

OK ED

TOWNSHIP OF BRICK

BUILDING



CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: 399 BRICK BLVD, BRICKTOWN (DRUM BEINT PLAZA)
2. Owner Name: ARTHUR WILLIAMSON JR. Tel. 201, 341-6767
Address: 1310 HOPPER AVE, TOMS RIVER NJ
3. Principal Contractor: SAME Tel. ()
Address: _____
Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
4. Architect or Engineer: _____ Tel. ()
Address: _____
5. Responsible Person in Charge of Work: KEITH WILLIAMSON Tel. 201, 341-6767

II. PROPOSED WORK

A. TYPE OF WORK

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

B. CATEGORIES OF WORK

Permit/Category	Estimated
1. ☐ Building/Structural	\$ _____
2. ☐ Plumbing	_____
3. ☐ Electrical	_____
4. ☐ Fire Protection	_____
5. ☐ Other _____	_____
6. ☐ Other _____	_____
TOTAL COST <u>\$2,000</u>	

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

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

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R-1) If new construction, enter no. of dwelling units _____
2. ☐ Multi-Family (R-2)
HMD Reg. No.: _____
3. ☐ Two Family (R-3b)
4. ☐ One-Family (R-3a) If other than new construction, enter no. of dwelling units:
Before Construction: _____
After Construction: _____
Net Gain (or loss): _____

B. NON-RESIDENTIAL

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

State Specific Use: _____

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

B. HEATING FUEL

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

C. TYPE OF SEWAGE DISPOSAL

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

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

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

LDS BR 10310238

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

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

- A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.
- B. ☐ I further certify that I will perform the work below.
- B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 46:3B-1 et. seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.
- D. ☐ I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE _____ DATE _____

II. AGENT SECTION

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

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

☐ Check if contractor.

AGENT NAME _____ TEL.() _____

ADDRESS _____

SIGNATURE _____

NO. 5714 LOT NO. 137-16

SUBDIVISION Chem 17. Please PERMIT NO. 7750

PRIOR APPROVALS CHECKLIST

[illegible]

I. PLAN REVIEW STATUS

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

☐ PARTIAL RELEASES

☐ PROTOTYPE PLAN - FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By		Approval Date	Reviewer	Comments
		Date	Receiver			
☒	BUILDING	9-28-84		10-3-84	EJ	
	Footings/Foundations					
	Framing					
	Architectural					
	Other					
☐	PLUMBING					
☐	ELECTRICAL					
☒	FIRE PROTECTION			10-4-84	ARC	APP AS NOTED
☐	OTHER					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions		Final Inspection	Comments
	ALL CONSTRUCTION				
	BUILDING				
	Footings/Foundations				
	Framing				
	Architectural				
	Other				
	PLUMBING				
	ELECTRICAL				
	FIRE PROTECTION			OK	Plumb final on sig. 20 dlc
	OTHER			07C	
				10-10-84	

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

	Date Issued
☐ Temporary Certificate of Occupancy	
Date Expired	
☐ Temporary Certificate of Occupancy	
Date Expired	
☒ Certificate of Occupancy	10/30/84
No. 2238	
☐ Certificate of Continued Occupancy	
No.	
☐ Certificate of Approval	
No.	
☐ None	

IV. ON-GOING INSPECTIONS

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

V. FEE SUMMARY

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

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	2 Times 7.50	AMOUNT
BUILDING		\$ 15.00
PLUMBING		
ELECTRICAL		
FIRE PROTECTION		
OTHER		
SUBTOTAL		\$ 15.00
- LESS: 20% of subtotal (when plan review performed by state agency).		(5.00)
D.C.A. TRAINING FEE .0006 x		25.00
CERTIFICATE OF OCCUPANCY		
OTHER		
OTHER		
TOTAL COLLECTED WHEN PERMIT ISSUED		\$ 45.00
DATE: 10-9-84		Collected By: Pcla

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

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

C. TOTAL CONSTRUCTION FEES COLLECTED

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



CERTIFICATE

CERT. NO.	2238
DATE ISSUED	10-30-84
Block	341B
Lot	15-16
Subdivision	

IDENTIFICATION

Owner Arthur Williams Agent Same
 Address 130 Hopper on Address _____
 Tel. (____) _____ Tel. (____) _____
 Work Site Address 399 Buck Blue Lic. No. _____
 Federal Emp. No. _____

PAYMENTS

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

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☒ CERTIFICATE OF OCCUPANCY☐ CERTIFICATE OF APPROVAL

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

B. ☐ CERTIFICATE OF CONTINUED OCCUPANCY

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

C. ☒ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than Nov 30, 19 84 or the owner will be subject to a fine or order to vacate:

plg fees 20-~ Pd 10-30-84

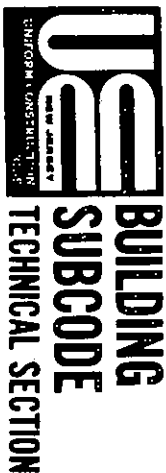
D. DESCRIPTION OF WORK:

