



Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

***This File Contains Personal Identifiable
Information of Private Citizen(s).***

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- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers,
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson", is written over a horizontal line.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020



CONSTRUCTION PERMIT APPLICATION

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

014# 347610410

IDENTIFICATION

1. Proposed Work Site at: 369 Georgia Drive Brick 08729

2. Name of the person: Agliaro, JR

Te [REDACTED] e-mail [REDACTED]

Address 47 Georgia Drive Wick 0720

3. Ownership in Fee: ☒ Public ☐ Private ☐ Municipality ☐ Zip code

4. Principal Contractor: DeSanto Electric LLC Tel. 908-910-8468
Address: 375 BELLEVILLE BLVD

Address: 375 BRICK BLVD Tel: 758-110-8666
BRICK 0873 e-mail: desanto@electric

License No. OR, if new home, Builder Reg. No. 17368 Exp. Date 3/202

Home Improvement Contractor Registration No. or Exemption Reason: 1-72500 Exp. Date: 3/2021

Federal Emp. ID No. 460-755-299 FAX: 732-475-7120

Architect or Engineer: _____ FAX: 708-115-1120
Address: _____ Contact: _____

Address: _____ Contact: _____
Tel.: _____ e-mail: _____
FAX: _____

Responsible Person in Charge once Work has Begun: Andrew Vesely
Tel: 907 422 8188

TEL: 908 760 8668 FAX: 732 975 7120

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical	\$	150	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal			
9. State Permit Surcharge Fee	\$	3	
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$	153	

VI. BUILDING/SITE CHARACTERISTICS

GENERAL CHARACTERISTICS		(Office Use Only)
1. Number of Stories	_____	_____
2. Height of Structure	_____	_____
3. Area - Largest Floor	_____ sq. ft.	_____
4. New Building Area	_____ sq. ft.	_____
5. Volume of New Structure	_____ cu. ft.	_____
6. Max. Live Load	_____	_____
7. Max. Occupancy Load	_____	_____
8. If Industrialized Building, State Approved	_____ HUD	_____
9. Total Land Area Disturbed	_____ sq. ft.	_____
10. Flood Hazard Zone	_____	_____
11. Base Flood Elevation	_____ ft.	_____
12. Wetlands	yes _____ no _____	_____

IIa. PROPOSED WORK

☐ Minor Work	☐ New Building	☐ Addition	☐ Demolition
☐ Repair	☐ Alteration	☐ Renovation	☐ Reconstruction
☐ Asbestos Abat. Subch. 8	☐ Lead/Hazard Abatement	☐ Radon Remediation	☐ Annual Permit

11b. SUBCODES

(Check all that apply)

☐ Building

☒ Electrical

☐ Plumbing

☐ Fire Protection

☐ Elevator

TOTAL COST

FOR OFFICE USE ONLY (Optional)

[illegible]

III. PLAN REVIEW (optional)

DO YOU WANT:

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☒ Elevators/Escalators/Lifts/
Dumbwaters/Moving Walks
2. ☒ High-Pressure Boilers
(Pressure Vessels)
3. ☒ Refrigeration Systems
4. ☒ Cross-Connections/Backflow Preventers
5. ☒ Hazardous Uses/Places of Assembly
6. ☒ Sprinklers/Standpipes
7. ☒ Smoke Control Systems in Open Wells
8. ☒ Underground Storage Tanks
9. ☒ Swimming Pools, Spas and Hot Tubs
10. ☒ LP Gas Tanks
11. ☒ Fire Alarm
12. ☒ Fire Alarm

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____

2. Use Group, Proposed: _____

3. Change in Use Group, Indicate Present: _____

4. No. of dwelling units: Total Units Income-restricted _____

Gained, Sale	_____
Gained, Rental	_____
Lost, Sale	_____
Lost, Rental	_____

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: ☐

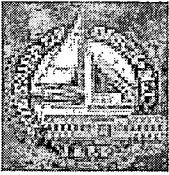
2. Use Group Proposed: ☐

3. Change in Use Group, Indicate Present:

C. MIXED USE - List secondary use(s)

D.	Construct	Classification	Present	Proposed

UIC: F100-1 (rev. 8/08)



