



# CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C13-006948

## V. FEE SUMMARY (for office use only)

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

## VI. BUILDING/SITE CHARACTERISTICS

|                                               |                       | (office use only) |
|-----------------------------------------------|-----------------------|-------------------|
| 1. Number of Stories                          | <u>1</u>              |                   |
| 2. Height of Structure                        | <u>15</u> ft.         |                   |
| 3. Area — Largest Floor                       | <u>43,000</u> sq. ft. |                   |
| 4. New Building Area                          |                       |                   |
| 5. Volume of New Structure                    |                       |                   |
| 6. Max. Live Load                             |                       |                   |
| 7. Max. Occupancy Load                        |                       |                   |
| 8. If Industrialized Building: State Approved | ____ HUD              |                   |
| 9. Total Land Area Disturbed                  | ____ sq. ft.          |                   |
| 10. Flood Hazard Zone                         |                       |                   |
| 11. Base Flood Elevation                      | ____ ft.              |                   |
| 12. Wetlands                                  | yes ____ no <u>X</u>  |                   |

## I. IDENTIFICATION

1. Proposed Work Site at: 500 Midstreams Road, Brick NJ 08724

2. Name of Owner in Fee: Brick Board of Education  
 Tel. (732) 785-3000 e-mail jedwards@brickschools.org  
 Address 101 Hendrickson Avenue Brick 08724  
street municipality zip code

3. Ownership in Fee: Public X Private \_\_\_\_\_

4. Principal Contractor: Design Resources Group, AIA Tel. (732) 560-7900  
 Address 371 Hoes Lane, Suite 301 e-mail frankb@drgaia.com  
Piscataway, NJ 08854

License No. OR, if new home, Builder Reg. No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Home Improvement Contractor Registration No. or Exemption Reason \_\_\_\_\_

Federal Emp. ID No. \_\_\_\_\_ FAX: \_\_\_\_\_

5. Architect or Engineer Design Resources Group, AIA Contact Frank Bowlby  
 Address 371 Hoes Lane Piscataway NJ 08854 e-mail frankb@drgaia.com  
 Tel. (732) 560-7900 FAX: (732) 560-7900

6. Responsible Person in Charge once Work has Begun TBD  
 Tel. \_\_\_\_\_ FAX: \_\_\_\_\_

## IIa. PROPOSED WORK

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

## IIb. SUBCODES

(Check all that apply)

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

## FOR OFFICE USE ONLY (Optional)

| Est. Cost | Plans Rec'd by | Date Rec'd | Rejection Date | Approval Date   | Re-viewer  | Resubmission Dates Approval | Rejection | Re-viewer |
|-----------|----------------|------------|----------------|-----------------|------------|-----------------------------|-----------|-----------|
|           |                |            |                | <u>01/02/14</u> | <u>KAK</u> |                             |           |           |
|           |                |            |                |                 |            |                             |           |           |
|           |                |            |                |                 |            |                             |           |           |
|           |                |            |                |                 |            |                             |           |           |
|           |                |            |                |                 |            |                             |           |           |
|           |                |            |                |                 |            |                             |           |           |

TOTAL COST \$0

## III. PLAN REVIEW (optional)

DO YOU WANT:

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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

## VII. DESCRIPTION OF BUILDING USE

### A. RESIDENTIAL (primary use)

1. State Specific Use: \_\_\_\_\_
2. Use Group, Proposed: \_\_\_\_\_
3. Change in Use Group, Indicate Present: \_\_\_\_\_
4. No. of dwelling units: Total Units Income-restricted
- Gained, Sale \_\_\_\_\_
- Gained, Rental \_\_\_\_\_
- Lost, Sale \_\_\_\_\_
- Lost, Rental \_\_\_\_\_

### B. NON-RESIDENTIAL (primary use)

1. State Specific Use: \_\_\_\_\_
2. Use Group, Proposed: E
3. Change in Use Group, Indicate Present: \_\_\_\_\_

### C. MIXED USE -List secondary use(s):

### D. Construct. Classification: Present

Proposed \_\_\_\_\_



Brick Township  
401 Chambersbridge Rd  
Brick, NJ 08723

Date Issued 8/4/2015  
Control Number C-13-006948  
Permit Number 14-0001  
Permit Issue Date 1/2/2014  
Certificate Number 14-0001

## Certificate

Construction Code Division  
(Certificate of Approval)

### Identification

Work Site Location: 500 MIDSTREAMS RD. Brick Township, NJ Block: 902 Lot: 8 Qual: \_\_\_\_\_  
Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION  
Owner Address: 101 HENDRICKSON AVE. BRICK NJ 08724  
Telephone: (732) 785-3000  
Contractor Design Resources Group  
Address 371 Hoes Lane Ste. 301 Piscataway NJ 08854  
Telephone: (732) 560-7900 Fax: (732) 560-7910  
License Number or Builders Registration Number: \_\_\_\_\_ Federal Emp. Number: \_\_\_\_\_

Home Warranty Number: \_\_\_\_\_

Type of Warranty Plan: ☐ State ☐ Private

Use Group: E Construction Classification: \_\_\_\_\_

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: ROOFING

Certificate Comments:

☐ **Certificate of Occupancy**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☒ **Certificate of Approval**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **Certificate of Continued Occupancy**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

**Conditions to be met:**

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work  
☐ Partial or limited time period (     years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work  
☐ Partial or limited time period (     years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

**Conditions to be met:**

\_\_\_\_\_  
Construction Official

Fee: \$0.00

Check Number: \_\_\_\_\_

Collected By: \_\_\_\_\_

# BUILDING SUBCODE TECHNICAL SECTION



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

Block 902

Lot 8

Qualification Code

Work Site Location 500 Midstreams Road

Brick, NJ 08724

Owner in Fee: Brick Township Board of Education

Tel. (732) 785-3000

e-mail jedwards@brickschools.org

Address 101 Hendrickson Avenue

Brick

08724

Contractor: Design Resources Group

street municipally

Tel. (732) 560-7900

Address 371 Hoes Lane, Suite 301

e-mail frankb@drgaia.com

Piscataway, NJ 08854

Contractor License No. or Builder Registration No.

Exp. Date

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

Federal Emp. ID No.

FAX: (732) 560-7910

## JOB SUMMARY (Office Use Only)

### PLAN REVIEW

[ ] No Plans Required

Date Initial

### INSPECTIONS

Dates (Month/Day)

Initial

[X] All

Date Initial

Type

Failure Failure Approval

[ ] Footings/Foundations

Footings

Foundation

[ ] Structural/Framework

Foundation

Slab

[ ] Exterior

Frame

Truss Sys./Bracing

[ ] Interior

Barrier-Free

Insulation

Joint Plan Review Required:

Barrier-Free

Insulation

[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

Finishes -Base Layer

Finishes -Final

SUBCODE APPROVAL for PERMIT

Energy

Mechanical

Approved by: KEL

TCO

Other

SUBCODE APPROVAL for CERTIFICATE

Final

Final

Date: 07/22/15

Final

Final

Approved by: KEL

Final

Final

Use Group Present E

Proposed E

Contr. Class Present IIB

Proposed IIB

No. of Stories 1

Height of Structure 15 ft.

Area — Largest Floor 43,000 sq. ft.

New Bldg. Area/All Floors

Volume of New Structure

Max. Live Load

Max. Occupancy Load

Est. Cost of Bldg. Work:

1. New Bldg. \$ 1,250,000

2. Rehabilitation \$ 1,250,000

3. Total (1+2) \$ 2,500,000

State Approved

HUD

Area — Largest Floor

Volume of New Structure

Max. Live Load

Max. Occupancy Load

Est. Cost of Bldg. Work:

1. New Bldg. \$ 1,250,000

2. Rehabilitation \$ 1,250,000

3. Total (1+2) \$ 2,500,000

State Approved

HUD

Area — Largest Floor

Volume of New Structure

Max. Live Load

Max. Occupancy Load

Est. Cost of Bldg. Work:

1. New Bldg. \$ 1,250,000

2. Rehabilitation \$ 1,250,000

3. Total (1+2) \$ 2,500,000

State Approved

HUD

Area — Largest Floor

Volume of New Structure

Max. Live Load

Max. Occupancy Load

Est. Cost of Bldg. Work:

1. New Bldg. \$ 1,250,000

2. Rehabilitation \$ 1,250,000

3. Total (1+2) \$ 2,500,000

## C. CERTIFICATION IN LIEU OF OATH

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

Sign here:

Print name here: Frank Bowley

## D. TECHNICAL SITE DATA

### DESCRIPTION OF WORK

Remove and replace existing roofing system, gutters, leaders, etc.

### TYPE OF WORK:

[ ] New Building

[ ] Addition

[X] Rehabilitation

[ ] Roofing

[ ] Siding

[ ] Fence

[ ] Sign

[ ] Pool

[ ] Retaining Wall

[ ] Asbestos Abatement Subchapter 8

[ ] Lead Haz. Abatement NJAC 5.17

[ ] Radon Remediation

[ ] Other

[ ] Demolition

### FEE (Office Use Only)

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

Date Received

14-0001

Control #

Date Issued

Permit #

11/2/14

\*No Access

**CERTIFICATION IN LIEU OF OATH**

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

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

Mark the following applicable boxes:

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

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

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

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

C. ( ) I further certify that I will perform or supervise the following work:

C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:

C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

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

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

( ) Check if contractor.

Agent Name Frank Bowly/Design Resources Group, AIA

Address 371 Hoes Lane, Suite 301, Piscataway, NJ 08854

Telephone (732) 580-7900

Signature Frank Bowly

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

2-25-15 W - Final Rpt

1) Manuf Warranty info and certification Recd -  
2) Areas of Concern include —

Ponding areas—  
Bubbled Areas—

\*Note: Spoke to head custodian Ray Marshall and Principals  
Notified them of Broken Skylights and Flu caps not associated with job—  
They notified me that gutters were installed incorrectly and leak.  
Contractor to see them for those areas of Concern—

2-25-15 W Final Rpt  
See #1 from 2-25-15

↖ (B) tech

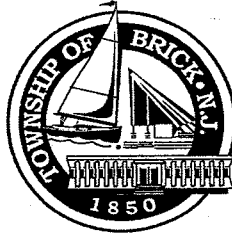
# TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY  
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

John G. Ducey, Mayor

**Township Council:**

Paul Mummolo - President  
Heather deJong - Vice President  
Jim Fozman  
Susan Lydecker  
Bob Moore  
Marianna Pontoriero  
Andrea Zapcic



**Division of Inspections**

Daniel Newman Jr.  
Construction Official  
dnewman@twp.brick.nj.us

732-262-1030  
Fax: 732-262-2941  
www.twp.brick.nj.us

January 14, 2014

Design Resources Group  
371 Hoes Lane, Ste 301  
Piscataway, NJ 08854

RE: Midstream Schools  
Roof Replacement  
Permit 14-0001

Dear Design Resources Group,

The permit application for Roof Replacement Project at Midstream Elementary School have been reviewed on January 2, 2014 by our building sub code official. It has been determined that the submitted applications and the associated construction documents, plans, and specifications are satisfactory and indicate substantial compliance to the construction codes.

If you have any questions, please do not hesitate to contact me at 732-262-1030.

Thank you for your anticipated cooperation.

Sincerely,

A handwritten signature in cursive script that reads "Daniel Newman Jr.".

Daniel Newman, Jr.  
Construction Official

DN/kb





# BUILDING SUBCODE TECHNICAL SECTION



Change of Contractors

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

Block 902 Lot 8 Qualification Code \_\_\_\_\_

Work Site Location Midstream Elementary School  
500 Midstream Rd. Brick, NJ 08724

Owner In Fee: Brick Township Board of Education

Tel. (732) 869-1000 e-mail \_\_\_\_\_

Address 101 Hendricksen Ave, Brick, NJ 08724

Contractor: USA General Contractors LLC Tel. (908) 436-3735 zip code \_\_\_\_\_

Address 980 Denart Pl. Elizabeth, NJ e-mail info@usagc.com

Contractor License No. or Builder Registration No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Home Improvement Contractor Registration No. or Exemption Reason \_\_\_\_\_

Federal Emp. ID No. 13-37514133 FAX (908) 436-1464

## JOB SUMMARY (Office Use Only)

| PLAN REVIEW                                                                                                                    | Date | Initial | INSPECTIONS                                   | Type                | Failure | Dates (Month/Day) | Failure | Approval | Initial |
|--------------------------------------------------------------------------------------------------------------------------------|------|---------|-----------------------------------------------|---------------------|---------|-------------------|---------|----------|---------|
| <input type="checkbox"/> No Plans Required                                                                                     |      |         | <input type="checkbox"/> All                  | Footings            |         |                   |         |          |         |
| <input type="checkbox"/> Footings/Foundations                                                                                  |      |         | <input type="checkbox"/> Structural/Framework | Footings-Bonding    |         |                   |         |          |         |
| <input type="checkbox"/> Structural/Framework                                                                                  |      |         | <input type="checkbox"/> Exterior             | Foundation          |         |                   |         |          |         |
| <input type="checkbox"/> Interior                                                                                              |      |         | <input type="checkbox"/> Truss Sys./Bracing   | Slab                |         |                   |         |          |         |
| <input type="checkbox"/> Joint Plan Review Required:                                                                           |      |         | <input type="checkbox"/> Barrier-Free         | Frame               |         |                   |         |          |         |
| <input type="checkbox"/> Elec. <input type="checkbox"/> Plumb. <input type="checkbox"/> Fire <input type="checkbox"/> Elevator |      |         | <input type="checkbox"/> Insulation           | Truss Sys./Bracing  |         |                   |         |          |         |
| SUBCODE APPROVAL for PERMIT                                                                                                    |      |         | <input type="checkbox"/> Finishes-Base Layer  | Barrier-Free        |         |                   |         |          |         |
| Date:                                                                                                                          |      |         | <input type="checkbox"/> Finishes-Final       | Insulation          |         |                   |         |          |         |
| Approved by:                                                                                                                   |      |         | <input type="checkbox"/> Energy               | Finishes-Base Layer |         |                   |         |          |         |
| SUBCODE APPROVAL for CERTIFICATE                                                                                               |      |         | <input type="checkbox"/> Mechanical           | Finishes-Final      |         |                   |         |          |         |
| <input type="checkbox"/> CO <input type="checkbox"/> CCO <input type="checkbox"/> CA                                           |      |         | <input type="checkbox"/> TCO                  | Energy              |         |                   |         |          |         |
| Date:                                                                                                                          |      |         | <input type="checkbox"/> Other                | Mechanical          |         |                   |         |          |         |
| Approved by:                                                                                                                   |      |         | <input type="checkbox"/> Final                | TCO                 |         |                   |         |          |         |
|                                                                                                                                |      |         | <input type="checkbox"/> Barrier-Free         | Other               |         |                   |         |          |         |

## B. BUILDING CHARACTERISTICS

Use Group Present \_\_\_\_\_ Proposed \_\_\_\_\_

No. of Stories 15 If Industrialized Building: \_\_\_\_\_

Height of Structure \_\_\_\_\_ ft. State Approved \_\_\_\_\_ HUD \_\_\_\_\_

Area—Largest Floor \_\_\_\_\_ sq. ft. Est. Cost of Bldg. Work: \_\_\_\_\_

New Bldg. Area/All Floors \_\_\_\_\_ sq. ft. 1. New Bldg. \$ 550,000

Volume of New Structure \_\_\_\_\_ cu. ft. 2. Rehabilitation \$ 550,000

Max. Live Load \_\_\_\_\_ 3. Total (1+2) \$ 0

Max. Occupancy Load \_\_\_\_\_

## C. CERTIFICATION IN LIEU OF OATH

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

Sign here: Kellen Dunstan

Print name here: Kellen Dunstan

## D. TECHNICAL SITE DATA

### DESCRIPTION OF WORK

Roof Replacement + Masonry Work  
Direct Repair

### TYPE OF WORK:

|                                                                        |  |
|------------------------------------------------------------------------|--|
| <input type="checkbox"/> New Building                                  |  |
| <input type="checkbox"/> Addition                                      |  |
| <input type="checkbox"/> Rehabilitation                                |  |
| <input checked="" type="checkbox"/> Roofing                            |  |
| <input type="checkbox"/> Siding                                        |  |
| <input type="checkbox"/> Fence _____ Height (exceeds 6') _____ Sq. Ft. |  |
| <input type="checkbox"/> Sign _____ Sq. Ft.                            |  |
| <input type="checkbox"/> Pool                                          |  |
| <input type="checkbox"/> Retaining Wall _____ Sq. Ft.                  |  |
| <input type="checkbox"/> Asbestos Abatement Subchapter 8               |  |
| <input type="checkbox"/> Lead Haz. Abatement NJAC 5:17                 |  |
| <input type="checkbox"/> Radon Remediation                             |  |
| <input type="checkbox"/> Other _____                                   |  |
| <input type="checkbox"/> Demolition                                    |  |

FEE (Office Use Only)  
\$ \_\_\_\_\_

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

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

U.C.C. F-110 (rev. 11/09)  
Internet version

Date Received \_\_\_\_\_  
Control # 14-1728  
Date Issued \_\_\_\_\_  
Permit # 16-10-14



# CONSTRUCTION PERMIT

Date Issued 1/2/2014  
Control # C-13-006948  
Permit # 14-0001

IDENTIFICATION Block: 902 Lot: 8 Qualifier \_\_\_\_\_  
Work Site Location: 500 MIDSTREAMS RD Brick Township, NJ Contractor Design Resources Group  
Address 371 Hoes Lane Ste. 301 Piscataway NJ 08854  
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION  
101 HENDRICKSON AVE. BRICK NJ 08724 Telephone: (732) 560-7900  
Telephone: (732) 785-3000 Lic. No. or Bldrs. Reg. No. \_\_\_\_\_  
Federal Employee. No. \_\_\_\_\_

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

ROOFING

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$1,250,000

Daniel Newman  
Construction Official

1/2/14  
Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

## PAYMENTS (Office Use Only)

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

## REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes; Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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

If you do not understand any of this information, please ask.



# BUILDING SUBCODE TECHNICAL SECTION



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

Block 902 Lot 8 Qualification Code

Work Site Location 500 Midstreams Road Brick, NJ 08724

Owner in Fee: Brick Township Board of Education

Tel. (732) 785-3000 e-mail jedwards@brickschools.org

Address 101 Hendrickson Avenue Brick 08724

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

Address 371 Hoes Lane, Suite 301 e-mail frankb@drgaia.com

Piscataway, NJ 08854

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

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

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

## JOB SUMMARY (Office Use Only)

| PLAN REVIEW                                                                                                                    | Date     | Initial | INSPECTIONS          | Failure | Dates (Month/Day) | Approval | Initial |
|--------------------------------------------------------------------------------------------------------------------------------|----------|---------|----------------------|---------|-------------------|----------|---------|
| <input type="checkbox"/> No Plans Required                                                                                     |          |         | Type:                |         |                   |          |         |
| <input checked="" type="checkbox"/> All                                                                                        | 01/02/14 | WBA     | Footings             |         |                   |          |         |
| <input type="checkbox"/> Footings/Foundations                                                                                  |          |         | Foundation           |         |                   |          |         |
| <input type="checkbox"/> Structural/Framework                                                                                  |          |         | Slab                 |         |                   |          |         |
| <input type="checkbox"/> Exterior                                                                                              |          |         | Frame                |         |                   |          |         |
| <input type="checkbox"/> Interior                                                                                              |          |         | Truss/Sys./Bracing   |         |                   |          |         |
| Joint Plan Review Required:                                                                                                    |          |         | Barrier-Free         |         |                   |          |         |
| <input type="checkbox"/> Elec. <input type="checkbox"/> Plumb. <input type="checkbox"/> Fire <input type="checkbox"/> Elevator |          |         | Insulation           |         |                   |          |         |
| SUBCODE APPROVAL FOR PERMIT                                                                                                    |          |         | Finishes -Base layer |         |                   |          |         |
| Date: 01/02/14                                                                                                                 |          |         | Finishes -Final      |         |                   |          |         |
| Approved by: WBA                                                                                                               |          |         | Energy               |         |                   |          |         |
| SUBCODE APPROVAL FOR CERTIFICATE                                                                                               |          |         | Mechanical           |         |                   |          |         |
| <input type="checkbox"/> CO <input type="checkbox"/> CCO <input checked="" type="checkbox"/> CA                                |          |         | TCO                  |         |                   |          |         |
| Date: 01/02/14                                                                                                                 |          |         | Other                |         |                   |          |         |
| Approved by: WBA                                                                                                               |          |         | Final                |         |                   |          |         |
|                                                                                                                                |          |         | Barrier-Free         |         |                   |          |         |

## B. BUILDING CHARACTERISTICS

| Use Group                 | Present | E | Proposed | E | 1       | Constr. Class               | Present | IIB | Proposed     | IIB |
|---------------------------|---------|---|----------|---|---------|-----------------------------|---------|-----|--------------|-----|
| No. of Stories            |         |   |          |   | 15      | If Industrialized Building: |         |     |              |     |
| Height of Structure       |         |   |          |   | sq. ft. | State Approved              |         |     | HUD          |     |
| Area — Largest Floor      |         |   |          |   | 43,000  | Est. Cost of Bldg. Work:    |         |     |              |     |
| New Bldg. Area/All Floors |         |   |          |   | sq. ft. | 1. New Bldg.                |         |     | \$ 1,250,000 |     |
| Volume of New Structure   |         |   |          |   | cu. ft. | 2. Rehabilitation           |         |     | \$ 1,250,000 |     |
| Max. Live Load            |         |   |          |   |         | 3. Total (1+2)              |         |     | \$ 1,250,000 |     |
| Max. Occupancy Load       |         |   |          |   |         |                             |         |     |              |     |

## C. CERTIFICATION IN LIEU OF OATH

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

Sign here:

Frank Bowby

Print name here: Frank Bowby

## D. TECHNICAL SITE DATA

### DESCRIPTION OF WORK

Remove and replace existing roofing system, gutters, leaders, etc.

Date Received  
Control #

14-0001

Date Issued  
Permit #

11/2/14

### TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☒ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence \_\_\_\_\_ Height (exceeds 6') Sq. Ft.
- ☐ Sign \_\_\_\_\_ Sq. Ft.
- ☐ Pool
- ☐ Retaining Wall \_\_\_\_\_ Sq. Ft.
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☐ Other \_\_\_\_\_
- ☐ Demolition

### FEE (Office Use Only)

|                               |  |
|-------------------------------|--|
| Administrative Surcharge \$   |  |
| Minimum Fee \$                |  |
| State Permit Surcharge Fee \$ |  |
| TOTAL FEE \$                  |  |



PRINCIPALS:  
Hany Y. Salib, AIA, NCARB  
NJ Lic # 21AI01733800  
PA Lic # RA404803  
NY Lic # 032590-1

Patrick S. Seiwel, AIA, NCARB  
LEED AP  
NJ Lic # 21AI01611000  
PA Lic # RA403783  
NY Lic # 031550-1

Phillip J. Cacossa, PE  
LEED AP  
NJ Lic # 24GE03704900  
PA Lic # PE056000E  
NY Lic # 079633-1

ASSOCIATE:  
Alan N. Trovato

December 3, 2013

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

**Attn: Daniel Newman  
Construction Official**

**Re: Brick Township School District  
Roof Replacement at the:  
Midstreams Elementary School  
DOE Project No. 0530-060-14-1002  
DRG No. 1307-02**

Dear Mr. Newman,

Please find the enclosed items in reference to the above mentioned projects:

1. (2) Complete sets of plans, signed and sealed by the architect.
2. (2) Copies of the specifications signed and sealed by the architect.
3. Project review permit jackets (three (3) each for the applicable disciplines) for the project.

With this application we would like to begin the review process to gain final release for this project.

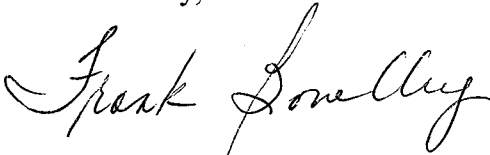
Upon your review and approval we will require a letter from your office stating the following:

**“The plans and specifications for the above named project have been reviewed for code compliance and are hereby released for contractor procurement.”**

**“Contractor shall appropriately apply for all permits once the project that has been awarded by the Brick Township Board of Education”**

Please feel free to call should you have any questions or require any additional information. I can be reached at 732-560-7900 , ext. 112 or by e-mail at [frankb@drgaia.com](mailto:frankb@drgaia.com) .

Sincerely,

A handwritten signature in cursive script that reads "Frank Bowlby".

Frank Bowlby  
Design Resources Group Architects AIA, Inc.  
Project Manager

Cc: Patrick Seiwel, DRG  
James Edwards BBOE Business Administrator  
file

(P:1307/02/1307review letter-12-03-2013.doc)

*"LEADING SOLUTIONS IN ROOFING AND MASONRY"*

## FACSIMILE TRANSMITTAL SHEET

TO:

Inspection/Construction Dept.

FROM:

Lily Jimenez

COMPANY:

Brick Township

DATE:

2/13/2015

FAX NUMBER:

732-262-2941

TOTAL NO. OF PAGES INCLUDING COVER:

29

PHONE NUMBER:

SENDER'S REFERENCE NUMBER:

RE:

Midstream ES Roof Replacement

I

☐ URGENT☐ FOR REVIEW☐ PLEASE COMMENT☐ PLEASE REPLY☐ PLEASE RECYCLE

NOTES/COMMENTS:

Hello,

Enclosed please find the attached Dumpster Delivery Tickets per your request. Please schedule the Final Inspection and send us (3) original Certificate of Approvals to submit to the BOE. If you need to have someone from our company there please let us know a day ahead and I will make the arrangements for the date of the inspection.

Contact Info: Nectarius 347-580-0994

Thanks.

Lily Jimenez



\*315088

## Generator/Site:

USA WASTE MIDSTREAMS ELEM-108  
500 MIDSTREAMS ROAD  
BRICK, NJ 08724

## Bill To:

USA WASTE MANAGEMENT LLC  
15 BRANT AVE  
CLARK, NJ 07066

|             |        |    |       |
|-------------|--------|----|-------|
| Gross       | 48,680 | lb | MANWT |
| Tare        | 33,160 | lb | NONE  |
| Adjustments | 0      |    |       |
| Net         | 14,520 | lb |       |
| Tons        | 7.260  |    |       |

Ticket No: 315088  
Date: 07/21/2014  
Inbound: 11:39 am  
Outbound: 11:47 am  
Account No: 53442106  
PO/Release No: 11381  
Service Order: 144621  
Contract #:   
Driver: FOLIGER  
Vehicle No: 721  
Veh SW Decal: 00205  
Veh Plate: NJ AT687M  
Trailer No:   
Trl SW Decal:   
Trl Plate:   
Container No:   
Minimum Weight:   
Inbound: FCIMRF  
Transporter: NONE

Township: BRICK TOWNSHIP  
Originator:

| Material      | Weight    | Price | Materials | Totals |
|---------------|-----------|-------|-----------|--------|
| 13C C&D WASTE | 14,520.00 | --    |           |        |

Scale Master Signature: \_\_\_\_\_

Driver Signature: \_\_\_\_\_

Materials  
Taxes/Fees  
Total Due



# \*315058

## Generator/Site:

USA WASTE MIDSTREAMS ELEM -109  
500 MIDSTREAMS ROAD  
BRICK NJ 08724

## Bill To:

USA WASTE MANAGEMENT LLC  
15 BRANT AVE  
CLARK, NJ 07066

|             |        |    |       |
|-------------|--------|----|-------|
| Gross       | 62,700 | lb | MANWT |
| Tare        | 35,500 | lb | NONE  |
| Adjustments | 0      |    |       |
| Net         | 27,200 | lb |       |
| Tons        | 13.600 |    |       |

Ticket No: 315058  
Date: 02/21/2014  
Inbound: 9:58 am  
Outbound: 9:59 am  
Account No: 53442100  
PO/Release No: 11381  
Service Order: 141822  
Contract #  
Driver: EOLIGER  
Vehicle No: 771  
Veh SW Decal: G0205  
Veh Plate: NJ AF687M  
Trailer No:  
Tr SW Decal  
Tr Plate  
Container No:  
Minimum Weight:  
Inbound: FCMRF  
Transporter: NONE

Township: BRICK TOWNSHIP  
Origination:

| Material      | Weight    | Price | Materials | Totals |
|---------------|-----------|-------|-----------|--------|
| 13C C&D WASTE | 27,200.00 |       |           |        |

Scale Master Signature: \_\_\_\_\_

Driver Signature: \_\_\_\_\_

Materials  
Taxes/Fees  
Total Due



\*315116

Generator/Site  
 USA WASTE MIDSTREAMS ELEM-106  
 500 MIDSTREAMS ROAD  
 BRICK, NJ 08724

Bill To:  
 USA WASTE MANAGEMENT LLC  
 15 BRANT AVE  
 CLARK, NJ 07066

|             |        |    |       |
|-------------|--------|----|-------|
| Gross       | 48,320 | lb | MANWT |
| Tare        | 34,240 | lb | MANWT |
| Adjustments | 0      |    |       |
| Net         | 14,080 | lb |       |
| Tons        | 7.040  |    |       |

Ticket No 315116  
 Date: 07/21/2014  
 Inbound: 1:08 pm  
 Outbound: 1:14 pm  
 Account No 53442105  
 PO/Release No 14381  
 Service Order 144823  
 Contract #  
 Driver: SDAVIS  
 Vehicle No 721  
 Veh SW Decat 00205  
 Veh Plate NJ AF087M  
 Trailer No  
 Tr SW Decat  
 Tr Plate  
 Container No  
 Minimum Weight  
 Inbound FCI/MRF  
 Transporter FCI

Township  
 Origination OCEAN TOWNSHIP

| Material      | Weight    | Price | Materials | Totals |
|---------------|-----------|-------|-----------|--------|
| 13C C&D WASTE | 14,080.00 |       |           |        |

Remarks: STEVE STONE DRIVER  
 Scale Master Signature: \_\_\_\_\_

Driver Signature: \_\_\_\_\_

Materials  
 Taxes/Fees

Total Due

Generator/Site:

USA WASTE MIDSTREAMS ELEM -106  
500 MIDSTREAMS ROAD  
BRICK, NJ 08724

Bill To:

USA WASTE MANAGEMENT LLC  
15 BRANT AVE  
CLARK, NJ 07066

|       |        |    |      |
|-------|--------|----|------|
| Gross | 45,060 | lb | NONE |
| Tare  | 36,100 | lb | NONE |

|      |       |    |
|------|-------|----|
| Net  | 8,960 | lb |
| Tons | 4.480 |    |

Ticket No: 312110  
Date: 08/27/2014  
Inbound: 3:29 pm  
Outbound: 3:44 pm  
Account No: 53A4210B  
PO/Release No: 11381  
Service Order: 142464

Contract #:   
Driver: GWATSON  
Vehicle No: 790  
Veh SW Decal: 00653  
Veh Plate: NJ AA214G

Trailer No:   
Trl SW Decal   
Trl Plate   
Container No:   
Minimum Weight:   
Inbound: FCIMRF  
Transporter: NONE

Township: BRICK TOWNSHIP  
Origination:

| Material      | Weight   | Price | Materials | Totals |
|---------------|----------|-------|-----------|--------|
| 180 C&D WASTE | 8,960.00 |       |           |        |

Scale Master Signature: \_\_\_\_\_

Driver Signature: \_\_\_\_\_

Materials

Taxes/Fees

Total Due: \_\_\_\_\_



# \*320712

Generator/Site:  
 USA WASTE MIDSTREAMS ELEM -108  
 500 MIDSTREAMS ROAD  
 BRICK, NJ 08724

Bill To:  
 USA WASTE MANAGEMENT LLC  
 15 BRANT AVE  
 CLARK, NJ 07066

|             |        |    |      |
|-------------|--------|----|------|
| Gross       | 38,520 | lb | NONE |
| Tare        | 35,000 | lb | NONE |
| Adjustments | 0      |    |      |
| Net         | 3,520  | lb |      |
| Tons        | 1.760  |    |      |

Ticket No: 320712  
 Date: 08/29/2014  
 Inbound: 11:55 am  
 Outbound: 12:07 pm  
 Account No: 53442108  
 PO/Release No: 11381  
 Service Order: 145210  
 Contract #:   
 Driver: SSTONE  
 Vehicle No: 733  
 Veh SW Decal: 00390  
 Veh Plate: NJ AF237V  
 Trailer No:   
 Tr SW Decal:   
 Tr Plate:   
 Container No:   
 Minimum Weight:   
 Inbound: FCMRF  
 Transporter: NONE  
 Township: BRICK TOWNSHIP  
 Origination:

| Material      | Weight   | Price | Materials | Totals |
|---------------|----------|-------|-----------|--------|
| 130 C&D WASTE | 3,520.00 |       |           |        |

Scale Master Signature: \_\_\_\_\_

Driver Signature: \_\_\_\_\_

Materials  
 Taxes/Fees

Total Due



\*318301\*

Generator/Site  
 USA WASTE MIDSTREAMS ELEM -106  
 600 MIDSTREAMS ROAD  
 BRICK, NJ 08724

Bill To:  
 USA WASTE MANAGEMENT, LLC  
 15 BRANT AVE  
 CLARK, NJ 07066

|             |        |    |      |
|-------------|--------|----|------|
| Gross       | 62,560 | lb | NONE |
| Tare        | 35,300 | lb | NONE |
| Adjustments | 0      |    |      |
| Net         | 17,260 | lb |      |
| Tons        | 8.830  |    |      |

Ticket No. 318301  
 Date 08/12/2014  
 Inbound 0:00 am  
 Outbound: 9:24 am  
 Account No: 53442106  
 PO/Release No: 11381  
 Service Order: 146737  
 Contract #:   
 Driver: JPQLITO  
 Vehicle No 732  
 Veh SW Decal 00397  
 Veh Plate NJ AF632U  
 Trailer No  
 Tr SW Decal  
 Tr Plate  
 Container No  
 Minimum Weight:  
 Inbound PCIMRF  
 Transporter NONE  
 Township BRICK TOWNSHIP  
 Origination:

| Material      | Weight    | Price | Materials | Totals |
|---------------|-----------|-------|-----------|--------|
| 13C C&D WASTE | 17,260.00 |       |           |        |

Scale Master Signature \_\_\_\_\_

Driver Signature \_\_\_\_\_

Materials  
Taxes/Fees

Total Due \_\_\_\_\_



\*315432

## Generator/Site:

USA WASTE MIDSTREAMS ELEM -106  
500 MIDSTREAMS ROAD  
BRICK, NJ 08724

## Bill To:

USA WASTE MANAGEMENT LLC  
15 BRANT AVE  
CLARK, NJ 07066

|             |        |    |      |
|-------------|--------|----|------|
| Gross       | 46,860 | lb | NONE |
| Tare        | 35,400 | lb | NONE |
| Adjustments | 0      |    |      |
| Net         | 11,460 | lb |      |
| Tons        | 5.730  |    |      |

Ticket No. 315432  
Date 07/23/2014  
Inbound 9:40 am  
Outbound 9:58 am  
Account No. 53442106  
PCR/Release No. 11361  
Service Order 144873  
Contract #:  
Driver: EOLIGER  
Vehicle No. 721  
Veh SW Decal 00206  
Veh Plate NJ AF687M  
Trailer No:  
Tri SW Decal  
Tri Plate  
Container No  
Minimum Weight  
Inbound FC/MRF  
Transporter NONE  
Township BRICK TOWNSHIP  
Origination

| Material      | Weight    | Price | Materials | Totals |
|---------------|-----------|-------|-----------|--------|
| 13C C&D WASTE | 11,460.00 |       |           |        |

Scale Master Signature: \_\_\_\_\_

Driver Signature: \_\_\_\_\_

Materials  
Taxes/Fees  
Total Due



\*315459

Generator/Site:

USA WASTE MIDSTREAMS ELEM-106  
600 MIDSTREAMS ROAD  
BRICK, NJ 08724

Bill To:

USA WASTE MANAGEMENT LLC  
15 BRANT AVE  
CLARK, NJ 07066

|             |        |    |       |
|-------------|--------|----|-------|
| Gross       | 39,080 | lb | MANWT |
| Tare        | 34,500 | lb | MANWT |
| Adjustments | 0      |    |       |
| Net         | 4,580  | lb |       |
| Tons        | 2.280  |    |       |

Ticket No. 315459  
Date 07/23/2014  
Inbound 11:11 am  
Outbound 11:23 am  
Account No. 53442106  
PO/Release No. 11251  
Service Order 144674  
Contract #  
Driver. EOLIGER  
Vehicle No. 721  
Veh SW Decal 00205  
Veh Plate NJ AF687W  
Trailer No  
Tri SW Decal  
Tri Plate  
Container No  
Minimum Weight  
Inbound FCIMRF  
Transporter. NONE  
Township BRICK TOWNSHIP  
Origination

| Material      | Weight   | Price | Materials | Totals |
|---------------|----------|-------|-----------|--------|
| 13C C&D WASTE | 4,580.00 |       |           |        |

Scale Master Signature \_\_\_\_\_

Driver Signature \_\_\_\_\_

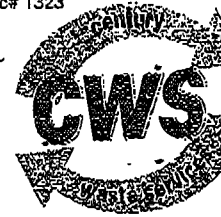
Materials  
Taxes/Fees

Total Due



# 71170

Bic# 1323


**Commercial • Industrial • Residential  
Container Service 1- 40 yards**

- Solid & Hazardous Waste Removal
- Recycling Service
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date

8-4-14

Customer Name U.S.A.

Address

MIDSTREAM RD.

City

BRICK TOWN NJ.

County

OCEAN.

Phone:

| Quantity | Size-Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
| 1        | 40       | Open top roll-off   | 40        |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

| Delivery & Pick Up Information |                                                  |                                    |
|--------------------------------|--------------------------------------------------|------------------------------------|
| Delivery Date:                 | <input type="checkbox"/> Pick Up & Return        | <input type="checkbox"/> Delivery  |
| Pick Up Date:                  | <input type="checkbox"/> Switch                  | <input type="checkbox"/> Wait/load |
|                                | <input checked="" type="checkbox"/> Pick Up Only |                                    |

| Container & Price Information |       |
|-------------------------------|-------|
| Container Size:               | 40-04 |
| Container Price:              |       |
| Weight Limit (in Tons):       |       |
| \$ per Ton Over:              |       |

| Type of Waste                                  | Comments   |
|------------------------------------------------|------------|
| <input type="checkbox"/> Commercial Refuse     | <b>NO</b>  |
| <input type="checkbox"/> Wood/Pallets          |            |
| <input checked="" type="checkbox"/> Demolition |            |
| <input type="checkbox"/> Concrete & Dirt       |            |
|                                                |            |
|                                                | Concrete   |
|                                                | Dirt       |
|                                                | Bricks     |
|                                                | Tires      |
|                                                | Mattresses |

Driver: \_\_\_\_\_ Delivery: \_\_\_\_\_ Truck: \_\_\_\_\_ Box #: \_\_\_\_\_

Pick Up:

RKH

Truck:

256

Box #:

243

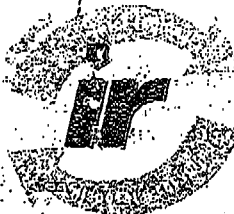
Customer Signature

See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.

# 71170 NID

Bio# 1323



**Commercial • Industrial • Residential**  
**Container Service 1- 40 yards**  
 • Solid & Hazardous Waste Removal  
 • Recycling Services  
 • Clean out Service (will provide labor)  
 • Free Estimates - 24 hour service



623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date 8-11-14Customer Name USAAddress 1110 STREAM RDCity BRICK TOWN, N.J.County OCEAN

Phone: \_\_\_\_\_

| Quantity | Size-Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
| 1        | 40       | Open top roll-off   | 40        |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

| Delivery & Pick Up Information |                                                                                                                                                   |
|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| Delivery Date: _____           | <input type="checkbox"/> Pick Up & Return <input type="checkbox"/> Delivery<br><input type="checkbox"/> Switch <input type="checkbox"/> Wait/load |
| Pick Up Date: <u>8-4-14</u>    | <input type="checkbox"/> Pick Up Only                                                                                                             |

| Container & Price Information |                        |
|-------------------------------|------------------------|
| Container Size: <u>40-OT</u>  | Container Price: _____ |
| Weight Limit (in Tons): _____ | \$ per Ton Over: _____ |

| Type of Waste                                  | Comments           |
|------------------------------------------------|--------------------|
| <input type="checkbox"/> Commercial Refuse     | <b>NO</b> Concrete |
| <input type="checkbox"/> Wood/Pallets          | Dirt               |
| <input checked="" type="checkbox"/> Demolition | Bricks             |
| <input type="checkbox"/> Concrete & Dirt       | Tires              |
|                                                | Mattresses         |

|                      |                    |                       |              |
|----------------------|--------------------|-----------------------|--------------|
| Driver: _____        | Delivery: _____    | Truck: _____          | Box #: _____ |
| Pick Up: <u>2014</u> | Truck: <u>2014</u> | Box #: <u>273.919</u> |              |

Customer Signature \_\_\_\_\_

See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.

# 71166

Bic# 1323

**Commercial • Industrial • Residential**  
**Container Service 1- 40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service



623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603  
 Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date 8-2-14Customer Name H.S.H.Address 11115 STICKMAN RD.City BRICKTON, NJCounty DELR.

Phone: \_\_\_\_\_

| Quantity | Size-Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
| 1        | 30       | Open top roll-off   | 30        |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

## Delivery &amp; Pick Up Information

Delivery Date: \_\_\_\_\_

☐ Pick Up & Return☐ DeliveryPick Up Date: 8-2-14☐ Switch☐ Wait/Load☒ Pick Up Only

## Container &amp; Price Information

Container Size: 30' OT

Container Price: \_\_\_\_\_

Weight Limit (in Tons): \_\_\_\_\_

\$ per Ton Over: \_\_\_\_\_

| Type of Waste                                  | Comments |
|------------------------------------------------|----------|
| <input type="checkbox"/> Commercial Refuse     | Concrete |
| <input type="checkbox"/> Wood/Pallets          | Dirt     |
| <input checked="" type="checkbox"/> Demolition | Bricks   |
|                                                | Tires    |

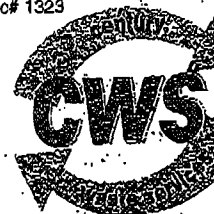
By executing this agreement, customer hereby agrees to pay the charges associated with waste removal charged on customer's credit card, including changes for over the weight limit containers. Prices and limitations spelled out above.

Time shall be subject to negotiations for an additional specified rate. LIABILITY shall not be responsible for any losses or damages.



# 627-1

Bio# 1323

**Commercial • Industrial • Residential****Container Service 1- 40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date 7-01-14Customer Name C.I.A.Address 500 MINSTRENNCity BRACKTOWN N.J.County OCEAN

Phone: \_\_\_\_\_

| Quantity | Size-Yds | Description                              | Total Yds |
|----------|----------|------------------------------------------|-----------|
| 1        | 30       | Open top roll-off <del>for removal</del> | 30        |
|          |          | Compactor                                |           |
|          |          | Extra Yards - Loose                      |           |

**Delivery & Pick Up Information**

Delivery Date: 7-7 ☒ Pick Up & Return ☐ Delivery  
☐ Switch ☐ Wait/load  
 Pick Up Date: 7-1 ☐ Pick Up Only

**Container & Price Information**

Container Size: 30-OT Container Price: \_\_\_\_\_  
 Weight Limit (in Tons): \_\_\_\_\_ \$ per Ton Over: \_\_\_\_\_

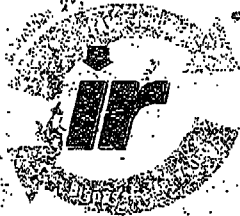
| Type of Waste                                  | Comments           |
|------------------------------------------------|--------------------|
| <input type="checkbox"/> Commercial Refuse     | <b>NO</b> Concrete |
| <input type="checkbox"/> Wood/Pallets          | Dirt               |
| <input checked="" type="checkbox"/> Demolition | Bricks             |
| <input type="checkbox"/> Concrete & Dirt       | Tires              |
|                                                | Mattresses         |

Driver: [Signature] Delivery: [Signature] Truck: PH 56 Box #: 243  
 Pick Up: [Signature] Truck: [Signature] Box #: 718

Customer Signature: [Signature]

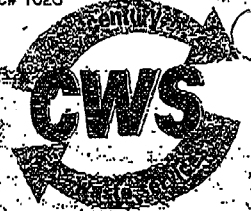
See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.



# 62998

Bic# 1323

**Commercial • Industrial • Residential****Container Service 1-40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date 7-7-14Customer Name USAAddress 500 Midstreams RdCity Buck, NJ

County \_\_\_\_\_

Phone: \_\_\_\_\_

| Quantity | Size Yds | Description           | Total Yds |
|----------|----------|-----------------------|-----------|
| 1        | 20YD     | Open top roll-off PTR |           |
|          |          | Compactor             |           |
|          |          | Extra Yards - Loose   |           |

**Delivery & Pick Up Information**

Delivery Date: 7-7-14 ☒ Pick Up & Return ☐ Delivery  
☐ Switch ☐ Wait/load  
 Pick Up Date: \_\_\_\_\_ ☐ Pick Up Only

**Container & Price Information**

Container Size: 30yd Container Price: \_\_\_\_\_  
 Weight Limit (in Tons): \_\_\_\_\_ \$ per Ton Over: \_\_\_\_\_

| Type of Waste                              | Comments           |
|--------------------------------------------|--------------------|
| <input type="checkbox"/> Commercial Refuse | <b>NO</b> Concrete |
| <input type="checkbox"/> Wood/Pallets      | Dir                |
| <input type="checkbox"/> Demolition        | Bricks             |
| <input type="checkbox"/> Concrete & Dirt   | Tires              |
|                                            | Mattresses         |

Driver: Delivery Vinny CTruck: #66

Box # \_\_\_\_\_

Pick Up: \_\_\_\_\_

Truck: \_\_\_\_\_

Box # \_\_\_\_\_

Customer Signature: \_\_\_\_\_

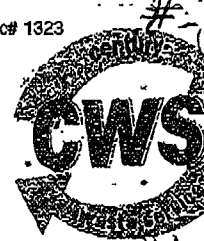
See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.



# 6071

Bic# 1323


**Commercial • Industrial • Residential  
Container Service 1- 40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date 7-01-11Customer Name U.S.A.Address # 500 WINSTON AVE.City Buckhams, NJCounty Ocean

Phone: \_\_\_\_\_

| Quantity | Size-Yds | Description                            | Total Yds |
|----------|----------|----------------------------------------|-----------|
| 1        | 30       | Open top roll-off <del>container</del> | 30        |
|          |          | Compactor                              |           |
|          |          | Extra Yards - Loose                    |           |

**Delivery & Pick Up Information**Delivery Date: 7-1☒ Pick Up & Return☐ Delivery☐ Switch☐ Wait/LoadPick Up Date: 7-1☐ Pick Up Only**Container & Price Information**Container Size: 30-07

Container Price: \_\_\_\_\_

Weight Limit (in Tons): \_\_\_\_\_

\$ per Ton Over: \_\_\_\_\_

| Type of Waste                                  | Comments  |            |
|------------------------------------------------|-----------|------------|
| <input type="checkbox"/> Commercial Refuse     | <b>NO</b> | Concrete   |
| <input type="checkbox"/> Wood/Pallets          |           | Dirt       |
| <input checked="" type="checkbox"/> Demolition |           | Bricks     |
| <input type="checkbox"/> Concrete & Dirt       |           | Tires      |
|                                                |           | Mattresses |

Driver: DeliverTruck: #56Box: 243

Pick Up: \_\_\_\_\_

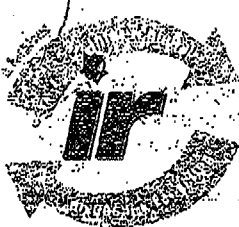
Truck: \_\_\_\_\_

Box: 718

Customer Signature: \_\_\_\_\_

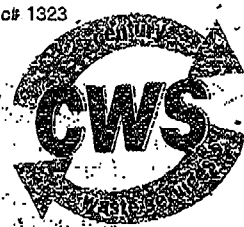
See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.



#71110

Bic# 1323


**Commercial • Industrial • Residential  
Container Service 1-40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date 7-14-14Customer Name U.S.A.Address MIDSTREAM RD.City BRICKTOWN NJCounty OCEAN Phone: \_\_\_\_\_

| Quantity | Size Yds  | Description         | Total Yds |
|----------|-----------|---------------------|-----------|
| <u>1</u> | <u>40</u> | Open top roll-off   | <u>40</u> |
|          |           | Compactor           |           |
|          |           | Extra Yards - Loose |           |

| Delivery & Pick Up Information |                                                                                                                                                   |
|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| Delivery Date: _____           | <input type="checkbox"/> Pick Up & Return <input type="checkbox"/> Delivery<br><input type="checkbox"/> Switch <input type="checkbox"/> Wait/load |
| Pick Up Date: <u>7-14-14</u>   | <input checked="" type="checkbox"/> Pick Up Only                                                                                                  |

| Container & Price Information |                        |
|-------------------------------|------------------------|
| Container Size: <u>40-OT</u>  | Container Price: _____ |
| Weight Limit (in Tons): _____ | \$ per Ton Over: _____ |

| Type of Waste                                  | Comments             |
|------------------------------------------------|----------------------|
| <input type="checkbox"/> Commercial Refuse     | <b>NO</b> Concrete   |
| <input type="checkbox"/> Wood/Pallets          | <b>NO</b> Dirt       |
| <input checked="" type="checkbox"/> Demolition | <b>NO</b> Bricks     |
| <input type="checkbox"/> Concrete & Dirt       | <b>NO</b> Tires      |
|                                                | <b>NO</b> Mattresses |

Driver: \_\_\_\_\_ Delivery: \_\_\_\_\_ Truck: \_\_\_\_\_ Box #: \_\_\_\_\_

Pick Up: 7/14/14 Truck: PT 56 Box #: 243918

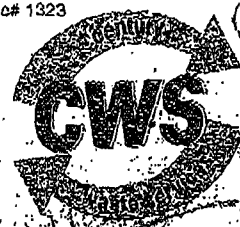
Customer Signature: \_\_\_\_\_ See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any charges for over the weight limit containers. Prices and limitations spelled out above.



# 71032

Bic# 1323


**Commercial • Industrial • Residential  
Container Service 1-40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates • 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603  
Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Customer Name

Address

City

County

Phone

| Quantity | Size Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
| 1        | 30       | Open top roll-off   |           |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

## Delivery &amp; Pick Up Information

Delivery Date:

☐ Pick Up & Return☐ Delivery☐ Switch☐ Wait/load

Pick Up Date:

☒ Pick Up Only

## Container &amp; Price Information

Container Size:

Container Price:

Weight Limit (in Tons):

\$ per Ton Over:

| Type of Waste                                         | Comments   |
|-------------------------------------------------------|------------|
| <input checked="" type="checkbox"/> Commercial Refuse | Concrete   |
| <input type="checkbox"/> Wood/Pallets                 | Dirt       |
| <input type="checkbox"/> Demolition                   | Bricks     |
| <input type="checkbox"/> Concrete & Dirt              | Tires      |
|                                                       | Mattresses |

Driver: Delivery:

Truck:

Box:

Pick Up:

Truck:

Box:

Customer Signature:

See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.

# 71110

Bic# 1323



Commercial • Industrial • Residential

Container Service 1- 40 yards

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean Out Service (will provide labor)
- Free Estimates - 24 hour service



①

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date 7-14-14Customer Name H.S.A.Address 11115 STEAM RD.City BRICKTOWN, N.J.County OCEAN

Phone: \_\_\_\_\_

| Quantity | Size-Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
| 1        | 40       | Open top roll-off   | 40        |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

| Delivery & Pick Up Information |                                                  |                                    |  |
|--------------------------------|--------------------------------------------------|------------------------------------|--|
| Delivery Date:                 | <input type="checkbox"/> Pick Up & Return        | <input type="checkbox"/> Delivery  |  |
| Pick Up Date: <u>7-14-14</u>   | <input type="checkbox"/> Switch                  | <input type="checkbox"/> Wait/load |  |
|                                | <input checked="" type="checkbox"/> Pick Up Only |                                    |  |

| Container & Price Information |                        |
|-------------------------------|------------------------|
| Container Size: <u>40-CT</u>  | Container Price: _____ |
| Weight Limit (in Tons): _____ | \$ per Ton Over: _____ |

| Type of Waste                                    | Comments   |
|--------------------------------------------------|------------|
| <input type="checkbox"/> Commercial Refuse       | Concrete   |
| <input checked="" type="checkbox"/> Wood/Pallets | Dirt       |
| <input checked="" type="checkbox"/> Demolition   | Bricks     |
| <input type="checkbox"/> Concrete & Dirt         | Tires      |
|                                                  | Mattresses |

Driver: Delivery

Truck: \_\_\_\_\_

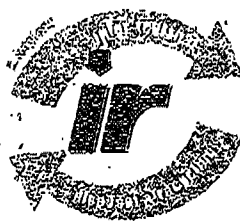
Box #: \_\_\_\_\_

Pick Up: 7-14-14Truck: Pt 52Box #: 273918

Customer Signature: \_\_\_\_\_

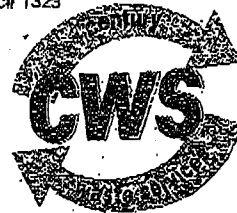
See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any charges for over the weight limit containers. Prices and limitations spelled out above.



# 71022

Bic# 1323


**Commercial • Industrial • Residential  
Container Service 1- 40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603  
Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Customer Name USAAddress 500 MidwayCity BRICK

County \_\_\_\_\_

Phone: \_\_\_\_\_

| Quantity | Size Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
| 1        | 30       | Open top roll-off   |           |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

| Delivery & Pick Up Information |                                                                                                                                                                                                       |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Delivery Date: <u>7-14-14</u>  | <input type="checkbox"/> Pick Up & Return <input type="checkbox"/> Delivery<br><input type="checkbox"/> Switch <input type="checkbox"/> Wait/load<br><input checked="" type="checkbox"/> Pick Up Only |
| Pick Up Date: _____            |                                                                                                                                                                                                       |

| Container & Price Information |                        |
|-------------------------------|------------------------|
| Container Size: <u>30</u>     | Container Price: _____ |
| Weight Limit (in Tons): _____ | \$ per Ton Over: _____ |

| Type of Waste                              | Comments           |
|--------------------------------------------|--------------------|
| <input type="checkbox"/> Commercial Refuse | <b>NO</b> Concrete |
| <input type="checkbox"/> Wood/Pallets      | Dirt               |
| <input type="checkbox"/> Demolition        | Bricks             |
| <input type="checkbox"/> Concrete & Dirt   | Tires              |
|                                            | Mattresses         |

Driver: Delivery: \_\_\_\_\_

Truck: \_\_\_\_\_

Box #: \_\_\_\_\_

Pick Up: VICTORTruck: 67Box #: 2436Customer Signature: [Signature]

See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.



# 71145

Bic# 1329

**Commercial • Industrial • Residential****Container Service 1-40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date 7-24-14Customer Name U.S.A.Address MIDSTREAM RD.City BRICKTOWN, NJCounty OCEN.

Phone: \_\_\_\_\_

| Quantity | Size Yds  | Description         | Total Yds |
|----------|-----------|---------------------|-----------|
| <u>1</u> | <u>30</u> | Open top roll-off   | <u>30</u> |
|          |           | Compactor           |           |
|          |           | Extra Yards - Loose |           |

| Delivery & Pick Up Information |                                                                                                                                                                                                                  |
|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Delivery Date: <u>7-24</u>     | <input checked="" type="checkbox"/> Pick Up & Return <input type="checkbox"/> Delivery<br><input checked="" type="checkbox"/> Switch <input type="checkbox"/> Wait/load<br><input type="checkbox"/> Pick Up Only |
| Pick Up Date: <u>7-24</u>      |                                                                                                                                                                                                                  |

| Container & Price Information |                        |
|-------------------------------|------------------------|
| Container Size: <u>30-OT</u>  | Container Price: _____ |
| Weight Limit (in Tons): _____ | \$ per Ton Over: _____ |

| Type of Waste                                  | Comments           |
|------------------------------------------------|--------------------|
| <input type="checkbox"/> Commercial Refuse     | <b>NO</b> Concrete |
| <input type="checkbox"/> Wood/Pallets          | Dirt               |
| <input checked="" type="checkbox"/> Demolition | Bricks             |
| <input type="checkbox"/> Concrete & Dirt       | Tires              |
|                                                | Mattresses         |

|                    |                      |                     |
|--------------------|----------------------|---------------------|
| Driver: <u>RPL</u> | Truck: <u>PTT 52</u> | Box # <u>243687</u> |
| Pick Up: _____     | Truck: _____         | Box # <u>243718</u> |

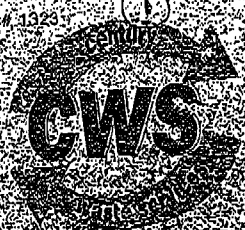
Customer Signature: [Signature] See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.

# 71145



**Commercial • Industrial • Residential**  
**Container Service 1-40 yards**  
 Solid & Hazardous Waste Removal  
 Recycling Service  
 Clean-out Service (will provide labor)  
 Free Estimates • 24 hour service



621 David Avenue Elizabeth, NJ 07201 Phone: 908-558-9540 • 973-824-3603  
 Fax: 908-558-9513 • E-mail: [interregional@aol.com](mailto:interregional@aol.com)

Date: 2/13/15

Customer Name: PHILIP J. GILBERT

Address: 1000 W. 10th St.

City: ELIZABETH, NJ

County: CLACKAMAS Phone: 908-558-9540

| Quantity | Size/Yds | Description         | Weight (lbs) |
|----------|----------|---------------------|--------------|
| 1        | 40       | Open top roll-off   |              |
|          |          | Compactor           |              |
|          |          | Extra Yards - Loose |              |

Delivery & Pick-up Information

☐ Delivery ☐ Pick-up & Return ☐ Delivery  
☐ Pick-up ☐ Return ☐ Delivery  
☐ Pick-up Only

Container & Price Information

Container Size: 40 Container Price: 1200  
 Weight Limit (in tons): 15 Tons

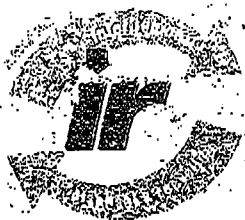
| Type of Waste                                       | Comments   |
|-----------------------------------------------------|------------|
| <input checked="" type="checkbox"/> Commercial Rem. | Concrete   |
| <input type="checkbox"/> Wood/Debris                | Dirt       |
| <input type="checkbox"/> Demolition                 | Bricks     |
| <input type="checkbox"/> Concrete & Dirt            | Tires      |
|                                                     | Mattresses |

Delivery: 2/13/15 Time: 10:00 AM

Pick-up: 2/13/15 Time: 12:00 PM

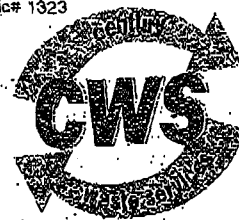
Customer Signature: [Signature]

By supplying Inter Regional Company with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any charges for over the weight limit, containers, prices and limitations spelled out above.



# 71048  
 Commercial • Industrial • Residential  
 Container Service 1- 40 yards  
 • Solid & Hazardous Waste Removal  
 • Recycling Services  
 • Clean out Service (will provide labor)  
 • Free Estimates - 24-hour service

Bic# 1323



623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Date 7.22.2014  
 Customer Name USA  
 Address 500 MIASTRINO  
 City BRICK  
 County \_\_\_\_\_ Phone: \_\_\_\_\_

| Quantity | Size-Yds | Description                       | Total Yds |
|----------|----------|-----------------------------------|-----------|
| 1        | 40       | Open top roll-off <u>delivery</u> |           |
| 1        | 30       | Compactor <u>11' P/U</u>          |           |
|          |          | Extra Yards - Loose               |           |

| Delivery & Pick Up Information  |                                            |                                    |  |
|---------------------------------|--------------------------------------------|------------------------------------|--|
| Delivery Date: <u>7.22.2014</u> | <input type="checkbox"/> Pick Up & Return  | <input type="checkbox"/> Delivery  |  |
| Pick Up Date: <u>7.22.2014</u>  | <input checked="" type="checkbox"/> Switch | <input type="checkbox"/> Wait/load |  |
|                                 | <input type="checkbox"/> Pick Up Only      |                                    |  |

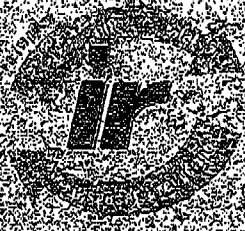
| Container & Price Information |                        |
|-------------------------------|------------------------|
| Container Size: <u>40</u>     | Container Price: _____ |
| Weight Limit (in Tons): _____ | \$ per Ton Over: _____ |

| Type of Waste                                         | Comments           |
|-------------------------------------------------------|--------------------|
| <input checked="" type="checkbox"/> Commercial Refuse | <b>NO</b> Concrete |
| <input type="checkbox"/> Wood/Pallets                 | Dirt               |
| <input type="checkbox"/> Demolition                   | Bricks             |
| <input type="checkbox"/> Concrete & Dirt              | Tires              |
|                                                       | Mattresses         |

Driver: Delivery VICTOR NY Truck 67 Box # \_\_\_\_\_  
 Pick Up: VICTOR NY Truck 67 Box # 243798  
 Customer Signature: Pete P. P. P. See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.

# 71048



**Commercial • Industrial • Residential**

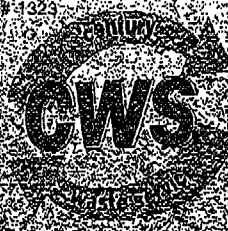
**Container Service 1 - 40 yards**

**Solid & Hazardous Waste Removal**

**Recycling Services**

**Clean out Service (will provide labor)**

**Free Estimates • 24-hour service**



623 Doyd Avenue Elizabeth NJ 07201 Phone 908 558 9540 • 973 824 3603  
Fax 908 558 9513 E-mail: inter-regional@aol.com

Customer Name: Inter Regional

Address: 1000 1st Ave

City: Elizabeth

County: Union Phone: 908 558 9540

| Quantity | Size Yds | Description         | Weight   | Material |
|----------|----------|---------------------|----------|----------|
| 1        | 10       | Open top roll-off   | 5000 lbs | Concrete |
| 1        | 10       | Compactor           | 5000 lbs | Concrete |
|          |          | Extra Yards - Loose |          |          |

Delivery & Pick Up Information:

Delivery Date: 2/13/15 ☒ Pick Up & Return ☒ Delivery

Pick Up Date: 2/13/15 ☒ Pick Up ☒ Delivery

Container & Price Information:

Container Size: 10 Container Price: 1000

Weight Limit (in tons): 5 Price per Ton: 200

Material Type:

☒ Commercial Refuse

☒ Wood/Pallets

☒ Demolition

☒ Concrete & Dirt

☐ Concrete

☐ Dirt

☐ Bricks

☐ Tiles

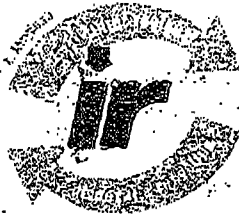
☐ Mattresses

Driver's Delivery: Inter Regional

Driver's Name: Inter Regional

Signature: Inter Regional

By supplying Inter Regional with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged to customer's credit card including any charges for over the weight limit containers. Prices and limitations spelled out above.



#2 # 63057

Bic# 1323

**Commercial • Industrial • Residential****Container Service 1- 40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Customer Name

USA

Date

6/30/14

Address

500 Mid Stream Road

City

Brick Township

County

NJ

Phone:

| Quantity | Size Yds | Description                     | Total Yds |
|----------|----------|---------------------------------|-----------|
|          | 30       | Open top roll-off Unit For Load | 30        |
|          |          | Compactor From 12:1-20          |           |
|          |          | Extra Yards - Loose             |           |

**Delivery & Pick Up Information**

Delivery Date:

6/30/14

☐ Pick Up & Return☒ Switch☐ Pick Up Only☒ Delivery☒ Wait/Load

Pick Up Date:

6/30/14

**Container & Price Information**

Container Size:

Container Price:

Weight Limit (in Tons):

\$ per Ton Over:

| Type of Waste                              | Comments   |
|--------------------------------------------|------------|
| <input type="checkbox"/> Commercial Refuse | Concrete   |
| <input type="checkbox"/> Wood/Pallets      | Dirt       |
| <input type="checkbox"/> Demolition        | Bricks     |
| <input type="checkbox"/> Concrete & Dirt   | Tires      |
|                                            | Mattresses |

NO

Driver: Delivery:

Stanford

Truck:

84

Box #

243

Pick Up:

W. E. H.

Truck:

Box #

243803

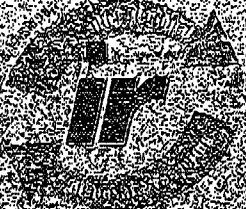
Customer Signature:

See reverse side for Terms and Conditions

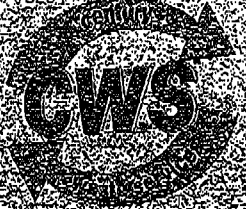
By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.

# 63057

Bid# 1323



**Commercial • Industrial • Residential**  
**Container Service 1-40 yards**  
 • Solid & Hazardous Waste Removal  
 • Recycling Services  
 • Clean out services (will provide labor)  
 • Free Estimates • 24 hour service



623 Dowd Avenue Elizabeth NJ 07201 Phone: 908-558-9540 • 978-273-6003  
 Fax: 908-558-9513 Email: interregional@aol.com

Customer Name: USA Date: 2/11/15

Address: 200 Mid Stream Road

City: Brick Township

County: N.J. Phone: \_\_\_\_\_

| Quantity | Unit | Description         | Unit Price | Total Price |
|----------|------|---------------------|------------|-------------|
| 1        | Yard | Open top roll off   |            |             |
|          |      | Comp. 000           |            |             |
|          |      | Extra Yards - Loose |            |             |

| Delivery & Pick Up Information |                                                                                              |
|--------------------------------|----------------------------------------------------------------------------------------------|
| Delivery Date: _____           | <input checked="" type="checkbox"/> Pick Up & Comp. <input checked="" type="checkbox"/> Drop |
| Pick Up Date: _____            | <input checked="" type="checkbox"/> Pick Up <input checked="" type="checkbox"/> Wait/Load    |

| Container & Content Information |                        |
|---------------------------------|------------------------|
| Container Size: _____           | Container Price: _____ |
| Weight Limit (pounds): _____    | Pick Up Date: _____    |

| Material Type                                       | Amount             |
|-----------------------------------------------------|--------------------|
| <input checked="" type="checkbox"/> Commercial Rem. | <b>NO</b> Concrete |
| <input checked="" type="checkbox"/> Wood/Pallets    | Dir                |
| <input checked="" type="checkbox"/> Demolition      | Brick              |
| <input checked="" type="checkbox"/> Concrete & Dirt | ires               |
|                                                     | Mattresses         |

Drop & Deliver: 2/11/15 Pick Up: 2/11/15

Drop & Pick Up: 2/11/15 Pick Up: 2/11/15

Customer Signature: \_\_\_\_\_

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged to customer's credit card including any charges for over the weight limit containers, prices and limitations spelled out above.

# 63038 NID  
VIC.

Box 1323



## Commercial • Industrial • Residential

## Container Service 1-40 yards

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service



623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Customer Name

Address

City

County

Phone

| Quantity | Size-Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
| 1        | 30       | Open top roll-off   |           |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

## Delivery &amp; Pick Up Information

Delivery Date

☐ Pick Up & Return☐ Delivery

Pick Up Date

☒ Switch☐ Wait/Load☐ Pick Up Only

## Container &amp; Price Information

Container Size:

Container Price:

Weight Limit (in Tons):

\$ per Ton Over:

| Type of Waste                              | Comments   |
|--------------------------------------------|------------|
| <input type="checkbox"/> Commercial Refuse | Concrete   |
| <input type="checkbox"/> Wood/Pallets      | Dirt       |
| <input type="checkbox"/> Demolition        | Bricks     |
| <input type="checkbox"/> Concrete & Dirt   | Tires      |
|                                            | Mattresses |

Driver: Delivery:

Truck:

Box #

Pick Up:

Truck:

Box #

Customer Signature:

See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any charges for over the weight limit containers. Prices and limitations spelled out above.



# 62920

Bic# 1323


**Commercial • Industrial • Residential  
Container Service 1- 40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: Inter-regional@aol.com

Date

6/3/14

Customer Name

USA

Address

500 Midstream Road

City

Brick township

County

NJ

Phone:

| Quantity | Size-Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
|          | 30       | Open top roll-off   | 30        |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

## Delivery &amp; Pick Up Information

Delivery Date:

☐ Pick Up & Return☐ Delivery☒ Switch☐ Wait/load

Pick Up Date:

☐ Pick Up Only

## Container &amp; Price Information

Container Size:

Container Price:

Weight Limit (in Tons):

\$ per Ton Over:

| Type of Waste                              | Comments   |
|--------------------------------------------|------------|
| <input type="checkbox"/> Commercial Refuse | Concrete   |
| <input type="checkbox"/> Wood/Pallets      | Dirt       |
| <input type="checkbox"/> Demolition        | Bricks     |
| <input type="checkbox"/> Concrete & Dirt   | Tires      |
|                                            | Mattresses |

Driver: Delivery:

Truck:

Box #:

Pick Up:

Truck:

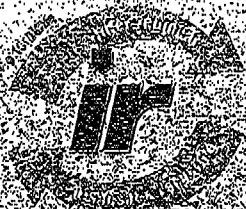
Box #:

Customer Signature:

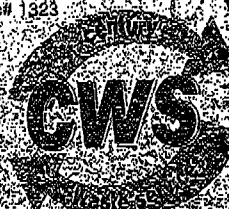
See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.

# 62920 ① Bid# 1323



**Commercial • Industrial • Residential**  
**Container Service 1-40 yards**  
 • Solid & Hazardous Waste Removal  
 • Recycling Service  
 • Clean-out Service (will provide labor)  
 • Free Estimates • 24 Hour service



623 Dowd Avenue Elizabeth, NJ 07201 • Phone: 908-558-9540 • 973-824-3603  
 Fax: 908-558-9513 • E-mail: inter-regional@aol.com

Date: 7/13/11

Customer Name: USA

Address: 500 Madison Road

City: Brick Township

County: NJ Phone: \_\_\_\_\_

| Quantity | Size Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
|          |          | Open top roll off   |           |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

Delivery & Pick Up Information

Delivery Date: \_\_\_\_\_ ☐ Pick Up & Return ☐ Delivery ☐ ☐ Swap ☐ Wait/Load

Pick Up Date: \_\_\_\_\_ ☐ Pick Up Only

Container & Price Information

Container Size: \_\_\_\_\_ Container Price: \_\_\_\_\_

Weight Limit (in tons): \_\_\_\_\_ Per Ton Charge: \_\_\_\_\_

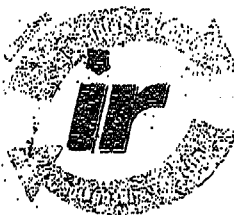
| Type of Waste                              | Comments             |
|--------------------------------------------|----------------------|
| <input type="checkbox"/> Commercial Refuse | <b>NO Concrete</b>   |
| <input type="checkbox"/> Wood/Pallets      | <b>NO Dirt</b>       |
| <input type="checkbox"/> Demolition        | <b>NO Bricks</b>     |
| <input type="checkbox"/> Concrete & Dirt   | <b>NO Tires</b>      |
|                                            | <b>NO Mattresses</b> |

Driver: \_\_\_\_\_ Delivery: \_\_\_\_\_ Truck: \_\_\_\_\_ Box: \_\_\_\_\_

Pick Up: \_\_\_\_\_ Truck: \_\_\_\_\_ Box: \_\_\_\_\_

Customer Signature: \_\_\_\_\_

By supplying Inter-Regional/Container with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any charges for overweight unit containers. Prices and limitations spelled out above.



# 63032

Bic# 2323


**Commercial • Industrial • Residential  
Container Service 1- 40 yards**

- Solid & Hazardous Waste Removal
- Recycling Services
- Clean out Service (will provide labor)
- Free Estimates - 24 hour service

623 Dowd Avenue Elizabeth NJ 07201 • Phone: 908.558.9540 • 973.824.3603

Fax: 908.558.9513 • E-mail: inter-regional@aol.com

Customer Name

Address

City

County

Phone:

| Quantity | Size-Yds | Description         | Total Yds |
|----------|----------|---------------------|-----------|
| 1        | 30       | Open top roll-off   |           |
|          |          | Compactor           |           |
|          |          | Extra Yards - Loose |           |

## Delivery &amp; Pick Up Information

Delivery Date: 6/30/14 ☐ Pick Up & Return ☐ Delivery  
☒ Switch ☐ Wait/load  
 Pick Up Date: 6/30/14 ☐ Pick Up Only

## Container &amp; Price Information

Container Size: \_\_\_\_\_ Container Price: \_\_\_\_\_  
 Weight Limit (in Tons): \_\_\_\_\_ \$ per Ton Over: \_\_\_\_\_

| Type of Waste                              | Comments           |
|--------------------------------------------|--------------------|
| <input type="checkbox"/> Commercial Refuse | <b>NO</b> Concrete |
| <input type="checkbox"/> Wood/Pallets      | Dirt               |
| <input type="checkbox"/> Demolition        | Bricks             |
| <input type="checkbox"/> Concrete & Dirt   | Tires              |
|                                            | Mattresses         |

Driver: Delivery: [Signature] Truck: [Signature] Box #:

Pick Up: \_\_\_\_\_ Truck: \_\_\_\_\_ Box #:

Customer Signature: [Signature]

See reverse side for Terms and Conditions

By supplying Inter-Regional/Century with credit card information and by executing this agreement, customer hereby agrees to have all charges associated with waste removal charged on customer's credit card, including any changes for over the weight limit containers. Prices and limitations spelled out above.

**Tremco Incorporated**

3735 Green Road • Beachwood, Ohio 44122 • 216-292-5000

**TREMCO**  
ROOFING & BUILDING MAINTENANCE

Ed Broderick  
Senior Field Advisor

Voicemail: 800-851-4110  
Cell: 609-709-1571  
E-mail: [ebroderick@tremcoinc.com](mailto:ebroderick@tremcoinc.com)

July 16, 2015

USA General Contracting  
Mr. Greg Serevetas  
980 Dehart Place  
Elizabeth, New Jersey 07202

**RE: Brick Midstreams School Roof**

Dear Mr. Serevetas:

Please be advised that Tremco has issued a 20 year roof warranty on the roof your company installed last summer. Based on the NRCA standard for ponding water, which is 48 hours in ambient temperatures the ponding water your code inspector is referring to should not be an issue. If you have any questions or need any additional information please feel free to contact me.

Respectfully,



Ed Broderick  
Senior Field Advisor  
Tremco Roofing & Building Maintenance