BLOCK 836 LOT 18-19-20-21 QUALIFICATION CODE C21-83 ADDRESS (SITE) 1679 W. Princeton Av. PERMIT NO. 02-00061

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: 1679 West Princeton Av., Brick, NJ
2. Name of Owner in Fee: Edward Serafin Tel. ([redacted])
   Address Same (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Offshore Pools Tel. (732) 477-7023
   Address 260 Brick Blvd. Brick, NJ 08723
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 22-3096954 FAX: (732) 477-4473
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person in Charge of Work Michael Newman
   Tel. (732) 477-7023 FAX (732) 477-4473

16 POOL / Existing fence

V. FEE SUMMARY (for office use only)

			Update 1-A	Update
1.	Building	$	100 44	16
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		16	
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other		30 [illegible]	
13.	TOTAL	$		16

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	
2.	Height of Structure ft.	
3.	Area — Largest Floor 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

		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									
4.	☒ Alteration	19,565.00				1-2-202	FM			
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☐ Electrical					1202	TO	1/22/02		
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition		GMB	12/28/01		12/28/01				
	TOTAL COSTS	19,565.00								

OPTIONAL (for office use only)

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: Single Family
3. Change in Use Group, Indicate Former:

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

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

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

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

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

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

Signature _____ Date _____

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

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

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

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

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

(✓) Check if contractor.

Agent Name OFFSHORE POOLS

Address 260 BRICK BLVD.
BRICK, NJ 08723

Telephone ( ) TEL. #732-477-7073

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.									
☐									
☐									

IMPORTANT
A.H.B.T. - EXEMPT

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.				

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 01/22/2002
Control #
Permit # 02-00614A
Permit Issued 01/11/2002

UCC NEW JERSEY

PERMIT UPDATE!

IDENTIFICATION Block 836 Lot 18 Qual

Work Site Location 1679 WEST PRINCETON AVE
I G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
BRICK, NJ
Telephone [redacted]

Contractor ERIC G. LAPOR ELECTRICAL CONT.
Address 451 NORTHAMPTON BLVD.
TOMS RIVER, NJ 08757-
Telephone (732)505-1686
Lic. No. or Bldrs. Reg. No.
Federal Exp. No. 22-3339961

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
UPDATE ELECTRIC AND CHANGE OF CONTRACTOR

Esticated Cost of Work $ 1,000

PAYMENTS (Office Use Only)

Building	0
Electrical	75
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	1
Cert. of Occupancy	0
Other	
Total	76
Check No.	
Cash	X
Collected By	MJR

01/22/02 8:56AM 000000W9134
XX02 SERV.002

W0061	
ELECTRIC	$75.00
DCA	$1.00
XXXTOTAL	$76.00
CASH	$76.00
CHANGE	$0.00

01/22/02 8:56AM 000000W9134 XX02
XXXTOTAL $76.00

01/22/2002
Construction Official Date

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

C7

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/20/2001
Date Issued 1/11/02
Control # ~~C21-83~~
Permit # 02-0061

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

Block 836 Lot 18 Qual
Work Site Location 1679 WEST PRINCETON AVE
I G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
BRICK NJ
Tele [redacted] Fax (609)660-9395
Contractor ROBERT J MCLAUGHLIN ELEC CON
Address 12 8TH STRET
BARNEGAT, NJ 08005-
Tele.(609)660-0306
[redacted] No. or Bldrs. Reg. No. 10990A
[redacted] al Emp. No. 22-3451834

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Estimated Cost of Electrical Work $ 450

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 1/2/02
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 12/20/01
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure-Approval	Initial
Rough			
Temp Serv			
Const Serv			
TCO			
Other BND		12/20/01	
Service			
Final	4/18/02	7/24/02	

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

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
1		Receptacles	
1		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
2		TOTAL NUMBERS	35
1		Pool Permit/with UW Lights	9
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 # _____
Collected by: _____

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 44
DCA Training Fee	$ 0

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

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 01/22/2002
Date Issued 01/22/2002
Control #
Permit # 02-0061+A

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

Block 836 Lot 18 Qual
Work Site Location 1679 WEST PRINCETON AVE
I G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
BRICK NJ
Tele [redacted] Fax ( )
Contractor ERIC D. LARON ELECTRICAL CONT.
Address 451 NORTHAMPTON BLVD.
TOMS RIVER, NJ 08757-
Tele.(732)505-1636
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3339901

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 1/22/02
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

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

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
2		Lighting Fixtures	
1		Receptacles	
2		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
5		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
1	150	AMP Subpanels	40
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 75
DCA Training Fee $ 1

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

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 02/22/2002
Date Issued 01/22/2002
Control #
Permit # 02-0061+A

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

Block 636 Lot 18 Qual
Work Site Location 1679 WEST PRINCETON AVE
I G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
BRICK, NJ
Tele. [redacted] Fax ( )
Contractor ERIC G. LARON ELECTRICAL CONT.
Address 451 NORTHAMPTON BLVD.
TOMS RIVER, NJ 08757-
Tele.(732)505-1636
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3339901

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 1 2 0 2
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

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

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
2		Lighting Fixtures	
1		Receptacles	
2		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
5		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
1	150	AMP Subpanels	40
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 75
DCA Training Fee $ 1

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

CSE

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 02/22/2002
Date Issued 01/22/2002
Control #
Permit # 02-00618-A

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

Block 836 Lot 18 Qual
Work Site Location 1629 WEST PRINCETON AVE
I G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
BRICK, NJ
Tele [redacted] Fax ( )
Contractor ERIC G. LARON ELECTRICAL CONT.
Address 451 NORTHAMPTON BLVD.
TOMS RIVER, NJ 08757-
Tele.(732)505-1626
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3339901

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 1 2 0 2
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

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and as 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)
2		Lighting Fixtures	
1		Receptacles	
2		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
5		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
1	150	AMP Subpanels	40
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 75
DCA Training Fee $ 1

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

Update 02-0061
Change of Contractor

Township of Brick

Counter Form
(PLEASE PRINT)

Site Location: 1679 West Princeton AVE
Block: 836 Lot: 18
Owner's Name: Ed Serafin
Owner's Mailing Address: (SAME as Above)

Phon [redacted] -

BUILDING

Contractor:
Address:

Phone#:
Lis #
Federal Emp # or SSN

Technical Data

Description of Work:

Type of Work

___New Building ___Siding
___Addition ___Fence
___Alteration ___Pool
___Roofing ___Demolition
___Asbestos Abatement ___Sign _____sq ft

Building Characteristics

Use Group Present:_____ Proposed:_____
No of Stories:
Height of Structure:
Area of the largest floor:
Area of New Building:
Volume of Structure:
Total Land Disturbed:

Cost of Alteration:

Cost of New Building:

Total Cost of Building Work:

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

Signature:

Please Print Name

ELECTRICAL

Contractor: Eric G. Larson Jr Elect Contractor
Address: 451 Northampton Blvd
T.R N.J. 08757
Phone#: 732 505-1636
Lis #: 113503
Federal Emp # or SSN 22-3395001

Technical Data

Item	Quantity
Lighting Fixtures	2 (pool Lights)
Receptacles	1
Switches	2
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	
Pool	1
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	1 150 AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	1 Polaris Pump

Estimated Cost of Electrical Work: 1,000

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

Signature:

Please Print Name Eric G. Larson Jr.

