HOWELL TOWNSHIP

CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: Rockyard Rd [redacted]
2. Owner Name: [redacted] Tel. [redacted]
   Address [redacted] HAZLET NJ 07730
3. Principal Contractor: Morton Buildings Tel. (201) 454-7900
   Address Box 126 Phillipsburg NJ.
   Lic. No. or Builder Reg. No. N/A Federal Emp. No. N/A
4. Architect or Engineer: N/A Tel. ( )
   Address
5. Responsible Person in Charge of Work Dave Gist of Harvey Cohen Tel. (201) 454-7900 264-5837

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	$3,000
2. ☐	Plumbing	
3. ☒	Electrical	250
4. ☐	Fire Protection	
5. ☐	Other	
6. ☐	Other	
	TOTAL COST	$3250

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

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: Storage Facility

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 1
15. Height of Structure 18 Ft.
16. Area–Largest Floor Sq. Ft.
17. Bldg. Area–All Fls. 2520 Sq. Ft.
18. Volume of Structure Cu. Ft.
19. Total Land Area Disturbed Sq. Ft.

LDS HW-B 10514904

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 [redacted] DATE 9/27/84

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. 183 LOT NO. 34.02 SUBDIVISION _____ PERMIT NO. 1046

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																	
☐ Water Authority																	
☐ 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		EDITION OF CODE
☐ One and Two Family Dwellings		☐ Mechanical		☐ Flood Hazard	
☒ Building	Bca - 84	☐ Energy		☐ As Built Elevation Certification	
☒ Electrical	Nec. 84	☐ Barrier Free		☐ Other	
☐ Plumbing		☐ Other			
☐ Fire Protection					

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					
	Footings/Foundations					
	Framing					
	Architectural					
	Other _____					
☐	PLUMBING					
☐	ELECTRICAL					
☐	FIRE PROTECTION					
☐	OTHER _____					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions			Final Inspection	Comments
_____	ALL CONSTRUCTION					
_____	BUILDING					
_____	Footings/Foundations					
_____	Framing					
_____	Architectural					
_____	Other _____					
_____	PLUMBING					
_____	ELECTRICAL					
_____	FIRE PROTECTION					
_____	OTHER _____					

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☐ Certificate of Occupancy No. _____	_____
☐ 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	$ _____ • _____
PLUMBING	_____ • _____
ELECTRICAL	_____ • _____
FIRE PROTECTION	_____ • _____
OTHER _____	_____ • _____
SUBTOTAL	$ _____ • _____
– LESS: 20% of subtotal (when plan review performed by state agency).	(_____ • _____)
D.C.A. TRAINING FEE .0006 x _____	= _____ • _____
CERTIFICATE OF OCCUPANCY	_____ • _____
OTHER _____	_____ • _____
OTHER _____	_____ • _____
TOTAL COLLECTED WHEN PERMIT ISSUED	$ _____ • _____

DATE _____ Collected By _____

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	$ _____ • _____

CERTIFICATE

CERT. NO. 1046
DATE ISSUED 11-21-84
Block 183 Lot 34.02
Subdivision

IDENTIFICATION

Owner [redacted] Agent owner
Address [redacted] Address
Hazlet, NJ 07730
Tel. ( ) [redacted] Tel. ( )
Work Site Address Brickyard Rd. 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:

Construction of pole building completed and approved

USE GROUP U FIRE GRADING

MAXIMUM LIVE LOAD MAXIMUM OCCUPANCY LOAD

SPECIFIC USE

FINAL COST OF CONSTRUCTION: $ 3,000.00

Sigmund Skupack
CONSTRUCTION OFFICIAL

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

TOWNSHIP OF HOWELL
P.O. BOX 580
HOWELL, NEW JERSEY 07731

CONSTRUCTION PERMIT

UNIFORM CONSTRUCTION CODE — NEW JERSEY

PERMIT NO. 1046
DATE ISSUED 9/28/84
Block 183 Lot 34.02
Subdivision

A. IDENTIFICATION

Owner [redacted] Agent owner
Address [redacted] Address
Hazlet, NJ 07730
Tel. ( ) [redacted] Tel. ( )
Work Site Address Brickyard Road Lic. No.
Federal Emp. No.

PAYMENTS

Permit Fee $ 212.29
Fees Remitted $
☐ Check No.
☐ Cash
☐ Other
Collected By: A Bongiovanni
Date: 9/28/84

is hereby granted permission
to perform the following work:

☒ BUILDING ☒ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER

Description of work:

construction of a pole building
Morton Building
Phillipsburg, NJ

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: $ 3,000.00

Sigmund Shupack
CONSTRUCTION OFFICIAL

U.C.C. Form F-170 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

HOWELL. TWP.

BUILDING SUBCODE TECHNICAL SECTION

PERMIT NO. 11416
DATE ISSUED 11/22/94
REVISION DATE / / /

Block 123 Lot 3402
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner [redacted]
Address [redacted]
HAZLET NJ 07730
Tel [redacted]
Work Site Address Rockwood Rd

Contractor MORTON Building
Address RT 126 Phillipsburg NJ
Tel. (201) 454-7900
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.

[redacted]
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

MORTON POLE Building.

☐ See Plans

TYPE OF WORK:

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

Fee Basis	Fee
	$ 441.12
[redacted]	[redacted]
[redacted]	[redacted]
SUBTOTAL	$
Minimum Building Fee (if applicable)	$
Total Building Fee *(Greater of Minimum or Subtotal)*	$ 441.12

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present U _____ Proposed

No. of Stories 1 — Total Building Area—All Floors 2520 Sq. Ft.

Height of Structure 18 Ft. — Volume of Structure 35,280 Cu. Ft.

Area—Largest Floor 2520 Sq. Ft. — Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: $ 3,000 00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-110 (8/83) Green = Office Copy White = Applicant Copy Beige = Inspector Copy

PLAN REVIEW AND INSPECTION — BUILDING

DATE	JOB CONDITION/COMMENTS
10-30-84	HAD CONTRACTOR DIG OUT 5 POSTS
	AT RANDOM. DUG OUT TO DEPTH OF
	TWO FOOT & THAN RAN ROD DOWN ALONG SIDE POLE OK
11/20/84	Final approved RM
11/15/84	Final elect V Surge

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☐ All		
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 11/20/84

Inspected By: R Mezell

INSPECTIONS

Type	Failure Dates			Approval Date
☑ PIER Footing/Foundation				10/30/84
☐ Slab				
☐ Frame				
☐ Architectural				
☐ Insulation				
☐ Finishes				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

U.C.C. Form F 110 (8/83)

HOWELL TWP.

ELECTRICAL SUBCODE TECHNICAL SECTION

PERMIT NO. 1046
DATE ISSUED 9/28/84
REVISION DATE

Block 183 Lot 34.02
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner [redacted]

Address [redacted] HA2 left

Tel [redacted]

Work Site Address Brickyard Rd

Contractor Owner

Address

Tel. ( )

Lic.No./Bus. Permit.

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.

[redacted]

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee
1	Switching Outlets	$		H.V.A.C. Equipment	$
1	Lighting Outlets			Switching Devices	
1	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric				
	Heating, Electric				
2	Switches			Other	
4	Lighting Fixtures			Other	
2	Receptacles			Other	
	Bonding, Pool/Vault			Other	
200	Service/Feeders				
	COLUMN 1	$		COLUMN 2	$

Fee	
COLUMN 1	$
COLUMN 2	
SUBTOTAL	$
Minimum Electrical Fee (If applicable)	$
Total Electrical Fee *(Greater of Minimum or Subtotal)*	$ 20.00

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Service: 200 Amps Single Phase _____ System Type

12-2 Wire 220 Volts _____ Wiring Method

Total No. of Meters:

Estimated Cost of Electrical Work: $ 250.00

D. COMMENTS

Dust Proof underground wire

Receipt

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-120 (8/83) Green = Office Copy White = Applicant Copy Purple = Inspector Copy

HOWELL TWP.

ELECTRICAL SUBCODE
TECHNICAL SECTION

PERMIT NO. 1046
DATE ISSUED 12/8/87
REVISION DATE

Block 163 Lot 34.02
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner [redacted]

Address [redacted] HAZLET

Tel. [redacted]

Work Site Address Buckyard Rd

Contractor Clancy

Address

Tel. ( )

Lic.No./Bus. Permit.

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.

