

NEW JERSEY
UNIFORM CONSTRUCTION CODE

U.C.C. F100-1 (rev. 5/05)



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 10/22/2008
Control Number C-06-0212
Permit Number 06-0126
Permit Issue Date 1/13/2006
Certificate Number 06-0126

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 16 MANDALAY RD. Brick Township, NJ Block: 210.03 Lot: 2 Qual: _____
Owner in Fee: HUSKEY, ELLEN
Owner Address: 16 MANDALAY RD BRICK NJ 08723
Telephone: _____
Contractor HUSKEY, ELLEN
Address 16 MANDALAY RD BRICK NJ 08723
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: DEMOLITION

Certificate Comments:

☐ **Certificate of Occupancy**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☒ **Certificate of Approval**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **Certificate of Continued Occupancy**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

Construction Official

Fee: \$0.00

Check Number: _____

Collected By: _____



BUILDING SUBCODE TECHNICAL SECTION



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

Block 210103 Lot 2 Qualification Code _____
Work Site Location 16 Mandalay Rd.
Owner In Fee Ellen Sharpe 08123
Address 16 Mandalay Rd. 08123
Tel. [REDACTED]
Contractor [REDACTED]
Address 16 Mandalay Rd.
Tel. [REDACTED] FAX () _____
Contractor License No. or Builder Registration No. _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Dates (Month/Day)	Initial
☐ No Plans Required			Type:			
☐ All			Footings			
☐ Footing			Footings Bonding			
☐ Foundation			Foundation			
☐ Slab			Slab			
☐ Frame			Frame			
☐ Other			Truss Sys./Bracing			
			Barrier-Free			
			Insulation			
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Finishes - Base Layer			
			Finishes - Final			
SUBCODE APPROVAL			Energy			
☐ CO ☐ CCO ☐ CA			Mechanical			
Date: <u>10-20-08</u>			TCO			
Approved by: <u>[Signature]</u>			Other			
			Final			
			Barrier-Free			

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ Est. Cost of Bldg. Work:
Constr. Class Present _____ Proposed _____ 1. New Bldg. \$ _____
No. of Stories _____ 2. Rehabilitation \$ _____
Height of Structure _____ Ft. 3. Total (1+2) \$ _____
Area — Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

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 Ellen Sharpe

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Garage 15' x 12'
single story
knocked down

TYPE OF WORK:

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

FEE (Office Use Only)

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ 40



CONSTRUCTION PERMIT

Date Issued 01/13/2006
Control # C-06-0212
Permit # 06-0126

IDENTIFICATION Block: 210.03 Lot: 2 Qualifier _____
Work Site Location: 16 MANDALAY RD. Brick Township, NJ Contractor HUSKEY, ELLEN
Address 16 MANDALAY RD BRICK NJ 08723
Owner in Fee HUSKEY, ELLEN
Address 16 MANDALAY RD BRICK NJ 08723 Telephone: _____
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee. No. _____

Is hereby granted permission to perform the following work:

- | | | |
|--|--|--|
| ☒ BUILDING | ☐ PLUMBING | ☐ LEAD HAZARD ABATEMENT |
| ☐ ELECTRICAL | ☐ FIRE PROTECTION | ☐ DEMOLITION |
| ☐ ELEVATOR DEVICES | ☐ ASBESTOS ABATEMENT
(Subchapter 8 only) | ☐ OTHER |

DESCRIPTION OF WORK:

DEMOLITION

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

Construction Official _____ Date 01/13/2006

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$40
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$40
Check No.	1880
Cash	\$0
Credit	\$0
Collected By	Ann Marie Hanlon

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

- ☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:
1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
 2. Foundations and all walls up to grade level prior to back filling.
 3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
 4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- ☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

- ☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

- ☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

OCEAN COUNTY LANDFILL
LAKEHURST NJ 08733

FACILITY ID No. 15108
Ticket #: 000937609

Customer #: CASH
CASH

Date: 10/20/05

Gross 7200 lb Scale 1 10:51
Tare 6260 lb Scale 1 11:29

Dep. #: CASHB Plate #:

Net 940 lb
0.4700 tn

20 of Load Material

10 CU YDS

132 BULKY - DEMO WOOD	Location LAKEHURST BORO	Price/Unit 94.79/tn	Total 44.55
/			
/			
/			
/			

Current Account Balance: \$
DRIVER *M. J. [Signature]*

Total \$ 44.55

Weight Master: WH

REMARKS: SKN44X/TBL 01K

Closure & Contingency: \$0.50/tn
Solid Waste Service: \$1.20/tn
Closure Escrow: \$1.00/tn
O.C. Health Dept.: \$0.29/tn

Environmental Escrow- Type 10: \$14.92/tn
-Types 13, 22, 23, 25: \$23.19/tn
Post Closure Fund: \$0.42/tn
Host Community Fund: \$4.50/tn

