BLOCK 958.19 LOT 22 + 23 ADDRESS (SITE) 493 BELLA VISTA Rd PERMIT NO. 788-94

RECEIVED
APR 4 1994
DIV. OF INSPECTION

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 493 BELLA VISTA ROAD, Brick, N.J
2. Name of Owner in Fee: FRANK P. HARTTEN JR Tel. [redacted]
   Address 493 BELLA VISTA ROAD BRICKTOWN, N.J 08724 (street / municipality / zip code)
3. Ownership in Fee: Public ____ Private ✓
4. Principal Contractor: OWNER Tel. [redacted]
   Address ____
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Federal Emp. No. ____ Social Security No. ____
5. Architect or Engineer NONE Tel. ( ) ____
   Address ____
6. Responsible Person In Charge of Work PETE HARTTEN Tel. [redacted]

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 8		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other			
6. Subtotal	$		
7. Less 20% for State Plan Review	5		
8. Subtotal	$		
9. DCA Training Fee	1		
10. Subtotal	$		
11. Cert. of Occupancy	20		
12. Other			
13. TOTAL	$ 34		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

1. Number of Stories ____
2. Height of Structure ____ ft.
3. Area—Largest Floor ____ sq. ft.
4. Building Area—All Floors ____ sq. ft.
5. Volume of Structure ____ cu. ft.
6. Construction Classification ____
7. Total Land Area Disturbed ____ sq. ft.
8. Flood Hazard Zone ____
9. Base Flood Elevation ____ ft.
10. Wetlands yes ____ sq. ft. no ____
11. Fire Grading ____
12. Max. Live Load ____
13. Max. Occupancy Load ____

Shed

II. PROPOSED WORK

	Est. Cost
1. ☑ Minor Work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS	950.

Homeowner

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Reviewer	Resubmission Dates Approval	Rejection	Reviewer
			4/13/94	[illegible]	9/30/94		[illegible]
[illegible]	[illegible]	[illegible]		[illegible]			

VII. DESCRIPTION OF BUILDING USE

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

No of dwelling units:
Before Construction ____
After Construction ____
Net gain or loss ____

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

III. DO YOU WANT: (optional)

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

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

U.C.C. Form F-100A

20K

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

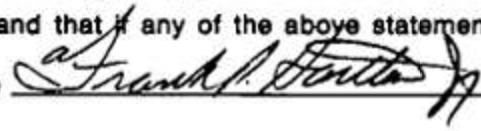
I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate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

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature  Date _____

II. AGENT SECTION

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

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

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

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

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

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date
☐ Planning Board							X	X
☐ Zoning Board			X	X	X	X	X	X
☐ Sewer Authority							X	X
☐ Water Authority							X	X
☐ Fire Department					X	X	X	X
☐ Police Department			X	X	X	X	X	X
☐ Health Department					X	X		
☐ Soil Conservation							X	X
☐ N.J. Dept. of Community Affairs	X	X	X	X	X	X		
☐ N.J. Department of Transportation	X	X	X	X	X	X		
☐ N.J. Dept. of Environmental Protect.	X	X	X	X	X	X		
☐ Utility Dig No.			X	X	X	X	X	X
☑ Other Zoning	SE	4/5/94	Shed					
☐ AH Exempt								
☐								

COMMENTS

Typed IMPORTANT
A.H.B.T. - EXEMPT

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 EXPIRED
☐ Temporary Certificate of Occupancy	No.		
☐ Temporary Certificate of Occupancy	No.		
☐ Continued Certificate of Occupancy	No.		
☐ Certificate of Occupancy	No.		
☐ Certificate of Approval	No.		
☐ None			

UCC NEW JERSEY UNIFORM CONSTRUCTION CODE

CONSTRUCTION PERMIT

Date Issued 4/25/
Control #
Permit # 788-94

NTIFICATION Block 958.19 Lot 22-23

rk Site Location 493 Bella Vista Rd

ner in Fee F. Hartten

dress [illegible]

e. (____) ____

Contractor Self

Address 0

Tele. (____) ____

Lic. No. or Bldrs. Reg. No. ____ Exp. Date ____

Federal Emp. No. ____

or Social Security No. ____

ereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER ____

[ ] ELECTRICAL [ ] FIRE PROTECTION

SCRIPTION OF WORK:

Shed

TE: If construction does not commence within one (1) year of date of issuance, or if struction ceases for a period of six (6) months, this permit is void.

