

TOWNSHIP OF HOPEWELL
Rt. 546 and Scotch Road
Titusville, New Jersey 08560



CONSTRUCTION PERMIT APPLICATION

Page 1

I IDENTIFICATION

1. Proposed Work at: 228 Pleasant Valley Rd Titusville N.J. 08560
2. Owner Name: Donell + Deborah Ambrosini Tel. (609) 732-3740
Address: 228 Pleasant Valley Rd Titusville N.J. 08560
3. Principal Contractor: Michael D'Ala Tel. (609) 883-3879
Address: Tecoma Creek Rd. Titusville N.J. 08560
Lic. No. or Builder Reg. No. 297-297A Federal Emp. No. 22-2675463
4. Architect or Engineer: _____ Tel. (____) _____
Address: _____
5. Responsible Person in Charge of Work: Michael D'Ala Tel. (609) 883-3879

II PROPOSED WORK

A. TYPE OF WORK	B. CATEGORIES OF WORK	D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?																
1. ☒ Minor Work (Single Trade) 2. ☐ Small Job (\$5,000 and no Prior Approvals) Complete only II B., III and IV A. and Page 2 3. ☐ New Building 4. ☐ Addition 5. ☐ Alteration 6. ☐ Repair, Replacement 7. ☐ Demolition 8. ☐ Other: _____	<table border="1"><thead><tr><th>Permit/Category</th><th>Estimated</th></tr></thead><tbody><tr><td>1. ☐ Building/Structural</td><td>\$ _____</td></tr><tr><td>2. ☐ Plumbing</td><td>_____</td></tr><tr><td>3. ☐ Electrical</td><td>_____</td></tr><tr><td>4. ☐ Fire Protection</td><td>_____</td></tr><tr><td>5. ☐ Other _____</td><td>_____</td></tr><tr><td>6. ☐ Other _____</td><td>_____</td></tr><tr><td colspan="2">TOTAL COST \$ _____</td></tr></tbody></table> C. DO YOU WANT: 1. ☐ Partial Releases 2. ☐ Prototype Processing	Permit/Category	Estimated	1. ☐ Building/Structural	\$ _____	2. ☐ Plumbing	_____	3. ☐ Electrical	_____	4. ☐ Fire Protection	_____	5. ☐ Other _____	_____	6. ☐ Other _____	_____	TOTAL COST \$ _____		1. ☐ Elevators/Dumbwaiters 2. ☐ High Pressure Boilers 3. ☐ Refrigeration Systems 4. ☐ Pressure Vessels 5. ☐ Hazardous Uses/Places of Assembly 6. ☐ Cross-connections/Backflow Preventors 7. ☐ Sprinklers 8. ☐ Smoke Control Systems in Open Wells
Permit/Category	Estimated																	
1. ☐ Building/Structural	\$ _____																	
2. ☐ Plumbing	_____																	
3. ☐ Electrical	_____																	
4. ☐ Fire Protection	_____																	
5. ☐ Other _____	_____																	
6. ☐ Other _____	_____																	
TOTAL COST \$ _____																		

III DESCRIPTION OF BUILDING USE USE GROUPS

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
HMD Reg. No.: _____
3. ☐ Two Family (R-3b)
4. ☐ One Family (R-3a)
If new construction, enter no. of dwelling units: _____
If other than new construction, enter no. of dwelling units:
Before Construction: _____
After Construction: _____
Net Gain (or loss): _____

B. NON-RESIDENTIAL

5. ☐ Theatres with Stage (A-1-A)
6. ☐ Movie Theatres (A-1-B)
7. ☐ Night Clubs (A-2)
8. ☐ Restaurants, Libraries, Museums (A-3)
9. ☐ Religious Assembly (A-4)
10. ☐ Outdoor Assembly (A-5)
11. ☐ Business (B)
12. ☐ Educational (E)
13. ☐ Moderate Hazard Factory (F-1)
14. ☐ Low Hazard Factory (F-2)
15. ☐ High Hazard (H)
16. ☐ Institutional Detention Center (I-1)
17. ☐ Hospitals, Infirmeries (I-2)
18. ☐ Group Homes (I-3)
19. ☐ Mercantile (M)
20. ☐ Moderate Hazard Warehouse (S-1)
21. ☐ Low Hazard Warehouse (S-2)
22. ☐ Temporary, Misc. (U)
23. ☐ Other _____

State Specific Use: _____

If Change in Use Group, Indicate Former: _____

IV BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☐ Private (Individual, Corp., Non profit Inst., Etc.)
2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

Principal	Secondary	Type
3. ☐	☐	Gas
4. ☐	☐	Oil
5. ☐	☐	Electric
6. ☐	☐	Solid (Wood, Coal, Etc.)
7. ☐	☐	Propane
8. ☐	☐	Solar
9. ☐	☐	Other _____

C. TYPE OF SEWAGE DISPOSAL

10. ☐ Public or Private Company
11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☐ Public or Private Company
13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories _____
15. Height of Structure _____ Ft.
16. Area - Largest Floor _____ Sq. Ft.
17. Bldg. Area - All Fls _____ Sq. Ft.
18. Volume of Structure _____ Cu. Ft.
19. Total Land Area Disturbed _____ Sq. Ft.

BLOCK NO. _____

52

LOT NO. _____

73

SUBDIVISION _____

Seaside

PERMIT NO. _____

88-231

CERTIFICATION IN LIEU OF OATH

I OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

- A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e) vii.
- B. ☐ I further certify that I will perform the work below.
 B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 46:38-1 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.
- 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 understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE _____ DATE _____

II AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

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 _____ TEL. 1 _____

ADDRESS _____

SIGNATURE _____

U.C.C. Form F-100 (8/83)

☐ Building
☐ Electrical
☐ Plumbing
☐ Fire Protection

☐ Energy
☐ Barrier Free
☐ Other

☐ Other

Certification

BLOCK NO. 52 LOT NO. 72 SUBDIVISION Seaside PERMIT NO. 88-231

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PRIOR APPROVALS CHECKLIST

[illegible]

SUBCODES AND SPECIAL REGULATIONS APPLICABLE

☐ One and Two Family Dwellings		EDITION OF CODE		EDITION OF CODE	☐ Flood Hazard	
☐ Building		☐ Mechanical			☐ As Built Elevation Certification	
☐ Electrical		☐ Energy			☐ Other	
☐ Plumbing		☐ Barrier Free				
☐ Fire Protection		☐ Other				

U.S.G. Form F-100 (8/83)

PERMIT CONTROL

Page 4

I PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

- ☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN - FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date Receiver	Approved Date	Reviewer	Comments
☐	BUILDING Footings/Foundations Framing Architectural Other _____				
☐	PLUMBING				
☒	ELECTRICAL	1/25/88	1/26/88	1/26/88	
☐	FIRE PROTECTION				
☐	OTHER _____				

II PERMIT / INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
	BUILDING			
	Footings/Foundations			
	Framing			
	Architectural			
	Other _____			
	PLUMBING			
	ELECTRICAL			
	FIRE PROTECTION			
	OTHER _____			

III CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☐ Temporary Certificate of Occupancy Date Expired _____	
☐ Temporary Certificate of Occupancy Date Expired _____	
☐ Certificate of Occupancy No. _____	
☐ Certificate of Continued Occupancy No. _____	
☐ Certificate of Approval No. _____	
☐ None	

IV ON-GOING INSPECTIONS

On going Inspections Required (See Page 1, I.L.D.)	Date Permitted to Log and Tackler

V FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

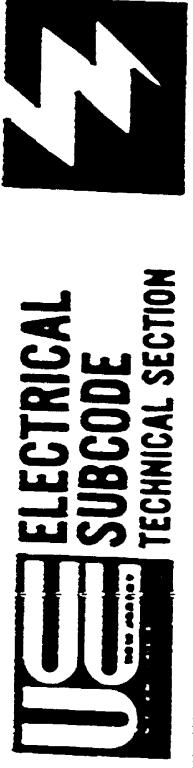
	AMOUNT
BUILDING	\$ _____
PLUMBING	\$ _____
ELECTRICAL	\$ 25.00
FIRE PROTECTION	\$ _____
OTHER _____	\$ _____
SUBTOTAL	\$ _____
- LESS: 20% of subtotal (when plan review performed by state agency).	(_____)
D.C.A. TRAINING FEE 1006 x _____	\$ _____
CERTIFICATE OF OCCUPANCY	\$ _____
OTHER _____	\$ _____
OTHER _____	\$ _____
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ 25.00
DATE 1/25/88 Collected By J.H.H.	

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			\$ _____
OTHER			\$ _____
OTHER			\$ _____
- LESS: Refunds			(_____)
TOTAL COLLECTED AFTER PERMIT ISSUED			\$ _____

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	\$ _____
COLLECTED AFTER PERMIT (VB)	\$ _____
TOTAL	\$ _____



PERMIT NO. 88-231
DATE ISSUED 5/25/88
REVISION DATE _____
Block 53 Lot 73
Subdivision _____

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)
I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
[Signature]
AGENT SIGNATURE

A IDENTIFICATION
APPLICANT - Complete unshaded areas only When changing contractors, notify this office
Owner Donald + Deborah Gervase Contractor Michael Dilia
Address 228 Pleasant Valley Rd. Address 225 4th St. CRICK RD
Pleasant Valley, Titusville, FL
Tel. (609) 737-3740 Tel. 883-3397
Work Site Address 228 Pleasant Valley Rd. Lic. No./Bus. Permit. 2372
Titusville, N.J. Federal Emp. No. 22-2675463

B TECHNICAL SITE DATA
List all wiring and equipment and provide necessary data
TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee
	Switching Outlets			H.V.A.C. Equipment	
	Lighting Outlets			Switching Devices	
	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/Compressors	
	Dryer, Electric			(List no. and size of each)	
	Water Heater, Electric			Other	
	Heating, Electric			Other	
	Switches			Other	
	Lighting Fixtures			Other	
	Receptacles			Other	
	Bonding, Pool/Vault			Other	
	Service/Feeders			Other	

COLUMN 1 220.00 COLUMN 2 _____
SUBTOTAL 220.00
Minimum Electrical Fee 20.00
(If applicable) 20.00
Total Electrical Fee 25.00
(Greater of Minimum or Subtotal)

C ELECTRICAL CHARACTERISTICS
USE GROUP: _____ Present _____ Proposed _____
Service: 200 Amperes / Phase _____ System Type _____
Wiring Method _____
Total No. of Meters: _____ Volts _____
Estimated Cost of Electrical Work: \$ X

D COMMENTS
☐ Partial Release ☐ Prototype Processing

U.C.C. Form F-120 (8/83) Green = Office Copy White = Applicant Copy Pink = MDIA White = Inspectors Copy

OFFICE COPY