Kathy Burgess

From: Opra
Sent: Thursday, August 18, 2022 1:47 PM
To: Kathy Burgess; Brooke Clayton
Cc: Ed Striedl; Monica Wood
Subject: FW: OPRA request - NJ UCC building permit

-----Original Message-----
From: Thomas Cusick <thomas.cusick@keansburg-nj.us>
Sent: Thursday, August 18, 2022 1:16 PM
To: Opra <opra@keansburg-nj.us>
Subject: FW: OPRA request - NJ UCC building permit

-----Original Message-----
From: Pam Hulseapple <opra+request-34796-0f4e892b@requests.opramachine.com>
Sent: Thursday, August 18, 2022 10:29 AM
To: Thomas Cusick <thomas.cusick@keansburg-nj.us>
Subject: OPRA request - NJ UCC building permit

Dear Keansburg Borough,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.
Records requested:

Please provide NJ uCC building permits, applied for or granted within the past year for the following:

Baypoint Mixed Use Development (Phase 2), Carr Ave, Block 184, Lots 3.01, 3.02 and 3.03, Block 11, Lots 4-7 None on file See attached

Apartment Complex , Beachway Ave, between Oakwood & S Laurel Ave, Block 184, Lot 1 None on file

Grandview Apartments Redevelopment ,104 Carr Ave, Block 53 Lot 1 & Block 15 Lot 2 None on file

Yours faithfully,

Pam Hulseapple

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-34796-0f4e892b@requests.opramachine.com

Is Thomas.Cusick@keansburg-nj.us the wrong address for OPRA requests to Keansburg Borough? If so, please contact us using this form:

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 11/5/2021
Control # B
Date Issued 20210291B
Permit # 6/7/22

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

Block 11 Lot 4,5,6,7 Qualification Code

Work Site Location 19-21 Carr Ave, Keansburg NJ 07734

Owner in Fee: Carr Enterprises LLC.

Tel. (732) 774-1330 e-mail Anthony@sackman.com

Address 513 Cookman Ave Asbury Park NJ 0771
(street / municipality / zip code)

Contractor: Oscar's Electrical Service Inc Tel. (732) 363-6642

Address 1121 Tiller Ave Beachwood NJ 08722 e-mail Oscarselectric01@gmail.con

Contractor License No. 8019 Exp. Date 03/12/2024

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223143825 FAX: (732) 901-0106

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co. JCP&L

Est. Cost of Elec. Work $ 250,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans ~~Approved~~ On File
Date: 11.8.21 ~~Approved~~ by: RD

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 11.8.21
Approved by: RD

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Mark Hammerstone

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Residences

QTY.	SIZE	ITEMS	FEE (Office Use Only)
1,375		Lighting Fixtures	
1,425		Receptacles	
525		Switches	
160		Detectors	
		Light Poles	
82		Motors—Fract. HP	
		Emergency & Exit Lights	
160		Communications Points	
		Alarm Devices/F.A.C. Panel	
3,727		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
53	8	KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
53	45	KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
53	15	KW Dishwasher	
		HP Garbage Disposal	
53	2	KW Central A/C Unit	
53	4	HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
2	800	AMP Service	
53	100	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

175
1b1

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

U.C.C. F120 (rev. 01/21)
Internet version

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 20210241 H
Date Issued / Permit # 11/5/2021 6/7/22

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

Block 19-21 11 Lot 4,5,6,7 Qualification Code

Work Site Location 19-21 Carr Ave, Keansburg NJ 07734

Owner in Fee: Carr Enterprises LLC

Tel. (732) 774-1330 e-mail Anthony@sackman.com

Address 513 Cookman Ave, Asbury Park NJ 07712
(street / municipality / zip code)

Contractor: Oscar's Electrical Service Inc Tel. (732) 363-6642

Address 1121 Tiller Ave Beachwood NJ 08722 e-mail Oscarselectric01@gmail.com

Contractor License No. 8019 Exp. Date 03/12/2024

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223143825 FAX: (732) 901-0106

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co. JCP&L

Est. Cost of Elec. Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Electric Plans ~~Approved~~ ON FILE

Date: 11.5.21 ~~Approved~~ by: RM

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 11.5.21

Approved by: RM

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: Mark Hammerstone

Print name here: Mark Hammerstone

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Temporary Service

QTY.	SIZE	ITEMS	FEE (Office Use Only)
1		Lighting Fixtures	
2		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
3		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	185
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	200	AMP Temp SVC	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F120 (rev. 01/21)
Internet version

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 11/5/2021
Control #
Date Issued
Permit # 20210291

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

Block 11 Lot 4,5,6,7 Qualification Code

Work Site Location 19-21 Carr Ave, Keansburg NJ 07734

Owner in Fee: Carr Enterprises LLC.

Tel. (732) 774-1330 e-mail Anthony@sackman.com

Address 513 Cookman Ave Asbury Park NJ 0771
street municipality zip code

Contractor: Oscar's Electrical Service Inc Tel. (732) 363-6642

Address 1121 Tiller Ave Beachwood NJ 08722 e-mail Oscarselectric01@gmail.con

Contractor License No. 8019 Exp. Date 03/12/2024

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223143825 FAX: (732) 901-0106

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co. JCP&L

Est. Cost of Elec. Work $ 200,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans ~~Approved~~ ON FILE
Date: 11.8.21 ~~Approved~~ by: RM

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 11.8.21
Approved by: RM

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: Mark Hammerstone 6/7/22

Print name here: Mark Hammerstone

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
House/Common Area

QTY.	SIZE	ITEMS	FEE (Office Use Only)
250		Lighting Fixtures	
101		Receptacles	
65		Switches	
		Detectors	
		Light Poles	
6		Motors—Fract. HP	
50		Emergency & Exit Lights	
6		Communications Points	
		Alarm Devices/F.A.C. Panel	
478		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
1	10	KW Elec. Water Heater	
1	8	KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
1	16	KW Central A/C Unit	
1	54	HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
1	30	HP Motors 1/+ HP	
		KW Transformer/Generator	
1	600	AMP Service	
2	200	AMP Subpanels	
1	20	AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
2	5	Fire Booster Pu	

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

U.C.C. F120 (rev. 01/21)
Internet version

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 11/5/21
Control #
Date Issued
Permit # 20210291D

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

Block 11 Lot 4,5,6,7 Qualification Code

Work Site Location 19-21 Carr Ave, Keansburg NJ 07734

Owner in Fee: Carr Enterprises LLC.

Tel. (732) 774-1330 e-mail Anthony@sackman.com

Address 513 Cookman Ave Asbury Park NJ 0771
(street / municipality / zip code)

Contractor: Oscar's Electrical Service Inc Tel. (732) 363-6642

Address 1121 Tiller Ave Beachwood NJ 08722 e-mail Oscarselectric01@gmail.con

Contractor License No. 8019 Exp. Date 03/12/2024

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223143825 FAX: (732) 901-0106

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co. JCP&L

Est. Cost of Elec. Work $ 50,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[✓] Electric Plans ~~Approved~~ ON FILE
Date: 11.9.21 ~~Approved by:~~ RM

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 11.8.21
Approved by: RM

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: 6/7/21

Print name here: Mark Hammerstone

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Retail

QTY.	SIZE	ITEMS	FEE (Office Use Only)
10		Lighting Fixtures	
24		Receptacles	
12		Switches	
		Detectors	
		Light Poles	
4		Motors—Fract. HP	
8		Emergency & Exit Lights	
6		Communications Points	
		Alarm Devices/F.A.C. Panel	
64		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	
2	5	KW Central A/C Unit	
2	12	HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
1	30	HP Motors 1/+ HP	
		KW Transformer/Generator	
1	500	AMP Service	
2	200	AMP Subpanels	
		AMP Motor Control Center	
2	1	KW Elec. Sign/Outline Light	

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

U.C.C. F120 (rev. 01/21)
Internet version

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 10/28/21
Date Issued Permit # 20210291

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

Block 11 Lot 4, 5, 6 Qualification Code _____

Work Site Location 19 Carr Avenue
Keansburg, NJ 07734

Owner in Fee: 19 Carr, LLC

Tel. (732) 962-2881 e-mail anthony@sackman.com

Address 513 Cookman Ave., Asbury Park, NJ 07712
street municipality zip code

Contractor: Sackman, LLC Tel. (732) 962-7881

Address 165 W. 73rd St e-mail anthony@sackman.com
NY, NY 10023

Contractor License No. or Builder Registration No. _____ Exp. Date _____

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

Federal Emp. ID No. 47-4018750 FAX: ( ) _____

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.

Sign here: Anthony D'Amore

Print name here: Anthony D'Amore

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Footing and Foundation Only

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	10/14/21	RK
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 10/14/21
Approved by: Paul Dennen

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing			On Back	
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

TYPE OF WORK:
[✓] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] 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

FEE (Office Use Only)
$ _____

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

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed R2
No. of Stories 4 over 1
Height of Structure 67' 10½" ft.
Area — Largest Floor 18,886 sq. ft.
New Bldg. Area/All Floors _____ sq. ft.
Volume of New Structure _____ cu. ft.
Max. Live Load _____
Max. Occupancy Load _____

Constr. Class Present _____ Proposed MX

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $ 600,000
2. Rehabilitation $ _____
3. Total (1+ 2) $ 600,000

BUILDING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 8/24/21
Control # 92016148
Date Issued 8/27/21
Permit # 20240224

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

Block 11 Lot 4, 5, 6 Qualification Code

Work Site Location 19 Carr Avenue
Keansburg, NJ 07734

Owner in Fee: 19 Carr, LLC

Tel. (732) 962-2881 e-mail anthony@sackman.com

Address 513 Cookman Ave, Asbury Park, NJ 07712
street municipality zip code

Contractor: Sackcon, LLC Tel. (732) 967-2881

Address 165 W. 73rd St. e-mail anthony@sackman.com
NY, NY 10023

Contractor License No. or Builder Registration No. Exp. Date

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

Federal Emp. ID No. 47-4018750 FAX: ( )

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.

Sign here: Anthony D'Amore

Print name here: Anthony D'Amore

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Demolition

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date / Initial

[X] No Plans Required 8/25/21 PD
[ ] All
[ ] Footings/Foundations
[ ] Structural/Framework
[ ] Exterior
[ ] Interior

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 8/25/21
Approved by: Paul Dreuss

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 2/23/22
Approved by: Paul Dreuss

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			2/23/22	PD
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] 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 _____
[X] Demolition

FEE (Office Use Only)
$ 75

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

B. BUILDING CHARACTERISTICS

Use Group 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.
Max. Live Load
Max. Occupancy Load

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $ 60,000.00
2. Rehabilitation $
3. Total (1+ 2) $ 60,000.00

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 12/1/21 2021029IE

Date Issued / Permit # 12/14/21 2021 02918

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

Block 11 Lot 4 Qualification Code

Work Site Location 19 Carr Avenue
Ocean sburg NJ 07734

Owner in Fee: 19 Carr LLC.

Tel. (732) 962-2881 e-mail anthony@sackman.com

Address 513 Cookman Ave. Asbury Park, NJ 07712
street municipality zip code

Contractor: Carr Enterprises, Inc. Tel. (732) 962-2881

Address 513 Cookman Ave e-mail anthony@sackman.com
Asbury Park, NJ 07712

Contractor License No. or Builder Registration No. Exp. Date

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

Federal Emp. ID No. 47-4018750 FAX: ( )

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.

Sign here:

Print name here: Michael J. Ryan II

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Footing & Foundation only
Mat slab for commercial
spaces

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	12/6/21	PJS
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 12/6/21
Approved by: Paul Cuccia

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] 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

FEE (Office Use Only)
$ 2,400

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

B. BUILDING CHARACTERISTICS

Use Group 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.
Max. Live Load
Max. Occupancy Load

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $ 600,000
2. Rehabilitation $
3. Total (1+ 2) $ 600,000

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 7/23/21
Control # 9201607
Date Issued 8/11/21
Permit # 20210206

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

Block 11 Lot 4 Qualification Code

Work Site Location 19 Carr Ave
Keansburg NJ 07734

Owner in Fee: Carr Realty

Tel. e-mail

Address 513 Cookman Ave Asbury Park
street municipality zip code

Contractor: FaBCo Plumbing + Heating Tel.

