

RECEIVED

LOT

ADDRESS (SITE)

PERMIT NO.

357-95

JUN 24 1995



CONSTRUCTION PERMIT APPLICATION

OF INSPECTION

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

1. IDENTIFICATION

1 Proposed Work-site at: Mid Atlantic Bank / Brick Plaza

2 Name of Owner in Fee: _____ Tel. (____) _____

Name of Owner in Fee _____
Address 50 Chambers Bridge Road Brick 08724
Municipality ZIP Code

3. Ownership in Fee: Public _____ Private _____

4 Principal Contractor: Girtain Sign Company Tel. (908) 344 8499

Address 1705 Rt. 9, Toms River, NJ 08755

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

Federal Emp. No. 22-3305780 Social Security No. _____

5 Architect or Engineer _____ Tel. (____) _____

Address _____

6. Responsible Person
In Charge of Work Lori Girtain Tel. (908) 349-8499

II. PROPOSED WORK

- 1 ☒ Minor Work
(single trade)
- 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

Est. Cost

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re- viewer	Resubmission Dates		Re- viewer
					Approval	Rejection	
pp	1-24-95		2-2-95	R	2/27/95	11/6/95	
En	1/25/95		Ena	Recd			

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1 ☐ Elevators/Éscalators/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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other <u>Sign</u>	<u>50</u>		
6. Subtotal	\$		
7. Less 20% for State Plan Review	<u>5</u>		
8. Subtotal	\$		
9. DCA Training Fee	<u>1</u>		
10. Subtotal	\$		
11. Cert. of Occupancy	<u>20</u>		
12. Other <u>214</u>	<u>\$15.00</u>		
13. TOTAL	\$ <u>91</u>		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area—Largest Floor _____ sq. ft.
4. Building Area—All Floors _____ sq. ft.
5. Volume of 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 _____ sq. ft.
 no _____
11. Fire Grading _____
12. Max. Live Load _____
13. Max. Occupancy Load _____

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 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: _____

COMMENTS

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

IMPORTANT
A.H.B.T. - EXEMPT

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

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	
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		



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

357-95

IDENTIFICATION Block

671

Lot

8

Work Site Location

501 Chambersbridge Rd.

Contractor

Atlantic Signs

Address

Owner in Fee

The Atlantic Bank

Address

Same

Tele. ()

Lic. No. or Bldrs. Reg. No.

Exp. Date: 000000

Tele. ()

Federal Emp. No.

or Social Security No.

B. No.

0.00

is hereby granted permission to perform the following work:

☐ BUILDING☐ PLUMBING☒ OTHER

SIGN

☐ ELECTRICAL☐ FIRE PROTECTION

DESCRIPTION OF WORK:

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 \$

1,500.-

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

1 WHITE - OFFICE

2 CANARY - TAX ASSESSOR

3 PINK - JACKET

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building 50.00 0.00

Plumbing 8.00

Electrical 50.00

Fire Protection 5.00

Other 5.00 D.C.A.

Other 20.00 C / O

DCA Training Fee 5.00 ZONE/PLGT

Cert. of Occ. 20.00 TOTAL

Other 15.00 CHECK

Total 91.00 CHANGE

Check No. 1028 0004A005 6.00

Cash

Collected By:



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

3/13/95
357-95

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1009.

Block 67 Lot 8

Work Site Location Midlantic Bank

50 Chambers Bridge Road, Brick Plaza, Brick Town

Owner in Fee _____

Address _____

Tele. (____) _____

Contractor Gertain sign company

Address 1765 Rt. 9

Tele. (908) 349-8499

Lic. No. or Bldgs. Reg. No. 32 3305786

Federal Emp. No. _____ 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

BRICK SIGN
MRD LANTIC

B. BUILDING CHARACTERISTICS

Use Group _____ Present _____ Proposed _____
Constr. Class _____ Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____

2. Alteration \$ _____

3. Total (1+2) \$ 1500.-

JOB SUMMARY (Office Use Only)				
PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Req.			Type: _____	Failure _____
☐ All			<u>Footings</u>	Failure <u>3-17-95</u> Approval <u>4-13-95</u> Initial <u>[Signature]</u>
☐ Footing			<u>Foundation</u>	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			Insulation	
Joint Plan Review Required:			<u>Finishes</u>	
☐ Elec. ☐ Plumb. ☐ Fire			Energy	
SUBCODE APPROVAL			Mechanical	
☐ CO ☐ CCO ☐ S			TCO	
Date: <u>2-13-95</u>			Other	
Approved By: <u>[Signature]</u>			Final	

TYPE OF WORK:	
	Height (6' or over)
☐ New Building	
☐ Addition	
☐ Alteration	
☐ Roofing	
☐ Siding	
☐ Fence	
☐ Sign	
☐ Pool	
☐ Asbestos Abatement	
☐ Other	
☒ Other Sign	
☐ Demolition	

Administrative Surcharge	
	Minimum Fee
Paid ☐ Check # _____	\$ _____
Collected by: _____	DCA TRAINING FEE \$ _____
TOTAL FEE \$ _____	

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: Jan. 24, 1995 1995 Z0085

Block 671 Lot 8 Zone B-3, H.D.

Property Address: 50 Chambers Bridge Road

Owner: Midlantic Bank (Phone): _____

Applicant: Girtain Sign Co, Lori Girtain (Phone): 349-8499

Use: Midlantic Bank

Proposed Construction (if any): Refurbish signs, 50 square feet.

Conditions: _____

Please note that Building Permits, as well as Zoning Permits, must be obtained prior to any construction.

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.

Sean Kinney

Land Use Officer