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

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

Certain information contained in this file is ***Exempt from Release*** under the Open Public Records Act (OPRA) (Public Law 2001, CHAPTER 404 (N.J.S.A. 47:1A-1 et seq.)) and Executive Orders issued by the Governor of New Jersey. The following information ***MUST*** be redacted prior to release:

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

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

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020

BLOCK 10139 LOT 12 QUALIFICATION CODE _____ ADDRESS (SITE) 346 CHAMBERBRIDGE RD BRICK, NJ 08723 PERMIT NO. 19-2151

CONSTRUCTION PERMIT APPLICATION

CA-002394

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

I. IDENTIFICATION

1. Proposed Work Site at: Brick Township High School
2. Name of Owner in Fee: Brick Board of Education
   Tel. (732) 785-3000 e-mail jedwards@brickschools.org
   Address 101 Hendrickson Avenue (street) Brick, NJ (municipality) 08724 (zip code)
3. Ownership in Fee: Public X Private _____
4. Principal Contractor: EACM Corp. Tel. (732) 842-4777
   Address 1070 Ocean Avenue e-mail ester@eacmcorp.com
   Sea Bright, New Jersey 07760
   License No. OR, if new home, Builder Reg. No. 046801 Exp. Date 02/28/2020
   Home Improvement Contractor Registration No. or Exemption Reason _____
   Federal Emp. ID No. 204549931 FAX: (732) 842-4744
5. Architect or Engineer Netta Architects Contact George Tortora
   Address 1084 Rt 22 W, Mountainside, 07092 e-mail gtortora@nettaarchitects.com
   Tel. (973) 379-0006 FAX: (973) 379-1061
6. Responsible Person in Charge once Work has Begun Stephen Cashmore
   Tel. (908) 915-5225 FAX: (732) 842-4744

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 0-		
2. Electrical	0-		
3. Plumbing	0-		
4. Fire Protection	0-		
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ft.	
3. Area — Largest Floor sq. ft.	
4. New Building Area sq. ft.	
5. Volume of New Structure cu. ft.	
6. Max. Live Load	
7. Max. Occupancy Load	
8. If Industrialized Building: State Approved HUD	
9. Total Land Area Disturbed sq. ft.	
10. Flood Hazard Zone	
11. Base Flood Elevation ft.	
12. Wetlands yes _____ no _____	

COMMERCIAL

IIa. PROPOSED WORK

RTU

- ☐ Minor Work
- ☐ New Building
- ☐ Addition
- ☒ Demolition
- ☐ Repair
- ☒ Alteration
- ☒ Renovation
- ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Radon Remediation
- ☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building	127,200	MFF	6/27/19		07/30/19	KEK			
☒ Electrical	24,600	JM	6/27/19		7-9-19	JM			
☐ Plumbing	245,200			7-22-19		DM	8-21-19		DM
☐ Fire Protection				12/19		LAZ	8/8/19		LAZ
☐ Elevator									
TOTAL COST	$397,000								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: Select Group
3. Change in Use Group, Indicate Present: Select Group
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale
   Gained, Rental
   Lost, Sale
   Lost, Rental

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use: School
2. Use Group, Proposed: Select Group
3. Change in Use Group, Indicate Present: Select Group

C. MIXED USE -List secondary use(s): _____
D. Construct. Classification: Present _____ Proposed _____

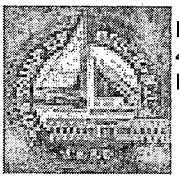
Rolled Plans

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 2/27/2020
Control Number C-19-002394
Permit Number 19-2151
Permit Issue Date 8/15/2019
Certificate Number 19-2151

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 346 CHAMBERS BRIDGE RD. Brick Township, NJ Block: 701.39 Lot: 12 Qual:

