footing

[] Foundation

[] Frame

[] Other

Joint Plan Review Required:

[] Elec. [] Plumb. [] Fire [] Elev.

SUBCODE APPROVAL

[] CO [] CCO [X] CA

Date: 4/9/10Approved by: [Signature]**INSPECTIONS**

Dates(Month/Day)

Type:

Footing

Footing Bonding

Foundation

Slab

Frame

Truss Sys./Bracing

Barrier-Free

Insulation

Finishes - Base Layer

Finishes - Final

Energy

Mechanical

TCO

Other

Final

Barrier-Free

Failure

Failure

Approval

Initial

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***Construction of Porch Roof.***TYPE OF WORK:**

FEE (Office Use Only)

[] New Building

[] Addition

[X] Rehabilitation

[] Roofing

[] Siding

[] Fence _____ Height (exceeds 6')

[] Pylon Sign Sq. Ft.

[] Ground or Wall Sign Sq. Ft.

[] Pool

[] Retaining Wall 0.00 Sq. Ft.

[] Asbestos Abatement

[] Lead Haz. Abatement

[] Radon Remediation

[] Other 1:

[] Other 2:

[] Other 3:

[] Demolition

\$40.00

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee

Total Fee

\$50.00\$3.00\$53.00

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

Block: 701 Lot: 6 Qualification Code:

Work Site Location: 10 LLOYD AVE

Owner in Fee : BANSEMER, BRIAN

Address :
 BRANCHVILLE NJ 07826

Email:
Telephone: (973) 250-4214

Contractor: BANSEMER, BRIAN

Address: Telephone: (973) 2504214
 BRANCHVILLE NJ 07826 Fax:

E-mail:
Contractor License No.: Expiration Date: Federal Emp. No.:

Home Improvement Registration No. or Exemption Reason:

B. PLUMBING CHARACTERISTICS

Use Group: Present: R-5 Proposed:
Building Sewer Size: Public Sewer: Private Septic:
Water Service Size: Public Water: Private Well:
1. New Building: \$100.00 2. Rehabilitation: \$0.00
3. Demolition: \$0.00 Estimated Cost of Plumbing Work (1+2+3): \$100.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Date(Month/Day)			
	Type:	Failure	Failure	Approval	Initial
☐ No Plans Required	Slab	_____	_____	_____	_____
☐ Partial-Underslab Utilities Approved	Rough	_____	_____	_____	_____
Date: _____ Approved by: _____	Water	_____	_____	_____	_____
☐ Plumbing Plans Approved	Sewer	_____	_____	_____	_____
Date: _____ Approved by: _____	Fixtures	_____	_____	_____	_____
Joint Plan Review Required	Gas Equipment	_____	_____	_____	_____
☐ Bldg. ☐ Elec.	Gas Piping	_____	_____	_____	_____
☐ Fire ☐ Elevator	LPGas Tank	_____	_____	_____	_____
SUBCODE APPROVAL for PERMIT	Fuel Oil Piping	_____	_____	_____	_____
Date: _____	Solar	_____	_____	_____	_____
Approved by: _____	TCO	_____	_____	_____	_____
SUBCODE APPROVAL for CERTIFICATE	Final	_____	_____	_____	_____
☒ CO ☐ CCO ☐ CA	Chimney Cert.	_____	_____	_____	_____
Date: <u>11-5-14</u>	Other	_____	_____	_____	_____
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.

Applicant's Signature/Contractor's Seal and Signature
Print name here: _____
☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures)

DESCRIPTION OF WORK:
RELOCATE GAS PIPING STUB-OUT & TANK.

No.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
<u>1</u>	Gas Piping	<u>\$55.00</u>
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptors/Seperators	
	Backflow Preventer : Residential	
	Backflow Preventer : Commercial	
	Greasetrap	
	Air Conditioning	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other 1:	
	Other 2:	
	Other 3:	

Administrative Surcharge
Minimum Fee
State Permit Surcharge Fee
TOTAL FEE \$55.00

ELECTRICAL SUBCODE TECHNICAL SECTION

Borough of Branchville

Date Received: 06/19/2014
Control #: 603Date Issued: 06/24/2014
Permit #: 20140022**A. IDENTIFICATION APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.**Block: 701 Lot: 6 Qualification Code:Work Site Location: 10 LLOYD AVEOwner in Fee: BANSEMER, BRIAN

Address:

BRANCHVILLE NJ 07826

E-mail:

Telephone: (973) 250-4214Contractor: Bansmer ElectricATTN: Brian BansmerAddress: 10 Lloyd AveBranchville NJ 07826

E-mail:

Home Improvement Registration No. or Exemption Reason:

Contractor License No.: 17628 Exp Date:Federal Emp. No.: 463352449**B. ELECTRICAL CHARACTERISTICS**Use Group: Present R-5 Proposed _____☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

1. New Building \$500.00

2. Rehabilitation \$0.00

3. Demolition \$0.00

Est. Cost of Elec. Work (1+2+3) \$500.00

Job Summary (Office Use Only)**PLAN REVIEW**☐ No Plans Required☐ Partial-Underslab Utilities Approved

Date: _____ Approved by: _____

Electric Plans Approved

Date: _____ Approved by: _____

Joint Plan Review Required

☐ Building ☐ Plumbing☐ Fire ☐ Elevator**SUBCODE APPROVAL for PERMIT**

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE☒ CO ☐ CCO ☐ CADate: 11-5-14

Approved by: _____

INSPECTIONS

Type:

Rough

Barrier-Free

Trench

Temp Serv

Constr. Serv

TCO

Other

Service

Final

Barrier-Free

Temp Cut-in-Card Date Issued

Final Cut-in-Card Date Issue

Annual Pool Inspection

Date of Grounding and Bonding

Certification

Dates (Month/Day)

Failure

Failure

Approval

Initial

D. TECHNICAL SITE DATA

QTY.

SIZE

ITEMS

12

Lighting Fixtures

18

Receptacles

10

Switches

6

Detectors

Light Poles

Motor-Fract. HP

Emergency & Exit Lights

Communication Points

Alarm Devices/F.A.C. Panel

Other 1:

Other 2:

TOTAL NUMBER 46\$40.00

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 Htr./Air Handler

11.50

KW Baseboard Heat

\$15.00

HP Motors 1/+HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

KW Photovoltaic Systems

Other 3:

Other 4:

Other 5:

Other 6:

Other 7:

Other 8:

Other 9:

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

Print Name

☐ Licensed Electrical Contractor ☐ Certified Landscape Irrigation Contractor ☐ Exempt Applicant

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee

TOTAL FEE

\$55.00

FIRE SUBCODE TECHNICAL SECTION

Date Received 06/19/2014

Date Issued 06/24/2014

Control # 603

Permit # 20140022

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

Block: 701

Lot: 6

Qualification Code:

Work Site Location : 10 LLOYD AVE

Owner Details

Owner in Fee: BANSEMER, BRIAN

Address:

BRANCHVILLE NJ 07826

Telephone: (973) 250-4214

E-mail:

Contractor Details

Contractor:

Address:

Telephone: Fax:

E-mail:

Home Improvement Registration No. or Exemption Reason:

Fire/Security Alarm Contractor No.:

Federal Emp. No.:

Fire Protection Equipment, Installer No.:

License No.:

Fire Protection Equipment, Permit No.:

Exp. Date:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present R-5

Proposed

Fire Alarm System: ☐ New or ☐ Existing

Constr. Class: Present

Proposed

Location of Panel:

Heating Systems: ☐ New or ☐ Mod. to Existing

Fire Suppression/Standpipe System:

or ☐ Conversion or ☐ Replacement or ☐ HVAC☐ New or ☐ ExistingFuel Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar

Location of Main Control Valve:

☐ Other

Location:

Fuel Storage Tanks:

Type: ☐ Flammable or ☐ Combustible ☐ LPG ☐ LNG Capacity Fuel

1. New. \$0.00

2. Rehabilitation: \$0.00

3. Demolition: \$0.00

Total Cost of Fire Protection (1+2+3) Work: \$0.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required☐ Partial-Underslab Utilities Approved

Date: _____ Approved by: _____

Fire Protection Plans Approved

Date: _____ Approved by: _____

Joint Plan Review Required:

☐ Bldg. ☐ Elec.☐ Plumbing ☐ Elevator

SUBCODE APPROVAL for PERMIT

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

☒ CO ☐ CCO ☐ CA

Date: 11/5/14

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.

Sign here: _____ Print name here: _____

☐ Certified Contractor ☐ Exempt Applicant**D. TECHNICAL SITE DATA****DESCRIPTION OF WORK:**

CONSTRUCT A SINGLE CAR GARAGE & MUDROOM ADDITION.

Water Supply Source

Method of Alarm/Suppression System Supervision

Flammable/Combustible Tanks

Alarm Systems☐ System☐ 110v Interconnected☐ CO Detectors/110v

Alarm Devices(i.e., smoke,heat,pulls,water/flow)

Supervisory Devices(i.e.,tamper,low/high air)

Signaling Devices(i.e.,horns/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

CO2 Suppression

Foam Suppression

FM200 Suppression

Other:

Other Systems

Kitchen Hood Exhaust System

Smoke Control System

Fuel-Fired Appliances ☐ Gas ☐ Oil ☐ Solid

Fireplace Venting/Metal Chimney

Other:

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee

TOTAL FEE

\$65.00

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.Block: 701 Lot: 6 Qualification Code:Work Site Location: 10 LLOYD AVE**Owner Details**Name: BANSEMER, BRIANAddress: BRANCHVILLE NJ 07826Telephone: (973) 250-4214

E-mail:

Contractor DetailsContractor: Gemini Contractors LLCATTN: Bruce RussellAddress: 150 Rose Morrow Rd.

Wantage NJ 07461

Telephone: (973) 903-9212 Fax:

E-mail:

Federal Emp. No: 205979615Lic No. or Bldrs Reg. No.: 13VH04506300 Expiration Date:Home Improvement Registration No. or Exemption Reason: 13VH04506300**B. BUILDING CHARACTERISTICS**Use Group Present: R-5

Constr. Class Present:

No. of Stories

Height of Structure

Area - Largest Floor

New Bldg. Area/All Floors

Volume of New Structure

Total Land Area Disturbed

Max. Live Load

Max. Occupancy Load

Proposed:

Proposed:

If Industrialized Building

State Approved _____ HUD _____

Ft.

Sq. Ft.

Sq. Ft.

Cu. Ft.

Sq. Ft.

Est. Cost of Bldg. work:

1. New Building 15,000.00

2. Rehabilitation 0.00

3. Demolition 0.00

4. Total (1+2+3) \$15,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[] No Plans Required		
[] All		
[] Footings/Foundations		
[] Structural/Framework		
[] Exterior		
[] Interior		
[] Other		

Joint Plan Review Required:

[] Elec. [] Plumb. [] Fire [] Elev.

SUBCODE APPROVAL for PERMIT

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

[X] CO [] COO [] CA

Date: 11/5/14

Approved by: _____

INSPECTIONS

Dates(Month/Day)

Type:	Failure	Failure	Approval	Initial
Footings				<u>7/8/14</u>
Footings Bonding				<u>7/17/14</u>
Foundation				<u>8/16/14</u>
Slab				<u>7/29/14</u>
Frame				<u>8/26/14</u>
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes - Base Layer				
Finishes - Final				
Energy				
Mechanical				
TCO				
Other				
Final				<u>11/5/14</u>
Barrier-Free				

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.

Sign here: _____

Print name here: _____

D. TECHNICAL SITE DATA**DESCRIPTION OF WORK:**

CONSTRUCT A SINGLE CAR GARAGE & MUDROOM ADDITION.

TYPE OF WORK:**FEE (Office Use Only)**

[] New Building	
[X] Addition	\$146.00
[] Rehabilitation	
[] Roofing	
[] Siding	
[] Fence _____ Height (exceeds 6')	
[] Pylon Sign _____ Sq. Ft.	
[] Ground or Wall Sign _____ Sq. Ft.	
[] Pool	
[] Retaining Wall _____ Sq. Ft.	
[] Asbestos Abatement Subchapter 8	
[] Lead Haz. Abatement NJAC 5:17	
[] Radon Remediation	
[] Other 1:	
[] Other 2:	
[] Other 3:	
[] Demolition	

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee

TOTAL FEE

\$19.00

\$165.00

Borough of Branchville
34 Wantage Ave.
Branchville, NJ 07826
973-9484626

CERTIFICATE IDENTIFICATION

Date Issued: 03/08/2017
Control #: 778
Permit #: 20160058

Block: 701 Lot :6
Work Site Location: 10 LLOYD AVE
BRANCHVILLE
Owner in Fee: BANSEMER, BRIAN
Address: BRANCHVILLE NJ 07826
Telephone: 973 250-4214
Agent/Contractor: Chappelwood Plumbing Electrical HVAC Inc
Address: 708 Willow Drive
Newton NJ 07860
Telephone: 973 579-3322
Lic. No./ Bldrs. Reg.No.: 12194 Federal Emp. No.: 47-3225378
Social Security No.:

Home Warranty No:
Type of Warranty Plan: [] State [] Private
Use Group: R-5
Maximum Live Load:
Construction Classification:
Maximum Occupancy Load:
Certificate Exp Date:
Description of Work/Use:
Sewer Connection & septic abandonment

Update Desc. of Wk/Use:

[] 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 will be subject to fine or order to vacate:



Wes Powers 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[] Check No.: 6912
Collected by: wp

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

Block: 701 Lot: 6 Qualification Code:

Work Site Location: 10 LLOYD AVE

Owner in Fee : BANSEMER, BRIAN

Address :
BRANCHVILLE NJ 07826

Email:
Telephone: (973) 250-4214

Contractor: Chappelwood Plumbing Electrical HVAC Inc

ATTN:

Address: 708 Willow Drive
Newton NJ 07860

E-mail:
Contractor License No.: 12194 Expiration Date:
Federal Emp. No.: 47-3225378

Home Improvement Registration No. or Exemption Reason:

B. PLUMBING CHARACTERISTICS

Use Group: Present: R-5

Building Sewer Size: Public Sewer: Proposed:

Water Service Size: Public Water: Private Septic:

1. New Building: \$0.00 2. Rehabilitation: \$2,400.00
3. Demolition: \$0.00 Estimated Cost of Plumbing Work (1+2+3): \$2,400.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plans Required
☐ Partial-Underslab Utilities Approved
Date: _____ Approved by: _____
☐ Plumbing Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required
☐ Bldg. ☐ Elec.
☐ Fire ☐ Elevator
SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____
SUBCODE APPROVAL for CERTIFICATE
☐ CO ☐ CCO ☒ CA
Date: 12-26-16
Approved by: _____

INSPECTIONS	Date(Month/Day)			
	Type:	Failure	Failure	Approval
Slab				
Rough				
Water				
Sewer	<i>underground only 7/14/16</i>			
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				
Chimney Cert.				
Other				

