

BLOCK B-20 LOT 6 QUALIFICATION CODE _____ ADDRESS (SITE) _____



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 1688 W-Princeton Ave.
2. Name of Owner in Fee: Ralph Stora Jr 1 [redacted]
Address 1688 W-Princeton Ave Brick 08724
street municipality zip code
3. Ownership in Fee: Public X Private _____
4. Principal Contractor: _____ Tel. (____) _____
Address H/O
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Employee No. _____ FAX: (____) _____
5. Architect or Engineer _____ Tel. (____) _____
Address _____
6. Responsible Person in Charge of Work Ralph Stora Jr
1 [redacted] FAX (____) _____

V. FEE SUMMARY (for office use only)

- | | | | | | |
|-----|-----------------------------------|----|-----|--|--|
| 1. | Building | \$ | 240 | | |
| 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 | | 25 | | |
| 10. | Subtotal | | | | |
| 11. | Cert. of Occupancy | | 35 | | |
| 12. | Other | | 30 | | |
| 13. | TOTAL | \$ | 330 | | |

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories One
2. Height of Structure 16 ft.
3. Area — Largest Floor 600 sq. ft.
4. New Building Area 600 sq. ft.
5. Volume of New Structure 600 cu. ft.
6. Construction Classification 2-LANE GARAGE
7. Total Land Area Disturbed 600 sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes
11. Max. Live Load no
12. Max. Occupancy Load _____

(office use only)

GARAGE DET

II. PROPOSED WORK

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

TOTAL COSTS

Est. Cost

OPTIONAL (for office use only)[illegible]

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No. of dwelling units:

Before Construction

After Construction

Net Gain or Loss

B. NON-RESIDENTIAL

- 1. State Specific Use:**

- 2. Use Group:**

3. Change in Use Group, Indicate Former:

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

12-19-03

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	Other
Building _____	Energy _____	
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. _____	_____	_____	_____

Constituent Contact Report

[illegible]

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 01/22/2004
Control #
Permit # 04-0032

IDENTIFICATION: Block 829

Project Site Location: 15501, PROSPECT RD
Owner: 15501, PROSPECT RD
Address: 15501, PROSPECT RD
Telephone: 15501, PROSPECT RD

Is there greater permission to perform the following work:
1. ELECTRICAL
2. ELEVATION SERVICE
3. ELEVATION SERVICE

REGISTRATION OF NEW
ELECTRICAL

NOTE: If construction does not commence within the 180 day period of issuance,
or if construction ceases for a period of 90 days, this permit is void.

Estimated Cost of Work: \$330,000
Construction Office

DATE: 01/22/2004

Project Site Location: 15501, PROSPECT RD
Owner: 15501, PROSPECT RD
Address: 15501, PROSPECT RD
Telephone: 15501, PROSPECT RD

Is there greater permission to perform the following work:
1. ELECTRICAL
2. ELEVATION SERVICE
3. ELEVATION SERVICE

REGISTRATION OF NEW
ELECTRICAL

NOTE: If construction does not commence within the 180 day period of issuance,
or if construction ceases for a period of 90 days, this permit is void.

Estimated Cost of Work: \$330,000
Construction Office

DATE: 01/22/2004

01/22/04 3:07PM 00000006511
**09 SERV.008

#040182 BUILDING \$240.00
DCA \$25.00
ZPA \$15.00
EPA \$15.00
C/D \$35.00
***TOTAL \$330.00
CHECK \$330.00
CHANGE \$0.00

PROJECT OFFICE USE ONLY
Building \$240.00
ELECTRICAL \$25.00
ELEVATION \$15.00
ELEVATION SERVICE \$15.00
ELEVATION SERVICE \$35.00
Other \$0.00
DCA \$25.00
EPA \$15.00
C/D \$35.00
Total \$330.00
Check \$330.00
Collected \$0.00

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 12/19/2003
Date Issued 1/28/04
Control # C83-06
Permit # 04-0182

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

Block 836 Lot 6 Qual
Work Site Location 1683 W. PRINCETON AVE
DET GARAGE

Owner in Fee STOLA, RALPH
Address SAME
BRICK, NJ 08724-

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

Contractor
Address
DET GARAGE

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☒ All	1-20-04	SM	Footings	2/6/04 JKG
☐ No Plans Req.			Foundation	2/19/04 JKG
☐ Footing			Slab	
☐ Foundation			Frame	
☐ Frame			BarrierFree	
☐ Other			Insulation	
Joint Plan Review Required:			Finishes	
☐ Elect			Energy	
☐ Plumb			Mechanical	
SUBCODE APPROVAL			TCO	
☐ CO			Other	
Date: 3-9-04			Final	
Approved By: SM			BarrierFree	

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	U
Constr. Class	Present	Proposed	
No. of Stories	1		
Height of Structure	16 Ft.		
Area Largest Floor	600 Sq. Ft.		
New Bldg. Area/All Floors	600 Sq. Ft.		
Volume of New Structure	9,600 Cu. Ft.		
Total Land Area Disturbed	0 Sq. Ft.		

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

DET GARAGE

TYPE OF WORK

☐ New Building	
☒ Addition	
☐ Alteration	
☐ Roofing	
☐ Siding	
☐ Fence	
☐ Sign	
☐ Pool	
☐ Asbestos Abatement Subchapter 8	
☐ Lead Haz. Abatement NJAC 5:17	
☐ Other	
☐ Demolition	

FEE (Office Use Only)

Paid ☐ Check #	Administrative Surcharge	\$
Collected by:	Minimum Fee	\$
	TOTAL FEE	\$
	DCA State Permit Fee	\$

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 12/19/2003
Date Issued 1/24/04
Control # C83-06
Permit # 04-0162

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

Block 836 Lot 6 Sublot Qual
Work Site Location 1683 W. PRINCETON AVE

DET GARAGE

Owner in Fee SIOIA, RALPH

Address SAHE

OWNER NJ 08721-

Telephone

Contractor

Address

Tele. () Fax ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. HO-

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[] No Plans Req. 1-9-04 SM

INSPECTIONS Type Failure Failure Approval Initial

[X] All Footing Foundation Slab Frame Barrierfree Insulation Finishes Energy Mechanical TCO Other Final Barrierfree

[] Foundation Slab Frame Barrierfree Insulation Finishes Energy Mechanical TCO Other Final Barrierfree

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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

DET GARAGE

TYPE OF WORK FEE (Office Use Only)

[] New Building \$

[X] Addition 240

[] Alteration \$

[] Roofing \$

[] Siding \$

[] Fence 0 Height (exceeds 6')

[] Sign 0 Sq. Ft. \$

[] Pool \$

[] Asbestos Abatement Subchapter 8 \$

[] Lead Haz. Abatement NJAC 5:17 \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Other \$

[] Demolition \$

[] Demolition \$

[] Demolition \$

[] Demolition \$

[] Demolition \$

[] Demolition \$

[] Demolition \$

[] Demolition \$

[] Demolition \$

[] Demolition \$

[] Demolition \$

Administrative Surcharge \$

Minimum Fee \$

TOTAL FEE \$

DCA State Permit Fee \$

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

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

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

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

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 12/19/2003
Date Issued 1/1/2004
Control # C83-08
Permit # 04-0162

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

Block 836 Lot 6 Qual
Work Site Location 1683 W. PRINCETON AVE
DET GARAGE

DET GARAGE

Owner in Fee STOLA, RALPH

Address SAME

BRICK, NJ 08724-

Telephone

Contractor

Address

Tele. () Fax ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. NO-

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Req.			Type	Failure
☒ All	1-9-04	SM	Foundation	Initial
☐ Footing			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			Barrierfree	
Joint Plan Review Required:			Insulation	
☐ Elect			Finishes	
☐ Plumb			Energy	
SUBCODE APPROVAL			Mechanical	
☐ CO			TCO	
☐ CC0			Other	
Date:			Final	
Approved By:			Barrierfree	

