

BLOCK 1211 LOT 2 QUALIFICATION CODE _____ ADDRESS (SITE) 2001 Lanes Mills Rd. PERMIT NO. 150945



CONSTRUCTION PERMIT APPLICATION

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

CH-05362

I. IDENTIFICATION

1. Proposed Work Site at: Brick Memorial High School
2. Name of Owner in Fee: Brick Twp Board of Education
Tel. (732) 785-3000 e-mail _____
Address 101 Hendrickson Ave. Brick 08724
street municipality zip code
3. Ownership in Fee: Public X Private _____
4. Principal Contractor: Desesa Engineering Co. Tel. (973) 597-0070
Address 83 Borsa Ave. e-mail TDIAS@desesahvac.com
Livingston, NJ 07039
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. 22-1612310 FAX: (973) 597-0134
5. Architect or Engineer DICORA - Rubino Architects Contact Bob Tarnello
Address 30 Galesi Drive, Wayne, NJ 07469 e-mail _____
Tel. (973) 256-0202 FAX: (973) 256-0227 ✓
6. Responsible Person in Charge once Work has Begun Tony Dias Plans
Tel. (973) 597-0070 x29 FAX: (973) 597-0134

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

1. Number of Stories _____
2. Height of Structure 30 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 _____

(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)

- Mech.
☐ Building
☐ Electrical
☐ Plumbing
☐ Fire Protection
Gen Const
☐ 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
<u>900,000</u>				<u>04/04/15</u>	<u>KEL</u>			
<u>100,400</u>				<u>3-31-15</u>	<u>TO</u>			
<u>30,000</u>				<u>4-2-15</u>	<u>OK</u>			
<u>4,000</u>				<u>3-31-15</u>	<u>KEL</u>			
<u>228,500</u>								

TOTAL COST \$1,262,900

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 10/28/2015
Control Number C-14-005362
Permit Number 15-0945
Permit Issue Date 4/6/2015
Certificate Number 15-0945

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 2001 LANES MILL RD BRICK MEMORIAL HIGH SCHOOL Brick Township, NJ Block: 1211 Lot: 2 Qual: _____
Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION
Owner Address: 101 HENDRICKSON AVE. BRICK NJ 08724
Telephone: (732) 785-3000
Contractor: Desesa Engineering
Address: 83 Dorsa Avenue Livingston NJ 07039
Telephone: (973) 597-0070 Fax: _____
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: ALTERATION - COMMERCIAL ...REPLACE CHILLER & RTU's

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: 10/28/2015

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

Fee: \$0.00

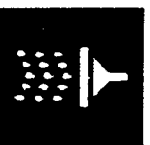
Check Number: _____

Collected By: _____

Page 1



PLUMBING
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

4/6/15
15-0945

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

Block 1211 Lot 2 Qualification Code
Work Site Location Brick Memorial Charter + Gas Pipe (HS)
2001 Lanes Mills Road Brick NJ 08724
Owner in Fee Brick Twp Board of Education
Address 101 Hendrickson Ave.
Brick NJ 08724
Tel (732) 785-3000
Contractor GAUDI MECHANICALS CORP.
Address 238 GOFEELE ROAD
HAWTHORNE, NEW JERSEY 07506
Tel (973) 238-1835 FAX (973) 238-1836
Contractor License No. 8400
Federal Emp. No. 22-23600-28

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 \$ 30,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
		Type:	Failure	Approval	Initial
Joint Plan Review Required:					
☐	No Plans Required	Slab			
☐	Building	Rough			
☐	Electric	Water			
☐	Fire	Elevator			
☐	Plumbing Plans Approved	Sewer			
Date:	<u>4-2-15</u>	Fixtures			
Approved by:	<u>[Signature]</u>	Gas Equipment			
SUBCODE APPROVAL		Gas Piping			
☐	CO	LP Gas Tank			
☐	CCO	Fuel Oil Piping			
☐	CA	Solar			
Date:	<u>8-27-15</u>	TCO			
Approved by:	<u>[Signature]</u>				

