101

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII IIa.PROPOSED WORK I. IDENTIFICATION
 1. Proposed Work Site at: III. SUBCODES 6. Responsible Person in Charge once Work has Begun 5. Architect or Engineer 4. Principal Contractor: 3. Ownership in Fee: 2. Name of Owner in Fee: DO YOU WANT: (Check all that apply) III. PLAN REVIEW (optional) Address E, Federal Emp. ID No. Home Improvement Contractor Registration No. or Exemption Reason Address License No. OR, if new home, Builder Reg. No TOTAL COST Building Elevator Fire Protection Plumbing Electrical ☐ Asbestos Abat. -Subch. 8 Repair Minor Work Est. Cost APPLICATION CONSTRUCTION PERMIT S IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING? ö Rec'd by Plans Private e-mail Elevators/Escalators/Lifts/ FAX: FAX Lead Hazard Abatement Alteration **New Building** Date Rec'd е-таі Contact FAX: e-mail Tel. Rejection Date FOR OFFICE USE ONLY (Optional) Exp. Date 4. Approval Refrigeration Systems Addition ☐ Radon Remediation Spoot de Renovation R Approval VI. BUILDING/SITE CHARACTERISTICS V. FEE SUMMARY (for office use only) Resubmission Dates 12. 13. ----10. 1 10. 9 9 Ċ ω New Building Area Number of Stories TOTAL Wetlands Other Flood Hazard Zone Max. Occupancy Load Area — Largest Floor Height of Structure Plumbing Fire Protection Electrical Building Base Flood Elevation If Industrialized Building: State Approved Max, Live Load Volume of New Structure Cert. of Occupancy Subtotal Elevator Devices Total Land Area Disturbed State Permit Surcharge Fee Subtotal Less 20% for State Plan Review Subtotal Demolition Annual Permit Reconstruction Rejection 8. Smoke Control Systems in (
9. Underground Storage Tanks
10. Swimming Pools, Spas and 11. LPGas Tanks yes Smoke Control Systems in Open Wells Newer 70 P 3 B. NON-RESIDENTIAL (primary use) D. Construct, Classification: Present C. MIXED USE -List secondary use(s): A. RESIDENTIAL (primary use) 4. No. of dwelling units: Total Units Income-restricted 3. Change in Use Group, Indicate Present: Select Group VII. DESCRIPTION OF BUILDING USE State Specific Use: Change in Use Group, Indicate Presen 2. Use Group, Proposed: Select Group State Specific Use: Use Group, Proposed: Select Group Lost, Rental Lost, Sale Gained, Rental Gained, Sale HUD sq. ft. sq. ft. şq 8 Update . = 12. ☐ Fire Alarm (office use only) Update Select Group

□ Prototype Processing □ Partial Refeases

Dumbwaiters/Moving Walks
High Pressure Boilers

7.**6**.5

Sprinklers/Standpipes

Cross-Connections/Backflow Preventers

Hazardous Uses/Places of Assembly

Swimming Pools, Spas and Hot Tubs

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:
Å. ()	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.
ē	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(f)1.ix:
	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: () Building C.2. () Fire Protection
	ner certify that I will perform the following work: () 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.
and local	ertify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, prior approvals, including such certification as the construction official may require, have been given or will be given mit issuance.
l understa	nd that if any of the above statements are willfully false, I am subject to punishment.
Signature	Date
II. AGE	NT SECTION (to be completed if the applicant is not the owner in fee)
I hereby c	ertify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is autho- tie owner in fee; and I have been authorized by the owner in fee to make this application as his agent.
and local	ertify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, prior approvals, including such certification as the construction official may require, have been given or will be given rmit issuance.
	advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation apply with all New Jersey tax laws.
I understa	nd that if any of the above statements are willfully false, I am subject to punishment.
() Che	ck if contractor.
Agent Nar	ne
Signature	
III. ()	LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.
IV. ()	HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

OFFICE DATE RECEIVED:

		Certificate of Occupancy	Continued Certificate of Occupancy				INICALI	Mosh	Fire Protection	Plumbing	Electrical	Building	IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only-		Utility Dig No.	Environmental Protection	Transportation	Community Affairs	☐ Soil Conservation	☐ Health Department	☐ Police Department	☐ Water Authority	☐ Sewer Authority	☐ Zoning Board	☐ Planning Board	☐ Zoning Officer	Office use only)	VIII. PRIOR APPROVALS
Certificate			ирапсу	npliance	upancy	fice use only)							ND SPECIAL REGULATIONS Name of Code & Edition			X											Prelimin. Initiał	LOCAL APPROVAL
No.	Z .		No.	No.	No.								APPLICABLE			X											Final Date	AL OVAL
							Omer	Se Cont Inc.	As Book Elevation Cont	Flood Hazard	Barrier Free	Energy	(office use only-		X		\mathbb{N}				X			\setminus		X	Prelimín. Initial	COUNTY APPROVAL
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		Į.				JED																					Ç	2
						DATE EXPIRED																			1		COMMEN	TAMENTO



Work Site Location

Lot I

Qualification Code

BUILDING SUBCODE

CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000. A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING TECHNICAL SECTION

