

RECEIVED

NOV 23 1998



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 732 Lions La. Brick NJ
 2. Name of Owner in Fee: Stephen Desmond Tel. [REDACTED]
 Address 732 Lions La. Brick 08723
street municipality zip code
 3. Ownership in Fee: Public _____ Private ☒
 4. Principal Contractor: SELF Tel. () _____
 Address _____
 License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
 Federal Employee No. _____ FAX: () _____
 5. Architect or Engineer _____ Tel. () _____
 Address _____
 6. Responsible Person in Charge of Work _____
 Tel. () _____ FAX () _____

Demo I.G. Pool

V. FEE SUMMARY (for office use only)

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

VI. BUILDING/SITE CHARACTERISTICS

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 _____

(office use only)

II. PROPOSED WORK

- ☐ Minor Work
- ☐ New Building
- ☐ Addition
- ☐ Alteration
- ☐ Fire Protection
- ☐ Plumbing
- ☐ Electrical
- ☐ Elevator Devices
- ☐ Asbestos Abat. Subch. 8
- ☐ Lead Hazard Abatement
- ☒ Demolition

TOTAL COSTS 1,000

OPTIONAL (for office use only)

Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>OPP</u>					<u>12-7-98</u>		<u>OK</u>

IV. DOES 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 Wells
- ☐ Underground Storage Tanks

VII. 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

No. of dwelling units:

Before Construction _____
 After Construction _____
 Net Gain or Loss _____

B. NON-RESIDENTIAL

- State Specific Use:
- Use Group:
- Change in Use Group, Indicate Former:

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

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

11-19-98

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

Address

Telephone ()

Signature

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	Other
Building _____	Energy _____	
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

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 11/23/98
Control #
Permit # 98-4084

IDENTIFICATION	Block 673.13	Lot 10	Qual
Work Site Location	732 LIONS LN DEMO OF 1 G POOL		
Owner in Fee	DESSAND, STEPHEN		
Address	SAME		
Telephone	BRICK, NJ 08723-		
Contractor	HOME OWNER		
Address			
Telephone	()		
Lic. No. or Bldrs. Reg. No.			
Federal Emp. No.	HO-		

Is hereby granted permission to perform the following work:

☒ BUILDING	☐ PLUMBING	☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL	☐ FIRE PROTECTION	☐ DEMOLITION
☐ ELEVATOR DEVICES	☐ ASBESTOS ABATEMENT	☐ OTHER

(Subchapter 8 only)

DESCRIPTION OF WORK:
DEMO OF INGROUND POOL FILLED WITH CLEAN FILL

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 \$ 600

Construction official

11/23/98
Date

N.C.C. #170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	35
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
ICA Training Fee	0
Cert. of Occupancy	0
Other	
Total	35
Check No.	
Cash	X
Collected By	AJP

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD

UCC NEW JERSEY
BUILDING

Date Received 11/23/98
Date Issued 11/23/98

673.13

Block 673.13 Lot 10 10th

Work Site Location 732 LIONS LN

DEMO OF 1 G POOL

Owner in Fee DESMOND, STEPHEN

Address SAME

BRICK, NJ 08723-

Tele. [REDACTED]

Contractor

Address

Tele. () Fax ()

Lic. No. or Bldgs. Reg. No.

Federal Emp. No. NO-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

No Plans Req. 1/23/98

All

Roofing

Foundation

Frame

Other

Joint Plan Review Required:

Elect [] Plumb [] Fire

SUBCODE APPROVAL [] Elev

CO [] CCO [] CA

Date:

Approved By:

Other

Final

B. BUILDING CHARACTERISTICS

Use Group Present Proposed U

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.

INSPECTIONS

Type

Roofing

Foundation

Slab

Frame

BarrierFree

Insulation

Finishes

Energy

Mechanical

TCD

Other

Final

BarrierFree

Dates (Month/Day)

Failure Failure Approval Initial

Roofing

Foundation

Slab

Frame

BarrierFree

Insulation

Finishes

Energy

Mechanical

TCD

Other

Final

BarrierFree

Est. Cost of Bldg. Work:

1. New Bldg. \$ 0

2. Alteration \$ 600

3. Total (1+2) \$ 600

Industrialized Building:

[] State Approved

[] HUD

Signature

U. TECHNICAL SITE DATA
DESCRIPTION OF WORK

DEMO OF INGROUND POOL FILLED WITH CLEAN FILL

OK
[Signature]

I hereby certify that I am the agent of owner
of record and am authorized to make this application.

DUMP RECEIPT REQUIRED
FOR FINAL INSPECTION

FEES (Office Use Only)

[] New Building 0

[] Addition 0

[X] Alteration 0

[] Roofing 0

[] Siding 0

[] Fence 0 Height (exceeds 6')

[] Sign 0 Sq. Ft.

[] Pool 0

[] Asbestos Abatement Subchapter 8 0

[] Lead Haz. Abatement NJAC 5:17 0

[] Other DEMO POOL 35

[] Demolition 0

Administrative Surcharge \$ 0

Minimum Fee \$ 0

TOTAL FEE \$ 35

DCA Training Fee \$ 0

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

COUNTER FORM
PLEASE PRINT

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

Site Location:	732 Lions La	Date Rec'd:	
Block:	10	Lot:	11
Owner in Fee:		Control #:	
Address:	732 Lions La. Brick	Permit #:	
State:	NJ	Zip:	08723
SS #		Phone:	
Provide only if Applicant is owner			

PLUMBING SUBCODE	BUILDING SUBCODE
CONTRACTOR:	CONTRACTOR: S/E
ADDRESS:	ADDRESS:
PHONE:	PHONE:
LIC #:	LIC #:
LIC EXPIRATION DATE:	LIC EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):	FEDERAL EMP. # (or S.S. #):
TECHNICAL SITE DATA (LIST ALL FIXTURES)	TECHNICAL SITE DATA
NO. FIXTURE/EQUIPMENT	DESCRIPTION OF WORK:
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: \$	TYPE OF WORK
Signature:	☐ New Building
Owner ☐ Contractor ☐	☐ Addition ☐ Fence: Height (6' or More)
SUBCODE APPROVAL:	☐ Alteration ☐ Sign: Sq. Ft.
PLANS: Required ☐ Approved ☐	☐ Roofing ☐ Pool (In Ground)
Approved by:	☐ Siding ☐ Pool (Above Ground)
Date:	☐ Other: ☐ Asbestos Abatement
CONTRACTOR AFFIX SEAL:	☐ 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: Stephen Alessandri
	Estimated Cost of Building Work: \$1,000
	New Building (1): \$
	Alteration (2): \$
	TOTAL (1+2): \$
	SUBCODE APPROVAL:
	PLANS: Required ☐ Approved ☐
	Approved by:
	Date:

COUNTER FORM

PLEASE PRINT

ELECTRICAL SUBCODE			FIRE PROTECTION SUBCODE		
CONTRACTOR:			CONTRACTOR:		
ADDRESS:			ADDRESS:		
PHONE:			PHONE:		
LIC. #:		EXP. DATE:	LIC. #:		EXP. DATE:
FEDERAL EMPL. # (or S.S. #):			FEDERAL EMPL. # (or S.S. #):		
TECHNICAL DATA (LIST ALL FIXTURES)			TECHNICAL DATA (DESCRIPTION OF WORK)		
DESCRIPTION	QTY	SIZE			
ITEMS					
Lighting Fixtures					
Receptacles					
Switches					
Detectors					
Light Poles			Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar		
Motors - Fract. HP			Heating Sys: ☐ New ☐ Existing		
Emergency & Exit Lights			Location of Furnace / Boiler		
Communications Points					
Alarm Devices/E.A.C. Panel					
TOTAL NUMBERS					
Pool Permit w/UW Lights			Water Supply Source		
Storable Pool/Spa/Hot Tub			Method of Valve Supervision		
KW Elec. Range / Receptacle		KW	Local Alarm Supervision		
KW Oven / Surface Unit		KW	Central Supervision		
KW Elec. Water Heater		KW	Proprietary Supervision		
KW Elec. Dryer / Receptacle		KW			
KW Dishwasher		KW	Flammable Liquid Storage Tanks Capacity: Fuel:		
HP Garbage Disposal		HP	Combustible Liquid Storage Tanks Capacity: Fuel:		
KW Central A/C Unit		KW	L.G.P. Storage Tanks Capacity: Fuel:		
HP/KW Space Heater/Air Handler		HP/KW			
KW Baseboard Heat		KW	DESCRIPTION		
HP Motors 1/+ HP		HP	NUMBER		
KW Transformer/Generator		KW	Wet Sprinkler Heads		
AMP Service		AMP	Dry Sprinkler Heads		
AMP Subpanels		AMP	Total		
AMP Motor Control Center		AMP	Smoke Detectors		
AMP Elec. Sign/Outline Light		KW	Heat Detectors		
Other			Total		
Other			Stand Pipes		
Other			Kitchen Hood Exhaust Systems		
Estimated Cost of Electrical Work: \$			Pre-Engineered Systems		
Signature (print name):			Co2 Suppression		
Estimated Cost of Electrical Work: \$			Halon Suppression		
Signature (print name):			Foam Suppression		
Owner ☐ Contractor ☐			Dry Chemical		
SUBCODE APPROVAL:			Wet Chemical		
PLANS: Required ☐ Approved ☐					
Approved by:			Gas or Oil Fired Appliance		
Date:			Other		
CONTRACTOR AFFIX SEAL:			Other		
			Estimated Cost of Fire Protection Work: \$		
			Signature:		
			Owner ☐ Contractor ☐		
			SUBCODE APPROVAL:		
			PLANS: Required ☐ Approved ☐		
			Approved By:		

Applicable to Ordinance 728-92
This form must be handed in with permit application or a permit will not be issued.

TOWNSHIP OF BRICK

732 Lions La. 10 11
Work Site Address Block Lot

Stephen Desmond 732 Lions La. [REDACTED]
Owner's Name, Address, Phone

Self

Contractor's Name, Address, Phone

Construction Sing in ground pool
Describe type (Single-family home, etc.)

Demolition Demolition - in ground pool
Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material ~~clean fill~~ metal, wood, broken up pieces of concrete blocks

Name, address and phone of party responsible for removal of debris:
Self

Size of dumpster:

Destination of discarded debris: P.W.

Hauler's DEP Permit No.:

**Note: Any recyclable material, including, but not limited to: corrugated cardboard, vegetative waste, concrete, asphalt, clean wood, etc., must be delivered to an approved recycling center, and receipts provided to the Township of Brick along with tipping receipts for non-recyclable material.

Generator's Certification: Under penalty of criminal and civil prosecution, for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed or recycled in accordance with all applicable State and Federal laws and regulations, and that I have been authorized, in writing, to make such declarations by the person in charge of the generator's operation.

Stephen Desmond x. Sept. 11, 1998
Printed/Typed Name Signature Date

FOR OFFICE USE ONLY

MUST BE COMPLETED BEFORE CERTIFICATE OF OCCUPANCY OR CERTIFICATION OF APPROVAL IS ISSUED

Recycling tonnage receipts attached?

Certified tipping receipts attached?

**Note: Receipts must show certified weights, date of disposal and name and address of disposal center.

DISTRIBUTION LIST:

1. Original to Code Enforcement Officer
2. Construction Code Office
3. Applicant