BLOCK 1421 LOT 18 ADDRESS (SITE) 660 HERBERTSVILLE PERMIT NO. 1538-95

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 660 HERBERTSVILLE Rd [redacted]
2. Name of Owner in Fee: TROMSDORF Tel. ( )
   Address 660 HERBERTSVILLE RD (street) BRICK (municipality) 08724 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: SAFE-T TANK Tel. ( ) 528-4300
   Address 5 N. MAIN ST. MANASQUAN
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. 22-3745-346 Social Security No. _____
5. Architect or Engineer _____ Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work TOM BERGIN Tel. ( ) 528-4300

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	25		
2. Electrical				
3. Plumbing				
4. Fire Protection				
5. Elevator Devices				
Subtotal	$			
Less 20% for State Plan Review				
Subtotal	$			
9. DCA Training Fee		1		
10. Subtotal	$			
11. Cert. of Occupancy		20		
12. Other				
13. TOTAL	$	46		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
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 sq. ft.	
no	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

	Est. Cost
1. ☑ Minor work (single trade)	650.00
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Elevator Devices	
10. ☐ Asbestos Abatement	
11. ☐ Demolition	
TOTAL COSTS	650.00

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
			6/19/95	R	7/5/95		Bar

III. DO YOU WANT: (optional) 1 ☐ Partial Releases 2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☑ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction _____
After Construction _____
Net gain or loss _____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10317677

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.

X Signature _____ Date _____

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey 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 Timothy J. Bergin for SAFE T TANK

Address 5 N. MAIN St.
MANASQUAN

Telephone ( ) 528-4300

Signature _____ Date 6-19-95

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date	COMMENTS
☐ Zoning Officer			X	X	X	X	X	X	
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Fire Department					X	X	X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Dept. of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Dept. of Environmental Protect.	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE **(office use only—optional)**

	Name of Code & Edition		Name of Code & Edition		
Building		Energy		Other	
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.				

CONSTRUCTION PERMIT

UNIFORM CONSTRUCTION CODE

Date Issued 6/19/95
Control #
Permit # 1538-95

IDENTIFICATION Block 1421 Lot 18
Work Site Location 660 Herbertsville Rd Contractor Saf-T-Tank
Address
Owner in Fee Tromsdorf
Address
Tele. ( ) Tele. ( )
Lic. No. or Bldrs. Reg. No. Exp. Date
Federal Emp. No.
or Social Security No.

is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] OTHER
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

Tank Clean Out

NOTE: If construction does not commence within one (1) year of date of issuance, or construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 650

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	**0004**	
Building	25	
Plumbing		
Electrical	BLOCK	0.00
Fire Protection	1421 #	
Other	LOT	0.00
Other	18 #	
DCA Training Fee	BUILDING	25.00
Cert. of Occ.	D.C.A.	1.00
Other	C/O	20.00
Total	46 TOTAL	46.00
Check No.	CASH	46.00
Cash	CHANGE	0.00
Collected By:		

OPVIEW32 NO. 2 00100002 11:02

U.C.C. Form F-170C

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

BUILDING SUBCODE TECHNICAL SECTION

Date Received 6/19/95
Date Issued
Control #
Permit # 1538-95

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

Block 142 Lot 18
Work Site Location 660 HERBERTSVILLE RD
BRICK
Owner in Fee TROMSDORF
Address 660 HERBERTSVILLE Rd
[redacted]
Tele. ( )
Contractor SATE & TAYE
Address 5 N MAIN ST
MANASQUAN
Tele. ( ) 528-4300
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3345-346 or Social Security No.

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

UNCOVER CUT AND CLEAN 550 GALLON U.S.T. AFTER INSPECTION, FILL TANK WITH SAND. ALL APURTENANT PIPING WILL BE REMOVED.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All	6/19/95	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other	TANK CLEAN		7-5-95	
Final				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
New Bldg. Area/All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $
3. Total (1+2) $

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence Height (6' or over)
- [ ] Sign Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement
- [ ] Other
- [ ] Other

[ ] Demolition

(Office Use Only)
FEE
$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: DCA TRAINING FEE $
TOTAL FEE $

U.C.C. Form F-110B

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

TANK ABATEMENT OR

ASBESTOS ABATEMENT NOTIFICATION

TOWNSHIP OF BRICK

(Print or type) Date: JUNE 19, 1995

Project: TANK ABANDONMENT – TROMSDORF

Street: 660 HERBERTSVILLE Rd

Town: BRICK

Contractor: SAFE-TANK Licence No: 20 33453 46
Address: 5 N MAIN ST MANASQUAN 08736

OSHA Air Monitor:
Address:

Building Owner: TROMSDORF

Street: SAME AS ABOVE
Town:
Phone: County: Zip:

Engineer/Architect:

Street
Town:
Phone: County: Zip:

Waste Hauler: TONK'S WASTE OIL CO. License No:

Town: TOMS RIVER NJ

Job Size: (Circle one) Minor Small Large

Quantity of Waste Generated: (All Applicable)
Cu. Yds.:
Linear Footage:
Sq. Footage:

Proposed Start Date: [redacted] Proposed Finish Date: ##

Cost of Work: $ 650.00

Construction Permit No.: _____ Date Issued: _____