

04-18-14P01:08 RCVD

**V. FEE SUMMARY (for office use only)**

| V. FEE SUMMARY (for office use only) |           | Update | Update |
|--------------------------------------|-----------|--------|--------|
| 1. Building                          | \$ 82.50  |        |        |
| 2. Electrical                        |           |        |        |
| 3. Plumbing                          |           |        |        |
| 4. Fire Protection                   |           |        |        |
| 5. Elevator Devices                  |           |        |        |
| 6. Subtotal                          |           |        |        |
| 7. Less 20% for State Plan Review    | \$        |        |        |
| 8. Subtotal                          | \$        |        |        |
| 9. State Permit Surcharge Fee        | \$ 9.00   |        |        |
| 10. Subtotal                         | \$        |        |        |
| 11. Cert. of Occupancy               | \$ 75.00  |        |        |
| 12. Other                            |           |        |        |
| 13. TOTAL                            | \$ 166.50 |        |        |

VI. BUILDING/SITE CHARACTERISTICS

|                                               |                             |         |
|-----------------------------------------------|-----------------------------|---------|
| 1. Number of Stories                          | <u>SINGLE</u>               |         |
| 2. Height of Structure                        | <u>8.75</u>                 | ft.     |
| 3. Area — Largest Floor                       | <u>343</u>                  | sq. ft. |
| 4. New Building Area                          | <u>343</u>                  | sq. ft. |
| 5. Volume of New Structure                    | <u>2,744</u>                | cu. ft. |
| 6. Max. Live Load                             | <u>60 PSF</u>               |         |
| 7. Max. Occupancy Load                        |                             |         |
| 8. If Industrialized Building: State Approved |                             | HUD     |
| 9. Total Land Area Disturbed                  | <u>0</u>                    | sq. ft. |
| 10. Flood Hazard Zone                         |                             |         |
| 11. Base Flood Elevation                      |                             | ft.     |
| 12. Wetlands                                  | yes <u>    </u> no <u>X</u> |         |

(office use only)

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: 3 SEASON ENCLOSURE

2. Use Group, Proposed: \_\_\_\_\_

3. Change in Use Group, Indicate Present: \_\_\_\_\_

4. No. of dwelling units: Total Units Income-restricted

| Gained, Sale   | _____ |
|----------------|-------|
| Gained, Rental | _____ |
| Lost, Sale     | _____ |
| Lost, Rental   | _____ |

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: \_\_\_\_\_

2. Use Group, Proposed: \_\_\_\_\_

3. Change in Use Group, Indicate Present: \_\_\_\_\_

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

D. Construct. Classification: Present \_\_\_\_\_

Proposed \_\_\_\_\_

|                                                                                                                                                        |  |                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                        |                                         |                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------|
| <b>III. PLAN REVIEW (optional)</b><br>DO YOU WANT:<br>1. <input type="checkbox"/> Partial Releases<br>2. <input type="checkbox"/> Prototype Processing |  | <b>IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?</b> <i>No</i> <i>299</i>                                                                                                 |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                        |                                         | Proposed _____ |
|                                                                                                                                                        |  | 1. <input type="checkbox"/> Elevators/Escalators/Lifts/<br>Dumbwaiters/Moving Walks<br>2. <input type="checkbox"/> High Pressure Boilers<br>3. <input type="checkbox"/> Pressure Vessels | 4. <input type="checkbox"/> Refrigeration Systems<br>5. <input type="checkbox"/> Cross-Connections/Backflow Preventers<br>6. <input type="checkbox"/> Hazardous Uses/Places of Assembly<br>7. <input type="checkbox"/> Sprinklers/Standpipes | 8. <input type="checkbox"/> Smoke Control Systems in Open Wells<br>9. <input type="checkbox"/> Underground Storage Tanks<br>10. <input type="checkbox"/> Swimming Pools, Spas and Hot Tubs<br>11. <input type="checkbox"/> LPGas Tanks | 12. <input type="checkbox"/> Fire Alarm |                |



