



CONSTRUCTION PERMIT APPLICATION

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

C-18-001295

I. IDENTIFICATION

1. Proposed Work Site at: 1675 Tilford Blv

2. Name of Owner in Fee: Joan Brantley

Tel. [REDACTED] e-mail Brick

Add [REDACTED] street [REDACTED] municipality [REDACTED] zip code [REDACTED]

3. Ownership in Fee: Public ☐ Private ☐

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

NJR Home Services
 1415 Wyckoff Rd., Wall NJ 07719
 Tel. 1.877.466.3657 Fax. 732-938-3010
 Contractor License No. 13VH00361500
 HVACR License No. 19HC00366400
 Federal Employee No. 22-3609806

FRANK CASEY TEL. 732-919-8090

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

6. Responsible Person in Charge once Work has Begun _____

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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$	<u>180</u>	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices <u>Mechanical</u>			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee		<u>7</u>	
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$	<u>187</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. 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 _____

(office use only)

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

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)

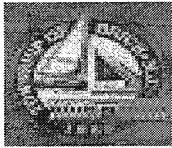
DO YOU WANT:

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

RECEIVED
APR 13 2018



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 6/8/2018
Control Number C-18-001295
Permit Number 18-1000
Permit Issue Date 4/16/2018
Certificate Number 18-1000

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 1675 TILFORD BLVD Brick Township, NJ Block: 838 Lot: 33 Qual: _____
Owner in Fee: BRANTLEY, JOAN T
Owner Address: 1675 TILFORD BLVD BRICK NJ 08724
Telephone: [REDACTED]
Contractor NUK HOME SERVICES
Address 1415 WYCKOFF ROAD WALL NJ 07719
Telephone: (877) 466-3657 Fax: (732) 938-3010
License Number or Builders Registration Number: _____ Federal Emp. Number: 22-3609806

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: SERVICE

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

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.

NJR Home Services
1415 Wyckoff Rd., Wall NJ 07719
Tel. 1.877.466.3657 Fax. 732-938-3010
Contractor License No. 13VH00361500
HVACR License No. 19HC00366400
Federal Employee No. 22-3609806

FRANK CASEY TEL. 732-919-8090

Frank Casey

- 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.



ELECTRICAL SUBCODE TECHNICAL SECTION



copy

Date Received
Control #
Date Issued
Permit #

16-1005

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

Block 838 Lot 33 Qualification Code

Work Site Location 1675 T3107d Hwy Brick

Owner in Fee: John Brancino

Tel: e-mail:

Address: steel municipality zip code

Contractor: NJR HOME SERVICES Tel: (732) 938-1105

Address: 1415 WYCKOFF RD e-mail: WALL, NJ 07719

Contractor License No: 12312 Exp. Date: 3/7/11

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13HV00361500

Federal Emp. ID No: 22-3609806 FAX: (732) 938-3010

B. ELECTRICAL CHARACTERISTICS

Use Group Present X Proposed

[] Pole/Pad # [] Temporary [] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work \$ 3600.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW INSPECTIONS

[] No Plans Required Type: Failure Failure Approval Initial

[] Partial Underslab Utilities Approved Rough, Barrier-Free

Date: Approved by: Trench

[] Electric Plans Approved Temp. Serv.

Date: Approved by: Constr. Serv.

Joint Plan Review Required: TCO

[] Bldg. [] Plumb. [] Fire. [] Elev. Other

SUBCODE APPROVAL for PERMIT Service

Date: Final

Approved by: Barrier-Free

SUBCODE APPROVAL for CERTIFICATE Temp. Cut-In-Card Date Issued

[] CO [] CCO Final Cut-In-Card Date Issued

Date: Annual Pool Inspection

Approved by: Date of Grounding and Bonding

Certification

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (owner, agent, or) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here:

[] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr. [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: REPLACE ELECTRICAL SERVICE (10 AMP)

QTY SIZE ITEMS FEE (Office Use Only)

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors - Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights

Storable Pool/Spa/Hot Tub

KW Elec. Range/Receptacle

KW Oven/Surface Unit

KW Elec. Water Heater

KW Elec. Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

KW Baseboard Heat

HP Motors 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$



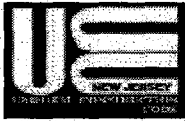
Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Permit Number
18-1000

Inspection Activity Report

Inspections for Permit Number 18-1000

Inspection Date	Inspection Type	Inspector	Subcode	Result	Owner	Location	Work Type	Work Description	Inspection Comments
05/25/2018	SERVICE/FINAL	Thomas Olson	Electrical	Fail	BRANTLEY, JOAN T	1675 TILFORD BLVD	Alteration	SERVICE	am water ground wire location Sink ground rod flush to grade Agent: NJR HOME SERVICES Phone: (877) 466-3657/
06/05/2018	Service	Patrick Callahan	Electrical		BRANTLEY, JOAN T	1675 TILFORD BLVD	Alteration	SERVICE	



CONSTRUCTION PERMIT

Date Issued 4/11/18
Control # 18-001295
Permit # 18-1000

IDENTIFICATION Block: 838 Lot: 33 Qualifier _____
Work Site Location: 1675 TILFORD BLVD Brick Township, NJ Contractor: NJR HOME SERVICES
Owner in Fee: BRANTLEY, JOAN T Address: 1415 WYCKOFF ROAD WALL NJ 07719
1675 TILFORD BLVD BRICK NJ 08724 Telephone: (877) 466-3657
Telephone: _____ Lic. No. or Bldrs. Reg. No. 19HC00366400 13VH00361500
Federal Employee No. 225300806

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:
SERVICE

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 \$3,600

David F. Newman
Construction Official

4/13/18
Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

#000

ELECTRICAL

DCA

CHECK

4. GOLD - APPLICANT

\$130.00

\$7.00

\$187.00

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.

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED
BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

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

THIS IS TO CERTIFY THAT THE
Board of Exam. of Electrical Contractors

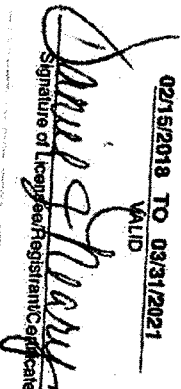
HAS LICENSED

NJR HOME SERVICES COMPANY
DANIEL J NEARY
1415 Wyckoff Road
Wall NJ 07719

FOR PRACTICE IN NEW JERSEY AS A(N): Electrical Business Permit

02/15/2018 TO 03/31/2021
VALID

34EB01231200
LICENSE/REGISTRATION/CERTIFICATION #


Signature of Licensee/Registrant/Certificate Holder


ACTING DIRECTOR

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
Division of Consumer Affairs

HAS REGISTERED

NJR HOME SERVICES COMPANY
Frank Casey, Manager-NJRHs Operations
1415 Wyckoff Road
Wall NJ 07719

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

03/08/2018 TO 03/31/2019
VALID

13VH00361500
LICENSE/REGISTRATION CERTIFICATION #

Francis Carl
Signature of Licensee/Registrant/Certificate Holder

Sharon J. Jones
ACTING DIRECTOR