'OWNSHIP OF BRICK

1'0 July

CONSTRUCTION PERMIT APPLICATION

JUL 6 1984

BUILDING

I. IDENTIFICATION

. Proposed Work at: LOT 6 BLOCK 675-9 ON SYCAMORE AVE 771

. Owner Name: KEITH GORE [redacted]

Address 4 TREMONT DRIVE NEPTUNE N.J. 07753

. Principal Contractor: SELF Tel. ( )

Address

Lic. No. or Builder Reg. No. Federal Emp. No.

. Architect or Engineer: Tel. ( )

Address

. Responsible Person in Charge of Work KEITH GORE [redacted]

675-9

II. PROPOSED WORK

A. TYPE OF WORK

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

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☒	Building/ Structural	$25 000
2. ☒	Plumbing	5,000
3. ☒	Electrical	3,500
4. ☐	Fire Protection	
5. ☐	Other	
6. ☐	Other	
	TOTAL COST	$33,500

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

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

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

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

If new construction, enter no. of dwelling units 1

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

Before Construction:

After Construction:

Net Gain (or loss):

B. NON-RESIDENTIAL

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

State Specific Use:

If Change in Use Group, Indicate Former:

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

B. HEATING FUEL

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

C. TYPE OF SEWAGE DISPOSAL

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

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

14. No. of Stories 2
15. Height of Structure 29 Ft.
16. Area–Largest Floor 1,160 Sq. Ft.
17. Bldg. Area–All Fls. 2,252 Sq. Ft.
18. Volume of Structure 36540.00 Cu. Ft.
19. Total Land Area Disturbed Sq. Ft.

LDS BR 10510816

C. Form F-100 (8/83)

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

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

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

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

B1. ☒ Building B2. ☒ Electrical B3. ☒ Plumbing

C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 46:3B-1 et. seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

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

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

SIGNATURE Keith Lore DATE 6/22/84

II. AGENT SECTION

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

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

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

☐ **Check if contractor.**

AGENT NAME _____ **TEL.(** **)** _____

ADDRESS _____

_____

SIGNATURE _____

BLOCK NO. 615 - 7 LOT NO. [redacted] SUBDIVISION Cedarville Manor PERMIT NO. 1100

PRIOR APPROVALS CHECKLIST

APPROVALS	LOCAL				COUNTY				REGIONAL				STATE				COMMENTS
	Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim Approval		Final Approval		Prelim. Approval		Final Approval		
	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	
☐ Planning Board																	
☐ Zoning Board																	
☒ Sewer Authority	KD	5-3															
☒ Water Authority	KD	5-3															
☐ Fire Department																	
☐ Police Department																	
☐ Health Department																	
☐ Soil Conservation																	
☐ N.J. Dept. of Community Affairs																	
☐ N.J. Dept. of Transportation																	
☐ N.J. Dept. of Environmental Protection																	
☐ Other:																	
☐																	
☐																	
☐																	
☐																	
☐																	
☐																	

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

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

PERMIT CONTROL

I. PLAN REVIEW STATUS

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

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

Plan Review Required	Type of Work	Plans Received By Date	Plans Received By Receiver	Approval Date	Reviewer	Comments
☑	BUILDING			7-17-84	CO	
	Footings/Foundations					
	Framing					
	Architectural					
	Other Zoning			7/10/84	JPK	
☒	PLUMBING	7-14-84	On	8-11-84	Bm	
☐	ELECTRICAL	7-18-84	JH	7-19-84	BK	
☒	FIRE PROTECTION			7-20-84	M.C.	APPd As Noted
☐	OTHER Engr			8-6-84	Lopez	SEE

CC ✓
Letter
Aff

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
✓	ALL CONSTRUCTION			
	BUILDING		11-4-85 RM	
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
✓	PLUMBING		11-15-85	
✓	ELECTRICAL		11-18-85 BK	
	FIRE PROTECTION		11-12-85 MC	
✓	OTHER Engr. 11/30 day B/U KMT.		OK 4-8-86	TCO till 4/86

III. CERTIFICATES ISSUED

CERTIFICATE(S) ISSUED:

		Date Issued
✓ ☑	Temporary Certificate of Occupancy Date Expired 12-14-85	11-20-85
☑	Temporary Certificate of Occupancy Date Expired 4-15-86	
✓ ☐	Certificate of Occupancy No. 1700	4-9-86
☐	Certificate of Continued Occupancy No. _____	
☐	Certificate of Approval No. _____	
☐	None	

