



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 1228 Forge Pond Rd.

2. Name of Owner in Fee: Smith, Harry Tel: [REDACTED]

Address Same street municipality 132- zip code

3. Ownership in Fee: Public _____ Private ☒

4. Principal Contractor: _____ Tel. (____) _____

Address _____ **SOLD, FURNISHED AND INSTALLED BY MARK FOUR ENTERPRISES, INC.**

License No. OR, if new home, Builder Reg. No. _____ **A SEARS AUTHORIZED CONTRACTOR**

Federal Employee No. 22175117 **2702 CINDEL DRIVE, UNIT #1 • CINNAMINSON, NJ 08077**

5. Architect or Engineer _____ Tel. (____) _____

Address _____

6. Responsible Person in Charge of Work James M. Leen

Tel. (609) 86-5100 FAX (____) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>410.-</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>13.-</u>		
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>423.-</u>		

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 _____ no _____	
11. Max. Live Load _____	
12. Max. Occupancy Load _____	

II. PROPOSED WORK	Est. Cost	OPTIONAL (for office use only)								
		Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re- viewer	Resubmission Dates		Re- viewer	
1. ☐ Minor Work							Approval	Rejection		
2. ☐ New Building										
3. ☐ Addition										
4. ☒ Alteration	16,300									
5. ☐ Fire Protection										
6. ☐ Plumbing										
7. ☐ Electrical										
8. ☐ Elevator Devices										
9. ☐ Asbestos Abat. Subch. 8										
10. ☐ Lead Hazard Abatement										
11. ☐ Demolition										
TOTAL COSTS			IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?							

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	5. ☐ Cross-Connections/Backflow Preventers
2. ☐ High Pressure Boilers	6. ☐ Hazardous Uses/Places of Assembly
3. ☐ Pressure Vessels	7. ☐ Sprinklers
4. ☐ Refrigeration Systems	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: _____

9/8/97 called for Harry

Redberg

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.

SOLD, FURNISHED AND INSTALLED BY MARK FOUR ENTERPRISES, INC.

Agent Name _____ **A SEARS AUTHORIZED CONTRACTOR**

Address _____ **2702 CINDEL DRIVE, UNIT #1 • CINNAMINSON, NJ 08077**

Telephone (609) 786-5100

Signature Nancy T. Reid

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 _____
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 #

9/15/97

2800-97

IDENTIFICATION Block

848

Lot

4

SOLD, FURNISHED AND INSTALLED BY MARK FOUR ENTERPRISES, INC.

A SEARS AUTHORIZED CONTRACTOR

Work Site Location

1728 Forge Pond Rd.

Contractor

2702 CINDEL DRIVE, UNIT #1 • CINNAMINSON, NJ 08077

Address

Owner in Fee

Smith, Harry

Address

Same

Tel



Tele.

(609) 86-5100

Lic. No. or Bldrs. Reg. No.

Exp. Date

Federal Emp. No.

221775117

0004

or Social Security No.

2800**

is to be the following work:

- ☐ BUILDING ☐ PLUMBING ☐ OTHER _____
☐ ELECTRICAL ☐ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Install 3/4" insulation
then 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 \$

16,300

CONSTRUCTION OFFICIAL

(see reverse side)

PAYMENTS (Office Use Only)

Building	410	848 H	0.00
Electrical	LDT		0.00
Plumbing		4 #	
Fire Protection	BUILDING		4.00
Elevator Devices	D.C.A.		3.00
Other	TOTAL		4.30
DCA Training Fee	13	CHECK	4.30
Cert. of Occ.	CHANGE		0.00
Other	09/15/97 NO. 5 0015A005		1.12
Total	423		
Check No.	# 2800		
Cash			
Collected By:	JS		



**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 848 Lot 4

Work Site Location 1728 Forge Pond Rd.

Owner in Fee Smith, Harry

Address _____

Tele. _____

Contractor _____

Address _____

Tele. 609, 786-5700

Lic. No. or Bldgs. Reg. No. _____

Federal Emp. No. 221575717

2702 CINDEL DRIVE, UNIT #1 • CINNAMINSON, NJ 08077

SOLD, FURNISHED AND INSTALLED BY MARK FOUR ENTERPRISES, INC.
A SEARS AUTHORIZED CONTRACTOR

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: _____

Approved by: _____

INSPECTIONS

Type: _____

Footing _____

Foundation _____

Slab _____

Frame _____

Barrier-Free _____

Insulation _____

Finishes _____

Energy _____

Mechanical _____

TCO _____

Other _____

Final _____

Barrier-Free _____

Dates (Month/Day)

Failure _____

Failure _____

Approval _____

Initial _____

B. BUILDING CHARACTERISTICS

Use Group _____

Present _____

Proposed _____

Const. 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. \$ _____

2. Alteration \$ _____

3. Total (1+2) \$ 16,300



Date Received _____
Date Issued _____
Control # _____
Permit # _____

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 Henry J. Reid

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Install 3/4" insulation their vinyl siding

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)

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

DCA Training Fee \$ _____

TOTAL FEE \$ _____

U.C.C. F110

(rev. 3/85)

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

SEARS

HOME IMPROVEMENTS

28 August 1997

Township of Brick
Building Department
401 Chambers Bridge Road
Brick, New Jersey 08723

Attn: Building Inspector

Enclosed you will find our permit application for the installation of vinyl siding at the home of: Mr. Harry Smith; 1728 Forge Pond Road. Total cost of work \$16,300.

Please call Nancy T. at 609-786-5100 to advise the cost of this permit. Thank you in advance for your prompt handling of this matter.

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

Yours truly,



Nancy T. Reid
Branch Coordinator

Enclosure

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