Owner in Fee: BRICK TOWNSHIP EDUCATION

Owner Address: 101 HENDRICKSON AVE. BRICK NJ 08723

Telephone: (732) 785-3000

Contractor EACM CORP

Address 1070 OCEAN AVE SEA BRIGHT NJ 07760

Telephone: (732) 842-4777 Fax: (732) 842-4744

License Number or Builders Registration Number: Federal Emp. Number: 20-4549931

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: E Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: HVAC - - BRICK HIGH SCHOOL ...REPLACE 2 R.T.U.'s

Certificate Comments:

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

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

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

☐ **Temporary Certificate of Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

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

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

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 2/27/2020

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

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(f)1.ix:

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, including such certification as the construction official may require, have been given or will be given prior to pemit issuance.

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. 5:23-2.15(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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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.

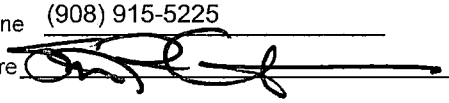
(X) Check if contractor.

Agent Name Stephen Cashmore - EACM Corp.

Address 1070 Ocean Avenue

Sea Bright, New Jersey 07760

Telephone (908) 915-5225

Signature 

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 8/15/19
Control #

Date Issued
Permit # 19-2157

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

Block 20539 Lot 12 Qualification Code

Work Site Location Brick Township High School
346 Chambersbridge Road, Brick, NJ 08723

Owner in Fee: Brick Board of Education

Tel. (732) 785-3000 e-mail jedwards@brickschools.org

Address 101 Hendrickson Avenue (street) Brick, NJ (municipality) 08724 (zip code)

Contractor: EACM Corp. Tel. (732) 842-4777

Address 1070 Ocean Avenue e-mail ester@eacmcorp.com
Sea Bright, New Jersey 07760

Contractor License No. or Builder Registration No. 046801 Exp. Date 02/28/2020

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 204549931 FAX: (732) 842-4744

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	07/30/19	KLK
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 07/30/19
Approved by: KLK.

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] OA
Date: 02/18/19
Approved by: KLK

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final 11-13-19			2/6/20	MA
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ ft.
Area — Largest Floor _____ sq. ft.
New Bldg. Area/All Floors _____ sq. ft.
Volume of New Structure _____ cu. ft.
Max. Live Load _____
Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Rehabilitation $ 127,200
3. Total (1+ 2) $ 127,200

U.C.C. F110 (rev. 11/09)
Internet version

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.
Sign here: _____
Print name here: Stephen Cashmore

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Install new steel frames and duct transitions. Insulate ductwork exterior. Demo 2 RTUs and duct insulation. Scrape and paint existing dunnage and supports. Paint gas pipe and wood blocking.

COMMERCIAL

TYPE OF WORK:
[ ] New Building
[ ] Addition
[X] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Retaining Wall _____ Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other _____
[X] Demolition

FEE (Office Use Only)
$ _____

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

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 8/15/19
Control #
Date Issued
Permit # 19-251

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

Block 701.39 Lot 12 Qualification Code

Work Site Location Brick Twp High School
346 CHAMBERSBRIDGE RD, BRICK, NJ 08723

Owner in Fee: BRICK TWP BOARD of EDUCATION

Tel. 732 785-3000 e-mail JEDWARDS@BRICKSCHOOLS.ORG

Address 101 HENDRICKSON AVE. BRICK, NJ 08724
street municipality zip code

Contractor: DC Building Systems Tel. (848) 221-2913

Address 729 Fischer Blvd e-mail
Toms River, NJ 08753

Contractor License No. 16615 Exp. Date C

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 264553212 FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 24,000

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here:

Print name here: Craig Catino

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Electric for new RTU

COMMERCIAL

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
2		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
2		200 Amp RTU	
4		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required 7-9-19 MM
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 7-9-19
Approved by: MM

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 11-25-19
Approved by: MM

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			11/22/19	MM
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

PLUMBING SUBCODE
TECHNICAL SECTION

Contract
Peter
cell# 848-468-2104

Date Received 8/15/19
Control #
Date Issued
Permit # 19-2151

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

Block 10013.34 Lot 12 Qualification Code

Work Site Location Brick Township High School
346 Chambersbridge Road, Brick, NJ 08724

Owner in Fee: Brick Board of Education

Tel. (731) 785-3000 e-mail jedwards@brickschools.org

Address 101 Hendrickson Avenue (street) Brick, NJ (municipality) 08724 (zip code)

Contractor: EACM Corp. Tel. (732) 842-4777

Address 1070 Ocean Avenue e-mail ester@eacmcorp.com
Sea Bright, New Jersey 07760

Contractor License No. 19HC00340800 Exp. Date 06/30/2020

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 204549931 FAX: (732) 842-4744

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 245,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Plumbing Plans Approved
Date: 8-21-19 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 8-21-19
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 11-19-19
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping			10-10-19	
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			11-13-19	

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here:

Print name here: Stephen Cashmore

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Install 2 RTUs and associated piping, condensate trap and piping.

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
106	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
2	Other RTU	
	Administrative Surcharge	$
	Minimum Fee	$
	State Permit Surcharge Fee	$
	TOTAL FEE	$

COMMERCIAL

U.C.C. F130 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 8/15/19
Control #
Date Issued
Permit # 19-2151

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

Block 701.39 Lot 12 Qualification Code

Work Site Location Brick Township High School
346 Chambersbridge Road, Brick, NJ 08723

Owner in Fee: Brick Township Board of Education

Tel. (732) 785-3000 e-mail jedwards@brickschools.org

Address 101 Hendrickson Avenue Brick, NJ 08724
street municipality

Contractor: EACM Corp. Tel. (732) 842-4777
zip code

Address 1070 Ocean Avenue e-mail ester@eacmcorp.com

Sea Bright, New Jersey 07760

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P01268

Fire Protection Equipment, NJ Div of Fire Safety Installer No. 154580

Fire Alarm Contractor No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 204549931 FAX: (732) 842-4744

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 20,000

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Applicant/Contractor sign here:

Print name here: Stephen Cashmore

[X] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: two GAS FIRED Roof top units

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	0	
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other 2 GAS FIRED RTU'S		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

COMMERCIAL

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Understab Utilities Approved
Date: Approved by:
[X] Fire Protection Plans Approved
Date: 8/15/19 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 11/6/19
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			11/13/19	KR
Other				

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

NETTAARCHITECTS

August 5, 2019

Mr. Richard Orlando
Brick Township Building Department
Fire Subcode Official
401 Chambersbridge Road
Brick, New Jersey 08723

RE: Auditorium HVAC Replacement Project
BTHS School
Recent Code Requirement for Carbon Monoxide Detection,
Per DCA-Division of Fire Safety-Bulletin 2017-1
NA Project # 2191425

Dear Mr. Orlando:

I am writing this letter in regard to your Fire Sub-code comments for the within the Auditorium and the installation of Carbon Monoxide Detectors, per DCA Bulletin 2017-1, issued on December 12, 2017.

As you are aware this project involves replacement of two Auditorium roof mounted gas fired HVAC units. These units only serve the Auditorium and the existing interior ductwork and wall mounted grilles are to remain and be reused.

To comply with the requirements of this Bulletin 2017-1, battery operated carbon monoxide detectors will be installed in the vicinity of the first supply grilles or registers which discharges directly into the Auditorium Stage/Room. There are a total of two separate first supply grilles located within the Stage of the Auditorium; one grille is located on each side of the Stage. We are proposing installing one detector next to each supply grille. Therefore there will be a total of two detectors installed within the Auditorium/Stage; one detector at each first supply grille. (See the attached Auditorium Floor Plan and marked-up Photo).

Please contact me if you require any additional information.

