

BLOCK 673 LOT 14 QUALIFICATION CODE _____ ADDRESS (SITE) 751 Brick Blvd. PERMIT NO. 09-3048



CONSTRUCTION PERMIT APPLICATION

COA-004207

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

I. IDENTIFICATION

1. Proposed Work Site at: 751 Brick Blvd.

2. Name of Owner In Fee: Elgan Realty LLC
Tel. (732) 948-0562 e-mail _____
Address 100 Easy Street Mantoloking NJ 08738
street municipality zip code

3. Ownership in Fee: Public _____ Private ☒ _____

4. Principal Contractor: General Sewer & Plumbing Tel. (732) 477-2667
Address P.O. Box 335 Farmingdale NJ 07727 e-mail _____
License No. OR, if new home, Builder Reg. No. 8596 Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. 33-1063645 FAX: (732) 938-7699

5. Architect or Engineer _____ Contact _____
Address _____ e-mail _____
Tel. (_____) _____ FAX: (_____) _____

6. Responsible Person in Charge once Work has Begun Frank Maletto
Tel. (732) 477-2667 FAX: (732) 938-7699

V. FEE SUMMARY (for office use only)

	Update	Update
1. Building	\$ <u>20</u>	
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	\$ <u>60</u>	

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories	_____ ft.	(office use only)
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	_____	

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 Approval	Rejection	Re-viewer
	<i>[Signature]</i>	<i>11/15/09</i>						
				<i>11-15-09</i>	<i>BU</i>			

TOTAL COSTS

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):

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

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 General Sewer & Plumbing

Address P.O. Box 335

Farmingdale NJ 07727

Telephone (732) 477-2667

Signature [Signature]

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/28/2010
Control Number C-09-004207
Permit Number 09-3048
Permit Issue Date 12/11/2009
Certificate Number 09-3048

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 751 BRICK BLVD. Brick Township, NJ Block: 673 Lot: 14 Qual: _____
Owner in Fee: ELGAN REALTY LLC C/O E. HALPER
Owner Address: 100 EASY STREET MANTOLOKING NJ 08738
Telephone: (732) 948-0562
Contractor: GENERAL SEWER & PLUMBING
Address: PO BOX 335 125 ADELPHIA ROAD FARMINGDALE NJ 07727
Telephone: (732) 477-2667 Fax: (732) 938-7699
License Number or Builders Registration Number: 8596 Federal Emp. Number: 33-1063645

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: SEWER SERVICE CONNECTION EMERGENCY SEWER LINE REPLACEMENT

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: _____



CONSTRUCTION PERMIT

Date Issued 12-11-09
Control # C-09-004207
Permit # 09-004207

IDENTIFICATION Block: 673 Lot: 14 Qualifier _____
Work Site Location: 751 BRICK BLVD. Brick Township, NJ Contractor GENERAL SEWER & PLUMBING
Address PO BOX 335 125 ADELPHIA ROAD FARMINGDALE NJ
Owner in Fee ELGAN REALTY LLC C/O E. HALPER Telephone: (732) 477-2667
100 EASY STREET MANTOLOKING NJ 08738 Lic. No. or Bldrs. Reg. No. 8596
Telephone: (732) 948-0562 Federal Employee. No. 33-1063645

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

SEWER SERVICE CONNECTION EMERGENCY SEWER LINE REPLACEMENT

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 \$5,800

Construction Official [Signature]

Date 11-17-09

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$0
Plumbing	\$50
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$10
CO Fee	
Other	\$0
Total	\$60
Check No.	<u>60</u>
Cash	\$0
Credit	\$0
Collected By	

REQUIRED INSPECTIONS

12/11/09 4:12PM 00155845030
XX02 SERV.002

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 15:23-18. 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:

- 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.
- Foundations and all walls up to grade level prior to back filling.
- 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.
- 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.

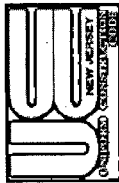
☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ 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".

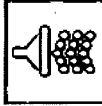
☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

12/11/09 4:12PM 00155845030
XX02 SERV.002
550.00
10.00
0.00
60.00
10.00
12/11/09 4:12PM 00155845030
XX02
160.00



PLUMBING 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 673 Lot 14 Qualification Code _____
Work Site Location 751 Brick Blvd. CONCAST
Brick NJ
Owner in Fee Elgan Realty LLC
Address 100 Easy Street
Mantoloking NJ 08738
Tel (732) 948-0562
Contractor General Sewer & Plumbing
Address P.O. Box 335
Farmingdale NJ 07727
Tel (732) 477-2667 FAX (732) 938-7699
Contractor License No. 8596
Federal Emp. No. 33-1063645

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Est. Cost of Plumbing Work \$ 5800.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
				Failure	Approval
☐ No Plans Required	Type:	Slab			Initial
		Rough			
☐ Building ☐ Electric	Joint Plan Review Required:	Water			
☐ Fire ☐ Elevator		Sewer			
☒ Plumbing Plans Approved		Fixtures			
Date: <u>11-15-05</u>		Gas Equipment			
Approved by: _____		Gas Piping			
SUBCODE APPROVAL		LPGas Tank			
☐ CO ☐ CCO ☐ CA		Fuel Oil Piping			
Date: _____		Solar			
Approved by: _____		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.

Applicant's Signature/Contractor's Seal and Signature
☒ Licensed Plumbing Contractor ☐ Exempt Applicant

U.C.C. F130 (rev. 1/04)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

D. TECHNICAL SITE DATA (List of all fixtures.)

NO. FUTURE/EQUIPMENT

Water Closet _____
Urinal/Bidet _____
Bath Tub _____
Lavatory _____
Shower _____
Floor Drain _____
Sink _____
Dishwasher _____
Drinking Fountain _____
Washing Machine _____
Hose Bibb _____
Water Heater _____
Fuel Oil Piping _____
Gas Piping _____
LPGas Tank _____
Steam Boiler _____
Hot Water Boiler _____
Sewer Pump _____
Interceptor/Separator _____
Backflow Preventer _____
Greasetrap _____
Sewer Connection _____
Water Service Connection _____
Stacks _____
Other sewer line replacement _____
Other emergency _____

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

FEE (Office Use Only)
\$ _____

Date Received
Control #

Date Issued
Permit #

09-3048
12-11-09



PLUMBING 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 673 Lot 14 Qualification Code _____
Work Site Location 751 Brick Blvd. CORICAST
Owner in Fee Brick NJ
Address Elgen Realty LLC
100 Wasy Street
Mantoloking NJ 08738
Tel (732) 948-0562
Contractor General Sewer & Plumbing
Address P.O. Box 335
Farmingdale NJ 07727
Tel (732) 477-2667 FAX (732) 938-7699
Contractor License No. 8596
Federal Emp. No. 33-1063645

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Est. Cost of Plumbing Work \$ 5900.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	Joint Plan Review Required:	Type:	Failure	Approval	Initial
☐ Building	☐ Electric	Slab			
☐ Fire	☐ Elevator	Rough			
☒ Plumbing Plans Approved		Water			
Date: <u>12-11-09</u>		Sewer			
Approved by: _____		Fixtures			
		Gas Equipment			
SUBCODE APPROVAL		Gas Piping			
☐ CO ☐ CCO ☐ CA		LPGas Tank			
Date: _____		Fuel Oil Piping			
Approved by: _____		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.

Applicant's Signature/Contractor's Seal and Signature
[☒] Licensed Plumbing Contractor [☐] Exempt Applicant

Date Received
Control #
Date Issued
Permit #

D. TECHNICAL SITE DATA (List of all fixtures.)

FIXTURE/EQUIPMENT

NO. _____
Water Closet _____
Urinal/Bidet _____
Bath Tub _____
Lavatory _____
Shower _____
Floor Drain _____
Sink _____
Dishwasher _____
Drinking Fountain _____
Washing Machine _____
Hose Bibb _____
Water Heater _____
Fuel Oil Piping _____
Gas Piping _____
LPGas Tank _____
Steam Boiler _____
Hot Water Boiler _____
Sewer Pump _____
Interceptor/Separator _____
Backflow Preventer _____
Greasetrap _____
Sewer Connection _____
Water Service Connection _____
Stacks _____
Other sewer line replacement _____
Other emergency _____

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

FEE (Office Use Only)
\$ _____

U.C.C. F130 (rev. 1/04)

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3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



PLUMBING SUBCODE
TECHNICAL SECTION



Date Received
Control #
Date Issued
Permit #

09-3048
12-11-09

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

Block 673
Work Site Location 751 Brick Blvd. 14 Qualification Code 14
Owner in Fee Elgan Realty LLC
Address 100 Easy Street
Mantoloking NJ 08738
Tel (732) 948-0562
Contractor General Sewer & Plumbing
Address P.O. Box 335
Farmlandale NJ 07127
Tel (732) 477-2667 FAX (732) 938-7699
Contractor License No. 8596
Federal Emp. No. 33-1063645