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	U	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed		1. New Bldg. \$ 5,000
No. of Stories	1			2. Alteration \$ 0
Height of Structure	16 Ft.			3. Total (1+2) \$ 5,000
Area Largest Floor	600 Sq. Ft.			
New Bldg. Area/All Floors	600 Sq. Ft.			Industrialized Building:
Volume of New Structure	9,600 Cu. Ft.			☐ State Approved
Total Land Area Disturbed	0 Sq. Ft.			☐ HUD

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

DET GARAGE

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	\$ 0
☒ Addition	\$ 240
☐ Alteration	\$ 0
☐ Roofing	\$ 0
☐ Siding	\$ 0
☐ Fence	\$ 0
☐ Sign	\$ 0
☐ Pool	\$ 0
☐ Asbestos Abatement Subchapter 8	\$ 0
☐ Lead Haz. Abatement NJAC 5:17	\$ 0
☐ Other	\$ 0
☐ Demolition	\$ 0

Paid ☐ Check #	Administrative Surcharge	\$ 0
Collected by:	Minimum Fee	\$ 0
	TOTAL FEE	\$ 240
	DCA State Permit Fee	\$ 25

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

**Township of Brick
Zoning Permit**

Approved: Tuesday, December 23, 2003 **Number:** 2079

Block 836 **Lot** 6 **Zone:** R-7.5

Property Address: 1688 West Princeton Avenue

Applicant: Ralph Stoia, Jr.

Property Owner: Ralph Stoia, Jr.

Existing Use: Single Family Residential

Proposed Use: Single Family Residential

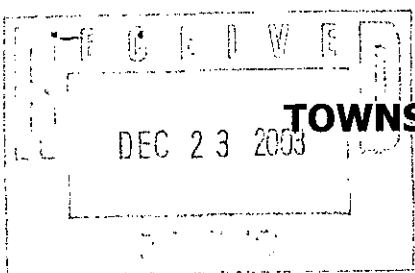
Proposed Construction: One story two car garage 20' x 30', 16' high.

Conditions: The garage must be set back at least 25 feet from the front property lines, at least 5 feet from the side property line and at least 5 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.

~~XXXXXXXXXXXXXXXXXXXX~~
~~XXXXXXXXXXXXXXXXXXXX~~


Sean Kinnevy
Zoning Officer



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 6 QUALIFIER _____
PROPERTY ADDRESS 1688 W Princeton Ave
PERSONAL NAME OF APPLICANT Ralph Stora Jr
BUSINESS NAME OF APPLICANT NONE
MAILING ADDRESS OF APPLICANT 1688 W Princeton Ave Brick 08224
PROPERTY OWNER'S FULL NAME Ralph Stora Jr

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 16' 2-CAR GAR
☐ Alteration
☐ Porch or deck - Height _____
☐ Shed - Height _____
☐ Fence - Type _____ Height _____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) _____

