BLOCK 1427.02 LOT 10 ADDRESS (SITE) Highland Pointe PERMIT NO. 1706-90

...temporary 4 bdrm/Bsmt.

CONSTRUCTION PERMIT APPLICATION

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

BUILDING

FEB 25 1990

I. IDENTIFICATION

1. Proposed Work-site at: 844 Constitution Drive
2. Name of Owner in Fee: Highland Pointe Dev Co Tel. (201) 477-2300
   Address 317 Brick Boulevard, Brick NJ 08723 (street, municipality, zip code)
3. Ownership in Fee: Public ______ Private X
4. Principal Contractor: ______ Tel. ( )
   Address SAME AS ABOVE
   License No. OR, if new home, Builder Reg. No. 07621 Exp. Date
   Federal Emp. No. Ø Social Security No.
5. Architect or Engineer Anderson, Ballis & Lindstrom Tel. 201 477-8900
   Address 321 Mantoloking Road, Bricktown, NJ 08723
6. Responsible Person In Charge of Work Mark Fisch Tel. (201) 477-2300

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 281.84	15	
2. Electrical			
3. Plumbing	125.–		
4. Fire Protection	31.–	33 –	
5. Other			
6. Subtotal	$ 437.84	48 –	
7. Less 20% for State Plan Review	5 –		
8. Subtotal	$		
9. DCA Training Fee	43.84		
10. Subtotal	$		
11. Cert. of Occupancy	65.68		
12. Other			
13. TOTAL	$ 552.36		

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	2500 sq. ft.	
5. Volume of Structure	31316 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		

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	44500

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
			JUL 30 1990		7/12/93		
	7/30/90		7/30/90		7-8-93		
	7-27-90		7-27-90		6/29/93		
					6-30-93		
Eng			8/27/90 Eng. OK	H.P.	7/27/90		

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☒ Prototype Processing

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:

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

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 Mark Fisch Date 7/24/90

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 Highland Pools Dev. Co. Inc

Address 317 Brick Boulevard
Brick Town, NJ 08723

Telephone (201) 477-2300

Signature Mark Fisch Date 7/24/90

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	
☑ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☒ Other Zoning	JK	7/26/90	house						
☐									
☐									

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. 1706	7/12/93	
☐ Certificate of Approval	No.		

BLOCK 142.02 LOT 10 ADDRESS (SITE) 844- Constitution Dr. PERMIT NO.

RECEIVED

Fireplace
Add-on to Existing permit

DIV. OF INSPECTION

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 844 Constitution Dr.
2. Name of Owner in Fee: Highland Pointe Dr. Tel. ( )
   Address 317 Brick Blvd
   street municipality zip code
3. Ownership in Fee: Public ____ Private ____
4. Principal Contractor: Same Tel. ( )
   Address
   License No. OR, if new home, Builder Reg. No. Exp. Date
   Federal Emp. No. Social Security No.
5. Architect or Engineer WSG Eng Tel. (244-7227
   Address Toms River
6. Responsible Person In Charge of Work Highland Pointe Tel. (477-2300

Re Fab - Fireplace

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other Fireplace			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training 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. 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		

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	1000

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
			4				
			4/16/93				
Eng	4-6-93	ENA					

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

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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: ZNA

UCC Form F-100A

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:

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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.

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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 Steve Gromek

Address 317 Brick Blvd
Brick NJ

Telephone (477. 2300

Signature _____ Date 4/2/93

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	
☐ 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									
☐									
☐									

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			

CERTIFICATE

Date Issued 7/12/93
Control #
Permit # 1706-90

IDENTIFICATION

Block 1427.02 Lot 10
Work Site Location 844 Constitution Drive
Brick, N.J.
Owner in Fee Highland Pointe Dev. Co
Address 317 Brick Blvd.
Brick, N.J.
Tele. ( )
Contractor Same
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. #417783
Use Group R-3 1 hour
Maximum Live Load
Description of Work/Use:

Single family dwelling

Type of Warranty Plan: [ ] State [XXX] Private
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

XX☒ **CERTIFICATE OF OCCUPANCY** ☐ **CERTIFICATE OF APPROVAL**

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

☐ **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 OCCUPANCY**

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate:

Arthur J. Ciarrocca
CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

TOWNSHIP OF BRICK

APPLICATION FOR CERTIFICATE

PERMIT NO. _____
DATE ISSUED _____
Block 427.07 Lot 15
Subdivision Highland Pointe
Notice No. _____

IDENTIFICATION

OWNER:
Name Highland Pointe Del Inc
Address 317 Brick Blvd
Town/State/Zip Brick NJ

CONSTRUCTION LOCATION:
Address 937 Chelsea Dr
Brick NJ
Tel. ( ) 477-2300

ACTION

☑ CERTIFICATE OF OCCUPANCY
☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF CONTINUED OCCUPANCY
☐ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP: _____ Previous _____ Current

FINAL COST OF CONSTRUCTION: $ 40 000
(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: _____
☑ Owner
☐ Agent
OWNER/AGENT

U.C.C. Form F-270 (8/83)

INSPECTOR: Gerry Rios

DATE: 7/6/93

JOB: Heathland A SECTION: II

TYPE OF WORK: Final Cert.

WEATHER: Sunny

LOCATION: 844 Constitution D

TEMPERATURE: 75°

BLOCK: 1427.02 LOT: 10

ENGINEERING RECOMMENDATIONS FOR CERTIFICATE OF OCCUPANCY INSPECTION CHECK LIST

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway	✓	
2. Grading	✓	
3. Sidewalk	✓	
4. Road Pavement	No. 1-A B C	
5. Landscaping & Sodding	✓	
6. Clean-up Procedures	✓	
7. Note on going construction in immediate area	✓	
8. Safety	✓	

COMMENTS REFERENCING ITEM NUMBER:

Ofc 7 HP
7/7/93

RECOMMENDATIONS:

☐ TEMP. C.O.

☑ FINAL C.O.

☐ DETAILED REINSPECTION

☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED

PLANNING BOARD ENGINEER

MUNICIPAL ENGINEER

I _____, Authorized representative of _____, hereby acknowledge the above deficiencies, and further realize that the Certificate of Occupany will be conditioned upon the acceptable resolution thereof within _____ days of the issuance of Certificate of Occupancy.

CONSTRUCTION PERMIT

UNIFORM CONSTRUCTION CODE

Date Issued 8-29-90
Control #
Permit # 1706-90

NTIFICATION Block 1427.02 Lot 10

k Site Location 844 CONSTITUTION Dr Contractor Owner

Address

er in Fee Northland Pointe Assoc Co

ress 319 Patrick Blvd. Tele. ( )

Brick, NJ Lic. No. or Bldrs. Reg. No. Exp. Date

. ( ) Federal Emp. No.

or Social Security No. LOT 10 #

ereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER

[ ] ELECTRICAL [ ] FIRE PROTECTION

CRIPTION OF WORK:

Single fam. dwelling
Bl. 31, 316.

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

nated Cost of Work $ 44,500.

CONSTRUCTION OFFICIAL

C. Form F-170A

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

PAYMENTS (Office Use Only)

Building	BUILDING
Plumbing	PLUMBING
Electrical	FIRE
Fire Protection	PLAN RVW
Other	D.C.A.
Other	C / O
DCA Training Fee	TOTAL
Cert. of Occ.	CHECK
Other	CHANGE
Total	08/29/90 NO. 5 0022A085
Check No.	
Cash	
Collected By:	

dd- on
EXISTING
PERMIT

PERMIT UPDATE

Date Update Issued 6/24
Control #
Permit #
Date Permit Issued 1706

IDENTIFICATION Block 1427.02 Lot 10
Work Site Location 844 Constitution
Owner in Fee Highland Pointe Dev.
Address 319 Brick Blvd.
Tele. ( ) 477-2300

Contractor Highland Pointe Dev
Address 319 BRICK BLVD
BRICK NJ 0872
Tele. ( )
Lic. No. or Bldrs. Reg. No. 0762
Federal Emp. No.
or Social Security No.

1706
BLOCK
1427
LOT
10 #

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] Other
[ ] ELECTRICAL [X] FIRE PROTECTION

DESCRIPTION OF WORK: Prefab Fireplace

Estimated Cost of Work $ 1000

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)
Building 15 BUILDING
Plumbing FIRE
Electrical TOTAL
Fire Protection 33 CHANGE
Other
Other 06/24/93 NO. 5 2047A005
DCA Training Fee 2
Cert. of Occ.
Other
Total 47 -
Check No. 1240
Cash
Collected By:

N.C.C. Form F-190A

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 6/2/93
Date Issued
Control #
Permit # update 1706-90

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

Block 1427.01 Lot 10
Work Site Location 844 Constitution Dr
Owner in Fee Highland Pointe Dr
Address 317 Buck Blvd
Tele. (____)
Contractor
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

Prefab fireplace

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Req.	6/23/93	AK
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date: _____
Approved By: _____

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

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
  [ ] Other _____

(Office Use Only)

FEE	
$	
Administrative Surcharge	$
Minimum Fee	$
TOTAL FEE	$

Paid [ ] Check # _____
Collected by: _____

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
Date Issued 8-29-90
Control #
Permit # 1706-90

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

Block 1427.02 Lot 10
Work Site Location 244 Constitution Drive. Bricktown New Jersey 08723
Owner in Fee Highland Pointe Dev Co. Inc
Address 317 Brick Boulevard Bricktown NJ 08723
Tele. (201) 477-2300
Contractor
Address Same As Above

Tele. ( )
Lic. No. or Bldrs. Reg. No. 07621
Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Req.	JUL 30	
[ ] All	Proto	
[ ] 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				

B. BUILDING CHARACTERISTICS

Use Group Present R3 Proposed
Constr. Class Present Proposed
No. of Stories 2
Height of Structure 22 Ft.
Area—Largest Floor 1150 Sq. Ft.
Total Bldg. Area/All Floors 2300 Sq. Ft.
Volume of Structure 27,561 Cu. Ft.
Total Land Area Disturbed 7,500 Sq. Ft.

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

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

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

(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

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 8-29-90
Control #
Permit # 1706-90

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

Block 1427.02 Lot 10
Work Site Location 344 Constitution Drive
Bricktown New Jersey 08723
Owner in Fee Highland Pointe Dev Co Inc
Address 317 Brick Boulevard
Bricktown NJ 08723
Tele. (201) 477-2300
Contractor
Address Same As Above

Tele. ( )
Lic. No. or Bldrs. Reg. No. 07621
Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
[ ] No Plans Req.			Type:				
[ ] All	Proto		Footing			9/14/90	
[ ] Footing			Foundation			10-4-90	
[ ] Foundation			Slab				
[ ] Frame			Frame	3/24/91		5/27/91	
[ ] Other			Insulation				
Joint Plan Review Required:			Finishes:				
[ ] Elec. [ ] Plumb. [ ] Fire			Energy				
SUBCODE APPROVAL			Mechanical				
[X] CO [ ] LCCO [ ] CA			TCO				
Date: 7/16/91			Other				
Approved By:			Final				

B. BUILDING CHARACTERISTICS

Use Group Present R3 Proposed
Constr. Class Present Proposed
No. of Stories 2
Height of Structure 22 Ft.
Area—Largest Floor 1150 Sq. Ft.
Total Bldg. Area/All Floors 2500 Sq. Ft.
Volume of Structure 27,561 Cu. Ft.
Total Land Area Disturbed 7,500 Sq. Ft.

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

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

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

(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

5-24-93- Garage grader changed to triple from micro lam- F.floor ~~pd~~ frame calls for triple double installed JL

5/27 OK as per letter JL

Add-on to Permit
EXISTING Prefab- FIREPLACE

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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

Block 1427.02 Lot 18
Work Site Location 844 Constitution Dr
Owner in Fee High Land Pointe Del.
Address
Tele. ( ) 477-2306
Contractor SAME
Address
Tele ( ) 07621
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 PREFAB FIREPLACE

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All	4/15/93	
[ ] 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				

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 $ 1000
3. Total (1+2) $ 1000

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

(Office Use Only)
FEE $ 15

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

Keady - Keogh & Progressive
Fuel - will call

R# 0338277

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # MAY 17 93 0 J 5 8 8 0

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

Block 1427.02 Lot 10
Work Site Location 849 Constitution Dr.
Highland Point — Brick
Owner in Fee TOFE Inc. II
Address Brick

Tele. ( )
Contractor Seabreeze Electric
Address 1794 Todd Rd
Toms River
Tele. (908) 505-6868
Lic. No. 7066
Federal Emp. No. _____ or Social Security No. 138-56-0858

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
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: _____
Approved by: _____

SUBCODE APPROVAL
[✓] CO [ ] CCO [ ] CA
Date: 6-30-93
Approved By: B. Rowlands

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Rough			5-19-93	BJR
Temporary			5-19-93	BJR
Constr. Serv.				
TCO				
Other				
Service				
Final			6-30-93	BJR
Temp. Cut-in-Card Date Issued			5-19-93, #24	
Final Cut-in-Card Date Issued			6-30-93 #26	

PP.

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.

Signature—Contractor Seal

[✓] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
18		Fixtures (1)	
40		Receptacles (2)	
20		Switches (3)	
78		Total 1 + 2 + 3	18 -
	___ Kw	Range	
	___ Kw	Oven(s)	
	___ Kw	Surface Unit	
	___ hp	Dishwasher	
	___ hp	Garbage Disposal	
	___ Kw	Dryer	
	___ Kw	A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
7		Smoke Detectors	
	___ hp	Whirlpool/spa	
		Pool Bonding	
	___ hp	Pool Filter Motor	
		Pool Lights	
	___ Kw	Water Heater(s)	
1	7 Kw	Central heat: oil, gas or elec.	
	___ Kw	Baseboard Heat Units	
		Thermostats	
	___ hp	Heat Pump	
	___ hp	Pump(s)	
	___ Amp	Motor Control Center/Sub Panels	
		Signs	
	___	Light Standards	
	___ hp	Motors—Fractional H.P.	
	___ hp	Motors—All Others	
	___ Kw	Transformers	
	___ Kw	Generators	
1	100 Amp	Service Entrance	33 -
	___	Other	

Paid [ ] Check # 3315
Collected by: _____

Administrative Surcharge	$ _____
Minimum Fee	$ _____
DCA Training Fee	$ _____
TOTAL FEE	$ 81. -

U.C.C. Form F-1208 RPF 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 6/24/93
Date Issued
Control #
Permit # 1706-90 update

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

Block 1427.02 Lot 10
Work Site Location 844 Constitution Dr
Owner in Fee Highland Pointe Dev.
Address 317 Buck Blvd
Tele. (____)
Contractor
Address
Tele. (____)
Lic. No.
Federal Emp. No. or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[X] Fire Plans Approved
Date: 6/23/93
Approved by:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 7/8/93
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other Fireplace			7/8/93	
Other				
Other				

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

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		33
OTHER prefab fireplace		

Administrative Surcharge $ 33-
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-1408 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Date Issued 8-29-90
Control #
Permit # 1706-90

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

Block 1427.02 Lot 10
Work Site Location 844 Constitution Drive, Bricktown, New Jersey 08723
Owner in Fee Highland Pointe Dev. Co. Inc.
Address 317 Brick Boulevard, Bricktown New Jersey 08723
Tele. (201) 477-2300
Contractor
Address SAME AS ABOVE

Tele. ( )
Lic. No. 07621
Federal Emp. No. or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present R3 Proposed
Building Sewer Size 4" 3"
Water Service Size 160 lbs
Estimated Cost of Plumbing Work $ 3,000.

