



CONSTRUCTION PERMIT APPLICATION

Page 1

I. IDENTIFICATION

1. Proposed Work at: Cable Street, Ready, D.C. Block M-23 Lot 35-38
2. Owner Name: FRANK SACHS JR. & SONS, INC.
Address: 61 WHITE HOUSE PARK AVE. N.Y. 20001
3. Principal Contractor: FRANK SACHS JR. Tel. 1 646 1 267
Address: SAME
Lic. No. or Builder Reg. No. 17193 Federal Emp. No. 22-2481124
4. Architect or Engineer: DAVID R. TEMPOS, P.E. Tel. 212 773-7973
Address: 151 So. MAIN STREET, NAPERVILLE, ILL. 60530
5. Responsible Person in Charge of Work: FRANK SACHS JR. Tel. 646 267-1134

II. PROPOSED WORK

A. TYPE OF WORK	B. CATEGORIES OF WORK	D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?
1. ☐ Minor Work (Single Trade)	Permit/Category Estimated	1. ☐ Elevators/Dumbwaiters
2. ☐ Small Job (55,000 and no Prior Approvals) Complete only II.B., III and IV.A. and Page 2	1. ☒ Building/Structural \$	2. ☐ High-Pressure Boilers
3. ☒ New Building	2. ☒ Plumbing	3. ☐ Refrigeration Systems
4. ☐ Addition	3. ☒ Electrical	4. ☐ Pressure Vessels
5. ☐ Alteration	4. ☒ Fire Protection	5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Repair, Replacement	5. ☐ Other	6. ☐ Cross-connections/Backflow Preventors
7. ☐ Demolition	6. ☐ Other	7. ☐ Sprinklers
8. ☐ Other:	TOTAL COST \$	8. ☐ Smoke Control Systems in Open Wells
	C. DO YOU WANT:	
	1. ☐ Partial Release 2. ☐ Prototype Processing	

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL	B. NON-RESIDENTIAL
1. ☐ Hotels (R-1)	5. ☐ Theatres with Stage (A-1-A)
2. ☐ Multi-Family (R-2) HMD Reg. No.:	6. ☐ Movie Theatres (A-1-B)
3. ☐ Two Family (R-3b)	7. ☐ Night Clubs (A-2)
4. ☒ One-Family (R-3a)	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, Infirmarys (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

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

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP	B. HEATING FUEL	C. TYPE OF SEWAGE DISPOSAL	D. TYPE OF WATER SUPPLY	E. BUILDING CHARACTERISTICS
1. ☒ Private (Individual, Corp., Non-profit Inst., Etc.)	Principal Secondary Type	10. ☒ Public or Private Company	12. ☒ Public or Private Company	14. No. of Stories <u>1</u>
2. ☐ Public (State, County or Local Govt.)	3. ☒ Oil	11. ☐ Private (Septic Tank, Etc.)	13. ☐ Private (Well, Etc.)	15. Height of Structure <u>15</u> Ft.
	4. ☐ Electric			16. Area-Largest Floor <u>1300</u> Sq. Ft.
	5. ☐ Solid (Wood, Coal, Etc.)			17. Bldg. Area - All Fls. <u>1300</u> Sq. Ft.
	6. ☐ Propane			18. Volume of Structure <u>1200</u> Cu. Ft.
	7. ☐ Solar			19. Total Land Area Disturbed <u>1200</u> Sq. Ft.
	8. ☐ Other			
	9. ☐ Other			

BLOCK NO. M-23

LOT NO. 35-38

SUBDIVISION 4th Cable Ave PERMIT NO. BUD 81-87

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 _____

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 Frank S. Schuch TEL. (609) 262-1138

ADDRESS 61 White Horse Pike

Attn: Mr. Schuch

SIGNATURE Frank S. Schuch



STATE OF NEW JERSEY
DEPARTMENT OF COMMUNITY AFFAIRS
MUNICIPALITY Beachwood



CERTIFICATE

ERTY. NO. BL 081-87
Block M-23 Lot 35/38
Subdivision

IDENTIFICATION

Owner FRANK Seelo Agent SAME
Address 61 W.H.P. Address
AYCO NJ 08004
Tel. () Tel. ()
Work Site Address 408 CABLE AVE Lic. No. 17193
BEACHWOOD NJ Federal Emp. No.

PAYMENTS

Remitted \$ 20-
Check No. 1802
Cash
Other
Received By WCH

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:

MODULAR HOUSE

USE GROUP R 3A FIRE GRADING _____

MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE SINGLE FAMILY DWELLING

FINAL COST OF CONSTRUCTION: \$ 56,000- William C. [Signature]
CONSTRUCTION OFFICIAL



NOTICE OF PERMIT UPDATE

PERMIT NO. BW 081-87
DATE ISSUED 3-13-87
Block M 23 Lot 33/38
Subdivision _____

IDENTIFICATION

Owner FRANK Scelso JR Agent SAME
Address CI W.H.P. Address _____
AYCO NJ 08004
Tel. [REDACTED] Tel. () _____
Work Site Address 408 CABLE AVE Lic. No. 17193
BRACKENCP, N.J. Federal Emp. No. 22-2491186

PAYMENTS

Permit Fee \$ 249
Fees Remitted \$ 249
☒ Check No. 1802
☐ Cash
☐ Other _____
Collected By: W.C.P.
Date: 3-13-87

is hereby granted permission
to perform the following work:

- ☒ BUILDING ☒ ELECTRICAL
☒ PLUMBING ☐ FIRE PROTECTION
☐ OTHER _____

Description of work:

MODULAR
HOME
26'x50'

Estimated Cost of Work: \$ 56,000

William C. Papp
CONSTRUCTION OFFICIAL

**UE BUILDING
SUBCODE
TECHNICAL SECTION**



PERMIT NO. BL 081-87
DATE ISSUED 3-13-87
REVISION DATE 3-13-87
Block 11-27 Lot 35-34
Subdivision _____

A. IDENTIFICATION

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

Owner Frank J. Jones Contractor Frank J. Jones
Address 1711 1st St. N.E. Address 1711 1st St. N.E.
Tel. 1405-1111 Tel. 727-1111
Work Site Address 1711 1st St. N.E. Lic. No. 1711
Federal Emp. No. 2-249116

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.

1711 1st St. N.E.
2620

TYPE OF WORK:

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

Fee Book	Fee
<u>9100</u>	<u>106</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
SUBTOTAL	\$ _____
Minimum Building Fee (if applicable)	\$ _____
Total Building Fee (Greater of Minimum or Subtotal)	\$ <u>106</u>

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 1 Total Building Area--All Floors 1100 Sq. Ft.
Height of Structure 10 Ft. Volume of Structure _____ Cu. Ft.
Area--Largest Floor 1100 Sq. Ft. Total Land Area Disturbed 1100 Sq. Ft.
Estimated Cost of Building Work: \$ 106,000

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

DATE _____

6/16/57

JOB CONDITION/COMMENTS

Fire Grading

Maximum Live Load

Maximum Occupancy Load

PLAN REVIEW

Date	Initials
------	----------

- ☐ No Plans Required
☐ All
☐ Footing/Foundation
☐ Frame
☐ Architectural
☐ Other _____

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: 6/16/87

Inspected By: _____

INSPECTIONS

Type

Failure Dates

Approval Date

- ☒ Footing/Foundation
☐ Slab
☐ Frame
☐ Architectural
☐ Insulation
☐ Finishes
☐ Energy
☐ Mechanical
☐ TCO
☐ Other _____

5/19/97



PERMIT NO. BW081-87
DATE ISSUED _____
REVISION DATE _____
Block 11-73 Lot 3-2-8
Subdivision BW081-87

A. IDENTIFICATION

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

Owner Mr. A. J. ... Contractor Mr. J. ...
Address ... Address ...
Tel. ... Tel. ...
Work Site Address ... Lic. No./Bus. Permit 445
Federal Emp. No. 12-2311022

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 has been authorized by the owner to make this application as his agent.
...
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data
TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee	Fee
	Switching Outlets	\$		H V A C Equipment	\$	COLUMN 1 \$ <u>14</u>
	Lighting Outlets			Switching Devices		COLUMN 2
	Receptacle Outlets			Transformers		SUBTOTAL \$
	Range/Oven			Motors/Generators/Compressors		Minimum Electrical Fee (If applicable) \$
<u>1</u>	Dryer, Electric	<u>4</u>		(State no. and size of each)		Total Electrical Fee (Greater of Minimum or Subtotal) \$ <u>14</u>
	Water Heater, Electric			Other		
	Heating, Electric			Other		
<u>1</u>	Switches			Other		
<u>3</u>	Lighting Fixtures			Other		
	Receptacles			Other		
	Bonnet, Pool/Vault			Other		
<u>1</u>	Service/Feeders					
COLUMN 1 \$ <u>44</u>			COLUMN 2 \$			

C. ELECTRICAL CHARACTERISTICS

USE GROUP: Present _____ Proposed _____
Service _____ Amps _____ Phase _____ System _____
Wire _____ Volts _____ Wiring Method _____
Total No. of Meters _____
Estimated Cost of Electrical Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION - ELECTRICAL

DATE

JOB CONDITION/COMMENTS

6/20/91 To GF1 Reactor, Percent
in Back to motor PSC
7/7/91 Service BT 629 BG
7/29/91 Fm

JOB SUMMARY

- ☐ No Plans Required
☐ Plan Review Approved

Date

Approved By

INSPECTIONS FINAL

- ☐ CO ☐ CCO ☐ CA

Date

Inspected By

INSPECTIONS

Type	Failure Dates	Approval Date
☐ Rough		
☐ Energy		
☐ Mechanical		
☐ TCO		
☐ Other		

CUT-IN

	Date Issued	Expiration Date
Temporary Cut-in Card		
Temporary Cut-in Card		
Final Cut-in Card		



STATE OF NEW JERSEY
DEPARTMENT OF COMMUNITY AFFAIRS
MUNICIPALITY _____



PLUMBING SUBCODE TECHNICAL SECTION



PERMIT NO. B.W. 081-87
DATE ISSUED 3-13-87
REVISION DATE _____
Block 22-3-5 Lot 2-1-78
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

Owner _____	Contractor <u>PLUMBING</u>
Address _____	Address <u>116 E. 1st St.</u>
Tel. () _____	Tel. () _____
Work Site Address _____	Lic. No./Bus. Permit _____
	Federal Emp. No. _____

When changing contractors, notify this office.

