

BLOCK 323 LOT 25.03 ADDRESS (SITE) _____ PERMIT NO. 2104-92

OCT 7 1992



CONSTRUCTION PERMIT APPLICATION

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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other <i>Task Review</i>			
6. Subtotal	\$	124-	
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee		1-	
10. Subtotal	\$		
11. Cert. of Occupancy		20-	
12. Other			
13. TOTAL	\$	145-	

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure	ft.
3. Area—Largest Floor	sq. ft.
4. Building Area—All Floors	sq. ft.
5. Volume of 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	sq. ft.
no	
11. Fire Grading	
12. Max. Live Load	
13. Max. Occupancy Load	

I. IDENTIFICATION

1. Proposed Work-site at: 237 Circle Dr.

2. Name of Owner in Fee: Richard A. + Marie Gant Tel. (908) 477-2622

Address 237 Circle Dr., Brick N.J. 08723

3. Ownership in Fee: Public _____ Private X

4. Principal Contractor: None Tel. (____) _____

Address _____

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Federal Emp. No. _____ Social Security No. _____

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

Address _____

6. Responsible Person Richard A. Gant Tel. (908) 477-2622

In Charge of Work

II. PROPOSED WORK

1. ☒ Minor Work (single trade) #1200

2. ☐ Small Job (\$5,000 and no prior approvals)

3. ☐ New Building

4. ☐ Addition

5. ☐ Alteration

6. ☒ Fire Protection

7. ☐ Plumbing

8. ☐ Electrical

9. ☐ Asbestos Abatement

10. ☐ Demolition

TOTAL COSTS 1200

oil to gas

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>WP</u>	<u>10/7/92</u>						
			<u>10/7/92</u>	<u>10-8-92</u>	<u>10/30/92</u>		<u>JE</u>
					<u>10/29/92</u>		<u>JE</u>

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 | 3. ☐ Pressure Vessels | 6. ☐ Hazardous Uses/Places of Assembly |
| 2. ☐ High Pressure Boilers | 4. ☐ Refrigeration Systems | 7. ☐ Sprinklers |
| | 5. ☐ Cross-Connections/Backflow Preventers | 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:

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 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: _____

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	
☐ 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.									
☐ Other									
☐									
☐									

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 EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____
☐ Temporary Certificate of Occupancy	No. _____	_____
☐ Continued Certificate of Occupancy	No. _____	_____
☐ Certificate of Occupancy	No. _____	_____
☐ Certificate of Approval	No. _____	_____



CONSTRUCTION PERMIT

Date Issued 10/8/92

Control #

Permit # 2104-92

IDENTIFICATION

Block 323Lot 2502Work Site Location 237 1/2 Block NContractor FrameOwner in Fee 175001

Address

Address

Tele. ()

Tele. ()

Lic. No. or Bldrs. Reg. No.

Exp. Date 2104

Federal Emp. No.

BLOCK

or Social Security No.

323 #

hereby granted permission to perform the following work:

☐ BUILDING ☒ PLUMBING ☐ OTHER
☐ ELECTRICAL ☒ FIRE PROTECTION

DESCRIPTION OF WORK:

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 \$ 1200

CONSTRUCTION OFFICIAL

C.C. Form F-170A

1 WHITE - OFFICE

2 CANARY - TAX ASSESSOR

3 PINK - JACKET

4 GOLD - APPLICANT

PAYMENTS (Office Use Only) 5 #Building 45 PLUMBINGPlumbing 45 FIREElectrical 79 ELECTRICALFire Protection 79 FIREOther TOTALOther FIREDCA Training Fee 10/07/92 NO 10/07/92Cert. of Occ. 10/07/92 NO 10/07/92Other 10/07/92 NO 10/07/92Total 10/07/92 NO 10/07/92Check No. 4315

Cash

Collected By: AK



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received 10/01/92
Date Issued _____
Control # 2104-92
Permit # _____

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

Block 323 Lot 25.03
Work Site Location 237 Circle Drive
Owner in Fee Richard A. and Marie Gant
Address 237 Circle Drive
Brick N.J. 08723
Tele. (908) 477-2622
Contractor Self
Address _____
Tele. () _____
Lic. No. _____
Federal Emp. No. _____ or Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-3 Proposed _____
Constr. Class. Present _____ Proposed _____
Heating Systems ☒ New ☐ Existing BEING REPLACED
Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar
☐ Other Combustible air
Location: 237 Circle Drive
Total Est. Cost of Fire Prot. Work \$ _____ [] Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
☐ No Plans Required
Joint Plan Review Required:
☐ Bldg. ☐ Plumb. ☐ Elec.
☒ Fire Plans Approved
Date: 10/7/92
Approved by: [Signature]
SUBCODE APPROVAL:
☐ CO ☐ CCO ☒ CA
Date: 10/30/92
Approved by: [Signature]

INSPECTIONS: _____
Type: _____
Suppression Test _____
Fire Alarm Test _____
Smoke Test _____
Mechanical _____
TCO _____
Other Tank Removal 10/4/92
Other _____
Other _____

Dates (Month/Day)
Failure Failure Approval Initial
10/4/92
10/30/92

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source CITY
Method of Valve Supervision _____
Local Alarm Supervision _____
Central Supervision _____
Proprietary Supervision _____

Flammable Liquid Storage Tanks () Capacity _____ Fuel _____
Combustible Liquid Storage Tanks () Capacity _____ Fuel _____
L.P.G. Storage Tanks () Capacity _____ Fuel _____
L.N.G. Storage Tanks () Capacity _____ Fuel _____

Wet Sprinkler Heads _____
Dry Sprinkler Heads _____
TOTAL _____
Smoke Detectors _____
Heat Detectors _____
TOTAL _____

Stand Pipes _____
Kitchen Hood Exhaust Systems _____

Pre-Engineered Systems
CO₂ Suppression _____
Halon Suppression _____
Foam Suppression _____
Dry Chemical _____
Wet Chemical _____

Gas or Oil Fired Appliance X
OTHER _____

FEE (Office Use Only)

46

33

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.

SIGNATURE

Administrative Surcharge \$ _____
Paid [] Check # _____ Minimum Fee \$ _____
Collected by _____ TOTAL FEE \$ _____

10/30/92 letters att to were
tank was taken.



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

10/8/92
2104-92

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

Block 323 Lot 25.03
Work Site Location 237 Circle Drive
Owner in Fee Richard A. and Marie Gant
Address 237 Circle Drive
Brick, N.J. 08723
Tele. (908) 477-2622
Contractor Self
Address _____
Tele. () _____
Lic. No. _____
Federal Emp. No. _____ or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present R.3 Proposed _____
Building Sewer Size _____
Water Service Size _____
Estimated Cost of Plumbing Work \$ 1200

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)			
		Type:	Failure	Approval	Initial
☐ No Plans Required	Slab				
Joint Plan Review Required:	Rough				
☐ Bldg. ☐ Elec. ☐ Fire	Water				
☐ Plumb. Plans Approved	Sewer				
Date: <u>10-8-92</u>	Fixtures				
Approved by: <u>galt</u>	Gas Equipment				
	Gas Final <u>PIR</u>			<u>10/15/92</u>	<u>galt</u>
	Solar				
SUBCODE APPROVAL:	TCO	<u>CA</u>	<u>10-23-92</u>		
☐ CO ☐ CCO ☐ CA					
Approved by: <u>10/22/92</u>					
Date: _____					

✓ **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-Contractor Seal

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
X	Gas Piping	15-
X	Fuel Oil Piping	5-
X	Water Heater	15-
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C	
	or Refrigeration Unit	
	Sewer Connection	
X	Water Service Connection	
	Gas Service Connection	
	Active Solar System	
	Other	10-
Administrative Surcharge		\$
Paid ☐ Check #		\$
Minimum Fee		\$
Collected by: TOTAL		\$ 45-

10-23-92 0 need watts 9-D

② run relief down

3 fly gas through case.