CHECKLIST

- ☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways

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

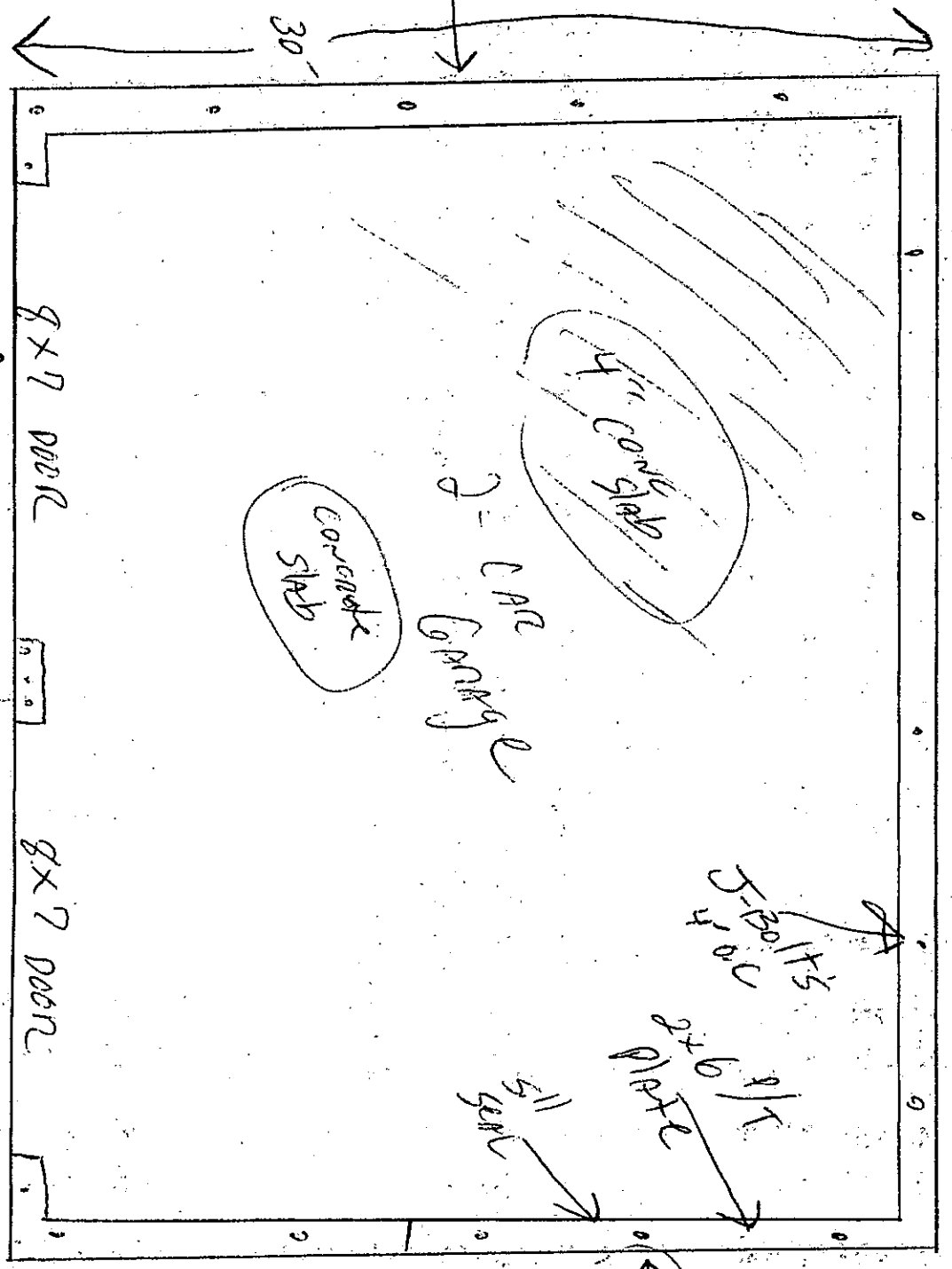
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

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 Ralph Stora Jr Date 12-19-03

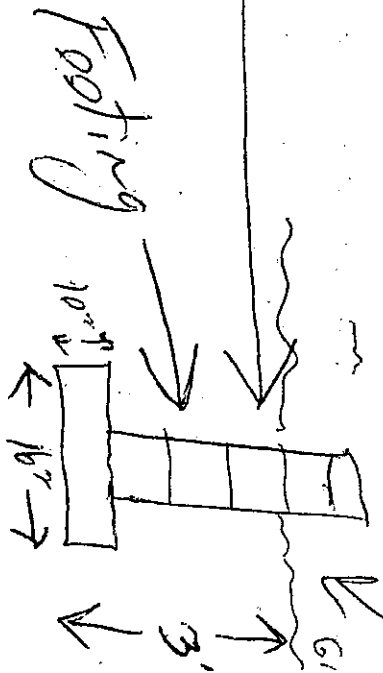
Reviewed by Zoning Office _____ Date 12/23/03 Approved () Denied

15' set Back From side

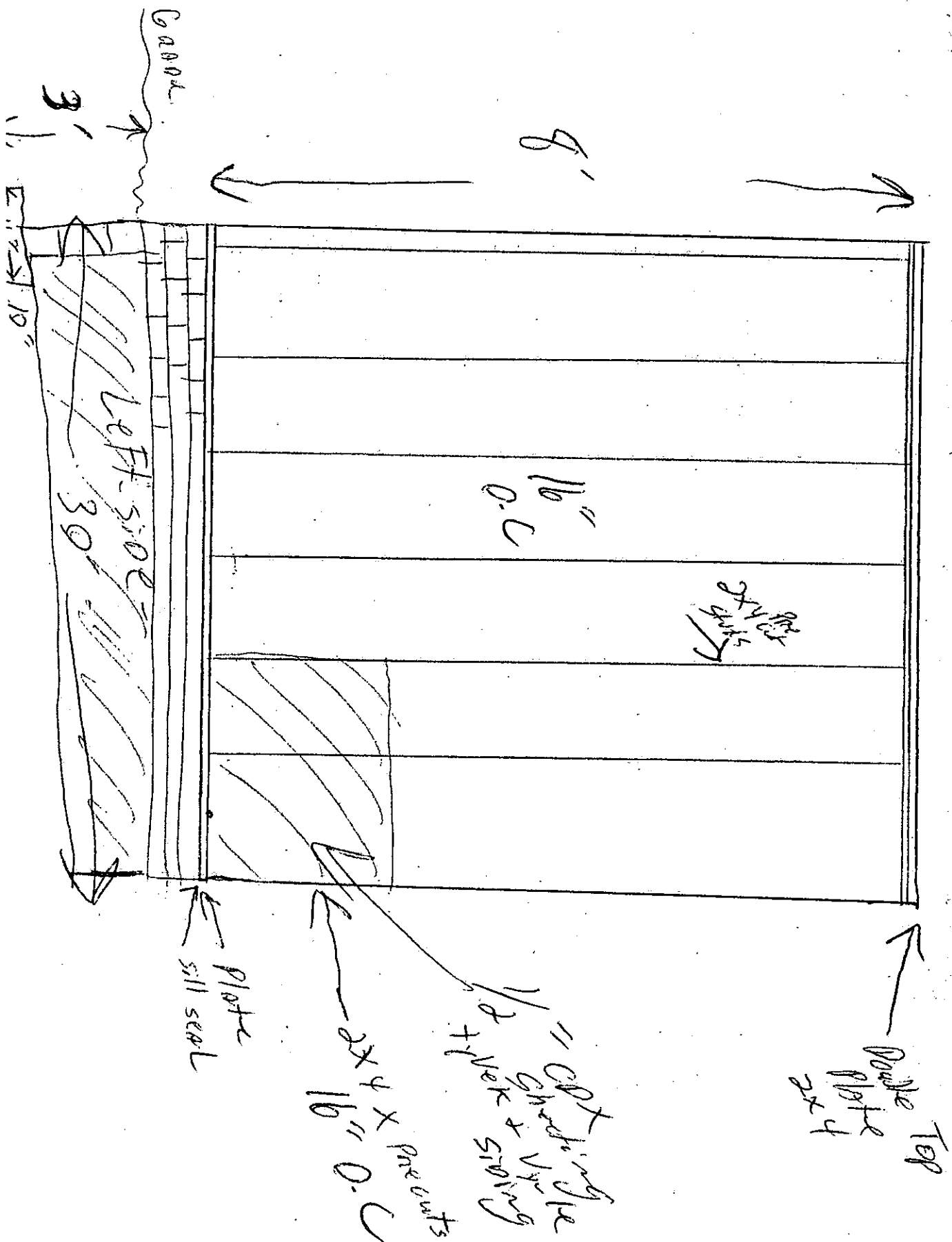


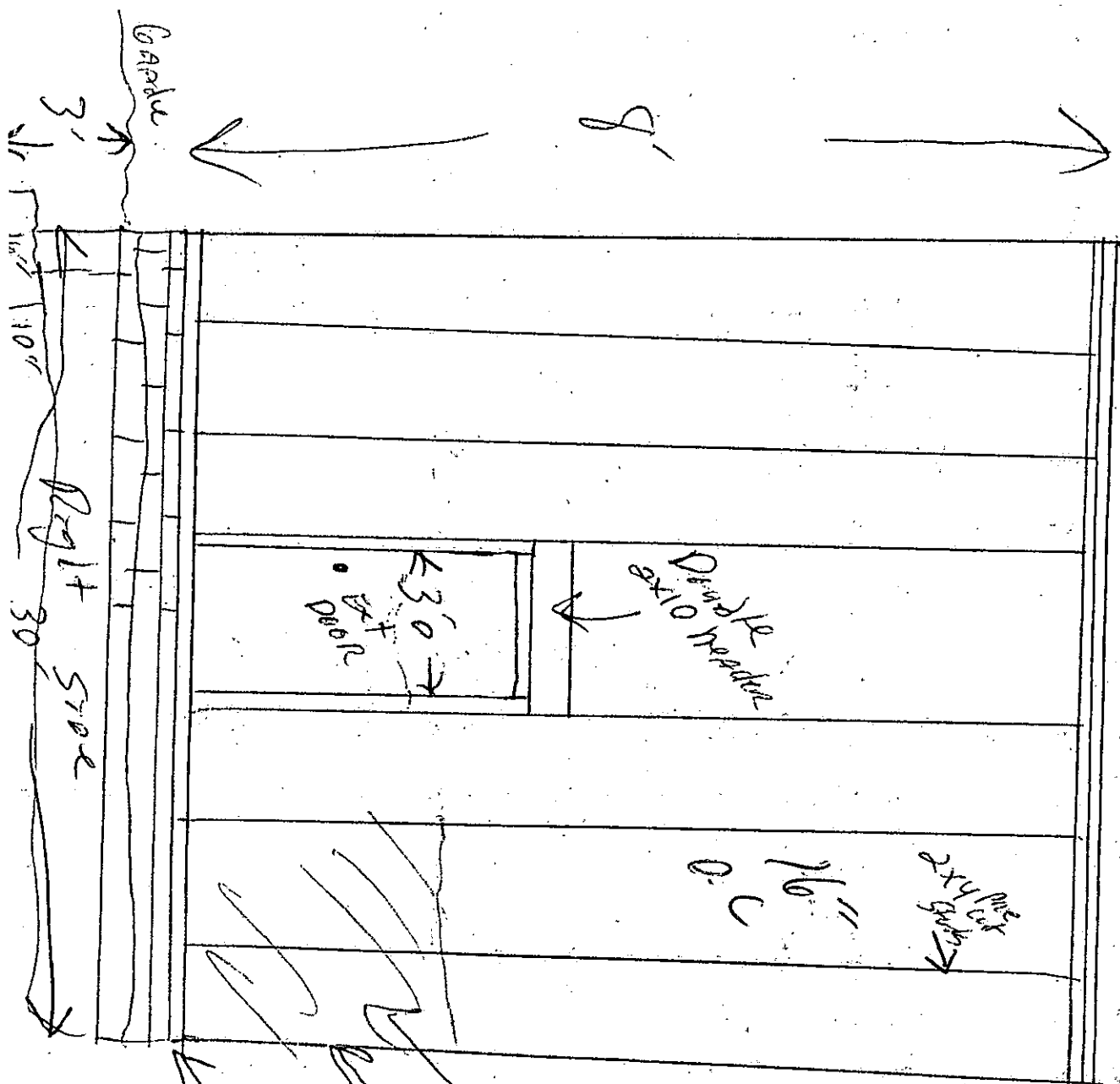
30' set Back From street

20'



