BLOCK 28 LOT 42 QUALIFICATION CODE 19102 ADDRESS (SITE) 114 Locust Ave PERMIT NO. _____

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Propsed Work Site at: 114 Locust Ave
2. Name of Owner in Fee: [redacted] Tel. [redacted]
   Address Same As Above
   street municipality zip code
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Self Tel. ( ) Same
   Address Same
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: ( ) _____
5. Architect or Engineer _____ Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work _____
   Tel. ( ) _____ FAX ( ) _____

Used A.G. Pool 24' Round Deck/Fence

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	74-		
2. Electrical				
3. Plumbing				
4. Fire Protection				
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review				
8. Subtotal	$			
9. DCA Training Fee		1-		
10. Subtotal				
11. Cert. of Occupancy				
12. Other				
13. TOTAL	$			

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	N/A sq. ft.	
8. Flood Hazard Zone		
9. Base Flood Elevation	ft.	
10. Wetlands yes		
no		
11. Max. Live Load		
12. Max. Occupancy Load		

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									
3. ☐ Addition									
4. ☒ Alteration	900				6-3-02	CG			
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☒ Electrical	200				5/30/02	CP			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	1100								

OPTIONAL (for office use only)

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☒ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use: U
2. Use Group:
3. Change in Use Group, Indicate Former:

DS HW-B 10802132

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 an [redacted] subject to punishment.

Signature [redacted] Date 5/24/02

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 _____

Address _____

_____

Telephone (_____) _____

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.				

HOWELL TOWNSHIP
251 PREVENTORIUM ROAD
HOWELL NJ 07731
732-938-4500

CERTIFICATE

IDENTIFICATION

Date Issued: 09/04/2003
Control #: 19102
Permit # 20021408

Block: 28 Lot : 42 Qual: _____

Work Site : 114 LOCUST AVENUE
HOWELL

Owner in Fee: [redacted]
Address: 114 LOCUST AVENUE
HOWELL NJ 07731

Telephone: [redacted]
Agent/Contractor:
Address: 114 LOCUST AVENUE
HOWELL NJ 07731

Telephone: [redacted]

Lic. No./ Bldrs. Reg.No.: _____ Federal Emp. No.: _____

Social Security No.: _____

Home Warranty No: _____

Type of Warranty Plan: [ ] State [ ] Private

Use Group: R-3

Maximum Live Load: _____

Construction Classification: _____

Maximum Occupancy Load: _____

Certificate Exp Date: _____

Description of Work/Use: Above Ground Pool (USED)
DECK-FENCE

[ ] **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.

[X] **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.

[ ] **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _or the owner will be subject to fine or order to vacate.

C Phillips 9/8/03

Construction Official
U.C.C 360 (rev. 3/96)

[ ] **CERTIFICATE OF CLEARANCE-LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17 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 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.

[ ] **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

Fees $0.00
Paid [X]Check No 1189
Collected by JM

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

HOWELL TOWNSHIP
251 PREVENTORIUM ROAD
HOWELL, NJ 07731
732 - 938-4500

Permit Number: 20021408
Permit Date: 06/17/2002
Update Number:
Control Number: 19102
Application Date: 05/24/2002

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 28 Lot : 42 Qualifier :

Work site Location: 114 LOCUST AVENUE HOWELL

Owner In Fee: [redacted]

Address: 114 LOCUST AVENUE
HOWELL NJ 07731

Telephone: [redacted]

Use Group(s): R-3

Contractor: [redacted]

Address: 114 LOCUST AVENUE
HOWELL NJ 07731

Telephone: [redacted]

Lic. No. / Bldrs. Reg. No.:

Federal Emp. No.:

is hereby granted permission to perform the following work :

[X]BUILDING [ ]PLUMBING [ ] DEMOLITION

[X]ELECTRICAL [ ]FIRE PROTECTION [ ] OTHER

[ ]ELEVATOR DEVICES [ ]MECHANICAL

[ ]ASBESTOS ABATEMENT [ ]LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:

Above Ground Pool (USED)
DECK-FENCE

ESTIMATED COST OF WORK:

Cost of Construction:	0.00
Cost of Alteration:	1,300.00
Cost of Demolition:	0.00
Total Cost:	$1,300.00

PAYMENTS (Office Use Only)

Building	$74.00
Electrical	$52.00
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	$1.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	**$127.00**
All Fees Waived :	No

Amount to be Paid: **$127.00**
Check Number: 1189
Check amount: $127.00

If construction does not commence within one year of date of issuance, or if construction ceases for a period of six months, this permit is void.

EM 6-14-02

Edward Mack — Date

Construction Official

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times

Collected by: JM
Receipt No:
Total Cash Amount
Total Check Amount $127.00
Total CC Amount
Grand Total $127.00

Note: FIELD COPY MUST BE ON SITE AT ALL TIMES WHEN INSPECTORS COME TO INSPECT!!!!!

HOWELL TOWNSHIP
251 PREVENTORIUM ROAD
HOWELL, NJ 07731
732 - 938-4500

Permit Number: 20021408
Permit Date: 07/14/2003
Update Number: 1
Control Number: 24328
Application Date: 07/14/2003

CONSTRUCTION PERMIT UPDATE

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 28 Lot : 42 Qualifier :

Work site Location: 114 LOCUST AVENUE HOWELL
Owner In Fee: [redacted]
Address: 114 LOCUST AVENUE
HOWELL NJ 07731
Telephone: [redacted]
Use Group(s): R-3

Contractor: [redacted]
Address: 114 LOCUST AVENUE
HOWELL NJ 07731
Telephone: [redacted]
Lic. No. / Bldrs. Reg. No.:
Federal Emp. No.:

is hereby granted permission to perform the following work :

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

DESCRIPTION OF WORK:

REINSTATE ABOVE GROUND POOL PERMIT

ESTIMATED COST OF WORK:

Cost of Construction:	0.00
Cost of Alteration:	0.00
Cost of Demolition:	0.00
Total Cost:	$0.00

PAYMENTS (Office Use Only)

Building	$15.00
Electrical	$10.00
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	$25.00
All Fees Waived :	No

Amount to be Paid: **$25.00**
Check Number: 1552
Check amount: $25.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

GB LG 7-14-03

Gary M. Bertolo — Date
Construction Official

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times

Collected by: LG
Receipt No:
Total Cash Amount
Total Check Amount $25.00
Total CC Amount
Grand Total $25.00

Note:

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 6-14-02
Control # 19102
Permit # 2002 1408

IDENTIFICATION Block 28 Lot 42

Work Site Location [redacted]

Owner in Fee [redacted]
Address 111 Locust Ave
Tel. ( ) [redacted]

Contractor Self
Address [redacted]
Tel. ( ) [redacted]
Lic. No. or Bldrs. Reg. No. [redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: Above Ground Pool 4x24 Round + Deck

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 $ 1,100

Eml (L) 6-14-02
Construction Official Date

PAYMENTS (Office Use Only)

Building	74
Electrical	52
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	1
Cert. of Occupancy	
Other	
Total	127
Check No.	1189
Cash	
Collected by	JV Chm

(see reverse side)

U.C.C. F170
(rev. 5/2K)

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

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

Township of Howell
Preventorium Road
P.O. Box 580
Howell, NJ 07731

CONSTRUCTION PERMIT

Date Issued 7-14-03
Control # 24328
Permit # 20021408

IDENTIFICATION Block 28 Lot 42

Work Site Location 114 Locust Ave Howell

Contractor Self
Address

Tel. ( )
Lic. No. or Bldrs. Reg. No.
Fed. Emp. No.

Owner in Fee [redacted]
Address Same

Tel [redacted]

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: ~~Install~~ A.G. POOL (Removed from long side)

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 $

GB (lg) — Construction Official
7-14-03 Date

PAYMENTS (Office Use Only)	
Building	15.00
Electrical	10.00
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occupancy	
Other	
Total	25.00
Check No.	1552
Cash	
Collected by	

U.C.C. F170
(rev. 3/96)

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

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

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

BUILDING SUBCODE TECHNICAL SECTION

Date Received 6-14-02
Date Issued
Control # 19102
Permit # 20021408

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

Block 28 Lot 42
Work Site Location 114 Locust Ave
Owner in Fee [redacted]
Address
Tele. ( ) [redacted]
Contractor Self
Address
Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am autho[redacted]

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALL ABOVE GROUND POOL 4' x 24' ROUND + Deck

* BARRIER TO COMPLY W/96 'BOCA.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[X] Footing		CG
[ ] Foundation		
[X] Frame	6/3/02	CG
[X] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 9/2/03
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Footing Deck			6/25/02	CG
Foundation				
Slab				
Frame	7/14/03		8/29/03	CG
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final	7/14/03		8/29/03	CG
Barrier-Free				

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

FEE (Office Use Only)

	$
	50-
	24-

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$ 1-
TOTAL FEE	$

B. BUILDING CHARACTERISTICS

Use Group Present ✓ Proposed R3/U
Constr. Class Present _____ Proposed 5B
No. of Stories
Height of Structure Ft.
Area — Largest Floor Sq. Ft.
New Bldg. Area/All Floors N/A Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Alteration $
3. Total (1+ 2) $ 900 USED

U.C.C. F110 (rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

Township of Howell
Preventorium Road - P.O. Box 580
Howell, New Jersey 07731

ELECTRICAL SUBCODE
TECHNICAL SECTION

AG POOL
Bldg
elec

Date Received 6-14-02
Date Issued
Control # 19102
Permit # 20021408

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

Block 28 Lot 42
Work Site Location 114 LOCUST AVE
Owner in Fee/Occupant [redacted]
Address 114 LOCUST AVE
Tele. ( ) [redacted]
Contractor LELE (OWNER)
Address
Tele. ( ) Fax ( )
Lic. No.
Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 200

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[✓] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: 5/30/02
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: 7-14-03
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service	✓			
Final	6-25-02		7-14-03	

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make thi[redacted]on.

Applicant's [redacted]

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

ALL WORK MUST BE DONE TO CODE ("NEC 1999") (ART 680) SEE SHEET ENCLOSED!

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		.....	
		TOTAL NUMBERS	$ 40
1		Pool Permit/with UW Lights	—
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
1	1.5	HP Motors 1/+ HP	12
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		.....	
		.....	
			8 52

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F120 (rev. 3/96)
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

6-25-02 P

1) secure box on post, & change cover on box.
2) bond not #8.
3) 12/3 not 3FT, need 4F conect.
4) strap rvc under deck.
5) Romex on outside of house by meter.

FOR FUTURE REFERENCE AND REORDERING

BEFORE INSTALLING YOUR POOL, PLEASE RECORD THE FOLLOWING INFORMATION:

Size of Pool ..... **Name of Pool** .....

Date Purchased ..... **Where Purchased (Dealer)** .....

Copy the Product Code Numbers and Names Printed on the Outside of all Cartons.

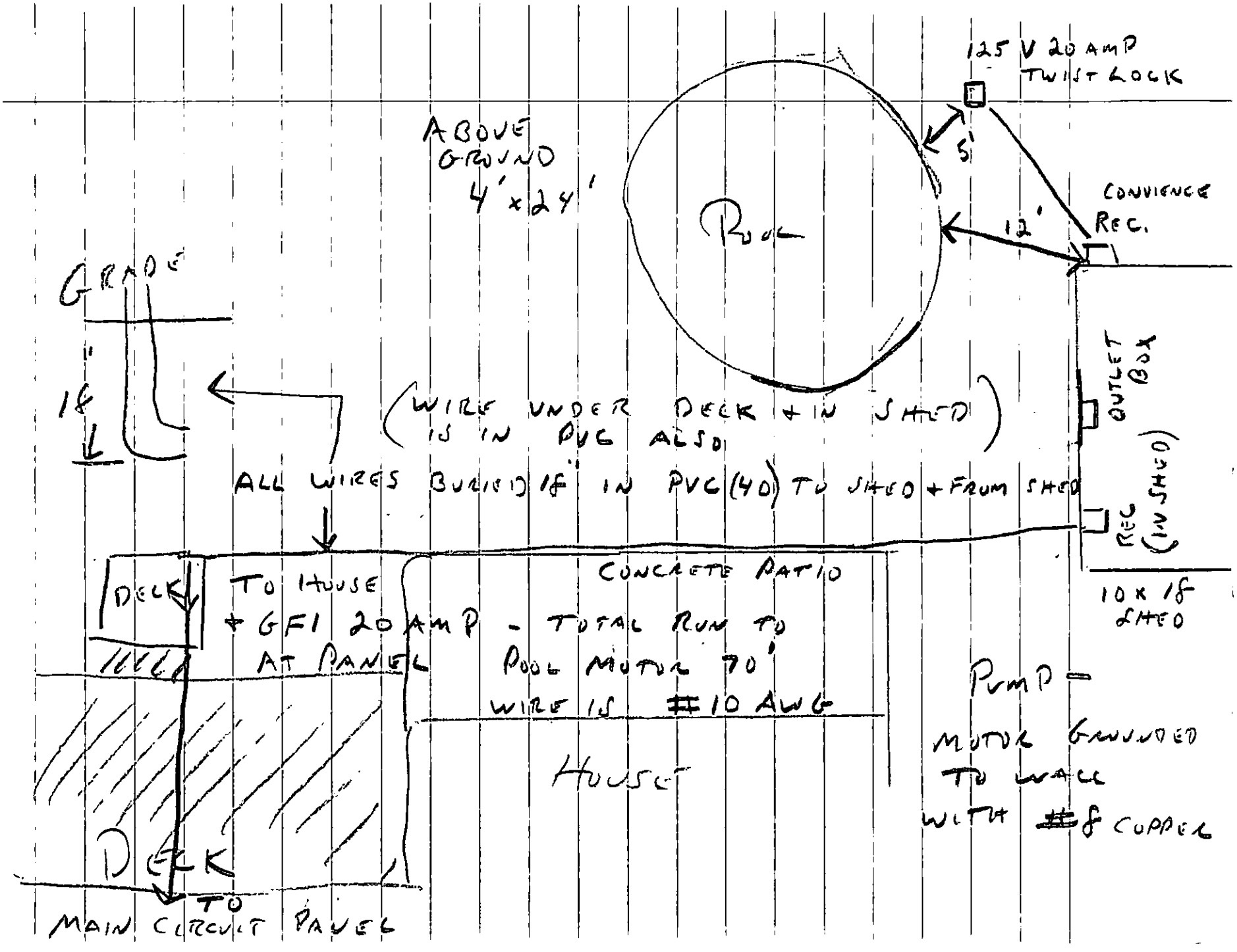
SHOULD IT BE NECESSARY TO ORDER PARTS, CONTACT YOUR POOL DEALER OR

Muskin Customer Service Dept.
401 E: Thomas St. (P.O. Box 629)
Wilkes-Barre, PA 18773
(717) 825-4509

1 800-
338 1013

NO C.O.D. ORDERS

Always refer to parts by their part number. This will assure prompt processing of your order!


125 V 20 AMP
TWIST LOCK
ABOVE
GROUND
4' x 24'
POOL
5'
12'
CONVIENCE
REC.
GRADE
18"
(WIRE UNDER DECK + IN SHED
IS IN PVC ALSO
OUTLET
BOX
REC
(IN SHED)
ALL WIRES BURIED 18" IN PVC (40) TO SHED + FROM SHED
10 x 18
SHED
DECK
TO HOUSE
+ GFI 20 AMP - TOTAL RUN TO
AT PANEL POOL MOTOR 70'
WIRE IS #10 AWG
CONCRETE PATIO
HOUSE
PUMP -
MOTOR GROUNDED
TO WALL
WITH # OF COPPER
DECK
TO
MAIN CIRCUIT PANEL

TOWNSHIP OF HOWELL

LAND USE CERTIFICATE

SHORT FORM

The undersigned applicant hereby applies for a Land Use Certificate for the following, to be issued on the basis of the representations contained herein, all which applicant swears to be true:

