BUSINESS CONNECT

YOUR GUIDE TO STARTING A BUSINESS OR PROJECT IN JERSEY CITY
Business Connect: Your Guide To Starting A Business or Project In Jersey City

Jersey City Welcomes Your Investment

Thank you for choosing to expand, move, or start your business in Jersey City! Your investment in our city speaks volumes of the potential growth that exists here. Welcome!

This guide will assist you, the small business or building owner, to familiarize yourselves with, and thereby expediting, the process you'll need to follow to obtain the proper building permits which will lead to the City issuing a Certificate of Occupancy (CO).

By clearly spelling out the steps necessary for State Code Compliance, it is our hope you will experience less confusion and avoid unnecessary delays. This page will guide you through the process of obtaining building permits; however, if you ever require assistance throughout any phase of your project or difficulty receiving your CO, please feel free to contact Senior Project Manager, Jorge Dones, at 201-547-5103. The City wants to make your process run as smoothly as possible.

Read this page and familiarize yourself with all the requirements needed to obtain a CO. Only then can you determine which section(s) pertain to your project or business. You'll then be prepared to meet all requirements.

Remember the City of Jersey City is here to help you.

About The Jersey City Department Of Housing, Economic Development & Commerce

The Department of Housing, Economic Development and Commerce (HEDC) is a diverse group of planners, officials, managers, inspectors, and support staff. HEDC's purpose is to protect and further the public welfare by planning and overseeing the orderly growth and development of Jersey City’s residential, commercial, non-profit, and industrial sectors. We do this by coordinating with other agencies and through comprehensive planning, regulation of land use, permitting, code enforcement, and disbursement of state and federal grant funds.

Public welfare and quality of life also fall under HEDC's pervue. We regularly supporting social services providers and staffing boards while enforcing building and housing codes, rent and tenant laws, and issuing business licenses. (All of which are state required.)
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Who's Who at HEDC:

Marcos Vigil, Director of HEDC 201-547-5070

Jorge Dones, HEDC Senior Project Manager 201-547-5103
Division & Autonomous Agencies’ Directors & Phone Numbers:

City of Jersey City
Division of Zoning
Nick Taylor
Office of The Construction Code Official
Ray Meyer
Division of Planning
Annisia Cialone
James Shea
Dennise Nuben
Jeremy Farrell
Mary F. Paretti

Division of Planning

Director of Fire Department
James Shea
Deputy Fire Official
Dennise Nuben
Municipal Utilities Authority,
Executive Director
Jeremy Farrell
Parking Authority,
Chief Executive Officer
Mary F. Paretti

State Agencies:

DCA Code Assistance
201-547-5000
DCA Regulatory Affairs
201-547-4452
201-547-6898
201-547-5050
201-547-4239
201-547-4239
201-432-1150
201-653-6969
609-984-7609
609-984-7768

Jersey City's Urban Enterprise Zone Program (UEZ)

The Jersey City Economic Development Corporation's Urban Enterprise Zone Program welcomes you and you will find that Jersey City is an extraordinarily business-friendly community! We at the UEZ are here to assist you in locating your business and helping it thrive.

The Jersey City UEZ Program is one of the largest and most productive UEZ programs in New Jersey. We offer member businesses a number of tax and financial incentives that help them grow, thereby stimulating the local economy. Certified UEZ member businesses may:

- Sell certain goods at 3.3125% sales tax - half the normal NJ Tax Rate
- Purchase construction materials and other tangible property tax free
• Be eligible for a corporate tax credit up to $1,500 for each new hire or up to 8% Corporate Business Tax Credit on qualified investments.
• Subsidized unemployment insurance costs for employees earning less than $4,000/quarter.

One-third of Jersey City has been designated as an Urban Enterprise Zone.

Please contact our office to verify that your location is within one of the three Urban Enterprise Zones and learn what is required for becoming a certified UEZ business member. Contact Florence Baron at 201-333-7797 and/or email fbaron@jcedc.org.

1. Overview For New Businesses

Having found and secured a desirable Jersey City location, you are now ready to begin improvements on your new commercial space. Here are five important steps to remember:

First, visit the Zoning Department and make sure the area you’ve chosen for your business is zoned for that business. Immediately notify the Jersey City Department of Housing, Economic Development, & Commerce about your project. The City welcomes your investment and is here to help. The "Go-to-Per-son" for any questions or concerns you may have during this process will be our Senior Project Manager, Jorge Dones at 201-547-5103.
Plan and Budget Carefully. Depending on whether your project is renovating existing construction or new construction, it can take anywhere from several weeks to several months before you are officially open for business. Thoroughly discuss a reasonable timeline with your contractor and landlord so you can plan and budget accordingly. Unforeseen delays do happen and should be taken into account at the beginning of any project.

