OK 4-30-84 EO

RECEIVED
APR 23 1984

Page 1

TOWNSHIP OF BRICK

CONSTRUCTION PERMIT APPLICATION

BUILDING

I. IDENTIFICATION

1. Proposed Work at: 979 WABASH Ave.
2. Owner Name: Les RABINSKI Tel. ( ) [redacted]
   Address 496 AmherstDR. BRICK TOWN NJ
3. Principal Contractor: deRA - Homes Tel. ( ) 477-3678
   Address 496 Amherst Dr. BRICK TOWN nj.
   Lic. No. or Builder Reg. No. 00826 Federal Emp. No.
4. Architect or Engineer: A. ROIA Tel. ( ) 223-6300
   Address MANASQUAN nj
5. Responsible Person in Charge of Work Les RABINSKI Tel. ( ) 477-3678

528-19

11-14

II. PROPOSED WORK

A. TYPE OF WORK

1. ☐ Minor Work (Single Trade)
2. ☐ Small Job ($5,000 and no Prior Approvals)
   Complete only II.B., III and IV.A. and Page 2
3. ☑ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☐ Other:

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☐	Building/ Structural	$ 16.600.00
2. ☐	Plumbing	1.000.00
3. ☐	Electrical	1.000.00
4. ☐	Fire Protection	20.00
5. ☐	Other	
6. ☐	Other	
	TOTAL COST	$ 18,625.00

C. DO YOU WANT:

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Dumbwaiters
2. ☐ High-Pressure Boilers
3. ☐ Refrigeration Systems
4. ☐ Pressure Vessels
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Cross-connections/ Backflow Preventors
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R–1)
2. ☐ Multi-Family (R–2)
   HMD Reg. No.:
3. ☐ Two Family (R–3b)
4. ☑ One-Family (R–3a)

If new construction, enter no. of dwelling units 1

If other than new construction, enter no. of dwelling units:

Before Construction:
After Construction:
Net Gain (or loss):

B. NON-RESIDENTIAL

5. ☐ Theatres with Stage (A–1–A)
6. ☐ Movie Theatres (A–1–B)
7. ☐ Night Clubs (A–2)
8. ☐ Restaurants, Libraries, Museums (A–3)
9. ☐ Religious Assembly (A–4)
10. ☐ Outdoor Assembly (A–5)
11. ☐ Business (B)
12. ☐ Educational (E)
13. ☐ Moderate-Hazard Factory (F–1)
14. ☐ Low-Hazard Factory (F–2)
15. ☐ High-Hazard (H)
16. ☐ Institutional Detention Center (I–1)
17. ☐ Hospitals, Infirmaries (I–2)
18. ☐ Group Homes (I–3)
19. ☐ Mercantile (M)
20. ☐ Moderate-Hazard Warehouse (S–1)
21. ☐ Low-Hazard Warehouse (S–2)
22. ☐ Temporary, Misc. (U)
23. ☐ Other

State Specific Use:

If Change in Use Group, Indicate Former:

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☑ Private (Individual, Corp., Non-profit Inst., Etc.)
2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

	Principal	Secondary	Type
3.	☒	☐	Gas
4.	☐	☐	Oil
5	☐	☐	Electric
6.	☐	☐	Solid (Wood,Coal,Etc.)
7.	☐	☐	Propane
8.	☐	☐	Solar
9.	☐	☐	Other

C. TYPE OF SEWAGE DISPOSAL

10. ☒ Public or Private Company
11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☒ Public or Private Company
13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories 1
15. Height of Structure 15 Ft.
16. Area–Largest Floor 1038 Sq. Ft.
17. Bldg. Area–All Fls. 1038 Sq. Ft.
18. Volume of Structure 8304 Cu. Ft.
19. Total Land Area Disturbed 1280 Sq. Ft.

LDS BR 10310144

U.C.C. Form F-100 (8/83)

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.

B. ☐ I further certify that I will perform the work below.

B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing

C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.

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 understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE _____ DATE 04. 2 1984

II. AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

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 _____ **TEL.(** **)** _____

ADDRESS _____

_____

SIGNATURE _____

PERMIT CONTROL

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN – FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date	Plans Received By Receiver	Approval Date	Reviewer	Comments
☑	BUILDING			4/27/84	JK	
	Footings/Foundations					
	Framing					
	Architectural					
	Other Zoning			4/23/84	JRC	
☑	PLUMBING	4/26/84	DM	4/26/84	DM	
☑	ELECTRICAL	4/30/84	[illegible]	5-1-84	RK	
☐	FIRE PROTECTION			5-2-84	[illegible]	
☐	OTHER Eng.			9-2-84	[illegible] per LB.	

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
1	BUILDING			
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
✓	PLUMBING		7/29/84 DM.	
✓	ELECTRICAL		7/24/84 RL	
✓	FIRE PROTECTION		8-16-84 mc	
✓	OTHER Eng.		8-15-84 [illegible] per LB.	

C/C ✓
Ltr ✓
Hours ✓

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☑ Certificate of Occupancy No. 681	8/17/84
☐ Certificate of Continued Occupancy No. _____	_____
☐ Certificate of Approval No. _____	_____
☐ None	

IV. ON-GOING INSPECTIONS

On-going Inspections Required (See Page 1, II.D.)	Date Posted to Log and Tickler

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	$ 112.90
PLUMBING	70.–
ELECTRICAL	.
FIRE PROTECTION	.
OTHER _____	.
SUBTOTAL	$ 182.90
– LESS: 20% of subtotal (when plan review performed by state agency).	(18.29)
D.C.A. TRAINING FEE .0006 x 16128	= 9.68
CERTIFICATE OF OCCUPANCY	27.44
OTHER _____	.
OTHER _____	.
TOTAL COLLECTED WHEN PERMIT ISSUED	$ 238.31
DATE 5/3/84 Collected By MKS	248.31

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			.
OTHER			.
OTHER			.
– LESS: Refunds			(.)
TOTAL COLLECTED AFTER PERMIT ISSUED			$.

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	$.
COLLECTED AFTER PERMIT (VB)	.
TOTAL	$.

U.C.C. Form F-100*(8/83)

49,319–

BLOCK NO. 528-19 LOT NO. 11-14 SUBDIVISION Cedarwood Pk. PERMIT NO. 681

PRIOR APPROVALS CHECKLIST

APPROVALS	LOCAL				COUNTY				REGIONAL				STATE				COMMENTS
	Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		
	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	
☐ Planning Board																	
☐ Zoning Board																	
☒ Sewer Authority	KD	4/19/84															
☒ Water Authority	KD	4/19/84															
☐ Fire Department																	
☐ Police Department																	
☐ Health Department																	
☐ Soil Conservation																	
☐ N.J. Dept. of Community Affairs																	
☐ N.J. Dept. of Transportation																	
☐ N.J. Dept. of Environmental Protection																	
☐ Other:																	
☐																	
☐																	
☐																	
☐																	
☐																	
☐																	

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

	EDITION OF CODE		EDITION OF CODE		
☐ One and Two Family Dwellings		☒ Mechanical	BOCA 1984	☐ Flood Hazard	
☐ Building		☒ Energy	BOCA	☐ As Built Elevation Certification	
☐ Electrical		☐ Barrier Free		☐ Other	
☒ Plumbing	NSPC 1983	☐ Other			
☐ Fire Protection					

TOWNSHIP OF BRICK

NEW JERSEY UNIFORM CONSTRUCTION CODE

CERTIFICATE

CERT. NO. 681
DATE ISSUED 8-17-84
Block 528-19 Lot 11-14
Subdivision Cedarwood Park

IDENTIFICATION

Owner Les Rabinski
Address 496 Amherst Dr.
Brick, NJ
Tel. ( )

Agent
Address
Tel. ( )

Work Site Address
979 Wabash Ave.

Lic. No.
Federal Emp. No.

