



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 755-Mantoloking-Rd., Brick, NJ
2. Name of Owner in Fee: CHURCH OF THE VISITATION Tel. (201) 477-0028
- Address 755 Mantoloking Rd. Brick 08723
street municipality zip code
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Frommer, Son & Associate Tel. (_____) _____
- Address 1309 Roberts Ave., Feasterville, Pa. 19047
- License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
- Federal Emp. No. _____ Social Security No. _____
5. Architect or Engineer _____ Tel. (_____) _____
- Address _____
6. Responsible Person _____ Tel. (_____) _____
- In Charge of Work ct

II. PROPOSED WORK

1. ☐ Minor Work
(single trade)
2. ☐ Small Job (\$5,000
and no prior
approval)
3. ☐ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☐ Fire Protection
7. ☐ Plumbing
8. ☐ Electrical
9. ☐ Asbestos Abatement
10. ☐ Demolition

TOTAL COSTS

Est. Cost

OPTIONAL (for office use only)[illegible]

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

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

- | | | |
|---|--|---|
| 1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks | 3. ☐ Pressure Vessels | 6. ☐ Hazardous Uses/Places of Assembly |
| 2. ☐ High Pressure Boilers | 4. ☐ Refrigeration Systems | 7. ☐ Sprinklers |
| | 5. ☐ Cross-Connections/Backflow
Preventers | 8. ☐ Smoke Control Systems in Open Wells |
| | | 9. ☐ Underground Storage Tanks |

V. FEE SUMMARY (for office use only)

- | | | Update | Update |
|--------------------------------------|----|--------|--------|
| 1. Building | \$ | | |
| 2. Electrical | | | |
| 3. Plumbing | | | |
| 4. Fire Protection | | | |
| 5. Other <u>Sign</u> | | 32.00 | |
| 6. Subtotal | \$ | 32 - | |
| 7. Less 20% for
State Plan Review | | 5 - | |
| 8. Subtotal | \$ | | |
| 9. DCA Training Fee | | | |
| 10. Subtotal | \$ | | |
| 11. Cert. of Occupancy | | 26 - | |
| 12. Other | | | |
| 13. TOTAL | \$ | 57 - | |

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area—Largest Floor _____ sq. ft.
4. Building Area—All Floors _____ sq. ft.
5. Volume of Structure _____ cu. ft.
6. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____ sq. ft.
 no _____
11. Fire Grading _____
12. Max. Live Load _____
13. Max. Occupancy Load _____

(office use only)

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL.

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO
No of dwelling units:

Before Construction _____
After Construction _____
Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group:
Indicate Former:

LDS BR 10511895

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(e)1.vii:

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 New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(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 _____

Address _____

Telephone (____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☒ Other <i>2013</i>	<i>SK</i>	<i>5/7/90</i>	<i>Signs</i>						
☐									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	
Electrical _____	Barrier Free _____	
Plumbing _____	Flood Hazard _____	
Fire Protection _____	As Built Elevation Cert. _____	
Mechanical _____	Other _____	

X. CERTIFICATES ISSUED (office use only)

	No. _____	DATE EXPIRED _____
☐ Temporary Certificate of Occupancy	No. _____	_____
☐ Temporary Certificate of Occupancy	No. _____	_____
☐ Continued Certificate of Occupancy	No. _____	_____
☐ Certificate of Occupancy	No. _____	_____
☐ Certificate of Approval	No. _____	_____



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

5/8/90

726-90

IDENTIFICATION Block 666 Lot 21Work Site Location 755 Montloring Rd Contractor Prommer for & Assoc.Owner in Fee Church of the Visitation Address _____Address same Tele. (____) _____

Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Tele. (____) _____ Federal Emp. No. _____

or Social Security No. _____

is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ OTHER _____☐ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

Sign

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 \$ 100

U.C.C. Form F-170A

CONSTRUCTION OFFICIAL

1 WHITE - OFFICE

2 CANARY - TAX ASSESSOR

3 PINK - JACKET

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building _____

Plumbing CEElectrical EM

Fire Protection _____

Other _____

Other PT

DCA Training Fee _____

Cert. of Occ. _____

Other _____

Total _____

Check No. _____

Cash _____

Collected By: _____



Date Received
Date Issued
Control #
Permit #

5/8/90
726-90

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

Block 666 Lot 21
Work Site Location Church Of The Visitation

Owner in Fee Church Of The Visitation
Address 755 Mantoloking Road
Brick, NJ 08723
Tele. (201) 477-0028
Contractor Frommer, Son & Associate
Address 1309 Roberts Avenue
Feasterville, Pa. 19047
Tele. ()
Lic. No. or Bids. Reg. No.
Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Failure	Failure	Approval	Initial
☒ No Plans Req.			Type:					
☒ All	5/8/90	PLC	Footings					
☐ Footing			Foundation					
☐ Foundation			Slab					
☐ Frame			Frame					
☐ Other			Insulation					
Joint Plan Review Required:			Finishes:					
☐ Elec.	☐ Plumb.	☐ Fire	Energy					
SUBCODE APPROVAL			Mechanical					
☐ CO	☐ CCO	☐ CA	TCO					
Date:			Other					
Approved By:			Final					

