BLOCK 382.04 LOT 13 QUALIFICATION CODE C12-42 ADDRESS (SITE) _____ PERMIT NO. 01-2305

Mail In 6/11/01

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Propsed Work Site at: 234 HAWAII DR BRICK NJ 08723
2. Name of Owner in Fee: JOHN SKURAT Te [redacted]
   Address 234 Hawaii Drive (street) Brick (municipality) [redacted] (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Mark Fenn Enterprises Tel. (800) 628-5565
   Address 41 Plymouth St Fair Field NJ 07004
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 122841 FAX: (____) _____
5. Architect or Engineer 22-177517 Tel. (____) _____
   Address _____
6. Responsible Person in Charge of Work Shonda McCallum
   Tel. (800) 628-5565 Ext 108 FAX (____) _____

Vinyl siding.

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 263		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee	8		
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 271 -		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
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	

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building							1/31/01		OK
3. ☐ Addition									
4. ☐ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	10122.								

OPTIONAL (for office use only)

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 _____
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 10304146

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 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 Mark Four Enterprises

Address 41 Plymouth St

Fairfield NJ 07004

Telephone (800) 628-5565 EXT 108

Signature Shanda McCallum

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			
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.				
☐ Lead Abatement Clearance Certificate	No.				

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued
Control #
Permit #

IDENTIFICATION Block 382.04 Lot 13

Work Site Location 234 HAWAII DRIVE
Brick NJ 08723

Owner in Fee John Skurat

Address SAME AS ABOVE

Tel. ([redacted]

Contractor Mark Four Enterprises

Address 41 Plymouth St
Dunfield NJ 07004

Tel. (800) 628 5545 Ext 108

Lic. No. or Bldrs. Reg. No. 122841

Fed. Emp. No. 22-1775117

s hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [X] OTHER Vinyl Siding

DESCRIPTION OF WORK:

Vinyl Siding

NOTE: If construction does not commence within one (1) year of date of issuance, or f construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 10122.—

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

I.C.C. F170
ev. 3/96)

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

(see reverse si

REQUIRED INSPECTIONS

nstruction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18: T
ncy will carry out such periodic inspections during the progress of work as are necessary to insure that work installed confo
he approved plans and the requirements of the Uniform Construction Code.

owner or other responsible person in charge of work must notify this agency when work is ready for any required inspecti
cified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspecti
be performed within three business days of the time for which they are requested. The work must not proceed in a man
ch will preclude the inspection until it has been made and approval given.

Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections s
   be made in accordance with the requirements of the building subcode;
2. Foundations and all walls up to grade level prior to back filling;
3. All structural framing and connections prior to covering with finish or infill material; plumbing underground services, ro
   piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insula
   installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devi
   and fixtures; mechanical systems equipment.

Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requireme

A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issu
Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

A complete copy of approved plans must be kept on the job site.

ou do not understand any of this information, please ask.

C. Form F-170D

06/27/01 10:11AM 00000004940
XX04 SERV.004
#012305 $263.00
BUILDING $8.00
DCA $271.00
XCAPITAL $0.00
CHECK $271.00
CHANGE $0.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 06/27/2001
Control #
Permit # 01-2305

UCC NEW JERSEY CONSTRUCTION PERMIT

IDENTIFICATION Block 382.04 Lot 13 Qual

Work Site Location 234 HAWAII DR
VINYL SIDING
Owner in Fee SKURAT, JOHN
Address SAME
BRICK, NJ 08723-
Telephone [redacted]

Contractor MARK FOUR ENTERPRISES, INC
Address 41 PLYMOUTH STREET
FAIRFIELD, NJ 07004-
Telephone (201)808-5050
Lic. No. or Bldrs. Reg. No. 122840
Federal Emp. No. 22-1775117

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
VINYL SIDING

PAYMENTS (Office Use Only)

Building	263
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	8
Cert. of Occupancy	0
Other	
Total	271
Check No.	73367
Cash	
Collected By	SC

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 $ 10,122

J. Calcagni

Construction Official

06/27/2001
Date

U.C.C. P170 (rev. 3/96)

F

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 6/27/01
Control #
Permit # 01-2305

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

Block 382.04 Lot 13
Work Site Location 234 Hawaii dr 08723
Owner in Fee John Skwat
Address SAME
Tele. ( )
Contractor Mark Four Enterprises
Address 41 Plymouth St
Fairfield NJ 07004
Tele. (800) 628-5565 Fax ( )
Lic. No. or Bldrs. Reg. No. 122841
Federal Emp. No. 22-1775117

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 Shonda mc Callum

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Vinyl Siding

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date: 7-31-01		
Approved by:		

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			7-31-01	
Barrier-Free				

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [X] Alteration
  - [ ] Roofing
  - [X] Siding
  - [ ] Fence _____ Height (exceeds 6')
  - [ ] Sign _____ Sq. Ft.
  - [ ] Pool
  - [ ] Asbestos Abatement Subchapter 8
  - [ ] Lead Haz. Abatement NJAC 5:17
  - [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$ _____

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

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area — Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Alteration $ 10122.—
3. Total (1+ 2) $ _____

U.C.C. F110
(rev. 3/96)

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

SEARS
HomeCentral

Mark Four Enterprises, Inc.
41 PLYMOUTH STREET
FAIRFIELD, NJ 07004
TEL: 1-800-688-7327
TEL: 973-808-9090
FAX: 973-227-9133

June 5, 2001

Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

To Whom it May Concern:

Enclosed please find a permit application for the installation of Siding at the home of:

John Skurat
234 Hawaii Drive
Brick, NJ 08723

The cost of work is $10,122.00

***Please call 800-628-5565 and ask for Shonda McCallum to indicate the fee for the permit**. Thank you in advance for your prompt handling of this permit.*

Please note: Uniform Construction Code: 5:23-2.17A Minor Work which allows for the start of work once the building department has been verbally informed of the address.

Very Truly Yours,

Shonda McCallum

Shonda McCallum
Project Coordinator

Enclosure

Name JOAN SKURAT Residence Phone: 732-477-4079 Work Phone:

Address 234 HAWAII DR. ☒ Mr. SAME

City BRICK State NJ. Zip 08723 ☐ Mrs.

Block # 382.04 ; Lot # 13

I/we, the owners of the premises described below, hereinafter referred to as "Purchaser" offer to contract with Mark Four Enterprises, Inc. (A SEARS AUTHORIZED CONTRACTOR), hereinafter referred to as "Contractor" to furnish, deliver and arrange for installation of all materials as called for in this contract to the property located at:

SAME

(Street) (City) (State) (Zip)

Type of House ☒ Frame; ☐ Masonry (Requires furring)

Sears approved PRM materials will be furnished and installed to the ☒ Entire; ☐ Front only; ☐ Rear only; ☐ Right side only; ☐ Left side only; ☐ Other NO SOFFIT / FASCIA, GUTTERS, & LEADERS / of the home to these specifications:

YES NO - PLEASE READ CAREFULLY: ONLY THE ITEMS CHECKED "YES" ARE INCLUDED IN YOUR ORDER.

1. ☒ ☐ Remove, replace or repair any visible rotten non-structural wood as deemed necessary by Contractor only where new materials are to be installed unless otherwise noted on item #24. This does not include any exterior sheathing, wood studs, roof decking and/or built in gutter systems.
2. ☐ ☒ Remove existing material on exterior of house.
   ☐ Vinyl ☐ Aluminum ☐ Other ____: Does not include any asbestos removal.
3. ☒ ☐ Sheathe flatwalls designated for siding with ☐3/4"; ☒1/2"; ☐3/8" 1/2 extruded polystyrene insulation without removing existing siding (unless otherwise noted).
4. ☒ ☐ Window Openings: ☐ Custom wrap with Sears approved vinyl clad aluminum # 12 Color MAPLE (no subsills included)
   ☐ Jump over casings with siding and "J" channel # ____ Color ____ NOTE: Interior edge of casing not covered.
   ☐ Channel existing window only (eg. Andersen type or previously wrapped) # ____ Color ____
   ☐ Other details ____
5. ☒ ☐ Cover flatwall areas with Sears approved solid vinyl CHATEAUCLAN siding except those areas noted below. Color to be CHESTNUT
   Exposure to be 04.5 Profile to be OUTLET LAP. Include all custom smooth textured "J" channel trim for window and door casings, custom corner posts, and custom smooth textured finish trim to match siding color unless noted below.
6. ☒ ☐ Custom wrap entrance door casings with Sears approved vinyl clad aluminum. # 2 Color MAPLE Location(s) FRONT + REAR
7. ☐ ☒ Custom wrap fascia areas of home with Sears approved vinyl clad aluminum except those noted below. Color to be ____.
8. ☐ ☒ Cover frieze board with: ☐ horizontal siding; ☐ vertical siding; ☐ vinyl clad aluminum; except areas noted below. Color to be ____.
9. ☐ ☒ Cover soffit areas with Sears approved solid vinyl soffit system, except those noted below. Color to be ____
   Style to be: ____. Apply vented soffit system yes ____ no ____.
10. ☐ ☒ Cover porch ceilings with Sears approved solid vinyl ceiling material, except those noted below. Color to be ____
    Style to be: ____.
11. ☐ ☒ Cover cantilevered overhangs with Sears approved solid vinyl ceiling material, except those noted below. Color to be ____.
12. ☐ ☒ Custom wrap with vinyl clad aluminum: ☐ beams; ☐ posts; except those areas noted below. Color to be ____.
    No wrapping of round or circular columns.
13. ☒ ☐ Cover garage door casings with Sears approved vinyl clad aluminum: ☒ Single; ☐ Double with Mulls; ☐ Double without Mulls. Except those noted below.
    Color to be MAPLE
14. ☐ ☒ Provide and install ____ pair(s) of Sears approved Premium Poly shutters. Color to be ____ Style to be ____.
15. ☒ ☐ Remove and reinstall ☒; dispose existing ☐ 3 PAIR SHUTTERS (no R & R of existing gutters).
16. ☐ ☒ Install new gutters ☐; leaders ☐; to replace those existing, except areas noted below. Color to be ____.
    Gutter screens/guards are not included unless otherwise noted herein.
17. ☒ ☐ Install vinyl louvered vents over existing louvered vents. # of Units 3 Color to be CHESTNUT
    Style to be ____ ☐ Rectangle ☐ Octagon (No triangular vents.)
18. ☒ ☐ Clean-up all job related debris and haul away.
19. ☒ ☐ Provide necessary permits and insurance.
20. ☒ ☐ Mail customer warranty after satisfactory completion by contractor and payment by purchaser.
21. ☐ ☒ On cash transactions installer is to collect balance payable at time of completion.
22. ☒ ☐ All discounts applied.
23. ☐ ☒ No Painting shall be performed.
24. ☒ ☐ Special Instructions/Additional work to be completed: WRAP MAIL BOX WITH COIL STOCK
25. ☒ ☐ All areas and work not to be completed: TWO WINDOW WRAPS, SOFFIT & FASCIA, GUTTERS + LEADERS, FOUNDATION

