Brick

Permit Without a Jacket

Permit Number B-1863

LDS BR 10310065

Construction Permit # B-1863

Nov. 18, 19 82

Owner Joseph McFadden

Location 475 Myrtle Ave.

Cedarwood Park

Block 502-7 Lot 1

Contractor Same

Fee $. 7.50 cash Use T-111 Sdg.

BUILDING SUB-CODE INSPECTIONS **VIOLATIONS**

Footing Trench .....
Foundation .....
Slab .....
Sheathing .....
Framing .....
Insulation .....
Sheet Rock .....
Plumbing .....
Fire Inspection .....
Final 3-24-83 RD X
C.O. Issued .....

PLUMBING SUB-CODE INSPECTIONS

Slab .....
Rough .....
Septic/Sewer .....
Water .....
Final .....

Electrical Final .....

Use reverse side for additional remarks

Approved plans must be on job or assessed penalty under 5:23:2.5 (C5)
Finals for Certificates of Occupancy must be called for or assessed penalty under 5:23-27.

NOV 18 1982

CONSTRUCTION PERMIT APPLICATION

BRICK TOWNSHIP, NEW JERSEY

BUILDING

IMPORTANT — Complete ALL items. Mark boxes where applicable

502-7

I. LOCATION OF BUILDING

Number and street ~~945 Linden Ave~~ 475 ~~Myrtle~~ Ave | Section Cedarwood Park | Lot 1 | Block 4

N S 475 Myrtle Ave. N S

E W side of ..... feet E W from intersection of .....

(Other local geographic, political, or legal subdivision identification)

II. TYPE AND COST OF BUILDING — All applicants complete Parts A - D

A. TYPE OF IMPROVEMENT

1 ☐ New buildings
2 ☐ Addition (If residential, enter number of new housing units added, if any, in Part D, 13)
3 ☐ Alteration (See 2 above)
4 ☒ Repair, replacement
5 ☐ Demolition
6 ☐ Moving (relocation)
7 ☐ Garage
☐ Swim Pool ☐ in ☐ out
☐ Fence

B. OWNERSHIP

8 ☐ Private (individual, corporation, nonprofit institution, etc.)
9 ☐ Public (Federal, State, or local government)

describe

D. PROPOSED USE — For "Wrecking" most recent use

Residential

12 ☒ One family
13 ☐ Two or more family — Enter number of units .....
14 ☐ Transient hotel, motel, or dormitory — Enter number of units .....
15 ☐ Garage
16 ☐ Carport
17 ☐ Other — Specify ..... T-111 siding SMALL House

Nonresidential

18 ☐ Amusement, recreational
19 ☐ Church, other religious
20 ☐ Industrial
21 ☐ Parking garage
22 ☐ Service station, repair garage
23 ☐ Hospital, Institutional
24 ☐ Office, bank, professional
25 ☐ Public utility
26 ☐ School, library, other educational
27 ☐ Stores, mercantile
28 ☐ Tanks, towers
29 ☐ Other - Specify .....

C. COST

	(Omit cents)
10. Cost of improvement	$317.43
To be installed but not included in the above cost	
a. Electrical (# Fixtures, Outlets)	
b. Plumbing (# of Fixtures)	
c. Heating, air conditioning	
d. Other (elevator, etc.)	
11. TOTAL COST OF IMPROVEMENT	$

Nonresidential — Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.

III. SELECTED CHARACTERISTICS OF BUILDING —

For new buildings and additions, complete Parts E - I; for wrecking, complete only Part H, for all others skip to IV.

E. PRINCIPAL TYPE OF FRAME

☐ Masonry (wall bearing)
☐ Wood frame
☐ Structural steel
☐ Reinforced concrete
☐ Other - Specify .....

F. TYPE OF HEATING SYSTEM

Specify .....
Air Cond. Yes ☐ No ☐

G. TYPE OF SEWERAGE DISPOSAL

☐ Public
☐ Individual

H. DIMENSIONS

Number of stories .....
Total square feet of floor area, all floors, based on exterior dimensions .....
Total land area, sq. ft. .....

I. RESIDENTIAL BUILDING ONLY

Number of bedrooms .....
Number of bathrooms { Full ..... Partial .....

FEE COMPUTATIONS

VOLUME OF BUILDING	
BUILDING SUB CODE	
ELECTRICAL CODE	
PLUMBING CODE	
PLAN REVIEW	
CERTIFICATE OF OCCUPANCY	
STATE TRAINING FUND	
CONSTRUCTION	
PERMIT FEE	7.50

SEE REVERSE

B1963 Cash

SUB CONTRACTORS

NAME	TRADE	ADDRESS	ZIP CODE	PHONE #
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

PERSON TO BE IN CHARGE OF CONSTRUCTION

NAME McFadden

ADDRESS 475 Myrtle Ave

IV. IDENTIFICATION — To be completed by all applicants

	Name	Mailing address — Number, street, city, and State	ZIP code	Tel. No.
1. Owner ~~Agent~~	Joseph McFadden	475 Myrtle Ave		
2. Contractor				
3. Architects				

The owner of this building and the undersigned agree to conform to all applicable laws of Township of Brick and that all required state, county and local prior approvals have been given.

Signature of applicant	Address	Application date
Barbara McFadden	475 Myrtle Ave	

DO NOT WRITE IN THIS SPACE — FOR OFFICE USE ONLY

Approved by	Date permit issued	Permit Number
	11/19/82	B1863

I agree to construct said building in conformity with the plans and specifications filed with the Construction Official and in compliance with the provisions of the Building Code whether shown on plans or not.