

Called 12/3



CONSTRUCTION PERMIT APPLICATION

732-4776577

Sections I, II, III (optional), IV, VI, and VII
Laurelton Park Baptist Church
1595 Route 88

1. Proposed Work Site at: 1395 ROUTE 00

2. Name of Owner in Fee: Lounell Fox Tel. ()

Address 1595 Rt 88 West Black 821 - Lot 19
street municipality zip code

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: Robert E. Sarbrug, Inc Tel. (732) 270-3777

Address 3462 E. Thistle Ave, Toms River, NJ 08753

License No. OR, if new home, Builder Reg. No. Lic # 3595 Exp. Date _____

Federal Employee No. _____ FAX: () _____

5. Architect or Engineer _____ Tel. () _____

Address _____

6. Responsible Person in Charge of Work _____

Tel. () _____ FAX () _____

1. Building	\$ 35	50	15
2. Electrical	50		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	5	2	1
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ 95	52	16

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. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____
 no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

1. ☐ Minor Work
2. ☐ New Building
3. ☐ Addition
4. ☐ Alteration
5. ☐ Fire Protection
6. ☒ Plumbing \$3655
7. ☒ Electrical \$800
8. ☐ Elevator Devices
9. ☐ Asbestos Abat. Subch. 8
10. ☐ Lead Hazard Abatement
11. ☐ Demolition

TOTAL COSTS \$4155.00

[illegible]

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

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

Before Construction _____
After Construction _____
Net Gain or Loss _____

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

LDS BR 10625007

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 Rev. G. R. Fisher for Laurelton Park Baptist Date Nov. 20, 2002

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 _____

Address _____

Telephone (_____) _____

Signature _____

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition	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. _____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

00000006503
XDS SERV.003
\$35.00
\$55.00
\$5.00
\$95.00

Date Issued 12/03/2002
Control #
Permit # 02-4612

IDENTIFICATION Block 821 Lot 19

Work Site Location 1595 ROUTE 88

SINK/TOILET

Owner in Fee LAURELTON BAPTIST CHURCH

Address SAME

BRICK, NJ

Telephone ()

Contractor CROWBECK ELECTRIC

Address 65 FRANK NERI DR

BRICK, NJ 08724-

Telephone (732)840-4830

Lic. No. or Bldrs. Reg. No. 7423

Federal Emp. No. 08-7347790

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:
ELECTRICAL WORK

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 \$ 4,453

Construction Official

12/03/2002
Date

O.C.C. 1170 (rev. 3/76)

PAYMENTS (Office Use Only)

Building 0
Electrical 35
Plumbing 55
Fire Protection 0
Elevator Devices 0
Other
DCA State Permit Fee 5
Cert. of Occupancy 0
Total 95
Check No. 3433
Cash
Collected By SC

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD.
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PERMIT UPDA
CHECK

Update Issued 04/08/2004
Control #
Permit # 02-4612+B
Permit Issued 12/03/2002

000000#8150
**03 SERV.003
\$15.00
\$1.00
\$16.00

IDENTIFICATION Block 821 Lot 19

Qual 04/08/04

Work Site Location 1595 ROUTE 88
WATER SERVICE TO BSMT
Owner in Fee LAURELTON BAPTIST CHURCH
Address SAME
BRICK, NJ
Telephone ()

Contractor ROBERT E. SURBRUG INC.
Address 3462 E. THISTLE AVE
TOMS RIVER, NJ 08753-
Telephone (732)270-3777
Lic. No. or Bids. Reg. No. 3595
Federal Emp. No. 22-1847507

Is hereby granted permission to perform the following work:
☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
WATER PIPING IN BASEMENT

Estimated Cost of Work \$ 600

Mark J. Thompson
Construction Official

04/08/2004
Date

U.C.C. F190 (rev. 3/76) BY ORDERS 5.24E

PAYMENTS (Office Use Only)
Building 0
Electrical 0
Plumbing 13
Fire Protection 0
Elevator Devices 0
Other
DCA State Permit Fee 1
Cert. of Occupancy 0
Other
Total 16
Check No. 15364
Cash
Collected By SC

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 02/28/2003
Control #
Permit # 02-46124A
Permit Issued 12/03/2002

UPC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 821 Lot 19

Equal

Work Site Location 1595 ROUTE 98
HWM/UPGRADE WATER CONNECT
Owner in Fee LAURELTON BAPTIST CHURCH
Address SAME
BRICK, NJ
Telephone ()

Contractor ROBERT E. SURREY, INC.
Address 3442 E. THISTLE AVE
TOMS RIVER, NJ 08753-
Telephone (732) 270-3777
Lic. No. of Bldg. Reg. No. 3595
Federal Exp. No. 22-1847507

I hereby granted permission to perform the following work:
☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
HWM
UPGRADE WATER CONNECTION FROM 3/4" TO 1"

Estimated Cost of Work \$2,000

Robert E. Surrey, Inc.
Construction Official
02/28/2003

U.C.C. F190 (REV. 3/96)

Date

PAYMENTS (Office Use Only)
Building 0
Electrical 0
Plumbing 50
Fire Protection 0
Elevator Devices 0
Other
ACA State Permit Fee 2
Cert. of Occupancy 0
Other
Total 52
Check No. 14951
Cash
Collected By DC

02/28/03 0:49AM 00000007982
X001 SERV.001
#024612
PLUMBING \$50.00
DCR \$2.00
XKXTOTAL \$52.00
CHECK \$52.00
CHANGE \$0.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/20/2002
Date Issued 12/15/02
Control # 825-89
Permit # 02-4612

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

0. TECHNICAL SITE DATA

FEE (Office Use Only)

Block 821 Lot 19 Qual

SINK/TOLLEY

Owner in Fee LAURELTON BAPTIST CHURCH

Address SAME

BRICK, NJ

Tele. ()

Contractor CROMBECK ELECTRIC

Address 65 FRANK NERI DR
BRICK, NJ 08724-

Tele. (332) 840-4830

Lic. No. of Bldrs. Reg. No. 7423

Federal Emp. No. 08-7347790

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U

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

Building Occupied as Utility Co.

Estimated Cost of Electrical Work \$ 800

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Plumb

[] Fire [] Elevator

[] Select Plans Approved

Date: 11/27/02

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: 12/15/02

Approved By: [Signature]

INSPECTIONS

Type Failure Dates (Month/Day) Approval Initial

Rough

Temp Serv

Const Serv

TCO

Other

Service

Final

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

NO. SIZE ITEM

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors-Fract HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/With UV Lights

Storable Pool/Spa/Hot Tub

KW Elect Range/Receptacle

KW Oven/Surface Unit

KW Elect Water Heater

KW Elect Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

Baseboard Heat

HP Motors 1/+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elect Sign/Outline Light

Other

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 and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[] Licensed Electrical Contractor [] Exempt Applicant

Administrative Surcharge \$

Minimum Fee \$

TOTAL FEE \$

DCA State Permit Fee \$

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 11/29/2002
Date Issued 12/13/02
Control # C25-89
Permit # 02-4612

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

D. TECHNICAL SITE DATA
NO. SIZE ITEM

FEE (Office Use Only)

Block 821 Lot 19 Qual: _____
Work Site Location 1595 ROUTE 88

SINK/TOILET

Owner in Fee LAURELTON BAPTIST CHURCH

Address SAME

BRICK, NJ

Tele. ()

Contractor CROHBECK ELECTRIC

Address 65 FRANK MERI DR

BRICK, NJ 08724-

Tele. (332)840-4830

Lic. No. of Bldrs. Reg. No. 7423

Federal Emp. No. 08-7347790

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[] Pole/Pad [] Temporary [] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work \$ 890

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required
Joint Plan Review Required:

[] Bldg [] Plumb

[] Fire [] Elevator

[] Elect Plans Approved

Date: 11/27/02

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: _____

Approved By: _____

INSPECTIONS

Type 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

Lighting fixtures

Receptacles

Switches

Detectors

Light Poles

Motors-Fract HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/With UM Lights

Storable Pool/Spa/Hot Tub

KW Elect Range/Receptacle

KW Oven/Surface Unit

KW Elect Water Heater

KW Elect Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

Baseboard Heat

HP Motors 1/+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elect Sign/Outline Light

Other

Other

Administrative Surcharge \$

Minimum Fee \$

TOTAL FEE \$

DCA State Permit Fee \$

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/20/2002
Date Issued 12/13/02
Control # C25-89
Permit # 02-4612

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 821 Lot 19 Qual
Work Site Location 1595 ROUTE 98

NO.

FIGURE/EQUIPMENT

FEE (Office Use Only)

Owner in Fee LAURELTON BAPTIST CHURCH
Address SAME

BRICK, NJ

Contractor ROBERT E. SUBBRUG INC
Address 3462 E. HINSDALE AVE
TOMS RIVER, NJ 08753

Tele. (732) 270-3777

Lic. No. of Bldrs. Reg. No. 3595

Federal Emp. No. 22-1847507

B. PLUMBING CHARACTERISTICS

Use Group Present U Proposed U
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 3,655

JOB SUMMARY (Office Use Only)

PLAN REVIEW

INSPECTIONS

Dates (Month/Day)

[] No Plans Required
Joint Plan Review Required:

Type Failure failure Approval Initial

[] Bldg [] Elect

Slab

Rough

[] Fire [] Elevator

Water

Sewer

[] Plumb. Plans Approved

Fixtures

Gas Equip.

Date: 10/3/02

Gas Equip.

Solar

Approved By: [Signature]

Gas Equip.

Solar

SUBCODE APPROVAL

Gas Equip.

Solar

[] CO [] CCO [] CA

TCO

Solar

Date:

TCO

Solar

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.

Paid [] Check \$
Collected by: [Signature]

Administrative Surcharge \$
Minimum Fee \$
TOTAL FEE \$ 55
OCA State Permit Fee \$ 4

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 02/21/2003
Date Issued 01/01/1954-
Control # 02-28-63
Permit # 02-4612+4

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

D. TECHNICAL SITE DATA (list all fixtures.)

Block 821 Lot 19 Qual
Work Site Location 1595 ROUTE 98

NO.

FIXTURE/EQUIPMENT

FEE (Office Use Only)

Owner in Fee LUBELTON BAPTIST CHURCH

0

Water Closet

0

Address SAME

0

Urinal / Bidet

0

BRICK, NJ

0

Bath Tub

0

Tele. ()

0

Lavatory

0

Contractor ROBERT E. SUBBRUG INC

0

Shower

0

Address 3462 E. INHISLE AVE

0

Floor Drain

0

JOHN RIVER, NJ 08753-

0

Sink

0

Tele. (332)270-3777

0

Dishwasher

0

Lic. No. or Bldrs. Reg. No. 3595

0

Drinking Fountain

0

Federal Emp. No. 22-1847507

0

Washing Machine

0

Estimated Cost of Plumbing Work \$ 2,000

0

Hose Bib

0

B. PLUMBING CHARACTERISTICS

1

Water Heater

35

Use Group Present U Proposed U

0

Fuel Oil Piping

0

Building Sewer Size

0

Gas Piping

0

Water Sewer Size

0

Steam Boiler

0

Estimated Cost of Plumbing Work \$ 2,000

0

Hot Water Boiler

0

JOE SUMMARY (Office Use Only)

0

Sewer Pump

0

PLAN REVIEW

0

Interceptor / Separator

0

Joint Plan Review Required

0

Backflow Preventer

0

Slab

0

Greasetrapp

0

Rough

1

Sewer Connection

0

Water

0

Water Service Connection

15

Stacks

0

Other

0

Other

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TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/25/2004
Date Issued 01/01/1954
Control # 418104
Permit # 02-46124B

Left
3/30/04
M. S. S.

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

Block 821 Lot 19 Sub 1
Work Site Location 1595 ROUTE 88

WATER SERVICE TO GSMT

Owner in Fee LAURELTON BAPTIST CHURCH
Address SAME
BRICK, NJ

Contractor ROBERT E SURBRUG INC
Address 3462 E THISTLE AVE
TOMS RIVER, NJ 08753-

Tele. (732) 210-3777
Lic. No. of Bldgs. Reg. No. 3595
Federal Emp. No. 22-1847507

B. PLUMBING CHARACTERISTICS

Use Group Present U Proposed U
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 600

JOB SUMMARY (Office Use Only)
PLAN REVIEW

[] No Plans Required
Joint Plan Review Required:
[] Bldg [] Elect
[] Fire [] Elevator
[] Plumb. Plans Approved
Date: 3/26/04
Approved By: [Signature]
SUBCODE APPROVAL
[] CO [] CCO [] CA
Approved By: _____
Date: _____

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
0	Water Heater	0
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	Greasetrapp	0
0	Sewer Connection	0
15	Water Service Connection	15
0	Stacks	0
0	Other	0
0	Other	0

Paid [] Check \$ _____
Collected by: _____
Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 15
DCA State Permit Fee \$ 1

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SINK/TOILET
TECHNICAL SECTION

Date Received 11/20/2002
Date Issued 12/13/02
Control # C25-89
Permit # 02-4612

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 821 Lot 19 Qual
Work Site Location 1595 ROUTE 88
SINK/TOILET

NO. 1 FEE (Office Use Only)

Owner in Fee LAURELTON BAPTIST CHURCH
Address SAME
BRICK, NJ

Water Closet 10
Urinal / Bidet 0
Bath Tub 0
Lavatory 10
Shower 0
Floor Drain 0
Sink 0
Dishwasher 0
Drinking Fountain 0
Washing Machine 0
Hose Bib 0
Water Heater 0
Fuel Oil Piping 0
Gas Piping 0
Steam Boiler 0
Hot Water Boiler 0
Sewer Pump 35
Interceptor / Separator 0
Backflow Preventer 0
Greasetrap 0
Sewer Connection 0
Water Service Connection 0
Stacks 0
Other 0
Other 0

Contractor ROBERT E SUBBRIG INC
Address 3462 E THISTLE AVE
TOMS RIVER, NJ 08753-
Tele. (732) 270-3777

Fixture/Equipment

Lic. No. or Bldgs. Reg. No. 3595
Federal Emp. No. 22-1847507

Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 55
DCA State Permit Fee \$ 4

B. PLUMBING CHARACTERISTICS

Use Group Present U Proposed U
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 3,655

JOB SUMMARY (Office Use Only)

INSPECTIONS

PLAN REVIEW
[] No Plans Required
Joint Plan Review Required:
[] Bidg [] Elect
[] Fire [] Elevator
[] Plumbing Plans Approved
Date: 12/13/02
Approved By: [Signature]
SUBCODE APPROVAL
[] CO [] CCOD [] [Signature]
Approved By: [Signature]
Date: 12/13/02

INSPECTIONS
Type Failure Failure Approval Initial
Slab [Signature]
Rough [Signature]
Water [Signature]
Sewer [Signature]
Fixtures 10-3-03 9/20/04 [Signature]
Gas Equip. [Signature]
Gas Piping [Signature]
Solar [Signature]
TCO [Signature]

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.

Paid [] Check \$
Collected by: [Signature]
Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 55
DCA State Permit Fee \$ 4

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/25/2004
Date Issued 01/01/1994
Control # 4/8/04
Permit # 02-461218

*Must be
3/30/04*

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

D. TECHNICAL SITE DATA (list all fixtures.)

Block 821 Lot 19 Qual
Work Site Location 1595 ROUTE 88

NO. FEE (Office Use Only)

Owner in Fee LAURELION BAPTIST CHURCH

Water Closet

Address SAME

Urinal / Bidet

BRICK, NJ

Bath Tub

Tele. ()

Lavatory

Contractor ROBERT E SUPRUG INC

Shower

Address 3462 E THISTLE AVE

Floor Drain

TOMS RIVER, NJ 08753-

Sink

Tele. (732) 220-3777

Dishwasher

Lic. No. or Bldrs. Reg. No. 3595

Drinking Fountain

Federal Emp. No. 22-1847507

Mashing Machine

Hose Bib

Water Heater

Fuel Oil Piping

Gas Piping

Steam Boiler

Hot Water Boiler

Sewer Pump

Interceptor / Separator

Backflow Preventer

Greasetrap

Sewer Connection

Water Service Connection

Stacks

Other

Other

B. PLUMBING CHARACTERISTICS

Use Group Present ☐ Proposed ☐

Building Sewer Size ☐ Public Sewer ☐ Private Septic

Water Sewer Size ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work \$ 600

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

Joint Plan Review Required:

☐ Bldg ☐ Elect

☐ Fire ☐ Elevator

☒ Plumb. Plans Approved

Date: 3/26/04

Approved By: [Signature]

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CB

Approved By: [Signature]

Date: 3-27-04

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

Paid ☐ Check \$
Collected by: DCA State Permit Fee \$

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

Plumbing Plan Review Record

Work site location: 1595 RT. 88.