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Fixtures — Quantity

Water Closets_____
Urinals/Bidets_____
Bath Tub_____
Lavatory_____
Shower_____
Floor Drain_____
Sink_____
Dishwasher_____
Drinking Fountain_____
Washing Machine_____
Hose Bib_____
Gas Piping_____
Fuel Oil Piping_____
Water Heater_____
Steam Boiler_____
Hot Water Boiler_____
Sewer Pump_____
Interceptor/Separator_____
Backflow Preventer_____
Greasetrap_____
Water Cooled A/C or Refrig. Unit_____
Septic Tank Closure_____
Sewer Service Connection_____
Water Service Connection_____
Active Solar System_____
Auxiliary Meter_____
Sprinkler Heads_____
Sump Pump_____
Other:

Estimated Cost of Plumbing Work_____

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

Signature:_____

Please Print Name:_____

CONTRACTOR'S SEAL

FIRE

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Description of Work:

Heating Type: ____Gas ____Oil ___Electric ____Solar
Heating System is ___New ___Existing
Location of Furnace/Boiler:_____

Water Supply Source_____
Method of Valve Supervision_____
Local Alarm Supervision_____
Central Supervision:_____
Proprietary Supervision:_____

Flammable Storage Tanks _____capacity_____fuel
Combustible Storage Tanks_____capacity_____fuel
LPG Storage Tanks_____capacity_____fuel

Item — Quantity

Wet Sprinkler Heads_____
Dry Sprinkler Heads_____
Total_____

Smoke Detectors_____
Heat Detectors_____
Total_____

Stand Pipes_____
Kitchen Hood Exhaust System_____

Pre-Engineered Systems:
CO2 Suppression_____
Halon Suppression_____
Foam Suppression_____
Dry Chemical_____
Wet Chemical_____

Gas/ Oil Fired Appliances:
Number of gas/oil fired appliances_____

Furnace_____
Gas/Wood Fireplace_____
Gas Logs_____
Wood Burning Stove_____
Other:

Estimated Cost of Fire Work_____

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

Signature:_____

Print Name:_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 01/11/2002
Control #
Permit # 02-0061

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 836 Lot 18 Qual

Work Site Location 1679 WEST PRINCETON AVE
I G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
BRICK, NJ
Telephone [redacted]

Contractor OFFSHORE POOLS
Address 1930 HOOPER AVE
TOMS RIVER, NJ 08753-
Telephone (732)477-7073
Lic. No. or Bldrs. Reg. No.
Federal Exp. No. 22-3096954

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
18X40 TRUE L SHAPED I G POOL

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 $ 20,015

Construction Official

01/11/2002
Date

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

PAYMENTS (Office Use Only)

Building	100
Electrical	44
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	16
Cert. of Occupancy	0
Other	
Total	160
Check No.	6946
Cash	
Collected By	ERP

01/11/02 10:40AM 0000004003
#07 SERV.007

#0020061	
BUILDING	$100.00
ELECTRIC	$44.00
DCA	$16.00
ZPA	$15.00
EPA	$15.00
CHECK	$190.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/20/2001
Date Issued 1/11/02
Control # ~~C21-83~~
Permit # 02-0061

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

Block 836 Lot 18 Qual
Work Site Location 1679 WEST PRINCETON AVE
I G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
BRICK NJ
Tele. [redacted]
Contractor ROBERT J MCLAUGHLIN ELEC CON
Address 12 8TH STREET
BARNEGAT, NJ 08005-
Tele.(609)660-0306
Lic. No. or Bldrs. Reg. No. 10990A
Federal Emp. No. 22-3451834

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 450

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 1/2/02
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)
0		Lighting Fixtures	
1		Receptacles	
1		Switches	
0		Detectors	
0		Light Poles	
[redacted]			
0		Communication Outlets	
0		Alarm Devices/P.A.C.O. Panel	
3		TOTAL NUMBERS	33
1		Pool Permit/with UW Lights	9
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 #
Collected by:

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	44
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 12/20/2001
Date Issued 1/11/02
Control # C21-83
Permit # 02-0067

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

Block 836 Lot 18 Qual
Work Site Location 1679 WEST PRINCETON AVE
1 G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
[redacted]
Tele
Contractor ROBERT J MCLAUGHLIN ELEC CON
Address 12 8TH STREET
BARNEGAT, NJ 08005-
Tele.(609)660-0306
Lic. No. or Bldrs. Reg. No. 10990A
Federal Emp. No. 22-3451834

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 450

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 1-2-02
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)
0		Lighting Fixtures	
1		Receptacles	
1		Switches	
0		Detectors	
0		Light Poles	
0		Motors	
0		Communication	
0		Alarm Devices	
2		TOTAL NUMBERS	15
1		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

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 44
DCA Training Fee	$ 6

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 12/20/2001
Date Issued 1/11/02
Control # C21-83
Permit # 02-0061

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

Block 836 Lot 18 Qual
Work Site Location 1679 WEST PRINCETON AVE
I G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
BRICK, NJ
Tele. [redacted]
Contractor OFFSHORE POOLS
Address 1830 HOOPER AVE
TOMS RIVER, NJ 08753-
Tele.(732)477-7073 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3096954

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

18X40 TRUE L SHAPED I G POOL

Note: Fence must meet Code

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[ ] No Plans Req.
[X] All 6/12/2002 [illegible]
[ ] 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				
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] 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
[X] Other I G POOL	100
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 19,565
3. Total (1+2)$ 19,565

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 100
DCA Training Fee	$ 16

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 12/20/2001
Date Issued 1/11/02
Control # C21-83
Permit # 05-0001

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

Block 236 Lot 18 Qual
Work Site Location 1679 WEST PRINCETON AVE
I G POOL EXISTING FENCE
Owner in Fee SERAFIN, EDWARD
Address SAME
BRICK, NJ
Tele [redacted]
Contractor OFFSHORE POOLS
Address 1930 HOOPER AVE
TOMS RIVER, NJ 08753-
Tele.(732)477-7073 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3096954

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

18X40 TRUE L SHAPED I G POOL

Note: Fence must meet Code

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	1/2/2002	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

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

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

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 19,565
3. Total (1+2)$ 19,565

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] 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
[X] Other I G POOL	100
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 100
DCA Training Fee	$ 16

Paid [ ] Check #
Collected by:

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

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

DEPARTMENT OF ADMINISTRATION & FINANCE

DIVISION OF INSPECTIONS
Joseph Curiazza
Construction Official
(732) 262-1030
Fax: (732) 262-8954
http://www.twp.brick.nj.us

HOMEOWNER'S POOL CERTIFICATION

BLOCK 836 LOT 18-19-20-21

In accordance with the NJAC 5:23-2.23, no pool shall be used in whole or in part until a Certificate of Approval has been issued by the Construction Official.

I certify that I am the owner of the above referenced pool being built. I further certify that the pool will not be used in whole or in part until a permanent fence is installed and a Certificate of Approval has been issued by the Construction Official.

I have read the fence requirements listed below and understand them.

Owner's Signature

Edward Serafin
Print Name

Sworn and subscribed to before me on this 13th day of Dec. 2001.

Notary Signature

Fence Requirements:

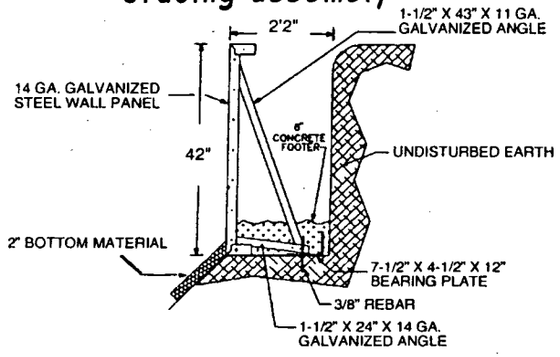
Barrier shall be a minimum of 48 inches above ground level. Openings shall not be greater that 4 inches for vertical balusters with horizontal concentrated load of 200 pounds applied on a 1-square foot area at any point of fence. Maximum mesh size for chain link fencing shall not exceed 1¼ inches square. Where the barrier is composed of horizontal and vertical members and the distance between the tops of the horizontal members is less than 45 inches, the horizontal members shall be located on the swimming pool side of the fence. Spacing between vertical members shall not exceed 1¾ inches in width.

Pedestrian gates shall open away from the pool, be self-closing and self-latching. If the self-latching device is located less that 54 inches from the bottom of the gate, then the release mechanism shall be located on the pool side of the gate at least 3 inches below the top of the gate. The gate and the barrier shall not have an opening greater that ½ inch within 18 inches of the release mechanism.

CARDINAL SYSTEMS

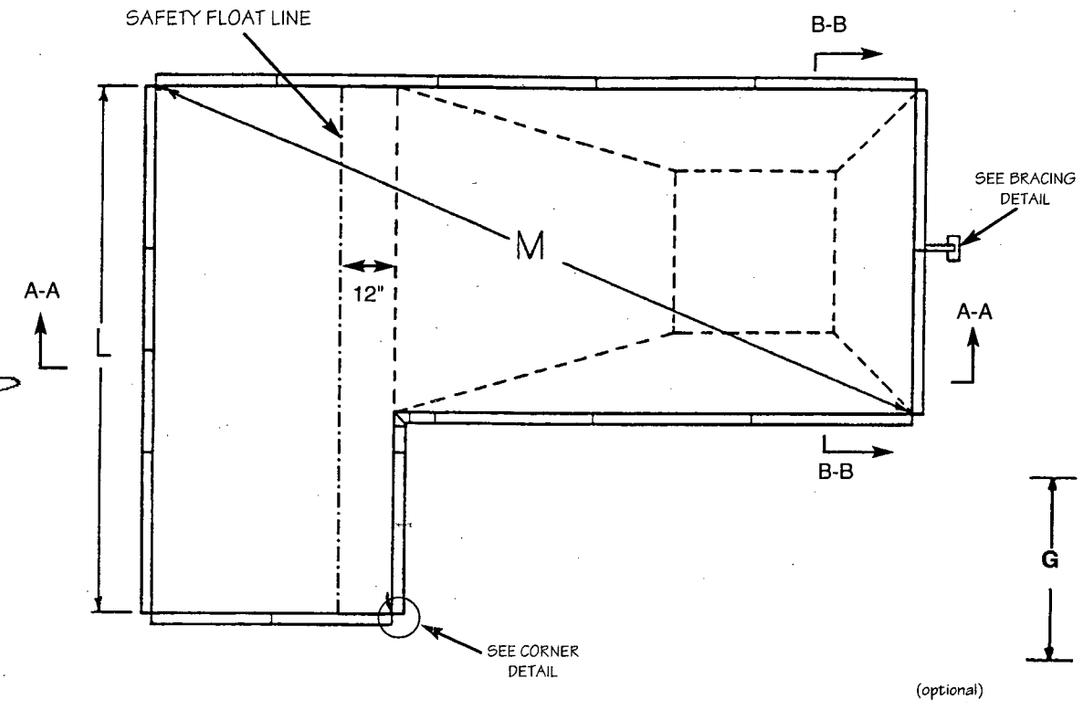
STANDARD TRUE ELL POOL

bracing assembly

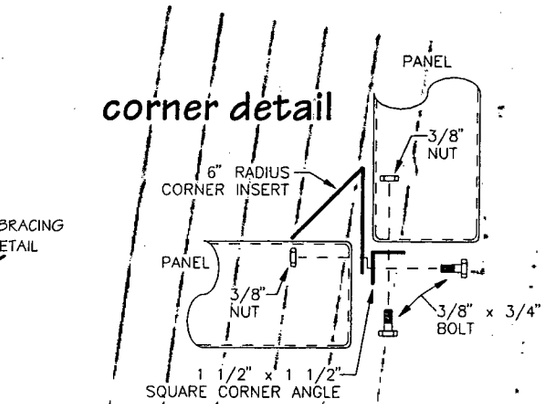


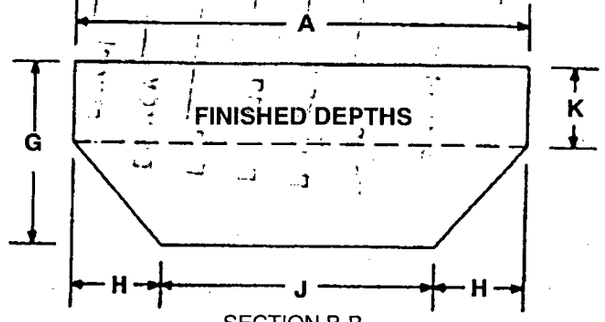
NOTES

1) SWIMMING POOL TO MEET DESIGN SAFETY REQUIREMENTS OF ANSI/NSPI-5 FOR RESIDENTIAL SWIMMING POOLS TYPE II DIVING
2) POUR MINIMUM OF 4" CONCRETE AROUND ENTIRE PERIMETER.
3) FINISH POOL BOTTOM WITH A MINIMUM OF 2" COMPACTED SAND OR A VERMICULITE & CEMENT MIX
4) BRACING IS REQUIRED AT EVERY PANEL JOINT ON STRAIGHT WALLS.

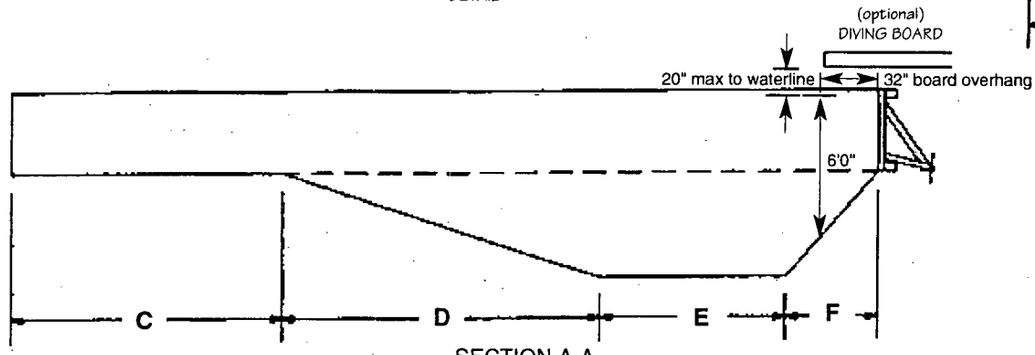


corner detail





SECTION B-B



SECTION A-A

WARNING!!

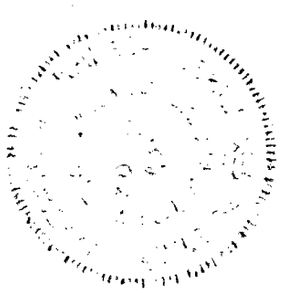
DO NOT DIVE IN SHALLOW END.
USE DIVING EQUIPMENT SPECIFICALLY DESIGNATED FOR & INSTALLED IN ACCORDANCE WITH NATIONAL SWIMMING POOL INSTITUTE & B.O.C.A. RESIDENTIAL STANDARDS.

R.C. BURDICK, P.E.
N.J.P.E. No. 30929
1023 Ocean Rd., Pt. Pleasant, N.J. 08742
Tel. (732) 892-5050, Fax (732) 892-5888

POOL SIZE	A	B	C	D	E	F	G	H	J	K	L	M	N
16' X 38' X 26' X 12'	16'	38'	12'	14'	8'	4'	8'	4'	8'	3'6"	26'	41'2-3/4"	28'7-5/8"
18' X 40' X 30' X 12'	18'	40'	12'	14'	10'	4'	8'	4'	10'	3'6"	30'	43'10-3/8"	32'3-3/4"

BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		01-02-02	FM
Fire			
Energy			
Electrical			



TOWNSHIP OF BRICK
ZONING PERMIT

Approved: December 21, 2001 **No. 1.1794**

Block: 836 **Lot:** 18-21 **Zone:** R-7.5

Property Address: 1679 West Princeton Avenue

Applicant: Michael Newman; Offshore Pools

Property Owner: Edward Serafin

Existing Use: Single-family residential.

Proposed Use: Same.

Proposed Construction: In-ground swimming pool, 18' x 40'.

Conditions: The pool must be set back at least five (5) feet from the side and rear property lines.

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
Municipal Planner

Sean Kinnevy
Zoning Officer

RECEIVED
DEC 21 2001
ZONING

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 836 Lot 18, 19, 20, 21 Qualifier _____

PROPERTY ADDRESS 1679 W. PRINCETON AV, BRICK

PERSONAL NAME OF APPLICANT Michael Newman

BUSINESS NAME OF APPLICANT Offshore Pools

PROPERTY OWNER Edward Serafin

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) _____
☐ Addition
☐ Alteration
☐ Porch or deck (state heights) _____
☐ Shed (state height) _____
☐ Fence (state type & height) _____
☒ Swimming Pool ☒ in-ground ☐ above-ground
☐ Other (please describe) _____

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

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

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

Signature of applicant _____ Date 12-20-01

Reviewed by Zoning Office _____ Date 12/21/01 (X) Approved ( ) Denied

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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

egin C. Scarpelli, Mayor

nship Council:
Helen Fayad—President
Martin J. Anton
Victor Cantilla
Gregory S. Kavanagh
Mary Lou Pawner
Kathy M. Russell
Frederick J. Underwood, Sr.

Department of Engineering

Office of the Municipal Engineer
(732) 262-1036
Fax: (732) 262-6654
brickengineer@comcast.com/brick
http://www.twp.brick.nj.us

Date: 12-20-01

Township Engineer
401 Chambers Bridge Road
Brick, NJ 08723

RE: Block: 836 Lot: 18-19-20-21

Progerty Address: 1679 West

I, Edward Serafin (name) of 1679 West Princeton Ave, (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.

Applicant's Signature

The following shall be submitted with this request:

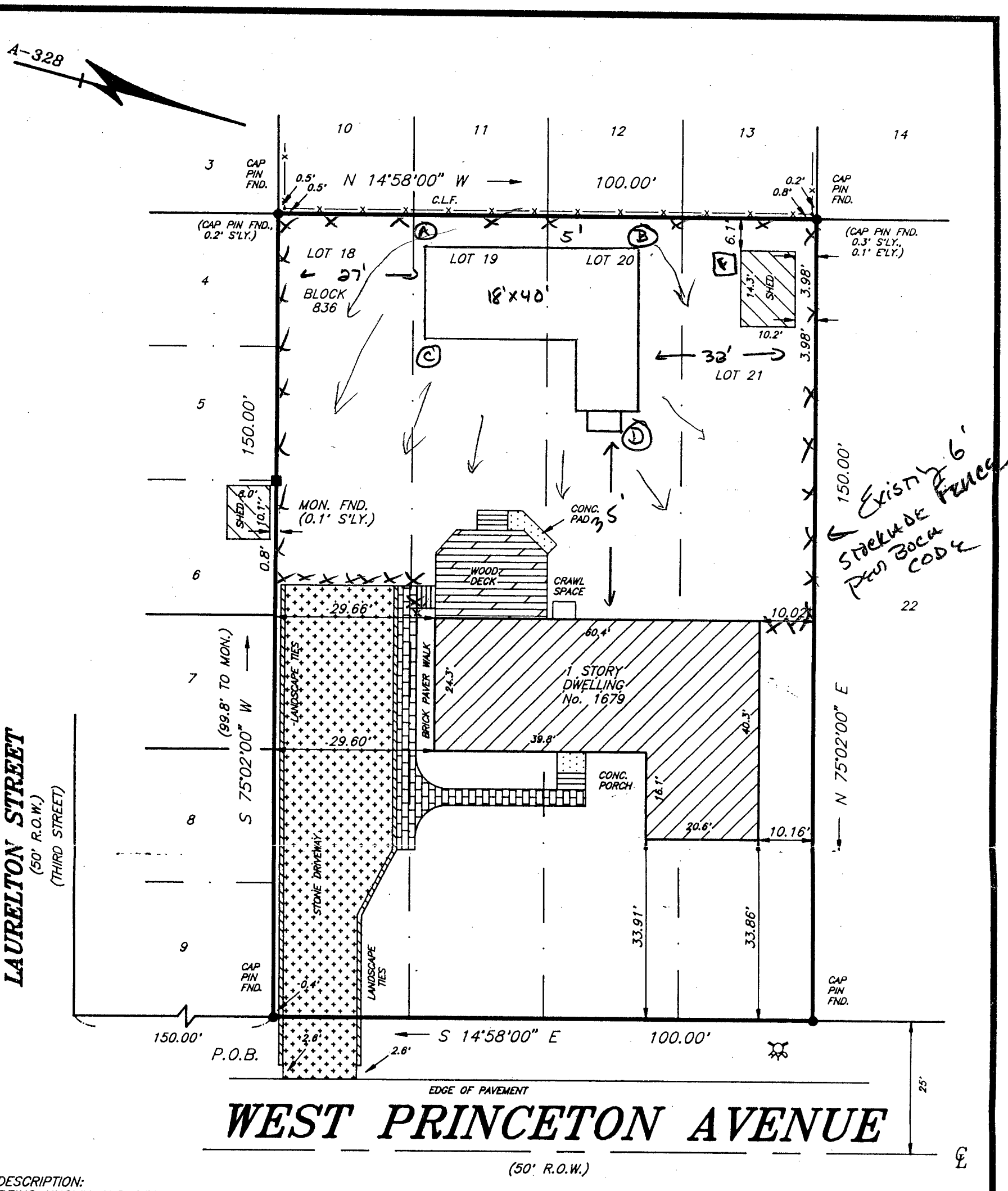
1. Submit survey locating existing dwelling and proposed addition. Dimensions of addition should be included.
2. Proof that the progerty is not located in a Flood Hazard Area.

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

12/28/01

Signed



DESCRIPTION:
BEING KNOWN AND DESIGNATED AS LOTS 18, 19, 20 AND 21 IN BLOCK 9 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 LOTS 18, 19, 20 AND 21 IN BLOCK 836 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 1679 WEST PRINCETON AVENUE, BRICK, NEW JERSEY.
3. CORNER MARKERS OMITTED AS SPECIFIED BY WRITTEN CONTRACTUAL ARRANGEMENT.
4. UNDERGROUND UTILITIES NOT LOCATED BY THIS SURVEY.

THIS SURVEY CERTIFIED ONLY TO:
- EDWARD J. SERAFIN JR. AND DEBRA J. SERAFIN, HUSBAND AND WIFE
- THE SUMMIT TRUST COMPANY, ITS SUCCESSORS AND/OR ASSIGNS
- LAFAYETTE GENERAL TITLE AGENCY, INC. (LG– 6489)
- STEPHEN E. SMITH, ESQUIRE

This survey subject to any easement of record and other pertinent facts which an accurate title search might disclose. Environmentally sensitive areas, if any, are not located by this survey. No attempt was made to determine if any portion of this property is claimed by the State of New Jersey as tidelands. No liability is assumed by the certifying Surveyor for the use of this survey by any party not shown on the certifications hereon or for the use of survey with survey affidavit.

RONALD W. POST SURVEYING INC.
R.W.P.
1792 HINDS ROAD
P.O. BOX 112
TOMS RIVER, N.J. 08754–0112
TELEPHONE: 908–255–9050
TELEFAX: 908–255–9196

Ronald W. Post
Prof. Land Surveyor – N.J. Lic. 28534
Prof. Planner N.J. Lic. 02940
Ronald W. Post 10-15-92
Date

SURVEY OF PROPERTY

LOTS 18, 19, 20 & 21 BLOCK 836

BRICK TOWNSHIP

OCEAN COUNTY, NEW JERSEY

SCALE	DR.	CH.	DATE	JOB NO.
1"=20'	S.E.M.	R.W.P.	10–15–92	92–8307

260 Brick Boulevard • Brick, New Jersey 08723
Tel. (732) 477-7073 Fax (732) 477-4473

Township Engineer:

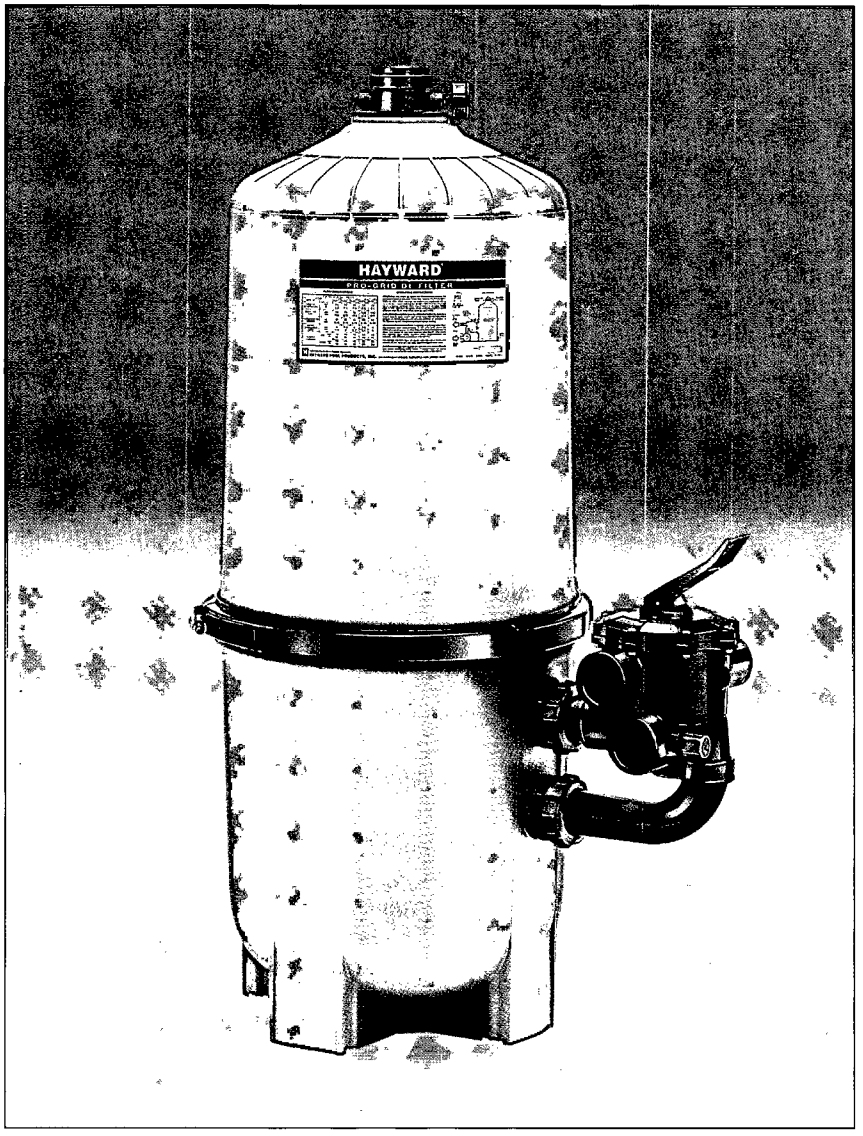
Elevation pts. for proposed pool located at 1679 West Princeton Av,

Block 836 Lot 18-19-20-21 **Pt. A** is AT ~~above~~ existing grade. **Pt. B** is AT above existing grade. **Pt. C** is 2" above existing grade. **Pt. D** is 3" above existing Grade. OFFSHORE POOLS is to grade pool area to maintain positive drainage for existing dwelling and neighboring properties. If you have any questions please call.

