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

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

Certain information contained in this file is ***Exempt from Release*** under the Open Public Records Act (OPRA) (Public Law 2001, CHAPTER 404 (N.J.S.A. 47:1A-1 et seq.)) and Executive Orders issued by the Governor of New Jersey. The following information ***MUST*** be redacted prior to release:

- 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 845 LOT 35 QUALIFICATION CODE _____ ADDRESS (SITE) 1695 Tilford Blvd. PERMIT NO. 21-0448

CONSTRUCTION PERMIT APPLICATION

C-21-000371

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

I. IDENTIFICATION

1. Proposed Work Site at: 1695 Tilford Blvd Brick
2. Name of Owner in Fee: Gary Fattaruso
   Tel [redacted] e-mail [redacted]
   Address Same (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Hydroscience Group Tel. 7323499692
   Address 215 A Atlantic City Blvd e-mail office@hydro
   Bayville, NJ. group.us
   License No. OR, if new home, Builder Reg. No. US00702 Exp. Date 7-31-21
   Home Improvement Contractor Registration No. or Exemption Reason 13VH09784600
   Federal Emp. ID No. 81-4859938 FAX: 7323499729
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. _____ FAX: _____
6. Responsible Person in Charge once Work has Begun Gary Yedman
   Tel. 732 349 9692 FAX: 732 349 9729

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical			
3. Plumbing			
4. Fire Protection		150	
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	150	

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 — UST Removal
- ☐ Repair
- ☐ New Building
- ☐ Addition
- ☐ Demolition
- ☐ 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	1100				2/11/21				
☐ Elevator									
TOTAL COST	1100								

BRICK TOWNSHIP FIRE PREVENTION BUREAU APPROVED FEB 11 2021

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 _____

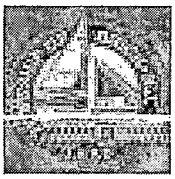
III. PLAN REVIEW (optional)

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 03/24/2021
Control Number C-21-000371
Permit Number 21-0448
Permit Issue Date 02/23/2021
Certificate Number 21-0448

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1695 TILFORD BLVD Brick Township, NJ Block: 845 Lot: 35 Qual:

Owner in Fee: FATTARUSO, GAIL

Owner Address: 1695 TILFORD BLVD BRICK NJ 08724

Telephone: [redacted]

Contractor HYDROSCIENCE INC

Address 215 ATLANTIC CITY BLVD. BAYVILLE NJ 08721

Telephone: (732) 349-9692 Fax: (732) 349-9729 Federal Emp. Number: 22-3207567

License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: TANK REMOVAL - ...REMOVE 290 GALLON UST

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: 03/24/2021

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

Fee: $0.00
Check Number:
Collected By:

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(f)1.ix:

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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. 5:23-2.15(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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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 Hydroscience Group

Address 215 Atlantic City Blvd
Bayville, NJ 08721

Telephone 732 349-9692

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received Control # 2/23/21

Date Issued Permit # 21-0448

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

Block 845 Lot 35 Qualification Code _____

Work Site Location 1695 Tilford Blvd Brick

Owner in Fee: Gail Fatarusso

Tel. [redacted] mail [redacted]

Address Same (street, municipality, zip code)

Contractor: Hydroscience Group Tel. (732) 349-9692

Address 215 Atlantic City Boulevard e-mail office@hydrogroup.us

Bayville, NJ 08721

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____

Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____

Fire Alarm Contractor No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason 13VH09784600

Federal Emp. ID No. 814859938 FAX: (732) 349-9729

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other _____

Location: back yard

Total Cost of Fire Protection Work $ 1100

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible

Capacity _____

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel: _____

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve: _____

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.

