BLOCK 110.08 LOT 6 QUALIFICATION CODE _____ ADDRESS (SITE) 17 GRISTMILL RD. PERMIT NO. _____

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Propsed Work Site at: MILLCREEK MEADOWS
2. Name of Owner in Fee: U.S. HOME CORPORATION Tel. [redacted]
   Address 800 WEST MAIN ST. / FREEHOLD, N.J. 07728 (street / municipality / zip code)
3. Ownership in Fee: U.S. HOME CORPORATION Public ____ Private ✓
4. Principal Contractor: 800 WEST MAIN ST. Tel. (732) 363-3435
   Address FREEHOLD, N.J. 07728
   License No. OR, if [redacted] 005409 Exp. Date _____
   Federal Employee [redacted] FAX: (____) _____
5. Architect or Engineer RHM ASSOC. Tel. (609) 985-9885
   Address 12000 LINCOLN DR WEST MARLTON NJ
6. Responsible Person in Charge of Work MJ STARACE
   Tel. (732) 363-3435 FAX (____) _____

V. FEE SUMMARY (for office use only)

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

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	2	
2. Height of Structure	30 ft.	
3. Area — Largest Floor	1668 sq. ft.	
4. New Building Area	3087 sq. ft.	
5. Volume of New Structure	56939 cu. ft.	
6. Construction Classification	5B	
7. Total Land Area Disturbed	1500 sq. ft.	
8. Flood Hazard Zone	NO	
9. Base Flood Elevation	ft.	
10. Wetlands yes		
no	✓	
11. Max. Live Load		
12. Max. Occupancy Load		

II. PROPOSED WORK

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work									
2.	☑ New Building	80,000								
3.	☐ Addition									
4.	☐ Alteration									
5.	☑ Fire Protection	3000								
6.	☑ Plumbing	5500								
7.	☑ Electrical	3000								
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition									
	TOTAL COSTS	88,800								

OPTIONAL (for office use only)

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☑ Prototype Processing

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

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No. of dwelling units:

Before Construction 0
After Construction 1
Net Gain or Loss 1

B. NON-RESIDENTIAL

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

LDS HW-B 10113281

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 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 MICHAEL STARACE

Address U.S. HOME CORPORATION
800 WEST MAIN ST.
FREEHOLD, N.J. 07728

Telephone (908) 363-3435

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: _____

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

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition			
Building	_____	Energy	_____	Other	_____
Electrical	_____	Barrier Free	_____		_____
Plumbing	_____	Flood Hazard	_____		_____
Fire Protection	_____	As Built Elevation Cert.	_____		_____
Mechanical	_____	Other	_____		_____

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

CERTIFICATE

Date Issued 4-28-98
Control #
Permit # 98-40

IDENTIFICATION

Block 110.08 Lot 6
Work Site Location 17 Gristmill Rd
Howell, NJ 07731
Owner in Fee/Occupant U.S. Home Corp
Address 800 West Main St
Freehold, NJ 07728
Tele. ( ) [redacted]
Contractor
Address Same

Tele. ( ) Fax ( )
Lic. No. or Bldrs. Reg. No. 005409
Federal Emp. No. [redacted]

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R-3
Maximum Live Load 40
Construction Classification 5B
Maximum Occupancy Load
Description of Work/Use:

Completion and approval of construction of single family dwelling Manchester Model

(58,447 c.f.)
(3031 s.f.)

☒ 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.

☐ TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

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

☐ CERTIFICATE OF CLEARANCE — LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:

[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (_____ years); see file

☐ CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ CERTIFICATE OF COMPLIANCE

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____.

Est Cost 88.800.00

Fee $
Paid [ ] Check No.
Collected by:

Withheld.
CONSTRUCTION OFFICIAL

U.C.C. F260
(rev. 3/96)

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

APPLICATION FOR CERTIFICATE

Date Received
Date Permit Issued
Control #
Permit #
Date Issued

IDENTIFICATION

Block _____ Lot _____
Work Site Location MILLCREEK MEADOWS

Owner in Fee U.S. HOME CORPORATION
Address 800 WEST MAIN ST.
FREEHOLD, N.J. 07728
Tele. (908) 363-3435

Contractor U.S. HOME CORPORATION
Address 800 WEST MAIN ST.
FREEHOLD, N.J. 07728
Tele. (908) 363-3435
Lic. No. 005407
Federal Emp. No. [redacted]
or Social Security No. _____

ACTION

☑ CERTIFICATE OF OCCUPANCY
☐ CERTIFICATE OF CONTINUED OCCUPANCY ☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF COMPLIANCE ☐ TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
USE GROUP _____ Previous _____ R4 Current

FINAL COST OF CONSTRUCTION: $ 88,800.-
(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 or Compliance, please explain why in the space below.

