BLOCK 383.21 LOT 8 ADDRESS (SITE) _____ PERMIT NO. 1384-95

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 342 DELAWARE DR BRICK NJ
2. Name of Owner in Fee: Betty A KLEIN Tel [redacted]
   Address SAME (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: SAME Tel. (___) _____
   Address _____
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. _____ Social Security No. _____
5. Architect or Engineer _____ Tel. (___) _____
   Address _____
6. Responsible Person in Charge of Work _____ Tel. (___) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 30		
2. Electrical			
3. Plumbing			
4. Fire Protection	NA		
5. Elevator Devices			
6. Subtotal	$ 30		
7. Less 20% for State Plan Review	3		
8. Subtotal	$		
9. DCA Training Fee	8		
10. Subtotal	$		
11. Cert. of Occupancy	20		
12. Other 2 Plg	$15.00		
13. TOTAL	$ 68		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories 1	
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 _____ sq. ft. / no _____	
11. Max. Live Load _____	
12. Max. Occupancy Load _____	

II. PROPOSED WORK

Est. Cost

1. ☐ Minor work (single trade)
2. ☐ Small Job ($5,000 and no prior approvals)
3. ☐ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☐ Fire Protection
7. ☐ Plumbing
8. ☐ Electrical
9. ☐ Elevator Devices
10. ☐ Asbestos Abatement
11. ☐ Demolition

TOTAL COSTS $ 600

Check

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
			6/7/95				
	6/1/95						

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:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10308337

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 Betty A Klein Date 5/26/95

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey 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 _____ Date _____

OFFICE DATE RECEIVED: _____

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

IMPORTANT! SEE EXHIBIT B.

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.				

CONSTRUCTION PERMIT

Date Issued 6/7/95
Control #
Permit # 1384-95

IDENTIFICATION Block 383.21 Lot 8

Work Site Location 342 Delaware Dr
Owner in Fee B. Klein
Address 342 Delaware Dr
Bush
Tele. ( )

Contractor
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No. Exp. Date
Federal Emp. No.
or Social Security No.

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

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 $ 600

CONSTRUCTION OFFICIAL

U.C.C. Form F-170C

PAYMENTS (Office Use Only)		
Building	30	
Plumbing	**0005**	
Electrical	1384	
Fire Protection	BLOCK	0.00
Other P/L 3	383-21	
Other /	LOT	0.00
DCA Training Fee	8 #	
Cert. of Occ.	BUILDING	30.00
Other FPD	PLAN RVW	3.00
Total	C/O	20.00
Check No. #2	ZONE/LOT	15.00
Cash	TOTAL	68.00
Collected By:		

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 6-7-95
Control #
Permit # 1384-95

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

Block 382.21 Lot 8
Work Site Location 342 Delaware Dr

Owner in Fee Betty A KLEIN
Address 342 Delaware Dr. BRICK NJ 08723

Tele [redacted]
Contractor SAME
Address

Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

Betty A KLEIN
BRICK NJ
477-5241

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence Height (6' or over)
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement
[ ] Other
[ ] Other
[ ] Demolition

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.	6/7/95	
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

SHINE

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. Alteration $
3. Total (1+2) $

(Office Use Only)

FEE	
$	

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: DCA TRAINING FEE $
TOTAL FEE $

5/21/95

U.C.C. Form F-1108 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: June 1, 1995 — 1995 Z 0803

Block 383.21 **Lot** 8 **Zone** R-7.5

Property Address: 342 Delaware Drive

Owner: Betty Klein **(Phone):** [redacted]

Applicant: Same **(Phone):** Same

Use: Single-family dwelling.

Proposed Construction (if any): Deck.

Conditions:

Please note that Building Permits, as well as Zoning Permits, must be obtained prior to any construction.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which 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.

Sean Kinnevy

Sean Kinnevy **Land Use Officer**

BOCA
PLAN REVIEW RECORD

Plan Review # _____

Date _____

Valuation = **BASIC/NATIONAL MECHANICAL CODE**

Fee _____

JURISDICTION _____
(City, County, Township, etc.)

BUILDING LOCATION _____
(Street address)

BUILDING DESCRIPTION 342 Delaware D1

REVIEWED BY _____

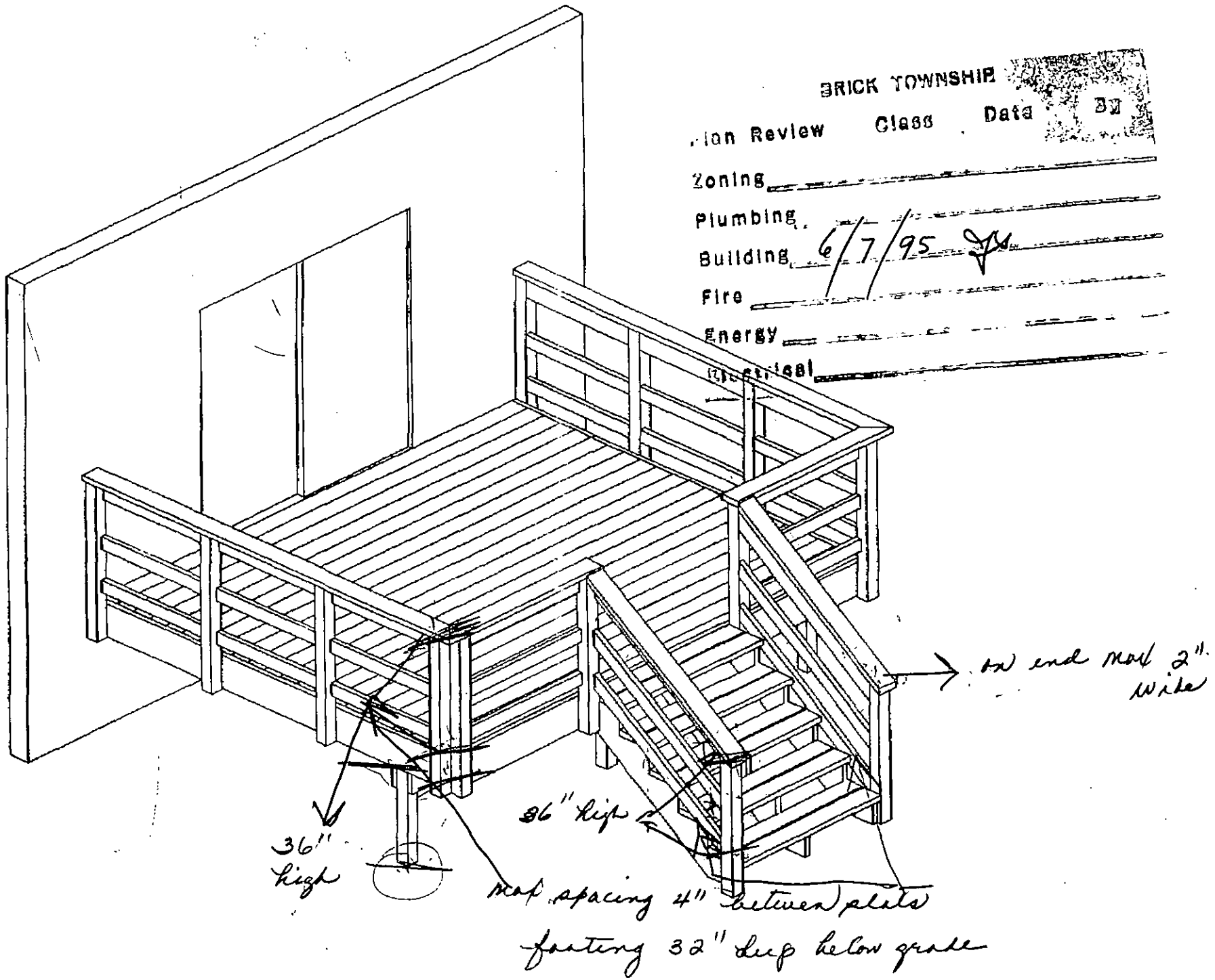
**Numerals indicated in parentheses are [redacted] ssic/National Mechanical Code.*

CORRECTION LIST

No.	DESCRIPTION	Code Section
(1)	Deck Railing does not meet code? Balusters etc? Need height of Railing?	
(2)	Need step details?	
(3)	Need details not to Code also need height?	
	Called 6/6/95 DK	

Correction list continued on Page 2.

BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.
4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60477


BRICK TOWNSHIP
Plan Review Class Data BY
Zoning
Plumbing
Building 6/7/95
Fire
Energy
Electrical
36" high
36" high
mop end rail 2" wide
mop spacing 4" between pickets
footing 32" deep below grade

ILL OF MATERIALS --- LUMBER

USTOMER: BETTY KLEIN
ATE: 05/13/95 REF: BBK11105
ALESMAN #

OMPONENT	SKU	QUANTITY	DESCRIPTION	WOOD TYPE
ECKING	5461206	22 EA	5/4X6 12'	PT PINE
AIL CAP	2061006	1 EA	2X6 10'	PT PINE
AIL CAP	2061206	2 EA	2X6 12'	PT PINE
ORIZONTAL RAILS	2041606	5 EA	2X4 16'	PT PINE
ORIZONTAL RAILS	1060806	5 EA	1X6 8'	PT PINE
AIL POST	4041606	3 EA	4X4 16'	PT PINE
TAIR POST	4040806	1 EA	4X4 8'	PT PINE
TAIR STRINGER	2121206	2 EA	2X12 12'	PT PINE
TAIR TREAD	5460806	5 EA	5/4X6 8'	PT PINE
EAMS	2081206	2 EA	2X8 12'	PT PINE
OISTS	2081006	8 EA	2X8 10'	PT PINE
ASCIA	2081006	2 EA	2X8 10'	PT PINE
ASCIA	2081206	1 EA	2X8 12'	PT PINE
EDGER	2081006	2 EA	2X8 10'	PT PINE
EDGER	2081206	2 EA	2X8 12'	PT PINE
TAIR HANDRAIL/CAP	2061206	1 EA	2X6 12'	PT PINE
ORZ. STAIR RAILS	2041606	2 EA	2X4 16'	PT PINE
ORZ. STAIR RAILS	1060806	2 EA	1X6 8'	PT PINE
ROUND POSTS	4041206	2 EA	4X4 12'	PT PINE

BRICK TOWNSHIP

Plan Review Class Data Fee

Zoning

Plumbing

Building 6/7/95

Fire

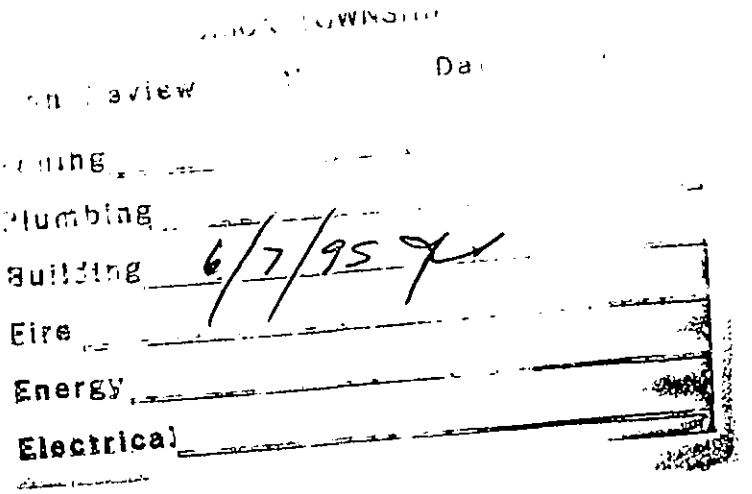
Energy

Electrical

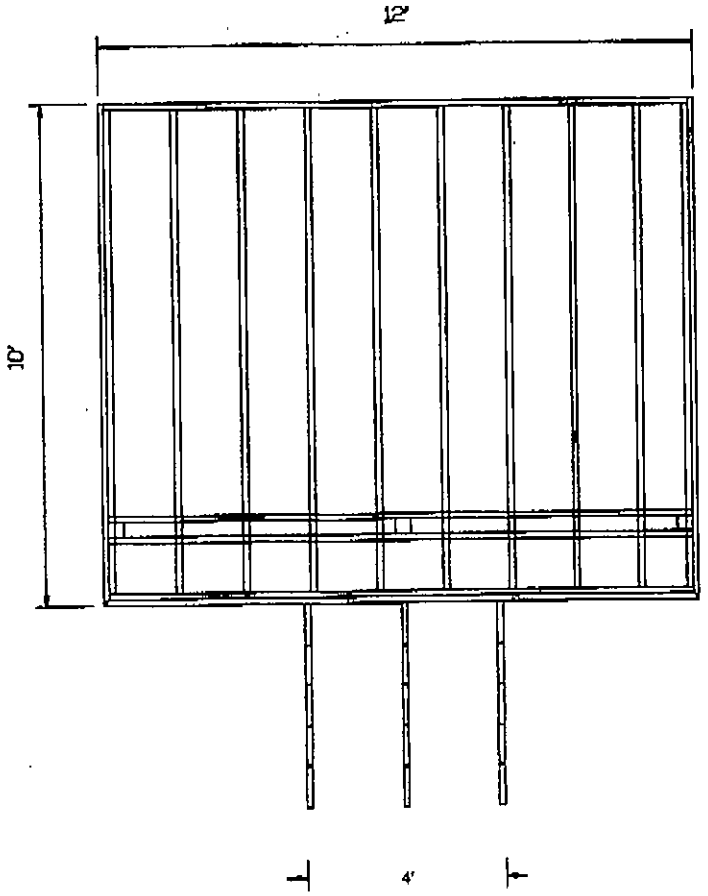
LL OF MATERIALS --- OTHER MATERIALS

STOMER: BETTY KLEIN
TE: 05/13/95 REF: BBK11105
LESMAN #

MPONENT	SKU	QUANTITY	DESCRIPTION
IST HANGER,8IN	55287	16 EA	8" GALV. HANGER
D NAILS	92135	7 LBS	16D GALV. NAILS
NAILS	92127	5 LBS	8D GALV. NAILS
CK STAIN	35051	1 GAL	DECK STAIN
G SCREW	834768	6 EA	1/2"X7" LAG SCREW
SHER	834816	40 EA	1/2" WASHER
ILING BOLT,6IN	834808	28 EA	1/2"X6" BOLT
T	834712	34 EA	1/2" NUT
AM BOLT, 8IN	22701	6 EA	BEAM BOLT, 8IN
NCRETE,60LB	20511	3 BAGS	CONCRETE, 60 LB BAG


Da
Plumbing
Building 6/7/95
Fire
Energy
Electrical

PLAN VIEW
CUSTOMER -- BETTY KLEIN
DATE 05/13/95 REF BBK11105



Load and support :
Your deck will support a 114 PSF live load. Posts have 36" below-ground post support.

Deck and post height :
You selected a height of 36" from the top of decking to level ground. Therefore, the top of the deck support posts will be 28.75" above level ground. Your salesperson can provide information for uneven or sloped ground.

Joists :
Set joists on top of beams, 16" center to center.

Be sure to follow the deck construction detail available from your store salesperson.

Note : The design requires knee braces, beam splices and bridging between joists. Your materials list includes the necessary items. The suggested design is not a finished building plan. You are responsible for all measurements being correct, for verifying that the design (and any substitutions or modifications that you make) meets all local building codes and requirements. To verify that the suggested design and any substitutions or modifications, is consistent with conditions at the construction site, review the design with your architect. Also consult your architect for proper construction and use of materials in the structure.

BRICK TOWNSHIP

Plan Review Class Date By

Zoning

Plumbing

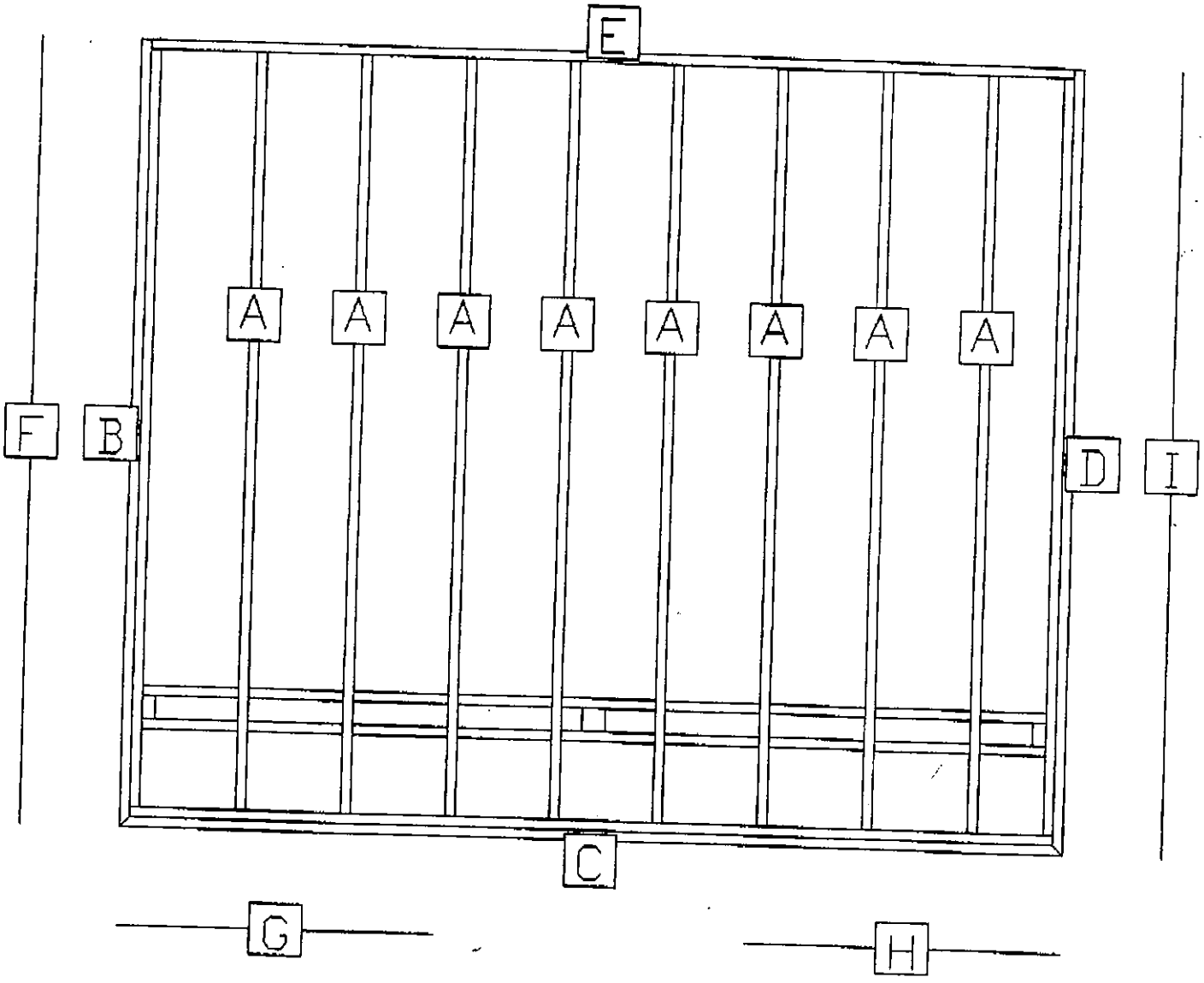
Building 6-7-95 JD

Fire

Energy

Electrical

CUT LIST
CUSTOMER -- BETTY KLEIN
DATE 05/13/95 REF BBK11105



LABEL	LENGTH	BEVELS
A joist (8)	9'7 1/2"	
B fascia	10'	F0 S45
B ledger	9'7 1/2"	
C fascia	12'	F45 S45
C ledger	11'9"	
D fascia	10'	F45 S0
D ledger	9'7 1/2"	
E ledger	11'9"	

