



NEW JERSEY
REGISTRATION

CONSTRUCTION PERMIT APPLICATION

DEC 2 1999

Div. 5 - 101

1. Proposed Work Site at: 73 B7 RON RD.

2. Name of Owner in Fee: Brick Building Association Tel. (732) 206-9890
Address 1P41 LANES MILL Rd. BRICK NJ 08724
street municipality zip code

3. Ownership in Fee: Public _____ Private X

4. Principal Contractor: SHANE Tel. (732) 206-9890
Address _____

License No. OR, if new home, Builder Reg. No. 027495 Exp. Date 11-1-2000
Federal Employee No. 22-239-8933 FAX: (732) 206-9894

5. Architect or Engineer TOM BARRON & ASSOCIATES Tel. (610) 940-5825
Address 5120 BUTLER PIKE PLYMOUTH MEETING PA 19462

6. Responsible Person in Charge of Work HERMAN STARKEN
Tel. (732) 206-9890 FAX (732) 206-9894

- Full BASEMENT
- ATTACHED DECK
- AUX METER
- SPRINKLER sys.

		Update	Update
1. Building	\$ 798		
2. Electrical	94		
3. Plumbing	272		
4. Fire Protection	138		
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	62		
10. Subtotal			
11. Cert. of Occupancy	130		
12. Other	30		
13. TOTAL	\$ 1524		

1. Number of Stories 1

2. Height of Structure 18' ft.

3. Area — Largest Floor 1573 sq. ft.

4. New Building Area 1995 sq. ft.

5. Volume of New Structure 38465 cu. ft.

6. Construction Classification 5-B

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 _____

(office use only)

1. ☐ Minor Work
2. ☒ New Building
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

142500

150

600

6500

2200

167950

1. ☐ Partial Releases
2. ☒ Prototype Processing

Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re- viewer	Resubmission Dates		Re- viewer
					Approval	Rejection	
<i>[Signature]</i>			1-19-00	EP			
			1-19-00	OB			
			1-19-00	SW			
			1-20-00	un			
Encr	1/6/00		1/6/00	SL			

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

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

1. State Specific Use:

2. Use Group:

3. Change in Use Group, Indicate Former:

IMPORT - MANDATORY FEE

U.C.C. F100-1 (rev. 3/96)

LDS BR 10517667

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 Brick Building Associates - Herman Safir

Address 1841 LAWES MILK Rd.

BRICK NJ 08724

Telephone (732) 206-9292

Signature Michael Landel

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 _____
 Electrical _____
 Plumbing _____
 Fire Protection _____
 Mechanical _____

Energy _____
 Barrier Free _____
 Flood Hazard _____
 As Built Elevation Cert. _____
 Other _____

Other _____

X. CERTIFICATES ISSUED (office use only)

	No.	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. _____	_____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 02/12/2001
Control #
Permit # 00-0253

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1210.26 Lot 8 Qual
Work Site Location 93 BYRON RD DOULTON B
S F DWELLING/BASE/DECK
Owner in Fee/Occupant BRICK BUILDING ASSOCIATES
Address 1841 LANES MILL RD
BRICK, NJ 08724-
Telephone (732)206-9890
Contractor BRICK BLDG ASSOC
Address 1841 LANES MILL RD
BRICK, NJ 08724-
Telephone (732)206-9890 Fax ()
Lic. No. or Bldrs. Reg. No. 027495
Federal Emp. No. 73-2206980

Home Warranty No. 246050
Type of Warranty Plan: ☐ State ☒ Private
Use Group R-3
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

S F DWELLING/BASEMENT/ATTACHED DECK DOULTON B MO

☒ CERTIFICATE OF OCCUPANCY

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☐ CERTIFICATE OF APPROVAL

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, or the owner will be subject to fine or order to vacate:

☐ CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:
☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (____ years); see file

☐ 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.

☐ CERTIFICATE OF COMPLIANCE

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____, ____.

CONSTRUCTION OFFICIAL
U.C.C. F260 (rev. 3/98)

J. Curran

Fee \$ 130
Paid ☒ Check No. 3457
Collected by: SC

Certificate of Occupancy Single Family Dwelling

Location 93 Byron Rd Block 1210.26 Lot 8

BLOCK 1210.26 LOT 8 ADDRESS 93 Byron Rd

Final Inspections needed as follows:

1. Final Building
2. Final Plumbing
3. Final Electric
4. Final Fire
5. Certificate of Compliance BTMUA
6. Final Engineering
7. Report of Compliance, Ocean County Soil
8. Home Owners Warranty (HOW) or Affidavit by Owner

Certificate of Approval Additions and Alterations

Final inspections on all the Technical Sections that were paid for Building, Plumbing, Fire, and Electrical.

Report of Compliance from Ocean County Soils needed when; more than 5000 square feet are disturbed, almost always when more than 1 house is constructed as in Major and Minor Subdivisions. Affordable Housing when applicable. Stamped in Red when review is needed.

	FINALS	FINALS	FINALS
Building	Approved.	2/12/01 OK	2/12/01 OK
Plumbing	Approved.	2/2/01 OK	2/2/01 OK
Fire	Approved.	2/2/01 OK	2/2/01 OK
Electric	Approved.	2/2/01 OK	2/2/01 OK
Ctf of Comp BTMUA	Approved.	2/17/01 OK	2/17/01 OK
HOW	Approved.	2/6/05 OK	2/6/05 OK
Engineering	Approved.	10/30/00 OK	10/30/00 OK
Soil	Approved.	1/5/01 OK	1/5/01 OK
Affordable Housing	Approved.	N/A	N/A
Commercial Occupancy Load	Completed	N/A	N/A
Public Works Garbage Can Receipt	Received	OK	OK
Application for CO	Completed	OK	OK



APPLICATION FOR CERTIFICATE

Date Received
Date Permit Issued
Control #
Permit #
Date Issued

Block 1210. 26 93 - Bunker Rd. IDENTIFICATION
 Work Site Location
 Owner In Fee Bruck Building Assoc. L.P.
 Address 1811 - Lane 7th Road
 Tel. (732) 206-0872
 License No. 027495
 Federal Employee No. 222398933

ACTION

- ☒ CERTIFICATE OF CONSTRUCTION
☐ CERTIFICATE OF CONTINUED OCCUPANCY
☐ LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
☐ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP R3 Previous _____ Current _____

FINAL COST OF CONSTRUCTION: \$ 100,000

(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:

New Pre Family Home

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit, and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate

SIGNED: _____

OWNER/AGENT

- ☐ OWNER
☐ AGENT

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Contractor BRICK BLDG ASSOC
Address 1841 LANES MILL RD
BRICK, NJ 08724-
Telephone (732)206-9890
Lic. No. or Bldrs. Reg. No. 027495
Federal Emp. No. 73-2206980

Construction Official

02/02/2000
Date

Date Issued 02/02/2000
Control #
Permit # 00-0253

PAYMENTS (Office Use Only)	
Building	798
Electrical	94
Plumbing	272
Fire Protection	138
Elevator Devices	0
Other	
DCA Training Fee	62
Cert. of Occupancy	130
Other	30
Total Incl Cred	1534
Check No.	3457
Cash	
Collected By	SC

Date Received 12/21/1999
Date Issued 2/2/00
Control # C22-68
Permit # 00-0253

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

S F DWELLING/BASEMENT/ATTACHED DECK DOULTON B MODEL PROTO

As Boht Foundation Survey Received

```

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

```

[illegible]

Administrative Surcharge
Paid [] Check # _____ Minimum Fee
Collected by: _____ TOTAL FEE
OCA Training Fee

\$		0
\$		0
\$	Incl Cred	798
\$		62

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

4/25/2000 Spacing of ties No. 8

5-10 Sheathing OK - Floor just poured - can't
check extra bolts added in plate - check
on frame insp. fr.

RECEIVED
APR 25 1999
RECEIVED
APR 25 1999

RECEIVED
APR 25 1999
RECEIVED
APR 25 1999

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

**UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION**

Date Received 12/21/1999
Date Issued 2/2/00
Control # C22-68
Permit # 00-0253

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

Block 1210.26 Lot 8 Qual _____
Work Site Location 93 BYRON RD DOULTON B
S F DWELLING/BASE/DECK
Owner in Fee BRICK BUILDING ASSOCIATES
Address 1841 LAWES HILL RD
BRICK, NJ 08724-
Tele. (732) 206-9890
Contractor BRICK BLDG ASSOC
Address 1841 LAWES HILL RD
BRICK, NJ 08724-
Tele. (732) 206-9890 Fax ()
Lic. No. or Bldrs. Reg. No. 027495
Federal Reg. No. 73-2206980

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
			Type	Failure Failure Approval Initial
☒ No Plans Req.	1-19-00	FAY	Footing	
☒ All			Foundation	
☐ Footing			Slab	
☐ Foundation			Frame	
☐ Frame			BarrierFree	
☐ Other			Insulation	
Joint Plan Review Required:			Finishes	
☐ Elect ☐ Plumb ☐ Fire			Energy	
SUBCODE APPROVAL ☐ Elev			Mechanical	
☐ CO ☐ CCO ☐ CA			TCO	
Date:			Other	
Approved By:			Final	
			BarrierFree	

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 1,995 Sq. Ft.
Volume of New Structure 38,465 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$ 142,500
2. Alteration \$ 150
3. Total (1+2) \$ 142,650
Industrialized Building:
☐ State Approved
☐ HUD

C. CERTIFICATION IN LIBU 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**

S F DWELLING/BASEMENT/ATTACHED DECK DOULTON B MODEL PROTO

As Built Foundation Survey Required

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 ATTACHED DECK
Other _____
☐ Demolition

FEE (Office Use Only)

\$	962
	0
	0
	0
	0
	0
	0
	0
	0
	35
	0
	0

Administrative Surcharge \$ 0
Paid ☐ Check # _____ Minimum Fee \$ 0
Collected by: _____ TOTAL FEE \$ Incl Cred 798
DCA Training Fee \$ 62

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/21/1999
Date Issued 2/21/00
Control # C22-68
Permit # 00-0253

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

Block 1210.26 Lot 8 Qual
Work Site Location 93 BYRON RD DOULTON B
S F DWELLING/BASE/DECK
Owner in Fee BRICK BUILDING ASSOCIATES
Address 1841 LANES HILL RD
BRICK, NJ 08724
Tele: (732) 914-0611 Fax ()
Contractor HAC ELECTRICAL CONTRACTORS, IC
Address 1889 RT 9 UNIT 62
TOWNS RIVER, NJ 08755
Tele: (732) 914-0611
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3113881

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3
[] Pole/Pad # [] Temporary [] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work \$ 2,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required
Joint Plan Review Required:
[] Bldg [] Plumb
[] Fire [] Elevator
[] Elect Plans Approved
Date: 1-20-00
Approved By: *[Signature]*

SUBCODE APPROVAL

☒ CO [] CCO [] CA
Date: 2/01/00
Approved By: *[Signature]*

INSPECTIONS

Dates (Month/Day)
Type Failure Failure Approval Initial
Rough 6-2-00 *[Signature]*
Temp Serv 6-7-00 *[Signature]*
Const Serv
TCO
Other
Service
Final 2-19-00 *[Signature]*
Temp. Cut-in-Card Date Issued 6-2-00 *[Signature]*
Final Cut-in-Card Date Issued

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEB (Office Use Only)
18		Lighting Fixtures	
50		Receptacles	
20		Switches	
4		Detectors	
0		Light Poles	
2		Motors-Pract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/P.A.C. Panel	
94		TOTAL NUMBERS	50
0		Pool Permit/with UV Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
1	2	KW Dishwasher	9
0	0	HP Garbage Disposal	0
1	7	KW Central A/C Unit	9
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/4 HP	0
0	0	KW Transformer/Generator	0
1	150	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
0	0	Other FURNACE	9
0	0	Other	0

C. CERTIFICATION IN LIBR OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[] Licensed Electrical Contractor [] Exempt Applicant

Administrative Surcharge \$ 0
Paid [] Check # Minimum Fee \$ 0
Collected by: TOTAL FEE \$ Incl Cred 94
DCA Training Fee \$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/21/1999
Date Issued 2/21/00
Control # C22-68
Permit # 00-0253

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

Block 1210.26 Lot 8 Qual
Work Site Location 93 BYRON RD DOULTON B
S F DWELLING/BASH/BRCK
Owner in Fee BRICK BUILDING ASSOCIATES
Address 1841 LARBS HILL RD
BRICK, NJ 08724-
Tele. (732) 914-0611 Fax ()
Contractor MAC ELECTRICAL CONTRACTORS, IC
Address 1889 RT 9 UNIT 62
TOMS RIVER, NJ 08755-
Tele. (732) 914-0611
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3113881

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3
[] Pole/Pad # [] Temporary [] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work \$ 2,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required
Joint Plan Review Required:
[] Bldg [] Plumb
[] Fire [] Elevator
[] Elect Plans Approved
Date: 1-20-00
Approved By: Wm

SUBCODE APPROVAL

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

INSPECTIONS

Type	Dates (Month/Day)	Failure	Failure	Approval	Initial
Rough					
Temp Serv					
Const Serv					
TCO					
Other					
Service					
Final					
	Temp. Cut-in-Card Date Issued				
	Final Cut-in-Card Date Issued				

D. TECHNICAL SITE DATA

NO.	SIZE	ITBN	FEB (Office Use Only)
18		Lighting Fixtures	
50		Receptacles	
20		Switches	
4		Detectors	
0		Light Poles	
2		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/P.A.C. Panel	
94		TOTAL NUMBERS	50
0		Pool Permit/with UV Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
1	2	KW Dishwasher	9
0	0	HP Garbage Disposal	0
1	7	KW Central A/C Unit	9
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	150	ANP Service	40
0	0	ANP Subpanels	0
0	0	ANP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other FURNACE	9
		Other	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.

Applicant's Signature/Contractor's Seal and Signature
[] Licensed Electrical Contractor [] Exempt Applicant

Administrative Surcharge \$ 0
Paid [] Check / Minimum Fee \$ 0
Collected by: TOTAL FEB \$ Incl Cred 94
DCA Training Fee \$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 12/21/1999
Date Issued 2/2/00
Control # C22-68
Permit # 00-0253

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

Block 1210.26 Lot 8 Qual
Work Site Location 93 BYRON RD DOULTON B
S F DWELLING/HASH/DRCK
Owner in Fee BRICK BUILDING ASSOCIATES
Address 1841 LANES MILL RD
BRICK, NJ 08724-
Tele. (732) 914-0611 Fax ()
Contractor MAC ELECTRICAL CONTRACTORS, IC
Address 1889 RT 9 UNIT 62
TOMS RIVER, NJ 08755-
Tele. (732) 914-0611
Lic. No. or Bldrs. Reg. No. 7774
Federal Emp. No. 22-3113881

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr Class Present Proposed
Heating Systems [X] New [] Existing [] HVAC
Type: [X] Gas [] Oil [] Elect [] Solar
[] Other
Location: BASEMENT
Total Est Cost of Fire Prot Work \$ 600

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
2 Fire Plans Approved
Date: 1-15-00
Approved By: [Signature]
SUBCODE APPROVAL
[] CCO [] CA
Date: 2-2-01
Approved By: [Signature]

INSPECTIONS
Type
Alarm Sys
Suppr Test
Standpipe
Fire Pump
PreEng Sys
Mechanical
Smoke Ctl
TCO
Final
Other

Dates (Month/Day)
Failure Failure Approval Initial
2-1-01 [Signature]
2-1-01 [Signature]
2-1-01 [Signature]

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

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) 4
Supervisory Devices (tamper, low/high air) 0
Signalling Devices (horn/strobes, bells) 0
Other Devices 0
TOTAL 4

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 0

Kitchen Hood Exhaust System 0
Smoke Control System 0
Gas [X] or Oil [] Fired Appliances 2
Other FURNACE 46
Other 0

Administrative Surcharge \$ 0
Paid [] Check # Minimum Fee \$ 0
Collected by: TOTAL FEE \$ Incl Cred 138
DCA Training Fee \$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 12/21/1999
 Date Issued 01/21/00
 Control # C22-68
 Permit # 00-0253

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

Block 1210.26 Lot 8 Qual
 Work Site Location 93 BYRON RD DOULTON B
 S F DWELLING/BASE/DECK
 Owner in Fee BRICK BUILDING ASSOCIATES
 Address 1841 LANES MILL RD
 BRICK, NJ 08724-
 Tele. (732) 914-0611 Fax ()
 Contractor MAC ELECTRICAL CONTRACTORS, IC
 Address 1889 RT 9 UNIT 62
 TONS RIVER, NJ 08755-
 Tele. (732) 914-0611
 Lic. No. or Bldrs. Reg. No. 7774
 Federal Emp. No. 22-3113881

B. FIRE PROTECTION CHARACTERISTICS

Use Group	Present R-3	Proposed R-3	Fire Alarm System
Constr Class	Present	Proposed	New [] Existing []
Heating Systems [X] New [] Existing [] HVAC			Location of Panel:
Type: [X] Gas [] Oil [] Elect [] Solar			Fire Suppression/Standpipe Sys
[] Other			New [] Existing []
Location: BASEMENT			Location of Main Control Valve
Total Est Cost of Fire Prot Work \$	600		

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
[] No Plans Required	Type	Failure Failure Approval Initial
Joint Plan Review Required:	Alarm Sys	
[] Bldg [] Elect	Suppr Test	
[] Plumb [] Elevator	Standpipe	
[X] Fire Plans Approved	Fire Pump	
Date: 1-15-00	PreEng Sys	
Approved By: [Signature]	Mechanical	
SUBCODE APPROVAL	Smoke Ctl	
[] CO [] CCO [] CA	TCO	
Date:	Final	
Approved By:	Other	

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA

Description of Work:
 Water Supply Source
 Method of Alarm/Suppr Sys Superv

Storage Tanks	FBB (Office Use Only)
Type: [] Flammable Liquid [] Combust Liquid	
[] LPG [] LNG Capacity 0 Fuel	
Alarm Systems [] 110v Interconnected NUMBER	
[] System	
Alarm Devices (smoke, heat, pulls, water/flow)	4
Supervisory Devices (tamper, low/high air)	0
Signalling Devices (horn/strobes, bells)	0
Other Devices	0
TOTAL	35
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
Ralon Suppression	0
Other	0
Kitchen Hood Exhaust System	0
Smoke Control System	0
Gas [X] or Oil [] Fired Appliances	2
Other FURNACE	46
Other	0

Administrative Surcharge	\$	0
Paid [] Check #	Minimum Fee	\$ 0
Collected by:	TOTAL FBB	\$ Incl Cred 138
	DCA Training Fee	\$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 12/21/1999
Date Issued 2/2/00
Control # C22-68
Permit # 00-0253

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

Block 1210.26 Lot 8 Qual
Work Site Location 93 BYRON RD DOULTON B
S F DWELLING/BASE/BRCK
Owner in Fee BRICK BUILDING ASSOCIATES
Address 1841 LANES MILL RD
BRICK, NJ 08724-
Tele. (732) 341-4666 Fax ()
Contractor RJB PLUMBING AND HEATING
Address 1725 RT 9
TOMS RIVER, NJ 08753-
Tele. (732) 341-4666
Lic. No. or Bldrs. Reg. No. 9766
Federal Emp. No. 22-2398933

B. PLUMBING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 6,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required
Joint Plan Review Required:
[] R-1 [] R-2 [] R-3 [] R-4
[] R-5 [] R-6 [] R-7 [] R-8
[] R-9 [] R-10 [] R-11 [] R-12
[] R-13 [] R-14 [] R-15 [] R-16
[] R-17 [] R-18 [] R-19 [] R-20
[] R-21 [] R-22 [] R-23 [] R-24
[] R-25 [] R-26 [] R-27 [] R-28
[] R-29 [] R-30 [] R-31 [] R-32
[] R-33 [] R-34 [] R-35 [] R-36
[] R-37 [] R-38 [] R-39 [] R-40
[] R-41 [] R-42 [] R-43 [] R-44
[] R-45 [] R-46 [] R-47 [] R-48
[] R-49 [] R-50 [] R-51 [] R-52
[] R-53 [] R-54 [] R-55 [] R-56
[] R-57 [] R-58 [] R-59 [] R-60
[] R-61 [] R-62 [] R-63 [] R-64
[] R-65 [] R-66 [] R-67 [] R-68
[] R-69 [] R-70 [] R-71 [] R-72
[] R-73 [] R-74 [] R-75 [] R-76
[] R-77 [] R-78 [] R-79 [] R-80
[] R-81 [] R-82 [] R-83 [] R-84
[] R-85 [] R-86 [] R-87 [] R-88
[] R-89 [] R-90 [] R-91 [] R-92
[] R-93 [] R-94 [] R-95 [] R-96
[] R-97 [] R-98 [] R-99 [] R-100

Date: 1-19-00

Approved By: [Signature]

SUBCODE APPROVAL

[X] CO [] CC [] CA

Approved By: [Signature]

Date: 2-2-01

INSPECTIONS

Dates (Month/Day)
Type Failure Failure Approval Initial
Slab 6-1-00 6-1-00 [Signature]
Rough 6-1-00 6-1-00 [Signature]
Water 6-1-00 6-1-00 [Signature]
Sewer 6-1-00 6-1-00 [Signature]
Fixtures 1-31-01 2-2-01 [Signature]
Gas Equip. 6-1-00 [Signature]
Gas Piping 6-1-00 [Signature]
Solar
TCO

Notes 8-18-00 9-13-00 [Signature]

D. TECHNICAL SITE DATA (List all fixtures.)

NO. FIXTURE/EQUIPMENT
2 Water Closet
1 Urinal/Bidet
2 Bath Tub
3 Lavatory
1 Shower
0 Floor Drain
1 Sink
1 Dishwasher
0 Drinking Fountain
1 Washing Machine
1 Hose Bib
1 Water Heater
0 Fuel Oil Piping
1 Gas Piping
0 Steam Boiler
0 Hot Water Boiler
1 Sump Pump
0 Interceptor / Separator
1 Backflow Preventer
0 Greasetrap
0 Sewer Connection
0 Water Service Connection
0 Stacks
0 Other A/C
0 Other AUX/5 HBADS

FBS (Office Use Only)

20
0
20
30
10
0
10
10
0
10
10
35
0
25
0
0
35
0
35
0
0
0
0
35
55

Administrative Surcharge

Paid [] Check [] Minimum Fee
Collected by: TOTAL FBS Incl. Cred
BCA Training Fee

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

RECEIVED BY THE BOSTON
FBI CLERK'S OFFICE
JANUARY 10 1961

RECEIVED BY THE
FBI CLERK'S OFFICE
JANUARY 10 1961

① W.S. not connected to Yoke
unlocked by laborer still failed
1-31-01 - comb at basement with - is busted

6-1-00 - No test on with
8-28-00 - locked
3:05 PM

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

**UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION**

Date Received 12/21/1999
Date Issued 2/2/00
Control # C22-68
Permit # 00-0253

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

Block 1210.26 Lot 8 Qual _____
Work Site Location 93 BYRON RD DOULTON B
S F DWELLING/BASH/DECK
Owner in Fee BRICK BUILDING ASSOCIATES
Address 1841 LARBS MILL RD
BRICK, NJ 08724-
Tele. (732) 341-4666 Fax ()
Contractor RJB PLUMBING AND HEATING
Address 1725 RT 9
TOMS RIVER, NJ 08753-
Tele. (732) 341-4666
Lic. No. or Bldrs. Reg. No. 9766
Federal Emp. No. 22-2398933

B. PLUMBING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Building Sewer Size [] Public Sewer [] Private Septic
Water Sewer Size [] Public Water [] Private Well
Estimated Cost of Plumbing Work \$ 6,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[] No Plans Required
Joint Plan Review Required:
[] Bldg. [] Elect
[] Pipe [] Elevator
[] Plumb. Plans Approved
Date: 1-19-00
Approved By: SN
SUBCODE APPROVAL
[] CO [] CCO [] CA
Approved By:
Date:

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

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURES/EQUIPMENT	FEE (Office Use Only)
2	Water Closet	20
0	Urinal / Bidet	0
2	Bath Tub	20
3	Lavatory	30
1	Shower	10
0	Floor Drain	0
1	Sink	10
1	Dishwasher	10
0	Drinking Fountain	0
1	Washing Machine	10
1	Hose Bib	10
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
1	Sewer Pump 1.5 hp pump	35
0	Interceptor / Separator	0
1	Backflow Preventer	35
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other A/C	35
	Other AUX/5 WRAPS	55

Administrative Surcharge \$ 0
Paid [] Check / Minimum Fee \$ 0
Collected by: TOTAL FEE \$ Incl Cred 272
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 ZONING PERMIT

Permit Approved: December 28, 1999 No. 1999-1919
Block: 1210.26 Lot: 8 Zone: RR3(PRRC)

Property Address: 93 Byron Road

Owner: Brick Building Association

Applicant: Michael Vasilevich Phone: 206-9890

Existing Use: Vacant land

Proposed Use: Single family residential

Proposed Construction: 37'4" x 54'8", 19' high, one story single family dwelling, "D"
Model Doulton Prototype with 5' x 10', 36" high attached deck.

Conditions: The house must be setback at least 25 feet from the front property line, 6 feet from the side property lines and 20 feet from the rear property line. The deck must be setback at least 6 feet from the side property lines and 15 feet from the rear property line.

Major subdivision approved by the Planning Board, Wedgewood Place, Map #G 2831, filed 5/8/98

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that 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.



Sean Kinnevy
Zoning Officer

ZONING

BLOCK 1210.26LOT 8

PROPERTY ADDRESS (number and street) 93 BYRON RD.
NAME OF PROPERTY OWNER BRICK BUILDING ASSOCIATES
PERSONAL NAME OF APPLICANT MICHAEL VASILEVICH
BUSINESS NAME OF APPLICANT WEDGEWOOD PLACE
MAILING ADDRESS OF APPLICANT 1841 LANES MILL RD. BRICK N.J.
TELEPHONE NUMBER OF APPLICANT 732-206-9890 08724

PRESENT USE OF PROPERTY (check all that apply)

☒ Vacant Lot ☐ Single-family dwelling ☐ Multi-family Dwelling
☐ Commercial (please describe) _____

PROPOSED USE OF PROPERTY (check all that apply)

☒ Vacant Lot ☒ Single-family dwelling ☐ Multi-family Dwelling
☐ Commercial (please describe) _____

PROPOSED CONSTRUCTION FRAME - SINGLE FAMILY RANCHW/ FULL BASEMENT

^{3" model}
_{DOUBLE} All dimensions: 37' Width 54' Length 19' Height

Deck or Garage: ☒ Attached ☐ Detached ☐ Height _____Fence: N/A Style _____ Material _____ Height _____

CHECKLIST:

☐ All information completed above☐ Two (2) copies of the property survey map containing:☐ All existing and proposed structures☐ All dimensions of the lot and structures☐ All setbacks from the structures to the property lines☐ All adjacent streets and waterways

☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the site map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

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 Michael Vasilevich Date 12-17-99

BRICK BUILDING ASSOCIATES LP**TOWNSHIP OF BRICK**

DATE	INVOICE NO.	DESCRIPTION	INVOICE AMOUNT	DEDUCTION	BALANCE
1-20-00	26-8BLDG	BUILDING PERMIT 93 BYRON	1524.00	.00	1524.00
CHECK DATE	1-25-00	CHECK NUMBER 3457	TOTALS > 1524.00	.00	1524.00

PLEASE DETACH AND RETAIN FOR YOUR RECORDS

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

Don't mess

BLOCK 1210.26 LOT 8 SITE ADDRESS 93 Byron Rd
TYPE OF SITE Residential / Commercial TYPE OF BUSINESS

APPLICANT Beck Block Assoc. PHONE NUMBER 206-958-10
APPLICANT ADDRESS 1541 Lakeside Ave. SE CITY & STATE Bellevue WA
PERMIT # C 22-68 NAME OF BUSINESS Wedgewood Place

INCLUSIONARY DEVELOPMENT

☐ Affordable Fee Required _____ Date _____
Down Payment _____ Date _____
Balance _____ Date _____
Paid In Full _____ Date _____
☐ Market Rate No Fee Required

MANDATORY DEVELOPER FEES

☒ Residential is .005 %
☐ Commercial is .01 %

Estimated Assessment \$ 175,000.00 Date 1-10-00
Estimated Required Fee \$ 875.00
Required Deposit on Estimate \$ 437.50

Check # 3377 Receipt # 54855

Actual Assessment \$ _____ Date _____

Actual Required Fee \$ _____

Minus Deposit of Estimate \$ _____

Balance Due \$ _____ Date _____

Check # _____ Receipt # _____

Amount Paid In Full \$ _____

Fees Imposed To Date _____
Fees Reached \$15,000 _____ Date _____

ORIGINAL
ILLEGIBLE

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

Carol A. Wolfe
Affordable Housing Administrator

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Douglas B



Joseph C. Scarpelli, Mayor

Township Council:

Helen Fayad - President

Martin J. Anton

Victor Cantillo

Gregory S. Kavanagh

Mary Lou Powner

Kathy M. Russell

Frederick J. Underwood, Sr.

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # _____

APPROVAL DATE: _____

(Planning Board/BOA)

DATE: 1-6-00

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 1210.26 LOT 8 SITE ADDRESS 93 Byron Rd

TYPE OF SITE _____

(Residential/Commercial)

TYPE OF BUSINESS Wedgewood Place

APPLICANT Brick Bldg Assoc. CITY & STATE Brick, NJ

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

\$

Frederick R. Millman, CTA, Tax Assessor

Date

☐ Please review the attached application for a final assessed value for the construction at the above referenced site:

\$

**ORIGINAL
ILLEGIBLE**

Frederick R. Millman, CTA, Tax Assessor

Date

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

Joseph C. Scarpelli, Mayor

Township Council:

Frederick J. Underwood, Sr. - President
Stephen C. Acropolis
Kimberley S. Casten
Steven N. Cucchi
Gregory S. Kavanagh
Kathy M. Russell
Tony R. Shupin



OFFICE OF AFFORDABLE HOUSING

Carol A. Wolfe

Affordable Housing Administrator

(732) 262-1048

Fax: (732) 262-8954 or (732) 920-1456

<http://www.twp.brick.nj.us>

January 10, 2000

Brick Building Associates
1841 Lanes Mill Road
Brick, NJ 08724

RE: Mandatory Development Fees for Wedgewood Place as follows:

BLOCK & LOTS	ADDRESS	ASSESSMENT	TOTAL FEE	½ DUE
Block 1210.22, Lot 17	219 Wordsworth Rd.	\$160,000.00	\$ 800.00	\$ 400.00
Block 1210.26, Lot 5	81 Byron Rd	\$175,000.00	\$ 875.00	\$ 437.50
Block 1210.26, Lot 6	85 Byron Rd.	\$160,000.00	\$ 800.00	\$ 400.00
Block 1210.26, Lot 7	89 Byron Rd.	\$185,000.00	\$ 925.00	\$ 462.50
Block 1210.26, Lot 8	93 Byron Rd.	\$175,000.00	\$ 875.00	\$ 437.50
Block 1210.26, Lot 9	80 Wordsworth Rd.	\$175,000.00	\$ 875.00	\$ 437.50
Block 1210.26, Lot 22	1 Shelly Rd.	\$180,000.00	\$ 900.00	\$ 450.00

To Whom It May Concern:

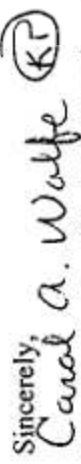
The Township of Brick has enacted Ordinance 354-2C-93 in conjunction with our Fair Share Plan, which was certified by the New Jersey Council on Affordable Housing on February 3, 1993.

This Ordinance requires that residential development applicants pay a fee in the amount of one half of one percent of the assessed value per project. The municipal Tax Assessor has estimated the value of the work to be completed under the construction permit applications received on December 21 & 29, 1999, for the blocks and lots as listed above.

Therefore, you are required to submit one half of the estimated fee in the form of a check made payable to the Township of Brick for deposit into the Affordable Housing Trust Fund. Upon your request for a final Certificate of Occupancy/Approval, your permit application will again be processed. If the assessed value is adjusted at that time, the balance due on your account will be adjusted accordingly. All remaining fees will be collected prior to issuance of the Certificate of Occupancy.

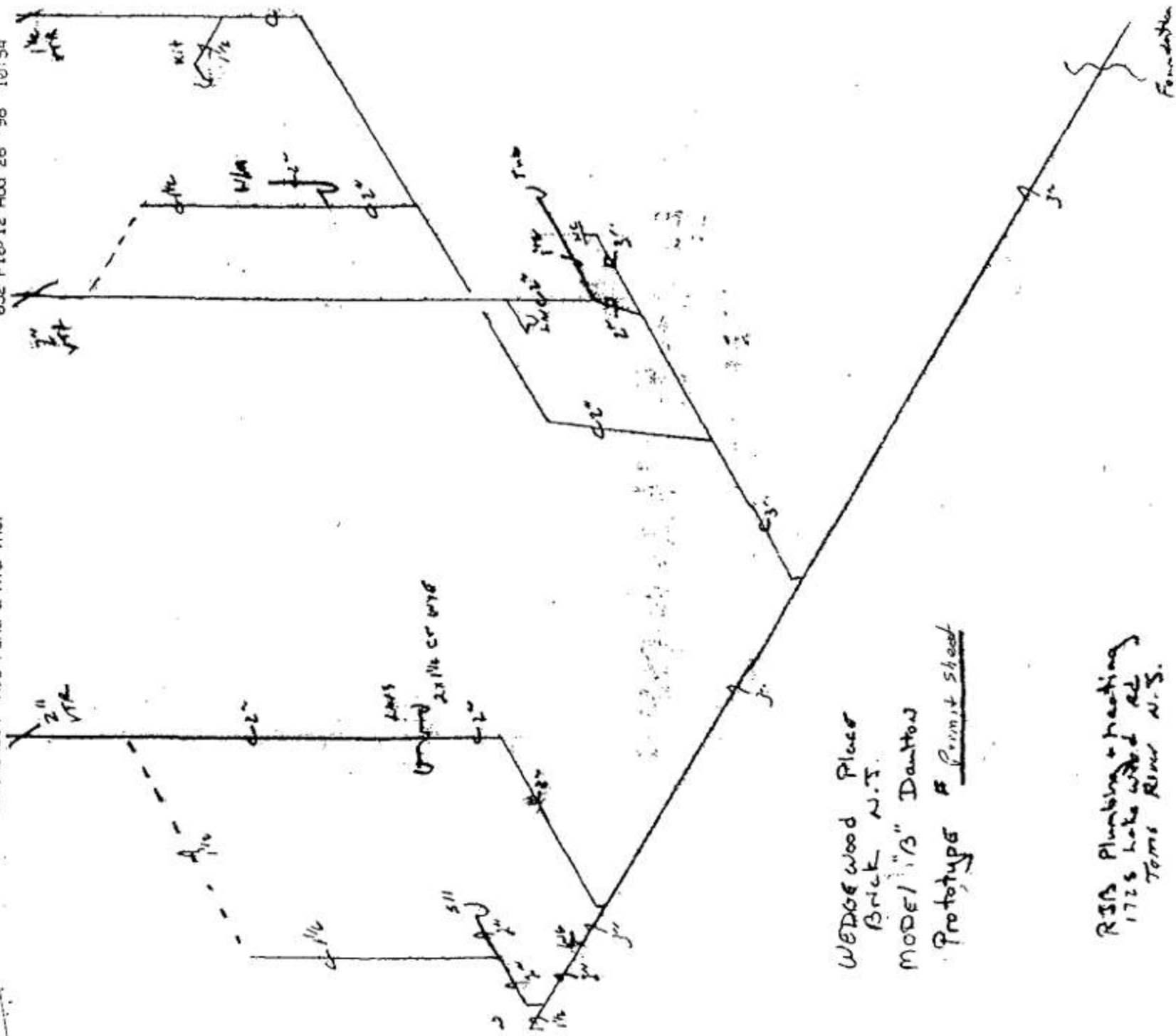
May I suggest that you contact this office approximately two weeks prior to your request for a C.O. so as to allow adequate time for the Assessor to conduct a final evaluation of the site.

If you have any questions, please contact me.

Sincerely,
Carol A. Wolfe 

Carol A. Wolfe, Affordable Housing Administrator
CAW/kt

MandDevFecCedarVillage2/99

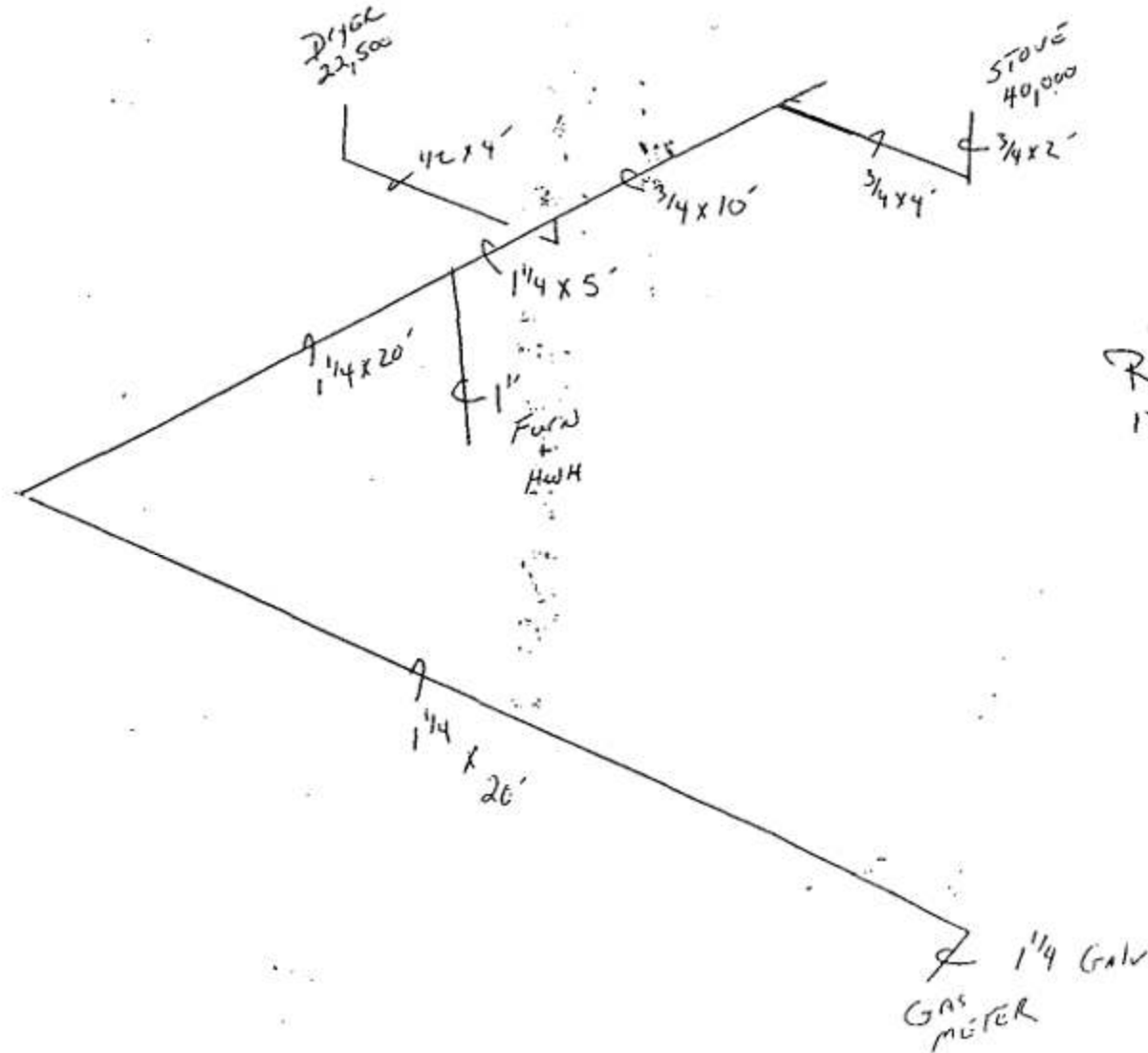


WEDGEWOOD PLACE
BRICK N.Y.
MODEL "B" DANTON
PROTOTYPE # PERMIT SHEET

RJB Plumbing & Heating
1726 Lake Wood Rd.
Toms River N.J.

James Belang

Drafting
Gas Rough



RSD Plumbing & Heating
1725 Lakewood Rd
Toms River N.J.

Wedgewood Pl.
Brick N.J.

SIZING FOR WATER AND SEWER SERVICES

Property Owner Brick Building Associates Date _____

Property Address 93 Byron Road Block 12/10.26 Lot 8

Zoning R-3 Use Group _____

Contractor RJB Plumbing/Heating License No. Registration 9766

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu) Water Units	(dfu) Drainage Units
1. Water Closet	_____	()	()
2. Lavatory	_____	()	()
3. Bath Tub	_____	()	()
4. Shower Stall	_____	()	()
5. Kitchen Sink	_____	()	()
6. Service Sink	_____	()	()
7. Laundry Tray	_____	()	()
8. Dishwasher	_____	()	()
9. Washing Machine	_____	()	()
10. Urinal	_____	()	()
11. Floor Drain	_____	()	()
12. Drinking Fountain	_____	()	()
13. Air Conditioner (water cooled)	_____	()	()
14. Dental Unit	_____	()	()
15. Lawn Sprinkler No. of Heads	_____	()	()
16. Fire Sprinkler No. of Heads	_____	()	()
17. _____	_____	()	()
18. _____	_____	()	()

Total _____

Gallons per minute _____

Size of Service _____

Date: _____

Approved: _____

Brick Township Plumbing Inspector

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY
1551 Highway 88 West, Brick, New Jersey 08724-2399
(908)458-7000 • FAX (908)458-7725

APPLICATION FOR AUXILIARY WATER METER

DATE: 12-17-99

Applicant's Name: Brick Bldg Association Telephone No. 732-206-9890

Mailing Address: 1841 LANES MILL RD. BRICK NJ 08724

Service Location: 93 BYRON ROAD

Account Number: R337895 Block: 140.26 Lot: 8

Size of Existing Service: 1" Size of Existing Meter: 3/4"

Michael Casabian

Applicant's Signature

Carol Hundel

Authority Representative

THIS APPLICATION IS VALID FOR 30 DAYS FROM DATE OF APPLICATION.

Please note the following:

At the customer's option, a separate account may be established, subject to all conditions of the rate schedule as applicable to water usage.

After completing this application, the following steps must be taken:

1. Obtain special device permit from the Township of Brick Plumbing Department.
2. A licensed plumber or homeowner must cut into the pipe BEFORE the existing yoke and install a second meter yoke.
3. Call the Township of Brick Plumbing Department (262-1000) for inspection.
4. Call Brick Utilities for installation of the meter. A copy of the completed permit, showing inspection approval, will be required before the meter is installed.
5. It is the customer's responsibility to insure that the meter is installed and the permit was approved. Failure to do so may result in a tampering fee of \$250.00 and service will be terminated.
6. A charge for cost of the meter will be applied to the first billing. Quarterly bills for usage only will be issued.

BLK 1210.26 Lot 8
93 Byron Rd.

SINGLE FAMILY DWELLING CHECKLIST

1. Construction Permit Jacket signed & completed ☒ Yes ☐ No
2. Zoning Application Completed ☒ Yes ☐ No
3. Two true size surveys- signed & sealed ☒ Yes ☐ No
4. Engineering form- checklist or major subdivision ☒ Yes ☐ No
5. Completed debris form- destination of debris ☒ Yes ☐ No
6. Shade tree application ☒ Yes ☐ No
7. BTMUA availability statement ☒ Yes ☐ No
8. Bldg, Plmg, Fire, & Electric subcode info completed ☒ Yes ☐ No
9. Gas Pipe drawing ☒ Yes ☐ No
10. Water schematic for plumbing ☒ Yes ☐ No
11. Brochures- furnace, boiler, a/c, or fireplace ☒ Yes ☐ No
12. Options
Fireplace- Gas or wood (circle one)
Deck & P.
Basement or Crawl Space (circle one)
☒ Yes ☐ No
☒ Yes ☐ No
13. Two sets of plans- architecturals signed & sealed- all pages
Homeowner drawings- signed by homeowner- all pages ☒ Yes ☐ No
14. Breakdown cost for each subcode on jacket & counter form ☒ Yes ☐ No
15. Separate alteration costs for decks, fireplaces & etc. ☒ Yes ☐ No

Any information not included in package will not be accepted at the front counter

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

1551 Highway 88 West
Brick, New Jersey 08724
(732) 458-7000

**STATEMENT OF UTILITY SERVICES
FOR APPROVED DEVELOPMENTS**

NAME: BRICK BUILDERS ASSOC. BTMUA FILE NO. 1528

ADDRESS: 26 COLUMBIA TURNPIKE TELEPHONE #

FLORHAM PARK, N.J. 08724

DEVELOPMENT NAME: WEDGEWOOD PLACE

Under an approved application, the developer is required to install all water and sewer services to the above development. If the developer fails to install the water and sewer services, the BTMUA shall not be obligated to complete this work.

No connections are to be made until all fees have been paid, and construction of utility lines has been inspected and approved.

The following properties can be connected to the sanitary sewer and water when the lines have been installed and tested by the developer, and approved by BTMUA:

Block	Lot	Service Location	BTMUA Account #	Water Available	Sewer Available
1210.26	1	65 BYRON ROAD	R337811	Phase II - Not Installed	
1210.26	2	69 BYRON ROAD	R337829	✓	✓
1210.26	3	73 BYRON ROAD	R337837	✓	✓
1210.26	4	77 BYRON ROAD	R337845	✓	✓
1210.26	5	81 BYRON ROAD	R337853	✓	✓
1210.26	6	85 BYRON ROAD	R337861	✓	✓
1210.26	7	89 BYRON ROAD	R337879	✓	✓
1210.26	8	93 BYRON ROAD	R337895	✓	✓
1210.26	9	97 BYRON ROAD	R337900	Phase II - Not Installed	

Date: June 28, 1999 Signed by: Tariq M. S. Siddiqui K.B.
Tariq M.S. Siddiqui, P.E.
Director of Engineering

RECEIPT OF FEES

LOT: 8

5:33:51

INSPECTION-

NOTES

APPLICATION FOR SHADE TREE PERMIT

ORDINANCE # 158-E-99 735-206-9990

Telephone

1. Name of Applicant & Address Breck Building ASSOCIATES
1841 LANES MILL RD. BRECK NV 89704

Give name and address of person applying for permit. If applicant is other than owner, give and identify names and addresses of both.

2. Property is Block 20.26, Lot(s) 8.
This information is available from your deed or tax bill.

3. Address if different from applicant 93 Byron Road
Give street and number if one is assigned. If there is no street number, estimate distance and direction from nearest intersection or other easily recognizable land mark.

4. Location of trees on property NONE and number of trees presently on property NONE.

A. FOR INDIVIDUAL BUILDING LOTS:

Provide either a copy of a recent survey or a sketch of the property drawn to scale including any pertinent distances not easily read from the sketch.

Include existing buildings, driveways and other constructions in SOLID LINES. Show all existing trees (see note below) with a circle. Trees may be keyed as to genus and species if desired, otherwise include a C inside circle for coniferous (pine, etc.) trees and A D for deciduous trees.

Note* Trees to be removed will have an X through the circle.

If removal is desired because of proposed construction of any kind, include such construction in DOTTED LINES and identify.

If planting of new trees (including but not limited to those in note below) is proposed in application to replace those removed, or for any other reason, show approximate proposed location with a DOTTED CIRCLE and specify species and approximate planting size (height and caliper).

There should be a minimum of one tree for each 2000 square foot after all tree removal and replacement. (e.g. an 80 X 100 Ft lot includes 8000 SF and would require a minimum of 4 trees).

B. FOR OTHER ACREAGE

Include copy of subdivision plot plan or equivalent outlining all wooded areas and solitary trees. Identify each (e.g. "heavily wooded mature oak with scattered Dogwood" or "sparsely wooded mixed Pitch Pine and small Oak, etc).

Same minimum of one tree per 2000 SF as above is required.

NO TREES

APPLICATION FOR SHADE TREE PERMIT- Ordinance # 158-E-99
Page 2

Note*

"Tree" for the purpose of this permit means (1) any live coniferous tree 4" or more DBH (diameter breast high) (2) any deciduous tree (live) 3" or more DBH, (3) any live American Holly or Dogwood 1" or more, one foot above ground and (4) any live Laurel 3" or more across root crown.

Name of Applicant Brick Building Associates Date _____
Address 1841 LANES Mill Rd
BRICK, NJ 08724
Block 1210.26 Lot 8
Residential ☒ Commercial ☐

Address if different from applicant 93 Byron Road

LOCATION OF TREES ON PROPERTY

NUMBER OF TREES PRESENTLY ON PROPERTY

FEES

\$5.00 per tree (maximum \$25.00) on individual building lot

\$25.00 per acre for approved subdivisions/site plans

AMOUNT OF FEE

Reviewed by

Approved

Township Engineer

Date

TOWNSHIP OF BRICK
OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723



Joseph C. Scarpelli, Mayor

Township Council:

Victor Cantillo - President

Marlin 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 Curtazzo

Construction Official

(732) 262-1024

Fax (732) 262-8954

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

MAJOR SUBDIVISION CHECKLIST

DEVELOPMENT WedgeWood Place PLANNING BOARD

CONTRACTOR Brick Building Associates P.P.

BLOCK 1210.26 LOT 8 SECTION I

ADDRESS 93 Byron Road

***** ABOVE ITEMS MUST BE COMPLETED BEFORE ACCEPTING PLOT PLAN *****

ACCEPTABLE

DEFICIENT

REMARKS

1) SURVEY / PLOT, SIGNED & SEALED

2) RESOLUTION COMPLIANCE

3) INSPECTION FEES POSTED

4) PERFORMANCE BOND POSTED

5) STREET LIGHTING MONEY POSTED

6) PROPOSED GRADING

7) PRELIMINARY SITE PLAN

SIGNED & SEALED

8) PORTION OF SITED PLAN ATTACHED

ACCEPTED X

SIGNED

REJECTED

REASON(S)

SIGNED

DATE

1/6/00
DATE

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER Brick Building Ass. DATE 1-19-00
 PROPERTY ADDRESS 93 BYRON RD BLOCK 1210-26 LOT 8

ZONING _____ USE GROUP R-3

CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMBING FIXTURES NUMBER (sfu) WATER UNITS (dfu) DRAINAGE

1: BATHROOM GROUP	<u>2</u>	(<u>1</u>)	<u>7</u>	()
2: KITCHEN GROUP	<u>1</u>	(<u>1</u>)	<u>2</u>	()
3: WATER CLOSETS	_____	()	_____	()
4: LAVATORY	_____	()	_____	()
5: BATH TUB	_____	()	_____	()
6: SHOWER STALL	_____	()	_____	()
7: KITCHEN SINK	_____	()	_____	()
8: SERVICE SINK	_____	()	_____	()
9: LAUNDRY TRAY	_____	()	_____	()
10: DISHWASHER	_____	()	_____	()
11: WASHING MACHINE	<u>1</u>	(<u>1</u>)	<u>4</u>	()
12: URINAL	_____	()	_____	()
13: FLOOR DRAIN	_____	()	_____	()
14: DRINK FOUNTAIN	_____	()	_____	()
15: AIR COND WATER COOLED	_____	()	_____	()
16: DENTAL UNIT	_____	()	_____	()
17: LAWN SPRINKLE	_____	()	_____	()
18: FIRE SPRINKLE	_____	()	_____	()
19: HOSE BIBS	<u>1</u>	(<u>1</u>)	<u>2.5</u>	()

TOTAL 15.5

GALLONS PER MINUTE 11

SIZE OF SERVICE 3/4

DATE: 1-19-00

APPROVED: Daniel Newman

TOWNSHIP OF BRICK



For Information Call: 93 Byron
Permit No. 00-0253

APPROVAL FOR
BUILDING

	Date	Inspector
☐ Footing		
☐ Foundation		
☐ Frame		
☐ Mechanical		
☐ Other		
☒ Final	<u>2-12-01</u>	<u>g</u>

U.C.C. Form F-221B

**THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY**

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
458-7000

CERTIFICATE OF COMPLIANCE

Date

2/7/01

NAME..... Brick Builders Assoc.

ADDRESS..... 26 Columbia Turnpike, Florham Park

PROPERTY LOCATION..... 93 Byron Rd.

Account No..... R337895

1210.26

8

Block

Lot

5690417

I hereby certify that the above applicant has complied with all Rules
and Regulations of this Authority and has paid all required fees and charges.

For the Authority

Carol C. Hurd

QUALITY BUILDERS WARRANTY

C O R P O R A T I O N

325 N. Second Street, Wormleysburg, PA 17043
telephone: 717 737-2522
fax: 717 737-4288

TO : Local Construction Officials
FROM: Quality Builders Warranty Corporation
RE : Confirmation of Home Enrollment and Warranty Coverage

This will serve as notification that the "home" listed below has been accepted and approved for final enrollment in the 10-year Quality Builders Warranty Corporation Program per NJAC 5:25-5.5 (a) iii.

Builder's Name : BRICK BUILDING ASSOCIATES LP
Reg. No : 70421
Purchaser's Name : CARLETTA
House Number : 93 Street : BYRON ROAD
Lot : 8 Development : WEDGEWOOD PLAZA
Block/Job : 1210.26/1210.26
City : BRICK
County : OCEAN
State : NJ

QBW Enrollment Number : 246050

Kathleen P. Seago
Authorized Representative of QBW, 2/6/01

(To be presented by Builder when seeking the Certificate of Occupancy)

QUALITY BUILDERS WARRANTY

C O R P O R A T I O N

325 N. Second Street, Wormleysburg, PA 17043
telephone: 717 737-2522
fax: 717 737-4288

TO : Local Construction Officials

FROM: Quality Builders Warranty Corporation

RE : Confirmation of Home Enrollment and Warranty Coverage

This will serve as notification that the "home" listed below has been accepted and approved for final enrollment in the 10-year Quality Builders Warranty Corporation Program per NJAC 5:25-5.5 (a) iii.

Builder's Name : BRICK BUILDING ASSOCIATES LP

Reg. No : 70421

Purchaser's Name : CAIRNS

House Number : 93 Street : BYRON ROAD

Lot : 8 Development : WEDGEWOOD PLAZA

Block/Job: : 1210.26

City : BRICK

County : OCEAN

State : NJ

QBW Enrollment Number : 246050

November 27, 2000

Karen Bailey
Authorized Representative of QBW
HW-RR

(To be presented by Builder when seeking the Certificate of Occupancy)

QUALITY BUILDERS WARRANTY

C O R P O R A T I O N

325 N. Second Street, Wormleysburg, PA 17043
telephone: 717 737-2522
fax: 717 737-4288

TO : Local Construction Officials

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Purchaser's Name : CAIRNS

House Number : 93 Street : BYRON ROAD

Lot : 8 Development : WEDGEWOOD PLAZA

Block/Job : 1210.26

City : BRICK

County : OCEAN

State : NJ

QBW Enrollment Number : 246050


Authorized Representative of QBW
HW-RR

November 27, 2000

(To be presented by Builder when seeking the Certificate of Occupancy)



OCEAN COUNTY SOIL CONSERVATION DISTRICT

714 LACEY ROAD, FORKED RIVER, N.J. 08731

Phone 609-971-7002

Fax 609-971-3391

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: Back
PROJECT: WEDGEWOOD PLACE SCD NO.: 5889
BLOCK NO.(s) 1210, 26 LOT NO.(s) 1, 8, 9, 13

Complete Compliance ☒Temporary Compliance ☐

Block No.	Lot No.	Conditions
-----------	---------	------------

ORIGINAL
ILLEGIBLE

FAX MEMO

8 PAGES / DATE / FAX /
TO: Hoboken
FROM: AME
CC: ESCB
PH: / FAX /

TOTAL FEES DUE: \$ 225.-

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: [Signature]AUTHORIZED DISTRICT SIGNATURE: [Signature]DATE: 1/5/01

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

Don'tonB

BLOCK 1210.26 LOT 8 SITE ADDRESS 93 Byron Rd
TYPE OF SITE Residential / Commercial TYPE OF BUSINESS

APPLICANT Brick Bldg Assoc. PHONE NUMBER 206-9890
APPLICANT ADDRESS 1841 Lanes M, 11 Rd CITY & STATE Brick NJ
PERMIT # C 22-68 NAME OF BUSINESS Wedgwood Place

INCLUSIONARY DEVELOPMENT

☐ Affordable Fee Required _____ Date _____
Down Payment _____ Date _____
Balance _____ Date _____
Paid In Full _____ Date _____
☐ Market Rate No Fee Required

MANDATORY DEVELOPER FEES

- ☒ Residential is .005 %
☐ Commercial is .01 %

Estimated Assessment \$ 175,000.00 Date 1-10-00
Estimated Required Fee \$ 875.00
Required Deposit on Estimate \$ 437.50 Date 1-18-00
Check # 3351 Receipt # 5455
Actual Assessment \$ 111,000.00 Date 11-21-00
Actual Required Fee \$ 555.00
Minus Deposit of Estimate \$ 437.50
Balance Due \$ 477.50 Date 11-21-00
Check # 4451 Receipt # 44100
Amount Paid In Full \$ 517.50

Fees Imposed To Date _____ Date _____
Fees Reached \$15,000 _____

ORIGINAL
ILLEGIBLE

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

Carol A. Wolfe
Affordable Housing Administrator

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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

Douglas B



Joseph C. Scarpelli, Mayor

Township Council:

Helen Fayad - President

Martin J. Anton

Victor Cantillo

Gregory S. Kavanagh

Mary Lou Powner

Kathy M. Russell

Frederick J. Underwood, Sr.

Office of Affordable Housing

Carol A. Wolfe

Affordable Housing Administrator

(732) 262-1048

CASE #

APPROVAL DATE:

(Planning Board/BOA)

DATE: 1-6-00

TO: Frederick R. Millman, CTA

Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 1210.26 LOT 8 SITE ADDRESS 93 Byron Rd
TYPE OF SITE (Residential) Commercial TYPE OF BUSINESS Wedgewood Place

APPLICANT Brick Bldg Assoc. CITY & STATE Brick, NJ

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

\$

175,000⁰⁰

Frederick R. Millman, CTA, Tax Assessor

Date

1/7/00

☒ Please review the attached application for a final assessed value for the construction at the above referenced site:

\$

175,000⁰⁰

Frederick R. Millman, CTA, Tax Assessor

Date

10/30/00

INSPECTOR: N. MUR GOLO

JOB: Wedgwood

SECTION:

WEATHER: Sunny

DATE: 10-30-00

TYPE OF WORK: Final

LOCATION: 93 Byron Rd.

TEMPERATURE: 69°

BLOCK: 1210.26

LOT: 8

ENGINEERING RECOMMENDATIONS FOR
CERTIFICATE OF OCCUPANCY
INSPECTION CHECK LIST

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway	X	
2. Grading	X	
3. Sidewalk	X	
4. Road Pavement	No Top	
5. Landscaping & Sodding	X	
6. Clean-up Procedures	X	
7. Note on going construction in immediate area	X	
8. Safety	X	

COMMENTS REFERENCING ITEM NUMBER:

RECOMMENDATIONS:

☐ TEMP. C.O.

☒ FINAL C.O.

☐ DETAILED REINSPECTION

☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED

☐

PLANNING BOARD ENGINEER

☐

MUNICIPAL ENGINEER

I, _____, Authorized representative of

_____, hereby acknowledge the
above deficiencies, and further realize that the Certificate of Occupancy will be conditioned upon the acceptable resolution
thereof within _____ days of the issuance of Certificate of Occupancy.

ADDRESS: 1725 Route 9
10ms River NJ 08753
PHONE: 732-341-4666
LIC#: 9766
LIC EXPIRATION DATE: 10/1/00
FEDERAL EMPLOYEE (or S.S.A.):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO. FIXTURE/EQUIPMENT

2 Water Closet
Urinal / Bidet
2 Bath Tub
3 Lavatory
1 Shower
1 Floor Drain
1 Sink
1 Dishwasher
1 Drinking Fountain
1 Washing Machine
1 Hose Bibb
1 Gas Piping
1 Fuel Oil Piping
1 Water Heater
1 Steam Boiler
1 Hot Water Boiler
1 Sewer Pump
1 Interceptor / Separator
1 Backflow Preventer
1 Greasetrapp
1 Water Cooled A/C or Refrig. Unit
1 Sewer Connection
1 Septic (Disposal System) Closure
1 Water Service Connection
1 Gas Service Connection
1 Active Solar System
1 Vent Through Roof SUMP PUMP
5 HANDS OTHER SPRINKLER SYS.
1 AUX METER

Estimated Cost of Plumbing Work: \$ 6500.00

Signature: *[Signature]* Contractor
OWNER: *[Signature]* Contractor
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by: _____
Date: _____
CONTRACTOR AFFIX SEAL:

ADDRESS: 1889 Route 9
10ms River NJ 08753
PHONE: 732-914-0614
LIC#: 7724
FEDERAL EMPLOYEE (or S.S.A.):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☒ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☒ New ☐ Existing
Location of Furnace / Boiler: BASEMENT

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: 4

Heat Detectors: _____

Total: _____

Stand Pipe: _____

Kitchen Hood Exhaust Systems: _____

Pre-Engineered Systems: _____

Co2 Suppression: _____

Halon Suppression: _____

Foam Suppression: _____

Dry Chemical: _____

Wet Chemical: _____

Gas or Oil Fired Appliances & APPLIANCES

Other: FURNACE

Other: _____

Estimated Cost of Fire Protection Work: \$ 600.00

Signature: _____

Owner: _____

Contractor: _____

SUBCODE APPROVAL:

PLANS: Required ☐ Approved ☐

Owner in Fee: BRICK BUILDING ASSOCIATES Control #:
Address: 1841 LANES MILL ROAD Permit #:
BRICK

State: NJ Zip: 08724 Phone: (732) 206-9890
SS #: 22-239-8933 Provide only if Applicant is owner

ELECTRICAL

CONTRACTOR: MAG ELECTRIC
ADDRESS: 1899 RTE 9 UNIT 62
Toms River NJ 08753
PHONE: 732-914-0611
LIC #: 7774-A EXP. DATE:
FEDERAL EMPLOYER (or SS #):

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
Lighting Fixtures	18	
Receptacles	50	
Switches	20	
Detectors	4	
Light Poles		
Motors - Enc. HP	2	
Emergency & Exit Lights		
Communications Points		
Alarm Devices/E.A.C. Panel		

TOTAL NUMBERS

Pool/Spa/Hot Tub Lights (94)
Storable Pool/Spa/Hot Tub
KW Elec. Range / Receptacle XV
KW Oven / Surface Unit XW
KW Elec. Water Heater XV
KW Elec. Dryer / Receptacle XW
KW Dishwasher 1
HP Garbage Disposal 1
KW Control A/C Unit HP
HP/KW Space Heater/Air Handler HP/XW
KW Baseboard Heat XW
HP Motors 1/2 HP HP
KW Transformer/Generator 150
AMP Service AMP
AMP Subpanels AMP
AMP Motor Control Center AMP
AMP Elec. Sign/Outline Light XW
Other FURNACE

Estimated Cost of Electrical Work: 2200.00

Signature (print name):

Estimated Cost of Electrical Work: 5

Signature (print name):

Owner or Contractor or

URCODE APPROVAL:

LAN: Required or Approved or

BUILDING SUBCODE

CONTRACTOR: BRICK BUILDING ASSOCIATES
ADDRESS: 1841 LANES MILL ROAD
BRICK NJ 08724
PHONE: 732-206-9890
LIC #: 027495
LIC. EXPIRATION DATE: 11-1-99
FEDERAL EMP. # (or SS #): 22-239-8933

TECHNICAL SITE DATA

DESCRIPTION OF WORK: (photo)

NEW SINGLE FAMILY, DETACHED
RANCH STYLE HOUSE WITH FULL
BASEMENT AND ATTACHED DECK

TYPE OF WORK FRAME

☒ New Building

☐ Addition

☐ Alteration DECK ☐ Fence: Height (6' or More)

☐ Roofing ☐ Sign: Sq. Ft.

☐ Siding ☐ Pool (In Ground)

☐ Other: ☐ Pool (Above Ground)

☐ Other: ☐ Asbestos Abatement

☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP R-3 Present: Proposed:

CONSTR. CLASS 5-B Present: Proposed:

No. of Stories: 1

Height of Structure: 19'

Area - Largest Floor: 1573

New Building Area / All Floors: 1995

Volume of Structure: 38465 Total Land Disturbed:

Signature: Nicholas Casarulo

Estimated Cost of Building Work:

New Building (1): 5 142500

Alteration (2): 5 150

TOTAL (1+2): 5 142650

SUBCODE APPROVAL:

PLANS:

Pay: *****Four hundred thirty-seven dollars and 50 cents

PAY
TO THE
ORDER OF
BRICK TWP. AFFORDABLE HOUSING
401 CHAMBERS BRIDGE ROAD
BRICK, N.J. 08723

BRICK BUILDING CORP.

⑈0004957⑈ ⑆02⑆20653⑆⑆1330009026⑈

Kathy M. Russell
Tony R. Shupin

To: Scott M. Pezarras, Chief Financial Officer
From: Carol A. Wolfe, Affordable Housing Administrator
Re: Affordable Housing Fees

Date: 11-6-00

Business/Development: Wedgewood Place
Owner/Applicant: Brick Bldg. Assoc.
Property Address: 93 Bynoe Rd.
Block: 1210.26 Lot: 8

DEPOSIT RECEIVED

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number _____
Estimated Fee \$ _____

Deposit Amount \$ _____

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number 4957
Final Fee \$ 875.00
Less Deposit \$ 437.50

Final Payment \$ 437.50

FOR DEPOSIT ONLY - AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance
354-2C-93, as amended, pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C. 5:92-18 et seq.

93 Byron Road

Work Site Address

1210.26

Block

8

Lot

Brick Building Associates732-206-98901841 Lakes Mill Rd. Brick NJ 08724

Owner's Name, Address, Phone

SAME

Contractor's Name, Address, Phone

Construction

Single Family Dwelling

Describe type (Single -family home, etc.)

Demolition

Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material CONSTRUCTION - 30 Yds

Name, address and phone of party responsible for removal of debris:

OCEAN CARTING P.O. box 357 Lakewood NJ 08701Size of dumpster: 30 Yds.Destination of discarded debris: OCEAN COUNTY LAND FILLHauler's DEP Permit No.: 0187

****Note:** Any recyclable material, including, but not limited to: corrugated cardboard, vegetative waste, concrete, asphalt, clean wood, etc., must be delivered to an approved recycling center, and receipts provided to the Township of Brick along with tipping receipts for non-recyclable material.

Generator's Certification: Under penalty of criminal and civil prosecution, for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed or recycled in accordance with all applicable State and Federal laws and regulations, and that I have been authorized, in writing, to make such declarations by the person in charge of the generator's operation.

Printed/Typed Name

Michael Vasilavich Michael Vasilavich

Signature

Date

12-17-99

FOR OFFICE USE ONLY

MUST BE COMPLETED BEFORE CERTIFICATE OF OCCUPANCY OR CERTIFICATION OF APPROVAL IS ISSUED

Recycling tonnage receipts attached?

Certified tipping receipts attached?

****Note:** Receipts must show certified weights, date of disposal and name and address of disposal center.

DISTRIBUTION LIST:

Pay: *****Four hundred thirty-seven dollars and 50 cents

PAY TOWNSHIP OF BRICK
TO THE 401 CHAMBERS BRIDGE ROAD
ORDER OF BRICK, NJ 08723

BRICK BUILDING CORP.

⑈0003357⑈ ⑆021206537⑆1330009025⑈

To: Scott M. Pezarras, Chief Financial Officer
From: Carol A. Wolfe, Affordable Housing Administrator
Re: Affordable Housing Fees

Date: 1-18-00

Business/Development: Wedgewood Place
Owner/Applicant: Brick Bldg Assoc.
Property Address: 93 Byron Rd
Block: 1210.26 Lot: 8

DEPOSIT RECEIVED

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number 3357
Estimated Fee \$ 875.00

Deposit Amount \$ 437.50

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number _____
Final Fee \$ _____
Less Deposit \$ _____

Final Payment \$ _____

FOR DEPOSIT ONLY - AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance
354-2C-93, is pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C. 5:92-18 et seq.

Received in Treasurer's Office by:

[Signature]
Signature

1/18/00
Date