

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1	☐ Elevation/Scalators/Lifts
2	☐ High Pressure Boilers
3	☐ Pressure Vessels
4	☐ Refrigeration Systems
5	☐ Cross Connections/Backflow
6	☐ Hazardous Uses/Places of Assembly
7	☐ Sprinklers
8	☐ Smoke Control Systems in Open Wells
9	☐ Underground Storage Tanks

III. DO YOU WANT: (optional)

1	☐ Partial Releases
2	☐ Prototype Processing

II. PROPOSED WORK

1	☐ Minor work
2	☐ Single trade (\$5,000 and no prior approvals)
3	☐ New Building
4	☐ Addition
5	☐ Alteration
6	☐ Fire Protection
7	☐ Plumbing
8	☐ Electrical
9	☐ Elevator Devices
10	☐ Asbestos Abatement
11	☐ Demolition

TOTAL COSTS

11	Demolition	
10	Asbestos Abatement	
9	Elevator Devices	
8	Electrical	
7	Plumbing	
6	Fire Protection	
5	Alteration	
4	Addition	
3	New Building	
2	Single trade (\$5,000 and no prior approvals)	
1	Minor work	

OPTIONAL (for office use only)

Re-view	Approval	Reflection	Re-view	Approval	Reflection	Re-view	Approval	Reflection	Re-view	Approval	Reflection
---------	----------	------------	---------	----------	------------	---------	----------	------------	---------	----------	------------

VII. DESCRIPTION OF BUILDING USE

A RESIDENTIAL

1 ☐ Hotels (R-1)

2 ☐ Multi-Family (R-2)

3 ☐ Two-Family (R-3) BOCA

4 ☐ Two-Family (R-4) BOCA

5 ☐ One-Family (R-5) BOCA

6 ☐ One-Family (R-6) CABO

B NON-RESIDENTIAL

1 ☐ State Specific Use

2 ☐ Use Group

3 ☐ Change in Use Group

Indicate Former:

I. IDENTIFICATION

1 Proposed Work site at: 816 SPAR AVENUE

2 Name of Owner in Fee: CHRIS J WINTERS

3 Ownership in Fee: Public

4 Principal Contractor: CHRIS J WINTERS

5 Architect or Engineer: [Redacted]

6 Responsible Person in Charge of Work: CHRIS J WINTERS

II. BUILDING/SITE CHARACTERISTICS

1 Number of Stories: 1

2 Height of Structure: 10' 0"

3 Area - Largest Floor: 1,000 sq ft

4 New Building Area: 1,000 sq ft

5 Volume of New Structure: 10,000 cu ft

6 Construction Classification: 1

7 Total Land Area Disturbed: 10,000 sq ft

8 Flood Hazard Zone: 1

9 Base Flood Elevation: 10' 0"

10 Wetlands: yes

11 Max Live Load: 100 psf

12 Max Occupancy Load: 100

V. FEE SUMMARY (for office use only)

1	Building	\$	450
2	Electrical	\$	
3	Plumbing	\$	
4	Fire Protection	\$	
5	Elevator Devices	\$	
6	Subtotal	\$	
7	State Plan Review	\$	
8	Subtotal	\$	
9	PCA Training Fee	\$	
10	Subtotal	\$	
11	Cent of Occupancy	\$	
12	Other	\$	
13	TOTAL	\$	450

VI. FEE SUMMARY (for office use only)

Update

Update

BLOCK 3, LOT 9
ADDRESS (SITE) 816 SPAR AVE
PERMIT NO 96-372



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

CERTIFICATION IN LIEU OF OATH

I, OWNER SECTION (to be completed if the applicant is the owner in fee)
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) will:

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): 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.

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey 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): 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

Address

Telephone ()

Signature

Date

Date 11/14/96

DE NOTATION ONLY

CONSTRUCTION OFFICIAL

Theresa M. Polson

Fee \$ _____
Paid [] Check No _____
Collected by _____

If this is a Temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _____, 19____ or the owner will be subject to fine or order to vacate.

☐ TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

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 APPROVAL

This serves notice that the work completed has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☐ CERTIFICATE OF 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 _____.

☐ 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.

