



US
NEW JERSEY
UNIFORM CONSTRUCTION
CODE

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

Proposed

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. Max. Live Load _____
7. Max. Occupancy Load _____
8. If Industrialized Building: State Approved _____ HUD _____
9. Total Land Area Disturbed _____ sq. ft.
10. Flood Hazard Zone _____
11. Base Flood Elevation _____ ft.
12. Wetlands yes _____ no _____

Proposed



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 8/23/2016
Control Number C-15-004388
Permit Number 16-0102
Permit Issue Date 1/11/2016
Certificate Number 16-0102

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 13 RIVER PARK DR Brick Township, NJ Block: 903.14 Lot: 12 Qual: _____
Owner in Fee: ST. GEORGE, DAVID & CATHERINE
Owner Address: 13 RIVER PARK DR BRICK NJ 08724
Telephone: _____

Contractor BRIAN MASSEY
Address 102 NORTH COOKS BRIDGE ROAD JACKSON NJ 08527
Telephone: (732) 503-2259 Fax: _____
License Number or Builders Registration Number: 13VH04657800 Federal Emp. Number: _____

Home Warranty Number: _____
Type of Warranty Plan: ☐ State ☐ Private
Use Group: R-5 Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: DECK ...CONSTRUCT 13'x11' REAR DECK

Certificate Comments:

☐ 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.

☐ Certificate of Continued Occupancy

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

☐ Temporary Certificate of Compliance

The following conditions must be met no later than _____ or the owner will be subject to fine or order to vacate: This certificate has an expiration date of: _____
Conditions to be met:

☐ Certificate of Clearance - Lead Abatement 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ 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 _____

☐ Temporary Certificate of Occupancy

The following conditions must be met no later than: _____ or the owner will be subject to fine or order to vacate: This certificate has an expiration date of: _____
Conditions to be met:

Construction Official

Fee: \$0.00

Check Number: _____

Collected By: _____

Date Printed: 8/23/2016

U.C.C. F260 (rev. 08/05)

Page 1

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(f)1 ix:

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. 5:23-2.15(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 Brian Massey

Address 102 N COOKS BRIDGE RD 08527

Telephone (732) 503 2259

Signature

Brian Massey

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



BUILDING SUBCODE TECHNICAL SECTION



Date Received 1/11/16
Control # _____

Date Issued _____
Permit # 16-0102

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

Block 903.14 Lot 1.2 Qualification Code _____
Work Site Location 13 River Park Dr Brick NJ 08724

Owner in Fee Catholic St. George
Tel. _____ e-mail _____

Address 13 River Park Dr. Brick 08724
street municipality zip code

Contractor: Brian Massey Tel. (732) 503-2259

Address 102 N. Hooks Bridge Rd Jackson NJ 08527
e-mail _____

Contractor License No. or Builder Registration No. 13VH04657800 Exp. Date 12/31/15

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. _____ FAX: () _____

C. CERTIFICATION IN LIEU OF OATH

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

Sign here: [Signature]

Print name here: Carl B. George

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Build a 13'x11' Deck

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)		Initial
				Type:	Failure	Failure	Approval	
☐	No Plans Required			Footing	<u>8-1-16</u>	<u>OK</u>	<u>P-214</u>	<u>RL</u>
☒	All <u>10/7/15</u>	<u>W</u>		Footing Bonding				
☐	Footings/Foundations			Foundation				
☐	Structural/Framework			Slab				
☐	Exterior			Frame			<u>8-1-16</u>	<u>RL</u>
☐	Interior			Truss Sys./Bracing				
Joint Plan Review Required:				Barrier-Free				
☐	Elec.	☐	Plumb.	Insulation				
☐	Fire	☐	Elevator	Finishes -Base Layer				
SUBCODE APPROVAL for PERMIT				Finishes -Final				
Date: <u>10/08/15</u>				Energy				
Approved by: <u>[Signature]</u>				Mechanical				
SUBCODE APPROVAL for CERTIFICATE				TCO				
☐	CO	☐	CCO	Other				
Date: <u>08/13/16</u>				Final		<u>8-1-16</u>	<u>OK</u>	<u>RL</u>
Approved by: <u>[Signature]</u>				Barrier-Free				

