BLOCK 615 LOT 25 QUALIFICATION CODE _____ ADDRESS (SITE) 158 Pinehurst Rd. PERMIT NO. 18-2008

CONSTRUCTION PERMIT APPLICATION

C18-002245

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

I. IDENTIFICATION

1. Proposed Work Site at: 158 Pine Hurst Rd.
2. Name of Owner in Fee: US Bank NA master trust CSF9
   Tel. (888) 572 6980 e-mail _____
   Address 2711 N. Haskell Ave ste 1200, Dallas TX 75204
   street municipality zip code
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Amerimax Residential Services Tel. (732) 582-9184
   Address 3630 Peachtree Rd. e-mail _____
   Atlanta, GA 30326
   License No. OR, if new home, Builder Reg. No. 13VH09095800 Exp. Date 3/31/19
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 46 3391878 FAX: (_____) _____
5. Architect or Engineer Brian Berzinskis Contact _____
   Address 231 Hwy 71 Manasquan NJ e-mail _____
   Tel. (732) 528-5850 FAX: (_____) _____
6. Responsible Person in Charge once Work has Begun Stephen Pandy
   Tel. (732) 582-9184 FAX: (_____) _____

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 750-	+A	+B
2.	Electrical		225-	
3.	Plumbing		198-	
4.	Fire Protection		85-	
5.	Elevator Devices		125-	300-
6.	Subtotal Mech			
7.	Less 20% for State Plan Review	$		
8.	Subtotal	$		
9.	State Permit Surcharge Fee	28-	31-	10-
10.	Subtotal	2 $ 778-		
11.	Cert. of Occupancy	125-		
12.	Other			
13.	TOTAL	$ 978-	664-	310-

+C 150 — 3 — 153

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.	Max. Live Load	
7.	Max. Occupancy Load	
8.	If Industrialized Building: State Approved ____ HUD ____	
9.	Total Land Area Disturbed sq. ft.	
10.	Flood Hazard Zone	
11.	Base Flood Elevation ft.	
12.	Wetlands yes ____ no ____	

IIa. PROPOSED WORK

- ☐ Minor Work
- ☑ Repair
- ☐ Asbestos Abat. -Subch. 8
- ☐ New Building
- ☐ Alteration
- ☐ Lead Hazard Abatement
- ☐ Addition
- ☐ Renovation
- ☐ Radon Remediation
- ☐ Demolition
- ☐ Reconstruction
- ☐ Annual Permit

Alteration Deck & Gutter — Reconstruction

IIb. SUBCODES

(Check all that apply)

FOR OFFICE USE ONLY (Optional) HE 4-2-19

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☑ Building	15,000.00	CW	6/13/18	6-29-18	7-9-18	SE			
☑ Electrical					10/24/18	PE			
☐ Plumbing									
☐ Fire Protection				10/5/18		HO	10/26/18		M
☐ Elevator		Engy Exempt			10/26/18	ECC			
TOTAL COST	15,000.00								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____ ____
   Gained, Rental ____ ____
   Lost, Sale ____ ____
   Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____
Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

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(f)1.ix:

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 Ameritrust Residential Services

