BLOCK 1211 LOT 2 QUALIFICATION CODE C04-12 C04-12-1 C04-12-2 C04-12-3 ADDRESS (SITE) C04-12-4 PERMIT NO. 02-3

CONSTRUCTION PERMIT APPLICATION

Brick Memorial HS

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

I. IDENTIFICATION

1. Proposed Work Site at: 2001 LANES MILL RD.
2. Name of Owner in Fee: BRICK BOE Tel. (732) 785-3000
   Address 101 HENDRICKSON AVE (street) BRICK (municipality) NJ (zip code)
3. Ownership in Fee: Public ✓ Private
4. Principal Contractor: EASTERN BUILDERS INC Tel. (732) 888-9060
   Address 41 VILLAGE CT. HAZLET NJ 07730
   License No. OR, if new home, Builder Reg. No. Exp. Date
   Federal Employee No. 22-3045892 FAX: (732) 888-9160
5. Architect or Engineer YEZZI ASSOCIATES Tel. (732) 240-3433
   Address 18 WASHINGTON ST TOMS RIVER NJ 08754
6. Responsible Person in Charge of Work TARAK PATEL
   Tel. (732) 888-9060 FAX (732) 888-9160

BRICK MEMORIAL H.S. addition for only

V. FEE SUMMARY (for office use only)

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

+H exempt

VI. BUILDING/SITE CHARACTERISTICS SEE PLANS

1. Number of Stories	+H	
2. Height of Structure		ft.
3. Area — Largest Floor	X exempt	sq. ft.
4. New Building Area		sq. ft.
5. Volume of New Structure		cu. ft.
6. Construction Classification	6	
7. Total Land Area Disturbed		sq. ft.
8. Flood Hazard Zone		
9. Base Flood Elevation		ft.
10. Wetlands yes / no		
11. Max. Live Load		
12. Max. Occupancy Load		

(office)

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☑ Addition		CW	8/29/02		9-20-02	FM			
4. ☑ Alteration									
5. ☑ Fire Protection					1-HR	CW	SPK Drawings		
6. ☑ Plumbing					11-HR				
7. ☑ Electrical					9-25-02	MV			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☑ Demolition		CW	9/13/02		9/13/02				
TOTAL COSTS	UNK								

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL +I exempt

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units: +J exempt

Before Construction

After Construction

Net Gain or Loss

B. NON-RESIDENTIAL +I exempt

1. State Specific Use: HIGH SCHOOL
2. Use Group: E
3. Change in Use Group, Indicate From

Arthur 732 938-2050

HAZLET TOWNSHIP
CONSTRUCTION DEPT.
319 MIDDLE ROAD
HAZLET, NEW JERSEY 07730

APPLICATION FOR CERTIFICATE

(Brick Memorial)

Date Received
Date Permit Issued
Control #
Permit # 02-3607
Date Issued

IDENTIFICATION

Block 121 Lot 2
Work Site Location 2001 LANES MILL RD. BRICK NJ
Owner in Fee BRICK B.O.E
Address 101 HENDRICKSON AVE. BRICK NJ
Tele. (732) 785-3000

Contractor EASTERN BUILDERS INC
Address 41 VILLAGE CT. HAZLET NJ
Tele. (732) 888-9060
Lic. No.
Federal Emp. No. 223045892
or Social Security No.

ACTION

☐ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF CONTINUED OCCUPANCY ☑ TEMPORARY CERTIFICATE OF OCCUPANCY
USE GROUP E Previous E Current

FINAL COST OF CONSTRUCTION: $ TBD
(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.
H.C. TOILET ROOM MODIFICATIONS PENDING AND TO BE COMPLETED BY 8/27/04

DESCRIPTION OF WORK/USE:

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: 8/20/04
☐ Owner ☐ Agent OWNER/AGENT
RODNEY BROOK, EASTERN BUILDERS

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name EASTERN BUILDERS INC

Address 41 VILLAGE CT HAZLET NJ 07730

Telephone (732) 888-9060

Signature _____

RODNEY BROOK

HAZLET TOWNSHIP
CONSTRUCTION DEPT.
319 MIDDLE ROAD
HAZLET, NEW JERSEY 07730

APPLICATION FOR CERTIFICATE

Date Received
Date Permit Issued
Control #
Permit # 02-3607
Date Issued

IDENTIFICATION

Block 1211 Lot 1
Work Site Location BRICK MEMORIAL HIGH SCHOOL
Owner in Fee BRICK BOARD OF ED
Address 101 HENDRICKSON AVE BRICK NJ
Tele. (732) 785-3000

Contractor EASTERN BUILDERS INC.
Address 41 VILLAGE CT. HAZLET NJ 07730
Tele. (732) 888-9060
Lic. No.
Federal Emp. No. 223045892
or Social Security No.

ACTION

☐ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF CONTINUED OCCUPANCY ☑ TEMPORARY CERTIFICATE OF OCCUPANCY
USE GROUP E Previous E Current

FINAL COST OF CONSTRUCTION: $
(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:
RENOVATION OF EXISTING AREAS
~~ADDING CLASSROOM & TECHNOLOGY~~
CLASSROOM ADDITION.