Home Warranty No. _____
Type of Warranty Plan: [] State [] Private
Use Group _____
Maximum Live Load _____
Construction Classification _____
Maximum Occupancy Load _____
Description of Work/Use: _____
Donation of Existing House Complete

Block _____ Lot _____
Work Site Location _____
Owner in Fee _____
Address _____
Contractor _____
Title _____
L.C. No or Bids Reg No _____
Federal Emp No _____
or Social Security No _____

IDENTIFICATION

CERTIFICATE



Date Issued *6-18-97*
Control # *96-378*
Permit # *96-378*

Sam S. Russo

LANDSCAPING

Let Our People Make The Difference

Home Town Builders
Attention: Chris Winters
545 Compass Avenue
Beachwood, New Jersey 08722

June 6, 1997

Re: 816 Spar Avenue, Beachwood, NJ.

This is to notify you that Sam S. Russo Excavating has demolished and removed the remains of 816 Spar Avenue, Beachwood, and disposed of remains properly in compliance law.

Thank you

Sam S. Russo

SBA - BEACHWOOD

Box 352 - Beachwood, NJ 08722

(908) 349-0481

CONTRACT SALE

Date 5-20-97

To

Sam Russo

Contract

Trucker Job

TERMS: NET CASH

Date: _____	
Time: _____	
VEHICLE IDENTIFICATION	
License Plate# _____	
NJDEPE Registration (if registered) _____	
RECYCLABLE MATERIAL INFORMATION	
Type of Material: <u>Concrete</u>	
Municipality: <u>Beachwood</u>	
CERTIFICATION	
I certify that the information contained on the Recyclable Materials Receipt Form is true, accurate and complete. No. I.D. - 27 or other prohibited or contaminated waste in any form is contained in this load.	
Providing any false information as to the contents of this load could result in criminal charges.	
Signature: <u>[Signature]</u>	
Print Name: <u>Chit Street</u>	
☒ Charged	☐ Paid Cash
Tipping Charges: <u>97.40</u>	

Cu. Yds	Gross	83.000
Tons	Net	34.500
		48.700
		43578

_____	Height of Structure	FI
_____	Area - Largest floor	Sq Ft
_____	New Bldg Area/All Floors	Sq Ft
_____	Volume of New Structure	Cu Ft
_____	Total Land Area	Sq Ft

B. BUILDING CHARACTERISTICS

[illegible]

A. IDENTIFICATION--APPLICANT: COMPLETE ALL APPLICABLE INFORMATION WHEN CHANGING
 CONTRACTORS. NOTIFY THIS OFFICE CALL UTILITY DIG NO. 1-800-212-1000
 517
 Block
 816 500 Ave
 Work Site Location
 612
 Owner in Fee
 517
 Address
 517
 Contractor
 517
 Telc
 517
 Telc No or Bids Reg No
 517
 or Social Security No
 517



BSI
BUILDING
SUBCODE
TECHNICAL SECTION

C. CERTIFICATION IN LIEU OF OATH

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

D. TECHNICAL SITE DATA

Don't know of
existing horse complete

[illegible]

Date Received 12/1/12
Date Issued
Control # 94-370
Permit #

[illegible]

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

6. Signature (Addresser or Agent)
☒ *James H. Hines*

5. Received By: (Print Name)
James H. Hines

4b. Service Type
☐ Registered Mail
☐ Registered Mail Insured
☐ Registered Mail Certified
☐ Registered Mail Insured and Certified
☐ Registered Mail Insured and Certified and Registered Mail Insured and Certified

4a. Article Number
 0872

3. Article Addressed to
 HOMETOWN
 808 SPAR AVENUE
 BEACHWOOD W-3 0872

2. ☐ Restricted Delivery
☐ Addressee's Address
 Consult postmaster for fee.

1. ☐ Addressee's Address
 (following services for an extra fee)
 I also wish to receive the following services (for an extra fee):

SENDER: Complete items 1 and/or 2 for additional services. Print your name and address on the reverse of this form so that we can return the card to you. Attach this form to the front of the package, or on the back if space does not permit. Write "Return Receipt Requested" on the package below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

Thank you for using Return Receipt Service.