The following gauge's apply to the following items: vinyl siding .040 - .046, vinyl clad aluminum .019, gutters .032, leaders .019. The following R values apply to polystyrene insulation: 3/4" = 3.8; 1/2" = 2.8", 3/8 = 1.9. Any specifications required by Building, Electric, and Plumbing codes and Fire codes that are not in this original agreement are additional.

		Indicate Form of Payment
The TOTAL PRICE for all Labor & Material (including any applicable discounts) is	$ 10122	
Down Payment	$ 1000	C
Balance Due	$ 9122	

Terms: Finance ☒ (subject to the approval of the Credit Sales Department)
Cash ☐ (final Payment payable to installer upon completion, make checks payable to Sears Siding)
Charge ☐ (subject to card issuer approval)

Payment Code: C=Cash; F = Finance; Charge = Visa, MC, Discover, Amex, Sears

If this is a finance transaction, the agreement for financing is contained in a separate document which is incorporated herein by reference and made a part thereof. I/we the undersigned are hereby authorizing Mark Four Enterprises, Inc. (A SEARS AUTHORIZED CONTRACTOR) and/or any outside independent lending institution to verify and review my/our credit record with an independent credit reporting agency and release them from all liability incurred from inadvertent omissions or errors. If this is a charge card transaction, the agreement for such is contained in separate documents which are incorporated herein by reference and made a part thereof.

Please Note: Purchaser understands that only the work listed above will be done. INITIAL HERE X JS

underneath. If they are too damaged or too old to be replaced the contractor will replace (Labor Only) any new trim the purchaser may furnish.

d) Plants & Shrubs that have to be moved back or clipped back in order to install new siding.

e) Rotten Wood: any that is hidden or unseen at time of estimate. If applicator finds any, they will notify the contractors office to get a price to replace it. The contractor will charge the purchaser Material & Labor Only.

f) Old & Brittle Roofing. When the applicator has to walk on roof or secure pole brackets to install siding, if the roof is brittle or old and shingle damage occurs, the contractor can not be responsible. This applies to asphalt, slate, asbestos or any other roofing material.

g) Gutters & Downspouts: Any gutters that are not removed from your home at the time of installation. The contractor will only cover the gutter board only up to the existing Fasteners or Spikes. If the purchaser wants to cover entire gutter board and applicators have to remove and replace existing gutters the contractor cannot be responsible for old or previously damaged gutters.

h) Gutters & Roofline: Any new or existing gutters installed by our applicators. The contractor will not be liable for short roof shingles or in other words water that does not flow from roof into gutter. The contractor can, at the purchasers request & expense, install a drip edge or help facilitate proper water drainage.

i) Removal of all breakable items from walls and shelves inside the home during the installation.

j) Contractor not responsible for the dis-arming/removal and re-arming/reinstallation of any type of security/alarm and/or satellite dish systems. Purchaser agrees to have any such systems disconnected prior to contractor starting work.

k) Contractor shall not be responsible for the disconnection/re-connection of any and all radon remediation equipment existing at the premises. In the event radon remediation equipment exists at the premises, the purchaser shall be solely responsible for arranging to have a certified radon remediation expert to remove and re-install said equipment.

