BLOCK 14.29.02 LOT 2 QUALIFICATION CODE _____ ADDRESS (SITE) 538 Linda ct. PERMIT NO. 98-1166

RECEIVED
APR 2 - 1998
DIV. OF [illegible]

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Propsed Work Site at: 538 Linda ct
2. Name of Owner in Fee: EverGreen Woods Tel. (732) 458-1784
   Address 107 miranda ct (street) Brick (municipality) 08723 (zip code)
3. Ownership in Fee: Public ✓ Private _____
4. Principal Contractor (TM) Superskills Const. Tel. (732-) 370-8465
   Address 26 Darien Rd Howell 07731
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: (____) _____
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person in Charge of Work EverGreen Woods
   Tel. (732) 458 1784 FAX (____) _____

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	113		
2. Electrical				
3. Plumbing				
4. Fire Protection				
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review		3		
8. Subtotal	$			
9. DCA Training Fee				
10. Subtotal				
11. Cert. of Occupancy				
12. Other				
13. TOTAL	$	113		

VI. BUILDING/SITE CHARACTERISTICS

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

II. PROPOSED WORK

	Est. Cost	OPTIONAL (for office use only) 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									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	7000								

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

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 10317542

U.C.C. F100-1 (rev 3/96)

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 Ron Hopping Date 4/24/98

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

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

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

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

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

(✓) Check if contractor

Agent Name EverGreenwoods

Address 107 Miranda ct

Telephone (732) 458-1784

Signature Ron Hopping

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer			X	X	X	X	X	X	
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Department of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Department of Environmental Protection	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☐									
☐									

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 04/28/98
Control #
Permit # 98-1166

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 1429.02 Lot 2

Work Site Location 539 LINDA CT
RE-ROOF
Owner in Fee EVERGREEN WOODS
Address 107 MIRANDA CT
BRICK, NJ 08723-
Telephone (732)458-1784

Contractor SURE/SKILLS CONST
Address 26 DARION RD
HOWELL, NJ 07731-
Telephone (732)370-8465
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 37-08465
or Social Security No.

Exp. Date / /

Is hereby granted permission to perform the following work:
[X] BUILDING [ ] PLUMBING [ ] OTHER
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:
RE-ROOF

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

Estimated Cost of Work $ 4,000

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building	110
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	3
Cert. of Occ.	0
Other	
Total	113
Check No.	999
Cash	
Collected By:	AJP

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

98-1166
4-2898

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

Block 142902 Lot 2
Work Site Location Linda ct
Owner in Fee EverGreenwoods
Address 107 miranda ct.
Brick
Tele. (732) 458 1784
Contractor (DBA) SURE/SKILLS CONST
Address 26 Sherm RD.
HOWELL NJ 07731
Tele. (732) 370-8465
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

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

ReRoof

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			12/16/98	JKG

7/1/98 letter from Evergreen Woods Certified Letter Verification of Receipt JKG

Per letter

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 Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Alteration $
3. Total (1+2) $

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence Height (6' or over)
- [ ] Sign Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement
- [ ] Other
- [ ] Other

[ ] Demolition

(Office Use Only)
FEE
$

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

U.C.C. Form F-1108 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

EVERGREEN WOODS PARK ASSOCIATION

107 MIRANDA COURT BRICK, NJ 08724
(732) 458-1784 Fax (732) 458-8405

April 28, 1998

Township of Brick
Building Department
401 Chambersbridge Road
Brick, NJ 08724

Dear Sir/Madam:

Please be advised that the Association has approved the re-roofing on Linda Court.

If you have any questions please do not hesitate to contact the Association office.

Very truly yours,

Gay Carlino

Gay Carlino
Property Administrator

Kipcon Inc.
PROFESSIONAL ENGINEERING CONSULTANTS
75 Raritan Avenue
Highland Park, NJ 08904

Sent via fax (732) 458-8405 and regular mail

November 30, 1998

Mr. Ron Hopping, Maintenance Supervisor
Evergreen Woods Park Association
107 Miranda Court
Brick, New Jersey 08724

Reference: **Evergreen Woods Park**
Use of Cobra Vents in Lieu of Square Vents
Kipcon Project No. 705-13

Dear Ron:

We have evaluated your proposal regarding removing two, 12 X 12 square roof vents at the rear of the units and installing 22 lineal feet of Cobra vent at the ridges (providing an 18 lineal foot opening beneath the vent). Based on the information you provided, we feel the Cobra vent will provide greater ventilation of the attic spaces than the existing ventilation. Our reasons for this conclusion are stated below.

Attached is a copy of the net free ventilation information for a typical brand of square roof vents (Lomanco). The vent which most closely matches the dimensions you provided is Model No. 730. This vent has a net free ventilation area of 30 square inches; therefore, two vents would provide 60 square inches of net free ventilation. The largest square vent manufactured by Lomanco (which is not a double) provides 70 square inches of net free ventilation area. Two of these vents (if in fact were used) would provide 140 square inches of net free ventilation.

The Cobra ridge vent (manufactured by GAF) has 16.9 square inches of net free ventilation per lineal foot. The proposed actual vent length is considered to be 18 lineal feet since this is the length of the slot. The Cobra ridge vent will provide 304 square inches of net free ventilation which is significantly greater than the existing ventilation even if the vents were larger than the Model No. 730 that we have assumed to be an equivalent size.

We further recommend that the existing square roof vents be removed when the ridge vents are installed. This will allow air to be drawn through the existing soffit vents rather than the square vents maximizing the effects of the ventilation.

Kipcon Inc.
PROFESSIONAL ENGINEERING CONSULTANTS

If you should have any questions or comments, please do not hesitate to contact me at your convenience.

Very truly yours,

KIPCON INCORPORATED

Mitchell H. Frumkin, P.E., P.P.
President

KCH/kch

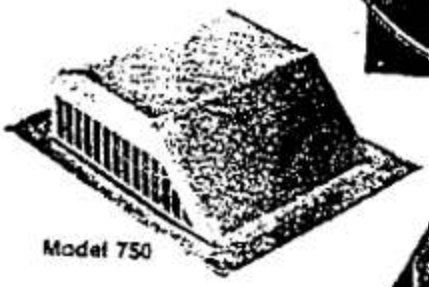
cc: Board of Trustees, Evergreen Woods Park Association

135 ROOF LOUVER

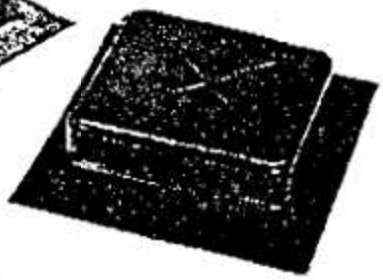
Roof Louvers

featuring

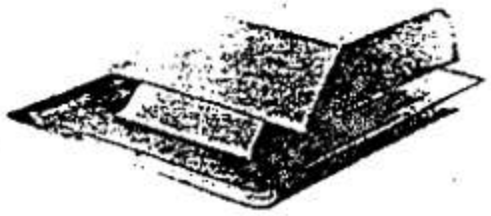
"The Lomanco Balance"



Model 750



Model 600



Model 865

ROOF LINE LOUVERS

135 Roof Louver features 14" diameter opening, aluminum screen, and a weathershielding rain guard for maximum weather protection. Available in black, brown, white or weathered bronze baked enamel finish, as well as mill finish.

600 Series and Model 550 feature aluminum construction, 8 x 8 perma-coated aluminum screen extended to the edges of the cap, large nailing flange and rolled flange on vent stack to prevent weather infiltration. Available in black, brown, white or weathered bronze baked enamel finish as well as mill finish. 600-D is a twin 600.

Model 600-S, designed for shake roofs, has a tall throat to allow plenty of room for air circulation after the installation of shakes. Available in brown only.

700 Series have three sides open for maximum air circulation, heavy gauge aluminum construction, fits on all roofs. 770-D is a twin 770 unit. The 730, 750 and 770 are available in black, brown, white or weathered bronze baked enamel finish, as well as mill finish.

600 Series are a new addition to Lomanco's line of roof louvers. They are modeled after the 700 Series and are manufactured out of durable ABS plastic with U.V. protection for longer life. Large nailing flange for easy installation. The 8 x 8 perma-coated screen extends to the edges of the dome to protect from bird and insect intrusion. They are available in gray, brown, black or white.

Model 865-S, designed for shake roofs, has a tall throat to allow plenty of room for air circulation after the installation of shakes. Available in gray, brown or black.

135 ROOF LOUVER

Model No.	Overall Size	Opening Size	Net Free Area	Square Feet Louver Ventilates	No. Per Carton	Weight Per Carton	Price Each	
							Mill	Colort
135	20" x 23" x 7 3/4"	14"	144	300	2	14 lbs.		

600 SERIES

Model No.	Overall Size	Opening Size	Net Free Area	Square Feet Louver Ventilates	No. Per Carton	Weight Per Carton	Price Each	
							Mill	Colort
550	15 3/8" x 18 1/2" x 4"	9"	50	104	6	5 1/2 lbs.		
600	16 5/8" x 18 7/8" x 4"	9 1/2"	60	125	6	9 1/2 lbs.		
600-D	32 1/2" x 18 7/8" x 4"	Two 9 1/2"	120	250	4	13 lbs.		
600-S Brown	16 5/8" x 18 7/8" x 6 1/2"	9 1/2"	60	125	4	8 1/2 lbs.	—	

700 SERIES

Model No.	Overall Size	Opening Size	Net Free Area	Square Feet Louver Ventilates	Number Per Carton	Weight Per Carton	Price Each	
							Mill	Colort
730	12 3/16" x 17 3/4" x 4"	6 1/4"	30	63	6	7 1/2 lbs.		
*750	16" x 20 5/16" x 5"	8"	50	104	6	10 lbs.		
**750-G	14 7/16" x 20 5/16" x 5"	8"	50	104	6	10 lbs.		
770	16 5/8" x 22 3/8" x 6"	9 1/2"	70	146	6	13 1/2 lbs.		
770-D	32 1/2" x 22 3/8" x 6"	Two 9 1/2"	140	292	4	17 1/2 lbs.		
700	14 7/16" x 20 5/16" x 5"	8"	—	—	6	12 1/2 lbs.		

800 SERIES

Model No.	Overall Size	Opening Size	Net Free Area	Square Feet Louver Ventilates	Number Per Carton	Weight Per Carton	Price Each†
845	14 3/8" x 17 1/4" x 4"	6 3/4" x 8 1/2"	41	86	6	10 1/2 lbs.	
865	16 1/2" x 19 3/8" x 4 3/4"	8 1/2" x 10 1/4"	61	128	6	13 lbs.	
865-S	16 1/2" x 19 3/8" x 6 11/16"	8 1/2" x 10 1/4"	61	128	4	11 1/2 lbs.	

*Available in Gray, Brown, Black or White
*Recommended Stock Size
†Available in White, Brown, Black, or Weathered Bronze
**Galvanized Steel
Specify Color When Ordering