



Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

***This File Contains Personal Identifiable
Information of Private Citizen(s).***

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- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson", is written over a horizontal line.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020



CONSTRUCTION PERMIT APPLICATION

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

C-21-002547

I. IDENTIFICATION

1. Proposed Work Site at: 589 MANTOLOKING RD

2. Name of Owner in Fee: MATCO OCEAN PROPERTIES
 Tel. 920-0100 e-mail _____
 Address 589 MANTOLOKING RD
street municipality zip code

3. Ownership in Fee: ☒ Public ☐ Private ☐ Municipality

4. Principal Contractor: Consta L.D.B. Tel. 920-0100
 Address 589 MANTOLOKING RD e-mail 03211C 08723

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 275096664 FAX: _____

5. Architect or Engineer _____ Contact _____
 Address _____ e-mail _____
 Tel. _____ FAX: _____

6. Responsible Person in Charge once Work has Begun _____
 Tel. _____ FAX: _____

V. FEE SUMMARY (for office use only)		Update	Update
1. Building	\$ <u>180</u>	☒	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee	\$ <u>15</u>		
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>181</u>		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

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. Max. Live Load _____

7. Max. Occupancy Load _____

8. If Industrialized Building: State Approved _____ HUD _____

9. Total Land Area Disturbed _____ sq. ft.

10. Flood Hazard Zone _____

11. Base Flood Elevation _____ ft.

12. Wetlands yes _____ no _____

IIa. PROPOSED WORK

☐ Minor Work ☐ New Building ☐ Addition ☐ Demolition

☐ Repair ☐ Alteration ☐ Renovation ☐ Reconstruction

☐ Asbestos Abat. -Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit

IIb. SUBCODES (Check all that apply)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
☐ Building									
☐ Electrical									
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST	\$0								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____

2. Use Group, Proposed: _____

3. Change in Use Group, Indicate Present: _____

4. No. of dwelling units: Total Units Income-restricted

Gained, Sale _____

Gained, Rental _____

Lost, Sale _____

Lost, Rental _____

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: _____

2. Use Group, Proposed: _____

3. Change in Use Group, Indicate Present: _____

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:

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 Preventers

6. ☐ Hazardous Uses/Places of Assembly

7. ☐ Sprinklers/Standpipes

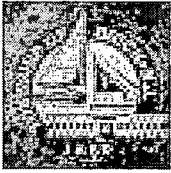
8. ☐ Smoke Control Systems in Open Wells

9. ☐ Underground Storage Tanks

10. ☐ Swimming Pools, Spas and Hot Tubs

11. ☐ LPGas Tanks

12. ☐ Fire Alarm



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 07/15/2021
Control Number C-21-002547
Permit Number 21-1791
Permit Issue Date 07/01/2021
Certificate Number 21-1791

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 589 MANTOLOKING RD. Brick Township, NJ Block: 646.09 Lot: 1 Qual: _____
Owner in Fee: MATCO OCEAN PROPERTIES LLC
Owner Address: 589 MANTOLOKING RD BRICK NJ 08723
Telephone: (732) 920-0100
Contractor Coastal Design & Build
Address 589 Mantoloking Rd. Brick NJ 08723
Telephone: (732) 920-6770 Fax: (732) 920-1400 Federal Emp. Number: 27-5096664
License Number or Builders Registration Number: _____
Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private
Use Group: B Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: SERVICE

Certificate Comments:

☐ **Certificate of Occupancy**

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

☒ **Certificate of Approval**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **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.

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

Daniel Newman Jr

Construction Official

Date Printed: 07/15/2021

U.C.C. F260 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1



CONSTRUCTION PERMIT

Date Issued 07/01/2021
Control # C-21-002547
Permit # 21-1791

IDENTIFICATION Block: 646.09 Lot: 1 Qualifier _____
Work Site Location: 589 MANTOLOKING RD. Brick Township, NJ Contractor Coastal Design & Build
Address 589 Mantoloking Rd. Brick NJ 08723
Owner in Fee MATCO OCEAN PROPERTIES LLC
589 MANTOLOKING RD BRICK NJ 08723 Telephone: (732) 920-6770
Lic. No. or Bldrs. Reg. No. 13VH06560300 044934
Telephone: (732) 920-0100 Federal Employee No. 27-5096664

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:

SERVICE

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 \$500

David F. Naiman
Construction Official

7/1/21
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$180
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$181
Check No.	1227
Cash	\$0
Credit	\$0
Collected By	Matthew Fagen

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.

MUNICIPALITY Bloom



CUT-IN-CARD

LOCATION 589 Main Street

UTILITY CO

NR 349 072 852 BLK 646.05 LOT 1

OWNER MATEO GARCIA OCCUPANT

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

☐ FINAL ☐ TEMPORARY This approval void after days

DESCRIPTION OF SERVICE 200 AMP 3^{PH}

INSTALLED BY ROBERT BLE LICENSE NO 15280

DATE 7/2/21 PERMIT # 21-1791 INSPECTOR [Signature]

☐ CALLED IN 1/1

Lic. No: 5151



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 646.09 Lot 1 Qualification Code 589
Work Site Location 589 Mantoloking NJ 08723

Owner in Fee: Matco Ocean Properties
Tel. 932 920 0100 e-mail

Address 589 Mantoloking Rd

Contractor: Romeo's Electric LLC Tel. (732) 606-3887

Address 514 Drumpoint Rd. e-mail

Brick NJ 08723

Contractor License No. 18288 Exp. Date 3/24

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. 822523628 FAX: ()

B. ELECTRICAL CHARACTERISTICS

Use Group Present DRP 349072-PSB Proposed

[] Pole/Pad # [] Temporary [] Other

Building Occupied as \$ 500 Utility Co.

Est. Cost of Elec. Work \$ 500

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	INSPECTIONS
	Dates (Month/Day)
[] No Plans Required	Type: Failure Failure Approval Initial
[] Partial -Underslab Utilities Approved	Rough
Date: Approved by:	Barrier-Free
[] Electric Plans Approved	Trench
Date: Approved by:	Temp. Serv.
Joint Plan Review Required:	Constr. Serv.
[] Bldg. [] Plumb. [] Fire. [] Elev.	TCO
SUBCODE APPROVAL for PERMIT	Other
Date: Approved by:	Service
SUBCODE APPROVAL for CERTIFICATE	Final
[] CO [] CCO [] CA	Barrier-Free
Date: <u>7.9.21</u>	Temp. Cut-in-Card Date Issued
Approved by: <u>MM</u>	Final Cut-in-Card Date Issued
	Annual Pool Inspection
	Date of Grounding and Bonding Certification

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.

Applicant sign/Contractor sign and seal here:

Print name here: Anthony Romeo

☒ Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Replace overhead conductors

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	\$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge \$

* * * Communication Result Report (Jul. 2. 2021 12:19PM) * * *

1}
2}

Date/Time: Jul. 2. 2021 12:19PM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
0089 Memory TX	918889149140	P. 1	OK	

Reason for error

E. 1) Hang up or line fail
 E. 3) No answer
 E. 5) Exceeded max. E-mail size

E. 2) Busy
 E. 4) No facsimile connection
 E. 6) Destination does not support IP-Fax

Brick Township
 Building Department (732) 262-1030
 MUNICIPALITY Brick Township
 LOCATION 580 HANCOCK ST NJ 08901 UTILITY CO
Brick Township, NJ BLK 64503 LOT 1
 OWNER MATCO OCEAN PROPERTIES LLC OCCUPANT MATCO OCEAN PROPERTIES LLC



DRIVER # 345072658
CUT-IN-CARD

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

☒ FINAL ☐ TEMPORARY This approval valid after days
 DESCRIPTION OF SERVICE 200 amp 3 phase meter reset
 INSTALLED BY BOVENS ELECTRIC LLC LICENSE NO. 345801828999
 DATE 7/2/2021 PERMIT # 21-5781 INSPECTOR Thomas Olson
☐ FAXED IN 7/2/2021 Lic. No. 5151

U.S.G. Form 1308 sq.ft. 1 WHITE UTILITY 1 CANNY OFFICE 1 3 PAGES OFFICE CONTRACTOR

Brick Township
Building Department (732) 262-1030



DRIVER # 349072858

CUT-IN-CARD

MUNICIPALITY Brick Township

LOCATION 589 MANTOLOKING RD.

UTILITY CO _____

Brick Township, NJ

BLK 646.09

LOT 1

OWNER MATCO OCEAN PROPERTIES LLC OCCUPANT MATCO OCEAN PROPERTIES LLC

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

☒ FINAL

☐ TEMPORARY

This approval void after _____ days

DESCRIPTION OF SERVICE 200 amp 3 phase meter reset

INSTALLED BY ROMEO'S ELECTRICAL LLC LICENSE NO 34EB01828800

DATE 7/2/2021 PERMIT # 21-1791 INSPECTOR Thomas Olson

☐ FAXED IN 7/2/2021

Lic. No: 5151

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR