



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 354 Essex Dr.
2. Name of Owner in Fee: Teddy + Joyce Zakrzewski
Address 354 Essex Dr. Brick 08723
3. Ownership in Fee: Public ☐ Private ☒
4. Principal Contractor: AGWAY Tel. (462-2073)
Address 150 Halls Mill Rd. Freehold, NJ 07728
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Employee No. 161551524 FAX: (_____) _____
5. Architect or Engineer _____ Tel. (_____) _____
Address _____
6. Responsible Person in Charge of Work _____
Tel. (_____) _____ FAX (_____) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>60.-</u>		
2. Electrical			
3. Plumbing	\$ <u>25.-</u>		
4. Fire Protection	\$ <u>66.-</u>		
5. Elevator Devices			
6. Subtotal	\$ _____		
7. Less 20% for State Plan Review	\$ _____		
8. Subtotal	\$ <u>2.-</u>		
9. DCA Training Fee			
10. Subtotal	\$ _____		
11. Cert. of Occupancy	\$ <u>\$15</u>		
12. Other <u>2PA</u>			
13. TOTAL	\$ <u>168.-</u>		

VI. BUILDING/SITE CHARACTERISTICS

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

prepare tank & gas logs

II. PROPOSED WORK

- ☐ Minor Work
- ☐ New Building
- ☐ Addition
- ☒ Alteration
- ☐ Fire Protection
- ☒ Plumbing
- ☐ Electrical
- ☐ Elevator Devices
- ☐ Asbestos Abat. Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Demolition

TOTAL COSTS 2,071.00

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

OPTIONAL (for office use only)

Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
<u>WSP</u>	<u>8/27/98</u>		<u>9-9-98</u>	<u>EM</u>	<u>10/15/98</u>	<u>OK</u>
			<u>9-4-98</u>	<u>KB</u>	<u>10/15/98</u>	<u>OK</u>
			<u>9-14-98</u>	<u>JPC</u>	<u>10/21/98</u>	<u>OK</u>
<u>ENC</u>	<u>9/1/98</u>		<u>9/1/98</u>	<u>JJ</u>		

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

- ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks
- ☐ High Pressure Boilers
- ☐ Pressure Vessels
- ☐ Refrigeration Systems
- ☐ Cross-Connections/Backflow Preventers
- ☐ Hazardous Uses/Places of Assembly
- ☐ Sprinklers
- ☐ Smoke Control Systems in Open Wells
- ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

- ☐ Hotels (R-1)
- ☐ Multi-Family (R-2)
- ☐ Two-Family (R-3) BOCA
- ☒ Two-Family (R-4) CABO
- ☐ One-Family (R-3) BOCA
- ☐ One-Family (R-4) CABO

No. of dwelling units:

Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

- 1. State Specific Use: _____
- 2. Use Group: _____
- 3. Change in Use Group, Indicate Former: _____

LDS BR 10103658

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 Joyce Zabrynski Date _____

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

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

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

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

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

☐ Check if contractor.

Agent Name _____

Address _____

Telephone (_____) _____

Signature _____

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

OFFICE DATE RECEIVED: _____

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

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	_____
Electrical _____	Barrier Free _____	_____
Plumbing _____	Flood Hazard _____	_____
Fire Protection _____	As Built Elevation Cert. _____	_____
Mechanical _____	Other _____	_____

X. CERTIFICATES ISSUED (office use only)

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 09/14/98
Control #
Permit # 98-3150

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 383.18 Lot 35 Qual

Work Site Location 354 ESSEX DR

PROPANE TANK/GAS FIREPLAE

Owner in Fee ZAKRZEWSKI, TEDDY

Address SAME

BRICK NJ 08722

Telephone

Contractor AGWAY

Address 150 HALLS MILLS RD

FREEHOLD, NJ 07728-

Telephone (732)462-2073

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 16-1551524

Is hereby granted permission to perform the following work:

☒ BUILDING	☒ PLUMBING	☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL	☒ FIRE PROTECTION	☐ DEMOLITION
☐ ELEVATOR DEVICES	☐ ASBESTOS ABATEMENT	☐ OTHER <u></u>

(Subchapter 8 only)

DESCRIPTION OF WORK:

PROPANE TANKS AND GAS FIREPLACE

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 \$ 2,060

Construction Official

U.C.C. F170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	60
Electrical	0
Plumbing	25
Fire Protection	66
Elevator Devices	0
Other	
DCA Training Fee	2
Cert. of Occupancy	0
Other <u>2PA</u>	<u>15</u>
Total	<u>168</u> - 153 <u>15</u>
Check No.	<u>536</u>
Cash	
Collected By	<u>PA</u>

0020A005 09/14/98 SUB TL 168.00
0005 10:46
09/14/98
Date 0020A005 10:46
LOT 35 # 0.00
BLOCK 38318 # 0.00
BUILDING 60.00
PLUMBING 25.00
FIRE 66.00
D.C.A. 2.00
ZONE PLOT 15.00
TOTAL 168.00
CHECK 168.00
CHANGE 0.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/27/98
 Date Issued 9/11/98
 Control # C28-35
 Permit # 98-3150

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

Block 383.18 Lot 35 Qual

Work Site Location 354 ESSEX DR

PROPANE TANK/GAS FIREPLACE

Owner in Fee ZAKRZEWSKI, TUDU

Address SAME

BRICK, NJ 08723-

Tel

Contractor AGWAY

Address 150 HALLS HILLS RD

PERKHOLD, NJ 07728-

Tel. (732) 462-2073 Fax ()

Lic. No. or Bldg. Reg. No.

