

ECC

Plans Rolled

Lake Riviera M.S.

BLOCK 380 LOT 13 QUALIFICATION CODE _____ ADDRESS (SITE) 171 Beaverson Blvd. PERMIT NO. 16-2039



CONSTRUCTION PERMIT APPLICATION

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

16-002093

I. IDENTIFICATION

1. Proposed Work Site at: 171 Beaverson Blvd, Brick, NJ 08783
2. Name of Owner in Fee: Brick Township Board of Education
Tel. (732) 785-3000 e-mail _____
Address 101 Hendrickson Avenue, Brick, NJ 08724
3. Ownership in Fee: Public ☒ Private ☐
4. Principal Contractor: Altec Building Systems Corp. Tel. (732) 903-6264
Address 904 Atlantic Avenue e-mail info@altecbuilding
Pt. Pleasant, NJ 08742 systems.com
License No. OR, If new home, Builder Reg. No. 13YH04948600 Exp. Date 3-31-17
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. 223298289 FAX: (732) 903-6298
5. Architect or Engineer Stantec
Address 1971 Route 34, Wall, NJ 07719 Contact David Faccas
Tel. (732) 449-0099 FAX: () _____
6. Responsible Person in Charge once Work has Begun Bob Smith
Tel. (732) 609-1187 FAX: (732) 903-6298

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	<u>530.4 Kw</u>	(office use only)
2. Height of Structure		
3. Area — Largest Floor		
4. New Building Area		
5. Volume of New Structure		
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 ☐	

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	Re-viewer
4,000				06/18/16	KEK		
446,840				6/14/16	PJ		

TOTAL COST

Eng Exempt 5/20/16 ECC

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present: _____
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: _____
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present: _____
C. MIXED USE -List secondary use(s): _____
D. Construct. Classification: Present _____
Proposed _____

60108 2007

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 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 Altec Building Systems Corp.

Address 904 Atlantic Avenue
Pt. Pleasant, NJ 08742

Telephone (732) 903-6264

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	SC	7/25/16							24-16-00748
☐ 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	
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
☐ 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. _____	_____	_____

OFFICE USE ONLY

[illegible][illegible]



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 4/13/2017
Control Number C-16-002093
Permit Number 16-2039
Permit Issue Date 6/21/2016
Certificate Number 16-2039

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 171 BEAVERSON BLVD. Brick Township, NJ Block: 380 Lot: 13 Qual: _____
Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION
Owner Address: 101 HENDRICKSON AVE. BRICK NJ 08723
Telephone: _____
Contractor: ALTEC BUILDING SYSTEMS CORP
Address: 904 Atlantic Ave. Point Pleasant NJ 08742
Telephone: (732) 903-6264 Fax: _____
License Number or Builders Registration Number: 11073 Federal Emp. Number: 22-3292289

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: SOLAR PANELS ...INSTALL 530.4 kw ROOF MOUNT PHOTOVOLTAIC SOLAR SYSTEM

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:

Daniel Newman Jr

Construction Official

Fee: \$0.00

Check Number: _____

Collected By: _____

Lake Riviera M.S.

6/21/16

16-2039

Date Received
Control #
Date Issued
Permit #

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

Block 380 Lot 13 Qualification Code _____
Work Site Location 171 Beaver Son Blvd.
Owner in Fee: Brick, NJ 08723
Tel. (732) 785-3000 e-mail _____
Address 101 Hendrickson Ave, Brick, NJ 08724
Contractor Altec Building Systems Corp. Tel. (732) 903-6264
Address 904 Atlantic Avenue e-mail _____
Pt. Pleasant, NJ 08742
Contractor License No. or Builder Registration No. 13YH04948000 Exp. Date 3-31-17
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Emp. ID No. 223292289 FAX: (732) 903-6288

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: James C. Labordy
D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Roof top Solar Installation
530.4 KW
1 concrete transformer pad

COMMERCIAL

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence
- ☐ Sign
- ☐ Pool
- ☐ Retaining Wall
- ☐ Asbestos Abatement
- ☐ Lead Haz. Abatement
- ☐ Radon Remediation
- ☐ Other
- ☐ Demolition

FEE (Office Use Only)

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____

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

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

BUILDING SUBCODE
TECHNICAL SECTION



JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required			Type:	Failure
☒ All	<u>06/21/16</u>		Footing	Approval
☐ Footings/Foundations			Footing Bonding	Initial
☐ Structural/Framework			Foundation	
☐ Exterior			Slab	
☐ Interior			Frame	
			Truss Sys./Bracing	
			Barrier-Free	
			Insulation	
			Finishes -Base Layer	
			Finishes -Final	
			Energy	
			Mechanical	
			TCO	
			Other	
			Final	
			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 \$ 450,840
3. Total (1+2) \$ _____

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

* 10-19-16 Am Shab- Plan show no detail for Shab.

10-19-16

380/13



Stantec Consulting Services Inc.
1971 State Route 34, 2nd Floor, Wall Township NJ 07719-9750

October 20, 2016
File: 192510588

Attention: Pat Callahan
401 Chambersbridge Road
Brick, NJ 08732

Dear Mr. Callahan,

Reference: New transformer for solar at Lake Riviera Middle School (Parent # 16-2039)

Stantec has reviewed and approved the attached detail for Lake Riviera Middle School located at 171 Beaverson Blvd. Brick, NJ 08732.

Regards,

STANTEC CONSULTING SERVICES INC.

A handwritten signature in black ink, appearing to read "David Faccas", written over a light gray rectangular background.

David Faccas
Associate
Phone: 732-449-0099 ext 8212
dave.faccas@stantec.com

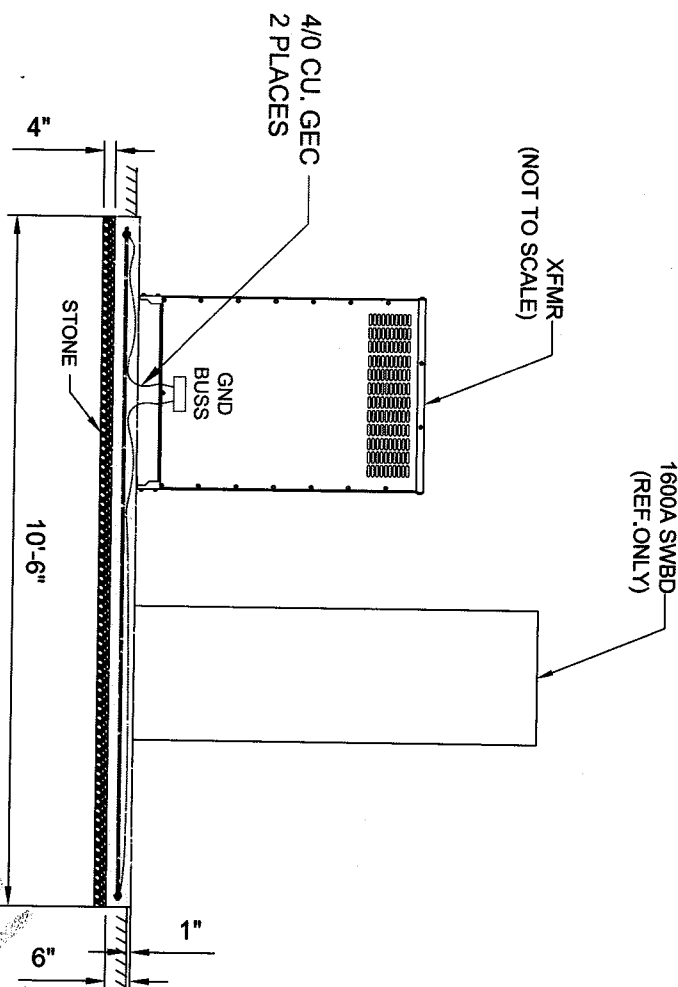
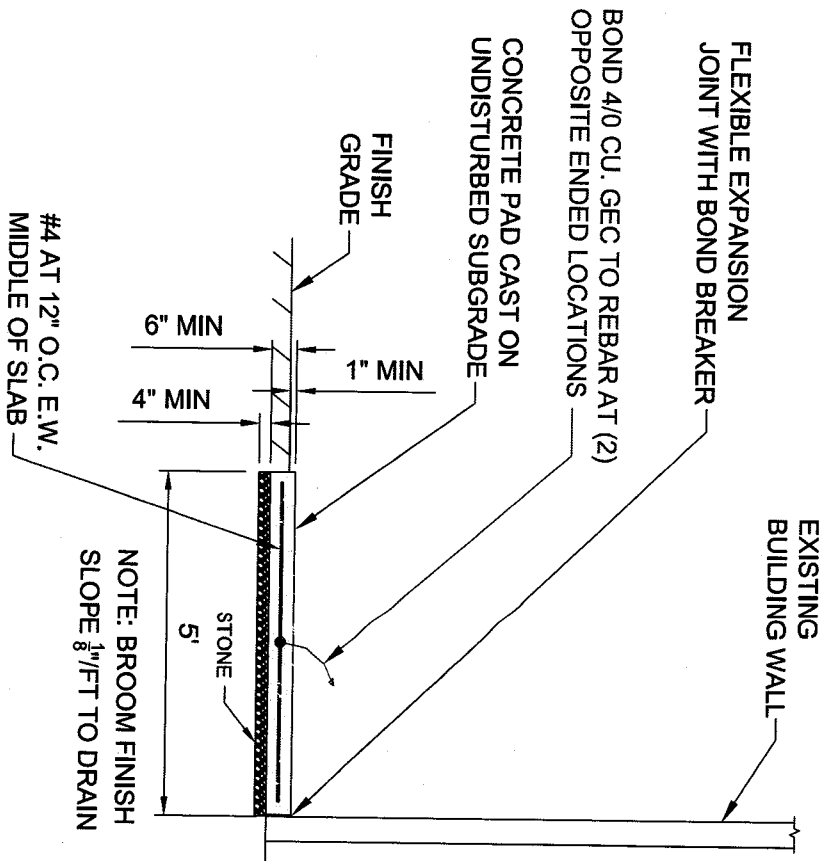
Attachment: as noted

C.

fk u:\192510588\record\submittal_archives\20161020_letter to inspector\20161020_letter to inspector_eec.docx

Design with community in mind

GENERAL PAD DETAIL FOR BUILDING 07



[Handwritten signature and notes]
 1



Stantec Consulting Services Inc.
1971 State Route 34, 2nd Floor, Wall Township NJ 07719-9750

October 20, 2016
File: 192510588

Attention: Pat Callahan
401 Chambersbridge Road
Brick, NJ 08732

Dear Mr. Callahan,

Reference: New transformer for solar at Lake Riviera Middle School

Stantec has reviewed and approved the attached detail for Lake Riviera Middle School located at 171 Beaverson Blvd. Brick, NJ 08732.

Regards,

STANTEC CONSULTING SERVICES INC.

A handwritten signature in black ink, appearing to read "David Faccas", written over a faint, circular stamp.

David Faccas
Associate
Phone: 732-449-0099 ext 8212
dave.faccas@stantec.com

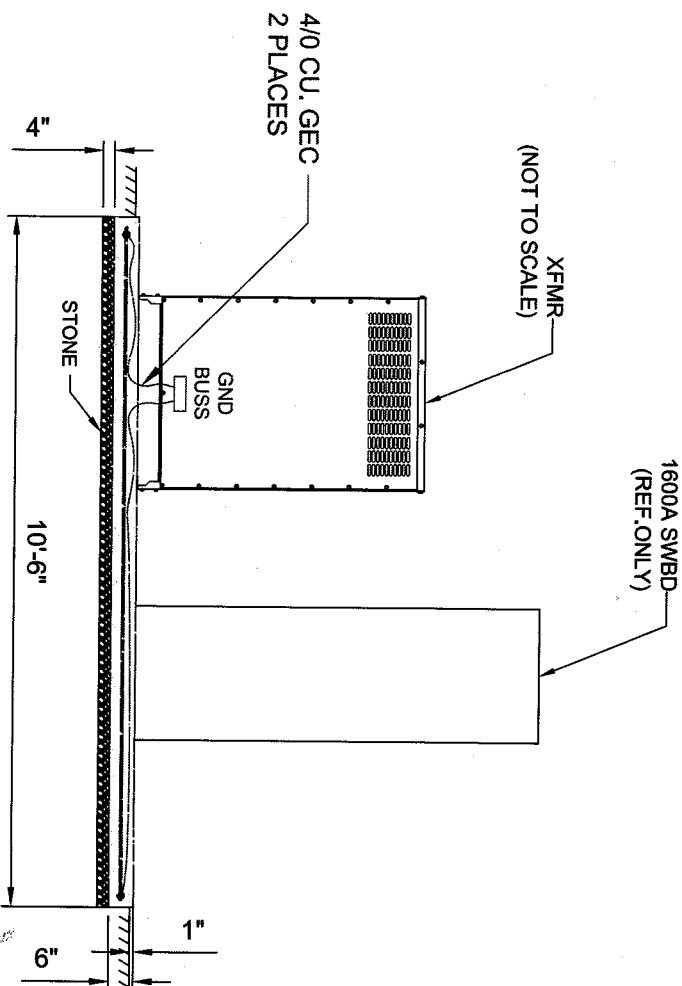
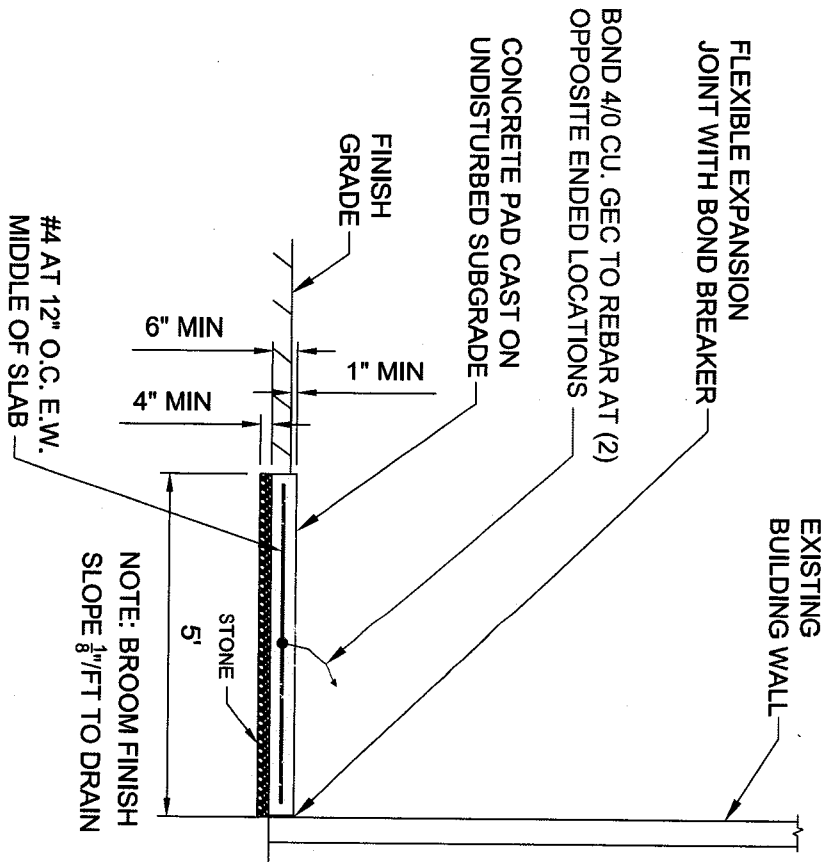
Attachment: as noted

C.

fk u:\192510588\record\submittal_archives\20161020_letter to inspector\20161020_letter to inspector_eec.docx

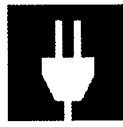
Design with community in mind

GENERAL PAD DETAIL FOR BUILDING 07





ELECTRICAL SUBCODE TECHNICAL SECTION



Lake Riviera M.S.

DP# 337005475

4/21/14
16-2039

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

Block 380 Lot 13 Qualification Code _____
Work Site Location 171 Beaverlawn Blvd.

Owner in Fee: Brick, NJ 08723
Brick Township Board of Education

Tel. (732) 785-3000 e-mail _____

Address 101 Hendrickson Ave, Brick, NJ 08724

Contractor: Altec Electric Corp. zip code 732 (903-6264)

Address 904 Atlantic Avenue e-mail jlawroski@altecbuildingsystems.com

Contractor License No. 11073 Exp. Date 3/31/18

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH04948600

Federal Emp. ID No. 22-3292289 FAX: (732) 903-6298

B. ELECTRICAL CHARACTERISTICS

Use Group _____ Present _____ Proposed _____

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

Building Occupied as SCHOOL Utility Co. JCP&L

Est. Cost of Elec. Work \$ 450,840

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required _____

[] Partial - Underslab Utilities Approved _____

Date: _____ Approved by: _____

[] Electric Plans Approved _____

Date: 6/14/16 Approved by: PJC

Joint Plan Review Required: _____

[] Bldg. [] Plumb. [] Fire. [] Elev. _____

SUBCODE APPROVAL for PERMIT _____

Date: 8/16/16

Approved by: [Signature]

SUBCODE APPROVAL for CERTIFICATE _____

[] CO [] CCO _____

Date: 4/14/17

Approved by: [Signature]

INSPECTIONS

Type: _____

Rough _____

Barrier-Free _____

Trench _____

Temp. Serv. _____

Constr. Serv. _____

TCO _____

Other _____

Service _____

Final _____

Barrier-Free _____

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

Annual Pool Inspection _____

Date of Grounding and Bonding _____

Certification _____

Dates (Month/Day)

Failure _____

Approval _____

Initial _____

4-11-17

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: James F. Lawroski Jr.

[X] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr'r [] Exempt Applicant

D. TECHNICAL SITEDATA

DESCRIPTION OF WORK: Install Solar System

QTY. 1 SIZE 530.4 KW

ITEMS 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 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—HP Revenue Grade

KW Transformer/Generator

AMP Service Disconnect

AMP Subpanels

AMP Meter—Control Center Inverters

KW Elec. Sign/Outline Light

modules

2040

240

240

240

240

240

240

240

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

To reorder call: ALLEGRA
Marketing • Print • Mail
(609)-390-1400

11-22-100

DR#337005475
MUNICIPALITY BRICK
LOCATION 171 BEAVERSON BLVD UTILITY CO JCP&C
BRICK BLK 380 LOT 13
OWNER BT BOE OCCUPANT LAKE RIV. MS



CUT-IN-CARD

"Installation in the above premises has been inspected and is
in accordance with N.E.C. and DCA requirements."

☒ FINAL ☐ TEMPORARY This approval void after _____ days

DESCRIPTION OF SERVICE 800 AMP/3Φ/4W/120-208V

INSTALLED BY ALTEC ELEC LICENSE NO 11073

DATE 3/4/17 PERMIT # 16-2037 INSPECTOR P. CALAMIAN

☒ CALLED IN 3/4/17 Lic. No: 9685

DO NOT DISPATCH

Brick Township
Building Department (732) 262-1030



DRIVER # 337005475

MUNICIPALITY Brick Township

CUT-IN-CARD

LOCATION 171 BEAVERSON BLVD.

UTILITY CO JCP&L

Brick Township, NJ

BLK 380

LOT 13

OWNER BRICK TOWNSHIP BOARD OF
EDUCATION

OCCUPANT BRICK TOWNSHIP BOARD OF
EDUCATION

"Installation in the above premises has been inspected and
is in accordance with N.E.C. and DCA requirements."

☒ FINAL

☐ TEMPORARY

This approval void after ____ days

DESCRIPTION OF SERVICE 800 Amp 3 phase

INSTALLED BY ALTEC BUILDING SYSTEMS CORP LICENSE NO 11073

DATE 3/7/2017 PERMIT # 16-2039 INSPECTOR Patrick Callahan

☒ FAXED IN 3/7/2017

Lic. No: 9685

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR

* * * Communication Result Report (Mar. 7. 2017 7:37AM) * * *

1)
2)

Date/Time: Mar. 7. 2017 7:36AM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
8676 Memory TX	918889149140	P. 1	OK	

Reason for error

E. 1) Hang up or line fail
E. 3) No answer
E. 5) Exceeded max. E-mail size

E. 2) Busy
E. 4) No facsimile connection
E. 6) Destination does not support IP-Fax

DO NOT DISPATCH

Brick Township
Building Department (732) 262-1030

MUNICIPALITY Brick Township

LOCATION 171 SEAYERSCH BLVD.

Brick Township, NJ

OWNER BRICK TOWNSHIP BOARD OF EDUCATION

UTILITY CO. JCP&L

CUK 380 LOT 13

OCCUPANT BRICK TOWNSHIP BOARD OF EDUCATION

DRIVER # 537005475

CUT-IN-CARD

"Installation in the above premises has been inspected and is in accordance with N.E.C. and DCA requirements."

☒ FINAL ☐ TEMPORARY This approval void after ____ days

DESCRIPTION OF SERVICE 800 Amp 3 phase

INSTALLED BY ALTEC BUILDING SYSTEMS CORP. LICENSE NO. 11073

DATE 3/7/2017 PERMIT # 18-2039 INSPECTOR Patrick Callahan

☒ FAXED IN 3/7/2017 Lic. No. 8885

U.S. Post 7308 eq. 1 VERT. UTILITY 2 CHARTER OFFICER/FILE 3 PERM. OFFICE/CONTRACTOR

Lake Riviera M.S.

RECEIVING CLERK MTF
DATE REC'D 5/31/16

ZONING PERMIT APPLICATION

PERMIT # 2P-16-00923
DATE ISSUED 6/21/16

BLOCK: 380 LOT: 13 QUALIFIER: _____ SITE ADDRESS: 171 Beaverson Blvd, Brick, NJ 08724

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Brick Township Board of Education
COMPLETE ADDRESS: 171 Hendrickson Ave, Brick, NJ 08724

PHONE # 732-785-3000 EMAIL: _____

2. NAME OF APPLICANT: Altec Building Systems Corp.

APPLICANT ADDRESS: 904 Atlantic Avenue
Pt. Pleasant, NJ 08742

PHONE # 732-903-6264 EMAIL: info@altecbuildingsystems.com

3. RESPONSIBLE PERSON FOR WORK: Bob Smith
PHONE # 732-609-1187 FAX # 732-903-6298

4. SIGNATURE OF APPLICANT: _____

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 0-
OTHER: \$ 0-
TOTAL: \$ 0-

REQUIRED BY APPLICANT

RESIDENTIAL: _____
COMMERCIAL: Commercial
EXISTING USE: _____
PROPOSED USE: _____

BOARD APPROVAL: _____ PB _____ ZB _____
RESOLUTION #: _____
APPROVAL DATE: _____

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: _____ *ADDITION ✓ *ALTERATION _____ *PORCH _____ *DECK _____

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____ MATERIAL _____

HEIGHT: _____ (*IF APPLICABLE)

OTHER: Solar system

DESCRIPTION: 530.4 Roof Mount System

ZONING REVIEW:

DATE REVIEWED: 5-9-16 DATE DENIED: _____ DATE APPROVED: 5-9-16 INTLS: aw

(SEE BACK PAGE)

TOWNSHIP OF BRICK ZONING CHECKLIST

1) Four (4) copies of plot plan containing:

- All existing and proposed structures
- All dimensions of the lot and structures
- All setbacks from the structures to the property lines
- All adjacent streets and waterways
- If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

2) Two copies of the plans with dimensions and heights noted:

- Floor plans and elevations
- Signed site plans
- Property map
- Survey map

Choose which is applicable for submission

3) Plot plans and building plans must match for complete review

NOTE: NO PARTIAL, TAPED, FAXED, REDUCED OR ENLARGED COPIES CAN BE ACCEPTED

LAND USE

245 Attachment 5

Township of Brick

SCHEDULE OF AREA, YARD AND BUILDING REQUIREMENTS

Township of Brick

Ocean County, New Jersey

[Amended 6-26-1979 by Ord. No. 354-2B-79; 4-22-1980 by Ord. No. 354-2H-80; 10-14-1980 by Ord. No. 354-2N-80; 9-23-1980 by Ord. No. 354-1B-80; 8-25-83 by Ord. No. 354-2SS-83; 11-5-1984 by Ord. No. 354-2AAA-84; 11-5-1984 by Ord. No. 354-2CCC-84; 6-24-1986 by Ord. No. 354-2VWVW-86; 9-13-1988 by Ord. No. 354-2TTT-88; 9-27-1988 by Ord. No. 354-2XXX-88; 9-12-2000 by Ord. No. 354-2EE-00; 5-9-2000 by Ord. No. 354-2Z-00; 3-26-2002 by Ord. No. 354-2C-02; 11-26-2002 by Ord. No. 354-2I-02; 3-25-2003 by Ord. No. 354-2D-03; 6-13-2006 by Ord. No. 19-06]

Zone	Minimum Lot Size				Minimum Required Yard Depth				Maximum Lot Coverage by Building	Maximum Building Height			Minimum Floor/Building Area (square feet)	Maximum Allowable Impervious Coverage
	Area (square feet)	Width (feet)	Depth (feet)	Area (square feet)	Front Yard (feet)	Side Yard, Each (feet)	Rear Yard (feet)	Side Yard (feet)		Roof Height (feet)	Ridge Height (feet)	Minimum Floor/Building Area (square feet)		
R-R	40,000	150	150	40,000	50	25	50	25	25%	-	25	-	-	-
RR-2	See § 245-90.													
RR-3	See § 245-103.													
R-20	20,000	100	125	25,000	40	15	40	10	10	25%	-	25	35	38.5
R-15	15,000	100	115	17,250	35	12	35	10	10	25%	-	25	35	38.5
R-10	10,000	90	100	10,500	30	6	20	5	5	30%	-	25	35	38.5
R-7.5	7,500	75	90	9,000	25	6	15	5	5	30%	-	25	35	38.5
R-5	5,000	50	75	6,000	20	5	15	5	5	35%	-	25	35	38.5
O-P	15,000	100	150	15,000	50	10	50	20	50	35%	2	-	35	38.5
B-1	10,000	100	90	12,500	30	10	20	10	20	30%	2	-	35	38.5
B-2	20,000	125	125	20,000	50	10	50	10	50	30%	2	-	35	38.5
B-3	2 acres	200	200	2 acres	75	30	50	20	50	25%	-	-	35	38.5
B-4	5 acres	300	300	-	100	50(150')	-	20	50	25%	3	-	35	38.5
M-1	5 acres	300	300	5 acres	100	50	150	75	150	30%	-	-	35	38.5
R-M	25 acres	350	200	-	50	50	30	30	30	20%	-	25	35	38.5
O-P-T	40,000	150	150	40,000	50	20	50	20	50	25%	2	-	35	38.5
H-S	See § 245-261.													

NOTES:

1. If adjacent to residential zone or use.
2. The maximum lot coverage shall refer only to that percentage of an affected lot which is suitable for building.
3. For rear yard setback requirements for accessory buildings on waterfront property, see § 245-10D.

FOR REFERENCE ONLY

RECEIVED
MAY 25 2016

ZONING

225

DATE REVIEWED: 7/20/16 DATE DENIED: DATE APPROVED: 8/20/16 INTLS: 5620

[illegible]



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1336

Date Issued:

Application Number: ZA-16-00748

Application Date: 05/09/2016

Project Number:

Permit Number:

Fee: \$0.00

Zoning Permit

Worksite **171 BEAVERSON BLVD.**
Location: **Brick Township, NJ 08723**

Block: **380**

Lot: **13**

Qualifier:

Zone: **R-R-2**

Owner: **BRICK TOWNSHIP BOARD OF EDUCATION**
Address: **101 HENDRICKSON AVE.**
BRICK, NJ 08723

Applicant: **Altec Building Solutions**
Address: **904 Atlantic Ave.**
Point Pleasant, NJ 08742

Application Approved Date: 05/09/2016

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Brick Board of Education Facility (Lake Riviera Middle School)

Nonconforming Use is: _____

Work Description:

Solar Energy System - Installation of a 530.4 KW solar panel system, mounted on the roof of the building.

Additional Zoning permit is required for additional work.

Upon review it was determined that the Zoning Permit:

- ☒ Permitted by Ordinance
- ☐ Permitted by Variance approved on: _____
- ☐ Valid Nonconforming Use is established by
 - ☐ Zoning Board of Adjustment
 - ☐ Zoning Officer

Christopher J. Romano, Assistant Zoning Officer

05/09/2016

Date

Sean Kinnevy, Zoning Officer

5/20/16

Date

