

BLOCK 701-12
RECEIVED

LOT 1

ADDRESS (SITE) Chambers Bridge Rd

PERMIT NO. 1423-91



CONSTRUCTION PERMIT APPLICATION

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

BUILDING

1. Proposed Work-site at: DARKWOOD PARK DRINK

2. Name of Owner in Fee: MAT LEWIS Tel. ()
Address CHAMBERS BRIDGE RD PARK
street municipality zip code

3. Ownership in Fee: Public ☒ Private ☐

4. Principal Contractor: ROB & SON CO. Tel. () 4778507
Address _____

License No. OR, if new home, Builder Reg. No. 222903792 Exp. Date _____

Federal Emp. No. _____ Social Security No. _____

5. Architect or Engineer _____ Tel. () _____
Address _____

6. Responsible Person In Charge of Work ROB MULLEN Tel. () 4778507

V. FEE SUMMARY (for office use only)		Update	Update
1. Building	\$		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other <u>Signs</u>	<u>123.00</u>		
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee			
10. Subtotal	\$		
11. Cert. of Occupancy	<u>20</u>		
12. Other			
13. TOTAL	\$ <u>143.00</u>		

VI. BUILDING/SITE CHARACTERISTICS	(office use only)
1. Number of Stories	
2. Height of Structure	ft.
3. Area—Largest Floor	sq. ft.
4. Building Area—All Floors	sq. ft.
5. Volume of Structure	cu. ft.
6. Construction Classification	
7. Total Land Area Disturbed	sq. ft.
8. Flood Hazard Zone	
9. Base Flood Elevation	ft.
10. Wetlands yes _____ sq. ft.	
no _____	
11. Fire Grading	
12. Max. Live Load	
13. Max. Occupancy Load	

II. PROPOSED WORK	Est. Cost
1. ☐ Minor Work (single trade)	
2. ☐ Small Job (\$5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS	<u>2500.</u>

Sign

OPTIONAL (for office use only)							
Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
			<u>7/15/91</u>	<u>RS</u>			

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks	3. ☐ Pressure Vessels	6. ☐ Hazardous Uses/Places of Assembly
2. ☐ High Pressure Boilers	4. ☐ Refrigeration Systems	7. ☐ Sprinklers
	5. ☐ Cross-Connections/Backflow Preventers	8. ☐ Smoke Control Systems in Open Wells
		9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)

2. ☐ Multi-Family (R-2)

3. ☐ Two-Family (R-3) BOCA

4. ☐ Two-Family (R-4) CABO

5. ☐ One-Family (R-3) BOCA

6. ☐ One-Family (R-4) CABO

No of dwelling units: _____

Before Construction _____

After Construction _____

Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use: skateboard

2. Use Group: A-3

3. Change in Use Group. Indicate Former: _____

LDS BR 10206823

20K

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

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

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

I further certify that I will perform the following work:

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

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

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

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

Signature [Signature] Date [Signature]

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

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

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

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

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

() Check if contractor.

Agent Name Bob + Son Co.

Address 451 JACKSON AVE BRICK NJ

Telephone () 477 8507

Signature [Signature] Date 7-2-91

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☒ Planning Board	SPX								
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☒ Other zoning	SK	7/2/91	signs						
☐									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	_____
Electrical _____	Barrier Free _____	_____
Plumbing _____	Flood Hazard _____	_____
Fire Protection _____	As Built Elevation Cert. _____	_____
Mechanical _____	Other _____	_____

X. CERTIFICATES ISSUED (office use only)	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____
☐ Temporary Certificate of Occupancy	No. _____
☐ Continued Certificate of Occupancy	No. _____
☐ Certificate of Occupancy	No. _____
☐ Certificate of Approval	No. _____
☐ None	No. _____



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

7/29/91

1423-91

IDENTIFICATION Block

70112

Lot

1

Work Site Location

Parkwood Plaza

Contractor

Bob & Son Co.

Address

0004

Owner in Fee

Dennis

Address

Neeme Chambers Rd

Tele. ()

BLUCK

0.00

Lic. No. or Bldrs. Reg. No.

Exp. Date

701.12 #

Federal Emp. No.

LOT

0.00

or Social Security No.

1 #

is hereby granted permission to perform the following work:

☒ BUILDING☐ PLUMBING☐ OTHER☐ ELECTRICAL☐ FIRE PROTECTION

DESCRIPTION OF WORK:

Sign

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 \$

2500

D. A. Ciarro

PAYMENTS (Office Use Only)	123.00
Building	TOTAL 143.00
Plumbing	CASH 143.00
Electrical	CHANGE 0.00
Fire Protection	14:47
Other	5230000
Other	
DCA Training Fee	
Cert. of Occ.	21. -
Other	
Total	143. -
Check No.	
Cash	X
Collected By:	T. M.

U.C.C. Form F-170A

CONSTRUCTION-OFFICIAL

(see reverse side)

1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT

REQUIRED INSPECTIONS

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

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

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode;
2. Foundations and all walls up to grade level prior to back filling;
3. All structural framing and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.
- ☐ A complete copy of approved plans must be kept on the job site.

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



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued 7/29/201
Control #
Permit # 1423-91

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

Block 10F12 Lot 1
Work Site Location MARKWOOD BLVD
BLVD SUMMITTOWN PARK
Owner in Fee MAT LEWIS
Address _____
Tele. () _____
Contractor BOB & SON BLDG CO
Address 421 JACKSON BLVD
BRIDGE MT
Tele. () 477-8307
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 222903762 or Social Security No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)		
				Type:	Failure	Failure	Approval	Initial
☐ No Plans Req.								
☒ All		3/12/14	AK	Roofing				
☐ Footing				Foundation				
☐ Foundation				Slab				
☐ Frame				Frame				
☐ Other				Insulation				
Joint Plan Review Required:				Finishes:				
☐ Elec.	☐ Plumb.	☒ Fire		Energy				
SUBCODE APPROVAL				Mechanical				
☐ CO	☐ CCO	☒ CA		TCO				
Date:		3/12/14		Other				
Approved By:		AK		Final				

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	1. New Bldg. \$
No. of Stories			2. Alteration \$
Height of Structure			3. Total (1+2) \$
Area—Largest Floor			
Total Bldg. Area/All Floors			
Volume of Structure			
Total Land Area Disturbed			

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

② SIGNS SPEC'S MISMATCHED

TYPE OF WORK:

- | | | | |
|-----|--------------|-----|--------------------|
| [] | New Building | [] | Demolition |
| [] | Addition | [] | Miscellaneous |
| [] | Alteration | [] | Fence |
| [] | Roofing | [] | Sign |
| [] | Siding | [] | Pool |
| [] | Other | [] | Elevator |
| | | [] | Asbestos Abatement |
-
- | | |
|-----------|---------|
| 25436 | Height |
| + 12 | Sq. Ft. |
| <hr/> | |
| 123 sq ft | |

(Office Use Only)

Administrative Surcharge	\$	
Paid [] Check #	\$	
Minimum Fee	\$	
Collected by: TOTAL FEE	\$	



BUILDING
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

7/29/90
1423-91

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

Block 7012 Lot 1
Work Site Location WILKINSON BLVD
Owner in Fee WAT LENDS
Address _____
Tele. () _____
Contractor BOB & SON SINC CO
Address 401 JACKSON RD BULLOCK AL
Tele. () 477-8507
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 222903792 or Social Security No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
			Type:	Failure	Approval
☒ No Plans Req.			Footings		
☒ All			Foundation		
☐ Footing			Slab		
☐ Foundation			Frame		
☐ Frame			Insulation		
☐ Other			Finishes:		
Joint Plan Review Required:			Energy		
☐ Elec. ☐ Plumb. ☐ Fire			Mechanical		
SUBCODE APPROVAL			TCO		
☐ CO ☐ CCO ☐ CA			Other		
Date: _____			Final		
Approved By: _____					

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ _____

C. CERTIFICATION IN LIEU OF OATH

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

Signature [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

(2) SIGN'S SPEC'S WITHNOTED

(Office Use Only)

FEE

\$ _____

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Alteration

☐ Roofing

☐ Siding

☐ Other _____

☐ Demolition

☐ Miscellaneous

☐ Fence

☐ Sign

☐ Pool

☐ Elevator

☐ Asbestos Abatement

☐ Other _____

Administrative Surcharge

Minimum Fee

Collected by: _____ TOTAL FEE

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

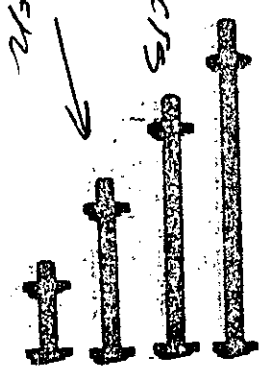
U.C.C. Form F-110A

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

IMPACT ZONE - INSTALLATION
24" CHANNEL LETTERS

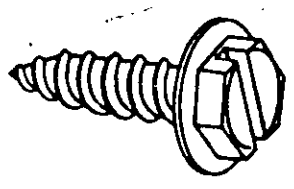
QUICK CONNECTS
4-6" AS
REQUIRED
2 PER LETTER



210 IN SCREWS

1/2" - 3/4" - 1" #8
AS REQUIRED

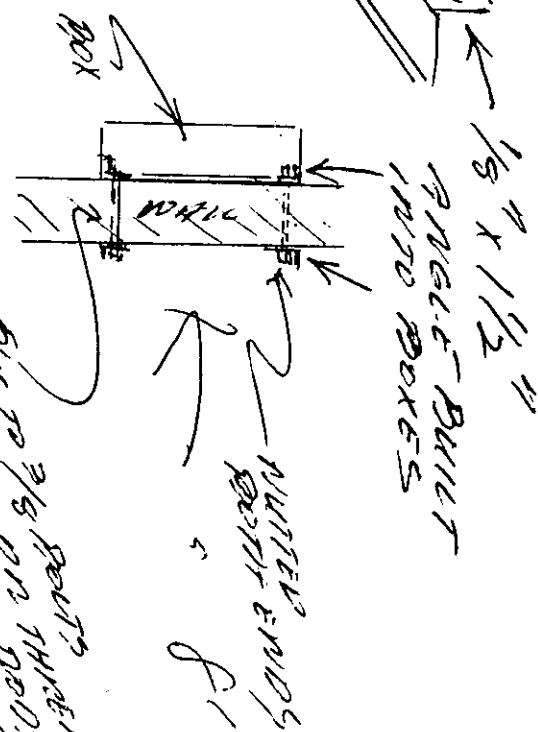
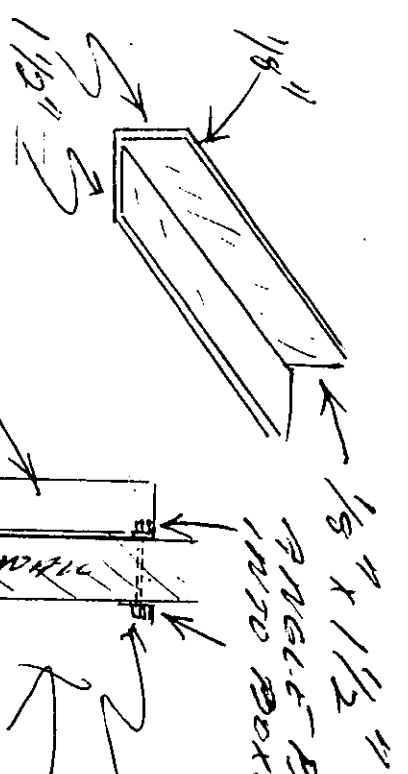
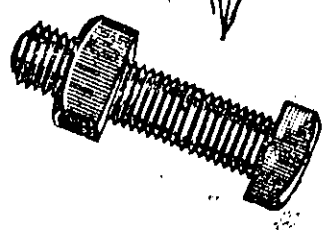
57010 PER
24" LETTER



12 FT X 12" BOX & 25' X 3' BOX
INSTALLATION

5/16" & 3/8" BOLTS

DOUBLE NUTTED
THROUGH ANGLE
IN BOX THROUGH
FRONT.



5/16 TO 3/8 PER 1/2" ANGLE
PER 1/2"

BOB & SON CO.
BRICK, NJ
477-8507

1/15/91
[Signature]

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Daniel F. Newman, Mayor

Members of Township Council

Mary Anne L. Butler, Council President

Charles E. Anderson

Patrick L. Bottazzi

Edmund H. Hibbard

Joseph C. Scarpelli

Warren H. Wolf

David W. Wolfe



Division of Inspections

A.J. Cierzo,
Construction Official

(201) 477-3000, ext. 26

CHECK LIST

RE: Block 701-12 Lot 1 Address Chambers Bridge Rd.

Please be advised that your application for a construction permit for the subject property has been rejected due to deficiencies in the following areas:

Administrative

Zoning

Engineering

Building

Plumbing

Electric

Fire

*Drawings by Eng or Arch.
(SEALED)*

See attached review check list(s) for details as to the reason your submission has been rejected. Please revise your application accordingly and resubmit to this office.

There is a 20 working day time limit for review of all documents submitted with a construction permit application. This time limit ceases in the event of a rejection of any type, and starts over again when the rejection(s) have been corrected and the application resubmitted.

Arthur J. Cierzo,
Construction Official

Date _____

