



CONSTRUCTION PERMIT APPLICATION

Page 1

AUG 29 1989

DIV. OF INSPECTION

I. IDENTIFICATION

1. Proposed Work at: 990 CEDAR BRIDGE AVE (TOWNE HALL SHOPPES) BRICK
2. Owner Name: JOC BASEBALL CLUBHOUSE INC Tel. (201) 477-2444
- Address 990 CEDAR BRIDGE AVENUE BRICK NJ 08723
3. Principal Contractor: SAMUEL HUTCHINSON Tel. (609) 597-3065
- Address 69 LEHIGH AVE MANAHAWKIN NJ 08050
- Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
4. Architect or Engineer: NONE Tel. (____) _____
- Address _____
5. Responsible Person in Charge of Work SAMUEL HUTCHINSON Tel. (609) 597-3065

II. PROPOSED WORK

A. TYPE OF WORK

1. ☒ Minor Work (Single Trade)
2. ☐ Small Job (\$5,000 and no Prior Approvals)
Complete only II.B., III and IV.A. and Page 2
3. ☐ New Building
4. ☐ Addition
5. ☒ Alteration *ecp*
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☐ Other: _____

B. CATEGORIES OF WORK

- | Permit/Category | Estimated |
|--|-------------------|
| 1. ☒ Building/Structural | \$ <u>1000.00</u> |
| 2. ☐ Plumbing | _____ |
| 3. ☐ Electrical | _____ |
| 4. ☐ Fire Protection | _____ |
| 5. ☐ Other _____ | _____ |
| 6. ☐ Other _____ | _____ |
| TOTAL COST | \$ <u>1000.00</u> |

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

1. ☐ Elevators/Dumbwaiters
2. ☐ High-Pressure Boilers
3. ☐ Refrigeration Systems
4. ☐ Pressure Vessels
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Cross-connections/Backflow Preventors
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
HMD Reg. No.: _____
3. ☐ Two Family (R-3b)
4. ☐ One-Family (R-3a)

If new construction, enter no. of dwelling units _____

If other than new construction, enter no. of dwelling units: _____

Before Construction: _____

After Construction: _____

Net Gain (or loss): _____

B. NON-RESIDENTIAL

- | | |
|---|---|
| 5. ☐ Theatres with Stage (A-1-A) | 16. ☐ Institutional Detention Center (I-1) |
| 6. ☐ Movie Theatres (A-1-B) | 17. ☐ Hospitals, Infirmeries (I-2) |
| 7. ☐ Night Clubs (A-2) | 18. ☐ Group Homes (I-3) |
| 8. ☐ Restaurants, Libraries, Museums (A-3) | 19. ☐ Mercantile (M) |
| 9. ☐ Religious Assembly (A-4) | 20. ☐ Moderate-Hazard Warehouse (S-1) |
| 10. ☐ Outdoor Assembly (A-5) | 21. ☐ Low-Hazard Warehouse (S-2) |
| 11. ☒ Business (B) | 22. ☐ Temporary, Misc. (U) |
| 12. ☐ Educational (E) | 23. ☐ Other _____ |
| 13. ☐ Moderate-Hazard Factory (F-1) | |
| 14. ☐ Low-Hazard Factory (F-2) | |
| 15. ☐ High-Hazard (H) | |

State Specific Use: RETAIL

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☒ Private (Individual, Corp., Non-profit Inst., Etc.)
2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

- | Principal | Secondary | Type |
|-----------------------------|--------------------------|--------------------------|
| 3. ☐ | ☐ | Gas |
| 4. ☐ | ☐ | Oil |
| 5. ☐ | ☐ | Electric |
| 6. ☐ | ☐ | Solid (Wood, Coal, Etc.) |
| 7. ☐ | ☐ | Propane |
| 8. ☐ | ☐ | Solar |
| 9. ☐ | ☐ | Other _____ |

C. TYPE OF SEWAGE DISPOSAL

10. ☐ Public or Private Company
11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☐ Public or Private Company
13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories _____
15. Height of Structure _____ Ft.
16. Area—Largest Floor _____ Sq. Ft.
17. Bldg. Area—All Fls. _____ Sq. Ft.
18. Volume of Structure _____ Cu. Ft.
19. Total Land Area Disturbed _____ Sq. Ft.

LDS BR 10309627

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

- A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.
- B. ☐ I further certify that I will perform the work below.
 B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.
- 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 understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE _____ DATE _____

II. AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

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 SAMUEL HUTCHINSON TEL. (609) 597-3065
 ADDRESS 69 Lehigh Ave
MAWAHAWKIN NJ 08050
 SIGNATURE Samuel Hutchinson

PERMIT NO. 5318

PRIOR APPROVALS CHECKLIST

[illegible]

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

EDITION OF CODE

EDITION OF CODE

☐ Flood Hazard

- | | | |
|---|---------------------------------------|---|
| ☐ One and Two Family Dwellings | ☐ Mechanical | ☐ As Built Elevation Certification |
| ☐ Building | ☐ Energy | |
| ☐ Electrical | ☐ Barrier Free | ☐ Other |
| ☐ Plumbing | ☐ Other | |

☐ As BuiltElevation
Certification☐ Other

PERMIT CONTROL

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

- ☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN - FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date Receiver	Approval Date	Reviewer	Comments
☐	BUILDING	8/29/89	8-30-89	16m	
	Footings/Foundations				
	Framing				
	Architectural				
	Other				
☐	PLUMBING	8/31/89		AL	
☐	ELECTRICAL				
☐	FIRE PROTECTION		8/31/89	JS	
☐	OTHER				

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
	BUILDING		9-18-89	WLS
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
	PLUMBING		9-5-89	OM
	ELECTRICAL		9-18-89	BR
	FIRE PROTECTION		9-18-89	JS
	OTHER			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

	Date issued
☐ Temporary Certificate of Occupancy	_____
Date Expired _____	
☐ Temporary Certificate of Occupancy	_____
Date Expired _____	
☐ Certificate of Occupancy	_____
No. _____	
☐ Certificate of Continued Occupancy	_____
No. _____	
☒ Certificate of Approval	9-20-89
No. 5318	
☐ None	

IV. ON-GOING INSPECTIONS

On-going Inspections Required (See Page 1, II.D.)	Date Posted to Log and Tickler
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$ 7.50
PLUMBING	_____
ELECTRICAL	_____
FIRE PROTECTION	4.00
OTHER	_____
SUBTOTAL	\$ 47.50
- LESS: 20% of subtotal (when plan review performed by state agency).	(5.00)
D.C.A. TRAINING FEE .0006 x _____	_____
CERTIFICATE OF OCCUPANCY	20.00
OTHER	_____
OTHER	_____
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ 72.50
DATE 9/5/89 Collected By 12369	72.50

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY	_____	_____
OTHER	_____	_____
OTHER	_____	_____
- LESS: Refunds	_____	(_____)
TOTAL COLLECTED AFTER PERMIT ISSUED		\$ _____

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	\$ _____
COLLECTED AFTER PERMIT (VB)	_____
TOTAL	\$ _____

TOWNSHIP OF BRICK



CERTIFICATE

CERT. NO.	XXXX 5318
DATE ISSUED	9/20/89
Block	469 Lot 12
Subdivision	

IDENTIFICATION

Owner J C Baseball Clubhouse Age Inc S. Hutchinson
 Address 990 Cedar Bridge Ave Address _____
Brick, N.J.
 Tel. () _____ Tel. () _____
 Work Site Address _____ Lic. No. _____
990 Cedar Bridge Ave. Federal Emp. No. _____

PAYMENTS

Fees Remitted \$ _____
☐ Check No. _____
☐ Cash _____
☐ Other _____
 Collected By: _____
 Date: _____

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☐ CERTIFICATE OF OCCUPANCY

☒ CERTIFICATE OF APPROVAL

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

B. ☐ CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

C. ☐ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate:

D. DESCRIPTION OF WORK:

Alteration & C/O

USE GROUP B

FIRE GRADING 2 hour

MAXIMUM LIVE LOAD _____

MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE Retail-Business

FINAL COST OF CONSTRUCTION: \$ 1,000.

