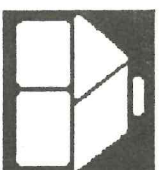




**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued 6/2/04
Control #
Permit # 04-267

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

Block 285

Lot 32

Work Site Location 1 Marion St. South River N.J. 08882

Owner in Fee David Bernato

Address 1 Marion Street

Tele. (732) 238-4304

Contractor owner

Address

Tele. () Fax ()

Lic. No. or Bids. Reg. No.

Federal Emp. No.

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

FRONT STEPS

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required			Type:	Failure Failure Approval Initial
☐ All			Footings	
☐ Foundation			Foundation	
☐ Slab			Slab	
☐ Frame			Frame	
☐ Other			Barrier-Free	
Joint Plan Review Required:			Insulation	
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Finishes	
SUBCODE APPROVAL			Energy	
☐ CO ☐ CA			Mechanical	
Date 6/1/04			TCO	
Approved by: [Signature]			Other	
			Final	
			Barrier-Free	

B. BUILDING CHARACTERISTICS

Use Group Present 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. \$ 800.00
2. Alteration \$ 800.00
3. Total (1+2) \$ 800.00

UCC/PRO F-110 (REV3/96)

Professional Printing

(856) 468-7933

1. White/Inspector Copy
3. Pink/ Office Copy
4. White Tag

Administrative Surcharge	\$	
Minimum Fee	\$	30
DCA Training Fee	\$	
TOTAL FEE	\$	31



**CONSTRUCTION
PERMIT**

Date Issued 6/2/04
Control #
Permit # 04-267

IDENTIFICATION Block 285

Work Site Location 1 Marion Street

Owner in Fee South David Bernato

Address South Marion Street N.J. 08882

Tele. (732) 238-4304

is hereby granted permission to perform the following work:

- ☐ BUILDING
☐ ELECTRICAL
☐ ELEVATOR DEVICES
☒ FIRE PROTECTION
☒ OTHER Front Steps

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 \$ 800.00
CONSTRUCTION OFFICIAL

U.C.C. Form F-170C

1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT

TECHNICAL SITE DATA

ity No.	
PAYMENTS (Office Use Only)	30
Building	
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	1
DCA Training Fee	
Cent. of Occ.	
Other	31
Total	
Check No.	
Cash	
Collected By:	[Signature]
(see reverse side)	