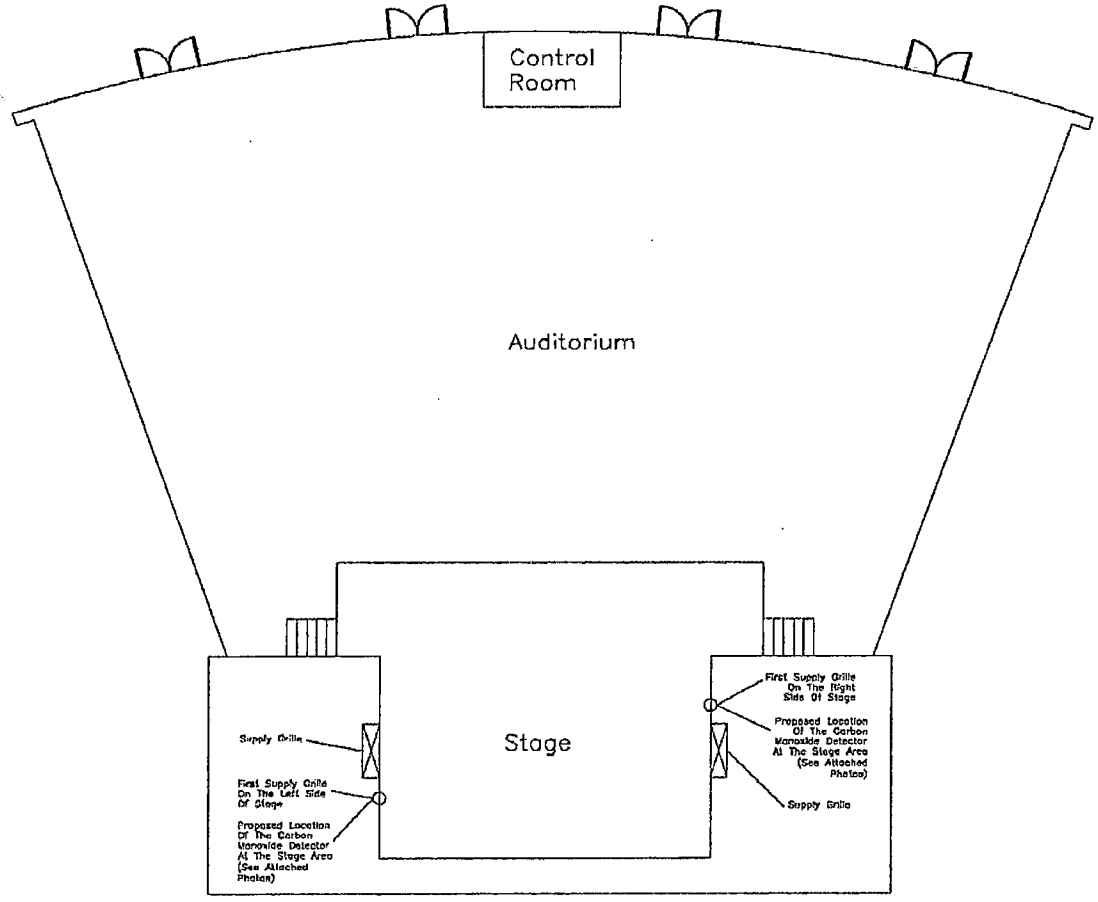
Thank you.
Very truly yours,

George J. Tortora

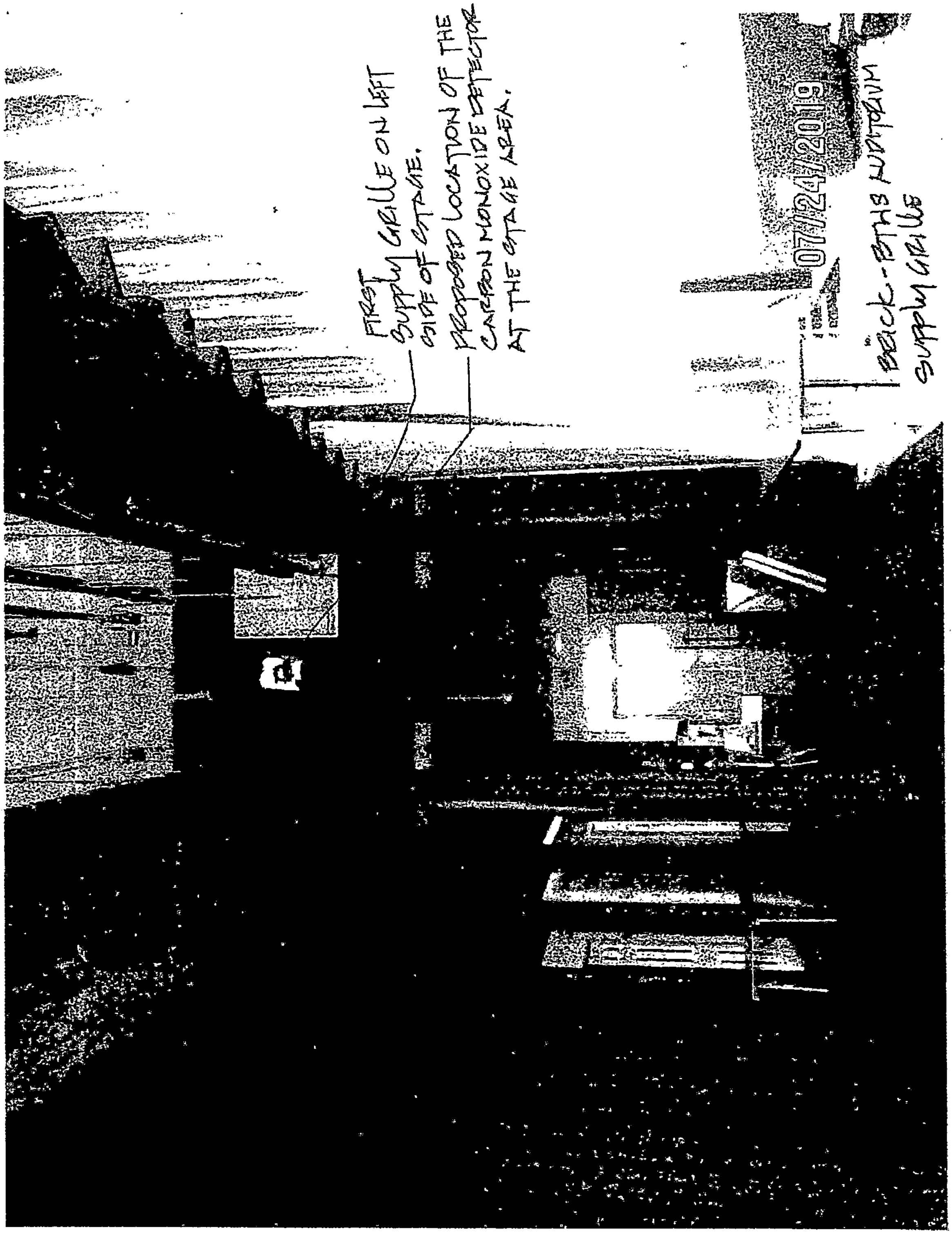
George J. Tortora
Project Manager

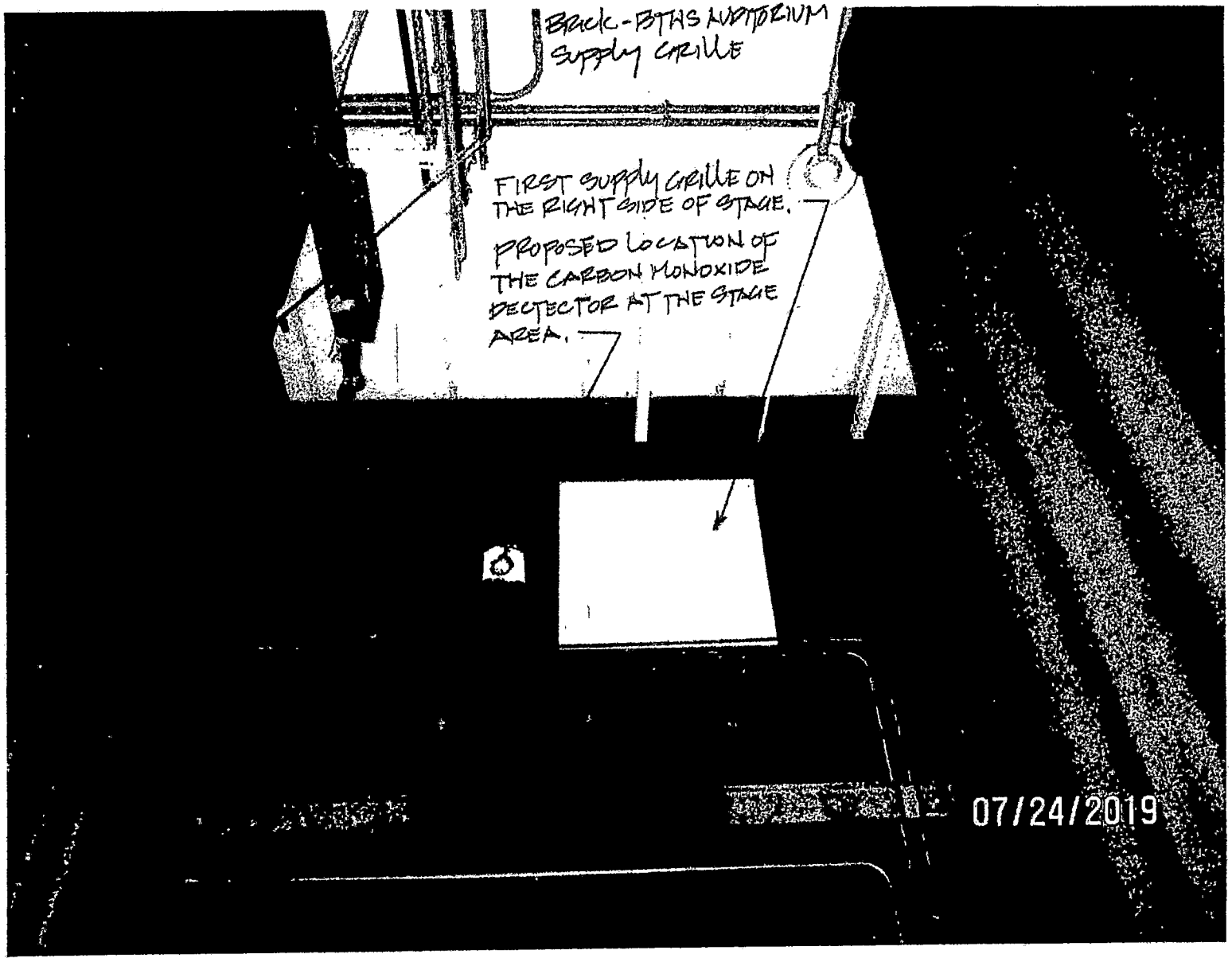
Attachment: Auditorium Floor Plan and Marked up Photo showing the proposed detector locations.