D. TECHNICAL SITE DATA (List of all fixtures)

DESCRIPTION OF WORK:
Sewer Connection & septic abandonment

No.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptors/Seperators	
	Backflow Preventer : Residential	
	Backflow Preventer : Commercial	
	Greasetrap	
	Air Conditioning	
1	Sewer Connection	\$55.00
	Water Service Connection	
	Stacks	
	Other 1:	
	Other 2:	
	Other 3:	

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

Print name here: _____

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	\$5.00
TOTAL FEE	\$60.00

Borough of Branchville
34 Wantage Ave.
Branchville, NJ 07826
973-9484626

CERTIFICATE IDENTIFICATION

Date Issued: 04/13/2017
Control #: 1090
Permit #: 20170064

Block: 701 Lot :6
Work Site Location: 10 LLOYD AVE
BRANCHVILLE
Owner in Fee: BANSEMER, BRIAN
Address: BRANCHVILLE NJ 07826
Telephone: 973 250-4214
Agent/Contractor: BANSEMER, BRIAN
Address: BRANCHVILLE NJ 07826
Telephone: 973 250-4214
Lic. No./ Bldrs. Reg.No.: Federal Emp. No.:
Social Security No.:

Home Warranty No:
Type of Warranty Plan: [] State [] Private
Use Group: R-5
Maximum Live Load:
Construction Classification:
Maximum Occupancy Load:
Certificate Exp Date:
Description of Work/Use:
INSTALLATION OF NAT GAS PIPING

Update Desc. of Wk/Use:

[] CERTIFICATE OF OCCUPANCY

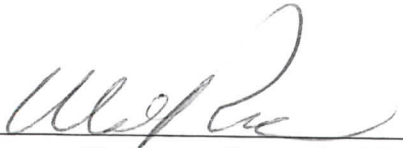
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[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

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Wes Powers 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[] Check No.: 272
Collected by: wp

PLUMBING SUBCODE TECHNICAL SECTION

Date Received: 03/31/2017 Date Issued: 04/04/2017
Control #: 1090 Permit #: 20170064

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

Block: 701 Lot: 6 Qualification Code:
Work Site Location: 10 LLOYD AVE
Owner in Fee : BANSEMER, BRIAN
Address : BRANCHVILLE NJ 07826

Email:
Telephone: (973) 250-4214
Contractor: BANSEMER, BRIAN
ATTN: BANSEMER, BRIAN
Address: BRANCHVILLE NJ 07826

E-mail:
Contractor License No.: Expiration Date: Federal Emp. No.:

Home Improvement Registration No. or Exemption Reason:

B. PLUMBING CHARACTERISTICS

Use Group: Present: R-5 Proposed:
Building Sewer Size: Public Sewer: Private Septic:
Water Service Size: Public Water: Private Well:
1. New Building: \$0.00 2. Rehabilitation: \$500.00
3. Demolition: \$0.00 Estimated Cost of Plumbing Work (1+2+3): \$500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plans Required
☐ Partial-Underslab Utilities Approved
Date: _____ Approved by: _____
☐ Plumbing Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required
☐ Bldg. ☐ Elec.
☐ Fire ☐ Elevator
SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____
SUBCODE APPROVAL for CERTIFICATE
☐ CO ☐ CCO ☒ CA
Date: 4-13-17
Approved by: _____

INSPECTIONS		Date(Month/Day)			
Type:	Failure	Failure	Approval	Initial	
Slab	_____	_____	_____	_____	
Rough	_____	_____	_____	_____	
Water	_____	_____	_____	_____	
Sewer	_____	_____	_____	_____	
Fixtures	_____	_____	_____	_____	
Gas Equipment	_____	_____	_____	_____	
Gas Piping	_____	_____	_____	_____	
LPGas Tank	_____	_____	_____	_____	
Fuel Oil Piping	_____	_____	_____	_____	
Solar	_____	_____	_____	_____	
TCO	_____	_____	_____	_____	
Final	_____	_____	_____	_____	
Chimney Cert.	_____	_____	_____	_____	
Other	_____	_____	_____	_____	