LABEL	LENGTH	BEVELS
F cap	10'4 1/2"	F0 S45
F section	3'1 13/16"	
G cap	4'5 1/2"	F45 S0
G section	3'7 1/2"	
H cap	4'5 1/2"	F0 S45
H section	3'7 1/2"	
I cap	10'4 1/2"	F45 S0
I section	3'1 13/16"	

BRICK TOWNSHIP

Plan Review Class Date By

Zoning

Plumbing

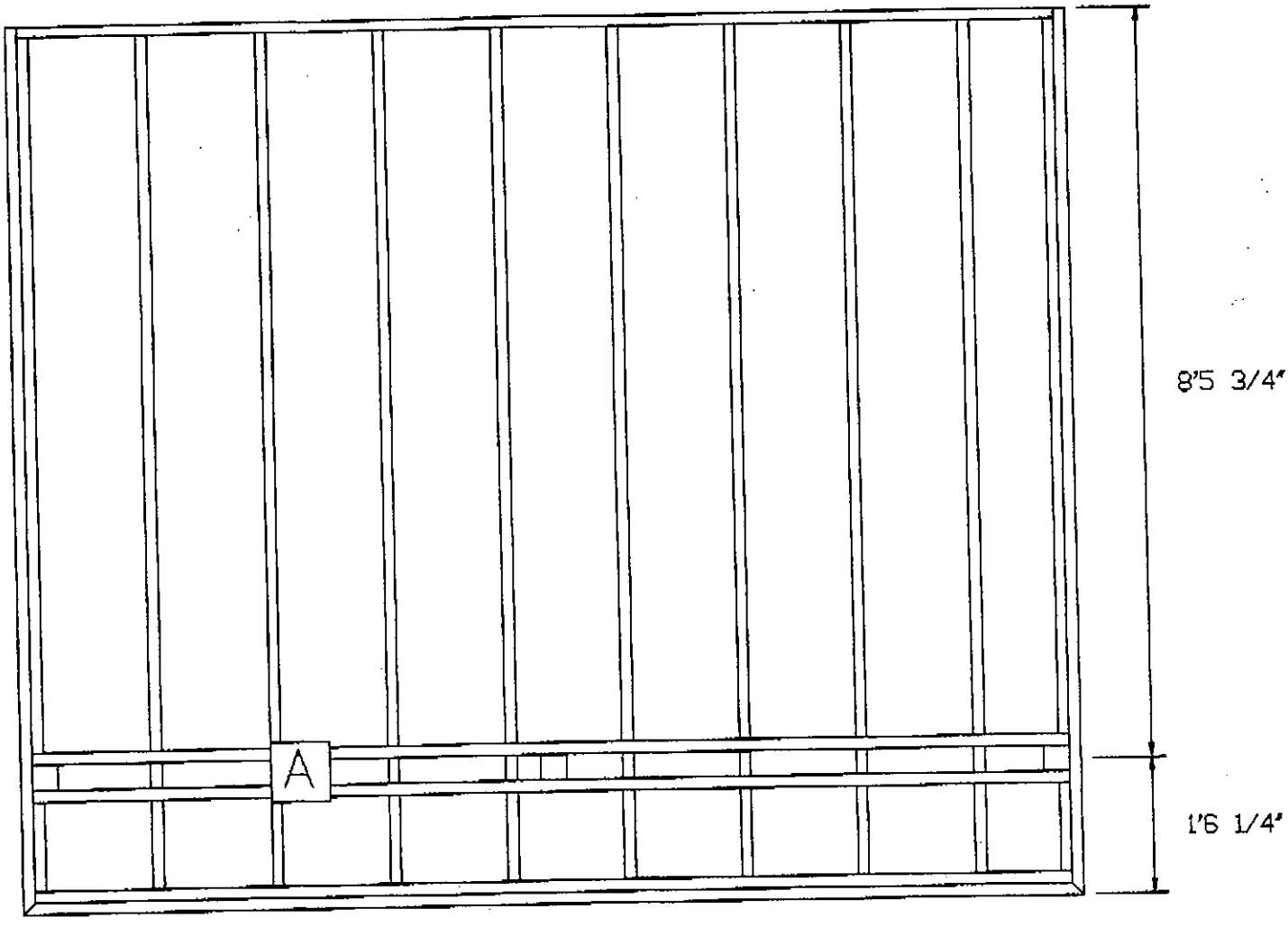
Building 6-7-95 JD

Fire

Energy

Electrical

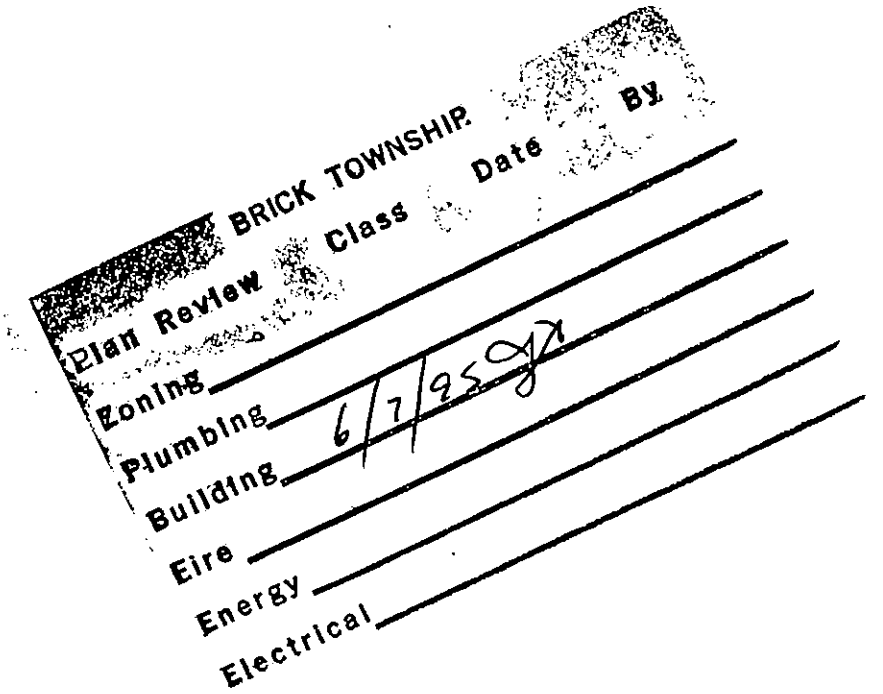
BEAM LAYOUT
CUSTOMER -- BETTY KLEIN
DATE 05/13/95 REF BBK11105

