BLOCK 819 LOT 10 C4.81 QUALIFICATION CODE _____ ADDRESS (SITE) 1591 W. Princeton Ave PERMIT NO. 99-3071

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Propsed Work Site at: 1591 W. Princeton Ave, Brick NJ 08724
2. Name of Owner in Fee: Thomas Trafer T[redacted]
   Address 1591 W. Princeton Ave Brick NJ 08724 (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Thomas Hansen + Sons Tel. (732) 606-0073
   Address 121 Ocean Gate Dr. Bayville, NJ
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee N[redacted] FAX ( ) [redacted]
5. Architect or Engineer owner
   Address 1591 W. Princeton Ave Brick, NJ
6. Responsible Person in Charge of Work Norman Hansen
   Tel. (732) 606-0073 FAX (____) _____

addition

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 276		
2. Electrical	40		
3. Plumbing	50		
4. Fire Protection	35		
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. BOCA Training Fee	17		
10. Subtotal	35		
11. Cert. of Occupancy	35		
12. Other	30		
13. TOTAL	$ 483		

CK 4981

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	2	
2. Height of Structure	22' ft.	
3. Area — Largest Floor	672 sq. ft.	
4. New Building Area	672 sq. ft.	
5. Volume of New Structure	10,752 cu. ft.	
6. Construction Classification		
7. Total Land Area Disturbed	672 sq. ft.	
8. Flood Hazard Zone	NO	
9. Base Flood Elevation	ft.	
10. Wetlands yes		
no	X	
11. Max. Live Load		
12. Max. Occupancy Load		

II. PROPOSED WORK

	Est. Cost	OPTIONAL (for office use only) Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☒ Addition	26371.00	GR	8/5/99		8-12-99	FM	12/22/99		OK
4. ☒ Alteration	200.00								
5. ☒ Fire Protection	300.00				B1155	Eur			
6. ☒ Plumbing	1450.00				8-11-99	[illegible]			
7. ☒ Electrical	300.00				81199	[illegible]	11/10/2000		[illegible]
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition		Eur	8/10/99		8/10/99	[illegible]			
TOTAL COSTS	28621.00								

8/12/99 called Tom Not

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No. of dwelling units:

Before Construction	1
After Construction	1
Net Gain or Loss	0

B. NON-RESIDENTIAL

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

LDS BR 10400758

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. (X) 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. (X) 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. (X) I further certify that I will perform or supervise the following work:
C.1. (X) Building C.2. (X) Fire Protection

I further certify that I will perform the following work:
C.3. (X) Electrical C.4. (X) Plumbing

D. (X) 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 Thomas Trofa Date 8/3/99

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.

(X) Check if contractor.

Agent Name Norman Hansen

Address 121 Ocean Gate Dr. Bayville, NJ

Telephone (732) 606-0073

Signature Norman Hansen

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

OFFICE DATE RECEIVED: _____

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

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

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

X. CERTIFICATES ISSUED (office use only)

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 08/12/99
Control #
Permit # 99-3071

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 819 Lot 10 Qual

Work Site Location 1591 WEST PRINCETON AVE
ADDITTON
Owner in Fee TRAFER, THOMAS
Address SAME
BRICK, NJ 08724-
Telephone [redacted]

Contractor THOMAS HANSEN AND SONS
Address 121 OCEAN GATE DR
BAYVILLE, NJ
Telephone (732)606-0073
Lic. No. or Bldrs. Reg. No.
Federal Emp. No [redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
GARAGE ADDITION 24X28X22 OPEN DOORWAY IN UPSTAIRS EXISTING BEDROOM TO NEW HALLWAY: OPEN DOOR WAY IN DOWNSTAIRS PLAYROOM TO NEW GARAGE 2-2X8 HEADER W/ 2-8X6-8 FIRE DOOR.

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

Estimated Cost of Work $ 28,621

Construction Official

08/12/99
Date

PAYMENTS (Office Use Only)	
Building	216
Electrical	40
Plumbing	50
Fire Protection	35
Elevator Devices	0
Other	
DCA Training Fee	17
Cert. of Occupancy	35
Other 2 PED	30
Total	483 - 453
Check No.	4081
Cash	
Collected By	CS

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/03/99
Date Issued 8/12/99
Control # C4-81
Permit # 99-3071

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

Block 819 Lot 10 Qual
Work Site Location 1591 WEST PRINCETON AVE
ADDITION
Owner in Fee TRAFER, THOMAS
Address SAME
BRICK, NJ 08724-
Tele [redacted]
Contractor THOMAS HANSEN AND SONS
Address 121 OCEAN GATE DR
BAYVILLE, NJ
Tele.(732)606-0073 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. [redacted]

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	8-12-99	TW
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 672 Sq. Ft.
Volume of New Structure 10,752 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 26,371
2. Alteration $ 200
3. Total (1+2)$ 26,571

Industrialized Building:
[ ] State Approved
[ ] HUD

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

GARAGE ADDITION 24X28X22 OPEN DOORWAY IN UPSTAIRS EXISTING BEDROOM TO NEW HALLWAY; OPEN DOOR WAY IN DOWNSTAIRS PLAYROOM TO NEW GARAGE 2-2X8 HEADER W/ 2-8X6-8 FIRE DOOR.

See Notes on Drwg

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[X] Addition	269
[X] Alteration	7
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 276
DCA Training Fee	$ 17

Paid [ ] Check # Collected by:

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/03/99
Date Issued 8/12/99
Control # C4-81
Permit # 99-3071

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

Block 819 Lot 10 Qual
Work Site Location 1591 WEST PRINCETON AVE
ADDITION
Owner in Fee TRAFER, THOMAS
Address SAME
BRICK, NJ 08724-
Tel [redacted]
Contractor THOMAS HANSEN AND SONS
Address 121 OCEAN GATE DR
BAYVILLE, NJ
Tele.(732)606-0073 Fax (___)
Lic. No. or Bldrs. Reg. No.
Federal Emp. No [redacted]

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

Right Side

GARAGE ADDITION 24X28X22 OPEN DOORWAY IN UPSTAIRS EXISTING BEDROOM TO NEW HALLWAY; OPEN DOOR WAY IN DOWNSTAIRS PLAYROOM TO NEW GARAGE 2-2X8 HEADER W/ 2-8X6-8 FIRE DOOR.

See Notes on Drwg

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	8-12-99	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire [ ] Elev

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 8-12-99
Approved By:

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type				
Footing			8/20/99	
Foundation			8/23/99	
Slab				
Frame			10/12/99	FK
BarrierFree	9/15	9/13	9/20/99	
Insulation			10/14/99	FK
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 672 Sq. Ft.
Volume of New Structure 10,752 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 26,371
2. Alteration $ 200
3. Total (1+2)$ 26,571

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[X] Addition	269
[X] Alteration	7
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0
Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 276
DCA Training Fee	$ 17

Paid [ ] Check # ____
Collected by: ____

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 07/19/99
Date Issued 8/2/99
Control # C19-910
Permit # 99-2881

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

Block 819 Lot 10 Qual ____
Work Site Location 1591 WEST PRINCETON AVE
1ST STORY ADDITION
Owner in Fee TRAFER, THOMAS
Address SAME
BRICK NJ 08724-
Tele [redacted]
Contractor THOMAS HANSEN AND SONS
Address 121 OCEAN GATE DR
BAYVILLE, NJ
Tele.(732)606-0073 Fax (__)
Lic. No. or Bldrs. Reg. No. ____
Federal Emp. No. [redacted]

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

LEFT $10

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

1ST STORY ADDITION - OPEN EXISTING WALL IN KITHCEN, INSTALL MICROLAM FLUSH HEAD KITCHEN ADDITION 8X13'3"X12

See Notes on 2X6 Rafters and microlam supports to Bearing (FM)

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	7-30-99	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [X] CA
Date: 12-22-99
Approved By: J. Chiavola

INSPECTIONS Type	Failure	Failure	Approval	Initial
Footing			8/5/99	
Foundation + Decking			8/10/99	
Slab left rear Corner only				
Frame			8/24/99	
BarrierFree			8/25/99	
Insulation			8/25/99	
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

