

BLOCK 388.01 LOT 5 QUALIFICATION CODEADDRESS (SITE) 280 HUXLEY DRIVE PERMIT NO. 05-1484

CONSTRUCTION PERMIT APPLICATION

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

005-131369

I. IDENTIFICATION

1. Proposed Work Site at: 280 HUXLEY DRIVE
2. Name of Owner in Fee: NICHOLAS KIRIOTIS Tel. (732) 262-8630
Address 280 HUXLEY DRIVE BRICKTOWN NJ 08223
street municipality zip code
3. Ownership in fee: Public _____ Private X
4. Principal Contractor: CARLS FENCING & DECKING Tel. (732) 505-1749
Address _____
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Employee No. _____ FAX: (_____) _____
5. Architect or Engineer _____ Tel. (_____) _____
Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun _____
Tel. (_____) _____ FAX: (_____) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>24</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$ <u>4</u>		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. State Permit Fee Surcharge	\$		
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other <u>20</u>	\$ <u>58</u>		
13. TOTAL	\$		

VI. BUILDING/SITE CHARACTERISTICS

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 _____

(office use only)

II. PROPOSED WORK

1. ☐ Minor Work
2. ☐ New Building
3. ☐ Addition
4. ☐ a. Repair
☐ b. Alteration
☐ c. Renovation
☐ d. Reconstruction
5. ☐ Fire Protection
6. ☐ Plumbing
7. ☐ Electrical
8. ☐ Elevator Devices
9. ☐ Asbestos Abat. Subch. 8
10. ☐ Lead Hazard Abatement
11. ☐ Demolition

Est. Cost

Plans
Rec'dDate
Rec'd

OPTIONAL (for office use only)

Rejection
DateApproval
DateRe-
viewerResubmission Dates
Approval

Rejection

Re-
viewer

TOTAL COSTS

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Form:
4. No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

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

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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

LDS BR 10325855

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 Nicholas Kipriotis Date 4/25/05

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.

X Agent Name NICHOLAS KIPRIOTIS
Address 280 HUXLEY DRIVE BRICK TOWN N.J 08723

Telephone (732) 262-8630

Signature Nicholas Kipriotis

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.T.B.T.

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

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	
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. _____	_____	_____	_____

Constituent Contact Report

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CONSTRUCTION PERMIT

Date Issued 05/05/2005
Control # C-05-134369
Permit # 05-1484

IDENTIFICATION Block: 382.01 Lot: 5 Qualifier _____
Work Site Location: 280 HUXLEY DR. Brick Township, NJ Contractor KIPRIOTIS, NICHOLAS & LYNN
Address 280 HUXLEY DR BRICK NJ 08723
Owner in Fee KIPRIOTIS, NICHOLAS & LYNN
Address 280 HUXLEY DR BRICK NJ 08723 Telephone: _____
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. _____

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:

FENCE 5' CHAIN LINK FENCE

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 \$2,900

Construction Official _____

05/05/2005
Date

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$24
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$4
CO Fee	
Other	\$30
Total	\$58
Check No.	494
Cash	\$0
Credit	\$0
Collected By	Ann Marie Hanlon

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 the work installed conforms with 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 granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases 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, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ 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. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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



Date Received
Date Issued
Control #
Permit #

5/5/05
05-1484

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

Block 588.01 880 hwy 105

Work Site Location nicopolis kyrioths

Owner in Fee none

Address 2102-8430

Tele. () 415

Contractor ALTS

Address _____

Lic. No. or Bids. Reg. No. _____

Federal Emp. No. _____ or Social Security No. _____

Job Summary (Office Use Only)

PLAN REVIEW
☒ No Plans Req.
☐ All
☐ Footing
☐ Foundation
☐ Slab
☐ Frame
☐ Other
Joint Plan Review Required:
☐ Elec. ☐ Plumb. ☐ Fire
SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
Date: 5-29-05
Approved By: PM

INSPECTIONS
Type: _____
Failure: _____
Failure: _____
Approval: _____
Initial: _____
Dates (Month/Day)
Final: 08/29/05

Est. Cost of Bldg. Work:
1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ 2900

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

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

Most Meet Pool Code.

TYPE OF WORK:
☐ New Building
☐ Addition
☐ Alteration
☐ Roofing
☐ Siding
☐ Fence
☐ Sign
☐ Pool
☐ Asbestos Abatement
☐ Other
☐ Demolition

Height (6' or over)
Sq. Ft.

Demolition

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA TRAINING FEE \$ _____
TOTAL FEE \$ _____

8/3/05

around yard gates open in and not self
closing self latching locks not 54" high - New
Fence AROUND POOL old TYPE Chain Link Climbbable
AND NOT Pool Code. JKG

08/29/05, NEW INNER FENCE INSTALLED AROUND POOL - O.K.

