B-28

L-38

126 Locust Ave.

5/20/19
Left message
failed on 4-19-19

Permit # 20182065

B ✓

E ✓ +A ✓

P ✓

ENG ✓

I/G Pool
+ Pool Heater

CLS

4978
00295_064073
20182065 SF
00002TB4F

BLOCK 28 LOT 38 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. _____

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 126 locust Ave
2. Name of Owner in Fee: Larissa Dellas
   Tel. [redacted] e-mail [redacted]
   Address 126 locust Ave (street) Howell (municipality) 07731 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: LGD pools Tel. (732) 684-1075
   Address 211 Clear Water Dr e-mail _____
   Forked River NJ 08731
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02144500
   Federal Emp. ID No. [redacted] FAX: (609) 994-3887
5. Architect or Engineer R.C. Burdick Contact (Tom) Bob
   Address 1023 Ocean Rd Point Pleasant e-mail _____
   Tel. (732) 892-5050 FAX: (_____) _____
6. Responsible Person in Charge once Work has Begun George Dellas
   Tel. [redacted] FAX: [redacted]

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 300		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee			
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. Max. Live Load _____
7. Max. Occupancy Load _____
8. If Industrialized Building: State Approved ____ HUD ____
9. Total Land Area Disturbed _____ sq. ft.
10. Flood Hazard Zone _____
11. Base Flood Elevation _____ ft.
12. Wetlands yes ____ no ____

N/A

7/19/18

IIa. PROPOSED WORK

☐ Minor Work ☐ New Building ☐ Addition ☐ Demolition
☐ Repair ☐ Alteration ☐ Renovation ☐ Reconstruction
☐ Asbestos Abat. -Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit

IIb. SUBCODES (Check all that apply)

	Est. Cost	FOR OFFICE USE ONLY (Optional) Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☒ Building					8/1/18	CC			
☐ Electrical					8/1/18				
☐ Plumbing					8-1-18	D			
☐ Fire Protection				Not Required		RR			
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use: R-5/U
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units:

	Total Units	Income-restricted
Gained, Sale		
Gained, Rental		
Lost, Sale		
Lost, Rental		

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____
D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

For reorder call 609-390-1400 • Allegra Marketing Print Mail

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

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

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

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

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

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

Signature _____ Date 7/3/18

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

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

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

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 LGD Pools

Address 211 Clearwater Dr. Forked River NJ

Telephone 732-684 1075

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

HOWELL TOWNSHIP
PLAN REVIEW CHECKLIST

Name: Dellas **Block:** 28 **Lot:** 38

Address: 126 Locust Ave. **Control #** 43502

Type of Work: IG Pool, Pool Heater

	Date / Reviewed by	APPROVED / DENIED	COMMENTS
Prior Approval **LAND USE** ✓	7/18/18 MH	Approved	
Prior Approval **ENGINEERING** ✓	7/24/18 RS 7/31/18 RS OK	Denied → sent email to Engineer to correct minor issue → Approved	
FIRE ✓	8/1/18	Not Required OK	
BUILDING ✓	8-1-18 CG	OK	
ELECTRICAL ✓	8/1/18		
PLUMBING ✓	8-7-18 AB	OK	
MECHANICAL ✓	✓	✓	

Initial Date Submitted 7/17/18

JM

NOTIFIED

[redacted]

25% Plan Review Worksheet

(ALL COSTS SHOULD BE ROUNDED DOWN TO NEAREST DOLLAR)

Alterations cost: _____ x .0075 = _____

(Roofing, Siding, Solar, basements, Radon, renovations, HVAC)

New Homes *(Residential)* Bldg: *(Volume)* cubic feet: _____ x .0095 = _____

Fire: $60.00 Electric: $60.00 Plumbing: $60.00

Additions *(Residential)* Bldg: *(Volume)* cubic feet: _____ x .0095 = _____

Fire: $15.00 Electric: $15.00 Plumbing: $15.00

New Buildings *(All other Use Groups)* Bldg: *(Volume)* cubic feet: _____ x .010 = _____

Fire: $60.00 Electric: $60.00 Plumbing: $60.00

Additions *(All other Use Groups)* Bldg: *(Volume)* cubic feet: _____ x .010 = _____

Fire: $15.00 Electric: $15.00 Plumbing: $15.00

Pole Barns Bldg: *(Volume)* cubic feet: _____ x .006 = _____

(If commercial farm property)----------*(Volume)* cubic feet: _____ x .002 = _____

In-Ground Pool

1. Without new pool barrier: **$62.00**
2. With new pool barrier: **$75.00**

Above Ground Pool

1. With ladder enclosure: **$18.00**
2. With new pool barrier: **$31.00**
3. With existing fence/barrier: **$18.00**

Woodstoves, Fireplaces, Pellet stoves **$18.00**

Demolition *(Residential or [redacted])* ($100.00 flat fee) 25% = **$25.00**

Dem[redacted] ($200.00 flat fee) 25% = **$50.00**

Decks _____ square feet x .10 = _____

Signs _____ square feet x 1 = _____

(The above figures are only 25% of the total fee that will be charged)

4567 ROUTE 9 NORTH (2nd FLOOR)
PO BOX 580
HOWELL, NJ 07731
(732) 938-4500 EXT.2415

Receipt

Payment Date	7/17/2018
Transaction #	PMT-18-10992
Receipt #	R-18-2461

Issued To LGD POOLS

Description
C-43502
DELLAS
126 LOCUST AVE
B 28 - L 38
PLAN REVIEW

Date Printed	7/17/2018	Cash	$0.00
Check Number	382	Check	$100.00
		Charge	$0.00
		Total Paid	$100.00

Howell Township
4567 ROUTE 9 NORTH (2nd FLOOR)
HOWELL, NJ 07731

Date Issued 10/2/2024
Control Number C-43502
Permit Number 20182065
Permit Issue Date 8/8/2018
Certificate Number 20182065

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 126 LOCUST AVENUE Howell Township, NJ 07731 Block: 28 Lot: 38 Qual:

Owner in Fee: DELLAS, LAURISSA

Owner Address: 126 LOCUST AVE HOWELL NJ 07731

Telephone: [redacted]

Contractor LGD CONTRACTING LLC

Address 126 LOCUST AVENUE HOWELL NJ 07731

Telephone: (732) 684-1075 Fax: Federal Emp. Number:

License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification: 5B

Maximum Live Load: Maximum Occupancy Load:

Description of Work/Use: IN-GROUND SWIMMING POOL, POOL HEATER - TYPE O NON-DIVING

Certificate Comments: INCLUDES +A

☐ **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:
Collected By:

Date Printed: 10/2/2024

U.C.C. F260 (rev. 08/05)

SOIL REMOVAL/FILLING FINAL INSPECTION
ENGINEERING DEPARTMENT
TOWNSHIP OF HOWELL

Date: 4/23/2020 2:30 **Permit:** Pool-18-025

Address: 126 Locust Ave.

Applicant: Dellas

Contractor: LGD Pools

BLOCK: 28 **LOT:** 38

	ACCEPTABLE	UNACCEPTABLE
GRADING	✓	
STABILIZATION	✓	
DRAINAGE	X 4/18/19	
CURB	N/A	
SIDEWALK	N/A	
POOL LOCATION	X 4/18/19	
ADDITIONAL CONCRETE/PAVERS	X 4/18/19	
RETAINING WALL	N/A	

RECOMMENDATION (S) AND/OR REQUIRED DOCUMENTATION:

✓ MEETS ENGINEERING REQUIREMENTS - RECOMMEND CONSIDERATION FOR ISSUANCE OF CERTIFICATE OF APPROVAL.

_____ DOES NOT MEET ENGINEERING REQUIREMENTS - RECOMMEND CERTIFICATE OF APPROVAL NOT BE CONSIDERED UNTIL SITE CONFORMS.

_____ AS-BUILT PLAN REQUIRED

_____ *** LAND USE OFFICER TO INVESTIGATE THE CONDITIONS LISTED BELOW. THE ENGINEERING DEPARTMENT RESERVES THE RIGHT TO REOPEN THIS PERMIT FOR ANY CORRECTIVE MEASURE TO RESOLVE THIS CONDITION(S).

_____ SENT TO LAND USE FOR FUTURE HANDLING ON _____.

COMMENTS:
Construction Debris was removed
Stone was placed around the pool to provide proper grading + stabilization.

[signature] 4/23/2020
INSPECTOR DATE
Justin Meyer

[signature] 4/23/2020
APPROVED DATE

_____ _____
DISAPPROVED **DATE**

28-38

PLUMBING SUBCODE
TECHNICAL SECTION

126

Date Received
Control #

Date Issued
Permit #

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 locust Ave Howell NJ 07731

Owner in Fee: Larissa Dellas

Tel. [redacted] e-mail

Address 126 locust Ave Howell NJ 07731
street municipality zip code

Contractor: LGD pools Tel. (732) 684-1075

Address 21 Clearwater Dr e-mail
Forked River NJ 08731

Contractor License No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02144500

Federal Emp. ID No. [redacted] FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed Pool heater

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 500

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 and perform the work listed on this applica

Applicant sign/Contractor sign and seal here:

Print name here: George

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
400,000 BTU Poo gas heater, 2 Bottom Drains

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping (1)	15
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	~~Greasetrap~~ Dual Drains	65
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other Pool Heater	65
	Administrative Surcharge $	145
	Minimum Fee $	
	State Permit Surcharge Fee $	1
	TOTAL FEE $	146

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[✓] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] ~~Mech~~

SUBCODE APPROVAL for PERMIT
Date: 8-24-18
Approved by: Allen Chastel

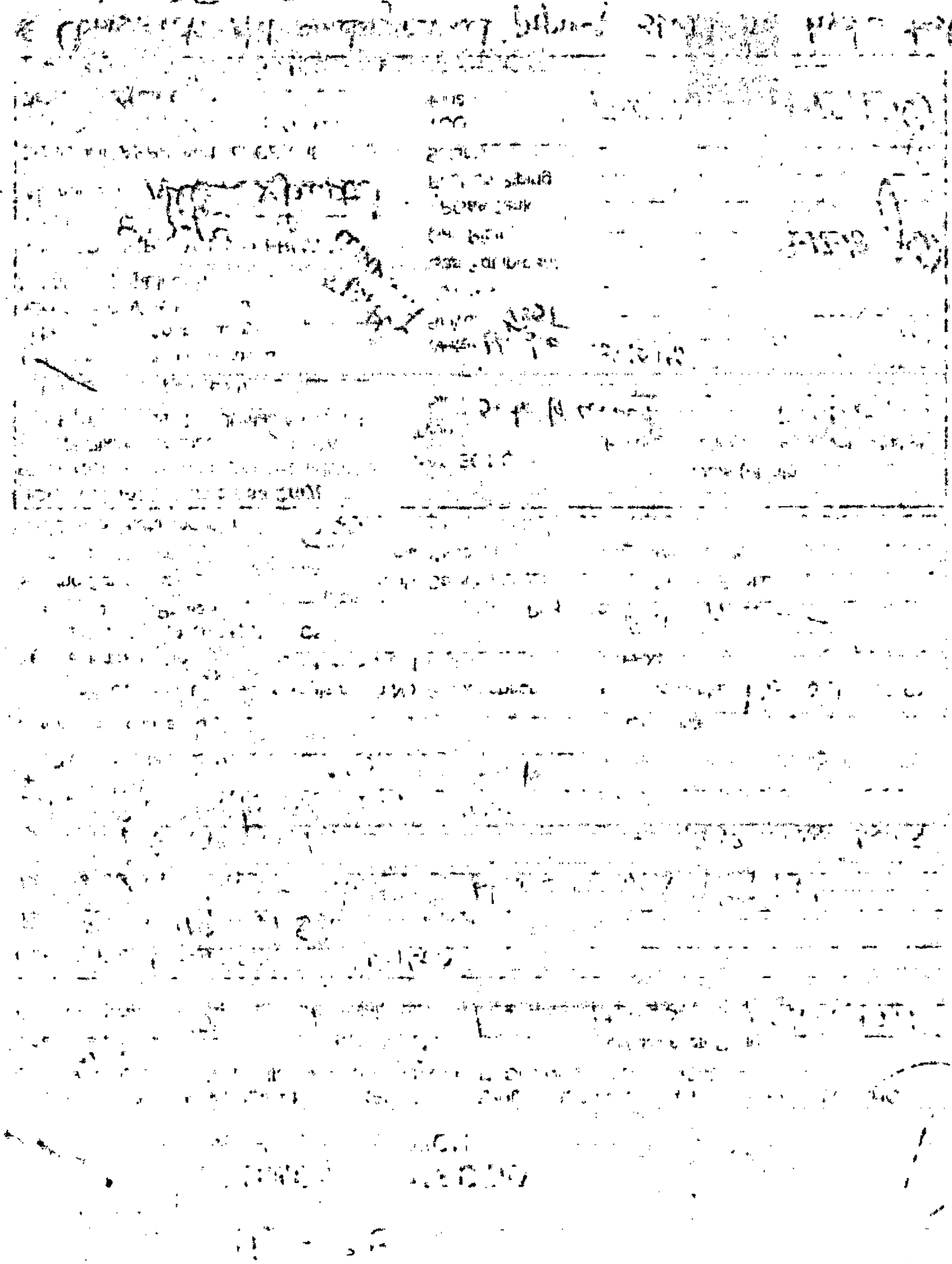
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 4-18-19
Approved by: Allen Chastel

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab Side Drains			8-24-18	JW
Rough				
~~Water~~ Hydro test	8-16-18		8-24-18	JW
Sewer				
Fixtures				
Gas Equipment				
Gas Piping			9-17-18	JW
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final	4-16-19		4-17-19	JW

* Comment

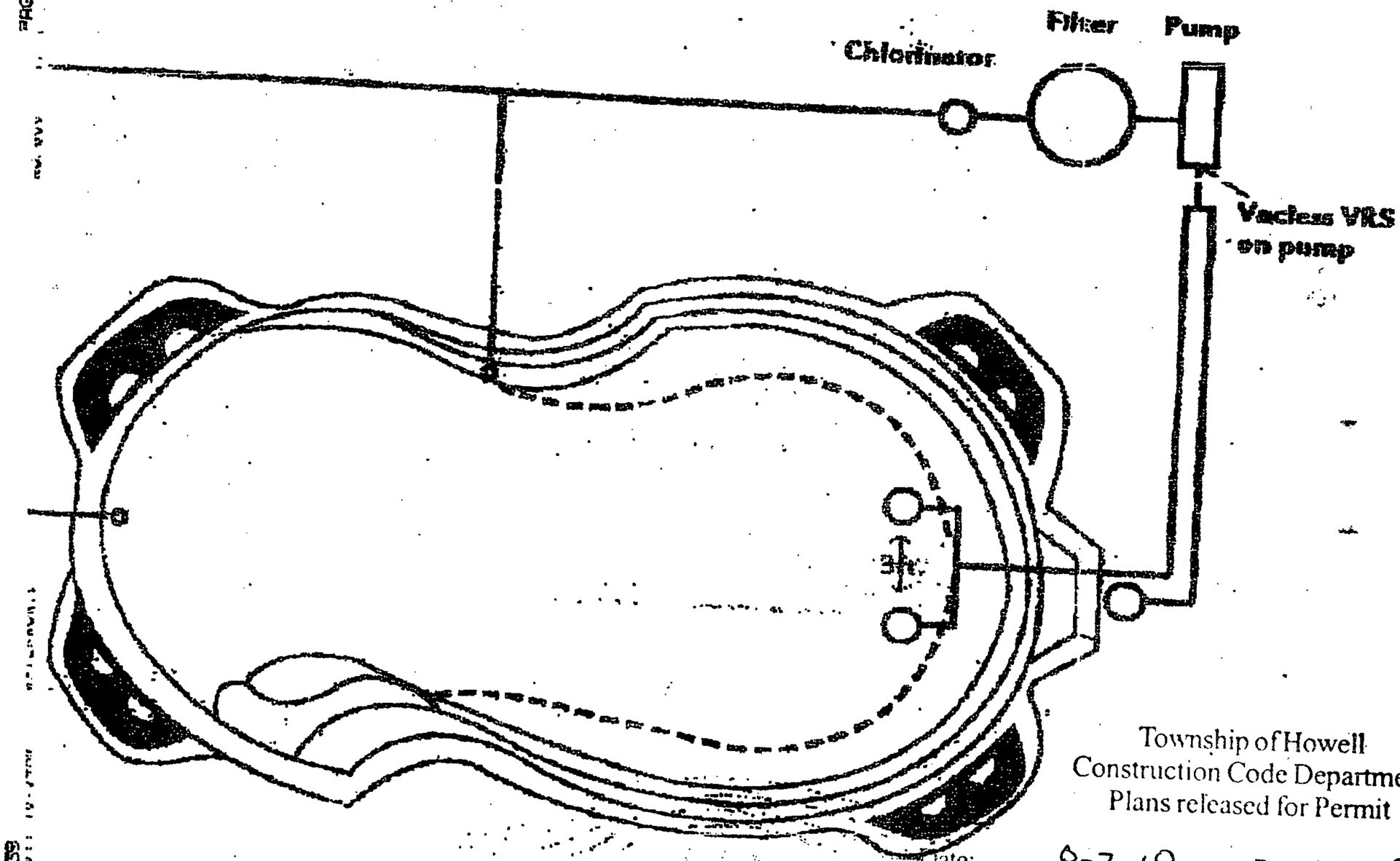
* Comment: All underground piping shall be hydro tested to 25 psi

N.R



FILE COPY

VGBA Compliance - Main Drain Diagram



Township of Howell
Construction Code Department
Plans released for Permit

Date: 8-7-18 Permit # 43502
Block: 28 Lot 38
Sub-code Official Allen Stanstel

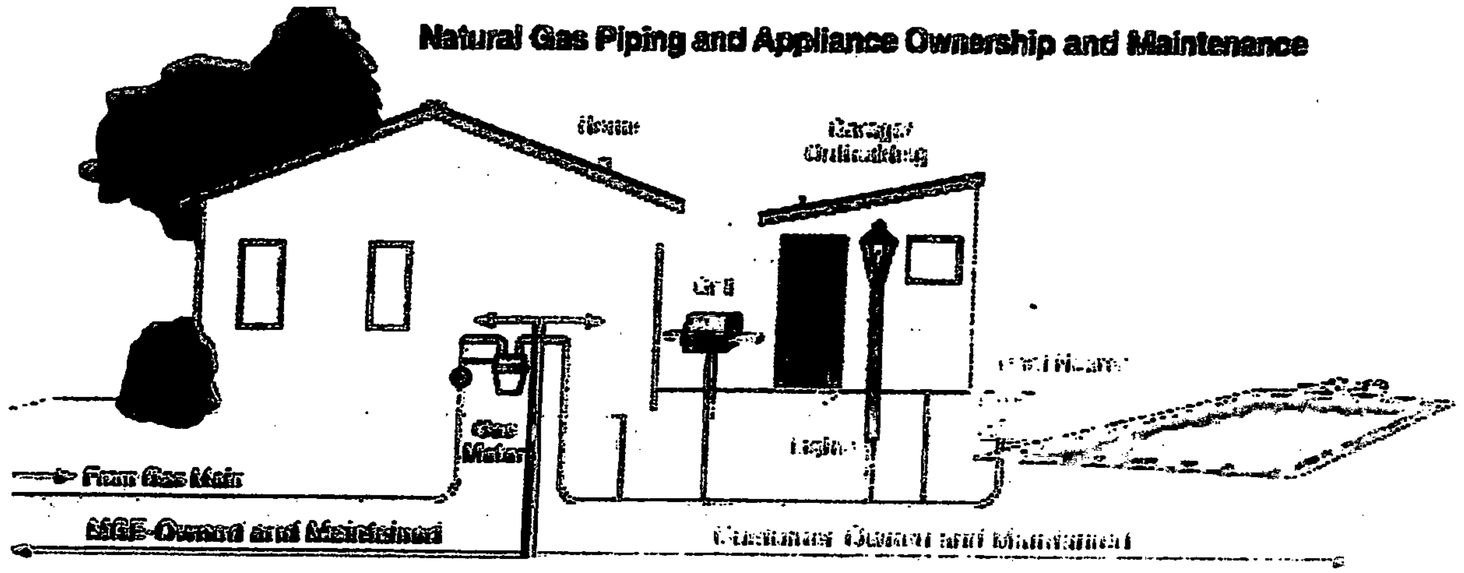
A COPY OF THESE PLANS
MUST BE KEPT ON CONSTRUCTION SITE UNT
FINAL APPROVAL
(732) 938-4500

REVISED: _____

07-12-2021 22:39

FILE COPY

Natural Gas Piping and Appliance Ownership and Maintenance

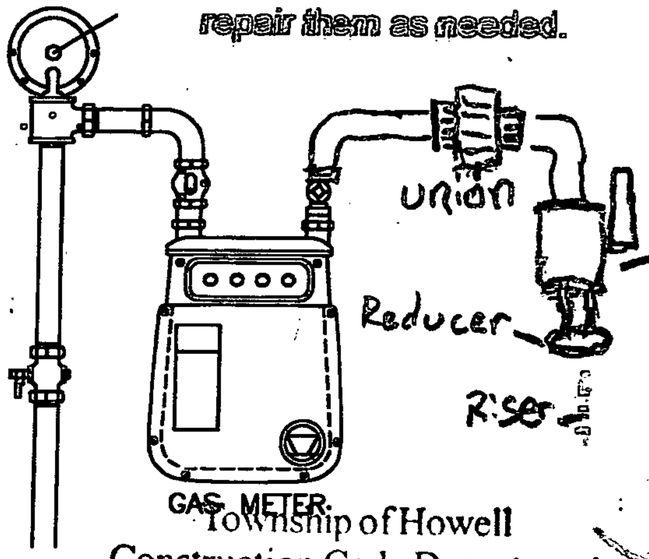


FILE COPY

Buried metal piping will corrode

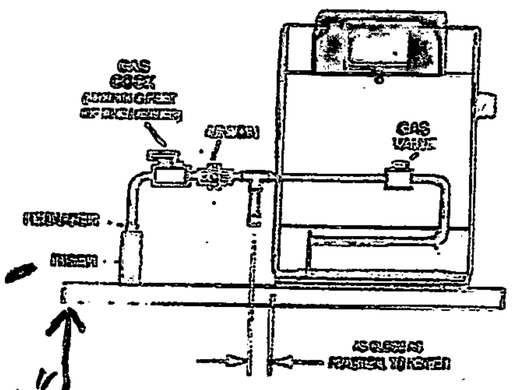
Natural gas pipes that are buried in the ground can leak and metal pipes deteriorate with age, causing a potentially dangerous situation. For safety's sake, have your gas pipes inspected periodically, and repair them as needed.

GAS PRESSURE REGULATOR



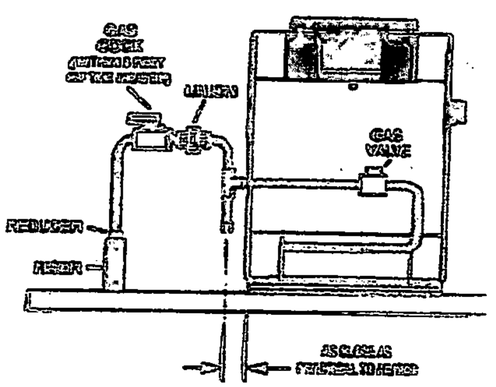
Use two FLEX-Risers to eliminate underground joints.

INCORRECT



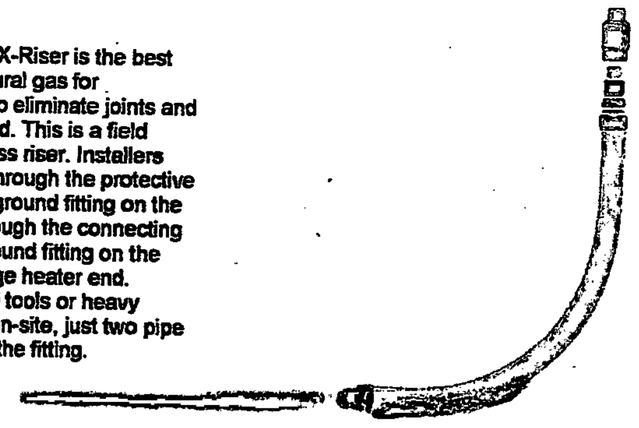
CORRECT

PROVIDE CHANGE OF DIRECTION IN GAS PIPE



THE NORMAC FLEX-Riser is Perfect for Connecting Natural Gas to Pool-Spa-Patio Areas .

The NORMAC FLEX-Riser is the best way to connect natural gas for residential service to eliminate joints and threads underground. This is a field assembled anodeless riser. Installers insert the PE Pipe through the protective casing to its above ground fitting on the meter end, then through the connecting riser to its above ground fitting on the pool-spa-patio-garage heater end. Requiring no special tools or heavy equipment to bring on-site, just two pipe wrenches to tighten the fitting.



