

TOWNSHIP OF
FREEHOLD
1 MUNICIPAL PLAZA
FREEHOLD, NJ 07728



CONSTRUCTION PERMIT APPLICATION

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

008-005654

I. IDENTIFICATION

1. Proposed Work Site at: 982 Falkenberg
2. Name of Owner in Fee: Sean Maloney Tel. [REDACTED]
Address 320 Harris Rd. Oak Park Rd 08221
street municipality zip code
3. Ownership in Fee: Public ☐ Private ☒
4. Principal Contractor: Richard T. Matro Tel. (732) 938-6191
Address 9 Alexis Drive Fairmountdale, N.J. 07227
License No. OR, if new home, Builder Reg. No. 8461 Exp. Date 6/30/09
Federal Employee No. 146-54-6176 FAX: (732) 938-6191
5. Architect or Engineer _____ Tel. () _____
Address _____
6. Responsible Person in Charge of Work Richard T. Matro
Tel. (732) 938-6191 FAX (732) 938-6191

V. FEE SUMMARY (for office use only)

		Update	Update
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	\$		

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)

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

Est. Cost

990.00

OPTIONAL (for office use only)

Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer

TOTAL COSTS

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:

2. Use Group:

3. Change in Use Group, Indicate Former:

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 Richard J. Matvey

Address 9 Davis Drive

Farmingdale, N.J. 07727

Telephone (201) 938-6191

Signature Richard J. Matvey

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 3/10/2009
Control Number C-08-005654
Permit Number 09-0041
Permit Issue Date 1/9/2009
Certificate Number 09-0041

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 982 FALKENBURG RD. , NJ Block: 1170 Lot: 16.01 Qual: _____
Owner in Fee: MAHONEY, SEAN
Owner Address: 320 HARRIS RD FORKED RIVER NJ 08731
Telephone: _____
Contractor RICHARD T MATERA
Address 9 ALEXIS DRIVE FARMINGDALE NJ 07727
Telephone: (732) 938-6191 Fax: _____
License Number or Builders Registration Number: 8461 Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: FIRE ALTERATIONS, GAS PIPING

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: _____

Date Printed: 3/10/2009

U.C.C. F260 (rev. 08/05)

Page 1



FIRE PROTECTION 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 4405 Lot 0000 Qualification Code 0000
Work Site Location Rock Hill, NJ Falkenburg Rd

Owner in Fee Scam Holdings
Address 320 Highway 100, NJ

Tel [REDACTED]
Contractor James J. Lohr
Address 320 Highway 100, NJ FAX (202) 938-6141

Tel (202) 938-6141 Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____
Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____
Fire Alarm Contractor No. _____

Federal Emp. No. _____
B. FIRE PROTECTION CHARACTERISTICS
Use Group: Present Proposed _____ Fire Alarm System: [] New or [] Existing
Constr. Class: Present Proposed _____ Location of Panel: _____

Heating System: [] New or [] Existing [] HVAC [] Fire Suppression/Standpipe System:
Type: [] Gas [] Oil [] Electric [] Solar [] New or [] Existing
[] Other _____ Location of Main Control Valve: _____

Location: _____
Fuel Storage Tank: _____ Capacity _____
Fuel Type: [] Flammable or [] Combustible

Total Cost of Fire Protection Work \$ 25.00
JOB SUMMARY (Office Use Only)

PLAN REVIEW
[] No Plans Required
[] Joint Plan Review Required:
[] Building [] Plumbing
[] Electric [] Elevator

Date: 12-18-08
Approved by: [Signature]
SUBCODE APPROVAL
[] CO [] CCO [] CA
Date: 2-14-09
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.
Applicant's Signature/Contractor's Signature [Signature]
[] Certified Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA DESCRIPTION OF WORK:

Water Supply Source _____
Method of Alarm/Suppression System Supervision _____

Flammable/Combustible Tanks
Alarm Systems
[] System
[] 110V Interconnected
[] CO Detectors/110V

Alarm Devices (i.e., smoke, heat, pulls, waterflow)
Supervisory Devices (i.e., tamper, low/high air)
Signaling Devices (i.e., horn/strobes, bells)
Other Devices _____

TOTAL
Suppression Systems
Fire Pump _____ GPM Type _____
Dry Pipe/Alarm Valves
Pre-action Valves
Sprinkler Heads (Dry and Wet)

Standpipes
Pre-engineered Systems
Wet Chemical
Dry Chemical
CO₂ Suppression
Foam Suppression
FM200 Suppression

Other _____
Other Systems
Kitchen Hood Exhaust System
Smoke Control System
Fired Appliances [] Gas or [] Oil
Fireplace Venting/Metal Chimney

Other Gas Stove
Administrative Surcharge \$ 45
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____



PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

04-0041
1/19/09

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

Block 4786 Lot 9878 Qualification Code FAIKENBURG Rd

Work Site Location Block 4786, Lot 9878

Owner in Fee Sedco Malabar

Address 300 Morris Ave.

