



CONSTRUCTION PERMIT APPLICATION

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JUN 22 1989

DIV. OF INSPECTION

I. IDENTIFICATION

1. Proposed Work at: 551 CALIFORNIA AV. Tel. () () ()

2. Owner Name: RANDALL & DONNA VIETH

Address: 551 CALIFORNIA AV. Tel. () () ()

3. Principal Contractor: OWNER

Address: SAME

Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____

4. Architect or Engineer: _____ Tel. () () ()

Address: _____

5. Responsible Person in Charge of Work: _____ Tel. () () ()

II. PROPOSED WORK

A. TYPE OF WORK	B. CATEGORIES OF WORK	Estimated	D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?
1. ☐ Minor Work (Single Trade)	Permit/Category	\$	1. ☐ Elevators/Dumbwaiters
2. ☐ Small Job (\$5,000 and no Prior Approvals)	1. ☐ Building/Structural		2. ☐ High-Pressure Boilers
3. ☐ New Building	2. ☐ Plumbing		3. ☐ Refrigeration Systems
4. ☐ Addition	3. ☐ Electrical		4. ☐ Pressure Vessels
5. ☐ Alteration	4. ☐ Fire Protection		5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Repair, Replacement	5. ☒ Other <u>FENCE</u>		6. ☐ Cross-connections/Backflow Preventors
7. ☐ Demolition	6. ☐ Other _____		7. ☐ Sprinklers
8. ☒ Other: <u>force</u>	TOTAL COST <u>\$500.00</u>		8. ☐ Smoke Control Systems in Open Wells
C. DO YOU WANT:			
1. ☐ Partial Releases			
2. ☐ Prototypes Processing			

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL	B. NON-RESIDENTIAL
1. ☒ Hotels (R-1)	5. ☐ Theatres with Stage (A-1-A)
2. ☐ Multi-Family (R-2)	6. ☐ Movie Theatres (A-1-B)
HMD Reg. No.: _____	7. ☐ Night Clubs (A-2)
3. ☐ Two Family (R-3b)	8. ☐ Restaurants, Libraries, Museums (A-3)
4. ☒ One-Family (R-3a)	9. ☐ Religious Assembly (A-4)
	10. ☐ Outdoor Assembly (A-5)
	11. ☐ Business (B)
	12. ☐ Educational (E)
	13. ☐ Moderate-Hazard Factory (F-1)
	14. ☐ Low-Hazard Factory (F-2)
	15. ☐ High-Hazard (H)

State Specific Use: _____

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP	B. HEATING FUEL	C. TYPE OF SEWAGE DISPOSAL	D. TYPE OF WATER SUPPLY	E. BUILDING CHARACTERISTICS
1. ☒ Private (Individual, Corp., Non-profit Inst., Etc.)	Principal ☐ Gas ☐ Oil ☐ Electric ☐ Solid (Wood/Coal, Etc.) ☐ Propane ☐ Solar ☐ Other _____	10. ☐ Public or Private Company	12. ☐ Public or Private Company	14. No. of Stories _____
2. ☐ Public (State, County or Local Govt.)		11. ☐ Private (Septic Tank, Etc.)	13. ☐ Private (Well, Etc.)	15. Height of Structure _____ Ft.
				16. Area—Largest Floor _____ Sq. Ft.
				17. Bldg. Area—All Fls. _____ Sq. Ft.
				18. Volume of Structure _____ Cu. Ft.
				19. Total Land Area Disturbed _____ Sq. Ft.

LDS BR 10520403

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

A. ☒ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.

B. ☐ I further certify that I will perform the work below.

B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing

C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.

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 understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE

Randall Liebs

DATE

6/22/89

II. AGENT SECTION

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

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

TEL. ()

ADDRESS

SIGNATURE

PRIOR APPROVALS CHECKLIST

[illegible]

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

EDITION OF CODE		EDITION OF CODE	
☐ One and Two Family Dwellings	_____	☐ Mechanical	_____
☐ Building	_____	☐ Energy	_____
☐ Electrical	_____	☐ Barrier Free	_____
☐ Plumbing	_____	☐ Flood Hazard	_____
		☐ As Built Elevation Certification	_____
		☐ Other	_____

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

- ☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN - FILE LOCATION AND NO.

PROTOTYPE PLAN - FILE LOCATION AND NO.