DESCRIPTION OF WORK/USE:
SINGLE FAMILY DWELLING
MANCHESTER A BASEMENT

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 or Compliance will be completed by the date on the Certificate.

SIGNED: _____
OWNER/AGENT

☐ Owner
☑ Agent

U.C.C. Form F-270B

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued 1-13-98
Control #
Permit # 98-40

IDENTIFICATION Block 110.08 Lot 6
Work Site Location 17 GRISTMILL RD

Owner in Fee U.S. HOME CORPORATION
Address 800 WEST MAIN ST. FREEHOLD, N.J. 07728

Tel. (908) 363-3435

Contractor
Address U.S. HOME CORPORATION 800 WEST MAIN ST. FREEHOLD, N.J. 07728
Tel. ( )
Lic. No. or Bldrs. Reg. No. 005409
Fed. Emp. No [redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

(5847 (LF) 3,031 SF 1 BASEMENT
SINGLE FAMILY DWELLING.
MANCHESTER A ENGLISH ELEV. FLR PLAN

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 $ 88,800.—

Construction Official

Date

PAYMENTS (Office Use Only)

Building	421.00
Electrical	244.00
Plumbing	304.00
Fire Protection	80.00
Elevator Devices	
Other	
DCA Training Fee	4.00
Cert. of Occupancy	20.00
Other Sewer	220.00
Total	1173.00
Check No.	028813
Cash	
Collected by	1/14/98

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

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

(see reverse side)

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms to the approved plans and the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval given.

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

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode;
2. Foundations and all walls up to grade level prior to back filling;
3. All structural framing and connections prior to covering with finish or infill material; plumbing underground services; rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

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

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 1-13-98
Date Issued
Control #
Permit # 98-40

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

Block 110.08 Lot 6
Work Site Location 17 GRISTMILL RD
Owner in Fee U.S. HOME CORPORATION
Address 800 WEST MAIN ST. FREEHOLD, N.J. 07728
Tele. ( ) U.S. HOME CORPORATION
Contractor 800 WEST MAIN ST. FREEHOLD, N.J. 07728
Address
Tele. (732) 363-3435 Fax ( )
Lic. No. or Bldrs. Reg. No. 005409
Federal Emp. No. [redacted]

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
SINGLE FAMILY DWELLING
MANCHESTER A
ENGLISH BASEMENT
EXPAND FLOOR PLAN
9' BASEMENT
WALK-OUT DOOR

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 4-29-98
Approved by: Wlk

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing	* 1/16/98	1/16	1/21/98	DLL
Foundation			2/2/98	RE.
Slab		2/4/98	[illegible]	[illegible]
Frame			3/10/98	DLL
Barrier-Free				
Insulation			3/13/98	DLL
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			4/29/98	DLL
Barrier-Free	5/29/98		3/4/98	DLL

* TOO WET 1/16/98.

B. BUILDING CHARACTERISTICS

Use Group Present Proposed R4
Constr. Class Present Proposed 5B
No. of Stories 2
Height of Structure 30 Ft.
Area — Largest Floor 1668 Sq. Ft.
New Bldg. Area/All Floors 3087 Sq. Ft.
Volume of New Structure 56939 Cu. Ft.
Total Land Area Disturbed 1500 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 80,000
2. Alteration $
3. Total (1+2) $ 80,000

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

FEE (Office Use Only)
$

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

U.C.C. F110 (rev. 3/96)
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received 1-13-98
Date Issued
Control #
Permit # 98-40

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

Block 110.08 Lot 12

Work Site Location 17 GRISTMILL PA

Owner in Fee U.S. HOME CORPORATION
Address 800 WEST MAIN ST. FREEHOLD, N.J. 07728

Tele. ( ) U.S. HOME CORPORATION
Contractor 800 WEST MAIN ST.
Address FREEHOLD, N.J. 07728

Tele. (732) 363-3435 Fax ( )
Lic. No. or Bldrs. Reg. No. 005409
Federal Emp. No. [redacted]

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
SINGLE FAMILY DWELLING
MANCHESTER A
ENGLISH BASEMENT
EXPAND FLOOR PLAN
9' BASEMENT
WALK-OUT DOOR

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 4-29-98
Approved by:

INSPECTIONS

Type:	Failure Date	Failure Date	Approval Date	Initial
Footing *	1/16/98	1/16	1/21/98	DLC
Foundation			2/2/98	JE
Slab	2nd fail			
Frame			3/11/98	DLC
Barrier-Free				
Insulation			3/13/98	DLC
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			4/29/98	DLC
Barrier-Free	5th fail		3/19/98	DLC

17 Gristmill

* TOO WET 1/16/98.

