

BLOCK

LOT

ADDRESS (SITE)

PERMIT NO.

477-4100

Wing



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: BRICK PLAZA, A+P STORE
2. Name of Owner in Fee: C. RAIMONDO Tel. (201) 641-5550
Address 540 BERGEN BLVD, FORT LEE, N.J. 07024
street municipality zip code
3. Ownership in Fee: Public ☐ Private ☒
4. Principal Contractor: C. RAIMONDO & D. MILLER Tel. (201) 461-5550
Address SAME DRUM PT RD.
- License No. OR, if new home, Builder Reg. No. 005637 Exp. Date MARCH/94
Federal Emp. No. Social Security No.
5. Architect or Engineer JOSEPH B. RONNER Tel. (908) 920-1800
Address 175-20 FAIRFIELD, WEST CALDWELL, N.J.
6. Responsible Person In Charge of Work DONALD J. MILLER Tel. (201) 226-6330

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

Est. Cost

150,000

50,000

TOTAL COSTS

200,000

DEMO - ROOF REPAIR

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
			2/16/94	AL			

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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 1125	180	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other <u>DEMO</u>	\$ 50		
6. Subtotal	\$ 1175	1800	
7. Less 20% for State Plan Review	\$ 5	180	
8. Subtotal	\$ 120	72	
9. DCA Training Fee			
10. Subtotal	\$ 20		
11. Cert. of Occupancy			
12. Other	\$ 1320	7052	
13. TOTAL			

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:

LDS BR 10208678

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.

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☒ Check if contractor.

Agent Name DONALD J. MILLER

Address 270 DRUM PT RD
BRICK, N.J. 08723

Telephone (908) 520-1800

Signature Donald J. Miller Date FEB 15, 1994

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☒ Check if contractor.

Agent Name Dan Associates Inc

Address 99 Kinderkamack Rd

Westwood NJ 07673

Telephone (201) 666-2310

Signature [Signature] Date _____

OFFICE DATE RECEIVED: _____

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 Protection								
☐ Utility Dig No.								
☒ Other <i>Zoning</i>	<i>NC</i>	<i>4/14/94</i>	<i>not repair</i>					
☐								
☐								
☐								

COMMENTS

on 4/14/94

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 _____
Electrical _____
Plumbing _____
Fire Protection _____
Mechanical _____

Energy _____
Barrier Free _____
Flood Hazard _____
As Built Elevation Cert. _____
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 #

10/16/95
198-94

IDENTIFICATION Block

671

Lot

18

Work Site Location

BRICK PLAZA, BRICK.
W12

Contractor

FEDERAL REALTY

Address

4800 HAMILTON

Tele. (NJC)

255-4944

Lic. No. or Bldrs. Reg. No.

Exp. Date

Federal Emp. No.

or Social Security No.

Owner in Fee

FEDERAL REALTY

Address

4800 HAMILTON W 12 SOUTH 500

Tele. (NJC)

255-4944

is hereby granted permission to perform the following work:

☐ BUILDING☐ PLUMBING☐ OTHER

REPAIR TRUSSES

☐ ELECTRICAL☐ FIRE PROTECTION

DESCRIPTION OF WORK:

REPAIR OF TRUSSES.

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 \$

10,000.00

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	1800	
Plumbing		3.00
Electrical		1.00
Fire Protection		0.00
Other	P/R 180	0.00
Other		0.00
DCA Training Fee	72	0.00
Cert. of Occ.		0.00
Other		
Total	20.52	0.00
Check No.	1654	0.00
Cash		0.00
Collected By:		



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

2/16/94

192-94

IDENTIFICATION Block

671

Lot

8

Work Site Location

Brick Plaza / A-1 Pk

Contractor

Sami

Owner in Fee

C. Ramon

Address

Address

Tele. ()

Lic. No. or Bldrs. Reg. No.

Exp. Date

Tele. ()

Federal Emp. No.

or Social Security No.

Is hereby granted permission to perform the following work:

☒ BUILDING☐ PLUMBING☐ OTHER☐ ELECTRICAL☐ FIRE PROTECTION

DESCRIPTION OF WORK:

Remolition
Alter - Roof Repair

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 \$

240,000

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building

1125

671 #

0.00

Plumbing

LOT

0.00

Electrical

0 #

Fire/Protection

11

5.00

Other

50

50.00

Other

50

5.00

DCA Training Fee

120

10.00

Cert. of Occ.

20

0.00

Other

13

0.00

Total

1320

0.00

Check No.

106

0.00

Cash

Collected By:

2/16/94

12:15