

- 11 C.F. Lewis, 100A.

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(e)1.vii:

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 New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(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 _____

Address _____

Telephone () _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☐ Other									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition		Other
Building	_____	Energy	_____	_____
Electrical	_____	Barrier Free	_____	_____
Plumbing	_____	Flood Hazard	_____	_____
Fire Protection	_____	As Built Elevation Cert.	_____	_____
Mechanical	_____	Other	_____	_____

X. CERTIFICATES ISSUED (office use only)

	No.	DATE EXPIRED
☐ Temporary Certificate of Occupancy	_____	_____
☐ Temporary Certificate of Occupancy	_____	_____
☐ Continued Certificate of Occupancy	_____	_____
☐ Certificate of Occupancy	_____	_____
☐ Certificate of Approval	_____	_____
☐ None	_____	_____



CONSTRUCTION PERMIT

Date Issued

9-2-

Control #

Permit #

2458-99

NOTIFICATION

Block

758.19

Lot

22 + 23

Work Site Location

493 Bella Vista Rd

Contractor

Self

Address

Owner In Fee

F. Hartman

Address

S. Hartman

Tele. ()

Lic. No. or Bldrs. Reg. No.

Exp. Date

Federal Emp. No.

or Social Security No.

2458

BLOCK

Whereby, granted permission to perform the following work:

BUILDING ☐ PLUMBING ☐ OTHER ☐
ELECTRICAL ☐ FIRE PROTECTION ☐

DESCRIPTION OF WORK:

Remove & replace
V. siding

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 \$

800

CONSTRUCTION OFFICIAL

C. Form F-170A

1 WHITE - OFFICE

2 CANARY - TAX ASSESSOR

3 PINK - JACKET

4 GOLD - APPLICANT

PAYMENTS (Office Use Only) 958

Building ☒ LOTPlumbing ☐ 22 #Electrical ☐ BUILDINGFire Protection ☐ D.C.A.Other ☐ C / DOther ☐ TOTALDCA Training Fee ☒ THREECert. of Occ. ☒ CHANGEOther ☐

Total 9/02/94 NO RG INTERACTIONS

Check No. # 3196

Cash ☐

Collected By: ZK



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

9-2-94
2458-94

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

Block 958.19 Lot 22+23
Work Site Location 493 Bella Vista Rd. Brick, NJ

Owner in Fee Frank P. Hartten JR + Christina M. Hartten

Address 493 Bella Vista Rd.

City Brick State NJ Zip 08724

Tele. [REDACTED]

Contractor SCIP

Address _____

Tele. (____) _____

Lic. No. or Bldrs. Reg. No. _____

Federal Emp. No. _____ 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 _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Removing existing vinyl siding
and replacing with new
vinyl siding.

JOB SUMMARY (Office Use Only)

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

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____

Constr. Class 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.

Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____

2. Alteration \$ _____

3. Total (1+2) \$ _____

TYPE OF WORK:

- ☐ New Building
☐ Addition
☐ Alteration
☐ Roofing
☐ Siding
☐ Fence _____ Height (6' or over)
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other _____
☐ Other _____
☐ Demolition

(Office Use Only)

FEE

\$ _____

Administrative Surcharge

\$ _____

Paid ☐ Check # _____

Minimum Fee

\$ _____

Collected by: _____

DCA TRAINING FEE

\$ _____

TOTAL FEE

\$ _____



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

9-2-94
2458-94

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

Block 958, 19 Lot 22423
Work Site Location 493 Bella Vista Rd. Brick, NJ

Owner in Fee Frank P. Hartten JR & Christina M. Hartten

Address 493 Bella Vista Rd.

Brick, NJ 08724

Tele. (908) 892-7017

Contractor SCIF

Address _____

Tele. (____) _____

Lic. No. or Bids. Reg. No. _____

Federal Emp. No. _____ or Social Security No. _____

JOB SUMMARY (Office Use Only)

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

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____

Constr. Class 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.

Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____

2. Alteration \$ _____

3. Total (1 + 2) \$ _____

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Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

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and replacing with new
vinyl siding.

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Alteration

☐ Roofing

☐ Siding

☐ Fence _____ Height (6' or over)

☐ Sign _____ Sq. Ft.

☐ Pool

☐ Asbestos Abatement

☐ Other _____

☐ Other _____

☐ Demolition

**(Office Use Only)
FEE**

\$ _____

Administrative Surcharge \$ _____

Paid ☐ Check # _____ Minimum Fee \$ _____

Collected by: _____ DCA TRAINING FEE \$ _____

TOTAL FEE \$ _____

Form must be handed in with permit application or a permit will not be issued

TOWNSHIP OF BRICK

✓ 493 Bella Vista Rd 958.19 22x23
Work Site Address: Block

✓ 493 Bella Vista Rd.
Owner's Name, Address, Phone: Christina H. Hartten Brick, NJ 08724

✓ - Self
Contractor's Name, Address, Phone: [Signature]

Construction Describe type (Single-family home, etc.)

Demolition Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material

Name, address and phone of party responsible for removal of debris:

Size of dumpster:

Destination of discarded debris: Ocean County Landfill

Hauler's DEP Permit No.:

**Note: Any recyclable material, including, but not limited to: corrugated cardboard, vegetative waste, concrete, asphalt, clean wood, etc., must be delivered to an approved recycling center, and receipts provided to the Township of Brick along with tipping receipts for non-recyclable material.

Generator's Certification: Under penalty of criminal and civil prosecution, for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed or recycled in accordance with all applicable State and Federal laws and regulations, and that I have been authorized, in writing, to make such declarations by the person in charge of the generator's operation.

Christina Hartten Signature Date 9/2/94
Printed/Typed Name

FOR OFFICE USE ONLY

MUST BE COMPLETED BEFORE "CERTIFICATE OF OCCUPANCY" OR "CERTIFICATION OF APPROVAL" IS ISSUED.

Recycling tonnage receipts attached?

Certified tipping receipts attached?

**NOTE: Receipts must show certified weights, date of disposal and name and address of disposal center.

DISTRIBUTION LIST:

1. Original to Code Enforcement Officer
2. Construction Code Office
3. Applicant

ORDINANCE OF THE TOWNSHIP OF BRICK, COUNTY OF OCEAN, STATE OF NEW JERSEY AMENDING AND SUPPLEMENTING CHAPTER 121 ENTITLED "CONSTRUCTION CODES, UNIFORM" TO ADD SECTION 121-3 "BUILDERS RESPONSIBILITY."

BE IT ORDAINED by the Township Council of the Township of Brick, County of Ocean, State of New Jersey, as follows:

SECTION 1. Section 121-3 of the Brick Township Code is hereby enacted as follows:

- 121-3. Builders Responsibility.
- A. Prior to any permit being issued for construction of any kind, the person or entity applying for the permit shall, as a prerequisite to the issuance of that permit, provide the Construction Official with written documentation setting forth the person's or entity's proposal to dispose of all construction debris resulting from the construction for which the permit is being issued.
 - B. Prior to the issuance of a Certificate of Occupancy, the person or entity performing the construction shall provide the Construction Official with written documentation setting forth that the person or entity has complied with the proposal to dispose all of the construction debris.

SECTION 2. All Ordinances or parts of Ordinances inconsistent herewith are repealed.

SECTION 3. If any section, subsection, sentence, clause, phrase or portion of this Ordinance is for any reason held unconstitutional by a Court of competent jurisdiction, such portion shall be deemed a separate, distinct and independent provision, and such holding shall not affect the validity of the remaining portions hereof.

SECTION 4. This Ordinance shall take effect in the manner as prescribed by law.

PASSED: January 28, 1992

ADOPTED: February 25, 1992

SIGNED: 
MAYOR


PRESIDENT OF THE COUNCIL

ATTEST: 
MUNICIPAL CLERK