

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 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 Coffey Bros, Inc.

Address 289 Hwy 33

Manalapan NJ 07726

Telephone (732) 792-0100

Signature [Signature]

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

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	Other
Building _____	Energy _____	
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. _____	_____	_____	_____

Mr. Daniels



CONSTRUCTION PERMIT

Date Issued 10-10-97
Control #
Permit # 3131-97

IDENTIFICATION Block 701 Lot 8.01

Work Site Location Job Chambers bldg NW Contractor C. F. E. Bros

Address 289 Hwy 33

Owner in Fee Mr. Daniels Corp. Address 10110 N. Hwy 33

Address 10110 N. Hwy 33 Tele. ()

Tele. () Lic. No. or Bldrs. Reg. No. 22 00945 Exp. Date

Federal Emp. No. 22 00945 or Social Security No. 3131 BR

is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER

☐ ELECTRICAL ☐ FIRE PROTECTION

☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Roof

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 \$ 18,000

PAYMENTS (Office Use Only)		701 #
Building	<u>460</u>	0.00
Plumbing		0.00
Electrical		0.00
Fire Protection		0.00
Other		0.00
Other		0.00
DCA Training Fee	<u>147.00</u>	0.00
Cert. of Occ.	<u>10/10/97</u>	0.00
Other	<u>NO. 5</u>	0.00
Total	<u>414</u>	0.00
Check No.		
Cash		
Collected By:	<u>A. J. J.</u>	

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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
Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

If you do not understand any of this information, please ask.

10/10/97
3/31-97

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

Block 701 Lot 801
Work Site Location Mc Donalds @ RT 30 & Chambers bridge Rd
Owner in Fee Mc Donalds Corp
Address Cross Roads Dr
Bedminster NJ
Tele. () 609 833 1500
Contractor Coffey Bros, Inc.
Address 289 Hwy 33
Manahattan, NJ 07726
Tele. 732 792 0100
Lic. No. or Bids. Reg. No. 22-2200935 or Social Security No. _____

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

Tear off & new modified roof

B. BUILDING CHARACTERISTICS

Use Group _____ Present _____ Proposed _____
Constr. Class _____ Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ 13,510
2. Alteration \$ 13,510
3. Total (1+2) \$ 27,020

JOB SUMMARY (Office Use Only)		INSPECTIONS	
PLAN REVIEW	Date Initial	Type:	Failure
☒ No Plans Req.	10-10-97 PM	Footings	_____
☐ All		Foundation	_____
☐ Footing		Slab	_____
☐ Foundation		Frame	_____
☐ Frame		Insulation	_____
☐ Other		Finishes:	_____
Joint Plan Review Required:		Energy	_____
☐ Elec. ☐ Plumb. ☐ Fire		Mechanical	_____
SUBCODE APPROVAL		TCO	_____
☐ CO ☐ CCO ☐ CA		Other	_____
Date: _____		Final	_____
Approved By: _____			

TYPE OF WORK		(Office Use Only)	
DESCRIPTION	DATE	FEE	
☐ New Building			
☐ Addition			
☐ Alteration			
☐ Repairs			
☐ Siding			
☐ Fence			
☐ Sign			
☐ Pool			
☐ Asbestos Abatement			
☐ Other			
☐ Other			
☐ Demolition			

Paid ☐ Check # _____	Administrative Surcharge	\$ _____
Collected by: _____	Minimum Fee	\$ _____
	DCA TRAINING FEE	\$ _____
	TOTAL FEE	\$ _____

USE BUILDING SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

10/10/97
3/13/97
460-

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

Block 701 Lot 801
Work Site Location Mc Donalds 1101 Fwy 345 2000 Mc Donalds Bridge Rd
Owner in Fee Mc Donalds Corp
Address 1 Cross Roads Dr
Bedminster NJ
Tele: () 609 792-0160
Contractor Coffey Bros., Inc.
Address 289 Hwy 33
Manahattan, NJ 07240
Tele: 732 792-0160
Lic. No. or Bids. Reg. No. 22-22009345 or Social Security No. 122
Federal Emp. No. 22-22009345

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☒ No Plans Req.	10-10-97	FM	Type:	Failure	Approval
☐ All			Footings		
☐ Footing			Foundation		
☐ Foundation			Slab		
☐ Frame			Frame		
☐ Other			Insulation		
Joint Plan Review Required:			Finishes:		
☐ Elec. ☐ Plumb. ☐ Fire			Energy		
SUBCODE APPROVAL			Mechanical		
☐ CO ☐ CCO ☐ CA			TCO		
Date:			Other		
Approved By:			Final		

B. BUILDING CHARACTERISTICS

Use Group Present 1 Proposed 1 Est. Cost of Bldg. Work: 13,510
Constr. Class Present 1 Proposed 1
No. of Stories 1
Height of Structure 13.510 Ft.
Area—Largest Floor 13.510 Sq. Ft.
New Bldg. Area/All Floors 13.510 Sq. Ft.
Volume of New Structure 13.510 Cu. Ft.
Total Land Area Disturbed 13.510 Sq. Ft.

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
Tear off & new asphalt roof

TYPE OF WORK:

☒ New Building
☐ Addition
☐ Alteration
☒ Roofing
☐ Siding
☐ Fence
☐ Sign
☐ Pool
☐ Asbestos Abatement
☐ Other
☐ Demolition

Height (6' or over)
Sq. Ft.

(Office Use Only)
FEE

Administrative Surcharge \$
Minimum Fee \$
DCA TRAINING FEE \$
TOTAL FEE \$