BLOCK 1192.14 LOT 17 QUALIFICATION CODE _____ ADDRESS (SITE) 35 Clay Cir PERMIT NO. 99-2415

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Application Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 35 Clay cir
2. Name of Owner in Fee: Sullivan Tel. [redacted]
   Address Aeme (street) (municipality) (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Cardinal Roofing Tel. ( ) 458-92[illegible]
   Address P.O. Box 333 Brick NJ
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 21-074-2690 FAX: ( ) _____
5. Architect or Engineer _____ Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work Bill Glynn
   Tel. ( ) 458-9222 FAX ( ) _____

Re-Roof over 1 layer

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 35.-		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	1.		
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 36.-		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	
2.	Height of Structure ft.	
3.	Area — Largest Floor sq. ft.	
4.	New Building Area sq. ft.	
5.	Volume of New Structure cu. ft.	
6.	Construction Classification	
7.	Total Land Area Disturbed sq. ft.	
8.	Flood Hazard Zone	
9.	Base Flood Elevation ft.	
10.	Wetlands yes / no	
11.	Max. Live Load	
12.	Max. Occupancy Load	

II. PROPOSED WORK

		Est. Cost	OPTIONAL (for office use only) Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work		CAS	6/24/99				10/27/99		OK
2.	☐ New Building									
3.	☐ Addition									
4.	☐ Alteration									
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☐ Electrical									
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition									
	TOTAL COSTS	1,000.00								

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10414246

U.C.C. F100-1 (rev. 3/96)

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 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 Cardinal Roofing

Address P.O. Box 333

Brick N.J.

Telephone ( ) 458-9222

Signature Bill Glynn

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

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	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

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

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

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				
☐ Lead Abatement Clearance Certificate	No.				

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 06/29/99
Control #
Permit # 99-2415

0002 0.00
992415# 35.00
LOT 17 # 1.00
BUILDING 36.00
D.C.A. 36.00
TOTAL 0.00
CHECK 12:21
CHANGE
06/29/99 NO. 5 0027A005

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 1192.14 Lot 17 Qual

Work Site Location 35 CLAY CIRCLE

Owner in Fee SULLIVAN DOLORES
Address SAME
BRICK, NJ 08724-
Telephone ( )

Contractor CARDINAL ROOFING & SIDING
Address 1108 INDUSTRIAL PARKWAY
BRICK, NJ 90845-8922
Telephone ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 21-0742690

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:
RE-ROOF

PAYMENTS (Office Use Only)

Building	35
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	1
Cert. of Occupancy	0
Other	
Total	36
Check No.	2309
Cash	
Collected By	HP

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 $ 1,000

Construction Official

06/29/99
Date

U.C.C. P170 (rev. 3/94)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 06/29/99
Date Issued 06/29/99
Control #
Permit # 99-2415

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

Block 1192.14 Lot 17 Qual

Work Site Location 35 CLAY CIRCLE

Owner in Fee SULLIVAN DOLORES
Address SAME
BRICK, NJ 08724-
Tele.( )
Contractor CARDINAL ROOFING & SIDING
Address 1108 INDUSTRIAL PARKWAY
BRICK, NJ 90845-8922
Tele.( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 21-0742690

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

RE-ROOF

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Othe		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire [ ] Elev

SUBCODE APPROVAL
[ ] CC [ ] CCC [X] CA
Date: 10-29-99
Approved By: J. Chrisler

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type				
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 1,000
3. Total (1+2)$ 1,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	35
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Paid [X] Check # 2309 Minimum Fee	$ 0
Collected by: WP TOTAL FEE	$ 35
DCA Training Fee	$ 1

U.C.C. F110 (rev. 3/96)

Sullivan 35 Clay Circle
New Roof

The Greenbriar Association

APPROVED 6/21/99

Architectural Control Committee

Date: 6/15/99

Resident: DOLORES SULLIVAN

Address: 35 CLAY CIRCLE

Block: 1192.14 Lot: 17

* (Brick Township Permit Required) #

Application to the Greenbriar Association for the purpose of one or several of the following to the dwelling or grounds.

1. Changes: _____

2. Renovations: REPLACE ROOF ✓

3. Other: _____

If a plan is submitted does it include:

1. Dimensions? YES

2. Material to be used? YES

3. Color (if applicable) - a sample must be submitted. WHITE ✓

The above work will be done by: CARDINAL ROOFING ✓

James 6-16-99

Dolores D. Sullivan
OWNER'S SIGNATURE

GREENBRIAR ALTERATION AGREEMENT

BLOCK 1192.14 LOT 17

THIS AGREEMENT entered into by and between THE GREENBRIAR ASSOCIATION, hereinafter referred to as the Party of the First Part- ASSOCIATION: and hereinafter referred to as the Party of the Second Part - Applicant:

WITNESSETH: WHEREAS under the terms of the covenants and restrictions, by-laws, rules and regulations of The Greenbriar Association, an Architectural Control Committee is charged with the responsibility of reviewing requests for alterations, additions, to any dwelling or its grounds, in the development known as Greenbriar, and subject to the approval of The Association; and

WHEREAS all members of said Association have by their deeds and the adoption of the By-Laws and Rules and Regulations agreed to abide by the recommendation of the Architectural Control Committee and are required to make application and obtain said approval prior to commencing any alterations, changes, renovations and repairs, etc.:

NOW, THEREFORE, in consideration of the sum of One ($1.00) Dollar in hand paid by each party unto the other, receipt whereof is hereby acknowledged, and for the further mutual promises and covenants contained herein, it is represented and agreed as follows:

1. The Applicant is the owner of a house and lot in the development known as Greenbriar in Brick Township, New Jersey, known as Block _____ Lot _____.

