BLOCK 565 LOT 1,2 QUALIFICATION CODE _____ ADDRESS (SITE) 2597 OLD HOOPER AVE PERMIT NO. 04-0093

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

c91.56

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

I. IDENTIFICATION

1. Propsed Work Site at: 2597 OLD HOOPER AVE
2. Name of Owner in Fee: KRISTI-SHAY CONSTRUCTION Tel. (732) 477-4665
   Address 63 CHANNEL DR (street) BRICK (municipality) NJ 08723 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: KRISTI-SHAY CONSTRUCTION Tel. (732) 477-4665
   Address 63 CHANNEL DR BRICK NJ 08723
   License No. OR, if new home, Builder Reg. No. 26379 Exp. Date 11/04
   Federal Employee No. 22-3528480 FAX: (732) 477-9115
5. Architect or Engineer KEN LEWICKI Tel. (732) 295-4515
   Address 1100 RT 88 POINT PLEASANT NJ 08742
6. Responsible Person in Charge of Work SAM REYNOLDS
   Tel. (732) 477-4665 FAX (732) 477-9115

ADDITION AFTER COMMERCIAL

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 128		
2.	Electrical	115		
3.	Plumbing	125		
4.	Fire Protection	81		
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	500		
9.	DCA Training Fee	45		
10.	Subtotal			
11.	Cert. of Occupancy	25		
12.	Other	30		
13.	TOTAL	$ 1357		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories 2	
2.	Height of Structure 25' ft.	
3.	Area — Largest Floor 956 sq. ft.	
4.	New Building Area 0 sq. ft.	
5.	Volume of New Structure 7648 cu. ft.	
6.	Construction Classification 5B	
7.	Total Land Area Disturbed 0 sq. ft.	
8.	Flood Hazard Zone NO	
9.	Base Flood Elevation _____ ft.	
10.	Wetlands yes _____ no _____	
11.	Max. Live Load _____	
12.	Max. Occupancy Load _____	

II. PROPOSED WORK

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work									
2.	☐ New Building		11/14			12-16-03	PM			
3.	☒ Addition	20,000.	JF							
4.	☒ Alteration	10,000.								
5.	☒ Fire Protection	500.00				1-2-04	TO			
6.	☒ Plumbing	2000.00			12-18-03	12/18/03	BM			
7.	☒ Electrical	2500.00				12-17-03	TO			
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition		GW	12/9/03		12/9/03				
	TOTAL COSTS	35,000*								

OPTIONAL (for office use only)

III. DO YOU WANT: (optional)

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:
Before Construction BAIT SHOP
After Construction CONSTRUCTION O
Net Gain or Loss 0

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group: B
3. Change in Use Group, Indicate Former:

IMPORTANT COMMERCIAL FILE

Called 1/2/04

LDS BR 10100250

U.C.C. F100-1 (rev. 3/96)

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 KRISTI-SHAY CONSTRUCTION

Address 63 CHANNEL DR

BRICK NJ 08723

Telephone (732) 477-4665

Signature Sean Reynolds

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			
Building	_____	Energy	_____	Other	_____
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. _____	_____	_____	_____	_____

Constituent Contact Report

Date	Comments	Initials

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 03/26/2004
Control #
Permit # 04-0093

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee/Occupant KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Telephone (732)477-4665
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4665 Fax ( )
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

Home Warranty No. N/A
Type of Warranty Plan: [ ] State [X] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

1ST FLR RENOVATION
2ND FLR ADDITION

[X] 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 CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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 OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ___ or the owner will be subject to fine or order to vacate:

[ ] 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 _____, ___.

CONSTRUCTION OFFICIAL

Fee $ 35
Paid [X] Check No. 13175/80
Collected by: MJR

U.C.C. F260 (rev. 3/96) NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 03/26/2004
Control #
Permit # 04-0093

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee/Occupant KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Telephone (732)477-4665
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4665 Fax ( )
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

Home Warranty No. N/A
Type of Warranty Plan: [ ] State [X] Private
Use Group R-5
Maxiaum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

1ST FLR RENOVATION
2ND FLR ADDITION

[X] CERTIFICATE OF OCCUPANCY
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniforo Construction Code and is approved for occupancy.

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was perforoed as per NJAC 5:17, to the following extent:
[ ] Total reaoval of lead-based paint hazards in scope of work
[ ] Partial or liaited tiae period (___ years); see file

[ ] CERTIFICATE OF APPROVAL
This serves notice that the work coapleted has been constructed or installed in accordance with the New Jersey Uniforo Construction Code and is approved.
If the peroit was issued for ainor work, this certificate was based upon what was visible at the tiae 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 iaoinent hazards and the building is approved for continued occupancy.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Teaporary Certificate of Occupancy or Coapliance, the following conditions aust be aet no later than _____, ___ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF COMPLIANCE
This serves notice that said potentially hazardous equipaent has been installed and/or aaintained in accordance with the New Jersey Uniforo Construction Code and is approved for use until _____, ___.

CONSTRUCTION OFFICIAL

Fee $ 35
Paid [X] Check No. 13175/80
Collected by: MJR

U.C.C. F260 (rev. 3/96) NJ UCCARS 5.24E

"Kristi Shay Office" 04-0093

CERTIFICATE OF APPROVAL FOR TENNANT FIT UP AND COMMERCIAL

Location 2597 Hooper Ave Block 565 Lot 1

Final Inspections needed if applicable as follows:

1. Final Building
2. Final Plumbing
3. Final Electric
4. Final Fire
5. Certificate of Compliance BTMUA
6. Final Engineering
7. Ocean County Soil
8. Affordable Housing

Report of Compliance from Ocean County Soils needed when; more than 5000 sq ft are disturbed. NEW COMMERCIAL Building that have been approved by PLANNING BD or BD OF ADJUSTMENT always need soil report.

FINALS	FINALS	FINALS
BUILDING	APPROVED	3/23/04 OK
PLUMBING	APPROVED	3/17/04 OK
FIRE	APPROVED	3/22/04 OK
ELECTRIC	APPROVED	3/22/04 OK
ENGINEERING	APPROVED	n/a @ per Engineering
O.C.SOIL	APPROVED	3/11/04 OK

COMMERCIAL OCCUPANCY CARD.....

C.C. FROM B.T.M.U.A. 3/16/04 OK

CALL THE WATER CO. BTMUA 458-7000 EXT. 224 OR 225 ASK WHETHER A C.C. IS NEEDED.

AFFORDABLE HOUSING 2/24/04 OK

ALL COMMERCIAL APPLICATIONS MUST BE REVIEWED BY AFFORDABLE HOUSING BEFORE A C/A OR C/O IS ISSUED. SECOND HALF OF PAYMENT IS DUE AT THIS TIME.

TOWNSHIP OF LAKEWOOD
Department of Inspections
212 4th Street
LAKEWOOD, NJ 08701
(908) 364-3760

APPLICATION FOR CERTIFICATE

Date Received
Date Permit Issued
Control #
Permit #
Date Issued

IDENTIFICATION

Block [redacted] 565 Lot 1, 2
Work Site Location 2597 OLD HOOPER

Owner in Fee KRISTI-SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK NJ 08723
Tele. (732) 477-4665

Contractor KRISTI-SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK NJ 08723
Tele. (732) 477-4665
Lic. No. 26379
Federal Emp. No. 22-3528180
or Social Security No.

ACTION

☒ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF CONTINUED OCCUPANCY ☐ TEMPORARY CERTIFICATE OF OCCUPANCY
USE GROUP _____ Previous _____ Current

FINAL COST OF CONSTRUCTION: $ 45,000

(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:

OFFICE BLDG

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: _____ OWNER/AGENT

☐ Owner
☒ Agent

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 01/12/2004
Control #
Permit # 04-0093

UCC NEW JERSEY

CONSTRUCTION PERMITE

IDENTIFICATION Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRISTI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Telephone (732)477-4665

Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4665
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

01/12/04 9:57AM 000000#6340
XX02 SERV.002

#0093

BUILDING	$428.00
ELECTRIC	$113.00
PLUMBING	$125.00
FIRE	$81.00
PENALTY	$500.00
DCA	$45.00
C/O	$35.00
ZPA	$15.00
EPA	$15.00
CHECK	$1357.00

Is hereby granted permission to perform the following work:

[X] BUILDING [X] PLUMBING [ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL [X] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
1ST FLR RENOVATION
2ND FLR ADDITION

PAYMENTS (Office Use Only)

Building	428
Electrical	113
Plumbing	125
Fire Protection	81
Elevator Devices	0
Other Penalty	500
DCA State Permit Fee	45
Cert. of Occupancy	35
Other ZPA/EPA	30
Total	1357
Check No.	13175/80
Cash	
Collected By	MJR

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 $ 35,000

Construction Official — Date 01/12/2004

U.C.C. F170 (rev. 3/96) NJ UCCAMS 5.24E

$35.00
$35.00
$70.00

03/26/04 10:53AM 000000#7834
#03 SERV.003
#040093 ELECTRIC
FIRE
CHECK

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 03/26/2004
Control #
Permit # 04-0093+C
Permit Issued 01/12/2004

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE
HWH
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Telephone (732)477-4665

Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Telephone (732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

Is hereby granted permission to perform the following work:

[ ] BUILDING [X] PLUMBING [ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
HWH

PAYMENTS (Office Use Only)

Building	0
Electrical	35
Plumbing	35
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	70
Check No.	13763
Cash	
Collected By	SC

Estimated Cost of Work $ 530

Construction Official

03/26/2004
Date

U.C.C. F190 (rev. 3/96) NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

03/26/2004 10:54AM 00000007835
**03 SERV.003
D040093
ELECTRIC $44.00
***TOTAL $44.00
CASH -44.00
CHANGE $0.00

Update Issued 03/26/2004
Control #
Permit # 04-0093+B
Permit Issued 01/12/2004

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE
COMMUNICATION POINTS
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Telephone (732)477-4665

Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Telephone (732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
COMM PTS/HWH

PAYMENTS (Office Use Only)

Building	0
Electrical	44
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	44
Check No.	
Cash	X
Collected By	SC

Estimated Cost of Work $ 1,000

Construction Official 03/26/2004 Date

U.C.C. F190 (rev. 3/96) NJ UCCARS 5.24E

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/12/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723
Tele.(732)477-4665
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723
Tele.(732)477-4665 Fax ( )
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

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

1ST FLR RENOVATION
2ND FLR ADDITION

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	12-16-03	FW
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date: 3-16-04 OK 3-30-04 CH
Approved By: FW 3-23-04 FW

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type				
Footing				
Foundation				
Slab				
Frame			02/12/04	KEK
BarrierFree				
Insulation-OVER			03/12/04	KEK
Finishes				
Energy				
Mechanical				
CO			OK FOR TEMP	
Other				
Final-OVER 03/12/04			OK 3-16-04	FW
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[X] Addition	428
[ ] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

	Present	Proposed
Use Group		R-5
Constr. Class		
No. of Stories		1
Height of Structure		25 Ft.
Area Largest Floor		216 Sq. Ft.
New Bldg. Area/All Floors		1,030 Sq. Ft.
Volume of New Structure		17,138 Cu. Ft.
Total Land Area Disturbed		0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 20,000
2. Alteration $ 10,000
3. Total (1+2) $ 30,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 428
DCA State Permit Fee	$ 45

Paid [ ] Check #
Collected by:

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

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/13/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665 Fax ( )
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

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

1ST FLR RENOVATION
2ND FLR ADDITION

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	12-16-03	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
[ ] Elev

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type				
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed R-5
Constr. Class Present Proposed
No. of Stories 1
Height of Structure 25 Ft.
Area Largest Floor 216 Sq. Ft.
New Bldg. Area/All Floors 1,030 Sq. Ft.
Volume of New Structure 17,138 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 20,000
2. Alteration $ 10,000
3. Total (1+2) $ 30,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[X] Addition	428
[ ] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 428
DCA State Permit Fee	$ 45

Paid [ ] Check #
Collected by:

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

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/13/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665 Fax ( )
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

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

1ST FLR RENOVATION
2ND FLR ADDITION

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	12-11-03	EMH
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[X] Addition	428
[ ] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present Proposed R-5
Constr. Class Present Proposed
No. of Stories 1
Height of Structure 25 Ft.
Area Largest Floor 216 Sq. Ft.
New Bldg. Area/All Floors 1,030 Sq. Ft.
Volume of New Structure 17,138 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 20,000
2. Alteration $ 10,000
3. Total (1+2) $ 30,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 428
DCA State Permit Fee	$ 45

Paid [ ] Check #
Collected by:

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

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/12/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor ROBERT J MCLAUGHLIN ELEC CON
Address 12 8TH STRET
BARNEGAT, NJ 08005-
Tele.(609)660-0306
Lic. No. or Bldrs. Reg. No. 10990A
Federal Emp. No. 22-3451834

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 12-17-03
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
39		Lighting Fixtures	
50		Receptacles	
17		Switches	
0		Detectors	
0		Light Poles	
1		Motors-Fract HP	
7		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
114		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	9	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 113
	DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 01/12/2004
Control #
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

Check to Contractor 2/6/04

WR 3113011180

B. ELECTRICAL CHARACTERISTICS

Use Group - Present 1 Proposed 1 R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 3 22 04
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			2-12-04	TO
Temp Serv			2-15-04	TO
Const Serv				
TCO				
Other ceiling			3-4-04	TO
Service				
Final	3-1-04		3-22-04	TO

Temp. Cut-in-Card Date Issued 2-15-04
Final Cut-in-Card Date Issued

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
39		Lighting Fixtures	
50		Receptacles	
17		Switches	
0		Detectors	
0		Light Poles	
1		Motors-Fract HP	
7		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
114		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	9	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	113
DCA State Permit Fee	$	0

Paid [X] Check # 13175/80
Collected by: MJR

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2004
Date Issued ~~01/01/1954~~ 3/26/04
Control #
Permit # 04-0093+C

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
HWH
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 230

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[✓] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 3/24/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	0
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
1	2	KW Elect Water Heater	9
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 26
Collected by:	TOTAL FEE	$ 35
	DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 02/17/2004
Date Issued 01/01/1954
Control # 3/26/04
Permit # 04-0093+B

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
COMMUNICATION POINTS
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[-] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 2/18/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
11		Communications Points	
0		Alarm Devices/F.A.C. Panel	
11		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
1	4	KW Elect Water Heater	9
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 44
DCA State Permit Fee $ 0

U.C.C. P120 (rev. 3/96)

UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 02/17/2004
Date Issued 01/01/~~1954~~
Control #
Permit # 04-0093~~+B~~ 3/26/04

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
COMMUNICATION POINTS
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[~~-~~] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 2/15/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
11		Communications Points	
0		Alarm Devices/F.A.C. Panel	
11		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
1	4	KW Elect Water Heater	9
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 44
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 02/17/2004
Date Issued 01/01/~~1954~~
Control #
Permit # 04-0093-~~B~~ 3/26/04

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
COMMUNICATION POINTS
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[~~ ~~] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 2/25/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
11		Communications Points	
0		Alarm Devices/F.A.C. Panel	
11		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
1	4	KW Elect Water Heater	9
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 44
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2004
Date Issued 01/01/1954
Control # 3/26/04
Permit # 04-0093+C

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
HWH
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 230

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[✓] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 3/24/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	0
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
1	2	KW Elect Water Heater	9
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 26
Collected by: TOTAL FEE $ 35
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 01/12/2004
Control #
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 53 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4365
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6335
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2701689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present I Proposed I R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 2/08/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
39		Lighting Fixtures	
50		Receptacles	
17		Switches	
0		Detectors	
0		Light Poles	
1		Motors-Fract HP	
7		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
114		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	9	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

	Administrative Surcharge	$ 0
Paid [X] Check # 13175/80	Minimum Fee	$ 0
Collected by: MJR	TOTAL FEE	$ 113
	DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 01/12/2004
Control #
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present I Proposed I R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By: 1/8/04

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
39		Lighting Fixtures	
50		Receptacles	
17		Switches	
0		Detectors	
0		Light Poles	
1		Motors-Fract HP	
7		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
114		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	9	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [X] Check # 13175/80 Minimum Fee $ 0
Collected by: MJR TOTAL FEE $ 113
DCA State Permit Fee $ 0

U.C.C. P120 (rev. 3/96)

UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 01/12/2004
Control #
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present I Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
39		Lighting Fixtures	
50		Receptacles	
17		Switches	
0		Detectors	
0		Light Poles	
1		Motors-Fract HP	
7		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
114		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	9	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [X] Check # 13175/80 Minimum Fee $ 0
Collected by: MJR TOTAL FEE $ 113
DCA State Permit Fee $ 0

U.C.C. P120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/12/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor ROBERT J MCLAUGHLIN ELEC CON
Address 12 8TH STRET
BARNEGAT, NJ 08005-
Tele.(609)660-0306
Lic. No. or Bldrs. Reg. No. 10990A
Federal Emp. No. 22-3451834

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 12-17-03
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
39		Lighting Fixtures	
50		Receptacles	
17		Switches	
0		Detectors	
0		Light Poles	
1		Motors-Fract HP	
7		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
114		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	9	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 113
	DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARSS.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/12/04
Control # C97-56
Permit # 04-009

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-6665
Contractor ROBERT J MCLAUGHLIN ELEC CO'N
Address 12 8TH STREET
BARNEGAT, NJ 08005-
Tele.(609)660-0306
Lic. No. or Bldrs. Reg. No. 10990A
Federal Emp. No. 22-3451834

B. ELECTRICAL CHARACTERISTICS

Us. Group - Present Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv.				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
39		Lighting Fixtures	
50		Receptacles	
17		Switches	
0		Detectors	
0		Light Poles	
1		Motors-Fract HP	
7		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
114		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	9	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/4 HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 113
	DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/98)

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/12/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3528180

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed R-5
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 500

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required As per Affidavit letter
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 12-02-04
Approved By: JB

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 3-22-04
Approved By: JB

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical			3-15-04	JB
Smoke Ctl				
TCO				
Final	3-22-04	9-15-04	3-19-04	JB
Other				

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:
Water Supply Source
Method of Alarm/Suppr Sys Superv

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	01	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	01	
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other FURNACE		46
Other		0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	81
DCA State Permit Fee	$	0

Paid [ ] Check #
Collected by:

U.C.C. F140 (rev. 3/96)

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/12/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3528180

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed R-5
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 500

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 1-02-04
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

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:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	7	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	7	35
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other FURNACE		46
Other		0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	81
DCA State Permit Fee	$	0

Paid [ ] Check #
Collected by:

U.C.C. F140 (rev. 3/96)

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/12/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3528180

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed R-5
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 500

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

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:
Water Supply Source
Method of Alarm/Suppr Sys Superv

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	7	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	7	35
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other FURNACE		46
Other		0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	81
DCA State Permit Fee	$	0

Paid [ ] Check #
Collected by:

U.C.C. F140 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2004
Date Issued 01/01/1954
Control # 3/26/04
Permit # 04-0093+C

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

Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE
HWH

Owner in Fee KRITI-SHAY CONSTRUCTION

Address 63 CHANNEL DRIVE
BRICK, NJ 08723-

Tele. (732)477-4665

Contractor JEMCO PLG & HTG INC

Address 5 AMY CT
HOWELL, NJ 07731-

Tele. (732)458-4744

Lic. No. or Bldrs. Reg. No. 11191

Federal Emp. No. 22-3816578

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 300

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 3/25/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
1	Water Heater	35
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 35
DCA State Permit Fee $ 0

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

HCG NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 1/12/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor MCCREA P&H
Address 3 WEST BOAT DRIVE
LITTLE EGG HARBOR, NJ 08087-
Tele.(609)812-9488
Lic. No. or Bldrs. Reg. No. 6623
Federal Emp. No. 14-2525862

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 2,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 12-18-03
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date: 3/17/04

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures			3/16/04	
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
1	Hose Bib	10
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other AC	35
	Other	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 125
	DCA State Permit Fee	$ 0

U.C.C. F130 (rev. 3/96)

UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 01/12/2004
Control #
Permit # 04-0093

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

Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE
ADDN/ALTER

Owner in Fee KRITI-SHAY CONSTRUCTION

Address 63 CHANNEL DRIVE
BRICK, NJ 08723-

Tele.(732)477-4665

Contractor JEMCO PLG & HTG INC

Address 5 AMY CT
HOWELL, NJ 07731-

Tele.(732)458-4744

Lic. No. or Bldrs. Reg. No. 11191

Federal Emp. No. 22-3816578

Chg of Contractor

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 2,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date: 1-17-04

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab	2-11-04		2-12-04	
Rough			2-12-04	
Water				
Sewer				
Fixtures	3-17-04		3/16/04	
Gas Equip.				
Gas Piping			2-11-04	
Solar				
TCO			3-27-04	

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
1	Hose Bib	10
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other (AC) previous contractor	35
	Other	0

Administrative Surcharge $ 0
Minimum Fee $ 0
TOTAL FEE $ 125
DCA State Permit Fee $ 0

Paid [X] Check # 13175/80
Collected by: MJR

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.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2004
Date Issued 01/01/1954
Control # 3/26/04
Permit # 04-0093+C

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

Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE
HWH

Owner in Fee KRITI-SHAY CONSTRUCTION

Address 63 CHANNEL DRIVE
BRICK, NJ 08723-

Tele.(732)477-4665

Contractor JEMCO PLG & HTG INC

Address 5 AMY CT
HOWELL, NJ 07731-

Tele.(732)458-4744

Lic. No. or Bldrs. Reg. No. 11191

Federal Emp. No. 22-3816578

B. PLUMBING CHARACTERISTICS

Use Group Present ____ Proposed R-5

Building Sewer Size ____ [ ] Public Sewer [ ] Private Septic

Water Sewer Size ____ [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 300

JOB SUMMARY (Office Use Only)

~~PLAN REVIEW~~
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 3/25/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
1	Water Heater	35
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 35
DCA State Permit Fee $ 0

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2004
Date Issued 01/01/1954
Control # 3/26/04
Permit # 04-0093+C

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
HWH
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor JEMCO PLG & HTG INC
Address 5 AMY CT
HOWELL, NJ 07731-
Tele.(732)458-4744
Lic. No. or Bldrs. Reg. No. 11191
Federal Emp. No. 22-3816578

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 300

JOB SUMMARY (Office Use Only)

~~PLAN REVIEW~~
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 3/25/04
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
1	Water Heater	35
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: TOTAL FEE $
DCA State Permit Fee $

U .20 (LBA: 3/dp)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 11/21/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual
Work Site Location 2597 HOOPER AVE
ADDN/ALTER
Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor MCCREA P&H
Address 3 WEST BOAT DRIVE
LITTLE EGG HARBOR, NJ 08087-
Tele.(609)812-9488
Lic. No. or Bldrs. Reg. No. 6823
Federal Emp. No [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 2,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 12-18-03
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
1	Hose Bib	10
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other AC	35
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 125
DCA State Permit Fee $ 0

U.C.C. F130 (rev. 3/96)

UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 01/12/2004
Control #
Permit # 04-0093

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

Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE
ADDN/ALTER

Owner in Fee KRITI-SHAY CONSTRUCTION

Address 63 CHANNEL DRIVE
BRICK, NJ 08723-

Tele.(732)477-4665

Contractor JEMCO PLG & HTG INC

Address 5 AMY CT
HOWELL, NJ 07731-

Tele.(732)458-4744

Lic. No. or Bldrs. Reg. No. 11191

Federal Emp. No. 22-3816578

Orig OD Contractor

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 2,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
1	Hose Bib	10
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping — 40' chart	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other (AC) Previous Contractor	35
	Other	0

	Administrative Surcharge	$ 0
Paid [X] Check # 13175/80	Minimum Fee	$ 0
Collected by: MJR	TOTAL FEE	$ 125
	DCA State Permit Fee	$ 0

3/4" WATER

U.C.C. F130 (rev. 3/96)

UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 01/12/2004
Control #
Permit # 04-0093

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

Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE
ADDN/ALTER

Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665

Chg of Contractor

Contractor JEMCO PLG & HTG INC
Address 5 AMY CT
HOWELL, NJ 07731-
Tele.(732)458-4744
Lic. No. or Bldrs. Reg. No. 11191
Federal Emp. No. 22-3816578

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 2,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
1	Hose Bib	10
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other (AC) Previous Contractor	35
	Other	0

	Administrative Surcharge	$ 0
Paid [X] Check # 13175/80	Minimum Fee	$ 0
Collected by: MJR	TOTAL FEE	$ 125
	DCA State Permit Fee	$ 0

U.C.C. F130 (rev. 3/96)

UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 01/12/2004
Control #
Permit # 04-0093

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

Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE

ADDN/ALTER

Owner in Fee KRITI-SHAY CONSTRUCTION

Address 63 CHANNEL DRIVE

BRICK, NJ 08723-

Tele.(732)477-4665

Contractor JEMCO PLG & HTG INC

Address 5 AMY CT

HOWELL, NJ 07731-

Tele.(732)458-4744

Lic. No. or Bldrs. Reg. No. 11191

Federal Emp. No. 22-3816578

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 2,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)			
[ ] No Plans Required	Type	Failure	Failure	Approval	Initial
Joint Plan Review Required:	Slab				
[ ] Bldg [ ] Elect	Rough				
[ ] Fire [ ] Elevator	Water				
[ ] Plumb. Plans Approved	Sewer				
Date:	Fixtures				
Approved By:	Gas Equip.				
SUBCODE APPROVAL	Gas Piping				
[ ] CO [ ] CCO [ ] CA	Solar				
Approved By:	TCO				
Date:					

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.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
1	Hose Bib	10
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other AC (previous contractor)	35
	Other	0

Administrative Surcharge $ 0

Paid [X] Check # 13175/80 Minimum Fee $ 0

Collected by: MJR TOTAL FEE $ 125

DCA State Permit Fee $ 0

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/14/2003
Date Issued 11/12/04
Control # C97-56
Permit # 04-0093

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

Block 565 Lot 1 Qual

Work Site Location 2597 HOOPER AVE
ADDN/ALTER

Owner in Fee KRITI-SHAY CONSTRUCTION
Address 63 CHANNEL DRIVE
BRICK, NJ 08723-
Tele.(732)477-4665
Contractor MCCREA P&H
Address 3 WEST BOAT DRIVE
LITTLE EGG HARBOR, NJ 08087-
Tele.(609)812-9488
Lic. No. or Bldrs Reg No 6623
Federal Emp. No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 2,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 12-15-03
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
1	Hose Bib	10
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other AC	35
	Other	0

Administrative Surcharge $ 0
Minimum Fee $ 0
TOTAL FEE $ 125
DCA State Permit Fee $ 0

Paid [ ] Check #
Collected by:

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. F130 (rev. 3/96)

Township of Brick
Zoning Permit

Approved: Monday, December 08, 2003 **Number:** 2036

Block 565 **Lot** 1-2 **Zone:** R-7.5

Property Address: 63 Channel Drive

Applicant: Sam Reynolds; Kristi-Shay Construction

Property Owner Kristi-Shay Construction

Existing Use: George's bait shop.

Proposed Use: Krist-Shay Construction office.

Proposed Construction: Interior and exterior renovations and constructiion of attic floor; ridge height, 25'.

Conditions:

The attic floor can only be used for storage.
The front "dormers" are decorative only.
An additional zoning permit is required for any additional work.
No paving or any other site work may be done without prior written zoning approval.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Municipal Planner

Sean Kinnevy
Zoning Officer

RECEIVED
NOV 20 2003
ZONING

RECEIVED
DEC 8 2003

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

Applications missing any of the following information will delay processing and may be returned to you.

BLOCK 565 LOT 1,2 QUALIFIER

PROPERTY ADDRESS 2597 OLD HOOPER AVE

PERSONAL NAME OF APPLICANT SAM REYNOLDS

BUSINESS NAME OF APPLICANT KNISTI-SHAY CONSTRUCTION

MAILING ADDRESS OF APPLICANT 63 CHANNER DR BRICK NJ

PROPERTY OWNER'S FULL NAME KNISTI-SHAY CONSTRUCTION

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☒ Commercial (please describe) BAIT SHOP

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☑ Commercial (please describe) CONSTRUCTION OFFICE

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) Height
☒ Addition - Height 25' PROPOSED 2ND STORY OVER EXISTING FOOTPRINT
☐ Alteration
☐ Porch or deck - Height
☐ Shed - Height Height
☐ Fence - Type
☐ Swimming Pool ☐ in-ground ☐ above-ground
☒ Other (please describe) Change of use

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT Sam L Reynolds Date 11/13/03

Reviewed by Zoning Office SC Date 11/20/03 (x) Approved ( ) Denied
SC 12/8/3

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
(732) 458-7000

CERTIFICATE OF COMPLIANCE

Date 3/16/04

NAME Kristi Shay Construction

ADDRESS 63 Channel Dr. Brick, NJ 08723

PROPERTY LOCATION 2597 Hooper AVe.

Account No J043204 Block 565 Lot 1

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

KRISTI SHAY CONSTRUCTION, INC.

13763

Township Of Brick

3/25/2004

Up-date Plumbing & Electrical 2597 hooper Avenue 70.00

Provident Checking Up-date Plumbing & Electrical 2597 hooper Av 70.00

Plumbing Plan Review Record

Work site location: 2097 Old Hooper

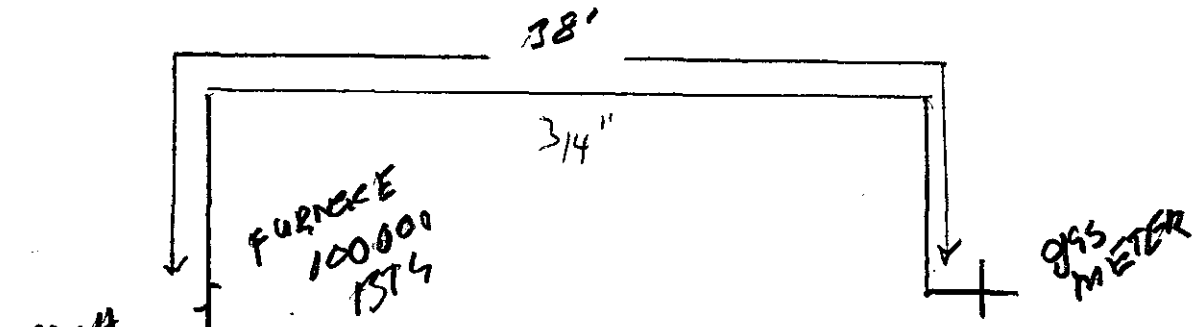
Building Description: _____

Reviewed: [illegible]

Date: 12-18-03

Correction list		
No.	Description	Code section
	H. C. details needed	
	Mike (Saw in the office	
	Kristi Hay	

12-18-00



BLK 565
LOT 1.2

Jam McL

Kristi Shay Construction Inc.

63 Channel Drive Brick, NJ 08723
Phone: 732-477-4665 Fax: 732-477-9115

Fax

To: RON - FIRE INSPECTOR **From:** Samuel J. Reynolds

Fax: 262-8954 **Pages:** 2

Phone: **Date:** 12/30/03

Re: **CC:**

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

• **Comments:**

RON,

ANY QUESTIONS,

PLEASE CALL

THANKS

MICHAEL

Kwiecinski and Associates
ARCHITECTS
architecture space planning

December 30, 2003

Brick Township Building Department
401 Chambers Bridge Road
Brick, N.J. 08723

Re: Building Renovation/Addition for:
Kristi Shay Construction
Old Hooper Avenue
Brick, N.J.

Dear Fire Inspector,

Following is the additional information you requested for the above referenced project:

1. No fire alarm system is being provided, however hardwired and interconnected smoke detectors will be provided. (1 per floor)
2. The attic is to be utilized for storage purposes only.
3. As indicated on the plan, the attic is separated with a 1 hour rated assembly consisting of 2 layers of 5/8" type 'x' f.c. gypsum board. (Gypsum Association design number FC 5406 for ceiling, & WP 3514 for walls around stair)

Please feel free to contact our office should you have any additional questions.

Very Truly Yours,

Kenneth S. Kwiecinski

1100 Ocean Road ▪ Point Pleasant ▪ New Jersey ▪ 08742
Phone: 732-295-4515 ▪ Fax: 732-295-5330

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 365 LOT 1.2 SITE ADDRESS 201 Hillside Ave.
TYPE OF SITE Residential / (Commercial) NAME OF BUSINESS [illegible]
APPLICANT [illegible] PHONE NUMBER 732 499-4605
APPLICANT ADDRESS [illegible] CITY & STATE [illegible]

INCLUSIONARY DEVELOPMENT

Affordable
- Fee Required _____ Date _____
- Down Payment _____ Date _____
- Balance _____ Date _____
- Paid In Full _____ Date _____

Market Rate — No Fee Required

MANDATORY DEVELOPER FEES

◊ Residential is .005 %

◊ Commercial is .01%

◊ The estimated equalized assessed value of the proposed construction is

$ 35000.00

Frederick R Millman — 12/12/03

Frederick R. Millman, CTA, Tax Assessor — Date

◊ The final equalized assessed value of the construction at the above referenced site is:

$ _____

_____ _____

Frederick R. Millman, CTA, Tax Assessor — Date

Prelininary Fee Required [illegible] Date [illegible]
Preliminary Paid [illegible] Check # [illegible]
Receipt # [illegible]

Final Total Fee Required [illegible]
Preliminary Paid _____ Date _____
Final Paid _____ Check# _____
Balance Due _____ Receipt # _____

Fees Imposed To Date _____
Fees Reached $15,000 _____ Date

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

12/15/03 - Tax [illegible]

_____
Office of Affordable Housing

KRISTI SHAY CONSTRUCTION, INC.
63 CHANNEL DRIVE
BRICK, NJ 08723
(732) 477-4665

THE PROVIDENT BANK
15-7230/2212

13040

12/15/2003

PAY TO THE ORDER OF Township Of Brick

$ **175.00

One Hundred Seventy-Five and 00/100********** DOLLARS

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, NJ 08723
USA

MEMO Affortable housing-2597 Old Hooper

AUTHORIZED SIGNATURE

[redacted]

From: Lisa Rose Tavalaiccio, Office of Affordable Housing
Re: Affordable Housing Fees

Business/Development: Kristi Shay Const. Office

Owner/Applicant: Kristi Shay Const.

Property Address: 2597 Hooper Ave.

Block: 565 Lot: 1, 2

DEPOSIT RECEIVED
Mandatory ~~Development~~ Fee
Commercial
Residential
Inclusionary Development Fee

DATE: 12/16/03

Check Number 13040

Preliminary Fee Paid $175.00

Final Fee Paid -

FOR DEPOSIT ONLY - AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance 354-2C-93, is pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C. 5:92-18 et seq.

Received in Treasurer's Office by:

Signature

12-16-03
Date

OFFICE OF AFFORDABLE HOUSING

AHBT PRELIMINARY APPROVAL

Applicable to Ordinance 720-92
This form must be handed in with permit application or a permit will not be issued.

TOWNSHIP OF BRICK
Debris Form

Work Site Address 2597 OLD HOOPER AVE

Block 565 Lock 1, 2

Contractor Kristi Shay Construction, Inc

Contractor's Address 63 Channel Dr.

Type of Construction (minor, new home) New home

Type of Debris (shingles, siding, wood, etc.) Shingles - siding - wood

Party Responsible for removal Sindel Carting

Dumpster Size 40 Yard

Destination of Debris Discard OC Landfill

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclable.

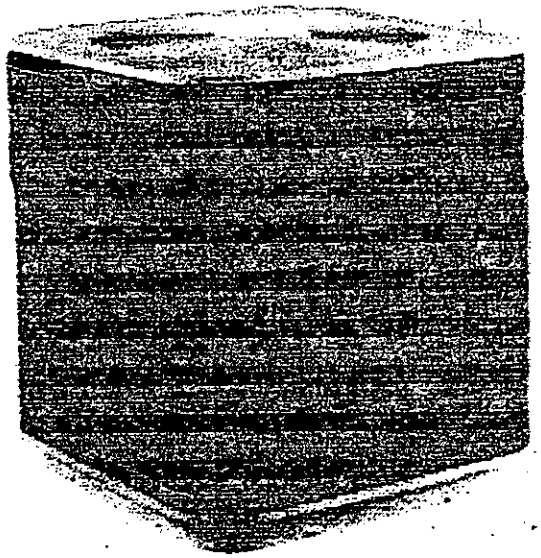
Generator's Certification: Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance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

Sam Reynolds 10-30-03
Signature Date

SAM REYNOLDS
Print Name

TECHNICAL
SPECIFICATIONS

S3BA Series
High Efficiency Air Conditioner
10 SEER
1-1/2 – 5 Ton Capacity



The S3BA Series of air conditioners offers exceptional performance from a small, compact package. The unit, when combined with our engineered coils or air handlers, offers a full line of quality, split system cooling equipment. Units are ideally sized for slab or rooftop mounting in single, multifamily, and light commercial applications.

FEATURES and BENEFITS

- **Durable, Attractive Cabinet** – Designed using galvanized steel with a high gloss polyester urethane powder coat finish. The 750 hour salt spray finish is 1.5 mil thick and resists corrosion 50% better than comparable units.
- **Copper Tube / Aluminum Fin Coils** – Both indoor and outdoor coils are designed to optimize heat transfer, minimize size and cost, and increase durability and reliability.
- **Permanently Lubricated Motor** – A heavy duty PSC motor for long lasting reliability and quiet operation. Requires no maintenance and is completely protected from rain and snow.
- **Full Service Valves** – These brass valves are easily accessible and simplify servicing of the refrigeration system.
- Plastic Coated Coil Guard – A wire guard that will never rust and protects the units coil from being damaged by balls, lawnmowers, etc.
- **Removable Top Grille Assembly** – Allows ease of service from the top without disconnecting fan motor leads.
- **One Piece Top/Orifice** – Designed for maximum airflow and quiet operation.
- **2-1/2" Pedestal Base** – The sturdy base keeps the bottom of the coil out of harms way. Secondly, the base has weep holes along the edge to allow the water from rain to flow away from the unit.
- **Five Minute Restart Time Delay** – When the unit shuts down, a five minute delay keeps the unit from restarting, eliminating the highest cause for compressor failure.
- **Easy Compressor and Control Access** – Designed to make servicing easier for the contractor, access panels are provided to all controls and the compressor from the side of the unit.
- **6 Year Limited All Parts Warranty** – The best in the industry and has proven to be a major benefit to the consumer.

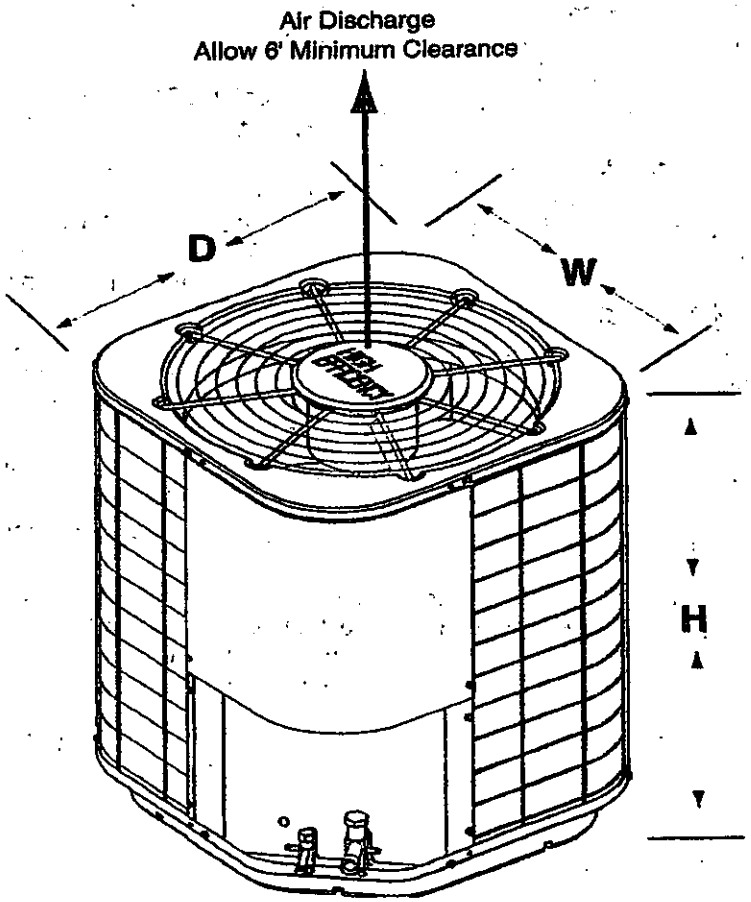
MODEL IDENTIFICATION CODES

EX: S3BA-036K — **S 3 B A - 036 K**

- **S** — S - Air Conditioner; T - Heat Pump
- **3** — Generation 1, 2, 3. etc.
- **BA** — Product Identifier: BA = Braze 10 SEER; BC = Braze 12 SEER; BE = Braze 14 SEER
- **036** — Nominal Capacity (000) BTU
- **K** — Electrical Code: C = 208/230-60-3; K = 208/230-60-1

DIMENSIONS
OUTDOOR SECTION

S3BA-	018	024	030	036	042	048	060
H	22-1/2	22-1/2	26-1/2	30-1/2	34-1/2	26-1/2	34-1/2
W	22-1/2	22-1/2	22-1/2	22-1/2	22-1/2	30-1/2	30-1/2
D	22-1/2	22-1/2	22-1/2	22-1/2	22-1/2	30-1/2	30-1/2



PHYSICAL AND ELECTRICAL SPECIFICATIONS / OUTDOOR UNITS

10 SEER — High Efficiency — Single Phase

Model No. S3BA-			018K	024K	030K	036K	042K	048K	060K
Electrical Data	Volts-Cycles-Phase		208/230-60-1	208/230-60-1	208/230-60-1	208/230-60-1	208/230-60-1	208/230-60-1	208/230-60-1
	Total Amps		9.2	10.5	14.9	15.7	18.3	19.6	26.5
	Delay Fuse Max.		20	20	30	30	40	40	50
	Min. Circuit Ampacity		11.4	12.9	18.4	19.3	22.5	24.2	32.7
Component Data	Coil	Area	8.3	8.3	10.0	11.7	13.3	15.3	20.4
		Rows-FPI	1-16	1-18	1-20	1-20	1-22	1-18	1-22
		Tube Dia.	3/8 O.D.	3/8 O.D.	3/8 O.D.	3/8 O.D.	3/8 O.D.	3/8 O.D.	3/8 O.D.
	Fan Motor	Type	PSC	PSC	PSC	PSC	PSC	PSC	PSC
		Amps	0.67	0.67	1.25	1.25	1.25	1.4	1.5
		Watts-HP	145-1/10	145-1/10	210-1/8	210-1/8	210-1/8	245-1/4	300-1/4
	Fan Blade	Dia.-#Blades	18 in. - 3	18 in. - 3	18 in. - 3	18 in. - 3	18 in. - 3	24 in. - 2	24 in. - 3
		SCFM	2100	2100	2500	2500	2500	3300	4000
	Compress	RLA	8.6	9.8	13.7	14.4	17.0	18.2	25.0
		LRA	49	56	75	82	105	102	170
Refrigerant Suction Line-Length/O.D. (Liq. Line All Lengths - 3/8"O.D.)		15 ft.	5/8"	5/8"	3/4"	3/4"	3/4"	7/8"	7/8"
		25 ft.	5/8"	3/4"	3/4"	3/4"	7/8"	7/8"	1-1/8"
		40 ft.	3/4"	3/4"	3/4"	7/8"	7/8"	7/8"	1-1/8"
Refrigerant Charge R-22 Ounces	(Outdoor unit, Indoor Unit 15' Line Set)		62	72	76	90	102	105	130
Weight Approximate (lbs.)		Net	140	142	148	154	160	166	178
		Ship	152	154	160	166	172	178	190

10 SEER — High Efficiency — Three Phase

Model No. S3BA-			036C	048C	060C
Electrical Data	Volts-Cycles-Phase (1)		208/230-60-3	208/230-60-3	208/230-60-3
	Total Amps		10.2	14	16.9
	Delay Fuse Max. (2)		20	30	35
	Min. Circuit Ampacity		12.5	17.2	20.8
Component Data	Coil	Area	11.7	15.3	20.4
		Rows-FPI	1-20	1-18	1-22
		Tube Dia.	3/8 O.D.	3/8 O.D.	3/8 O.D.
	Fan Motor	Type	PSC	PSC	PSC
		Amps	1.25	1.4	1.5
		Watts-HP	210-1/8	245-1/4	300-1/4
	Fan Blade	Dia.-#Blades	18 in. - 3	24 in. - 2	24 in. - 3
		SCFM	2500	3000	3600
	Compress Data*	RLA	9.0	12.6	15.4
		LRA	70	91	124
Refrigerant Suction Line-Length/O.D. (Liq. Line All Lengths - 3/8"O.D.)		15 ft.	3/4"	7/8"	7/8"
		25 ft.	3/4"	7/8"	1-1/8" (5)
		40 ft.	7/8" (4)	7/8"	1-1/8" (5)
Refrigerant Charge R-22 Ounces	(Outdoor unit, Indoor Unit 15' Line Set)		90	105	130
Weight Approximate (lbs.)		Net	154	166	178
		Ship	166	178	190

COPPER WIRE SIZE — AWG (1% Voltage Drop)				
Supply Wire Length-Feet				Supply Circuit Ampacity
200	150	100	50	
6	8	10	14	15
4	6	8	12	20
4	6	8	10	25
4	4	6	10	30
3	4	6	8	35
3	4	6	8	40
2	3	4	6	45
2	3	4	6	50

Wire Size based on N.E.C. for 60° type copper conductors.

* Values shown are most severe and may vary slightly depending on the make of the compressor supplied.

(1) Operating Voltage Range: 198v min. — 253v max.

(2) HACR Type Circuit Breakers may be used.

(3) Requires 3/4" to 5/8" reducer from unit to line.

(4) Requires 7/8" to 3/4" reducer from line to unit.

(5) Requires 7/8" to 1-1/8" reducer from line to unit.

SYSTEM HEATING & COOLING CAPACITIES

10 SEER — High Efficiency — Single Phase

Outdoor Unit	With This Coil				
Model Number	Model Number	Cooling Btuh	SEER	Nominal cfm	Required Orifice Size
S3BA-018K	C3BL-018C/U-A	17,800	10.0	675	.051
S3BA-024K	C3BA-024C/U-B	23,600	10.0	800	.060
S3BA-024K	C3BL-023C/U-A	22,800	10.0	800	.060
S3BA-030K	C3BA-030C/U-B	29,600	10.0	1100	.067
S3BA-030K	C3BL-028C-A	28,200	10.0	1100	.067
S3BA-036K	C3BA-036C/U-B	34,600	10.0	1250	.073
S3BA-042K	C3BA-042C/U-C	40,000	10.0	1400	.077
S3BA-048K	C3BA-048C/U-C	45,500	10.0	1600	.082
S3BA-048K	C3BA-048C/U-B	45,000	10.0	1500	.082
S3BA-060K	C3BA-060C/U-C	56,500	10.0	1800	.096

Outdoor Unit	With This Air Handler				
Model Number	Model Number	Cooling Btuh	SEER	Nominal cfm	Required Orifice Size
S3BA-018K	B2B(M,V)-018K-A	17,800	10.0	675	.051
S3BA-024K	B2B(M,V)-024K-A	22,800	10.0	800	.060
S3BA-030K	B2B(M,V)-030K-B	29,600	10.0	1100	.067
S3BA-036K	B2B(M,V)-036K-B	34,600	10.0	1250	.073
S3BA-042K	B2B(M,V)-042K-C	40,000	10.0	1400	.077
S3BA-048K	B2B(M,V)-048K-C	45,500	10.0	1600	.082
S3BA-060K	B2B(M,V)-060K-C	56,500	10.0	1800	.096

ACCESSORIES - Condensing Unit

Start Assist Kit - 912933
Provides additional starting torque for the compressor motor when operating with low line voltage or high operating temperatures.

Thermostat
Two thermostats are available.
911096 - Single-Stage
911100 - Two-Stage Heat / One-Stage Cool

325A-0497 (Replaces 325A-1296)

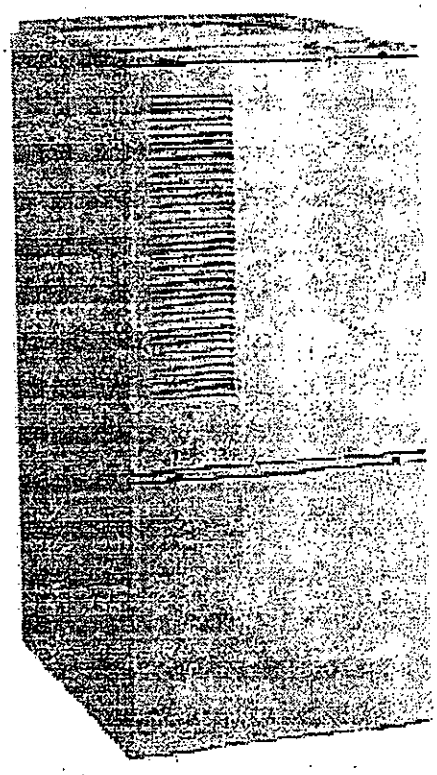
TECHNICAL SPECIFICATIONS

G6RA Series

High Efficiency Upflow/Horizontal Gas Furnace

Induced Draft - 80+ AFUE

Input 45,000 - 144,000 Btuh



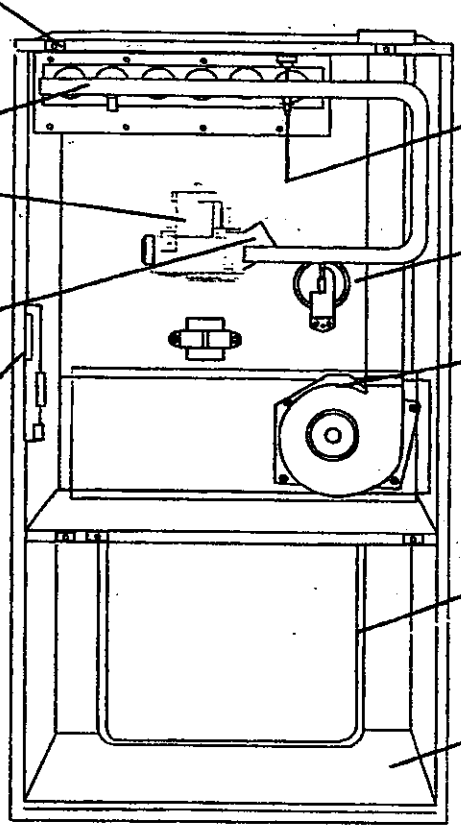
The high efficiency upflow gas furnace may be installed free standing in a utility room, basement, or enclosed in an alcove or closet. The extended flush jacket provides a pleasing "appliance appearance." Design certified by the American Gas Association (AGA) Laboratories and the Canadian Gas Association (CGA) Laboratories. The product is truly designed with the contractor and the consumer in mind.

FEATURES and BENEFITS

- Best warranty in the business —
  – A full 20 years on the heat exchanger
  – 6 years on all parts
- 100% fired and tested — All units and each component (both mechanical and electrical) are tested on the manufacturing line.
- Best packaging in the industry — Unique design assures product will arrive to the homeowner dent free.
- Clean and quiet operation — Due to the unique design of in-shot burners, location of inducer, return air vents, and use of insulation.
- Fixed 30-second blower delay at burner start-up assures a warm duct temperature at furnace start-up. Adjustable blower off settings (60, 90, 120 and 180 seconds).
- Fixed 30-second post purge increases life of heat exchanger.
- Dependable, shock-mounted hot surface ignitor — Innovative application of an appliance type igniter with a 20-year history of reliability, assures no call-backs because of handling.
- Color coded wire harness — Designed to fit the components, all with quick-connect fittings for ease of service and replacement.
- Approved for categories I and III venting systems — May be common, dedicated, or through-the-wall vented for maximum flexibility in installation.
- Tubular primary heat exchanger — Heavy gauge aluminized steel heat exchanger assures a long life.
- 90-second fixed cooling cycle blower-off delay (TDR) increases cooling performance when matched with a NORDYNE coil.
- Variable speed blower kit is available to maximize air conditioner and heat pump efficiencies. On selected units, SEER ratings up to 14 and HSPF ratings up to 8.5 are ARI listed.
- Multi-speed direct drive blower — Designed to give a wide range of cooling capacities. 40VA transformer included.
- LP convertible — Simple burner orifice and regulator spring change for ease of convertibility.
- Diagnostic lights flash to identify limit failure, pressure switch failure, improper ground and polarization, and low flame signal — for easy troubleshooting.
- Incorporates new integrated control board with connections for electronic air cleaner, humidifier and twinning.
- New two piece door design enhances furnace appearance and uses screw fasteners for easier accessibility.
- 3 amp fuse protection against low voltage shorts; protects transformer and control board.
- Low voltage terminal board for easy field wiring.
- Components and Controls — Designing quality into our products means selecting manufacturers that have a reputation for delivering high quality, dependable products.

FEATURES

High Efficiency Upflow/Horizontal 80+ Gas Furnace



Front door screw fasteners ensure tight fit.

Aluminized steel in-shot burners, hot surface ignitor and redundant gas valve provide safe, reliable ignition and efficient combustion.

Supply air limit.

Solid state integrated control monitors the burner flame and limit circuit continuously. Blower timing has adjustable OFF settings. Provides humidifier and electronic air cleaner connections.

Vent switch protects against blocked flue. (Not Shown)

Remote flame sensor for proof of flame carry-over

Single pressure switch assures proper operation of the induced draft system up to 10,000 feet.

Isolation grommets on the induced draft blower provide quiet operation.

Multi-speed PSC motor/blower provides quiet airflow, reliable operation and is installed on a slide-out track.

Solid bottom base plate for sturdy construction — with easily removed full bottom knock-out for bottom return applications.

