BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 92007774

Date Issued / Permit # 20170163

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

Block 120 Lot 13 Qualification Code

Work Site Location

82 Manchester Ave, Keyport, NJ

Owner in Fee: Hicks, Randy

Tel. [redacted] e-mail [redacted]

Address 82 Manchester Ave
street municipality zip code

Contractor: **Trinity Solar** Tel. **(848) 220-9040**

Address **2211 Allenwood Rd.** e-mail

Wall, NJ 07719 **email: Trinity.permitting@trinitysolarsytems.com**

Contractor License No. or Builder Registration No. **13VH01244300** Exp. Date **3-31-17**

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. **223292324** FAX: **(848) 220-9139**

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	5/3/17	
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			6/7/17	
Barrier-Free				

Dates (Month/Day)

B. BUILDING CHARACTERISTICS

Use Group Present 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.

Max. Live Load

Max. Occupancy Load

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Rehabilitation $
3. Total (1 + 2) $ 1,509

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.

Sign here:

Print name here: **Tom Pollock**

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALLATION OF MOUNTING AND PV SOLAR SYSTEM ON ROOF.

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence Height (exceeds 6')
- [ ] Sign Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [✓] Other **Racking**
- [ ] Demolition

FEE (Office Use Only)

$ 1509

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

U.C.C. F110 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received Control # 9200774

Date Issued Permit # 20170163

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

Block 120 Lot 13 Qualification Code

Work Site Location 82 Manchester Ave, Keyport, NJ

Owner in Fee: Hicks, Randy

Tel. [redacted] e-mail [redacted]

Address 82 Manchester Ave (street) (municipality) (zip code)

Contractor: **Trinity Solar** Tel. (848) 220-9040

Address **2211 Allenwood Rd.** e-mail

Wall, NJ 07719 **e-mail: trinity.permitting@trinitysolarsystems.com**

Contractor License No. **15474A** Exp. Date **3-31-18**

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. **223292324** FAX: **(848) 220-9139**

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 20,055

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: 5-23-17
Approved by: JH

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 6/23/17
Approved by: JH

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			6/27/17	JH
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: Charles P Bonicker

Print name here: **Charles Bonicker**

[✓] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
INSTALLATION OF INVERTERS AND PV SOLAR PANELS

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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	
1	30	KW ~~Transformer/Generator~~ AMP Disconnect	50
1	60	AMP ~~Service~~ Disconnect	50
		AMP Subpanels	
1	5.0	~~AMP Motor Control Center~~ KW Inverter	50
		KW ~~Elec. Sign/Outline Light~~ Inverter	75
1	6.67	**KW PV Solar System**	

Administrative Surcharge $

Minimum Fee $ 200

State Permit Surcharge Fee $

TOTAL FEE $ 425

U.C.C. F120 (rev. 11/09) Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

Borough of Keyport
Municipal Building
Keyport, NJ 07735
(732)739-5134 FAX *(732)739-3479*

Permit No. 20170163
Control No. **92007774**
Parcel(Block/Lot) **120/13**
Date

Construction Permit

Work Site Location 82 MANCHESTER

Owner in Fee..... **HICKS, RANDY & JUDITH**
Address..... 82 MANCHESTER AVE
KEYPORT, N J 07735
Phone.....

Contractor.... **TRINITY SOLAR**
Address.....2211 Allenwood Rd
Wall, NJ 07719
Phone.....(732)780-3779
Lic No..... **34EB01547400- 3/31/18**
Fed Emp No.

Permission is hereby granted to do the following work:

☑ BUILDING	☐ PLUMBING	☐ DEMOLITION	☐ ONGOING -
☑ ELECTRIC	☐ FIRE	☐ ASBESTOS ABATEMENT	☐ OTHER
☐ ELEVATOR	☐ MECHANICAL	☐ LEAD HAZARD ABATEMENT	

Description of Work:

ROOF MOUNTED SOLAR PANELS

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

Estimated Cost of Work: $21,564

Construction Official Date 5-23-17

Failure to obtain all required inspections may result in administrative action
Final inspections are required before final payment is to be made to contractor
An approved set of plans must be kept at the worksite at all times

PAYMENTS * (Office Use Only)

Building	$476
Electrical	225
Plumbing	0
Fire Protection	0
Elevator Devices.....	0
Mechanical.....	0
State Training Fee	41
Certificate of Occupancy	0
Other	0
Total	$742

Check#/Cash.....
Paid .....
Collected By .....

Total Administrative Fee: $0

U.C.C. F190 (Rev. 3/96)

BOROUGH OF KEYPORT
70 WEST FRONT STREET
KEYPORT, NEW JERSEY 07735

Date Issued 04/28/06
Control #
Permit # 8062

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 120 Lot 13 Qual
Work Site Location 82 MANCHESTER AVE.
KEYPORT, NJ 07735
Owner in Fee/Occupant HICKS, RANDY
Address 82 MANCHESTER AVE.
KEYPORT,, NJ 07735-
Telephone [redacted]
Contractor HOMEOWNER
Address 82 MANCHESTER AVE.
KEYPORT, NJ 07735-
Telephone [redacted] Fax ( ) -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. -

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

BUILD NEW PORCH ON FRONT OF EXISTING HOUSE

[ ] 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.

[X] 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.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ____.

Fee $ 0
Paid [X] Check No. 2958
Collected by: CAC

5-5-06

Construction Official

U.C.C. F260 (rev. 3/96)

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 1-11-06
Control #
Date Issued C120-13
Permit # 8062

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

Block 120 Lot 13 Qualification Code

Work Site Location 80 Manchester Ave Keyport

Owner in Fee: Judy Hicks

Tel. [redacted] e-mail

Address 80 Manchester Ave, Keyport
street municipality zip code

Contractor: Owner Tel. ( )

Address e-mail

Contractor License No. or Builder Registration No. Exp. Date

Federal Employee No. FAX: ( )

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.

X Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Front Porch
28X8

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	12-29-05	MC
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Footing			3/15	BM
Footing Bonding				
Foundation				
Slab				
Frame			3/22/06	BM
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			4-28-06	BM
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[✓] Other Porch
[ ] Demolition

FEE (Office Use Only)

$	
	163 -

Administrative Surcharge $	
Minimum Fee $	9
State Permit Surcharge Fee $	
TOTAL FEE $	172 -

B. BUILDING CHARACTERISTICS

Use Group	Present		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. Rehabilitation $ 6,500
3. Total (1+ 2) $ 6,500

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

U.C.C. F110
(rev. 05/05)

Reorder from OCS Printing (609) 398-4375

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 11-16-05

Permit # 7987

IDENTIFICATION Block 170 Lot 13 Qualification Code

Work Site Location 62 Manchester Rd Westport

Owner in Fee R. Hiens

Address 62 Manchester Rd Westport

Tel. [redacted]

Contractor Alberts Modular Homes

Address 1601 NJ 71 Belmar, NJ 07719

Tel. (732) 280-1444

Lic. No. or Bldrs. Reg. No. 034616

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:

Modular Home

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 $ 13,000 - foundation only

BO Rubino
Construction Official

11/4/05
Date

PAYMENTS (Office Use Only)

Building	219
Electrical	240 -
Plumbing	222 -
Fire Protection	205 -
Elevator Devices	
Other	
DCA State Permit Fee	23 -
Cert. of Occupancy	59 -
Other	
Total	998 -
Check No.	90
Cash	
Collected by	Alma

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

BOROUGH OF KEYPORT
70 WEST FRONT STREET
KEYPORT, NEW JERSEY 07735

Date Issued 04/17/09
Control #
Permit # 7987

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 120 Lot 13 Qual
Work Site Location 82 MANCHESTER AVE.
KEYPORT,NJ 07735
Owner in Fee/Occupant HICKS, RANDY
Address 82 MANCHESTER AVE.
KEYPORT,, NJ 07735-
Telephone [redacted]
Contractor ALBERTUS MODULAR
Address 1601 RT. 71
BELMAR, NJ 07719-
Telephone (732)280-1444 Fax (732)280-5504
Lic. No. or Bldrs. Reg. No. 034610
Federal Emp. No. 05-0530754

Home Warranty No. OWNER OCCUPI
[X] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

SINGLE FAMILY MODULAR HOME

[X] 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.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ____.

Fee $ 89
Paid [X] Check No. 90
Collected by: CAC

Construction Official

U.C.C. F260 (rev. 3/96)