TOWNSHIP OF OLD BRIDGE
MIDDLESEX COUNTY, N.J.
1 Old Bridge Plaza
Old Bridge, N.J. 08857
(201) 721-5600

CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: 133 Highway 35
2. Owner Name: [redacted] Tel. [redacted]
   Address South Amboy
3. Principal Contractor: [redacted] Tel. ([redacted]
   Address [redacted] Lenoka Harbor, N.J., 08734
   Lic. No. or Builder Reg. No. 5769 Federal Emp. No. ____
4. Architect or Engineer: ____ Tel. ( ) ____
   Address ____
5. Responsible Person in Charge of Work [redacted] Tel. ([redacted]

II. PROPOSED WORK

A. TYPE OF WORK

1. ☒ Minor Work (Single Trade)
2. ☐ Small Job ($5,000 and no Prior Approvals)
   Complete only II.B., III and IV.A. and Page 2
3. ☐ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☒ Repair, Replacement
7. ☐ Demolition
8. ☐ Other: ____

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☐	Building/ Structural	$ ____
2. ☐	Plumbing	____
3. ☒	Electrical	1,000.00
4. ☐	Fire Protection	____
5. ☐	Other ____	____
6. ☐	Other ____	____
	TOTAL COST	$ ____

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

1. ☐ Elevators/Dumbwaiters
2. ☐ High-Pressure Boilers
3. ☐ Refrigeration Systems
4. ☐ Pressure Vessels
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Cross-connections/ Backflow Preventors
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R–1)
2. ☐ Multi-Family (R–2)
   HMD Reg. No.: ____
3. ☒ Two Family (R–3b)
4. ☐ One-Family (R–3a)

If new construction, enter no. of dwelling units ____

If other than new construction, enter no. of dwelling units:
Before Construction: 2
After Construction: 2
Net Gain (or loss): ____

B. NON-RESIDENTIAL

5. ☐ Theatres with Stage (A–1–A)
6. ☐ Movie Theatres (A–1–B)
7. ☐ Night Clubs (A–2)
8. ☐ Restaurants, Libraries, Museums (A–3)
9. ☐ Religious Assembly (A–4)
10. ☐ Outdoor Assembly (A–5)
11. ☐ Business (B)
12. ☐ Educational (E)
13. ☐ Moderate-Hazard Factory (F–1)
14. ☐ Low-Hazard Factory (F–2)
15. ☐ High-Hazard (H)
16. ☐ Institutional Detention Center (I–1)
17. ☐ Hospitals, Infirmaries (I–2)
18. ☐ Group Homes (I–3)
19. ☐ Mercantile (M)
20. ☐ Moderate-Hazard Warehouse (S–1)
21. ☐ Low-Hazard Warehouse (S–2)
22. ☐ Temporary, Misc. (U)
23. ☐ Other ____

State Specific Use: ____

If Change in Use Group, Indicate Former: ____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☒ Private (Individual, Corp., Non-profit Inst., Etc.)
2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

	Principal	Secondary	Type
3.	☒	☐	Gas – 1ST Floor
4.	☐	☒	Oil – 2nd Floor
5	☐	☐	Electric
6.	☐	☐	Solid (Wood, Coal, Etc.)
7.	☐	☐	Propane
8.	☐	☐	Solar
9.	☐	☐	Other ____

C. TYPE OF SEWAGE DISPOSAL

10. ☐ Public or Private Company
11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☐ Public or Private Company
13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories 2
15. Height of Structure ____ Ft.
16. Area–Largest Floor ____ Sq. Ft.
17. Bldg. Area–All Fls. ____ Sq. Ft.
18. Volume of Structure ____ Cu. Ft.
19. Total Land Area Disturbed ____ Sq. Ft.

LDS OB 10400907

Pre/NON-Conforming

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.

B. ☐ I further certify that I will perform the work below.

B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing

C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.

