

BLOCK 678 LOT 6 QUALIFICATION CODE _____ADDRESS (SITE) 745 Pine DrivePERMIT NO. 05-3084

CONSTRUCTION PERMIT APPLICATION

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

C05-136724

I. IDENTIFICATION

1. Proposed Work Site at: 745 PINE DRIVE BRICK NJ 08723

2. Name of Owner in Fee: JOSEPH BERRY Tel. [REDACTED]
Address SAME street municipality zip code

3. Ownership in Fee: Public _____ Private X

4. Principal Contractor: POINT BAY FUEL, INC. Tel. (732) 349-5059
Address 71 IRONS STREET TOMS RIVER NJ 08753

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Employee No. 22-1817388 FAX: (732) 349-1788

5. Architect or Engineer _____ Tel. (____) _____
Address _____

6. Responsible Person in Charge of Work WILLIAM KENNEDY JR.
Tel. (732) 349-5059 FAX (732) 349-1788

Install 275 Basement oil tank

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>40</u>		
2. Electrical			
3. Plumbing	\$ <u>40</u>		
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$ _____		
7. Less 20% for State Plan Review			
8. Subtotal	\$ <u>8</u>		
9. DCA Training Fee			
10. Subtotal			
11. Cert. of Occupancy			
12. Other	\$ <u>80</u>		
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 _____ 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 big
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

700.00

000.00

1700.00

OPTIONAL (for office use only)

Plan Revised	Date Rec'd	Rejection Date	Approval Date	Re- viewer	Resubmission Dates	Re- viewer
	7/11/05		7-22-05	PA		
			7/14/05	CE		

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

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:

LDS BR 10326075

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

Address

Telephone

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									
☐ 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)

	No.	DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	_____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	_____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	_____	_____	_____	_____	_____
☐ Certificate of Compliance	_____	_____	_____	_____	_____
☐ Certificate of Occupancy	_____	_____	_____	_____	_____
☐ Certificate of Approval	_____	_____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	_____	_____	_____	_____	_____



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

08/03/2005
C-05-136724
05-3084

IDENTIFICATION Block: 678 Lot: 6
Work Site Location: 745 PINE DR. Brick Township, NJ
Owner In Fee
Address
Telephone:

Contractor
Address
Telephone:
Lic. No. or Bids. Reg. No.
Federal Employee. No.

Qualifier
POINT BAY FUEL INC
71 IRONS ST. TOMS RIVER NJ 08753-
BERRY, JOSEPH L. & LORETTA A.
745 PINE DR. BRICK NJ 08723
732/349-5059
22-1817388

I am hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

TANK INSTALLATION INSTALL 275 GALLON OIL TANK IN BASEMENT

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 \$1,700

Construction Official _____ Date 08/03/2005

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

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.
If you do not understand any of this information, please ask.

PAYMENTS (Office Use Only)

Building	\$40
Electrical	\$0
Plumbing	\$40
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$2
CO Fee	
Other	\$0
Total	\$82
Check No.	225853
Cash	\$0
Credit	\$0
Collected By	Ellen Privett



BUILDING SUBCODE TECHNICAL SECTION



Date Received 07/13/2005
Control # C-05-136724
Date Issued
Permit # 15 3084

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

Block 678 Lot 6 Qualification Code

Work Site Location: 745 PINE DR. Brick Township, NJ

Owner in Fee: BERRY, JOSEPH L. & LORETTA A.

Address 745 PINE DR. BRICK NJ

Tel.

Contractor: POINT BAY FUEL INC

Address 71 IRONS ST TOMS RIVER NJ

Tel. 732/349-5059 Fax.

Contractor License No. or, if new home, Bldrs Reg. No.

Federal Employee No.

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of the record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TANK INSTALLATION, INSTALL 275 GALLON OIL TANK IN BASEMENT

TYPE OF WORK

- ☐ New Building
☐ Addition
☒ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence Height (exceeds 6')
☐ Sign Sq. Ft.
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz Abatement NJAC 5:17
☐ Other
☐ Demolition

FEE (Office Use Only)

\$0
\$0
\$17
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0

Administrative Surcharge \$0
Minimum Fee \$40
State Permit Surcharge Fee \$1
TOTAL FEE \$41

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
☒ No Plan Required 7-22-05 KJ
☐ All
☐ Footing
☐ Foundation
☐ Frame
☐ Other

Joint Plan Review Required
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ O
Date: 8-15-05
Approved by: [Signature]

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Footings				
Footings Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes-Base Layer				
Finishes-Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed R-5 Est. Cost of Bldg. Work:

Constr. Class Present Proposed

Number of Stories

Height of Structure Ft.

Area - Largest Floor Sq. Ft.

New Bldg. Area / All Floors Sq. Ft.

Volume of New Structure Cu. Ft.

Total Land Area Disturbed Sq. Ft.

1. New Bldg. \$0
2. Rehabilitation \$700
3. Total (1+2) \$700



PLUMBING SUBCODE TECHNICAL SECTION



Date Received 07/13/2005
Control # C-05-136724
Date Issued 12/31/1899
Permit # 05-3084

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

Block 678 Lot 6 Qualification Code

Work Site Location: 745 PINE DR. Brick Township, NJ

Owner in Fee: BERRY, JOSEPH L. & LORETTA A.

Address 745 PINE DR BRICK NJ

Tel.

Contractor: POINT BAY FUEL INC

Address 71 IRONS ST TOMS RIVER NJ

Tel. 732/349-5059 Fax.

Contractor License No.

Federal Employee No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5

Building Sewer Size 0 ☐ Public Sewer ☐ Private Septic

Water Service Size 0 ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work \$1,000

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)		
PLAN REVIEW		Type:	Failure	Failure	Approval	Initial
☒ No Plan Required		Slab				
☐ Joint Plan Review Required		Rough				
☐ Building	☐ Electrical	Water				
☐ Fire	☐ Elevator	Sewer				
☐ Plumbing Plans Approved		Fixtures				
Date: 7/14/05		Gas Equipment				
Approved by: [Signature]		Gas Piping				
SUBCODE APPROVAL		Solar				
☐ CO	☐ CCO	TCO				
Date: 8-15-05		oil line			8/15-05	[Signature]
Approved by: [Signature]						

D. TECHNICAL SITE DATA (List of all fixtures)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	\$0
0	Urinal/Bidet	\$0
0	Bath Tub	\$0
0	Lavatory	\$0
0	Shower	\$0
0	Floor Drain	\$0
0	Sink	\$0
0	Dishwasher	\$0
0	Drinking Fountain	\$0
0	Washing Machine	\$0
0	Hose Bibb	\$0
0	Water Heater	\$0
1	Fuel Oil Piping	\$10
0	Gas Piping	\$0
0	LP Gas Tank	\$0
0	Steam Boiler	\$0
0	Hot Water Boiler	\$0
0	Sewer Pump	\$0
0	Interceptor/Separator	\$0
0	Backflow Preventor	\$0
0	Greasetrap	\$0
0	Sewer Connector	\$0
0	Water Service Connection	\$0
0	Stacks	\$0
0	Other	\$0
0	Other	\$0

Administrative Surcharge \$0
Minimum Fee \$40
State Permit Surcharge Fee \$1
TOTAL FEE \$41

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of the 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 Plumbing Contractor ☐ Exempt Applicant

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

Site Location: 7454 PINE DRIVE BRICK NJ 08723
Block: 638 Lot: 6
Owner's Name: JOSEPH BERRY
Owner's Mailing Address: 745 PINE DRIVE
BRICK NJ 08723
Phone: [REDACTED]

BUILDING

Contractor: POINT RAY FUEL, INC.
Address: 71 IRONS STREET
TOMS RIVER NJ 08753
Phone#: 732-349-5059
Lis.# _____
Federal Emp # or SSN 22-1817388

ELECTRICAL

Contractor: _____
Address: _____
Phone#: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data
Description of Work:

INSTALL 275 BASEMENT OIL TANK

Item Technical Data Quantity

Lighting Fixtures _____
Receptacles _____
Switches _____
Detectors _____
Light Poles _____
Motors w/ Fract. HP _____
Emergency & Exit Lights _____
Communication Points _____
Alarm Devices/FAC Panel _____

Total _____

Type of Work

____ New Building
____ Addition
____ Alteration
____ Roofing
____ Asbestos Abatement
____ Siding
____ Fence
____ Pool
____ Demolition
____ Sign _____ sq ft

Pool (Receptacles, Switches, Lights, Motor 1HP) _____

Spa/Hot Tub/Storable Pool _____ K'
Electric Range _____ K'
Oven/Surface Unit _____ K'
Electric Water Heater _____ K'
Electric Dryer _____ K'
Dishwasher _____ K'
Garbage Disposal _____ K'
A/C Unit -Central Air _____ K'
Space Heater/Air Handler _____ K'
Baseboard Heating _____ K'
Motors 1+ HP _____ K'
Transformer/Generator _____ K'
Light Stander _____ AN
Service _____ AN
Subpanel _____ AN
Motor Control Center _____ AN
Sign/Outline Light _____ K'
Furnace _____
Steam Boiler _____
Other: _____

Building Characteristics

Use Group Present: _____ Proposed: _____
No of Stories: _____
Height of Structure: _____
Area of the largest floor: _____
Area of New Structure: _____
Volume of New Structure: _____
Total Land Disturbed: _____

Cost of Alteration: \$ _____
Cost of New Building: \$ _____

Total Cost of New Building Work: \$ 700,000

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: William Kennedy Jr

Estimated Cost of Electrical Work: _____

I hereby certify that I am the agent/owner of record and authorized to make this application and perform the work listed on this application.

BAY FUEL, INC.
ONS STREET
RIVER NJ 08753
49-5059
22-1817388

Contractor: _____
Address: _____
Phone #: _____
Lic #: _____
Federal Emp # or SSN _____

Technical Data

Quantity

(lower head)

1

Technical Data

Description of Work:

Heating Type: Gas Oil Electric Solar
Heating System is New Existing
Location of Furnace/Boiler: _____
Water Supply Source _____
Method of Valve Supervision _____
Local Alarm Supervision _____
Central Supervision: _____
Proprietary Supervision: _____

Flammable Storage Tanks capacity fuel
Combustible Storage Tanks capacity fuel
LPG Storage Tanks capacity fuel

Item Quantity

Wet Sprinkler Heads

Dry Sprinkler Heads

Total

Smoke Detectors

Heat Detectors

Total

(separate Drain)

Stand Pipes

Kitchen Hood Exhaust System

Pre-Engineered Systems:

CO2 Suppression

Halon Suppression

Foam Suppression

Dry Chemical

Wet Chemical

Gas/Oil Fired Appliances:

Gas Stove

Gas Dryer

Furnace (Gas or Oil)

Gas Fireplace

Gas Logs

Total Appliances

Wood Burning Stove

Wood Fireplace

Other:

Estimated Cost of Fire Work

BASEMENT OIL TANK

Removal Work \$1000.00

I am the agent/owner of record and am
application and perform the work

William Kennedy Jr.
WILLIAM KENNEDY JR.

SEAL

I hereby certify that I am the agent/owner of record and am