

987 LOT 7 ADDRESS (SITE) 2210 Brookfield St PERMIT NO. 05-678

CITY OF VINELAND
Vineland, New Jersey 08360
Phone: 856-794-4113



CONSTRUCTION PERMIT APPLICATION

At Complete: Sections I, II, III, IV, V(a), V(b) - (Optional VI)

NOTIFICATION

Proposed Work-Site at: 2210 Brookfield St
Name of Owner in Fee: Jay Cafiso
Address: 2210 Brookfield St Vineland NJ 08361
Street Municipality Zip Code
Phone No.: 856-696-8159 Fax No.: 856-691-9174
Ownership in Fee: Public Private
Principal Contractor: Barretta Plumbing, Inc.
Address: 1784 Pine Ave
Phone No.: 856-691-1950 Fax No.: 856-691-9174
License No. or, if new home, Builder's Reg. No.: 12089 Exp. Date: 6-31-05
General Emp. No.: Social Security No.:
Architect or Engineer: N/A
Phone No.: Fax No.:
Responsible Person in Charge of Work: John Barretta (Must Be N.J. Resident)
Address: 1784 Pine Ave Vineland NJ 08360
Phone No.: 856-691-1950 Fax No.: 856-691-9174

VI. HEATING FUEL

Principal Secondary Type: CK#9335 on Hold.
Gas
Oil
Electric
Solid (Wood, Coal, Etc.)
Propane
Solar
Other

V(a). TYPE OF SEWAGE DISPOSAL

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

V(b). TYPE OF WATER SUPPLY

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

VI. BUILDING/SITE CHARACTERISTICS

- Number of Stories
- Height of Structure ft.
- Area — Largest Floor sq. ft.
- Building Area — All Floors sq. ft.
- Volume of Structure cu. ft.
- Construction Classification
- Total Land Area Disturbed sq. ft.
- Flood Hazard Zone
- Base Flood Elevation ft.
- Wetlands — Yes sq. ft.
No
- Fire Grading
- Maximum Live Load
- Maximum Occupancy Load

Office Use Only

PROPOSED WORK

Small Job (\$5,000 and no prior approvals)
New Building
Addition
Alteration
Electrical
Plumbing
Fire Protection
Elevator Devices
Asbestos Abatement
Lead Hazard Abatement
Demolition

Est. Cost

2400-

TOTAL COSTS

2400

VI. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

- ☐ Hotels (R-1)
- ☐ Multi-Family (R-2)
- ☐ Two-Family (R-3) BOCA
- ☐ Two-Family (R-4) CABO
- ☒ One-Family (R-3) BOCA
- ☐ One-Family (R-4) CABO

Housing Units Gained

Housing Units Lost

Sale Rent

Sale Rent

VII. NON-RESIDENTIAL

- ☐ Theatres with Stage (A-1-A)
- ☐ Movie Theatres (A-1-B)
- ☐ Night Clubs (A-2)
- ☐ Restaurants, Libraries, Museums (A-3)
- ☐ Religious Assembly (A-4)
- ☐ Outdoor Assembly (A-5)
- ☐ Business (B)
- ☐ Educational (E)
- ☐ Moderate-Hazard Factory (F-1)
- ☐ Low-Hazard Factory (F-2)
- ☐ High-Hazard (H)
- ☐ Institutional Detention Center (I-1)
- ☐ Hospitals, Infirmarys (I-2)

- ☐ Group Homes (I-3)
- ☐ Mercantile (M)
- ☐ Moderate-Hazard Warehouse (S-1)
- ☐ Low-Hazard Warehouse (S-2)
- ☐ Temporary, Misc. (U)
- ☐ Other

III. DO YOU WANT: (optional)

1. ☐ Partial Releases

2. ☐ Prototype Processing

IES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

- Elevators, Escalators, Lifts, Dumbwaiters, Moving Walks
- High Pressure Boilers
- ☐ Pressure Vessels
- ☐ Refrigeration Systems
- ☐ Cross-Connections, Backflow Preventers
- ☐ Hazardous Uses, Places of Assembly
- ☐ Sprinklers
- ☐ Smoke Control Systems in Open Walls
- ☐ Underground Storage Tanks

State Specific Use:

Change in Use Group,

Indicate Former:

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PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Control #
Date Issued
Permit #

5/26/05
05-678

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

Block 987 Lot 7 Qualification Code _____
Work Site Location 2210 Brookfield St

Owner in Fee Jay Caliso
Address 2210 Brookfield St

Vineland NJ 08361

Tel (856) 691-1950 696-8159

Contractor Barretta Plumbing, Inc

Address 1784 Pine Ave

Vineland NJ 08360

Tel (856) 691-1950 FAX (856) 691-9147

Contractor License No. 12089

Federal Emp. No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present R-5a Proposed R-5a

Building Sewer Size 4" Public Sewer _____ Private Septic _____

Water Service Size 1" Public Water _____ Private Well _____

Est. Cost of Plumbing Work \$ 2400-

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)		
		Type:	Failure	Failure	Approval	Initial
☒ No Plans Required		Slab	_____	_____	_____	_____
☐ Joint Plan Review Required:		Rough	_____	_____	_____	_____
☐ Building	☐ Electric	Water	_____	_____	_____	_____
☐ Fire	☐ Elevator	Sewer	_____	_____	_____	_____
☐ Plumbing Plans Approved		Fixtures	_____	_____	_____	_____
Date: <u>5-24-05</u>		Gas Equipment	_____	_____	_____	_____
Approved by: <u>[Signature]</u>		Gas Piping	_____	_____	_____	_____
SUBCODE APPROVAL		LPGas Tank	_____	_____	_____	_____
☐ CO	☐ CCO	Fuel Oil Piping	_____	_____	_____	_____
Date: _____		Solar	_____	_____	_____	_____
Approved by: _____		TCO	_____	_____	_____	_____
		_____	_____	_____	_____	_____
		_____	_____	_____	_____	_____

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's Signature/Contractor's Seal and Signature

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT
_____	Water Closet
_____	Urinal/Bidet
_____	Bath Tub
_____	Lavatory
_____	Shower
_____	Floor Drain
_____	Sink
_____	Dishwasher
_____	Drinking Fountain
_____	Washing Machine
_____	Hose Bibb
_____	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
_____	Other
_____	Other

FEE (Office Use Only)

\$ _____

55

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

59

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Phone: 856-794-4113

**CONSTRUCTION
PERMIT**

Date Issued 5/26/05
Permit # 05-678

IDENTIFICATION	BLOCK 987	LOT 7	CONTRACTOR ADDRESS	BARRETTA PLUMBING 1784 PINE AVE
Work Site Location:	2210 BROOKFIELD ST			VINELAND, NJ 08360
OWNER IN FEE:	JOY CAFISO			(856)691-1950
ADDRESS	2210 BROOKFIELD ST			
TELEPHONE NO.	VINELAND, NJ 08361			
	(856) 696-8159			

Is hereby granted permission to perform the following work:

- ☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRIC ☐ FIRE PROTECTION ☐ DEMOLITION
- ☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
- (Subchapter 8 only)

DESCRIPTION OF WORK:

SEWER CONNECTION

NOTE: If construction does not commence within one (one) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$ 2,400

KEVIN KIRCHNER

Construction Official

5/26/05
Date

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C.5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode;
2. Foundations and all walls up to grade level prior to back filling;
3. Utility services, including septic.
4. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.

☐ Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by an provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.

PAYMENTS	(Office Use Only)
BUILDING	\$
ELECTRICAL	\$
PLUMBING	\$55
FIRE PROTECTION	\$
ELEVATOR DEVICES	\$
OTHER	\$
STATE PERMIT FEE	\$4
CERT. OF OCCUPANCY	\$
ZONING	\$
TOTAL	\$59
CHECK # <u>9335</u>	
CASH	☐
COLLECTED BY	<u>MLB</u>