RX - BLOCK 834 27 LOT 14-17 QUALIFICATION CODE C27-27 ADDRESS (SITE) 1651 Forge Boat Rd PERMIT NO. 00-0241

RECEIVED JAN 2 7 2000 DIV. OF INSPECTION

CONSTRUCTION PERMIT APPLICATION

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

1/28/00

I. IDENTIFICATION

1. Propsed Work Site at: 1651 Forge Boat Rd
2. Name of Owner in Fee: Robert & Margaret Munch Te [redacted]
   Address 2146 Village Rd, Sea Girt, NJ 08750 (street / municipality / zip code)
3. Ownership in Fee: Public ____ Private X
4. Principal Contractor: Owner Tel. ( ) ____
   Address ____
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Federal Employee No. ____ FAX: ( ) ____
5. Architect or Engineer ____ Tel. ( ) ____
   Address ____
6. Responsible Person in Charge of Work Margaret Munch
   Tel. [redacted]

Foundation Repair

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 60		
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	2		
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 62		

VI. BUILDING/SITE CHARACTERISTICS

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

II. PROPOSED WORK

	Est. Cost	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
1. ☐ Minor Work									
2. ☐ New Building		AS	1/27/00		1-28-00	FP			
3. ☐ Addition									
4. ☒ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	X2000.								

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No. of dwelling units:
Before Construction ____
After Construction ____
Net Gain or Loss ____

B. NON-RESIDENTIAL

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

LDS BR 10102491

U.C.C. F100-1 (rev 3/96)

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 X Margaret Munce Date 1/27/00

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 X Margaret Munce

Address _____

_____

Telephone (_____) _____

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.									
☐									
☐									

IMPORTANT
A.H.B.T. EXEMPT

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

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

X. CERTIFICATES ISSUED (office use only)

		DATE 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.				

0011
0241##
BLOCK 27 # 0.00
LOT 14 # 0.00
BUILDING 60.00
D.C.A. 2.00
TOTAL 62.00
CHECK 62.00
CHANGE 0.00
NO. 5 0010A005 12:55
02/01/00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 02/01/200(
Control #
Permit # 00-0241

UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 27 Lot 14 Qual

Work Site Location 1651 FORGE POND RD
FOUNDATION REPAIR
Owner in Fee MUNCH, ROBERT & MARGARET
Address 2146 VILLAGE RD
SEA GIRT, NJ 08750-
Telephone [redacted]

Contractor H O M E O W N E R
Address
Telephone ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. HO-

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
REPAIR EXISTING FOUNDATION W/ 3 PILASTERS ACROSS FRONT OF FOUNDATION AND ONE PILASTER ALONG SIDE FOUNDATION.

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 $ 2,000

PAYMENTS (Office Use Only)
Building 60
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
DCA Training Fee 2
Cert. of Occupancy 0
Other
Total 62
Check No. 1096
Cash
Collected By SC

Construction Official

02/01/2000
Date

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 01/27/2000
Date Issued 2/ // 00
Control # C27-27
Permit # 00-0241

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

Block 21 834 Lot 14 Qual
Work Site Location 1651 FORGE POND RD
FOUNDATION REPAIR
Owner in Fee MUNCH, ROBERT & MARGARET
Address 2146 VILLAGE RD
SEA GIRT, NJ 08750-
Tele [redacted]
Cont
Address

Tele.( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. HO-

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

REPAIR EXISTING FOUNDATION W/ 3 PILASTERS ACROSS FRONT OF FOUNDATION AND ONE PILASTER ALONG SIDE FOUNDATION.

Per Engineers Drwg

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[ ] No Plans Req.
[X] All 1-28-00 EG
[ ] Footing
[ ] Foundation
[ ] Frame
[ ] Other
Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

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

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 2,000
3. Total (1+2) $ 2,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	60
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 60
DCA Training Fee	$ 2

Paid [ ] Check # Collected by:

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 01/27/2000
Date Issued 2/11/00
Control # C27-27
Permit # 00-0241

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

Block 27 Lot 14 Qual
Work Site Location 1651 FORGE POND RD
FOUNDATION REPAIR
Owner in Fee MUNCH, ROBERT & MARGARET
Address 2146 VILLAGE RD
SEA GIRT, NJ 08750-
Tele [redacted]
Contractor
Address
Tele.( ) Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. NO-

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

REPAIR EXISTING FOUNDATION W/ 3 PILASTERS ACROSS FRONT OF FOUNDATION AND ONE PILASTER ALONG SIDE FOUNDATION.

Per Engineers Drwg

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	1-28-00	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

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

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 2,000
3. Total (1+2) $ 2,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	60
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 60
	DCA Training Fee	$ 2

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

ROBERT J. BALLIS, P.E.

Consulting Engineer

90 Driftwood Drive
Brick, NJ 08723
Phone (732) 477-6408
Fax (732) 477-1822

December 29, 1999

Mr. Frank Mizer
Township of Brick Building Department
401 Chambers Bridge Road
Brick, NJ 08723

RECEIVED
JAN 2 - 2000
DIV. OF INSPECTION

SUBJECT: Engineering Inspection
Existing Foundation Walls and Footings
Block 27, Lot 14-17
165 Forge Pond Road
Township of Brick, Ocean County, NJ
Project No. 99086

Gentlemen:

In accordance with the request of William Munch, we performed an Engineering Inspection at the above-captioned location on December 28, 1999. The results of our inspection are as follows:

1. The previously existing building, which was damaged by fire, has been removed. The front masonry foundation wall and the left side masonry foundation wall are remaining, together with the basement slab. There is no bracing of the front wall, therefore the top of the block has no lateral support.

2. Due to the slope of the property toward Forge Pond, the rear of the basement slab is approximately at grade. The foundation at the rear consists of a masonry wall resting on a concrete footing which is six (6) inches thick and sixteen (16) inches wide. The bottom of the footing is approximately thirty-two (32) inches below the top of the slab.

3. A six (6) foot deep hole was dug with a hand auger at the rear of the existing slab and no deleterious material was encountered--there being a combination of sand and gravel (copy of field notes included).

4. The walls which are remaining consist of eight (8) inch concrete block. The front wall contains one (1) pilaster. The front wall, which is approximately sixty-two (62) feet long, contains several cracks.

Based upon the results of our inspection, we wish to offer the following conclusions and recommendations:

1. The front wall should be provided with temporary bracing to prevent it from caving inward due to possible freezing of the ground behind the wall.

2. The existing wall, slab and foundation do not comply with present day codes. However, the walls could be repaired and reinforced with pilasters and be more than adequate to support the loads to be imposed thereon by the construction of a new two-story dwelling.

3. The front wall could be strengthened by inserting reinforcing bars vertically in the holes in the block, sixteen (16) inches on center, and filling the holes with a Portland Cement mortar. This procedure, in addition to the pilasters, should give the wall the support needed.

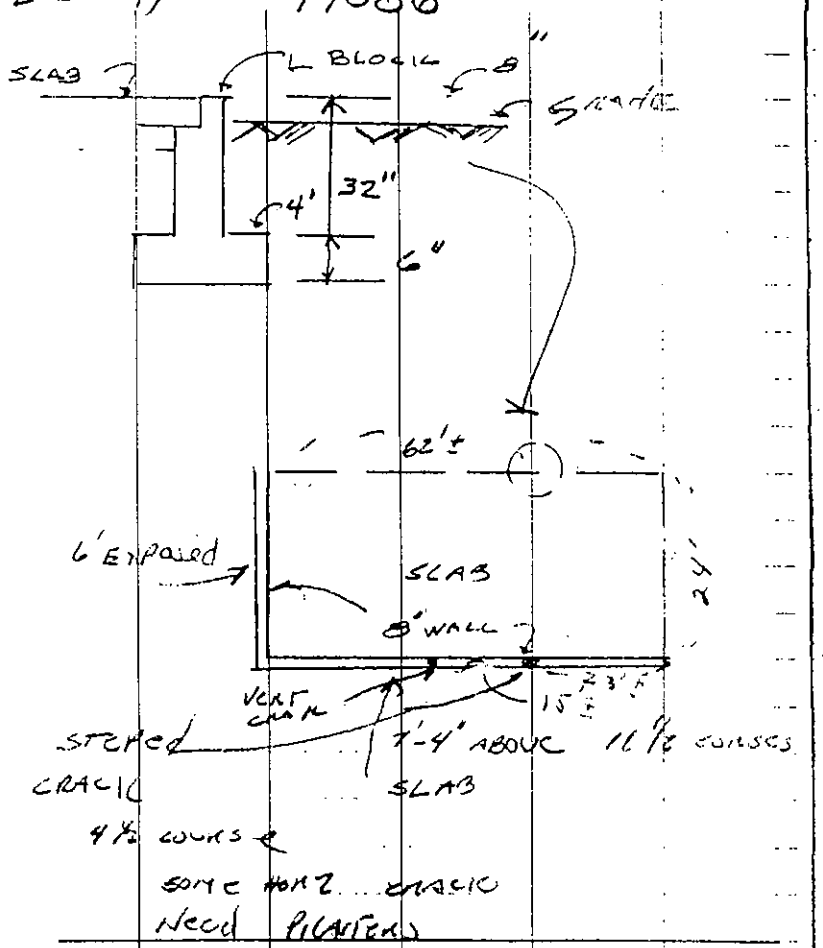
We trust that the above information will be of help to you. If you have any questions, please don't hesitate to call.

Very truly yours,

Robert J. Ballis, P.E.
Consulting Engineer
P.E. & L.S. No. 7966

RJB mfb
Enclosure: Field notes
Copy: William Munch

12-27-99 99086 AC JMO



Forge Pond Rd

Hand Boring 6' Deep
Sand & Gravel
N. Deciduous Mixture

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: 1651 Forge Road Road, Brick, NJ 08724
Block: 27 Lot: 14-17
Owner's Name: Robert & Margaret Munch
Owner's Mailing Address: 2146 Village Rd
Sea Girt, NJ 08750
Phone: [redacted]

BUILDING

Contractor: Owner - Robert Munch & Margaret Munch
Address: 2146 Village Rd
Sea Girt, NJ 08750
Phone#: [redacted]
Lis #
Federal Emp # or SSN

Technical Data

Description of Work:

Repair existing foundation w/ 3 pilasters across front of foundation & 1 pilaster along side foundation

Type of Work

___New Building
___Addition
___Alteration
___Roofing
___Asbestos Abatement
___Siding
___Fence
___Pool
___Demolition
___Sign _____sq ft

Building Characteristics

Use Group Present:_____ Proposed:_____
No of Stories:
Height of Structure:
Area of the largest floor:
Area of New Building:
Volume of Structure:
Total Land Disturbed:

Estimated Cost of Building Work: $2000.00

Signature: Margaret Munch
Please Print Name: Margaret Munch

ELECTRICAL

Contractor:
Address:
Phone#:
Lis #:
Federal Emp # or SSN

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	
Switches	
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	
Pool	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work:

Signature:
Please Print Name

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Fixtures Quantity

Water Closets_____
Urinals/Bidets_____
Bath Tub_____
Lavatory_____
Shower_____
Floor Drain_____
Sink_____
Dishwasher_____
Drinking Fountain_____
Washing Machine_____
Hose Bib_____
Gas Piping_____
Fuel Oil Piping_____
Water Heater_____
Steam Boiler_____
Hot Water Boiler_____
Sewer Pump_____
Interceptor/Separator_____
Backflow Preventer_____
Greasetrap_____
Water Cooled A/C or Refrig. Unit_____
Septic Tank Closure_____
Sewer Service Connection_____
Water Service Connection_____
Active Solar System_____
Auxiliary Meter_____
Sprinkler Heads_____
Sump Pump_____
Other:

Estimated Cost of Plumbing Work_____

Signature:_____

Please Print Name:_____

CONTRACTOR'S SEAL

FIRE

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Description of Work:

Heating Type: ____Gas ____Oil ___Electric ____Solar
Heating System is ___New ___Existing
Location of Furnace/Boiler:_____

Water Supply Source_____
Method of Valve Supervision_____
Local Alarm Supervision_____
Central Supervision:_____
Proprietary Supervision:_____

Flammable Storage Tanks _____capacity_____fuel
Combustible Storage Tanks_____capacity_____fuel
LPG Storage Tanks_____capacity_____fuel

Item Quantity

Wet Sprinkler Heads_____
Dry Sprinkler Heads_____
Total_____

Smoke Detectors_____
Heat Detectors_____
Total_____

Stand Pipes_____
Kitchen Hood Exhaust System_____

Pre-Engineered Systems:
CO2 Suppression_____
Halon Suppression_____
Foam Suppression_____
Dry Chemical_____
Wet Chemical_____

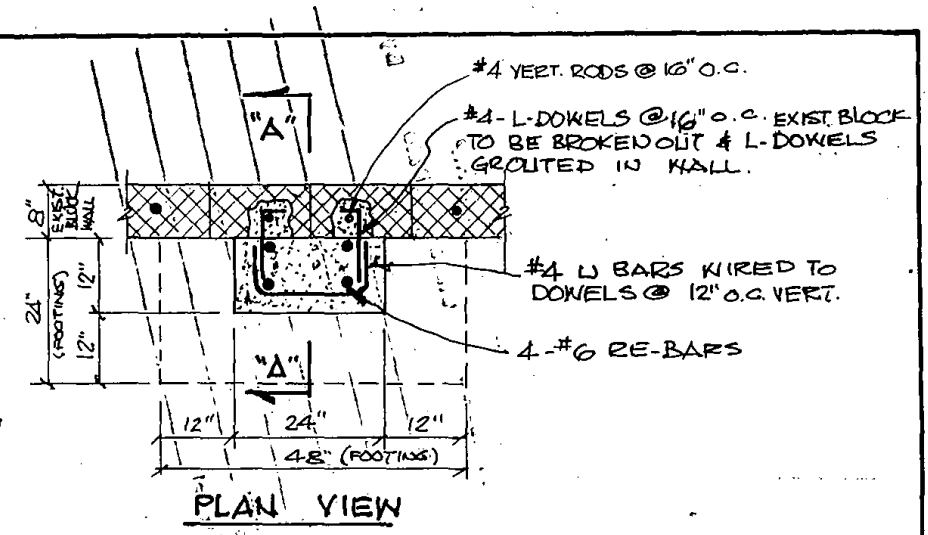
Gas/ Oil Fired Appliances:
Number of gas/oil fired appliances_____

