BLOCK 702. LOT ~~2507~~ 5 ADDRESS (SITE) FORGE POND GOLF COURSE CHAMBERS BRIDGE RD PERMIT NO. 2536-94

[redacted]

CONSTRUCTION PERMIT APPLICATION

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

CALL BEFORE YOU DIG 1-800-272-1000 FOR UTILITY LOCATIONS.

I. IDENTIFICATION

1. Proposed Work-site at: FORGE POND GOLF COURSE CHAMBERS BRIDGE ROAD
2. Name of Owner in Fee: COUNTY OF OCEAN Tel. ( ) _____
   Address 101 HOOPER AVENUE (street) TOMS RIVER (municipality) _____ (zip code)
3. Ownership in Fee: Public X Private _____
4. Principal Contractor: BROCON PETROLEUM INC. Tel. (908) 442-4300
   Address 323 MAPLE STREET PERTH AMBOY, NJ 08861
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. 22-3018627 Social Security No. _____
5. Architect or Engineer KILLAM ASSOCIATES Tel. (201) 912-2442
   Address 27 BLEEKER ST. MILLBURN, NJ
6. Responsible Person in Charge of Work SCOTT KOHLER Tel. (908) 442-4300

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	75		
2. Electrical				
3. Plumbing				
4. Fire Protection		46		
5. Elevator Devices				
6. Subtotal	$	76		
7. Less 20% for State Plan Review				
8. Subtotal	$			
9. DCA Training Fee		8		
10. Subtotal	$			
11. Cert. of Occupancy		20		
12. Other				
13. TOTAL	$	103		

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. 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. Max. Live Load	
12. 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	10,000
6. ☐ Fire Protection	
7. ☐ Plumbing	
8. ☑ Electrical	5000
9. ☐ Elevator Devices	
10. ☐ Asbestos Abatement	
11. ☐ Demolition	
TOTAL COSTS	15,000

RECEIVED SEP 1 1994 DIV. OF INSPECTION

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
			9/7/94	RK			
			10/3/94	JK	10/4/94		JS
	9/6/94		ENA	RLO			

III. DO YOU WANT: (optional)

1 ☐ Partial Releases 2. ☐ Prototype Processing

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

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
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:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10207750

ZNA

U.C.C. Form F-100B

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature _____ Date _____

II. AGENT SECTION

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

I hereby certify the following as required by the 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 BROCON PETROLEUM INC.

Address 323 MAPLE STREET

PERTH AMBOY, NJ 08861

Telephone (908) 442-4300

Signature _____ Date 9/1/94

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date	COMMENTS
☒ Zoning Officer SK	alt.	9/1/94							IMPORTANT A.H.B. EXEMPT
☐ Planning Board									
☐ 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.									
☐									
☐									

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

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

X. CERTIFICATES ISSUED **(office use only)**

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 9-13-94
Control #
Permit # 2536-94

IDENTIFICATION Block 702 Lot 5

Work Site Location 331 Chambersbridge Rd. Contractor Brown Petro, Inc.

Address

Owner in Fee Ocean County

Address 101 Hooper Ave Tele. ( )

Toms River, NJ. Lic. No. or Bldrs. Reg. No. Exp. Date

Tele. ( ) Federal Emp. No.

or Social Security No.

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER

[ ] ELECTRICAL [ ] FIRE PROTECTION

DESCRIPTION OF WORK:

Upgrade 2500. Gal gas. tank
Remove & install dispenser
Bollards & Island

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 $ 15,000.

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

PAYMENTS (Office Use Only)	
Building	
Plumbing	
Electrical	
Fire Protection	
Other	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	
Check No.	
Cash	
Collected By:	

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

[redacted]

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 9-13-94
Control #
Permit # 2536-94

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

Block _____ Lot _____
Work Site Location FORGE POND GOLF COURSE
CHAMBERS BRIDGE RD BRICKTOWN
Owner in Fee COUNTY OF OCEAN
Address 101 HOOPER AVE
TOMS RIVER, NJ
Tele. (____) _____
Contractor BROCON PETROLEUM INC.
Address 323 MAPLE ST
PERTH AMBOY NJ 08861
Tele. (908) 442-4300
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 22-3012627 or Social Security No. _____

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

- UPGRADE 2,500 GAL. GASOLINE TANK
- REMOVE DISPENSER
- INSTALL DISPENSER, BOLLARDS & ISLAND

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

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

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (6' or over)
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement
- [x] Other UPGRADE 2,500 GAL UST
- [ ] Other _____

[ ] Demolition

(Office Use Only)
FEE
$ _____

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Alteration $ _____
3. Total (1+2) $ 10,000—

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ DCA TRAINING FEE $ _____
TOTAL FEE $ _____

U.C.C. Form F-1108 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # 2536-94

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

Block 702 Lot 4
Work Site Location FORGE POND COUNTY GOLF COURSE
Owner in Fee OCEAN COUNTY
Address Hooper Ave. Toms River N.J.
Tele. (908) 442-4300
Contractor BROCON PETROLEUM
Address 323 MAPLE STREET
PERTH AMBOY
Tele. (908) 442-4300
Lic. No. OEPE 1200189
Federal Emp. No. 223018627 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 1000.00 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved by:

SUBCODE APPROVAL:
[X] CO [ ] CCO [ ] CA
Date: 10/5/94
Approved by:

INSPECTIONS: Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other Kapler Recovery			10/4/94	

C. CERTIFICATION IN LIEU OF OATH

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

SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks	( ) Capacity ~~9600~~	Fuel ~~Gas~~
Combustible Liquid Storage Tanks	( ) Capacity	Fuel
L.P.G. Storage Tanks	( ) Capacity	Fuel
L.N.G. Storage Tanks	( ) Capacity	Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER Kapler Recovery Pump		~~46~~

Exempt

Administrative Surcharge $ 46
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-140B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

UNDERGROUND STORAGE TANK SYSTEM CLOSURE APPROVAL

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION AND ENERGY

DIVISION OF RESPONSIBLE PARTY SITE REMEDIATION
BUREAU OF APPLICABILITY AND COMPLIANCE
CN-028, TRENTON, NJ 08625-0028

TMS # C94-1185 **UST #** 0239736

FORGE POND GOLF COURSE
CHAMBERS BRIDGE ROAD
BRICKTOWN

OCEAN

RECEIVED
KULLAM ASSOC. CONSULTING ENGINEERS
27 BLEEKER ST. MILLBURN, NJ 0704
JUN 14 1994
REFER:
DATE SEEN:
RE: GA BACK TO:

THE ABOVE LISTED FACILITY IS HEREBY GRANTED APPROVAL TO PERFORM THE FOLLOWING ACTIVITY IN ACCORDANCE WITH N.J.A.C. 7:14b-1 et. seq:

REMOVAL OF: Piping run(s) associated with gasoline UST(s).

SITE ASSESSMENT: Soil Samples will be taken every fifteen (15) 15 feet along all appurtenant piping. Samples will be analyzed for VO+10 and lead (if leaded gasoline was used). Precision tests may be utilized in lieu of soil sampling if piping is orginal with no history of discharge.

ON-SITE MANAGER: DANIEL R. TODER **TELEPHONE:** 201-912-2408

EFFECTIVE DATE: 06/09/94

THIS FORM MUST BE DISPLAYED AT THE SITE DURING THE APPROVED ACTIVITY AND MUST BE MADE AVAILABLE FOR INSPECTIONS AT ALL TIMES.

Gregory Cunningham for
BARBARA MURRAY, CHIEF
BUREAU OF APPLICABILITY AND COMPLIANCE

STATE OF NEW JERSEY

DEPARTMENT OF ENVIRONMENTAL PROTECTION AND ENERGY

Certifies That

Brocon Petroleum Inc.
323 Maple Street
Perth Amboy, NJ 08861

having duly met the requirements of the

Underground Storage Tank Certification Program

N.J.S.A. 58:10A-24.1-8

is hereby approved to perform the following services:

INSTALLATION - ENTIRE UST SYSTEM
CLOSURE
SUBSURFACE EVALUATION

1200189
PERMANENT CERTIFICATION NUMBER

4/30/95
EXPIRATION DATE

COMMISSIONER, DEPARTMENT OF
ENVIRONMENTAL PROTECTION AND ENERGY

TO BE CONSPICUOUSLY DISPLAYED AT THE FACILITY.