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

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	R4
Constr. Class	Present 1	Proposed	5B
No. of Stories	1 1/2		
Height of Structure	30	Ft.	
Area — Largest Floor	1668	Sq. Ft.	
New Bldg. Area/All Floors	3087	Sq. Ft.	
Volume of New Structure	56939	Cu. Ft.	
Total Land Area Disturbed	1500	Sq. Ft.	

Est. Cost of Bldg. Work:

1. New Bldg.	$	80,000
2. Alteration	$	
3. Total (1+ 2)	$	80,000

FEE (Office Use Only)

$

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 1-13-98
Date Issued
Control #
Permit # 98-40

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

Block 110.08 Lot 6

Work Site Location 17 GRISTMILL DR

Owner in Fee U.S. HOME CORPORATION
Address 800 WEST MAIN ST.
FREEHOLD, N.J. 07728

Tele. ( ) U.S. HOME CORPORATION
Contractor 800 WEST MAIN ST.
Address FREEHOLD, N.J. 07728

Tele. (732) 308-3435 Fax ( )
Lic. No. or Bldrs. Reg. No. 005409
Federal Emp. No. [redacted]

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
SINGLE FAMILY DWELLING
MANCHESTER A
ENGLISH BASEMENT
EXPAND FLOOR PLAN
9' BASEMENT
WALK-OUT DOOR

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 4-29-98
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing	1/14/98	1/16	1/21/98	MC
Foundation			2/2/98	TE
Slab		2nd Insp		
Frame			3/11/98	MC
Barrier-Free			1/1	
Insulation			3/13/98	MC
Finishes			1/1	
Energy				
Mechanical	1st Insp			
TCO				
Other				
Final			4/7/98	MC
Barrier-Free	5th Insp.		3/16/98	MC

3/12/98 * TOO WET 1/16/98

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	R4
Constr. Class	Present 1	Proposed	5B
No. of Stories	1.21		
Height of Structure	30	Ft.	
Area — Largest Floor	1668	Sq. Ft.	
New Bldg. Area/All Floors	3087	Sq. Ft.	
Volume of New Structure	56939	Cu. Ft.	
Total Land Area Disturbed	1500	Sq. Ft.	

Est. Cost of Bldg. Work:
1. New Bldg. $ 80,000
2. Alteration $
3. Total (1+2) $ 80,000

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

FEE (Office Use Only)

$

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

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

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

2/20/24
Sheath. Right Side on plate nailing. Repair spots Right Side.
2/26/24 Sheathing FAILED same problems, mistake corrected on 2/20/24 As Appears to not Approved.

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued 1-13-98
Control #
Permit # 98-40

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

Block 110.08 Lot 6
Work Site Location 17 GRISTMILL RD.
U.S. HOME CORPORATION
Owner in Fee/Occupant 800 WEST MAIN ST.
Address FREEHOLD, N.J. 07728

Tele. (908) 363-3435
Contractor Brother's Inc., Gary T. Nolan, Elect. Contr.
Address P.O. Box 756
Hainesport, NJ 08036
Tele. ( ) 265-9171 Fax ( )
Lic. No. 11081 3/31/00
Federal Emp. No. [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R4
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 3000.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date:
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough			3/10	CP
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			3/10	CP
Final	Call 4-20-98		4-24-98	EMA

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued 3/10/98

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 4/24/98
Approved by: C. Phillips

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.

Joe Nolan
Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
20		Lighting Fixtures
65		Receptacles
32		Switches
6		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		.....
123		TOTAL NUMBERS
		Pool Permit/with UW Lights
		Storable Pool/Spa/Hot Tub
1	GAS	KW Elec. Range/Receptacle
		KW Oven/Surface Unit
1	GAS	KW Elec. Water Heater
1	GAS	KW Elec. Dryer/Receptacle
1		KW Dishwasher
1		HP Garbage Disposal
1		KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
		HP Motors 1/+ HP
		KW Transformer/Generator
1	200	AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light
		.....
		.....