C. CERTIFICATION (NJ License 08-0474)

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/Contractor's Seal and Signature
[Signature] Licensed Plumbing Contractor Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	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>Condensate</u> <u>RTUs</u>	
	Other <u>(1) AHU</u>	

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 1211 Lot 2 Qualification Code _____

Work Site Location 200 LANES HILL ROAD

Owner in Fee: BRICK BOARD OF EDUCATION

Tel. (732) 262.2628 e-mail _____

Address 101 HENDRICKSON AVE BRICK, NJ 08723

Contractor: JSC ELECTRIC LLC Tel. (732) 206.0010

Address 1105 INDUSTRIAL PKWY e-mail KATHY.FRANCIS@JSCBMS.COM

Contractor License No. 9455 Exp. Date 3/31/15

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 _____ Proposed _____

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

Building Occupied as SCHOOL Utility Co. _____

Est. Cost of Elec. Work \$ 25,000

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: FRANCIS COMPANY

[] Licensed Elec. Contractor [] Certified Landscape Irrigation Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: HVAC/ATC DDC CONTROLS. LOW VOLTAGE WIRING

QTY. SIZE ITEMS

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 UV 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

JOBS SUMMARY (Office Use Only)

PLAN REVIEW:

[] No Plans Required

[] Partial—Underslab Utilities Approved

Date: _____ Approved by: _____

[] Electric Plans Approved

Date: 3/25/15 Approved by: [Signature]

Joint Plan Review Required:

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

SUBCODE APPROVAL FOR PERMIT

Date: 3-25-15

Approved by: [Signature]

SUBCODE APPROVAL FOR CERTIFICATE

[] CO [] CCO [] M CO

Date: 3/22/15

Approved by: [Signature]

Date of Grounding and Bonding Certification

DATE RECEIVED

CONTROL #

DATE ISSUED

PERMIT #

4/16/15

15-0945-A

ADMINISTRATIVE SURCHARGE \$

MINIMUM FEE \$

STATE PERMIT SURCHARGE FEE \$

TOTAL FEE \$

8-17-15 BJR

Pipe and drains to

roof w/ splash blocks

6-1/2 x 1/2 Tee have

1/2 x 1/4" bushings -

also 1/2" plugs

⤴ P tech



ELECTRICAL SUBCODE



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

Block 1211 Lot 2 Qualification Code _____

Work Site Location Brick Memorial High School
2001 Lanes Mills Road, Brick, NJ 08724

Owner in Fee: Brick Township Board of Education

Tel. (732) 785-3000 e-mail tim 732 513-9075

Address 101 Hendrickson Avenue, Brick, NJ 08724

Contractor TZ Electrical Contracting, LLC Tel. (973) 948-0260

Address 22 Sunrise Trail e-mail tzelectric@optimum.net
Branchville, NJ 07826

Contractor License No. 11762 Exp. Date 3/31/15

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

Federal Emp. ID No. 45-2526282 FAX: (973) 948-0263

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 100,400.00

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: _____ Approved by: _____	Barrier-Free	
[] Electric Plans Approved	Trench	
Date: <u>3/18/14</u> Approved by: <u>[Signature]</u>	Temp. Serv.	
Joint Plan Review Required:	Constr. Serv.	
[] Bldg. [] Plumb. [] Fire [] Elev.	TCO	
SUBCODE APPROVAL for PERMIT	Other	
Date: <u>3/10/14-12-10/14</u>	Service	
Approved by: <u>[Signature]</u>	Final	
	Barrier-Free	
SUBCODE APPROVAL for CERTIFICATE	Temp. Cut-in-Card Date Issued	
[] CO [] CCO [] CA	Final Cut-in-Card Date Issued	
Date: <u>8/10/15</u>	Annual Pool Inspection	
Approved by: <u>[Signature]</u>	Date of Grounding and Bonding	
	Certification	

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

15-0945

C. CERTIFICATION AND SWEAT 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 specified on this application.
Applicant sign/Contractor: Steven Woodhead
sign and seal here: _____
Printname here: Steven Woodhead

