ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 11-24-99
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 44A/8 Lot 3/49
Work Site Location 62 Mitchell Place

Owner in Fee/Occupant Gerard Hohmann
Address 62 Mitchell Pl., Little Silver

Tele. (732) 241-2688
Contractor CHAVAN ELECTRIC INC.
Address 59 FALSON LN.
Morganville NJ 07751

Tele. (732) 591-0068 Fax (732) 591-7211
Lic. No. 2158
Federal Emp. No. 222915802

B. ELECTRICAL CHARACTERISTICS

Use Group Present R-3 Proposed R-3
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as dwelling Utility Co.
Est. Cost of Elec. Work $ 1000

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[✓] Elec. Plans Approved
Date: 12/7/99
Approved by: JCB

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

E. Chavan
Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
9		Lighting Fixtures	
6		Receptacles	
4		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		.....	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
1		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		.....	
		.....	

Administrative Surcharge	$	
Minimum Fee	$	
DCA Training Fee	$	
TOTAL FEE	$	

U.C.C. F120
(rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received 11-24-99
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 44A/8 Lot 3/49
Work Site Location 62 Mitchell Pl Little Silver
Owner in Fee Gerard Hofmann
Address 62 Mitchell Pl Little Silver
Tele. (732) 747-7688
Contractor Kevin Dolan Assoc Inc
Address 338 RT 34 Matawan
Tele. (732) 566-5905 Fax (732) 566-5032
Lic. No. or Bldrs. Reg. No. 07286
Federal Emp. No.

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
construct one-story frame addition at rear of exist. dwelling.

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required
[ ] All
[ ] Footing
[ ] Foundation
[ ] Frame
[ ] Other

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Fence _____ Height (exceeds 6')
  [ ] Sign _____ Sq. Ft.
  [ ] Pool
  [ ] Asbestos Abatement Subchapter 8
  [ ] Lead Haz. Abatement NJAC 5:17
  [ ] Other _____
[ ] Demolition

FEE (Office Use Only)

$

Administrative Surcharge $
Minimum Fee $
DCA Training Fee $
TOTAL FEE $

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present 5B Proposed 5B
No. of Stories EXIST 2
Height of Structure 20 Ft.
Area — Largest Floor 2070 Sq. Ft.
New Bldg. Area/All Floors 192 Sq. Ft.
Volume of New Structure 2592 Cu. Ft.
Total Land Area Disturbed 300 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 12000
2. Alteration $
3. Total (1+ 2) $ 12000

U.C.C. F110 (rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

BOROUGH OF RED BANK
90 MONMOUTH STREET
RED BANK, NEW JERSEY 07701
Phone (732) 530-2760
Fax (732) 530-2766

DISPOSAL FORM

Block_____ LOT_____

Work Site Location: 62 Mitchell Pl

Owner Name: Bernd Hohmann
Address: 62 Mitchell Pl
Telephone: 732 - 530 747-7689

Name of Contractor: Kevin Dolan Assoc Inc
Address of Contractor:
Telephone:

KEVIN DOLAN ASSOCIATES INC.
838 ROUTE 34
MATAWAN, NJ 07747
-566-5905

Type of Construction/Demolition Debris: 1 Story Addition

Name of Disposal Firm: _____
Address: _____
_____
Phone: _____

Where is it being Disposed of:
Name: _____
Address: _____
_____
Phone: _____

Signature of Owner, Contractor or Agent:

Kevin Dolan
Signature

11/23/09
Date

Disposal/pat/form ltr.

Date Issued 12/13/99
Control # C441/3
Permit # 99-0560

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 44.01 Lot 3 Qual

Work Site Location 62 MITCHELL PLACE

Owner in Fee MOHMANN, GERARD
Address SAME
SAME, NJ 07739-
Telephone (732)747-7688

Contractor KEVIN DOLAN ASSOC. INC.
Address 838 ROUTE 34
MATAWAN, NJ 07747-
Telephone (732)566-5905
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

Is hereby granted permission to perform the following work:

[X] BUILDING	[ ] PLUMBING	[ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL	[X] FIRE PROTECTION	[ ] DEMOLITION
[ ] ELEVATOR DEVICES	[ ] ASBESTOS ABATEMENT (Subchapter 8 only)	[ ] OTHER

DESCRIPTION OF WORK:
CONSTRUCT ONE STORY FRAME ADDITION AT REAR OF EXISTING DWELLING

PAYMENTS (Office Use Only)

