

BLOCK 701.24 LOT 1 QUALIFICATION CODE _____ ADDRESS (SITE) 270 Chambersbridge PERMIT NO. 17-2348



CONSTRUCTION PERMIT APPLICATION

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

C-17-003070

I. IDENTIFICATION

1. Proposed Work Site at: 270 Chambersbridge Rd.
2. Name of Owner in Fee: Township of Birch
Tel. () e-mail asantos@tp.birch.nj.us
Address 401 Chambersbridge Rd.
3. Ownership in Fee: Public ☒ Private _____
4. Principal Contractor: Antonio Santos Tel. (732) 930-0301
Address Township of Birch e-mail _____
License No. OR, if new home, Builder Reg. No. 14391 Exp. Date 03/2018
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____ FAX: () _____
5. Architect or Engineer N/A Contact _____
Address _____ e-mail _____
Tel. () FAX: () _____
6. Responsible Person in Charge once Work has Begun
Tel. () A. SANTOS FAX: () 732 930-0301

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	
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 Approval	Rejection	Re-viewer

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
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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 7/18/2017
Control Number C-17-003070
Permit Number 17-2348
Permit Issue Date 7/12/2017
Certificate Number 17-2348

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 270 CHAMBERS BRIDGE RD. Brick Township, NJ Block: 701.29 Lot: 1 Qual: _____
Owner In Fee: TOWNSHIP OF BRICK
Owner Address: 401 CHAMBERSBRIDGE RD BRICK NJ 08723
Telephone: _____
Contractor ANTONIO SANTOS ELECTRICAL
Address 419 EDMONT DRIVE LOCH ARBOR NJ
Telephone: (732) 663-0757 Fax: _____
License Number or Builders Registration Number: 14391 Federal Emp. Number: 14-9981339
Home Warranty Number: _____
Type of Warranty Plan: ☐ State ☐ Private
Use Group: B Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: SERVICE - EMS STORAGE (UNIT #2)

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

Date Printed: 7/18/2017

U.C.C. F260 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1



ELECTRICAL SUBCODE **TECHNICAL SECTION**



DK# 338-354-131

732-930-0301

Date Received
Control #
Date Issued
Permit #
7/12/17
17-2348

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

Block 701.29 270 Chambersbridge Rd. OTS Storage
Work Site Location

Owner In Fee: Township of Brick

Tel. 401 Chambersbridge Rd Brick NJ 08723
Address

Contractor: ANTONIO'S SANITARY 732 930-0301
Address: 401 Chambersbridge Rd. @temp.brick-nj.us
Tel. 732 930-0301
e-mail

Contractor License No. 14391 Exp. Date 03-2018

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 200A Proposed 200A
Use Group Present

[] Pole/Pad # [] Temporary [] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work \$

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)	Initial
[] No Plans Required	Type:	Failure	Failure
[] Partial -Underslab Utilities Approved	Rough		
Date: Approved by:	Barrier-Free		
[] Electric Plans Approved	Trench		
Date: Approved by:	Temp. Serv.		
Joint Plan Review Required:	Constr. Serv.		
[] Bldg. [] Plumb. [] Fire [] Elev.	TCO		
SUBCODE APPROVAL for PERMIT	Other Service		
Date: Approved by:	Final		
SUBCODE APPROVAL for CERTIFICATE	Barrier-Free		
[] CO [] CCO	Temp. Cut-In-Card Date Issued		
Date: Approved by:	Final Cut-In-Card Date Issued		
Annual Pool Inspection			
Date of Grounding and Bonding Certification			

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here:

Print name here: ANTONIO'S SANITARY
[X] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Restore electrical service to tenant space (200/120/200 30 panel) existing
QTY. SIZE ITEMS

- Lighting Fixtures
- Receptacles
- Switches
- Detectors
- Light Poles
- Motors—Fract. HP
- Emergency & Exit Lights
- Communications Points
- Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

- Pool Permit/with UW Lights
- Storable Pool/Spa/Hot Tub
- KW Elec. Range/Receptacle
- KW Oven/Surface Unit
- KW Elec. Water Heater
- KW Elec. Dryer/Receptacle
- KW Dishwasher
- HP Garbage Disposal
- KW Central A/C Unit
- HP/KW Space Heater/Air Handler
- KW Baseboard Heat
- HP Motors 1/+ HP
- KW Transformer/Generator
- AMP Service
- AMP Subpanels
- AMP Motor Control Center
- KW Elec. Sign/Outline Light

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

* * * Communication Result Report (Jul. 18. 2017 2:25PM) * * *

13

Date/Time: Jul. 18. 2017 2:24PM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
0504 Memory TX	918889149140	P. 1	OK	

Reason for error

E. 1) Hang up or line fail
 E. 3) No answer
 E. 5) Exceeded max. E-mail size

E. 2) Busy
 E. 4) No facsimile connection
 E. 6) Destination does not support IP-Fax

Brick Township
 Building Department (732) 262-1030

MUNICIPALITY Brick Township

LOCATION 322 ROUTE 35 RD. UTILITY CO. _____

Brick Township, NJ BLK B-24 LOT 33

OWNER MONAGAS, MATTHEW J. OCCUPANT MONAGAS, MATTHEW J.

"Installation in the above premises has been inspected and
 is in accordance with N.E.C. and DCA requirements."

☒ FINAL ☐ TEMPORARY This approval void after _____ days

DESCRIPTION OF SERVICE 200 Amp

INSTALLED BY Armando Serrano LICENSE NO. J-6381

DATE 7/18/2017 PERMIT # 16-2348 INSPECTOR Armando Serrano

☒ FAXED IN 7/18/2017 Lic. No. 8458

U.C.A. Form 1000-1 (Rev. 1/01) 1. IDENTIFICATION 2. CARRY-OUT/REPAIR 3. WORK COMPLETION/NOTATION

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

07/12/2017

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

Antonio Santos

Address

401 Chambersburg Rd - South NJ 08721

Telephone

(732) 930-0301

Signature _____

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

Brick Township
Building Department (732) 262-1030



DRIVER # 338354131

MUNICIPALITY Brick Township

CUT-IN-CARD

LOCATION 522 ROUTE 35 NO.

UTILITY CO _____

Brick Township, NJ

BLK 9.24

LOT 33

OWNER MONAGAS, MATTHEW J

OCCUPANT MONAGAS, MATTHEW J

"Installation in the above premises has been inspected and
is in accordance with N.E.C. and DCA requirements."

☒ FINAL

☐ TEMPORARY

This approval void after _____ days

DESCRIPTION OF SERVICE 200 Amp

INSTALLED BY Antonio Santos

LICENSE NO 14391

DATE 7/18/2017

PERMIT # 16-2348

INSPECTOR Marcel Renson

☒ FAXED IN 7/18/2017

Lic. No: 6455

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR



CONSTRUCTION PERMIT

Date Issued 07/12/2017
Control # C-17-003070
Permit # 17-2348

IDENTIFICATION Block: 701.29 Lot: 1 Qualifier
Work Site Location: 270 CHAMBERS BRIDGE RD. Brick Township, NJ Contractor: ANTONIO SANTOS ELECTRICAL
Owner in Fee: TOWNSHIP OF BRICK Address: 419 EDMONT DRIVE LOCH ARBOR NJ
401 CHAMBERS BRIDGE RD BRICK NJ 08723 Telephone: (732) 663-0757
Telephone: _____ Lic. No. or Bldrs. Reg. No. 14391 14391 14391
Federal Employee No. 14-9981339

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:

SERVICE - EMS STORAGE (UNIT #2)

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

Daniel F. Newnham
Construction Official

7/12/17
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.