



CONSTRUCTION PERMIT

Date Issued 8/13/1997
Control # 20183
Permit # p1997-0136

IDENTIFICATION Block: 50 Lot: 14&14.01 Qualifier _____
Work Site Location: 3 OCEAN AVENUE MONMOUTH BEACH, NJ Contractor _____
Owner in Fee GREISER Address _____
 NJ Telephone: _____
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. _____

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:

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 \$0

PAYMENTS (Office Use Only)

Building	\$304
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$29
CO Fee	\$30.00
Other	\$0
Total	\$363
Check No.	2266
Cash	\$0
Credit	\$0
Collected By	SV

Construction Official _____ Date _____

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.



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

8/13/97
97-136

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

Block 50 Lot 1401
Work Site Location 3 Ocean Ave
Mar Beach
Owner in Fee _____
Address _____
Tele. () 345-1566
Contractor Cheney
Address 1266 Ocean Ave Unit 2
Seabright, VA
Tele. () _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 22-3454908 or Social Security No. _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

[Signature]
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

addition / alteration
Interiors work only
+ roof

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS			Dates (Month/Day)		Initial
☐ No. Plans Req.	☐ All			Type	Failure	Approval	Failure	Initial	
☐ Footing	☐ Footing			Foundation					
☐ Foundation	☐ Foundation			Slab					
☐ Frame	☐ Frame			Insulation					
☐ Other	☐ Other			Finishes					
Joint-Plan Review Required:				Energy					
☐ Elec. ☐ Plumb. ☐ Fire				Mechanical					
SUBCODE APPROVAL				TCO					
☐ CO ☐ CCO ☐ CA				Other					
Date:				Final					
Approved By:									

B. BUILDING CHARACTERISTICS

Use Group R-3 Present R-3 Proposed R-3
Constr. Class SB Present SB Proposed SB
No. of Stories 35
Height of Structure 242 Ft. 1892 Sq. Ft.
Area - Largest Floor 581 Sq. Ft.
New Bldg. Area/All Floors 581 Sq. Ft.
Volume of New Structure 17,904 Cu. Ft.
Total: Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$ 15,000
2. Alteration \$ 33,400
3. Total (1+2) \$ 48,400

TYPE OF WORK:	(Office Use Only) FEE
☐ New Building	\$ <u>304.00</u>
☒ Addition	\$ <u>267.00</u>
☒ Alteration	\$ <u>30.00</u>
☒ Roofing	
☐ Siding	
☒ Fence	
☐ Sign	
☐ Pool	
☐ Asbestos Abatement	
☒ Other	
☐ Other	
☐ Demolition	

Paid ☐ Check # 2266 Administrative Surcharge \$
Collected by: SV Minimum Fee \$
DCA TRAINING FEE \$ 601.00
TOTAL FEE \$

Porter



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Date Issued 8/13/1997
Control # 20183
Permit # p1997-0136

IDENTIFICATION Block: 50 Lot: 14&14.01 Qualifier _____
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Owner in Fee GREISER Address _____
 NJ Telephone: _____
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. _____

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

DESCRIPTION OF WORK:

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Estimated Cost of Work \$0

PAYMENTS (Office Use Only)

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Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$29
CO Fee	\$30.00
Other	\$0
Total	\$363
Check No.	2266
Cash	\$0
Credit	\$0
Collected By	SV

Construction Official _____ Date _____

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.

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☒ 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.
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☒ 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.



CONSTRUCTION PERMIT

Date Issued 12/13/2005
Control # 22816
Permit # p2005-0309

IDENTIFICATION Block: 50 Lot: 14 Qualifier _____
Work Site Location: 3 OCEAN AVE MONMOUTH BEACH, NJ 07750 Contractor _____
Address _____
Owner in Fee GETTY PETROLEUM Telephone: _____
 NJ Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ Federal Employee No. _____

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:

SIGN

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 \$0

PAYMENTS (Office Use Only)

Building	\$25
Electrical	\$64
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	\$0.00
Other	\$0
Total	\$90
Check No.	14165
Cash	\$0
Credit	\$0
Collected By	SM

Construction Official _____

Date _____

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.

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CONSTRUCTION PERMIT

Date Issued 12/13/2005
Control # 22816
Permit # p2005-0309

IDENTIFICATION Block: 50 Lot: 14 Qualifier _____
Work Site Location: 3 OCEAN AVE MONMOUTH BEACH, NJ 07750 Contractor _____
Address _____
Owner in Fee GETTY PETROLEUM Telephone: _____
 NJ Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ Federal Employee No. _____

Is hereby granted permission to perform the following work:

- ☒ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
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☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT (Subchapter 8 only) ☐ OTHER

DESCRIPTION OF WORK:

SIGN

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Estimated Cost of Work \$0

PAYMENTS (Office Use Only)

Building	\$25
Electrical	\$64
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	\$0.00
Other	\$0
Total	\$90
Check No.	14165
Cash	\$0
Credit	\$0
Collected By	SM

Construction Official _____

Date _____

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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CONSTRUCTION PERMIT

Date Issued 9/13/2011
Control # 25206
Permit # p2011-0184

IDENTIFICATION Block: 50 Lot: 14 Qualifier _____
Work Site Location: 3 OCEAN AVENUE MONMOUTH BEACH, NJ Contractor _____
07750 Address _____
Owner in Fee MONGA, ANIL & RAJNI Telephone: _____
11 TRICORNE CT HOLMDEL NJ 07733 Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ Federal Employee No. _____

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:

SEWER AND WATER DISCONNECT

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 \$2,500

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$0
Plumbing	\$25
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$4
CO Fee	
Other	\$0
Total	\$29
Check No.	1009
Cash	\$0
Credit	\$0
Collected By	JD

Construction Official _____

Date _____

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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Control # 25206
Permit # p2011-0184

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07750 Address _____
Owner in Fee MONGA, ANIL & RAJNI Telephone: _____
11 TRICORNE CT HOLMDEL NJ 07733 Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ Federal Employee No. _____

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- | | | |
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| ☐ ELEVATOR DEVICES | ☐ ASBESTOS ABATEMENT
(Subchapter 8 only) | ☐ OTHER |

DESCRIPTION OF WORK:

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PAYMENTS (Office Use Only)

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Electrical	\$0
Plumbing	\$25
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$4
CO Fee	
Other	\$0
Total	\$29
Check No.	1009
Cash	\$0
Credit	\$0
Collected By	JD

Construction Official _____

Date _____

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

1 WHITE - INSPECTOR

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Monmouth Beach Borough
18 WILLOW AVENUE
MONMOUTH BEACH, NJ 07750

Certificate

Construction Code Division
(Certificate of Occupancy)

Date Issued 6/24/2020
Control Number 38905
Permit Number p2017-0040
Permit Issue Date 2/23/2017
Certificate Number c2017-0040

Identification

Block: 50 Lot: 7 Qual: _____
Work Site Location: 17 Ocean Avenue Monmouth Beach, NJ 07750

Owner in Fee: Judy Tabak YAYAPOPO LLC

Owner Address: 6 BROWN COURT LIVINGSTON NJ 07039

Telephone: (973) 538-3535

Contractor

Address

NJ

Telephone:

Fax:

License Number or Builders Registration Number: _____

Federal Emp. Number: _____

☒ 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.

☐ 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.

☐ Temporary Certificate of Compliance

The following conditions must be met no later than _____ or the owner will be subject to fine or order to vacate: _____
This certificate has an expiration date of: _____
Conditions to be met:

Home Warranty Number: _____

Type of Warranty Plan: _____

☐ State ☐ Private

Construction Classification: _____

Use Group: R-5

Maximum Occupancy Load: 82

Maximum Live Load: 41

Description of Work/Use:

A/C Condensate & Radiant Systems, Heat Source Direct vents Boilers, New A/C Duct Systems, Kitchen Exhaust / Make up Air. All bathroom venting (ductwork) 3 ERV's., ADDED REINFORCEMENT AND CONCRETE TO HAUNCHES FOR POOL/TERRACE SLAB, Additional piles for grade beams for pool and columns, CHANGE OF CONTRACTOR, COMMUNICATION Certificate Comments:

☐ Certificate of Clearance - Lead Abatement 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ 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 _____

☐ Temporary Certificate of Occupancy

The following conditions must be met no later than _____ or the owner will be subject to fine or order to vacate: _____
This certificate has an expiration date of: _____
Conditions to be met:

Fee: \$45.00

Check Number: 60028

U.C.C. F260 (rev. 08/05)

Construction Official

Collected By: Barbara Maguire

Date Printed: 1/18/2024

Page 1



CONSTRUCTION PERMIT

Date Issued 2/5/2007
Control # 23292
Permit # p2007-0020

IDENTIFICATION Block: 2 Lot: 44.01 Qualifier _____
Work Site Location: 136A OCEAN AVENUE MONMOUTH BEACH, NJ Contractor _____
07750 Address _____
Owner in Fee BONFIGLIO, THOMAS & YVETTE Telephone: _____
136A OCEAN AVENUE MONMOUTH BEACH NJ Lic. No. or Bldrs. Reg. No. _____
07750 Federal Employee No. _____
Telephone: _____

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:

ADDITION TO NORTH SIDE AND TO GARAGE

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 \$0

PAYMENTS (Office Use Only)

Building	\$1,563
Electrical	\$187
Plumbing	\$175
Fire Protection	\$130
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$167
CO Fee	\$45.00
Other	\$0
Total	\$2,267
Check No.	8336
Cash	\$0
Credit	\$0
Collected By	JD

Construction Official _____

Date _____

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

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



CONSTRUCTION PERMIT

Date Issued 2/5/2007
Control # 23292
Permit # p2007-0020

IDENTIFICATION Block: 2 Lot: 44.01 Qualifier _____
Work Site Location: 136A OCEAN AVENUE MONMOUTH BEACH, NJ Contractor _____
07750 Address _____
Owner in Fee BONFIGLIO, THOMAS & YVETTE Telephone: _____
136A OCEAN AVENUE MONMOUTH BEACH NJ Lic. No. or Bldrs. Reg. No. _____
07750 Federal Employee No. _____
Telephone: _____

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:

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Estimated Cost of Work \$0

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(Subchapter 8 only) | ☐ OTHER |

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BUILDING SUBCODE TECHNICAL SECTION



A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000
Block 2 Lot 44.01 Qualification Code _____
Work Site Location: 136A OCEAN AVENUE MONMOUTH BEACH, NJ 07750

Owner in Fee: BONFIGLIO, THOMAS & YVETTE
Address 136A OCEAN AVENUE MONMOUTH BEACH NJ 07750
Tel. _____ Email _____
Contractor: FAUST CONTRACTING CO
Address 23 EMMONS STREET, LONG BRANCH NJ 07740 NJ
Tel. (732) 222-0606 Fax: (732) 222-0631
Contractor License No. or, if new home, Bldrs Reg. No. _____ Exp. _____
Home improvement Contractor Registration No. or Exemption Reason (is applicable): _____
Federal Emp. ID No. _____

JOB SUMMARY (Office Use Only)			INSPECTIONS	
PLAN REVIEW	Date	Initial	Type:	Dates (Month/Day)
			Failure	Approval
☐ No Plan Required			Footing	
☐ All			Footing Bonding	
☐ Footing/Foundation			Foundation	
☐ Struct/Framework			Slab	
☐ Exterior			Frame	
☐ Interior			Truss Sys./Bracing	
Joint Plan Review Required			Barrier-Free	
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation	
SUBCODE APPROVAL for PERMIT			Finishes-Base Layer	
Date: _____			Finishes-Final	
Approved by: _____			Energy	
SUBCODE APPROVAL for CERTIFICATE			Mechanical	
☐ CO ☐ CCO ☐ CA			TCO	
Date: _____			Other	
Approved by: _____			Final	
			Barrier-Free	
			Proposed	
			Proposed	

B. BUILDING CHARACTERISTICS

Use Group _____ Present _____ If Industrial Building: _____ State Approved _____

Constr. Class _____ Present _____

Number of Stories _____

Height of Structure _____ Ft.

Area - Largest Floor _____ Sq. Ft.

New Bldg. Area / All Floors 6772 Sq. Ft.

Volume of New Structure 63000 Cu. Ft.

Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. _____

2. Rehabilitation _____

3. Total (1+2) _____

Date Received 2/5/2007
Control # 23292
Date Issued 2/5/2007
Permit # p2007-0020

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of the record and am authorized to make this application.

Signature _____

Print Name Here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

ADDITION TO NORTH SIDE AND TO GARAGE

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)

\$1,563

Administrative Surcharge
Minimum Fee
State Permit Surcharge Fee
TOTAL FEE