

Emergency



C-11-002940

V. FEE SUMMARY (for office use only)		Update	Update
1. Building	\$	50 ✓	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$	3	
9. State Permit Surcharge Fee			
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other		53	
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.	Construction Classification _____	_____
7.	Total Land Area Disturbed _____ sq. ft.	_____
8.	Flood Hazard Zone _____	_____
9.	Base Flood Elevation _____ ft.	_____
10.	Wetlands yes _____ no _____	_____
11.	Max. Live Load _____	_____
12.	Max. Occupancy Load _____	_____

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use:

2. Use Group:

3. Change in Use Group, Indicate Former:

4. No. of dwelling units: All Units ~~Income-~~ restricted

Before Construction		
After Construction		
Net Gain or Loss		

B. NON-RESIDENTIAL (primary use)

1. State Specific Use:

2. Use Group:

3. Change in Use Group, Indicate Former:

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

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks	4. ☐ Refrigeration Systems	8. ☐ Smoke Control Systems in Open Wells
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	

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.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.

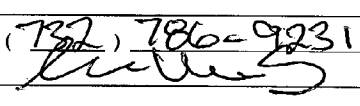
TEAM ELECTRIC CORPORATION

Agent Name **NJ Lic. #12157A**

77 Pension Rd. Suite #19

Address **Manalapan, New Jersey 07726**

Telephone **(732) 786-9231**

Signature 

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

UCC/F-100
Professional Printing
(856) 468-7933



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 9/30/2011
Control Number C-11-002940
Permit Number 11-2473
Permit Issue Date 8/15/2011
Certificate Number 11-2473

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 1628 HARVARD AVE. Brick Township, NJ Block: 828 Lot: 13 Qual: _____
Owner in Fee: RUPPERT, GILBERT A. & MARY
Owner Address: 1628 HARVARD AVE BRICK NJ 08724
Telephone: _____
Contractor TEAM ELECTRIC, Heating & Cooling, Inc.
Address 77 PENSION RD SUITE #19 MANALAPAN NJ 07726-
Telephone: (732) 786-9231 Fax: (732) 849-0699
License Number or Builders Registration Number: 13VH03910600 EI12157 Federal Emp. Number: 22-3397119

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: SERVICE

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
Control #
Permit #

8/15/11
C-11-002940

11-2473

IDENTIFICATION Block: 828 Lot: 13 Qualifier
Work Site Location: 1628 HARVARD AVE. Brick Township, NJ Contractor: TEAM ELECTRIC, Heating & Cooling, Inc.
Address: 77 PENSION RD SUITE #19 MANALAPAN NJ 07726-
Owner in Fee: RUPPERT, GILBERT A. & MARY
1628 HARVARD AVE. BRICK NJ 08724 Telephone: (732) 786-9231
Lic. No. or Bldrs. Reg. No. E112157
Federal Employee No. 22-3397119
Telephone:

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

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 \$1,500

Construction Official

Date

8-10-11

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$50
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$3
CO Fee	
Other	\$0
Total	\$53
Check No.	2013
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.

8/15/11 11:46 AM 0015584047

XX01 SERV 001

☐ 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.

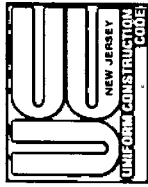
Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ 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.



ELECTRICAL
SUBCODE
TECHNICAL SECTION

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

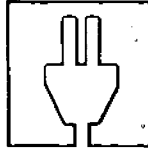
Block 828 Lot 13 Qualification Code _____
Work Site Location 1628 Harvard Ave Brick
Owner in Fee: Rupert
Te [redacted] e-mail _____
Address 1628 Harvard Ave Brick zip code 08724
Contractor: TEAM ELECTRIC, HEATING & COOLING, INC. Tel. (732) 786-9231
Address 77 PENSION ROAD, SUITE 19
MANALAPAN, NEW JERSEY 07726 e-mail _____
Contractor License No. 34E01215700 Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. 22-3397119 FAX: (732) 786-9235

B. ELECTRICAL CHARACTERISTICS

Use Group: Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Estimated Cost of Electrical Work \$ 1500

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
[] No Plans Required	Rough				
[] Partial-Underslab Utilities Approved	Barrier-Free				
Date: _____ Approved by: _____	Trench				
[] Electric Plans Approved	Temp. Serv.				
Date: _____ Approved by: _____	Constr. Serv.				
Joint Plan Review Required:	TCO				
[] Bldg. [] Plumb. [] Fire [] Elev.	Other				
SUBCODE APPROVAL for PERMIT		Service			
Date: <u>8/9/11</u>	Final				
Approved by: <u>[signature]</u>	Barrier-Free				
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued			
[] CO [] CCO [] CA	Final Cut-in-Card Date Issued				
Date: <u>9/24/11</u>	Annual Pool Inspection				
Approved by: <u>[signature]</u>	Date of Grounding and Bonding				
Certification					

1. White-Inspector Copy 2. Canary-Applicant Copy 3. Pink-Office Copy 4. White Tag-Office Copy



Date Received
Date Issued
Control #
Permit #

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here:

Michael Polchack

Print name here:

Michael Polchack

[] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr'r [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

QTY./SIZE

ITEMS

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

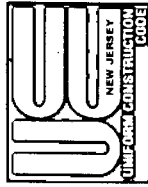
FEE (Office Use Only)

TOTAL NUMBERS

Pool Permit/with UW Lights
Storable Pool/Spa/Hot Tub
KW Elec. Rang/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 Replacement
AMP Subpanels
AMP Motor Control Center
KW Elec. Sign/Outline Light

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

UCC/F-120
(rev. 11/09)
Professional Printing
(856) 468-7933



ELECTRICAL
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 828 Lot 13 Qualification Code _____
Work Site Location 1628 Harvard Ave Brick

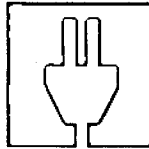
Owner R. Rocco e-mail _____
Tel _____
Address 1628 Harvard Ave Brick 08724 Zip code 786-9231
Contractor TEAM ELECTRIC, HEATING & COOLING, INC. Tel. 732
Address 77 PENSION ROAD, SUITE 19
MANALAPAN, NEW JERSEY 07726 e-mail _____

Contractor License No. 34E01215730 Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. 22-3397119 FAX 786-9235

B. ELECTRICAL CHARACTERISTICS

Use Group: Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Estimated Cost of Electrical Work \$ 1500

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Approval	Initial
[] No Plans Required		Rough			
[] Partial-Underslab Utilities Approved		Barrier-Free			
Date: _____ Approved by: _____		Trench			
[] Electric Plans Approved		Temp. Serv.			
Date: _____ Approved by: _____		Constr. Serv.			
Joint Plan Review Required:		TCO			
[] Bldg. [] Plumb. [] Fire [] Elev. Service		Other			
SUBCODE APPROVAL for PERMIT		Final			
Date: <u>8/19/11</u>		Barrier-Free			
Approved by: <u>[Signature]</u>		Temp. Cut-in-Card Date Issued			
SUBCODE APPROVAL for CERTIFICATE		Final Cut-in-Card Date Issued			
[] CO [] CCO [] CA		Annual Pool Inspection			
Date: _____		Date of Grounding and Bonding			
Approved by: _____		Certification			



Date Received _____
Date Issued _____
Control # _____
Permit # _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and I am authorized to make this application, and perform the work listed on this application.
Applicant sign/Contractor sign and seal here:

Print name here: Michael Polichka
[] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr'r [] Exempt Applicant

D. TECHNICAL SITE DATA

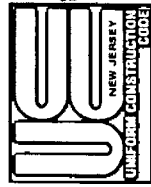
DESCRIPTION OF WORK:

QTY./SIZE
ITEMS
Lighting Fixture _____
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. Rang/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 Replacement 100
AMP Subpanels _____
AMP Motor Control Center _____
KW Elec. Sign/Outline Light _____

FEE (Office Use Only)

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



**ELECTRICAL
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 828 Lot 13 Qualification Code _____
Work Site Location 1628 Harvard Ave Brick

Owner in Fee Ruppert
Te [REDACTED] e-mail _____
Address 1628 Harvard Ave Brick 08724

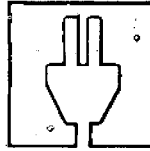
Contractor TEAM ELECTRIC, HEATING & COOLING, INC. Tel. 732 786-9231 ip code
Address 77 PENSION ROAD, SUITE 19
MANALAPAN, NEW JERSEY 07726 e-mail _____

Contractor License No. 34E012157.0 Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 732 786-9235
Federal Emp. ID No. 22-3397119 FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group: Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Estimated Cost of Electrical Work \$ 1500

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
[] No Plans Required	Rough				
[] Partial-Under-slab Utilities Approved	Barrier-Free				
Date: _____	Trench				
[] Electric Plans Approved	Temp. Serv.				
Date: _____	Constr. Serv.				
Joint Plan Review Required:	TCO				
[] Bldg. [] Plumb. [] Fire [] Elev.	Other				
Service					
Final					
Barrier-Free					
Temp. Cut-in-Card Date Issued					
Final Cut-in-Card Date Issued					
Annual Pool Inspection					
Date of Grounding and Bonding					
Certification					
Approved by: _____					
SUBCODE APPROVAL for PERMIT					
Date: <u>8/9/11</u>					
Approved by: <u>[Signature]</u>					
SUBCODE APPROVAL for CERTIFICATE					
[] CO [] CCO [] CA					
Date: _____					
Approved by: _____					



Date Received _____
Date Issued _____
Control # _____
Permit # _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and I am authorized to make this application, and perform the work listed on this application.
Applicant sign/Contractor sign and seal here:

Print name here: Michael Ruppert

[] Licensed Elec. Contractor [] Certified Landscape Irrigation Contr'r [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

QTY. SIZE

ITEMS

Lighting Fixture _____
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. Rang./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 Replacement 100
AMP Subpanels _____
AMP Motor Control Center _____
KW Elec. Sign/Outline Light _____

FEE (Office Use Only)

\$ _____

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

UCC/F-120
(rev. 11/09)
Professional Printing
(856) 468-7933