BLOCK 190.08 LOT 19 C15-19 QUALIFICATION CODE _____ ADDRESS (SITE) 367 Church RD PERMIT NO. 99-0775

RECEIVED
MAR 16 1999
DIV. OF INSPECTION

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Propsed Work Site at: 367 Church RD
2. Name of Owner in Fee: CRANGLE Tel. [redacted]
   Address 367 Church RD (street) FORK (municipality) NJ 08723 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor TRI STATE BUILDING SPECIALTIES Tel. ( ) _____
   Address 1014 Route 33 Unit 6 FREEHOLD, NJ 07728
   License No. OR, if new home, Builder Registration No. (908) 780-9756 Exp. Date _____
   Federal Employee No. 22-312-0229 FAX: (732) 780-7095
5. Architect or Engineer Bob Walz Tel. (732) 341-7670
   Address CLINTON NJ
6. Responsible Person in Charge of Work JASON R CRAIG
   Tel. (732) 780-9756 FAX (732) 780-7095

SUN ROOM

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 35.-		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	2.-		
10.	Subtotal			
11.	Cert. of Occupancy	35.-		
12.	Other ZPA	30		
13.	TOTAL	$ 102.-		

VI. BUILDING/SITE CHARACTERISTICS

			(office use only)
1.	Number of Stories	1	
2.	Height of Structure	8 ft.	
3.	Area — Largest Floor	126 sq. ft.	
4.	New Building Area	126 sq. ft.	
5.	Volume of New Structure	1008 cu. ft.	
6.	Construction Classification		
7.	Total Land Area Disturbed	126 sq. ft.	
8.	Flood Hazard Zone		
9.	Base Flood Elevation	ft.	
10.	Wetlands yes		
	no		
11.	Max. Live Load		
12.	Max. Occupancy Load		

II. PROPOSED WORK

		Est. Cost
1.	☐ Minor Work	
2.	☐ New Building	
3.	☒ Addition	10,000
4.	☐ Alteration	
5.	☐ Fire Protection	
6.	☐ Plumbing	
7.	☐ Electrical	
8.	☐ Elevator Devices	
9.	☐ Asbestos Abat. Subch. 8	
10.	☐ Lead Hazard Abatement	
11.	☐ Demolition	
	TOTAL COSTS	10,000

OPTIONAL (for office use only)

	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
	CR	3/10/99		3-22-99	FA	6/30/99		
	Revisions	3/15/99						
	EWG	3/19/99		3/19/99	AL			

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

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

LDS BR 10204518

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

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A., or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

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

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

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

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

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

Signature _____ Date _____

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

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

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

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

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

(X) Check if contractor.

Agent Name TRI STATE BUILDING SPECIALTIES

Address 1014 Route 33 Unit 6
FREEHOLD, NJ 07728
(908) 780-9756

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									
☐ 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 07/01/99
Control #
Permit # 99-0775

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 190.08 Lot 19 Qual
Work Site Location 367 CHURCH RD
REPLACE PORCH ENCLOSURE
Owner in Fee/Occupant CRANGLE
Address SAME
BRICK, NJ 08723-
Telephone [redacted]
Contractor TRI STATE BUILDING SPEC
Address 1014 RT 33
FREEHOLD, NJ 07728-
Telephone (732)780-9756 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3120229

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

REPLACE ENCLOSED PORCH

[ ] 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.

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

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ___ or the owner will be subject to fine or order to vacate:

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

[ ] CERTIFICATE OF CONTINUED OCCUPANCY
This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

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

J. Cuniazza
CONSTRUCTION OFFICIAL
U.C.C. F260 (rev. 3/96)

Fee $ 35
Paid [X] Check No. 10072
Collected by: TL

0004
775*#
BLOCK 190 # 0.00
LOT 19 # 0.00
BUILDING 35.00
D.C.A. 2.00
C / O 35.00
ZONEPLOT 15.00
ENG P.R. 15.00
TOTAL 102.00
CHECK 102.00
CHANGE 0.00
03/24/99 NO. 5 0011A005 11:01

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 03/24/99
Control #
Permit # 99-0775

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 190.08 Lot 19 Qual

Work Site Location 367 CHURCH RD
REPLACE PORCH ENCLOSURE
Owner in Fee CRANGLE
Address SAME
BRICK, NJ 08723-
Telephone [redacted]

Contractor TRI STATE BUILDING SPEC
Address 1014 RT 33
FREEHOLD, NJ 07728-
Telephone (732)780-9756
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3120229

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
REPLACE ENCLOSED PORCH

PAYMENTS (Office Use Only)

Building	35
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	2
Cert. of Occupancy	35
Other ZPER	30
Total 102 -	~~72~~
Check No.	10072
Cash	
Collected By	TL

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

Estimated Cost of Work $ 10,000

J Cuozzo 3/3
Construction Official

03/24/99
Date

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 03/15/99
Date Issued 3/24/99
Control # C15-19
Permit # 99-0775

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

Block 190.08 Lot 19 Qual
Work Site Location 367 CHURCH RD
REPLACE PORCH ENCLOSURE
Owner in Fee CRANGLE
Address SAME
BRICK, NJ 08723-
Tele [redacted]
Contractor TRI STATE BUILDING SPEC
Address 1014 RT 33
FREEHOLD, NJ 07728-
Tele.(732)780-9756 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3120229

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

REPLACE ENCLOSED PORCH

structure only, on existing Deck

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	3-22-99	FH
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
[ ] Elev
SUBCODE APPROVAL
[ ] 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			6-30-99	
BarrierFree				

TYPE OF WORK

		FEE (Office Use Only)
[ ] New Building		$ 0
[X] Addition		25
[ ] 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	Proposed	R-3
Constr. Class	Present	Proposed	
No. of Stories		1	
Height of Structure		8	Ft.
Area Largest Floor		126	Sq. Ft.
New Bldg. Area/All Floors		126	Sq. Ft.
Volume of New Structure		1,008	Cu. Ft.
Total Land Area Disturbed		0	Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 10,000
2. Alteration $ 0
3. Total (1+2)$ 10,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 10
TOTAL FEE	$ 35
DCA Training Fee	$ 2

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 03/15/99
Date Issued 3/24/99
Control # C15-19
Permit # 99-0775

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

Block 190.08 Lot 19 Qual
Work Site Location 367 CHURCH RD
REPLACE PORCH ENCLOSURE
Owner in Fee CRANGLE
Address SAME
BRICK, NJ 08723-
Tele [redacted]
Contractor TRI STATE BUILDING SPEC
Address 1014 RT 33
FREEHOLD, NJ 07728-
Tele.(732)780-9756 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3120229

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

REPLACE ENCLOSED PORCH

structure only; on existing Deck

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	3/22/99	FW
[ ] 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				

TYPE OF WORK			FEE (Office Use Only)
[ ] New Building			$ 0
[X] Addition			25
[ ] 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

6/30/99

B. BUILDING CHARACTERISTICS

Use Group Present Proposed R-3
Constr. Class Present Proposed
No. of Stories 1
Height of Structure 8 Ft.
Area Largest Floor 126 Sq. Ft.
New Bldg. Area/All Floors 126 Sq. Ft.
Volume of New Structure 1,008 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 10,000
2. Alteration $ 0
3. Total (1+2)$ 10,000

Industrialized Building:
[ ] State Approved
[ ] HUD

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 10
Collected by:	TOTAL FEE	$ 35
	DCA Training Fee	$ 2

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

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: March 16, 1999 1999- 0266

Block 190.08 Lot 19 Zone R-7.5

Property Address: 367 Church Road

Owner: Crangle (Phone): [redacted]

Applicant: Jason Card (Phone): 780-9756

Existing Use: Single family dwelling

Proposed Use: Single family dwelling

Proposed Construction (if any): Remove and replace 9'x14', 8' high porch enclosure

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

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

TOWNSHIP OF BRICK

Zoning Permit Application

(Please Type or Print Neatly)

BLOCK 190.08 LOT 19

PROPERTY ADDRESS 367 Church RD Brick

NAME OF OWNER CRANGLE OWNER'S PHONE [redacted]

NAME OF APPLICANT TRISTATE Building Spec. - JASON Card

APPLICANT'S COMPLETE ADDRESS 1014 Rt 33 Freehold NJ 07728

APPLICANT'S PHONE NUMBER (732) 780-9756 APPLICANT'S BUSINESS NAME 780-9756

PRESENT USE OF PROPERTY (check one)

- ☐ Vacant Lot
- ☒ Single Family Dwelling
- ☐ Condo or Apartment
- ☐ Commercial (please describe) _____
- ☐ Other (please describe) _____

PROPOSED USE OF PROPERTY (check one)

- ☐ Vacant Lot
- ☒ Single Family Dwelling
- ☐ Condo or Apartment
- ☐ Commercial (please describe) _____
- ☐ Other (please describe) _____

PROPOSED CONSTRUCTION Three Season Patio Enclosure

All Dimensions 9'9" W 14' L 8' Ht

Deck or Garage ☐ Attached ☐ Detached

Fence Type _____ Ht _____

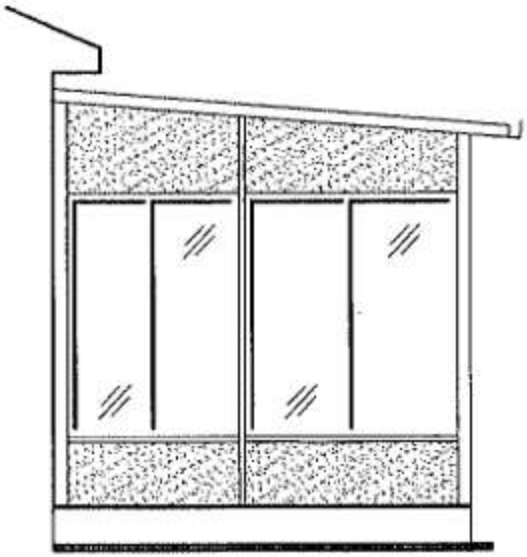
CHECKLIST:

- ☑ All information completed above
- ☑ Two (2) accurate Survey / Plot Plans containing:
  - ☑ all existing and proposed structures
  - ☑ all dimensions of lot and structures
  - ☑ set backs to all property lines
  - ☑ all streets and waterways shown
- ☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

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 Jason R Card JASON CARD Date 3/3/99

Reviewed by Zoning Officer Date 3/16/99 ☑ Approved ☐ Rejected



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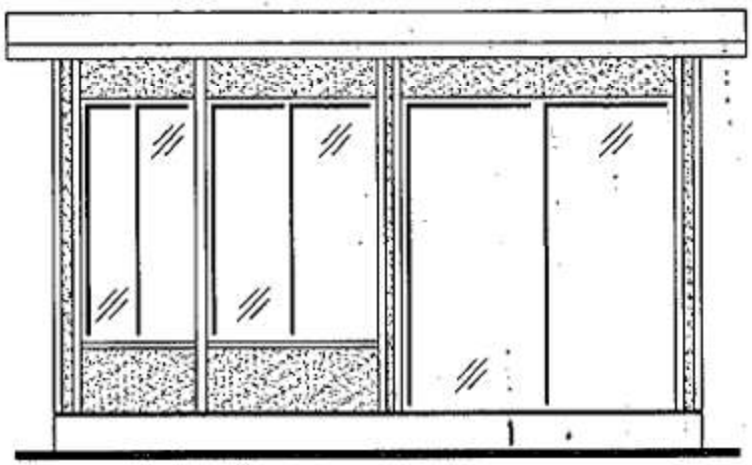

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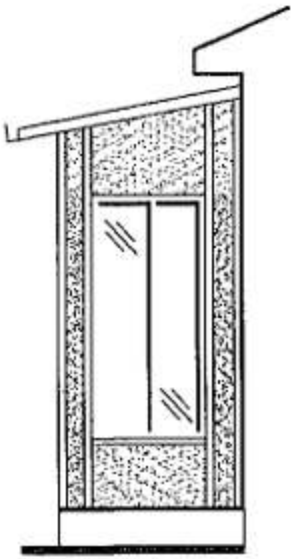


3

ALL TEMO SUNROOMS ENCLOSURES ARE DESIGNED IN ACCORDANCE WITH AAASM-35

NOTE: ALL TEMO SUNROOM PRODUCTS INCLUDE TEMPERED HPG-2000 GLASS AS OUR STANDARD GLAZING MATERIAL

REVISIONS	DATE

CLIENT/PROJ. GRANGLE

PH. ( )

CUSTOMER SIGNATURE: ..

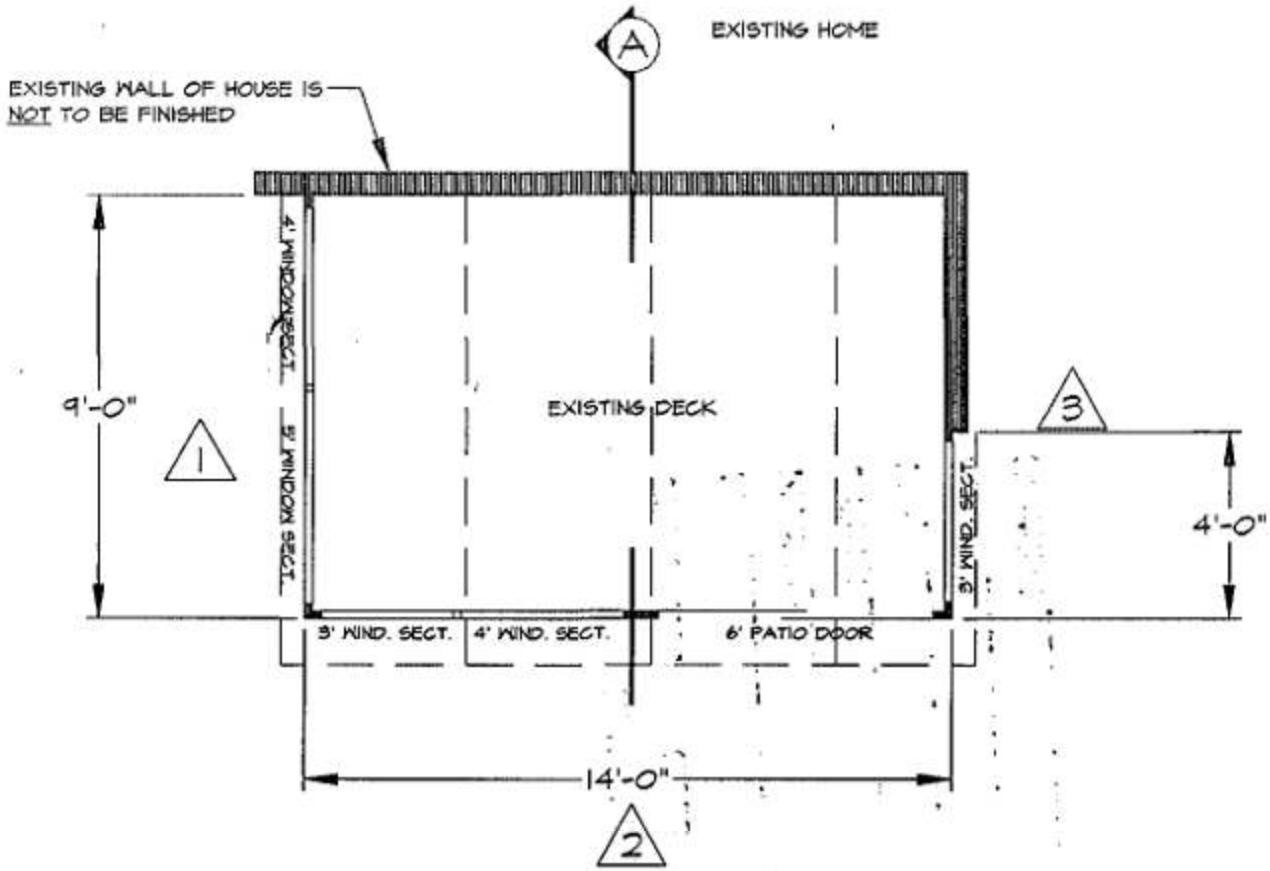
DRAWN BY: KELLIE PARKS DATE: 2-23-99

SCALE: NONE

FILENAME: 99W1503 02/23/99 TRISTATE

BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		3-22-99	FH
Fire			
Energy			
Electrical			



FLOOR PLAN

NOTE: THIS IS A 2" PATIO COVER. IT CANNOT BE UPGRADED:
1) FOR WEATHER-LOCKS
2) AS A YEAR-ROUND ROOM
3) FOR HEATING & COOLING

FRAME COLOR: SANDSTONE
FACIA/TRIM: SANDSTONE
INTERIOR KP: SANDSTONE
EXTERIOR KP: SANDSTONE
SKIN TYPE: TEMKOR

FILENAME: 99W1503 02/23/99 TRISTATE

NOTE:
THE SIDE WALL ATTACHMENT TO HOUSE IS A NON-LOAD BEARING CONNECTION. PROPERLY CAULK BOTH SIDES OF ALUMINUM EXTRUSION AT THIS CONNECTION.