NOTE #2 Nothing can be changed in this proposal unless it is in writing on a separate form accepted by the purchaser and the contractor.

Verbal understandings and agreements with Representative shall not be binding. All understandings and agreements must be set forth in writing in this Contract.

Initial Here X JAS

START AND COMPLETION: Contractor agrees to start the above described work on/or about 6-30-01 and complete the described work on/or about 8-30-01. Contractor shall not be liable for delays due to causes beyond its control.

UNLESS OTHERWISE SPECIFIED, IT IS UNDERSTOOD THAT THE PURCHASER IS READY FOR THIS WORK TO BEGIN. THE PURCHASE PRICE QUOTED ABOVE WILL BE HONORED ONLY UNTIL 8-30-01.

DATE

NOTICE TO OWNERS

Do not sign this contract in blank. You are entitled to a copy of the contract at the time you sign. Keep it to protect your rights. Do not sign any completion certificate or agreement stating that you are satisfied with the entire project before this project is complete. Home repair contractors are prohibited by law from requesting or accepting a Certificate of Completion signed by the owner prior to the actual completion of the work to be performed under the Contract.

NOTICE TO RETAIL BUYER

You, the Purchaser, may cancel this transaction at any time prior to midnight of the third business day after the date of the transaction, see notice of cancellation form attached hereto for an explanation of this right.

PURCHASER: BY SIGNING BELOW I AGREE TO BE BOUND BY THE TERMS OF THIS CONTRACT. I ACKNOWLEDGE RECEIVING A COPY OF THIS CONTRACT AND TWO COMPLETED COPIES OF THE NOTICE OF CANCELLATION.

SUBMITTED BY Jim Cook SIGNED X John A Shuart 5-31-01

Representative — Purchaser — Date

ACCEPTED BY _____ SIGNED _____

Authorized Signature — Date — Purchaser — Date

IN HOME SALE OR SERVICE
NOTICE OF CANCELLATION

YOU MAY CANCEL THIS TRANSACTION, WITHOUT ANY PENALTY OR OBLIGATION, WITHIN THREE BUSINESS DAYS FROM THE ABOVE DATE.

IF YOU CANCEL, ANY PROPERTY TRADED IN, ANY PAYMENTS MADE BY YOU UNDER THE CONTRACT OR SALE, AND ANY NEGOTIABLE INSTRUMENT EXECUTED BY YOU WILL BE RETURNED WITHIN 10 BUSINESS DAYS FOLLOWING RECEIPT BY THE SELLER OF YOUR CANCELLATION NOTICE, AND ANY SECURITY INTEREST ARISING OUT OF THE TRANSACTION WILL BE CANCELLED.

IF YOU CANCEL, YOU MUST MAKE AVAILABLE TO THE SELLER AT YOUR RESIDENCE, IN SUBSTANTIALLY AS GOOD CONDITION AS WHEN RECEIVED, ANY GOODS DELIVERED TO YOU UNDER THIS CONTRACT OR SALE; OR YOU MAY IF YOU WISH, COMPLY WITH THE INSTRUCTIONS OF THE SELLER REGARDING THE RETURN SHIPMENT OF THE GOODS AT THE SELLER'S EXPENSE AND RISK.

IF YOU DO MAKE THE GOODS AVAILABLE TO SELLER AND THE SELLER DOES NOT PICK THEM UP WITHIN 20 DAYS OF THE DATE OF YOUR NOTICE OF CANCELLATION, YOU MAY RETAIN OR DISPOSE OF THE GOODS WITHOUT ANY FURTHER OBLIGATION. IF YOU FAIL TO MAKE THE GOODS AVAILABLE TO THE SELLER, OR IF YOU AGREE TO RETURN THE GOODS TO THE SELLER AND FAIL TO DO SO, THEN YOU REMAIN LIABLE FOR PERFORMANCE OF ALL OBLIGATIONS UNDER THE CONTRACT.

TO CANCEL THIS TRANSACTION, MAIL OR DELIVER A SIGNED AND DATED COPY OF THIS CANCELLATION NOTICE OR ANY OTHER WRITTEN NOTICE, OR SEND A TELEGRAM TO: SEARS HOME IMPROVEMENTS, 41 PLYMOUTH STREET, FAIRFIELD, NJ 07004.

NOT LATER THAN MIDNIGHT OF 6-3-01

I HEREBY CANCEL THIS TRANSACTION

_____ (Date) _____ (Buyer's Signature)