Address 484 Ricky Lane e-mail
Long Branch, NJ 07740

Contractor License No. NJP-5712 Exp. Date 6-30-2023

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 471260761 FAX: 732 222-4155

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 800.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 7/27/21
Approved by: MV

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough	8/13/21			MV
Water	8/13/21			MV
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: Bob Fabian

Print name here:

[✓] Licensed Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Cut + Cap Sewer water

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	105
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other Cut+Cap	

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 11 Lot 4, 5, 6, 7 Qualification Code

Work Site Location 19-21 Carr Avenue, Keansburg, NJ 07734

Owner in Fee: Carr Enterprises, LLC

Tel. 732 774-1330 e-mail Anthony@sackman.com

Address 513 Cookman Ave Asbury Park, NJ 07712
(street, municipality, zip code)

Contractor: Guardian Mechanical Tel. 201-888-6458

Address 123 Woodland Ave e-mail guardian.mechanical
Westwood NJ 07675 j@gmail

Contractor License No. 12949 Exp. Date 6/23

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 143847633 FAX:

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed X

Building Sewer Size 6 Public Sewer X Private Septic

Water Service Size 4 Public Water X Private Well

Est. Cost of Plumbing Work $ $300,000

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Marc A Glannotti Jr

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
60	Water Closet	$
	Urinal/Bidet	
60	Bath Tub	
60	Lavatory	
60	Shower	
100	Floor Drain	
60	Sink	
60	Dishwasher	
	Drinking Fountain	
6	Washing Machine	
4	Hose Bibb	
60	Water Heater	
	Fuel Oil Piping	
4	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
2	Backflow Preventer	
	Greasetrap	
1	Sewer Connection	
2	Water Service Connection	
120	Stacks	
	Other	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: 11-5-21 Approved by: MV
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 11-8-21
Approved by: MV

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water			5/31/22	JC
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

5/3/22 Sewer inspection - Sheathing under front deck

6/7/22 - Underground Building drain.

5/31/22 Curb to North side of bldg.

6" vertical to be sleeved as per 2.12 NSPC.

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 11/5/2021
Control #
Date Issued
Permit # 20210291B
6/7/22

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

Block 11 Lot 1,5,6,7 Qualification Code
Work Site Location 19-21 Carr Avenue, Keansburg, NJ 07734
Owner in Fee: Carr Enterprises, LLC
Tel. 732 774-1330 e-mail Anthony@sackman.com
Address 513 Cookman Ave Asbury Park, NJ 07712
(street, municipality, zip code)
Contractor: Guardian Mechanical Tel. 201-888-6455
Address 123 Woodland Ave e-mail guardian.mechanical-jr@gmail
Westwood NJ 07675
Contractor License No. 12949 Exp. Date 6/23
Home Improvement Contractor Registration No. or Exemption Reason
Federal Emp. ID No. 143847633 FAX:

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed X
Building Sewer Size 6 Public Sewer X Private Septic
Water Service Size 4 Public Water X Private Well
Est. Cost of Plumbing Work $ $200,000

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:
Print name here: Marc A Giannotti Jr
[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Residences

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
60	Water Closet	
	Urinal/Bidet	
60	Bath Tub	
60	Lavatory	
60	Shower	
100	Floor Drain	
60	Sink	
60	Dishwasher	
	Drinking Fountain	
6	Washing Machine	
4	Hose Bibb	
60	Water Heater	
	Fuel Oil Piping	
4	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
2	Backflow Preventer	
	Greasetrap	
1	Sewer Connection	
2	Water Service Connection	
120	Stacks	
	Other	

10,285

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Plumbing Plans Approved
Date: 11-5-21 Approved by: MW
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 11-5-21
Approved by: MW

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

U.C.C. F130 (rev. 11/09)
Internet version

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

19 Carr Ave 1174