

BLOCK 833 LOT 8 QUALIFICATION CODE \_\_\_\_\_ ADDRESS (SITE) 1658 FORGE ROAD RD PERMIT NO. 15-1702



# CONSTRUCTION PERMIT APPLICATION

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

## I. IDENTIFICATION

1. Proposed Work Site at: 1658 FORGE ROAD ROAD  
2. Name of Owner in Fee: COLEMAN  
Tel. ( ) e-mail  
Address 1658 FORGE ROAD ROAD BARK NJ 08724  
street municipality zip code  
3. Ownership in Fee: Public \_\_\_\_\_ Private \_\_\_\_\_  
4. Principal Contractor: \_\_\_\_\_ Tel. ( ) \_\_\_\_\_  
Address \_\_\_\_\_  
License No. OR, if new home, Builder Reg. No. \_\_\_\_\_  
Home Improvement Contractor Registration No. \_\_\_\_\_  
Federal Emp. ID No. \_\_\_\_\_  
5. Architect or Engineer \_\_\_\_\_  
Address \_\_\_\_\_  
Tel. ( ) FAX: ( )  
6. Responsible Person in Charge once Work has Begun \_\_\_\_\_  
Tel. ( ) FAX: ( )

## V. FEE SUMMARY (for office use only)

|                                   |    | Update | Update |
|-----------------------------------|----|--------|--------|
| 1. Building                       | \$ |        |        |
| 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

1. Number of Stories \_\_\_\_\_  
2. Height of Structure \_\_\_\_\_ ft.  
3. Area — Largest Floor \_\_\_\_\_ sq. ft.  
4. New Building Area \_\_\_\_\_ sq. ft.  
5. Volume of New Structure \_\_\_\_\_ cu. ft.  
6. Construction Classification \_\_\_\_\_  
7. Total Land Area Disturbed \_\_\_\_\_ sq. ft.  
8. Flood Hazard Zone \_\_\_\_\_  
9. Base Flood Elevation \_\_\_\_\_ ft.  
10. Wetlands yes \_\_\_\_\_  
no \_\_\_\_\_  
11. Max. Live Load \_\_\_\_\_  
12. Max. Occupancy Load \_\_\_\_\_

(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 | Rejection | Re-viewer |
|-----------|----------------|------------|----------------|---------------|-----------|--------------------|-----------|-----------|
|           | hpo            | 5/28/15    |                | 6/2/15        | to        |                    |           |           |
|           |                |            |                |               |           |                    |           |           |
|           |                |            |                |               |           |                    |           |           |
|           |                |            |                |               |           |                    |           |           |
|           |                |            |                |               |           |                    |           |           |

TOTAL COSTS

## 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  
8. ☐ Smoke Control Systems in Open Wells  
9. ☐ Underground Storage Tanks  
10. ☐ Swimming Pools, Spas and Hot Tubs

## VII. DESCRIPTION OF BUILDING USE

### A. RESIDENTIAL (primary use)

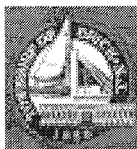
1. State Specific Use:  
2. Use Group:  
3. Change in Use Group, Indicate Former:

4. No. of dwelling units: All Units Income-restricted  
Before Construction \_\_\_\_\_  
After Construction \_\_\_\_\_  
Net Gain or Loss \_\_\_\_\_

### B. NON-RESIDENTIAL (primary use)

1. State Specific Use:  
2. Use Group:  
3. Change in Use Group, Indicate Former:

### C. MIXED USE -List secondary use(s):



Brick Township  
401 Chambersbridge Rd  
Brick, NJ 08723

Date Issued 6/30/2015  
Control Number C-15-002575  
Permit Number 15-1782  
Permit Issue Date 6/8/2015  
Certificate Number 15-1782

## Certificate

Construction Code Division

(Certificate of Approval)

### Identification

Work Site Location: 1658 FORGE POND RD. Brick Township, NJ Block: 833 Lot: 8 Qual: \_\_\_\_\_  
Owner in Fee: COWAN, EVLYN D.  
Owner Address: 1658 FORGE POND RD. BRICK NJ 08724  
Telephone: \_\_\_\_\_  
Contractor PILLA ELECTRIC INC  
Address 3092 SHAFTO ROAD SUITE 16 TINTON FALLS NJ 07753  
Telephone: 732 9182220 Fax: 732 9182290  
License Number or Builders Registration Number: 12156 Federal Emp. Number: 22-3349326

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(e)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 \_\_\_\_\_

**Pills Electric, Inc.**  
**3092 Shatto Rd., Suite 16**  
**Tinton Falls, N.J. 07753**  
**(732) 918-2220 Fax (732) 918-2200**  
**Lic.#12156**  
**ID#22-3349326**

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



# ELECTRICAL 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 833 Lot 8 Qualification Code \_\_\_\_\_  
Work Site Location 1658 Forge Road Road

Owner in Fee: Coleman

Tel. ( ) e-mail \_\_\_\_\_  
Address 1658 Forge Road Road Bearc NJ 08724  
street municipality zip code

Contractor: Pilla Electric, Inc.  
Address 3092 Shafto Rd., Suite 146 ( )  
Tinton Falls, N.J. 07753

Contractor License No. (732) 918-2220 Exp. Date 6/22/15  
Home Improvement Contractor Registration No. 18-#12156 (if applicable):  
ID# 22-3915326 FAX: ( )

Federal Emp. ID No. \_\_\_\_\_

B. ELECTRICAL CHARACTERISTICS  
Use Group Present \_\_\_\_\_ Proposed \_\_\_\_\_  
☐ Pole/Pad # \_\_\_\_\_ ☐ Temporary ☐ Other

