90
K

BLOCK 1151.08 LOT 6 ADDRESS (SITE) 289 Lenox PERMIT NO. 368-90

RECEIVED
MAR 5 1990
BUILDING

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 289 Lennox Dr.
2. Name of Owner in Fee: Jemma Furgus [redacted]
   Address 289 Lenox st (street) Brick (municipality) NJ. 08723 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: _____ Tel. (___) _____
   Address _____
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. _____ Social Security No. _____
5. Architect or Engineer _____ Tel. (___) _____
   Address _____
6. Responsible Person In Charge of Work _____ Tel. (___) _____

Rico Poor

II. PROPOSED WORK

Cellar door + SHED

	Est. Cost
1. ☐ Minor Work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☒ New Building	
4. ☐ Addition	
5. ☐ Alteration	
6. ☒ Fire Protection	
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS ✓	3,000

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
			4/10/90 RF				
	4-5-90		4-5-90	RC			

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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building Shed	$ 15 29	✓	4/9/90
2. Electrical			1200 ✓
3. Plumbing			
4. Fire Protection	20 —		
5. Other Cellar	9.50		
6. Subtotal	$ 15 29	✓	
7. Less 20% for State Plan Review	153	✓	
8. Subtotal	$		
9. DCA Training Fee	3.06	✓	
10. Subtotal	$		
11. Cert. of ~~Occupancy~~ PRP	20 —	✓	
12. Other Cellar	7 50	✓	
13. TOTAL	$ 4738	✓	

Boom for fence ✓

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ft.	
3. Area—Largest Floor sq. ft.	
4. Building Area—All Floors sq. ft.	
5. Volume of Structure 2184 cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ft.	
10. Wetlands yes sq. ft. / no	
11. Fire Grading	
12. Max. Live Load	
13. Max. Occupancy Load	

VII. DESCRIPTION OF BUILDING USE

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

No of dwelling units:
Before Construction ____
After Construction ____
Net gain or loss ____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10413295

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( )I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( )I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

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

Signature _____ Date _____

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey 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 Bernard L. Lesnowicz

Address _____

_____

Telephone ( ) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date	COMMENTS
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Fire Department					X	X	X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Dept. of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Dept. of Environmental Protect.	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☒ Other Zoning	SK	3/19/90	door + shed						
☒ Zoning	SK	4/4/90	fence						
☐ Zoning	SK	4/10/90	ditch						

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

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

X. CERTIFICATES ISSUED (office use only)

			DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.		
☐ Temporary Certificate of Occupancy	No.		
☐ Continued Certificate of Occupancy	No.		
☐ Certificate of Occupancy	No.		

NEW JERSEY UNIFORM CONSTRUCTION CODE

CONSTRUCTION PERMIT

Date Issued 3-27-90
Control #
Permit # 368-90

TIFICATION Block 1151-08 Lot 6

Site Location 289 Lennox Dr

Contractor Yellowstone
Address "

er in Fee Jemma Furcus Robert
ess 289 Lennox Dr
Brick N.J.

( )

Tele. ( )

Lic. No. or Bldrs. Reg. No: Exp. Date

Federal Emp. No. **0005*

or Social Security No. 368

reby granted permission to perform the following work:

BUILDING [ ] PLUMBING [ ] OTHER

ELECTRICAL [ ] FIRE PROTECTION

CRIPTION OF WORK:

Alter & Shed

(2184)

: If construction does not commence within one (1) year of date of issuance, or if ruction ceases for a period of six (6) months, this permit is void.

ated Cost of Work $ 3000.

Form F-170A

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	15.29
Plumbing	
Electrical	
Fire Protection	
Other P/R.	1.50
Other Alter	7.50
DCA Training Fee	3.60
Cert. of Occ. APP	20
Other	
Total	47.38
Check No.	#178
Cash	
Collected By:	

1151-0 LOT 6 # BUILDING PLAN RVW U.C.A. BUILDING TOTAL CHECK CHANGE
03/27/90 NO. 5 0016A005

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 3-27-90 D
Control #
Permit # 368-90

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

Block 1151.08 Lot 6
Work Site Location 289 Lenox St Brick

Owner in Fee 289 Lenox St
Address Brick N.J. 08723

Te [redacted]
Contractor
Address

Tele. (____)
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. _____ or Social Security No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
[ ] No Plans Req.			Type:				
[ ] All			Footing				
[ ] Footing			Foundation				
[ ] Foundation			Slab				
[ ] Frame			Frame				
[ ] Other			Insulation				
Joint Plan Review Required:			Finishes:				
[ ] Elec. [ ] Plumb. [ ] Fire			Energy				
SUBCODE APPROVAL			Mechanical				
[ ] CO [ ] CCO [ ] CA			TCO				
Date:			Other				
Approved By:			Final				

B. BUILDING CHARACTERISTICS

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

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

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

Cellar door
Bilco - outside entrance
Footing & Slab Shed

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other _____
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence _____ Height
  [ ] Sign _____ Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other _____

(Office Use Only)
FEE
$ _____

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL FEE $ _____

U.C.C. Form F-110A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received 4/10/90
Date Issued
Control #
Permit # Update 36A-90

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

Block 1151-08 Lot 6
Work Site Location 289 Lenox ST, Brick

Owner in Fee Keith & Jemma Furgus
Address 289 Lenox ST, Brick, NJ. 08723

Tele [redacted]
Contractor
Address

Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing	Deck-		4/27/90	
Foundation				
Slab				
Frame			4-24-90	
Insulation			4-27-90	
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

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

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

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 Jemma Furgus

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

finish Basement 2000.
See "Floor Plan" + fence 1500
& deck 1800.

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other ____
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence ____ Height
  [ ] Sign ____ Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other ____

(Office Use Only)
FEE
$ ____

Administrative Surcharge $ ____
Paid [ ] Check # ____ Minimum Fee $ ____
Collected by: ____ TOTAL FEE $ ____

U.C.C. Form F-110A 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 3-27-90
Control #
Permit # 368-90

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

Block 1151.08 Lot 6
Work Site Location 289 Lenox St Brick

Owner in Fee 289 Lenox St
Address Brick N.J. 08723

Tele [redacted]
Contractor
Address

Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

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

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. $ 3000
2. Alteration $
3. Total (1+2) $

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

Cellar door
Bilco - outside entrance

Footing & Slab Shed

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence Height
  [ ] Sign Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other

(Office Use Only)
FEE
$

Administrative Surcharge $
Paid [ ] Check #: Minimum Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-110A 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 4/10/90
Date Issued
Control #
Permit # update 368-90

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

Block 1151-08 Lot 6
Work Site Location 289 Lenox ST
Brick, NJ. 08723
Owner in Fee Keith & Jemma Furgus
Address same
Tel [redacted]
Contractor
Address
Tele. ( )
Lic. No.
Federal Emp. No. or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[X] Fire Plans Approved
Date: 4-5-90
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors	1	
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER Smoke Det.		

Administrative Surcharge $ 20.00
Paid [ ] Check # Minimum Fee $
Collected by TOTAL FEE $

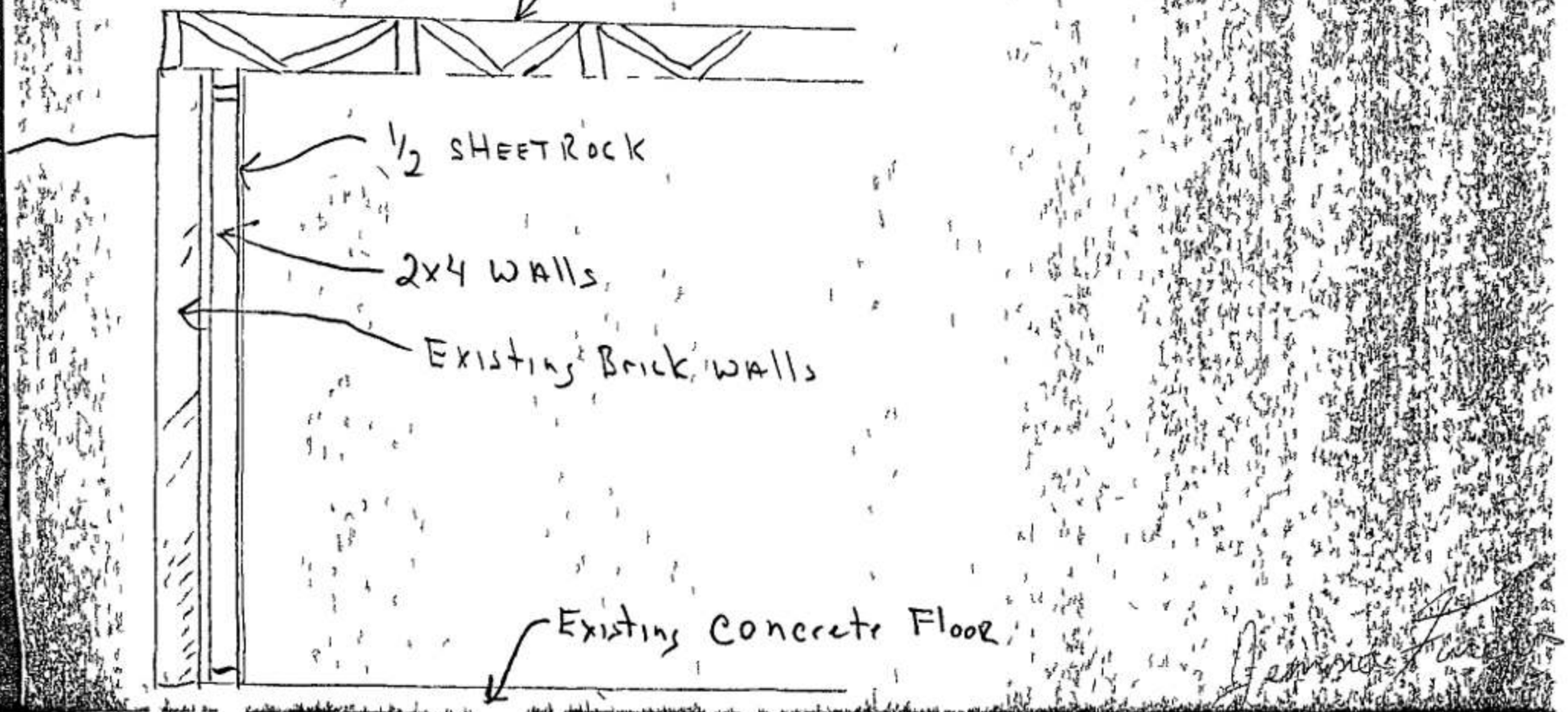
U.C.C. Form F-140A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

