BLOCK 590 LOT 6 QUALIFICATION CODE _____ ADDRESS (SITE) 861 Glenwood Place PERMIT NO. 19-0481

CONSTRUCTION PERMIT APPLICATION C-19-000680

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

I. IDENTIFICATION

1. Proposed Work Site at: 861 Glenwood Place
2. Name of Owner in Fee: Warren Waxman
   Tel. [redacted]
   Address 1919 Vincent Court (street) Wall (municipality) NJ 07719 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: LYNX WASTE RECYCLING INC. 732-681-5969
   Address 705 10th AVE, LAKE COMO, N.J. 07719 e-mail LYNXWASTE@YAHOO.COM
   License No. OR, if new home, Builder Reg. No. NJ DCA # 29188 Exp. Date A-901
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH05652500 3/31/20
   Federal Emp. ID No. 20-3824994 FAX: (732) 681-5990
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun RICHARD S. HYDE JR.
   Tel. (732) 762-7365 FAX: (732) 681-5990

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 280 ✓		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$		

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. Max. Live Load _____
7. Max. Occupancy Load _____
8. If Industrialized Building: State Approved ____ HUD ____
9. Total Land Area Disturbed _____ sq. ft.
10. Flood Hazard Zone _____
11. Base Flood Elevation _____ ft.
12. Wetlands yes ____ no ____

IIa. PROPOSED WORK

☐ Minor Work DEMO ☐ 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)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building									
☐ Electrical									
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use: R
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____ ____
   Gained, Rental ____ ____
   Lost, Sale ____ ____
   Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use: _____
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

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 Wanda Watkins Date 2/25/19

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.

X Check if contractor.

Agent Name LYNX WASTE + RECYCLING SOLS. INC.
Address 705 16th AVE.
LAKE COMO, N.J. 07719
Telephone (732) 681-5969 OFF# 732-762-7365 CELL#
Signature Richard A. Lloyd Jr.

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 3/28/2019
Control Number C-19-000680
Permit Number 19-0481
Permit Issue Date 2/25/2019
Certificate Number 19-0481

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 861 GLENWOOD PL. Brick Township, NJ Block: 590 Lot: 6 Qual:

Owner in Fee: ALSDORF, CRAIG & WAXMAN, WARREN J

Owner Address: 1919 VINCENT CT WALL NJ 07719

Telephone: [redacted]

Contractor Lynx Waste & Recycling

Address 705 16th Ave. PO Box 188 Lake Como NJ 07719

Telephone: (732) 681-5969 Fax: (732) 681-5990

License Number or Builders Registration Number: Federal Emp. Number: 20-3824994

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 SINGLE FAMILY DWELLING

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:

David J. Newman Jr.

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 3/28/2019

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

WASTE SHIPMENT RECORD/ASBESTOS MANIFEST

(See Reverse for Instructions)

For Disposal Site Use Only

Elevation_____

North_____ East_____

Generator

1-A Special Waste Profile Number	NESHAP Notified	WSR Number
476423	_____YES _____NO	[illegible]

1-B. Generator Name, Contact Name, and Complete Mailing Address (including Zip Code)
LYNX WASTE & DISPOSAL
PO BOX 128
SPRING LAKE, NJ 07762

1-C. Generator's Phone Number
732-762-7365

1-D. Work Site Address
861 GLENWOOD PLACE
BRICK, NJ 08724

1-E. 24 Hour Emergency Response Telephone Number
732-762-7365

2. Operator's Name and Complete Mailing Address
GUARDIAN CONTRACTING, INC.
1809 RTE. 9, UNIT 01
TOMS RIVER, NJ 08755

Operator's Phone Number
732-349-9932

3. Waste Disposal Site (WDS) Name and Complete Mailing Address
[illegible]

WDS Phone Number
[illegible]

4. Name and Address of Responsible Agency
[illegible]

5. Description of Materials		6. Containers No.	6. Containers Type	7. Total Quantity yd3
friable asbestos	RQ, NA2212, Asbestos, 9, PGIII			
non-friable asbestos	Cat I _____ Cat II _____	7C	BA	3

8. Special Handling Instructions and Additional Information
24 HOUR NOTICE GIVEN PRIOR TO DISPOSAL, MUST BE BURIED

9. GENERATOR/OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations. I hereby certify that the asbestos is not contaminated with hazardous, PCB, and/or any special waste.