Federal Emp. No. 16-1551524

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

PROPANE TANKS AND GAS FIREPLACE

CALL For Clearance Inspection

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Req.			Type	Failure Failure Approval Initial
☒ All	9-9-98	FM	Footing	
☐ Footing			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			BarrierFree	
Joint Plan Review Required:			Insulation	
☐ Elect ☐ Plumb ☐ Fire			Finishes	
SUBCODE APPROVAL ☐ Elev			Energy	
☐ CO ☐ CCO ☐ CA			Mechanical	
Date:			TCO	
Approved By:			Other	
			Final	10-15-98
			BarrierFree	

TYPE OF WORK

☐ New Building
☐ Addition
☒ Alteration
☐ Roofing
☐ Siding
☐ Fence 0 Height (exceeds 6')
☐ Sign 0 Sq. Ft.
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Other
☐ Denomination

FEE (Office Use Only)

\$ 0
 0
 60
 0
 0
 0
 0
 0
 0
 0
 0
 0
 0

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	U	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed		1. New Bldg. \$ 0
No. of Stories	0			2. Alteration \$ 2,000
Height of Structure	0 Ft.			3. Total (1+2) \$ 2,000
Area Largest Floor	0 Sq. Ft.			Industrialized Building:
New Bldg. Area/All Floors	0 Sq. Ft.			☐ State Approved
Volume of New Structure	0 Cu. Ft.			☐ HUD
Total Land Area Disturbed	0 Sq. Ft.			

Administrative Surcharge \$ 0
 Paid ☐ Check # Minimum Fee \$ 0
 Collected by: TOTAL FEE \$ 60
 DCA Training Fee \$ 2

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/27/98
Date Issued 9/1/98
Control # C28-35
Permit # 98-3150

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

Block 383.18 Lot 35 Qual

Work Site Location 354 ESSEX DR

PROPANE TANK/GAS FIREPLACE

Owner in Fee KARKZEWski, TEDDY

Address SAME

BRICK, NJ 08723-

Tele

Contractor AGUAY

Address 150 HALLS HILLS RD

BRICK, NJ 08728-

Tele. Fax ()

Lic. No. of Bldg. Eng. No.

Federal Emp. No. 16-1551524

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
[] No Plans Req.			Type	Failure Failure Approval Initial
☒ All	9-9-98	FE	Footing	
☐ Footing			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			BarrierFree	
Joint Plan Review Required:			Insulation	
☐ Elect ☐ Plumb ☐ Fire			Finishes	
SUBCODE APPROVAL ☐ Elev			Energy	
☐ CO ☐ CCO ☐ CA			Mechanical	
Date:			TCO	
Approved By:			Other	
			Final	
			BarrierFree	

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	U	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed		1. New Bldg. \$ 0
No. of Stories	0			2. Alteration \$ 2,000
Height of Structure	0 Ft.			3. Total (1+2) \$ 2,000
Area Largest Floor	0 Sq. Ft.			Industrialized Building:
New Bldg. Area/All Floors	0 Sq. Ft.			☐ State Approved
Volume of New Structure	0 Cu. Ft.			☐ HUD
Total Land Area Disturbed	0 Sq. Ft.			

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

PROPANE TANKS AND GAS FIREPLACE

Call For Clearance Inspection

TYPE OF WORK

☐ New Building	
☐ Addition	
☒ Alteration	
☐ Roofing	
☐ Siding	
☐ Fence 0 Height (exceeds 6')	
☐ Sign 0 Sq. Ft.	
☐ Pool	
☐ Asbestos Abatement Subchapter 8	
☐ Lead Haz. Abatement NJAC 5:17	
☐ Other	
☐ Other	
☐ Demolition	

FEE (Office Use Only)

\$	0
\$	0
\$	60
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0

Administrative Surcharge \$ 0
Paid ☐ Check # Minimum Fee \$ 0
Collected by: TOTAL FEE \$ 60
DCA Training Fee \$ 2

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/27/98
Date Issued 9/14/98
Control # C28-35
Permit # 98-3150

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

Block 383.18 Lot 35 Qual

Work Site Location 354 ESSEX DR

PROPANE TANK/GAS FIREPLAS

Owner in Fee ZAKRZEWSKI, TEDDY

Address SAME

BRICK, NJ 08723-

Tele. Fax ()

Contractor AGWAY

Address 150 HALLS MILLS RD

FRERHOLD, NJ 07728-

Tel. Fax ()

Lic. Fax ()

