



BOROUGH OF UNION BEACH 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/Lot 241/9

Work Site Location 1201 HIGH AVE

Owner in Fee: BRADY, JEAN MARIE & JOHN S.

Tel. (732)264-5187 e-mail 732645187

Address: 1201 HIGH AVENUE UNION BEACH, NJ 07735

Street

municipality

zip code

Contractor: BUDGET CONTRACTING Tel. (732)618-2444

Address: 849 PALMER AVENUE, HOLMDEL, NJ 07733 e-mail

Contractor License No. 13VH01745000-3/31/19 Exp. Date

Federal Emp. ID No. FAX

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Failure	Approval	Initial
☐ No Plans Required			Type: Footing				
☐ All			Footing Bonding				
☐ Footing			Foundation				
☐ Foundation			Slab				
☐ Frame			Frame				
☐ Other			Truss Sys./Bracing				
Joint Plan Review Required			Barrier-Free				
☐ Elec. ☐ Plumb ☐ Fire ☐ Elevator			Insulation				
SUBCODE APPROVAL			Finishes-Base Layer				
☐ CO ☐ CCO ☐ CA			Finishes-Final				
Date:			Energy				
Approved by:			Mechanical				
			TCO				
			Final				
			Other				

B. BUILDING CHARACTERISTICS

Use Group Present R-5 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. \$ 37,000

2. Rehabilitation \$ 37,000

3. Total (1+2) \$ 37,000

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.

Date Received / /
Control # 2599
Date Issued / /
Permit #

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSUL WALLS, FLOOR, S/R, NEW KIT,
CABINETS, BATH, HW FLOORS, ROUGH
WIRING, ROUGH PLUMBING, SDS/FIREMAN
WAIVED-NEED PH#NEEDBUIL

TYPE OF WORK

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence _____ Height (exceeds 6') Sq. Ft.
- ☐ Sign _____ Sq. Ft.
- ☐ Pool
- ☐ Asbestos Abatement Subchapter 8.
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☐ Other _____
- ☐ Demolition

FEE (Office Use Only)

Administrative Surcharge \$ 0

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$



BOROUGH OF UNION BEACH
ELECTRICAL 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/Lot 241/9

Work Site Location 1201 HIGH AVE

Owner in Fee: BRADY, JEAN MARIE & JOHN S.

Tel. (732)264-5187 e-mail 7322645187

Address: 1201 HIGH AVENUE UNION BEACH, NJ 07735

Contractor: FENTON ELECTRICAL Tel. _____

Address: 3006 PACIFIC AVENUE, WALL NJ 07719 e-mail _____

Contractor License No. _____ Exp. Date _____

Federal Emp. ID No. _____ FAX _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R-5

☐ Pole/pad # _____ ☐ Temporary Service ☐ Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 4500 Descript: INSUL WALLS, FLOOR, S/R, NEW KIT, CABINE

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required			Type: _____	Failure _____ Failure _____ Approval _____ Initial _____
Joint Plan Review Required:			Rough _____	
☐ Building ☐ Plumbing			Barrier-Free _____	
☐ Fire ☐ Elevator			Trench _____	
☐ Elec. Plans Approved			Temp. Serv. _____	
Date: _____			Constr. Serv. _____	
Approved by: _____			TCO _____	
			Other _____	
			Service _____	
			Final _____	
			Barrier-Free _____	
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued _____	
☐ CO ☐ CCO ☐ CA			Final Cut-in-Card Date Issued _____	
Date: _____			Annual Pool Inspection _____	
Approved by: _____			Date of Grounding and Bonding _____	
			Certification _____	

C. CERTIFICATION IN UEU OF OATH
I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Date Receive / /
Control # 2599
Date Issued _____
Permit # _____

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Contractor ☐ Cert Landscape Contr ☐ Exempt Applic

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

- Lighting Fixtures _____
- Receptacles _____
- Switches _____
- Detectors _____
- Light Pole _____
- Motors—Fract. H _____
- Emergency & Exit Lights _____
- Communications Paints _____
- Alarm Devices/F. A.C. Panel _____

TOTAL NUMBERS

- Pool Permit/with UW Lights _____
- Storable Pool/Spa/Hot Tub _____
- KW Elec. Range/Receptacle _____
- KW Oven/Surface Unit _____
- KW Elec. Water Heater _____
- KW Elec. Dryer/Receptacle _____
- KW Dishwasher _____
- HP Garbage Disposal _____
- KW Central AC Unit _____
- HP/KW Space Heater/Air Handler _____
- KW Baseboard Heat _____
- HP Motors 11+ HP _____
- KW Transformer/Generator _____
- AMP Service _____
- AMP Subpanels _____
- AMP Motor Control Center _____
- KW Elec. Sign/Outline Light _____

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$	_____
Minimum Fee \$	_____
State Permit Surcharge Fee \$	_____
TOTAL FEE \$	_____



Work Site Location
1201 HIGH AVE

Approved by: _____

Other _____

Date Received	Control #
1/1	2599

Date Issued
Permit #

Applicant's Signature/Contractor's Signature

☐ Certified Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

INSUL WALLS, FLOOR, S/R, NEW KIT, CABINETS, BATH, H/W FLOORS, ROUGH WIRING,
ROUGH PLUMBING, SDS/FIREMAN WAIVED-NEED PH#NEEDBUL

Water Supply Source

Method of Alarm/Suppression System Supervision

FEE (Office Use Only)

Flammable/Combustible Tanks

Alarm System

☐ Interconnected 110 v

☐ CO Detectors 110 v

Alarm Devices (i.e., smoke, heat, pulls,

water/flow

Supervisory Devices (i.e. horns/strobes, bells)

Other Devices

TOTAL

Suppression System	CBM Type
Fire Dams	

Fire Pump _____ GPM type _____
Dry Pipe/Alarm Valves _____

Pre-action Valves

Springler Heads (Dry and Wet)

Standpipes

Pre-engineered systems

Dry Chemical

CO₂ Suppression

Foam Suppression

Other

Other Systems

Kitchen Hood Exhaust System

Smoke Control System

Fireplace Venting/Metal Chimney

Other _____

Admi

State Pe

Administrative Surcharge \$ 0

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

Applicant: When submitting this form to your local construction code Enforcement Office, please provide one original plus three photocopies



BOROUGH OF UNION BEACH

PLUMBING SUBCODE

TECHNICAL SECTION



Date Received
Control #

2599

Date Issued
Permit #

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

D. TECHNICAL SITE DATA (List of all fixtures.)
NO. FIXTURE/EQUIPMENT

Block/Lot 241/9
Work Site Location 1201 HIGH AVE

Owner in Fee: BRADY, JEAN MARIE & JOHN S.

Tel. (732)264-5187 e-mail 7322645187

Address: 1201 HIGH AVENUE UNION BEACH, NJ 07735

Contractor: KIRK RAUCH Tel. _____

Address: 410 GRANDE RIVER BLVD. TRENTON NJ08755 e-mail _____

Contractor License No. _____ Exp. Date _____

Federal Emp. ID No. 137482930 FAX _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed R-5

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Septic _____

Est. Cost of Plumbing Work \$ 15900

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☐ No Plans Required			Type:	Failure	Approval
Joint Plan Review Required:			Slab		
☐ Building ☐ Plumbing			Rough		
☐ Fire ☐ Elevator			Water		
☐ Plumbing Plans Approved			Sewer		
Date: _____			Fixtures		
Approved by: _____			Gas Equipment		
SUBCODE APPROVAL			Gas Piping		
☐ CO ☐ CCO ☐ CA			LP Gas Tank		
Date: _____			Fuel Oil Piping		
Approved by: _____			Solar		
			TCO		

C. CERTIFICATION IN UEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

Description of Work:
INSUL WALLS, FLOOR, S/R, NEW KIT, CABINETS, BATH, HW FLOORS,
ROUGH WIRING, ROUGH PLUMBING, SD/S/FIREMAN WAIVED-NEED
PH#NEEDBUIL

Administrative Surcharge \$	Minimum Fee \$	State Permit Surcharge Fee \$	Total Fees \$
0			

History for Permit

1201 HIGH AVE

Unit

0

Block/Lot 241/9

Owner BRADY, JEAN MARIE & JOHN S.

1201 HIGH AVENUE

UNION BEACH, NJ 07735

INSUL WALLS, FLOOR, S/R, NEW KIT, CABINETS, BATH, HW

Application / / Permit / /

Inspections and Reviews

----- Dates -----		Permit No.	Type	Subcode	P/F	By	Comment
Done	Sched						
2/12/13	2/12/13		ROUG	ELEC	P	FC	ROUGH
2/12/13	2/12/13		SERV	ELEC	F	FC	FAILED SERVICE
2/12/13	2/12/13		GP	PLUM	P	FK	GAS PIPING TEST PASSED
2/28/13	2/28/13		INS	BLDG	F	LC	insulation
3/05/13	3/04/13		INS	BLDG	P	BB	insulation
4/02/13	4/02/13		FIN	PLUM	F	FK	final FAILED, DISCHARGE VALVES TO OUTSIDE, BOND GAS PIPE CSST
4/04/13	4/04/13		FIN	ELEC	P	LC	final
4/04/13	4/04/13		FIN	PLUM	P	FK	final
4/04/13	4/04/13		SERV	ELEC	P	FC	SERVICE
4/04/13	4/04/13		FIN	FIRE	F	DO	FAILED FINAL
4/09/13	4/09/13		FIN	FIRE	P	DO	FINAL FIRE
2/04/16	2/12/13		ROUG	PLUM	F	FK	BIG NAIL PLATES NEEDED

BOROUGH OF UNION BEACH

650 Poole Avenue

Union Beach, NJ, 07735

(732)526-8687 FAX (732)217-1288

7/21/20