Building Description: _____

Reviewed: RL

Date: 12/3/00

Correction list

No.

Description

Code section

Q. WHAT TYPE W/C DARE EXISTED? CK COLLARD 12/3/03

(SIZING) FOR WATER AND SEWER SERVICES

PROPERTY OWNER LAURENCE MARK BAPTIST DATE 12/03/02

PROPERTY ADDRESS 1595 RT-88 BLOCK 821 LOT 19

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 6 () 15.0 () _____

4: LAVATORY 6 () 6.0 () _____

BAPTISTRY
5: BATH TUB 1 () 3.5 () _____

6: SHOWER STALL _____ () _____ () _____

7: KITCHEN SINK 1 () 1.5 () _____

8: SERVICE SINK _____ () _____ () _____

9: LAUNDRY TRAY _____ () _____ () _____

10: DISHWASHER _____ () _____ () _____

11: WASHING MACHINE _____ () _____ () _____

12: URINAL 2 () 8.0 () _____

13: FLOOR DRAIN _____ () _____ () _____

14: DRINK FOUNTAIN _____ () _____ () _____

15: AIR COND
WATER COOLED _____ () _____ () _____

16: DENTAL UNIT _____ () _____ () _____

17: LAWN SPRINKLE _____ () _____ () _____

18: FIRE SPRINKLE _____ () _____ () _____

19: HOSE BIBS _____ () _____ () _____

TOTAL

34.0

GALLONS PER MINUTE _____

SIZE OF SERVICE 1"

DATE: 12/3/02

APPROVED: 

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER LAURELTON PARK BAPTIST DATE 12/03/02
 PROPERTY ADDRESS 1595 RT. 88 BLOCK 821 LOT 19

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 6 () 15.0 () _____

4: LAVATORY 6 () 6.0 () _____

5: ~~BATH TUB~~ BAPTISTRY 1 () 4.0 () _____

6: SHOWER STALL _____ () _____ () _____

7: KITCHEN SINK 1 () 1.5 () _____

8: SERVICE SINK _____ () _____ () _____

9: LAUNDRY TRAY _____ () _____ () _____

10: DISHWASHER _____ () _____ () _____

11: WASHING MACHINE _____ () _____ () _____

12: URINAL 2 () 8.0 () _____

13: FLOOR DRAIN _____ () _____ () _____

14: DRINK FOUNTAIN _____ () _____ () _____

15: AIR COND
WATER COOLED _____ () _____ () _____

16: DENTAL UNIT _____ () _____ () _____

17: LAWN SPRINKLE _____ () _____ () _____

18: FIRE SPRINKLE _____ () _____ () _____

19: HOSE BIBS _____ () _____ () _____

TOTAL 34.50

GALLONS PER MINUTE _____

SIZE OF SERVICE 1 1/4

DATE: 12/3/02 APPROVED: MD

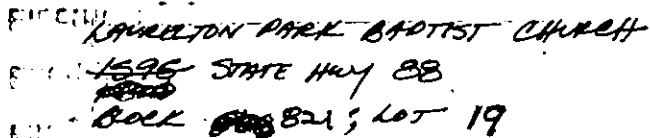
List of existing fixtures

Mensroom - 2 Toilets^{1.6} - 2 urinals - 2 sinks
Ladies Room - 2 Toilets^{1.6} - 2 sinks
Nursery - 1 sink - 1 Toilet^{1.6}
Kitchen - 1 sink (downstairs)
Baptistry -

