BLOCK 830 LOT 15,16&17 QUALIFICATION CODE _____ ADDRESS (SITE) 1640 W. PRINCETON AVE PERMIT NO. 05-4437

CONSTRUCTION PERMIT APPLICATION

05-137113

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

I. IDENTIFICATION

1. Proposed Work Site at: 1640 WEST PRINCETON AVE
2. Name of Owner in Fee: ALEX & MARYK MAPOY Tel. (___) _____
   Address 1640 WEST PRINCETON BRICK 08724
   street municipality zip code
3. Ownership in fee: Public _____ Private ✓
4. Principal Contractor: OWNER Tel. (___) _____
   Address SAME
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: (___) _____
5. Architect or Engineer JOE GARRAMONE Tel. (856) 232-1494
   Address 204 DORAL DRIVE BLACKWOOD NJ Contact JOE GARRAMONE
6. Responsible Person in Charge once Work has Begun TONY CASTRO
   Tel. (856) 524-1400 FAX: (___) _____

V. FEE SUMMARY (for office use only)

			FB Update	FB Update
1. Building	62.63 $	342 ✓		126.00
2. Electrical			130	
3. Plumbing		CAN ✓		
4. Fire Protection				
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review		34		
8. Subtotal	$		18	
9. State Permit Fee Surcharge				
10. Subtotal	$	15		
11. Cert. of Occupancy		15		
12. Other ZIA		30		
13. TOTAL	$	531	148	126.00

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	2	
2. Height of Structure	±25'0" 24'0" ft.	
3. Area — Largest Floor	1524 (EXIST 1ST FL) sq. ft.	
4. New Building Area	1417 sq. ft.	
5. Volume of New Structure	12,668 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		

Cell # 856 524 1400

2nd story addition

II. PROPOSED WORK

OPTIONAL (for office use only)

	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			7/27/05		11/04/05	KEN	6/2/06		
3. ☑ Addition	115,900								
4. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☒ Fire Protection	2500				10-11-05	KEN	9/7/06	Fax	
6. ☐ Plumbing	[illegible]				[illegible]				
7. ☑ Electrical	[illegible]								
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement	[illegible]	Email	10/6/05		10/6/05				
11. ☐ Demolition	[illegible]								
TOTAL COSTS	118,400								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. 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:

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
10. ☐ Swimming Pools, Spas and Hot Tubs

LDS BR-B 10525009

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 Steve Mapray Date July 1, 2005

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

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

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

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

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

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

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

OFFICE DATE RECEIVED: _____

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

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. _____	_____	_____	_____	_____

IMPORTANT
A.H.B.T. - MANDATORY FEE - RESIDENTIAL

Pd. prelim 10/6/05 JRS

262-1024
Building
8:00 - 4:00

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

□ Zoning Application deemed complete Initialed: _____ Date: _____

□ Zoning Application approved Initialed: _____ Date: _____

□ Zoning permit updates:

_____

_____

_____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 09/21/2006
Tracking Number C-05-137113
Permit Number 05-4437
Permit Issue Date 11/07/2005

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ Block: 830 Lot: 15 Qual:

Owner in Fee: MAPOY, MARIA VICTORIA

Owner Address: 1640 W PRINCETON AVE BRICK NJ 08724

Telephone:

Contractor MAPOY, MARIA VICTORIA

Address 1640 W PRINCETON AVE BRICK NJ 08724

Telephone: Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Use:
RESIDENTIAL ADDITION 2ND STORY ADDITION

Certificate Comments:

☑ **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.

☐ **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.

☐ **Temporary Certificate of Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **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

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Fee: $35.00
Check Number: 6263
Collected By: Mary Jane Rinaldi

Date Printed: 09/21/2006

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	06/16/2006
Tracking Number	C-05-137113
Permit Number	05-4437
Permit Issue Date	11/07/2005

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ Block: 830 Lot: 15 Qual:

Owner in Fee: MAPOY, MARIA VICTORIA

Owner Address: 1640 W PRINCETON AVE BRICK NJ 08724

Telephone:

Contractor MAPOY, MARIA VICTORIA

Address 1640 W PRINCETON AVE BRICK NJ 08724

Telephone: Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Use:

RESIDENTIAL ADDITION 2ND STORY ADDITION

Certificate Comments:

☐ **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**

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☐ Partial or limited time period (years); see file

☐ **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

☑ **Temporary Certificate of Occupancy**

The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Must comply with Plumbing for final CO
Must pay second half of MRDF (affordable Housing) for final CO

a c O.

Construction Official

Fee: $0.00

Check Number: 6263

Collected By: Mary Jane Rinaldi

Date Printed: 06/16/2006

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	06/16/2006
Tracking Number	C-05-137113
Permit Number	05-4437
Permit Issue Date	11/07/2005

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ Block: 830 Lot: 15 Qual:

Owner in Fee: MAPOY, MARIA VICTORIA

Owner Address: 1640 W PRINCETON AVE BRICK NJ 08724

Telephone:

Contractor MAPOY, MARIA VICTORIA

Address 1640 W PRINCETON AVE BRICK NJ 08724

Telephone: Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: 1

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Use:

RESIDENTIAL ADDITION 2ND STORY ADDITION

Certificate Comments:

☐ **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.

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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.

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
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Conditions to be met:

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☐ Partial or limited time period (years); see file

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☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **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

☑ **Temporary Certificate of Occupancy**

The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Must comply with Plumbing for final CO
Must pay second half of MRDF (affordable Housing) for final CO

a.c.o.

Construction Official

Fee: $0.00
Check Number: 6263
Collected By: Mary Jane Rinaldi

Date Printed: 06/16/2006

CONSTRUCTION PERMIT

Date Issued 11/07/2005
Control # C-05-137113
Permit # 05-4437

IDENTIFICATION Block: 830 Lot: 15 Qualifier
Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ
Owner in Fee MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:

Contractor MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
RESIDENTIAL ADDITION 2ND STORY ADDITION

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $118,400

Construction Official — Date 11/07/2005

PAYMENTS (Office Use Only)

Building	$342
Electrical	$0
Plumbing	$0
Fire Protection	$90
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$34
CO Fee	$35.00
Other	$30
Total	$531
Check No.	6263
Cash	$0
Credit	$0
Collected By	Mary Jane Rinaldi

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

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

- [ ] Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall 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, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- [ ] Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

- [ ] A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

- [ ] A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

PERMIT UPDATE

Date Update Issued 06/14/2006
Control # C-06-102405
Permit # 05-4437+D

IDENTIFICATION Block: 830 Lot: 15 Qualifier
Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ
Owner in Fee MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:

Contractor MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☑ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:

FIRE ALTERATIONS, PLUMBING ALTERATIONS 2ND STORY ADDITION

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

Estimated Cost of Work $200

Construction Official

06/14/2006
Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$60
Fire Protection	$45
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$0
CO Fee	
Other	$0
Total	$105
Check No.	6537
Cash	$0
Credit	$0
Collected By	Stephanie Capozzi

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

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

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall 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, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

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

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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

If you do not understand any of this information, please ask.

PERMIT UPDATE

Date Update Issued 5/30/2006
Control # C-06-0788
Permit # 05-4437+C

IDENTIFICATION Block: 830 Lot: 15 Qualifier
Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ
Owner in Fee MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:

Contractor MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
PLUMBING ALTERATIONS 2ND STORY ADDITION

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $100

Construction Official — 5/30/2006 Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$40
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$0
CO Fee	
Other	$0
Total	$40
Check No.	999
Cash	$0
Credit	$0
Collected By	Mary Jane Rinaldi

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

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

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall 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, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

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

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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

If you do not understand any of this information, please ask.

PERMIT UPDATE

Date Update Issued
Control #
Permit #
Date Permit Issued

IDENTIFICATION Block _____ Lot _____

Work Site Location 11640 W PRINCETON AVE BRICK NJ

Owner in Fee MAROY

Address 11640 W PRINCETON AVE BRICK

Tel. [redacted]

Contractor PATRIOT PLUMBING

Address 2802 2ND Avenue TOMS RIVER NJ 08753

Tel. (732) 929 3529

Lic. No. or Bldrs. Reg. No. 11948

Fed. Emp. No. 04 376 3575

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Estimated Cost of Work $ _____

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 _____

U.C.C. F190
(rev. 3/96)

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

PERMIT UPDATE

Date Update Issued 02/02/2006
Control # C-05-139613
Permit # 05-4437+A

IDENTIFICATION Block: 830 Lot: 15 Qualifier
Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ
Owner in Fee MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:

Contractor MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
PLUMBING ALTERATIONS 2ND STORY ADDITION

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $9,000

Construction Official — Date 02/02/2006

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$130
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$12
CO Fee	
Other	$0
Total	$142
Check No.	6371
Cash	$0
Credit	$0
Collected By	Ann Marie Hanlon

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

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

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall 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, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

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

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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

If you do not understand any of this information, please ask.

PERMIT UPDATE

Date Update Issued 01/13/2006
Control # C-05-139904
Permit # 05-4437+B

IDENTIFICATION Block: 830 Lot: 15 Qualifier
Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ
Owner in Fee MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:

Contractor MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ 08724
Telephone:
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
2ND STORY ADDITION

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $8,000

Construction Official — Date 01/13/2006

PAYMENTS (Office Use Only)

Building	$0
Electrical	$115
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$11
CO Fee	
Other	$0
Total	$126
Check No.	6345
Cash	$0
Credit	$0
Collected By	Ann Marie Hanlon

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

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

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1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall 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, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

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

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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

If you do not understand any of this information, please ask.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 05-4437

Date Issued / Permit # 11-7-05

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

Block 830 Lot 15.16-17 Qualification Code

Work Site Location 1640 W. PRINCETON AVE BRICK TWP NJ 08724

Owner in Fee ALEX MAPOY

Address SAME

Tel. [redacted]

Contractor SAME

Address SAME

Tel. ( ) SAME FAX ( )

Contractor License No. or Builder Registration No.

Federal Emp. No

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 Alex Mapoy

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

2nd story addition

AWC DETAIL + RES Check ATTACHED

SEE ALSO ARCH LETTER + DWGS ATTACHED

SHEATHING INSP. ADDITIONALLY REQ'D

PLBG/ELEC UPDATES NEEDED

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[X] All	11/04/05	TRK
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:

[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 6-2-06

Approved by: MK

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame	12/12 MR	3/13	3/1/06	MV
Truss Sys./Bracing	2/22/06 MV	OVER		
Barrier-Free				
Insulation			3/1/06	MV
Finishes -Base Layer				
Finishes -Final				
Energy Sheathing			12-14-05	
Mechanical				
TCO				
Other OPEN DECK			11/29/05	
Final				
Barrier-Free			6/1/06	

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. Rehabilitation $
3. Total (1+ 2) $ 142,000

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] 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 $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F110 (rev. 07/03)

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

2/13 – Rough plmb. not approved yet –
insul not complete or approved – JF

2/22/06 MV – ~~Rough cloth~~ Frame Rq –

(1) Temp Glass @ Jacuzzi –

(2) Beam in Great rm. undersized –
5¼ x 16 Req. 5¼ x 9 installed –

(3) Exist windows in Great Rm not supported with headers – (Non conforming pre-exist structural deficiency)

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 12/01/2005
Date Issued ~~12/31/1899~~ 1/13/06
Control # C-05-139904
Permit # 05-4437+B

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

Block 830 Lot 15 Qualification Code

Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ

Owner in Fee: MAPOY, MARIA VICTORIA

Address 1640 W PRINCETON AVE BRICK NJ

Tel.

Contractor: DON BLACKWELL JR ELECTRIC CONT

Address 27 CEDAR DR LANOKA HARBOR NJ

Tel. 609/971-1404 Fax.

Lic No. 10682

Federal Employee No. 15-6509643

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R-5

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $8,000

C. CERTIFICATION IN LIEU OF OATH

I hereby certifiy that I am the (agent of) owner of the 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 Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
23		Lighting Fixtures	
38		Recepticles	
13		Switches	
6		Detectors	
0		Light Poles	
2		Motors - Fract. HP	
0		Emergency & Exit Lights	
4		Communication Points	
0		Alarm Devices/F.A.C. Panel	
0			
86		TOTAL NUMBERS	$45
0		Pool Permit/with UW Lights	$0
0		Storable Pool/Spa/Hot Tub	$0
0	0	KW Elec. Range/Receptical	$0
0	0	KW Oven/Surface Unit	$0
0	0	KW Elec. Water Heater	$0
0	0	KW Elec. Dryer/Recepticle	$0
0	0	KW Dishwasher	$0
0	0	HP Garbage Disposal	$0
1	7	KW Central A/C Unit	$10
1	3	HP/KW Space Heater/Air	$10
0	0	KW Baseboard Heat	$0
0	0	HP Motors 1/+ HP	$0
0	0	KW Transformer/Generator	$0
1	200	AMP Service	$50
0	0	AMP Subpanels	$0
0	0	AMP Motor Control Center	$0
0	0	KW Elec. Sign/Outline Light	$0
0	0		$0
0	0		$0

Administrative Surcharge	$0
Minimum Fee	$0
State Permit Surcharge Fee	$11
TOTAL FEE	$126

#1345

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
☐ No Plan Required		
Joint Plan Review Required		
☐ Building ☐ Plumbing		
☐ Fire ☐ Elevator		
☒ Electrical Plans Approved		

Date: 12/20/05

Approved by:

SUBCODE APPROVAL

☐ CO ☐ CCO ☒ CA

Date: 5/6/06

Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough			1/20/06	
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			5/16/06	
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

UPDATE 05-4437-EB
DATE 11-23-05
INITIALED BY
FOR

Date Received
Control #
Date Issued
Permit #

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

Block 830 Lot 15-16-17 Qualification Code

Work Site Location 1640 WEST PRINCETON AVE
BRICK TWP. NJ. 08724

Owner in Fee ALEX MARDY

Address 1640 WEST PRINCETON AVE
BRICK NJ.

Tel [redacted]

Contractor DON BLACKWELL JR. ELECTRICAL CONTRACTOR

Address 27 CEDAR DR
LANOKA HARBOR, N.J., 08734

Tel (609) 971-1404 FAX ( )

Contractor License No. 10.682

Federal Emp. No. [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present ✓ Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as DWELLING Utility Co. GPU

Est. Cost of Elec. Work $ 8000

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.

Don Blackwell

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
23		Lighting Fixtures	
38		Receptacles	
13		Switches	
6		Detectors A/C D/C C/O	
		Light Poles	
2		Motors—Fract. HP BATH FANS	
		Emergency & Exit Lights	
4		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
1	2.4 KW	KW Central A/C Unit	
1		HP/KW Space Heater/Air Handler GAS	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	200A	AMP Service O/H UPGRADE	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
Joint Plan Review Required:		
[ ] Building [ ] Plumbing		
[ ] Fire [ ] Elevator		
[X] Elec. Plans Approved		

Date: 12-20-05
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 5 16 06
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			5 16 06	
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 07/03)

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 05-4437
Control #

Date Issued 11-7-05
Permit #

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

Block 830 Lot 15, 16 & 17 Qualification Code

Work Site Location 1640 W PRINCETON AVE
BRICK TWP NJ 08724

Owner in Fee ~~SAME~~ - ALEX MAPOY

Address SAME

[redacted]

Tel

Contractor ~~SAME~~

Address

Tel ( ) SAME FAX ( )

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No.

Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present V Proposed

Constr. Class: Present V Proposed

Heating System: [ ] New OR [ ] Existing [ ] HVAC

Type: [V] Gas [ ] Oil [ ] Electric [ ] Solar

[ ] Other

Location:

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel: GARAGE

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve:

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible *Capacity* N/A

Total Cost of Fire Protection Work $ 2500.

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. Alex Mapoy

Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[V] 110v Interconnected		
[V] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	5	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System FURNACE		
Fired Appliances [V] Gas or [ ] Oil	1	
Fireplace Venting/Metal Chimney		
Other		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[V] Fire Plans Approved

Date: 10-11-05

Approved by: E

SUBCODE APPROVAL

[ ] CO [ ] CCO [V] CA

Date: 6-16-06

Approved by: DS

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System			6/2/06	RSD
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical			6/2/06	RSD
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting		6/2/06	6/16/06	RSD
Final				
Other				

Need permit update Budget

pmt. to follow.

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

UPDATE 05-4437+D
DATE 6/8/06
INITIALED BY
FOR

Date Received
Control #
Date Issued 6/14/06
Permit # 05-4437+D 405

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

Block 830 Lot 15.16.17 Qualification Code

Work Site Location 1640 W. PRINCETON AVE, BRICK NJ 08724

Owner in Fee MALIA & ALEX MATOV

Address 1640 W. PRINCETON AVE. BRICK NJ 08724

Tel (732) [redacted]

Contractor MR DAN HOFMANN Home Owner

Address TOMS RIVER NJ

Tel (732) 558-8650 FAX ( )

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No.

Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present ____ Proposed ____

Constr. Class: Present ____ Proposed ____

Heating System: [ ] New OR [ ] Existing [ ] HVAC

Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System: [ ] New OR [ ] Existing

Location of Main Control Valve:

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible Capacity

Total Cost of Fire Protection Work $ 100.

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.

Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [X] Gas or [ ] Oil	1 dryer	
Fireplace Venting/Metal Chimney		
Other		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[ ] Fire Plans Approved

Date: 6-9-06

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 6-16-06

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			6/16	DB
Other				

U.C.C. F140 (rev. 1/04)

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

CHANGE OF CONTRACTOR. 05-4434

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 830 Lot 15 Qualification Code

Work Site Location 1640 W. PRINCETON AVE. BRICK NJ 08724

Owner in Fee MARIA V. MAPOY

Address 1640 W. PRINCETON AVE. BRICK NJ 08724

Tel [redacted]

Contractor VINTON PL

Address PO BOX 943 FORKED RIVER 08731

Tel (609) 242-0200 FAX (609) 971-5399

Contractor License No. 10825

Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size 1" Public Water Private Well

Est. Cost of Plumbing Work $ 2500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 9-20-06

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water			8-20-06	
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Yoke			8-20-06	

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.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal/Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Water Heater
	Fuel Oil Piping
	Gas Piping
	LPGas Tank
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
	Sewer Connection
1	Water Service Connection REPLACE EXISTING WATER SERVICE W/ 1"
	Stacks
	Other
	Other

FEE (Office Use Only)

$

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F130
(rev. 01/04)

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 11/16/2005
Control # C-05-139613
Date Issued ~~12/31/1899~~ 2/2/06
Permit # 05-4437+A

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

Block 830 Lot 15 Qualification Code

Work Site Location: 1640 W. PRINCETON AVE. Brick Township, NJ

Owner in Fee: MAPOY, MARIA VICTORIA
Address 1640 W PRINCETON AVE BRICK NJ

Tel.

Contractor: PATRIOT PLUMBING
Address 12 NORTH GATEWAY TOMS RIVER NJ

Tel. 732/688-7222 Fax.
Contractor License No. 11968
Federal Employee No. 01-1564349

B. PLUMBING CHARACTERISTICS

Use Group Present ______ Proposed R-5
Building Sewer Size 0 ☐ Public Sewer ☐ Private Septic
Water Service Size 0 ☐ Public Water ☐ Private Well
Estimated Cost of Plumbing Work **$9,000**

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plan Required
Joint Plan Review Required
☐ Building ☐ Electrical
☐ Fire ☐ Elevator
☐ Plumbing Plans Approved
Date: 1/30/06
Approved by: [signature]

SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
Date: 9-7-06
Approved by: [signature]

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Slab				
Rough	2/6/06	2/16/06	2/17/06	[initials]
Water				
Sewer				[initials]
Fixtures	6/5/06	6/13/06	9-7-06	[initials]
Gas Equipment				
Gas Piping	2/6/06		2/16/06	[initials]
Solar				
TCO				
T.CO			6/15/06	[initials]

C. CERTIFICATION IN LIEU OF OATH

I hereby certifiy that I am the (agent of) owner of the 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 Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
2	Water Closet	$20
0	Urinal/Bidet	$0
2	Bath Tub	$20
2	Lavatory	$20
1	Shower	$10
0	Floor Drain	$0
0	Sink	$0
0	Dishwasher	$0
0	Drinking Fountain	$0
1	Washing Machine	$10
0	Hose Bibb	$0
1	Water Heater	$40
0	Fuel Oil Piping	$0
1	Gas Piping	$10
0	LP Gas Tank	$0
0	Steam Boiler	$0
0	Hot Water Boiler	$0
0	Sewer Pump	$0
0	Interceptor/Separator	$0
0	Backflow Preventor	$0
0	Greasetrap	$0
0	Sewer Connector	$0
0	Water Service Connection	$0
0	Stacks	$0
0	Other	$0
0	Other	$0

called 2/1/06 Just Plumbing $142. 50' clhost 1/4 280,000

Administrative Surcharge	$0
Minimum Fee	$0
State Permit Surcharge Fee	$12
TOTAL FEE	$142

1" WATER

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

2/6/06

[redacted]

1. NO TEST NIPPLE PIPE ON GAS (BUGS AT 2ND)
2. ANTI-SCALD WHIRLPOOL TUB
3. UPDATE FOR PK
4. PROTECT 2" TRAP + WATER IN OVERHANG?

2/16/06

1. GAS PIPE MISSED
2. WATER LINES FOR WASHER NOT CONNECTED! (MISSED ON ROUGH 2ND FLOOR)

PLUMBING SUBCODE
TECHNICAL SECTION

UPDATE 05-4437+D
DATE 6/13/06
INITIALED BY
FOR

Date Received
Control #

Date Issued 6/14/06
Permit # 05-4437+D
C06-1024-05

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

Block 830 Lot 15 Qualification Code
Work Site Location 1640 W. Princeton Ave.

Owner in Fee Maria & Alex Mapoy
Add [redacted]
Tel
Contractor
Address
Tel ( ) FAX ( )
Contractor License No.
Federal Emp. No

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work $ 100.

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 6/12/06
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				

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.

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

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
1	Gas Piping (dryer)	
	LPGas Tank as per D.N.	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
1	Water Service Connection	
	Stacks	
	Other	
	Other	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$

1" upgrade required

called 4/13/06

U.C.C. F130 (rev. 01/04)

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

PLUMBING SUBCODE
TECHNICAL SECTION

Update

Date Received 5-30-06
Control #

Date Issued
Permit # 05-4437-fc

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

Block 830 Lot 15 Qualification Code
Work Site Location 1640 WEST PRINCETON AVE
BRICK NJ
Owner in Fee MAPOY
Address 1640 WEST PRINCETON AVE
BRICK NJ
Tel ([redacted]
Contractor PATRIOT PLUMBING
Address 2802 2ND AVENUE
TOMS RIVER NJ 08753
Tel (732) 929 3529 FAX (732) 929 3579
Contractor License No. 11968
Federal Emp. No. 643763575

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 2/14/06
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 2-20-06
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				

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.

Daniel J. Moore

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other A/C	
	Other	

C06-0788 called 2/22/06

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$ 40

U.C.C. F130 (rev. 01/04)

1 White = Inspector Copy 2 Canary = Office Copy
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PLUMBING SUBCODE TECHNICAL SECTION

UPDATE COS - 137113
DATE 9/6/05
INITIALED CM

Date Received
Date Issued
Control #
Permit #

Roof 200 before Eddy for testing

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

Block 830 Lot 15
Work Site Location 1640 West Princeton Ave
Brick
Owner in Fee Mapoy's
Address 1640 West Princeton Ave
Brick, NJ.
Tele. ( )
Contractor PATRIOT PLUMBING
Address 12 NORTH GATEWAY
TOMS RIVER NJ 08753
Tele. (732) 557 9591 Fax (732) 557-4465
Lic. No. 11968
Federal Emp. No. 04-3763575

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size 4" Public Sewer 4" Private Septic _____
Water Service Size 1" Public Water 1" Private Well _____
Est. Cost of Plumbing Work $ 9,000.00

(D. TECHNICAL SITE DATA (List for all fixtures.)

NO.	FIXTURE/EQUIPMENT
2	Water Closet
	Urinal/Bidet
2	Bath Tub
2	Lavatory
1	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
1	Washing Machine
	Hose Bibb
1	Water Heater
	Fuel Oil Piping
1	Gas Piping
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
	Sewer Connection
	Water Service Connection
	Stacks
	Other _____
	Other _____
	Other _____

FEE (Office Use Only)
$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: _____
Approved by: _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

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

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

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's Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

Township of Brick
Zoning Permit

Approved: Wednesday, September 28, 2005 **Number:** 1428

Block 830 **Lot** 15 **Zone:** R-7.5

Property Address:	1640 West Princeton Avenue
Applicant:	Alex Mapoy
Property Owner:	Alex and Marivic Mapoy
Existing Use:	Single Family Residential
Proposed Use:	Single Family Residential
Proposed Construction:	Second floor addition 28' x 47.71', ridge height 25'. No front porch.
Conditions:	The addition must be set back at least 25 feet from the front property lines, 6 feet from the side property line and 15 feet from the rear property line. An additional permit is required for any additional work.

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.

Michael P. Fowler, AICP/PP
Principal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

JUL 28 2005

AUG 8 2005

Applications missing any of the following information will delay processing and may be returned to you.

BLOCK 830 LOT 15, 16 & 17 QUALIFIER

PROPERTY ADDRESS 1640 WEST PRINCETON AVE BRICK TWP. NJ 08724

PERSONAL NAME OF APPLICANT ALEX ~~and MARYIC~~ MAPOY

SEP 22 2005

BUSINESS NAME OF APPLICANT N/A

MAILING ADDRESS OF APPLICANT ~~SAME AS ABOVE~~ 1640 W. Princeton Ave, Brick NJ 08724

PROPERTY OWNER'S FULL NAME ALEX and MARYIC MAPOY

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-dwelling
☐ Commercial (please describe)

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) Height
☑ Addition Height 24'-8" (FROM GRADE TO ROOF RIDGE) ON EXIST 1ST FLOOR DWELLING
☐ Alteration ☒ NO CHANGE IN SETBACKS & BLDG. FOOTPRINT
☑ Porch or deck Height NO porch
☐ Shed - Height
☐ Fence - Type Height
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe)

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan 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 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.

Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.

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.

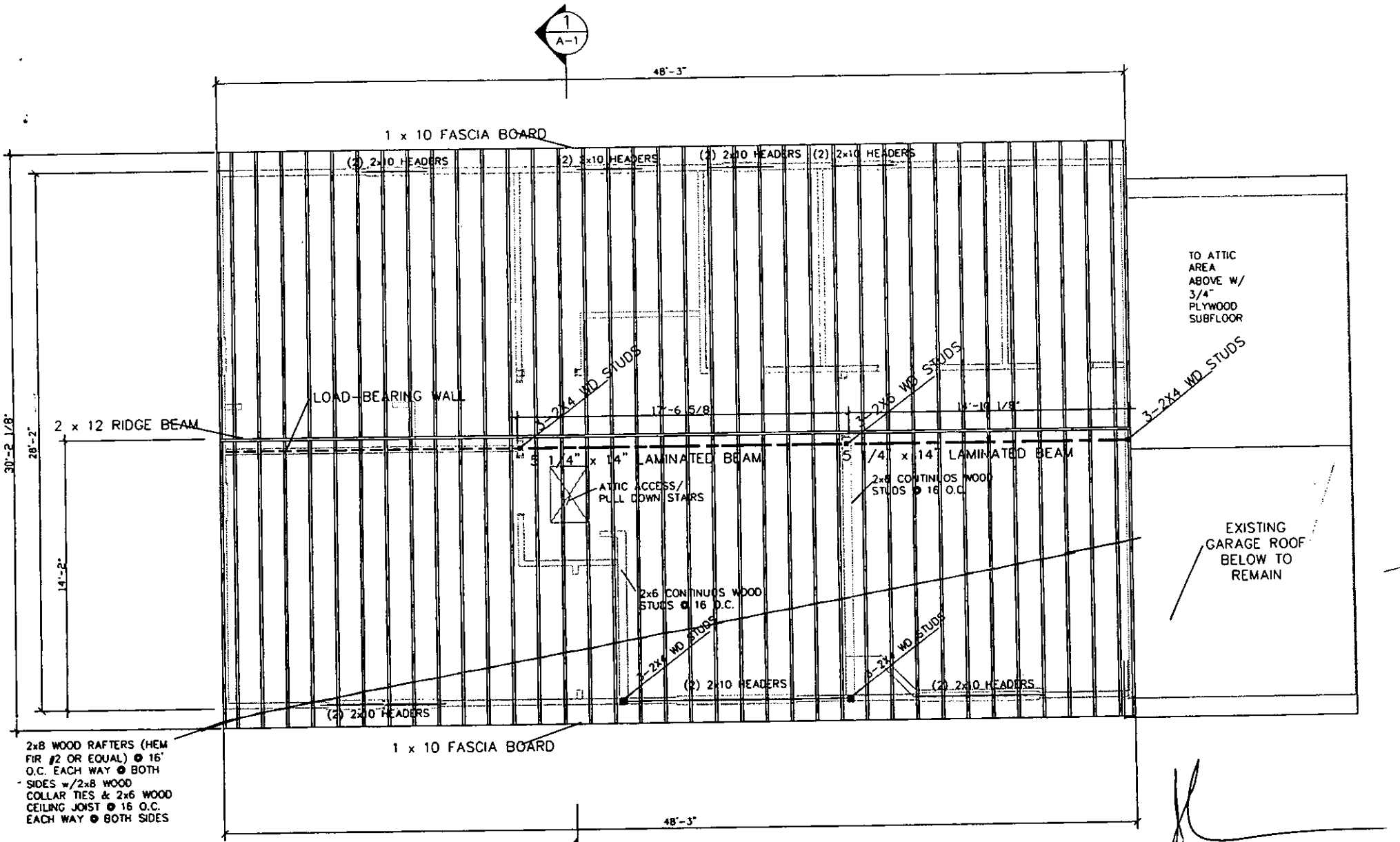
SIGNATURE OF APPLICANT Alex Mapoy Date July 6, 2005

Reviewed by Zoning Office Date 8/3/05 ( ) Approved (X) Denied

8/11/05

9/28/05

KB 7/26/05

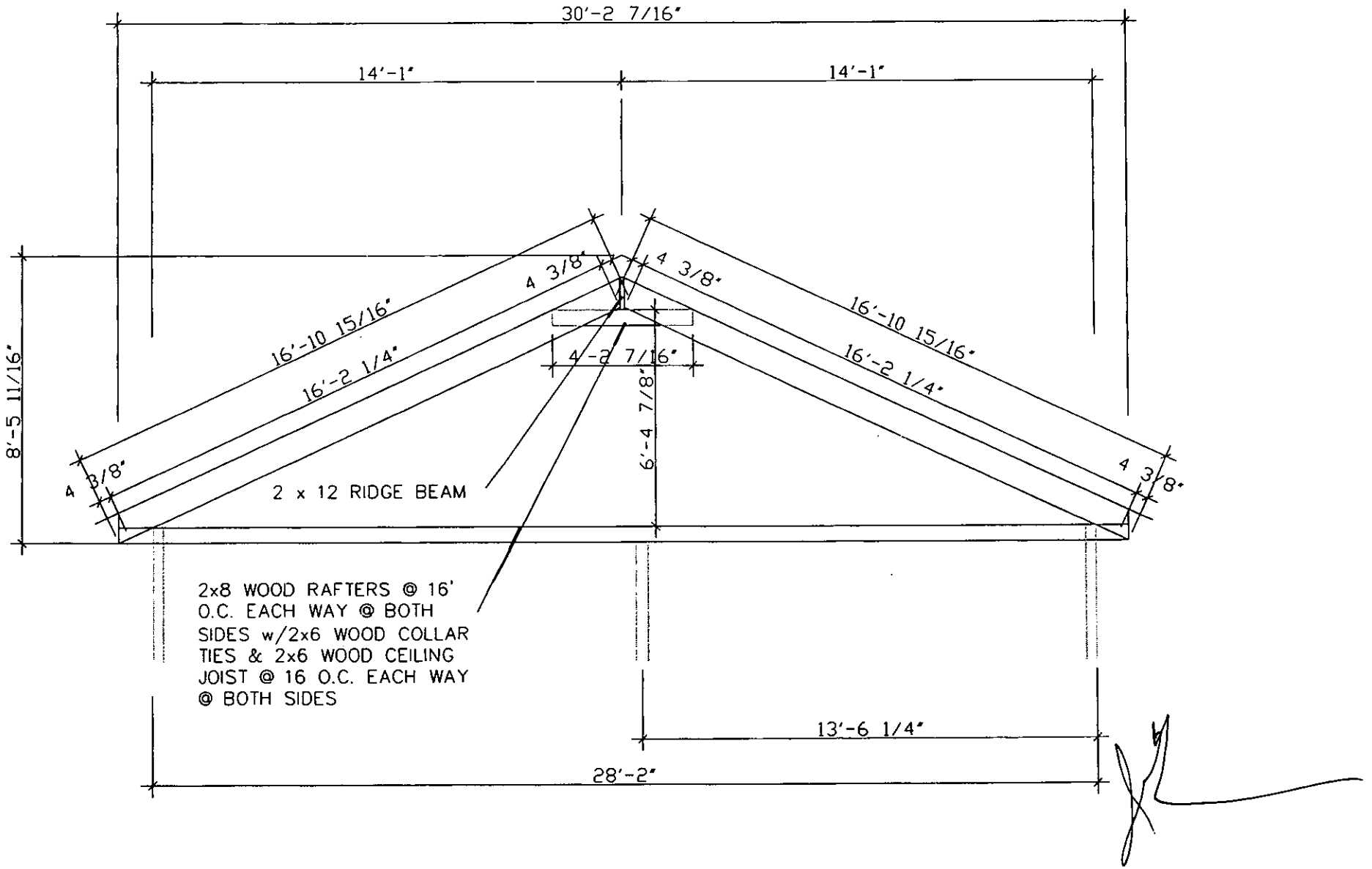


1 / A-2 ROOF FRAMING PLAN:
SCALE: 1/4" = 1'-0"

SAVES as MAPOY'S ROOF FRAMING @ LEXAR/Mapoy ConDoc

Alternate Roof Framing Plan
MAPOY'S RESIDENCE
1640 West Princeton Ave, Brick Twp, NJ
Block: 830 Lots: 15, 16 & 17

GARRAMONE ARCHITECTS, LLC
Architects - Planners
204 Doral Drive, Blackwood, NJ 08012
(856)232-1494 FAX (856) 232-9577
JG



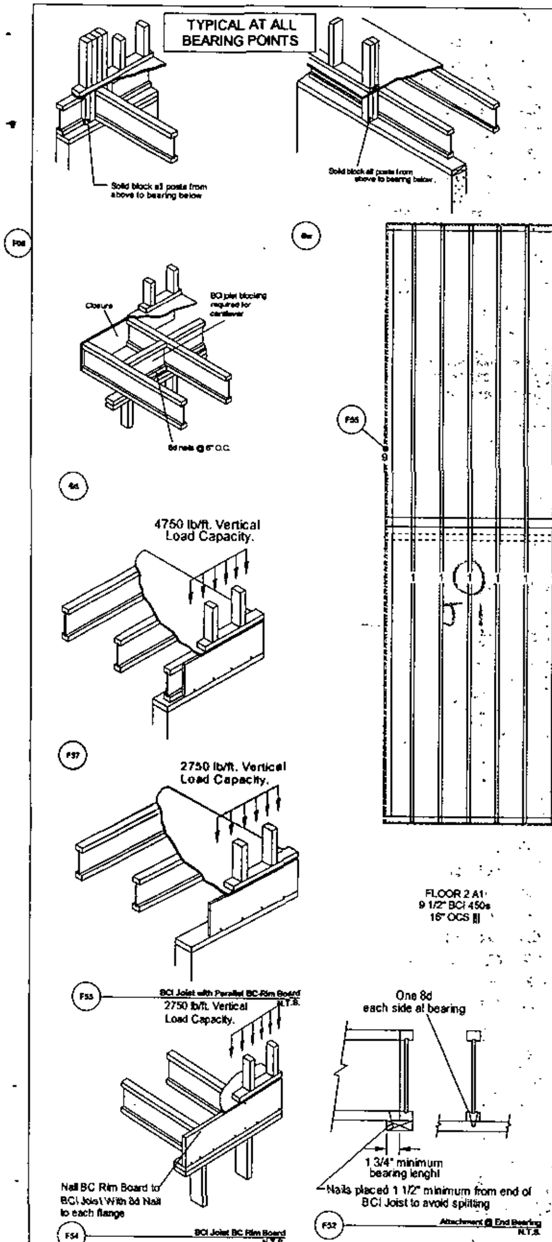
3 / A-2 ROOF FRAMING SECTION:

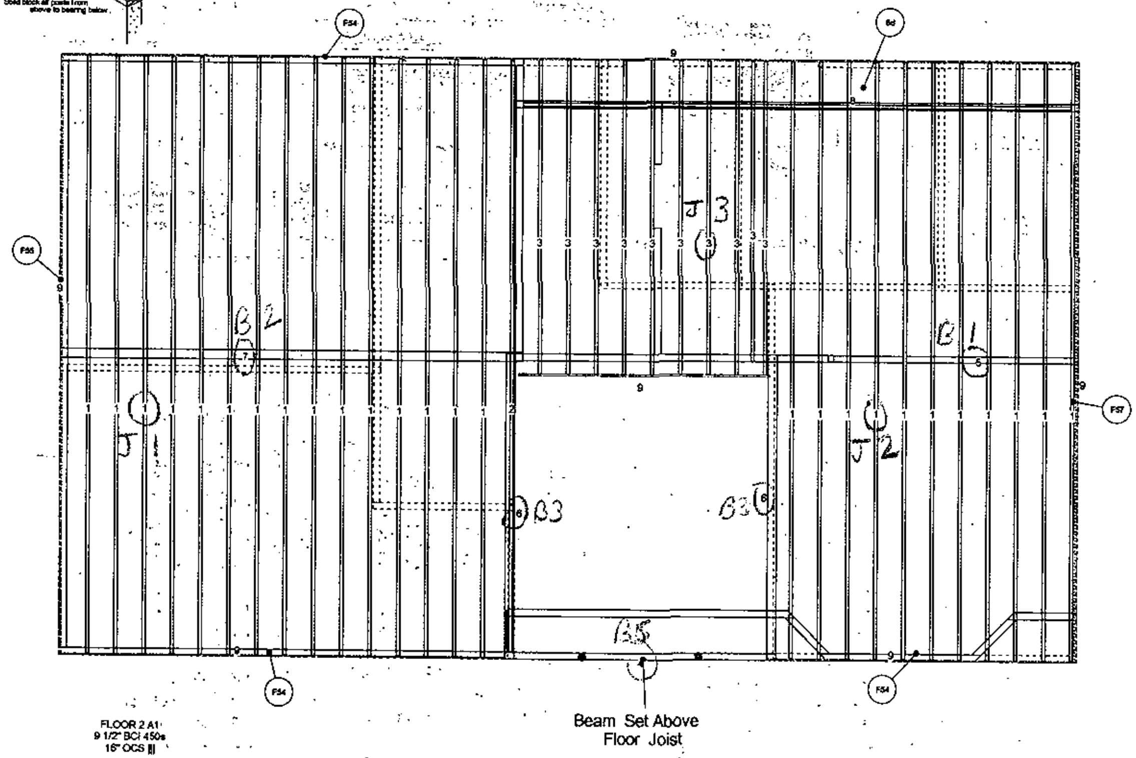
SCALE: 1/4" = 1'-0"

Alternate Roof Framing Plan MAPOY'S RESIDENCE
1640 West Princeton Ave, Brick Twp, NJ
Block: 830 Lots: 15, 16 & 17

GARRAMONE ARCHITECTS, LLC
Architects - Planners
204 Doral Drive, Blackwood, NJ 08012
(856)232-1494 FAX (856) 232-9577

JG

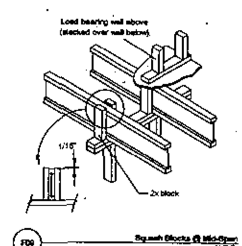




Beam Set Above Floor Joist

2nd Floor

3/8" = 1'-0"



BEARING WALL
BEARING WALL ABOVE
NON BEARING WALL
NON BEARING WALL ABOVE
● = POINT LOAD FROM ABOVE
= POST DOWN

SLEEPING AREA FLOOR LOADS
@ 100% LOAD DURATION
30LL
10DL
40TL
FLOOR SYSTEM DESIGNED AT DEFLECTION LIMIT OF L/480

LIVING AREA FLOOR LOADS
@ 100% LOAD DURATION
40LL
10DL
50TL
FLOOR SYSTEM DESIGNED AT DEFLECTION LIMIT OF L/480

ROOF FRAMING
@ 115% LOAD DURATION

- ☐ TYPICAL FRAMING — 30 LL, 10 DL, 40 DL
- ☑ TRUSS SYSTEM (DESIGN ASSUMES NO INTERIOR BEARING) — 30 LL Roof, 20 DL Roof, 20 LL Attic
- ☐ TRUSS SYSTEM (WITH INTERIOR BEARING) — 70 TL

2nd Floor
Accessory Schedule

Qty	Manufacturer	Product	Description

2nd Floor
Framing Schedule - Nominalized

Mark	Qty	Description	Length
1	26	9 1/2" BCI® 450s SP	30' 0"
2	1	9 1/2" BCI® 450s SP	28' 0"
3	10	9 1/2" BCI® 450s SP	16' 0"
4	1	3 1/2" x 11 7/8" VERSA-LAM® 3080 DF	14' 0"
5	1	3 1/2" x 11 7/8" VERSA-LAM® 3080 DF	12' 0"
6	2	5 1/4" x 9 1/2" VERSA-LAM® 3080 DF	16' 0"
7	1	5 1/4" x 18" VERSA-LAM® 3080 DF	22' 0"
8	BLK	9 1/2" BCI® 450s SP	26' 0"
9	TL	1" x 9 1/2" 1" BC RIM BOARD™	154' 0"

DuBELL LUMBER CO.

REVISIONS:	BY:

BOISE

NOTE: ALL MEASUREMENTS TO BE VERIFIED IN THE FIELD.

BCI PLACEMENT PLAN
The completeness and accuracy of this input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. This output is based on building code-accepted design properties and analysis methods. Installation of Boise Cascade engineered wood products must be in accordance with the current installation Guide and the applicable building codes.

Tony Castro
Matoy Residence
164 Princeton Ave. Brick Twp. , NJ
DuBELL LUMBER CO.
Medford, NJ

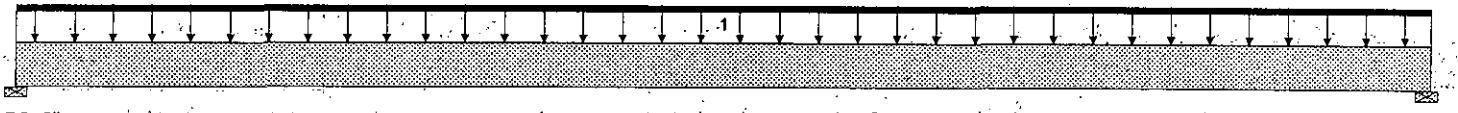
BC FRAMER® 2002
SCALE: N.T.S.
DATE: 6/30/2005
BY: pjb
FILE: TC0547Matoy.t
DWG: 1 of 1
SHEET: 1 / 1

Last Saved Date: 6/30/2005 4:57 PM
Print Date: 7/8/2005 10:44 AM

Single 3 1/2" x 11 7/8" VERSA-LAM® 3080 DF

Job Name: Matoy Residence
Address: 164 Princeton Ave
City, State, Zip: Brick Twp. , NJ
Customer: Tony Castro
Code reports: ICBO 5663, NER 442

File Name: TC0547Matoy : FLOOR 2\B_3A
Description: 2Flr B1 DngRm/Nook
Specifier: pjb
Designer: Peter Blum
Company: DuBELL LUMBER CO.
Misc:



B0, 3"
3010 lbs LL
681 lbs DL

B1, 4"
3008 lbs LL
681 lbs DL

Total Horizontal Length - 11-10-07

General Data

Version:	US Imperial
Member Type:	Floor Beam
Number of Spans:	1
Left Cantilever:	No
Right Cantilever:	No
Slope:	0/12
Tributary:	01-00-00
Live Load:	0 psf
Dead Load:	0 psf
Partition Load:	0 psf
Duration:	100

Disclosure

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Load Summary

ID	Description	Load Type	Ref.	Start	End	Type	Value	Trib.	Dur.
S	Standard Load	Unf. Area	Left	00-00-00	11-10-07	Live	0 psf	01-00-00	100%
						Dead	0 psf	01-00-00	90%
1		Unf. Lin.	Left	00-00-00	11-10-07	Live	507 plf	n/a	100%
						Dead	104 plf	n/a	90%

Controls Summary

Control Type	Value	% Allowable	Duration	Load Case	Span Location
Moment	10953 ft-lbs	51.8%	100%	2	1 - Internal
Neg. Moment	0 ft-lbs	n/a	100%		
End Shear	3075 lbs	38.9%	100%	2	1 - Left
Total Load Defl.	L/501 (0.284")	47.9%		2	1
Live Load Defl.	L/614 (0.232")	58.6%		2	1
Max Defl.	0.284"	28.4%		2	1

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B0	Wall/Plate	3" x 3-1/2"	3690 lbs	86.8%	46.9%	Hem-Fir
B1	Wall/Plate	4" x 3-1/2"	3689 lbs	65.1%	35.1%	Hem-Fir

Notes

Design meets Code minimum (L/240) Total load deflection criteria.
Design meets Code minimum (L/360) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.
Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing + 1/2 intermediate bearing

Lakeside Engineering Services PC
CHRISTOPHER G DUDEK PE
35 Burnside Dr, E.Berlin PA 17316
New Jersey Lic No 23163

Single 5 1/4" x 18" VERSA-LAM® 3080 DF

Job Name: Matoy Residence
Address: 164 Princeton Ave
City, State, Zip: Brick Twp. , NJ
Customer: Tony Castro
Code reports: ICBO 5663, NER 442

File Name: TC0547Matoy : FLOOR 2\B_2B
Description: 2Flr B2 Great Rm beam
Specifier: pjb
Designer: Peter Blum
Company: DuBELL LUMBER CO.
Misc:

B0, 4"
5753 lbs LL
2830 lbs DL

B1, 4"
5753 lbs LL
2830 lbs DL

Total Horizontal Length - 21-10-00

General Data

Version: US Imperial

Member Type: Floor Beam
Number of Spans: 1
Left Cantilever: No
Right Cantilever: No

Slope: 0/12
Tributary: 01-00-00

Live Load: 0 psf
Dead Load: 0 psf
Partition Load: 0 psf
Duration: 100

Disclosure

The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output above is based upon building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with the current Installation Guide and the applicable building codes. To obtain an Installation Guide or if you have any questions, please call (800)232-0788 before beginning product installation.

Load Summary

ID	Description	Load Type	Ref.	Start	End	Type	Value	Trib.	Dur.
S	Standard Load	Unf. Area	Left	00-00-00	21-10-00	Live	0 psf	01-00-00	100%
						Dead	0 psf	01-00-00	90%
1		Unf. Lin.	Left	00-00-00	21-10-00	Live	527 plf	n/a	100%
						Dead	235 plf	n/a	90%

Controls Summary

Control Type	Value	% Allowable	Duration	Load Case	Span Location
Moment	46849 ft-lbs	67.3%	100%	2	1 - Internal
Neg. Moment	0 ft-lbs	n/a	100%		
End Shear	7404 lbs	41.2%	100%	2	1 - Left
Total Load Defl.	L/333 (0.788")	72.2%		2	1
Live Load Defl.	L/496 (0.528")	72.5%		2	1
Max Defl.	0.788"	78.8%		2	1

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B0	Wall/Plate	4" x 5-1/4"	8583 lbs	100.9%	54.5%	Hem-Fir
B1	Wall/Plate	4" x 5-1/4"	8583 lbs	100.9%	54.5%	Hem-Fir

Cautions

Bearing length at bearing B0 should be at least 4-1/16".
Bearing B0 cannot support a load of 8583 lbs.
Bearing length at bearing B1 should be at least 4-1/16".
Bearing B1 cannot support a load of 8583 lbs.

Notes

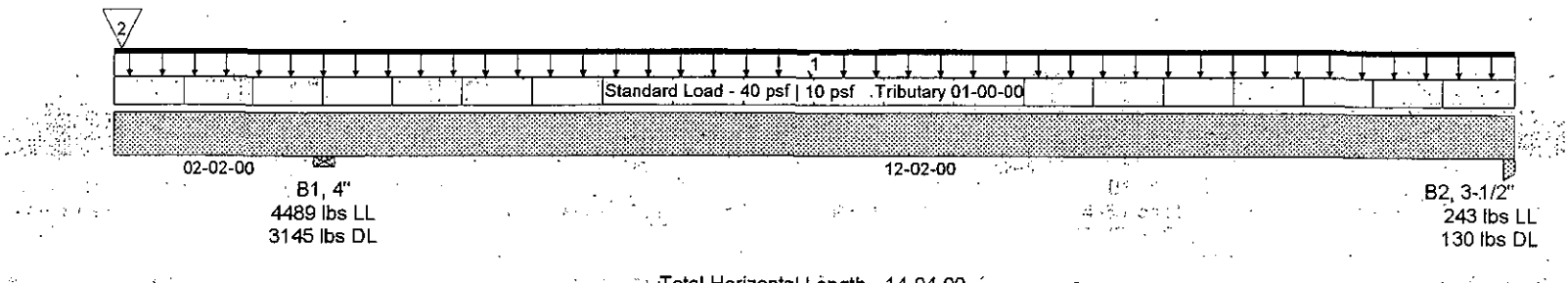
Design meets Code minimum (L/240) Total load deflection criteria.
Design meets Code minimum (L/360) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.
Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing + 1/2 intermediate bearing

Lakeside Engineering Services PC
CHRISTOPHER G DUDEK PE
35 Burnside Dr, E.Berlin PA 17316
New Jersey Lic No 23163

Single 5 1/4" x 9 1/2" VERSA-LAM® 3080 DF

Job Name: Matoy Residence
Address: 164 Princeton Ave
City, State, Zip: Brick Twp. , NJ
Customer: Tony Castro
Code reports: *ICBO 5663, NER 442*

File Name: TC0547Matoy : FLOOR 2\Parallel_Rim_Edge_04A
Description: 2Flr B3 Front Beam Support
Specifier: pjb
Designer: Peter Blum
Company: DuBELL LUMBER CO.
Misc:



General Data

Version:	US Imperial
Member Type:	Floor Beam
Number of Spans:	2
Left Cantilever:	Yes
Right Cantilever:	No
Slope:	0/12
Tributary:	01-00-00
Live Load:	40 psf
Dead Load:	10 psf
Partition Load:	0 psf
Duration:	100

Disclosure

The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output above is based upon building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products *must be in accordance* with the current Installation Guide and the applicable building codes. To obtain an Installation Guide or if you have any questions, please call (800)232-0788 before beginning product installation.

Load Summary

ID	Description	Load Type	Ref.	Start	End	Type	Value	Trib.	Dur.
S	Standard Load	Unf. Area	Left	00-00-00	14-04-00	Live	40 psf	01-00-00	100%
						Dead	10 psf	01-00-00	90%
1		Unf. Lin.	Left	00-00-00	14-04-00	Live	0 plf	n/a	100%
						Dead	60 plf	n/a	90%
2		Conc. Pt.	Left	00-01-00	00-01-00	Live	3544 lbs	n/a	100%
						Dead	2088 lbs	n/a	90%

Controls Summary

Control Type	Value	% Allowable	Duration	Load Case	Span Location
Moment	12022 ft-lbs	57.8%	100%	2	2 - Left
Neg. Moment	-12022 ft-lbs	57.9%	100%	2	1 - Right
End Shear	-550 lbs	5.8%	100%	4	2 - Right
Cont. Shear	5801 lbs	61.2%	100%	2	1 - Right
Uplift	484 lbs	n/a		4	2 - Right
Total Load Defl.	2xL/204 (0.255")	88.1%		4	1 - Right Support
Live Load Defl.	2xL/293 (0.178")	82.0%		4	1 - Right Support
Total Neg. Defl.	-0.211"	42.1%		4	2
Max Defl.	0.255"	25.5%		4	1 - Right Support

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B1	Wall/Plate	4" x 5-1/4"	7633 lbs	89.8%	48.5%	Hem-Fir
B2	Post	3-1/2" x 3-1/2"	374 lbs	0.0%	4.1%	Steel

Cautions

Uplift of 484 lbs found at span 2 - Right.
Member is not fully supported at post B2. A connector is required at this bearing.
Post at Bearing B2 analyzed for bearing only, column analysis has not been performed.

Notes

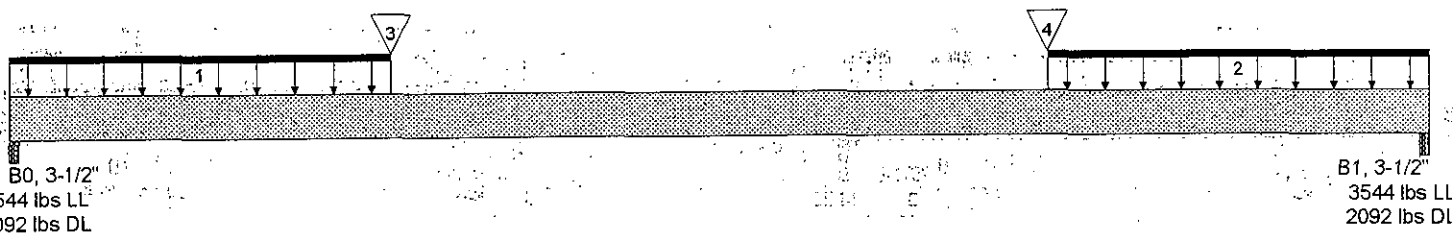
Design meets Code minimum (2xL/180) Total load deflection criteria.
Design meets Code minimum (2xL/240) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.
Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing + 1/2 intermediate bearing

Lakeside Engineering Services PC
CHRISTOPHER G DUDEK PE
35 Burnside Dr, E.Berlin PA 17316
New Jersey Lic No 23163

Single 3 1/2" x 11 7/8" VERSA-LAM® 3080 DF

Job Name: Matoy Residence
Address: 164 Princeton Ave
City, State, Zip: Brick Twp. , NJ
Customer: Tony Castro
Code reports: ICBO 5663, NER 442

File Name: TC0547Matoy : FLOOR 2\B_5A
Description: 2Flr B5 Beam over entry
Specifier: pjb
Designer: Peter Blum
Company: DuBELL LUMBER CO.
Misc:



General Data

Version:	US Imperial
Member Type:	Floor Beam
Number of Spans:	1
Left Cantilever:	No
Right Cantilever:	No
Slope:	0/12
Tributary:	01-00-00
Live Load:	0 psf
Dead Load:	0 psf
Partition Load:	0 psf
Duration:	100

Disclosure

The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output above is based upon building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with the current Installation Guide and the applicable building codes. To obtain an Installation Guide or if you have any questions, please call (800)232-0788 before beginning product installation.

Load Summary

ID	Description	Load Type	Ref.	Start	End	Type	Value	Trib.	Dur.
S	Standard Load	Unf. Area	Left	00-00-00	12-08-00	Live	0 psf	01-00-00	100%
						Dead	0 psf	01-00-00	90%
1		Unf. Lin.	Left	00-00-00	03-05-00	Live	480 plf	n/a	115%
						Dead	320 plf	n/a	90%
2		Unf. Lin.	Right	00-00-00	03-05-00	Live	480 plf	n/a	100%
						Dead	320 plf	n/a	90%
3		Conc. Pt.	Left	03-05-00	03-05-00	Live	1904 lbs	n/a	115%
						Dead	931 lbs	n/a	90%
4		Conc. Pt.	Right	03-05-00	03-05-00	Live	1904 lbs	n/a	100%
						Dead	931 lbs	n/a	90%

Controls Summary

Control Type	Value	% Allowable	Duration	Load Case	Span Location
Moment	14570 ft-lbs	59.9%	115%	3	1 - Internal
Neg. Moment	0 ft-lbs	n/a	100%		
End Shear	4834 lbs	53.2%	115%	3	1 - Left
Total Load Defl.	L/320 (0.474")	74.9%		3	1
Live Load Defl.	L/502 (0.303")	71.8%		3	1
Max Defl.	0.474"	47.4%		3	1

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B0	Beam	3-1/2" x 3-1/2"	5636 lbs	51.1%	61.3%	Versa-Lam DF
B1	Beam	3-1/2" x 3-1/2"	5636 lbs	51.1%	61.3%	Versa-Lam DF

Notes

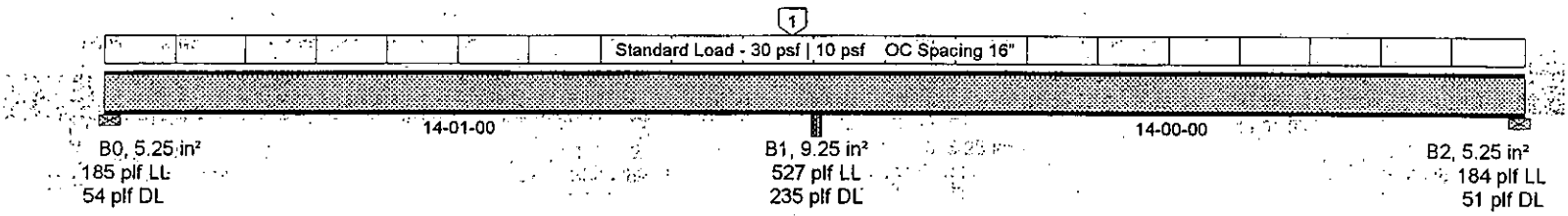
Design meets Code minimum (L/240) Total load deflection criteria.
Design meets Code minimum (L/360) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.
Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing + 1/2 intermediate bearing

Lakeside Engineering Services PC
CHRISTOPHER G DUDEK PE
35 Burnside Dr, E.Berlin PA 17316
New Jersey Lic No 23163

Single 9 1/2" BCI® 450s SP

Job Name: Matoy Residence
Address: 164 Princeton Ave
City, State, Zip: Brick Twp. , NJ
Customer: Tony Castro
Code reports: NER 594, ICBO 5208

File Name: TC0547Matoy : FLOOR 2\J_04
Description: 2Flr J1 Bdrm2 & 3
Specifier: pjb
Designer: Peter Blum
Company: DuBELL LUMBER CO.
Misc:



General Data

Version: US Imperial

Member Type: Joist
Number of Spans: 2
Left Cantilever: No
Right Cantilever: No

Slope: 0/12
OC Spacing: 16"
Repetitive: Yes
Construction Type: Glued

Live Load: 30 psf
Dead Load: 10 psf
Partition Load: 0 psf
Duration: 100

Disclosure

The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output above is based upon building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with the current Installation Guide and the applicable building codes. To obtain an Installation Guide or if you have any questions, please call (800)232-0788 before beginning product installation.

Load Summary

ID	Description	Load Type	Ref.	Start	End	Type	Value	OCS	Dur.
S	Standard Load	Unf. Area	Left	00-00-00	28-01-00	Live	30 psf	16"	100%
						Dead	10 psf	16"	90%
1		Conc. Lin.	Left	13-07-00	13-07-00	Live	0 plf	16"	90%
						Dead	60 plf	16"	90%

Controls Summary

Control Type	Value	% Allowable	Duration	Load Case	Span Location
Moment	1333 ft-lbs	42.6%	100%	2	2 - Left
Neg. Moment	-1333 ft-lbs	42.6%	100%	2	1 - Right
End Reaction	318 lbs	27.1%	100%	4	1 - Left
Int. Reaction	1016 lbs	34.4%	100%	2	1 - Right
Cont. Shear	547 lbs	35.3%	100%	2	1 - Right
Total Load Defl.	L/1167 (0.145")	20.6%		4	1
Live Load Defl.	L/1428 (0.118")	33.6%		4	1
Total Neg. Defl.	-0.04"	8.0%		4	2
Max Defl.	0.145"	14.5%		4	1
Span / Depth	17.8	n/a			1

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B0	Wall/Plate	5.25 in² *	318 lbs	15.0%	n/a	Hem-Fir
B1	Beam	9.25 in² *	1016 lbs	12.2%	n/a	Versa-Lam DF
B2	Wall/Plate	5.25 in² *	314 lbs	14.7%	n/a	Hem-Fir

Notes

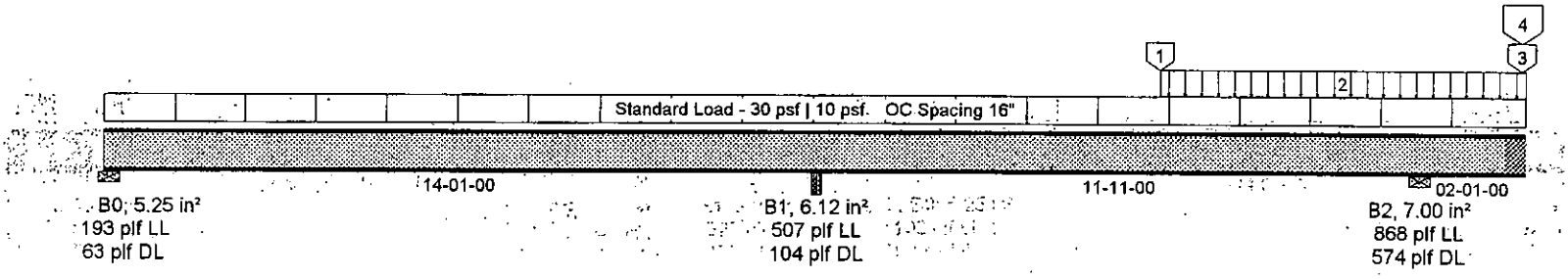
Design meets Code minimum (L/240) Total load deflection criteria.
Design meets User specified (L/480) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.
* Bearing Dim. generated from BC Framer® is total Bearing Area. Exact geometry is not available.
Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing + 1/2 intermediate bearing

Lakeside Engineering Services PC
CHRISTOPHER G DUDEK PE
35 Burnside Dr, E.Berlin PA 17316
New Jersey Lic No.23163

Single 9 1/2" BCI® 450s SP

Job Name: Matoy Residence
Address: 164 Princeton Ave
City, State, Zip: Brick Twp. , NJ
Customer: Tony Castro
Code reports: NER 594, ICBO 5208

File Name: TC0547Matoy : FLOOR 2\J_29
Description: 2Flr J 2 MstrBdrm/Bath
Specifier: pjb
Designer: Peter Blum
Company: DuBELL LUMBER CO.
Misc:



General Data

Version:	US Imperial
Member Type:	Joist
Number of Spans:	3
Left Cantilever:	No
Right Cantilever:	Yes
Slope:	0/12
OC Spacing:	16"
Repetitive:	Yes
Construction Type:	Glued
Live Load:	30 psf
Dead Load:	10 psf
Partition Load:	0 psf
Duration:	100

Disclosure

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Load Summary

ID	Description	Load Type	Ref.	Start	End	Type	Value	OCS	Dur.
S	Standard Load	Unf. Area	Left	00-00-00	28-01-00	Live	30 psf	16"	100%
						Dead	10 psf	16"	90%
1		Conc. Lin.	Left	20-10-00	20-10-00	Live	0 plf	16"	90%
						Dead	60 plf	16"	90%
2		Unf. Area	Left	20-10-00	28-01-00	Live	10 psf	16"	100%
						Dead	0 psf	16"	90%
3		Conc. Lin.	Right	00-01-00	00-01-00	Live	0 plf	16"	90%
						Dead	80 plf	16"	90%
4		Conc. Lin.	Right	00-01-00	00-01-00	Live	480 plf	16"	115%
						Dead	320 plf	16"	90%

Controls Summary

Control Type	Value	% Allowable	Duration	Load Case	Span Location
Moment	2490 ft-lbs	69.1%	115%	3	3 - Left
Neg. Moment	-2490 ft-lbs	69.1%	115%	3	2 - Right
End Reaction	302 lbs	25.7%	100%	2	1 - Left
Int. Reaction	1923 lbs	66.9%	115%	7	3 - Left
Cont. Shear	1312 lbs	73.6%	115%	3	3 - Left
Total Load Defl.	2xL/275 (0.182")	65.4%		4	3 - Right Support
Live Load Defl.	2xL/439 (0.114")	54.7%		4	3 - Right Support
Total Neg. Defl.	-0.178"	35.5%		4	2
Max Defl.	0.182"	18.2%		4	3 - Right Support
Span / Depth	17.8	n/a			1

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B0	Wall/Plate	5.25 in² *	341 lbs	16.0%	n/a	Hem-Fir
B1	Beam	6.12 in² *	815 lbs	14.8%	n/a	Versa-Lam DF
B2	Wall/Plate	7.00 in² *	1923 lbs	67.8%	n/a	Hem-Fir

Cautions

Design assumes Top and Bottom flanges to be restrained at cantilever.
Web stiffeners are always required under concentrated loads that exceed 1000 lbs. Install the web stiffeners snug to the top of the flange. Follow the nailing schedule for intermediate bearings.

Notes

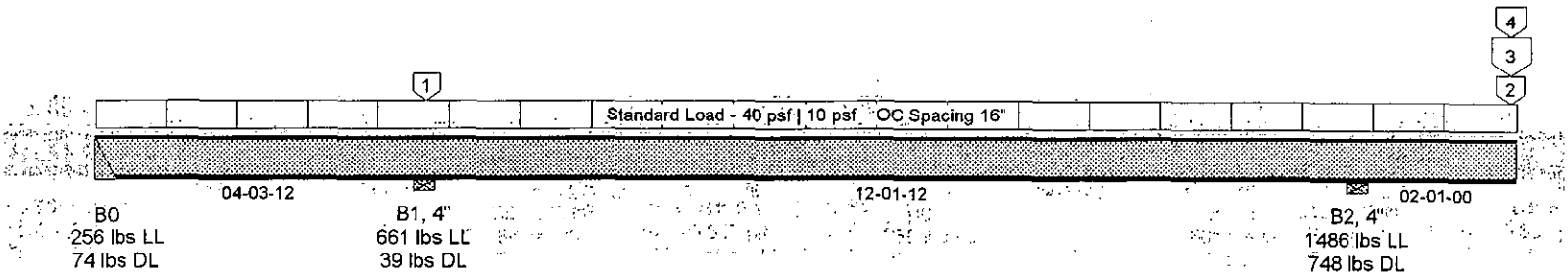
Design meets Code minimum (2xL/180) Total load deflection criteria for cantilever spans due to roof loads.
Design meets Code minimum (L/240) Total load deflection criteria for non-cantilever spans.
Design meets Code minimum (2xL/240) Live load deflection criteria for cantilever spans due to roof loads.
Design meets Code minimum (L/360) Live load deflection criteria for non-cantilever spans.
Design meets arbitrary (1") Maximum load deflection criteria.
* Bearing Dim. generated from BC Framer® is total Bearing Area. Exact geometry is not available.
Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing + 1/2 intermediate bearing

Lakeside Engineering Services PC
CHRISTOPHER G DUDEK PE
35 Burnside Dr, E.Berlin PA 17316
New Jersey Lic No 23163

Single 11 7/8" BCI® 450s SP

Job Name: Matoy Residence
Address: 164 Princeton Ave
City, State, Zip: Brick Twp. , NJ
Customer: Tony Castro
Code reports: NER 594, ICBO 5208

File Name: TC0547Matoy : FLOOR 2\J_21
Description: 2Flr J3 Hall/Bath
Specifier: *pjb*
Designer: Peter Blum
Company: DuBELL LUMBER CO.
Misc:



General Data

Version:	US Imperial
Member Type:	Joist
Number of Spans:	3
Left Cantilever:	No
Right Cantilever:	Yes
Slope:	*0/12*
OC Spacing:	16"
Repetitive:	Yes
Construction Type:	Glued
Live Load:	40 psf
Dead Load:	*10 psf*
Partition Load:	0 psf
Duration:	100

Disclosure

The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output above is based upon building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with the current Installation Guide and the applicable building codes. *To obtain an Installation Guide or if* you have any questions, please call (800)232-0788 before beginning product installation.

Load Summary

ID	Description	Load Type	Ref.	Start	End	Type	Value	OCS	Dur.
S	Standard Load	Unf. Area	Left	00-00-00	18-06-08	Live	40 psf	16"	100%
						Dead	10 psf	16"	90%
1		Conc. Lin.	Left	04-04-00	04-04-00	Live	0 plf	16"	90%
						Dead	60 plf	16"	90%
2		Conc. Lin.	Right	00-01-00	00-01-00	Live	0 plf	16"	90%
						Dead	80 plf	16"	90%
3		Conc. Lin.	Right	00-01-00	00-01-00	Live	480 plf	16"	90%
						Dead	320 plf	16"	90%
4		Conc. Lin.	Right	00-01-00	00-01-00	Live	192 plf	16"	100%
						Dead	0 plf	16"	90%

Controls Summary

Control Type	Value	% Allowable	Duration	Load Case	Span Location
Moment	3001 ft-lbs	72.3%	100%	3	3 - Left
Neg. Moment	-3001 ft-lbs	72.3%	100%	3	2 - Right
End Reaction	329 lbs	27.5%	100%	4	1 - Left
Int. Reaction	2235 lbs	88.5%	100%	7	3 - Left
Cont. Shear	1568 lbs	87.1%	100%	3	3 - Left
Uplift	194 lbs	n/a		4	1 - Right
Uplift	0 lbs	n/a		4	2 - Left
Total Load Defl.	2xL/278 (0.18")	64.7%		4	3 - Right Support
Live Load Defl.	2xL/411 (0.122")	58.4%		4	3 - Right Support
Total Neg. Defl.	-0.096"	19.3%		4	2
Max Defl.	0.18"	18.0%		4	3 - Right Support
Span / Depth	12.3	n/a			2

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B0	Hanger Load	n/a	329 lbs	n/a	n/a	Hanger
B0	Hanger Uplift	n/a	81 lbs	n/a	n/a	Hanger
B1	Wall/Plate	4" x 1-3/4"	700 lbs	24.7%	n/a	Hem-Fir
B2	Wall/Plate	4" x 1-3/4"	2235 lbs	78.8%	n/a	Hem-Fir

Cautions

Uplift of 194 lbs found at span 1 - Right.
Design assumes Top and Bottom flanges to be restrained at cantilever.
Web stiffeners are always required under concentrated loads that exceed 1000 lbs. Install the web stiffeners snug to the top of the flange. Follow the nailing schedule for intermediate bearings.

Notes

Design meets Code minimum (2xL/180) Total load deflection criteria.
Design meets Code minimum (2xL/240) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.
Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing + 1/2 intermediate bearing
Connector Manufacturer: Simpson Strong-Tie® Company Inc.

Lakeside Engineering Services PC
CHRISTOPHER G DUDEK PE
35 Burnside Dr, E.Berlin PA 17316
New Jersey Lic No 23163

Permit Number
Checked By/Date

Generated by RESCheck-Web Software

Compliance Certificate

Project Title: PROPOSED SECOND FLOOR ADDITION

Energy Code: **New Jersey Energy Subcode**
Location: **Ocean County, New Jersey**
Construction Type: **Single Family**
Window-to-Wall Ratio: **0.14**
Heating Degree Days: **5000**

Report Date:

Date of Plans: **JULY 1, 2005**

Project Information:
SECOND FLOOR ADDITION to Existing Single Floor Structure
1640 West Princeton Avenue, Brick, NJ 08724
Block: 830 Lots: 15, 16 & 17

Builder Information:
ALEX MAPOY-OWNER
1640 West Princeton Avenue, Brick, NJ 08724

Project Notes:

EXISTING FOUNDATION and BUILDING FOOTPRINT TO REMAIN - NO CHANGES
EXISTING FIRST FLOOR TO REMAIN - NO CHANGES

Compliance: Passes Maximum UA: 234 Your Home UA: 172 --> 26.5% Better Than Code (UA)

Assembly	Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Glazing or Door U-Factor	UA
Wall 1: Wood Frame, 16in. o.c.	1083	13.0	0.0		77
Door 1: Glass	8			0.300	2
Window 1: Metal Frame, 2 Pane w/ Low-E	139			0.300	42
Ceiling 1: Flat or Scissor Truss	1363	30.0	0.0		48
Floor1: All-Wood Joist/Truss Over Outside Air	84	30.0	0.0		3
Furnace 1: Forced Hot Air (Non-Electric): 90 AFUE					
Air Conditioner 1: Electric Central Air: 13 SEER					

Statement of Compliance: The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the New Jersey Energy Subcode requirements in RES*check-Web* and to comply with the mandatory requirements listed in the RES*check* Inspection Checklist.

Builder/Designer	Company Name	Date
	JOE GARRAMONE ARCHITECT	JULY 25 2005

Figure 55. Valley Rafter Roof Framing

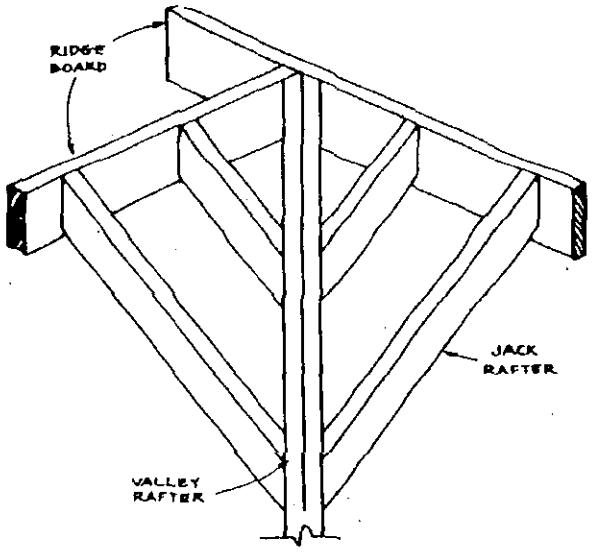


Figure 56. Hip Rafter Roof Framing

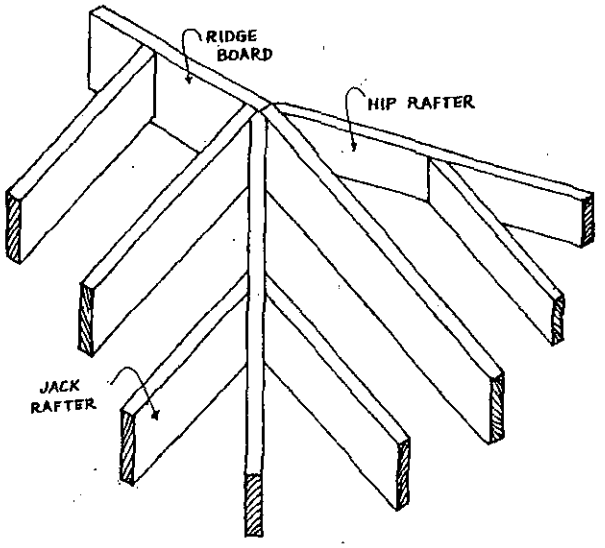
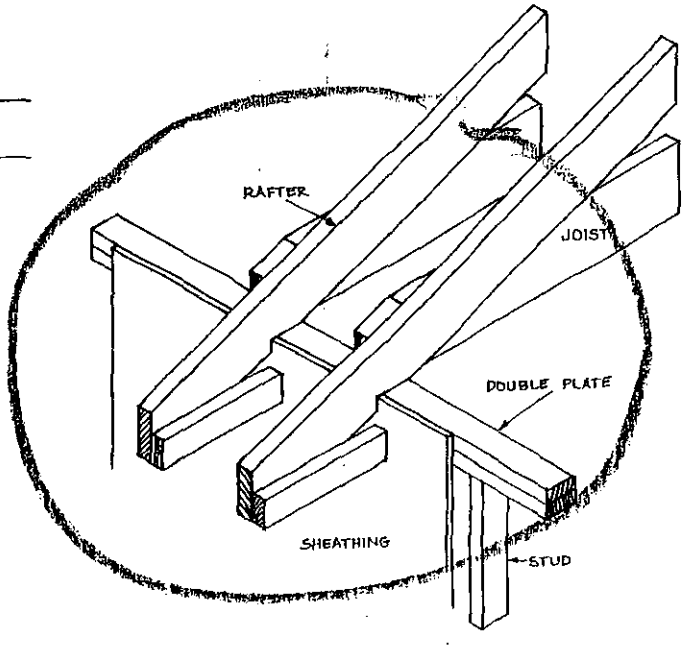
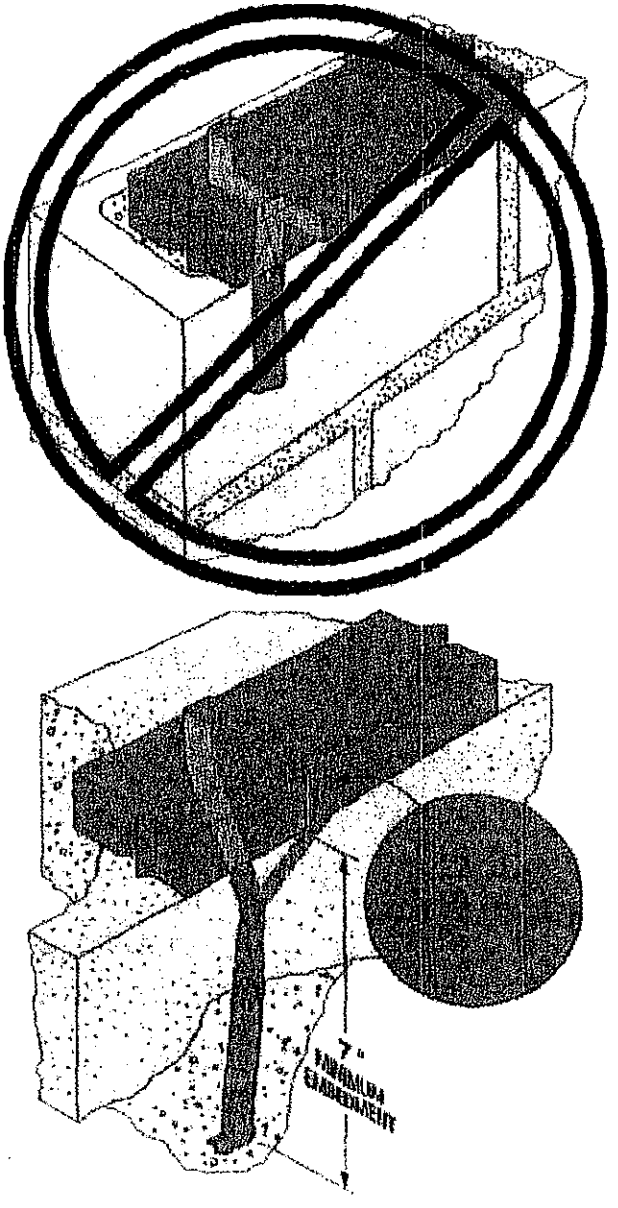


Figure 57. Roof Framing at Eave



Attention!

Anchor straps must be separated before the concrete is poured!



GARRAMONE ARCHITECTS , LLC

JG

Joseph Garramone R.A. P.P. **Architect / Professional Planner**

204 DORAL DRIVE BLACKWOOD , N.J. 08012
(856) 232-1494 (856) 232-9577 (Fax) E-mail : joegar@comcast.net

November 2, 2005

Construction Official
Township of Brick
401 Chambers Bridge Road
Brick , N.J. 08723

Re : Mapoy Residence
Block 830 Lot 15
1640 West Princeton Ave.

Dear Sir

Pursuant to your request , I offer the following information for your review and subsequent approval.

The project consists of a second floor addition being installed on an existing one story structure. The new addition consists of new TJI floor joists and conventional roof framing . An alternate roof framing plan was submitted to your office which substitutes wood roof rafters and ceiling joists for a roof truss system.

The criteria used to design this addition was taken from the IRC 2000 New Jersey Edition. The installation of collar ties , hurricane clips , bird's mouth attachment at the roof / ceiling assembly framing meets the criteria for a Category 'C' building with 110 mph wind speed.

The new exterior wood sheathing will overlap the existing rim board of the new TJI floor joists to structurally tie the floor and walls together.

I trust this information meets with your approval and should you have any additional questions or comments , please call our office .

Sincerely ,

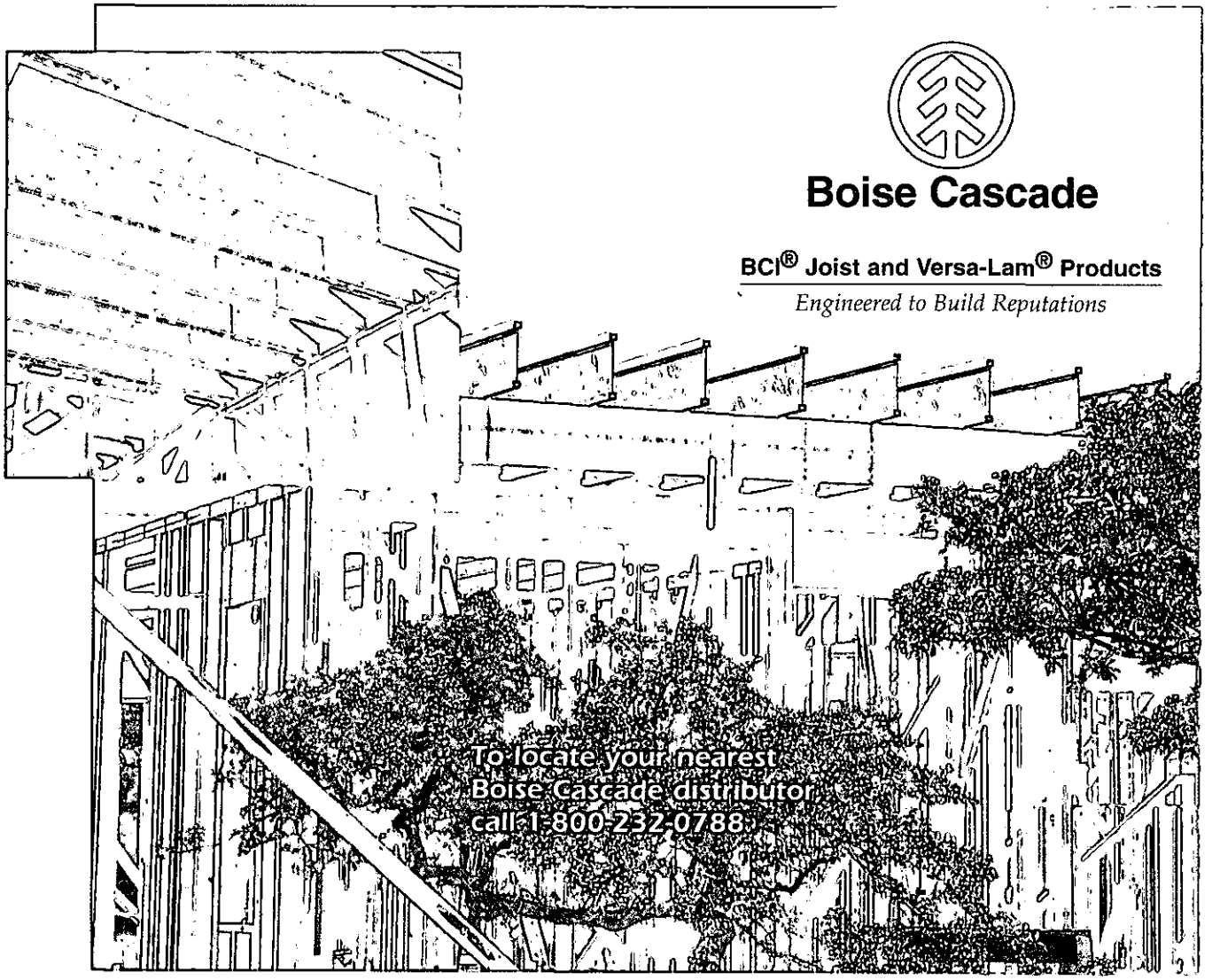
Joseph Garramone R.A. P.P.

cc: Mr. Alex Mapoy

BOISE CASCADE
SOUTHERN ENGINEERED WOOD PRODUCTS

INSTALLATION GUIDE

Boise Cascade BCI® Joist, Versa-Rim 98®, BC OSB Rim Board®, BC Rim Board® and Versa-Lam® Laminated Veneer Lumber



Boise Cascade

BCI® Joist and Versa-Lam® Products

Engineered to Build Reputations

To locate your nearest Boise Cascade distributor call 1-800-232-0788

Lifetime Guaranteed Quality and Performance

Boise Cascade warrants its BCI® Joists and Versa-Lam®Products to comply with our specifications and to be free from defects in materials and workmanship. Further, we guarantee that these products, when correctly installed and used, will meet or exceed our specifications for the life of the structure.

(3) 1¾" plies	Depth ≤ 12"	2 rows 16d box or 3½" x .131" nails @ 12" o.c.	300 plf maximum uniform load from one side
	Depth > 12"	3 rows 16d box or 3½" x .131" nails @ 12" o.c.	450 plf maximum uniform load from one side
(4) 1¾" plies	All Depths	2 rows ½" bolts @ 24" o.c. staggered	335 plf maximum uniform load from one side
(2) 3½" plies	All Depths	2 rows ½" bolts @ 24" o.c. staggered	860 plf maximum uniform load from one side

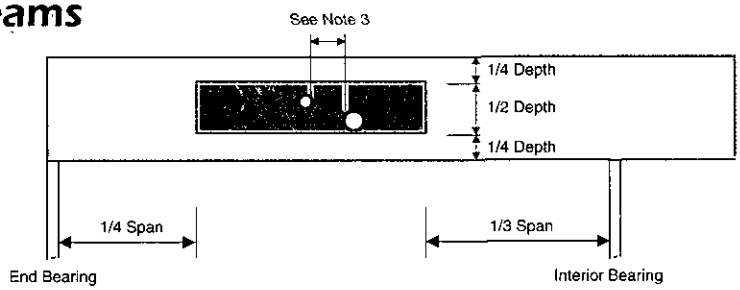
- Use allowable load tables or BC Calc software to size beams.

Allowable Holes in Versa-Lam® Beams

Notes

1. Square and rectangular holes are not permitted.
2. Round holes may be drilled or cut with a hole saw anywhere within the shaded area of the beam.
3. The horizontal distance between adjacent holes must be at least two times the size of the larger hole. This restriction also applies to the location of access holes relative to bolt holes in multi-ply beams.
4. Do not drill more than three access holes in any four foot long section of beam.
5. The maximum round hole diameter permitted is:

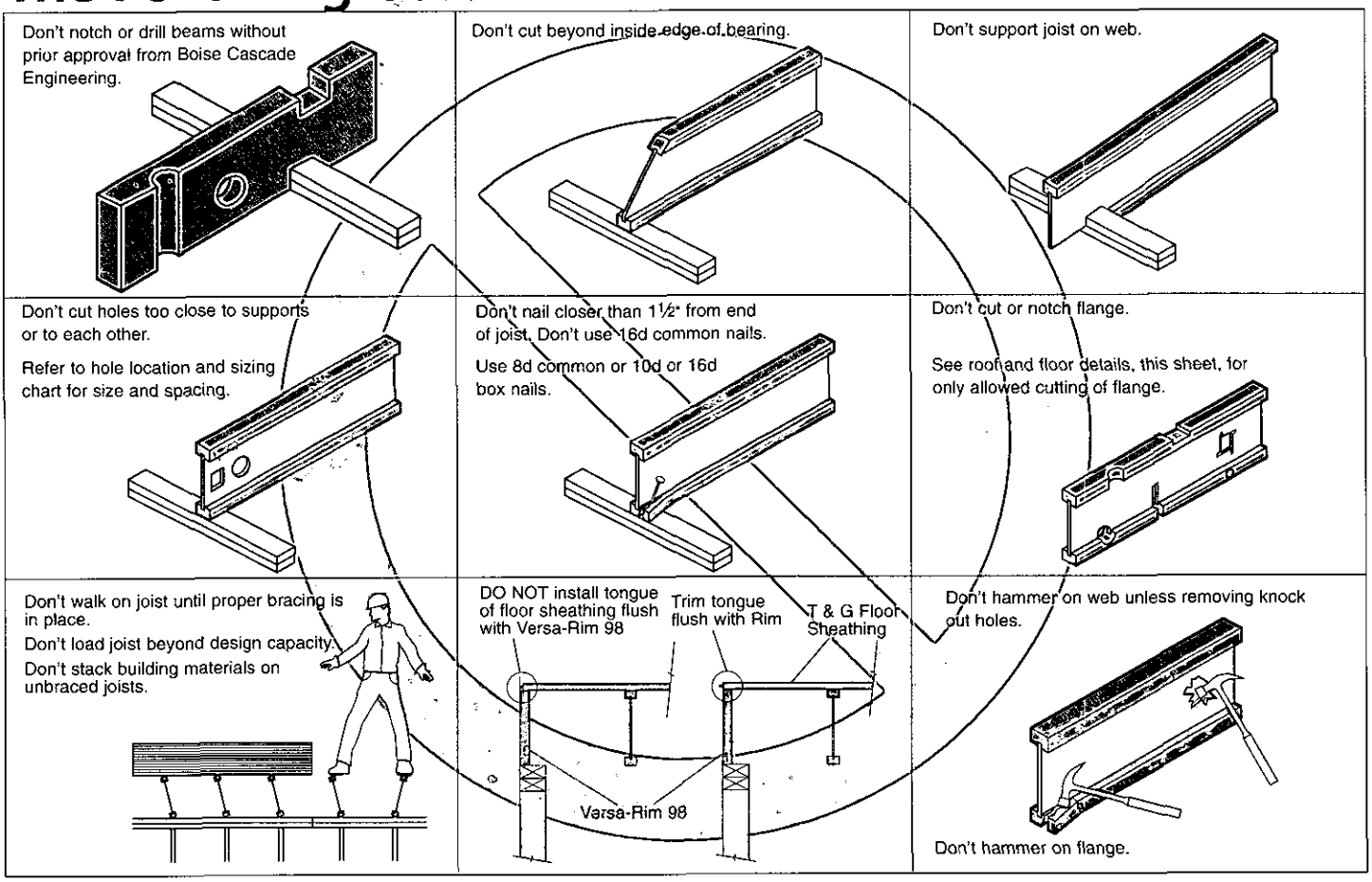
Beam Depth	Max. Hole Diameter
5.5"	¾"
7.25"	1"
9.5", 11.88", 14"	1½"
16", 18", 20"	1½"



6. These limitations apply to holes drilled for plumbing or wiring access only. The size and location of holes drilled for fasteners are governed by the provisions of the *National Design Specification® for Wood Construction.*
7. Beams deflect under load. Size holes to provide clearance where required.
8. This hole chart is valid for beams supporting uniform load only. For beams supporting concentrated loads or for beams with larger holes, contact Boise Cascade Engineering.

Warning

The Following Uses Are Not Allowed



DO NOT ALLOW WORKERS ON BCI JOISTS UNTIL ALL HANGERS, BCI RIM JOISTS, RIM BOARDS, BCI BLOCKING PANELS, X-BRACING AND TEMPORARY 1x4 STRUT LINES ARE INSTALLED AS SPECIFIED BELOW. SERIOUS ACCIDENTS CAN RESULT FROM INSUFFICIENT ATTENTION TO PROPER BRACING DURING CONSTRUCTION. ACCIDENTS CAN BE AVOIDED UNDER NORMAL CONDITIONS BY FOLLOWING THESE GUIDELINES:

- Build a braced end wall at the end of the bay, or permanently install the first eight feet of BCI Joists and the first course of sheathing. As an alternate, temporary sheathing may be nailed to the first four feet of BCI Joists at the end of the bay.
- All hangers, BCI rim joists, rim boards, BCI blocking panels, and x-bracing must be completely installed and properly nailed as each BCI Joist is set.
- Install temporary 1x4 strut lines at no more than eight feet on center as additional BCI Joists are set. Nail the strut lines to the sheathed area, or braced end wall, and to each BCI Joist with two 8d nails.
- The ends of cantilevers must be temporarily secured by strut lines on both the top and bottom flanges.
- Straighten the BCI Joists to within ½ inch of true alignment before attaching strut lines and sheathing.
- Remove the temporary strut lines only as required to install the permanent sheathing.
- Failure to install temporary bracing may result in sideways buckling or roll-over under light construction loads.

The performance of a floor is a matter of opinion, the "feel" that might be acceptable to one person may not be acceptable to another. Many factors affect the perceived performance of a floor system, some of them are:

- **The depth of the joist**
- **Continuous or simple spans**
- **Decking and flooring material**
- **Gluing and nailing the decking**
- **On-center spacing of the joist system**
- **Lack of drywall attached to underside of joist**
- **Level bearings**
- **Location of walls and furniture**

To improve the performance of a floor system, a designer will frequently change the deflection criteria from L/360 to L/480 or higher. One way to accomplish this is by reducing the on-center spacing of the joist. The load capacity of the joist system will be increased but the "feel" of the floor system will not be significantly changed. The stiffness of a floor system is significantly increased and the vibration is reduced by increasing the joist depth. To illustrate this, see the BCI span table above.

Load Bearing Cantilever Details

BCI Joists

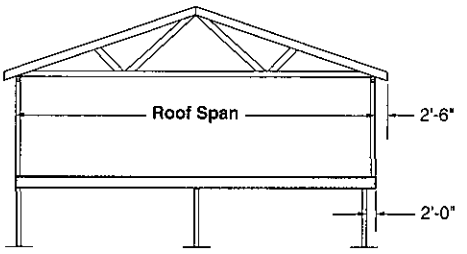
KEY OF **0** - No Reinforcement Required; **WS** - Web Stiffeners at Support; **1** - Web Stiffeners Plus One Reinforcer; **2** - Web Stiffeners Plus Two Reinforcers; **X** - Use Deeper Joists or Closer Spacing

Joist Depth [in]	Joist Series	Roof Truss Span [ft]	Roof Total Load [psf] 35 — Joist Spacing [in] 16	19.2	24	45 — 16	19.2	24	55 — 16	19.2	24
9.5"	400s	24	0	0	0	0	0	X	0	0	X
		26	0	0	0	0	0	X	0	X	X
		28	0	0	0	0	0	X	0	X	X
		30	0	0	X	0	0	X	0	X	X
		32	0	0	X	0	X	X	X	X	X
		34	0	0	X	0	X	X	X	X	X
		36	0	0	X	0	X	X	X	X	X
		38	0	0	X	0	X	X	X	X	X
		40	0	0	X	X	X	X	X	X	X
	450s	24	0	0	0	0	0	0	0	0	X
		26	0	0	0	0	0	0	0	0	X
		28	0	0	0	0	0	X	0	0	X
		30	0	0	0	0	0	X	0	X	X
		32	0	0	0	0	0	X	0	X	X
		34	0	0	0	0	0	X	0	X	X
		36	0	0	1	0	0	X	0	X	X
		38	0	0	X	0	X	X	X	X	X
		40	0	0	X	0	X	X	X	X	X
	500s	24	0	0	0	0	0	0	0	0	X
		26	0	0	0	0	0	0	0	0	X
		28	0	0	0	0	0	1	0	0	X
		30	0	0	0	0	0	X	0	1	X
		32	0	0	0	0	0	X	0	1	X
		34	0	0	0	0	0	X	0	1	X
		36	0	0	1	0	0	X	0	X	X
		38	0	0	1	0	1	X	1	X	X
		40	0	0	X	0	1	X	1	X	X
11.875"	400s	24	0	0	0	0	0	0	0	0	1
		26	0	0	0	0	0	WS	0	0	1
		28	0	0	0	0	0	WS	0	0	X
		30	0	0	0	0	0	1	0	WS	X
		32	0	0	0	0	0	1	0	WS	X
		34	0	0	WS	0	0	X	0	1	X
		36	0	0	WS	0	0	X	0	X	X
		38	0	0	WS	0	WS	X	0	X	X
		40	0	0	1	0	WS	X	WS	X	X
	450s	24	0	0	0	0	0	0	0	0	WS
		26	0	0	0	0	0	0	0	0	WS
		28	0	0	0	0	0	WS	0	0	1
		30	0	0	0	0	0	WS	0	0	X
		32	0	0	0	0	0	WS	0	0	X
		34	0	0	0	0	0	1	0	WS	X
		36	0	0	0	0	0	1	0	1	X
		38	0	0	WS	0	0	X	0	1	X
		40	0	0	WS	0	0	X	0	1	X
	500s	24	0	0	0	0	0	0	0	0	WS
		26	0	0	0	0	0	0	0	0	WS
		28	0	0	0	0	0	WS	0	0	X
		30	0	0	0	0	0	WS	0	0	X
		32	0	0	0	0	0	WS	0	WS	X
		34	0	0	0	0	0	1	0	WS	X
		36	0	0	WS	0	0	X	0	1	X
		38	0	0	WS	0	0	X	0	1	X
		40	0	0	WS	0	WS	X	0	1	X
	600s	24	0	0	0	0	0	0	0	0	0
		26	0	0	0	0	0	0	0	0	0
		28	0	0	0	0	0	0	0	0	1
		30	0	0	0	0	0	0	0	0	X
		32	0	0	0	0	0	0	0	0	X
		34	0	0	0	0	0	1	0	0	X
		36	0	0	0	0	0	X	0	0	X
		38	0	0	0	0	0	X	0	1	X
		40	0	0	0	0	0	X	0	1	X
	900s	24	0	0	0	0	0	0	0	0	0
		26	0	0	0	0	0	0	0	0	0
		28	0	0	0	0	0	0	0	0	0
		30	0	0	0	0	0	0	0	0	1
		32	0	0	0	0	0	0	0	0	1
		34	0	0	0	0	0	0	0	0	2
		36	0	0	0	0	0	0	0	0	2
		38	0	0	0	0	0	1	0	0	2
		40	0	0	0	0	0	1	0	1	X

Joist Depth [in]	Joist Series	Roof Truss Span [ft]	Roof Total Load [psf] 35 — Joist Spacing [in] 16	19.2	24	45 — 16	19.2	24	55 — 16	19.2	24
14"	400s	24	0	0	0	0	0	0	0	0	WS
		26	0	0	0	0	0	WS	0	0	WS
		28	0	0	0	0	0	WS	0	0	1
		30	0	0	0	0	0	WS	0	WS	1
		32	0	0	0	0	0	WS	0	WS	1
		34	0	0	WS	0	0	1	0	WS	X
		36	0	0	WS	0	0	1	0	WS	X
		38	0	0	WS	0	WS	1	0	1	X
		40	0	0	WS	0	WS	1	WS	1	X
	450s	24	0	0	0	0	0	0	0	0	WS
		26	0	0	0	0	0	0	0	0	WS
		28	0	0	0	0	0	WS	0	0	1
		30	0	0	0	0	0	WS	0	0	1
		32	0	0	0	0	0	WS	0	WS	1
		34	0	0	0	0	0	WS	0	WS	1
		36	0	0	WS	0	0	1	0	WS	1
		38	0	0	WS	0	0	1	0	1	2
		40	0	0	WS	0	WS	1	0	1	X
	500s	24	0	0	0	0	0	0	0	0	WS
		26	0	0	0	0	0	0	0	0	WS
		28	0	0	0	0	0	WS	0	0	1
		30	0	0	0	0	0	WS	0	0	1
		32	0	0	0	0	0	WS	0	WS	1
		34	0	0	0	0	0	WS	0	WS	1
		36	0	0	WS	0	0	1	0	WS	2
		38	0	0	WS	0	0	1	0	1	2
		40	0	0	WS	0	WS	1	0	1	X
	600s	24	0	0	0	0	0	0	0	0	0
		26	0	0	0	0	0	0	0	0	0
		28	0	0	0	0	0	0	0	0	0
		30	0	0	0	0	0	0	0	0	1
		32	0	0	0	0	0	0	0	0	1
		34	0	0	0	0	0	0	0	0	2
		36	0	0	0	0	0	0	0	0	2
		38	0	0	0	0	0	1	0	0	2
		40	0	0	0	0	0	1	0	1	X
	900s	24	0	0	0	0	0	0	0	0	0
		26	0	0	0	0	0	0	0	0	0
		28	0	0	0	0	0	0	0	0	0
		30	0	0	0	0	0	0	0	0	0
		32	0	0	0	0	0	0	0	0	0
		34	0	0	0	0	0	0	0	0	WS
		36	0	0	0	0	0	0	0	0	WS
		38	0	0	0	0	0	0	0	0	1
		40	0	0	0	0	0	0	0	0	1

Joist Depth [in]	Joist Series	Roof Truss Span [ft]	Roof Total Load [psf] 35 — Joist Spacing [in] 16	19.2	24	45 — 16	19.2	24	55 — 16	19.2	24
16"	450s	24	0	0	0	0	0	0	0	0	WS
		26	0	0	0	0	0	0	0	0	WS
		28	0	0	0	0	0	WS	0	0	WS
		30	0	0	0	0	0	WS	0	0	WS
		32	0	0	0	0	0	WS	0	WS	1
		34	0	0	0	0	0	WS	0	WS	1
		36	0	0	WS	0	0	WS	0	WS	1
		38	0	0	WS	0	0	1	0	WS	1
		40	0	0	WS	0	WS	1	0	WS	1
	500s	24	0	0	0	0	0	0	0	0	WS
		26	0	0	0	0	0	0	0	0	WS
		28	0	0	0	0	0	WS	0	0	WS
		30	0	0	0	0	0	WS	0	WS	WS
		32	0	0	0	0	0	WS	0	WS	1
		34	0	0	0	0	0	WS	0	WS	1
		36	0	0	WS	0	0	WS	0	WS	1
		38	0	0	WS	0	WS	1	0	WS	1
		40	0	0	WS	0	WS	1	0	WS	2
	600s	24	0	0	0	0	0	0	0	0	0
		26	0	0	0	0	0	0	0	0	0
		28	0	0	0	0	0	0	0	0	WS
		30	0	0	0	0	0	0	0	0	WS
		32	0	0	0	0	0	0	0	0	1
		34	0	0	0	0	0	WS	0	0	1
		36	0	0	0	0	0	WS	0	0	1
		38	0	0	0	0	0	WS	0	WS	1
		40	0	0	0	0	0	1	0	WS	2
	900s	24	0	0	0	0	0	0	0	0	0
		26	0	0	0	0	0	0	0	0	0
		28	0	0	0	0	0	0	0	0	0
		30	0	0	0	0	0	0	0	0	0
		32	0	0	0	0	0	0	0	0	0
		34	0	0	0	0	0	0	0	0	WS
		36	0	0	0	0	0	0	0	0	WS
		38	0	0	0	0	0	0	0	0	1
		40	0	0	0	0	0	0	0	0	1

1. Cut 48" long reinforcers to match the joist depth. Use 23/32" APA Rated Sheathing, Exposure 1, 48/24 Span Rating panels. The face grain must be horizontal (measure the 48" dimension along the long edge of the panel).
2. Fasten the reinforcer to the joist flanges with 8d nails at 6" o. c. When reinforcing both sides, stagger the nails to avoid splitting the joist flanges.
3. Attach web stiffeners per intermediate Web Stiffener Nailing Schedule on page 10 of the Specifier Guide.
4. Use the BC Calc software to analyze conditions that are not covered by this table. It may be possible to exceed the limitations of this table by analyzing a specific application with BC Calc.



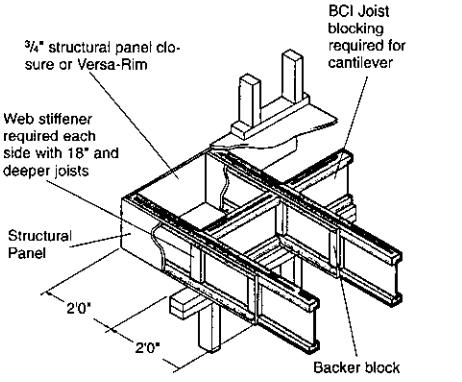
REINFORCEMENT REQUIREMENTS

- BCI Joists may be cantilevered up to a maximum of 2'-0" when supporting roof loads, but may need reinforcement. The tables and details on this page indicate the type of reinforcement required, if any.
- The tables and details on this page indicate the type of reinforcement, if any, is required for load-bearing cantilevers up to a maximum length of 2'-0". Cantilevers longer than 2'-0" cannot be reinforced. However, longer cantilevers with lower loads may be allowable without reinforcement. Analyze specific applications with BC Calc software.

KEY TO REQUIRED REINFORCEMENT

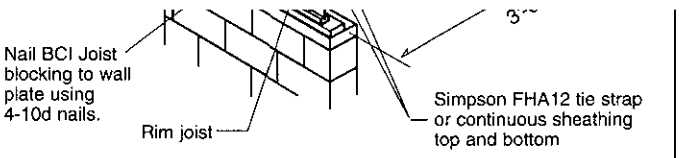
0 - No Reinforcement Required
WS - Web Stiffeners at Support
1 - Web Stiffeners Plus One Reinforcer
2 - Web Stiffeners Plus Two Reinforcers
X - Use Deeper Joists or Closer Spacing

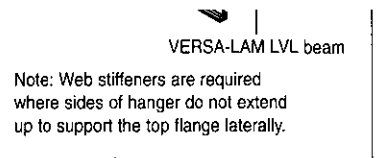
- These requirements assume a 100 PLF wall load and apply to BCI 400s, 450s, 500s, 600s and 900s Series joists. Additional support may be required for other loadings. See BC Calc program.
- Contact Boise Cascade for reinforcement requirements on BCI Joist depths greater than 16".



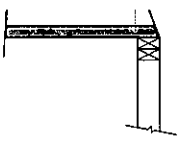
PLYWOOD REINFORCEMENT

- 3/4" x 48" CDX structural panel reinforcement or other 3/4" APA 48/24 rated sheathing must match the full depth of the BCI Joist. Nail to the BCI Joist with 8d nails at 6" o.c. and nail with 4-8d nails into backer block. When reinforcing both sides, stagger nails to avoid splitting. Install with horizontal face grain.

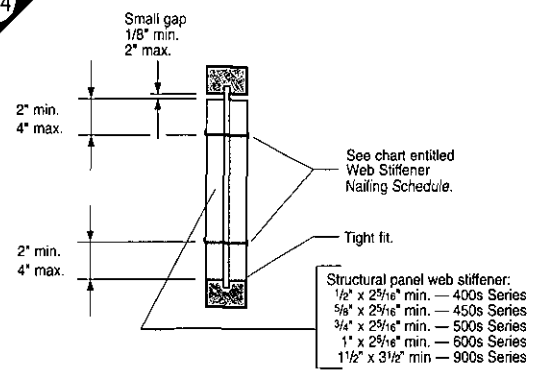




Note: Web stiffeners are required where sides of hanger do not extend up to support the top flange laterally.



F14



Web Stiffener Nailing Schedule[1]

Joist Series	Joist Depth	Nailing
BCI 400s	9½"	2-8d
	11⅞"	3-8d
	14"	5-8d
BCI 450s	9½"	2-8d
	11⅞"	3-8d
	14"	5-8d
	16"	6-8d
BCI 500s	9½"	2-8d
	11⅞"	3-8d
	14"	5-8d
	16"	6-8d
BCI 600s	11⅞"	3-8d
	14"	5-8d
	16"	6-8d
BCI 900s	11⅞"	3-16d
	14"	5-16d
	16"	6-16d

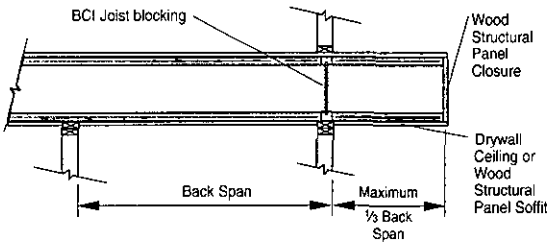
Web Stiffener Requirements

- Web stiffeners are optional except as noted below.
- Web stiffeners are always required at supports on 18 & 20 inch BCI Joists.
- Web stiffeners are always required in hangers that do not extend up to support the top flange of the BCI Joist. Web stiffeners may be required with certain sloped or skewed hangers or to achieve uplift values. Refer to the hanger manufacturer's installation requirements.
- Web stiffeners are always required in certain roof applications. *See Roof Details* on upper lefthand panel.
- Web stiffeners are always required under concentrated loads that exceed 1000 pounds. Install the web stiffeners snug to the top flange in this situation. Follow the nailing schedule for intermediate bearings.
- Web stiffeners may be used to increase allowable reaction values. See *Southern Specifier Guide* or the BC Calc software.

F15

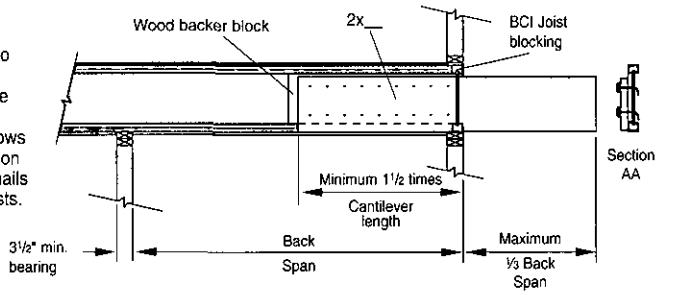
NON-LOAD BEARING CANTILEVER DETAILS

BCI Joists are intended only for applications that provide permanent protection from the weather.



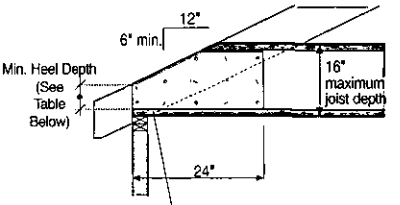
- These details apply to cantilevers with uniform loads only.
- It may be possible to exceed the limitations of *these details* by analyzing a specific application with the BC Calc software.

Fasten the 2x__ to the BCI Joist by nailing through the backer block and joist web with 2 rows of 10d nails at 6" on center. Use 16d nails with BCI 900s joists.



F16

2 x 6 miminum rafter. Attached to reinforced joist per code requirements



Minimum Heel Depth						
End Wall Bearing	Roof Pitch 6/12	7/12	8/12	9/12	10/12	12/12
2 x 4	4⅜"	4⁵/₁₆"	4¼"	4¼"	4¼"	4¼"
2 x 6	3⅜"	3³/₁₆"	2⁵/₁₆"	2¾"	2⁹/₁₆"	2¼"

[2]³/₃₂ inch APA Rated Sheathing Exposure 1 (¾" CDX or OSB). Cut reinforcement as shown below. *Install on both* sides of the joist, snug to the bottom flange. Coat contact faces with an adhesive meeting the APA AFG-01 specification, and fasten with 3 rows of minimum 10d box nails at 6" o.c. Alternate nailing from each side and clinch.

Notes for Floor Details

LATERAL SUPPORT

- BCI Joists must be laterally supported at the ends with hangers, BCI rim joists, rim boards, BCI blocking panels or x-bracing. BCI blocking panels or x-bracing are required at cantilever supports.

MINIMUM BEARING LENGTH FOR BCI JOISTS

- 1¾ inches is required at end supports. 3½ inches is required at cantilever and intermediate supports.
- Longer bearing lengths allow higher reaction values. Refer to the building code evaluation report or the BC Calc software.

NAILING REQUIREMENTS

- BCI rim joist, rim board or closure panel to BCI Joist:
  - Rims or closure panels 1¾ inches wide and less: 2-8d box nails, one each in the top and bottom flange.
  - BCI 500s rim joist: 2-10d box nails, one each in the top and bottom flange.
  - BCI 600s rim joist: 2-16d box nails, one each in the top and bottom flange.
  - BCI 900s rim joist: Toe-nail top flange to rim joist with 2-10d box nails, one each side of flange.
- BCI rim joist, rim board or BCI blocking panel to support:
  - 8d nails at 6 inches on center.
  - When used for shear transfer, follow the building designer's specification.
- BCI Joist to support:
  - 2-8d nails, one on each side of the web, *placed* 1½ inches minimum from the end of the BCI Joist to avoid splitting.
- Sheathing to BCI Joist:
  - See *Closest Allowable Nail Spacing* on back panel.
  - BCI 400s , 450s & 500s Joist: Maximum nail spacing is 18 inches on-center.
  - BCI 600s & 900s Joist: Maximum nail spacing is 24 inches on-center.
  - 14-gauge staples may be substituted for 8d nails if the staples penetrate at least 1 inch into the joist.

BACKER AND FILLER BLOCK DIMENSIONS

Series	Backer Block Thickness	Filler Block Thickness
400s	½" or ⅝" wood panel	Two ½" wood panels or 2 x _
450s	⅝" or ¾" wood panel	Two ⅝" wood panels or 2 x _
500s	¾" or ⅞" wood panel	Two ¾" wood panels or 2 x _
600s	Two 1/2" wood panels	2 x _ + ½" wood panel
900s	2 x _ lumber	Double 2 x _ lumber

- Cut backer and filler blocks to a maximum depth equal to the joist depth minus 3¼ inches to avoid a forced fit.

WEB STIFFENER REQUIREMENTS

- See *Web Stiffener Requirements* to the left.

PROTECT BCI JOISTS FROM THE WEATHER

- BCI Joists are intended only for applications that provide permanent protection from the weather. Bundles of BCI Joists should be covered and stored off of the ground on stickers.

BCI RIM JOISTS AND BCI BLOCKING (ALL SERIES)

Joist Depth [in]	Capacity [plf]
9½	2800
11⅞	2775
14	2750
16	2450

RIM BOARD

Type[1,3]	Depth [in]	Capacity [plf][2]
Versa-Rim	≤ 16	4000
BC OSB Rim Board	≤ 16	4400 [4]
BC Rim Board	≤ 16	2750 [5]

1. Dimension lumber is not suitable for use as a rim board in BCI Joist floor systems.
2. Compression load capacity when set between a wall above and a support below. Rim boards are not intended for use as headers or beams across openings.
3. See *BC Rim Board* on page 31 of the Southern Specifier Guide.
4. When single rimboard used parallel to floor framing (starter joist), vertical capacity equals 850 lb/ft.
5. When single rimboard used parallel to floor framing (starter joist), vertical capacity equals 450 lb/ft.

Code Evaluations – *ICBO ES PFC-5208*
NER 594

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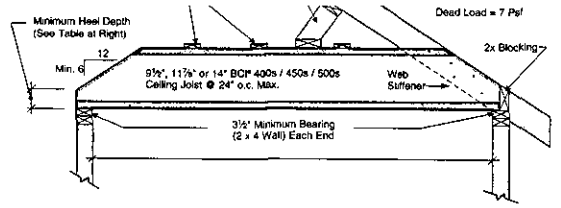


11⅞" BCI® 400s / 450s / 500s	22'-6"
14" BCI® 400s / 450s / 500s	25'-0"

(If roof loads present, see Notes 2 & 3 at right)

Minimum Heel Depths	Joist Depth	End Wall 2 x 4	End Wall 2 x 6
	9½"	2½"	1½"
	11⅞"	3½"	2½"
	14"	4½"	3½"

2) Ceiling joist must be designed to carry all roof load transferred through rafter struts as shown.
3) BCI ceiling joist end reaction may not exceed 550 pounds.
4) Minimum roof slope is 6/12.
5) Nail roof rafter to BCI top flange with 1-16d sinker or box nail.
6) 1x4 nailers must be continuous and nailed to a braced end wall.
7) Install a web stiffener on each side of BCI joist at beveled ends. Nail roof rafter to BCI joist per building code requirements for ceiling joist to roof rafter connection.

LATERAL SUPPORT

- BCI Joists must be laterally supported at the ends with hangers, BCI rim joists, rim boards, BCI blocking panels or x-bracing. BCI blocking panels or x-bracing are required at cantilever supports.

MINIMUM BEARING LENGTH FOR BCI JOISTS

- 1¾ inches is required at end supports. 3½ inches is required at cantilever and intermediate supports.
- Longer bearing lengths allow higher reaction values. Refer to the building code evaluation report or the BC Calc software.

NAILING REQUIREMENTS

- BCI rim joist, rim board or closure panel to BCI Joist:
  - Rims or closure panels 1¾ inches wide and less: 2-8d box nails, one each in the top and bottom flange.
  - BCI 500s rim joist: 2-10d box nails, one each in the top and bottom flange.
  - BCI 600s rim joist: 2-16d box nails, one each in the top and bottom flange.
  - BCI 900s rim joist: Toe-nail top flange to rim joist with 2-10d box nails, one each side of flange.
- BCI rim joist, rim board or BCI blocking panel to support:
  - 8d nails at 6 inches on center.
  - When used for shear transfer, follow the building designer's specification.
- BCI Joist to support:
  - 2-8d nails, one on each side of the web, placed 1½ inches minimum from the end of the BCI Joist to avoid splitting.
- Sheathing to BCI Joist:
  - See *Closest Allowable Nail Spacing* on back panel.
  - BCI 400s, 450s & 500s joist: Maximum nail spacing is 18 inches on-center.
  - BCI 600s & 900s joist: Maximum nail spacing is 24 inches on-center.
  - 14 gauge staples may be substituted for 8d nails if the staples penetrate at least 1 inch into the joist.

BACKER AND FILLER BLOCK DIMENSIONS

Series	Backer Block Thickness	Filler Block Thickness
400s	½" or ⅝" wood panel	Two ½" wood panels or 2 x _
450s	⅝" or ¾" wood panel	Two ⅝" wood panels or 2 x _
500s	¾" or ⅞" wood panel	Two ¾" wood panels or 2 x _
600s	Two ½" wood panels	2 x _ + ½" wood panel
900s	2 x _ lumber	Double 2 x _ lumber

- Cut backer and filler blocks to a maximum depth equal to the joist depth minus 3¼ inches to avoid a forced fit.

WEB STIFFENER REQUIREMENTS

- See *Web Stiffener Requirements* to the left.

PROTECT BCI JOISTS FROM THE WEATHER

- BCI Joists are intended only for applications that provide permanent protection from the weather. Bundles of BCI Joists should be covered and stored off of the ground on stickers.

MAXIMUM SLOPE

- Unless otherwise noted, all roof details are valid for slopes of 12 in 12 or less.

VENTILATION

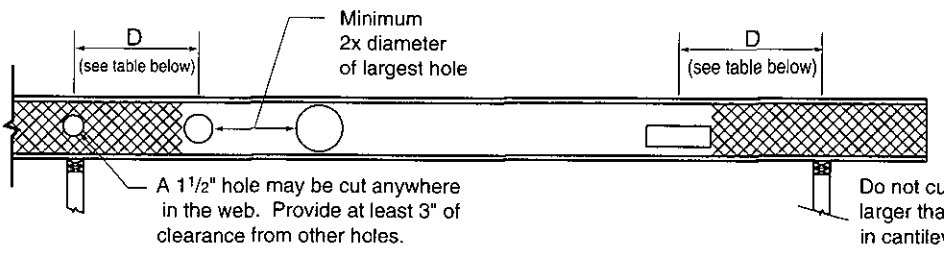
- The 1½ inch, pre-stamped knock-out holes spaced at 12 inches on center along the BCI joist may all be knocked out and used for cross ventilation. Consult a ventilation expert for specific requirements.

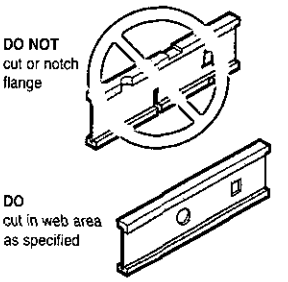
BIRDSMOUTH CUTS

- BCI joists may be birdsmouth cut only at the low end support. BCI joists with birdsmouth cuts may cantilever up to 2'-6" past the low end support. The bottom flange must sit fully on the support and may not over-hang the inside face of the support. High end supports and intermediate supports may not be birdsmouth cut.

BCI Joist Hole Location & Sizing

BCI Joists are manufactured with 1½" round perforated knockouts in the web at approximately 12" on center





MINIMUM DISTANCE (D) FROM ANY SUPPORT TO THE CENTERLINE OF THE HOLE

Round Hole Diameter (in)			2	3	4	5	6	6½	7	8	8⅞	9	10	11	12	13
Rectangular Hole Side (in)			-	-	2	4	6	6	-	-	-	-	-	-	-	-
Any 9½" Joist	Span (ft)	8	1'-0"	1'-4"	2'-0"	2'-7"	3'-3"	3'-7"								
		12	1'-2"	2'-1"	3'-0"	3'-11"	4'-10"	5'-4"								
		16	1'-6"	2'-9"	4'-0"	5'-3"	6'-6"	7'-2"								
Round Hole Diameter (in)			2	3	4	5	6	6½	7	8	8⅞	9	10	11	12	13
Rectangular Hole Side (in)			-	-	-	2	3	4	5	7	8	-	-	-	-	-
Any 11⅞" Joist	Span (ft)	8	1'-0"	1'-2"	1'-7"	2'-0"	2'-6"	2'-8"	2'-11"	3'-4"	3'-8"					
		12	1'-1"	1'-9"	2'-5"	3'-1"	3'-9"	4'-0"	4'-4"	5'-0"	5'-7"					
		16	1'-6"	2'-5"	3'-3"	4'-1"	5'-0"	5'-5"	5'-10"	6'-8"	7'-5"					
		20	1'-11"	3'-0"	4'-1"	5'-2"	6'-3"	6'-9"	7'-3"	8'-4"	9'-4"					
Round Hole Diameter (in)			2	3	4	5	6	6½	7	8	8⅞	9	10	11	12	13
Rectangular Hole Side (in)			-	-	-	-	2	3	3	5	6	6	8	9	-	-
Any 14" Joist	Span (ft)	8	1'-0"	1'-1"	1'-2"	1'-2"	1'-7"	1'-9"	2'-0"	2'-5"	2'-9"	2'-9"	3'-2"	3'-7"		
		12	1'-0"	1'-1"	1'-2"	1'-10"	2'-5"	2'-8"	3'-0"	3'-7"	4'-1"	4'-2"	4'-9"	5'-4"		
		16	1'-0"	1'-1"	1'-7"	2'-5"	3'-2"	3'-7"	4'-0"	4'-10"	5'-6"	5'-7"	6'-5"	7'-2"		
		20	1'-0"	1'-1"	2'-0"	3'-0"	4'-0"	4'-6"	5'-0"	6'-0"	6'-10"	7'-0"	8'-0"	9'-0"		
		24	1'-0"	1'-3"	2'-5"	3'-8"	4'-10"	5'-5"	6'-0"	7'-3"	8'-3"	8'-5"	9'-7"	10'-9"		
Round Hole Diameter (in)			2	3	4	5	6	6½	7	8	8⅞	9	10	11	12	13
Rectangular Hole Side (in)			-	-	-	-	-	-	2	3	5	5	6	8	9	10
Any 16" Joist	Span (ft)	8	1'-0"	1'-1"	1'-2"	1'-2"	1'-3"	1'-3"	1'-5"	1'-9"	2'-1"	2'-1"	2'-6"	2'-10"	3'-2"	3'-6"
		12	1'-0"	1'-1"	1'-2"	1'-2"	1'-7"	1'-10"	2'-1"	2'-8"	3'-1"	3'-2"	3'-9"	4'-3"	4'-9"	5'-4"
		16	1'-0"	1'-1"	1'-2"	1'-5"	2'-2"	2'-6"	2'-10"	3'-7"	4'-2"	4'-3"	5'-0"	5'-8"	6'-5"	7'-1"
		20	1'-0"	1'-1"	1'-2"	1'-9"	2'-8"	3'-1"	3'-7"	4'-5"	5'-3"	5'-4"	6'-3"	7'-1"	8'-0"	8'-10"
		24	1'-0"	1'-1"	1'-2"	2'-2"	3'-3"	3'-9"	4'-3"	5'-4"	6'-3"	6'-5"	7'-6"	8'-6"	9'-7"	10'-8"

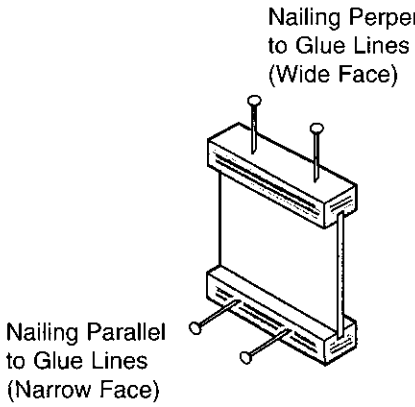
- Select a table row based on joist depth and the actual joist span rounded up to the nearest table span. Scan across the row to the column headed by the appropriate round hole diameter or rectangular hole side. Use the longest side of a rectangular hole. The table value is the closest that the centerline of the hole may be to the centerline of the nearest support.
- The entire web may be cut out. **DO NOT** cut the flanges. Holes apply to either single or multiple joists in repetitive member conditions.
- For multiple holes, the amount of uncut web between holes must equal at least twice the diameter (or longest side) of the largest hole.
- Holes may be positioned vertically anywhere in the web. The joist may be set with the 1½" knockout holes turned either up or down.
- This table was designed to apply to the design conditions covered by tables elsewhere in this publication. Use the BC Calc software to check other hole sizes or holes under other design conditions. It may be possible to exceed the limitations of this table by analyzing a specific application with the BC Calc software.

Closest Allowable Nail Spacing

BCI Joists

Nail Size	All BCI Joists			
	Nailing Perpendicular to Glue Lines (Wide Face)		Nailing Parallel to Glue Lines (Narrow Face)	
	O.C. Spacing [inches]	End of Joist [inches]	O.C. Spacing [inches]	End of Joist [inches]
8d Box	2	1½	4	1½
8d Common	2	1½	4	3
10d & 12d Box	2	1½	4	3
16d Box	2	1½	4	3
10d & 12d Common	3	2	6	4
16d Sinker	3	2	6	4
16d Common	3	2	6	4

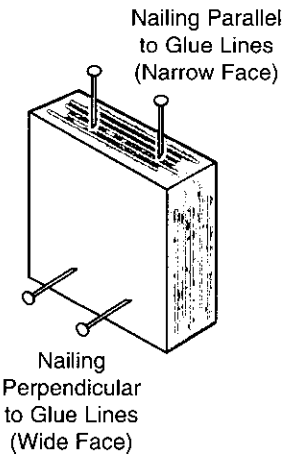
• If more than one row of nails is used, the rows must be offset at least ½ inch.



Versa-Lam & Rim Board Products

Nail Size	Nailing Parallel to Glue Lines (Narrow Face)								Nailing Perpendicular to Glue Lines (Wide Face)	
	Versa-Rim (1 1/16")		Versa-Rim Plus (1 5/16")		SP Versa-Lam (1¾")		DF Versa-Lam (3½")		All Products	
	O.C. [inches]	End [inches]	O.C. [inches]	End [inches]	O.C. [inches]	End [inches]	O.C. [inches]	End [inches]	O.C. [inches]	End [inches]
8d Box	3	1½	3	1½	2	1	2	½	2	½
8d Common	4	3	3	2	3	2	2	1	2	1
10d & 12d Box	4	3	3	2	3	2	2	1	2	1
16d Box	4	3	3	2	3	2	2	1	2	1
10d & 12d Common	6	4	4	3	4	3	2	2	2	2
16d Sinker	6	4	4	3	4	3	2	2	2	2
16d Common	6	4	6	4	6	3	2	2	2	2
Simpson A35F									Use 8d x 1½" Nails	
Simpson LTP4										

• If more than one row of nails is used, the rows must be offset at least ½ inch.



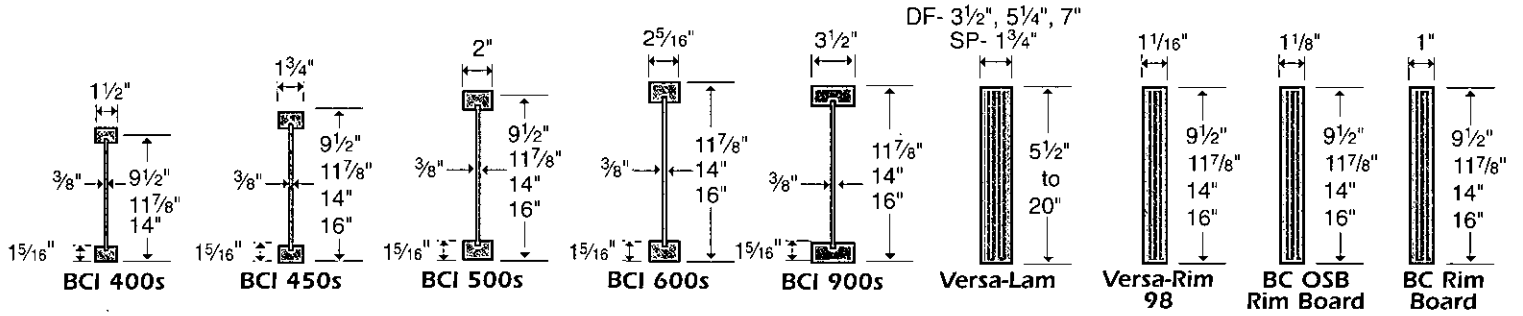
BC Rim Boards

FASTENER DESIGN VALUES [4]		
Fastener Type	Lateral[1] [lbs] (for attachment of 2x_ledger)	Shear [lbs/ft] (nails spaced at 6" o.c.)
8d Common	N/A	180[2]
10d Common	59	N/A
16d Common	65	N/A
16d Box or Sinker	58	N/A
½" Lag Screw or Bolt[3]	300	N/A

AVAILABLE SIZES		
	BC Rim Board	BC OSB Rim Board
Width:	1"	1⅛"
Depths:	9½" 11⅞" 14" 16"	9½" 11⅞" 14" 16"
Lengths:	8'-2"	12'-0" / 24'-0"

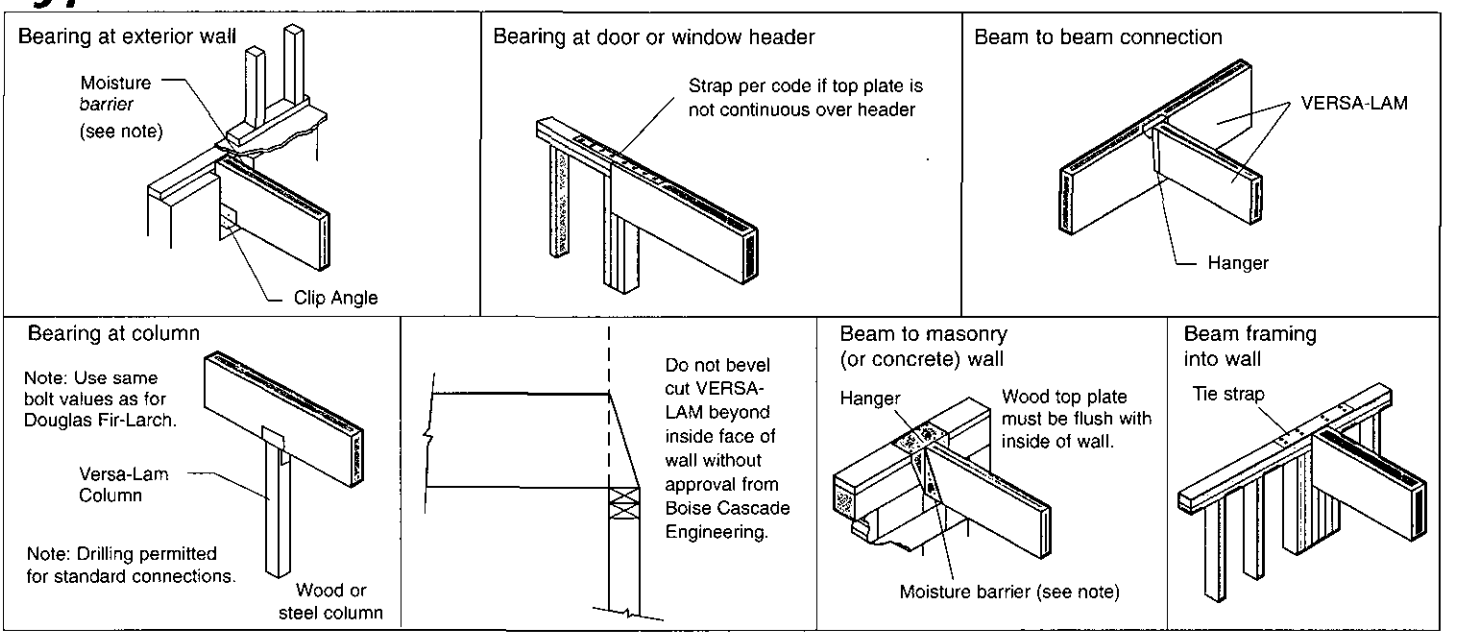
1. The ledger is assumed to be installed directly against the rim board, not against siding or another exterior wall finish. The table values are for normal load duration. The values for nails are based on 1997 NDS® provisions for Douglas Fir-Larch, G = 0.50, and adjusted by a factor of 0.9.
2. The horizontal (shear) load transfer capacity for floor sheathing attached with 8d box or common nails at 6 inches on center. This value has been adjusted for short-term load duration (10 minutes).
3. Use ½ inch diameter lag screws with a minimum nominal length of 4 inches, or ½ inch diameter through bolts with washers and nuts.
4. See *Closest Allowable Nail Spacing* above.

Southern Product Profiles



Boise Cascade Versa-Lam® Beams

Typical Details



NOTES

- Minimum of ½" air space between member and wall pocket or adequate moisture barrier must be provided.
- Adequate bearing must be provided. If not shown on plans, please refer to Specifier guide.
- LVL beams are intended for interior applications and should be kept dry.
- Continuous lateral support of top of beam must be provided.

Multiple Member Connections

SIDE-LOADED APPLICATIONS

	Maximum Uniform Side Load [plf]							
	Nailed		½" Through Bolt[1]			⅝" Through Bolt[1]		
Number of Members	2 rows 16d commons @12" o.c.	3 rows 16d commons @ 12" o.c.	2 rows @ 24" o.c. staggered	2 rows @ 12" o.c. staggered	2 rows @ 6" o.c. staggered	2 rows @ 24" o.c. staggered	2 rows @ 12" o.c. staggered	2 rows @ 6" o.c. staggered
1¾" Versa-Lam								
2	520	780	500	1000	2000	560	1120	2240
3[2]	390	585	375	750	1500	420	840	1680
4[3]	use bolt schedule		330	670	1330	370	740	1490
3½" Versa-Lam								
2[3]	use bolt schedule		860	1720	N/A	1120	2240	N/A

1. Design values apply to common bolts that conform to ANSI/ASME standard B18.21-1981 (Grade 5 or higher). A washer not less than a standard cut washer shall be between the wood and the bolt head and between the wood and the nut. The distance from the edge of the beam to the bolt holes must be at least 2" for ½" bolts and 2½" for ⅝" bolts. Bolt holes shall be the same diameter as the bolt.
2. The nail schedules shown apply to both sides of a three member beam.
3. 7" wide beams must be top-loaded or loaded from both sides.

- Beams wider than 7" must be designed by engineer of record.
- All values in these tables may be increased by 15% for snow-load roofs and by 25% for non-snow-load roofs where the building code allows.

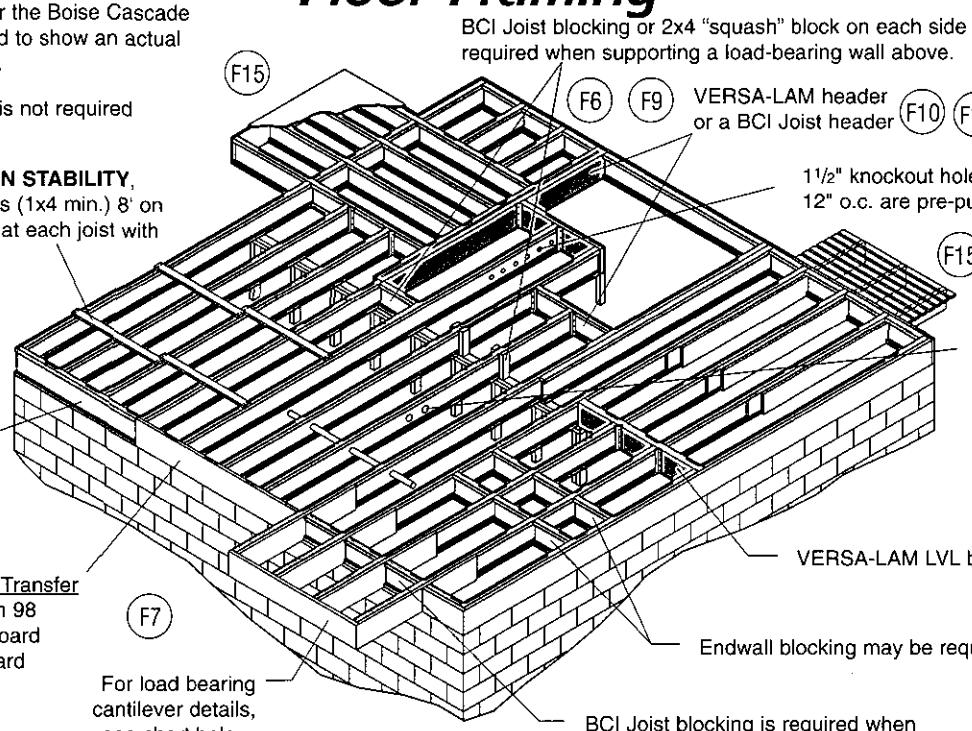
TOP-LOADED APPLICATIONS

For top-loaded beams and beams with side loads with less than those shown:			
(2) 1¾" plies	Depth ≤ 12"	2 rows 16d box or 3½" x .131" nails @ 12" o.c.	400 plf maximum uniform load from one side

Floor Framing

Note: The illustration below is showing several suggested applications for the Boise Cascade products. It is not intended to show an actual house under construction.

Note: Mid-Span bridging is not required



FOR INSTALLATION STABILITY, Temporary strut lines (1x4 min.) 8' on center max. Fasten at each joist with 2-8d nails min.

Dimension lumber is not suitable for use as a rim board in BCI floor systems.

BCI rim joist (where bearing length allows).

F1 F2

Versa-Rim Vertical Load Transfer
4000 PLF Versa-Rim 98
2750 PLF BC Rim Board
4400 OSB Rim Board

Residential Floor Span Table

Joist Depth	BCI Joist Series	★★★ THREE STAR ★★★					★★★★ FOUR STAR ★★★★					CAUTION ★ MINIMUM STIFFNESS ALLOWED BY CODE ★ CAUTION				
		12" o. c.	16" o. c.	19.2" o. c.	24" o. c.	32" o. c.	12" o. c.	16" o. c.	19.2" o. c.	24" o. c.	32" o. c.	12" o. c.	16" o. c.	19.2" o. c.	24" o. c.	32" o. c.
9½"	400s	16'-11"	15'-5"	14'-7"	13'-7"	12'-3"	13'-2"	12'-0"	11'-4"	10'-6"	9'-6"	18'-8"	17'-1"	16'-2"	14'-5"	12'-3"
	450s	17'-8"	16'-1"	15'-2"	14'-2"	12'-11"	13'-9"	12'-6"	11'-10"	10'-11"	9'-11"	19'-6"	17'-10"	16'-10"	15'-8"	13'-4"
	500s	18'-4"	16'-8"	15'-9"	14'-8"	13'-4"	14'-4"	13'-0"	12'-3"	11'-4"	10'-3"	20'-3"	18'-6"	17'-5"	16'-3"	14'-3"
11⅞"	400s	20'-1"	18'-4"	17'-4"	16'-2"	14'-1"	15'-9"	14'-4"	13'-6"	12'-6"	11'-4"	22'-3"	20'-4"	18'-8"	16'-8"	14'-1"
	450s	21'-0"	19'-2"	18'-1"	16'-10"	15'-0"	16'-5"	14'-11"	14'-1"	13'-0"	11'-10"	23'-3"	21'-2"	20'-0"	18'-1"	15'-0"
	500s	21'-10"	19'-10"	18'-9"	17'-5"	15'-0"	17'-0"	15'-6"	14'-7"	13'-6"	12'-3"	24'-1"	22'-0"	20'-9"	19'-4"	15'-0"
	600s	22'-8"	20'-8"	19'-5"	18'-1"	16'-5"	17'-9"	16'-1"	15'-1"	14'-0"	12'-8"	25'-1"	22'-10"	21'-7"	20'-1"	17'-3"
	900s	25'-8"	23'-4"	22'-0"	20'-5"	18'-6"	20'-0"	18'-2"	17'-0"	15'-9"	14'-2"	28'-5"	25'-10"	24'-4"	22'-7"	19'-4"
14"	400s	22'-10"	20'-10"	19'-8"	18'-4"	14'-3"	17'-10"	16'-3"	15'-4"	14'-3"	12'-11"	25'-3"	22'-7"	20'-7"	18'-5"	14'-3"
	450s	23'-10"	21'-9"	20'-6"	19'-1"	15'-2"	18'-8"	16'-11"	15'-11"	14'-10"	13'-5"	26'-4"	24'-1"	22'-5"	20'-0"	15'-2"
	500s	24'-9"	22'-6"	21'-3"	19'-9"	15'-2"	19'-4"	17'-7"	16'-6"	15'-4"	13'-11"	27'-4"	24'-11"	23'-6"	20'-3"	15'-2"
	600s	25'-9"	23'-5"	22'-1"	20'-6"	17'-5"	20'-1"	18'-3"	17'-2"	15'-11"	14'-5"	28'-5"	25'-11"	24'-5"	22'-9"	17'-5"
	900s	29'-1"	26'-5"	24'-11"	23'-1"	19'-6"	22'-9"	20'-7"	19'-4"	17'-10"	16'-1"	32'-2"	29'-3"	27'-7"	25'-7"	19'-6"
16"	450s	26'-5"	24'-1"	22'-9"	20'-5"	15'-4"	20'-8"	18'-10"	17'-8"	16'-5"	14'-11"	29'-2"	26'-7"	24'-3"	20'-5"	15'-4"
	500s	27'-5"	25'-0"	23'-6"	20'-5"	15'-4"	21'-5"	19'-6"	18'-4"	17'-0"	15'-4"	30'-3"	27'-7"	25'-7"	20'-5"	15'-4"
	600s	28'-6"	25'-11"	24'-5"	22'-9"	17'-7"	22'-3"	20'-3"	19'-0"	17'-7"	15'-11"	31'-6"	28'-8"	27'-1"	23'-5"	17'-7"
	900s	32'-2"	29'-3"	27'-6"	25'-7"	19'-7"	25'-2"	22'-9"	21'-5"	19'-9"	17'-10"	35'-7"	32'-5"	30'-6"	26'-2"	19'-7"

- Table values assume that sheathing is glued and nailed to the joists.
- Table values represent the most restrictive of simple or multiple span applications.
- Table values are based on residential floor loads of **40 PSF live load and 10 PSF dead load.**
- Table values are the maximum allowable clear distance between supports.
- Table values assume minimum bearing lengths without web stiffeners for joist depths of 16 inches and less.
- This table was designed to apply a broad range of applications. It may be possible to exceed the limitations of this table by analyzing a specific application with the BC Calc software.

★★★ *Live Load deflection limited to L/480.*

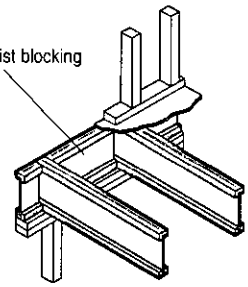
★★★★ *Live Load deflection limited to L/960 to provide a floor that is much stiffer for the more discriminating purchaser.*

★ *Live Load deflection limited to L/360 as allowed by the building code. (Shaded values do not satisfy the requirements of the North Carolina State Building Code. Refer to the THREE STAR table when spans exceed 20 feet.)*

About Floor Performance

Floor Details

F1



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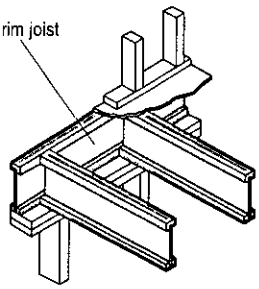

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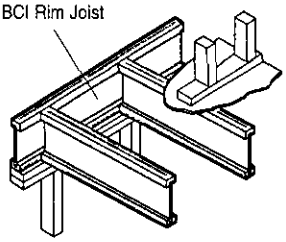
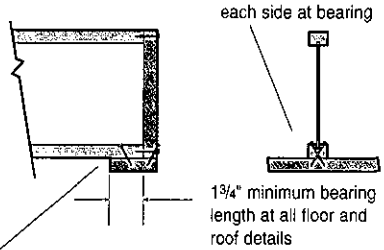


Note: BCI floor joist must be designed to carry wall above when not stacked over wall below.

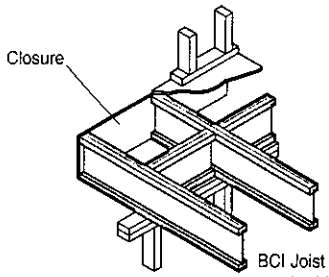
F4



To avoid splitting flange, start nails at least 1½" from end. Nails may need to be driven at an angle to prevent splitting of bearing plate.

F5

See *Load Bearing Cantilever Details.*



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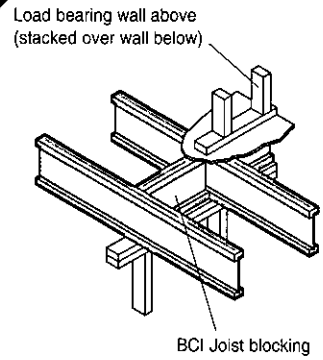

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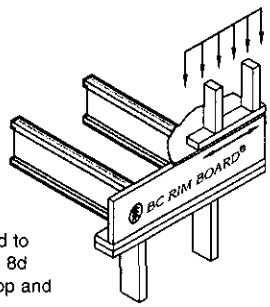
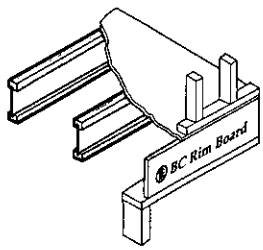
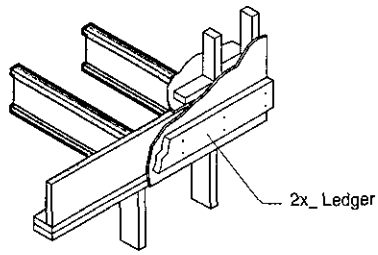


Nail BC Rim Board to BCI Joists with 2 - 8d nails. one at the top and one at the bottom.

F7a

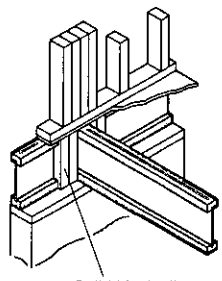


F7b



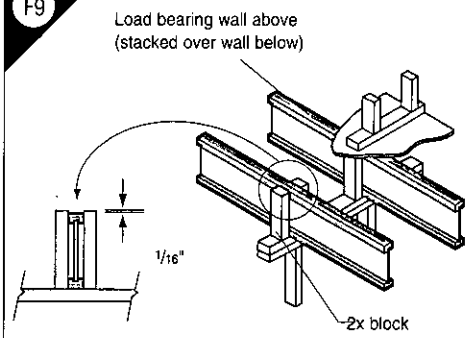
Butt sections of Rim Board end to end. Joints should occur between joists.

F8



Solid block all posts from above to bearing below.

F9



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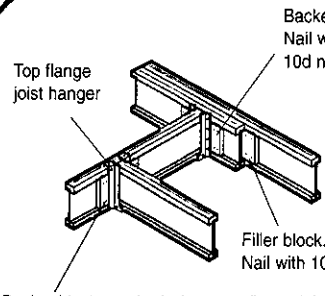
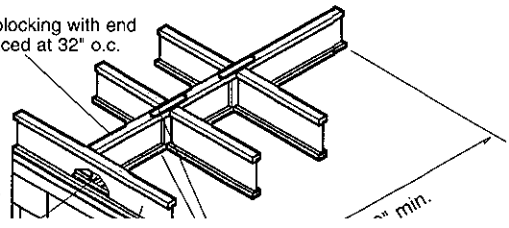


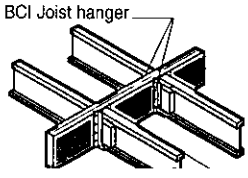
Backer block required where top flange joist hanger load exceeds 250 lbs. Install tight to top flange

F11



Note: Check with local building official for blocking required at concrete and masonry walls.

F12



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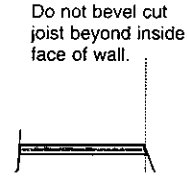
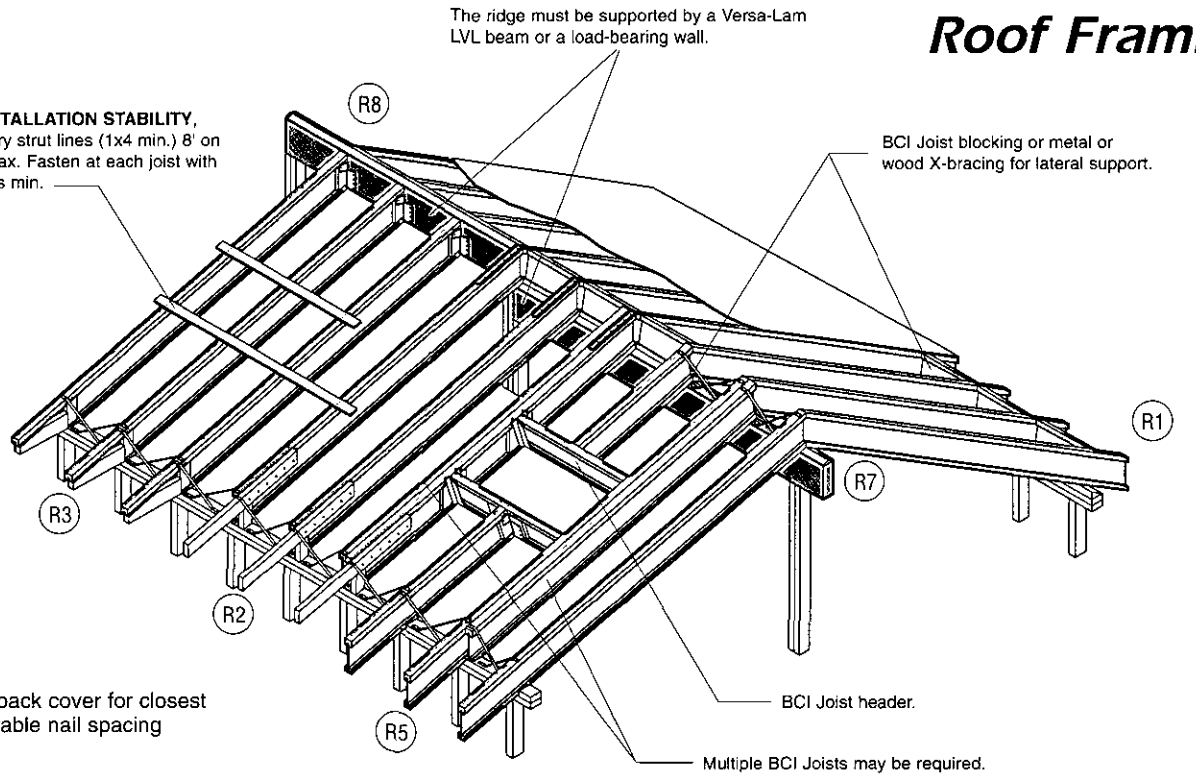
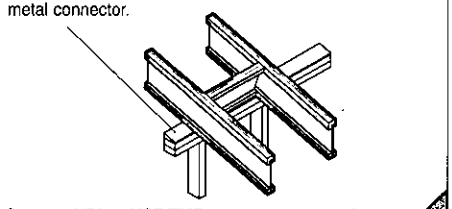


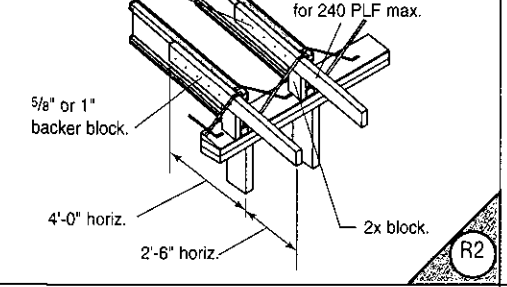
Boise Cascade BCI® Joists

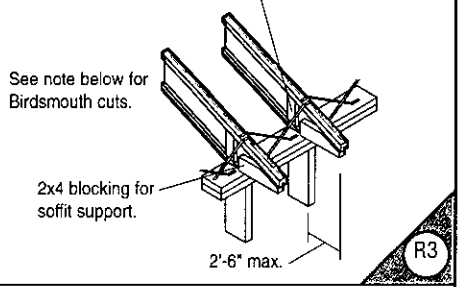
Roof Framing

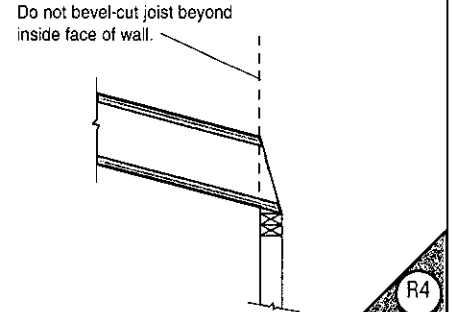


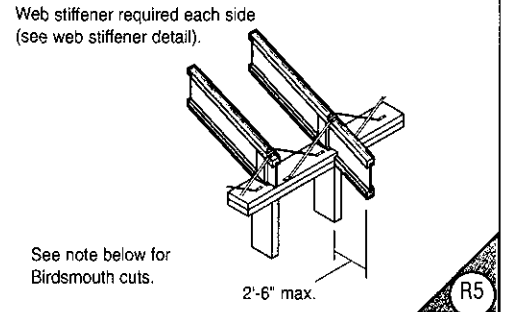
- See back cover for closest allowable nail spacing

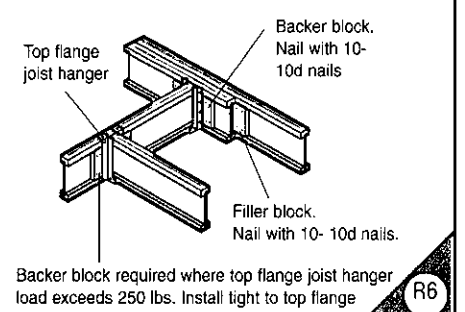


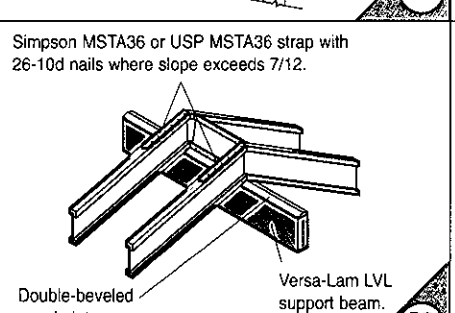


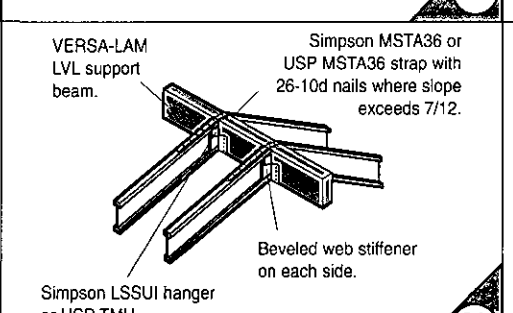


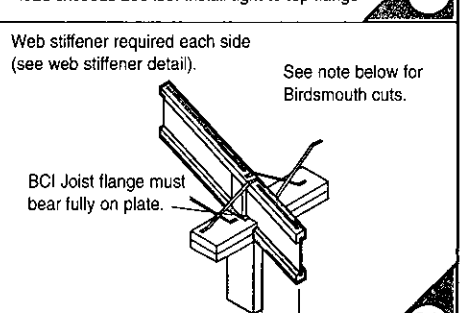


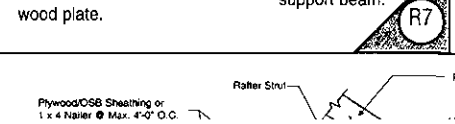












BCI® Ceiling Joist with Bevel End Cut

Maximum Span Lengths Without Roof Loads	

Notes:

1) Detail is to be used only for ceiling joists with no access to

FOR ALL PERMITS AFFECTING A RESIDENTIAL STRUCTURE (REGARDLESS IF A FIRE PERMIT IS REQUIRED) A MINIMUM OF 1 (ONE) BATTERY OPERATED OR ELECTRIC SMOKE DETECTOR IS REQUIRED ON EACH LEVEL AND IN THE VICINITYOF THE SLEEPING ROOMS. AS OF APRIL 7, 2003 THE STATE OF NJ REQUIRES THE INSTALLATION OF AT LEAST 1 (ONE) CARBON MONOXIDE DETECTOR IN THE VICINITY OF ALL SLEEPING ROOMS. THIS APPLIES TO ALL DWELLING UNITS CONTAINING A FUEL BURNING APPLIANCE OR ATTACHED GARAGE.

For work not requiring a fire inspection for fire alarms in accordance with the code, homeowners or their agents (contractors) shall be required to confirm the installation of these devices. This may be done by signing the below affidavit in lieu of an inspection.

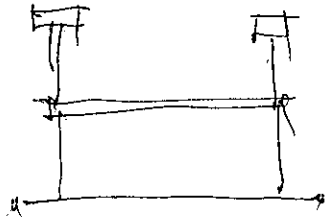
********PLEASE READ AND SIGN********

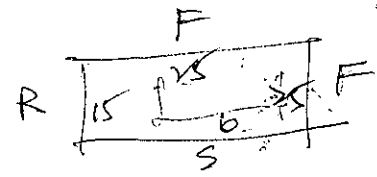
I hereby certify that a minimum of one smoke detector is installed and is operational on each level of this residential structure in the immediate vicinity of the sleeping rooms. I further certify that a minimum of one carbon monoxide detector is installed and operational in the vicinity of the sleeping rooms. Also, I understand that failure to install and maintain these devices in an operational condition is a violation of the New Jersey Administrative Code 5:23 and may subject me to penalties as prescribed by law.

NAME: ALEX NAPOY

SIGNATURE: Alex Napoy DATE: July 5. 2005

BLOCK: 830 LOT: 15, 16 & 17 ADDRESS: 1040 W. PRINCETON AVE. BRICK, NJ 08724

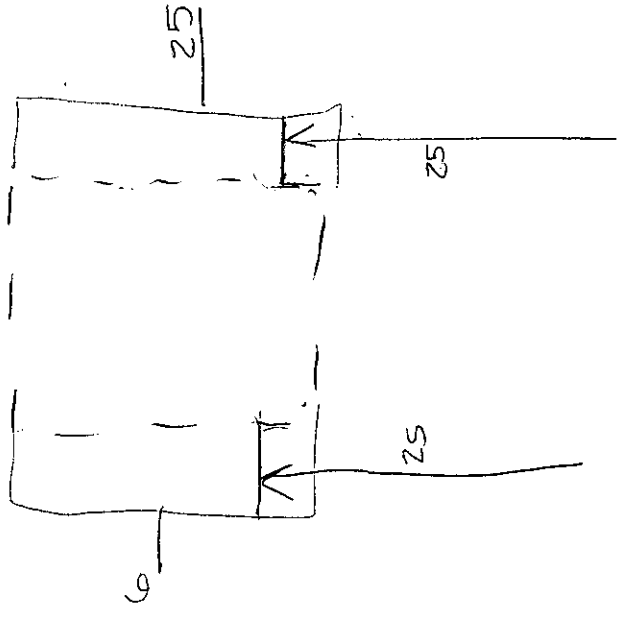




25 @ Fmt. @ Bottom

15 @ Rest

6 @ Sum



Applicable to Ordinance 720-92
This form must be handed in with permit application or a permit will not be issued

TOWNSHIP OF BRICK
Debris Form

Work Site Address: 1640 W. PRINCETON AVE BRICK TWP. NJ 08724

Block: 830 Lot: 15, 16 and 17

Contractor: OWNER - ALEX and MARNIC MAPOY

Contractor's Address: SAME AS ABOVE

Type of Construction (minor, new home): ADDITION / 2nd FLOOR

Type of Debris (shingles, siding, wood, etc.): SHINGLES, SIDINGS (VINYL) WOOD, GYPSUM SHEETROCK

Party responsible for removal: TRASH REMOVAL CONTRACTOR

Dumpster size: 40 or 30 cu ft

Destination of debris: TRASH REMOVAL CONTRACTOR

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclable.

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 of in accordance with all applicable State and Federal laws and regulations, and that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation.

Alex Mapoy
Signature

July 5 - 2005
Date

ALEX MAPOY
Print Name

GARRAMONE ARCHITECTS , LLC

JG

Joseph Garramone R.A. P.P. **Architect / Professional Planner**

204 DORAL DRIVE BLACKWOOD , N.J. 08012
(856) 232-1494 (856) 232-9577 (Fax) E-mail : joegar@comcast.net

August 18 , 2005

Ms. Kate MacDonald / Assistant Zoning Officer
Township of Brick
401 Chambers Bridge Road
Brick , N.J. 08723

Re : Mapoy Residence
Block 830 Lot 15
1640 West Princeton Ave.

Dear Ms. MacDonald,

Pursuant to your request outlined in a letter dated August 3, 2005 , I offer the following information for your review and subsequent approval.

This project consists of a new second floor addition to the existing one story single family residence. The subject property is located in the R5 zone. The proposed addition meets all bulk requirements of said zone.
The following represents the criteria requested by your letter:

Bulk Requiremnt	Required	Proposed
Building Eaves Height :	25'-0"	18'-6"
Building Height :	35'-0"	22'-0"
Building Ridge Height :	38'-6"	26'-0"

This criteria listed above meets the requirements of Ordinance No. 354-2D-03 .

I trust this information meets with your approval and should you have any additional questions or comments , please call our office .

Sincerely ,

Joseph Garramone R.A. P.P.

cc: Mr. Alex Mapoy

GARRAMONE ARCHITECTS , LLC

JG

Joseph Garramone R.A. P.P. **Architect / Professional Planner**

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(856) 232-1494 (856) 232-9577 (Fax) E-mail : joegar@comcast.net

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Re : Mapoy Residence
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1640 West Princeton Ave.

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This project consists of a new second floor addition to the existing one story single family residence. The subject property is located in the R5 zone. The proposed addition meets all bulk requirements of said zone.
The following represents the criteria requested by your letter:

Bulk Requiremnt	Required	Proposed
Building Eaves Height :	25'-0"	18'-6"
Building Height :	35'-0"	22'-0"
Building Ridge Height :	38'-6"	26'-0"

This criteria listed above meets the requirements of Ordinance No. 354-2D-03 .

I trust this information meets with your approval and should you have any additional questions or comments , please call our office .

Sincerely ,

Joseph Garramone R.A. P.P.

cc: Mr. Alex Mapoy

TOWNSHIP OF BRICK

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

Joseph C. Scarpelli, Mayor

Township Council:
Ruthanne Scaturro - President
Michael A. Thulen, Sr. - Vice-President
Stephen C. Acropolis
Gregory S. Kavanagh
Anthony Matthews
Kathy M. Russell
Frederick J. Underwood, Sr.

Department of Administration & Finance
Division of Land Use and Planning
Sean Kinnevy
Zoning Officer
(732) 262-1041
skinn@twp.brick.nj.us

Kate MacDonald
Asst. Zoning Officer
(732) 262-1043
Fax: (732) 262-8954
kmacdon@twp.brick.nj.us
http://www.twp.brick.nj.us

August 11, 2005

Alex Mapoy
1640 West Princeton Avenue
Brick, NJ 08724

Re: Block: 830 Lot: 15
1640 West Princeton Avenue

Dear Mr. Mapoy,

Your zoning permit application for an addition and front porch on the referenced property cannot be approved because the application is incomplete.

- The dimensions on the plot plan and the construction plans must match.
- All proposed construction must be shown on the plot plan.
- A letter from the architect and/or engineer must be submitted certifying that the building complies with all the requirements of Ordinance No. 354-2D-03 and listing the building eaves height, building height, and building ridge height, as defined. A copy of the ordinance can be obtained from the Municipal Clerk.

In order build the addition as proposed the Zoning Board of Adjustment must first approve a variance. Variance application forms can be obtained from Christine Papa, Board Secretary. Mrs. Papa can be reached at 732-262-1049 for additional information.

Very Truly Yours,

Kate MacDonald

Kate MacDonald
Assistant Zoning Officer

8/16/05 - Waiting on plot plans of proposed the 2nd story addition & cantilevers
Cont. took 1 survey & 1 set of plans

C: Scott R. MacFadden, Business Administrator
Michael P. Fowler, Principal Planner
Sean Kinnevy, Zoning Officer
LisaRose Tavalaiccio, Zoning Permit Clerk
Daniel Newman, Construction Official

9/22/05 - Resubmit per MPF

TOWNSHIP OF BRICK

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

Department of Administration & Finance
Division of Land Use and Planning
Sean Kinnevy
Zoning Officer
(732) 262-1041
skinn@twp.brick.nj.us

Kate MacDonald
Asst. Zoning Officer
(732) 262-1043
Fax: (732) 262-8954
kmacdon@twp.brick.nj.us
http://www.twp.brick.nj.us

August 3, 2005

Alex Mapoy
1640 West Princeton Avenue
Brick, NJ 08724

Re: Block: 830 Lot: 15
1640 West Princeton Avenue

Dear Mr. Mapoy,

Your zoning permit application for an addition and front porch on the referenced property cannot be approved because the application is incomplete.

- The dimensions on the plot plan and the construction plans must match.
- All proposed construction, including the front porch, must be shown on the plot plan.
- The application must be completely filled out.
- A letter from the architect and/or engineer must be submitted certifying that the building complies with all the requirements of Ordinance No. 354-2D-03, and listing the building eaves height, building height, and building ridge height, as defined. A copy of the ordinance can be obtained from the Municipal Clerk.

In order build the addition and porch as proposed the Zoning Board of Adjustment must first approve a variance. Variance application forms can be obtained from Christine Papa, Board Secretary. Mrs. Papa can be reached at 732-262-1049 for additional information.

Very Truly Yours,

Kate MacDonald

Kate MacDonald
Assistant Zoning Officer

C: Scott R. MacFadden, Business Administrator
Michael P. Fowler, Principal Planner
Sean Kinnevy, Zoning Officer
LisaRose Tavalaiccio, Zoning Permit Clerk
Daniel Newman, Construction Official

8/8/05- H/o took 1 set of plans to have porch plotted on plot plan.

8/8/05- Resubmit - Kt

TOWNSHIP OF BRICK

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

Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
http://www.twp.brick.nj.us

Date: JULY 5.2005

Block: 830 Lot: 15, 16 & 17

Property Address: 1640 WEST PRINCETON AVE, BRICK, NJ 08724

I, ALEX & MARINC MAPOY of 1640 WEST PRINCETON AVE, BRICK TWP NJ.
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, ect. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

Alex Mapoy
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.

2. Proof that the property is not located in a Flood Hazard Area.

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

FOR OFFICE USE ONLY

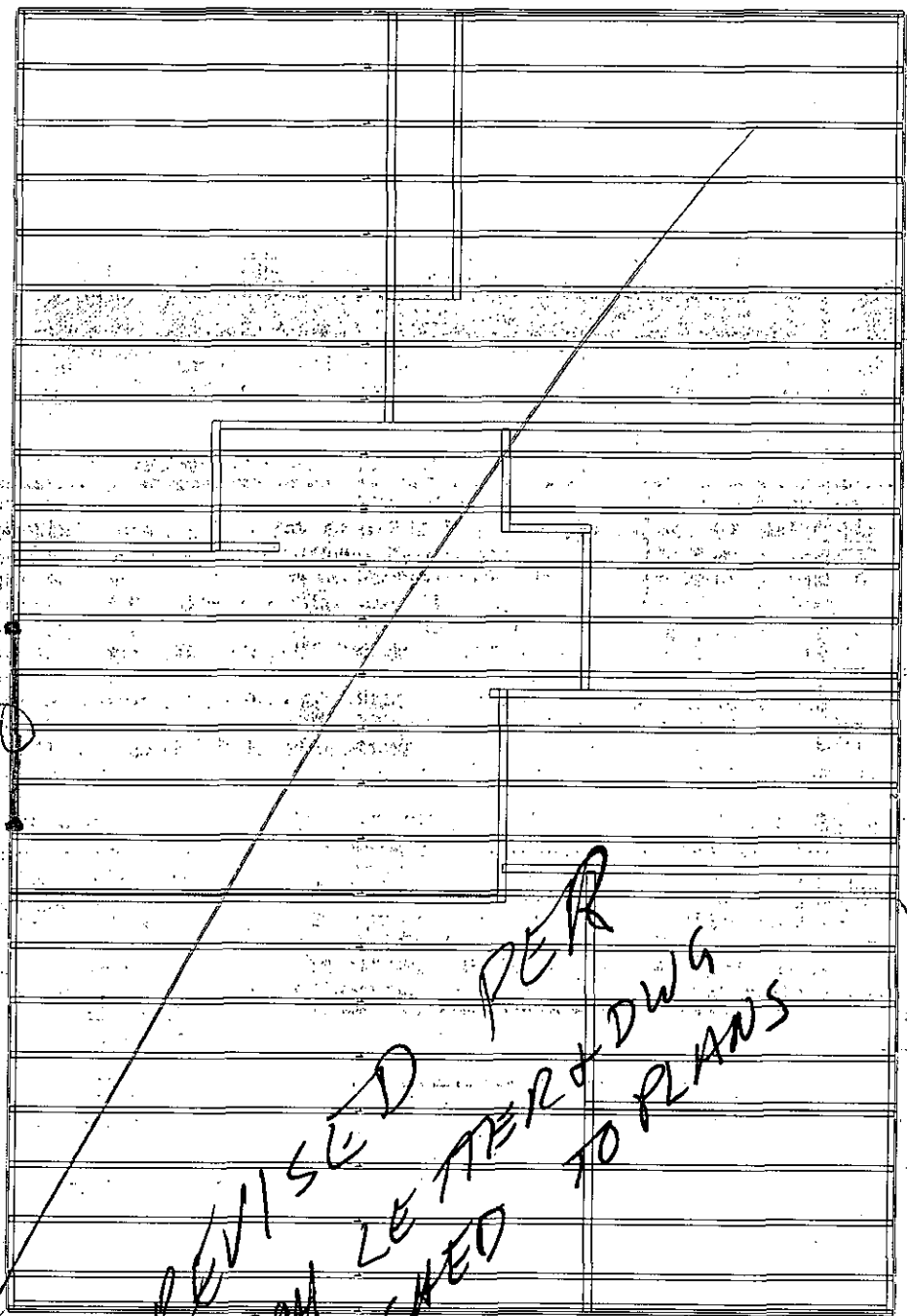
Approved on: 10/6/05 Signed:

Rejected on: _____ Signed: _____

Comments:

Last Saved Date: 5/18/2005 12:45 PM
Print Date: 5/18/2005 2:40 PM

ROOF A1
9 1/2" AJS 140



Roof Plan View
1/2" = 1'-0"

B1

480/320 Roof
192 Attic

REVISED PER AROM LETTER DWG TO PLANS ATTACHED

Roof Layout
Framing Schedule - Nominalized

Mark	Qty	Description	Length
1	25	9 1/2" AJS™ 140	32' 0"
2	1	1" x 9 1/2" BC RIM BOARD™	96' 0"

Roof Layout
Accessory Schedule

Qty	Manufacturer	Product	Description

BC FRAMER® 2002	
SCALE: N.T.S.	
DATE: 5/16/2005	
BY: pb	
FILE: TC0647Matoy.f	
DWG: 1 of 1	
SHEET: 1/1	

Tony Castro
Matoy Addition

DuBELL LUMBER CO.
Medford, NJ

SALES PRESENTATION DRAWING
No structural or dimensional check has been made with the design drawings of the building, therefore purchaser is to check and approve all dimensions, quantities, loads, and details carefully. This drawing has not been checked by Boise Engineering.

NOTE:
ALL MEASUREMENTS TO BE VERIFIED IN THE FIELD.

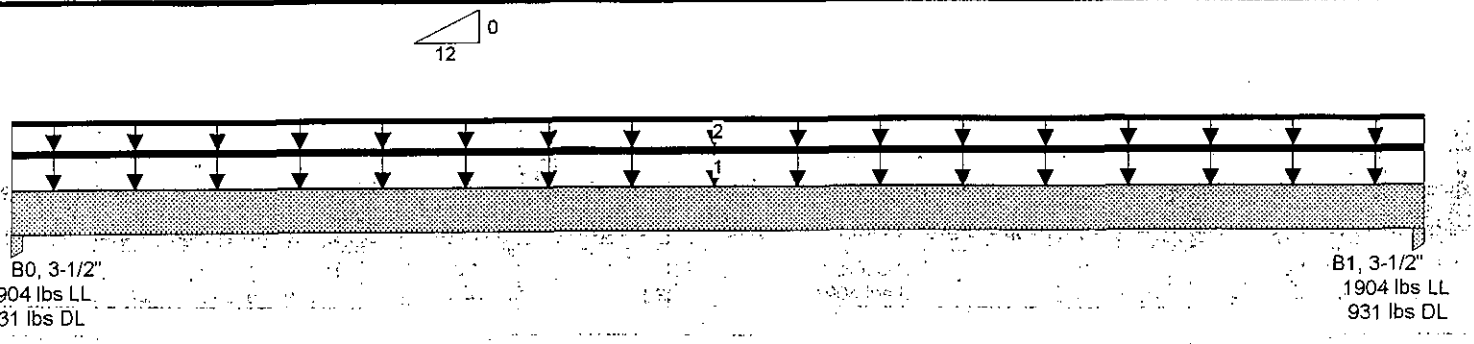
BOISE

REVISIONS:	BY:

Single 3 1/2" x 9 1/2" VERSA-LAM® 3080 DF

Job Name: Matoy Residence
Address: 164 Princeton Ave
City, State, Zip: Brick Twp. , NJ
Customer: Tony Castro
Code reports: ICBO 5663, NER 442

File Name: TC0547Matoy : RB01
Description: rooof Hdr over entry wdw
Specifier: pjb
Designer: Peter Blum
Company: DuBELL LUMBER CO.
Misc:



General Data

Version: US Imperial

Member Type: Roof Beam
Number of Spans: 1
Left Cantilever: No
Right Cantilever: No

Slope: 0/12
Tributary: 12-00-00

Live Load: 0 psf
Dead Load: 0 psf
Partition Load: 0 psf
Duration: 115

Disclosure

The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output above is based upon building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with the current Installation Guide and the applicable building codes. To obtain an Installation Guide or if you have any questions, please call (800)232-0788 before beginning product installation.

Load Summary

ID	Description	Load Type	Ref.	Start	End	Type	Value	Trib.	Dur.
S	Standard Load	Unf. Area	Left	00-00-00	05-08-00	Live	0 psf	12-00-00	115%
						Dead	0 psf	12-00-00	90%
1		Unf. Lin.	Left	00-00-00	05-08-00	Live	480 plf	n/a	115%
						Dead	320 plf	n/a	90%
2		Unf. Lin.	Left	00-00-00	05-08-00	Live	192 plf	n/a	100%
						Dead	0 plf	n/a	90%

Controls Summary

Control Type	Value	% Allowable	Duration	Load Case	Span Location
Moment	4016 ft-lbs	25.2%	115%	3	1 - Internal
Neg. Moment	0 ft-lbs	n/a	100%		
End Shear	2043 lbs	28.1%	115%	3	1 - Left
Total Load Defl.	L/1465 (0.046")	12.3%		3	1
Live Load Defl.	L/2181 (0.031")	11.0%		3	1
Max Defl.	0.046"	4.6%		3	1

Bearing Supports

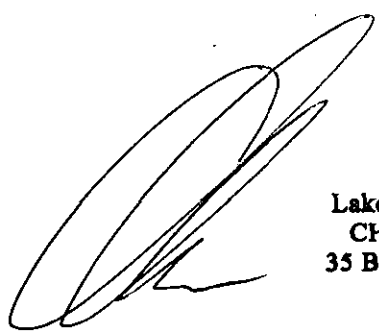
Name	Type	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B0	Post	3-1/2" x 3-1/2"	2835 lbs	0.2%	30.9%	Steel
B1	Post	3-1/2" x 3-1/2"	2835 lbs	0.2%	30.9%	Steel

Cautions

Post at Bearing B0 analyzed for bearing only, column analysis has not been performed.
Post at Bearing B1 analyzed for bearing only, column analysis has not been performed.

Notes

Design meets Code minimum (L/180) Total load deflection criteria.
Design meets Code minimum (L/240) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.
Member Slope = 0, consider drainage.
Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing + 1/2 intermediate bearing



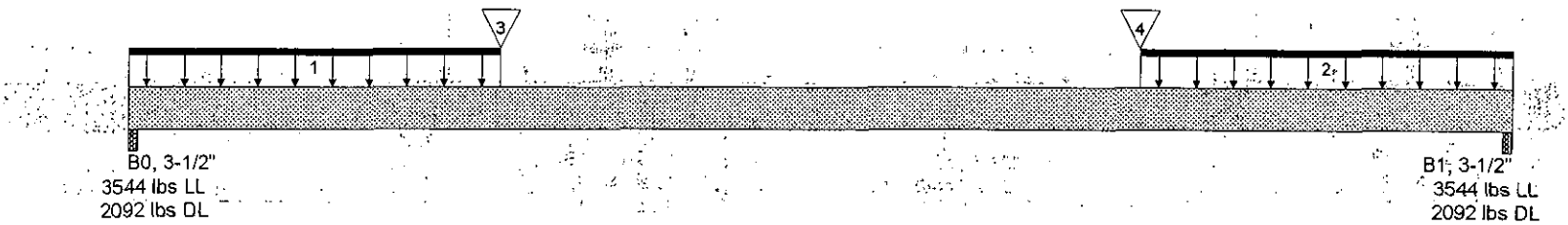
Lakeside Engineering Services PC
CHRISTOPHER G DUDEK PE
35 Burnside Dr, E.Berlin PA 17316
New Jersey Lic No 23163

Single 3 1/2" x 11 7/8" VERSA-LAM® 3080 DF

Job Name: Matoy Residence
Address: 164 Princeton Ave
City, State, Zip: Brick Twp. , NJ
Customer: Tony Castro
Code reports: ICBO 5663, NER 442

File Name: TC0547Matoy : FLOOR 2\B_5A
Description: 2Flr Beam over entry
Specifier: pjb
Designer: Peter Blum
Company: DuBELL LUMBER CO.
Misc:

B5



Total Horizontal Length - 12-08-00

General Data

Version: US Imperial

Member Type: Floor Beam
Number of Spans: 1
Left Cantilever: No
Right Cantilever: No

Slope: 0/12
Tributary: 01-00-00

Live Load: 0 psf
Dead Load: 0 psf
Partition Load: 0 psf
Duration: 100

Disclosure

The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output above is based upon building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with the current Installation Guide and the applicable building codes. To obtain an Installation Guide or if you have any questions, please call (800)232-0788 before beginning product installation.

Load Summary

ID	Description	Load Type	Ref.	Start	End	Type	Value	Trib.	Dur.
S	Standard Load	Unf. Area	Left	00-00-00	12-08-00	Live	0 psf	01-00-00	100%
						Dead	0 psf	01-00-00	90%
1		Unf. Lin.	Left	00-00-00	03-05-00	Live	480 plf	n/a	115%
						Dead	320 plf	n/a	90%
2		Unf. Lin.	Right	00-00-00	03-05-00	Live	480 plf	n/a	100%
						Dead	320 plf	n/a	90%
3		Conc. Pt.	Left	03-05-00	03-05-00	Live	1904 lbs	n/a	115%
						Dead	931 lbs	n/a	90%
4		Conc. Pt.	Right	03-05-00	03-05-00	Live	1904 lbs	n/a	100%
						Dead	931 lbs	n/a	90%

Controls Summary

Control Type	Value	% Allowable	Duration	Load Case	Span Location
Moment	14570 ft-lbs	59.9%	115%	3	1 - Internal
Neg. Moment	0 ft-lbs	n/a	100%		
End Shear	4834 lbs	53.2%	115%	3	1 - Left
Total Load Defl.	L/320 (0.474")	74.9%		3	1
Live Load Defl.	L/502 (0.303")	71.8%		3	1
Max. Defl.	0.474"	47.4%		3	1

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B0	Beam	3-1/2" x 3-1/2"	5636 lbs	51.1%	61.3%	Versa-Lam DF
B1	Beam	3-1/2" x 3-1/2"	5636 lbs	51.1%	61.3%	Versa-Lam DF

Notes

Design meets Code minimum (L/240) Total load deflection criteria.
Design meets Code minimum (L/360) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.
Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing + 1/2 intermediate bearing

Lakeside Engineering Services PC
CHRISTOPHER G DUDEK PE
35 Burnside Dr, E.Berlin PA 17316
New Jersey Lic No 23163

Permit Number
Checked By/Date

Generated by RES*check-Web* Software

Compliance Certificate

Project Title: PROPOSED SECOND FLOOR ADDITION

Energy Code: **New Jersey Energy Subcode**
Location: **Ocean County, New Jersey**
Construction Type: **Single Family**
Window-to-Wall Ratio: **0.14**
Heating Degree Days: **5000**

Report Date:

Date of Plans: **JULY 1, 2005**

Project Information:
SECOND FLOOR ADDITION to Existing Single Floor Structure
1640 West Princeton Avenue, Brick, NJ 08724
Block: 830 Lots: 15, 16 & 17

Builder Information:
ALEX MAPOY-OWNER
1640 West Princeton Avenue, Brick, NJ 08724

Project Notes:

EXISTING FOUNDATION and BUILDING FOOTPRINT TO REMAIN - NO CHANGES
EXISTING FIRST FLOOR TO REMAIN - NO CHANGES

Compliance: Passes Maximum UA: 234 Your Home UA: 172 --> 26.5% Better Than Code (UA)

Assembly	Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Glazing or Door U-Factor	UA
Wall 1: Wood Frame, 16in. o.c.	1083	13.0	0.0		77
Door 1: Glass	8			0.300	2
Window 1: Metal Frame, 2 Pane w/ Low-E	139			0.300	42
Ceiling 1: Flat or Scissor Truss	1363	30.0	0.0		48
Floor1: All-Wood Joist/Truss Over Outside Air	84	30.0	0.0		3
Furnace 1: Forced Hot Air (Non-Electric): 90 AFUE					
Air Conditioner 1: Electric Central Air: 13 SEER					

Statement of Compliance: The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the New Jersey Energy Subcode requirements in RES*check-Web* and to comply with the mandatory requirements listed in the RES*check* Inspection Checklist.

Builder/Designer	Company Name	Date
	JOE GARRAMONE ARCHITECT	JULY 25-2005

Generated by RES*check-Web* Software

RES*check* Inspection Checklist

Project Title: PROPOSED SECOND FLOOR ADDITION

Ceilings:

- ☐ Ceiling 1: Flat or Scissor Truss, R-30.0 cavity insulation

  Comments: _____

Above-Grade Walls:

- ☐ Wall 1: Wood Frame, 16in. o.c., R-13.0 cavity insulation

  Comments: _____

Windows:

- ☐ Window 1: Metal Frame, 2 Pane w/ Low-E, U-factor: 0.300

  For windows without labeled U-factors, describe features:

  #Panes _____ Frame Type _____ Thermal Break? _____ Yes _____ No

  Comments: _____

Doors:

- ☐ Door 1: Glass, U-factor: 0.300

  Comments: _____

Floors:

- ☐ Floor1: All-Wood Joist/Truss Over Outside Air, R-30.0 cavity insulation

  Comments: _____

Heating and Cooling Equipment:

- ☐ Furnace 1: Forced Hot Air (Non-Electric): 90 AFUE or higher

  Make and Model Number: _____

- ☐ Air Conditioner 1: Electric Central Air: 13 SEER or higher

  Make and Model Number: _____

Air Leakage:

- ☐ Joints, penetrations, and all other such openings in the building envelope that are sources of air leakage must be sealed.
- ☐ Recessed lights must be 1) Type IC rated, or 2) installed inside an appropriate air-tight assembly with a 0.5" clearance from combustible materials. If non-IC rated, the fixture must be installed with a 3" clearance from insulation.

Vapor Retarder:

- ☐ Required on the warm-in-winter side of all non-vented framed ceilings, walls, and floors.

Materials Identification:

- ☐ Materials and equipment must be identified so that compliance can be determined.
- ☐ Manufacturer manuals for all installed heating and cooling equipment and service water heating equipment must be provided.
- ☐ Insulation R-values, glazing U-factors, and heating and cooling equipment efficiency must be clearly marked on the building plans or specifications.

Duct Insulation:

- ☐ Ducts in unconditioned spaces must be insulated to R-5. Ducts outside the building must be insulated to R-6.5.

Duct Construction:

Table 1: ***Minimum Insulation Thickness for Circulating Hot Water Pipes***

	Insulation Thickness in Inches by Pipe Sizes			
	Non-Circulating Runouts		Circulating Mains and Runouts	
Heated Water Temperature (°F)	Up to 1"	Up to 1.25"	1.5" to 2.0"	Over 2"
170-180	0.5	1.0	1.5	2.0
140-160	0.5	0.5	1.0	1.5
100-130	0.5	0.5	0.5	1.0

Table 2: ***Minimum Insulation Thickness for HVAC Pipes. Hot Water Pipes***

		Insulation Thickness in Inches by Pipe Sizes			
Piping System Types	Fluid Temp. Range(°F)	2" Runouts	1" and Less	1.25" to 2.0"	2.5" to 4"
Heating Systems					
Low Pressure/Temperature	201-250	1.0	1.5	1.5	2.0
Low Temperature	120-200	0.5	1.0	1.0	1.5
Steam Condensate (for feed water)	Any	1.0	1.0	1.5	2.0
Cooling Systems					
Chilled Water, Refrigerant and	40-55	0.5	0.5	0.75	1.0
Brine	Below 40	1.0	1.0	1.5	1.5

NOTES TO FIELD: (Building Department Use Only)

- ❑ All ducts must be sealed with mastic and fibrous backing tape. Pressure-sensitive tape may be used for fibrous ducts. Duct tape is not permitted.
- ❑ The HVAC system must provide a means for balancing air and water systems.

Temperature Controls:

- ❑ Thermostats are required for each separate HVAC system. A manual or automatic means to partially restrict or shut off the heating and/or cooling input to each zone or floor shall be provided.

Circulating Hot Water Systems:

- ❑ Insulate circulating hot water pipes to the levels in Table 1.

Swimming Pools:

- ❑ All heated swimming pools must have an on/off heater switch and require a cover unless over 20% of the heating energy is from non-depletable sources. Pool pumps require a time clock.

Heating and Cooling Piping Insulation:

- ❑ HVAC piping conveying fluids above 120°F or chilled fluids below 55°F must be insulated to the levels in Table 2.

(Bldg) Elect Fire Plumbing (Please mark subcode)

CONTROL NUMBER C05-13713

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 1640 WEST PRINCETON AVE.

DATE REVIEWED: 11/01/05

REVIEWED BY: RCK

CONTACT (CALLED) FAXED: SPOKE TO TONY CASTRO

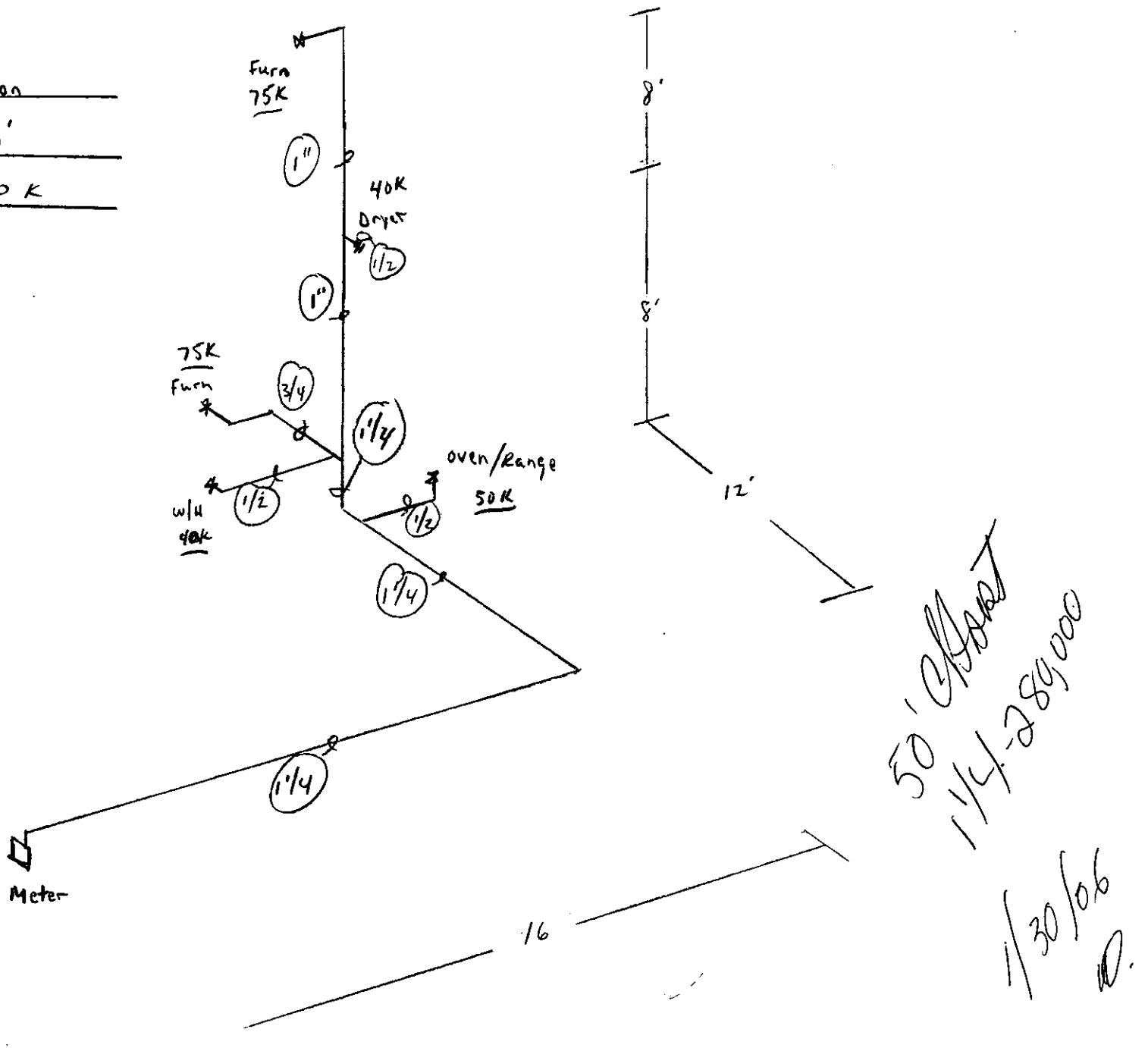
~~NO ROOF TRUSS DWGS.~~ CONVENTIONAL ROOF FRAME AS PER ARCH LETTER + DWG. ATTACHED

INCORRECT WIND SPEED DESIGN LOAD. - ARCH LETTER

1640 W. Princeton

Total Run : 50'

Total Btu : 280 K



50' of 1 1/4 - 284,000

1/30/06

MD.

Bldg Elect Fire Plumbing (Please mark subcode)

CONTROL NUMBER 05-4437A

resubmit 1/20/06 MB

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 1640 W Princeton Ave

DATE REVIEWED: 11/17/05

REVIEWED BY: Mark Hobart

CONTACT CALLED/FAXED: Tony Cortez

(1) - Need drawing of existing gas pipe, with total length of run and B.T.U.'s.

(2) - Size of new gas line for dryer, tankless

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER VICTORIA DATE 1/30/06

PROPERTY ADDRESS 1640 W BRUCETON AVE BLOCK _____ LOT 15

ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____

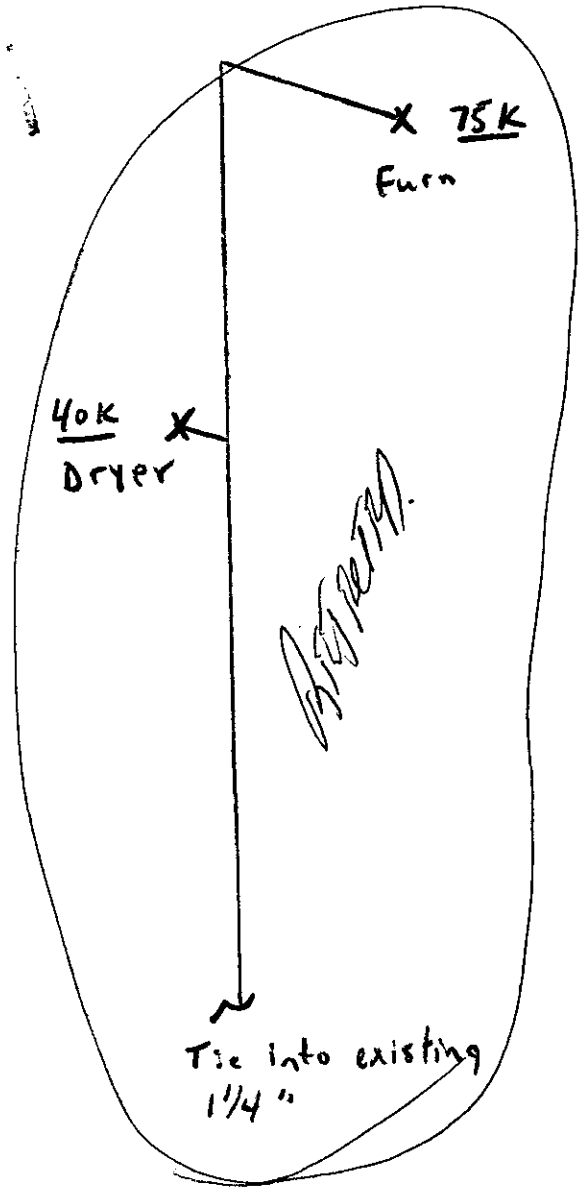
WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMING FIXTURES	NUMBER	(sfu)	WATER UNITS	(dfu)	DRANAGE
1. BATHROOM GROUP	2.5	( )	8.0	( )	
2. KITCHEN GROUP	1	( )	2.0	( )	
3. WATER CLOSETS		( )		( )	
4. LAVATORY		( )		( )	
5. BATH TUB		( )		( )	
6. SHOWER STALL	1	( )	2.0	( )	
7. KITCHEN SINK		( )		( )	
8. SERVICE SINK		( )		( )	
9. LAUNDRY TRAY		( )		( )	
10. DISHWASHER		( )		( )	
11. WASHING MACHINE	1	( )	4.0	( )	
12. URINAL		( )		( )	
13. FLOOR DRAIN		( )		( )	
14. DRINK FOUNTAIN		( )		( )	
15. AIR CONDITION WATER COOLED		( )		( )	
16. DENTAL UNIT		( )		( )	
17. LAWN SPRINKLE		( )		( )	
18. FIRE SPRINKLE		( )		( )	
19. HOSE BIBS	2	( )	3.5	( )	
		TOTALS	19.5		

GALLONS PER MINUTE _____

SIZE of SERVICE 1"

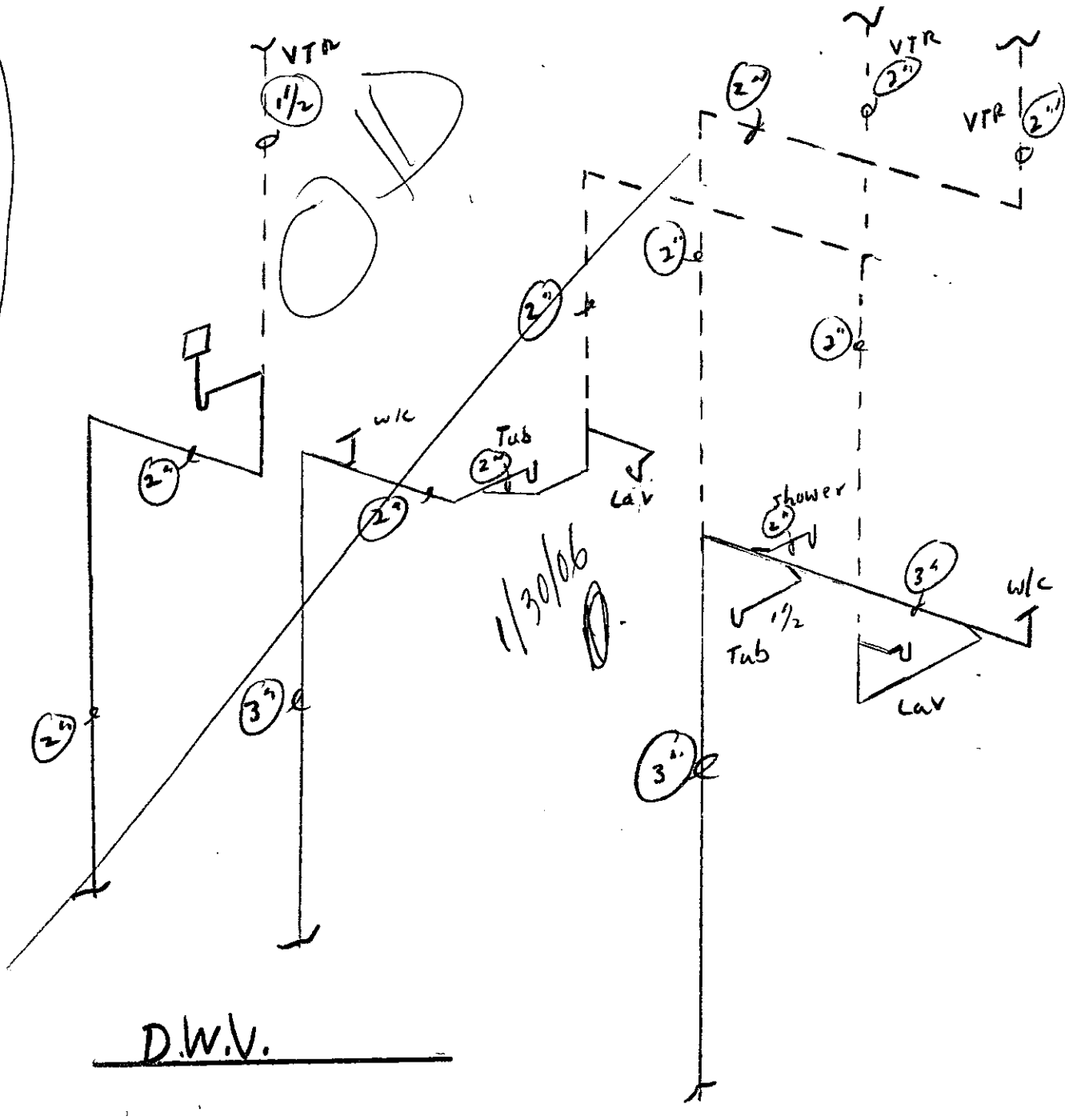
DATE: 1/30/06 APPROVED BY: MARK HIBBARD



Gas

Total BTU: 115K

Total Run: 25



D.W.V.

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER VICTORIA DATE 1/30/06

PROPERTY ADDRESS 1640 W BURTON AVE. BLOCK _____ LOT 15

ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMING FIXTURES	NUMBER	(sfu)	WATER UNITS	(dfu)	DRANAGE
1. BATHROOM GROUP	2-5	( )	8.0	( )	
2. KITCHEN GROUP	1	( )	2-0	( )	
3. WATER CLOSETS		( )		( )	
4. LAVATORY		( )		( )	
5. BATH TUB		( )		( )	
6. SHOWER STALL	1	( )	2-0	( )	
7. KITCHEN SINK		( )		( )	
8. SERVICE SINK		( )		( )	
9. LAUNDRY TRAY		( )		( )	
10. DISHWASHER		( )		( )	
11. WASHING MACHINE	1	( )	4.0.	( )	
12. URINAL		( )		( )	
13. FLOOR DRAIN		( )		( )	
14. DRINK FOUNTAIN		( )		( )	
15. AIR CONDITION WATER COOLED		( )		( )	
16. DENTAL UNIT		( )		( )	
17. LAWN SPRINKLE		( )		( )	
18. FIRE SPRINKLE		( )		( )	
19. HOSE BIBS	2	( )	3.5	( )	
		TOTALS	19.5		

GALLONS PER MINUTE _____

SIZE of SERVICE 1"

DATE: 1/30/06 APPROVED BY: MARK HIBBARD

GARRAMONE ARCHITECTS , LLC

JG

Joseph Garramone R.A. P.P. **Architect / Professional Planner**

51 GASKO ROAD MAYS LANDING , N.J. 08330
(856) 232-1494 (856) 232-9577 (Fax) E-mail : joegar@comcast.net

February 23 , 2006

Construction Official
Township of Brick
401 Chambers Bridge Road
Brick , N.J. 08723

Re : Mapoy Residence Permit # 05-4437
Block 830 Lot 15
1640 West Princeton Ave.

Dear Sir

Pursuant to your request , I offer the following information for your review and subsequent approval.

The home owner has requested that an alternate beam be installed in the ceiling of the Great Room for greater headroom. Presently the documents specify a 5-1/4" x 16" Parallam beam in the ceiling . A substitute beam has been designed and shall be a 7" x 11-7/8" Parallam beam in the same location . The contractor shall provide a minimum of (5) 2" x 4" studs at each end of the bearing location .

I trust this information meets with your approval and should you have any additional questions or comments , please call our office .

Sincerely ,

Joseph Garramone R.A. P.P.

cc: Mr. Alex Mapoy

GARRAMONE ARCHITECTS , LLC

JG

Joseph Garramone R.A. P.P. **Architect / Professional Planner**

51 GASKO ROAD MAYS LANDING , N.J. 08330
(856) 232-1494 (856) 232-9577 (Fax) E-mail : joegar@comcast.net

February 23 , 2006

Construction Official
Township of Brick
401 Chambers Bridge Road
Brick , N.J. 08723

Re : Mapoy Residence Permit # 05-4437
Block 830 Lot 15
1640 West Princeton Ave.

Dear Sir

Pursuant to your request , I offer the following information for your review and subsequent approval.

The home owner has requested that an alternate beam be installed in the ceiling of the Great Room for greater headroom. Presently the documents specify a 5-1/4" x 16" Parallam beam in the ceiling . A substitute beam has been designed and shall be a 7" x 11-7/8" Parallam beam in the same location . The contractor shall provide a minimum of (5) 2" x 4" studs at each end of the bearing location .

I trust this information meets with your approval and should you have any additional questions or comments , please call our office .

Sincerely ,

Joseph Garramone R.A. P.P.

cc: Mr. Alex Mapoy

Copy - Filed
Original 3/1/06 MV

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

C05-137/13

BLOCK 830 LOT 15.16.17 SITE ADDRESS 1640 W. Princeton Ave.
TYPE OF SITE Residential / Commercial NAME OF BUSINESS addition
APPLICANT Alex Mapey PHONE NUMBER ~~732~~-856-524-1400
APPLICANT ADDRESS 1640 W. Princeton Ave. CITY & STATE Brick, NJ. 08724

INCLUSIONARY DEVELOPMENT

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

#10
732-840-8159

MANDATORY DEVELOPER FEES

- ✗ Residential is ~~.005~~ 1%
- ◊ Commercial is .01%
- ✗ The estimated equalized assessed value of the proposed construction is

$ 134,400

Frederick R Millman
Frederick R. Millman, CTA, Tax Assessor — 10/4/05 Date

- ◊ The final equalized assessed value of the construction at the above referenced site is:

$ 105 900

Frederick R. Millman, CTA, Tax Assessor — 6/26/06 Date

Preliminary Fee *672.00 Date 10/6/05
Check # 6219 Receipt #

Final Fee $387.00 Date 8/18/06
Check# #10621 Reciept #

Total Fee Due/Paid ~~*344.00~~ $1059.00
Balance Due

Fees Imposed To Date
Fees Reached $15,000 Date

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.

Office of Affordable Housing

9/29/05 - Ta prelim.
10/5/05 - mailed ltr.
1/15/06 - Ta final
1/08/06 - called ~~#6~~ - NW - LM