CONSTRUCTION OFFICIAL



CONSTRUCTION PERMIT

Date Issued 9/5/89
Control #
Permit # 5318

IDENTIFICATION Block 469 Lot 12

Work Site Location 990 Cedar Bridge Ave Contractor Jamuel Hatcher
J & C Baseball Clubhouse Inc. Address 69 Birch Ave

Owner in Fee J & C Baseball Clubhouse Manahawick NJ 08050

Address 990 Cedar Bridge Ave Tele. (609) 597-3065 5318

Brick Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____ 0.00

Tele. (_____) _____ Federal Emp. No. _____ 469

or Social Security No. _____ LOT _____ 0.00

is hereby granted permission to perform the following work:

[☒] BUILDING [☐] PLUMBING [☐] OTHER _____
[☐] ELECTRICAL [☒] FIRE PROTECTION

DESCRIPTION OF WORK:

Alteration & c/o

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 \$ 1000.00

A. Berge
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)		12 #
Building	BUILDING	7.50
Plumbing	FIRE	40.00
Electrical	PLAN RW	5.00
Fire Protection	C / U	20.00
Other	TOTAL	72.50
Other	CHECK	72.50
DCA Training Fee	CHANGE	0.00
Cert. of Occ.	NO. 5	8011A005
Other		
Total	<u>72.50</u>	
Check No.	<u>7369</u>	
Cash		
Collected By:	<u>Valerie</u>	



BUILDING SUBCODE TECHNICAL SECTION



PERMIT NO.	5418
DATE ISSUED	9/9/89
REVISION DATE	
Block	4th Lot 12
Subdivision	

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only	When changing contractors, notify this office
Owner <u>JC BASSBELL CLAYHOUSE INC</u>	Contractor <u>SHARUEL HUTCHINSON</u>
Address <u>990 CORNWEDGE AVE</u>	Address <u>990 CORNWEDGE AVE</u>
<u>Beick NJ 08723</u>	<u>HANAHUEN NJ 08050</u>
Tel. (201) <u>477-2444</u>	Tel. (609) <u>597-3065</u>
Work Site Address <u>990 CORNWEDGE AVE</u>	Lic. No. _____
<u>Beick NJ 08723</u>	Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH: (Complete for Minor Work and Small Job Only)
I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
<u>Sharyl Hutchinson</u> AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Give detail description including materials used, dimensions, etc.

Constructing interior walls
to provide for working office
& storage areas.
Materials: Aluminum studs
sheetrock
paneling

TYPE OF WORK:
☐ New Building
☐ Addition
☒ Alteration/Renovation
☐ Roofing
☐ Siding
☒ Other interior walls

☐ Demolition
☐ Miscellaneous
☐ Fence
☐ Sign
☐ Pool
☐ Elevator
☐ Other _____

☒ See Plans

Fee Basis	Fee
Minimum Building Fee (if applicable)	\$
Total Building Fee (Greater of Minimum or Subtotal)	\$
SUBTOTAL	\$

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____	
No. of Stories _____	Total Building Area-All Floors _____ Sq. Ft.
Height of Structure _____ Ft.	Volume of Structure _____ Cu. Ft.
Area-Largest Floor _____ Sq. Ft.	Total Land Area Disturbed _____ Sq. Ft.
Estimated Cost of Building Work: \$ <u>1000.00</u>	

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing



BUILDING SUBCODE TECHNICAL SECTION



PERMIT NO. 5310
DATE ISSUED 9/5/89
REVISION DATE _____
Block 446 Lot 12
Subdivision _____

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner JC Baseball Clubhouse INC

Contractor Samuel Hutchinson

Address 970 CEDAR BRIDGE RD

Address 440 CARRINGTON DR ALEXANDRIA

LEICK NJ

MANA NAKI NI

Tel. (201) 477-2444

Tel. (603) 291-3065

Work Site Address 490 Cedar Bridge Ave

Federal Emp. No.

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

CONSTRUCTING INTERIOR WALLS
TO PROVIDE FOR WORKING OFFICE
A STORAGE AREAS.

Materials: ALUMINIUM STUDS
SHEEPWICK
PANELING

☒ See Plans

C. BUILDING CHARACTERISTICS

USE GROUP:	Present	Proposed

No. of Stories _____

Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area - Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: \$ 1000

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Walter H. Hester

AGENT SIGNATURE

CERTIFICATION IN LIEU OF OAT
(Complete for Minor Work and
Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent:

AGENT SIGNATURE _____

TYPE OF WORK:	Fee Base	Fee
☐ New Building		
☐ Addition		
☒ Alteration/Renovation		
☐ Roofing		
☐ Siding		
☒ Other <u>INTERIOR WORKS</u>		
☐ Demolition		
☐ Miscellaneous		
☐ Fence		
☐ Sign		
☐ Pool		
☐ Elevator		
☐ Other _____		
SUBTOTAL		
Minimum Building Fee (if applicable)		
Net of Min. Building Fee (Greater of Minimum or Subtotal)		

For Basis

70

SUBTOTAL**Minimum Building Fee (if applicable)**

14 Total Building Fee
(Greater of Minimum
or Subtotal)

PLAN REVIEW AND INSPECTION - BUILDING

DATE

JOB CONDITION/COMMENTS

Handwritten signature: J. J. O. S.

Fire Grading:

Maximum Live Load:

Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

Date: 8-30-89 Initials: W

☐ No Plans Required

☒ All

☐ Footing/Foundation

☐ Frame

☐ Architectural

☐ Other

INSPECTIONS FINAL

☐ CO ☐ GCO ☐ CA

Date: 9-18-89

Inspected By: *[Signature]*

INSPECTIONS

Type	Failure Dates	Approval Date
☐ Footing/Foundation		
☐ Slab		
☐ Frame		
☐ Architectural		
☐ Insulation		
☒ Finishes		
☐ Energy		
☐ Mechanical		
☐ TCO		
☐ Other		

Handwritten signature: J. J. O. S.

TOWNSHIP OF BRICK



FIRE SUBCODE



PERMIT NO. 5318
 DATE ISSUED 9/5/89
 REVISION DATE _____
 Block 4409 Lot 12
 Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only When changing contractors, notify this office

Owner JC Baseball Clubhouse INC Contractor Samuel Hutchinson
 Address 990 Cedar Bridge Ave Address 69 Kenilght Ave
Brick NJ 08725 Hanahawain NJ 08050
 Tel. (201) 477-2444 Tel. (609) 597-3065
 Work Site Address 990 Cedar Bridge Ave Lic. No. _____
Brick NJ 08725 Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
 (Complete for Minor Work and Small Job Only)
 I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
Walter Hutchinson
 AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☒ Wet ☐ Dry ☐ Other _____ FEE _____
 Areas Sprinkled: ☒ Full ☐ Partial (specify in comments)
 No. of Heads: _____ No. of Spare Heads: _____
☐ Valves Supervised - Method: AUTO
 Water Supply - Source: _____ Size: _____
 F.D. Connection Location: _____
 Estimated Cost of Work: \$ _____

B3. ALARM

TYPE: ☐ Manual ☒ Automatic FEE _____
 Supervision Type: ☐ Local ☒ Central
☐ Proprietary ☐ Remote Location
 Estimated Cost of Work: \$ _____

B4. STAND PIPES

Pipe Size: _____ Pump Size: _____
 Water Source: _____ Size: _____
 F.D. Connection Location: _____
 Hose Station: ☐ Yes ☐ No
 Estimated Cost of Work: \$ _____

B5. OTHER

Est. Supervisory Company letter
Superior Electric
 \$ _____
 \$ _____
 \$ _____

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO2
☐ Halon ☐ Foam
☐ Other _____
 Manual Pull: ☐ Yes ☐ No
 Locations: _____

Estimated Cost of Work: \$ _____ \$ _____

Minimum Fire Protection Fee (If Applicable) \$ _____
 Total Fire Protection Fee (Greater of Minimum or Subtotal) \$ 400

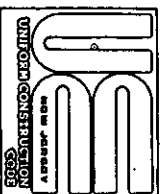
C. FIRE PROTECTION CHARACTERISTICS

USE GROUP _____ Present _____ Proposed _____
 Heating Systems - Location: _____
 Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other _____
 Fuel Storage Tank - Location: _____ Fuel Type: _____ Capacity: _____
 Total Estimated Cost of Fire Protection Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

TOWNSHIP OF BRICK



TECHNICAL SECTION



PERMIT NO. 5488
DATE ISSUED 7/20/04
REVISION DATE _____
Block 469 Lot 12
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only	When changing contractors, notify this office
Owner <u>JC BARBARI CONSULTING INC</u>	Contractor <u>SPINER HUTCHINSON</u>
Address <u>990 CEDAR BRIDGE AVE</u>	Address <u>69 KENIGH AVE</u>
<u>BRICK NJ 08723</u>	<u>HAWAIIAN NJ 08050</u>
Tel. (cell) <u>973-2444</u>	Tel. (cell) <u>973-597-3065</u>
Work Site Address <u>990 CEDAR BRIDGE AVE</u>	Lic. No. _____
<u>BRICK NJ 08723</u>	Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Christy Hobbs
AGENT SIGNATURE

