



CONSTRUCTION PERMIT APPLICATION

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

C17-001955

I. IDENTIFICATION

1. Proposed Work Site at: 120 Walter RD. Blitch NJ 08724

2. Name of Owner in Fee: Federal Home Loan Mortgage Corp.

Tel. (703) 903.2000 e-mail

Address 8200 Jones Branch Dr. McLean VA 22102

3. Ownership in Fee: Public ☒ Private ☐

4. Principal Contractor: Wick, August Tel. (732) 312-6271

Address 126 Pier Ave Bldg N 08723 e-mail erik.nusent@a

10110ve-electric.com

License No. OR, if new home, Builder Reg. No. #0316784 Exp. Date 3/18

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 _____

Tel. () FAX ()

V. FEE SUMMARY (for office use only)

1.	Building	\$	150		
2.	Electrical				
3.	Plumbing				
4.	Fire Protection				
5.	Elevator Devices				
6.	Subtotal				
7.	Less 20% for State Plan Review	\$			
8.	Subtotal	\$	1		
9.	State Permit Surcharge Fee				
10.	Subtotal	\$			
11.	Cert. of Occupancy				
12.	Other				
13.	TOTAL	\$	151		

VI. BUILDING/SITE CHARACTERISTICS

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

11b. SUBCODES

(Check all that apply)

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

TOTAL COST

FOR OFFICE USE ONLY (Optional)

[illegible]

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

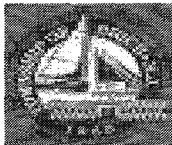
III. PLAN REVIEW (optional)

DO YOU WANT:

- ☐ Partial Releases
- ☐ Prototype Processing

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 | 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 5/26/2017
Control Number C-17-001955
Permit Number 17-1522
Permit Issue Date 5/10/2017
Certificate Number 17-1522

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 120 WALTER RD. Brick Township, NJ Block: 1170.05 Lot: 1 Qual: _____
Owner in Fee: FEDERAL HOME LOAN MORTG CORP
Owner Address: 5000 PLANO PKWY CARROLLTON TX 75010
Telephone: _____
Contractor Erik Nugent
Address 126 Pier Ave. Brick NJ 08723
Telephone: (732) 312-6271 Fax: _____
License Number or Builders Registration Number: _____ 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: 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 5/10/17
Control # C-17-001955
Permit # 17-1522

IDENTIFICATION Block: 1170.05 Lot: 1 Qualifier _____
Work Site Location: 120 WALTER RD. Brick Township, NJ Contractor Erik Nugent
Address 126 Pier Ave. Brick NJ 08723
Owner in Fee FEDERAL HOME LOAN MORTG CORP
5000 PLANO PKWY CARROLLTON TX 75010 Telephone: (732) 312-6271
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
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:

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 \$450

D. Neuman jlep
Construction Official

5/9/17
Date

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$150
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$151
Check No. <u>3176</u>	
Cash	\$0
Credit	\$0
Collected By	

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

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 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.

#1522
ELECTRIC \$150.00
DCA \$1.00
CHECK \$151.00

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

5/3/17

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

Clearwell Management - Matt Bellis

Address

703 Cross St Lakewood NJ 08701

Telephone

(732) 806-0884 ext 102

Signature

[Signature]

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



ELECTRICAL SUBCODE TECHNICAL SECTION



0516728558

5/10/17

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

Block 1170 Lot 1 Qualification Code 120 Walter Rd Brick NJ 08724
Work Site Location 120 Walter Rd Brick NJ 08724

Owner in Fee: Federal Home Loan Mortgage Corp.

Tel. 703 903-2000 e-mail _____

Address 8200 Jones Branch Dr. McLean VA 22102

Contractor: ENK Nugent Tel. 732 312 6271 zip code 08724

Address 126 Pier Ave Brick NJ 08723 e-mail enknugent@nugent-electric.com

Contractor License No. 16784 Exp. Date 3/18

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 450

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
		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			
☐ Blg. ☐ Plumb. ☐ Fire. ☐ Elev.		Other			
SUBCODE APPROVAL for PERMIT		Service			
Date: _____		Final			
Barrier-Free					
Approved by: _____					
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued			
☐ CO ☐ ECO ☐ CA		Final Cut-in-Card Date Issued			
Date: _____		Annual Pool Inspection			
Approved by: _____		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: ENK Nugent

Print name here: ENK Nugent

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Replaced Service, drop

QTY. SIZE 1 100

ITEMS Need pooler restored

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 UV 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 1/4 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 \$ _____

U.C.C. F120 (rev. 11/09)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original version



ELECTRICAL SUBCODE TECHNICAL SECTION



DE# 3371642858

5/10/17

Date Received
Control #
Date Issued
Permit #

17-1502

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

Block 1170.05 Lot 1 Qualification Code 120 Walter Rd Brick NJ 08724

Work Site Location 120 Walter Rd Brick NJ 08724

Owner in Fee: Federal Home Loan Mortgage Corp.

Tel. 703 903-2000 e-mail _____

Address 8200 Jones Branch Dr. McLean VA 22102

Contractor: ENK Nugent Tel. 732 312 6271 Zip code 08724

Address 126 Pier Ave Brick NJ 08723 e-mail enknugent@nugent-electric.com

Contractor License No. 16784 Exp. Date 3/18

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

Use Group Present _____ Proposed _____

[] Pole/Pad # _____ [] Temporary [] Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 450

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: ENK Nugent
Print name here: ENK Nugent
[] Licensed Elec. Contractor [] Certified Landscape Irrigation Contr. [] Exempt Applicant
D. TECHNICAL SITE DATA

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type	Failure	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 Service			
SUBCODE APPROVAL FOR PERMIT		Final			
Date: _____		Barrier-Free			
Approved by: _____		Temp. Cut-in-Card Date Issued			
SUBCODE APPROVAL FOR CERTIFICATE		Final Cut-in-Card Date Issued			
[] CO [] CCO		Annual Pool Inspection			
Date: _____		Date of Grounding and Bonding			
Approved by: _____		Certification			

DESCRIPTION OF WORK:	QTY.	SIZE	ITEMS	REPLACED	Service drop	restored	FEE (Office Use Only)
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 \$	

Brick Township
Building Department (732) 262-1030



DRIUR # 337642858

MUNICIPALITY Brick Township

CUT-IN-CARD

LOCATION 120 WALTER RD.

UTILITY CO _____

Brick Township, NJ

BLK 1170.05

LOT 1

OWNER FEDERAL HOME LOAN MORTG
CORP

OCCUPANT FEDERAL HOME LOAN MORTG
CORP

"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 100 Amp

INSTALLED BY Erik Nugent

LICENSE NO _____

DATE 5/16/2017

PERMIT # 17-1522

INSPECTOR Marcel Renson

☒ FAXED IN 5/16/2017

Lic. No: 6455

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

* * * Communication Result Report (May. 16. 2017 2:50PM) * * *

1)
2)

Date/Time: May. 16. 2017 2:49PM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
9615 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 320 WALTER RD UTILITY CO. _____

Brick Township, NJ BLK 1170 CS LOT 1

OWNER FEDERAL HOME LOAN MORTG OCCUPANT FEDERAL HOME LOAN MORTG
CORP CORP

"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 50 Lines

INSTALLED BY EdNapoli LICENSE NO. _____

DATE 5/16/2017 PERMIT # 17-1622 INSPECTOR Manuel Bazzani

☒ FAXED IN 5/16/2017 Lic. No. 5465

U.S.G. Form F-400 (Rev. 1-1976) UTILITY & CHARTER OFFICIALS & FINANCIAL CONTRACTORS