RECEIVED
JAN 15 1990

TOWNSHIP OF BRICK

CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: 524 Pennsylvania Ave.
2. Owner Name: Frank & Alice Chandler Tel. (201) 458-9459
   Address 524 Pennsylvania Ave.
3. Principal Contractor: PREFERRED CRAFTSMEN INC. Tel. (201) 350-2502
   Address 1612 JACKSON St. Point Pleasant, N.J 08742
   Lic. No. or Builder Reg. No. 18889 Federal Emp. No. 22-2691639
4. Architect or Engineer: OWNER Tel. ( )
   Address
5. Responsible Person in Charge of Work MARK WASSERBACH Tel. (201) 350-2502

II. PROPOSED WORK

A. TYPE OF WORK

1. ☐ Minor Work (Single Trade)
2. ☐ Small Job ($5,000 and no Prior Approvals)
   Complete only II.B., III and IV.A. and Page 2
3. ☐ New Building
4. ☒ Addition
5. ☐ Alteration
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☐ Other:

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☒	Building/ Structural	$
2. ☐	Plumbing	
3. ☒	Electrical	
4. ☐	Fire Protection	
5. ☐	Other	
6. ☐	Other	
	TOTAL COST	$10,500.—

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

1. ☐ Elevators/Dumbwaiters
2. ☐ High-Pressure Boilers
3. ☐ Refrigeration Systems
4. ☐ Pressure Vessels
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Cross-connections/ Backflow Preventors
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R–1)
2. ☐ Multi-Family (R–2) HMD Reg. No.:
3. ☐ Two Family (R–3b)
4. ☒ One-Family (R–3a)

If new construction, enter no. of dwelling units ____

If other than new construction, enter no. of dwelling units:
Before Construction: ____
After Construction: ____
Net Gain (or loss): ____

B. NON-RESIDENTIAL

5. ☐ Theatres with Stage (A–1–A)
6. ☐ Movie Theatres (A–1–B)
7. ☐ Night Clubs (A–2)
8. ☐ Restaurants, Libraries, Museums (A–3)
9. ☐ Religious Assembly (A–4)
10. ☐ Outdoor Assembly (A–5)
11. ☐ Business (B)
12. ☐ Educational (E)
13. ☐ Moderate-Hazard Factory (F–1)
14. ☐ Low-Hazard Factory (F–2)
15. ☐ High-Hazard (H)
16. ☐ Institutional Detention Center (I–1)
17. ☐ Hospitals, Infirmaries (I–2)
18. ☐ Group Homes (I–3)
19. ☐ Mercantile (M)
20. ☐ Moderate-Hazard Warehouse (S–1)
21. ☐ Low-Hazard Warehouse (S–2)
22. ☐ Temporary, Misc. (U)
23. ☐ Other

State Specific Use: ____

If Change in Use Group, Indicate Former: ____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☒ Private (Individual, Corp., Non-profit Inst., Etc.)
2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

	Principal	Secondary	Type
3.	☐	☐	Gas
4.	☐	☐	Oil
5	☐	☐	Electric
6.	☐	☐	Solid (Wood, Coal, Etc.)
7.	☐	☐	Propane
8.	☐	☐	Solar
9.	☐	☐	Other

C. TYPE OF SEWAGE DISPOSAL

10. ☒ Public or Private Company
11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☒ Public or Private Company
13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories one
15. Height of Structure 14 Ft.
16. Area–Largest Floor 210 Sq. Ft.
17. Bldg. Area–All Fls. 210 ~~1578~~ Sq. Ft.
18. Volume of Structure 2205 Cu. Ft.
19. Total Land Area Disturbed 210 Sq. Ft.

LDS BR 10415043

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

A. ☒ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.

B. ☒ I further certify that I will perform the work below.

B1. ☐ Building B2. ☒ Electrical B3. ☐ Plumbing

C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.

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

SIGNATURE Frank Chandler DATE 1-10-90

II. AGENT SECTION

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

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 Mark Wasserbach TEL. (201) 350-2502

ADDRESS 1612 Jackson St.

Point Pleasant, NJ 08742

SIGNATURE

BLOCK NO. 6376 21 LOT NO. 71, 72, 73, 74 SUBDIVISION _____ PERMIT NO. _____

PRIOR APPROVALS CHECKLIST

APPROVALS	LOCAL				COUNTY				REGIONAL				STATE				COMMENTS
	Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		
	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	
☐ Planning Board																	
☐ Zoning Board																	
☐ Sewer Authority																	
☐ Water Authority																	
☐ Fire Department																	
☐ Police Department																	
☐ Health Department																	
☐ Soil Conservation																	
☐ N.J. Dept. of Community Affairs																	
☐ N.J. Dept. of Transportation																	
☐ N.J. Dept. of Environmental Protection																	
☐ Other: _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

	EDITION OF CODE		EDITION OF CODE		
☐ One and Two Family Dwellings	_____	☐ Mechanical	_____	☐ Flood Hazard	_____
☐ Building	_____	☐ Energy	_____	☐ As Built Elevation Certification	_____
☐ Electrical	_____	☐ Barrier Free	_____	☐ Other	_____
☐ Plumbing	_____	☐ Other	_____		_____