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence _____ Height (exceeds 6')
- ☐ Sign _____ Sq. Ft.
- ☐ Pool
- ☐ Retaining Wall _____ Sq. Ft.
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☐ Other _____
- ☐ Demolition

FEE (Office Use Only)

\$ _____

B. BUILDING CHARACTERISTICS

Use Group 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.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:

State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____

2. Rehabilitation \$ 4000

3. Total (1 + 2) \$ 4000

U.C.C. F110
(rev. 11/08)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

Brick Township

CORRECTION NOTICE

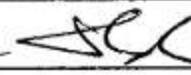
ADDRESS 13 River Park Dr
PERMIT NUMBER 16-0102 BLOCK 903.14 LOT 12
OWNER _____

Upon inspection, violations of the ☒ Building ☐ Plumbing ☐ Electric ☐ Fire Code
were in evidence and the following orders are hereby issued for their correction:

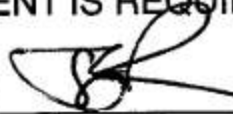
- 1) Need as built drawing for new Deck Layout showing added footing at cantilevered section at house, new stair layout, added 4' of Deck to the rear and new detail for GIRDOR Post connections
- 2) Landings @ Stairs must be 36" in Direction of Travel
- 3) Hand Rails must be Returns @ top + Bottom.

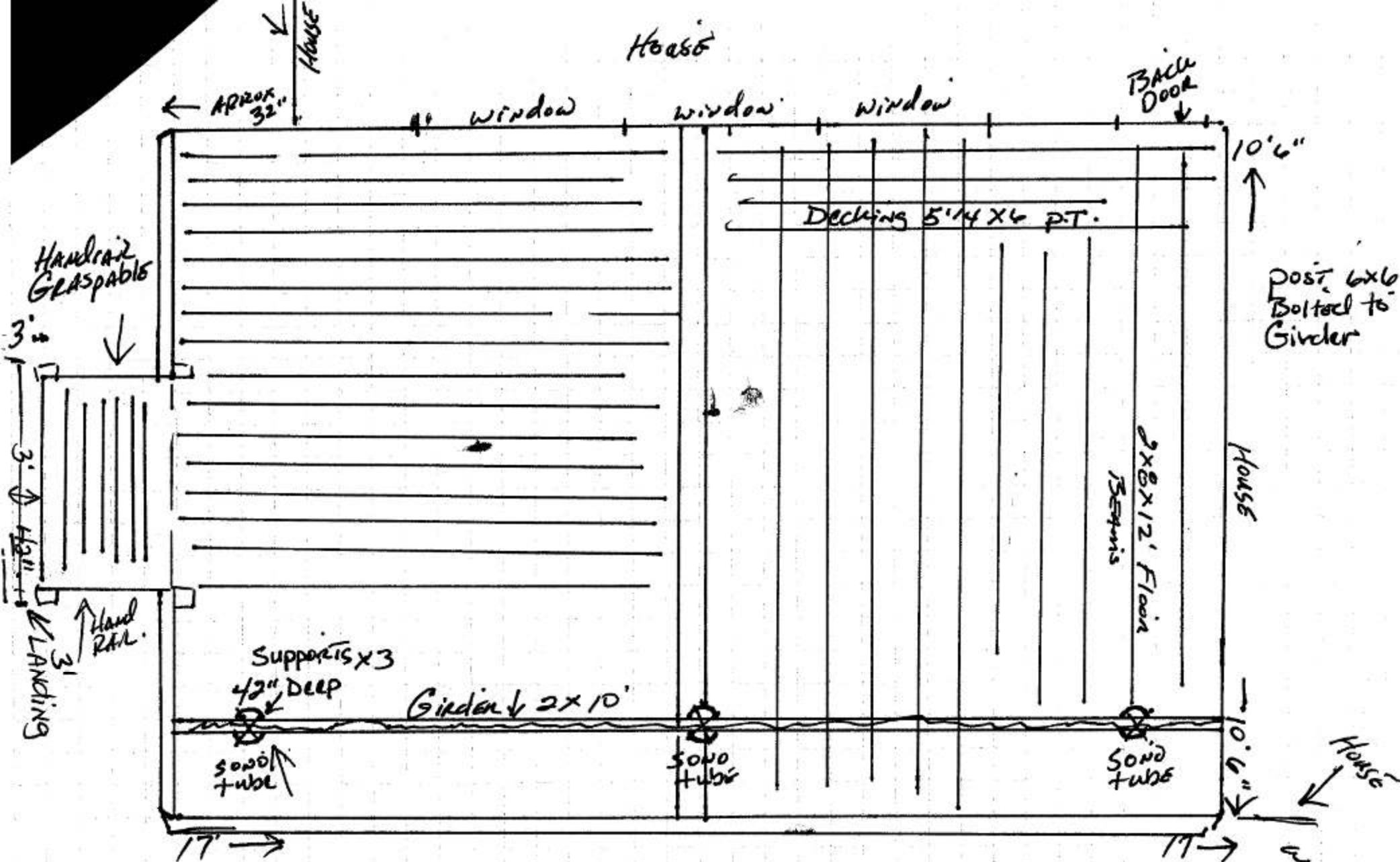
OK To Pour 4 Footings Have all above items addressed
For Frame Insp.