Domestic Return Receipt

[illegible]

• Print your name, address, and ZIP Code in this box •

UNITED STATES POSTAL SERVICE
TRENTON, NJ 08650 DEC 14 17:11/23/96
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees
USPS
Permit No. G-10

Permit No. G-10

[illegible]

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

6. Signature (Address of Agent) *X*

5. Received By (Print Name) _____

4b. Service Type
☒ Registered
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

4a. Article Number _____

3. Article Addressed to: *Home owner
817 SCENARV AVE
Buckwood W-101
11-23-96*

2. ☐ Restricted Delivery
☐ Addressed to Addressee's Address (extra fee)
☐ Also wish to receive the following services (for an extra fee):

1. ☐ Restricted Delivery
☐ Consign postmaster for fee

8. Addressee's Address (Only if requested and fee is paid)

7. Date of Delivery *11-23-96*

Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER:
 * Complete forms 1 and 2 for additional services
 * Print your name and address on the reverse of this form so that we can return the card to you
 * Attach this form to the front of the mailpiece, or on the back if space does not permit
 * Write "Return Receipt Requested" on the mailpiece below the article number
 * The Return Receipt will show to whom the article was delivered and the date delivered

CONSTRUCTION OFFICIAL

(see reverse side)

Collected By	_____
Cash	_____
Check No	1133
Total	496 -
Other	_____
Cost of Occ	_____
DCA Training Fee	_____
Other	_____
Elevator Devices	_____
Fire Protection	_____
Plumbing	_____
Electrical	_____
Building	_____
PAYMENTS (Office Use Only)	496.00

Estimated Cost of Work \$ 500
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.

DESCRIPTION OF WORK
Removal of Existing House Complete

Is hereby granted permission to perform the following work:
☐ BUILDING ☐ PLUMBING ☐ OTHER
☐ ELECTRICAL ☐ FIRE PROTECTION

Owner in Fee	Chris J. Winters
Address	575 Congress Ave
City	Beachwood
State	W. Va. 26011
Telephone	() _____
LC No or Bids Reg No	_____
Exp Date	_____
Federal Emp No	_____
or Social Security No	_____
Contractor	_____
Address	_____
City	_____
State	_____
Zip	_____

Date Issued 12-1-96
Control # 96-378
Permit # _____



IDENTIFICATION Block 3.17 Lot 9

Work Site Location 8/6 Spar Ave

BEACHWOOD SEWERAGE AUTHORITY

1133 BEACH AVENUE

BEACHWOOD, NEW JERSEY 08722

240-2608

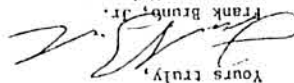
Fax: 908-240-7278

December 4, 1996

To Whom It May Concern:

This letter is notification that the "cut off" of the sewerage line at 816 Spar Avenue has been completed and is in proper condition.

Yours truly,



Frank Brumb, Jr.

Assistant Maintenance

Supervisor

BEACHWOOD SEWERAGE AUTHORITY

1133 BEACH AVENUE

BEACHWOOD, NEW JERSEY 08722

240-2608

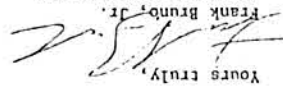
Fax: 908-240-7278

December 4, 1996

To Whom It May Concern:

This letter is notification that the "cut off" of the sewerage line at 816 Spar Avenue has been completed and is in proper condition.

Yours truly,



Frank Brund, Jr.

Assistant Maintenance

Supervisor

November 22, 1996

Chris & Peggy Winters
545 Compass Ave.
Beachwood, NJ 08722

Home Owner
808 Spar Ave
Beachwood, NJ 08722

Re: Demolition & Construction of 816 Spar Ave.

Dear Neighbor,

This letter is to inform you of the demolition of the home at 816 Spar Ave.

We will be removing the existing home and constructing a new 3 bedroom, 2 bath,
1 car garage Ranch Home.

We are sorry if the demolition and construction should cause any noise or
inconvenience to you as a neighbor, but this inconvenience will only be for a short
while and we will do our best to keep the noise, etc. at a minimum.

I am sure you will agree that the existing home is not helping the value of your home or
your area and by constructing a new home, it will not only look better but will help this
area in value.

Should you have any questions you can contact me or my wife at 473-0516

Thank You,

Chris & Peggy Winters

Antonio Altomare

ANTONIO ALTOMARE

SINCERLY,

POSSIBLE.

