

Brick

Permit Without a Jacket

Permit Number A-1811

Construction Permit #

A-18117

Oct. 2, 1978

19

Owner..... Kosak, Gertrude

Location..... 473. Aurera Place

Lake Riviera

Block..... 446-D8 Lot..... 13

Contractor..... Alsurf Siding

Fee \$..... 7.50 Use..... repair/roof

BUILDING SUB-CODE INSPECTIONS

Footing Trench

Slab

Foundation

Framing

Insulation

Final 2-12-90 R m

C. O. Issued

PLUMBING SUB-CODE INSPECTIONS

Slab

Rough

Septic/Sewer

Water

Final

Electrical Final

VIOLATIONS

Use reverse side for additional remarks

CONSTRUCTION PERMIT APPLICATION

BRICK TOWNSHIP, NEW JERSEY

IMPORTANT — Complete ALL items. Mark boxes where applicable

I. LOCATION OF BUILDING	Number and street 473 Aurora Place	Section Lake Riviera	Lot 13	Block 446-W8
	N S	N S		
	E W side of _____ feet E W from intersection of _____ (Other local geographic, political, or legal subdivision identification)			

II. TYPE AND COST OF BUILDING — All applicants complete Parts A - D

A. TYPE OF IMPROVEMENT 1 ☐ New buildings 2 ☐ Addition (if residential, enter number of new housing units added, if any, in Part D, 13) 3 ☐ Alteration (See 2 above) 4 ☒ Repair, replacement 5 ☐ Demolition 6 ☐ Moving (relocation) 7 ☐ Garage ☐ Swim Pool ☐ In ☐ out ☐ Fence B. OWNERSHIP 8 ☒ Private (Individual, corporation, nonprofit institution, etc.) 9 ☐ Public (Federal, State, or local government)	D. PROPOSED USE — For "Wrecking" most recent use Residential 12 ☐ One family 13 ☐ Two or more family — Enter number of units _____ 14 ☐ Transient hotel, motel, or dormitory — Enter number of units _____ 15 ☐ Garage 16 ☐ Carport 17 ☐ Other — Specify _____ Nonresidential 18 ☐ Amusement, recreational 19 ☐ Church, other religious 20 ☐ Industrial 21 ☐ Parking garage 22 ☐ Service station, repair garage 23 ☐ Hospital, institutional 24 ☐ Office, bank, professional 25 ☐ Public utility 26 ☐ School, library, other educational 27 ☐ Stores, mercantile 28 ☐ Tanks, towers 29 ☐ Other - Specify _____ <u>Re-roof</u>
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C. COST 10. Cost of Improvement _____ \$ To be installed but not included in the above cost a. Electrical (# Fixtures, Outlets) _____ b. Plumbing (# of Fixtures) _____ c. Heating, air conditioning _____ d. Other (elevator, etc.) _____ 11. TOTAL COST OF IMPROVEMENT _____ \$ 900.00	Nonresidential — Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use. _____ _____ _____
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III. SELECTED CHARACTERISTICS OF BUILDING —

For new buildings and additions, complete Parts E - I; for wrecking, complete only Part H, for all others skip to IV.

E. PRINCIPAL TYPE OF FRAME ☐ Masonry (wall bearing) ☐ Wood frame ☐ Structural steel ☐ Reinforced concrete ☐ Other - Specify _____	H. DIMENSIONS Number of stories _____ Total square feet of floor area, all floors, based on exterior dimensions _____ Total land area, sq. ft. _____	FEE COMPUTATIONS <table style="width: 100%;"> <tr><td>VOLUME OF BUILDING</td><td></td></tr> <tr><td>BUILDING SUB CODE</td><td></td></tr> <tr><td>ELECTRICAL CODE</td><td></td></tr> <tr><td>PLUMBING CODE</td><td></td></tr> <tr><td>PLAN REVIEW</td><td></td></tr> <tr><td>CERTIFICATE OF OCCUPANCY</td><td></td></tr> <tr><td>STATE TRAINING FUND</td><td></td></tr> <tr><td>CONSTRUCTION</td><td></td></tr> <tr><td>PERMIT FEE</td><td style="text-align: center; font-size: 1.2em;">7.50</td></tr> </table>	VOLUME OF BUILDING		BUILDING SUB CODE		ELECTRICAL CODE		PLUMBING CODE		PLAN REVIEW		CERTIFICATE OF OCCUPANCY		STATE TRAINING FUND		CONSTRUCTION		PERMIT FEE	7.50
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F. TYPE OF HEATING SYSTEM Specify _____ Air Cond. Yes ☐ No ☐	I. RESIDENTIAL BUILDING ONLY Number of bedrooms _____ Number of bathrooms _____ Full _____ Partial _____																			
G. TYPE OF SEWERAGE DISPOSAL ☐ Public ☐ Individual																				

SEE REVERSE

A-1811 Ch

SUB CONTRACTORS				
NAME	TRADE	ADDRESS	ZIP CODE	PHONE #
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

PERSON TO BE IN CHARGE OF CONSTRUCTION

NAME Craig Burfield ALSAF Siding #695
 ADDRESS 174 16th AVE Brick Town NJ

IV. IDENTIFICATION — To be completed by all applicants

Name	Mailing address — Number, street, city, and State	ZIP code	Tel. No.
1. ☒ Owner Agent	<u>Gertrude Kosak</u> <u>473 Aurora Place</u> <u>B.T</u>		<u>477-1634</u>
2. Contractor	<u>ALSAF Siding</u> <u>174 16th AVE</u>		<u>499-6983</u>
3. Architects	<u>Brick Town NJ</u>		

The owner of this building and the undersigned agree to conform to all applicable laws of Township of Brick and that all required state, county and local prior approvals have been given.

Signature of applicant <u>Craig Burfield</u>	Address <u>174 16th AVE Brick Town</u>	Application date
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DO NOT WRITE IN THIS SPACE — FOR OFFICE USE ONLY

Approved by <u>R. McKelvey</u>	Date permit issued <u>10/2/78</u>	Permit Number <u>A-1811</u>
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I agree to construct said building in conformity with the plans and specifications filed with the Construction Official and in compliance with the provisions of the Building Code whether shown on plans or not.