Thank you
Michael Newman, Pres.

Pro-Grid™

VERTICAL GRID D.E. FILTERS



■ *DE7220 Pro-Grid™ 72 ft.² Vertical Grid D.E. filter with optional SP0740DE Selecta-Flo™ 4-position control valve.* ***Large capacity 72 ft.² filter, made of durable PermaGlassXL™, can be used in both commercial and large residential applications for years of non-corrosive, trouble-free performance.***

Featuring
PermaGlassXL™
Filter Tank Material

Hayward Pro-Grid™ is a high-performance filter series that provides superior water clarity, efficient flow and large cleaning capacity for pools of all types and sizes.

Pro-Grid filter tanks are now molded from new and stronger PermaGlass XL,™ an improved glass reinforced copolymer, providing the ultimate in strength, durability, and long life. Pro-Grid filters also combine high technology features with a "service-ease" design for dependable operation and low maintenance.

Totally Hayward

Pro-Grid filters are also available with the unique SP0740DE Selecta-Flo control valve, the only filter control valve designed specifically for D.E. filters.

For the quality conscious pool owner, Pro-Grid filters are an unparalleled filtration value.

HAYWARD®
America's #1 Pool Water Systems

Pro-Grid™ Vertical Grid D.E. Filters

10 Year Warranty On Filter Tank

Innovative Automatic Air Relief purges any trapped air automatically during filter operation.

Screenless Internal Air Relief provides continuous air venting and eliminates clogging.

Improved High-Strength Filter Tank molded from new and stronger PermaGlass XL™ material for extra durability for dependable, corrosion-free performance.

High Impact Grid Elements designed for up-flow filtration and top-down backwashing for maximum efficiency.

Self Aligned Tank Top and Bottom make access to servicing grid elements fast and simple.

Heavy-Duty Tamper-Proof One-Piece Clamp securely fastens tank top and bottom together and allows quick access to all internal components without disturbing piping or connections.

Marked Short Element and Manifold provide clear guidelines for re-assembly of grid elements during cleaning.

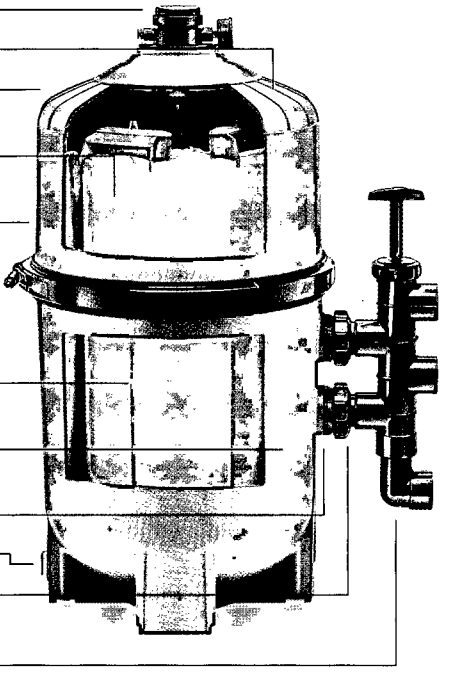
Inlet Diffuser Elbow distributes flow of incoming unfiltered water upward and evenly to all filter elements.

Noryl® Bulkhead Fittings for extra strength and heat resistance.

Full Size 1½" Integral Drain provides fast, 100% clean out and easier flushing of tank.

Union Locknuts make disassembly and reassembly of filter from piping fast and easy.

Plumbing Versatility. Select from a wide variety of valve options for customized control of your filtration system, including Hayward's 2", 2-position slide valve.



Specifications – Pro-Grid Vertical Grid D.E. Filters

FILTER TYPE:	Vertical Grid Diatomite: 24, 36, 48, 60, 72 ft^2 (2.2, 3.3, 4.4, 5.5, 6.6 m^2).
FILTER TANK:	Injection molded PermaGlass XL™
FILTER ELEMENTS:	Monofilament polypropylene cover fitted over 8 curved, high-impact grids
CONTROL VALVE:	1½" or 2" 6-Position Vari-Flo,™ 2" 4-Position Selecta-Flo,™ 2" 2-Position slide valve. May also be plumbed singularly or in series with quick-connect union couplings (less valve).
PERFORMANCE RANGE:	½ to 3 HP (30 to 120 GPM)
DIMENSIONS:	DE2420 – 32" H x 23" W (81 cm x 58 cm) DE3620 – 34" H x 23" W (87 cm x 58 cm) DE4820 – 40" H x 23" W (102 cm x 58 cm) DE6020 – 46" H x 23" W (107 cm x 58 cm) DE7220 – 52" H x 23" W (132 cm x 58 cm)

NSF®

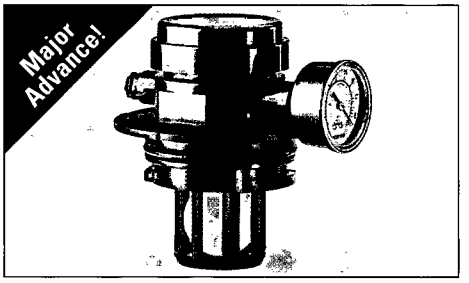
Above dimensions are for filter only. Overall width with slide valve is 30" (76 cm); overall width with either 4- or 6-position multiport valve is 33" (83 cm)

Performance Data

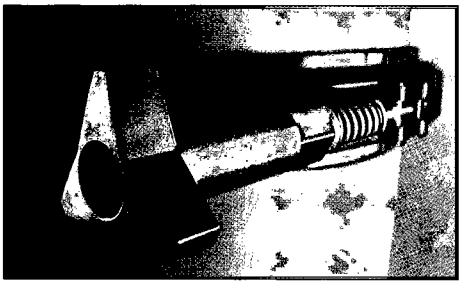
Model Number	Effective Filtration Area		Design Flow Rate*		Turnover Gallons		Turnover Kilo Liters	
	ft^2	m^2	GPM	LPM	8 Hr.	10 Hr.	8 Hr.	10 Hr.
DE2420	24	2.2	48	182	23,040	28,800	87	109
DE3620	36	3.3	72	272	34,560	43,200	131	164
DE4820	48	4.4	96	363	46,080	57,600	174	218
DE6020	60	5.5	120	454	57,600	72,000	218	273
DE7220	72	6.6	144	545	69,120	86,400	261	327

*Determined by pump size and piping system hydraulics. 2" piping is recommended for flow rates of 90 GPM (341 LPM) or more. Flow rates above 120 GPM (454 LPM) are not usually required for residential pools.

NSF is a registered trademark of the National Sanitation Foundation



Fully Automatic Air Relief with double seal eliminates the need to manually vent filter tank after system start-up and prevents backdraining during pump shut-down.



Removable Clamp Tool makes tightening and loosening of clamp quick and simple, providing easy access to filter internals.

HAYWARD®

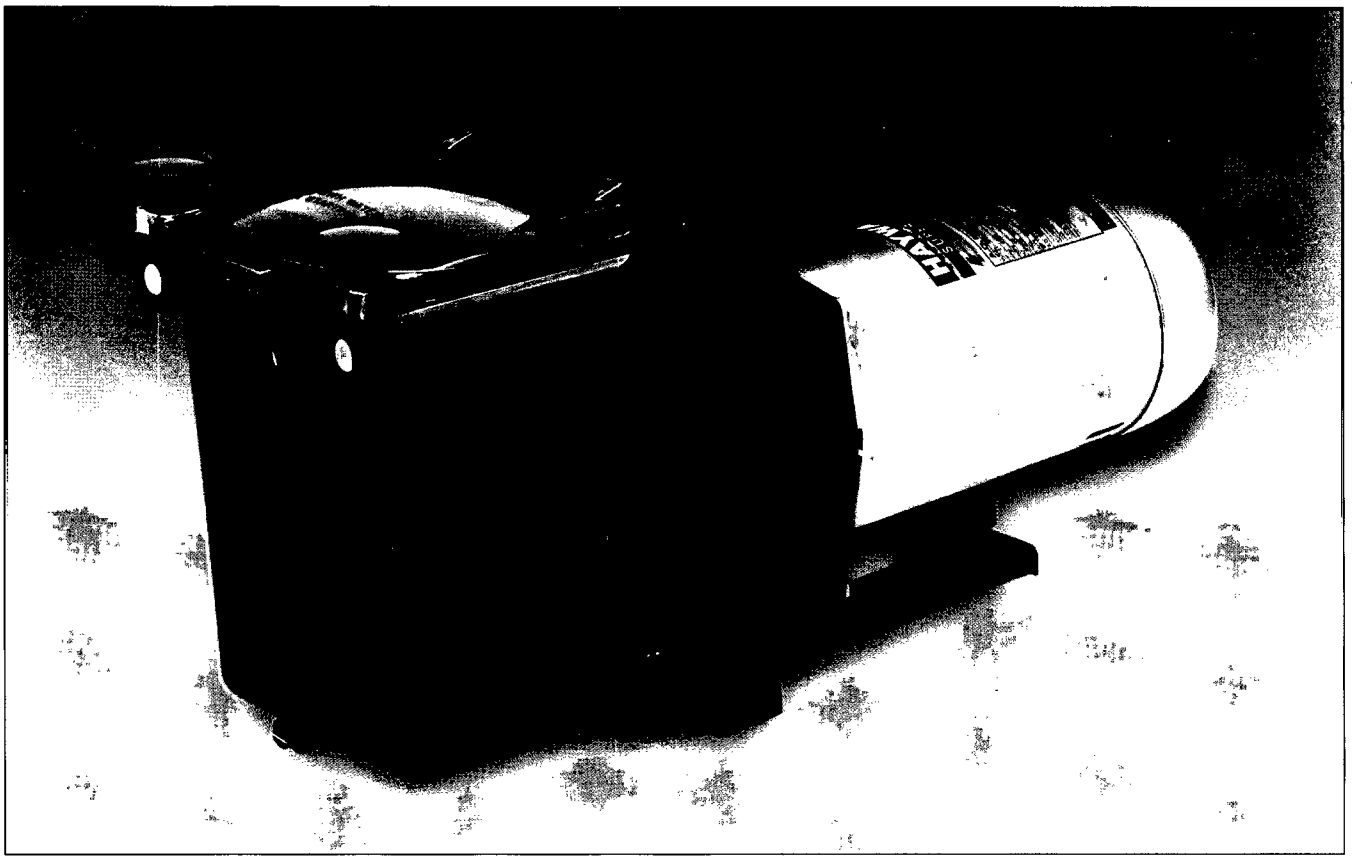
America's #1 Pool Water Systems

1-888-HAYWARD

www.haywardnet.com

Super Pump®

HIGH-PERFORMANCE PUMP SERIES



■ *Super Pump: high performance and quiet operation.*

Hayward's Super Pump is a series of large capacity, high technology pumps that blend cost-efficient design with durable corrosion-proof construction.

Designed for pools of all types and sizes, Super Pump features a large "see-thru" strainer cover, super-size debris basket and exclusive "service-ease" design for extra convenience.

Totally Hayward™

For super performance and safe, quiet operation, Super Pump sets a new standard of excellence and value. And you know its quality throughout because its made by Hayward — the first choice of pool professionals.

HAYWARD®

America's #1 Pool Water Systems

Super Pump® High Performance Pump Series

Exclusive, Swing-Aside Hand Knobs make strainer cover removal easy. No tools required...no loose parts... no clamps.

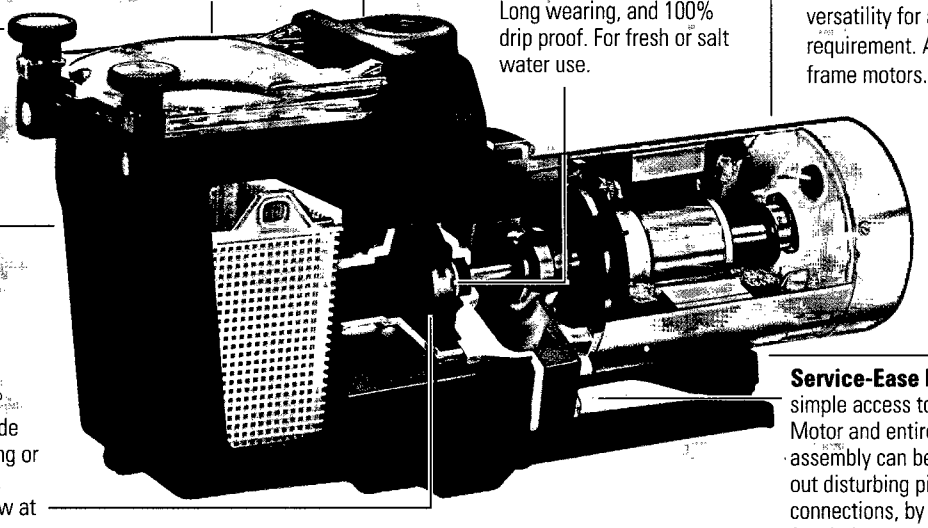
Lexan® See-Thru Strainer Cover lets you see when basket needs cleaning and eliminates guesswork. Special self-adjusting seal assures dependable sealing.

All Components Molded of Corrosion-Proof PermaGlassXL™ for extra durability and long life.

Heavy-Duty, High-Performance Motor with air-flow ventilation for quieter, cooler operation.

Heat Resistant, Industrial Size Ceramic Seal. Long wearing, and 100% drip proof. For fresh or salt water use.

Mounting Base provides stable, stress-free support, plus versatility for any installation requirement. Adapts 48 and 56 frame motors.

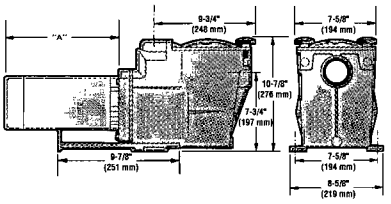


Super-Size Housing has extra air handling capacity to assure rapid priming.

Totally Balanced, Corrosion-Proof Noryl® Impeller has smooth, wide openings to prevent fouling or clogging. Energy-efficient design produces more flow at equivalent horsepower.

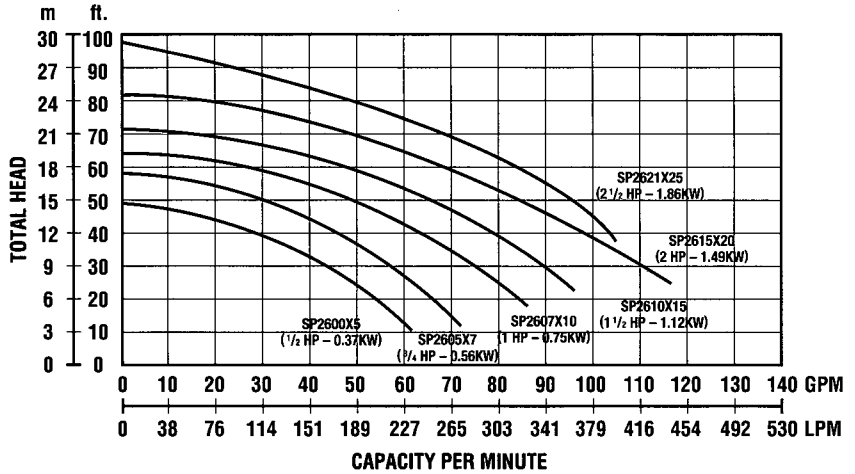
Service-Ease Design gives simple access to all internal parts. Motor and entire drive group assembly can be removed, without disturbing pipe or mounting connections, by disengaging just four bolts.

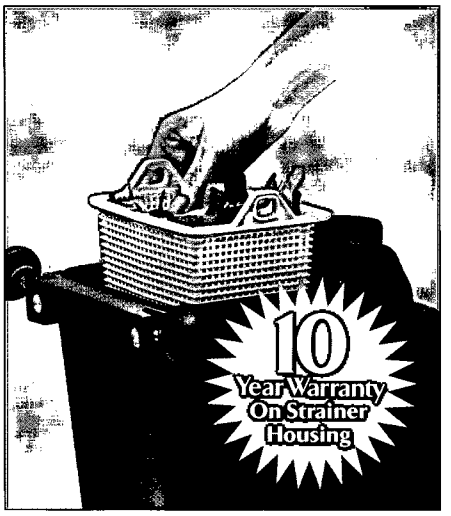
Overall Dimensions



Model	Motor Power HP	Motor Power KW	Pipe Size inch	Dimension "A" inch	Dimension "A" mm
SP2600X5	1/2	0.37	1 1/2"	11 1/4"	286
SP2605X7	3/4	0.56	1 1/2"	11 5/8"	295
SP2607X10	1	0.75	1 1/2"	11 7/8"	302
SP2610X15	1 1/2	1.12	1 1/2"	12 1/4"	311
SP2615X20	2	1.49	2"	13 1/4"	337
SP2621X25	2 1/2	1.86	2"	13 3/4"	349

Super Pumps are also available with dual speed motors.





SUPER-SIZE 110 CUBIC INCH BASKET has extra leaf-holding capacity and extends time between cleanings. Rigid construction with load-extender ribbing assures free flowing operation for heavy debris loads.

Super Pump® Series Pumps are listed by:

UL® NSF® CSA®

HAYWARD®

America's #1 Pool Water Systems

2693

1-888-HAYWARD

www.haywardnet.com

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: 1679 West Princeton Av. Brick, NJ
Block: 836 Lot: 19-19-20-21
Owner's Name: Edward Serafin
Owner's Mailing Address: 1679 West Princeton Av. Brick, NJ
Phon [redacted]

BUILDING

Contractor: Offshore Pools
Address: 260 Brick Blvd.
Brick, NJ 08723
Phone#: 732-477-7073
Lis #
Federal Emp # or SSN 22-3896954

Technical Data

Description of Work:
Inground pool -
18'x40' Free "L"

Type of Work

___ New Building	___ Siding
___ Addition	___ Fence
X Alteration	X Pool
___ Roofing	___ Demolition
___ Asbestos Abatement	___ Sign _____ sq ft

Building Characteristics

Use Group Present: Single Fam. Proposed: Single Fam.
No of Stories:
Height of Structure:
Area of the largest floor:
Area of New Building:
Volume of Structure:
Total Land Disturbed:

Cost of Alteration: 19,565.00

Cost of New Building:

Total Cost of Building Work: 19,565.00

Signature:
Please Print Name Mike Newman

ELECTRICAL

Contractor: Robt. J. McLaughlin
Address: 12 8th St.
Barnegat, NJ 08005
Phone#: 609-660-0306
Lis #: 10990
Federal Emp # or SSN 22-3457834

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	1
Switches	2
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	
Pool	1
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit -Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	1 2hp.
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: 450.00

Signature:
Please Print Name Robert J. McLaughlin

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Fixtures	Quantity
Water Closets	
Urinals/Bidets	
Bath Tub	
Lavatory	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bib	
Gas Piping	
Fuel Oil Piping	
Water Heater	
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Water Cooled A/C or Refrig. Unit	
Septic Tank Closure	
Sewer Service Connection	
Water Service Connection	
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	
Sump Pump	
Other:	

Estimated Cost of Plumbing Work_____

Signature:_____

Please Print Name:_____

CONTRACTOR'S SEAL

FIRE

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Description of Work:

Heating Type: ____Gas ____Oil ___Electric ____Solar
Heating System is ___New ___Existing
Location of Furnace/Boiler:_____

Water Supply Source_____
Method of Valve Supervision_____
Local Alarm Supervision_____
Central Supervision:_____
Proprietary Supervision:_____

Flammable Storage Tanks _____capacity_____fuel
Combustible Storage Tanks_____capacity_____fuel
LPG Storage Tanks_____capacity_____fuel

Item	Quantity
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust System	

Pre-Engineered Systems:
CO2 Suppression_____
Haloh Suppression_____
Foam Suppression_____
Dry Chemical_____
Wet Chemical_____

Gas/ Oil Fired Appliances:
Number of gas/oil fired appliances_____

Furnace_____
Gas/Wood Fireplace_____
Gas Logs_____
Wood Burning Stove_____
Other:

Estimated Cost of Fire Work_____

Signature:_____

Print Name:_____