PROPERTY: BLOCK ✓ 28 LOT(S) ✓ 42 STREET ✓ 114 Locust Ave

APPLICANT: NAME ✓ [redacted]

ADDRESS ✓ 114 Locust

PHONE ✓ [redacted]

PROPOSED USE: ZONE:

____ Fence	____ Detached garage	____ Shed
✓ Pool	✓ Deck	____ Patio
____ Tennis Court	____	____ Antenna/Antenna Tower
____ Farm structure: Specify ____		
____ Other: Specify ____		

LOCATION OF STRUCTURE: Setback from right of way ____ feet (and ____ feet if a corner lot)
Side yard clearances ✓ 65 feet and ____ feet
Rear yard clearances ✓ 15 feet

DESCRIPTION OF STRUCTURE: Height ✓ 41' feet to highest point
~~Length~~ ____ feet Width 24 feet

Type of fence: ____ (post & rail, chain-link, etc.)

✓ ATTACH A COPY OF SURVEY OR SKETCH OF PROPOSAL

FOR OFFICE USE:
FEE: ✓ $10.00 residential
FEE: ____ $20.00 non-residential

✓ [redacted] ✓
SIGNATURE OF APPLICANT DATE

Based on the above application and the statements which are made part thereof, the proposed usuage is/is not found to be in accordance with the Land Use Ordinance of the Township of Howell and is hereby approved/disapproved.

5/13/02
Date

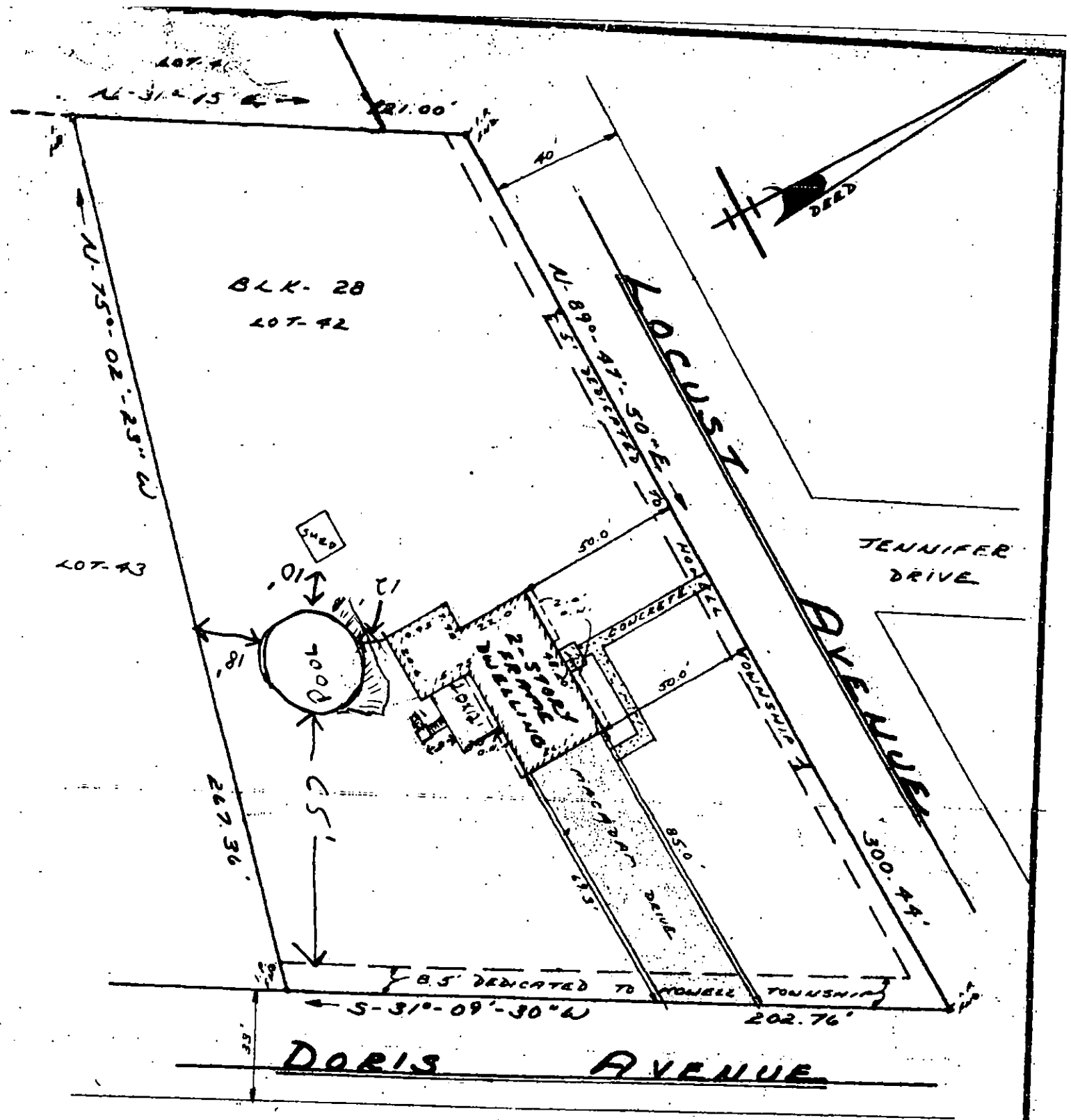
Betty Lou Fenton
HOWELL TOWNSHIP LAND USE OFFICER

COMMENTS/EXPLANATIONS: To add on above ground pool, with deck as per plan submitted.
Receipt # 7480, Ck. # 1287

REFERRALS:

✓ To Building Dept.	____ To Zoning Bd.	____ To Engineering
____ To Planning Bd.	____ To Bd. of Health	____ To ____
____ To Fire Prevention	____ To M.U.A.	____ ____

WHITE — APPLICANT CANARY — BUILDING PINK — LAND USE OFFICE



Property known as Lot-42, Blk.-28 as shown on Sheet No. 16 of the Howell Township Tax Map.

