

BLOCK

557

LOT

36

QUALIFICATION CODE

ADDRESS (SITE)

PERMIT NO.

13-2297



CONSTRUCTION PERMIT APPLICATION

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

C 13-003056

I. IDENTIFICATION

1. Proposed Work Site at: 420 Laurel Avenue Brick, NJ 08723

2. Name of Owner in Fee: Shannon Bachman

T. [REDACTED] e-mail [REDACTED]

Address (Same as above)

3. Ownership in Fee: Public [] Private [] Municipality [] Zip code []

4. Principal Contractor: Shore Environmental Tel. (732) 747-1112

Address PO Box 8575 e-mail admin@shorellc.com

Red Bank, NJ 07701

License No. OR, if new home, Builder Reg. No. [] Exp. Date []

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 131H02733500

Federal Emp. ID No. 04-3706783 FAX: (732) 747-4434

5. Architect or Engineer [] Contact []

Address [] e-mail []

Tel. () FAX: ()

6. Responsible Person in Charge once Work has Begun Alex Raposo

Tel. (732) 747-1112 FAX: (732) 747-4434

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
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	\$	10	

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 <u>[]</u> HUD <u>[]</u>		
9. Total Land Area Disturbed		sq. ft.
10. Flood Hazard Zone		
11. Base Flood Elevation		ft.
12. Wetlands yes <u>[]</u> no <u>[]</u>		

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 \$700.00

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: []
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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 07/05/2013
Control Number C-13-003056
Permit Number 13-2297
Permit Issue Date 06/03/2013
Certificate Number 13-2297

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 420 LAUREL AVE. , NJ Block: 557 Lot: 36 Qual: _____
Owner in Fee: SHANNON BACHMAN
Owner Address: 420 LAUREL AVE. BRICK NJ 08723
Telephone: _____
Contractor SHANNON BACHMAN
Address 420 LAUREL AVE. BRICK NJ 08723
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. 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: ABANDON TANK

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:

Construction Official

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 _____

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. 5:23-2.15(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 Shore Environmental

Address PO Box 8575

Red Bank, NJ 07701

Telephone (732) 747-1112

Signature [Signature]

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

Close to Burn Pt



FIRE SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

6/3/13
13.2297

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

Block 557 Lot 36
Work Site Location 420 Laurel Avenue Brick, NJ 08723

Owner in Fee Shannon Bachman
Address same as above

Tel [REDACTED]
Contractor Shore Environmental

Address P.O. Box 8575 Red Bank, NJ 07701

Tele. (732) 747-1112 Fax (732) 747-4434

Lic. No. 13VH02733500

Federal Emp. No. 04-3706783

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 \$ 700.00

Fire Alarm System

New [] Existing []

Location of Panel: _____

Fire Suppression/Standpipe System

New [] Existing []

Location of Main Control Valve: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Removing 550 UST

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, puls, 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 TANK _____

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 \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

Joint Plan Review Required:

[] Building [] Plumbing

[] Electric [] Elevator

[] Fire Plans Approved

Date: 5-30-13

Approved by: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [X] CA

Date: 7-3-13

Approved by: [Signature]

INSPECTIONS

Type: Failure Failure Approval Initial

Alarm System _____

Suppression Sys. _____

Standpipe _____

Fire Pump _____

Pre-Eng. System _____

Mechanical _____

Smoke Control _____

TCO _____

Final _____

Other TANK _____

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 [Signature]

UCC F140
(rev. 3/96)

See bud

53743 called (001606) 72.747-1117 2-MR CIVIL ENGINEER



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

6/3/13
C-13-003056
13-2297

IDENTIFICATION Block: 557 Lot: 36
Work Site Location: 420 LAUREL AVE., NJ

Contractor
Address
SHANNON BACHMAN
420 LAUREL AVE. BRICK NJ 08723

Owner in Fee
SHANNON BACHMAN
420 LAUREL AVE. BRICK NJ 08723

Telephone: [REDACTED]
Lic. No. or B.
Federal Employee No.

Qualifier
SHANNON BACHMAN

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:

ABANDON 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 \$700

Daniel Newman Jr 5/31/13
Construction Official Date

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 the 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. 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: sludge and dump receipts required for final inspections.

- ☒ 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.

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$0
Plumbing	\$0
Fire Protection	\$70
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	\$0
Other	\$0
Total	\$70
Check No.	12842
Cash	\$0
Credit	\$0
Collected By	

#2297

FIRE

#2297

#70.00

#70.00

557/36



Red Bank Recycling Auto Wreckers, Inc.
84 Central Avenue, Red Bank, NJ 07701
Phone: 732-747-7784 or 732-747-7779

Date 6/10 2013

Name Shannon Buchner Ph. _____
Address 420 Laurel Avenue Brick NJ 08723

	AMOUNT	DWT	TOTAL
LIGHT IRON			
NO 1 STEEL			
NO 2 STEEL			
D.M.B.			
CAST IRON			
COPPER			
BRASS			
ALUMINUM			
RADIATORS			
BATTERIES			
1 550 gallon tank			
CARS			

Cut, cleaned + oil free

I am the owner (or sole proprietor) and release it to Red Bank Recycling Auto Wreckers, Inc.

Signature of Owner [Signature]

732-262-2941

Tank + sludge disposal
receipts for permit # 13-2297

Please call if you need anything

else. 732-747-1112



26 SPRINGHOUSE ROAD OCEAN, NEW JERSEY 07712
 (932) 922-2626
 EPA ID #NJ0886621290
 DEP #08719

CUSTOMER'S ORDER NO.		PHONE		DATE	
NAME		ADDRESS			
Shore Environmental LLC		11 E. Lawrence St.			
6/28/13					
QTY.	DESCRIPTION	PRICE	AMOUNT		
	Manifest # 4134				
160	gallons #0 Fuel oil		15.00		
300	gallons #0 Fuel oil		210.00		
I hereby certify this oil does not contain greater than 2 ppm p.c.b.'s (polychlorinated biphenyls.) I hereby certify this oil does not contain any E.P.A. hazardous waste.					
RECEIVED BY		TAX		TOTAL	
[Signature]		9.75		309.75	

67297

All claims and returned goods MUST be accompanied by this bill.

THANK YOU



STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION



Certifies That

SHORE ENVIRONMENTAL LLC
64 CENTRAL AVENUE
Red Bank, NJ 07701

*Having duly met the requirements of the
Underground Storage Tank Certification Program*

N.J.S.A. 58:10A-24.1-8

Is hereby approved to perform the following services:

CLOSURE
SUBSURFACE EVALUATION

10/31/2014
EXPIRATION DATE

US01350
CERTIFICATION NUMBER

TO BE CONSPICUOUSLY DISPLAYED AT THE FACILITY

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
Division of Consumer Affairs

HAS REGISTERED

Shore Environmental LLC
Alex Raposo & Derek Tietjen
64 Central Ave
Red Bank NJ 07701

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

11/13/2012 TO 12/31/2013
VALID

13VH02733500
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR

Shore Environmental LLC

YOUR LICENSE/REGISTRATION/CERTIFICATE NUMBER IS 13VH 02733500 . 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.

Division of Consumer Affairs
P.O. Box 46016
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 ☐

HOME ☐
BUSINESS ☐

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.

TELEPHONE
INCLUDE AREA CODE

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.

NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Shore Environmental LLC
HAS REGISTERED
Home Improvement Contractor

11/13/2012 TO 12/31/2013
VALID

13VH02733500
License/Registration/Certificate #

SIGNATURE

ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:

Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

PLEASE DETACH HERE