Printname here: Steven Woodhead

☒ Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK	QTY	SIZE	ITEMS	FEE (Office Use Only)
Chiller & RTU Replacements	3		Lighting Fixtures	
	4		Receptacles	
			Switches	
			Detectors	
			Light Poles	
			Motors—Fract. HP	
			Emergency & Exit Lights	
			Communications Points	
			Alarm Devices/F.A.C. Panel	
			Control Panels	
	9		TOTAL NUMBERS	
			Pool Permitwith UV 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	
	4	3	HP/KW Space Heater/Air Handler	
			KW Baseboard Heat	
	2/2	15/20	HP Motors 1/+ HP	
	1	30	KW Transformer/Generator	
	1/1	100/400	AMP Service	
			AMP Subpanels	
			AMP Motor Control Center	
			KW Elec. Sign/Outline Light	
	1	400A	Chiller	

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



	Date	Initial	INSPECTIONS	Dates (M)
PLAN REVIEW				

Max. Occupancy Load _____

TOTAL FEE \$ _____

4/6/15

TOTAL FEE \$ _____

2 Canary = Office Copy
4 Gold = Applicant Copy

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 _____ 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 Desesa Engineering Co., Inc.

Address 83 Dorsa Ave.

Livingston, NJ 07039

Telephone (973) 597-0070

Signature And 2

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



FIRE PROTECTION 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 121 Lot 2 Qualification Code _____

Work Site Location Brick Memorial High School
2001 Lanes Mills Road, Brick, NJ 08724

Owner in Fee: Brick Township Board of Education

Tel. 732 785-3000 e-mail _____

Address 101 Hendrickson Avenue, Brick, NJ 08724

Contractor: TZ Electrical Contracting, LLC Tel. 973 948-0260

Address 22 Sunrise Trail e-mail tzelectric@optimum.net

Branchville, NJ 07826

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____

Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____

Fire Alarm Contractor No. 11762 Exp. Date 3/31/15

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

Federal Emp. ID No. 45-2526282 FAX: 973 948-0263

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

Heating System: ☐ New OR ☐ Modification to Existing

OR ☐ Conversion OR ☐ Replacement

Fuel Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar

☐ Other _____

Location: _____

Total Cost of Fire Protection Work \$ 4,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

☐ Partial - Underslab Utilities Approved

Date: _____ Approved by: _____

☒ Fire Protection Plans Approved

Date: 3/31/15 Approved by: [Signature]

Joint Plan Review Required:

☐ Bldg. ☐ Elec. ☐ Plumb. ☐ Elev.

SUBCODE APPROVAL for PERMIT

Date: 4-1-15

Approved by: [Signature]

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ L ☐ CA

Date: 4-1-15

Approved by: [Signature]

INSPECTIONS

Type: _____

Alarm System _____

Suppression Sys. _____

Standpipe _____

Fire Pump _____

Pre-Eng. System _____

Mechanical _____

Smoke Control _____

TCO _____

Flam/Combust Tanks _____

Fireplace Venting _____

Final _____

Other _____

Date Received _____
Control # _____
Date Issued _____
Permit # 15-0945

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.
Applicant: Steven Woodhead
Signature: [Signature]

Print name here: Steven Woodhead

D. TECHNICAL SITE DATA ☒ Certified Contractor ☐ Exempt Applicant

DESCRIPTION OF WORK: Install duct detectors

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

Flammable/Combustible Tanks _____

Alarm Systems _____

☐ System _____

☐ 110v Interconnected _____

☐ CO Detectors/110v _____

Alarm Devices (i.e., smoke, heat, pulls, waterflow) _____

Supervisory Devices (i.e., tamper, low/high air) _____

Signaling Devices (i.e., horn/strobes, bells) _____

Other Devices _____

TOTAL _____

Suppression Systems _____

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) _____

Standpipes _____

Pre-engineered Systems _____

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

FM200 Suppression _____

Other _____

Other Systems _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Fuel-Fired Appliances ☐ Gas ☐ Oil ☐ Solid _____

Fireplace Venting/Metal Chimney _____

Other _____

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



PERMIT UPDATE

Date Update Issued 4/6/15
 Control # C-14-005362+A
 Permit # +A

15-0945+A

IDENTIFICATION Block: 1211 Lot: 2 Qualifier _____
 Work Site Location: 2001 LANES MILL RD BRICK MEMORIAL HIGN Contractor Desesa Engineering
SCHOOL Brick Township, NJ Address 83 Dorsa Avenue Livingston NJ 07039
 Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION
101 HENDRICKSON AVE. BRICK NJ 08724 Telephone: (973) 597-0070
 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:

HVAC CONTROLS

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 \$25,000

David Newman Jr.
 Construction Official

4/6/15
 Date

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	
Other	\$0
Total	\$0
Check No.	
Cash	\$0
Credit	\$0
Collected By	

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 4/6/2015
Control # C-14-005362
Permit # 15-0945

IDENTIFICATION Block: 1211 Lot: 2 Qualifier _____
Work Site Location: 2001 LANES MILL RD BRICK MEMORIAL HIGN Contractor Desesa Engineering
SCHOOL Brick Township, NJ Address 83 Dorsa Avenue Livingston NJ 07039
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION
101 HENDRICKSON AVE. BRICK NJ 08724 Telephone: (973) 597-0070
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:

ALTERATION - COMMERCIAL ...REPLACE CHILLER & RTU's

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 \$1,653,700

David A. Newman Jr.
Construction Official

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	\$0
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$0
Check No.	
Cash	\$0
Credit	\$0
Collected By	

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Heating & Air Conditioning

DeSesa

ENGINEERING COMPANY INC

 (973) 597-0070

Fax: (973) 597-0134

TO: **TOWNSHIP OF BRICK**
401 CHAMBERSBRIDGE ROAD
BRICK, NJ 08723

LETTER OF TRANSMITTAL

DATE: 2/26/2015	C-JOB# 15-4021
ATTENTION: BUILDING DEPARTMENT	
RE:	
BRICK MEMORIAL HS	
HVAC UPGRADES	
2001 LANES MILL ROAD	
BRICK, NJ 08724	

WE ARE SENDING YOU

☒ Attached

☐ Under separate cover via _____ the following items

☐ Shop drawings

☐ Prints

☐ Plans

☐ Samples

☐

Specifications

☐ Copy of letter

☐ Change Order

☒

Documents

COPIES	DATE	NO.	DESCRIPTION
1			PERMIT APPLICATIONS FOR CONSTRUCTION, MECHANICAL, FIRE,
			PLUMBING AND ELECTRICAL
2			SIGNED AND SEALED PLANS

THESE ARE TRANSMITTED as checked below:

☒ FOR APPROVAL

☐ Approved as submitted

☐ Resubmit _____ copies for approval

☐ For Close Out

☐ Submit _____ copies for distributions

☐ As requested

☐ Returned for corrections

☐ Return _____ corrected prints

☐ For review and comment

☐

☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS:

COPY TO: FILE

SIGNED:

LAUREEN MCDERMOTT

ASST. PROJECT MANAGER

JSC ELECTRIC, LLC

*SPECIALIZING IN ELECTRICAL SOLUTIONS
FOR SMALL AND LARGE FACILITIES*

1105 Industrial Parkway
Brick, New Jersey 08724

NJ license # 9455

Phone: 732-206-0010
Fax: 732-206-0080

March 4, 2015

Township of Brick
Municipal Building
401 Chambers Bridge Road
Brick, NJ 08723

Attn: Building & Construction Department – Code Official
Permit Application

Enclosed please find the original and three required copies of the permit for the Brick Memorial HS Project. We have been sub-contracted by DeSesa Engineering for the controls portion of the project therefore, a permit update is also included with the application.

Also enclosed is the postage paid envelope for the return of the issued permit.

If you have any questions or need additional information please don't hesitate to contact our office.

Sincerely,
Kathy Francese
Office Manager

Kathy.Francese@jscbms.com

LICENSED, INSURED, REGISTERED CONTRACTOR BY THE STATE OF NEW JERSEY

AFFILIATED WITH SQUARE D / SCHNEIDER ELECTRIC