IV. ON-GOING INSPECTIONS

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

V. FEE SUMMARY

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

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	$255.78
PLUMBING	100.—
ELECTRICAL	.
FIRE PROTECTION	.
OTHER _____	.
SUBTOTAL	$355.78
— LESS: 20% of subtotal (when plan review performed by state agency)	(35.58)
D.C.A. TRAINING FEE .0006 x $35,540.00	21.32
CERTIFICATE OF OCCUPANCY	53.37
OTHER fireplace	15.00
OTHER _____	.
TOTAL COLLECTED WHEN PERMIT ISSUED	$481.65

DATE 8-6-84 Collected By JB

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

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

C. TOTAL CONSTRUCTION FEES COLLECTED

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

TOWNSHIP OF BRICK

CERTIFICATE

CERT. NO. 1700
DATE ISSUED 4-9-86
Block 675-9 Lot 6
Subdivision

IDENTIFICATION

Owner Keith Gore
Address 4 Tremont Drive
Neptune, NJ
Tel. ( )

Agent
Address
Tel. ( )

Work Site Address 771 Sycamore Drive
Lic. No.
Federal Emp. No.

PAYMENTS

Fees Remitted $
☐ Check No.
☐ Cash
☐ Other

Collected By:
Date:

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☒ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL

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

B. ☐ CERTIFICATE OF CONTINUED OCCUPANCY

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

C. ☐ TEMPORARY CERTIFICATE OF OCCUPANCY

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

D. DESCRIPTION OF WORK:

single family dwelling

USE GROUP R-3 FIRE GRADING 1 hour

MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE single family dwelling

FINAL COST OF CONSTRUCTION: $ 45,000.

Arthur J. Cuozzo
CONSTRUCTION OFFICIAL

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

TOWNSHIP OF BRICK

CERTIFICATE

CERT. NO. 1700
DATE ISSUED 11-20-85
Block 675-9 Lot 6
Subdivision

IDENTIFICATION

Owner Keith Gore
Address 4 Tremont Dr
Neptune, N.J. 07753
Tel. ( )
Work Site Address 771 Sycamore Ave
Agent Same
Address
Tel. ( )
Lic. No.
Federal Emp. No.

PAYMENTS

Fees Remitted $
☐ Check No.
☐ Cash
☐ Other
Collected By:
Date:

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☐ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL

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

B. ☐ CERTIFICATE OF CONTINUED OCCUPANCY

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

C. ☒ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than Dec. 14, 19 85 or the owner will be subject to a fine or order to vacate:

Pending final Engineering (Sidewalks)
extend to 4-15-86 ok 4/8/86

D. DESCRIPTION OF WORK:

Single family dwelling

USE GROUP R-3 FIRE GRADING 1 hour

MAXIMUM LIVE LOAD MAXIMUM OCCUPANCY LOAD

SPECIFIC USE Residence

FINAL COST OF CONSTRUCTION: $ 45,000.

CONSTRUCTION OFFICIAL

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

TOWNSHIP OF BRICK

APPLICATION FOR CERTIFICATE

PERMIT NO. 1700
DATE ISSUED
Block 675-9 Lot 6
Subdivision
Notice No.

IDENTIFICATION

OWNER:

Name Keith Gore
Address 771 Sycamore Dr.
Town/State/Zip Brickstown, N.J. 08723

CONSTRUCTION LOCATION:

Address 771 Sycamore Dr.
Brickstown, N.J. 08723

T [redacted]

ACTION

☐ CERTIFICATE OF OCCUPANCY
☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF CONTINUED OCCUPANCY
☐ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP: _____ Previous _____ Current

FINAL COST OF CONSTRUCTION: $ 45,000
(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: Margaret M. Gore
OWNER/AGENT

☒ Owner
☐ Agent

U.C.C. Form F-270 (6/83)

SUBCODE

TECHNICAL SECTION

Block 75-9 Lot 43

Subdivision

A. IDENTIFICATION

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

Owner KEITH GORE

Address 4 TREMONT DR. NEPTUNE

Te [redacted]

Work Site Address Lot 6 - Block 75-9 771 SYCAMORE AVE

Contractor

Address

Tel. ( ) Lic. No.

Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other FEE

Area Sprinkled: ☐ Full ☐ Partial (specify in comments)

No. of Heads: No. of Spare Heads:

☐ Valves Supervised — Method:

Water Supply — Source: Size:

FD Connection Location:

Estimated Cost of Work: $ $

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other

Manual Pull: ☐ Yes ☐ No

Locations:

Estimated Cost of Work: $ $

B3. ALARM

TYPE: ☐ Manual ☑ Automatic FEE

Supervision Type: ☐ Local ☐ Central ☐ Proprietary ☐ Remote Location

Estimated Cost of Work: $ $

B4. STAND PIPES

Pipe Size: Pump Size:

Water Source: Size:

FD Connection Location:

Hose Station: ☐ Yes ☐ No

Estimated Cost of Work: $ $

B5. OTHER

$

$

$

Subtotal $

Minimum Fire Protection Fee (If Applicable) $

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

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP R-4 Present R-3 Proposed

Heating Systems — Location:

D. COMMENTS

DATE	JOB CONDITION/COMMENTS
7-24-84	PLAN Review: ① SMOKE Det BASEMENT
	② 5.7 SQ FT Bedroom windows
	③ 4" VAPOR SILL
	④ 1/2 Fire sheetrock
	⑤ 1 3/4 SOLID CORE DOOR
	⑥ Temp Glass
8-27-85	FINAL: T.C.O. 14 DAYS
	① MOVE Det BASEMENT
	② VENT RANGE
	③ VENT DRYER
9-12-85	FINAL: APP

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved — As NOTE
Date: 7-24-84
Approved By: M CLARK

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 9-12-85

INSPECTIONS

Type	Failure Date			Approval Date
☐ Fire Suppression Test				
☐ Fire Alarm Test				
☐ Smoke Test				
☐ TCO				
☒ Other FINAL	8-27-85			9-12-85
☐ Other				

UNIFORM CONSTRUCTION CODE

TECHNICAL SECTION

Subdivision Cedarbridge Manor

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner KEITH GORE

Address 4 TREMONT DRIVE
NEPTUNE N.J.

Tel. [redacted]

Work Site Address LOT 6 BLOCK 675-9
SYCAMORE AVE

Contractor

Address

Tel. ( )

Lic. No.

Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

☒ See Plans

TYPE OF WORK:

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

	Fee Basis	Fee
		$
SUBTOTAL		$
Minimum Building Fee (if applicable)		$
Total Building Fee *(Greater of Minimum or Subtotal)*		$

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 2

Height of Structure 27 Ft.

Area–Largest Floor _____ Sq. Ft.

Total Building Area–All Floors _____ Sq. Ft.

Volume of Structure _____ Cu. Ft.

Total Land Area Disturbed _____ Sq. Ft.

D. COMMENTS

9-21-84	Footing already poured - OK to
10-5-84	Foundation OK

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required	7-27-84	EDL
☒ All		
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☒ Frame				5-24-85 EDL
☐ Architectural				
☒ Insulation				6-3-85 EDL
☐ Finishes				
☐ Energy				
☐ Mechanical				

TOWNSHIP OF BRICK

SUBCODE TECHNICAL SECTION

Block 6 Lot
Subdivision

A. IDENTIFICATION

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

Owner KEITH JOKE
Address 7 THERMONT DRIVE TOMS RIVER NJ
Tel. ( ) [redacted]
Work Site Address LOT 6 BLOCK 678.7 SEAHORSE AVE

Contractor
Address
Tel. ( )
Lic. No.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

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

☐ See Plans

TYPE OF WORK:
- ☐ New Building
- ☐ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

Fee Basis	Fee
	$
[redacted]	[redacted]
[redacted]	[redacted]
SUBTOTAL	$
Minimum Building Fee (if applicable)	$
Total Building Fee *(Greater of Minimum or Subtotal)*	$

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 2

Height of Structure 29 Ft.

Total Building Area—All Floors _____ Sq. Ft.

Volume of Structure _____ Cu. Ft.

D. COMMENTS

UNIFORM CONSTRUCTION CODE **TECHNICAL SECTION**

Subdivision Cedarbridge Manor

A. IDENTIFICATION

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

Owner KEITH GORE
Address 4 TREMONT DR. NEPTUNE N.J.
Tel. ([redacted]
Work Site Address LOT 6 - BLOCK 675-9 SYCAMORE AVE

Contractor WM MAYNE
Address 633 N MANASQUAN AVE POINT PLEASANT
Tel. ( ) 295-1137
Lic.No./Bus. Permit 3820
Federal Emp. No.

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

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

William Mayo
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
3	Water Closet/Bidet/Urinal	$ 15		Garbage Disposal	$
1	Bathtub	5		Air Conditioner Unit	
3	Lavatory/Sink	15		Indirect Connection	
1	Shower/Floor Drain	5		Sewer Ejector	
1	Washing Machine	5		Grease Trap	
1	Dishwasher	5		Interceptor	
	Commercial Dishwasher			Backflow Device	
1	Water Heater	5		Reduced Pressure Backflow Device	
1	Domestic Boiler/ Furnace	15	4	Vent Stack	10
	Steam Boiler			Solar System	
	Water Util. Connection		1	Other KITCH SINK	05
	Sewer Util. Connection			Other GAS	@ 15
2	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 70		COLUMN 2	$ 30

Fee	
COLUMN 1	$ 70
COLUMN 2	$ 30
SUBTOTAL	$ 100
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee (Greater of Minimum or Subtotal)	$ 100

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage — Material A.C.S. Size 3" 2" 1½
Building Sewer — Material A.C.S. Size 4"
Water Service — Material [illegible] Size 1"

D. COMMENTS

DATE	JOB CONDITION/COMMENTS
8-27-85	not ready for inspection Too many things incomplete
11-1-85	Valver on boat Dishwashe Drain Size

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 11-15-85

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Slab				
☒ Rough				5-10-85 DH
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				

TOWNSHIP OF BRICK

UNIFORM CONSTRUCTION CODE

TECHNICAL SECTION

Block _____ Lot _____

Subdivision _____

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner KEITH GORE

Address 4 TREMONT DR

NEPTUNE N.J.

Tel [redacted]

Work Site Address LOT 6 BLOCK 9

77 SYCAMORE AVE

Contractor [illegible]

Address [illegible]

Tel. ( ) [illegible]

Lic.No./Bus. Permit [illegible]

Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

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

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

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage – Material _____ Size _____

Building Sewer – Material _____ Size _____

D. COMMENTS

PLOT PLAN REVIEW CHECK LIST

C. FIELD CHECK (MUNICIPAL ENGINEER-IF NECESSARY)

______ Accepted Signature Dated	______ Rejected Signature Dated
Comments: ______	Comments: ______

D. PLOT PLAN APPROVAL (MUNICIPAL ENGINEER)

Stu Kallmer 8-6-84 Accepted Signature Dated	Stuart Kallmer 7-10-84 Rejected Signature Dated
Comments: Resubmitted plan is OK	Comments: RESUBMIT W/GRADES

E. C. O. APPROVALS

1. Field Inspection (Inspector)

______ Accepted Signature Dated	M P Tellier 11/2/85 Rejected Signature Dated
Comments: ______	Comments: needs sidewalk & apron

2. Temporary C. O. (Municipal Engineer)

M P Tellier 11/14/85 Accepted Signature Dated	______ Rejected Signature Dated
Comments: ~~30 day temp. due 12/14/85~~ - 1/14/86 [illegible]	Comments: ______

3. Final C. O. (Municipal Engineer)

______ Accepted Signature Dated	______ Rejected Signature Dated
Comments: ______	Comments: ______

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK TOWN, N.J. 08723

(201) 477-3000

Engineering Department

ROBERT H. CHANKALIAN, P.E.
Municipal Engineer

TM

7-6-84

PLOT PLAN REVIEW CHECK LIST

BLOCK: 675-9 LOT: 6

ADDRESS: 771 S/Commodore Dr.

A. PLAN REVIEW

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

B. FIELD CHECK (INSPECTOR) – [signature] 7-9-84 Accepted

Signature Dated

Comments NO GRADE [illegible]

Rejected

Signature Dated

Comments

TOWNSHIP OF BRICK

☐ NOTICE OF VIOLATION AND ORDER TO TERMINATE
☐ NOTICE AND ORDER TO PAY PENALTY

PERMIT NO. 1700
DATE ISSUED 12-15-86
Block 675-9 Lot 6
Subdivision
Notice No.

IDENTIFICATION

OWNER:
Name Keith Gore
Address 771 Sycamore Ave.
Town/State/Zip Brick NJ 08723
Work Site Address Same

AGENT:
Name
Address
Town/State/Zip

ACTION

DATE OF NOTICE: 12-15-86
COMPLIANCE DUE DATE: ~~Immediately~~
DATE OF INSPECTION:

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:

Temporary Certificate of Occupancy

5:23- 2. 7 Has Expired (Temporary Certificate of Occupancy)

5:23-2.91 Enforcement

You are hereby ordered to terminate the said violations on or before Immediately. 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.

☐ 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 ------- that any of the 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., 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 your reliance on the Regulations and, if neccessary, a brief statement setting forth your position and the 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 Construction Board of Appeals , Toms River N. J. 08753.

