

532

LOT

QUALIFICATION CODE

ADDRESS (SITE)

2. PERMIT NO.

04-3170



CONSTRUCTION PERMIT APPLICATION 028412

C28-6-1

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

I. IDENTIFICATION

1. Proposed Work Site at: 115 Canyon View, NE 68101
2. Name of Owner in Fee: Richard Tucker Tel. [REDACTED]
Address Now or later _____
street municipality zip code
3. Ownership in Fee: ☒ Public ☐ Private
4. Principal Contractor: L. O. Mitchell Tel. 800 97-207
Address 11 Kennedy Blvd. East Brunswick, NJ
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Employee No. _____ FAX: () _____
5. Architect or Engineer _____ Tel. () _____
Address _____
6. Responsible Person in Charge of Work: Rex V. Zark
Tel. () _____ FAX () _____

V. FEE SUMMARY (for office use only)

1. Building
2. Electrical
3. Plumbing
4. Fire Protection
5. Elevator Devices
6. Subtotal
7. Less 20% for State Plan Review subtotal
8. CA Training Fee
9. Subtotal
10. Subtotal
11. Cert. of Occupancy
12. Other
13. TOTAL

Update

Update

5 4/1

1

3

2

40

VI. BUILDING/SITE CHARACTERISTICS

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. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____
 no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

II. PROPOSED WORK

1. ☒ Minor Work
2. ☐ New Building
3. ☐ Addition
4. ☐ Alteration
5. ☐ Fire Protection
6. ☐ Plumbing
7. ☒ Electrical
8. ☐ Elevator Devices
9. ☐ Asbestos Abat. Subch. 8
10. ☐ Lead Hazard Abatement
11. ☐ Demolition

TOTAL COSTS

Est. Cost:

EST. COST.
21.75

OPTIONAL (for office use only)[illegible]

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) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:

Before Construction

After Construction

Net Gain or Loss

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

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

- | | |
|---|---|
| 1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks | 5. ☐ Cross-Connections/Backflow Preventers |
| 2. ☐ High Pressure Boilers | 6. ☐ Hazardous Uses/Places of Assembly |
| 3. ☐ Pressure Vessels | 7. ☐ Sprinklers |
| 4. ☐ Refrigeration Systems | 8. ☐ Smoke Control Systems in Open Wells |
| | 9. ☐ Underground Storage Tanks |

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 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 vii:

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. 5:32-2.15(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.

Slomin's



125 LAUMAN LANE, HICKSVILLE, NEW YORK 11801 • 516/932-7000 • FAX 516/932-7030

BRICK TOWNSHIP
401 Chambers Bridge Road
Brick, NJ 08723
732-262-1024

ATTN: Building Department.

RE: Richard Buckles
508 Central Ave
Brick, NJ 08723
BLOCK #: 532 LOT #: 32

This letter is to inform you that alarm system at the above address is **CANCELLED/OUT TO COLLECTIONS** with our company. The system is no longer active, nor is it being monitored by our Central Station office. Please **CLOSE OUT Permit #04-3170**, as a Final Inspection may not be possible to complete that process. Should you have any questions and/or comments or should any further information be required, please do not hesitate to contact me.

Thank You,

Sylena Clark
Permit Coordinator
Slomin's Security
28 Kennedy Blvd. Suite #900
East Brunswick, NJ 08816
800-997-2585 (Ext. #286)
732-220-0553 (Fax #)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 07/29/2004
Control #
Permit # 04-3170

UDC NEW JERSEY
CONSTRUCTION
PERMITS

IDENTIFICATION Block 532 Lot 32 Qual

Work Site Location 508 CENTRAL AVE Contractor SLOMIN'S
BURGLAR ALARM Address 28 KENNEDY BLVD SUITE 500
Owner in Fee BUCKLES, RICHARD EAST BRUNSWICK, NJ 08816-
Address SAVE Telephone (800) 997-2565
BRICK, NJ 08723- Lic. No. or Bldg. Reg. No.
Telephone Federal Emp. No. 11-1339259

I hereby grant permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☒ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 5 only)

DESCRIPTION OF WORK:
BURGLAR ALARM

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 \$ 150

D. Newman Jr. (Signature)
Construction Official

07/29/2004

Date

U.C.C. F170 (rev. 3/96) NJ UCCARS 5.24E

PAYMENTS (Office Use Only)

Building 0
Electrical 40
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
DCA State Permit Fee 0
Cert. of Occupancy 0
Other
Total 40
Check No. 301
Cash
Collected By JHL

07/29/04 9:23AM 001558H1494
XX07 SERV.007

#3170
ELECTRIC \$40.00
CHECK \$40.00



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

Block 532 Lot 32
Work Site Location 508 Central Avenue
Baick, NJ 08723
Owner in Fee/occupant Richard Buckles
Address (Same as above).
Contractor Skonin's Security
Address 28 Kennedy Blvd.
East Brunswick, NJ 08816
Tel ()
Lic No. 800-997-2585 Fax () 71-1339259
Federal Emp. No. # 4790614
Use Group Present Proposed
[] Pole/Pad # [] Temporary [] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work \$ 150.00

B. ELECTRICAL CHARACTERISTICS

JOBSUMMARY (Office Use Only)
PLAN REVIEW
☒ No Plans Required
☐ Joint Plan Review Required
[] Building [] Plumbing [] Fire [] Elevator
[] Elec. Plans Approved
Date: 12-8-01
Approved by: [Signature]
SUBCODE APPROVAL
[] CO [] CCO [] CA
Date: _____
Approved by: _____
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 and perform the work listed on this application)
Applicant's Signature/Contractor's Seal and Signature
[Signature]
[] Licensed Electrical Contractor [] Exempt Applicant



D. TECHNICAL SITE DATA

Date Received _____
Date issued 7/29/2001
Control # 04-370
Permit #

ITEMS	QTY	SIZE
Lighting Fixtures 3 Doors		
Receptacles 1 Motion		
Switches 1 Keypad		
Detectors 1 Strobe		
Light Poles 1-6 Zone Control		
Motors—Fract. HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		
Alarm Alarm		
TOTAL NUMBERS		
Pool Permit/with UVW Lights		
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 \$

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

UCC F120
(rev. 3/95)

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

Block 532 Lot 32

Work Site Location 508 Centant Avenue

Owner in Fee/Occupant Batch, NJ 08723

Address Richard Buckea

Address (Same as above)

Contractor Skomin's Security

Address 28 Kennedy Blvd, NJ 08816

East Brunswick, NJ 08816

800-997-2585 Fax ()

71-1339259

Federal Emp. No. # 4790614

Use Group Present Proposed

Building Occupied as Utility Co. [] Temporary [] Other

Est. Cost of Elec. Work \$ 150.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW [X] No Plans Required [] Joint Plan Review Required

[] Building [] Plumbing [] Fire [] Elevator

[] Elec. Plans Approved

Date: 11-1-92

Approved by: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: 11-1-92

Approved by: [Signature]

Final Service

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

INSPECTIONS

Type: Rough

Dates (Month/Day)

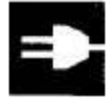
Initial Approval Failure Failure

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

Date Received

Date Issued - 1/29/2004

Control #

Permit # 01-5110

QTY.	SIZE	ITEMS
3		Lighting Fixtures
3		Doors
1		Receptacles
1		Switches
1		Detectors
1		Light Poles
1-6		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		TOTAL NUMBERS
		Pool Permit/with UV Lights
		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
		TOTAL FEE
		Administrative Surcharge
		Minimum Fee
		DCA Training Fee

1 White = Office Copy

2 Canary = Office Copy

3 Pink = Office Copy

4 Gold = Applicant Copy

FEE (Office Use Only)

Brick Township
401 Chambers Bridge Road
Brick, NJ 08723

ATTN: Permit fees.

Gentlemen/Madam:

Please find the enclosed permit applications for your consideration:

1.)

DB Central Ave.

Included is a check for \$35.00 as well as a self-addressed stamped envelope. If there are any further questions, please feel free to call anytime.

Thank You,

Sylena Angulo
Permit Coordinator
Slomin's Security
28 Kennedy Blvd.
East Brunswick, NJ 08816
(800) 997-2585

*P.C. - Check
Included.*

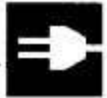
ELECTRICAL SUBCODE



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

Block 532 Lot 32
 Work Site Location 508 Central Avenue
 Brick, NJ 08723
 Owner in Fee/Occupant Richard Buckles
 Address (Same as above).
 Contractor ()
 28 Kennedy Blvd.
 East Brunswick, NJ 08816
 Tele. () 800-997-2585 Fax () 71-7339259
 Federal Emp. No. # 4790674
 B. ELECTRICAL CHARACTERISTICS
 Use Group Present Proposed
 [] Pole/Pad # [] Temporary [] Other
 Building Occupied as Utility Co.
 Est. Cost of Elec. Work \$ 150.00

JOB SUMMARY (Office Use Only)
 PLAN REVIEW [] No Plans Required [] Joint Plan Review Required
 Date Initial Date
 INSPECTIONS Type: Failure Failure Failure
 Dates (Month/Day) Initial Approval Initial
 Rough Temp. Serv. Constr. Serv. TCO Other Service Final
 Temp. Cut-in-Card Date Issued Final Cut-in-Card Date Issued
 SUBCODE APPROVAL
 Date: [] CO [] CCO [] CA
 Approved by: [Signature]
 Date: 12/28/04
 [] Elec. Plans Approved
 [] Fire [] Elevator
 [] Building [] Plumbing
 Approved by: [Signature]
 Date: 12/28/04
 C. CERTIFICATION IN LIEU OF OATH
 I hereby certify that I am the (agent of owner or record and am authorized to make this application and perform the work listed on this application)
 Applicant's Signature/Contractor's Seal and Signature
 [Signature]
 [] Licensed Electrical Contractor [] Exempt Applicant



D. TECHNICAL SITE DATA

Date Received 7/29/2004
 Control # 04-3170
 Permit #

Lighting Fixtures 3 Doors
 Receptacles 1 Motion
 Switches 1 Keypad
 Detectors 1 Siren
 Light Poles 1-6 Zone Control
 Motors—Fract. HP
 Emergency & Exit Lights
 Communications Points
 Alarm Devices/F.A.C. Panel
 TOTAL NUMBERS
 Pool Permit/with UV Lights
 Storable Pool/Spa/Hot Tub
 KW Elec. Range/Receptacle
 KW Over/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. 3/95)
 1 White = Office Copy
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 3 Pink = Office Copy
 4 Gold = Applicant Copy

4808 Locked

11/11/11