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 12/15/2020
Control Number C-20-004040
Permit Number 20-2905
Permit Issue Date 12/07/2020
Certificate Number 20-2905

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 369 GEORGIA DR. Brick Township, NJ Block: 383.07 Lot: 45 Qual: _____
Owner in Fee: MAGLIARO, STEVEN JR
Owner Address: 369 GEORGIA DR BRICK NJ 08724
Telephone: _____
Contractor DeSanto Electric LLC
Address 375 BRICK BLVD Brick NJ 08723
Telephone: (908) 910-8668 Fax: (732) 262-1678 Federal Emp. Number: 460755299
License Number or Builders Registration Number: _____
Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private
Use Group: R-5 Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: SERVICE, SUBPANEL

Certificate Comments:

☐ Certificate of Occupancy

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☒ Certificate of Approval

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ Certificate of Continued Occupancy

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ Temporary Certificate of Compliance

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

☐ Certificate of Clearance - Lead Abatement 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ Certificate of Clearance - Asbestos Abatement

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ Certificate of Compliance

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ Temporary Certificate of Occupancy

The following conditions must be met no later than: or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

Daniel Newman Jr

Construction Official

Date Printed: 12/15/2020

U.C.C. F260 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____

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(f)1, ix:

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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. 5:23-2.15(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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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

Andrew DeSanto

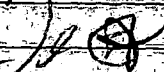
Address

375 BRICK BLVD
BRICK 08723

Telephone

908 910 8668

Signature



III. ☒ LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ☒ HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

DN# 347610410

Block 353.07 Lot 45 - Qualification Code _____
Work Site Location 269 Germantown - Qualification Code _____

Work Site Location 369 Georgia Drive Brickman Lot 45 - Qualification Code 1-800-272-1000

Owner in Fee: Steven Magliaro JR 08729

A [redacted] e-mail [redacted]
 street 5127 Georgia [redacted]

Contractor: De Santo Electric LLC municipality BRICK 1WFO872
Address 375 BRICK RD zip code 90891

Address 375 BRICK BLVD Tel. 908 910 8668 zip code 08733
BRICK NJ e-mail desantoelectrical@gmail.com

Contractor License No. 17368 Exp. Date 3/2021

Home Improvement Contractor Registration No. or Exemption Reason 7568 Exp. Date 3/2021
Federal Emp. ID No. 460-755-299

Federal Emp. ID No. 460-755-299 FAX: 732 475-7120

Use Group Present _____ Proposed _____
 [] Pole/Pad # _____ [] Temporary _____
 Building _____

[] Pole/Pad # _____ Proposed _____
Building Occupied as _____ [] Temporary [x] Other _____
Est. Cost of _____

Est. Cost of Elec. Work \$ 1700 Utility Co. JPL

JOB SUMMARY (Office Use)

PLAN REVIEW
[] No Plans Required

INSPECTIONS
Type: _____
Dates (Month/Day) _____

Type:		Failure		Approval		Initial	
Rough	Barrier	Failure	Failure	Approval	Approval	Initial	Initial

Date: _____ Approved by: _____

[] Electric Plans Approved

Date: _____

Barrier-Free _____

Trench _____

Temp. Serv _____

Date: _____ Approved by: _____

Temp. Serv. _____

Constr. Serv. _____

TCO _____

Joint Plan Review Required: _____

TCO _____
Other _____
Service _____

Date: _____
 Approved by: _____
 Service Final _____
 Barrier-Free _____

12/8/20 

Barrier-Free _____
Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

CO
Date: 12-9-2010
Approved by: WAW

Approved by: WV Date of Grounding and Bonding Certification _____

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.