Building Occupied as \_\_\_\_\_ Utility Co. DEP 333 429 817  
Est. Cost of Elec. Work \$ 1500

## JOB SUMMARY (Office Use Only)

| PLAN REVIEW                                                         | Date           | Initial   | INSPECTIONS                       | Dates (Month/Day) | Initial  |
|---------------------------------------------------------------------|----------------|-----------|-----------------------------------|-------------------|----------|
| <input checked="" type="checkbox"/> No Plans Required               | <u>6/24/15</u> | <u>CO</u> | Type:                             | Failure           | Approval |
| Joint Plan Review Required:                                         |                |           | Rough                             |                   |          |
| <input type="checkbox"/> Building <input type="checkbox"/> Plumbing |                |           | Barrier-Free                      |                   |          |
| <input type="checkbox"/> Fire <input type="checkbox"/> Elevator     |                |           | Trench                            |                   |          |
| <input type="checkbox"/> Elec. Plans Approved                       |                |           | Temp. Serv.                       |                   |          |
| Date:                                                               |                |           | Constr. Serv.                     |                   |          |
| Approved by:                                                        |                |           | TCO                               |                   |          |
|                                                                     |                |           | Other                             |                   |          |
|                                                                     |                |           | Service                           |                   |          |
|                                                                     |                |           | Final                             |                   |          |
|                                                                     |                |           | Barrier-Free                      |                   |          |
| SUBCODE APPROVAL                                                    |                |           | Temp. Cut-in-Card Date Issued     |                   |          |
| <input type="checkbox"/> CO <input type="checkbox"/> CCO            |                |           | Final Cut-in-Card Date Issued     |                   |          |
| Date: <u>6-23-15</u>                                                |                |           | Applied For Inspection            |                   |          |
| Approved by: <u>[Signature]</u>                                     |                |           | Date of Re-inspection and Bonding |                   |          |

## C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

Licensed Elec. Contractor ☐ Certified Landscape Irrigation Contr ☐ Exempt Applicant

U.C.C. F-120 (rev. 10/06)  
Internet Version

## D. TECHNICAL SITE DATA

### DESCRIPTION OF WORK

200 AMP SERVICE UPGRADE

Date Received  
Control #

Date Issued  
Permit #

6-8-15  
15-1762

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 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/+ 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 \$

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

6/3/15  
Spoke to  
KIM



# CONSTRUCTION PERMIT

Date Issued 6-9-15  
Control # C-15-002575  
Permit # 15-1782

IDENTIFICATION Block: 833 Lot: 8 Qualifier \_\_\_\_\_  
Work Site Location: 1658 FORGE POND RD. Brick Township, NJ Contractor: PILLA ELECTRIC INC  
Address: 3092 SHAFTO ROAD SUITE 16 TINTON FALLS NJ  
Owner in Fee: COWAN, EVELYN D. Telephone: 732 9182220  
1658 FORGE POND RD. BRICK NJ 08724 Lic. No. or Bldrs. Reg. No. 12156  
Telephone: \_\_\_\_\_ Federal Employee. No. 22-3349326

Is hereby granted permission to perform the following work:

- |                                                |                                                                    |                                                |
|------------------------------------------------|--------------------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> BUILDING              | <input type="checkbox"/> PLUMBING                                  | <input type="checkbox"/> LEAD HAZARD ABATEMENT |
| <input checked="" type="checkbox"/> ELECTRICAL | <input type="checkbox"/> FIRE PROTECTION                           | <input type="checkbox"/> DEMOLITION            |
| <input type="checkbox"/> ELEVATOR DEVICES      | <input type="checkbox"/> ASBESTOS ABATEMENT<br>(Subchapter 8 only) | <input type="checkbox"/> OTHER                 |

DESCRIPTION OF WORK:

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 \$1,900

*David J. [Signature]*  
Construction Official

6/3/15  
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                | \$0    |
| Electrical              | \$175  |
| Plumbing                | \$0    |
| Fire Protection         | \$0    |
| Elevator Devices        | \$0    |
| Other                   | \$0.00 |
| DCA Training Fee        | \$4    |
| CO Fee                  |        |
| Other                   | \$0    |
| Total                   | \$179  |
| Check No. <u>82169</u>  |        |
| Cash                    | \$0    |
| Credit                  | \$0    |
| Collected By <u>GJR</u> |        |

## 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.

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

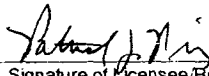
THIS IS TO CERTIFY THAT THE  
Board of Exam. of Electrical Contractors

HAS LICENSED

Patrick J. Pilla  
3092 Shafto Road Suite 16  
Tinton Falls NJ 07753

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

02/11/2015 TO 03/31/2018  
VALID



Signature of Licensee/Registrant/Certificate Holder

**34EI01215600**

LICENSE/REGISTRATION/CERTIFICATION #



ACTING DIRECTOR

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**State Of New Jersey  
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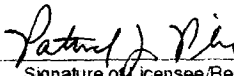
THIS IS TO CERTIFY THAT THE  
Board of Exam. of Electrical Contractors

HAS LICENSED

PILLA ELECTRIC INC  
PATRICK J PILLA  
3092 Shafto Road  
Suite 16  
Tinton Falls NJ 07753

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

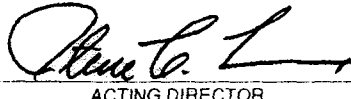
02/11/2015 TO 03/31/2018  
VALID



Signature of Licensee/Registrant/Certificate Holder

**34EB01215600**

LICENSE/REGISTRATION/CERTIFICATION #



ACTING DIRECTOR