

2065-96



CONSTRUCTION PERMIT APPLICATION

DIV. OF INSPECTION
Applicant Completes:

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

1. Proposed Work-site at: BRICK MALL

2. Name of Owner in Fee: PETER TRAHANAS Tel. ()

Address 11 OLD ORCHARD RD RYE NY
street municipality zip code

3. Ownership in Fee: Public Private X

4. Principal Contractor: VAN NOTE ROOFING Tel. (908) 816 7663

Address 520 ADAMSON RD BRICK NJ

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

Federal Emp. No. Social Security

5. Architect or Engineer Tel. ()

Address

6. Responsible Person in Charge of Work Robert Van Note Tel. (908) 820 7663

		Update	Update
1. Building	\$ 135 ⁰⁰		
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	4 ⁰⁰		
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ 139 ⁰⁰		

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 _____ sq. ft.
 no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

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. ☐ Elevator Devices
10. ☐ Asbestos Abatement
11. ☐ Demolition

TOTAL COSTS

Est. Cost

4,500.

BRICK MALL (CONVENIENCE STORE)

OPTIONAL (for office use only)[illegible]

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks	4. ☐ Refrigeration Systems	7. ☐ Sprinklers
2. ☐ High Pressure Boilers	5. ☐ Cross-Connections/Backflow Preventers	8. ☐ Smoke Control Systems in Open Wells
3. ☐ Pressure Vessels	6. ☐ Hazardous Uses/Places of Assembly	9. ☐ Underground Storage Tanks

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

Before Construction _____
After Construction _____
Net gain or loss _____

1. State Specific Use:

2. Use Group: *Shop Plaza*

3. Change in Use Group, Indicate Former: *B*

LDS BR 10207580

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 Van Nole Roofing

Address 570 ADAMSTON RD

BRICK NJ

Telephone (908) 920 7663

Signature [Signature] Date 8-9-96

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ 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.									
☐									
☐									

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 ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Approval	No. _____	_____	_____	_____



CONSTRUCTION PERMIT

Date Issued 8-9-96
Control #
Permit # 2065-96

IDENTIFICATION Block 673 Lot 8

Work Site Location 7791 Hanger Ave. Contractor Van Note Rfg.
Address _____

Owner in Fee Peter Abrahamas

Address 11 Red Orchard Rd Tele. (____) _____

Pys, N.Y. Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Tele. (____) _____ Federal Emp. No. _____

or Social Security No. BLCA 0.00

875 #

is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER _____
☐ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

flat roof 1 store
in Brick Mall

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 \$ 4,500.- R. K. S.

U.C.C. Form F-170A

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)			0.00
Building	<u>135.-</u>	R #	
Plumbing	<u>PLUMBING</u>		15.00
Electrical	<u>D.C.A.</u>		4.00
Fire Protection	<u>TOTAL</u>		19.00
Other	<u>CHECK</u>		19.00
Other	<u>CHANGE</u>		0.00
DCA Training Fee	<u>4.-</u>		
Certification No.	<u>0010666</u>	<u>NO. 5</u>	<u>0021A005</u> 1429
Other			
Total	<u>139.-</u>		
Check No.	<u>5375</u>		
Cash			
Collected By:	<u>11</u>		



Date Received
Date Issued
Control #
Permit #

8-9-96
2065-96

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING

CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO. 1-800-272-1000.

Block 673 Lot 8

Work Site Location 3291 Apple Ave

Owner in Fee Robert Trillavas

Address 3 RYE WY 1100A ORCHARD RD

Tele. () 708 980 7163

Contractor Van Noye Roofing

Address 570 ADAMSTON RD

Tele. () 708 980 7163

Lic. No. or Bids. Reg. No. 608 or Social Security No. [REDACTED]

Federal Emp. No. 608 or Social Security No. [REDACTED]

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Failure	Approval	Initial
☐ No Plans Req.			Type:				
☐ All			Footings				
☐ Footings			Foundation				
☐ Foundation			Slab				
☐ Frame			Frame				
☐ Other			Insulation				
Joint Plan Review Required:			Finishes:				
☐ Elec.			Plumb.				
☐ Fire			Energy				
SUBCODE APPROVAL			Mechanical				
☐ CO			TCO				
☐ CCO			Other				
Date:			Other				
Approved-By:			Final				

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg.	\$	
2. Alteration	\$	4,500.00
3. Total (1+2)	\$	

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 [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Remove Roof
Install Insulation And
Build up Roof

TYPE OF WORK:

☐ New Building	
☐ Addition	
☐ Alteration	
☐ Roofing	
☐ Siding	
☐ Fence	
☐ Sign	
☐ Pool	
☐ Asbestos Abatement	
☐ Other	
☐ Other	
☐ Demolition	

(Office Use Only)
FEE

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

U.C.C. Form F-1108

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

Applicable to Ordinance 728-92
This form must be handed in with permit application or a permit will not be issued.

TOWNSHIP OF BRICK

2791 Noopee Ave BRICK 673 8
Work Site Address Block Lot

PETER TEAHADAS 11 OLD ORCHARD RD RYE NY
Owner's Name, Address, Phone

VAN NOTE ROOFING 570 ADAMSTON RD BRICK NJ
Contractor's Name, Address, Phone

Construction COMMERCIAL ROOFING
Describe type (Single -family home, etc.)

Demolition ROOF
Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material BUILTUP 3,000 SF

Name, address and phone of party responsible for removal of debris:

Robert Van Note 9207663

Size of dumpster: 30 YD

Destination of discarded debris: LERTC4 DISPOSAL

Hauler's DEP Permit No.: _____

****Note:** Any recyclable material, including, but not limited to: corrugated cardboard, vegetative waste, concrete, asphalt, clean wood, etc., must be delivered to an approved recycling center, and receipts provided to the Township of Brick along with tipping receipts for non-recyclable material.

Generator's Certification: Under penalty of criminal and civil prosecution, for the making or submissin of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed or recycled in accordance with all applicable State and Federal laws and regulations, and that I have been authorized, in writing, to make such declarations by the person in charge of the generator's operation.

Robert Van Note [Signature] 8-9-96
Printed/Typed Name Signature Date

FOR OFFICE USE ONLY

MUST BE COMPLETED BEFORE CERTIFICATE OF OCCUPANCY OR CERTIFICATION OF APPROVAL IS ISSUED

Recycling tonnage receipts attached? _____

Certified tipping receipts attached? _____

****Note:** Receipts must show certified weights, date of disposal and name and address of disposal center.

DISTRIBUTION LIST:

1. Original to Code Enforcement Officer
2. Construction Code Office
3. Applicant