

BLOCK 670 LOT 4 ADDRESS (SITE) 2770 Hooper Ave PERMIT NO. 335-94

RECEIVED



CONSTRUCTION PERMIT APPLICATION

MAR 16 1999

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

DIV. OF INSPECTION IDENTIFICATION

1. Proposed Work-site at: KARINS KURTAINS
2. Name of Owner in Fee: Kennedy MALL Associates Tel. ()
- Address 641 SHUN PIKE RD., CHATHAM, N.J. 07928
3. Ownership in Fee: Public ☐ Private ☐
4. Principal Contractor: Tony's Heating & A/C Tel. (908) 458-5918
- Address 7 MARA CT, BRICK, N.J. 08724
- 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 Tony Ferens Tel. (908) 458-5918
- In Charge of Work

II. PROPOSED WORK

1. ☐ Minor Work (single trade)
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

Est. Cost

3500.00

Replacing / HVAC only

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>YF</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
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical			
3. Plumbing	<u>40</u>		
4. Fire Protection			
5. Other			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	<u>3</u>		
10. Subtotal	\$		
11. Cert. of Occupancy	<u>20</u>		
12. Other			
13. TOTAL	\$ <u>63</u>		

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	

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:

LDS BR 10210174

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 Anthony P. [Signature]

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 Protection									
☐ 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

Control #

Permit #

3/16/94

335-94

IDENTIFICATION Block

670

Lot

4

Work Site Location

Kerins Kuitains

Contractor

Tony Heating

Owner in Fee

Kenneth Hall Perry

Address

1111 S. 1st St. N. N.
Chattanooga, TN

Address

Tele. ()

775-#

Tele. ()

Lic. No. or Bldrs. Reg. No.

Exp. Date

0.00

Federal Emp. No.

570 #

or Social Security No.

INT

0.00

Is hereby granted permission to perform the following work:

☐ BUILDING☒ PLUMBING☐ OTHER☐ ELECTRICAL☐ FIRE PROTECTION

DESCRIPTION OF WORK:

Plumbg

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 \$

3500

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

1 WHITE - OFFICE

2 CANARY - TAX ASSESSOR

3 PINK - JACKET

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

4 #

Building

PLUMBING

40.00

Plumbing

B.C.A.

3.00

Electrical

C / U

20.00

Fire Protection

TOTAL

63.00

Other

03/16/94 NO. 5 CHATTL4A005

20.00

Other

DCA Training Fee

3-

Cert. of Occ.

20-

Other

Total

63-

Check No.

1# 0144

Cash

Collected By:

JH



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

3/16/94
335-94

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
Work Site Location 2770 Haggard Ave

Owner in Fee Leondy Hall Associates
Address 2770 Haggard Ave, Culverville, MO 64720

Tele. () 408-458-918
Contractor James H. Haggard, Inc.
Address 7440 N. 1st St., St. Louis, MO 63114

Lic. No. 408-458-918
Federal Emp. No. or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size
Water Service Size
Estimated Cost of Plumbing Work \$

JOB SUMMARY (Office Use Only)	
PLAN REVIEW:	INSPECTIONS:
☐ No Plans Required	Type: <u> </u>
Joint Plan Review Required:	Slab <u> </u>
☐ Bldg. ☐ Elec. ☐ Fire	Rough <u> </u>
☐ Plumb. Plans Approved	Water <u> </u>
Date: <u>3/16/94</u>	Sewer <u> </u>
Approved by: <u>[Signature]</u>	Fixtures <u> </u>
	Gas Equipment <u> </u>
	Gas Final <u> </u>
	Solar <u> </u>
	TCO <u> </u>
SUBCODE APPROVAL:	
☐ CO ☐ CCO ☐ CA	
Approved by: <u> </u>	
Date: <u> </u>	

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]
Signature-Contractor Seal

D. TECHNICAL SITE DATA (List all fixtures.) \$18,000.

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	
	Gas Piping	
	Fuel Oil Piping	
	Water Heater	
	Steam Boiler	
1	Hot Water Boiler HVAC	15
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
1	Water Cooled A/C	15
	or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Gas Service Connection	
	Active Solar System	
1	Other	10
Administrative Surcharge		\$ 40
Paid ☐ Check # <u> </u> Minimum Fee		\$
Collected by: <u> </u> TOTAL		\$