STANDARD EQUIPMENT

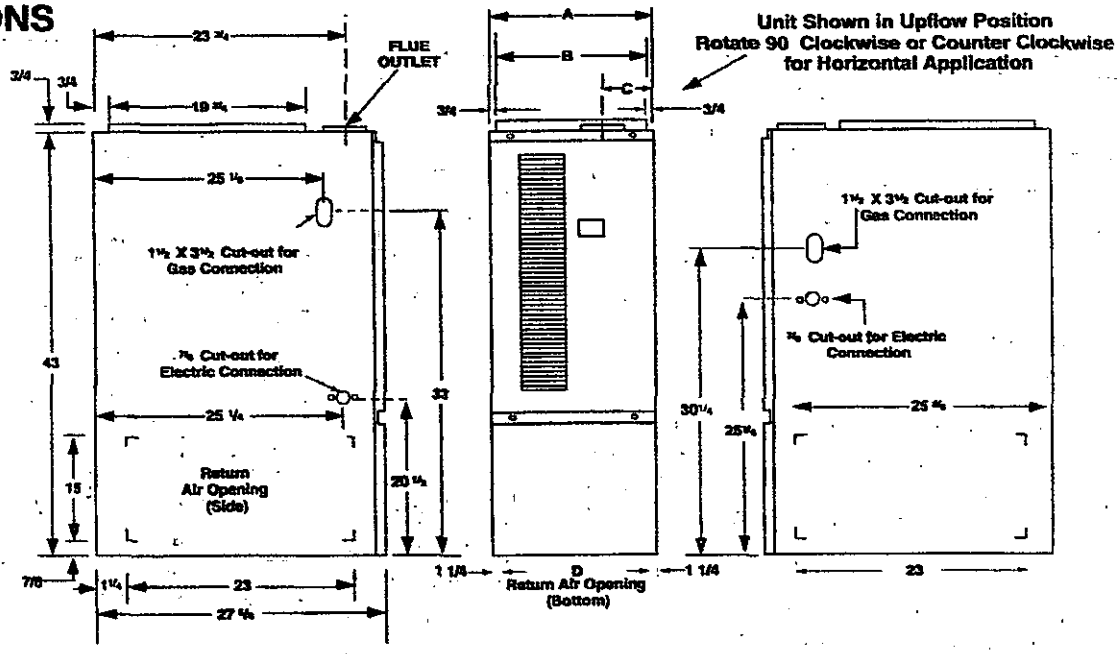
Draft inducer; pressure switch; redundant main gas control; hot-surface ignition; timed ON/OFF blower controls(TDR) ; 40VA transformer for air conditioner application; limit controls; solid base plate with knock-out for easy removal; direct drive motor; all models can be converted to use L.P. (propane) gas. Factory approved kits *only* must be used and are available as an optional accessory from your distributor.

SPECIFICATIONS

GERA MODEL NUMBERS	-048(-)08	-060(-)12	-072(-)12	-072(-)16	-096(-)12	-096(-)16	-096(-)20	-120(-)16	-120(-)20	-144(-)20
Input-Btuh (a)	45,000	60,000	72,000	72,000	96,000	96,000	96,000	120,000	120,000	144,000
Heating Capacity - Btuh	36,000	48,000	58,000	58,000	77,000	77,000	77,000	96,000	96,000	115,000
AFUE	80+	80+	80+	80+	80+	80+	80+	80+	80+	80+
Max. Htg. Ext. St. Press. in W.C.	.5	.5	.5	.5	.5	.5	.5	.5	.5	.5
Blower Wheel D x W	10 x 6	10 x 6	10 x 6	10 x 10	10 x 9	10 x 10	11 x 10	10 x 10	11 x 10	11 x 10
Motor H.P. -Speed -Type	1/5 - 3 - PSC	1/3 - 3 - PSC	1/3 - 3 -PSC	1/2 - 4 -PSC	1/3 - 3 - PSC	1/2 - 4 -PSC	3/4 - 4 -PSC	1/2 - 4 -PSC	3/4 - 4 -PSC	3/4 - 4 -PSC
Motor FLA	2.8	6.0	6.0	7.9	6.0	7.9	11.1	7.9	11.1	11.1
Temperature Rise Range - °F	45 - 75	45 - 75	45 - 75	40 - 70	50 - 80	50 - 80	40 - 70	50 - 80	45 - 75	45 - 75
Approximate Shipping Wt. - lbs.	108	120	120	125	157	158	165	172	174	183

All models are 115 V, 60 HZ. Gas connections are 1/2" N.P.T
AFUE= Annual Fuel Utilization Efficiency

DIMENSIONS



MODEL NUMBER G6RA	A (in.)	B (in.)	C (in.)	D (in.)	MODEL NUMBER G6RA	A (in.)	B (in.)	C (in.)	D (in.)
045(*)-08	14 1/4	12 3/4	3 1/4	11 3/4	096(*)-16	19 3/4	18 1/4	3 3/4	17 1/4
060(*)-12	14 1/4	12 3/4	3 3/4	11 3/4	096(*)-20	22 1/2	21	3 3/4	20
072(*)-12	14 1/4	12 3/4	3 3/4	11 3/4	120(*)-16	19 3/4	18 1/4	3 3/4	17 1/4
072(*)-16	19 3/4	18 1/4	3 3/4	17 1/4	120(*)-20	22 1/2	21	3 3/4	20
096(*)-12	19 3/4	18 1/4	3 3/4	17 1/4	144(*)-20	22 1/2	21	4 1/4	20

BLOWER PERFORMANCE

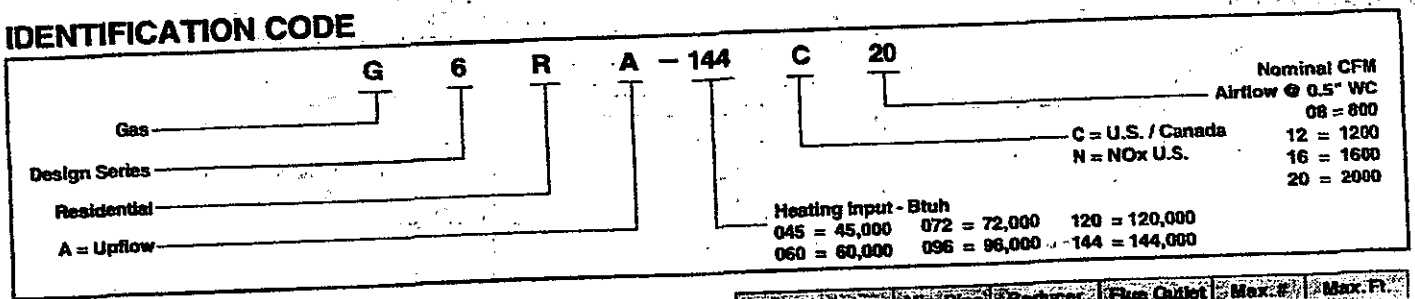
Upflow Furnace Airflow Data

G6RA Furnace Model No.	Motor HP	Motor Speed	External Static Pressure (Inches Water Column) 0.1 CFM	0.1 Rise	0.2 CFM	0.2 Rise	0.3 CFM	0.3 Rise	0.4 CFM	0.4 Rise	0.5 CFM	0.5 Rise
045C-08	1/5	High *	1000	-	970	-	950	-	920	-	870	-
		Medium	760	46	740	47	730	47	720	48	690	50
		Low **	630	55	620	56	610	57	600	58	570	61
060C-12	1/3	High *	1380	-	1350	-	1310	-	1260	-	1210	-
		Medium	1220	-	1190	-	1160	-	1120	-	1070	-
		Low **	820	57	800	58	780	59	760	61	730	63
072C-12	1/3	High *	1380	-	1350	-	1310	-	1260	-	1210	-
		Medium	1220	46	1190	47	1160	48	1120	49	1070	52
		Low **	820	68	800	69	780	71	760	73	730	76
072C-16	1/2	High *	1980	-	1910	-	1830	-	1760	-	1660	-
		Med-High	1710	-	1660	-	1610	-	1540	-	1470	-
		Med-Low	1490	-	1470	-	1420	-	1380	-	1320	-
		Low **	1270	44	1250	45	1230	45	1190	47	1140	49
096C-12	1/3	High *	1530	-	1450	-	1390	-	1300	-	1220	-
		Medium**	1380	64	1320	67	1250	71	1190	75	1100	81
		Low	930	-	900	-	870	-	820	-	750	-
096C-16	1/2	High *	1980	-	1910	-	1840	-	1760	-	1680	-
		Med-High	1720	-	1670	-	1610	-	1560	-	1480	-
		Med-Low **	1470	50	1440	52	1410	53	1370	54	1320	58
		Low	1270	58	1240	60	1220	61	1190	62	1140	65
096C-20	3/4	High *	2340	-	2290	-	2280	-	2180	-	2150	-
		Med-High	1910	-	1880	-	1860	-	1830	-	1810	-
		Med-Low	1520	49	1510	49	1490	50	1480	50	1460	51
		Low **	1370	54	1350	55	1340	55	1320	56	1300	57
120C-16	1/2	High *	1900	-	1830	-	1750	-	1630	-	1580	-
		Med-High **	1720	54	1670	56	1610	58	1560	59	1480	63
		Med-Low	1450	64	1420	65	1380	67	1340	69	1280	72
		Low	1260	-	1230	-	1200	-	1170	-	1120	-
120C-20	3/4	High *	2300	-	2250	-	2190	-	2130	-	2090	-
		Med-High	1910	49	1880	49	1860	50	1830	51	1800	52
		Med-Low**	1540	60	1530	61	1520	61	1500	62	1480	63
		Low	1320	-	1310	-	1300	-	1280	-	1260	-
144C-20	3/4	High *	2240	-	2190	-	2130	-	1070	-	2020	-
		Med-High**	1900	49	1860	50	1820	51	1780	52	1740	53
		Med-Low	1520	61	1510	61	1490	62	1480	63	1450	64
		Low	1330	-	1310	-	1290	-	1280	-	1250	-

*Factory wired cooling speed tap. **Factory wired heating speed tap.

- Not Recommended

IDENTIFICATION CODE



Through-the-Wall VENTING Venting Requirements

These furnaces are approved to use with 3" single wall AL29-4C stainless steel vent pipe in through-the-wall vent applications, and with the required through-the-wall vent kit listed below. The pipe is available from the following manufacturers:

Z-Flex Inc. - vent brand name **(Z-VENT)**
Heat-fab Inc. - vent brand name **(Saf-T Vent)**
Flex-L International - vent brand name **(STAR-34 Vent)**

When venting through-the-wall, this is a Category III furnace, the vent pressure is positive, and the venting system must be sealed in both horizontal and vertical runs.

Model Number G6RA-	Min. Pipe Size	Reducer Needed*	Flue Outlet (in.)	Max. # Elbows	Max. Ft. Vent Pipe
045( )-08	3"	None	3	4	35
060( )-12	3"	4" to 3"	4	4	35
072( )-12	3"	4" to 3"	4	4	35
072( )-16	3"	4" to 3"	4	4	35
096( )-12	3"	4" to 3"	4	4	35
096( )-16	3"	4" to 3"	4	4	35
096( )-20	3"	4" to 3"	4	4	35
120( )-16	3"	4" to 3"	4	4	35
120( )-20	3"	4" to 3"	4	4	35
144( )-20*	3"	4" to 3"	5	3	30

* NOTE: Special 5" to 4" Reducer Kit (#902249) required for model G6RA144C-120.

High Efficiency 80+ with Honeywell VR Gas Valve		
Kit		Order Number
U.S. High Altitude Natural Gas Conversion Kit (2,000 to 10,000 ft.)		903491
U.S. Propane Kit (0 to 2,000 ft.)		903492
U.S. High Altitude Propane Gas Conversion Kit (2,000 to 10,000 ft.)		903493
Canadian High Altitude Natural Gas Conversion Kit (2,000 to 4,500 ft.)		903494
Canadian Propane Gas Conversion Kit (0 to 4,500 ft.)		903495
Fossil Fuel Kit		914762
Side Return Filter Kit		541036
Bottom Return Filter Kit	A Cabinet	903088
	B Cabinet	903089
	C Cabinet	903090
Downflow Sub-Base	A Cabinet	902974
	B Cabinet	902677
Horizontal Vent Kit		903196
Internal Side Return Filter Wire		903152

VENTING

All models, with the exception of the reduced NOx models, are approved for vertical and through-the-wall venting applications (see table above). All models may be common vented with a gas water heater. Type B gas vent materials may be used when connected to a vertical vent system. The installation must be in accordance with the venting instructions supplied with the furnace.

GENERAL TERMS OF LIMITED WARRANTY **

NORDYNE will furnish a replacement for any part of this product which fails in normal use and service within the applicable periods stated below, in accordance with the terms of the warranty.

G6RA Models Warranty
Gas Heat Exchanger ..... 20-Year Limited Warranty
Any Other Part ..... 6-Year Limited Warranty

** For complete details of the Limited Warranty, including applicable terms and conditions, see your local installer or contact the factory for a copy.

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

Township of Brick
(732) 262-1000
Fax: (732) 920-4850
http://www.twp.brick.nj.us

resubmit 12/8/3
Sean - Michael said he changed plans as per your suggestion so he could avoid the variance?
Donna.

November 20, 2003

Sam Reynolds
Kristi-Shay Construction
63 Channel Drive
Brick, NJ 08723

Re: Block: 565 Lot: 1
2597 Hooper Avenue

Dear Mr. Reynolds,

Your zoning permit application for a construction office on the referenced property cannot be approved because under Section 190 of the Township Code a construction office is not a permitted use in the R-7.5 Single Family Residential Zone unless a use variance and site plan are first approved by the Zoning Board of Adjustment.

Variance application forms can be obtained from Christine Papa, Board Secretary. Mrs. Papa can be reached at 732-262-1049 for additional information.

Very Truly Yours,

Sean Kinnevy

Sean Kinnevy
Zoning Officer

C: Scott R. MacFadden, Business Administrator
Michael P. Fowler, AICP/PP, Municipal Planner
Kat MacDonald, Assistant Zoning Officer
Daniel Newman, Construction Official

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD · BRICK, NJ 08723

DEPARTMENT OF ADMINISTRATION & FINANCE

OFFICE OF LAND USE MANAGEMENT
Sean Kinnevy
Zoning Officer
(732) 262-1041

Kate MacDonald
Asst. Zoning Office
(732)-262-1043
Fax:(732) 262-8954
http://www.twp.brick.nj.us

ZONING ADMINISTRATION FORM
(Please print legibly)

DATE & TIME 12-3-03 11:10 AM.

CALLER Sam Reynolds

ADDRESS 477-4665

PHONE 732-278-6210 (cellphone)

PROPERTY ADDRESS

BLOCK LOT

OWNER'S NAME

BUSINESS/TENANT'S NAME

QUESTION/COMPLAINT/MESSAGE (PLEASE EXPLAIN) Please return his call
→ Waiting to hear from you about old Georges Bait & Tackle place — You told him he needs a Variance?
called him back 4:40pm

MESSAGE TAKEN BY: A MD

Kwiecinski and Associates
ARCHITECTS
architecture space planning

November 13, 2003

Brick Township Building Department
401 Chambers Bridge Road
Brick, N.J. 08723

Re: Building Renovation/Addition for:
Kristi Shay Construction
Old Hooper Avenue
Brick, N.J.

Dear Construction Official,

In regard to the above referenced project, follwing is the additional information which you requested:

First Floor Square Footage - 1320 s.f. (existing)
Second Floor Square Footage – 956 s.f. (new)
Second Floor Cubic Footage – 7648 c.f. (new)

The new second floor attic as indicated on the plans will be utilized for storage.

Please feel free to contact our office should you have any additional questions.

Very Truly Yours,

Kenneth S. Kwiecinski

1100 Ocean Road ▫ Point Pleasant ▫ New Jersey ▫ 08742
Phone: 732-295-4515 ▫ Fax: 732-295-5330

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

Department of Administration & Finance

Division of Inspections
Daniel F. Newman Jr.
Construction Official
(732) 262-1030
Fax: (732) 262-8954
http://www.twp.brick.nj.us

Date: 10/23/03

Block: 565 Lot: 1, 2

Property Address: 2597 OLD HOOPER AVE

I, SAM REYNOLDS (name) of 63 CHANNOR DR BRICK (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, ect. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

Sam Reynolds
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.

2. Proof that the property is not located in a Flood Hazard Area.

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

FOR OFFICE USE ONLY

Approved on: 12/9/03 Signed: [signature]

Rejected on: _____ Signed: _____

Comments: Interior Only

Kwiecinski and Associates
ARCHITECTS
architecture space planning

FAX

To: Brick Bldg Dept
Attn: Frank Mazner
Fax #:
Subject: Kusa Shay Office

Date: 12-16-03
Time:
Pages: 2 , including this cover sheet.

From: KW

COMMENTS:

Sealed Copies are also Being Sent

1100 Ocean Road ▪ Point Pleasant ▪ New Jersey ▪ 08742
Phone: 732-295-4515 ▪ Fax: 732-295-5330

BOCA®
NATIONAL BUILDING CODE
PLAN REVIEW RECORD

Valuation: _____ Plan Review # _____

Fee: _____ Date: 12-16-03

JURISDICTION _____
(City, County, Township, etc.)

BUILDING LOCATION 2597 Old Hooper
(Street address)

BUILDING DESCRIPTION _____

REVIEWED BY _____

Numerals indicated in parenthesis are applicable code sections of the 1993 *BOCA National Building Code*. The organization of this Plan Review Record follows the common Building Code format implemented in the 1993 *BOCA National Building Code*. The plan review accomplished as indicated in this record is limited to those code sections specifically identified herein. This record references commonly applicable code sections. It does not reference all code provisions which may be applicable to specific buildings. This record is designed to be used only by those who are knowledgeable and capable of exercising competent judgement in evaluating construction documents for code compliance.

CORRECTION LIST

No.	DESCRIPTION	Code Section
	Drawings Quote old Code and Construction type	
	Now using IBC	
	No Occupancy load Note	
	Spoke To Mike	

06/93

National Fire Code
Plan Review Record
Township of Brick

Date: 12-22-03

Site Address: 2593 Hooper Ave.

Reviewed By: Ron Bizzari

CORRECTION LIST

No.	Description
1)	Fire alarms shown on permit tech. not shown on plan.
2)	Label use of attic. Not to be used as storage unless limited area sprinkler or rate
3)	Submit new plan for intent of attic

Party Called and Phone #:

Resubmitted on: By:

Kwiecinski and Associates
ARCHITECTS
architecture space planning

December 16, 2003

Brick Township Building Department
401 Chambers Bridge Road
Brick, N.J. 08723

Re: Office Building Alteration for:
Kristi Shay Construction
Old Hooper Avenue
Brick, N.J.

Dear Construction Official,

Following is the information you requested for the above referenced project:

Plans in Accordance with International Building Code
Use Group - B
Construction Classification - 5B
Occupancy Load - 10

Please feel free to contact our office should you have any additional questions.

Very Truly Yours,

Kenneth S. Kwiecinski

1100 Ocean Road ▪ Point Pleasant ▪ New Jersey ▪ 08742
Phone: 732-295-4515 ▪ Fax: 732-295-5330

Kwiecinski and Associates
ARCHITECTS
architecture space planning

February 17, 2004

Brick Township Building Department
401 Chambers Bridge Road
Brick, N.J. 08723

Re: Building Renovation/Addition for:
Kristi Shay Construction
Old Hooper Avenue
Brick, N.J.

Dear Construction Official,

Please be advised of the following changes at the above referenced project location which are acceptable:

1. Utilizing R-19 insulation in lieu of R-21.
2. Elimination of R-13 insulation in attic knee walls as insulation was installed at rafter level continuous down to soffit.
3. Elimination of R-30 insulation in first floor ceiling as attic is now a conditioned space.

Please feel free to contact our office should you have any additional questions.

Very Truly Yours,

Kenneth S. Kwiecinski

1100 Ocean Road ▫ Point Pleasant ▫ New Jersey ▫ 08742
Phone: 732-295-4515 ▫ Fax: 732-295-5330

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER HAITI-SHOP DATE 2/26/04

PROPERTY ADDRESS 2597 HOOPER AVE BLOCK 565 LOT 1

ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMBING FIXTURES	NUMBER	(sfu) WATER UNITS		(dfu) DRAINAGE
1:BATHROOM GROUP				
2:KITCHEN GROUP				
3:WATER CLOSETS	1	2.5		
4:LAVATORY	1	1.0		
5:BATH TUB				
6:SHOWER STALL				
7:KITCHEN SINK				
8:SERVICE SINK				
9:LAUNDRY TRAY				
10:DISHWASHER				
11:WASHING MACHINE				
12:URINAL				
13:FLOOR DRAIN				
14:DRINK FOUNTAIN				
15:AIR COND WATER COOLED				
16:DENTAL UNIT				
17:LAWN SPRINKLE				
18:FIRE SPRINKLE				
19:HOSE BIBS	1	2.5		

TOTAL 6.0

GALLONS PER MINUTE _____

SIZE OF SERVICE 3/4"

DATE: 2/26/04 APPROVED: _____

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER HAITI-SHOP DATE 2/26/04

PROPERTY ADDRESS 2597 HOOPER AVE BLOCK 565 LOT 1

ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMBING FIXTURES	NUMBER	(sfu) WATER UNITS	(dfu) DRAINAGE
1:BATHROOM GROUP	( )	( )	( )
2:KITCHEN GROUP	( )	( )	( )
3:WATER CLOSETS	1 ( )	2.5 ( )	( )
4:LAVATORY	1 ( )	1.0 ( )	( )
5:BATH TUB	( )	( )	( )
6:SHOWER STALL	( )	( )	( )
7:KITCHEN SINK	( )	( )	( )
8:SERVICE SINK	( )	( )	( )
9:LAUNDRY TRAY	( )	( )	( )
10:DISHWASHER	( )	( )	( )
11:WASHING MACHINE	( )	( )	( )
12:URINAL	( )	( )	( )
13:FLOOR DRAIN	( )	( )	( )
14:DRINK FOUNTAIN	( )	( )	( )
15:AIR COND WATER COOLED	( )	( )	( )
16:DENTAL UNIT	( )	( )	( )
17:LAWN SPRINKLE	( )	( )	( )
18:FIRE SPRINKLE	( )	( )	( )
19:HOSE BIBS	1 ( )	2.5 ( )	( )
TOTAL		6.0	

GALLONS PER MINUTE _____

SIZE OF SERVICE 3/4"

DATE: 2/26/04 APPROVED: _____

KRISTI SHAY CONSTRUCTION, INC
63 CHANNEL DRIVE
BRICK, NJ 08723
(732) 477-4665

THE PROVIDENT BANK
55-7230/2212

13505

2/26/2004

PAY TO THE ORDER OF Township Of Brick

$ **175.00

One Hundred Seventy-Five and 00/100********** DOLLARS

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, NJ 08723
USA

MEMO Affordable housing / 2597 Old Hooper

[redacted]

From: Lisa Rose Tavalaiccio, Office of Affordable Housing
Re: Affordable Housing Fees

Business/Development: Kristy Shay Const. Office

Owner/Applicant: Kristi Shay Const.

Property Address: 2597 Hooper Ave.

Block: 565 Lot: 1.2

DEPOSIT RECEIVED

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

DATE: 2/27/04

Check Number 13505

Preliminary Fee Paid

Final Fee Paid $175.00

FOR DEPOSIT ONLY - AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance
354-2C-93, is pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C. 5:92-18 et seq.

Received in Treasurer's Office by:

Kathy Tinbergen
Signature

2-27-04
Date

OFFICE OF AFFORDABLE HOUSING

AHRT FINAL APPROVAL

04-0093

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 565 LOT 1, 2 SITE ADDRESS 2597 Hooper Ave.
TYPE OF SITE Residential (Commercial) NAME OF BUSINESS Kristy Stay Const. Office
APPLICANT Kristy Stay Construction PHONE NUMBER 732-477-4665
APPLICANT ADDRESS 163 Manxel Rd. CITY & STATE Brick, NJ. 08723

Mike - 732-278-0350 cell

INCLUSIONARY DEVELOPMENT

Affordable	Fee Required		Date
	Down Payment		Date
	Balance		Date
	Paid In Full		Date
Market Rate	No Fee Required		

MANDATORY DEVELOPER FEES

◊ Residential is .005 %

X Commercial is .01%

X ◊ The estimated equalized assessed value of the proposed construction is

$ 35000.00

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 12/12/03 Date

◊ The final equalized assessed value of the construction at the above referenced site is:

$ 35000

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 2/24/04 Date

Prelininary Fee Required	*175.00	Date	12/16/03
Preliminary Paid	175.00	Check #	13040
		Receipt #	325117
Final Total Fee Required	*350.-		
Preliminary Paid	175.00	Date	2/26/04
Final Paid	175.00	Check#	13505
Balance Due	-0-	Receipt #	325151

Fees Imposed To Date _____
Fees Reached $15,000 _____ Date

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

Rose Marie Tamburrino
Office of Affordable Housing

12/12/03 - Ta prelim.
12/15/03 - called Mike + mailed ltr.
2/24/04 - Ta final
2/25/04 - called Mike.

New Jersey Natural Resources Conservation Program

OCEAN COUNTY SOIL CONSERVATION DISTRICT

714 LACEY ROAD, FORKED RIVER, N.J. 08731
(609) 971-7002 Fax (609) 971-3391

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK

PROJECT: KRISTI SHAY SITE PLAN SCD NO.: 8788

BLOCK NO.(s) 565 LOT NO.(s) 1

~~5~~

Final Compliance ☒ Conditional Compliance ☐

Block No.	Lot No.	Conditions

TOTAL FEES DUE: $ —

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act, (N.J.S.A. 4:24-39 et. seq.).

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: _____

DATE: 3/11/04

DISTRIBUTION: WHITE - Township
CANARY - Applicant
PINK - District

Revised 6/98

A5703

04-0093

FRAMING CHECKLIST

NOTE: ALL ITEMS SHOULD BE AS SHOWN ON THE PLANS OR AS REQUIRED BY CODE.

A. BASEMENT OR CRAWL SPACE

1. ANCHORAGE:

BOLTS
- ☐ SPACING
- ☐ SIZE

STRAPS
- ☐ SPACING (PER MANUFACTURER'S SPECS)
- ☐ SIZE

2. SILL PLATES:
- ☐ SIZE
- ☐ GRADE, SPECIES
- ☐ TREATMENT
- ☐ LAPS
- ☐ SILL SEALER
- ☐ PROPER TREATMENT OVER FOUNDATION OPENINGS (BEARING OF JOIST)
- ☐ TERMITE PROTECTION

3. BEAM POCKETS:
- ☐ BEARING/SHIMS
- ☐ TERMITE PROTECTION OR CLEARANCE

4. COLUMNS:
- ☐ SIZED PER PLAN
- ☐ ATTACHMENT/PLATES
- ☐ SPACING/LOCATION
- ☐ PAINT/COATING

EXIST'G SLAB ON GRADE

B. FLOOR FRAMING AND FLOORING

1. BOX OR RIM JOIST, OR PERIMETER BAND JOIST:

1ST	2ND	3RD FLOOR	
☐	☒	☐	SIZE
☐	☒	☐	GRADE, SPECIES
☐	☒	☐	SINGLE OR DOUBLE
☐	☒	☐	PRE-ENGINEERED PER MANUF'S SPECS
☐	☒	☐	CANTILEVERS AS PER DESIGN

2. GIRDERS AND BEAMS:
- ☒ SIZED PER PLAN
- ☒ TYPE
- ☒ GRADE, SPECIES
- ☒ LOCATION AND RELATION TO THE PLAN
- ☒ NAILING
- ☒ ATTACHMENT SCHEDULE
- ☒ BEARING
- ☒ LAPPING

3. FLOOR JOIST:

1ST	2ND	3RD FLOOR	
☐	☒	☐	SIZED PER PLAN
☐	☒	☐	GRADE, SPECIES
☐	☒	☐	PRE-ENGINEERED COMPONENTS AS SPECIFIED
☐	☒	☐	BEARING
☐	☒	☐	NAILING
☐	☒	☐	BRIDGING
☐	☒	☐	CUTTING AND NOTCHING (AS PER CODE)
☐	☒	☐	POINT LOADS - SUPPORTED AS PER PLAN
☐	☒	☐	SPAN HANGERS
☐	☒	☐	HEADERS
☐	☒	☐	FRAMED OPENINGS

4. FLOORING, SHEATHING, OR DECKING:

1ST	2ND	3RD FLOOR	
MATERIAL			
☐	☒	☐	PANEL SPAN, THICKNESS
SPECIAL REQUIREMENTS			
☐	☒	☐	EDGE BLOCKING (IF REQUIRED)
☐	☒	☐	GAPPING
☐	☒	☐	LAYOUT

5. STAIR ATTACHMENT:

1ST	2ND	3RD FLOOR	
☒	☒	☐	BEARING
☒	☒	☐	NAILING

4/24/03

C. Wall Framing

1. Exterior Wall Frame:

1ST	2ND	3RD Floor	
☒	☒	☐	Size
☒	☒	☐	Space
☒	☒	☐	Species and Grade
☒	☒	☐	Cutting, Notching, and Boring
☒	☒	☐	Header Sizes
☒	☒	☐	Jack Stud Bearing

Top Plates

☒	☒	☐	Nailing
☒	☒	☐	Laps
☒	☒	☐	Rafter Ties
☒	☒	☐	Hurricane Straps (as required)

2. Interior Load-Bearing Walls:

1ST	2ND	3RD Floor	
☒	☒	☐	Size
☒	☒	☐	Space
☒	☒	☐	Layout - Support Below per Code
☒	☒	☐	Species and Grade
☒	☒	☐	Cutting, Notching, and Boring
☒	☒	☐	Fire Blocking
☒	☒	☐	Header Sizes
☒	☒	☐	Jack Stud Bearing

Top Plates

☒	☒	☐	Nailing
☒	☒	☐	Laps
☒	☒	☐	Strapping

3. Interior Non-Load-Bearing Walls:

1ST	2ND	3RD Floor	
☒	☒	☐	Size
☒	☒	☐	Space
☒	☒	☐	Species and Grade
☒	☒	☐	Cutting, Notching, and Boring
☒	☒	☐	Fire Blocking
☒	☒	☐	Header Sizes
☒	☒	☐	Top Plate Nailing

D. Roof Framing

1. Truss Roof Framing (as per design):

Approved Documents which Show:

- ☐ Layout Plans
- ☐ Truss Members
- ☐ Connection Schedule
- ☐ Permanent Bracing Details
- ☐ Dormers/Roof Structures on Manufacturer's Drawings
- ☐ Equipment/Appliances on Manufacturer's Drawings

☐ Location as per Layout
- ☐ Alignment

☐ Bearing

☐ Spacing

☐ Connections to Bearing Points

☐ No Connection to Non-Bearing Points

☐ Damage and Defects
- ☐ Engineered Method of Repair

2. Permanent Truss-to-Truss Bracing (as per design):

- ☐ Layout
- ☐ Size
- ☐ Type
- ☐ Nailing
- ☐ Overlap
- ☐ Termination
- ☐ Transition (i.e., Cross) Bracing

3. Gable End Bracing (as per design):

- ☒ Layout
- ☒ Size
- ☒ Type
- ☒ Nailing
- ☒ Overlap
- ☐ Termination

4. Solid Sawn Roof Framing:

- ☒ Size
- ☒ Grades, Species

Layout
- ☒ Spacing
- ☒ Span

☒ Bearing

☒ Fastening
- ☒ Damage Caused by Fasteners (rafters not split by toenails)

☒ Cutting, Notching, and Boring

☒ Bridging

☒ Ridge Size

☒ Hurricane Ties Where Applicable

E. Sheathing

1. Sheathing – Exterior Walls:

Material
- ☐ Panel Span, Thickness BLOCK WALLS

Special Requirements
- ☐ Gapping
- ☐ Layout
- ☐ Corner Bracing (if required)

2. Sheathing – Roof:

Material
- ☒ Panel span, Thickness

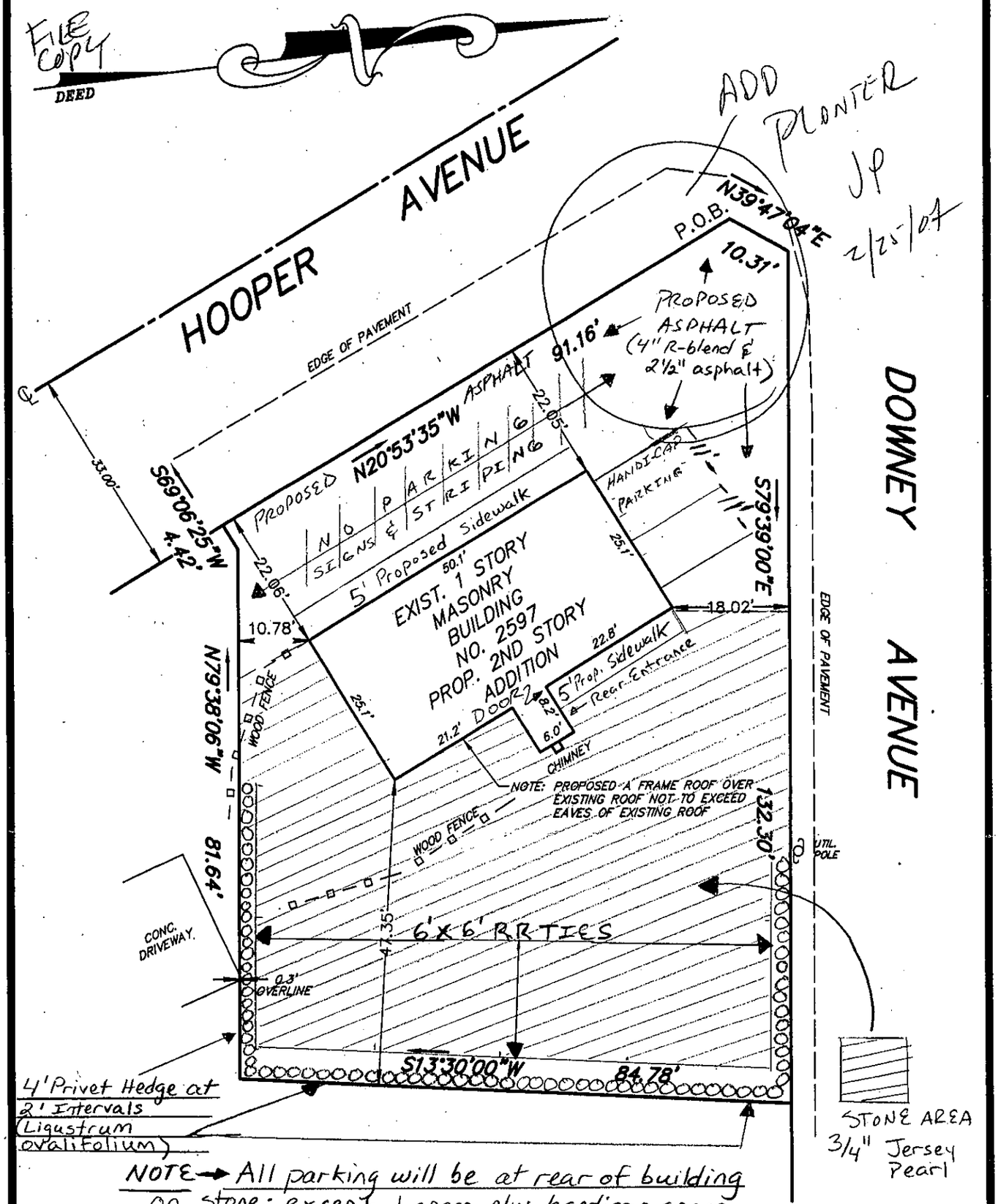
Special Requirements
- ☒ Blocking, Edge (if required)
- ☒ Clips (if required)
- ☒ Gapping
- ☒ Layout

Sheathing, FRT – Roof
- ☐ Four Feet from Firewall
- ☐ Non-corrosive Fasteners

04-0093

FILE COPY

DEED



NOTE → All parking will be at rear of building on stone; except 1 space plus handicap space at side of building on asphalt.

DEED REFERENCE: BOOK 11024 PAGE 1486

REVISED 11/14/03 - ADD 2ND STORY ADDITION

SURVEY OF PROPERTY
LOT 1 BLOCK 565
BRICK TOWNSHIP TAX MAP

BRICK TOWNSHIP
OCEAN COUNTY NEW JERSEY
Filed Map No. DATE FILED

THIS SURVEY IS CERTIFIED AS HAVING BEEN PREPARED UNDER MY DIRECT SUPERVISION TO:
KRISTI SHAY CONSTRUCTION, INC.

I HEREBY CERTIFY THAT THIS SURVEY WAS ACTUALLY MADE ON THE GROUND AS PER RECORD DESCRIPTION AND IS CORRECT AND THERE ARE NO ENCROACHMENTS EITHER WAY ACROSS PROPERTY LINES EXCEPT AS SHOWN

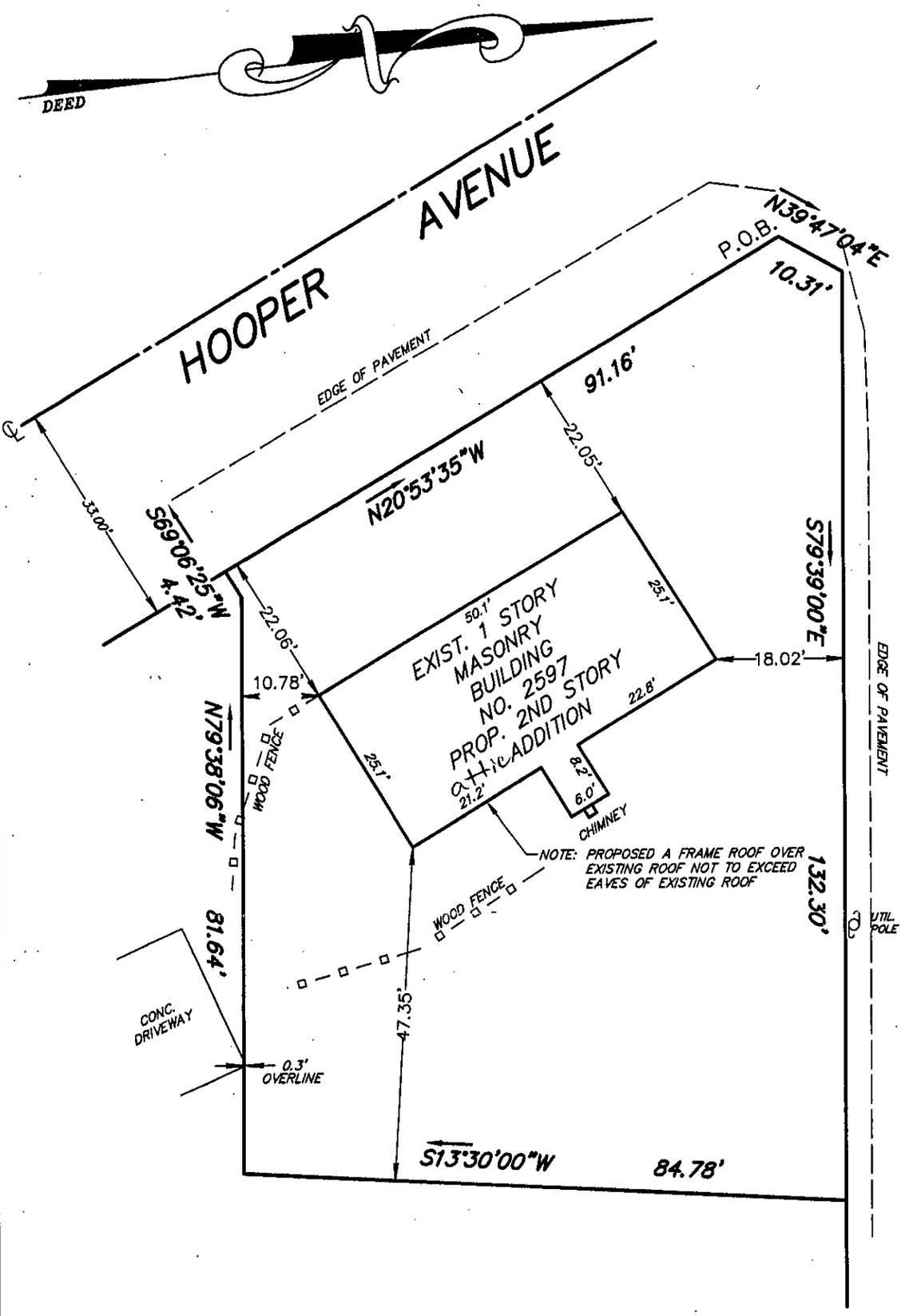
MORRIS & GLASGOW, INC.
LAND SURVEYING & PLANNING
1119 ARNOLD AVENUE
POINT PLEASANT BOROUGH, N.J. 08742
732-899-0965

Elbert Morris 11/7/03

ELBERT MORRIS Date
New Jersey Lic. Professional Land Surveyor No. 8509

Date:	Scale:	Job No.	Map No.
11/04/03	1"=20'	03-202	2-3303

C:\P\03-202\2-3303 Fri Nov 14 13:09:30 2003



DEED REFERENCE: BOOK 11024 PAGE 1486

REVISED 11/14/03 – ADD 2ND STORY ADDITION

SURVEY OF PROPERTY

LOT 1 BLOCK 565

BRICK TOWNSHIP TAX MAP

BRICK TOWNSHIP

OCEAN COUNTY NEW JERSEY

Filed Map No. DATE FILED

THIS SURVEY IS CERTIFIED AS HAVING BEEN PREPARED UNDER MY DIRECT SUPERVISION TO:
KRISTI SHAY CONSTRUCTION, INC.

