

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.

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 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 _____

HYDROSCIENCE INC

P.O. BOX 4978

Address _____

TOMS RIVER, NJ 08753

(732) 349-9692

Telephone _____

Signature Michelle Karginer

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

OFFICE DATE RECEIVED: _____

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

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)

	No.	DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	_____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	_____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	_____	_____	_____	_____	_____
☐ Certificate of Compliance	_____	_____	_____	_____	_____
☐ Certificate of Occupancy	_____	_____	_____	_____	_____
☐ Certificate of Approval	_____	_____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	_____	_____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 01/23/2002
Control #
Permit # 02-0143

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 383.28 Lot 22 Qual

Work Site Location 298 WISTERIA DR
TANK REMOVAL

Contractor HYDROSCIENCE, INC

Address P O BOX 273

Owner in Fee HUDAK, ANDREW

LANOKA HARBOR, NJ

Address SAME

Telephone (609)693-3100

BRICK, NJ 08723-

Lic. No. or Bldrs. Reg. No.

Telephone

Federal Emp. No. 22-3207567

Is hereby granted permission to perform the following work:

☐ BUILDING	☐ PLUMBING	☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL	☒ FIRE PROTECTION	☐ DEMOLITION
☐ ELEVATOR DEVICES	☐ ASBESTOS ABATEMENT	☐ OTHER <u></u>
(Subchapter 8 only)		

DESCRIPTION OF WORK:

REMOVAL OF ONE 290 GALLON UNDERGROUND STORAGE TANK

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 \$ 600

01/23/2002

Date

Construction Official

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	66
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Other	
Total	66
Check No.	15259
Cash	
Collected By	AJP

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCO NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 01/22/2002
Date Issued 01/23/02
Control # C22-32
Permit # 02-0143

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION WHEN CHANGING CONTRACTORS. NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-271-1000

Block 383.28 Lot 22 Qual

Work Site Location 298 WISTERIA DR

TANK REMOVAL

Owner in Fee HUDAK, ANDREW

Address SAME

BRICK, NJ 08723

Tel [REDACTED] ()

Contractor HYDROSCIENCE, INC

Address P O BOX 273

LANOKA HARBOR, NJ

Tele. (609) 693-3100

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-3207567

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present U Proposed U

Constr Class Present Proposed

Heating Systems [] New [] Existing [] HVAC

Type: [] Gas [] Oil [] Elect [] Solar

[] Other

Location:

Total Est Cost of Fire Prot Work \$ 600

Fire Alarm System

New [] Existing []

Location of Panel:

Fire Suppression/Standpipe Sys

New [] Existing []

Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Plumb [] Elevator

[] Fire Plans Approved

Date: 1-22-02

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date:

Approved By:

INSPECTIONS

Type

Alarm Sys

Suppr Test

Standpipe

Fire Pump

PreEng Sys

Mechanical

Smoke Ctl

TCO

Final

Other

Dates (Month/Day)

Failure Failure Approval Initial

2-1-02

D. TECHNICAL SITE DATA

Description of Work:

Water Supply Source

Method of Alarm/Suppr Sys Superv

Storage Tanks

Type: [] Flammable Liquid [] Combust Liquid

[] LPG [] LNG Capacity 0 Fuel

Alarm Systems [] 110v Interconnected NUMBER

[] System

Alarm Devices (smoke, heat, pulls, water/flow) 0

Supervisory Devices (tamper, low/high air) 0

Signalling Devices (horn/strobes, bells) 0

Other Devices 0

TOTAL 0

Suppression Systems

Fire Pump 0 GPM Type 0

Dry Pipe/Alarm Valves 0

Pre-action Valves 0

Sprinkler Heads (Dry and Wet) 0

Standpipes 0

Pre-Engineered Systems

Wet Chemical 0

Dry Chemical 0

CO2 Suppression 0

Foam Suppression 0

Halon Suppression 0

Other 0

Kitchen Hood Exhaust System 0

Smoke Control System 0

Gas [] or Oil [] Fired Appliances 0

Other TANK REMOVAL 66

Other 0

Administrative Surcharge \$ 0

Paid [] Check # Minimum Fee \$ 0

Collected by: TOTAL FEE \$ 66

DCA Training Fee \$ 0

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application.

Signature

(see back)

- holes in tank

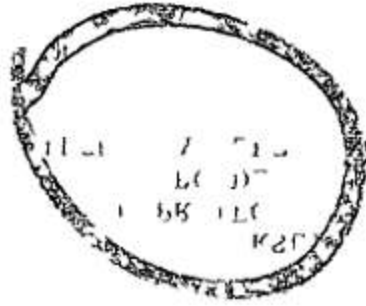
- need DTPH

- 501 samples

renovation report

- closure report

- 51-dye/tank down in receipts





FIRE SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

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

Block 383.28 Lot 22
Work Site Location 298 Wisteria Dr.

Owner in Fee Andrew Hudak
Address 298 Wisteria Drive

Tele. [REDACTED]

Contractor HYDROSCIENCE, INC.

Address P.O. BOX 4978

Tele. (TOMS RIVER, NJ 08753) Fax (732) 349-9729

Lic. No. (732) 349-9692

Federal Emp. No. 223207567

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____

Constr. Class Present _____ Proposed _____

Heating Systems [] New [] Existing [] HVAC

Type: [] Gas [] Oil [] Electric [] Solar

[] Other _____

Location: _____

Total Cost of Fire Protection Work \$ 600.00

Fire Alarm System

New [] Existing []

Location of Panel: _____

Fire Suppression/Standpipe System

New [] Existing []

Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Building [] Plumbing

[] Electric [] Elevator

[] Fire Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: _____

Approved by: _____

INSPECTIONS

Type: Failure Failure Approval Initial

Alarm System _____

Suppression Sys. _____

Standpipe _____

Fire Pump _____

Pre-Eng. System _____

Mechanical _____

Smoke Control _____

TCO _____

Final _____

Other _____

Dates (Month/Day)

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Removal of one 240 gallon underground storage tank

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

Storage Tanks

Type: [] Flammable Liquid [] Combustible Liquid

[] LPG [] LNG Capacity _____ Fuel _____

Alarm Systems [] 110v Interconnected NUMBER _____

[] System

Alarm Devices (i.e., smoke, heat, pullis, water/flow) _____

Supervisory Devices (i.e., tampers, low/high air) _____

Signaling Devices (i.e., horn/strobes, bells) _____

Other Devices _____

TOTAL _____

Suppression Systems

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) _____

Standpipes _____

Pre-engineered Systems

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

Halon Suppression _____

Other _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Gas [] or Oil [] Fired Appliances _____

Other _____

FEE (Office Use Only)

Administrative Surcharge \$ _____

Minimum Fee \$ _____

DCA Training Fee \$ _____

TOTAL FEE \$ _____

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.

Michelle Kachigine / HSE
Signature



Hydroscience Group®

HYDROSCIENCE, INC., P. O. BOX 4978, TOMS RIVER, NEW JERSEY 08753
PHONE 732-349-9692 FAX 732-349-9729

January 16, 2002

Brick Township Building Department
401 Chambers Bridge Road
Brick, NJ 08723

**RE: Permit application for underground tank removal at 298 Wisteria Drive,
Toms River, NJ. Block: 383.28 Lot: 22**

To Whom It May Concern:

Enclosed is the permit application and permit fee for the removal of one underground storage tank located at the above referenced address. Upon approval please mail the permit back to our office at:

**Hydroscience, Inc.
P.O. Box 4978
Toms River, NJ, 08753.**

Should you have any questions or require more information, please feel free to contact our office at (732) 349-9692.

Thank you,

For the firm;
Hydroscience, Inc.

Michele LaVigne
Michele LaVigne
Administration

TANK ABATEMENT OR
ASBESTOS ABATEMENT NOTIFICATION

Date: 1-16-02

Project: Hudak
Street: 298 Wisteria Drive
Town: Brick

Contractor: Hydroscience, Inc. License No. US00702
Address: P.O. Box 4978, Toms River, NJ 08753

A.S.C.M.: N/A License No. _____
Address: _____

OSHA AIR MONITOR: N/A

Address: _____

BUILDING OWNER: Andrew Hudak

Street: 298 Wisteria Dr.
Town: Brick
Phone: [REDACTED] County: Ocean Zip: 08723

Engineer/Architect: N/A

Street: _____
Town: _____
Phone: _____ County: _____ Zip: _____

Waste Hauler: Hydroscience, Inc. License No. US17971

Address: P.O. Box 4978, Toms River, NJ 08753

Land Fill: N/A
Town: _____

Job Size: (Circle one) Minor XXXXXXXXXX Small Large

Quantity of Waste Generated: Cu. Yds N/A
(All applicable) Linear Footage: _____
Square Footage: _____

Proposed Start Date: ASAP Proposed Finish Date: _____

Cost of work: \$ \$600.00

Construction permit number: _____ Date issued: _____

OS43A

1-19-89