



Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

***This File Contains Personal Identifiable
Information of Private Citizen(s).***

Certain information contained in this file is ***Exempt from Release*** under the Open Public Records Act (OPRA) (Public Law 2001, CHAPTER 404 (N.J.S.A. 47:1A-1 et seq.)) and Executive Orders issued by the Governor of New Jersey. The following information ***MUST*** be redacted prior to release:

- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson", is written over a horizontal line.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020

BLOCK 701.34

LOT 4

QUALIFICATION CODE

ADDRESS (SITE)

18 Parkway Dr.

PERMIT NO.

20-0932



CONSTRUCTION PERMIT APPLICATION

C-20-001100

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

I. IDENTIFICATION

1. Proposed Work Site at: 18 Parkway Dr.

2. Name of Owner in Fee: Jerome & Lauren Dorn

e-mail: [redacted]

Address: 10 Parkway Dr. Brick 08723

street municipality zip code

3. Ownership in Fee: Public ☐ Private ☒

4. Principal Contractor: Decks By Ryan, LLC Tel. 908-357-1789

Address: 39 Union Ave Freehold, NJ 07728 e-mail: Ryan.the.deckguy@gmail.com

License No. OR, if new home, Builder Reg. No. 13VH10574000 Exp. Date 3/31/21

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 83-3704572 FAX: _____

5. Architect or Engineer _____ Contact _____

Address: _____ e-mail: _____

Tel. _____ FAX: _____

6. Responsible Person in Charge once Work has Begun Ryan Lin

Tel. 908-357-1789 FAX: _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$	255	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$	195	
9. State Permit Surcharge Fee			
10. Subtotal	\$	50	
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$	245	

VI. BUILDING/SITE CHARACTERISTICS

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. Max. Live Load _____

7. Max. Occupancy Load _____

8. If Industrialized Building: State Approved _____ HUD _____

9. Total Land Area Disturbed _____ sq. ft.

10. Flood Hazard Zone _____

11. Base Flood Elevation _____ ft.

12. Wetlands yes _____ no _____

(office use only)

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)

- ☐ Building
- ☐ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
						Approval	Rejection

TOTAL COST

\$0

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group, Proposed: Select Group
3. Change in Use Group, Indicate Present: Select Group
4. No. of dwelling units: Total Units Income-restricted
- Gained, Sale _____
- Gained, Rental _____
- Lost, Sale _____
- Lost, Rental _____

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group, Proposed: Select Group
3. Change in Use Group, Indicate Present: Select Group

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

D. Construct. Classification: Present _____

Proposed _____

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. ☐ Refrigeration Systems
4. ☐ Cross-Connections/Backflow Preventers
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Swimming Pools, Spas and Hot Tubs
7. ☐ Fire Alarm
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Fire Alarm

RECEIVED

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(f)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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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

Signature

[Handwritten Signature]

Date

3/27/2020

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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

Decks by Ryan, LLC

Address

39 Union Ave, Freehold, NJ 07728

Telephone

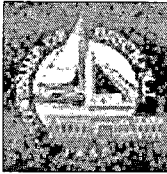
908-302-1789

Signature

[Handwritten Signature]

- III. ☐ LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

- IV. ☐ HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 7/27/2020
Control Number C-20-001100
Permit Number 20-0937
Permit Issue Date 5/14/2020
Certificate Number 20-0937

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 18 PARKWAY DR. Brick Township, NJ Block: 701.34 Lot: 4 Qual: _____
Owner in Fee: DEAN, LAUREN
Owner Address: 18 PARKWAY DR BRICK NJ 08723
Telephone: [REDACTED]
Contractor DECKS BY RYAN LLC
Address 39 UNION AVE FREEHOLD NJ 07728
Telephone: (908) 307-1789 Fax: _____ Federal Emp. Number: 833704572
License Number or Builders Registration Number: _____

Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: DECK

Certificate Comments:

☐ **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.

☒ **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.

☐ **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.

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than _____ or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: _____
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ **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 _____

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: _____ or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: _____
Conditions to be met:

Fee: \$0.00

Check Number: _____

Collected By: _____

Construction Official

Date Printed: 7/27/2020

U.C.C. F260 (rev. 08/05)

Page 1



Brick Township
401 Chambers Bridge Rd.
Brick, NJ 08723
(732) 262-1041

Date Issued:

Application Number: 5/14/20
ZA-20-00381

Application Date: 4/15/2020

Project Number:

Permit Number: ZP-20-00451

Fee:

\$50.00

Zoning Permit

Worksite **18 PARKWAY DR.**
Location: **Brick Township, NJ 08723**

Owner: **LOUIS, LAUREN**
Address: **18 PARKWAY DR**
BRICK, NJ 08723

Applicant: **LOUIS, LAUREN**
Address: **18 PARKWAY DR**
BRICK, NJ 08723

Block: 701.34 Lot: 4 Qualifier: _____ Zone: R-7.5

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Present Use: Single-Family Residential

☐ Non Conforming Use

☐ Non Conforming Structure

Proposed Use: Single-Family Residential

Work Description:

Deck/Porch, Above Ground Pool - Install an Above Ground Pool with 8' X 10' detached deck.

The pool, pool equipment, and deck must be setback at least 25' from the front property line, and 5' from the side and rear property line.

Additional Zoning Permit is required for additional work.

Application Approved Date: 4/17/2020

Upon review it was determined that the Zoning Permit:

☒ Permitted by Ordinance

☐ Permitted by Variance approved on: _____

☐ Approved with Conditions

☐ Valid Nonconforming Use/Structure is established by

☐ Zoning Board of Adjustment

☐ Zoning Officer

Christopher J. Romano, Zoning Officer

4/17/2020

Date

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK _____

PERMIT # _____

BLOCK 701.34 LOT 4 ADDRESS 18 Parkway

IDENTIFICATION:

1. WORK SITE ADDRESS 18 Parkway Dr

2. APPLICANT Dean

3. NAME OF OWNER IN FEE Dean

ADDRESS 18 Parkway Dr

PHONE [REDACTED] EMAIL _____

4. PRINCIPAL CONTRACTOR Hoone and

ADDRESS _____

PHONE _____ EMAIL _____

5. ARCHITECT OR ENGINEER _____

ADDRESS _____

PHONE _____ EMAIL _____

6. RESPONSIBLE PERSON FOR WORK _____

ADDRESS _____

PHONE _____ EMAIL _____

PROJECT DESCRIPTION:

☐ GRADING/CLEARING

☐ ROAD OPENING

☐ SOIL REMOVAL / FILL

☐ RETAINING WALL

☐ POOL

☐ BULKHEAD / DOCK

☐ DWELLING

☐ TREE REMOVAL

☐ COMMERCIAL SITE MAINTENANCE

☐ DESCRIPTION Dock

FEE SUMMARY:

APPLICATION FEE \$ _____

REVIEW FEE \$ _____

INSPECTION FEE \$ _____

OTHER \$ _____

BOND(S) \$ _____

TOTAL \$ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS _____

DRAINAGE EASEMENTS _____

UTILITY EASEMENTS _____

CONSERVATION EASEMENTS _____

FEMA REQUIREMENTS _____

D.E.P. PERMITS _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER _____

APPROVED DATE _____

ENGINEERING REVIEW:

DATE RECEIVED _____ DATE REJECTED _____ DATE APPROVED _____ INITIALS _____

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Signature

Date

3/27/2020

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☒ Check if contractor.