PERMIT CONTROL

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN – FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date	Plans Received By Receiver	Approval Date	Reviewer	Comments
☒	BUILDING	11/16/90	✓	1-17-90	WK	
	Footings/Foundations					
	Framing					
	Architectural 2			11/16/90	SK	
	Other _____					
☐	PLUMBING					
☐	ELECTRICAL					
☒	FIRE PROTECTION			1-17-90	JE	
☐	OTHER 2			1-16-90	F.D. OK	

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
✓	BUILDING		4-27-90	JK
	Footings/Foundations			
	Framing			
	Architectural			
	Other _____			
	PLUMBING			
✓	ELECTRICAL		7-9-90	BK
✓	FIRE PROTECTION		5-30-90	JE
	OTHER _____			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☐ Certificate of Occupancy No. _____	_____
☐ Certificate of Continued Occupancy No. _____	_____
☑ Certificate of Approval No. 45-90	7-30-90
☐ None	

IV. ON-GOING INSPECTIONS

On-going Inspections Required (See Page 1, II.D.)	Date Posted to Log and Tickler

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	$ 16.56
PLUMBING	•
ELECTRICAL	•
FIRE PROTECTION	20.—
OTHER _____	•
SUBTOTAL	$ 36.56
– LESS: 20% of subtotal (when plan review performed by state agency).	(3.66)
D.C.A. TRAINING FEE .0006 x 2366	1.42
CERTIFICATE OF OCCUPANCY	20.—
OTHER _____	•
OTHER _____	•
TOTAL COLLECTED WHEN PERMIT ISSUED	$ 61.64

DATE 1/25/91 Collected By OK CR

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			•
OTHER			•
OTHER			•
– LESS: Refunds			(•)
TOTAL COLLECTED AFTER PERMIT ISSUED			$ •

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	$ •
COLLECTED AFTER PERMIT (VB)	•
TOTAL	$ •

CERTIFICATE

Date Issued 7-30-90
Control #
Permit # 45-90

IDENTIFICATION

Block 1396-21 Lot 71-74
Work Site Location 524 Pennsylvania Ave.

Owner in Fee Frank & Alice Chandler
Address same

Tele. ( )
Contractor Preferred Craftsmen, Inc.
Address 1612 Jackson St.
Pt. Pleasant, NJ 08742
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group R-3 1 hour
Maximum Live Load
Description of Work/Use:

Addition to single family dwelling

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

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ **CERTIFICATE OF OCCUPANCY** XXX☒ **CERTIFICATE OF APPROVAL**

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:

Arthur J. Ciesigo
CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

CONSTRUCTION PERMIT

Date Issued 1/25/90
Control #
Permit # 45-90

IDENTIFICATION Block 1396-21 Lot 71

Work Site Location 524 Penna Ave

Owner in Fee J Chandler
Address same

Tele. ( )

Contractor Preferred Craftsman
Address

Tele. ( )

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

Federal Emp. No. **0004**

or Social Security No. 45*#

is hereby granted permission to perform the following work:

[✓] BUILDING [✓] PLUMBING [ ] OTHER _____

[ ] ELECTRICAL [✓] FIRE PROTECTION

DESCRIPTION OF WORK:

addition (2366)

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 $ 10,500 -

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

PAYMENTS (Office Use Only)		
Building	16.56	
Plumbing		
Electrical		
Fire Protection	20	16.56
Other DR	3.66	20.00
Other		3.66
DCA Training Fee	1.42	1.42
Cert. of Occ.	20.00	20.00
Other		61.64
Total	61.64	61.64
Check No. 01/25/90 NO. 5 0010A005		16:23
Cash		
Collected By:		

BLOCK 1396.21 #
LOT 71 #
BUILDING
FIRE
PLMB RVW
D.C.A.
C.O.
TOTAL
CHECK
CHANGE 0.00

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

BUILDING SUBCODE TECHNICAL SECTION

PERMIT NO. 45-90
DATE ISSUED 1-25-90
REVISION DATE
Block 82 Lot 71-74
Subdivision 1396-21

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only* When changing contractors, notify this office

Owner Frank Chandler
Address 524 Pennsylvania Ave. Brick, N.J.
Tel. (201) 458-9459
Work Site Address same

Contractor PREFERRED CRAFTSMEN INC.
Address 1612 JACKSON St. Point Pleasant, N.J.
Tel. (201) 350-2502
Lic. No. 18889
Federal Emp. No. 22-2699639

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

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

F/R ADDITION
14' x 15'

☒ See Plans

TYPE OF WORK:

- ☐ New Building
- ☒ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

Fee Basis	Fee
	$
SUBTOTAL	$
Minimum Building Fee (if applicable)	$
Total Building Fee *(Greater of Minimum or Subtotal)*	$

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 1
Total Building Area–All Floors 210 Sq. Ft.
Height of Structure 14 Ft.
Volume of Structure 2205 Cu. Ft.
Area–Largest Floor 210 Sq. Ft.
Total Land Area Disturbed 210 Sq. Ft.
Estimated Cost of Building Work: $ 10,500.-