Address 3630 Peachtree Rd. St. Atlanta GA 30326

Telephone 770-382-9184

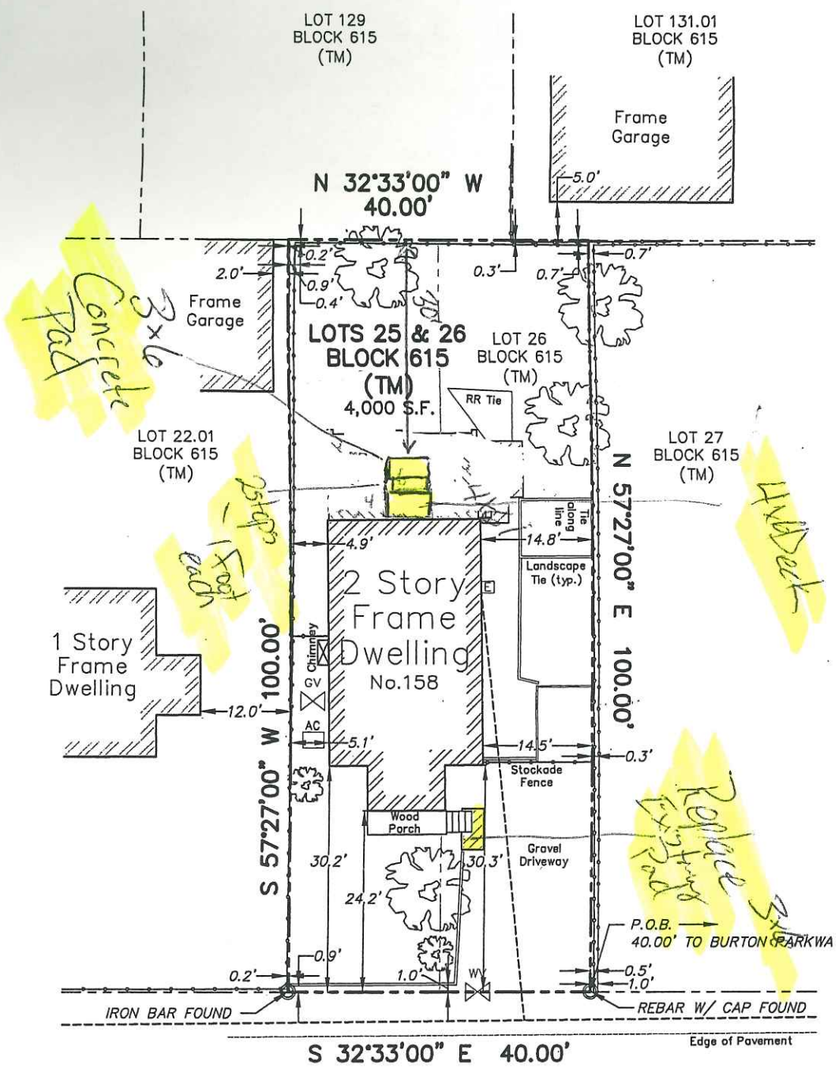
Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

Zoning Review
Approval
By: Decu
Date: 6-22-18 Initials

DEED



Concrete Pad 3'x6'

2 Step - 1 Foot each

Hot Deck

Replace Existing Pad 3'x6'

PINEHURST ROAD

40' ROW

This survey certified to:
Ameritrust Residential Services

This survey references:
Deed Book 16730 Page 857

Notes:
Field Survey Performed on 05/23/18
Subject to documents of record
Survey performed without the benefit of a complete title search and subject to municipal restrictions, easements of record and other facts that a title search may disclose.

GRAPHIC SCALE
20 0 10 20 40
1 inch = 20 ft.

I declare that this plan is based on actual field survey performed by *Lakeland Surveying, Inc.*, under my direct supervision, in accordance with N.J.A.C. 13:40-5.1 and to the best of my professional knowledge, information and belief, correctly represents the conditions found on the date of the field survey, except such easements, if any, below the surface of the lands not visible. This declaration is given solely to the above named parties for this transaction only and is not transferrable. Survey is valid only if print has original raised seal of the undersigned professional.

Lakeland Surveying
117 Hibernia Avenue | Rockaway | NJ
Ph: (973) 625-5670 | Fx: (973) 625-4121
www.LakelandSurveying.com
Certificate of Authorization #24GA28090000

PROJECT NUMBER 181599

SCALE	DATE
1"=20'	05/29/18

FIELD:	DWN BY:	CHECKED:
JRS	CMB	MJC

SURVEY OF PROPERTY
Tax Lot 25 - Block 615
158 Pinehurst Road, Township of Brick
Ocean County, New Jersey

MARC J. CIFONE, Professional Land Surveyor N.J. Lic. No 24GS04132900
JEFFREY O. MALES, Professional Land Surveyor N.J. Lic. No 24GS03008700

CONSTRUCTION PERMIT

Date Issued 7/19/18
Control # C-18-002245
Permit # 18-2008

IDENTIFICATION Block: 615 Lot: 25 Qualifier
Work Site Location: 158 PINEHURST RD. Brick Township, NJ
Owner in Fee: US BANK TRUST NA
13801 WIRELESS WAY OKLAHOMA CITY OK 73134
Telephone: (888) 572-6950

Contractor: AMERITRUST RESIDENTIAL SERVICE LLC
Address: 3630 PEACHTREE RD ATLANTA GA 30326
Telephone: (404) 382-7357
Lic. No. or Bldrs. Reg. No.: 13VH09095800 13VH09095800
Federal Employee. No.: 46339187

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ALTERATION - RESIDENTIAL, RECONSTRUCTION ...REMOVE & REPLACE DECK, STAIRS & LANDINGS; REPLACE ENTIRE INTERIOR 1st FLOOR SYSTEM; SHEETROCK & INSULATION

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 $15,000

D. Neuman Jr. — Construction Official
7/12/18 — Date

PAYMENTS (Office Use Only)

Building	$750
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$28
CO Fee	$125.00
Other	$0
Total	903
Check No.	
Cash	$0
Credit	$0
Collected By	

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

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 the 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 granted.

- [x] 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 cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
  2. Foundations and all walls up to grade level prior to back filling.
  3. All structural framing, 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.
  4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

  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:

- [x] 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".

- [x] A complete copy of released plans must be kept on the job site.

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # TA-7/19/18

Date Issued / Permit # 18-2008

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

Block 615 Lot 25 Qualification Code _____

Work Site Location 158 Pinehurst Rd, Bnck

Owner in Fee: US Bank NA Master Trust

Tel. (888) 572 6950 e-mail _____

Address 2711 N. Haskell Ave. Ste. 1700 Dallas TX 75204
street municipality zip code

Contractor: Amerimust Residential Tel. (770) 991 5093

Address 3630 Peachtree Rd. Ste. 1500 e-mail _____
Atlanta GA 30326

Contractor License No. or Builder Registration No. 13VH09095800 Exp. Date 3/31/19

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

Federal Emp. ID No. 46 339 1878 FAX: (_____) _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[ ] All	9/15	JS
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 9/11/18
Approved by: JCH.

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

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Footing Bonding				
Foundation				
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 _____

No. of Stories _____

Height of Structure _____ ft.

Area — Largest Floor _____ sq. ft.

New Bldg. Area/All Floors _____ sq. ft.

Volume of New Structure _____ cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $ _____
2. Rehabilitation $ _____
3. Total (1+ 2) $ 15,000.00

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: Deanna Loiacono

Print name here: Deanna Loiacono

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

remove rear deck & replace with landing & stairs, Put concrete landing at bottom of front stairs
repair structe floor new girders & footings

Insulation & sheet rock lower level

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$ _____

Administrative Surcharge $ _____
Minimum Fee $ _____
State Permit Surcharge Fee $ _____
TOTAL FEE $ _____

U.C.C. F110
(rev. 11/09)

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

PERMIT UPDATE

Date Update Issued 11/1/18
Control # C-18-002245+A
Permit # 18-2008+A

IDENTIFICATION Block: 615 Lot: 25 Qualifier

Work Site Location: 158 PINEHURST RD. Brick Township, NJ

Owner in Fee: US BANK TRUST NA
13801 WIRELESS WAY OKLAHOMA CITY OK 73134

Telephone: (888) 572-6950

Contractor: AMERITRUST RESIDENTIAL SERVICE LLC
Address: 2911 RT. 88 STE. 7 PT PLEASANT NJ 08742

Telephone: (404) 382-7357
Lic. No. or Bldrs. Reg. No. 13VH09095800 13VH09095800
Federal Employee. No. 46339167

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☑ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☑ OTHER

DESCRIPTION OF WORK:

ALTERATION - RESIDENTIAL, RECONSTRUCTION ...BALANCE OF SUBCODE REVIEW, HVAC

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 $16,300

D. Neumark / for 10/30/18

Construction Official — Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$225
Plumbing	$198
Fire Protection	$85
Elevator Devices	$0
Other Dan	$125.00
DCA Training Fee	$31
CO Fee	
Other	$0
Total	$664
Check No. 1618	
Cash	$0
Credit	$0
Collected By TJ	

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

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 the 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 granted.

☑ 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 cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, 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.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

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.

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Update 10/2/18

Date Received 11/1/18
Control #
Date Issued
Permit # 18-20087+A

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

Block 615 Lot 25 Qualification Code

Work Site Location 158 PINEHURST RD BRICK

Owner in Fee: US Bank Trust NA

Tel. 888 572-6950 e-mail

Address 2911 N Haskell Ave Ste 1700 Dallas TX 75204
street municipality zip code

Contractor: Hi-Tech Security & Electric Inc. Tel. (732) 800-3030

Address 1108 Industrial Parkway e-mail waltergabela@yahoo.com
Brick NJ 08724

Contractor License No. EC 14404 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223568295 FAX: (732) 451-2625

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 6,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[✓] Electric Plans Approved
Date: 10/24/18 Approved by: PJC

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 10/24/18
Approved by:

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
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 Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

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 sign/Contractor sign and seal here:

Print name here: Walter Gabela

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: FIRST FL REWIRE - NEW 100 AMP SERVICE & PANEL - NEW AC.

QTY.	SIZE	ITEMS	FEE (Office Use Only)
14		Lighting Fixtures	
20		Receptacles	
10		Switches	
34		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
1	2TON	KW Central A/C Unit 3 KW	
1	3/2	HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	100	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

U.C.C. F120 (rev. 11/09)
Internet version

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

PLUMBING SUBCODE
TECHNICAL SECTION

update CW 10/2/18

Date Received 11/1/18
Control #

Date Issued
Permit # 18-2008+A

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

Block 615 Lot 25 Qualification Code

Work Site Location 158 Pinehurst Rd Brick

Owner in Fee: US Bank NA LSF9

Tel. 732 582-9184 e-mail

Address 2711 N Haskell Ave Dr. Dallas Tx

Contractor: Patriot Plumbing Mechanical LLC (street / municipality) Tel. (732) 929-3529 (zip code)

Address 2802 2nd Avenue e-mail patriotplumbing12@yahoo.

Toms River, New Jersey 08753

Contractor License No. 11968 Exp. Date 06/30/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 811932661 FAX:

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer 4" Private Septic

Water Service Size Public Water 1" Private Well

Est. Cost of Plumbing Work $ 9,060

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. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 10-18-18
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] 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				
Final				

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 sign/Contractor sign and seal here:

Print name here: David J Moores

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
FIXTURE LOCATION TO STAY, REPIPE WATER/DRAIN LINES, NOT TO CODE OR MISSING

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
2	Water Closet	$
	Urinal/Bidet	
1	Bath Tub	
2	Lavatory	
1	Shower	
	Floor Drain	
1	Sink	
1	Dishwasher	
	Drinking Fountain	
1	Washing Machine	
2	Hose Bibb	
X	Water Heater	
	Fuel Oil Piping	
X	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
X	Sewer Connection	
X	Water Service Connection	
	Stacks	
	Other	

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

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

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 11/1/18
Control #
Date Issued
Permit # 18-2008+A

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

Block 613 Lot 25 Qualification Code

Work Site Location 158 PINEHURST BRICK NJ

Owner in Fee: US Bank Trust NA

Tel. 888 572-6950 e-mail

Address 2711 N Haskell Ave, Sto 1700, Dallas, TX 75204
street municipality zip code

Contractor: Hi-Tech Security & Electric Inc Tel. (732) 800-3030

Address 1108 Industrial Parkway e-mail

Brick NJ 08724

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. EC 14404 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223568295 FAX: (732) 451-2625

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 300

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

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

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.

Applicant/Contractor sign here:

Print name here: Walter Gabela

[X] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: 110V INTERCONNECTED SMOKE DETECTORS.

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks	4	EBIS Treasurer as per Leader 10/5/18
Alarm Systems		
[ ] System		
[X] 110v Interconnected	4	
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	0	
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
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 $

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Fire Protection Plans Approved
Date: 10-25-18 Approved by: MP
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 10-25-18
Approved by: (VA)

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

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

U.C.C. F140 (rev. 02/11)
Internet version

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

MECHANICAL INSPECTION
TECHNICAL SECTION

update
CO
10/2/18

Control # 11/1/18

Date Issued

Permit # 18-20008+A

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

Block 615 Lot 25 Qualification Code

Work Site Location 158 Pinehurst Rd Birch

Owner in Fee: US Bank NA LSF9

Tel. 732 582 9184 e-mail

Address 2711 N Haskell Ave Dallas TX

Contractor: Patriot Plumbing, Mech LLC (street / municipality) Tel. 732 928 3529 (zip code)

Address 2802 2nd Avenue e-mail

Toms River, NJ 08753

Contractor License No. 11968 Exp. Date 6/30/19

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 81-1932661 FAX:

B. MECHANICAL CHARACTERISTICS

Use Group Present: R-5

Heating System work: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [X] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Estimated Cost of Mechanical Work $ 1000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg [ ] Elec [ ] Plumb [ ] Fire
[ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by:
SUBCODE APPPROVAL for CERTIFICATE
[ ] GA [ ] COO
Date:
Approved by:

INSPECTIONS Type	DATES Failure	Failure	Approval	Initial
Gas Piping				
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
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.

Sign here:

Print name here: David J. Mowes

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

HWH

NO.	FIXTURE/EQUIPMENT
1	Water Heater
~~1~~ 4	Fuel Oil Piping Connections
	Gas Piping Connections
	Steam Boiler
	Hot Water Boiler
	Hot Air Furnace
	Oil Tank
	LPG Tank
	Fireplace
	Generator
	Other

FEE (Office Use Only)

$

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F145 (rev. 10/16) Internet version

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

PERMIT UPDATE

Date Update Issued 11/1/18
Control # C-18-002245+B
Permit # 18-2008+B

IDENTIFICATION Block: 615 Lot: 25 Qualifier
Work Site Location: 158 PINEHURST RD. Brick Township, NJ
Owner in Fee: US BANK TRUST NA
13801 WIRELESS WAY OKLAHOMA CITY OK
73134
Telephone: (888) 572-6950

Contractor: AMERITRUST RESIDENTIAL SERVICE LLC
Address: 2911 RT. 88 STE. 7 PT PLEASANT NJ 08742
Telephone: (404) 382-7357
Lic. No. or Bldrs. Reg. No. 13VH09095800 13VH09095800
Federal Employee. No. 46535187

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☑ OTHER

DESCRIPTION OF WORK:
ALTERATION - RESIDENTIAL, RECONSTRUCTION ...GAS APPLIANCES, A/C & FURNACE

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 $5,000

D. Neumark Jr. 10/30/18
Construction Official Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other Mech	$300.00
DCA Training Fee	$10
CO Fee	
Other	$0
Total	$310
Check No. 1918	
Cash	$0
Credit	$0
Collected By TJ	

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

11/01/18 12:47PM 001558#1368 MECH. $300.00 $10.00 $310.00

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 the 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 granted.

☑ 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 cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, 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.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

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.

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

MECHANICAL INSPECTION
TECHNICAL SECTION

Update CP 10/2/18

Date Received / Control # 11/1/18

Date Issued / Permit # 18-2008+B

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

Block 615 Lot 23 Qualification Code

Work Site Location 158 Pinehurst Dr Brick NJ

Owner in Fee: US Bank Trust NA

Tel. 888 572-6950 e-mail

Address 2711 N Haskell Ave, Ste 1700, Dallas, TX 75204 (street / municipality / zip code)

Contractor: ACCURATE HVAC, LLC Tel. (732) 267-1565

Address 824 WELLINGTON AVENUE e-mail BDACCURATEHVAC@GMAIL.COM

TOMS RIVER, NJ 08757

Contractor License No. 19HC00843200 Exp. Date 06/30/2020

Home Improvement Contractor Registration No. or Exemption Reason 13VH06731100

Federal Emp. ID No. 202300288 FAX: (732) 608-6409

B. MECHANICAL CHARACTERISTICS

Use Group Present: Proposed:

Heating System work: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [✓] Replacement

Type: [ ] Hydronic [✓] Hot Air

Fuel Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Estimated Cost of Mechanical Work $ 5000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[✓] Mechanical Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 10.18.18
Approved by:

SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date:
Approved by:

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Gas Piping				
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
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.

Sign here:

Print name here: BERNARD DESTAFNEY

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

New Replace Furnace & A/C

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Heater	$
	Fuel Oil Piping Connections	
	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
1	Hot Air Furnace	
	Oil Tank	
	LPG Tank	
	Fireplace	
	Generator	
	Other	

1 AC

1 Oven

1 Dryer

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

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

PERMIT UPDATE

Date Update Issued 4/5/19
Control # C-18-002245+C
Permit # 18-2008+C

IDENTIFICATION Block: 615 Lot: 25 Qualifier

Work Site Location: 158 PINEHURST RD. Brick Township, NJ

Owner in Fee: US BANK TRUST NA
13801 WIRELESS WAY OKLAHOMA CITY OK 73134
Telephone: (888) 572-6950

Contractor: AMERITRUST RESIDENTIAL SERVICE LLC
Address: 3630 PEACHTREE RD ATLANTA GA 30326
Telephone: (404) 382-7357
Lic. No. or Bldrs. Reg. No. 13VH09095800
Federal Employee. No. 46339187

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ALTERATION - RESIDENTIAL, RECONSTRUCTION ...UPDATE +C - INTERIOR WALLS & HEADER

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 $1,500

David J Neumann — Construction Official (MFF)
4/3/19 — Date

PAYMENTS (Office Use Only)

Building	$150
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$3
CO Fee	
Other	$0
Total	$153
Check No.	VV 3193
Cash	$0
Credit	$0
Collected By	M. Fagen

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

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 the 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 granted.

- [x] 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 cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
  2. Foundations and all walls up to grade level prior to back filling.
  3. All structural framing, 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.
  4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

  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:

- [x] 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".

- [x] A complete copy of released plans must be kept on the job site.

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

BUILDING SUBCODE
TECHNICAL SECTION

update CW 3/28/19 +C

Date Received
Control #

Date Issued 4/15/19
Permit # 18-2008+C

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

Block 615 Lot 25 Qualification Code

Work Site Location 158 Pinehurst Rd Brick

Owner in Fee: US Bank Trust, NA

Tel. 888 572.6950 e-mail

Address 2711 N Haskell Ave, Ste 1700, Dallas TX 75204
street municipality zip code

Contractor: ResiPro, LLC Tel. 848.448.5767

Address 2911 RT 88, Ste 7 e-mail spayne@resipro.com
Point Pleasant, NJ 08742

Contractor License No. or Builder Registration No. 13VH09095800 Exp. Date 3/31/20

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

Federal Emp. ID No. 46-3391878 FAX:

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: Susan E Payne on behalf of

Print name here: Susan E Payne

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Interior Walls and Header

JOB SUMMARY (Office Use Only)

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

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

SUBCODE APPROVAL for PERMIT
Date: 04/03/19
Approved by:

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

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

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

FEE (Office Use Only)
$

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

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
No. of Stories
Height of Structure ft.
Area — Largest Floor sq. ft.
New Bldg. Area/All Floors sq. ft.
Volume of New Structure cu. ft.
Max. Live Load
Max. Occupancy Load

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 15000

U.C.C. F110 (rev. 11/09)

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