

BLOCK 1205.03

4

QUALIFICATION CODE

ADDRESS (SITE)

210 Chard

PERMIT NO.

98-2804

RECEIVED

AUG 07 1998



CONSTRUCTION PERMIT APPLICATION

DIV. OF INSPECTION

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

I. IDENTIFICATION

1. Proposed Work Site at: 210 Chard Pl
2. Name of Owner in Fee: CANDY VALET Tel. (732) 4585873
Address 210 Chard Pl BRICK NJ
street municipality zip code
3. Ownership in Fee: Public Private X
4. Principal Contractor: GLENN G SAKER Tel. (732) 3703728
Address 2 SCARLET OAK CT JACKSON NJ 08527
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Employee No. _____ FAX: (____) _____
5. Architect or Engineer Home Owner Tel. (____) _____
Address _____
6. Responsible Person in Charge of Work GLENN G SAKER
Tel. (732) 370 3728 FAX (____) SAME

Interior Work

Permit - 1900 712-5677

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>195.-</u>		
2. Electrical	<u>35.-</u>		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	<u>6.-</u>		
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>236.-</u>		

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. 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 _____

(office use only)

II. PROPOSED WORK

1. ☒ Minor Work
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

Est. Cost

OPTIONAL (for office use only)

Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>all</u>			<u>8/14/98</u>	<u>SKA</u>	<u>9/3/98</u>		<u>OK</u>

TOTAL COSTS

\$7,400

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 Glenn G. Saker
Address 2 SCARLET OAK CT.
JACKSON N.J. 08527
Telephone (732) 370 3728
Signature [Signature]

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

OFFICE DATE RECEIVED: _____

VII. 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	Other
Building _____	Energy _____	
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. _____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 08/14/98
Control #
Permit # 98-2804

IDENTIFICATION Block 1205.03 Lot 4 Qual
Work Site Location 210 CHARD PL.
INTERIOR WORK
Order in Fee VALUE, CANDY
Address SAME
BRICK, NJ 08724-
Telephone (732)458-5873

Contractor GLENN SAKER
Address 2 SCARLETT OAK CT
JACKSON, NJ 08527-
Telephone (732)910-3782
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

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:

INTERIOR WORK

08/14/98

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 \$ 7,750

Construction Official

U.C.C. P170 (rev. 3/95)

08/14/98
Date
000005
CHANGE
CHECK
TOTAL
D.C.A.
ELECTRIC*
BUILDING
LOT #
BLOCK
120503 #
2804**
0005
09#06
0.00
236.00
236.00
6.00
35.90
195.90
0.00
0.00

PAYMENTS (Office Use Only)

Building 195
Electrical 35
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
DCA Training Fee 6
Cert. of Occupancy 0
Other
Total 236
Check No. 4222
Cash
Collected By PA

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/07/98
Date Issued 8/11/98
Control # C10-4
Permit # 98-2804

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

Block 1205.03 Lot 4 Sub
Work Site Location 210 CHARD PL

INTERIOR WORK

Owner in Fee VIKER, CANDY
Address SAME

BRICK, NJ 08724-

Tele. (732) 438-5673

Contractor GLENH SAKER

Address 2 SCARLETT OAK CT

JACKSON, NJ 08527-

Tele. (732) 910-3782 Fax ()

Lic. No. or Mfrs. Reg. No.

Federal Emp. No.

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

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

INTERIOR WORK

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☒ No Plans Req. 8/14/98 JKG

☒ All

☐ Footing

☐ Foundation

☐ Frame

☐ Other

Joint Plan Review Required:

☐ Rect ☐ Plumb ☐ Fire

SUBCODE APPROVAL: ☐ Rev

☐ CO ☐ CCO ☐ CA

Date:

Approved By:

INSPECTIONS

Type

☒ Footing

☐ Foundation

☐ Slab

☐ Frame

☐ Barrier Free

☐ Insulation

☐ Plaster

☐ Energy

☐ Mechanical

☐ TCO

☐ Other

☐ Final

☐ Barrier Free

Dates (Month/Day)

Failure Approval Initial

8/17/98

8/21/98

8/21/98

8/21/98

8/21/98

8/21/98

8/21/98

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8/21/98

8/21/98

8/21/98

TYPE OF WORK

☐ New Building

☐ Addition

☒ Alteration

☐ Roofing

☐ Siding

☐ Fence

☐ Sign

☐ Pool

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☐ Other

☐ Demolition

FEE (Office Use Only)

\$

\$

\$

\$

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\$

\$

\$

garage opened to

between garage & house

for separation
either I to



about OK as
existing. I K G



9/2/98

9/3/98

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 08/10/98
Date Issued 8/11/98
Control # C10-4
Permit # 98-2804

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICANCE INFORMATION WHEN FILING
CONTRACTORS, NOTIFY THIS OFFICE, CALL UTILITY BIG NO: 1-800-272-1000

B. TECHNICAL SITE DATA

FEE (Office Use Only)

Block 1205.03 Lot 4
Work Site Location 210 CHARD PL

INTERIOR WORK

Owner in Fee VRLKZ, CANDY
Address SAME

BRICK, NJ 08724-
Tele. (732) 458-9170 Fax ()

Contractor BERNARD SHELVIN
Address 517 NEW JERSEY AVE

BRICK, NJ 08724-
Tele. (732) 458-9170

Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 14-8564155

R. ELECTRICAL CHARACTERISTICS
Use Group - Present Proposed R-3
[] Pole/Pad [] Temporary [] Other
Building Occupied as SE DWELLING Utility Co.
Estimated Cost of Electrical Work \$ 350

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required
Joint Plan Review Required:
[] Bldg [] Plumb
[] Fire [] Elevator
[] Elect Plans Approved
Date: 8-12-98

INSPECTIONS

Approved By: [Signature]
SUECODE APPROVAL
[] CO [] CA
Date: 9/2/98
Approved By: [Signature]

DATES

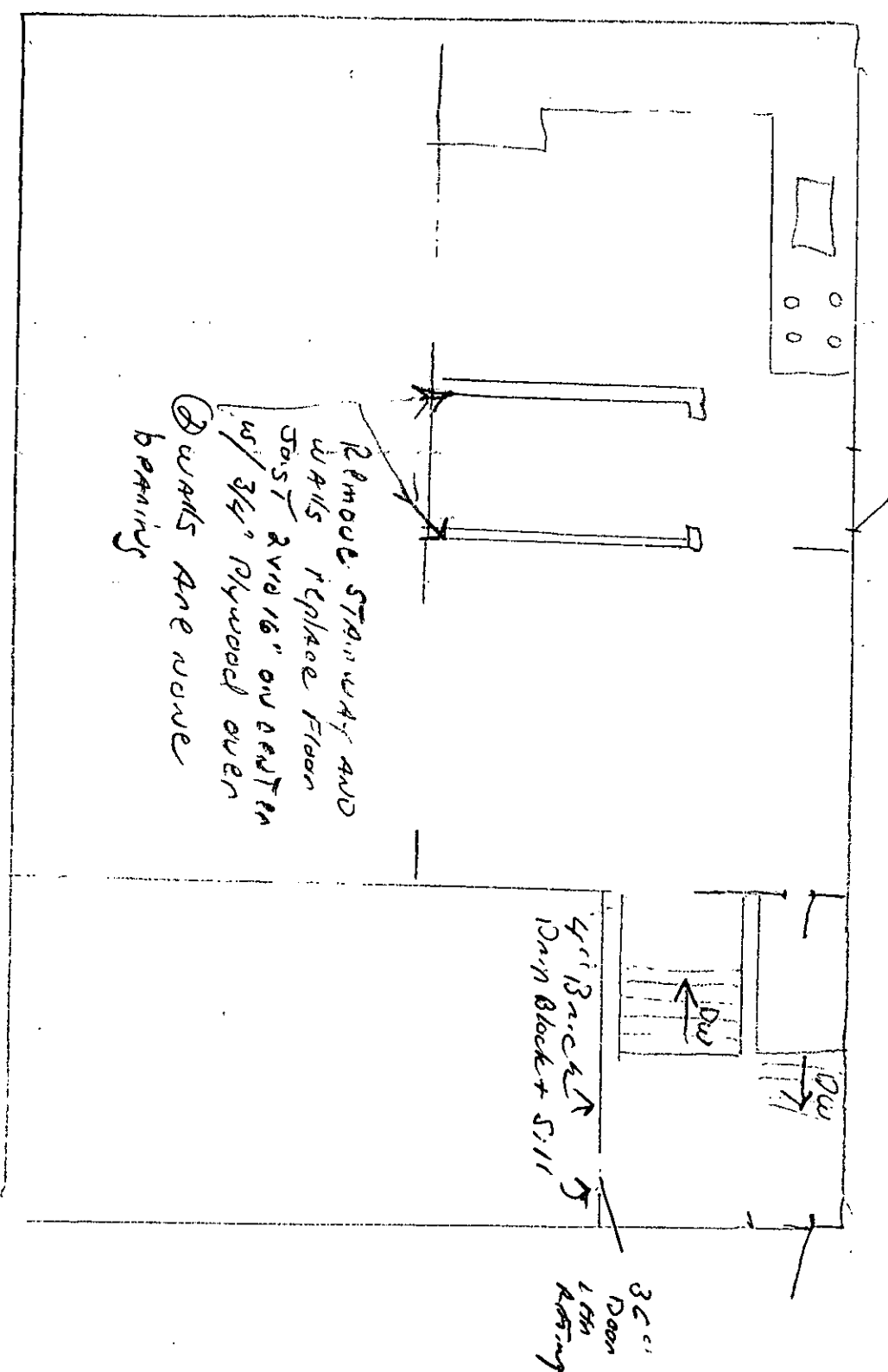
Final Temp. Cut-In-Card Date Issued 9/2/98
Final Cut-In-Card Date Issued

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's Signature/Contractor's Seal and Signature
[] Licensed Electrical Contractor [] Exempt Applicant

Paid [] Check #
Collected by:

Administrative Surcharge \$
Minimum Fee \$
TOTAL FEE \$ 35
DCA Training Fee \$



Landy Delay

210 CHANDLER
131K 1205.03

SHIP

8/14/98 JKG-

Fire

Energy

Electrical

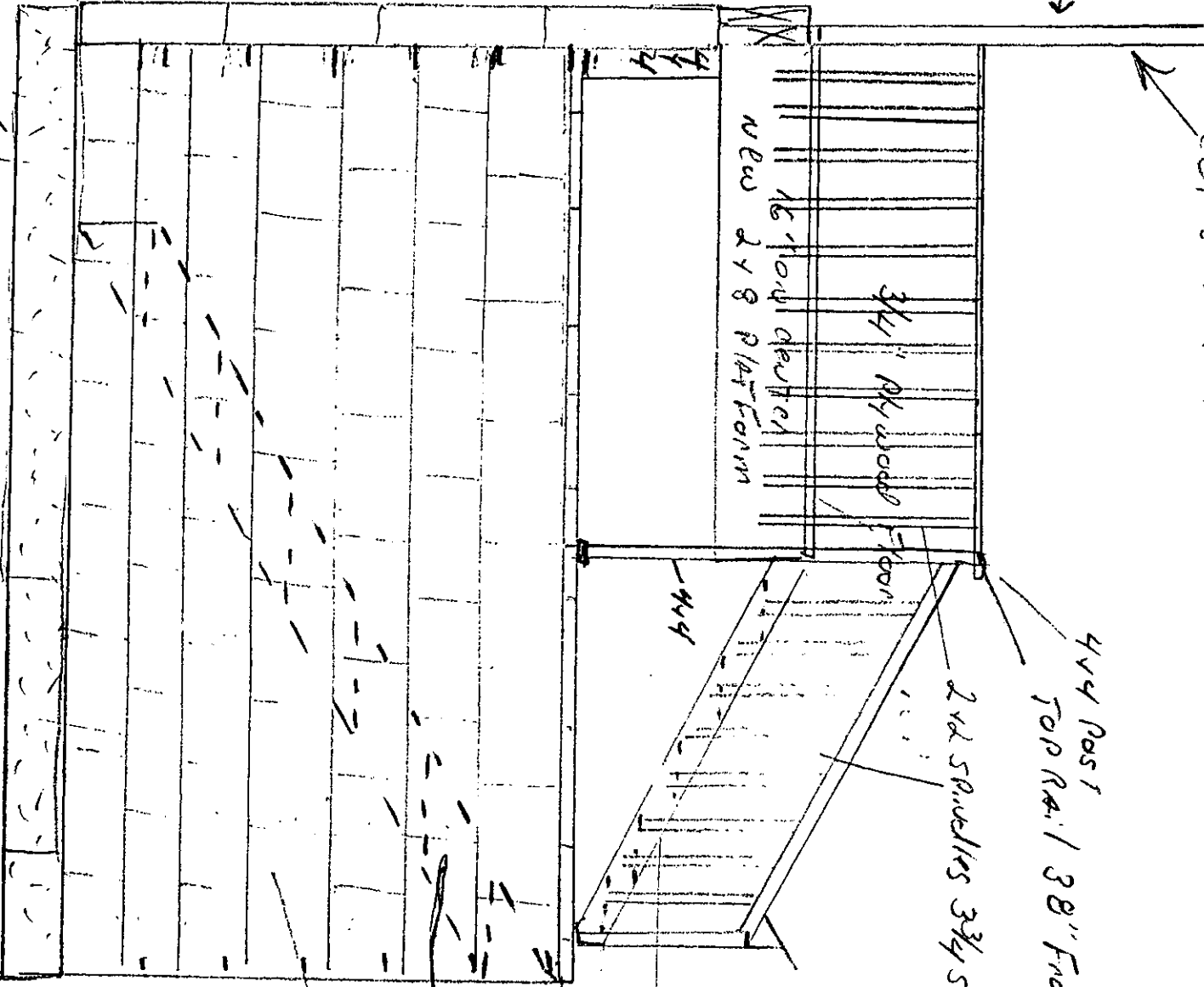
EXISTING
2x4
FRAMED
WALL →

NEW →
DRC
2x10
HEADER
OVER NEW
OPENS

REMOVE
EXISTING BLOCK
TO FORM NEW
OPENING

NOH

NEW CONCRETE HAUNCH FTG 16" wide
8' DEEP WITH MONO POUN WITH 4"
SLAB 2 STEEL REBAR IN FTGS.



4x4 POST
TOP RAIL 38" FROM F.F.

2x2 SPACERS 3x4 SPACING

2x4 TOP RAIL
W/ 1 1/2" HAND RAIL

7" RISES (SOLID)
11" TRENDS

NEW STEPS
TO BASEMENT
7" RISE (SOLID)
11 1/2" TRENCH

7 COARSE BIK
W/ 4" BLOCK AND SLAB

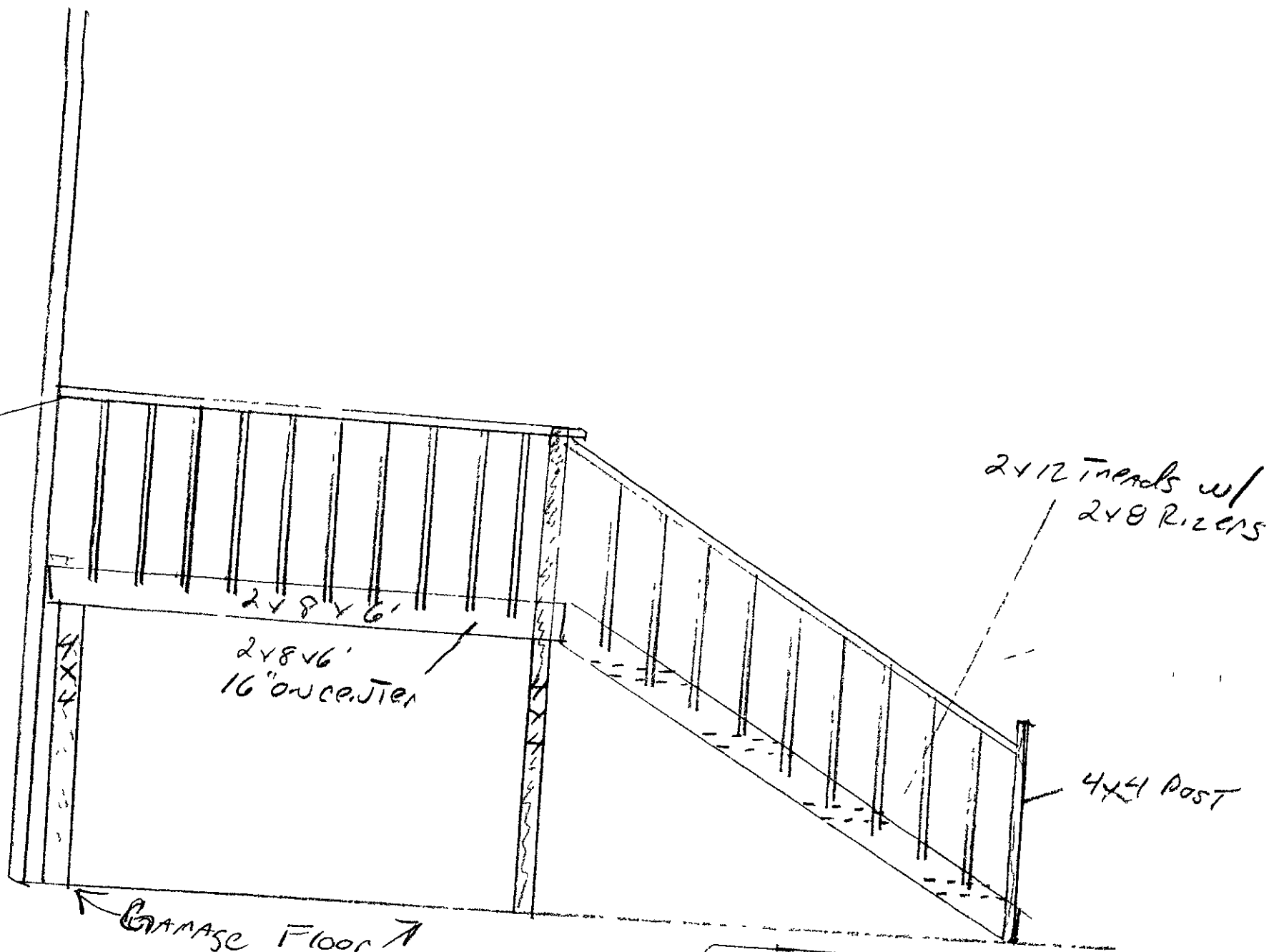
Candy Valley

DATE
210 CHAND P1
GK 1205.03
LOT 4

BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		8/14/98	JKG
Fire			
Energy			
Electrical			

36"
FF



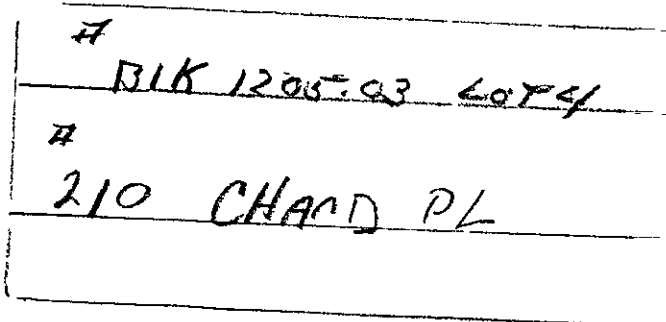
Garage Floor

Candy Velez

BIK 1205 03 Lot 4

#

210 CHARD PL.



Candy Velez

Proposed work

new 2'8" x 6'8" steel door

w/ 415 x 12 rods

on existing framing R-13 insul.

new 30' x 6'8" 14th steel beam having 4" deep block and sill

new 2' x 4 wall with 5/8 in rock floor to under side of new R-13 insul.

cut concrete floor down 4" above F.T.G. + 5/8 in and scores 8" blocks to F.F. of garage new wood steps to basement

Existing House

Kitchen

0 0 0 0 6

Landry Heloy

#

BLK 1205-03 6074

#

210 CHAND PL

36"
A.F.F

2x8x6'
16" on center

2x12 Truss w/
2x8 Ribs

4x4 Post

Garage Floor

Landry Valley

Bk 120503 Lot 4

210 CHARD PL.

COUNTER FORM
PLEASE PRINT

ELECTRICAL SUBCODE	FIRE PROTECTION SUBCODE																																	
CONTRACTOR: <u>Bernard Sheulino</u>	CONTRACTOR: _____																																	
ADDRESS: <u>577 New Jersey Ave</u> <u>Brick NJ</u>	ADDRESS: _____																																	
PHONE: <u>458 9170</u>	PHONE: _____																																	
LIC. #: <u>9713</u> EXP. DATE: _____	LIC. #: _____ EXP. DATE: _____																																	
FEDERAL EMPL. #: (or S.S. #) <u>148 56 4155</u>	FEDERAL EMPL. #: (or S.S. #): _____																																	
TECHNICAL DATA (LIST ALL FIXTURES)	TECHNICAL DATA (DESCRIPTION OF WORK)																																	
<table border="1"><thead><tr><th>DESCRIPTION</th><th>QTY</th><th>SIZE</th></tr></thead><tbody><tr><td>ITEMS</td><td></td><td></td></tr><tr><td>Lighting Fixtures</td><td><u>2</u></td><td></td></tr><tr><td>Receptacles</td><td><u>1</u></td><td></td></tr><tr><td>Switches</td><td><u>1</u></td><td></td></tr><tr><td>Detectors</td><td></td><td></td></tr><tr><td>Light Poles</td><td></td><td></td></tr><tr><td>Motors - Fract. HP</td><td></td><td></td></tr><tr><td>Emergency & Exit Lights</td><td></td><td></td></tr><tr><td>Communications Points</td><td></td><td></td></tr><tr><td>Alarm Devices/E.A.C. Panel</td><td></td><td></td></tr></tbody></table>	DESCRIPTION	QTY	SIZE	ITEMS			Lighting Fixtures	<u>2</u>		Receptacles	<u>1</u>		Switches	<u>1</u>		Detectors			Light Poles			Motors - Fract. HP			Emergency & Exit Lights			Communications Points			Alarm Devices/E.A.C. Panel			Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar Heating Sys: ☐ New ☐ Existing Location of Furnace / Boiler _____
DESCRIPTION	QTY	SIZE																																
ITEMS																																		
Lighting Fixtures	<u>2</u>																																	
Receptacles	<u>1</u>																																	
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Light Poles																																		
Motors - Fract. HP																																		
Emergency & Exit Lights																																		
Communications Points																																		
Alarm Devices/E.A.C. Panel																																		
TOTAL NUMBERS																																		
Pool Permit w/UW Lights	Water Supply Source																																	
Storable Pool/Spa/Hor Tub	Method of Valve Supervision																																	
KW Elec. Range / Receptacle	Local Alarm Supervision																																	
KW Oven / Surface Unit	Central Supervision																																	
KW Elec. Water Heater	Proprietary Supervision																																	
KW Elec. Dryer / Receptacle																																		
KW Dishwasher	Flammable Liquip Storage Tanks Capacity: _____ Fuel: _____																																	
HP Garbage Disposal	Combustable Liquid Storage Tanks Capacity: _____ Fuel: _____																																	
KW Central A/C Unit	L.G.P. Storage Tanks Capacity: _____ Fuel: _____																																	
HP/KW Space Heater/Air Handler																																		
KW Baseboard Heat	DESCRIPTION																																	
HP Motors 1/+ HP	NUMBER																																	
KW Transformer/Generator	Wet Sprinkler Heads																																	
AMP Service	Dry Sprinkler Heads																																	
AMP Subpanels	Total																																	
AMP Motor Control Center	Smoke Detectors																																	
AMP Elec. Sign/Outline Light	Heat Detectors																																	
Other	Total																																	
Other	Stand Pipes																																	
Other	Kitchen Hood Exhaust Systems																																	
Other	Engineered Systems																																	
Estimated Cost of Electrical Work: \$ <u>300.00</u>	Co2 Suppression																																	
Signature (print name): <u>Bernard Sheulino</u>	Halon Suppression																																	
Estimated Cost of Electrical Work: \$ <u>300.00</u>	Foam Suppression																																	
Signature (print name): <u>Bernard Sheulino</u>	Dry Chemical																																	
Owner ☐ Contractor ☒	Wet Chemical																																	
SUBCODE APPROVAL:																																		
PLANS: Required ☐ Approved ☐																																		
Approved by: _____	Gas or Oil Fired Appliance																																	
Date: _____	Other																																	
CONTRACTOR AFFIX SEAL:	Other																																	
	Estimated Cost of Fire Protection Work: \$ _____																																	
	Signature: _____																																	
	Owner ☐ Contractor ☐																																	
	SUBCODE APPROVAL:																																	
	PLANS: Required ☐ Approved ☐																																	
	Approved by: _____																																	
	Date: _____																																	

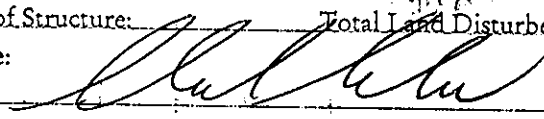
Bernard Sheulino

COUNTER FORM
PLEASE PRINT

TOWNSHIP OF BRICK

401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location:	210 CHAND PI	Date Rec'd.:	
Block:		Date Issued:	
Owner in Fee:	CANDY VALER	Control #:	
Address:	210 CHAND PI	Permit #:	
State:	NJ	Zip:	
SS #:		Phone: ()	
Provide only if Applicant is owner			

PLUMBING SUBCODE	BUILDING SUBCODE
CONTRACTOR:	CONTRACTOR: GLENN G. SAKER
ADDRESS:	ADDRESS: 2 SCARLET OAK CT. JACKSON N.J. 08527
PHONE:	PHONE: 732 370 3728
LIC #:	LIC #:
LIC EXPIRATION DATE:	LIC EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):	FEDERAL EMP. # (or S.S. #):
TECHNICAL SITE DATA (LIST ALL FIXTURES)	TECHNICAL SITE DATA
NO. FIXTURE/EQUIPMENT	DESCRIPTION OF WORK:
Water Closet	INSTALL NEW DOOR FROM HOUSE
Urinal / Bidet	TO GARAGE, WITH NEW STEPS.
Bath Tub	REMOVE EXISTING BASEMENT
Lavatory	STEPS AND INSTALL NEW
Shower	STEPS FROM GARAGE TO
Floor Drain	BASEMENT. BUILD NEW 2x4
Sink	WALL WITH FINX SHEET ROCK
Dishwasher	ON BOTH SIDES TO DIVIDE
Drinking Fountain	GARAGE FROM NEW STEPS
Washing Machine	AREA.
Hose Bibb	
Gas Piping	
Fuel Oil Piping	
Water Heater	
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor / Separator	
Backflow Preventer	
Greasetrap	
Water Cooled AC or Refrig. Unit	
Sewer Connection	
Septic (Disposal System) Closure	
Water Service Connection	
Gas Service Connection	
Active Solar System	
Vent Through Roof	
Other	
Estimated Cost of Plumbing Work: \$	TYPE OF WORK
Signature:	☐ New Building
	☐ Addition
	☒ Alteration
	☐ Roofing
	☐ Siding
	☐ Other:
	☐ Other:
	☐ Fence: Height (6' or More)
	☐ Sign: Sq. Ft.
	☐ Pool (In Ground)
	☐ Pool (Above Ground)
	☐ Asbestos Abatement
	☐ Demolition
	BUILDING CHARACTERISTICS
	USE GROUP Present: ☒ Proposed:
	CONSTR. CLASS Present: ☒ Proposed:
	No. of Stories:
	Height of Structure:
	Area - Largest Floor:
	New Building Area / All Floors:
	Volume of Structure:
	Total Land Disturbed:
	Signature: 
Owner ☐ Contractor ☐	
SUBCODE APPROVAL:	Estimated Cost of Building Work:
PLANS: Required ☐ Approved ☐	New Building (1): \$
Approved by:	Alteration (2): \$ 7,400.00
Date:	TOTAL (1+2): \$
CONTRACTOR AFFIX SEAL:	SUBCODE APPROVAL:
	PLANS: Required ☐ Approved ☐
	Approved by:
	Date: