BLOCK 382.01 LOT 5 QUALIFICATION CODE 42.82 ADDRESS (SITE) 280 HUXLEY RD PERMIT NO. 01-2911

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Propsed Work Site at: 280 HUXLEY RD
2. Name of Owner in Fee: KIPRIOTIS Tel. (732) 2628630
   Address 280 HUXLEY RD (street) BRICK (municipality) 08723 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: SHORELINE POOLS INC Tel. (609) 698 6444
   Address 513 N. MAIN ST BARNEGAT NJ 08005
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 222870399 FAX: (_____) _____
5. Architect or Engineer _____ Tel. (_____) _____
   Address _____
6. Responsible Person in Charge of Work CARMEN LIGATO
   Tel. (609) 698 6444 FAX (609) 6989901

INGROUND POOL

Called 7/6/01

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 100		
2.	Electrical	35		
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	11		
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other	30.96		
13.	TOTAL	$		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	
2.	Height of Structure ft.	
3.	Area — Largest Floor sq. ft.	
4.	New Building Area sq. ft.	
5.	Volume of New Structure cu. ft.	
6.	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	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									
3.	☐ Addition									
4.	☑ Alteration	14200.				7-5-01	FM			
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☑ Electrical					6-29-01	JO	7/24/01		OK
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition		FW	6/25/01		6/25/01	JR			
	TOTAL COSTS	14200.								

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 _____
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 10301908

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 SHORELINE POOLS INC.

Address 513 N MAIN ST
BARNEGAT NJ 08005

Telephone (609) 698-6444

Signature X

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.S.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.				

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 07/06/2001
Control #
Permit # 01-2411

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 208.01 Lot 5 Qual

Work Site Location 280 HUBLEY RD
I G POOL
Owner in Fee FIBERGLASS
Address SAME
BRICK, NJ 08723
Telephone (732)262-0430

Contractor SHORE LINE POOLS INC
Address 500 ROUTE 9
LAHSKA HARBOR, NJ 08734-
Telephone (609)971-0050
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2870??

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
I G POOL 16'X32'6"

NOTICE: 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 $ 14,000

Construction Official 07/6/2001
Date

U.C.C. Fine Sec. 170:1

PAYMENTS (Office Use Only)

Building	100
Electrical	35
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
PCA Training Fee	11
Cert. of Occupancy	0
Other 24 2 1	30
Total	176
Check No.	2345
Cash	
Collected By	SDP

07/06/01 10:38AM 000000#5132
XX07 SERV.007

#012411	
BUILDING	
ELECTRIC	$100.00
DCA	$35.00
ZPA	$11.00
EPA	$15.00
CHECK	$176.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY BUILDING SUBCODE TECHNICAL SECTION

Date Received 06/11/2001
Date Issued 7/16/01
Control # ~~C12-82~~
Permit # 01-2411

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

Block 382.01 Lot 5 Qual
Work Site Location 280 HUXLEY RD
I G POOL
Owner in Fee KIPRIOTIS
Address SAME
BRICK, NJ 08723-
Tele.(732)262-8630
Contractor SHORE LINE POOLS INC
Address 509 ROUTE 9
LANOKA HARBOR, NJ 08734-
Tele.(609)971-8050 Fax (609)971-9332
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2870399

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

I G POOL 16'6X36'6

MAX 6" AFG. U.O.N.
See Notes in Yellow

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	7-3-01	EM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire [ ] Elev

SUBCODE APPROVAL
[ ] 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 U Proposed U
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 $ 14,200
3. Total (1+2)$ 14,200

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	0
[ ] 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
[X] Other I G POOL	100
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 100
DCA Training Fee	$ 11

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 06/11/2001
Date Issued 7/6/01
Control # C12-82-
Permit # 01 2011

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

Block 382.01 Lot 5 Qual
Work Site Location 280 HUXLEY RD
I G POOL
Owner in Fee KIPRIOTIS
Address SAME
BRICK, NJ 08723-
Tele.(732)262-8630
Contractor SHORE LINE POOLS INC
Address 509 ROUTE 9
LANOKA HARBOR, NJ 08734-
Tele.(609)971-8050 Fax (609)971-9332
Lic. No. or Bldrs. Reg. No.
Federal Exp. No. 22-2870399

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

I G POOL 16'6X36'6

MAX 6" AFG. U.O.N.
See Notes in Yellow

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	7-5-01	Exp
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

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

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U
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 $ 14,200
3. Total (1+2)$ 14,200

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	0
[ ] 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
[X] Other I G POOL	100
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 100
DCA Training Fee	$ 11

Paid [ ] Check #
Collected by:

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

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received 7/6/01
Date Issued
Control #
Permit # 01-~~2444~~ 2411

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

Block 382.01 Lot 5
Work Site Location 280 HUXLEY RD
BRICK NJ 08723
Owner in Fee/Occupant KIPRIOTIS
Address SAME AS ABOVE

Tele. (732) 262 8630
Contractor APPLE ELECTRIC
Address 112 FROGHOLLOW RD.
FORKED RIVER NJ 08731
Tele. (609) 693 7684 Fax (609) 693 1348
Lic. No. 7719
Federal Emp. No. 222 679 485

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed INGROUND POOL
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 440.

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[X] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: 6/27/01
Approved by: _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 7/24/01
Approved by: _____

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			7/24/01	

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

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

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
1		Lighting Fixtures	
1		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
1		Motors—Fract. HP 1½	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		.....	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		.....	
		.....	

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

Date Received 7/6/01
Date Issued
Control #
Permit # 01 2491

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

Block 382.01 Lot 5
Work Site Location 280 HUXLEY RD
BRICK NJ 08723
Owner in Fee/Occupant KIPRIOTIS
Address SAME AS ABOVE

Tele. (732) 262 8630
Contractor APPLE ELECTRIC
Address 112 FROGHOLLOW RD.
FORKED RIVER NJ 08731
Tele. (609) 693 7684 Fax (609) 693 1348
Lic. No. 7719
Federal Emp. No. 222 679 485

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed INGROUND POOL
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 440.

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[X] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: 6/27/01
Approved by:

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

INSPECTIONS

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

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

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

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
1		Lighting Fixtures	
1		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
1		Motors—Fract. HP 1½	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		.....	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		.....	
		.....	

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

TOWNSHIP OF BRICK
ZONING PERMIT

Approved: June 13, 2001 **No. 1.0940**

Block: 382.01 **Lot:** 5 **Zone:** R-7.5

Property Address: 280 Huxley Road

Applicant: Carmen Ligato; Shoreline Pools, Inc.

Property Owner: Nicholas Kipriotis

Existing Use: Single-family residential.

Proposed Use: Same.

Proposed Construction: In-ground swimming pool, 16'6" x 36'6".

Conditions: The pool must be set back at least five (5) feet from the side and rear property lines.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect.
This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Municipal Planner

Sean Kinnevy
Zoning Officer

RECEIVED
JUN 12 2001
ZONING

TOWNSHIP OF BRICK
Zoning Permit Application
(Please Type or Print Neatly)

Block 382.01 Lot 5 Qualifer

PROPERTY ADDRESS 280 HUXLEY RD

PERSONAL NAME OF APPLICANT CARMEN LIGATO

BUSINESS NAME OF APPLICANT SHORELINE POOLS INC.

PROPERTY OWNER KYPRIOTS

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☑ Single-family dwelling ☐ Multi-family dwelling
☐ Commercial (please describe)

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☑ Single-family dwelling ☐ Multi-dwelling
☐ Commercial (please decribe)

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe)
☐ Addition
☐ Alteration
☐ Porch or deck (state heights)
☐ Shed (state height)
☐ Fence (state type & height)
☑ Swimming Pool ☑ in-ground ☐ above-ground
☐ Other (please describe)

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

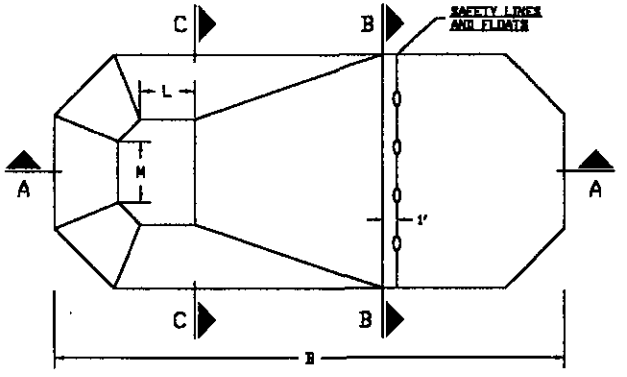
The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

Signature of applicant Date 6/11/001

Reviewed by Zoning Office Date 6/13/1 (X) Approved ( ) Denied

NOTES:

DEPTH & SHAPE OF POOL DOES MEET MINIMUM STANDARDS FOR NATIONAL SPA & POOL INSTITUTE OR 1999 BOCA 421.1-11 FOR RESIDENTIAL USE WITH DIVING BOARD

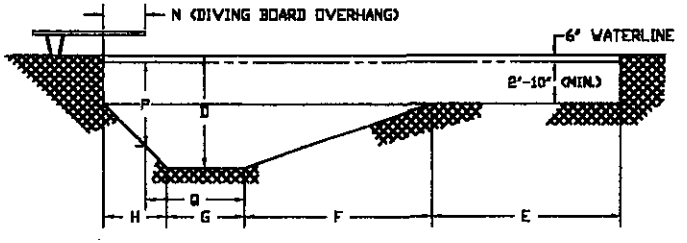


MAX. BOARD HT. (OVER WATER): 20" TYPE I & II

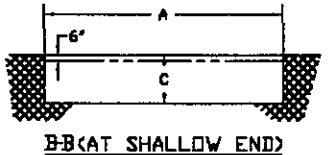
MAX. DIVE BOARD LENGTH: 6' TYPE I
8' TYPE II

MAX. JUMP BOARD LENGTH: 6' TYPE I & II

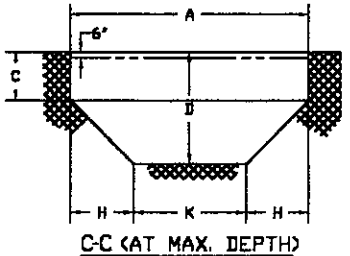
BOTTOM DIMENSIONS



A-A SECTION



B-B (AT SHALLOW END)



C-C (AT MAX. DEPTH)

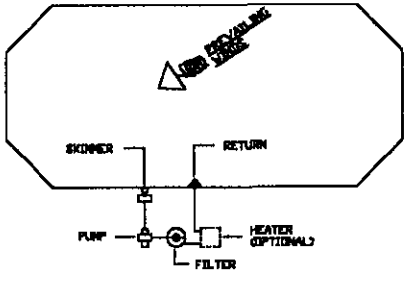
DIMENSION SCHEDULE				
DIMENSION	POOL SIZE			
	16'-6"X32'-6"	16'-6"X35'-6"	18'-6"X36'-6"	20'-4"X40'-4"
A	16'-6"	16'-6"	18'-6"	20'-4"
B	32'-6"	35'-6"	36'-6"	40'-4"
C	3'-4"	3'-4"	3'-4"	3'-4"
D	8'-0"	8'-0"	8'-0"	8'-0"
E	8'-3"	11'-3"	12'-3"	12'-4"
F	14'-0"	14'-0"	14'-0"	14'-0"
G	6'-3"	6'-3"	6'-3"	10'-0"
H	4'-0"	4'-0"	4'-0"	4'-0"
K	8'-6"	8'-6"	10'-6"	12'-4"
L	4'-4 1/4"	4'-4 1/4"	4'-4 1/4"	6'-8 1/4"
M	4'-8 1/4"	4'-8 1/4"	6'-8 1/4"	5'-8 1/4"
N	2'-8 1/2"	2'-8 1/2"	2'-8 1/2"	2'-8 1/2"
P	6'-0"	6'-0"	6'-0"	6'-0"
Q	7'-3 3/8"	7'-3 3/8"	7'-3 3/8"	11'-3 3/8"
PERIMETER (LIN. FT.)	88	94	100	108
AREA (S.F.)	499.5	549.0	638.4	754.9
POOL TYPE	TYPE II	TYPE II	TYPE II	TYPE II

PLANNING NOTES:

- SET WIDTH OF POOL AT RIGHT ANGLES TO SLOPE.
- FINISHED ELEVATION OF DECK TO BE 1'-0"± ABOVE SURROUNDING GRADE.
- PROVIDE SWALE AROUND UP-HILL SIDE OF DRAIN. SURFACE WATER AWAY FROM POOL
- CONCRETE DECK SHOULD SLOPE MIN. 1/4" PER FOOT AWAY FROM POOL
- PLOT PLAN FURNISHED BY OWNER TO SHOW POOL LOCATION AND ENCLOSURE
- ELECTRICAL, PLUMBING AND FENCING TO CONFORM TO ALL CODES
- OPTIONS EXTRA IF REQ'D BY SITE CONDITIONS OR WHEN SPECIFIED BY OWNER
- AT LEAST ONE MEANS OF EGRESS SHALL BE PROVIDED. OPTIONAL STAIRS OR LADDER

PIPE SPECS:

TYPE II HI-DENSITY POLYETHYLENE OR EQUAL



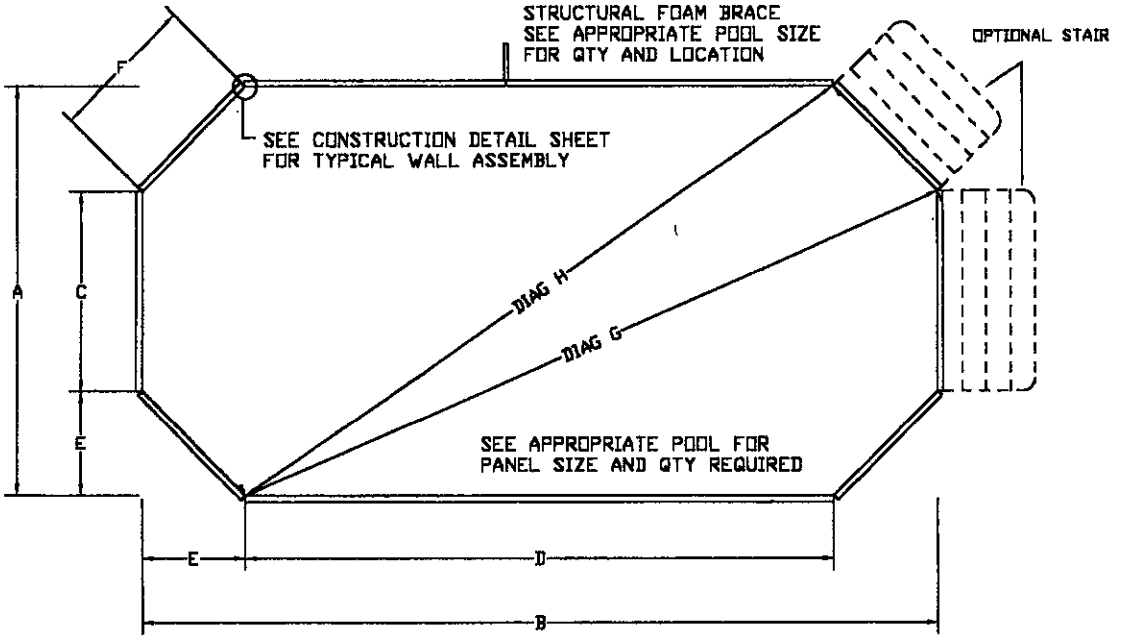
WARNING:

IMPROPER DIVING IS A HAZARDOUS ACTIVITY. SWIMMERS SHOULD FAMILIARIZE THEMSELVES WITH POOL DEPTH AND CONFIGURATION BEFORE ENTERING POOL. READ AND UNDERSTAND "THE SENSIBLE WAY TO ENJOY YOUR POOL" INCLUDED IN THE POOL WARRANTY PACKAGE BEFORE ATTEMPTING ANY DIVES!

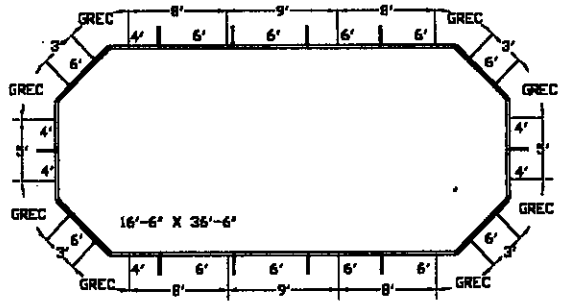
DONALD P. SCHLACHTER
NJPE LIC NO. 23805

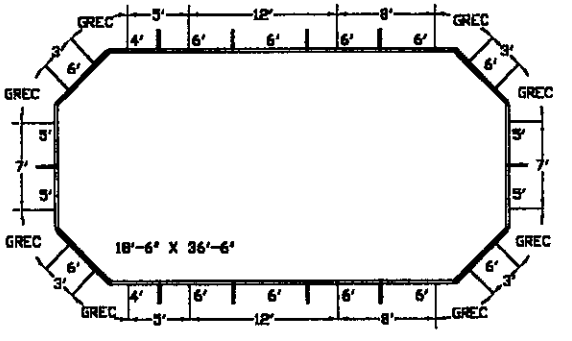
TITLE: GRECIAN POOLS
HUNG LINER - TYPE II THRU III

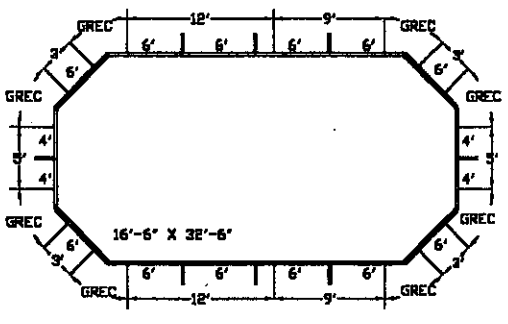
SUPERIOR POOL PRODUCTS, PISCATAWAY, N.J.
DATE: 01/01/01 DWG NO. 006508

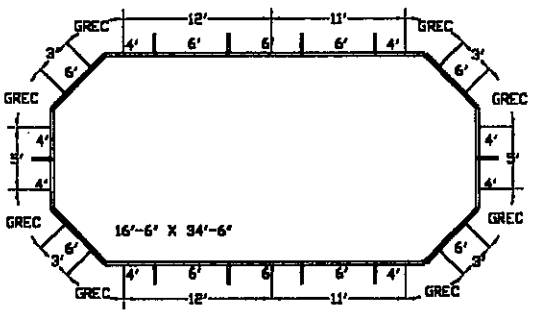


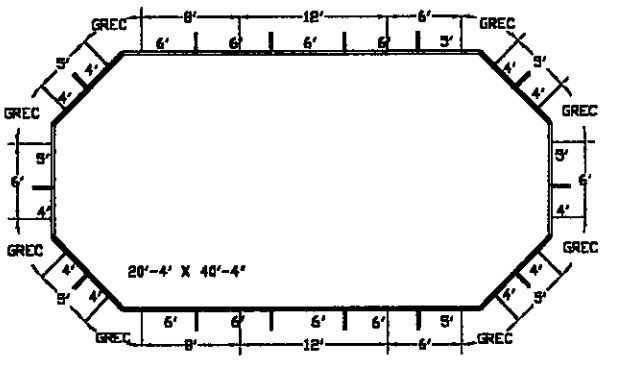
TYPICAL POOL PLAN
NOTE: FOR BOTTOM DIMENSIONS
SEE SHEET #1 (S OR D)











DIMENSION SCHEDULE								
POOL SIZE	DIM A	DIM B	DIM C	DIM D	DIM E	DIM F	DIAG G	DIAG H
16'-6"X32'-6"	16'-6"	32'-6"	8'-0"	24'-0"	4'-3"	6'-0"	30'-9 3/8"	29'-1 3/8"
16'-6"X34'-6"	16'-6"	34'-6"	8'-0"	26'-0"	4'-3"	6'-0"	32'-7 5/8"	30'-9 1/2"
16'-6"X36'-6"	16'-6"	36'-6"	8'-0"	28'-0"	4'-3"	6'-0"	34'-6"	32'-6"
18'-6"X36'-6"	18'-6"	36'-6"	10'-0"	28'-0"	4'-3"	6'-0"	35'-3"	33'-6 5/8"
20'-4"X40'-4"	20'-4"	40'-4"	9'-0"	29'-0"	5'-8"	8'-0"	37'-7 5/8"	35'-4 7/8"

PANEL AND BRACE LAYOUTS
COPING LAYOUTS

DONALD P. SCHLACHTER
NJPE LIC NO. 23805

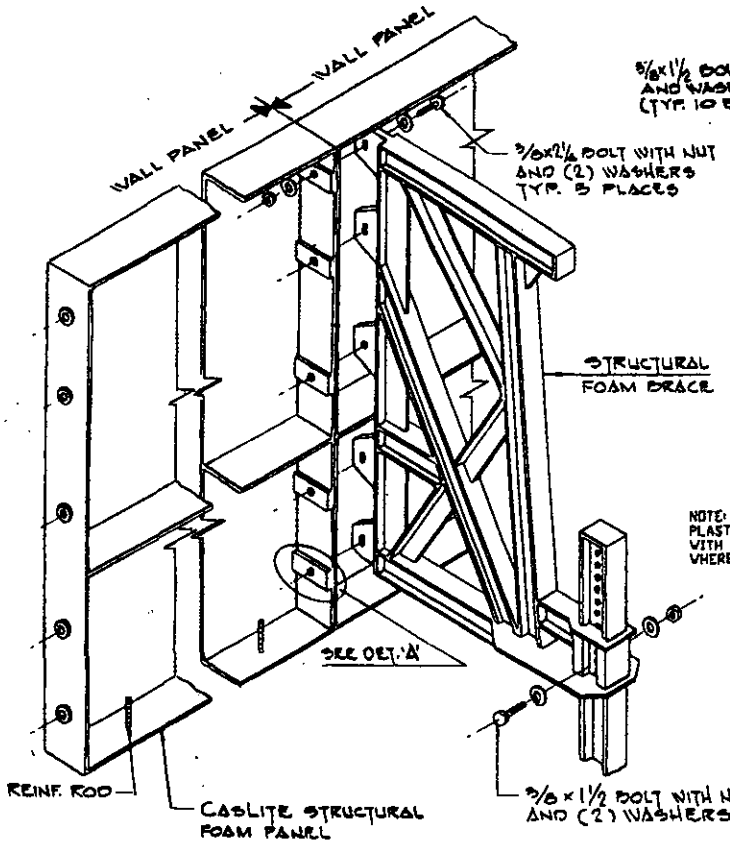
TITLE: GRECIAN FOAM POOL

SUPERIOR POOL PRODUCT, PISCATAWAY, NJ
DATE: 01/01/01 SCALE: NONE

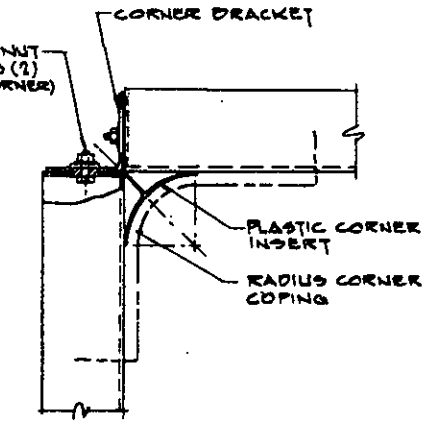
DONALD P. SCHLACHTER
NJPE LIC NO. 23805

TITLE: CONSTRUCTION DETAIL SHEET
HUNG LINER FOAM POOL

SUPERIOR POOL PRODUCTS, PISCATAWAY, NJ
DATE: 01/01/01 SCALE: NONE

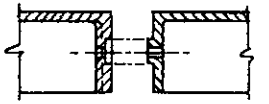


TYPICAL WALL ASSEMBLY

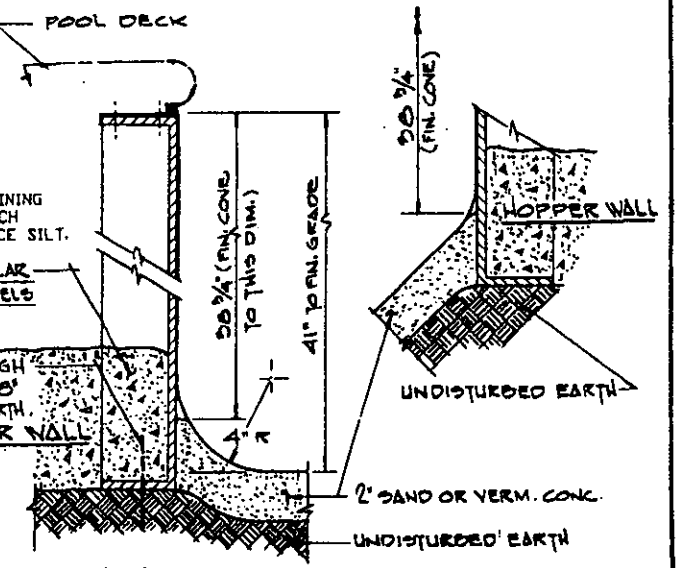


TYPICAL CORNER DETAIL
(RECTANGULAR POOLS)

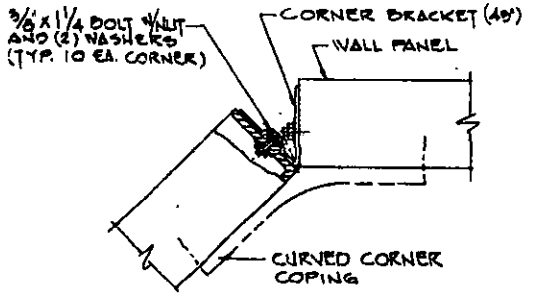
NOTE:
PLASTIC STAKE MAY BE REPLACED WITH A GALVANIZED STEEL STAKE WHERE GROUND CONDITIONS REQUIRE



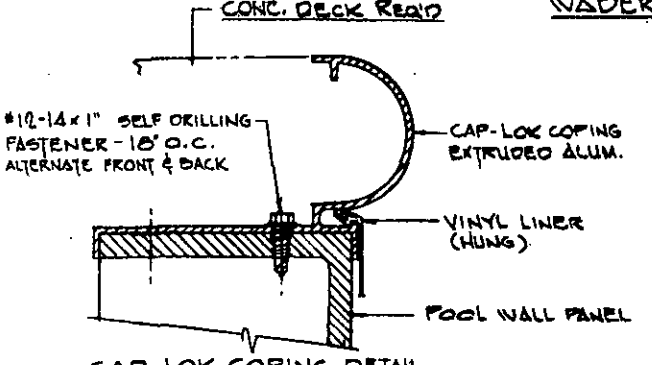
(A) PANEL JOINING DETAIL



TYP. LINER INSTALLATION DET.



TYPICAL CORNER DETAIL
(GRECIAN POOLS)



CAP-LOK COPING DETAIL

NOTE: FOR STRAIGHT WALL OVAL AND 4'-6" R. CORNER POOLS USE APPROPRIATE CURVED SECTIONS AS SHOWN ON POOL PLANS.

THE CONSTRUCTION METHODS ILLUSTRATED APPLY ONLY TO NORMAL GROUND CONDITIONS. IF UNUSUAL SOIL CONDITIONS ARE ENCOUNTERED (IE. HIGH ORGANIC MATERIAL, HIGH WATER LEVEL), ADDITIONAL MEASURES MUST BE TAKEN TO PROVIDE SUBSURFACE CONDITIONS WITHIN THE STRUCTURAL CAPABILITIES OF THE PANEL. ANY ADDITIONAL PRECAUTIONS OR METHODS OF CONSTRUCTION ARE THE RESPONSIBILITY OF THE CONTRACTOR.

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Department of Engineering

Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
http://www.gbshost.com/brick
http://www.twp.brick.nj.us

Date: JUNE

Township Engineer
401 Chambers Bridge Road
Brick, NJ 08723

RE: Block: 382.01 Lot: 5

Property Address: 280 HUXLEY RD

I, [signature] (name) of 280 HUXLEY RD (address).

Request to be exempted from the plot plan requirement for an addition as outlined in the Brick Land Use Book, Chapter 190.31, part B.

[signature]
Applicant's Signature

The following shall be submitted with this request:

1. Submit survey locating existing dwelling and proposed addition. Dimensions of addition should be included.

2. Proof that the property is not located in a Flood Hazard Area.

Note: Prior to approval, a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

OFFICE USE

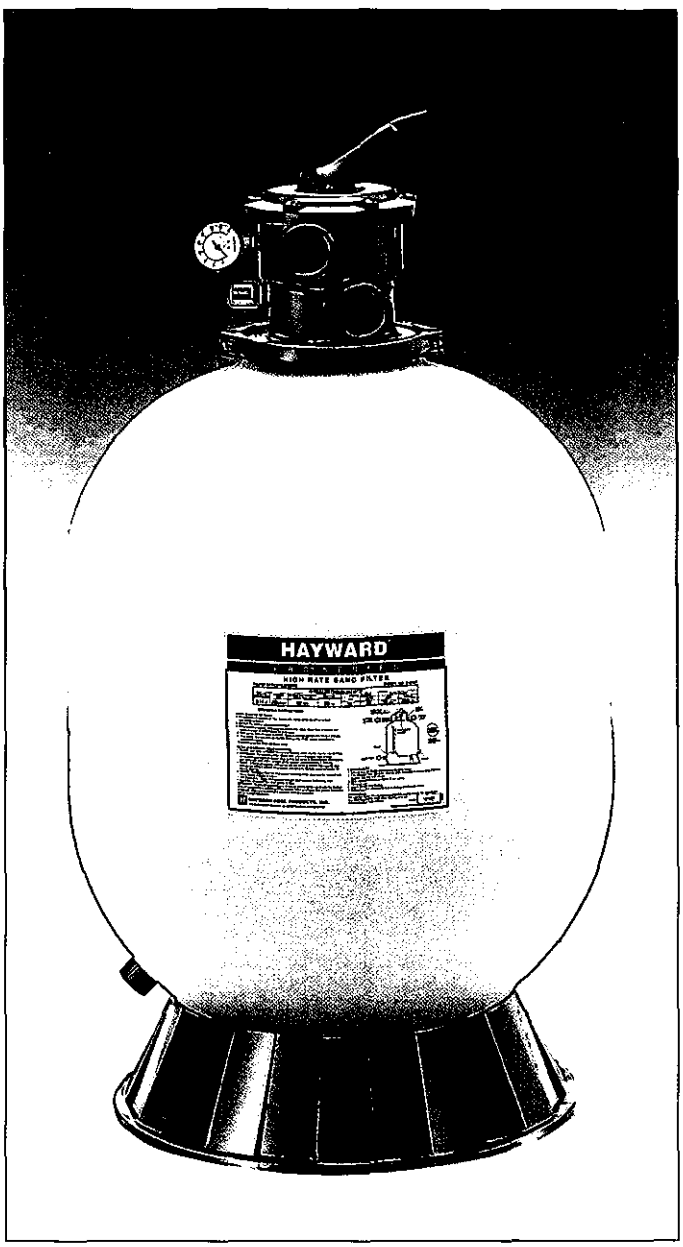
Approved: 6/25/01 Signed: [signature]

Rejected: _____ Signed: _____

Comments: _____

Pro™ Series

TOP-MOUNT SAND FILTERS



■ *Pro-Series S244T 24" filter, shown with Vari-Flo™ top-mount filter control valve.*

Hayward Pro Series sand filters are the very latest in pool filter technology, and produce crystal clear, sparkling water with only minimum care.

Totally Hayward™

Molded of durable, corrosion-proof polymeric materials, they feature attractive, unitized construction, and self-cleaning 360° slotted laterals for smooth, efficient flow and totally-balanced backwashing. Plus, a versatile six-position control valve allows for easy operation and maximum efficiency.

Pro Series filters set a new standard for performance, value and dependability. And you know it's quality throughout because it's made by Hayward — the first choice of pool professionals.

HAYWARD®

America's #1 Pool Water Systems

HIGH-RATE SAND FILTERS

Pro™ Series Top-Mount Sand Filters

Flange Clamp Design allows 360° rotation of valve to simplify plumbing.

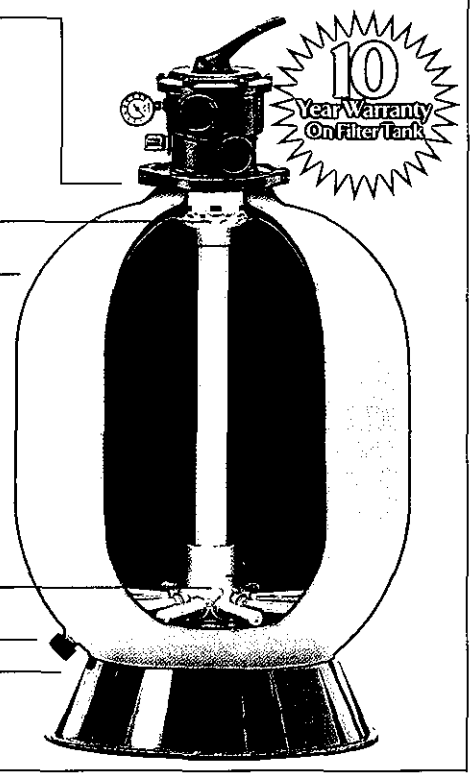
Integral Top Diffuser assures even distribution of water over the top of the sand media bed. Full-size internal piping gives smooth, free-flowing performance.

Unitized, Corrosion-Proof Filter Tank molded of tough, durable, colorfast polymeric material for dependable, all-weather performance with only minimal care.

Efficient, Multi-Lateral Underdrain Assembly with precision engineered, self-cleaning 360° slotted laterals gives totally balanced flow and backwashing.

Integral Molded Drain Plug for easy draining of tank, without the loss of sand.

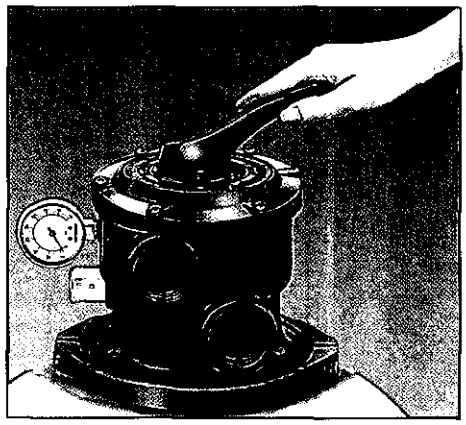
Totally Corrosion-Proof Base is rugged and attractively styled to *provide strong, stable support.*



Specifications – Pro Series High-Rate Sand Filters

FILTER TYPE:	High-Rate Sand: No. 1/2 Silica Sand (.45mm – .55mm)
FILTER TANK:	Molded Polymeric
UNDERDRAIN:	360° Self Cleaning Slotted Laterals, Precision Installed in Ball Joint Assembly
CONTROL VALVE:	1 1/2 or 2" 6-Position, Top-Mount Vari-Flo™ With Lever-Action Handle
VALVE FASTENING:	Flange Clamp Design
SUPPORT BASE:	Injection-Molded ABS
PERFORMANCE RANGE:	1/2 to 3 HP (30 to 120 GPM) .37 to 2.2 KW (114 to 454 LPM)
DIMENSIONS:	S180T–18 1/2 " W x 35" H (470 mm x 889 mm) S210T–20 1/2 " W x 38" H (521 mm x 965 mm) S220T–22 1/2 " W x 41" H (572 mm x 1041 mm) S244T–24 1/2 " W x 42" H (622 mm x 1067 mm) S310T2–30 1/2 " W x 48" H (775 mm x 1219 mm)

NSF

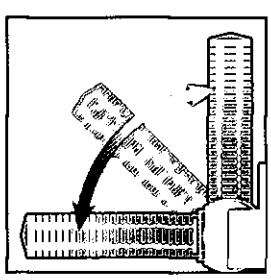


Vari-Flo™ 6-Position Control Valve with easy-to-use lever-action handle lets you "dial" any of six valve/filter functions.

Performance Data

MODEL NUMBER	EFFECTIVE FILTRATION AREA		DESIGN FLOW RATE*		TURNOVER				SAND REQUIRED	
					8 Hr.	10 Hr.	8 Hr.	10 Hr.		
	ft.²	m²	GPM	LPM	GALLONS		KILO LITERS		lbs.	kgs.
S180T	1.75	0.163	35	132	16,800	21,000	63.59	79.48	150	68
S210T	2.20	0.205	44	167	21,120	26,400	79.94	99.92	200	91
S220T	2.64	0.246	52	197	24,960	31,200	94.47	118.09	250	114
S244T	3.14	0.292	62	235	29,760	37,200	112.64	140.80	300	136
S310T2	4.91	0.457	98	371	47,040	58,800	178.05	222.56	500	227

*Based upon 20 GPM per ft.² (814 LPM per m²). Maximum allowable NSF rating.



Patented Service Ease Design
Unique folding ball-joint design allows lateral assembly to be easily accessed for simple servicing.

HAYWARD®
America's #1 Pool Water Systems

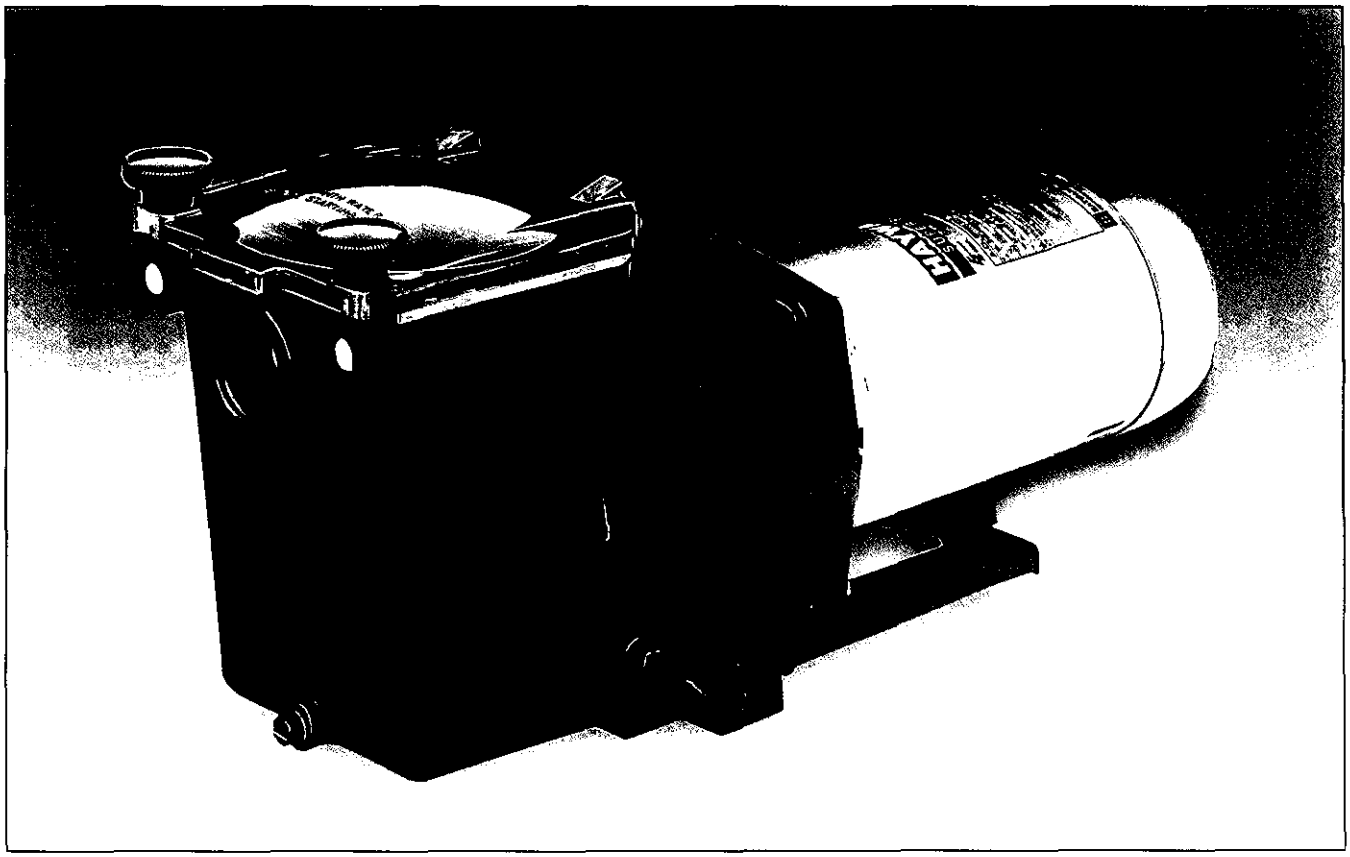
6T00

1-888-HAYWARD

www.haywardnet.com

Super Pump®

HIGH-PERFORMANCE PUMP SERIES



■ *Super Pump: high performance and quiet operation.*

Hayward's Super Pump is a series of large capacity, high technology pumps that blend cost-efficient design with durable corrosion-proof construction.

Designed for pools of all types and sizes, Super Pump features a large "see-thru" strainer cover, super-size debris basket and exclusive "service-ease" design for extra convenience.

Totally Hayward™

For super performance and safe, quiet operation, Super Pump sets a new standard of excellence and value. And you know its quality throughout because its made by Hayward — the first choice of pool professionals.

HAYWARD®

America's #1 Pool Water Systems

Super Pump® High Performance Pump Series

Exclusive, Swing-Aside Hand Knobs make strainer cover removal easy. No tools required...no loose parts... no clamps.

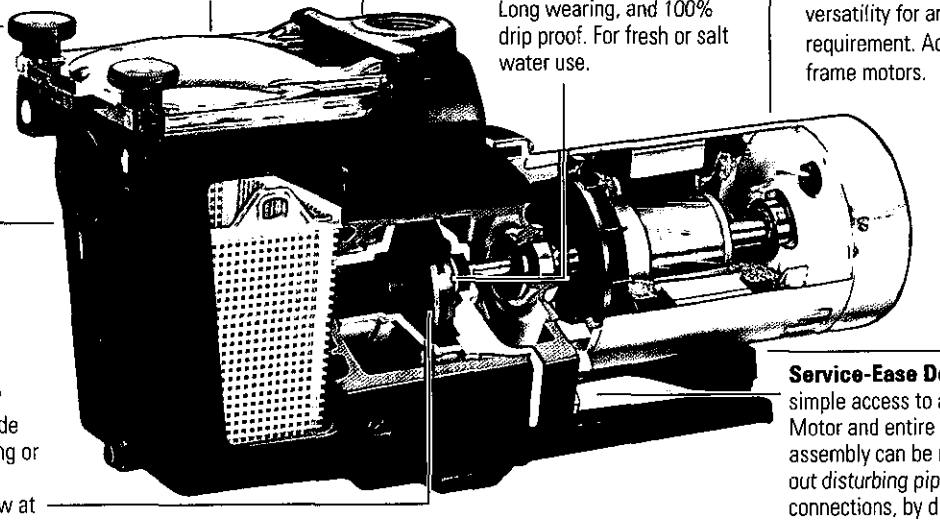
Lexan® See-Thru Strainer Cover lets you see when basket needs cleaning and eliminates guesswork. Special self-adjusting seal assures dependable sealing.

All Components *Molded of Corrosion-Proof PermaGlassXL™* for extra durability and long life.

Heavy-Duty, High-*Performance Motor* with air-flow ventilation for quieter, cooler operation.

Heat Resistant, Industrial Size Ceramic Seal. Long wearing, and 100% drip proof. For fresh or salt water use.

Mounting Base provides stable, stress-free support, plus versatility for any installation requirement. Adapts 48 and 56 frame motors.

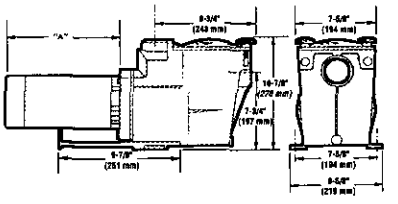


Super-Size Housing has extra air handling capacity to assure rapid priming.

Totally Balanced, Corrosion-Proof Noryl® Impeller has smooth, wide openings to prevent fouling or clogging. Energy-efficient design produces more flow at equivalent horsepower.

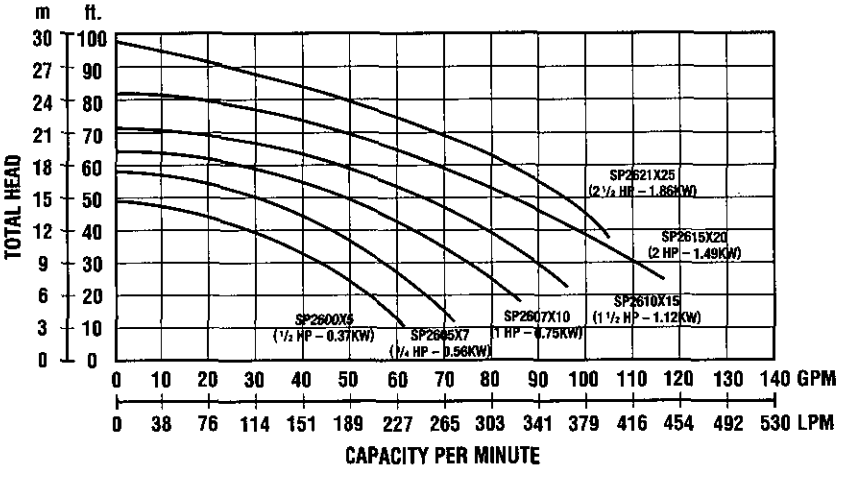
Service-Ease Design gives simple access to all internal parts. Motor and entire drive group assembly can be removed, without *disturbing pipe or mounting* connections, by disengaging just four bolts.

Overall Dimensions



Model	Motor Power HP	Motor Power KW	Pipe Size inch	Dimension A" inch	Dimension A" mm
SP2600X5	1/2	0.37	1 1/2"	11 1/4"	286
SP2605X7	3/4	0.56	1 1/2"	11 5/8"	295
SP2607X10	1	0.75	1 1/2"	11 7/8"	302
SP2610X15	1 1/2	1.12	1 1/2"	12 1/4"	311
SP2615X20	2	1.49	2"	13 1/4"	337
SP2621X25	2 1/2	1.86	2"	13 3/4"	349

Super Pumps are also available with dual speed motors.



SUPER-SIZE 110 CUBIC INCH BASKET has extra leaf-holding capacity and extends time between cleanings. Rigid construction with load-extender ribbing assures free flowing operation for heavy debris loads.

Super Pump® Series Pumps are listed by:

UL® NSF® CSA®

HAYWARD®

America's #1 Pool Water Systems

2693

1-888-HAYWARD

www.haywardnet.com

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

Joseph C. Scarpelli, Mayor

Township Council:
Kathy M. Russell - President
Stephen C. Acropolis
Kimberley S. Casten
Steven N. Cucci
Gregory S. Kavanagh
Tony R. Shupin
Frederick J. Underwood, Sr.

DEPARTMENT OF ADMINISTRATION & FINANCE

DIVISION OF INSPECTIONS
Joseph Curiazza
Construction Official
(732) 262-1030
Fax: (732) 262-8954
http://www.twp.brick.nj.us

HOMEOWNER'S POOL CERTIFICATION

BLOCK 382.01 LOT 5

In accordance with the NJAC 5:23-2.23, no pool shall be used in whole or in part until a Certificate of Approval has been issued by the Construction Official.

I certify that I am the owner of the above referenced pool being built. I further certify that the pool will not be used in whole or in part until a permanent fence is installed and a Certificate of Approval has been issued by the Construction Official.

I have read the fence requirements listed below and understand them.

Nicholas Kiprodes

Owner's Signature

NICHOLAS KIPRIOTIS

Print Name

Sworn and subscribed to before me on this 11 day of June 20 01.