Agent Name

Decks by Ryan, LLC Ryan Ly

Address

39 Union Ave, Freehold, NJ 07728

Telephone

908-302-1789

Signature

III. ☐ LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ☐ HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

FENCE FENCE FENCE FENCE FENCE FENCE FENCE

Lauren Dean
 18 Parkway Dr.
 Brick, NJ 08723

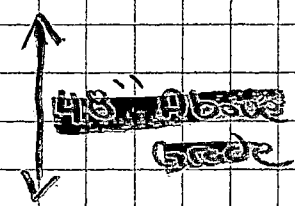
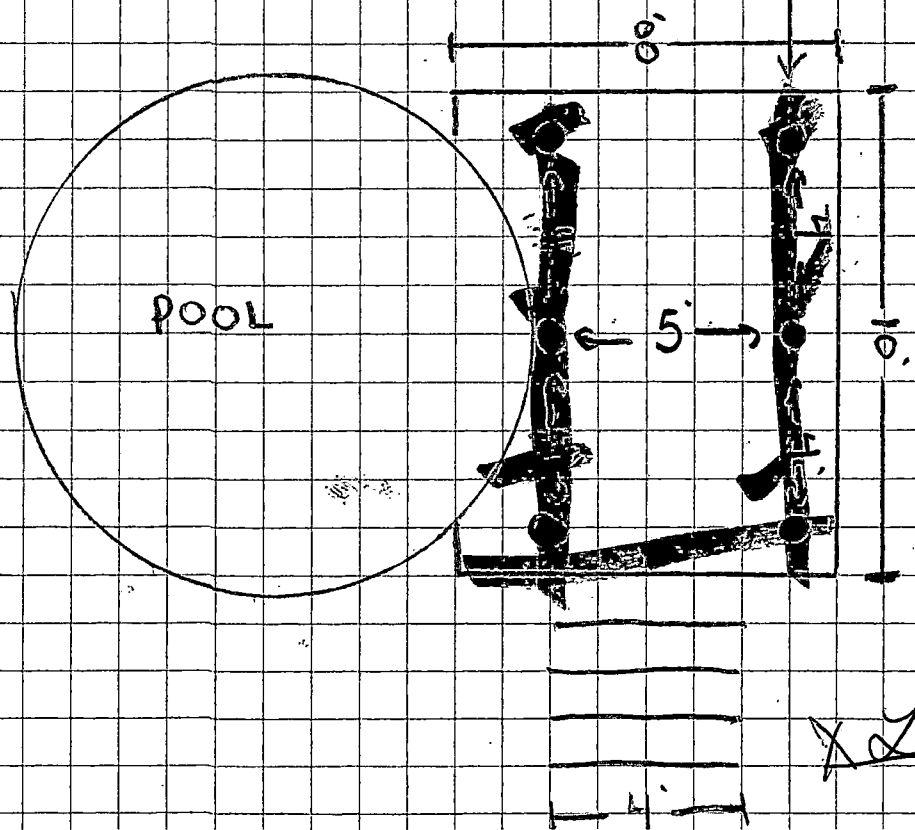
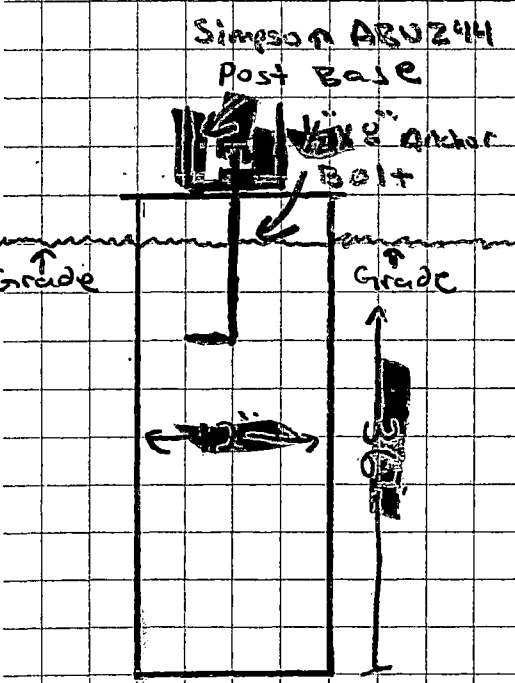
~~Pool needs to be permitted as per attached requirements~~

Footing
Detail

Footing
Locations

TOWNSHIP OF BRICK

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode		
Plumbing Subcode		
Fire Subcode		
Electrical Subcode		
Plan Reviewer		
Plans Released		
Construction Official		



X Lauren Dean

2

Commissioner of the
State of New York
Office of the
Department of
Social Services
Albany, New York
12242-0001
12/1/77
TOWNSHIP OF BRICK

FENCE FENCE FENCE FENCE FENCE FENCE

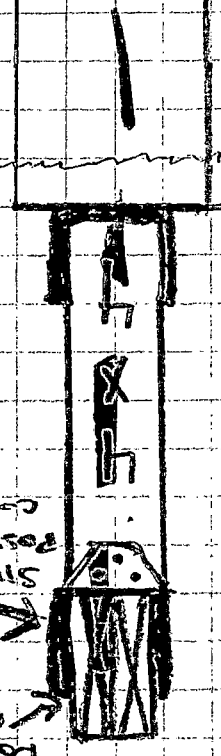
Lauren Dean
18 Parkway Dr.
Brick, NJ 08723

Post to Girder Detail

Double 2x8
Girders

Symfony

Post to beam
connector



Girder Joint Location

13

Double 2x8 Girders

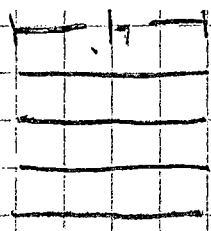
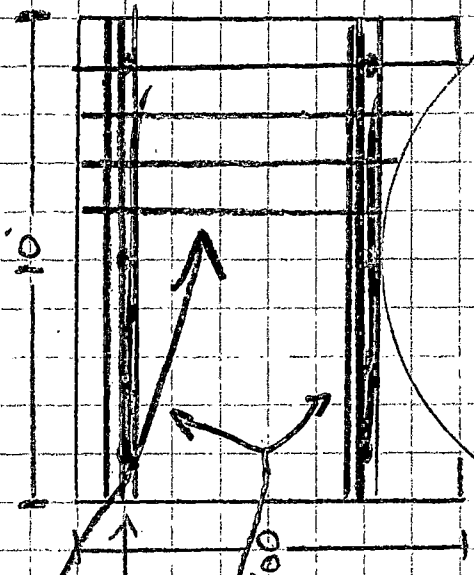
2x8 Joists @ 16" O.C.

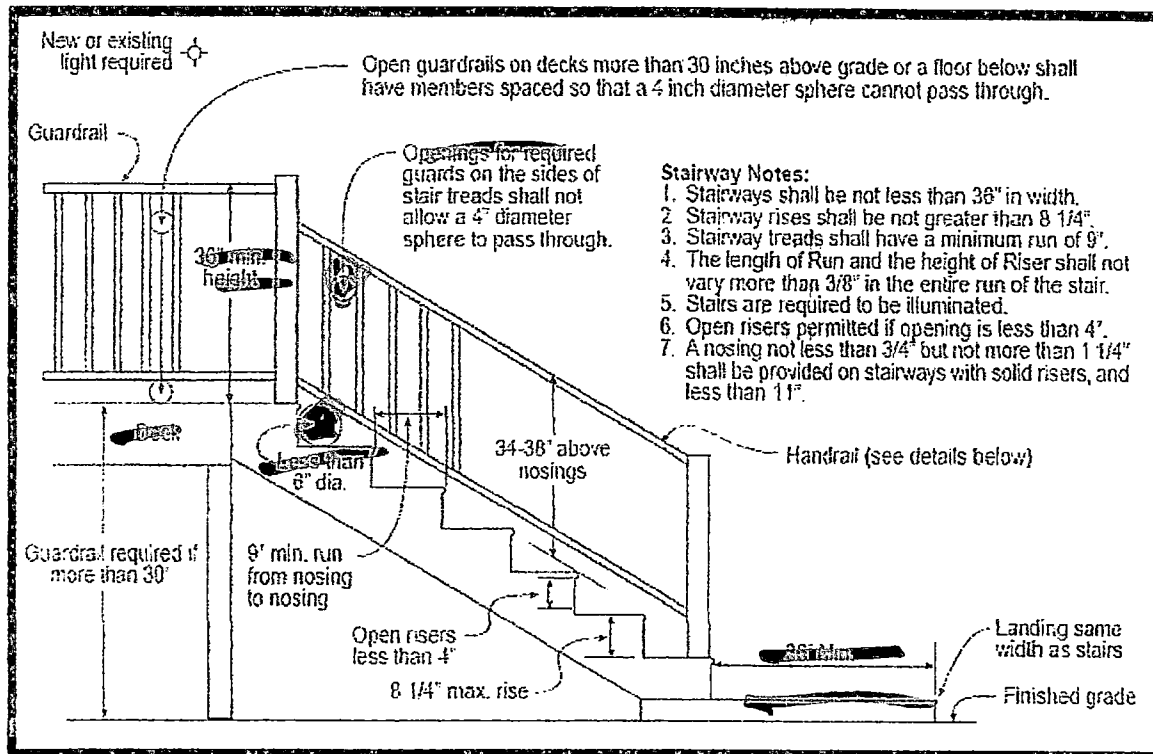
Throughout

48" Above
Grade



10





THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Home Improvement Contractors

HAS REGISTERED

DECKS BY RYAN LLC
Ryan Lin
39 Union Ave
Freehold NJ 07728

FOR PRACTICE IN NEW JERSEY AS A(N): **Home Improvement Contractor**

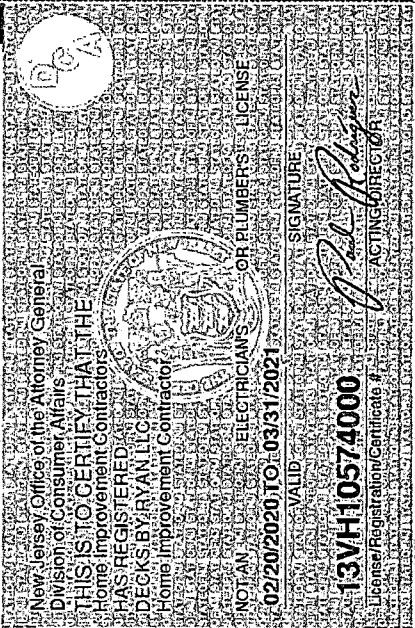
02/20/2020 TO 03/31/2021
VALID

13VH10574000
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

Paul Rodriguez

ACTING DIRECTOR



PLEASE DETACH HERE
IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Home Improvement Contractors
P.O. Box 45016
Newark, NJ 07101

PLEASE DETACH HERE



CONSTRUCTION PERMIT

Date Issued 4/15/20
Control # C-20-001100
Permit # _____

IDENTIFICATION Block: 701.34 Lot: 4 Qualifier _____
Work Site Location: 18 PARKWAY DR. Brick Township, NJ Contractor DECKS BY RYAN LLC
Address 39 UNION AVE. FREEHOLD NJ 07728
Owner in Fee DEAN, LAUREN
18 PARKWAY DR. BRICK NJ 08723 Telephone: (908) 307-1789
Lic. No. or Bldrs. Reg. No. 13VH10574000
Telephone: _____ Federal Employee. No. 833704572

Is hereby granted permission to perform the following work:

- ☒ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT (Subchapter 8 only) ☐ OTHER

DESCRIPTION OF WORK:

DECK

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 \$4,500

D. N. Nunnally
Construction Official

4/30/20
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$225
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$9
CO Fee	
Other	\$0
Total	\$234
Check No. <u>17</u>	
Cash	\$0
Credit	\$0
Collected By <u>CW</u>	

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 the 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 granted.

☒ 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 cases 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, 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.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

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".

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

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

RECEIVING CLERK _____
DATE REC'D _____

ZONING PERMIT APPLICATION

PERMIT # ZP-20-00451
DATE ISSUED 5/14/20

BLOCK: 701.34 LOT: 4 QUALIFIER: _____ SITE ADDRESS: 18 Parkway Dr.

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Jerome & Lauren Dean
COMPLETE ADDRESS: 18 Parkway Dr. Brick, NJ 08723

PHONE # _____ EMAIL _____

2. NAME OF APPLICANT: _____
APPLICANT ADDRESS: Same

PHONE # _____ EMAIL: _____

3. RESPONSIBLE PERSON FOR WORK: Ryan Lin
PHONE # 908-307-1789 FAX# _____

4. SIGNATURE OF APPLICANT: [Signature]

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 150
OTHER: \$ _____
TOTAL: \$ 150

REQUIRED BY APPLICANT

RESIDENTIAL: ☒
COMMERCIAL: _____
EXISTING USE: SFR
PROPOSED USE SFR

BOARD APPROVAL: _____ PB _____ ZB _____
RESOLUTION#: _____
APPROVAL DATE: _____

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: _____ *ADDITION _____ *ALTERATION _____ *PORCH _____ *DECK ☒ 8'x10'

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____
HEIGHT: 48" A.G. (*APPLICABLE)

OTHER _____

DESCRIPTION: Build new 8x10' wood/composite deck around Above ground pool.

ZONING REVIEW:

DATE REVIEWED: 4-17-20 DATE DENIED: _____

DATE APPROVED: 4-17-20 INITIALS: [Signature]

(SEE BACK PAGE)

