C28-15

BLOCK 1422.07 LOT 15 ADDRESS (SITE) 742 Tall Oaks Drive PERMIT NO. 98-1517

Brick, N.J.

4.15.98

CONSTRUCTION PERMIT APPLICATION

UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Proposed Work-site at: 742 TALL OAKS DRIVE, BRICK, N.J.
2. Name of Owner Mr.& Mrs. M. Maguire T [redacted]
   Address 742 TALL OAKS DRIVE (street) Brick, N.J. (municipality) 08724 (zip code)
3. Ownership Public _____ Private XXXX
4. Principal Contractor: M&E ASSOCIATES Tel. (732) 929-1991
   Address 742 TALL OAKS DRIVE, BRICK, N.J. 08724
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp No. 22-2671051 Social Security No. _____
5. Architect or Engineer H. Hengchua, Architect Tel. (732) 240-4183
   Address 411 Main Street, Toms River, N.J.
6. Responsible Person in Charge of Work M&E ASSOCIATES Tel. (732) 929-1991

685 Aurora Ct T.R 08753

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 150.-	80.-	
2. Electrical			
3. Plumbing	75.-		
4. Fire Protection	127.-		
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee	10.-		
10. Subtotal	$		
11. Cert. of Occupancy	35.-		
12. Other PPP	$30.		
13. TOTAL	$ 427.-	80.-	

CK 9174

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	2	
2. Height of Structure	26' ft.	
3. Area–Largest Floor	2745 sq. ft.	
4. New Building Area	545 sq. ft.	
5. Volume of New Structure	5995 cu. ft.	
6. Construction Classification		
7. Total Land Area Disturbed	sq. ft.	
8. Flood Hazard Zone		
9. Base Flood Elevation	ft.	
10. Wetlands yes	sq. ft.	
no		
11. Max. Live Load		
12. Max. Occupancy Load		

II. PROPOSED WORK

ADDN. 2nd floor

	Est. Cost
1. ☐ Minor work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☑ Addition	15,600.
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☑ Plumbing	4000.-
8. ☑ Electrical	2600
9. ☐ Elevator Devices	
10. ☐ Asbestos Abatement	
11. ☐ Demolition	
TOTAL COSTS	23,000.-

OPTIONAL (for office use only)

	Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
	WP	4/15/98		5/6/98	JC	4/21/98		
	Revised 4/28/98			5/5/98	JC	8/21/98		
				5-10-98				
				5/8/98		8/10/98		
	Cwo	5/4/98		5/5/98				

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 1
After Construction 1
Net gain or loss 0

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

LDS BR 10519228

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

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

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

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

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

Signature _____ Date _____

II. AGENT SECTION

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

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

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

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

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

(✓) Check if contractor.

Agent Name M & E Associates

Address 685 PRINCESS COURT
TOMS RIVER, NJ 08753

Telephone (732) 969-1991

Signature _____ Date 4/1/98

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									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☐									
☐									

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.				

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/22/98
Control #
Permit # 98-1517

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1422.07 Lot 15 Qual
Work Site Location 742 TALL OAKS DR
2ND FLOOR ADDITION
Owner in Fee/Occupant MAGUIRE MATT
Address SAME
BRICK, NJ 08724-
Telephone [redacted]
Contractor M & E ASSOCIATES
Address 685 PRINCESS CT
TOMS RIVER, NJ 08753-
Telephone (732)929-1991 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2671051

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R-3
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

2ND STORY ADDITION

[ ] 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 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

[X] 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.

[ ] 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.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ___ or the owner will be subject to fine or order to vacate:

[ ] 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 _____, ___.

CONSTRUCTION OFFICIAL
U.C.C. F260 (rev. 3/96)

Fee $ 35
Paid [X] Check No. 9174
Collected by: CS

PERMIT UPDATE

Date Update Issued 7/8/98
Control #
Permit #
Date Permit Issued 98-1517-A

IDENTIFICATION Block 1422.07 Lot 15
Work Site Location 742 TALL OAKS DR
BRICK
Owner in Fee MAGUIRE
Address
Tele. ( ) [redacted]

Contractor GENESIS ELECTRIC
Address 1100 MIZZEN AVEN
BEACHWOOD NJ
Tele. ( ) 286 1586
Lic. No. or Bldrs. Reg. No. 5841
Federal Emp. No.
or Social Security No. [redacted]

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER
[✓] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

Estimated Cost of Work $ 3000

J. Cuniaga
CONSTRUCTION OFFICIAL

PAYMENTS **(Office Use Only)**

Building	
Electrical	X0
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	X0.
Check No.	
Cash	
Collected By:	

U.C.C. Form F-190B

1 WHITE – INSPECTOR COPY 2 CANARY – OFFICE COPY 3 PINK – OFFICE COPY 4 GOLD – APPLICANT COPY

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 05/22/98
Control #
Permit # 98-1517

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 1422.07 Lot 15

Work Site Location 742 TALL OAKS DR
2ND FLOOR ADDITION
Owner in Fee MAGUIRE MATT
Address SAME
BRICK, NJ 08724-
Telephone [redacted]

Contractor M & E ASSOCIATES
Address 685 PRINCESS CT
TOMS RIVER, NJ 08753-
Telephone (732)929-1991
Lic. No. or Bldrs. Reg. No. _____ Exp. Date / /
Federal Emp. No. 22-2671051
or Social Security No. _____

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

DESCRIPTION OF WORK:
2ND STORY ADDITION

PAYMENTS (Office Use Only)

Building	150
Electrical	0
Plumbing	75
Fire Protection	127
Elevator Devices	0
Other	
DCA Training Fee	10
Cert. of Occ.	35
Other ZREP # 427	30
Total	~~397~~
Check No.	9174
Cash	
Collected By:	CS

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 $ 20,700

Joe Conway / Frank Mc

CONSTRUCTION OFFICIAL

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 04/28/98
Date Issued 5-12-98
Control # C28-15
Permit # 98-1517

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

Block 1422.07 Lot 15
Work Site Location 742 TALL OAKS DR
2ND FLOOR ADDITION
Owner in Fee MAGUIRE MATT
Address SAME
BRICK, NJ 08724-
Tel [redacted]
Contractor WILLIAM HANNAGAN
Address 72 RIVERVIEW AVE
LITTLE SILVER, NJ 07739-
Tele.(732)747-3040
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. ~~74-73010~~ 223424196
or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-3
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 5,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 5-20-98
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] TCO [X] CA
Approved By:
Date: 6-24-98

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
~~Slab~~ under deck			6-29-98	DN
Rough			7-1-98	DN
Water				
Sewer				
Fixtures			8-24-98	DN
Gas Equip.				
Gas Piping			6-24-98	DN
Solar				
TCO				

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.

Signature-Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
1	Shower	10
0	Floor Drain	0
1	Sink	10
0	Dishwasher	0
0	Drinking Fountain	0
1	Washing Machine	10
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Grease Trap	0
0	Water Cooled A/C or Refrigeration Unit	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Active Solar System	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 75
DCA Training Fee $ 0

Seal is on attached copy.

U.C.C. Form F-130B

UPDATE

SUBCODE
TECHNICAL SECTION

Date Issued 2/8/96
Control #
Permit # 114-96

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

Block 12 22.07 Lot 15
Work Site Location 742 Tall Oaks Drive.

Owner in Fee Matt Maguire
Address Same as above

Tele. ([redacted])
Contractor William J. Brannagan Plumbing & Heating
Address 72 Riverview Ave Little Silver N.J. 07739

Tele. (908) 747-3040
Lic. No. 9351
Federal Emp. No. 22-3424196 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [✓] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other Pool Heater (gas line)
Location:
Total Est. Cost of Fire Prot. Work $ 1500.00 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date: 3/6/96
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

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

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

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

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

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER Heater		33

Administrative Surcharge $ 33-
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 04/28/98
Date Issued 5/28/98
Control # C28-15
Permit # 98-1517

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

Block 1422.07 Lot 15
Work Site Location 742 TALL OAKS DR
2ND FLOOR ADDITION
Owner in Fee MAGUIRE MATT
Address SAME
BRICK, NJ 08724-
Tel. [redacted]
Contractor M & E ASSOCIATES
Address 685 PRINCESS CT
TOMS RIVER, NJ 08753-
Tele.(732)929-1991
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2671051
or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed R-3
Construction Class Present Proposed
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location: ATTIC
Total Est Cost of Fire Prot. Work $ 100 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[X] Fire Plans Approved
Date: 5/5/98
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 8-27-98
Approved By:

INSPECTIONS Type	Failure	Dates (Month/Day) Failure	Approval	Initial
Suppr Test				
F-Alarm Tst			8-27-98	
Smoke Test				
Mechanical				
TCO				
Other		8-20-98		KCB
Other				
Other				

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of record and am authorized to make this application.
SIGNATURE

See Back

D. TECHNICAL SITE DATA

Description of Work

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

Flammable Liquid Storage Tanks	( ) Capacity 0	Fuel	
Combustible Liquid Storage Tanks	( ) Capacity 0	Fuel	
L.P.G. Storage Tanks	( ) Capacity 0	Fuel	
L.N.G. Storage Tanks	( ) Capacity 0	Fuel	

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	0	
Dry Sprinkler Heads	0	
TOTAL	0	0
Smoke Detectors (Interconnected to Existing AC DC)	2	
Heat Detectors	0	
TOTAL	2	35
Stand Pipes	0	0
Kitchen Hood Exhaust Systems	0	0
Pre-Engineered Systems		
CO2 Suppression	0	0
Halon Suppression	0	0
Foam Suppression	0	0
Dry Chemical	0	0
Wet Chemical	0	0
Gas or Oil Fired Appliance	1	46
Other FURNACE		46
Other		0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 127
DCA Training Fee $ 0

U.C.C. Form F-140B

DUPLICATE

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 04/28/98
Date Issued 5/12/98
Control # C28-15
Permit # 98-1517

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

Block 1422.07 Lot 15
Work Site Location 742 TALL OAKS DR
2ND FLOOR ADDITION
Owner in Fee MAGUIRE MATT
Address SAME
BRICK, NJ 08724-
Tele [redacted]
Contractor M & E ASSOCIATES
Address 685 PRINCESS CT
TOMS RIVER, NJ 08753-
Tele.(732)929-1991
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2671051
or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed R-3
Construction Class Present Proposed
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location: ATTIC
Total Est Cost of Fire Prot. Work $ 100 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[X] Fire Plans Approved
Date: 5/5/98
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppr Test				
F-Alarm Tst				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

C. CERTIFICATION IN LIEU OF OATH

D. TECHNICAL SITE DATA

Description of Work

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

Flammable Liquid Storage Tanks	( ) Capacity	0	Fuel	
Combustible Liquid Storage Tanks	( ) Capacity	0	Fuel	
L.P.G. Storage Tanks	( ) Capacity	0	Fuel	
L.N.G. Storage Tanks	( ) Capacity	0	Fuel	

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	0	
Dry Sprinkler Heads	0	
TOTAL	0	0
Smoke Detectors (interconnected to Existing AC DR)	2	
Heat Detectors	0	
TOTAL	2	35
Stand Pipes	0	0
Kitchen Hood Exhaust Systems	0	0
Pre-Engineered Systems		
CO2 Suppression	0	0
Halon Suppression	0	0
Foam Suppression	0	0
Dry Chemical	0	0
Wet Chemical	0	0
Gas or Oil Fired Appliance	1	46
Other FURNACE		46
Other		0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 127

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received 7/8/98
Date Issued
Control #
Permit # 98-1519+A

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

Block 1422.07 Lot 15
Work Site Location #742 TALLOAKS DR
BRICK
Owner in Fee/Occupant MATT MAGUIRE
Address
Tele. ( ) [redacted]
Contractor GENESIS ELECTRIC
Address 1200 MIZZEN AVE
BEACHWOOD NJ
Tele. ( ) 286 1586 Fax ( ) 349 0127
Lic. No. 9841
Federal Emp. No. 156 42 4098

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as addition 2nd floor Utility Co.
Est. Cost of Elec. Work $ 3000.

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[X] Elec. Plans Approved
Date: 7-9-98
Approved by:

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 990910
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough			980713	
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			980910	

Dates (Month/Day)

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
13		Lighting Fixtures	
14		Receptacles	
5		Switches	
1		Detectors	
		Light Poles	
2	PADDLE	Motors—Fract. HP	
	A/H	Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		.....	
34		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
1	60	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		.....	
		.....	

Administrative Surcharge $ 80.-
Minimum Fee $
DCA Training Fee $
TOTAL FEE $

fee please

U.C.C. F120 (rev. 3/96)

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

PLUMBING 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 1422.07 Lot 15
Work Site Location 742 TALL OAKS DRIVE
BRICK, N.J. 08724
Owner in Fee MR. & MRS. M. MAGUIRE
Address 742 TALL OAKS DRIVE
BRICK, N.J. 08724
Tele. [redacted]
Contractor William J. Brannagan Plg & Htg INC.
Address 72 Riverview Ave Little Silver
N.J. 07739
Tele. (732) 747-3040 Fax (732) 747-5308
Lic. No. 9351
Federal Emp. No. 22-3424196

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size 4" Public Sewer ✓ Private Septic _____
Water Service Size 1 Public Water ✓ Private Well _____
Est. Cost of Plumbing Work $ 5,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: _____
Approved by: _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO _____				

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT
1	Water Closet
	Urinal/Bidet
	Bath Tub
1	Lavatory
1	Shower
	Floor Drain
1	Sink
	Dishwasher
	Drinking Fountain
1	Washing Machine
	Hose Bibb
	Water Heater
	Fuel Oil Piping
1	Gas Piping - Dryer
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
	Sewer Connection
1	Water Service Connection
	Stacks
	Other _____
	Other _____
	Other _____

FEE (Office Use Only)
$ _____

Administrative Surcharge $ _____
Minimum Fee $ _____
DCA Training Fee $ _____
TOTAL FEE $ _____

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 J Brannagan
Signature — Contractor's Seal

[✓] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. F130
(rev. 3/98)

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 04/28/98
Date Issued 5/12/98
Control # C28-15
Permit # 98-1510

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

Block 1422.07 Lot 15
Work Site Location 742 TALL OAKS DR
2ND FLOOR ADDITION
Owner in Fee MAGUIRE MATT
Address SAME
BRICK, NJ 08724-
Tele [redacted]
Contractor M & K ASSOCIATES
Address 685 PRINCESS CT
TOMS RIVER, NJ 08753-
Tele.(732)929-1991
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2671051
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

2ND STORY ADDITION

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	5/6/98	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame	7/7/98		7/7/98	JKC
Insulation	7/17/98 typo		7/17/98 w/ letter	JKC
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final	9/28/98	JKC	9/2/98	JKC
	9/15/98	JKC		

TYPE OF WORK

		FEE (Office Use Only)
[ ] New Building		$ 0
[X] Addition		150
[ ] Alteration		0
[ ] Roofing		
[ ] Siding		
[ ] Fence 0	Height (6' or over)	0
[ ] Sign 0	Sq. Ft.	0
[ ] Pool		0
[ ] Asbestos Abatement		0
[ ] Other		0
Other		0
[ ] Demolition		0

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed R-3	
Constr. Class	Present	Proposed	
No. of Stories		2	
Height of Structure		26	Ft.
Area Largest Floor		2,395	Sq. Ft.
New Bldg. Area/All Floors		545	Sq. Ft.
Volume of New Structure		5,995	Cu. Ft.
Total Land Area Disturbed		0	Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 15,600
2. Alteration $ 0
3. Total (1+2) $ 15,600

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 150
DCA Training Fee	$ 10

U.C.C. Form F-110B

BLOCK 1422.07 LOT 15 SITE LOCATION 742 Tall Oaks Drive, Brick, N.J.

BUILDING INSPECTION

Contractor M & E Associates
Address 685 Princess Ct Phone (732) 929-1991
Town Toms River State NJ Zip 08753
LIC # _____ FEDERAL EMP. NO.(or SSN#) 22-2671051

ESTIMATED COST OF BUILDING WORK

NEW BUILDING (1) $_____ ALTERATION (2) $_____
ADDITION (3) $ ✓ TOTAL (1+2+3) $_____

BUILDING CHARACTERISTICS

✓ ADDITION or SINGLE FAMILY DWELLING

USE GROUP	PRESENT R3	PROPOSED R5
CONSTRUCTION CLASS	PRESENT	PROPOSED
NO. OF STORIES 2	HT. OF STRUCTURE	FT.
AREA: LARGEST FLOOR	2395	SQ. FT.
TOTAL BLDG. AREA: ALL FLOORS		SQ. FT.
VOLUME OF STRUCTURE		CU. FT.
TOTAL LAND AREA DISTURBED		SQ. FT.

TYPE OF WORK

TYPE OF WORK		COST	MISC.		COST
NEW BLDG.			FENCE Ht.		
ADDITION			SIGN Sq. Ft.		
ALTERATION			POOL		
ROOFING			ASBESTOS ABATEMENT		
SIDING			DCA		
DEMOLITION			TOTAL		

DESCRIPTION OF WORK

COMMENTS Addition

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.
SEAL & SIGNATURE James E Elliott

PLUMBING INSPECTION

Contractor William J. Deranger Plumb. & Heat.
Address 72 Georgetown Rd Phone (732) 747-3040
Town Little Silver State NJ Zip 07739
LIC # _____ FEDERAL EMP. NO. (or SSN#) _____

ESTIMATED COST OF PLUMBING WORK: $ 5000.00

Sewer Size 4" Water Size 1"

TECHNICAL SITE DATA (List all Fixtures)

NO.	FIXTURE/EQUIPMENT		NO.	FIXTURE/EQUIPMENT	
1	Water Closet			Steam Boiler	
	Urinal / Bidet			Hot Water Boiler	
	Bath Tub			Sewer Pump	
1	Lavatory			Interceptor/Separator	
1	Shower			Backflow Preventer	
	Floor Drain			Grease Trap	
1	Sink	✓		Water Cooled A/C or Refrigeration Unit	
	Dishwasher				
	Drinking Fountain			Sewer Connection	
1	Washing Machine			Water Service Connection	
	Hose Bibb			Active Solar System	
	Water Heater			Other	
	Fuel Oil Piping			Other	
1	Gas Piping - Dryer			Other	

DESCRIPTION OF WORK

COMMENTS Seal is on attached application

Seal attached

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.
SEAL & SIGNATURE (Contractor's Seal) _____

FIRE INSPECTION

Contractor M & E Associates
Address 685 Princess Ct Phone (732) 929-1991
Town Toms River State NJ
LIC # _____ FEDERAL EMP. NO. (or SSN#) 22-2671051

ESTIMATED COST OF FIRE PROT. WORK: $_____
Heating Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar
Heating System: ☐ New ☒ Existing
Location of Furnace / Boiler Attic

TECHNICAL SITE DATA (Description of Work)

WATER SUPPLY SOURCE Public
METHOD OF VALVE SUPERVISION
LOCAL ALARM SUPERVISION
CENTRAL SUPERVISION
PROPRIETARY SUPERVISION
Flammable Liquid Storage Tanks ☐ Capacity _____ F
Combustible Liquid Storage Tanks ☐ Capacity _____ F
L.P.G. Storage Tanks ☐ Capacity _____ F
L.N.G. Storage Tanks ☐ Capacity _____ F

NO.	ITEM	NO.	ITEM
	Wet Sprinkler Heads		Pre-Engineered S
	Dry Sprinkler Heads		CO_2 Suppressio
	TOTAL		Halon Suppressi
2	Smoke Detectors	1	Foam Suppressi
	Heat Detectors		Dry Chemical
	TOTAL		Wet Chemical
	Stand Pipes	1	Gas or Oil Fired
	Kitchen Hood Exhaust System		Other furnace

DESCRIPTION OF WORK

COMMENTS Warm Air Furnace in attic 4/27/98 JE

CERTIFICATION IN LIEU OF OATH

I HEREBY CERTIFY THAT I AM THE (AGENT OF) OWNER OF RECOR AUTHORIZED TO MAKE THIS APPLICATION AND PERFORM THE W ON THIS APPLICATION.
SEAL & SIGNATURE (Contractor's Seal) _____

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: April 28, 1998 1998 - 0557

Block 1422.07 Lot 15 Zone R-20

Property Address: 742 Tall Oaks Drive

Owner: Matthew and Karen Maguire (Phone) [redacted]

Applicant: Same (Phone): Same

Existing Use: Single-family dwelling.

Proposed Use: Single-family dwelling.

Proposed Construction (if any): Second-floor addition over existing attached garage.

18' by 27'4" by 26' high.

Conditions: The addition must be setback at least 40 feet from the property line at Tall Oaks Drive.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Municipal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK

Zoning Permit Application

(Please Type or Print Neatly)

BLOCK 1422.07 **LOT** 15

PROPERTY ADDRESS 742 Tall Oaks Drive, Brick, N.J.

NAME OF OWNER Matthew and Karen Maguire, Jr. **OWNER'S PH** [redacted]

NAME OF APPLICANT Matthew and Karen Maguire, Jr.

APPLICANT'S COMPLETE ADDRESS 742 Tall Oak Drive, Brick, N.J. 08724

APPLICANT'S PHONE NUMBER (732) 840-1977 **APPLICANT'S BUSINESS NAME** N/A

PRESENT USE OF PROPERTY (check one)

- ☐ Vacant Lot ☒ Single Family Dwelling ☐ Condo or Apartment
- ☐ Commercial (please describe) _____
- ☐ Other (please describe) _____

PROPOSED USE OF PROPERTY (check one)

- ☐ Vacant Lot ☒ Single Family Dwelling ☐ Condo or Apartment
- ☐ Commercial (please describe) _____
- ☐ Other (please describe) _____

PROPOSED CONSTRUCTION Bedroom Addition 2nd floor over exist. garage

All Dimensions	18' 0" **W**	27' 4" **L**	+/- 26' **Ht** overall
Deck or Garage	☐ **Attached**	☐ **Detached**	
Fence	**Type** _____		**Ht** _____

CHECKLIST:

- ☐ **All information completed above**
- ☐ **Two (2) accurate Survey / Plot Plans containing:**
  - ☐ **all existing and proposed structures**
  - ☐ **all dimensions of lot and structures**
  - ☐ **set backs to all property lines**
  - ☐ **all streets and waterways shown**
- ☐ ***If approved by Planning Board or Board of Adjustments, include copy of resolution***

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

Signature of Applicant Matthew + Karen Maguire Jr. **Date** April 9, 19

Reviewed by Zoning Officer **Date** 4/28/98 ☒ **Approved** ☐ **Rejected**

CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block 1422.07 Lot 15

Work Site Location 742 Tall Oaks Drive
Brick, New Jersey 08724

Owner in Fee Mr.& Mrs. M. Maguire

Address 742 Tall Oaks Drive
Brick, N.J. 08724

Tele. [redacted]

Contractor M&E Associates

Address 685 Princess Court -
Toms River, N.J. 08753

Tele. (732) 929-1991

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

Federal Emp. No. 22-2671051

or Social Security No. _____

Is hereby granted permission to perform the following work:

[✓] BUILDING [✓] PLUMBING [ ] OTHER _____

[✓] ELECTRICAL [ ] FIRE PROTECTION

[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

ADDITION - SEE PLANS.

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 $ _____

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	
Check No.	
Cash	
Collected By:	

(see reverse side)

U.C.C. Form F-170C

1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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

Joseph C. Scarpelli, Mayor

Township Council:
Victor Cantillo – President
Martin J. Anton
Helen Fayad
Gregory S. Kavanagh
Mary Lou Powner
Kathy M. Russell
Frederick J. Underwood, Sr.

Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
http://www.gbshost.com/brick

DATE April 9, 1998

Municipal Engineer
401 Chambers Bridge Road
Brick, New Jersey 08723

RE: Block 1422.07 Lot 15

Dear Sir:

I, Matthew J. Maguire, Jr. of 742 Tall Oaks Drive, Brick, N.J.*
(Name) (Address)

request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book, Chapter 190.31, part B. The property (please circle one) is / is not located in a flood zone.

Respectfully yours,

Matthew & Trish Maguire Jr. (732) 840-1977
Applicant's Signature **Phone #**

1. **Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.**

2. **Proof that the property is not located in a Flood Hazard Area.**

NOTE: Any excavations to be removed from the Township requires a mining permit.

OFFICE USE

Approved OK **Date** 5/5/98 **BY** _____

Rejected **Date** _____ **BY** _____

REMARKS: _____

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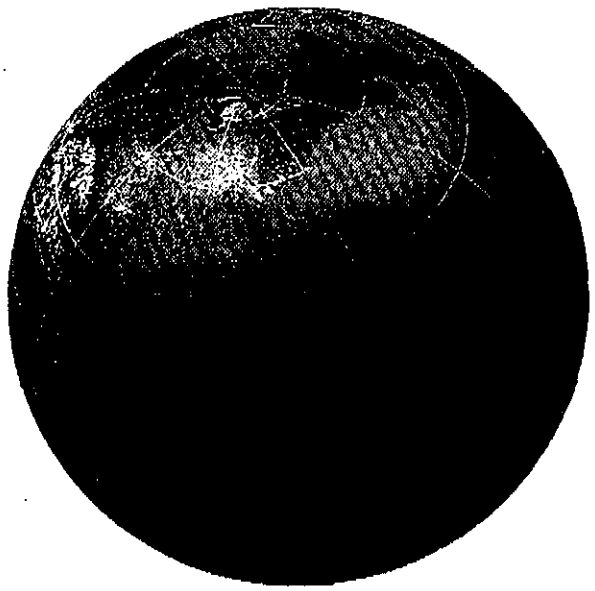

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Form No. NCP 1013A 12/96

BLOWER PERFORMANCE – UPFLOW CONFIGURATION – ONE SIDE RETURN

Furnace GMB05012AXD, GMB05012AXU, GMB07512AXD, GMB07512AXU

STANDARD CFM AT EXTERNAL STATIC PRESSURE								
Blower Speed	.1	.2	.3	.4	.5	.6	.7	.8
High	1338	1309	1267	1220	1144	1070	987	892
Medium	1106	1092	1081	1048	999	938	874	790
Low	863	860	859	845	804	764	718	651

Motor HP: 1/3 FLA 5.2 Impellor Size: 10–5/8 x 8

Furnace GMB07516AXD, GMB07516AXU, GMB10016AXD, GMB10016AXU

STANDARD CFM AT EXTERNAL STATIC PRESSURE								
Blower Speed	.1	.2	.3	.4	.5	.6	.7	.8
High	1701	1654	1619	1569	1495	1424	1333	1229
Medium High	1524	1509	1468	1419	1350	1268	1176	1053
Medium Low	1306	1300	1279	1260	1216	1156	1075	963
Low	1107	1132	1136	1111	1081	1024	963	871

Motor HP: 1/2 FLA 5.2 Impellor Size: 10–5/8 x 10–5/8

Furnace GMB010020AXD, GMB010020AXU, GMB12520AXD, GMB12520AXU

STANDARD CFM AT EXTERNAL STATIC PRESSURE								
Blower Speed	.1	.2	.3	.4	.5	.6	.7	.8
High	2020	1927	1816	1733	1602	1491	1343	1201
Medium High	1650	1586	1450	1361	1347	1307	1208	995
Medium Low	1440	1428	1368	1310	1226	1144	1041	919
Low	1321	1308	1266	1224	1165	1069	963	866

Motor HP: 3/4 FLA 9.8 Impellor Size: (2) 10–5/8 x 6 All motors are 1100 RPM and have 1/2" shafts.

BLOWER PERFORMANCE – UPFLOW CONFIGURATION – BOTTOM OR BOTH SIDE RETURNS OR HORIZONTAL CONFIGURATION – END RETURN

Furnace GMB05012AXD, GMB05012AXU, GMB07512AXD, GMB07512AXU

STANDARD CFM AT EXTERNAL STATIC PRESSURE								
Blower Speed	.1	.2	.3	.4	.5	.6	.7	.8
High	1407	1367	1315	1279	1211	1138	1053	961
Medium	1141	1130	1092	1059	1009	945	876	782
Low	885	894	881	863	811	782	719	649

Motor HP: 1/3 FLA 5.2 Impellor Size: 10–5/8 x 8

Furnace GMB07516AXD, GMB07516AXU, GMB10016AXD, GMB10016AXU

STANDARD CFM AT EXTERNAL STATIC PRESSURE								
Blower Speed	.1	.2	.3	.4	.5	.6	.7	.8
High	1776	1736	1717	1664	1608	1536	1445	1347
Medium High	1588	1558	1515	1459	1403	1298	1203	1082
Medium Low	1357	1357	1335	1317	1266	1193	1099	990
Low	1151	1146	1124	1102	1052	969	879	860

Motor HP: 1/2 FLA 5.2 Impellor Size: 10–5/8 x 10–5/8

Furnace GMB010020AXD, GMB010020AXU, GMB12520AXD, GMB12520AXU

STANDARD CFM AT EXTERNAL STATIC PRESSURE								
Blower Speed	.1	.2	.3	.4	.5	.6	.7	.8
High	2414	2328	2228	2124	2013	1873	1734	1568
Medium High	1742	1727	1694	1653	1597	1517	1383	1263
Medium Low	1626	1591	1555	1540	1487	1400	1299	1179
Low	1454	1462	1460	1455	1407	1332	1225	1098

Motor HP: 3/4 FLA 9.8 Impellor Size: (2) 10–5/8 x 6 All motors are 1100 RPM and have 1/2" shafts.

NCP

HEATING & COOLING PRODUCTS

10 S.E.E.R. Air Conditioner

A VERSATILE ENERGY EFFICIENT WAY TO

PHYSICAL DATA — OUTDOOR UNITS

MODEL	Compressor Model	Fan Diameter inches	Fan No. of Blades	Fan RPM/ CFM	Outdoor Unit Face Area Sq. Ft.	Outdoor Unit Fins/ Inch	Outdoor Unit Rows Deep	Outdoor Unit Tube Dia.	Unit Dim. LxWxH	Shipping Dimensions LxWxH	Shipping Dimensions Cubic Feet	Shipping Dimensions Ship Wt. Lbs.
BC181	H23B173ABCA*	18	2	1100/1850	8.00	18	1	3/8	35x23x17	36x24x20	10	139
BC241	H23B223ABCA*	18	2	1100/1850	8.00	18	1	3/8	35x23x17	36x24x20	10	144
BC301	CR28K6-PFV**	18	2	1100/1850	8.00	18	1	3/8	35x23x17	36x24x20	10	148
BC301A	H23B28SABCA**	18	2	1100/1850	9.15	22	1	3/8	35x23x19	36x24x22	11	TBD
BC361	CR32KF-PFV**	18	3	1100/2750	9.15	22	1	3/8	35x23x19	36x24x22	11	170
BC421	H23A383ABCA*	18	3	1100/2750	12.58	22	1	3/8	35x23x25	36x24x26	14	182
BC481	H23A423ABCA*	22	3	850/3250	15.72	22	1	3/8	37x27x27	38x28x30	18.5	206
BC601	ZR57KC-PFV**	22	3	830/3400	17.03	22	1	3/8	37x27x29	38x28x32	19.8	230

** *Copeland* * *Bristol*

ELECTRICAL DATA — POWER SUPPLY – 208–230** Volts / 1 Phase / 60 Hz

MODEL	*Running AMPS	*Running WATTS	Compressor RLA	Compressor LRA	Fan HP	Fan FLA	Minimum Circuit AMPS	+Minimum Wire Size 75°C Copper AWG	208V Length FT	230V Length FT	Max Fuse or Circuit Breaker Size AMPS
BC181	7.50	1,690	6.5	54.0	1/12	0.5	12.5	12 10	0–48 49–78	0–55 56–88	20
BC241	10.0	2,330	11.4	57.0	1/12	0.5	15.6	10 8	0–73 74–117	0–83 84–132	25
BC301	13.0	2,850	13.8	75.0	1/12	0.5	17.8	10 8	0–55 56–89	0–61 62–98	30
BC301A	12.0	2,750	13.6	73.0	1/12	0.5	17.5	10 8	0–57 58–91	0–63 64–101	30
BC361	15.4	3,410	16.1	82.0	1/4	1.4	21.5	10 8	0–51 52–81	0–56 57–90	35
BC421	17.80	3,910	19.8	97.0	1/4	1.4	26.1	10 8	0–43 44–68	0–49 50–78	40
BC481	20.2	4,370	23.0	110.0	1/5	1.3	30.1	10 8	0–38 39–60	0–43 44–68	45
BC601	27.7	5,410	28.0	170.0	1/4	1.3	36.3	8	0–39	0–43	60

* @ ARI Conditions — 95°F – Outdoor — 80°F DB / 67°F WB Indoor (Including Blower Watts)

** Voltage Tolerance – ± 10%. Voltage correction factors at 208V: Capacity=0.98, Watts=0.99

+ Other temperature ratings of wire will have different rated ampacities. Refer to NEC for proper wire sizing recommendations. If using type NM or NM-B cable, wires must be sized to 60° C ampacities per NEC Article 336, Section 26. NEC and Local Codes supercede any wiring recommendations made in these specifications.

Line Sizes & Refrigerant Charges

MODEL	Vapor Line Size	Liquid Line Size	Unit Charge – Lbs.	Charge Per Foot – Lbs.
BC181	5/8	3/8	3.80 +	.045
BC241	5/8	3/8	4.15 +	.045
BC301	3/4	3/8	4.35 +	.047
BC361	3/4	3/8	4.75+	.047
BC421	3/4	3/8	5.70 +	.047
BC481	7/8	3/8	7.45 +	.049
BC601	7/8	3/8	8.25 +	.049

+ The Unit Charge is correct for the Outdoor Unit, Matched Indoor Coil and 25 Ft. of Refrigerant Tubing.
For Tubing Lengths other than 25 Ft.: Add or Subtract the amount of refrigerant calculated, using the difference in length multiplied by the per foot value.

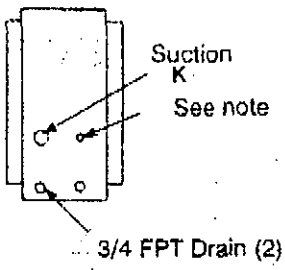
TXV Kits*

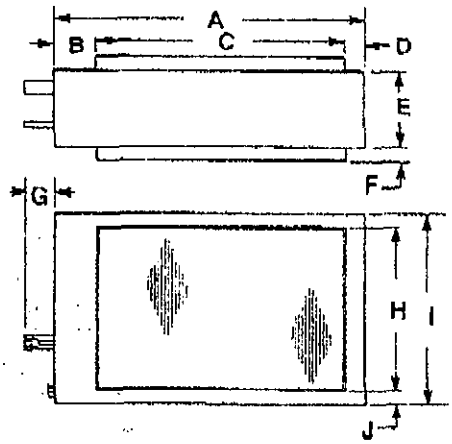
MODEL NUMBER	Type
6916–7271/A	Air Conditioning
6916–7281/A	Air Conditioning
6916–7491	Heat Pump
6919–7261	Air Conditioning
6919–7511	Air Conditioning
6919–7471/A	Heat Pump
6919–7491	Heat Pump
6921–7271	Air Conditioning
6921–7491	Heat Pump
6921–7501	Heat Pump

* See page 1 for TXV kit requirements.

Cased Horizontal Coils

Note: 1/2 Liquid Connection With 1/2 Flare Nut





HORIZONTAL SPECIFICATIONS AND DIMENSIONS																			
UNITS	Coil Slab		Face Area (Sq. Ft.)	HORIZONTAL COIL DIMENSIONS											Rows per Slab	Tube Dia.	Circuits	Fins / Inch	Drain NPT
	H	L		A	B	C	D	E	F	G	H	I	J	K					
H20R24A	20	22 1/2	3.13	27 1/8	3	22	1 7/8	10	1	3 1/2	17 1/2	21	1 3/4	7/8	3	5/16	6	12	3/4
H30R36C	20	29	4.03	33 5/8	3	28	1 7/8	10	1	3 1/2	171/2	21	1 3/4	7/8	3	5/16	6	14	3/4
H30R48D	20	29	4.03	33 5/8	3	28	1 7/8	10	1	3 1/2	17 1/2	21	1 3/4	7/8	4	5/16	8	12	3/4
H32R60E	24	33 3/4	5.63	38 7/8	3	33 3/4	1 7/8	10	1	3 1/2	17 1/2	24 1/2	1 3/4	7/8	4	3/8	8	10	3/4

10 SEER SERIES AIR CONDITIONER DATA SHEET

(4/96)

10 Seer Series

- Cooling Capacities -- 18,000 - 55,500

Description / Application

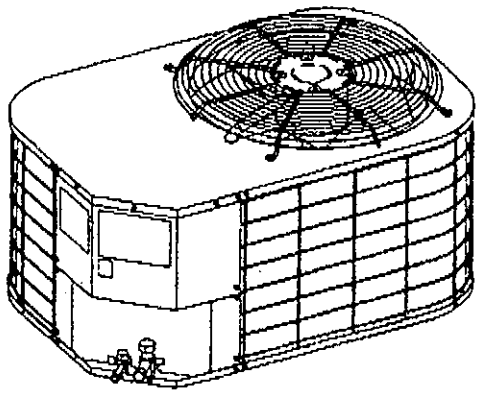
- Split System Cooling Unit
- Upflow, Downflow and Horizontal Applications.

Cabinet Construction

- Casing with pre-painted Polyester Finish and Primer over G90 Galvanized Steel
- 18 Gauge G90 Galvanized Steel Die-Formed Base Pan
- Low Profile Design
- Plastic Coated Coil and Fan Guards

Standard Features

- 10 SEER Efficiency Ratings with State of the Art Compressor for Maximum Cooling Capacity & Efficiency
- All Copper Tube
- Pre-painted Aluminum Fin Coils-Single Row
- Fewer braze joints
- Bell-Mouth Venturi
- Totally Enclosed Fan Motor with Plug-In Connections
- Strip Resistant Fasteners
- Easy Access Plastic Wireway
- Offset Coil Guard
- Easy Access Control Box
- High Voltage Conduit Plate
- Extra Large Capacity Filter Drier
- Brass Shut-Off Valves
- Factory Charged for 25' of refrigerant lines
- Excellent Humidity Control Performance



PERFORMANCE DATA

OUTDOOR UNIT	AIR HANDLER INDOOR COILS	SEER	COOLING CAPACITY	RATED CFM	ORIFICE SIZE or TXV KIT+	TIME DELAY REQUIRED ++
BC181	A08G* U17R24G H20R24A	10	18,000	650	.055	NO
BC241	A08H* U17R30H U20R30B H30R36C MDD30BSA	10	23,600	800	.063	NO
	A24S					YES
BC301	A12K* U17R30K U20R30M H30R36C MDD30MSA	10	29,400	1,000	.067	NO
	A24S					YES
BC361	A12J* U17R36J U20R36C H30R36C MDD42CSA	10	35,000	1,250	.071	NO
	B36S					YES
BC421	A16P*	10	41,000	1,500	.079	NO
	U20R48D U23R48P H30R48D MDD48DSA		40,500	1,400		
	C48S					YES
BC481	A16P*	10	46,500	1,500	.079	NO
	U20R48D U23R48P H30R48D MDD48DSA			1,400		
	C48S					YES
BC601	H32R60E	10	55,500	1,800	6916-7281/A	NO
	U23R60T				.091	
	D60S			1,750		YES

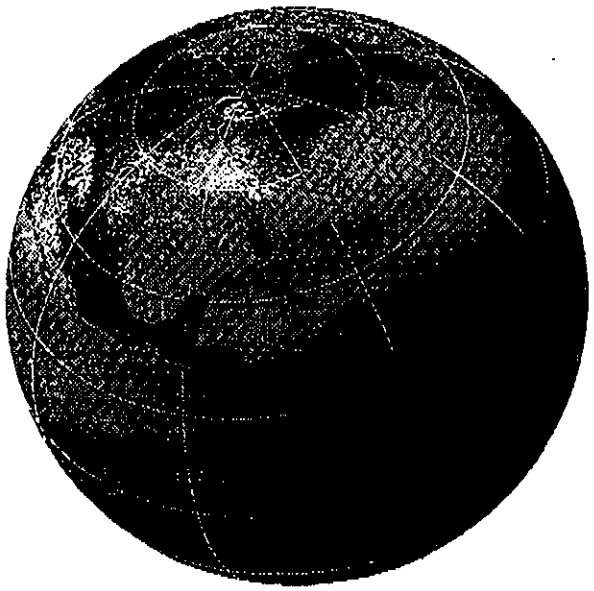
+ For additional TXV kit information, refer to Page 3.