Federal Emp. No. 16-1551524

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed U

Constr Class Present Proposed

Heating Systems [] New [] Existing [] HVAC

Type: [] Gas [] Oil [] Elect [] Solar

[] Other

Location:

Total Est Cost of Fire Prot Work \$ 10

Fire Alarm System

New [] Existing []

Location of Panel:

Fire Suppression/Standpipe Sys

New [] Existing []

Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Plumb [] Elevator

[] Fire Plans Approved

Date: 9-1-98

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] SDA

Date: 10-1-98

Approved By: [Signature]

INSPECTIONS

Type Failure Failure Approval Initial

Alarm Sys

Suppr Test

Standpipe

Fire Pump

PreEng Sys

Mechanical

Smoke Ctl

TCO

Final

Other 10/15/98

Gas Fire place

D. TECHNICAL SITE DATA

Description of Work:

Water Supply Source

Method of Alarm/Suppr Sys Superv

Storage Tanks

Type: [] Flammable Liquid [] Combust Liquid

[] LPG [] LNG Capacity 0 Fuel

Alarm Systems [] 110v Interconnected NUMBER

[] System

Alarm Devices (smoke, heat, pulls, water/flow) 0

Supervisory Devices (tamper, low/high air) 0

Signalling Devices (horn/strokes, bells) 0

Other Devices 0

TOTAL 0

Suppression Systems

Fire Pump 0 GPM Type 0

Dry Pipe/Alarm Valves 0

Pre-action Valves 0

Sprinkler Heads (Dry and Wet) 0

Standpipes 0

Pre-Engineered Systems

Wet Chemical 0

Dry Chemical 0

CO2 Suppression 0

Foam Suppression 0

Halon Suppression 0

Other PROPANE 66

Kitchen Hood Exhaust System 0

Smoke Control System 0

Gas [] or Oil [] Fired Appliances 0

Other 0

Other 0

Administrative Surcharge \$ 0

Paid [] Check # Minimum Fee \$ 0

Collected by: TOTAL FEE \$ 66

DCA Training Fee \$ 0

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/27/98
 Date Issued 9/14/98
 Control # C28-35
 Permit # 98-3150

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

Block 383.18 Lot 35 Qual

Work Site Location 354 ESSKI DR

PROPANE TANK/GAS FIREPLAC

Owner in Fee ZAKREWSKI, TEDDY

Address SAME

Te. [REDACTED] 723-

Far ()

Contractor AGHAY

Address 150 HALLS MILLS RD

FRENCHOLD, NJ 07728-

Tele [REDACTED]

Lic. [REDACTED]

Federal Emp. No. 16-1551524

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed U

Constr Class Present Proposed

Heating Systems [] New [] Existing [] HVAC

Type: [] Gas [] Oil [] Elect [] Solar

[] Other

Location:

Total Est Cost of Fire Prot Work \$ 10

Fire Alarm System

New [] Existing []

Location of Panel:

Fire Suppression/Standpipe Sys

New [] Existing []

Location of Main Control Valve

D. TECHNICAL SITE DATA

Description of Work:

Water Supply Source

Method of Alarm/Suppr. Sys Superv

Storage Tanks

Type: [] Flammable Liquid [] Combust Liquid

[] LPG [] LNG Capacity 0 Fuel

Alarm Systems [] 110v Interconnected NUMBER

[] System

Alarm Devices (smoke, heat, pulls, water/flow) 0

Supervisory Devices (tamper, low/high air) 0

Signalling Devices (horn/strobes, bells) 0

Other Devices 0

TOTAL 0

Suppression Systems

Fire Pump 0 GPM Type 0

Dry Pipe/Alarm Valves 0

Pre-action Valves 0

Sprinkler Heads (Dry and Wet) 0

Standpipes 0

Pre-Engineered Systems

Wet Chemical 0

Dry Chemical 0

CO2 Suppression 0

Foam Suppression 0

Halon Suppression 0

Other PROPANE 66

Kitchen Hood Exhaust System 0

Smoke Control System 0

Gas [] or Oil [] Fired Appliances 0

Other 0

Other 0

PER (Office Use Only)

- Clearances
 - Existing Point

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Plumb [] Elevator

[] Fire Plans Approved

Date: 9-4-98

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date:

Approved By:

INSPECTIONS

Type Failure Failure Approval Initial

Alarm Sys

Suppr Test

Standpipe

Fire Pump

PreEng Sys

Mechanical

Smoke Ctl

TCO

Final

Other

Dates (Month/Day)

C. CERTIFICATION IN LIEU OF OATH

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

Signature

Administrative Surcharge \$ 0
 Paid [] Check \$ Minimum Fee \$ 0
 Collected by: TOTAL FEE \$ 66
 DCA Training Fee \$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 08/27/98
Date Issued 9/14/98
Control # C28-35
Permit # 98-3150

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

Block 383.18 Lot 35 Qual
Work Site Location 354 ESSEX DR

PROpane TANK/GAS FIREPLANE

Owner in Fee LAKRZEWSKI, TEDDY

Address SAME

BRICK, NJ 08723-

Tel. Fax ()