LAND USE

243 Attachment 5

Township of Brick

SCHEDULE OF AREA, YARD AND BUILDING REQUIREMENTS

Township of Brick

Ocean County, New Jersey

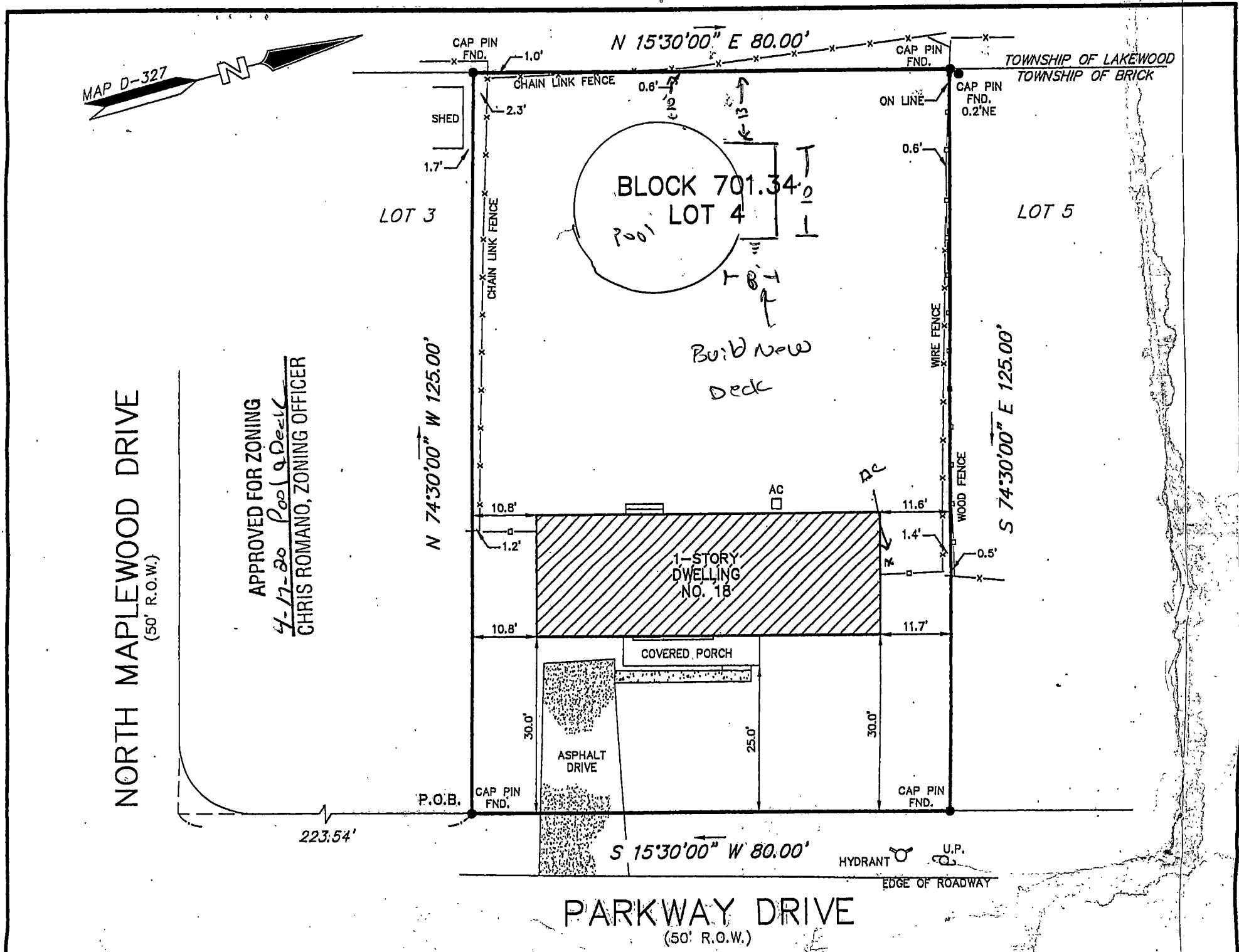
[Amended 6-26-1979 by Ord. No. 354-2B-79; 4-22-1980 by Ord. No. 354-2H-80; 10-14-1980 by Ord. No. 354-2N-80; 9-23-1980 by Ord. No. 354-1B-80; 8-25-83 by Ord. No. 354-2SS-83; 11-5-1984 by Ord. No. 354-2AAA-84; 11-5-1984 by Ord. No. 354-2CCC-84; 6-24-1986 by Ord. No. 354-2WW-86; 9-13-1988 by Ord. No. 354-2TTT-88; 9-27-1988 by Ord. No. 354-2XXX-88; 9-12-2000 by Ord. No. 354-2EE-00; 5-9-2000 by Ord. No. 354-2Z-00; 3-26-2002 by Ord. No. 354-2C-02; 11-26-2002 by Ord. No. 354-2L-02; 3-25-2003 by Ord. No. 354-2D-03; 6-13-2006 by Ord. No. 19-06]

Zone	Minimum Lot Size						Minimum Required Yard Depth						Maximum Lot Coverage by Building	Maximum Building Height				Minimum Floor/ Building Area (square feet) 2 stories/1 story	Maximum Allowable Impervious Coverage	
	Interior Lots			Corner Lots			Principal Building				Accessory Building			Maximum Building Height						
	Area (square feet)	Width (feet)	Depth (feet)	Area (square feet)	Width (feet)	Depth (feet)	Front Yard (feet)	Side Yard, Each (feet)	Both Sides Combined (feet)	Rear Yard (feet)	Side Yard (feet)	Rear Yard ¹ (feet)		Stories	Eaves (feet)	Foot	Ridge (feet)			
R-R	40,000	150	150	40,000	150	150	50	25			30	25	25	25%	-	25			-	
RR-2	See § 245-90.																			
RR-3	See § 245-103.																			
R-20	20,000	100	125	25,000	100	125	40	15	-		40	10	10	25%	-	25	35	38.5	-	
R-15	15,000	100	115	17,250	100	115	35	12	-		35	10	10	25%	-	25	35	38.5	-	
R-10	10,000	90	100	10,500	100	100	30	6	20		20	5	5	30%	-	25	35	38.5	-	
R-7.5	7,500	75	90	9,000	75	90	25	6	15		15	5	5	30%	-	25	35	38.5	-	
R-5	5,000	50	75	6,000	50	75	20	5	12		15	5	5	35%	-	25	35	38.5	-	
O-P	15,000	100	150	15,000	100	150	50	10	-		50	20	50	35% ²	2	-	35	38.5	1,500	70%
B-1	10,000	100	90	12,500	100	125	30	10	-		20	10	20	30% ²	2	-	35	38.5	1,000	60%
B-2	20,000	125	125	20,000	125	125	50	10	-		50	10	50	30% ²	2	-	35	38.5	2,000	65%
B-3	2 acres	200	200	2 acres	200	200	75	30	-		50	20	50	25% ²	-	-	35	38.5	2,000	65%
B-4	5 acres	300	300	-	-	-	100	50(150 ¹)	-		100(150 ¹)	20	50	25%	3	-	35	38.5	30,000	70%
M-1	5 acres	300	300	5 acres	300	300	100	50	-		150	75	150	30% ²	-	-	35	38.5	5,000	65%
R-M	25 acres	350	200	-	-	-	50	50	-		30	30	30	20%	-	25	35	38.5	-	65%
O-P-T	40,000	150	150	40,000	150	150	50	20	-		50	20	50	25% ²	2	-	35	38.5	2,000	50%
H-S	See § 245-261.																			

NOTES:

- ¹ If adjacent to residential zone or use.
- ² The maximum lot coverage shall refer only to that percentage of an affected lot which is suitable for building.
- ³ For rear yard setback requirements for accessory buildings on waterfront property, see § 245-10D.

FOR REFERENCE ONLY



THIS SURVEY IS CERTIFIED TO:

- STEVEN D. EWING and STEPHANIE LYNN EWING
- FIRST AMERICAN TITLE INSURANCE COMPANY
- ARBOR TITLE SERVICES, L.L.C. (10ARB-1710)
- WELLS FARGO BANK, N.A., Its Successors And/Or Assigns
- HENRY CHUDZIK, Jr. ESQUIRE

DEED DESCRIPTION:

BEING KNOWN AND DESIGNATED AS LOT 4 IN BLOCK 701-D12 AS SHOWN ON A MAP ENTITLED, SUBDIVISION PLAT OF BIRCHWOOD PARK SECTION D, BRICK TOWNSHIP, OCEAN COUNTY, N.J. WHICH MAP WAS FILED IN OCEAN COUNTY CLERK'S OFFICE ON AUGUST 28, 1957 AS MAP D-327.

NOTES:

1. ALSO KNOWN AS LOT 4 IN BLOCK 701.34 AS SHOWN ON THE OFFICIAL TAX MAPS OF THE TOWNSHIP OF BRICK, OCEAN COUNTY, NEW JERSEY, SHEET No. 41.03.
2. UNDERGROUND UTILITIES NOT LOCATED BY THIS SURVEY.

SURVEY OF PROPERTY

LOT 4 BLOCK 701.34

TOWNSHIP OF BRICK

OCEAN COUNTY

NEW JERSEY

Charles Surmonte P.E. & P.L.S.
New Jersey Professional Engineer and Land Surveyor
License No. 35885

301 Main Street, 2nd Floor
Allentown, New Jersey, 07711
Phone 732-660-0606
Fax 732-660-0404

NO ATTEMPT WAS MADE TO DETERMINE IF ANY PORTION OF THE PROPERTY IS CLAIMED BY THE STATE OF NEW JERSEY AS TIDELANDS, ENVIRONMENTALLY SENSITIVE AREAS, IF ANY ARE NOT LOCATED BY THIS SURVEY.

THIS SURVEY IS SUBJECT TO CONDITIONS WHICH MIGHT BE DISCLOSED BY AN ACCURATE TITLE SEARCH.

OFFSETS AS SHOWN HEREON ARE NOT TO BE USED TO ESTABLISH PROPERTY LINES.

PROJECT No.

10-1277

DATE

01-31-11

SCALE:

1"=20'

SHEET:

1 OF 1

[illegible]