REQUESTING THAT THE WATER BE TURNED OFF AS SOON AS
I AM THE OWNER OF 816 SPAR AVENUE BEACHWOOD, NJ. I AM

DEAR GLADYS:

ATTN: GLADYS

BEACHWOOD WATER DEPT.
315 ATLANTIC CITY BLVD
BEACHWOOD, NJ 08722

FEBRUARY 6, 1995



No GAS in front of House
Chris Winters 12/1/96

IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL ME
AT 908-901-4701 THANKS

No conflict w/ Natural Gas

MESSAGE/Info Request # 944059510
Beachwood 816 Spar Ave

NO. OF PAGES (INCLUDING COVER SHEET) 1

FROM: Dana Martin

FAX NUMBER: 473-0514

TO: Chris Winters

DATE: 11.5.96

FAX SHEET

1830 Swarthmore Avenue, Second Floor, Lakewood, NJ 08701
Phone 908-901-4701 Fax 908-901-4747



R.E. Lansing
Service Delivery Leader
Toms River Operating

R.E. Lansing

Sincerely yours,

This notification is effective as of the above date, and certifies that the referenced building is now electrically safe for demolition.

816 Spar Avenue
Beachwood, New Jersey 08722

This letter confirms that GPU Energy, formerly Jersey Central Power and Light Company has performed a field inspection of the building at the location listed below and determined that our electric service cables and meters have been removed.

Dear Sir/Madam:

Chris Winters
545 Compass Avenue
Beachwood, N.J. 08722
Tel. [REDACTED]

November 5, 1996

Adria Avenue
Toms River, NJ 08753
Tel 201-370-7216

GPU
ENERGY

BEACHWOOD SEWERAGE AUTHORITY

1133 BEACH AVENUE
BEACHWOOD, NEW JERSEY 08722

240-2608

Fax: 908-240-7278

November 12, 1996

Beachwood Building Inspector
1600 Pinewald Road
Beachwood, N.J. 08722

Dear Herb,

As per your request Mr. Chris Winters capped off the sewer line at
816 Spar Ave, Beachwood - Block 3.17 lot 9. This was inspected on 11/12/96
by Mr. Lance Cornelius.
Please inform Mr. Winters that he is still responsible for sewerage
usage charges regardless of this disconnection.

Thank you,

Beverly Clayton

Beverly Clayton
Beachwood Sewerage Authority

bc



CLEAR

November 14, 1996

Mr. Chris Winters
545 Compass Ave.
Beachwood, NJ 08722

RE: 816 Spar Ave.

Beachwood, NJ

Dear Mr. Winters:

This is to notify you, per your request, cable lines running to
816 Spar Avenue, Beachwood, New Jersey have been removed.

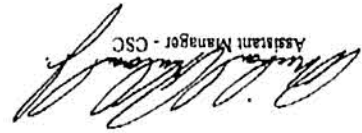
Please call me at (908) 286-2927 if I can be of further
assistance.

Yours truly,

Lucy Novak
Engineering Department Secretary

An Equal Opportunity Employer

830 HIGHWAY 37 WEST, P.O. BOX 847, TOMS RIVER, NJ 08765 • 908-286-2971


Assistant Manager - CSC

816 Spar Avenue
Beachwood, New Jersey

This letter is to serve as verification that all utility wires of communication maintained by Bell Atlantic have been removed as of November 26, 1996, from the following location:

Dear Chris:

Chris Winter
515 Campus Avenue
Beachwood, N. J.

November 26, 1996

Bell Atlantic - New Jersey, Inc.
960 Hooper Avenue
Toms River, New Jersey 08753

© Bell Atlantic

11-27-96 02:41PM

P01

(Kleinhaus)

VI. BUILDING/SITE CHARACTERISTICS		(office use only)
1	Number of Stories	n
2	Height of Structure	n
3	Area - Largest Floor	sq ft
4	New Building Area	sq ft
5	Volume of New Structure	cu ft
6	Construction Classification	
7	Total Land Area Divided	sq ft
8	Flood Hazard Zone	
9	Base Flood Elevation	n
10	Wetlands	yes
11	Max Line Load	no
12	Max Occupancy Load	

[illegible]

IDENTIFICATION

Proposed Work Site at 816 Spae Ave

Name of Owner in Fee Ted, Susan Butler

Address 816 Spae Ave

City and State () ()

Ownership in Fee Public

Principal Contractor JANE

Address

License No OR if new home Builder Reg No

Federal Employee No

Architect or Engineer

Address

Responsible Person in Charge of Work

FAX () ()

TEL () ()

TELEPHONE () ()

CONSTRUCTION PERMIT APPLICATION



3.17 101 4 QUALIFICATION CODE

ADDRESS (SITE)

PERMIT NO.