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[X] Plumb. Plans Approved
Date: 7-27-90
Approved by:

SUBCODE APPROVAL:
[X] CO [ ] CCO [ ] CA
Approved by:
Date: 6-29-93

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough			5/12/93	
Water				
Sewer				
Fixtures				
Gas ~~Equipment~~			5/12/93	
Gas Final				
Solar				
TCO				

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.

Signature Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	15.-
5	~~Urinal/Bidet~~ LAV.	25.-
1	Bath Tub	5.-
	Lavatory	
1	Shower	5.-
	Floor Drain	
1	Sink	5.-
1	Dishwasher	5.-
	Drinking Fountain	
1	Washing Machine	5.-
2	Hose Bibb	
1	Gas Piping	15.-
	Fuel Oil Piping	
1	Water Heater	5.-
1	~~Steam Boiler~~ Furnace	15.-
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
1	~~Water~~ Air Cooled A/C or ~~Refrigeration Unit~~	15.-
	Sewer Connection	
1	Water Service Connection	
1	Gas Service Connection	
	Active Solar System	
1	Other Vent Stack	10.-

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: TOTAL $ 125.-

U.C.C. Form F-130A 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

LEZGUS

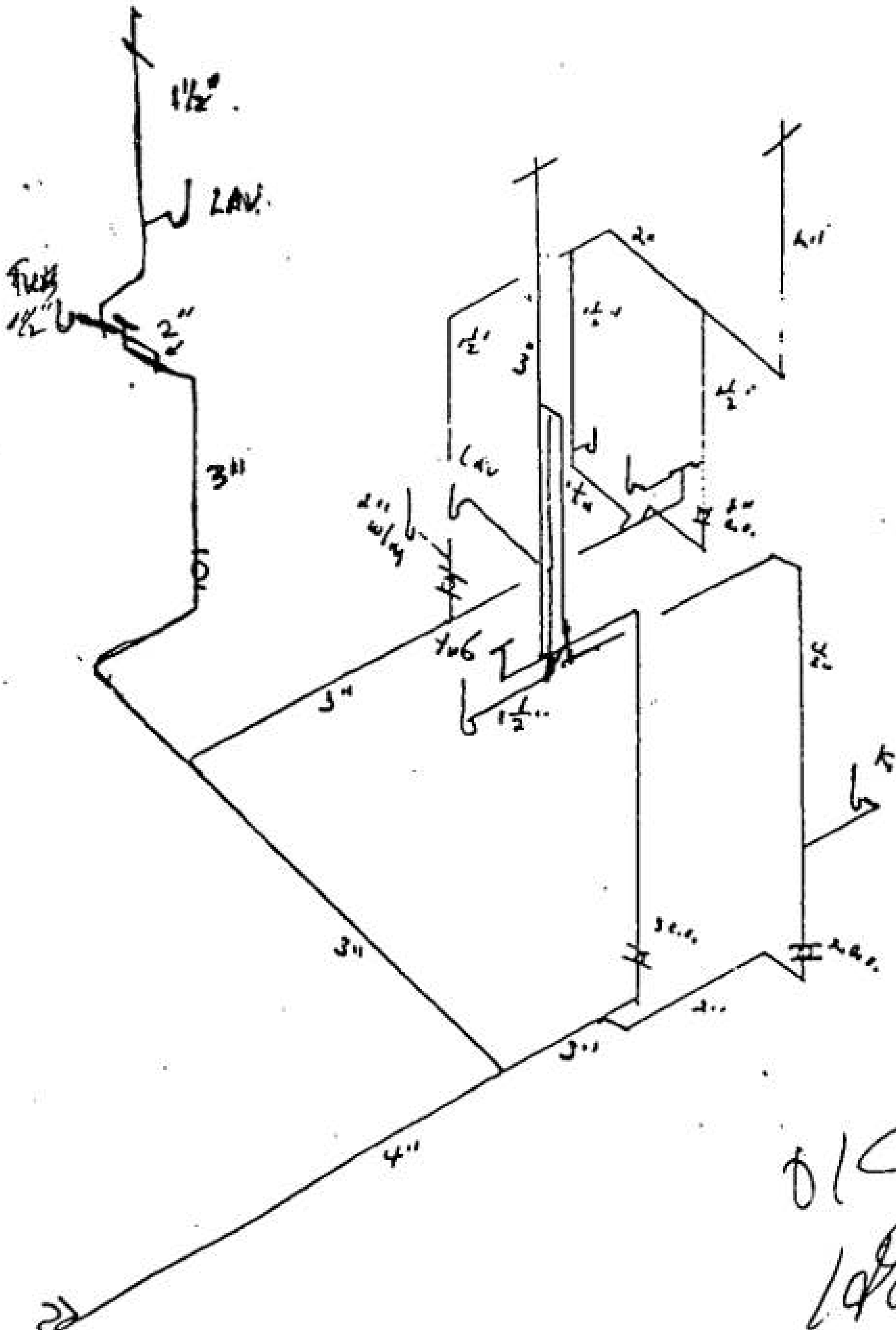
PLUMBING & HEATING INC. LIC. 3092

Highland Pointe

516 FISCHER BLVD. TOMS RIVER, N.J. 08753

349·3322 **892·3322** **367·3322**

Winding River Construction
Contemporary 3 Bath



OK
[illegible]
10/28/76

PLUMBING & HEATING, INC. 110-3092

516 FISCHER BLVD. TOMS RIVER, N.J. 08753

349·3322 892·3322 367·3322

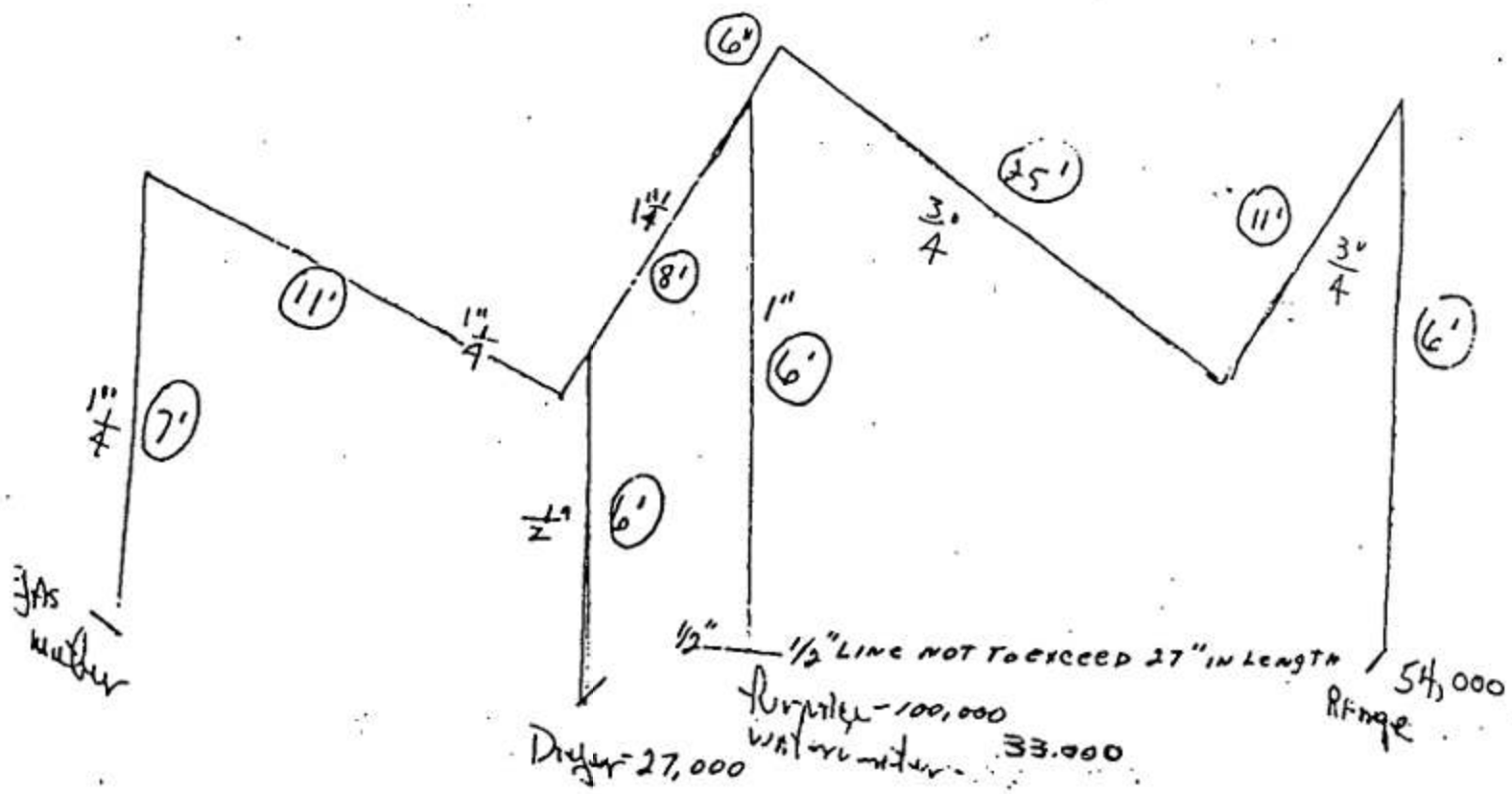
Contemporary

4-1-86

O.L. 10/14/86

TOTAL 212,000 BTU

Longest Run 68'



H R N DEVELOPMENT COMPANY

DATE	INVOICE NO.	DESCRIPTION	INVOICE AMOUNT	DEDUCTION	BALANCE
6-18-93	61093	1427.02/10 F/PL FEE	48.00	.00	48.00
		TOTALS	48.00	.00	48.00

CHECK DATE 6-22-93 | CHECK NUMBER 1240

PLEASE DETACH THIS PORTION AND RETAIN FOR YOUR RECORDS

New Jersey Natural Resources Conservation Program

OCEAN COUNTY SOIL CONSERVATION DISTRICT

714 Lacey Road, Forked River, NJ 08731
Telephone: 609-971-7002

RECEIVED JUN 24 1993

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK

PROJECT: HIGHLAND POINT SCD NO.: 1888

BLOCK NO.(s) 1427.01 LOT NO.(s) 40, 68

1427.07 9, 15

Complete Compliance ☒ Temporary Compliance ☐

BLOCK NO.	LOT NO.	CONDITIONS
1427.02	10	APPLICANT RESPONSIBLE FOR COMPLETE GERMINATION OF ALL SEEDED AREAS. TOUCHUP BARE AREAS.

Total Fees Due: $ —

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: [signature]

Date: 6/21/93

Distribution: White-Township Canary-Applicant Pink-District

RESIDENTIAL WARRANTY CORPORATION

P.O. BOX 641, HARRISBURG, PA 17108

TO: Municipal Construction Official

FROM: Residential Warranty Corporation

SUBJECT: CONFIRMATION OF HOME ENROLLMENT & WARRANTY COVERAGE

This will serve as notification that the home listed below has been accepted and approved for enrollment in the Residential Warranty Corporation ten-year program. This also affirms that the Limited Warranty Agreement has been transmitted this date to the Builder named below for delivery to the Purchaser at settlement.

BUILDER NAME: Highland Point Dev/Erwin Fisch

PURCHASER(S) NAME: _____

Blk 14 x 7.07

LEGAL ADDRESS OF HOME ENROLLED: 15 (Lot) Highland Pointe (Development)

Brick (City) Ocean (County) NJ (State)

RWC ENROLLMENT #: 417783

DATE: December 21, 1988

RWC SEAL:

PENNSYLVANIA 717-939-1971 OUT-OF-STATE 1-800-247-1812

ADDENDUM RE: BLOCK/LOT 1427.07/15

e wish to advise you that the property located on Sally Ike Road, southerly subdivision of which the Lot you are purchasing forms a part, is know as 1427, Lot 4, and it is owned by the Township of Brick. While this property is cant and, has not been put to any use since 1978, it was used prior to that s the Brick Township Municipal Landfill.

he Brick Township Landfill, as with any landfill accepting household waste, ie potential to create explosive methane gas which, depending upon prevailing :ions, may migrate off-site; this condition is correctable through the use of evacuation system.

Robert Bratter — 2-13-93

BUYER: Robert Bratter — DATE:

Denise Bratter — 2/13/93

BUYER: Denise Bratter — DATE:

May 25, 1993

Construction Department
Township of Brick
Chambersbridge Road
Brick, NJ

Re: B 1427.02, L 10

Gentlemen:

Please be advised that (3) 2 x 12 's were substituted for (2) 1 3/4 x 11 7/8 micro lams in the garage of the residence being constructed on the above referenced block and lot.

I have examined the actual construction with the (3) 2 x 12 's and have approved same as it is evident that the installed beam will definitely sustain the anticipated loading.

Very truly yours,

Pieter W. van Aartrijk, AIA, P.E.

PIETER W. VAN AARTRIJK, A.I.A., P.E.
ARCHITECT - ENGINEER - PLANNER

83 TOPANEMUS LANE

FREEHOLD, NEW JERSEY 07728
(908) 462-3920

SIZING FOR WATER AND SEWER SERVICES

Property Owner HIGHLAND POINTE Date 7-27-90

Property Address 844 CONSTITUTION DR. Block 1427.02 Lot 10

Zoning _____ Use Group _____

Contractor LEZGOS License No. Registration 4974

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu) Water Units	(dfu) Drainage Units
1. Water Closet	3	(3) 9	( )
2. Lavatory	5	(1) 5	( )
3. Bath Tub	1	(2) 2	( )
4. Shower Stall	1	(2) 2	( )
5. Kitchen Sink	1	(2) 2	( )
6. Service Sink		( )	( )
7. Laundry Tray		( )	( )
8. Dishwasher	1	(1) 1	( )
9. Washing Machine	1	(3) 3	( )
10. Urinal		( )	( )
11. Floor Drain		( )	( )
12. Drinking Fountain		( )	( )
13. Air Conditioner (water cooled)		( )	( )
14. Dental Unit		( )	( )
15. Lawn Sprinkler No. of Heads		( )	( )
16. Fire Sprinkler No. of Heads		( )	( )
17.		( )	( )
18.		( )	( )

Total 24

Gallons per minute 16.4

Size of Service 1"

Date: 7-27-90

Approved: _____
Brick Township Plumbing Inspector

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
458-7000

CERTIFICATE OF COMPLIANCE

Date 7-12-93

NAME W & F Developers

ADDRESS 317 Brick Blvd. Brick, NJ

PROPERTY LOCATION 844 Constitution Drive

Account No. V084560 Block 1427.02 Lot 10

I hereby certify that the above applicant has complied with all Rules and Regulations of this Authority and has paid all required fees and charges.

For the Authority Kevin Brent

Department of Engineering

Jerome J. Tansey, P.E., P.P.
Municipal Engineer
(201) 477-3000, Ext. 273

Richard E. Garnett, L.S., P.P.
Municipal Surveyor/Planner
(201) 477-3000, Ext. 277
Fax: (201) 920-4850

MAJOR SUBDIVISION CHECKLIST

DEVELOPMENT: Highland Pointe PLANNING BD: 1530

CONTRACTOR: Highland Pointe Dev. Co. Corp.

BLOCK 1427.02 LOT 10 SECTION

ADDRESS 844 Constitution Drive, Bricktown NJ 08723

ABOVE ITEMS MUST BE COMPLETED, BEFORE ACCEPTING PLOT PLAN

	ACCEPTABLE	DEFICIENT	REMARKS
1) SURVEY/PLOT, SIGNED & SEALED:	✓		
2) RESOLUTION COMPLIANCE	✓		
3) INSPECTION FEES POSTED	8/24/90 ✓	✓	*
4) PERFORMANCE BOND POSTED	✓		
5) STREET LIGHTING MONEY POSTED:	✓		
6) PROPOSED GRADING	8/24/90 ✓	✓	* New Plan attached
7) PRELIMINARY SITE PLAN SIGNED SEALED:	✓		
8) PORTION OF SITE PLAN ATTACHED:	✓		

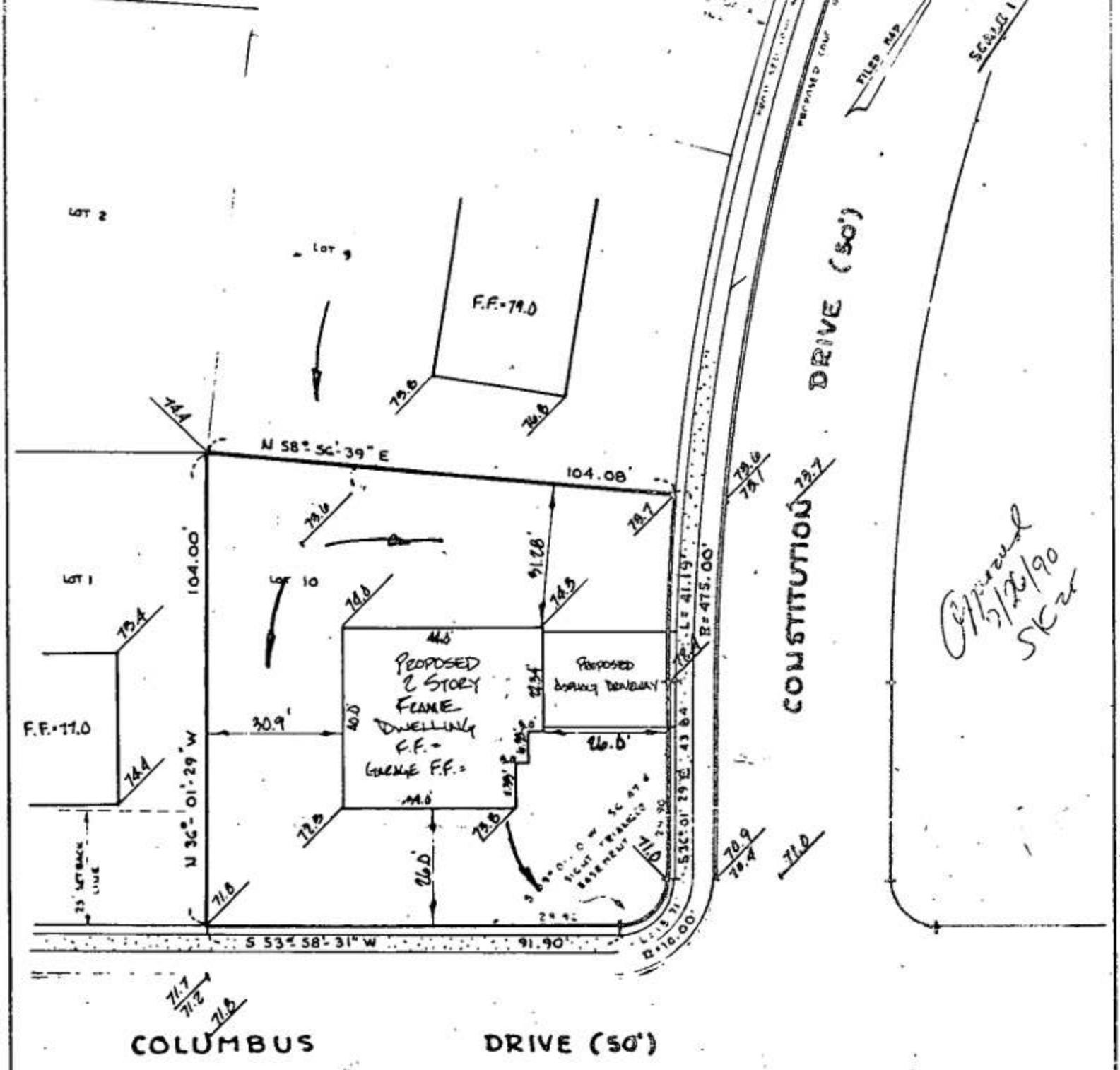
ACCEPTED: ✓

SIGNED DATE

REJECTED: ✓ REASON (S) * show finished floor of house and garage — Requires additional Inspection money

Postel 7/27/90

SIGNED DATE



Approved 5/22/90 SKR

79.4 = Design Elevation

Model: 4 Bedroom Contempo w/ Basement

OFFSETS SHOWN HEREIN ARE NOT TO BE USED AS A BASIS FOR CONSTRUCTION OF FENCES OR OTHER PERMANENT STRUCTURES

THIS SURVEY DOES NOT PURPORT TO IDENTIFY ENCROACHMENTS UTILITIES SERVICE LINES OR STRUCTURES BELOW GRADE IF ANY EXCEPT AS SPECIFICALLY NOTED HEREON

THIS CERTIFICATION IS MADE ONLY TO THE NAMED PARTIES FOR PURCHASE AND/OR MORTGAGE OF HEREIN DELINEATED PROPERTY BY THE NAMED PURCHASER NO RESPONSIBILITY OR LIABILITY IS ASSUMED BY SURVEYOR FOR USE OF SURVEY FOR ANY OTHER PURPOSE INCLUDING BUT NOT LIMITED TO USE OF SURVEY FOR SURVEY APPEAL RESALE OF PROPERTY OR ANY OTHER PERSON NOT LISTED IN CERTIFICATION EITHER DIRECTLY OR INDIRECTLY

ALSO KNOWN AS BLOCK 1427.02 LOT 10
AS SHOWN ON BRICK TOWNSHIP TAX MAP

Grading Plan

BLOCK 1427.02 LOT 10

FINAL MAJOR SUBDIVISION OF STAG'S LEAP

BRICK TOWNSHIP

OCEAN COUNTY NEW JERSEY

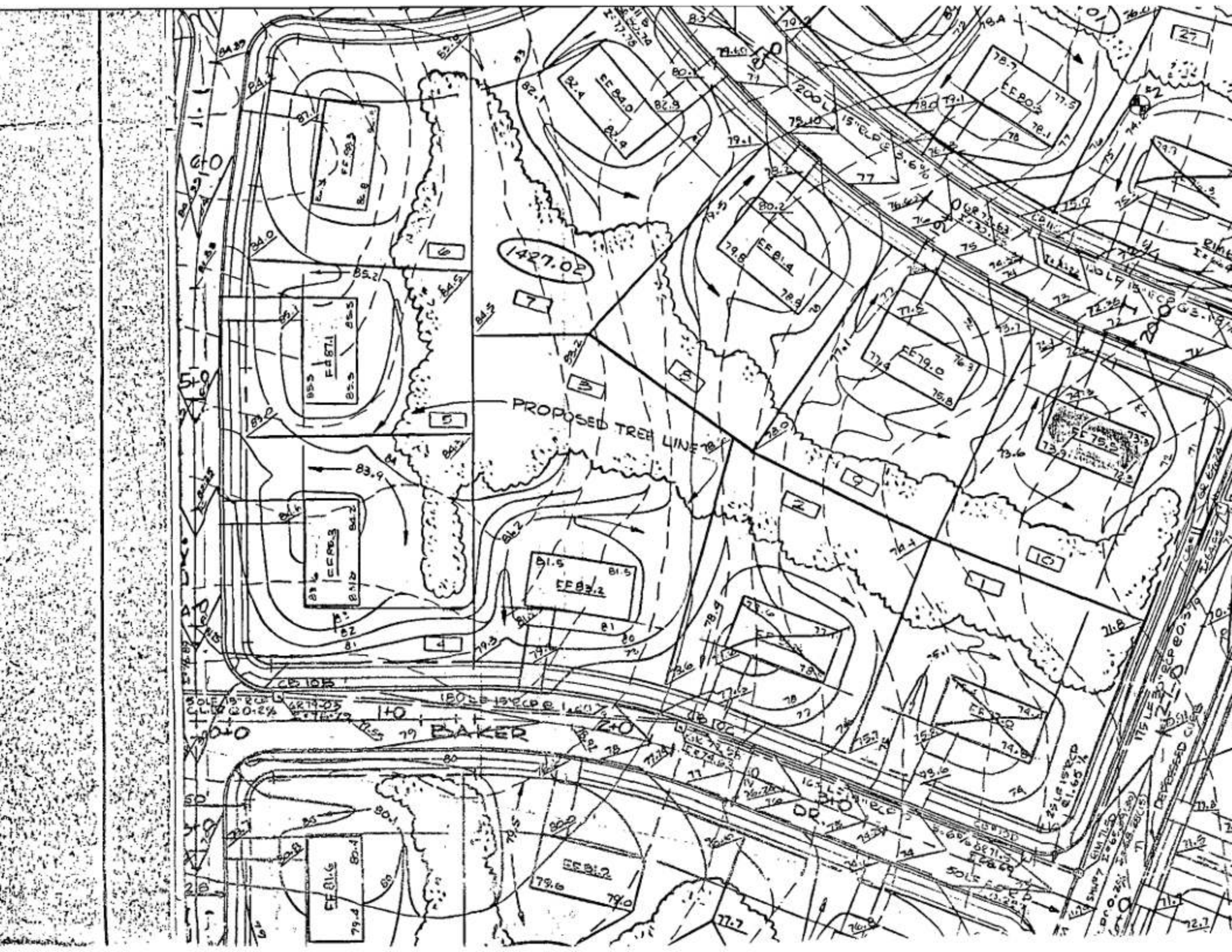
MAP FILE NO H-1087 DATE FILED 9/12/90

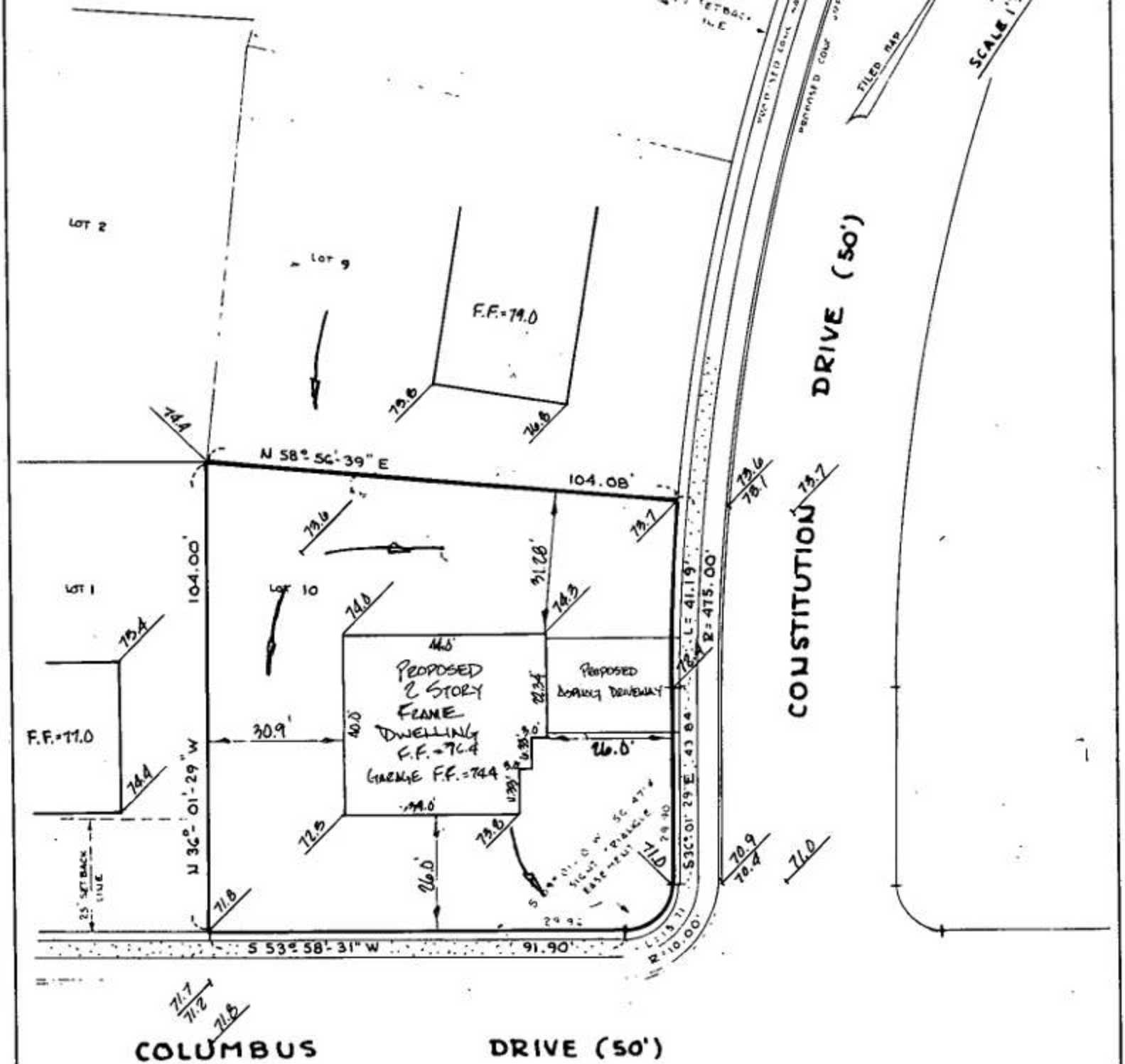
PREMISES SHOWN HEREON HAVE NOT BEEN SURVEYED.