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Home Improvement Contractor Registration No. or Exemption Reason (if applicable): Contractor License No. or Builder Registration No. Address Tel. (_ Contractor Owner in Fee: Federal Emp. ID No. [] Elec. [] Plumb. [] Fire [] Elevator Insulation Max. Occupancy Load Volume of New Structure New Bldg. Area/All Floors B. BUILDING CHARACTERISTICS Area — Largest Floor Height of Structure No. of Stories Use Group Present JOB SUMMARY (Office Use Only) Max. Live Load [] co [] cco Joint Plan Review Required: SUBCODE APPROVAL for CERTIFICATE SUBCODE APPROVAL for PERMIT PLAN REVIEW Approved by: Approved by: Interior No Plans Required Exterior Structural/Framework Footings/Foundations [] CA Date Proposed Initial lype: INSPECTIONS Final Other TCS Frame Slab Mechanical Energy Finishes -Final Finishes -Base Layer Foundation Foating email Footing Bonding Barrier-Free Barrier-Free Truss Sys/Bracing sq. ft - sq. ft. cu. ft **CAMPAGDIFFY** Constr. Class Present If Industrialized Building Est. Cost of Bldg. Work: 3. Total (1+2) Rehabilitation New Bldg. e-mail State Approved Failure FAX: Tel. Failure Dates (Month/Day) Exp. Date Approval Proposed **UHUD** Zip code Initial

> Control # Date Received

Permit # Date issued

C. CERTIFICATION IN LIEU OF OATH

record and am authorized to make this application. I hereby certify that I am the (agent of) owner of

D. TECHNICAL SITE DATA

Signature

	TYPE OF WORK: [] New Building [] Addition [] Rehabilitation [] Roofing [] Siding [] Fence Height (exceed of the standard of the	DESCRIPTION OF WORK
Administrative Surcharge \$ Minimum Fee \$ State Permit Surcharge Fee \$ TOTAL FEE \$	FEE (Office Use Only) \$ \$q. Ft Sq. Ft Subchapter 8 t NJAC 5:17	

Borough of Sayreville

ZONING PERMIT APPLICATION

***(EFFECTIVE 2012 WHEN WORK COMMENCES PLEASE CALL FOR INSPECTION) (732-390-7004)

The undersigned hereby applies for a Zoning Permit for the following to be issued on the basis of the representations contained herein, all of which applicant swears to be true.

A COPY OF THE CURRENT SURVEY REPRESENTING THE EXTENT OF THE PROPOSED WORK MUST BE ATTACHED.

ADDITIONAL DOCUMENTS MAY BE REQUIRED AS DEEMED NECESSARY BY THE ZONING OFFICER.

Work Site:	Block: Lot(s): Z	one:
Owner:	Principle Use: Co	orner Lot:
Address:	Telephone#:	
ot Dimensions; Lot Size; sq. fi	ft. Bidg. Coverage:% Total Paved & Bid	lg. Coverage%
Are there any easements or buffers contained within the proper fyes, the current survey must accurately show the easement(s)	rty?) or buffer(s).	V.
rinciple Structure: (the following is information pertaining	ing to the main structure(s) located on the Work Site):	
Height: Width: Length: #of S	Stories: Total Bullding Footprint:	
ront Setback: (Corner Lot Front Setback:	Side Setbacks: & Rear Se	tback:
accessory Structure(s): (the following is information	n pertaining to any additional structure(s) locate	d on the Work Site):
imensions: Front Setback: Side	Setbacks: Rear Setback:	
roposed Work To Be Performed:		P.
2	Deck: Driveway: Patio: Gara	ge!
ew Structure: Addition: Shed Pool:		ge:
ew Structure: Addition: Shed Pool: _		
ew Structure: Addition: Shed Pool: ther: imensions of Proposed Work (provide additional docume	ents as necessary):	
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ew Structure: Addition: Shed Pool: ther: imensions of Proposed Work (provide additional docume	cessary):	
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ew Structure:Addition:ShedPool; ther: imensions of Proposed Work (provide additional docume escription of Work (provide additional documents as nec	cessary): Applicant's Signature	Date
ew Structure: Addition: Shed Pool; ther: imensions of Proposed Work (provide additional docume escription of Work (provide additional documents as nec	cessary): Applicant's Signature nich are made a part hereof, the proposed work	Date
ew Structure: Addition: Shed Pool: ther: imensions of Proposed Work (provide additional documents as necessarily provide additional documents are necessarily provide additional documents as necessarily provide additional documents are necessarily provide additional documents and necessarily provide additional documents are necessarily provid	cessary): Applicant's Signature nich are made a part hereof, the proposed work	Date
ew Structure: Addition: Shed Pool; ther: mensions of Proposed Work (provide additional documents as necessaription of Work (provide additional documents) and necessaription of Work (provide additional documents as necessaription of Work (provide additional documents) and necessaription of Work (provide additional documents).	Applicant's Signature nich are made a part hereof, the proposed work d is hereby approved.	Date is found to be in accordan
ew Structure: Addition: Shed Pool; ther: imensions of Proposed Work (provide additional docume escription of Work (provide additional documents as nec APPROVED ased on this Zoning Application and statements wh th the Borough of Sayreville Zoning Ordinance and	Applicant's Signature nich are made a part hereof, the proposed work d is hereby approved.	Date is found to be in accordan