[redacted]

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all wiring and equipment and provide necessary data

TYPE OF WORK:

No.	Item	Fee	No.	Item	Fee
1	Switching Outlets	$		H.V.A.C. Equipment	$
1	Lighting Outlets			Switching Devices	
1	Receptacle Outlets			Transformers	
	Range/Oven			Motors/Generators/ Compressors *(state no. and size of each)*	
	Dryer, Electric				
	Water Heater, Electric				
	Heating, Electric				
2	Switches				
4	Lighting Fixtures			Other	
2	Receptacles			Other	
	Bonding, Pool/Vault			Other	
200	Service/Feeders			Other	
	COLUMN 1	$		COLUMN 2	$

COLUMN 1	$
COLUMN 2	
SUBTOTAL	$
Minimum Electrical Fee (If applicable)	$
Total Electrical Fee *(Greater of Minimum or Subtotal)*	$ 20.00

C. ELECTRICAL CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Service: 200 Amps Single Phase _____ System Type

12-2 Wire 220 Volts _____ Wiring Method

Total No. of Meters:

Estimated Cost of Electrical Work: $ 250.00

D. COMMENTS

DUST PROOF Underground wire

Receipt

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION — ELECTRICAL

DATE	JOB CONDITION/COMMENTS
11-15-84	FINAL

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 11-15-84

Inspected By: Vasily Serge

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Rough				
☐ Energy				
☐ Mechanical				
☐ TCO				
☒ Other _____				11-15-84

CUT-IN

	Date Issued	Expiration Date
Temporary Cut-in-Card		
Temporary Cut-in-Card		
Final Cut-in-Card	11-15-84	

U.C.C. Form F-120 (8/83)

TO THE ZONING OFFICER:

The undersigned hereby applies for a Zoning Certificate for the following, to be issued on the basis of the representations contained herein, all of which applicant swears to be true:

1. Location of Property Buckyard Rd Howell Twp
   LOT # 34B BLOCK # 183

2. Name of Land Owners [redacted]

3. Occupant

4. Proposed Use:

✓ New Construction	____ Residence-Number of Families ____
____ Remodeling	____ Business
____ Accessory Building	____ Manufacturing
____	____ Sign Board - Size ____

5. Survey of lot, showing public roads, existing buildings and proposed construction or use for which this application is made. Fill in all dimensions below:

   (a) Name of Road or Street Brickyard Rd Feet

   (b) Main road frontage 230' Feet

   (c) Set back from side of road right of way 450' Feet

   (d) Side yard clearance 40' Feet

   (e) Rear yard clearance 320' Feet

   (f) Depth of lot from right of way 768 Feet

   (g) Dimensions of building: Width 42' Feet Depth 60' Feet

   (h) Highest point of building above established grade 17 Feet

   (i) Area of lot - square feet or acres 5 Acres Feet

   (j) Sketch showing existing buildings and proposed construction (indicating which direction is North)

6. Buildings: Use STORAGE FACILITY
   Number of stories 1 Basement N/A Apartments ____
   Useable floor space designed for use as living quarters, exclusive of basements, porches, garage, breezeways, terraces, attics or partial stories.
   First floor ____ square feet Second floor ____ square feet
   Off-street parking space ____ square feet

7. REMARKS ____

WITNESS:

[redacted]
APPLICANT SIGNATURE

Date filed with Zoning Officer: ____ Fee Paid 10.00

ZONING CERTIFICATE

Upon the basis of the above application, the statements which are made part hereof, the proposed usage is ____ found to be in accordance with the Township Zoning Ordinance and is hereby ____ approved for the following Zone: ____.

HOWELL TOWNSHIP ZONING OFFICER

Date Application was received ____ Date ruled on 9/28/84

If certification is refused, reason for refusal: ____

Lot 34A

S24° 40' 30"E 754.35'

S31° 04' 30"W 130.00'

Lot 36

LOT 34B
BLOCK 183

N56° 25' 30"E 229.60'

BRICKYARD ROAD

41.5' R.O.W.

470'

Driveway

454'

N17° 14' 45"W

60' Proposed 1-Story Bldg.

42'

Cleared Area

75'

75'

220.78'

S73° 04' 30"W

Lot 37

Lot 39

768.67'

S87° 30' 00"E 899.59'

Lot 34

PLOT PLAN

Township of Howell - Monmouth County, N.J.

Scale: 1" = 50' October 5, 1984

Charles M. Widdis L.S. Lic. No. 27519

CHARLES M. WIDDIS

Professional Planner and Land Surveyor
Long Branch, N.J.

Note:
Boundary information on this map was taken from a survey prepared by Eugene Mc Donald N.J. Lic. No. 11777 on May 6, 1977.

Map File No. HC-1173 Block 183 Lot 34B Offical Tax Map of the Twp. of Howell

File No. H-1490