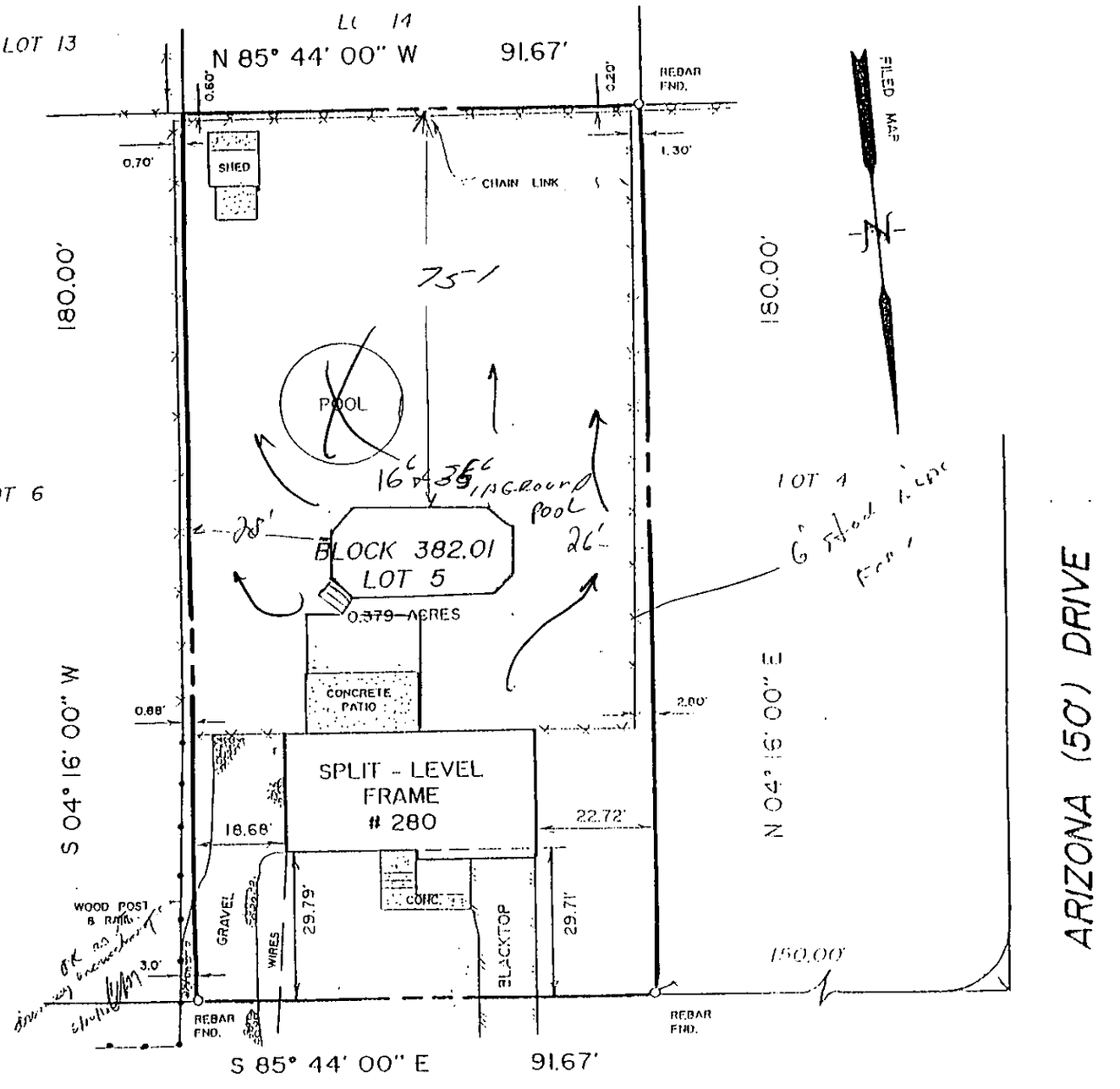
Notary Signature

PATRICIA A. TALLMAN
NOTARY PUBLIC OF NEW JERSEY
MY COMMISSION EXPIRES JULY 2, 2002

Fence Requirements:

Barrier shall be a minimum of 48 inches above ground level. Openings shall not be greater that 4 inches for vertical balusters with horizontal concentrated load of 200 pounds applied on a 1-square foot area at any point of fence. Maximum mesh size for chain link fencing shall not exceed 1¼ inches square. Where the barrier is composed of horizontal and vertical members and the distance between the tops of the horizontal members is less than 45 inches, the horizontal members shall be located on the swimming pool side of the fence. Spacing between vertical members shall not exceed 1¾ inches in width.

Pedestrian gates shall open away from the pool, be self-closing and self-latching. If the self-latching device is located less that 54 inches from the bottom of the gate, then the release mechanism shall be located on the pool side of the gate at least 3 inches below the top of the gate. The gate and the barrier shall not have an opening greater that ½ inch within 18 inches of the release mechanism.



HUXLEY (50') DRIVE

(A.K.A. LORRAINE DRIVE)

THIS SURVEY IS CERTIFIED TO :

NICHOLAS KIPRIOTIS & LYNN KIPRIOTIS, H/W
HUDSON CITY SAVINGS BANK, AND ITS SUCCESSORS AND/OR ASSIGNS

LAWYERS TITLE INSURANCE CORPORATION
K.E. ABSTRACT COMPANY, INC. (# 28732)
ORLOVSKY, GRASSO, & BOLGER P.A.

NOTE: NO PROPERTY CORNERS HAVE BEEN SET AS PER CONTRACTUAL AGREEMENT WITH THE OWNER OR HIS AGENT.

"TO ANY INSUROR OF TITLE RELYING HEREON AND ANY OTHER PARTY IN INTEREST," IN CONSIDERATION OF THE FEE PAID FOR MAKING THIS SURVEY, I HEREBY CERTIFY TO ITS ACCURACY (EXCEPT SUCH EASEMENTS, IF ANY, THAT MAY BE LOCATED BELOW THE SURFACE OF THE LANDS OR ON THE SURFACE OF THE LANDS THAT ARE NOT VISIBLE) AS AN INDUCEMENT FOR ANY INSUROR OF TITLE TO INSURE THE TITLE TO THE LANDS AND PREMISES SHOWN HEREON. THIS RESPONSIBILITY LIMITED TO THE CURRENT MATTER AS OF THE DATE OF THIS SURVEY.

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

BEING KNOWN AS LOT 5 IN BLOCK 382 - 01 AS SHOWN ON A MAP ENTITLED " MAP OF LAKE RIVIERA, SECTION SIX " AND FILED IN THE OCEAN COUNTY CLERK'S OFFICE ON 8/5/1960 AS MAP NUMBER 8 - 80.

ALSO BEING KNOWN AS LOT 5 IN BLOCK 382.01 AS SHOWN O THE OFFICIAL TAX MAPS OF THE TOWNSHIP OF BRICK, OCEAN COUNTY, NEW JERSEY.

PLAN OF SURVEY

SITUATE

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

BLOCK 382.01 LOT 5

5/4/92
DATE

MICHAEL D. FASY

PROFESSIONAL LAND SURVEYOR N.J. LIC. NO. 34850
PROFESSIONAL PLANNER N.J. LIC. NO. 4693

SENECA SURVEY CO., INC

SURVEYORS & PLANNERS

1054 RIVER AVENUE
LAKEWOOD, NEW JERSEY 08701

(908) 901 - 1555

Date: MAY 4, 1992
Scale: 1" = 30'

Drawn by: DBF
Proj No: 92 - 1178

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: 280 HUXLEY RD
Block: 382.01 Lot: 5
Owner's Name: KIPRIOTIS
Owner's Mailing Address: 280 HUXLEY RD
BRICK NJ 08723
Phone: (732) 262 8630

BUILDING

Contractor: SHORELINE POOLS INC.
Address: 513 N. MAIN ST
BARNEGAT NJ 08005
Phone#: 609 698 6444
Lis #
Federal Emp # or SSN 222870399

Technical Data

Description of Work:

INGROUND POOL

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:

Cost of Alteration: 14200.

Cost of New Building:

Total Cost of Building Work: 14200.

Signature: X

Please Print Name CARMEN LIGATO

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:_____