

BLOCK 834 LOT 6 QUALIFICATION CODE _____ ADDRESS (SITE) 1683 W. Princeton PERMIT NO. 09-1346



CONSTRUCTION PERMIT APPLICATION

209-001869

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

I. IDENTIFICATION

1. Proposed Work Site at: 1683 W. Princeton Ave Brick, NJ 08724
2. Name of Owner in Fee: Ralph Stora
Tel. _____ e-mail _____
Address same
3. Ownership in Fee: Public _____ Private ☒ street municipality zip code
4. Principal Contractor: Shore Environmental Tel. (732) 747-1112
Address PO Box 8575 e-mail _____
Red Bank, NJ 07701
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13V10273300
Federal Emp. ID No. _____ FAX: () _____
5. Architect or Engineer _____ Contact _____
Address _____ e-mail _____
Tel. () _____ FAX: () _____
6. Responsible Person in Charge once Work has Begun Alex Raposo
Tel. (732) 747-1112 FAX: (732) 747-4434

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		
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	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
		<u>6/3/09</u>					

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks

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.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 Shore Environmental
Address PO BOX 8575
Red Bank, NJ 08001
Telephone (732) 747-1112
Signature _____

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



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

4/10/09
C-09-001869

09-1346

IDENTIFICATION Block: 836 Lot: 6 Qualifier
Work Site Location: 1683 W. PRINCETON AVE. Brick Township, NJ Contractor: SHORE ENVIRONMENTAL
Owner in Fee: STOIA, RALPH JR & RUTH ANN Address: PO BOX 8575 RED BANK NJ 07701
1683 W PRINCETON AVE BRICK NJ 08724 Telephone: (732) 747-1112
Telephone: [REDACTED] Lic. No. or Bldrs. Reg. No. 13VH0273500
Federal Employee No. [REDACTED]

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:

TANK REMOVAL (RESIDENTIAL)

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 \$800

Construction Official

Date

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	\$70
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$70
Check No.	4512
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.



CONSTRUCTION PERMIT

Date Issued

Permit #

IDENTIFICATION Block 8316 Lot 16 Qualification Code _____
Work Site Location 1683 West Princeton Ave Contractor Shore Environmental
Brick, NJ 08724 Address PO Box 8575
Owner in Fee Ralph Stoia Red Bank, NJ 07701
Address same Tel. (321) 747-1112
Te [REDACTED] Lic. No. or Bldrs. Reg. No. _____

Is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER _____
(Subchapter 8 only)

DESCRIPTION OF WORK:

Removal of 290 gallon UST

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 \$ 800.00

Construction Official

Date

PAYMENTS (Office Use Only)

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA State Permit Fee _____
Cert. of Occupancy _____
Other _____
Total _____
Check No. _____
Cash _____
Collected by _____

(see reverse side)

U.C.C. F170 (rev. 01/04)

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 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 given.

☐ 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 the case 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. Utility services, including septic.
4. 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.

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☐ A complete copy of released plans must be kept on the job site.



CONSTRUCTION PERMIT

Date Issued

Permit #

IDENTIFICATION Block 8316 Lot 6 Qualification Code _____
Work Site Location 1683 West Princeton Ave Contractor Shore Environmental
Brick, NJ 08724 Address PO Box 8575
Owner in Fee Ralph Stoia Red Bank, NJ 07701
Address same Tel. (732) 747-1412
Tel. () _____ Lic. No. or Bldrs. Reg. No. _____

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Estimated Cost of Work \$ 800.00

Construction Official

Date

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Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA State Permit Fee _____
Cert. of Occupancy _____
Other _____
Total _____
Check No. _____
Cash _____
Collected by _____

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

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3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT

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Owner in Fee Ralph Stoia Red Bank, NJ 07701
Address same Tel. (321) 747-1112
Tel. _____ Lic. No. or Bldrs. Reg. No. _____

Is hereby granted permission to perform the following work:

- | | | |
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| ☐ ELEVATOR DEVICES | ☐ ASBESTOS ABATEMENT | ☐ OTHER _____ |
- (Subchapter 8 only)

DESCRIPTION OF WORK:

Removal of 290 gallon UST

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 \$ 800.00

Construction Official

Date

PAYMENTS (Office Use Only)

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA State Permit Fee _____
Cert. of Occupancy _____
Other _____
Total _____
Check No. _____
Cash _____
Collected by _____

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT

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Date Issued

Permit #

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Brick, NJ 08724 Address PO Box 8575
Owner in Fee Ralph Stoia Red Bank, NJ 07701
Address same Tel. (321) 747-1112
Tel. _____ Lic. No. or Bldrs. Reg. No. _____

Is hereby granted permission to perform the following work:

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☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
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(Subchapter 8 only)

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Estimated Cost of Work \$ 800.00

Construction Official

Date

PAYMENTS (Office Use Only)

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA State Permit Fee _____
Cert. of Occupancy _____
Other _____
Total _____
Check No. _____
Cash _____
Collected by _____

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT

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☐ A complete copy of released plans must be kept on the job site.



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 07/28/2009
Control Number C-09-001869
Permit Number 09-1346
Permit Issue Date 06/10/2009
Certificate Number 09-1346

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 1683 W. PRINCETON AVE. Brick Township, NJ Block: 836 Lot: 6 Qual: _____
Owner in Fee: STOIA, RALPH JR & RUTH ANN
Owner Address: 1683 W PRINCETON AVE BRICK NJ 08724
Telephone: _____
Contractor SHORE ENVIRONMENTAL
Address PO BOX 8575 RED BANK NJ 07701
Telephone: (732) 747-1112 Fax: (732) 747-4434
License Number or Builders Registration Number: 13VH02733500 Federal Emp. Number: _____
Home Warranty Number: _____
Type of Warranty Plan: ☐ State ☐ Private
Use Group: U Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: TANK REMOVAL (RESIDENTIAL)

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: _____



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 836 Lot 1683 West Princeton Ave
Work Site Location Brick NJ 08724

Owner in Fee: Ralph Spore
Tel: [redacted] e-mail: [redacted]

Address Shore Environmental Tel. 732-747-1112
Contractor PO Box 8575 Red Bank NJ 08701 e-mail [redacted]

Fire Protection Equipment, NJ Div of Fire Safety Permit No. [redacted]
Fire Protection Equipment, NJ Div of Fire Safety Installer No. [redacted]
Fire Alarm Contractor No. [redacted] Exp. Date [redacted]

Home Improvement Contractor Registration No. or Exemption Reason (if applicable) 13VH0213350
Federal Emp. ID No. 043706783 FAX: (732) 747-4434

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present [redacted] Proposed [redacted] Fire Alarm System: [redacted] New or [redacted] Existing
Constr. Class: Present [redacted] Proposed [redacted] Location of Panel: [redacted]
Heating System: [redacted] New or [redacted] Existing [redacted] HVAC [redacted] Fire Suppression/Standpipe System:
Type: [redacted] Gas [redacted] Oil [redacted] Electric [redacted] Solar [redacted] New or [redacted] Existing
[redacted] Other [redacted] Location of Main Control Valve: [redacted]
Location: [redacted]

Fuel Storage Tank: [redacted]
Fuel Type: [redacted] Flammable or [redacted] Combustible Capacity [redacted]
Total Cost of Fire Protection Work \$ 8000

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
☒ No Plans Required	Alarm System				
☒ Joint Plan Review Required	Suppression Sys.				
☐ Building ☐ Plumbing	Standpipe				
☐ Electric ☐ Elevator	Fire Pump				
☐ Fire Plans Approved	Pre-Eng. System				
Date: <u>6/5/09</u>	Mechanical				
Approved by: <u>[signature]</u>	Smoke Control				
SUBCODE APPROVAL					
☐ CO ☐ LCCO ☐ CA	Flam/Combust Tanks				
Date: <u>6/25/09</u>	Fireplace Venting				
Approved by: <u>[signature]</u>	Final				
	Other <u>[redacted]</u>				

Reorder From OCS Printing (609) 390-1400

09-1346
6/10/09
Date Received Control #
Date Issued Permit #
I hereby certify that I am the owner of record and am authorized to make this application.
Applicant's Signature/Contractor's Signature
[signature]
[] Certified Contractor [] Exempt Applicant

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the owner of record and am authorized to make this application.
Applicant's Signature/Contractor's Signature
[signature]
[] Certified Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Removal of 290 gallon UST

Water Supply Source [redacted]
Method of Alarm/Suppression System Supervision [redacted]

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[] System		
[] 110v Interconnected		
[] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump <u>[redacted]</u> GPM Type <u>[redacted]</u>		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO ₂ Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [] Gas or [] Oil		
Fireplace Venting/Metal Chimney		
Other <u>Tank Removal</u>		
Administrative Surcharge \$		
Minimum Fee \$		
State Permit Surcharge Fee \$		
TOTAL FEE \$		

See Note

06/19/2009 15:25 7327474434

SHORE LLC

TOWNSHIP OF BRICK



For Information Call: 732-262-4627

Permit No. 09-1346

NOT APPROVED

- ☐ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE
☐ ELEVATOR DEVICES ☒ PROTECTION
☐ OTHER _____

Type of Inspection FinalDate 6/19/09Inspector RGOComments Visual OK

Need tank/slug destructor
 UCC FORM F-230B Receipts only -

 732-747-7784
 732-747-7779

Red Bank Recycling Auto Wreckers, Inc.
 64 Central Avenue, Red Bank, New Jersey 07701

Date 6/19/09
Mr. Ralph Stora
Shore Environmental

	AMOUNT	CWT	TOTAL
LIGHT IRON			
NO. 1 STEEL			
NO. 2 STEEL			
D. M. B.			
CAST IRON			
COPPER			
BRASS			
ALUMINUM			
RADIATORS			
BATTERIES			
CARS			

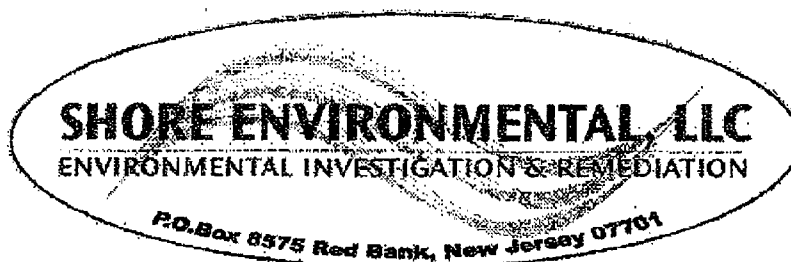
Signature of Owner

I am the owner of said vehicle and I hereby agree to Red Bank Recycling Auto Wreckers, Inc.

1 275 Tank cut, cleaned
6/19/09
Shore Environmental

23/06/2009 16:09

PAGE 1/1



June 22, 2009

Attn: Building Construction Official
Township of Brick
401 Chambers Bridge Road
Brick Township, NJ 08723
Phone: (732) 262-1027

Re: Sludge Disposal Documentation
1683 West Princeton Avenue
Brick, New Jersey 08724
Block: 836, Lot: 6
Permit No. 09-1346

Total Pages: 1

Attn Building Code Office,

This letter should serve as formal notification that less than 5 gallons of residual sludge was removed from the former 275-Gallon heating oil underground storage tank at the above referenced property which was removed and inspected by the Township of Brick on June 19, 2009. Please note that all residual sludge is staged at our facility for bulk pick-up. Shore can provide a receipt for bulk liquid disposal upon request once a facility pump-out, transport and disposal of the liquid is scheduled and completed by Disposal Systems, Inc. of Freehold, New Jersey who provides such services to Shore Environmental, LLC. Please feel free to contact me at 732-904-1163 should you have any questions or concerns.

Sincerely,

Alex Raposo
Senior Hydrogeologist
Shore Environmental, LLC

Shore Environmental, LLC
PO Box 8575, Red Bank, New Jersey 07701
Phone: 732.747.1112 Fax: 732.747.4434

Called
A/M 6/24/09

RILEY & GUTMAN, ESQS.

Attorneys-at-Law
31 W. Main Street, 2nd Floor
P. O. Box 6305
Freehold, New Jersey 07728
(732) 431-0300
(732) 431-2574 (FAX)

FAX COVER SHEETFAX NUMBER: 732-262-8954TO: Brick Bldg. Dept.FROM: Michael Gutman (Sheila)DATE: 6/23RE: 09-1346 (Storia)NUMBER OF PAGES (including cover sheet): 3COMMENTS: Here is "not Approved" note.

Also attached is receipt for oil tank from
Red Bank Recycling & letter from Shore
Environmental regarding the disposal of the
sludge.

Can we now get an approval?

Thanks

06/19/2009 15:25 7327474434

SHORE LLC

TOWNSHIP OF BRICK

For Information Call: 732-262-4627

Permit No. 09-1346

1. **Introduction**

23/06/2009 16:09

PAGE 1/1



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Sincerely,

A handwritten signature in black ink, which appears to read 'Alex Raposo'. The signature is fluid and cursive, written over a white background.

Alex Raposo
Senior Hydrogeologist
Shore Environmental, LLC

NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

Shore Environmental LLC
Alex Raposo & Derek Tietjen
64 Central Ave
Red Bank NJ 07701

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED
Shore Environmental LLC
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE
11/12/2008 TO 12/31/2009

SIGNATURE
VALID

13VH02733500

License/Registration/Certificate #

DIRECTOR

11/12/2008 TO 12/31/2009
VALID

13VH02733500
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

DIRECTOR

PLEASE DETACH HERE
IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:

Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

PLEASE DETACH HERE



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 834 Lot 6 Qualification Code 08724
Work Site Location 600 West Bridge Ave
Owner in Fee: [redacted] e-mail [redacted]

Address same municipality Shore zip code 08724
Contractor Shore Environmental Tel. (732) 747-1112
Address PO Box 5375 Red Bank NJ 08712 e-mail [redacted]

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____
Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____
Fire Alarm Contractor No. _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable) 13V10-273350
Federal Emp. ID No. 0000000000 FAX: (732) 747-4434

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____ Fire Alarm System: [] New or [] Existing
Constr. Class: Present _____ Proposed _____ Location of Panel: _____
Heating System: [] New or [] Existing [] HVAC Fire Suppression/Standpipe System:
Type: [] Gas [] Oil [] Electric [] Solar [] New or [] Existing
[] Other _____ Location of Main Control Valve: _____
Location: _____

Fuel Storage Tank:

Fuel Type: [] Flammable or [] Combustible Capacity _____
Total Cost of Fire Protection Work \$ 8000

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
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Joint Plan Review Required	Standpipe				
[] Building [] Plumbing	Fire Pump				
[] Electric [] Elevator	Pre-Eng. System				
[] Fire Plans Approved	Mechanical				
Date: <u>6/10/09</u>	Smoke Control				
Approved by: <u>[signature]</u>	TCO				
SUBCODE APPROVAL	Flam/Combust Tanks				
[] CO [] CCO [] CA	Fireplace Venting				
Date: _____	Final				
Approved by: _____	Other				

U.C.C. F140 (rev. 10/06) Reorder From OCS Printing (609) 390-1400

09-1346
6/10/09
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Dry Chemical	
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Foam Suppression	
FM200 Suppression	
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Fireplace Venting/Metal Chimney	
Other Tank Removal	
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Minimum Fee \$	
State Permit Surcharge Fee \$	
TOTAL FEE \$	