caller 9/1/94

BLOCK 838 LOT 16 ADDRESS (SITE) 1672 FORGE POND RD. PERMIT NO. 2262-94

RECEIVED
AUG 29 1994

CONSTRUCTION PERMIT APPLICATION

DIV. OF INSPECTIONS

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

I. IDENTIFICATION

1 Proposed Work-site at: 1672 FORGE POND RD, BRICK, NJ.

2 Name of Owner in Fee: HELEN M. BROWN Tel. [redacted]

Address 1672 FORGE POND RD (street), BRICK (municipality), NJ 08724 (zip code)

3 Ownership in Fee: Public _____ Private ✓

4 Principal Contractor: SAME Tel. (____) _____

Address _____

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

Federal Emp No. _____ Social Security No. _____

5 Architect or Engineer _____ Tel. (____) _____

Address _____

6. Responsible Person In Charge of Work _____ Tel. (____) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 25 —		
2. Electrical			
3. Plumbing	40 —	✓	
4. Fire Protection	33	✓	
5. Other			
6. Subtotal	$ 98 —	✓	
7. Less 20% for State Plan Review	5 —	✓	
8. Subtotal	$		
9. DCA Training Fee	2 —	✓	
10. Subtotal	$		
11. Cert. of Occupancy	20 —	✓	
12. Other			
13. TOTAL	$ 125 —	✓	

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ____ ft.	
3. Area—Largest Floor ____ sq. ft.	
4. Building Area—All Floors ____ sq. ft.	
5. Volume of 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 ____ sq. ft.	
no	
11. Fire Grading	
12. Max. Live Load	
13. Max. Occupancy Load	

II. PROPOSED WORK

oil to gas

	Est. Cost
1 ☐ Minor Work (single trade)	
2 ☐ Small Job ($5,000 and no prior approvals)	
3 ☐ New Building	
4 ☐ Addition	
5 ☐ Alteration	
6 ☐ Fire Protection	
7 ☒ Plumbing	
8 ☐ Electrical	
9 ☐ Asbestos Abatement	
10 ☐ Demolition	
TOTAL COSTS	3000

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
WP	7/29/94		8/10/94	RL	10/13/94		
			8/4/94		9/13/94		
			8/3-94		9/9/94		

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1 ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2 ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction ____
After Construction ____
Net gain or loss ____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group. Indicate Former:

U.C.C. Form L 100A

LDS BR 10103497

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 Julia M Brown Date July 29, 1994

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date	COMMENTS
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Fire Department					X	X	X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Dept. of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Dept. of Environmental Protect.	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☐ Other									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

	Name of Code & Edition		Name of Code & Edition		
Building		Energy		Other	
Electrical		Barrier Free			
Plumbing		Flood Hazard			
Fire Protection		As Built Elevation Cert.			
Mechanical		Other			

X. CERTIFICATES ISSUED (office use only)

			DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.		
☐ Temporary Certificate of Occupancy	No.		
☐ Continued Certificate of Occupancy	No.		
☐ Certificate of Occupancy	No.		
☐ Certificate of Approval	No.		
☐ None			

CERTIFICATE

Date Issued 11-18-94
Control #
Permit # 2262-94

IDENTIFICATION

Block 838 Lot 16
Work Site Location 1672 Forge Pond Rd.

Owner in Fee Helen M. Brown
Address same

Tele. ( )
Contractor same
Address

Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group R-3 1 hour
Maximum Live Load
Description of Work/Use:

Heat conversion from oil to gas

Type of Warranty Plan: [ ] **State** [ ] **Private**
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ **CERTIFICATE OF OCCUPANCY** XXX☒ **CERTIFICATE OF APPROVAL**

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

☐ **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 OCCUPANCY**

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate:

Arthur J. Cerny
CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

CONSTRUCTION PERMIT

UNIFORM CONSTRUCTION CODE

Date Issued 8/12/94
Control #
Permit # 2262-94

IDENTIFICATION Block 838 Lot 16

Work Site Location 16 12 Fairfield Rd   Contractor Same

Address

Owner in Fee [illegible]

Address [illegible]   Tele. ( )

Lic. No. or Bldrs. Reg. No.   Exp. Date 2262##

Tele. ( )   Federal Emp. No. BLOCK 0.00

or Social Security No. 838 #

LOT 0.00

is hereby granted permission to perform the following work:

[χ] BUILDING [χ] PLUMBING [ ] OTHER

[ ] ELECTRICAL [χ] FIRE PROTECTION

DESCRIPTION OF WORK:

[illegible]

PAYMENTS (Office Use Only) 16 #		
Building	25 BUILDING	25.00
Plumbing	40 PLUMBING	40.00
Electrical	FIRE	23.00
Fire Protection	PLAN RUH	5.00
Other	D.C.A.	2.00
Other	C/O	30.00
DCA Training Fee	TOTAL	125.00
Cert. of Occ.	CHECK	125.00
Other	CHANGE	0.00
Total		
Check/No	NO. 56 00000005	10:06
Cash		
Collected By:		

