

BLOCK 35.70 LOT 107 QUALIFICATION CODE _____ ADDRESS (SITE) 61 Brent Dr. PERMIT NO. _____



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 61 Brent Dr. Howell NJ
2. Name of Owner in Fee: Garbois Tel. [REDACTED]
Address 5th Ave
street municipality zip code
3. Ownership in Fee: Public ☒ Private ☒
4. Principal Contractor: A. Portey Plumbing & Heating Tel. (732) 462-4484
Address 919 Route 33 Suite 28 Freehold NJ
License No. OR, if new home, Builder Reg. No. 9389 Exp. Date 06/07
Federal Employee No. [REDACTED] FAX: (732) 462-5319
5. Architect or Engineer _____ Tel. () _____
Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Christopher Portey
Tel. (732) 462-4484 FAX: (732) 462-5319

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. State Permit Surcharge Fee			
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area — Largest Floor _____ sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____
no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

OPTIONAL (for office use only)

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing	<u>1685</u>				<u>11/28/05</u>	<u>[Signature]</u>			
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. B									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units: All Units Income-restricted
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:

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
10. ☐ Swimming Pools, Spas and Hot Tubs

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

- A. ☐ I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

- B. ☐ I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

- C. ☐ I further certify that I will perform or supervise the following work:

C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical C.4. ☐ Plumbing

- D. ☐ I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

☒ Check if contractor.

Agent Name A. Bailey Plumbing & Heating
Address 919 Route 33 Suite 28
Freehold NJ
Telephone (732) 465-4484
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			X		X		X		
☐ Planning Board			X		X		X		
☐ Zoning Board			X		X		X		
☐ Sewer Authority			X		X		X		
☐ Water Authority			X		X		X		
☐ Police Department			X		X		X		
☐ Health Department			X		X		X		
☐ Soil Conservation			X		X		X		
☐ N.J. Department of Community Affairs			X		X		X		
☐ N.J. Department of Transportation			X		X		X		
☐ N.J. Department of Environmental Protection			X		X		X		
☐ Utility Dig No.			X		X		X		
☐			X		X		X		
☐			X		X		X		

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	_____
Electrical _____	Barrier Free _____	_____
Plumbing _____	Flood Hazard _____	_____
Fire Protection _____	As Built Elevation Cert. _____	_____
Mechanical _____	Other _____	_____

X. CERTIFICATES ISSUED (office use only)

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

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 with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval given.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in 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. Utility services, including septic.
4. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.

☐ Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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



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

CERTIFICATE

Date Issued: 09/08/2006
Control #: 36720
Permit #: 20053556

IDENTIFICATION

Block: 35.70 Lot: 107 Qualification Code: _____
Work Site Location: 61 BRENT DR
HOWELL NJ 07731

OWNER IN FEE: GADBOIS

Address: 61 BRENT DR
HOWELL NJ 07731

Telephone: _____

Agent/Contractor: A. BAILEY PLUMBING

Address: 919 HWY 33, SUITE 28
FREEHOLD NJ 07728

Telephone: 732 462-4484

Lic. No./ Bldgs. Reg.No.: _____

Federal Emp. No. _____

Social Security No.: _____

☐ 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 will be subject to fine or order to vacate:

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: REPLACE GAS WATER HEATER

☐ 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 _____

Chet Phillips Construction Official

C Phillips

9/11/06

Fees \$0.00

Paid ☒ Check No. 6075

Collected by: BF

MARLBORO TOWNSHIP CONSTRUCTION DEPT.

1979 Township Drive

Marlboro, NJ 07746

Joseph LaBruzza

Construction Official

CONSTRUCTION
PERMIT

Date Issued

Permit #

12-15-05
36720
20053556

IDENTIFICATION Block 35.70Lot 107

Qualification Code

Work Site Location 61 Brent Dr.

Contractor

A. Barlen Plumbing & Heating

Address

919 Route 33 Suite 58

Owner in Fee

Condo 1015

Address

Same

Tel.

(732) 462-4484

Lic. No. or Bldrs. Reg. No.

9339

Tel.