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
Total Bldg. Area/All Floors Sq. Ft.
Volume of Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$
2. Alteration \$
3. Total (1+2) \$

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

Sign

(Office Use Only)

\$ PL FEE
726-90

TYPE OF WORK:	
☐ New Building	
☐ Addition	
☐ Alteration	
☐ Roofing	
☐ Siding	
☐ Other	
☐ Demolition	
☐ Miscellaneous	
☐ Fence	Height <u> </u>
☐ Sign	<u>32</u> Sq. Ft.
☐ Pool	
☐ Elevator	
☐ Asbestos Abatement	
☐ Other	

Paid ☐ Check # <u> </u>	Administrative Surcharge \$ <u> </u>
Collected by: <u> </u>	Minimum Fee \$ <u> </u>
	TOTAL FEE \$ <u> </u>



Custom Signs and Plaques

FROMMEYER, SON & ASSOCIATES

1309 ROBERTS AVENUE
FEASTERVILLE, PA 19047 (215) 322-9267 FAX (215) 322-9270

transmittal

to: CHURCH OF THE VISITATION

MANTOLOKING ROAD

BRICK TOWN, NJ 08723

attention: REV. FRANCIS V. PICCOLELLA

PASTOR
(1-201-477-2325)

date: 03/27/90

project: CHURCH IDENTIFICATION

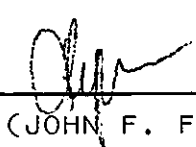
re: EXTERIOR LAWN SIGN

item sent:

- | | | |
|------------------------------------|---|---|
| ☐ letter | ☐ drawing | ☐ photograph |
| ☐ quotation | ☒ blueprint | ☐ specifications |
| ☐ brochure | ☐ sample | ☐ other |

notes: ENCLOSED PLEASE FIND OUR DRAWING SHOWING THE PROPOSED EXTERIOR ILLUMINATED DOUBLE FACED SIGN FOR THE FRONT OF THE CHURCH. SIGN IS ALL ALUMINUM CONSTRUCTION AND IS INTERNALLY ILLUMINATED WITH TUBES AND HI-OUTPUT BALLASTS. COLORS CAN BE ANY DESIRED. LEFT HAND SIDE IS REMOVABLE AND CHANGEABLE. THERE WILL BE TWO (2) INSERTS SUPPLIED FOR THE SUMMER AND WINTER MASS SCHEDULE. POSTS ARE ALUMINUM AND SPRAYED AND BAKED TO MATCH COLOR OF CASE. I'VE ENCLOSED A COUPLE OF PHOTOS SHOWING RECENT INSTALLATIONS OF THIS TYPE OF SIGN (ST. ANSELM & IMMACULATE HEART OF MARY). SIGN UNIT WOULD BE SET WITH CONCRETE. PLEASE REVIEW AND CALL ME, AT YOUR CONVIENCE TO DISCUSS. THIS IS A QUALITY CONSTRUCTED UNIT WHICH WILL AFFORD THE PARISH MANY YEARS OF TOTALLY MAINTENANCE FREE SERVICE.

SINCERELY,

by: 
(JOHN F. FROMMEYER)

cc:

8 FT 96

4 FT 

48 x 99

approx 10' x 4

10
120 x 48

2201
205
215
55
② 2676
205
2471

③

④

⑤

6²

x 2
4842

5m

96
10⁴/₂
9
8

3

4

*No Replace the old sign at 11th & Main Ave
8'*

Church of the Visitation

BINGO

TUE. 12 NOON
FRI. 7:30 P.M.

MASSSES

SATURDAY EVE: 5:00 & 7:30 P.M.
SUNDAY: 7:30, 8:30, 9:45, 11:00 A.M.
& 12:15 P.M.
WEEKDAY: 7:30, 8:15 & 9:00 A.M.
EVE OF HOLY DAY: 5:00 & 7:30 P.M.
HOLY DAYS: 7:00, 8:00, 9:00 A.M.
& 8:00 P.M.

IVORY BACK'D
4 ZIP-CHANGE 4-Color
COLOR - BLACK

IVORY BACK'D/ACRYLIC PLASTIC
• DURENDORIC BEAD LETTERS.
• 2-PANELS / 1-SUMMER, 1-WINTER

4 SQUARE TUBING - ALUMINUM
DURENDORIC BEAD COLOR.

CURB

CUSTOM LOGO

DURENDORIC BEAD &
IVORY LETTERS...

11th & Main Ave