B. TECHNICAL SHEET DATA

B1. SPRINKLERS

TYPE: ☒ Wet ☐ Dry ☐ Other _____	FEE
Area Sprinkled: ☒ Full ☐ Partial (Specify in comments)	
No. of Heads: _____ No. of Spare Heads: _____	
☐ Valves Supervised - Method: <u>Auto</u> Size: _____	
Water Supply - Source: _____	
F.D. Connection Location: _____	
Estimated Cost of Work: \$ _____	

B3. ALARM

TYPE: ☐ Manual ☒ Automatic	FEE
Supervision Type: ☐ Local ☒ Central	
☐ Proprietary ☐ Remote Location	
Estimated Cost of Work: \$ _____	

B4. STAND PIPES

Pipe Size: _____ Pump Size: _____	
Water Source: _____ Size: _____	
F.D. Connection Location: _____	
Hose Station: ☐ Yes ☐ No	
Estimated Cost of Work: \$ _____	

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO2	
☐ Halon ☐ Foam	
☐ Other _____	
Manual Pull: ☐ Yes ☐ No	
Locations: _____	

Estimated Cost of Work: \$ _____	

B5. OTHER

<u>First Stage Emergency Alarm</u>	\$ _____
<u>Second Stage Emergency Alarm</u>	\$ _____
<u>Third Stage Emergency Alarm</u>	\$ _____
Subtotal	\$ _____
Minimum Fire Protection Fee (If Applicable)	\$ _____
Total Fire Protection Fee (Greater of Minimum or Subtotal)	\$ <u>40</u>

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP _____ Present _____ Proposed _____
Heating Systems - Location: _____
Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other _____
Fuel Storage Tank - Location: _____ Fuel Type: _____ Capacity: _____
Total Estimated Cost of Fire Protection Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

JOB CONDITION/COMMENTS

COMPLETION WITH COSTS



CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as this agent.

[Signature]

AGENT'S SIGNATURE

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as this agent.

[Signature]

AGENT'S SIGNATURE

U C C. Form F-130 (8/83) Green - Office Copy White - Applicant Copy Pink - County Copy White Tag - Inspector Copy

PLAN REVIEW AND INSPECTION - PLUMBING

DATE _____

JOB CONDITION/COMMENTS

12/13/88 Not Open

12/29/88 GAS TEST O.K.

8-3-89
floor drain too high / drain from under front back patches

8-31-89

8-31-89

meter gate O/K

JOB SUMMARY

☐ **No Plans Required**

☐ Plan Review Approved

Date: 8/16/88

Approved By:

INSPECTIONS FINAL.

☒ CO ☐ CEO ☐ CA

Date: 9/5/89

Inspected By: Metcal

INSPECTIONS

Type I

Failure Dates

Approval Date

Slab

☐ Rough

☐ Water

 Sewer

Energy

Mechanical

TCO

☒ Other AD

8-31-89

MUNICIPALITY

B.T.



CUT-IN-CARD

LOCATION

990 CEDAR BRIDGE AVE

UTILITY CO

BLK

469

LOT

128

OWNER

J.C. Bask Ball canos

OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C. utility and DCA requirements."

☒ FINAL ☐ TEMPORARY

This approval void after _____ days

SERVICE

RANGE

WATER HEATER

AIR COND

ELECT HEAT

MISC

COMMENTS

6 RECEPTACLES 2 LIGHTS

DATE

9-18-89

PERMIT #

009792

INSPECTOR

[Signature]

Eléc. 104

Insp. Lic #

1427

Store #14

Bldg Line

Lav

WC

Store #15

To MAIN

0/0

2"

4"

1 1/2"

FD

VTR

WC

Store #14

Store #15

Township of Brick

WHAT TYPES OF WORK REQUIRE BUILDING PERMITS AND WHAT THE REQUIREMENTS ARE FOR OBTAINING A BUILDING PERMIT

Please read this requirement list very carefully. The applicant is completely responsible for submitting everything listed below. Failure to do so will result in the delay of your permit.

ADDITION Submit two plot plans (see zoning below) showing the location of the addition with setbacks marked on plot. Submit two sets of drawings consisting of cross section drawings showing all materials from footing to roof, and finished elevation view of the sides of the addition. If more than one room is involved, submit two floor plans. If plumbing is involved two applications must be submitted by whoever is doing the plumbing. Electrical permits are obtained from Ocean County Electrical Bureau in Toms River (36 Hadley Ave.). If the plans are drawn by owner, the owner signs each page and the owner section on the application. If the addition is to be over 1500 square foot in size, and in a flood zone, wetlands, beach lagoon, or near any type of water, you must first make application to the Department of Environmental Protection--Division of Coastal Resources. The local office is located at 1433 Hooper Ave. in Toms River (201) 286-6428 (Additional handout information is available).

ALTERATION For inside changes, submit 2 copies of floor plan showing changes. For porch enclosures, submit 2 copies of elevation view showing how porch will be enclosed.

BULKHEADS As of September 26, 1980, on man-made lagoons only, a permit from the state is an approval from the Army Corps of Engineers. This approval is required for a permit in Brick. On all other natural waterways such as Metedeconk River, Kettle Creek, etc. both State and Army permits are necessary. Submit copy of Environmental letter and Army letter is natural waterway, two plot plans showing location of bulkhead and bulkhead designed and sealed by engineer.

DECK 2 sets of plans showing how the deck is going to be built from the footing to the rails, what materials are going to be used, there size, and how deep the footing will be. Also included two plot plans or a survey showing the location of the proposed deck.

ELECTRICAL If there is any electrical work involved, a permit is to be obtained from the Ocean County electrical Bureau in Toms River. The phone number is 244-2121. IT IS THE OWNERS RESPONSIBILITY TO OBTAIN ELECTRICAL PERMITS. NO CERTIFICATES OF OCCUPANCY WILL BE ISSUED WITHOUT A FINAL ELECTRICAL APPROVAL.

FENCES With the supplied application form, submit two drawings or plot plans showing your property line and where the fence will be built.

FIREPLACE & WOOD STOVE If masonry chimney is on outside of house, submit two plot plans showing location along with 2 copies of cross section of foundation, hearth and throat. On wood burning stoves

submit floor plan of room involved showing what material is being used underneath and behind as far as fire prevention is concerned along with installation instructions that come with stove. See building inspector during office hours for any information helpful in these lines.

PLUMBING Submit 1 TECHNICAL Section with the Heatloss, gas pipe sizing, and the isometric sketch. Also list any existing heating fixtures.

PORCH ENCLOSURES If you live in a development with an association, you must first receive the association's approval. Bring us a copy of the association's approval, submit two copies of cross section drawings showing how the porch will be built from the footing (if its not there already) to the roof, and what materials you will be using. Also submit 2 copies of the elevation view showing how the porch will be enclosed, and two plot plans. Make sure you fill out an Engineering Exemption Form.

ROOFING Just fill out an application form.

SHEDS If you're building your own shed, submit 2 copies or cross section of materials showing where material is going and two plot plans showing location of shed on property and the setbacks. If metal or pre-fab shed just a plot plan is needed.

SIDING Just fill out an application form.

SWIMMING POOLS Submit two plot plans showing location of swimming pool on property. two sets of sealed prints with pool designer's seal on both prints and a brochure on the filter system. Above Ground pools, submit picture of pool, plot plan and the filter system.

ZONING REQUIREMENTS FOR ADDITIONS AND NEW HOMES All plot plans must show the required yard areas for the particular zone. All yard requirements are shown to the building line. The building line is a line formed by the intersection of a horizontal plane and a vertical plane that coincides with the most projected exterior surface of the building including eaves and overhangs.

All yard areas facing on a public street shall be considered a front yard and shall be considered a front yard and shall conform to the minimum front yard requirements for the particular area. The rear yard shall be deemed to be the area opposite the narrowest lot frontage and the remaining lot yard shall be determined to the side yard.

**THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY**

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
458-7000

CERTIFICATE OF COMPLIANCE

Date.....9-29-89.....

NAME.....Cedarbridge Associates.....

ADDRESS.....510 S. Burnt Mill Rd. Voorhees, NJ.....

PROPERTY LOCATION.....990 Cedarbridge Ave.....B14.....

Account No.....1398581.....Block 670.....Lot.....19.....

I hereby certify that the above applicant has complied with all Rules
and Regulations of this Authority and has paid all required fees and charges.

