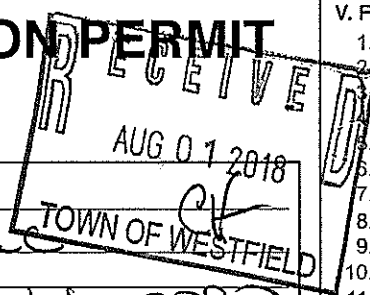


BLOCK 1003 LOT 9 QUALIFICATION CODE 18-1268 ADDRESS (SITE) 321 Elm St. PERMIT NO. 15-1630



CONSTRUCTION PERMIT APPLICATION



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

I. IDENTIFICATION

1. Proposed Work Site at: 321 Elm Street
2. Name of Owner in Fee: Elegant Homes NY LLC
Tel. _____ e-mail _____
Address 325 Central Ave. Westfield 07090
3. Ownership in Fee: Public _____ / Private _____
4. Principal Contractor: Elegant Homes Tel. (908) 967-3995
Address 325 Central Ave e-mail eleganthomesny@gmail.com
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason _____
Federal Emp. ID No. _____ FAX: _____
5. Architect or Engineer: Stonewater Architects LLC Contact _____
Address _____ e-mail _____
Tel. _____ FAX: _____
6. Responsible Person in Charge once Work has Begun Elegant Homes
Tel. 908 967 3995 FAX: 908 789 3013

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>4,218</u>	<u>200</u>	
2. Electrical	<u>568</u>		
3. Plumbing	<u>368</u>		
4. Fire Protection	<u>268</u>		
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$ _____		
8. Subtotal	\$ _____		
9. State Permit Surcharge Fee	\$ <u>423</u>	<u>19</u>	
10. Subtotal	\$ _____		
11. Cert. of Occupancy	<u>100</u>		
12. Other			
13. TOTAL	\$ <u>6,544</u>	<u>219</u>	

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories 2 1/2
2. Height of Structure 37.2 ft.
3. Area — Largest Floor 2650 sq. ft.
4. New Building Area 5318 sq. ft.
5. Volume of New Structure 114,000 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 _____

(office use only)

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
				<u>10/3/18</u>	<u>RS</u>			
				<u>10/9/18</u>	<u>RS</u>			
				<u>10/10/18</u>	<u>RS</u>			
				<u>10/16/18</u>	<u>RS</u>			

TOTAL COST

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: RS
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

10/15

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 Eileen Jones Att LLLC

Address 535 Central Ave Suite B

125 Field Rd 07090

Telephone 908 967-3995

Signature [Signature]

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



CONSTRUCTION PERMIT

Date Issued 10-17-18
Permit # 18-1630

IDENTIFICATION Block 1003 Lot 9 Qualification Code
Work Site Location 331 Elm Street
Owner in Fee Elegant Homes
Address 535 Central Ave
Tel. (908) 907-2562
Contractor Elegant Homes
Address 535 Central Ave
Tel. (908) 907-1395
Lic. No. or Bids. Reg. No. 0471445

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

New Construction Duplex

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 \$ 183,000

Construction Official

Date

10/10/18

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

1 WHITE—INSPECTOR

2 CANARY—OFFICE

3 PINK—TAX ASSESSOR

4 GOLD—APPLICANT

(see reverse side)
To Reorder Call: (908) 276-2710
TC Graphics Inc. Print Mail



PERMIT UPDATE

Date Update Issued
Permit #
Date Permit Issued

18-1630+A

IDENTIFICATION Block 1003 Lot 9 Qualification Code
Work Site Location 301 Elm ST
Owner in Fee ELEGANT HOMES
Address 535 Central Ave
Tel. (908) 907-3995
Contractor Stark
Address
Tel. ()
Lic. No. or Bids. Reg. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Detached Garage

Estimated Cost of Work \$

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.

Construction Official

Date

10/10/18

U.C.C. F190 (rev. 10/04)

1 WHITE—INSPECTOR

2 CANARY—OFFICE

3 PINK—OFFICE

4 GOLD—APPLICANT

PAYMENTS (Office Use Only)	
Building	<u>200</u>
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
State Permit Surcharge Fee	<u>19</u>
Cert. of Occupancy	
Other	
Total	<u>219</u>
Check No.	<u>2650</u>
Cash	
Collected by	<u>9</u>