Building	32
Electrical	45
Plumbing	0
Fire Protection	50
Elevator Devices	0
Other	
DCA Training Fee	4
Cert. of Occupancy	30
Other	
Total	168
Check No.	
Cash	
Collected By	

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 $ 13,001

Construction Official

12/13/99
Date

U.C.C. F170 (rev. 5/96)

Date Issued 08/06/2004
Control #
Permit # 99-0560

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 44.01 Lot 3 Qual

Work Site Location 62 MITCHELL PLACE

Owner in Fee/Occupant HOHMANN, GERARD
Address SAME
SAME, NJ 07739-
Telephone (732)747-7688
Contractor KEVIN DOLAN ASSOC, INC.
Address 838 ROUTE 34
MATAWAN, NJ 07747-
Telephone (732)566-5905 Fax ( )
Lic. No. or Eldrs. Reg. No.
Federal Emp. No.

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R-3
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

CONSTRUCT ONE STORY FRAME ADDITION AT REAR OF EXISTING DWELLING

LAST DATE OF INSP: 8/23/2000
COST OF CONSTRUCTION: $13,000.00

[X] 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.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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 _____, ____.

Fee $ 30
Paid [X] Check No. 1441
Collected by: DH

CONSTRUCTION OFFICIAL

U.C.C. PZ6D (rev. 3/96) NJ UCCARS 5.24D

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 11/24/99
Date Issued 12/13/99
Control # C441/3
Permit # 990560

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

Block 44.01 Lot 3 Qual
Work Site Location 62 MITCHELL PLACE
Owner in Fee HOHMANN, GERARD
Address SAME
SAME, NJ 07739-
Tele.(732)747-7688
Contractor KEVIN DOLAN ASSOC. INC.
Address 838 ROUTE 34
MATAWAN, NJ 07747-
Tele.(732)566-5905 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

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

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

CONSTRUCT ONE STORY FRAME ADDITION AT REAR OF EXISTING DWELLING

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[ ] No Plans Req.
[ ] All
[ ] Footing
[ ] Foundation
[ ] Frame
[ ] Other add 12-6-99 JH
Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
[ ] Elev
SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 8-3-00
Approved By: JH

INSPECTIONS — Dates (Month/Day)

Type	Failure	Failure	Approval	Initial
Footing	12-21-99		12-22-99 12/5&6/99	JH
Foundation				
Slab			2/1/00	DE
Frame			2/4/00	DE
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical			2nd Flr Smoke Not Inter 12-22-99	JH
TCO				
Other Sheathing			6-30-00	JH
Final			8/23/00 Fee	
BarrierFree				

TYPE OF WORK — FEE (Office Use Only)

[ ] New Building	$	0
[X] Addition		39
[ ] Alteration		0
[ ] Roofing		0
[ ] Siding		0
[ ] Fence 0 Height (exceeds 6')		0
[ ] Demolition 0 Sq. Ft.		0
[ ] Pool		0
[ ] Asbestos Abatement Subchapter 8		0
[ ] Lead Haz. Abatement NJAC 5:17		0
[ ] Other		0
Other		0
[ ] Demolition		0

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present Proposed
No. of Stories 2
Height of Structure 20 Ft.
Area Largest Floor 2,070 Sq. Ft.
New Bldg. Area/All Floors 192 Sq. Ft.
Volume of New Structure 2,592 Cu. Ft.
Total Land Area Disturbed 300 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 12,000
2. Alteration $ 0
3. Total (1+2)$ 12,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Paid [X] Check # Collected by: KDK

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	39
DCA Training Fee	$	4

U.C.C. F110 (rev. 3/96)

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/24/99
Date Issued 12/3/99
Control # C441/3
Permit # 99-0560

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

Block 44.01 Lot 3 Qual /
Work Site Location 62 MITCHELL PLACE
Owner in Fee HOHMANN, GERARD
Address SAME
SAME, NJ 07739-
Tele.( ) Fax ( )
Contractor
Address
Tele.( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3915802

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as R3 Utility Co. GPU
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[✓] Elect Plans Approved
Date: 12/7/99
Approved By: JCA

SUBCODE APPROVAL
[✓] CO [ ] CCO [ ] CA
Date: 1/27/00
Approved By: [signature]

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
ICO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued 1/27/00 JCA

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
9		Lighting Fixtures	
5		Receptacles	
4		Switches	
6		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
25		TOTAL NUMBERS	25
0		Pool Permit/With UW Lights	0
1		Storable Pool/Spa/Hot Tub	10
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Paid [✓] Check # 1
Collected by: [signature]

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	45
DCA Training Fee	$	0

U.C.C. F120 (rev. 3/96)