Aug 19, 1986

YURO ASS INC,
HOWELL

This survey is certified to:

[redacted]

Anchor Mortgage Services, Inc. its successors and/or assigns;
Progressive Lawyers Services, Inc. agents for Lawyers Title Insurance Corporation;
Perry & Blum, Esqs.

Robert S. YURO L.S. #19483

TOWNSHIP of HOWELL

251 Preventorium Road
Post Office Box 580
Howell, New Jersey 07731-0580

FAX (732)938-6492
Office (732)938-4500
Ex. 2400

June 23, 2003

[redacted]
114 Locust Avenue
Howell, NJ 07731

Block 28 Lot 42 Permit#2002-1408

Dear Resident,

In purging the files of the Building/Code Department, it has been brought to our attention that you still have an open permit dated 6-14-02 for the following work: AG Pool

/ X / BUILDING
/ X / ELECTRIC
/ / PLUMBING
/ / FIRE

All permits must have a FINAL INSPECTION.

Failure to have a Final Inspection on your permit, puts you in violation of State Laws and Township Ordinances.

You are required to contact this office within 72 hours of receipt of this letter, to schedule a FINAL INSPECTION in order to avoid any further problems.

Your anticipated cooperation in this matter is greatly appreciated as we are looking out for your best interest as well as following State and Municipal regulations.

Should you have any questions in regard to the above information, please feel free to contact our office.

Respectfully,

Lynn Dilworth

Howell Township
Building Department

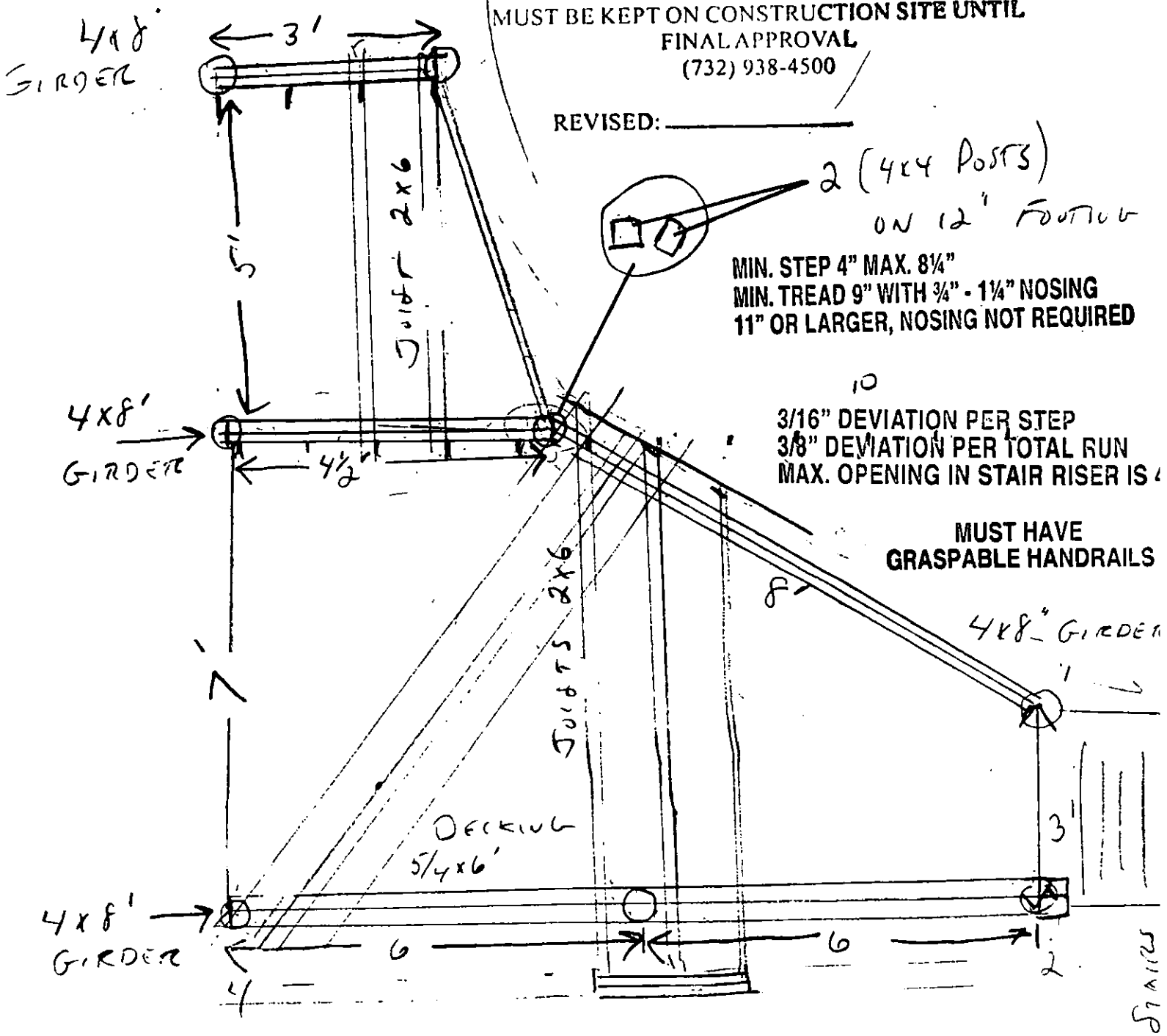
FILE COPY

Township of Howell
Construction Code Department
Plans released for Permit

Date: 6-3-02 Permit # _____
Block: 28 Lot 42
Sub-code Official GB

A COPY OF THESE PLANS
MUST BE KEPT ON CONSTRUCTION SITE UNTIL
FINAL APPROVAL
(732) 938-4500

REVISED: _____



JOISTS 16" O.C IF C.C.A
12" O.C IF TRAX

FILE COPY

Tim[illegible] Howell
C[illegible] Department
[illegible] for Permit

[illegible] Permit # _____
_____ Lot _____
[illegible] _____

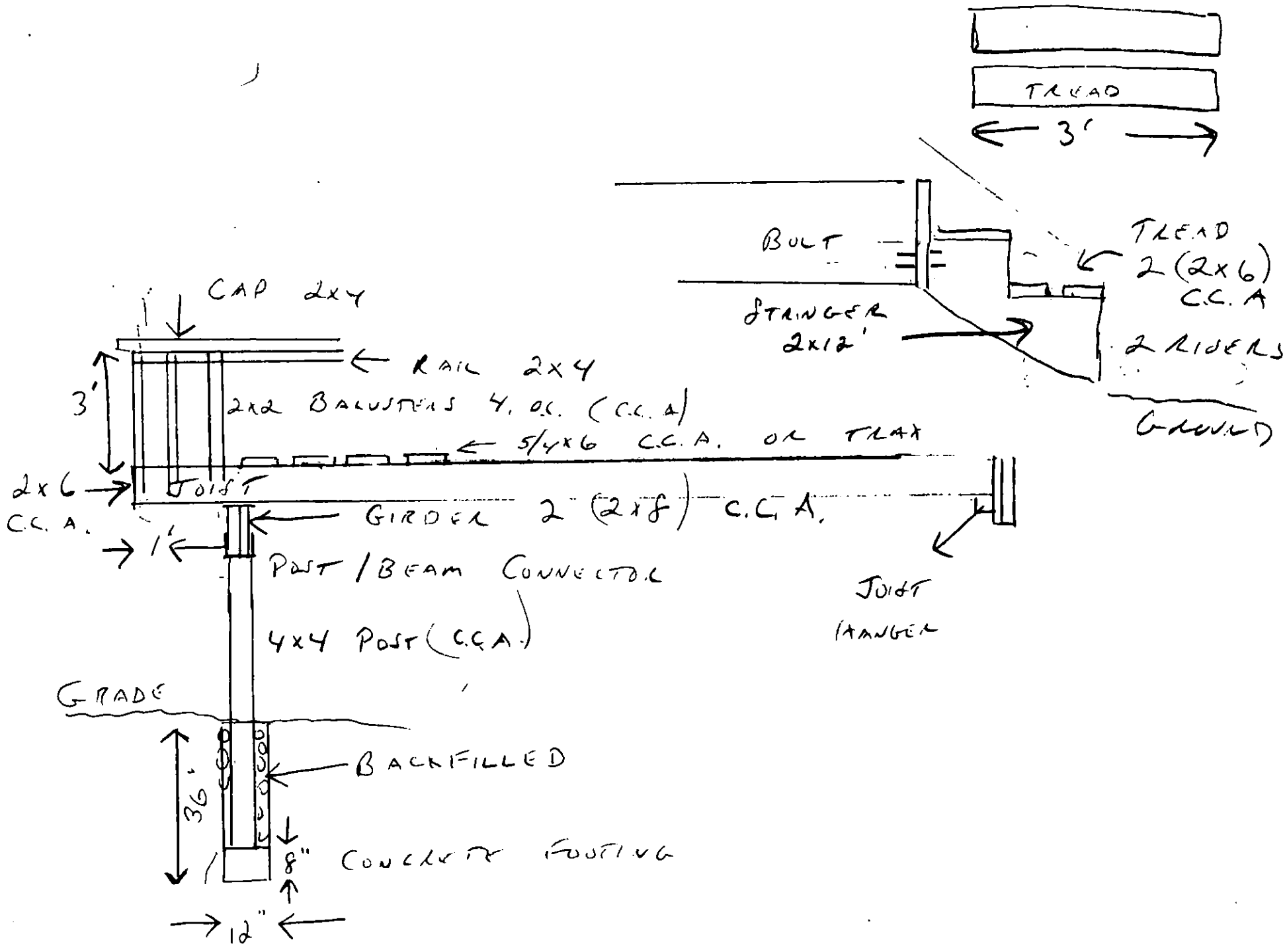
A COPY OF THESE PLANS
[illegible] RECEIPT ON CONSTRUCTION SITE UNTIL
FINAL APPROVAL
(732) 935 1500

REVISED: _____

[illegible]
[illegible]
[illegible]

[illegible]

[illegible]
[illegible]


TREAD
3'
BOLT
TREAD
2 (2x6)
C.C. A
STRINGER
2x12'
2 RISERS
GROUND
CAP 2x4
RAIL 2x4
3'
2x2 BALUSTERS 4" O.C. (C.C.A)
5/4x6 C.C.A. OR TREAT
2x6
C.C.A.
JOIST
GIRDER 2 (2x8) C.C.A.
1'
POST / BEAM CONNECTOR
JOIST
HANGER
4x4 POST (C.C.A.)
GRADE
36"
BACKFILLED
8"
CONCRETE FOOTING
12"

TAYLOR FENCE COMPANY

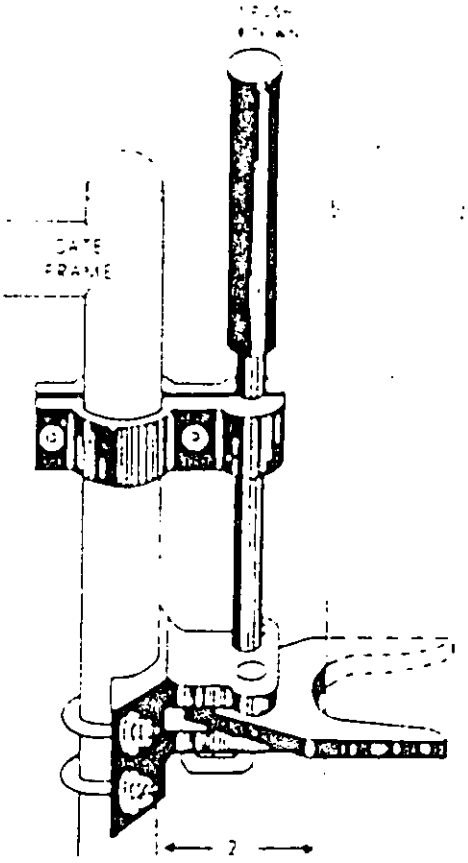
747-5498 938-4355

Retail Price List

FITTINGS

EACH

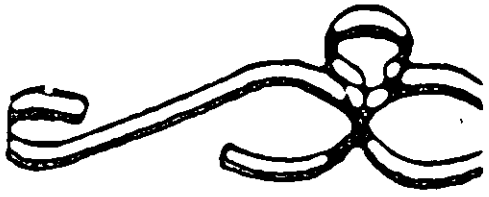
8.75
9.78



18.50

/
2"
nd 9.98

2.64



uminum

BUREAU OF INSPECTIONS
Township of Howell.

Correction Notice

Permit # 20021408 Location _____

I have, on this day, inspected this structure and these premises and have found the following violations of the State Regulations governing same:

OK (1) PERMIT MUST BE REINSTATED

OK (3) STAIRS NOT UNIFORM

OK (3) NEED FIELD COPY OF PLANS FOR FRAME INSPECTION

OK (4) LATTICE UNDER DECK DEEMED CLIMBABLE MUST USE SMALLER LATTICE (Removed from (5) ~~Side~~ Long side

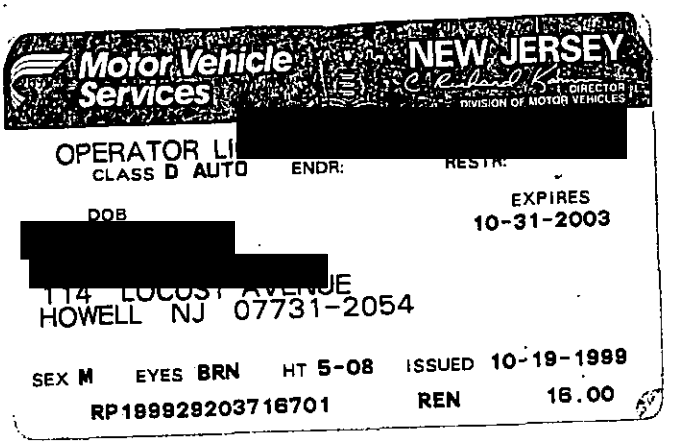
OK (5) NEED GRASPABLE HANDRAIL

OK (6) STAIRS MUST HAVE NOSING

You are hereby notified that no more work shall be done upon these premises until the above violations are corrected. When corrections have been made, call for reinspection, 938-4500.

DATE 7/14/03 SCO ECT

DO NOT REMOVE THIS TAG



Motor Vehicle Services

NEW JERSEY

DIRECTOR
DIVISION OF MOTOR VEHICLES

OPERATOR LI[redacted]
CLASS D AUTO ENDR: RESTR:

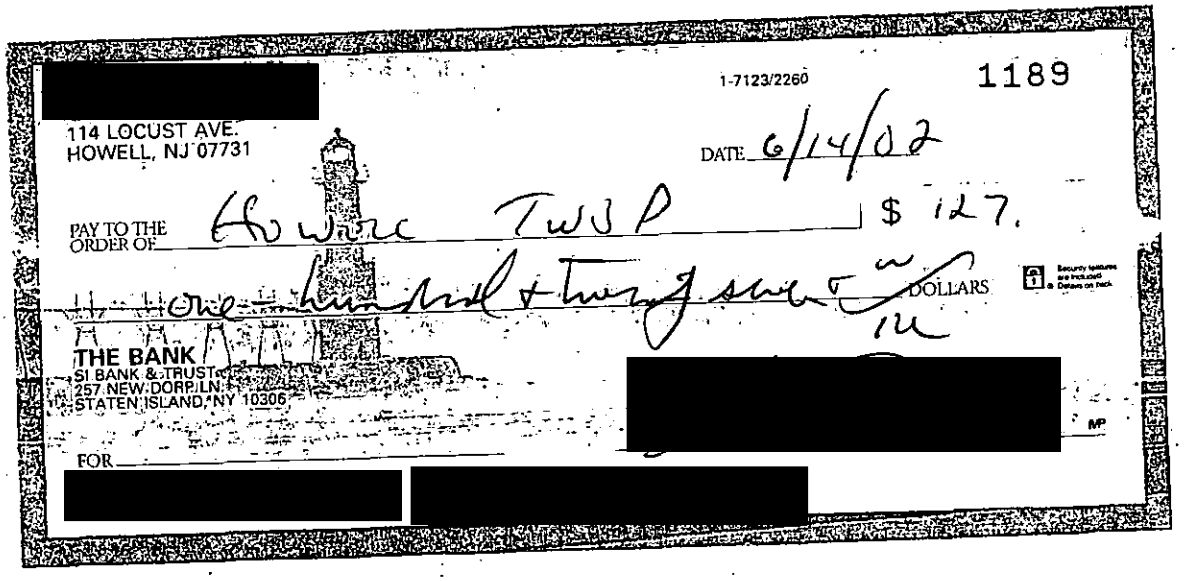
EXPIRES
10-31-2003

DOB [redacted]

114 LOCUST AVENUE
HOWELL NJ 07731-2054

SEX M EYES BRN HT 5-08 ISSUED 10-19-1999

RP189929203716701 REN 16.00



[redacted]
114 LOCUST AVE.
HOWELL, NJ 07731

1-7123/2260 1189

DATE 6/14/02

PAY TO THE ORDER OF Howell TWSP $ 127.

One hundred + twenty seven 00/100 DOLLARS

THE BANK
SI BANK & TRUST
257 NEW DORP LN.
STATEN ISLAND, NY 10306

[redacted]

FOR [redacted] [redacted]

TOWNSHIP OF HOWELL CONSTRUCTION DEPARTMENT

PLAN REVIEW CHECK LIST

NAME [redacted] BLOCK 28 LOT 42

ADDRESS 114 Locust Ave ZONING RELEASE _____

DATE SUBMITTED 5-24-02

DEVELOPMENT (If any) A. G. Pool

19102

	Reviewed By:	Approved	Comments
FIRE			
BUILDING ✓	6-3-02 CG	OK	
ELECTRICAL ✓	CP	5/30/02 OK	
PLUMBING			
MECHANICAL			
OTHER			
SEPTIC			

RECEIVED
MAY 24 2002

Township of Howell

251 Preventorium Road
P.O. Box 580
Howell, NJ 07731-0580

Phone: (732) 938-4500
Fax: (732) 938-6492
Web site: www.twp.howell.nj.us

Required Pool Information Packet
Please fill in all information requested

Name: [redacted] **Date:** 5/10/02 **Block:** 28
Address: 114 Locust Ave **Lot:** 42

This is to assist you in determining how to comply with the B.O.C.A. Code requirements and to expedite pool permit. This does not interpret or take the place of the actual wording of the code or everything that the c allow. See attached B.O.C.A. section 421.10 on page 3 of this packet for further details.

Note: All Barriers must be owned by the permit applicant. Under *NO* circumstances are you to u neighbors fence as a barrier.

Part 1 — Barrier Method

(Please check off the proposed method)

____ Minimum Four foot high barrier around the pool. *See page 2 example 1.*
____ Minimum Four foot high barrier around the pool connecting to the house. *See page 2 example 2.*
✓ Minimum Four foot high barrier around the ladder of an above ground pool, or a pre-constructed ladder enclosure complying with code where the pool wall is a minimum of four feet above the ground. *See page 2 example 3.*
✓ If you are using a deck as part of your barrier certain requirements may apply. Please draw your deck and method in the blank space provided on page 2.

Part 2 — Type of Barrier

(Please check off the proposed method)

____ ***Stockade Fence*** Minimum four foot high with maximum spaces of vertical members at 1 ¾" and horiz members facing the pool area.
____ ***Board on Board Fence*** Minimum four foot high with maximum spaces of vertical members at 1 ¾".
____ ***Picket Fence*** Minimum four foot high. Spacing can be 4" if horizontal members are more than 45" apart. If members are less than 45" apart spacing must be 1 ¾".
✓ ***Chain Link Fence*** Minimum four foot high with maximum mesh size openings of 1 ¼" (commonly called mini-chain link)
If a larger chain link fence is used slats may be installed to reduce the openings to not more than 1 ¾".
____ ***Lattice Fence*** Minimum four foot high with diagonal members forming openings of not more than 1 ¾"
____ ***Other*** Please write and draw in the space provided on page 2 with as much detail as possible of your pr type of barrier.
If you are using your existing fence as your required barrier, it must meet the requirements of the 1996 B.O.C.A. code.

I have read and understand the BOCA building regulations on page 3 and can attest that the existing barrie barrier will comply with the 1996 B.O.C.A. building code.

Please sign here: [redacted] Date: 5/22/02

Omission of any information requested will only delay the plan review process.