TYPE OF WORK		FEE (Office Use Only)
[ ] New Building		$ 0
[X] Addition		34
[ ] Alteration		0
[ ] Roofing		0
[ ] Siding		0
[ ] Fence 0	Height (exceeds 6')	0
[ ] Sign 0	Sq. Ft.	0
[ ] Pool		0
[ ] Asbestos Abatement Subchapter 8		0
[ ] Lead Haz. Abatement NJAC 5:17		0
[ ] Other		0
Other		0
[ ] Demolition		0

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr. Class Present ____ Proposed ____
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 112 Sq. Ft.
Volume of New Structure 1,344 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 9,170
2. Alteration $ 300
3. Total (1+2)$ 9,470

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge $ 0
Paid [ ] Check # ____ Minimum Fee $ 1
Collected by: ____ TOTAL FEE $ 35
DCA Training Fee $ 2

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 08/03/99
Date Issued 8/12/99
Control # C4-81
Permit # 99-3071

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

Block 819 Lot 10 Qual
Work Site Location 1591 WEST PRINCETON AVE
ADDITION
Owner in Fee TRAFER, THOMAS
Address SAME
BRICK, NJ 08724-
Tele.( ) Fax ( )
Contractor
Address
Tele.( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. HO-

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 300

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 8/4/99
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
8		Lighting Fixtures	
25		Receptacles	
13		Switches	
3		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
49		TOTAL NUMBERS	40
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

C. CERTIFICATION IN LIEU OF OATH

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

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

Administrative Surcharge	$	0
Paid [ ] Check # Minimum Fee	$	0
Collected by: TOTAL FEE	$	40
DCA Training Fee	$	0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received 08/03/99
Date Issued 8/12/99
Control # C4-81
Permit # 99-3071

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

Block 819 Lot 10 Qual
Work Site Location 1591 WEST PRINCETON AVE
ADDITION
Owner in Fee TRAFER, THOMAS
Address SAME
BRICK, NJ 08724-
Tele.( ) Fax ( )
Contractor
Address
Tele.( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. HO-

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 300

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 9/1/99
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: 1/10/00
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			9-21-99	
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final	11/4/2000		1/10/00	TO
Temp Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				

1-4-2000 SWITCH ATTIC FAN

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
8		Lighting Fixtures	
25		Receptacles	
13		Switches	
3		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
49		TOTAL NUMBERS	40
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

C. CERTIFICATION IN LIEU OF OATH

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

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

Paid [ ] Check #	Administrative Surcharge	$ 0
Collected by:	Minimum Fee	$ 0
	TOTAL FEE	$ 40
	DCA Training Fee	$ 0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 07/19/99
Date Issued 8/2/99
Control # C19-910
Permit # 99-2881

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

Block 819 Lot 10 Qual
Work Site Location 1591 WEST PRINCETON AVE
1ST STORY ADDITION
Owner in Fee TRAFER, THOMAS
Address SAME
BRICK, NJ 08724-
Tele.( ) Fax ( )
Contractor
Address
Tele.( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. HO-

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 7/26/99
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 1/10/00
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough	8/19/99 MM		9/24/99 MM	
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final	1/4/00		1/10/00	TO
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				

C. CERTIFICATION IN LIEU OF OATH

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

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

D. TECHNICAL SITE DATA

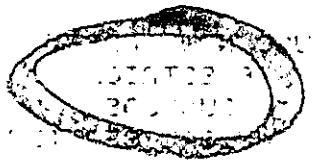
NO.	SIZE	ITEM	FEE (Office Use Only)
5		Lighting Fixtures	
13		Receptacles	
5		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
23		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Kitchen
VP SAFE - D/W
1-4-2000

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 35
DCA Training Fee $ 0

U.C.C. F120 (rev. 3/96)

8-19-99



(1) Strap wire on stepper

(2) ~~[illegible]~~ Reset need to clear space floor combustibles

(3) Hood on kit Circuits

1/4/2000

Kitchen ~~[illegible]~~ OK.

