



CONSTRUCTION PERMIT APPLICATION

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

C12-002357

I. IDENTIFICATION

1. Proposed Work Site at: Drum Point Elementary

2. Name of Owner in Fee: Brick Board of Education
 Tel. (732) 785-3000 e-mail _____
 Address 101 Hendrickson Avenue Brick 08724
street municipality zip code

3. Ownership in Fee: Public ☒ Private _____

4. Principal Contractor: Design Resources Group Tel. (732) 560-7900
 Address 371 Hoos Lane, Suite 301 e-mail davidg@drgaia.com
Piscataway, NJ 08854

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 Design Resources Group Contact David Galati
 Address 371 Hoos Lane, Suite 301 e-mail davidg@drgaia.com
 Tel. (732) 560-7900 FAX: (732) 560-7910

6. Responsible Person in Charge once Work has Begun David Galati
 Tel. (732) 560-7900 FAX: (732) 560-7910

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>12,000</u>	☒	☒
2. Electrical	\$ <u>4,400</u>	☒	☒
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

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

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
<u>42,000</u>				<u>6/28/12</u>	<u>KA</u>		
<u>40,400</u>			<u>6-28-12</u>			<u>6-6-13</u>	<u>JT</u>
				<u>6-28-12</u>	<u>wew</u>		

TOTAL COST 82,400

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: RE
3. Change In Use Group, Indicate Present: _____

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

- D. Construct. Classification: Present VB
 Proposed VB

III. PLAN REVIEW (optional)

DO YOU WANT:

- ☐ Partial Releases
☐ Prototype Processing

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

- ☐ Elevators/Escalators/Lifts/
 Dumbwaiters/Moving Walks
☐ High Pressure Boilers
☐ Pressure Vessels
☐ Refrigeration Systems
☐ Cross-Connections/Backflow Preventers
☐ Hazardous Uses/Places of Assembly
☐ Sprinklers/Standpipes
☐ Smoke Control Systems in Open Wells
☐ Underground Storage Tanks
☐ Swimming Pools, Spas and Hot Tubs
☐ LPGas Tanks
☐ Fire Alarm



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 11/9/2013
Control Number C-12-002357
Permit Number 13-2434
Permit Issue Date 6/8/2013
Certificate Number 13-2434

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: (732) 785-3000
Contractor: Design Resources Group
Address: 371 Hoes Lane Ste. 301 Piscataway NJ 08854
Telephone: (732) 560-7900 Fax: (732) 560-7910
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

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: AIR CONDITIONER, ALTERATION - -COMMERCIAL Replace existing corridor ceiling finishes
Reinstall lights
Install new A/C units in several rooms

Certificate Comments:

☐ **Certificate of Occupancy**

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

☒ **Certificate of Approval**

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

☐ **Certificate of Continued Occupancy**

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

☐ **Temporary Certificate of Compliance**

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

Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

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

☐ **Certificate of Compliance**

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

☐ **Temporary Certificate of Occupancy**

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

Conditions to be met:

Construction Official

Fee: \$0.00

Check Number: _____

Collected By: _____



PERMIT UPDATE

Date Update Issued 6/8/13
Control # C-12-002357-A
Permit # +A

13-2434-A

IDENTIFICATION Block: 548 Lot: 21 Qualifier _____
Work Site Location: 41 & 43 DRUM POINT RD. Brick Township, NJ Contractor Design Resources Group
Address 371 Hoes Lane Ste. 301 Piscataway NJ 08854
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION
101 HENDRICKSON AVE BRICK NJ 08723 Telephone: (732) 560-7900
Telephone: (732) 785-3000 Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. _____

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:

COMMUNICATION POINTS

Drum Point Elementary

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 \$3,044

Daniel P. Newman Jr.
Construction Official

Date 6/7/13

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	\$0
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.



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

4/3/13
C12,002357
13-2434

IDENTIFICATION Block: 548 Lot: 21 Qualifier
Work Site Location: 41 & 43 DRUM POINT RD. Brick Township, NJ Contractor Design Resources Group
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION Address 371 Hoes Lane Ste. 301 Piscataway NJ 08854
101 HENDRICKSON AVE. BRICK NJ 08723 Telephone: (732) 560-7900
Telephone: (732) 785-3000 Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

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:

AIR CONDITIONER, ALTERATION - -COMMERCIAL Replace existing corridor ceiling finishes
Reinstall lights
Install new A/C units in several rooms

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 \$39,655

Daniel P. Newman Jr.
Construction Official

Date

6/7/13

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	\$0
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.



ELECTRICAL SUBCODE TECHNICAL SECTION



upelate

Date Received
Control #
Date Issued
Permit #

6/8/13
12-00235744
13-24344

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
Work Site Location BRICK, NJ 08723 (DEW PT. ELEMENTARY)

Owner in Fee: BRICK BOARD OF EDUCATION

Tel. (732) 785-3000 e-mail

Address 101 HENDRICKSON AVE, BRICK, NJ

Contractor: JSC ELECTRIC, LLC municipality Tel. (732) 206-0010 zip code

Address BRICK, NJ 08724 e-mail

Contractor License No. 9455 Exp. Date 3/31/2015

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

Federal Emp. ID No. 46-1693051 FAX: (732) 206-0080

B. ELECTRICAL CHARACTERISTICS

Use Group Present SETHOL Proposed

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

Building Occupied as SCHOOL Utility Co.

Est. Cost of Elec. Work \$ 3,044-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required

[] Partial-Under-slab Utilities Approved

Date: Approved by:

[] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:

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

SUBCODE APPROVAL FOR PERMIT

Date: 6-2-13

Approved by: ST

SUBCODE APPROVAL FOR CERTIFICATE

[] CO [] CCO [] CA

Date: 10-10-13

Approved by: ST

INSPECTIONS

Dates (Month/Day)

Type: Failure Failure Approval Initial

Rough

Barrier-Free

Trench

Temp. Serv.

Constr. Serv.

TCO

Other

Service

Barrier-Free

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here:

Frank Nicks

Print name here:

D. TECHNICAL SITE DATA

[] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contractor [] Licensed Applicant

DESCRIPTION OF WORK:

ATE/DDC CONTROLS - LOW VOLTAGE WIRING

FEE (Office Use Only)

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 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$



BUILDING SUBCODE TECHNICAL SECTION



Change of Contractor

Date Received
Control # C12-002357

6/8/13

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

Block 540 Lot 21 Qualification Code _____

Work Site Location Drum Point Elem. School

Owner in Fee: Bretz Township BOE

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

Address 101 Hendrickson Ave, Brick, NJ 08724

Contractor: Midcoast Mechanical, Inc Tel. (732) 918-1222

Address 16 Columbia Road e-mail midcoast@optonline.net

Neptune, NJ 07753

Contractor License No. or Builder Registration No. _____ Exp. Date _____

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

Federal Emp. ID No. 22-3257222 FAX: (732) 918-8254

JOB SUMMARY (Office Use Only)

PLAN REVIEW

Date _____

INSPECTIONS

Dates (Month/Day)

Initial

☐ No Plans Required _____ Type: _____ Failure _____ Approval _____

☐ All _____ Footing _____ Bonding _____

☐ Footings/Foundations _____ Foundation _____

☐ Structural/Framework _____ Slab _____

☐ Exterior _____ Frame _____

☐ Interior _____ Truss Sys./Bracing _____

Joint Plan Review Required: _____ Barrier-Free _____

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator _____ Insulation _____

SUBCODE APPROVAL for PERMIT _____ Finishes -Base Layer _____

Date: _____ Finishes -Final _____

Approved by: _____ Energy _____

SUBCODE APPROVAL for CERTIFICATE _____ Mechanical _____

☐ CO ☐ CCO ☐ MCA _____ TCO _____

Date: 10/30/13 Other _____

Approved by: [Signature] 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. \$ 33,955.00