Furnace_____
Gas/Wood Fireplace_____
Gas Logs_____
Wood Burning Stove_____
Other:

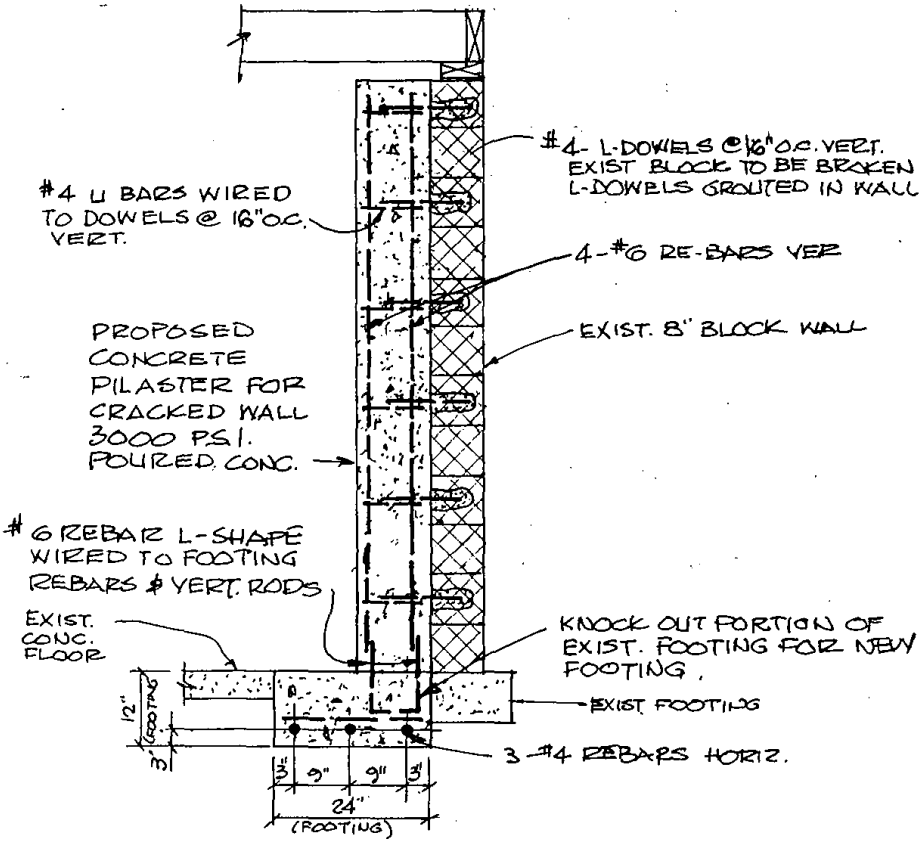
Estimated Cost of Fire Work_____

Signature:_____

Print Name:_____



PLAN VIEW



SECTION "A-A"

SCALE: 1/2"=1'-0"

REV	DESCRIPTION	DATE

PROPOSED CONCRETE PILASTER FOR CRACKED WALL
Block 27 Lots 14-17
165 Forge Pond Road
Township of Brick, Ocean County, NJ

