



CONSTRUCTION PERMIT

Date Issued 2/21/2018
Control # 5317
Permit # 18-245

IDENTIFICATION Block: 44.10 Lot: 19 Qualifier _____
Work Site Location: 115 RIPTIDE AVENUE MANAHAWKIN, NJ 08050 Contractor _____
NJ Address _____
Owner in Fee US BANK NA MASTER TRUST Telephone: _____
2711 N. HASKELL AVE. STE.1700 DALLAS NJ 75204- 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:

ROOF

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

PAYMENTS (Office Use Only)

Building	\$50
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$10
CO Fee	
Other	\$0
Total	\$60
Check No.	vv115
Cash	\$0
Credit	\$0
Collected By	

Construction Official

2/21/2018
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.

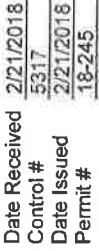
Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- ☐ 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.



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

Block 44.10 Lot 19 Qualification Code _____

Work Site Location: **115 RIPTIDE AVENUE MANAHAWKIN, NJ 08050 , NJ**

Owner in Fee: US BANK NA MASTER TRUST

Address 2711 N. HASKELL AVE. STE.1700 DALLAS NJ 75204-

Tel. _____ Email _____

Contractor: AMERITRUST RESIDENTIAL

Address 3525 PIEDMONT ROAD ATLANTA NJ 30305-

Email

Tel. _____ Fax. / - _____

Contractor License No. or, if new home, Bldrs Reg. No. 13VH09095800 Exp. 3/31/2018

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

Federal Emp. ID No. 46-3391878

JOB SUMMARY (Office Use Only)			INSPCTIONS		Dates (Month/Day)	
PLAN REVIEW	Date	Initial	Type:	Failure	Approval	Initial
☐ 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	_____	_____	_____
Joint 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	_____	_____	_____

3. BUILDING CHARACTERISTICS			Barrier-Free	
Use Group	Present	Proposed		
Constr. Class	Present	Proposed	If Industrial Building:	
Number of Stories			State Approved	
Height of Structure			HUD	
Area - Largest Floor			Est. Cost of Bldg. Work:	
New Bldg. Area / All Floors			1. New Bldg.	
Volume of New Structure			2. Rehabilitation \$5,000	
Total Land Area Disturbed			3. Total (1+2) \$5,000	
			U.C.C.F.	

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	ROOF
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☐ New Building	
☐ Addition	
☒ Rehabilitation	
☒ Roofing	\$50
☐ 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	

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	\$10
TOTAL FEE	\$60

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

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



Stafford Township
260 East Bay Avenue
Manahawkin, NJ 08050
(609) 597-1000 Ext 8532

Inspection Activity Report

Inspections for Permit Number 18-245

Permit Number

18-245

Inspection Date	Inspection Type	Inspector	Subcode	Result	Owner Location	Work Type	Work Description	Inspection Comments
02/23/2018	Final	Charles Hood	Building	Fail	US BANK NA MASTER TRUST 115 RIPTIDE AVENUE	Alteration		FINAL Inspector Initials: CH
03/05/2018	Final	Charles Hood	Building	Pass	US BANK NA MASTER TRUST 115 RIPTIDE AVENUE	Alteration		FINAL Inspector Initials: CH