Applicant sign/Contractor
sign and seal here:

Print name here: Andrew 1 1 1

☐ Licensed Elec. Contractor ☐ Certif'd Landscape Irrigation Contr ☐ Exempt Applicant

DESCRIPTION OF WORK: *450 Panel*
panel upgrade 100 AMP

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

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
AMP Service
AMP Subpanels
AMP Motor Control Center
KW Elec. Sign/Outline Light

FEE (Office Use Only)

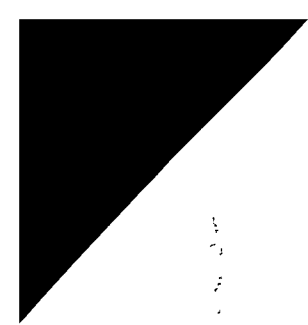
§ 10. The following shall be the duties of the board:

Administrative Surcharge \$

Minimum Fee \$

Slate Permit Surcharge Fee	\$
----------------------------	----

TOTAL PER \$

[illegible]

100

— 2 —

100



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 383.07 Lot 45 Qualification Code _____
Work Site Location 369 GEORGIA DR BRICK NJ 08723

Contractor STEVEN MARIARO
e-mail _____

Address 369 GEORGIA DR. BRICK NJ 08723
street municipality zip code

Contractor: Doug Electrical Contractor Tel. (201) 923-5303

Address 17 Poplar Street e-mail Liakcip@Verizon.net
Ridgefield Pk, NJ 07663

Contractor License No. 131713 Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. 22-3424142 FAX: (_____) _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 1,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[] Partial -Underslab Utilities Approved

Date: _____ Approved by: _____

[] Electric Plans Approved

Date: _____ Approved by: _____

Joint Plan Review Required:

[] Bldg. [] Plumb. [] Fire. [] Elev.

SUBCODE APPROVAL for PERMIT

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

[] CO [] CCO [] CA

Date: _____

Approved by: _____

INSPECTIONS

Type: _____ Dates (Month/Day)

Rough _____ Failure _____ Approval _____ Initial _____

Barrier-Free _____

Trench _____

Temp. Serv. _____

Constr. Serv. _____

TCO _____

Other _____

Service _____

Final _____ 12-8-20

Barrier-Free _____

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

Annual Pool Inspection _____

Date of Grounding and Bonding _____

Certification _____

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.

Applicant sign/Contractor Matthew Pickrel
sign and date _____

Print name here Matthew Pickrel

[X] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr'r [] Exempt-Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

UPGRADE ELECTRICAL SERVICE

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/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
<u>1</u>	KW Transformer/Generator
<u>150</u>	AMP Service
_____	AMP Subpanels
_____	AMP Motor Control Center
_____	KW Elec. Sign/Outline Light

FEE (Office Use Only)

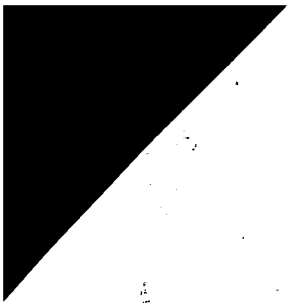
\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____



1. 2.

3.



CONSTRUCTION PERMIT

Date Issued 12-7-2020
Control # C-20-004040
Permit # 20-2405

IDENTIFICATION Block: 383.07 Lot: 45 Qualifier: _____
Work Site Location: 369 GEORGIA DR. Brick Township, NJ Contractor: DeSanto Electric LLC
Address: 375 BRICK BLVD Brick NJ 08723
Owner in Fee: MAGLIARO, STEVEN JR
369 GEORGIA DR BRICK NJ 08724 Telephone: (908) 910-8668
Telephone: _____ Lic. No. or Bldrs. Reg. No. 34E101736800
Federal Employee No. 460755299

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 SUBPANEL

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

David F. Nouman
Construction Official

11-30-2020
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building _____ \$0
Electrical _____ \$150
Plumbing _____ \$0
Fire Protection _____ \$0
Elevator Devices _____ \$0
Other _____ \$0.00
DCA Training Fee _____ \$3
CO Fee _____
Other _____ \$0
Total _____ \$153
Check No. 000056
Cash _____ \$0
Credit _____ \$0
Collected By M. FOSPA

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.