BLOCK	

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QUALIFICATION CODE _____

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V. FEE SUMMARY (for office use only)

	NO.



CONSTRUCTION PERMIT

Update Update 1. Building **APPLICATION** 2. Electrical 3. Plumbing 4. Fire Protection Applicant Completes: Sections I, II, III (optional), IV, VI, and VII 5. Elevator Devices 6. Subtotal I. IDENTIFICATION 7. Less 20% for State Plan Review ______ 1. Propsed Work Site at: 8. Subtotal 2. Name of Owner in Fee; ______ Tel. (_____) ____ 9. State Permit Surcharge Fee 10. Subtotal Address ____ municipality 11. Cert. of Occupancy 12. Other Ownership in Fee: Public _____ Private ____ 13. TOTAL 4. Principal Contractor: ______ Tel. (_____) _____ Address VI. BUILDING/SITE CHARACTERISTICS (office use only) Number of Stories
 Helght of Structure ft. License No. OR, if new home, Builder Reg. No. ______ Exp. Date _____ Federal Employee No. _____ FAX: (____) ____ 3. Area — Largest Floor ______sq. ft. 5. Architect or Engineer _____ Tel, (____) _____ 4. New Building Area _____sq. ft. 5. Volume of New Structure _____ cu. ft. Address _____Contact Construction Classification 6. Responsible Person in Charge once Work has Begun 7. Total Land Area Disturbed _____sq. ft. Tel. (_____) _____ FAX: (____) ____ 8. Flood Hazard Zone 9. Base Flood Elevation ______ft, 10. Wetlands yes _____ no _____ 11. Max. Live Load _____ 12. Max. Occupancy Load OPTIONAL (for office use only) II. PROPOSED WORK VII. DESCRIPTION OF BUILDING USE Plans Date Rejection Approval Resubmission Dates Est. Cost Rec'd by Rec'd Date viewer 1. Mlnor Work Approval Rejection viewer A. RESIDENTIAL 2. New Building 1. State Specific Use: 3. Addition 2. Use Group: 4. a. Repair 3. Change in Use Group, Indicate Former: b. Alteration c. Renovation Income-4. No. of dwelling units; All Units restricted d. Reconstruction Before Construction _____ 5. Tire Protection After Construction 6. Plumbing 7. Electrical Net Gain or Loss 8. Elevator Devices B. NON-RESIDENTIAL 9. Asbestos Abat, Subch, 8 1. State Specific Use: 2. Use Group: 11. Demolition 3. Change in Use Group, Indicate Former: TOTAL COSTS IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING? III. DO YOU WANT: (optional) 1.

Elevators/Escalators/Lifts/ 4. Refrigeration Systems 1.

□ Partial Releases 8. Smoke Control Systems in Open Wells Dumbwaiters/Moving Walks 5. Cross-Connections/Backflow Preventers 9. Underground Storage Tanks 2.

□ Prototype Processing 2. High Pressure Boilers 6. ☐ Hazardous Uses/Places of Assembly 10. Swimming Pools, Spas and Hot Tubs 3. Pressure Vessels 7.
Sprinklers

CERTIFICATION IN LIEU OF OATH

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:

Þ 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 I further certify that a new home (private residence) will be constructed on this property for my own use and occucertificate of occupancy. residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by pancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family

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.

_ 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.

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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.

. () 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 C.3. () 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.	р. () ()
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 furth
l understand that if any of the above statements are willfully false, I am subject to punishment.	l unde
Signature Date	Signa
II. AGENT SECTION (to be completed if the applicant is not the owner in fee)	:: <i>></i>
I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(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.	l here rized
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 furth
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.	l agre and to
I understand that if any of the above statements are wilifully false, I am subject to punishment.	l unde
() Check if contractor.	()
Agent Name	Ageni
Address	Addre

LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

Telephone