

TBI 68

BLOCK

185

LOT

40.25

ADDRESS(site)

37 NICKLAUS LN.

PERMIT NO

7694

NORTHAMPTON - NEW ENGLAND
900 EXPANDED KITCHEN
060 MASTER BATH W/ WIC
041 COVERED PORCH



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 37 NICKLAWS LN.
2. Name of Owner in Fee: ESTATES @ SHORE OAKS LP Tel. (205) 938-9000
Address 3103 PHILMONT AVE, HUNTINGDON VALLEY PA
street municipality zip code
3. Ownership in Fee: Public ☒ Private ☐
4. Principal Contractor: ESTATES @ SHORE OAKS LP Tel. (908) 938-5588
Address 303 PHILMONT AVE, HUNTINGDON VALLEY PA
License No. OR. if new home, Builder Reg. No. 022554 Exp. Date _____
Federal Emp. No. [REDACTED] Social Security No. _____
5. Architect or Engineer TOLL ARCHITECTURE Tel. (908) 938-3888
Address MOORESVILLE PA
6. Responsible Person
In Charge of Work WILLIAM C. REILLY Tel. (908) 938-5588

II. PROPOSED WORK

1. ☐ Minor work
(single trade)
 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**

Est. Cost

OPTIONAL (for office use only)[illegible]

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
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 389.73		
2. Electrical	100 -		
3. Plumbing	330 =		
4. Fire Protection	30		
5. Elevator Devices			
6. Subtotal	\$ 869.73		
7. Less 20% for State Plan Review	(173.95)		
8. Subtotal	\$		
9. DCA Training Fee	6428		
10. Subtotal	\$		
11. Cert. of Occupancy	20		
12. Other Survey	10 -		
13. TOTAL	\$ 795.06		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories 2
2. Height of Structure _____ ft.
3. Area—Largest Floor 1152 sq. ft.
4. Building Area—All Floors 2170 sq. ft.
5. Volume of Structure 43,303 cu. ft.
6. Construction Classification 5-B
7. Total Land Area Disturbed 2500 sq. ft.
8. Flood Hazard Zone -
9. Base Flood Elevation - ft.
10. Wetlands yes _____ sq. ft.
 no ✓
11. Fire Grading _____
12. Max. Live Load 40 PSI
13. Max. Occupancy Load 40 PSI

(office use only)

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

After Construction _____

Net gain or loss _____

B. NON-RESIDENTIAL

- 1. State Specific Use:**

- 2. Use Group:**

3. Change in Use Group.
Indicate Former:

LDS HW-B 10602995

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 Builder 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.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 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 WILLIAM C. BETLEY

Address 6 SHORE OAKS DR

FARMINGDALE

Telephone (208) 938-5588

Signature Henry J. Myzette WCR Date 7/26/93

OFFICE DATE RECEIVED: _____

VII. 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									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ NJ Department of Community Affairs									
☐ NJ Department of Transportation									
☐ NJ Department of Environmental Protect.									
☐ Utility Dig No.									
☐									
☐									

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

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	
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

Date Issued **12-21-93**
Control #
Permit # **7694**

IDENTIFICATION

Block 185 Lot 40.25
Work Site Location 37 Nicklaus Lane, Estates @
Shore Oaks, Howell
Owner in Fee Estates @ Shore Oaks
Address 3103 Philmont Avenue
Huntingdon Valley, PA
Tele. (215) 938-8000
Contractor Same
Address _____
Tele. (_____) _____
Lic. No. or Bldrs. Reg. No. 022554
Federal Emp. No. _____
or Social Security No. _____

Home Warranty No. _____
Use Group R3
Maximum Live Load _____
Description of Work/Use:

Completion and approval of the construction of a
single family dwelling - Model "NORTHAMPTON"
w/ 2-car garage and basement.

(43,303 c.f.)

Type of Warranty Plan: [] State [] Private
Construction Classification _____
Maximum Occupancy Load _____

CERTIFICATE OF OCCUPANCY/APPROVAL

☒ **CERTIFICATE OF OCCUPANCY**

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

☐ **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 OCCUPANCY**

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate:

Est. Cost: \$120,000.00

CONSTRUCTION OFFICIAL

Fee \$ _____
Paid [] Check No. _____
Collected by: mas

NEW DEVELOPMENT/COMMERCIAL/NEW CONSTRUCTION
Building Dept. Check List/Certificate of Occupancy
Prior to issuance of Certificate of Occupancy

Final Building Inspection 12-17-93
Final Plumbing Inspection 12-17-93
Final Electrical Inspection 12-17-93
Final Fire Inspection 12-17-93

Soil Conservation Approval 12-13-93
MUA/MCBOH/WELL/SEPTIC city
HOW Certificate Date 7-16-93
Final Survey 12-14-93
Engineering Release 12-21-93

COMMERCIAL

Site Plan Fire Lanes/Zones _____
Site Plan Compliance _____
Food Handlers License (if applicable) _____

BLOCK 185 LOT 40.25
NAME 37 Nicklaus Ln
DATE ISSUED _____

WATER HAMPTON - NEW ENGLAND TBL 68
800 - EXPANDED KITCHEN
060 - MASTER BATH W/WIC
440 - RETD PORCH



CONSTRUCTION PERMIT

PROTOTYPE

Date Issued 7-28-93
Control #
Permit # 7694

IDENTIFICATION Block 1A5 Lot 40.25

Work Site Location 37 NIKLAUS LN.

Contractor ESTATES @ SHORE OAKS LP

Owner in Fee ESTATES @ SHORE OAKS LP
Address 3103 PHILMONT AVE HUNTINGTON VALLEY PA

Address 3103 PHILMONT AVE

HUNTINGTON VALLEY PA

Tele. (1CF) 938-5588

Tele. (215) 938 6000

Lic. No. or Bldrs. Reg. No. 022554 Exp. Date

Federal Emp. No. [REDACTED]

or Social Security No. [REDACTED]

Is hereby granted permission to perform the following work:

☒ BUILDING ☒ PLUMBING ☐ OTHER
☒ ELECTRICAL ☒ FIRE PROTECTION

DESCRIPTION OF WORK:

CONSTRUCT SINGLE FAMILY DWELLING.
W/3151 MENT 1 CHARGE.
(43,303' CF)

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 \$ 120,000

[Signature]
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	389.73
Plumbing	330.00
Electrical	100.00
Fire Protection	50.00
Other sub-total	869.73
Other -20%	173.95
DCA Training Fee	69.28
Cert. of Occ.	20.00
Other survey	10.00
Total	795.06
Check No.	554729
Cash	
Collected By:	<u>[Signature]</u> 8-3-93

(See reverse side)

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.

