

CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work Site at: 27710 Hooper Ave.
2. Name of Owner in Fee: Kennedy, Mable G. Tel. 913, 916-2800
Address 641 Shunpike Rd. Chatham, NY 11928
street municipality zip code
3. Ownership in fee: Public ☒ Private ☐
4. Principal Contractor: Fidelity Maint. Tel. 913, 916-2800
Address 641 Shunpike Rd. Chatham, NY
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Employee No. 22-305350 FAX: () _____
5. Architect or Engineer _____ Tel. () _____
Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun _____
Tel. () _____ FAX: () _____

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

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)

OPTIONAL (for office use only)[illegible]

A. RESIDENTIAL

1. State Specific Use: _____
2. Use Group: _____
3. Change in Use Group, Indicate Former: _____
4. No. of dwelling units:

Before Construction	_____
After Construction	_____
Net Gain or Loss	_____

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

- ☐ Partial Releases
- ☐ Prototype Processing

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
10. ☐ Swimming Pools, Spas and Hot Tubs

LDS BR 10425085

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 David Voight

Address 641 Shunpike Rd.

Chatham NJ 07928

Telephone (908) 419 6830

Signature AD. Voight

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
	Prelimn. Initial	Final Date	Prelimn. Initial	Final Date	Prelimn. Initial	Final Date	Prelimn. Initial	Final Date	
☐ Zoning Officer			X		X		X		
☐ Planning Board			X		X		X		
☐ Zoning Board			X		X		X		
☐ Sewer Authority			X		X		X		
☐ Water Authority			X		X		X		
☐ Police Department			X		X		X		
☐ Health Department			X		X		X		
☐ Soil Conservation			X		X		X		
☐ N.J. Department of Community Affairs			X		X		X		
☐ N.J. Department of Transportation			X		X		X		
☐ N.J. Department of Environmental Protection			X		X		X		
☐ Utility Dig No.			X		X		X		
☐									
☐									

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. _____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____

Constituent Contact Report

☐ Zoning Application deemed complete

☐ Zoning Application approved

☐ Zoning permit updates:

□ Zoning permit updates:



CONSTRUCTION PERMIT

Date Issued 05/27/2005
Control # C-05-135345
Permit # 05-1929

IDENTIFICATION Block: 670 Lot: 4 Qualifier _____
Work Site Location: 2770 HOOPER AVE. Brick Township, NJ Contractor KENNEDY MALL ASSOCIATES
Address 641 SHUNPIKE RD. CHATHAM NJ 07928
Owner in Fee KENNEDY MALL ASSOCIATES
Address 641 SHUNPIKE RD. CHATHAM NJ 07928 Telephone: _____
Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. _____

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:

ALTERATION FIXTURE SET UP - TABLES

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 \$600

Construction Official _____ Date 05/27/2005

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$40
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$41
Check No.	4031
Cash	\$0
Credit	\$0
Collected By	Ellen Privett

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.



Date Received 05/25/2005
Control # G-05-400270-015-1352-15
Date Issued 05-27-05
Permit # 05000000-11-16-09

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

Block	670	Lot	4	Qualification Code
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Work Site Location: 2770 HOOPER AVE-TENANT 2

Owner in Fee: **KENNEDY MALL ASSOC**

Address **641 SHUNPIKE RD CHATHAM NJ**

Tel. 973/966-2800

Contractor: FIDELITY MAINTENANCE

Address **641 SHUNPIKE RD CHATHAM NJ**

Tel. 973/966-2800 **Fax.**

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

Federal Employee No. 22-3053500

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☒ All	5-25-07	TR
☐ Footing		
☐ Foundation		
☐ Frame		
☐ Other		
Joint Plan Review Required		
☐ Elec.	☐ Plumb.	☐ Fire
		☐ Elevator
SUBCODE APPROVAL		
☐ CO	☐ CCO	☐ CA
Date:	5-27-05	
Approved by:	TR	

INSPECTIONS		Dates (Month/Day)		
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	_____	_____	_____	_____

04/2/05 [Signature]

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	B	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed		1. New Bldg. \$0
Number of Stories				2. Rehabilitation \$600
Height of Structure			Ft.	3. Total (1+2) \$600
Area - Largest Floor			Sq. Ft.	
New Bldg. Area / All Floors			Sq. Ft.	
Volume of New Structure			Cu. Ft.	
Total Land Area Disturbed			Sq. Ft.	

C. CERTIFICATION IN LIEU OF OATH

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
ALTERATION, fixture set up - tables

Wickert

COMM

COMMERCIAL

TYPE OF WORK		FEE (Office Use Only)
☐ New Building		\$0
☐ Addition		\$0
☒ Rehabilitation		\$14
☐ Roofing		\$0
☐ Siding		\$0
☐ Fence _____	Height (exceeds 6')	\$0
☐ Sign _____	Sq. Ft.	\$0
☐ Pool		\$0
☐ Asbestos Abatement Subchapter 8		\$0
☐ Lead Haz Abatement NJAC 5:17		\$0
☐ Other _____		\$0
☐ Demolition		\$0



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

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

Block 170 Lot 4
Work Site Location 2770 Hooper Ave
Owner in Fee Kennedy Moll Assoc.
Address 841 Shuppke Rd.
Chatham NJ 07928
Tel. (973) 900 2800
Contractor Fiorelli Maintenance
Address 641 Shuppke Rd.
Chatham NJ 07928
Tel. (973) 900 2800
Lic. No. or Bldgs. Reg. No. 3053500 or Social Security No.
Federal Emp. No. 22

