



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 107 Platz Dr, Skillman, NJ 08554

2. Name of Owner in Fee: Robin Azzam
 Te: [REDACTED] e-mail: [REDACTED]

Address 107 Platz Dr
street municipality zip code

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: Peter Fields Tel. (908) 721-1080
 Address _____ e-mail fieldscaping@gmail.com

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

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

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

5. Architect or Engineer _____ Contact _____
 Address _____ e-mail _____
 Tel. (____) _____ FAX: (____) _____

6. Responsible Person in Charge once Work has Begun _____
 Tel. (____) _____ FAX: (____) _____

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)

- Number of Stories _____
- Height of Structure _____ ft.
- Area — Largest Floor _____ sq. ft.
- New Building Area _____ sq. ft.
- Volume of New Structure _____ cu. ft.
- Max. Live Load _____
- Max. Occupancy Load _____
- If Industrialized Building: State Approved _____ HUD _____
- Total Land Area Disturbed _____ sq. ft.
- Flood Hazard Zone _____
- Base Flood Elevation _____ ft.
- Wetlands yes _____ no _____

IIa. PROPOSED WORK

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

IIb. SUBCODES (Check all that apply)

	FOR OFFICE USE ONLY (Optional)								
	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<input type="checkbox"/> Building									
<input type="checkbox"/> Electrical									
<input type="checkbox"/> Plumbing									
<input type="checkbox"/> Fire Protection									
<input type="checkbox"/> Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

- State Specific Use: _____
- Use Group, Proposed: _____
- Change in Use Group, Indicate Present: _____
- No. of dwelling units: Total Units Income-restricted

Gained, Sale	_____
Gained, Rental	_____
Lost, Sale	_____
Lost, Rental	_____

B. NON-RESIDENTIAL (primary use)

- State Specific Use: _____
- Use Group, Proposed: _____
- Change in Use Group, Indicate Present: _____

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:

- Partial Releases
- Prototype Processing

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

- Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
- High Pressure Boilers
- Pressure Vessels
- Refrigeration Systems
- Cross-Connections/Backflow Preventers
- Hazardous Uses/Places of Assembly
- Sprinklers/Standpipes
- Smoke Control Systems in Open Wells
- Underground Storage Tanks
- Swimming Pools, Spas and Hot Tubs
- LPGas Tanks
- Fire Alarm

DOMERY TOWNSHIP
PERMIT APPLICATION

Township Use Only AMOUNT PAID \$ 50-553

CASH or CHECK # _____ DATE 9/29/2022

Block 21002 Lot 1 Zoning District _____

Street Address 107 platz drive skillman 08588

Property Owner Robin Azzam

Mailing Address (if different) _____ City _____ State _____ Zip Code _____

Daytime Phone [REDACTED] Fax _____ Email [REDACTED]

APPLICANT (if not owner):

Name _____ Owner's Agent _____ Tenant _____ Other _____

Address _____ City _____ State _____ Zip Code _____

Contact Person _____

Daytime Phone _____ Fax _____ Email _____

TYPE OF PERMIT REQUESTED (CHECK ALL THAT APPLY)

- New Construction
- Deck
- Addition/Alteration
- Pool/Spa/Hot Tub
- Accessory Building (Shed, Garage, etc.)
- Lot Coverage (Patio, Driveway, etc.)
- Fence
- Change Tenant/Use (Commercial)
- Tenant Fit-Out
- Sign
- Other - _____
- Demolition - No Charge

Description of Project/Use (please be specific): Pool & Patio

Commercial Change of Tenant/Use: Previous Tenant _____ Existing Use _____

New Tenant _____ New Use _____ Sq. Ft. _____

CERTIFICATION:

I hereby certify that I am either the legal property owner or authorized by the legal property owner to make this application. I understand that if any of the above statements are willfully false, I am subject to penalties.

Robin Azzam [Signature]
Owner's Name Printed & Signature

9/28/22
Date

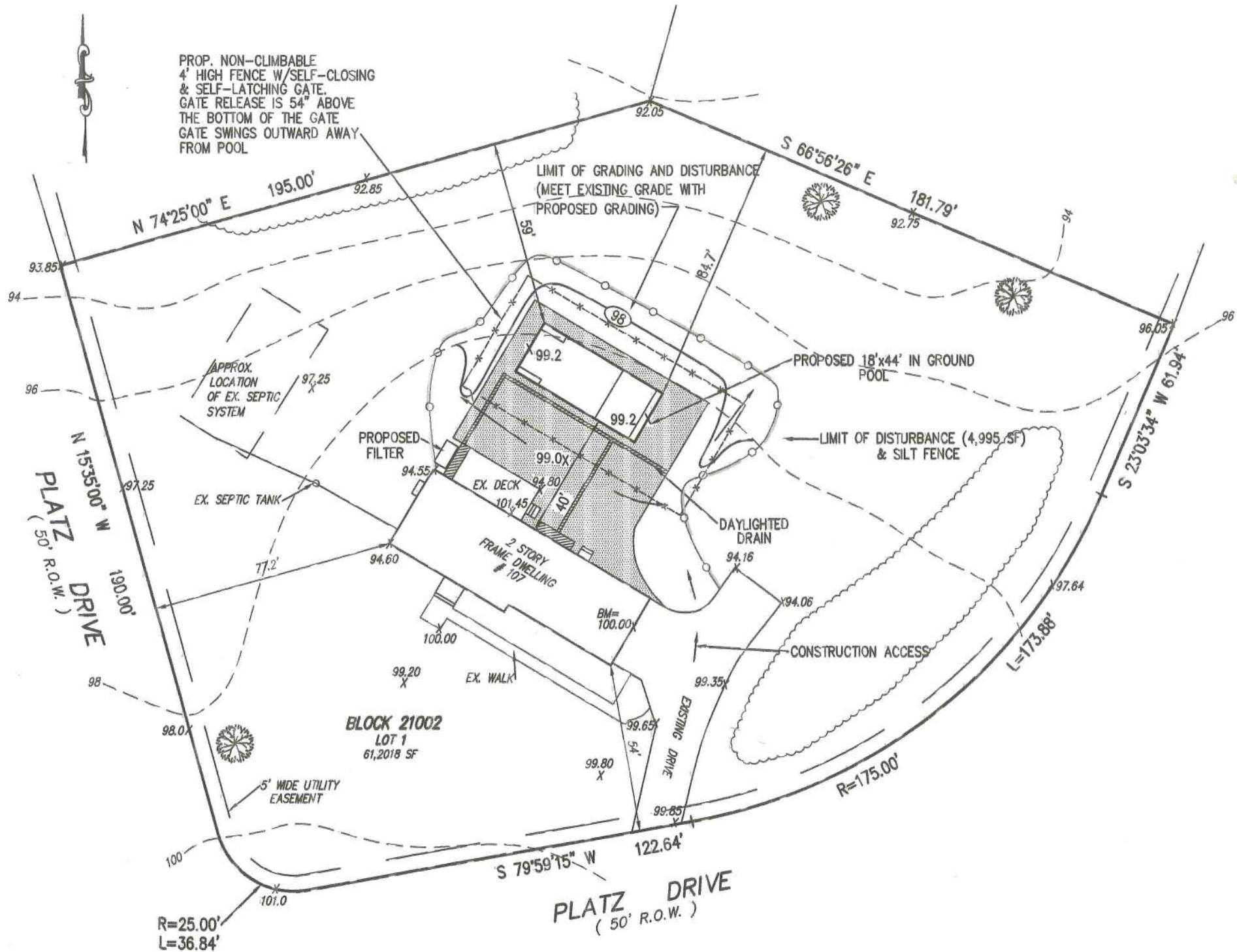
Applicant's Name Printed & Signature

Date

Township Use Only	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED
_____ Zoning Officer	_____ Date

ZONING PERMIT FEE PAYABLE UPON SUBMISSION OF APPLICATION

PD - 9/28/2022
9541 00 612



PROP. NON-CLIMBABLE
4' HIGH FENCE W/SELF-CLOSING
& SELF-LATCHING GATE.
GATE RELEASE IS 54" ABOVE
THE BOTTOM OF THE GATE
GATE SWINGS OUTWARD AWAY
FROM POOL

IMPERVIOUS COVERAGE SUMMARY

EX. DWELLING	- 2,080 SF
EX. DRIVEWAY	- 1,395 SF
EX. WALK & PORCH	- 190 SF
EX. DECK	- 250 SF
PROP. POOL & WALK	- 2,708 SF
EX. TOTAL	- 6,623 SF OR 10.82%

UTILITY NOTES:

- 1.) IT IS IMPERATIVE THAT UTILITY COMPANIES ARE NOTIFIED TO ANY EXCAVATION AND/OR CONSTRUCTION 1-800-272-1000.
- 2.) NO CERTIFICATION IS MADE BY D.S. ENGINEERING, P.C. AS TO THE ACTUAL POSITION OF ANY UNDERGROUND UTILITIES OR TO THE COMPLETENESS OF THE UTILITIES SHOWN.

MONTGOMERY TOWNSHIP NOTES:

1. OTHER THAN THROUGH THE DRIVEWAY, CONSTRUCTION ACCESS OVER ROADSIDE CURB AND SIDEWALK IS NOT PERMITTED.
2. ALL GROUND AND LOT COVERAGE REMOVAL REQUIRES INSPECTION. PROVIDE MINIMUM 48-HOUR NOTICE TO THE ENGINEERING DEPARTMENT.
3. FINAL AS-BUILT DRAWINGS BY PLS, STORMWATER MANAGEMENT SYSTEM CERTIFICATION BY EP, AND A GRADING CERTIFICATION BY EP ARE REQUIRED PRIOR TO THE ISSUANCE OF CERTIFICATES OF OCCUPANCY/APPROVAL.
4. USE OF ANY NEW FACILITY, STRUCTURE PRIOR TO OBTAINING A CERTIFICATE OF OCCUPANCY OR APPROVAL IS UNLAWFUL AND VIOLATES TOWNSHIP CODE. FAILURE TO COMPLY IS SUBJECT TO ENFORCEMENT.
5. DAMAGE TO TOWNSHIP SIDEWALK RESULTING FROM THE PROJECT SHALL BE REPLACED BY THE OWNER, APPLICANT, OR RESPONSIBLE PARTY IN CHARGE OF WORK. A ROAD OPENING PERMIT APPLICATION MUST BE SUBMITTED TO THE MONTGOMERY TOWNSHIP ENGINEERING DEPARTMENT. FEES, INSURANCE DOCUMENTATION, AND OTHER REQUIREMENTS APPLY.

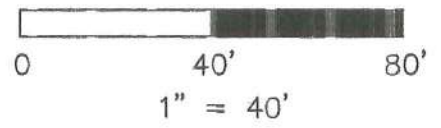
NOTES:

- 1.) OUTBOUND INFORMATION FOR BLOCK 12002 LOT 5 AS SHOWN ON A PLAN ENTITLED "SITE PLAN" PREPARED BY MAXIMILLIAN HAYDEN ARCHITECT, INC. DATED 10-7-16.
- 2.) TOPOGRAPHIC INFORMATION FOR BLOCK 12002 LOT 5 PREPARED ON FEBRUARY, 2021.
- 3.) PROPOSED POOL SIZE, LOCATION AND CONFIGURATION AS SUPPLIED BY THE HOMEOWNER.
- 4.) PROPOSED FENCE LOCATION AND TYPE AS PER HOMEOWNER.
- 5.) ASSUMED BENCH MARK OF 100.00 ON F.G.F.
- 6.) NO WETLANDS BUFFERS EXIST ON-SITE.
- 7.) ALL SOIL SHALL REMAIN ON-SITE.
- 8.) IF THE LIMIT OF DISTURBANCE IS EXCEEDED AN APPROVAL FROM THE S.U.S.C.O. SHALL BE OBTAINED AND A WORK ORDER ISSUED BY MONTGOMERY TOWNSHIP.

LEGEND

- 100 — EXISTING CONTOUR
- 100 ○ PROPOSED CONTOUR
- X 100.0 EXISTING SPOT ELEVATION
- 100.0 PROPOSED SPOT ELEVATION
- DRAINAGE DIRECTION

GRAPHIC SCALE



Mr. & Mrs. AZZAM
107 PLATZ DRIVE,
MONTGOMERY, NJ

DATE:	4/21/21
SCALE:	1"=40'
DESIGN BY:	SGL
DRAWN BY:	
CHECKED BY:	DUS

POOL GRADING PLAN
Prepared For
BLOCK 21002
LOT 1
Sited in
Montgomery Township,
Somerset County, New Jersey

D.S. ENGINEERING, P.C.
ENGINEERS AND DESIGN PROFESSIONALS
P.O. BOX 792
Rocky Hill, New Jersey, 08553
(908) 359-0989 Fax (908) 359-4118
BY: *David J. Schmidt*
David J. Schmidt
Professional Engineer N.J. Lic. No. 39409