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:

Replaced 75 gallon gas
Water Heater

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

Date

U.C.C. F170 (rev. 01/04)

PAYMENTS (Office Use Only)

Building

Electrical

Plumbing

46

Fire Protection

Elevator Devices

Other

DCA State Permit Fee

2

Cert. of Occupancy

Other

Total

Check No.

Cash

Collected by

(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 with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval given.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

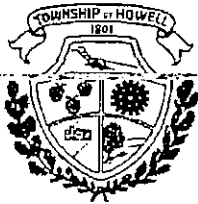
1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. Utility services, including septic.
4. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.

☐ Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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



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

Permit Number: 20053556
Permit Date: 12/15/2005
Update Number:
Control Number: 36720
Application Date: 11/23/2005

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 35.70	Lot : 107	Qualification Code:	
Work Site Location:	61 BRENT DR HOWELL NJ 07731	Contractor:	A. BAILEY PLUMBING
Owner In Fee:	GADBOIS	Address:	919 HWY 33, SUITE 28
Address:	61 BRENT DR		FREEHOLD NJ 07728
	HOWELL NJ 07731	Telephone:	(732) - 462-4484
Telephone:	0 -	Lic. No. / Bldrs. Reg. No.:	
Use Group(s):	R-5	Federal Emp. No.:	

is hereby granted permission to perform the following work :

☐ BUILDING	☒ PLUMBING	☐ DEMOLITION
☐ ELECTRICAL	☐ FIRE PROTECTION	☐ OTHER
☐ ELEVATOR DEVICES	☐ MECHANICAL	
☐ ASBESTOS ABATEMENT	☐ LEAD HAZARD ABATEMENT	

(Subchapter 8 only)

DESCRIPTION OF WORK:

REPLACE GAS WATER HEATER

ESTIMATED COST OF WORK:

Cost of Construction:	0.00
Cost of Rehabilitation:	1,685.00
Cost of Demolition:	0.00

Total Cost:	\$1,685.00
-------------	------------

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.

PAYMENTS (Office Use Only)

Building	
Electrical	
Plumbing	\$46.00
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$2.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$48.00
All Fees Waived:	No

Amount to be Paid:	\$48.00
Check Number:	6075
Check amount:	\$48.00

Chet Phillips
Construction Official

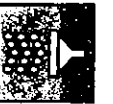
Date

Collected by:	BF
Receipt No:	
Total Cash Amount	
Total Check Amount	\$48.00
Total CC Amount	
Grand Total	\$48.00

Note:



PLUMBING SUBCODE TECHNICAL SECTION



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

Block 31-70 Lot 189 Qualification Code 189

Work Site Location 61 Bryant Dr.

Owner in Fee Goodell's

Address 317

Tel () 93339

Contractor At Bailey Plumbing & Heating

Address 919 Route 33 Suite 128

Fax 93339

Contractor License No. 93339

Federal Emp. No. 93339

B. PLUMBING CHARACTERISTICS

Use Group Present Public Sewer Proposed Private Septic

Building Sewer Size 16 Public Water 85.00 Private Well 00

Water Service Size 16 Est. Cost of Plumbing Work \$ 85.00

Est. Cost of Plumbing Work \$ 85.00

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 and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature Alan Hoard

Licensed Plumbing Contractor Alan Hoard [] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO. 36720

Fixture/Equipment 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

LP Gas Tank

Steam Boiler

Hot Water Boiler

Sewer Pump

Interceptor/Separator

Backflow Preventer

Greasetrap

Sewer Connection

Water Service Connection

Stacks

Other

Other

Other

Other

Other

Other

Other

Other

Other

Other

Other

Other

Other

Other

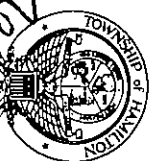
Other

Date Received 36720

Control # 20053502

Date Issued 20053502

Permit # 20053502



FEE (Office Use Only)

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

\$ 46

Replaced 75 gallon gas water heater
C.O. DETECTOR... YES
See # w/it

U.C.C. F130
(rev1/04)

1 White = OFFICE COPY
2 Canary = APPLICANT COPY
3 Tag = INSPECTOR COPY

CARBON MONOXIDE ALARMS

Block 35.70 Lot 107

WORKSITE ADDRESS 61 Brent Pl

CITY Huett

CERTIFYING INDIVIDUAL

NAME Dennis Mullan

ADDRESS _____

CITY _____

COMPANY

NAME A. BAILEY PLUMBING
& HEATING

CITY FREEHOLD, NJ

ZIP 07728

PHONE (732) 462-4484

Levels in dwelling 1 (2) 3

Dwelling is 1 or 2 family (circle one)