2. The Applicant has made an application to Greenbriar Association, in accordance with the covenants and restrictions and by-laws to make certain alterations, changes, etc., to said dwelling unit or grounds, as more particularly described on Exhibit A attached hereto and made a part hereof.

3. Under the terms of the Deed and covenants and restrictions and by-laws and rules and regulations of Greenbriar Association, member may not make any alteration or change, etc., to che premises without the prior written consent of the Greenbriar Association.

4. After due inspection and examination of the plans attached hereto, the Association, accepts its Archetectural Control Committee's recommendation and grants its consent to the alterations and changes, etc., requested herein on condition that the applicant agrees to maintain the alterations in a manner satisfactory to the Committee, including the removal of two feet of sod or grass around the entire structure, and at the sole expense of the applicant.

5. The Greenbriar Association's consent to the alteration or addition requested in this application does not in any manner relieve the herein named applicant from abiding by the Brick Township Zoning Ordinance or Building Code which apply to Block _____ Lot _____.

6. Excavation, digging, shrubbery removal, sprinkler system relocation, or any other areas affected or disturbed shall be the sole responsibility of the applicant. A $50.00 deposit shall be posted to guarantee removal of excess concrete and clean up of debris from the development. Any drainage problem created shall be corrected by the applicant at his expense.

7. Porch enclosures shall be aluminum in accordance with the specifiations of the Aluminum Mfrs. Association or the B.O.C.A. Code. The Panelcraft or equal aluminum roof shall tie in under the present roof line.

8. This approval shall not be construed, nor is it the intent of the Board of Trustees to give license or establish any precedent for any other homeowner to construct or make any architectural changes.

9. In the event any of the work contemplated, involves entry to or passage across any Association property, then the contractor or sub-contractor performing the work shall provide Certificate of Insurance naming the Greenbriar Association and Board of Trustees in amounts satisfactory to the Board failing which, the applicant shall save harmless the Greenbriar Association and the Board of Trustees.

The Association assumes no responsibility, written or implied, for applicant's confirmation or non-conformation to said Zoning Ordinance or Building Code. Abidance by the Zoning Ordinance and Building Code and the securing of the necessary Brick Township Building Permits is the sole responsibility of the herein named applicant.

NOW, therefore be it resolved on this 21 day of June 19 99 at a meeting of the Board of Trustees of the Greenbriar Association on motion duly made and passed that said application is approved as submitted subject to the following.

IN WITNESS WHEREOF said parties have hereunto set their hands and seals or caused these presents to be signed by its proper corporate officers and affixed its corporate seal hereto the day and year first above written.

THE GREENBRIAR ASSOCIATION

BY Annette D. Otero
PRESIDENT

SECRETARY

ACCEPTED M A James

Debra L Sullivan
OWNER

COUNTER FORM
PLEASE PRINT

TOWNSHIP OF BRICK
101 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: 35 Clay Cir. Date Rec'd.:
Block: 1192.14 Lot: 17 Date Issued:
Owner in Fee: Sullivan Control #:
Address: same Permit #:
State: NJ Zip: 08723 Phone: [redacted]
SS #: Provide only if applicant is owner

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature:

Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR: Cardinal Roofing
ADDRESS: P.O. Box 333
Brick NJ
PHONE: 458-9222
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #): 21-074-3690

TECHNICAL SITE DATA

DESCRIPTION OF WORK:
16 - roof over 1 layer

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☑ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories:
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature: William Glynn

Estimated Cost of Building Work:
New Building (1): $
Aleration (2): $
TOTAL (1+2): $ 1,000.00
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

ELECTRICAL SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Fract. HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		

TOTAL NUMBERS	
Pool Permit w/UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range / Receptacle	KW
KW Oven / Surface Unit	KW
KW Elec. Water Heater	KW
KW Elec. Dryer / Receptacle	KW
KW Dishwasher	KW
HP Garbage Disposal	HP
KW Central A/C Unit	KW
HP/KW Space Heater/Air Handler	HP/KW
KW Baseboard Heat	KW
HP Motors 1/+ HP	HP
KW Transformer/Generator	KW
AMP Service	AMP
AMP Subpanels	AMP
AMP Motor Control Center	AMP
AMP Elec. Sign/Outline Light	KW
Other	
Other	
Other	
Other	

Estimated Cost of Electrical Work: $
Signature (print name):
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WOR

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervsion
Proprietary Supervision

Flammable Liquip Storage Tanks Capacity: Fu
Combustable Liquid Srorage Tanks Capacity: Fu
L.G.P. Storage Tanks Capacity: Fu

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Derectors	
Total	

Stand Pipes
Kitchen Hood Exhaust Systems

Pre-Engineered Systems
Co2 Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas or Oil Fired Appliance
Other
Other
Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date: