

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 Lot	t	Qualifica	ation Code		
Work Site Location					
Owner in Fee:					
Tel.					
Addross					
Addressstreet	municipality			zip code	
Contractor:		Tel			
Address		e-mail _			
Contractor License No. or Builder Registr	ation No.		Exp. D)ate	
Home Improvement Contractor Registrat	ion No. or Exemption Reas	son			
Federal Emp. ID No.		FAX:			
JOB SUMMARY (Office Use Only) PLAN REVIEW Date Init	///// ////////////////////////////////		//////////	onth/Day)	
[] No Plans Required		Failure	Failure	Approval	Initial
[] All	//////////////////////////////////////				
[] Footings/Foundations	Foundation				
[] Structural/Framework	— Slab				
[] Exterior		/ ///// /	/ ///// /		/ //// //
[] Interior	Truss Sys./Bracin				(
Joint Plan Review Required:	Barrier-Free	/ /////			
[] Elec. [] Plumb. [] Fire [] Ele	evator Insulation	/ ///// /			
SUBCODE APPROVAL for PERMIT	Finishes -Base Lay				
Date:	Finishes -Final				
Approved by:	Energy				
SUBCODE APPROVAL for CERTIFICATION					/ //// //
[] CO	TCO				
Date:	Other				
Approved by:	Final				
	Barrier-Free	///////			
B. BUILDING CHARACTERISTICS	Const	r Class Dr	occut	Propos	ad
Use Group Present Propose No. of Stories				r10p08	
	II IIIdu	strialized E	Ū	LILID	
Height of StructureArea — Largest Floor	6		oved		
_	٠, -		f Bldg. Wo		
New Bldg. Area/All Floors		. New Blo	-		
Volume of New Structure	_	. Rehabili			
Max. Live Load	3	. Total (1-	+ 2) \$_		
Max. Occupancy Load			ı	J.C.C. F110 (rev	. 11/09)

Date Received Control #

Date Issued Permit #

D. TECHNICAL SITE DATA		
DESCRIPTION OF WOR	(K	
TYPE OF WORK:		FEE (Office Use Only
[] New Building		\$
[] Addition		<u> </u>
[] Rehabilitation		
[] Roofing		
[] Siding		4//////////////////////////////////////
	Height (exceeds 6')	4//////////////////////////////////////
[] Sign	Sq. Ft.	
[] Pool		
[] Retaining Wall	Sq. Ft.	
[] Asbestos Abateme	nt Subchapter 8	
[] Lead Haz. Abatement NJAC 5:17		
[] Radon Remediation		
[] Kadon Kemedialioi		
[] Other		
		
[] Other	Administrativa Surchar	
[] Other		ge \$
[] Other		ee \$

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.