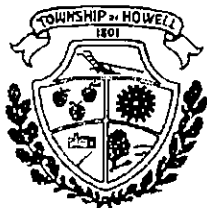
TYPE OF ALARMS: HARD-WIRED

PLUG IN

BATTERY OPERATED

COUNT 2

LOCATION 1st fl
1st + 2nd fls



**[X] NOTIFICATION OF
ABATEMENT**

**[] NOTIFICATION OF
SATISFACTION**

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

Date Issued: 09/12/2001
Control Number: 16020
Permit Number: 20011927
Date Permit Issued: 09/12/2001
Notice Date: 11/17/2004
Violation Number: 20040199/0

IDENTIFICATION

Work Site Location: 61 BRENT DR

Block: 35.70 Lot: 107

Owner In Fee: GADBOIS

Agent: GADBOIS

Address: 61 BRENT DRIVE

Address: 61 BRENT DRIVE

HOWELL NJ 077131

HOWELL NJ 077131

Telephone: [REDACTED]

Telephone: [REDACTED]

ACTION

Date Of Notice: 11/17/2004

Date Of Inspection: 11/16/2004

Compliance Due Date: 12/15/2004

VIOLATION

FAILURE TO OBTAIN CONSTRUCTION PERMIT FOR POOL HEATER

CLOSURE

This is to acknowledge that the above listed Owner/Agent has conformed with the requirements of the New Jersey Administrative Code, Title 5, Chapter 23, Subchapter 2, known as the Uniform Construction Code, in terminating all violations as stated above. Therefore, the Construction Code Enforcement Agency of the HOWELL TOWNSHIP find this matter concluded. Further, all outstanding penalties assessed in this matter have been abated.

RECEIPTS

Check Number:

Assessed Penalty:

Check Amount:

Date Paid:

ABATED

Cash Amount:

Collected By:

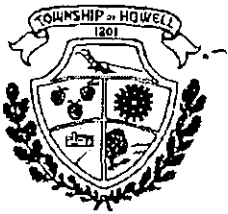
CC Amount:

Total Payment:

BY ORDER OF :

DATE :

Chet Phillips CONSTRUCTION OFFICIAL



NOTICE OF VIOLATION AND ORDER TO TERMINATE

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

Application Date: 9/12/2001
Control Number: 16020
Permit Number: 20011927
Date Permit Issued: 9/12/2001
Notice Date: 11/17/2004
Violation Number: 20040199/0

IDENTIFICATION

Work Site Location: 61 BRENT DR Block: 35.70 Lot: 107 Qual. Code: _____
Owner In Fee: GADBOIS Agent/ Contractor: GADBOIS
Address: 61 BRENT DRIVE Address: 61 BRENT DRIVE
HOWELL NJ 077131 HOWELL NJ 077131
Telephone: [REDACTED] Telephone: [REDACTED]

To: ☒ Owner ☐ Other: _____
☐ Agent/Contractor _____

Date Of Inspection: 11/16/2004 Date Of Notice: 11/17/2004 Compliance Due Date: 12/15/2004

ACTION

TAKE NOTICE that you have been found to be in violation of the State Uniform Construction Code Act and Regulation promulgated thereunder in that:

FAILURE TO OBTAIN CONSTRUCTION PERMIT FOR POOL HEATER

In violation of N.J.A.C. 5:23-2.14(a) WORK PERFORMED WITHOUT REQUIRED PERMIT

You are hereby **ORDERED** to terminate the said violations on or before 12/15/2004.

No Certificate of Occupancy or Approval will be issued unless the said violations are corrected.

Further, take **NOTICE** that failure to comply with this **ORDER** may result in the assessment of penalties of up to \$2,000.00 per week per violation, and a certificate of occupancy will *not* be issued until such penalty has been paid.

