



Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

***This File Contains Personal Identifiable
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- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson".

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020

BLOCK

383.26 LOT 10

QUALIFICATION CODE

ADDRESS (SITE)

334 Evergreen Dr

PERMIT NO.

21-1653



CONSTRUCTION PERMIT APPLICATION

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

C21-002384

I. IDENTIFICATION

1. Proposed Work Site at: 334 Evergreen Dr

2. Name of Owner in Fee: Patricia + James Morris

Address 377 Evergreen Dr

street

municipality

zip code

3. Ownership in Fee: Public Private

4. Principal Contractor: Total Improvement Concepts Tel. (732) 657-4025

Address 23 Jonathan Holmes Rd. e-mail info@totalimprovements.com

Crem Ridge

License No. OR, if new home, Builder Reg. No. 34EL01795700 Exp. Date 3/24

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 465591208 FAX:

5. Architect or Engineer Contact

Address e-mail

Tel. FAX:

6. Responsible Person in Charge once Work has Begun

Tel. FAX:

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 18000		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$ 100		
9. State Permit Surcharge Fee			
10. Subtotal	\$		
11. Cert. of Occupancy	\$ 18100		
12. Other			
13. TOTAL	\$		

VI. BUILDING/SITE CHARACTERISTICS

- Number of Stories
- Height of Structure ft.
- Area — Largest Floor sq. ft.
- New Building Area sq. ft.
- Volume of New Structure cu. ft.
- Max. Live Load
- Max. Occupancy Load
- If Industrialized Building: State Approved HUD
- Total Land Area Disturbed sq. ft.
- Flood Hazard Zone
- Base Flood Elevation ft.
- Wetlands yes no

(office use only)

IIa. PROPOSED WORK

- ☐ Minor Work ☐ New Building ☐ Addition ☐ Demolition
☐ Repair ☐ Alteration ☐ Renovation ☐ Reconstruction
☐ Asbestos Abat. -Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

- ☐ Building
☐ Electrical
☐ Plumbing
☐ Fire Protection
☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer

TOTAL COST \$0

III. PLAN REVIEW (optional)

DO YOU WANT:

- ☐ Partial Releases
☐ Prototype Processing

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/Standpipes
☐ Smoke Control Systems in Open Wells
☐ Underground Storage Tanks
☐ Swimming Pools, Spas and Hot Tubs
☐ LPGas Tanks
☐ Fire Alarm

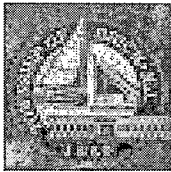
VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

- State Specific Use:
 - Use Group, Proposed: Select Group
 - Change in Use Group, Indicate Present: Select Group
 - No. of dwelling units: Total Units Income-restricted
- Gained, Sale
 Gained, Rental
 Lost, Sale
 Lost, Rental

B. NON-RESIDENTIAL (primary use)

- State Specific Use:
- Use Group, Proposed: Select Group Select Group
- Change in Use Group, Indicate Present
- MIXED USE -List secondary use(s):
- Construct. Classification: Present Proposed



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 07/01/2021
Control Number C-21-002384
Permit Number 21-1653
Permit Issue Date 06/21/2021
Certificate Number 21-1653

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 344 EVERGREEN DR. Brick Township, NJ Block: 383.26 Lot: 10 Qual: _____
Owner in Fee: MORRIS, JAMES M. & PATRICIA J.
Owner Address: 344 EVERGREEN DR. BRICK NJ 08723
Telephone: [REDACTED]
Contractor TOTAL IMPROVEMENT CONCEPTS LLC
Address 19 JONATHAN HOLMES RD CREAM RIDGE NJ 08514
Telephone: (732) 655-4025 Fax: _____ Federal Emp. Number: _____
License Number or Builders Registration 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: SERVICE - 150 AMP

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:

Daniel Newman Jr

Construction Official

Date Printed: 07/01/2021

U.C.C. F260 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____

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(f)1.ix:

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 Gerry Scalat Date 6/21/2021

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.

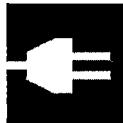
Agent Name _____

Address _____

Telephone _____

Signature _____

III. ☐ LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

ELECTRICAL SUBCODE
TECHNICAL SECTIONDate Received
Control #
Date Issued
Permit #10/24/14
2F1663

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

Block 383.26 Lot 10 Qualification Code _____
Work Site Location 344 EVERGREEN DROwner in Fee: PATRICIA + TAMAS MORRIS

Tel. _____

Address 377 EVERGREEN DR street municipality zip codeContractor: Total Improvements Concepts LLC Tel. (732) 655-4625Address 23 Jonathan Holmes Rd, e-mail info@TotalImprovements.com
Cream RidgeContractor License No. 34E-L01795700 Exp. Date 3/24

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. 465591208 FAX: (_____) _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required☐ Partial -Underslab Utilities Approved

Date: _____ Approved by: _____

☐ Electric Plans Approved

Date: _____ Approved by: _____

Joint Plan Review Required:

☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL for PERMIT

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☐ CADate: 6-24-14Approved by: WMM

INSPECTIONS

Type: Failure Failure Approval Initial

Rough

Barrier-Free

Trench

Temp. Serv.

Constr. Serv.

TCO

Other

Service

Final

Barrier-Free

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding

Certification

Dates (Month/Day)

6-24-14 WMM

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor
sign and seal here: Gerry ScalettiPrint name here: Gerry Scaletti☐ Licensed Elec. Contractor ☐ Certif'd Landscape Irrigation Contr. ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Service outdoorReplaced fire damaged electrical 150 amp

QTY.

SIZE

ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights

Storable Pool/Spa/Hot Tub

KW Elec. Range/Receptacle

KW Oven/Surface Unit

KW Elec. Water Heater

KW Elec. Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

KW Baseboard Heat

HP Motors 1/+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

Brick Township
Building Department (732) 262-1030



DRUR # 348960166

CUT-IN-CARD

MUNICIPALITY Brick Township

LOCATION 344 EVERGREEN DR. UTILITY CO _____

Brick Township, NJ BLK 383.26 LOT 10

OWNER MORRIS, JAMES M. & PATRICIA J. OCCUPANT MORRIS, JAMES M. & PATRICIA J.

"Installation in the above premises has been inspected and
is in accordance with N.E.C. and DCA requirements."

☒ FINAL ☐ TEMPORARY This approval void after ____ days

DESCRIPTION OF SERVICE _____

INSTALLED BY TOTAL IMPROVEMENT CONCEPTS LLC LICENSE NO 34EB01795700

DATE 6/22/2021 PERMIT # 21-1653 INSPECTOR Marcel Renson

☐ FAXED IN _____ Lic. No: 006455

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR



CONSTRUCTION PERMIT

Date Issued 6/21/21
Control # C-21-002384
Permit # 21-1653

IDENTIFICATION Block: 383.26 Lot: 10 Qualifier: _____
Work Site Location: 344 EVERGREEN DR. Brick Township, NJ Contractor: TOTAL IMPROVEMENT CONCEPTS LLC
Owner in Fee: MORRIS, JAMES M. & PATRICIA J. Address: 19 JONATHAN HOLMES RD CREAM RIDGE NJ 08514
344 EVERGREEN DR. BRICK NJ 08723 Telephone: (732) 655-4025
Telephone: _____ Lic. No. or Bldrs. Reg. No. 34EB01795700
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:

SERVICE 150 AMP

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 \$200

Donna Newman Jr.
Construction Official

Date 6/21/21

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$180
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$181
Check No.	<u>11031</u>
Cash	\$0
Credit	\$0
Collected By	

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, 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.