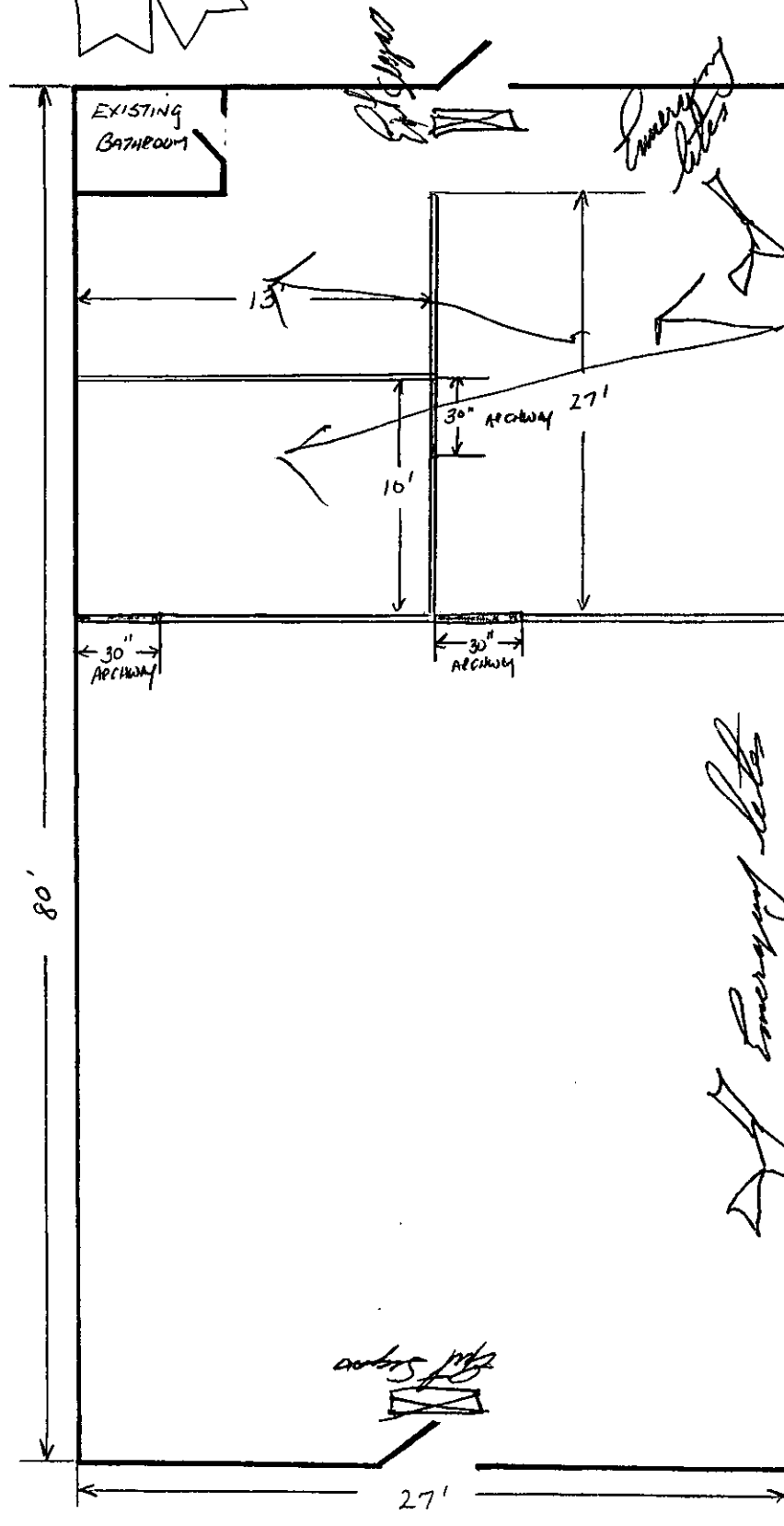
For the Authority.....

James Kostyn



FIRST PLACE TROPHIES & AWARDS, INC.

TOWNE HALL SHOPPES • 990 CEDAR BRIDGE AVENUE
BRICK, NEW JERSEY 08723
(201) 920-6377



*Putting up wall to
Pat's my home to
move Sprinkler heads
for coverage
fire*

Emergency exits

*Beds 8-31-89 H/L
Fire 8/31/89 J/C*

REQUIREMENTS FOR OBTAINING A CONSTRUCTION PERMIT FOR NEW
DWELLINGS AND COMMERCIALS

Please read the requirement list carefully. The applicant is completely responsible for submitting everything listed below. Failure to do so may result in the delay of obtaining your permit.

To obtain a construction permit, application for a permit shall be made by the owner, agent, licensed engineer, architect or plumber, electrical or other contractor employed in connection with the proposed work. If the application is by a person other than the owner, the owner must submit a notarized affidavit authorizing the applicant to sign for him. The following must be submitted to be approved by the Division of Inspections.

1. Obtain your Certificate of Availability from the BTMUA. The purpose of this form is to inform the public of utilities available, thus preventing a duplication of cost on individual systems.
2. Two sets of building plans are required. If drawn by the owner each page must bear his or her signature. An affidavit signed and notarized that he has drawn his own plans. All engineering plans and computations shall bear the seal and signature of the licensed engineer or registered architect responsible for the design. Plans for buildings shall indicate how required structural and fire resistance rating will be maintained for penetrations made for electrical, mechanical, plumbing and communication conduits, pipes and systems. Building plans and specifications shall contain foundation, floor, roof, and structural plans; door, window and finish schedules; details, connections and material designations.
3. One set of plumbing applications must be filled out by whoever is doing the plumbing. Isometric drawings for the plumbing and gas piping must be submitted. Plumbing plans and specification shall contain floor plan, fixtures, pipe sizes and other equipment and materials, fixture schedule and sewage disposal.
4. For septic systems, submit all four (4) copies of system design from the engineer to the Ocean County Health Department.
5. For residential specification the following must be submitted for electrical work: 1. Floor and ceiling plans, 2. Lighting (including switching), receptacles, motors and equipment, 3. Service entry location, wire and breaker sizes.

For Commercial or Industrial plans, the following must be submitted: 1. Floor and ceiling plans, 2. Lighting (include switching), receptacles, motors and equipment, 3. Service entry location, wire, conduit and breaker sizes, 4. Panel schedules, 5. Lighting power budget figures per EMS-1, energy subcode, (These are minimum requirements). A one time fee of \$10.00 is charged for plan review.

5a. For Commercial and Industrial the following must be submitted for fire protection: 1. Fire grading in hours, 2. Class of building in use group. 3. Sprinkler layout where needed, storage, heater, boiler, furnace and similar use. etc.

6. Two certified plot plans must accompany all applications. *See 6a and 6b at end of requirement list. Plots must be prepared by licensed engineer or land surveyor with signature and seal.

7. Heat loss calculation and furnace brochure must be submitted with the heat plans. Duct work on foundation plans and baseboard on floor plans. Mechanical plans and specifications shall contain floor or ceiling plans, equipment distribution location, size and flow, location of dampers and safeguards, and all materials. Smoke detectors are required in all new homes.

8. On buildable lots where trees exist and are to be removed for the purpose of construction, a Shade Tree Permit must be obtained.

9. On construction plans where an item is optional, please indicate whether it will be included or not. If not indicated it will cause a delay.

10. Specify on application whether the dwelling will have a crawl space, basement or slab.

11. KEEP PLANS OF THE DWELLING ON THE JOB SITE AT ALL TIMES.

12. Get energy package from your architect.

13. Submit statement to the Division of Inspections that applicant has notified the New Jersey Gas Company in regard to excavation for construction.

14. On waterfront lots a soil boring of 20 feet must be submitted by engineer with his seal.

6a. Effective February 9, 1981 all plot plans must contain the following items for approval from Engineering before a building permit can be issued:

1. Width and type of pavement on road in front of proposed building.
2. Proposed method of drainage from the property in question.
3. Proposed garage and first floor elevations.
4. Existing topography on adjacent properties.

6b. All plot plans must show the required yard areas for the particular zone. All yard requirements are shown to the building line. The building line is a line formed by the intersection of a horizontal plane, and a vertical plane that coincides with the most projected exterior surface of the building including eaves and overhangs.

All yard areas facing on a public street shall be considered a front yard and shall conform to the minimum front yard requirements for the particular area. The rear yard shall be deemed to be the area opposite the narrowest lot frontage and the remaining lot yard shall be determined to the side yard.

6c. Indicate type of proposed driveway,

1. Concrete, driveways shall be constructed of (6) inches of 3500 p.s.i. concrete reinforced with 6"x6'-10ga. welded wire mesh
2. Asphalt, driveways shall be constructed of four (4) inches of Type I-5 Gravel and two (2) inches of Type I-5 Bituminous concrete surface course or two (2) inches of Type I-2 Bituminous Concrete base course and two (2) inches of Type I-5 Bituminous Concrete surface course.
3. Gravel, driveways shall be constructed of six (6) inches of Type I-5 Gravel.
4. Stone, driveways shall be constructed of four (4) inches of of stone.

Applicant is required to request inspection by Brick Township Engineering Dept. at least 24 hours prior to installation of Concrete or Asphalt. Note: If area has sidewalks and curbs see engineering standard R-6

All driveways to be constructed on a thoroughly compacted sub-base.