BLOCK 382.38 LOT 15 QUALIFICATION CODE ______ ADDRESS (SITE) 170 Courtshire PERMIT NO. 05-0817

CONSTRUCTION PERMIT APPLICATION

C05-133422

3575

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

I. IDENTIFICATION

1. Proposed Work Site at: 170 COURTSHIRE DR.
2. Name of Owner in Fee: HEINZ + GISELA duVIGNEAU [redacted]
   Address 170 COURTSHIRE DR (street) BRICK (municipality) NJ. 08723 (zip code)
3. Ownership in fee: Public ______ Private ✓
4. Principal Contractor STIRLING CONTRACTING INC Tel. (732) 604-9555
   Address 170 COURTSHIRE DR. BRICK NJ 08723
   License No. OR, If new home, Builder Reg. No. 010732 Exp. Date 1-31-06
   Federal Employee No. 22-260-4648 FAX: ( )
5. Architect or Engineer ______ Tel. ( )
   Address ______ Contact ______
6. Responsible Person in Charge once Work has Begun HEINZ
   Tel. (732) 604-9555 FAX: ( )

Elec.

V. FEE SUMMARY (for office use only)

		$	Update	Update
1.	Building	50		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$ 7		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	State Permit Fee Surcharge			
10.	Subtotal	$		
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 50		

VI. BUILDING/SITE CHARACTERISTICS

			(office use only)
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		

OPTIONAL (for office use only)

II. PROPOSED WORK	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work		MR	3/17/05						
2. ☐ New Building									
3. ☐ Addition									
4. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☑ Electrical SER. CHANGE					3/21/05	[illegible]			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. 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:

LDS BR 10426087

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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

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 STIRLING CONSTRUCTION INC
Address 170 COUNTRY SHIRE DR. BRICK NJ. 08723

Telephone (732) 604-9515 HEINZ T. CHUVIGNEAU GM
Signature ______________________

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			X	X	X	X	X	X	
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Department of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Department of Environmental Protection	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☐									
☐									

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

Name of Code & Edition		Name of Code & Edition			
Building	_____	Energy	_____	Other	_____
Electrical	_____	Barrier Free	_____		_____
Plumbing	_____	Flood Hazard	_____		_____
Fire Protection	_____	As Built Elevation Cert.	_____		_____
Mechanical	_____	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. _____	_____	_____	_____	_____

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

□ Zoning Application deemed complete Initialed: _____ Date: _____

□ Zoning Application approved Initialed: _____ Date: _____

□ Zoning permit updates:

_____

_____

_____

CONSTRUCTION PERMIT

Date Issued 03/23/2005
Control # C-05-133422
Permit # 05-0817

IDENTIFICATION Block: 382.38 Lot: 15 Qualifier
Work Site Location: 170 COURTSHIRE DRIVE Brick Township, NJ

Owner in Fee: DUVIGNEAU, HEINZ & GISELA
Address: 170 COURTSHIRE DR BRICK NJ 08723
Telephone:

Contractor: STIRLING CONSTRUCTION INC
Address: 170 COURTSHIRE DRIVE BRICK NJ 08723
Telephone: (732) 604-9515
Lic. No. or Bldrs. Reg. No. 10732
Federal Employee. No. 22-2664648

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
SERVICE

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $1,200

Construction Official

03/23/2005
Date

U.C.C. F170
equiv (rev 8/03)

INSPECTOR COPY

PAYMENTS (Office Use Only)

Building	$0
Electrical	$50
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$2
CO Fee	
Other	$0
Total	$52
Check No.	3515
Cash	$0
Credit	$0
Collected By	Ann Marie Hanlon

HEINZ BID REQUESTS NEXT WEEK

NEW JERSEY UNIFORM CONSTRUCTION CODE

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 3/23/05
Permit # 05-0817

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

Block 282.38 Lot 45 Qualification Code

Work Site Location 170 COURTSHIRE Dr. BRICK NJ.

Owner in Fee HEINZ + GISELA du. VIGNEAU
Address 170 COURTSHIRE Dr.
BRICK NJ. 08723
Te[redacted]
Contractor Rodger A. LeBedz
Address 228 NEWPORT Ave.
LAKEWOOD, NJ. 08701
Tel (732) 267-5730 FAX ( )
Contractor License No. 5549
Federal Emp. No. [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present ________ Proposed ________
[ ] Pole/Pad # ________ [ ] Temporary [ ] Other ________
Building Occupied as S. Fam. Utility Co. ________
Est. Cost of Elec. Work $ 1200.00

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.

[signature]
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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/with UW 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	
1	200	AMP Service Change	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $ 50
Minimum Fee $ 2
State Permit Surcharge Fee $
TOTAL FEE $ 52

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[X] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: 3 21 05
Approved by: [initials]

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Serv. OK 4/22/05				
Final 3-25-05	4-13-05	5-5-05		
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 5 5 05
Approved by: [initials]

U.C.C. F120 (rev. 07/03)

over

3-28-05

2 GROUNDRODS 6' APART, UN BROKEN WIRE

4-13-05

HOUSE LOCKED, OUT SIDE,
SINK GROUND RODS below GRADE
COVER GROUND WIRE below GRADE

4/22/05 OK EXCEPT :

(1) DRIVE IN GROUND RODS
(2) SECURE CONDUCTOR TO GROUND RODS

HEINZ — BID REQUESTS NEXT WEEK

NEW JERSEY UNIFORM CONSTRUCTION CODE

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 3/23/05
Permit # 05-0817

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

Block ~~[illegible]~~ 282.38 Lot ~~[illegible]~~ 45 Qualification Code ______

Work Site Location 170 ~~FB~~ COURTSHIRE DR. BRICK NJ.

Owner in Fee HEINZ + GISELA du VIGNEAU

Address 170 COURT SHIRE DR.

[redacted]

Contractor Rodger A. LeBedz

Address 222 Newport Ave.
Lakewood, NJ. 08701

Tel (732) 267-5733 FAX (______) ______

Contractor License # 5524

Federal Emp. No [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present ______ Proposed ______

[ ] Pole/Pad # ______ [ ] Temporary [ ] Other ______

Building Occupied as 1 Fam Utility Co. ______

Est. Cost of Elec. Work $ 1200.00

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.

[signature]

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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/with UW 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	
1	200	AMP Service Change	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge	$ 50
Minimum Fee	$ 2
State Permit Surcharge Fee	$
TOTAL FEE	$ 52

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

[X] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved

Date: 3/21/05
Approved by: [initials]

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Serv. — 4/22/05				
Final	3-25-05	4-13-05	5-5-05	[initials]
Barrier-Free				

Temp. Cut-in-Card Date Issued ______

Final Cut-in-Card Date Issued ______

Annual Pool Inspection ______

Date of Grounding and Bonding Certification ______

SUBCODE APPROVAL

[ ] CO [ ] CCO [X] CA

Date: 5 5 05

Approved by: [initials]

U.C.C. F120 (rev. 07/03)

over

3-25-05

2 GROUNDRODS 6' APART, UNBROKEN WIRE

4-13-05

HOUSE LOCKED, OUT SIDE,
SINK GROUND RODS below GRADE
COVER GROUND WIRE below GRADE

4/22/05 OK EXCEPT :

(1) DRIVE 1M GROUND RODS
(2) SECURE CONDUCTOR ~~AT~~ TO GROUND RODS