

BLOCK 936 LOT 1861802 QUALIFICATION CODE _____ ADDRESS (SITE) 721 Princeton Ave PERMIT NO. 15-2037



CONSTRUCTION PERMIT APPLICATION

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

C-15-002248

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical	\$	<u>100V</u>	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
State Permit Surcharge Fee		<u>3</u>	
Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$	<u>103</u>	

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 _____	

I. IDENTIFICATION

1. Proposed Work Site at: 721 Princeton Ave Brick

2. Name of Owner in Fee: Charles Conzantino

Tel. _____ e-mail _____

Address 721 Princeton Ave Brick NJ 07241

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: Home Owners Tel. (_____) _____

Address _____ e-mail _____

License No. QR, if new home, Builder Reg. No. _____ Exp. Date _____

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

Federal Emp. ID No. _____ FAX: (_____) _____

5. Architect or Engineer _____ Contact _____

Address _____ e-mail _____

Tel. (_____) _____ FAX: (_____) _____

6. Responsible Person in Charge once Work has Begun _____

Tel. (_____) _____ FAX: (_____) _____

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>LA</u>		<u>12/15</u>		<u>62315</u>			<u>6</u>

TOTAL COST

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 _____

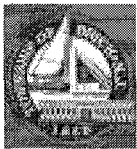
III. PLAN REVIEW (optional)

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/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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 9/1/2015
Control Number C-15-002248
Permit Number 15-2037
Permit Issue Date 6/26/2015
Certificate Number 15-2037

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 721 PRINCETON AVE. Brick Township, NJ 08723 Block: 936 Lot: 18 Qual: _____
Owner in Fee: CONZENTINO FAMILY ENTERPRISES LLC
Owner Address: 225 RIVER ST #1807 HOBOKEN NJ 07030
Telephone: [REDACTED]
Contractor CONZENTINO FAMILY ENTERPRISES LLC
Address 225 RIVER ST #1807 HOBOKEN NJ 07030
Telephone: [REDACTED] Fax: _____
License Number: [REDACTED] 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: ELECTRICAL FOR DOCK

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: _____



ELECTRICAL SUBCODE TECHNICAL SECTION



*ENTER ON
5TH STREET

Date Received
Control #
Date Issued
Permit #

6-26-15
15-2037

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

Block 936 Lot 18618.02 Qualification Code

Work Site Location 181 PLINCEYON AVE

Owner in Fee: CHARLES CORRECTION

Tel. [REDACTED]

Address 181 PLINCEYON AVE BLVD N.J. 08724

Contractor: Homenowal Tel. [REDACTED] zip code

Address [REDACTED] e-mail [REDACTED]

Contractor License No. [REDACTED] Exp. Date [REDACTED]

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

Federal Emp. ID No. [REDACTED] FAX: [REDACTED]

B. ELECTRICAL CHARACTERISTICS

Use Group Present [REDACTED] Proposed [REDACTED]

☐ Pole/Pad # [REDACTED] ☐ Temporary ☐ Other [REDACTED]

Building Occupied as Family House Utility Co. [REDACTED]

Est. Cost of Elec. Work \$ 1500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

☐ Partial -Under/Slab Utilities Approved

Date: [REDACTED] Approved by: [REDACTED]

☐ Electric Plans Approved

Date: 6/23/15 Approved by: [REDACTED]

Joint Plan Review Required: [REDACTED]

☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL FOR PERMIT

Date: 6/23/15 Approved by: [REDACTED]

Approved by: [REDACTED]

SUBCODE APPROVAL FOR CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date: 8/25/15

Approved by: [REDACTED]

Temp. Cut-in-Card Date Issued [REDACTED]

Final Cut-in-Card Date Issued [REDACTED]

Annual Pool Inspection [REDACTED]

Date of Grounding and Bonding Certification [REDACTED]

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 and perform the work listed on this application.
Applicant sign/Contractor sign and seal here:
Print name here: Charles Gonzalez
[] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: ADD'NG OUTLETS + LVS ON NEW BACK