++ Systems matched with Furnaces or Air Handlers other than: GMB, GUB, GDD, GUD, ODF and A08, 12, 14, 16 models: may require add on blower Time Delay Kit #6918A5011.

* Other letters or numbers may follow.

NOTE: All data subject to change without notice. All specifications shown are provided to aid in equipment selection All weights not available at the time

Creating a comfortable world!



HORIZONTAL INDOOR PACKAGED AIR CONDITIONERS from 2 to 15 ton giving you versatility in cooling systems with a single interior package.

10 S.E.E.R. THRU-THE-WALL AIR CONDITIONERS provide benefits where space is a concern.

10 & 11 S.E.E.R. PACKAGED AIR CONDITIONERS deliver dependable cooling in an energy efficient package.

10, 12 & 14 S.E.E.R. AIR CONDITIONERS bring a sleek new look to reliable, energy efficient air conditioners.

OUTDOOR GAS FURNACES offer a space-saving, energy efficient way to heat your home, and combine easily with NCP™ heat pumps or air conditioners for year round heating & cooling comfort.

10 & 12 S.E.E.R. PACKAGED HEAT PUMPS combine energy efficient heating & cooling systems into a single exterior unit.

10, 12 & 14 S.E.E.R. HEAT PUMPS provide high efficiency, year round heating and cooling comfort.

AIR HANDLERS circulate the air quietly and evenly throughout the home.

PACKAGED GAS/ELECTRIC SYSTEMS provide year round comfort with 10 S.E.E.R. electric air conditioning and 80% A.F.U.E. gas heating - all neatly packaged in a single outdoor unit.

78%, 80% & 90%+ A.F.U.E. GAS FURNACES offer dependable, high efficiency heating comfort to homeowners everywhere.

Distributed by United Refrigeration Inc.

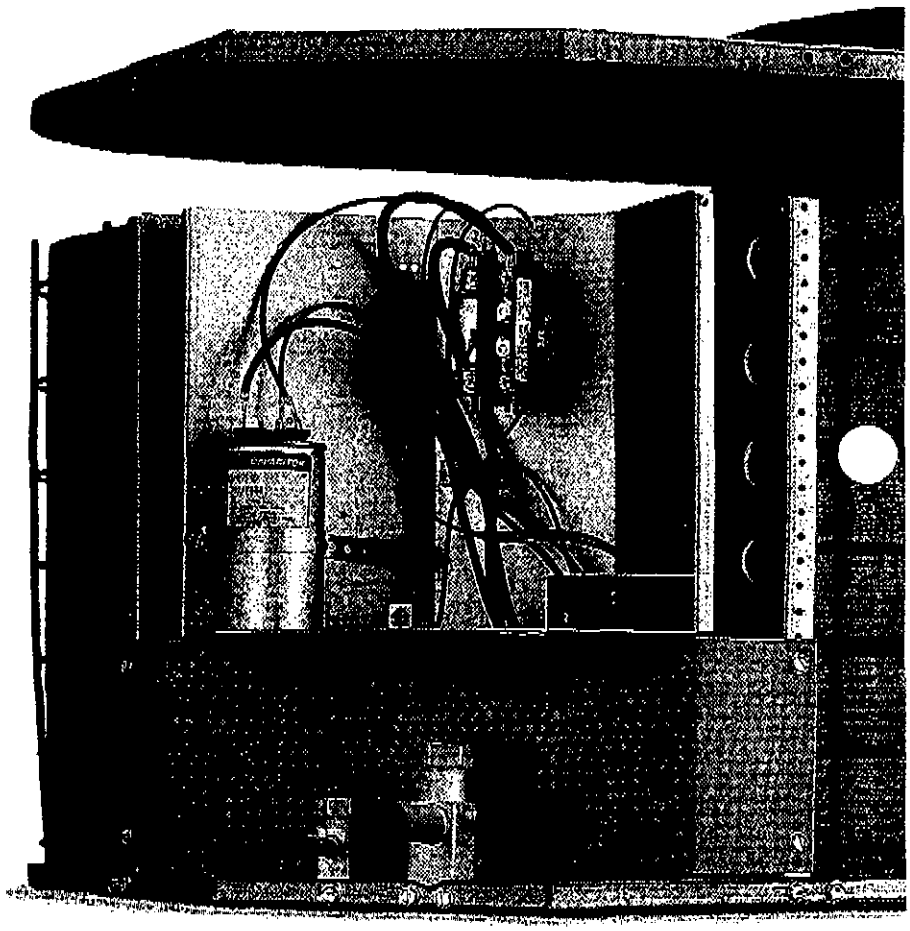
Main Office
11401 Roosevelt Boulevard
Philadelphia, PA 19154

TOLL FREE...1-888-NICEAIR **215-698-9100** **fax 215-464-9135**

Form No. NCP-001A (6/98)

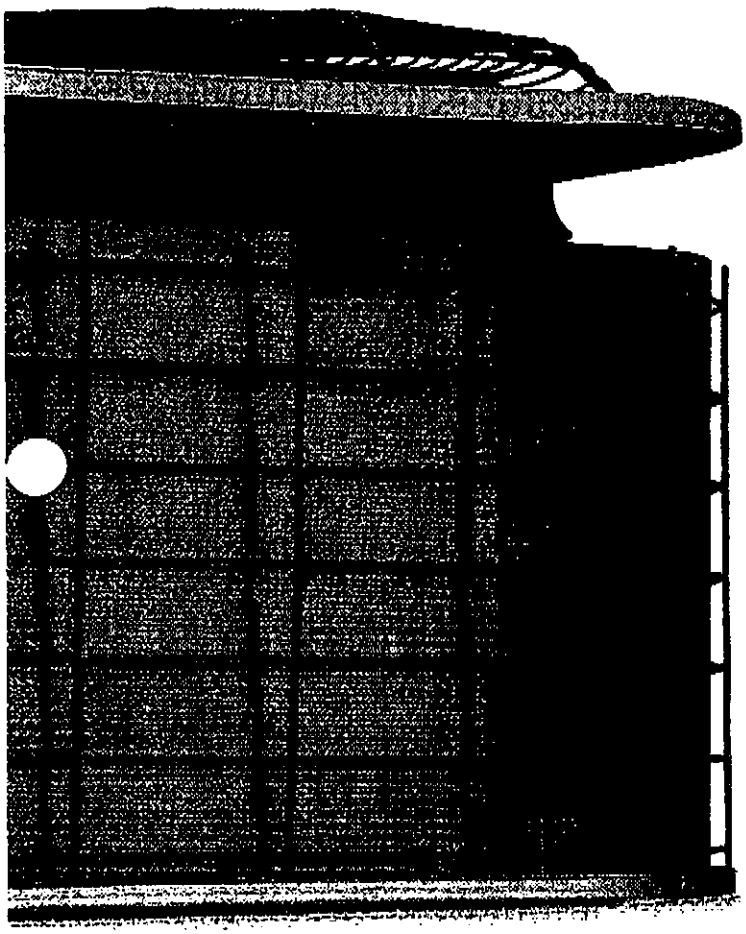
Attractive styling, Affordably priced... reliably built.

Comfort has never looked so good! With its smooth lines and low profile, the NCP™ 10 SEER blends discreetly into the landscaping without detracting from the beauty of your home. And - its economical cost and energy saving reliability make it the ideal air conditioner for budget conscious homeowners.



10 S.E.E.R. Air Conditioner

SEASONAL ENERGY EFFICIENCY RATING

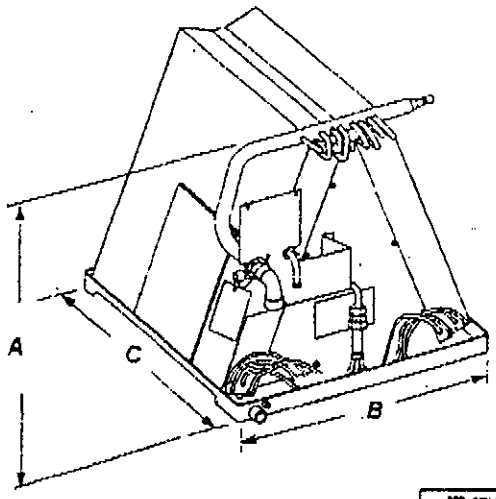


Here are some of the unique features that go into the NCP™ 10 S.E.E.R. Air Conditioner:

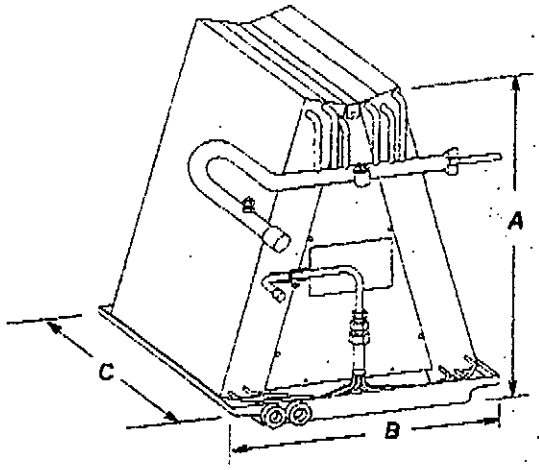
- **HIGH EFFICIENCY COILS** increase efficiency of the unit, lowering operating costs.
- **STATE-OF-THE-ART, HEAVY DUTY COMPRESSOR** provides maximum cooling capacity and energy efficiency.
- **ALL-COPPER TUBING** resists corrosion.
- **FILTER DRIER** prevents build-up of moisture in the system, protecting the compressor.
- **BRASS SERVICE VALVES** make environmentally safe servicing an easy task.
- **BELL-MOUTH, HIGH EFFICIENCY VENTURI DESIGN** lowers power consumption, reduces sound levels, and increases outdoor airflow.
- **FAN MOTOR IS TOTALLY ENCLOSED,** protecting the motor from outside elements and increasing its lifespan to many times that of an open motor.
- **LOW PITCHED FAN BLADES** effectively move large quantities of air very quietly.
- **PLUG-IN FAN MOTOR** plugs into bottom of control box for ease in servicing and cleaning.
- **DESIGN-MATCHED COILS AND FAN** lower operating costs.
- **PVC POWDER-COATED FAN AND COIL GUARDS** are chip-resistant, to preserve the handsome appearance of the unit.