OCEAN COUNTY LANDFILL
MANCHESTER NJ 08759

FACILITY ID No. 15108
Ticket #: 000956109
Date: 01/11/06

Customer: CASH
CASH

Gross 7420 lb Scale 1 12:52
Tare 6600 lb Scale 1 13:07

Net 820 lb
0.4100 tn

Dep. #: CASH13 Plate #:

10 CU YDS

Xof Load Material

132 BULKY - DEMO WOOD

Location
LAKEHURST BORO

Price/Unit
96.04/tn

Total
39.70

Current Account Balance: \$

Total \$ 39.70

DRIVER

Weight Master: WH

REMARKS: SKMAX/TH41C

Closure & Contingency:	\$0.50/tn	Environmental Escrow- Type 10:	\$14.92/tn
Solid Waste Service :	\$1.50/tn	-Types 13, 22, 23, 25:	\$23.19/tn
Closure Escrow :	\$1.00/tn	Post Closure Fund :	\$0.62/tn
O.C. Health Dept. :	\$0.29/tn	Host Community Fund :	\$4.50/tn

OCEAN COUNTY LANDFILL
MANCHESTER NJ 08759

FACILITY ID No. 1510B
Ticket #: 000955311
Date : 01/09/06

Customer : CASH
CASH

Gross	0000 lb	Scale	1 11:34
Tare	6100 lb	Scale	1 11:47
Net	1900 lb		
	0.9500 tn		

Dep.#: CASH12 Plate #: 10 CU YDS

No of Load Material	Location	Price/Unit	Total
13	BULKY WASTE COMMERC. LAKEHURST BORO	96.84/tn	92.00

Current Account Balance: \$ Total \$ 92.00

DRIVER *[Signature]*
Weigh Master: WA *[Signature]*

REMARKS: SKN44X/TBH41C	Environmental Escrow- Type 10:	\$14.92/tn
Closure & Contingency :		
Solid Waste Service :	-Types 13, 22, 23, 25:	\$23.19/tn
Closure Escrow :	Post Closure Fund	\$ 0.62/tn
O.C. Health Dept. :	Post Community Fund	\$ 4.50/tn

OCEAN COUNTY LANDFILL
MANCHESTER NJ 08759

FACILITY ID NO. 1510B
Ticket #: 000956470
Date: 01/12/06

Customer : CASH
CASH

Gross	6100 lb	Scale	1 14:10
Tare	6400 lb	Scale	1 14:21
Net	1700 lb		
	0.0500 tn		

Dep. #: CASH10 Plate #:

10 CU YDS

Lot Load Material	Location	Price/Unit	Total
132 BULKY - DEMO WOOD	LAKEHURST BORO	96.04/tn	02.31

Current Account Balance: \$

Total \$ 02.31

DRIVER

Welfh Master: WM

REMARKS: SKN44X

Closure & Contingency:	\$0.50/tn	Environmental Escrow- Type 10:	\$14.92/tn
Solid Waste Service :	\$1.50/tn	-Types 13, 22, 23, 25:	\$23.19/tn
Closure Escrow :	\$1.00/tn	Post Closure Fund :	\$ 0.62/tn
O.C. Health Dept. :	\$0.29/tn	Host Community Fund :	\$ 4.50/tn

OCEAN COUNTY LANDFILL
LAKEHURST NJ 08733

FACILITY ID No. 1510B
Ticket #: 000935882

Date: 10/21/05

Customer: CASH
CASH

Gross 7300 lb Scale 1 10:24
Tare 6100 lb Scale 1 10:46

Net 1200 lb
0.6000 tn

Dep. #: CASH17 Plate #:

10 CU YDS

Xof Load Material	Location	Price/Unit	Total
132 BULKY - DEMO WOOD	LAKEWOOD TWP	94.79/tn	56.87

/

Current Account Balance: \$

Total \$

56.87

DRIVER

Weight Master: MH

REMARKS: TBH41C

Closure & Contingency: \$0.50/tn
Solid Waste Service: \$1.20/tn
Closure Escrow: \$1.00/tn
O.C. Health Dept.: \$0.29/tn

Environmental Escrow- Type 10: \$14.92/tn
-Types 13, 22, 23, 25: \$23.19/tn
Post Closure Fund: \$0.62/tn
Host Community Fund: \$4.50/tn

Applicable to Ordinance 720-92

This form must be handed in with permit application or a permit will not be issued

TOWNSHIP OF BRICK

Debris Form

Work Site Address: 16 Mandalay Rd. Brick NJ 08723

Block: 210.03 Lot: 2

Contractor: self

Contractor's Address: _____

Type of Construction (minor, new home): _____

Type of Debris (shingles, siding, wood, etc.): garage stuff

Party responsible for removal: self

Dumpster size: _____

Destination of debris: _____

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclable.

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 of in accordance with all applicable State and Federal laws and regulations, and that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation.

Ellen Sharpe
Signature

Ellen Sharpe
Print Name

1-13-06
Date

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

Ellen Sharpe

Date

7-13-06

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. 5:23-2.15(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.