Hire Only Licensed, Registered Contractors. By State Statute your contractor must be licensed by the state of New Jersey and you or your contractor must obtain all the permits required for the job. These requirements are in place to protect you. Remember – cutting corners at the beginning by hiring an unlicensed contractor will most likely run you into higher costs later on. For more information, check out http://www.state.nJus/lps/ca/HIC/

Obtain Copies of All Permits for Your Records. For various reasons, the contractor you hire to start the job may not necessarily be the one who finishes it. It is your responsibility as the business owner to obtain copies of all permits as they are issued. You are well within your rights to require your contractor to give you copies of all permits issued.

Ask Questions and Always Follow Up. We realize this may be the first time you have made a capital investment in Jersey City. Use this reference guide to help you navigate through the process. Don’t be afraid to ask your contractor or the City questions and always document concerns in writing. Remember, contractors work for you and City officials are here to help you at any time.

Remember - we want to see you open for business sooner rather than later.

2. When Do You Need A Construction Code Permit?

Changes to properties and structures, including both new construction and renovations or remodeling, all require permits under the Code of the State of New Jersey.

Here are specific guidelines and examples to help you determine whether you will need permits for planned electrical, plumbing, or structural work on your property.

WHETHER YOU HIRE A CONTRACTOR OR DO THE WORK YOURSELF, IT IS YOUR RESPONSIBILITY TO ASSURE ALL PROPER PERMITS ARE OBTAINED AND THE WORK IS DONE TO CODE REQUIREMENTS.
The following is work that requires a permit:

All new building construction  
Construction of any additions made to existing property  
Any alterations made to existing property  
Hazardous locations  
Any reconstruction done at an existing property  
Any structural repairs and/or modifications made to existing property  
The installation of fire alarm systems  
The installation of sprinkler systems  
The installation of any Hood and Suppression systems  
Any work done to renovate a space to meet the code requirement for a Day Care  
Any demolition work  
Constructing a deck.

Still not clear? Call us at 201-547-6898.

The Jersey City Office of the Construction Code Official makes the review and approval process of permits and forms as brief and convenient as possible. Please do your part by having the necessary information when applying for the proper permit. If you need any further information or assistance, don’t hesitate to call the Jersey City Building Department with any questions at 201-547-6898.

3. Office Of The Construction Code Official
The Office of the Construction Code Official is where you obtain Construction Code Permits:

Ray Meyer, Construction Code Official  
Office of Construction Code Official  
30 Montgomery Street, 4th floor, RM 412  
Jersey City, New Jersey 07302

Office hours are from 9:00 a.m. to 4:30 p.m. on Mondays and Fridays, and are from 9:00 a.m. to 7:00 p.m. on Tuesdays, Wednesdays, and Thursdays.

4. Dealing With The Construction Code Division
The purpose of this guide is to expedite the review and inspection process for new projects and expanding businesses within the City of Jersey City.
The key individual involved in this process is Ray Meyer, Construction Code Official.

Problems reported to any individuals, agencies, or departments concerning
Problems reported to any individuals, agencies, or departments concerning applications or inspections within the City of Jersey City should be reported directly to Ray Meyer at 201-547-6898 or by e-mailing Raymondm@jcnj.org.

How the Construction Code Application helps your business venture:

Register your intentions with HEDC
Assign a project manager to coordinate activities
Set up a preliminary meeting with Office of the Construction Code Official to go over requirements necessary for your project
Process and review all plans and permits within two (2) Business Days
Process and review application denials or set-up a meeting with you or your contractors, engineers, or architect
Conduct inspections (scheduled by your project manager) within two (2) Business Days
Conduct re-inspections within two (2) Business Days
Process and issue Temporary or Permanent Certificate of Occupancy within three (3) Business Days

Note: Special standards and reviews apply to properties within a historic area, which occupy an historic site, or which are designed as landmarks.
For further information, please call 201-547-5050

5. Division of Zoning - Overview

It is recommended that you contact the Zoning Division for use and occupancy requirements. The Division of Zoning phone number is 201-547-6564.

You also need to contact the Zoning Department after you meet with HEDC to see if there are any other requirements you may need from the Office of Historic Preservation.

Redevelopment areas and projects requiring Site Plan Approvals, Variances, and Flood Elevations are handled through the Planning Division. Inquiries may be made at: http://www.cityofjerseycity.com/hedc.aspx?id=1170

Additionally, if you are hiring a contractor, you should confirm that this individual is in good standing with and has the required State of New Jersey license for his or her specialty, such as plumbing, electrical, etc.
6. How To Obtain A Sign Permit From The Zoning Division:

Complete a building permit application
Submit three (3) sets of drawings of the planned signage
Drawings should include:
- Proposed location of sign on a site plan
- Blueprint drawing which shows actual sign dimensions, including sign height, width, and font colors
- If there is an existing sign, please provide a picture
- Accurate computer rendering of what the sign will look like on the building façade, complete with the sign’s total square footage. Your sign company should be able to help you with this. Remember, both before (building without sign) and after (building with sign) pictures or drawings are required to be submitted
- Sign cannot exceed 20 square feet
- All signs require Zoning Division approval.

7. Prior Approvals

Based upon your meeting with the Office of the Construction Code Official, prior approvals will be discussed and identified. With the exception of minor work, certain prior approvals may be required. These include, but are not limited to, the following:

Prior to undertaking a project the Zoning Office should be contacted first to ensure it complies with Zoning regulations and other prior approvals. Their phone number is 201-547-6564

If the work planned is disturbing soil in excess of 5000 square feet, you must file a plan with Soil Erosion and Sediment Control at http://www.nj.gov/agriculture/divisions/anr/nrc/njdep.html
The MUA also issues approvals for water, sprinkler, and sewer connections and is located at 555 Route 440. Their number is 201-432-1150
Approvals for food establishments, restaurants, or beauty shops are obtained through the Jersey City Health Department, at 201-547-6800
For life hazard use groups and high rises or permits for the use of torches to replace or repair roofs, you will need to contact Jersey City Fire Department, at 465 Luis Munoz Marin Boulevard. Their number is 201-547-4256
The Passaic Valley Sewerage Commission also must review plans for additions and new construction. They will determine any plan adjustments needed as well as fees required. Their number is 973-817-5706

**Jurisdiction over construction or renovation in historic districts or the demolition of buildings 100 years old or more in age falls under the pervue of Historic Preservation.** Their office can be contacted at 201-547-4312

The State of New Jersey reviews all projects involving school, hospital, MRI, CAT Scan, and Adult Medical Day Care facilities

Footing and Foundation permits are issued provided there is Zoning approval, a soil investigation report, and soil erosion approval for excavation of more than 5000 square feet of dirt. Two (2) copies of the footing and foundation plan and a pre-site survey are required for submission

**8. Notes To Building And/Or Business Owners**

Contractors are not required to be listed on the permit documents for filing. Contractor performance is a contractual issue. This office does mediate contract disputes. Our responsibility is to verify code compliance. This office **DOES NOT AND CANNOT** recommend contractors. The City of Jersey City, as with other communities within the State, has no modifications to the adopted State codes. Application forms may be obtained from the state website, [http://www.state/nj.us/dca/divisions/codes/resources/contructionpermitforms.html](http://www.state/nj.us/dca/divisions/codes/resources/contructionpermitforms.html).

**9. Frequently Asked Questions**

Why do I need to obtain a permit?

A. New Jersey State Law requires it. A permit is required to construct or rehabilitate a structure.

What kind of renovation/construction job requires a permit?

A. Please refer to the Building Permit section earlier in this document. Generally, a building permit is needed for any work beyond cosmetic maintenance (i.e. painting). When in doubt, please call the Building Department at 201-547-5055.
Who is required to obtain the permit if I hired a contractor?

A. Your contractor may obtain all the permits you need, but as the owner, you ARE RESPONSIBLE to verify all permits need have been issued for the property.

When is a sprinkler system required?

A. The need for a sprinkler system is required based upon the plans provided by your architect, engineer, or draftsman. Those plans should be in accordance with Chapter 9 on NJIBC 2009 and the appropriate Section of the NJ rehabilitation sub-code NJAC5:23.

Do I need to be present for an inspection?

A. No, any person with knowledge of work performed at the construction location and with the ability to convey information back to the contractor can be present.

I have concerns about my contractor. Who can I call for help?

A. Contact the Better Business Bureau, Federal Trade Commission. You may also research your contractor's license with the State of New Jersey at http://www.state.nj.us/lps/ca/HIC/. Document all problems with your contractor in writing.