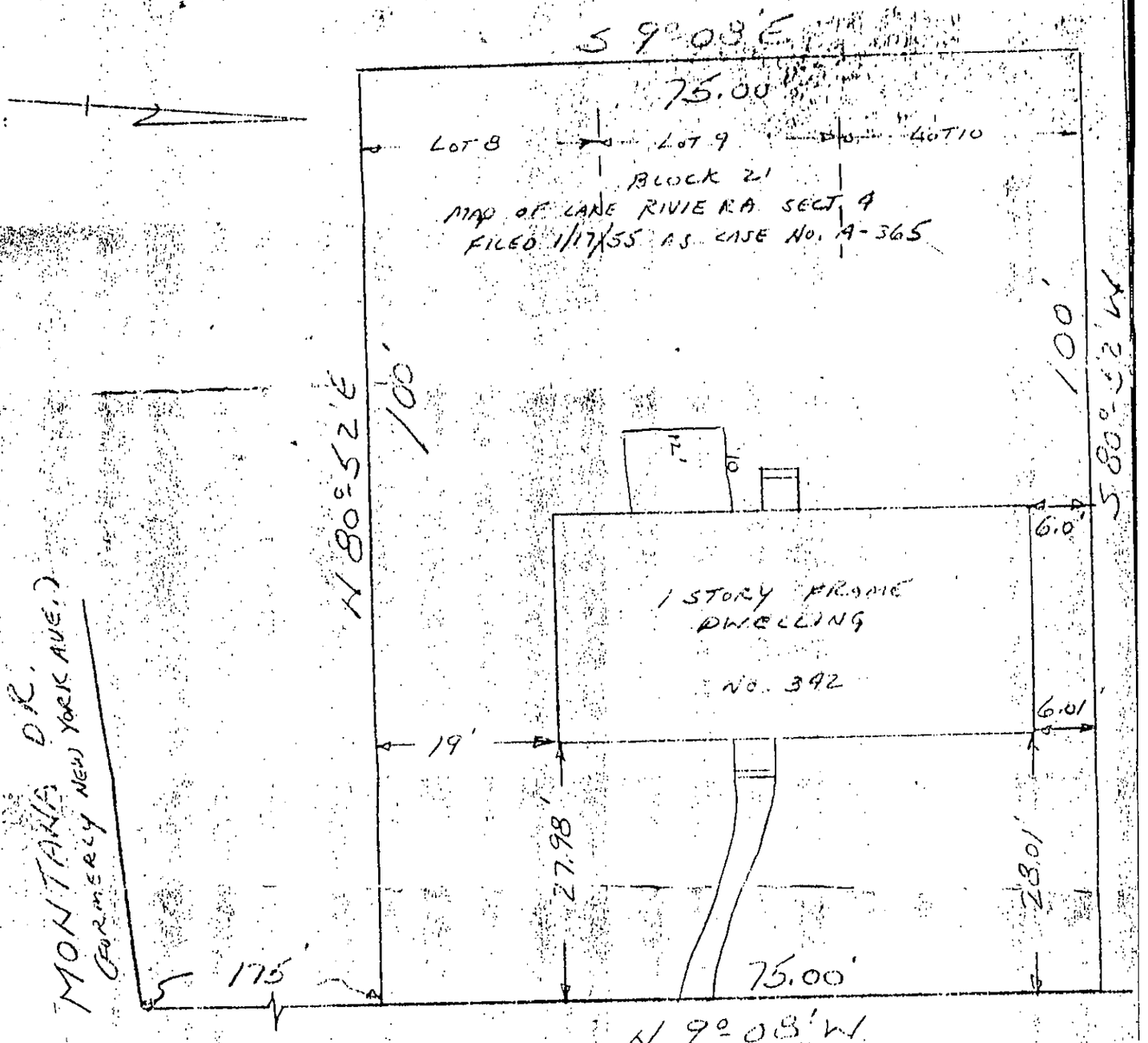


BEAM LABEL	BEAM LENGTH	POST COUNT	POST SPACING
A	11'9"	3	5'8 3/4"

Post spacing is measured center-to-center.

Depth of post-in-concrete footers --- 36 inches.


BRICK TOWNSHIP
Plan Review
Class
Date
By
Zoning
Plumbing
Building
6/7/95
Fire
Energy
Electrical



PLAN OF SURVEY

No. 342 DELAWARE AVE.
BRICK TWP.
OCEAN CO., N.J.
SCALE 1" = 15' NOV. 11, 1960

"To: any insuror of Title relying hereon and any other party in interest: "In consideration of the fee paid for making this survey, I hereby certify to the accuracy (except such easements, if any, that only be located below the surface of the land or on the surface of the lands and not visible) as an inducement for any insuror of title to insure the title to the lands and premises shown thereon. This responsibility limited to the current matter as of the date of this survey."

[Surveyor] L.S. 10986

CHRIS NIELSEN
LAND SURVEYOR No. 10986
18 E. WALNUT AVE.
MERCHANTVILLE, N.J.