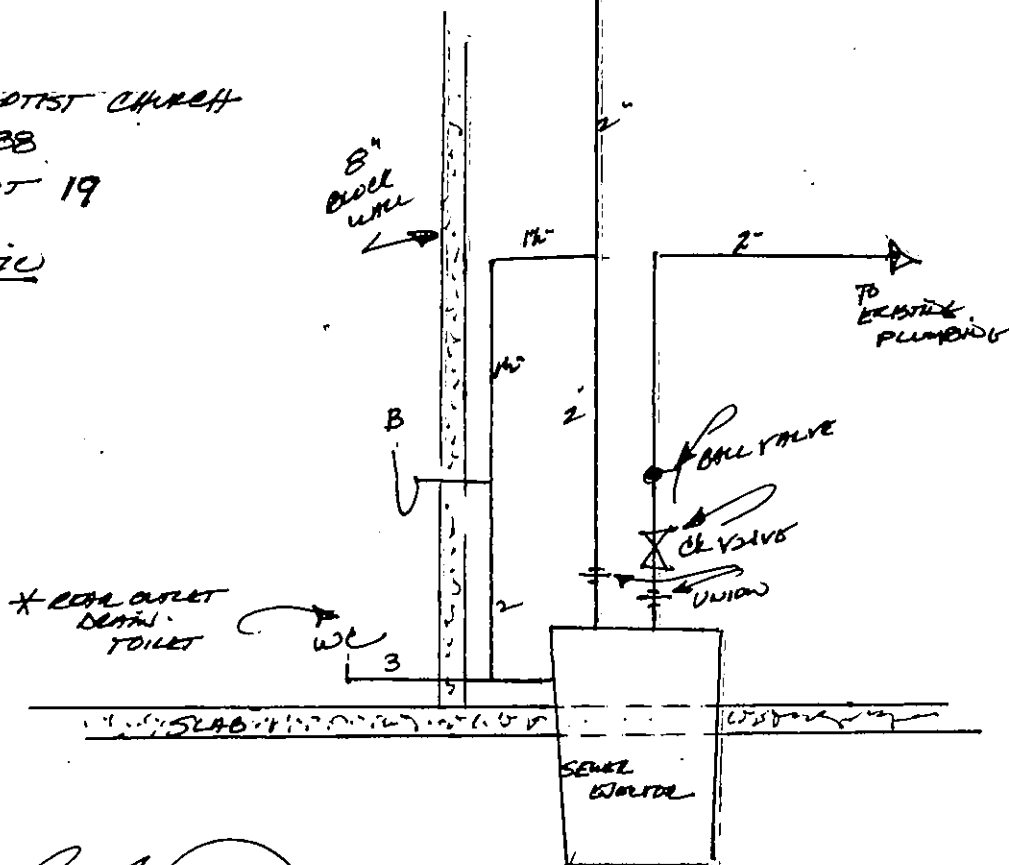
} upstairs

3462 EAST THISTLE AVENUE • TOMS RIVER, NEW JERSEY 08753 • TELEPHONE (732) 270-3777

3462 EAST THISTLE AVENUE • TOMS RIVER, NEW JERSEY 08753 • TELEPHONE (732) 270-3777



RUMBLE Schematic



Robert Lindberg

BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing		12/8/02	D.
Building			
Fire			
Energy			
Electrical			

ROBERT SUABRUG

732-270-3777

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER LAWTON PARK BAPTIST DATE 12/03/02
PROPERTY ADDRESS 1595 AJ-88 BLOCK 821 LOT 19

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 6 () 15.0 () _____

4: LAVATORY 6 () 6.0 () _____

5: BATH TUB 1 () 2.0 () _____

6: SHOWER STALL _____ () _____ () _____

7: KITCHEN SINK 1 () 1.5 () _____

8: SERVICE SINK _____ () _____ () _____

9: LAUNDRY TRAY _____ () _____ () _____

10: DISHWASHER _____ () _____ () _____

11: WASHING MACHINE _____ () _____ () _____

12: URINAL 2 () 8.0 () _____

13: FLOOR DRAIN _____ () _____ () _____

14: DRINK FOUNTAIN _____ () _____ () _____

15: AIR COND
WATER COOLED _____ () _____ () _____

16: DENTAL UNIT _____ () _____ () _____

17: LAWN SPRINKLE _____ () _____ () _____

18: FIRE SPRINKLE _____ () _____ () _____

19: HOSE BIBS _____ () _____ () _____

TOTAL 32.5

GALLONS PER MINUTE _____

SIZE OF SERVICE 1"

DATE: 12/3/02 APPROVED: [Signature]

United Water



-----BILLING SUMMARY-----
 PRIOR BILL AMOUNT \$106.68
 PAYMENTS THRU 11/15/02 \$106.68CR
 BALANCE FORWARD \$0.00

REGISTER ANY QUESTIONS OR
 COMPLAINTS ABOUT THIS BILL
 PRIOR TO THE DUE DATE TO:
 UNITED WATER TOMS RIVER
 190 MOORE ST
 HACKENSACK, NJ 07601-7418
 PHONE: 877-565-1456

CURRENT BILL CHARGES:
 WATER CHARGES \$64.97 ✓
 FACILITY CHARGE \$10.77
 TOTAL CURRENT CHARGES \$75.74
 TOTAL AMOUNT DUE \$75.74

METER READINGS

08/12/02 1140 3165
 11/11/02 1161
 CONSUMPTION 21 MGL

PAID 1724

11/11/02 1161
 02/18/03 1218
 CONSUMPTION 57 MGL

PAID 1844

PHONE: 877-565-1456

TOTAL AMOUNT DUE \$100.50

METER READINGS

02/18/03 1218
 05/14/03 1247
 CONSUMPTION 29 MGL

PAID 1971
5/30/03

PHONE: 877-565-1456

TOTAL AMOUNT DUE \$130.72

METER READINGS

05/14/03 1247
 08/06/03 1286
 CONSUMPTION 39 MGL

PAID 2085
8/28/03

APPROXIMATELY 13% OR \$16.99 OF YOUR CURRENT PERIOD CHARGES
 REFLECTS THE AVERAGE GROSS RECEIPTS AND FRANCHISE TAXES WHICH
 ARE PAID TO THE STATE OF NEW JERSEY AND DISTRIBUTED TO NEW
 JERSEY MUNICIPALITIES.

Bill Date	Service address	Account number	Amount due
08/08/03	3462 E THISTLE AVE	04400999551947	130.72
Please keep this portion of bill for your records			

Print Key Output
5722SS1 V5R1M0 010525

S1056Y0G

Page 1
09/29/03 09:56:02

Display Device : PEVAN
User : PEVAN

ACCT# L246806 018 B.T.M.U.A. SYSTEM- R LIEN-
LAURELTON PARK BAPTIST CHURCH INC SERV LOC. 1597 ROUTE 88 W
PO BOX 514 BRICK NJ 08723-2857 08723 -2857

CD	DESCRIPTION	POSTED	DUE	BILLED	CONSP	AMOUNT	BALANCE
U5	PAYMENT	2/01/04	2/01/04	2/03/14		105.00-	
BL	BILLING SUMMARY	2/03/14	2/04/13	2/03/14	7K	105.00	105.00
U5	PAYMENT	2/04/02	2/04/02	2/06/13		105.00-	
BL	BILLING SUMMARY	2/06/13	2/07/13	2/06/13	5K	112.85	112.85
U5	PAYMENT	2/07/09	2/07/09	2/09/16		112.85-	
BL	BILLING SUMMARY	2/09/16	2/10/16	2/09/16	6K	112.85	112.85
U5	PAYMENT	2/10/11	2/10/11	2/12/12		112.85-	
BL	BILLING SUMMARY	2/12/12	3/01/11	2/12/12	7K	112.85	112.85
U5	PAYMENT	2/12/24	2/12/24	3/03/13		112.85-	
BL	BILLING SUMMARY	3/03/13	3/04/12	3/03/13	5K	112.85	112.85
U5	PAYMENT	3/04/01	3/04/01	3/06/12		112.85-	
BL	BILLING SUMMARY	3/06/12	3/07/12	3/06/12	6K	121.46	121.46
U5	PAYMENT	3/07/03	3/07/03	3/09/11		121.46-	
BL	BILLING SUMMARY	3/09/11	3/10/11	3/09/11	7K	121.46	121.46

PURGED-96/01/31

END OF ACCOUNT

STILL OPEN >>>>> 121.46

fee 800.00
w. son - 1759.00
permit - 1500
mtr.
fee - 64.00
2638.00

PATT

ROBERT E. SURBRUG, INC.

3462 EAST THISTLE AVENUE • TOMS RIVER, NEW JERSEY 08753 • TELEPHONE (732) 270-3777

October 1, 2003

Mr Bernard J. Reilly
Plumbing subcode official
Twp. of Brick, NJ

Laurelton Park Baptist Church
1595 Hwy 88
Block 821; Lot 19

Dear Mr Reilly:

Enclosed, please find our application for a variation.
As per our discussions on this matter we also enclose a
water usage printout from the BTMUA.

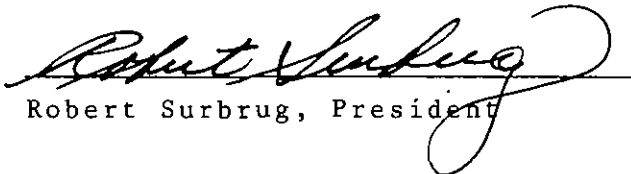
Enclosed also is my water usage for the past year.

We have a 3/4" service with a 3/4" meter which services three
people who regularly use (2) toilets, (2) basins, (2) showers,
(1) kitchen sink w/ dishwasher, (1) clothes washer, and (2)
hose bibbs. As you can see the church's water usage is
substantially lower than mine.

It is our contention that any damage that may occur in the
water piping as a result of high velocity is virtually
non-existent. However, if such a problem should occur at a
later time we would address it then.

Thankyou for your consideration on this matter.

Sincerely:



Robert Surbrug, President

ROBERT SURBRUG

732-270-3777

L246903-SS

L246806-Church

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER LAURENCE PARK BAPTIST DATE 12/03/02
PROPERTY ADDRESS 1595 RT. 88 BLOCK 821 LOT 19

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 6 () 15.0 () _____

4: LAVATORY 6 () 6.0 () _____

BAPTISTRY
5: BATH TUB 1 () 2.0 () _____

6: SHOWER STALL _____ () _____ () _____

7: KITCHEN SINK 1 () 1.5 () _____

8: SERVICE SINK _____ () _____ () _____

9: LAUNDRY TRAY _____ () _____ () _____

10: DISHWASHER _____ () _____ () _____

11: WASHING MACHINE _____ () _____ () _____

12: URINAL 2 () 8.0 () _____

13: FLOOR DRAIN _____ () _____ () _____

14: DRINK FOUNTAIN _____ () _____ () _____

15: AIR COND
WATER COOLED _____ () _____ () _____

16: DENTAL UNIT _____ () _____ () _____

17: LAWN SPRINKLE _____ () _____ () _____

18: FIRE SPRINKLE _____ () _____ () _____

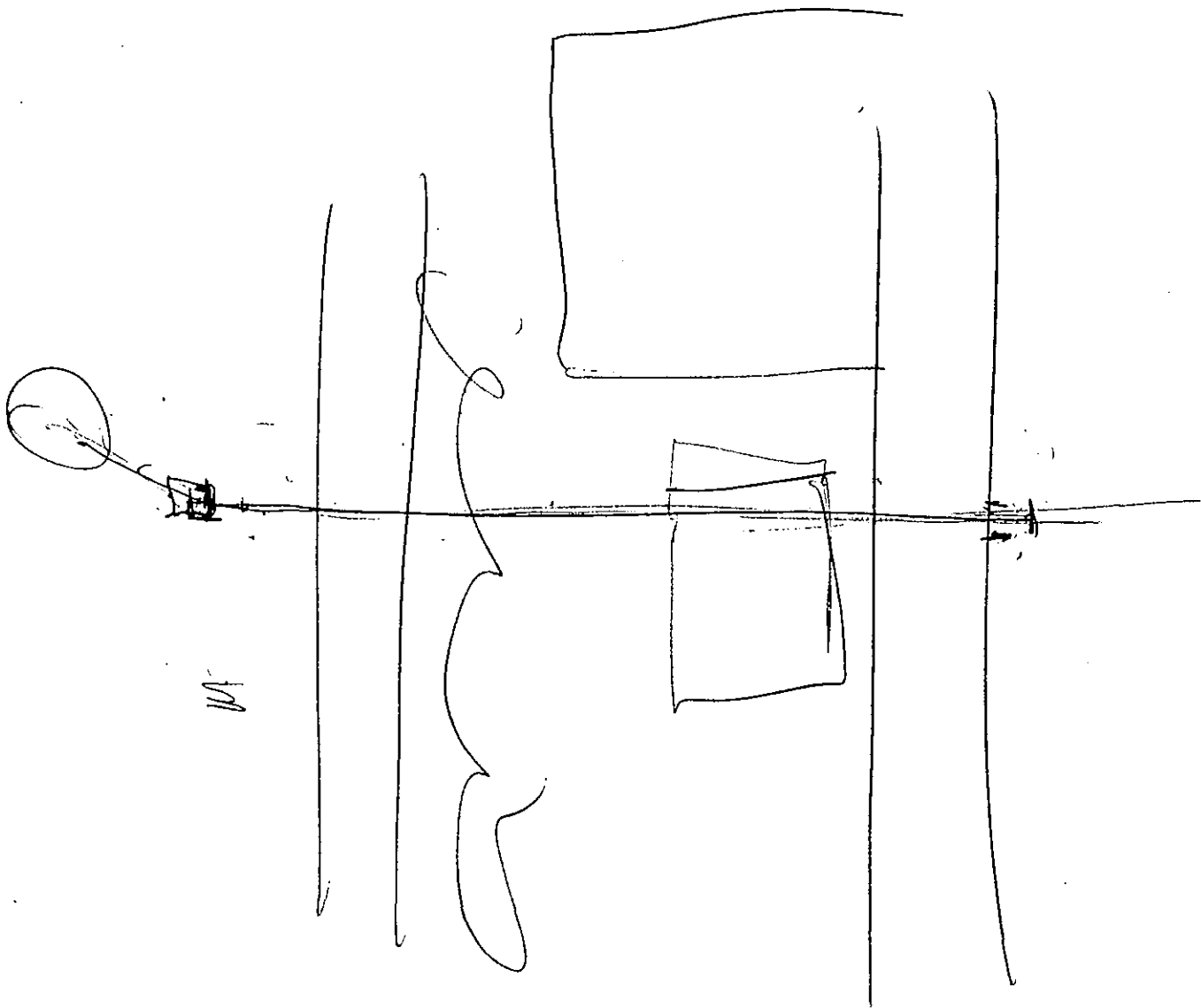
19: HOSE BIBS _____ () _____ () _____

TOTAL 32.5

GALLONS PER MINUTE _____

SIZE OF SERVICE 1"

DATE: 12/3/02 APPROVED: [Signature]



m



MUNICIPALITY _____

APPLICATION
FOR A
VARIATIONDate Received _____ Control # _____
Date Issued _____ Permit # _____
Date Revised _____ Date Permit Issued _____

IDENTIFICATION Block 821 Lot 19
 Work Site Location 1595 STATE HWY 88 Contractor ROBERT E. SURBERG, INC
 Address 3462 E. TAYLOR AVE
7045 RIVER, NJ 08753
 Owner in Fee LAURELTON PARK BAPTIST CHURCH
 Address 1595 STATE HWY 88 Tele. (732) 270 3777
BERKELEY, NJ Lic. No. NJ 3595
 Tele. (732) 477 6577 Federal Emp. No. 221847307
 or Social Security No. _____
 FEE \$ _____ (Determined by Enforcing Agency)

APPLICANT STATEMENT

Please state the requirements of the subcode from which a variation is sought. (Use separate application forms for each variation request): 10.14.1 Water distribution piping....sized according to Appendix B.6. Having been determined that the existing 3/4" water service needs to be upsized to 1"

How would compliance with said provisions result in practical difficulties? Explain the nature and extent of these difficulties.: Installation of a 1" water service would require cutting through the blacktop parking lot. BTMUA requires that a 1" tap from the road to a new curb stop would also be required. This entails cutting the road surface also resulting in possible settling of the road and parking lot requiring further repairs in the future.

Please state an alternative to the subcode requirement that will still protect the health, safety and welfare of the occupants.: Since we would only be required to connect the inside piping to the first tee the velocity problems which may exist would only be alleviated at the main service. We propose to change the entire 3/4" main water piping inside with 1". The overall benefit would be closer to the intent of the code. *see attached documents.

DATE 10/1/03

SIGNED _____

APPLICANT

DETERMINATION

This application is to be reviewed within 20 business days.

After reviewing the facts, we ☐ DENY ☐ GRANT the above variation request, in accordance with N.J.A.C. 5:23-2.9 through 2.13, for the following reasons:

Date 10-2-03

Building Subcode Official

Plumbing Subcode Official

Elevator Subcode Official

Electrical Subcode Official

Fire Subcode Official

Construction Official



MUNICIPALITY _____

APPLICATION
FOR A
VARIATIONDate Received _____ Control # _____
Date Issued _____ Permit # _____
Date Revised _____ Date Permit Issued _____

IDENTIFICATION Block 821 Lot 19
 Work Site Location 1595 STATE HWY 88 Contractor ROBERT E. SURBING, INC
 Address 3462 E. THIRDE AVE
 Owner in Fee LAURELTON PARK BAPTIST CHURCH Address 7045 RIVER HWY 08753
 Address 1595 STATE HWY 88 Tele. (732) 270 3777
 Address BERLIN, NJ Lic. No. NJ 3595
 Tele. (732) 477 6577 Federal Emp. No. 221847807
 or Social Security No. _____

FEE \$ _____ (Determined by Enforcing Agency)

APPLICANT STATEMENT

Please state the requirements of the subcode from which a variation is sought. (Use separate application forms for each variation request): 10.14.1 Water distribution piping....sized according to Appendix B.6. Having been determined that the existing 3/4" water service needs to be upsized to 1"

How would compliance with said provisions result in practical difficulties? Explain the nature and extent of these difficulties.: Installation of a 1" water service would require cutting through the blacktop parking lot. BTMUA requires that a 1" tap from the road to a new curb stop would also be required. This entails cutting the road surface also resulting in possible settling of the road and parking lot requiring further repairs in the future.

Please state an alternative to the subcode requirement that will still protect the health, safety and welfare of the occupants.: Since we would only be required to connect the inside piping to the first tee the velocity problems which may exist would only be alleviated at the main service. We propose to change the entire 3/4" main water piping inside with 1". The overall benefit would be closer to the intent of the code.
 *see attached documents.

DATE 10/1/03 SIGNED Robert Surbing APPLICANT

DETERMINATION

This application is to be reviewed within 20 business days.
 After reviewing the facts, we [] DENY [] GRANT the above variation request, in accordance with N.J.A.C. 5:23-2.9 through 2.13, for the following reasons:

Date 10-2-03 Building Subcode Official _____ Plumbing Subcode Official DAK

Elevator Subcode Official _____

Electrical Subcode Official _____

Fire Subcode Official _____

David A. Surbing
 Construction Official

215 update 02-4612
16

Township of Brick

Counter Form
(PLEASE PRINT)

Site Location: 1595 Route 88
Block: 821 Lot: 19
Owner's Name: Laurelton Park Baptist Church
Owner's Mailing Address: 1595 Route 88
Brick, NJ 08724
Phone: () 477-6577

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: ROBERT E. SURBURG INC
Address: 3462 E. THISTLE AVE
TOMB RIVER OR 9753
Phone #: 732 270 3777
Lis #: 3595
Federal Emp # or SSN 22 1847507

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	<u>water piping in basement</u>
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	
Sump Pump	
Pool Heater	
Other:	

Estimated Cost of Plumbing Work 6000

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 Surburg
Please Print Name: ROBERT SURBURG

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: _____

	capacity	fuel
Flammable Storage Tanks		
Combustible Storage Tanks		
LPG Storage Tanks		

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: _____

Counter Form
PLEASE PRINT

PLUMBING

FIRE

Contractor: ROBERT E. SURBROOK INC.
Address: 3462 E. THISTLE AVE
7043 RIVER, NV 08753
Phone #: 732-270-3777
Lis #: NV 3595
Federal Emp # or SSN 221847507

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

UPDATE

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	<u>1</u>
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	<u>1 (3/4 to 1" φ)</u>
Active Solar System	_____
Auxiliary Meter	_____
Sprinkler Heads	_____
Sump Pump	_____
Pool Heater	_____
Other:	_____

Estimated Cost of Plumbing Work 2000⁰⁰

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 Surbrook
Please Print Name: ROBERT SURBROOK

CONTRACTOR'S SEAL

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: _____

* EXISTING PERMIT #02-4612 HA

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: 1595 State Hwy 88
Block: 821 Lot: 19
Owner's Name: LAURELTON PARK BAPTIST CHURCH
Owner's Mailing Address: PO BOX 514
BRICK, N.J.
Phone: (732) 477-6577

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

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: \$ _____
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

Township of Brick

Counter Form (PLEASE PRINT)

Site Location: 1595 ROUTE 88
Block: 824 Lot: 19
Owner's Name: LAUREN TWIN PARK BAPTIST CHURCH
Owner's Mailing Address: PO BOX 514
BRICK, NJ
Phone: (732) 477-6577

BUILDING

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

Technical Data

Description of Work:

1/25 ADD TOILET & SINK INTO
EXISTING BATH

Type of Work

☐ New Building ☐ Siding
☐ Addition ☐ Fence
☐ Alteration ☐ Pool
☐ Roofing ☐ Demolition
☐ Asbestos Abatement ☐ Sign _____ sq ft

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: \$ _____
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: CROWBECK ELECTRIC
Address: 65 FRANK NEAL DR
BRICK NJ 08724
Phone#: 732-840-4830
Lis #: 7423
Federal Emp # or SSN _____

Technical Data

Item	Quantity
Lighting Fixtures	_____
Receptacles	<u>2</u>
Switches	<u>1</u>
Detectors	_____
Light Poles	_____
Motors w/ Fract. HP	<u>1</u>
Emergency & Exit Lights	_____
Communication Points	_____
Alarm Devices/FAC Panel	_____
Total	<u>4</u>

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: \$900

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: ROBERT E. SURBRUK
Address: 3462 E. THISTLE AVE
TOMB RIVER 08753
Phone #: 732 270 3177
Lis #: NV 3595
Federal Emp # or SSN 221847507

INSTALL TOILET & SINK

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	<u>1</u>
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	
Lavatory (BR Sink)	<u>1</u>
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	<u>1</u>
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:	

INSTALL TOILET & SINK INTO
EXISTING ROOM

(1"Ø WATER SERVICE)

Estimated Cost of Plumbing Work 3655⁰⁰

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: ROBERT SURBRUK

CONTRACTOR'S SEAL

FIRE

Contractor: — NONE —
Address: _____
Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Description of Work: — NONE —

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 — 0 —

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]

Print Name: G. FISHER (REV)