

FILE #

LOT

QUALIFICATION CODE

ADDRESS (SITE)

PERMIT NO.



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: _____

2. Name of Owner in Fee: _____

Tel. _____ e-mail. _____

Address _____ street _____ municipality _____ zip code _____

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: _____ Tel. _____

Address _____ e-mail _____

License No. C.R. new home, Builder Reg. No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

5. Architect/Engineer: _____ Contact: _____

Address _____ e-mail _____

Tel. _____ FAX: _____

6. Responsible Person in Charge once Work has Begun

Tel. _____ FAX: _____

IIa. PROPOSED WORK

Minor Work New Building Add. to Existing
 Repair Alteration Demolition
 Asbestos Abat. -Subch. 8 Lead Hazard Abatement Renovation
 Radon Remediation Reconstruction
 Annual Permit

IIb. CATEGORIES
(Check all that apply)

Building Electrical
 Electrical Plumbing
 Plumbing Fire Protection
 Fire Protection Elevator
 Elevator Other

FOR OFFICE USE ONLY (Optional)							
Est. Cost	Firms Rec'd by	Date Rec'd	Rejection Date	Approv. Date	Reviewer	Resubmission Dates	Comments

III. LAN REVIEW (optional)

DO YOU WANT:

Partial Releases
 On-Site Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks 4. Refrigeration Systems
2. High Pressure Boilers 5. Cross-Connections/Backflow Preventers 9. Underground Storage Tanks
 Pressure Vessels 6. Hazardous Classes/Place of Assembly 10. Swimming Pools, Spas and Hot Tubs
7. Sprinklers/Stand Pipes 11. Gas Tanks 12. Fire Alarm

V. FEE SUMMARY (for office use only)

	\$	Update	Update
1. Building	\$		
2. Electrical	\$		
3. Plumbing	\$		
4. Fire Protection	\$		
5. Elevator Devices	\$		
6. Subtotal	\$		
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee	\$		
10. Subtotal	\$		
11. Cert. of Occupancy	\$		
12. Other	\$		
13. TOTAL	\$		

VI. BUILDING/SITE CHARACTERISTICS

(office use only)	
1. Number of Stories	_____
2. Height of Structure	_____
3. Area — Largest Floor	_____ sq. ft.
4. New Building Area	_____ sq. ft.
5. Volume of Net Space	_____ cu. ft.
6. Max. Dead Load	_____
Max. Occupancy Load	_____
8. If Industrialized Building, Other Approved	_____ HUD
9. Total Land Area Disturbed	_____ sq. ft.
10. Flood Hazard Zone	_____
11. Base Flood Elevation	_____ ft.
12. Wetlands Yes	_____ no

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____

2. Use Group, Proposed: _____

3. Change in Use Group, Indicate Present:

4. No. of dwelling units: Total Units Condo -residential
 Gained, Sale
 Gained, Rent
 Lost, Sale
 Lost, Rental

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: _____

2. Use Group, Proposed: _____

3. Change in Use Group, Indicate Present:

C. MIXED USE (List secondary use(s))

D. Construction Classification: Present _____
Proposed _____

CERTIFICATION IN LIFE LONG LEARNING

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 and 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.H.W.B.R.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 I PERFORM, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

I further certify the following is required by the New Jersey Uniform Construction Code, NJ.A.C. 5:23-2.15(f)1(ix).

I personally prepared the plans submitted for 1) a new home referred to in A.; or, 2) an addition, alteration, 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

C.1. () Building C.2. () Fire Protection

I further certify that I will perform the following work:

3 () Electrical 5. () 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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

I understand that if any of the above statements are wholly false, I am subject to punishment.

Signatur _____ Date _____

... AGENT SECTION (to be completed if the applicant is not the owner in fee)

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.

I hereby certify the following are required by the Uniform Construction Code, N.J.A.C. 5:23-2 (15)(a): All required State, county, and local prior approvals, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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.

understand that if any of the above statements are willfully false, I am subject to punishment.

() Check if contractor.

ame _____

Address _____

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III. (c) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b).

Ex. (10) HOME ELEVATION: Include Home Elevation Contract by the architect as per N. L. S. A. 52-27D-123.16

IF FILE DATE RECEIVED: _____

VIII. PRIOR APPROVALS (check all that apply) (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. Initial	Final Date	
<input type="checkbox"/> Zoning Office									
<input type="checkbox"/> Planning Board									
<input type="checkbox"/> Zoning Board									
<input type="checkbox"/> Sewer Authority									
<input type="checkbox"/> Water Authority									
<input type="checkbox"/> Police Department									
<input type="checkbox"/> Health Department									
<input type="checkbox"/> Soil Conservation									
<input type="checkbox"/> N.J. Department of Community Affairs									
<input type="checkbox"/> N.J. Department of Transportation									
<input type="checkbox"/> N.J. Department of Environmental Protection									
<input type="checkbox"/> Utility Dig No.									
<input type="checkbox"/>									
<input type="checkbox"/>									

IX. SUBCODES AND SPECIAL REGULATIONS, IF APPLICABLE (office use only—check all that apply)

Name of Code & Edition

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Mechanical _____

Name of Code & Edition

Energy _____ Other _____
Barrier Free _____
Flood Hazard _____
As-Bu. Elevation Cert. _____
Other _____

X. CERTIFICATES ISSUED (office use only)

- Temporary Certificate of Occupancy
- Temporary Certificate of Compliance
- Continued Certificate of Occupancy
- Certificate of Compliance
- Certificate of Occupancy
- Certificate of Approval
- Lead Abatement Clearance Certificate

	DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
No. _____				
No. _____				