2. Rehabilitation \$ 33,955.00

3. Total (1+2) \$ 67,910.00

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

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: Robert C. Moddy Jr

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

HVAC Upgrades & related work

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Rehabilitation

☐ Roofing

☐ Siding

☐ Fence _____ Height (exceeds 6') _____

☐ Sign _____ Sq. Ft. _____

☐ Pool _____

☐ Retaining Wall _____ Sq. Ft. _____

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☐ Radon Remediation

☒ Other HVAC

☐ Demolition

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

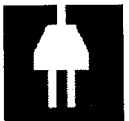
TOTAL FEE \$ _____

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



ELECTRICAL SUBCODE TECHNICAL SECTION



Page Received
Control #
Date Issued
Permit #

6/8/13
13.2434

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 _____

Work Site Location Drum Point Elementary School

41 Drum Point Road, Brick, NJ 08723

Owner in Fee: Brick Township Board of Education

Tel. (____) _____ e-mail _____

Address 101 Hendrickson Avenue, Brick 08724

Contractor: RKA Electric, Inc., m/f/a/tiv Tel. (732) 495-5050

Address 7 Debele Lane, Lincoft 07738 e-mail _____

Contractor License No. 7246 Exp. Date 03-31-15

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

Federal Emp. ID No. 22-3282269 FAX: (732) 495-7700

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 4,700.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
			Type	Failure	Failure	Approval	Initial
☒ No Plans Required			Rough				
☒ Joint Plan Review Required			Barrier-Free				
☒ Building ☒ Plumbing			Trench				
☒ Fire ☒ Elevator			Temp. Serv.				
☒ Elec. Plans Approved			Const. Serv.				
Date: <u>6-5-13</u>			TCO				
Approved by: <u>JS</u>			Other				
			Service				
			Final				
			Barrier-Free				
SUBCODE APPROVAL			Temp. Cut-In-Cord Date Issued				
☒ ECO ☒ ECO ☒ CA			Annual Roof Inspection				
Date: <u>10-8-13</u>			Date of Occupancy and Building Certification				
Approved by: <u>JS</u>							

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

XNJ Licensed Elec. Contractor [] Certifd Landscape Irrigation Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Hook up (2) split air conditioner units.
Hook up roof top exhaust fan per the drawings.

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

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



ELECTRICAL SUBCODE TECHNICAL SECTION



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 _____
Work Site Location Drum Point Elementary School
41 Drum Point Road, Brick, NJ 08723

Owner in Fee: Brick Board of Education

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

Address 101 Hendrickson Avenue Brick 08724
street municipality zip code

Contractor: Design Resources Group Tel. (732) 560-7900
Address 371 Hoes Lanes, Suite 301 e-mail davidg@dragaia.com
Piscataway, NJ 08854

Contractor License No. _____ Exp. Date _____

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

Federal Emp. ID No. _____ FAX: (732) 560-7910

B. ELECTRICAL CHARACTERISTICS

Use Group Present E Proposed E

☐ Pole/Pad # _____ ☐ Temporary ☒ Other renovation

Building Occupied as Educational Utility Co. _____

Est. Cost of Elec. Work \$ 40,400

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required	Type: _____	Failure Failure Approval Initial
☐ Partial - Underslab Utilities Approved	Rough _____	
Date: _____	Barrier-Free _____	
☐ Electric Plans Approved	Trench _____	
Date: _____	Temp. Serv. _____	
Date: _____	Constr. Serv. _____	
Joint Plan Review Required:	TCO _____	
☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.	Other _____	
SUBCODE APPROVAL for PERMIT	Service _____	
Date: _____	Final _____	
Approved by: _____	Barrier-Free _____	
SUBCODE APPROVAL for CERTIFICATE	Temp. Cut-in-Card Date Issued _____	
☐ CO ☐ CCO ☐ CA	Final Cut-in-Card Date Issued _____	
Date: _____	Annual Pool Inspection _____	
Approved by: _____	Date of Grounding and Bonding _____	
	Certification _____	

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: David Galati

☐ Licensed Elec. Contractor ☐ Certifd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
install new A/C units in several rooms

QTY.	SIZE	ITEMS	FEE (Office Use Only)
4		Lighting Fixtures	
5		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
9		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	
2	1 ton	KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Date Received
Control #
Date Issued
Permit #

6/8/13
13.2434

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



PLUMBING SUBCODE
TECHNICAL SECTION



Change of Contractor
6/8/13

Date Received
Control # C12-002 357

Date Issued
Permit #

13.2434

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

Block 54B Lot 21 Qualification Code _____

Work Site Location Drum Point Elem School

Owner in Fee: Brick Township BOE

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

Address 101 Hendrickson Ave, Brick, NJ 08724

Contractor: Midcoast Mechanical, Inc Tel. (732) 918-1222

Address 6 Columbia Road e-mail midcoastcoptonline.net

Contractor License No. 12075 Exp. Date 6/30/15

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

Federal Emp. ID No. 22-3257222 FAX: (732) 918-8254

B. PLUMBING CHARACTERISTICS

Use Group _____ Present _____ Proposed _____

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Well _____

Est. Cost of Plumbing Work \$ 1000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
	Type:	Failure	Failure	Approval	Initial
☐ No Plans Required	Slab				
☐ Partial-Under-slab Utilities Approved	Rough				
Date: _____ Approved by: _____	Water				
☐ Plumbing Plans Approved	Sewer				
Date: _____ Approved by: _____	Fixtures				
Joint Plan Review Required:	Gas Equipment				
☐ Bldg. ☐ Elec. ☐ Fire. ☐ Elev.	Gas Piping				
SUBCODE APPROVAL for PERMIT	LP Gas Tank				
Date: _____	Fuel Oil Piping				
Approved by: _____	Solar				
SUBCODE APPROVAL for CERTIFICATE	TCO				
☐ CO ☐ CCO ☒ CA	Final				
Date: <u>9-26-13</u>					<u>0925/13 AH</u>
Approved by: <u>BJ</u>					