PAYMENTS

Fees Remitted $
☐ Check No.
☐ Cash
☐ Other

Collected By:
Date:

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☒ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

B. ☐ 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.

C. ☐ TEMPORARY CERTIFICATE OF OCCUPANCY

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

D. DESCRIPTION OF WORK:

single family dwelling

USE GROUP R-3 FIRE GRADING 1 hour

MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE single family dwelling

FINAL COST OF CONSTRUCTION: $ 19,900.

Arthur J. Cuozzo
CONSTRUCTION OFFICIAL

U.C.C. Form F-260 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

August 14 1984

Township of Brick
Div.of Inspections

APPLICATION

for Certificate of Occupancy

Owner: Les E.Rabinski 496 Amherst Dr. Brick Town N.J.
Builder :Les E.Rabinski " " " " " lic.# 00826
Location:979 Wabash Ave.Lots# 11-14 Bl.528-19
Building Permit # 681
I hereby state that to the best of my knowledge all work has been completed ~~with~~ in accordance with permit ,plans and specifications.
The final cost of construction was $ 19.900.00

Les E.Rabinski

TOWNSHIP OF BRICK

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 681
DATE ISSUED 5/4/84
REVISION DATE

Block 528-19 Lot 11-12-13-14
Subdivision Cedarwood Park

A. IDENTIFICATION

APPLICANT -- *Complete unshaded areas only*

When changing contractors, notify this office

Owner Les RABINSKI
Address 496 Amherst Dr BRICK TOWN N.J.
Tel. ([redacted]

Contractor LERR-Homes
Address 496 Amherst Dr BRICK TOWN NJ
Tel. ( ) 477-3678
Lic. No. 00826
Federal Emp. No.

Work Site Address 919 WABASH Ave

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

☑ See Plans

TYPE OF WORK:

- ☑ New Building
- ☐ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

Fee Basis	Fee
.007 per Cu Ft	$ 112.90
[redacted]	[redacted]
[redacted]	[redacted]
SUBTOTAL	$
Minimum Building Fee (if applicable)	$
Total Building Fee *(Greater of Minimum or Subtotal)*	$

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 1
Total Building Area—All Floors 1038 Sq. Ft.
Height of Structure 13 Ft.
Volume of Structure 8,304 Cu. Ft.
Area—Largest Floor 1038 Sq. Ft.
Total Land Area Disturbed 1280 Sq. Ft.
Estimated Cost of Building Work: $ 16,600.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-110 (8/83) Green = Office Copy White = Applicant Copy Beige = Inspector Copy

TOWNSHIP OF BRICK

FIRE SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 681
DATE ISSUED 5/3/84
REVISION DATE

Block 528-19 Lot 11-12-13-14
Subdivision Leggett Wood Pk

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner Les RABINSKI
Address 496 Amherst Dr
BRICK TOWN NJ
Tel. ( ) [redacted]
Work Site Address [illegible] Ave

Contractor LERA-Homes
Address 496 Amherst DR
BRICK TOWN NJ
Tel. ( ) 477-3678
Lic. No. 00826
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other
Area Sprinkled: ☐ Full ☐ Partial (specify in comments)
No. of Heads: No. of Spare Heads:
☐ Valves Supervised – Method:
Water Supply – Source: Size:
FD Connection Location:
Estimated Cost of Work: $

FEE $

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other
Manual Pull: ☐ Yes ☐ No
Locations:
Estimated Cost of Work: $

FEE $

B3. ALARM

TYPE: ☑ Manual ☐ Automatic
Supervision Type: ☐ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $ 25.00

FEE $

B4. STAND PIPES

Pipe Size: Pump Size:
Water Source: Size:
FD Connection Location:
Hose Station: ☐ Yes ☐ No
Estimated Cost of Work: $

$

B5. OTHER

$
$
$

Subtotal $

Minimum Fire Protection Fee (If Applicable) $

Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP Present Proposed
Heating Systems – Location: Laundry room.
Type: ☑ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other
Fuel Storage Tank – Location: Fuel Type: Capacity:
Total Estimated Cost of Fire Protection Work: $ 25.00

D. COMMENTS

S-1-84

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-140 (8/83) Green = Office Copy White = Applicant Copy Pink = Inspection Copy

TOWNSHIP OF BRICK

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 684
DATE ISSUED 5/14/84
REVISION DATE
Block 528-19 Lot 11-12-13-14
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner LES RABINSKI
Address 496 Amherst DR
BRICK TOWN N.J
Tel. ( ) [redacted]
Work Site Address 979 WABASH Ave

Contractor MASTRO
Address 818 W ARAGON ST
TOMS RIVER N.J.
Tel. ( ) 201-270-9169
Lic.No./Bus. Permit 6210
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal	$ 5		Garbage Disposal	$
1	Bathtub	5		Air Conditioner Unit	
2	Lavatory/Sink	10		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
1	Washing Machine	5		Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
1	Water Heater	5		Reduced Pressure Backflow Device	
1	Domestic Boiler/ Furnace	15	2	Vent Stack	10
	Steam Boiler			Solar System	
1	Water Util. Connection			Other GAS	15
1	Sewer Util. Connection			Other	
1	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 45		COLUMN 2	$ 25

Fee	
COLUMN 1	$ 45
COLUMN 2	$ 25
SUBTOTAL	$ 70
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 70

C. PLUMBING CHARACTERISTICS

USE GROUP: R3 Present R3 Proposed

Drainage –	Material	PVC	Size	3 2½
Building Sewer–	Material	PVC	Size	4
Water Service–	Material	POLY	Size	¾
Venting –	Material	PVC	Size	3 2½

Estimated Cost of Plumbing Work: $ 1000.00

D. COMMENTS

☐ *Partial Releases* ☐ *Prototype Processing*

U.C.C. Form F-130 (8/83) Green = Office Copy White = Applicant Copy Blue = Inspector Copy

TOWNSHIP OF BRICK

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 684
DATE ISSUED 5/3/84
REVISION DATE

Block 508-19 Lot 11-17-12-14
Subdivision Section No. 1 Part 4

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner Jos RABINSKI
Address 496 Amherst Dr
BRICK TOWN N.J.
Tel. ( ) [redacted]
Work Site Address 979 WABASH Ave

Contractor DERR-Homes
Address 496 Amherst Dr
BRICK TOWN N.J.
Tel. ( ) 477-3678
Lic. No. 10826
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

☑ See Plans

TYPE OF WORK:

- ☑ New Building
- ☐ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

	Fee Basis	Fee
	1007 sq ft	$ 112.90
SUBTOTAL		$
Minimum Building Fee (if applicable)		$
Total Building Fee (Greater of Minimum or Subtotal)		$

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 1
Total Building Area—All Floors 1038 Sq. Ft.
Height of Structure 13 Ft.
Volume of Structure 8,304 Cu. Ft.
Area—Largest Floor 1038 Sq. Ft.
Total Land Area Disturbed 12 RU Sq. Ft.
Estimated Cost of Building Work: $ 16,600.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-110 (8/83) Green = Office Copy White = Applicant Copy Beige = Inspector Copy

PLAN REVIEW AND INSPECTION — BUILDING

DATE	JOB CONDITION/COMMENTS
	Footing R/M
	Foundation R/M
6-7-84	Sheathing R/M
6-14-84	Framing R/M
6-19-84	Insulation R/M
6-21-84	Sheetrock R/M

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☑ ~~All~~	4/27/84	JK
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: 6-15-84

Inspected By: RM

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☐ Frame				
☐ Architectural				
☐ Insulation				
☐ Finishes				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

TOWNSHIP OF BRICK

FIRE SUBCODE TECHNICAL SECTION

PERMIT NO. [illegible]
DATE ISSUED [illegible]
REVISION DATE
Block 528-19 Lot 11-12-13-14
Subdivision [illegible]

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* — When changing contractors, notify this office

Owner Les RABINSKI
Address 496 AMHERST DR
BRICK TOWN NJ
Tel. ( ) [redacted]
Work Site Address 979 HADASH AVE

Contractor LERA - HOMES
Address 496 AMHERST DR
BRICK TOWN NJ
Tel. ( ) 477-3678
Lic. No. 10526
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other _____ FEE
Area Sprinkled: ☐ Full ☐ Partial (specify in comments)
No. of Heads: _____ No. of Spare Heads: _____
☐ Valves Supervised — Method: _____
Water Supply — Source: _____ Size: _____
FD Connection Location: _____
Estimated Cost of Work: $ _____ $ _____

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other _____
Manual Pull: ☐ Yes ☐ No
Locations: _____
Estimated Cost of Work: $ _____ $ _____

B3. ALARM

TYPE: ☑ Manual ☐ Automatic FEE
Supervision Type: ☐ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $ 25.00 $ _____

B4. STAND PIPES

Pipe Size: _____ Pump Size: _____
Water Source: _____ Size: _____
FD Connection Location: _____
Hose Station: ☐ Yes ☐ No
Estimated Cost of Work: $ _____ $ _____

B5. OTHER

_____ $ _____
_____ $ _____
_____ $ _____

Subtotal $ _____
Minimum Fire Protection Fee (If Applicable) $ -0-
Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ _____

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP _____ Present _____ Proposed
Heating Systems — Location: LAUNDRY ROOM.
Type: ☑ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other _____
Fuel Storage Tank — Location: _____ Fuel Type: _____ Capacity: _____
Total Estimated Cost of Fire Protection Work: $ 25.00

D. COMMENTS

S-1-3[illegible]

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION — FIRE

DATE	JOB CONDITION/COMMENTS
8-16-84	FINAL FIRE — APP

JOB SUMMARY

☐ No Plans Required
☑ Plan Review Approved
Date: 8-16-84
Approved By:

INSPECTIONS FINAL

☑ CO ☐ CCO ☐ CA
Date: 8-16-84
Inspected By: M. McClain

INSPECTIONS

Type	Failure Date			Approval Date
☐ Fire Suppression Test				
☐ Fire Alarm Test				
☐ Smoke Test				
☐ TCO				
☑ Other Final Fire				8-16-84
☐ Other				
☐ Other				
☐ Other				

U.C.C. Form F-140 (8/83)

TOWNSHIP OF BRICK

PLUMBING SUBCODE TECHNICAL SECTION

UNIFORM CONSTRUCTION CODE — NEW JERSEY

PERMIT NO. 684
DATE ISSUED 5/4/84
REVISION DATE

Block 52.-10 Lot 11-12-13-14
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner LES KABINSKI
Address 441 AMHERST DR
[redacted]
Tel. ( ) [redacted]
Work Site Address 479 WABASH AVE

Contractor MASTRO
Address 818 WARREN ST
TOMS RIVER N.J.
Tel. ( ) 201-270-9169
Lic.No./Bus. Permit 6210
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal	$ 4		Garbage Disposal	$
1	Bathtub	5		Air Conditioner Unit	
2	Lavatory/Sink	10		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
1	Washing Machine	5		Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
1	Water Heater	5		Reduced Pressure Backflow Device	
1	Domestic Boiler/ Furnace	15	2	Vent Stack	10
	Steam Boiler			Solar System	
1	Water Util. Connection			Other Gas	15
1	Sewer Util. Connection			Other	
1	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 45		COLUMN 2	$ 25

Fee	
COLUMN 1	$
COLUMN 2	$
SUBTOTAL	$ 70
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 70

C. PLUMBING CHARACTERISTICS

USE GROUP: K3 Present K3 Proposed

Drainage – Material PVC Size 3 2.15
Building Sewer– Material PVC Size 4
Water Service– Material Poly Size 3/4
Venting – Material PVC Size 3 1½

Estimated Cost of Plumbing Work: $ 1000.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-130 (8/83) Green = Office Copy White = Applicant Copy Blue = Inspector Copy

PLAN REVIEW AND INSPECTION — PLUMBING

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved
Date: 4/26/84
Approved By: D Metcalf

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 7-25-84
Inspected By: D Metcalf

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Slab				
☒ Rough				6-12-84 DM
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other _____				

U.C.C. Form F-130 (8/83)

FINIAL

OCEAN COUNTY ELECTRICAL BUREAU
36 HADLEY AVE., C.N. 2191, TOMS RIVER, N.J. 08754

MUNICIPALITY B.T. LINE DEPT. L

OWNER Les Kaluzinski OCCUPANT

LOCATION 597 Walnut St.

B. 528. 19 L-11/14

"INSTALLATION IN THE ABOVE PREMISES HAS BEEN INSPECTED AND IS IN ACCORDANCE WITH THE N.E.C., APPLICABLE UTILITY AND GOVERNMENTAL REGULATIONS"

SERVICE 100 FIXTURES 9 RECEPTACLES 21 RANGE

WATER HEATER ELECT. HEAT AIR COND.

MISC/COMMENTS 1 Smoke Det.

DATE 1-23-91 APPL. # 5663 INSPECTOR R. Locke

ELEC. 104

LIC# 24.

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08723

CERTIFICATE OF COMPLIANCE

Date August 9, 1984

NAME Les Rabinski

ADDRESS 496 Amherst Drive, Brick, NJ

PROPERTY LOCATION 979 Wabash Ave.

Account No. I758406 Block 528-19 Lot 11-14

I hereby certify that the above applicant has complied with all Rules and Regulations of this Authority and has paid all required fees and charges.

For the Authority Patti Evan

Ranch 56

681 (1)

COMBINED GROSS WALL THERMAL TRANSMITTANCE VALUE (U_o) CALCULATIONS

Wall Component	Area	Resistance	A/R
Glass Single	136	0.88	154.5
Glass			
Glass			
Door Wood V=.49	42	2.04	20.6
Door			
Wall Cavity	807	14.43	55.9
Framing	143	7.78	18.4
Wall			
Framing			
Wall			
Framing			
Header or Rim Joist			
Exposed Basement Wall			
Exposed Basement Wall			
Basement Glass			
Basement Glass			
Totals	1128		249.4

U_o Wall = $\frac{A/R}{A} = \frac{249.4}{1128} = .022$ BTU/h-ft^2-^{o}F

U_o Wall Code Limit = 0.23

☑ Meets Code

☐ Does not meet Code

OMBINED GROSS ROOF/CEILING THERMAL TRANSMITTANCE VALUE (U_o) CALCULATIONS

oof/Ceiling Component	Area	Resistance	A/R
on-Cathedral Roof/Ceiling 6"	938	20.67	44.4
Framing	100	8.55	11.7
athedral Roof/Ceiling			
Totals	1038		56.1

U_o Roof = $\frac{A/R}{A}$ = $\frac{56.1}{1014}$ = 0.055 BTU/h-ft^2-^{o}F

U_o Roof Code Limit = 0.05*

☐ Meets Code

☑ Does not meet Code

Note: TOTAL ENVELOPE does meet code.

0.08 for the cathedral portion of the roof

(3)

ALTERNATE METHOD: TOTAL ENVELOPE CONFORMANCE

	A Gross Area	Total A/R	U_o Code Limit	AxUo Limit
Wall	1128	249.4	0.23	259.4
Non Cathedral Roof/Ceilling	1038	56.1	0.05	50.9
Cathedral Roof/Ceilling			0.08	
Floor	1,038	77.4	0.08	81.4
	(1) Grand Total	382.9 BTU/H x °F	(2)Total	391.7 BTU/Hx°F

✓ Meets Code

_____ Does not meet Code

If the grand total (1)of the wall,roof/ceilling and floor A/R values is equal to or less than the total (2) of the A x U_o Code Limits for the wall,roof/ceilling a floor,the Total Envelope meets the Code,even though the wall,roof/ceilling or floor may not.