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.

[Signature]
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures Hot/Cold Water

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
_____	Water Closet/Bidet/Urinal	\$ _____	_____	Garbage Disposal	\$ _____	COLUMN 1 \$ <u>5.00</u>
_____	Bathtub	_____	_____	Air Conditioner Unit	_____	COLUMN 2 \$ _____
_____	Lavatory/Sink	_____	_____	Indirect Connection	_____	SUBTOTAL \$ _____
_____	Shower/Floor Drain	_____	_____	Sewer Ejector	_____	Minimum Plumbing Fee (If applicable) \$ _____
_____	Washing Machine	<u>4</u>	_____	Grease Trap	_____	Total Plumbing Fee (Greater of Minimum or Subtotal) \$ <u>5.00</u>
_____	Dishwasher	_____	_____	Interceptor	_____	
_____	Commercial Dishwasher	_____	_____	Backflow Device	_____	
_____	Water Heater	_____	_____	Reduced Pressure	_____	
_____	Domestic Boiler/Furnace	_____	_____	Backflow Device	_____	
_____	Steam Boiler	_____	_____	Vent Stack	_____	
_____	Water Util. Connection	<u>25</u>	_____	Solar System	_____	
_____	Sewer Util. Connection	<u>25</u>	_____	Other _____	_____	
_____	Hose Bibb	<u>4</u>	_____	Other _____	_____	
_____	Water Cooler	_____	_____	Other _____	_____	
COLUMN 1 \$ <u>58</u>			COLUMN 2 \$ _____			

C. PLUMBING CHARACTERISTICS

USE GROUP _____ Present _____ Proposed _____

Drainage - Material _____	Size _____
Building Sewer - Material _____	Size _____
Water Service - Material _____	Size _____
Venting - Material _____	Size _____

Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION - PLUMBING

DATE

JOB CONDITION/COMMENTS

7-13-87 Work in basement O.K. W.J.M.

JOB SUMMARY

- ☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

- ☐ CO ☐ CCO ☐ CA

Date: 7-13-87

Inspected By: W.J.M.

INSPECTIONS

Type	Failure Dates	Approval Date
☐ Slab		
☐ Rough		
☐ Water	W.J.M.	7-13-87
☒ Sewer	W.J.M.	6-30-87
☐ Energy		
☐ Mechanical		
☐ TCO		
☐ Other		

5/4/84

DEPARTMENT OF COMMUNITY AFFAIRS
Bureau of Construction Code Enforcement
Pursuant to N.J.A.C. 5:23-4.20 Department fees

Permit No. _____
Municipality Breckwood
Date _____

1) NEW STRUCTURE FEES

- USE GROUPS
- A. B, H, I-1, I-3, M, R-1, R-2, R-3, R-4, U Volume 9100 x .0116 =
of bldg. (cubic ft.)
- B. A-1, A-2, A-3, A-4, A-5, E, F-1, F-2, S-1, S-2 Volume _____ x .0063 =
of bldg. (cubic ft.)
- C. Farm Use Bldgs. Exclusively used for food, sheltering of livestock (Maximum fee for structures not to exceed \$500) Volume _____ x .003 =
of bldg. (cubic ft.)

106

2) PLUMBING FEES

- A. Total number of fixtures and stacks 2 x \$4.00 =
include but not limited to all sinks, urinals, water closets, bathtubs, shower stalls, laundry tubs, floor drains, drinking fountains, dishwashers, garbage disposals, clothes washers, hot water heaters or similar devices (each)
- B. Total number of special devices 2 x \$25.00 =
grease traps, oil separators, watercooled air conditioning units, pumps, utility service connections, (each)

8

50

3) ELECTRICAL FEES

- A. Total number of electrical fixtures and devices 1 through 50 = \$20.00
Lighting outlets, wall switches, fluorescent fixtures convenience receptacles or similar fixtures and motors or devices less than 1-H.P. or 1-Rw. Including smoke detectors.
- B. Twenty-five (25) additional fixtures and devices and motors of less than one horsepower or one Kw. Twenty-five (25) = \$3.00
- C. Each service panel of 100 Amp or less _____ x \$10.00 =
Service conductors, feeders, switches, switchboards and panel boards (each)
- D. Service panels in excess of 100 Amps _____ x \$ 5.00 =
Fee to be increased \$5.00 per 100 Amp increment in excess of 100 Amps (each)
- E. Each motor or electric device 1 x \$ 4.00 =
of more than 1 H.P. or 1-Rw. Motors, control equipment, generators, transformers and all heating, cooking or other devices consuming or generating electrical current

20

10

10

4

4) MECHANICAL SYSTEMS AND EQUIPMENT FEES

Fee is 10% of new structure fee 106 x 0.10 =

11

5) ELEVATOR FEES

Multiply number of elevators _____ x \$150.00 =
For elevators, escalators and moving walks requiring reinspection every 6 months, the fee shall be \$37.50 except for each 5 yr. inspection and witnessing of tests on elevators, for which the fee shall be \$125.00.

SUBTOTAL

219

SUBTOTAL

219

SPRINKLER FEES

Based upon number of sprinkler heads being installed

1-20 heads = \$25.	201-400 heads = \$250.
21-100 heads = \$50.	401-1000 heads = \$350.
101-200 heads = \$100.	Over 1,000 heads = \$450.

STANDPIPE FEES

Multiply number of standpipes _____ x \$100.00 =

SIGN FEES

Square foot surface area of sign _____ x \$0.50 =
Compute only one side for double faced sign.
Minimum fee shall be \$20.00

RENOVATIONS, ALTERATIONS, REPAIR, AND MINOR WORK FEES

- A. Estimated cost up to and including \$50,000 = \$10. per \$1,000. =
- B. \$50,001. up to and including \$100,000. = \$8. per \$1,000. =
- C. Above \$100,000. additional fee of \$6.00 per \$1,000. =

(Applicant shall submit to Department, cost data by architect or engineer of record, a recognized estimating firm or by contractor bid. The Dept. will review the construction cost for acceptability.)

DEMOLITION FEES

- A. One and two family - less than 5,000 sq. ft. and less than 30 ft. in height, and structures on farms used exclusively for storage of grain, or sheltering of livestock, the fee shall be \$25.00
- B. All other use groups, the fee shall be \$50.00
- C. The fee for removal of one building from one lot to another, or to another location on the same lot, the fee shall be \$5.00 per \$1,000 of the estimated cost of new foundation and all work necessary to place the building in its completed condition in the new location.

CERTIFICATE OF OCCUPANCY FEES

- A. Fee shall be in the amount of 10% of new construction permit fee. Minimum fee shall be \$50.00
- B. Exception; one and two family residences less than 5,000 sq. ft. in area and less than 30 ft. in height. Minimum fee shall be \$25.00
- C. Fee for Certificate of Occupancy granted to change of use—\$75.00
- D. Fee for Certificate of Continued Occupancy—\$50.00

TRAINING AND CERTIFICATION FEES

Volume of structure 9100 x .0006 except released plans =

NOTES In any case the minimum fee for a construction permit in part or total shall be \$20.00

Pursuant to N.J.A.C. 5:23-2.27 in the case of a discontinuance of a building project, plan review fees are NOT refundable.

FIXATION FEES

Class II buildings = \$50.00
submittal fee, Class II buildings = \$25.00
applicant must submit variation application with the above applicable fee.

25

5

249
TOTAL



CONSTRUCTION PERMIT

PERMIT NO. BW 081-87
DATE ISSUED 3-18-87
Block M-23 Lot 35/38
Subdivision _____

A. IDENTIFICATION

Owner JOHN F. OLIVERA Agent SAME
Address 701 OCEAN GATE DR Address _____
OCEAN GATE NJ
Tel. 201-261-1111 Tel. () _____
Work Site Address 405 E. ARL Lic. No. _____
BRACKLEOOD NJ Federal Emp. No. _____

PAYMENTS

Permit Fee \$ 25
Fees Remitted \$ 25
☒ Check No. 1802
☐ Cash
☐ Other _____
Collected By: WCM
Date: 3-13-80

is hereby granted permission
to perform the following work:

- ☐ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER DEMOLITION

Description of work:

DEMOLITION
INGRESS OF POOL

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: \$ _____

William C. Thompson
CONSTRUCTION OFFICIAL



NOTICE OF PERMIT UPDATE

PERMIT NO. BW 081-87
DATE ISSUED 7-17-87
Block 1923 Lot 30/35
Subdivision _____

IDENTIFICATION

Owner JOHN OLIVER Agent SAME
Address 408 CARLE AVE Address _____
BRACKWOOD N.J.
Tel. (908-255-1111) Tel. (_____)
Work Site Address SAME Lic. No. _____
Federal Emp. No. _____

PAYMENTS

Permit Fee \$ 20
Fees Remitted \$ 20
☒ Check No. 1892
☐ Cash
☐ Other _____
Collected By: WCH
Date: 7-17-87

is hereby granted permission
to perform the following work:

- ☒ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER _____

Description of work:

Deck
14' x 14'

Estimated Cost of Work: \$ 1500

William C. Papp
CONSTRUCTION OFFICIAL



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

APPLICANT — Complete unshaded areas only

When changing contractors, notify this office

Owner WES CARLIN, JR. Contractor SAUE

Address BURGESS ST. N.T. Address _____

Tel. (313) 555-5555 Tel. () _____

Work Site Address SAUE Lic. No. _____

Federal Emp. No. _____

DESCRIPTION OF WORK
Give detail description including materials used, dimensions, etc.

1. Excavate pit for foundation
2. Lay concrete foundation
3. Build brick walls
4. Install roof structure
5. Finish interior walls
6. Install floor
7. Install plumbing and electrical
8. Paint exterior walls
9. Install doors and windows
10. Final inspection

☒ See Plans

Fee Basis	Fee
\$ _____	\$ _____
[REDACTED]	[REDACTED]
_____	_____
_____	_____
[REDACTED]	[REDACTED]
_____	_____
_____	_____
SUBTOTAL	\$ <u>70 —</u>
Minimum Building Fee (if applicable)	\$ _____
Total Building Fee (Greater of Minimum or Subtotal)	\$ <u>70 —</u>

USE GROUP: _____ Present _____ Proposed _____

No. of Stories _____ Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area—Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: \$ 1500

☐ Partial Releases ☐ Prototype Processing

[illegible]

JOB SUMMARY		
PLAN REVIEW		
	Date	Initials
☐ No Plans Required	_____	_____
☐ All	_____	_____
☐ Footing/Foundation	_____	_____
☐ Frame	_____	_____
☐ Architectural	_____	_____
☐ Other _____	_____	_____
INSPECTIONS FINAL		
☐ CO	☐ CCO	☐ CA
Date _____		
Inspected By: _____		
INSPECTIONS		
Type	Failure Dates	Approval Dates
☐ Footing/Foundation		
☐ Slab		
☐ Frame		
☐ Architectural		
☐ Insulation		
☐ Finishes		
☐ Energy		
☐ Mechanical		
☐ TCO		
☐ Other <i>Final</i>	<i>7/14/81</i>	



DEPARTMENT OF COMMUNITY AFFAIRS
DIVISION OF HOUSING
BUREAU OF CONSTRUCTION CODE ENFORCEMENT
NEW HOME WARRANTY PROGRAM
CN 903

Trenton, New Jersey 08625

CERTIFICATE OF PARTICIPATION
in New Home Warranty Security Fund

PURCHASER

1 John & Anita Oliver		
NAME		
408 Cable Avenue		
STREET AND NO		
Beachwood,	NJ	08722
CITY	STATE	ZIP

NEW DWELLING UNIT LOCATION

3 408 Cable Avenue		
STREET NAME AND NUMBER		
Beachwood,	NJ	08722
CITY		ZIP
M-23	35-38	
BLOCK NUMBER	LOT NUMBER	
Borough of Beachwood	Ocean Co.	
MUNICIPALITY	COUNTY	NJ

COMMENCEMENT DATE OF WARRANTY

4	month	day	year
COMMENCEMENT DATE	9	1	87
(The date of closing or first occupancy, whichever occurs first.)			
NOTE Any change in the commencement date must be reported to the Bureau			

BUILDER

2 Frank M. Scelso Jr.		
NAME		
61 White Horse Pike		
STREET AND NO		
Atco	NJ	08004
CITY	STATE	ZIP
PHONE NUMBER (609) 767-1138		
SELLING PRICE* \$56,287.00		
Amount of Premium \$225.14		
(.4 x 1% x Selling Price)		
N J BLDR REGISTRATION # 17093		
Registered Builder's Signature		
*Any change in the selling price & premium must be reported to the Bureau along with supplemental payment if applicable		

MORTGAGEE INFORMATION

5 First Lenders Mortgage		
NAME OF MORTGAGEE		
3801 Old Marlton Pike		
STREET AND NUMBER		
Pennsauken,	NJ	
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



PLEASE REMOVE ALL CARBON PAPER BEFORE RETURNING

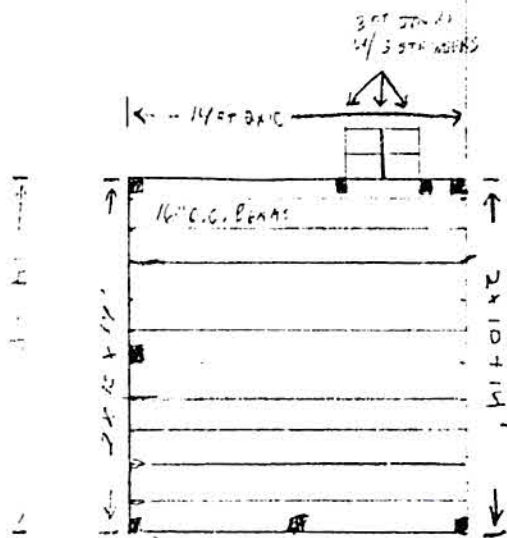
MUNICIPAL COPY

4/08 CABLE RIG 12' HIGH AND 15' WIDE 7/87

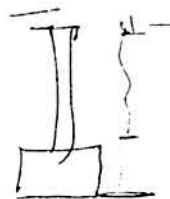
M23 35/38 BW 081-87

1/2" x 1/2" x 1/2"

20 P. N.O. CMM.
BREMING 20 P. N.O. CMM.
BREMING 20 P. N.O. CMM.



1/2" x 1/2" x 1/2"
1/2" x 1/2" x 1/2"
1/2" x 1/2" x 1/2"
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1/2" x 1/2" x 1/2"
1/2" x 1/2" x 1/2"



20 P. N.O. CMM.
6' x 6' x 6'

BOROUGH OF BEACHWOOD

315 ATLANTIC CITY BLVD.
BEACHWOOD, NEW JERSEY 08722
201 • 244-6544

For Office Use

Date: 16 JUL 87
Zoning #: R797-87
Construction #: BW 081-87 *update*
Fee: \$10 -

REQUEST FOR ZONING REVIEW

OWNER: OLIVER A. TEL #: [REDACTED]
CONTRACTOR: SELF TEL #: [REDACTED]
ADDRESS OF CONSTRUCTION: 408 CATTLE BLOCK & LOTS: M23 71/2
PROPOSED PROJECT: DECK DIMENSIONS: 14' x 16'
SET BACKS: Front _____ Rear _____ Sides _____ COVERAGE: _____
DISTANCE BETWEEN STRUCTURES: _____ ELEVATIONS: Foundation _____ Road _____
APPROVALS: Planning Board _____ Board of Adjustment _____ Other _____

I have read and am familiar with Codes and Ordinances of the Borough of Beachwood. The proposed project will not constitute nor create a non-conforming use or structure. I will not add nor delete from the requested project specifications without approval. I accept responsibility for any and all violations created by the requested project and understand such violations must be removed and/or abated as directed by the Zoning Officer.

Linda Oliver
Owner or Agent

16 JUL 87
Date

APPROVED: ☒ DISAPPROVED: ☐ REMARKS: _____

[Signature]
Zoning Officer

16 JUL 87
Date

CERTIFICATE OF ZONING COMPLIANCE

To the best of my knowledge the finished project conforms to the Codes and Ordinances of the Borough of Beachwood.

APPROVED: _____ DISAPPROVED: _____ REMARKS: _____

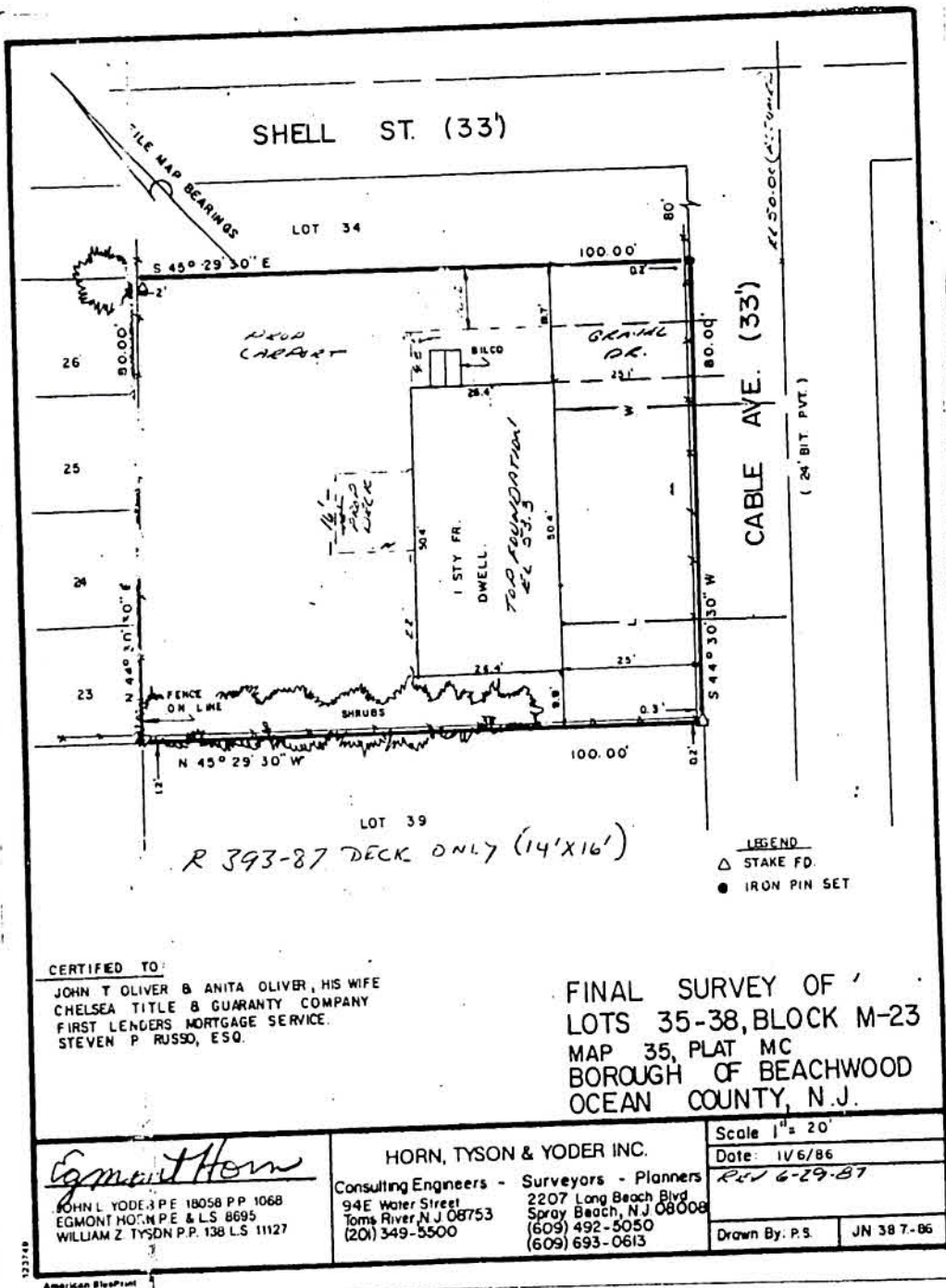
Zoning Officer

Date

NOTE: A. Disapprovals may be appealed to the Beachwood Board of Adjustment.

B. All requests shall be furnished with a Map of Survey (3 copies) showing proposed set backs, elevations, dimensions, easements and any other information requested by the Zoning Officer.

C. FOR CONSTRUCTION REQUIRING FOUNDATION AS BUILT MAPS OF SURVEY (3 COPIES) SHALL BE SUBMITTED FOLLOWING COMPLETION AND PRIOR TO THE BUILDING INSPECTOR'S APPROVAL.



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

John & Anita Oliver		
NAME		
408 Cable Avenue		
STREET AND NO		
Beachwood,	NJ	08722
CITY	STATE	ZIP

NEW DWELLING UNIT LOCATION

408 Cable Avenue		
STREET NAME AND NUMBER		
Beachwood,	NJ	08722
CITY		ZIP
M-23	35-38	
BLOCK NUMBER	LOT NUMBER	
Borough of Beachwood	Ocean Co.	
MUNICIPALITY	COUNTY	NJ

COMMENCEMENT DATE OF WARRANTY

month	day	year
9	1	87
COMMENCEMENT DATE		
(The date of closing or first occupancy, whichever occurs first.)		
NOTE: Any change in the commencement date must be reported to the Bureau		

BUILDER

Frank M. Scelso Jr.		
NAME		
61 White Horse Pike		
STREET AND NO		
Atco	NJ	08004
CITY	STATE	ZIP
PHONE NUMBER 609, 767-1138		
SELLING PRICE* \$56,287.00		
Amount of Premium \$225.14 ✓ <i>50</i>		
(1.4 x 1% x Selling Price)		
NJ BLDG REGISTRATION # 17093 07193 ✓ <i>001</i>		
Registered Builder's Signature		
*Any change in the selling price & premium must be reported to the Bureau along with supplemental payment if applicable.		

MORTGAGEE INFORMATION

First Lenders Mortgage		
NAME OF MORTGAGEE		
3801 Old Marlton Pike		
STREET AND NUMBER		
Pennsauken,	NJ	
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 46:38-1 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.

RECEIVED

AUG 5 1987

NEW HOME WARRANTY PROGRAM

Charles M. Decker

Charles M. Decker, Chief
Bureau of Construction
Code Enforcement

VALIDATION STAMP
CERTIFICATE
NUMBER
63628 AUG-6 87

PLEASE REMOVE ALL CARBON PAPER BEFORE RETURNING

Municipality copy

BOROUGH OF BEACHWOOD
315 ATLANTIC CITY BLVD.
OCEAN COUNTY
BEACHWOOD, NEW JERSEY 08722



Date: 3/13/87

To Whom It May Concern:

This is to advise that there is City Water available in Block M.23
Lots 35/38 in the Borough of Beachwood.

Very truly yours,

Gladys Trevena

Gladys Trevena
Water Collector

BOROUGH OF BEACHWOOD

315 ATLANTIC CITY BLVD.
BEACHWOOD, NEW JERSEY 08722
201 • 244-6544

For Office Use

Date: 12 MAR 87
Zoning #: R 50-17
Construction #: BW 081-87
Fee: \$10 -

REQUEST FOR ZONING REVIEW

OWNER: CLIVER, J. TEL: [REDACTED]
CONTRACTOR: SELCO HOMES TEL #: 1-609-767-1111
ADDRESS OF CONSTRUCTION: 402 CABLE BLOCK & LOTS: M23 751-8
PROPOSED PROJECT: NEW HOUSE / PORCH DIMENSIONS: [REDACTED]
SET BACKS: Front _____ Rear _____ Sides _____ COVERAGE: _____
DISTANCE BETWEEN STRUCTURES: _____ ELEVATIONS: Foundation _____ Road _____
APPROVALS: Planning Board _____ Board of Adjustment _____ Other _____

I have read and am familiar with Codes and Ordinances of the Borough of Beachwood. The proposed project will not constitute nor create a non-conforming use or structure. I will not add nor delete from the requested project specifications without approval. I accept responsibility for any and all violations created by the requested project and understand such violations must be removed and/or abated as directed by the Zoning Officer.

John T. Cliver
Owner or Agent

12 MAR 87
Date

APPROVED: ☒ DISAPPROVED: ☐ REMARKS: POOL & DECK & FENCE TO BE REMOVED PRIOR TO CONSTRUCTION

[Signature]
Zoning Officer

13 MAR 87
Date

CERTIFICATE OF ZONING COMPLIANCE

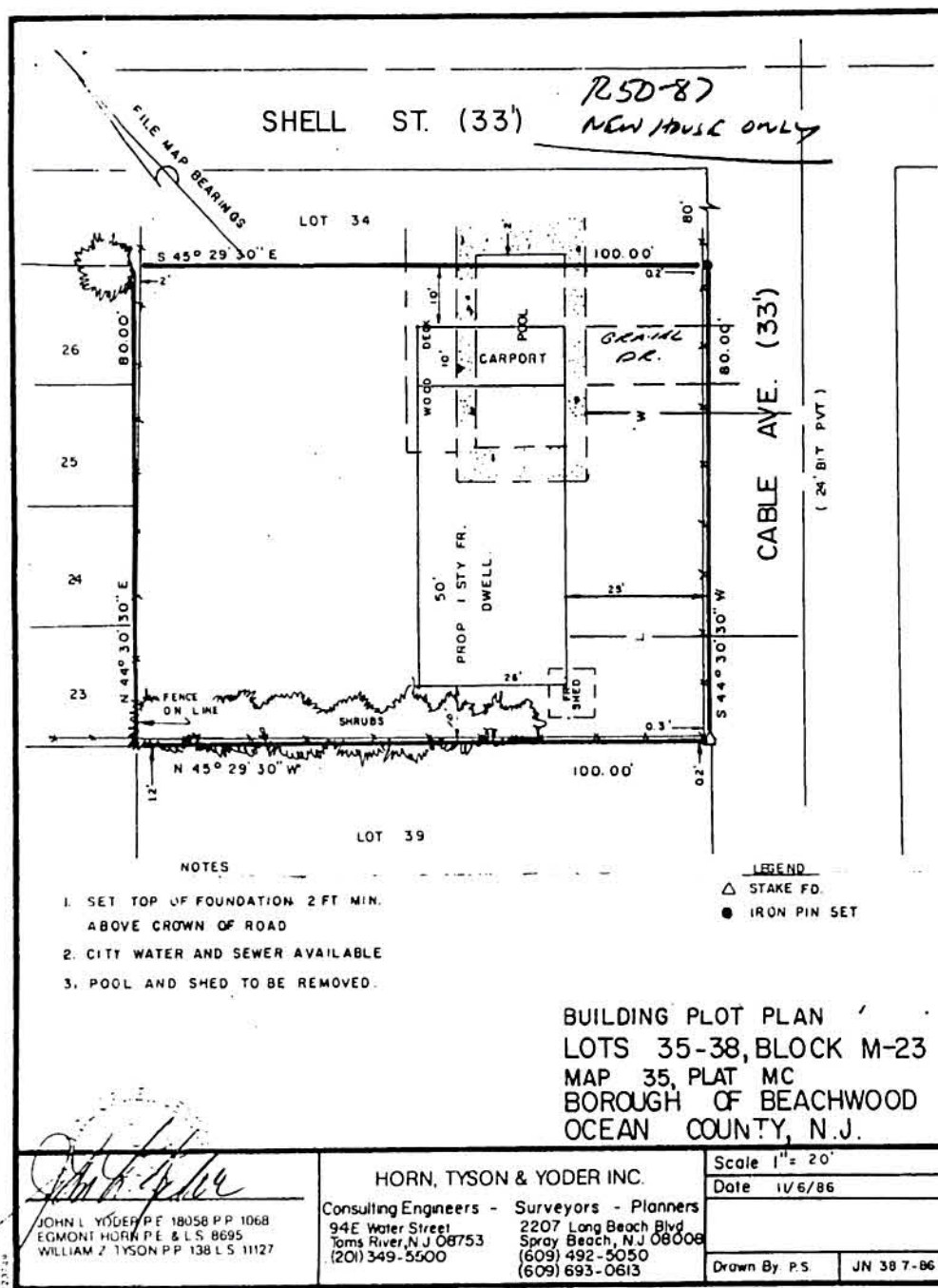
To the best of my knowledge the finished project conforms to the Codes and Ordinances of the Borough of Beachwood

APPROVED: _____ DISAPPROVED: _____ REMARKS: _____

Zoning Officer

Date

- NOTE: A Disapprovals may be appealed to the Beachwood Board of Adjustment.
B All requests shall be furnished with a Map of Survey (3 copies) showing proposed set backs, elevations, dimensions, easements and any other information requested by the Zoning Officer.
C FOR CONSTRUCTION REQUIRING FOUNDATION AS BUILT MAPS OF SURVEY (3 COPIES) SHALL BE SUBMITTED FOLLOWING COMPLETION AND PRIOR TO THE BUILDING INSPECTOR'S APPROVAL.



BEACHWOOD SEWERAGE AUTHORITY
1133 BEACH AVENUE
BEACHWOOD, NEW JERSEY 08722
240-2608

March 13, 1987

To Whom It May Concern:

Re: Block *M-23*

; Lots *24-30*

There is a main in the street, but no lateral going to this property. A lateral will have to be installed at the owners expense.

Sincerely,

Wm. J. Burko

BEACHWOOD SEWERAGE AUTHORITY

1133 BEACH AVENUE
BEACHWOOD, NEW JERSEY 08722
240-2608

March 13, 1987

To Whom It May Concern:

Re: Block *M-23* ; Lots *35-38*

There is a main in the street, but no lateral going to this property. A lateral will have to be installed at the owners expense.

Sincerely,

Mary Jean Brooks.



**ENGINEERS
PLANNERS
CONSULTANTS**

151 SOUTH MAIN STREET, NAPPANEE, IN 46350

219-773-7875

August 4, 1986

TO WHOM IT MAY CONCERN:

This is to certify that the homes manufactured by Ritz-Craft Homes of Pennsylvania that bear the NTA, Inc. and New Jersey labels have been inspected to, and the plans and specifications conform to the following Standards:

State of New Jersey Uniform Construction Code
BOCA Basic Building Code 1984
BOCA Basic Mechanical Code 1984
BOCA Basic Energy Conservation Code 1981
National Standards Plumbing Code 1983
National Electrical Code 1984

Should there be questions on the above, please do not hesitate to contact the undersigned.

Sincerely,


David R. Tompos, P.E.
Vice-President/General Manager
NTA, Inc.

DRT:sa

BLOCK 11.23 LOT 9 QUALIFICATION CODE _____

ADDRESS (SITE) 408 Cable Ave.

PERMIT NO. 94-129



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 408 Cable Ave. Beachwood NJ 08722

2. Name of Owner in Fee: Timothy J. Vender Applegate 732-153-5333
Address: 408 Cable Ave. Beachwood NJ 08722

3. Ownership in Fee: ☒ Public ☐ Private

4. Principal Contractor: Nicholas Pools Tel: 732-1505-0404
Address: 1920 Lakewood Rd. P.O. Box 9 Toms River NJ 08755
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Employee No. 222-153-5333 FAX () _____
Tel () _____

5. Architect or Engineer: _____
Address: _____

6. Responsible Person in Charge of Work: Nick Christof
Tel: 732-1505-0404 FAX: 732-1505-1593

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>100.00</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$ _____		
7. Less 20% for State Plan Review			
8. Subtotal	\$ <u>10.00</u>		
9. DCA Training Fee			
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>110.00</u>		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories	_____	ft.
2. Height of Structure	_____	sq. ft.
3. Area - Largest Floor	_____	sq. ft.
4. New Building Area	_____	cu. ft.
5. Volume of New Structure	_____	sq. ft.
6. Construction Classification	_____	sq. ft.
7. Total Land Area Disturbed	_____	ft.
8. Flood Hazard Zone	_____	
9. Base Flood Elevation	_____	
10. Wetlands	yes _____ no _____	
11. Max. Live Load	_____	
12. Max. Occupancy Load	_____	

(office use only)

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☒ Alteration	<u>12,645.-</u>								
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. B									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	<u>12,645.-</u>								

OPTIONAL (for office use only)

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

- | | |
|---|---|
| 1. ☐ Elevators/Escalators/Lifts/ Dumbwheels/Moving Walks | 5. ☐ Cross-Connections/Backflow Preventers |
| 2. ☐ High Pressure Boilers | 6. ☐ Hazardous Uses/Places of Assembly |
| 3. ☐ Pressure Vessels | 7. ☐ Sprinklers |
| 4. ☐ Refrigeration Systems | 8. ☐ Smoke Control Systems in Open Wells |
| | 9. ☐ Underground Storage Tanks |

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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: _____

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(a)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 wilfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee, and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

☒ Check if contractor.

Agent Name Nicholas Pools

Address 1820 Lakewood Rd. Rte 9

Toms River NJ 08755

Telephone (732) 595-0404

Signature James G. Pizzuto

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



CERTIFICATE

Date 5/10/99
Cont
Perm 99-027

IDENTIFICATION

Block 1123 Lot 9
Work Site Location 408 Cable Ave.
Bridgewater NJ 08722
Owner in Fee/Occupant Jennifer Applegate
Address 1128 Cable Ave.
Bridgewater NJ 08722
Tele
Contractor Nicholas Pools
Address 1870 Lakewood Rd. Rte 9
Lakewood NJ 08723
Tele (732) 505-6404 Fax (732) 505-1523
Lic. No. or Bldgs. Reg. No.
Federal Emp. No. 252-153-533

Home Warranty No.
Type of Warranty Plan: ☐ State ☐ Private
Use Group
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work/Use:

Install Inground Pool.

☐ 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.

☐ TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

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

☐ CERTIFICATE OF CLEARANCE — LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

☐ 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 _____.

Anthony Abella
CONSTRUCTION OFFICIAL

Fee \$
Paid ☐ Check No.
Collected by:



**BUILDING
SUBCODE
TECHNICAL SECTION**

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

Block 11.23 Lot 9
Work Site Location 408 Cable Ave
Beachwood NJ 08722
Owner In Fee Timothy J. Jennifer Applegate
Address 408 Cable Ave
Beachwood NJ 08722
Tele. [REDACTED]
Contractor Nicholas Patis
Address 1820 Laneship Rd Rte 9
Long River, NJ 08755
Tele. (732) 505-0404 Fax (732) 505-1543
Lic. No. or Bldrs. Reg. No. 225-153-533
Federal Emp. No. 225-153-533

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)		
				Type:	Failure	Failure	Approval	Initial
☐	No Plans Required	<u>2-24-99</u>	<u>RD</u>	Footing				
☐	All			Foundation				
☐	Footing			Slab				
☐	Foundation			Frame				
☐	Frame			Barrier-Free				
☐	Other			Insulation				
Joint Plan Review Required:				Finishes				
☐	Elec.	☐	Plumb.	Energy				
☐	Fire	☐	Elevator	Mechanical				
SUBCODE APPROVAL				TCO				
☐	CO	☐	CCO	Other				
☐	CA			Final				
Date: <u>4-30-99</u>				Barrier-Free				
Approved by: <u>RD</u>								

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ 12,645



Date Received 2-24-99
Date Issued _____
Control # 99-029
Permit # _____

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.

Signature [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALL 16 1/2 x 35 1/2 GREENAW
INGROUND POOL.
EXISTING 6' WOODEN STOCKADE
FENCE

TYPE OF WORK:

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

FEE (Office Use Only)

\$ 100.00

Administrative Surcharge

Minimum Fee \$ _____
DCA Training Fee \$ 10.00
TOTAL FEE \$ 110.00

UCC.F110
(rev. 3/96)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

THIS
Beachwood



**ELECTRICAL
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

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

Block 11.23 Lot 9
Work Site Location 408 Cable Ave.
Beachwood NJ 08722
Owner in Fee Timothy J. Senniter Applegate
Address 408 Cable Ave.
Beachwood NJ 08722
Tele. [REDACTED]
Contractor RAYVIEW ELECTRIC INC.
Address 336 MARYLAND AVENUE
BAYVILLE NJ 08721
Tele. (908) 269-9583
Lic. No. 8631
Federal Emp. No. 222-854-609/000 or Social Security No. IN 6104

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed New Pool
| | Pole/Pad # _____ | | Temporary _____ | | Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$500.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
Type	Failure	Failure	Approval	Initial	
☒ No Plans Required					
☒ Joint Plan Review Required					
Bldg Plumb					
Fire Elevator					
<u>Pool</u> <u>Pool</u>					
Date <u>3/27/24</u>					
Approved by <u>[Signature]</u>					
SUBCODE APPROVAL		Temp. Cut-in Card Date Issued		Final Cut-in Card Date Issued	
CO-1					
Date <u>3/27/24</u>					
Approved By <u>[Signature]</u>					

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application

William K. Whitman
Signature - Contractor Seal

☒ Licensed Electrical Contractor | ☐ Exempt Applicant

D. TECHNICAL SITE DATA

NO	SIZE	ITEM	FEE (Office Use Only)
I		Fixtures (1)	
I		Receptacles (2)	
		Switches (3)	
		Total 1 + 2 + 3	
		Kw Range	
		Kw Oven(s)	
		Kw Surface Unit	
		hp Dishwasher	
		hp Garbage Disposal	
		Kw Dryer	
		Kw A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
		hp Whirlpool/spa	
		Pool Bonding	
		Pool Filter Motor	
		Pool Lights	
		Kw Water Heater(s)	
		Kw Central heat	
		oil, gas or elec.	
		Kw Baseboard Heat Units	
		Thermostats	
		hp Heat Pump	
		hp Pump(s)	
		Amp Motor Control Center/Sub Panels	
		Signs	
		Light Standards	
		hp Motors—Fractional HP	
		hp Motors—All Others	
		Kw Transformers	
		Kw Generators	
		Amp Service Entrance	
		Other	

Paid (✓) Check # 4174 Administrative Surcharge \$ _____
Minimum Fee \$ _____
UCA Training Fee \$ _____
Collected by PC TOTAL FEE \$ 4174

UCC Form 1205

1. AMP - Inspector Copy
2. COPY - OUC Copy
3. COPY - UCA Copy

~~NO~~ No MASH
MASH FERG
DINO BOARD
SIOE, SWEEP
OK FOR BARRING ONLY

3/22/99
RECEIVED MAR 19 1999
(1) G.F.F. - REPT. 1/2/99
(BY 10/20 FC)
(ITC AT LEAST 30 FT)
OK FOR BARRING ONLY
GTO/Mb

RECEIVED MAR 26 1999



BUILDING SUBCODE TECHNICAL SECTION

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

Block 11.23 Lot 9
Work Site Location 408 Maple Ave
Beachwood NJ 08722
Owner in Fee Timothy J. Bennett Applegate
Address 408 Maple Ave
Beachwood NJ 08722
Tele [REDACTED]
Contractor Timothy J. Bennett
Address 135 LANTANA RD
DOVER NJ 07801
Tele (732) 525-1122 Fax (732) 525-1543
Lic. No. or Bids. Reg. No.
Federal Emp. No. 222-153533

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)			
				Type:	Failure	Failure	Approval	Initial	
☐	No Plans Required	<u>2-24-99</u>	<u>RL</u>						
☐	All			Footing					
☐	Foundation			Foundation					
☐	Frame			Slab					
☐	Other			Frame					
Joint Plan Review Required:				Barrier-Free					
☐	Elec.	☐	Plumb.	☐	Fire	☐	Elevator		
SUBCODE APPROVAL				Insulation					
☐	CO	☐	CCO	☐	CA	Energy			
Date:				Mechanical					
Approved by:				TCO					
				Other					
				Final					
				Barrier-Free					

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ Est. Cost of Bldg. Work:
Constr. Class Present _____ Proposed _____ 1. New Bldg. \$ _____
No. of Stories _____ 2. Alteration \$ _____
Height of Structure _____ FL 3. Total (1+2) \$ 12,100
Area — Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.



Data Received
Data Issued
Control #
Permit #

2-24-99

99-029

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.

Timothy J. Bennett
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALL 16' x 35' 1/2' CONCRETE
INGROUND POOL.
EXISTING 6' WOODEN STOCKADE
FENCE

TYPE OF WORK:

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

FEE (Office Use Only)

\$ 100.00

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ 10.00
TOTAL FEE \$ 110.00

UCC F110
(rev. 3/98)

1. White = Inspector Copy 2. Canary = Office Copy
3. Pink = Office Copy 4. Gold = Applicant Copy



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

3/24/99
99-029

IDENTIFICATION Block 1123 Lot 9
Work Site Location 408 Cable Ave.
Beachwood NJ 08722
Owner in Fee Timothy & Jennifer Applegate
Address 408 Cable Ave.
Beachwood NJ 08722
Tel. [REDACTED]
Contractor Nicholas Pools
Address 1870 Lakewood Rd. Ste 9
Edms River NJ 08755
Tel. 732 1505-0404
Lic. No. or Bldrs. Reg. No.
Fed. Emp. No. 322-153-533

Is hereby granted permission to perform the following work:

☐ BUILDING	☐ PLUMBING	☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL	☐ FIRE PROTECTION	☐ DEMOLITION
☐ ELEVATOR DEVICES	☐ ASBESTOS ABATEMENT	☐ OTHER

(Subchapter 8 only)

DESCRIPTION OF WORK:

Install Inground Pool.

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 \$12,645

A. Dapfel
Construction Official

2-24-99
Date

PAYMENTS (Office Use Only)	
Building	<u>100.00</u>
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	<u>10.00</u>
Cert. of Occupancy	
Other	
Total	<u>110.00</u>
Check No.	<u>4854</u>
Cash	
Collected by	<u>[Signature]</u>

U.C.C. F-170
(rev. 5/95)

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY (see reverse side)

HOMEOWNER'S FORM

TO: OCEAN COUNTY CONSTRUCTION INSPECTION DEPARTMENT

ATTN: PLUMBING SUBCODE OFFICIAL

REF: N.S.P.C. 10.5.3 C

7.23.1

DATE 2/17/99

THIS IS TO CERTIFY THAT I, (NAME) Timothy Applegate,
ADDRESS 408 Cable Ave. Beachwood, NJ 08722,
TELEPHONE NUMBER ~~703-346-1297~~

THIS IS TO CERTIFY THAT THE SWIMMING POOL, INSTALLED AT THE ABOVE PREMISE IS NOT
PROVIDED WITH A PERMANENT WATER SUPPLY AS NOTED IN N.S.P.C. 7.23.1.

I FURTHER CERTIFY THAT ANY OUTLET USED TO FILL THIS POOL IS PROVIDED WITH
PROTECTION AGAINST BACK SIPHONAGE AS IN N.S.P.C. 10.5.3 C.

Timothy Applegate
HOMEOWNER'S SIGNATURE
(NOTARIZED)

Zachary N. Christof

ZACHARIAS N. CHRISTOF
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires Aug 2, 2001

BEACHWOOD BORO BUILDING DEPT.
1600 PINEMALD KESWICK ROAD
BEACHWOOD, NJ 08722

OFFICE OF PERMITS AND INSPECTIONS

CONSTRUCTION OFFICIAL- HERBERT D. GOLOM
BUILDING INSPECTOR- DAVID DITZEL

TELEPHONE 908- 286-6008 EXT. 220
FACSIMILE 908- 349-8390

DATE: 2/17/99

TO: CONSTRUCTION OFFICIAL

FROM: Timothy L. Applegate (NAME)
408 Cable Ave (ADDRESS)
Beachwood, NJ 08722

RE: POOL/SPA PERMIT APPLICATION
BLOCK 11.23 LOT 9

I have reviewed and understand the BOCA National Building Code, Sections 421.10.1(1) through 421.10.1(10). Pursuant to Sections 42110.2-10.4, I intend to enclose my pool/spa in the following manner:

Install 16' x 34' Green inground pool
with existing wooden fence

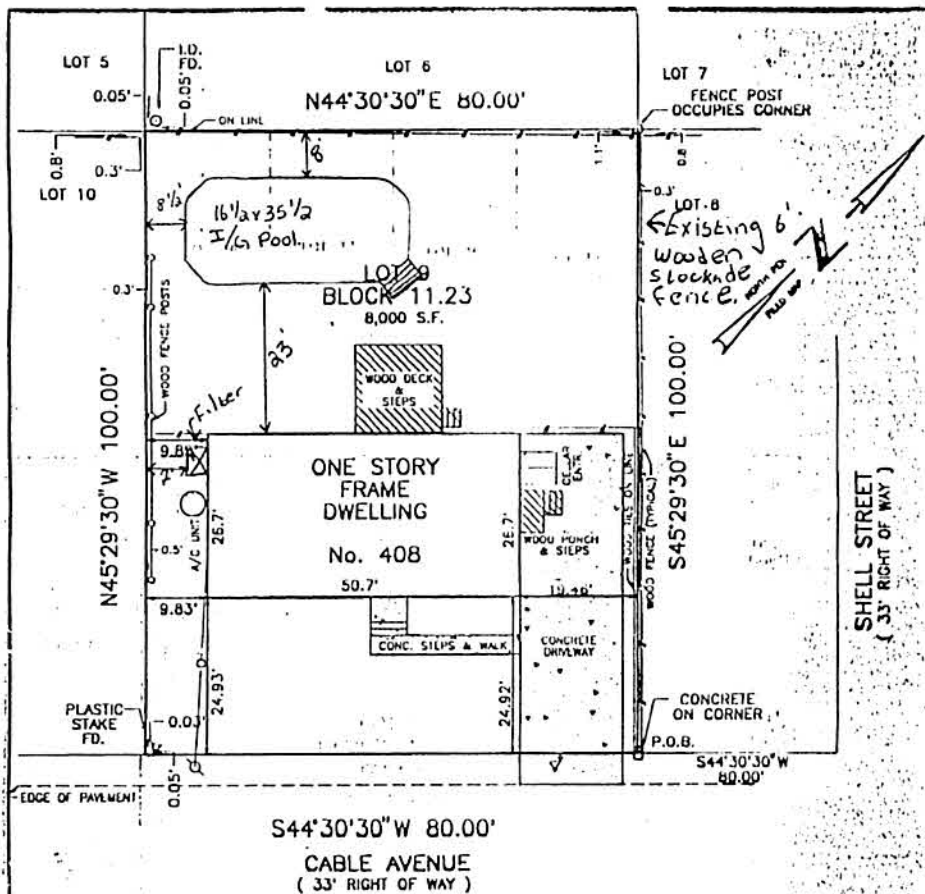
I certify the fence as shown on my survey is existing / proposed (circle one), is four / five or six feet in height, being a wooden / metal picket / stockade / board on board type with horizontal cross members _____ inches apart and vertical boards spaced _____ inches apart or being a chain link fence with _____ inch mesh.

I understand that misrepresentation of the facts, proffs or statements will result in this application being invalid and any permit issued being null and void. If any permit is required to be voided the township will proceed as if the permit had not been obtained.

Thank you. Please notarize.

Timothy L. Applegate (Homeowner Signature)

Timothy L. Applegate (Homeowner Name (Printed))



NO ATTEMPT HAS BEEN MADE TO MAKE A TOLLANDS DETERMINATION ON THIS PROPERTY AND NO ATTEMPT HAS BEEN MADE TO MAKE A TOLLANDS DETERMINATION ON THIS PROPERTY. THIS SURVEY IS A REPRESENTATION OF CONDITIONS EXISTING ON THE PROPERTY OR IN DOCUMENTATION SUPPLIED AT THE TIME OF SURVEY EXCEPT SUCH EASEMENTS AND ENCUMBRANCES IF ANY THAT MAY BE LOCATED BELOW THE SURFACE OF THE LAND OR ON THE SURFACE OF THE LAND BUT NOT VISIBLE ON ANY OTHER PERTINENT FACTS WHICH AN ACCURATE TITLE SEARCH MAY DISCLOSE. THIS SURVEY IS MADE ONLY TO INADVERTENTLY FOR PURCHASE AND/OR MORTGAGE OR TO DELINEATE PROPERTY FOR NAMED PARTIES. 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, ATTORNEY, RESALE OF PROPERTY OR TO ANY OTHER PERSON NOT LISTED EITHER DIRECTLY OR INDIRECTLY. UNAUTHORIZED ALTERATION OR ADDITION TO A SURVEY MAP VIOLATES A LICENSED LAND SURVEYOR'S SEAL IS ILLEGAL AND PUNISHABLE BY LAW.

CERTIFIED TO:
TIMOTHY L. APPELGATE & JENNIFER L. APPELGATE, husband & wife,
PHH MORTGAGE SERVICES CORP.,
COUNSELLORS TITLE AGENCY, INC.,
R. DOUGLAS SHEARER, ESQUIRE.

PROPERTY ALSO KNOWN AS:
LOTS 35, 36, 37, & 38, BLOCK M-23,
AS SHOWN ON A MAP ENTITLED,
"BEACHWOOD, MAP No. 35, PLAT NO. 1,
FILED IN THE O.C.C.O. ON JAN. 2, 1914.

SURVEY MAP BLOCK 11.23 LOT 9

BOROUGH OF BEACHWOOD, OCEAN COUNTY, NEW JERSEY

P.O. BOX 523
FORKED RIVER, NJ 08731
609-693-2600

East
Coast
Engineering, Inc.

508 MAP, SHEET
TOWNS MEER, NJ 08753
732-244-3030

SCALE:
1" = 20'

DRAWN BY:
K.C.D.

CHECKED BY:
J.P.

CONDITIONS AS OF:
9/10/1998

JOB No.
98-693

Jay F. Pierson SEP 15, 1998
JAY F. PIERSON, L.S., P.P.
PROFESSIONAL LAND SURVEYOR CS 27492
12881-10000, 120000, 11, 2000

ROBERT J. HARRINGTON, P.E.
PROFESSIONAL ENGINEER CE 34370

Pro Series High Rate Sand Filters



6-POSITION HAYWARD VARI-FLO CONTROL VALVE with easy-to-use lever action handle to let you "dial" any of the 6 valve/filter functions. FILTER, WASTE, BACKWASH, RINSE, CLOSED or RECIRCULATE. Integral backwash sight glass. Flange clamp design allows 360° valve rotation to simplify piping.

INTEGRAL TOP DIFFUSER. Assures even distribution of water over the top of the sand media bed. Full size internal piping to give smooth, free-flowing performance.

CORROSION-PROOF, UNITIZED FILTER TANK. Injection molded of tough, durable, colorfast polymeric material for dependable all-weather performance with only minimum care.

EFFICIENT MULTI-LATERAL UNDERDRAIN ASSEMBLY. Precision engineered, self-cleaning laterals give totally balanced flow and backwashing. Laterals individually thread into center collector hub to assure positive sealing, and easy servicing.

SUPPORT BASE. Rugged and attractively styled to provide strong, stable support for the filter assembly. Totally corrosion-proof, too.



All components are serviceable using only a screwdriver and a wrench.

SPECIFICATIONS - Pro-Series High Rate Sand Filters

FILTER TYPE:	High Rate Sand No. 1/2 silica sand (45mm-55mm)
FILTER TANK:	Molded polymeric
UNDERDRAIN:	Precision slotted laterals
CONTROL VALVE:	6-position top mount Vari-Flo with lever action handle
VALVE FASTENING:	Stainless steel flange clamp
SUPPORT BASE:	Injection molded ABS
PUMP RANGE:	1/2 to 3 HP (30-120 GPM)
DIMENSIONS:	S-180T - 18 1/2" wide x 35" high (462 mm x 890 mm) S-210T - 20 1/2" wide x 38" high (520 mm x 965 mm) S-220T - 22 1/2" wide x 41" high (572 mm x 1040 mm) S-244T - 24 1/2" wide x 42" high (622 mm x 1066 mm) S-310T - 30 1/2" wide x 48" high (775 mm x 1219 mm)

SPECIFICATIONS - Modular Systems (S-160T-PAK-3)

FILTER/PUMP BASE:	Molded Platform Base
PUMP-VALVE CONNECTION:	Flexible Hose
BASE DIMENSIONS:	24" wide x 34" deep x 1" high (787 mm x 838 mm x 26 mm)

PERFORMANCE DATA

FILTER MODELS	FILTER AREA	FLOW RATES			TURN OVER	
		@15 gpm per sq. ft.	@20 gpm per sq. ft.	@25 gpm per sq. ft.	8 Hrs.	10 Hrs.
Filter S-180T	1.75 sq. ft.	26.3 gpm	35 gpm	43.6 gpm	12,600	15,750
Filter S-210T	2.20 sq. ft.	33 gpm	44 gpm	55 gpm	16,800	21,000
Filter S-220T	2.64 sq. ft.	39.6 gpm	52.8 gpm	66 gpm	21,000	26,250
Filter S-244T	3.14 sq. ft.	47 gpm	63 gpm	78 gpm	15,840	19,800
Filter S-310T	4.9 sq. ft.	73.5 gpm	98 gpm	122.5 gpm	21,120	26,400

SYSTEM BASE OPTIONS

- S-160T-PAK-1 Universal Pump Mounting Base.
- S-160T-PAK-3 Universal Pump/Filter Mounting Base.

Use the basic Pro Series filter units, and optional molded bases and Hayward pump of your choice to form an integral, custom filter system.



HAYWARD POOL PRODUCTS, INC.

Hayward Pool Products, Inc.
900 Fairmount Avenue
Elizabeth, NJ 07207

Hayward Pool Products, Inc.
2875 Pomona Boulevard
Pomona, CA 91768

Hayward Pool Products Canada
2880 Plymouth Drive
Oakville, Ontario L6H 5R4

Hayward S.A.
Zoning de Jumet
B6040 Jumet, Belgium

©1990 Hayward Printed in U.S.A.

Max-Flo™ High-Performance Pump Series

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

Lexan® See-Thru Strainer Cover lets you see when basket needs cleaning. Heavy-duty cover gasket assures positive seating for dependable sealing.

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

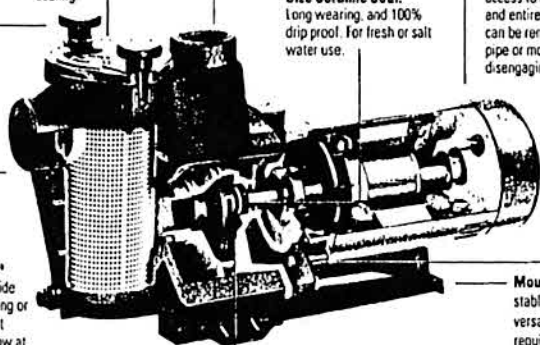
Heat Resistant, Industrial Size Ceramic Seal. Long wearing, and 100% drip proof. For fresh or salt water use.

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

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

Rugged, One-Piece Housing with full-flow ports, assures rapid priming and continuous operation.

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



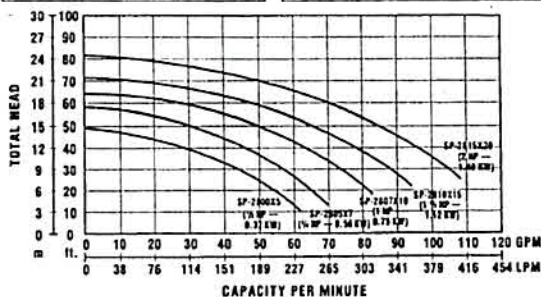
Mounting Base provides stable, stress-free support, plus versatility for any installation requirement. Adapts 48 and 56 frame motors.

Overall Dimensions



Model	HP	Pipe Size	Dimension Inch	mm
SP-2800X5	1/2	1 1/2"	10	254
SP-2805X7	3/4	1 1/2"	10 3/4	270
SP-2807X10	1	1 1/2"	11	279
SP-2810X15	1 1/2	1 1/2"	12 1/4	308
SP-2815X20	2	1 1/2"	13 1/4	333

Max Flo Pumps are also available with dual speed motors.



EXTRA LARGE 60 CUBIC INCH BASKET is 50% larger than before for extra leaf-holding capacity and longer time between cleanings. Rigid construction with load-extender ribbing assures free flowing operation for heavy debris loads.

Max Flo Series Pumps are listed by:



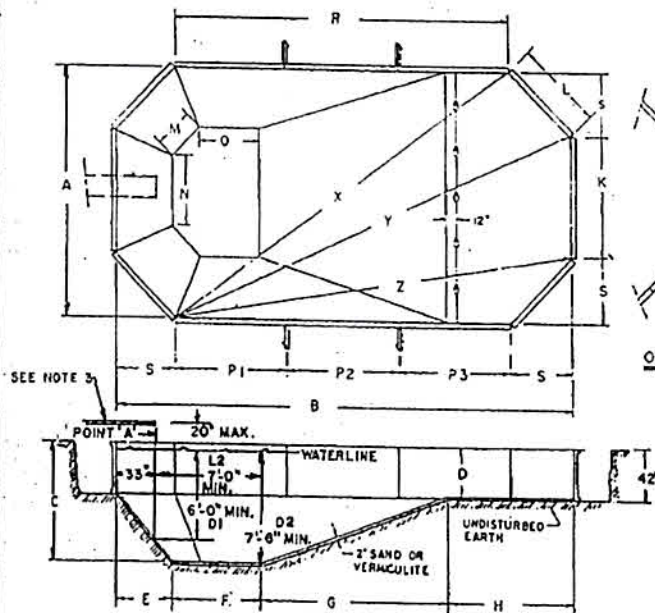
HAYWARD POOL PRODUCTS, INC.

Hayward Pool Products, Inc.
900 Fairmount Avenue
Elizabeth, NJ 07207

Hayward Pool Products, Inc.
2875 Pomona Boulevard
Pomona, CA 91768

Hayward Pool Products Canada
2680 Plymouth Drive
Oakville, Ontario L6H 5R4

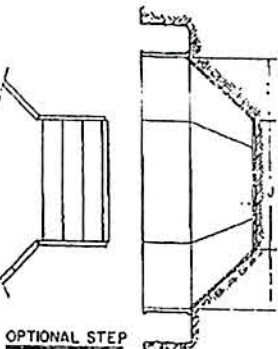
Hayward S. A.
Zone Industrielle de Jumet
B-6040 Charleroi, Belgium



- NOTES**
1. THIS IS A TYPE II POOL IN ACCORDANCE WITH N.S.P.L. STANDARDS - JAN. 1989 AND B.G.A.C. NATIONAL BUILDING CODE - 1996 - SECT 42.1
 2. EACH BRACE WILL BE MOUNDED WITH A MINIMUM OF ONE CUBIC FOOT OF CONCRETE.
 3. MAXIMUM LENGTH OF DIVING BOARD - 8', JUMP BOARD - 6'

WARNING

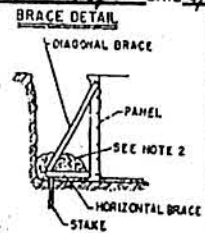
SWIMMING POOLS ARE DANGEROUS WHEN USED IMPROPERLY. CONSULT YOUR DEALER FOR SAFETY INFORMATION ON THE SAFE USE OF SWIMMING POOLS. IT IS THE RESPONSIBILITY OF TOWN OFFICIALS, BUILDERS AND HOME OWNERS TO FOLLOW ALL SAFETY RECOMMENDATIONS OF N.S.P.L., ALL LOCAL ORDINANCES AND EQUIPMENT MANUFACTURERS.



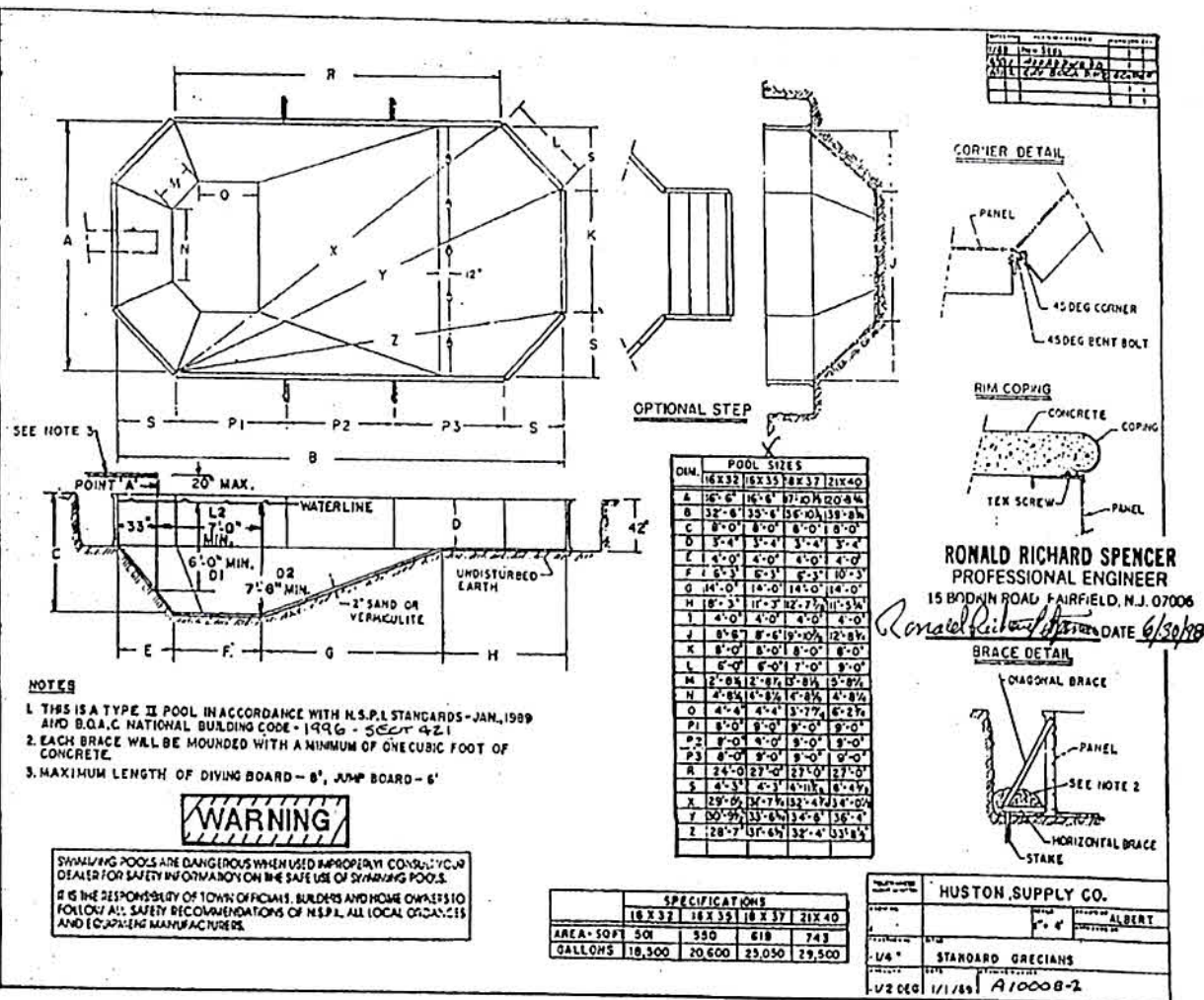
DIM.	16X32	16X32	16X32	16X32	21X40
A	16'-0"	16'-0"	16'-0"	16'-0"	21'-0"
B	32'-0"	32'-0"	32'-0"	32'-0"	40'-0"
C	8'-0"	8'-0"	8'-0"	8'-0"	10'-0"
D	3'-4"	3'-4"	3'-4"	3'-4"	4'-0"
E	4'-0"	4'-0"	4'-0"	4'-0"	4'-0"
F	6'-0"	6'-0"	6'-0"	6'-0"	6'-0"
G	14'-0"	14'-0"	14'-0"	14'-0"	14'-0"
H	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
I	4'-0"	4'-0"	4'-0"	4'-0"	4'-0"
J	8'-0"	8'-0"	8'-0"	8'-0"	8'-0"
K	8'-0"	8'-0"	8'-0"	8'-0"	8'-0"
L	6'-0"	6'-0"	6'-0"	6'-0"	6'-0"
M	2'-0"	2'-0"	2'-0"	2'-0"	2'-0"
N	4'-0"	4'-0"	4'-0"	4'-0"	4'-0"
O	4'-0"	4'-0"	4'-0"	4'-0"	4'-0"
P1	8'-0"	8'-0"	8'-0"	8'-0"	8'-0"
P2	8'-0"	8'-0"	8'-0"	8'-0"	8'-0"
P3	8'-0"	8'-0"	8'-0"	8'-0"	8'-0"
R	24'-0"	24'-0"	24'-0"	24'-0"	24'-0"
S	4'-0"	4'-0"	4'-0"	4'-0"	4'-0"
X	29'-0"	29'-0"	29'-0"	29'-0"	29'-0"
Y	50'-0"	50'-0"	50'-0"	50'-0"	50'-0"
Z	28'-0"	28'-0"	28'-0"	28'-0"	28'-0"

SPECIFICATIONS				
	16 X 32	16 X 32	16 X 32	21 X 40
AREA - SQ FT	504	550	618	743
GALLONS	18,500	20,600	23,050	29,500

RONALD RICHARD SPENCER
 PROFESSIONAL ENGINEER
 15 BODWIN ROAD, FAIRFIELD, N.J. 07006
 DATE 6/30/89



HUSTON SUPPLY CO.	
1/4"	STANDARD GRECIANS
1/2000	1/1/89
A10008-2	



BOROUGH OF BEACHWOOD

1600 PINEWALD ROAD
BEACHWOOD, NEW JERSEY 08722
(908) 286-6000
Ext. 217

For Office Use

Date: 2/24/99
Zoning #: R19-77
Construction #: 1510
Fee: _____

REQUEST FOR ZONING REVIEW

OWNER: Timothy + Jennifer Applegate TEL: [REDACTED]
CONTRACTOR: Nicholas Parks TEL: 132-515-1414
ADDRESS OF CONSTRUCTION: 408 Cable Ave BLOCK & LOTS: _____
PROPOSED PROJECT: Install 11.4 x 35.2 Green inground pool DIMENSIONS: 16.4 x 35.2
SET BACKS: Front _____ Rear 5 Sides 5 COVERAGE: 571.5 Sq. ft.
DISTANCE BETWEEN STRUCTURES: _____ ELEVATIONS: Foundation _____ Road _____
APPROVALS: Planning Board _____ Board of Adjustment _____ Other _____

I have read and am familiar with Codes and Ordinances of the Borough of Beachwood. The proposed project will not constitute nor create a non-conforming use or structure. I will not add nor delete from the requested project specifications without approval. I accept responsibility for any and all violations created by the requested project and understand such violations must be removed and/or abated as directed by the Zoning Officer.

[Signature] 2/24/99
Owner or Agent Date
APPROVED: X DISAPPROVED: _____ REMARKS: Pool must comply with
Pool pool regulations. Move Filter to Back of
house

[Signature] 2/24/99
Zoning Officer Date

CERTIFICATE OF ZONING COMPLIANCE

To the best of my knowledge the finished project conforms to the Codes and Ordinances of the Borough of Beachwood.

APPROVED: _____ DISAPPROVED: _____ REMARKS: _____

Zoning Officer

Date

NOTE: A. Disapprovals may be appealed to the Beachwood Board of Adjustment.

B. All requests shall be furnished with a Map of Survey (3 copies) showing proposed set backs, elevations, dimensions, easements and any other information requested by the Zoning Officer.

C. FOR CONSTRUCTION REQUIRING FOUNDATIONS AS-BUILT MAPS OF SURVEY (3 COPIES) SHALL BE SUBMITTED FOLLOWING COMPLETION AND PRIOR TO THE BUILDING INSPECTOR'S APPROVAL.