

BLOCK 1068 LOT 15.01 QUALIFICATION CODE _____ ADDRESS (SITE) 105 Hendrickson Ave Brick, NJ PERMIT NO. 12-1623



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: Veterans Memorial Elementary
2. Name of Owner in Fee: Brick Twp Board of Ed.
Tel. () _____ e-mail _____
Address 101 Hendrickson Ave Brick NJ 08724
3. Ownership in Fee: ☒ Public ☐ Private
4. Principal Contractor: Breaker Electric Tel. (609) 203 1813
Address 403 Monmouth Rd e-mail _____
Clarksburg, NJ 08510
License No. OR, if new home, Builder Reg. No. 8743 Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. 22-230 2926 FAX: (609) 203 2145
5. Architect or Engineer: Design Resources Contact Pat Seiwel
Address 311 Hoes Lane Piscataway e-mail _____
Tel. (732) 560 7900 FAX: () _____
6. Responsible Person in Charge once Work has Begun Mike Hamiller
Tel. (732) 245 5269 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		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	_____ ft.
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 Approval	Rejection	Re-viewer

TOTAL COST

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 _____

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
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

BLOCK 1068LOT 15.01

QUALIFICATION CODE _____

ADDRESS (SITE) 103 Hendrickson Avenue
Brick NJ 08724PERMIT NO. 12-10023

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: Veterans Memorial Elementary School

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 571 Hoes Lane, Suite 301 e-mail dauidg@drgr.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 571 Hoes Lane, Suite 301, Piscataway NJ e-mail dauidg@drgr.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</u>		
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 _____

IIa. PROPOSED WORK

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

IIb. SUBCODES

(Check all that apply)

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

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
				6/12/12	KA		
\$58,478				6-12-12	JS	12-1-12	V

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
2. ☐ Refrigeration Systems
3. ☐ Cross-Connections/Backflow Preventers
4. ☐ Hazardous
5. ☐ Sprinkler
6. ☐ Smoke Control Systems in Open Wells
7. ☐ Underground Storage Tanks
8. ☐ Fire Alarm

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): E

- D. Construct. Classification: Present _____ Proposed VB



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 10/30/2013
Control Number C-12-002084
Permit Number 12-1623
Permit Issue Date 12/12/2012
Certificate Number 12-1623

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 101 - 107 HENDRICKSON AVE (103) Brick Township, NJ Block: 1068 Lot: 15.01 Qual: _____
Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION
Owner Address: 101 HENDRICKSON AVE. BRICK NJ 08724
Telephone: (732) 785-3000
Contractor Breaker Electric, Inc
Address 488 Monmouth Rd. Clarksburg NJ 08510
Telephone: (609) 208-1818 Fax: (609) 208-2145
License Number or Builders Registration Number: 8743 Federal Emp. Number: 22-2802926

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: ELECTRICAL ALTERATIONS Replacement of gym lights

Vets Memorial Middle School

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: _____



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 1068 Lot 15.01 Qualification Code _____

Work Site Location Veterans Memorial Elem. School

103 Hendrickson Ave, Brick Rd 08724

Owner in Fee: Brick Board of Education

Tel. (732) ~~560~~ 785-3000 e-mail _____

Address 101 Hendrickson Ave. Brick 08724

Contractor: Design Resources Group Tel. (732) 560-7900

Address 371 Hotchkiss Lane, Suite 301 e-mail davidg@drgr.com

Rockaway, NJ 08854

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

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

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW

Date _____

INSPECTIONS

Dates (Month/Day)

Initial

☐ No Plans Required

Date _____

Type:

Failure

Failure

Approval

Initial

☐ All

Date _____

Footings

Bonding

Foundation

Slab

Frame

Truss Sys./Bracing

Barrier-Free

☐ Footings/Foundations

Date _____

Foundation

Slab

Frame

Truss Sys./Bracing

Barrier-Free

☐ Exterior

Date _____

Foundation

Slab

Frame

Truss Sys./Bracing

Barrier-Free

☐ Interior

Date _____

Foundation

Slab

Frame

Truss Sys./Bracing

Barrier-Free

Joint Plan Review Required:

Date _____

Foundation

Slab

Frame

Truss Sys./Bracing

Barrier-Free

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator

Insulation

Finishes -Base Layer

Finishes -Final

Energy

Mechanical

TCO

Approved by: _____

Energy

Mechanical

TCO

Other

Final

Subcode Approval for Certificate

Energy

Mechanical

TCO

Other

Final

Subcode Approval for Permit

Energy

Mechanical

TCO

Other

Final

☐ CO ☐ CCO ☐ CA

Energy

Mechanical

TCO

Other

Final

Date: _____

Energy

Mechanical

TCO

Other

Final

Approved by: _____

Energy

Mechanical

TCO

Other

Final

Barrier-Free

Energy

Mechanical

TCO

Other

Final

B. BUILDING CHARACTERISTICS

Use Group Present E Proposed E

Const. Class Present VB Proposed VB

No. of Stories 1 Proposed E

Const. Class Present VB Proposed VB

Height of Structure 25'

Const. Class Present VB Proposed VB

Area — Largest Floor _____

Const. Class Present VB Proposed VB

New Bldg. Area/All Floors _____

Const. Class Present VB Proposed VB

Volume of New Structure _____

Const. Class Present VB Proposed VB

Max. Live Load _____

Const. Class Present VB Proposed VB

Max. Occupancy Load _____

Const. Class Present VB Proposed VB

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 Gulab

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Remove Gymnasium lights and install
new in original location

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 Light Replacement

FEE (Office Use Only)

\$ _____

COMMERCIAL

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

1 White = Inspector Copy

2 Canary = Office Copy

3 Pink = Office Copy

4 Gold = Applicant Copy



**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 1068 Lot 1501
Work Site Location Veterans Memorial Elementary
105 Mendocino Ave Back NJ 08724
Owner in Fee/Occupant Back NJ Board of Education
Address 101 Mendocino Ave
Back NJ 08724
Tel. (732) 785-3000 Ex 1016
Contractor BREAKER ELECTRIC, INC.
Address 488 MONMOUTH ROAD
CLARKSBURG, NJ 08510

Tel. (609) 208-1818 Fax (609) 208-2145
Lic. No. 8743
Federal Emp. No. 22-2802926

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 18,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Type:	Failure	Failure	Approval	Initial
☐ No Plans Required								
Joint Plan Review Required:								
☐ Building ☐ Plumbing								
☐ Fire ☐ Elevator								
☒ Elec. Plans Approved								
Date: <u>12-1-13</u>								
Approved by: <u>JT</u>								
SUBCODE APPROVAL								
☐ CO ☐ CCO ☒ CA								
Date: <u>12/1/13</u>								
Approved by: <u>SS/ld</u>								

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's Signature _____ Contractor's Seal and Signature _____

☒ Licensed Electrical Contractor ☐ Exempt Applicant



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

D. TECHNICAL SITE DATA

QTY SIZE ITEMS
12 Lighting Fixtures
5 Receptacles
Switches
Detectors
Light Poles
Motors—Fract. HP
Emergency & Exit Lights
Communications Points
Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UVW 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

FEE (Office Use Only)

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training 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 1068

Lot 15.01

Qualification Code

Work Site Location Veterans Memorial Elementary School

Owner in Fee: Brick Board of Education

Tel. (732) 785 3000

Address 101 Hendrickson Ave

Contractor: Design Resources Group

Address 311 Haes Lane, Suite 301

City Paterson, NJ

State 08854

Contractor License No. 08854

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

Federal Emp. ID No. 58,478

Use Group Present Educational

Proposed Educational

Building Occupied as Other

Est. Cost of Elec. Work \$ 58,478

Utility Co. Other

Exp. Date

FAX: (732) 560 7910

INSPECTIONS

PLAN REVIEW

☐ No Plans Required

☐ Partial - Underslab Utilities Approved

Date: 6/18/12 Approved by: [Signature]

☒ Electric Plans Approved

Date: 6/18/12 Approved by: [Signature]

Joint Plan Review Required:

☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL FOR PERMIT

Date: 6/18/12

Approved by: [Signature]

SUBCODE APPROVAL FOR CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date: 6/18/12

Approved by: [Signature]

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: [Signature]
Print name here: David Galati
Date Received 6/18/12
Control # 12.1623
Date Issued
Permit #

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK: Replacement of Gyn Lights

QTY.	SIZE	ITEMS	FEE (Office Use Only)
4		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motor - 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 Over/Under 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	



CONSTRUCTION PERMIT

Date Issued 12/12/2012
Control # C-12-002084
Permit # 12-1623

IDENTIFICATION Block: 1068 Lot: 15.01 Qualifier _____
Work Site Location: 101 - 107 HENDRICKSON AVE (103) Brick Contractor Design Resources Group
Township, NJ Address 371 Hoes Lane Ste. 301 Piscataway NJ 08854
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION
101 HENDRICKSON AVE. BRICK NJ 08724 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:

ELECTRICAL ALTERATIONS Replacement of gym lights

Vets Memorial Middle School

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 \$76,678

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	

Construction Official _____

Date _____

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

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 #

6/18/12
C-12-002084
12.1023

IDENTIFICATION Block: 1068 Lot: 15.01 Qualifier
Work Site Location: 101 - 107 HENDRICKSON AVE (103) Brick Contractor: Design Resources Group
Township, NJ Address: 371 Hoes Lane Ste. 301 Piscataway NJ 08854
Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION Telephone: (732) 560-7900
101 HENDRICKSON AVE. BRICK NJ 08724 Lic. No. or Bldrs. Reg. No.
Telephone: (732) 785-3000 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:

ELECTRICAL ALTERATIONS Replacement of gym lights

Vets Memorial Middle School

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: \$116,956

Construction Official

Date

6-14-12

U.C.C. F170
equiv (rev 8/03)

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. \$0
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

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



Department of Community Development & Land Use

Juan Carlos Bellu
Director

732-262-1027

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

August 21, 2012

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

Re: Veterans Memorial Elementary School
Gym Lights Replacement
101-107 Hendrickson Avenue
Control Number 12-002084

Dear Mr. Seiwell:

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 and 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, however, 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: James Edwards, Business Administrator
Robert Vogel, Director of Facilities



1068-1501



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: Gym Lighting Replacement
School: Veterans Memorial ES
School District: Brick Township
County: Ocean
DOE Project #: 0530-080-10-1076

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 0530-080-10-1076
Land
Temporary
Feasibility
Emergency

SCHOOL FACILITIES

REQUEST FOR LOCAL RELEASE OF SCHOOL CONSTRUCTION PLANS

2012 JUN -6 A 10:25

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:	Veterans Memorial Elementary School	District Fax #:	732-840-9089
School Code:	080	District E-Mail:	jedwards@brickschools.org
Project Title:	Gym Lighting Replacement at Veterans M	A/E Firm:	Design Resources Group
Project Address:	103 Hendrickson Avenue	A/E Contact:	Mr. Patrick S. Seiwel, Principal
Municipality:	Brick Township	A/E Phone #:	732-560-7900
Zip Code:	08724	A/E Fax #:	732-560-7910
		A/E E-Mail:	patrick@draga.com

Brief Description of Project:

Replace Existing Gym Lighting

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 Standards 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: 3-3-12

Municipal Code Enforcing Agency Classification is class: Class 1

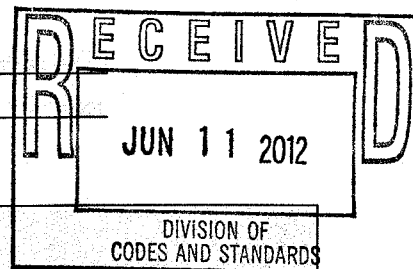
Municipal Code Enforcing Agency Address:

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., OCESignature: *[Signature]*
Date Acted Upon: 5/1/12Action: ☒ APPROVED ☐ DENIED (identify reason below) ☐ RETURNED NO ACTION (identify reason below)

Comments:



State of New Jersey
DEPARTMENT OF COMMUNITY AFFAIRS

101 SOUTH BROAD STREET
PO BOX 802
TRENTON, NJ 08625-0802

JON S. CORZINE
Governor

JOSEPH V. DORIA, JR.
Commissioner

July 2, 2009

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

Re: Project: Renovations; Electrical Upgrades
School: Lake Riviera MS
School District: Brick Township
County: Ocean
DOE Project #: 0530-043-09-1009

Dear Mr. Newman:

We are in receipt of a letter from the New Jersey Department of Education (NJDOE) forwarding the above referenced school district's request for permission to allow the New Jersey Uniform Construction Code (NJUCC) plan review and release to be performed by your agency. You are granted this authority.