OK
OK
10/29/92

10/17/92

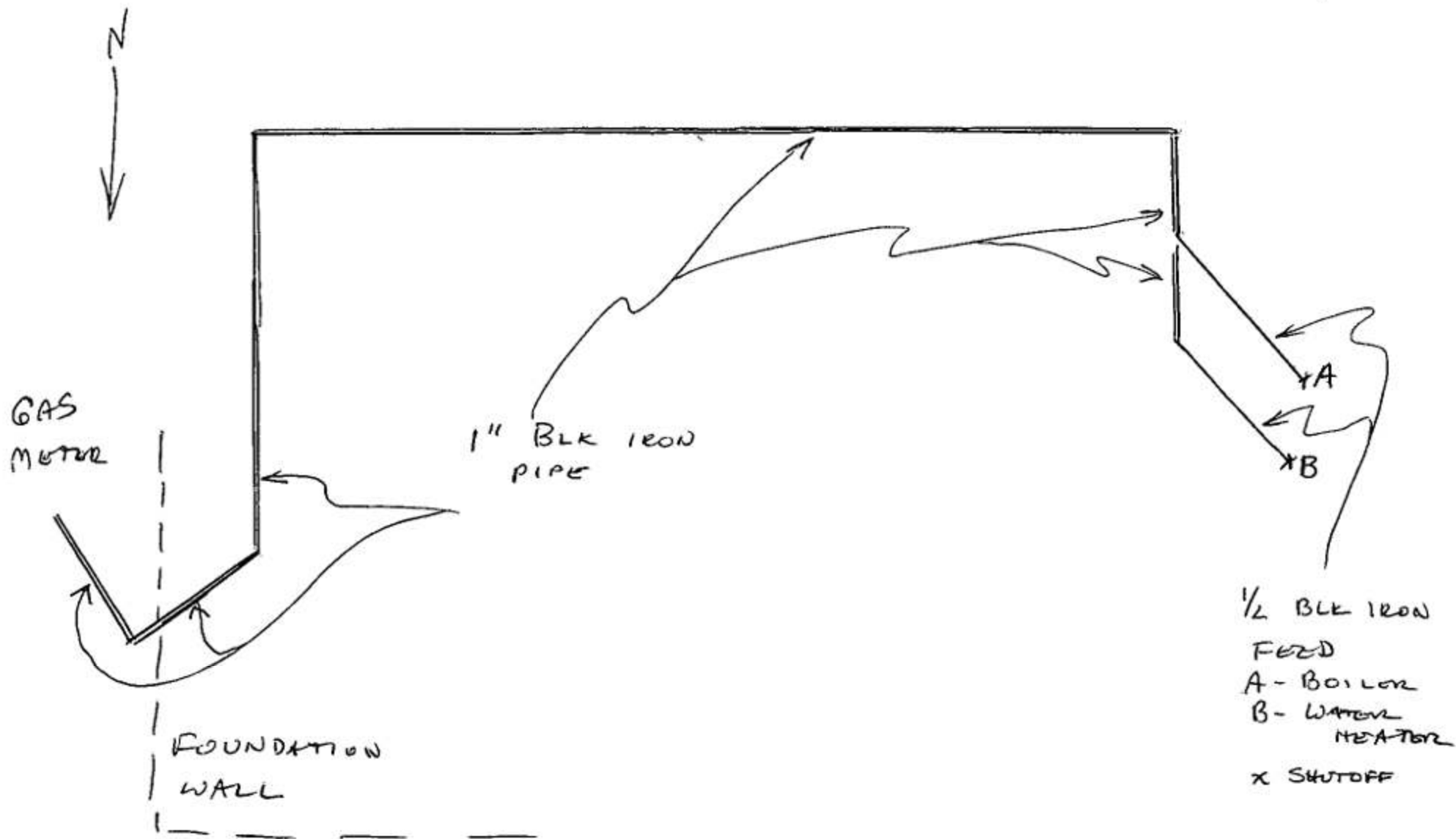
I, Richard A. Sant of
237 Cicce Drive, Brick,

M.J. gave my 275 gallon
fuel tank and fuel to
neighbor, David Chafer,

236 Cicce Drive, Brick,

M.J.

David C. Chafer
Oct. 17, 1992



GAS PIPING - DWELLING - 237 CIRCLE Dr
 RICHARD A. + MARIE GANT
 477-2622

Richard A. Gant
 10/7/92