(10 SEER Air Cond. P.3)

NCP



TYPE 1



TYPE 2

A–COIL SPECIFICATIONS AND DIMENSIONS

Letter	Type	Coil Slab		Slab Area (Sq. Ft.)	Overall* Dimensions			Rows per Slab	Tube Diameter	Vapor Header Diameter	Circuits	Fins / Inch
		H	W		A	B	C					
MDD30BSA	1	14	16–1/2	3.21	14–7/8	18–1/4	19–3/4	3	5/16	3/4	6	14
MDD30MSA	1	16	16–1/2	3.67	16–3/4	18–1/4	19–3/4	3	5/16	3/4	6	14
MDD42CSA	1	18	16–1/2	4.13	17–3/4	18–1/4	19–3/4	3	5/16	3/4	6	14
MDD48DSA	1	18	16–1/2	4.13	18–7/8	18–1/4	19–3/4	4	5/16	7/8	8	12
U17R24G	2	12	16–1/2	2.75	14–5/8	16–1/4	20–3/8	2	5/16	3/4	4	14
U17R30H	2	14	16–1/2	3.21	16–3/8	16–1/4	20–3/8	3	5/16	3/4	6	14
U17R30K	2	16	16–1/2	3.67	16–1/2	16–1/4	20–3/8	3	5/16	3/4	6	14
U17R36J	2	18	16–1/2	4.13	18–1/2	16–1/4	20–3/8	3	5/16	3/4	6	14
U17R36L	2	18	16–1/2	4.13	18–5/8	16–1/4	20–3/8	4	5/16	7/8	8	12
U20R30B	2	14	16–1/2	3.21	16	19–3/8	20–3/8	3	5/16	3/4	6	14
U20R30M	2	16	16–1/2	3.67	16–1/8	19–3/8	20–3/8	3	5/16	3/4	6	14
U20R36C	2	18	16–1/2	4.13	18–1/2	19–3/8	20–3/8	3	5/16	3/4	6	14
U20R48D	2	18	16–1/2	4.13	18–3/4	19–3/8	20–3/8	4	5/16	7/8	8	12
U23R48P	2	18	17–3/16	4.30	19	21–3/8	20–3/8	4	5/16	7/8	8	12
U23R42W	2	22	17–3/16	5.26	24	21–3/8	20–3/8	4	3/8	7/8	8	12
U23R60T	2	24	17–3/16	5.73	24	21–3/8	20–3/8	4	5/16	7/8	10	12

Dimensions shown are total overall dimensions required for cabinet enclosure.

NOTE: All liquid line tubing is 3/8" diameter.

- Maguire

NCP™
HEATING & COOLING PRODUCTS

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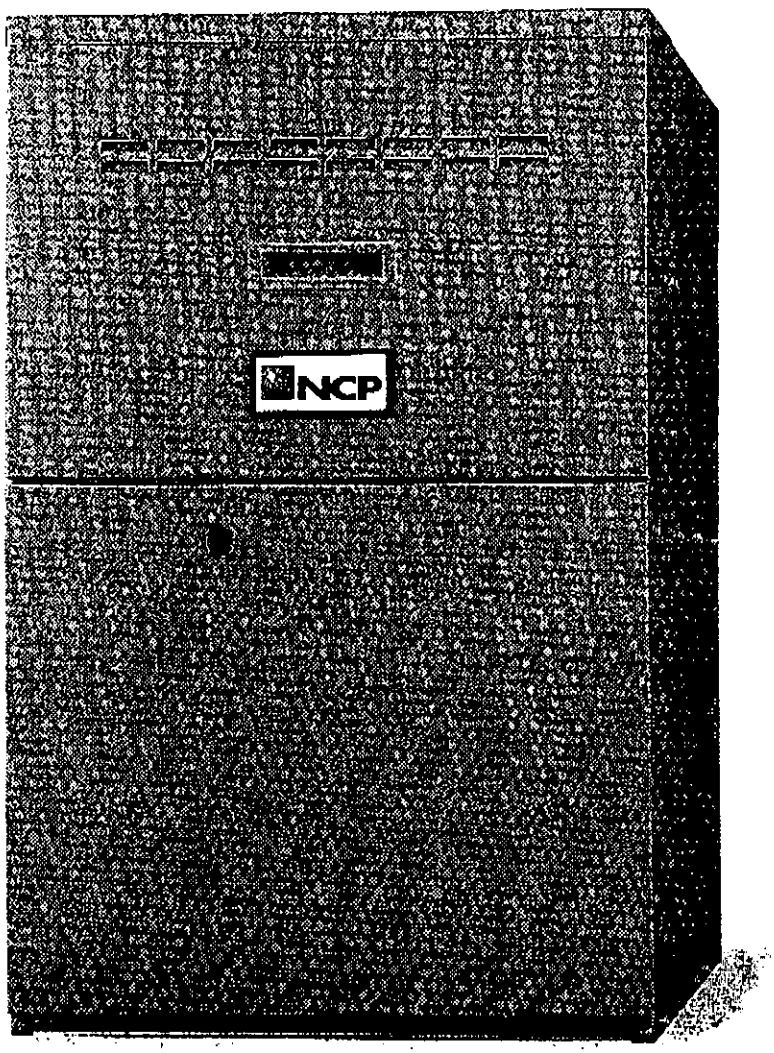
M&E ASSOCIATES



80% Gas Furnace

A VERSATILE, ENERGY EFFICIENT WAY TO HEAT YOUR HOME!

GMB MODEL SPECIFICATIONS

MODEL	NAT.	GMB05012AXD	GMB07512AXD	GMB07516AXD	GMB10016AXD	GMB10020AXD	GMB12520AXD
		GMB05012AXU	GMB07512AXU	GMB07516AXU	GMB10016AXU	GMB10020AXU	GMB12520AXU
	L.P. KIT #	BG–LP	BG–LP	BG–LP	BG–LP	BG–LP	BG–LP
	Sub–Base*	2802–5511	2802–5511	2804–5511	2804–5511	2805–5511	2805–5511
UNIT RATING BTU/HR.	Input	50,000	75,000	75,000	100,000	100,000	125,000
	Output	40,000	60,000	60,000	80,000	80,000	100,000
	High Altitude	FOR ELEVATIONS ABOVE 2000 FEET, REDUCE INPUT 4% FOR EACH 1000 FEET OF ELEVATION ABOVE SEA LEVEL.					
AFUE%		80.0					
AIR TEMPERATURE RISE RANGE °F		30–60	35–65	30–60	40–70	35–65	40–70
DESIGNED MAXIMUM OUTLET AIR TEMP. °F		160	165	160	170	165	170
MAX. EXT. STATIC PRESSURE IN. W.C.		.5					
FURNACE FLUE PIPE		TYPE B–1					
FLUE PIPE SIZE		3"	4"				5"
GAS CONNECTION		1/2 IN. FPT					
ELECTRICAL SERVICE		115 VAC 60 HZ 1 PH					
MINIMUM DISTANCE TO COMBUSTIBLE MATERIALS –UPFLOW		SIDES – 0, BACK – 0, FRONT – 2", TOP – 1", FLOOR – COMBUSTIBLE, SINGLEWALL METAL VENT – 6", B–1 VENT – 1"					
MINIMUM DISTANCE TO COMBUSTIBLE MATERIALS–DOWNFLOW		SIDES – 0, BACK – 0, FRONT – 2", TOP – 0, FLOOR – NONCOMBUSTIBLE* SINGLEWALL METAL VENT – 6", B–1 VENT – 1"					
MINIMUM DISTANCE TO COMBUSTIBLE MATERIALS –HORIZONTAL		BACK – 0, FRONT – 2", TOP – 1", FLOOR – COMBUSTIBLE, INLET END – 0, OUTLET END – 1" SINGLEWALL METAL VENT – 6", B–1 VENT – 1"					
SHIPPING WEIGHTS		119	125	137	143	159	165

AFUE ratings are based on DOE isolated combustion system test method.
– For LP use, conversion kit is required.
* – For downflow installation on combustible flooring, a combustible floor sub–base must be used.

BLOWER PERFORMANCE – DOWNFLOW OR HORIZONTAL CONFIGURATION

Furnace GMB05012AXD, GMB05012AXU, GMB07512AXD, GMB07512AXU

	STANDARD CFM AT EXTERNAL STATIC PRESSURE							
Blower Speed	.1	.2	.3	.4	.5	.6	.7	.8
High	1445	1343	1328	1248	1165	1063	950	819
Medium	1186	1164	1136	1084	1010	930	835	719
Low	934	934	913	884	835	771	684	583

Motor HP: 1/3 FLA 5.2 Impellor Size: 10–5/8 x 8

Furnace GMB07516AXD, GMB07516AXU, GMB10016AXD, GMB10016AXU

	STANDARD CFM AT EXTERNAL STATIC PRESSURE							
Blower Speed	.1	.2	.3	.4	.5	.6	.7	.8
High	1839	1759	1684	1613	1513	1397	1270	1110
Medium High	1610	1561	1447	1428	1360	1256	1147	1016
Medium Low	1416	1395	1360	1307	1242	1162	1050	930
Low	1213	1223	1198	1178	1131	1060	984	875

Motor HP: 1/2 FLA 5.2 Impellor Size: 10–5/8 x 10–5/8

Furnace GMB010020AXD, GMB010020AXU, GMB12520AXD, GMB12520AXU

	STANDARD CFM AT EXTERNAL STATIC PRESSURE							
Blower Speed	.1	.2	.3	.4	.5	.6	.7	.8
High	2341	2261	2154	2042	1914	1800	1653	1504
Medium High	1791	1743	1714	1664	1581	1496	1386	1258
Medium Low	1640	1598	1554	1533	1473	1386	1276	1165
Low	1445	1453	1421	1402	1334	1266	1175	1050

Motor HP: 3/4 FLA 9.8 Impellor Size: (2) 10–5/8 x 6 All motors are 1100 RPM and have 1/2" shafts.

William J. Brannagan
Plumbing & Heating, Inc.
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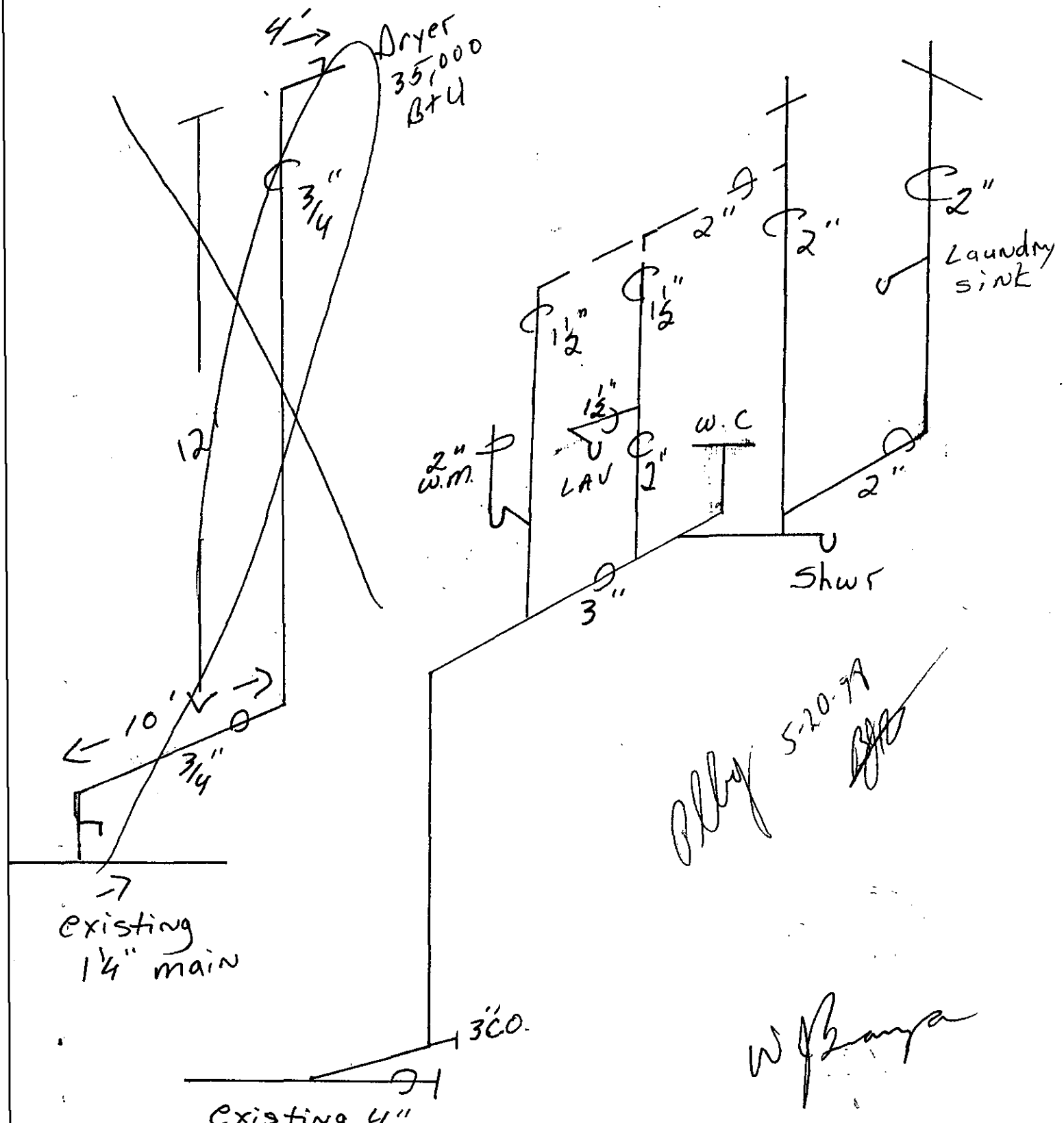
TELEPHONE: 908-747-3040
FAX: 908-747-5308



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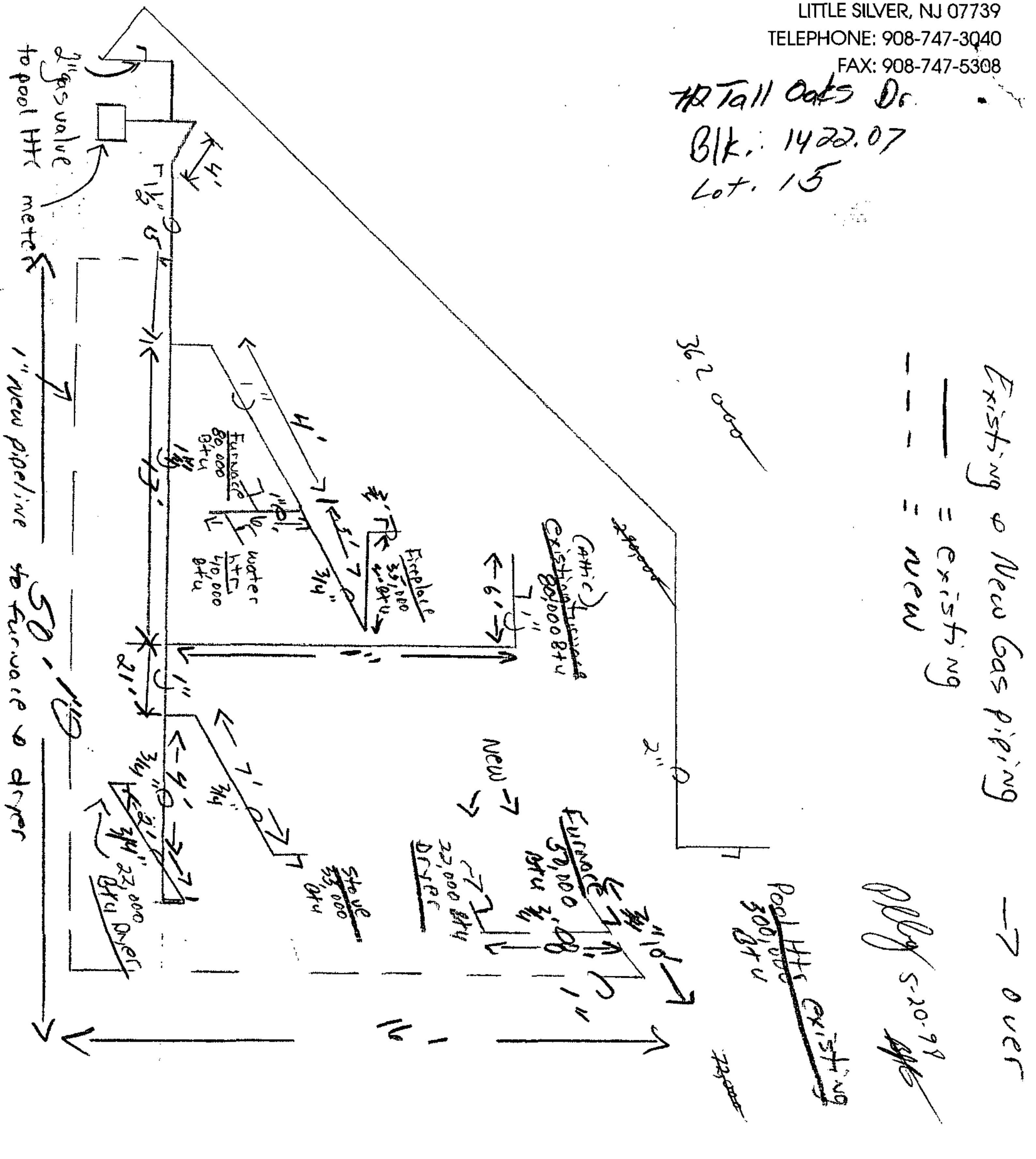
12 Tall Oaks Dr.
Blk.: 1422.07
Lot: 15



Existing Plumbing Fixtures in house

4	3- water closets	12
3	2- Showers	6
	1- Tub	2
	1- whirlpool	2
5	4- Lav sinks	5
2	1- washing Machine	4
2	1- Kitchen sink	4
	1- water heater	35
	1- dishwasher	
	2- outside hose bibs	

BOCA
NATIONAL BUILDING CODE
PLAN REVIEW RECORD

Valuation: _____ Plan Review # _____

Fee: _____ Date: 5-6-98

JURISDICTION Bldg (City, County, Township, etc.)

BUILDING LOCATION 742 Tall Oaks (Street address)

BUILDING DESCRIPTION R-3

REVIEWED BY [signature]

Numerals indicated in parenthesis are applicable code sections of the 1993 *BOCA National Building Code*. The organization of this Plan Review Record follows the common Building Code format implemented in the 1993 *BOCA National Building Code*. The plan review accomplished as indicated in this record is limited to those code sections specifically identified herein. This record references commonly applicable code sections. It does not reference all code provisions which may be applicable to specific buildings. This record is designed to be used only by those who are knowledgeable and capable of exercising competent judgement in evaluating construction documents for code compliance.

CORRECTION LIST

No.	DESCRIPTION	Code Section
	a list of existing fixture is required.	
	a complete gas sketch is required	
	Plumber was called 5-6-98	

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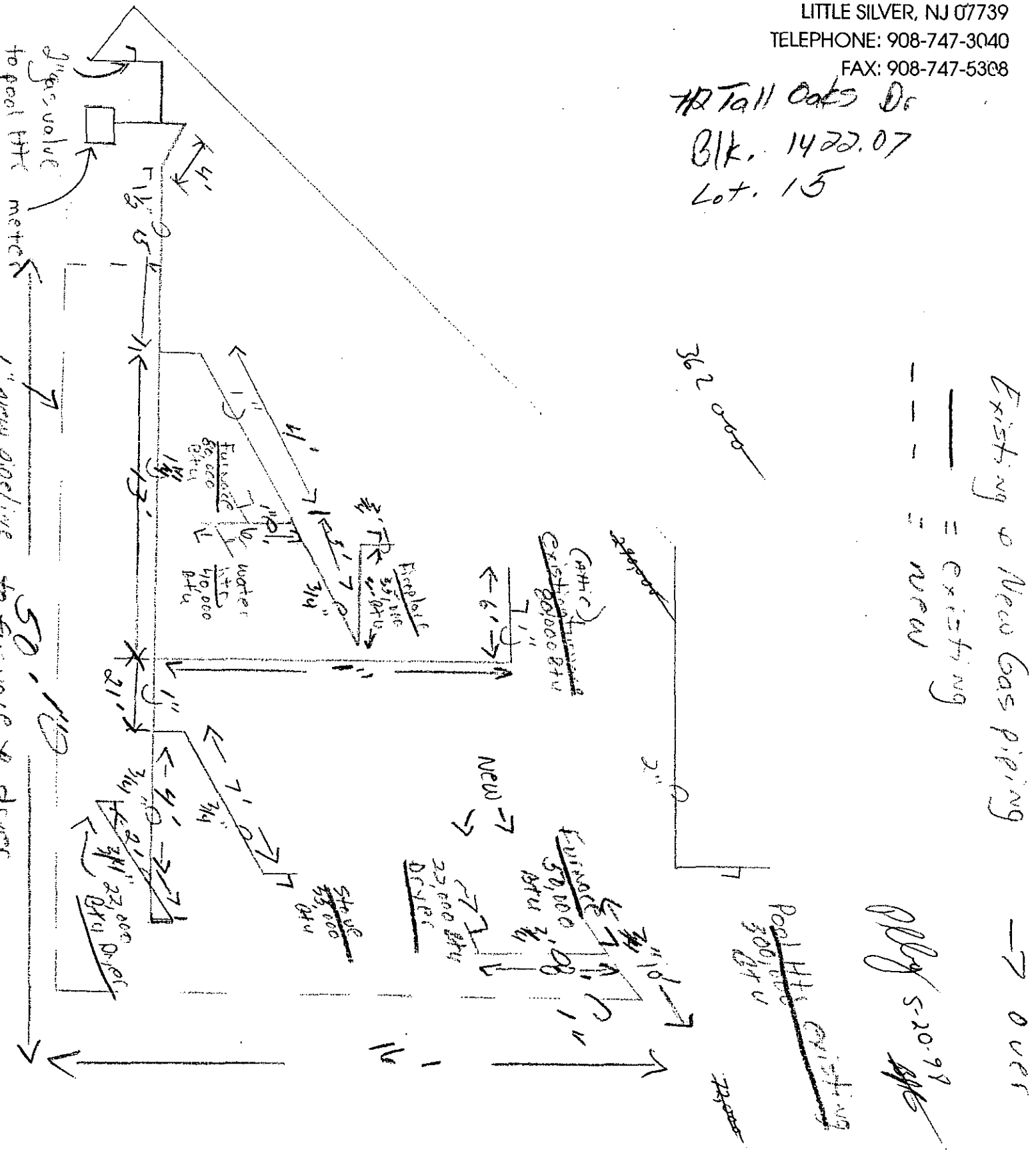
TELEPHONE: 908-747-3040
FAX: 908-747-5308

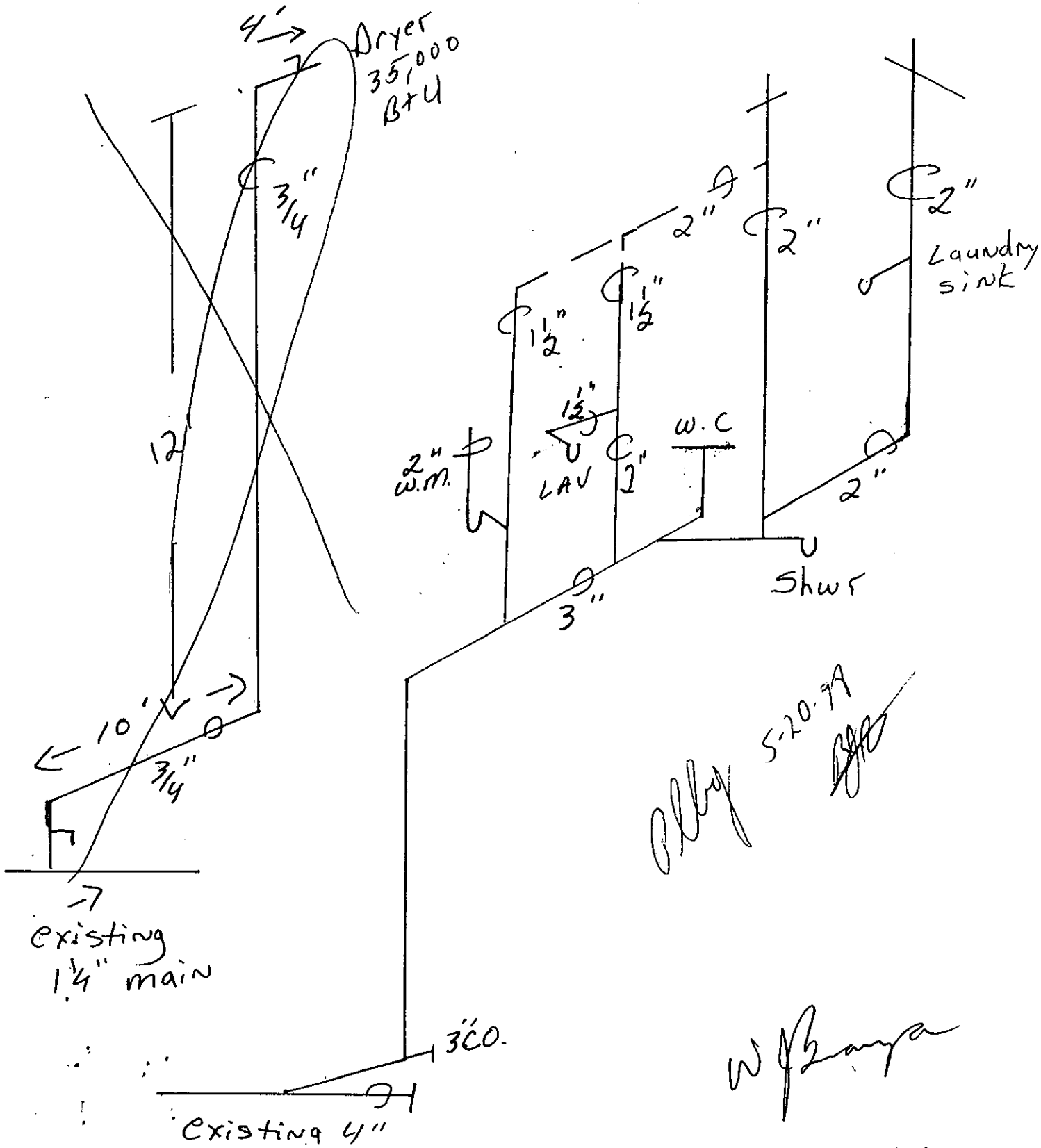
12 Tall Oaks Dr
Blk. 1422.07
Lot. 15



William J. Brannagan
Plumbing & Heating, Inc.
COMMERCIAL & RESIDENTIAL

N.J. STATE LICENSE #9351

72 RIVERVIEW AVENUE
LITTLE SILVER, NJ 07739
TELEPHONE: 908-747-3040
FAX: 908-747-5308



HENRY HENGCHUA ARCHITECT PC
411 Main Street, Toms River New Jersey

RECEIVED
JUL 08 1998
M&E ASSOCIATES

Township of Brick
401 Chambersbridge Road
Brick, NJ 08723

July 7, 1998

Attention : Mr. Joseph Curiazza, Construction Official

Reference: Second Floor Addition to Maguire Residence
Lot 15 Block 142.072
742 Tall Oaks Dr
Brick Township

Subject: Clarification/Modification to Architectural Plan

Dear Mr Curiazza :

We would like to update your office with the following modifications made to our plans submitted to you for construction :

First Floor Garage-Post support for Microlam Girder

A. Built up stud posts for new Microlam girder support
Our drawing calls for (5) studs to support the 3 1/2" x 18" Microlam Girder as indicated in Section A, Sheet A-2
The girder is supported by (3) liners and one jack stud at each side of girder.
The field installation follows our drawing.

Second Floor Addition-Roof Framing Assembly

A. We have replaced the ridge-rafter Simpson Strongtie Clip connectors with the following:
2 x 4 collar ties at 16" o.c. at the vaulted ceiling location
2 x 4 collar ties at 32" o.c. at attic locations
These collar ties provide sufficient lateral bracing for the roof structure.

Please do not hesitate to call me if you have any questions.

Sincerely,

HENRY HENGCHUA ARCHITECT PC

Henry Hengchua , AIA RA
Project Architect