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U:C.C. Form F-110 (8/83) GREEN - Office Copy, WHITE - Applicant Copy, MANILA TAG - Inspector's Copy

PLAN REVIEW AND INSPECTION – BUILDING

DATE	JOB CONDITION/COMMENTS
2-26-90	Foundation rod caved must be befor final JK
3-6-90	Foundation O.K JK

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☒ All	4-2-90	MR
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☐ CO ☐ CCO ☒ CA

Date: 4-27-90

Inspected By: J. Chandler

INSPECTIONS

Type	Failure Dates			Approval Date
☒ Footing/Foundation				2-1-90 JK
☐ Slab				
☒ Frame				2-26-90 JK
☐ Architectural				
☐ Insulation				
☐ Finishes				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

U.C.C. Form F-110 (8/83)

FIRE SUBCODE
TECHNICAL SECTION

PERMIT NO. 45-90
DATE ISSUED 1-25-90
REVISION DATE
Block 69 Lot 71-74
Subdivision 1396-21

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only* — When changing contractors, notify this office

Owner Frank Chandler
Address 524 Pennsylvania Ave. Brick, N.J.
Tel. (201) 458-9459
Work Site Address 90 Above

Contractor PREFERRED CRAFTSMEN INC
Address 1612 JACKSON St. POINT PLEASANT N.J.
Tel. (201) 350-2502
Lic. No. 18889
Federal Emp. No. 22-2691639

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

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other
Area Sprinkled: ☐ Full ☐ Partial (specify in comments)
No. of Heads: No. of Spare Heads:
☐ Valves Supervised – Method:
Water Supply – Source: Size:
FD Connection Location:
Estimated Cost of Work: $

FEE $

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other
Manual Pull: ☐ Yes ☐ No
Locations:
Estimated Cost of Work: $

$

B3. ALARM

TYPE: ☐ Manual ☐ Automatic
Supervision Type: ☐ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $

FEE $

B4. STAND PIPES

Pipe Size: Pump Size:
Water Source: Size:
FD Connection Location:
Hose Station: ☐ Yes ☐ No
Estimated Cost of Work: $

$

B5. OTHER

Smoke alarm Addition

$
$
$

Subtotal $

Minimum Fire Protection Fee (If Applicable) $

Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ 20

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP Present Proposed
Heating Systems – Location:
Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other
Fuel Storage Tank – Location: Fuel Type: Capacity:
Total Estimated Cost of Fire Protection Work: $ 50.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION – FIRE

DATE	JOB CONDITION/COMMENTS
5/30/90	Complies with Code

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved
Date: 1-17-90
Approved By: [signature]

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 5/30/90
Inspected By: [signature]

INSPECTIONS

Type	Failure Date			Approval Date
☐ Fire Suppression Test				
☐ Fire Alarm Test				
☒ Smoke Test				5/30/90
☐ TCO				
☒ Other Food				5/30/90
☐ Other				
☐ Other				
☐ Other				

U.C.C. Form F-140 (8/83)

MUNICIPALITY B.T. **CUT-IN-CARD**

LOCATION _____ UTILITY CO PP

524 Penn Ave BLK 396-21 LOT 71

OWNER Frank Chandler OCCUPANT _____

"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

SERVICE _____ RANGE _____ WATER HEATER _____

AIR COND _____ ELECT HEAT _____ MISC _____

COMMENTS w/ Split Addition

DATE 7.14.90 PERMIT # 0287 INSPECTOR R Kaylor

Elec. 104 Insp. Lic # 20

TOWNSHIP OF BRICK
OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Division of Inspections
A.J. Cierzo,
Construction Official
(201) 477-3000, ext. 262

1-17-90 Called - left message

CHECK LIST

RE: Block ________ Lot ________ Address 524 Pennsylvania

Please be advised that your application for a construction permit for the subject property has beenrejected due to deficiencies in the following areas:

Administrative ~~Sign each page of Plan, Cost~~ Did

Zoning ________

Engineering ________

Building ~~Triple 2×4 Wall under glue lam - carry to foundation~~ - 24" deep (column footing)

Plumbing ________ Did on Plan

Electric ________

Fire ________

See attached review check list(s) for details as to the reason your submission has been rejected. Please revise your application accordingly and resubmit to this office.

There is a 20 working day time limit for review of all documents submitted with a construction permit application. This time limit ceases in the event of a rejection of any type, and starts over again when the rejection(s) have been corrected and the application resubmitted.

____
Arthur J. Cierzo,
Construction Official

Date ________

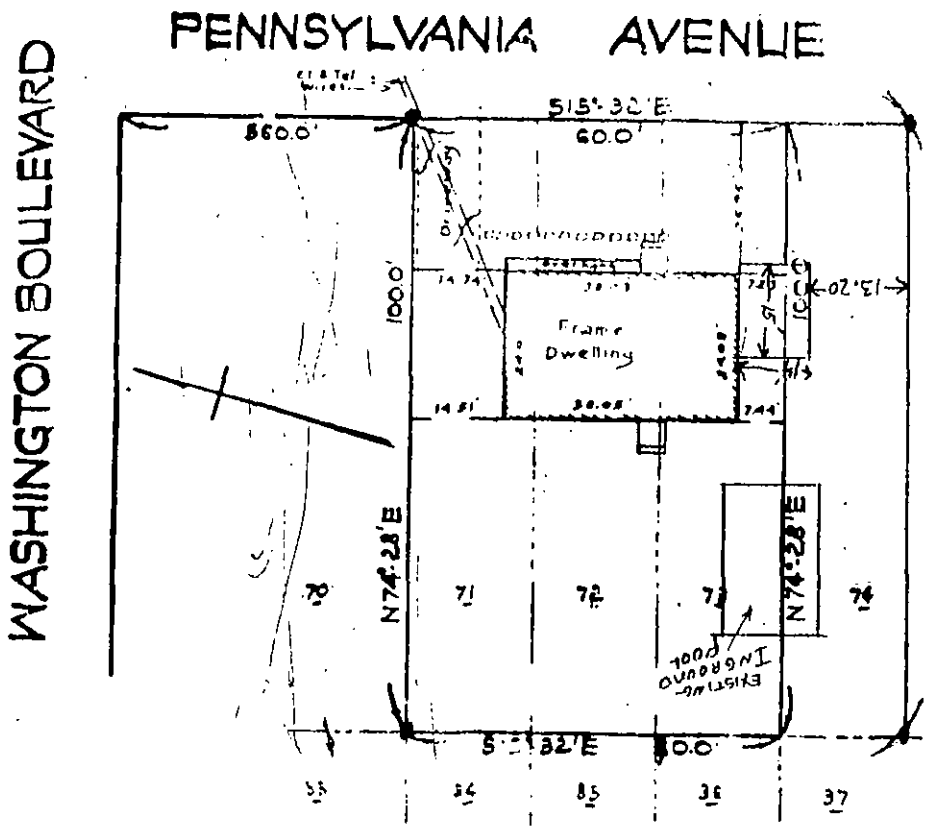
Chandler - Brickstown

SURVEY OF PREMISES

SITUATED IN

BRICK TOWNSHIP OCEAN COUNTY N.J.

Being all of Lots Nos 71, 72 and 73, 74 in Block 21
as shown on a map entitled "Hollywood Manor Ocean County New Jersey" Filed in the Clerks office of Ocean County October 19 1925 as Map N° B G



Note : 5' Blanket Drainage Easement along rear of all Lots
This survey is certified to Jersey Mortgage Company.

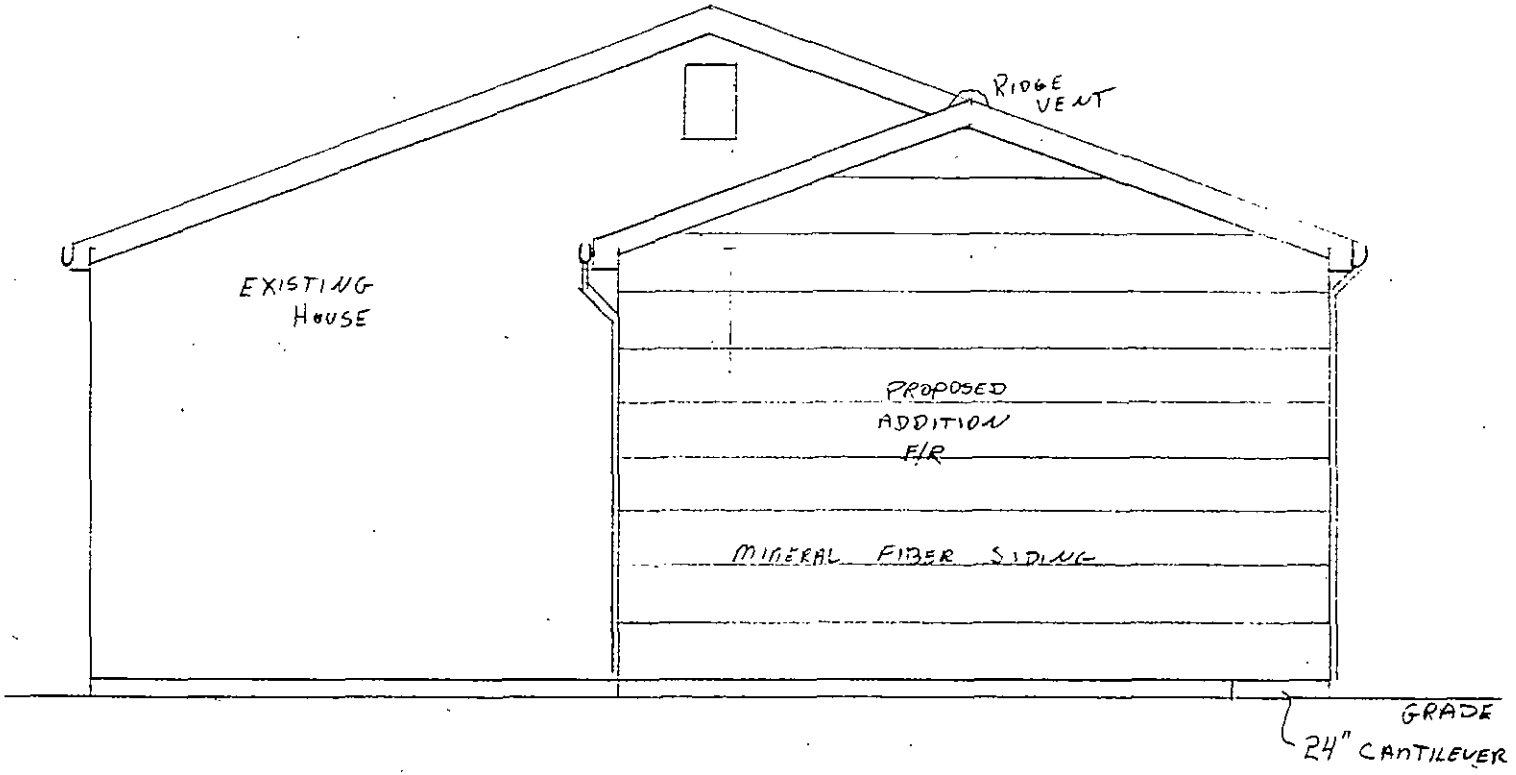
SAILER & SAILER
CIVIL ENGINEERS & SURVEYORS
64 BROAD ST. - ELIZABETH, N.J.

July 10, 1961 Scale 1"=20

APPROVED for Zoning Only

John Kinnevy, Zoning Officer
Date 1-16-90 odate

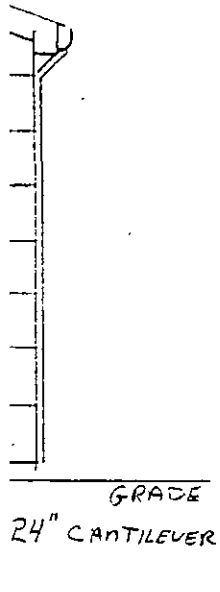
S.D. with in 10 ft of Bedroom
New & Existing

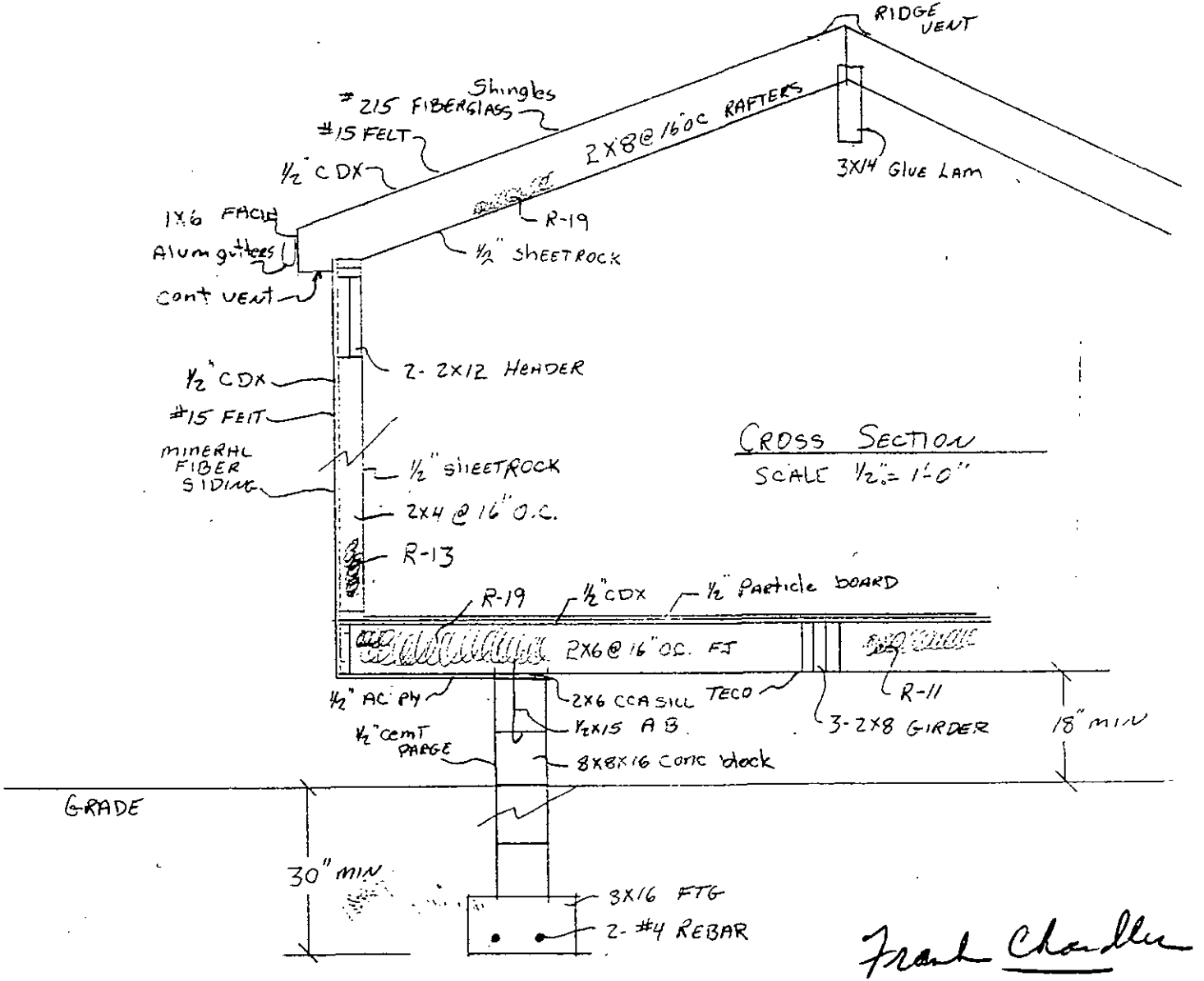


SIDE ELEVATION SCALE 1/4" = 1'-0"

GRADE

Frank Chandler





Cross Section
SCALE ½"= 1'-0"

Frank Chandler

OFFICE OF
DIVISION OF INSPECTION

BLOCK 21
LOT 71-74

ENGINEERING DEPARTMENT,

I request to be exempted from the plot plan ordinance for the minor addition to be constructed at 524 Penn Ave

THANK YOU,

PHONE NUMBER 350-2502

APPLICANT SIGNATURE

	YES	NO	
1.	☒	☐	Are you removing excavated materials from site? Please explain. Excess Dirt
2.	☐	☒	Are you constructing a retaining wall? If yes, provide following information

Type:

☐ Railroad ties
☐ Concrete

Height: _____
Length: _____

RECEIVED JAN 16 1990 MUNICIPAL ENGINEER

Attach plan providing details location - Plan must be certified by licensed Engineer or Architect.

OFFICIAL USE ONLY

Preliminary Inspection	Construction Inspection	Final Inspection
Accepted ☑	Accepted ☐	Accepted ☐
Rejected ☐	Rejected ☐	Rejected ☐
Date 1/16/90	Date _____	Date _____
Signature [signature]	Signature _____	Signature _____

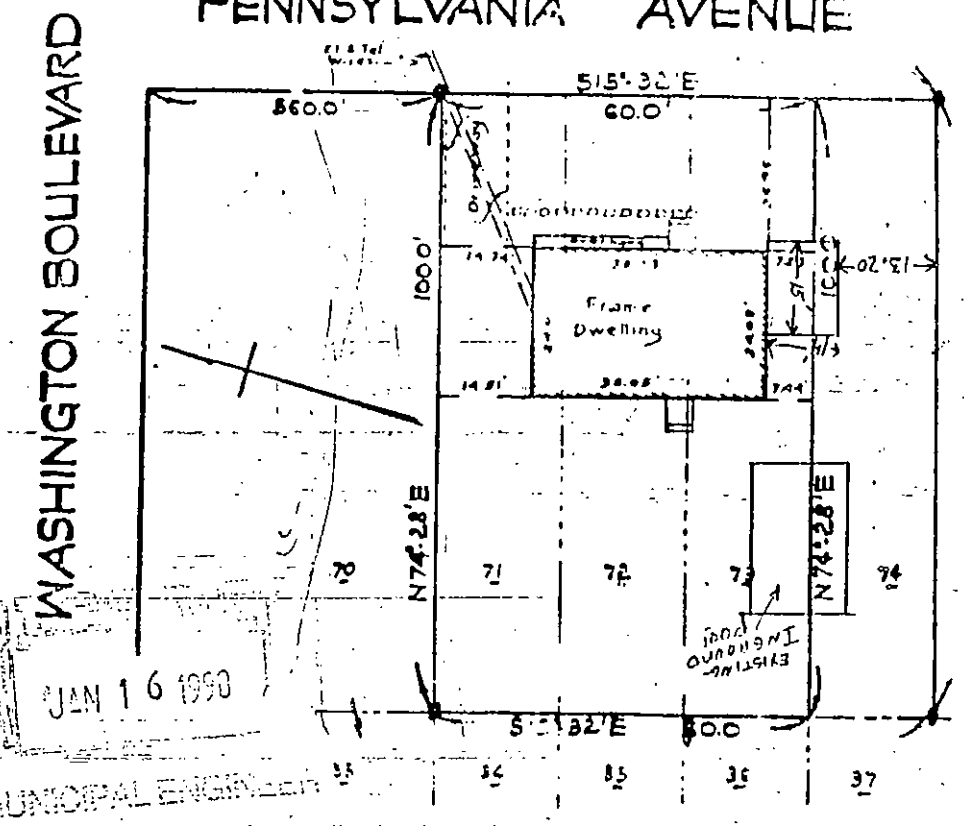
Chandler - Brickstone

SURVEY OF PREMISES

SITUATED IN

BRICK TOWNSHIP, OCEAN COUNTY N.J.

Being all of Lots Nos 71, 72 and 73, 74 in Block 21
as shown on a map entitled "Hollywood Manor, Ocean County New Jersey" Filed in the Clerk's Office of Ocean County October 19, 1925
as Map N° B G



JAN 16 1990

MUNICIPAL ENGINEER

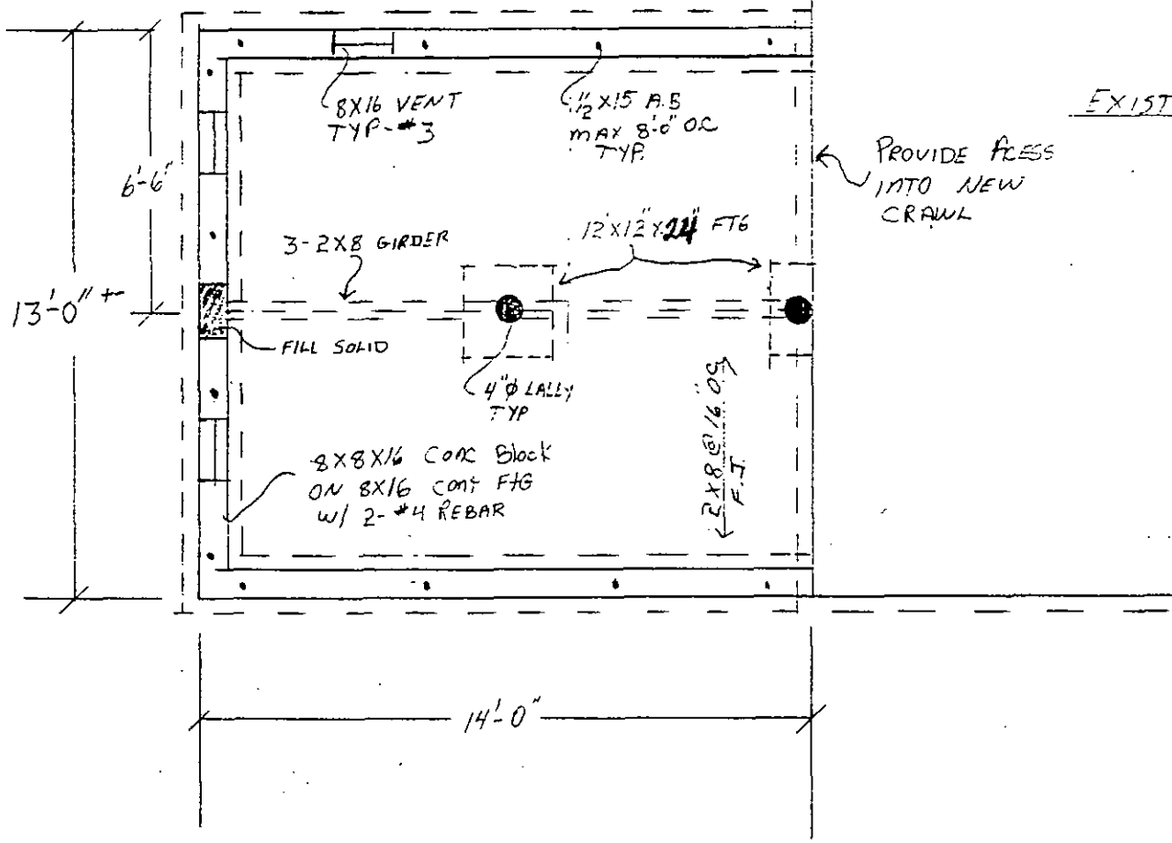
Note: 5' Blanket Drainage Easement along rear of all Lots
This survey is certified to Jersey Mortgage Company.

SAILER & SAILER
CIVIL ENGINEERS & SURVEYORS
64 BROAD ST. - ELIZABETH, N.J.

Herbert F. Sailer
July 10, 1961 Scale 1-20

APPROVED for Zoning Only

John Kinnevy, Zoning Officer
Date 1-16-90



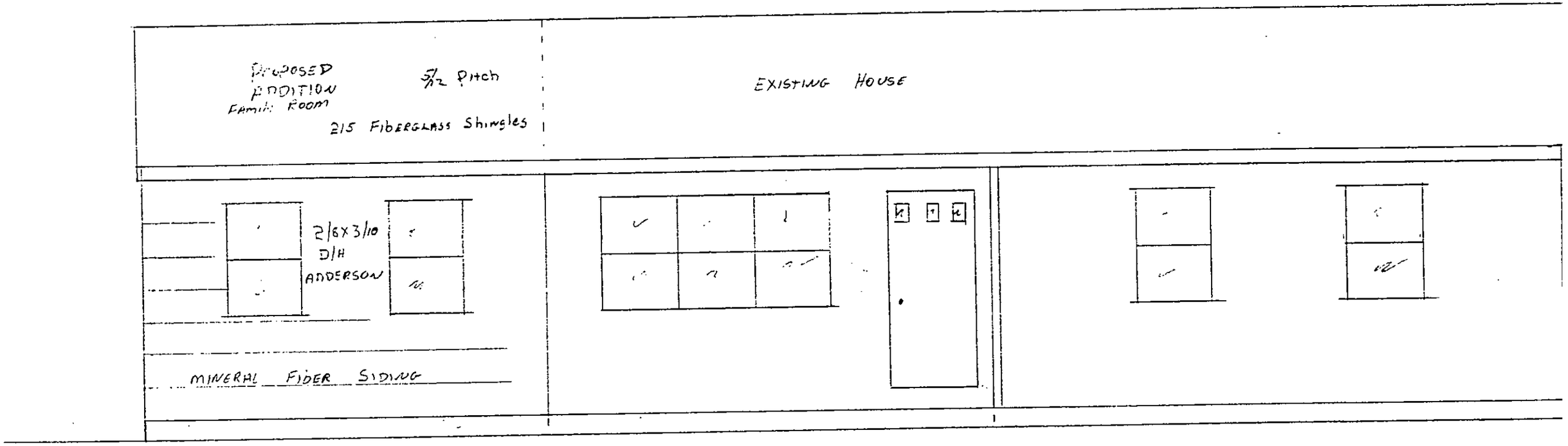
EXISTING HOUSE - CRAWL SPACE

FOUNDATION PLAN SCALE 1/4" = 1'-0"

BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building	1-24-90 WK		
Fire	1-17-90 FE		
Energy			
Electrical			

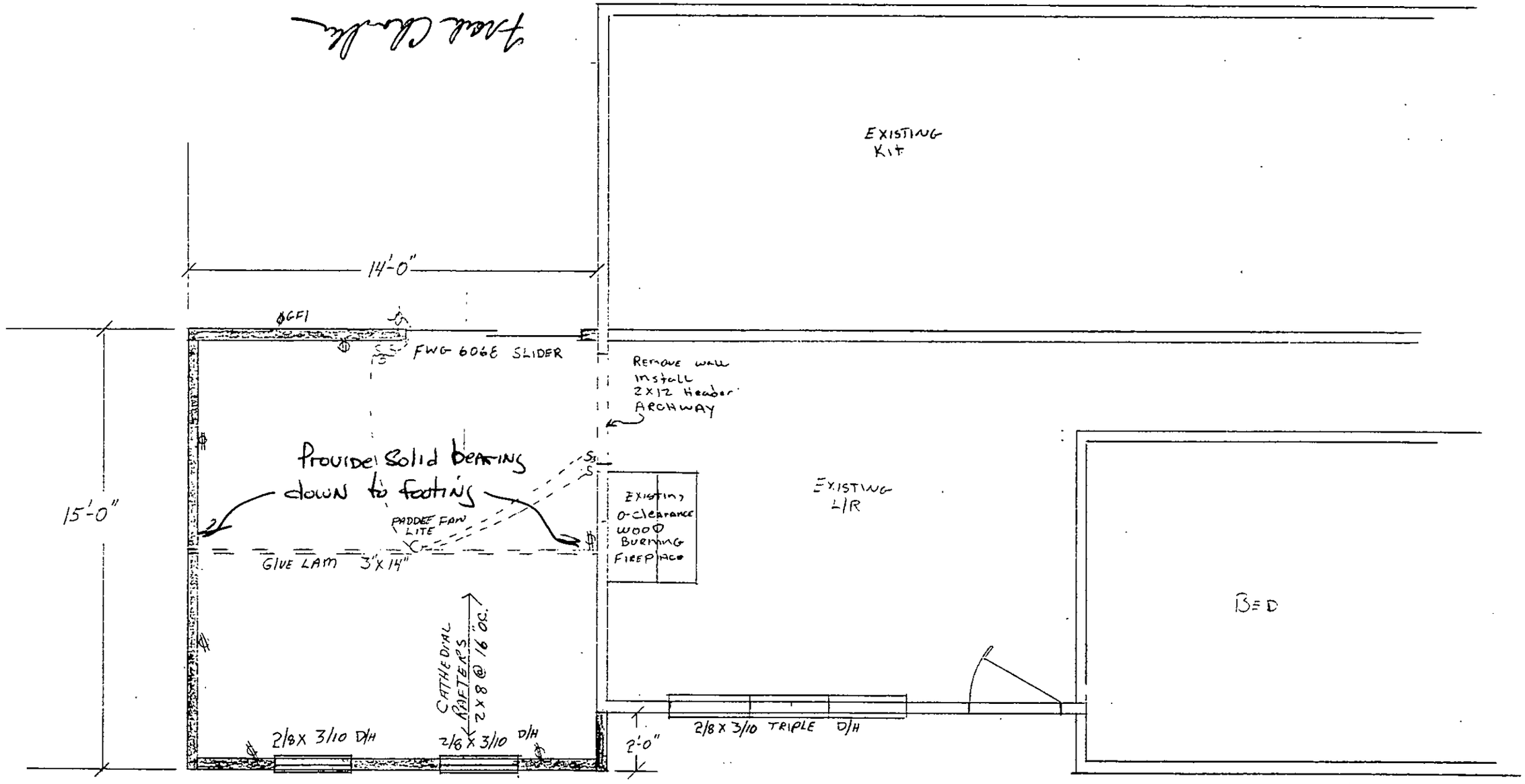
Frank Challer



FRONT ELEVATION SCALE 1/4" = 1'-0"

Frank Chandler

Floor Plan



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