NORTHAMPTON-NEW ENGLAND TBI 68

800 EXPANDED KITCHEN
060 MASTER BATH W/WIC
041 COVERED PORCH



Date Received 7-28-93
Date Issued 7-28-93
Control # 7-28-93
Permit # 7694

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

Block 185 Lot 40.25
Work Site Location 37 NICKLAIS LN.
Owner in Fee ESTATES AT SHORE OAKS LP
Address 3103 PHILMONT AVE, HUNTINGDON VALLEY PA
Tele. (215) 938-8000
Contractor ESTATES @ SHORE OAKS LP
Address 3103 PHILMONT AVE, HUNTINGDON VALLEY PA
Tele. (908) 938-5588
Lic. No. or Bldrs. Reg. No. 022554
Federal Emp. No. or Social Security No.

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 Henry J. Kuylenstierna

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

CONSTRUCT SINGLE FAMILY DWELLING.

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	INSPECTIONS
☐ No Plans Req.			Type: <u>N/R</u> Failure <u>8/5/93</u> Approval <u>8-6-93</u> Initial <u>SEP</u>
☐ All ~			Footing <u>8-24-91</u> <u>8-24-91</u>
☐ Footing			Foundation <u>8-24-91</u> <u>8-24-91</u>
☐ Foundation			Slab <u>8-24-91</u> <u>8-24-91</u>
☐ Frame			Frame <u>8-24-91</u> <u>8-24-91</u>
☐ Other			Insulation <u>8-24-91</u> <u>8-24-91</u>
Joint Plan Review Required:		Finishes:	
☐ Elec. ☐ Plumb. ☐ Fire	Energy		
SUBCODE APPROVAL		Mechanical	
☐ CO ☐ CCO ☐ CA	TCO <u>8/14/93</u> <u>8/14/93</u>		
Date: <u>12-17-93</u>	Other		
Approved By: <u>Jim E. Stoltz</u>	Final		<u>12/17/93</u> <u>RE</u>

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present 5-B Proposed 5-B
No. of Stories 2
Height of Structure Ft.
Area—Largest Floor 1152 Sq. Ft.
Total Bldg. Area/All Floors 2170 Sq. Ft.
Volume of Structure 43303 Cu. Ft.
Total Land Area Disturbed 2500 Sq. Ft.
2500 N/M

Est. Cost of Bldg. Work:
1. New Bldg. \$ 120,000
2. Alteration \$
3. Total (1+2) \$ 120,000

TYPE OF WORK:

- ☒ New Building
- ☐ Addition
- ☐ Alteration
 - ☐ Roofing
 - ☐ Siding
 - ☐ Other 43,303
- ☐ Demolition
- ☐ Miscellaneous
 - ☐ Fence Height
 - ☐ Sign Sq. Ft.
 - ☐ Pool
 - ☐ Elevator
 - ☐ Asbestos Abatement
 - ☐ Other

(Office Use Only)

FEE
\$

Administrative Surcharge \$
Paid ☐ Check # Minimum Fee \$
Collected by: TOTAL FEE \$

AND HAMPTON - NEW ENGLAND TBI 68

800 EXPANDED KITCHEN
160 MASTER BATH W/ WIC
041 COVERED PORCH



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received 7-28-93
Date Issued 7-28-93
Control # 7-28-93
Permit # 7694

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

Block 185 Lot 40.25
Work Site Location 37 NICHOLS LN.

Owner in Fee 1 UNITES AT SHIRT PARTS LP
Address 3103 PHILMONT AVE, HUNTINGDON VALLEY PA

Tele. (215) 138-8000

Contractor SHIRT'S & SHIRTS CHKS LP
Address 3103 PHILMONT AVE, HUNTINGDON VALLEY PA

Tele. (708) 938-5588

Lic. No. or Bldrs. Reg. No. 022554

Federal Emp. No. or Social Security No.

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 Henry J. Mennetto

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

CONSTRUCT SINGLE
FAMILY DWELLING.

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	INSPECTIONS
☐ No Plans Req.			Type: <u>N/R</u> Failure <u>8/5/93</u> Approval <u>8-6-93</u> Initial <u>GEH</u>
☐ All			Footing <u>8-24-91</u> <u>R.H.</u>
☐ Footing			Foundation <u>8-24-91</u> <u>R.H.</u>
☐ Foundation			Slab <u>8-24-91</u> <u>R.H.</u>
☐ Frame			Frame <u>8-24-91</u> <u>R.H.</u>
☐ Other			Insulation <u>12/17/93</u> <u>R.</u>
Joint Plan Review Required:		Finishes:	
☐ Elec.	☐ Plumb.	☐ Fire	Energy
SUBCODE APPROVAL		Mechanical	
☐ CO	☐ CCO	☐ CA	TCO
Date:	<u>7-17-93</u>		Other
Approved By:	<u>[Signature]</u>		Final

B. BUILDING CHARACTERISTICS

Use Group I Present R-3 Proposed R-3
Constr. Class Present 5B Proposed 5B
No. of Stories 2

Height of Structure 11.62 Ft.
Area—Largest Floor 2170 Sq. Ft.
Total Bldg. Area/All Floors 43303 Sq. Ft.
Volume of Structure 2500 Cu. Ft.
Total Land Area Disturbed 2500 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$ 120,000
2. Alteration \$
3. Total (1+2) \$ 120,000

TYPE OF WORK:

- ☒ New Building
- ☐ Addition
- ☐ Alteration
 - ☐ Roofing
 - ☐ Siding
 - ☐ Other 43303
- ☐ Demolition
- ☐ Miscellaneous
 - ☐ Fence Height
 - ☐ Sign Sq. Ft.
 - ☐ Pool
 - ☐ Elevator
 - ☐ Asbestos Abatement
 - ☐ Other

(Office Use Only)

FEE

\$

Administrative Surcharge \$
Paid ☐ Check # Minimum Fee \$
Collected by: TOTAL FEE \$

800 EXPANDED KIT.
060 MASTER BATH W/WIC
041 COVERED PORCH

12-16-93

QFCI - IN BOTH
PANEL
RECT. IN WARE,
LIGHT IN BOTH



**ELECTRICAL
SUBCODE
TECHNICAL SECTION**



Date Received 7-28-93
Date Issued
Control # 7-28-93
Permit # 7694

R-2314698

Block 185 Lot 40.25
Work Site Location 37 NICKLAUS LN.

Owner in Fee ESTATES @ SHORE OAKS LP
Address 3103 PHILMONT AVE, HUNTINGDON VALLEY
PA
Tele. (215) 938 8000
Contractor GROGGE STEER (STEER ELEC. INC)
Address PO BOX 1026
ISLAND HEIGHTS, NJ 08732
Tele. (908) 370 7123
Lic. No. 500M
Federal Emp. No. _____ or Social Security No. _____

[] Reinspection [] Resale [X] Meter Set
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as RESIDENCE Utility Co. JCP&L
Est. Cost of Elec. Work \$ 2800-

PLAN REVIEW:		INSPECTIONS:		Dates (Month/Day)	
☐ No Plans Required		Type:	Failure	Failure	Approval
Joint Plan Review Required:		Rough	_____	_____	9-30-93
☐ Bldg. ☐ Plumb. ☐ Fire		Temporary	_____	_____	_____
☐ Elec. Plans Approved		Constr. Serv.	_____	_____	_____
Date: _____		TCO	_____	_____	_____
Approved by: _____		Other	_____	_____	_____
		Service	_____	_____	10-19-93
		Final	12-16-93	_____	12-17-93
SUBCODE APPROVAL:					
☒ CO ☐ CCO ☐ CA		Temp. Cut-in-Card Date Issued			
Date: 12-17-93		Final Cut-in-Card Date Issued 10-19-93			
Approved by: _____		Line Dept. _____			

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.

☒ Licensed Electrical Contractor ☐ Exempt Applicant

Signature-Contractor Seal

NO.	SIZE	ITEM
<u>47</u>		Fixtures (1)
<u>60</u>		Receptacles (2)
<u>40</u>		Switches (3)
<u>147</u>		Total 1 + 2 + 3
		Range
<u>8</u>	60	Oven(s)
<u>1</u>	<u>6AS</u>	Surface Unit
<u>1</u>	<u>62kW</u>	Dishwasher
		Garbage Disposal
<u>1</u>	<u>6AS</u>	Dryer
<u>2</u>	<u>3000</u>	A/C Unit
<u>1</u>		Burglar Alarms
		Intercoms Panels
<u>9</u>		Smoke Detectors
<u>1</u>	<u>154P</u>	Whirlpool/spa
		Pool Bonding
		Pool Filter Motor
		Pool Lights
<u>1</u>	<u>64S</u>	Water Heater(s)
<u>2</u>	<u>6AS</u>	Central heat:
		oil, gas or elec.
		Baseboard Heat Units
<u>2</u>		Thermostats
		Heat Pump
		Pump(s)
		Motor Control Center/Sub Panels
		Signs
		Light Standards
<u>2</u>	<u>154P</u>	Motors—Fractional H.P.
		Motors—All Others
		Transformers
		Generators
<u>1</u>	<u>200A</u>	Service Entrance
		Other

[illegible]

	Administrative Surcharge	\$ _____
Paid []	Check # _____ Minimum Fee	\$ _____
Collected by: _____	TOTAL FEE	\$ _____

1 White = Applicant Copy

Canary = Office Copy

U.C.C. Form F-120A

3 Pink = Tax Assessor Copy

YAKIM HAITON-NEW ENGLAND TBI 40

800 EXPANDED KIT.

12-16-93

NO MASTER BATH W/ WIC

041 COVERED PORCH

GFCI IN BATH

PANEL

RECEPT. IN BATH

LIGHT IN BATH

ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received

Date Issued

Control #

Permit #

7-28-93

7-28-93

7694

R-2314698

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

Block 1F5 Lot 40.25
Work Site Location 37 DICKINSON LN.Owner in Fee ESTATES W SHORE OAKS LPAddress 2103 PHILMONT AVE HUNTINGDON VALLEY PATele. (215) 938 8000Contractor HORNE STEER (STEER ELEC. INC.)Address PO BOX 1026ISLAND HEIGHTS NJ 08132Tele. (908) 370 7123Lic. No. 50000

Federal Emp. No. _____ or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

☐ Reinspection ☐ Resale ☒ Meter Set☐ Pole/Pad # _____ ☐ Temporary ☐ OtherBuilding Occupied as RESIDENCE Utility Co. OPCLEst. Cost of Elec. Work \$ 2800-

JOB SUMMARY (Office Use Only)

PLAN REVIEW:

☐ No Plans Required

Joint Plan Review Required:

☐ Bldg. ☐ Plumb. ☐ Fire☐ Elec. Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL:

☒ CO ☐ CCO ☐ CADate: 12-17-93Approved by: Vasily Jerge

INSPECTIONS:

Type:

Rough

Temporary

Constr. Serv.

TCO

Other

Service

Final

Dates (Month/Day)

Failure

Failure

Approval

Initial

9-30-93Jerge

10-19-93Jerge12-16-93

12-17-93Jerge

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Line Dept.

10-19-9310-19-93

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.

☒ Licensed Electrical Contractor ☐ Exempt Applicant

Signature-Contractor Seal

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
<u>47</u>		Fixtures (1)
<u>60</u>		Receptacles (2)
<u>40</u>		Switches (3)
<u>147</u>		Total 1 + 2 + 3
		Range
<u>8</u>	<u>64 S</u>	Oven(s)
<u>1</u>	<u>64 S</u>	Surface Unit
<u>1</u>	<u>1.2 KW</u>	Dishwasher
		Garbage Disposal
<u>1</u>	<u>64 S</u>	Dryer
<u>2</u>	<u>3 ON</u>	A/C Unit
<u>1</u>		Burglar Alarms
		Intercoms Panels
<u>6</u>		Smoke Detectors
<u>1</u>	<u>15 IP</u>	Whirlpool/spa
		Pool Bonding
		Pool Filter Motor
		Pool Lights
<u>1</u>	<u>64 S</u>	Water Heater(s)
<u>2</u>	<u>64 S</u>	Central heat:
		oil, gas or elec.
		Baseboard Heat Units
<u>2</u>		Thermostats
		Heat Pump
		Pump(s)
		Motor Control Center/Sub Panels
		Signs
		Light Standards
<u>2</u>	<u>5 1/2</u>	Motors—Fractional H.P.
		Motors—All Others
		Transformers
		Generators
<u>1</u>	<u>200A</u>	Service Entrance
		Other

FEE (Office Use Only)

Administrative Surcharge

\$ _____

Paid ☐ Check # _____ Minimum Fee

\$ _____

Collected by: _____ TOTAL FEE

\$ _____

1 White = Applicant Copy

Canary = Office Copy

U.C.C. Form F-120A

3 Pink = Tax Assessor Copy



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received 1-28-73
Date Issued 7-28-93
Control #
Permit # 7694

Block 185 Lot 40.25
Work Site Location 37 NICKLAUS LN.

Owner in Fee ESTATES @ SHORE OAKS LP
Address 3103 PHILMONT AVE HUNTINGTON VALLEY

Tele. (715) 438 8000

Contractor ESTATE'S @ SHORE OAKS LP
Address 3103 PHILMONT AVE HUNTINGDON VALLEY

Tele. (908) 938-5588

Lic. No. 072 554

Federal Emp. No. _____ or Social Security No. _____

Use Group Present R-3 Proposed R-3
 Constr. Class. Present 5-B Proposed 5B
 Heating Systems ☒ New ☐ Existing
 Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar
☐ Other _____
 Location: BASMENT #
 Total Est. Cost of Fire Prot. Work \$ 500- ☐ Other _____

PLAN REVIEW:		INSPECTIONS:		Dates (Month/Day)	
☐ No Plans Required		Type:	Failure	Failure	Approval
Joint Plan Review Required:					Initial
☐ Bldg.	☐ Plumb.	☐ Elec.	Suppression Test	_____	_____
☐ Fire Plans Approved			Fire Alarm. Test	_____	_____
Date: _____			Smoke Test	_____	_____
Approved by: _____			Mechanical	_____	_____
SUBCODE APPROVAL:			TCO	_____	_____
☐ CO ☒ LCCO ☐ LCCO			Other <u>FRAME</u>	<u>10-19-93</u>	_____
Date: <u>12-17-93</u>			Other <u>FRAME</u>	<u>11-4-93</u>	<u>MA</u>
Approved by: _____			Other _____	_____	_____

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

SIGNATURE

Description of Work

Water Supply Source PUBLIC

Method of Valve Supervision _____

Local Alarm Supervision _____

Central Supervision _____

Proprietary Supervision ✓ A1/H10

Flammable Liquid Storage Tanks () Capacity _____ Fuel _____

Combustible Liquid Storage Tanks () Capacity _____ Fuel _____

L.P.G. Storage Tanks () Capacity _____ Fuel _____

L.N.G. Storage Tanks () Capacity _____ Fuel _____

Number

Wet Sprinkler Heads _____

Dry Sprinkler Heads

TOTAL _____

Smoke Detectors 8

Heat Detectors

TOTAL	8
-------	---

Stand Pipes

Kitchen Hood Exhaust Systems

Pre-Engineered Systems

CO₂ Suppression _____

Halon Suppression _____

Foam Suppression

Dry Chemical	
--------------	--

Wet Chemical

Gas or Oil Fired Appliance 4

OTHER FIREPLACE 1

Administrative Surcharge \$

Paid [] Check # _____ Minimum Fee \$ _____

Collected by _____ TOTAL FEE \$ _____

800 HANDLED KITCHEN
 660 MASTER BATH W/WIC
 041 COVERED PORCH



**FIRE PROTECTION
 SUBCODE
 TECHNICAL SECTION**



Date Received 7-28-93
 Date Issued 7-28-93
 Control # 7694
 Permit # 7694

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

Block 185 Lot 40.25
 Work Site Location 37 NICKLAUS LN.

Owner in Fee STATES R. SHORE OAKS LP
 Address 303 PHILMONT AVE, HUNTINGDON VALLEY PA

Tele. (215) 938 8000
 Contractor STATES R. SHORE OAKS LP
 Address 303 PHILMONT AVE, HUNTINGDON VALLEY PA

Tele. (708) 758-5588
 Lic. No. 022 554
 Federal Emp. No. [REDACTED] or Social Security No. [REDACTED]

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-3 Proposed R-3
 Constr. Class. Present 5B Proposed 5B
 Heating Systems ☒ New ☐ Existing
 Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar
☐ Other [REDACTED]
 Location: 3451 MOUNT F
 Total Est. Cost of Fire Prot. Work \$ 500- ☐ Other [REDACTED]

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS:		Dates (Month/Day)			
☐ No Plans Required		Type:	Failure	Failure	Approval	Initial	
Joint Plan Review Required:							
☐ Bldg.	☐ Plumb.	☐ Elec.	Suppression Test				
☐ Fire Plans Approved			Fire Alarm Test				
Date: _____			Smoke Test				
Approved by: _____			Mechanical				
SUBCODE APPROVAL:			TCO				
☒ CO ☐ VCCO ☐ [REDACTED]			Other <u>FRAME</u>	<u>10-19-93</u>			
Date: <u>10-19-93</u>			Other <u>FRAME</u>	<u>11-4-93</u>			
Approved by: <u>[REDACTED]</u>			Other				

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

Water Supply Source PUBLIC
 Method of Valve Supervision _____
 Local Alarm Supervision _____
 Central Supervision _____
 Proprietary Supervision ✓ WITHIN 1/10 HOME

Flammable Liquid Storage Tanks	() Capacity _____	Fuel _____
Combustible Liquid Storage Tanks	() Capacity _____	Fuel _____
L.P.G. Storage Tanks	() Capacity _____	Fuel _____
L.N.G. Storage Tanks	() Capacity _____	Fuel _____

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	_____	
Dry Sprinkler Heads	_____	
TOTAL	_____	
Smoke Detectors	<u>8</u>	
Heat Detectors	_____	
TOTAL	<u>8</u>	
Stand Pipes	_____	
Kitchen Hood Exhaust Systems	_____	
Pre-Engineered Systems		
CO ₂ Suppression	_____	
Halon Suppression	_____	
Foam Suppression	_____	
Dry Chemical	_____	
Wet Chemical	_____	
Gas or Oil Fired Appliance	<u>4</u>	
OTHER <u>FIREPLACE</u>	<u>1</u>	

Administrative Surcharge \$ _____
 Paid ☐ Check # _____ Minimum Fee \$ _____
 Collected by _____ TOTAL FEE \$ _____

NORTHAMPTON - NEW ENGLAND TBI 68
800-EXP. KIT
060-MASTER BATH W/WIC
041-COVERED PORCH



PLUMBING
SUBCODE
TECHNICAL SECTION



Date Received 7-28-93
Date Issued 7-28-93
Control # 7-28-93
Permit # 7694

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

Block 185 Lot 40.25
Work Site Location 37 MCKINLEY LN

Owner in Fee ESTATES @ SHORE OAKS LP
Address 31023 PHILMONT AVE.
HUNTINGDON VALLEY PA
Tele. (215) 938-8000
Contractor ANTHONY GALIOTO
Address 91 OAKTREE LN.
TOM'S RIVER, NJ
Tele. (908) 255-1551
Lic. No. 6727
Federal Emp. No. --- or Social Security No. ---

B. PLUMBING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Building Sewer Size 4"
Water Service Size 1"
Estimated Cost of Plumbing Work \$ 5500 -

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS:		Dates (Month/Day)			
		Type:	Failure	Failure	Approval	Initial	
☐ No Plans Required		Slab					
Joint Plan Review Required:		Rough					
☐ Bldg. ☐ Elec. ☐ Fire		Water				10/7/93 Dg	
☐ Plumb. Plans Approved		Sewer				11/3/93 Dg	
Date: _____		Fixtures					
Approved by: _____		Gas Equipment				10/7/93 Dg	
		Gas Final					
		Solar					
		TCO					
SUBCODE APPROVAL:							
☒ CO ☐ CEO ☐ CA							
Approved by: <u>Anthony Galito</u>							
Date: <u>12/17/93</u>							

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.

Anthony Galito
Signature-Contractor Seal

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
<u>3</u>	Water Closet	_____
<u>2</u>	Urinal/Bidet	_____
<u>5</u>	Bath Tub	_____
<u>1</u>	Lavatory	_____
<u>1</u>	Shower	_____
<u>2</u>	Floor Drain	_____
<u>1</u>	Sink	_____
<u>1</u>	Dishwasher	_____
<u>1</u>	Drinking Fountain	_____
<u>2</u>	Washing Machine	_____
<u>1</u>	Hose Bibb	_____
<u>1</u>	Gas Piping	_____
<u>1</u>	Fuel Oil Piping	_____
<u>1</u>	Water Heater	_____
<u>1</u>	Steam Boiler	_____
<u>1</u>	Hot Water Boiler <u>SYSTEM</u>	_____
<u>1</u>	Sewer Pump	_____
<u>1</u>	Interceptor/Separator	_____
<u>1</u>	Backflow Preventer	_____
<u>1</u>	Greasetrap	_____
<u>1</u>	Water Cooled A/C	_____
<u>1</u>	or Refrigeration Unit	_____
<u>1</u>	Sewer Connection	_____
<u>1</u>	Water Service Connection	_____
<u>1</u>	Gas Service Connection	_____
<u>4</u>	Active Solar System	_____
<u>4</u>	Other <u>STACKS</u>	_____
Administrative Surcharge		\$ _____
Paid ☐ Check # _____ Minimum Fee		\$ _____
Collected by: _____ TOTAL		\$ _____

HUNTINGTON - HUNTINGTON TBI 68
PRO-EXP. KIT
ALC. MASTER BATH W/WIC
411 - COVERED PORCH



PLUMBING
SUBCODE
TECHNICAL SECTION



Date Received 7-28-93
Date Issued 7-28-93
Control #
Permit # 7674

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

Block 185 Lot 40.25
Work Site Location 37 MORIUS LN

Owner in Fee 1 SMITHS RD SHORE OAKS LP
Address 3103 PHILMONT AVE.
HUNTINGTON VALLEY PA
Tele. (215) 738-8000
Contractor ANTHONY GALLO
Address 91 OAK TREE LN.
JACKSON RIVER NJ
Tele. (908) 255-1551
Lic. No. 6727
Federal Emp. No. or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present 2-3 Proposed R-3
Building Sewer Size 4"
Water Service Size 1"
Estimated Cost of Plumbing Work \$ 2500-

JOB SUMMARY (Office Use Only)					
PLAN REVIEW:		INSPECTIONS:		Dates (Month/Day)	
[] No Plans Required		Type:	Failure	Failure	Approval Initial
Joint Plan Review Required:		Slab			
[] Bldg. [] Elec. [] Fire		Rough			10/7/93
[] Plumb. Plans Approved		Water			11/3/93
Date:		Sewer			
Approved by:		Fixtures			10/7/93
		Gas Equipment			
		Gas Final			
SUBCODE APPROVAL:		Solar			
[X] CO [] CCO [] CA		TCO			
Approved by:					
Date:					

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.

Anthony Gallo
Signature-Contractor Seal

[X] Licensed Plumbing Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	
	Urinal/Bidet	
2	Bath Tub	
5	Lavatory	
1	Shower	
	Floor Drain	
2	Sink	
1	Dishwasher	
	Drinking Fountain	
1	Washing Machine	
2	Hose Bibb	
1	Gas Piping	
	Fuel Oil Piping	
1	Water Heater	
1	Steam Boiler	
	Hot Water Boiler SYSTEM	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
1	Water Cooled A/C	
	or Refrigeration Unit	
1	Sewer Connection	
1	Water Service Connection	
1	Gas Service Connection	
	Active Solar System	
4	Other SINKS	
Administrative Surcharge		\$
Paid [] Check #		\$
Collected by: TOTAL		\$

R-2314698



CUT-IN-CARD

MUNICIPALITY

Howell

LOCATION

37 NICKLAUS LANE UTILITY CO.

SHORE OARS TOLL BR BLK 185 LOT 40.25

OWNER

TOLL BROTHERS LAND OCCUPANT ONE FAMILY DWG

"Installation in the above premises has been inspected and is
in accordance with N.E.C., utility and DCA requirements."

☒ FINAL

☐ TEMPORARY This approval void after _____ days

DESCRIPTION OF SERVICE

150 Amp SERVICE EQUIPMENT

INSTALLED BY

STEER ELEC LICENSE NO. 5000

DATE

10-19-93 PERMIT # 7694 INSPECTOR Vasily Seige

Lic. No:

611-ES

U.C.C. Form F-350A

1 WHITE—UTILITY 2 CANARY—OFFICE/FILE 3 PINK—OFFICE/CONTRACTOR

**ENGINEERING INSPECTION REPORT
TOWNSHIP OF HOWELL, N.J.**

938-5588

DATE RECEIVED: 12-13-93 INSPECTION REQUESTED BY: Bill Riella
CASE NUMBER: 2529 DEVELOPMENT: Shore Oaks Est. (1)
BLOCK: 185 LOT: 4025 SECTION: 2

ITEM		ACCEPTABLE	UNACCEPTABLE
1. UTILITIES:	Water, Gas, Electric, Telephone, Sanitary Sewer		
2. STREET RIGHT-OF-WAY:			
(a) Graded	BOWDED	✓	
(b) Stabilized	"	✓	
(c) Curb	"	✓	
(d) Sidewalk	N.A.		
(e) Driveway Apron	FINAL F.O.B.C.		✓
(f) Obstructions		✓	
(g) Drainage Facilities		✓	
(h) Pavement (Base or Wearing Surface)		✓	
(i) Retaining Device(s)	N.A.		
(j) Construction Debris Removed		✓	
(k) Fire Hydrants-Constructed & Tested	CONSTR.		
3. LIGHTING:			
(a) Parking Lot(s) Installed-Operational	N.A.		
(b) Walkway(s) Installed - Operational			
(c) Street Installed - Operational			✓
4. TRAFFIC CONTROL DEVICES:			
(a) Sign(s) Traffic Control		✓	
(b) Sign(s) Street		✓	
(c) Sign(s) Handicap			
(d) Marking(s) Pavement	N.A.		
(e) Fire Lane			
5. SCREENING, FENCE(S) & LANDSCAPING:			
(a) Topsoil		✓	
(b) Fertilizing & Seeding (Stabilized)	LETTER REQUIRED		✓
(c) Shade Trees			
(d) Shrubs	N.A.		
(e) Trash Screening			
(f) Screening (Fence or Plantings)			
6. SOIL EROSION & SEDIMENT CONTROL:			
(a) Compliance - Certified Plan		✓	
(b) Site Conditions - Field Observation		✓	
(c) Sediment Deposits		✓	
(d) Erosion Problems		✓	
7. SITE GRADING:			
(a) Graded to provide positive drainage		✓	
(b) Certified Grading Plan demonstrating positive drainage		✓	
(c) Steep slopes stabilized (Mechanical or Vegetative)			
(d) Retaining device(s)	N.A.		
8. GENERAL CLEANUP			
(a) Lot		✓	
(b) Adjoining buffer, open space, conservation area		✓	
(c) Site Triangle		✓	

RECOMMENDATION(S) AND/OR REQUIRED DOCUMENTATION:

- Meets engineering requirements - recommend consideration for issuance of Certificate of Occupancy.
☒ Does not meet engineering requirements - recommend Certificate of Occupancy not be considered until site conforms.

COMMENTS:

- A. F.O.B.C TOP COURSE NOT INSTALLED.
 B. LETTER ON STABILIZATION & GRASS GROWTH REQUIRED. (REC'D)
 C. STREET LIGHTING NOT COMPLETED AS APPROVED

R7/28/87

M.C. PINE
INSPECTOR

12-16-93
DATE

CM

12/16/93

MS
12/16/93

NORTHAMPTON - NEW ENGLAND

TBI 68

7694

800 EXPAND. KIT.
060 MASTER BATH w/WIC
041 COVERED PORCH

TO: HOWELL TOWNSHIP CONSTRUCTION INSPECTION DEPARTMENT
Attn: Plumbing Sub-Code Official

REF: DCA BULLETIN 87-1
N.J.A.C. 5:23-3.15(b)
NSPC 4.2.4

DATE 7/26/93

THIS IS TO CERTIFY THAT I, (Name) Anthony Galisto,
(Business Address) 91 OAKTREE LN,
(Tel. No.) 908 255-1551.

WILL INSTALL ALL SOLDERED JOINTS AND FITTINGS FOR THE POTABLE WATER SYSTEM
IN THE FOLLOWING BUILDING, (Owner) ESTATES @ SHORE OAKS LP.,
37 NICKLAUS LN,
(Address) ~~3105 PHILMONT AVE~~ N.J.,
(Block & Lot) 185 40.25.

USING SOLDER AND FLUX HAVING A LEAD CONTENT OF NOT MORE THAN 0.2 PER CENT
IN ACCORDANCE WITH THE ABOVE-REFERENCES.

Anthony Galisto
(Signature & Seal)
(Notarized if Homeowner)

HOME ADDRESS
37 NICKLAWS LANE

October 6, 1993

Mr. Robert Koches, Director
Howell Township
Water & Sewer Utilities Department
P. O. Box 638
Howell, New Jersey 07731

RE: BLOCK 105 LOT 40.25

Gentlemen:

This is to acknowledge that a one (1") inch water meter is not currently available for installation in our home, captioned above. In consideration for allowing our new home to obtain a Certificate of Occupancy on our behalf, we hereby agree that we will allow the Howell Township Water and Sewer Department access to our home to install a one (1") water meter upon forty-eight (48) hours notice from the Department advising us that a meter is available.

We also understand that our initial bill for water and sewer will be estimated based on fair and reasonable rates in our area.

Thank you for your consideration.

Sincerely,



cc: William Klumb, Code Official
Bruce Davis, Township Clerk

BUREAU OF FIRE PREVENTION

P.O. BOX 580
HOWELL, N.J. 07731

Re - 11-4-93
Re - 10-21-93
Re - 10-20-93
4:10 P.M. called per
Bldg. Department
DATE 10-19-93

CERTIFICATE # _____

RESIDENTIAL 1 COMMERCIAL _____ CONSTRUCTION _____

C.O. C.C.O. INSPECTION REPORT:

BLOCK 185 LOT 40.25

HEATING _____

Shore, R. J. - (Toll-free)
NAME OF ESTABLISHMENT/OWNER

DISTRICT 1

ADDRESS _____

PHONE # _____

THE ABOVE PREMISES WAS INSPECTED FOR OCCUPANCY CERTIFICATION, AND THE FOLLOWING DISPOSITION WAS TAKEN:

C.O. C.C.O. RECOMMENDED _____ REINSPECTION NECESSARY YES _____ NO _____

C.O. C.C.O. NOT RECOMMENDED _____ TEMP. ISSUED _____ 938-4500
EXT. 262

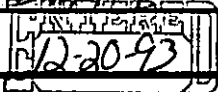
VIOLATIONS: FRAME (IFL)?? NOT APPROVED-

FIRE PLACE NOT INSTALLED-

ADVISED SHEETROCKERS NOT TO ROCK

2ND FLOOR WALL INSIDE CHASE

FINAL - 12-17-93 - APPROVED FINAL/FP.