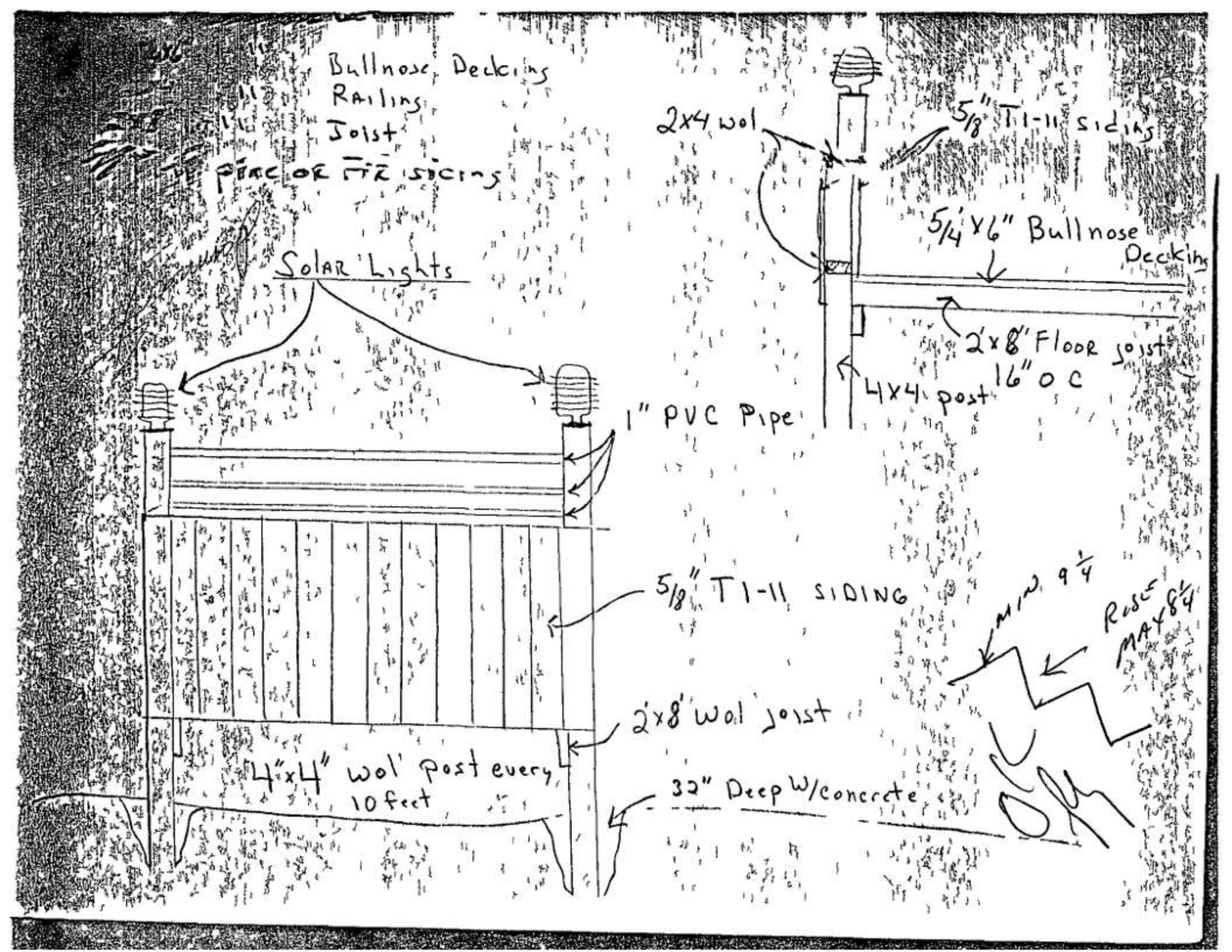
2"x4" WALLS

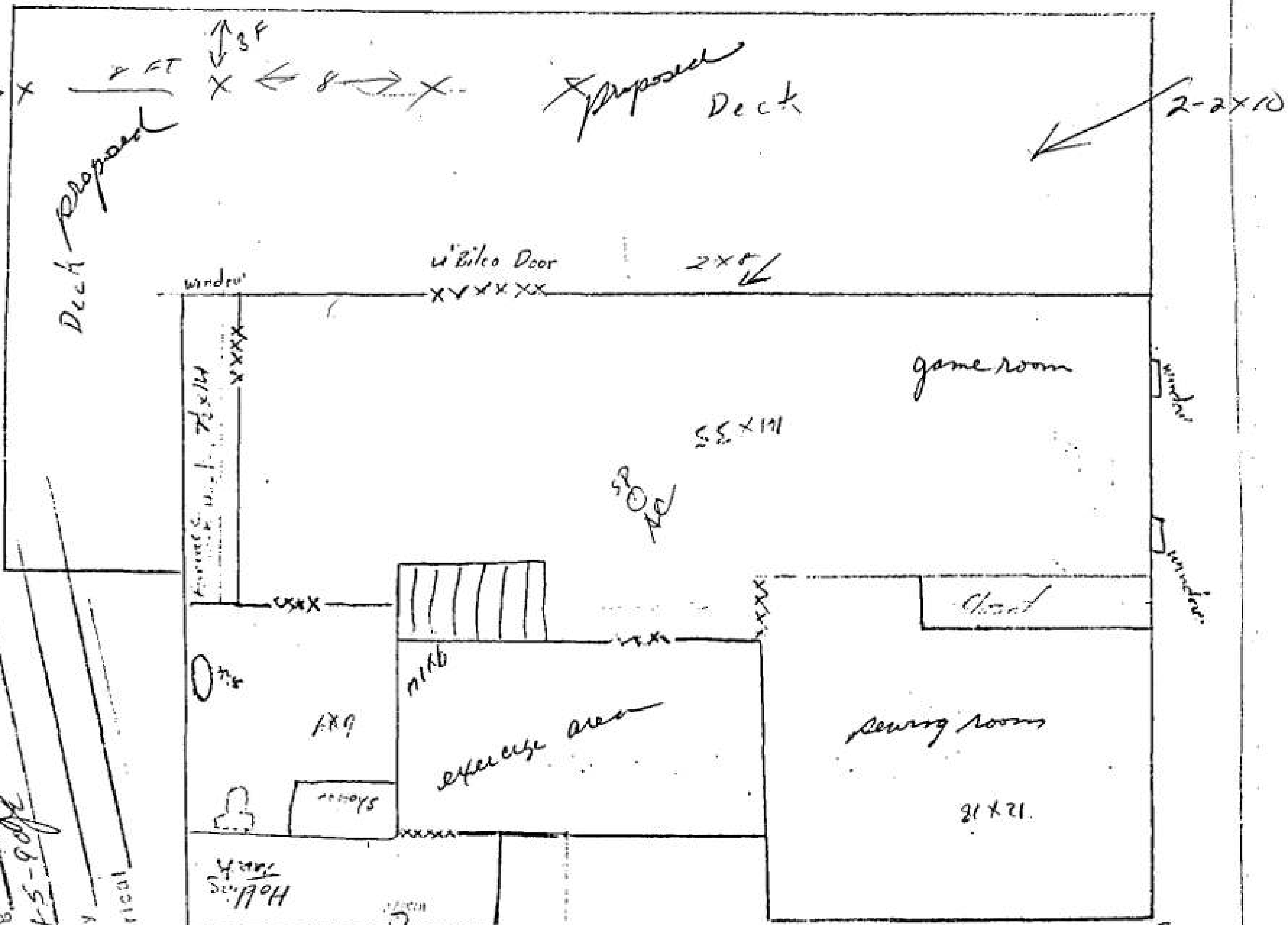
½" SheetRock

½" FIRE Rock in Utility Room

½" GreenRock in bathroom

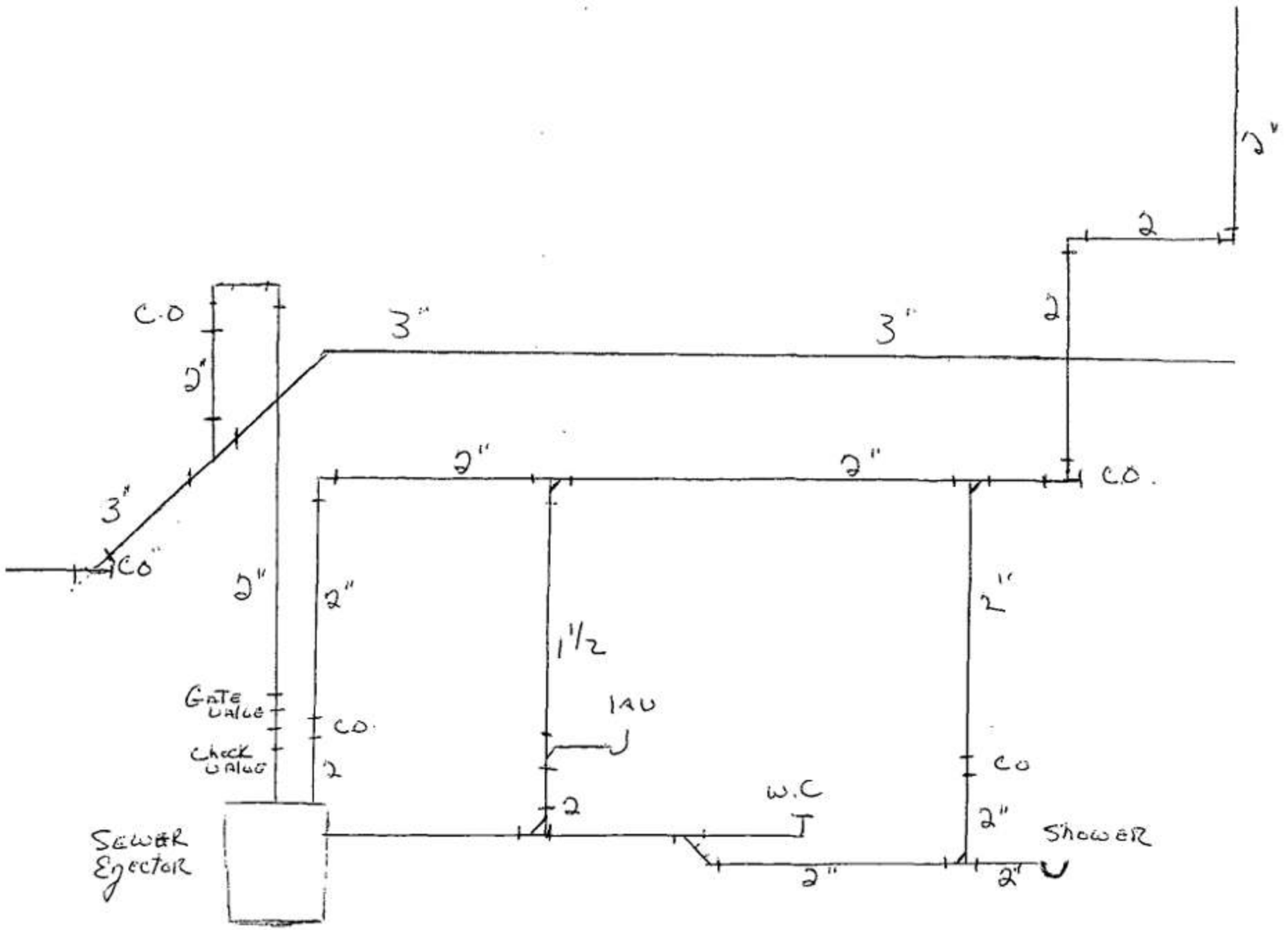


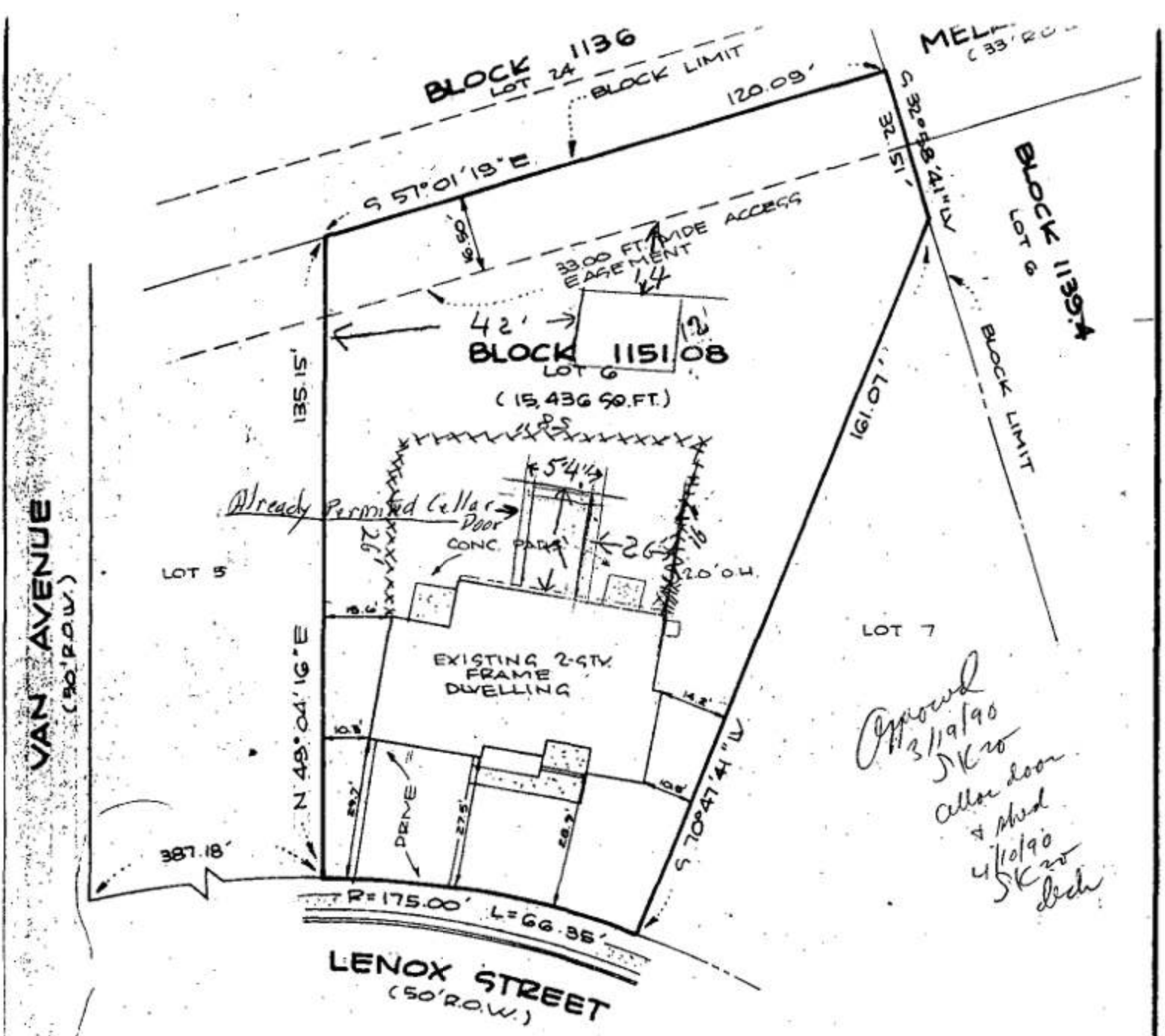

Bullnose Decking
Railing
Joist
PEAC OR FIR SIDING
Solar Lights
2x4 wol
5/8" T1-11 siding
5/4 x 6" Bullnose Decking
2x8" Floor joist 16" o.c
4x4 post
1" PVC Pipe
5/8" T1-11 SIDING
2x8 wol joist
4"x4" wol post every 10 feet
32" Deep w/concrete
MIN 9 1/4
RISE MAX 8 1/4



Class
Plan Review
Zoning 4-9-90
Plumbing
Building 4-5-90
Fire
Energy
Electrical

Jemma Fuger


C.O
2"
3"
3"
3"
2
2
2"
2"
C.O.
3"
4"
C.O"
2"
2"
1 1/2
2"
GATE VALVE
C.O.
CHECK VALVE
2
IAU
2
W.C
C.O
2"
SHOWER
2"
2"
SEWER EJECTOR



NOTE:
NO PROP. CORNERS REQUESTED BY OWNER AT THIS TIME.

JOB NO. 124

CERTIFIED TO

KEITH FURGUS AND JEMMA FURGUS HUSBAND / WIFE

CITICORP MORTGAGE, INC. ITS SUCCESSORS AND/OR ASSIGNS

COMMONWEALTH LAND TITLE COMPANY

CHARLES W. THOMAS PLS., P.P. PLS LIC # 27495 P.P. LIC # 03188

The Schoor DePalma & Canger Group Inc

McSWEENEY & DREWES

Consulting and Municipal Engineers

201/840-1700

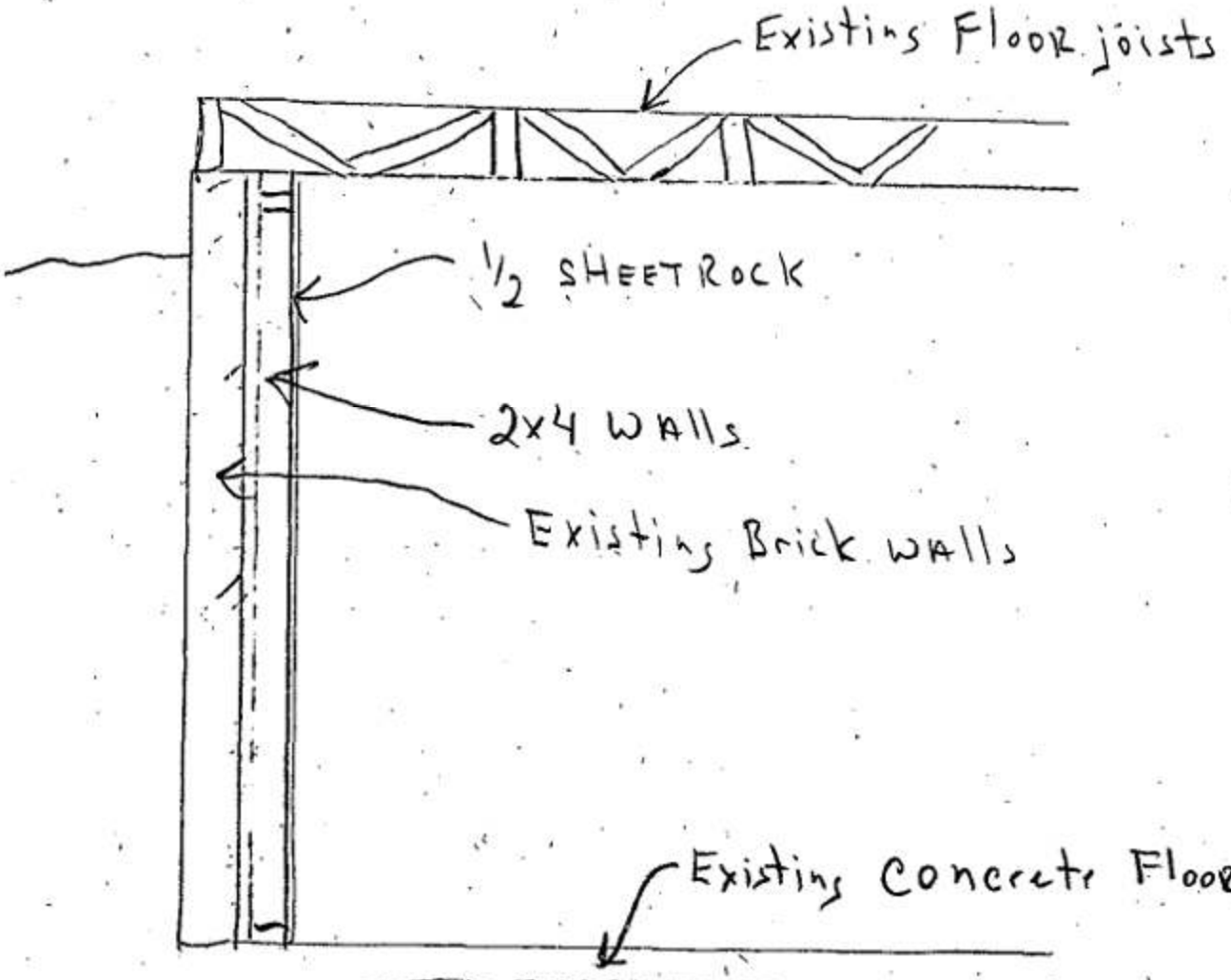
DATE	REVISIONS	ORDER NO

2"x4" WALLS

½" SheetRock

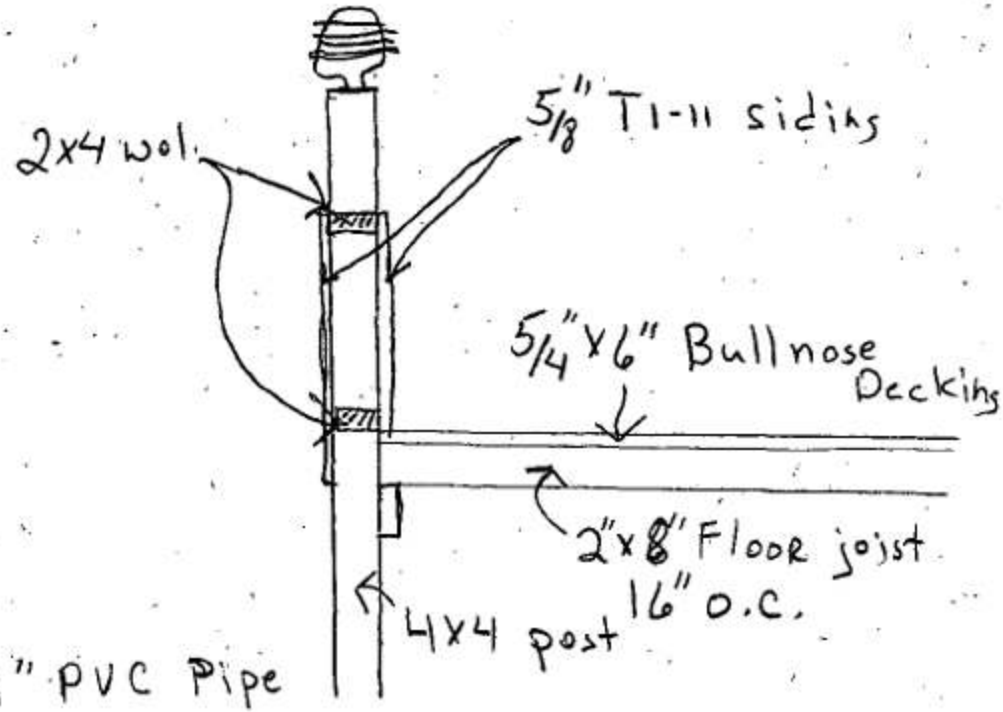
½" FIRE Rock in utility Room

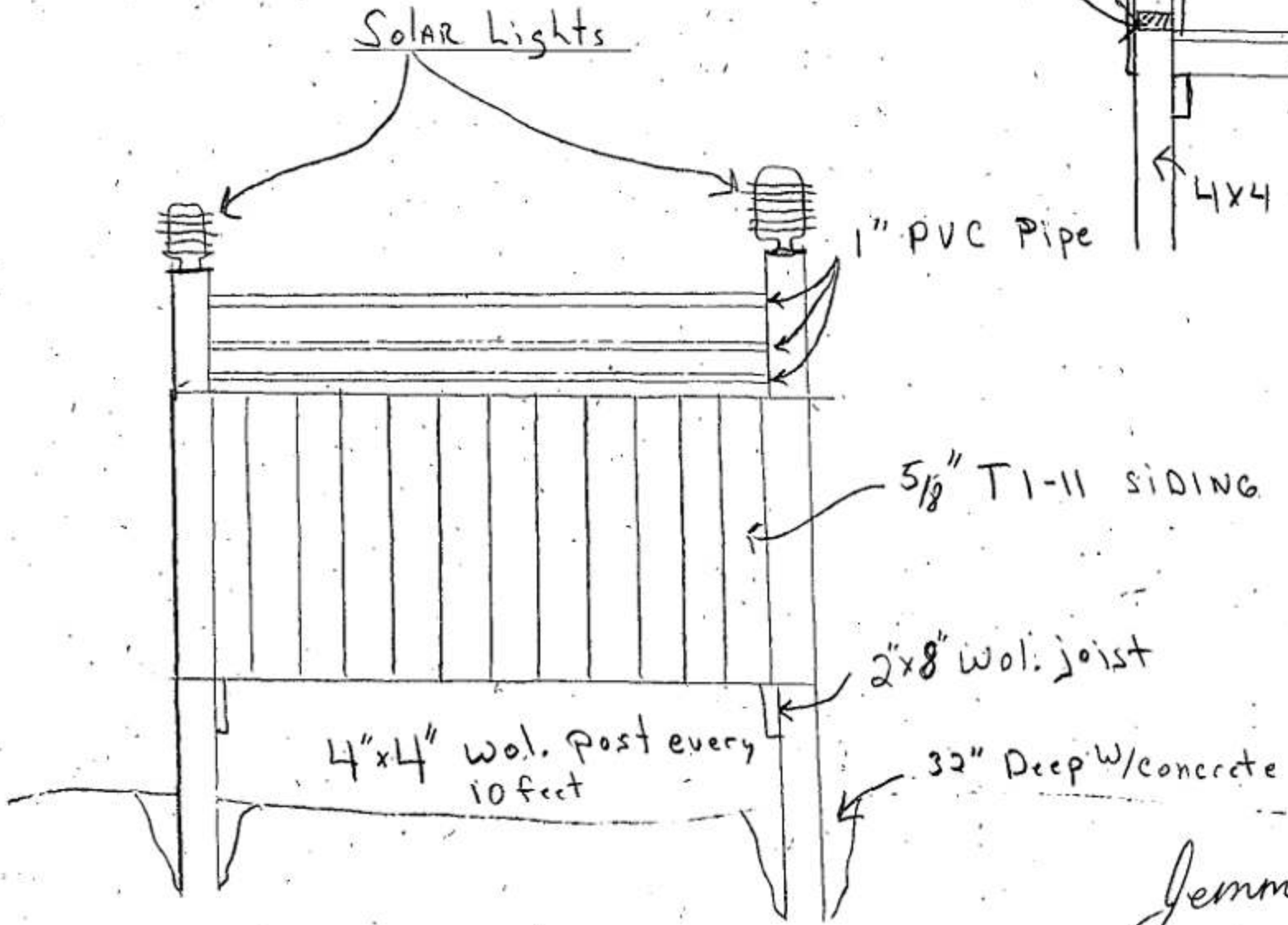
½" GreenRock in bathroom



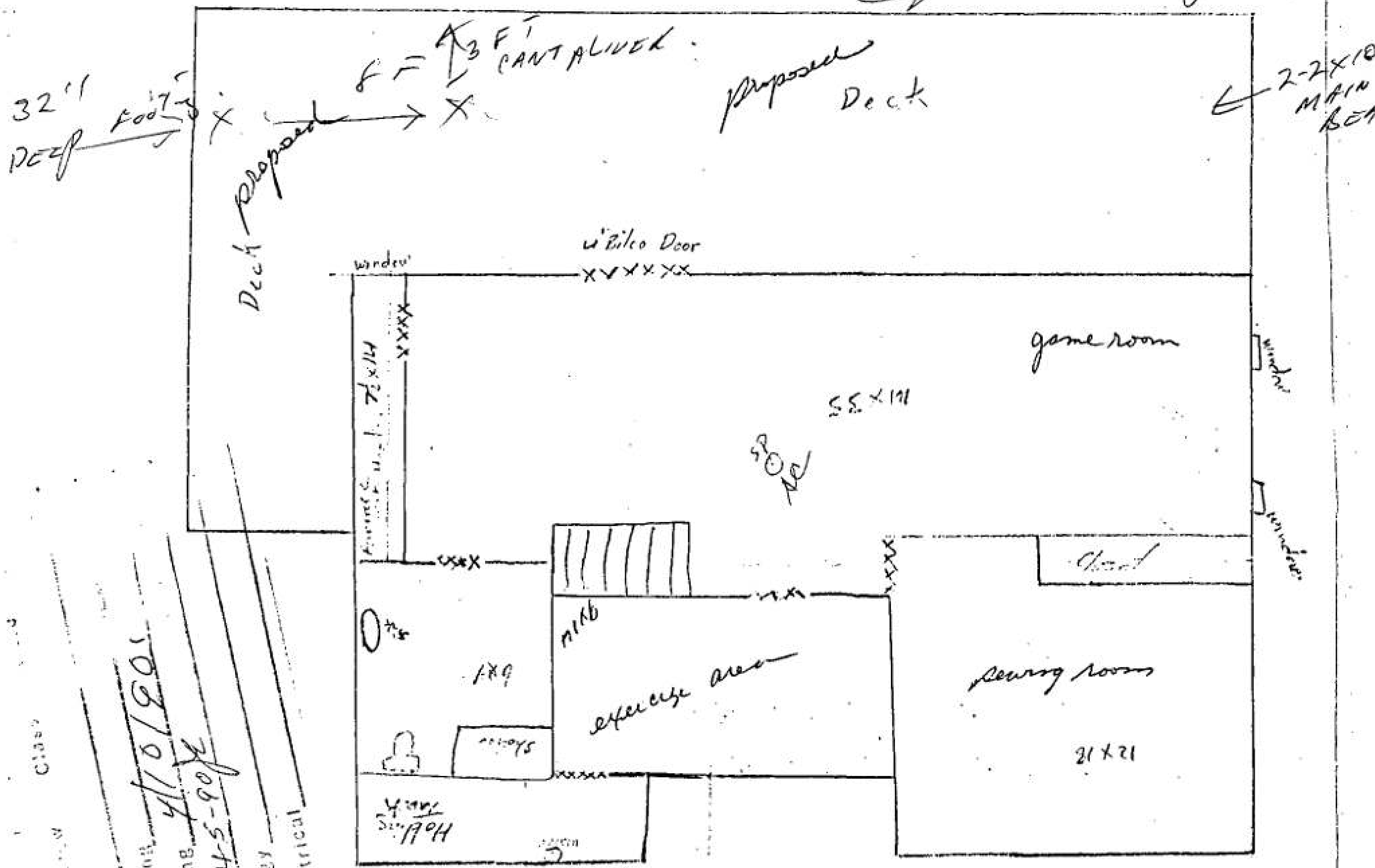
Jemma Fargue

4x4 Wolmized post
5/4x6" " Bullnose Deckings
2x4 " Railings
2x8 " Joist
5/8" T1-11 pine or FIR sidings





Jemma Fuzes


32" DEEP FOOTING
8 FT
3 FT CANTALIVER
proposed Deck
Deck proposed
2-2x10 MAIN BEAM
w/Bilco Door
window
game room
window
window
Closet
exercise area
sewing rooms
21 x 21

TOWNSHIP OF BRICK

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

Division of Inspections

A.J. Cierzo,
Construction Official

(201) 477-3000, ext. 262

CHECK LIST

RE: Block 1151.08 Lot 6 Address 289 LENOX ST.

Please be advised that your application for a construction permit for the subject property has beenrejected due to deficiencies in the following areas:

Administrative _____

Zoning _____

Engineering _____

Building PLEASE FURNISH COMPLETE DETAILED DRAWINGS

Plumbing _____

Electric _____

Fire _____

See attached review check list(s) for details as to the reason your submission has been rejected. Please revise your application accordingly and resubmit to this office.

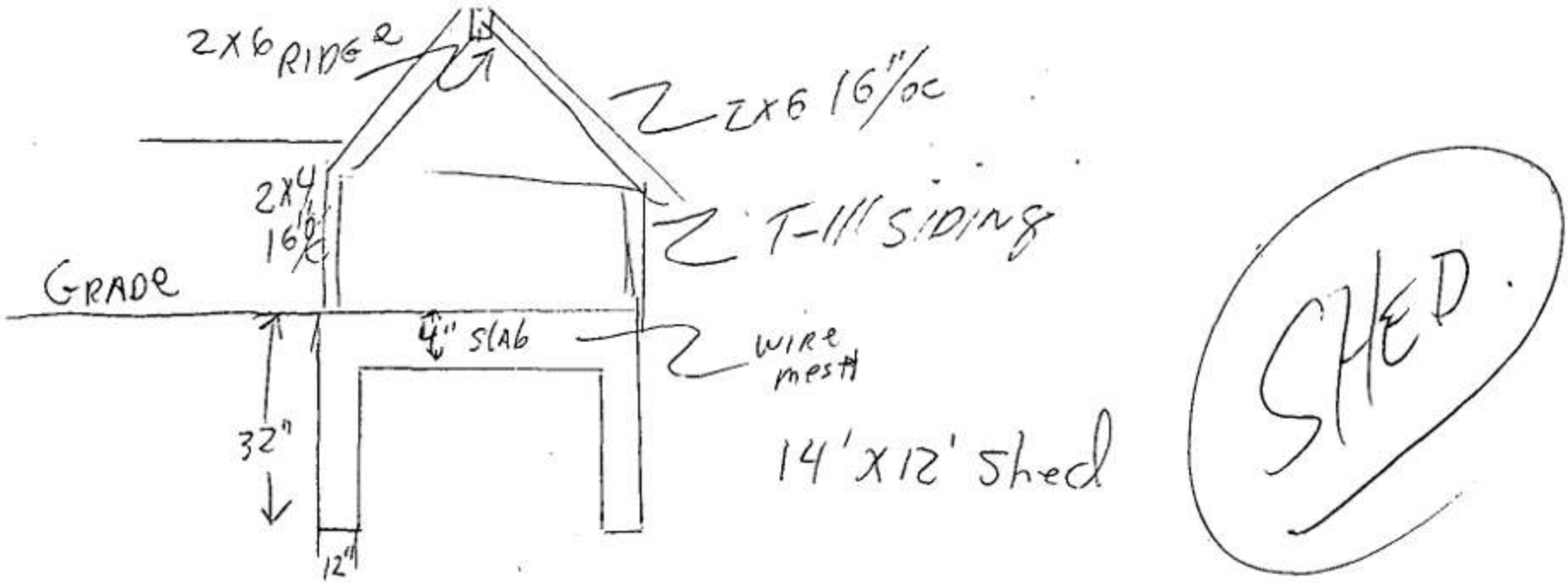
There is a 20 working day time limit for review of all documents submitted with a construction permit application. This time limit ceases in the event of a rejection of any type, and starts over again when the rejection(s) have been corrected and the application resubmitted.

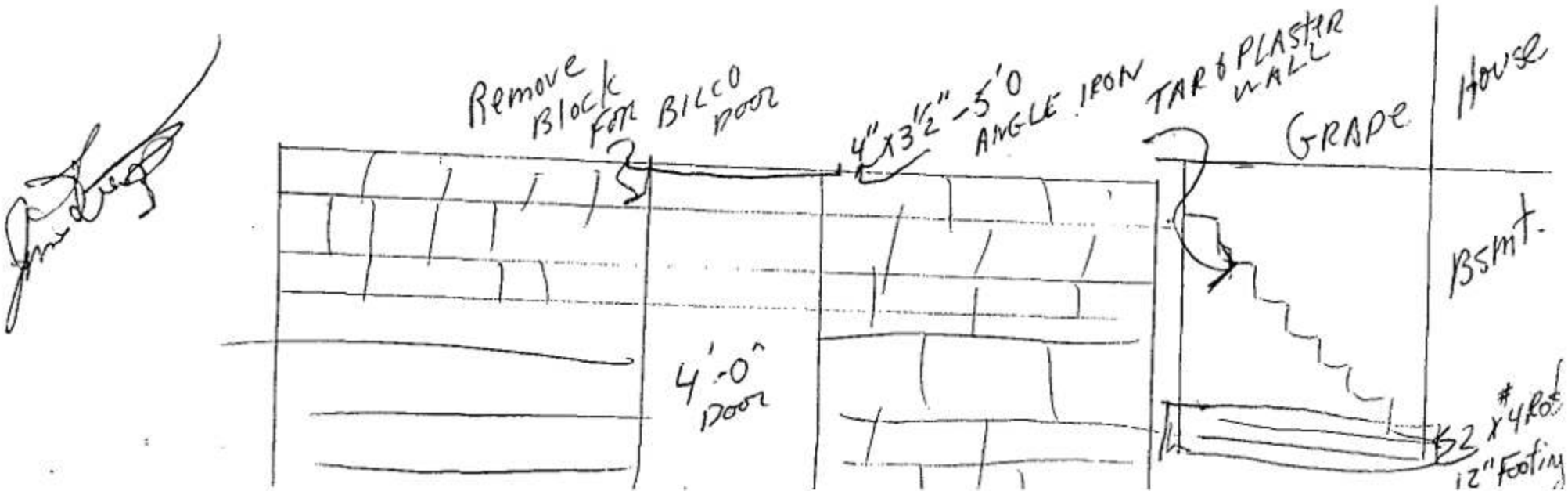
NEED PERMIT
DEC/C

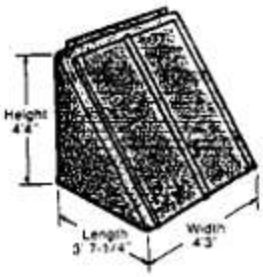
DECK NO ABOVE GRADE
AT ZONING 4/18/91

Arthur J. Cierzo,
Construction Official

Date _____

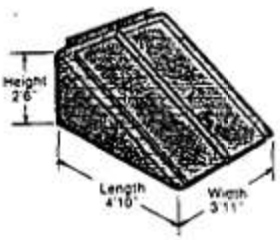

2X6 RIDGE
2 2X6 16" oc
2X4 16" oc
2 T-111 SIDING
GRADE
4" SLAB
2 WIRE MESH
32"
12"
14'X12' Shed
SHED


Remove Block FOR BILCO DOOR
4"X3½"-5'0 ANGLE IRON
TAR & PLASTER WALL
GRADE
House
Bsmt.
4'-0" DOOR
#4 Rod
12" Footing



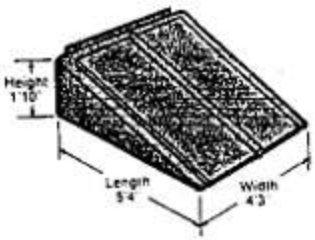
Size SL

Door Weight: 200 lbs.
Stair Stringers: 22 lbs.



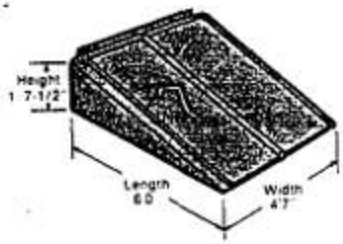
Size 0

Door Weight: 168 lbs.
Stair Stringers: 33 lbs.



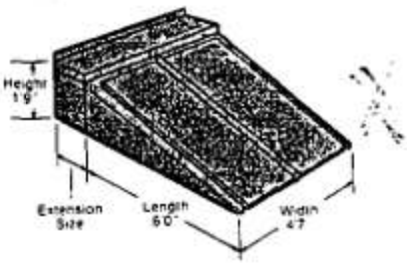
Size B

Door Weight: 175 lbs.
Stair Stringers: 39 lbs.



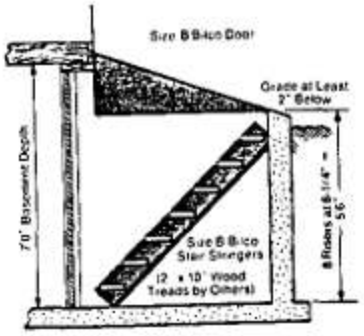
Size C

Door Weight: 196 lbs.
Stair Stringers: 44 lbs.

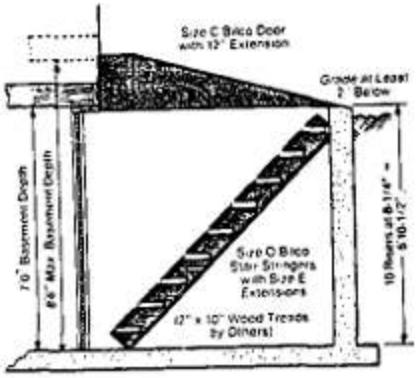


Size C with Extension

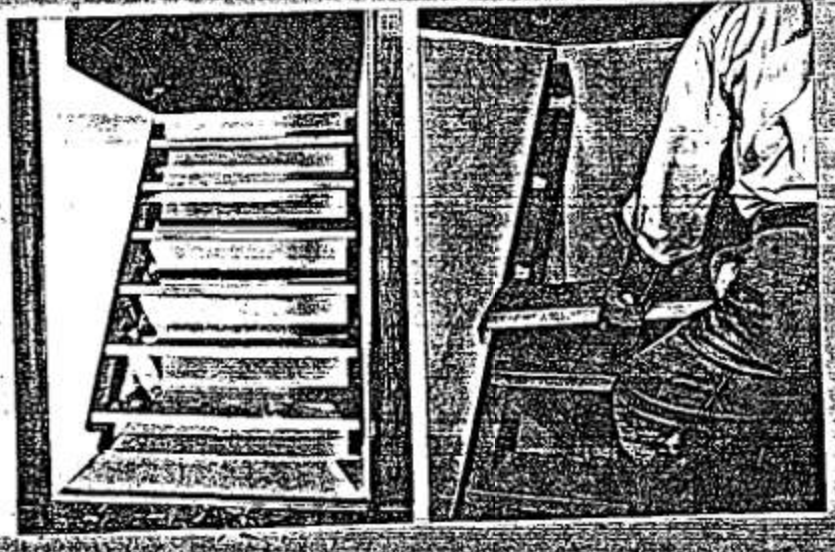
Extension Weights: 6" 27 lbs.,
12" 44 lbs., 18" 60 lbs., 24" 76 lbs.
Size E Stringer Extensions: 18 lbs.



Typical Installation Using Standard Door and Stair Stringers



Typical Installation Using Door and Stair Stringer Extensions



Bilco Stair Stringers for a better stairway

The ideal basement entranceway stairs are built with Bilco Stair Stringers. They are economical, eliminate the need for concrete steps, and can be installed in minutes. Constructed of heavy 14-gauge galvanized steel, they will give you the same lasting service as your Bilco Door.

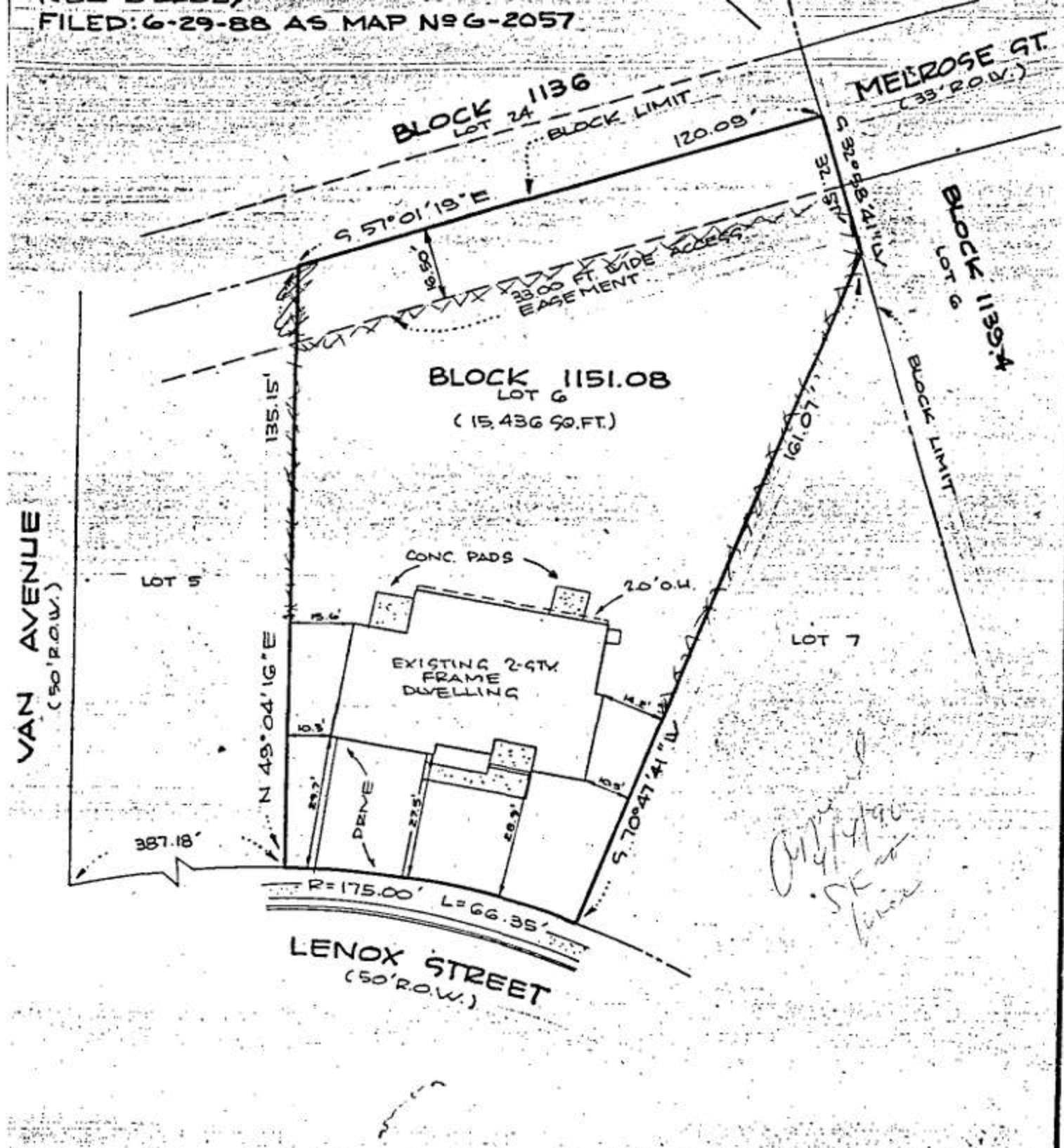
Stringer sizes are available for all Bilco Doors, and the Type E Stringer Extension butts to any stringer size, adding three treads. (Refer to the data tables to find the correct stringer size for any installation.)

Installation is fast and easy. Simply nail the stringers to the areaway sidewalls, using the masonry nails supplied. Cut the wooden treads to the required length from standard 2" x 10" lumber (available from your lumber dealer), slip them into the slots in the stringers, and anchor them in position with the nails provided.

Treads are easily removed . . .

Bilco Stair Stringers make it easy to move bulky items — a new furnace or freezer, ping-pong table, or piano — into your basement. Simply remove the treads, and the areaway is free and clear. Lower the item into the areaway, slide it into your basement, and replace the treads.

FILED: 6-29-88 AS MAP Nº G-2057



NOTE:
NO PROP. CORNERS REQUESTED BY OWNER AT THIS TIME.

JOB NO. 124

CERTIFIED TO

KEITH FURGUS AND JEMMA FURGUS HUSBAND / WIFE

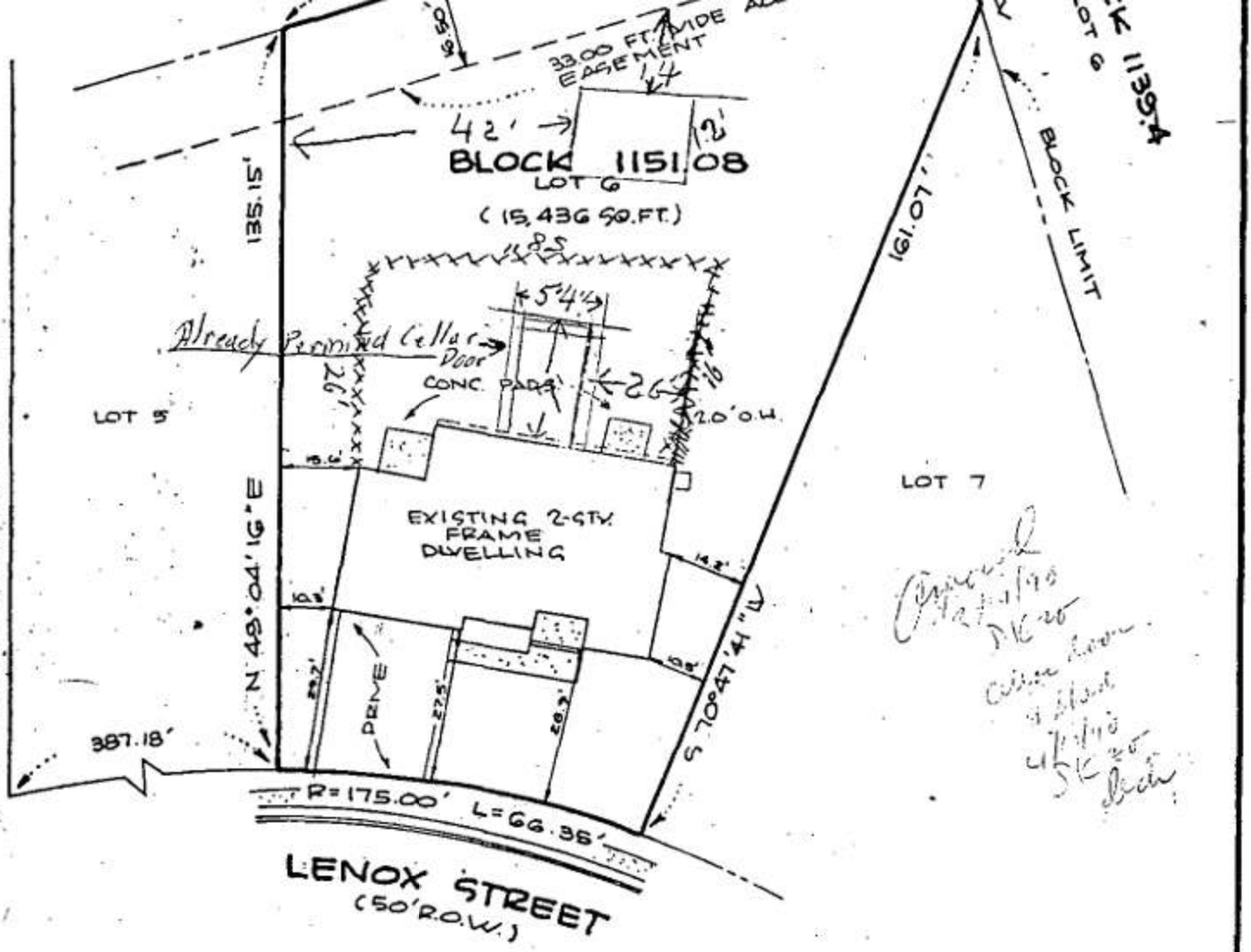
CITICORP MORTGAGE, INC. ITS SUCCESSORS AND/OR ASSIGNS

COMMONWEALTH LAND TITLE COMPANY

CHARLES W. THOMAS PLS., P.P. PLS LIC. # 27495 P.P. LIC. # 03188

The School DePalma & Canger Group Inc.

McSWEENEY & DREWES



NOTE:
NO PROP. CORNERS REQUESTED
BY OWNER AT THIS TIME.

JOB NO. 124

CERTIFIED TO

KEITH FURGUS AND JEMMA FURGUS
HUSBAND / WIFE

CITICORP MORTGAGE, INC. ITS
SUCCESSORS AND/OR ASSIGNS

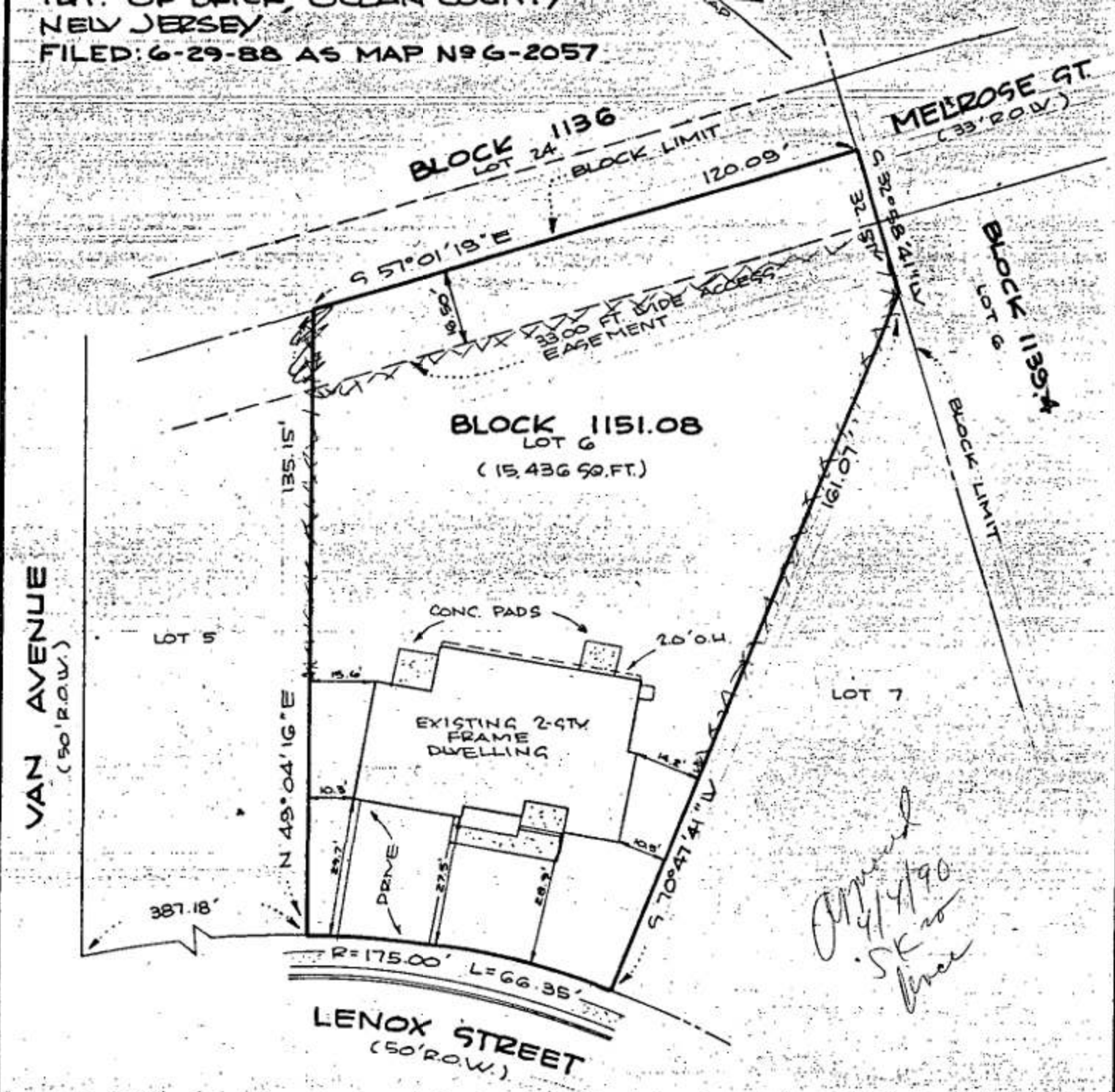
COMMONWEALTH LAND TITLE
COMPANY

CHARLES W. THOMAS PLS., P.P. PLS LIC # 27495 P.P. LIC. # 03188

The Schoor DePalma & Canger Group Inc
McSWEENEY & DREWES
Consulting and Municipal Engineers
201/840-1700

DATE REVISIONS ORDER NO

TWP. OF BARNEGAT, OCEAN COUNTY
NEW JERSEY
FILED: 6-29-88 AS MAP Nº G-2057



Amended 4/14/90 SK

NOTE:
NO PROP. CORNERS REQUESTED BY OWNER AT THIS TIME.

JOB NO. 124

CERTIFIED TO

KEITH FURGUS AND JEMMA FURGUS HUSBAND / WIFE

CITICORP MORTGAGE, INC. ITS SUCCESSORS AND/OR ASSIGNS

COMMONWEALTH LAND TITLE COMPANY

CHARLES W. THOMAS, PLS., P.P. PLS LIC # 27495 P.P LIC # 03188

The Schoor DePalma & Canger Group Inc.
McSWEENEY & DREWES

Lot 6

Owner; Keith Furgus

Agent; SAME

Address; 289 Lenox Street
Brick, NJ 08723

Address; SAME

Work site; Same

Date of Issue; 3/28/90 Compliance Date; 4/11/90 Inspection Date;

TAKE NOTICE that you have been found to be in violation of the State Uniform Construction Code Act and regulations promulgated thereunder (N.J.A.C. 5:23-2.30 and 2.31) in that:

NO PERMIT FOR FENCE

Chapter: 5:23-2-5 Construction Permits:

(a) Rules concerning when a permit is required:

1. It shall be unlawful to construct, enlarge, alter or demolish a structure; or change the occupancy of a building or structure requiring greater strength, exit way or sanitary provisions; or to change to different use group; or to install or alter any equipment for which provision is made or the installation of which is regulated by the regulations, without first filing an application with the construction official in writing and obtaining the required permit therefor.

You are hereby ordered to terminate the said violations on or before 3/28/90. The owner and agent/contractor bear joint responsibility for bringing about compliance. No Certificate of Occupancy or Approval will be issued unless the said violations are corrected.

xx Failure to comply with this Order will subject you to a penalty of $500.00 per day

____ You are hereby ordered to pay a penalty in the amount of $ for each violation for a total penalty of $_____. Each day that any said violations remain outstanding after shall result in an additional penalty of $ per

If you wish to contest the validity of the above action, in accord with N.J.A.C. 5:23-2.35 et. seq., you may request a hearing before the Construction Board of Appeals of the County of Ocean of Toms River, N.J. 08753, within 20 business days of receipt of these Orders. The application to the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your address and name, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of the relief sought by you. You may also append any documents that you consider useful.
The fee for an appeal is $50.00 to be forwarded with your application to the Board of Appeals office at Ocean County Construction Board of Appeals, Toms River, N.J. 08753

If you have any questions concerning this matter, please call the inspector who conducted the inspection at 201-477-3000 Ext. 265.

Notice of violation and order to Terminate: _____ S.C.O

Notice and Order of Penalty: Arthur J. Kurzo C.O.

Inspection made by: William Sutton, Building Inspector (If applicable).