QTY. SIZE ITEMS

2 3/4" Lighting Fixtures

2 3/4" Receptacles

2 3/4" Switches

2 3/4" Detectors

2 3/4" Light Poles

2 3/4" Motors—Fract. HP

2 3/4" Emergency & Exit Lights

2 3/4" Communications Points

2 3/4" Alarm Devices/F.A.C. Panel

2 3/4" Alarm Devices/F.A.C. Panel

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2 3/4" Alarm Devices/F.A.C. Panel

2 3/4" Alarm Devices/F.A.C. Panel

2 3/4" Alarm Devices/F.A.C. Panel

Administrative Surcharge \$
Minimum Fee \$
State Permit Surcharge Fee \$
TOTAL FEE \$



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

6-24-15

C-15-002248

15-2037

IDENTIFICATION Block: 936 Lot: 18 Qualifier
Work Site Location: 721 PRINCETON AVE. Brick Township, NJ 08723 Contractor: CONZENTINO FAMILY ENTERPRISES LLC
Owner in Fee: CONZENTINO FAMILY ENTERPRISES LLC Address: 225 RIVER ST #1807 HOBOKEN NJ 07030
225 RIVER ST #1807 HOBOKEN NJ 07030 Telephone: [REDACTED]
Telephone: [REDACTED] Lic. No. of Contr. Reg. No. Federal Employee No.

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:

ELECTRICAL FOR DOCK

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 \$1,500

David Newman Jr.
Construction Official

Date 6/24/15

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$100
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$3
CO Fee	
Other	\$0
Total	\$103
Check No.	8911
Cash	\$0
Credit	\$0
Collected By	GVR

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.

☒ 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:

☒ 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.

7/28/15 - FALL FINAL

1. - CIRCUITS NOT MARKED
IN SUB-PANEL.

2. - GFCI BREAKER TRIPPED.

3. - INTERIOR PANEL COVER
SCREW MISSING.

PJC

INFORMED OWNER.

@teeh

102.05[†]

721 PRINCETON AVE

lots 18 ~~18~~ 18.02

BLOCK 936

Consentimento

Cyrtus Conzertus

~~FILE COPY~~

JOB COPY

LOT 18.02
BLOCK 936

**RIPARIAN
GRANT**

GRANT
per db 1127 pg 222
Oct. 5, 1942

to Alfred G. Zimmerman &
Lillian C. Zimmerman, his wife

BULKHEAD LINE

LINE PER FILED MAP

TO WHOM IT MAY CONCERN:

Grade _____

Subcode

code

Electrical 200000
Cover

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08-22-2011 BY 60322
UCBAW

Construction Office

fbh 3

SHANK
wind

100.98' (b.h.)

N 77°11'05"W

P.K.
5617

natio.

EX-107-10
301477

EXPANDED
- 2017

2-1/2" /
PVC
PIPES

EX-5.
PANEL

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

John G. Ducey, Mayor

Township Council:

Susan Lydecker - President
Jim Fozman - Vice President
Heather deJong
Bob Moore
Paul Mummolo
Marianna Pontoriero



Department of Community Development & Land Use

732-262-1027

Fax: 732-262-2941
www.twp.brick.nj.us

Super Storm Sandy NO DAMAGE Report

The purpose of this document is to confirm that we have reported to the Brick Township building department that our residence has sustained NO damage from Super Storm Sandy. We acknowledge that our residence may be subject to a site visit from the building department or other authorized township agencies to verify said documentation.

Name

Charles Conzentino

Address

721 Princeton Ave. Brick NJ

Block/Lot

936 / 18 + 1802

Signature

Charles Conzentino

4/18/13



emailed to *surgicartense@gmail.com*



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, June 02, 2015

To: CONZENTINO FAMILY ENTERPRISES LLC
225 RIVER ST #1807
HOBOKEN, NJ 07030

RE: Electrical Subcode
Block: 936 Lot: 18 Qual:
721 PRINCETON AVE.
Permit Number: Control Number: C-15-002248
Last Submit Date: Friday, May 29, 2015

Dear CONZENTINO FAMILY ENTERPRISES LLC,

Your request is hereby denied based upon the following infractions.

No electrical plans submitted

Sincerely,

Thomas Olson, Subcode Official

CC:

RESUBMIT

MFF

SUBCODES

Electric

DATES

6/22/15

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 _____

Address _____

Telephone (_____) _____

Signature _____

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