Brick Township  
401 Chambersbridge Rd  
Brick, NJ 08723

Date Issued 9/19/2014  
Control Number C-14-001497  
Permit Number 14-2007  
Permit Issue Date 6/27/2014  
Certificate Number 14-2007

## Certificate

Construction Code Division  
(Certificate of Occupancy)

### Identification

Work Site Location: 958 RIDGE ROAD Brick Township, NJ Block: 1422.17 Lot: 5 Qual: \_\_\_\_\_  
Owner in Fee: GERRITY, MICHAEL P & KATHLEEN M  
Owner Address: 958 RIDGE RD BRICK NJ 08724  
Telephone: [REDACTED]  
Contractor Frank D. Crisci Sr. Home Improvement  
Address 99 Lighthouse Dr. Waretown NJ 08758  
Telephone: (609) 693-1586 Fax: \_\_\_\_\_  
License Number or Builders Registration Number: 13VH00966600 Federal Emp. Number: \_\_\_\_\_

Home Warranty Number: \_\_\_\_\_

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: \_\_\_\_\_

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: SUNROOM ADDITION

Certificate Comments:

☒ **Certificate of Occupancy**

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

☐ **Certificate of Approval**

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

☐ **Certificate of Continued Occupancy**

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

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

**Conditions to be met:**

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

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work  
☐ Partial or limited time period ( \_\_\_\_\_ years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

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

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

☐ **Certificate of Compliance**

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

☐ **Temporary Certificate of Occupancy**

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

**Conditions to be met:**

*David Newman Jr*

Construction Official

Fee: \$75.00

Check Number: 11011

Collected By: Nichol Ponsi



# Receipt

Payment Date 9/19/2014

Transaction # PMT-14-07417

Receipt #

**Issued To** MICHAEL GERRITY

Description FINAL AFFORDABLE HOUSING PAYMENT  
958 RIDGE ROAD  
BLK 1422.17. LOT 5

Date Printed 9/19/2014

Check Number 11046

Cash \$0.00

Check \$60.00

Charge \$0.00

Total Paid \$60.00



# Council on Affordable Housing (COAH) Fee

Block: 1422.17 Lot: 5.958 RIDGE ROAD

General Fees Payments

General

Date: 05/05/2014 Application Type: Residential Application Number: ZA-14-00404

Values

Sq. Ft.: 343  
Cost / Sq. Ft.: 41  
Estimated Assessed Value: 14063  
Actual Assessed Value:  
Equalized Value: 13000  
Land Value:

- ☐ Use Cost / Sq. Ft. for Calculation
- ☒ Use % of Assessed Value for Calculation

Contributions

Initial % Due: 0.5  
% Required: 1  
Estimated Contribution Fee: 140.63  
Actual Contribution Fee: 0

- ☒ Use Estimated Fee for Payment Due
- ☐ Use Actual Fee for Payment Due

Notes

PRELIM FEE \$70.00

penal due \$70.00

OK Cancel



# BUILDING SUBCODE TECHNICAL SECTION



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

Block 1422.17 Qualification Code 5

Work Site Location 958 RIDGE ROAD  
BRICK, NJ 08724

Owner in Fee: MICHAEL P GERRITY

Tel. 958 RIDGE ROAD e-mail BRICK 1 08724

Contractor: FRANK D. CRISI, SR. Tel. (609) 693-1586

Address: WAREHOUS, NJ e-mail

Contractor License No. or Builder Registration No. 13VH0096600 Exp. Date 2/31/2014

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

Federal Emp. ID No.  FAX: (  )