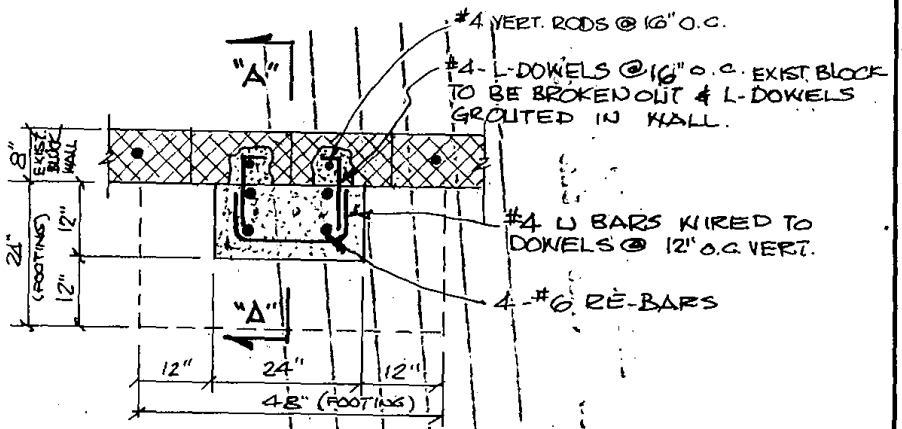
Robert J. Ballis
Prof. Engr. & Land Surveyor
N.J. Lic. No. 7966

Robert J. Ballis, P.E. & L.S.
Consulting Engineer
90 Driftwood Drive Brick, NJ 08723

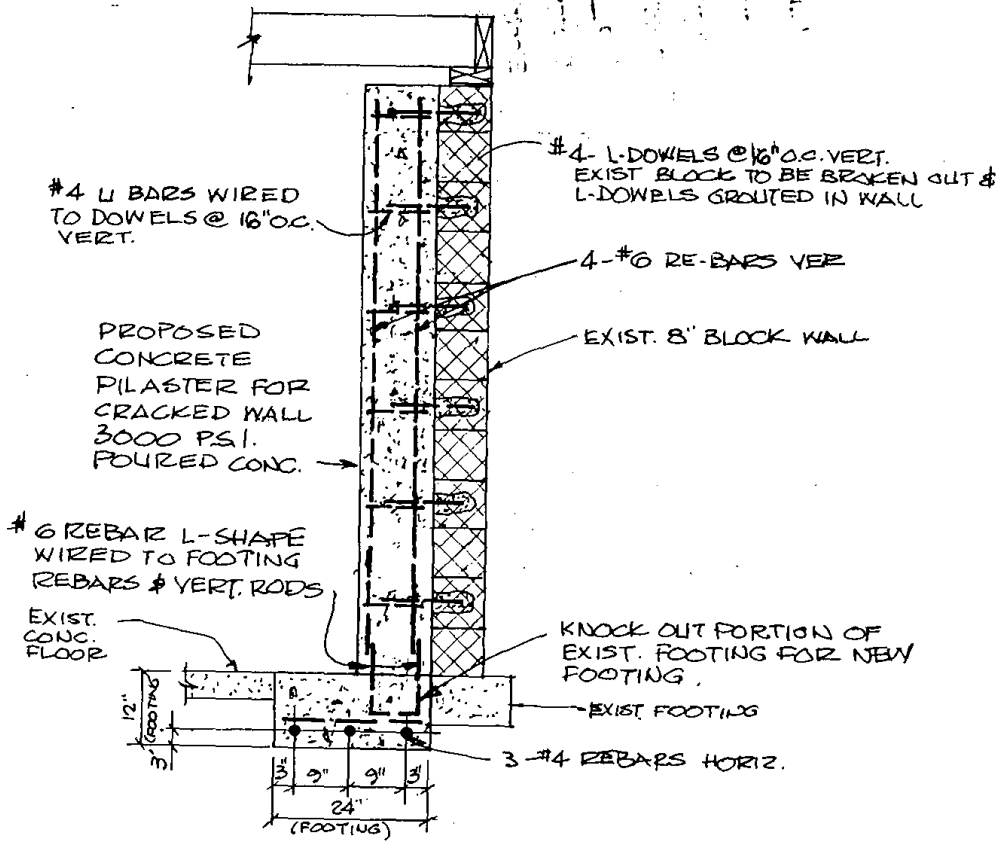
DR. BY	CK. BY	DATE	DWG. NO.
JF		1-17-2000	99086

BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		1-28-00	FM
Fire			
Energy			
Electrical			



PLAN VIEW



SECTION "A-A"

SCALE: 1/2"=1'-0"

REV	DESCRIPTION	DATE

PROPOSED CONCRETE PILASTER FOR CRACKED WALL
Block 27 Lots 14-17
165 Forge Pond Road
Township of Brick, Ocean County, NJ

Robert J. Ballis
Prof. Engr. & Land Surveyor
N.J. Lic. No. 7966

Robert J. Ballis

Robert J. Ballis, P.E. & L.S.
Consulting Engineer
90 Driftwood Drive Brick, NJ 08723

DR. BY	CK. BY	DATE	DWG. NO.
RJB		1-17-2000	99086

BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		1-28-00	KM
Fire			
Energy			
Electrical			