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent or) owner of record and am authorized to make this application and perform the work listed on this application.
Applicant's Signature: [Signature]
Sign and seal here.

Print name here: Robert C. Madden Jr
NJ Licensed Plumbing Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
HVAC Upgrades

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	\$ _____
	Urinal/Bidet	\$ _____
	Bath Tub	\$ _____
	Lavatory	\$ _____
	Shower	\$ _____
	Floor Drain	\$ _____
	Sink	\$ _____
	Dishwasher	\$ _____
	Drinking Fountain	\$ _____
	Washing Machine	\$ _____
	Hose Bibb	\$ _____
	Water Heater	\$ _____
	Fuel Oil Piping	\$ _____
	Gas Piping	\$ _____
	LP Gas Tank	\$ _____
	Steam Boiler	\$ _____
	Hot Water Boiler	\$ _____
	Sewer Pump	\$ _____
	Interceptor/Separator	\$ _____
	Backflow Preventer	\$ _____
	Greasetrapp	\$ _____
	Sewer Connection	\$ _____
	Water Service Connection	\$ _____
	Stacks	\$ _____
	Other: <u>Condensate Drains</u>	\$ _____



PLUMBING SUBCODE TECHNICAL SECTION



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 _____
Work Site Location Drum Point Elementary
41 Drum Point Road, Brick, NJ 08723
Owner in Fee: Brick Board of Education
Tel. (732) 785-3000 e-mail _____
Address 101 Hendrickson Avenue Brick 08724
Contractor: Design Resources Group municipally Tel. (732) 560-7900
Address 371 Hoes Lane, Suite 301 e-mail davidg@drgaia.com
Piscataway, NJ 08854

Contractor License No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____ FAX: (732) 560-7910

B. PLUMBING CHARACTERISTICS
Use Group Present E Proposed E
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Est. Cost of Plumbing Work \$ 5,000

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	
☒ No Plans Required	INSPECTIONS
☐ Partial - Underslab Utilities Approved	Type: _____
Date <u>6-28-12</u> Approved by: <u>WBR</u>	Slab _____
☐ Plumbing Plans Approved	Rough _____
Date: _____ Approved by: _____	Water _____
Joint Plan Review Required: _____	Sewer _____
☐ Bldg. ☐ Elec. ☐ Fire. ☐ Elev.	Fixtures _____
SUBCODE APPROVAL FOR PERMIT	Gas Equipment _____
Date: <u>6-28-12</u>	Gas Piping _____
Approved by: <u>WBR</u>	LP Gas Tank _____
SUBCODE APPROVAL FOR CERTIFICATE	Fuel Oil Piping _____
☐ CO ☐ CCO ☐ CA	Solar _____
Date: <u>9-26-13</u>	TCO _____
Approved by: <u>Q</u>	Final _____

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: David Galati

Date Received _____
Control # _____
Date Issued _____
Permit # _____

6/8/13
13.2434

D. TECHNICAL SITE DATA
[] Licensed Plumbing Contractor [] Exempt Applicant
DESCRIPTION OF WORK

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
_____	Water Closet	_____
_____	Urinal/Bidet	_____
_____	Bath Tub	_____
_____	Lavatory	_____
_____	Shower	_____
_____	Floor Drain	_____
_____	Sink	_____
_____	Dishwasher	_____
_____	Drinking Fountain	_____
_____	Washing Machine	_____
_____	Hose Bibb	_____
_____	Water Heater	_____
_____	Fuel Oil Piping	_____
_____	Gas Piping	_____
_____	LP Gas Tank	_____
_____	Steam Boiler	_____
_____	Hot Water Boiler	_____
_____	Sewer Pump	_____
_____	Interceptor/Separator	_____
_____	Backflow Preventer	_____
_____	Greasetrap	_____
_____	Sewer Connection	_____
_____	Water Service Connection	_____
_____	Stacks	_____
_____	Other	_____

COMMERCIAL

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



13.2434
548
21

August 13, 2013

Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

Attn: Daniel Newman

Re: Brick Board of Education
Drum Point Elementary School
New Air Conditioning Units, Ceiling and Lighting Improvements
Division of Inspection Control No. C12-002357

Dear Mr. Newman,

Please find the enclosed items in reference to the above mentioned project:

1. (2) Complete sets of plans, signed and sealed by the Architect.