D. TECHNICAL SITE DATA (List of all fixtures)

DESCRIPTION OF WORK:
INSTALLATION OF NAT GAS PIPING

No.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	\$55.00
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptors/Seperators	
	Backflow Preventer : Residential	
	Backflow Preventer : Commercial	
	Greasetrap	
	Air Conditioning	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other 1:	
	Other 2:	
	Other 3:	

C. CERTIFICATION IN LIEU OF OATH

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
Print name here: _____
☐ Licensed Plumbing Contractor ☐ Exempt Applicant

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	\$1.00
TOTAL FEE	\$56.00

Borough of Branchville
34 Wantage Ave.
Branchville, NJ 07826
973-9484626

CERTIFICATE
IDENTIFICATION

Date Issued: 10/27/2017
Control #: 1209
Permit #: 20170178

Block: 701 Lot :6
Work Site Location: 10 LLOYD AVE
BRANCHVILLE
Owner in Fee: BANSEMER, BRIAN
Address: 10 LLOYD AVE.
BRANCHVILLE NJ 07826
Telephone: 973 250-4214
Agent/Contractor: Willco A/C P & H Inc.
Address: 15 Mill St.
Branchville NJ 07826
Telephone: 973 948-0579
Lic. No./ Bldrs. Reg.No.: 10758 Federal Emp. No.: 22-3364768
Social Security No.:

Home Warranty No:
Type of Warranty Plan: [] State [] Private
Use Group: R-5
Maximum Live Load:
Construction Classification:
Maximum Occupancy Load:
Certificate Exp Date:
Description of Work/Use:
INSTALLATION OF NAT. GAS BOILER AND INDIRECT WATER HEATER

Update Desc. of Wk/Use:

[] CERTIFICATE OF OCCUPANCY

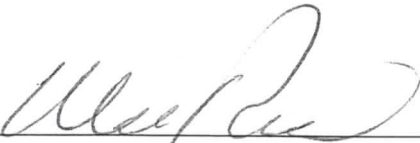
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[X] CERTIFICATE OF APPROVAL

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Wes Powers 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[]Check No.: 4475

Collected by: WP

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

Block: 701 Lot: 6 Qualification Code:

Work Site Location: 10 LLOYD AVE

Owner in Fee : BANSEMER, BRIAN

Address : 10 LLOYD AVE.
BRANCHVILLE NJ 07826

Email:
Telephone: (973) 250-4214
Contractor: Willco A/C P & H Inc.
ATTN: William Cowan Jr.
Address: 15 Mill St.
Branchville NJ 07826- Telephone: (973) 948-0579
Fax:

E-mail:
Contractor License No.: 10758 Expiration Date: Federal Emp. No.: 22-3364768

Home Improvement Registration No. or Exemption Reason: 13VH00527500

B. PLUMBING CHARACTERISTICS

Use Group: Present: R-5 Proposed:
Building Sewer Size: Public Sewer: Private Septic:
Water Service Size: Public Water: Private Well:
1. New Building: \$0.00 2. Rehabilitation: \$2,000.00
3. Demolition: \$0.00 Estimated Cost of Plumbing Work (1+2+3): \$2,000.00

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	INSPECTIONS
[] No Plans Required	Type: Failure Failure Approval Initial
[] Partial-Underslab Utilities Approved	Slab
Date: Approved by:	Rough
[] Plumbing Plans Approved	Water
Date: Approved by:	Sewer
Joint Plan Review Required	Fixtures
[] Bldg. [] Elec.	Gas Equipment
[] Fire [] Elevator	Gas Piping
SUBCODE APPROVAL for PERMIT	LP Gas Tank
Date:	Fuel Oil Piping
Approved by:	Solar
SUBCODE APPROVAL for CERTIFICATE	TCO
[] CO [] CCO [] CA	Final
Date: 10-26-17	Chimney Cert.
Approved by:	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 and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

Print name here: _____

[] Licensed Plumbing Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures)

DESCRIPTION OF WORK:
INSTALLATION OF NAT. GAS BOILER AND INDIRECT WATER HEATER

No.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater	\$10.00
	Fuel Oil Piping	
	Gas Piping	
	LP Gas Tank	
1	Steam Boiler	\$55.00
	Hot Water Boiler	
	Sewer Pump	
	Interceptors/Seperators	
1	Backflow Preventer : Residential	\$8.00
	Backflow Preventer : Commercial	
	Greasetrap	
	Air Conditioning	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other 1:	
	Other 2:	
	Other 3:	

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	\$4.00
TOTAL FEE	\$77.00

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

Block: 701 Lot: 6 Qualification Code:

Work Site Location : 10 LLOYD AVE

Owner Details

Owner in Fee: BANSEMER, BRIAN

Address: 10 LLOYD AVE.
BRANCHVILLE NJ 07826

Telephone: (973) 250-4214

E-mail:

Home Improvement Registration No. or Exemption Reason: 13VH00527500

Fire/Security Alarm Contractor No.:

Fire Protection Equipment, Installer No.:

Fire Protection Equipment, Permit No.:

Contractor Details

Contractor: Willco A/C P & H Inc.
ATTN: William Cowan Jr.

Address: 15 Mill St.
Branchville NJ 07826-

Telephone: (973) 948-0579 Fax:

E-mail:

Federal Emp. No.: 22-3364768

License No.:

Exp. Date:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present R-5 Proposed

Constr. Class: Present Proposed

Heating Systems: ☐ New or ☐ Mod. to Existing

or ☐ Conversion or ☐ Replacement or ☐ HVAC

Fuel Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
☐ Other

Location:

Fuel Storage Tanks:

Type: ☐ Flammable or ☐ Combustible ☐ LPG ☐ LNG Capacity Fuel

1. New: \$0.00 2. Rehabilitation: \$6,000.00

3. Demolition: \$0.00

Total Cost of Fire Protection (1+2+3) Work: \$6,000.00

Fire Alarm System: ☐ New or ☐ Existing

Location of Panel:

Fire Suppression/Standpipe System:

☐ New or ☐ Existing

Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

☐ Partial-Underslab Utilities Approved

Date: _____ Approved by: _____

Fire Protection Plans Approved

Date: _____ Approved by: _____

Joint Plan Review Required:

☐ Bldg. ☐ Elec.

☐ Plumbing ☐ Elevator

SUBCODE APPROVAL for PERMIT

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☒ CCA

Date: 10/26/17

Approved by: [Signature]

INSPECTIONS

Type: Failure Failure Approval Initial

Alarm System _____

Suppression Sys. _____

Standpipe _____

Fire Pump _____

Pre-Eng. System _____

Mechanical _____

Smoke Control _____

TCO _____

Flame/Combust Tanks _____

Fireplace Venting _____

Final _____

Other _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

INSTALLATION OF NAT. GAS BOILER AND INDIRECT WATER HEATER

Water Supply Source

Method of Alarm/Suppression System Supervision

Flammable/Combustible Tanks

Alarm Systems

☐ System

☐ 110v Interconnected

☐ CO Detectors/110v

Alarm Devices(i.e., smoke,heat,pulls,water/flow)

Supervisory Devices(i.e.,tamper,low/high air)

Signaling Devices(i.e.,horns/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

CO2 Suppression

Foam Suppression

FM200 Suppression

Other:

Other Systems

Kitchen Hood Exhaust System

Smoke Control System

Fuel-Fired Appliances ☒ Gas ☐ Oil ☐ Solid

Fireplace Venting/Metal Chimney

Other:

NUMBER

FEE (Office Use Only)

1 \$50.00

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee \$11.00

TOTAL FEE \$61.00

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.

Sign here: _____ Print name here: _____

☐ Certified Contractor ☐ Exempt Applicant