BLOCK 470.01 LOT 16+17 ADDRESS (SITE) 595 BRICK BLVD PERMIT NO. _____

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 595 BRICK BLVD.
2. Name of Owner in Fee: KENNETH X. LUTNY Tel. (908) 442-6206
   Address 917 AMBOY AVE. PERTH AMBOY NJ 08861
   (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: STEWART SIGN Tel. (201) 538-0626
   Address 46 ABBETT AVE MORRISTOWN, NJ. 07960
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. 22-2231?? Social Security No. _____
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person In Charge of Work _____ Tel. (____) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 108 —		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee			
10. Subtotal	$		
11. Cert. of Occupancy	20.00		
12. Other			
13. TOTAL	$ 128 —		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories 2	
2. Height of Structure 18 ft.	
3. Area—Largest Floor 4400 sq. ft.	
4. Building Area—All Floors 5400 sq. ft.	
5. Volume of Structure 10000 cu. ft.	
6. Construction Classification SIGN	
7. Total Land Area Disturbed -0- 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	

II. PROPOSED WORK

	Est. Cost
1. ☑ Minor Work (single trade)	4000
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	4000

Sign

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
[illegible]	10-29-91		10/4/91	RC			

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
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

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: RETAIL
2. Use Group: RETAIL
3. Change in Use Group, Indicate Former: RETAIL

LDS BR 10510989

20K

U.C.C. Form C-1004

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.vil:

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 Kenneth x Lacy 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 _____

Address _____

_____

Telephone (____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date	COMMENTS
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Fire Department					X	X	X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Dept. of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Dept. of Environmental Protect.	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☒ Other Zoning	JC	10/2/91	signs						
☐									
☐									

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 EXPIRED
☐ Temporary Certificate of Occupancy	No.		
☐ Temporary Certificate of Occupancy	No.		
☐ Continued Certificate of Occupancy	No.		
☐ Certificate of Occupancy	No.		
☐ Certificate of Approval	No.		
☐ None			

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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

Block 470.01 Lot 16 + 17
Work Site Location 595 BRICK BLVD

Owner in Fee KENNETH X. LUTHY
Address 917 AMBOY AVE
PERTH AMBOY, N.J. 08861
Tele. (908) 442-6200
Contractor STEWART SIGN
Address 46 ABBETT AVE
MORRISTOWN, N.J. 07960
Tele. (201) 538-0626
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2231722 or Social Security No.

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

REFACE 5'X12' FREE STANDING SIGN (EXISTING FOOTINGS & SIGN)
INSTALL WALL SIGN 3'X16'
WITH STEEL MOLY BOLTS

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
[ ] No Plans Req.							
[ ] All	10/4/91	A/C	Footing				
[ ] Footing			Foundation				
[ ] Foundation			Slab				
[ ] Frame			Frame				
[ ] Other			Insulation				
Joint Plan Review Required:			Finishes:				
[ ] Elec. [ ] Plumb. [ ] Fire			Energy				
SUBCODE APPROVAL			Mechanical				
[ ] CO [ ] CCO [ ] CA			TCO				
Date:			Other				
Approved By:			Final				

B. BUILDING CHARACTERISTICS

Use Group	Present RETAIL	Proposed RETAIL
Constr. Class	Present	Proposed
No. of Stories		2
Height of Structure	18	Ft.
Area—Largest Floor	4400	Sq. Ft.
Total Bldg. Area/All Floors	5400	Sq. Ft.
Volume of Structure	10000	Cu. Ft.
Total Land Area Disturbed	-0-	Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ 4000
3. Total (1+2) $ 4000

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other
[ ] Demolition
[✓] Miscellaneous
  [ ] Fence Height
  [ ] Sign 108 Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other

(Office Use Only) FEE

$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-110A

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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

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MORRISTOWN, N.J. 07960
Tele. (201) 538-0626
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2231772 or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All	10/4/91	A/C
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group	Present RETAIL	Proposed RETAIL
Constr. Class	Present	Proposed
No. of Stories	1	2
Height of Structure	18 Ft.	
Area—Largest Floor	4400 Sq. Ft.	
Total Bldg. Area/All Floors	5400 Sq. Ft.	
Volume of Structure	10000 Cu. Ft.	
Total Land Area Disturbed	-0- Sq. Ft.	

Est. Cost of Bldg. Work:
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Signature Kenneth X Luthy

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REFACE 5'X12' FREE STANDING SIGN (EXISTING FOOTINGS + SIGN)
INSTALL WALL SIGN 3'X16'
WITH STEEL MOLY BOLTS

TYPE OF WORK:
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  [ ] Siding
  [ ] Other
[ ] Demolition
[✓] Miscellaneous
  [ ] Fence Height
  [ ] Sign 108 Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other

(Office Use Only) FEE

$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-110A
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3 Pink = Office Copy
4 Gold = Applicant Copy

Kenneth X. Luthy- 595 Brick Boulevard
Block 470.01 Lot 16 & 17

Pole sign-reface existing sign

5'

12'

16'

3'

WALL SIGN-facing brick Boulevard