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED:
☐ Owner ☑ Agent OWNER/AGENT
R. BROOK, EASTERN BUILDERS

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 08/19/2004
Control #
Permit # 02-3607+K
Permit Issued 09/20/2002

UCC NEW JERSEY

PERMIT UPDATE

IDENTIFICATION Block 1211 Lot 2 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR
ADD'L PLUMBING WORK
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Telephone (732)785-3000

Contractor PATTERSON MECHANICAL
Address 302 A WHALEPOND RD
EATONTOWN, NJ 07724-
Telephone (732)571-4109
Lic. No. or Bldrs. Reg. No. 04551
Federal Emp. No. 22-2776257

Is hereby granted permission to perform the following work:

[ ] BUILDING [X] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
ADD'L PLUMBING WORK

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	0
Check No.	
Cash	
Collected By	

Estimated Cost of Work $ 4,000

Construction Official

08/19/2004
Date

U.C.C. P190 (rev. 3/96) NJ UCCARS 5.24E

PLUMBING SUBCODE TECHNICAL SECTION

UP- Dated 8-16-04

Date Received
Date Issued
Control # 04-12-2
Permit # 02-3607 ~~HR~~

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
Work Site Location 2001 LAKES MILL Rd BRICK memorial HS
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE BRICK NJ
Tele. (732) 785-5000
Contractor PATTERSON MECHANICAL
Address 302A WHALEPOND Rd EATONTOWN NJ 07724
Tele. (732) 571-4109 Fax (732) 229-2085
Lic. No. 04551
Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present E Proposed E
Building Sewer Size ____ Public Sewer ____ Private Septic ____
Water Service Size ____ Public Water ____ Private Well ____
Est. Cost of Plumbing Work $ 400,000.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 8/19/04
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				

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.

Signature — Contractor's Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

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

NO	FIXTURE/EQUIPMENT	FEE (Office Use Only)
11	Water Closet	$
2	Urinal/Bidet	
	Bath Tub	
12	Lavatory	
	Shower	
7	Floor Drain	
38	Sink	
1	Dishwasher	
4	Drinking Fountain	
	Washing Machine	
2	Hose Bibb	
1	Water Heater	
	Fuel Oil Piping	
1	Gas Piping	
	Steam Boiler	
1	Hot Water Boiler	
	Sewer Pump	
2	Interceptor/Separator	
1	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
6	Stacks	
	Other	
	Other	
	Other	

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/20/20
Control #
Permit # 02-3607

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 1211 Lot 2 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Telephone (732)785-3000

Contractor EASTERN BUILDERS INC.
Address 179 OAK HILL RD.
RED BANK, NJ 07701-
Telephone ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3045892

Is hereby granted permission to perform the following work:

[X] BUILDING	[X] PLUMBING	[ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL	[X] FIRE PROTECTION	[ ] DEMOLITION
[ ] ELEVATOR DEVICES	[ ] ASBESTOS ABATEMENT (Subchapter 8 only)	[ ] OTHER

DESCRIPTION OF WORK:
FOR BRICK MEMORIAL ALTERATIONS/ADDITIONS FOOTING/FOUNDATION ISSUED PER
1-22 CLASSROOM ADDITION DAN NEWMANS OK 09-20-02
1-2 ROOM ADDITION IN REAR KITCHEN AND OFFICE ALTERATIONS

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 $ 3,950,003

Construction Official

09/20/2002
Date

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	0
Check No.	
Cash	
Collected By	

U.C.C. F170 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/29/2002
Date Issued / /
Control #. C04-12
Permit #

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 Qual
Work Site Location 2001 LAKES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Tele.(732)785-3000
Contractor EASTERN BUILDERS INC.
Address 179 OAK HILL RD.
RED BANK, NJ 07701-
Tele.( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3045892

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	9-2002 Ey	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present E Proposed E
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 24,630 Sq. Ft.
Volume of New Structure 873,429 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 3,000,000
2. Alteration $ 950,000
3. Total (1+2) $ 3,950,000

Industrialized Building:
[ ] State Approved
[ ] HUD

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK See Dwg S-1 S2 & S2A

FOR BRICK MEMORIAL ALTERATIONS/ADDITIONS
1-22 CLASSROOM ADDITION
1-2 ROOM ADDITION IN REAR KITCHEN AND OFFICE ALTERATIONS

Footing & Foundation Only

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[X] Addition	16,930
[X] Alteration	23,700
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 6	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0
Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 0
DCA State Permit Fee	$ 0

U.C.C. F110 (rev. 3/98)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/29/2002
Date Issued 9/16/02
Control # C04-12
Permit # 02-3607

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 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS

Owner in Fee BRICK BOARD OF EDUCATION

Address 101 HENDRICKSON AVE
BRICK, NJ

Tele.(732)785-3000

Contractor EASTERN BUILDERS INC.

Address 179 OAK HILL RD.
RED BANK, NJ 07701-

Tele.( ) Fax ( )

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-3045892

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	9-2002	Eg
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present E Proposed E
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 24,630 Sq. Ft.
Volume of New Structure 673,428 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 3,000,000
2. Alteration $ 950,000
3. Total (1+2)$ 3,950,000

Industrialized Building:
[ ] State Approved
[ ] HUD

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK See Dwg S-1.52 & S2A

FOR BRICK MEMORIAL ALTERATIONS/ADDITIONS
1-22 CLASSROOM ADDITION
1-2 ROOM ADDITION IN REAR KITCHEN AND OFFICE ALTERATIONS

Footing & Foundation Only

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[X] Addition	16,836
[X] Alteration	23,760
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 0
DCA State Permit Fee	$ 0

Paid [ ] Check #
Collected by:

U.C.C. F110 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 08/29/2002
Date Issued 11/18/02
Control # C04-12-2
Permit # 02-3607 HB

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 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR
BLDG/PLG/FIRE REVIEW

Owner in Fee BRICK BOARD OF EDUCATION

Address 101 HENDRICKSON AVE
BRICK, NJ -

Tele. (732)785-3000

Contractor PATTERSON MECHANICAL

Address 302 A WHALEPOND RD
EATONTOWN, NJ 07724-

Tele. (732)571-4109

Lic. No. or Bldrs. Reg. No. 04551

Federal Emp. No. 22-2776257

B. PLUMBING CHARACTERISTICS

Use Group Present E Proposed E

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 1

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
10	Water Closet	100
3	Urinal / Bidet	30
0	Bath Tub	0
11	Lavatory	110
0	Shower	0
0	Floor Drain	0
8	Sink	80
28	Dishwasher	280
2	Drinking Fountain	20
0	Washing Machine	0
4	Hose Bib	40
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
1	Hot Water Boiler	35
1	Sewer Pump	35
1	Interceptor / Separator	35
4	Backflow Preventer	140
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other 8 A/C	280
	Other	0

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 11-14-02
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS

Type	Failure	Failure	Approval	Initial
Slab			12/24/02	MD
Rough	6/2/04		8/5/03	MD 12/30/03
Water				
Sewer				
Fixtures			3/6/04	4/7/04
Gas Equip				
Gas Piping			9/5/03	
Solar				
TCO			11/03/03	LWS-ARIEA

Dates (Month/Day) 3/25/03 3/20/03

Paid [ ] Check #
Collected by:

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	0
DCA State Permit Fee	$	0

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.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

9/3/04

U.C.C. F130 (rev. 3/96)

12/24/03

① - SLAB - PLUMBG

② -

3/20/03

① - SLAB - ACID TANK
UNDER SLAB - PARTIAL

3/25/03

SLAB - ACID TANK
+ WASTE -

5/21/03

① GREASE TRAP - SLAB OK.

8/5/03

① - ROUGH PIPES Kit. ONLY

9/3/03

① - GAS PIPE FROM METER TO KIT. AREA OK

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 04/04/2003
Date Issued 01/01/1954
Control # 04-10-03
Permit # 02-3607+E

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 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR

PLUMBING WORK

Owner in Fee BRICK BOARD OF EDUCATION

Address 101 HENDRICKSON AVE

BRICK, NJ -

Tele.(732)785-3000

Contractor PATTERSON MECHANICAL

Address 302 A WHALEPOND RD

EATONTOWN, NJ 07724-

Tele.(732)571-4109

Lic. No. or Bldrs. Reg. No. 04551

Federal Emp. No. 22-2776257

B. PLUMBING CHARACTERISTICS

Use Group Present E Proposed E

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 45,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 4-10-03
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab			4/30/03	RDV
Rough			5/5/03	RDV
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
5	Floor Drain	50
6	Sink	60
1	Dishwasher	10
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
1	Greasetrap	35
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 0
DCA State Permit Fee $ 0

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.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. F130 (rev. 3/96)

7/23/04
CANCELED

7/16/04
① - 1ST FLOOR LAB
ROUGH + GAS OK.

7/12/04
① ROUGH 1ST FLOOR LAB
NOT READY
② - GAS - USED THREAD
PROTECTORS ON COUPLINGS
(404.3)

4/30/03
① - GREASE TRAP NOT INSTALLED ON ORDER
② - 4" BUILDING DRAIN NEEDS TO BE GROUTED, NO FLOW

8/22/03
① - NOT READY FOR FINAL

9/5/03
① GAS PIPING FOR KIT. AREA - OK.

9/7/04
① GAS PIPE OK TO ROOF TOP UNITS ONLY

11/3/03
① - R.D.D SINKS - IN KIT. AREA
INCOMPLETE - T.C.O OK

11/21/03
① ROUGH - ROOM 1ST - GFCI COVER OK (UPDATE)

11/21/03 PARTIAL
① - 1ST FLOOR SANITARY - BOYS - GIRLS ROOMS
TO FLOOR DRAINS GANG - BATHROOMS

12/30/03
① UPSTAIRS - BATHROOMS ROUGH - OK

6/2/04
① - SECOND FLOOR LAB
FAILED
R.6.3 HEIGHT OF
FIXTURES - (SINKS)
② - GAS PIPING SECOND F. OR
PASSED

6/29/04
① - SECOND FLOOR LAB
PASSED
② - AIR TEST ON COPPER
WATER LINES

For Heating Equipment See attach list

FIRE SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued
Control #
Permit # 02-3607+

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

Work Site Location Brick Memorial High School
2001 Lanes Mill Rd, Brick NJ 08724

Owner in Fee Brick BOE

Address 101 Hendrickson Ave
Brick, NJ 08724

Tele. (732) 758-3000

Contractor Patterson Mechanical Inc

Address 302A Whalepond Rd
Eatontown, NJ 07724

Tele. (732) 571-4109 Fax (732) 229-2085

Lic. No. 04551

Federal Emp. No. 22-2776257

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____

Constr. Class Present _____ Proposed _____

Heating Systems [ ] New [ ] Existing [ ] HVAC

Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar

[ ] Other _____

Location: _____

Total Cost of Fire Protection Work $ _____

Fire Alarm System

New [ ] Existing [ ]

Location of Panel: _____

Fire Suppression/Standpipe System

New [ ] Existing [ ]

Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[ ] Fire Plans Approved

Date: 3-10-03

Approved by: KLR

SUBCODE APPROVAL

[ ] CO [ ] SCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

UCC/PRO F-140 (REV3/96)
Professional Printing
(856) 468-7933

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: * All HVAC over 2000 CFM To be hooked to Shutdown Duct detectors

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

		NUMBER
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combustible Liquid [ ] LPG [ ] LNG Capacity ____ Fuel ____		
Alarm Systems [ ] 110v Interconnected [ ] System		
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 ____ GPM Type ____		
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		
Halon Suppression		
Other MAKEUP AIR UNIT	1	
Kitchen Hood Exhaust System		
Smoke Control System		
Gas [ ] or Oil [ ] Fired Appliances		
Other ROOFTOP UNIT	7	

* 3 rear 4 front

FEE (Office Use Only)

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

AS PER JUDY @ Patterson 3/10/03

FIRE SUBCODE TECHNICAL SECTION

Date Received 9-11-03
Date Issued
Control #
Permit # 03-0702+A

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
Work Site Location BRICK MEMORIAL H.S.
2001 LAKESMILL RD BRICK, N.J.
Owner in Fee Twp of Brick
Address
Tele. ( )
Contractor F.V.T.
Address 9-G Chris Ct
Dayton, NJ
Tele. (732) 274-8040 Fax (732) 274-1335
Lic. No.
Federal Emp. No. 22-3328682

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other
Location: ∞
Total Cost of Fire Protection Work $ 5000.

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe System
New [ ] Existing [ ]
Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[✓] Fire Plans Approved
Date: 5-2-03
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: 10-20-03
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System			10-20-03	
Mechanical				
Smoke Control				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

Hood System for Pre-Cook

Hood only
Ductwork & Fans by others

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Hang Hood & install Fire Suppression System
Water Supply Source
Method of Alarm/Suppression System Supervision

		NUMBER	FEE (Office Use Only)
Storage Tanks			
Type: [ ] Flammable Liquid [ ] Combustible Liquid			
[ ] LPG [ ] LNG Capacity ___ Fuel ___			
Alarm Systems [ ] 110v Interconnected			
[ ] System			
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 ___ GPM Type ___			
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			
Halon Suppression			
Other			
Kitchen Hood Exhaust System	✓		
Smoke Control System			
Gas [ ] or Oil [ ] Fired Appliances			
Other			

Exempt

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F140
(rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 05/14/2003
Date Issued ~~01/01/1954~~ 05-19-03
Control #
Permit # 02-3576+E

Update

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 Qual
Work Site Location 105 HENDRICKSON ENRICHMENT
WET SPRINKLER HEADS
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Tele.(732)785-3005
Contractor MAJEK FIRE PROTECTION INC
Address 1707 IMPERIAL DR
THOROFARE, NJ 08086-
Tele.(856)845-4800
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2396080

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed E
Constr Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 35,000

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 5-16-03
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other ____				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.
Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source CITY
Method of Alarm/Suppr Sys Superv TAMPER

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combust Liquid		
[ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	232	594
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other		0
Other		0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 0
DCA State Permit Fee $ 0

Paid

U.C.C. F140 (rev. 3/96)

5-22-03
gates locked Rick Franklin - Maguire Rome
- couldn't [illegible] system

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 08/21/2003
Control #
Permit # 02-3607+6
Permit Issued 09/20/2002

UCC NEW JERSEY

PERMIT UPDATE

IDENTIFICATION Block 1211 Lot 2 Qual

Work Site Location 2001 LAKES MILL RD-BRICK MEMOR
HOOD WET CHEMICAL
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ
Telephone (732)785-3000

Contractor E.V.I. INC.
Address P. O. BOX 134
SPOTSWOOD, NJ 08884-
Telephone (609)655-4700
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3328682

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [X] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
HANG HOOD ONLY AND WHET CHEMICAL

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
BCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	0
Check No.	
Cash	paid
Collected By	

Estimated Cost of Work $ 5,900

Construction Official 08/21/2003 Date

U.C.C. F190 (rev. 3/96) NJ UCCARS 5.24E

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/21/2003
Date Issued 08/21/2003
Control #
Permit # 02-3607+G

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 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
HOOD WET CHEMICAL
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Tele.(732)785-3000
Contractor E.V.I. INC.
Address P. O. BOX 134
SPOTSWOOD, NJ 08884-
Tele.(609)655-4700
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3328682

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present E Proposed E
Constr Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 5,900

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[✓] Fire Plans Approved
Date: 8-20-03
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.
Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	1	92
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	1	46
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	20	0
Other		0
Other		0

08-22-03 Changed to Comp Ord

Administrative Surcharge	$	Exempt 0
Minimum Fee	$	0
TOTAL FEE	$	0
DCA State Permit Fee	$	0

Paid [ ] Check #
Collected by:

U.C.C. F140 (rev. 3/96)

Update
11-15-04

FIRE SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # 02-3607 #1 + L update

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
Work Site Location 2001 Lanes Mill Rd. Brick
Owner in Fee Brick Board of Education
Address 101 Hendrickson Ave. Brick NJ
Tele. (732) 785-3000
Contractor Patterson Mechanical Inc
Address 302A Whalepond Rd Eatontown NJ 07724
Tele. (732) 571-4109 Fax (732) 229-2085
Lic. No.
Federal Emp. No. 22-2776257

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other _____
Location: _____
Total Cost of Fire Protection Work $ _____

Fire Alarm System
New [ ] Existing [ ]
Location of Panel: _____
Fire Suppression/Standpipe System
New [ ] Existing [ ]
Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[ ] Fire Plans Approved
Date: 11-23-04
Approved by: _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Final				
Other				

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.

William Patterson
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source _____
Method of Alarm/Suppression System Supervision _____

		FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combustible Liquid [ ] LPG [ ] LNG *Capacity* ____ *Fuel* ____		
Alarm Systems [ ] 110v Interconnected [ ] System	**NUMBER**	
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 ____ GPM Type ____		
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		
Halon Suppression		
Other _____		
Kitchen Hood Exhaust System		
Smoke Control System	4	
Gas [✓] or Oil [ ] Fired Appliances	5	
Other Science Lab Fume Hoods	4	

Administrative Surcharge	$	
Minimum Fee	$	
DCA Training Fee	$	
TOTAL FEE	$	

U.C.C. F140
(rev 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 01/17/2003
Control #
Permit # 02-3607+D
Permit Issued 09/20/2002

UCC NEW JERSEY

PERMIT UPDATE

IDENTIFICATION Block 1211 Lot 2 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Telephone (732)785-3000

Contractor SUN ELECTRIC CONSTRUCTION
Address 308 DRUM POINT RD
BRICK, NJ 08723-
Telephone (732)477-3500
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2763732

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [X] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
FIRE REVIEW FOR ADDITION ETC

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	0
Check No.	
Cash	
Collected By	

Estimated Cost of Work $ 30,000

Construction Official

01/17/2003
Date

U.C.C. F190 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/29/2002
Date Issued 01/17/03
Control # C04-12-87
Permit # 02-3607+ct

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 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Tele.(732)785-3000
Contractor SUN ELECTRIC CONSTRUCTION
Address 308 DRUM POINT RD
BRICK, NJ 08723-
Tele.(732)477-3500
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2763732

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present E Proposed E
Constr Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 30,000

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[X] Fire Plans Approved
Date: 1-17-03
Approved By: ECR

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.
Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Supervy

Storage Tanks		FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System	NUMBER	
Alarm Devices(smoke,heat,pulls,water/flow)	160	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	160	95
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	1	46
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other		0
Other		0

Sprinkler separate permit

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	0
DCA State Permit Fee	$	0

Paid [ ] Check #
Collected by:

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 01/13/2003
Control #
Permit # 02-3607+C
Permit Issued 09/20/2002

UCC NEW JERSEY

PERMIT UPDATE

IDENTIFICATION Block 1211 Lot 2 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ
Telephone (732)785-3000

Contractor PATTERSON MECHANICAL
Address 302 A WHALEPOND RD
EATONTOWN, NJ 07724-
Telephone (732)571-4109
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2776257

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [X] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
FURNACES/WET SPRINKLER HEADS

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	0
Check No.	
Cash	
Collected By	

Estimated Cost of Work $ 70,000

D. Patterson Jr

Construction Official

01/13/2003
Date

U.C.C. F190 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/29/2002
Date Issued 12/3/02
Control # CO4-12-3
Permit # 02-26574C

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 Qual
Work Site Location 2001 LAKES MILL RD-BRICK MEMOR
WETS SPRINKLER HEADS/FURN
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Tele.(732)785-3000
Contractor PATTERSON MECHANICAL
Address 302 A WHALEPOND RD
EATONTOWN, NJ 07724-
Tele.(732)571-4108
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2776257

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed E
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location: ADDITION
Total Est Cost of Fire Prot Work $ 70,000

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[X] Fire Plans Approved
Date: 12 3 02
Approved By: KLR
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System	NUMBER	
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	400	594
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other 2 FURNACES		92
Other		0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 0
	DCA State Permit Fee	$ 0

U.C.C. F140 (rev. 3/96)

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/21/2003
Date Issued 08/21/2003
Control #
Permit # 02-3607+G

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 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
HOOD WET CHEMICAL
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ
Tele.(732)785-3000
Contractor E.V.I. INC.
Address P. O. BOX 134
SPOTSWOOD, NJ 08884-
Tele.(609)655-4700
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3320682

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present E Proposed E
Constr Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 5,900

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO
Date: 10-20-03
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test	9/16/03			KCR
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical	9/16/03			KCR
Smoke Ctl				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.
Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	1	92
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	1	46
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	20	0
Other		0
Other		0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	0
DCA State Permit Fee	$	0

Paid [ ] Check #
Collected by:

N.C.C. F140 (rev. 3/93)

10-8-03 @ 1:00

- Dump test OK Alarm activations
- Need to seal and clean up inside ? Ducts

10-21-03 - Need extinguisher
- Map for new addition
- Mount map @ alarm panel
- letter Dutton Re: not under 21/2
- letter Yozzi fire curtain wall

4

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/02/2003
Control #
Permit # 02-3607

UCC NEW JERSEY

CERTIFICATE

IDENTIFICATION

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee/Occupant BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Telephone (732)785-3000
Contractor EASTERN BUILDERS INC.
Address 179 OAK HILL RD.
RED BANK, NJ 07701-
Telephone ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3045892

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group E
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

TEMPORARY APPROVAL FOR KITCHEN AREA AND FRONT OFFICE ONLY

[ ] 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.

[X] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than September 16, 2003 or the owner will be subject to fine or order to vacate:
PENDING BLDG, ELEC, PLMG, FIRE, ENG, & SOIL

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ___.

CONSTRUCTION OFFICIAL

Fee $ 0
Paid [ ] Check No.
Collected by:

U.C.C. F260 (rev. 3/96) NJ UCCARS 5.24E

FIRE SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 9-11-03
Date Issued
Control #
Permit # 03-0702+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
Work Site Location Brick Memorial H.S.
2001 Lanesmill Rd Brick, NJ
Owner in Fee Twp of Brick
Address

Tele. ( )
Contractor F.V. Ellis Co
Address 9-G Ellis Ct
Dayton NJ
Tele. (732) 274-8040 Fax (732) 274-1335
Lic. No.
Federal Emp. No. 22-3328682

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other _____
Location: _____
Total Cost of Fire Protection Work $ 5000

Fire Alarm System
New [ ] Existing [ ]
Location of Panel: _____
Fire Suppression/Standpipe System
New [ ] Existing [ ]
Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[✓] Fire Plans Approved
Date: 9-2-03
Approved by: KLR

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Final				
Other				

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.

Mark Conlin
Signature

Hood only
Ductwork & Pipes by others

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Hang Hood & install Fire Suppression System

Water Supply Source
Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combustible Liquid [ ] LPG [ ] LNG Capacity ___ Fuel ___		
Alarm Systems [ ] 110v Interconnected [ ] System		
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 ___ GPM Type ___		
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		
Halon Suppression		
Other _____		
Kitchen Hood Exhaust System	✓	
Smoke Control System		0
Gas [ ] or Oil [ ] Fired Appliances		
Other _____		Exempt

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

O.C.C. F140
(rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 11/13/2003
Control #
Permit # 02-3607

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee/Occupant BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Telephone (732)785-3000
Contractor EASTERN BUILDERS INC.
Address 179 OAK HILL RD.
RED BANK, NJ 07701-
Telephone ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3045892

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group E
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

FOR USE OF GREEN CAFETERIA ONLY & STORAGE IN CHILD CARE ROOM, ROOM NOT TO BE OCCUPIED

[ ] 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 CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[X] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than February 3, 2004 or the owner will be subject to fine or order to vacate:
SUBCODE COMPLIANCE

[ ] 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 _____, ___.

Fee $ 0
Paid [ ] Check No.
Collected by:

CONSTRUCTION OFFICIAL
U.C.C. F260 (rev. 3/96) NJ UCCAES 5.24E

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 01/16/2004
Control #
Permit # 02-3576+H
Permit Issued 09/20/2002

UCC NEW JERSEY

PERMIT UPDATEE

IDENTIFICATION Block 1068 Lot 15.01 Qual

Work Site Location 105 HENDRICKSON ENRICHMENT ADDITION
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Telephone (732)785-3005

Contractor HILLSTONE ELECTRICAL CONTRACTO
Address 43 BROOKSIDE RD P O BOX 546
CLARKSBURG, NJ 08510-
Telephone (732)303-0636
Lic. No. or Bldrs. Reg. No. 6742
Federal Emp. No. 22-3060574

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	0
Check No.	
Cash	
Collected By	

Estimated Cost of Work $ 20,000

Construction Official 01/16/2004
Date

U.C.C. F190 (rev. 3/96) NJ UCCARS 5.24E

OWNSHIP OF BRICK
01 CHAMBERS BRIDGE RD
ISION OF INSPECTIONS

Update Issued 02/11/2004
Control #
Permit # 02-3576-1
Permit Issued 09/20/2002

UCC NEW JERSEY
PERMIT UPDATE

LOCATION Block 1668 Lot 15.01 Qual

Job Site Location 105 HENDRICKSON ENRICHMENT CTR
Owner's Name BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE BRICK, NJ 08724-
Telephone (732)785-3005

Contractor S & S ELECTRIC
Address 63 LEONBERRY LANE TOMS RIVER, NJ 08753-
Telephone (732)255-2133
Lic. No. or Bldrs. Reg. No. 13413
Federal Emp. No. 14-6725038

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

ADD SPEAKERS

Estimated Cost of Work $ 2,000

Construction Official

02/11/2004
Date

PAYMENTS (Office Use Only)

Building	.00
Electrical	.00
Plumbing	.00
Fire Protection	.00
Elevator Devices	.00
Other	
DCA State Permit Fee	.00
Cert. of Occupancy	.00
Other	
Total	.00
Check No.	
Cash	
Collected By	

C.O. 0100 (rev. 3/99) NJ UCCANS 5.04E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 09/03/2002
Date Issued 01/17/03
Control # C05-68-#4
Permit # 02-3576 fd

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGES OCCUR NOTIFY TECHNICAL SITE DATA CONTRACTORS. NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000

Block 1068 Lot 15.01 Qual
Work Site Location 105 HENDRICKSON ~~ENRICHMENT~~ Middle School ADDITION
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Tele.(732)785-3005
Contractor SUN ELECTRIC CONSTRUCTION
Address 308 DRUM POINT RD
BRICK, NJ 08723-
Tele.(732)477-3500
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2763732

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed E
Constr Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 17,000

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[X] Fire Plans Approved
Date: 1-17-03
Approved By: KR
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test		5-28 03	06	
Standpipe				
Fire Pump		2 pumps 5 hrs only		
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other X		6-11-03	9-22-03	

$0 Fee by

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of record and am authorized to make this application.
Signature

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		* SPK Tech to follow
Alarm Devices(smoke,heat,pulls,water/flow)	88	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	88	75
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [X] or Oil [ ] Fired Appliances (STOVE)	1 0	0
Other		0
Other		0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 0
	DCA State Permit Fee	$

U.C.C. 5140 (rev. 8/96)

4-17-03 @ 11[33]

[illegible] [illegible]

[illegible] Pre Post

845 [illegible]

- Not ready for [illegible]

- Check for permit update

5-2-02 @ 1045

Original permit # 02-3607

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # 03-3607 H

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
Work Site Location 2001 Lanes Mill Road Brick NJ
Owner in Fee/Occupant Brick Board of Education
Address 101 Hendrickson Ave Brick, NJ
Tele. (732) 785-3000
Contractor R L CARROLL ELEC CONSTR CO
Address 48 PARKER Rd TUCKERTON NJ 08087
Tele. (609) 296 2261 Fax ( ) _____
Lic. No. 12024
Federal Emp. No. 226 84 9141

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as High School Utility Co. _____
Est. Cost of Elec. Work $ 406.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[X] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: 3-21-03
Approved by: VM

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

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.

Robert A Carroll Jr
Applicant's Signature/Contractor's Seal and Signature

[✓] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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 UW 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/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	1 MBTU	HW Boiler Safety Control Circ 110 V.	

Administrative Surcharge $ _____
Minimum Fee $ _____
DCA Training Fee $ _____
TOTAL FEE $ _____

U.C.C. F120
(rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 04/29/2004
Date Issued 01/01/1954
Control #
Permit # 02-3607+J

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 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR

Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Tele.(732)785-3000
Contractor MILLSTONE ELECTRICAL CONTRACTO
Address 43 BROOKSIDE RD P O BOX 546
CLARKSBURG, NJ 08510-
Tele.(732)303-0636
Lic. No. or Bldrs. Reg. No. 6742
Federal Emp. No. 22-3060574

B. ELECTRICAL CHARACTERISTICS

Use Group - Present E Proposed E
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 50,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 5-13-04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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

Changed to 100 complete 05-14-04

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
100		Communications Points	
0		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	0
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other DIGITAL THERMO	35
		Other	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 0
DCA State Permit Fee	$ 0

Paid [ ] Check #
Collected by:

U.C.C. F120 (rev. 3/96)

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 1-16-04
Date Issued
Control #
Permit # 02.3576 H
1-22-04
JB
Elec

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
Work Site Location Brick Enrichment Center
101 Hendrickson Ave Brick, NJ 08724
Owner in Fee/Occupant Brick Board of Education
Address 101 Hendrickson Ave
Brick, NJ 08724
Tele. ( )
Contractor Millstone Electrical Const Inc
Address 43 Brookside Rd.
Clarksburg NJ 08510
Tele. (732) [illegible] Fax (732) 303-0291
Lic. No. 6742 732-303-0636
Federal Emp. No. 223060574

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 20,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
Joint Plan Review Required:		
[ ] Building [ ] Plumbing		
[ ] Fire [ ] Elevator		
[ ] Elec. Plans Approved		
Date: 1/22/04		
Approved by:		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
120		Digital Control Points	
		TOTAL NUMBERS	$
		Pool Permit/with UW 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/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
10	15A	Panel feeds 3.04 30 typ	

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F120
(rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/02/2003
Control #
Permit # 02-3607

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee/Occupant BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Telephone (732)785-3000
Contractor EASTERN BUILDERS INC.
Address 179 OAK HILL RD.
RED BANK, NJ 07701-
Telephone ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3045892

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group E
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

TEMPORARY APPROVAL FOR KITCHEN AREA AND FRONT OFFICE ONLY

[ ] 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.

[X] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than September 16, 2003 or the owner will be subject to fine or order to vacate:
PENDING BLDG, ELEC, PLMG, FIRE, ENG, & SOIL

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ___.

Fee $ 0
Paid [ ] Check No.
Collected by:

CONSTRUCTION OFFICIAL
U.C.C. F260 (rev. 3/96) NJ UCCA 5:23E

Ready for Inspection

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

02-3576 I
2-9-04
ELEC

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
Work Site Location EDUCATIONAL ENRICHMENT Center
Middle School
Owner in Fee/Occupant Brick Board of Ed
Address 101 Hendricksons AVE
Brick NJ 08724
Tele. (732) 671-6400
Contractor S & S
Address 33 Lancaster Berry LA
Toms River NJ 08753
Tele. (732) 255-7133 908/309 Fax (732) 270 0699
CALL
Lic. No. 11413
Federal Emp. No. 222919788

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 20,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Required		
Joint Plan Review Required:		
[ ] Building [ ] Plumbing		
[ ] Fire [ ] Elevator		
[ ] Elec. Plans Approved		
Date: 2/11/04		
Approved by:		

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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 UW 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/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
29		Clocks/Speakers	
		.....	

Administrative Surcharge	$	
Minimum Fee	$	
DCA Training Fee	$	
TOTAL FEE	$	

UCC-120
(rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 02/21/2003
Date Issued 3/6/03
Control # C21-12
Permit # 03-0702

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 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR

Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Tele.(732)785-3000
Contractor BBW INC WARDELL SECURITY SERV
Address PO BOX 44
HOWELL, NJ 07731-
Tele.(732)363-0550
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3330961

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 21,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 2/26/03
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 11/20/04
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final			11/20/04	

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
149		Alarm Devices/F.A.C. Panel	
149		TOTAL NUMBERS	60
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 0
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/13/2004
Control #
Permit # 02-3607

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee/Occupant BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Telephone (732)785-3000
Contractor EASTERN BUILDERS INC.
Address 179 OAK HILL RD.
RED BANK, NJ 07701-
Telephone ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3045892

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group E
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

9/21 OK MW 9/22 OK 9/23

PENDING BLDG, ELEC, PLMB, FIRE, ENG & COMPLETION OF SCIENCE LAB AREA. ALSO AS BUILT DRAWINGS REQUIRED.

[ ] 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.

[X] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than October 12, 2004 or the owner will be subject to fine or order to vacate:
PENDING ALL SUBCODE APPROVAL BY 10/12/04

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ___.

Electric 9/21/04

CONSTRUCTION OFFICIAL

Fee $ 0
Paid [ ] Check No.
Collected by:

U.C.C. E260 (rev. 3/96) NJ UCCARS 5.24E

F

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 08/29/2002
Date Issued 10/15/02
Control # C04-12-1
Permit # 02-3607+A

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

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Tele.(732)785-3000
Contractor SUN ELECTRIC CONSTRUCTION
Address 308 DRUM POINT RD
BRICK, NJ 08723-
Tele.(732)477-3500
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2763732

B. ELECTRICAL CHARACTERISTICS

Use Group - Present E Proposed E
[ ] Pole/Pad # [ ] Temporary [ ] Other Final 111204 WM
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 730,000

TCO 81804 WM

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 9 25 02
Approved By: WM
SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 11 12 04
Approved By: WM

INSPECTIONS Type	Failure	Failure	Approval	Initial
Rough	7 8 03 WM		7 28 03 WM	
~~Temp Serv~~			8 21 03 WM	
~~Const Serv~~			11 5 03 WM	
TCO			10 25 03 WM	
Other			10 21 03 10 22 03	
Service			12 29 03 WM	
Final			5 8 03 WM	

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

Final teckdown above ceiling Trade list 91803 WM
Cafe. Final Panel Room(2) final

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
635		Lighting Fixtures	
475		Receptacles	
75		Switches	
0		Detectors	
0		Light Poles	
33		Motors-Fract HP	
92		Emergency & Exit Lights	
72		Communications Points	
161		Alarm Devices/F.A.C. Panel	
1543		TOTAL NUMBERS	340
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
9	7	KW Central A/C Unit	81
7	2	HP/KW Space Heater/Air Handler	63
0	0	Baseboard Heat	0
6	2	HP Motors 1/+ HP	54
2	30	KW Transformer/Generator	80
1	0	AMP Service	40
4	200	AMP Subpanels	160
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other 2-100 SUBPANEL	80
		Other 400/300 SUBPANE	80

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

Paid [ ] Check #
Collected by:

Administrative Surcharge $ 0
Minimum Fee $ 0
TOTAL FEE $ 0
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

J UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 04/29/2004
Date Issued 01/01/1954
Control #
Permit # 02-3607+J

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 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR

Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Tele.(732)785-3000
Contractor MILLSTONE ELECTRICAL CONTRACTO
Address 43 BROOKSIDE RD P O BOX 546
CLARKSBURG, NJ 08510-
Tele.(732)303-0636
Lic. No. or Bldrs. Reg. No. 6742
Federal Emp. No. 22-3060574

B. ELECTRICAL CHARACTERISTICS

Use Group - Present E Proposed E
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 50,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 3-13-04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 11/20/04
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final			11/20/04	

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
200		Communications Points	
0		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	0
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other DIGITAL THERMO	35
		Other	0

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

Paid [ ] Check #
Collected by:

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	0
DCA State Permit Fee	$	0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 11/03/2003
Control #
Permit # 02-3607

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
2 ADDITIONS/ALTERATIONS
Owner in Fee/Occupant BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Telephone (732)785-3000
Contractor EASTERN BUILDERS INC.
Address 179 OAK HILL RD.
RED BANK, NJ 07701-
Telephone ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3045892

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group E
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

[ ] 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.

[X] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than February 3, 2004 or the owner will be subject to fine or order to vacate:
FOR USE OF ROOMS 149,150,152,153,155 & 156 ONLY

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ___.

CONSTRUCTION OFFICIAL

Fee $ 0
Paid [ ] Check No.
Collected by:

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 08/28/2003
Control #
Permit # 02-3607+F
Permit Issued 09/20/2002

UCC NEW JERSEY

PERMIT UPDATE

IDENTIFICATION Block 1211 Lot 2 Qual

Work Site Location 2001 LANES MILL RD-BRICK MEMOR
RELOCATE RESTROOM
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Telephone (732)785-3000

Contractor EASTERN BUILDERS INC.
Address 179 OAK HILL RD.
RED BANK, NJ 07701-
Telephone ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3045892

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
RELOCATE RESTROOM TO CHILDCARE CLASSROOM FROM EXISTING RESTROOM AREA
NO CHANGE IN COUNT

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	0
Check No.	
Cash	
Collected By	

Estimated Cost of Work $ 5,000

Construction Official

08/28/2003
Date

U.C.C. F190 (rev. 3/96) NJ UCCARS 5.24E

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 04/14/2004
Date Issued 4/22/04
Control # C16-94
Permit # 04-1363

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

Block 1211 Lot 3 Qual
Work Site Location 2001 LANES MILL RD
ELECTRICAL WORK
Owner in Fee BRICK TOWNSHIP
Address 401 CHAMBERSBRIDGE RD
BRICK, NJ -
Tele.( )
Contractor ENTERPRISE CABLE GROUP
Address 805 WEST 5TH ST
LANODALE, PA 19446-
Tele.(215)361-4114
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 21,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[X] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 4/21/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 11/12/04
Approved By:

INSPECTIONS

Type	Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Serv			9/23/04	
Final			11/12/04	

Dates (Month/Day)

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
214		Communications Points	
0		Alarm Devices/F.A.C. Panel	
214		TOTAL NUMBERS	75
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

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

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 0
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/04/2003
Date Issued 01/01/1954
Control #
Permit # 02-3607+F

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 Qual
Work Site Location 2001 LANES MILL RD-BRICK MEMOR
RELOCATE RESTROOM
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON AVE
BRICK, NJ -
Tele.(732)785-3000
Contractor EASTERN BUILDERS INC.
Address 179 OAK HILL RD.
RED BANK, NJ 07701-
Tele.(__) Fax (__)
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3045892

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

RELOCATE RESTROOM TO CHILDCARE CLASSROOM FROM EXISTING RESTROOM AREA
NO CHANGE IN COUNT

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Req.	6/2/03	
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present E Proposed E
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 5,000
3. Total (1+2) $ 5,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[X] Addition	0
[X] Alteration	135
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 0
DCA State Permit Fee	$ 0

Paid [ ] Check #
Collected by:

U.C.C. F110 (rev. 3/96)