If you have questions concerning this matter, please call: Arthur Cierzo Construction Official
201-477-3000 Ext. 269

NOTICE OF VIOLATION AND ORDER TO TERMINATE: DATE:

SCO

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK TOWN, N.J. 08723

(201) 477-3000

Engineering Department

ROBERT H. CHANKALIAN, P.E.
Municipal Engineer

TM

7-6-84

PLOT PLAN REVIEW CHECK LIST

BLOCK: 675-9 LOT: 6

ADDRESS: 771 S. Camano Dr.

A. PLAN REVIEW

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

B. FIELD CHECK (INSPECTOR) – Existing Grade ok 7-9-84 Accepted

Signature No GRADE Dated

Comments _____

_____

Rejected

_____

Signature Dated

Comments _____

_____

1

PLOT PLAN REVIEW CHECK LIST

C. FIELD CHECK (MUNICIPAL ENGINEER-IF NECESSARY)

Signature / Dated — Accepted	Signature / Dated — Rejected
Comments:	Comments:

D. PLOT PLAN APPROVAL (MUNICIPAL ENGINEER)

Steve Ballou 8-6-84 — Accepted	Steve Ballou 7-10-84 — Rejected
Signature / Dated	Signature / Dated
Comments: Resubmitted plan is OK	Comments: RESUBMIT W/ GRADES. cdd 7/10

E. C. O. APPROVALS

1. Field Inspection (Inspector)

Signature / Dated — Accepted	M P Teller 11/2/85 — Rejected
	Signature / Dated
Comments:	Comments: needs sidewalk & apron

2. Temporary C. O. (Municipal Engineer)

11/14/85 — Accepted	Signature / Dated — Rejected
Signature / Dated	
Comments: 30 day temp. due 12/14/85	Comments:

3. Final C. O. (Municipal Engineer)

Signature / Dated — Accepted	Signature / Dated — Rejected
Comments:	Comments:

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK TOWN, N.J. 08723

(201) 477-3000

Engineering Department

ROBERT H. CHANKALIAN, P.E.
Municipal Engineer

TM

7-6-84

PLOT PLAN REVIEW CHECK LIST

BLOCK: 675-9 LOT: 6

ADDRESS: 771 Sycamore Dr.

A. PLAN REVIEW

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

B. FIELD CHECK (INSPECTOR) – Existing Grade OK 7-9-84 Accepted

Signature No GRADE Dated Shown

Comments _____

_____

_____ Rejected

Signature Dated

Comments _____

_____

PLOT PLAN REVIEW CHECK LIST

C. FIELD CHECK (MUNICIPAL ENGINEER-IF NECESSARY)

Signature / Dated — Accepted	Signature / Dated — Rejected
Comments:	Comments:

D. PLOT PLAN APPROVAL (MUNICIPAL ENGINEER)

Stu Kalbow 8-6-84 — Accepted	Stuart Kalbow 7-10-84 — Rejected
Signature / Dated	Signature / Dated
Comments: Resubmitted plan is OK	Comments: Resubmit w/ grades & lot lines

E. C. O. APPROVALS

1. Field Inspection (Inspector)

M P Teller 4-8-86 — Accepted	M P Teller 11/2/85 — Rejected
Signature / Dated	Signature / Dated
Comments:	Comments: needs sidewalk & apron

2. Temporary C. O. (Municipal Engineer)

M P Teller 11/14/85 — Accepted	Rejected
Signature / Dated	Signature / Dated
Comments: ~~30 day temp cert~~ 12/14/85 — 1/14/86 (April 86)	Comments:

3. Final C. O. (Municipal Engineer)

MPT 4-8-86 — Accepted	Rejected
Signature / Dated	Signature / Dated
Comments:	Comments:

State of N. J.
Name of Enforcing Agency

Brick
Municipality of

Ocean
County

KEITH GORE OR MARGARET GORE
Name of Owner(s) in Fee

771 SYCAMORE AVE
Address

675-9 — 6
Block — Lot

AFFIDAVIT
in Support of Application
for a Construction Permit and
for a Certificate of Occupancy
Pursuant to N.J.A.C.
5:23-2.5(b) 2:1 and 5:23-2.7(b)3

I am an applicant for:

☐ A Construction Permit
☒ A Certificate of Occupancy

I being the Owner in Fee and being of full age, duly sworn upon my oath depose and say that a new home (~~will be~~) (has been) constructed on this property for personal use and occupancy by me.

I hereby attest that all design, constuction, plumbing or electrical work (will be)(has been) done 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 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.

Margaret M. Gore
Signature

Sworn and Subscribed to
before me this 20 Day of Nov. 19 85

Despina K. Lines

DESPINA K. LINES
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires January 24, 1989

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

STATEMENT OF UTILITY SERVICES

APPLICANT: NAME Kurt Hare TEL. NO. 774-1163

ADDRESS 4 Fremont Drive Hazlet

PROPERTY IN QUESTION:

BLOCK 675-9 LOT(S) 6 ADDRESS Sycamore Drive

BTMUA ACCOUNT NUMBER K12710

SINGLE FAMILY RESIDENTIAL (IN EXISTING SUB-DIVISIONS ONLY)

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

CONNECTION WILL BE PROVIDED AS FOLLOWS:

WATER Sycamore Dr. (STREET)

SEWER Sycamore Dr. (STREET)

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

ALL OTHER DEVELOPMENT

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

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

DATE: 6-20-84 SIGNED: Kurt Hare

NOTE: STATEMENT GOOD FOR 90 DAYS ONLY

1700

S.A.

UTILITY SERVICES FOR NEW HOMES

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

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

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

   APPLICATIONS WITHOUT THE SIGNED SIZING SHEET WILL NOT BE ACCEPTED.

   A DEPOSIT OF $130 IS REQUIRED.

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

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

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

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

6. WATER METER

   A METER AND A REMOTE READOUT WILL BE INSTALLED.

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

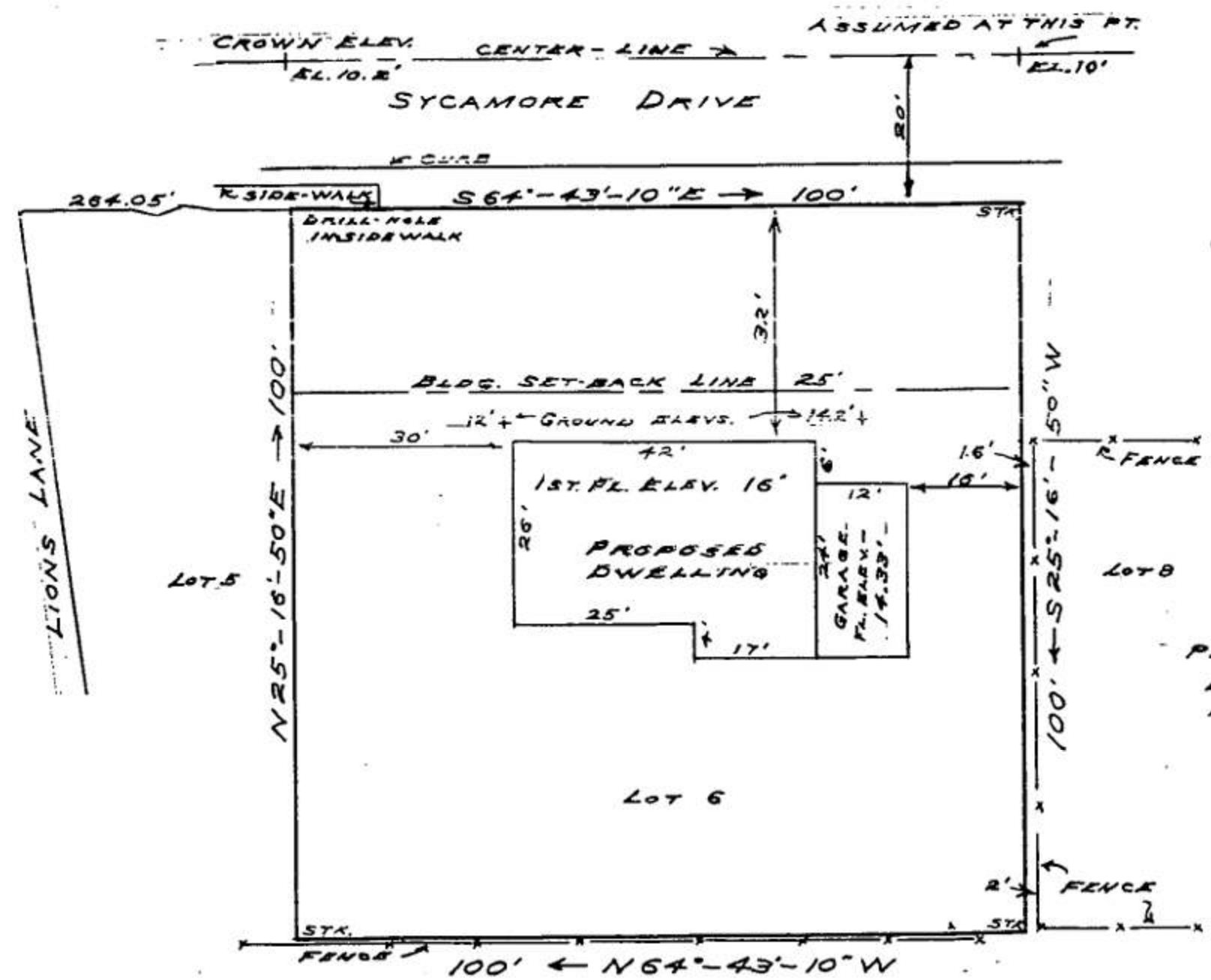
   AFTER ALL INSPECTIONS HAVE BEEN COMPLETED, CALL THE CUSTOMER ACCOUNT DIVISION AT BTMUA TO SCHEDULE THE WATER METER INSTALLATION.

7. CERTIFICATE OF COMPLIANCE

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

8. INITIAL SERVICE CHARGES

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



BEING LOT 6 IN BLOCK 675-9 ON "FINAL MAJOR SUBDIVISION" PLAN LOTS 14 THROUGH 22, BLOCK 673-14, LOTS 3 THROUGH 8 BLOCK 675-9, BRICK TOWNSHIP, OCEAN COUNTY, DATED- SEPT. 26, 1975. PREPARED BY ELBERT MORRIS, LAND SURVEYOR.

ROBERT A. SUMMERS - SURVE
NEW JERSEY LICENSE 739

To obtain a construction permit, application for a permit shall be made by the owner, agent licensed engineer, architect or plumber, electrical or other contractor employed in connect with the proposed work. If the application is by a person other than the owner, the owner must submit a notarized affidavit authorizing the applicant to sign for him. The following must be submitted to be approved by the Division of Inspections.

Tomorrow

1. Get your "Certificate of Availability" from BTMUA. The purpose of this form is to inform the public of utilities available, thus preventing a duplication of cost on individual systems.

2. Two sets of building plans are required. If drawn by the owner each page must bear his signature and affidavit is signed and notarized stating that he has drawn his own plans. All engineering plans and computations shall bear the seal and signature of the licensed engineer or registered architect responsible for the design. Plans for buildi shall indicate how required structural and fire resistance rating will be maintained fo penetrations made for electrical, mechanical, plumbing and communication conduits, pipe and systems. Building plans and specifications shall contain foundation, floor, roof, and structural plans; door, window and finish schedules; details, connections and material designations.

3. Two sets of plumbing applications must be filled out by whoever is doing the plumbing, with isometric drawings on the back of the application. Plumbing plans and specificati shall contain floor plan, fixtures, pipe sizes and other equipment and materials, isometric and pipe sizes, fixture schedule and sewage disposal...

4. If going for a septic system, submit all four (4) copies of system design from the engineer to Ocean County Health Department.

5. For residential specifications the following must be submitted for electrical work: 1. Floor and ceiling plans, 2. Lighting (including switching), receptacles, motors and equipment, 3. Service entry location, wire and breaker sizes.

For Commercial or Industrial plans the following must be submitted: 1. Floor and ceiling plans, 2. Lighting (including switching), receptacles, motors and equipment, 3. Service entry location, wire, conduit and breaker sizes, 4. Panel schedules, 5. Lighting power budget figures per EMS-1, energy subcode. (These are minimum requirements). A one time fee of $10.00 is charged for plan review.

5a. For Commercial and Industrial the following must be submitted for fire protection: 1. Fire grading in hours, 2. Class of building in use group, 3. Sprinkler layout where needed, storage, heater, boiler, furnace and similar use, etc.

6. Certified plot plans must accompany all applications. *See 6a below and 6b on back. (Plots must be prepared by licensed engineer or land surveyor with signature and seal.)

7. Heating plans must be on all plans; duct work on foundation plans and baseboard on floor plans. Where furnace is involved, submit furnace specification sheet. Mechanica plans and specifications shall contain floor or ceiling plans, equipment distribution location, size and flow, location of dampers and safeguards, and all materials. Smoke detectors are required in all new homes.

8. On building lots where existing trees are to be removed for the purpose of construction a Shade Tree Permit must be obtained.

9. On construction plans where an item is optional, please indicate whether it will be included or not. If not indicated it will cause a delay in permit being issued.

10. Specify on application whether the dwelling will have a crawl space, basement or slab.

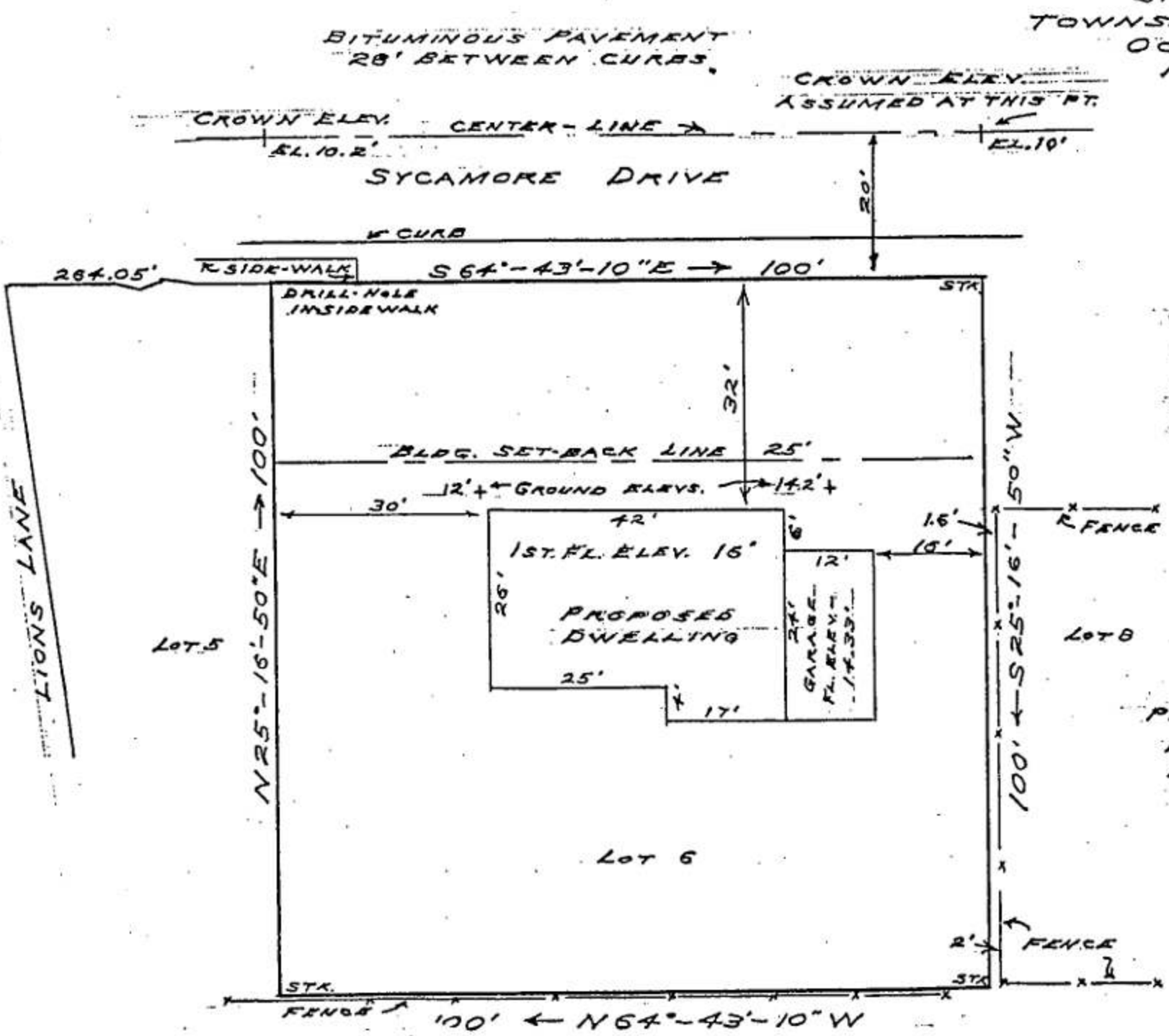
11. KEEP PLANS OF THE DWELLING ON THE JOB SITE AT ALL TIMES!!!

12. Get energy package from architect. CALL TONIGHT

13. Submit statement to the Division of Inspections that applicant has notified the New Jersey Gas Company in regards to excavation for construction.

SURVEY OF PROPERTY
SITUATE IN
TOWNSHIP OF BRICK
OCEAN COUNTY
NEW JERSEY

SCALE: 1" = 2



CERTIFIED TO:

KEITH GORE AND
MARGARET M. GO
OWNERS, TRIDE
ABSTRACT COMP

Robert A. Lum

PROPOSED DRAINA
DOWNSPOUTS & SP
PANS, AFTER FINI
GRADING.

BEING LOT 6 IN BL ."FINAL MAJOR