Tel [REDACTED]

Contractor FAIKENBURG

Address 300 Morris Ave.

Tel (732) 938-1619 FAX ()

Contractor License No. 8461

Federal Emp. No. 146-54-6176

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 \$ 540.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
	Type:	Failure Failure Approval Initial
☐ No Plans Required	Slab	
☐ Joint Plan Review Required:	Rough	
☐ Building ☐ Electric	Water	
☐ Fire ☐ Elevator	Sewer	
☐ Plumbing Plans Approved	Fixtures	
Date: <u>12.17.08</u>	Gas Equipment	
Approved by: <u>[Signature]</u>	Gas Piping	<u>02.11.09</u>
SUBCODE APPROVAL	LP Gas Tank	
☐ CO ☐ LSCC ☐ CA	Fuel Oil Piping	
Date: <u>3.3.09</u>	Solar	
Approved by: <u>[Signature]</u>	TCO	
	FINAL	<u>02.25.09</u>

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

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

NO. 50

FIXTURE/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
- LP Gas Tank
- Steam Boiler
- Hot Water Boiler
- Sewer Pump
- Interceptor/Separator
- Backflow Preventer
- Greasetrap
- Sewer Connection
- Water Service Connection
- Stacks
- Other
- Other

FEE (Office Use Only)

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

02-18-09 PA
NO ENTRY

San Antonio Rd.
300 Harris Rd.
Forked River

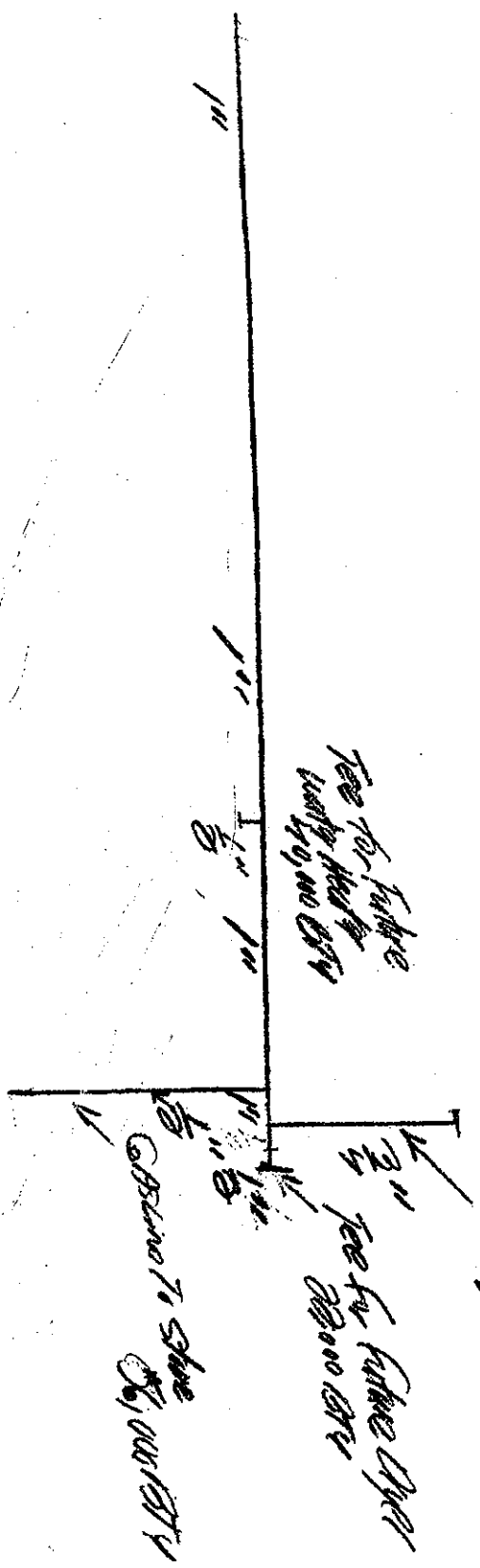
76: Location 982 Tank in bags
Brick pit

Black 47.86 Lot 95.72

Alameda Richard J. Moore
9 Alex's Lane
Farmingdale, N.Y. 11737
Lic # 8461

- 193000 Lote 1 1374
- longest Run 50'
- using Black steel pipe inside
+ galvanized pipe outside

Future 20 ft
75,000 BTU



375-
ME/ME

San Marbury Rd.
300 ft. x 100 ft.
Forked River

76.6: Location 982 Faulklands
Brick 10.5

Block 47.86 Lot 95.72

Arthur Richard J. Mather
9 Alex's Lane
Farmingdale, N.Y. 11737
Lic # 8461

- 19,300 ft. / 1374
- longest run 50'
- using black steel pipe inside
+ galvanized pipe outside

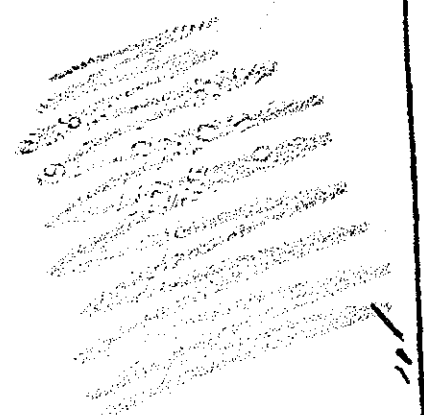
Future 20/10
35,000 ft. / 11

Tree for future
use 10,000 ft. / 11

Tree for future 10/11
20,000 ft. / 11

to 6000 ft. / 11
to 10,000 ft. / 11

3/5-
M/M/2





CONSTRUCTION PERMIT

Date Issued 1/9/09
Control # C-08-005654
Permit # 09-0041

IDENTIFICATION Block: 1170 Lot: 16.01 Qualifier _____
Work Site Location: 982 FALKENBURG RD. NJ Contractor RICHARD T MATERA
Address 9 ALEXIS DRIVE FARMINGDALE NJ 07727
Owner in Fee MAHONEY SEAN Telephone: (732) 938-6191
320 HARRIS RD FORKED RIVER NJ 08731 Lic. No. or Bldrs. Reg. No. 8461
Federal Employee. No. _____
Telephone: _____

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:

FIRE ALTERATIONS, GAS PIPING

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 \$615

[Signature]
Construction Official

Date

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	\$40
Fire Protection	\$45
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	\$0
Other	\$0
Total	\$86
Check No.	_____
Cash	\$0
Credit	\$0
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 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:
1. 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.
 2. Foundations and all walls up to grade level prior to back filling.
 3. 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.
 4. 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.



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 4786 Lot 98 Qualification Code FALKBURG NJ

Work Site Location Quack N.J.

Owner in Fee Schur Malabar

Address 204 HILLSIDE

Tel. [REDACTED]

Contractor Michael J. Hynes

Address 9 Hynes Rd.

Tel. 732-938-1619 FAX ()

Contractor License No. 8461

Federal Emp. No. 146-51-6178

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed Private Septic
Building Sewer Size Public Sewer Private Well Public Water
Water Service Size Public Water
Est. Cost of Plumbing Work \$ 540.00

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: <u>12-13-08</u>	Fixtures	
Approved by: <u>[Signature]</u>	Gas Equipment	
SUBCODE APPROVAL	Gas Piping	
☐ CO ☐ CCO ☒ CA	LPGas Tank	
Date: <u>12-20-08</u>	Fuel Oil Piping	
Approved by: <u>[Signature]</u>	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
[Signature] Licensed Plumbing Contractor [] Exempt Applicant

Date Received
Control #
Date Issued
Permit #

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

FIXTURE/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
Other

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

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

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



CONSTRUCTION PERMIT

Date Issued _____

Permit # _____

IDENTIFICATION Block 47-86 Lot 95-72 Qualification Code _____
Work Site Location 282 Faulkinbury Contractor Richard J. Matore
Dick, N.J. Address 91 Alexis Drive
Owner in Fee Sean Mahoney Farmingdale, N.J. 07727
Address 320 Alexis Rd Tel. (732) 938-6191
Richard J. Matore Lic. No. or Bldrs. Reg. No. 8461
Tel. _____

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:

Gas Line Installation

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 \$ \$40,000

Construction Official _____

Date _____

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 _____

(see reverse side)

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.