Printed/Typed Name and Title	Signature	Date
NICHOLAS FERRUCCI/PROJECT MANAGER	[signature]	2/19/19

Transporter

10. Transporter 1 Company Name
GUARDIAN CONTRACTING, INC.
Complete Mailing Address
1809 RTE. 9, UNIT 01
TOMS RIVER, NJ 08755
Telephone Number (including area code)
732-349-9932

Driver Signature [signature]
Printed Name and Title [illegible]
Date [illegible]

11. Transporter 2 Company Name
Complete Mailing Address
Telephone Number (including area code)

Driver Signature
Printed Name and Title
Date

Disposal Site

12. Discrepancy Indication Space

13. Waste Disposal Site Owner or Operator
Special Waste Approval is issued by signature in the case of a Generic Asbestos Approval.
Certification of receipt of asbestos materials covered by this manifest except as noted in Item 12.

Printed/Typed Name and Title	Signature	Date
[illegible]	[signature]	[illegible]

DCE-230-97

WHITE - Disposal Site
CANARY - Generator (To be mailed by Disposal Site)
PINK - Transporter
GOLD - Generator (To be taken prior to disposal)

BUILDING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 2/25/19

Date Issued / Permit # 19-0481

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

Block 590 Lot 6 Qualification Code

Work Site Location 861 Glenwood Place
Brick NJ 08723

Owner in Fee: Warren Waxman

Tel. [redacted]

Address 1919 Vincent Court Wall NJ 07719
street municipality zip code

Contractor LYN WASTE + RECYCLING INC. Tel. 732-681-5969

Address 705 16th AVE. E-mail LYNWASTE@YAHOO.COM
LAKE COMO, N.J. 07719

Contractor License No. or Builder Registration No. NJ DEP # 29488 Exp. Date A-901

Home Improvement Contractor Registration No. or Exemption Reason (if applicable) BVH056535580 3/31/20

Federal Emp. ID No. 20-3824494 FAX 732-681-5990

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] 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 [V] CA		
Date:	03/22/19	
Approved by:	VRM	

INSPECTIONS Type:	Failure	Failure	Approval (Month/Day)	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			03/22/19	VRM
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group 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 _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $ _____
2. Rehabilitation $ _____
3. Total (1+ 2) $ DEMO! $8000.00

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: Warren Waxman

Print name here: Warren Waxman

D. TECHNICAL SITE DATA RICHARD S. WADE JR.

DESCRIPTION OF WORK

Demolition, REMOVAL AND DISPOSAL OF 1-SINGLE FAMILY DWELLING

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 _____
- [X] Demolition

FEE (Office Use Only)

$

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

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

Uniform Construction Code (rev. 11/09)

861 Glenwood Pl.
Brick
Box 27 1987

MAZZA
SCRAP METAL & RECYCLING

Lynx Demo
3rd load From 3-14-19

Mazza Recycling Services, Ltd.

3230 Shafto Rd
Tinton Falls, NJ 07753
(732) 922-9292
FACILITY ID# 195599
DEP Facility: 1336001136

In Ticket: 594809
Date: 3/15/2019
Time: 07:03:00 - 07:13:32

Customer: 0004090001/Lynx Waste and
Truck: XBCR47
Truck Card: 08354
Truck Type: TRUCK/Truck
License: TRK# 24

Comment: 30 yds

Gross: 48020 LB In Scale 3
Tare: 36280 LB Out Scale 3
Net: 11740 LB

Tons: 5.87

Materials & Services

Origin: 1507/Brick Twp.
Material: CD/C & D
Quantity: 5.87 Ton
Rate: $76.45/TON
Amount: $ 448.76

Host Fee: $	5.87
Recycling Tax: $	17.61
Fuel Surcharge: $	1.94
Total Taxes/Fees: $	25.42
Total Amount: $	474.18

In Operator: MAZZADEMO\SCALE3
Out Operator: MAZZADEMO\SCALE3

Driver
Signature:

****

8636 Glenwood

MAZZA
SCRAP METAL & RECYCLING

Mazza Recycling Services, Ltd.

3230 Shafto Rd
Tinton Falls, NJ 07753
(732) 922-9292
FACILITY ID# 195599
DEP Facility: 1336001136

In Ticket: 595062
Date: 3/15/2019
Time: 11:30:05 - 11:30:46

Customer: 0004090001/Lynx Waste and
Truck: 23 LYNX
Truck Type: TRUCK/Truck

Gross: 67040 LB In Scale 2
Tare: 28200 LB P.T.
Net: 38840 LB

Tons: 19.42

Materials & Services

Origin: 1507/Brick Twp.
Material: CONC/CONCRETE
Quantity: 19.42 Ton
Rate: $6.00/TON
Amount: $ 116.52

Total Amount: $	116.52

In Operator: MAZZADEMO\SCALE2
Out Operator: MAZZADEMO\SCALE2

Driver
Signature:

****

861 Glenwood Pl.
Brick
Box 271987

MAZZA
SCRAP METAL & RECYCLING

Lynx demo
Load 2

Mazza Recycling Services, Ltd.

3230 Shafto Rd
Tinton Falls, NJ 07753
(732) 922-9292
FACILITY ID# 195599
DEP Facility: 1336001136

In Ticket: 594681
Date: 3/14/2019
Time: 13:50:43 - 14:02:24

Customer: 0004090001/Lynx Waste and
Truck: XBCR47
Truck Card: 08354
Truck Type: TRUCK/Truck
License: TRK# 24

Comment: 30 YDS

Gross: 52300 LB In Scale 3
Tare: 36440 LB Out Scale 5
Net: 15860 LB

Tons: 7.93

Materials & Services

Origin: 1507/Brick Twp.
Material: CD/C & D
Quantity: 7.93 Ton
Rate: $76.45/TON
Amount: $ 606.25

Host Fee:	$	7.93
Recycling Tax:	$	23.79
Fuel Surcharge:	$	2.62
Total Taxes/Fees:	$	34.34
Total Amount:	$	640.59

In Operator: MAZZADEMO\SCALE3
Out Operator: MAZZADEMO\SCALE5

Driver
Signature:

****

861 glenwood

MAZZA
SCRAP METAL & RECYCLING

Mazza Recycling Services, Ltd.

3230 Shafto Rd
Tinton Falls, NJ 07753
(732) 922-9292
FACILITY ID# 195599
DEP Facility: 1336001136

In Ticket: 594388
Date: 3/14/2019
Time: 09:00:22 - 09:12:25

Customer: 0004090001/Lynx Waste and
Truck: XV155E
Truck Card: 08362
Truck Type: TRUCK/Truck
License: TRK# 9

Comment: 30 yds

Gross: 45820 LB In Scale 2
Tare: 36600 LB Out Scale 5
Net: 9220 LB

Tons: 4.61

Materials & Services

Origin: 1507/Brick Twp.
Material: CD/C & D
Quantity: 4.61 Ton
Rate: $76.45/TON
Amount: $ 352.43

Host Fee:	$	4.61
Recycling Tax:	$	13.83
Fuel Surcharge:	$	1.52
Total Taxes/Fees:	$	19.96
Total Amount:	$	372.39

In Operator: MAZZADEMO\SCALE2
Out Operator: MAZZADEMO\SCALE5

Driver
Signature:

****

MAZZA
SCRAP METAL & RECYCLING

Lynx demo Rd
1ST bad Glenwood

Mazza Recycling Services, Ltd.

3230 Shafto Rd
Tinton Falls, NJ 07753
(732) 922-9292
FACILITY ID# 195599
DEP Facility: 1336001136

In Ticket: 594532
Date: 3/14/2019
Time: 11:30:25 - 11:39:15

Customer: 0004090001/Lynx Waste and
Truck: XBCR47
Truck Card: 08354
Truck Type: TRUCK/Truck
License: TRK# 24

Comment: 30 YDS

Gross: 49520 LB In Scale 3
Tare: 36500 LB Out Scale 5
Net: 13020 LB

Tons: 6.51

Materials & Services

Origin: 1507/Brick Twp.
Material: CD/C & D
Quantity: 6.51 Ton
Rate: $76.45/TON
Amount: $ 497.69

Host Fee:	$	6.51
Recycling Tax:	$	19.53
Fuel Surcharge:	$	2.15
Total Taxes/Fees:	$	28.19
Total Amount:	$	525.88

In Operator: MAZZADEMO\SCALE3
Out Operator: MAZZADEMO\SCALE5

Driver
Signature:

****

MAZZA
SCRAP METAL & RECYCLING

861 Glenwood

Mazza Recycling Services, Ltd.

3230 Shafto Rd
Tinton Falls, NJ 07753
(732) 922-9292
FACILITY ID# 195599
DEP Facility: 1336001136

In Ticket: 594234
Date: 3/13/2019
Time: 15:40:56 - 15:51:13

Customer: 0004090001/Lynx Waste and
Truck: XFXN87
Truck Card: 23952
Truck Type: TRUCK/Truck
License: TRK# 15

Comment: 30 YDS

Gross: 45600 LB In Scale 2
Tare: 36640 LB Out Scale 5
Net: 8960 LB

Tons: 4.48

Materials & Services

Origin: 1507/Brick Twp.
Material: CD/C & D
Quantity: 4.48 Ton
Rate: $76.45/TON
Amount: $ 342.50

Host Fee:	$	4.48
Recycling Tax:	$	13.44
Fuel Surcharge:	$	1.48
Total Taxes/Fees:	$	19.40
Total Amount:	$	361.90

In Operator: MAZZADEMO\SCALE2
Out Operator: MAZZADEMO\SCALE5

Driver
Signature:

****

CONSTRUCTION PERMIT

Date Issued 02/25/2019
Control # C-19-000680
Permit # 19-0481

IDENTIFICATION Block: 590 Lot: 6 Qualifier

Work Site Location: 861 GLENWOOD PL, Brick Township, NJ

Owner in Fee: ALSDORF, CRAIG & WAXMAN, WARREN J
1919 VINCENT CT, WALL NJ 07719

Telephone: [redacted]

Contractor: Lynx Waste & Recycling
Address: 705 16th Ave. PO Box 188 Lake Como NJ 07719

Telephone: (732) 681-5969
Lic. No. or Bldrs. Reg. No. 13VH05652500
Federal Employee. No. 20-3824994

Is hereby granted permission to perform the following work:

- [x] BUILDING
- [ ] PLUMBING
- [ ] LEAD HAZARD ABATEMENT
- [ ] ELECTRICAL
- [ ] FIRE PROTECTION
- [x] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
DEMOLITION SINGLE FAMILY DWELLING

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 $8,000

Construction Official

Date 2/25/18

PAYMENTS (Office Use Only)

Building	$200
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$0
CO Fee	
Other	$0
Total	$200
Check No.	3504
Cash	$0
Credit	$0
Collected By	Christopher Winters

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

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

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.

- [x] 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:

- [x] 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.

Jersey Central Power & Light
A FirstEnergy Company

DEMOLITION/SERVICE REMOVAL/RELOCATION LETTER

1/15/2019

Warren Waxman
1919 Vincent Ct
Wall NJ 07719

RE: Notification 342309301 – 861 Glenwood Pl, Brick NJ

Dear Customer:

This letter confirms and gives notice that, effective as of the above date, Jersey Central Power & Light Company ("JCP&L" or "Company") has (1) removed or relocated its electric service cable(s) and meter(s) (the "Company Facilities") from, at, or on, the above referenced service location (the "Service Location") as you requested in order to accommodate proposed demolition and/or other construction activity; and (2) inspected to confirm that the requested removal or relocation of the Company Facilities at the Service Location has been completed. Please note that there may be other structures located around, at, or on the Service Location that continue to have electric service.

PLEASE REMEMBER: notwithstanding this confirmation and notice, you and your contractors are responsible to conduct all demolition and/or construction activities safely and in compliance with all applicable permits, laws and regulations governing such activity at the above-referenced Service Location including, but not limited to, demolition and/or construction activities undertaken around any other structures with an active electric service.

JCP&L would also like to take this opportunity to further remind you of the need to maintain proper clearance distance between buildings and power lines. The minimum clearance distances are set forth in the National Electrical Safety Code ("NESC"), which is the standard to which New Jersey electric public utilities, such as JCP&L, build and maintain their electric systems. Depending on the circumstances, construction and/or demolition activities may also be subject to additional standards such as, among other things, those found in the National Electrical Code ("NEC") and the Occupational Safety and Health Act ("OSHA").

Involving JCP&L early in the construction planning process may, where practicable, avoid the need for relocating and/or removing electrical facilities. Failing to plan for these clearance requirements early in the planning process may result in increased additional costs to the property owner in order to address later identified safety concerns. After construction is completed, the practicability of relocating utility facilities may be compromised or eliminated. This can lead, among other things, to (1) increased costs to the property owner, (2) the possible need for modifications (including demolition) to the newly constructed structure, and/or (3) the possible loss of electric service at the property until such conditions are rectified. Reviewing available options in advance of construction provides the property owner with the best opportunity to potentially avoid or reduce the risk of personal injury, property damage and/or increased costs.

JCP&L seeks to promote public safety and encourage close cooperation in addressing these issues efficiently and effectively prior to construction. Please contact JCP&L at 1-800-662-3115 in order to discuss the proximity of any future project to nearby power lines. The Company will schedule a field appointment with you so that the site and the proposed project can be reviewed with respect to the NESC minimum clearance requirements. Thank you for your prompt attention to this very important matter.

Yours truly,
Jersey Central Power and Light Company
Pt Pleasant Operations

(80112713:1)

New Jersey
Natural Gas

January 11, 2019

WARREN WAXMAN
1919 VINCENT CT.
WALL, NJ 07719

No Gas Service

RE: 861 GLENWOOD PLACE, BRICK (11013680)
Email: WWAXMAN@VERIZON.NET
FAX:

Per your request, New Jersey Natural Gas has investigated the above referenced property for the presence of natural gas facilities. The facilities (if any) have been permanently disconnected at the main, which may be in the road or behind the curb line.

Keep in mind that you are **required by law to call 811 for a mark-out** of all underground utilities at least 3 business days prior to any excavation.

************IMPORTANT************

PLEASE READ CAREFULLY

SHOULD YOU REQUIRE GAS SERVICE RESTORED, PLEASE FOLLOW THE DIRECTIONS BELOW:

1. **Call 1-800-221-0051, a minimum of 6 Business weeks prior to the estimated reconnection date. This is necessary for us to obtain permits required to restore your service.**
2. When you call, please ask to speak to a **Marketing Representative**, who will assist you to have a new gas service line installed.
3. Please be advised that the new service line must be installed according to the current company installation standards.

c. NBPT
File
11013680

mlc

BRICK UTILITIES
THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

1551 Highway 88 West * Brick, New Jersey 08724-2399
(732) 458-7000 * FAX (732) 458-5378
www.brickmua.com

February 25, 2019

WAXMAN, WARREN
1919 VINCENT COURT
WALL, NJ 07719-9163

Account: 10232007-0
Service Location: 861 GLENWOOD PL
Block: 590_6
Subject: Building to Be Demolished and Reconstructed

Dear Customer,

This is to certify that the water and sewer service at the subject property has been terminated and the water metering system has been removed.