DATE	REVISIONS

PH. ( )

CLIENT/PROJ.
GRANGLE

CUSTOMER SIGNATURE:

DRAWN BY: KELLIE PARKS DATE:

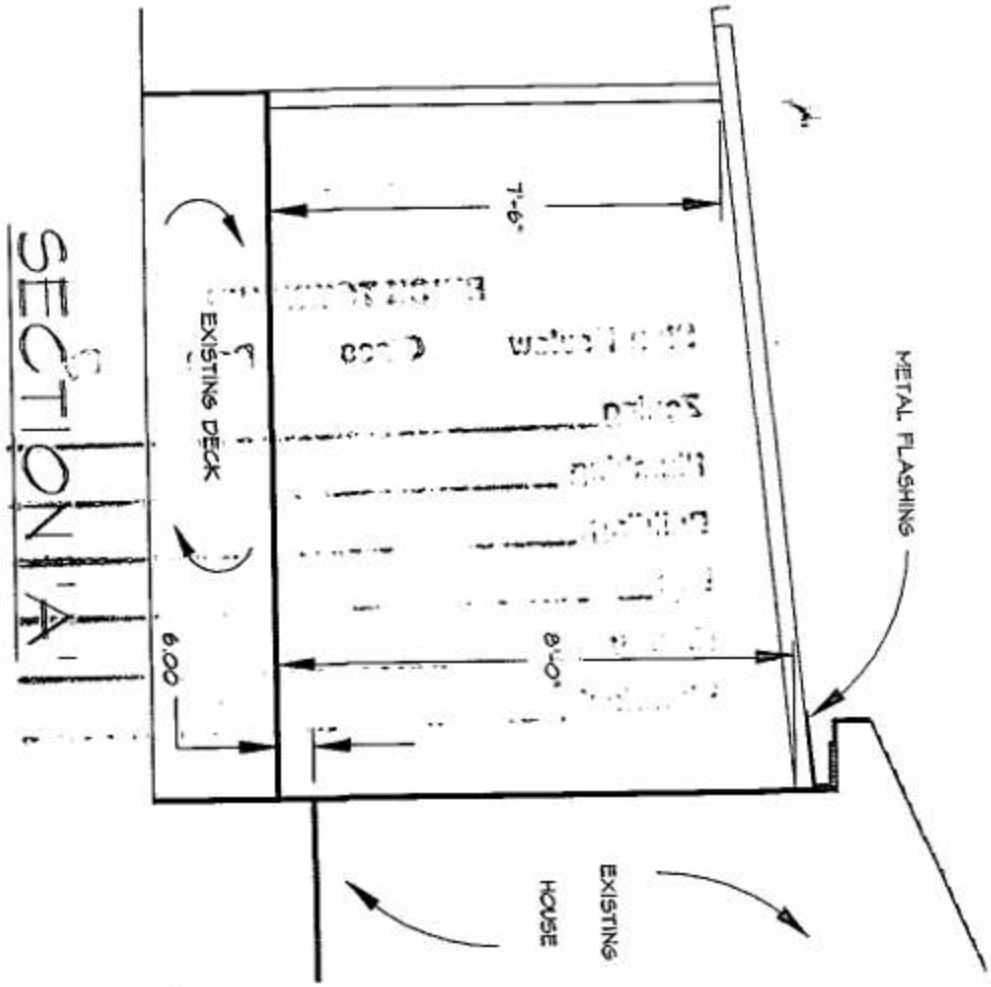
SCALE: 1/4"=1'

2-23-99

BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		3-22-99	PM
Fire			
Energy			
Electrical			

FILENAME: 99W1503 02/23/99 TRISTATE



2-23-99

CLIENT/PROJ.	PH. ( )	DATE	REVISIONS
GRANGLE			
CUSTOMER SIGNATURE:			
DRAWN BY: KELLIE PARKS DATE:	SCALE: NONE		

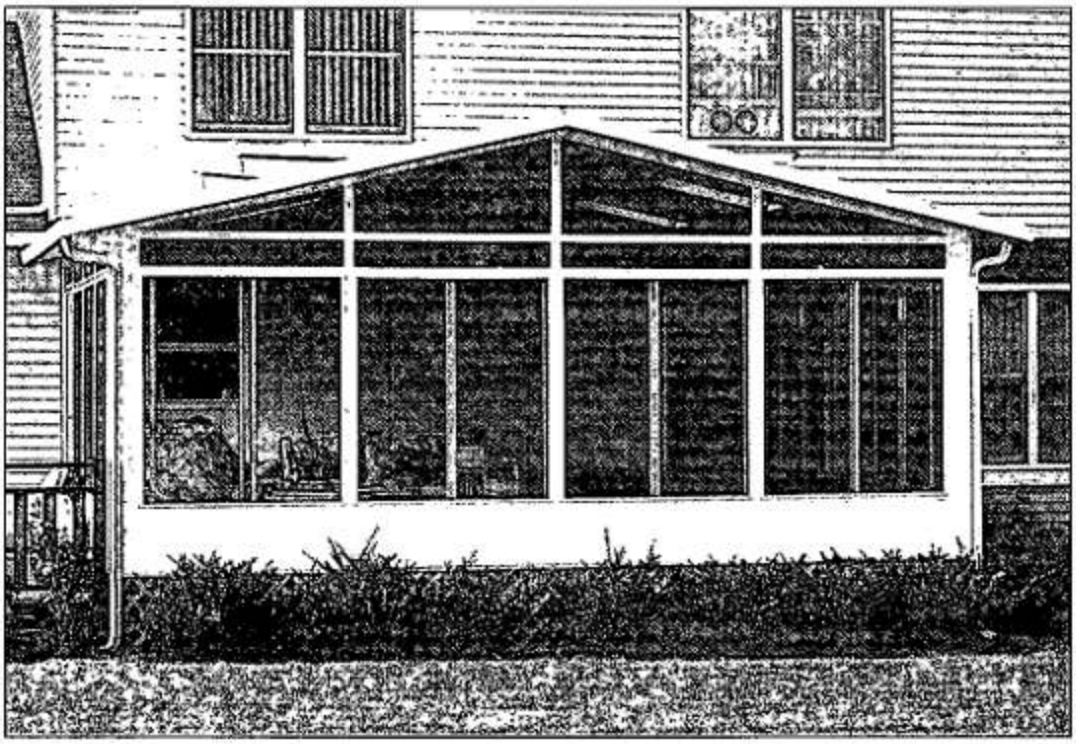
BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		3-22-99	FM
Fire			
Energy			
Electrical			

Experience Life's Quality Moments

in a Patio Room

by



Tri-State Building Specialties

"Home of the Country Room"

CELEBRATING OUR 26th ANNIVERSARY

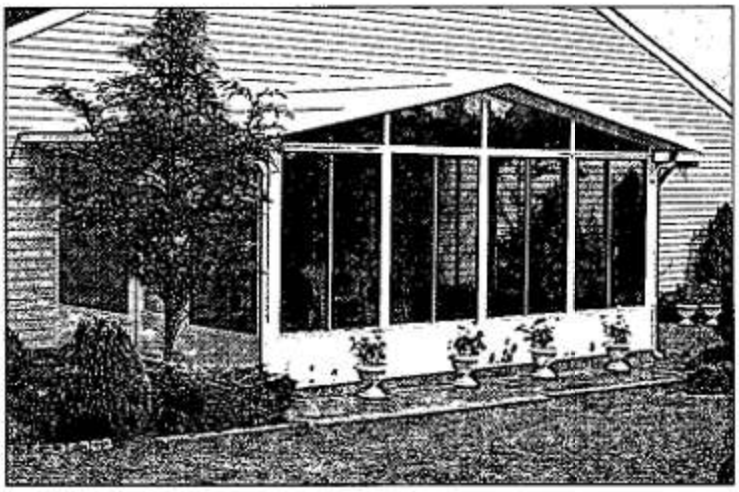
TOLL-FREE

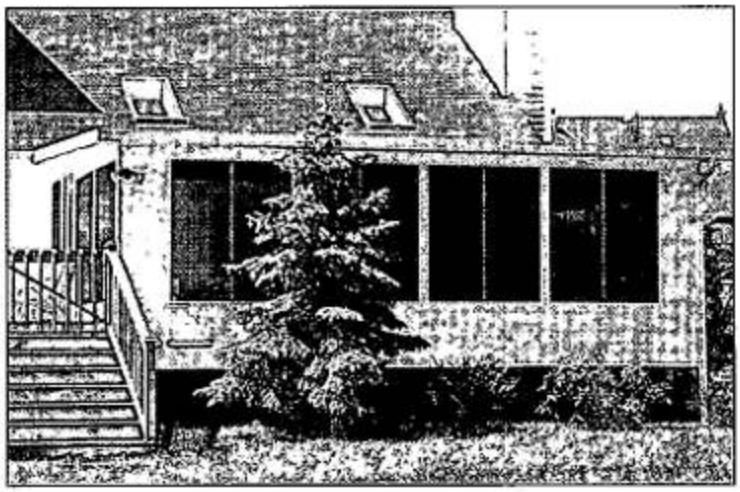
1-800-669-9756

spring • summer • fall • winter

1014 Route 33 • Suite 6 • Freehold, New Jersey 07728

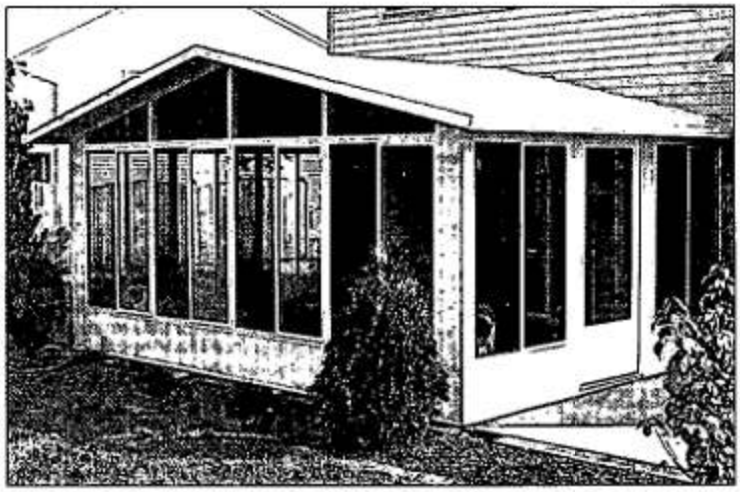
Custom Designed to Complement Your Home & Lifestyle

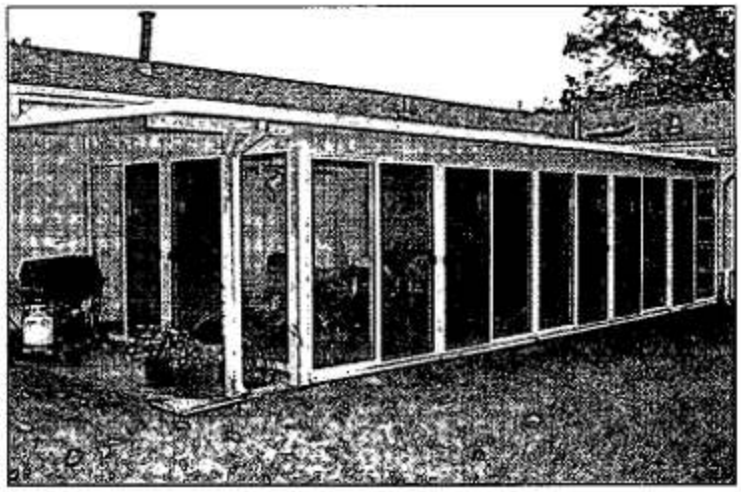




Cathedral Roof Styles

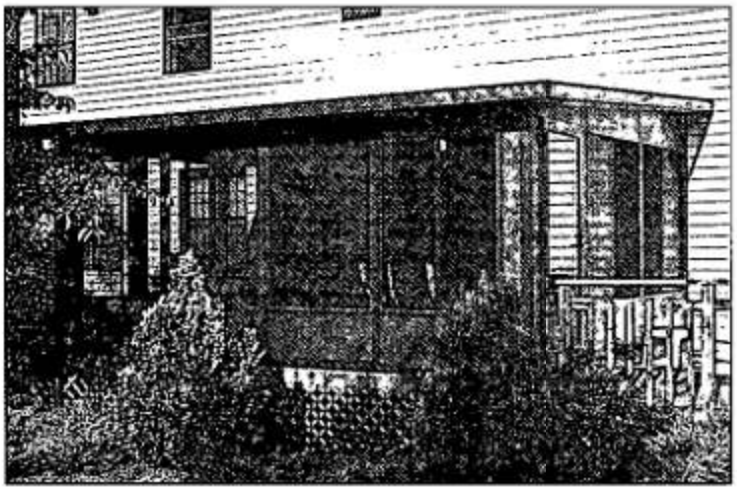
Studio Roof Styles

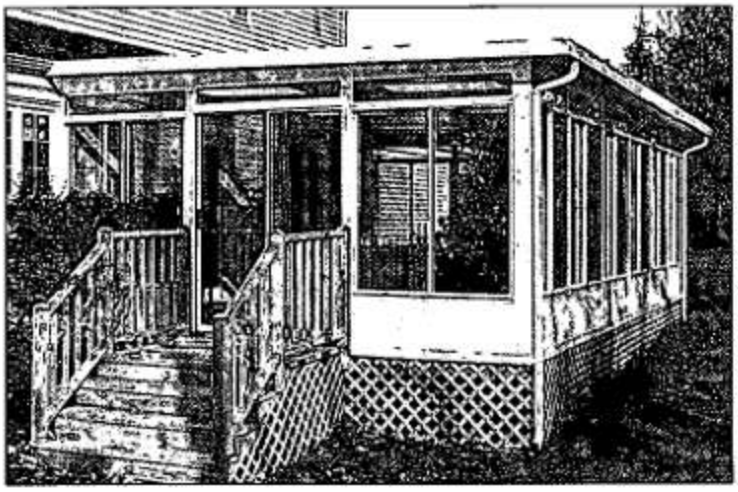




Create a sunny, airy space that is perfect for family recreation, an exercise room, hot tub, or just a quiet place for coffee and the paper. Bring the outside "in", and enjoy the best of outdoor living protected from the wind, rain and mosquitoes. Whatever your dream may be, there is a Country Room design to make your dream come true!

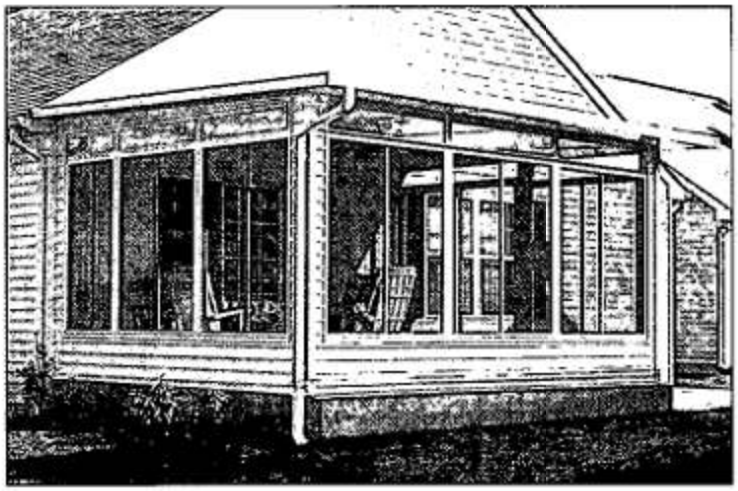
An Enclosure for Every Season

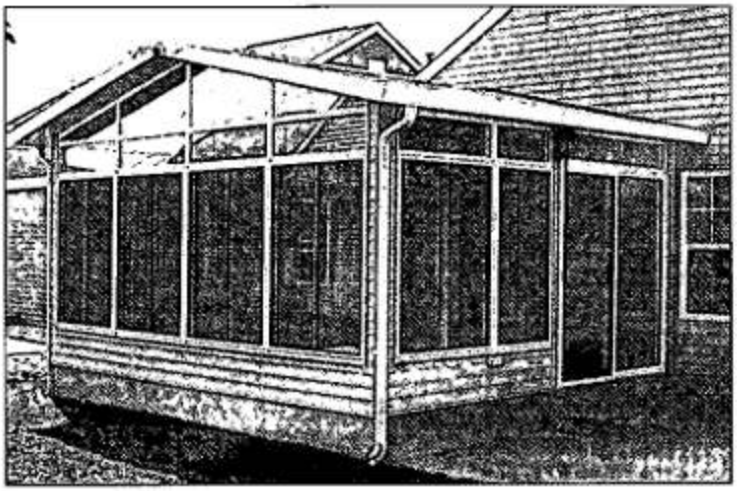




"Three Season Enclosures"

"All Year Enclosures"





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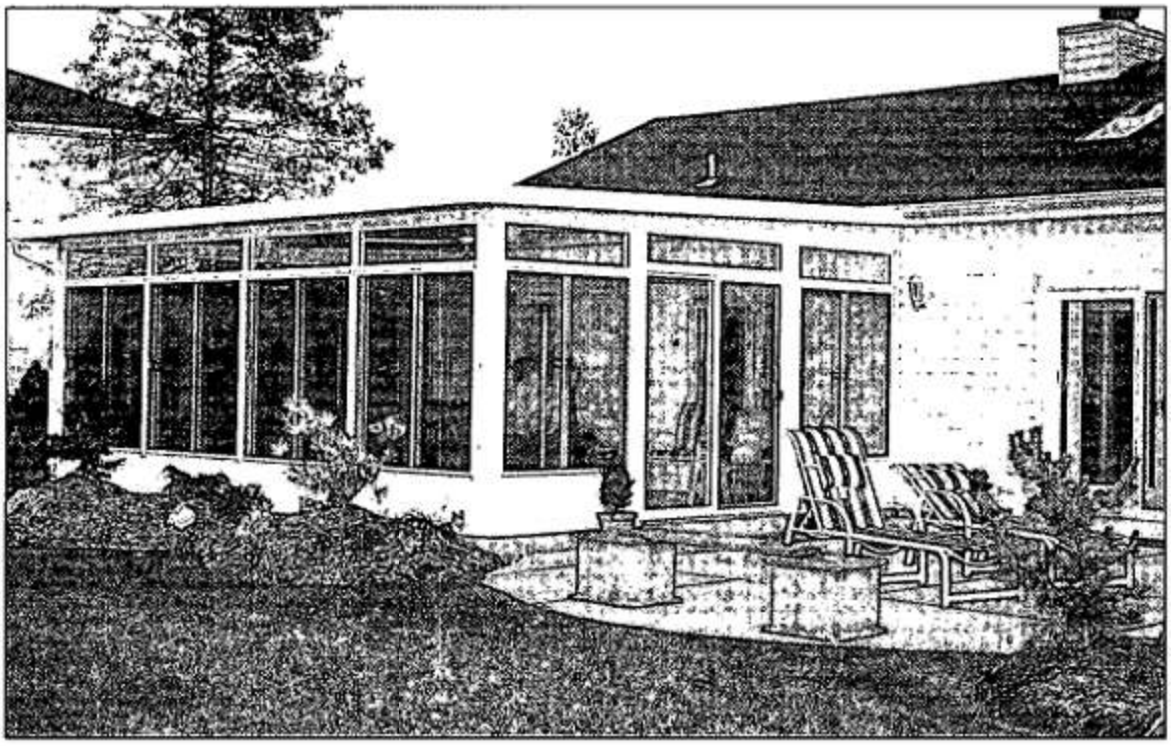

Tri-State Building Specialties

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TOWNSHIP OF BRICK

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

Department of Administration & Finance

Division of Inspections
Joseph Curiazza
Construction Official
(732) 262-1024
Fax (732) 262-8954
http://www.gbshost.com/brick

Date: 3/1/99

Municipal Engineer
401 Chambers Bridge Rd
Brick, N.J. 08723

RE: Block: 190.08 Lot: 19

I, Frank Cavagnaro (name) of 369 Church RD (address),

request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book , Chapter 190.31, part B. The property (please circle one) is /is not located in a flood zone.

Respectfully yours,

Frank Cavagnaro
applicant's signature

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.

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

Note: Any excavations to be removed from the Township requires a mining permit.

OFFICE USE

Approved X Date: 3/19/99 By:

Rejected Date: _____ By: _____

Remarks: _____

TEMO sunrooms

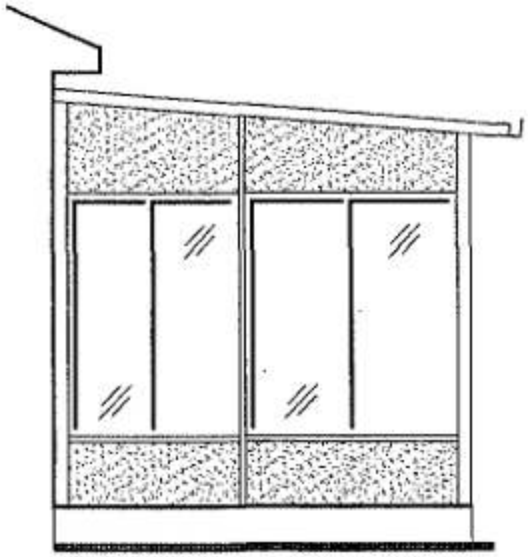
TRI-STATE BUILDING SPEC.

1014 RT 33 UNIT 6
FREEHOLD NJ 07728

Telephone 732-780-9756
Fax 732-780-7095

ENCLOSED IS the Additional paper work that you REQUESTED

Ref : Crangle
367 - Church Rd.



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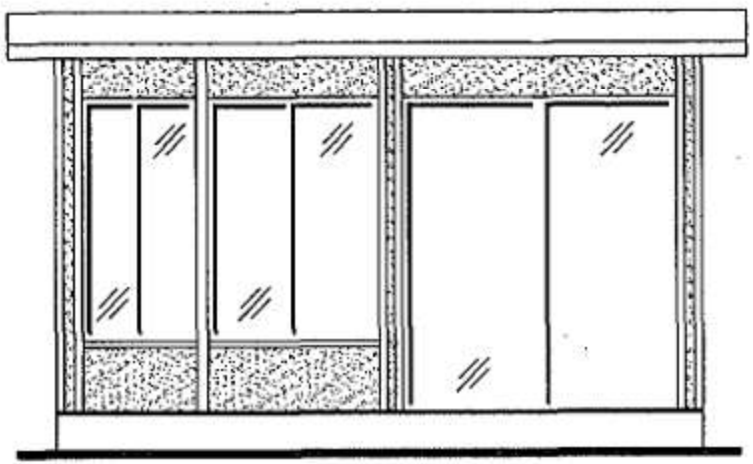

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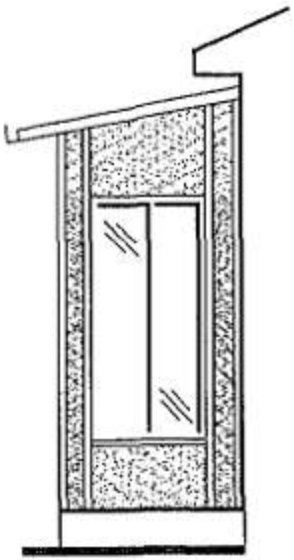


3

ALL TEMO SUNROOMS ENCLOSURES ARE DESIGNED IN ACCORDANCE WITH AAASM-35

NOTE: ALL TEMO SUNROOM PRODUCTS INCLUDE TEMPERED HPG-2000 GLASS AS OUR STANDARD GLAZING MATERIAL

DATE	REVISIONS

CLIENT/PROJ. GRANGLE

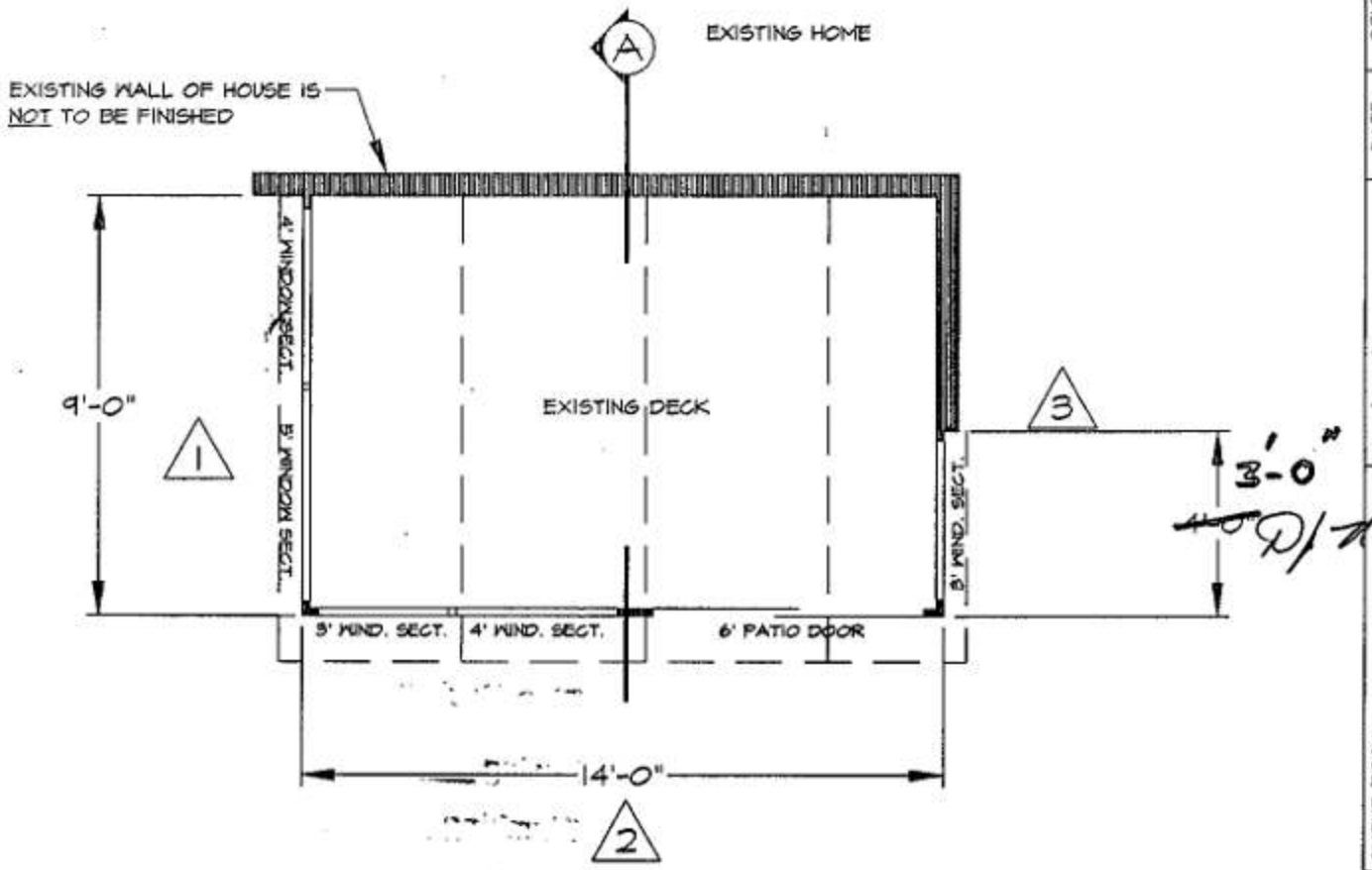
PH. ( )

CUSTOMER SIGNATURE: -

DRAWN BY: KELLIE PARKS DATE: 2-23-99

SCALE: NONE

FILENAME: 99W1503 02/23/99 TRISTATE



FLOOR PLAN

NOTE: THIS IS A 2" PATIO COVER. IT CANNOT BE UPGRADED:
1) FOR WEATHER-LOCKS
2) AS A YEAR-ROUND ROOM
3) FOR HEATING & COOLING

FRAME COLOR: SANDSTONE
FACIA/TRIM: SANDSTONE
INTERIOR KP: SANDSTONE
EXTERIOR KP: SANDSTONE
SKIN TYPE: TEMKOR

FILENAME: 99W1503 02/23/99 TRISTATE

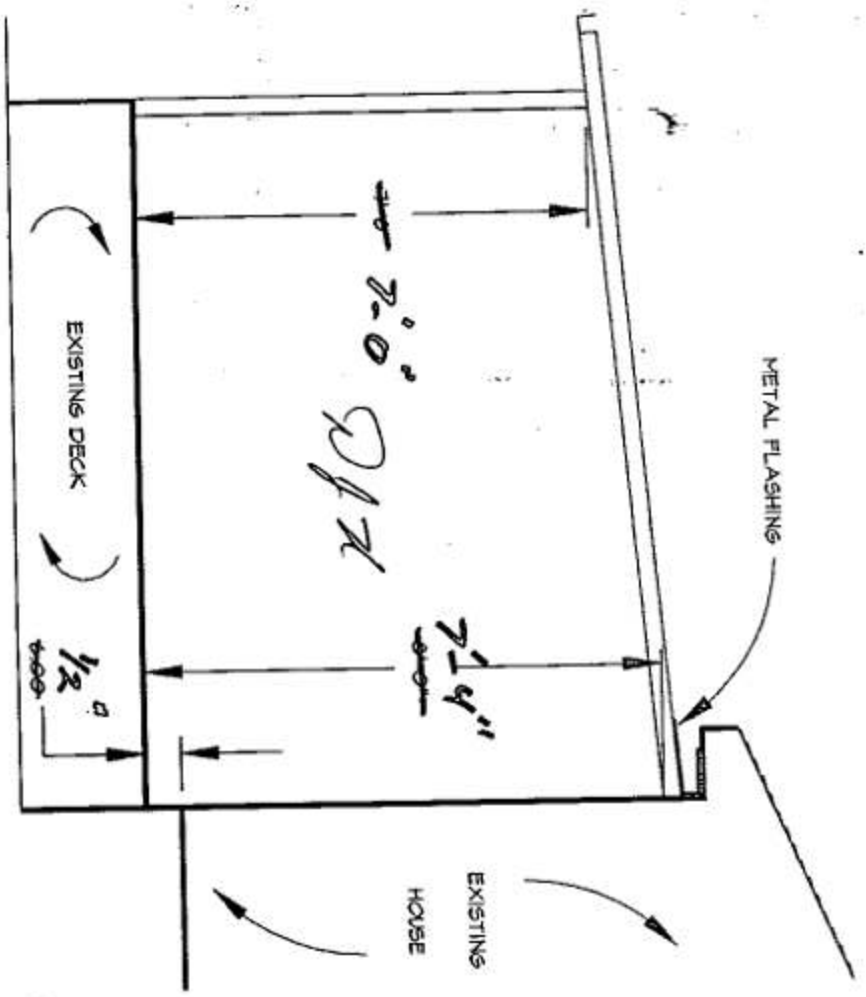
NOTE:
THE SIDE WALL ATTACHMENT TO HOUSE IS A NON-LOAD BEARING CONNECTION. PROPERLY CAULK BOTH SIDES OF ALUMINUM EXTRUSION AT THIS CONNECTION.

DATE	REVISIONS

CLIENT/PROJ. GRANGLE
PH. ( )
CUSTOMER SIGNATURE:
DRAWN BY: KELLIE PARKS DATE:
SCALE: 1/4"=1'

2-23-99

FILENAME: 99W1503 02/23/99 TRISTATE



SECTION 'A'

2-23-99

CLIENT/PROJ.	PH. ( )	DATE	REVISIONS
GRANGLE			
CUSTOMER SIGNATURE:			
DRAWN BY: KELLIE PARKS DATE:	SCALE: NONE		

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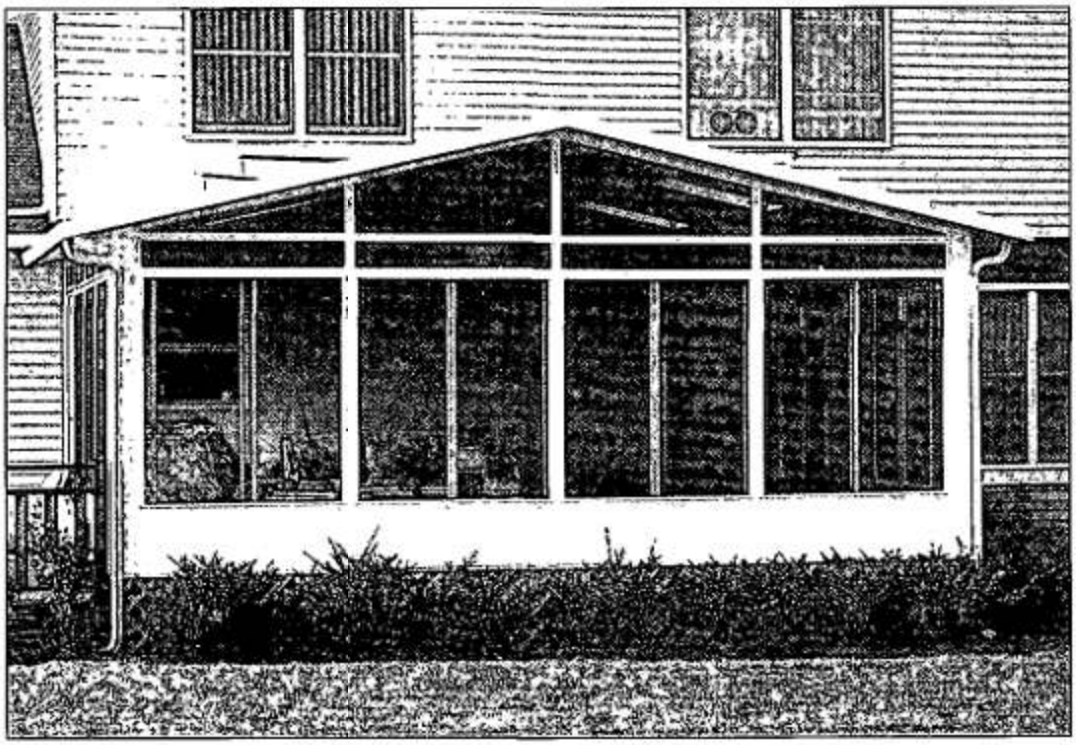
in a Patio Room

by



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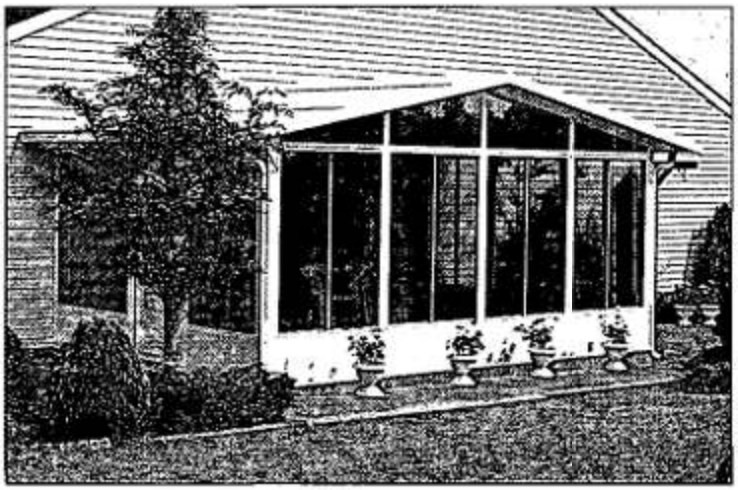

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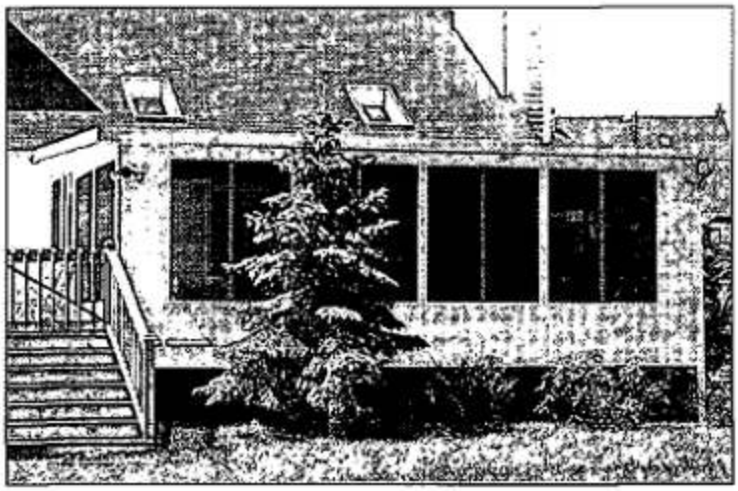

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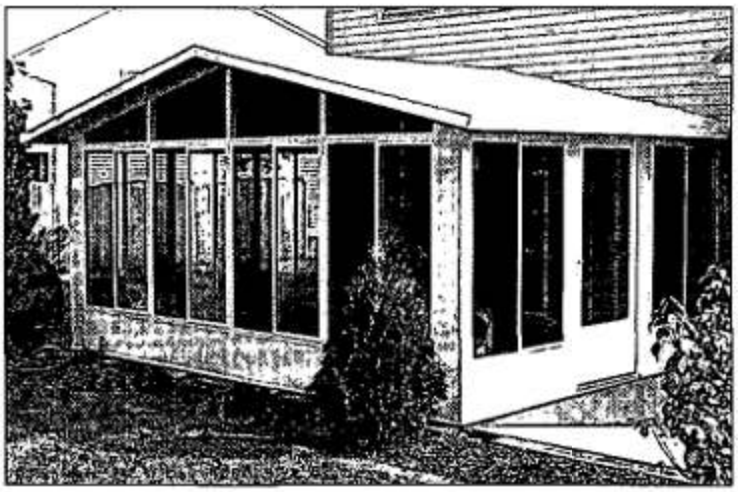

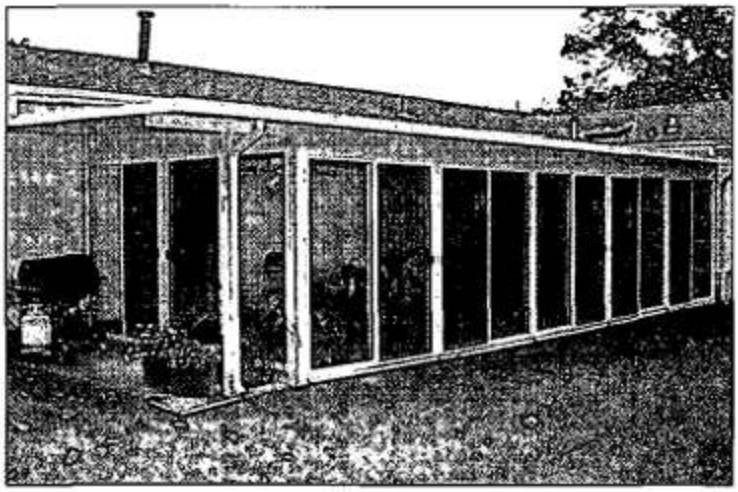

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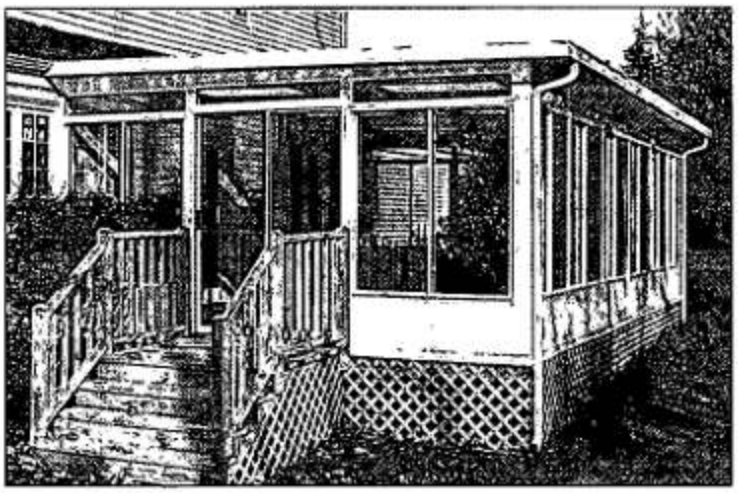

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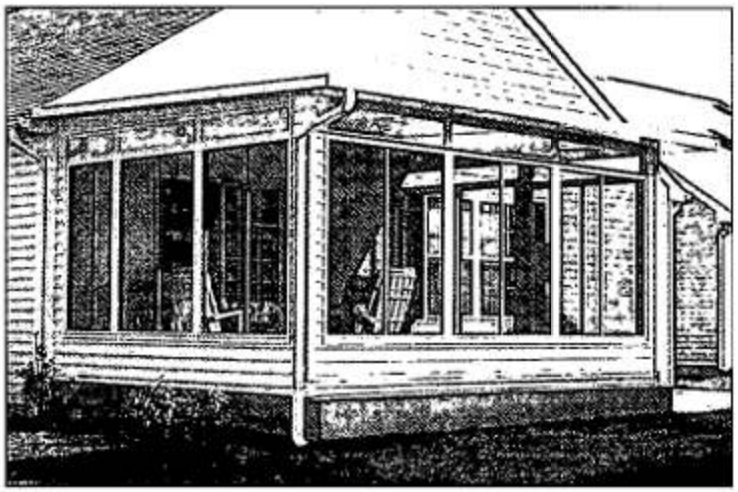

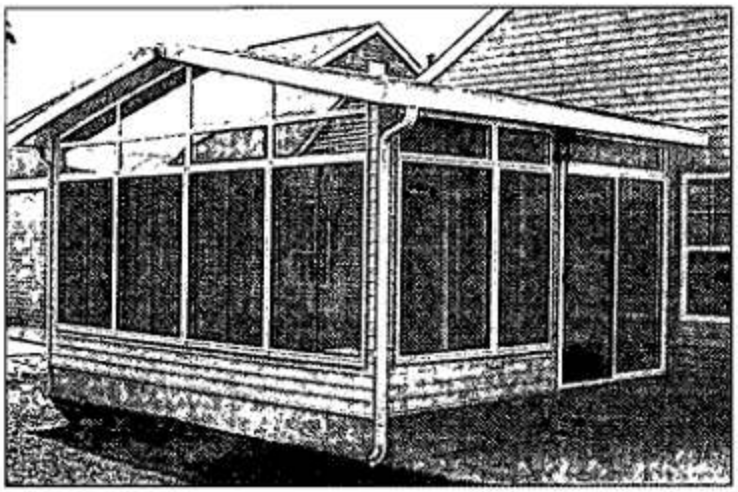

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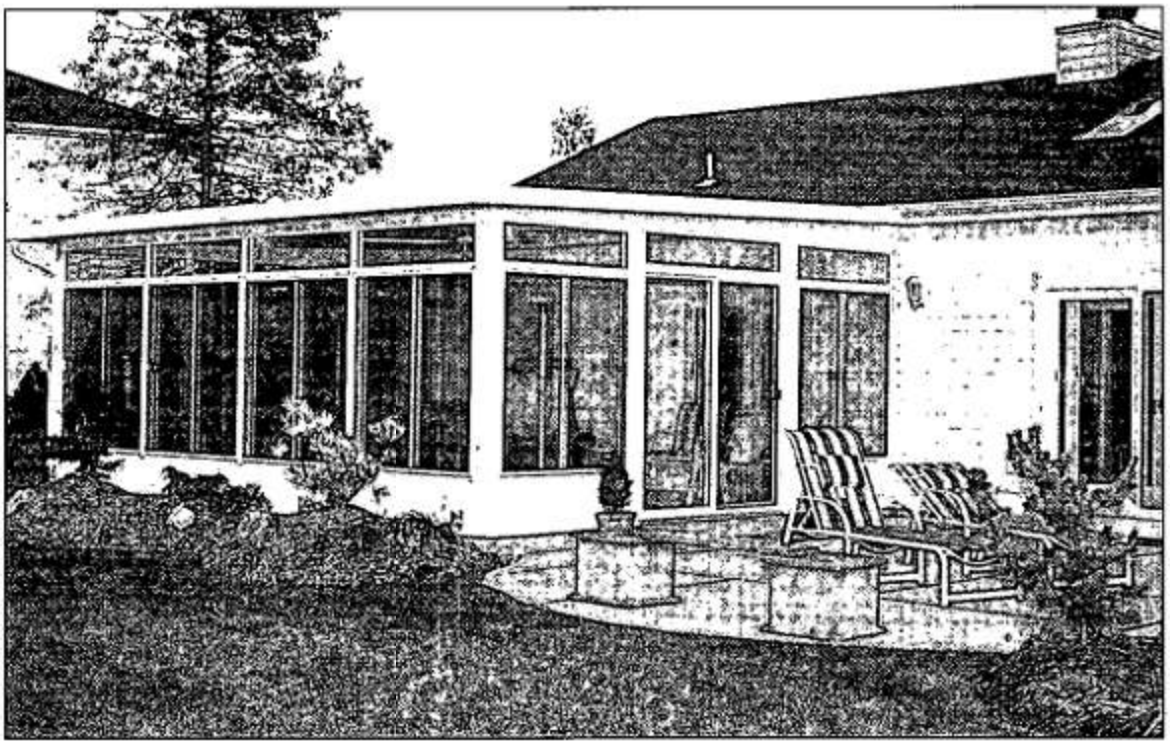

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1-800-669-9756 or (908) 780-9756

401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: 367 Church Rd
Block: 190.08 Lot: 19
Owner in Fee: CRANGLE
Address: 367 Church RD
Brick NJ 08723
State: NJ Zip: 08723 Phone: [redacted]
SS #: Provide only if Applicant is owner

Date Rec'd.:
Date Issued:
Control #:
Permit #:

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS: TRI STATE BUILDING SPECIALTIES
1014 Route 33 Unit 6
FREEHOLD, NJ 07728
(908) 780-9756
PHONE:
LIC.#:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #): 22-312-0229

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	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: $
Signature:

Owner ☐ Contractor ☐

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR:
ADDRESS: TRI STATE BUILDING SPECIALTIES
1014 Route 33 Unit 6
FREEHOLD, NJ 07728
(908) 780-9756
PHONE:
LIC.#:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #): 22-312-0229

TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Replacement of Existing porch with a 4' x 9' x 14' x 3' Patio 6' High Enclosure.

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: R-3
CONSTR. CLASS Present: Proposed: 5B
No. of Stories: 1
Height of Structure: 8
Area - Largest Floor: 126
New Building Area / All Floors: 126
Volume of Structure: 1008 Total Land Disturbed: -0-
Signature: Jason R Call

Estimated Cost of Building Work: 10000
New Building (1): $ 10,000
Aleration (2): $
TOTAL (1+2): $ 10,000

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