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	INSPECTIONS
Date	Initial
☐ No Plans Req.	Type: ☐ Footing ☐ Foundation ☐ Slab ☐ Frame ☐ Insulation ☐ Finishes ☐ Energy ☐ Mechanical ☐ TCO
☐ All	
☐ Footing	
☐ Foundation	
☐ Slab	
☐ Frame	
☐ Insulation	
☐ Finishes	
☐ Energy	
☐ Mechanical	
☐ TCO	
Joint Plan Review Required:	
☐ Elec. ☐ Plumb. ☐ Fire	
SUBCODE APPROVAL	
☐ CO ☐ CCO ☐ CA	
Date: <u></u>	Other <u></u>
Approved By: <u></u>	Final <u></u>

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
No. 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.

Est. Cost of Bldg. Work:
1. New Bldg. \$ 600.00
2. Alteration \$
3. Total (1 + 2) \$

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 Frank LaRocca

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

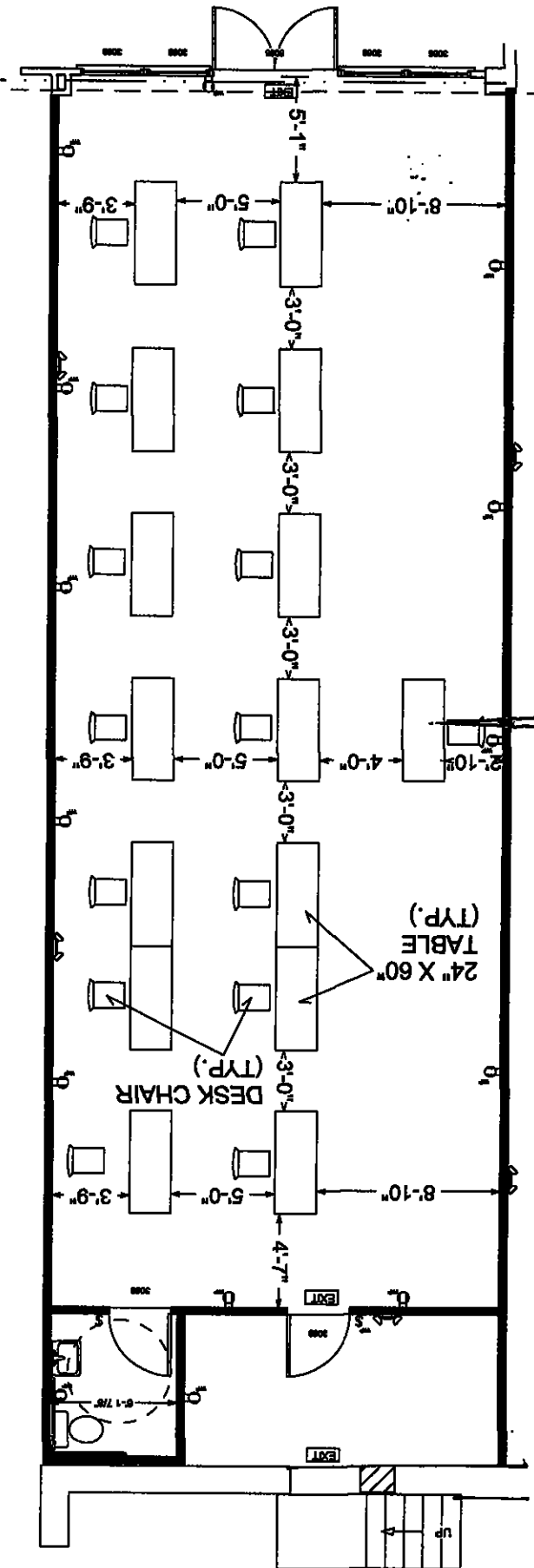
Fixture set up - Table.

TYPE OF WORK:	(Office Use Only)
	FEE
☐ New Building	
☐ Addition	
☐ Alteration	
☐ Roofing	
☐ Siding	
☐ Fence	Height (6' or over)
☐ Sign	Sq. Ft.
☐ Pool	
☐ Adbestos Abatement	
☐ Other	
☐ Other	
☐ Demolition	

Paid ☐ Check # <u></u>	Administrative Surcharge \$ <u></u>
Collected by: <u></u>	Minimum Fee \$ <u></u>
	DCA TRAINING FEE \$ <u></u>
	TOTAL FEE \$ <u></u>

BUILDING CODE: IBC-NJ 2000
USE GROUP: B
OCCUPANCY LOAD: 15 PERSONS

WEICHERT REAL ESTATE SCHOOL
FIXTURE PLAN
1/8"=1'-0"



5/25/05

EDWARD D. MACEIKO AIA, P.E.
NJRA# 08056 NJPE # GE-28227

DATE

TENANT #2 WEICHERT FIXTURE PLAN
KENNEDY MALL 5/25/05
BRICK TWP., NJ

FIDELITY LAND DEVELOPMENT
CORP.
641 SHUNPIKE ROAD
CHATHAM, NJ 07928
973-966-2800

Plan Review _____
Zoning _____
Plumbing _____
Building _____
Fire _____
Electrical _____

Brick Township
Class _____
Date 5-25-05
By _____