

TOWNSHIP OF MANALAPAN
120 ROUTE 522
MANALAPAN, NJ 07726

Type of Application (Circle One)

Residential Alteration
New Single Family Dwelling
New Two Family Dwelling
New Multi-Family Dwelling
Commercial Alteration
New Commercial Bldg
Sign (Residential or Commercial)
Certificate of Non-Conformity

Circle One: (Sewer/Water) or (Septic/Well)

REQUEST FOR ZONING PERMIT

ADDRESS OF CONSTRUCTION: 93 Wintergreen Dr. BLOCK/LOT: 66.08/65

PROPERTY OWNER: James Gardner TEL#: _____

PROPERTY OWNER'S ADDRESS: 93 Wintergreen Dr. Manalapan, NJ.

E-MAIL ADDRESS: _____

APPLICANT: James Gardner TEL#: _____

APPLICANT'S ADDRESS 93 Wintergreen Dr. Manalapan, NJ

PROPOSED WORK: replace existing deck DIMENSIONS: 26' X 20' X 16'

SET BACKS: Front 20 Rear 10 Sides 10 Street Side 20 NO. OF STORIES: 1 HEIGHT: 20'

SIGNAGE: SQUARE FOOTAGE: 3000 sq ZONE: _____ TOTAL BLDG COVERAGE: 3000

APPROVALS: Zoning Board _____ Planning Board _____ Resolution #: _____

I have read and am familiar with the Codes and Ordinances of Manalapan Township. The proposed project will not constitute nor create a non-conforming use or structure. I will not add nor delete from the requested project specifications without approval. I accept responsibility for any and all violations created by the requested project and understand such violations must be removed and/or abated as directed by the Zoning Officer.

[Signature] J D GARDNER 4/21/14
Property Owner's Signature Print Name Date

Applicant's Signature _____ Print Name _____ Date _____

OFFICE USE ONLY:

APPROVED: ✓ DENIED: _____ PERMIT # 214-0266

REMARKS: _____

Nancy DeFalco 4-25-14
Zoning Officer Date

CERTIFICATE OF ZONING COMPLIANCE

To the best of my knowledge the finished project conforms to the Code and Ordinances of the Township of Manalapan.

APPROVED: _____ DENIED: _____ REMARKS: _____

Zoning Officer _____ Date _____

Four Seasons at Manalapan Homeowners Association

Professionally managed by
Community Management Corporation
44 Palomino Drive
Manalapan, NJ 07726
staticseasons@optonline.net

April 16, 2014

APPROVAL - PLEASE READ IN DETAIL

James Gardner
93 Wintergreen Drive
Manalapan, NJ 07726

Dear *James*,

The Architectural Control Committee has reviewed your recent modification request(s) attached. Your Property Modification Request has been **approved** and you can begin your approved modifications.

Note: beds cannot exceed existing bed dimensions

1. If you live on the east side, please instruct your contractor to enter the community through the Cannonero gate. We prefer heavy equipment be brought through this gate.
2. DO NOT ALLOW ANY STREET VEHICLES OR HEAVY MACHINERY ON ANY SODDED AREA.
3. Your contractor MAY NOT leave his equipment onsite overnight!
4. You may not store any personal property on common areas. No building materials are to be placed on any common areas at any time.
5. **Modifications must be constructed according to the plans submitted.**
6. No additional modifications or deviation may be made without prior Board approval.
7. Proper measures must be taken to not impact the drainage on your property, your neighbor's property or any common property. Any damage caused will be the sole responsibility of the homeowner to restore.
8. A pressure vacuum breaker or a double check valve is required for all mulch bed irrigation or drip systems.
9. If the modification interferes with the irrigation system, **Please contact Down to Earth 800-280-1837 x15.** Please note that you are required to utilize our authorized irrigation contractor for any irrigation work that may be necessary. **You are not permitted to authorize any other contractor to complete any work on the irrigation system.** This regulation is in effect in an effort to prevent any possible future problems with irrigation coverage, operation, etc. Any damage to the landscaping, irrigation system, common area, or neighboring property is your responsibility to repair.
10. Maintenance of any homeowner planted trees, shrubs, etc. is your sole responsibility.
11. You have six (6) months from the date of this letter to **begin** the approved modifications. You have sixty (60) days to **complete** your approved modifications after the work has begun.
12. **You will be subject to all penalties should you fail to adhere to any of the guidelines previously listed.**

The Architectural Control Committee and/or Management must inspect the modified area to return your deposit check.

Please fill out and forward the enclosed form to management upon completion FOR US TO INSPECT YOUR MODIFICATION AND to return your deposit.

Sincerely,
COMMUNITY MANAGEMENT CORPORATION

Dani Kurczeski

Dani Kurczeski, Property Manager, On behalf of the Board of Trustees
FOUR SEASONS AT MANALAPAN HOMEOWNERS ASSOCIATION

Four Seasons at Manalapan Homeowners Association
Modification Request Form – House Exteriors

Please complete ALL of the following forms and checklist to indicate documents, specifications and checks necessary for the modifications that you are requesting for your home or property. Please ensure that all information is provided for the type of modification you are planning. ➔Incomplete forms will be returned to homeowner ➔. This will delay the review process.

Date: 3/18/14
Owners Name: JAMES D. GARDNER
Owners Address: 93 Wintergreen Drive
Owners Phone Number: 732-547-2974 Owners Cell Phone Number: 732-547-2974
Owners Email Address: JDGardner34@gmail.com Best time of day to reach you and method: Any Time - Cell Phone
Signature of all Owners required: [Signature]

In accordance with the Governing Documents of Four Seasons at Manalapan Homeowners Association, Inc., I hereby apply for permission to make the following alterations to the exterior of my home or lot, as detailed below:

Part I - Check ALL the modifications that you are requesting:

Storm Door ☐ Patio ☐ Deck ☒ Walkways ☐ Landscaping ☐ Lighting ☐ Satellite Dish ☐ Solar Panels ☐
Awning ☐ Plumbing ☐ Electrical ☒ Natural Gas Generator ☐ Expanding Plant Beds ☐ Other ☐
NAME OF CONTRACTOR(s): Everseal - Electrical Self.

Modification Details (please describe in detail):

Remove existing Deck and Replace per Attached

There will be no verbal approvals and faxed applications are not accepted. Please note that approval by the Association, if granted, will be subject to any permit or approval required by Manalapan Township.

Please submit the requested information along with this form to:
Four Seasons at Manalapan Homeowners Association, Inc.,
44 Palomino Drive, Manalapan, New Jersey 07726

Approved: [Signature] Disapproved: [Signature] Date: 4/2/14
Reason: _____

1/2014

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Home Owner
ADAMS on
Approval Form

Part II
Homeowner Checklist
The checklist below must be returned with the modification request.

	Application Requirements/Guidelines Check list	INITIAL Items Submitted
1	Please attach detailed information on the work to be performed. Include detailed sketches and/or drawings. Patio/Deck: Detailed drawings must include all dimensions (length and width of patio/deck, wall height and column height from ground), distance from property line (no closer than 10 feet to rear), and location of steps. Specify lighting locations on all patio/deck drawings, including height of any patio/deck lanterns. Specify electrical and plumbing on drawing. Landscaping: Detailed drawings must include width of planting beds and distance of front planting beds to your front sidewalk. Specify existing planting beds dimensions on drawings and maximum height of shrubs/trees. Specify landscape lighting on drawing.	
2	Satellite Dish: Please indicate where the satellite dish will be mounted. Provide details on materials that will be used, including colors and dimensions, as appropriate.	
3	Provide name of contractor(s) performing the work Provide executed "Contractor / Resident Agreement" – <u>FOR ALL CONTRACTORS</u>	
4	Attach a current <u>Certificate of Insurance</u> for <u>each</u> contractor performing work. Please see attached SAMPLE "Certificate of Liability Insurance" document with the required verbiage. <u>Please do not write on the certificate. Insurance certificates for EACH tradesman must be submitted with your application – please DO NOT FAX to the Management office.</u>	
5	Submit your FULL SCALE "AS BUILT" lot survey for patio, deck, walkway and landscape modification requests.	
6	<u>A security deposit is required for all modification requests. Please make checks payable to: Four Seasons at Manalapan Homeowners Association.</u> <u>A \$500 security deposit must be included on all patio, deck, and walkway requests for approval. A \$200 security deposit must be attached to all other requests, such as landscaping, electrical, plumbing. An application with any combined requests should include a \$700 security deposit.</u> <u>These checks WILL BE deposited into the association account & refunded provided all requirements are in compliance.</u> <u>**Such refund will be made within 30 days after Architectural Control Committee sign-off and approval.</u>	
7	<u>For Plant Bed Expansion, attach a check for \$75. *There is an additional cost if lateral lines feeding the sprinkler heads need to be relocated (Typically in beds being expanded more than 3'). Make check payable to Down To Earth to relocate the sprinkler system. The homeowner is required to contact Down To Earth to schedule the work. *If Down To Earth is the contractor, no check is required.</u> <u>For patio/deck requests, attach a check for \$275 payable to Down To Earth to relocate the sprinkler system LINES. The homeowner is required to contact Down To Earth to schedule the work. *If Down To Earth is the contractor, no check is required.</u> <u>For BOTH, attach a check for \$350 payable to Down To Earth. *There is an additional cost if lateral lines feeding the sprinkler heads need to be relocated.</u>	 APR 16 2014 PAGE 2 OF 2 F S @ M HOA
8	<u>For Natural Gas Generator,</u> attach Acknowledgement of Noise Restrictions signed by all owners of the home.	 APR 02 2014 PAGE 2 OF 2

CONTRACTOR / RESIDENT AGREEMENT

1. Wet saws **MUST** be used for cutting pavers and concrete! New Jersey Law, NJSA 34:5-182, prohibits dry cutting and dry grinding of masonry materials.
2. If you live on the east side, please instruct your contractor to enter the community through the Cannonero gate. We prefer heavy equipment be brought through this gate.
3. DO NOT ALLOW ANY STREET VEHICLES OR HEAVY MACHINERY ON ANY SODDED AREA.
4. Your contractor **MAY NOT** leave his equipment onsite overnight!
5. Signage posted on or around the property promoting your contractor is prohibited.
6. You may not store any personal property on common areas. No building materials are to be placed on any common areas at any time. Your property ends at the end of your driveway. **NO MATERIAL MAY BE PLACED ON THE STREET!**
7. Modifications must be constructed according to the plans submitted. Modifying property that does not belong to you **will be an issue**. This includes, but is not limited to; removing / replacing common bed landscaping with your own choice of material, creating mulched paths or changing the state of original "save tree" areas onsite, etc. Despite any approved plans, the homeowner and contractor are responsible for ensuring the modification complies with all legal requirements.
8. No additional modifications or deviation may be made without prior Board approval.
9. Proper measures must be taken to not impact the drainage on your property, your neighbor's property or any common property. Any damage caused will be the sole responsibility of the homeowner to restore.
10. A pressure vacuum breaker or a double check valve is required for all mulch bed irrigation or drip systems.
11. If the modification interferes with the irrigation system, **Please contact Down to Earth 800-280-1837 x15. PLEASE NOTE THAT YOU ARE REQUIRED TO UTILIZE OUR AUTHORIZED IRRIGATION CONTRACTOR FOR ANY IRRIGATION WORK THAT MAY BE NECESSARY.** NJ Law states a contractor must be licensed with irrigation to handle irrigation. You are not permitted to authorize any other contractor to complete any work on the irrigation system. This regulation is in effect in an effort to prevent any possible future problems with irrigation coverage, operation, etc. Any damage to the landscaping, irrigation system, common area, or neighboring property is your responsibility to repair.
12. You have six (6) months from the date of this letter to **begin** the approved modifications. You have sixty (60) days to **complete** your approved modifications after the work has begun.
13. As per township ordinance 195-9, **NO** contractors can work on Sundays.
14. Homeowners are responsible to check that all permits are obtained before work begins on their property.
15. You will be subject to all penalties should you fail to adhere to any of the guidelines previously listed.

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I have read the above and agree to abide by ALL terms and conditions set forth;

Homeowner Name: Mr. Gardner Address: 93 Wintergreen DR

Homeowner Signature: [Signature]

Contractor (1) Name: [Signature] Contractor Signature: [Signature]

Contractor (2) Name: Ever Seal Contractor Signature: _____

Contractor (3) Name: _____ Contractor Signature: _____



CERTIFICATE OF LIABILITY INSURANCE

EVERS-1 OP ID: TP

DATE (MM/DD/YYYY)
01/20/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Alliance Risk Management, LLC P.O. Box 671 Englishtown, NJ 07728 Joe Martinez	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: Selective Way INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED EVERSEAL CONSTRUCTION CO LLC 1643 Glandola Rd. WALL TWP, NJ 07719	NAIC # 816

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR VWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC	X		S 1949996	09/10/2013	09/10/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMPOD AGG \$ 3,000,000
	☐ AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ HIRED AUTOS ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$
	☐ UMBRELLA LIAB ☐ EXCESS LIAB ☐ OCCUR ☐ CLAIMS-MADE						EACH OCCURRENCE \$ AGGREGATE \$
	☐ DED ☐ RETENTIONS						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				WC STATUTORY LIMITS E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Four Seasons at Manalapan Homeowners Association is included as an additional insured as per written contract.

CERTIFICATE HOLDER

CANCELLATION

Four Seasons at Manalapan Homeowners Association 44 Palomino Drive Manalapan, NJ 07726	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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* updated one included



CERTIFICATE OF LIABILITY INSURANCE

EVERS-1 OP ID: TP

DATE (MM/DD/YYYY)
04/14/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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PRODUCER
Alliance Risk Management, LLC
P.O. Box 671
Englishtown, NJ 07726
Joe Martinez

CONTACT NAME:	
PHONE (A/C, H/O, E/O):	
FAX (A/C, H/O):	
EMAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE	NAME
INSURER A: Selective Way	816
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURER
EVERSEAL CONSTRUCTION CO LLC
1643 Glendola Rd.
WALL TWP, NJ 07719

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURER	POLICY NUMBER	POLICY EFF. DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR	X	S 1949988	09/10/2013	09/10/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMPOF AGG \$ 3,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PER-ACCIDENT ☐ LOG					
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALLOWED AUTOS ☐ Hired AUTOS ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$
	UMBRELLA LIAB ☐ EXCESS LIAB ☐ OCCUR ☐ CLAIMS-MADE					EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? (Mark "any" in NH) If yes, describe below: DESCRIPTION OF OPERATIONS below	Y/N ☐	N/A			WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
re: James Douglas Gardner, construction of wooden deck to rear of residence and concrete patio, 93 Wintergreen Drive Four Seasons at Manalapan Homeowners Association and James Douglas Gardner are included as additional insured as per written contract.

CERTIFICATE HOLDER

CANCELLATION

Four Seasons at Manalapan
Homeowners Association
44 Palomino Drive
Manalapan, NJ 07726

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Existing Dwelling

40'

12'1"

14'6"

Existing
6/0 Slider

Sun Room

13'3"

TimberTech Decking
Tigerwood : color
Mocha Accents
Existing Deck Area

TimberTech Post Lighting
AND STEP Lighting (Accent)

Deck Height - 9' (SAME AS EXISTING)
Post Height - 8' (" " ")

No electrical OR Plumbing
OPEN TO GROUND LEVEL
OFF Sun Room

10' To Prop Line

Proposed Deck Addition

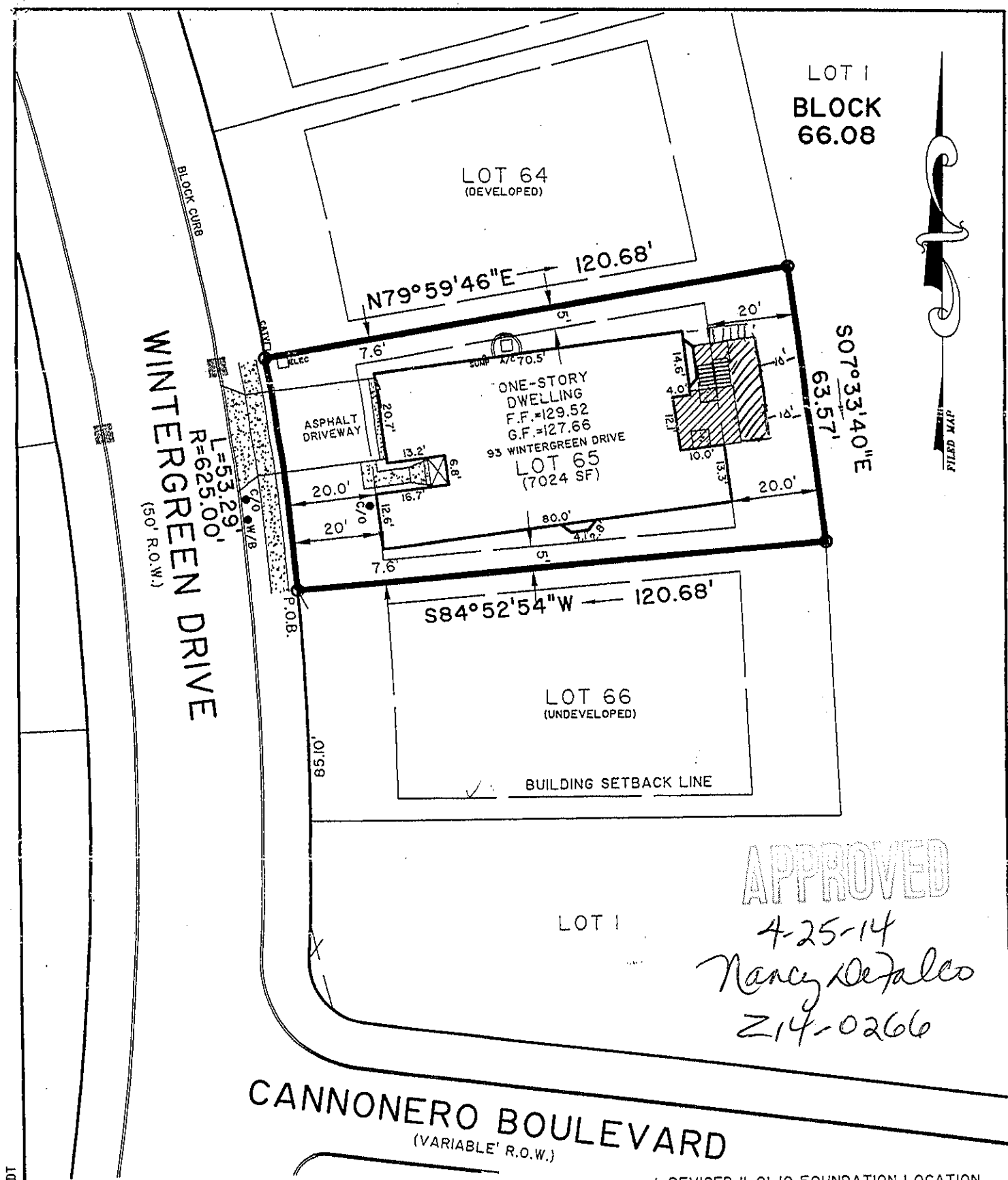
Support Column

26'9"

↓ DN

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Y:\6056\SURVEY\FINAL SURVEYS 3-7\BLDG628.dwg 4/7/2014 9:28:14 AM EDT

NOTES:
1) BEING KNOWN AND DESIGNATED AS LOT 65, BLOCK 66.08, SITUATED IN THE TOWNSHIP OF MANALAPAN, MONMOUTH COUNTY, NEW JERSEY, AS SHOWN AND ILLUSTRATED ON A CERTAIN MAP ENTITLED "FINAL PLAT - MAJOR SUBDIVISION, FOUR SEASONS AT MANALAPAN - PHASE 3, 4, 5, 6 & 7, LOT 7.01, 9, 13 & 14, BLOCK 66, TOWNSHIP OF MANALAPAN, MONMOUTH COUNTY, N.J.", PREPARED BY NAJARIAN ASSOCIATES DATED 7-18-05, REVISED TO 9-06-06, FILED IN THE MONMOUTH COUNTY CLERK'S OFFICE ON 7-05-07 AS CASE NO. 304 SHEETS 33-35 AND 305 SHEETS 1-5 (8 SHEETS).
2) OFFSET DIMENSIONS FROM FOUNDATION TO PROPERTY LINES SHOWN HEREON NOT TO BE USED TO ESTABLISH PROPERTY LINES.
3) O DENOTES PROPERTY CORNER TO BE SET.

1. REVISED 11-01-10 FOUNDATION LOCATION
2. REVISED 4-12-11 FINAL SURVEY

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ASBUILT SURVEY - BLDG # 628

JAMES DOUGLAS GARDNER
K. HOVNANIAN AMERICAN MORTGAGE, LLC, ITS SUCCESSORS AND/OR ASSIGNS
AS THEIR INTEREST MAY APPEAR
EASTERN TITLE AGENCY, INC.
FIRST AMERICAN TITLE INSURANCE COMPANY

IN CONSIDERATION OF THE FEE PAID FOR MAKING THIS SURVEY, I HEREBY DECLARE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF, AND IN MY PROFESSIONAL OPINION THIS SURVEY IS ACCURATE (EXCEPT SUCH EASEMENTS, IF ANY, THAT MAY BE LOCATED BELOW THE SURFACE OF THE LANDS AND NOT VISIBLE) AS AN INDUCEMENT FOR ANY INSURER OF TITLE TO INSURE THE TITLE TO THE LANDS AND PREMISES SHOWN HEREON.

Harry J. Widdis
N.J. LAND SURVEYOR LICENSE NO. 26384
HARRY J. WIDDIS

**FOUR SEASONS AT MANALAPAN
PHASE 7**

LOT 65 BLOCK 66.08
TOWNSHIP OF MANALAPAN
MONMOUTH COUNTY NEW JERSEY

Najarian
Associates

Professional Engineers, Land Surveyors & Planners - Scientists
One Industrial Way West, Eatontown, New Jersey 07724
(732) 389-0220 • Facsimile No. (732) 389-0540

DATE: 8-16-10	SCALE: 1"=30'	DWG. NO. 6056
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