

Brick

Permit Without a Jacket

Permit Number 10915

Construction Permit #

1095

June 7, 1984

Owner Browing

Location 960 Rosewood Avenue

Cedarwood Park

Block 524-30 Lot 30

Contractor Garden State A.C.

Fee \$ 25.00 Use Plumbing Only

BUILDING SUB-CODE INSPECTIONS

Footing Trench
Foundation
Slab
Sheathing
Framing
Insulation
Sheet Rock
Plumbing
Fire Inspection
Final
C.O. Issued

VIOLATIONS

PLUMBING SUB-CODE INSPECTIONS

Slab
Rough
Septic/Sewer
Water
Final
Electrical Final

Use reverse side for additional remarks

JUN 5 1984

CONSTRUCTION PERMIT APPLICATION

BRICK TOWNSHIP, NEW JERSEY

BUILDING

IMPORTANT — Complete ALL items. Mark boxes where applicable

I. LOCATION OF BUILDING		Numbers and street <u>960 Rosewood Ave</u>	Section <u>Central Park</u>	Lot <u>30</u>	Block <u>524-30</u>
N S		E W side of			
E W side of		feet E W from intersection of			
(Other local geographic, political, or legal subdivision identification)		N S			

II. TYPE AND COST OF BUILDING — All applicants complete Parts A - D

A. TYPE OF IMPROVEMENT		D. PROPOSED USE — For "Wrecking" most recent use	
1 ☐ New buildings	Residential	18 ☐ Amusement, recreational	Nonresidential
2 ☐ Addition (If residential, enter number of new housing units added, if any, in Part D, 13)	12 ☐ One family	19 ☐ Church, other religious	19 ☐ Church, other religious
3 ☐ Alteration (See 2 above)	13 ☐ Two or more family — Enter number of units	20 ☐ Industrial	20 ☐ Industrial
4 ☐ Repair, replacement	14 ☐ Transient hotel, motel, or dormitory — Enter number of units	21 ☐ Parking garage	21 ☐ Parking garage
5 ☐ Demolition	15 ☐ Garage	22 ☐ Service station, repair garage	22 ☐ Service station, repair garage
6 ☐ Moving (relocation)	16 ☐ Carport	23 ☐ Hospital, institutional	23 ☐ Hospital, institutional
7 ☐ Garage	17 ☐ Other — Specify	24 ☐ Office, bank, professional	24 ☐ Office, bank, professional
☐ Swim Pool ☐ In ☐ out		25 ☐ Public utility	25 ☐ Public utility
☐ Fence		26 ☐ School, library, other educational	26 ☐ School, library, other educational
B. OWNERSHIP		27 ☐ Stores, mercantile	27 ☐ Stores, mercantile
8 ☐ Private (individual, corporation, nonprofit institution, etc.)	(Omit cents)	28 ☐ Tanks, towers	28 ☐ Tanks, towers
9 ☐ Public (Federal, State, or local government)	\$	29 ☐ Other - Specify	29 ☐ Other - Specify
C. COST		Nonresidential — Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.	
10. Cost of Improvement			
To be installed but not included in the above cost			
a. Electrical (# Fixtures, Outlets)			
b. Plumbing (# of Fixtures)			
c. Heating, air conditioning			
d. Other (elevator, etc.)			
11. TOTAL COST OF IMPROVEMENT	\$ 2059		

III. SELECTED CHARACTERISTICS OF BUILDING —

For new buildings and additions, complete Parts E - I; for wrecking, complete only Part H, for all others skip to IV.

E. PRINCIPAL TYPE OF FRAME		H. DIMENSIONS		FEE COMPUTATIONS	
☐ Masonry (wall bearing)	Number of stories	Volume of Building			
☐ Wood frame	Total square feet of floor area, all floors, based on exterior dimensions	Building Sub Code			
☐ Structural steel	Total land area, sq. ft.	Electrical Code			
☐ Reinforced concrete		Plumbing Code		25-	
☐ Other - Specify		Plan Review			
F. TYPE OF HEATING SYSTEM		1. RESIDENTIAL BUILDING ONLY		CERTIFICATE OF OCCUPANCY	
Specify	Yes ☐ No ☐	Number of bedrooms		STATE TRAINING FUND	
Air Cond.		Number of bathrooms		CONSTRUCTION	
G. TYPE OF SEWERAGE DISPOSAL		Full		PERMIT FEE	
☐ Public		Partial			
☐ Individual					

SEE REVERSE

Check 1095

SUB CONTRACTORS

	NAME	TRADE	ADDRESS	ZIP CODE	PHONE #
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

PERSON TO BE IN CHARGE OF CONSTRUCTION

NAME Gordon Slater A.C.

ADDRESS

IV. IDENTIFICATION — To be completed by all applicants

	Name	Mailing address — Number, street, city, and State	ZIP code	Tel. No.
1. Owner Agent	<u>RICHARD Browning</u>	<u>960 Rosewood Ave</u>		
2. Contractor				
3. Architects				

The owner of this building and the undersigned agree to conform to all applicable laws of Township of Brick and that all required state, county and local prior approvals have been given.

Signature of applicant

Address

Application date

DO NOT WRITE IN THIS SPACE — FOR OFFICE USE ONLY

Approved by

John D. John

Date permit issued

6-7-84

Permit Number

1095

I agree to construct said building in conformity with the plans and specifications filed with the Construction Official and in compliance with the provisions of the Building Code whether shown on plans or not.

A. IDENTIFICATION

APPLICANT — Complete unshaded areas only

When changing contractors, notify this office

Owner Richard BesuwangContractor Dorothy Smith A/EAddress 960 Rosewood Ave.Address P.O. Box 740BrickFitchfield, N.D.Tel. () 920-7192Tel. () 462-7800Work Site Address SameLic.No./Bus. Permit 2745Federal Emp. No. 21-0744087**CERTIFICATION IN LIEU OF OATH:**

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
	Water Closet/Bidet/Urinal	\$		Garbage Disposal	\$	COLUMN 1
	Bathtub		1	Air Conditioner Unit		COLUMN 2
	Lavatory/Sink			Indirect Connection		
	Shower/Floor Drain			Sewer Ejector		SUBTOTAL
	Washing Machine			Grease Trap		Minimum Plumbing Fee
	Dishwasher			Interceptor		(If applicable)
	Commercial Dishwasher			Backflow Device		Total Plumbing Fee
	Water Heater			Reduced Pressure		(Greater of Minimum
	Domestic Boiler/			Backflow Device		or Subtotal)
	Furnace			Vent Stack		
	Steam Boiler			Solar System		
	Water Util. Connection			Other		
	Sewer Util. Connection			Other		
	Hose Bibb			Other		
	Water Cooler			Other		
	COLUMN 1	\$		COLUMN 2	\$	

C. PLUMBING CHARACTERISTICSUSE GROUP: Res Present Res Proposed

Drainage — Material _____ Size _____

Building Sewer — Material _____ Size _____

D. COMMENTS

A. IDENTIFICATION

APPLICANT — Complete unshaded areas only

When changing contractors, notify this office

Owner Richard BrownContractor David Smith (U)Address 960 Westmont AveAddress P.O. Box 740Tel. () [REDACTED]Tel. () 462-7800Work Site Address SameLic.No./Bus. Permit 2745Federal Emp. No. 21-0744087CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and
Small Job Only)I hereby certify that the proposed work
is authorized by the owner of record
and I have been authorized by the
owner to make this application as his
agent.

AGENT SIGNATURE

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	Water Closet/Bidet/Urinal	\$		Garbage Disposal	\$	COLUMN 1
	Bathtub		1	Air Conditioner Unit		COLUMN 2
	Lavatory/Sink			Indirect Connection		SUBTOTAL
	Shower/Floor Drain			Sewer Ejector		Minimum Plumbing Fee
	Washing Machine			Grease Trap		(If applicable)
	Dishwasher			Interceptor		Total Plumbing Fee
	Commercial Dishwasher			Backflow Device		(Greater of Minimum
	Water Heater			Reduced Pressure		or Subtotal)
	Domestic Boiler/			Backflow Device		
	Furnace			Vent Stack		
	Steam Boiler			Solar System		
	Water Util. Connection			Other		
	Sewer Util. Connection			Other		
	Hose Bibb			Other		
	Water Cooler			Other		
	COLUMN 1	\$		COLUMN 2	\$	