97315

UCC 4-100.1 (rev. 3/85)

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

Make 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. 45:3B-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 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, EM, 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) 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
C.3 () Electrical
C.4 () Plumbing
I further certify that I will perform the following work:
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): 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

James J. O'Neil

Date

8-29-98

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): 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

Address

Telephone ()

Signature

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

No. 18095

BOROUGH OF BEACHWOOD
BEACHWOOD, NEW JERSEY 08722
286-6000

Block 317 Lot 9

Account

DATE 8/27/97	
Received of <i>Butler</i>	
THE SUM OF \$20.00 Dollars	
FOR <i>2000</i>	
THANK YOU	
BY <i>K. Jones</i>	
☐ CASH	☒ CHECK
☐ MONEY ORDER	

MAILING
ADDRESS:

CONSTRUCTION OFFICIAL

Fee \$
Paid | Check No
Collected by

If this is a Temporary Certificate of Occupancy or Compliance the following conditions must be met no later than 19 or the owner will be subject to fine or order to vacate.

☐ TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

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 APPROVAL

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 OCCUPANCY

☐ 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

Lot No or Bldg Reg No
Federal Emp No
or Social Security No

Block 5.17
Work Site Location 816 SPAR AVE. BRIDGEWOOD
Owner in Fee 100' SUGAR BUNTER
Address 816 SPAR AVE. BRIDGEWOOD
Contractor 5 SPAR AVE. ABOVE
Address 5 SPAR AVE. ABOVE

IDENTIFICATION

Home Warranty No
Type of Warranty Plan: [] State [] Private
Use Group
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work/Use
X INSTALLING 18" TO ABOVE GROUND FOOT
6.60
(USED H 662)



CERTIFICATE

Date Issued 5/11/07
Control #
Permit # 97-315

CONSTRUCTION OFFICIAL

(Please reverse side)

Collected By	976
Cash	
Check No	992
Total	\$36.00
Other	
Cent of Dec	
DCA Training Fee	1.00
Other	
Elevator Devices	
Fire Protection	
Plumbing	
Electrical	
Building	
PAYMENTS (Office Use Only)	35.80

Estimated Cost of Work \$1500.00
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.

INSTALLING 18' ABOVE GROUND POOL
(USED POOL)

Is hereby granted permission to perform the following work:
☒ BUILDING ☐ PLUMBING ☐ FIRE PROTECTION
☐ ELECTRICAL ☐ ELEVATOR DEVICES

Owner in Fee: Ted, Susan BUTLER
Address: 816 Spae Ave Beachwood
Work Site Location: 816 Spae Ave Beachwood
Contractor: Ted Butler
Address: 816 Spae Ave Beachwood
Lic No or Bids Reg No: _____
Exp Date: _____
Federal Emp. No: _____
or Social Security No: _____

8/29/97
Date Issued: _____
Control: 97-315
Permit: _____
CONSTRUCTION PERMIT

BOROUGH OF BEACHWOOD

1600 PINEWALD ROAD
BEACHWOOD, NEW JERSEY 08722
(908) 286-6000
EXT. 217

REQUEST FOR ZONING REVIEW

Date:	8/27/57
Zoning #:	275-67
Construction #:	170
Fee:	
For Office Use	

OWNER: _____ TEL # _____
CONTRACTOR: _____ TEL # _____

ADDRESS OF CONSTRUCTION: _____
BLOCK & LOTS: 3125

PROPOSED PROJECT: _____
DIMENSIONS: 61.91

SET BACKS: Front _____ Rear ☒ Sides _____
DISTANCE BETWEEN STRUCTURES: _____
ELEVATIONS: Foundation _____ Road _____
APPROVALS: Planning Board _____ Board of Adjustment _____ Other _____

I have read and am familiar with Codes and Ordinances of the Borough of Beachwood. The proposed project will not constitute nor create a non-conforming use or structure. I will not add nor delete from the requested project specifications without approval. I accept responsibility for any and all violations created by the requested project and understand such violations must be removed and/or abated as directed by the Zoning Officer.

Owner or Agent: _____ Date: _____
APPROVED: ☒ DISAPPROVED: _____
REMARKS: _____

Zoning Officer: _____ Date: _____
8/27/57

CERTIFICATE OF ZONING COMPLIANCE

To the best of my knowledge the finished project conforms to the Codes and Ordinances of the Borough of Beachwood

APPROVED: _____ DISAPPROVED: _____
REMARKS: _____
Zoning Officer: _____ Date: _____

NOTE: A. Disapprovals may be appealed to the Beachwood Board of Adjustment.
B. All requests shall be furnished with a Map of Survey (3 copies) showing proposed set backs, elevations, dimensions, easements and any other information requested by the Zoning Officer.
C. FOR CONSTRUCTION REQUIRING FOUNDATIONS AS BUILT MAPS OF SURVEY (3 COPIES) SHALL BE SUBMITTED FOLLOWING COMPLETION AND PRIOR TO THE BUILDING INSPECTOR'S APPROVAL.

BOROUGH OF BEACHWOOD
1600 PINEWALD ROAD
BEACHWOOD, NEW JERSEY 08722
(908) 286-6000
Ext. 217

Date:	8/27/57
Zoning #:	823-57
Construction #:	610
Fee:	
For Office Use	

REQUEST FOR ZONING REVIEW

OWNER: _____ TEL #: _____

CONTRACTOR: _____ TEL #: _____

ADDRESS OF CONSTRUCTION: _____

PROPOSED PROJECT: _____

SET BACKS: Front _____ Rear ☒ Sides _____

DISTANCE BETWEEN STRUCTURES: _____

APPROVALS: Planning Board _____ Board of Adjustment _____ Other _____

ELEVATIONS: Foundation _____ Road _____

DIMENSIONS: 61.0' x 11.0'

TEL #: _____

BLOCK & LOTS: 3.12/5

TEL #: _____

OWNER or Agent: _____ Date: _____

APPROVED: ☒ DISAPPROVED: _____ REMARKS: _____

Zoning Officer: _____ Date: 8/27/57

CERTIFICATE OF ZONING COMPLIANCE

To the best of my knowledge the finished project conforms to the Codes and Ordinances of the Borough of Beachwood

Zoning Officer: _____ Date: _____

NOTE: A Disapprovals may be appealed to the Beachwood Board of Adjustment.
B All requests shall be furnished with a Map of Survey (3 copies) showing proposed setbacks, elevations, dimensions, easements and any other information requested by the Zoning Officer.
C FOR CONSTRUCTION REQUIRING FOUNDATIONS AS-BUILT MAPS OF SURVEY (3 COPIES) SHALL BE SUBMITTED FOLLOWING COMPLETION AND PRIOR TO THE BUILDING INSPECTOR'S APPROVAL.

Collected by: 1.00
Paid 1.00 Check # 100
Minimum Fee
Administrative Surcharge
TOTAL FEE \$ 36.00

TYPE OF WORK
☐ New Building
☐ Addition
☐ Alteration
☐ Roofing
☐ Siding
☐ Fence
☐ Height (6' or over)
☐ Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other
☐ Demolition

(Office Use Only) \$ 35.00

(USE POOL)
X INSTALLING 18' RD ABOVE GROUND POOL
Jorge Arnold Rodden

D. TECHNICAL SITE DATA

Signature: X. Ted Burt
I hereby certify that I am the (agent of) owner of record and am authorized to make this application

C. CERTIFICATION IN LIEU OF OATH

Date Received: 8/5/97
Control # 97-315
Permit # 97-315



A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION WHEN CHANGING

CONTRACTORS: NOTIFY THIS OFFICE CALL UTILITY DIG NO. 1-800-272-1000

Block: 317
X Work Site Location: 816 SPAR AVE BACHWOOD
Owner in Fee: TED SUSAN BUTLER
Address: 816 SPAR AVE BACHWOOD
Contractor: TED BUTLER
Address: 816 SPAR AVE BACHWOOD
Lic. No. or Bids. Reg. No.:
Federal Emp. No. or Social Security No.

B. BUILDING CHARACTERISTICS

Use Group: Proposed
Constr. Class: Proposed
No. of Stories: 1
Height of Structure: 11.500
Area - Largest Floor: 11.500
Sq. Ft.: 11.500
Volume of New Structure: 11.500
Total Land Area Disturbed: 11.500

Approved By: 8/5/97
Date: 8/5/97
SUBCODE APPROVAL: CO
Joint Plan Review Required: CO
Elec. [] Pumb [] Fire []
Mechanical []
Energy []
Insulation []
Frame []
Foundation []
Footings []
Type: Failure
Dates (Month/Day): 8/5/97
Initial: 8/5/97

MEACHWOOD RORO BUILDING DEPT.
1600 PINEWALK KESWICK ROAD
MEACHWOOD, NJ 08722

OFFICE OF PERMITS AND INSPECTIONS

CONSTRUCTION OFFICIAL - HERBERT D. COLOM
BUILDING INSPECTOR - DAVID DITZEL
TELEPHONE 900 - 286-6008 EXT. 220
FACSIMILE 900 - 349-8390

DATE: 8/29/97

TO: CONSTRUCTION OFFICIAL

FROM: Ted Butte Susan Butte
816 Spae Ave. Bannockburn
(NAME)
(ADDRESS)

RE: POOL/SPA PERMIT APPLICATION
BLOCK 3.17 LOT 9

I have reviewed and understand the BOCA National Building Code, Sections 421.10.1(1) through 421.10.1(10). Pursuant to Sections 421.10.2-10.4.1 intend to enclose my pool/spa in the following manner:

Pool will be enclosed by fence

I certify the fence as shown on my survey is existing, (enclosed fence one), is four feet or six feet in height, being a wooden/metal picket (stockade) board on board type with horizontal cross members inches apart and vertical boards spaced inches apart or being a chain link fence with inch mesh.

I understand that misrepresentation of the facts, proofs or statements will result in this application being invalid and any permit issued being null and void. If any permit is required to be voided the township will proceed as if the permit had not been obtained.

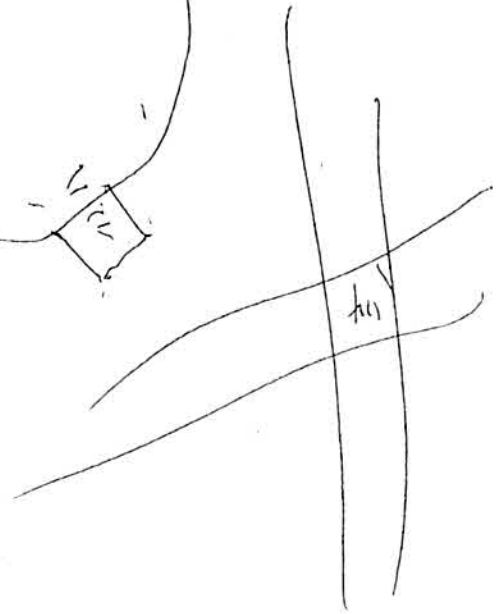
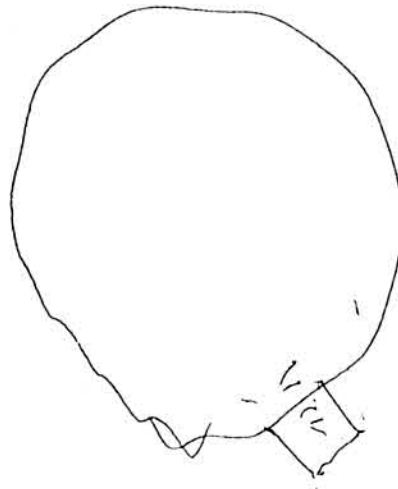
Thank you,
Please notarize.

Ted Butte Susan Butte Homeowner Signature)

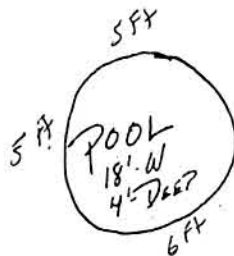
100 Butte Susan L. Butte Homeowner Name (Printed))

Patricia A. Finn
My Commission Expires May 18, 1998

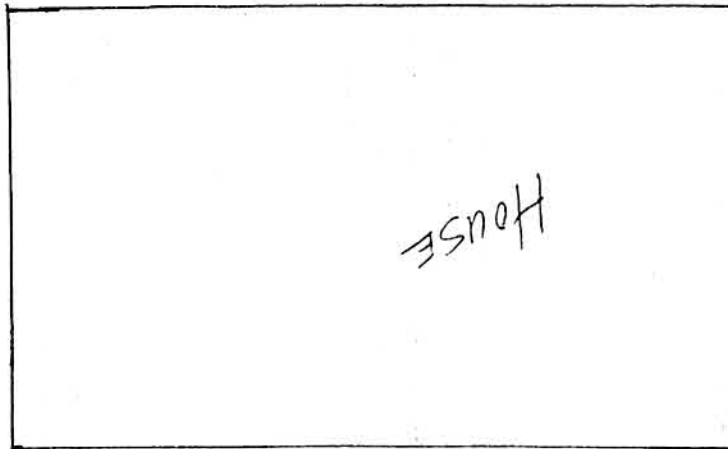
(N67021227)



