



CONSTRUCTION PERMIT APPLICATION

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

SECTION I. IDENTIFICATION

1. Proposed Work Site at: 231 Essex PL.

2. Name of Owner in Fee: John Dawennanham Tel. ()
Address 231 Essex PL. Brick, N.J. 08723
street municipality zip code

3. Ownership in Fee: Public ☐ Private ☒

4. Principal Contractor: E.S.A. SERVICES Tel. (732) 899-1061
Address 3233 Chicago Ave PT. Pleasant, N.J.
License No. OR, If new home, Builder Reg. No. UMP 101264 Exp. Date 9-18-99
Federal Employee No. 223328747 FAX: ()

5. Architect or Engineer: Tel. ()
Address

6. Responsible Person in Charge of Work: Ed Aldridge
Tel. (732) 899-1061 FAX ()

V. FEE SUMMARY (for office use only)

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

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	10 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)

1-290 GAL UST Removal

SECTION II. PROPOSED WORK

	Est. Cost	OPTIONAL (for office use only)							
		Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☒ Minor Work		AS	9/24/98						
2. ☐ New Building									
3. ☐ Addition									
4. ☐ Alteration									
5. ☒ Fire Protection					9-22-98	Ken	9/24/98		MAN
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☒ Demolition									
TOTAL COSTS	<u>700.00</u>								

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 |

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

- ☐ Hotels (R-1)
- ☐ Multi-Family (R-2)
- ☐ Two-Family (R-3) BOCA
- ☐ Two-Family (R-4) CABO
- ☒ One-Family (R-3) BOCA
- ☐ 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

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(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 Ed Aldridge T/A E.S.A. Services

Address 3233 Chicopee Ave.

Pt. Pleasant, N.J. 08742

Telephone (732) 899-1061

Signature Ed Aldridge

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition

Name of Code & Edition

Building _____
 Electrical _____
 Plumbing _____
 Fire Protection _____
 Mechanical _____

Energy _____
 Barrier Free _____
 Flood Hazard _____
 As Built Elevation Cert. _____
 Other _____

Other _____

X. CERTIFICATES ISSUED (office use only)

DATE ISSUED

DATE EXPIRED

DATE REISSUED

DATE EXPIRED

☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Approval	No. _____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/23/98
Control 0
Permit # 98-3300

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 382.31 Lot 21 Qual

Work Site Location 231 ESSEX PL.
TANK REMOVAL

Owner in Fee DANBENTINAM, JOHN

Address SMB

Telephone BRICK, NJ 08723-

Contractor E.S.A. TANK SERVICE

Address 3233 CHICOTTE AVE

Telephone ()

Lic. No. or Bldrs. Reg. No. PT. PLEASANT, NJ 90889-9101

Federal Emp. No. 22-3328747

Is hereby granted permission to perform the following work:

☐ BUILDING	☐ PLUMBING	☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL	☒ FIRE PROTECTION	☐ DEMOLITION
☐ ELEVATOR DEVICES	☐ ASBESTOS ABATEMENT	☐ OTHER <u> </u>

(Subchapter 8 only)

DESCRIPTION OF WORK:

TANK REMOVAL

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 \$ 600

09/23/98
Date

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	66
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Other	
Total	66
Check No.	1201
Cash	
Collected By	CS

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 09/21/98
Date Issued 9 15 198
Control # C22-21
Permit # 98-3300

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

Block 382.31 Lot 21 Qual

Work Site Location 231 ESSEX PL

TANK REMOVAL

Owner in Fee DANEEENNAAM, JOHN

Address SAME

BRICK, NJ 08723-

Tele. () Fax ()

Contractor E.S.A. TANK SERVICE

Address 3233 CHICOPEE AVE

PT. PLEASANT, NJ 90889-9101

Tele. ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-3328747

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed U

Constr Class Present Proposed

Heating Systems [X] New [] Existing [] HVAC

Type: [X] Gas [] Oil [] Elect [] Solar

[] Other

Location:

Total Est Cost of Fire Prot Work \$ 600

Fire Alarm System

New [] Existing []

Location of Panel:

Fire Suppression/Standpipe Sys

New [] Existing []

Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Plumb [] Elevator

[] Fire Plans Approved

Date: 8-22-98

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: 8-24-98

Approved By: [Signature]

INSPECTIONS

Type Failure Failure Approval Initial

Alarm Sys

Suppr Test

Standpipe

Fire Pump

PreEng Sys

Mechanical

Smoke Ctl

TCO

Final

Other

Dates (Month/Day)

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:

Water Supply Source

Method of Alarm/Suppr Sys Superv

Storage Tanks

Type: [] Flammable Liquid [] Combust Liquid

[] LPG [] LNG Capacity 0 Fuel

Alarm Systems [] 110v Interconnected NUMBER

[] System

Alarm Devices (smoke, heat, pulls, water/flow) 0

Supervisory Devices (tamper, low/high air) 0

Signalling Devices (horn/strobes, bells) 0

Other Devices 0

TOTAL 0

Suppression Systems

Fire Pump 0 GPM Type 0

Dry Pipe/Alarm Valves 0

Pre-action Valves 0

Sprinkler Heads (Dry and Wet) 0

Standpipes 0

Pre-Engineered Systems

Wet Chemical 0

Dry Chemical 0

CO2 Suppression 0

Foam Suppression 0

Halon Suppression 0

Other 0

Kitchen Hood Exhaust System 0

Smoke Control System 0

Gas [] or Oil [] Fired Appliances 0

Other TANK REMOVAL 66

Other 0

Administrative Surcharge \$ 0

Paid [] Check # Minimum Fee \$ 0

Collected by: TOTAL FEE \$ 66

DCA Training Fee \$ 0

FEE (Office Use Only)

Call for Tank Inc.

