



Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

***This File Contains Personal Identifiable
Information of Private Citizen(s).***

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- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson", is written over a horizontal line.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 725 Mantoloking Rd Brick 08723

2. Name of Owner in Fee: Seeds of Service

Tel. _____ e-mail _____

Address 725 Mantoloking Rd Brick 08723

3. Ownership in Fee: Public _____ Private ☒ Municipality _____

4. Principal Contractor: Premier Roofing Tel. 732-244-8588

Address 1520 Rt. 37 W Toms River, NJ 08755 e-mail spurnell.premier@gmail.com

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

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 61-1605406 FAX: _____

5. Architect or Engineer _____ Contact _____

Address _____ e-mail _____

Tel. _____ FAX: _____

6. Responsible Person in Charge once Work has Begun Ryan Purnell

Tel. 848-480-8818 FAX: _____

V. FEE SUMMARY (for office use only)

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

Handwritten: \$32600, \$131, \$3391

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories	<u>2</u>	
2. Height of Structure	<u>30</u>	ft.
3. Area — Largest Floor	<u>4200</u>	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 _____		

(office use only)

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)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
☐ Building									
☐ Electrical									
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST	\$0								

Handwritten: Roofing, \$10,710

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: Religious Charity

2. Use Group, Proposed: _____

3. Change in Use Group, Indicate Present: _____

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

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

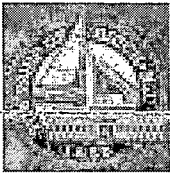
DO YOU WANT:

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	



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 03/25/2021
Control Number C-20-003398
Permit Number 20-2426
Permit Issue Date 10/09/2020
Certificate Number 20-2426

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 725 MANTOLOKING RD. Brick Township, NJ Block: 654 Lot: 119 Qual: _____
Owner in Fee: CHURCH OF THE VISTATION
Owner Address: 730 LYNNWOOD AVE BRICK NJ 08723
Telephone: _____
Contractor Premier Roofing
Address 1520 Rt 37 west Toms River NJ 08755
Telephone: (732) 244-8588 Fax: _____ Federal Emp. Number: 61-1605406
License Number or Builders Registration Number: _____
Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private
Use Group: B Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: ROOFING - - SEEDS OF SERVICE

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:

David Newman Jr

Construction Official

Date Printed: 03/25/2021

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

Fee: \$0.00

Check Number: _____

Collected By: _____



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 654 Lot 119 Qualification Code _____

Work Site Location 725 Mantoloking Rd

Brick 08723

Owner in Fee: Seeds of Service

Tel. _____ e-mail _____

Address 725 Mantoloking Rd Brick 08723

Contractor: Premier Roofing Tel. 732 244 8588

Address 1520 Rt 37 W e-mail spurnell.premier@gmail.com

Toms River 08755

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

Home Improvement Contractor Registration No. or Exemption Reason i3VH06840400

Federal Emp. ID No. 61-1605406 FAX: _____

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	INSPECTIONS
			Dates (Month/Day)
			Failure Failure Approval Initial
☐ No Plans Required			
☐ All			
☐ Footings/Foundations			
☐ Structural/Framework			
☐ Exterior			
☐ Interior			
Joint Plan Review Required:			
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			
SUBCODE APPROVAL for PERMIT			
Date:			
Approved by:			
SUBCODE APPROVAL for CERTIFICATE			
☐ CO ☐ CCO ☐ CA			
Date:			
Approved by:			

B. BUILDING CHARACTERISTICS

Use Group Present ☒ Proposed _____ Constr. Class Present ☒ Proposed _____

No. of Stories 2 If Industrialized Building: _____

Height of Structure 30 ft. State Approved _____ HUD _____

Area — Largest Floor 4200 sq. ft. **Est. Cost of Bldg. Work:**

New Bldg. Area/All Floors _____ sq. ft. 1. New Bldg. \$ _____

Volume of New Structure _____ cu. ft. 2. Rehabilitation \$ 69,000

Max. Live Load _____ 3. Total (1+ 2) \$ 69,000

Max. Occupancy Load _____

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

Date Received
Control #

10/9/20

Date Issued
Permit #

20-2426

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: Ryan Purnell

Print name here: Ryan Purnell

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

shingle roof replacement

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 _____
- ☐ 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.

JACK
SEEDS
OR
SERVICE

MAZZA

SCRAP METAL & RECYCLING

Mazza Recycling Services, Ltd.

3230 Shafto Rd
Tinton Falls, NJ 07753
(732) 922-9292
FACILITY ID# 195599
DEP Facility: 1336001136

In Ticket: 842111
Date: 10/12/2020
Time: 09:23:16 ~ 09:38:49

Customer: 0014560001/Premier Roofing
Truck: XAUR70
Truck Type: TRUCK/Truck

Comment: 14 YD

Gross: 17020 LB In Scale SCALE 6
Tare: 11120 LB Out Scale 2
Net: 5900 LB
Tons: 2.95

Materials & Services

Origin: 1532A/Toms River
Material: CD/C & D
Quantity: 2.95 Ton
Rate: \$119.00/TON
Amount: \$ 351.05

Host Fee: \$	2.95
Recycling Tax: \$	3.85
Total Taxes/Fees: \$	11.80
Total Amount: \$	362.25

Signature certifies the information on this form is true, accurate, and complete.

Driver:
Signature:

20-2 426
684 119



CONSTRUCTION PERMIT

Date Issued 10/7/20
Control # C-20-003398
Permit # 20-2496

IDENTIFICATION Block: 654 Lot: 119 Qualifier _____
Work Site Location: 725 MANTOLOKING RD. Brick Township, NJ Contractor: Premier Roofing
Owner in Fee: CHURCH OF THE VISTATION Address: 1520 Rt 37 west Toms River NJ 08755
730 LYNNWOOD AVE BRICK NJ 08723 Telephone: (732) 244-8588 / 242-420-8818
Telephone: _____ Lic. No. or Bldrs. Reg. No. 13VH06840400
Federal Employee No. 61-1605406

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:

ROOFING - SEEDS OF SERVICE

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 \$69,000

D. J. Duran
Construction Official

10/7/20
Date

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	\$3,260
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$131
CO Fee	<u>596</u>
Other	\$0
Total	\$3,391
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.

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 725 Mantoloking Rd

BLOCK: 654 **LOT:** 119

CONTRACTOR: Premier Roofing

CONTRACTOR'S ADDRESS: 1520 Rt 37 W Toms River 08755

Type of Construction(minor, new home): Shingle roof replacement

Type of Debris (shingles, siding, wood, etc.): shingles

Party responsible for removal: Premier Roofing

Dumpster Size: 30 yd

Destination of Debris: Mazza

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclables.

Generator's Certification: "Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."

Ryan Purnell
Signature

10 / 7 / 2020
Date

Ryan Purnell
Print Name