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/03/99
Date Issued 8/12/99
Control # C4-81
Permit # 99-3071

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

Block 819 Lot 10 Qual
Work Site Location 1591 WEST PRINCETON AVE
ADDITION
Owner in Fee TRAFER, THOMAS
Address SAME
BRICK, NJ 08724-
Tele.( ) Fax ( )
Contractor
Address
Tele.( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. NO-

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Constr Class Present Proposed
Heating Systems [ ] New [X] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location: BASEMENT
Total Est Cost of Fire Prot Work $ 100

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[X] Fire Plans Approved
Date: 8/11/99
Approved By: TCA
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

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

D. TECHNICAL SITE DATA

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

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	3	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	3	35
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other		0
Other		0

- 200 B/L Amb Detectors interconnected 1 ea. B/L 1 ea level
- new garage alls

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 35
	DCA Training Fee	$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 08/03/99
Date Issued 8/12/99
Control # C4-81
Permit # 99-3071

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

Block 819 Lot 10 Qual
Work Site Location 1591 WEST PRINCETON AVE
ADDITION
Owner in Fee TRAFER, THOMAS
Address SAME
BRICK, NJ 08724-
Tele.( ) Fax ( )
Contractor
Address

Tele.( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. HO-

B. PLUMBING CHARACTERISTICS

Use Group Present R-3 Proposed R-3
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 1,450

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 8-11-99
Approved By:

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

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

C. CERTIFICATION IN LIEU OF OATH

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

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	8
0	Urinal / Bidet	0
1	Bath Tub	10
2	Lavatory	10
0	Shower	0
0	Floor Drain	0
1	Sink	20
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 60
DCA Training Fee $ 0

U.C.C. F130 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 08/03/99
Date Issued 8/12/99
Control # C4-81
Permit # 99-3071

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

Block 819 Lot 10 Qual

Work Site Location 1591 WEST PRINCETON AVE

ADDITION

Owner in Fee TRAFER, THOMAS

Address SAME

BRICK, NJ 08724-

Tele.(___)_____ Fax (___)_____

Contractor

Address

Tele.(___)

Lic. No. or Bidrs. Reg. No.

Federal Emp. No. HO-

B. PLUMBING CHARACTERISTICS

Use Group Present R-3 Proposed R-3

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 1,450

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 8-11-99
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough	10-1-99		10-6-99	DN
Water				
Sewer				
Fixtures	1-4-00		1-4-00	DN
Gas Equip.				
Gas Piping				
Solar				
TCO				

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

Changed in computer 8-11-99 DN

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 50
DCA Training Fee $ 0

C. CERTIFICATION IN LIEU OF OATH

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

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. P130 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 08/03/99
Date Issued / /
Control # C4-81
Permit #

10-1-99— ① SDR underslab in Garage
② vent on wrong side of TRAP tob
③ Flat unwasher vent on W.C.

TOWNSHIP OF BRICK
ZONING PERMIT

Permit Approved: August 4, 1999 No. 1999-1301

Block 819 Lot 10 Zone: R-7.5

Property Address: 1591 W. Princeton Avenue

Owner: Thomas Trafer Phone: [redacted]

Applicant: Same Phone: Same

Existing Use: Single family residential

Proposed Use: Same

Proposed Construction: 2 story addition, 24' x 28', 22' high.

Conditions: The addition must be setback at least 25' from the front property line, at least 6' from the side property line and at least 15' from the rear property line.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Municipal Planner

Sean P. Kinnevy
Zoning Officer

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

BLOCK 819 LOT 10

PROPERTY ADDRESS (number and street) 1591 W. Princeton Ave. Brick NJ

NAME OF PROPERTY OWNER Thomas Trafer

PERSONAL NAME OF APPLICANT Thomas Trafer

BUSINESS NAME OF APPLICANT N/A

MAILING ADDRESS OF APPLICANT 1591 W. Princeton Ave Brick NJ 08724

TELEPHONE NUMBER OF APPLICANT [redacted]

PRESENT USE OF PROPERTY(check all that apply)

___Vacant Lot _X_Single-family dwelling ___Multi-family Dwelling

___Commercial(please describe)_____

PROPOSED USE OF PROPERTY(check all that apply)

___Vacant Lot _X_Single-family dwelling ___Multi-family Dwelling

___Commercial(please describe)_____

PROPOSED CONSTRUCTION 2 car garage with bedrooms + bathroom above.

___All dimensions: 24' X Width 28' X Length 22' Height

Deck or Garage: _X_ Attached _____ Detached 22' Height

Fence: Style_____ Material_____ Height_____

CHECKLIST:

_X_ All information completed above

_X_ Two (2) copies of the property survey map containing:

_X_ All existing and proposed structures

_X_ All dimensions of the lot and structures

_X_ All setbacks from the structures to the property lines

___ All adjacent streets and waterways

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

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

Signature of applicant Thomas Trafer Date 8/3/19

Reviewed by Zoning Officer Date 8/4 (X)Approved ()Rejected

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.gbshost.com/brick
http://www.twp.brick.nj.us

Date: 8/3/99

Township Engineer
401 Chambers Bridge Road
Brick, NJ 08723

RE: Block: 819 Lot: 10

Property Address: 1591 W. Princeton Ave. Brick NJ

I, Thomas Trafer (name) of 1591 W. Princeton Ave. Brick, NJ 08724 (address)

Request to be exempted from the plot plan requirement for an addition as outlined in the Brick Land Use Book, Chapter 190.31, part B.

Thomas Trafer
Applicant's Signature

The following shall be submitted with this request:

1. Submit survey locating existing dwelling and proposed addition. Dimensions of 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.

OFFICE USE

Approved: 8/10/99 Signed: [signature]

Rejected: _____ Signed: _____

Comments: _____

ADDITION CHECK LIST

1 Construction Permit Application (jacket) yes ✓ no ____
Make sure jacket is signed yes ✓ no ____

2 Zoning application completed yes ✓ no ____

3 Engineering Form for an Addition yes ✓ no ____

4 Two plot plans showing addition and size L-W-H & setbacks of property yes ✓ no ____

5 Building, Plg, Fire, and Electrical Technical Forms Completed yes ✓ no ____

6 Two sets of plans drawn by an Architect with seal or can be drawn by homeowner for homeowners use. Existing floor plan and new addition floor plan showing alterations through existing walls and ceiling. yes ✓ no ____

7 Building Characteristics must be completed before accepting on front of jacket and/or application. yes ✓ no ____

8 Furnace/Boiler/AC Brochure if applicable yes N/A no ____

9 Gas Diagram if applicable yes ✓ no ____
Plumbing Diagram if applicable

10 Floor plan of original house is needed showing smoke detectors. as well as proposed addition showing smoke detectors. On plans

11 If addition is 25% more of house, we need to know: 3'0" x 4'6" egress
1-window sizes in original house Already in house
2-Smoke Detectors hard wire battery back-up are needed.

12 Cost of alteration separate from addition cost. yes ✓ no ____

13 List of existing plumbing fixtures that are in the house already. yes ✓ no ____

14 If adding gas burning fireplace, brochure is needed as well as gas piping sketching showing where it will be hooked up. Be sure to show TOTAL length of run as well as BTU's.

15 Need diagram of all electrical fixtures (lights, receptacles, switches, detectors) yes ✓ no ____ on plans

16 Debri form needs to be completed yes ✓ no ____

Existing Plumbing Fixtures

Tub.
Shower /
2 Bathroom sink /
2 Toilets /
1 washing machine /
1 Kitchen sink } /
1. Dishwasher }
2. H.B.

3 BG	9
1 K.T	2
1 W.M	4
2 H.B.	3.5
	18.5

New Fixtures

2 Bathroom sink /
1 Tub /
1 Toilet /

Thomas Trafer
1591 W. Princeton Ave
Brick NJ. 08724

Thomas Trafer

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER Thomas Trofer DATE 8-11-99

PROPERTY ADDRESS 1591 W. Princeton ave BLOCK 819 LOT 10

ZONING _____ USE GROUP _____

CONTRACTOR Self LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

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

TOTAL 18.5

GALLONS PER MINUTE 14

SIZE OF SERVICE 1"

DATE: 8-11-99 APPROVED: BJH

Applicable to Ordinance 728-92
This form must be handed in with permit application or a permit will not be issued.

TOWNSHIP OF BRICK

1591 W. Princeton Ave. Brick, NJ 819 10
Work Site Address Block Lot

Thomas Trafer 1591 W. Princeton Ave Brick, NJ [redacted]
Owner's Name, Address, Phone

Norman Hansen 121 Ocean Gate Dr. Bayville, NJ 606-0073
Contractor's Name, Address, Phone

Construction Garage Addition - single family
Describe type (Single -family home, etc.)

Demolition N/A
Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material N/A

Name, address and phone of party responsible for removal of debris:
Thomas Trafer 1591 W. Princeton Ave. Brick, NJ

Size of dumpster: N/A

Destination of discarded debris: Ocean County Land Fill

Hauler's DEP Permit No.: N/A

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

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

Thomas Trafer Thomas Trafer 8/3/99
Printed/Typed Name Signature Date

****

FOR OFFICE USE ONLY

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

Recycling tonnage receipts attached? _____

Certified tipping receipts attached? _____

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

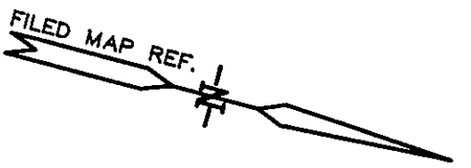
DISTRIBUTION LIST:
1. Original to Code Enforcement Officer
2. Construction Code Office
3. Applicant

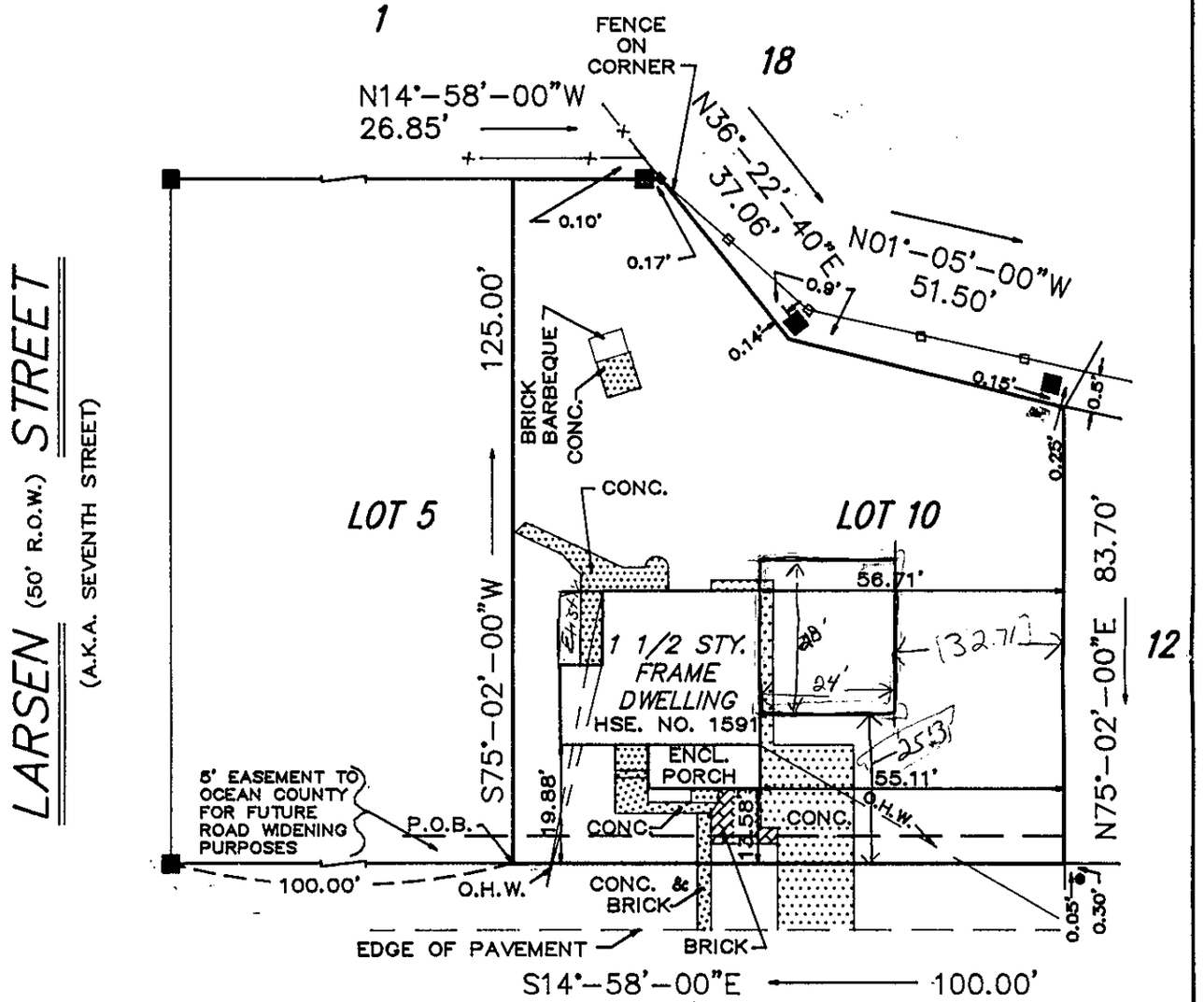
NOTES:
1. CONTRACTUAL AGREEMENT STATES THAT PROPERTY CORNERS ARE NOT TO BE SET BY THIS SURVEY.
2. UNDERGROUND UTILITIES NOT LOCATED BY THIS SURVEY.
3. NO ATTEMPT WAS MADE TO DETERMINE IF ANY PORTION OF THIS PROPERTY IS CLAIMED BY THE STATE OF N.J. AS TIDELANDS.
4. DEED REFERENCE: BOOK 4569, PAGE 745
5. ENVIRONMENTALLY SENSITIVE AREAS ARE NOT LOCATED BY THIS SURVEY
6. THIS SURVEY IS SUBJECT TO CONDITIONS WHICH AN ACCURATE TITLE SEARCH MIGHT DISCLOSE

Title Co. File No. MS-55214

Job No. S-11607

A.K.A. 1591 W. PRINCETON AVE.





WEST PRINCETON (50' R.O.W.) AVENUE

Legend:
- ● – PIPE FOUND
- ■ – MONUMENT FOUND
- —□— – STOCKADE FENCE
- —x— – CHAIN LINK FENCE

Certification:

I hereby certify this survey was made under my immediate supervision to:
THOMAS & JOANNA TRAFER H/W

MID-STATE ABSTRACT COMPANY/FIRST AMERICAN TITLE INSURANCE COMPANY

WILBERT & MONTENEGRO, P.A.

LUMBERMEN'S MORTGAGE CORPORATION ITS SUCCESSORS AND/OR ASSIGNEES

Map of Survey

REV. 3/27/91

LOT 10, BLOCK 819, TAX MAP
BRICK TOWNSHIP --- OCEAN COUNTY --- NEW JERSEY

A.K.A. NEW LOT 10, BLOCK 24, AS SHOWN ON A MAP ENTITLED "MINOR SUBDIVISION LOT 5 THRU 11 INCL., BLOCK 819.24, ON THE OFFICIAL TAX MAP, TOWNSHIP OF BRICK, OCEAN COUNTY, NEW JERSEY." FILED FEBRUARY 15, 1990, AS MAP NO. I-2269.

DELCO Land Surveying Corp.
917 North Main Street
Toms River, N.J. 08753
(908) 341-4200

SCALE	DATE
1" = 30'	3/19/91
DRAWN BY	SHEET
R.L.R.	1 OF 1

David J. Von Steenburg LICENSED LAND SURVEYOR N.J. LIC. # 34500
PROFESSIONAL PLANNER N.J. LIC. # 04875

David J. Von Steenburg DATE 3-27-91

APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
DATE August 9, 1999
Sean Kinney - addition

Site Location: 1591 W. Princeton Ave Date Rec'd:
Block: 819 Lot: 10 Date Issued:
Owner id Fee: Thomas Trafer Control #:
Address: 1591 W. Princeton Ave Permit #:
Brick, NJ 087
State: NJ Zip: 08724 Phone: (732) 206-1575
SS #: Provide only if Applicant is owner

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723

COUNTER FORM
PLEASE PRINT

BUILDING

CONTRACTOR: Thomas Hansen & Sons
ADDRESS: 121 Ocean Gate Dr.
Bayville NJ
PHONE: 606-0073
LIC.# [redacted]
LIC. EXPIRATION DATE: —
FEDERAL EMP. # (or S.S. #) [redacted]

TECHNICAL SITE DATA

DESCRIPTION OF WORK:
open doorway in upstairs existing bedroom to new Hallway 2 - 2x8 Header

open door way in downstairs playroom to New garage 2-2x8 Header with 2-8x6-8 Firedoor

Garage Addition: 24'x28'+22'

TYPE OF WORK

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

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories: 2
Height of Structure: 22'
Area - Largest Floor: 672
New Building Area / All Floors: 672
Volume of Structure: 10,752 Total Land Disturbed: 672
Signature: Thomas Trafer

Estimated Cost of Building Work:
New Building (1): $ 26371.00
Alteration (2): $ 200
TOTAL (1+2): $ 28371.00
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐

Approved by:

Date:

ELECTRICAL

CONTRACTOR: Thomas Trafer
ADDRESS: 1591 W. Princeton Ave.
Brick NJ
PHONE: [redacted]
LIC.#: [redacted] DATE:
FEDERAL EMPL. #: (or S.S. #): —

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures	48	
Receptacles	25	
Switches	13	
Detectors	3	
Light Poles		
Motors - Exact HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		

TOTAL NUMBERS

- Pool Permit w/UW Lights
- Storable Pool/Spa/Hot Tub
- KW Elec. Range / Receptacle — KW
- KW Oven / Surface Unit — KW
- KW Elec. Water Heater — KW
- KW Elec. Dryer / Receptacle — KW
- KW Dishwasher — KW
- HP Garbage Disposal — HP
- KW Central A/C Unit — KW
- HP/KW Space Heater/Air Handler — HP/KW
- KW Baseboard Heat — KW
- HP Motors 1/+ HP — HP
- KW Transformer/Generator — KW
- AMP Service — AMP
- AMP Subpanels — AMP
- AMP Motor Control Center — AMP
- AMP Elec. Sign/Outline Light — KW
- Other
- Other
- Other
- Other
- Estimated Cost of Electrical Work: $ 300.00
- Signature (print name): Thomas Trafer
- Estimated Cost of Electrical Work: $
- Signature (print name): Thomas Trafer
- Owner ☒ Contractor ☐

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

COUNTER FORM
PLEASE PRINT

PLUMBING

CONTRACTOR: Thomas Trafer
ADDRESS: 1591 W. Princeton Ave
Brick NJ
PHONE: [redacted]
LIC #: Owner
LIC EXPIRATION DATE: —
FEDERAL EMP. # (or S.S. #): —

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
1	Bath Tub
1	Lavatory
	Shower
	Floor Drain
2	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $ 1450.00
Signature: Thomas Trafer
Owner X Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

FIRE

CONTRACTOR: Thomas Trafer
ADDRESS: 1591 W. Princeton Ave.
Brick NJ
PHONE: [redacted]
LIC #: Home Owner EXP. DATE:
FEDERAL EMPL # (or S.S. #): —

TECHNICAL DATA (DESCRIPTION OF WORK)

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

Water Supply Source City
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquip Storage Tanks 0 Capacity: Fuel:
Combustable Liquid Storage Tanks 0 Capacity: Fuel:
L.G.P. Storage Tanks 0 Capacity: Fuel:

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	3
Heat Detectors	3
Total	3
Stand Pipes	
Kitchen Hood Exhaust Systems	
Pre-Engineered Systems	
Co2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance	
Other	
Other	

Estimated Cost of Fire Protection Work: $ 300.00
Signature: Thomas Trafer
Owner X Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by: