



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 1607 W. Princeton Ave., Brick NJ 08724

2. Name of Owner in Fee: John Meyer Tel. [REDACTED]
Address same
street municipality zip code

3. Ownership in Fee: Public ☐ Private ☒

4. Principal Contractor: Phillips Roofing & Siding Tel. (732) 531-8011
Address 1300 Doris Ave., Ocean, NJ 07712
License No. OR, if new home, Builder Reg. No. 213 Exp. Date 12/02
Federal Employee No. 22-3478269 FAX: ()
5. Architect or Engineer _____ Tel. ()
Address _____

6. Responsible Person in Charge of Work Chris Bailon
Tel. (732) 531-8011 FAX (732) 531-5258

SIDING

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>242-</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee			
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>242</u>		

VI. BUILDING/SITE CHARACTERISTICS

- Number of Stories _____
- Height of Structure _____ ft.
- Area — Largest Floor _____ sq. ft.
- New Building Area _____ sq. ft.
- Volume of New Structure _____ cu. ft.
- Construction Classification _____
- Total Land Area Disturbed _____ sq. ft.
- Flood Hazard Zone _____
- Base Flood Elevation _____ ft.
- Wetlands yes _____
no _____
- Max. Live Load _____
- Max. Occupancy Load _____

(office use only)

II. PROPOSED WORK	Est. Cost	OPTIONAL (for office use only)							
		Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☒ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	<u>\$9000.00</u>								

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

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

- ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
- ☐ High Pressure Boilers
- ☐ Pressure Vessels
- ☐ Refrigeration Systems
- ☐ Cross-Connections/Backflow Preventers
- ☐ Hazardous Uses/Places of Assembly
- ☐ Sprinklers
- ☐ Smoke Control Systems in Open Wells
- ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

- ☐ Hotels (R-1)
- ☐ Multi-Family (R-2)
- ☐ Two-Family (R-3) BOCA
- ☐ Two-Family (R-4) CABO
- ☐ One-Family (R-3) BOCA
- ☐ 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.

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 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, EM-PLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

C. () I further certify that I will perform or supervise the following work: 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 prop-erty 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.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 _____

Phillips Roofing & Siding
1300 Bonts Ave
Ocean, NJ 07712

Address _____

Telephone (732) 531-8011

Signature _____

III. () LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

NEW JERSEY
CONSTRUCTION
PERMITS

Date Issued 07/24/2002
Control #
Permit # 02-2776

IDENTIFICATION Block 822 Lot 21 Easement

Work Site Location 1607 N PRINCETON
SIDING

Owner in Fee MEIER
Address SAME
BRICK, NJ 08724

Telephone [REDACTED]

Contractor PHILLIPS ROOFING & SIDING
Address 1309 MORRIS AVE
OCEAN, NJ

Telephone (732) 531-8011
Lic. No. or Bldgs. Reg. No.
Federal Exp. No. 22-3478269

Is hereby granted permission to perform the following work:

1 X 1 BUILDING 1 1 PLUMBING 1 1 LEAD HAZARD ABATEMENT
1 1 ELECTRICAL 1 1 FIRE PROTECTION 1 1 DEMOLITION
1 1 ELEVATOR DEVICES 1 1 ASBESTOS ABATEMENT 1 1 OTHER
(Subchapter 9 only)

DESCRIPTION OF WORK:
SIDING

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 \$ 9,000

DF [Signature]
Construction Official 07/24/2002

U.C.C. §170 (rev. 3/76)

Date

PAYMENTS (Office Use Only)

Building 235
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other 0
DCI Training Fee 7
Cert. of Occupancy 0
Other 0
Total 242
Check No. 3382
Cash
Collected By JB

07/24/02 11:50PM 00000003533
306 SEP 10 06
4022776
BUILDINGS
070
CHECK
4,235.00
07.00

1. The first part of the document is a list of names and addresses of the members of the committee. The names are listed in alphabetical order, and the addresses are given in full, including the street, city, and state.

2. The second part of the document is a list of the names and addresses of the members of the committee who have been elected to the office of the secretary. The names are listed in alphabetical order, and the addresses are given in full, including the street, city, and state.



TECHNICAL SECTION

Block 422

Work Site Location 607 W Princeton Avenue
Brick NJ 08724

Owner in Fee John + Suzanne Meyer
Address same

Contractor Phillips Pooling & Siding
Address 1300 Doris Ave
Ocean NJ 07712
Tele. (132) 531-8011 Fax (132) 531-5258
Lic. No. or Bldrs. Reg. No. 213
Federal Emp. No. 22-3478269

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Failure	Dates (Month/Day)	Approval	Initial
☐	No Plans Required	_____	_____	Type:					
☐	All	_____	_____	Footing					
☐	Footing	_____	_____	Foundation					
☐	Foundation	_____	_____	Slab					
☐	Frame	_____	_____	Frame					
☐	Other	_____	_____	Barrier-Free					
Joint Plan Review Required:				Insulation					
☐	Elec.	☐	Plumb.	☐	Fire	☐	Elevator		
SUBCODE APPROVAL				Finishes					
☐	CO	☐	CCO	☐	CA				
Date: _____				Mechanical					
Approved by: _____				TCO					
_____				Other					
_____				Final					
_____				Barrier-Free					

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work: 1. New Bldg. \$ _____ 2. Alteration \$ _____ 3. Total (1 + 2) \$ _____
Constr. Class	Present	Proposed	
No. of Stories	_____	_____	
Height of Structure	_____ Ft.	_____ Ft.	
Area — Largest Floor	_____ Sq. Ft.	_____ Sq. Ft.	
New Bldg. Area/All Floors	_____ Sq. Ft.	_____ Sq. Ft.	
Volume of New Structure	_____ Cu. Ft.	_____ Cu. Ft.	
Total Land Area Disturbed	_____ Sq. Ft.	_____ Sq. Ft.	



Date Received	Date Issued	Control #	Permit #
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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 _____
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Vinyl Siding Installation

TYPE OF WORK:

[] New Building

[] Addition

[] Alteration

[] Roofing

☒ Siding

[] Fence

[] Sign

[] Pool

[] Asbestos

[] Lead Hair

1 Other

1 Demolition

FEE (Office Use Only)

49

Administrative Surcharge: \$

Minimum Fee

DCA Training Fee: \$

TOTAL FEE \$

U.C.C. F110
(rev. 3/85)

1. White = Inspector Copy 2. Canary = Office Copy
3. Pink = Office Copy 4. Gold = Applicant Copy

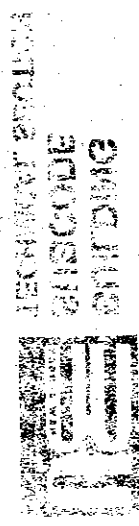
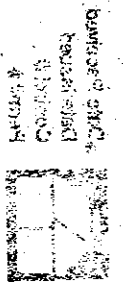
1. Name of the person
 2. Address
 3. City
 4. State
 5. Zip
 6. Phone
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Item	Description	Quantity	Unit Price	Total Price
1	Item 1	1	1.00	1.00
2	Item 2	2	2.00	4.00
3	Item 3	3	3.00	9.00
4	Item 4	4	4.00	16.00
5	Item 5	5	5.00	25.00
6	Item 6	6	6.00	36.00
7	Item 7	7	7.00	49.00
8	Item 8	8	8.00	64.00
9	Item 9	9	9.00	81.00
10	Item 10	10	10.00	100.00
11	Item 11	11	11.00	121.00
12	Item 12	12	12.00	144.00
13	Item 13	13	13.00	169.00
14	Item 14	14	14.00	196.00
15	Item 15	15	15.00	225.00
16	Item 16	16	16.00	256.00
17	Item 17	17	17.00	289.00
18	Item 18	18	18.00	324.00
19	Item 19	19	19.00	361.00
20	Item 20	20	20.00	400.00
21	Item 21	21	21.00	441.00
22	Item 22	22	22.00	484.00
23	Item 23	23	23.00	529.00
24	Item 24	24	24.00	576.00
25	Item 25	25	25.00	625.00
26	Item 26	26	26.00	676.00
27	Item 27	27	27.00	729.00
28	Item 28	28	28.00	784.00
29	Item 29	29	29.00	841.00
30	Item 30	30	30.00	900.00
31	Item 31	31	31.00	961.00
32	Item 32	32	32.00	1024.00
33	Item 33	33	33.00	1089.00
34	Item 34	34	34.00	1156.00
35	Item 35	35	35.00	1225.00
36	Item 36	36	36.00	1296.00
37	Item 37	37	37.00	1369.00
38	Item 38	38	38.00	1444.00
39	Item 39	39	39.00	1521.00
40	Item 40	40	40.00	1600.00
41	Item 41	41	41.00	1681.00
42	Item 42	42	42.00	1764.00
43	Item 43	43	43.00	1849.00
44	Item 44	44	44.00	1936.00
45	Item 45	45	45.00	2025.00
46	Item 46	46	46.00	2116.00
47	Item 47	47	47.00	2209.00
48	Item 48	48	48.00	2304.00
49	Item 49	49	49.00	2401.00
50	Item 50	50	50.00	2500.00
51	Item 51	51	51.00	2601.00
52	Item 52	52	52.00	2704.00
53	Item 53	53	53.00	2809.00
54	Item 54	54	54.00	2916.00
55	Item 55	55	55.00	3025.00
56	Item 56	56	56.00	3136.00
57	Item 57	57	57.00	3249.00
58	Item 58	58	58.00	3364.00
59	Item 59	59	59.00	3481.00
60	Item 60	60	60.00	3600.00
61	Item 61	61	61.00	3721.00
62	Item 62	62	62.00	3844.00
63	Item 63	63	63.00	3969.00
64	Item 64	64	64.00	4096.00
65	Item 65	65	65.00	4225.00
66	Item 66	66	66.00	4356.00
67	Item 67	67	67.00	4489.00
68	Item 68	68	68.00	4624.00
69	Item 69	69	69.00	4761.00
70	Item 70	70	70.00	4900.00
71	Item 71	71	71.00	5041.00
72	Item 72	72	72.00	5184.00
73	Item 73	73	73.00	5329.00
74	Item 74	74	74.00	5476.00
75	Item 75	75	75.00	5625.00
76	Item 76	76	76.00	5776.00
77	Item 77	77	77.00	5929.00
78	Item 78	78	78.00	6084.00
79	Item 79	79	79.00	6241.00
80	Item 80	80	80.00	6400.00
81	Item 81	81	81.00	6561.00
82	Item 82	82	82.00	6724.00
83	Item 83	83	83.00	6889.00
84	Item 84	84	84.00	7056.00
85	Item 85	85	85.00	7225.00
86	Item 86	86	86.00	7396.00
87	Item 87	87	87.00	7569.00
88	Item 88	88	88.00	7744.00
89	Item 89	89	89.00	7921.00
90	Item 90	90	90.00	8100.00
91	Item 91	91	91.00	8281.00
92	Item 92	92	92.00	8464.00
93	Item 93	93	93.00	8649.00
94	Item 94	94	94.00	8836.00
95	Item 95	95	95.00	9025.00
96	Item 96	96	96.00	9216.00
97	Item 97	97	97.00	9409.00
98	Item 98	98	98.00	9604.00
99	Item 99	99	99.00	9801.00
100	Item 100	100	100.00	10000.00

1. Name of the person
 2. Address
 3. City
 4. State
 5. Zip
 6. Phone
 7. Date
 8. Signature
 9. Title

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

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 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. _____	_____	_____	_____