

547
Called 90
5.9.11 PM
JH

BLOCK

LOT

ADDRESS (SITE)

PERMIT NO.



CONSTRUCTION PERMIT APPLICATION

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

1. IDENTIFICATION

1. Proposed Work-site at: BRICK BLVD.

2. Name of Owner in Fee: GENERAL STORES Tel. (____) _____

Address BRICK BLVD BRICK NJ 08723
street municipality zip code

5. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: SHORE FIRE PROTECTION, Inc. (201) 920-2210

Address 652 DRUM POINT RD, BRICK, NJ 08723

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. (_____) _____

II. PROPOSED WORK

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

Est. Cost

60,000.00

OPTIONAL (for office use only)[illegible]

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

V. FEE SUMMARY (for office use only)

Update

Update

1. Building	\$		
2. Electrical	\$		
3. Plumbing	\$		
4. Fire Protection	\$		
5. Other <i>Spelling, Design</i>	\$	310.00	40.00
6. Subtotal	\$	310.00	
7. Less 20% for State Plan Review	\$	50.00	
8. Subtotal	\$		
9. DCA Training Fee	\$		
10. Subtotal	\$		
11. Cert. of Occupancy	\$	20.00	
12. Other	\$		
13. TOTAL	\$	235.00	125.00

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 _____

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: *mercantile*
3. Change in Use Group, Indicate Former:

LDS BR 10409523

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 _____ 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 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 Barbara Clayton

Address 652 Dream Point Rd

Briar, NJ

Telephone (201) 920-2210

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

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

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

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	_____
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

Date Issued 10-23-91
Control #
Permit # 283-91

IDENTIFICATION

Block 547 Lot 6 & B
Work Site Location 451 Brick Blvd.
Owner in Fee General Stores
Address 451 Brick Blvd.
Brick, N.J.
Tele. ()
Contractor Shore Fire Protection
Address 652 Drum Point Rd.
Brick, N.J. 08723
Tele. ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No.
Use Group
Maximum Live Load
Description of Work/Use:

Fire Suppression System Only

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

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ CERTIFICATE OF OCCUPANCY

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:

Fee \$
Paid [] Check No.
Collected by:

CONSTRUCTION OFFICIAL

Arthur J. Clegg



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

3/13/91

283-91

IDENTIFICATION Block 547 Lot 647
 Work Site Location Bruck Blvd Contractor Shore Fire Protection
 Address _____
 Owner in Fee General Stores
 Address Bruck Blvd
 Tele. (____) _____
 Lic. No. or Bldrs. Reg. No. _____ Exp. Date 283#
 Federal Emp. No. _____ RI DCK 0.00
 or Social Security No. 547 #

is hereby granted permission to perform the following work:

[] BUILDING [] PLUMBING [] OTHER _____
 [] ELECTRICAL [] FIRE PROTECTION

DESCRIPTION OF WORK:

Fire Suppression

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 \$ 60,000

PA Corzo
 CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only): #		LOT	
Building	FIRE	31	0.00
Plumbing	PLAN REV	5	0.00
Electrical		20	0.00
Fire Protection	TOTAL	55	0.00
Other	CHECK	335	0.00
Other	CHANGE	0	0.00
DCA Training Fee			
Cert. of Occ.	NO. 5	20	0.00
Other			
Total		335	
Check No.			
Cash			
Collected By:			



PERMIT UPDATE

Date Update Issued
Control #
Permit #
Date Permit Issued

6/12/91
283-91

IDENTIFICATION Block 547 Lot 60.7
Work Site Location Brick Blvd. Contractor Shore Fire Protection Inc.
Address 657 Ocean Point Rd.
Owner in Fee General Stores Brick, N.J. 08723
Address Brick Blvd. 08723
Tele. () 908-920-2210
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____
or Social Security No. _____

is hereby granted permission to perform the following work:

[] BUILDING [☒] PLUMBING [] Other _____

[] ELECTRICAL [] FIRE PROTECTION

DESCRIPTION OF WORK:

Plmg

Estimated Cost of Work \$ N/A

[Signature]
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)		283*#
Building	BLOCK	0.00
Plumbing	<u>40</u> 547 #	0.00
Electrical	LUI	0.00
Fire Protection	6 #	
Other	PLUMBING	10.00
Other	TOTAL	10.00
DCA Training Fee	CASH	10.00
Cert. of Occ.	CHANGE	0.00
Other	06/12/91 NO. 5 0010A005	18:41
Total	<u>40</u>	
Check No.		
Cash	☒	
Collected By:	<i>[Signature]</i>	



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

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

Block 547 Lot 647
Work Site Location BRICK BLVD

Owner In Fee GENERAL STORES
Address BRICK BLVD

Tele. () SHORE FIRE PROTECTION, INC.
Contractor 452 DRUM POINT RD

Address BRICK BLVD 08733
Tele. () 908-2216

Lic. No. [REDACTED]
Federal Emp. No. [REDACTED]

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed
Constr. Class: Present Proposed
Heating Systems: ☐ New ☐ Existing
Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar
Location: [REDACTED]
Total Est. Cost of Fire Prot. Work \$ 600,000 ☐ Other [REDACTED]

JOB SUMMARY (Office Use Only)

PLAN REVIEW: **INSPECTIONS:**
☐ No Plans Required
Joint Plan Review Required: Type: Failure Failure Approval Initial
☐ Bldg. ☐ Plumb. ☐ Elec. Suppression Test 12/1/91
☒ Fire Plans Approved Fire Alarm Test 12/1/91
Date: 4-11-90 Smoke Test 12/1/91
Approved by: [Signature] Mechanical 12/1/91
SUBCODE APPROVAL: TCO 12/1/91
☐ CO ☐ L ☐ CA Other 12/1/91
Date: 12/1/91 Other 12/1/91
Approved by: [Signature] Other 12/1/91

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

D. TECHNICAL SITE DATA

Description of Work Spentley Spot and Grind III
need that under contract.

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

Wet Sprinkler Heads
Dry Sprinkler Heads
TOTAL 371
250.00
Smoke Detectors 1-13
Heat Detectors
TOTAL 2.0

Stand Pipes
Kitchen Hood Exhaust Systems

Pre-Engineered Systems
CO₂ Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas or Oil Fired Appliance
OTHER

Administrative Surcharge \$ 40.00
Paid ☐ Check # 310.00 Minimum Fee \$ 310.00
Collected by TOTAL FEE

