

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 01/18/2000
Date Issued 01/18/2000
Control #
Permit # 00-0153

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

Block 869.01 Lot 4 Quad
Work Site Location 1905 RT 88 BAGEL MARKET

INTERIOR CLEAN OUT

Owner in Fee WERTS, MICHAEL

Address 105 RT 71

SPRING LAKE HTS, NJ 07162-

Tele

Contractor MICHAEL WERTS

Address 105 RT 71

SPRING LAKE HTS, NJ 07162-

Tele

Lic. No. or Bldg. Reg. No.

Federal Emp. No. 44-93834

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

[] No Plans Req.

[] ALL

[] Footing

[] Foundation

[] Frame

[] Other

Joint Plan Review Required:

[] Elect [] Plumb [] Fire

SUBCODE APPROVAL [] Elev

[] CO [] CCO [] CA

Date:

Approved By:

INSPECTIONS

Type

Footing

Foundation

Slab

Frame

Barrel/Free

Insulation

Finishes

Energy

Mechanical

TCO

Other

Final

Barrel/Free

Dates (Month/Day)

Failure Failure Approval Initial

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Est. Cost of Bldg. Work:

1. New Bldg. \$

2. Alteration \$

3. Total (1+2) \$

Industrialized Building:

[] State Approved

[] HUD

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

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

INTERIOR CLEAN OUT FROM BAGEL PLACE TO BAGEL PLACE

TYPE OF WORK

[] New Building

[] Addition

[X] Alteration

[] Roofing

[] Siding

[] Fence 0 Height (exceeds 6')

[] Sign 0 Sq. Ft.

[] Pool

[] Asbestos Abatement Subchapter 8

[] Lead Haz. Abatement NJAC 5:17

[X] Other INT CLEAN OUT

Other

[] Demolition

FEE (Office Use Only)

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

U.C.C. F110 (rev. 3/96)

Applicable to Ordinance 728-92
This form must be handed in with permit application or a permit will not be issued.

TOWNSHIP OF BRICK

1905 Rt 88 86901 4
Work Site Address Block Lot
Michael Werts 105 Rt 71 Springfield N.J. 07662
Owner's Name, Address, Phone

Self.
Contractor's Name, Address, Phone

Construction Sheetrock Existing Wall, replace ceiling tiles, lay down floor
Describe type (Single-family home, etc.)

Demolition take out wet sheetrock replace new and drop ceiling tiles
Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material 800.00

Name, address and phone of party responsible for removal of debris:

Swidel Removable
Size of dumpster: 20 yds.

Destination of discarded debris:

Hauler's DEP Permit No.:

**Note: Any recyclable material, including, but not limited to:
corrugated cardboard, vegetative waste, concrete, asphalt, clean wood,
etc., must be delivered to an approved recycling center, and receipts
provided to the Township of Brick along with tipping receipts for
non-recyclable material.

Generator's Certification: Under penalty of criminal and civil prosecution,
for the making or submission of false statements, representations or omissions,
I declare, on behalf of the generator that the contents of this document are
fully and accurately described above and have been disposed or recycled in
accordance with all applicable State and Federal laws and regulations, and
that I have been authorized, in writing, to make such declarations by the
person in charge of the generator's operation.

Michael Werts Michael Werts 1/18/00
Printed/Typed Name Signature Date

FOR OFFICE USE ONLY

MUST BE COMPLETED BEFORE CERTIFICATE OF OCCUPANCY OR CERTIFICATION OF APPROVAL IS ISSUED

Recycling tonnage receipts attached?

Certified tipping receipts attached?

**Note: Receipts must show certified weights, date of disposal and name and address
of disposal center.

DISTRIBUTION LIST:

1. Original to Code Enforcement Officer
2. Construction Code Office
3. Applicant

Township of Brick

Counter Form
(PLEASE PRINT)

Site Location: 1905 RT88 "Bagel Market"
 Block: 869-01 Lot: 4
 Owner's Name: Michael Werts
 Owner's Mailing Address: 105 RT11
Spring Lake HTS - NJ - 07762
 Phone: [REDACTED]

BUILDING

Contractor: Self
 Address: _____
 Phone#: _____
 Lis #: _____
 Federal Emp # or SSN: _____

Technical Data

Description of Work:

Sheetrock walls due to
 water damage. + Replace
 Drop Ceiling Panels. Put vinyl
 Floor Tiles down.
 Exterior Clear out

Type of Work

☐ New Building ☐ Siding
☐ Addition ☐ Fence
☐ Alteration ☐ Pool
☐ Roofing ☐ Demolition
☐ Asbestos Abatement ☐ Sign _____ sq ft

Building Characteristics

Use Group Present: _____ Proposed: _____
 No of Stories: _____
 Height of Structure: _____
 Area of the largest floor: _____
 Area of New Building: _____
 Volume of Structure: _____
 Total Land Disturbed: _____

Estimated Cost of Building Work: _____
 Signature: Michael Werts
 Please Print Name Michael Werts

ELECTRICAL

NONE

Contractor: _____
 Address: _____
 Phone#: _____
 Lis #: _____
 Federal Emp # or SSN: _____

Technical Data

Item Quantity
 Lighting Fixtures _____
 Receptacles _____
 Switches _____
 Detectors _____
 Light Poles _____
 Motors w/ Fract. HP _____
 Emergency & Exit Lights _____
 Communication Points _____
 Alarm Devices/FAC Panel _____
 Total _____

Pool _____
 Spa/Hot Tub/Storable Pool _____ KW
 Electric Range _____ KW
 Oven/Surface Unit _____ KW
 Electric Water Heater _____ KW
 Electric Dryer _____ KW
 Dishwasher _____ HP
 Garbage Disposal _____ KW
 A/C Unit - Central Air _____ KW
 Space Heater/Air Handler _____ KW
 Baseboard Heating _____ KW
 Motors 1+ HP _____ KW
 Transformer/Generator _____ AMP
 Light Stander _____ AMP
 Service _____ AMP
 Subpanel _____ AMP
 Motor Control Center _____ AMP
 Sign/Outline Light _____ KW
 Furnace _____
 Steam Boiler _____
 Other: _____

Estimated Cost of Electrical Work: _____
 Signature: Michael Werts
 Please Print Name Michael Werts

CONTRACTOR'S SEAL

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

Michael J. Weiss

Date

1/18/00

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

Address

Telephone ()

Signature

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