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 $ 4000.00

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3-PINK - JACKET 4 GOLD - APPLICANT

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 8/12/94
Date Issued
Control #
Permit # 2262-94

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

Block 838 Lot 16
Work Site Location 1672 FORGE POND RD - BRICK, NJ 08724
Owner in Fee HELEN M BROWN
Address 1672 FORGE POND RD - BRICK NJ 08724
Tele [redacted]
Contractor SAME
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Helen M Brown
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

FILL OIL TANK

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[✓] All	8/10/94	AK
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:	/		10/13/94	JK
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present R.3 Proposed
Constr. Class 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.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Alteration $
3. Total (1+2) $

TYPE OF WORK:

[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (6' or over)
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement
- [ ] Other
- [ ] Other

[ ] Demolition

(Office Use Only)
FEE

$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: DCA TRAINING FEE $
TOTAL FEE $

U.C.C. Form F-110B

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 8/12/94
Date Issued
Control #
Permit # 2262-94

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

Block 838 Lot 16
Work Site Location 1672 FORGE POND RD.
BRICK, NJ 08724
Owner in Fee HELEN M BROWN
Address 1672 FORGE POND RD.
BRICK NJ 08724
Tele. [redacted]
Contractor SAME
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature Helen M Brown

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[✓] All	8/10/94	AK
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed
Constr. Class 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.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 5.7.19 5/19
2. Alteration $
3. Total (1+2) $

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence Height (6' or over)
- [ ] Sign Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement
- [ ] Other
- [ ] Other

[ ] Demolition

(Office Use Only)
FEE
$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: DCA TRAINING FEE $
TOTAL FEE $

U.C.C. Form F-110B

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

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 8/12/94
Date Issued
Control #
Permit # 2262-94

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

Block 838 Lot 16
Work Site Location 1672 FORGE POND RD.
BRICK, NJ 08724
Owner in Fee HELEN M. BROWN
Address 1672 FORGE POND RD.
BRICK NJ 08724
Tele. [redacted]
Contractor SAME
Address
Tele. ( )
Lic. No.
Federal Emp. No. or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-3 Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location: Combustible oil
Total Est. Cost of Fire Prot. Work $ [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date: 8/9/94
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [✓] CA
Date: 9/13/94
Approved by:

INSPECTIONS:

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical			9/13/94	
TCO				
Other				
Other				
Other				

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.

Helen M Brown
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work Oil to gas

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance	1	33
OTHER		

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $ 33

U.C.C. Form F-140B
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 8/12/94
Date Issued
Control #
Permit # 2262-94

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

Block 838 Lot 16
Work Site Location 1672 FORGE POND RD. BRICK, NJ 08724
Owner in Fee HELEN M. BROWN
Address 1672 FORGE POND RD. BRICK NJ 08724
Tele. [redacted]
Contractor
Address
Tele. ( )
Lic. No.
Federal Emp. No. or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R3 Proposed
Constr. Class Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date: 8/19/94
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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.

Helen M Brown
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work Oil to gas

Water Supply Source
Method of Valve Supervision 32
Local Alarm Supervision
Central Supervision 1
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance	1	33
OTHER		
		33

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-140B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

PLUMBING SUBCODE TECHNICAL SECTION

Date Received 8/12/94
Date Issued
Control #
Permit # 2262-94

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

Block 838 Lot 16
Work Site Location 1672 FORGE POND RD.
BRICK, NJ 08724
Owner in Fee HELEN M BROWN
Address 1672 FORGE POND RD.
[redacted]
Tele. [redacted]
Contractor C.J. MAHIEU INC
Address 42 SUNRISE WAY
TOMS RIVER N.J. 08753
Tele. (908) 255-1278
Lic. No. 540
Federal Emp. No. _____ or Social Security [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present R.3 Proposed _____
Building Sewer Size _____
Water Service Size _____
Estimated Cost of Plumbing Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[ ] Plumb. Plans Approved
Date: 8-3-94
Approved by: [signature]

SUBCODE APPROVAL:
[ ] CO [ ] CCO [X] CA
Approved by: [signature]
Date: 9/9/94

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment			9-1-94	[signature]
Gas Final	9/9/94		9/9/94	[signature]
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

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

[signature]
Signature-Contractor Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

Oil to gas

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Gas Piping	15 —
	Fuel Oil Piping	
	Water Heater	
	Steam Boiler	
1	Hot Water Boiler	15 —
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Gas Service Connection	
	Active Solar System	
	Other	10 —

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL $ 40 —

U.C.C. Form F-130A 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

PLUMBING SUBCODE TECHNICAL SECTION

Date Received 8/12/94
Date Issued
Control #
Permit # 2262-94

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

Block 838 Lot 16
Work Site Location 1672 FORGE POND RD.
BRICK NJ 08724
Owner in Fee HELEAL 11 BROWAY
Address 1672 FORGE POND RD.
BRICK NJ 08724
Tele. ([redacted]
Contractor C.J. MAHIEU INC.
Address 42 SUNRISE WAY
TOMS RIVER N.J. 08753
Tele. (908) 255-1278
Lic. No. 540
Federal Emp. No. _____ or Social Security No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present R.3 Proposed _____
Building Sewer Size _____
Water Service Size _____
Estimated Cost of Plumbing Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[ ] Plumb. Plans Approved
Date: 8-3-94
Approved by: Jeff

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved by: _____
Date: _____

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

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

_____ Signature-Contractor Seal

[x] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

del to Joe

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
___	Water Closet	___
___	Urinal/Bidet	___
___	Bath Tub	___
___	Lavatory	___
___	Shower	___
___	Floor Drain	___
___	Sink	___
___	Dishwasher	___
___	Drinking Fountain	___
___	Washing Machine	___
___	Hose Bibb	___
1	Gas Piping	15—
___	Fuel Oil Piping	___
___	Water Heater	___
___	Steam Boiler	___
1	Hot Water Boiler	15—
___	Sewer Pump	___
___	Interceptor/Separator	___
___	Backflow Preventer	___
___	Greasetrap	___
___	Water Cooled A/C or Refrigeration Unit	___
___	Sewer Connection	___
___	Water Service Connection	___
___	Gas Service Connection	___
___	Active Solar System	___
___	Other	10—

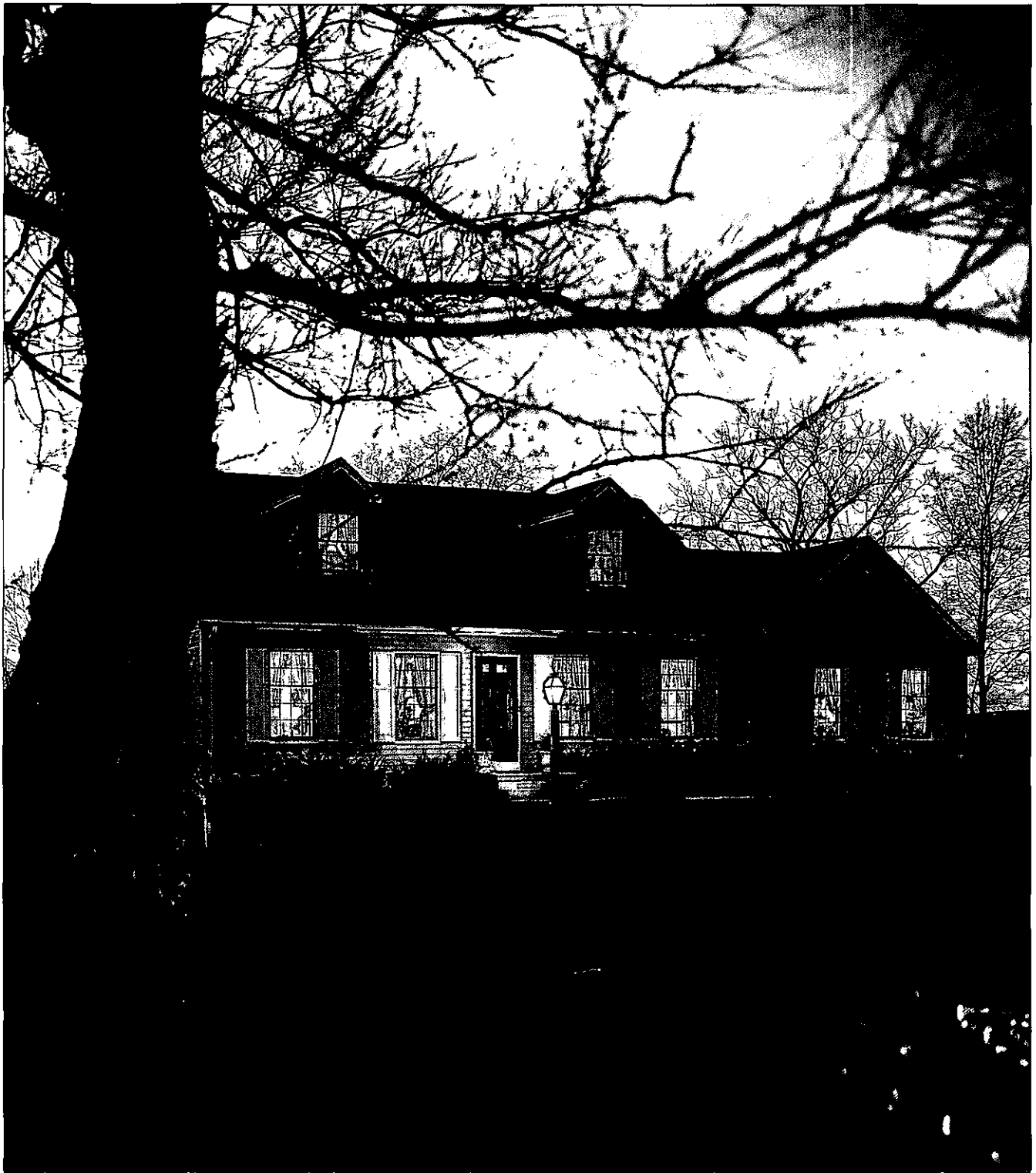
Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL $ 40—

U.C.C. Form F-130A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

EFFICIENT & ECONOMICAL GAS FIRED HOT WATER HOME HEATING

Burnham®
AMERICA'S BOILER COMPANY

SERIES 2A



BURNHAM GAS-FIRED HOT WATER BOILER

Quality home heating you can count on.

If you're investigating a heating system for your new home, or if you're replacing an old, inefficient, or worn-out boiler, a gas-fired hot water boiler from Burnham is the home heating investment that's right for you.

Burnham's Series 2A boiler offers you all the benefits of hot water heat together with the advantages of quality cast iron construction and advanced engineering. When you specify Burnham, you get home heating that is comfortable, economical, and reliable—all from a boiler that's safe, quiet, and field proven in thousands of installations.

A clean burning, energy efficient heating system is more important now than ever before. All Series 2A models—standing pilot and electronic ignition—meet or exceed the 1992 federal minimum efficiency standards.

If your present boiler is like many older gas boilers, it's probably operating at an annual efficiency of only 60%. Which means much of the heat you paid for is going right up the chimney. So when you upgrade to a Burnham® Series 2A gas boiler with an efficiency up to 82.6%, you get more usable heat for your dollar.

Burnham makes heating your home with natural gas a practical investment today, and one you'll appreciate over the years.

Hydronic heating—the home comfort advantage

Heat and comfort go hand in hand at Burnham. The Series 2A gas boiler generates hot water which is transmitted through pipes to heat every room of your home. This type of home heating, referred to as hydronic heating, has proved itself over the years to be the most effective and economical comfort system available.

A well designed, properly maintained hydronic system will provide you with long term comfort and economy. You'll never experience hot and cold spots or drafts so common with forced air systems. You won't be bothered by airborne dust, smoke, odor, or germs being carried from room to room. And hydronic systems can be easily zoned, saving fuel while providing comfortable temperatures in the various living areas of your home.

In short, hydronic heating is cleaner, more versatile, and more comfortable than alternative heating systems. And Burnham is your key to the hydronic heating advantage.

Cast Iron Dependability

Burnham builds America's hardest working, most dependable home heating boilers. A rugged cast iron heat exchanger gives the Series 2A boiler outstanding durability and trouble-free performance. And the cast iron sections are designed to extract the maximum amount of heat, reducing fuel consumption and saving you money.

The sections are joined with iron nipples that resist petroleum-based chemicals, including anti-freeze, which can deteriorate the gaskets used in some competitors' boilers.

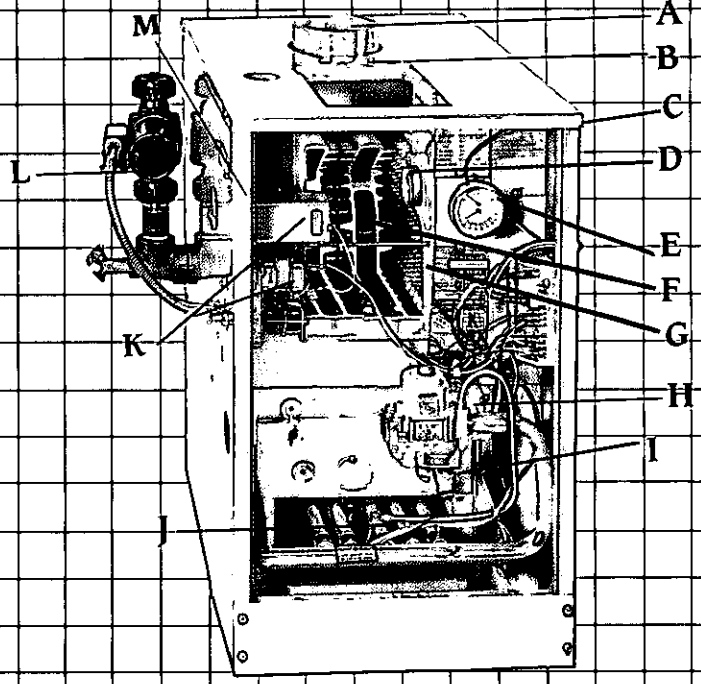
Plus, only Burnham boilers come with the exclusive Iron Nipple Seal of Dependability certifying the use of a proven method of boiler construction that assures reliable performance for a lifetime. The iron nipples expand and contract with the cast iron boiler section they join.

This ensures the integrity of the entire section assembly. Time-proven iron nipples last the life of the boiler.

Comfort You Can Count On

When you select a Burnham boiler—you're buying more than just heat. Burnham has earned a reputation for quality and dependability going back to 1873. And Burnham is dedicated to insuring that your Burnham boiler provides your family with reliable home heating comfort. That's why the Burnham Series 2A boiler is backed by Winter Warmth Assurance—the most comprehensive warranty program in the industry. When purchased through a member of America's Home Heating Team, this unique homeowner protection plan offers maximum protection with 5-year Blanket Coverage that pays 100% of the cost for qualified repairs for five full years after installation. All you need to do is talk to a local Burnham plumbing and heating contractor offering Winter Warmth Assurance.

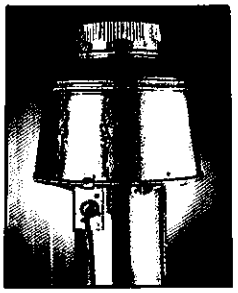
And that's not all. Burnham is the only manufacturer that backs its products with a Lifetime True-Blue Limited Warranty on the hot water heat exchanger. It's all part of Burnham Winter Warmth Assurance, the hottest deal in home heating.



Series 2A

A. Flue collar
B. Deluxe insulated jacket
C. Blocked vent switch connector
D. Iron nipple joins sections
E. Pressure temperature gauge
F. Durable cast iron sections for long life
G. Pinned heating surface for maximum heat extraction
H. Concealed step opening gas valve
I. Flame roll-out switch
J. Stainless steel burners for smooth light off
K. Brand name quality controls
L. Self lubricating circulator never needs oil
M. Built-in air eliminator

Another safety feature included is a Blocked Vent Switch (BVS) that is thermally activated if a blockage in the venting system occurs. The switch senses excessive heat exiting the draft hood and shuts off gas flow.



Fuel saving option that increases annual efficiency

The Series 2A boiler can be equipped with a fuel-saving electronic ignition system which improves energy efficiency. (EI is standard on the 202A and 208A–210A.)

Electronic ignition is available on all sizes of the Series 2A boilers firing natural gas or LP gas. Coupled with a redundant gas valve, the system safely shuts down on loss of pilot flame in less than one second.

You get all this in a completely factory assembled boiler with a sleek, compact appearance. Its efficient design makes it much smaller than most older boilers.

Comfort without sacrifice

Too often homeowners end up giving up comfort, endure frequent breakdowns and service calls, and take safety risks just to bring down their fuel bill.

With a Burnham® Series 2A gas-fired hot water boiler, you don't have to make sacrifices. Our Series 2A is your long-term investment in quality, dependable home heating.

BURNHAM® SERIES 2A HOT WATER GAS BOILER

DOE Heating Capabilities 31 to 244 MBH

Designed to fit tight closet installations

The Series 2A boiler was designed specifically for homes where space is a premium. The controls and gauge are located up front so the Series 2A can be installed even in close closet situations. It is ideal for condominiums, townhouses and homes without basements.

The Series 2A is equipped with split controls: an operating/high limit control, a transformer and a circulator relay. By using off-the-shelf separate controls instead of a combination control, Burnham has simplified control replacement and reduced replacement costs. The location of the controls also makes regular servicing easier.

The safe, home heating alternative

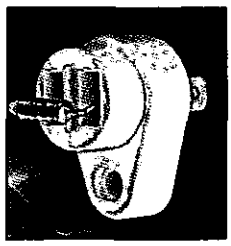
Your family's safety is infinitely more important than fuel savings. Therefore, the Series 2A design incorporates a broad array of safety features.

For example, each standard Series 2A boiler has a time-proven safety feature with its own backup system. If you lose pilot flame, a thermocouple supervisor sends a signal to a redundant gas valve cutting off the gas flow.

Also all exterior wiring is enclosed in metal casing to protect against accidental shocks.

Gas valves and controls are safely hidden inside the jacket away from children and safe from accidental bumps and tampering.

A Flame Roll-Out Switch (FRS), standard on all 2A models, is a thermally activated switch, located near the burners, that senses temperatures in the vestibule.

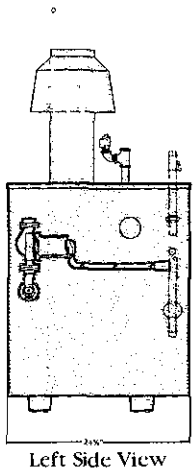


For example, if the fluways, within the boiler, become blocked or restricted, the flame rollout switch will automatically shut off gas flow to prevent damage to your boiler. Once the switch is activated it must be replaced. The boiler cannot be restarted until the obstruction is cleared and a new switch is installed.

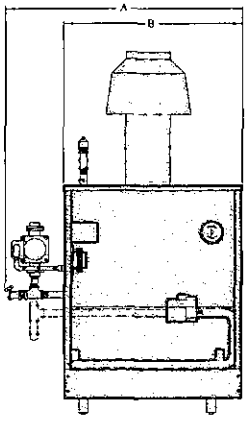
Boiler Number	A	B	C	D
202A	19¼	11¼	4	50⅜
203A	22½	14½	4	50⅜
204A	25¾	17¾	5	51⅞
205A	29	21	6	53¾
206A	32¼	24¼	6	53¾
207A	35½	27½	7	56¾
208A	38¾	30¾	7	56¾
209A	42	34	8	59¼
210A	45¼	37¼	8	59¼

Deluxe Insulated Jacket
1¼" Circulator w/piping to boiler
Pressure Temperature Gauge
Drain Cock
Built-In Air Elimination
High Limit
Circulator Relay
Transformer and Junction Box
100% Shut-off Combination Step Opening Gas Valve
Stainless Steel Burners
ASME Safety Relief Valve
Drafthood
Vent Damper
Blocked Vent Switch
Flame Roll-Out Switch
Plug-In Connection

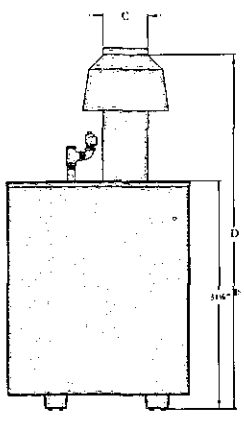
Dimensions and Standard Equipment



Left Side View



Front View



Right Side View

SPECIFICATIONS

Burnham®
AMERICA'S BOILER COMPANY

SERIES 2A RATINGS Natural & LP Gas

BOILER NUMBER	A.G.A. & C.G.A. INPUT MBH (1)	DOE HEATING CAPACITY MBH	I=B=R NET RATING MBH (2)	AFUE % STANDING PILOT AND VENT DAMPER	AFUE % EI AND VENT DAMPER	RECOMMENDED CHIMNEY SIZE ROUND DIA. IN. x FT.
202A	37.5	31	27.0	N/A	82.3	4x15
203A	62	52	45.2	80.0	82.6	4x15
204A	96	80	69.6	80.1	82.3	5x15
205A	130	108	93.9	80.2	82.0	6x15
206A	164	136	118.3	80.3	81.7	6x15
207A	198	163	141.7	80.4	81.4	7x15
208A	232	191	166.1	N/A	81.2	7x15
209A	266	218	189.6	N/A	80.9	8x15
210A	299	244	212.2	N/A	80.6	8x15

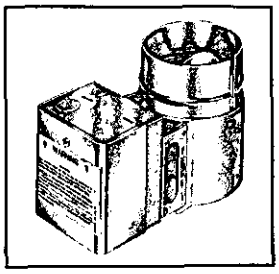
N/A Not Available
Water only – 30 PSI working pressure
DOE heating capacity and annual efficiency are based on U.S. Government standard tests.

Rating Footnotes:
(1) A.G.A. ratings shown are for installations at sea level and elevations up to 2,000 ft. For elevations above 2,000 ft. A.G.A. ratings should be reduced at the rate of four percent (4%) for each 1,000 ft. above sea level.
(2) Net I=B=R ratings shown are based on normal I=B=R piping and pick up allowance of 1.5. Consult Burnham for installations having unusual piping and pick-up requirements such as intermittent system of operation, extensive piping systems, etc.

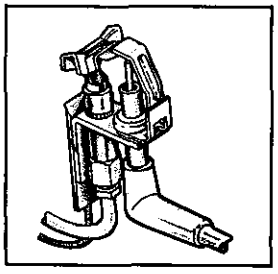
FUEL SAVING EQUIPMENT:

STANDARD: FUEL SAVING VENT DAMPER–

Increases annual efficiency and saves fuel dollars. Automatically closes the flue after the burner shuts off and reopens it again before the burner comes on. Mounts and wires easily, includes prewired connection harness with plug for use on all 24v. Standing pilot or EI control systems.



ELECTRONIC IGNITION– Standard on 202A & 208A–210A



Spark ignited pilot (EI) is available on all sizes for natural & LP gas. Coupled with a redundant gas valve the system shuts down on loss of pilot flame within .8 sec. The control arrangement provides for a 90 second try for pilot relight following shutdown. If after this length of time the pilot is not re-established, the entire system goes on safety shutdown for five minutes. This 90 second try/five minute shutdown cycle continues until the pilot is established.

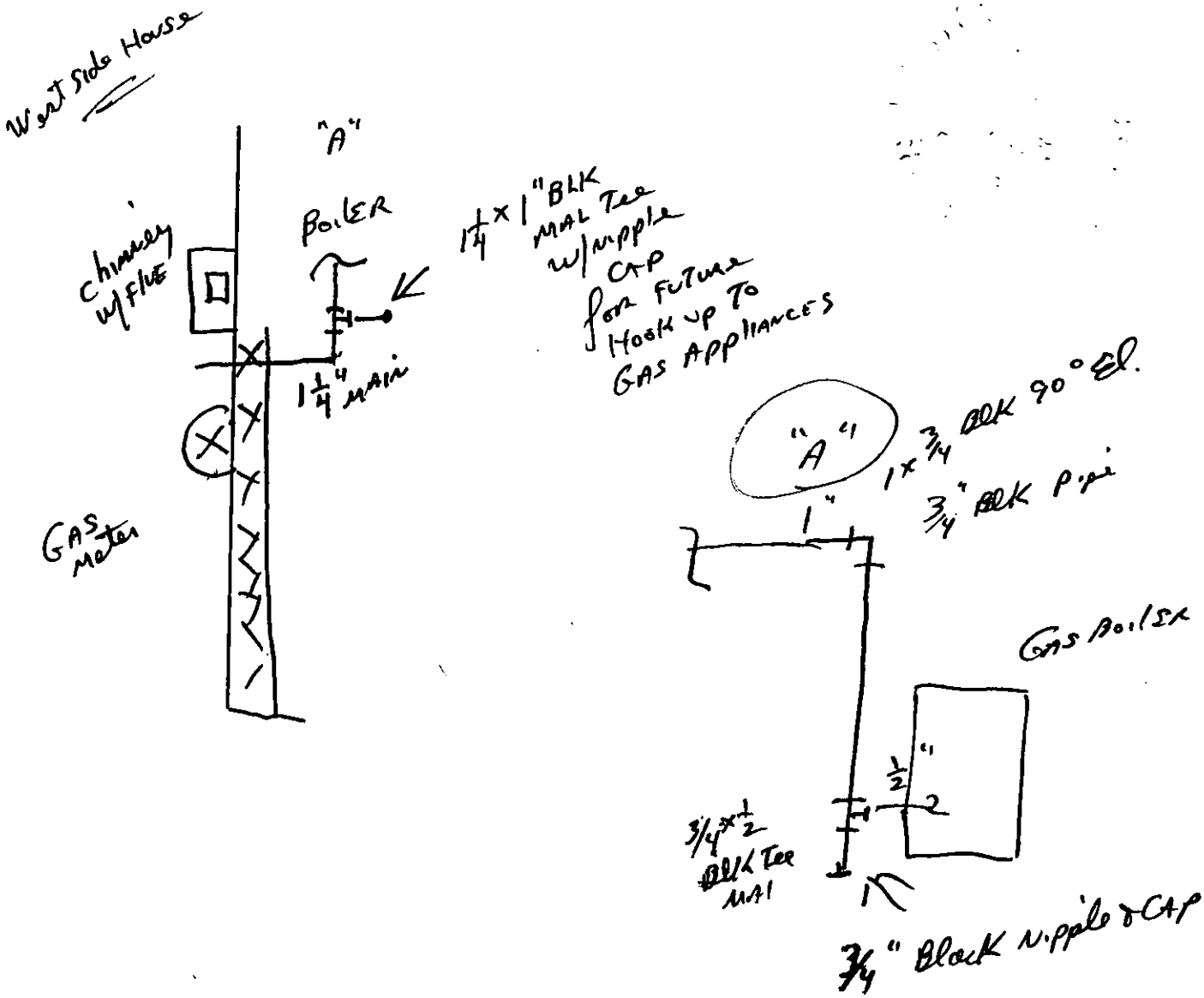
Burnham®
America's Boiler Company
Burnham Corporation

Form No. 4170B-6/93-50M
Printed in U.S.A.

C.J. MAHIEU, INC.

42 Sunrise Way • Toms River, N.J. 08753 • (908) 255-1278

RE: HELEN BROWN
1672 FORGE Pond Rd
BRICK N.J. 08724
(908) 458-7953



TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Department of Administration & Finance

Division of Inspections
A. J. Cierzo
Construction Official
(908) 262-1024
Fax: (908) 920-4850

Re: Tank Removals and Demolitions

From: Arthur J. Cierzo, Construction Code Official

Please advise all applicants for the above that they must send a copy of attached application to the State within thirty days prior to the beginning of work, they must also submit certification on tanks being emptied and purged to the building department with a receipt from where tanks are discarded before a final can be signed off.

AJC/jss

Tank removal

ASBESTOS ABATEMENT NOTIFICATION

DATE:

(PRINT OR TYPE) (If applicable variance#)

Project:

Street:

Town:

Contractor: Lic No:
Address:

A.S.C.M.: Lic No:
Address:

OSHA Air Monitor:
Address:

✓ Building Owner: HELEN M BROWN
Street: 1672 FORGE PONDS RD.
Town: BRICK
Phone: 458-7953 County: OCEAN Zip: 08724

Engineer/Architect:

Street:
Town:
Phone: ( ) - County: Zip:

✓ Waste Hauler: TONKS WASTE OIL REMOVAL Lic. No.:
Address:

~~Land Fill~~:
Town:

Job Size: (Circle One) Minor Small Large

Quantity of Waste Generated: CU. Yds.:
(All Applicable) Linear Footage:
Sq. Footage:

Proposed Start Date: Proposed Finish Date:

Cost of work:$

(To be filled in by the Construction Official)
Construction Permit No.: Date Issued: / /

0843A
1/19/89

STATE OF NEW JERSEY

THOMAS H. KEAN
GOVERNOR

DEPARTMENT OF COMMUNITY AFFAIRS
DIVISION OF HOUSING AND DEVELOPMENT

ANTHONY M. VILLANE JR., D.D.S.
COMMISSIONER

3131 PRINCETON PIKE
CN 816
TRENTON, N. J. 08625-0816

Re: Your variation request for ----------
---------- Our Ref.#----------

Dear :

A preliminary review of your request for a variation for the subject project has been completed. The following omissions/nonconformances/ discrepancies have been noted:

A. PLANS

3 sets of plans.
Location(s) of negative air filtration unit(s).
The location(s) of the decontamination chamber(s).
The location(s) of occupants and abatement work areas.
The exits to be used by workers and occupants.
The location of the waste container.
The route of travel for waste removal.
The route of workers to exit the building.
Separation barriers and critical barriers.

B. SPECIFICATIONS

3 sets of specifications.
Specific work proceedures (not a copy of Sub-8).
Method(s) of removal.

C. OCCUPANTS.

The number of intended occupants.
Their purpose for being in the building.
Their location within the building.
The time of day they will be in the building.

Permit
Review Check List

Project: _____

Address: _____

Municipality: _____

ASCM Firm: _____

Date received: _____ Date reviewed: _____

Reviewed by: _____

( ) 1. UCC Form (F-100) Applications for a permit

( ) 2. UCC Form (F-110) Building Subcode

( ) 3. Health Waiver or Assessment

( ) 4. Notification form for Asbestos Abatement

( ) 5. Plans
- ( ) a. Separation Barriers
- ( ) b. Critical Barriers
- ( ) c. Scope of Work
- ( ) d. Route of travel to waste container
- ( ) e. Copy of site plan
- ( ) f. Copy of floor plan and/or plans if a multi-story

( ) 6. Specifications
- ( ) a. Scope of Work
- ( ) b. Type of removal (Glove bag, full containment)
  - ( ) 1. Where (specific locations; Re. plans)
  - ( ) 2. Quantity (Ln ft) (Sq. ft)

( ) 7. Documentation of non-occupancy or copy of variance

( ) 8. Release of plans and specifications by the ASCM

( ) 9. Permit Fee

Comments: _____

_____

_____

_____

_____

ASBESTOS JOBS

Under D.C.A. Subchapter 8

	LARGE	SMALL	MINOR
uare Feet	≥ 160	< 160 to > 25	≤ 25
ıear Feet	≥ 260	< 260 to > 10	≤ 10
:ker Training	5 day (W)	5 day (W)	2 day (M&C)
. Permit	Yes	Yes	No
ıtractor License	Yes	Yes	No
ıstruction Permit	Yes	Yes	No
:ice to Adm. Authority	Yes	Yes	No
ıpletion Report to Adm. Av.	Yes	Yes	Yes
ıtractor Daily Log	Yes	No[1,2]	N/A
ıtractor Written Emerg. Plan	Yes	No[1,2]	N/A
on. Unit	Yes	No[2]	No
k Area Enclosure	Yes	Yes	General Isolation[3]
. Air Filtration	Yes	No[2]	No
ly Air Monitoring	Yes	No[2]	No
ke Test[4]	Yes	No[2]	No
al Air Sample	Yes	Yes	Yes(glovebag)
commencement Inspection	Yes	Yes	No
gress Inspection	Yes	Yes	No
-Sealent Inspection	Yes	No[1,2]	No
n-Up Inspection	Yes	Yes	No
oved Landfill	Yes	Yes	Yes

Notes

ighly recommended.
SCM may request variance.
round cover, local vents sealed, etc.
noke test is required for all glovebag type removals.