C. PLUMBING CHARACTERISTICSUSE GROUP: Res. Present Res. Proposed

Drainage — Material _____ Size _____

Building Sewer — Material _____ Size _____

D. COMMENTS

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

INSPECTIONS

Type

Failure Dates

Approval Date

Slab ☐

Rough ☐

Water ☐

Sewer ☐

Energy ☐

Mechanical ☐

DATE

JOB CONDITION/COMMENTS



BUILDING SUBCODE TECHNICAL SECTION



PERMIT NO. 1089
DATE ISSUED 6-7
REVISION DATE _____
Block 504.3M Lot _____
Subdivision Bedford Hills

IDENTIFICATION

Permit - Complete unshaded areas only

When changing contractors, notify this office

Richard Browning
460 Rosewood Ave
Bedford
920-7192
Contractor Gardens State A/C
Address P.O. Box 740
Fitchford
Tel. 462-2800
Lic. No. 2745
Federal Emp. No. 31-0244087

CERTIFICATION IN LIEU OF
(Complete for Minor Work
Small Job Only)
I hereby certify that the project
is authorized by the owner
and I have been authorized
owner to make this application
agent.
James Hill
AGENT SIGNATURE

TECHNICAL SITE DATA

DESCRIPTION OF WORK

Full description including materials used,
plans, etc.

Handing
Only
Good

TYPE OF WORK:

- ☐ New Building
☐ Addition
☐ Alteration/Renovation
☐ Roofing
☐ Siding
☐ Other _____
☒ Demolition
☐ Miscellaneous
☐ Fence
☐ Sign
☐ Pool
☐ Elevator
☒ Other Central A/C

Fee Basis

Fee

SUBTOTAL

Minimum Building
Fee (if applicable)
Total Building Fee
(Greater of Minimum
or Subtotal)

\$ _____
\$ _____
\$ _____

BUILDING CHARACTERISTICS

Present _____ Proposed _____

Sq. Ft. _____ Total Building Area-All Floors _____ Sq. Ft.

Structure _____ Ft. _____ Volume of Structure _____ Cu. Ft.

1st Floor _____ Sq. Ft. _____ Total Land Area Disturbed _____ Sq. Ft.

Cost of Building Work: \$ 2059.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Project



**BUILDING
SUBCODE**

TECHNICAL SECTION



PERMIT NO. _____
DATE ISSUED _____
REVISION DATE _____
Block 524, 301 Lot 3
Subdivision Bellevue

IDENTIFICATION

NT - Complete unshaded areas only

When changing contractors, notify this office

Contractor Richard Beuring
Address 2080x 740
Tel. () 462-2810
Lic. No. 2745
Federal Emp. No. 21-074487

CERTIFICATION IN LIEU
(Complete for Minor Work
Small Job Only)
I hereby certify that the project
is authorized by the owner
and I have been authorized
owner to make this application
agent.
James H. H. H.
AGENT'S SIGNATURE

TECHNICAL SITE DATA

DESCRIPTION OF WORK
if description including materials used,
ns, etc.

Handwritten description of work

TYPE OF WORK:
☐ New Building
☐ Addition
☐ Alteration/Renovation
☐ Roofing
☐ Siding
☐ Other _____
☒ Demolition
☐ Miscellaneous
☐ Fence
☐ Sign
☐ Pool
☒ Elevators
☒ Other Central A/C

Fee Basis	Fee
Minimum Building Fee (if applicable)	\$
Total Building Fee (Greater of Minimum or Subtotal)	\$
SUBTOTAL	\$

BUILDING CHARACTERISTICS

Present Yes Proposed Yes
Total Building Area-All Floors _____ Sq. Ft.
Volume of Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.
Cost of Building Work: \$ 2059.00

D. COMMENTS

☐ Partial Releases ☐ Prototype P

AN REVIEW AND INSPECTION – BUILDING

ATE

JOB CONDITION/COMMENTS[illegible]

Grading:

Maximum Live Load:

Maximum Occupancy Load:

3 SUMMARY

REVIEW		INSPECTIONS		
Date	Initials	Type	Failure Dates	Approval
Plans Required	_____	☐ Footing/Foundation		
_____	_____	☐ Slab		
Footing/Foundation	_____	☐ Frame		
_____	_____	☐ Architectural		
_____	_____	☐ Insulation		
_____	_____	☐ Finishes		
		☐ Energy		
		☐ Mechanical		
		☐ TCO		
		☐ Other _____		
☐ O ☐ CCO ☐ CA				
ACTIONS FINAL				
ed By: _____				

ted By: