

BLOCK 848 LOT 20 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 13-1934



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 1723 W. Princeton Ave., Brick, NJ 08724

2. Name of Owner in Fee: Michael Bailey

Tel. () e-mail

Address 1723 W. Princeton Ave., Brick, NJ 08724

street municipality zip code

3. Ownership in Fee: Public Private ☒

4. Principal Contractor: DJ Niblett Corp. Tel. (732) 962-0117

Address 2435 Hwy 34, Suite B, Unit 192 e-mail

Manasquan, NJ 08736

License No. OR, if new home, Builder Reg. No. 13VHD6192500 Exp. Date 12/31/13

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

Federal Emp. ID No. FAX: ()

5. Architect or Engineer Contact

Address e-mail

Tel. () FAX: ()

6. Responsible Person in Charge once Work has Begun Dana Niblett

Tel. (732) 962-0117 FAX: ()

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>192</u>	☒	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review			
8. Subtotal	\$ <u>11</u>	☒	
9. State Permit Surcharge Fee			
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>203</u>		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

1. Number of Stories		
2. Height of Structure		ft.
3. Area — Largest Floor		sq. ft.
4. New Building Area		sq. ft.
5. Volume of New Structure		cu. ft.
6. Max. Live Load		
7. Max. Occupancy Load		
8. If Industrialized Building: State Approved HUD		
9. Total Land Area Disturbed		sq. ft.
10. Flood Hazard Zone		
11. Base Flood Elevation		ft.
12. Wetlands yes no		

IIa. PROPOSED WORK

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

IIb. SUBCODES

(Check all that apply)

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

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
						Approval	Rejection

TOTAL COST

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

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

B. NON-RESIDENTIAL (primary use)

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

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

- D. Construct. Classification: Present
- Proposed

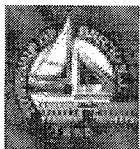
III. PLAN REVIEW (optional)

DO YOU WANT:

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 06/26/2013
Control Number C-13-002621
Permit Number 13-1934
Permit Issue Date 05/03/2013
Certificate Number 13-1934

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1723 W. PRINCETON AVE Brick Township, NJ Block: 848 Lot: 20 Qual: _____

Owner in Fee: BAILEY, MICHAEL P & SUZAN M

Owner Address: 1723 W PRINCETON AVE BRICK NJ 08724

Telephone: [REDACTED]

Contractor D J Niblett Corporation

Address 2435 Rt. 34 Ste. B Unit 192 Manasquan NJ 08736

Telephone: (732) 962-0117 Fax: _____

License Number or Builders Registration Number: 13vh06192500 Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: ROOF

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: _____



CONSTRUCTION PERMIT

Date Issued 5/3/2013
Control # C-13-002621
Permit # 13-1934

IDENTIFICATION Block: 848 Lot: 20 Qualifier _____
Work Site Location: 1723 W. PRINCETON AVE Brick Township, NJ Contractor D J Niblett Corporation
Address 2435 Rt. 34 Ste. B Unit 192 Manasquan NJ 08736
Owner in Fee BAILEY, MICHAEL P & SUZAN M
1723 W. PRINCETON AVE BRICK NJ 08724 Telephone: (732) 962-0117
Telephone: _____ Lic. No. or Bldrs. Reg. No. 13vh06192500
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:

ROOF

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 \$6,390

Construction Official _____

Date _____

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$192
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$11
CO Fee	
Other	\$0
Total	\$203
Check No.	1157
Cash	\$0
Credit	\$0
Collected By	Lisa Rose Tavalaccio

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 848 Lot 80 Qualification Code _____

Work Site Location 1723 W. Princeton Ave.

Owner in Fee: Michael Bailey

Tel. _____ e-mail _____

Address 1723 W. Princeton Ave. Brick, NJ 08724

Contractor: D J Niblett Corp. Tel. (732) 962-0117 Zip code 08724

Address 2435 Hwy 34 Suite 8 Unit 183 Tel. _____

Address Manasquan, NJ 08736 Exp. Date 12/31/13

Contractor License No. or Builder Registration No. 13VHD06192500

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

Federal Emp. ID No. _____ FAX: (_____) _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial INSPECTIONS Type: Failure Failure Approval Initial

☐ No Plans Required ☐ All ☐ Footings/Foundations ☐ Structural/Framework ☐ Exterior ☐ Interior

Joint Plan Review Required: ☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator ☐ Insulation ☐ Finishes -Base Layer ☐ Finishes -Final

SUBCODE APPROVAL for PERMIT Approved by: _____

SUBCODE APPROVAL for CERTIFICATE Approved by: _____

Date: _____

☐ CO ☐ CCO ☒ CA ☐ SA

Approved by: _____

Barrier-Free _____

TCO _____

Mechanical _____

Other _____

Final _____

Barrier-Free _____

Approved by: _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

Barrier-Free _____

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: Dana J. Niblett

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Tear off all layers of existing roofing. Repair sheathing on left rear roof. Re-roof entire roof.

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Rehabilitation

☒ Roofing

☐ Siding

☐ Fence _____

☐ Sign _____

☐ Pool _____

☐ Retaining Wall _____

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☐ Radon Remediation

☐ Other _____

☐ Demolition

Date Received

5/3/13

Control #

Date Issued

13-1934

Permit #

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

1 White = Inspector Copy

2 Canary = Office Copy

3 Pink = Office Copy

4 Gold = Applicant Copy

U.C.C. F110 (rev. 11/09)

1723 W. Princeton

Bailey Roof

COUNTY LANDFILL
STER, NJ 08759

13-1934

FACILITY ID: No. 1516B

Ticket No : 1524567

Date : 4/27/13

CASH

9580 lb In 10:54 am
6360 lb Out 11:44 am

3220 lb

1.610 tn

CASH

d Material

3

0.00 CU YDS

132

BULKY - DEMO WOOD

Location

BRICK TWP

Price/Unit

\$81.21

Balance

Total \$ \$130.75

Contingency: \$0.50/tn

Tax: \$3.00/tn

scrow: \$1.00/tn

th Dept: \$0.40/tn

OCLF Not Responsible For Damages Done At Landfill

Environmental Escrow Type 10: \$17.97/tn

Types 13, 22, 23, 25: \$23.19/tn

Post Closure Fund: \$ 0.62/tn

Host Community Fund: \$ 4.50/tn

Weigh Master: RT

TOWNSHIP OF BRICK

Debris form

Work Site Address: 1723 W. Princeton Ave., Brick, NJ 08724Block: 848 Lot: 20Contractor: D J Niblett CorpContractor's Address: 2435 Hwy 34, Suite B, Unit 192, Manasquan, NJType of Construction (minor, new home): Re-roof (new roof)

08736

Type of Debris (shingles, siding, wood, etc.): Roofing shingles, plywoodParty responsible for removal: ~~D J Niblett Corp~~ Big n' Little CartingDumpster size: 10 yardDestination of debris: Ocean County Landfill

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclable.

Generator's Certification: Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation.

Signature

Date

Print Name

NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

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

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

D J Niblett Corporation
Dana J. Niblett
2435 Highway 34 Suite B Unit 192
Manasquan NJ 08736

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

01/21/2013 TO 12/31/2013
VALID

13VH06192500
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder


ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
DIVISION OF CONSUMER AFFAIRS
HAS REGISTERED
D J Niblett Corporation
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE
01/21/2013 TO 12/31/2013
VALID

SIGNATURE

13VH06192500

License/Registration/Certificate #

ACTING DIRECTOR

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

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

PLEASE DETACH HERE

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

- C. ☐ I further certify that I will perform or supervise the following work:

C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical C.4. ☐ Plumbing

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

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

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

Signature _____ Date _____

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

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

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

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

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

☒ Check if contractor.

Agent Name D.J. Niblett Corp.
Address 2435 Hwy 34, Suite B, Unit 192
Manasquan, NJ 08736
Telephone (732) 962-0117
Signature Dana J. Niblett

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