



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

- Proposed Work Site at: 163 John St.
- Name of Owner in Fee: Andrew Kiewra Tel. (732) 785-1795
Address 163 John St. Brick NJ 08724
street municipality zip code
- Ownership in Fee: Public Private
- Principal Contractor: MARK FOUR ENTERPRISES INC Tel. (609) 786-5100
Address 41 Plymouth St Fairfield, NJ 07004
License No. OR, if new home, Builder Reg. No. 122841 Exp. Date _____
Federal Employee No. 22-1775117 FAX: (609) 786-2061
- Architect or Engineer _____ Tel. (_____) _____
Address _____
- Responsible Person in Charge of Work _____
Tel. (_____) _____ FAX (_____) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>85</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	<u>2</u>		
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>87</u>		

VI. BUILDING/SITE CHARACTERISTICS

- Number of Stories _____
- Height of Structure _____ ft.
- Area — Largest Floor _____ sq. ft.
- New Building Area _____ sq. ft.
- Volume of New Structure _____ cu. ft.
- Construction Classification _____
- Total Land Area Disturbed _____ sq. ft.
- Flood Hazard Zone _____
- Base Flood Elevation _____ ft.
- Wetlands yes _____
no _____
- Max. Live Load _____
- Max. Occupancy Load _____

(office use only)

II. PROPOSED WORK

- ☐ Minor Work
- ☐ New Building
- ☐ Addition
- ☒ Alteration
- ☐ Fire Protection
- ☐ Plumbing
- ☐ Electrical
- ☐ Elevator Devices
- ☐ Asbestos Abat. Subch. B
- ☐ Lead Hazard Abatement
- ☐ Demolition

Est. Cost

3,000-

TOTAL COSTS

3000-

OPTIONAL (for office use only)

Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
<u>WSP</u>	<u>6/15/98</u>					

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

- ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
- ☐ High Pressure Boilers
- ☐ Pressure Vessels
- ☐ Refrigeration Systems
- ☐ Cross-Connections/Backflow Preventers
- ☐ Hazardous Uses/Places of Assembly
- ☐ Sprinklers
- ☐ Smoke Control Systems in Open Wells
- ☐ Underground Storage Tanks

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

- ☐ Hotels (R-1)
- ☐ Multi-Family (R-2)
- ☐ Two-Family (R-3) BOCA
- ☐ Two-Family (R-4) CABO
- ☒ One-Family (R-3) BOCA
- ☐ One-Family (R-4) CABO

No. of dwelling units:

Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

- State Specific Use:
- Use Group:
- Change in Use Group, Indicate Former:

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 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 MARK FOUR ENTERPRISES

Address 41 PLYMOUTH ST.

FAIRFIELD, NJ 07004

Telephone (409) 786-5100

Signature Kristal Johnson

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ 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. _____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block 1170.016 Lot 3
Work Site Location 163 John St.
Briek NJ 08724
Owner in Fee Andrew Kiewit A
Address SHAME
Tel. (732) 785-1795
Contractor MARK FOUR ENTERPRISES INC.
Address 41 PLYMOUTH ST.
FAIRFIELD, NJ 07004
Tel. (609) 781-5100
Lic. No. or Bldrs. Reg. No. 122841
Fed. Emp. No. 22-1775117

Is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☒ OTHER _____
(Subchapter 8 only)

DESCRIPTION OF WORK:

Veruf Solving

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 \$ 3,000

Construction Official

Date

U.C.C. F170
(rev. 3/96)

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

PAYMENTS (Office Use Only)

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA Training Fee _____
Cert. of Occupancy _____
Other _____
Total _____
Check No. _____
Cash _____
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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services; rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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.

Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

If you do not understand any of this information, please ask.

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 06/26/98
Control #
Permit # 98-2082

IDENTIFICATION Block 1170.06 Lot 3

Work Site Location 163 JOHN ST
SIDING
Owner in Fee KIEWRA. ANDREW
Address SAME
BRICK, NJ 08724-
Telephone (732)785-1795

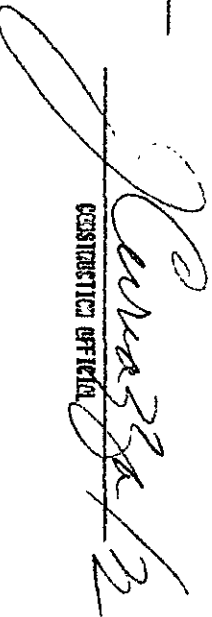
Contractor MARK FOUR ENTERPRISES, INC
Address 41 PLYMOUTH STREET
FAIRFIELD, NJ 07004-
Telephone (201)808-5050
Lic. No. or Bldrs. Reg. No. 122840 Exp. Date / /
Federal Emp. No. 22-1775117
or Social Security No.

Is hereby granted permission to perform the following work:
☒ BUILDING ☐ PLUMBING ☐ OTHER
☐ ELECTRICAL ☐ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:
VINYL SIDING

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 \$ 3,000


CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)
Building 85
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
OCA Training Fee 2
Cert. of Occ. 0
Other
Total 87
Check No. 36611
Cash
Collected By: PA



**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 1170.06 Lot 3
Work Site Location Block N5 08704
Owner in Fee Andrzej Kucinka
Address 3111C
Tele. (732) 785-1795
Contractor MARK FOUR ENTERPRISES
Address 41 PLUMMOUTH ST.
FAIRFIELD, N.J. 07004
Tele. (609) 286-5760 Fax (609) 780-1061
Lic. No. or Bids. Reg. No. 132841
Federal Emp. No. 22-1775117

JOB SUMMARY (Office Use Only)		PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)		Initial
						Type:	Failure	Failure	Approval	
☐	No Plans Required					Footings				
☐	All					Foundation				
☐	Footings					Slab				
☐	Foundation					Frame				
☐	Frame					Barrier-Free				
☐	Other					Insulation				
Joint Plan Review Required:						Finishes				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator						Energy				
SUBCODE APPROVAL						Mechanical				
☐ CO ☐ CCO ☐ CA						TCO				
Date: _____						Other				
Approved by: _____						Final				
						Barrier-Free				

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg.	\$ <u>3,070</u>
2. Alteration	\$ <u>3,070</u>
3. Total (1 + 2)	\$ <u>6,140</u>



Date Received
Date Issued
Control #
Permit #

C. CERTIFICATION IN LIEU OF OATH

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

Signature Andrzej Kucinka

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Verand Decking

- TYPE OF WORK:
- ☐ New Building
 - ☐ Addition
 - ☒ Alteration

- ☐ Roofing
- ☒ Siding
- ☐ Fence _____ Height (exceeds 6') _____ Sq. Ft. _____
- ☐ Sign _____ Sq. Ft. _____
- ☐ Pool
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Other _____
- ☐ Demolition

	FEE (Office Use Only)
Administrative Surcharge	\$ _____
Minimum Fee	\$ _____
DCA Training Fee	\$ _____
TOTAL FEE	\$ _____



**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 1171.06 Lot 3

Work Site Location 3000 W. 27th St

Owner in Fee ABC INC.

Address ABC INC.

Tele. (938) 933-1111

Contractor MARK ENTERPRISES

Address 11124 W. 27th St.

Tele. (609) 936-5766 Fax (609) 936-1661

Lic. No. or Bids. Reg. No. 122341

Federal Emp. No. 22-1995117

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☐ No Plans Required			Type:	Failure	Failure
☐ All			Footings		
☐ Footing			Foundation		
☐ Foundation			Slab		
☐ Frame			Frame		
☐ Other			Barrier-Free		
Joint Plan Review Required:			Insulation		
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Finishes		
SUBCODE APPROVAL			Energy		
☐ CO ☐ CCO ☐ CA			Mechanical		
Date:			TCO		
Approved by:			Other		
			Final		
			Barrier-Free		

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. \$ 2,000
2. Alteration \$ 3,000
3. Total (1+2) \$ 5,000



Date Received 6/26/98
Date Issued
Control #
Permit # 98-2082

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 [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Various alterations

TYPE OF WORK:

☐ New Building
☐ Addition
☒ Alteration
☐ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6')
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Other _____
☐ Demolition

FEE (Office Use Only)

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____
TOTAL FEE \$ _____

SEARS HOME CENTRAL

June 10, 1998

*Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723*

Attention: Building Inspector

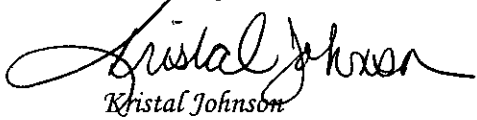
Enclosed please find a permit application for the installation of Vinyl Siding at the home of: Andrew Kiewra , 163 John Street, Block # 1170.06 Lot # 3 Total cost of job is \$3,000.00.

Please call me to let me know the cost of the permit.

Thanking you in advance for your prompt handling of this permit.

Please note: Uniform Construction Code: 5:23-2.17. A Minor Work which allows for the start of work once the building department has been verbally informed of the address.

Yours truly,



Kristal Johnson

Assistant Project Coordinator- Siding

Sold, Furnished and Installed by Mark Four Enterprises, Inc.

A SEARS Authorized Contractor

2702 Cindel Drive, Unit #1 • Cinnaminson, NJ 08077 • (609) 786-5100 • (800) 628-5565 • Fax (609) 786-7061

MARK FOUR ENTERPRISES, INC.

36611

Vendor	BRICK	Check Date	06/23/98	Check Number	036611		
Ref Nbr	Inv Nbr	Inv Date	Invoice Amount	Amount Paid	Disc Taken	Net Check Amt	
024672	KIERWA	6/23/98	87.00	87.00		87.00	

163 Johns St.

SF13103-1

TO REORDER, CALL YOUR LOCAL SAFEGUARD DISTRIBUTOR AT 732-264-0010

Z414J90010000 L95LC008994



LITHO USA SFSL2 CK7508112L (10/97)