F())

BLOCK

ICATION CODE

ADDRESS (SITE)

Update

Update

PERMIT NO.

V. FEE SUMMARY (for office use only) Building
 Electrical
 Plumbing
 Fire Protection
 Elevator Devices
 Sinhotal CONSTRUCTION PERMIT
APPLICATION Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

Sudioital Less 20% for State Plan Review \$	Subtotal Surchama Ego	[a]	Cert. of Occupancy.		COTE CLADA CTEDIOTICS	Number of Course Landing	Number of Structure	lor sa.		cture		Max. Occupancy Load	if Industrialized Building: State Approved HUD		Flood Hazard Zone	d Elevation	no no	Option VII. DESCRIPTION OF BUILDING USE A. RESIDENTIAL (primary use)	Reconstruction 1. State Specific Use:	Annual Permit 2. Use Group, Proposed:	3. Change in Use Group, Indicate Present:	Re- tion viewer	Gained, Rental	Lost, Safe	B. NON-RESIDENTIAL (primary use)	1. State Specific Use:	3. Change in Use Group, Indicate Present:	C. MIXED USE -List secondary use(s):	D. Construct. Classification: Present	Proposed	8. Smoke Control Systems 9. Underground Storage Tar	
o. Subtotal	8. Subtotal			^{2ρ code} 12. Other 13. TOTAL		4: College	2. Heigh	3.	4.		6. Max.	7. Max. (8. If Indu	9. Total I			12. Wetlands	☐ Addition ☐ De	☐ Renovation ☐ F	ation	FOR OFFICE USE ONLY (Optional)	Approval Re- Resubmission Dates Date viewer Approval Rejec								WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?	4. ☐ Refrigeration Systems 5. ☐ Cross-Connections/Backflow Preventers 6. ☐ Hazandhus Ilsas/Blanes of Assembly	_
100000000		e-mail		municipality	Tel	((((((((((((((((((((e-mail	TO THE PROPERTY OF THE PROPERT	5. Exp. Date	o. or Exemption Reason (if applicable):	FAX: ()	Contact	e-Bail	FAX: ()		FAX: ()	VALUE OF THE PARTY	□ New Building	☐ Alteration	Lead Hazard Abatement		Plans Date Rejection A. Rec'd by Rec'd								IV. DOES OR WILL YOUR BUILDING CON	Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks Hoth Pressure Boilers	-
1. IDENTIFICATION 1. Proposed Work Site at:	2. Name of Owner in Fee:	Tel. ()	Address	3. Ownership in Fee: Public	į	Adress	AUGI 600	The state of the s	License No. OR, if new home, Builder Reg. No.	Home Improvement Contractor Registration No. or Exempti	Federal Emp. ID No.	5. Architect or Engineer	Address	Tel. ()	6. Responsible Person in Charge once Work has Begun	Tel. ()		la.PROPOSED WORK ☐ Miror Work	☐ Repair	Asbestos AbatSubch. 8	1	Est. Cost	Building .	☐ Electric 3।	gridmbl 🗀	Fire Protection		L Elevatrir	IOIAL COST	III. PLAN REVIEW (optional) IV.	1. C Partial Releases	4

CERTIFICATION IN LIEU OF OATH

1. OWNER SECTION (to be completed if the applicant is the owner in fee)

i h	ereby	certify	that I am the owner	in fee of the proper	rty listed on Paç	ge 1.							
Ma	rk the	e follow	ing applicable boxe	s:									
A.		I further certify that a new home (private residence) will be constructed on this property for my own use and pancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance certificate of occupancy.											
		THE ANY OTH	DERSTAND THAT WORK DONE ON S WORK PERFORM ERWISE CONTRAI KNOWINGLY ASSI	SAID PROPERTY, T ED, AND FOR THE CT OR WITH WHO	HE CONDITION PERFORMAN M I MAKE AGF	NOF THE P	ROPERTY PRICE	OR TO, DURING, A CTORS I HIRE, EN	ND AFTER MPLOY, OR				
В.	()	l furt	her certify the follow	ing as required by	the New Jersey	Uniform Co	enstruction Code	e, N.J.A.C. 5:23-2.	15(f)1.ix;				
		tion, on P	sonally prepared the or repair to an existi age 1; or, 3) a new e family residence t	ing single family res structure that will t	sidence owned a se physically se	and occupie parate from	d by myself and , but that will be	located on the pro	perty listed an existing				
C.			her certify that I will Building	perform or supervis C.2. () Fire		work:							
			rtify that I will perfor Electrical	m the following wor C.4. () Plu									
D.	()		ee to advise all cont tion and to comply v			required to	be registered w	ith the New Jersey	Division of				
			the following as req approvals have bee						ate, county,				
Lui	nderst	tand the	at if any of the abov	e statements are w	illfully false, I ar	n subject to	punishment.						
Sig	natur	e	***			:	Date						
			ECTION (to be comp			•							
Ehe	ereby	certify	the following as req ner in fee; and I hav	uired by the Uniforn	n Construction (Code, N.J.A			rk is autho-				
			the following as req approvals have bee						ate, county,				
_			e all contractors on vith all New Jersey t		ey are required t	to be registe	ered with the Ne	w Jersey Division	of Taxation				
lur	iderst	tand tha	at if any of the abov	e statements are wi	illfully false, I an	n subject to	punishment.	•					
() Ch	eck if o	contractor.	•	1	. **							
Age	ent Na	ame				\$.	- ′	•					
				r									
, tu						4 4			-				
Tele	ephor	ne ()						- Committee Committee of Commit				
	natur			-	·	<u>.</u>							
111	<i>(</i>)	ΙΕΔΓ	N HAZARN ARATEN	AENT: Include Home	eowner or Puild	ing Owner /	Affidavit ac nor A	LIAC 5:17					