At this time you have the option to inactivate your account with us. However, you may be subject to a reconnection fee upon reactivation if there has been a rate increase. All requests must be in writing to us. Please call our office with any questions concerning this matter.

Respectfully yours,

Diane

DIANE
Customer accounts representative

GUARDIAN CONTRACTING, INC.
1889 ROUTE 9, SUITE 61
TOMS RIVER, NEW JERSEY 08755-1271
Asbestos License #00624

ASBESTOS REMOVAL CERTIFICATION

Pursuant to the requirements of the State, Federal and US EPA 40 CFR 61 Subpart M regulations, the required removal and disposal of 950 sf of asbestos siding from house and 300 sf of asbestos siding from shed from the site named below is deemed complete as of the date set forth on this document.

Project site:

861 Glenwood Place

Brick, NJ

Date: February 18, 2019

Project Manager

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Home Improvement Contractors

HAS REGISTERED

LYNX WASTE & RECYCLING SOLUTIONS, INC
Richard S. Hyde Jr
705 16th Ave.
Lake Como NJ 07719

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

02/06/2019 TO 03/31/2020
VALID

13VH05652500
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

Paul Rodriguez
ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Home Improvement Contractors
HAS REGISTERED
LYNX WASTE & RECYCLING SOLUTIONS, INC
Home Improvement Contractor
NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE
02/06/2019 TO 03/31/2020
VALID
13VH05652500
License/Registration/Certificate #
SIGNATURE
Paul Rodriguez
ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Home Improvement Contractors
P.O. Box 45016
Newark, NJ 07101

PLEASE DETACH HERE

LYNX WASTE & RECYCLING SOLUTIONS, INC EXPIRATION DATE **2020**

YOUR LICENSE/REGISTRATION/CERTIFICATE NUMBER IS **13VH 05652500** . PLEASE USE IT IN ALL CORRESPONDENCE TO THE DIVISION OF CONSUMER AFFAIRS. USE THIS SECTION TO REPORT ADDRESS CHANGES. YOU ARE REQUIRED TO REPORT ANY ADDRESS CHANGES IMMEDIATELY TO THE ADDRESS NOTED BELOW.

Home Improvement Contractors
P.O. Box 45016
Newark, NJ 07101

PRINT YOUR NEW **ADDRESS OF RECORD** BELOW.
YOUR ADDRESS OF RECORD IS THE ADDRESS THAT WILL PRINT ON YOUR LICENSE/REGISTRATION/CERTIFICATE AND IT MAY BE MADE AVAILABLE TO THE PUBLIC.

HOME ☐
BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

PRINT YOUR NEW **MAILING ADDRESS** BELOW.
YOUR MAILING ADDRESS IS THE ADDRESS THAT WILL BE USED BY THE DIVISION OF CONSUMER AFFAIRS TO SEND YOU ALL CORRESPONDENCE.

HOME ☐
BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

If the law governing your profession requires the current license/registration/certificate to be displayed, it should be within reasonable proximity of your original license/registration/certificate at your principal office or place of business.

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 861 Glenwood Place

BLOCK: 590 **LOT:** 6

CONTRACTOR: Lynx

CONTRACTOR'S ADDRESS: 705 16th Ave Lake Como NJ

Type of Construction(minor, new home): DEMOLITION

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

Party responsible for removal: LYNX WASTE + RECYCLING INC.

Dumpster Size: 40 yd CONTAINERS

Destination of Debris: MAZZA + SONS TINTON FALLS SHAFTO RD. N.J.

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

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 I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."

Richard S. Hyde Jr
Signature

2/25/19
Date

RICHARD S. HYDE JR.
Print Name