BLOCK 844 LOT 12 QUALIFICATION CODE _____ ADDRESS (SITE) 1691 Laurelton Street Brick NJ 08724 PERMIT NO. 05-3082

CONSTRUCTION PERMIT APPLICATION

05-13600

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

I. IDENTIFICATION

1. Proposed Work Site at: 1691 Laurelton Street Brick NJ
2. Name of Owner in Fee: Jeffrey & Courtney Gabosel Tel [redacted]
   Address 1691 Laurelton Street (street) Brick, NJ (municipality) 08724 (zip code)
3. Ownership in fee: Public _____ Private _____
4. Principal Contractor: Homeowner [redacted]
   Address 1691 Laurelton Street Brick, NJ 08724
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: (___) _____
5. Architect or Engineer Homeowner Tel. (___) _____
   Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Jeffrey Gabosel
   Tel. [redacted] FAX: (___) _____

Deck Attached.

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$	72	
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$	4	
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	State Permit Fee Surcharge			
10.	Subtotal	$		
11.	Cert. of Occupancy			
12.	Other ZA		30	
13.	TOTAL	$	106.	

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	1	
2. Height of Structure	18'1" (16'1") ft.	
3. Area — Largest Floor	720 sq. ft.	
4. New Building Area	sq. ft.	
5. Volume of New Structure	cu. ft.	
6. Construction Classification		
7. Total Land Area Disturbed	sq. ft.	
8. Flood Hazard Zone		
9. Base Flood Elevation	ft.	
10. Wetlands yes		
no		
11. Max. Live Load		
12. Max. Occupancy Load		

II. PROPOSED WORK

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									
3.	☒ Addition Deck			7/6/05		7-29-05	FM			
4.	☐ a. Repair									
	☐ b. Alteration									
	☐ c. Renovation									
	☐ d. Reconstruction									
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☐ Electrical									
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition									
	TOTAL COSTS	3000.	EM	7/29/05		7/29/05				

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use: Deck
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:

LDS BR 10325808

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING? None

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

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.

X Signature Beverly Gabriel Date 6/28/05

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									
☐ 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. _____	_____	_____	_____	_____

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

Pl prelim 7/28/05 JS

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

X ☐ Zoning Application deemed complete Initialed: JS Date: 7/6/05

☐ Zoning Application approved Initialed: _____ Date: _____

☐ Zoning permit updates:

_____

_____

_____

401 Chambersbridge Rd
Brick, NJ 08723

Tracking Number C-05-136600
Permit Number 05-3082
Permit Issue Date 08/02/2005

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1691 LAURELTON ST Brick Township, NJ Block: 844 Lot: 12 Qual:

Owner in Fee: GABRIEL, JEFFREY R & GRUSS, C A

Owner Address: 1691 LAURELTON ST BRICK NJ 08724

Telephone:

Contractor GABRIEL, JEFFREY R & GRUSS, C A

Address 1691 LAURELTON ST 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: U Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Use:
DECK

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: $0.00
Check Number: 1881
Collected By: Ellen Privett

Date Printed: 11/09/2005

CONSTRUCTION PERMIT

Date Issued 08/02/2005
Control # C-05-136600
Permit # 05-3082

IDENTIFICATION Block: 844 Lot: 12 Qualifier
Work Site Location: 1691 LAURELTON ST Brick Township, NJ
Owner in Fee GABRIEL, JEFFREY R & GRUSS, C A
Address 1691 LAURELTON ST BRICK NJ 08724
Telephone:

Contractor GABRIEL, JEFFREY R & GRUSS, C A
Address 1691 LAURELTON ST 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
- [ ] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
DECK 24X30 SIZE

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 $3,000

Construction Official

08/02/2005
Date

PAYMENTS (Office Use Only)

Building	$72
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$4
CO Fee	
Other	$30
Total	$106
Check No.	1881
Cash	$0
Credit	$0
Collected By	Ellen Privett

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.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 8/2/05

Date Issued Permit # 053082

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

Block 844 Lot 12 Qualification Code

Work Site Location 1691 Laurelton Street Brick, NJ 08724

Owner in Fee Jeffrey R. Gabriel & Courtney A. Gabriel

Address 1691 Laurelton Street Brick NJ 08724

Tel. [redacted]

Contractor Homeowner

Address 1691 Carlton Street Brick NJ 08724

Tel. [redacted] FAX (732) 544-2692

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Deck 24'x30'

CALL FOR Open Deck Inspection

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	7/29/05	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 10/06/05
Approved by: [signature]

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Footing			8/8/05	
Footing Bonding				
Foundation				
Slab				
Frame 8-15-05 call	8/19/05			
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final 9-13-05 over				
Energy				
Mechanical				
TCO				
Other				
Final			10/5/05	
Barrier-Free				

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
[X] Other Deck 24x30
[ ] Demolition

FEE (Office Use Only)
$

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

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed
Constr. Class	Present	Proposed
No. of Stories	1	
Height of Structure	1'6" (18")	Ft.
Area — Largest Floor	720	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 $ 3000.
3. Total (1+ 2) $ 3000.

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

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

8/15/05 Question on nail - Post NOT HCQ adaptable and some ~~[illegible]~~ nails missed for ~~[illegible]~~ JKL

8-19-05 - Nails were supposed to be brought into office in the box per FM JKL

9-13-05 Reminded not to Code 2x4 on end - I must check Heights off GRADE & Rise Heights ; STILL waiting on Box of NAILS JKL

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 8/2/05
Control #

Date Issued
Permit # 05 3052

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

Block 844 Lot 12 Qualification Code

Work Site Location 1691 Lauriston Street
Brick, NJ 08724

Owner in Fee Jeffrey R. Gabriel + Carlos A. Gabriel

Address 1691 Lauriston Street
Brick NJ 08724

Tel. [redacted]

Contractor Homeowner

Address 1691 Lauriston Street
Brick NJ 08724

Tel. [redacted]

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Deck 24'x30'

CALL FOR Open Deck Inspection

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	7.29.05	EM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

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

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

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
[X] Other Deck 24x30
[ ] Demolition

FEE (Office Use Only)
$

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

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
No. of Stories 1
Height of Structure 1'6" (18") Ft.
Area — Largest Floor 720 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 $ 3000
3. Total (1+ 2) $

Township of Brick
Zoning Permit

Approved: Monday, July 18, 2005 **Number:** 1034

Block 844 **Lot** 12 **Zone:** R-7.5

Property Address: 1691 Laurelton Street

Applicant: Jeffrey R. Gabriel

Property Owner: Jeffrey R. And Courtney Anne Gabriel

Existing Use: Single Family Residential

Proposed Use: Single Family Residential

Proposed Construction: Attached deck 24' x 30', 18" high.

Conditions: The deck must be set back at least 6 feet from the side property line, 25 feet from the front property line and 15 feet 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 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

JUL 8 2005

JUL 18 2005

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

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

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

BLOCK 844 LOT 12 QUALIFIER ____

PROPERTY ADDRESS 1691 Lauralton Street Brick NJ 08724

PERSONAL NAME OF APPLICANT Jeffrey R. Gabriel

BUSINESS NAME OF APPLICANT N/A

MAILING ADDRESS OF APPLICANT 1691 Lauralton Street Brick NJ 08724

PROPERTY OWNER'S FULL NAME Jeffrey Richard Gabriel and Courtney Anne Gabriel

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 ____
☐ Alteration
☒ Porch or deck - Height 18" (24' x 30')
☐ Shed - Height ____
☐ Fence - Type ____ Height ____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) ____

CHECKLIST

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

☐ 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.

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 [signature] Date 7-6-05

Reviewed by Zoning Office SC Date 7/13/05 ( ) Approved (X) Denied

SC 7/18/05

JH 7/6/05

March 2003

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

05-3082

BLOCK 824 LOT 12 SITE ADDRESS 1691 Carleton Street
TYPE OF SITE Residential / Commercial NAME OF BUSINESS Deck
APPLICANT Jeffrey R. Gabriel PHONE NUMB [redacted]
APPLICANT ADDRESS 1691 Carleton St. 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

Jeff - 732-458-6600 ext. 8784

MANDATORY DEVELOPER FEES

X Residential is .005% 1%

◊ Commercial is .01%

◊ The estimated equalized assessed value of the proposed construction is

$ 7200
Frederick R Millman
Frederick R. Millman, CTA, Tax Assessor — 7/27/05 Date

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

$ 5700
Frederick R Millman
Frederick R. Millman, CTA, Tax Assessor — 11/3/05 Date

Preliminary Fee $36.00 — Date 7/28/05
Check # Cash — Receipt # 327594

Final Fee $21.00 — Date 11-9-05
Check# Cash — Reciept # 2118

Total Fee Due/Paid ~~$100.00~~ $57.00
Balance Due 0

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

7-2005 tax perfirm
7/28/05 - called Jeff + mailed ltr.
10/13/05 - Ta filed
11/3/05 - called Jeff + LM home

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 8424 LOT 12 SITE ADDRESS 1691 Lareton Street
TYPE OF SITE Residential / Commercial NAME OF BUSINESS Deck
APPLICANT Jeffrey B. Gabriel PHONE NUMBI [redacted]
APPLICANT ADDRESS 1691 Lareton St. 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

Jeff - 732-458-6600 ext 8784

MANDATORY DEVELOPER FEES

X Residential is .005% 1%

◊ Commercial is .01%

◊ The estimated equalized assessed value of the proposed construction is

$ 7200

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 7/27/05 Date

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

$ 5700

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 11/3/05 Date

Preliminary Fee $36.00 — Date 7/28/05
Check # Cash — Receipt # 327594

Final Fee $21.00 — Date 11-9-05
Check# Cash — Reciept # 2118

Total Fee Due/Paid ~~$ 1000~~ $57.00
Balance Due 0

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

7-2005 tax person
1/28/05 - called Jeff - mailed ltr.
1/3/05 - Ta filed

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 8424 LOT 12 SITE ADDRESS 1691 Carleton Street
TYPE OF SITE Residential / Commercial NAME OF BUSINESS Dean
APPLICANT Jeffrey B. Gabriel PHONE NUMB [redacted]
APPLICANT ADDRESS 1691 Carleton St. 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

Jeff - 732-458-6600 ext 8784

ANDATORY DEVELOPER FEES

X Residential is .005% 1%

◊ Commercial is .01%

◊ The estimated equalized assessed value of the proposed construction is

$ 7200

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 7/27/05 Date

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Preliminary Fee $36.00 — Date 7/28/05
Check # Cash — Receipt # 327594

