'OWNSHIP OF BRICK

CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

. Proposed Work at: 24 STUYVESANT DR.

2. Owner Name: PARADISE CUSTOM HOMES Tel. ( ) 928-3195

Address RD 3 Box 1647 JACKSON N.J. 08523

3. Principal Contractor: SAME Tel. ( )

Address

Lic. No. or Builder Reg. No. 04651 Federal Emp. No.

4. Architect or Engineer: PAUL SIONAS Tel. ( ) N/A

Address 60 HELLER WAY UPPER MONTCLAIR N.J. 07043

5. Responsible Person in Charge of Work MARK SPIER Tel. ( ) 920-1652

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	$17450.00
2. ☒	Plumbing	2500.00
3. ☒	Electrical	1500.00
4. ☒	Fire Protection	50.00
5. ☐	Other	
6. ☐	Other	
(& 34,288.24)	TOTAL COST	$22,000.00

C. DO YOU WANT: 1021 on file.

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 1
15. Height of Structure 18 Ft.
16. Area–Largest Floor 1016 Sq. Ft.
17. Bldg. Area–All Fls. 1016 Sq. Ft.
18. Volume of Structure 8296 Cu. Ft.
19. Total Land Area Disturbed 1016 Sq. Ft.

C. Form F-100 (8/83)

605-1 18.20

LDS BR 10310597

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 Mark Srier DATE Oct 29, 84

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 SRIER TEL.( ) 920-1652

ADDRESS 61 VENICE DR
BRICK TOWN N.J.

SIGNATURE Mark Srier

BLOCK NO. 605-1 LOT NO. 18-20 SUBDIVISION Cedarwood Park PERMIT NO. 2676

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

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	10-31-84		11-30-84	XX	
	Footings/Foundations					
	Framing					
	Architectural					
	Other Zoning			10/1/84		
☑	PLUMBING			11-20-84	A	
☐	ELECTRICAL	11-8-84		11-2-84		
☑	FIRE PROTECTION			11-30-84		APP AS NOTED
☐	OTHER Eng			11-26-84		

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions			Final Inspection	Comments
	ALL CONSTRUCTION					
✓	BUILDING				4-16-85	Temp. 30 Days 4-15-85
	Footings/Foundations					
	Framing					
	Architectural					
✓	Other					
	PLUMBING				3-27-85	
✓	ELECTRICAL				OK	
	[illegible]					
✓	FIRE PROTECTION					
✓	OTHER Eng					4-2-85 30 DAY Temp

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☑ Temporary Certificate of Occupancy Date Expired 5/15/85	4-15-85
☐ Temporary Certificate of Occupancy Date Expired	
☑ Certificate of Occupancy No. 2676	4-16-85
☐ Certificate of Continued Occupancy No.	
☐ Certificate of Approval No.	
☐ 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	$ 94.50
PLUMBING	85.00
ELECTRICAL	.
FIRE PROTECTION	.
OTHER	.
SUBTOTAL	$ 179.50
– LESS: 20% of subtotal (when plan review performed by state agency).	(17.95)
D.C.A. TRAINING FEE .0006 x 13500 =	8.10
CERTIFICATE OF OCCUPANCY	26.93
OTHER	.
OTHER	.
TOTAL COLLECTED WHEN PERMIT ISSUED	$ 232.48

DATE 12-3-84 Collected By

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	$.

U.C.C. Form F-100*(8/83)

TOWNSHIP OF BRICK

CERTIFICATE

CERT. NO. 2676
DATE ISSUED 4-16-85
Block 605-1 Lot 18-20
Subdivision

IDENTIFICATION

Owner Paradise Homes Inc.
Address RD 3 Box 164 D
Jackson, N.J. 08523
Tel. ( )
Work Site Address 24 Stuyvesant Dr.

Agent SAME
Address
Tel. ( )
Lic. No.
Federal Emp. No.

PAYMENTS

Fees Remitted $
☐ Check No.
☐ Cash
☐ Other
Collected By:
Date:

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☒ CERTIFICATE OF OCCUPANCY ☐ 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.

B. ☐ 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.

C. ☐ 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:

D. DESCRIPTION OF WORK:

one family dwelling

USE GROUP R-3 FIRE GRADING 1 Hour

MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE residence

FINAL COST OF CONSTRUCTION: $ # 35,000.

Arthur J. Cuozzo
CONSTRUCTION OFFICIAL

U.C.C. Form F-260 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

TOWNSHIP OF BRICK

CERTIFICATE

CERT. NO. 2676

DATE ISSUED 4-15-85

Block 605-1 Lot 18-20

Subdivision Cedarwood Park

IDENTIFICATION

Owner Paradise Custom Homes

Address RD 3, Box 164D

Jackson, NJ

Tel. ( )

Work Site Address 24 Stuyvesant Dr.

Agent

Address

Tel. ( )

Lic. No.

Federal Emp. No.

PAYMENTS

Fees Remitted $

☐ Check No.

☐ Cash

☐ Other

Collected By:

Date:

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☐ CERTIFICATE OF OCCUPANCY ☐ 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.

B. ☐ 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.

C. ☒ TEMPORARY CERTIFICATE OF OCCUPANCY (30 Day temporary)

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than May 15, 19 85 or the owner will be subject to a fine or order to vacate:

1. Pending compliance with Building and Engineering.

D. DESCRIPTION OF WORK:

single family dwelling

USE GROUP R-3 FIRE GRADING 1 hour

MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE single family dwelling

FINAL COST OF CONSTRUCTION: $ 35,000.

Arthur J. Ciesyo

CONSTRUCTION OFFICIAL

U.C.C. Form F-260 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

TOWNSHIP OF BRICK

APPLICATION FOR CERTIFICATE

PERMIT NO. _____
DATE ISSUED _____
Block 605-1 Lot 18-20
Subdivision _____
Notice No. _____

IDENTIFICATION

OWNER:
Name PARADISE CUSTOM HOMES
Address RD3 BOX 164 D
Town/State/Zip JACKSON N.J.

CONSTRUCTION LOCATION:
Address 24 STYUESANT
BRICK TOWN
Tel. (201) 928-3195

ACTION

☒ CERTIFICATE OF OCCUPANCY
☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF CONTINUED OCCUPANCY
☐ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP: R3 Previous R3 Current

FINAL COST OF CONSTRUCTION: $ 35,000.00
(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: Mark S. S _____
OWNER/AGENT
☒ Owner
☒ Agent

U.C.C. Form F-270 (8/83)

TOWNSHIP OF BRICK

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2676
DATE ISSUED 12-3-84
REVISION DATE

Block 605-1 Lot 18-20
Subdivision Cedarwood Park

A. IDENTIFICATION

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

Owner PARADISE CUSTOM HOMES Contractor SAME

Address RD 3 BOX 1640 Address

JACKSON N.J.

Tel. ( ) 928-3195 Tel. ( )

Work Site Address 24 STUYVESANT Lic. No. 04651

Federal Emp. No.

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.

Mark Sp

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

ONE STORY DWELLING ON CRAWL. ONE FAMILY

☒ See Plans

TYPE OF WORK:

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

	Fee Basis	Fee
New Building	.007 cu. FT	$ 94.50
SUBTOTAL		$
Minimum Building Fee (if applicable)		$
Total Building Fee (Greater of Minimum or Subtotal)		$

C. BUILDING CHARACTERISTICS

USE GROUP: R3 Present R3 Proposed

No. of Stories 1 Total Building Area—All Floors 1016 Sq. Ft.

Height of Structure 18 Ft. Volume of Structure 8296 Cu. Ft.

Area—Largest Floor 1016 Sq. Ft. Total Land Area Disturbed 1016 Sq. Ft.

Estimated Cost of Building Work: $ 72,000.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-110 (8/83) Green - Office Copy White - Applicant Copy Beige - Inspector Copy

TOWNSHIP OF BRICK

BUILDING SUBCODE TECHNICAL SECTION

PERMIT NO. [illegible]
DATE ISSUED [illegible]
REVISION DATE
Block 60 5-1 Lot 17-20
Subdivision [illegible]

A. IDENTIFICATION

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

Owner PARADISE CUSTOM HOMES Contractor SAME
Address RD 3 Box 1640 Address
JACKSON N.J.
Tel. ( ) 928-3195 Tel. ( )
Work Site Address 24 STUYVESANT Lic. No. 04651
Federal Emp. No.

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.

Mark Sr
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

ONE STORY DWELLING
ON CRAWL. ONE
FAMILY

☒ See Plans

TYPE OF WORK:	Fee Basis	Fee
☒ New Building	1007.00 SF	$ 94.50
☐ Addition		
☐ Alteration/Renovation		
☐ Roofing		
☐ Siding		
☐ Other		
☐ Demolition		
☐ Miscellaneous		
☐ Fence		
☐ Sign		
☐ Pool		
☐ Elevator		
☐ Other		
SUBTOTAL		$
Minimum Building Fee (if applicable)		$
Total Building Fee *(Greater of Minimum or Subtotal)*		$

C. BUILDING CHARACTERISTICS

USE GROUP: R3 Present R3 Proposed

No. of Stories 1 Total Building Area—All Floors 1016 Sq. Ft.
Height of Structure 18 Ft. Volume of Structure 8296 Cu. Ft.
Area—Largest Floor 1016 Sq. Ft. Total Land Area Disturbed 1016 Sq. Ft.
Estimated Cost of Building Work: $ 22,000.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-110 (8/83) Green = Office Copy White = Applicant Copy Beige = Inspector Copy

PLAN REVIEW AND INSPECTION — BUILDING

DATE	JOB CONDITION/COMMENTS
12/9/83	Sheathing Rm
1-30-85	Called for framing NG - asked them to clean up around Hse
	no Inspection
2-4-85	insulation Rm
2-13-85	Sheetrock OK Ed.

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☑ All	11-29-84	JK
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 4-16-85

Inspected By: Edward Vizzo

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☐ Frame				
☐ Architectural				
☐ Insulation				
☒ Finishes				4-16-85 Ed
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

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

TOWNSHIP OF BRICK

FIRE SUBCODE TECHNICAL SECTION

PERMIT NO. 2676
DATE ISSUED 12-3-84
REVISION DATE
Block 605-1 Lot 18-20
Subdivision Cedarwood Park

A. IDENTIFICATION

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

Owner PARADISE CUSTOM HOMES
Address RD3 BOX 640 JACKSON N.J.
Tel. ( ) 928-3195
Work Site Address 24 STUYVESANT

Contractor SAME
Address
Tel. ( )
Lic. No. 04651
Federal Emp. No.

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 _____ FEE
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: $ _____ $ _____

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 FEE
Supervision Type: ☒ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $ 50.00 $ _____

B4. STAND PIPES

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

B5. OTHER

_____ $ _____
_____ $ _____
_____ $ _____

Subtotal $ _____
Minimum Fire Protection Fee (If Applicable) $ _____
Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ _____

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP R3 Present R3 Proposed
Heating Systems – Location: _____
Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other _____
Fuel Storage Tank – Location: _____ Fuel Type: _____ Capacity: _____
Total Estimated Cost of Fire Protection Work: $ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-140 (8/83) Green = Office Copy White Applicant Copy Pink = Inspection Copy

TOWNSHIP OF BRICK

FIRE SUBCODE TECHNICAL SECTION

PERMIT NO. _____
DATE ISSUED _____
REVISION DATE _____
Block 605-1 Lot 18-20
Subdivision _____

A. IDENTIFICATION

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

Owner PARADISE CUSTOM HOMES Contractor SAME
Address RD3 Box 640 Address _____
JACKSON N.J.
Tel. ( ) 928-3195 Tel. ( ) _____
Work Site Address 24 STUYVESANT Lic.-No. 04651
Federal Emp. No. _____

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 _____ FEE
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: $ _____ $ _____

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 FEE
Supervision Type: ☒ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work : $ 50.00 $ _____

B4. STAND PIPES

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

B5. OTHER

_____ $ _____
_____ $ _____
_____ $ _____

Subtotal $ _____
Minimum Fire Protection Fee (If Applicable) $ _____
Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ _____

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP R3 Present R3 Proposed
Heating Systems – Location: _____
Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other _____
Fuel Storage Tank - Location: _____ Fuel Type: _____ Capacity: _____
Total Estimated Cost of Fire Protection Work: $ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION — [redacted]RE

DATE	JOB CONDITION/COMMENTS
11-30-84	Review : APP AS NOTED
	① 5.7 SQ FT Bedroom window
	② Temp Glass
3-26-85	FINAL : [redacted] FAIL
	1. Det 1ST FLOOR Deck
	2. VENT HWH Room
3-28-85	FINAL : APPROVED

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: [redacted] 3-28-85

Inspected By: Mike Clapp

INSPECTIONS

Type	Failure Date			Approval Date
☐ Fire Suppression Test				
☐ Fire Alarm Test				
☐ Smoke Test				
☐ TCO				
☒ Other FINAL	3-26-85			[redacted] 3-28-85
☐ Other				
☐ Other				
☐ Other				

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

TOWNSHIP OF BRICK

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 2676
DATE ISSUED 12-3-84
REVISION DATE
Block 605-1 Lot 18-20
Subdivision Cedarwood Park

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner PARADISE CUSTOM HOMES
Address RD3 BOX 64D
JACKSON N.J.
Tel. ( ) 928-3195
Work Site Address 24 STUYVESANT

Contractor Jimmy Byrnes
Address 2619 WOOLLEY RD
OCEAN VIEW
Tel. ( ) 861-0268
Lic.No./Bus. Permit 5782
Federal Emp. No.

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.

Jimmy Byrnes
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
2	Water Closet/Bidet/Urinal	$ 10		Garbage Disposal	$
1	Bathtub	5		Air Conditioner Unit	
3	Lavatory/Sink	15		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
1	Washing Machine	5		Grease Trap	
1	Dishwasher	5		Interceptor	
	Commercial Dishwasher			Backflow Device	
1	Water Heater	5		Reduced Pressure Backflow Device	
1	Domestic Boiler/ Furnace	15	2	Vent Stack	10
	Steam Boiler			Solar System	
	Water Util. Connection			Other GAS	15
	Sewer Util. Connection			Other	
2	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 60		COLUMN 2	$ 25

	Fee
COLUMN 1	$ 60
COLUMN 2	$ 25
SUBTOTAL	$ 85
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$

C. PLUMBING CHARACTERISTICS

USE GROUP: R3 Present R3 Proposed
Drainage — Material _____ Size _____
Building Sewer— Material _____ Size _____
Water Service— Material _____ Size _____
Venting — Material _____ Size _____
Estimated Cost of Plumbing Work: $ 2800.00

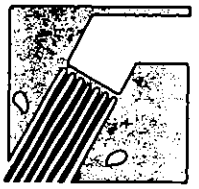
D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-130 (8/83) Green = Office Copy White = Applicant Copy Blue = Inspector Copy

TOWNSHIP OF BRICK

PLUMBING SUBCODE TECHNICAL SECTION



PERMIT NO. _____
DATE ISSUED _____
REVISION DATE _____
Block 603-1 Lot 18-20
Subdivision _____

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner PARADISE CUSTOM HOMES
Address RD3 BOX 164D
JACKSON N.J.
Tel. ( ) 928-3195
Work Site Address 24 STUYVESANT

Contractor _____
Address _____
Tel. ( ) _____
Lic.No./Bus. Permit _____
Federal Emp. No. _____

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

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
2	Water Closet/Bidet/Urinal	$		Garbage Disposal	$
1	Bathtub			Air Conditioner Unit	
2	Lavatory/Sink			Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
1	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher		1	Backflow Device	
1	Water Heater			Reduced Pressure Backflow Device	
1	Domestic Boiler/ Furnace		2	Vent Stack	
	Steam Boiler			Solar System	
	Water Util. Connection			Other	
	Sewer Util. Connection			Other	
1	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$		COLUMN 2	$

Fee	
COLUMN 1	$
COLUMN 2	$ 5
SUBTOTAL	$
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$

C. PLUMBING CHARACTERISTICS

USE GROUP: R3 Present R3 Proposed
Drainage — Material _____ Size _____
Building Sewer— Material _____ Size _____
Water Service— Material _____ Size _____
Venting — Material _____ Size _____
Estimated Cost of Plumbing Work: $ 1800.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-130 (8/83) Green = Office Copy White = Applicant Copy Blue = Inspector Copy

PLAN REVIEW AND INSPECTION — PLUMBING

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved
Date: 11-21-84
Approved By:

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA 3/28/85
Date: 3-27-85
Inspected By: D Metcalf

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Slab				
☒ Rough				1-23-85 DM
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

U.C.C. Form F-130 (8/83)

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08723

CERTIFICATE OF COMPLIANCE

Date April 15, 1985

NAME Paradise Custom Homes

ADDRESS R.D. 3 Box 164D Jackson, NJ 08527

PROPERTY LOCATION 24 Stuyvesant Road

Account No. J319207 006 Block 605-1 Lot 18-20

I hereby certify that the above applicant has complied with all Rules and Regulations of this Authority and has paid all required fees and charges.

For the Authority Patti Evan

5. due

SHADE TREE PERMIT

Permit# 459

Applicant's Name AFFORDABLE Homes

Block 605-1

Property Address Stuyvesant Rd

Lot 18-20

Applicant's Address 757 Fisher Blvd

Date 9/7/83

Toms River NJ 08753

As per Shade Tree Application in conjunction with ordinance #158-A,B,C-75: filed in the Building Department, Township of Brick.

Comments: OK

Fee Paid $_____

Signed: Sterling Hulse

Sterling Hulse, Forrester
Township of Brick
Shade Tree Commission

This permit must be available on site for inspection upon demand.

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

4 Temp Use Permit

DATE Oct 31 1984

SUBJECT: LOT(S) 18 & 20

BLOCK 605 & 1

AFFIDAVIT:

I Mark Spier hereby request a temporary building permit to proceed with construction of footings and foundation (only) on the subject property at my own risk. I understand and acknowledge that the issuance of the full building permit is subject to further approvals as normally required. I understand that adjustments in the foundation and first floor elevation may be necessary in order to comply with the approved plot plan grading. The below department approvals are required prior to issuance of a temporary building permit.

Mark Spier 10/31/84
Applicant Date

R.F. Bertuzzi 10/31/84
Twp. Engineer/or Ass't. Engineer Date
Engineering Department

John J. Cannon 10/31/84
Zoning Officer Date
Zoning Department

Jack Jerolemon
Building Inspector Date
Building Department

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

UNIFORM CONSTRUCTION CODE
Chapter 23, Title 5

Approval of Part
5.23-2.5 (7)

OWNER/AGENT Mark Spier

ADDRESS 61 Venice Dr.

TOWN Brick ZIP 08723

BLOCK 605-1 LOT 18-20

24 Stuyvesant Dr.

☒ FOOTING

☒ FOUNDATION

☐ OTHER

OWNER/AGENT PROCEED AT OWN RISK ☒

OWNER/AGENT Mark Spier

BUILDING SUB-CODE OFFICIAL Fred Jacobsen

CONSTRUCTION OFFICIAL

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3900

11-20-84

Office of
Division of Inspections

OK for review
without set of plans
as per AC

CHECK LIST

Re: Block 605-1 Lot 18.26

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

Administrative	~~Not Stamped~~
Zoning	
Engineering	
Building	~~only one set of plans~~ ~~OK 11-20-84~~
Plumbing	
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 building 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. Ciarzo, Construction Official

L&H PLUMBING & HEATING SUPPLIES, INC.

