

RECEIVED
FEB 26 1999
CONSTRUCTION PERMIT APPLICATION



Application completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Proposed Work Site at: 856-RT70 BRICK, N.J.
 2. Name of Owner in Fee: H&R Block Tel. ()
 Address 856-RT70 BRICK - VENABO GARDEN RETAIL INC
 street municipality zip code
233 BROADWAY N.J. 10279
 3. Ownership in Fee: Public Private
 4. Principal Contractor: JERSEY SIGNS INC Tel. (732) 906-1044
 Address 390-19TH AVE BRICK, N.J. 08724
 License No. OR, if new home, Builder Reg. No. Exp. Date
 Federal Employee No. 222-875-876 FAX: (732) 206-1044
 5. Architect or Engineer Tel. ()
 Address
 6. Responsible Person in Charge of Work SIGNMAKERS INC
 Tel. (732) 919-1703 FAX (732) 919-0076

*wall sign -
St. 70 side of building*

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>35</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	\$ <u>2</u>		
10. Subtotal			
11. Cert. of Occupancy			
12. Other ZPA			
13. TOTAL	\$ <u>67</u>		

NO FEE REQUIRED

DATE 3/8/99

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)

APPROVED BY

II. PROPOSED WORK

1. ☐ Minor Work
 2. ☐ New Building
 3. ☐ Addition
 4. ☐ Alteration
 5. ☐ Fire Protection
 6. ☐ Plumbing
 7. ☐ Electrical
 8. ☐ Elevator Devices
 9. ☐ Asbestos Abat. Subch. 8
 10. ☐ Lead Hazard Abatement
 11. ☐ Demolition

TOTAL COSTS

OPTIONAL (for office use only)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
<u>2,300.00</u>	<u>JE</u>			<u>3-8-99</u>	<u>FM</u>	<u>1/14/2000</u>	<u>OK</u>
	<u>EW</u>	<u>3/3/99</u>		<u>3/8/99</u>	<u>JE</u>		

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

VIII. 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) CAB
 5. ☐ One-Family (R-3) BOCA
 6. ☐ One-Family (R-4) CAB

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:

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
 2. ☐ Prototype Processing

IMPORTANT
MANDATORY FEE - COLLECTED
R.H.B.T. - MANDATORY FEE - COLLECTED

LDS BR 10202077

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 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 JERSEY SIGNS INC.

Address 390-19TH AVE Bldg, N.J.

Telephone (731) 206-1044

Signature James P. [Signature] JERSEY SIGNS INC.

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

OFFICE DATE RECEIVED: _____

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

IMPORTANT
A.H.B.T. - EXEMPT

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

Name of Code & Edition

Name of Code & Edition

Building _____
 Electrical _____
 Plumbing _____
 Fire Protection _____
 Mechanical _____

Energy _____
 Barrier Free _____
 Flood Hazard _____
 As Built Elevation Cert. _____
 Other _____

Other _____

X. CERTIFICATES ISSUED (office use only)

DATE ISSUED

DATE EXPIRED

DATE REISSUED

DATE EXPIRED

☐ Temporary Certificate of Occupancy	No.	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No.	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No.	_____	_____	_____	_____
☐ Certificate of Compliance	No.	_____	_____	_____	_____
☐ Certificate of Occupancy	No.	_____	_____	_____	_____
☐ Certificate of Approval	No.	_____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	No.	_____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 03/16/99
Control #
Permit # 99-0687

IDENTIFICATION Block 852 Lot 4.01 Qual

Work Site Location 856 RI 70 HAR BLOCK
SIDE WALL SIGN RI 70
Owner in Fee HAR BLOCK/ YENATOR GROUP INC
Address 233 BROADWAY
NEW YORK, NY 10279-
Telephone (212)553-2199

Contractor JERSEY SIGNS INC.
Address 390 19TH AVE
BRICK, NJ 08724-
Telephone ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2875876

Is hereby granted permission to perform the following work:

- ☒ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABAITEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABAITEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

WALL SIGN ON SIDE (RI 70) OF BUILDING

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 \$ 2,300

Construction official [Signature]

03/16/99
Date

U.C.C. F170 (rev. 5/96)

PAYMENTS (Office Use Only)

Building	35
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	2
Cert. of Occupancy	0
Other	30
Total	67
Check No.	2337
Cash	
Collected By	CS

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 02/26/99
Date Issued 3/16/99
Control # C1-401
Permit # 99-0087

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

Block 852 lot 4.01 Qual
Work Site Location 856 RT 70 H&R BLOCK
SIDE WALL SIGN RT 70

Owner in Fee H&R BLOCK/ VEMATOR GROUP INC
Address 233 BROADWAY
NEW YORK, NY 10279-

Tele. (212) 553-2199

Contractor JERSEY SIGNS, INC.

Address 390 19TH AVE
BRICK, NJ 08724-

Tele. () Fax ()

Lic. No. of Bldrs. Reg. No.

Federal Emp. No. 22-2875876

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Req.			Type	Failure
☒ All	3-8-99	14	Footings	Initial
☐ Footing			Foundation	
☐ Foundation			Slab	
☐ Frame			Barrierfree	
☐ Other			Insulation	
Joint Plan Review Required:			Finishes	
☐ Elect ☐ Plumb ☐ Fire			Energy	
SUBCODE APPROVAL ☐ Elev			Mechanical	
☐ CO ☐ CCO ☐ CA			TCO	
Date:			Other	
Approved By:			Final	
			Barrierfree	

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	
☐ Addition	
☒ Alteration	
☐ Roofing	
☐ Siding	
☐ Fence	
☒ Sign	
☐ Pool	
☐ Asbestos Abatement Subchapter 8	
☐ Lead Haz. Abatement NJAC 5:17	
☐ Other	
other	
☐ Demolition	

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

WALL SIGN ON SIDE (RT 70) OF BUILDING

Per zoning Permit

8. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	1. New Bldg. \$
No. of Stories	0	0	2. Alteration \$
Height of Structure	0 ft.	0 ft.	3. Total (1+2) \$
Area Largest Floor	0 Sq. Ft.	0 Sq. Ft.	
New Bldg. Area/All Floors	0 Sq. Ft.	0 Sq. Ft.	Industrialized Building:
Volume of New Structure	0 Cu. Ft.	0 Cu. Ft.	☐ State Approved
Total Land Area Disturbed	0 Sq. Ft.	0 Sq. Ft.	☐ HUD

PAID [] CHECK #	ADMINISTRATIVE SURCHARGE
Collected by:	Minimum Fee
	TOTAL FEE
	DCA Training Fee

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: March 2, 1999 1999- 0201

Block 852 Lot 4.01 Zone B-3, H.D.

Property Address: 856 Route 70

Owner: Venator Group Retail Inc. (Phone): 206-1044

Applicant: Louis Montanaro (Phone): 364-3000

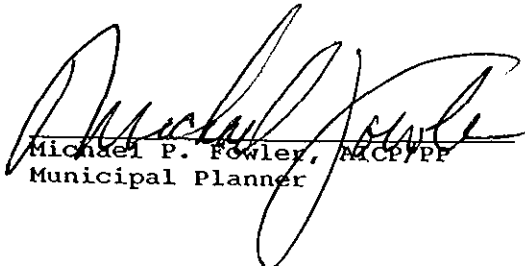
Existing Use: H & R Block Office

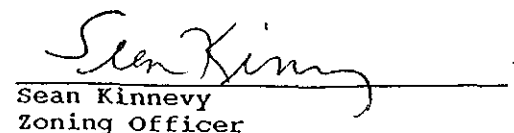
Proposed Use: H & R Block Office

Proposed Construction (if any): 2'x14' wall sign, aluminum letters,
"H & R Block"

Conditions: Total sign area may not exceed 15% of the total facade area.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.


Michael P. Fowler, MCP/PP
Municipal Planner


Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK
Zoning Permit Application
(Please Type or Print Neatly)

BLOCK 852 LOT 4.01
PROPERTY ADDRESS 856-RT 70 BRICK, N.J.
NAME OF OWNER NEWATOR GROUP RETAIL INC. OWNER'S PHONE (732) 206-1044
NAME OF APPLICANT H&R Block - Lou Montanaro
APPLICANT'S COMPLETE ADDRESS 856-RT 70 BRICK, N.J.
APPLICANT'S PHONE NUMBER (732) 731-364-3000 APPLICANT'S BUSINESS NAME H&R Block

PRESENT USE OF PROPERTY (check one)

- ☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment
☒ Commercial (please describe) H&R Block TAX OFFICE - WAS NUTRIA SYSTEM.
☐ Other (please describe) _____

PROPOSED USE OF PROPERTY (check one)

- ☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment
☒ Commercial (please describe) H&R Block TAX OFFICE STORE FRONT.
☐ Other (please describe) _____