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 understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE _____ DATE _____

II. AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

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 [redacted] TEL.([redacted]

ADDRESS [redacted]

Lanoka Harbor, N.J. 08734

SIGNATURE [redacted]

BLOCK NO. 53 LOT NO. 132-133-134 SUBDIVISION A/S PERMIT NO. 7049

PRIOR APPROVALS CHECKLIST

APPROVALS	LOCAL				COUNTY				REGIONAL				STATE				COMMENTS
	Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		
	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	
☐ Planning Board																	
☐ Zoning Board																	
☐ Sewer Authority																	
☐ Water Authority																	
☐ Fire Department																	
☐ Police Department																	
☐ Health Department																	
☐ Soil Conservation																	
☐ N.J. Dept. of Community Affairs																	
☐ N.J. Dept. of Transportation																	
☐ N.J. Dept. of Environmental Protection																	
☐ Other: _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

	EDITION OF CODE		EDITION OF CODE		
☐ One and Two Family Dwellings	_____	☐ Mechanical	_____	☐ Flood Hazard	_____
☐ Building	_____	☐ Energy	_____	☐ As Built Elevation Certification	_____
☐ Electrical	_____	☐ Barrier Free	_____	☐ Other	_____
☐ Plumbing	_____	☐ Other	_____		_____
☐ Fire Protection	_____		_____		_____

PERMIT CONTROL

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN – FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date	Plans Received By Receiver	Approval Date	Reviewer	Comments
☐	BUILDING					
	Footings/Foundations					
	Framing					
	Architectural					
	Other _____					
☐	PLUMBING					
☐	ELECTRICAL					
☐	FIRE PROTECTION					
☐	OTHER _____					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions			Final Inspection	Comments
_____	ALL CONSTRUCTION					
_____	BUILDING					
_____	Footings/Foundations					
_____	Framing					
_____	Architectural					
_____	Other _____					
_____	PLUMBING					
_____	ELECTRICAL					
_____	FIRE PROTECTION					
_____	OTHER _____					

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☐ Certificate of Occupancy No. _____	_____
☐ Certificate of Continued Occupancy No. _____	_____
☐ Certificate of Approval No. _____	_____
☐ None	

IV. ON-GOING INSPECTIONS

On-going Inspections Required (See Page 1, II.D.)	Date Posted to Log and Tickler

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	$ _____
PLUMBING	_____
ELECTRICAL	25
FIRE PROTECTION	_____
OTHER _____	_____
SUBTOTAL	$ _____
– LESS: 20% of subtotal (when plan review performed by state agency).	(_____)
D.C.A. TRAINING FEE .0006 x _____	= _____
CERTIFICATE OF OCCUPANCY	_____
OTHER _____	_____
OTHER _____	_____
TOTAL COLLECTED WHEN PERMIT ISSUED	$ 25

DATE 10/27/87 Collected By Bake

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			
OTHER			
OTHER			
– LESS: Refunds			( )
TOTAL COLLECTED AFTER PERMIT ISSUED			$

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	$
COLLECTED AFTER PERMIT (VB)	
TOTAL	$

TOWNSHIP OF OLD BRIDGE
MIDDLESEX COUNTY, N.J.
1 Old Bridge Plaza
Old Bridge, N.J. 08857
(201) 721-5600

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 7044
DATE ISSUED [redacted]
Block 53 Lot 132-133-134
Subdivision _____

A. IDENTIFICATION

Owner [redacted]
Address South Amboy
Tel. [redacted]
Work Site Address [redacted]
Cleveland Ave, Lawrence Harbor

Agent _____
Address [redacted]
Keansburg Harbor, N.J. 07734
Tel. [redacted]
Lic. No. 5769
Federal Emp. No. _____

PAYMENTS

Permit Fee $ 25/-
Fee Remitted $ 25
Check No. 2240
☒ Check
☐ Cash
☐ Other _____
Collected By: Bone
Date: 10/26/87

is hereby granted permission to perform the following work:

☐ BUILDING ☒ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER _____

Description of work:

Change 1 Family Service
To 2 Family Service
2 - 100 Amp Meters + Panels

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: $ 1,000.00

Bob Le Clay
CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

TOWNSHIP OF OLD BRIDGE
MIDDLESEX COUNTY, N.J.
1 Old Bridge Plaza
Old Bridge, N.J. 08857
(201) 721-5600

ELECTRICAL SUBCODE TECHNICAL SECTION

PERMIT NO. 1049
DATE ISSUED 10/29/82
REVISION DATE
Block 53 Lot 132-133-134
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner [redacted]
Address South Amboy
Tel. [redacted]
Work Site Address 133 Highway 35 + Cleveland Ave., Lawrence Harbor

Contractor [redacted]
Address Laurka Harbor, N.J.
Tel. [redacted]
Lic.No./Bus. Permit. 5769 / 5769
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

[redacted]
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK: Change 1 Family service to 2 Family Service

