BLOCK 211.03 LOT 8 QUALIFICATION CODE _____ ADDRESS (SITE) 21 Rochester Dr. PERMIT NO. 06-1305

Called 5/3/06 dl

CONSTRUCTION PERMIT APPLICATION

C06-100974

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

I. IDENTIFICATION

1. Proposed Work Site at: 21 Rochester Dr.
2. Name of Owner in Fee: Antini Tel. (___) _____
   Address 21 Rochester Dr (street) Brick (municipality) NJ 08723 (zip code)
3. Ownership in fee: Public _____ Private X
4. Principal Contractor: BRAY GENERAL CONTRACTORS Tel. (732) 477-1866
   Address 429 ARC LANE BRICK NJ 08723
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 02-0636876 FAX: (___) _____
5. Architect or Engineer _____ Tel. (___) _____
   Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun BRAY General Contractors
   Tel. (732) 477-1866 FAX: (___) _____

Deck

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	5023	$ 288		
2. Electrical				
3. Plumbing				
4. Fire Protection				
5. Elevator Devices				
6. Subtotal		$		
7. Less 20% for State Plan Review				
8. Subtotal		$		
9. State Permit Fee Surcharge		16		
10. Subtotal		$		
11. Cert. of Occupancy				
12. Other 21A		30		
13. TOTAL		$ 334		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ft.	
3. Area — Largest Floor sq. ft.	
4. New Building Area sq. ft.	
5. Volume of New Structure cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ft.	
10. Wetlands yes	
no	
11. Max. Live Load	
12. Max. Occupancy Load	

OPTIONAL (for office use only)

II. PROPOSED WORK	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building					5-2-06		6/12/06		
3. ☐ Addition									
4. ☐ a. Repair									
☒ b. Alteration	12,000								
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition		CW	4/28/06		4/28/06				
TOTAL COSTS	12,000								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:
   Before Construction _____
   After Construction _____
   Net Gain or Loss _____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

LDS BR-B 10524577

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(e)1.vii:

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

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature _____ Date _____

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

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

( ) Check if contractor.

Agent Name BRAY GENERAL CONTRACTORS, LLC

Address 429 ARC LANE
BRICK, NJ 08723

Telephone (732) 477-1866

Signature _____

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

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

Name of Code & Edition		Name of Code & Edition			
Building	_____	Energy	_____	Other	_____
Electrical	_____	Barrier Free	_____		_____
Plumbing	_____	Flood Hazard	_____		_____
Fire Protection	_____	As Built Elevation Cert.	_____		_____
Mechanical	_____	Other	_____		_____

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

IMPORTANT Pd. prelim 4/27/06 SBT

A.H.B.T. - MANDATORY FEE - RESIDENTIAL

ANY BUILDING QUESTIONS
CALL 732-262-1027

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

☒ Zoning Application deemed complete Initialed: SBT Date: 4/17/06

☐ Zoning Application approved Initialed: _____ Date: _____

☐ Zoning permit updates:

_____

_____

_____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	06/13/2006
Tracking Number	C-06-100974
Permit Number	06-1305
Permit Issue Date	05/04/2006

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 21 ROCHESTER DR. Brick Township, NJ Block: 211.01 Lot: 8 Qual:

Owner in Fee: ANTINI, WILLIAM & SUZANNE

Owner Address: 21 ROCHESTER DR BRICK NJ 08723

Telephone:

Contractor BRAY CONTRACTING

Address 429 ARC LANE BRICK NJ 08723-

Telephone: 732/4771866 Fax:

License Number or Builders Registration Number: Federal Emp. Number: 02-0638312

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:

DECK

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:

Construction Official

Fee: $0.00

Check Number: 5623

Collected By: Mary Jane Rinaldi

Date Printed: 06/13/2006

CONSTRUCTION PERMIT

Date Issued 5/4/2006
Control # C-06-100974
Permit # 06-1305

IDENTIFICATION Block: 211.01 Lot: 8 Qualifier
Work Site Location: 21 ROCHESTER DR. Brick Township, NJ
Owner in Fee ANTINI, WILLIAM & SUZANNE
Address 21 ROCHESTER DR BRICK NJ 08723
Telephone:

Contractor BRAY CONTRACTING
Address 429 ARC LANE BRICK NJ 08723-
Telephone: 732/4771866
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 02-0638312

Is hereby granted permission to perform the following work:

- [x] BUILDING
- [ ] PLUMBING
- [ ] LEAD HAZARD ABATEMENT
- [ ] ELECTRICAL
- [ ] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
DECK

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $12,000

Construction Official — Date 5/4/2006

PAYMENTS (Office Use Only)

Building	$288
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$16
CO Fee	
Other	$30
Total	$334
Check No.	5623
Cash	$0
Credit	$0
Collected By	Mary Jane Rinaldi

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

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.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 06-1305

Date Issued / Permit # 5-4-06

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

Block 211.01 Lot 8 Qualification Code

Work Site Location 21 Rochester Dr
BRICK NJ 08723

Owner in Fee ANTINI

Address 21 Rochester Dr.
BRICK NJ 08723

Tel. ( )

Contractor BRAY General Contractors

Address 429 Arc Lane
BRICK NJ 08723

Tel. (732) 477-1866 FAX ( )

Contractor License No. or Builder Registration No.

Federal Emp. No 02-0636876

C. CERTIFICATION IN LIEU OF OATH

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

Signature Scott J Bray

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Deck

See Notes in Rec.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	5-2-06	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 6-12-06
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing			05/26/06	
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			06/09/06	
Barrier-Free				

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [X] Other DECK
- [ ] Demolition

FEE (Office Use Only)
$

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area — Largest Floor Sq. Ft.
New Bldg. Area/All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $ 12,000—
3. Total (1+ 2) $ 12,000—

Township of Brick
Zoning Permit

Approved: Wednesday, April 19, 2006 **Number:** 429

Block 211.01 **Lot** 8 **Zone:** R-5

Property Address: 21 Rochester Drive

Applicant: Scott J. Bray, Bray General Contractors

Property Owner: William and Susan Antini

Existing Use: Single Family Residential

Proposed Use: Single Family Residential

Proposed Construction: Replace and enlarge existing second story deck, 15' x 38', 4' x 27' stairs and walkway, 10' high.

Conditions: The stairs and walkway must be replaced in the same location. The deck must be set back at least 15 feet from the rear property line and 5 feet minimum/12 feet total from the side property lines.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Principal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

Applications missing any of the following information will delay processing and may be returned to you.

APR 19 2006

BLOCK 211.01 LOT 8 QUALIFIER ———

PROPERTY ADDRESS 21 Rochester Dr.

PERSONAL NAME OF APPLICANT Scott J. Bray

BUSINESS NAME OF APPLICANT Bray General Contractors

MAILING ADDRESS OF APPLICANT 429 Arc Lane Brick NJ 08723

PROPERTY OWNER'S FULL NAME William & Susan Austin

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-family dwelling
☐ Commercial (please describe)_____

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-dwelling
☐ Commercial (please describe)_____

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) _____ Height_____
☐ Addition - Height_____
☐ Alteration
☒ Porch or deck - Height 10'
☐ Shed - Height _____
☐ Fence - Type_____ Height_____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) _____

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT Scott J Bray Date ———

Reviewed by Zoning Office SC Date 4/19/06 Approved ( ) Denied

March 2003----------

4/17/06

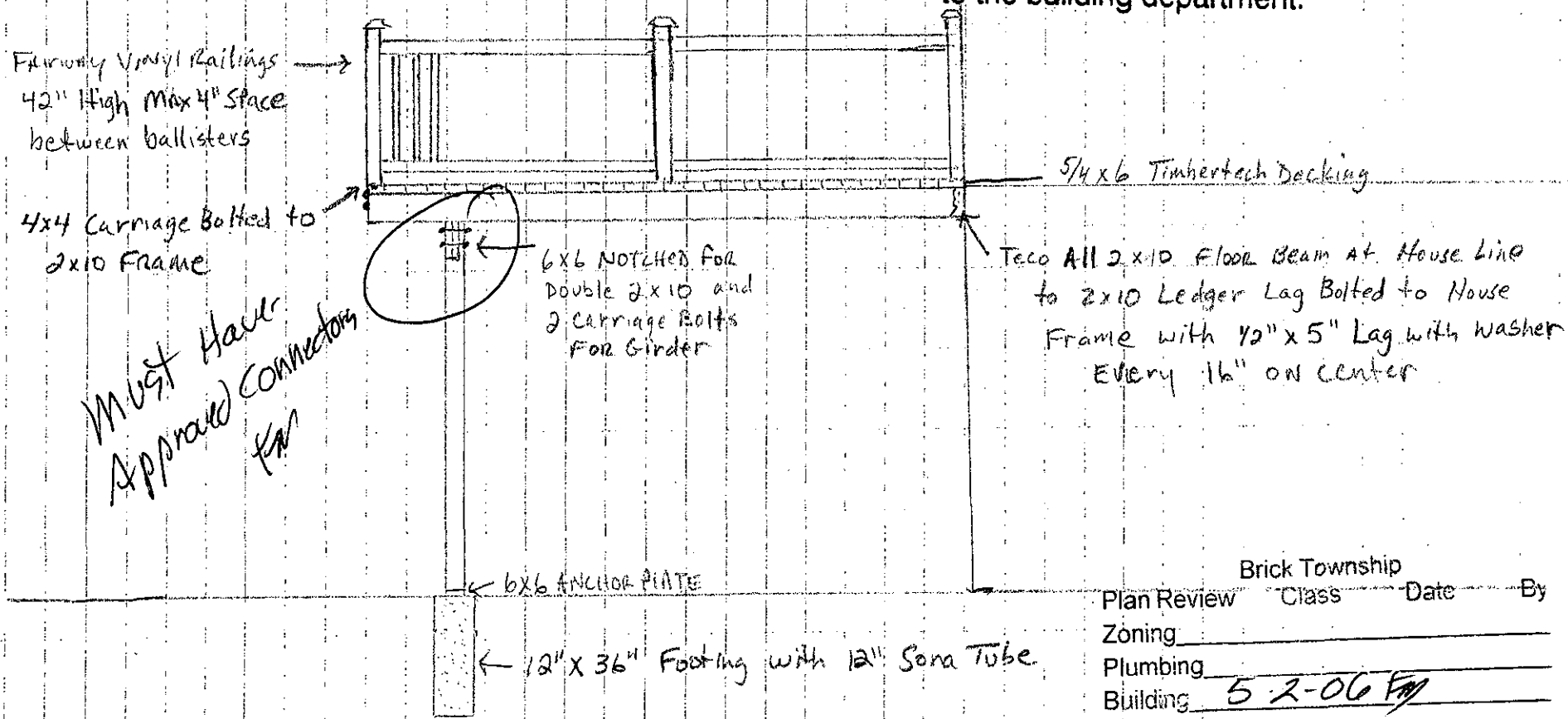
Antini
21 Rochester Dr
Brick NJ 08723

Lot - 8

Block - 211.01

All Framing Lumber ACQ

Release of these prints by the building department constitutes general approval only, and does not relieve the owner, contractor, architect or engineer of sole responsibility for full construction code compliance as per (N.J.S.C. chapter 23 title 5) further, it shall be the contractor's responsibility to establish and conform to workmanlike standards, acceptable to the building department.



Scale 1/4" = 1'

Brick Township

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		5-2-06	
Fire			
Electrical			

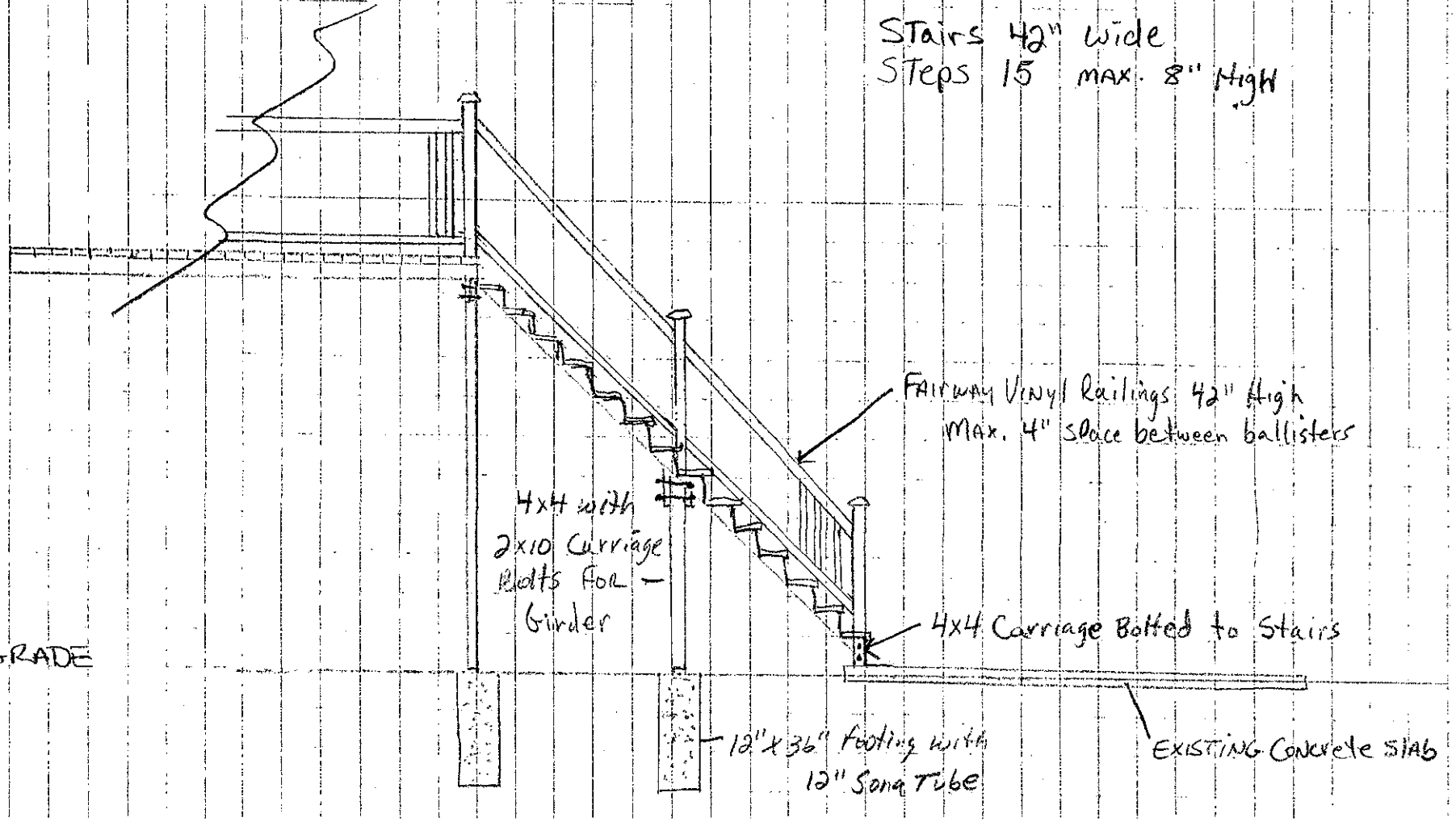
ANTINI
21 Rochester Dr
BRICK NJ 08723

Lot - 8

Block - 211.01

Brick Township

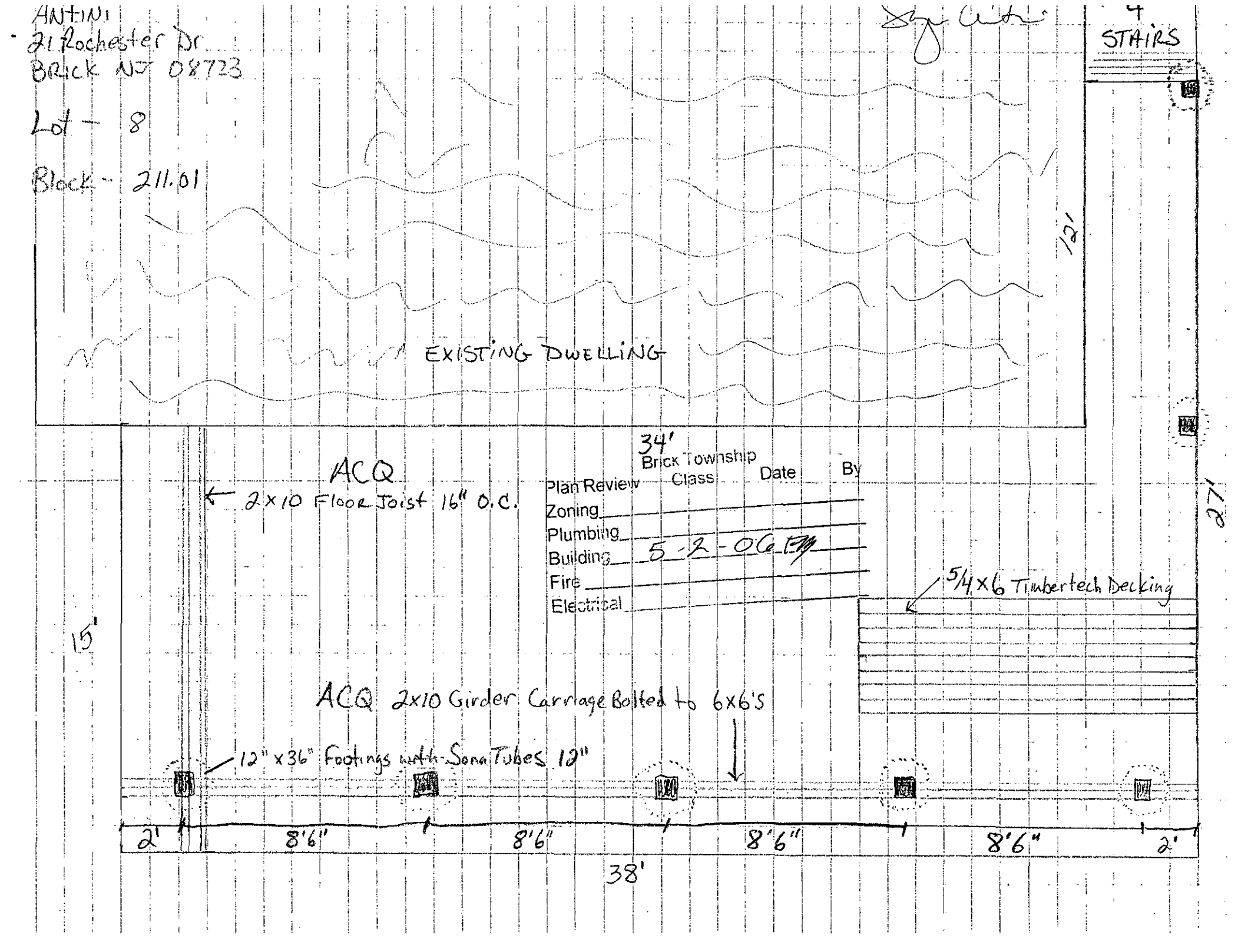
Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		5-2-06	
Fire			
Electrical			



ANTINI
21 Rochester Dr.
Brick NJ 08723

Lot - 8

Block - 211.01



THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE

Division of Consumer Affairs

HAS REGISTERED

Bray General Contractors LLC
Scott Bray
429 ARC LANE
BRICK, NJ 08723

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

03/07/2005 TO 12/31/2006
VALID

13VH00138200
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

Jeffrey Burstein
ACTING DIRECTOR

Applicable to Ordinance 720-92
This form must be handed in with permit application or a permit will not be issued

TOWNSHIP OF BRICK
Debris Form

Work Site Address: 21 Rochester Dr.

Block: 211.01 Lot: 8

Contractor: Bray General Contractors

Contractor's Address: 429 Arc Lane Brick NJ 08723

Type of Construction (minor, new home): Deck

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

Party responsible for removal: H+D Rose Ho Inc.

Dumpster size: 20 yd.

Destination of debris: Ocean County Landfill

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

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 that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation.

Scott J Bray
Signature

4-17-06
Date

Scott J Bray
Print Name

06-1305
cert issued
6/13/06
06 19

OFFICE OF AFFORDABLE HOUSING
MANDATORY DEVELOPMENT FEES

BLOCK:	*211.01*	LOT:	*8*
SITE ADDRESS:	*21 Rochester Dr.*		
CONTROL #:	*06-100974*	WORK TYPE:	*Deck*
APPLICANT:	*Bray General Contractors*	PHONE #	*732-477-1866*
APPLICANT ADDRESS	*429 Arc Lane*	CITY/STATE/ZIP:	*Brick, NJ 08723*

MANDATORY DEVELOPER FEES

_X__ Residential is 1%
___ Commercial is 2%
_X__ Waiver Signed for estimated Mandatory Development Fee

Business Name:

The estimated equalized assessed value: Residential *$ 6,780.00*
Commercial

04/24/2006
Date

The final equalized assessed value at the above referenced site is: Residential *$ 4,100.00*
Commercial

Date

Prel. Fee (Res)		Final Fee (Res)	*($26.80)*	*REFUND DUE*
Prel. Fee (Comm)	$ -	Final Fee (Comm)	$ -	*12/01/2006*
Waiver Fee(Res. Only)	*$ 67.80*			
Check #	*6937*	Check #		
Date Paid	*04/27/2006*	Date Paid		
Total Fee Paid (Res)	*$ 41.00*			
Total Fee Paid (Com)	$ -			

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

Authorized Signature – Township of Brick