If the total envelope calculation indicates that the desired construction does not meet code requirements make changes in the structure to add insulation,reduce glas areas or use insulating glass as required to meet the code requiements.

(4)

COMBINED GROSS FLOOR THERMAL TRANSMITTANCE VALUE (U_o) CALCULATIONS

Floor Component	Area	Resistance	A/R
Floor 3½ insul.	938	13.96	65.7
Framing	100	8.55	11.7
Totals	1038		77.4

U_o Floor = $\frac{A/R}{A}$ = $\frac{77.4}{1011}$ = 0.076 BTU/h-ft^2-^{o}F

U_o Floor Code Limit = 0.08

☑ Meets Code

☐ Does not meet Code

SIZING FOR WATER AND SEWER SERVICES

681

Property Owner Rabinski Date 4.26.84

Property Address Wabash Ave Block 528-19 Lot 11-14

Zoning _____ Use Group _____

Contractor Mastro License No. Registration 6210

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu) Water Units	(dfu) Drainage Units
1. Water Closet	1	( ) 3	( ) 4
2. Lavatory	1	( ) 1	( ) 1
3. Bath Tub	1	( ) 2	( ) 2
4. Shower Stall		( )	( )
5. Kitchen Sink	1	( ) 2	( ) 2
6. Service Sink		( )	( )
7. Laundry Tray		( )	( )
8. Dishwasher	1	( ) 3	( ) 3
9. Washing Machine		( )	( )
10. Urinal		( )	( )
11. Floor Drain		( )	( )
12. Drinking Fountain		( )	( )
13. Air Conditioner (water cooled)		( )	( )
14. Dental Unit		( )	( )
15. Lawn Sprinkler No. of Heads		( )	( )
16. Fire Sprinkler No. of Heads		( )	( )
17. _____		( )	( )
18. _____		( )	( )

Water $15
Sewer $15

Total 11 12

Gallons per minute 9

Size of Service 3/4

Date: 4.26.84

Approved: _____
Brick Township Plumbing Inspector

979 Wabash Ave

DATE: 5-28-19 Block 11-14 Lot

TO: Robert Chankalian, Twp. Engineer

FROM: Division of Inspections

SUBJECT: C/O - House

Please perform engineering inspection for Certificate of Occupancy for subject property.

DAY: Wed 8-15-84

OF BRICK

, NEW JERSEY

D, BRICK TOWN, N.J. 08723

RECEIV

APR 2 3

MUNICIPAL E

(201) 477

PLOT PLAN REVIEW CHECK LIST

4-23-84

BLOCK: 528-19 LOT: 11-14

ADDRESS: 979 Wabash Dr.

A. PLAN REVIEW

	SHOWN	ACCEPTABLE	DEFICIENT	NOT APPLICABLE	COMMENTS
1. Survey of Lot		✓			
2. Width & Type of Road Pavement		✓			
3. Existing Elevations: Property: Corners & Lines		✓			
Street Centerline & Gutterline		✓			
Contours (if required)					
4. Existing Topography on Adjacent Properties		✓			
5. Proposed Grading: Garage & 1st floor elevations		✓			
Lot Grading		✓			
Method of Drainage		✓			
6. Certification Signed & Sealed		✓			

B. FIELD CHECK (INSPECTOR) – M P Tellia 4/24/84

Signature Dated Accepted

Comments Existing grade O.K.

Signature Dated Rejected

Comments

PLOT PLAN REVIEW CHECK LIST

CK (MUNICIPAL ENGINEER-IF NECESSARY)

nature Dated Accepted	Signature Dated Rejecte
Comments:	Comments:

D. PLOT PLAN APPROVAL (MUNICIPAL ENGINEER)

RJB 4/26/84 Signature Dated Accepted	Signature Dated Rejecte
Comments: OK	Comments:

E. C. O. APPROVALS

1. Field Inspection (Inspector)

Signature Dated Accepted	Signature Dated Rejecte
Comments: Final Grade OK	Comments:

2. Temporary C. O. (Municipal Engineer)

Signature Dated Accepted	Signature Dated Rejecte
Comments:	Comments:

3. Final C. O. (Municipal Engineer)

Signature Dated Accepted	Signature Dated Rejecte
Comments:	Comments:

1151-A
February, 1981

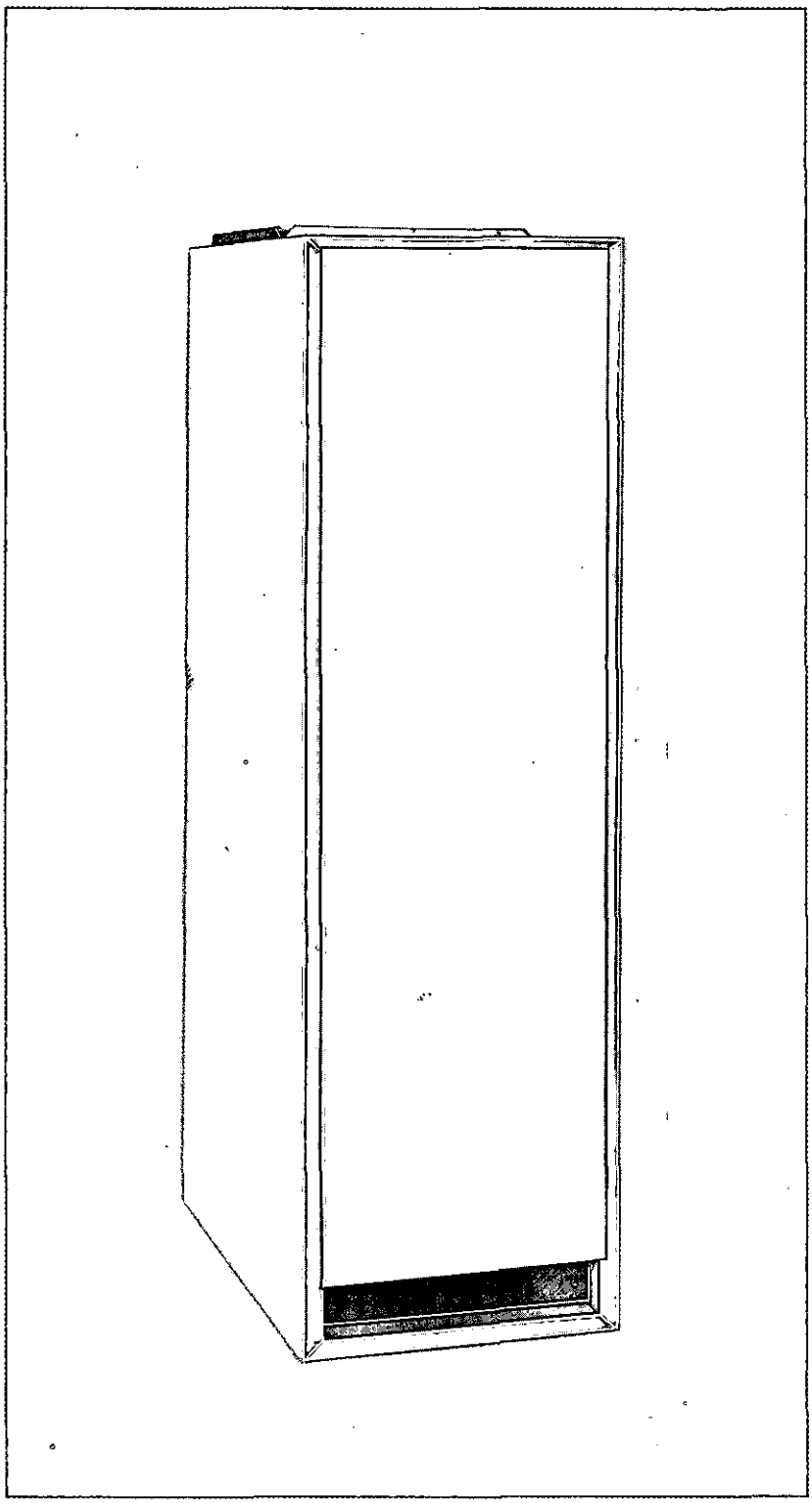
68 1

LUXAIRE, INC • ELYRIA, OHIO 44036

GSC

Gas Counterflow Furnace

55,000 thru 192,500 BTUH



General Description

● RUGGED CABINET constructed of heavy gauge steel is insulated with aluminum foil-faced fiberglass. Finished in light grey enamel, the attractive cabinet features a one-piece, full length, light green front panel, which provides full, easy access.

● HEAT EXCHANGER is precision die formed of heavy gauge steel and then welded to the burner pouch and flue pouch to make a single one piece, leak tight assembly.

● BLOWER-MOTOR combinations are direct and belt drive. Belt drive motors are split phase offering low starting torque with low power consumption. All motors are thermostatically protected against overload and resiliently mounted for quiet operation. Variable speed motor pulley, on belt drive models, permits easy field adjustment for proper air delivery. Direct drive motors on Heat/Cool models are 2-speed, with automatic selection of low for heating and high for cooling.

● BURNERS are precision die formed of high quality steel, with stainless steel slotted port heads used for all gases.

● DRAFT DIVERTER is concealed in the front vestibule of the furnace, to provide a clean modern appearance.

● REDUNDANT COMBINATION AUTOMATIC GAS VALVE, includes a gas-pressure regulator, manual main valve, pilot valve, automatic operator and 100% pilot shut-off. Gas service is standard left hand with provisions incorporated to permit convenient field-change to right hand service.

● FAN CONTROL provides an adjustable range setting to allow for varying operation conditions depending on individual air temperature requirements.

● UPPER LIMIT CONTROL will automatically close the gas valve, if abnormal conditions exist. Automatic reset type.

● LIMIT CONTROL will automatically close the gas valve should the air temperature be abnormally high, thus stopping burner operation. Limit control will automatically reset.

● COOLING FAN RELAY is mounted and factory wired on all heating/cooling models. The fan relay is factory wired with a heavy-duty transformer.

● INTERLOCK SWITCH will interrupt power to the unit in the event the blower access panel is removed.

● FURNACE is design certified by the A. G.A. for Natural and L. P. Gases under warm air furnace requirements.

● Warranty is extended on all components for one (1) year and an additional nine (9) years on the heat exchanger, per Warranty Certificate No. 11,041.

New Data

TOTAL COMFORT SYSTEMS®

Air Delivery Data

Model Number Direct Drive	Maximum CFM at Varying External Pressure Inches W.C.										
	LOW SPEED					HIGH SPEED					Blower
	0.1	0.2	0.3	0.4	0.5	0.1	0.2	0.3	0.4	0.5	Size
GSC055A	—	—	—	—	—	590	560	520	470	—	9-5
GSC055D	440	480	495	500	475	—	775	760	740	700	9-5
GSC082A	—	—	—	—	—	910	890	865	820	780	10-6
GSC082E	940	920	900	900	880	—	1060	1055	1030	1000	10-6
GSC082F	1000	990	980	980	900	—	1160	1140	1120	1100	10-6
GSC110A	1000	955	915	905	890	1080	1060	1035	1010	1010	10-8
GSC110F	1000	1045	1035	1010	960	—	1350	1320	1250	1150	10-8
GSC137A	1100	1115	1140	1115	1070	1230	1215	1200	1200	1170	10-10
GSC137G	1325	1300	1265	1215	1170	1740	1630	1550	1460	1410	10-10

Belt Drive	Max. CFM at Varying Ext. Pressure In. W.C.					Motor Pulley	Blower Pulley	Belt	Blower Size
	0.1	0.2	0.3	0.4	0.5				
GSC082M	1080	990	880	700	—	3¼ x ½	7 x ¾	40	10-6
GSC082R	1335	1310	1285	1260	1230	4 x ½	6 x ¾	40	10-6
GSC110M	1090	1020	930	850	—	3¼ x ½	6 x ¾	39	10-8
GSC110S	1550	1515	1480	1440	1390	4 x ½	6 x ¾	40	10-8
GSC137M	1355	1275	1210	1140	—	3¼ x ½	6 x ¾	39	10-10
GSC137T	1900	1770	1680	1610	1580	4 x ⅝	6 x ¾	40	10-10
GSC165M	1700	1600	1460	1240	—	3¼ x ½	6 x ¾	39	12-11T
GSC165U	2240	2180	2120	2060	2000	4 x ⅝	6 x ¾	41	12-11T
GSC192M	2040	1940	1730	1460	—	3¼ x ½	7 x 1	41	12-15T
GSC192U	2200	2120	2020	1940	1820	3¼ x ½	7 x 1	41	12-15T

"BEFORE PURCHASING THIS APPLIANCE, READ IMPORTANT ENERGY COST AND EFFICIENCY INFORMATION AVAILABLE FROM YOUR RETAILER"

Ratings and Specifications

Model Number	BTU/HR		AGA Design Certified		Blower Drive	Motor H.P.	Factory • Equipped Tons Cooling	Approx. Shpg. Lbs.	A.G.A. Required Min. Filter Size Hi-Velocity Type
	Input	Heat Output	Air Rise Range °F.	Ext. Static Press.					
GSC055A	55,000	40,000	70-100	0.20	Direct	⅛	HEAT ONLY	130	(2) 8 x 16 x 1
GSC055D	55,000	40,000	45- 75	0.50	Direct	¼	2	130	
GSC082A	82,500	60,000	70-100	0.20	Direct	⅙	HEAT ONLY	155	(2) 10 x 16 x 1*
GSC082E	82,500	60,000	70-100	0.50	Direct	¼	2½	155	
GSC082F	82,500	60,000	45- 75	0.50	Direct	4/10	3	155	
GSC082M	82,500	60,000	70-100	0.20	Belt	⅙	HEAT ONLY	155	
CSC082R	82,500	60,000	45-75	0.50	Belt	⅓	3	155	
GSC110A	110,000	80,000	70-100	0.20	Direct	¼	HEAT ONLY	180	(1) 16 x 16 x 1* (1) 10 x 16 x 1
GSC110F	110,000	82,000	45- 75	0.50	Direct	½	3	180	
GSC110M	110,000	80,000	70-100	0.20	Belt	⅙	HEAT ONLY	180	
GSC110S	110,000	80,000	45- 75	0.50	Belt	½	3½	180	
GSC137A	137,500	100,000	70-100	0.20	Direct	¼	HEAT ONLY	210	(2) 16 x 16 x 1*
GSC137G	137,500	100,000	45- 75	0.50	Direct	½	3½	210	
GSC137M	137,500	98,000	70-100	0.20	Belt	¼	HEAT ONLY	210	
GSC137T	137,500	100,000	45- 75	0.50	Belt	¾	4	210	
GSC165M	165,000	120,000	70-100	0.20	Belt	¼	HEAT ONLY	255	(2) 16 x 16 x 1*
GSC165U	165,000	120,000	45- 75	0.50	Belt	¾	5	255	
GSC192M	192,500	140,000	70-100	0.20	Belt	⅓	HEAT ONLY	330	(3) 16 x 16 x 1*
GSC192U	192,500	140,000	70-100	0.50	Belt	½	5	330	

•All Models factory equipped for cooling have heavy-duty Transformer, Blower Relay and Heat/Cool Thermostat.

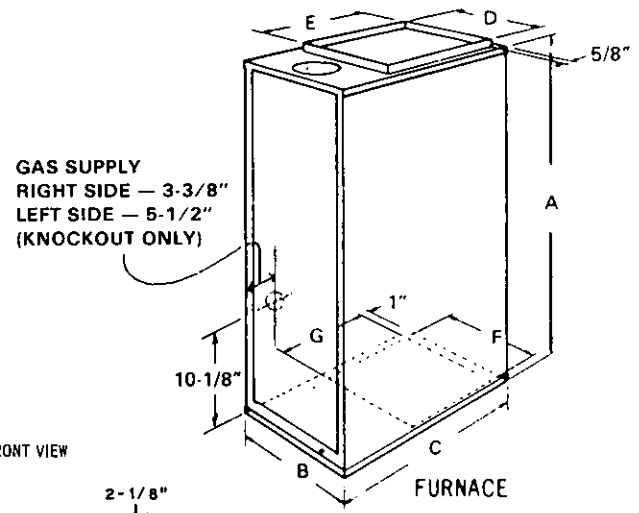
Specifications subject to change without notice.

GSC
Gas Counterflow Furnace
55,000 thru 192,500 BTUH

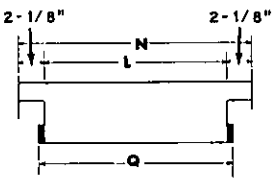
Dimensions (Inches)

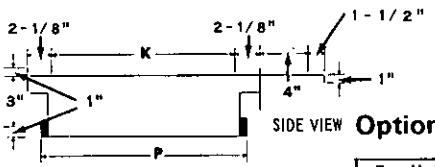
Description		Unit Numbers					
		GSC055	GSC082	GSC110	GSC137	GSC165	GSC192
Height	A	54	54	54	54	54	54
Width	B	12	16	18¼	22	26	32
Depth	C	26½	26½	26½	26½	26½	26½
Height to Top of Flue Collar		35	35	35	35	35	35
Flue Diameter		4"-R	4"-R	5"-R	6"-OV	6"-OV	7"-OV
Air Inlet	D	9¾	13¾	15¾	19¾	23¾	29¾
Opening	E	15¾	15¾	15¾	15¾	15¾	15¾
Air Disch.	F	9⅞	13⅞	16⅛	19⅞	23⅞	29⅞
Opening	G	15⅛	15⅛	15⅛	15⅛	15⅛	15⅛
**Acc. Filter	H	10	14	16	20	24	30
Plenum	J	16	16	16	16	16	16

R = Round OV = Oval Gas Connection Size in FPT-½"



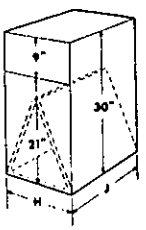
FRONT VIEW





SIDE VIEW

** Optional Filter Plenum without filters (See Plenum Price Sheet)



Accessories
Combustible Floor Base (Inches)

For Unit No.	Part Number	Plenum Opening			Floor Opening	
		K	L	N	P	Q
GSC055	340-0140	16¼	8¼	12½	18	10
GSC082	310-0140	16¼	12¼	16½	18	14
GSC110	311-0140	16¼	14¼	18½	18	16
GSC137	312-0140	16¼	18¼	22½	18	20
GSC165	344-0140	16¼	22¼	26½	18	24
GSC192	1166-0140	16¼	28¼	32½	18	30

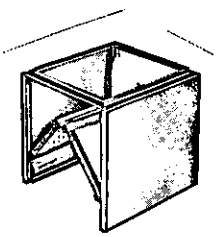
Clearance From Combustible (Inches)

Unit	Top	Front	Sides	Rear	Flue	Floor**
082 thru 192	0"	5"	1"	1"	6"	Non Comb.
055	0"	5"	2"*	1"	6"*	Non Comb.

* May be 1" with type B-1 vent.
** Standard units are for installation on combustible floors when provided with special combustible floor base.

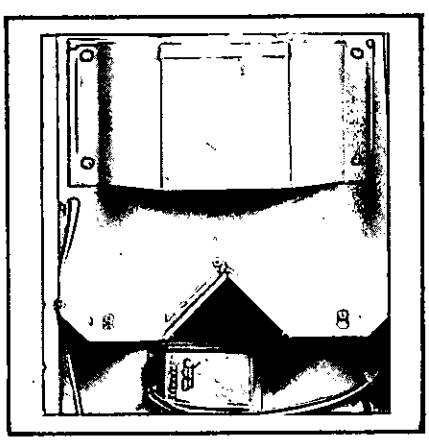
Optional Filter Cabinet and Filters

For Unit No.	Part No.
GSC055	N/A
GSC082	638-9046
GSC110	638-9047
GSC137	638-9048
GSC165	638-9049
GSC192	638-9050



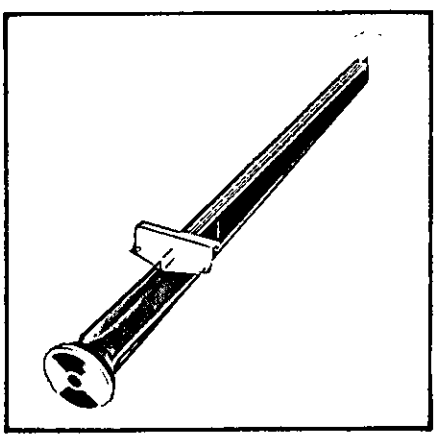
(Not Standard Equip.)
Shipped knocked down, the filter cabinet includes the necessary filters and attaches to the furnace adding 16" to its height.

UNIQUE PATENTED DRAFT DIVERTER



Compact Design Allows More Area For Accessibility To Fan And Limit Control. U. S. Patent No. 3,200,811.

UNIVERSAL SLOTTED PORT STEEL BURNER



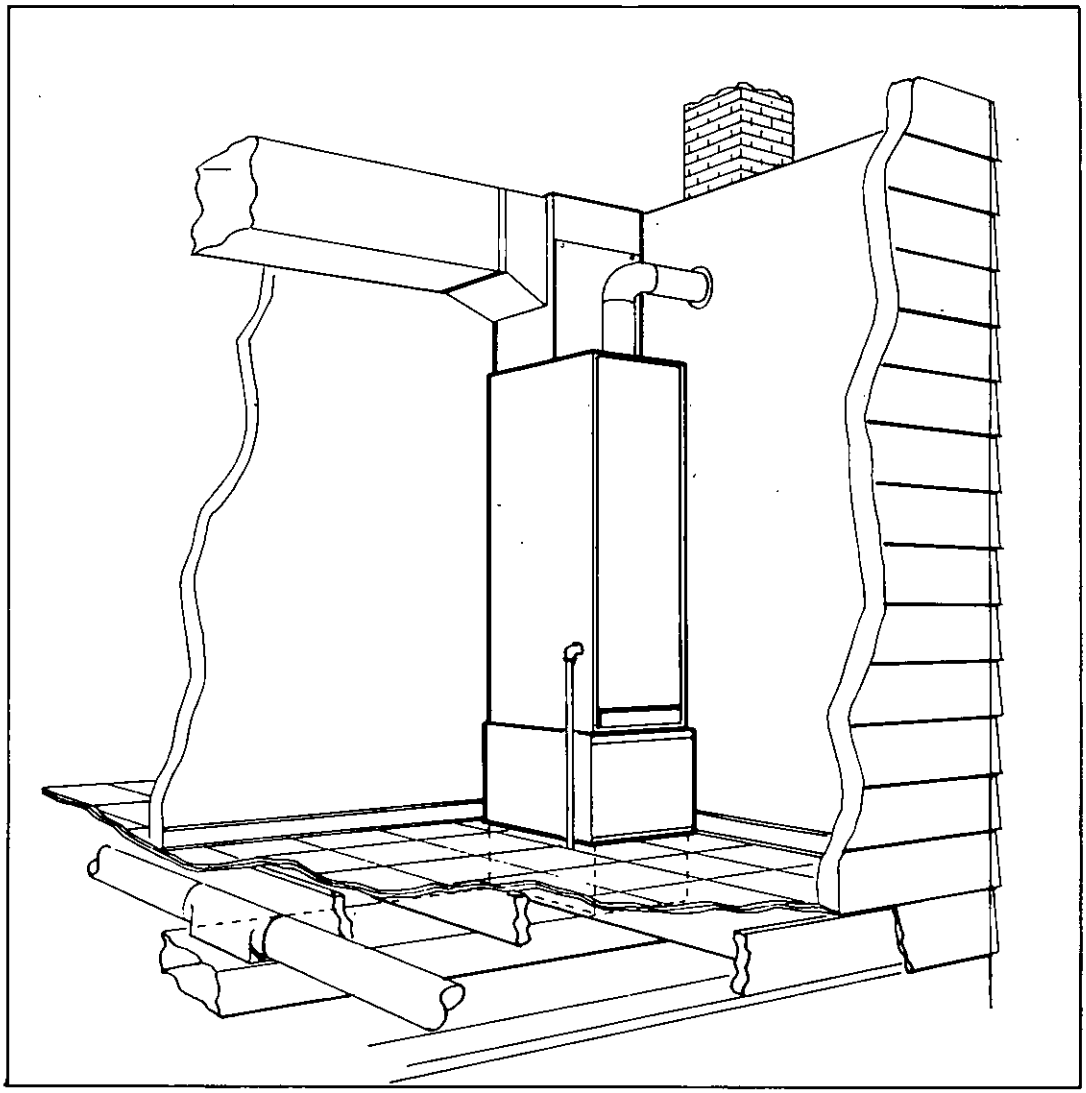
Burns Natural and Liquefied Petroleum Gases. Stainless Steel Head.

GSC

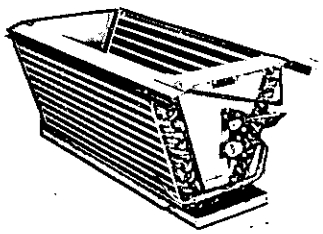
Gas Counterflow Furnace

55,000 thru 192,500 BTUH

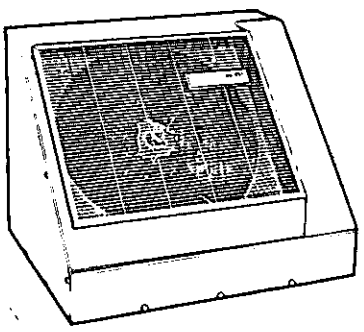
Application



Accessories for add on cooling



Factory Built Plenums And Cooling Coils Are Available For Most Models. You Can Have Whole House Summer Air Conditioning Now Or At Any Time In The Future For Only Pennies A Day.



SLANT OR STRAIGHT FRONT CONDENSING UNITS — These heavy duty condensing units are designed for either outdoor or in-a-wall application. Units are fully charged and factory wired to simplify installations. Only power supply lines, low voltage wiring to fan relay, and refrigerant lines must be connected.

Specifications subject to change without notice.

Luxaire
TOTAL COMFORT SYSTEMS
YORK-LUXAIRE, INC.
SUBSIDIARY OF BORG-WARNER CORPORATION
P.O. Box 4022
Elyria, Ohio 44036

681

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY
1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08723

STATEMENT OF UTILITY SERVICES

APPLICANT: NAME Les Rabinski TEL. NO. _____

ADDRESS _____

PROPERTY IN QUESTION:

BLOCK 528-19 LOT(S) 11-14 ADDRESS 979 Wabash Ave

BTMUA ACCOUNT NUMBER I758406

SINGLE FAMILY RESIDENTIAL (IN EXISTING SUB-DIVISIONS ONLY)

	WATER	SEWER
1. UTILITY SERVICE CAN BE PROVIDED. APPLICATION FOR SERVICE IS REQUIRED.	X	X

CONNECTION WILL BE PROVIDED AS FOLLOWS:

WATER Wabash Ave (STREET)

SEWER Wabash Ave (STREET)

2. UTILITY SERVICE CANNOT BE PROVIDED AT THIS DATE. APPLICATION IS NOT REQUIRED.	____	____
3. UTILITY SERVICE IS PLANNED FOR CONSTRUCTION DURING THE BUDGET YEAR ENDING MARCH 31, 19____. SERVICE MAY BE AVAILABLE SOME TIME THEREABOUT.	____	____

ALL OTHER DEVELOPMENT

EXISTING BRICK TOWNSHIP MUA LINES ARE AS SHOWN ON ATTACHED TAX MAP DRAWING NO. _____.

APPLICANT/DEVELOPER IS REQUIRED TO SUBMIT A FORMAL DEVELOPER APPLICATION TO THE AUTHORITY AS SET OUT IN BRICK TOWNSHIP ZONING ORDINANCE NO. 354-79 AS AMENDED, AND AS REQUIRED BY BRICK TOWNSHIP MUA RULES AND REGULATIONS (LATEST REVISION).

DATE: 4-23-84

SIGNED: Karen Donald

NOTE: STATEMENT GOOD FOR 90 DAYS ONLY

35A

UTILITY SERVICES FOR NEW HOMES

1. OBTAIN "STATEMENT OF UTILITY SERVICES" AND SIZING SHEET AT BTMUA.

2. FILL OUT SIZING SHEET AND HAVE APPROVED BY THE BRICK TOWNSHIP PLUMBING INSPECTOR.

3. APPLICATION FOR UTILITIES SHOULD BE MADE TO BTMUA AS EARLY AS POSSIBLE, AT WHICH TIME THE SIZING SHEET, SIGNED BY THE TOWNSHIP PLUMBING INSPECTOR, MUST BE SUBMITTED.

   APPLICATIONS WITHOUT THE SIGNED SIZING SHEET WILL NOT BE ACCEPTED.

   A DEPOSIT OF $130 IS REQUIRED.

   LEAD TIME FOR TAPS TO BE INSTALLED IS BETWEEN 6 AND 8 WEEKS, WEATHER PERMITTING; HOWEVER, TAPS WILL NOT BE SCHEDULED FOR INSTALLATION UNTIL AT LEAST A FOUNDATION EXISTS. FOR INFORMATION ON SCHEDULED INSTALLATIONS, CONTACT THE AUTHORITY OPERATIONS OFFICE.

4. AFTER THE TAPS HAVE BEEN INSTALLED, SEWER AND WATER SERVICE PERMITS ARE TO BE OBTAINED AT THE BTMUA (PERMIT FEE OF $15 FOR EACH SERVICE).

5. ONCE YOUR SERVICE LINES HAVE BEEN CONNECTED, CALL THE CUSTOMER ACCOUNT DIVISION AT BTMUA TO ARRANGE FOR AN OUTSIDE INSPECTION.

   INSPECTIONS WILL NOT BE MADE UNLESS THE PERMIT HAS BEEN OBTAINED.

6. WATER METER

   A METER AND A REMOTE READOUT WILL BE INSTALLED.

   IF YOU ARE BUILDING ON A SLAB BASE, PLEASE MAKE ARRANGEMENTS WITH YOUR BUILDER TO RUN A PAIR OF WIRES (18 GAUGE, 2 CONDUIT SOLID BELL WIRE) FROM THE INSIDE METER LOCATION TO WHERE THE OUTSIDE READOUT IS TO BE LOCATED, OR CALL THE BTMUA TO DO SO. THIS MUST BE DONE PRIOR TO INSTALLATION OF SHEET ROCK FOR INTERIOR WALLS.

   AFTER ALL INSPECTIONS HAVE BEEN COMPLETED, CALL THE CUSTOMER ACCOUNT DIVISION AT BTMUA TO SCHEDULE THE WATER METER INSTALLATION.

7. CERTIFICATE OF COMPLIANCE

   THE C.C. WILL BE ISSUED AFTER THE METER IS INSTALLED AND ALL REQUIREMENTS MET, AT WHICH TIME ANY OPEN TAP FEES AND PERMIT FEES MUST BE PAID IN FULL.

8. INITIAL SERVICE CHARGES

   IF THE OWNER DESIRES, THE APPLICABLE INITIAL SERVICE CHARGES MAY BE PAID IN QUARTERLY INSTALLMENTS (PLUS INTEREST) ACCORDING TO AN ESTABLISHED PAYMENT PLAN. SEE OUR CUSTOMER ACCOUNT DIVISION FOR DETAILS.

DEPARTMENT OF COMMUNITY AFFAIRS
DIVISION OF HOUSING
BUREAU OF CONSTRUCTION CODE ENFORCEMENT
NEW HOME WARRANTY PROGRAM
CN 805
Trenton, New Jersey 08625

CERTIFICATE OF PARTICIPATION

in New Home Warranty Security Fund

PURCHASER

1

Vaclav Henry Kubes
NAME

273 Hancock Ave.
STREET AND NO.

Jersey City N.J. 07307
CITY STATE ZIP

BUILDER Rabenold, Joseph

2

~~Lera Homes~~
NAME

496 Amherst Drive
STREET AND NO.

Brick Town N.J. 08723
CITY STATE ZIP

PHONE NUMBER: (201) 477-3678

SELLING PRICE* ~~59,900.00~~ 55,900.00

Amount of Premium 223.60
(.4 x 1% x Selling Price)

N.J. BLDR. REGISTRATION # 00826

Registered Builder's Signature

*Any change in the selling price & premium must be reported to the Bureau along with supplemental payment if applicable.

NEW DWELLING UNIT LOCATION

3

979 Wabash Avenue
STREET NAME AND NUMBER

Brick Town 08723
CITY ZIP

528-19 11,12,13,14
BLOCK NUMBER LOT NUMBER

Brick Town Ocean
MUNICIPALITY COUNTY

COMMENCEMENT DATE OF WARRANTY

4

	month	day	year
COMMENCEMENT DATE	July	25	1984

(The date of closing or first occupancy, whichever occurs first.)

NOTE: Any change in the commencement date must be reported to the Bureau.

MORTGAGEE INFORMATION

5

none
NAME OF MORTGAGEE

STREET AND NUMBER

CITY STATE ZIP

CHECK TYPE OF HOME:

SINGLE FAMILY ☒ **TWO-FAMILY** ☐ **CONDOMINIUM** ☐ **TOWNHOUSE** ☐

PURCHASER: If you disagree with any of the above information please notify this office in writing as soon as possible.

This certifies that the above described dwelling unit carries a New Home Warranty issued pursuant to the New Home Warranty and Builders' Registration Act, Chapter 46:3B–1 et seq. Said warranty is valid for varying periods of 1, 2, and 10 years subject to the terms and conditions of the Act and Regulations.

NOTE: See reverse side in case of sale of property.

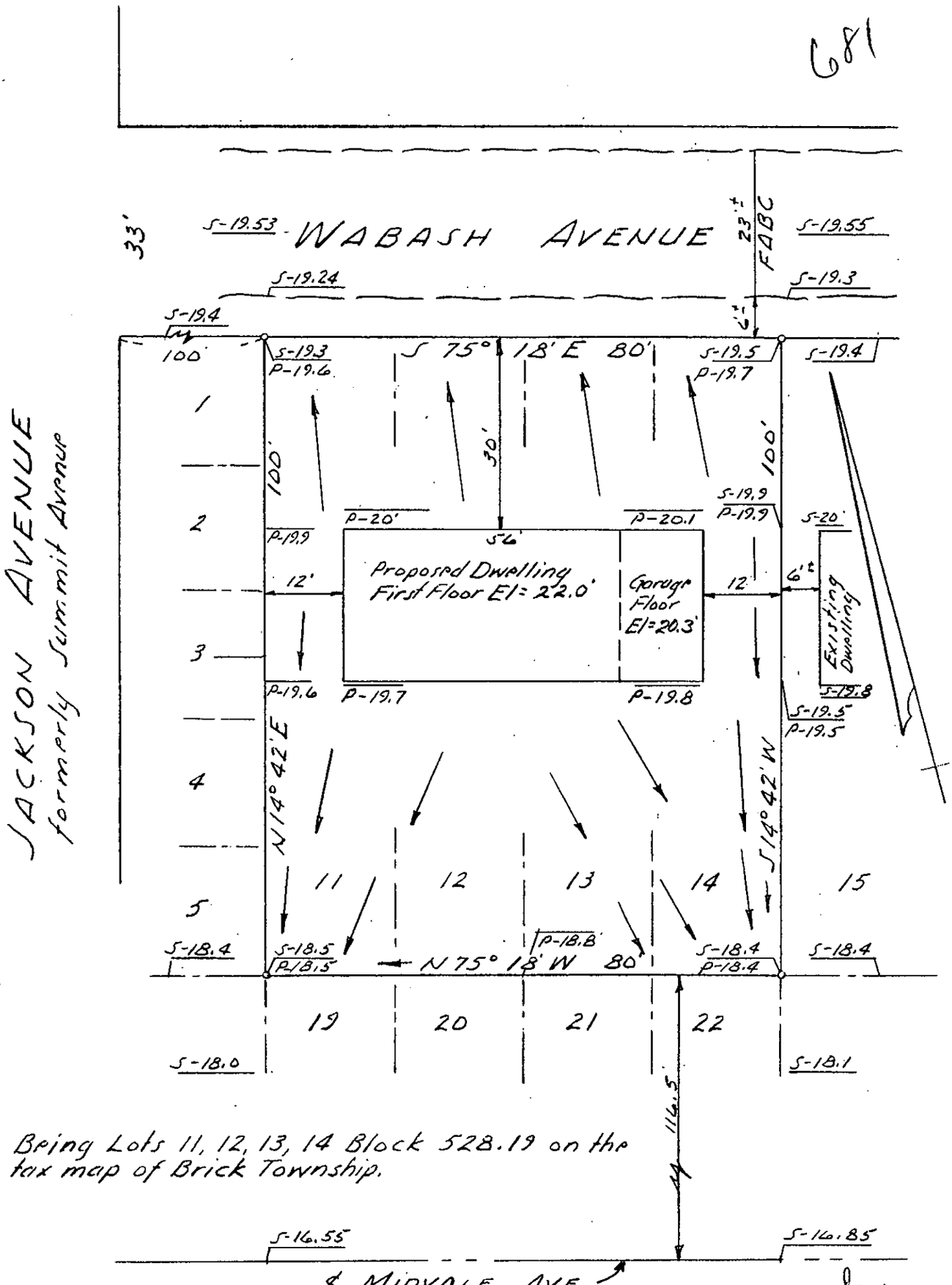
Charles M. Decker

Charles M. Decker, Chief
Bureau of Construction
Code Enforcement

VALIDATION STAMP
CERTIFICATE NUMBER
25986 JUL 31 84

PLEASE REMOVE ALL CARBON PAPER BEFORE RETURNING **MUNICIPAL COPY**

681



Bring Lots 11, 12, 13, 14 Block 528.19 on the tax map of Brick Township.

LEGEND:
S-00.0 = Spot Elevation
P-00.0 = Prop. Fin. Grade
→ = Direction of Drainage
Elevations refer to U.S.C.&G. survey datum.

LOT GRADING PLAN FOR
LESZEK RABINSKI
BRICK TOWNSHIP, OCEAN COUNTY, N.J.
APRIL 17, 1984

SCALE 1"

Approved 4/23/84 J.A.C.

Elbert Morris, Pres.

Elbert Morris
Lic. L.S. No. 8509

MORRIS & GLASGOW, INC.
ENGINEERING AND SURVEYING
1119 ARNOLD AVENUE
POINT PLEASANT BORO, N.J.

Charles W. Glasgow
Lic. P.E. & L.S. No. 9095

MAP No. 2-2077

BOOK.....