This is a copy of the bid set of drawings that includes G-Series sheets which are general notes and drawing A1.1 that simply references the mechanical work detailed on the mechanical and electrical drawings. It also depicts ceiling and lighting replacements that the Brick Board of Education has decided to *not* do at this time.

We wanted to submit these for your records as the G and A series drawings were not part of the permit set of drawings submitted last summer.

Please feel free to call should you have any questions or require any additional information. I can be reached at 732-560-7900, Ext. 112 or by e-mail at frankb@drgaia.com.

Sincerely,

Frank Bowlby
Design Resources Group Architects AIA, Inc.
Project Manager

Cc: file

(p:1205/02/1205 G&A Drawings.doc)

PRINCIPALS:
Hany Y. Salib, AIA, NCARB
NJ Lic # 21A101733800
PA Lic # RA404803
NY Lic # 032590-1

Patrick S. Seiwel, AIA, NCARB
LEED AP
NJ Lic # 21A101611000
PA Lic # RA403783
NY Lic # 031550-1

Phillip J. Cacossa, PE
LEED AP
NJ Lic # 24GE03704900
PA Lic # PE056000E
NY Lic # 079633-1

ASSOCIATE:
Alan N. Trovato



DESIGN RESOURCES GROUP ARCHITECTS

May 29, 2013

Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

Attn: Mr. Daniel Newman

Re: Brick Board of Education
Computer Room HVAC Upgrades
Drum Point Elementary School
DRG Project No. 1206-02
State Plan No. 0530-030-10-1003

Division of Inspection Control Number C12-002357

Dear Mr. Newman,

This is to advise you that the Brick Board of Education is not proceeding with plans to replace the corridor ceilings as shown on drawing A1.1 of the above referenced project (and reviewed by your office). The contractor for this project, Midcoast Mechanical is only proceeding with the HVAC upgrades.

Please feel free to call should you have any questions or require any additional information. I can be reached at 732-560-7900, Ext. 112 or by e-mail at frankb@drgaia.com.

Sincerely,

Frank Bowby
Design Resources Group Architects AIA, Inc.
Project Manager

Cc: Patrick Seiwel, DRG
James Edwards BBOE Business Administrator

(p:1206/02/1206 No Ceilings 5-29-13.doc)

PRINCIPALS:

Hany Y. Salib, AIA, NCARB
NJ Lic # 21A101733800
PA Lic # RA404803
NY Lic # 032590-1

Patrick S. Seiwel, AIA, NCARB
LEED AP
NJ Lic # 21A101611000
PA Lic # RA403783
NY Lic # 031550-1

Phillip J. Cacossa, PE
LEED AP
NJ Lic # 24GE03704900
PA Lic # PE056000E
NY Lic # 079633-1

ASSOCIATE:

Alan N. Trovato



ELECTRICAL SUBCODE TECHNICAL SECTION



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 _____

Work Site Location 41 DRUM POINT ROAD (DRUM PT. ELEMENTARY)

Owner in Fee: BRICK BOARD OF EDUCATION

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

Address 101 HENDERICKSON AVE, BRICK, NJ

Contractor: JSCELECTRIC LLC Municipality BRICK, NJ Tel. (732) 206.0010 Zip code _____

Address BRICK, NJ 08724 e-mail _____

Contractor License No. 9455 Exp. Date 3/31/2015

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

Federal Emp. ID No. 46-1693051 FAX: (732) 206.0080

B. ELECTRICAL CHARACTERISTICS

Use Group Present SC400L Proposed _____

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as SC400L Utility Co. _____

Est. Cost of Elec. Work \$ 3,044-

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
		Type:	Failure	Failure	Approval
☐ No Plans Required					
☐ Partial - Underslab Utilities Approved		Rough			
Date: _____	Approved by: _____	Barrier-Free			
☐ Electric Plans Approved		Trench			
Date: _____	Approved by: _____	Temp. Serv.			
Joint Plan Review Required:		Constr. Serv.			
☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.		TCO			
SUBCODE APPROVAL for PERMIT		Other			
Date: _____		Service			
Barrier-Free		Final			
Approved by: _____		Barrier-Free			
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued			
☐ CO ☐ CCO ☐ CA		Final Cut-in-Card Date Issued			
Date: _____		Annual Pool Inspection			
Approved by: _____		Date of Grounding and Bonding			
		Certification			

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent or) 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:

Frank Nieves

Print name here: _____

☐ Licensed Elec. Contractor ☐ Certified Landscape Irrigation Contr. ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: ATE/IDDC CONTROLS - LOW VOLTAGE WIRING

QTY. SIZE

ITEMS

FEE (Office Use Only)

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Frac. 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 Over/Surface Unit

KW Elec. Water Heater

KW Elec. Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

KW Baseboard Heat

HP Motors 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

6/8/13

13-2434

RECEIVED
ELECTRICAL
UTILITIES



BUILDING SUBCODE TECHNICAL SECTION



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 _____

Work Site Location Drum Point Elementary School

41 Drum Point Road, Brick, NJ 08723

Owner in Fee: Brick Board of Education

Tel. (732) 785-3000

e-mail _____

Address 101 Hendrickson Avenue

Brick

08724

Contractor: Design Resources Group

municipality

Tel. (732) 560-7900

zip code

Address 371 Hoes Lane, Suite 301

e-mail davidg@drgaia.com

Piscataway, NJ 08854

Contractor License No. or Builder Registration No. _____

Exp. Date _____

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

FAX: (732) 560-7910

Federal Emp. ID No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

Date _____

INSPECTIONS

Dates (Month/Day)

Initial

☐ No Plans Required

Date _____

Type: _____

Failure

Failure

Approval

Initial

☐ All

Date _____

Footing

Footing Bonding

Foundation

Slab

☐ Footings/Foundations

Date _____

Foundation

Frame

Truss Sys./Bracing

Barrier-Free

☐ Structural/Framework

Date _____

Slab

Frame

Truss Sys./Bracing

Barrier-Free

☐ Exterior

Date _____

Truss Sys./Bracing

Barrier-Free

☐ Interior

Date _____

Barrier-Free

Joint Plan Review Required:

Date _____

Barrier-Free

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator

Date _____

Insulation

Finishes -Base Layer

Finishes -Final

SUBCODE APPROVAL for PERMIT

Date _____

Finishes -Base Layer

Finishes -Final

Approved by: _____

Date _____

Energy

Mechanical

TCO

Other

SUBCODE APPROVAL for CERTIFICATE

Date _____

TCO

Other

☐ CO ☐ CCO ☐ CA

Date _____

Other

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

Approved by: _____

Date _____

Barrier-Free

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: David Galati

Date Received _____

Control # _____

Date Issued _____

Permit # _____

DESCRIPTION OF WORK

Replace existing corridor ceiling finishes in there entirety.

Reinstall existing lights and other misc. equipment back into

there original locations. Install new A/C units in several rooms.

TYPE OF WORK:

☐ New Building

☐ Addition

☒ Rehabilitation

☐ Roofing

☐ Siding

☐ Fence _____

☐ Sign _____

☐ Pool

☐ Retaining Wall _____

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☐ Radon Remediation

☐ Other _____

☐ Demolition

FEE (Office Use Only)

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$

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

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



PLUMBING SUBCODE TECHNICAL SECTION



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 _____

Work Site Location Drum Point Elementary

41 Drum Point Road, Brick, NJ 08723

Owner in Fee: Brick Board of Education

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

Address 101 Hendrickson Avenue Brick 08724

Contractor: Design Resources Group street 101 Hendrickson Avenue municipality Brick zip code 08724

Address 371 Hoes Lane, Suite 301 Tel. (732) 560-7900

Piscataway, NJ 08854 e-mail davidg@draga.com

Contractor License No. _____ Exp. Date _____

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

Federal Emp. ID No. _____ FAX: (732) 560-7910

B. PLUMBING CHARACTERISTICS

Use Group Present E Proposed E

Building Sewer Size _____ Public Sewer _____

Water Service Size _____ Public Water _____ Private Septic _____

Est. Cost of Plumbing Work \$ 5,000 Private Well _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW ☐ No Plans Required ☐ Partial-Underslab Utilities Approved

Date: _____ Approved by: _____

☐ Plumbing Plans Approved ☐ Rough ☐ Slab ☐ Type: _____

Date: _____ Approved by: _____

Joint Plan Review Required: _____

☐ Bldg. ☐ Elec. ☐ Fire. ☐ Elev. ☐ Fixtures ☐ Gas Equipment ☐ Gas Piping ☐ LP Gas Tank ☐ Fuel Oil Piping ☐ Solar ☐ TCO ☐ Final

SUBCODE APPROVAL FOR PERMIT 6-28-12

Date: _____

Approved by: wee

SUBCODE APPROVAL FOR CERTIFICATE ☐ CO ☐ CCO ☐ CA

Date: _____

Approved by: _____

INSPECTIONS

Type	Failure	Approval	Initial
Slab			
Rough			
Water			
Sewer			
Fixtures			
Gas Equipment			
Gas Piping			
LP Gas Tank			
Fuel Oil Piping			
Solar			
TCO			
Final			

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: David Galati

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

QTY.

FIXTURE/EQUIPMENT	FEE (Office Use Only)
Water Closet	
Urinal/Bidet	
Bath Tub	
Lavatory	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bibb	
Water Heater	
Fuel Oil Piping	
Gas Piping	
LP Gas Tank	
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Sewer Connection	
Water Service Connection	
Stacks	
Other <u>etc</u>	

Date Received
Control #

Date Issued
Permit #

6/8/13
13.2434

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Stephen C. Acropolis, Mayor

Township Council:

John Ducey - President
Bob Moore - Vice President
Domenick Brando
Jim Fozman
Susan Lydecker
Joseph Sangiovanni
Dan Toth

July 19, 2012

Design Resources Group
371 Hoes Lane Suite #301
Piscataway, New Jersey 08854
Attention: Patrick Seiwel

Re: Drum Point Road Elementary School
New Air Conditioning Units, Ceiling and Lighting Improvements
41-43 Drum Point Road
Division of Inspection Control Number C12-002357

Dear Mr. Seiwel:

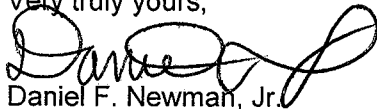
It is the understanding of this office that the selection of contractors for the above project will not take place until the review of the construction plans and permit application is completed.

This office has reviewed the permit application for the above-referenced project. It has been determined that the submitted application and the associated construction documents, plans, and specifications are satisfactory and indicate substantial compliance to the construction codes.

Prior to issuing the permits, the applicant is required to provide contractor information. Once contractors have been determined, some additional information may be required from the contractors such as additional shop drawings, manufacturer installation instructions for specific materials and contractor licensing information.

If you have any questions, please contact the Division of Inspections at 732-262-1030.

Very truly yours,



Daniel F. Newman, Jr.
Construction Official

DFN/mk

Cc: Dr. Walter Uszenski, Superintendent of Schools
James Edwards, Business Administrator
Robert Vogel, Director of Facilities



Department of Community Development & Land Use

Juan Carlos Bellu
Director

732-262-1027

Fax: 732-262-2941
www.twp.brick.nj.us



Lisa Rose Tavalaccio

To: davidg@drgaia.com
Subject: Incomplete Applications

Hello David,

We are in receipt of the school applications for the HVAC systems. The following require a plumbing tech to be completed for the A/C units:

*Vets Memorial Middle School
Drum Point Elementary School
Lake Riviera Middle School*

Also a reminder, we will require a change of contractors before the applications will be approved through building, electric and plumbing. This includes the above schools and Osbornville Elementary School.

Once I receive the plumbing techs for each school, I can proceed with the review process.

I will be entering the applications for Emma Havens and Lanes Mill Schools for the exterior doors and electric. But again, we will require the change of contractors for all applicable subcodes. (Electric and plumbing)

*Thank you
Have a great Day!*

***Lisa Rose Tavalaccio
Township of Brick
Senior Permit Clerk
732-262-1030 Phone
732-262-2941 Fax***



State of New Jersey
DEPARTMENT OF COMMUNITY AFFAIRS
101 SOUTH BROAD STREET
PO Box 802
TRENTON, NJ 08625-0802

JUN 15 2012

CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

RICHARD E. CONSTABLE, III
Acting Commissioner

June 12, 2012

Mr. Daniel F. Newman, Jr.
Construction Official
Brick Township
401 Chambers Bridge Road
Brick Township, New Jersey 08723

Re: Project: Renovations/HVAC Upgrades
School: Drum Point ES
School District: Brick Township
County: Ocean
DOE Project #: 0530-030-10-1003

Dear Mr. Newman:

The New Jersey Department of Education (NJDOE) has forwarded the above-referenced school district's request for permission to allow your agency to perform plan review in accordance with the requirements of the New Jersey Uniform Construction Code (NJUCC). The New Jersey Department of Community Affairs hereby grants the requested permission.

Please be aware that it is your agency's responsibility to ensure the NJDOE has issued final educational adequacy approval or has determined no such approval is required. Furthermore, your agency must obtain the plans that have been approved by the NJDOE from the school district or its design professional.

In addition to plan review for compliance with all of the subcodes of the NJUCC, as they may be applicable, it is also your responsibility to ensure compliance with N.J.A.C. 5:23-3.11A(c) and the NJDOE's public school facility requirements enumerated in Bulletin #00-3, as appropriate.

If you have any questions, please feel free to contact this office at (609) 984-7609.

Sincerely,

John N. Terry
Division of Codes and Standards

- c: Walter Hrycenko, Superintendent, Brick Township School District
Enclosure to Construction Official: DOE Stamped Plans



STATE OF NEW JERSEY
DEPARTMENT OF EDUCATION - CHIEF OF STAFF
OFFICE OF SCHOOL FACILITIES

STATE PROJECT#:

Parent	0530-030-10-1003
Land	
Temporary	
Feasibility	
Emergent	

REQUEST FOR LOCAL RELEASE OF SCHOOL CONSTRUCTION PLANS

Project and District Information

County:	OCEAN	District Contact:	Mr. James Edwards
District Name:	BRICK TWP	Contact Title:	Business Administrator
District Number:	0530	District Telephone #:	732-785-3000
School Name:	Drum Point Road Elementary School	District Fax #:	732-840-9089
School Code:	030	District E-Mail:	jedwards@brickschools.org
Project Title:	Renovations at Drum Point Road E.S.	A/E Firm:	Design Resources Group
Project Address:	41 Drum Point Road	A/E Contact:	Mr. Patrick S. Selwell, Principal
Municipality:	Brick Township	A/E Phone #:	732-560-7900
Zip Code:	08723	A/E Fax #:	732-560-7910
		A/E E-Mail:	patrick@dr gala.com

Brief Description of Project:

Provide HVAC in computer server rooms and ceiling replacement associated with HVAC upgrades.

It is the request of the above-named school district to have this project reviewed for State Uniform Construction Code compliance (including N.J.A.C. 5:23-3.11A(c) and Department of Community Affairs, Division of Codes and Standard Bulletin 00-3) and other applicable State Codes by a municipal code enforcing agency, pursuant to P.L. 1990 c. 23.

Chief School Administrator (Signature):

Chief School Administrator:

Walter Hrycenko
Mr. Walter Hrycenko

Date: 5/1/12

This project will be reviewed for compliance by the below named appropriately licensed municipal code enforcing agency

Municipality Name: _____
Other Municipality (only if project located in > 1 jurisdiction): Brick Township

Municipal Code Enforcing Agency Construction Official (Name): Daniel F. Newman, Jr.

Municipal Code Enforcing Agency Construction Official (Signature): *Daniel F. Newman, Jr.* Date: 5/3/12

Municipal Code Enforcing Agency Classification is class: Class 1

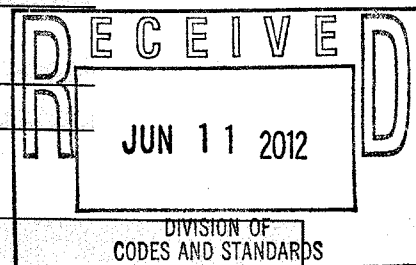
Municipal Code Enforcing Agency Address:

Street: Municipal Building
401 Chambers Bridge Road
City: Brick Township
State: New Jersey
Zip Code: 08723

Phone: 732-262-1027

Fax: 732-262-8954

Comments/Notes for ease of UCC Review:



FOR DCA* USE ONLY

*Note: For all capital projects for NJ Private Schools for the Disabled, DOE will Approve this Form in place of DCA.

Request Reviewed By: John N. Terry
Title: Mgr., CCE

Signature:

Date Acted Upon: 6/12/12

Action: ☒ APPROVED ☐ DENIED (identify reason below) ☐ RETURNED NO ACTION (identify reason below)

Comments:

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 David Galati Date 6/18/12

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 David Galati (Design Resources Group)
Address 371 Hoes Lane, Suite 301
Piscataway, NJ 08854
Telephone (732) 560-7900
Signature David Galati

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