Township of Howell
Construction Code Department
Plans released for Permit

Date: 8-2-18 Permit # 43502 150 FT
Block: 28 Lot 38 1/2 poly
Sub-code Official [illegible] per George

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

REVISED: _____

REVISED: _____

(732) 899-4500
BRANCHBURG, NJ
MUST BE KEPT ON CONSTRUCTION SITE UNTIL
A COPY OF THESE PLANS
Sub-code Official _____
Date: _____ Permit # _____

Plans reviewed for Permit
Construction Code Department
Township of Howell

LITE COPY

ELECTRICAL SUBCODE
TECHNICAL SECTION

UPDATE SUBP

Date Received
Control #
Date Issued 8/8/18
Permit # 20182065

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

Block 28 Lot 30 Qualification Code

Work Site Location 126 locust Ave Howell NJ 07731

Owner in Fee: Lavissa Dellas

Tel. [redacted] e-mail

Address 126 locust Ave Howell NJ 07731
street municipality zip code

Contractor: SELF Tel. ( )

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed in ground pool

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 4,000

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Lavissa Dellas

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Wire and Bond Pool

QTY.	SIZE	ITEMS	FEE (Office Use Only)
2		Lighting Fixtures	
2		Receptacles	
2		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
1		Pool Permit/with UW Lights	20
1		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	2.0	HP Motors 1/+ HP	25
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	15 amp	Self yard	5
1		POOL Heater	25
		Administrative Surcharge	$
		Minimum Fee	$ 145
		State Permit Surcharge Fee	$ 2
		TOTAL FEE	$ 147

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 8-7-18
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 4-17-19
Approved by:

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type:				
~~Rough~~ SWP			9-17-18	
Barrier-Free				
Trench & Bond			9-17-18	
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			4-17-19	
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 11/09)

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 4-8-19
Control # 45288
Date Issued
Permit # 20182065TA

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 locust Ave

Owner in Fee: laurissa Dellas

Tel. [redacted] e-mail [redacted]

Address 126 locust Ave (street) (municipality) 07731 (zip code)

Contractor: Home Owner Tel. [redacted]

Address 126 locust Ave e-mail [redacted]

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 200

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: laurissa Dellas

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Pool sub Panel

QTY.	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		TOTAL NUMBERS
		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
		HP Motors 1/+ HP
		KW Transformer/Generator
		AMP Service
	30	AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

FEE (Office Use Only)

$

Administrative Surcharge $ 10
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

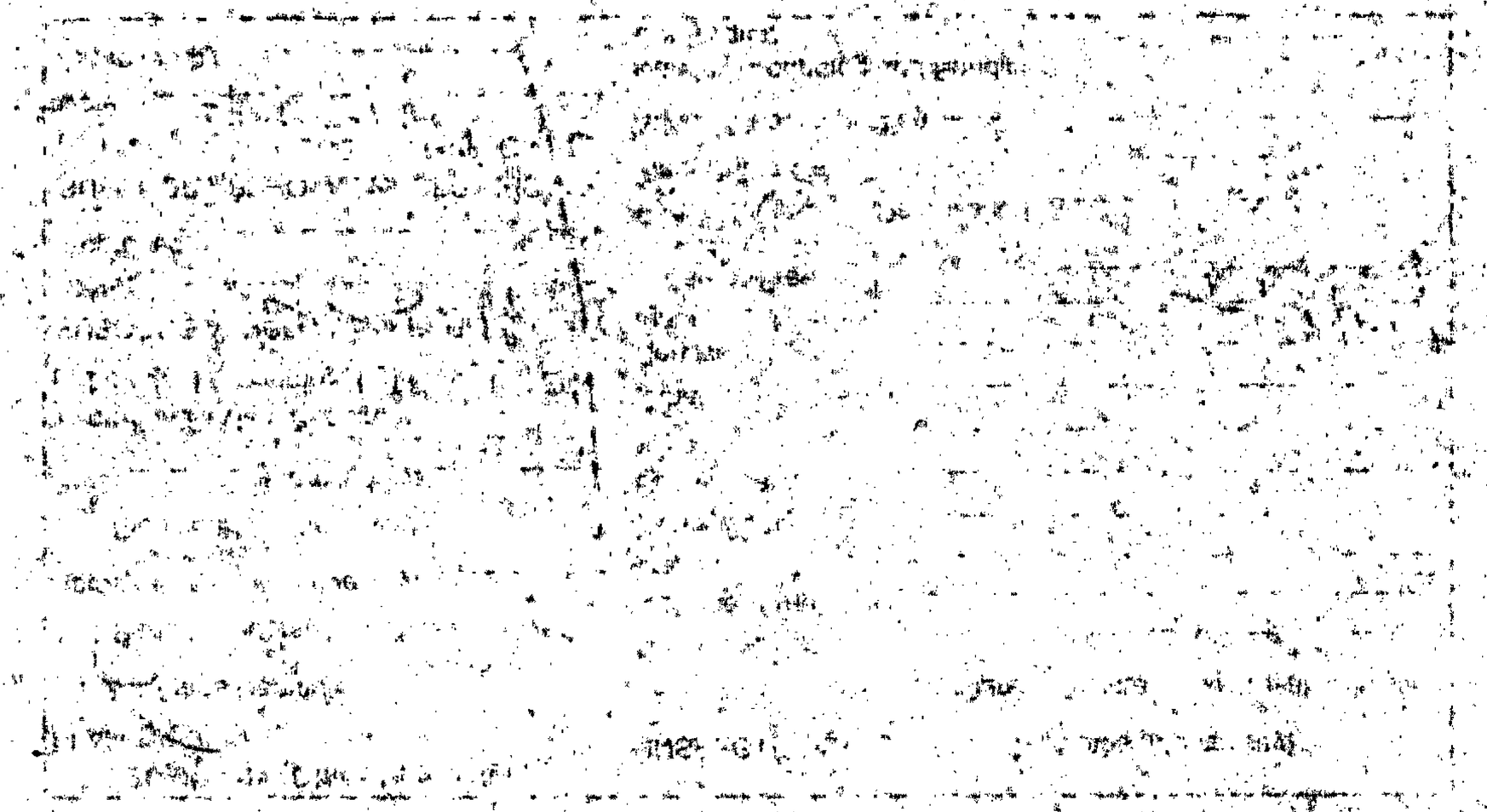
PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 4-8-19
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 4-17-19
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			4-17-19	
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 11/09)

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400



BUILDING SUBCODE
TECHNICAL SECTION

EMAILED 5-24-23 8-31-23

Date Received
Control # 43502
Date Issued 8/8/18
Permit # Z0182065

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 Locust Ave Howell NJ 07731

Owner in Fee: Larissa Dellas WILL RAY

Tel. [redacted] e-mail [redacted]

Address 126 Locust Ave Howell NJ 07731
(street) (municipality) (zip code)

Contractor: LGD Pools Tel. (732) 684-6075

Address 21 Clearwater Dr. Forked River NJ 08731 e-mail

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02144500

Federal Emp. ID No. [redacted] FAX: (609) 994 3887

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	8/1/18	CG
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 8-1-18
Approved by: CG

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 9-30-24
Approved by: SJ

INSPECTIONS Type:	Failure	Failure	Approval	Initial
			Dates (Month/Day)	
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final	4/29/19	8-22-24	9-27-24	KC-H
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present R5 Proposed U

No. of Stories

Height of Structure ft.

Area — Largest Floor N/A sq. ft.

New Bldg. Area/All Floors sq. ft.

Volume of New Structure cu. ft.

Max. Live Load

Max. Occupancy Load

Constr. Class Present VB Proposed —

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 26,000

C. CERTIFICATION IN LIEU OF OATH

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

Sign here:

Print name here: George Dellas

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

inground swimming pool
13X33 fiberglass
Pool Heater
BARRIER MUST COMPLY W/ 2015 ISPSC
TYPE O NON-OWNER

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

FEE (Office Use Only)

$	
	50-
	250-
Administrative Surcharge $	
Minimum Fee $	
State Permit Surcharge Fee $	49-
TOTAL FEE $	

U.C.C. F110 (rev. 11/09)

For reorder call: (609) 390-1400
Allegra Marketing • Print • Mail

R.C. 8-22-24 GATES MUST SECURE LATCH
LATCH MUST BE 54" AFF

BUREAU OF INSPECTIONS
Township of Howell

Correction Notice

Permit #2018-2065 Location 126 Locust
I have, on this day, inspected this structure and these premises and have found the following violations of the State Regulations governing same: (Building)

- Gates must self close and self latch
- Latch must be min. 54" high to release
- No Diving Lebels?
- Need Field Copy of plans/paper work

You are hereby notified that no more work shal be done upon these premises until the above violations are corrected. When corrections have been made, call for reinspection, 732-938-4500 EXT 2300

DATE: 4/25/19 SCO SA

DO NOT REMOVE THIS TAG

To Reorder Call Allegra: 609-390-1400

TOWNSHIP OF HOWELL

DEPARTMENT OF COMMUNITY DEVELOPMENT & LAND USE

4567 Route 9 North, 2nd Floor
Post Office Box 580
Howell, NJ 07731-0580

Phone: (732) 938-4500 x2300
Fax: (732) 414-3243
Web: www.twp.howell.nj.us

Sent via Regular Mail and Email (LISSY1417@HOTMAIL.COM) **Project No: Pool-18-025**

April 29, 2019

Laurissa Dellas
126 Locust Ave
Howell, NJ 07731

Re: Failure of Engineering Inspection for In-Ground Swimming Pool
Block: 28 Lot: 38
Address: 126 Locust Ave, Howell Township

Dear Owner/Resident:

In order for the Township to issue a Certificate of Approval (CA) for an in-ground swimming pool, the Engineering Division is required to perform an inspection of your property to determine if the improvements associated with the installation of your pool (grading, lot stabilization, walkways etc.) are in compliance with the issued permit. Based on our recent inspection on **April 18, 2019**, we have determined that the improvements associated with your pool **do not** comply with the permit that was issued.

At this point, you and your contractor are currently in violation of the Township Ordinance and the approved permit. You are required to correct the following items:

- The area of disturbance involving the construction of the pool must be properly stabilized by use of seed with grass growth or, sod, stone, mulch, etc.
- The construction debris must be properly removed and disposed of.

This letter is to serve as notice that it is necessary for you to contact this office within 10 days from the date of this letter to inform us of your intentions.

Thank you for your anticipated cooperation concerning this matter and should you have any questions, please call 732-938-4500 ext. 2338.

Very truly yours,

TOWNSHIP OF HOWELL – DIVISION OF ENGINEERING

Timothy M. Trettel
Community Development Technician

TT:cs

cc: LGD Pools, 211 Clearwater Drive, Forked River, NJ 08731

M:\Common\Block - Lot Folders\BLK28 - L38\BLK28 - L38 IG POOL Failure Letter Stabilization-2019-04-29.docx

COPY

СОЬЛ

SOIL REMOVAL/FILLING FINAL INSPECTION
ENGINEERING DEPARTMENT
TOWNSHIP OF HOWELL

Date: 4/18/19 **Permit:** POOL-18-025

Address: 126 LOCUST AVE

Applicant: LAURISSA DELLAS

Contractor:

BLOCK: 28 **LOT:** 38

	ACCEPTABLE	UNACCEPTABLE
GRADING		X
STABILIZATION		X
DRAINAGE	X	
CURB	N/A	
SIDEWALK	N/A	
POOL LOCATION	X	
ADDITIONAL CONCRETE/PAVERS	X	
RETAINING WALL	N/A	

RECOMMENDATION (S) AND/OR REQUIRED DOCUMENTATION:

_____ MEETS ENGINEERING REQUIREMENTS - RECOMMEND CONSIDERATION FOR ISSUANCE OF CERTIFICATE OF APPROVAL.

X DOES NOT MEET ENGINEERING REQUIREMENTS - RECOMMEND CERTIFICATE OF APPROVAL NOT BE CONSIDERED UNTIL SITE CONFORMS.

_____ AS-BUILT PLAN REQUIRED

_____ *** LAND USE OFFICER TO INVESTIGATE THE CONDITIONS LISTED BELOW. THE ENGINEERING DEPARTMENT RESERVES THE RIGHT TO REOPEN THIS PERMIT FOR ANY CORRECTIVE MEASURE TO RESOLVE THIS CONDITION(S).

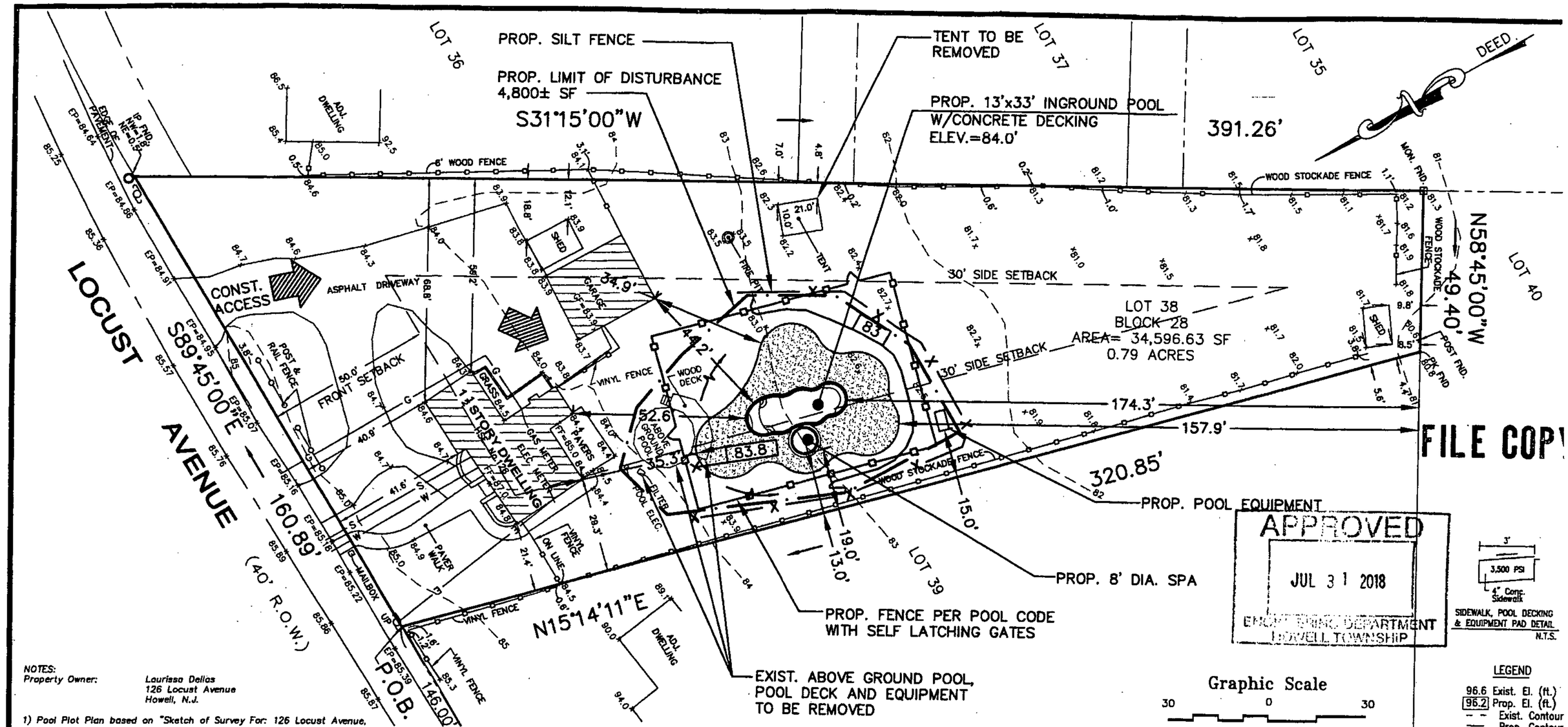
_____ SENT TO LAND USE FOR FUTURE HANDLING ON _____.

COMMENTS: - AREA OF DISTURBANCE NEEDS TO BE STABILIZED
- CONSTRUCTION DEBRIS NEEDS TO BE CLEANED UP

[signature] 4/18/19
INSPECTOR DATE
Tim Trettel

_____ _____
APPROVED DATE

_____ _____
DISAPPROVED DATE



APPROVED

JUL 31 2018

ENGINEERING DEPARTMENT
HOWELL TOWNSHIP

3'
3,500 PSI
4" Conc. Sidewalk

SIDEWALK, POOL DECKING & EQUIPMENT PAD DETAIL
N.T.S.

Graphic Scale
30 0 30

LEGEND
96.6 Exist. El. (ft.)
96.2 Prop. El. (ft.)
Exist. Contour
Prop. Contour
EQ. Equipment

NOTES:
Property Owner: Laurissa Dellas
126 Locust Avenue
Howell, N.J.

1) Pool Plot Plan based on "Sketch of Survey For: 126 Locust Avenue, Lot 38 in Block 28 Howell Township, Monmouth County, New Jersey", prepared by RC Burdick PE PP PC performed by Mr. Stan Hans Jr., NJPLS No. 29182 performed 1/25/2018.

2) Contractor to verify location of all utilities prior to start of construction. Utilities shown are per visual observation of physical features and/or markouts and their location is approximate. The undersigned professional are not responsible for the presence of underground utilities or structures if they are not visible or otherwise disclosed by any of the above data. Pool contractor shall utilize the services of CALL DIG (1-800-272-1000) to accurately locate utilities.

3) Pool to be secured by min. 4' fence with pedestrian access gates having self latching and closing devices. Devices are to be 54" above grade, or 3" below top of barrier where the device is on the pool side of the gate and there are no openings greater than 1/2" within 18" of the device. Gates to open outwards away from the pool. Fence and all other construction shall comply with the International Building Code and the International Residential Code, New Jersey Edition, including ANSI/NSPI-5 Standards for Residential In Ground Swimming Pools, current editions. Where adjacent fences are used to secure the pool, the applicant shall take full responsibility for repair or replacement should they be damaged or removed and shall seek a variation for the fence where required.

4) All electrical equipment must be located at least 10' from the swimming pool.

5) The contractor shall protect all existing structures from damage and/or failure by acceptable methods as may be required per OSHA and other regulatory agencies. The Design Engineer accepts no responsibility for the safety or adequacy of the existing structures.

6) The Design Engineer assumes no responsibility for pool construction in easements or required setbacks areas not shown on the survey provided to the Design Engineer. The pool contractor and property owner shall verify the pool layout and all dimensions prior to construction.

7) Property owner responsible for all environmental permits. The determination of the presence or absence of wetlands, stream encroachment lines, buffer lines or easements not shown on the survey supplied by the Property Owner was outside of the scope of this project.

8) By use of this Plan for the purpose of obtaining a Permit to construct, the Property Owner and Pool Company agree to the proposed pool location, concrete, operating equipment and grading associated with the proposed swimming pool.

9) Minimum 1.0% Max. 4:1 grading provided in area that is to be disturbed by pool construction. Concrete areas to be minimum 0.5% grade.

10) Pool filter discharge to be by flexible hose to roadway or filter to be cartridge filter with no discharge.

11) Soils from pool excavation shall remain on site within the pool area. Any excess soils shall be removed from the site and the township.

No.	Date	Description	By
1	7/25/18	RVSD GRAPHIC SCALE PER TWP.	RCE

Lot 38 Block 28
Township of Howell
Monmouth County, NJ

Pool Plot Plan
126 Locust Avenue

DATE: 7/10/201
SCALE: 1" = 30'
JOB No.: 18-7186
SHEET: 1 OF 1

R.C. BURDICK, P.E., P.P., P.C.
CONSULTING ENGINEERS SURVEYORS
PLANNING ENVIRONMENTAL PERMITTING
1023 OCEAN ROAD
POINT PLEASANT, NJ 08742
(732)892-5050 FAX (732)892-5888

ROBERT C. BURDICK
P.A. PROFESSIONAL ENGINEER #049541-E
N.J. PROFESSIONAL ENGINEER #30929
N.J. PROFESSIONAL PLANNER #04383

TOWNSHIP OF HOWELL

DEPARTMENT OF COMMUNITY DEVELOPMENT & LAND USE
DIVISION OF ENGINEERING
4567 Route 9 North, 2nd Floor — Phone: (732) 938-4500 x2300
Post Office Box 580 — Fax: (732) 414-3243
Howell, NJ 07731-0580 — Web: www.twp.howell.nj.us

FILE COPY

PLOT PLAN CHECKLIST

BLOCK: 28 LOT: 38 SITE ADDRESS: 126 LOCUST AVENUE

OWNER NAME: LAURISSA DELLAS APPLICANT NAME: _____

Item No.	Plot Plan - Item Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	Plans provided on sheets no smaller than 8-1/2" x 11" or greater than 24" x 36".	✓			✓		
2	Plan drawn to scale, no larger than 1"=40'.	✓			✓		
3	Property lines shown, length in feet and hundredths, bearings in degrees, minutes and seconds.	✓			✓		
4	Area of parcel in square feet and acres, both to the nearest hundredth.	✓			✓		
5	Key map showing location of parcel to be considered in relation to surrounding area, within two hundred feet (200') (if applicable).		✓				✓
6	Title block containing name of applicant, preparer, lot and block number, date prepared, date of last amendment and zoning district.	✓			✓		
7	Scale of map, both written and graphic.	✓			✓		
8	North arrow giving reference meridian.	✓			✓		
9	Names of property owners within two hundred feet (200') of subject property (if applicable).		✓				✓
10	Topography of the site and at least fifty feet (50') around the improvements or property lines based on project. All elevations based on NAVD 1988 with source noted.		✓				✓
11	Existing contours showing the natural drainage of the land. Proposed contours demonstrating there are no impacts to adjacent parcels when complete. Flow arrows shall be provided to help depict the direction of storm water runoff.	✓			✓		
12	Spot grades to supplement contours. Any high or low points must be shown for drainage review purposes. Include spot elevations at property corners, building corners, septic systems, etc. Provide basement, garage and finished floor elevations.	✓			✓		
13	Soil boring demonstrating the basement is at least two feet (2') above the seasonal high water table.		✓				✓
14	Existing and proposed drainage swales, structures, basins and pipes must be shown including pipe size, type and slope. Show downspout locations. All drainage systems within fifty feet (50') of the property must be shown.		✓				✓
15	Location of wetlands, wetland buffers, riparian areas, floodplains and any other environmental constraints on the property, with backup documentation from the approving agency.		✓				✓
16	Location of existing and proposed structures and their setbacks from existing and proposed property lines. Overall limit of disturbance.	✓			✓		
17	Existing and proposed zoning setbacks and dimensions depicted graphically on plan.	✓			✓		
18	Location of easements or rights of way including power lines.	✓			✓		
19	Location of railroads, bridges, culverts, drain-pipes, water and sewer mains and other man-made installations affecting the parcel.		✓				✓
20	Location of existing and proposed utility lines. Plan must show connection points. (Any work within right-of-way will require a road opening permit.)	✓			✓		
21	Location of existing and proposed wells and septic systems.		✓				✓
22	Proposed septic approval from the Monmouth County Board of Health (if applicable).		✓				✓
23	Location and description of monuments whether set or to be set (if applicable).		✓				✓
24	Location, names and widths of all existing streets within two hundred feet (200') of the parcel.		✓				✓
25	Street composition & width adjacent to the parcel.	✓			✓		
26	Existing and proposed centerline, gutter and top of curb elevations along the roadway. Include construction access point from Township right-of-way.	✓			✓		
27	Proposed roadway and curb details (if applicable).		✓				✓
28	Existing and proposed sidewalk and driveway grades (if applicable).		✓				✓
29	Proposed sidewalk and driveway details.		✓				✓
30	Soil Erosion & Sediment Control Permit Approval (if required).		✓				✓

Item No.	In-ground Swimming Pool - Additional Items Required	Applicant Checklist		For Township Use Only		
		Yes	N/A	Yes	No	N/A
1	No change in grade shall take place within five feet (5') of the property line.	✓		✓		
2	In-ground pool coping elevation and all dimensions from surrounding walkways to buildings, setbacks, other structures, etc.	✓		✓		
3	Pool equipment shall be placed at least ten feet (10') from any property line.	✓		✓		
4	Waterline shall be at least ten feet (10') from any property line unless a walkway, patio, deck, etc. is installed adjacent to the pool, then the ten foot (10') setback should be measured from the furthest edge of that item away from the waterline.	✓		✓		
5	Pool shall be placed at least six feet (6') from the residential dwelling. Provide cross-section drawings of the pool and any adjacent structure if the pool is within twelve feet (12') of that structure.	✓		✓		
6	Location of pool backwash discharge location graphically depicted on the plan.	✓		✓	See Note #10	

Item No.	Retaining Wall - Additional Items Required	Applicant Checklist		For Township Use Only		
		Yes	N/A	Yes	No	N/A
1	Proposed grades on top and bottom of wall including drainage patterns above and below the wall.		✓			↑
2	If segmental block, provide name of manufacturer, specifications and details of the block and geotechnical fabric.		✓			↓
3	If over thirty inches (30") high, provide design details and calculations.		✓			
4	If over thirty inches (30") high, provide guard in accordance with IBC.		✓			N/A
5	Provide cross section detail of wall.		✓			
6	No wall shall be placed within five feet (5') of the property line.		✓			
7	The base of the wall shall not be greater than a four-to-one (4:1) slope from the property line.		✓			✓
8	Walls shall be at least ten feet (10') from any swale area.		✓			✓

Engineer's Name: R.C. BURDICK NJ Lic. #: 30929
(please print)

Engineer's Signature: [signature] Date: 7/25/18

Seal

TOWNSHIP OF HOWELL – DIVISION OF ENGINEERING

(For Official Use Only, to be completed by Township Officials)

☑ **APPROVED**

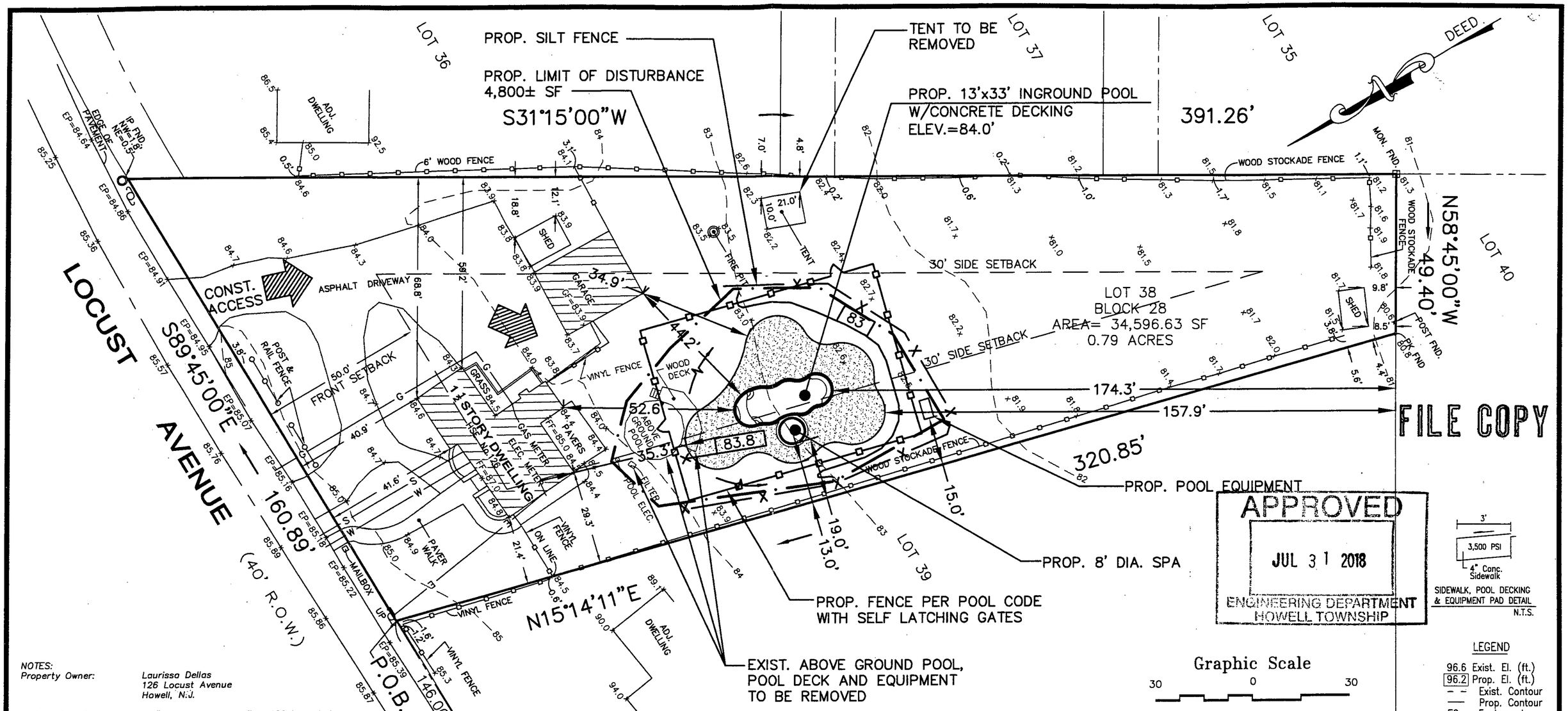
Comments / Special Conditions:

☐ **DENIED**

Comments / Reason for Denial:

Reviewer's Name: RAISA SHEKHTER Title: ENG AIDE III
(please print)

Reviewer's Signature: [signature] Date: 7/31/2018



NOTES:
Property Owner: Laurissa Dellas
126 Locust Avenue
Howell, N.J.

1) Pool Plot Plan based on "Sketch of Survey For: 126 Locust Avenue, Lot 38 in Block 28 Howell Township, Monmouth County, New Jersey", prepared by RC Burdick PE PP PC performed by Mr. Stan Hans Jr., NJPLS No. 29182 performed 1/25/2018.

2) Contractor to verify location of all utilities prior to start of construction. Utilities shown are per visual observation of physical features and/or markouts and their location is approximate. The undersigned professional are not responsible for the presence of underground utilities or structures if they are not visible or otherwise disclosed by any of the above data. Pool contractor shall utilize the services of CALL DIG (1-800-272-1000) to accurately locate utilities.

3) Pool to be secured by min. 4' fence with pedestrian access gates having self latching and closing devices. Devices are to be 54" above grade, or 3" below top of barrier where the device is on the pool side of the gate and there are no openings greater than 1/2" within 18" of the device. Gates to open outwards away from the pool. Fence and all other construction shall comply with the International Building Code and the International Residential Code, New Jersey Edition, including ANSI/NSPI-5 Standards for Residential In Ground Swimming Pools, current editions. Where adjacent fences are used to secure the pool, the applicant shall take full responsibility for repair or replacement should they be damaged or removed and shall seek a variation for the fence where required.

4) All electrical equipment must be located at least 10' from the swimming pool.

5) The contractor shall protect all existing structures from damage and/or failure by acceptable methods as may be required per OSHA and other regulatory agencies. The Design Engineer accepts no responsibility for the safety or adequacy of the existing structures.

6) The Design Engineer assumes no responsibility for pool construction in easements or required setbacks areas not shown on the survey provided to the Design Engineer. The pool contractor and property owner shall verify the pool layout and all dimensions prior to construction.

7) Property owner responsible for all environmental permits. The determination of the presence or absence of wetlands, stream encroachment lines, buffer lines or easements not shown on the survey supplied by the Property Owner was outside of the scope of this project.

8) By use of this Plan for the purpose of obtaining a Permit to construct, the Property Owner and Pool Company agree to the proposed pool location, concrete, operating equipment and grading associated with the proposed swimming pool.

9) Minimum 1.0%, Max. 4:1 grading provided in area that is to be disturbed by pool construction. Concrete areas to be minimum 0.5% grade.

10) Pool filter discharge to be by flexible hose to roadway or filter to be cartridge filter with no discharge.

11) Soils from pool excavation shall remain on site within the pool area. Any excess soils shall be removed from the site and the township.

No.	Date	Description	By
1	7/25/18	RVSD GRAPHIC SCALE PER TWP.	RCB

Lot 38 Block 28
Township of Howell
Monmouth County, NJ

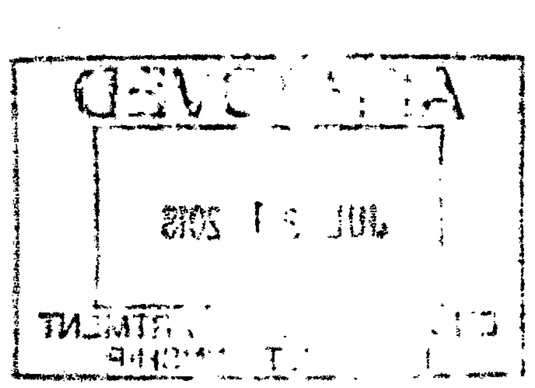
Pool Plot Plan
126 Locust Avenue

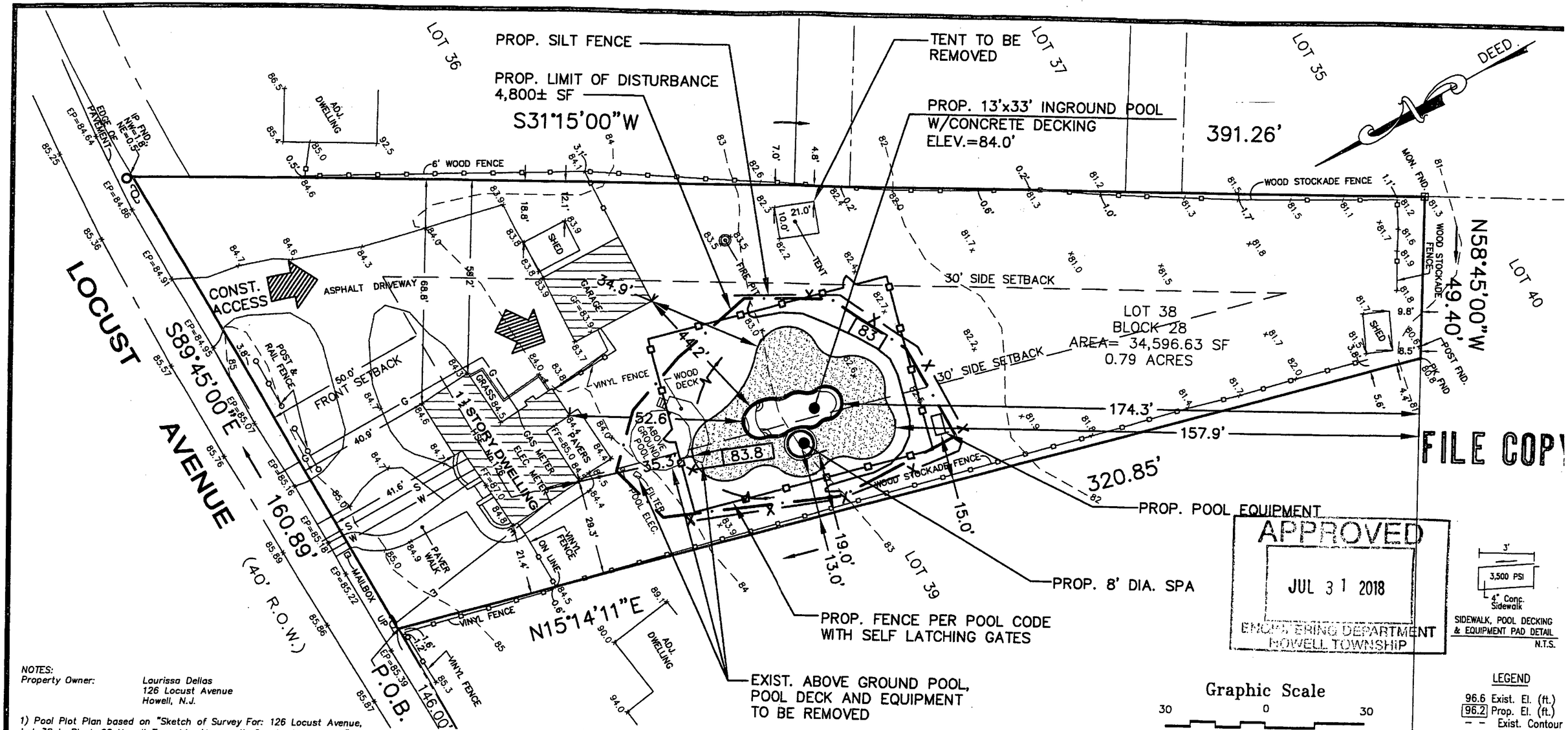
DATE: 7/10/2018
SCALE: 1" = 30'
JOB No.: 18-7186
SHEET 1 OF 1

R.C. BURDICK, P.E., P.P., P.C.
CONSULTING ENGINEERS SURVEYORS
PLANNING ENVIRONMENTAL PERMITTING
1023 OCEAN ROAD
POINT PLEASANT, NJ 08742
(732)892-5050 FAX (732)892-5888

ROBERT C. BURDICK
N.J. PROFESSIONAL ENGINEER #040547
N.J. PROFESSIONAL ENGINEER #29182
N.J. PROFESSIONAL PLANNER #04383

FILE COPY





APPROVED
JUL 31 2018
ENGINEERING DEPARTMENT
HOWELL TOWNSHIP

FILE COPY

NOTES:
Property Owner: Laurissa Dellas
126 Locust Avenue
Howell, N.J.

1) Pool Plot Plan based on "Sketch of Survey For: 126 Locust Avenue, Lot 38 in Block 28 Howell Township, Monmouth County, New Jersey", prepared by RC Burdick PE PP PC performed by Mr. Stan Hans Jr., NJPLS No. 29182 performed 1/25/2018.

2) Contractor to verify location of all utilities prior to start of construction. Utilities shown are per visual observation of physical features and/or markouts and their location is approximate. The undersigned professional are not responsible for the presence of underground utilities or structures if they are not visible or otherwise disclosed by any of the above data. Pool contractor shall utilize the services of CALL DIG (1-800-272-1000) to accurately locate utilities.

3) Pool to be secured by min. 4' fence with pedestrian access gates having self latching and closing devices. Devices are to be 54" above grade, or 3" below top of barrier where the device is on the pool side of the gate and there are no openings greater than 1/2" within 18" of the device. Gates to open outwards away from the pool. Fence and all other construction shall comply with the International Building Code and the International Residential Code, New Jersey Edition, including ANSI/NSPI-5 Standards for Residential In Ground Swimming Pools, current editions. Where adjacent fences are used to secure the pool, the applicant shall take full responsibility for repair or replacement should they be damaged or removed and shall seek a variation for the fence where required.

4) All electrical equipment must be located at least 10' from the swimming pool.

5) The contractor shall protect all existing structures from damage and/or failure by acceptable methods as may be required per OSHA and other regulatory agencies. The Design Engineer accepts no responsibility for the safety or adequacy of the existing structures.

6) The Design Engineer assumes no responsibility for pool construction in easements or required setbacks areas not shown on the survey provided to the Design Engineer. The pool contractor and property owner shall verify the pool layout and all dimensions prior to construction.

7) Property owner responsible for all environmental permits. The determination of the presence or absence of wetlands, stream encroachment lines, buffer lines or easements not shown on the survey supplied by the Property Owner was outside of the scope of this project.

8) By use of this Plan for the purpose of obtaining a Permit to construct, the Property Owner and Pool Company agree to the proposed pool location, concrete, operating equipment and grading associated with the proposed swimming pool.

9) Minimum 1.0%, Max. 4:1 grading provided in area that is to be disturbed by pool construction. Concrete areas to be minimum 0.5% grade.

10) Pool filter discharge to be by flexible hose to roadway or filter to be cartridge filter with no discharge.

11) Soils from pool excavation shall remain on site within the pool area. Any excess soils shall be removed from the site and the township.

LEGEND
96.6 Exist. El. (ft.)
96.2 Prop. El. (ft.)
Exist. Contour
Prop. Contour
EQ. Equipment

No.	Date	Description	By
1	7/25/18	RVSD GRAPHIC SCALE PER TWP.	RCE

Lot 38 Block 28
Township of Howell
Monmouth County, NJ

Pool Plot Plan
126 Locust Avenue

DATE: 7/10/201
SCALE: 1" = 30'
JOB No.: 18-7186
SHEET 1 OF 1

R.C. BURDICK, P.E., P.P., P.C.
CONSULTING ENGINEERS SURVEYORS
PLANNING ENVIRONMENTAL PERMITTING
1023 OCEAN ROAD
POINT PLEASANT, NJ 08742
(732)892-5050 FAX (732)892-5888

ROBERT C. BURDICK
P.A. PROFESSIONAL ENGINEER #049541-E
N.J. PROFESSIONAL ENGINEER #30929
N.J. PROFESSIONAL PLANNER #04383

CLEAN UP CONSTRUCTION DEBRIS

TOPSOIL & SEED WITH POSITIVE GRASS GROWTH

TOWNSHIP OF HOWELL

DEPARTMENT OF COMMUNITY DEVELOPMENT & LAND USE
DIVISION OF ENGINEERING
4567 Route 9 North, 2nd Floor
Post Office Box 580
Howell, NJ 07731-0580
Phone: (732) 938-4500 x2300
Fax: (732) 414-3243
Web: www.twp.howell.nj.us

ACCT 113

FILE COPY

PLOT PLAN CHECKLIST

BLOCK: 28 LOT: 38 SITE ADDRESS: 126 LOCUST AVENUE

OWNER NAME: LAURISSA DELLAS APPLICANT NAME: _____

Item No.	Plot Plan - Item Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	Plans provided on sheets no smaller than 8-1/2" x 11" or greater than 24" x 36".	✓			✓		
2	Plan drawn to scale, no larger than 1"=40'.	✓			✓		
3	Property lines shown, length in feet and hundredths, bearings in degrees, minutes and seconds.	✓			✓		
4	Area of parcel in square feet and acres, both to the nearest hundredth.	✓			✓		
5	Key map showing location of parcel to be considered in relation to surrounding area, within two hundred feet (200') (if applicable).		✓				✓
6	Title block containing name of applicant, preparer, lot and block number, date prepared, date of last amendment and zoning district.	✓			✓		
7	Scale of map, both written and graphic.	✓			✓		
8	North arrow giving reference meridian.	✓			✓		
9	Names of property owners within two hundred feet (200') of subject property (if applicable).		✓				✓
10	Topography of the site and at least fifty feet (50') around the improvements or property lines based on project. All elevations based on NAVD 1988 with source noted.		✓				✓
11	Existing contours showing the natural drainage of the land. Proposed contours demonstrating there are no impacts to adjacent parcels when complete. Flow arrows shall be provided to help depict the direction of storm water runoff.	✓			✓		
12	Spot grades to supplement contours. Any high or low points must be shown for drainage review purposes. Include spot elevations at property corners, building corners, septic systems, etc. Provide basement, garage and finished floor elevations.	✓			✓		
13	Soil boring demonstrating the basement is at least two feet (2') above the seasonal high water table.		✓				✓
14	Existing and proposed drainage swales, structures, basins and pipes must be shown including pipe size, type and slope. Show downspout locations. All drainage systems within fifty feet (50') of the property must be shown.		✓				✓
15	Location of wetlands, wetland buffers, riparian areas, floodplains and any other environmental constraints on the property, with backup documentation from the approving agency.		✓				✓
16	Location of existing and proposed structures and their setbacks from existing and proposed property lines. Overall limit of disturbance.	✓			✓		
17	Existing and proposed zoning setbacks and dimensions depicted graphically on plan.	✓			✓		
18	Location of easements or rights of way including power lines.	✓			✓		
19	Location of railroads, bridges, culverts, drain-pipes, water and sewer mains and other man-made installations affecting the parcel.		✓				✓
20	Location of existing and proposed utility lines. Plan must show connection points. (Any work within right-of-way will require a road opening permit.)	✓			✓		
21	Location of existing and proposed wells and septic systems.		✓				✓
22	Proposed septic approval from the Monmouth County Board of Health (if applicable).		✓				✓
23	Location and description of monuments whether set or to be set (if applicable).		✓				✓
24	Location, names and widths of all existing streets within two hundred feet (200') of the parcel.		✓				✓
25	Street composition & width adjacent to the parcel.	✓			✓		
26	Existing and proposed centerline, gutter and top of curb elevations along the roadway. Include construction access point from Township right-of-way.	✓			✓		
27	Proposed roadway and curb details (if applicable).		✓				✓
28	Existing and proposed sidewalk and driveway grades (if applicable).		✓				✓
29	Proposed sidewalk and driveway details.		✓				✓
30	Soil Erosion & Sediment Control Permit Approval (if required).		✓				✓

ENTERED
VOID

Item No.	In-ground Swimming Pool - Additional Items Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	No change in grade shall take place within five feet (5') of the property line.	✓			✓		
2	In-ground pool coping elevation and all dimensions from surrounding walkways to buildings, setbacks, other structures, etc.	✓			✓		
3	Pool equipment shall be placed at least ten feet (10') from any property line.	✓			✓		
4	Waterline shall be at least ten feet (10') from any property line unless a walkway, patio, deck, etc. is installed adjacent to the pool, then the ten foot (10') setback should be measured from the furthest edge of that item away from the waterline.	✓			✓		
5	Pool shall be placed at least six feet (6') from the residential dwelling. Provide cross-section drawings of the pool and any adjacent structure if the pool is within twelve feet (12') of that structure.	✓			✓		
6	Location of pool backwash discharge location graphically depicted on the plan.	✓			✓		see Note #10

Item No.	Retaining Wall - Additional Items Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	Proposed grades on top and bottom of wall including drainage patterns above and below the wall.		✓				
2	If segmental block, provide name of manufacturer, specifications and details of the block and geotechnical fabric.		✓				
3	If over thirty inches (30") high, provide design details and calculations.		✓				
4	If over thirty inches (30") high, provide guard in accordance with IBC.		✓				N/A
5	Provide cross section detail of wall.		✓				
6	No wall shall be placed within five feet (5') of the property line.		✓				
7	The base of the wall shall not be greater than a four-to-one (4:1) slope from the property line.		✓				
8	Walls shall be at least ten feet (10') from any swale area.		✓				

Engineer's Name: R.C. BURDICK NJ Lic. #: 30929
(please print)

Engineer's Signature: [signature] Date: 7/25/18

Seal

TOWNSHIP OF HOWELL – DIVISION OF ENGINEERING

(For Official Use Only, to be completed by Township Officials)

☑ **APPROVED**

Comments / Special Conditions:

☐ **DENIED**

Comments / Reason for Denial:

Reviewer's Name: RAISA SHEKHTER Title: ENG. AIDE III
(please print)

Reviewer's Signature: [signature] Date: 7/31/2018

PERMIT UPDATE

Date Update Issued 4/8/2019
Control # C-45288
Permit # 20182065+A

IDENTIFICATION Block: 28 Lot: 38 Qualifier
Work Site Location: 126 LOCUST AVENUE Howell Township, NJ 07731
Owner in Fee DELLAS, LAURISSA
126 LOCUST AVE HOWELL NJ 07731
Telephone: [redacted]

Contractor LGD CONTRACTING LLC
Address 126 LOCUST AVENUE HOWELL NJ 07731
Telephone: (732) 684-1075
Lic. No. or Bldrs. Reg. No. 13VH02144500
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SUBPANEL

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 $200

Construction Official — 4/8/2019 Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$75
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$0
CO Fee	
Other	$0
Total	$75
Check No.	404
Cash	$0
Credit	$0
Collected By	Janine Martuscelli

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

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.

- [x] 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:

- [x] 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".

- [x] A complete copy of released plans must be kept on the job site.

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

PERMIT UPDATE

45288 4-8-19
Date Update Issued
Permit # 20182065 + A
Date Permit Issued

IDENTIFICATION Block 28 Lot 38 Qualification Code _____

Work Site Location _____

Owner in Fee Laurissa Dellas

Address 126 Locust Ave Flowell NJ 07731

Tel. [redacted]

Contractor LGH Contracting LLC

Address 121 Locust Ave
Flowell, NJ 07731

Tel. (_____) _____

Lic. No. or Bldrs. Reg. No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: Sub Panel

Estimated Cost of Work $ self $1200

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.

_____ _____
Construction Official Date

PAYMENTS (Office Use Only)

Building _____
Electrical 75
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
State Permit Surcharge Fee _____
Cert. of Occupancy _____
Other _____
Total 75
Check No. # 404
Cash _____
Collected by PM

U.C.C. F190 (rev. 1/04)

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

Reorder form Allegra Marketing Print Mail (609) 390-1400

PERMIT UPDATE

45288 4-8-19
Date Update Issued
Permit # 20182065 TA
Date Permit Issued

IDENTIFICATION Block 7.4 Lot _____ Qualification Code _____

Work Site Location _____

Owner in Fee _____

Address _____

Tel. [redacted]

Contractor _____

Address _____

Tel. (____) _____

Lic. No. or Bldrs. Reg. No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: Subpoint 1

Estimated Cost of Work $ self 200

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.

_____ _____
Construction Official Date

PAYMENTS (Office Use Only)

Building _____
Electrical 14.75 (9 P)
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
State Permit Surcharge Fee _____
Cert. of Occupancy _____
Other _____
Total _____
Check No. # 404
Cash _____
Collected by CM

U.C.C. F190 (rev. 1/04)

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

Reorder form Allegra Marketing Print Mail (609) 390-1400

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 4-8-19
Control # 45288
Date Issued
Permit # 20182065TA

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 locust Ave

Owner in Fee: laurissa Dellas

Tel. [redacted] e-mail [redacted]

Address 126 locust Ave (street) (municipality) 07731 (zip code)

Contractor: Home Owner Tel. [redacted]

Address 126 locust Ave e-mail [redacted]

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 200

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: laurissa Dellas

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Pool sub Panel

QTY.	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		TOTAL NUMBERS
		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
		HP Motors 1/+ HP
		KW Transformer/Generator
		AMP Service
30		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

FEE (Office Use Only)

$

Administrative Surcharge $ 15
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 4-8-19
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

U.C.C. F120 (rev. 11/09)

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 4-8-19
Control # 453288
Date Issued
Permit # 20182065TA

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

Block 28 Lot 38 Qualification Code

Work Site Location [illegible] Locust Ave

Owner in Fee: [illegible]

Tel. ([redacted] e-mail [redacted]

Address 126 Locust Ave 07731
street municipality zip code

Contractor: Home Cover Tel. [redacted]

Address 126 Locust Ave e-mail [redacted]

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 200

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: [illegible] Bellas

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Pool sub panel

QTY.	SIZE	ITEMS	
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	
		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	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
	30	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

FEE (Office Use Only)

	$
Administrative Surcharge	$ 75
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS

Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 11/09)

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

Howell Township
4567 ROUTE 9 NORTH (2nd FLOOR)
PO BOX 580
HOWELL, NJ 07731
(732) 938-4500 EXT.2415

Subcode Official Review

Date: Monday, February 04, 2019

To: DELLAS, LAURISSA
126 LOCUST AVE
HOWELL, NJ 07731

RE: Electrical Subcode
Block: 28 Lot: 38 Qual:
126 LOCUST AVENUE
Permit Number: 20182065+A Control Number: C-45288
Last Submit Date: Monday, February 04, 2019

Dear DELLAS, LAURISSA,

Your request is hereby denied based upon the following infractions.