FEE (Office Use Only)

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

U.C.C. F120 (rev. 3/96)

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

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued 1-13-98
Control #
Permit # 98-40

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

Block 110.08 Lot 17
Work Site Location 17 GRISWOLD RD
U.S. HOME CORPORATION
Owner in Fee/Occupant 800 WEST MAIN ST.
Address FREEHOLD, N.J. 07728

Tele. (908) 363-3435
Contractor Brother's Inc., Gary T. Nolan, Elect. Contr.
Address P.O. Box 756
Hainesport, NJ 08036
Tele. ( ) 265-9171 Fax ( )
Lic. No. 11081 3/31/00
Federal Emp. No. [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R4
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 3000.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
Joint Plan Review Required:		
[ ] Building		
[ ] Plumbing		
[ ] Fire		
[ ] Elevator		
[ ] Elec. Plans Approved		
Date:		
Approved by:		

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Rough			3/10	CP
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			3/10	CP
Final	Call 4-20-98		4-24-98	EBA

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued 3/10/98

SUBCODE APPROVAL
[X] CO / [ ] CCO [ ] CA
Date: 4/24/98
Approved by:

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's Signature/Contractor's Seal and Signature

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
4-100	Fluor.	Lighting Fixtures
65		Receptacles
32		Switches
6		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		.....
123		TOTAL NUMBERS
		Pool Permit/with UW Lights
		Storable Pool/Spa/Hot Tub
1	GAS	KW Elec. Range/Receptacle
		KW Oven/Surface Unit
1	GAS	KW Elec. Water Heater
1	GAS	KW Elec. Dryer/Receptacle
1		KW Dishwasher
1		HP Garbage Disposal
1		KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
		HP Motors 1/+ HP
		KW Transformer/Generator
1	200	AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light
		.....
		.....

FEE (Office Use Only)	
TOTAL NUMBERS	$
Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F120 (rev. 3/96)

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

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued 1-13-98
Control #
Permit # 98 40

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

Block 110.08 Lot 6
Work Site Location 17 GRISTMILL RD
Owner in Fee/Occupant U.S. HOME CORPORATION
Address 800 WEST MAIN ST. FREEHOLD, N.J. 07728
Tele. ( ) [illegible]
Contractor Brother's Inc., Gary T. Nolan, Elect. Contr.
Address P.O. Box 756 Hainesport, NJ 08036
Tele. ( ) 255-9171 Fax ( )
Lic. No. 11081 3/31/00
Federal Emp. No. [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R4
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 3000.-

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 4/22/98
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough			3/10	CP
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			3/10	CP
Final	Call 4-20-98		4-24-98	CP

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued 3/10/98

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's Signature/Contractor's Seal and Signature
1108

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
26		Lighting Fixtures
05		Receptacles
32		Switches
6		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		.....
123		TOTAL NUMBERS
		Pool Permit/with UW Lights
		Storable Pool/Spa/Hot Tub
1	CAT	KW Elec. Range/Receptacle
		KW Oven/Surface Unit
1	CAT	KW Elec. Water Heater
1	CAT	KW Elec. Dryer/Receptacle
1		KW Dishwasher
1		HP Garbage Disposal
1		KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
		HP Motors 1/+ HP
		KW Transformer/Generator
1	200	AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light
		.....
		.....

FEE (Office Use Only)	
	$
Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F120 (rev. 3/96)

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

4-20-98

1) REAR Ø OUT SIDE NOT CONNECTED

2) DISHWASHER NOT CONNECTED

3) EXSHUST FAN OVER STOVE NOT INSTALLED

4) CENTER ISLAND NO Ø KITCHEN

STOPED INSP NOT READY

4-24-98 OK

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Date Issued 1-13-98
Control #
Permit # 98-40

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

Block 110.08 Lot 6
Work Site Location 17 GRISTMILL RD.
Owner in Fee U.S. HOME CORPORATION
Address 800 WEST MAIN ST. FREEHOLD, N.J. 07728
Tele. (908) 363-3435
Contractor U.S. HOME CORPORATION
Address 800 WEST MAIN ST. FREEHOLD, N.J. 07728
Tele. ( )
Lic. No. 005409
Federal Emp. No [redacted] or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS.

Use Group Present Proposed R4
Constr. Class. Present Proposed 5B
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location: BASEMENT
Total Est. Cost of Fire Prot. Work $ 300.— [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date:
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date: 4/17/98
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other FRAME	3/10/98		Comms to B-VOT	
Other FRAME			3/11/98	
Other FINAL	4-14-98		S/D NOT WORKING	

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 PUBLIC
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	6	
Heat Detectors		
TOTAL	6	
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	4	
OTHER		

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

U.C.C. Form F-140A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 1-13-98
Date Issued
Control #
Permit # 98-40

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

Block 110.08 Lot 6
Work Site Location 17 GRISTMILL RD
U.S. HOME CORPORATION
Owner in Fee 800 WEST MAIN ST.
Address FREEHOLD, N.J. 07728

Tele. (732) 363-3435
Contractor [illegible]
Address [illegible]
Tele. (908) 925 9003 Fax ( ) [illegible]
Lic. No. 4714
Federal Emp. No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R4
Building Sewer Size 3" PVC SCH 40 Public Sewer ✓ Private Septic
Water Service Size 1" PEX Public Water ✓ Private Well
Est. Cost of Plumbing Work $ 5500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] LCCO [ ] CA
Date: 4/23/98
Approved by: [signature]

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Slab				
Rough			3/6/98	DG
Water			3/27/98	DG
Sewer				
Fixtures				
Gas Equipment				
Gas Piping			3/6/98	DG
Solar				
TCO FINAL			4/23/98	DG

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's Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
3	Water Closet	
	Urinal/Bidet	
2	Bath Tub	
5	Lavatory	
1	Shower	
	Floor Drain	
1	Sink	
1	Dishwasher	
	Drinking Fountain	
1	Washing Machine	
2	Hose Bibb	
1	Water Heater	
	Fuel Oil Piping	
4	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
1	Sewer Connection	
1	Water Service Connection	
	Stacks	
1	Other DISPOSAL	
	Other	
	Other	

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

CUT-IN-CARD

MUNICIPALITY HOWELL TWP.

LOCATION 17 GRISTMILL RD UTILITY CO GPU

MILLCREEK BLK 110.08 LOT 6

OWNER U.S. HOMES OCCUPANT N/A

"Installation in the above premises has been inspected and is in accordance with N.E.C. and DCA requirements."

☒ FINAL ☐ TEMPORARY This approval void after ____ days

DESCRIPTION OF SERVICE 200 Amp 1Ø3W 240/120 UG

INSTALLED BY BROTHERS ELE LICENSE NO 11081

DATE 3/10/98 PERMIT # 98-40 INSPECTOR C. Gillin

☒ CALLED IN 3/10/98 Lic. No: 6515

U.C.C. Form F-350B 1 WHITE—UTILITY 2 CANARY—OFFICE/FILE 3 PINK—OFFICE/CONTRACTOR

INSPECTION DEPARTMENT CHECK LIST
NEW DEVELOPMENT/COMMERICAL/NEW CONSTRUCTION
PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

	DATE
FINAL BUILDING INSPECTION	4-23-98
FINAL PLUMBING INSPECTION	4-23-98
FINAL ELECTIC INSPECTION	4-24-98
FINAL FIRE INSPECTION	4-17-98
FOUNDATION LOCATION SURVEY	2-10-98
SOIL CONSERVATION APPROVAL	4-13-98
MUA/MCBH/WELL/SEPTIC	—
HOW CERTIFICATE	4-1-98
FINAL SURVEY	4-9-98
ENGINEERING RELEASE	4-23-98
FINAL COAH PAYMENT	4-16-98
APPLICATION FOR CO	✓

COMMERICAL

SITE PLAN FIRE LANE/ZONES	
SITE PLAN COMPLIANCE	
FOOD HANDLERS LICENSE	

BLOCK 110-08 LOT 6

NAME Millcreek

12/97

TO THE ADMINISTRATIVE OFFICE: #9208 Date: 12/5/97

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

1. LOCATION OF PROPERTY MILLCREEK MEADOWS
   BLOCK 110.08 LOT 6
2. NAME OF LANDOWNERS: U.S. HOME CORPORATION
   800 WEST MAIN ST.
   FREEHOLD, N.J. 07728
3. OCCUPANT:
4. PROPOSED USE:

✓	New Construction	✓	Residence
	Remodeling		Business
	Accessory Bldg.		Mfg.

5. Survey of lot, showing public roads, existing buildings and proposed construction or use for which this application is made.
   (a) Name of road/stree GRISTMILL RD
   (b) Main road frontage 111 feet
   (c) Setback from right-of-way 26 feet
   (d) Sideyard clearance 10 feet
   (e) Rearyard clearance 58 feet
   (f) Depth of lot from right-of-way 129 feet
   (g) Dimensions of bldg: width 55 feet 46 Depth (feet)
   (h) Highest point of bldg. above restablished grade 30 feet
   (i) Area of lot 10809
   (j) Sketch showing existing buildings and proposed construction
6. Buildings: Use SINGLE FAMILY DWELLING R4
   Number of stories 2 Basement YES
   Useable floor space: First floor 1598 sq. ft. Second Floor 1450
   Off street parking space sq. ft.
7. REMARKS:

WITNESS: (signed)

DATE ISSUED: 12/17/97 Fee 10.00
Administrative signature: Vito Marracco

8. Complies with the provisions of the Howell Township Land Use Ordinance:

(a) Reivew of other agencies:
(b) Revisions made:
(c) Bonds posted:
(d) Taxes and Assessments paid:
(e) DOT approval, if any:
(f) Soid Conservations, if any:
(g) Monmouth County Planning Board
(h) Howell Township MUA

PERMIT APPROVAL GRANTED: _____

PERMIT APPROVAL DENIED: _____

Upon the basis of the above application, the statements which are made part hereof, the proposed usage is _____ found to be in accordance with the Township Land Use Ordinance and is hereby _____ approved for the following zone: _____.

Vito Marinaccio 12/17/97
ADMINISTRATIVE OFFICER

DATE WHEN APPLICATION RECEIVED: _____ DATE RULED ON: _____

If certification is refused, reason for refusal: _____

RHM ASSOCIATES
ARCHITECTURE □ PLANNING □ INTERIOR DESIGN

February 14, 1997

Building Department
Township of
Howell, NJ 08527

Re: Mill Creek Meadows
(Centennial Pointe)
PN# 1019.26x

Dear Township of Howell:

This letter serves as record that RHM Associates approves the construction of the Manchester Model on Lot 6 of Block 110.08 at Centennial Pointe. This model shall be constructed by US Home, Inc.

If you have any questions regarding the above, please do not hesitate to call.

Sincerely Yours,

Russell H. McCorkle, RA, PP, NCARB
President

□ PAVILIONS AT GREENTREE
□ 2000 LINCOLN DRIVE WEST SUITE D
□ MARLTON, NJ 08053-3403
□ (609) 985-9885 FAX (609) 985-4907

LOG OF TEST PIT

LOT: 6 BLOCK: 110.08 TEST PIT NO. 95 JOB NUMBER: 1234.012

TOWNSHIP: Howell JOB NAME: Centennial Point WEATHER: Sunny 45°F

SURFACE ELEVATION: 107.7' WATER ENCOUNTERED @: 102.9'

ESTIMATED SHWT @: 105.4'

TEST BY: Michael Bohrer REFERENCE NO: # 1818 DATE: 3/25/97

DEPTH (FEET)	SYMBOL	DESCRIPTION
0-		Surface Conditions - Topsoil with roots
-	TOPSOIL	12" of topsoil
1-		
-	SM	Tan fine-medium sand, little silt, moist, medium dense
2-		
-		
3-		
-	ML	Gray and orange mottled clayey silt, some fine-medium sand, very moist, medium
4-		
-		
5-	SM	Orange fine-medium sand, little silt, wet, dense
-		
6-		
-		
7-		
-		
8-		Test pit completed at 5'9" on 3/25/97
-		
9-		
-		
10-		
-		
11-		
-		

SOIL DESCRIPTION MODIFIERS:

TRACE	0 - 10%
LITTLE	10 - 20%
SOME	20 - 35%
AND	OVER 35%

FLANNERY, WEBB & HANSEN, P.A.

CONSULTING ENGINEERS
*LAND SURVEYORS * SITE PLANNERS*
LANDSCAPE ARCHITECTS
ENVIRONMENTAL CONSULTANTS

1255 ROUTE 70 * SUITE 22-S
LAKEWOOD, NEW JERSEY 08701
(908) 901-0550

DOC: 03234LOG.T95

New Jersey Natural Resources Conservation Program

FREEHOLD SOIL CONSERVATION DISTRICT
(Serving Middlesex and Monmouth Counties)

211 FREEHOLD ROAD
MANALAPAN, NEW JERSEY 07726
Tel: (732) 446-2300
Fax: (732) 446-9140

REPORT OF PARTIAL COMPLIANCE*

04/13/1998

TO : CONSTRUCTION OFFICIAL

TWP. : HOWELL

PROJ.: MILL CREEK MEADOWS

APPLICATION NO.: 95-0051

Block No.	Lot No.	Comments
110.08	6	17 Gristmill Road

This certifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance with the soil erosion and sediment control plan as certified by the Freehold Soil Conservation District and required by The Soil Erosion and Sediment Control Act of 1975 as amended (N.J.S.A. 4:24-39 et seq.)

*Pending continued compliance and establishment of a permanent vegetative cover by April 15th, 1998.

Authorized Signature _____

Distribution: WHITE-Municipal Construction Official
CANARY-Developer PINK-District GOLDENROD-Other
95-0051.93836

2-10 Home Buyers Warranty®

PRINTED 04/01/98

HOME BUYERS WARRANTY NJ050900

ALLUVIUM CORPORATE CENTER SUITE 6
VOORHEES, NJ 08043

CERTIFICATE OF PARTICIPATION IN NEW HOME WARRANTY PLAN OF HOME BUYERS WARRANTY

Notice: *REPRODUCTIONS OF THIS DOCUMENT ARE NOT ACCEPTABLE FOR WARRANTY COVERAGE. ANY MODIFICATIONS, ALTERATIONS OR REVISIONS MADE TO THIS DOCUMENT WITHOUT EXPRESS WRITTEN CONSENT OF NATIONAL HOME INSURANCE COMPANY "NHIC" (A RISK RETENTION GROUP) OR THEIR ADMINISTRATOR WILL VOID THE WARRANTY COVERAGE. THIS DOCUMENT IS NOT VALID UNLESS IT HAS BEEN SIGNED BY NHIC OR THEIR ADMINISTRATOR. IF CLOSING HAS NOT OCCURRED WITHIN NINETY (90) DAYS OF THE OFFERING DATE SET FORTH BELOW, THIS WARRANTY IS VOID.*

PLEASE TYPE OR PRINT

X 1. Homebuyer(s): SADIK, H.

Address of Home Enrolled: 17 GRISTMILL ROAD (Street) HOWELL (City) NJ (State) 07731 (Zip Code)

L 6/ B 110.08 (Lot/Block) (Subdivision) (County)

2. Builder Name: U.S. HOME CORPORATION (*) *S HBW Builder No. 4200-9008

X 3. Effective Date of Warranty ___ / ___ / ___ (Earlier of settlement date or first occupancy)
Month / Day / Year

4. Sales Price of Home $ ** 256,725.00 Total Rate Paid $ 128.37

A. Rate Formula for amount of sales price up to $250,000:

If Price Does Not Include Lot Multiply by 1.25		÷1,000 =		X		=		+		-		=	
	256,725		256.73		.50		128.37		30.00 XXXXXX		XXXXXX		128.37
	Sales Price (Up To $250,000)				Rate		Total Cost		If FHA/VA Home		Initial Fee		Amount Due

B. Rate Formula for amount of sales price exceeding $250,000:

If Price Does Not Include Lot Multiply by 1.25		÷1,000 =		X		=	
					2.50		
	Sales Price (Amount Over $250,000)				Rate		Additional Amount Due

** INSURED COVERAGE NOT TO EXCEED $2,000,000 **

5. ☐ Condominium ☐ Fee Simple ☐ Townhouse ☒ Single Family Detached

6. ☐ Low Rise (2 story) ☐ Mid Rise (3-5 story) ☐ High Rise (6 story or greater) ☐ Not applicable

Effective Date of Common Elements Coverage: ___ / ___ / ___ (date main structure housing individual units is completed)
Month / Day / Year

No common elements coverage will be provided unless all units in a building are enrolled.

X 7. Mortgagee Name ___

Street ___

City ___ State ___ Zip Code ___

CERTIFICATION OF ENROLLMENT

THIS CERTIFIES THAT THE ABOVE-DESCRIBED DWELLING UNIT IS ENROLLED IN THE HOME BUYERS WARRANTY NEW HOME WARRANTY PLAN AND THAT THE WARRANTY COST, RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED, HAS BEEN PAID IN FULL TO NATIONAL HOME INSURANCE COMPANY (A RISK RETENTION GROUP).

Offered by:
HOME BUYERS WARRANTY AS ADMINISTRATOR FOR NHIC

Gordon Patterson /ab

Date 04 / 01 / 98
Month / Day / Year

CHECK ONE (if applicable)
☐ FHA ☐ VA ☐ FmHA ☒ Other
X CASE # ___

HBW 202 GG 9/96 WHITE–Homebuyer(s) GOLDENROD–Municipality PINK, GREEN–HBW District YELLOW–Builder BLUE–Mortgagee

PLAN REVIEW RECORD
HOWELL TOWNSHIP FIRE BUREAU

DATE: 3/9/98 TYPE: RESIDENTIAL DIST#: 5

BLOCK: 110.08 LOT: 6 PERMIT#:

ADDRESS: 17 GRISTMILL RD

NAME: MILLCREEK

COMMENTS

REVIEWERS CODE: 0

FRAME INSPECTION REPORT

SCHEDULE DATE: 3/10/98 REMARKS FRAME-NOT APPROVED-RETURN DUCT ON "B" VENT IN ATTIC 19-132

REINSPECTION DATE: 3/11/98 REMARKS FRAME-APPROVED

REINSPECTION DATE: COMMENTS

****DATE FRAME PASSED: 3/11/98 INSPECTORS CODE: 2

FINAL INSPECTION REPORT

SCHEDULE DATE: 4/14/98 COMMENTS FINAL-NOT APPROVED- S/D IN HALL UPSTAIRS NOT WORKING 19-132

REINSPECTION DATE: 4/17/98 COMMENTS FINAL-APPROVED

REINSPECTION DATE: COMMENTS

****DATE FINAL WAS APPORVED: 4/17/98 INSPECTORS CODE: 3

OTHER INSPECTION REPORT

TOPIC:

SCHEDULE DATE: COMMENTS:

REINSPECTION DATE: COMMENTS:

REINSPECTION DATE: COMMENTS:

****DATE OTHER WAS COMPLETED: INSPECTORS CODE:

HISTORY

TO: HOWELL TOWNSHIP CONSTRUCTION INSPECTION DEPARTMENT
Attn: Plumbing Sub-Code Official

REF: DCA BULLETIN 87-1
N.J.A.C. 5:23-3.15(b)
NSPC 4.2.4

DATE 12/20/87

THIS IS TO CERTIFY THAT I, (Name) GREENTREE MECH. INC.,
(Business Address) 4171-B S. Black Horse Pike, Turnersville, NJ 08012
(Tel. No.) (609) 629-4711.

WILL INSTALL ALL SOLDERED JOINTS AND FITTINGS FOR THE POTABLE WATER SYSTEM
IN THE FOLLOWING BUILDING, (Owner) U.S. HOME CORPORATION,
(Address) 17 Greentree Rd 800 WEST MAIN ST. FREEHOLD, N.J. 07728,
(Block & Lot) 110.08 - 6.

USING SOLDER AND FLUX HAVING A LEAD CONTENT OF NOT MORE THAN 0.2 PER CENT
IN ACCORDANCE WITH THE ABOVE REFERENCES.

(Signature & Seal)
(Notarized if Homeowner)

ENGINEERING INSPECTION REPORT
TOWNSHIP OF HOWELL, N.J.

DATE RECEIVED: 4-23-98 INSPECTION REQUESTED BY:

CASE NUMBER: 2648A DEVELOPMENT: Mill Creek Meadows

BLOCK: 110.08 LOT: 6 SECTION: 455 @ Gustin Mill Rd

	BONDED	ACCEPTABLE	UNACCEPTABLE	
1. STREET RIGHT-OF-WAY:				
(a) Graded - Shoulder and/or Walk Area		✓		a
(b) Curb		✓		b
(c) Sidewalk		✓		c
(d) Driveway Apron		✓		d
(e) Drainage Facilities		✓		e
(f) Pavement (Base or Wearing Surface)		✓		f
(g) Construction Debris Removed		✓		g
2. LIGHTING INSTALLED OPERATIONAL:		✓		
3. TRAFFIC CONTROL DEVICES:				
(a) Sign (s) Traffic Control		✓		a
(b) Sign (s) Street		✓		b
(c) Sign (s) Handicap				c
(d) Marking (s) Pavement - Stop Lines	NA			d
(e) Fire Lane				e
4. SCREENING, FENCE (S) & LANDSCAPING:				
(a) Topsoil		✓		a
(b) Fertilizing & Seeding (Stabilized)	✓			b
(c) Shade Tree				c
(d) Shrubs	NA			d
(e) Trash Screening				e
(f) Screening (Fence or Plantings)				f
5. SOIL EROSION & SEDIMENT CONTROL:				
(a) Compliance - Certified Plan		✓		a
(b) Site Conditions - Field Observation		✓		b
6. DRIVEWAY:				
(a) Surface Pavement	Conc.	✓		a
(b) Base Pavement		✓		b
(c) Aggregate				c
(d) Side Entry (min. 30' from garage including turnaround)	N.A			d
7. SITE GRADING:				
(a) As-built Grading Plan demonstrating positive drainage, and variation from approved plan.		✓		a
(b) Retaining Walls	N.A			b
8. GENERAL CLEANUP:				
(a) Lot		✓		a
(b) Adjoining buffer, open space, conservation area and, lots		✓		b

RECOMMENDATION (S) AND/OR REQUIRED DOCUMENTATION:

___ Meets Engineering requirements - recommend consideration for issuance of Certificate of Occupancy.

✓ Meets winter conditions see below for bonding requirements.

___ Does not meet Engineering requirements - recommend Certificate of Occupancy not be considered until site conforms.

COMMENTS: $1500.00 STABILIZATION BOND / POSTED

4-27-98

M.C. Pinto 4-27-98

INSPECTOR DATE ENGINEER/STAFF

White-Engineering, Yellow-Construction Official, Pink-Applicant

2/96