930 HIGHWAY 70, BRICK, N. J. 08723 (201) 458-7200
WARETOWN PLAZA, ROUTE 9, WARETOWN, N.J. 08758 (609) 693-0077

TOLL FREE IN NEW JERSEY 800-272-1329

****
YEAR ROUND RESIDENTIAL LOAD CALCULATIONS
****

CONTRACTOR--R & S HEATING JOB NAME-- MOD-TECH CORP DATE-- NOV 8-84

DESIGN CONDITIONS

WINTER		SUMMER	
OUTSIDE DB 0 F	INSIDE DB 70 F	OUTSIDE DB 95 F	INSIDE DB 75 F
WINTER DESIGN TEMP. DIFFERENCE	70 F	SUMMER DESIGN TEMP. DIFFERENCE	20 F
		DAILY TEMPERATURE RANGE-- MEDIUM	
		AC/HR-- .5	GRAINS @ 50%RH-- 26
		VOLUME OF COND SP--	7312 CU FT
		TOTAL AREA OF GLASS+DR--	207 SQ FT

CONSTRUCTION DATA

TYPE OF EXPOSURE		CONSTRUCTION NO.	HEATING HTM	COOLING HTM
GLASS (COOLING)	A	NORTH		65.0
	B	EAST & WEST		75.0
	C	N.EAST & N.WEST		50.0
	D	SOUTH		40.0
	E	S.EAST & S.WEST		65.0
GLASS (HEATING)	A	4C	79.0	
	B	9G	87.0	
	C	N/A	0.0	
DOORS	A	11C	80.6	13.9
	B	N/A	0.0	0.0
WALLS	A	12C	6.3	2.1
	B	N/A	0.0	0.0
	C	N/A	0.0	0.0
CEILINGS	A	16D	3.7	1.9
	B	N/A	0.0	0.0
FLOORS	A	20B	5.6	1.3
	B	N/A	0.0	0.0
	C	N/A	0.0	0.0
DUCTS/PIPING		PERCENT	0.15	0.10
INFILTRATION		BTUH/SQ FT		6.5

26 14

SUMMER INFILTRATION FORMULA:
.5 AC/HR X 7312 CU FT X .0167 = 61 CFM
1.1 X 20 DTD X 61 CFM = 1342 BTUH / 207 G+D SQ FT = 6.5

ROOM NAME -- KITCHEN-DINETT DIMENSIONS -- 16 X 11 X 8 EXP WALLS -- 27

*** SUMMER HEAT GAIN ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	INFL BTUH	P/AP BTUH	DUCT BTUH	SNSB BTUH
A	0	0	21	292	174	365	176	334	176	229	273	1200	384	*
B	9	675	0	0	0	0	0	0	0	0				*
C	0	0			0	0			0	0				*
D	12	480												*
E	0	0												*

REQD CFM @ .1 IN SP = 141 4232

*** WINTER HEAT LOSS ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	PIPE BTUH	TOTAL BTUH	LINEAR FT B/B REQD
A	21	1659	21	1692	174	1096	176	651	176	985	912	*	*
B	0	0	0	0	0	0	0	0	0	0		*	*
C	0	0			0	0			0	0		*	*
												6997	11.7

ROOM NAME -- UTILITY ROOM DIMENSIONS -- 6 X 10 X 8 EXP WALLS -- 6

*** SUMMER HEAT GAIN ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	INFL BTUH	P/AP BTUH	DUCT BTUH	SNSB BTUH
A	0	0	0	0	36	76	60	114	60	78	78	0	124	*
B	12	900	0	0	0	0	0	0	0	0				*
C	0	0			0	0			0	0				*
D	0	0												*
E	0	0												*

REQD CFM @ .1 IN SP = 46 1370

*** WINTER HEAT LOSS ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	PIPE BTUH	TOTAL BTUH	LINEAR FT B/B REQD
A	12	948	0	0	36	226	60	222	60	336	259	*	*
B	0	0	0	0	0	0	0	0	0	0		*	*
C	0	0			0	0			0	0		*	*
												1992	3.3

ROOM NAME -- BATHROOM DIMENSIONS -- 7 X 10 X 8 EXP WALLS -- 7

*** SUMMER HEAT GAIN ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	INFL BTUH	P/AP BTUH	DUCT BTUH	SNSB BTUH
A	0	0	0	0	50	105	70	133	70	91	39	0	81	*
B	6	450	0	0	0	0	0	0	0	0				*
C	0	0			0	0			0	0				*
D	0	0												*
E	0	0												*

REQD CFM @ .1 IN SP = 30 899

*** WINTER HEAT LOSS ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	PIPE BTUH	TOTAL BTUH	LINEAR FT B/B REQD
A	6	474	0	0	50	315	70	259	70	392	216	*	*
B	0	0	0	0	0	0	0	0	0	0		*	*
C	0	0			0	0			0	0		*	*
												1656	2.8

ROOM NAME -- BEDROOM 1 DIMENSIONS -- 13 X 11 X 8 EXP WALLS -- 24

*** SUMMER HEAT GAIN ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	INFL BTUH	P/AP BTUH	DUCT BTUH	SNSB BTUH
A	15	375	0	0	162	340	143	272	143	186	195	0	249	*
B	15	1125	0	0	0	0	0	0	0	0				*
C	0	0			0	0			0	0				*
D	0	0												*
E	0	0												2742

REQD CFM @ .1 IN SP = 91

*** WINTER HEAT LOSS ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	PIPE BTUH	TOTAL BTUH	LINEAR FT B/B	LINEAR FT REQD
A	30	2370	0	0	162	1020	143	529	143	800	708	*		*
B	0	0	0	0	0	0	0	0	0	0		*		*
C	0	0			0	0			0	0		*		*
												5428		9.0

ROOM NAME -- BEDROOM 2 DIMENSIONS -- 12 X 12 X 8 EXP WALLS -- 24

*** SUMMER HEAT GAIN ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	INFL BTUH	P/AP BTUH	DUCT BTUH	SNSB BTUH
A	15	375	0	0	162	340	144	274	144	187	195	0	249	*
B	15	1125	0	0	0	0	0	0	0	0				*
C	0	0			0	0			0	0				*
D	0	0												*
E	0	0												2745

REQD CFM @ .1 IN SP = 91

*** WINTER HEAT LOSS ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	PIPE BTUH	TOTAL BTUH	LINEAR FT B/B	LINEAR FT REQD
A	30	2370	0	0	162	1020	144	532	144	806	709	*		*
B	0	0	0	0	0	0	0	0	0	0		*		*
C	0	0			0	0			0	0		*		*
												5439		9.1

ROOM NAME -- BEDROOM 3 DIMENSIONS -- 14 X 9 X 8 EXP WALLS -- 14

*** SUMMER HEAT GAIN ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	INFL BTUH	P/AP BTUH	DUCT BTUH	SNSB BTUH
A	0	0	0	0	82	172	126	239	126	164	195	0	302	*
B	30	2250	0	0	0	0	0	0	0	0				*
C	0	0			0	0			0	0				*
D	0	0												*
E	0	0												3322

REQD CFM @ .1 IN SP = 111

*** WINTER HEAT LOSS ***

	GLASS A/L	GLASS BTUH	DOORS A/L	DOORS BTUH	NET WALLS A/L	NET WALLS BTUH	CEILINGS A/L	CEILINGS BTUH	FLOORS A/L	FLOORS BTUH	PIPE BTUH	TOTAL BTUH	LINEAR FT B/B	LINEAR FT REQD
A	30	2370	0	0	82	516	126	466	126	705	608	*		*
B	0	0	0	0	0	0	0	0	0	0		*		*
C	0	0			0	0			0	0		*		*
												4667		7.8

ROOM NAME -- LIVING ROOM DIMENSIONS -- 15 X 13 X 8 EXP WALLS -- 28

*** SUMMER HEAT GAIN ***

	GLASS		DOORS		NET WALLS		CEILINGS		FLOORS		INFL	P/AP	DUCT	SNSB
	A/L	BTUH	A/L	BTUH	A/L	BTUH	A/L	BTUH	A/L	BTUH	BTUH	BTUH	BTUH	BTUH
A	0	0	21	292	167	351	195	371	195	254	370	1200	511	*
B	24	1800	0	0	0	0	0	0	0	0				*
C	0	0			0	0			0	0				*
D	12	480												*
E	0	0			REQD CFM @ .1 IN SP = 187									5630

*** WINTER HEAT LOSS ***

	GLASS		DOORS		NET WALLS		CEILINGS		FLOORS		PIPE	TOTAL	LINEAR FT
	A/L	BTUH	A/L	BTUH	A/L	BTUH	A/L	BTUH	A/L	BTUH	BTUH	BTUH	B/B REQD
A	36	2844	21	1692	167	1052	195	721	195	1092	1110	*	*
B	0	0	0	0	0	0	0	0	0	0		*	*
C	0	0			0	0			0	0		*	*
												8512	14.2

********** COOLING SUMMARY **********

LATENT INFILTRATION GAIN = .68 X 26 GRAINS X 61 CFM =	1078	BTUH
LATENT LOAD FOR APPL/PEO = 230 X 0 PEOPLE =	0	BTUH
LATENT VENTILATION LOAD = .68 X 0 VENT CFM X 26 GRAINS =	0	BTUH
TOTAL LATENT GAIN	1078	BTUH
SENSIBLE VENTILATION LOAD = 1.1 X 0 VENT CFM X 20 DTD =	0	BTUH
TOTAL SENSIBLE LOAD FROM ROOM AREAS (3 DEGREE TEMP SWING) =	20943	BTUH
TOTAL SENSIBLE GAIN	20943	BTUH

TOTAL HEAT GAIN (LAT + SNSB) = 22,021 BTUH

********** HEATING SUMMARY **********

TOTAL HEAT LOSS FROM ROOM AREAS =	34693	BTUH
HEAT REQUIRED FOR VENTILATION AIR = 1.1 X 0 VENT CFM X 70 DTD =	0	BTUH

TOTAL HEAT LOSS (ROOMS + VENT) = 34,694 BTUH

********** ANNUAL ENERGY CONSUMPTION **********

********* HEATING *********

TEMPERATURE BINS IN DEGREES F	0 TO 9	10 TO 19	20 TO 29	30 TO 39	40 TO 49	50 TO 59	60 TO 64
HOURS PER YEAR (BRICK, NJ)	35	238	686	1481	1378	1377	761
BIN HEATING LOAD (MBH)	35	29	24	19	13	8	3
HRS/YR X BIN HTG LD (MBH)	1225	6902	16464	28139	18031	11016	2283

TOTAL YEARLY HEATING BTU = 84,060,000

ANNUAL FUEL CONSUMPTION (F) = $\frac{\text{BTU/YR}}{\text{E X P}}$

WHERE:
E IS SEASONAL EFFICIENCY OF EQUIPMENT
P IS HEATING VALUE OF FUEL

FUEL	E	P	UNITS	PRICE	F	ANNUAL COST
NATURAL GAS	0.60	102500	CCF	0.720	1366	$984.12
PROPANE GAS	0.60	91500	GAL	1.000	1531	$1531.15
#2 FUEL OIL	0.60	138000	GAL	1.100	1015	$1116.74
ELECTRIC	1.00	3413	KWH	0.085	24629	$2093.50

********* COOLING *********

TEMPERATURE BINS IN DEGREES F	70 TO 74	75 TO 79	80 TO 84	85 TO 89	90 TO 95
HOURS PER YEAR (BRICK, NJ)	806	564	366	190	51
BIN COOLING LOAD (MBH)	4	9	13	18	22
HR/YR X BIN CLG LD (MBH)	3550	4968	4836	3347	1123

TOTAL YEARLY COOLING BTU = 17,824,000

ANNUAL ENERGY CONSUMPTION (KWH PER YEAR) = $\frac{\text{BTU/YR}}{1000 \text{ X SEER}}$

MODEL NO.	EFFICIENCY	SEER	KWH/YR	PRICE	ANNUAL COST
	STANDARD	7.50	2376	0.096	$228.14
	HIGH	8.50	2096	0.096	$201.30
	ANNUAL OPERATING COST DIFFERENCE				$26.84

********** ********** **********

COMPUTED RESULTS ARE ESTIMATES, SINCE BUILDING CONSTRUCTION AND OPERATING CONDITIONS ARE SUBJECT TO VARIATIONS.

DATA SOURCE: ACCA MANUAL J, 1981
ENGINEERING WEATHER DATA, 1978

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY
1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08723

STATEMENT OF UTILITY SERVICES

APPLICANT: NAME Mod-tech TEL. NO. _____

ADDRESS _____

PROPERTY IN QUESTION:

BLOCK 605-1 LOT(S) 18-20 ADDRESS 24 Stuyvesant Dr.

BTMUA ACCOUNT NUMBER J319207

SINGLE FAMILY RESIDENTIAL (IN EXISTING SUB-DIVISIONS ONLY)

	WATER	SEWER
1. UTILITY SERVICE CAN BE PROVIDED. APPLICATION FOR SERVICE IS REQUIRED.	X	X

CONNECTION WILL BE PROVIDED AS FOLLOWS:

WATER Stuyvesant Dr (STREET)

SEWER Stuyvesant Dr (STREET)

2. UTILITY SERVICE CANNOT BE PROVIDED AT THIS DATE. APPLICATION IS NOT REQUIRED.	____	____
3. UTILITY SERVICE IS PLANNED FOR CONSTRUCTION DURING THE BUDGET YEAR ENDING MARCH 31, 19____. SERVICE MAY BE AVAILABLE SOME TIME THEREABOUT.	____	____

ALL OTHER DEVELOPMENT

EXISTING BRICK TOWNSHIP MUA LINES ARE AS SHOWN ON ATTACHED TAX MAP DRAWING NO. _____.

APPLICANT/DEVELOPER IS REQUIRED TO SUBMIT A FORMAL DEVELOPER APPLICATION TO THE AUTHORITY AS SET OUT IN BRICK TOWNSHIP ZONING ORDINANCE NO. 354-79 AS AMENDED, AND AS REQUIRED BY BRICK TOWNSHIP MUA RULES AND REGULATIONS (LATEST REVISION).

DATE: 4-27-84 SIGNED: K. Donnelly

NOTE: STATEMENT GOOD FOR 90 DAYS ONLY

7676

36C

UTILITY SERVICES FOR NEW HOMES

1. OBTAIN "STATEMENT OF UTILITY SERVICES" AND SIZING SHEET AT BTMUA.

2. FILL OUT SIZING SHEET AND HAVE APPROVED BY THE BRICK TOWNSHIP PLUMBING INSPECTOR.

3. APPLICATION FOR UTILITIES SHOULD BE MADE TO BTMUA AS EARLY AS POSSIBLE, AT WHICH TIME THE SIZING SHEET, SIGNED BY THE TOWNSHIP PLUMBING INSPECTOR, MUST BE SUBMITTED.

   APPLICATIONS WITHOUT THE SIGNED SIZING SHEET WILL NOT BE ACCEPTED.

   A DEPOSIT OF $130 IS REQUIRED.

   LEAD TIME FOR TAPS TO BE INSTALLED IS BETWEEN 6 AND 8 WEEKS, WEATHER PERMITTING; HOWEVER, TAPS WILL NOT BE SCHEDULED FOR INSTALLATION UNTIL AT LEAST A FOUNDATION EXISTS. FOR INFORMATION ON SCHEDULED INSTALLATIONS, CONTACT THE AUTHORITY OPERATIONS OFFICE.

4. AFTER THE TAPS HAVE BEEN INSTALLED, SEWER AND WATER SERVICE PERMITS ARE TO BE OBTAINED AT THE BTMUA (PERMIT FEE OF $15 FOR EACH SERVICE).

5. ONCE YOUR SERVICE LINES HAVE BEEN CONNECTED, CALL THE CUSTOMER ACCOUNT DIVISION AT BTMUA TO ARRANGE FOR AN OUTSIDE INSPECTION.

   INSPECTIONS WILL NOT BE MADE UNLESS THE PERMIT HAS BEEN OBTAINED.

6. WATER METER

   A METER AND A REMOTE READOUT WILL BE INSTALLED.

   IF YOU ARE BUILDING ON A SLAB BASE, PLEASE MAKE ARRANGEMENTS WITH YOUR BUILDER TO RUN A PAIR OF WIRES (18 GAUGE, 2 CONDUIT SOLID BELL WIRE) FROM THE INSIDE METER LOCATION TO WHERE THE OUTSIDE READOUT IS TO BE LOCATED, OR CALL THE BTMUA TO DO SO. THIS MUST BE DONE PRIOR TO INSTALLATION OF SHEET ROCK FOR INTERIOR WALLS.

   AFTER ALL INSPECTIONS HAVE BEEN COMPLETED, CALL THE CUSTOMER ACCOUNT DIVISION AT BTMUA TO SCHEDULE THE WATER METER INSTALLATION.

7. CERTIFICATE OF COMPLIANCE

   THE C.C. WILL BE ISSUED AFTER THE METER IS INSTALLED AND ALL REQUIREMENTS MET, AT WHICH TIME ANY OPEN TAP FEES AND PERMIT FEES MUST BE PAID IN FULL.

8. INITIAL SERVICE CHARGES

   IF THE OWNER DESIRES, THE APPLICABLE INITIAL SERVICE CHARGES MAY BE PAID IN QUARTERLY INSTALLMENTS (PLUS INTEREST) ACCORDING TO AN ESTABLISHED PAYMENT PLAN. SEE OUR CUSTOMER ACCOUNT DIVISION FOR DETAILS.

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

Called
11-5-84
9:45 AM

CHECK LIST

Re: Block 605-1 Lot 18-20

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

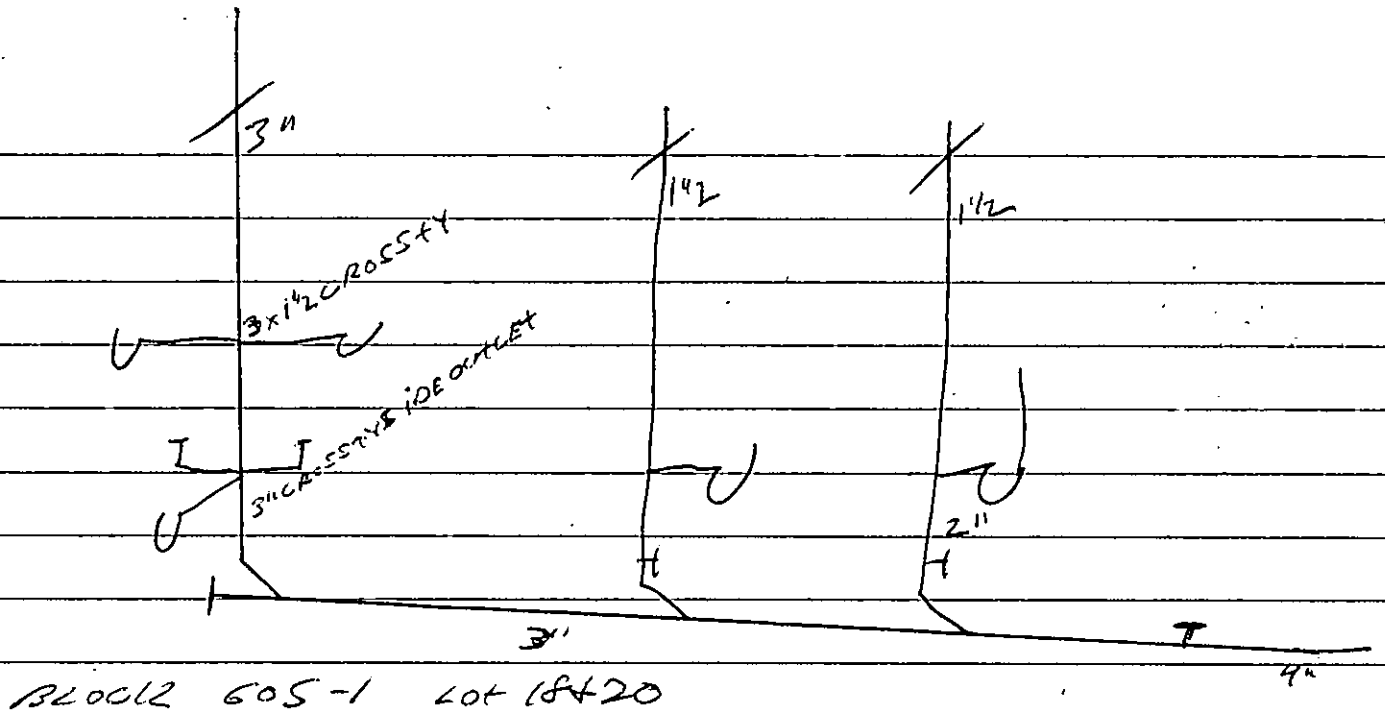
Administrative (~~B Fmua~~) OK
Zoning
Engineering
Building
Plumbing ~~Bly tect, drawing~~ ~~heat loss~~
Electric ~~drawn to site 11-8-84~~
Fire

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.

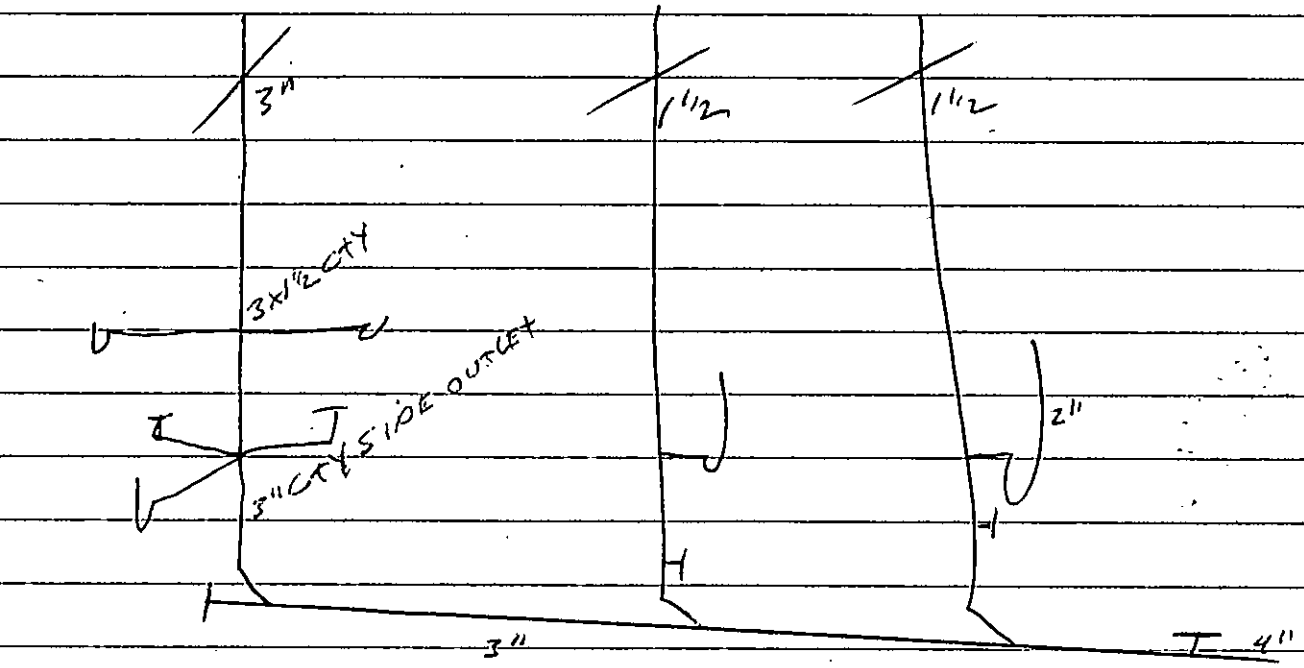
There is a 20 working day time limit for review of all documents submitted with a building permit application. This time limit ceases in the event of a rejection of any type, and starts over again when the rejection/(s) have been corrected and the application resubmitted.

Arthur J. Cierzo, Construction Official

2676



BLOCK 605-1 LOT 18+20



BLOCK 605-1 LOT 18+20.

7674

11-21-84

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

DATE Oct 31 1984

SUBJECT: LOT(S) 18 & 20

BLOCK 605 - 1

AFFIDAVIT:

I MARK SPIER hereby request a temporary building permit to proceed with construction of footings and foundation (only) on the subject property at my own risk. I understand and acknowledge that the issuance of the full building permit is subject to further approvals as normally required. I understand that adjustments in the foundation and first floor elevation may be necessary in order to comply with the approved plot plan grading. The below department approvals are required prior to issuance of a temporary building permit.

Mark Spier 10/31/84
Applicant Date

R.A. Britcher 10/31/84
Twp. Engineer/or Ass't. Engineer Date
Engineering Department

John J. Cairney 10/31/84
Date
Zoning Officer
Zoning Department

Fred Jerolemon
Date
Building Inspector
Building Department

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

UNIFORM CONSTRUCTION CODE
Chapter 23, Title 5

Approval of Part
5.23-2.5 (7)

OWNER/AGENT Mark Spier

ADDRESS 61 Venice Dr.

TOWN Brick ZIP 08723

BLOCK 605-1 LOT 18-20

24 Stuyvesant Dr.

☒ FOOTING

☒ FOUNDATION

☐ OTHER

OWNER/AGENT PROCEED AT OWN RISK ☒

OWNER/AGENT Mark Spier

BUILDING SUB-CODE OFFICIAL Fred Jorgensen

CONSTRUCTION OFFICIAL

DIRECTIONS FOR COMPLETION OF SHADE TREE PERMIT Telephone # 920-1652

1. Name of Applicant & Address MOD-TECH CORP. MANALAPAN NJ.

Give name and address of person applying for permit. If applicant is other than owner, give and identify names and addresses of both.

2. Property is Block 605-1 Lot(s) 18-20

This information is available from your deed or tax bill.

3. Address if different from applicant 24 STUYVESANT DR. BRICKTOWN

Give street and number if one is assigned. If there is no street number, estimate distance and direction from nearest intersection or other easily recognizable landmark.

4. Location of trees on property ~~NEE~~ SEE SURVEY and number of trees presently on property 15.

Permit Issued

A. For individual building lots:

Provide either a copy of a recent survey, or a sketch of the property drawn to scale including any pertinent distances not easily read from the sketch.

Include existing buildings, driveways and other constructions in SOLID LINES. Show all existing trees (see note below) with a circle. Trees may be keyed as to genus and species if desired, otherwise include a C inside circle for coniferous (pine, etc.) trees and a D for deciduous trees.

*Note Trees to be removed will have an X through the circle. 

If removal is desired because of proposed construction of any kind, include such construction in dotted lines and identify. If planting of new trees (including but not limited to those in note below) is proposed in application to replace those removed, or for any other reason, show approximate proposed location with a dotted circle and specify species and approximate planting size (height and caliper).

There should be a minimum of one tree for each 2000 sq. ft after all proposed tree removal and replacement. (e.g. an 80 x 100 lot includes 8000 sq. ft. and would require a minimum of 4 trees.

B. For other acreage.

Include copy of subdivision plot plan or equivalent outlining all wooded areas and solitary trees. Identify each (e.g. "heavily wooded mature Oak with scattered Dogwood", "sparsely wooded mixed Pitch Pine and small Oak, etc.

Same minimum of one tree per 2000 sq. ft. as above should be observed.

NOTE: "Tree" for the purposes of this permit, means (1) any live coniferous tree 4" or more DBH (diameter breast high:) (2) any deciduous tree (live) 3" or more DBH (3) any live American Holly or Dogwood 1' or more, one foot above the ground; and (4) any live Laurel 3' or more across root crown.

THE RESPONSIBILITY OF HAVING THIS APPLICATION PROCESSED BY THE SHADE TREE COMMISSION, RESTS SOLELY UPON THE APPLICANT.

Date APRIL 27 1984

APPLICATION IN CONNECTION WITH ORDINANCE #158-72

Name of Applicant MOD-TECH CORP.

Address 19 APPOMATTOX DR.

MANALAPAN N.J. 07723

Property is Block 605-1 Lot(s) 18-20

Residential X Commercial

Address if different from applicant 24 STUYVESANT

BRICK TOWN N.J. 08723

Location of trees on property: SEE SURVEY

Number of trees presently on property: 15

Additional information to enable the application to be properly evaluated:

Fee: $ 5.00 for trees located on individual building lot.

$ 15.00 per acre for all other lands.

Recommendation from Shade Tree Commission:

DUPLICATE PERMIT # 459 ISSUED TO AFFORDABLE HOMES 9/7/83

5/7/84
Date

Signature of Chairman

Approved Denied

DIRECTIONS FOR COMPLETION OF SHADE TREE PERMIT Telephone # 270-3807

1. Name of Applicant & Address Affordable & Deluxe Homes Inc
757 Fischer Blvd Toms River, NJ 08753

Give name and address of person applying for permit. If applicant is other than owner, give and identify names and addresses of both.

2. Property is Block 605-1 Lot(s) 18-19-20

This information is available from your deed or tax bill.

3. Address if different from applicant —

Give street and number if one is assigned. If there is no street number, estimate distance and direction from nearest intersection or other easily recognizable landmark.

4. Location of trees on property 13 - Removed TO-BE and number of trees presently on property 25.

A. For individual building lots:

Provide either a copy of a recent survey, or a sketch of the property drawn to scale including any pertinent distances not easily read from the sketch.

Include existing buildings, driveways and other constructions in SOLID LINES. Show all existing trees (see note below) with a circle. Trees may be keyed as to genus and species if desired, otherwise include a C inside circle for coniferous (pine, etc.) trees and a D for deciduous trees.

*Note Trees to be removed will have an X through the circle. 

If removal is desired because of proposed construction of any kind, include such construction in dotted lines and identify. If planting of new trees (including but not limited to those in note below) is proposed in application to replace those removed, or for any other reason, show approximate proposed location with a dotted circle and specify species and approximate planting size (height and caliper).

There should be a minimum of one tree for each 2000 sq. ft after all proposed tree removal and replacement. (e.g. an 80 x 100 lot includes 8000 sq. ft. and would require a minimum of 4 trees.

B. For other acreage.

Include copy of subdivision plot plan or equivalent outlining all wooded areas and solitary trees. Identify each (e.g. "heavily wooded mature Oak with scattered Dogwood", "sparsely wooded mixed Pitch Pine and small Oak, etc.)

Same minimum of one tree per 2000 sq. ft. as above should be observed.

NOTE: "Tree" for the purposes of this permit, means (1) any live coniferous tree 4" or more DBH (diameter breast high:) (2) any deciduous tree (live) 3" or more DBH (3) any live American Holly or Dogwood 1' or more, one foot above the ground; and (4) any live Laurel 3' or more across root crown.

THE RESPONSIBILITY OF HAVING THIS APPLICATION PROCESSED BY THE SHADE TREE COMMISSION, RESTS SOLELY UPON THE APPLICANT.

Date 9-2-83

APPLICATION IN CONNECTION WITH ORDINANCE #158-72

Name of Applicant Afford Able & Deluxe Homes Inc

Address 757 Fischer Blvd

Toms River NJ 08753

Property is Block 605-1 Lot(s) 18-19-20

(Residential) Commercial

Address if different from applicant Stuyvesant Rd,

Location of trees on property: Marked on survey

Number of trees presently on property: 25

Additional information to enable the application to be properly evaluated:

Fee: ($ 5.00) for trees located on individual building lot.

$ 15.00 per acre for all other lands.

Recommendation from Shade Tree Commission:

OK Providing all municipal Building Requirements are met.

Issued Permit # 459

9/7/83
Date

Stanley Shuler
Signature of Chairman

Approved Denied

DEPARTMENT OF COMMUNITY AFFAIRS
DIVISION OF HOUSING
BUREAU OF CONSTRUCTION CODE ENFORCEMENT
NEW HOME WARRANTY PROGRAM
CN 805
Trenton, New Jersey 08625

CERTIFICATE OF PARTICIPATION

in New Home Warranty Security Fund

PURCHASER

1

George, Phyllis & Jeffrey Carfora
NAME
677 Ninth St.
STREET AND NO.
Secaucus, NJ 07094
CITY STATE ZIP

BUILDER

2

PARADISE CUSTOM HOMES, INC.
NAME
Rd 3 Box 164D
STREET AND NO.
Jackson, NJ 08527
CITY STATE ZIP

PHONE NUMBER: 201) 928-3195

SELLING PRICE* 60,450.00

Amount of Premium 241.80
(.4 x 1% x Selling Price)

N.J. BLDR. REGISTRATION # 04651

Registered Builder's Signature

*Any change in the selling price & premium must be reported to the Bureau along with supplemental payment if applicable.

NEW DWELLING UNIT LOCATION

3

24 Stuyvesant Rd.
STREET NAME AND NUMBER
Brick, NJ 08723
CITY ZIP
605-1 18,19,20
BLOCK NUMBER LOT NUMBER
Brick Ocean
MUNICIPALITY COUNTY

COMMENCEMENT DATE OF WARRANTY

4

	month	day	year
COMMENCEMENT DATE	3	25	85

(The date of closing or first occupancy, whichever occurs first.)

NOTE: Any change in the commencement date must be reported to the Bureau.

MORTGAGEE INFORMATION

5

Mid Atlantic Bank
NAME OF MORTGAGEE
1455 Broad St.
STREET AND NUMBER
Bloomfield, NJ 07003
CITY STATE ZIP

CHECK TYPE OF HOME:

SINGLE FAMILY ☒ **TWO-FAMILY** ☐ **CONDOMINIUM** ☐ **TOWNHOUSE** ☐

PURCHASER: If you disagree with any of the above information please notify this office in writing as soon as possible.

This certifies that the above described dwelling unit carries a New Home Warranty issued pursuant to the New Home Warranty and Builders' Registration Act, Chapter 46:3B-1 et seq. Said warranty is valid for varying periods of 1, 2, and 10 years subject to the terms and conditions of the Act and Regulations.

NOTE: See reverse side in case of sale of property.

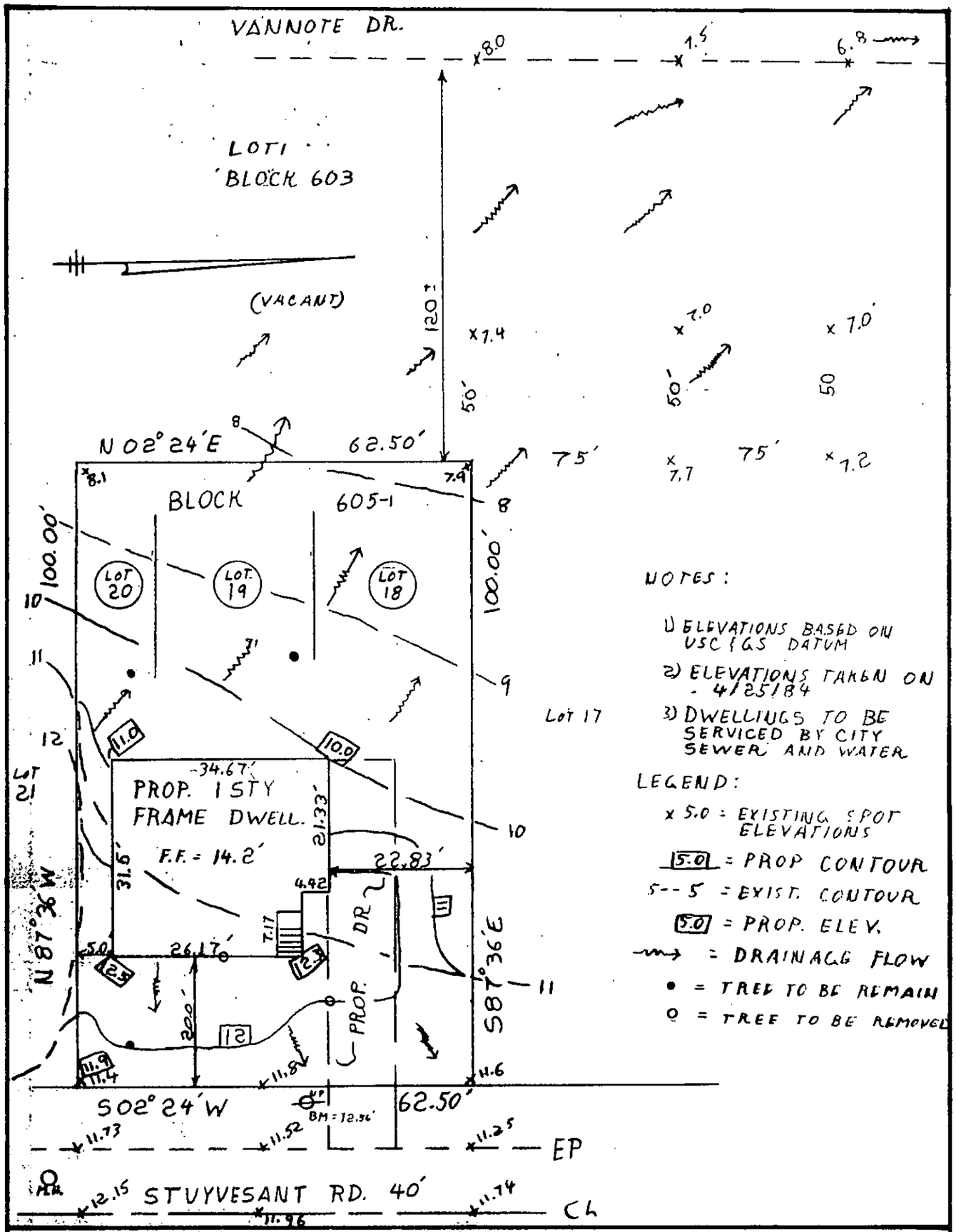
Charles M. Decker

Charles M. Decker, Chief
Bureau of Construction
Code Enforcement

VALIDATION STAMP
CERTIFICATE NUMBER
32583 MAR 21 85

PLEASE REMOVE ALL CARBON PAPER BEFORE RETURNING

MUNICIPAL COPY



PLOT PLAN

Lot(s) 18, 19, 20 Block 605-1 Tax Map Sheet Number 36 C

BRICK TWP. OCEAN County, New Jersey

East Coast Engineering Inc.

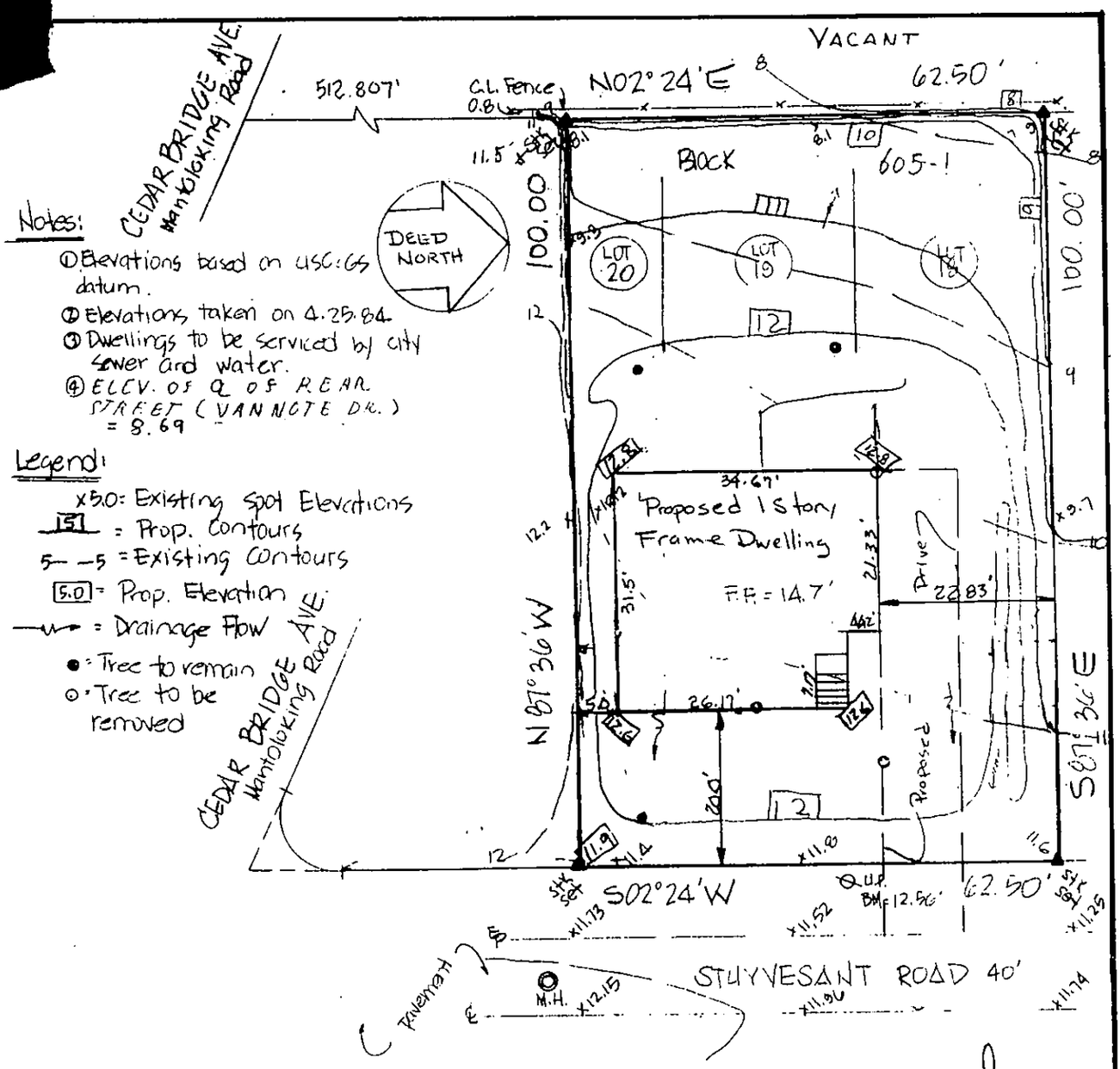
Engineering · Surveying · Planning
1517 Route 37 East
Toms River, New Jersey 08753
201 929-2970

JAY F. PIERSON L.S. P.P.
N.J. L.S. No 27492 N.J. P.P. No. 2525

WILLIAM A. BROOKS P.E.
N.J. P.E. Lic. No. 07502

JAY F. PIERSON, L.S.
N.J. Lic. No. 27492

Scale	Date
1" = 20'	11-5-84
Drawn C.R.M.	Job No. 84-274



Notes:

1. Elevations based on USC&GS datum.
2. Elevations taken on 4.25.84.
3. Dwellings to be serviced by city sewer and water.
4. ELEV. OF ℄ OF REAR STREET (VANNOTE DR.) = 8.69

Legend:

- x5.0: Existing Spot Elevations
- 15 = Prop. Contours
- 5 — 5 = Existing Contours
- 5.0 = Prop. Elevation
- —u→ = Drainage Flow
- ● = Tree to remain
- ⊙ = Tree to be removed

Approved 11/1/84 JFC

Certified to: Mod Tech Corp.
Financial Mortgage Services

A.K.A lots 18, 19 and the most northerly 1/2 or 12½' of lot 20 on Map of Stuyvesant Park, property of Stuyvesant Security Co., Osbornville, NJ, surveyed 10/1938 by R. White Morris from deed book 4115 Page 561.

10-30-84 Revised: Location & Size of Proposed Dwelling

SURVEY MAP

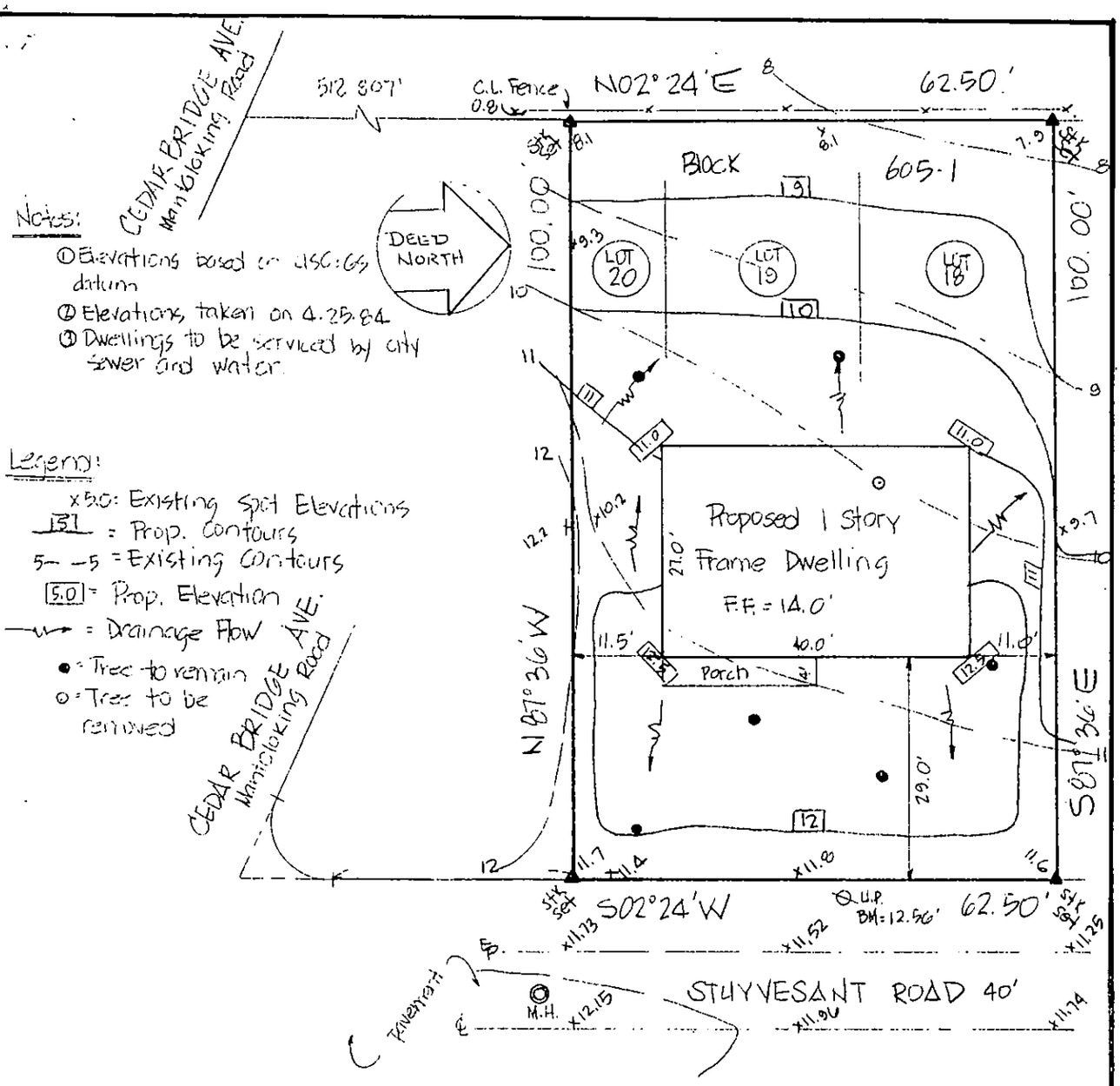
Lot(s) 18, 19, 20 Block 605-1 Tax Map Sheet Number 36C
Brick Township Ocean County, New Jersey

East Coast Engineering Inc.
Engineering · Surveying · Planning
1517 Route 37 East
Toms River, New Jersey 08753
201 929-2970

JAY F. PIERSON L.S. P.P. N.J. L.S. No 27492 / N.J. P.P. No. 2525
JEFFREY J. CARR P.E. N.J. P.E. Lic. No. 28158
WILLIAM A. BROOKS P.E. N.J. P.E. Lic. No. 07502

JAY F. PIERSON, L.S.
N.J. Lic. No. 27492

Scale	Date
1" = 20'	4.26.84
Drawn CAA	Job No. 84-274



Certified to: Mod Tech Corp.
Financial Mortgage Services

A K A Lots 18, 19 and the most northerly 1/2 or 12½' of lot 20 on Map of Stuyvesant Park, property of Stuyvesant Security Co., Osbornville, NJ, surveyed 10/1938 by R. White Morris from deed book 4115 page 561.

SURVEY MAP

Lot(s) 18, 19, 20 Block 605-1 Tax Map Sheet Number 36C
Brick Township Ocean County, New Jersey

East Coast Engineering Inc.
Engineering · Surveying · Planning
1517 Route 37 East
Toms River, New Jersey 08753
201 929-2970

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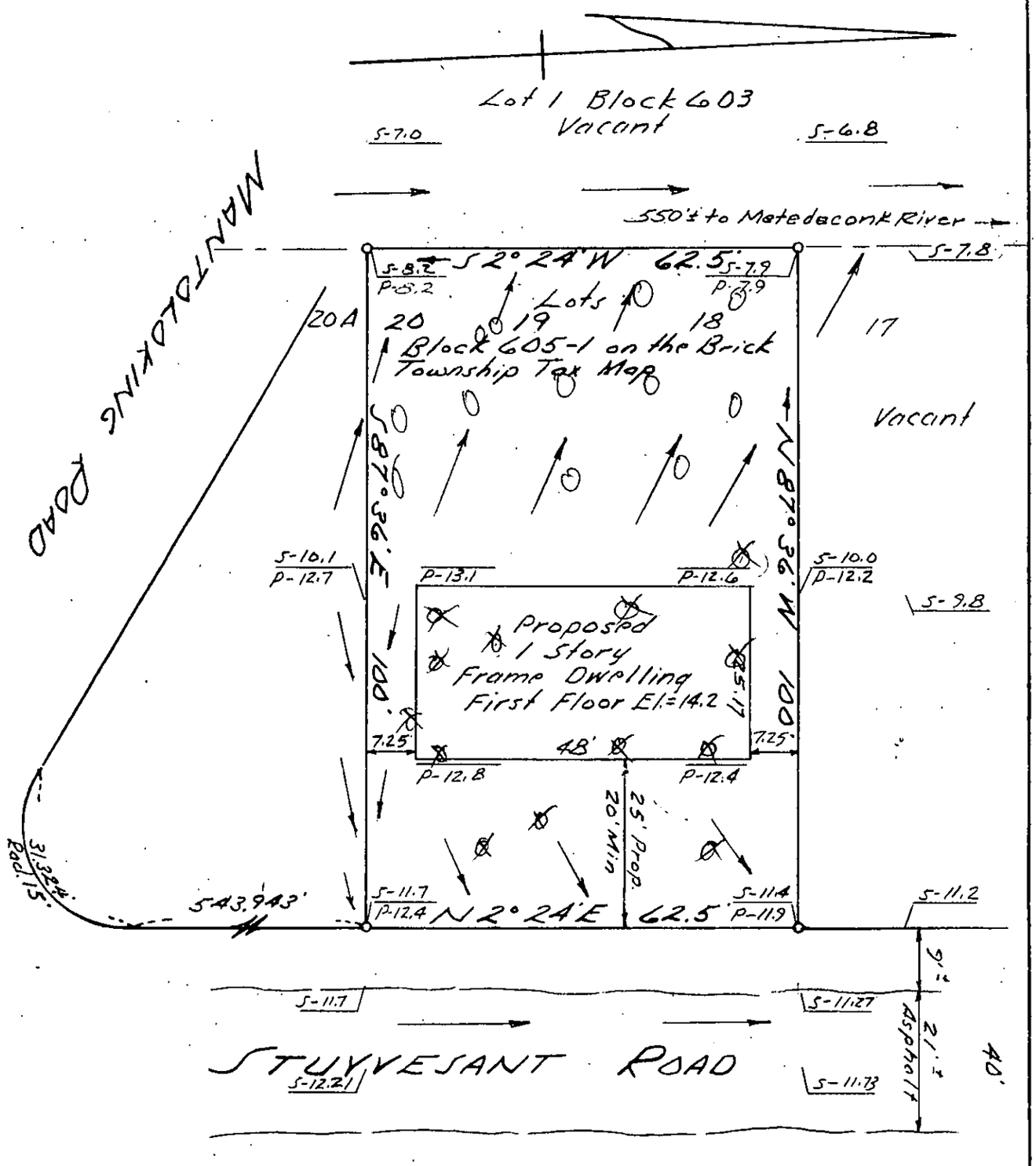
JAY F. PIERSON, L.S.
N.J. Lic. No. 27492

Scale	Date
1" = 20'	4.26.84
Drawn CAA	Job No. 84-274

tree permit —



LEGEND:

S-00.0 = Spot Elev.

P-00.0 = Prop. Fin. Grade

→ = Direction Surface Drainage

U.S.C. & G. Survey Datum

PREMISES SURVEYED FOR

THOMAS CUNNINGHAM

BRICK TOWNSHIP, OCEAN COUNTY, N.J.

SURVEYED January 24, 1983 **SCALE 1" = 20'**

Elbert Morris, Pres.

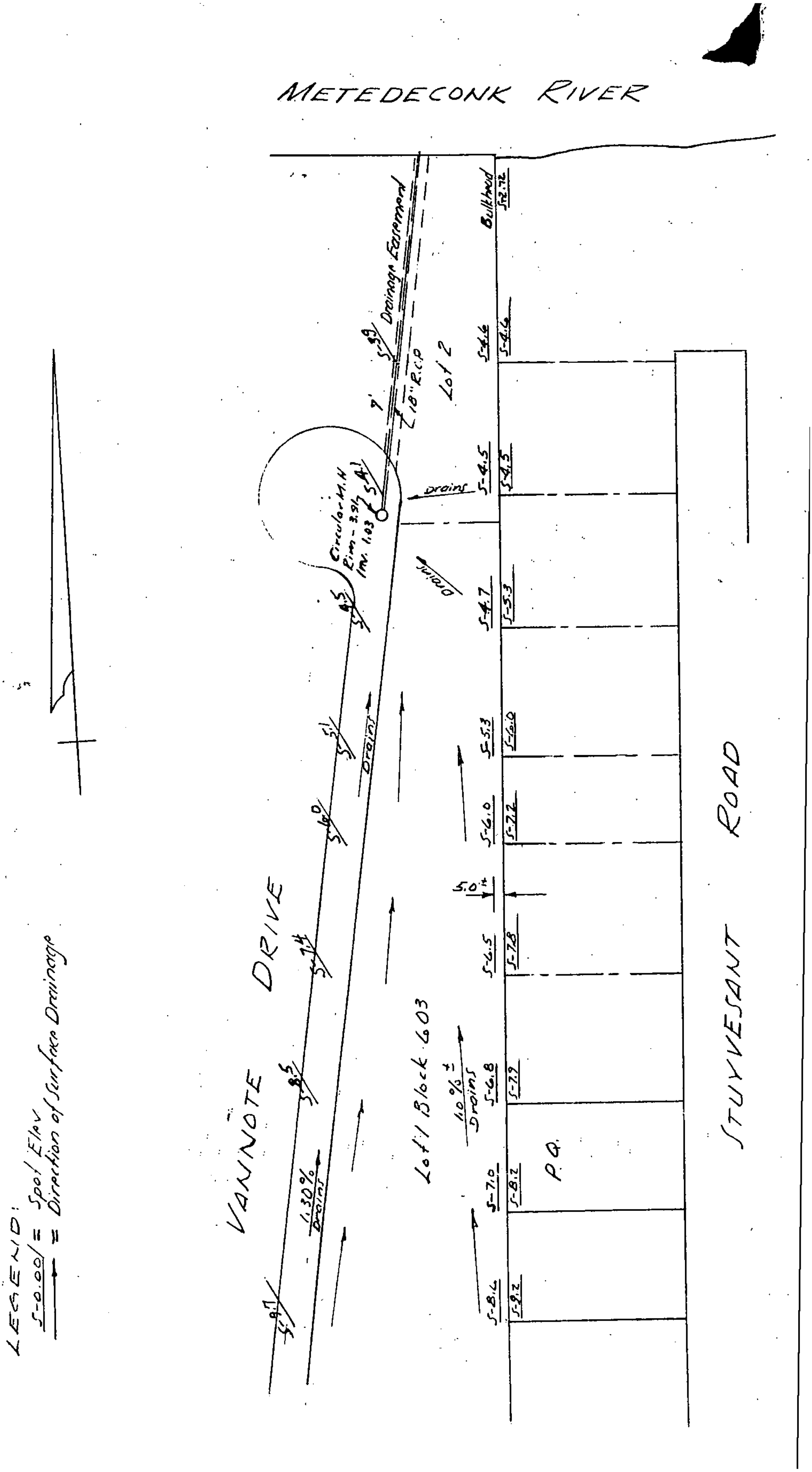
Elbert Morris
Lic. L.S. No. 6589

MORRIS & GLASGOW, INC.
ENGINEERING AND SURVEYING
1119 ARNOLD AVENUE
POINT PLEASANT BORO, N.J.

Charles W. Glasgow
Lic. P.E. & L.S. No. 9095

MAP No. 2-1999

BOOK


METEDECONK RIVER
Bulkhead
S-2.72
Drainage Easement
S-3.9
9'
18" R.C.P
Lot 2
S-4.6
S-4.6
Circular M.H
Rim - 3.91
INV. 1.03
S-4.1
Drains
S-4.5
S-4.5
S-4.5
Drains
S-4.7
S-5.3
S-5.1
Drains
S-5.3
S-6.0
S-6.0
S-6.0
S-7.2
5.0±
VANNOTE DRIVE
S-7.4
S-6.5
S-7.8
Lot 1 Block 603
1.0% ±
Drains
S-6.8
S-7.9
S-8.5
1.30%
Drains
P.O.
S-7.0
S-8.2
S-9.1
S-8.6
S-9.2
STUYVESANT ROAD
LEGEND:
S-0.00 = Spot Elev
= Direction of Surface Drainage