mated Cost of Work $ 750

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building	5
Plumbing	
Electrical	
Fire Protection	
Other	UR 5
Other	
DCA Training Fee	1
Cert. of Occ.	20
Other	
Total	30
Check No.	# 3637
Cash	
Collected By:	[illegible]

788 BLOCK 958 # LOT 22 # BUILDING PLAN RVW D.C.A. C / O TOTAL CHECK CHANGE 04/20/94 NO. 5 [illegible]

.C. Form F-170A

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

4/28/94
788-94

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

Block 958.19 Lot 22 + 23
Work Site Location 493 BELLA VISTA ROAD BRICKTOWN N.J
Owner in Fee FRANK P. HARTTEN JR
Address 493 BELLA VISTA ROAD BRICKTOWN, NJ 08724
Tele. [redacted]
Contractor OWNER
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
PRE-SHED FAB

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
[ ] No Plans Req.							
[X] All	4/13/94		Footing				RIC
[ ] Footing			Foundation				
[ ] Foundation			Slab				
[ ] Frame			Frame				
[ ] Other			Insulation				
Joint Plan Review Required:			Finishes:				
[ ] Elec. [ ] Plumb. [ ] Fire			Energy				
SUBCODE APPROVAL			Mechanical				
[ ] CO [ ] CCO [X] CA			TCO				
Date: 9/30/94			Other				
Approved By: J. Chrestler			Final 4 9-9-94				

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. $ ____
2. Alteration $ ____
3. Total (1+2) $ ____

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other ____
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence ____ Height
  [ ] Sign ____ Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [X] Other SHED

(Office Use Only)
FEE
$ ____

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

U.C.C. Form F-110A

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 4/28/94
Date Issued
Control #
Permit # 788-94

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

Block 958.19 Lot 22 + 23
Work Site Location 493 BELLA VISTA ROAD BRICKTOWN N.J
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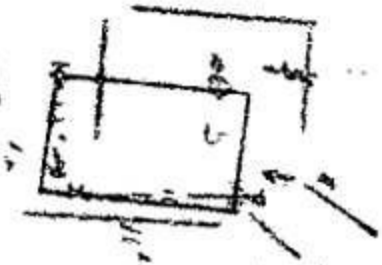
Address 493 BELLA VISTA ROAD BRICKTOWN, NJ 08724
Tele. [redacted]
Contractor OWNER
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.



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DESCRIPTION OF WORK
PRE-SHED FAB

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	4/13/94	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

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

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence Height
  [ ] Sign Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [X] Other SHED

(Office Use Only)

FEE $

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

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $
3. Total (1+2) $

U.C.C. Form F-110A

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

Township of Brick

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

CA/Ltr 4/13 Left Manager

Office of
Division of Inspections

CHECK LIST

493 Bella Vista

Re: Block 958.19 Lot 22/23

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

Administrative	
Zoning	
Engineering	
Building	Need cost - then OK to issue JC
Plumbing	
Electric	
Fire	

See attached review check list (s) for details as to the reason your submission has been rejected. Please revise your application accordingly and resubmit to this office.

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

Arthur J. Cierzo, Construction Official

PHONE-O-GRAM®

for: John

M Harden of

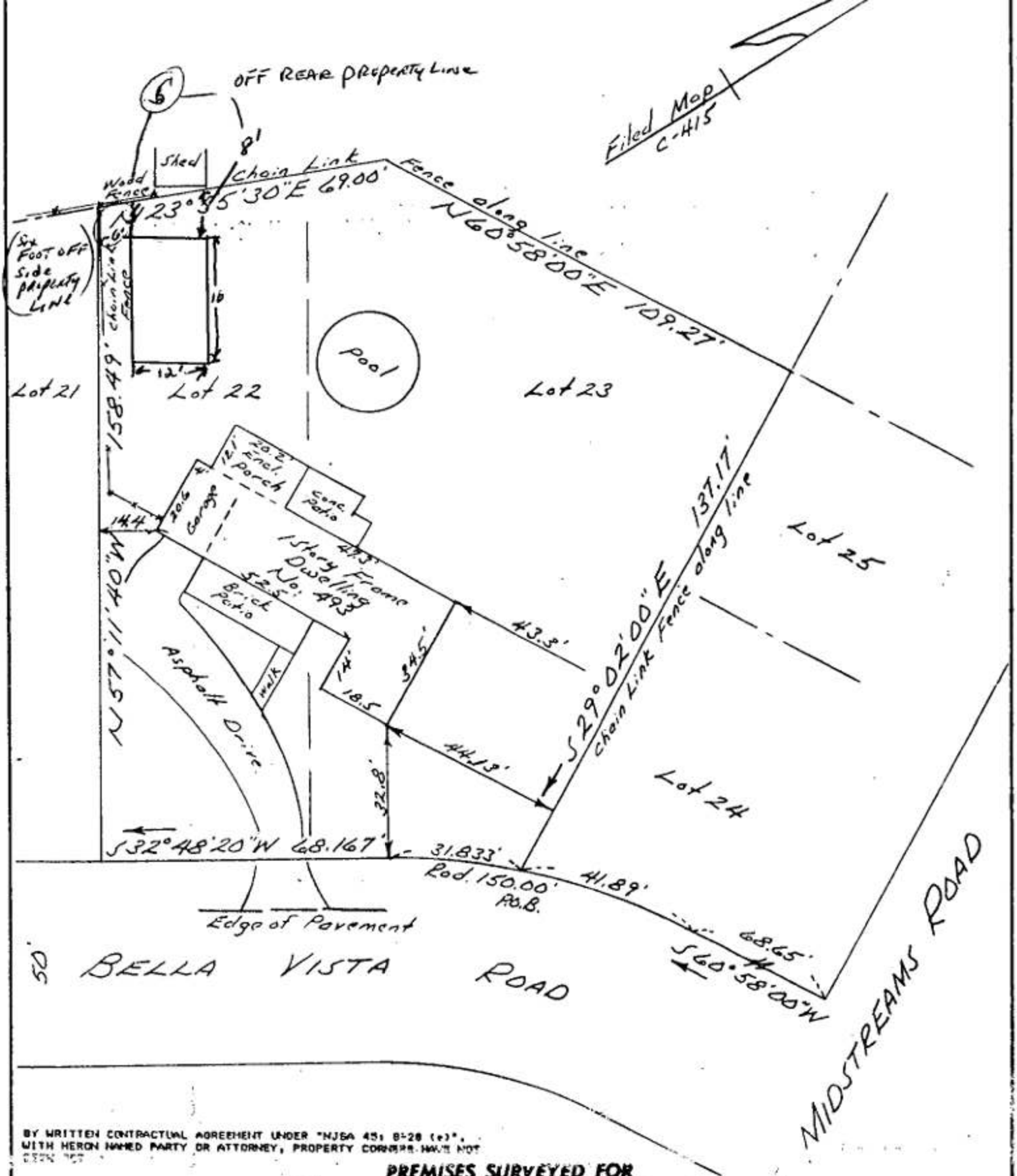
☐ Telephoned ☐ Returned your call ☐ Came in

☐ Will call again ☐ Please return the call ☐ See me

Message: Shed 493 Bella Vista

$950 — is cost of construction

Phone: 892-7017 Date 4/15 Time _____ By Val



BY WRITTEN CONTRACTUAL AGREEMENT UNDER "NJSA 45: 8-28 (e)", WITH HEREIN NAMED PARTY OR ATTORNEY, PROPERTY CORNERS HAVE NOT BEEN SET

PREMISES SURVEYED FOR

FRANK P. HARTTEN, JR.