REINSPECTION DATE 10/22/93

(SHEETROCKERS ADV.)

REMARKS: STILL NOT FIRE STOPPED 2ND FLOOR TO ATTIC

11-5-93 11/4/93 APPROVED [FRAME]

C.O. C.C.O. RECOMMENDED _____
C.O. C.C.O. NOT RECOMMENDED _____

CHIEF _____

INITIALS OF INSPECTOR 1



FREEHOLD SOIL CONSERVATION DISTRICT

(Serving Middlesex and Monmouth Counties)

211 FREEHOLD ROAD
MANALAPAN, NEW JERSEY 07726

Tel: (908) 446-2300

Fax: (908) 446-9140

REPORT OF PARTIAL COMPLIANCE*

12/13/1993

TO : CONSTRUCTION OFFICIAL

TWP. : HOWELL

PROJ.: ESTATES AT SHORE OAKS SECTION 2, 3, 4

APPLICATION NO.: 93-0043

Block No.	Lot No.	Comments
185	6840.25	37 Nicholas Drive

This certifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance with the soil erosion and sediment control plan as certified by the Freehold Soil Conservation District and required by The Soil Erosion and Sediment Control Act of 1975 as amended (N.J.S.A. 4:24-39 et seq.)

*Pending continued compliance and establishment of a permanent vegetative cover by May 1, 1994.

Authorized Signature _____

A handwritten signature in black ink, consisting of a large, stylized 'S' followed by a horizontal line.

Distribution: WHITE-Municipal Construction Official
CANARY-Developer PINK-District GOLDENROD-Other
93-0043.60919

REPORT OF PARTIAL COMPLIANCE*

12/13/1993

TO : CONSTRUCTION OFFICIAL

FROM : HOWELL

PROJECT : ESTATES AT SHORE OAKS SECTION 2, 3, 4

APPLICATION NO. : 93-0043

Block No. 100 No. Comments
Lot 100 37 Nicholas Drive

This certifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance with the soil erosion and sediment control plan as certified by the Freehold Soil Conservation District and required by the Soil Erosion and Sediment Control Act of 1972 as amended in N.J.A.C. 4:24-39 et seq.

*Pending continued compliance and establishment of a permanent vegetative cover by May 1, 1994.

Authorized Signature

Distribution: WHITE-Municipal Construction Official
CANARY-Developer PINK-District GOLDENROD-Other
93-0043.00919



HOME OWNERS WARRANTY CORPORATION

July 16, 1993

Mr. Ken Butco
Department of Community Affairs/
New Home Warranty Department
CN-805
Trenton, NJ 08625-0805

Dear Mr. Butco:

Please find enclosed our sealed document certifying HOW National Account Program participation by Bennington Hunt L.P. and Estates at Shore Oaks, L.P. (both part of Toll Brothers, Inc.)

As is the normal procedure, please notify the township that no additional proof of warranty is required, and to please issue certificates of occupancy based on the enclosed sealed document.

If you have any questions, please do not hesitate to give me a call.

Sincerely,

Sue Strauss
Senior Underwriter

Enclosure

cc: Michael Brown, Local Council Administrator



HOME OWNERS WARRANTY CORPORATION

CERTIFICATION FORM

Used to obtain Certificates of Occupancy for
HOW National Account Builders

Howell
MUNICIPALITY: _____
Estates at Shore Oaks L.P.
BUILDING FIRM NAME: _____
3103 Philmont Ave.
BUILDER FIRM ADDRESS: _____
Huntingdon Valley, PA 19006

022554
NJ DCA BUILDER REGISTRATION NUMBER: _____
3100-22355
HOW BUILDER NUMBER: _____

This is to certify that all homes eligible for warranty coverage under the NEW HOME WARRANTY AND BUILDER'S REGISTRATION ACT and subsequent Department of Community Affairs Regulations, in the municipality listed above, have been or shall be enrolled for warranty/insurance coverage under the Home Owners Warranty (HOW) Program.

To be valid, this form must be stamped, dated and signed below and shall be cancellable only upon 45-days written notice to the NJ Department of Community Affairs by the HOW Corporation.

Signed: _____
James I Barnett
Vice-President/Underwriting

Date: _____
July 16, 1993

Municipality Copy - Original Sealed
DCA Copy - Original Sealed
NJ HOW Copy
Builder Copy
Regional Office Copy

Toll Brothers, Inc.

Quality Homes By Design®

June 14, 1993

Construction Code Official
Howell Township, NJ

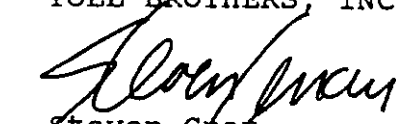
RE: Shore Oaks
Dover, Cornell, Northampton, Eaton

Dear Sirs:

The prototype construcion documents for the above-mentioned models are acceptable permit documents.

Sincerely,

TOLL BROTHERS, INC.


Steven Gnan
Architect

cc: Bill Rielly

sg10105L

TO THE ADMINISTRATIVE OFFICE:

DATE: 7-21-93

#5497

The undersigned hereby applies for a Developers Permit for the following, to be issued on the basis of the representations contained herein, all of which applicant swears to be true:

1. Location of Property SHORE OAKS GOLF
Blk 185 Lot 40.25 SECTION II
2. Name of Land Owners TOLL BROS. INC
3. Occupant _____
4. Proposed Use:

☒ New Construction	Residence-Number of Families _____
☐ Remodeling	Business _____
☐ Accessory Building	Manufacturing _____
	Sign Board - Size _____
5. Survey of lot, showing public roads, existing buildings and proposed construction or use for which this application is made. Fill in all dimensions below:
 - (a) Name of road or street NICKLAUS LANE Feet.
 - (b) Main road frontage 96.97 Feet.
 - (c) Set back from side of road right of way 39.20' Feet.
 - (d) Side yard clearance (16.41 LT) (21.4 RT) Feet.
 - (e) Rear yard clearance 86' Feet.
 - (f) Depth of lot from right of way (176.33 LT) (156.96 ET) Feet.
 - (g) Dimensions of building: Width 56 Feet Depth 32' Feet.
 - (h) Highest point of building above established grade 29. Feet.
 - (i) Area of lot - square feet or acres 15,493 SF Feet.
 - (j) Sketch showing existing buildings and proposed construction (indicating which direction is North).
6. Buildings: Use RESIDENTIAL
Number of stories _____ Basement _____ Apartments _____
Useable floor space designed for use as living quarters, exclusive of basements, porches, garage, breezeways, terraces, attics or partial stories.
First floor 1152 square feet Second floor 1049 square feet.
Off-street parking space 720 square feet.
7. REMARKS _____

WITNESS: _____

Michael J. Malone
APPLICANT'S SIGNATURE

Date filed with Administrative Officer 7/26/93

Fee paid 10

If application is refused, reason for refusal: _____

GILROY, CRAMER & McLAUGHLIN

A PROFESSIONAL CORPORATION

ATTORNEYS AT LAW

BROOK 38 PARK

WALL TOWNSHIP, NEW JERSEY

ROGER J. McLAUGHLIN
GEOFFREY S. CRAMER
WILLIAM P. GILROY
LINDA L. PIFF
DIANA L. ANDERSON
DENISE A. DAPRILE

(908) 448-1133

TELEFAX: (908) 448-0494

MAILING ADDRESS:
2130 HIGHWAY 38
BUILDING B, SUITE 222
SEA GIRT, N.J. 08750

May 18, 1993

DENNIS M. CRAWFORD
OF COUNSEL

Ronald C. Morgan, Esq.
Parker, McCay & Criscuolo
Three Greentree Centre - Suite 401
Route 73 & Greentree Road
Marlton, NJ 08053

Re: Shore Oaks Development
Township of Howell
Sewer Meter Chamber
Application No. 395-Toll Brothers
Application No. 396-Mesa Development Corp.

Dear Mr. Morgan:

Reference is made to Township Manager's Coren's letter of May 13, 1993 setting forth six (6) conditions which must be complied with prior to the Township issuing building and/or Certificate of Occupancy Permits.

You advised by your letter of May 14, 1993, and, the attachments thereto, that your clients' objected to the fact that building permits described in Mr. Coren's letter aforementioned would be the subject to condition that no Certificates of Occupancy would be issued for the dwellings until final resolution of the meter chamber facilities. The primary reasons for your clients objection are:

- a) That your clients, as successors in title, are entitled to rely upon two (2) prior agreements entered into by the original developer, said agreements being:
 1. Agreement between Shore Golf Development Corporation and Manasquan River Regional Sewerage Authority dated February 22, 1988.
 11. Agreement between Shore Golf Development Corporation, the Manasquan River Regional Sewerage Authority, the Borough of Farmingdale and the Township of Howell dated May 3, 1990.
- b) That the performance guarantees recently posted by Toll

HOWELL TOWNSHIP
ENGINEERING DEPT.

DATE: 5/18/93

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Brothers and Mesa Development Corp. are sufficient to cover the cost of construction of the meter chamber.

This will confirm our telephone conferences of yesterday, including a four-party telephone conference between yourself, the undersigned, Mr. Hartman of Toll Brothers and Mr. Plessner of National Westminster Bank during which the following items were discussed and confirmed:

- a) The performance guarantees recently posted by Toll Brothers and Mesa Development Corp. do not encompass the construction of the sewer meter chamber. The reason for the same is that there was to have been a separate performance bond previously posted by the prior developer with Manasquan River Regional Sewerage Authority to ensure timely completion of the meter chamber as set forth on page 3 of the 1990 four-party agreement aforementioned. To the township's knowledge the performance bond has either never been posted or has expired and is no longer in place.
- b) The 1990 agreement which permitted the prior developer to discharge effluent into the Manasquan River Regional Sewerage Authority system through a temporary connection in the borough of Farmingdale was only valid for a 12-month period time from the date of Agreement. The Agreement itself is necessary so as to be able to enable Manasquan River Regional Sewerage Authority to apportion billing charges between the Township of Howell and the borough of Farmingdale until the sewer meter chamber has been completed.
- c) Recognizing the importance of the above Agreement and posting of the performance guarantee for the sewer meter chamber National Westminster Bank and/or your clients shall:
 - i. Post with Manasquan River Regional Sewerage Authority a new performance guarantee in the form of an irrevocable letter of credit, the form of which shall be approved by the attorney for Manasquan River Regional Sewerage Authority and Township of Howell, said letter of credit to run in favor of both Manasquan River Regional Sewerage Authority and the Township of Howell to ensure completion of a meter chamber. The Township Utilities engineer will provide the amount required for the performance guarantee including, land acquisition costs, based upon your negotiations with the existing landowners for the proposed sites.

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- ii. Mr. Plessner and yourself shall communicate with a representative of Manasquan River Regional Sewerage Authority the purpose of which shall be to negotiate an extension of the 1990 Agreement for an additional 12-month period of time and/or the commencement of the operation of the sewer meter chamber, whichever occurs first.
- iii. The bank and/or your clients are proceeding with necessary engineering studies including site plans, etc. for the two (2) proposed sites for the sewer meter chamber. This will avoid delay should there either MRRSA or NJDEPE disapprove of one of the two proposed sites.
- iv. That the Township, upon compliance with the six (6) items set forth in Manager Coren's letter of May 13, 1993 will issue building permits for the single family dwellings. Certificate of Occupancies, however, will not be issued until the performance guarantee for the sewer meter chamber aforementioned has been posted and the terms of the 1990 Agreement have been extended for a twelve-month period of time.

I believe that the above accurately sets forth the facts relating to the above matter and our discussions of May 17, 1993.

Very truly yours,

WILLIAM P. GILROY
Howell Township Attorney

WPG/dsl

cc: Mark Coren, Township Manager
David Samuel, P.E., Township Utilities' Engineer

P.S.

The Township desires to have the 1990 Agreement amended to provide that should the developer fail to complete the meter chamber and MRRSA fails to complete the same within a reasonable period of time, then in such event the Township may call in the performance guarantee and complete the meter chamber project.