



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".

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

I. IDENTIFICATION

1. Proposed Work Site at: 1568 Route 88

2. Name of Owner in Fee: Leon Rothkopf Partnership LP
 Tel: 305-586-1646 e-mail _____
 Address: 3910 Little Av Colount Grove Fl
 street municipality zip code

3. Ownership in Fee: Public ☒ Private ☒

4. Principal Contractor: FRANK LURCH DEMO Tel: 732-7409814
 Address: 515 MAIN STREET e-mail _____
Avon by the Sea, NJ 07717

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

Home Improvement Contractor Registration No. or Exemption Reason 13VH07402500

Federal Emp. ID No. 223760720 FAX: 732-988-8815

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

6. Responsible Person in Charge once Work has Begun FRANK LURCH
 Tel. 732-7409814 FAX: 732-988-8815

V. FEE SUMMARY (for office use only)

	Update	Update
1. Building		
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		
10. Subtotal		
11. Cert. of Occupancy		
12. Other		
13. TOTAL	\$ <u>150</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. B ☐ 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	<u>1000</u>								
☐ Elevator									
TOTAL COST	<u>1000</u>								

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)

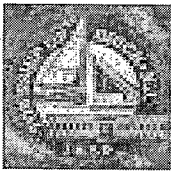
DO YOU WANT:

1. ☐ Partial Releases

2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks	4. ☐ Refrigeration Systems	8. ☐ Smoke Control Systems in Open Wells	12. ☐ Fire Alarm
2. ☐ High Pressure Boilers	5. ☐ Cross-Connections/Backflow Preventers	9. ☐ Underground Storage Tanks	
3. ☐ Pressure Vessels	6. ☐ Hazardous Uses/Places of Assembly	10. ☐ Swimming Pools, Spas and Hot Tubs	
	7. ☐ Sprinklers/Standpipes	11. ☐ LPGas Tanks	



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 1/28/2021
Control Number C-20-004291
Permit Number 20-3042
Permit Issue Date 12/29/2020
Certificate Number 20-3042

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 1568 ROUTE 88 Brick Township, NJ Block: 1171 Lot: 2 Qual: _____
Owner in Fee: LEON ROTHKOPF PARTNERSHIP LP
Owner Address: %FALOWITZ 3910 LITTLE AVE COCONUT GROVE FL 33133
Telephone: (305) 586-1646
Contractor Frank Lurch Demolition Company
Address 515 Main St. Avon By The Sea NJ 07717
Telephone: (732) 988-8814 Fax: _____ Federal Emp. Number: _____
License Number or Builders Registration Number: _____
Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private
Use Group: U Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: TANK REMOVAL - ...UST

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:

Denise Newman Jr.

Construction Official
Date Printed: 1/28/2021

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

Fee: \$0.00
Check Number: _____
Collected By: _____



FIRE PROTECTION 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 1171 Lot 2 Qualification Code _____

Work Site Location 1568 Route 58

Brick

Owner in Fee: Leon Rothkopf Partnership LP

Tel. (305) 586-1646 e-mail _____

Address Edgewater 3910 Littleton Coconut Grove Fl

Contractor: EMA Tel. (_____) _____

Address 5303 Route 33/34 e-mail _____

Farmingdale NJ 07727

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____

Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____

Fire Alarm Contractor No. _____ Exp. Date _____

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

Federal Emp. ID No. _____ FAX: (_____) _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____ **Fuel Storage Tank:**

Constr. Class: Present _____ Proposed _____ Fuel Type: ☒ Flammable or ☐ Combustible

Capacity _____ **Heating System:** ☐ New OR ☐ Modification to Existing

OR ☐ Conversion OR ☐ Replacement **Fire Alarm System:** ☐ New OR ☐ Existing

Fuel Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar **Fire Suppression/Standpipe System:**

Other _____ ☐ New OR ☐ Existing

Location: _____ Location of Main Control Valve: _____

Total Cost of Fire Protection Work \$ 1000

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
☐ No Plans Required	Alarm System				
☐ Partial - Underslab Utilities Approved	Suppression Sys.				
Date: _____ Approved by: _____	Standpipe				
☐ Fire Protection Plans Approved	Fire Pump				
Date: _____ Approved by: _____	Pre-Eng. System				
Joint Plan Review Required:	Mechanical				
☐ Bldg. ☐ Elec. ☐ Plumb. ☐ Elev.	Smoke Control				
SUBCODE APPROVAL for PERMIT	TCO				
Date: _____ Approved by: _____	Flam/Combust Tanks				
SUBCODE APPROVAL for CERTIFICATE	Fireplace Venting				
☐ CO ☐ CCO ☐ CA	Final				
Date: <u>1/14/21</u>	Other				
Approved by: _____					

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.

Applicant sign/Contractor sign and seal here: _____

Print name here: Frank Lurch

D. TECHNICAL SITE DATA

☐ Certified Contractor ☐ Exempt Applicant

DESCRIPTION OF WORK: LIST Removal
 Water Supply Source Under house
 Method of Alarm/Suppression System Supervision _____

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks	_____	\$ _____
Alarm Systems		
☐ System	_____	
☐ 110v Interconnected	_____	
☐ CO Detectors/110v	_____	
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	_____	
Supervisory Devices (i.e., tampers, low/high air)	_____	
Signaling Devices (i.e., horn/strobes, bells)	_____	
Other Devices	_____	
TOTAL	_____	
Suppression Systems		
Fire Pump _____ GPM Type _____	_____	
Dry Pipe/Alarm Valves	_____	
Pre-action Valves	_____	
Sprinkler Heads (Dry and Wet)	_____	
Standpipes	_____	
Pre-engineered Systems		
Wet Chemical	_____	
Dry Chemical	_____	
CO ₂ Suppression	_____	
Foam Suppression	_____	
FM200 Suppression	_____	
Other	_____	
Other Systems		
Kitchen Hood Exhaust System	_____	
Smoke Control System	_____	
Fuel-Fired Appliances ☐ Gas ☐ Oil ☐ Solid	_____	
Fireplace Venting/Metal Chimney	_____	
Other	_____	

Under of house - middle

House demo'd

Full visual inspection

Documents Attached 1/12/21

Administrative Surcharge \$ _____
 Minimum Fee \$ _____
 State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

Lorco Petroleum Services
450 South Front St., Elizabeth, NJ 07202
(800) 734-0910 • FAX: (908) 820-8412
www.lorcopetroleum.com



STRAIGHT BILL OF LADING

RECYCLING AMERICA'S USED OIL SINCE 1957
EPA ID NUMBER NJR000023036

B/L No. 1606340

GENERATOR/SHIPPER

SALES ORDER #

NAME: Frank Lorch Demolition
INFORMATION/ATTENTION LINE: ACCOUNT APPROVAL CODE

DELIVERY ADDRESS: 1568 Rt 88
CITY: Brick STATE: NJ ZIP: 08724
PHONE NUMBER: PURCHASE ORDER NUMBER

BILL TO (IF DIFFERENT FROM GENERATOR)

NAME: Frank Lorch Demolition
INFORMATION/ATTENTION LINE: ACCOUNT APPROVAL CODE

DELIVERY ADDRESS: 515 Main St
CITY: Avon By The Sea STATE: NJ ZIP: 07717
TIME IN: TIME OUT

SHIPPING INFORMATION

Designated Facility Name and Site Address: LORCO PETROLEUM SERVICES
450 SOUTH FRONT STREET
ELIZABETH, NJ 07202
Transporter 1 Company Name: LORCO PETROLEUM SERVICES
TRUCK #: 173 DECAL #: 410729
TRAILER #: DECAL #: EMERGENCY RESPONSE PHONE NO. 1-800-255-3924
Contract # MIS1482273

NO. SHIPPING UNITS	HM	US DOT DESCRIPTION	QUANTITY	UNIT WT/VOL	ITEM #	UNIT PRICE	PRICE	TAX	LINE TOTAL
	X	UN 1203 GASOLINE MIXTURE, 3, PGII		GAL	40500				
	X	UN 1993 FUEL OIL, 3, PGIII		GAL	40300				
		USED OIL NON-DOT REGULATED MATERIAL	250	GAL	40400	1400.00	350.00	19.85	319.85
		USED ANTIFREEZE NON-DOT REGULATED MATERIAL		GAL	41100				
		OILY WATER NON-DOT REGULATED MATERIAL		GAL	41000				
		OILY SLUDGE NON-DOT REGULATED MATERIAL		GAL	40500				
		NEW 55 GAL DRUMS / 1A2			40611				
		OIL WATER SEPARATOR SERVICE			40515				
		TANK WASHER			41513				
		TANK ENTRY			41507				
		TRANSPORTATION			41500				
		TRUCK AND OPERATOR			41508				
		ADDITIONAL LABOR			41514				
		DRUM DISPOSAL		LB	40900				

DISCREPANCY INDICATION SPACE

TOTAL

319.85

FACILITY

PRINT/TYPE NAME: SIGNATURE: MONTH DAY YEAR

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to applicable regulations of the Department of Transportation.

GENERATOR WARRANTS AND REPRESENTS THAT THE MATERIALS PROVIDED LORCO HEREUNDER HAVE NOT BEEN MIXED, COMBINED, OR OTHERWISE BLENDED IN ANY QUANTITY WITH MATERIALS CONTAINING POLYCHLORINATED BIPHENYLS (PCB) OR ANY OTHER MATERIAL DEFINED AS HAZARDOUS WASTE UNDER APPLICABLE LAWS, INCLUDING BUT NOT LIMITED TO 40 CFR PART 261. GENERATOR AGREES TO INDEMNIFY AND HOLD LORCO HARMLESS FOR ANY DAMAGES, COSTS, ATTORNEY'S FEES, ETC. ARISING OUT OF OR IN ANY WAY RELATED TO A BREACH OF THE ABOVE WARRANTY BY THE GENERATOR.

Generator certifies that the material is ☒ used oil ☐ used antifreeze

☐ oily water ☐ oil filters ☐ parts washer solvent ☐ Other

☐ Compartment #1 - ☐ #2 ☒ #3 ☐ #4

In accordance the N.J.A.C. 7:26-12.1 et seq. LORCO has the required permits to accept the above described material.

X
Print Name: Title
X
Signature: Date: 1/17/2000
GENERATOR/SHIPPER

CONDITIONALLY EXEMPT SMALL QUANTITY GENERATOR CERTIFICATION

I certify that this generator generates less than 100 kilograms of hazardous waste per month, as defined at 40 C.F.R. 261, and does not accumulate more than 1,000 kilograms of such waste during the month.

X
GENERATOR'S SIGNATURE

NON CONDITIONALLY EXEMPT LARGE QUANTITY GENERATOR CERTIFICATION

DEXSIL CDT TEST RESULTS

X PPM

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT SECTION. INVOICES REFLECTING CHARGES TO CUSTOMERS ARE SUBJECT TO AN INTEREST RATE OF THE LESSER OF 1 1/2% PER MONTH (18% PER ANNUM) OR THE MAXIMUM RATE ALLOWED BY LAW ON ANY INVOICES THAT ARE NOT PAID WITHIN 30 DAYS. IN THE EVENT OF DEFAULT, LORCO SHALL BE ENTITLED TO RECOVER COSTS OF COLLECTION, INCLUDING REASONABLE ATTORNEY'S FEES. INITIAL

PAYMENT RECEIVED SECTION

CASH ☐ TOTAL RECEIVED
CHECK NUMBER: 319.85 / V19 CC

In accordance with NJAC7:26-6.7b + 40CFR PART 279 LORCO has notified the US EPA of its location and used oil management activities.

X Erik C. Talkovich
Print Name: Signature: Date: 1/17/2000
LORCO REPRESENTATIVE

Phone: 732 938-5331

Fax: 732 919-1912

Purchase Ticket John Blewett Inc

246 Herbertsville Rd
Howell, NJ 07731

20 3082

117 2

37545
FRANK LURCH DEMOLITION
515 MAIN STREET
AVON, NJ 07717

January 07, 2021

Ticket# 528310

Weight 780

Total \$78.00

Driver:

Description: GREEN ROLLOFF

Notes:

Truck#:

Container In:

Other:

Container Out:

Vehicle Tag: XH784X

Commercial Ticket - Number: 528310

Commodity	Gross	Tare	Tare2	Deduct	Net UM	Price	Total
#1 STEEL-OIL TANK	9,420	8,640			780 C	10.0000	78.00
AVC	9,420	8,640			780		78.00

Oil Tank

1568 Route 88
Brick



CONSTRUCTION PERMIT

Date Issued 12/29/20
Control # C-20-004291
Permit # 20-3042

IDENTIFICATION Block: 1171 Lot: 2 Qualifier _____
Work Site Location: 1568 ROUTE 88 Brick Township, NJ Contractor Frank Lurch Demolition Company
Address 515 Main St. Avon By The Sea NJ 07717
Owner in Fee LEON ROTHKOPF PARTNERSHIP LP
%FALOWITZ 3910 LITTLE AVE COCONUT Telephone: (732) 988-8814
GROVE FL 33133 Lic. No. or Bldrs. Reg. No. US00712 13VH07402500
Telephone: (305) 586-1646 Federal Employee No. _____

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:

TANK REMOVAL - UST

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 \$1,000

D. Neuman
Construction Official

12/29/20
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	\$0
Plumbing	\$0
Fire Protection	\$150
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$150
Check No.	
Cash	\$0
Credit	\$0
Collected By	

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:

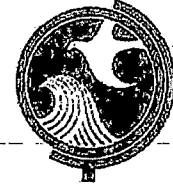
☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; 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.



STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION



Certifies That

ENVIRONMENTAL MANAGEMENT ASSOCIATES INC
5303 RT 33/34
Farmingdale, NJ 07727

*Having duly met the requirements of the
Underground Storage Tank Certification Program
N.J.S.A. 58:10A-24.1-8*

Is hereby approved to perform the following services:

CLOSURE
INSTALLATION-ENTIRE UST SYSTEM
SUBSURFACE EVALUATION
TANK TESTING

US00712
CERTIFICATION NUMBER

TO BE CONSPICUOUSLY DISPLAYED AT THE FACILITY

Township of Brick

OIL TANK REMOVAL CHECKLIST

REVISED 02/11/15

1. Construction Jacket signed & completed – Front and inside the jacket filled out completely	Yes <u>X</u>	No <u> </u>
2. Fire sub-code form to be completed – note where the oil tank location; front yard, back yard, etc.	Yes <u>X</u>	No <u> </u>
3. Tank abatement or asbestos notification form to be completed	Yes <u>X</u>	No <u> </u>

USEFUL TIPS:

- Homeowners **cannot** install, abandon or service **underground** oil tanks at their own homes unless they are certified by NJDEP.
- Homeowners are able to install, abandon or service **above ground** oil tanks at their own homes. NJDEP regulations do not include above ground oil tanks.
- A copy of the NJDEP certification must be included with the permit application. The certification will indicate which activities an individual or firm are certified to perform.
- Failure to have the proper certification type will be a cause for denying the permit.