8-9-16

All above is ok From final below 

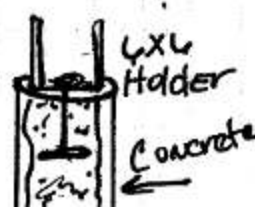
PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED.

DATE 8-1-16 INSPECTOR 



All PRESSURE TREATED MATERIALS
GRAVEL with WEED BLOCK
1 1/2" BEAMS 2x8x12' - APPROX 2 OVERHANG
Bolts for post
Bolts for Ledger Board
All Deck Boards Screwed down

SAND tubes 4 1/2' Deep
3" OF GRAVEL ON Bottom



APPROX FOR USED JOIST 8-2-16



CONSTRUCTION PERMIT

Date Issued _____
Control # C-15-004388
Permit # _____

2010-91

IDENTIFICATION Block: 903.14 Lot: 12
Work Site Location: 13 RIVER PARK DR Brick Township, NJ

Contractor	Qualifier
BRIAN MASSEY	
Address	
102 NORTH COOKS BRIDGE F	
	08527

Owner in Fee
ST. GEORGE, DAVID & CATHERINE
13 RIVER PARK DR. BRICK NJ 08724

Telephone: (732) 503-2259
Lic. No. or Bldrs. Reg. No. 13VH04657800
Federal Employee, No.

Telephone:

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:

DECK....CONSTRUCT 13'x11' REAR DECK

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	\$4,000
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Date 10/8/15
 Construction Official Daniel Newman Jr

U.C.C. F170
equity (rev 1/04)

- 1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

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

PAYMENTS (Office Use Only)	
Building	\$180
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$8
CO Fee	
Other	
Total	\$188
Check No.	2267
Cash	\$0
Credit	\$0
Collected By	

All Materials Pressure treated

Girder 2x10'

Lag 2x8' All Bolted 4 1/2 Lagon Bolts

5/4x6 Decking Materials

spout tubes 12" wide

Footings 42" Deep 3" Gravel AT Bottom

All 2x8's Treated

2 1/2 Deck screws for Decking

All Post #4 to #6 Bolts with Blocking

Bridging down center of Deck

Gravel & Moss under Deck Apron 3"

for drainage

Stairs 3' Apron

Platform 3' of last step -

RECEIVING CLERK

DATE REC'D

8/28/10

ZONING PERMIT APPLICATION

PERMIT #

ZD-116-000796

DATE ISSUED

1/11/16

BLOCK: 903.14

LOT: 12

QUALIFIER:

SITE ADDRESS:

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Cathy St George

COMPLETE ADDRESS: 13 River Park Dr.
Brick N3 08724

PHONE

EMAIL:

2. NAME OF APPLICANT: Cathy St George

APPLICANT ADDRESS: 13 River Park Dr
Brick N3 08724

PHONE #

MAIL:

3. RESPONSIBLE PERSON FOR WORK: Brian Massey

PHONE# 732-503-2259 FAX#

4. SIGNATURE OF APPLICANT:

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$

50-

OTHER: \$

TOTAL: \$

50-

REQUIRED BY APPLICANT

RESIDENTIAL: ☒COMMERCIAL: ☐

EXISTING USE: SFD

PROPOSED USE: SFD

BOARD APPROVAL: ☐ PB ☐ ZB

RESOLUTION#:

APPROVAL DATE:

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: ☐ *ADDITION ☐ *ALTERATION ☐ *PORCH ☐ *DECK ☒POOL: ABOVE GROUND ☐ IN GROUND ☐ FENCE: HEIGHT ☐ TYPE ☐ MATERIAL ☐HEIGHT: ☐ (*IF APPLICABLE)OTHER ☐

DESCRIPTION: Build a 13'x11' Deck connecting 2.

ZONING REVIEW:

DATE REVIEWED: 8/28/10

DATE DENIED:

DATE APPROVED: 8/31/10

INTLS:

al

(SEE BACK PAGE)

OFFICE USE ONLY

RECEIVED

AUG 31 2015

~~ZONING~~

ZONING REVIEW:

DATE REVIEWED: 8/31/10 DATE DENIED: — DATE APPROVED: 8/31/10 INTLS: 5530

[illegible]



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1336

Date Issued: _____
Application Number: ZA-15-01216
Application Date: 08/31/2015
Project Number: _____
Permit Number: _____
Fee: \$50

Zoning Permit

Worksite Location: **13 RIVER PARK DR**
Brick Township, NJ 08724

Block: 903.14
Lot: 12
Qualifier: _____
Zone: R-7.5

Owner: **ST. GEORGE, DAVID & CATHERINE**
Address: **13 RIVER PARK DR**
BRICK, NJ 08724

Applicant: **Brian Massey**
Address: **102 N. Coors Bridge Rd.**
Jackson, NJ 08527

Application Approved Date: 08/31/2015

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Single-Family Residential
Nonconforming Use is: _____

Work Description:

Deck/Porch - Construct a 13' X 11' deck in the rear yard area.

The deck must be minimum 25' from the front property line, 6'15' combined on the side, and 15' from the rear property line.

Additional Zoning permit is required for additional work.

Upon review it was determined that the Zoning Permit:

- ☒ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Valid Nonconforming Use is established by
☐ Zoning Board of Adjustment
☐ Zoning Officer



Christopher J. Romano, Office of Zoning

08/31/2015
Date


Sean Kinnevy, Zoning Officer

8/31/15
Date

LOT 2

LOT 3

LOT 4

N29°03'00"W

80.00'

FM A-381



WOOD STOCKADE FENCE

SHED
14.2'

WOOD STOCKADE FENCE

BLOCK 903.14

LOT 11

LOT 12

LOT 13

100.00'

WOOD STOCKADE FENCE

7.2'x2.2' SHED

CONC. STEPS

16.9'

CONC. PAD

A.C. PAD

CORAL DRIVE

(50' R.O.W.)

ADJ. DWELLING

ONE STORY DWELLING
HSE. NO. 13

29.7'

GAS METER
ELEC. METER

11.5'

0.2'

ADJ. DWELLING

57.8'

11.6'

0.5'

CORAL DRIVE

N60°57'00"E

ASPHALT DRIVE

30.1'

CONC.

CONC. WALKING Review
ApprovalBy: *OC*Date: 8-31-15 *OC*

P.O.B.

140.00'

S29°03'00"E

80.00'

CONC. APRON

LANDSCAPE TIES

EDGE OF PAVEMENT

RIVER PARK DRIVE

CERTIFIED TO:
CATHERINE ST GEORGE

SKETCH OF SURVEY FOR: 13 RIVER PARK DRIVE

DATE: 07/10/15 SCALE: 1" = 20' JOB NO.: 8417 ST GEORGE SHEET: 1 of 1	LOT 12 IN BLOCK 903.14 BRICK TOWNSHIP OCEAN COUNTY, NEW JERSEY R.C. BURDICK, P.E., P.P., P.C. CONSULTING ENGINEERS - SURVEYORS PLANNING - ENVIRONMENTAL PERMITTING 1023 OCEAN ROAD POINT PLEASANT, NJ 08742 (732)892-5050 FAX (732)892-5888 ROBERT C. BURDICK NJ PROFESSIONAL ENGINEER #30828 NJ PROFESSIONAL PLANNER #04383
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This certification is made only to human named parties for purchase and/or mortgage of lands delineated property by the named purchaser. No responsibility or liability is assumed by Surveyor for use of survey for any other purpose including, but not limited to, use of survey for survey, other than, or in any other person not named in certification, either directly or indirectly. Property owners have been set per constructed agreement.

STANLEY HANS JR., P.L.S., P.P.

 N.J. PROFESSIONAL LAND SURVEYOR LICENSE # 29182
 N.J. PROFESSIONAL PLANNER LICENSE # 2877

13 River Park Dr Brick

Cathy St. George

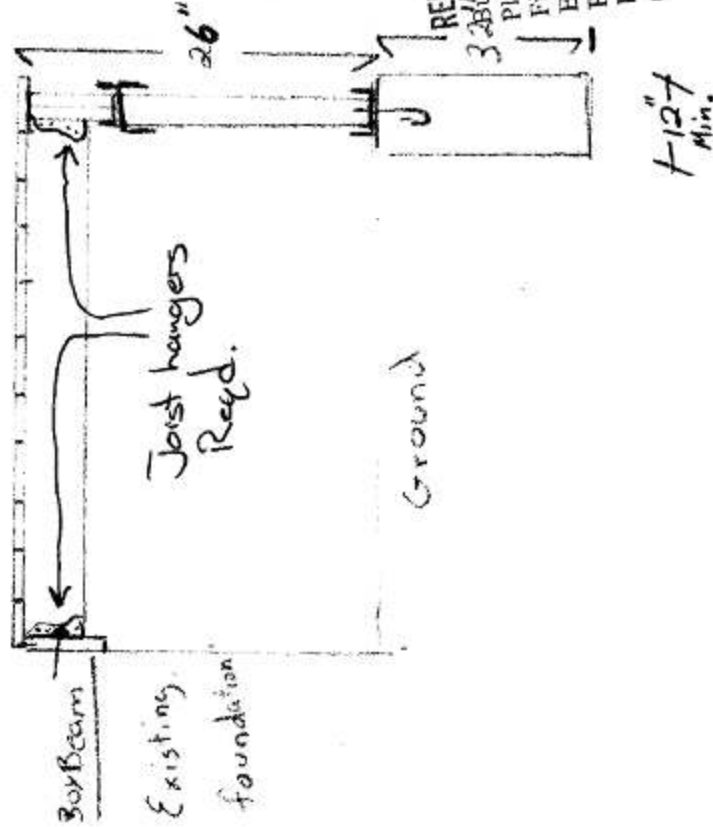
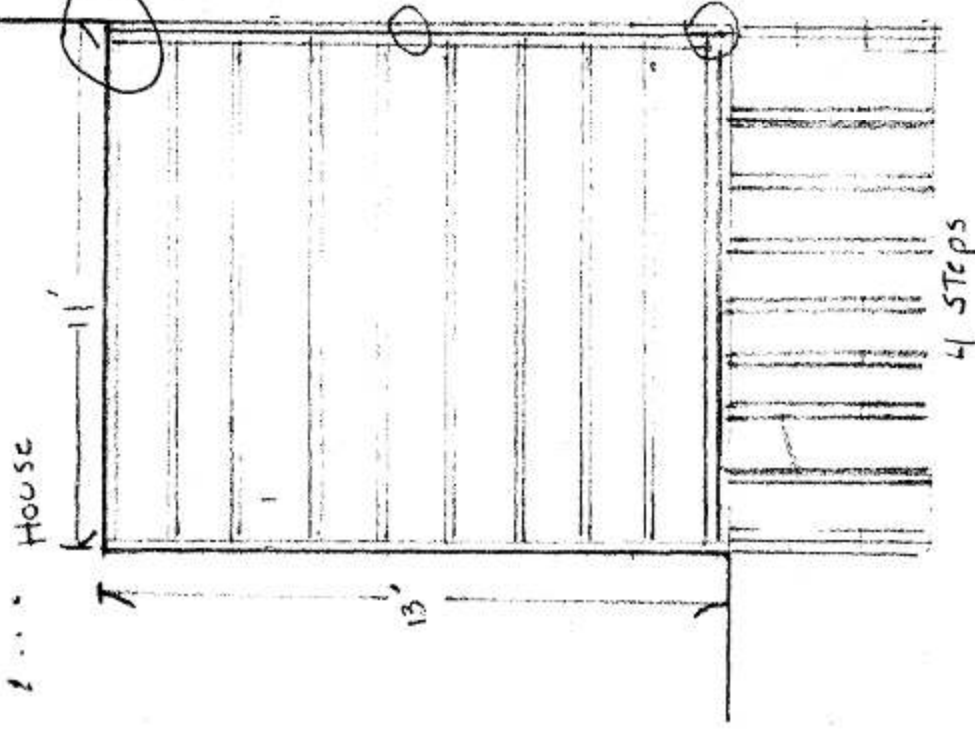
An additional footing may be required if the girder is not supported properly

Approval

By: CC

Date: 8-31-15 DEC

*Read ALL notes in Rec



TOWNSHIP OF BRICK
RELEASED FOR PERMIT
DATE
INITIAL

Building Subcode

Plumbing Subcode

Fire Subcode

Electrical Subcode

Plan Reviewer

Plans Released

Construction Official

Office Sol

- Copper flashing between concrete and 2 inch by 12 inch ledger boards
- Ledger boards lag bolted (4 inch by 1/4 inch Ledger lock lags) to the existing box beam every 16 inches.
- Double 2 inch by 12 inch box boards on the two outside edge of the deck. (nailed together with three 10 penny nails every 16 inches)
- 2 inch by 10 inch floor joists every 16 inches. Using 2 x 10 joist hangers into the ledger and box beams.
- Two 12 inch (diameter) by 32 inch deep foundations
- 4 in x 4 in posts teaced to the box beam and the foundation (with 10 inch J-bolts)
- 5/4 inch by 6 inch decking boards with two 8 penny collated nails to every floor joist
- Four steps down the length of one side. The stringers will be every 16 inches with a double at each end.
- Approx. riser height will be 6 1/2 inches and the treads will be 16 inches deep.
- Under the bottom step will have a 8 inch foundation with a 4 inch concrete slab which will be 6 inches wider than the step width and three feet in front of the step.
- The railing will only be on the stairs. 4 in x 4 in posts (lagged to box and stringer). 2 in by 2 in spindles every 5 inches on center (no greater open spacing of 3 1/2 inches) spindles nailed to 2 in x 4 inch top and bottom board with a 5/4 by 6 decking for a cap.
- A graspable hand rail will be mounted on each stair rail (36 inches high)

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: ⑨ VSS

PERMIT #: _____

BLOCK: 903.14 LOT: 12 ADDRESS: _____**IDENTIFICATION:**1. WORK SITE ADDRESS: 13 River Park Dr, Brick2. NAME OF OWNER IN FEE: Cathy St GeorgeADDRESS: 13 River Park Dr, PHONE #: () _____Brick N.J. 08724 FAX #: () _____3. PRINCIPAL CONTRACTOR: Brian MasseyADDRESS: 102 N Cooks Bridge PHONE #: (732) 503-2259Jackson NJ 08527 FAX #: () _____

4. ARCHITECT OR ENGINEER: _____

ADDRESS: _____ PHONE: # () _____

5. RESPONSIBLE PERSON FOR WORK: Brian MasseyADDRESS: 102 N Cooks bridge Rd Jackson NJ, 08527PHONE #: (732) 503-2259 FAX #: () _____ E-MAIL: BrianMassey@aol.com

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING
☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL
☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☒ OTHER Build a DeckLENGTH: 13' WIDTH: 11' HEIGHT: 26"**FEE SUMMARY:**

APPLICATION FEE: \$ _____

REVIEW FEE: \$ _____

INSPECTION FEE: \$ _____

OTHER _____: \$ _____

BOND(S): \$ _____

TOTAL: \$ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

ENGINEERING REVIEW:DATE RECEIVED: 9/24/15 DATE REJECTED: _____ DATE APPROVED: 9/24/15 INITIALS: KSS

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

John G. Ducey, Mayor

Township Council:

Paul Mummolo - President
Heather deJong - Vice
President
Jim Fozman
Susan Lydecker
Bob Moore
Marianna Pontoriero
Andrea Zapic



Division of Engineering

Elissa C. Commins, PE, PP, CME, CPWM, CFM
Township Engineer & Floodplain Manager
Ecommins@twp.brick.nj.us

732-262-1040
Fax: 732-262-2941
www.twp.brick.nj.us

Date: 6/3/15

**ENGINEERING
PLOT PLAN EXEMPT FORM
(ONLY IF NOT IN A FLOOD ZONE)**

Block: 903.14 Lot: 12

Property Address: 13 River Park Dr. Brick NJ 08724

1. Elly St. George of 13 River Park Dr
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Township Code, Chapter 245, Section 245-29.

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: _____

Signed: _____

Rejected on: _____

Signed: _____

Comments: _____

Elly St. George
Applicant's Signature



THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTI-COLORED
BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

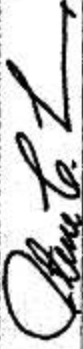
Brian Massey
Brian Massey
102 N. Cooks Bridge Rd.
Jackson NJ 08527

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

08/12/2015 TO 03/31/2016
VALID

13VH04657800

LICENSE REGISTRATION CERTIFICATION #



ACTING DIRECTOR

Signature of Licensee/Registrant/Certificate Holder

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 13 River Park Dr. Brick NJ 08724

BLOCK: 903.14 LOT: 12

CONTRACTOR: Brian Massey

CONTRACTOR'S ADDRESS: 102 N. Cooks Bridge Rd. Backson

Type of Construction (minor, new home): minor

Type of Debris (shingles, siding, wood, etc.): wood

Party responsible for removal: Brian Massey

Dumpster Size: off site Dumpster

Destination of Debris: Backson - 102 N. Cooks Bridge Rd.

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclables.

Generator's Certification: "Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."

Brian Massey
Signature

6/3/15
Date

Brian Massey
Print Name

VILL. 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	<i>mc</i>	<i>5/21/10</i>							<i>2A-15-01816</i>
☐ 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	Barrier Free	Other
Electrical			
Plumbing		Flood Hazard	
Fire Protection		As Built Elevation Cert.	
Mechanical		Other	

X. CERTIFICATES ISSUED (office use only)

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