



CITY OF OCEAN CITY

AMERICA'S GREATEST FAMILY RESORT

ENGINEERING AND OPERATIONS CENTER

115 12th Street, Ocean City, New Jersey 08226

• Engineering •

APPLICATION FOR REPAIR, REHABILITATION, RECONSTRUCTION OR INSTALLATION OF A NON-OCEANFRONT BULKHEAD (Ord. 98-22) (87-17 Chap. XXII) IN OCEAN CITY, NEW JERSEY

Please supply the following information regarding the property on which the work is to take place.

BLOCK _____ LOT _____
 WORK SITE ADDRESS _____
 OWNER NAME _____ PHONE _____
 OWNER MAILING ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 CONTRACTOR NAME _____ PHONE _____
 CONTRACTOR ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 CELL _____ FAX _____ EMAIL _____
 ESTAMATE OF COST OF WORK _____
 NJ STATE HOME IMPROVEMENT CONTRACTOR REGISTRATION NUMBER _____
 ENGINEER NAME _____
 ADDRESS _____ PHONE _____
 TOTAL LINEAR FEET OF BULKHEAD SHEETING ON THIS PROPERTY _____
 LINEAR FEET OF BULKHEAD SHEETING WHICH IS SUBJECT TO THIS PERMIT _____
 PERMIT REQUESTED: ___ Repair ___ Rehabilitation ___ Reconstruction ___ Installation

The following is required to be submitted in order for this application to be processed

- ___ Plans showing the size, shape, location, and configuration of proposed bulkhead. Include:
- ___ A block marked **“Issued for Construction pending a permit approval.”**
- ___ Elevation of top of bulkhead or adjacent property grade: minimum 7.0' NAVD, 1988 datum
- ___ Elevation of expected toe scour or dredge depth
- ___ Location of private or city-owned outfall piping on property
- ___ Signature and seal of engineer licensed in State of New Jersey
- ___ Specifications of materials to be used and how they are incorporated into the bulkhead.
- ___ Fee of \$200.00, check payable to the, “City of Ocean City”.
- ___ Approved NJDEP permit and approved plan or **Letter from DEP or Engineer** stating the reason the DEP permit is not needed.

Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY

Date received _____
 Application deemed complete on _____ By _____
 Fee Amount _____ Check No. _____ Date _____
 Date approved (within 20 business days of complete app) _____ By _____
 Date denied _____
 Appeal made to Bulkhead Board of Appeals _____ Date _____
 Appeal upheld _____ Appeal denied _____
 NJDEP Permit received and on file (DATE) _____ NJDEP Permit No. _____
 O.C. Permit issued _____ Final inspection made _____
 Elevation Certificate received _____

Volume I, 18-7.6.e . - Summer Restrictions. All barges and construction-related vessels shall be removed from all lagoons and back bay areas during the months of July and August, except for times of making emergency repairs.

*******Notification for START of construction and FINAL construction 609-399-6111 or jshiffler@ocnj.us*******