BLOCK 1170.06 LOT 4 QUALIF /CODE _____ ADDRESS (SITE) 167 John Street PERMIT NO 04-5244

COF. 10

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Proposed Work Site at: 167 JOHN ST. BRICK NJ.
2. Name of Owner in Fee: JOHN RENNAR Tel. 732 836-0505
   Address: SAME
   street municipality zip code
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: All State Roofing & Siding
   Address 26 Park Street, Suite 2061 Tel. ( )
   Montclair, NJ 07042
   1-888-766-3252 Fed Id # 223773709
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date
   Federal Employee No. _____ Fax ( )
5. Architect or Engineer _____ Tel. ( )
   Address _____
6. Responsible Person in Charge of Work CHUCK ANANIA
   Tel. (888) 766-3252 Fax (973) 324-9888

RECEIVED DEC - 6 2004

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 100		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$ 24		
9. DCA Training Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 124		

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

OPTIONAL (for office use only)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work							1-30-08		
2. ☐ New Building									
3. ☐ Addition									
4. ☐ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS									

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:

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 _ All State Roofing & Siding
Address ____ 26 Park Street, Suite 2061
Montclair, NJ 07042
1-888-766-3252 Fed Id # 223773700

Telephone ( ) _____
Signature Chuck Amaro

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 02/01/2008
Control Number
Permit Number 04-5244
Permit Issue Date 12/14/2004
Certificate Number 04-5244

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 167 JOHN ST NEW ROOF/SIDING , NJ Block: 1170.06 Lot: 4 Qual:

Owner in Fee: RENNAR, JOHN

Owner Address: SAME BRICK NJ -

Telephone: 732/836-0505

Contractor ALL STATE ROOFING AND SIDING

Address 26 PARK ST SUITE 2061 MONTCLAIR NJ 07042-

Telephone: 888/766-3252 Fax: 973/324-9888

License Number or Builders Registration Number: Federal Emp. Number: 22-3773799

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:

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:

Date Printed: 02/01/2008 U.C.C. F260 (rev. 08/05)

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued 12/14/04
Control #
Permit # 04-5244

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

Block 1170 Lot 4
Work Site Location 167 JOHN ST.
BRICK, NJ. 08724
Owner in Fee JOHN RENNAR
Address SAME

Tele. (732) 830-0505
Contractor ALL STATE ROOFING AND SIDING, LLC
Address 26 PARK STREET, SUITE 2061
MONTCLAIR, NEW JERSEY 07042
Tele. (888) 766-3252 Fax (973) 324-9888
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 223773799

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.

Chuck Arone
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
INSTALL NEW ROOF & siding & WINDOWS. Exact Replacement

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 1-30-05
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			1/29/05	
Barrier-Free				

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	$

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. $ 18,000
2. Alteration $
3. Total (1+ 2) $ 18,000

UCC/PRO F-110 (REV3/96)
Professional Printing
(856) 468-7933

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

Construction Official
Brick Township
Brick, NJ

01-03-05

RE: Permit # 04-5244 Block 1170.06 Lot 4

Dear Sirs,

This is a duplicate permit.

A permit for the same work was already pulled by our General Contractor Essex Home Improvements.

Please cancel this permit and return all fees to:

All State Roofing & Siding
26 Park St. Suite 2061
Montclair, NJ 07042

Thank you for your attention to this matter.

04-5118

Elizabeth Rennar
167 John St.
Brick, NJ

TOWNSHIP OF BRICK
BRICK, NEW JERSEY

REQUISITION

REQ. No. 33840

ASSIGNED P.O. NUMBER

VENDOR
John Rennar
167 John Street
Brick, NJ

DEPT. Building dept
Refund account
CODE 0114-05
DATE

LINE ITEM	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
	2 permits issued for the same work roofing and siding refund permit # 04-5244			
	$100.00			
	24.00 DCA fee			
	$124.00			
	100.00 minus 20% plan review fee for a total refund of $80.00 due to customer			
	see attached copy of this permit			

REMARKS:

REQUESTED BY _____ APPROVED BY _____

THIS IS NOT AN ORDER

White Copy - Purchasing Copy Yellow Copy - Receiving Department Copy Pink Copy - Treasurers Copy Gold Copy - Department Copy

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 12/14/2004
Control #
Permit # 04-5244

UCC NEW JERSEY

CONSTRUCTION PERMITE

IDENTIFICATION Block 1170.06 Lot 4 Qual

Work Site Location 187 JOHN ST
NEW ROOF/SIDING
Owner in Fee RENNAR, JOHN
Address SAME
BRICK, NJ
Telephone (732)836-0505

Contractor ALL STATE ROOFING AND SIDING
Address 26 PARK ST SUITE 2061
MONTCLAIR, NJ 07042-
Telephone (888)766-3252
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3773798

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:
NEW ROOF/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 $ 18,000

P. Newman

Construction Official

12/14/2004
Date

U.C.C. F170 (rev. 3/96) NJ UCCARS 5.24E

PAYMENTS (Office Use Only)

Building	100
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	24
Cert. of Occupancy	0
Other	
Total	124
Check No.	8551
Cash	
Collected By	ANN

12/14/04 10:39AM 00155884833
XXD1 SERV.001

#5244	
BUILDING	$100.00
DCA	$24.00
CHECK	$124.00