Final Fee $21.00 — Date 11-9-05
Reciept # 2118 CMS

NOTES

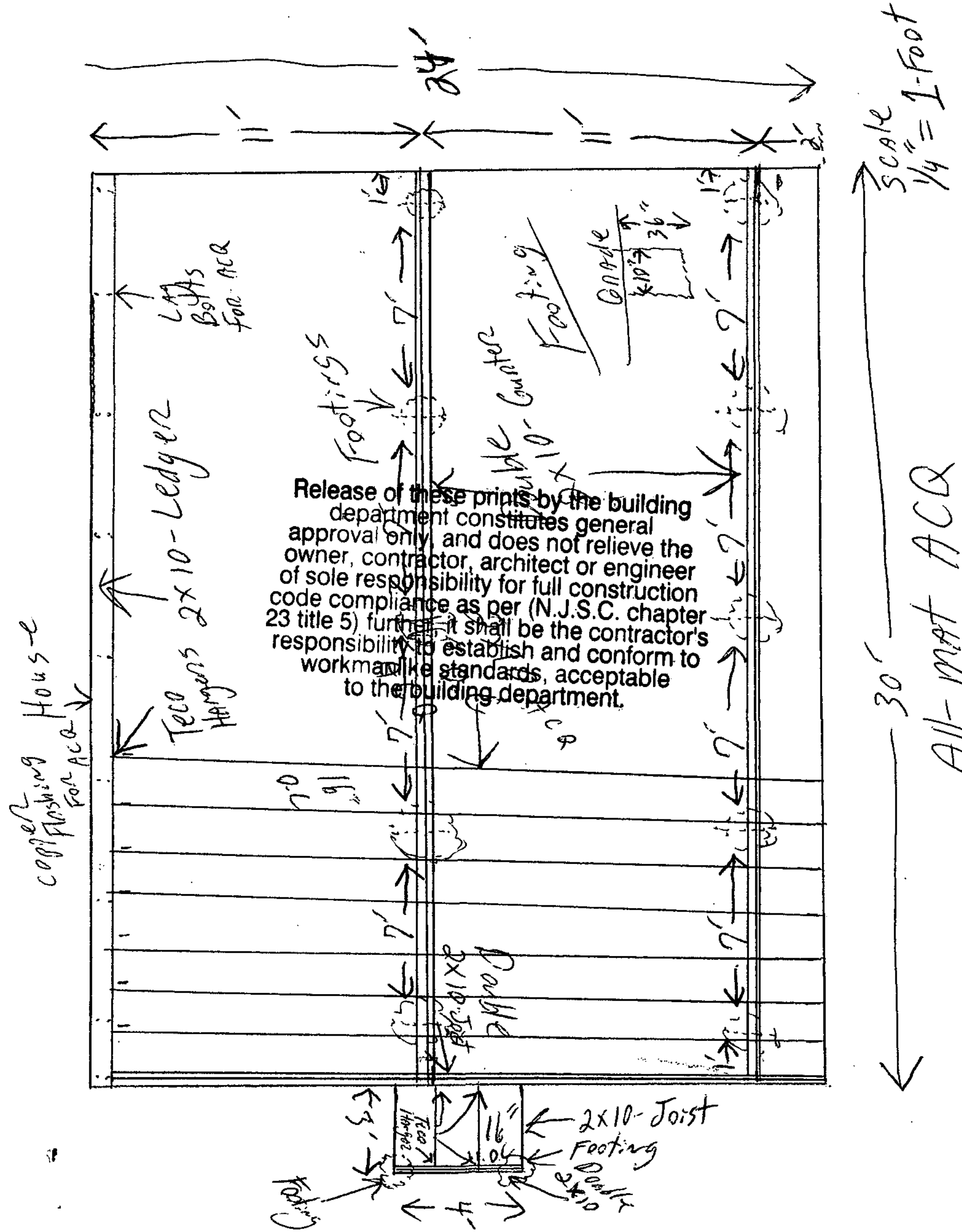
RECEIPT DATE 11-9-05 NO. 2118

RECEIVED FROM Jeffrey Gabriel
ADDRESS 1691 Carleton St Brick N.J.
FOR Final Fee for Affd. Housing $ 21.00

ACCOUNT	AMT. OF ACCOUNT	AMT. PAID	BALANCE DUE

HOW PAID: CASH — CHECK — MONEY ORDER

BY Connie Lynn Scott



Release of these prints by the building department constitutes general approval only, and does not relieve the owner, contractor, architect or engineer of sole responsibility for full construction code compliance as per (N.J.S.C. chapter 23 title 5) further, it shall be the contractor's responsibility to establish and conform to workmanlike standards, acceptable to the building department.

Brick Township

Plan Review Class Date By

Zoning _____

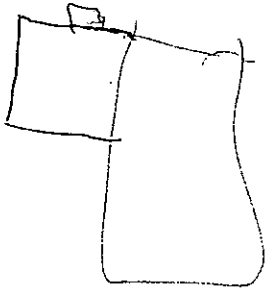
Plumbing _____

Building 7-29-05

Fire _____

Electrical _____

24'
4'
Double 3x10
Teco Hanger
3'
All-mat-ACQ
Double-3x10-ACQ
Steps 6" Rise 11" Tread
8'
30'
1/4" = 1-Foot Scale
2x10-Joist @ 16" O.C
2x10-Ledger
Decking 5/4 #1
Lag Bolts For ACQ
Deck Height 18"
Footing
Grade
Post For
10"
3'
1'



Brick Township

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		7-29-05	
Fire			
Electrical			

Grade
18"
Deck
9x9
Footing
10"
36"

Brick Township

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		7.29.05	TM
Fire			
Electrical			

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: 7/6/05

Block: 844 Lot: 12

Property Address: 1691 Laurelton Street Brick NJ 08724

I, Jeffrey R. Gabriel (name) of 1691 Laurelton St. Brick NJ 08724 (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.

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: 7/29/05 Signed:

Rejected on: Signed:

Comments:

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

July 13, 2005

Jeffrey Gabriel
1691 Laurelton Street
Brick, NJ 08724

Re: Block: 844 Lot: 12
1691 Laurelton Street

Dear Mr. Gabriel,

Your zoning permit application for a deck on the referenced property cannot be approved because the application is incomplete.

- Two accurate plot plans, drawn to scale, either by a licensed surveyor or an engineer, as per Section 190-31 of the Township Code must be submitted for review. The plot plan must show all existing and proposed structures, all setbacks from property lines, all dimensions of the lot and structures, all easements, buffers, wetlands or restricted areas and all streets and waterways. The Municipal Engineer may require additional information.
- No partial, taped, faxed, reduced or enlarged copies can be accepted.

Please amend your application and submit the required information to LisaRose Tavalaiccio, Zoning Permit Clerk. Ms Tavalaiccio can be reached at 732-262-1046 for further information. We will then be able to review your application.

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

7/18/05 - Resubmit - Lot

7/15/05 - Spoke to applicant about survey. (RR)

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: Jeffrey R. Gabriel

SIGNATURE: [signature] DATE: 7-6-05

BLOCK: 842 LOT: 12 ADDRESS: 1691 Laurelton Street
Brick, NJ 08724

Township of Brick Building Department
Building Permit Requirements

Air Conditioner:
- Electrical Technical Section completed by Homeowner or licensed electrician
- Plumbing Technical Section (condensate drain) completed
- Brochure for unit
- Building Technical Section to be completed if new ductwork is to be installed

Boiler (for hot water baseboard or radiant heat):
- Plumbing Technical Section completed
- Electrical Technical Section completed (switch)
- Gas pipe sketch (Length of the run, size of the pipe and BTUs of everything on the line) or fuel oil line sketch
- Brochure for boiler
- Building Technical Section for a new chimney or chimney certification if existing (direct vent does not require building technical section to be completed
- If installing a new unit and you are in a Flood Zone; a copy of the flood elevation is required. If it is a direct replacement, you do not need elevation certificate

Demo:
- Building Technical Section completed
- Shut off letters from utility companies if demolishing dwelling, not for interior demo
- Complete Debris form

Furnace (warm air heat):
- Electrical Technical Section (switch) completed
- Plumbing Technical Section (gas pipe or fuel oil line sketch) completed
- Building Technical Section completed if ductwork or a new chimney is being installed or a chimney certification if the chimney is existing
- Fire Technical Section completed

Alteration:
- Building Technical Section completed
- Two copies of the existing and proposed floor plan include detail of construction to be done (sheetrock, insulation, window size, etc.) and use of rooms
- Copy of contract with contractor may be requested to establish cost of work

Bulkhead/Docks:
- Complete Engineering application
- Complete Building Technical Section
- Submit copy of State and Army Corps permit
- Two surveys showing bulkhead and or dock and 2 cross section detail signed by Contractor

Decks:
- Complete Zoning application
- Provide 2 TRUE SIZE surveys of the property with the deck drawn to SCALE showing the measurements, location and setbacks of the deck
- Complete Engineering application
- Completed Building Technical Section
- Two (2) sets of plans showing how the deck will be constructed from the footing to the rail (See deck planning guide)

Fences:
- Complete Zoning application
- Provide 2 TRUE SIZE surveys indicating with X the location of the fence, height and type (stockade, picket, etc) of proposed fence
- Complete Engineering application
- Complete Building Technical Section

Fireplace (gas):
- Complete Fire Technical Section
- Complete Plumbing Technical Section
- Gas Pipe Diagram (length of the run, BTUs, size of the pipe)
- Complete Building Technical Section (if it is cut into the wall or has a vent)
- Brochure for fireplace

Fireplace (wood):
- Complete Building Technical Section
- Provide cross section of foundation, hearth, and throat (masonry chimney)
- Complete Fire Technical Section
- Complete a Zoning application if building a masonry chimney (provide 2 surveys showing setbacks, locations and dimensions)
- Complete a Engineering application (masonry chimney)

Township of Brick Building Department
Building Permit Requirements (cont'd)

Gas Conversion:
- Complete Plumbing Technical Section
- Provide a Gas Pipe Diagram (length of the run, BTUs, size of the pipe)
- Complete Fire Technical Section
- Electrical Technical Section (shut off switch)
- Complete Building Technical Section (ductwork, chimney)
- Brochures for Furnace and/or Fireplace
- Flood Elevation Certificate if property is located in Flood Zone

Hot Water Heater:
- Completed Plumbing Technical Section
- Complete Electric Technical Section (for new Electric Hot Water Heater only)
- If this is a new Hot Water heater, provide a Gas Pipe Diagram (length of the run, BTUs, size of the pipe)

Pools:
- Complete Zoning Application
- Provide 2 TRUE SIZE surveys indicating (to scale) location, dimensions and setbacks of the pool and Engineering requirements per Ordinance 354-2F-02
- Complete Engineering application
- Complete Building Technical Section
- Complete Electrical Technical Section.
- Submit 2 Engineered sealed plans for an in-ground pool
- A signed and notarized pool certification (fence must meet pool code)
- Above-Ground Pools - same as above however, a brochure is required NOT sealed plans

Roofing/Siding:
- Complete Building Technical Section
- Debris Form if tearing off existing roof/siding
- Only D225 or D3462 shingles are acceptable - 6 nails each
- No plan review required, permit can be issued immediately

Sheds:
- Complete Zoning application
- Provide 2 TRUE SIZE surveys of the property with the shed drawn to SCALE showing the measurements, location and setbacks of the shed
- Complete Engineering application
- Complete Building Technical Section
- Submit 2 detailed plans on the construction of the shed. If shed is pre-fab, submit brochure. All sheds must be anchored.
- If shed is under 100 sqft omit building technical section

Tank Installation:
- Complete Building Technical Section
- Complete Plumbing Technical Section (fuel lines)
- Fuel line sketch show size of lines
- Complete Zoning application if installing above ground tank
- Submit 2 surveys showing the dimensions, setbacks and location of AG tank

Tank Removal (oil):
- Complete Fire Technical Section
- Tank Abatement form

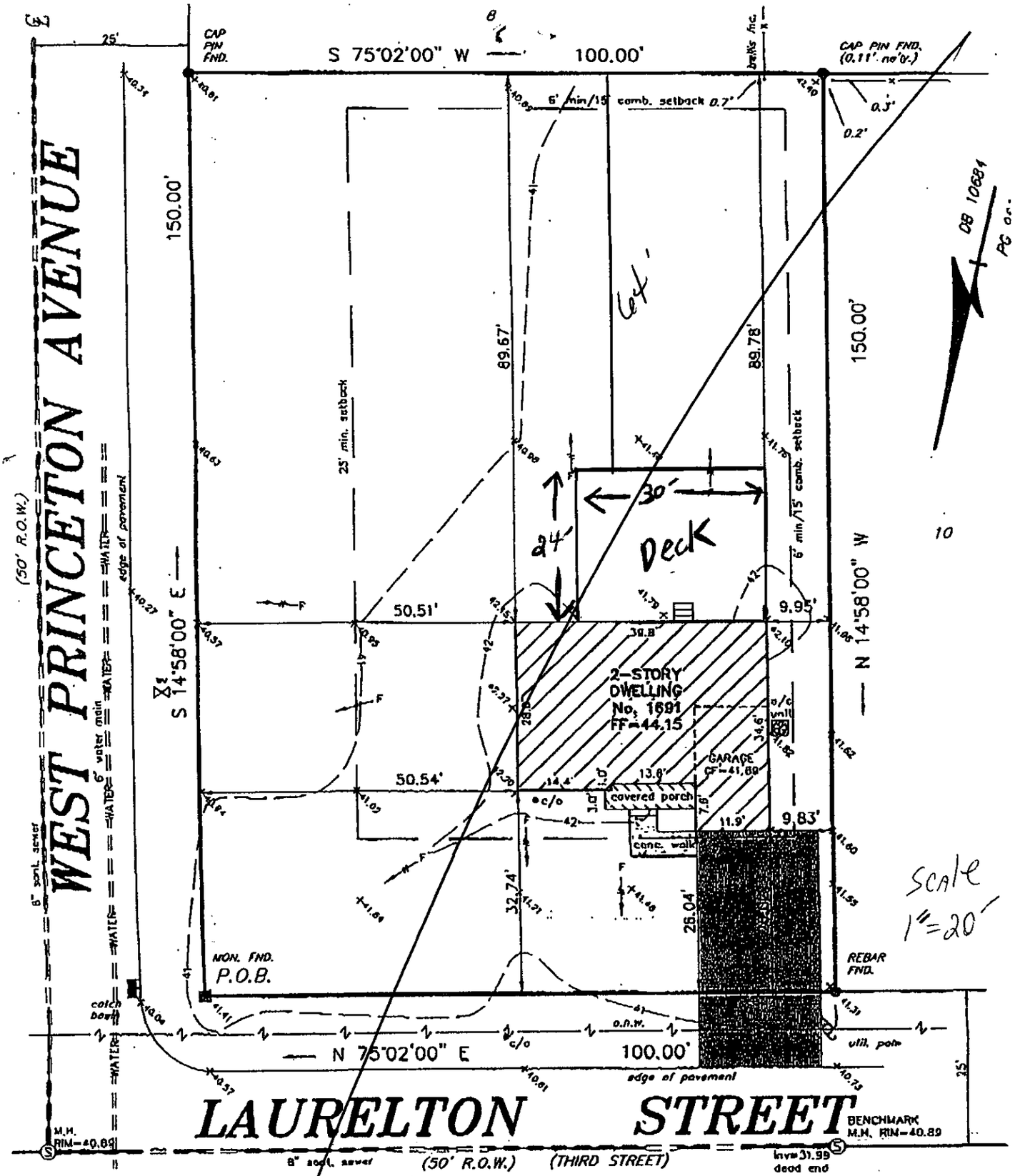
Sprinkler System (Irrigation):
- Complete Plumbing Technical Section (number of heads, backflow preventer)If work is being done by someone other than homeowner the tech must completed by a licensed plumber for the backflow preventer
- If an Auxiliary Meter is being installed an application must be obtained from the BTMUA before applying.

Windows/Doors:
- A direct replacement (same size and style) does not require permit

Windows (protrude from the face of the house):
- Complete Zoning application
- Submit 2 surveys showing dimensions, setbacks and location of window
- Complete Engineering application
- Complete Building Technical Section.
- Provide 2 sets of plans

*****Additions and Single Family Dwellings please see checklist*****

ALL PERMIT JACKETS MUST BE SIGNED AND COMPLETED THOROUGHLY



DEED DESCRIPTION:
BEING KNOWN AND DESIGNATED AS LOTS 12, 13, 14 & 15 IN BLOCK 6 AS SHOWN ON A MAP ENTITLED, "LAURELTON PARK, LAURELTON—OCEAN COUNTY, NEW JERSEY", WHICH SAID MAP WAS DULY FILED IN THE OCEAN COUNTY CLERK'S OFFICE ON SEPT. 25, 1929 AS MAP NO. A-328.

NOTES:
1. ALSO KNOWN AS LOT 12 IN BLOCK 844 AS SHOWN ON THE OFFICIAL TAX MAP OF THE TOWNSHIP OF BRICK, COUNTY OF OCEAN AND STATE OF NEW JERSEY.
2. THE PREMISES ARE COMMONLY KNOWN AS 1691 1691 LAURELTON STREET, BRICK, NEW JERSEY.
3. CORNER MARKERS LOCATED, VERIFIED AND STAKED.
4. UNDERGROUND UTILITIES NOT LOCATED BY THIS SURVEY. ANY/ALL CONTRACTORS SHALL VERIFY THE LOCATION OF ALL UNDERGROUND UTILITIES PRIOR TO THE START OF ANY CONSTRUCTION WORK ON THIS SITE. THE TELEPHONE NUMBER TO MARK OUT UTILITIES IN FIELD IS "NEW JERSEY ONE CALL" 1-800-272-1000.
5. ELEVATIONS BASED ON 1929 N.G.V.D.
6. NO WETLANDS EXIST ON SUBJECT PROPERTY
7. SUBJECT PROPERTY IS NOT IN A FLOOD ZONE.

THIS SURVEY IS CERTIFIED TO HAVE BEEN PERFORMED IN ACCORDANCE WITH THE STANDARDS OF LAND SURVEYING PROFESSION AS SET FORTH IN N.J.A.C. 13:40-5.1 AND AS PRACTICED IN THE STATE OF NEW JERSEY.
IT IS ONLY CERTIFIED TO:
- JEFFREY R. GABRIEL AND COURTNEY A. GRUSS
- AMBOY NATIONAL BANK, IT'S SUCCESSORS AND/OR ASSIGNS
- SCOTT TITLE SERVICES, L.L.C
- STEWART TITLE GUARANTY COMPANY (ST-11143-04)
- KEITH N. ARCOMANO, ESQUIRE

7/6/05

RWP
Ronald W. Post Surveying, Inc.
Professional Land Surveying and Planning
1792 Hinds Road, Toms River, NJ, 08753
Phone:(732)-255-9050 Fax:(732)-255-9196

Ronald W. Post
Professional Land Surveyor N.J. Lic. 28594
Professional Planner N.J. Lic. 02980
Certificate of Authorization No. 24GA27969400
9-9-2004 date

SURVEY OF PROPERTY
FINAL AS BUILT
for: KRISTI SHAY CONSTRUCTION INC.
1693 WEST PRINCETON AVENUE
LOT 12 BLOCK 844
BRICK TOWNSHIP
OCEAN COUNTY, NEW JERSEY

Scale	Dr.	Chk	Date	Job No.
1"=20'	W.G.P.	RWP	9-9-2004	040336