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work \$ 5800.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
[] No Plans Required	Type:	Failure Approval Initial
Joint Plan Review Required:	Slab	
[] Building [] Electric	Rough	
[] Fire [] Elevator	Water	
[] Plumbing Plans Approved	Sewer	
Date: 11-19-09	Fixtures	
Approved by: [Signature]	Gas Equipment	
SUBCODE APPROVAL	Gas Piping	
[] CO [] CCO [] CA	LPGas Tank	
Date: 11-15-10	Fuel Oil Piping	
Approved by:	Solar	
	TGO	

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

[X] Licensed Plumbing Contractor [] Exempt Applicant

U.C.C. F130 (rev. 1/04)

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

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	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other sewer line replacement	
	Other emergency	
	Administrative Surcharge	\$
	Minimum Fee	\$
	State Permit Surcharge Fee	\$
	TOTAL FEE	\$

COMMERCIAL



CONSTRUCTION PERMIT

Date Issued _____
Permit # _____

IDENTIFICATION Block 673 Lot 14 Qualification Code _____
Work Site Location 751 Brick Blvd COMCAST
Brick NJ
Owner in Fee Elgan Realty LLC
Address 100 Easy Street
Mantoloking NJ 08738
Tel. (732) 948-0562
Contractor General Sewer & Plumbing
Address P.O. Box 335
Farmingdale NJ 07727
Tel. (732) 477-2667
Lic. No. or Bids. Reg. No. 8596

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Sewer line replacement. Emergency

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 \$ 5800.00

Construction Official _____

Date _____

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT

(see reverse side)

PAYMENTS (Office Use Only)

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA State Permit Fee _____
Cert. of Occupancy _____
Other _____
Total _____
Check No. _____
Cash _____
Collected by _____

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 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 given.

☐ 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 the case 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. Utility services, including septic.
4. 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.

☐ 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.

CONSTRUCTION **PERMIT**

Date Issued _____
Permit # _____

IDENTIFICATION Block 673 Lot 14 Qualification Code _____
 Work Site Location 751 Brick Blvd CONCAST Contractor General Sewer & Plumbing
Brick NJ P.O. Box 335
 Owner in Fee Elgan Realty LLC Address Farmingdale NJ 07727
 Address 100 Easy Street Tel. (732) 477-2667
Mantoloking NJ 08738 Lic. No. or Bids. Reg. No. 8596
 Tel. (732) 948-0562

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: **Sewer line replacement. Emergency**

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 \$ 5800.00

Construction Official _____

Date _____

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT

(see reverse side)

PAYMENTS (Office Use Only)	
Building _____	
Electrical _____	
Plumbing _____	
Fire Protection _____	
Elevator Devices _____	
Other _____	
DCA State Permit Fee _____	
Cert. of Occupancy _____	
Other _____	
Total _____	
Check No. _____	
Cash _____	
Collected by _____	

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 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 given.

☐ 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 the case 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. Utility services, including septic.
 4. 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.
- ☐ 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.

CONSTRUCTION **PERMIT**

Date Issued _____
 Permit # _____

IDENTIFICATION Block 673 Lot 14 Qualification Code _____
 Work Site Location 751 Brick Blvd COXCAST Contractor General Sewer & Plumbing
Brick NJ Address P.O. Box 335
 Owner in Fee Elgan Realty LLC Farmingdale NJ 07727
 Address 100 Easy Street Tel. (732) 477-2667
Mantoloking NJ 08738 Lic. No. or Bldrs. Reg. No. 8596
 Tel. (732) 948-0562

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Construction Official _____ Date _____

U.C.C. F170 (rev. 07/04)

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(see reverse side)

PAYMENTS (Office Use Only)	
Building	_____
Electrical	_____
Plumbing	_____
Fire Protection	_____
Elevator Devices	_____
Other	_____
DCA State Permit Fee	_____
Cert. of Occupancy	_____
Other	_____
Total	_____
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Cash	_____
Collected by	_____

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Permit # _____

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Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA State Permit Fee _____
Cert. of Occupancy _____
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GENERAL®



T.V. INSPECTION UNIT

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	671-2226	477-2667
	264-1170	349-5544
	566-5000	609-971-0538
	222-1193	Fax 938-7699

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