Plan Review Required	Type of Work	Plans Received By Date	Approval Date	Reviewer	Comments
☐	BUILDING Footings/Foundations Framing Architectural Other <i>Garney</i>	6-22-89 <i>J.A.</i>	7-13-89 <i>16N</i>		
☐	PLUMBING			6-22-89 <i>W.C.</i>	
☐	ELECTRICAL				
☐	FIRE PROTECTION				
☐	OTHER				

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
	BUILDING			
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
	PLUMBING			
	ELECTRICAL			
	FIRE PROTECTION			
	OTHER			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

- ☐ Temporary Certificate of Occupancy
Date Expired _____
- ☐ Temporary Certificate of Occupancy
Date Expired _____
- ☐ Certificate of Occupancy
No. _____
- ☐ Certificate of Continued Occupancy
No. _____
- ☐ Certificate of Approval
No. _____
- ☐ None

IV. ON-GOING INSPECTIONS

On-going Inspections Required
(See Page 1, I.I.O.)

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE			AMOUNT
	Date	Collected By	
CERTIFICATE OF OCCUPANCY			\$
OTHER			\$
OTHER			\$
- LESS: Refunds			\$
TOTAL COLLECTED AFTER PERMIT ISSUED			\$
C. TOTAL CONSTRUCTION FEES COLLECTED			
COLLECTED WITH PERMIT (VA)			\$
COLLECTED AFTER PERMIT (VA)			\$

V. FEE SUMMARY

Initial fee collection recorded in A: all others in section B.

**A. COLLECTED AT TIME OF CONSTRUCTION PERMIT
ISSUANCE**

BUILDING	AMOUNT	\$ 7.50
PLUMBING	_____	_____
ELECTRICAL	_____	_____
FIRE PROTECTION	_____	_____
OTHER	_____	_____
SUBTOTAL		\$ 7.50

— LESS: 20% of subtotal (when plan review performed by state agency).

D.C.A. TRAINING FEE .0006 x _____ = _____

CERTIFICATE OF OCCUPANCY _____

OTHER _____

OTHER _____

TOTAL COLLECTED WHEN PERMIT ISSUED _____

DATE _____ Collected By _____

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

CERTIFICATE OF	Date	Collected By	AMOUNT
OCCUPANCY			\$
OTHER			\$
OTHER			\$
- LESS: Refunds			\$
TOTAL COLLECTED AFTER PERMIT ISSUED			\$

C. TOTAL CONSTRUCTION FEES COLLECTED	AMOUNT
COLLECTED WITH PERMIT (VA)	\$
COLLECTED AFTER PERMIT (VEN)	\$



Block 1406.5 Lot 1,2,3
Subdivision _____

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner RANDALL + DONNA VIETH

Contractor

Address 551 CALIFORNIA AV.

Address _____

BRICK.

Tel. (201) 840-6614

Tel. () _____

Work Site Address

Lic. No. _____

Federal Emp. No. _____

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

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

FENCE

Type - Blon Bl.

Height $\rightarrow 4 + 0 = 6$

☐ See Plans

TYPE OF WORK:

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

[illegible]

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories _____

Total Building Area—All Floors _____ Sq. Ft.

Height of Structure 6 / 4 F1

Volume of Structure _____ Cu. Ft.

D. COMMENTS

A. IDENTIFICATION

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner RANDALL + DONNA VIETH

Contractor A

Address 551 CALIFORNIA AV

Address _____

BRICK 10

Tel. () _____

Lic. No. _____

Federal Emp. No. _____

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(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

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

15 5'2
6
FENCE
6' to street 2-13-92 JH
Type - Rd on Rd.
13 2
4
Height - ~~X~~ = 4' 0" = 6'

TYPE OF WORK:

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

Fee Basis

Fee

SUBTOTAL

Minimum Building Fee (if applicable)

Total Building Fee
(Greater of Minimum
or Subtotal)

☐ See Plans

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories _____

Total Building Area—All Floors _____ Sq. Ft.

Height of Structure 6 14 Ft.

Volume of Structure	Cu. Ft.
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D. COMMENTS

JOB SUMMARY

PLAN REVIEW

Date Initials

☒ No Plans Required

6-23-89 HW

☐ All

☐ Footing/Foundation

☐ Frame

☐ Architectural

☐ Other

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

INSPECTIONS

Type

Failure Dates

Approval Date

☐ Footing/Foundation

☐ Slab

☐ Frame

☐ Architectural

☐ Insulation

☐ Finishes

☐ Energy

☐ Mechanical

Five Grading:

Maximum Live Load:

Maximum Occupancy Load:

DATE

SEE COMMENTS/REMARKS