USE GROUP M FIRE GRADING 3 1/2
 MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____
 SPECIFIC USE _____

FINAL COST OF CONSTRUCTION: \$ 2000

Arthur Pizzo
 CONSTRUCTION OFFICIAL

TOWNSHIP OF BRICK



PERMIT NO. 3238
 DATE ISSUED 10-2-84
 REVISION DATE _____
 Block 547A Lot 15 & 16
 Subdivision Dunn Pt. Place

A. IDENTIFICATION

APPLICANT - Complete unstaked areas only

When changing contractors, notify this office

Owner Robert Williams

Contractor same

Address 1310 Cooper Ave

Address _____

Tel. 201 341-6767

Tel. (____) _____

Work Site Address 399 Brick Blvd
Corum Point Plaza

Lic. No. _____
 Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

Real Estate Office
divulsiue

TYPE OF WORK:

- ☐ New Building
☐ Addition
☐ Alteration/Renovation
☐ Roofing
☐ Siding
☐ Other _____
☐ Demolition
☐ Miscellaneous
☐ Fence
☐ Sign
☐ Pool
☐ Elevator
☐ Other _____

Fee Basis

Fee

SUBTOTAL

Minimum Building Fee (if applicable)

Total Building Fee (Greater of Minimum or Subtotal)

D. COMMENTS

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____

No. of Stories _____ Total Building Area--All Floors _____ Sq. Ft.

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

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

Estimated Cost of Building Work: \$ _____

☐ Partial Releases ☐ Prototype Processing

JOB CONDITION/COMMENTSMaximum Live Load: $3\frac{1}{2}$

Maximum Occupancy Load:

INSPECTIONS

☒ CO ☐ CCO ☐ CA

Date: 10-19-88

Inspected By:

Type Personnel
9-170092
ng/Foundation

[illegible]Health

PLAN REVIEW AND INSPECTION - RE

DATE

10-4-84

JOB CONDITION/COMMENTS

PLAN Review: All As NOTED

399 BRICK BLVD
BLOCK 547A LOT 15-16

(1) FIRE EXT (2) 5-10 LB

(2) EXIT SIGNS

(3) EMER. LIGHTING

9-20-84 FIRE INSP: FAIL - NO PLAS-EXT

10-4-84 FIRE INSP: NOT DONE

(1) NEED 2 FIRE EXTING. (5 LB)

JOB SUMMARY

☐ No Plans Required

☒ Plan Review Approved

AS NOTED

Date: 10-4-84

Approved By: *Mike Chyba*

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 10-10-84

Inspected By: *R. H. Chaudet*

INSPECTIONS

Type

☐ Fire Suppression Test

☐ Fire Alarm Test

☐ Smoke Test

☐ TCO

☒ Other *FLAME*

☐ Other

☐ Other

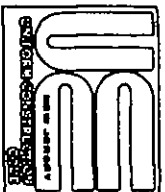
☐ Other

Failure Date

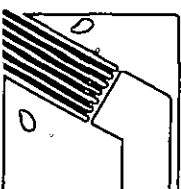
9-20-84 10-4-84

Approval Date

TOWNSHIP OF BRICK



PLUMBING SUBCODE TECHNICAL SECTION



PERMIT NO. _____
DATE ISSUED _____
REVISION DATE _____
Block 3414 Lot 15-16
Subdivision _____

A. IDENTIFICATION

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

Owner William H. Smith Contractor Anthony T. Lawrence Sr.
Address 161 HALE AVE Address 24116 TAD. RD. S.
Tel. 477-2544 Tel. (201) 344-9310
Work Site Address 3900 1/2 PINE OAK BLVD Lic. No./Bus. Permit 927
~~3900 1/2 PINE OAK BLVD~~ Federal Emp. No. _____

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

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

Anthony T. Lawrence Sr.
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
1	Water Closet/Bidet/Urinal	\$		Garbage Disposal	\$	COLUMN 1
1	Bathtub		1	Air Conditioner Unit		COLUMN 2
1	Lavatory/Sink			Indirect Connection		SUBTOTAL \$
	Shower/Floor Drain			Sewer Ejector		Minimum Plumbing Fee
	Washing Machine			Grease Trap		(If applicable)
	Dishwasher			Backflow Device		Total Plumbing Fee
	Commercial Dishwasher			Reduced Pressure		(Greater of Minimum
1	Water Heater			Backflow Device		or Subtotal)
1	Domestic Boiler/			Vent Stack		
	Furnace			Solar System		
	Steam Boiler		1	Other		
	Water Util. Connection			Other		
	Sewer Util. Connection			Other		
	Hose Bibb			Other		
	Water Cooler			Other		
COLUMN 1		\$	COLUMN 2		\$	

