



Woodland Township

BUILDING SUBCODE

TECHNICAL SECTION



Date Received **5/03/2004**
Control # **92000124**

Date Issued **5/03/2004**
Permit # **20040017**

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

Block/Lot **3701/3**

Work Site Location **4031 ROUTE 563**

Owner in Fee: **PEPPER, AL**

Tel. _____ e-mail _____

Address: _____, _____, _____
Street Municipality zip code

Contractor: _____ Tel. _____

Address: _____ e-mail _____

Contractor License No. _____ Exp. Date _____

Federal Emp. ID No. _____ 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.

Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NEW S/F DWELLING S/F NEW S/F DWELLING

TYPE OF WORK

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

FEE (Office Use Only)

578

0

578

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ 578

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required	_____	_____	Type:	Failure Failure Approval Initial
☐ All	_____	_____	Footings	_____
☐ Footing	_____	_____	Footings Bonding	_____
☐ Foundation	_____	_____	Foundation	_____
☐ Frame	_____	_____	Slab	_____
☐ Other	_____	_____	Frame	_____
			Truss Sys./Bracing	_____
Joint Plan Review Required			Barrier-Free	_____
☐ Elec. ☐ Plumb ☐ Fire ☐ Elevator			Insulation	_____
			Finishes-Base Layer	_____
			Finishes-Final	_____
			Energy	_____
			Mechanical	_____
			TCO	_____
			Final	_____
			Other	_____

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Date: _____

Approved by: _____

B. BUILDING CHARACTERISTICS

Use Group Present **R-4** Proposed _____

Constr. Class Present _____ Proposed _____

No. of Stories _____

Height of Structure _____ FT

Area - Largest Floor _____ Sq. Ft.

New Bldg. Area/All Floors **1088** Sq. Ft.

Volume of New Structure **21424** Cu. Ft.

Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work :

1. New Bldg. \$ **130,000**

2. Rehabilitation \$ _____

3. Total (1+2) \$ **130,000**

U.C.C. F130 (rev. 07/05)
Internet version

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