| JOB SUMMARY (Office Use Only)                            |                 | PLAN REVIEW                                                                                                                    |         | INSPECTIONS       |         |
|----------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------|---------|-------------------|---------|
| Date                                                     | Initial         | Type:                                                                                                                          | Failure | Dates (Month/Day) | Initial |
| <u>6/25/14</u>                                           | <u>iw</u>       | <input checked="" type="checkbox"/> All                                                                                        |         |                   |         |
|                                                          |                 | <input type="checkbox"/> Footings/Foundations                                                                                  |         |                   |         |
|                                                          |                 | <input type="checkbox"/> Structural/Framework                                                                                  |         |                   |         |
|                                                          |                 | <input type="checkbox"/> Exterior                                                                                              |         |                   |         |
|                                                          |                 | <input type="checkbox"/> Interior                                                                                              |         |                   |         |
|                                                          |                 | <input type="checkbox"/> Joint Plan Review Required:                                                                           |         |                   |         |
|                                                          |                 | <input type="checkbox"/> Elec. <input type="checkbox"/> Plumb. <input type="checkbox"/> Fire <input type="checkbox"/> Elevator |         |                   |         |
|                                                          |                 | SUBCODE APPROVAL for PERMIT                                                                                                    |         |                   |         |
| Date:                                                    | <u>06/26/14</u> | Finishes -Base Layer                                                                                                           |         |                   |         |
|                                                          |                 | Finishes -Final                                                                                                                |         |                   |         |
| Approved by:                                             | <u>iw</u>       | Energy                                                                                                                         |         |                   |         |
|                                                          |                 | Mechanical                                                                                                                     |         |                   |         |
| SUBCODE APPROVAL for CERTIFICATE                         |                 | TCO                                                                                                                            |         |                   |         |
| <input type="checkbox"/> CO <input type="checkbox"/> CCO | <u>1/1/CA</u>   | Other                                                                                                                          |         |                   |         |
| Date:                                                    | <u>08/26/14</u> | Barrier-Free                                                                                                                   |         |                   |         |
| Approved by:                                             |                 |                                                                                                                                |         |                   |         |

## B. BUILDING CHARACTERISTICS

| Use Group Present                    | Proposed | Constr. Class Present           | Proposed |
|--------------------------------------|----------|---------------------------------|----------|
| No. of Stories <u>1</u>              |          | If Industrialized Building:     |          |
| Height of Structure <u>8.25</u>      |          | State Approved                  | HUD      |
| Area — Largest Floor <u>343</u>      |          | Est. Cost of Bldg. Work:        |          |
| New Bldg. Area/All Floors <u>343</u> |          | 1. New Bldg. \$ <u>17,300</u>   |          |
| Volume of New Structure <u>2,144</u> |          | 2. Rehabilitation \$ <u></u>    |          |
| Max. Live Load <u></u>               |          | 3. Total (1+2) \$ <u>17,300</u> |          |
| Max. Occupancy Load <u></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.

Sign here: Frank D. Crisi Sr.

Print name here: FRANK D. CRISI SR.

## D. TECHNICAL SITE DATA

### DESCRIPTION OF WORK

ALUMINUM 3 SEASON ENCLOSURE  
13'-10" X 24'-4" INSTALLED  
ON AN EXISTING DECK

### TYPE OF WORK:

- ☐ New Building
- ☒ Addition
- ☐ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence \_\_\_\_\_ Height (exceeds 6') \_\_\_\_\_ Sq. Ft.
- ☐ Sign \_\_\_\_\_ Sq. Ft.
- ☐ Pool
- ☐ Retaining Wall \_\_\_\_\_ Sq. Ft.
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☐ Other \_\_\_\_\_
- ☐ Demolition

### FEE (Office Use Only)

|                               |  |
|-------------------------------|--|
| Administrative Surcharge \$   |  |
| Minimum Fee \$                |  |
| State Permit Surcharge Fee \$ |  |
| TOTAL FEE \$                  |  |

Date Received 6/27/14  
Control # 14-2007  
Date Issued  
Permit #

ADDRESS: 958 Ridge Road

Township of Brick

Department of Land Use and Community Development

**Construction Permit Fees:**

|                                 |               |
|---------------------------------|---------------|
| Building                        | \$ <u>82</u>  |
| Electric                        | \$ <u>—</u>   |
| Plumbing                        | \$ <u>—</u>   |
| Fire                            | \$ <u>—</u>   |
| State permit Fee                | \$ <u>9</u>   |
| Certificate of Occupancy Fee    | \$ <u>75</u>  |
| Prototype Processing (less 20%) | \$ <u>—</u>   |
| State plan Review (less 20%)    | \$ <u>—</u>   |
| Subtotal                        | \$ <u>166</u> |

**Prior Approval Fees:**

|                  |               |
|------------------|---------------|
| Zoning           | \$ <u>50</u>  |
| Engineering      | \$ <u>—</u>   |
| Subtotal         | \$ <u>50</u>  |
| Total Permit Fee | \$ <u>216</u> |

Please note payment for permits and affordable housing are SEPARATE.

**Affordable Housing Fees:**

|             |              |
|-------------|--------------|
| Preliminary | \$ <u>70</u> |
| Final       | \$ <u>—</u>  |

Caller Name Launer

Date 6/27/14

Spoke To (i.e. h/o or contr.) Contr.

Time —



# Receipt

Payment Date 6/27/2014

Transaction # PMT-14-04802

Receipt #

**Issued To** MICHAEL P GERRITY

Description PRELIMINARY AFFORDABLE HOUSING  
BLOCK 1422.17 LOT 5  
958 RIDGE ROAD

Date Printed 6/27/2014

Check Number 11012

Cash \$0.00

Check \$70.00

Charge \$0.00

Total Paid \$70.00



# CONSTRUCTION PERMIT

Date Issued 6/27/14  
Control # C-14-001497  
Permit # 14-2007

IDENTIFICATION Block: 1422.17 Lot: 5 Qualifier \_\_\_\_\_  
Work Site Location: 958 RIDGE ROAD Brick Township, NJ Contractor Frank D. Crisci Sr. Home Improvement  
Address 99 Lighthouse Dr. Waretown NJ 08758  
Owner in Fee GERRITY, MICHAEL P & KATHLEEN M Telephone: (609) 693-1586  
958 RIDGE RD. BRICK NJ 08724 Lic. No. or Bldrs. Reg. No. 13VH00966600  
Telephone: \_\_\_\_\_ Federal Employee No. \_\_\_\_\_

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

SUNROOM ADDITION

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 \$17,300

Daniel Newman Jr.  
Construction Official

6/26/14  
Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

## PAYMENTS (Office Use Only)

|                  |              |
|------------------|--------------|
| Building         | \$82         |
| Electrical       | \$0          |
| Plumbing         | \$0          |
| Fire Protection  | \$0          |
| Elevator Devices | \$0          |
| Other            | \$0.00       |
| DCA Training Fee | \$9          |
| CO Fee           | \$75.00      |
| Other            | \$0          |
| Total            | \$166        |
| Check No.        | <u>11011</u> |
| Cash             | \$0          |
| Credit           | \$0          |
| Collected By     |              |

150  
216

## REQUIRED INSPECTIONS

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

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

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

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

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

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

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

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

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

RECEIVING CLERK CE **ZONING PERMIT APPLICATION** PERMIT # 2014-091607  
DATE REC'D 4-18-14

BLOCK: 1422.17 LOT: 5 QUALIFIER: --- SITE ADDRESS: 958 Ridge Road, Belick, NJ

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Michael Patrick Geerity  
COMPLETE ADDRESS: 958 Ridge Road  
Belick, NJ

PHONE: [REDACTED] EMAIL: [REDACTED]

2. NAME OF APPLICANT: Michael P. Geerity  
APPLICANT ADDRESS: 958 Ridge Road  
Belick, NJ 08724  
PHONE: [REDACTED] MAIL: [REDACTED]

3. RESPONSIBLE PERSON FOR WORK: Frank D. Cersci, SR  
PHONE# 609 693 1586 FAX# ---

4. SIGNATURE OF APPLICANT: Michael P. Geerity

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 50 --  
OTHER: \$ ---  
TOTAL: \$ ---

REQUIRED BY APPLICANT

RESIDENTIAL: X  
COMMERCIAL: ---  
EXISTING USE: SFP  
PROPOSED USE: 3 SEASON ENCLOSURE SFP

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

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

\*NEW BUILDING: --- \*ADDITION ✓ \*ALTERATION --- \*PORCH --- \*DECK ---

POOL: ABOVE GROUND --- IN GROUND --- FENCE: HEIGHT --- TYPE --- MATERIAL ---

HEIGHT: 106" (\*IF APPLICABLE)

OTHER: ---

DESCRIPTION: 3 SEASON SCREENED ENCLOSURE 24'-4" x 13'-10"

ZONING REVIEW: 5/5/14 DATE REVIEWED: --- DATE DENIED: --- DATE APPROVED: 5/5/14 INTLS: MS20 (SEE BACK PAGE)

RECEIVED  
MAY 5 2014  
WCH

**MAY 5 2014**

Zona's

06/14

1

**DATE APPROVED:**

6/5/14

**INTLS:**

55

**INITIALS:**



Brick Township  
401 Chambers Bridge Rd.