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____

Drainage - Material PVC Size 3" x 2"

Building Sewer - Material PVC Size 4"

Water Service - Material ABS Size 1"

Venting - Material PVC Size 3" x 2"

Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

Extra fix w/c, 1 hour = \$20 = \$40.00
CN Active Plumbing
\$0.30 x 87

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION - PLUMBING

DATE

JOB CONDITION/COMMENTS

8-22-84 Extra fix vents ok slab 1/2 in & 1/2 in
8-31-84 EXTRA LAVATORY ROUGHING O.K.

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved

Date: 6-1-84

Approved By: J. D. Smith

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 9-27-84

Inspected By: D. McCall

INSPECTIONS

Type

☒ Slab
☒ Rough
☐ Water
☐ Sewer
☐ Energy
☐ Mechanical
☐ TCO
☐ Other

Failure Dates

Approval Date

6-29-84
8-31-84

758-0854 Bud Guntter Rick Sharpless

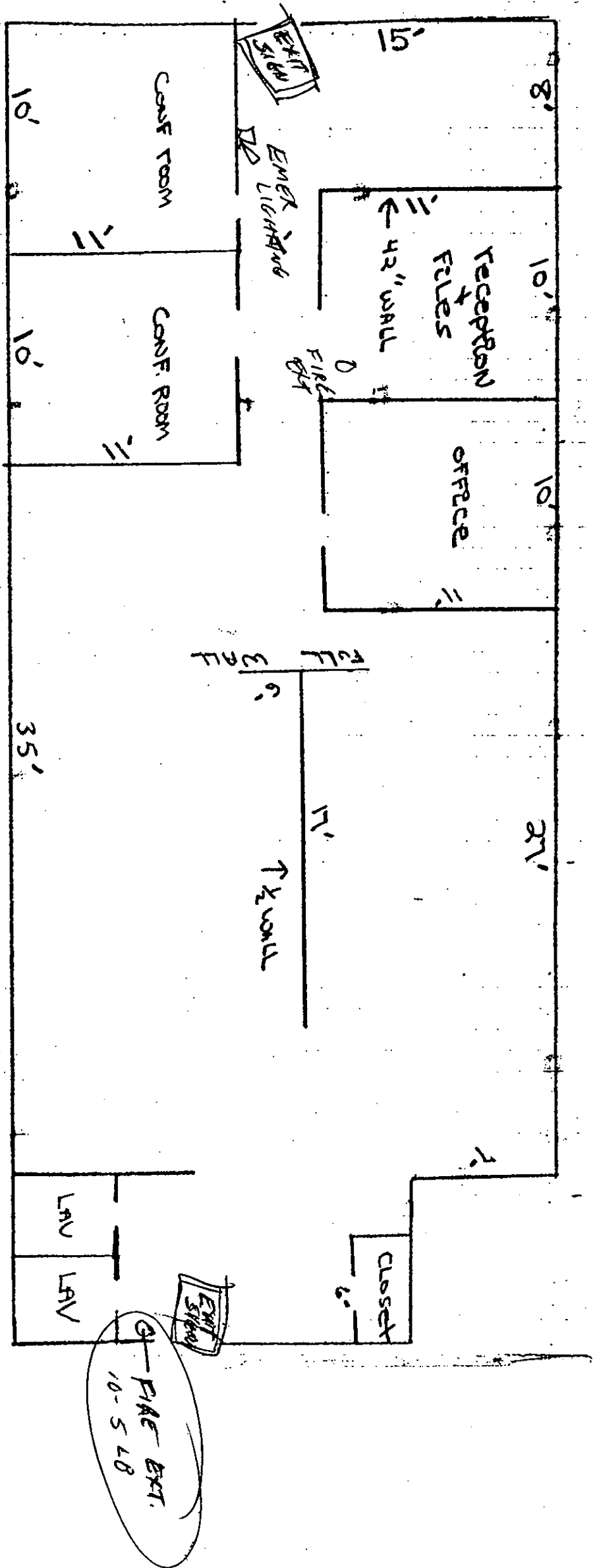
To whom it my concern,

9-26-84

I am hereby requesting a
Certificate of Occupancy for a
Real estate office at 399
Breck Blvd, Down Point Plaza
Bucktown.



Keith Williamson
Broker



OK. Ed
10-3-84

ELECTRICAL OUTLETS
ALL FLOORS CARPET

ARTHUR WILLIAMSON REALTORS
399 BRICK BLVD (FROM BOJIT PLAZA)
1537

9- F/AE EXT.
10-5-88

2238