W
K

**Township of Brick
Zoning Permit**

Approved: Thursday, April 28, 2005 **Number:** 484

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

Property Address: 280 Huxley Drive

Applicant: Nicholas Kipriotis

Property Owner: Nicholas Kipriotis

Existing Use: Single Family Residential

Proposed Use: Single Family Residential

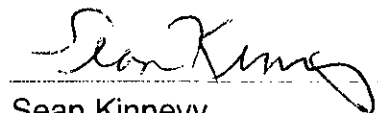
Proposed Construction: 5' high chain link fence.

Conditions: The 5' high chain link fence must be set back at least 25 feet from the front property line.

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

Principal Planner



Sean Kinnevy

Zoning Officer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

APR 26 2005

(Please Type or Print Neatly in Ink, Not Pencil)

Applications missing any of the following information
will delay processing and may be returned to you.

BLOCK 382.01 LOT 5 QUALIFIER _____

PROPERTY ADDRESS 280 HUXLEY DRIVE

PERSONAL NAME OF APPLICANT NICHOLAS KIPRIOTIS

BUSINESS NAME OF APPLICANT CARL'S FENCING & DECKING-H/O

MAILING ADDRESS OF APPLICANT 280 HUXLEY DRIVE BRICK NJ 08723

PROPERTY OWNER'S FULL NAME NICHOLAS KIPRIOTIS

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 describe) _____

PROPOSED CONSTRUCTION (check all that apply)

- ☐ New Building (please describe) _____ Height _____
☐ Addition - Height _____
☐ Alteration
☐ Porch or deck - Height _____
☐ Shed - Height _____
☒ Fence - Type CHAIN LINK Height 5 FT
☐ 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

Note: No partial, taped, faxed,
reduced or enlarged copies
can be accepted.

☐ 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.

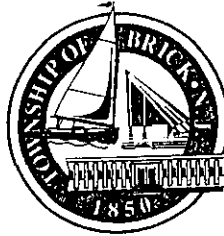
SIGNATURE OF APPLICANT Nicholas Kipriotis Date 4/25/05

Reviewed by Zoning Office SC Date 4/28/05 Approved () Denied

KIP
4/25/05

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723



Joseph C. Scarpelli, Mayor

Township Council:

Stephen C. Acropolis - President
Gregory S. Kavanagh
Anthony Matthews
Kathy M. Russell
Ruthanne Scaturro
Michael A. Thulen, Sr.
Frederick J. Underwood, Sr.

Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
<http://www.twp.brick.nj.us>

Date: _____

4/25/05

Block: _____

382.01

Lot: _____

5

Property Address: _____

280 HUXLEY DRIVE

I, NICHOLAS KIPRIOTIS of 280 HUXLEY DRIVE
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, ect. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

Nicholas Kipriotis
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the 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.

FOR OFFICE USE ONLY

Approved on: _____

4/29/05

Signed: _____

Rejected on: _____

Signed: _____

Comments:

1579 Rt. 9
Toms River, NJ 08755
Phone: (732) 505-1749
Fax: (732) 505-1552



DATE ORDERED _____
DATE RECEIVED _____
JOB READY _____
Installer Name _____

PROPOSAL / CONTRACT

NAME: NICK/LYNN KIPRIOTS HOME# 262-8630 DATE 3-2-05
ADDRESS 280 HUXLEY DR CROSS STREET DELAWARE DR.
CITY BRICK STATE NJ ZIP 08723 COUNTY _____
WORK PHONE _____ CELL# NICK 606 6483 FAX# _____

BILLING ADDRESS (IF DIFFERENT FROM ABOVE) _____

Chain Link Fabric Mesh Gauge wire Line posts Term posts Ft Spacing Top rail High

Supply & Install:

WHITE
194' OF 5'H ALL ~~BLACK~~ 1/2" MESH Special Note: _____
• 0.065 PIPE +/- 1365 AFT
1-8' DD GATE
w/ coupon \$2900

OR
194' OF 4'H ALL BLACK 1/2" MESH
• 0.065 PIPE +/- 1135 AFT
1-8' DD GATE
w/ coupon 2500

MARK OUT #

Water ☐ Any Changes to Above Must Be In Writing ☐ Electric

We hereby propose to furnish labor and materials 2900.00 in accordance with the above specifications.

The Owner agrees to pay the Contractor 2900.00 dollars in full for the work.

(A) DOWN PAYMENT BY OWNER \$ 0.00

(B) PAYMENT DUE AT DELIVERY/OTHER \$ 0.00

Waiver Y / N

(C) BALANCE MUST BE PAID UPON COMPLETION \$ 2900.00

(D) CREDIT CARD # _____ EXP _____

Initial N.K.

