

BLOCK 845 LOT 25 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 14-6373



CONSTRUCTION PERMIT APPLICATION

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

C14-200574

I. IDENTIFICATION

1. Proposed Work Site at: 1703 Tilford Rd

2. Name of Owner in Fee: Jack Genz

Tel. [REDACTED] e-m [REDACTED]

Address 1703 Tilford Rd BRICK NJ 08723

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: Riviera Landscaping Tel. (732) 239 3639

Address 307 Wisteria Dr e-mail _____

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH05687900

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

5. Architect or Engineer _____ Contact _____

Address _____ e-mail _____

Tel. (____) _____ FAX: (____) _____

6. Responsible Person in Charge once Work has Begun John Kosty

Tel. (732) 239 3639 FAX: (____) _____

V. FEE SUMMARY (for office use only)

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

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)

- ☐ Building
- ☐ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer

TOTAL COST

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

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 _____



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 05/02/2014
Control Number C-14-000574
Permit Number 14-0373
Permit Issue Date 02/24/2014
Certificate Number 14-0373

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 1703 TILFORD BLVD Brick Township, NJ Block: 845 Lot: 25 Qual: _____
Owner in Fee: GENZ, JOHN L. & ANNA P.
Owner Address: 1703 TILFORD BLVD. BRICK NJ 08724
Telephone: [REDACTED]
Contractor: Riviera Landscape & Design, LLC
Address: 307 Wisteria Drive Brick NJ 08723
Telephone: (732) 239-3639 Fax: _____
License Number or Builders Registration Number: 13VH05687900 Federal Emp. 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: Demo for IG Pool

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 _____

Date Printed: 05/02/2014

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

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1



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 845 Lot 25 Qualification Code _____
 Work Site Location 1703 Telford Rd
 Block, lot 08723
 Owner in Fee: Jack Genz

Tel. _____ -mail _____

Address _____
 Contractor: Riviera Landscaping municipality _____ zip code _____
 Address 307 Wisteria Dr Tel. 732-237-3639
 e-mail RivieraLandscaping@comcast.net

Contractor License No. or Builder Registration No. _____ Exp. Date _____
 Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 3VH05687900
 Federal Emp. ID No. _____ FAX: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Failure	Failure	Approval	Initial
☐ No Plans Required			Type					
☐ All			Footing					
☐ Footings/Foundations			Footing Bond					
☐ Structural/Framework			Foundation					
☐ Exterior			Slab					
☐ Interior			Frame					
Joint Plan Review Required:			Truss Sys./Bracing					
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Barrier-Free					
SUBCODE APPROVAL for PERMIT			Insulation					
Date:			Finishes -Base Layer					
Approved by:			Finishes -Final					
SUBCODE APPROVAL for CERTIFICATE			Energy					
☐ CO ☐ CCC			Mechanical					
Date:			TCO					
Approved by:			Other					
			Final					
			Barrier-Free					

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. \$ 5000

2. Rehabilitation \$ _____

3. Total (1 + 2) \$ 0

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:

Print name here: John Kostel

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Inground Pool Demo

Open hole inspection
Prior to back fill *
"required"

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence _____ Height (exceeds 6') _____ Sq. Ft.
- ☐ 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 \$	

Date Received 2/24/14
 Control # _____
 Date Issued 14-6373
 Permit # _____



Riviera Landscape & Design LLC

307 Wisteria Drive

Brick, NJ 08723

(732) 920-2750

140373

To: Matt

From: John Kostyz

Number of pages including cover: 9

Comments:

Matt,

Here are all receipts for the pool demo job at 1703 Tilford Blvd.
Please set up a final inspection

845/25

Thank You,

John Kostyz

Owner

Riviera Landscape & Design, LLC

732-239-3639

Rivieralandscaping@comcast.net

OCEAN COUNTY RECYCLING CENTER, INC.

1497 LAKEWOOD ROAD (RT. 9)

TOMS RIVER, NJ 08755

NJDEP# CBG040002,

Hours of Operation

Monday thru Friday 7:00 am - 5:00 pm

Saturday **call for hours**

Invoice No :456381

Date :3/25/14

Phone : (732)244-1716

Fax : (732)914-0373

Customer: 2393639
Riviera Landscape & Design
307 Wisteria Drive

Brick, NJ 08723

Truck : XN241X RIVIERA LANDSCAPE & DESIGN
Location: 1507 BRICK TWP.

Gross : 13140 lb Scale 1 In 12:45 pm
Tare : 7800 lb STORED Out 12:45 pm
Net : 5340 lb

Weigh Master: DP

Remarks:

Material \$ 21.36
Delivery \$ 0.00
Misc \$ 0.00
Tax \$ 0.00
Total \$ 21.36

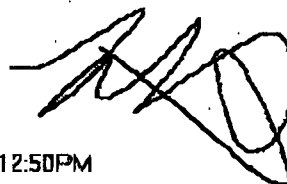
MATERIAL ID	QTY	UNIT-\$	MATERIAL DESCRIPTION	TAX-\$	TOTAL-\$
00064	2.67 tn	\$8.00	CONCRETE/DIRT		\$21.36
					\$21.36

I hereby certify that there are no contaminants or non specified materials in the load. The information on this form is true and accurate to the best of my knowledge.

Driver's Signature:



03/25/14 12:50PM



OCEAN COUNTY RECYCLING CENTER, INC.1497 LAKEWOOD ROAD (RT. 9)
TOMS RIVER, NJ 08755
NJDEP# CBG040002,Hours of Operation
Monday thru Friday 7:00 am - 5:00 pm
Saturday **call for hours**

Invoice No :455562

Date :3/12/14

Phone :(732)244-1716

Fax :(732)914-0373

Customer: 2393639
Riviera Landscape & Design
307 Wisteria Drive

Brick, NJ 08723

Truck :	XN241X	RIVIERA LANDSCAPE & DESIGN	Gross :	15560	lb	Scale 1	In	2:23 pm
Location:	1508	TOMS RIVER TOWNSHIP	Tare :	7800	lb	STORED	Out	2:23 pm
			Net :	7760	lb			

Weigh Master: DP

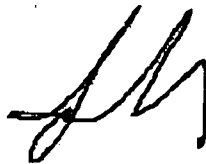
Remarks:

Material \$	31.04
Delivery \$	0.00
Misc \$	0.00
Tax \$	0.00
Total \$	31.04

MATERIAL ID	QTY	UNIT-\$	MATERIAL DESCRIPTION	TAX-\$	TOTAL-\$
00064	3.88 tn	\$8.00	CONCRETE/DIRT		\$31.04
					\$31.04

I hereby certify that there are no contaminants or non specified materials in the load. The information on this form is true and accurate to the best of my knowledge.

Driver's Signature:



03/12/14 2:29PM

OCEAN COUNTY RECYCLING CENTER, INC.
1497 LAKEWOOD ROAD (RT. 9)
TOMS RIVER, NJ 08755
NJDEP# CBG040002,

Hours of Operation
Monday thru Friday 7:00 am - 5:00 pm
Saturday **call for hours**

Genz Pool

Invoice No : 455528
Date : 3/12/14
Phone : (732)244-1716
Fax : (732)914-0373

Customer: 2393639
Riviera Landscape & Design
307 Wisteria Drive

Brick, NJ 08723

Truck :	XN241X	RIVIERA LANDSCAPE & DESIGN	Gross :	15980	lb	Scale 1	In	11:05 am
Location:	1508	TOMS RIVER TOWNSHIP	Tare :	7800	lb	STORED	Out	11:05 am
			Net :	8180	lb			

Weigh Master: DP

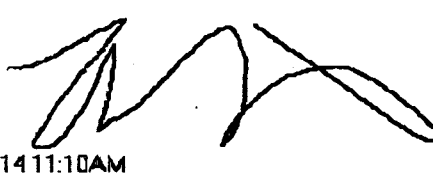
Remarks:

Material \$	32.72
Delivery \$	0.00
Misc \$	0.00
Tax \$	0.00
Total \$	32.72

MATERIAL ID	QTY	UNIT-\$	MATERIAL DESCRIPTION	TAX-\$	TOTAL-\$
00064	4.09 tn	\$8.00	CONCRETE/DIRT		\$32.72
					\$32.72

I hereby certify that there are no contaminants or non specified materials in the load. The information on this form is true and accurate to the best of my knowledge.

Driver's Signature:



03/12/14 11:10AM

Genz Pool

OCEAN COUNTY RECYCLING CENTER, INC.
1497 LAKEWOOD ROAD (RT. 9)
TOMS RIVER, NJ 08755
NJDEP# CBG040002,

Hours of Operation
Monday thru Friday 7:00 am - 5:00 pm
Saturday **call for hours**

Invoice No :455484
Date :3/11/14
Phone : (732)244-1716
Fax : (732)914-0373

Customer: 2393639
Riviera Landscape & Design
307 Wisteria Drive

Brick, NJ 08723

Truck :	XN241X	RIVIERA LANDSCAPE & DESIGN	Gross :	14700	lb	Scale 1	In	3:16 pm
Location:	1507	BRICK TWP.	Tare :	7800	lb	STORED	Out	3:16 pm
			Net :	6900	lb			

Weigh Master: DP

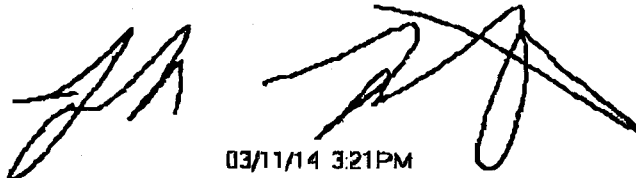
Remarks:

Material \$	27.60
Delivery \$	0.00
Misc \$	0.00
Tax \$	0.00
Total \$	27.60

MATERIAL ID	QTY	UNIT-\$	MATERIAL DESCRIPTION	TAX-\$	TOTAL-\$
00064	3.45 tn	\$8.00	CONCRETE/DIRT		\$27.60
					\$27.60

I hereby certify that there are no contaminants or non specified materials in the load. The information on this form is true and accurate to the best of my knowledge.

Driver's Signature:



03/11/14 3:21PM

C&D DISPOSAL

31 Wilson Dr
Howell NJ 07731
(732) 671-1500

Date 3/28/14

Riviera Landscape agrees to rent 15 cubic yd container from C & D Disposal. The container is to be placed at 1703 T. Blvd Blvd Bricks for a period of 7 days at a cost of \$450 with a 2 1/2 ton limit. \$100 per ton for overweight container.

After 7 days there is a \$25 per day charge. If the load is rejected at the landfill/transfer station the container will be returned to the site. There will then be a \$100 charge for the rejected load and an additional \$25 charge for each day until container is loaded without prohibited items.

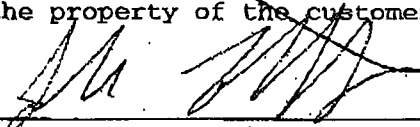
Prohibited item are as follows: asbestos items, tires and flammable material. Customer agrees to give access to containers.

Waiver and release of claims:

The customer hereby acknowledges that the delivery and pick up of containers shall require the movement of heavy equipment onto the customer's property and that the weight of the container during use may cause damage to the property of the customer. The customer agrees to hold harmless and waive any claim against C & D Disposal for property damage and or personal injuries that may occur as a result of the pick up, deliver and or use of container which is the subject of this agreement.

Indemnification agreement:

The customer agrees that C & D Disposal shall not be responsible for damages incurred by third persons for personal injury or property damage in connection with the use of the container. The customer hereby agrees to fully indemnify and hold harmless C & D Disposal from any lawsuits instituted against C & D Disposal by third parties alleging injuries or property damage or bodily injury resulting from such use or maintenance on the property of the customer.


(customer's signature)

(billing address)

CONTRACT

***300632**

Generator/Site:

C&D DISPOSAL

*****SCALE ACCT*****

HOWELL, NJ 07731

Bill To:

C&D DISPOSAL

31 WILSON DR

HOWELL, NJ 07731

Gross	23,260	lb	NONE
Tare	20,260	lb	NONE
Adjustments	0		
Net	3,000	lb	
Tons	1.500		

Ticket No: 300632
Date: 04/09/2014
Inbound: 3:44 pm
Outbound: 3:54 pm
Account No: 85139000

PO/Release No:

Service Order:

Contract #:

Driver: JLEWIS

Vehicle No: XN329L

Veh SW Decal:

Veh Plate:

Trailer No:

Trl SW Decal:

Trl Plate:

Container No:

Minimum Weight:

Inbound FCIMRF

Transporter: NONE

Township:

Origination:

BRICK TOWNSHIP

Material	Weight	Price	Materials	Totals
13C C&D WASTE	3,000.00	\$81.00	\$121.50	\$121.50

Scale Master Signature: _____

Driver Signature: _____

Materials	\$121.50
Taxes/Fees	\$0.00
Total Due	\$121.50



CONSTRUCTION PERMIT

Date Issued 2/24/2014
Control # C-14-000574
Permit # 14-0373

IDENTIFICATION Block: 845 Lot: 25 Qualifier _____
Work Site Location: 1703 TILFORD BLVD Brick Township, NJ Contractor Riviera Landscape & Design, LLC
Address 307 Wisteria Drive Brick NJ 08723
Owner in Fee GENZ, JOHN L. & ANNA P. Telephone: (732) 239-3639
1703 TILFORD BLVD. BRICK NJ 08724 Lic. No. or Bids. Reg. No. 13VH05687900
Telephone: _____ Federal Employee No. _____

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:

Demo for IG Pool

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 \$5,000

Construction Official _____

Date _____

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$75
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$75
Check No.	
Cash	\$0
Credit	\$0
Collected By	

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.



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 845 Lot 25 Qualification Code _____

Work Site Location 1703 Tilford Rd

Owner in Fee: Jack Genz

Tel. _____ mail _____

Address _____

Contractor: Kevin's Landscaping Tel. 732-237-3639

Address 307 Websteria Dr e-mail kevin@landscaping.com

Contractor License No. or Builder Registration No. _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 3VH05687900

FAX: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Dates (Month/Day)	Initial
☐ No Plans Required			Footings		Failure	Approval
☐ All			Footings Bonding			
☐ Footings/Foundations			Foundation			
☐ Structural/Framework			Slab			
☐ Exterior			Frame			
☐ Interior			Truss Sys./Bracing			
☐ Joint Plan Review Required			Barrier-Free			
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation			
☐ SUBCODE APPROVAL FOR PERMIT			Finishes - Base Layer			
☐ SUBCODE APPROVAL FOR CERTIFICATE			Finishes - Final			
☐ Energy			Mechanical			
☐ Mechanical			TCO			
☐ CO ☐ CCO ☐ CA			Other			
☐ Date			Final			
☐ Approved by			Barrier-Free			

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 _____

Const. Class Present _____ Proposed _____

If Industrialized Building:

State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. \$ 5200

2. Rehabilitation \$ _____

3. Total (1+2) \$ 0

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: _____

Print name here: John Kostylo

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Englewood Pool Demo

Open hole inspection
Prior to back fill *
"required"

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Rehabilitation

☐ Roofing

☐ Siding

☐ Fence _____ Height (exceeds 6') _____ Sq. Ft.

☐ Sign _____ Sq. Ft.

☐ Pool _____ Sq. Ft.

☐ 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 \$

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 1703 Tilford Rd

BLOCK: 845 LOT: 25

CONTRACTOR: Riviera Landscaping

CONTRACTOR'S ADDRESS: 307 Wisteria Dr

Type of Construction(minor, new home): Demo

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

Party responsible for removal: Riviera landscaping

Dumpster Size: 15 or 20 yd

Destination of Debris: Landfill Rt 70

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."


Signature

2/24/14
Date

John Kostyz
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
Riviera Landscape & Design LLC
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

01/07/2014 TO 12/31/2014

VALID

SIGNATURE

13VH05687900

License/Registration/Certificate #

DIRECTOR

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 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. 5:23-2.15(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 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 _____

Address _____

Telephone (_____) _____

Signature _____

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