

Basic Requirements for Construction Permit Application

Commercial

These requirements are to be used as a guide to assist you in completing the application process. They do not cover every type of work.

*****AT THE COMPLETION OF THE JOB, A CERTIFICATE IS SENT VIA EMAIL ONLY.
INCLUDE AN EMAIL ADDRESS FOR BOTH THE PROPERTY OWNER & CONTRACTOR*****

A Zoning Permit Fee payable to “Bernards Township” is due upon submittal of any Construction Permit Application that requires Zoning Review (no separate form required). Zoning fee is \$50.00 except as otherwise set forth below:

1. New Building	\$300.00	2. Addition	\$200.00
3. Accessory Structure	\$ 75.00	4. Sign	\$ 75.00
5. Telecomm. Structure/Equip	\$ 75.00		

All applications

Submit completed applications for the work intended, and **2 copies** of plans. (If you are submitting plans see the plan requirements.) Exceptions to the plan requirement may include Water heaters, Boilers, Furnaces and minor work.

A completed application will include the following forms. ***UCC FORMS PRINTED FROM THE INTERNET OR COPIES OF UCC FORMS MUST BE LEGIBLE AND NOT HAVE OFFICE ONLY SECTIONS BLACKED OUT***

- Completed [Construction Permit Application](#) (Folder UCC form F100-1 complete sections I, II, III, IV, VI & VII. You must also complete and sign the inside certification section either as the agent or owner.)
- Completed Technical Sections for work being performed i.e. [Building F110](#), [Electrical F120](#), [Plumbing F130](#) or [Fire Protection F140](#). A NJ Licensed Plumber, HVACR or Electrician must sign and seal all copies of the appropriate technical section. A penalty of \$2000 will be issued for false application or performing work without a license.

Each technical section has specific information, which needs to be submitted for each type of work that is being applied for i.e. Contractor information, alteration costs, number of fixtures, smoke detectors, etc. All copies of these forms must be signed and or sealed as appropriate.

Please note alteration costs on the Building Subcode Technical Section are considered the estimated cost of the work for which the permit is sought, including but not limited to building construction, on-site construction, and all integral equipment, built in furnishings and equipment. If both an addition and alteration are being applied for then you must break down the cost of the addition and alteration as indicated on the form.

- Other documentation may need to be submitted for specific types of work. Consult a technical assistant for more information i.e. Sewer permits, Board of Health, Tree removal permits.

Applications for new buildings, additions, accessory structures, tenant fit-outs, and signs.

Submit completed applications as described above and include payment for Zoning Permit Fees payable to “Bernards Township” and **3 copies** of a property survey indicating the new addition or structure on the property. We will forward the application to Zoning & Engineering for prior approvals as necessary.

The application folder UCC form F100-1 and the Building Subcode Technical Section UCC form F110 must indicate the CUBIC VOLUME and SQUARE FOOTAGE of the building as required on the forms. Use the following formulas to calculate CUBIC VOLUME and SQUARE FOOTAGE.

CUBIC VOLUME = Length X Width X Height = cu. ft.

SQUARE FOOTAGE = Length X Width = sq. ft.

Minimum plan submittal requirements

Plans must be signed and sealed by a NJ licensed architect or engineer. Plans are to reflect professional quality worthy of the Architectural Profession. Questionable quality may be referred to the State Board of Architects for review.

Items to be indicated on Construction Plans:

1. Use Group of tenant space and the use of the other adjacent tenant spaces.
2. Gross Floor Area of tenant space.
3. Occupancy Load of tenant space.
4. Key locator plan of tenant space within building level.
5. Exiting plan of tenant space to nearest approved exit, show location of exit signs.
6. Cross-section of all proposed walls and partitions.
7. Tenant space floor plan show unit number.
8. Show all tenant separation walls, the required Fire Resistance rating of that wall and the appropriate U.L. Design number.
9. Include a store shelving or fixture plan. Indicate net clear aisle width of all proposed aisles and corridors.
10. Show any proposed plumbing fixture plan and the appropriate riser diagram.
11. Show single line electrical circuit plan, switch, outlet and fixture plan, sub-panel location, amperage of sub-panel, panel labeling plan of each circuit and reflective ceiling plan.
12. List all dimensions of scaled plan.
13. Show location of all doors & windows.
14. Identify all glass panels by others, which are to have safety glazing.
15. Show H.V.A.C. duct diffuser plan, determine to H.V.A.C. airflow requirements for tenant space, and indicate minimum CFM's.
16. Provide product spec sheets where applicable.
17. Provide all other pertinent information and data to satisfy code requirements.
18. Indicate all required accessibility as per ICC A117.1-2009

Barrier Free Requirements – 20% Cost

Reference: New Jersey Rehabilitation Subcode N.J.A.C. 5:23-6.6(k) Alterations

Reference: New Jersey Rehabilitation Subcode N.J.A.C. 5:23-6.7(k) Reconstruction

“(k) In a building required by the barrier free subcode to be accessible, where the space altered is a primary function space, an accessible path of travel to the altered space shall be provided up to the point at which the cost of providing accessibility is disproportionate to the cost of the overall alteration project; a cost is disproportionate if it exceeds 20 percent of the cost of the alteration work. (Building)”

1. The accessible path of travel shall include, but not be limited to, an accessible parking space, an accessible exterior route, an accessible building entrance, an accessible interior route to the altered area, accessible restrooms, accessible drinking fountains, and accessible telephones serving the altered primary function space. Priority shall be given to providing an accessible entrance or accessible restrooms where possible.
2. In determining disproportionate cost, the following materials may be deducted from the overall cost of the project:
 - i. Windows, hardware, operating controls, electrical outlets and signage;
 - ii. Mechanical systems, electrical systems, installations or alterations of fire protection systems or abatement of hazardous materials; or
 - iii. The repair or installation of roofing, siding, or other exterior wall facade.
3. Where the work consists solely of the alteration of materials or systems listed in (k)2 above, the path of travel requirements shall not apply.
4. Where the alteration work is for the primary purpose of increasing the accessibility of the building or tenancy, the requirement to further improve the path of travel shall not apply.
5. Where it is technically infeasible to comply with the technical standards in the barrier free subcode, the work must comply to the maximum extent feasible.

This office will review the worksheet to determine compliance with the regulations.

WORKSHEET

Overall cost of project----->

1. **DEDUCT** windows, hardware, operating controls, electrical outlets and
Sinage----->

2. **DEDUCT** mechanical systems, electrical systems, installation or
alterations of fire protection systems or abatement of hazardous materials--->

3. **DEDUCT** the repair or installation of siding, roofing or other exterior wall
treatment----->

REMAINING TOTAL COST of the project deducting 1, 2, & 3 above----->

CALCULATE 20% of remaining total cost----->

\$	
\$-	
\$-	
\$-	
\$	
\$	

This 20% amount is the dollar amount of money that is to be spent to make improvements in the “**path of travel to the primary function space**” These improvements can include the construction of or the reconstruction of a ramp, the addition of a wheelchair accessible door, installing lever hardware, installing a wheelchair accessible drinking fountain or telephone or the modification of an existing toilet room along the path of travel into one that is accessible. It can also include the installation of a barrier free van or car parking space with proper loading zone.

Use the back of this sheet to show the cost breakdown of the work to be completed using remaining total cost.



COUNTY OF SOMERSET
DEPARTMENT OF
PUBLIC HEALTH & SAFETY
DEPARTMENT OF HEALTH



Director / Health Officer
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Deputy Director
JAMES H. NORGALIS, HO, MSA, BA
norgalis@co.somerset.nj.us

NOTIFICATION OF CONSTRUCTION/DEMOLITION ACTIVITIES

Pursuant to the Solid Waste Management Plan of Somerset County, it is required that this form be completed by the Permittee, and reported to the Somerset County Department of Health, within 48 hours of the issuance of a municipal permit for construction and/or demolition activities that will, in the aggregate, require removal of 21 or more cubic yards of waste materials.

Please print clearly & fax to: (908) 704-8042, email HealthDept@co.somerset.nj.us or deliver to the above address.

TYPE OF PERMIT: _____ PERMIT # _____
NAME, ADDRESS & PHONE NUMBER OF PERMITTEE:

PHYSICAL LOCATION OF PROPERTY: (Street Address; Municipality; Lot & Block)

DATE WORK WILL START: _____ ESTIMATED DATE OF COMPLETION: _____

ESTIMATED AMT OF CONST/DEMO WASTE TO BE GENERATED: _____ CUBIC YDS

CONTRACTOR TO BE USED FOR WASTE REMOVAL (Name, Address, Telephone & DEP number)

CONTRACTOR TO BE USED FOR RECYCLING (Name, Address & Telephone)

The following materials shall be recycled: wood scrap/unfinished lumber (only non-chemically treated, clean wood); cardboard; concrete; asphalt; masonry/paving materials; scrap metals. ***Failure to source-separate & recycle is a violation of the Somerset County Solid Waste Management Plan*** -- For more information, please visit: <http://www.co.somerset.nj.us/government/public-works/recycling>

PERMITTEE SIGNATURE

DATE

- Mission Statement -

The County of Somerset is committed to excellence and innovation in public service, promoting the well-being of all residents and communities by providing effective, efficient and responsive leadership.

Somerset County Is An Equal Opportunity Employer