No.	Item	Fee	No.	Item	Fee
	Switching Outlets	$		H.V.A.C. Equipment	$
	Lighting Outlets			Switching Devices	
	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric				
	Heating, Electric				
	Switches				
	Lighting Fixtures			Other	
	Receptacles			Other	
	Bonding, Pool/Vault			Other	
	Service/Feeders			Other	
	COLUMN 1			COLUMN 2	

Fee	
COLUMN 1	$
COLUMN 2	
SUBTOTAL	$
Minimum Electrical Fee (If applicable)	$
Total Electrical Fee (Greater of Minimum or Subtotal)	$ 25

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present X Proposed
Service: 150 Amps 1 Phase O.H. System Type
3 Wire 240 Volts Conduit Wiring Method
Total No. of Meters: 2 100 Amp
Estimated Cost of Electrical Work: $ 1,000.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-120 (8/83) Green = Office Copy White = Applicant Copy Purple = Inspector Copy

TOWNSHIP OF OLD BRIDGE
MIDDLESEX COUNTY, N.J.
1 Old Bridge Plaza
Old Bridge, N.J. 08857
(201) 721-5600

ELECTRICAL SUBCODE TECHNICAL SECTION

PERMIT NO. 3044
DATE ISSUED 10/29/87
REVISION DATE
Block 53 Lot 132-133-134
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner [redacted]
Address South Amboy
Tel. [redacted]
Work Site Address 133 Highway 35 + Cleveland Ave., Lawrence Harbor

Contractor [redacted]
Address 420 Chestnut Dr. Lanoka Harbor, N.J. 08734
Tel. [redacted]
Lic.No./Bus. Permit. 5769/5769
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)
I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
William A. Braga
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data
TYPE OF WORK: Change 1 Family service to 2 Family Service

No.	Item	Fee	No.	Item	Fee
	Switching Outlets			H.V.A.C. Equipment	
	Lighting Outlets			Switching Devices	
	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric				
	Heating, Electric				
	Switches				
	Lighting Fixtures			Other	
	Receptacles			Other	
	Bonding, Pool/Vault			Other	
	Service/Feeders			Other	
	COLUMN 1	$		COLUMN 2	

(Greater of Minimum or Subtotal) $

C. ELECTRICAL CHARACTERISTICS

USE GROUP: Present X Proposed
Service: 150 Amps 1 Phase 0.H. System Type
3 Wire 240 Volts Conduit Wiring Method
Total No. of Meters: 2 100 Amp
Estimated Cost of Electrical Work: $ 1,000.00

D. COMMENTS

SER 4(2) METERS OK 12/24/87 (EB)
CARD ISSUED
(FINAL)

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION – ELECTRICAL

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: 12/24/87

Inspected By: [signature]

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Rough				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other_____				

CUT-IN

	Date Issued	Expiration Date
Temporary Cut-in-Card		
Temporary Cut-in-Card		
Final Cut-in-Card	12/24/87	

U.C.C. Form F-120 (8/83)

Township of Old Bridge
Dept of Code Enforcement
1 Old Bridge Plaza
Old Bridge, NJ 08857

POLE NO. ______
METER BOARD NO. ______
PERMIT NO. 7049

CUT-IN-CARD

Owner [redacted]
Occupant ______ Block 53 Lot 152
Location * 133 RT #35 COR CLEVELAND AVE - L.H.
No Street Town State Zip
Installed By [redacted] Lic. No. 5769
Inspector ______ Lic. No. 938 Date 12/14/87

☐ TEMPORARY — Installation of ______
in above premises has been inspected and found in such conditions as to warrant temporary approval for use of current. This approval is void after ______ days.

☐ FINAL — Installation as itemized on reverse side has been inspected and is in accordance with the New Jersey Uniform Construction Code and the regulations and requirements of the Utility Company. SER + (2) METERS

U.C.C. Form F-350 (8/83)

This side to be completed for final cut-in only

No.	Item	No.	Item
	Switching Outlets		H.V.A.C. Equipment
	Lighting Outlets		Switching Devices
	Receptacle Outlets		Transformers
	Range/Oven		Motors/Generators/ Compressors (state no. and size of each)
	Dryer, Electric		
	Water Heater, Electric		
	Heating, Electric		
	Switches		
	Lighting Fixtures		Other
	Receptacles		Other
	Bonding, Pool/Vault		Other
150@	Service/Feeders		Other

Apparatus
SER + (2) METERS

U.C.C. Form F-350 (8/83)