I HEREBY CERTIFY THAT THIS SURVEY WAS ACTUALLY MADE ON THE GROUND AS PER RECORD DESCRIPTION AND IS CORRECT AND THERE ARE NO ENCROACHMENTS EITHER WAY ACROSS PROPERTY LINES EXCEPT AS SHOWN

MORRIS & GLASGOW, INC.
LAND SURVEYING & PLANNING
1119 ARNOLD AVENUE
POINT PLEASANT BOROUGH, N.J. 08742
732-899-0965

Elbert Morris Jr. 11/7/03

ELBERT MORRIS Date

New Jersey Lic. Professional Land Surveyor No. 8509

Date:	Scale:	Job No.	Map No.
11/04/03	1"=20'	03-202	2-3303

C:\P\03-202\2-3303 Fri Nov 14 13:09:30 2003

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: 2597 old hooper
Block: 565 Lot: 1
Owner's Name: Kristi Shay
Owner's Mailing Address: 63 Channel dr
Brick NJ 08723
Phone: ( ) 477-4665

BUILDING

Contractor:
Address:

Phone#:
Lis #
Federal Emp # or SSN

Technical Data

Description of Work:

Type of Work

___New Building	___Siding
___Addition	___Fence
___Alteration	___Pool
___Roofing	___Demolition
___Asbestos Abatement	___Sign _____sq ft
___Fireplace wd/gas	

Building Characteristics

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

Cost of Alteration: $

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

ELECTRICAL

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

Estimated Cost of Electrical Work:

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

CONTRACTOR'S SEAL

Update 04-0093

Counter Form
PLEASE PRINT

PLUMBING

Contractor: Jemco Plbg Inc
Address: 5 Amy ct
Howell 07731
Phone #: 458-4744
Lis #: 11191
Federal Emp # or SSN 22-3816578

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	
Lavatory (BR Sink)	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bib	
Gas Piping	
Fuel Oil Piping	
Water Heater	① ①
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Air Conditioner (Condensate Drain)	
Septic Tank Closure	
Sewer Service Connection	
Water Service Connection	
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	
Sump Pump	
Pool Heater	

Other:
Permit update

Estimated Cost of Plumbing Work 300

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: [signature]

Please Print Name: A. Caccia

CONTRACTOR'S SEAL

FIRE

LC 04-0093

Contractor:
Address:

Phone #:
Lis #:
Federal Emp # or SSN

Technical Data

Description of Work:

Heating Type: ____Gas ____Oil ___Electric ____Solar
Heating System is ___New ___Existing
Location of Furnace/Boiler:
Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision:
Proprietary Supervision:

Flammable Storage Tanks _____capacity_____fuel
Combustible Storage Tanks_____capacity_____fuel
LPG Storage Tanks_____capacity_____fuel

Item	Quantity
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust System	

Pre-Engineered Systems:
CO2 Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas/ Oil Fired Appliances:
Gas Stove
Gas Dryer
Furnace (Gas or Oil)
Gas Fireplace
Gas Logs
Total Appliances

Wood Burning Stove
Wood Fireplace
Other:

Estimated Cost of Fire Work

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Print Name:

04-0093

FE

Township of Brick

Counter Form

(PLEASE PRINT)

Site Location: 2597 Old Hooper Ave
Block: _____ Lot: _____
Owner's Name: Kristi Shay Const
Owner's Mailing Address: 68 Channel Dr
Brick NJ 08723
Phone: (732) 477 9665

BUILDING

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

Technical Data

Description of Work:

Type of Work

___New Building	___Siding
___Addition	___Fence
___Alteration	___Pool
___Roofing	___Demolition
___Asbestos Abatement	___Sign _____sq ft
___Fireplace wd/gas	

Building Characteristics

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

Cost of Alteration: $ _____

Cost of New Building: $ _____

Cost of Site Work $ _____

Total Cost of New Building Work: $ _____

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: _____

Please Print Name _____

ELECTRICAL

Contractor: Dickson Electric
Address: 347 Drum Point Road
Brick NJ. 08723
Phone#: 732-920-6441
Lis #: 8392
Federal Emp # or SSN 22-2707689

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 (Receptacles, Switches, Lights, Motor 1HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	1-2Kw UNIT KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: 1230

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: _____

Please Print Name James C. Dickson

CONTRACTOR'S SEAL

04-0093
Update

Township of Brick
Counter Form
(PLEASE PRINT)

+A

Site Location: 2597 Old Hooper Ave
Block: 565 Lot: 1
Owner's Name: Kristi Shay Const.
Owner's Mailing Address: 63 Channel Dr
Brick NJ 08723
Phone: (732) 477-4665

BUILDING

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

Technical Data

Description of Work:

Type of Work

___New Building	___Siding
___Addition	___Fence
___Alteration	___Pool
___Roofing	___Demolition
___Asbestos Abatement	___Sign _____sq ft
___Fireplace wd/gas	

Building Characteristics

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

Cost of Alteration: $

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

ELECTRICAL

Contractor: Dickson Electric
Address: 347 Drum Point Road
Brick NJ, 08723
Phone#: 732-920-6441
Lis #: 8392
Federal Emp # or SSN 22-2707689

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	
Switches	
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	11
Alarm Devices/FAC Panel	
Total	
Pool (Receptacles, Switches, Lights, Motor 1HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	1 - 4 KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: $1000

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name James C. Dickson

CONTRACTOR'S SEAL

UPDATE 04-0093
DATE 2-6-04
INITIALED BY
FOR Update 04-0093 Elec
Change of Contractor

Township of Brick

Counter Form

(PLEASE PRINT)

Site Location: 2597 Old Hooper Ave
Block: 565 Lot: 1 & 2
Owner's Name: Kristi Shay Construction
Owner's Mailing Address: 68 Channel Drive Brick NJ 08723

Phone: (732) 477-4665

BUILDING

Contractor:
Address:

Phone#:
Lis #
Federal Emp # or SSN

Technical Data

Description of Work:

Type of Work

___New Building	___Siding
___Addition	___Fence
___Alteration	___Pool
___Roofing	___Demolition
___Asbestos Abatement	___Sign _____sq ft
___Fireplace wd/gas	

Building Characteristics

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

Cost of Alteration: $

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

ELECTRICAL

Contractor: Dickson Electric
Address: 347 Drum Point Road
Brick NJ, 08723
Phone#: 732-920-6441
Lis #: 8392
Federal Emp # or SSN 22-2707689

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

Estimated Cost of Electrical Work:

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name James C. Dickson

CONTRACTOR'S SEAL

Change of contractor only

Township of Brick

Counter Form

(PLEASE PRINT)

Site Location: 2597 old hopper ave

Block: 565 Lot: 182

Owner's Name: Kurt i-Shaffer

Owner's Mailing Address: 69 Chandler Dr Brick NJ 08723

Phone: (732) 477-4665

BUILDING

Contractor:

Address:

Phone#:

Lis #

Federal Emp # or SSN

Technical Data

Description of Work:

Type of Work

___New Building	___Siding
___Addition	___Fence
___Alteration	___Pool
___Roofing	___Demolition
___Asbestos Abatement	___Sign _____sq ft
___Fireplace wd/gas	

Building Characteristics

Use Group Present:_____ Proposed:_____

No of Stories:

Height of Structure:

Area of the largest floor:

Area of New Structure:

Volume of New Structure:

Total Land Disturbed:

Cost of Alteration: $

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

ELECTRICAL

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

Estimated Cost of Electrical Work:

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor: Jemco Plumbing & Heating
Address: 5 Amy CT
Howell NJ 07731
Phone #: 458-4744
Lis #: 11191
Federal Emp # or SSN 22-3816578

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	
Lavatory (BR Sink)	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bib	
Gas Piping	
Fuel Oil Piping	
Water Heater	
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Air Conditioner (Condensate Drain)	
Septic Tank Closure	
Sewer Service Connection	
Water Service Connection	
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	
Sump Pump	
Pool Heater	

Other:

not doing AC

Estimated Cost of Plumbing Work 2100.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name: Anthony CACCIOTTI

CONTRACTOR'S SEAL

FIRE

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

Technical Data

Description of Work:

Heating Type: ___Gas ___Oil ___Electric ___Solar
Heating System is ___New ___Existing
Location of Furnace/Boiler:
Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision:
Proprietary Supervision:

Flammable Storage Tanks ____capacity____fuel
Combustible Storage Tanks____capacity____fuel
LPG Storage Tanks____capacity____fuel

Item	Quantity
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust System	

Pre-Engineered Systems:
CO2 Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas/ Oil Fired Appliances:
Gas Stove
Gas Dryer
Furnace (Gas or Oil)
Gas Fireplace
Gas Logs
Total Appliances

Wood Burning Stove
Wood Fireplace
Other:

Estimated Cost of Fire Work

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Print Name:

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: 2547 OLD HOOPER AVE
Block: 565 Lot: 1,2
Owner's Name: KRISTI-SHAY CONSTRUCTION
Owner's Mailing Address: 63 CHANNEL PL BRICK NJ 08723
Phone: (732) 477-4665

BUILDING

Contractor: KRISTI-SHAY CONSTRUCTION
Address: 63 CHANNEL PL
BRICK NJ 08723
Phone#: 732 477-4665
Lis # 26379
Federal Emp # or SSN 22-3528180

Technical Data

Description of Work:

1ST FLOOR RENOVATION
2ND FLOOR ADDITION
NEW ROOF, SIDING, WINDOWS
NEW HEAT & A/C
(1) NEW BATH

Type of Work

___ New Building	___ Siding
___ Addition	___ Fence
X Alteration	___ Pool
___ Roofing	___ Demolition
___ Asbestos Abatement	___ Sign ___ sq ft
___ Fireplace wd/gas	

Building Characteristics

Use Group Present: ___ Proposed: R3
No of Stories: 1
Height of Structure: 25'
Area of the largest floor: 216 SQ FT
Area of New Structure: 1030 SQ FT
Volume of New Structure: 17,138 CU FT
Total Land Disturbed: 0

Cost of Alteration: $ ~~20000~~ 10000
Cost of New Building: $ 20 000
Cost of Site Work $ ___
Total Cost of New Building Work: $ ___

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: Sam Reynolds
Please Print Name Sam Reynolds

ELECTRICAL

Contractor: Robert J. McLaughlin Elec. Contr. Inc.
Address: 12 8th ST
BAINBRIDGE, N.J. 08005
Phone#: 609-660-0306
Lis #: 10990
Federal Emp # or SSN 22 345 1834

Technical Data

Item	Quantity
Lighting Fixtures	39
Receptacles	50
Switches	16
Detectors	
Light Poles	
Motors w/ Fract. HP	1 BATH FAN
Emergency & Exit Lights	7
Communication Points	
Alarm Devices/FAC Panel	
Total	

Pool (Receptacles, Switches, Lights, Motor 1HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	1 4 TON KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	1 - 200 AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	1 GAS
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: 2500.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: Robert J McLaughlin
Please Print Name Robert J McLaughlin

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor: MCCue P+H
Address: 3 N Spring St
Lee MA 02087
Phone #: 609 817 9488
Lis #: 6623
Federal Emp # or SSN [redacted]

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	1
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	
Lavatory (BR Sink)	1
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bib	1
Gas Piping	✓
Fuel Oil Piping	
Water Heater	1
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Air Conditioner (Condensate Drain)	1
Septic Tank Closure	
Sewer Service Connection	4" existing
Water Service Connection	3/4 existing
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	
Sump Pump	
Pool Heater	
Other:	1 - unit

EXISTING FIXTURES TO BE REMOVED

All new

Estimated Cost of Plumbing Work $500.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: James MCCue
Please Print Name: JAMES MCCUE

CONTRACTOR'S SEAL

FIRE

Contractor: RAISTI-SHAY CONSTRUCTION
Address: 63 CHANNEL DR
BASIL WI 08723
Phone #: 732 477-4665
Lis #: 26379
Federal Emp # or SSN 22-3[redacted]

Technical Data

Description of Work:

Heating Type: X Gas ___ Oil ___ Electric ___ Solar
Heating System is X New ___ Existing
Location of Furnace/Boiler: UTILITY ROOM
Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision:
Proprietary Supervision:

Flammable Storage Tanks ___ capacity ___ fuel
Combustible Storage Tanks ___ capacity ___ fuel
LPG Storage Tanks ___ capacity ___ fuel

Item	Quantity
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust System	

Pre-Engineered Systems:
CO2 Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas/ Oil Fired Appliances:
Gas Stove
Gas Dryer
Furnace (Gas or Oil) 1
Gas Fireplace
Gas Logs
Total Appliances 2

Wood Burning Stove
Wood Fireplace
Other: 4 @ LIGHTED EXIT SIGNS
H/W HEATER

Estimated Cost of Fire Work 500.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: Sam Reynolds
Print Name: Sam Reynolds