Applicant/Contractor sign here: _____

Print name here: Gary Yedman

D. TECHNICAL SITE DATA [X] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK: removal of UST 290 gal

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices _____		
TOTAL	0	
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other _____		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other _____		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date _____ Approved by: _____

[X] Fire Protection Plans Approved

Date 2/23/21 Approved by: _____

Joint Plan Review Required

[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date 3/1/21

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

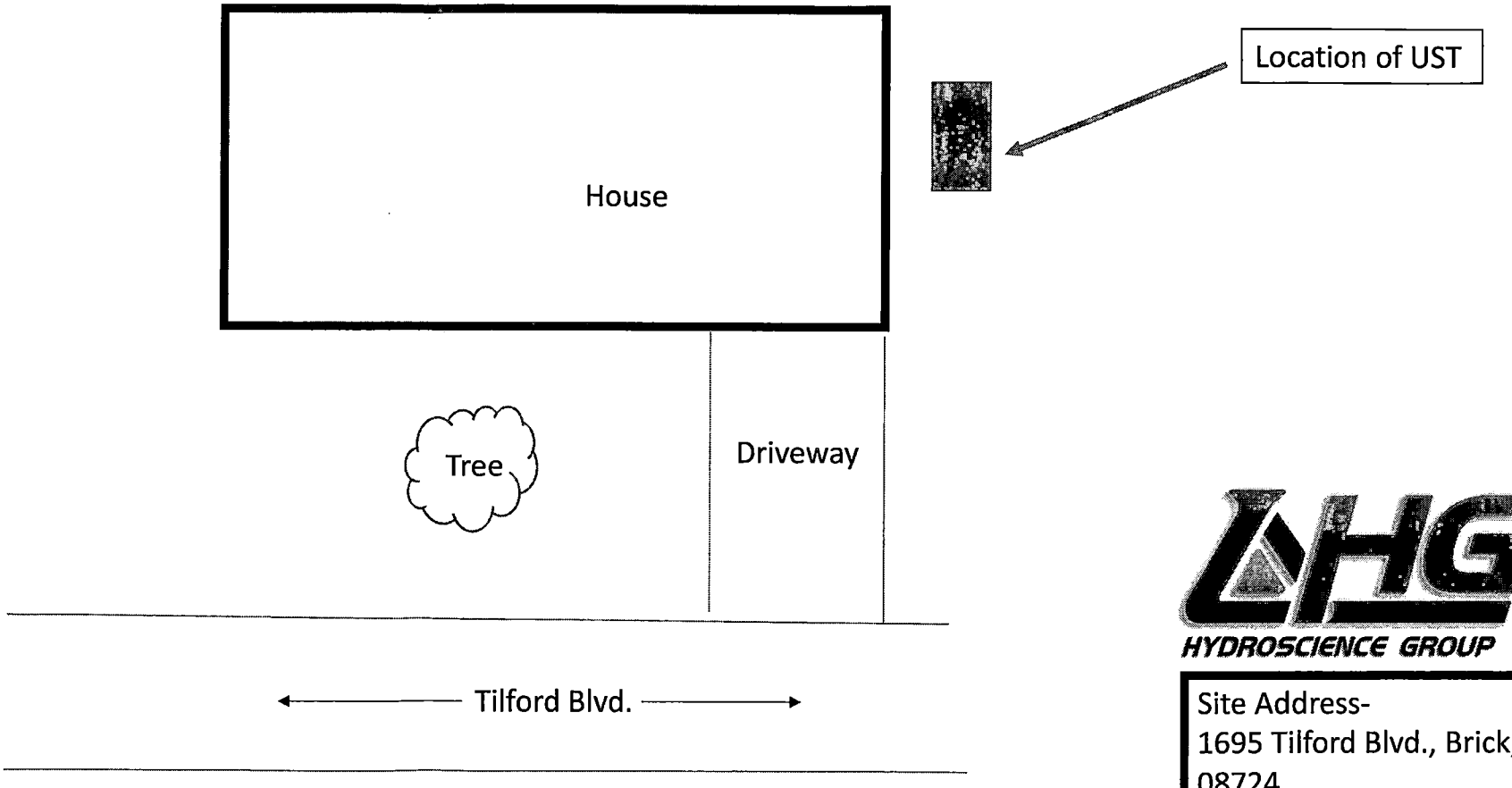
[ ] CO [ ] TCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final	3/3/21		3/3/21	
Other				

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.



HYDROSCIENCE GROUP

Site Address-
1695 Tilford Blvd., Brick, NJ
08724

21-0448

HYDROSCIENCE GROUP

845 00
21-0448

RECEIVED
MAR 12 2021
BUILDING

March 8, 2021

Brick Township
401 Chambers Bridge Road
Brick, NJ 08723
Attn: Building Department

RE: Underground Storage Tank Removal
1695 Tilford Blvd. Brick, NJ
Permit # 21-0448

To whom it may concern:

Following this letter is the documentation to effectively close out the tank removal permit taken out for the above referenced property. With submittal of the attached information, Hydroscience Group would like to request a certificate of approval be issued from your department. Hydroscience Group has enclosed a self-addressed envelope for your convenience, or you can email it to us at office@hydrogroup.us.

Should you have any questions or concerns, please do not hesitate to contact me at (732) 349-9692 ext. 101 or at gyedman@hydrogroup.us.

For the firm:
Hydroscience Group

Gary Yedman
Project Manager

HYDROSCIENCE GROUP

March 8, 2021

Gail Fattaruso
1695 Tilford Blvd.
Brick, NJ, 08724

RE: Underground Storage Tank Removal
1695 Tilford Blvd. Brick, NJ
Permit # 21-0448

Dear Ms. Fattaruso:

On March 8, 2021, Hydroscience Group removed one 290-gallon heating oil tank from the above referenced address. Upon removal of the tank, no evidence of a discharge was noted. The storage tank was cleaned and disposed of according to NJDEP standards.

All of the necessary tank removal documentation has been submitted to your township building department in order to properly close out your permits. Copies of the tank recycling receipt, clean fill receipt, inspection sticker and liquid contents disposal receipt have been included for your records.

Hydroscience Group is pleased to have had the opportunity to serve your environmental needs. Should you have any questions or concerns, please do not hesitate to contact our office at (732) 349-9692.

For the firm:
Hydroscience Group

Meghan Donaldson

Meghan Donaldson

CC: Brick Township Building Department

215 Atlantic City Boulevard, Bayville NJ 08721
P: 732.349.9692 F: 732.349.9729 HIC# 13VH09784600

Trader Copy

European Metal Recycling Ltd

Purchase Ticket

Ticket No/Depot: 6032173 D312FER
Date/Time : 08-Mar-21 13:30
Account No : LHGE601
PRODUCER & TRANSPORTER
Trader : HG ENVIRONMENTAL SER
Address : PO BOX 4978, TOMS RIVER, NJ, 08754, US
Vehicle Reg : NJ
Arising Point : LHGE601
Weighman Name : JON/JOE

No	Metal	Paid	UM	Rate	UM	CDed	Amount
1	OS1	280	LB	9.0000	CWT	0	
	OVERSIZE NO 1						
	Gross :	17,280	(08-Mar-21 13:11)				
	Tare :	17,000	(08-Mar-21 13:29)				
	W.Ded :	0					
TOTALS	LB:	280					25.20
	UNITS:	0					

Trader Print Name _____

Trader Signed _____

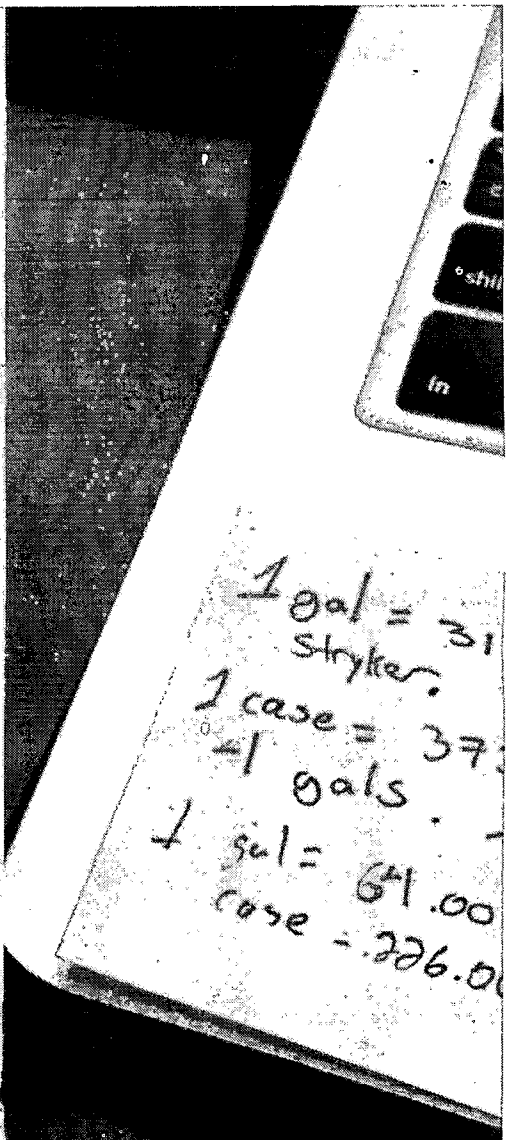
EMR Print Name _____

EMR Signed _____

Material is loose unless otherwise specified.

Declaration of Ownership

My signature confirms that I am the sole legal owner of and am legally authorized to sell the goods being sold. By signing above I certify that I did not obtain and do not possess the identified goods through unlawful means. I am the full age of eighteen years and the identification presented is valid and correct.



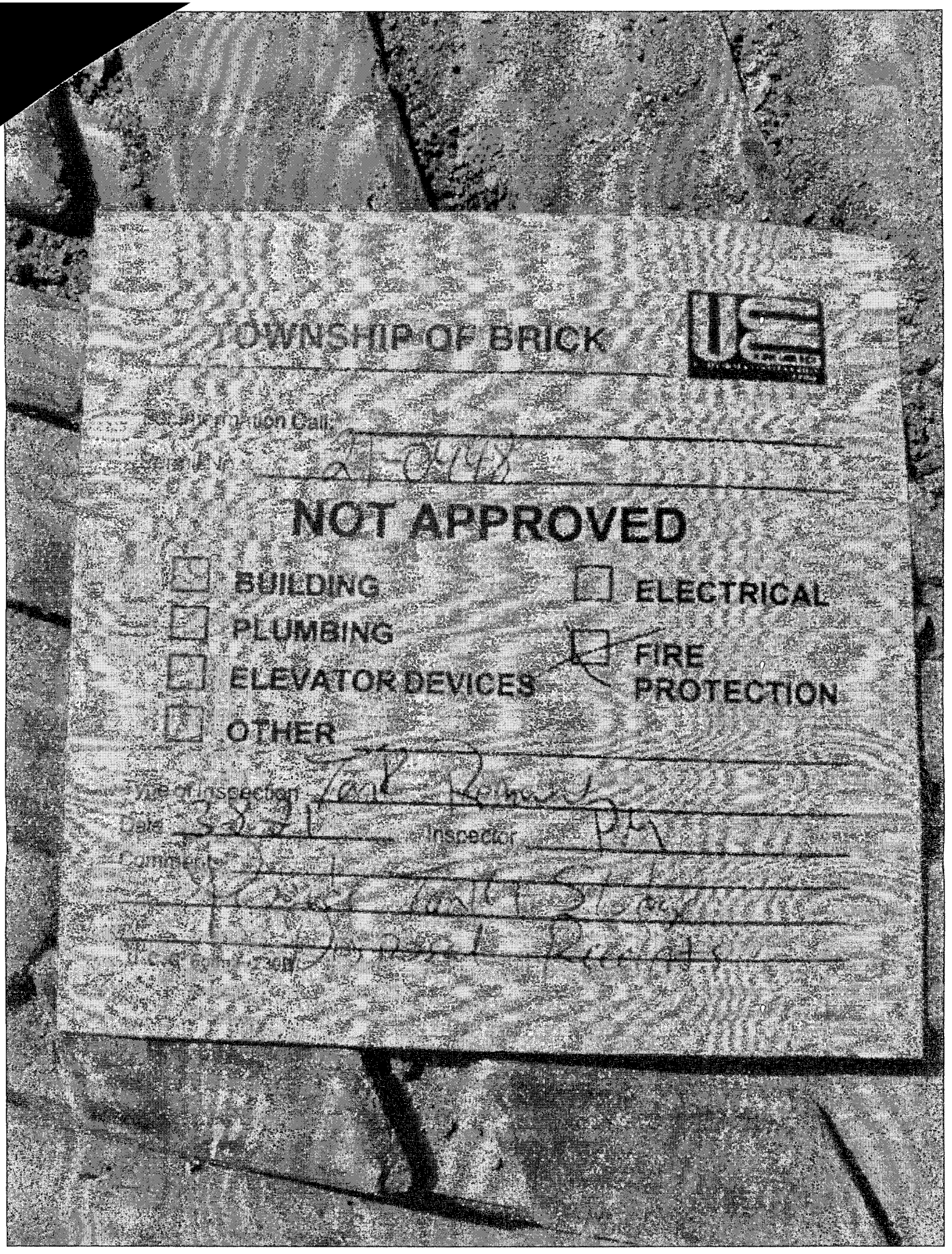
NEW JERSEY GRAVEL & SAND CO., INC.
P.O. Box 1441
WALL, N.J. 07719
Phone 732-938-5252 Fax 732-938-4607

HYDROSCIENCE GROUP
215 ATLANTIC CITY BOULEVARD
BAYVILLE, NJ 08721

This letter is to certify that the Sand Fill you purchase from us is free of any contaminants or debris. It is considered environmentally safe. We stockpile from a variety of locations, however, all samples are virgin material.

Very truly yours,

Pat Kennedy


TOWNSHIP OF BRICK
NOT APPROVED
BUILDING
ELECTRICAL
PLUMBING
FIRE PROTECTION
ELEVATOR DEVICES
OTHER
Date
Inspector

STRAIGHT BILL OF LADING – SHORT FORM

NOTICE: Shippers of hazardous materials must enter 24-hour emergency response telephone number under "Emergency Response Phone Number."

Date 3-8-2021 Bill of Lading No.

Original—Not Negotiable Hydroscience Group (Name of Carrier) Shipper No.

Carrier No. NJD980536?

TO: Consignee	Lorco Petroleum	FROM: Shipper	Fattaruso
Street	1800 Carmen Street	Street	1695 Tilford Blvd
Destination	Camden. N.J	Zip Code 08105	Origin Brick Zip Code
Route:	Vehicle No.	SCAC	Emergency Response Phone Number 7323499641

No. Shipping Units	+HM.	Kind of Packaging, Description of Articles Special Marks and Exceptions	Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of National Motor Freight Classification, Item 360.	Weight (Subject to Correction)*	Rate or Class	CHARGES
		15 NON DOT				
		Total NON RCRA				
		# of ID # 72				
		gallons 9.9% Water				
		1% #2 heating oil				
		removal				

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading state whether weight is "carrier's or shipper's weight."

REMIT C.O.D. TO: ADDRESS

C.O.D. Amt. $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$ per

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.

The carrier shall not make delivery of this shipment without payment of freight and all other charges.

(Signature of Consignor)

FREIGHT CHARGES Check Appropriate Box:

☐ Freight prepaid

☐ Collect

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classifications in effect on the date hereof, if this is a rail or a rail-water shipment or (2) in the applicable motor carrier classification or tariff, if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Mark with "X" if appropriate to designate Hazardous Materials as defined in the U.S. Department of Transportation Regulations governing the transportation of hazardous materials. The use of this column is an optional method for identifying hazardous materials on Bills of Lading per 172.201(a)(1) (iii) of Title 49 Code of Federal Regulations. Also when shipping hazardous materials, the shipper's certification statement prescribed in section 172.204(a) of the Federal Regulations, as indicated on the Bill of Lading does apply, unless a specific exception from the requirements is provided in the Regulation for a particular material.

The format and content of hazardous item list is the responsibility of individual company interpretation of requirements as described in 49 Code of Federal Regulations 172, Subpart C Shipping Papers. Such description consists of the following per Sections 172.201 (Hazardous Material Table) and Sections 172.202 and 172.203: Proper shipping name, hazardous class, UN identification number, packing group, and subsidiary class(es).

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 United States Code, Sections 14706(c (1)(A) and (B).

SHIPPER

PER Same as above

CARRIER Hydroscience Group

PER PO Box 4978, Toms River nj 08754

1 This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation.

Carrier acknowledges receipt of packages and any required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. Department of Transportation emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

CONSTRUCTION PERMIT

Date Issued 2/23/21
Control # C-21-000371
Permit # 21-0448

IDENTIFICATION Block: 845 Lot: 35 Qualifier
Work Site Location: 1695 TILFORD BLVD Brick Township, NJ
Owner in Fee FATTARUSO, GAIL
1695 TILFORD BLVD BRICK NJ 08724
Telephone: [redacted]

Contractor HYDROSCIENCE INC
Address 215 ATLANTIC CITY BLVD. BAYVILLE NJ 08721
Telephone: (732) 349-9692
Lic. No. or Bldrs. Reg. No. 13VH00981900 13VH09784600 US00702
Federal Employee. No. 22-3207567

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
TANK REMOVAL ...REMOVE 290 GALLON UST

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 $1,100

D. Nemura Jr. 2/12/21
Construction Official Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$0
Fire Protection	$150
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$0
CO Fee	
Other	$0
Total	$150
Check No.	913
Cash	$0
Credit	$0
Collected By	NV

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.

☑ 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:

☑ 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.

TANK ABATEMENT OR ASBESTOS NOTIFICATION

DATE: 1/28/2021

PROJECT: FaHaruso

STREET: 1695 Tilford Blvd

CONTRACTOR: Hydroscience Group LICENSE NO. US00702

ADDRESS: 216 Atlantic City Blvd, Bayville NJ

A.S.C.M.: _____ LICENSE NO. _____

MAILING ADDRESS: _____

OSHA AIR MONITOR: _____

ADDRESS: _____

BUILDING OWNER: Gail fattaruso

MAILING ADDRESS: 1695 Tilford Blvd

Brick, NJ PHONE: 7328043669

ENGINEER/ARCHITECT: _____

MAILING ADDRESS: _____

_____ PHONE: _____

WASTE HAULER: _____ LICENSE NO.: _____

LAND FILL: _____

TOWN: _____

JOB SIZE: (circle one) MINOR____ SMALL____ LARGE____

QUANITY OF WASTE GENERATED: CU YARDS _____

LINEAR FOOTAGE: _____

SQUARE FOOTGAE: _____

PROPOSED START DATE: _____ PROPOSED FINISH DATE: _____

COST OF WORK: $_____

CONSTRUCTION PERMIT # _____ DATE: _____

STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION

Certifies That

HYDROSCIENCE GROUP CORPORATION
215 ATLANTIC CITY BLVD
Bayville, NJ 08721

Having duly met the requirements of the
Underground Storage Tank Certification Program
N.J.S.A. 58:10A-24.1-8
Is hereby approved to perform the following services:

CLOSURE
SUBSURFACE EVALUATION

[redacted]N DATE

US00702
CERTIFICATION NUMBE

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Home Improvement Contractors

HAS REGISTERED

HYDROSCIENCE GROUP CORP
Gary Yedman, Robert Salt
215 Atlantic City Blvd
Bayville NJ 08721

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

03/11/2020 TO 03/31/2021
VALID

13VH09784600
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

Paul Rodriguez
ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Home Improvement Contractors
HAS REGISTERED
HYDROSCIENCE GROUP CORP
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBERS LICENSE

03/11/2020 TO 03/31/2021
VALID

SIGNATURE

13VH09784600
License/Registration/Certificate #

Paul Rodriguez
ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Home Improvement Contractors
P.O. Box 45016
Newark, NJ 07101

PLEASE DETACH HERE

HYDROSCIENCE GROUP

January 28, 2021

Brick Township
401 Chambers Bridge Road
Brick, NJ 08723
Attn: Building Department

RE: Underground Storage Tank Removal
1695 Tilford Blvd. Brick, NJ

To whom it may concern:

Enclosed is the permit application for removal of one underground storage tank located at the above referenced address. Any liquid contents and/or sludge remaining in the underground storage tank will be removed prior to removal and disposed of at a state licensed recycling facility. The underground storage tank will be cut and cleaned in accordance with the New Jersey Department of Environmental Protection Standards. The removed tank will also be disposed of at the state licensed recycling facility.

Should you have any questions or concerns, please do not hesitate to contact me at (732) 349-9692 or at gyedman@hydrogroup.us.

For the firm:
Hydroscience Group

Meghan Donaldson

Meghan Donaldson
Technical Administrator

BRICK TOWNSHIP RECEIVED FEB 1 RECD BUILDING DEPARTMENT

215 Atlantic City Boulevard, Bayville NJ 08721
P: 732.349.9692 F: 732.349.9729 HIC# 13VH09784600