Jennifer O'Keeffe

From: Evelyn Grandi <egrandi@hazlettwp.org>
Sent: Monday, August 31, 2020 8:59 AM
To: Jennifer O'Keeffe; 'Laura McPeek'; Kim Koempel; rahlolm@hazlettwp.org
Cc: aeng@hazlettwp.org
Subject: OPRA request - 13 Monterey Drive

Ladies:

Please see the below OPRA request.

Evelyn A. Grandi
Evelyn A. Grandi
Municipal Clerk/Deputy Registrar
Hazlet Township
1766 Union Avenue
Hazlet, NJ 07730
(732) 264-1700 Ext. 8686
(732) 264-1785 (Fax)
egrandi@hazlettwp.org

Hazlet Township Municipal
Offices are closed on Fridays

-----Original Message-----
From: Jared Tamasco [mailto:opra+request-16307-b3f7e4fb@requests.opramachine.com]
Sent: Friday, August 28, 2020 7:53 PM
To: OPRA requests at Hazlet Township
Subject: OPRA request - 13 Monterey Drive

Dear Hazlet Township,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.
Records requested:

All records on file for 13 Monterey Drive, Hazlet including:

1. Updated tax card.
2. Open and closed permits
3. Violations.
4. Evidence of underground oil tank and septic.

Yours faithfully,

Jared Tamasco

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-16307-b3f7e4fb@requests.opramachine.com

Is EGrandi@Hazlettwp.org the wrong address for OPRA requests to Hazlet Township? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=hazlet_township

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
https://opramachine.com/help/officers

View this OPRA request & responses online:
https://opramachine.com/request/13_monterey_drive

Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.

NO

OPEN

PERMITS

CLOSED PERMITS

BLOCK 83 LOT 5 QUALIFICATION CODE _____ ADDRESS (SITE) 13 Monterey PERMIT NO. 07-105

C83/5

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 13 Monterey Dr. Hazlet N.J. 07730
2. Name of Owner in Fee: Cassie & Ed Schroeder
   Tel. [redacted] e-mail _____
   Address 13 Monterey Dr (street) Hazlet (municipality) NJ 07730 (zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: BRIAN'S HEATING & COOLING Tel. (732) 259-9545
   Address 9 MONTEREY DR. HAZLET e-mail _____
   License No. OR, if new home, Builder Reg. No. 13VH02938200 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	$	135	
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		3	
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	165	

VI. BUILDING/SITE CHARACTERISTICS

(office use onl)

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area — Largest Floor _____ sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____ no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

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	Resubmission Dates Rejection	Re-viewer
☐ Building									
☐ Electrical									
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COSTS									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units: | All Units | Income restricte
   Before Construction | | |
   After Construction | | |
   Net Gain or Loss | | |

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

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

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
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

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.ix:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature Brian Hechelman Date 10-22-07

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: 11/12/01

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer			X	X	X	X	X	X	
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Department of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Department of Environmental Protection	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition		
Building		Energy		Other
Electrical		Barrier Free		
Plumbing		Flood Hazard		
Fire Protection		As Built Elevation Cert.		
Mechanical		Other		

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				
☐ Lead Abatement Clearance Certificate	No.				

HAZLET TWP. 732-264-1700
1766 UNION AVENUE
HAZLET,NJ 07730

Date Issued 11/14/07
Control #
Permit # 07-1057

UCC NEW JERSEY CERTIFICATE

IDENTIFICATION

Block 83 Lot 5 Qual
Work Site Location 13 MONTEREY DRIVE

Owner in Fee/Occupant SCHROEDER
Address 13 MONTEREY DRIVE
HAZLET, NJ 07730-
Telephone [redacted]
Contractor H O M E O W N E R
Address
Telephone ( ) - Fax ( ) -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. HO-

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification 5B
Maximum Occupancy Load 0
Description of Work/Use:

FURNACE

[ ] CERTIFICATE OF OCCUPANCY

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[X] CERTIFICATE OF APPROVAL

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:
[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (____ years); see file

[ ] CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] CERTIFICATE OF COMPLIANCE

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____, ____.

Fee $ 0
Paid [X] Check No. Cash
Collected by: AMB

Construction Official

U.C.C. F260 (rev. 3/96)

CONSTRUCTION PERMIT

Date Issued 11/13/07

Permit # 07-1057

IDENTIFICATION Block 83 Lot 5 Qualification Code

Work Site Location 13 MONTEREY DR. HAZLET N.J. 07730

Owner in Fee Cassie + Ed Schroder

Address 13 Monterey Drive Hazlet

Tel. ([redacted]

Contractor BRIAN'S HEATING + COOLING

Address 9 MONTEREY DR HAZLET N.J. 07730

Tel. (732) 259-9345

Lic. No. or Bldrs. Reg. No. 13VH02839200

Is hereby granted permission to perform the following work:

[ ] BUILDING [X] PLUMBING [ ] LEAD HAZARD ABATEMENT

[ ] ELECTRICAL [X] FIRE PROTECTION [ ] DEMOLITION

[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:

X Replace Gas Furnace

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 4,000.00

Construction Official

11/13/07
Date

PAYMENTS (Office Use Only)

Building	
Electrical	50
Plumbing	105
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	8
Cert. of Occupancy	
Other	
Total	163
Check No.	
Cash	
Collected by	

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval given.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. Utility services, including septic.
4. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.

