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. Propsed Work Site at: 61 Brent Dr. Howell NJ
2. Name of Owner in Fee: Gabbojs Tel. [redacted]
   Address _____ Howell
   street municipality zip code
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: A-Bartley Plumbing & Heating Tel. (732) 462-4484
   Address 919 Route 33 Suite 28 Freehold NJ
   License No. OR, if new home, Builder Reg. No. 9339 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 Bartley
   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

	(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

OPTIONAL (for office use only)

	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. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing	1685				11/28/05				
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
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

LDS HW-B 10602370

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) 462-4484

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	X	X	X	
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Department of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Department of Environmental Protection	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☐									
☐									

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. _____	_____	_____	_____	_____

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./ Bldrs. Reg.No.: Federal Emp. No [redacted]

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: REPLACE GAS WATER HEATER

[ ] **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:

C. Phillips 9/11/06

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. 6075
Collected by: BF

MARLBORO TOWNSHIP CONSTRUCTION DEPT.
1979 Township Drive
Marlboro, NJ 07746
Joseph LaBruzza
Construction Official

CONSTRUCTION PERMIT

Date Issued 12-15-05
Permit # 36720
302 3556

IDENTIFICATION Block 35.70 Lot 107 Qualification Code

Work Site Location 61 Brent Dr. Howell NJ

Owner in Fee Carbois

Address Same

Tel. [redacted]

Contractor A. Bailey Plumbing & Heating

Address 914 Route 33 Suite 58 Freehold NJ.

Tel. (732) 462-4484

Lic. No. or Bldrs. Reg. No. 9339

Is hereby granted permission to perform the following work:

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

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	48
Check No.	6875
Cash	
Collected by	BJ

(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
Owner In Fee: GADBOIS
Address: 61 BRENT DR
HOWELL NJ 07731
Telephone: () -
Use Group(s): R-5

Contractor: A. BAILEY PLUMBING
Address: 919 HWY 33, SUITE 28
FREEHOLD NJ 07728
Telephone: (732) - 462-4484
Lic. No. / Bldrs. Reg. No.:
Federal Emp. No. [redacted]

is hereby granted permission to perform the following work :

[ ]BUILDING [X]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.

Chet Phillips
Construction Official

Date

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

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

Note:

12-15-05

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # 36720
Date Issued
Permit # 20053556

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

Block 28-70 Lot 107 Qualification Code
Work Site Location 61 Bleu T Dr.
Hamilton NJ
Owner in Fee Gadbois
Address Same
Tel [redacted]
Contractor A. Bailey Plumbing & Heating
Address 919 Route 33 Suite 28
Freehold NJ
Tel (732) 462-4484 FAX (732) 462-5319
Contractor License No. 9339
Federal Emp. No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work $ 1685.00

JOB SUMMARY (Office Use Only) Replacement.

PLAN REVIEW
[✓] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 11/29/05
Approved by: Allan Haastel

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

INSPECTIONS

Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Chimney Final	Certification		OK	AL

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
[X] Licensed Plumbing Contractor [ ] Exempt Applicant

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

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 Replaced 75 gallon Gas Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	

Administrative Surcharge $	
Minimum Fee $	46
State Permit Surcharge Fee $	2
TOTAL FEE $	48

Replaced 75 gallon gas water Heater

C.O. DETECTOR. SEE H W/H

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

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

12-15-05

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # 36720
Date Issued
Permit # 20053556

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

Block 35-70 Lot 107 Qualification Code _____
Work Site Location 61 Brent Dr.
Howell NJ
Owner in Fee Gadbois
Address Same
Tel [redacted]
Contractor A. Bailey Plumbing & Heating
Address 919 Route 33 Suite 128
Freehold NJ
Tel (732) 462-4484 FAX (732) 462-5319
Contractor License No. 9339
Federal Emp. No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Est. Cost of Plumbing Work $ 1685.00

JOB SUMMARY (Office Use Only) Replacement.

PLAN REVIEW
[✓] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 11/29/05
Approved by: Allan Haastel

SUBCODE APPROVAL
[✓] CO [ ] CCO [ ] CA
Date: 9/21/06
Approved by: Allan Haastel

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment			9/7/06	
Gas Piping			9/7/06	
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO Chimney Final	Certification		OK 9/7/06	BB

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
[X] Licensed Plumbing Contractor [ ] Exempt Applicant

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

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 Replaced 75 gallon gas water heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	

Administrative Surcharge	$
Minimum Fee	$ 46
State Permit Surcharge Fee	$ 2
TOTAL FEE	$ 48

Replaced 75 gallon gas water heater

C.O. DETECTOR - YES
Ser # W/H

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 Bartley Dr

CITY Howell

CERTIFYING INDIVIDUAL

NAME Dennis Mccann

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 Hall

1st + 2nd FLS

[X] NOTIFICATION OF ABATEMENT

[ ] NOTIFICATION OF SATISFACTION

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

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

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

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

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

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: [X] **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 Bear DR BLK 3520 LOT 107

- ☐ Manufacture By Bradford White
- ☐ Serial Number BF6366602
- ☑ 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

Construction Code Department

CHIMNEY CERTIFICATION FOR REPLACEMENT OF FUEL FIRED EQUIPMENT

BLOCK: 35.70 LOT: 107 PERMIT: _____

WORKSITE ADDRESS: _____

Certifying Individual (Print Name)

Name: Dennis Mullin

Address

Street: _____

State: _____

Company

Name: _____

City: _____

Zip: _____

Phone # ( ) _____

Check The Appropriate Box

Type of replacements:

( ) Oil to Gas Conversion
(X) Gas Appliance Replacement
( ) Oil to oil Replacement

( ) Other* (describe): _____

Existing vent/chimney:

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

PLEASE SIGN ONE OF THE FOLLOWING CERTIFICATION STATMENTS

CERTIFICATION

For Oil to Gas Conversions:

I hereby certify that the chimny/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.

Dennis Mullin 11-11-05
Signature Date

Certification 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 HW H

	REVIEWED BY	APPROVED	COMMENTS
FIRE			
BUILDING			
ELECTRICAL			
PLUMBING ✓	11/28/05 R.	(0.1)	
MECHANICAL			
OTHER			RECEIVED NOV 22 2005 BUILDING DEPT
SEPTIC			

36720