BLOCK 673 LOT 8 ADDRESS (SITE) ______ PERMIT NO. 70-93

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: Brick Convenience Store Brick Mall Hooper Av
2. Name of Owner in Fee: N. Desai Tel. (908) 920-2170
   Address 2796, Hooper Ave, Brick, N.J. 08723 (street, municipality, zip code)
3. Ownership in Fee: Public ______ Private ✓
4. Principal Contractor: John Krohn Tel. ( ) 892-6959
   Address 1217 Johnson Av P.P.
   License No. OR, if new home, Builder Reg. No. 9219 Exp. Date ______
   Federal Emp. No. ______ Social Security No. ______
5. Architect or Engineer ______ Tel. ( ) ______
   Address ______
6. Responsible Person In Charge of Work Robert Lyons Tel. ( ) 920-3751

V. FEE SUMMARY (for office use only)

		$	Update	Update
1.	Building			
2.	Electrical			
3.	Plumbing	25.—		
4.	Fire Protection			
5.	Other			
6.	Subtotal	25		
7.	Less 20% for State Plan Review			
8.	Subtotal			
9.	DCA Training Fee			
10.	Subtotal			
11.	Cert. of Occupancy	20		
12.	Other			
13.	TOTAL	45		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

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 ______

plmbg - sink

II. PROPOSED WORK — Est. Cost

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 300

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
					1/19/93	JAA	

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

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: convenience store
2. Use Group:
3. Change in Use Group, Indicate Former:

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

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: _____

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									
☐									
☐									

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			

CONSTRUCTION PERMIT

Date Issued 1/15/93
Control #
Permit # 070-93

IDENTIFICATION Block 673 Lot 8

Work Site Location [illegible handwriting]

Owner in Fee [illegible handwriting]
Address [illegible handwriting]

Tele. ( ) [illegible handwriting]

Contractor [illegible handwriting]
Address [illegible handwriting]

Tele. ( ) [illegible handwriting]
Lic. No. or Bldrs. Reg. No. Exp. Date
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:

[illegible handwriting]

PAYMENTS (Office Use Only)	70*#	
Building	BLOCK	].00
Plumbing	673 #	
Electrical	LOT	].00
Fire Protection	8 #	
Other	PLUMBING	2].00
Other	C / O	2].00
DCA Training Fee	TOTAL	4].00
Cert. of Occ.	CASH	4].00
Other	CHANGE	].00
Total 01/15/93 NO. 5	001BA005	1]:41
Check No.		
Cash		
Collected By:		

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 $ 300

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 1/15/93
Date Issued
Control #
Permit # 7093

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 Brick Mall, Hooper Av. Brick
Brick Convience Store
Owner in Fee N. Desai
Address 2796 Hooper Ave
Brickton, N.J. 08723
Tele. (908) 920-2170
Contractor John Krohn
Address 1217 Hudson Av PR

Tele. ( ) 892-6959
Lic. No. 9219
Federal Emp. No. _____ or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____
Water Service Size _____
Estimated Cost of Plumbing Work $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[ ] Plumb. Plans Approved
Date: 1/14/93
Approved by: [signature]

SUBCODE APPROVAL:
[ ] CO [ ] CCO [X] CA
Approved by: [signature]
Date: 01-19-93

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough			1-19-93	[signature]
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
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.

[signature]
Signature-Contractor Seal

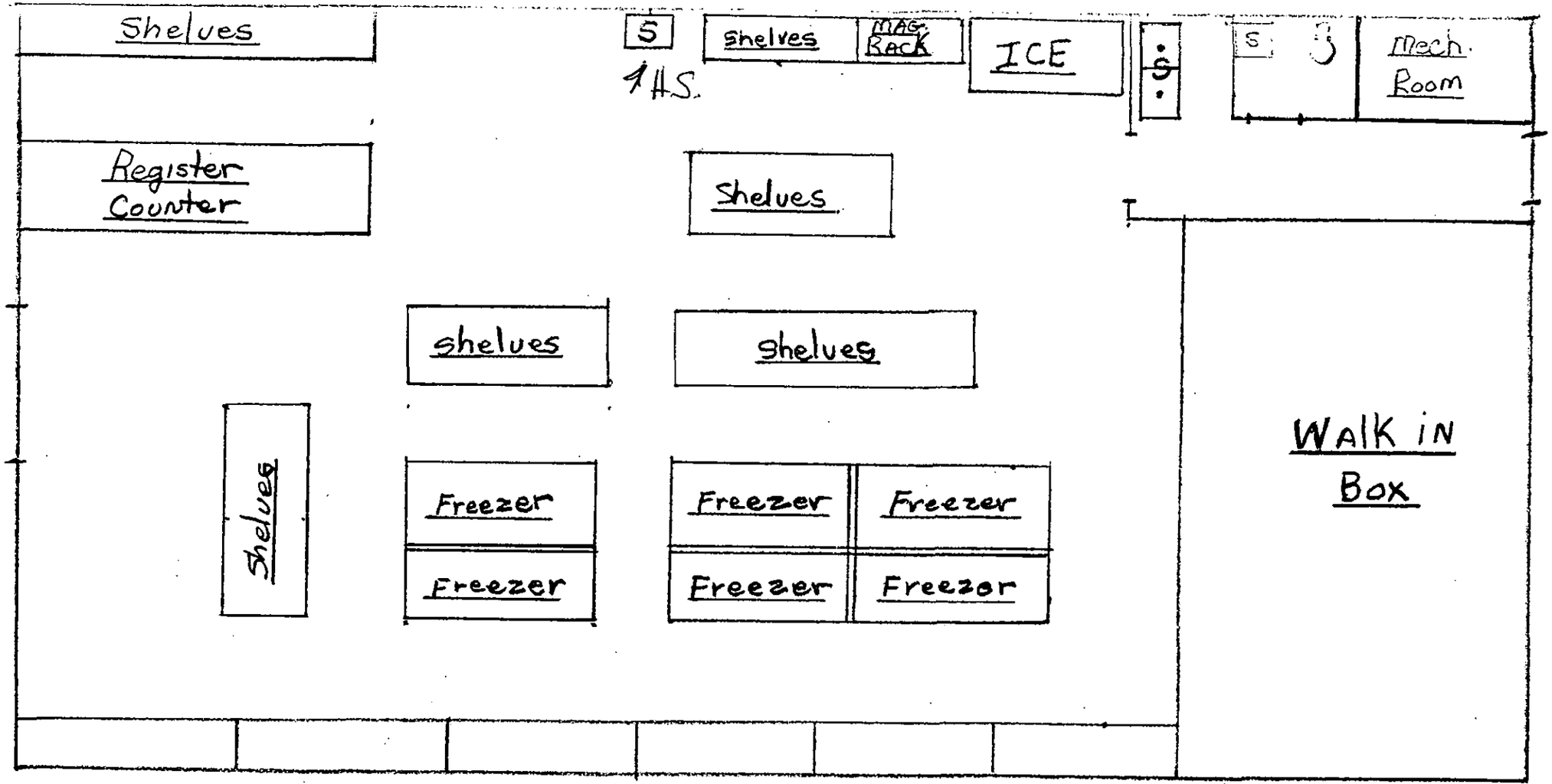
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	15
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Gas Piping	
	Fuel Oil Piping	
	Water Heater	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Gas Service Connection	
	Active Solar System	
	Other	10

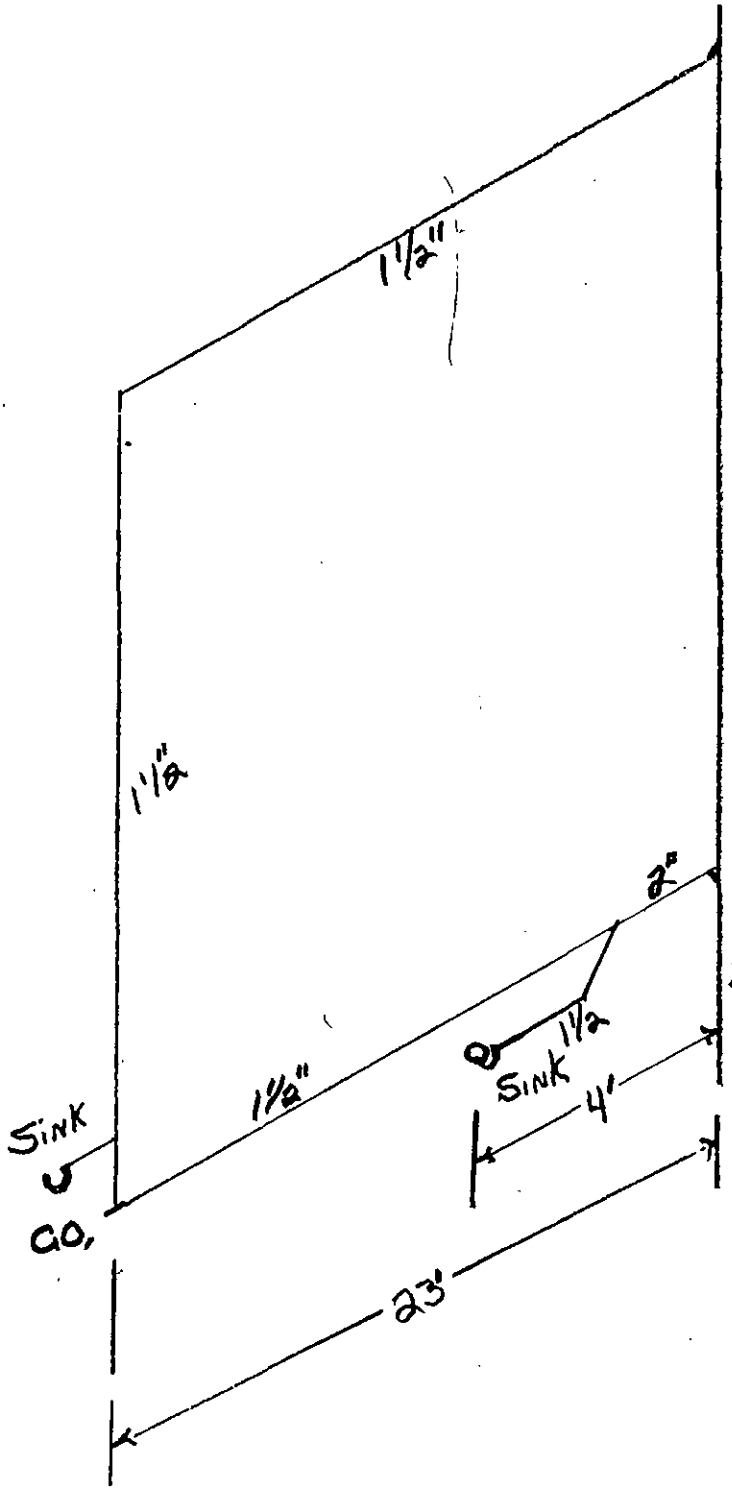
Administrative Surcharge $ 25
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL $ _____

U.C.C. Form F-130A 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy



1-14-93

Brick Convenience Store		
2796 Hooper Ave		
Brick NJ 08723		
Lot	Block	Scale
8	673	3/16-1'
Floor Plan		
1-14-93		



1/14/93

Brick Convenience Store		
2796 Hooper Ave.		
Brick, NJ 08723		
Lot 8	Block 673	Scale ISO
Plumbing ISO.		
1-14-93		