1084 Route 22 West, Mountainside, NJ, 07092
Tel: 973.379.0006 Fax: 973.379.1061 Email: info@nettaarchitects.com



Brick Township High School
Auditorium


FIRST SUPPLY GRILLE ON LEFT SIDE OF STAGE.
PROPOSED LOCATION OF THE CARBON MONOXIDE DETECTOR AT THE STAGE AREA.
07/24/2019
BRICK-BTHS AUDITORIUM SUPPLY GRILLE


BACK-BTHS AUDITORIUM
SUPPLY GRILLE
FIRST SUPPLY GRILLE ON
THE RIGHT SIDE OF STAGE.
PROPOSED LOCATION OF
THE CARBON MONOXIDE
DECTECTOR AT THE STAGE
AREA.
07/24/2019

CONSTRUCTION PERMIT

Date Issued 8/15/2019
Control # C-19-002394
Permit # 19-2151

IDENTIFICATION Block: 701.39 Lot: 12 Qualifier

Work Site Location: 346 CHAMBERS BRIDGE RD. Brick Township, NJ

Owner in Fee: BRICK TOWNSHIP EDUCATION
101 HENDRICKSON AVE. BRICK NJ 08723

Telephone: (732) 785-3000

Contractor: EACM CORP
Address: 1070 OCEAN AVE SEA BRIGHT NJ 07760

Telephone: (732) 842-4777
Lic. No. or Bldrs. Reg. No. 19HC00336200
Federal Employee. No. 20-4549931

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 (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:

HVAC - BRICK HIGH SCHOOL ...REPLACE 2 R.T.U.'s

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 $416,400

Construction Official — Date 8/15/19

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

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$0
CO Fee	
Other	$0
Total	$0
Check No.	
Cash	$0
Credit	$0
Collected By	

1 WHITE - INSPECTOR 2 CANARY - OFFICE **3 PINK - TAX ASSESSOR** 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

- [ ] Required inspections for all subcodes for one- and two-family dwellings are as follows:
  1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
  2. Foundations and all walls up to grade level prior to back filling.
  3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
  4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

  Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- [ ] Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

- [x] A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

- [x] A complete copy of released plans must be kept on the job site.

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Monday, July 22, 2019

To: BRICK TOWNSHIP EDUCATION
101 HENDRICKSON AVE.
BRICK, NJ 08723

RE: Plumbing Subcode
Block: 701.39 Lot: 12 Qual:
346 CHAMBERS BRIDGE RD.
Permit Number: Control Number: C-19-002394
Last Submit Date: Wednesday, July 10, 2019

Dear BRICK TOWNSHIP EDUCATION,

The following comments were made during the Plan Review process:
Plan Page M-003.00 gas piping notes indicates the Code used is IFGC 2009. The state of NJ adopted the IFGC 2015 in September of 2015.
When the load on a gas system is changed the gas pipe sizing must be reevaluated based on the new load. Table 402.4(1) shows the maximum CFH on 6" pipe with a 300 foot run from the point of delivery to the most remote outlet is 8150. 10890 CFH is proposed.
The plan indicates that the total linear feet is 300. If that is the total footage and not the longest run please indicate pipe lengths of the sections of pipe. If 300ft. is the longest run then the pipe is not capable of providing the required volume of gas.

Sincerely,

Daniel F Newman Jr , Subcode Official

CC:

Table 402.4(2)

Resubmit to Plumb after Bldg

Concord Consulting Engineering PC

12 Tree Top Terrace, Morristown, NJ 07960 Tel 973 534 6731

August 5, 2019

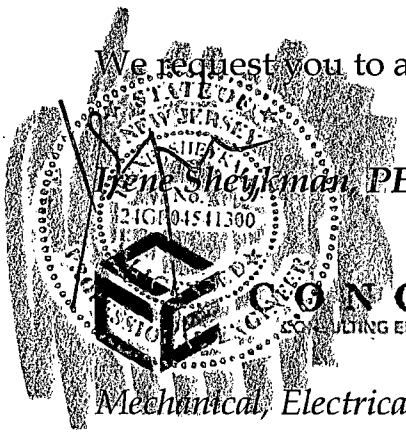
Brick Township
401 Chambers Bridge
Brick, NJ 08723

Re: Plumbing Sub Code
Block 701.39, Lot: 12 qual
346 Chambers bridge Road
Permit# Control number C -19- 002394
Last Submitted Date: July 10, 2019

With reference to the comments made on the review of gas pipe and service, we respond as follows:

1. The Code used the design of the gas piping is International Fuel Gas Code (IFGC) 2015 and not IFGC 2009 as shown on the drawing.
2. The Table used for gas pipe sizes is Table 402.4(2) from IFGC 2015 and not Table 402.4(1) as shown on the drawing.
3. The 300 linear feet is the distance to the farthest point of use and includes allowance for fittings.
4. The pipe sizes shown on the drawing are based on using Table 402.4(2).

We request you to approve the drawings based on the above.



Ilene Sheykman, PE, LEED AP

CONCORD
CONSULTING ENGINEERING PC

Mechanical, Electrical, Plumbing, Fire protection, Fire Alarm

Cell: 973-534-6731

Fax: 973-533-0548

Concord Consulting Engineering PC

12 Tree Top Terrace, Morristown, NJ 07960 Tel 973 534 6731

August 5, 2019

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, July 02, 2019

To: BRICK TOWNSHIP EDUCATION
101 HENDRICKSON AVE.
BRICK, NJ 08723

RE: Fire Subcode
Block: 701.39 Lot: 12 Qual:
346 CHAMBERS BRIDGE RD.
Permit Number: Control Number: C-19-002394
Last Submit Date: Friday, June 28, 2019

Dear BRICK TOWNSHIP EDUCATION,

Your request is hereby denied based upon the following infractions.

1. Need to address fire alarm duct detection disconnect and reconnect with regards to fire alarm.

2. Need carbon monoxide alarms installed as per DCA Bullettin 2017-1

Sincerely,

Richard Orlando, Subcode Official

CC:

Resubmit 8/7/19 RO

* * * Communication Result Report (Jul. 23. 2019 9:40AM) * * *

1)
2)

Date/Time: Jul. 23. 2019 9:39AM

File No.	Mode	Destination	Pg(s)	Result	Page Not Sent
5161	Memory TX	97328424744	P. 2	OK	

Reason for error
E. 1) Hang up or line fail
E. 2) Busy
E. 3) No answer
E. 4) No facsimile connection
E. 5) Exceeded max. E-mail size
E. 6) Destination does not support IP-Fax

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, July 02, 2019

To: BRICK TOWNSHIP BOARD OF EDUCATION
101 HENDRICKSON AVE.
BRICK, NJ 08724

RE: Fire Subcode
Block: 1058 Lot: 15.01 Qual:
103 HENDRICKSON AVE
Permit Number: Control Number: C-19-002385
Last Submit Date: Friday, June 28, 2019

Dear BRICK TOWNSHIP BOARD OF EDUCATION,

Your request is hereby denied based upon the following infractions.

1. Need to address fire alarm duct detection disconnect and reconnect with regards to fire alarm.

2. Need carbon monoxide alarms installed as per DCA Bulletin 2017-1

Sincerely,

Richard Orlando, Subcode Official

CC:

401 Chambers Bridge Road
Brick, NJ 08723
732-262-1030

Brick Township

CORRECTION NOTICE

ADDRESS CHAMBERS Brdg. Rd HS. (346)

PERMIT NUMBER 19-2151 BLOCK _____ LOT _____

~~OWNER~~ FINAL

Upon inspection, violations of the ____ Building ___ Plumbing ___ Electric ___ Fire Code were in evidence and the following orders are hereby issued for their correction:

1) Need to weld Leveling supports on North unit

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED.

DATE 11/13/19 INSPECTOR _____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Monday, July 22, 2019

To: BRICK TOWNSHIP EDUCATION
101 HENDRICKSON AVE.
BRICK, NJ 08723

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Block: 701.39 Lot: 12 Qual:
346 CHAMBERS BRIDGE RD.
Permit Number: Control Number: C-19-002394
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Daniel F Newman Jr , Subcode Official

CC: