



CONSTRUCTION PERMIT APPLICATION

Page 1
OCT 8
LIVED

I. IDENTIFICATION

Proposed Work at: 922 Rosewood Ave.
 Owner Name: SAVIANESES/GABLIARDI
 Address: SAME
 Principal Contractor: _____
 Address: _____
 Lic. No. or Builder Reg. No.: _____ Federal Emp. No.: _____
 Architect or Engineer: _____ Tel. (____) _____
 Address: _____
 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
Complete only II.B., III and IV.A. and Page 2	2. ☐ Plumbing		3. ☐ Refrigeration Systems
3. ☐ New Building	3. ☐ Electrical		4. ☐ Pressure Vessels
4. ☐ Addition	4. ☐ Fire Protection		5. ☐ Hazardous Uses/Places of Assembly
5. ☐ Alteration	5. ☐ Other _____		6. ☐ Cross-connections/Backflow Preventors
6. ☐ Repair, Replacement	6. ☐ Other _____		7. ☐ Sprinklers
7. ☐ Demolition	TOTAL COST \$ 500		8. ☐ Smoke Control Systems in Open Wells
8. ☒ Other: <u>SKED</u>	C. DO YOU WANT:		
	1. ☐ Partial Releases		
	2. ☐ Prototype 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)
	16. ☐ Institutional Detention Center (I-1)
	17. ☐ Hospitals, Infirmeries (I-2)
	18. ☐ Group Homes (I-3)
	19. ☐ Mercantile (M)
	20. ☐ Moderate-Hazard Warehouse (S-1)
	21. ☐ Low-Hazard Warehouse (S-2)
	22. ☐ Temporary, Misc. (U)
	23. ☐ Other _____
	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 Secondary Type	10. ☐ Public or Private Company	12. ☐ Public or Private Company	14. No. of Stories _____ Ft.
2. ☐ Public (State, County or Local Govt.)	3. ☐ Gas	11. ☐ Private (Septic Tank, Etc.)	13. ☐ Private (Well, Etc.)	15. Height of Structure _____ Ft.
	4. ☐ Oil			16. Area—Largest Floor _____ Sq. Ft.
	5. ☐ Electric			17. Bldg. Area—All Fls. _____ Sq. Ft.
	6. ☐ Solid (Wood, Coal, Etc.)			18. Volume of Structure _____ Cu. Ft.
	7. ☐ Propane			19. Total Land Area Disturbed _____ Sq. Ft.
	8. ☐ Solar			
	9. ☐ Other _____			

LDS BR 10511085

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

[Signature]

DATE

10/8/86

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

☐ Other

U.C.C. Form F-100* (8/83)

When changing contractors, notify this office

Federal Emp. No.,

AGENT SIGNATURE _____

D. COMMENTS

Fire Grading:

Maximum Live Load:

Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☒ All	11-8-82	W/H
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☐ Frame				
☐ Architectural				
☐ Insulation				
☐ Finishes				
☐ Energy				