

04-0186



C83-45

1. Proposed Work Site at: 1661 Forge Pond Rd, Brick, N.J 08724

2. Name of Owner in Fee: Wei Wang / Chi Zhang Tel. [REDACTED]

Address 1661 Forge Pond Rd Brick 08724

street municipality zip code

3. Ownership in Fee: Public _____ Private X

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

Address _____

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

Federal Employee No. _____ FAX: (_____) _____

5. Architect or Engineer _____ Tel. (_____) _____

Address _____

6. Responsible Person in Charge of Work _____

Tel. (_____) _____ FAX (_____) _____

1.	Building	\$		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	\$		
7.	Less 20% for State Plan Review			
8.	Subtotal	\$		
9.	DCA Training Fee			
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	\$	110	

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)

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

OPTIONAL (for office use only)[illegible]

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:

- ☐ Partial Releases
- ☐ 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

LDS BR 10305806

1. OWNER SECTION (to be completed if the applicant is the owner in fee)

Mark the following applicable boxes:

- 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.

- 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.1. () Building C.2. () Fire Protection

C.3. (x) Electrical C.4. (x) Plumbing

- 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.

Signature cc - 3/2 Date 12/31/03

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 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.

() Check if contractor.

Address _____

Signature _____

- U C C F100-2 (rev 3/96)

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.									
☐									
☐									

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 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. _____	_____	_____	_____

Constituent Contact Report

[illegible]

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMITS

Date Issued 01/23/2004
Control #
Permit # 04-0186

IDENTIFICATION Block 834 Lot 5

Sheet

Work Site Location 1661 FORGE POND RD

ELEC/SPRINK

Contractor H Q H E Q H E R
Address

Owner in Fee ZHANG/HANG

SALE

BRICK, NJ 08724-

Telephone

Telephone ()
Lic. No. or Bldg. Reg. No.
Federal Emp. No. 10-

Is hereby granted permission to perform the following work:

☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☒ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter B only)

DESCRIPTION OF WORK:
ELECTRIC & SPINKLERS

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 \$ 400

D. J. Munnich
Construction Official 01/23/2004

U.C.C. F170 (rev. 3/96) NJ UCARS 5.24E

Date

PAYMENTS (Office Use Only)

Building	0
Electrical	35
Plumbing	75
Fire Protection	0
Elevator Devices	0
Other	0
DOA State Permit Fee	0
Cert. of Occupancy	0
Other	0
Total	110
Check No.	1394
Cash	
Collected By	JB

01/23/04 9:53AM 000000#6523

XX06 SERV.006

#040186
ELECTRIC
PLUMBING
CHECK \$110.00
\$35.00
\$75.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 12/31/2003
Date Issued 1/23/04
Control # C83-45
Permit # 04-0186

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 834 Lot 5 Qual
Work Site Location 1661 FORGE POND RD
ELEC/SPRINK

NO.

FEE (Office Use Only)

Owner in Fee ZHANG/WANG
Address SAME
BRICK, NJ 08724-

Contractor
Address
Telephone

Lic. No. of Bldgs. Reg. No.
Federal Emp. No. HO-

1800
1824-247

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 300

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[] No Plans Required
Joint Plan Review Required:

INSPECTIONS	Dates (Month/Day)
Type	Failure Failure Approval Initial
Slab	
Rough	
Water	
Sewer	
Fixtures	
Gas Equip.	
Gas Piping	
Solar	

Date: 12/31/03
Approved By: [Signature]
SUBCODE APPROVAL
[] CO [] CC [] CA

Date: 12-31-04
Approved By: [Signature]

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.