PROPOSED CONSTRUCTION ON EAST WEST SIDE OF BUILDING RT 70 NON ILLUMINATED
All Dimensions 2 FT W 14 FT L 10 HI 24 FT TALL
Deck or Garage ☐ Attached ☐ Detached
Fence Type _____ HI _____ 28 sq. ft

CHECKLIST:

- ☐ All information completed above
☐ Two (2) accurate Survey / Plot Plans containing:
 ☐ all existing and proposed structures
 ☐ all dimensions of lot and structures
 ☐ set backs to all property lines
 ☐ all streets and waterways shown
☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

Signature of Applicant  JERSEY SIGNS INC. Date 2/25/99

Reviewed by Zoning Officer _____ Date 3/2/99

☒ Approved ☐ Rejected



ALUMINUM LETTER
FASTENED WITH
1/4" ROD & PL 800
ADHESIVE

EXISTING BLOCK
WALL

PROPOSED SIGNAGE
FOR H&R BLOCK
NON ILLUMINATED
AND WELDED CHANNEL
LETTERS PAINT WHITE

14'

FOOTLOCKER WINDMILL H&R BLOCK

EXISTING ALUMINUM
LETTERS 24" HIGH

91'

(EAST WEST WALL)
FACING-ATTO.

EXISTING BLOCK WALL

24" ALTRIA SYSTEM WAS ON WALL - TAKEN DOWN

WHERE WE WOULD PUT H&R BLOCK 24"

TOTAL F. 0.1

IRRSBY SIGNS INC.

390 - 19th Avenue
Brick, N.J. 08724

Tel or Fax (908) 206-1044

PROPOSED SIGNAGE
FOR H & R BLOCK
NON ILLUMINATED
NON WELDED CHANNEL-
LETTERS PAINT WHITE

WALKING BLOCK

Electricity

FOOTLOCKER WINDMILL H&R BLOCK

EXISTING ALPHABETIC
LETTERS 24" HIGH

[illegible]

(EAST WEST WALK
FRANCISCO.)

24" NUTRIA SYSTEM WAS ON WALL - TAKEN DOWN
WERE WE WOULD PUT HARR BLOCK 24"

EXISTING BLACK WALL

JERSEY SIGNS INC.

390 - 19th Avenue
Brick, N.J. 08724

Tel or Fax (908) 206-1044

BRICK TOWNSHIP

BY NE

Date 3/2/79

Class

Plan Review

Zoning Wall N^o 92

Plumbing

3-8-99 FWM

Building

Fire

Energy

Electrical

TOWNSHIP OF BRICK

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



Joseph C. Scarpelli, Mayor

Township Council:

Helen Fayad - President
Martin J. Anton
Victor Cantillo
Gregory S. Kavanagh
Mary Lou Powner
Kathy M. Russell
Frederick J. Underwood, Sr.

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # _____

APPROVAL DATE: _____

(Planning Board/BOA)

DATE: 3-4-99

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 852 LOT 4.01 SITE ADDRESS 856 RT 70

TYPE OF SITE Commercial TYPE OF BUSINESS Sign
(Residential/Commercial) H & R Block

APPLICANT Jersey Sign Inc. CITY & STATE Brick NJ

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

\$ 0.00

Frederick R. Millman
Frederick R. Millman, CTA, Tax Assessor

3-8-99
Date

☐ Please review the attached application for a final assessed value for the construction at the above referenced site:

\$ _____

Frederick R. Millman
Frederick R. Millman, CTA, Tax Assessor

Date

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 852 LOT 4.01 SITE ADDRESS 856 RT 70
TYPE OF SITE Residential / Commercial TYPE OF BUSINESS Sign
APPLICANT Jensen Signs Inc. PHONE NUMBER 206-1044
APPLICANT ADDRESS 340-RT. AVE CITY & STATE BRICK NJ
PERMIT # C1-401 NAME OF BUSINESS HER BLOCK

INCLUSIONARY DEVELOPMENT

◇ Affordable	Fee Required _____	Date _____
	Down Payment _____	Date _____
	Balance _____	Date _____
	Paid In Full _____	Date _____
◇ Market Rate	No Fee Required	

MANDATORY DEVELOPER FEES

◇ Residential is .005 %
☒ Commercial is .01 %

Estimated Assessment \$ - 0 - Date 1-5-99
Estimated Required Fee \$ - 0 -
Required Deposit on Estimate \$ _____ Date _____
Check # _____ Receipt # _____
Actual Assessment \$ _____ Date _____
Actual Required Fee \$ _____
Minus Deposit of Estimate \$ _____
Balance Due \$ _____ Date _____
Check # _____ Receipt # _____
Amount Paid In Full \$ _____

Fees Imposed To Date _____
Fees Reached \$15,000 _____ Date _____

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

NO FEE REQUIRED

APPROVED BY [Signature] DATE 1/5/99

Carol A. Wolfe
Affordable Housing Administrator

COUNTER FORM
PLEASE PRINT

TOWNSHIP OF BRICK

401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: <u>856 RT 70</u>	Date Rec'd: _____
Block: <u>85.2</u>	Lot: <u>4A</u>
Owner in Fee: <u>VENATOR GROUP RETAIL INC.</u>	Control #: _____
Address: <u>233 BROADWAY NEW YORK N.Y. 10279</u>	
State: _____	Zip: _____
SS #: _____	Phone: (____) _____
Provide only if Applicant is owner	

PLUMBING SUBCODE		BUILDING SUBCODE	
CONTRACTOR: _____		CONTRACTOR: <u>JERSEY SIGNS INC</u>	
ADDRESS: _____		ADDRESS: <u>390-19TH AVE BRICK, N.J. 08724</u>	
PHONE: _____		PHONE: <u>(732) 206-1044</u>	
LIC #: _____		LIC #: _____	
LIC. EXPIRATION DATE: _____		LIC. EXPIRATION DATE: _____	
FEDERAL EMP. # (or S.S. #): _____		FEDERAL EMP. # (or S.S. #): <u>222-875-876</u>	
TECHNICAL SITE DATA (LIST ALL FIXTURES)		TECHNICAL SITE DATA	
NO.	FIXTURE/EQUIPMENT	DESCRIPTION OF WORK: <u>TO FABRICATE & INSTALL 24" NON ILLUMINATED INDIVIDUAL LETTERS, THE WINDMILL & FOOT LOCKER ARE UP 24" ALSO. NUTRIA SYSTEM WAS UP ON WALL TAKEN DOWN TO MAKE ROOM FOR H&R. BLOCK. WALL IS 27' X 91'. H&R. BLOCK: 2' X 14' 98 sq. FT.</u>	
_____	Water Closet		
_____	Urinal / Bidet		
_____	Bath Tub		
_____	Lavatory		
_____	Shower		
_____	Floor Drain		
_____	Sink		
_____	Dishwasher		
_____	Drinking Fountain		
_____	Washing Machine		
_____	Hose Bibb		
_____	Gas Piping		
_____	Fuel Oil Piping		
_____	Water Heater		
_____	Steam Boiler		
_____	Hot Water Boiler		
_____	Sewer Pump		
_____	Interceptor / Separator		
_____	Backflow Preventer		
_____	Greasetrap		
_____	Water Cooled AC or Refrig. Unit		
_____	Sewer Connection		
_____	Septic (Disposal System) Closure		
_____	Water Service Connection		
_____	Gas Service Connection		
_____	Active Solar System		
_____	Vent Through Roof		
_____	Other		
Estimated Cost of Plumbing Work: \$ _____		TYPE OF WORK	
Signature: _____		☐ New Building ☐ Addition ☐ Alteration ☐ Roofing ☐ Siding ☐ Other: _____ ☐ Other: _____	
Owner ☐ Contractor ☐		☐ Fence: _____ Height (6' or More) ☒ Sign: _____ Sq. Ft. <u>285 sq. ft.</u> ☐ Pool (In Ground) ☐ Pool (Above Ground) ☐ Asbestos Abatement ☐ Demolition	
BCODE APPROVAL:		BUILDING CHARACTERISTICS	
ANS: _____ Required ☐ Approved ☐		USE GROUP _____ Present: _____ Proposed: _____	
Approved by: _____		CONSTR. CLASS _____ Present: _____ Proposed: _____	
Contractor AFFIX SEAL:		No. of Stories: _____	
		Height of Structure: _____	
		Area - Largest Floor: _____	
		New Building Area / All Floors: _____	
		Volume of Structure: _____ Total Land Disturbed: _____	
		Signature: _____	
		Estimated Cost of Building Work: _____	
		New Building (1): \$ _____	
		Alteration (2): \$ _____	
		TOTAL (1+2): \$ _____	
		SUBCODE APPROVAL:	
		PLANS: _____ Required ☐ Approved ☐	
		Approved by: _____	
		Date: _____	