DIMENSIONS SHOWN HAVE BEEN TAKEN FROM THE FILED MAP

FELLOWS, READ & ASSOCIATES, INC.
CONSULTING ENGINEERS
AND LAND SURVEYORS
310 MAIN STREET
TOMS RIVER NEW JERSEY 08753

JOSEPH R. READ, P.E. & L.S.
Professional Engineer & Land Surveyor N.J. Lic No. 10301


PROPOSED TREE LINE
BAKER
DR.
1427.02
EE 84.0
EE 87.1
EE 80.3
EE 81.5
EE 79.0
EE 79.2
EE 81.6
EE 81.2
EE 80.2
EE 79.2
1
2
3
4
5
6
7
8
9
10
27



754 = Design Elevation

Model: 4 Bedroom Contempo w/ Basement

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Grading Plan

BLOCK 1427.02 LOT 10

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BRICK TOWNSHIP

OCEAN COUNTY NEW JERSEY

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310 MAIN STREET

TOMS RIVER NEW JERSEY 08753

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Department of Engineering

Jerome J. Tansey, P.E., P.P.
Municipal Engineer
(201) 477-3000, Ext. 273

Richard E. Garnett, L.S., P.P.
Municipal Surveyor/Planner
(201) 477-3000, Ext. 277
Fax: (201) 920-4850

MAJOR SUBDIVISION CHECKLIST

DEVELOPMENT: Highland Pointe PLANNING BD: 1530

CONTRACTOR: Highland Pointe Dev. Co. Inc

BLOCK 1427.02 LOT 10 SECTION

ADDRESS 844 Constitution Drive, Bricktown NJ 08723

ABOVE ITEMS MUST BE COMPLETED, BEFORE ACCEPTING PLOT PLAN

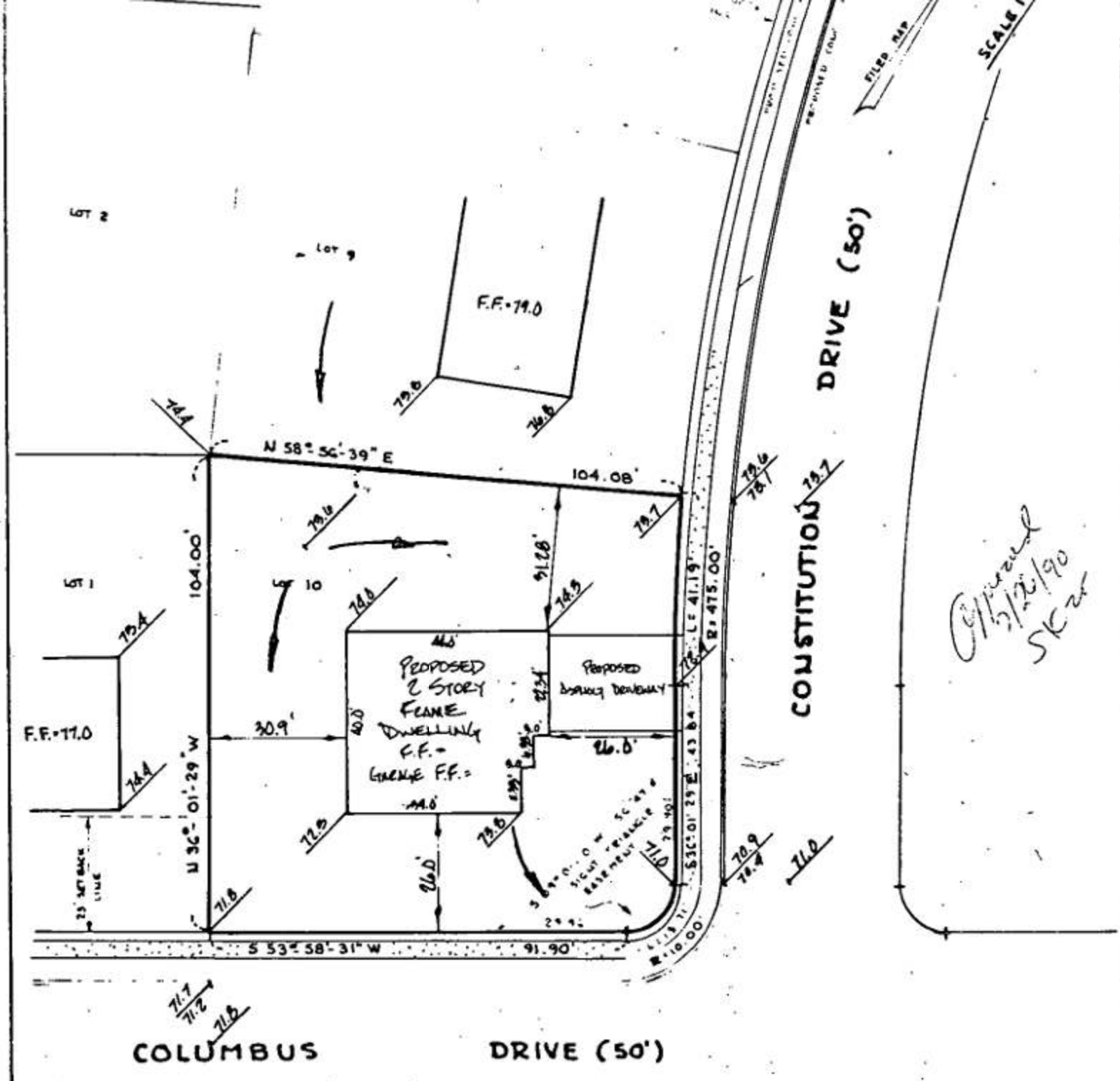
	ACCEPTABLE	DEFICIENT	REMARKS
1) SURVEY/PLOT, SIGNED & SEALED:	✓		
2) RESOLUTION COMPLIANCE	✓		
3) INSPECTION FEES POSTED		✓	*
4) PERFORMANCE BOND POSTED	✓		
5) STREET LIGHTING MONEY POSTED:	✓		
6) PROPOSED GRADING		✓	*
7) PRELIMINARY SITE PLAN SIGNED SEALED:	✓		
8) PORTION OF SITE PLAN ATTACHED:	✓		

ACCEPTED: _____

_____
SIGNED DATE

REJECTED: ✓ REASON (S) * show finished floor of house and garage - Requires additional Inspection money

Postel 7/27/90
SIGNED DATE



154 = Design Elevation.

Model: 4 Bedroom Contempo w/ Basement

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Grading Plan

BLOCK 1427.02 LOT 10

FINAL MAJOR SUBDIVISION OF STAG'S LEAP

BRICK TOWNSHIP

OCEAN COUNTY NEW JERSEY

MAP FILE NO H-1087 DATE FILED 9/12/89

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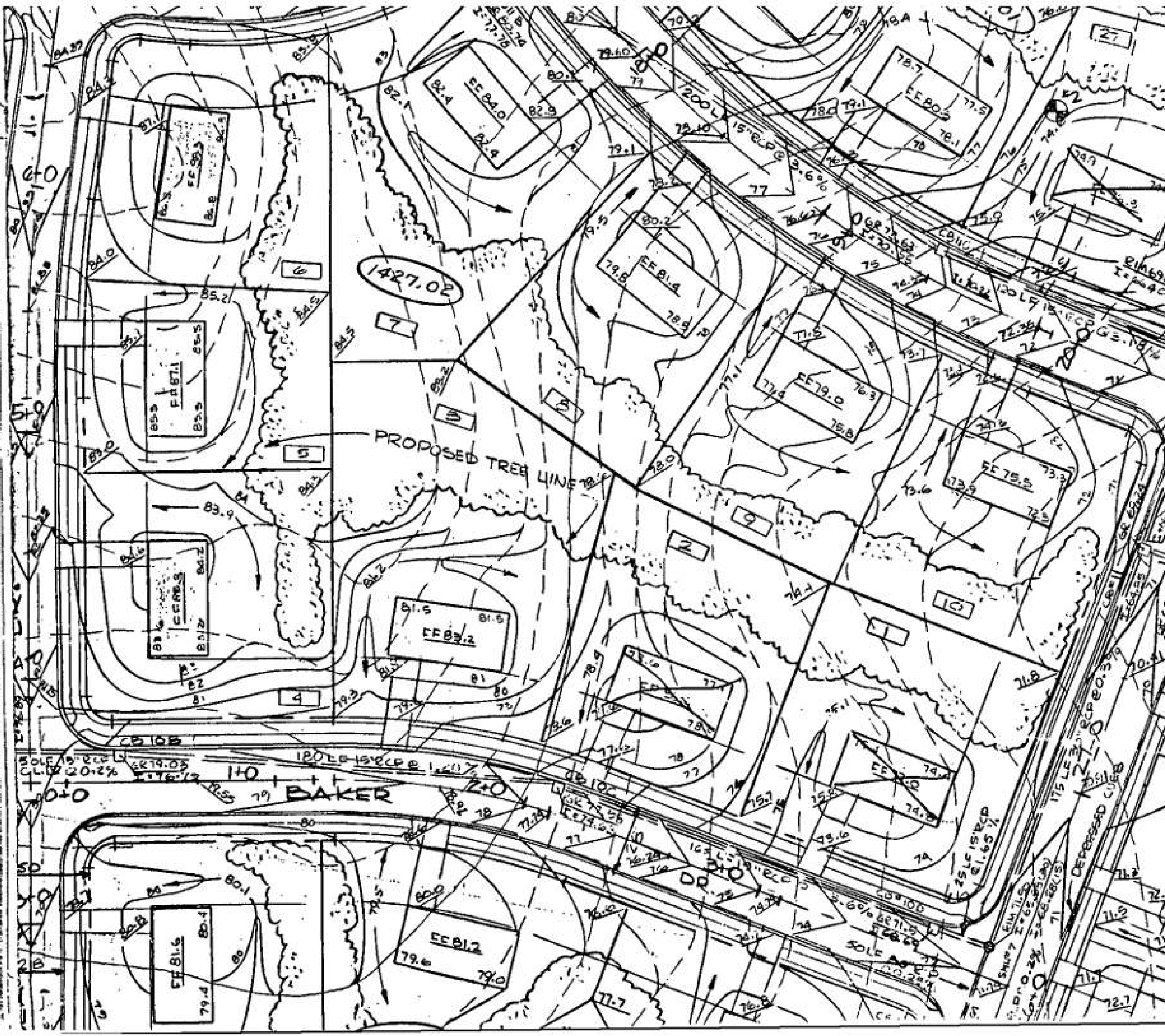
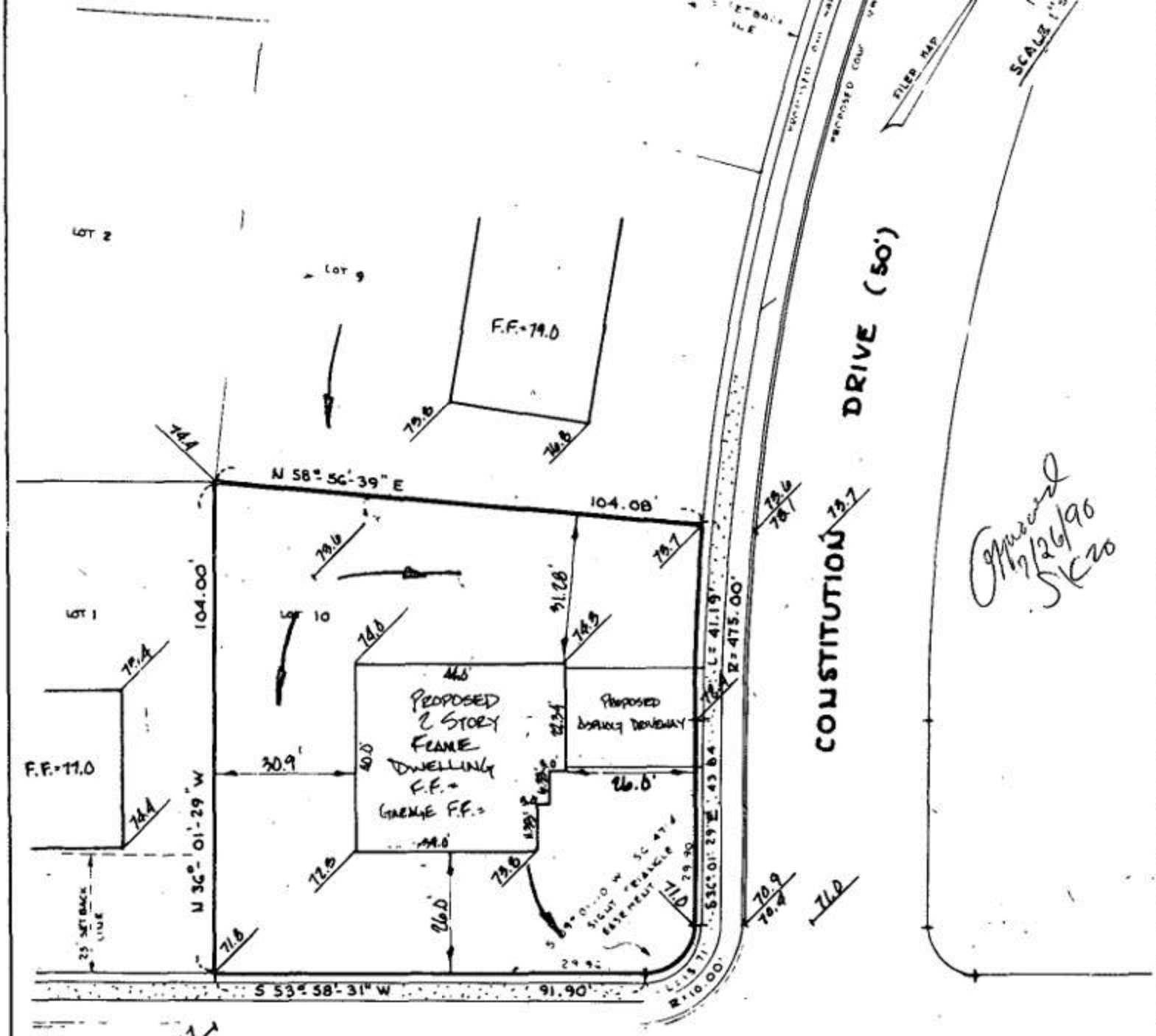

PROPOSED TREE LINE
1427.02
BAKER
DR.
DEPRESSED CURB
EF 84.0
EF 80.2
EF 81.4
EF 79.0
EF 75.5
EF 87.1
EF 83.2
EF 81.6
EF 81.2
CB10B
CB10C
CB10D
200 LF 15" RCP
120 LF 15" RCP
180 LF 15" RCP @ 1.20%
1+0
2+0
5+0
6+0
1
2
4
5
6
7
8
9
10
27



844 Constitution DR

154 = DESIGN ELEVATION

MODEL: 4 BEDROOM CONTEMPO W/ BASEMENT

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OCEAN COUNTY NEW JERSEY

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