Contractor AGWAY

Address 150 HALLS HILLS RD

PERTHAM NJ 07728-

Tel. Fax ()

Federal Emp. No. 16-1551524

R. PLUMBING CHARACTERISTICS

Use Group Present Proposed U
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[] No Plans Required
Joint Plan Review Required:
[] Bldg [] Elect
[] Fire [] Elevator
[] Plumb. Plans Approved
Date: 9/14/98
Approved By: [Signature]
SUBCODE APPROVAL
[] CO [] CCO [] CA
Approved By: [Signature]
Date: 10-27-99

INSPECTIONS	Dates (Month/Day)			
	Type	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.	10-16-99		10-27-99	AK
Gas Piping			10-16-99	AK
Solar				
TCO				

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
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	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
0	Other	0
0	Other	0

Administrative Surcharge	\$	0
Paid [] Check #	Minimum Fee	\$ 0
Collected by:	TOTAL FEE	\$ 25
	BCA Training Fee	\$ 0

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

**TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS**

**UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION**

Date Received 08/27/98
Date Issued 9/14/98
Control # C28-35
Permit # 98-3150

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

Block 383.18 Lot 35 Qual _____
Work Site Location 354 HUSSEY DR

PROPANE TANK/GAS FIREPLAC

Owner in Fee SAKREKUSKI, YEDDY

Address SAME

BRICK, NJ 08723-

Tel. _____ Fax (____) _____

Contractor AUMAI

Address 150 HALLS MILLS RD

SPRINGFIELD NJ 07728-

Tele. _____

Lic. No. or Bldrs. Reg. No. _____

Federal Emp. No. 16-1551524

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed ☒

Building Sewer Size _____ ☐ Public Sewer ☐ Private Septic

Water Sewer Size _____ ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work \$ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

Joint Plan Review Required:

☐ Bldg ☐ Elect

☐ Fire ☐ Elevator

☐ Plumb Plans Approved

Date: 9/14/98

Approved By: _____

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Approved By: _____

Date: _____

INSPECTIONS

Type Failure Failure Approval Initial

Slab _____

Rough _____

Water _____

Sewer _____

Fixtures _____

Gas Equip. _____

Gas Piping _____

Solar _____

TCO _____

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
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	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
0	Other _____	0
0	Other _____	0

Administrative Surcharge \$ 0

Paid ☐ Check # _____ Minimum Fee \$ 0

Collected by: _____ TOTAL FEE \$ 25

DCA Training Fee \$ 0

C. CERTIFICATION IN LIEU OF OATH

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

Signature/Contractor Seal

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: August 28, 1998 1998 - 1473
Block 383.18 Lot 35 Zone R-7.5
Property Address: 354 Essex Drive
Owner: Teddy and Joyce Zakrzewski (Phone) [REDACTED]
Applicant: Same (Phone): Same
Existing Use: Single-family dwelling.
Proposed Use: Single-family dwelling.
Proposed Construction (if any): Install gas fireplace and propane tank.

Conditions: The tank must be setback at least 5 feet from the side and rear
property lines.

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
Michael P. Fowler, AICP/PP
Municipal Planner

Sean Kinnevy
Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK
Zoning Permit Application
(Please Type or Print Neatly)

BLOCK 383.18 LOT 35
PROPERTY ADDRESS 354 ESSEX DRIVE
NAME OF OWNER Teddy + Joyce ZAKRZEWSKI OWNER'S PHONE [REDACTED]
NAME OF APPLICANT Teddy + Joyce ZAKRZEWSKI
APPLICANT'S COMPLETE ADDRESS 354 ESSEX DR. BRICK NJ 08562
APPLICANT'S PHONE [REDACTED]

APPLICANT'S BUSINESS NAME [REDACTED]

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 Install Pool Pump Tank on Basement Slab.

All Dimensions

Deck or Garage

Fence

8" W

16" L

☐ Attached

☐ Detached

Type

III

4" III

17

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 P. Joyce Zakrzewski

Date 8/26/98

Reviewed by Zoning Officer Date 8/28/98

APD

☒ Approved ☐ Rejected

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 Pownier

Kathy M. Russell

Frederick J. Underwood, Sr.

Department of Administration & Finance

Division of Inspections

Joseph Curiazza

Construction Official

(732) 262-1024

Fax (732) 262-8954

<http://www.gbshost.com/brick>

Date: 9/26/98

Municipal Engineer
401 Chambers Bridge Rd
Brick, N.J. 08723

RE: Block: 383.18 Lot: 35

I, Joyce ZAKRZEWSKI of 354 Essex Dr.,
(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,

X Joyce Zakrzewski
applicant's signature

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 X Date: 9/1/98 By: [Signature]

Rejected Date: _____ By: _____

Remarks: _____

PROPERTY LINE FENCE

PROPERTY LINE

FENCE

FENCE

PROPERTY LINE

10'10"

44'

Propane tank

DRAIN
PIPE

DRYER
VENT

1'8"

AIR COND.

GARAGE

DRIVEWAY

38' total - 1/2 in K copper tubing 25,000 BTU

PORCH
ROOM

GAS
STOVE

STAIRS

DECK

DOORWAY

HOUSE

16'

12'

10'

6'6"

DOOR



SALES AGREEMENT
AGWAY PETROLEUM CORPORATION
PT-1030 (REV. 10/97)

PROPOSAL

AGWAY PETROLEUM CORPORATION of

150 Halls Mill Road Freehold, NJ 07728, called "Agway"
proposes to

Mr. & Mrs. Ted Zakrzewski (Purchaser) of

354 Essex Drive, Brick, NJ 08723 to perform the following

work and furnish the following materials on property owned by Self (Address)

in consideration of the payments indicated:

DESCRIPTION OF WORK AND MATERIALS:

AGWAY AGREES TO SELL AND INSTALL ONE (1) VERMONT CASTING HEARTH MOUNT,
MODEL DV-25, CONSISTING OF: FIREBOX, SHELL, VENT KIT, OPTIONAL 160CFM FAN,
AND T/STAT. WE WILL ASSEMBLE UNIT, SET IT IN PLACE AND VENT THRU THE ROOF.
SET PROPANE TANK IN PLACE AND PIPE TO THE HEATER. FIRST 24 GALLONS PROPANE
WILL BE PROVIDED FREE AS PART OF THIS CONTRACT.

TERMS:

Total cost of the foregoing work and materials shall be:

Payable on signing contract:

Progress Payments:

Sub-Total	\$	2,071.00
Tax	\$	0.00
	\$	2,071.00
TOTAL	\$	571.00

IT IS THE CUSTOMERS RESPONSIBILITY TO OBTAIN
ANY PERMITS REQUIRED BY THE STATE OR
TOWNSHIP.

\$ _____
\$ _____
\$ 1,500.00

Final Payment Due Upon Completion:

In the event payments are not promptly received, a late charge of 1½% per month will be assessed, and all work will stop until payments are brought to date.

It is further agreed that the work will be completed promptly and without interruption except such delays as may be caused by reasons beyond the control of Agway Petroleum Corporation.

LIMITED TWELVE MONTH WARRANTY: Agway Petroleum Corporation warrants to the original purchaser that if the equipment fails during the first twelve (12) months from the date of installation because of a manufacturing defect. Agway will provide the labor to repair or replace the malfunctioning parts or correct the improper installation without charge.

Warranties on parts may be provided by the manufacturer and except as provided above, this warranty does not extend to any equipment for which a manufacturer furnishes a separate warranty.

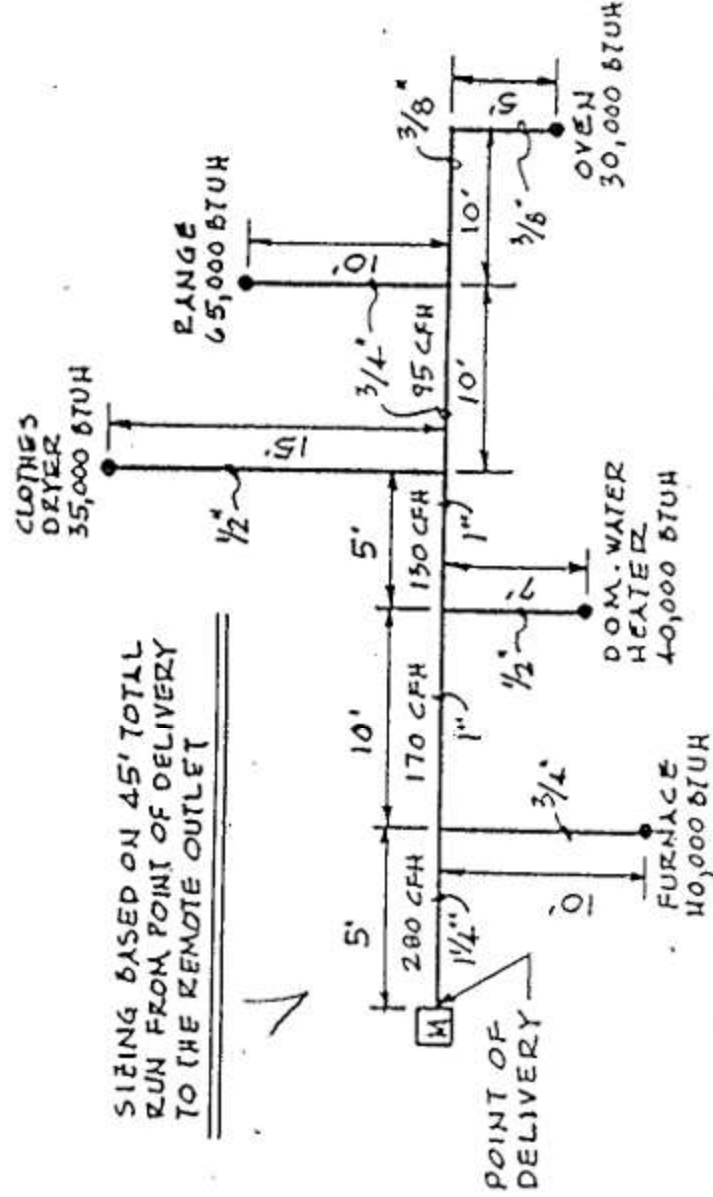
This warranty does not extend to any defect, malfunction or failure caused by misuse, faulty repair other than by Agway, accidents, acts of God, vandalism, or use of the equipment for a purpose which it is not intended.

IMPLIED WARRANTIES, INCLUDING THOSE OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, SHALL BE IN EFFECT ONLY FOR THE DURATION OF THE EXPRESS WARRANTY. WARRANTOR SHALL NOT BE LIABLE FOR ANY DIRECT, INCIDENTAL OR CONSEQUENTIAL DAMAGES. SOME STATES DO NOT ALLOW LIMITATIONS ON HOW LONG AN IMPLIED WARRANTY LASTS OR THE EXCLUSION OR LIMITATION OF INCIDENTAL OR CONSEQUENTIAL DAMAGES, SO THE ABOVE LIMITATION MAY NOT APPLY TO YOU.

MAXIMUM CAPACITY OF PIPE FOR GAS PRESSURE OF 0.5 PSIG OR LESS WITH PRESSURE DROP OF 0.3 INCH WATER COLUMN AND 0.60 SPECIFIC GRAVITY

Pipe size of Schedule 40 standard pipe (inches)	Internal diameter (inches)	Pipe capacity (cubic feet of gas per hour)																		
		Length of pipe (feet)																		
		10	20	30	40	50	60	70	80	90	100	125	150	175	200					
1/4	.364	32	22	18	15	14	12	11	11	10	9	8	8	7	6					
3/8	.493	72	49	40	34	30	27	25	23	22	21	18	17	15	14					
1/2	.622	132	89	73	63	56	50	46	43	40	38	33	31	28	26					
3/4	.824	228	150	125	107	95	84	76	69	64	60	52	49	44	41					
1	1.049	350	230	190	163	145	128	116	106	100	95	82	77	71	67					
1 1/4	1.380	520	350	285	245	215	193	180	170	160	150	130	120	110	100					
1 1/2	1.610	670	450	370	315	275	245	220	200	190	180	155	145	135	125					
2	2.067	1050	700	570	480	420	370	330	300	280	260	220	200	185	170					
2 1/2	2.469	1380	920	750	630	550	490	440	400	370	350	290	260	240	220					
3	3.068	1750	1150	950	800	700	620	560	510	470	440	370	330	300	280					
4	4.026																			

✓
SIZING BASED ON 45' TOTAL
RUN FROM POINT OF DELIVERY
TO THE REMOTE OUTLET

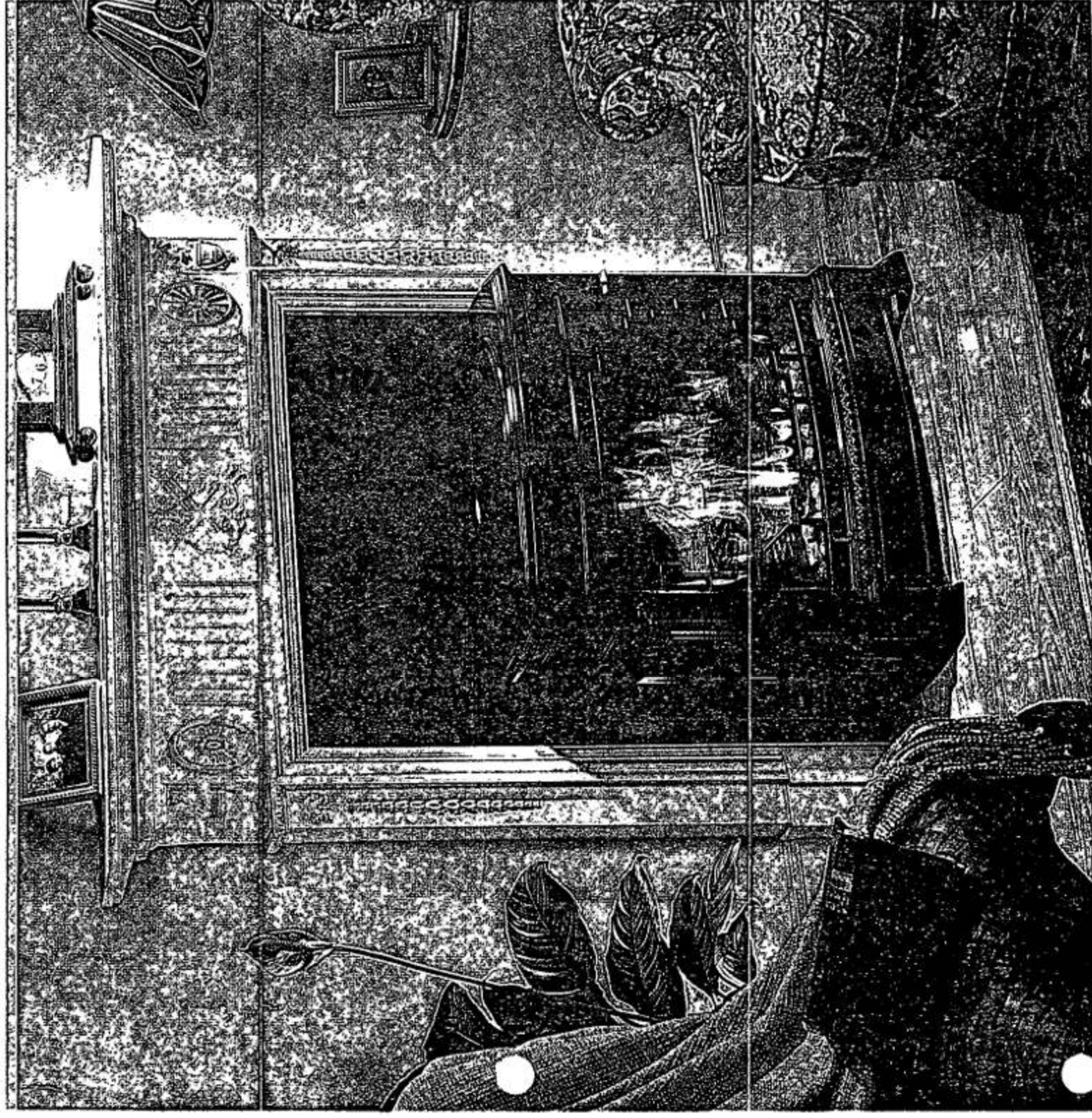


GAS PIPING RISER DIAGRAM

FOR NATURAL GAS, 10 CHANGE BTUH TO CFH
1000 BTUH = 1 CFH
 $\frac{\text{BTUH}}{1000} = \text{CFH}$

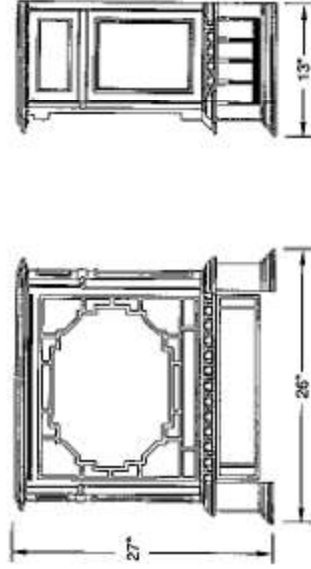
Sample

Wonderfire



Wonderfire Hearthmount Gas Stove

Wonderfire Hearthmount Product Points



Technical Specifications

	Vent-Free *	Direct-Vent
Heat Input:	15,000 to 25,000 BTU/hr.	16,000 to 20,000 BTU/hr.
Burner:	Steel Tube	Matrix™
Dimensions: Height: Width: Depth:	27" 26" 13"	27" 26" 13"
Clearances: Side: Rear:	2" 0"	6" 0"

The Wonderfire Hearthmount can be installed directly against a wall, with no clearance required, making it easy to create a hearth setting nearly anywhere in the home. It also is easily installed into most fireplaces. This heater has a maximum heat output of 25,000 BTU's, a large fireviewing area, a realistic wood-like flame, and a handsome plinth base. It is available in direct-vent and vent-free models.

Features

- Most realistic, wood-like flame of any gas appliance on the market.
- Certified room heater, U.S. and Canada.
- Durable cast-iron construction.
- Fuel versatility: natural gas or propane.
- Variable heat output.

Direct-Vent

- Design certified by American Gas Association and Canadian Gas Association.

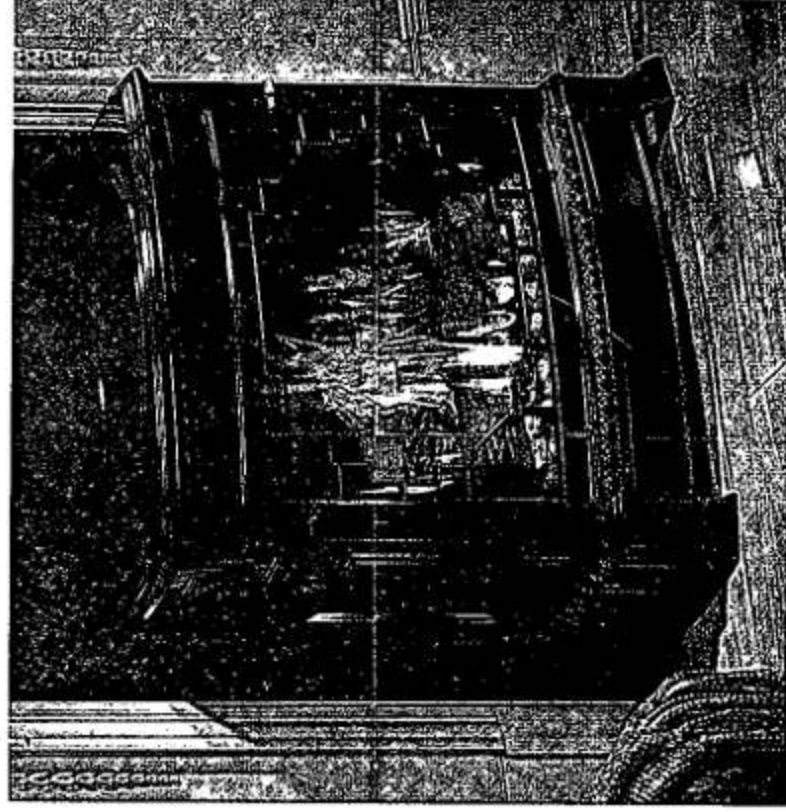
Vent-Free

- Design certified by American Gas Association.
- Easily assembled – no tools required.
- ODS system for safety assurance.

Options

- Choice of two porcelain enamel colors, Sand, Midnight or Classic Black.
- 100-cfm fan on Direct-Vent, 55-cfm fan on Vent-Free; Rheostat and thermostat included.

Enamel Colors



Wonderfire

P.O. Box 501, Route 107, Bethel, VT 05032

401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: 354 ESSEX DR.
Block: 383.18 Lot: 35
Owner in Fee: Teddy + Joyce ZAKREWSKI
Address: 354 ESSEX DR.
Brick NJ 08723

Date Rec'd: 8-25-98
Date Issued:
Permit #:

Stat
SSA

Phone: (732)
Provided

PLUMBING SUBCODE

CONTRACTOR: AGWAY

ADDRESS: 150 HALLS MILL RD.

FREEHOLD, NJ

PHONE: 462-2073

LIC #: 161551524

LIC. EXPIRATION DATE:

FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO. FIXTURE/EQUIPMENT

Water Closet
Urinal / Bidet
Bath Tub
Lavatory
Shower
Floor Drain
Sink
Dishwasher
Drinking Fountain
Washing Machine
Hose Bibb
X K-1/2 copper tubing
Gas Piping
Fuel Oil Piping
Water Heater
Steam Boiler
Hot Water Boiler
Sewer Pump
Interceptor / Separator
Backflow Preventer
Greasetrap
Water Cooled AC or Refrig. Unit
Sewer Connection
Septic (Disposal System) Closure
Water Service Connection
Gas Service Connection
Active Solar System
Vent Through Roof
Other

Estimated Cost of Plumbing Work: \$

Signature:

Owner ☐ Contractor ☐

SUBCODE APPROVAL:

PLANS: Required ☐ Approved ☐

Approved by:

Date:

CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

DR: AGWAY

ADDRESS: 150 HALLS MILL RD.

FREEHOLD, NJ 07728

PHONE: 462-2073

LIC #: 161551524

LIC. EXPIRATION DATE:

FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA

DESCRIPTION OF WORK:

B-Vent Chimney
Install new propane tank = 100 gal.
on cement blocks
tank is 4 1/2' tall, 3' diameter, white solid steel
Dimensions L W H
Cement blocks
4" x 8" x 16"
tank to be installed on

tank
4 1/2 height
3 1/2 diameter - propane tank
100 gallon
white steel

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:

CONSTR. CLASS Present: Proposed:

No. of Stories:

Height of Structure:

Area - Largest Floor:

New Building Area / All Floors:

Volume of Structure: Total Land Disturbed:

Signature:

X Joyce Zakremski

Estimated Cost of Building Work:

New Building (1): \$

Alteration (2): \$

TOTAL (1+2): \$

SUBCODE APPROVAL:

CONTRACTOR:

ADDRESS:

PHONE:

LIC. #:

EXP. DATE:

FEDERAL EMPL. #:

FEDERAL EMPL. #:

EXP. DATE:

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION QTY SIZE

ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors - Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit w/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 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

AMP Elec. Sign/Outline Light

Other

Other

Other

Other

Estimated Cost of Electrical Work: \$

Signature (print name):

Estimated Cost of Electrical Work: \$

Signature (print name):

Owner ☐ Contractor ☐

SUBCODE APPROVAL:

PLANS: Required ☐ Approved ☐

Approved by:

Date:

CONTRACTOR AFFIX SEAL:

TECHNICAL DATA (DESCRIPTION OF WORK)

install propane tank on cement blocks, 38' copper tubing 1/2" from tank to porch room

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ SolarHeating Sys: ☐ New ☐ Existing

Location of Furnace / Boiler

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.G.P. Storage Tanks

Capacity:

Fuel:

DESCRIPTION

NUMBER

Wet Sprinkler Heads

Dry Sprinkler Heads

Total

Smoke Detectors

Heat Detectors

Total

Stand Pipes

Kitchen Hood Exhaust Systems

Pre-Engineered Systems

Co2 Suppression

Halon Suppression

Foam Suppression

Dry Chemical

Wet Chemical

Gas or Oil Fired Appliance

Other

Other X Gas Fine Place.

Estimated Cost of Fire Protection Work: \$

Signature: X Joyce Zabyak