1. Main Electrical permit was isuued under a homeowner, update must be by home owner also not LGD Contracting.

Sincerely,

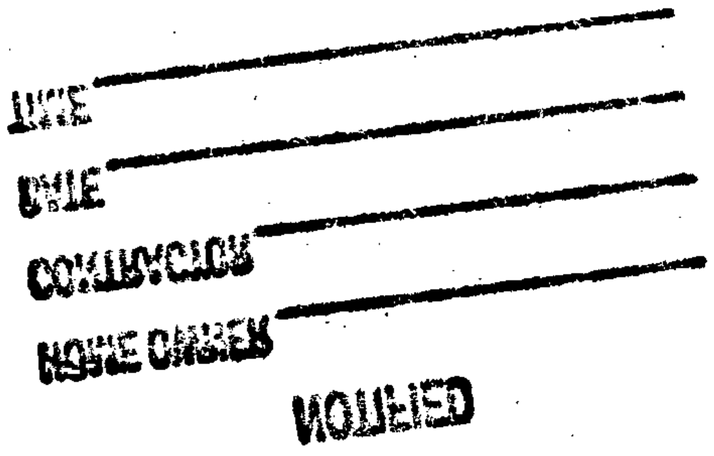
Jean Verrier, Subcode Official

CC:

RESUBMITTED
APR 0 8 '19
COMMUNITY DEVELOPMENT

NOTIFIED
HOME OWNER ✓
CONTRACTOR
DATE 2-6-19
TIME 12:13

4/8/19
Homeowner


NOTIFIED
NONE GIVEN
CONTRACTOR
DATE
TIME

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 45288
Date Issued
Permit # 20182065tA

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 Locust Ave Howell NJ 07731

Owner in Fee: Laurissa Dellas

Tel. [redacted] e-mail [redacted]

Address

Contractor: LGD Contracting LLC (street / municipality / zip code) Tel. (732) 684-1675

Address 126 Locust Ave Howell NJ e-mail info@LGDpool.com

Contractor License No. self Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Will Kay

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Sub Panel

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		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	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
1	30	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 45288
Date Issued
Permit # 20182065tA

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

Block 28 Lot 38 Qualification Code

Work Site Location 176 locust Ave Howell NJ 07731

Owner in Fee: laurissa Dellas

Tel. [redacted] e-mail [redacted]

Address

Contractor: LGD Contracting LLC (street) (municipality) (zip code) Tel. (732) 684-1675

Address 1706 locust Ave Howell NJ e-mail info@LGDpool.com

Contractor License No. self Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: W. H. C Ray

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: sub panel

QTY.	SIZE	ITEMS	
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	
		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	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
1	30	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

2-6-13
2-10-13

FEE (Office Use Only)

$

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 11/09)

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 45288
Date Issued
Permit # 20182065TA

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

Block _____ Lot _____ Qualification Code _____

Work Site Location _____

Owner in Fee: _____

Tel. [redacted] e-mail [redacted]

Address _____
street municipality zip code

Contractor: _____ Tel. ( ) _____

Address _____ e-mail _____

Contractor License No. self Exp. Date _____

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

Federal Emp. ID No. _____ FAX: ( ) _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date:_____ Approved by: _____

[ ] Electric Plans Approved

Date:_____ Approved by: _____

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS	Dates (Month/Day)			
Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

Annual Pool Inspection _____

Date of Grounding and Bonding Certification _____

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: _____

Print name here: _____

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Sub panel

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		_____	
		TOTAL NUMBERS	$
		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	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
1		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		_____	

2015 2013

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

U.C.C. F120 (rev. 11/09)

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 45288
Date Issued
Permit # 20182065 1A

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

Block _____ Lot _____ Qualification Code _____

Work Site Location _____

Owner in Fee: _____

Tel. (_____) _____ e-mail _____

Address _____
street municipality zip code

Contractor: _____ Tel. (_____) _____

Address _____ e-mail _____

Contractor License No. 15614 Exp. Date _____

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

Federal Emp. ID No. _____ FAX: (_____) _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date:_____ Approved by: _____

[ ] Electric Plans Approved

Date:_____ Approved by: _____

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

Annual Pool Inspection _____

Date of Grounding and Bonding Certification _____

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: _____

Print name here: M. T. C [illegible]

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Sub panel

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		_____	
		TOTAL NUMBERS	$
		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	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
1		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		_____	

2 @ 113

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

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued 43507
Permit #

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 Locust Ave Howell NJ 07731

Owner in Fee: Laurissa Dellas

Tel. [redacted] e-mail

Address 126 Locust Ave Howell NJ 07731
(street) (municipality) (zip code)

Contractor: LGD Pools Tel. 732 684-1075

Address [redacted] Clearcates Dr e-mail

Forked River NJ 08731

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 500

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

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.

Applicant/Contractor sign here: [signature]

Print name here: George Dellas

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Gas Pool heater

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER
Flammable/Combustible Tanks	
Alarm Systems	
[ ] System	
[ ] 110v Interconnected	
[ ] CO Detectors/110v	
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	
Supervisory Devices (i.e., tampers, low/high air)	
Signaling Devices (i.e., horn/strobes, bells)	
Other Devices	
TOTAL	
Suppression Systems	
Fire Pump ____ GPM Type ____	
Dry Pipe/Alarm Valves	
Pre-action Valves	
Sprinkler Heads (Dry and Wet)	
Standpipes	
Pre-engineered Systems	
Wet Chemical	
Dry Chemical	
CO_2 Suppression	
Foam Suppression	
FM200 Suppression	
Other	
Other Systems	
Kitchen Hood Exhaust System	
Smoke Control System	
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid	
Fireplace Venting/Metal Chimney	
Other	

FEE (Office Use Only)
$

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

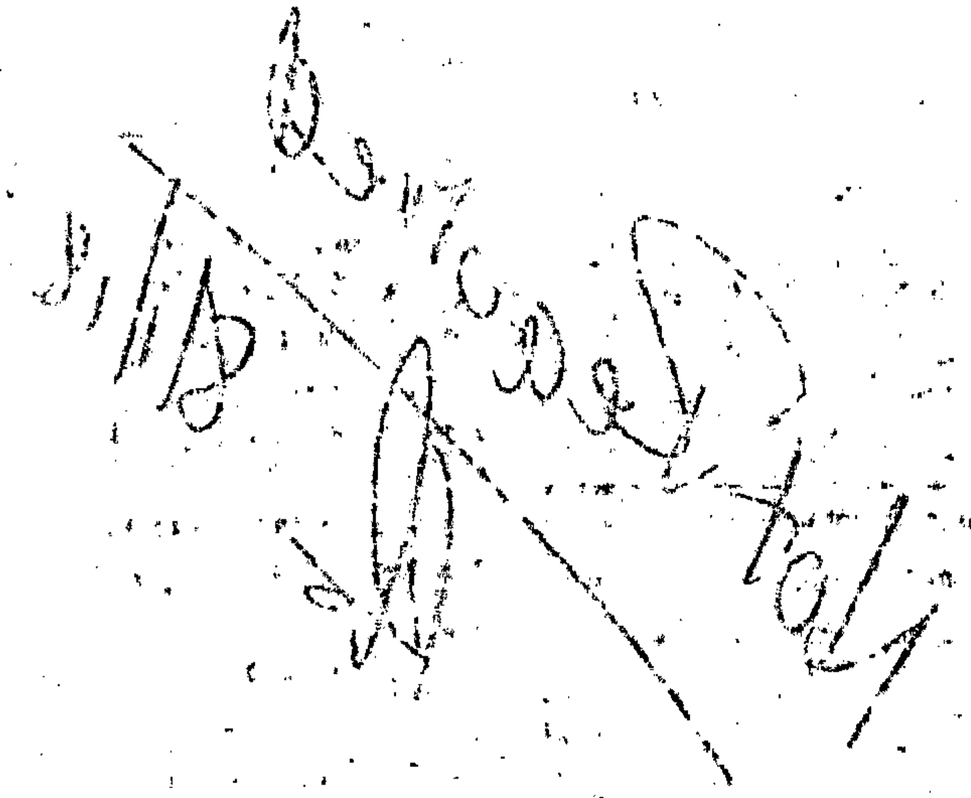
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

Not Required Sht 18

To Reorder call:
Allegra Marketing Print & Mail
609-390-1400

U.C.C. F140 (rev. 02/11)



FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #

Date Issued 43507
Permit #

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 locust Ave Howell NJ 07731

Owner in Fee: Larissa Dellas

Tel. [redacted] e-mail

Address 126 locust Ave Howell NJ 07731
(street) (municipality) (zip code)

Contractor: LGD Pools Tel. 732 684-1075

Address 211 Clearlakes Dr e-mail
Forked River NJ 08731

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 500

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

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.

Applicant/Contractor sign here:

Print name here: George Dellas

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Gas Pool heater

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER
Flammable/Combustible Tanks	
Alarm Systems	
[ ] System	
[ ] 110v Interconnected	
[ ] CO Detectors/110v	
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	
Supervisory Devices (i.e., tampers, low/high air)	
Signaling Devices (i.e., horn/strobes, bells)	
Other Devices	
TOTAL	
Suppression Systems	
Fire Pump GPM Type	
Dry Pipe/Alarm Valves	
Pre-action Valves	
Sprinkler Heads (Dry and Wet)	
Standpipes	
Pre-engineered Systems	
Wet Chemical	
Dry Chemical	
CO_2 Suppression	
Foam Suppression	
FM200 Suppression	
Other	
Other Systems	
Kitchen Hood Exhaust System	
Smoke Control System	
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid	
Fireplace Venting/Metal Chimney	
Other	

FEE (Office Use Only)
$

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

Not Req

To Reorder call:
Allegra Marketing Print & Mail
609-390-1400

U.C.C. F140 (rev. 02/11)

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #

Date Issued, 43507
Permit #

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

Block 28 Lot 50 Qualification Code

Work Site Location 126 Locust Ave Hazlet NJ 07731

Owner in Fee: Larissa Dellas

Tel. [redacted] e-mail

Address 126 Locust Ave Hazlet NJ 07731
(street) (municipality) (zip code)

Contractor: LGD Pools Tel. 732 609 4073

Address 211 Clearlake Dr e-mail
Forked River NJ 08731

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 500

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

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.

Applicant/Contractor sign here:

Print name here: George Dellas

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Gas Pool heater
Water Supply Source
Method of Alarm/Suppression System Supervision

	NUMBER
Flammable/Combustible Tanks	
Alarm Systems	
[ ] System	
[ ] 110v Interconnected	
[ ] CO Detectors/110v	
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	
Supervisory Devices (i.e., tampers, low/high air)	
Signaling Devices (i.e., horn/strobes, bells)	
Other Devices	
TOTAL	
Suppression Systems	
Fire Pump GPM Type	
Dry Pipe/Alarm Valves	
Pre-action Valves	
Sprinkler Heads (Dry and Wet)	
Standpipes	
Pre-engineered Systems	
Wet Chemical	
Dry Chemical	
CO_2 Suppression	
Foam Suppression	
FM200 Suppression	
Other	
Other Systems	
Kitchen Hood Exhaust System	
Smoke Control System	
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid	
Fireplace Venting/Metal Chimney	
Other	

FEE (Office Use Only)
$

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

To Reorder call:
Allegra Marketing Print & Mail
609-390-1400

U.C.C. F140 (rev. 02/11)

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #

Date Issued, 4350?
Permit #

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

Block 28 Lot 32 Qualification Code _____

Work Site Location 126 Locust Ave Fleetwood NJ 07121

Owner in Fee: Lagoon Pools

Tel. [redacted] e-mail _____

Address 126 Locust Ave Fleetwood NJ 07121
(street) municipality zip code

Contractor: Lagoon Pools Tel. 610-777-7246

Address 211 Cleveland Dr e-mail _____
Forked River NJ 08731

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____

Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____

Fire Alarm Contractor No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

Heating System: [ ] New *OR* [ ] Modification to Existing *OR* [ ] Conversion *OR* [ ] Replacement

Fuel Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other _____

Location: _____

Total Cost of Fire Protection Work $ 5K

Fuel Storage Tank:
Fuel Type: [ ] Flammable *OR* [ ] Combustible
Capacity _____

Fire Alarm System: [ ] New *OR* [ ] Existing
Location of Panel: _____

Fire Suppression/Standpipe System:
[ ] New *OR* [ ] Existing
Location of Main Control Valve: _____

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.

Applicant/Contractor sign here: _____

Print name here: George Dellas

D. TECHNICAL SITE DATA [ ] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK: Gas Pool Heater

Water Supply Source

Method of Alarm/Suppression System Supervision _____

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices _____		
TOTAL		
Suppression Systems		
Fire Pump _____ GPM Type _____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other _____		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other _____		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: _____ Approved by: _____
[ ] Fire Protection Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other _____				

To Reorder call:
Allegra Marketing Print & Mail
609-390-1400

CONSTRUCTION PERMIT

Date Issued 8/8/2018
Control # C-43502
Permit # 20182065

IDENTIFICATION Block: 28 Lot: 38 Qualifier

Work Site Location: 126 LOCUST AVENUE Howell Township, NJ 07731

Owner in Fee DELLAS, LAURISSA
126 LOCUST AVE HOWELL NJ 07731

Telephone: [redacted]

Contractor LGD POOLS
Address 211 CLEARWATER DR. FORKED RIVER NJ 08731

Telephone: (732) 684-1075
Lic. No. or Bldrs. Reg. No. 13VH02144500
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

IN-GROUND SWIMMING POOL, POOL HEATER TYPE O NON-DIVING

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 $28,000

Construction Official

8/8/2018
Date

PAYMENTS (Office Use Only)

Building	$300
Electrical	$145
Plumbing	$145
Fire Protection	$65
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$53
CO Fee	
Other	$0
Total	$708
Check No.	382 391
Cash	$0
Credit	$0
Collected By	Kim Balsamo

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

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.

- [x] 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:

- [x] 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".

- [x] A complete copy of released plans must be kept on the job site.

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

28 38

BUILDING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 43502
Date Issued 8/8/18
Permit # 20182065

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 Locust Ave Howell NJ 07731

Owner in Fee: Lawissa Dellas

Tel. [redacted] e-mail

Address 126 Locust Ave Howell NJ 07731
street municipality zip code

Contractor: LGD Pools P.O. Tel. (732) 684-1751

Address 211 Clearwater Dr. Forked River NJ 08731 e-mail

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02144500

Federal Emp. ID No. [redacted] FAX: (609) 994-5891

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	8/1/18	CG
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 8-1-18
Approved by: CG

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation			X	
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

Dates (Month/Day)

B. BUILDING CHARACTERISTICS

Use Group Present R5 Proposed U

No. of Stories

Height of Structure ft.

Area — Largest Floor N/A sq. ft.

New Bldg. Area/All Floors sq. ft.

Volume of New Structure cu. ft.

Max. Live Load

Max. Occupancy Load

Constr. Class Present V8 Proposed —

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 26,000

C. CERTIFICATION IN LIEU OF OATH

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

Sign here:

Print name here: George Dellas

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

inground swimming pool
13x33 fiberglass
Pool Heater
Barrier must comply w/ 2015 ISPSC.
Type O Non-Diving

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [✓] Fence _____ Height (exceeds 6') 50
- [ ] Sign _____ Sq. Ft.
- [✓] Pool 250
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

Administrative Surcharge	$
Minimum Fee	$ 49
State Permit Surcharge Fee	$
TOTAL FEE	$

For reorder call: (609) 390-1400
Allegra Marketing • Print • Mail

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control # 43502
Date Issued 8/8/18
Permit # 20182065

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 Locust Ave Hazlet NJ 07730

Owner in Fee: Larissa Dellas

Tel. [redacted] e-mail

Address 126 Locust Ave Hazlet NJ 07730
(street) (municipality) (zip code)

Contractor: LGD Pools Tel. (732) 684-1075

Address 211 Clearwater Dr. Forked River NJ 08731 e-mail

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02144500

Federal Emp. ID No. [redacted] FAX: (609) 994 3807

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	8/7/18	CG
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT,
Date: 8-7-18
Approved by: CG

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date:
Approved by:

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

B. BUILDING CHARACTERISTICS

Use Group Present R5 Proposed U
Constr. Class Present V8 Proposed —
No. of Stories
Height of Structure ft.
Area — Largest Floor N/A sq. ft.
New Bldg. Area/All Floors sq. ft.
Volume of New Structure cu. ft.
Max. Live Load
Max. Occupancy Load

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 26,000

C. CERTIFICATION IN LIEU OF OATH

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

Sign here:
Print name here: George Dellas

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

inground Swimming Pool
13X33 fiberglass
Pool Heater

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[✓] Fence Height (exceeds 6') 50
[ ] Sign Sq. Ft.
[✓] Pool 250
[ ] Retaining Wall Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other
[ ] Demolition

FEE (Office Use Only)

	$
	50
	250
Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$ 77
TOTAL FEE	$

For reorder call: (609) 390-1400
Allegra Marketing • Print • Mail

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued 8/8/18
Permit # 20182507
20182065

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

Block 28 Lot 38 Qualification Code

Work Site Location 126 locust Ave Howell NJ 07731

Owner in Fee: Louissa Dellas

Tel. [redacted] e-mail

Address 126 locust Ave Howell NJ 07731
street municipality zip code

Contractor: LGD pools Tel. (732) 684-1075

Address 211 Clearwater Dr e-mail
Forked River NJ 08731

Contractor License No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02114500

Federal Emp. ID No. [redacted] FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed Pool heater

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Heiv.

SUBCODE APPROVAL for PERMIT
Date: 8-7-18
Approved by: Allan Kantel

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: George Dellas

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
400,000 BTU Pool gas heater, 2 Bottom Drains

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping (1)	15
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	~~Greasetrap~~ Dual Drain	65
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other Pool Heater	65
	Administrative Surcharge	$ 145
	Minimum Fee	$
	State Permit Surcharge Fee	$ 1
	TOTAL FEE	$ 146

* Comment: All underground piping shall be hydro tested to 25 psi

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued 8/8/18
Permit # 2018350026

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

Block 28 Lot 30 Qualification Code

Work Site Location 126 Locust Ave Hasbrouck NJ 07601

Owner in Fee: Lucinda Dellas

Tel. [redacted] e-mail

Address 126 Locust Ave Hasbrouck NJ 07601
street municipality zip code

Contractor: LGD pools Tel. (732) 604-1615

Address 211 Cleveland Dr e-mail
Toms River NJ 08753

Contractor License No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02114300

Federal Emp. ID No [redacted] FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed Pool heater

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 8-7-18
Approved by: Allen Hartel

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping			8/8	
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

with Comment

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: George Dellas

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
400,000 BTU Pool gas heater, 2 Bottom Drains

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping (1)	15
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	~~Greasetrap~~ Dual Drains	65
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other Pool Heater	65
	Administrative Surcharge	$ 145
	Minimum Fee	$
	State Permit Surcharge Fee	$ 1
	TOTAL FEE	$ 146

* Comment: All underground piping shall be hydro tested to 25 psi

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 8/8/18
Permit # 20182065

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

Block 28 Lot 30 Qualification Code

Work Site Location 126 locust Ave Hawell NJ 07731

Owner in Fee: Larissa Dellas

Tel. [redacted] e-mail

Address 126 locust Ave Hawell NJ 07731
street municipality zip code

Contractor: SELF Tel. ( )

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed In ground Pool

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1,000

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Larissa Dellas

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Wire and Bond Pool

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
2		Receptacles	
2		Switches	70
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
1		Pool Permit/with UW Lights	20
1		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	2.0	HP Motors 1/+ HP	25
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	15amp	Switch	5
1	POOL	Heater	25
		Administrative Surcharge $	
		Minimum Fee $	145
		State Permit Surcharge Fee $	2
		TOTAL FEE $	147

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 8-1-18

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 8/18/18
Permit # 20182065

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

Block 28 Lot 30 Qualification Code

Work Site Location 126 West Ave Hazlet NJ 07731

Owner in Fee: Louissa Dellis

Tel. [redacted] e-mail

Address 126 West Ave Hazlet NJ 07731
street municipality zip code

Contractor: SELF Tel. ( )

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed 1 pool pool

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1000

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Louissa Dellis

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: wire and Bond Pool

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
2		Receptacles	
2		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
1		Pool Permit/with UW Lights	25
1		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	2.0	HP Motors 1/+ HP	25
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	15amp	Switch	5
1	pool	Heater	25
		Administrative Surcharge	$
		Minimum Fee	$ 145
		State Permit Surcharge Fee	$ 2
		TOTAL FEE	$ 147

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 8-17-18
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 8/8/18

Permit # 43502
20182065

IDENTIFICATION Block 28 Lot 38 Qualification Code

Work Site Location 126 Locust Ave
Howell NJ 07731

Owner in Fee Layrissa Dellad

Address 126 Locust Ave Howell NJ 07731

Tel. [redacted]

Contractor LGD Pools

Address 211 Clearwater Dr. Forked River NJ 08731

Tel. (732) 684-1075

Lic. No. or Bldrs. Reg. No. 13VH 02144500

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:

inground pool & heater

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 $ 26,000

Construction Official

8/8/18
Date

PAYMENTS (Office Use Only)

Building	300
Electrical	#1087 145
Plumbing	145
Fire Protection	65
Elevator Devices	
Other	
DCA State Permit Fee	53
Cert. of Occupancy	
Other	Pd - 100
Total	
Check No.	#391
Cash	
Collected by	KB

(see reverse side)

U.C.C. F170 (rev. 01/04)

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

To reorder call: Allegra Marketing Print Mail (609) 390-1400

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 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 given.

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

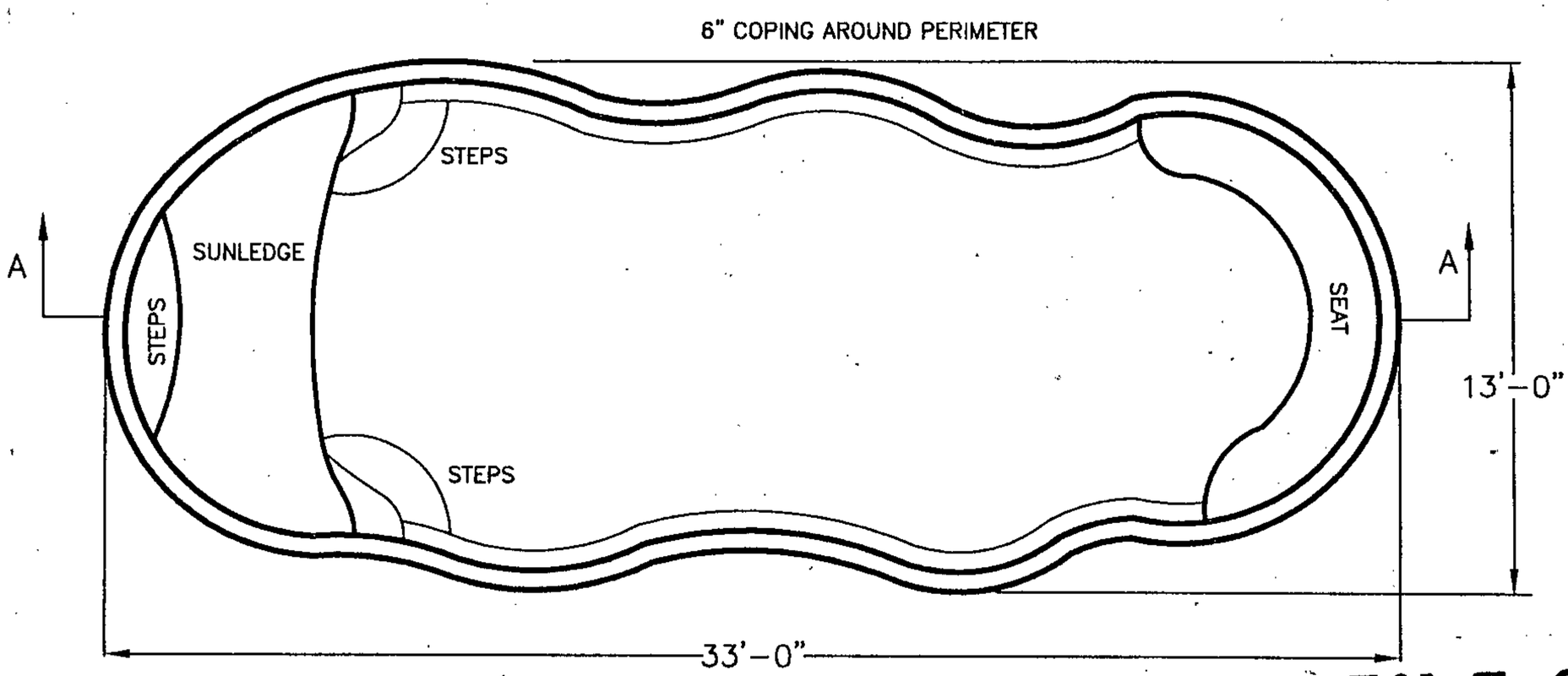
1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. Utility services, including septic.
4. 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.

☐ 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:

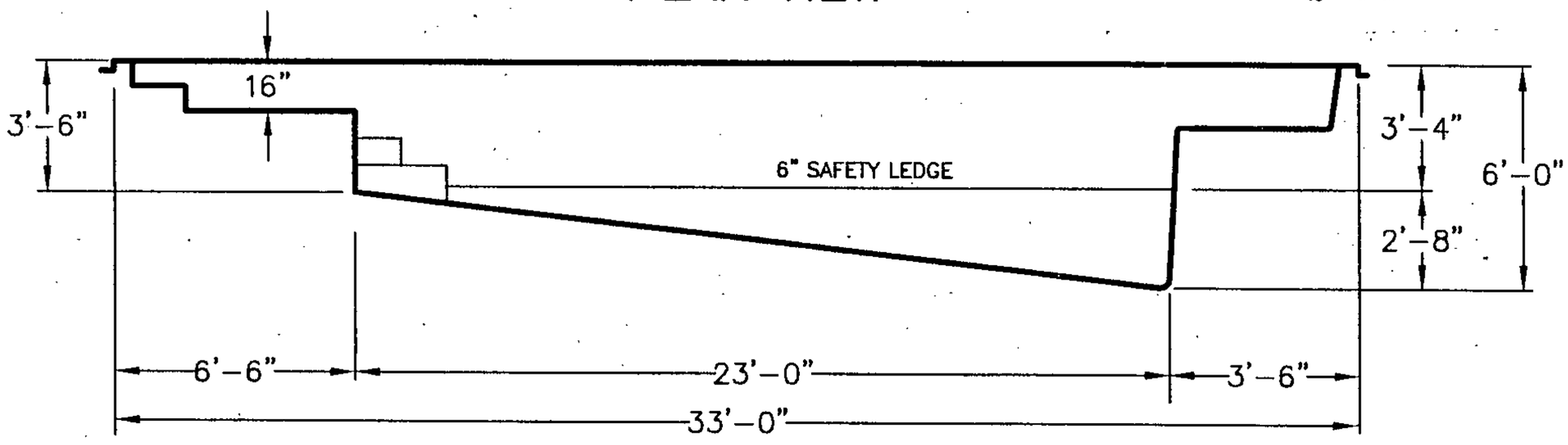
☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; 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.



PLAN VIEW

FILE COPY



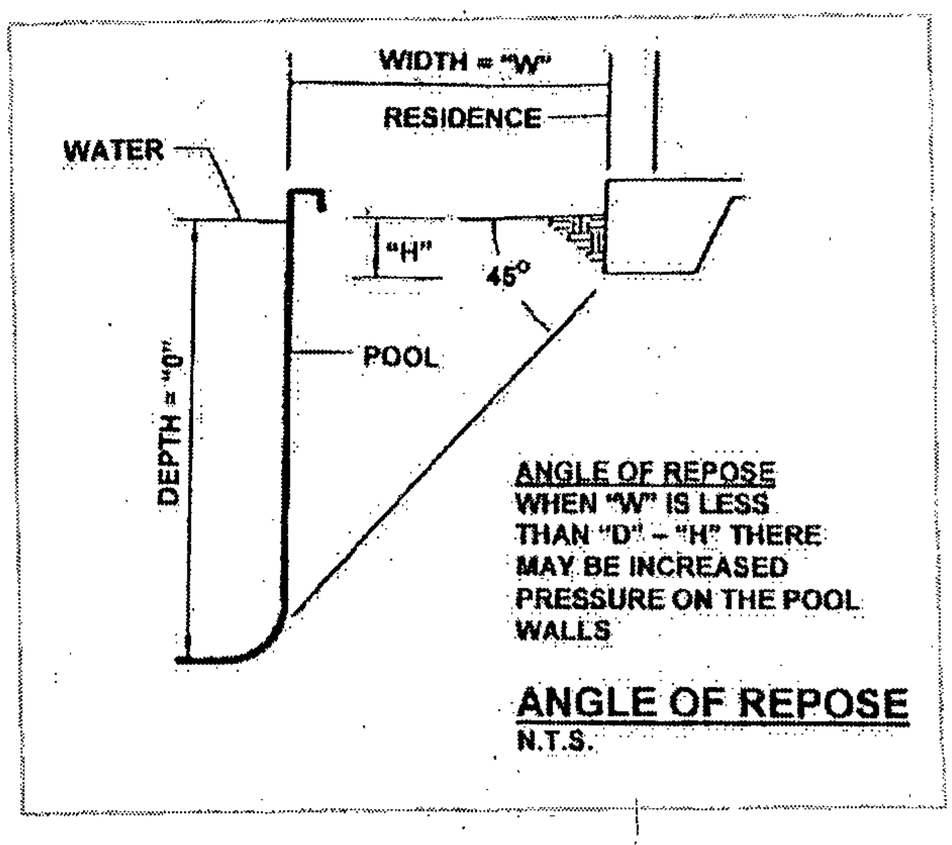
PROFILE & SECTION A-A

POOL	SIZE WIDTH x LENGTH	DEPTHS SHALLOW, DEEP	GOLLONS APPROX.	SURFACE AREA (SQ. FT.)	SQUARE FEET	PERIMETER FEET	LINEAR FEET		WEIGHT
							STEPS	SEATS	
SUNLEDGE OASIS	13'x33'	3'-6", 6'-0"	10,000	323	363	80.6'	12	12	3,000

USE OF DIVING EQUIPMENT IS PROHIBITED

1. FIBERGLASS REINFORCED PLASTIC (FRP)
   a. FIBERGLASS REINFORCED LAMINATES SHALL COMPLY WITH THE NATIONAL BUREAU OF STANDARDS PS-15-69.
   b. FLEXURE MODULUS SHALL BE 1,270.00 PSI AT 77°F
   c. FLEXURAL STRENGTH SHALL BE MIN. 21,300 PSI AT 77°F
   d. SHEAR STRENGTH SHALL BE MIN. 13,000 PSI AT 77°F
   e. ALL RESINS USED IN THE MANUFACTURE OF THE FIBERGLASS LAMINATES SHALL MEET ALL FEDERAL AND STATE CODES
   f. MINIMUM THICKNESS OF FIBERGLASS TO BE 5/16 INCHES
2. TYPE O POOL – NO DIVING EQUIPMENT TO BE INSTALLED
3. SUB BASE FOR POOL TO BE 3/8" STONE. ANY DEBRIS, PEAT, OR OTHER OBJECTIONAL SOIL CONDITIONS TO BE REMOVED AND REPLACED WITH 6" COMPACT SAND/SILT MATERIAL.
4. WHERE QUESTIONABLE, CONTRACTOR SHALL VERIFY SOIL BEARING LOADS PRIOR TO INSTALLATION OF POOL
5. CONTRACTOR SHALL VERIFY BURIED UTILITIES WITHIN SURROUNDS OF INSTALLATION AREA
6. POOL SHELLS ARE DESIGNED TO REMAIN FULL OF WATER AT ALL TIMES. CONTACT YOUR DEALER IF IT BECOMES NECESSARY TO DRAIN THE POOL.
7. THESE POOL PLANS MEET OR EXCEED THE 2015 INTERNATIONAL SWIMMING POOL AND SPA CODE WITH REGARD TO RESIDENTIAL SWIMMING POOLS AND SPAS.
8. ENTRAPMENT AVOIDANCE SHALL BE INSTALLED IN ACCORDANCE WITH ANSI/APSP/ICC-7
9. THE POOL DECK/COPING IS WITHIN 12" OF THE DESIGN WATERLINE AND AS SUCH, THE POOL DECK/COPING SATISFIES THE REQUIREMENT OF HANDHOLDS PER 2015 ISPSC SEC. 323.1
10. IN POOLS WHERE THE POINT OF FIRST SLOPE BREAK OCCURS, A ROPE NOT LESS THAN ¼" IN DIAMETER AND FLOAT ASSEMBLY SHALL BE PROVIDED NOT LESS THAN ONE FOOT AND NOT GREATER THAN TWO FEET TOWARD THE SHALLOW SIDE OF THE SLOPE BREAK (2015 ISPSC SEC. 811.1

THE FOLLOWING CODES ARE TO BE MET WHERE REQUIRED:
2015 INTERNATIONAL SWIMMING POOL AND SPA CODE
2015 INTERNATIONAL FUEL GAS CODE
2015 INTERNATIONAL MECHANICAL CODE
2015 INTERNATIONAL BUILDING CODE, NJ ED.
2015 INTERNATIONAL RESIDENTIAL CODE, NJ ED.
2014 NATIONAL ELECTRICAL CODE



NO.	DATE	DESCRIPTION	

13' X 33' SUNLEDGE OASIS

DOLPHIN INDUSTRIES
P.O. BOX 344
EGG HARBOR CITY, N.J. 08215

R.C. BURDICK, P.E., P.P., P.
CONSULTING ENGINEERS SURVEYORS
PLANNING •ENVIRONMENTAL PERMITTING
1023 OCEAN ROAD
POINT PLEASANT, NJ 08742
(732)892-5050 FAX (732)892-5888

ROBERT C. BURDICK
N.J. PROFESSIONAL ENGINEER #30929
N.J. PROFESSIONAL PLANNER #04383

DATE: 1/29/18
N.T.S.
JOB No.: 18-4173
SHEET 1 OF 1

Township of Howell

4567 Route 9 North
Howell, NJ 07731-0580

Phone: (732) 938-4500
Fax: (732) 414-3243
Web site: www.twp.howell.nj.us

Required Pool Information Packet

*Please fill in **all** information requested*

Name: Lauriesa Dellas **Date:** 7/3/18 **Block:** 28

ddress: 126 Locust Ave **Lot:** 38

Howell NJ 07731

This is to assist you in determining how to comply with the ISPSC requirements and to expedite your pool ermit. This does not interpret or take the place of the actual wording of the code or everything that the code may allow. ee attached pages of the **2015 ISPSC (*International Swimming Pool & Spa Code*)** for complete barrier requirements.

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

art 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.

art 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 horizontal 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 ¾" 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 proposed type of barrier.

*If you are using your existing fence as your required barrier, it must meet the requirements of the **International Swimming Pool & Spa Code 2015.***

I have read and understand the 2015 ISPSC building regulations attached and can attest that the existing barrier or new barrier will comply with the 2015 ISPSC code.

ase sign here: _____ Date: 7/3/18

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

CONSTRUCTION DEPARTMENT

HOMEOWNER POOL CERTIFICATION

In accordance with N.J.A.C. 5:23-2.23, no building or structure shall be used in whole or part until a form of Certificate of Occupancy shall have been issued by the Construction Official.

I certify that I am the owner of the above referenced pool being built. I further certify that the pool will not be used in whole or part until a Certificate of Approval is issued by the Construction Official. **NOTE: FINAL ENGINEERING INSPECTION AND APPROVAL IS REQUIRED IN ADDITION TO ALL BUILDING DEPARTMENT FINAL INSPECTION APPROVALS.**

Homeowner's Signature

Lavinia Pellas

Printed Name

MECHANICAL INSPECTOR
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit # 43502

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

Block 38 Lot 28 Qualification Code

Work Site Location 126 locust Ave Howell NJ 07731

Owner in Fee: Larissa Dellas

Tel. [redacted] e-mail

Address 126 locust Ave Howell NJ 07731
street municipality zip code

Contractor: LGD Pool Tel. (732) 684-1075

Address 211 Clearwater Dr e-mail
Forked River NJ 08731

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02144500

Federal Emp. ID No. [redacted] FAX: (609) 9943087

B. MECHANICAL CHARACTERISTICS

Use Group: Present: R-3, R-4 or R-5 *(circle one)* Proposed: R-3, R-4 or R-5 *(circle one)*

Heating System work: [ ] New *OR* [ ] Modification to Existing *OR* [ ] Conversion *OR* [ ] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other Poolheater 400,000BTU

Estimated Cost of Mechanical Work $ 500

C. CERTIFICATION IN LIEU OF OATH

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

Sign here:

Print name here: Georgia Dellas

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Pool heater 400,000 BTU

Gas

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire.
[ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by:
SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date:
Approved by:

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Gas Piping				
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
Other				

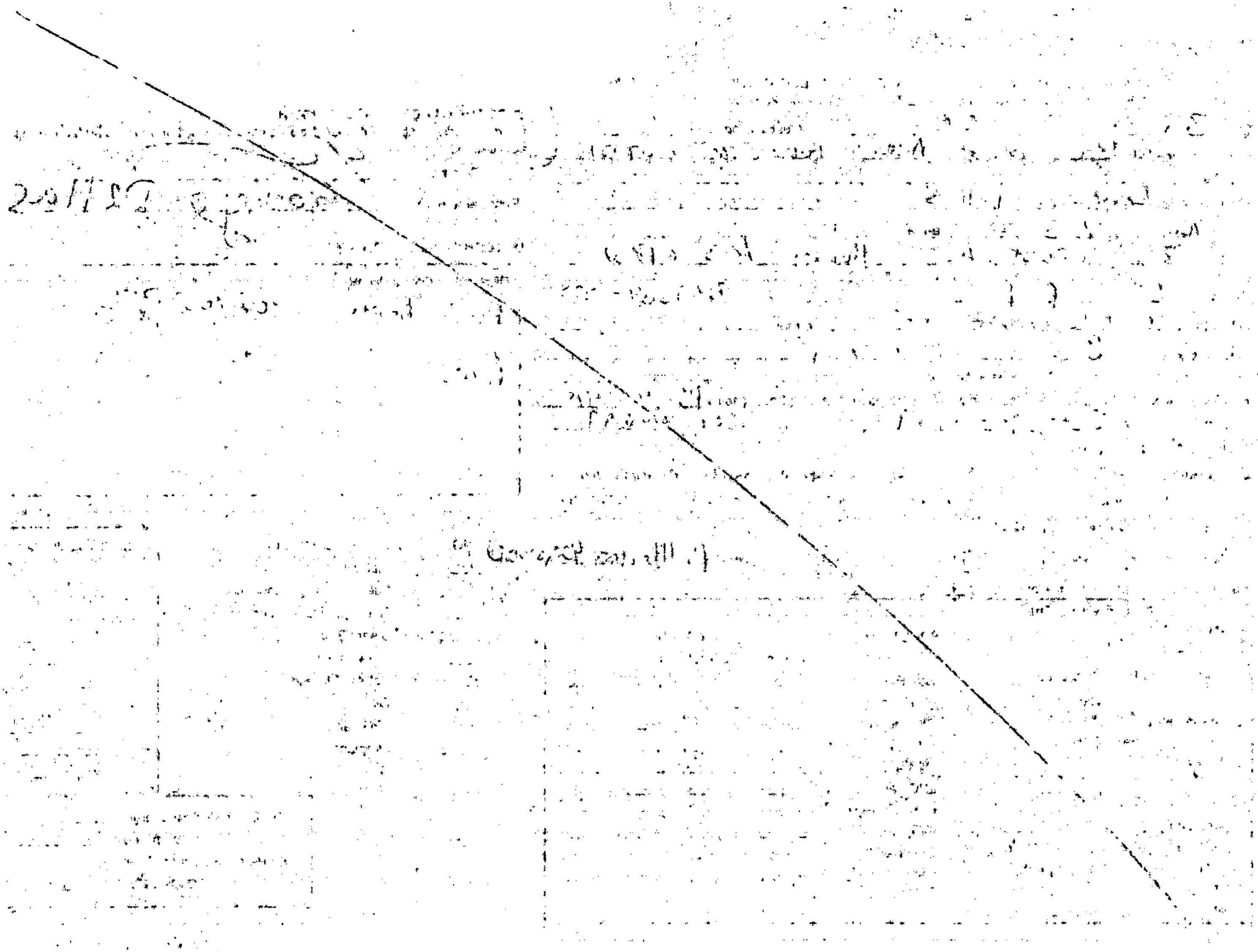
NO.	FIXTURE/EQUIPMENT
	Water Heater
	Fuel Oil Piping Connections
	Gas Piping Connections
	Steam Boiler
	Hot Water Boiler
	Hot Air Furnace
	Oil Tank
	LPG Tank
	Fireplace
	Other

FEE (Office Use Only)

$

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

For reorder call: (609) 390-1400
Allegra Marketing • Print • Mail



MECHANICAL INSPECTOR
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit # 43502

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

Block 38 Lot 28 Qualification Code

Work Site Location 126 locust Ave Howell NJ 07731

Owner in Fee: Larissa Dellas

Tel. [redacted] e-mail

Address 126 locust Ave Howell NJ 07731
street municipality zip code

Contractor: LGD Pool Tel. (732) 684-1075

Address 211 Clearwater Dr e-mail
Forked River NJ 08731

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02144500

Federal Emp. ID No. [redacted] FAX: (609) 9943887

B. MECHANICAL CHARACTERISTICS

Use Group: Present: R-3, R-4 or R-5 *(circle one)* Proposed: R-3, R-4 or R-5 *(circle one)*

Heating System work: [ ] New *OR* [ ] Modification to Existing *OR* [ ] Conversion *OR* [ ] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other Pool Heater 400,000 BTU

Estimated Cost of Mechanical Work $ 500

C. CERTIFICATION IN LIEU OF OATH

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

Sign here:

Print name here: Georgo Dellas

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Pool heater 400,000 BTU

Gas

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire.
[ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by:
SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	DATES Approval	Initial
Gas Piping				
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
Other				

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Heater	$
	Fuel Oil Piping Connections	
	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
	Hot Air Furnace	
	Oil Tank	
	LPG Tank	
	Fireplace	
	Other	
	Administrative Surcharge	$
	Minimum Fee	$
	State Permit Surcharge Fee	$
	TOTAL FEE	$

For reorder call: (609) 390-1400
Allegra Marketing • Print • Mail

MECHANICAL INSPECTOR
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit # 43502

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

Block 38 Lot 28 Qualification Code

Work Site Location 126 Locust Ave Hilton NJ 07051

Owner in Fee: Lavidsa Dallas

Tel. [redacted] e-mail

Address 126 Locust Ave Hilton NJ 07051
street municipality zip code

Contractor: LGD Pool Tel. (732) 634-1675

Address 211 Clearwater Dr e-mail
Forked River NJ 08731

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02144500

Federal Emp. ID No. [redacted] FAX: (609) 971-5881

B. MECHANICAL CHARACTERISTICS

Use Group: Present: R-3, R-4 or R-5 *(circle one)* Proposed: R-3, R-4 or R-5 *(circle one)*

Heating System work: [ ] New *OR* [ ] Modification to Existing *OR* [ ] Conversion *OR* [ ] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other Pool Heater 400,000 BTU

Estimated Cost of Mechanical Work $ 500

C. CERTIFICATION IN LIEU OF OATH

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

Sign here:

Print name here: Georgo Dallas

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Pool heater 400,000 BTU

Gas

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire.
[ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date:
Approved by:

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Gas Piping				
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
Other				

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Heater	$
	Fuel Oil Piping Connections	
	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
	Hot Air Furnace	
	Oil Tank	
	LPG Tank	
	Fireplace	
	Other	

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

For reorder call: (609) 390-1400
Allegra Marketing • Print • Mail

MECHANICAL INSPECTOR
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

4352

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

Block 31 Lot 26 Qualification Code

Work Site Location 12 [illegible] Ave [illegible]

Owner in Fee: [illegible]

Tel. ([redacted]) e-mail

Address [illegible] (street) [illegible] (municipality) [illegible] (zip code)

Contractor: LG Pool Tel. (732) 4-[illegible]

Address [illegible] e-mail

[illegible]

Contractor License No. or Builder Registration No. Exp. Date

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

Federal Emp. ID No. [redacted] FAX: (609) [illegible]

B. MECHANICAL CHARACTERISTICS

Use Group: Present: R-3, R-4 or R-5 *(circle one)* Proposed: R-3, R-4 or R-5 *(circle one)*

Heating System work: [ ] New *OR* [ ] Modification to Existing *OR* [ ] Conversion *OR* [ ] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other Pool heat 400,000 BTU

Estimated Cost of Mechanical Work $ 50

C. CERTIFICATION IN LIEU OF OATH

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

Sign here:

Print name here: George Dellas

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Pool heat 400,000 BTU

GAS

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Mechanical Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPPROVAL for CERTIFICATE

[ ] CA [ ] CCO

Date:

Approved by:

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Gas Piping				
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
Other				

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Heater	$
	Fuel Oil Piping Connections	
	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
	Hot Air Furnace	
	Oil Tank	
	LPG Tank	
	Fireplace	
	Other	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

For reorder call: (609) 390-1400
Allegra Marketing • Print • Mail

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

NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

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

L G D CONTRACTING
George Dellas
126 Lowst Ave.
Howell NJ 07731

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

02/05/2018 TO 03/31/2019
VALID

13VH02144500
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR

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	7/19/18 MB								
☐ 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.				

ZA-18-00698

RECEIVING CLERK: SM

DATE REC'D 7-17-18

LAND USE PERMIT APPLICATION

(FOR OFFICE USE ONLY)

PROJECT # P-18-0495

LAND USE # ZP-18-0087

BLOCK: 28 LOT: 38 SITE ADDRESS: 126 Locust Ave Howell NJ 07731

1. PROPERTY OWNER'S NAME: Laurissa Dellas

NAME OF PERSON RESPONSIBLE IF OWNER IS CORP. OR LLC:
Laurissa Dellas

PROPERTY ADDRESS: 126 locust Ave Howell NJ 07731

DEVELOPMENT NAME:

PHONE #: [redacted] EMAIL [redacted]

2. NAME OF APPLICANT: Laurissa Dellas
(if different from owner)

APPLICANT ADDRESS: 126 Locust Ave Howell NJ 0773[illegible]

PHONE #: [redacted] EMAIL:

3. PERSON RESPONSIBLE FOR WORK/CONTRACTOR: George Dellas
(if different from owner and/or applicant)

PHONE #: [redacted] EMAIL:

4. APPLICANT SIGNATURE: [signature] DATE: 7/3/18

FOR OFFICE USE ONLY

FEE SUMMARY: (non-refundable)

APPLICATION FEE: $ 85.00

☒ CHECK #: 381 ☐ CASH:

☐ CREDIT CARD: _____ (LAST 4 DIGITS)

BOARD APPROVAL:

☐ PLANNING BOARD ☐ ZONING BOARD

RESOLUTION #: _____ DATE: _____

PROJECT DESCRIPTION:

- ☒ IN GROUND POOL
- ☐ ACCESSORY STRUCTURE
- ☐ CONST./SALES/RESIDENTIAL TRAILER
- ☐ PATIO/DECK
- ☐ RESIDENTIAL CONSTRUCTION
- ☐ ABOVE-GROUND POOL
- ☐ BANNER/WINDFLAG
- ☐ RETAINING WALL, OVER 30" HIGH
- ☐ TREE REMOVAL
- ☐ COMMERCIAL CONSTRUCTION
- ☒ FENCE: HEIGHT 52"
  - TYPE: Aluminum
- ☐ SIGN: ILLUMINATED
- ☐ WELL
- ☐ GENERATOR
- ☐ OTHER

TYPE OF RES./COMM.CONSTRUCTION

LAND USE REVIEW:
DATE REVIEWED: 7/18/18 DATE REJECTED: DATE APPROVED: 7/18/18 INITIALS: MH

RESIDENTIAL OR COMMERICAL CONSTRUCTION

ALL APPLICABLE INFORMATION MUST BE FILLED OUT

USES: Principal Residential swimming pool
Accessory _____
New Construction _____ Existing Structure _____
Interior Remodeling _____

DESCRIPTION OF LOT:
Frontage 160.89 feet Depth 391.26 feet
Total Lot Area _____ square feet

On an Improved Street: Yes ☐ - No ☐ Corner Lot: Yes ☐ - No ☒

Septic ☑ City Sewer ☐ Well ☑ City Water ☐

PRINCIPAL STRUCTURES (IF BEING MODIFIED):
Change Proposed: _____
Setback from Right of Way: _____ feet
(and _____ feet if corner lot)
Sideyard Clearances: _____ feet & _____ feet
Rearyard Clearances: _____ feet

ADDITION TO PRINCIPAL STRUCTURE INFORMATION (IF PROPOSED):
Height: _____ feet to highest point
Length: _____ feet Width: _____ feet
Sideyard Clearances: _____ feet & _____ feet
Rearyard Clearances: _____ feet

ACCESSORY STRUCTURES (IF PROPOSED):
Type: fiberglass
Height: 5'4 feet to highest point
Length: 33 feet Width: 13 feet
Sideyard Clearances: 13 feet & _____ feet
Rearyard Clearances: 157.9 feet

DECK/PATIO:
Height: _____ At grade: _____
Material Construction (pavers, wood, etc.): _____
Sideyard Clearances: _____ feet & _____ feet
Rearyard Clearances: _____ feet

SURFACE COVERAGE:
Percentage of Lot Covered by Buildings: _____%
Percentage of Lot Covered by Other Impervious Surfaces: _____%
Total Percentage of Lot Coverage: _____%

OFFICE USE ONLY

DATE REVIEWED: 7/18/18 DATE REJECTED: _____ DATE APPROVED: 7/18/18 INITIALS: MH

DATE REVISED: _____ _____ _____ _____

_____ _____ _____ _____

OUTSIDE AGENCY OR OTHER APPROVALS REQUIRED:

☐ MONMOUTH COUNTY BOARD OF HEALTH ☐ BOARD OF ADJUSTMENT ☐ PLANNING BOARD ☐ HOME OWNERS ASSOC.

OUTSIDE AGENCY OR OTHER APPROVALS RECEIVED:

☐ MONMOUTH COUNTY BOARD OF HEALTH ☐ BOARD OF ADJUSTMENT ☐ PLANNING BOARD ☐ HOME OWNERS ASSOC.

DATE:	COMMENTS/ CONDITIONS:	INITIALS:
	Approved for inground pool & spa per plan & application. Any	MH
7/18/18	changes to this plan or extensions of concrete must	
	be reviewed by this office.	

Department of Community Development

P.O. Box 580

Howell NJ 07731

(732) 938-4500

Receipt

Payment Date 7/17/2018

Transaction # PMT-18-10990

Receipt # R-18-2459

Issued To DELLAS, LAURISSA

Description
ZA-18-00698
28/38/ 126 LOCUST AVENUE
DELLAS, LAURISSA
In-Ground Pool

Date Printed 7/17/2018

Check Number 381

Cash	$0.00
Check	$85.00
Charge	$0.00
Total Paid	$85.00

Howell Township
P.O. Box 580
4567 Route 9 N.
Howell, NJ 07731-0580
(732) 938-4500

Date Issued:	7/18/2018
Application Number:	ZA-18-00698
Application Date:	7/17/2018
Project Number:	P-18-0495
Permit Number:	ZP-18-00687
Fee:	$85.00 CHK 381

Land Use Certificate

Worksite Location: **126 LOCUST AVENUE**
Howell Township, NJ 07731

Owner: **DELLAS, LAURISSA**
Address: **126 LOCUST AVE**
HOWELL, NJ 07731

Applicant: **DELLAS, LAURISSA**
Address: **126 LOCUST AVE**
HOWELL, NJ 07731

Block: **28** Lot: **38** Qualifier: _____ Zone: **ARE 3**

This Certifies that an application for the issuance of a Land Use Certificate has been examined.

Present Use: **Residential**

☐ Non Conforming Use ☐ Non Conforming Structure

Proposed Use: **In-Ground Pool**

Work Description:
In-Ground Pool -

Decision Comments:
Approved for in-ground pool and spa per plan and application. Any changes to this plan or extensions of concrete must be reviewed by this office.

Application Approved Date: 7/18/2018

Upon review it was determined that the Land Use Certificate:

☑ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Approved with Conditions
☐ Valid Nonconforming Use/Structure is established by
☐ Zoning Board of Adjustment ☐ Zoning Officer

Matthew Howard, Director of Land Use — 7/18/2018 Date

Land Use Certificate

FILE COPY

LIFE COSA

R.C. BURDICK, P.E. P.P. P.C.

1023 OCEAN RD. PT. PLEASANT, N.J. 08742
PHONE 732-892-5050
FAX 732-892-5888

LOT COVERAGE CALCULATIONS
126 LOCUST AVENUE
LOT 38, BLOCK 28
TOWNSHIP OF HOWELL
MONMOUTH COUNTY, NEW JERSEY
JULY 11, 2018
PROJECT NO. 18-7186

LOT AREA	34,597 +/- SF	
HOME	1,096 +/- SF	3.2 %
GARAGE	578 +/- SF	
SHEDS	241 +/- SF	
TENT	121 +/- SF	
EXIST. BUILDING COVERAGE	2,036 +/- SF	5.9%
EXISTING BUILDINGS	2,036 +/- SF	
FRONT STEPS & WALLS	4,189 +/- SF	
DRIVEWAY	2,196 +/- SF	
FRONT & SIDE PAVER WALKS	415 +/- SF	
REAR PAVER PATIO	217 +/- SF	
ABOVE GROUND POOL	264 +/- SF	
POOL DECK	121 +/- SF	
POOL EQUIPMENT	4 +/- SF	
EXIST IMPERVIOUS COVERAGE	9,442 +/- SF	27.3%
PROPOSED POOL	307 +/- SF	
PROPOSED SPA	50 +/- SF	
PROPOSED CONCRETE PATIO	1,532 +/- SF	
PROPOSED EQUIPMENT PAD	18 +/- SF	
TOTAL PROPOSED IMPERVIOUS	1,907+/- SF	5.5%
ABOVE GROUND POOL TO BE REMOVED	-264 +/- SF	
POOL DECK & EQUIP. TO BE REMOVED	-125 +/- SF	
TENT TO BE REMOVED	-121 +/- SF	
TOTAL IMPERVIOUS COVERAGE	10,839 +/- SF	31.3%

Robert C. Burdick NJPE 30929

SOIL EROSION AND SEDIMENTATION CONTROL NOTES

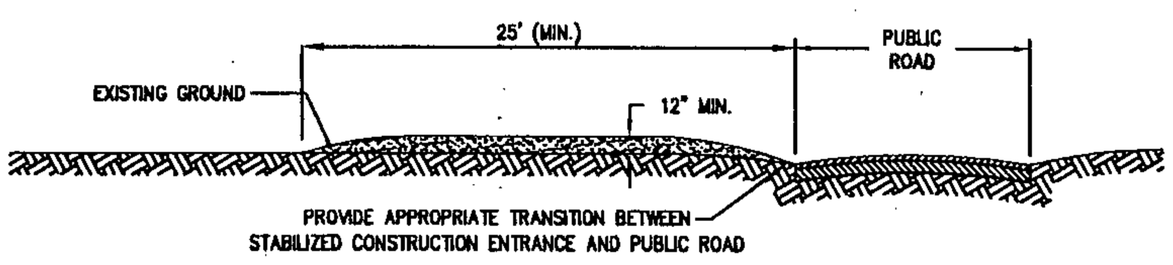
1. THE FREEHOLD SOIL CONSERVATION DISTRICT SHALL BE NOTIFIED FORTY-EIGHT (48) HOURS IN ADVANCE OF ANY SOIL DISTURBING ACTIVITY.
2. ALL SOIL EROSION AND SEDIMENT CONTROL PRACTICES ARE TO BE INSTALLED PRIOR TO SOIL DISTURBANCE, OR IN THEIR PROPER SEQUENCE, AND MAINTAINED UNTIL PERMANENT PROTECTION IS ESTABLISHED.
3. ANY CHANGES TO THE CERTIFIED SOIL EROSION AND SEDIMENT CONTROL PLANS WILL REQUIRE THE SUBMISSION OF REVISED SOIL EROSION AND SEDIMENT CONTROL PLANS TO THE DISTRICT FOR RECERTIFICATION. THE REVISED PLANS MUST MEET ALL CURRENT STATE SOIL EROSION AND SEDIMENT CONTROL STANDARDS.
4. IN THAT N.J.S.A. 4:24-39 et Seq. REQUIRES THAT NO CERTIFICATE OF OCCUPANCY BE ISSUED BEFORE THE DISTRICT DETERMINES THAT A PROJECT OR PORTION THEREOF IS IN FULL COMPLIANCE WITH THE CERTIFIED PLAN AND STANDARDS FOR SOIL EROSION AND SEDIMENT CONTROL IN NEW JERSEY AND A REPORT OF COMPLIANCE HAS BEEN ISSUED. UPON WRITTEN REQUEST FROM THE APPLICANT, THE DISTRICT MAY ISSUE A REPORT OF COMPLIANCE WITH CONDITIONS ON A LOT-BY-LOT OR SECTION-BY-SECTION BASIS, PROVIDED THAT THE PROJECT OR PORTION THEREOF IS IN SATISFACTORY COMPLIANCE WITH THE SEQUENCE OF DEVELOPMENT AND TEMPORARY MEASURES FOR SOIL EROSION AND SEDIMENT CONTROL HAVE BEEN IMPLEMENTED, INCLUDING PROVISIONS FOR STABILIZATION AND SITE WORK.
5. ANY DISTURBED AREAS THAT WILL BE LEFT EXPOSED MORE THAN SIXTY (60) DAYS, AND NOT SUBJECT TO CONSTRUCTION TRAFFIC, WILL IMMEDIATELY RECEIVE A TEMPORARY SEEDING. IF THE SEASON PREVENTS THE ESTABLISHMENT OF TEMPORARY COVER, THE DISTURBED AREAS WILL BE MULCHED WITH STRAW, OR EQUIVALENT MATERIAL, AT A RATE OF 2 - 2 1/2 TONS PER ACRE, ACCORDING TO THE STANDARD FOR STABILIZATION WITH MULCH ONLY.
6. IMMEDIATELY FOLLOWING INITIAL DISTURBANCE OR ROUGH GRADING, ALL CRITICAL AREAS SUBJECT TO EROSION (I.E. SOIL STOCKPILES, STEEP SLOPES, AND ROADWAY EMBANKMENTS) WILL RECEIVE TEMPORARY SEEDING INCOMBINATION WITH STRAW MULCH OR A SUITABLE EQUIVALENT, AND A MULCH ANCHOR, IN ACCORDANCE WITH STATE STANDARDS.
7. A SUB-BASE COURSE WILL BE APPLIED IMMEDIATELY FOLLOWING ROUGH GRADING AND INSTALLATION OF IMPROVEMENTS TO STABILIZE STREETS, ROADS, DRIVEWAYS, AND PARKING AREAS. IN AREAS WHERE NO UTILITIES ARE PRESENT, THE SUB-BASE SHALL BE INSTALLED WITHIN FIFTEEN (15) DAYS OF THE PRELIMINARY GRADING.
8. THE STANDARD FOR STABILIZED CONSTRUCTION ACCESS REQUIRES THE INSTALLATION OF A PAD OF CLEAN CRUSHED STONE AT POINTS WHERE TRAFFIC WILL BE ACCESSING THE CONSTRUCTION SITE. AFTER INTERIOR ROADWAYS ARE PAVED, INDIVIDUAL LOTS REQUIRE A STABILIZED CONSTRUCTION ENTRANCE CONSISTING OF ONE TO TWO INCH (1"-2") STONE FOR A MINIMUM LENGTH OF TEN FEET (10') EQUAL TO THE LOT ENTRANCE WIDTH. ALL OTHER ACCESS POINTS SHALL BE BLOCKED OFF.
9. ALL SOIL WASHED, DROPPED, SPILLED, OR TRACKED OUTSIDE THE LIMIT OF DISTURBANCE OR ONTO PUBLIC RIGHTS-OF-WAY WILL BE REMOVED IMMEDIATELY.
10. PERMANENT VEGETATION TO BE SEEDED OR SODDED ON ALL EXPOSED AREAS WITHIN TEN (10) DAYS AFTER FINAL GRADING.
11. AT THE TIME THAT SITE PREPARATION FOR PERMANENT VEGETATIVE STABILIZATION IS GOING TO BE ACCOMPLISHED, ANY SOIL THAT WILL NOT PROVIDE A SUITABLE ENVIRONMENT TO SUPPORT ADEQUATE VEGETATIVE GROUND COVER SHALL BE REMOVED OR TREATED IN SUCH A WAY THAT IT WILL PERMANENTLY ADJUST THE SOIL CONDITIONS AND RENDER IT SUITABLE FOR VEGETATIVE GROUND COVER. IF THE REMOVAL OR TREATMENT OF THE SOIL WILL NOT PROVIDE SUITABLE CONDITIONS, NON-VEGETATIVE MEANS OF PERMANENT GROUND STABILIZATION WILL HAVE TO BE EMPLOYED.
12. IN ACCORDANCE WITH THE STANDARD FOR MANAGEMENT OF HIGH ACID PRODUCING SOILS, ANY SOIL HAVING A pH OF 4 OR LESS OR CONTAINING IRON SULFIDES SHALL BE ULTIMATELY PLACED OR BURIED WITH LIMESTONE APPLIED AT THE RATE OF 10 TONS/ACRE, (OR 450 LBS/1,000 SQ FT OF SURFACE AREA) AND COVERED WITH A MINIMUM OF 12" OF SETTLED SOIL WITH A PH OF 5 OR MORE, OR 24" WHERE TREES OR SHRUBS ARE TO BE PLANTED.
13. CONDUIT OUTLET PROTECTION MUST BE INSTALLED AT ALL REQUIRED OUTFALLS PRIOR TO THE DRAINAGE SYSTEM BECOMING OPERATIONAL.
14. UNFILTERED DEWATERING IS NOT PERMITTED. NECESSARY PRECAUTIONS MUST BE TAKEN DURING ALL DEWATERING OPERATIONS TO MINIMIZE SEDIMENT TRANSFER. ANY DEWATERING METHODS USED MUST BE IN ACCORDANCE WITH STANDARD FOR DEWATERING.
15. SHOULD THE CONTROL OF DUST AT THE SITE BE NECESSARY, THE SITE WILL BE SPRINKLED UNTIL THE SURFACE IS WET, TEMPORARY VEGETATIVE COVER SHALL BE ESTABLISHED OR MULCH SHALL BE APPLIED AS REQUIRED BY THE STANDARD FOR DUST CONTROL.
16. STOCKPILE AND STAGING LOCATIONS ESTABLISHED IN THE FIELD SHALL BE PLACED WITHIN THE LIMIT OF DISTURBANCE ACCORDING TO THE CERTIFIED PLAN. STAGING AREAS AND STOCKPILES NOT LOCATED WITHIN THE LIMIT OF DISTURBANCE WILL REQUIRE CERTIFICATION OF A REVISED SOIL EROSION AND SEDIMENT CONTROL PLAN. CERTIFICATION OF A NEW SOIL EROSION AND SEDIMENT CONTROL PLAN MAY BE REQUIRED FOR THESE ACTIVITIES IF AN AREA GREATER THAN 5,000 SQUARE FEET IS DISTURBED.
17. ALL SOIL STOCKPILES ARE TO BE TEMPORARILY STABILIZED IN ACCORDANCE WITH SOIL EROSION AND SEDIMENT CONTROL NOTE #6.
18. THE PROPERTY OWNER SHALL BE RESPONSIBLE FOR ANY EROSION OR SEDIMENTATION THAT MAY OCCUR BELOW STORMWATER OUTFALLS OR OFFSITE AS A RESULT OF CONSTRUCTION OF THE PROJECT.

SEEDING NOTES

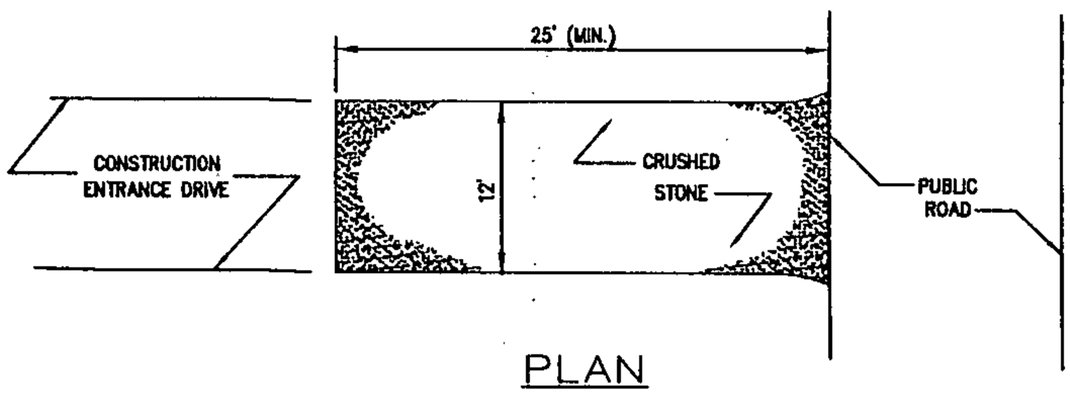
1. ALL AREAS DISTURBED BY CONSTRUCTION SHALL BE FINE GRADED AND SEEDED. TEMPORARY AND PERMANENT SEEDING MIXTURES SHALL CONSIST OF THE FOLLOWING MIXTURE OR APPROVED EQUAL:

   TEMPORARY SEEDING
   PERENNIAL RYEGRASS @ 1.0 LB. PER 1000 S.F.

   PERMANENT SEEDING
   HARD FESCURE AND/OR STRONG CREEPING RED FESCUE @ 4.0 LBS PER 1000 S.F.
   PERENNIAL REYGRASS @ 1.0 LB PER 1000 S.F.
   KENTUCKY BLUEGRASS @ 1.0 LB PER 1000 S.F.
2. ALL SEEDING AND MULCHING SHALL BE PREFORMED IN ACCORDANCE WITH THE NEW JERSEY STANDARS FOR SOIL EROSION AND SEDIMENT CONTROL.
3. SEED GERMINATION SHALL BE TESTED WITHIN 12 MONTHS OF PLANTING DATE. ADDITIONAL SEEDING SHALL BE PERFORMED IF LESS THAT 50% OF SEED GERMINATION RATES RESULT.
4. TEMPORARY SEEDING TO BE MAINTAINED UNTIL DISTURBED AREAS ARE PERMANENTLY STABLIZED WITH PERMANENT SEEDING. IF ANY SERIOUS EROSION PROBLEMS OCCUR, THE ERODED AREAS SHALL BE REPAIRED WITH A MULCH AS INDICATED IN NOTE NO. 5.
5. MULCH SHALL BE UNROTTED SMALL GRAIN STRAW APPLIED AT A RATE OF 3 TONS PER ACRE SPREAD UNIFORMLY AT 70 TO 90 POUNDS PER 1000 SF ANCHORED IN ACCORDANCE WITH NEW JERSEY SOIL EROSION AND SEDIMENT CONTROL STANDARDS.
6. LIMESTONE AND FERTILIZER TO BE APPLIED ACCORDING TO SOIL TEST RECOMMENDATIONS. FERTILIZER FOR THE ESTABLISHMENT OF TEMPORARY AND PERMANENT VEGETATIVE COVER SHALL BE 10-20-10 WITH 50% WATER INSOLUBLE NITROGEN APPLIED AT A RATE OF 11 POUNDS PER 1000 SF OR AS DETERMINED BY A SOIL TEST. LIMESTONE FOR TEMPORARY SEEDING SHALL BE APPLIED AT A RATE OF 2 TONS PER ACRE UNLESS SOIL TESTING INDICATED OTHERWISE.
7. IF THE SEASON PREVENTS THE ESTABLISHMENT OF TEMPORARY OR PERMANENT SEEDING, EXPOSED AREAS ARE TO BE STABLIZED WITH MULCH AS INDICATED IN NOTE NO. 5.



PROFILE



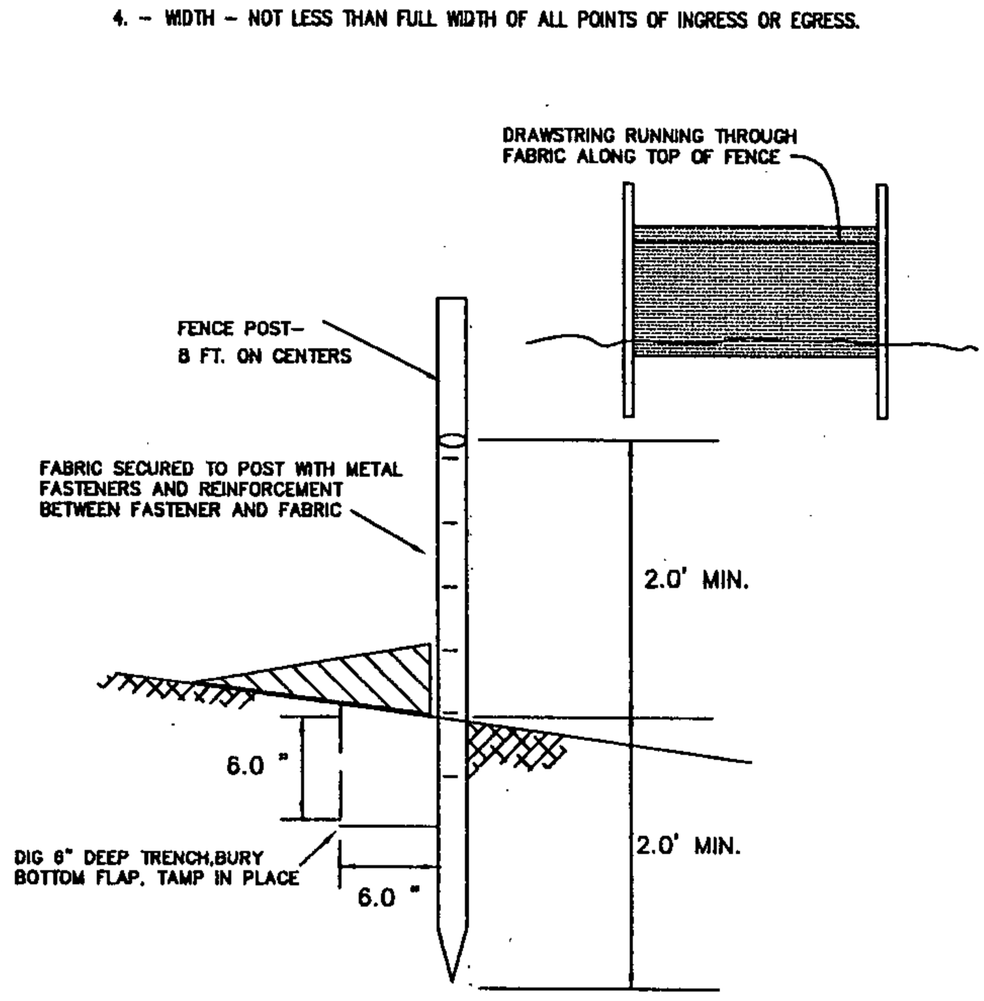
PLAN

STABILIZED CONSTRUCTION ENTRANCE

N.T.S.

CONSTRUCTION SPECIFICATIONS

1. - STONE SIZE - USE ASTM C-33,SIZES No. 2 OR 3. USED CRUSHED STONE.
2. - LENGTH - AS EFFECTIVE, BUT NOT LESS THAN 50 FEET.
3. - THICKNESS - NOT LESS THAN 8 INCHES.
4. - WIDTH - NOT LESS THAN FULL WIDTH OF ALL POINTS OF INGRESS OR EGRESS.



SILT FENCE & INSTALLATION DETAIL

N.T.S.

NO.	DATE	DESCRIPTION	BY

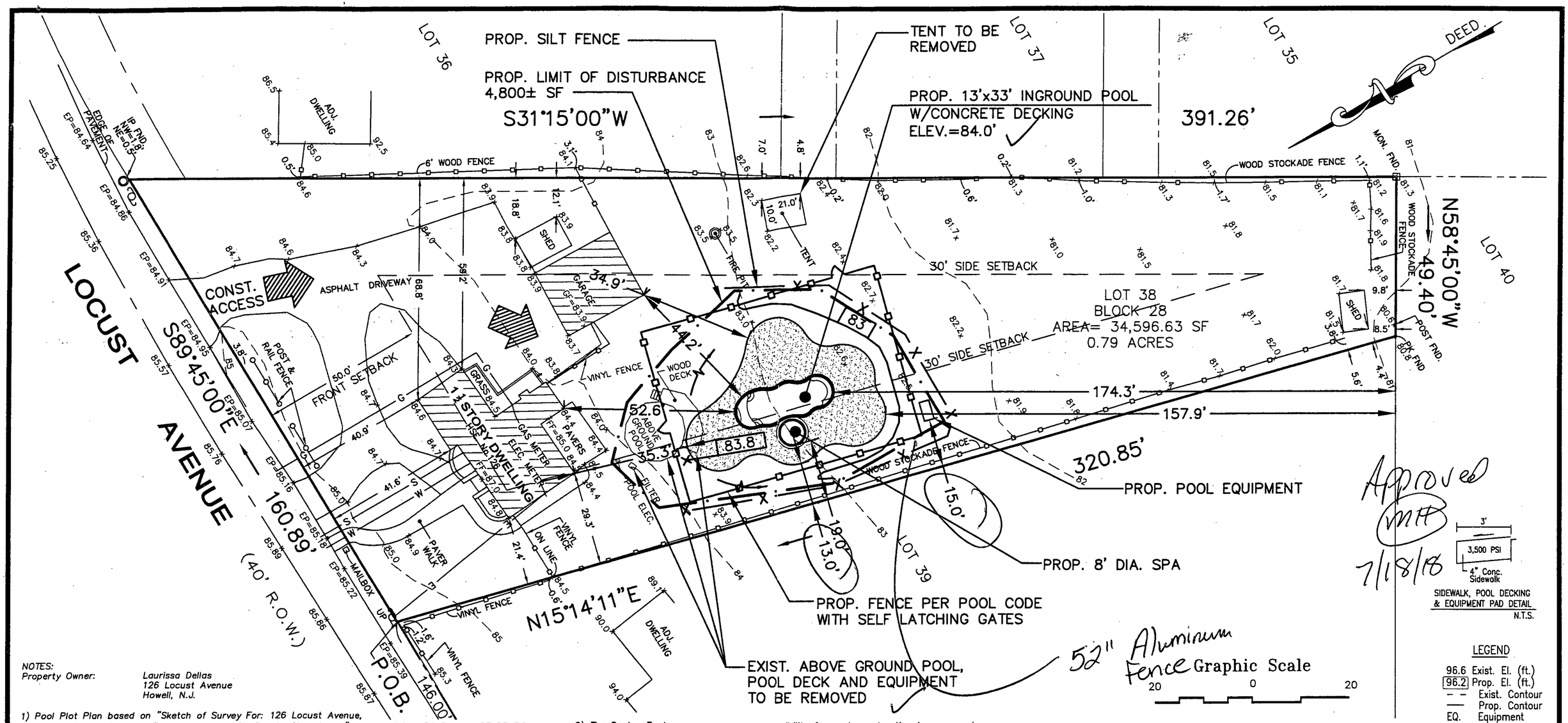
SOIL EROSION & SEDIMENT CONTROL NOTES & DETAILS

LOT 38, BLOCK 28
HOWELL TOWNSHIP
MONMOUTH COUNTY, NEW JERSEY

R.C. BURDICK, P.E. P.P. P.C.
CONSULTING ENGINEERS • SURVEYORS
PLANNING • ENVIRONMENTAL PERMITTING
1023 OCEAN ROAD
POINT PLEASANT, NJ 08742
(732)892-5050 FAX (732)892-5888

STATE OF NEW JERSEY
ROBERT C. BURDICK
PROFESSIONAL ENGINEER #30929
PROFESSIONAL PLANNER #04383

DATE: 7/11/18
SCALE: NTS
JOB No.: 18-7186
SHEET 1 OF 1



Approved
MA
7/18/18

3'
3,500 PSI
4" Conc. Sidewalk
SIDEWALK, POOL DECKING & EQUIPMENT PAD DETAIL
N.T.S.

LEGEND

96.6	Exist. El. (ft.)
96.2	Prop. El. (ft.)
- -	Exist. Contour
——	Prop. Contour
EQ.	Equipment

NOTES:
Property Owner: Laurissa Dellas
126 Locust Avenue
Howell, N.J.

1) Pool Plot Plan based on "Sketch of Survey For: 126 Locust Avenue, Lot 38 in Block 28 Howell Township, Monmouth County, New Jersey", prepared by RC Burdick PE PP PC performed by Mr. Stan Hans Jr., NJPLS No. 29182 performed 1/25/2018.

2) Contractor to verify location of all utilities prior to start of construction. Utilities shown are per visual observation of physical features and/or markouts and their location is approximate. The undersigned professional are not responsible for the presence of underground utilities or structures if they are not visible or otherwise disclosed by any of the above data. Pool contractor shall utilize the services of CALL DIG (1-800-272-1000) to accurately locate utilities.

3) Pool to be secured by min. 4' fence with pedestrian access gates having self latching and closing devices. Devices are to be 54" above grade, or 3" below top of barrier where the device is on the pool side of the gate and there are no openings greater than 1/2" within 18" of the device. Gates to open outwards away from the pool. Fence and all other construction shall comply with the International Building Code and the International Residential Code, New Jersey Edition, including ANSI/NSPI-5 Standards for Residential In Ground Swimming Pools, current editions. Where adjacent fences are used to secure the pool, the applicant shall take full responsibility for repair or replacement should they be damaged or removed and shall seek a variation for the fence where required.

4) All electrical equipment must be located at least 10' from the swimming pool.

5) The contractor shall protect all existing structures from damage and/or failure by acceptable methods as may be required per OSHA and other regulatory agencies. The Design Engineer accepts no responsibility for the safety or adequacy of the existing structures.

6) The Design Engineer assumes no responsibility for pool construction in easements or required setbacks areas not shown on the survey provided to the Design Engineer. The pool contractor and property owner shall verify the pool layout and all dimensions prior to construction.

7) Property owner responsible for all environmental permits. The determination of the presence or absence of wetlands, stream encroachment lines, buffer lines or easements not shown on the survey supplied by the Property Owner was outside of the scope of this project.

8) By use of this Plan for the purpose of obtaining a Permit to construct, the Property Owner and Pool Company agree to the proposed pool location, concrete, operating equipment and grading associated with the proposed swimming pool.

9) Minimum 1.0%, Max. 4:1 grading provided in area that is to be disturbed by pool construction. Concrete areas to be minimum 0.5% grade.

10) Pool filter discharge to be by flexible hose to roadway or filter to be cartridge filter with no discharge.

11) Soils from pool excavation shall remain on site within the pool area. Any excess soils shall be removed from the site and the township.

No.	Date	Description	By

Lot 38 Block 28
Township of Howell
Monmouth County, NJ

Pool Plot Plan
126 Locust Avenue

DATE: 7/10/2018
SCALE: 1" = 30'
JOB No.: 18-7186
SHEET 1 OF 1

R.C. BURDICK, P.E., P.P., P.C.
CONSULTING ENGINEERS SURVEYORS
PLANNING ENVIRONMENTAL PERMITTING
1023 OCEAN ROAD
POINT PLEASANT, NJ 08742
(732)892-5050 FAX (732)892-5888

ROBERT C. BURDICK
PROFESSIONAL ENGINEER NJ 049547
PROFESSIONAL ENGINEER PA 030929
PROFESSIONAL PLANNER NJ 05883

RECEIVING CLERK: AM

DATE REC'D: 7-17-18

ENGINEERING PERMIT APPLICATION

(FOR OFFICE USE ONLY)

PROJECT #: P-18-0495 ~~0495~~

ENGINEERING #: POOL-18-~~0495~~

BLOCK: 28 LOT: 38 SITE ADDRESS: 126 locust Ave Howell NJ 07731

1. PROPERTY OWNER'S NAME: Lawissa Dellas

NAME OF PERSON RESPONSIBLE IF OWNER IS CORP. OR LLC:
Lawissa Dellas

PROPERTY ADDRESS: 126 locust Ave
Howell NJ 07731

DEVELOPMENT NAME:

PHONE #: [redacted] EMAIL:

2. NAME OF APPLICANT: Lawissa Dellas
(if different from owner)

APPLICANT ADDRESS: 126 locust Ave Howell NJ 07731

PHONE #: [redacted] EMAIL:

3. PERSON RESPONSIBLE FOR WORK/CONTRACTOR: LGD Pools
(if different from owner and/or applicant)

PHONE #: (732) 684-1015 EMAIL:

4. APPLICANT SIGNATURE: [signature] DATE: 7/3/18

FOR OFFICE USE ONLY

FEE SUMMARY: (non-refundable)

APPLICATION FEE: $ 350.00

INSPECTION FEE: $ _____

TOTAL: $ _____

☒ CHECK #: 380 ☐ CASH: _____

☐ CREDIT CARD: _____ (LAST 4 DIGITS)

FEE SUMMARY: (Refundable)

RESTORATION GUARANTEE: $ _____

PERFORMANCE BOND: $ _____

IF PERFORMANCE BOND IS POSTED, IS IT PART OF A YEARLY BOND _____

☐ CHECK #: _____ ☐ CASH: _____

☐ CREDIT CARD: _____ (LAST 4 DIGITS)

PROJECT DESCRIPTION:

☒ ~~IN-~~GROUND POOL
☐ RETAINING WALL, OVER 30" HIGH
☐ CONST./SALES/RESIDENTIAL TRAILER
☐ RESIDENTIAL CONSTRUCTION
☐ SOIL REMOVAL / FILL
☐ ROAD OPENING / EXCAVATION
☐ OTHER _____
☐ COMMERCIAL CONSTRUCTION

TYPE OF RES./COMM. CONSTRUCTION: _____

ENGINEERING REVIEW:
DATE RECEIVED: 7/19/18 DATE REJECTED: 7/24/18 DATE APPROVED: 7/31/18 INITIALS: RA

Resubmitted 7/31/18

OFFICE USE ONLY

DATE REVIEWED: _____ DATE REJECTED: _____ DATE APPROVED: _____ INITIALS: _____

DATE REVISED: _____ _____ _____ _____

_____ _____ _____ _____

OUTSIDE AGENCY OR OTHER <u>APPROVALS REQUIRED</u>:

☐ MONMOUTH COUNTY BOARD OF HEALTH ☐ MONMOUTH COUNTY ENGINEER ☐ FREEHOLD SOILS ☐ NJDEP ☐ NJDOT

☐ UTILITY CO. _____ ☐ HOWELL POLICE ☐ BOARD OF ADJUSTMENT ☐ PLANNING BOARD

OUTSIDE AGENCY OR OTHER <u>APPROVALS RECEIVED</u>:

☐ MONMOUTH COUNTY BOARD OF HEALTH ☐ MONMOUTH COUNTY ENGINEER ☐ FREEHOLD SOILS ☐ NJDEP ☐ NJDOT

☐ UTILITY CO. _____ ☐ HOWELL POLICE ☐ BOARD OF ADJUSTMENT ☐ PLANNING BOARD

DATE:	COMMENTS/ CONDITIONS:	INITIALS:

Howell Township

Division of Engineering

4567 Route 9 North, 2nd Floor

732-938-4500 X2300

Receipt

Payment Date	7/17/2018
Transaction #	PMT-18-10991
Receipt #	R-18-2460

Issued To

Description

DELLAS
128 LOCUST AVE
B 28 - L38
PLAN REVIEW

Date Printed 7/17/2018

Check Number 380

Cash	$0.00
Check	$350.00
Charge	$0.00
Total Paid	$350.00

Raisa Shekhter

From: Raisa Shekhter
Sent: Tuesday, July 24, 2018 2:05 PM
To: [redacted]
Subject: Emailing: BLK28 - L38 Denial memo w.att.-2018-07-24
Attachments: BLK28 - L38 Denial memo w.att.-2018-07-24.pdf

Dear Sir,
I reviewed submitted Pool Plan for the above referenced property and offer the following comments:

Minor corrections must be done as per attached - Checklist must be signed and sealed and the graphic scale on the Pool Plan must be changed to correct scale 1"= 30'.
Please revised accordingly and send two(2)revised hard copies of Checklist and Pool Plan to my attention so I can finalize my approval.

Thank you,
Raisa Shekhter
Division of Engineering
Township of Howell

Your message is ready to be sent with the following file or link attachments:

BLK28 - L38 Denial memo w.att.-2018-07-24

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.

Item No.	In-ground Swimming Pool - Additional Items Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	No change in grade shall take place within five feet (5') of the property line.	✓					
2	In-ground pool coping elevation and all dimensions from surrounding walkways to buildings, setbacks, other structures, etc.	✓					
3	Pool equipment shall be placed at least ten feet (10') from any property line.	✓					
4	Waterline shall be at least ten feet (10') from any property line unless a walkway, patio, deck, etc. is installed adjacent to the pool, then the ten foot (10') setback should be measured from the furthest edge of that item away from the waterline.	✓					
5	Pool shall be placed at least six feet (6') from the residential dwelling. Provide cross-section drawings of the pool and any adjacent structure if the pool is within twelve feet (12') of that structure.	✓					
6	Location of pool backwash discharge location graphically depicted on the plan.	✓					

Item No.	Retaining Wall - Additional Items Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	Proposed grades on top and bottom of wall including drainage patterns above and below the wall.		✓				
2	If segmental block, provide name of manufacturer, specifications and details of the block and geotechnical fabric.		✓				
3	If over thirty inches (30") high, provide design details and calculations.		✓				
4	If over thirty inches (30") high, provide guard in accordance with IBC.		✓				
5	Provide cross section detail of wall.		✓				
6	No wall shall be placed within five feet (5') of the property line.		✓				
7	The base of the wall shall not be greater than a four-to-one (4:1) slope from the property line.		✓				
8	Walls shall be at least ten feet (10') from any swale area.		✓				

Engineer's Name: R.C. BURDICK NJ Lic. #: 30929
(please print)

Engineer's Signature: Not signed - Please Date: 10/30/18

Seal

TOWNSHIP OF HOWELL – DIVISION OF ENGINEERING

(For Official Use Only, to be completed by Township Officials)

☐ **APPROVED**

Comments / Special Conditions: _____

☐ **DENIED**

Comments / Reason for Denial: _____

Reviewer's Name: _____ Title: _____
(please print)

Reviewer's Signature: _____ Date: _____

TOWNSHIP OF HOWELL

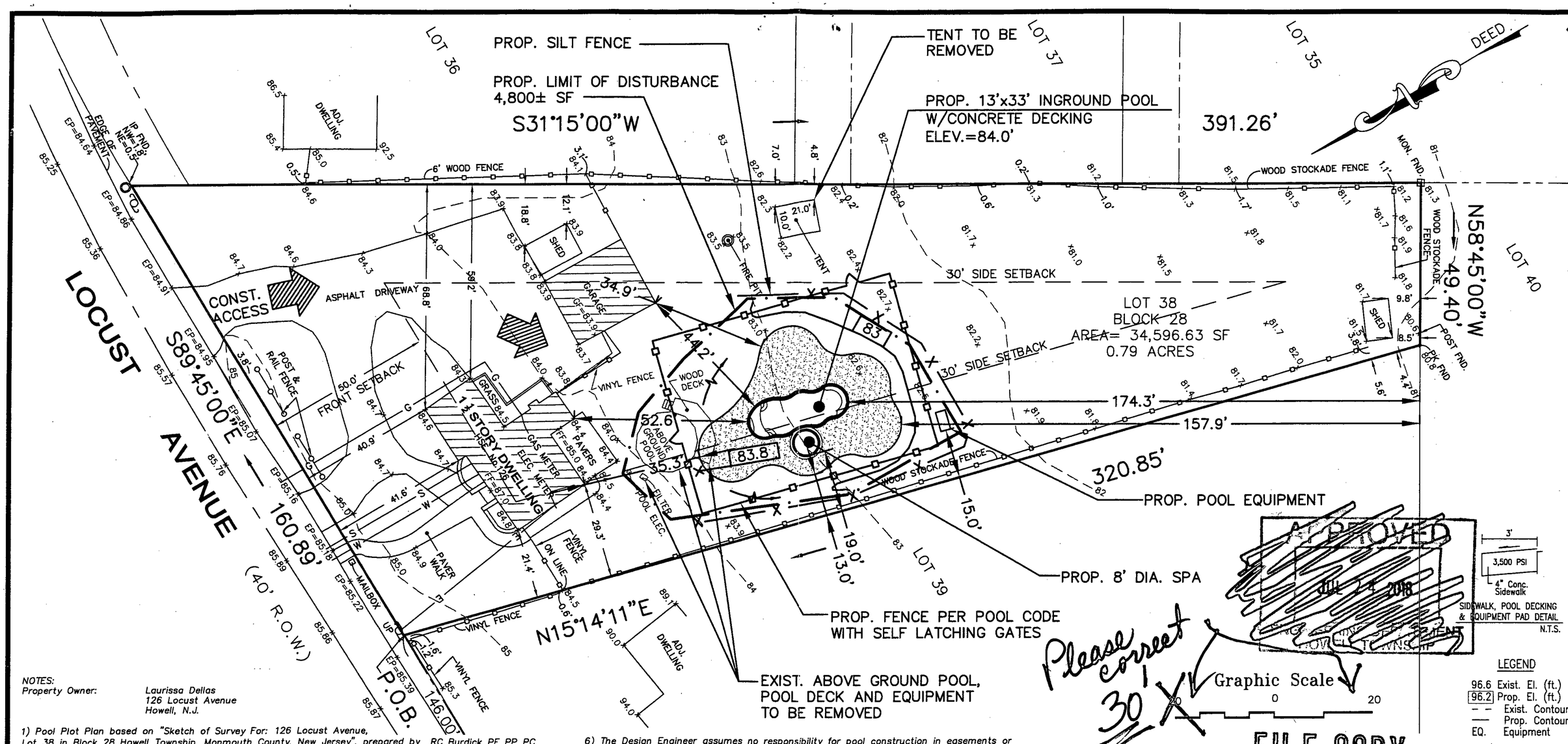
DEPARTMENT OF COMMUNITY DEVELOPMENT & LAND USE
DIVISION OF ENGINEERING
4567 Route 9 North, 2nd Floor — Phone: (732) 938-4500 x2300
Post Office Box 580 — Fax: (732) 414-3243
Howell, NJ 07731-0580 — Web: www.twp.howell.nj.us

PLOT PLAN CHECKLIST

BLOCK: 28 LOT: 38 SITE ADDRESS: 126 LOCUST AVENUE

OWNER NAME: LAURISSA DELLAS APPLICANT NAME: _____

Item No.	Plot Plan - Item Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	Plans provided on sheets no smaller than 8-1/2" x 11" or greater than 24" x 36".	✓					
2	Plan drawn to scale, no larger than 1"=40'.	✓					
3	Property lines shown, length in feet and hundredths, bearings in degrees, minutes and seconds.	✓					
4	Area of parcel in square feet and acres, both to the nearest hundredth.	✓					
5	Key map showing location of parcel to be considered in relation to surrounding area, within two hundred feet (200') (if applicable).		✓				
6	Title block containing name of applicant, preparer, lot and block number, date prepared, date of last amendment and zoning district.	✓					
7	Scale of map, both written and graphic.	✓					
8	North arrow giving reference meridian.	✓					
9	Names of property owners within two hundred feet (200') of subject property (if applicable).		✓				
10	Topography of the site and at least fifty feet (50') around the improvements or property lines based on project. All elevations based on NAVD 1988 with source noted.		✓				
11	Existing contours showing the natural drainage of the land. Proposed contours demonstrating there are no impacts to adjacent parcels when complete. Flow arrows shall be provided to help depict the direction of storm water runoff.	✓					
12	Spot grades to supplement contours. Any high or low points must be shown for drainage review purposes. Include spot elevations at property corners, building corners, septic systems, etc. Provide basement, garage and finished floor elevations.	✓					
13	Soil boring demonstrating the basement is at least two feet (2') above the seasonal high water table.		✓				
14	Existing and proposed drainage swales, structures, basins and pipes must be shown including pipe size, type and slope. Show downspout locations. All drainage systems within fifty feet (50') of the property must be shown.		✓				
15	Location of wetlands, wetland buffers, riparian areas, floodplains and any other environmental constraints on the property, with backup documentation from the approving agency.		✓				
16	Location of existing and proposed structures and their setbacks from existing and proposed property lines. Overall limit of disturbance.	✓					
17	Existing and proposed zoning setbacks and dimensions depicted graphically on plan.	✓					
18	Location of easements or rights of way including power lines.	✓					
19	Location of railroads, bridges, culverts, drain-pipes, water and sewer mains and other man-made installations affecting the parcel.		✓				
20	Location of existing and proposed utility lines. Plan must show connection points. (Any work within right-of-way will require a road opening permit.)	✓					
21	Location of existing and proposed wells and septic systems.		✓				
22	Proposed septic approval from the Monmouth County Board of Health (if applicable).		✓				
23	Location and description of monuments whether set or to be set (if applicable).		✓				
24	Location, names and widths of all existing streets within two hundred feet (200') of the parcel.		✓				
25	Street composition & width adjacent to the parcel.	✓					
26	Existing and proposed centerline, gutter and top of curb elevations along the roadway. Include construction access point from Township right-of-way.	✓					
27	Proposed roadway and curb details (if applicable).		✓				
28	Existing and proposed sidewalk and driveway grades (if applicable).		✓				
29	Proposed sidewalk and driveway details.		✓				
30	Soil Erosion & Sediment Control Permit Approval (if required).		✓				



FILE COPY

NOTES:
Property Owner: Laurissa Dellas
126 Locust Avenue
Howell, N.J.

1) Pool Plot Plan based on "Sketch of Survey For: 126 Locust Avenue, Lot 38 in Block 28 Howell Township, Monmouth County, New Jersey", prepared by RC Burdick PE PP PC performed by Mr. Stan Hans Jr., NJPLS No. 29182 performed 1/25/2018.

2) Contractor to verify location of all utilities prior to start of construction. Utilities shown are per visual observation of physical features and/or markouts and their location is approximate. The undersigned professional are not responsible for the presence of underground utilities or structures if they are not visible or otherwise disclosed by any of the above data. Pool contractor shall utilize the services of CALL DIG (1-800-272-1000) to accurately locate utilities.

3) Pool to be secured by min. 4' fence with pedestrian access gates having self latching and closing devices. Devices are to be 54" above grade, or 3" below top of barrier where the device is on the pool side of the gate and there are no openings greater than 1/2" within 18" of the device. Gates to open outwards away from the pool. Fence and all other construction shall comply with the International Building Code and the International Residential Code, New Jersey Edition, including ANSI/NSPI-5 Standards for Residential In Ground Swimming Pools, current editions. Where adjacent fences are used to secure the pool, the applicant shall take full responsibility for repair or replacement should they be damaged or removed and shall seek a variation for the fence where required.

4) All electrical equipment must be located at least 10' from the swimming pool.

5) The contractor shall protect all existing structures from damage and/or failure by acceptable methods as may be required per OSHA and other regulatory agencies. The Design Engineer accepts no responsibility for the safety or adequacy of the existing structures.

6) The Design Engineer assumes no responsibility for pool construction in easements or required setbacks areas not shown on the survey provided to the Design Engineer. The pool contractor and property owner shall verify the pool layout and all dimensions prior to construction.

7) Property owner responsible for all environmental permits. The determination of the presence or absence of wetlands, stream encroachment lines, buffer lines or easements not shown on the survey supplied by the Property Owner was outside of the scope of this project.

8) By use of this Plan for the purpose of obtaining a Permit to construct, the Property Owner and Pool Company agree to the proposed pool location, concrete, operating equipment and grading associated with the proposed swimming pool.

9) Minimum 1.0%, Max. 4:1 grading provided in area that is to be disturbed by pool construction. Concrete areas to be minimum 0.5% grade.

10) Pool filter discharge to be by flexible hose to roadway or filter to be cartridge filter with no discharge.

11) Soils from pool excavation shall remain on site within the pool area. Any excess soils shall be removed from the site and the township.

No.	Date	Description	By

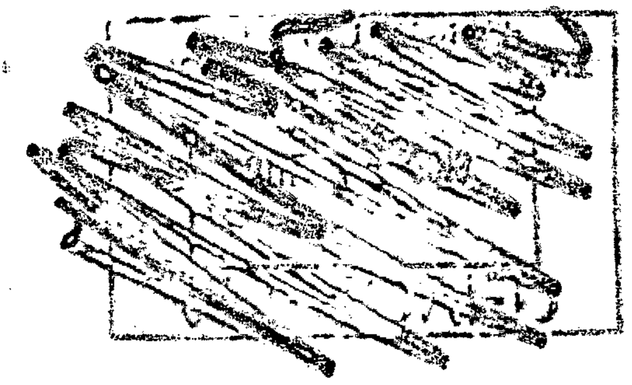
Lot 38 Block 28
Township of Howell
Monmouth County, NJ

Pool Plot Plan
126 Locust Avenue

DATE: 7/10/2018
SCALE: 1" = 30'
JOB No.: 18-7186
SHEET 1 OF 1

R.C. BURDICK, P.E., P.P., P.C.
CONSULTING ENGINEERS SURVEYORS
PLANNING ENVIRONMENTAL PERMITTING
1023 OCEAN ROAD
POINT PLEASANT, NJ 08742
(732)892-5050 FAX (732)892-5888
ROBERT C. BURDICK
N.J. PROFESSIONAL ENGINEER #049541-E
N.J. PROFESSIONAL ENGINEER #30929
N.J. PROFESSIONAL PLANNER #04383

БЕЛЕ СОВА



R.C. BURDICK, P.E. P.P. P.C.

1023 OCEAN RD. PT. PLEASANT, N.J. 08742
PHONE 732-892-5050
FAX 732-892-5888

LOT COVERAGE CALCULATIONS
126 LOCUST AVENUE
LOT 38, BLOCK 28
TOWNSHIP OF HOWELL
MONMOUTH COUNTY, NEW JERSEY
JULY 11, 2018
PROJECT NO. 18-7186

LOT AREA	34,597 +/- SF	
HOME	1,096 +/- SF	3.2 %
GARAGE	578 +/- SF	
SHEDS	241 +/- SF	
TENT	121 +/- SF	
EXIST. BUILDING COVERAGE	2,036 +/- SF	5.9%
EXISTING BUILDINGS	2,036 +/- SF	
FRONT STEPS & WALLS	4,189 +/- SF	
DRIVEWAY	2,196 +/- SF	
FRONT & SIDE PAVER WALKS	415 +/- SF	
REAR PAVER PATIO	217 +/- SF	
ABOVE GROUND POOL	264 +/- SF	
POOL DECK	121 +/- SF	
POOL EQUIPMENT	4 +/- SF	
EXIST IMPERVIOUS COVERAGE	9,442 +/- SF	27.3%
PROPOSED POOL	307 +/- SF	
PROPOSED SPA	50 +/- SF	
PROPOSED CONCRETE PATIO	1,532 +/- SF	
PROPOSED EQUIPMENT PAD	18 +/- SF	
TOTAL PROPOSED IMPERVIOUS	1,907+/- SF	5.5%
ABOVE GROUND POOL TO BE REMOVED	-264 +/- SF	
POOL DECK & EQUIP. TO BE REMOVED	-125 +/- SF	
TENT TO BE REMOVED	-121 +/- SF	
TOTAL IMPERVIOUS COVERAGE	10,839 +/- SF	31.3%

Robert C. Burdick NJPE 30929

FILE COPY

LITE COBA

SOIL EROSION AND SEDIMENTATION CONTROL NOTES

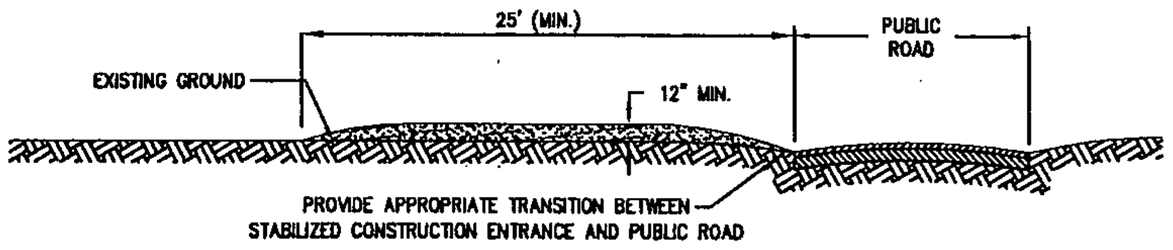
1. THE FREEHOLD SOIL CONSERVATION DISTRICT SHALL BE NOTIFIED FORTY-EIGHT (48) HOURS IN ADVANCE OF ANY SOIL DISTURBING ACTIVITY.
2. ALL SOIL EROSION AND SEDIMENT CONTROL PRACTICES ARE TO BE INSTALLED PRIOR TO SOIL DISTURBANCE, OR IN THEIR PROPER SEQUENCE, AND MAINTAINED UNTIL PERMANENT PROTECTION IS ESTABLISHED.
3. ANY CHANGES TO THE CERTIFIED SOIL EROSION AND SEDIMENT CONTROL PLANS WILL REQUIRE THE SUBMISSION OF REVISED SOIL EROSION AND SEDIMENT CONTROL PLANS TO THE DISTRICT FOR RECERTIFICATION. THE REVISED PLANS MUST MEET ALL CURRENT STATE SOIL EROSION AND SEDIMENT CONTROL STANDARDS.
4. IN THAT N.J.S.A. 4:24-39 et Seq. REQUIRES THAT NO CERTIFICATE OF OCCUPANCY BE ISSUED BEFORE THE DISTRICT DETERMINES THAT A PROJECT OR PORTION THEREOF IS IN FULL COMPLIANCE WITH THE CERTIFIED PLAN AND STANDARDS FOR SOIL EROSION AND SEDIMENT CONTROL IN NEW JERSEY AND A REPORT OF COMPLIANCE HAS BEEN ISSUED. UPON WRITTEN REQUEST FROM THE APPLICANT, THE DISTRICT MAY ISSUE A REPORT OF COMPLIANCE WITH CONDITIONS ON A LOT-BY-LOT OR SECTION-BY-SECTION BASIS, PROVIDED THAT THE PROJECT OR PORTION THEREOF IS IN SATISFACTORY COMPLIANCE WITH THE SEQUENCE OF DEVELOPMENT AND TEMPORARY MEASURES FOR SOIL EROSION AND SEDIMENT CONTROL HAVE BEEN IMPLEMENTED, INCLUDING PROVISIONS FOR STABILIZATION AND SITE WORK.
5. ANY DISTURBED AREAS THAT WILL BE LEFT EXPOSED MORE THAN SIXTY (60) DAYS, AND NOT SUBJECT TO CONSTRUCTION TRAFFIC, WILL IMMEDIATELY RECEIVE A TEMPORARY SEEDING. IF THE SEASON PREVENTS THE ESTABLISHMENT OF TEMPORARY COVER, THE DISTURBED AREAS WILL BE MULCHED WITH STRAW, OR EQUIVALENT MATERIAL, AT A RATE OF 2 - 2 1/2 TONS PER ACRE, ACCORDING TO THE STANDARD FOR STABILIZATION WITH MULCH ONLY.
6. IMMEDIATELY FOLLOWING INITIAL DISTURBANCE OR ROUGH GRADING, ALL CRITICAL AREAS SUBJECT TO EROSION (I.E. SOIL STOCKPILES, STEEP SLOPES, AND ROADWAY EMBANKMENTS) WILL RECEIVE TEMPORARY SEEDING INCOMBINATION WITH STRAW MULCH OR A SUITABLE EQUIVALENT, AND A MULCH ANCHOR, IN ACCORDANCE WITH STATE STANDARDS.
7. A SUB-BASE COURSE WILL BE APPLIED IMMEDIATELY FOLLOWING ROUGH GRADING AND INSTALLATION OF IMPROVEMENTS TO STABILIZE STREETS, ROADS, DRIVEWAYS, AND PARKING AREAS. IN AREAS WHERE NO UTILITIES ARE PRESENT, THE SUB-BASE SHALL BE INSTALLED WITHIN FIFTEEN (15) DAYS OF THE PRELIMINARY GRADING.
8. THE STANDARD FOR STABILIZED CONSTRUCTION ACCESS REQUIRES THE INSTALLATION OF A PAD OF CLEAN CRUSHED STONE AT POINTS WHERE TRAFFIC WILL BE ACCESSING THE CONSTRUCTION SITE. AFTER INTERIOR ROADWAYS ARE PAVED, INDIVIDUAL LOTS REQUIRE A STABILIZED CONSTRUCTION ENTRANCE CONSISTING OF ONE TO TWO INCH (1"-2") STONE FOR A MINIMUM LENGTH OF TEN FEET (10') EQUAL TO THE LOT ENTRANCE WIDTH. ALL OTHER ACCESS POINTS SHALL BE BLOCKED OFF.
9. ALL SOIL WASHED, DROPPED, SPILLED, OR TRACKED OUTSIDE THE LIMIT OF DISTURBANCE OR ONTO PUBLIC RIGHTS-OF-WAY WILL BE REMOVED IMMEDIATELY.
10. PERMANENT VEGETATION TO BE SEEDED OR SODDED ON ALL EXPOSED AREAS WITHIN TEN (10) DAYS AFTER FINAL GRADING.
11. AT THE TIME THAT SITE PREPARATION FOR PERMANENT VEGETATIVE STABILIZATION IS GOING TO BE ACCOMPLISHED, ANY SOIL THAT WILL NOT PROVIDE A SUITABLE ENVIRONMENT TO SUPPORT ADEQUATE VEGETATIVE GROUND COVER SHALL BE REMOVED OR TREATED IN SUCH A WAY THAT IT WILL PERMANENTLY ADJUST THE SOIL CONDITIONS AND RENDER IT SUITABLE FOR VEGETATIVE GROUND COVER. IF THE REMOVAL OR TREATMENT OF THE SOIL WILL NOT PROVIDE SUITABLE CONDITIONS, NON-VEGETATIVE MEANS OF PERMANENT GROUND STABILIZATION WILL HAVE TO BE EMPLOYED.
12. IN ACCORDANCE WITH THE STANDARD FOR MANAGEMENT OF HIGH ACID PRODUCING SOILS, ANY SOIL HAVING A pH OF 4 OR LESS OR CONTAINING IRON SULFIDES SHALL BE ULTIMATELY PLACED OR BURIED WITH LIMESTONE APPLIED AT THE RATE OF 10 TONS/ACRE, (OR 450 LBS/1,000 SQ FT OF SURFACE AREA) AND COVERED WITH A MINIMUM OF 12" OF SETTLED SOIL WITH A PH OF 5 OR MORE, OR 24" WHERE TREES OR SHRUBS ARE TO BE PLANTED.
13. CONDUIT OUTLET PROTECTION MUST BE INSTALLED AT ALL REQUIRED OUTFALLS PRIOR TO THE DRAINAGE SYSTEM BECOMING OPERATIONAL.
14. UNFILTERED DEWATERING IS NOT PERMITTED. NECESSARY PRECAUTIONS MUST BE TAKEN DURING ALL DEWATERING OPERATIONS TO MINIMIZE SEDIMENT TRANSFER. ANY DEWATERING METHODS USED MUST BE IN ACCORDANCE WITH STANDARD FOR DEWATERING.
15. SHOULD THE CONTROL OF DUST AT THE SITE BE NECESSARY, THE SITE WILL BE SPRINKLED UNTIL THE SURFACE IS WET, TEMPORARY VEGETATIVE COVER SHALL BE ESTABLISHED OR MULCH SHALL BE APPLIED AS REQUIRED BY THE STANDARD FOR DUST CONTROL.
16. STOCKPILE AND STAGING LOCATIONS ESTABLISHED IN THE FIELD SHALL BE PLACED WITHIN THE LIMIT OF DISTURBANCE ACCORDING TO THE CERTIFIED PLAN. STAGING AREAS AND STOCKPILES NOT LOCATED WITHIN THE LIMIT OF DISTURBANCE WILL REQUIRE CERTIFICATION OF A REVISED SOIL EROSION AND SEDIMENT CONTROL PLAN. CERTIFICATION OF A NEW SOIL EROSION AND SEDIMENT CONTROL PLAN MAY BE REQUIRED FOR THESE ACTIVITIES IF AN AREA GREATER THAN 5,000 SQUARE FEET IS DISTURBED.
17. ALL SOIL STOCKPILES ARE TO BE TEMPORARILY STABILIZED IN ACCORDANCE WITH SOIL EROSION AND SEDIMENT CONTROL NOTE #6.
18. THE PROPERTY OWNER SHALL BE RESPONSIBLE FOR ANY EROSION OR SEDIMENTATION THAT MAY OCCUR BELOW STORMWATER OUTFALLS OR OFFSITE AS A RESULT OF CONSTRUCTION OF THE PROJECT.

SEEDING NOTES

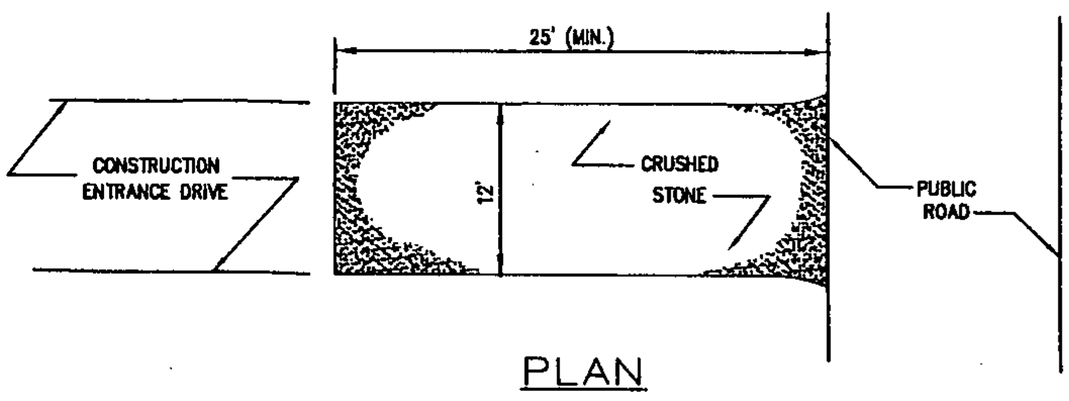
1. ALL AREAS DISTURBED BY CONSTRUCTION SHALL BE FINE GRADED AND SEEDED. TEMPORARY AND PERMANENT SEEDING MIXTURES SHALL CONSIST OF THE FOLLOWING MIXTURE OR APPROVED EQUAL:

   TEMPORARY SEEDING
   - PERENNIAL RYEGRASS @ 1.0 LB. PER 1000 S.F.

   PERMANENT SEEDING
   - HARD FESCURE AND/OR STRONG CREEPING RED FESCUE @ 4.0 LBS PER 1000 S.F.
   - PERENNIAL REYGRASS @ 1.0 LB PER 1000 S.F.
   - KENTUCKY BLUEGRASS @ 1.0 LB PER 1000 S.F.
2. ALL SEEDING AND MULCHING SHALL BE PREFORMED IN ACCORDANCE WITH THE NEW JERSEY STANDARS FOR SOIL EROSION AND SEDIMENT CONTROL.
3. SEED GERMINATION SHALL BE TESTED WITHIN 12 MONTHS OF PLANTING DATE. ADDITIONAL SEEDING SHALL BE PERFORMED IF LESS THAT 50% OF SEED GERMINATION RATES RESULT.
4. TEMPORARY SEEDING TO BE MAINTAINED UNTIL DISTURBED AREAS ARE PERMANENTLY STABLIZED WITH PERMANENT SEEDING. IF ANY SERIOUS EROSION PROBLEMS OCCUR, THE ERODED AREAS SHALL BE REPAIRED WITH A MULCH AS INDICATED IN NOTE NO. 5.
5. MULCH SHALL BE UNROTTED SMALL GRAIN STRAW APPLIED AT A RATE OF 3 TONS PER ACRE SPREAD UNIFORMLY AT 70 TO 90 POUNDS PER 1000 SF ANCHORED IN ACCORDANCE WITH NEW JERSEY SOIL EROSION AND SEDIMENT CONTROL STANDARDS.
6. LIMESTONE AND FERTILIZER TO BE APPLIED ACCORDING TO SOIL TEST RECOMMENDATIONS. FERTILIZER FOR THE ESTABLISHMENT OF TEMPORARY AND PERMANENT VEGETATIVE COVER SHALL BE 10-20-10 WITH 50% WATER INSOLUBLE NITROGEN APPLIED AT A RATE OF 11 POUNDS PER 1000 SF OR AS DETERMINED BY A SOIL TEST. LIMESTONE FOR TEMPORARY SEEDING SHALL BE APPLIED AT A RATE OF 2 TONS PER ACRE UNLESS SOIL TESTING INDICATED OTHERWISE.
7. IF THE SEASON PREVENTS THE ESTABLISHMENT OF TEMPORARY OR PERMANENT SEEDING, EXPOSED AREAS ARE TO BE STABLIZED WITH MULCH AS INDICATED IN NOTE NO. 5.



PROFILE



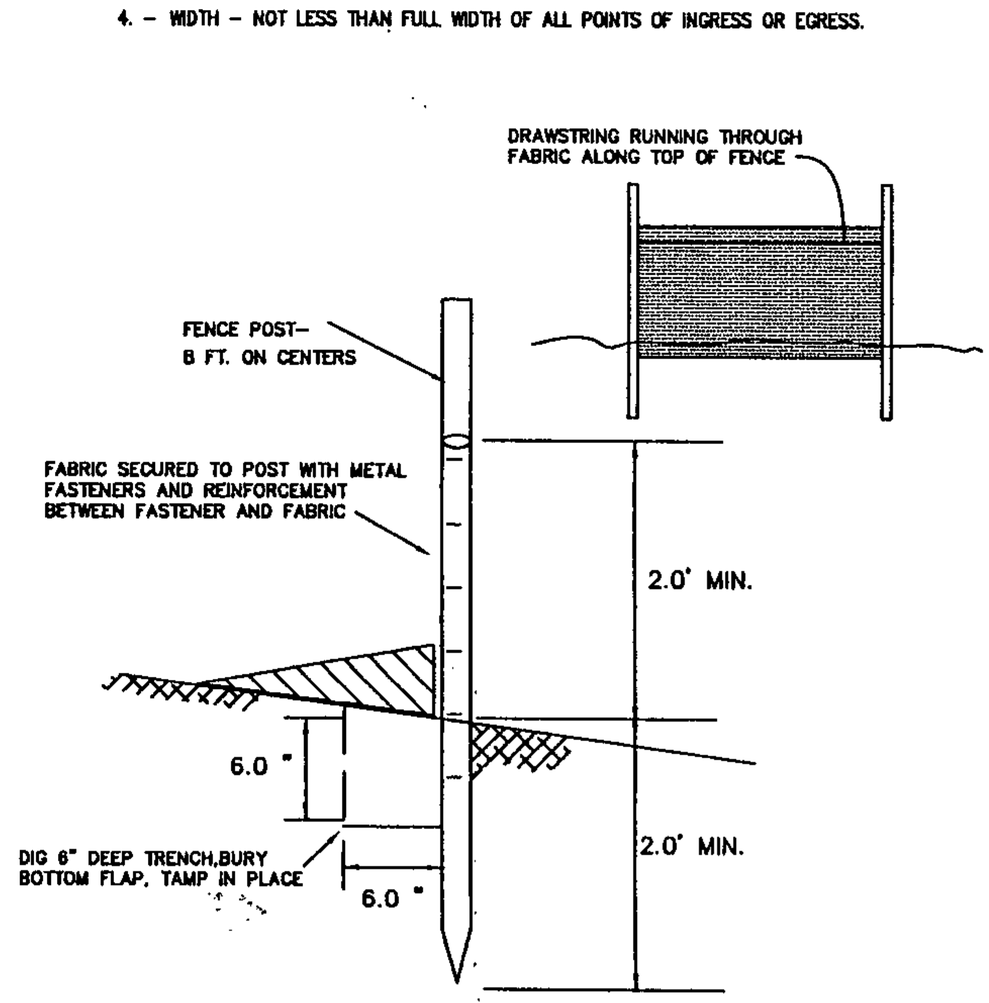
PLAN

STABILIZED CONSTRUCTION ENTRANCE

N.T.S.

CONSTRUCTION SPECIFICATIONS

1. - STONE SIZE - USE ASTM C-33,SIZES No. 2 OR 3. USED CRUSHED STONE.
2. - LENGTH - AS EFFECTIVE, BUT NOT LESS THAN 50 FEET.
3. - THICKNESS - NOT LESS THAN 8 INCHES.
4. - WIDTH - NOT LESS THAN FULL WIDTH OF ALL POINTS OF INGRESS OR EGRESS.



SILT FENCE & INSTALLATION DETAIL

N.T.S.

NO.	DATE	DESCRIPTION	BY

SOIL EROSION & SEDIMENT CONTROL NOTES & DETAILS

LOT 38, BLOCK 28
HOWELL TOWNSHIP
MONMOUTH COUNTY, NEW JERSEY

DATE: 7/11/18
SCALE: NTS
JOB No.: 18-7186
SHEET 1 OF 1

R.C. BURDICK, P.E., P.P., P.C.
CONSULTING ENGINEERS · SURVEYORS
PLANNING · ENVIRONMENTAL PERMITTING
1023 OCEAN ROAD
POINT PLEASANT, NJ 08742
(732)892-5050 FAX (732)892-5888

ROBERT C. BURDICK
PROFESSIONAL ENGINEER #30929
PROFESSIONAL PLANNER #04383

TOWNSHIP OF HOWELL

DEPARTMENT OF COMMUNITY DEVELOPMENT & LAND USE
DIVISION OF ENGINEERING
4567 Route 9 North, 2nd Floor — Phone: (732) 938-4500 x2300
Post Office Box 580 — Fax: (732) 414-3243
Howell, NJ 07731-0580 — Web: www.twp.howell.nj.us

PLOT PLAN CHECKLIST

BLOCK: 28 LOT: 38 SITE ADDRESS: 126 LOCUST AVENUE

OWNER NAME: LAURISSA DELLAS APPLICANT NAME: _____

Item No.	Plot Plan - Item Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	Plans provided on sheets no smaller than 8-1/2" x 11" or greater than 24" x 36".	✓					
2	Plan drawn to scale, no larger than 1"=40'.	✓					
3	Property lines shown, length in feet and hundredths, bearings in degrees, minutes and seconds.	✓					
4	Area of parcel in square feet and acres, both to the nearest hundredth.	✓					
5	Key map showing location of parcel to be considered in relation to surrounding area, within two hundred feet (200') (if applicable).		✓				
6	Title block containing name of applicant, preparer, lot and block number, date prepared, date of last amendment and zoning district.	✓					
7	Scale of map, both written and graphic.	✓					
8	North arrow giving reference meridian.	✓					
9	Names of property owners within two hundred feet (200') of subject property (if applicable).		✓				
10	Topography of the site and at least fifty feet (50') around the improvements or property lines based on project. All elevations based on NAVD 1988 with source noted.		✓				
11	Existing contours showing the natural drainage of the land. Proposed contours demonstrating there are no impacts to adjacent parcels when complete. Flow arrows shall be provided to help depict the direction of storm water runoff.	✓					
12	Spot grades to supplement contours. Any high or low points must be shown for drainage review purposes. Include spot elevations at property corners, building corners, septic systems, etc. Provide basement, garage and finished floor elevations.	✓					
13	Soil boring demonstrating the basement is at least two feet (2') above the seasonal high water table.		✓				
14	Existing and proposed drainage swales, structures, basins and pipes must be shown including pipe size, type and slope. Show downspout locations. All drainage systems within fifty feet (50') of the property must be shown.		✓				
15	Location of wetlands, wetland buffers, riparian areas, floodplains and any other environmental constraints on the property, with backup documentation from the approving agency.		✓				
16	Location of existing and proposed structures and their setbacks from existing and proposed property lines. Overall limit of disturbance.	✓					
17	Existing and proposed zoning setbacks and dimensions depicted graphically on plan.	✓					
18	Location of easements or rights of way including power lines.	✓					
19	Location of railroads, bridges, culverts, drain-pipes, water and sewer mains and other man-made installations affecting the parcel.		✓				
20	Location of existing and proposed utility lines. Plan must show connection points. (Any work within right-of-way will require a road opening permit.)	✓					
21	Location of existing and proposed wells and septic systems.		✓				
22	Proposed septic approval from the Monmouth County Board of Health (if applicable).		✓				
23	Location and description of monuments whether set or to be set (if applicable).		✓				
24	Location, names and widths of all existing streets within two hundred feet (200') of the parcel.		✓				
25	Street composition & width adjacent to the parcel.	✓					
26	Existing and proposed centerline, gutter and top of curb elevations along the roadway. Include construction access point from Township right-of-way.	✓					
27	Proposed roadway and curb details (if applicable).		✓				
28	Existing and proposed sidewalk and driveway grades (if applicable).		✓				
29	Proposed sidewalk and driveway details.		✓				
30	Soil Erosion & Sediment Control Permit Approval (if required).		✓				

Item No.	In-ground Swimming Pool - Additional Items Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	No change in grade shall take place within five feet (5') of the property line.	✓					
2	In-ground pool coping elevation and all dimensions from surrounding walkways to buildings, setbacks, other structures, etc.	✓					
3	Pool equipment shall be placed at least ten feet (10') from any property line.	✓					
4	Waterline shall be at least ten feet (10') from any property line unless a walkway, patio, deck, etc. is installed adjacent to the pool, then the ten foot (10') setback should be measured from the furthest edge of that item away from the waterline.	✓					
5	Pool shall be placed at least six feet (6') from the residential dwelling. Provide cross-section drawings of the pool and any adjacent structure if the pool is within twelve feet (12') of that structure.	✓					
6	Location of pool backwash discharge location graphically depicted on the plan.	✓					

Item No.	Retaining Wall - Additional Items Required	Applicant Checklist			For Township Use Only		
		Yes	N/A		Yes	No	N/A
1	Proposed grades on top and bottom of wall including drainage patterns above and below the wall.		✓				
2	If segmental block, provide name of manufacturer, specifications and details of the block and geotechnical fabric.		✓				
3	If over thirty inches (30") high, provide design details and calculations.		✓				
4	If over thirty inches (30") high, provide guard in accordance with IBC.		✓				
5	Provide cross section detail of wall.		✓				
6	No wall shall be placed within five feet (5') of the property line.		✓				
7	The base of the wall shall not be greater than a four-to-one (4:1) slope from the property line.		✓				
8	Walls shall be at least ten feet (10') from any swale area.		✓				

Engineer's Name: R.C. BURDICK NJ Lic. #: 30929
(please print)

Engineer's Signature: _____ Date: _____

Seal

TOWNSHIP OF HOWELL – DIVISION OF ENGINEERING

(For Official Use Only, to be completed by Township Officials)

☐ **APPROVED**

Comments / Special Conditions: _____

☐ **DENIED**

Comments / Reason for Denial: _____

Reviewer's Name: _____ Title: _____
(please print)

Reviewer's Signature: _____ Date: _____