What if I am moving my business into a site which formerly housed a similar business, such as a restaurant? Do I still need to have it gutted and updated?

A. No. Not as long as the current space has a C.O.

I have concerns about a City inspector. Who can I go to for help?

A. Notify the HEDC Senior Project Manager immediately of the concern at 201-547-4941.

I want to install a new storefront sign. Do I really need a permit?

A. Yes. Installing a sign that conforms to City Code will save you time, money, and avoid a hefty fine.
When the project is complete, how many inspections are required before getting a Certificate of Occupancy?

A. You will need inspections for all those areas for which a permit was taken, and these inspections are necessary to receive your CO. You must obtain all Final Inspection Stickers before receiving your CO.

Prior to applying for a Certificate of Occupancy, a Temporary CO, or a Certificate of Continued Occupancy, what must I be sure to have?

A. All required inspections must be completed and approved. A Temporary CO still must be signed by all inspectors. All life safety requirements must be completed and approved. The application for a Certificate of Occupancy must be signed and approved by the Zoning Division.
Business Connect Flow Chart

Business Applicant

Mayor's Office

Jersey City Redevelopment Agency (JCRA)

Jersey City Economic Development Corporation (JCEDC)

Special Improvement Districts (SIDS)

Housing, Economic Development & Commerce (HEDC)

Existing Use

Zoning Department

Tenant Build Out/Leased Spaces/New Construction

Design Professional

Contractor

Inspections

Prior Approvals

Certificate of Occupancy

Planning Department

Board of Adjustment/Zoning Board

Historic Preservation Committee/Planning Board

Passaic Valley
30 Montgomery St. 4th Fl.
Jersey City, NJ 07302

Municipal Utilities Authority (M.U.A.)
555 Rt. 440 South
Jersey City, NJ

State of New Jersey

Health Department
Dept. of Community Affairs (DCA)
Dept. of Environmental Protection (DEP)
Division of Youth and Family Services (DYFS)

Eight simple steps to obtain a Certificate of Occupancy

1. Business Applicant/Owner and/or Design Professional should meet with H.E.D.C. to determine or review action plan, time line, needs, etc.

2. Zoning Department

3. Design Professional; Architect, Planner, Engineer, Attorney, etc.
   a. Planning Dept.
   b. Board of Adjustment/Zoning Board

4. Construction Code Office
   a. Passaic Valley
   b. M.U.A.
   c. State of NJ

5. Permit Filing

6. Inspections

7. Prior Approvals

8. Final Inspection

9. Certificate of Occupancy
APPLICATION FOR CERTIFICATE

CERTIFICATE PRE-PAYMENT FEE: $_____________  CK#: __________
DATE PAID: ____________________________________

IDENTIFICATION

Block: ___________________  Lot: ________________  Contractor: ________________________
Work Site Location: ____________________________  Address: __________________________

Owner in Fee: ___________________________  Tel: (_____) ____________
Address: _______________________________  License No.: ________________________

Tel: __________  Federal Employee No.: __________________

ACTION

☐ CERTIFICATE OF OCCUPANCY
☐ CERTIFICATE OF CONTINUED OCCUPANCY
☐ LEAD HAZARD ABATEMENT CERTIFICATE CLEARANCE
☐ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP ________________________________  Previous ________________________________

Current ________________________________

FINAL COST OF CONSTRUCTION: $________________
(Include value of any new structure, all on-site improvements, built-in furnishings ans fixtures and all integral equipment exclusive of process of manufacturing equipment).

A set of “As Built” or amended drawings is required if the building or structure devintes from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans.

If requesting a Temporary Certificate of Occupancy or Compliance, please explain why in the space below.

DESCRIPTION OF WORK / USE: ________________________________  FIRE RATING: __________________
USE GROUP: ________________________________  MAXIMUM OCCUPANCY: __________________
MAXIMUM LIVE LOAD: ________________________________  SPECIFIC USE: __________________

I hereby attest that to the best of my knowledge, all work has been completed on, accordance with approved plans, permit and regulations. A complete items listed on a Temporary Certificate of Occupancy or Compliance will be completed by the date on the Certificate.

SIGNED: ________________________________  Owner/Agent

☐ OWNER
☐ AGENT
## I. IDENTIFICATION
1. Proposed Work Site at: ____________________________
2. Name of Owner in Fee: ____________________________ Tel: (_____) ________
   Address: ____________________________________________
   street: ____________________________ municipality: _____________
3. Ownership in Fee: Public ____________ Private ____________
4. Principal Contractor: ____________________________ Tel: (_____) ________
   Address: ____________________________________________
   License No. OR, if new home, Builder Reg. No.: ________________ Exp. Date: _____________
   Federal Employee No.: ____________________________ Fax: (_____) ________
5. Architect or Engineer: ____________________________ Tel: (_____) ________
   Address: ____________________________________________
   Contact: ____________________________
6. Responsible Person in Charge once Work has Begun: ____________________________
   Tel: (_____) ________ Fax: (_____) ________

## II. PROPOSED WORK
1. ☐ Minor Work
2. ☐ New Building
3. ☐ Addition
4. ☐ a. Repair
   ☐ b. Alteration
   ☐ c. Renovation
   ☐ d. Reconstruction
5. ☐ Fire Protection
6. ☐ Plumbing
7. ☐ Electrical
8. ☐ Elevator Devices
9. ☐ Asbestos Abat. Subch.8
10. ☐ Lead Hazard Abatement
11. ☐ Demolition

### TOTAL COSTS

## V. FEE SUMMARY (FOR OFFICE USE ONLY)
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: ____________________________ ft.
3. Area - Largest Floor: ____________________________ sq. ft.
6. Construction Classification: ____________________________
7. Total Land Area Disturbed: ____________________________ sq. ft.
8. Flood Hazard Zone: ____________________________
10. Wetlands: ____________
    ☐ Yes
    ☐ No
11. Max. Live Load: ____________________________
12. Max. Occupancy Load: ____________________________

## VII. DESCRIPTION OF BUILDING USE
A. RESIDENTIAL
1. State Specific Use: ____________________________
2. Use Group: ____________________________
3. Change in Use Group Indicate Former
4. No. of Dwelling Units: All Units ____________________________ Income Restricted

### Before Construction:
- Net Gain or Loss ____________________________

### After Construction:
- Income Restricted: ____________________________

B. NON-RESIDENTIAL
1. State Specific Use: ____________________________
2. Use Group: ____________________________
3. Change in Use Group Indicate Former

## IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?
1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boiler
3. ☐ Pressure Vessels
4. ☐ Refrigeration System
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

## III. DO YOU WANT: (optional)
1. ☐ Partial Release
2. ☐ Prototype Processing
DEBRIS RECOVERY APPLICATION FOR SUBMITTAL TO THE JERSEY CITY BUILDING DEPARTMENT

Dear Applicant:

Please be advised that the City of Jersey City has recently amended Chapter 287 of the Municipal Code, Article VI (Construction, Renovation and Demolition Debris Recovery), to conform to State-mandated solid waste and recycling requirement.

As a result, applicants of Construction, Renovation and Demolition projects (classified as cover projects) which require a building or demolition permit are required to complete and file for approval a Debris Recovery Application prior to the issuance of a permit for the above covered projects.

To ensure compliance with the above, the City of Jersey City has retained the services NMG Associates, who will review and process the application on behalf of the Jersey City Building Department.

Applications are required to submit (2) two copies of the application with original signatures to the Jersey City Building Department for approval.

Applicants must be placed in an envelope clearly marked Debris Recovery Application.

Applicants who feel the requirements noted in the application are not applicable to their project or cannot comply with the requirements must state the reason in Section #3 of the application for approval.

Applications will be reviewed for compliance. A “Notice of Compliance” or “Non-Compliance” will be provided to the applicant with a copy to the Jersey City Building Department.

Upon completion of the covered project, the owner of the entity carrying out the project must send, by certified mail, documentation demonstrating that the applicant has met the diversion requirement of the plan to: NMG Associations, 280 Baldwin Avenue, Jersey City, NJ 07306, and to the Jersey City Municipal Recycling Coordinator, Jersey City Incinerator Authority, 501 Route 440, Jersey City, NJ 07305.

Applicants are required to submit the transporter’s manifest(s), noting outbound loads and destination of all materials disposed of and/or recycled prior to final inspection by the Jersey City Building Department.

Once submitted and reviewed for compliance with the diversion requirement, a “Notice of Compliance” will be provided to the owner of the covered project and the Jersey City Building Department.

Failure to comply with the above-referenced municipal code may result in a fine being issued by the appropriate enforcement entity.

If you have any questions please contact NMG Associates at 201-780-8368.
OWNER/CONTRACTOR
CORPORATION/LLC

OWNER INFORMATION

Company Name __________________________
Company Address _________________________
City ___________________________ State _________ Zip
Code _______________
Telephone# ___________________ Fax# ___________________

CHECK IF APPLICABLE
_________ LLC ___________ CORPORATION

REGISTERED AGENT
________________________________________
________________________________________

________________________________________

CONTRACT INFORMATION
Company Name
________________________________________

Company Address
________________________________________
City ___________________________ State _________ Zip
Code _______________
Telephone# ___________________ Fax# ___________________

CHECK IF APPLICABLE
_________ LLC ___________ CORPORATION

REGISTERED AGENT
________________________________________
________________________________________
Contact Notification Sheet/Receipt

Project Address ________________________________
Control # s ________________________________
The following must be provided to assist you the customer in the notification process. The mere fact of providing a phone number is no longer acceptable since we have encountered many times there is disconnect in your services to move the process along.

As the applicant you are attesting to the fact also as the agent or owner you are providing the information to move the process either by review or inspections.

This office policy is to notify the applicant and owner of the status of the applications. This is either accomplished by direct contact with the individual, email or fax. This office will no longer accept voice mails. Upon calling a party if the phone has going into voice mail the other notifications process will take effect.

Information must be printed legibly.

Owner Name ________________________________
If Corporation Registered agent name ________________
Phone Number ________________________________
Fax Number ________________________________
Email ________________________________

Applicant ________________________________
If Corporation Registered agent name ________________
Phone Number ________________________________
Fax Number ________________________________
Email ________________________________
Items Submitted ________________________________
______________________________
Submitted by ________________________________ Accepted by ________________________________
A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING CONTRACTORS, COMPLETE ALL NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Work Site Location: 

__________________________

Owner In Fee: 

__________________________

Tel. (____) ___________ E-mail: 

__________________________

Address: ____________________ Street ____________________ Municipality ____________ Zip Code ____________

Contractor: ____________ Tel: (____) ____________ E-mail: 

__________________________

Contractor License No. or Builder Registration No. ____________ Exp. Date ____________

Home Improvement Contractor Registration No. or Exemption Reason (if applicable); 

Federal Emp. ID No: ____________________ FAX (____) ____________

B. ELECTRICAL CHARACTERISTICS

Use Group ____________________ Present Proposed ____________________

[ ] Pole / Pad No. ____________ [ ] Temporary [ ] Other ____________

Building Occupied as ____________________ Est. Cost of Elec. Work $ ____________

C. CERTIFICATE IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application

[ ] Licensed Elec. Contractor [ ] Certified Landscape Irrigation Contr. [ ] Exempt Applicant

__________________________

D. TECHNICAL SITE DATE

DESCRIPTION OF WORK

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FIRE PROTECTION SUBCODE
TECHNICAL SECTION

A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE, CALL UTILITY DIV NO: 1-800-272-1030.

Block ____________ Lot ____________ Qualification Code ____________

Work Site Location: _____________________________________________

Owner in Fee: _________________________________________________

Tel. (______) __________________ E-mail: ___________________________

Address: _____________________________________________________

Municipality: __________________ Zip Code: ____________

Contractor: __________________________________________________

Tel. (______) __________________ E-mail: ___________________________

Address: _____________________________________________________

Federal Emp. ID No. __________________ FAX: _______________________

Fire Protection Equipment, NJ Div of Fire Safety Permit No: __________________

Fire Protection Equipment, NJ Div of Fire Safety Installer No: ____________ Exp. Date _________

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): __________________

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present ____________ Proposed ____________

Constr. Class: Present ____________ Proposed ____________

Fuel Storage Tank: [ ] Flammable or [ ] Combustible

Fuel Type: Capacity: __________________

Heating System: [ ] New or [ ] Modification to Existing

or [ ] Conversion or [ ] Replacement

Fire Alarm System: [ ] New or [ ] Existing Location of Panel __________________

Location of Main Control Valve: __________________

Fire Suppression / Standpipe System: [ ] New or [ ] Existing

TOTAL: __________________

Total Cost for Fire Protection Work: __________________

C. CERTIFICATE IN LIEU OF OATH

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

Applicant’s Signature / Contractor’s Signature ___________________________

D. TECHNICAL SITE DATE

DESCRIPTION OF WORK:

Water Supply Source: __________________

Method of Alarm / Suppression System Supervision: __________________

Removable / No Combustible Tanks

Alarm System

[ ] System

[ ] 110V Interconnected

[ ] CO Detectors / 110V

Alarm Devices (i.e., smoke, heat, pull, water / flow)

Signaling Devices (i.e., horn, strobes, bells)

Other Devices: __________________

Total: __________________

Suppression System

Fire Pump: __________________

GPM Type: __________________

Dry Pipe / Alarm Valve: __________________

Pre-action Valve: __________________

Sprinkler Heads (Dry and Wet): __________________

Stantypes: __________________

Pre-engineered System

Wet Chemical: __________________

Dry Chemical: __________________

CO Suppression: __________________

Foam Suppression: __________________

202 Suppression: __________________

Other: __________________

Other System

Kitchen Hood Exhaust System: __________________

Smoke Control System: __________________

Fuel/Oil Fired Appliances: [ ] Gas [ ] Oil [ ] Solid

Fireback Venting / Metal Chimney: __________________

Other: __________________

Administrative Surcharge: __________________

Minimum Fee: __________________

State Permit Surcharge Fee: __________________

TOTAL FEE: __________________
**BUILDING SUBCODE TECHNICAL SECTION**

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

<table>
<thead>
<tr>
<th>Block</th>
<th>Lot</th>
<th>Qualification Code</th>
</tr>
</thead>
</table>

**Work Site Location:**

<table>
<thead>
<tr>
<th>Street</th>
<th>Municipality</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

**Owner in Fee:**

<table>
<thead>
<tr>
<th>Tel.</th>
<th>E-mail</th>
</tr>
</thead>
</table>

**Address:**

<table>
<thead>
<tr>
<th>Contractor</th>
<th>Tel.</th>
<th>E-mail</th>
</tr>
</thead>
</table>

**Contractor License No. or Builder Registration No.:**

**Exp. Date:**

**Home Improvement Contractor Registration No. or Exemption Reason (if applicable):**

**Federal Emp. ID No.:**

**FAX:**

**C. CERTIFICATE 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 DATE**

**DESCRIPTION OF WORK**

**JOB SUMMARY (Office Use Only)**

<table>
<thead>
<tr>
<th>PLAN REVIEW</th>
<th>Date</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] No Plans Require</td>
<td></td>
<td></td>
</tr>
<tr>
<td>[ ] All</td>
<td></td>
<td></td>
</tr>
<tr>
<td>[ ] Footings/Foundations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>[ ] Structural/Framwork</td>
<td></td>
<td></td>
</tr>
<tr>
<td>[ ] Exterior</td>
<td></td>
<td></td>
</tr>
<tr>
<td>[ ] Interior</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Joint Plan Review Required:**

| [ ] Elec. | [ ] Plum. | [ ] Fire | [ ] Elevator |

**SUBCODE APPROVAL for CERTIFICATE:**

| [ ] CO | [ ] CCO | [ ] CA |

**Date:**

**Approved by:**

**JOB SUMMARY (Office Use Only)**

<table>
<thead>
<tr>
<th>Type</th>
<th>Inspections</th>
<th>Dates (Month/Day)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foil</td>
<td>Failure</td>
<td>Approval</td>
</tr>
<tr>
<td>Foil Bonding</td>
<td>Failure</td>
<td>Approval</td>
</tr>
<tr>
<td>Foundation</td>
<td></td>
<td></td>
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<tr>
<td>Slab</td>
<td></td>
<td></td>
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<tr>
<td>Frame</td>
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<tr>
<td>Truss/Beaming</td>
<td></td>
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<tr>
<td>Barrier-Free</td>
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<tr>
<td>Insulation</td>
<td></td>
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<tr>
<td>Finish/Seal</td>
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<tr>
<td>Energy</td>
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<tr>
<td>Mechanical</td>
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<tr>
<td>HVAC</td>
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<tr>
<td>Other</td>
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<tr>
<td>Final</td>
<td></td>
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<tr>
<td>Barrier-Free</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**B. BUILDING CHARACTERISTICS**

<table>
<thead>
<tr>
<th>Use Group</th>
<th>Present</th>
<th>Proposed</th>
</tr>
</thead>
</table>

**No. of Stories:**

**Height of Structure:**

**Area - Largest Floor:**

**New Bldg, Area/All Floors:**

**Volume of New Structure:**

**Max. Live Load:**

**Max. Occupancy Load:**

**FEE (Office Use Only)**

<table>
<thead>
<tr>
<th>Type of Work</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Building</td>
<td>$</td>
</tr>
<tr>
<td>Addition</td>
<td>$</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>$</td>
</tr>
<tr>
<td>Roofing</td>
<td>$</td>
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<tr>
<td>Siding</td>
<td>$</td>
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<tr>
<td>Fence</td>
<td>$</td>
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<tr>
<td>Sign</td>
<td>$</td>
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<tr>
<td>Pool</td>
<td>$</td>
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<tr>
<td>Retaining Wall</td>
<td>$</td>
</tr>
<tr>
<td>Asbestos Abatement Subchapter 8</td>
<td>$</td>
</tr>
<tr>
<td>Lead Haz, Abatement NJAC 5:17</td>
<td>$</td>
</tr>
<tr>
<td>Radon Remediation</td>
<td>$</td>
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<tr>
<td>Other</td>
<td>$</td>
</tr>
</tbody>
</table>

**Administrative Surcharge:**

**Minimum Fee:**

**State Permit Surcharge Fee:**

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

Block __________________ Lot __________________ Qualification Code __________________

Work Site Location: __________________

Owner in Fee: __________________

Tel. (_____) __________________ E-mail: __________________

Address: __________________ Sheet: __________________ Municipality: __________________ Zip Code: __________________

Contractor: __________________ Tel: (_____) __________________

Address: __________________ E-mail: __________________

Contractor License No. or Builder Registration No. __________________ Exp. Date __________________

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): __________________

Federal Emp. ID No: __________________ FAX: (_____) __________________

B. BUILDING CHARACTERISTICS

Use Group: _______________ Present: _______________ Proposed: __________________

Building Sewer Size: __________________ Public Sewer: __________________ Private Septic: __________________

Water Service Size: __________________ Public Water: __________________ Private Well: __________________

Est. Cost of Plumbing Work: $ __________________

<table>
<thead>
<tr>
<th>JOB SUMMARY (Office Use Only)</th>
<th>INSPECTIONS</th>
<th>TYPE</th>
<th>Failure</th>
<th>Dates (Month/Day)</th>
<th>Approval</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>PLAN REVIEW</td>
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<td>Bibb</td>
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<td>Rough</td>
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<td>Water</td>
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<td>Sewer</td>
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<td></td>
<td>Fixtures</td>
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<td>Gas Equipment</td>
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<td></td>
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<td>Gas Piping</td>
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<td>LP Gas Tank</td>
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<td>Fuel Oil Piping</td>
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<td>Solar</td>
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<td>TCO</td>
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<td>Final</td>
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</tr>
</tbody>
</table>

C. CERTIFICATE IN LIEU OF OATH

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

Applicant's Signature / Contractor's Seal and Signature __________________

[ ] Licensed Plumbing Contractor   [ ] Exempt Applicant

D. TECHNICAL SITE DATE

DESCRIPTION OF WORK

<table>
<thead>
<tr>
<th>QTY</th>
<th>FIXTURE / EQUIPMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Water Closet</td>
</tr>
<tr>
<td></td>
<td>Urinal / Bidet</td>
</tr>
<tr>
<td></td>
<td>Bath Tub</td>
</tr>
<tr>
<td></td>
<td>Lavatory</td>
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<tr>
<td></td>
<td>Shower</td>
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<tr>
<td></td>
<td>Roof Drain</td>
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<tr>
<td></td>
<td>Sink</td>
</tr>
<tr>
<td></td>
<td>Dishwasher</td>
</tr>
<tr>
<td></td>
<td>Drinking Fountain</td>
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<tr>
<td></td>
<td>Washing Machine</td>
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<tr>
<td></td>
<td>Hose Bibb</td>
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<tr>
<td></td>
<td>Water Heater</td>
</tr>
<tr>
<td></td>
<td>Fuel Oil Piping</td>
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<tr>
<td></td>
<td>Gas Piping</td>
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<tr>
<td></td>
<td>LP Gas Tank</td>
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<tr>
<td></td>
<td>Steam Boiler</td>
</tr>
<tr>
<td></td>
<td>Sewer Pump</td>
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<tr>
<td></td>
<td>Interceptor / Separator</td>
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<tr>
<td></td>
<td>Backflow Preventer</td>
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<tr>
<td></td>
<td>Grasstrap</td>
</tr>
<tr>
<td></td>
<td>Sewer Connection</td>
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<tr>
<td></td>
<td>Water Service Connection</td>
</tr>
<tr>
<td></td>
<td>Stacks</td>
</tr>
<tr>
<td></td>
<td>Other</td>
</tr>
</tbody>
</table>

FEE (Office Use Only) $ __________________

Administrative Surcharge $ __________________

Minimum Fee $ __________________

State Permit Surcharge Fee $ __________________

TOTAL FEE $ __________________