

PERMIT NO. 15-2814



CONSTRUCTION PERMIT APPLICATION

015-004191

I. IDENTIFICATION

1. Proposed Work Site at: DUMPOINT CONCRETEION SIAMS

2. Name of Owner in Fee: BRICK TOWNSHIP

Tel. (734) 477-3000 e-mail

Address 303 BLACK BIRD BLVD BLACK MT

3. Ownership in Fee: ^{street} Public ^{municipality} Private ^{zip code}

4. Principal Contractor: JENSEY COAST FINE Tel. (732) 938 2020

Address 577 ASAWAY RD e-mail _____

ARMING DATE MS 07787

License No. OR, if new home, Builder Reg. No. A00200 Exp. Date 10/15

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

Federal Emp. ID No. 222699591 FAX: (732) 938 775

5. Architect or Engineer _____ Contact _____

Address _____ e-mail _____

Tel. () FAX: ()

6. Responsible Person in Charge once Work has Begun AL Fecai

Tel. (232) 938 2020 FAX: (232) 938 7751

V. FEE SUMMARY (for office use only)

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. 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 _____

Ila. PROPOSED WORK

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

11b. SUBCODES

(Check all that apply)

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

FOR OFFICE USE ONLY (Optional)

[illegible]

TOTAL COST

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 12/28/2015
Control Number C-15-004191
Permit Number 15-2814
Permit Issue Date 8/24/2015
Certificate Number 15-2814

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 41 & 43 DRUM POINT RD. Brick Township, NJ Block: 548 Lot: 21 Qual: _____
Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION
Owner Address: 101 HENDRICKSON AVE BRICK NJ 08723
Telephone: _____
Contractor: JERSEY COAST FIRE EQUIP
Address: 377 ASBURY RD FARMINGDALE NJ 07727
Telephone: 732/9382020 Fax: (732) 938-7751
License Number or Builders Registration Number: P00206 153867 Federal Emp. Number: 22-2699591
Home Warranty Number: _____
Type of Warranty Plan: ☐ State ☐ Private
Use Group: R-5 Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: FIRE SUPPRESSION ALTERATIONS ...DRUM POINT SPORTS COMPLEX CONCESSION STAND

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: 12/28/2015

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

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1

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 JENSEY COAST FIRE EQUIPMENT

Address 377 ASBURY ROAD

FARMINGDALE NY 07727

Telephone (732) 938-2020

Signature [Signature]

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

Daniel Newman

From: Joanne Bergin
Sent: Friday, August 21, 2015 4:06 PM
To: Daniel Newman
Cc: Dan Santaniello
Subject: Drum Point

Dan,
Administration is OK with Pop Warner South replacing the fire suppression system in the snack shack at the Drum Point Sports Complex. Please process accordingly.

Joanne Bergin
Business Administrator
Township of Brick
Phone: (732) 262-2933
Fax: (732) 477-9173



CONSTRUCTION PERMIT

Date Issued 08/24/2015
Control # C-15-004191
Permit # 15-2814

IDENTIFICATION Block: 548 Lot: 21 Qualifier _____
Work Site Location: 41 & 43 DRUM POINT RD. Brick Township, NJ Contractor JERSEY COAST FIRE EQUIP
Address 377 ASBURY RD FARMINGDALE NJ 07727
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION
101 HENDRICKSON AVE BRICK NJ 08723 Telephone: 732/9382020
Telephone: _____ Lic. No. or Bldrs. Reg. No. 153867
Federal Employee No. 22-2699591

Is hereby granted permission to perform the following work:

- ☐ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☒ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT (Subchapter 8 only) ☐ OTHER

DESCRIPTION OF WORK:

FIRE SUPPRESSION ALTERATIONS ... DRUM POINT SPORTS COMPLEX CONCESSION
STAND

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 \$3,200

Construction Official

Date 8/24/15

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

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

REQUIRED INSPECTIONS

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

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

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

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

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

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

- ☐ A complete copy of released plans must be kept on the job site.

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



**FIRE
SUBCODE
TECHNICAL SECTION**



Date Received
Control #
Date Issued
Permit #
8/24/15
15-2814

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

Block 548 Lot 21 Qualification Code
Street Location BRUCE BLVD SOUTH FARMINGDALE
Address 373 BRUCE BLVD e-mail BRUCE NJ
Owner In Fee: BRUCE TOWNSHIP

Contractor: NEW JERSEY FIRE EQUIPMENT Tel. (732) 938-2020
Address 377 ASBURY ROAD e-mail FARMINGDALE, NJ 07727

Fire Protection Equipment, NJ Div. of Fire Safety Permit No. P00206
Fire Alarm Contractor No. 153867 Exp. Date 10/15
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Emp. ID No. 222699591 FAX: (732) 938-7751

B. FIRE PROTECTION CHARACTERISTICS
Use Group: Present _____ Proposed _____
Const. Class: Present _____ Proposed _____
Heating System: [] New or [] Modification to Existing
or [] Conversion or [] Replacement
Fuel Type: [] Gas [] Oil [] Electric [] Solar
[] Other _____
Location of Main Control Valve: _____

Total Cost of Fire Protection Work \$ 3200.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Approval	Initial
[] No Plans Required	Alarm System				
[] Partial-Under-slab Utilities Approved	Suppression Sys.				
Date: _____ Approved by: _____	Standpipe				
[] Fire Protection Plans Approved	Fire Pump				
Date: <u>12-15-15</u> Approved by: <u>WJC</u>	Pre-Eng. System				
Joint Plan Review Required: _____	Mechanical				
[] Bldg. [] Elec. [] Plumb. [] Elev.	Smoke Control				
SUBCODE APPROVAL FOR PERMIT		TCO			
Date: <u>12-15-15</u> Approved by: <u>WJC</u>	Flam/Combust Tanks				
SUBCODE APPROVAL FOR CERTIFICATE		Fireplace Venting			
[] CO [] CCO [] CA	Final				
Date: <u>12-15-15</u>	Other				
Approved by: _____					

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

- 1. White-Inspector Copy
- 2. Canary-Applicant Copy
- 3. Pink-Office Copy
- 4. White Tag-Office Copy

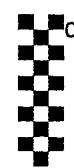
C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the owner of record and I am authorized to make this application.

Sign here: August D. Pecen
Print name here: August D. Pecen
[] Certified Contractor [] Exempt Applicant

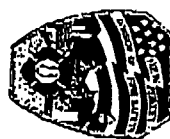
D. TECHNICAL SITE DATA
DESCRIPTION OF WORK UPDATE KITCHEN FILE
Water Supply Source SEWAGE TREATMENT SYSTEM
Method of Alarm/Suppression System Supervision _____

NUMBER	FEE (Official Use Only)
Flammable/Combustible Tanks	
Alarm Systems	
[] System	
[] CO Detectors/110V	
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	
Supervisory Devices (i.e., tamper, low/high air)	
Signaling Devices (i.e., horn/strobes, bells)	
Other Devices	
TOTAL	
Suppression Systems	
Fire Pump _____ GPM Type _____	
Dry Pipe/Alarm Valves	
Pre-action Valves	
Sprinkler Heads (Dry and Wet)	
Standpipes	
Pre-engineered Systems	
Wet Chemical	
Dry Chemical	
CO ₂ Suppression	
Foam Suppression	
FM200 Suppression	
Other _____	
Other Systems	
Kitchen Hood Exhaust System	
Smoke Control System	
Fuel-Fired Appliances [] Gas [] Oil [] Solid	
Fireplace Venting/Metal Chimney	
Other _____	

UCC/F-140
(rev. 11/09)
Professional Printing
(856) 468-7933
Administrative Surcharge \$
Minimum Fee \$
State Permit Surcharge Fee \$
TOTAL FEE \$



State of New Jersey
Department of Community Affairs
Division of Fire Safety
Hereby Issues To



JERSEY COAST FIRE EQUIPMENT

Fire Protection Equipment Contractor Business Permit

In The Following Fire Protection Areas:

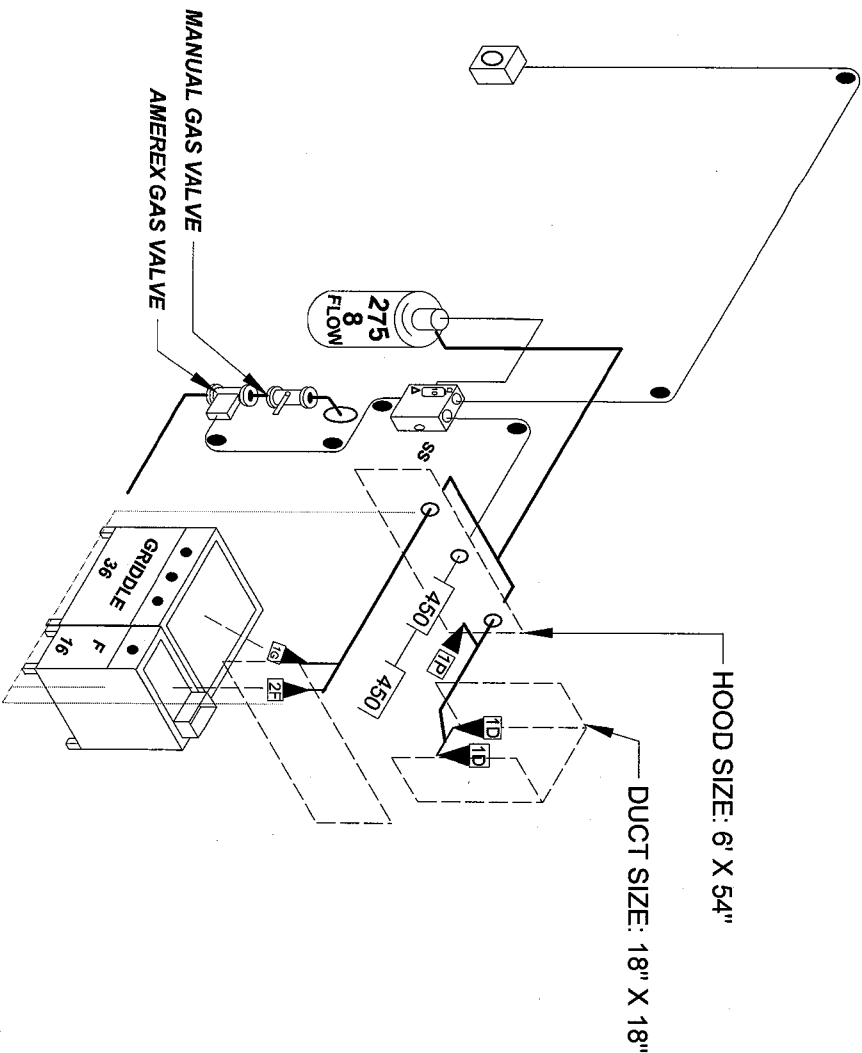
- Portable Fire Extinguisher
- Kitchen Fire Suppression System

P00206
Permit ID

09/27/2012 to 10/31/2015
Date Issued Lapse Date


Richard E. Constable III

NOZZLE SPECIFICATIONS
SHOWN IN BRACKETS ()



AMEREX KP FIRE SUPPRESSION SYSTEM U.L. 300 Listed

NOZZLE BRANCH LINE LIMITATIONS:

ALL PIPE AND FITTINGS LEADING FROM THE SUPPLY BRANCH TEE TO A SYSTEM NOZZLE.

CYLINDER FLOW	PIPE SIZE	TOTAL LINEAR FEET OF PIPE	MAX. QTY. TEES	MAX. QTY. ELBOWS	MAX. QTY. BUSHINGS
KP275 = 8	3/8	32	5	10	0
KP375 = 11	3/8 OR 1/2	32	8	12	11
KP600 = 18	3/8	32	11	32	15
2-KP375 = 22	3/8	32	32	32	20
MAX. PER NOZZLE BRANCH		7	3	6	4

JERSEY COAST FIRE EQUIPMENT

DRAWN BY: B.B. DATE: 08-06-14 0000-0000

Brick Dragon South Football & Cheer
Drumpoint Road Sports Complex
Brick, N.J. 08724

SCALE 1/4"=1' REV SHEET 1 OF 1