BUILDING SUBCODE
TECHNICAL SECTION

Date Received: 01/10/2022
Control #: 22-000052

Date Issued: 04/07/2022
Permit #: B22-295

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

Block/Lot: 03702-00011 _____Qualification Code:

Work Site Location: 401 GLOUCESTER Street ,

Owner in Fee: HABER, GREG & YONINA

Tel. (917) 613-9639

Address 401 GLOUCESTER Street ,

Contractor: G&A DRYWALL, LLC _____Tel. (212) 991-8213

Address: 16 SHERWOOD LANE ____e-mail GADRYWALL@YAHOO.COM

Contractor License No. or Builder Registration No. 13VH10916100 Exp. Date

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

Federal Emp. ID No. FAX:

JOB SUMMARY (Office Use Only)

Plan Review	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator		
SUBCODE APPROVAL for Permit		
Date: 02/01/2022		
Aproved By: Walter Deptuch		
SUBCODE APPROVAL for CERTIFICATE		
[__] CO __[__] CCO __[__] CA		
Date:_____		
Approved By:_____		

INSPECTIONS		Dates	(Month/ Day)	
Type	Failure	Failure	Approval	Initial
Footing	_____	_____	_____	_____
Footing Bonding	_____	_____	_____	_____
Slab	_____	_____	_____	_____
Frame	_____	_____	_____	_____
Truss Sys./Bracing	_____	_____	_____	_____
Barrier-Free	_____	_____	_____	_____
Insulation	_____	_____	_____	_____
Finishes - Base Layer	_____	_____	_____	_____
Finishes - Final	_____	_____	_____	_____
Energy	_____	_____	_____	_____
Mechanical	_____	_____	_____	_____
TCO	_____	_____	_____	_____
Other	_____	_____	_____	_____
Final	_____	_____	_____	_____
Barrier-Free	_____	_____	_____	_____

B. BUILDING CHARACTERISTICS

Use Group Present: Proposed:
Height of Structure: ft.
Area - Largest Floor: sq. ft.
New Bldg. Area All Floors: sq. ft.
Volume of New Structure: cu. ft.
Max. Live Load:
Max. Occupancy Load:

Constr. Class Present: _____ Proposed:
If Industrialized Building:
_____State Approved: ☐ _____HUD: ☐
___Est. Cost of Bldg. Work:

___1. New Bldg.	$0.00
___2. Rehabilitation	$4,000.00
___3. Total (1 + 2)	$4,000.00

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: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
BASEMENT, DRIVEWAY AND DRAINAGE

TYPE OF WORK	FEE (Official Use Only)
☐ New Building	0.00
☐ Addition	0.00
☑ Rehabilitation	80.00
☐ Roofing	0.00
☐ Siding	0.00
☐ Fence Height (exceeds 6")	0.00
☐ Sign Sq. Ft.	0.00
☐ Pool	0.00
☐ Retaining Wall Sq. Ft.	0.00
☐ Asbestos Subchapter 8	0.00
☐ Lead Haz. Abatement NJAC 5:17	0.00
☐ Radon Remediation	0.00
☐ Other	7.60
☑ Demolition	0.00

Administrative Surcharge	$0.00
Minimum Fee	$0.00
State Permit Surcharge Fee	$0.00
TOTAL FEE	$87.60

U.C.C. F110 (rev. 11/09)_____
Internet version_____

Applicant: when submitting this from to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.