



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

4/23/97
967-97

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

Block 383.7 Lot 45
Work Site Location 369 GEORGIA DRIVE, BRICK, NJ 0723

Owner in Fee STEVEN MAGLIARO, SR.

Address 369 GEORGIA DRIVE
BRICK NJ 0723

Tele. [REDACTED]

Contractor HOME OWNER

Address _____

Tele. (____) _____

Lic. No. or Bldrs. Reg. No. _____

Federal Emp. No. _____ or Social Security No. _____

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.
X Steven Magliaro, Sr.
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

ENCLOSING AN EXISTING CAR-PORT.
NOT DISTURBING STRUCTURE OR
EXISTING ROOF. JUST ADDING EXTERIOR
WALL AND FRONT & REAR OVERHEAD DOORS.
SEE DWG. FOR DETAIL.

SEE NOTE ON DRAWING

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☒ No Plans Req.	<u>4/23/97</u>	<u>EM</u>	Type:	Failure Failure Approval Initial
☐ All			Footings	
☐ Footing			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			Insulation	
Joint Plan Review Required:			Finishes:	
☐ Elec. ☐ Plumb. ☐ Fire			Energy	
SUBCODE APPROVAL			Mechanical	
☐ CO ☐ CCO ☐ CA			TCO	
Date:			Other	<u>4-23-97</u>
Approved By:			Final	

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories 1
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.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ _____

TYPE OF WORK:

- ☐ New Building
☐ Addition
☐ Alteration
☐ Roofing
☐ Siding
☐ Fence _____ Height (6' or over)
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other ENCLOSING CAR-PORT
☐ Other _____
☐ Demolition

**(Office Use Only)
FEE**

\$ _____

Administrative Surcharge \$ _____

Paid ☐ Check # _____ Minimum Fee \$ _____

Collected by: _____ DCA TRAINING FEE \$ _____

TOTAL FEE \$ _____

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

John Magliaro, Jr.

Date

4/11/97

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey 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

Date

OFFICE DATE RECEIVED: _____

VII. 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									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☐									
☐									

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

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	
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. _____	_____	_____	_____



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

4/23/97

967-99

IDENTIFICATION Block 383.07 Lot 45
Work Site Location 369 Deoriga Dr Contractor Homenow
Address _____
Owner in Fee M. Magliaro S.
Address Same
Tele. (____) _____
Tele. (____) _____
Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____
Federal Emp. No. _____
or Social Security No. **0004**

Is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER
☐ ELECTRICAL ☐ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Enclosing Carport

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 \$ 1450

U.C.C. Form F-170C

CONSTRUCTION OFFICIAL

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

PAYMENTS (Office Use Only)			
Building	<u>35</u>	<u>707.00</u>	707.00
Plumbing	<u>LOT</u>		0.00
Electrical	<u>45</u>	<u>0.00</u>	0.00
Fire Protection	<u>BUILDING</u>	<u>0.00</u>	0.00
Other	<u>D.C.A.</u>	<u>0.00</u>	0.00
Other	<u>TOTAL</u>	<u>3.00</u>	3.00
DCA Training Fee	<u>0.00</u>	<u>0.00</u>	0.00
Cert. of Occ.	<u>0.00</u>	<u>0.00</u>	0.00
Other/23/97	<u>10.56</u>	<u>0.00</u>	10.56
Total	<u>56</u>	<u>0.00</u>	0.00
Check No.	<u>✓</u>		
Cash	<u>✓</u>		
Collected By:	<u>✓</u>		