



CONSTRUCTION PERMIT APPLICATION

(Duplicate)

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

I. IDENTIFICATION

1. Proposed Work Site at: 346 Chambers Bridge Rd.

2. Name of Owner in Fee: Brick Twp. Education

Tel. () e-mail

Address street municipality zip code

3. Ownership in Fee: Public Private

4. Principal Contractor: Lumber Roofing Co. Tel. (973) 777-1617

Address 426 Gregory Ave. e-mail

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

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

Federal Emp. ID No. FAX: ()

5. Architect or Engineer Contact

Address e-mail

Tel. () FAX: ()

6. Responsible Person in Charge once Work has Begun

Tel. () FAX: ()

V. FEE SUMMARY (for office use only)

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

VI. BUILDING/SITE CHARACTERISTICS

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

IIa. PROPOSED WORK

- ☐ 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)

- ☐ Building
- ☐ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer

TOTAL COSTS

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units: All Units Income-restricted
- Before Construction
- After Construction
- Net Gain or Loss

B. NON-RESIDENTIAL (primary use)

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

C. MIXED USE -List secondary use(s):

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/12/2007
Tracking Number C-05-137033
Permit Number 05-3193
Permit Issue Date 08/10/2005
Certificate Number 05-3193

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: _____
Contractor: LAUMAR ROOFING CO INC
Address: 426 GREGORY AVE P O BOX 1504 PASSAIC NJ 07055-
Telephone: 973/777-1617 Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Use:

NEW ROOF

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:

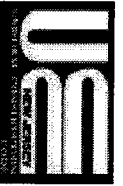
Construction Official

Date Printed: 04/12/2007

Fee: \$0.00

Check Number: _____

Collected By: _____



BUILDING SUBCODE TECHNICAL SECTION



[Signature]

Date Received 7/26/2005
Control # C-05-137033
Date Issued 8/10/2005
Permit # 05-3193

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: 346 CHAMBERS BRIDGE RD. Brick Township, NJ

Owner in Fee: BRICK TOWNSHIP EDUCATION

Address 101 HENDRICKSON AVE. BRICK NJ

Tel. _____

Contractor: LAUMAR ROOFING CO INC

Address 426 GREGORY AVE P O BOX 1504 PASSAIC NJ

Tel. 973/777-1617 Fax: _____

Contractor License No. or, if new home, Bldrs Reg. No. _____

Federal Employee No. 22-2574446

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required	_____	_____
☐ All	_____	_____
☐ Footing	_____	_____
☐ Foundation	_____	_____
☐ Frame	_____	_____
☐ Other	_____	_____
☐ Joint Plan Review Required	_____	_____
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator	_____	_____
SUBCODE APPROVAL		
☐ CO ☐ CCO ☐ CA	_____	_____
Date: <u>8/12/07</u>	_____	_____
Approved by: <u>[Signature]</u>	_____	_____

B. BUILDING CHARACTERISTICS

Use Group Present 0 Proposed U Est. Cost of Bldg. Work: _____

Constr. Class Present 0 Proposed 0 1. New Bldg. \$0

Number of Stories _____ 2. Rehabilitation \$200,000

Height of Structure _____ 3. Total (1+2) \$200,000

Area - Largest Floor _____ Sq. Ft.

New Bldg. Area / All Floors _____ Sq. Ft.

Volume of New Structure _____ Cu. Ft.

Total Land Area Disturbed _____ Sq. Ft.

INSPECTIONS

Type:	Failure	Dates (Month/Day)	Approval	Initial
Footing	_____	_____	_____	_____
Footing Bonding	_____	_____	_____	_____
Foundation	_____	_____	_____	_____
Slab	_____	_____	_____	_____
Frame	_____	_____	_____	_____
Truss Sys./Bracing	_____	_____	_____	_____
Barrier-Free	_____	_____	_____	_____
Insulation	_____	_____	_____	_____
Finishes-Base Layer	_____	_____	_____	_____
Finishes-Final	_____	_____	_____	_____
Energy	_____	_____	_____	_____
Mechanical	_____	_____	_____	_____
TCO	_____	_____	_____	_____
Other	_____	_____	_____	_____
Final	_____	_____	_____	_____
Barrier-Free	_____	_____	_____	_____

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
NEW ROOF,
<u>Roof</u>

TYPE OF WORK

☐ New Building	_____	\$0
☐ Addition	_____	\$0
☐ Rehabilitation	_____	\$0
☒ Roofing	_____	\$0
☐ Siding	_____	\$0
☐ Fence _____ Height (exceeds 6')	_____	\$0
☐ Sign _____ Sq. Ft.	_____	\$0
☐ Pool	_____	\$0
☐ Asbestos Abatement Subchapter 8	_____	\$0
☐ Lead Haz Abatement NJAC 5:17	_____	\$0
☐ Other _____	_____	\$0
☐ Demolition	_____	\$0

FEE (Office Use Only)

Administrative Surcharge	_____	\$0
Minimum Fee	_____	\$40
State Permit Surcharge Fee	_____	\$0
TOTAL FEE	_____	\$270

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.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 have been given, including such certification as the construction official may require.

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

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(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 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.