



Howell Township
4567 ROUTE 9 NORTH (2nd FLOOR)
PO BOX 580
HOWELL, NJ 07731

Date Issued 1/9/2018
Control Number C-39826
Permit Number 20172048
Permit Issue Date 8/10/2017
Certificate Number 20172048

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 25 LILY POND COURT Howell Township, NJ Block: 109.01 Lot: 82 Qual: _____
07731
Owner in Fee: _____
Owner Address: 25 LILY POND COURT HOWELL NJ 07731
Telephone: _____
Contractor: _____
Address: 25 LILY POND COURT HOWELL NJ 07731
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: 5B

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: PAVER PATIO WITH STEP

Certificate Comments:

☐ **Certificate of Occupancy**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☒ **Certificate of Approval**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **Certificate of Continued Occupancy**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:

Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:

Conditions to be met:


Construction Official

Fee: \$0.00

Check Number: _____

Collected By: _____



BUILDING SUBCODE TECHNICAL SECTION



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

Block 109.01 Lot 82 Qualification Code _____
Work Site Location 25 LILY POND COURT
HOWELL, NJ 07731

Owner in Fee: _____
Tel: _____ e-mail: _____
Address 25 LILY POND COURT HOWELL, NJ 07731
municipality zip code
Contractor: _____ Tel. (____) _____
Address _____ e-mail _____
Contractor License No. or Builder Registration No. _____ Exp. Date _____
Federal Employee No. _____ FAX: (____) _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	☐ All			Type:	Failure	Approval	Initial
☐	☐			Footings			
☐	☐			Footings Bonding			
☐	☐			Foundation			
☐	☐			Slab			
☐	☐			Frame			
☒	☐			Truss Sys./Bracing			
				Barrier-Free			
				Insulation			
				Finishes -Base Layer			
				Finishes -Final			
				Energy			
				Mechanical			
				TCO			
				Other			
				Final			
				Barrier-Free			

Joint Plan Review Required:
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator

SUBCODE APPROVAL
☐ CO ☐ CCO ☒ CA

Date: 8-23-17

Approved by: [Signature]

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class			1. New Bldg. \$
No. of Stories			2. Rehabilitation \$
Height of Structure			3. Total (1+2) \$
Area - Largest Floor	<u>500</u>	<u>500</u>	
New Bldg. Area/All Floors	<u>500</u>	<u>500</u>	
Volume of New Structure			
Total Land Area Disturbed			

Called 8/17/17 as per [Signature]

Est. Cost of Bldg. Work:

1. New Bldg. \$
2. Rehabilitation \$
3. Total (1+2) \$

called 8/17/17 as per [Signature]

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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Paver patio
w/stop

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☒ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence
- ☐ Sign
- ☐ Pool
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Other
- ☐ Demolition

FEE (Office Use Only)

\$
285-

Administrative Surcharge \$
Minimum Fee \$
State Permit Surcharge Fee \$
TOTAL FEE \$

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

U.C.C. F-110
(rev. 05/05)

Reorder from OCS Printing (609) 398-4375

Date Received
Control #
Date Issued
Permit #

8/10/17
39826
2017248