Brick, NJ 08723  
(732) 262-1027

Date Issued:

Application Number: ZA-14-00404

Application Date: 04/28/2014

Project Number:

Permit Number: 2P14-00607

Fee:

\$50

## Zoning Permit

Worksite **958 RIDGE ROAD**  
Location: **Riverpointe**  
**Brick Township, NJ 08724**

Block: 1422.17  
Lot: 5  
Qualifier: \_\_\_\_\_  
Zone: R-20

Owner: **GERRITY, MICHAEL P & KATHLEEN M**  
Address: **958 RIDGE RD**  
**BRICK, NJ 08724**

Applicant: **GERRITY, MICHAEL P & KATHLEEN M**  
Address: **958 RIDGE RD**  
**BRICK, NJ 08724**

Application Approved Date: 05/05/2014

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

Use is: Single-Family Residential Cluster Development

Nonconforming Use is: \_\_\_\_\_

Work Description:

**Sunroom - 24.4' X 13.10' X 8.8' High**

**343 sq. ft.**

**The sunroom must be set back at least 12 feet from the side property lines and at least 35 feet from the rear property line.**

Upon review it was determined that the Zoning Permit:

- ☒ Permitted by Ordinance
- ☐ Permitted by Variance approved on: \_\_\_\_\_
- ☐ Valid Nonconforming Use is established by
  - ☐ Zoning Board of Adjustment
  - ☐ Zoning Officer

Sean Kinney  
Zoning Officer, Sean Kinney

05/05/2014

Date

Michael P. Fowler  
Michael P. Fowler, Township Planner

5/7/14  
Date

# BODINDARY SURVEY OF LOT 5, BLOCK 1422.17 BRICK TOWNSHIP, OCEAN COUNTY, N.J.

S 05° 22' 08" W

100.00'



LOT 5, BLOCK 1422.17

15,000 SQ. FT.

69'

Proposed 13'-10" x 24'-4"  
3-SEASON  
ENCLOSURE

N 84° 38' 52" W  
150.00'

APPROVED FOR ZONING ONLY  
JAN KINNEY, ZONING OFFICER

MAY 05 2014

35 room

RIDGE ROAD

2 STORY FRAME  
HOUSE NO. 958

R=100'  
DEL=90°  
L=157.08'

GRAVEL  
DRIVE

TRANSFORMER

N 05° 22' 08" E

100.00'

RIDGE ROAD (50' R.O.W.)

CERTIFY TO: MICHAEL P. GERRITY & KATHLEEN M. GERRITY, HIS WIFE  
CHEMICAL BANK N.A., ITS SUCCESSORS AND/OR ASSIGNS  
COASTAL TITLE AGENCY, INC.  
MICHAEL A. ALFIERI, ESQ.

LOT 15, BLOCK 1422.17 IS AS SHOWN ON A FINAL PLAT ENTITLED  
"RIVERPOINTE" FILED IN THE OCEAN COUNTY CLERK'S OFFICE ON  
12/27/88 AS MAP NO. 1-2128.

HARBOR CONSULTANTS  
VICTOR VINEGRA  
PROFESSIONAL ENGINEER & LAND SURVEYOR  
444 PINE AVENUE  
BARHOD, N.J. 07927  
785-2045  
N.J. LIC. NO. 11658  
SCALE: 1"=20' DATE: 3/15/92

**\*\* Transmit Confirmation Report \*\***

P.1  
BRICK TWP BUILDING DEP Fax:732-262-2941

May 29 2014 10:15am

| Name/Fax No. | Mode   | Start      | Time  | Page | Result | Note |
|--------------|--------|------------|-------|------|--------|------|
| 7326060069   | Normal | 29,10:14am | 0'41" | 1    | O K    |      |



Brick Township  
401 Chambersbridge Rd  
Brick, NJ 08723  
(732) 262-1030

**Subcode Official Review**

Date: Friday, May 23, 2014

To: GERRITY, MICHAEL P & KATHLEEN M  
958 RIDGE RD  
BRICK, NJ 08724

RE: Building Subcode  
Block: 1422.17 Lot: 5 Qual:  
958 RIDGE ROAD  
Permit Number: Control Number: C-14-001497  
Last Submit Date: Wednesday, May 14, 2014

Dear GERRITY, MICHAEL P & KATHLEEN M,  
Your request is hereby denied based upon the following infractions.  
Provide connection details from bottom track to deck.

Sincerely,

---

Michael Vecchio

CC:



Brick Township  
401 Chambersbridge Rd  
Brick, NJ 08723  
(732) 262-1030

### Subcode Official Review

Date: Thursday, June 19, 2014

To: GERRITY, MICHAEL P & KATHLEEN M  
958 RIDGE RD  
BRICK, NJ 08724

RE: Building Subcode  
Block: 1422.17 Lot: 5 Qual:  
958 RIDGE ROAD  
Permit Number: Control Number: C-14-001497  
Last Submit Date: Wednesday, June 18, 2014

Dear GERRITY, MICHAEL P & KATHLEEN M,

Your request is hereby denied based upon the following infractions.

Provide connection details which can be realized with the on center spacing of the deck joists.

Double joists under tracks where they are perpendicular or define parameters of installation further.

Sincerely,

\_\_\_\_\_  
Michael Vecchio

CC:

Page 1

|              |        |            |       |      |        |      |
|--------------|--------|------------|-------|------|--------|------|
| 7326060069   | Normal | 20,11:49am | 0'41" | 1    | OK     |      |
| Name/Fax No. | Mode   | Start      | Time  | Page | Result | Note |

P.1  
BRICK TWP BUILDING DEP Fax: 732-262-2941  
Jun 20 2014 11:50am  
\*\* Transmit Confirmation Report \*\*

# ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: CU  
PERMIT #: 14-0094

BLOCK: 1422.17 LOT: 5 ADDRESS: 958 Ridge Road

## IDENTIFICATION:

1. WORK SITE ADDRESS: 958 Ridge Road, Beek

2. NAME OF OWNER IN FEE: Michael P. Gerecht

ADDRESS: 958 Ridge Rd PHONE [REDACTED]

FAX #: ( )

3. PRINCIPAL CONTRACTOR: Frank D. Ceisci, SR.

ADDRESS: Waretown, NJ PHONE: 1-800-1500

FAX #: ( )

4. ARCHITECT OR ENGINEER:

ADDRESS: PHONE: ( )

5. RESPONSIBLE PERSON FOR WORK: Frank D. Ceisci, SR.

ADDRESS: Waretown, NJ

PHONE #: 609-593-586 FAX #: ( ) E-MAIL: \_\_\_\_\_

## FEE SUMMARY:

APPLICATION FEE: \$ \_\_\_\_\_

REVIEW FEE: \$ \_\_\_\_\_

INSPECTION FEE: \$ \_\_\_\_\_

OTHER: \$ \_\_\_\_\_

BONDS: \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

## SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: \_\_\_\_\_

DRAINAGE EASEMENTS: \_\_\_\_\_

UTILITY EASEMENTS: \_\_\_\_\_

CONSERVATION EASEMENTS: \_\_\_\_\_

FEMA REQUIREMENTS: \_\_\_\_\_

D.E.P. PERMITS: \_\_\_\_\_

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: \_\_\_\_\_

APPROVED DATE: \_\_\_\_\_

## ENGINEERING REVIEW:

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☒ DWELLING ☐ TREE REMOVAL

LENGTH: 14'-10" WIDTH: 24'-4" HEIGHT: 8'-10"

DATE RECEIVED: 5/13/14 DATE REJECTED: \_\_\_\_\_ DATE APPROVED: 5/13/14 INITIALS: LCSS

# TOWNSHIP OF BRICK

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

John G. Ducey, Mayor

Township Council:  
Susan Lydecker - President  
Jim Fozman - Vice President  
Heather deJong  
Bob Moore  
Paul Mummolo  
Marianna Pontoriero  
Andrea Zapcic



Department of Land Use and Community  
Development

Division of Land Use & Planning

732-262-1027

Fax: 732-262-2941

[www.twp.brick.nj.us](http://www.twp.brick.nj.us)

Date: 4/09/2014

## ENGINEERING PLOT PLAN EXEMPT FORM (ONLY IF NOT IN A FLOOD ZONE)

Block: 1422.17 Lot: 5

Property Address: 958 RIDGE ROAD, BRICK, NJ 08724

I, MICHAEL P. GERRITY of 958 RIDGE ROAD, BRICK  
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck,  
pool, retaining wall, etc. as outlined in the Township Code, Chapter 245, Section 245-29.

Michael P. Gerrity  
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.
2. **Proof that the property is not located in a Flood Hazard Area.**

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

### FOR OFFICE USE ONLY

Approved on: 5/13/14 Signed: [Signature]

Rejected on: \_\_\_\_\_ Signed: \_\_\_\_\_

Comments: N/A

# BOUNDARY SURVEY OF LOT 5, BLOCK 1422.17 BRICK TOWNSHIP, OCEAN COUNTY, N.J.

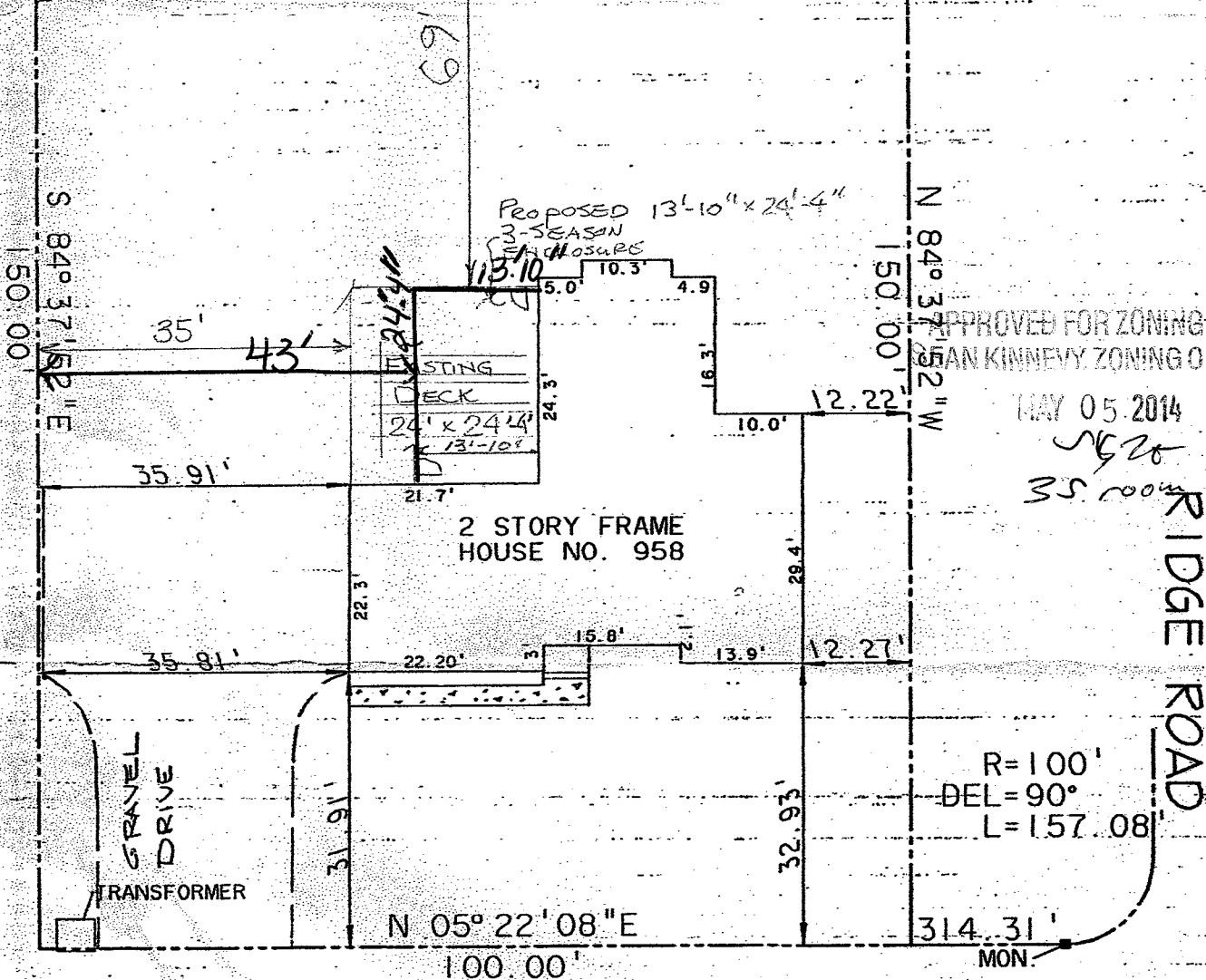
S 05° 22' 08" W

100.00'



LOT 5, BLOCK 1422.17

15,000 SQ. FT.



RIDGE ROAD (50' R.O.W.)

CERTIFY TO: MICHAEL P. GERRITY & KATHLEEN M. GERRITY, HIS WIFE  
CHEMICAL BANK N.A. ITS SUCCESSORS AND/OR ASSIGNS  
COASTAL TITLE AGENCY, INC.  
MICHAEL A. ALFIERI, ESQ.

LOT 15, BLOCK 1422.17 IS AS SHOWN ON A FINAL PLAT ENTITLED  
"RIVERPOINTE" FILED IN THE OCEAN COUNTY CLERK'S OFFICE ON  
12/27/88 AS MAP NO. 1-2128.

HARBOR CONSULTANTS  
VICTOR VINEGRA  
PROFESSIONAL ENGINEER & LAND SURVEYOR

444 PINE AVENUE  
GARMOD, N.J. 07027  
788-2045

N.J. LIC. NO. 11659

SCALE: 1"=20' DATE: 3/15/2014

9  
New Jersey Office of the Attorney General  
Division of Consumer Affairs  
THIS IS TO CERTIFY THAT THE  
Division of Consumer Affairs  
HAS REGISTERED  
Frank D. Crisci Sr. Home Improvement Contractor  
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

10/30/2013 TO 12/31/2014

VALID

13VH00966600

License/Registration/Certificate #

SIGNATURE

DIRECTOR

# TOWNSHIP OF BRICK

## DEBRIS FORM

WORK SITE ADDRESS: 958 RIDGE ROAD

BLOCK: 1422.17 LOT: 5

CONTRACTOR: FRANK D. CRISCI, SR.

CONTRACTOR'S ADDRESS: WARETOWN, NJ.

Type of Construction(minor, new home): 3 SEASON ENCLOSURE ON EXISTING DECK

Type of Debris (shingles, siding, wood, etc.): SCRAP ALUMINUM

Party responsible for removal: FRANK D. CRISCI, SR.

Dumpster Size: NA

Destination of Debris: ALUMINUM SCRAP YARD

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclables.

Generator's Certification: "Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."

Michael P. Gerrity  
Signature

4/10/14  
Date

MICHAEL P. GERRITY  
Print Name

**CERTIFICATION IN LIEU OF OATH**

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

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

Mark the following applicable boxes:

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

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

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

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

- C. ☒ I further certify that I will perform or supervise the following work:

C.1. ☒ Building                      C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical                      C.4. ☐ Plumbing

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

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals 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 Michael C. Durity Date 4-10-17

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

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

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

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

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

☐ Check if contractor.

Agent Name FRANK D. CRISCI SR.

Address 99 Lighthouse Dr.  
WARETOWN, N.J.

Telephone (609) 693-1586

Signature Frank D. Crisci Sr.

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