CONDITIONS PRINTED ON THE REVERSE SIDE ARE MUTUALLY UNDERSTOOD TO FORM PART OF THIS CONTRACT

SPECIAL ITEMS TO CONSIDER: (circle one)

Clearing: Yes ☐ No ☐
Fence: Take down Yes ☐ No ☐
Take Away Yes ☐ No ☐
Core Drilling: Asphalt Yes ☐ No ☐
Concrete/Pavory Yes ☐ No ☐

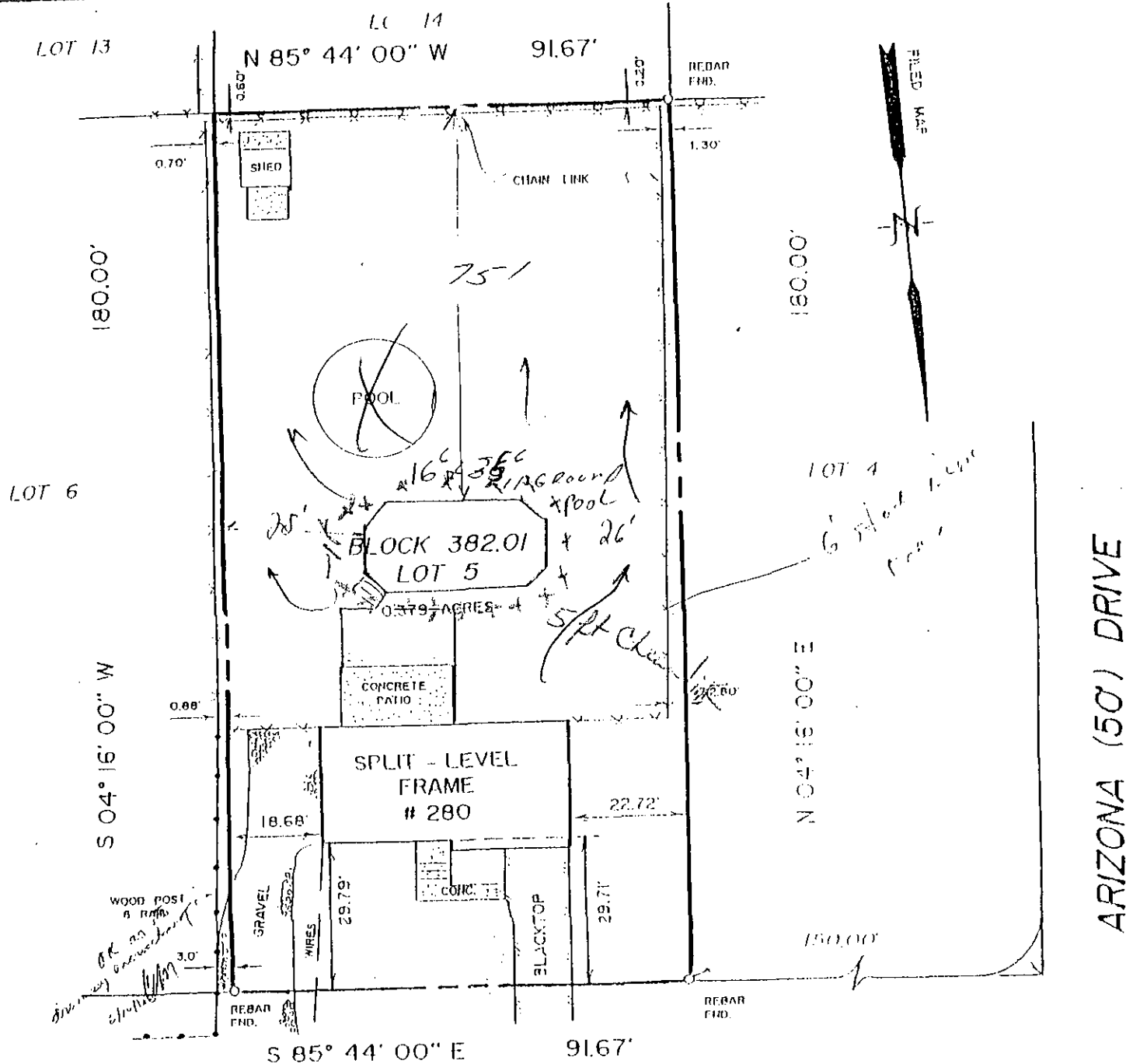
Top of fence to: ☐ follow ground ☒ be straight ☐ HD ☐ E

Additional Clearing Cost: _____

Materials to be Taken Down _____ Footage _____

Location of Materials to be Taken Down _____

Pool ☒ Yes ☐ No Gate Swing OUT



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
A.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 B-60.

ALSO BEING KNOWN AS LOT 5 IN BLOCK 382.01 AS SHOWN
ON 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

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

5/4/92
DATE

MICHAEL D. FASY

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