TOWNSHIP OF BRICK

CONSTRUCTION PERMIT APPLICATION

RECEIVED Page 1
JUN 21 REC'D
BUILDING

I. IDENTIFICATION

1. Proposed Work at: 24 Homestead rd Brick
2. Owner Name: John Kowder [redacted]
   Address: 2406 7th ave Toms River N.J.
3. Principal Contractor: Same Tel. ( )
   Address:
   Lic. No. or Builder Reg. No. ______ Federal Emp. No. ______
4. Architect or Engineer: ______ Tel. ( )
   Address:
5. Responsible Person in Charge of Work: John Kowder Tel. ( ) 929-3455

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	$ 5600.00
2. ☑ Plumbing	4300.00
3. ☑ Electrical	1300.00
4. ☐ Fire Protection	
5. ☐ Other	
6. ☐ Other	
TOTAL COST	$ 11,200.00

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: ______

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

LDS BR 10107605

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 John Lamb DATE 6-21-88

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. 4298-62 LOT NO. 2 13 SUBDIVISION _____ PERMIT NO. _____

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		
☐ One and Two Family Dwellings	_____	☐ Mechanical	_____	☐ Flood Hazard	_____
☐ Building	_____	☐ Energy	_____	☐ As Built Elevation Certification	_____
☐ Electrical	_____	☐ 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	6/21/88	[illegible]	6-23-88	[illegible]	
	Footings/Foundations					
	Framing					
	Architectural					
	Other _____					
☒	PLUMBING			6-23-88	[illegible]	
☐	ELECTRICAL					
☒	FIRE PROTECTION			6/21/88	[illegible]	
☐	OTHER _____					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
✓	BUILDING		4-3-89 [illegible]	
	Footings/Foundations			
	Framing			
	Architectural			
	Other _____			
✓	PLUMBING		4-3-89 DM	
	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	$ 90.00
PLUMBING	75.00
ELECTRICAL	.
FIRE PROTECTION	15.
OTHER _____	.
SUBTOTAL	$ 180.00
– LESS: 20% of subtotal (when plan review performed by state agency).	(15
D.C.A. TRAINING FEE .0006 x _____	.
CERTIFICATE OF OCCUPANCY	36.
OTHER _____	.
OTHER _____	.
TOTAL COLLECTED WHEN PERMIT ISSUED	$ 205.

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	$.

TOWNSHIP OF BRICK

NEW JERSEY UNIFORM CONSTRUCTION CODE

CONSTRUCTION PERMIT

PERMIT NO. 959
DATE ISSUED 5-2-88
Block 298-62 Lot 13
Subdivision

A. IDENTIFICATION

Owner John Kandel Corp. Agent Same
Address 1240 6-7th Ave Address //
Toms River, NJ
Tel. ( ) Tel. ( )
Work Site Address Lic. No.
24 Homestead Rd. Federal Emp. No.

PAYMENTS

Permit Fee $ 15.00
Fees Remitted $ //
☑ Check No. 1001
☐ Cash
☐ Other
Collected By: Palo
Date:

is hereby granted permission to perform the following work:

☑ BUILDING ☐ ELECTRICAL
☐ PLUMBING ☐ FIRE PROTECTION
☐ OTHER

Description of work:

interior demolition

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: $ 250.-

CONSTRUCTION OFFICIAL

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

NEW JERSEY UNIFORM CONSTRUCTION CODE

SUBCODE TECHNICAL SECTION

Block 298-62 Lot 13
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner John Kosky Boyle
Address 2406 7th ave
T. R.
Te [redacted]
Work Site Address 24 Homestead rd
Bricktown

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

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

Renovate existing house
Roof, siding, windows, electrical
plumbing, insulation, sheetrock
+
Same

☐ See Plans

TYPE OF WORK:

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

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

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 1

Total Building Area—All Floors 480 Sq. Ft.

Height of Structure 12 Ft.

Volume of Structure _____ Cu. Ft.

480

D. COMMENTS

NEW JERSEY UNIFORM CONSTRUCTION CODE

SUBCODE TECHNICAL SECTION

Block 298-62 Lot 13

Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner John Fowler Corp.

Address 12706 7th and 1 St.

Tel. [redacted]

Work Site Address 124 Homestead Rd Brick Town

Contractor Fowler

Address

Tel. ( )

Lic. No.

Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

Renovate existing house Roof, siding, windows, electrical plumbing, insulation, sheetrock + trim

☐ See Plans

TYPE OF WORK:

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

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

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

No. of Stories 1

Height of Structure 12 Ft.

Total Building Area—All Floors 480 Sq. Ft.

Volume of Structure _____ Cu. Ft.

D. COMMENTS

Final
OK 4-3-89

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☒ No Plans Required	6-23-88	
☐ All		
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☒ Frame				W.S.
☐ Architectural				
☒ Insulation				W.S.
☒ Finishes				4-3-89
☐ Energy				
☐ Mechanical				

UNIFORM CONSTRUCTION CODE

TECHNICAL SECTION

Block 230 Lot 19
Subdivision

A. IDENTIFICATION

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

Owner John Kostka Corp.
Address 12406 7th Ave
Point Pleasant Bch NJ.
Tel. [redacted]
Work Site Address 24 Homestead rd
Bricktown

Contractor MATTHEWS P&H
Address 737 REVERE DR.
BRICK, NJ.
Tel. ( ) 840 2293
Lic.No./Bus. Permit 5374
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)
I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal	$ 5.-		Garbage Disposal	$
1	Bathtub	5.-		Air Conditioner Unit	
1	Lavatory/Sink	5.-		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
1	Washing Machine	5.-		Grease Trap	
1	Dishwasher	5.-		Interceptor	
	Commercial Dishwasher			Backflow Device	
1	Water Heater	5.-		Reduced Pressure Backflow Device	
1	Domestic Boiler/ Furnace	15.-		Vent Stack	10.-
	Steam Boiler			Solar System	
	Water Util. Connection			Other KIT. SINK	5.-
	Sewer Util. Connection			Other GAS PIPING	15.-
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 45.-		COLUMN 2	$ 30.-

Fee	
COLUMN 1	$ 45.-
COLUMN 2	$ 30.-
SUBTOTAL	$
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 75.-

X

27-5 5-24

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed
Drainage — Material _____ Size _____
Building Sewer— Material _____ Size _____

D. COMMENTS

DATE	JOB CONDITION/COMMENTS
9/26/88	Kitchen Sink Vent 90° E// below flood Rim.
	P.B. Water pipe Needs Pressure Relief Valve See 3·8·3 (P.B. 100psi at 180°F)
10/4/88	P.B. water pipe on cold only

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved
Date: 6-22-88
Approved By: J. D. Lyle

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 4/3/89

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Slab				
☒ Rough				10/4/88
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				

UNIFORM CONSTRUCTION CODE

TECHNICAL SECTION

Block 218.02 Lot 13

Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner John Hauler Corp

Address 2706 7th ave
Town Thier N.J.

[redacted]

Work Site Address 24 Howard st
Bricktown

Contractor Same

Address

Tel. ( )

Lic. No.

Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other

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

No. of Heads: No. of Spare Heads:

☐ Valves Supervised – Method:

Water Supply – Source: Size:

FD Connection Location:

Estimated Cost of Work: $

FEE $

B2. SPECIAL SUPPRESSION SYSTEMS

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

Manual Pull: ☐ Yes ☐ No

Locations:

Estimated Cost of Work: $

$

B3. ALARM

TYPE: ☐ Manual ☑ Automatic

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

Estimated Cost of Work: $ 65.00

FEE $ 15

B4. STAND PIPES

Pipe Size: Pump Size:

Water Source: Size:

FD Connection Location:

Hose Station: ☐ Yes ☐ No

Estimated Cost of Work: $

$

B5. OTHER

3.0 x 4.2 Tilt Sensor

$

$

$

Subtotal $

Minimum Fire Protection Fee (If Applicable) $

Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ 15

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP Present Proposed

Heating Systems – Location:

D. COMMENTS

UNIFORM CONSTRUCTION CODE

TECHNICAL SECTION

Block ______ Lot ______
Subdivision ______

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner	John Koster Corp.	Contractor	MATTHEWS P&H
Address	2406 7th Ave	Address	737 REVERE DR.
	Toms River NJ.		BRICK, NJ.
[redacted]		Tel. ( )	840 2293
Work Site Address	84 Homestead rd	Lic.No./Bus. Permit	5374
	Bricktown	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.

Matthew [signature]
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal	$ 5.–		Garbage Disposal	$
1	Bathtub	5.–		Air Conditioner Unit	
1	Lavatory/Sink	5.–		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
1	Washing Machine	5.–		Grease Trap	
1	Dishwasher	5.–		Interceptor	
	Commercial Dishwasher			Backflow Device	
1	Water Heater	5.–		Reduced Pressure Backflow Device	
1	Domestic Boiler/ Furnace	15.–		Vent Stack	10.–
	Steam Boiler			Solar System	
	Water Util. Connection			Other KIT. SINK	5.–
	Sewer Util. Connection			Other GAS PIPING	15.–
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 45.–		COLUMN 2	$ 30.–

Fee	
COLUMN 1	$ 45.–
COLUMN 2	$ 30.–
SUBTOTAL	$
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 75.–

C. PLUMBING CHARACTERISTICS

USE GROUP: ______ Present ______ Proposed

Drainage – Material ______ Size ______

Building Sewer– Material ______ Size ______

D. COMMENTS

THIS PERMIT DOES NOT AUTHORIZE
SEWER CONNECTION
OBTAIN SEWER CONNECTION PERMIT

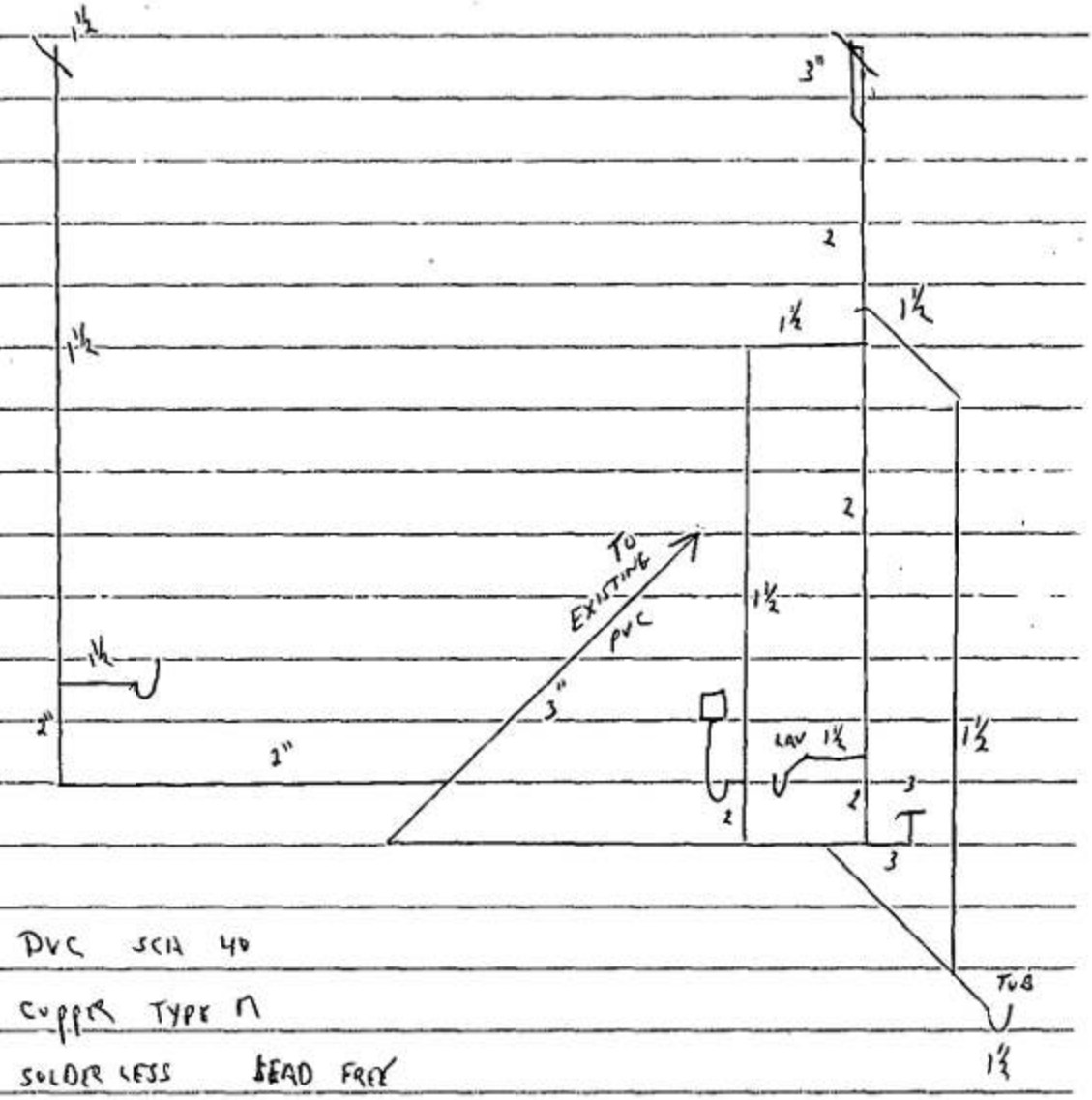
MATTHEW'S PLUMBING & HEATING, INC.
737 Revere Drive
BRICKTOWN, NEW JERSEY 08724

PAGE NO

PREPARED BY

DATE

840-2293

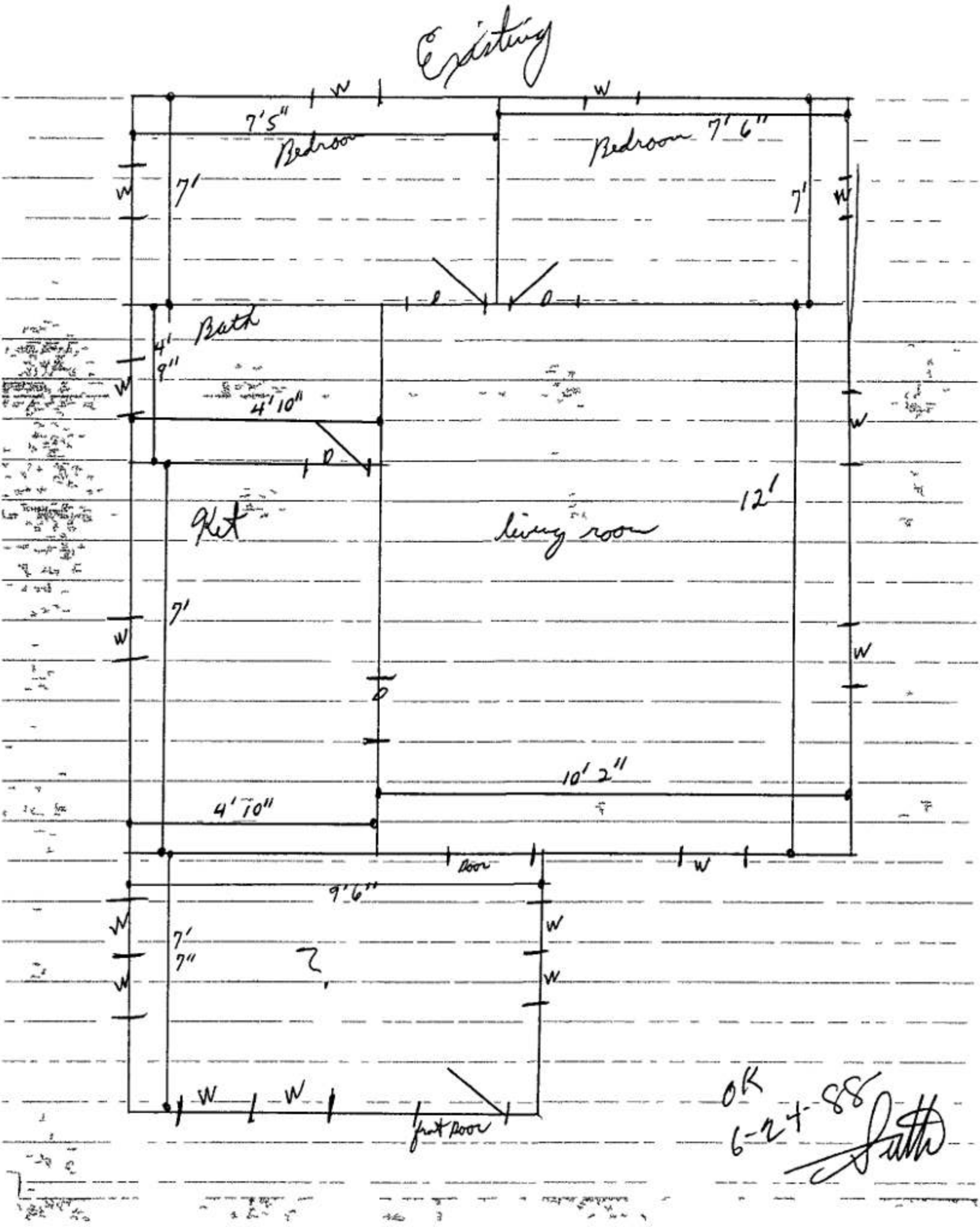


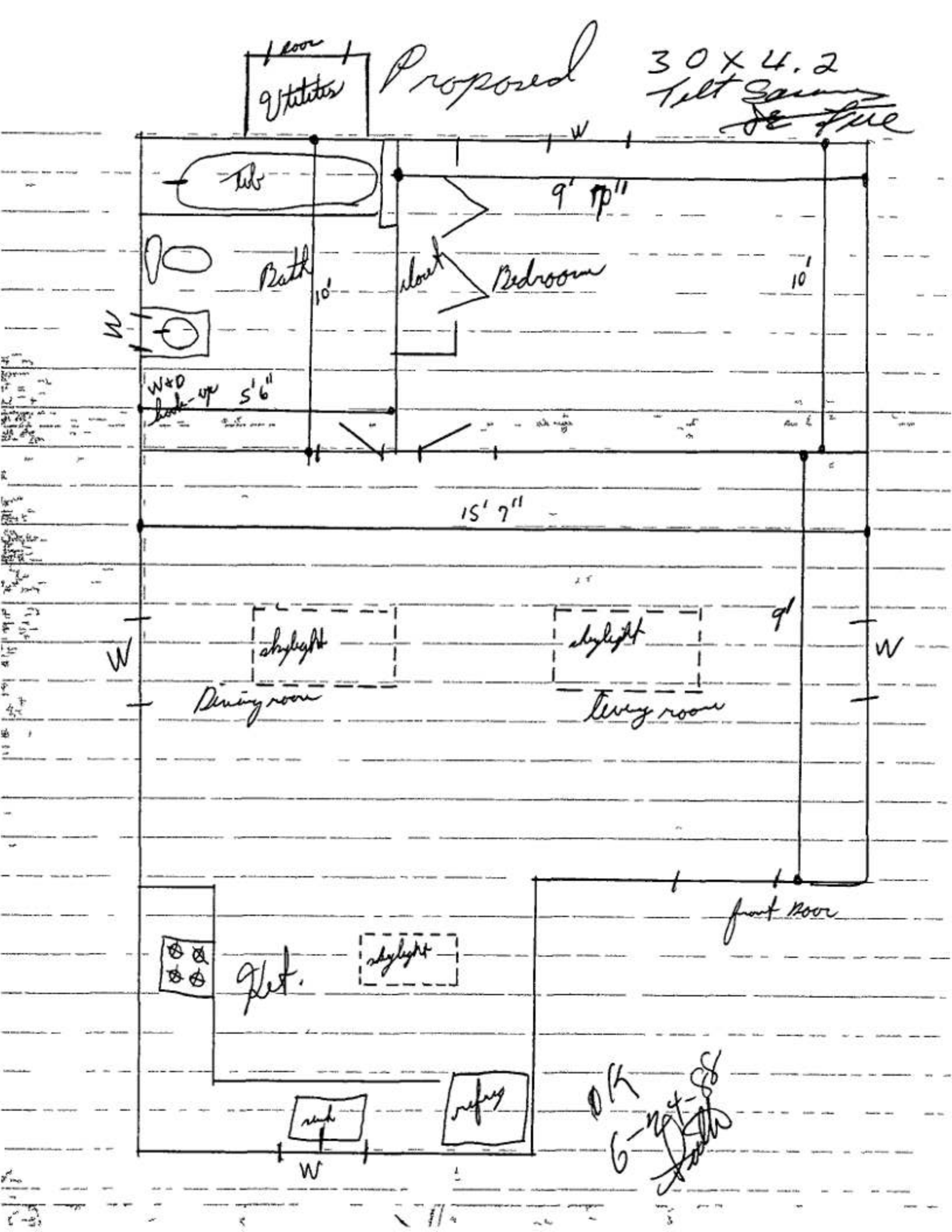
PVC SCH 40

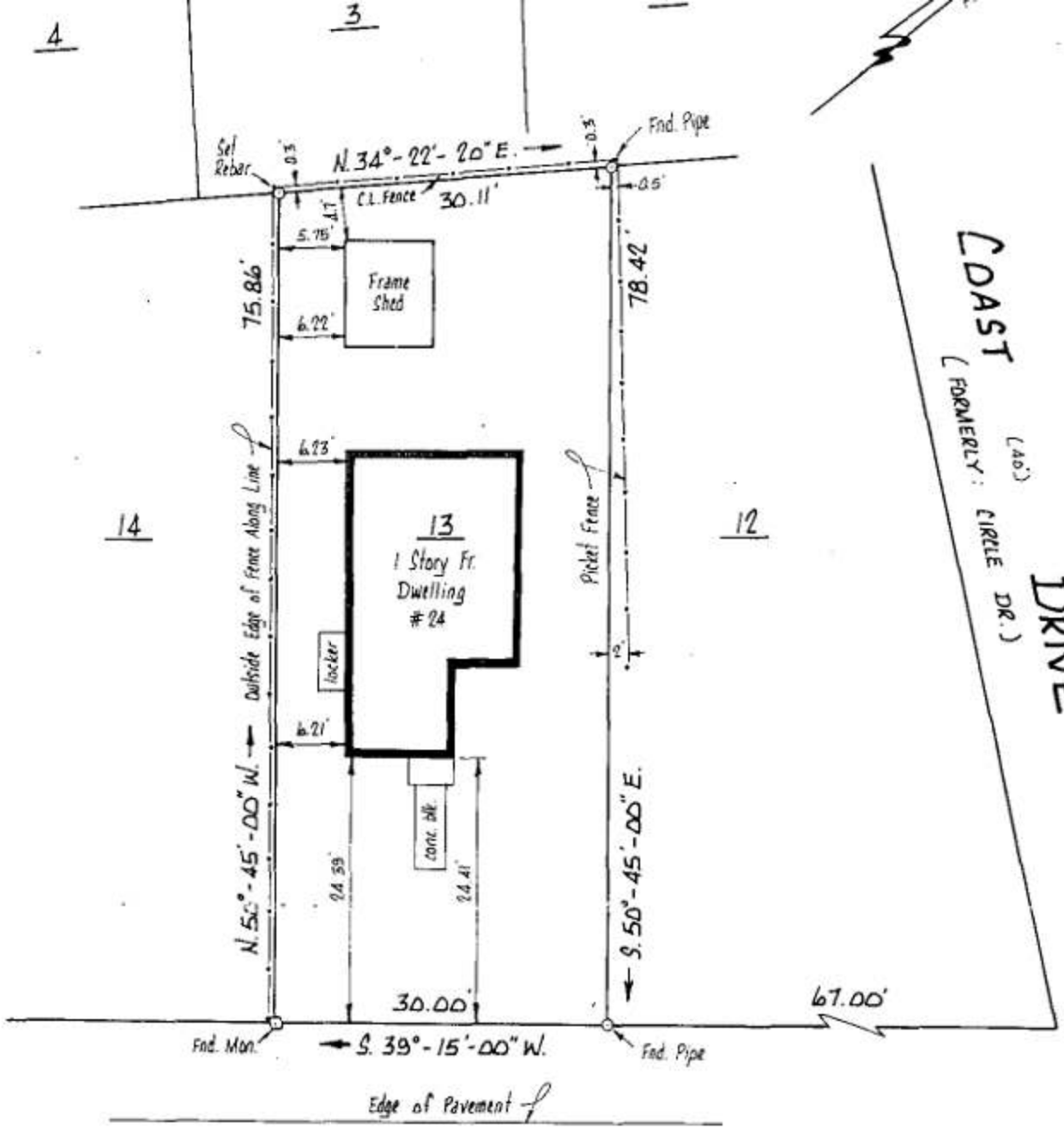
COPPER TYPE M

SOLDER LESS LEAD FREE

executive


Existing
7'5"
Bedroom
Bedroom 7'6"
7'
7'
Bath
4'
9"
4'10"
Kit
living room
12'
7'
10'2"
4'10"
door
9'6"
7'
7"
front door
OK
6-24-88


Proposed
30 x 4.2
Tilt
Utilities
Tub
9' 11"
Bath
10'
closet
Bedroom
10'
W
W&D
hook-up
5'6"
15' 7"
W
skylight
skylight
9'
W
Dining room
living room
front door
Flat.
skylight
sink
refrig
W
OK
6-Nov-88



NOTE: ALL COPIES VOID WITHOUT EMBOSSED SEAL ON SIGNATURE.

DESCRIPTION:

LOT 13. BLOCK 298.62. BRICK TOWNSHIP, OCEAN COUNTY. NEW JERSEY.
FILED MAP: "SHORE ACRES" FILED JULY 23. 1945 AS MAP B-312.

CERTIFIED TO:

JOHN KANDER, CORP.
BAKER ABSTRACT CO. AND CONTINENTAL TITLE

Est. 1945

GEORGE W. HENN, INC.
CIVIL ENGINEERS AND LAND SURVEYORS
PROFESSIONAL PLANNERS
73 MANTOLOKING ROAD
BRICK TOWN, N. J. 08723
477-6500

I CERTIFY THE ABOVE SURVEY AND FIND CONDITIONS AS SHOWN. THIS CERTIFICATION IS MADE ONLY TO HEREON NAMED PARTIES FOR PURCHASE AND/OR MORTGAGE OF ABOVE PREMISES BY