Re-employment paper, 12/31/04

PAID [] CHECK #
Collected by:

Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 75
DCA State Permit Fee \$ 0

Signature/Contractor Seal
[] Licensed Plumbing Contractor [] Exempt Applicant

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/31/2003
Date Issued 12/31/03
Control # C83-45
Permit # 04-0184

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

Block 834 Lot 5 Qual
Work Site Location 1661 FORGE POND RD
ELEC/SPRINK

Owner in Fee ZHANG/WANG
Address SAME
BRICK, NJ 08724-

Telephone
Contractor
Address

Lic. No. or Bldgs. Reg. No.
Federal Emp. No. HO-

B. ELECTRICAL CHARACTERISTICS
Use Group - Present Proposed R-5
[] Pole/Pad [] Temporary [] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work \$ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
Type Rough Temp Serv Const Serv TCO Other

INSPECTIONS
Dates (Month/Day)
Failure Approval Initial

Approved By: JNV
SUBCODE APPROVAL
[] CO [] CCO [X] CA
Date: 12/31/03
Approved By: JNV

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
3	0	Lighting Fixtures	
0	0	Receptacles	
3	0	Switches	
0	0	Detectors	
0	0	Light Poles	
0	0	Motors-Fract HP	
0	0	Emergency & Exit Lights	
0	0	Communications Points	
0	0	Alarm Devices/F.A.C. Panel	
6	0	TOTAL NUMBERS	35
0	0	Pool Permit/with UW Lights	0
0	0	Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
0	0	Other	0
0	0	Other	0

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.

Applicant's Signature/Contractor's Seal and Signature
[] Licensed Electrical Contractor [] Exempt Applicant

Paid [] Check #
Collected by: Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 35
DCA State Permit Fee \$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 12/31/2003
Date Issued 1/23/04
Control # CB3-45
Permit # 04-0186

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

Block 834 Lot 5 Qual
Work Site Location 1661 FORGE POND RD

Owner in Fee ZHANG/MANG
Address SAME
BRICK, NJ 08724-

Tele [REDACTED]
Contractor [REDACTED]
Address [REDACTED]

Tele ()
Lic. No. of Bldgs. Reg. No.
Federal Emp. No. NO-

B. PLUMBING CHARACTERISTICS
Use Group Present Proposed R-5
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 300

JOB SUMMARY (Office Use Only)
PLAN REVIEW
☒ No Plans Required
Joint Plan Review Required:
☐ Bldg ☐ Eject
☐ Fire ☐ Elevator
☐ Plumb. Plans Approved
Date: 12/31/03
Approved by: [Signature]
SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
Approved By: TCO
Date: [REDACTED]

INSPECTIONS
Type Failure Failure Approval Initial
Slab
Rough
Water
Sewer
Fixtures
Gas Equip.
Gas Piping
Solar
TCO

D. TECHNICAL SITE DATA (List all fixtures.)

NO.

FIXTURE/EQUIPMENT

FEE (Office Use Only)

Water Closet	0
Urinal / Bidet	0
Bath Tub	0
Lavatory	0
Shower	0
Floor Drain	0
Sink	0
Dishwasher	0
Drinking Fountain	0
Washing Machine	0
Hose Bib	0
Water Heater	0
Fuel Oil Piping	0
Gas Piping	0
Steam Boiler	0
Hot Water Boiler	0
Sewer Pump	0
Interceptor / Separator	0
Backflow Preventer	35
Greasetrap	0
Sewer Connection	0
Water Service Connection	0
Stacks	0
Other 5 SPRK HEADS	40
Other	0

Paid ☐ Check #
Collected by: Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 75
DCA State Permit Fee \$ 0

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
☐ Licensed Plumbing Contractor ☐ Exempt Applicant

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/31/2003
Date Issued 1/23/04
Control # C83-45
Permit # 04-0186

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

Block 834 lot 5 Quad
Work Site Location 1661 FORGE POND RD

ELEC/SPRINK

Owner in Fee ZHANG/WANG

Address SAME

BRICK, NJ 08724-

Contractor

Address

Telephone

Lic. No. or Bldgs. Reg. No.

Federal Emp. No. HO-

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-5

[] Pole/Pad [] Temporary [] Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work \$ 100

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.

Applicant's Signature/Contractor's Seal and Signature

[] Licensed Electrical Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

NO. SIZE

ITEM

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 UM Lights

Storable Pool/Spa/Hot Tub

KW Elect Range/Receptacle

KW Oven/Surface Unit

KW Elect Water Heater

KW Elect Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

Baseboard Heat

HP Motors 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elect Sign/Outline Light

Other

Other

INSPECTIONS Dates (Month/Day)

Type Failure Failure Approval Initials

Rough

Temp Serv

Const Serv

TCO

Other

Service

Final

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Approved By: MMK

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: 12/31/03

Approved By: MMK

Administrative Surcharge \$ 0

Minimum Fee \$ 0

TOTAL FEE \$ 35

DCA State Permit Fee \$ 0

Counter Form
PLEASE PRINT

PLUMBING

Contractor: _____
Address: _____
Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	
Lavatory (BR Sink)	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bib	
Gas Piping	
Fuel Oil Piping	
Water Heater	
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Air Conditioner (Condensate Drain)	
Septic Tank Closure	
Sewer Service Connection	
Water Service Connection	
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	5
Sump Pump	
Pool Heater	
Other:	

Estimated Cost of Plumbing Work \$300

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

Signature: _____
Please Print Name: Chi Zhang

CONTRACTOR'S SEAL

FIRE

Contractor: _____
Address: _____
Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Description of Work:

Heating Type: Gas Oil Electric Solar
Heating System is New Existing
Location of Furnace/Boiler: _____
Water Supply Source _____
Method of Valve Supervision _____
Local Alarm Supervision _____
Central Supervision: _____
Proprietary Supervision: _____

Flammable Storage Tanks	capacity	fuel
Combustible Storage Tanks	capacity	fuel
LPG Storage Tanks	capacity	fuel

Item	Quantity
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust System	
Pre-Engineered Systems:	
CO2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	

Gas/ Oil Fired Appliances:

Gas Stove _____
Gas Dryer _____
Furnace (Gas or Oil) _____
Gas Fireplace _____
Gas Logs _____
Total Appliances _____

Wood Burning Stove _____
Wood Fireplace _____
Other: _____

Estimated Cost of Fire Work _____

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

Signature: _____
Print Name: _____

Township of Brick

Counter Form (PLEASE PRINT)

Site Location: 1661 Forge Pond Rd
Block: 839 Lot: 5
Owner's Name: WANG, WEI & ZHANG CHI
Owner's Mailing Address: 1661 Forge Pond Rd, Brick, NJ 08724
Phone: [REDACTED]

BUILDING

Contractor: _____
Address: _____
Phone#: _____
Lis # _____
Federal Emp # or SSN _____

Technical Data

Description of Work: _____

Type of Work

☐ New Building ☐ Siding
☐ Addition ☐ Fence
☐ Alteration ☐ Pool
☐ Roofing ☐ Demolition
☐ Asbestos Abatement ☐ Sign _____ sq ft
☐ Fireplace wd/gas

Building Characteristics

Use Group Present: _____ Proposed: _____
No of Stories: _____
Height of Structure: _____
Area of the largest floor: _____
Area of New Structure: _____
Volume of New Structure: _____
Total Land Disturbed: _____

Cost of Alteration: \$ _____

Cost of New Building: \$ _____

Cost of Site Work \$ _____

Total Cost of New Building Work: \$ _____

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

Signature: _____
Please Print Name _____

ELECTRICAL

Contractor: _____
Address: _____
Phone#: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Item	Quantity
Outlet	3
Lighting Fixtures	
Receptacles	
Switches	3
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	46

Pool (Receptacles, Switches, Lights, Motor 1HP) _____
Spa/Hot Tub/Storable Pool _____
Electric Range _____ KW
Oven/Surface Unit _____ KW
Electric Water Heater _____ KW
Electric Dryer _____ KW
Dishwasher _____ KW
Garbage Disposal _____ HP
A/C Unit - Central Air _____ KW
Space Heater/Air Handler _____ KW
Baseboard Heating _____ KW
Motors 1+ HP _____
Transformer/Generator _____ KW
Light Stander _____ AMP
Service _____ AMP
Subpanel _____ AMP
Motor Control Center _____ AMP
Sign/Outline Light _____ KW
Furnace _____
Steam Boiler _____
Other: _____

Estimated Cost of Electrical Work: \$100.00

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

Signature: Chi Zhang
Please Print Name Chi Zhang

CONTRACTOR'S SEAL