

CONSTRUCTION PERMIT APPLICATION



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

Page 1

BLOCK NO. 62 LOT NO. 401 SUBDIVISION 88-287 PERMIT NO. 88-287

I IDENTIFICATION

1. Prepared Work at: RR 2 Box 279 A Titusville NJ
 2. Owner Name: Don Smith
 3. Principal Contractor: Don L. Cass
 4. Architect or Engineer: Don L. Cass
 5. Responsible Person in Charge of Work: Don L. Cass

Address: 111 Englewood Ave. Pennington NJ
 Tel: 737-6553

II PROPOSED WORK

A. TYPE OF WORK

1. ☒ Minor Work (Single Trade)
 2. ☐ Small Job (\$5,000 and no Prior Approvals)
 3. ☐ New Building
 4. ☐ Addition
 5. ☐ Alteration
 6. ☐ Repair/Replacement
 7. ☐ Demolition
 8. ☐ Other: _____

Complete only II B, III and IV A and Page 2

B. CATEGORIES OF WORK

1. ☐ Building/Structural
 2. ☐ Plumbing
 3. ☐ Electrical
 4. ☐ Fire Protection
 5. ☐ Other
 6. ☐ Other

C. DO YOU WANT:

1. ☐ Partial Releases
 2. ☐ Prototype Processing

D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Dumbbells
 2. ☐ High Pressure Boilers
 3. ☐ Refrigeration Systems
 4. ☐ Pressure Vessels
 5. ☐ Hazardous Waste Placer
 6. ☐ Cross Connections of Assembly
 7. ☐ Backflow Preventers
 8. ☐ Smoke Control Systems in Open Wells

III DESCRIPTION OF BUILDING USE USE GROUPS

A. RESIDENTIAL

1. ☐ Hotels (R-1)
 2. ☐ Multi-Family (R-2)
 3. ☐ Two Family (R-3a)
 4. ☐ One Family (R-3b)

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. ☐ Theaters with Stage (A-1-A)
 6. ☐ Movie Theaters (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, Mx. (U)
 23. ☐ Other: _____

If Change in Use Group, Indicate Former: _____
 State Specific Use: _____

IV BUILDING CHARACTERISTICS

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

B. HEATING/FUEL

Principal Type: _____
 Secondary Type: _____
 Gas: ☐
 Oil: ☐
 Electric: ☐
 Solid (Wood, Coal, Etc.): ☐
 Propane: ☐
 Solar: ☐
 Other: ☐

C. TYPE OF SEWAGE DISPOSAL

Principal Type: _____
 Secondary Type: _____
 Gas: ☐
 Oil: ☐
 Electric: ☐
 Solid (Wood, Coal, Etc.): ☐
 Propane: ☐
 Solar: ☐
 Other: ☐

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

14. ☐ No. of Stories
 15. ☐ Height of Structure
 16. ☐ Area - Largest Floor
 17. ☐ Area - All Fls
 18. ☐ Volume of Structure
 19. ☐ Total Land Area Disturbed

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

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



CONSTRUCTION PERMIT APPLICATION

Page 1

BLOCK NO. 62

LOT NO. 4.01

SUBDIVISION

PERMIT NO. 88-287

I IDENTIFICATION

1. Proposed Work at: RR 2 Box 279 A Titusville NJ.
2. Owner Name: Dan Smith Tel. () 737-0581
Address: RR 2 Box 279 A Titusville NJ.
3. Principal Contractor: Alan L Cross Tel. () 737-6553
Address: 111 Ingleside Ave Pennsauken NJ.
- Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
4. Architect or Engineer: _____ Tel. () _____
Address: _____
5. Responsible Person in Charge of Work: Alan L Cross Tel. () 737-6553

II PROPOSED WORK

A. TYPE OF WORK

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: Roof

B. CATEGORIES OF WORK

- | Permit/Category | Estimated |
|--|-----------|
| 1. ☒ Building/Structural | \$ _____ |
| 2. ☐ Plumbing | _____ |
| 3. ☐ Electrical | _____ |
| 4. ☐ Fire Protection | _____ |
| 5. ☐ Other <u>Roof</u> | _____ |
| 6. ☐ Other _____ | _____ |
| TOTAL COST \$ _____ | |

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

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

III DESCRIPTION OF BUILDING USE USE GROUPS

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
HWD 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: _____

UCC Form F 300 (8-83)

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.

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 _____

ADDRESS _____

SIGNATURE _____

U.C.C. Form P-100 (6/83)

☐ Electrical
☐ Plumbing
☐ Fire Protection

☐ Barrier Free
☐ Other

☐ Other

88-287

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[illegible]

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

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001064

PERMIT CONTROL

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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	Approval Date Reviewer	Comments
☒	BUILDING Footings/Foundations Framing Architectural Other _____	4/27/78 L.H.	4/28/78 J.P.	
☐	PLUMBING			
☐	ELECTRICAL			
☐	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:

- ☐ Temporary Certificate of Occupancy
 Date Expired _____ Date Issued _____
☐ 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, II.D)	Due Period to Log and Tickler

V. FEE SUMMARY

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

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$ 20.00
PLUMBING	
ELECTRICAL	
FIRE PROTECTION	
OTHER _____	
SUBTOTAL	\$ 20.00
- LESS: 20% of subtotal (when plan review performed by state agency).	(4.00)
D.C.A. TRAINING FEE 0006 x _____	
CERTIFICATE OF OCCUPANCY	
OTHER _____	
OTHER _____	
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ 16.00
DATE <u>7/1/78</u> Collected By <u>J.K.</u>	

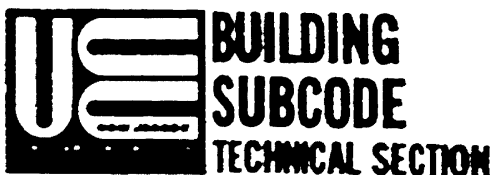
B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	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 (V.A)	\$ 16.00
COLLECTED AFTER PERMIT (V.B)	
TOTAL	\$ 16.00

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



Block 62 Lot 4.01
Subdivision _____

A IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner Don Smith
Address RR 2 Box 279 A
Titusville N.J.
Tel. 1-737-0581
Work Site Address RR 2 Box 279A
Titusville N.J.

Contractor Alan L. Cross
Address 111 Eagle Side Dr.
Pennsboro N.J.
Tel. 1-737-6553
Lic. No. _____
Federal Emp. No. _____

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.

Alan L. Cross
AGENT SIGNATURE

B TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

Remove and Replant
of new 20 year F. heights
Shrub. front of home
only

☐ See Plans

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration/Remodeling
- ☒ Roofing
- ☐ Siding
- ☐ Other _____
- ☐ Demolition
- ☐ Miscellaneous
- ☐ Fence
- ☐ Sign
- ☐ Pool
- ☐ Elevator
- ☐ Other _____

SUBTOTAL

Minimum Building
Fee (if applicable)

Total Building Fee
(Greater of Minimum
or Subtotal)

C BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories _____ Total Building Area - All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area - Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: \$ 2660.00

D COMMENTS

☐ Partial Releases ☐ Prototype Processing