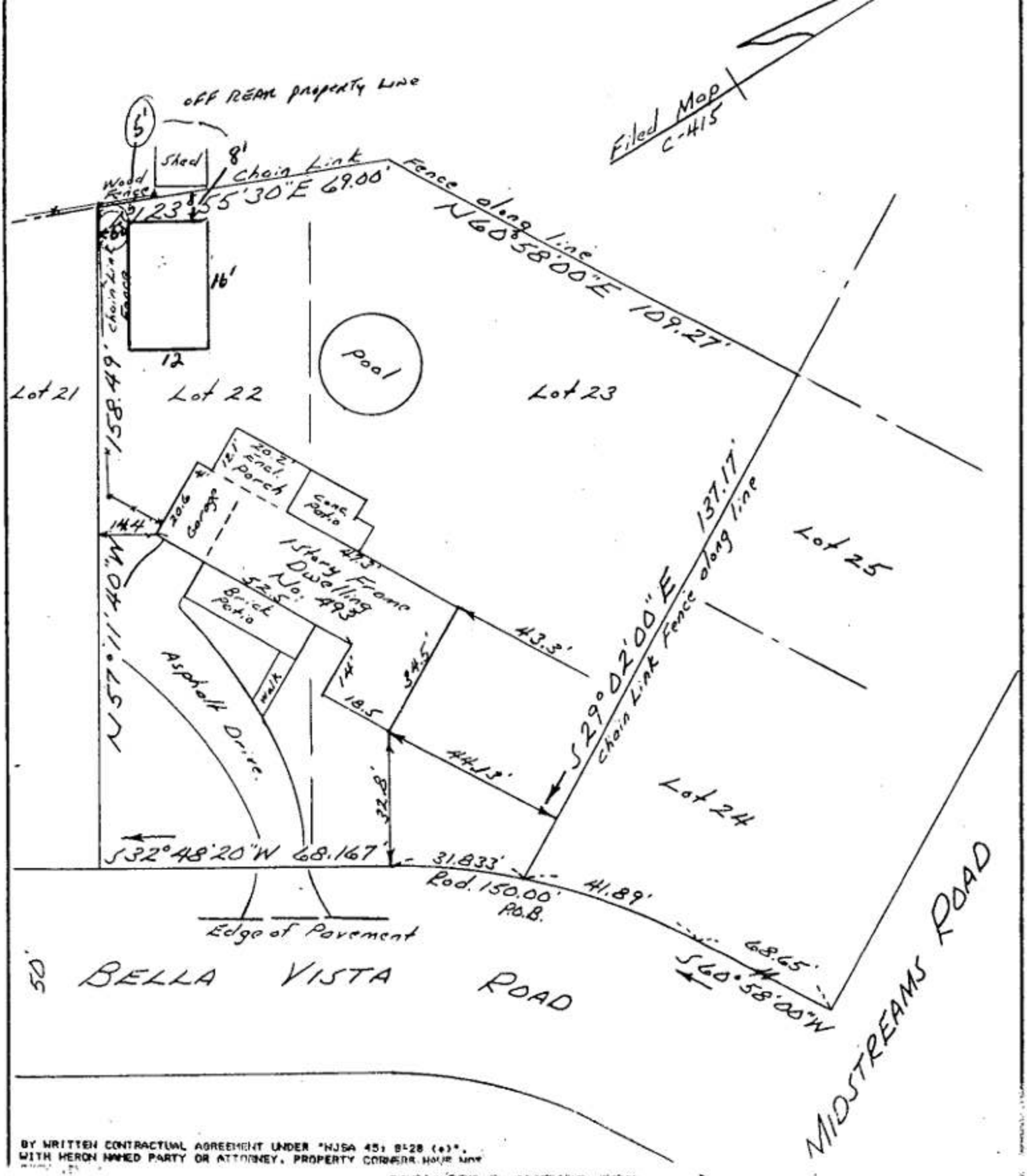
BRICK TOWNSHIP, OCEAN COUNTY, N.J.

SURVEYED October 29, 1991 **SCALE 1"** = 30'

Certified to Frank P. Hartten, Jr. and Christina M. Hartten, his wife; Certified Mortgage Associates, its successors and/or assigns; Stewart Title Guaranty Company, 21st Century Title Agency; Peter D. Kearns, Esq.

Elbert Morris, P.L.S.

HORRIS & GLASCOW, INC.



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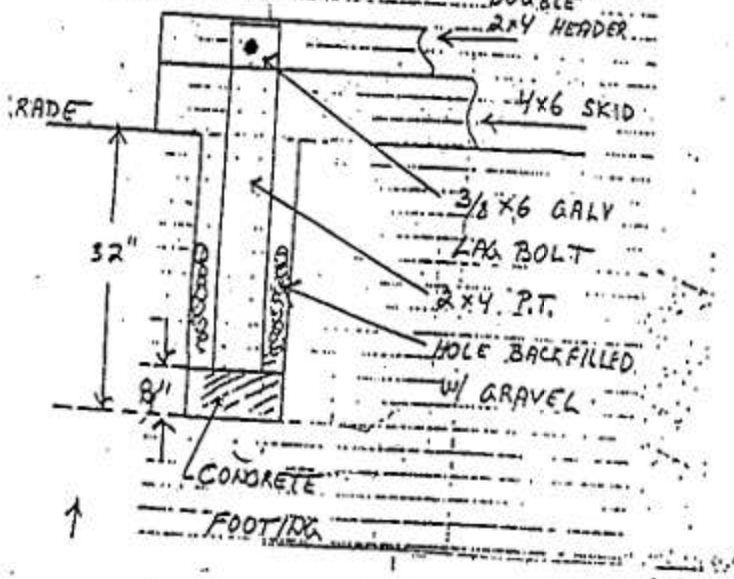
Elbert Morris, P.L.S.

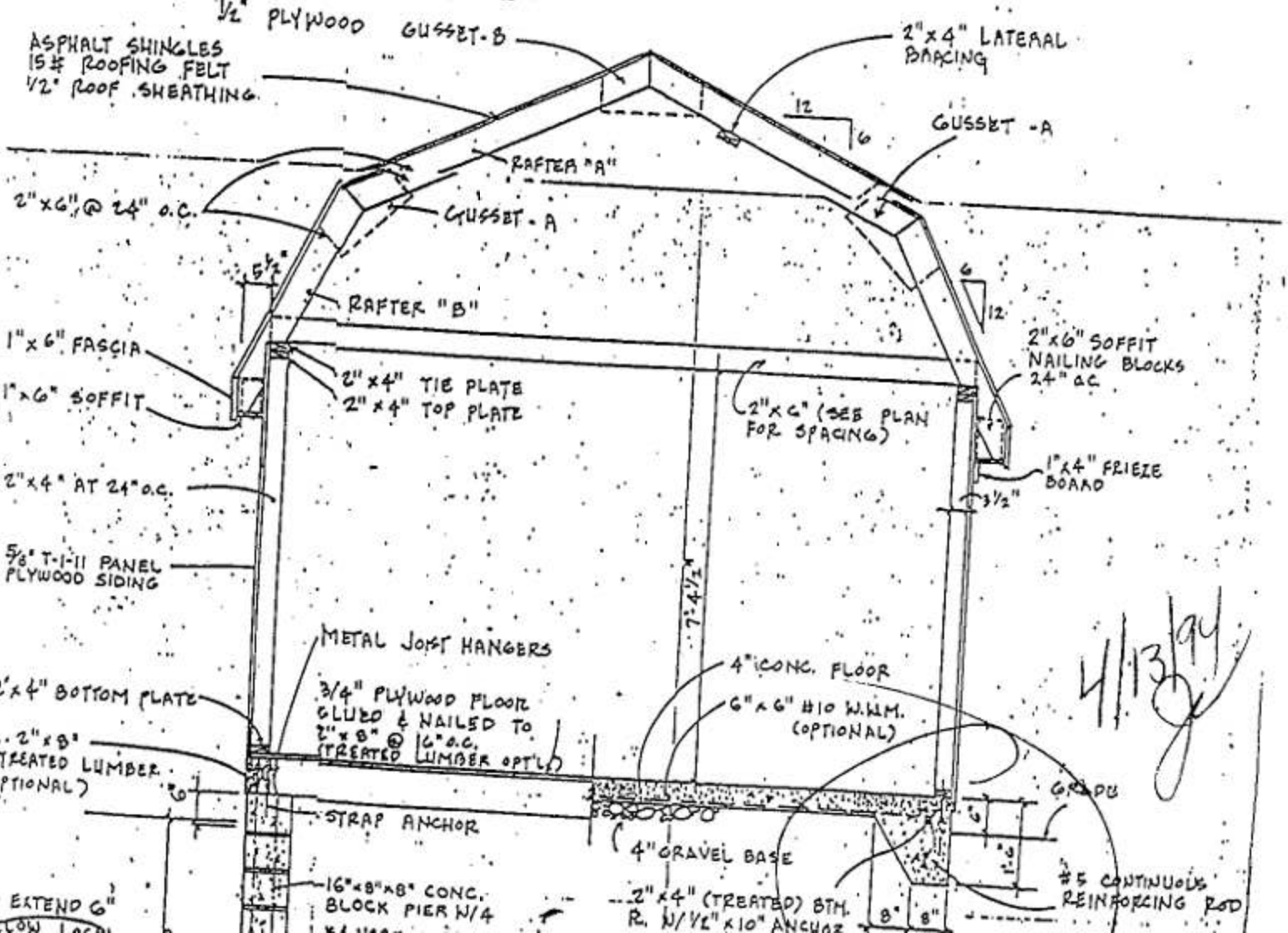
MORRIS P. GLASCOW, INC.

SHED IS ANCHORED TO EARTH BY A VERTICAL P.T. 2x4, LAG BOLTED TO THE FLOOR FRAMING HEADER & BURRIED IN A HOLE 32" DEEP W/ AN 8" CONCRETE FOOTING.



SHED ISOMETRIC

No scale



4/13/94