TANK ABATEMENT OR
ASBESTOS ABATEMENT NOTIFICATION

Date: 9-21-98

Project: UST Removal
Street: 231 Essex Pl
Town: Brick, N.J. 08723
Contractor: E.S.A. Services License No. UMB 101264
Address: 3233 Chicopee Ave Pt. Pleasant, N.J. 08742
A.S.C.M.: _____ License No. _____

Address: _____

OSHA AIR MONITOR: _____

Address: _____

BUILDING OWNER: John Danversennan

Street: 231 Essex Pl.
Town: Brick NJ
Phone: _____ County: Ocean Zip: 08723

Engineer/Architect: _____

Street: _____
Town: _____
Phone: _____ County: _____ Zip: _____

Waste Hauler: Totus Waste Oil Services License No. NTD 980650201

Address: Coc Coc Rd. Toms River, N.J. 08753

Land Fill: C&R Waste Materials
Town: Brick, N.J.

Job Size: (Circle one) Minor Small Large

Quantity of Waste Generated:
(All applicable)

Cu. Yds _____
Linear Footage: _____
Square Footage: _____
1-290 gal steel
Tank

Proposed Start Date: ASAP Proposed Finish Date: Next Day

Cost of work: \$ 700.00

Construction permit number: _____ Date issued: _____

OS43A

1-19-89

CONTRACTOR: E.S. A. Services
ADDRESS: 3233 Chicago Ave
Pt. Howard, W.I.
PHONE: 732-8991061
LIC. #: Umb101264 EXP. DATE: 9-18-99
FEDERAL EMPL. # (or S.S. #): 223328747

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Fract. HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		

TOTAL NUMBERS

Pool Permit w/UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range / Receptacle	KW
KW Oven / Surface Unit	KW
KW Elec. Water Heater	KW
KW Elec. Dryer / Receptacle	KW
KW Dishwasher	KW
HP Garbage Disposal	HP
KW Central A/C Unit	KW
HP/KW Space Heater/Air Handler	HP/KW
KW Baseboard Heat	KW
HP Motors 1/+ HP	HP
KW Transformer/Generator	KW
AMP Service	AMP
AMP Subpanels	AMP
AMP Motor Control Center	AMP
AMP Elec. Sign/Outline Light	KW
Other	
Other	
Other	
Other	

Estimated Cost of Electrical Work: \$

Signature (print name):

Estimated Cost of Electrical Work: \$

Signature (print name):

Owner ☐ Contractor ☐

SUBCODE APPROVAL:

PLANS: Required ☐ Approved ☐

Approved by:

Date:

CONTRACTOR AFFIX SEAL:

TECHNICAL DATA (DESCRIPTION OF WORK)

1-2909AL: UST Removal

Heating Type: ☒ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☒ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source

Method of Valve Supervision

Local Alarm Supervision

Central Supervision

Proprietary Supervision

Flammable Liquid Storage Tanks Capacity: 890 Fuel: oil

Combustible Liquid Storage Tanks Capacity: Fuel:

L.G.P. Storage Tanks Capacity: Fuel:

DESCRIPTION NUMBER

Wet Sprinkler Heads

Dry Sprinkler Heads

Total

Smoke Detectors

Heat Detectors

Total

Stand Pipes

Kitchen Hood Exhaust Systems

Pre-Engineered Systems

Co2 Suppression

Halon Suppression

Foam Suppression

Dry Chemical

Wet Chemical

Gas or Oil Fired Appliance

Other

Other UST Removal

Estimated Cost of Fire Protection Work: \$ 700.00

Signature: J.P. Aldridge

Site Location: 231 Essex Pl Date Rec'd: _____
Block: 382131 Lot: 21 Date Issued: _____
Owner in Fee: John Davenport Control #: _____
Address: 231 Essex Pl Permit #: _____
Brick
State: NJ Zip: 08723 Phone: () _____
SS #: _____ Provide only if Applicant is owner

PLUMBING SUBCODE		BUILDING SUBCODE	
CONTRACTOR:		CONTRACTOR:	
ADDRESS:		ADDRESS:	
PHONE:		PHONE:	
LIC. #:		LIC. #:	
LIC. EXPIRATION DATE:		LIC. EXPIRATION DATE:	
FEDERAL EMP. # (or S.S. #):		FEDERAL EMP. # (or S.S. #):	
TECHNICAL SITE DATA (LIST ALL FIXTURES)		TECHNICAL SITE DATA	
NO.	FIXTURE/EQUIPMENT	DESCRIPTION OF WORK:	
	Water Closet		
	Urinal / Bidet		
	Bath Tub		
	Lavatory		
	Shower		
	Floor Drain		
	Sink		
	Dishwasher		
	Drinking Fountain		
	Washing Machine		
	Hose Bibb		
	Gas Piping		
	Fuel Oil Piping		
	Water Heater		
	Steam Boiler		
	Hot Water Boiler		
	Sewer Pump		
	Interceptor / Separator		
	Backflow Preventer		
	Greasetrap		
	Water Cooled AC or Refrig. Unit		
	Sewer Connection		
	Septic (Disposal System) Closure		
	Water Service Connection		
	Gas Service Connection		
	Active Solar System		
	Vent Through Roof		
	Other		
Estimated Cost of Plumbing Work: \$		New Building Area / All Floors:	
Signature:		Volume of Structure:	
		Total Land Disturbed:	
		Signature:	

Owner ☐	Contractor ☐
SUBCODE APPROVAL:	
Estimated Cost of Building Work:	
PLANS:	Required ☐ Approved ☐
Approved by:	Alteration (1) \$
Date:	Alteration (2) \$
TOTAL (1+2) \$	
SUBCODE APPROVAL:	