40



SIDE
YARD



SIDE
YARD

FRONT YARD

SPAR AVE

CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work site at: 816 SPAR AVE

2. Name of Owner in Fee: CHRIS J WINTERS

3. Address: 545 COMPASS AVE BECKLEY WV 26008

4. Principal Contractor: CHRIS J WINTERS

5. Architect or Engineer: LEPLEY DESIGN GROUP INC

6. Responsible Person in Charge of Work: CHRIS WINTERS

II. PROPOSED WORK

1. Major work (single trade)

2. Small job (\$5,000 or less)

3. New Building

4. Addition

5. Fire Protection

6. Plumbing

7. Electrical

8. Elevator Devices

9. Asbestos Abatement

10. Demolition

11. TOTAL COSTS: 110,000

III. DO YOU WANT TOGROW?

1. ☐ Partial Release 2. ☐ Pristine Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Lifts/Moving Walks

2. ☐ High Pressure Boilers

3. ☐ Pressure Vessels

4. ☐ Refrigeration Systems

5. ☐ Cross Connections/Backflow

6. ☐ Hazardous Uses/Places of Assembly

7. ☐ Sprinklers

8. ☐ Smoke Control Systems in Open Wells

9. ☐ Underground Storage Tanks

V. FEE SUMMARY (for office use only)

1. Building: 3,630.00

2. Electrical: 1,990.00

3. Plumbing: 1,990.00

4. Fire Protection: 1,990.00

5. Elevator Devices: 1,990.00

6. Loss 20% for: 1,990.00

7. Subtotal: 17,990.00

8. DCA Training Fee: 280.00

9. Subtotal: 18,270.00

10. State Plan Review: 18,270.00

11. Cent of Occupancy: 18,270.00

12. Other: 18,270.00

13. TOTAL: 36,540.00

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories: 1

2. Height of Structure: 11'4"

3. Area - Largest Floor: 1,144

4. New Building Area: 1,144

5. Volume of New Structure: 12,990

6. Construction Classification: 5-B

7. Total Land Area Disturbed: 5.8

8. Flood Hazard Zone: sq ft

9. Base Flood Elevation: sq ft

10. Wetlands: yes

11. Max Live Load: no

12. Max Occupancy Load: no

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (H-1)

2. ☐ Multi-Family (H-2)

3. ☐ Two-Family (H-3)

4. ☐ One-Family (H-4)

5. ☐ One-Family (H-4) CABO

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VIII. BUILDING USE

A. RESIDENTIAL

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IX. CHANGE IN USE GROUP

1. ☐ State Specific Use

2. ☐ Use Group

3. ☐ Change in Use Group

X. INHABITANT FORMER

1. ☐ Inhabitant Former

2. ☐ Inhabitant Former

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3.17 BLOCK 9 ADDRESS (SITE) 816 SPAR AVE PERMIT NO 97-174

386-6008

CERTIFICATION IN LIEU OF OATH

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) vi

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 separated 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
 - 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

Charles
Date 6/5/97

II AGENT SECTION

I hereby certify the following as required by the New Jersey 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 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.

Owner's Certification

Agent Name

Address

Telephone

Date

CONSTRUCTION OFFICIAL

Handwritten signature

Fee \$
Paid by Check No
Collected by

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than 19 or the owner will be subject to fine or order to vacate

TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

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 APPROVAL

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 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 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

Block 317 Lot 9
Work Site Location 816 Spac Air Conditioning Co.
Owner in Fee 1215 W. 11th St.
Address 1215 W. 11th St. Between A & B
Contractor [Redacted]
City 530 W. 11th St.
Time 12:00 PM
L.S. No. or Bldg. Reg. No. 0061910
Federal Emp. No. 115-611-6018

Home Warranty No. 125480 SIC 16-97
Type of Warranty Plan M State I Private
Use Group
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work Use:
NEW SINGLE FAMILY PARCH HOUSE

IDENTIFICATION



CERTIFICATE

Date Issued 8/20/97
Permit # 97-174

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