☐ Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings; are: fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

U.C.C. F170-2 (rev. 1/04)

☐ A complete copy of released plans must be kept on the job site.

ELECTRICAL SUBCODE
TECHNICAL SECTION

W

Control # 11/13/07
Date Issued
Permit # 07-1057

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

Block 83 Lot 5 Qualification Code ______
Work Site Location 13 monterey Dr. Hazlet

Owner in Fee: Cassie & Ed Schroeder
Tel. [redacted] e-mail ______
Address 13 monterey Drive (street) (municipality) 07730. (zip code)
Contractor: & Home owner Tel. (732) 739-5616
Address 13 Monterey Drive e-mail ______
Contractor License 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 # ______ [ ] Temporary [ ] Other ______
Building Occupied as ______ Utility Co. ______
Est. Cost of Elec. Work $ ______

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: ______
Approved by: ______

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: 11-14-07
Approved by: [signature]

INSPECTIONS	Failure	Failure	Approval	Initial
Type:				
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			11-14-07	RM
Barrier-Free				

Dates (Month/Day)

Temp. Cut-In-Card Date Issued ______
Final Cut-In-Card Date Issued ______
Annual Pool Inspection ______
Date of Grounding and Bonding Certification ______

C. CERTIFICATION 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.

Cassie Schroeder
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Gas Furnace Replacement

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		Furnace	

Furnace.

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

U.C.C. F120 (rev. 7/06) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Control #

Date Issued
Permit #

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

Block _____ Lot _____ Qualification Code _____

Work Site Location 13 MONTEREY DR.
HAZLET NJ. 07730

Owner in Fee Cassie & Ed Schroeder

Address 13 Monterey Drive Hazlet NJ 07730

Tel [redacted]

Contractor BRIAN'S HEATING + COOLING

Address 9 MONTEREY DR.
HAZLET N.J. 07730

Tel (732) 259-9345 FAX ( ) _____

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____

Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____

Fire Alarm Contractor No. _____

Federal Emp. No. 13VH02838200

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

Heating System: [X] New OR [ ] Existing [ ] HVAC

Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar

[ ] Other _____

Location: _____

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible Capacity _____

Total Cost of Fire Protection Work $ 500.00

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel: _____

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve: _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application. Brian Heckelman
Applicant's Signature/Contractor's Signature

[X] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK:

Furnace

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices _____		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other _____		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [ ] Gas or [ ] Oil		
Fireplace Venting/Metal Chimney		
Other _____		

Administrative Surcharge $ _____

Minimum Fee $ _____

State Permit Surcharge Fee $ _____

TOTAL FEE $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[ ] Fire Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other _____				

U.C.C. F140
(rev. 1/04)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Tues

Date Received / Control # 11/13/07

Date Issued / Permit # 07-1057

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

Block 83 Lot 5 Qualification Code

Work Site Location 13 MONTEREY DR. HAZLET N.J. 07730

Owner in Fee: Cassie Ed Schroeder

Tel. [redacted] e-mail

Address 13 monterey DR (street) (municipality) 07730 (zip code)

Contractor: [redacted] Tel. (732) 239-3137

Address 19 Fountayne court, Manalapan e-mail M.J Goodrich Plumbing & HTY.

Contractor License No. 17031 Exp. Date 08/09

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

Federal Emp. ID No. 380802916 FAX: (732) 866-4431

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [X] CA

Date: 11/13/07

Approved by: Joseph A Pemenza

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures			11/13	
Gas Equipment				
Gas Piping			11/13	
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
FINAL			11/13/07	

C. CERTIFICATION 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.

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Replace Gas Furnace

QTY.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal/Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Water Heater
	Fuel Oil Piping
1	~~Gas Piping~~
	LPGas Tank
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
	Sewer Connection
	Water Service Connection
	Stacks
1	Other Furnace
	Other

FEE (Office Use Only)

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$ 105

U.C.C. F130 (rev. 7/06) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

BLOCK R83 LOT 5 QUALIFICATION CODE _____ ADDRESS (SITE) 13 Monterey PERMIT NO. 07-089

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 13 Monterey Drive
2. Name of Owner in Fee: Cassie & Ed Schroeder
   Tel. [redacted] e-mail _____
   Address 13 Monterey Drive (street) Hazlet (municipality) 07730 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Richard J Ostek Electric Tel. (732) 495-1110
   Address 78 Wilson Ave Port Monmouth e-mail _____
   License No. OR, if new home, Builder Reg. No. 13319 Exp. Date 3-31-2009
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 22-3656576 FAX: (_____) _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. (_____) _____ FAX: (_____) _____
6. Responsible Person In Charge once Work has Begun Richard Ostek
   Tel. (732) 495-1110 Cell (732) 500-5992

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 75		
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	$ 75		

VI. BUILDING/SITE CHARACTERISTICS

(office use or)

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area — Largest Floor _____ sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____ no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

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	Resubmission Dates Rejection	Re-viewer
☐ Building									
☒ Electrical									
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									

TOTAL COSTS 800-

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use: SFD
2. Use Group: R5
3. Change in Use Group, Indicate Former:

4. No. of dwelling units:	All Units	Incom restric
Before Construction	1	
After Construction	1	
Net Gain or Loss	0	

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

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

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
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

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.ix:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature Richard J Ostor Date 9/20/07

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

(X) Check if contractor.

Agent Name Richard J Ostor Electric LLC

Address 78 Wilson Ave
Port Monmouth

Telephone (732) 495-1110

Signature Richard J Ostor

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition		
Building _____		Energy _____		Other _____
Electrical _____		Barrier Free _____		_____
Plumbing _____		Flood Hazard _____		_____
Fire Protection _____		As Built Elevation Cert. _____		_____
Mechanical _____		Other _____		_____

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

HAZLET TWP. 732-264-1700
1766 UNION AVENUE
HAZLET,NJ 07730

Date Issued 10/17/07
Control #
Permit # 07-0895

UCC NEW JERSEY CERTIFICATE

IDENTIFICATION

Block 83 Lot 5 Qual
Work Site Location 13 MONTEREY DRIVE

Owner in Fee/Occupant SCHROEDER
Address 13 MONTEREY DRIVE
HAZLET, NJ 07730-
Telephone [redacted]
Contractor RICHARD OSTER
Address 78 WILSON AVENUE
PORT MONMOUTH, NJ 07734-
Telephone (732)495-1110 Fax ( ) -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3656576

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

100 AMP SERVICE UPGRADE

[ ] CERTIFICATE OF OCCUPANCY

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[X] CERTIFICATE OF APPROVAL

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:
[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (____ years); see file

[ ] CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] CERTIFICATE OF COMPLIANCE

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____, ____.

Fee $ 0
Paid [X] Check No. 4562
Collected by: TF

Construction Official

N.C.C. F260 (rev. 3/96)

C83/5

CONSTRUCTION PERMIT

Date Issued 9-24-07

Permit # 07-0895

IDENTIFICATION Block 83 Lot 5 Qualification Code

Work Site Location 13 Monterey Drive
Hazlet NJ 07730.

Owner In Fee Cassie & Ed Schroeder

Address 13 Monterey Drive
Hazlet NJ 07730

Tel. (732) [redacted]

Contractor Richard J Osthus Electric

Address 78 Wilson Ave
Port Monmouth

Tel. (732) 495-1110

Lic. No. or Bldrs. Reg. No. 13319

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:
100 amp Service upgrade

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 800

Construction Official

9/24/07
Date

PAYMENTS (Office Use Only)

Building	
Electrical	75
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	1
Cert. of Occupancy	
Other	
Total	76
Check No.	4562
Cash	
Collected by	

U.C.C. F170 (rev. 01/04)

(see reverse side)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.16. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval given.

☐ *Required inspections for all subcodes for* one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. Utility services, including septic.
4. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.

☐ Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

U.C.C. F170-2 (rev. 1/04)

☐ A complete copy of released plans must be kept on the job site.

ELECTRICAL SUBCODE
TECHNICAL SECTION

(E) Control # 7-24-07
Date Issued
Permit # 07-0895

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

Block 283 Lot 5 Qualification Code

Work Site Location 13 Monterey Drive
Hazlet NJ 07730

Owner in Fee: Cassie & Ed Schroeder

Tel. ([redacted]) e-mail

Address 13 Monterey Drive Hazlet 07730.
street municipality zip code

Contractor: Richard J Janek Electric Tel. ( )

Address 78 Wilson Ave Red Bank e-mail

Contractor License No. 13319 Exp. Date

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

Federal Emp. ID No. 22-3656576 FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present R5 Proposed R5

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 800

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date (Initial)
[X] No Plans Required 7/24/07 (T)
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date:
Approved by:

SUBCODE APPROVAL
[ ] ICC [ ] CCC [X] CA
Date: 10-11-07
Approved by: Richard Janek

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type:				
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			10-11-07	T
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION 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.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
100 amp Service upgrade

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	100	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$ 75
TOTAL FEE	$

U.C.C. F120 (rev. 7/08) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applic

BLOCK 83 LOT 5 ADDRESS (SITE) 13 Monterey Dr. PERMIT NO. 94-0933

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 13 Monterey Dr.
2. Name of Owner in Fee: Delores BOCIAN Tel. ( ) [redacted]
   Address 13 Monterey Dr. (street) Hazlet (municipality) 07730 (zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: GLULIC Renovators Tel. ( ) 591-0616
   Address 16 Tennent Rd Morganville
   License No. OR, If new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. 222685747 Social Security No. _____
5. Architect or Engineer _____ Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work Joseph Glulic Tel. ( ) 591-0616

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	51.		
2. Electrical				
3. Plumbing				
4. Fire Protection				
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review				
8. Subtotal	$			
9. DCA Training Fee		3.		
10. Subtotal	$			
11. Cert. of Occupancy		20		
12. Other				
13. TOTAL	$	74.		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ft.	
3. Area—Largest Floor sq. ft.	
4. New Building Area sq. ft.	
5. Volume of New Structure cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ft.	
10. Wetlands yes sq. ft. / no	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

	Est. Cost
1. ☒ Minor work (single trade)	3000.00
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Elevator Devices	
10. ☐ Asbestos Abatement	
11. ☐ Demolition	
TOTAL COSTS	3000.00

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer

III. DO YOU WANT: (optional) 1 ☐ Partial Releases 2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☒ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction 1
After Construction 1
Net gain or loss 0

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

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( )I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( )I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State county, and local prior approvals have been given, including such certification as the construction official may require

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Divisio of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

(✓) Check if contractor.

Agent Name GLUCK Renovations

Address 16 Tennent Rd. Manalapan NJ.

Telephone (908) 591-9616

OFFICE DATE RECEIVED: 11/16/94

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer			X	X	X	X	X	X	
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Fire Department					X	X	X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Dept. of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Dept. of Environmental Protect.	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (**office use only—optional**)

Name of Code & Edition		Name of Code & Edition		
Building		Energy		Other
Electrical		Barrier Free		
Plumbing		Flood Hazard		
Fire Protection		As Built Elevation Cert.		
Mechanical		Other		

X. CERTIFICATES ISSUED (**office use only**)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				

CONSTRUCTION PERMIT

Date Issued 11-18-96
Control #
Permit # 96-0933

IDENTIFICATION Block 83 Lot 5

Work Site Location 13 Monterey, DR. HAZLET

Owner in Fee Delores Bocian
Address SAME AS ABOVE

Tele. [redacted]

Contractor Gluck Renovations
Address 16 Tennant RD. Morganville N.J.

Tele. (908) 591-0616

Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Federal Emp. No. 22-2685747
or Social Security No. _____

is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] OTHER PORCH 12x18
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK: EXISTING PORCH / REMOVE EXISTING STORMS, INSTALL 4 REPLACEMENT WINDOWS. VINYL SIDING EXTERIOR TO MATCH, T-111 INTERIOR WALLS & PAINT.
NO HEAT, ELEC. PLUMBING TO REMAIN PORCH

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 3000.00

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building	51.—
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	3.
Cert. of ~~Occ.~~ appeal.	20.
Other	
Total	74.—
Check No.	
Cash	
Collected By	11/18/96

(see reverse side)

U.C.C. Form F-170C 1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms to the approved plans and the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode;
2. Foundations and all walls up to grade level prior to back filling;
3. All structural framing and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

If you do not understand any of this information, please ask.

U.C.C Form F-170D

BUILDING SUBCODE TECHNICAL SECTION

Date Received 11-18-94
Date Issued
Control #
Permit # 94-0933

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

Block 83 Lot 5
Work Site Location 13 MONTCALM DR. HAZLET
Owner in Fee DELORES BOCIAN
Address SAME AS ABOVE
Tele. ([redacted])
Contractor FLUCK RENOVATIONS
Address 16 TENNENT RD. MORGANVILLE
Tele. (908) 591-0616
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2685147 or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed
Constr. Class Present 5B Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
New Bldg. Area/All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ 3000.00
3. Total (1+2) $ 3000.00

C. CERTIFICATION 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 DATA

DESCRIPTION OF WORK
EXISTING PORCH / REMOVE EXISTING STORMS, INSTALL & REPLACEMENT WINDOWS, VINYL SIDING EXTERIOR TO MATCH. T-111 INTERIOR WALLS & PAINT
12'X18' PORCH 12
NO HEAT, ELEC. PLUMBING TO REMAIN PORCH

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Fence ____ Height (6' or over)
  [ ] Sign ____ Sq. Ft.
  [ ] Pool
  [ ] Asbestos Abatement
  [ ] Other PORCH
  [ ] Other
[ ] Demolition

(Office Use Only) FEE

	$
Administrative Surcharge	$ 51.-
Minimum Fee	$
DCA TRAINING FEE	$ 3.-
TOTAL FEE	$ 54

Paid [ ] Check #
Collected by:

U.C.C. Form F-1108 — 1 White = Office Copy; 2 Canary = Office Copy; 3 Pink = Applicant Copy; 4 Hard = Inspector Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received 11-18-94
Date Issued
Control #
Permit # 94-0933

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

Block 83 Lot 5
Work Site Location 13 Montclair Dr. Hazlet
Owner in Fee [illegible]
Address [illegible]
Tele. ([redacted]
Contractor [illegible]
Address 11 Tennent Rd. Morgan [illegible]
Tele. ( ) [illegible]
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. [illegible] or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS Type:	Failure	Failure	Approval	Initial
[ ] No Plans Req.							
[ ] All			Footing				
[ ] Footing			Foundation				
[ ] Foundation			Slab			11/18/94	[illegible]
[ ] Frame			Frame			11/18/94	[illegible]
[ ] Other			Insulation				
Joint Plan Review Required:			Finishes:				
[ ] Elec. [ ] Plumb. [ ] Fire			Energy				
SUBCODE APPROVAL			Mechanical				
[ ] CO [ ] CCO [X] CA			TCO				
Date: 4/8/96			Other				
Approved By: [signature]			Final			3/23/96	[illegible]

(Dates (Month/Day) applies to the Failure, Failure, Approval columns.)

B. BUILDING CHARACTERISTICS

Use Group Present [illegible] Proposed
Constr. Class Present [illegible] Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
New Bldg. Area/All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ [illegible]
3. Total (1+2) $ [illegible]

C. CERTIFICATION IN LIEU OF OATH

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

Signature [signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK 13'x18'
Existing porch / Remove existing storms install 4 replacement windows, vinyl siding exterior to match. T-111 interior [illegible] No heat, elec. plumbing to remain porch

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence Height (6' or over)
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement
[ ] Other Porch
[ ] Other
[ ] Demolition

(Office Use Only) FEE $

Administrative Surcharge $ 51
Minimum Fee $
Paid [ ] Check # DCA TRAINING FEE $ 3
Collected by: TOTAL FEE $ 54

U.C.C. Form F-110B

1 White = Office Copy
2 Canary = Office Copy
3 Pink = Applicant Copy
4 Hard = Inspector Copy

APPROVED BY HAZLET TOWNSHIP ZONING OFFICER

HAZLET TOWNSHIP, NEW JERSEY

THIS ___ DAY OF ___ 19___

APPLICATION FOR ZONING PERMIT

Date 11/15/94 ZONING OFFICER

Application No. X

Permit No. 5101

Application is hereby made for a Zoning Permit in conformity with the requirements the Zoning Ordinance of the Township of Hazlet and any amendments thereto for the following described work:

Name BOGIAN

(If Commercial or Industrial give name of store, company, etc.)

Address 13 MONTEREY DRIVE

Block 83 Lot 5 Zone R-7B

The above named applicant hereby applies for a Zoning Permit to: RECONSTRUCT EXISTING REAR PORCH (12' X 18')

Fill in the following items that apply to the property in question.

SIZE OF PROPERTY	PRINCIPAL BUILDING	ACCESSORY BUILDING(S)
Area 8,800 Sq. Ft.	Type 1 STY. FRAME	Total Area .... Sq. Ft.
Frontage 80 Ft. (111)	Gross Floor Area 1597 Sq. Ft.	Min. Side Yard .... Ft.
Depth 110 Ft.	Lot Coverage 18 Percent	Min. Rear Yard .... Ft.
	Building Height 35 Ft.(Max.)	

SIGNS: Type X Area permitted X Area requested ___

YARD DIMENSIONS (Not required for signs)

Front 25.9 Ft. Right Side 11.8 Ft. Left Side X Ft. Rear 3 Ft.

Submitted herewith is a dimensioned plan (Certified Survey) of the lot showing proposed work and/or existing structure(s).

Owner SAME Address ___ Tel. No. ___

Lessee ___ Address ___ Tel. No. ___

Contractor OWNER Address ___ Tel. No. [redacted]

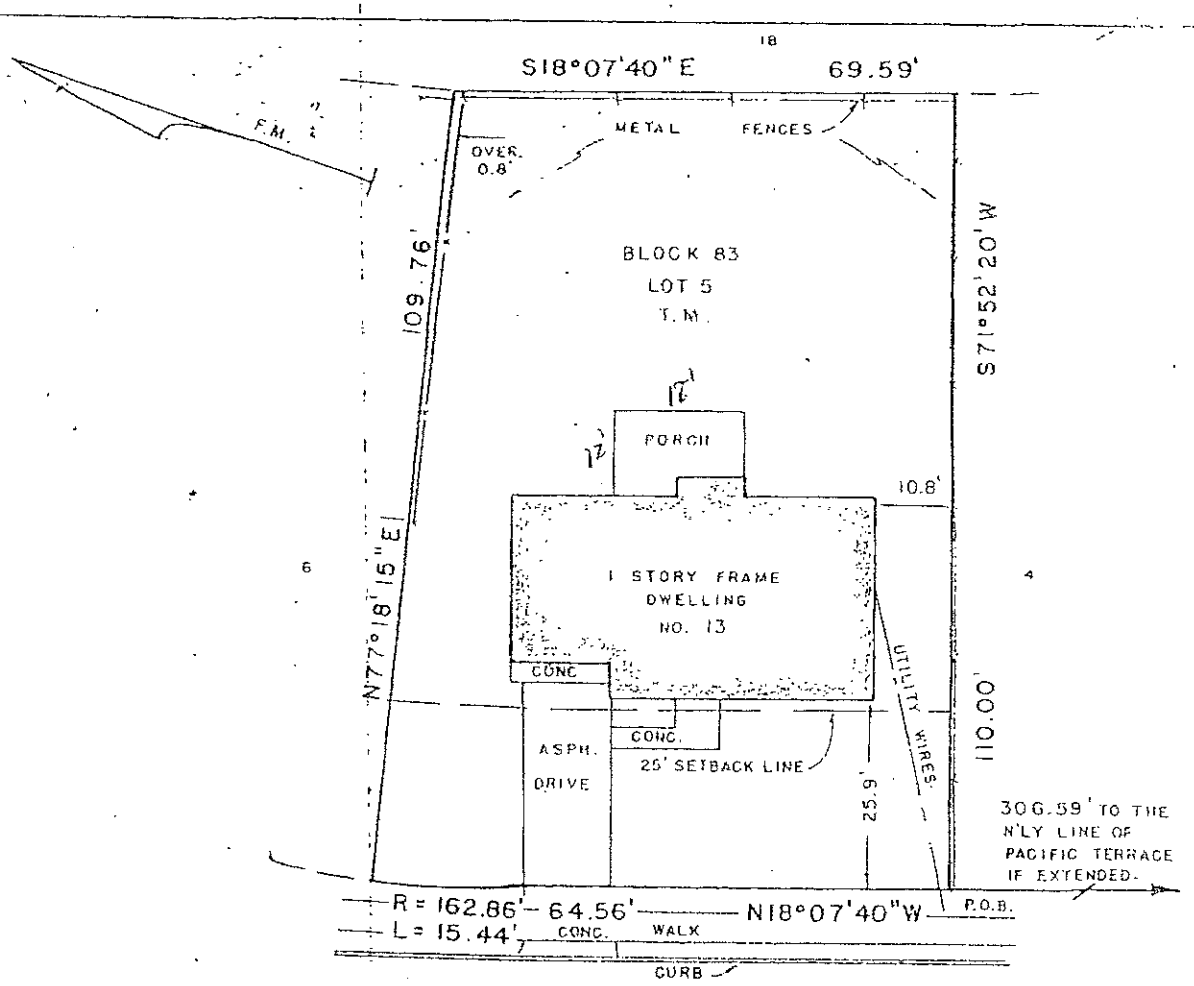
Estimated cost of work $ 3,000.00

Zoning Permit Fee $ 20.00

Signature of Applicant or Agent

NOTES:

Gregory F. Matyak - Zoning Officer



MONTEREY (50') DRIVE

CERTIFIED TO: DOLORES A. BOCIAN, SINGLE, CENLAR FEDERAL SAVINGS BANK ITS SUCCESSORS AND/OR ASSIGNS AS THEIR INTEREST MAY APPEAR, LAWYERS TITLE INSURANCE CORPORATION # 08-58697 AND HELANE KIRNEES, ESQ. LASSER, HOCHMAN, MARCUS, GURYAN & KUSHIN, ERQS.

BEING KNOWN AS LOT 5, BLOCK R ON "SUBDIVISION PLAT WOODLAND PARK, SEC. 9, TOWNSHIP OF RARITAN, MONMOUTH COUNTY, N.J., AND FILED IN THE MONMOUTH COUNTY CLERK'S OFFICE ON JULY 1, 1958 IN CASE NO. 66-17.

SURVEY OF PROPERTY

TOWNSHIP OF HAZLET MONMOUTH COUNTY N.J.
SCALE 1"=20' FEB. 21, 1990

This is a location Survey. Property corners were not staked.

OFFSET DIMENSIONS FROM STRUCTURES TO PROPERTY LINES SHOWN HEREON ARE NOT TO BE USED FOR ESTABLISHING PROPERTY LINES.

This certification is made only to named parties for purchase and/or mortgage of herein delineated property by named purchaser. No responsibility or liability is assumed by Surveyor for use of survey for any other purpose including, but not limited to, use of survey for survey affidavit, resale of property, or to any other person not listed in certification, either directly or indirectly.

LIC. NO. 15106

WALTER J. PARTINGTON
LICENSED LAND SURVEYOR
SPRING LAKE HEIGHTS N.J.
POINT PLEASANT BEACH N.J.

HAZLET 47
APPROVED BY HAZLET
TOWNSHIP ZONING OFFICER
THIS 26 DAY OF [illegible] 19 91

Hazlet Township

Permits without a Jacket

HAZLET TOWNSHIP
CONSTRUCTION DEPT.
319 MIDDLE ROAD
HAZLET, NEW JERSEY 07730

APPLICATION FOR CERTIFICATE

Dasp 2/28/96
date
check 70 cash
amount # 2994 dep
DATE ISSUED

Block 83 Lot 5
Subdivision
Notice No. CCO 3284

IDENTIFICATION

OWNER:
Name Mae DeRocker
Address 13 Monterey Drive
Town/State/Zip Hazlet NJ 07730

BUYER
NAME Dolores A Bocian
Address 199 Holland Road
Middletown NJ. 07748

ACTION

☐ CERTIFICATE OF OCCUPANCY
☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF CONTINUED OCCUPANCY
☐ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP: _____ Previous _____ Current

ANY CHANGE IN OWNERSHIP OR TENANT A NEW CERTIFICATE MUST BE APPLIED FOR.

BEFORE ISSUANCE OF A CERTIFICATE, SELLER OR AGENT MUST RETURN THE RECYCLE BUCKETS TO THE ROAD DEPT AT LEOCADIA COURT AND RETURN RECEIPT TO THIS DEPARTMENT.

CERTIFICATE/APPLICATION IS GOOD FOR 6 MONTHS

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

SIGNED: Mae DeRocker
OWNER/AGENT
☑ Owner
☐ Agent

U.C.C. Form F-270 (8/83)

approved: Eugene D. Balestrieri 2/28/90

HAZLET TOWNSHIP
CONSTRUCTION DEPT.
319 MIDDLE ROAD
HAZLET, NEW JERSEY 07730

NEW JERSEY UNIFORM CONSTRUCTION CODE

ELECTRICAL SUBCODE
TECHNICAL SECTION

PERMIT NO. _____
DATE ISSUED _____
REVISION DATE _____
Block _____ Lot _____
Subdivision _____

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner _____
Address _____
_____
Tel. (___) _____
Work Site Address _____
_____

Contractor _____
Address _____
_____
Tel. (___) _____
Lic.No./Bus. Permit. _____
Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

_____
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee
	Switching Outlets	$		H.V.A.C. Equipment	$
	Lighting Outlets			Switching Devices	
	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric				
	Heating, Electric				
	Switches				
	Lighting Fixtures			Other	
	Receptacles			Other	
	Bonding, Pool/Vault			Other	
	Service/Feeders			Other	
	COLUMN 1	$		COLUMN 2	$

Fee	
COLUMN 1	$
COLUMN 2	
SUBTOTAL	$
Minimum Electrical Fee (If applicable)	$
Total Electrical Fee *(Greater of Minimum or Subtotal)*	$

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed
Service: _____ Amps _____ Phase _____ System Type
_____ Wire _____ Volts _____ Wiring Method
Total No. of Meters: _____
Estimated Cost of Electrical Work: $ _____

D. COMMENTS

Electrical wiring adequate
2/28/90 EJB

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION – ELECTRICAL

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: _____

Inspected By: _____

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Rough				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other _____				

CUT-IN

	Date Issued	Expiration Date
Temporary Cut-in-Card		
Temporary Cut-in-Card		
Final Cut-in-Card		

Monterey

PLEASE REPLY TO: Department of Public Works
39 Leocadia Court
Hazlet, New Jersey 07730

C of O Release:

TO: MR. E. BALESTRIERE
319 Middle Road
Hazlet, New Jersey 07730

Department: Building Inspector

Recycle Buckets

Date Returned: 2/21/90

Owners Name: Mal DeROCKER

Address: 13 Monterey Dr.

No. of Buckets Returned: 4

No. of Buckets Missing: 0

Amount Paid for Missing Buckets: 0

Received By: [signature]

New Owners: _____

Signature: _____

Date Received Buckets: _____

HAZLET | Land Desc: 75X109 IRR .1877 AC | Owners Name: SCHROEDER, KELLY | Land: 208,800
Block: 83 | Bldg Desc: 1S-VS-R-1AG-1OP | Street Address: 13 MONTEREY DRIVE | Impr: 85,600 | Reval Date: 2019/10/01
Lot: 5 | Addl Lots: MALIBU RANCH MODEL | City & State: HAZLET, NJ | Zip: 07730 | Total: 294,400 | Map: 45
Qual: | Acreage: 0.188 | Class: 2 | Property Location: 13 MONTEREY DRIVE | Exempt: | Seq#: 1618 (#1 of 1)

SALES HISTORY

Grantor	Date	Book/Page	Price	Nu#
SCHROEDER, EDWARD & CASSIE	11/13/07	8689 /3196	260000	
BOCIAN, DOLORES A.	07/31/01	8043 /7842	189900	
	06/09/93	05225/00139	-1	
	03/07/90	04989/00753	130000	

ASSESSMENT HISTORY

Year	Land	Impr	Total
2012	158800	80900	239700
2013	133800	77700	211500
2015	169800	81500	251300

BUILDING PERMITS/REMARKS

Date	Work Description	Amount	Compl.

LAND CALCULATIONS

Frt	Eff D	Back L	Tri	Dpf	FFF	Dep	Reason	Value
76	109			1.02		1.00		38760
1	LOT(S)			1.00		1.00		170000

Neigh: FS10
VCS: FS10 | Front Ft Value: 500
Zone: R70 | Acre Value:
Min Front: 70 | Lot Value: 170000
Std Depth: 100 | Land Value: 208,800

SITE INFORMATION

Road:	PAVED	Util:	SEW/WATER
Curbs:	YES	Gas:	YES
Sidewalk:	YES	Elec:	YES
Loc:		Topo:	LEVEL

STAFF CONTROL

Info By:	OWNER	Date:	03/30/18
Visits:	2	Collector:	18
Old B:		Prtd:	08/31/20
Old L:		Card:	M KF

BUILDING INFORMATION

Class:	16	Roof Type:	GABLE
Age/Eff Age:	55 / 35 (Y)	Roof Material:	SHINGLE
Exterior Walls:	ALUM/VINYL	Room Count:	Total Rooms5 Bed Rooms: 3
Style:	RANCH	Row/End:	N.A.
Story Height:	ONE STORY	Conversion:	
Exterior Condition:	NORMAL	Number of Units:	1
Interior Condition:	NORMAL	Heat Source:	GAS
Foundation:	CONCRETE SLAB	Livable Area:	1188 SF

DEPRECIATION

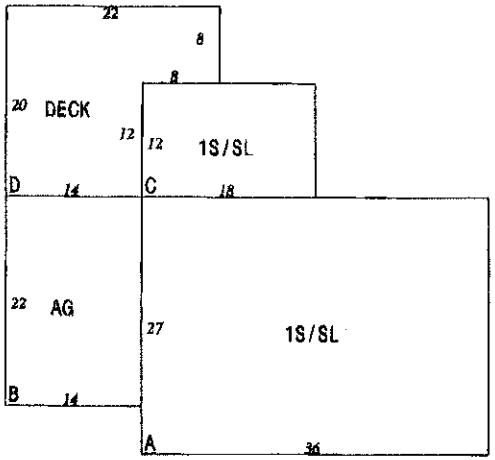
Physical:	39 %	Auto:	Y
Func Obs:	10%	Over Imp:	%
Econ Obs:	%	Under Imp:	%
		Final Net:	0.55

Baths: M: A: 1 O:
Kitchens: M: A: 1 O:

NOTES

[FWT 1965]

BUILDING SKETCH



A:	1S/SL	cd27r36	972
B:	AG	l14cd22r14	308
C:	1S/SL	u12cd12r18	216
D:	DECK	u20l14cd20r14u12r8u8l22	344
E:			0
F:			0
G:			0
H:			0
I:		M:	
J:		N:	
K:		O:	
L:		P:	

Scale: 20

RESIDENTIAL COST APPROACH

Basement	Area	Rate	Const	Q/F	Mult	Value
Main Bldg						
FIRST STORY	1188 x	48.940	+22704	x1.00	x1.00=	80845
CONC. SLAB	1188 x	-1.110	+-1104	x1.00	x1.00=	-2423
Heat/AC						
FORCED HOT AIR	1188 x	2.380	+ 960	x1.00	x1.00=	3787
AC (COMB DUCTS)	1188 x	0.870	+ 2160	x1.00	x1.00=	3194
Plumbing						
3 FIXTURE BATH	1- 2 x	2595.000	+ 0	x1.00	x1.00=	-2595
2 FIXTURE BATH	0- 1 x	1895.000	+ 0	x1.00	x1.00=	-1895
Fireplace						
Attic						
Deck/Patio						
DECK	344 x	5.203	+ 203	x1.00	x1.00=	1993
Garage						
ATTACHED GARAGE	308 x	14.570	+ 2544	x1.00	x1.00=	7032

Base Cost: 89938 | CCF: 1.73 | Cost New: 155593
Net Cond: 0.55 | Bldg Value: 85576

Detached Items:
SHED 1STY 32 x 0.001 + 0 x1.00 x0.25 x1.73= 0

Land: 208,800 | Impr: 85,600 | Total: 294,400