If you wish to contest the **ORDER**, you may request a hearing before the Construction Board of Appeals of the

Monmouth County Board Of Appeals

within 15 days of receipt of this **ORDER** as provided by N.J.A.C. 5:23A-2.1. The application to the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your address and name, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and the nature of your reliance on them. You may include a brief statement setting forth your position and the nature of relief sought by you. You may also append any documents that you consider useful.

The Fee for an Appeal is \$100.00 and should be forwarded with your application to the Construction Board Of Appeals Office at :
Hall Of Records Annex - 2nd Floor, 1 East Main St. Freehold NJ 07728-1255

If you have any questions concerning this matter, please call: 732-938-4500

Notice of Violation and Order to Terminate: _____ Date: _____
Chet Phillips Construction Official

Sent by Certified Mail # :

REPLACEMENT WATER HEATER
CHECK LIST

9/7/06

ADDRESS.....61- Brear DR..... BLK 3570 LOT 107

- ☐ Manufacture By Brands and White
☐ Serial Number BF6366402
☒ Gallons 75-gal

TYPE OF ENERGY

- ☒ Natural Gas
☐ L.P. Gas
☐ Electric
☐ Power Vent
- ☒ Shut off valve
☒ Jumper Wire
☒ Adapters not leaking
☒ Gas Cock
☐ Flexible Gas Connector
☒ Drip Leg on Gas
☒ Relief Valve Discharge to a Safe Location (6" A.F.F.)
☐ Emergency Pan (if supplied)
☐ Vacuum Breaker (if applicable)
☒ Flue Pipe Secured
☒ Clearance - 6" on single wall and 1" on double wall
☒ CO Detector
☒ Gas Detector Used

CHIMNEY CERTIFICATION FOR REPLACEMENT OF FUEL FIRED EQUIPMENT

BLOCK: 35.70 LOT: 107 PERMIT: _____

WORKSITE ADDRESS: _____

Certifying Individual (Print Name)

Name: Dennis Muller

Address _____

Street: _____

State: _____

Company

Name: BaileyCity: FreeholdZip: 919 Highway 33 • Suite 28
Freehold, New Jersey 07728

Phone # () _____

Check The Appropriate Box

Type of replacements:

- () Oil to Gas Conversion
☒ Gas Appliance Replacement
 () Oil to oil Replacement

() Other* (describe): _____

Existing vent/chimney:

- ☒ B label vent
 () L label vent
 () Masonry chimney-Tile lined
 () Flexible liner
 () Power vent/exhauster
 () Other (describe): _____

PLEASE SIGN ONE OF THE FOLLOWING CERTIFICATION STATEMENTS
CERTIFICATIONFor Oil to Gas Conversions:

I hereby certify that the chimney/vent is free and clear of obstruction and is substantially clean of residue from its previous use serving an oil appliance. I further certify that the chimney/vent is appropriately lined and sized for the appliance being installed.

Signature _____

Date _____

Oil to Oil or Gas to Gas Replacements:

I hereby certify that the existing chimney/vent is free and clear of obstruction. I further certify that the existing chimney/vent is appropriately lined and sized for the appliance being installed.

Signature Dennis MullerDate 11-11-05Certification Not Submitted:

I choose not to submit a certification. I understand that I will be required to be present for the inspection to remove and reinstall the chimney vent connector.

Signature _____

Date _____

Direct Vent Appliance:

No certification required:

Signature _____

Date _____

THIS FORM MUST BE RETURNED TO THE CODE ENFORCEMENT OFFICE PRIOR TO FINAL INSPECTION.**N.J. STATE LAW N.J.A.C. 13:45 a-16.2 FINAL INSPECTIONS ARE REQUIRED BEFORE FINAL PAYMENT IS MADE TO CONTRACTOR**

HOWELL TOWNSHIP
PLAN REVIEW/CHECK LIST

NAME GADBOIS BLOCK 35-70 LOT 107
ADDRESS 61 Brent ZONING RELEASE _____
DATE SUBMITTED 11-23-05
TYPE OF WORK _____ HWH

	REVIEWED BY	APPROVED	COMMENTS
FIRE			
BUILDING			
ELECTRICAL			
✓ PLUMBING	11/28/05 R	(O.K.)	
MECHANICAL			
OTHER			
SEPTIC			

RECEIVED
NOV 22 2005
BUILDING DEPT

36720