Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

This File Contains Personal Identifiable Information of Private Citizen(s).

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- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020

BLOCK 1205.02 LOT 12 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 17-3469

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-17-004640

I. IDENTIFICATION

1. Proposed Work Site at: 206 Veronica Dr.
2. Name of Owner in Fee: Jeanne Smith Mulhall
   Tel. [redacted] e-mail _____
   Address 206 Veronica Dr (street) Ocean (municipality) 08724 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Cosgrove Renovations Tel. (732) 773-7273
   Address 1469 Rt 88 e-mail _____
   Brick NJ 08724
   License No. OR, if new home, Builder Reg. No. 13VH08540100 Exp. Date 3-31-2018
   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 Matthew Cosgrove
   Tel. (732) 773-7273 FAX: (_____) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 500✓		
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	21-		
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 521-		

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)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building									
☐ Electrical									
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST	11,000.-								

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 06/08/2021
Control Number C-17-005250
Permit Number 18-0150
Permit Issue Date 01/22/2018
Certificate Number 18-0150

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 206 VERONICA DR. Brick Township, NJ Block: 1205.02 Lot: 12 Qual:

Owner in Fee: LUKOWITZ, STEPHEN JONATHAN

Owner Address: 206 VERONICA DR BRICK NJ 08724

Telephone: [redacted]

Contractor COSGRAVE RENOVATIONS

Address 1469 ROUTE 88 BRICK NJ 08724

Telephone: (732) 773-7273 Fax: Federal Emp. Number:

License Number or Builders Registration 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: COVERED PORCH

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:

David J. Newman Jr

Construction Official

Date Printed: 06/08/2021

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

Fee: $0.00
Check Number:
Collected By:

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 10/18/17

Date Issued Permit # 17-3469

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

Block 1205.02 Lot 12 Qualification Code _____

Work Site Location 206 Veronica Dr.
Brick, NJ 08724

Owner in Fee: Jeanne Smith Mitchell

Tel. [redacted] e-mail _____

Address 206 Veronica Dr. (street) Ocean (municipality) 08724 (zip code)

Contractor: Cosgrave Renovations Tel. (732) 773-7373

Address 1469 Rt 88 e-mail _____
Brick NJ 08724

Contractor License No. or Builder Registration No. 13VH08540100 Exp. Date 3-31-2018

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. _____ FAX: ( ) _____

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.

Sign here: MS

Print name here: Matthew Cosgrave

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Remove existing roof
Install new dimensional shingles
Remove existing siding
Install new 04.5 siding
wrap house Tyvek & ½" insulation

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 06/03/21
Approved by: KEK

INSPECTIONS Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final	N.R. 04/29/18		06/03/21	KEK
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[✓] Roofing
[✓] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Retaining Wall _____ Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other _____
[ ] Demolition

FEE (Office Use Only)
$ _____

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

B. BUILDING CHARACTERISTICS

Use Group 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.
Max. Live Load _____
Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____
If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Rehabilitation $ _____
3. Total (1+ 2) $ 11,000.00

U.C.C. F110
(rev. 11/09)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

Big-n-Little Carting

PO Box 4343 . Brick Township, NJ 08723
(732) 920-2800 (941) 234-8888
Ocean/Monmouth, NJ Sarasota/Charlotte, FL
www.NEEDADUMPSTER.com

Container # 207
RL
Driver's initials

Ticket No. 53664
Drop Date 10-9-11
Per Ton (if over) _____
Days Allowed _____
Extra Per Day Charge $20.00

Name _____
Address _____
City _____
Phone _____

Job Site
206 VERONICA DR
BRICK

BOX SIZE

	ALLOWED WEIGHT	PRICE
10	2 Tons - 4000 lbs.	
15	3 Tons - 6000 lbs.	
20	4 Tons - 8000 lbs. 207	
30	5 Tons - 10000 lbs.	
40	7 Tons - 14000 lbs.	

Initial Carting Co. Not Responsible for damage on inside curb deliveries.
(See other side for Terms & Conditions)

Customer responsible for all over weight charges
And will be charged on credit card.

VISA MasterCard AMERICAN EXPRESS DISCOVER
(circle one)

Cash or Check No.

Overweight Charge _____
Extra Days Charge _____
Total _____
Deposit _____
Balance Due _____

Credit Card _____ Exp. Date _____
Authorized & Received by X _____

$60.00 Service Charge on All Returned Checks.
$125.00 Service Charge For All Cancelled Appointments.

Thank You

We Do Not Accept Hazardous Waste Materials, Paints or Thinners
If Asbestos is found in the container, it will be returned and you will be charged $500.00

Fax to

Ref. No: G 439103349

CONSTRUCTION PERMIT

Date Issued 10/18/2017
Control # C-17-004640
Permit # 17-3469

IDENTIFICATION Block: 1205.02 Lot: 12 Qualifier
Work Site Location: 206 VERONICA DR. Brick Township, NJ
Owner in Fee LUKOWITZ, STEPHEN JONATHAN
206 VERONICA DR BRICK NJ 08724
Telephone: [redacted]

Contractor COSGRAVE RENOVATIONS
Address 1469 ROUTE 88 BRICK NJ 08724
Telephone: (732) 773-7273
Lic. No. or Bldrs. Reg. No. 13VH08540100 13VH08540100
Federal Employee. No. 13VH08540100

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:
ROOFING, SIDING

PAYMENTS (Office Use Only)

Building	$500
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$21
CO Fee	
Other	$0
Total	$521
Check No.	116
Cash	$0
Credit	$0
Collected By	Matthew Fagen

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 $11,000

Daniel F Norman MFF
Construction Official

10/18/17
Date

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.

- [x] 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:

- [x] 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.

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 206 Veronica Dr.

BLOCK: 1205.02 **LOT:** 12

CONTRACTOR: Cosgrove Renovations

CONTRACTOR'S ADDRESS: 1469 Rt 88 Brick NJ 08724

Type of Construction(minor, new home): Roof, Siding

Type of Debris (shingles, siding, wood, etc.): Roofing, siding

Party responsible for removal: Big n little Carting

Dumpster Size: 20 yd

Destination of Debris: Ocean County Dump

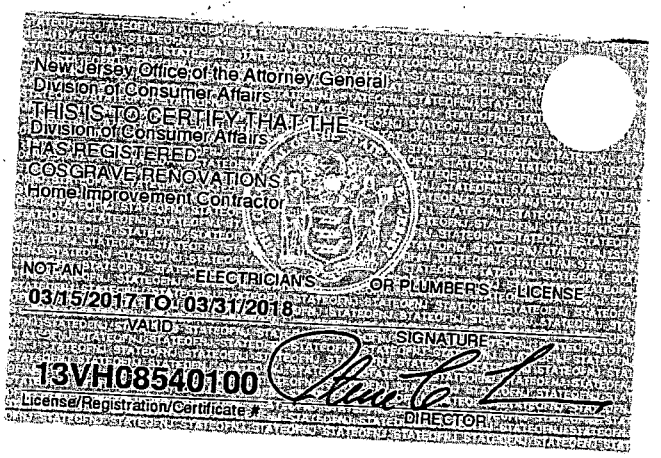
Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclables.

Generator's Certification: "Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."

MS Cosgrove
Signature

10/18/2017
Date

Matthew Cosgrove
Print Name


New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED
COSGRAVE RENOVATIONS
Home Improvement Contractor
NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE
03/15/2017 TO 03/31/2018
VALID
SIGNATURE
13VH08540100
License/Registration/Certificate #
DIRECTOR