Please be aware that it is your responsibility to obtain either a NJDOE final educational adequacy approval letter or a letter from the NJDOE stating that final educational adequacy approval is not required as well as NJDOE stamped approved plans 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 plan review 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 they may be applicable to this specific project.

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

Sincerely,

Suzanne Borek

John N. Terry
Division of Codes and Standards



c: Walter Hrycenko, Superintendent, Brick Township School District

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

Parent	0530-043-09-1009
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:	Lake Riviera Middle School	District Fax #:	732-840-9089
School Code:	043	District E-Mail:	jedwards@brickschools.org
Project Title:	Renovations to Lake Riviera MS - 1b	A/E Firm:	Spiezle Architectural Group
Project Address:	171 Beaverson Boulevard	A/E Contact:	Steven Siegel, Associate
Municipality:	Brick Twp	A/E Phone #:	609-6957400 x224
Zip Code:	08723	A/E Fax #:	609-3942274
		A/E E-Mail:	Ssiegel@spiezle.com

Brief Description of Project:

Electrical 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 Standards 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: _____

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: 11-14-08

Municipal Code Enforcing Agency Classification is class:

Class 1

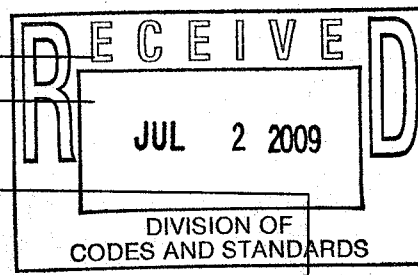
Municipal Code Enforcing Agency Address:

Street: Municipal Building
402 Chambers Bridge Road
City: Brick Township
State: NJ
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: Suzanne Borek
Title: Construction Official

Signature:

Date Acted Upon:

Suzanne Borek
7/12/09

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

Comments:



DESIGN RESOURCES GROUP ARCHITECTS

JUN 7 2012

Letter of Transmittal

Comprehensive Architectural
Services

To: Township of Brick NJ Building Department 401 Chambers Bridge Road Brick NJ 08723	Date: 06-04-2012
	Attention: Daniel Newman
	Project #: 1203
	Reference: Veterans Memorial ES Gym Lights

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

WE ARE SENDING YOU:

☒ Attached ☐ Under separate cover via _____ the following items:

☒ Shop Drawings ☒ Plans ☒ Plans ☒ Samples ☒ Specifications

☒ Copy of letter ☒ Change Order ☒ Others _____

COPIES	DATE	NO.	DESCRIPTION
2			Drawings for Veterans Memorial ES Gym Lighting replacement
2			Specifications for Veterans Memorial ES Gym Lighting replacement

THESE ARE TRANSMITTED as noted below:

☒ For Approval	☐ Approved as submitted	☐ Resubmit _____ copies for approval
☐ For your use	☐ Approved as noted	☐ Submit _____ copies for distribution
☐ As Requested	☐ Returned for corrections	☐ Return _____ corrected prints
☒ For review and comment	☐ _____	
☐ FOR BIDS DUE _____		
☐ Prints returned after loan to us		

REMARKS: The attached projects being submitted for review for permit. Once the school has awarded the project to a contractor, the contractor will submit for a change of contractor.

COPY TO:	SIGNED: David Galati
----------	----------------------

CERTIFICATION IN LIEU OF OATH

#1

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 Breaker Electric Inc.
Address 483 Monmouth Rd
Clarksburg, NJ 08510
Telephone (609) 203-1315
Signature _____

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

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 6/6/12

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 Architects.
Address 371 Hors 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.