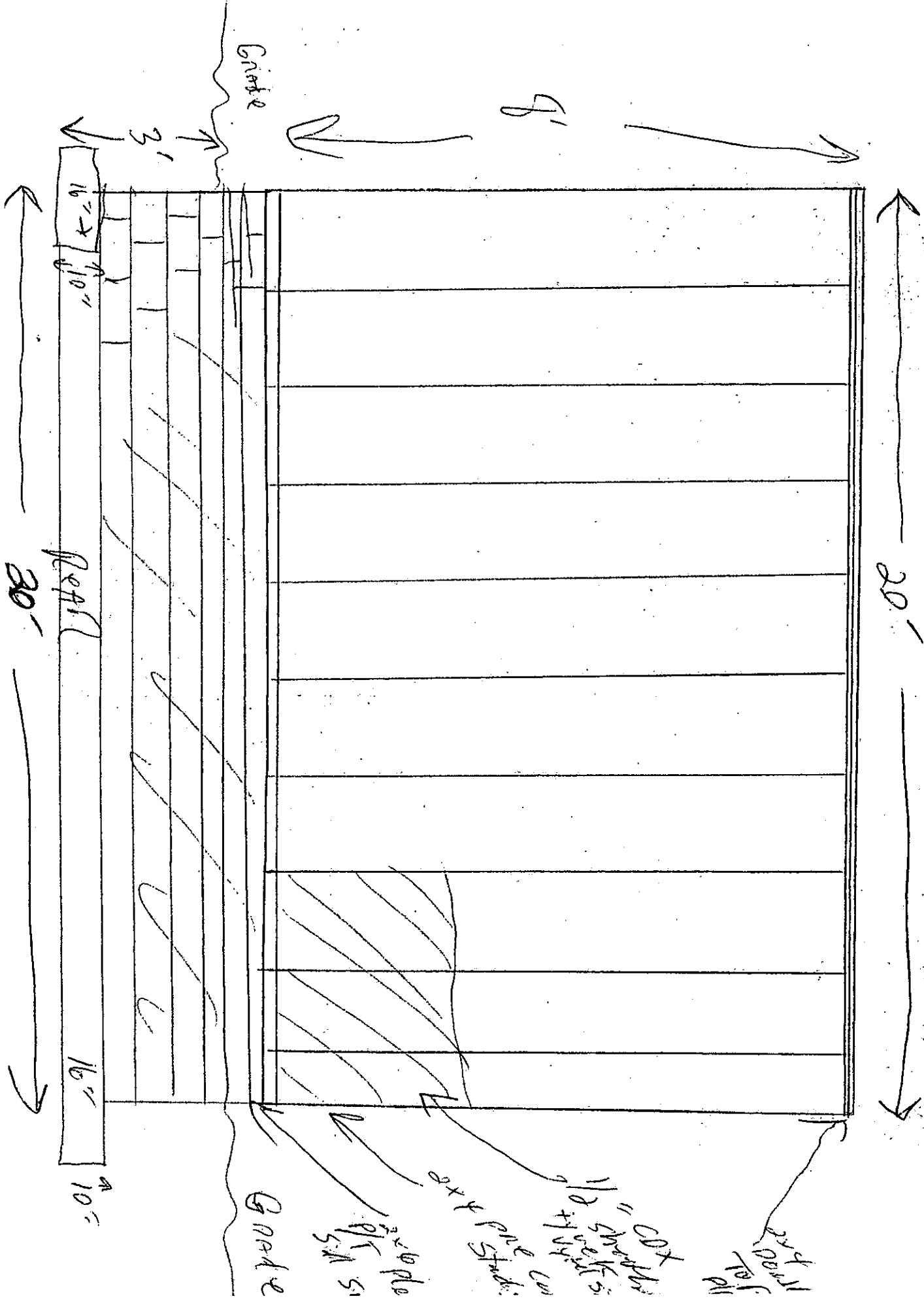
20' set Back From house





Back & Siding
Double plate 2x4
2x6 1/2 plate
sill seat
1/2" C.O.T. cut
2x4 16" O.C.
2x6 1/2 plate
sill seat

	Brick Township		
Plan Review	Class	Date	By
Zoning			
Plumbing			
Building			
Fire			
Electrical			



1/2" CDX Sheathing

30lb Black Paper

40 year
timberline
Dimensional

2x12 ridge

2x10 rafters

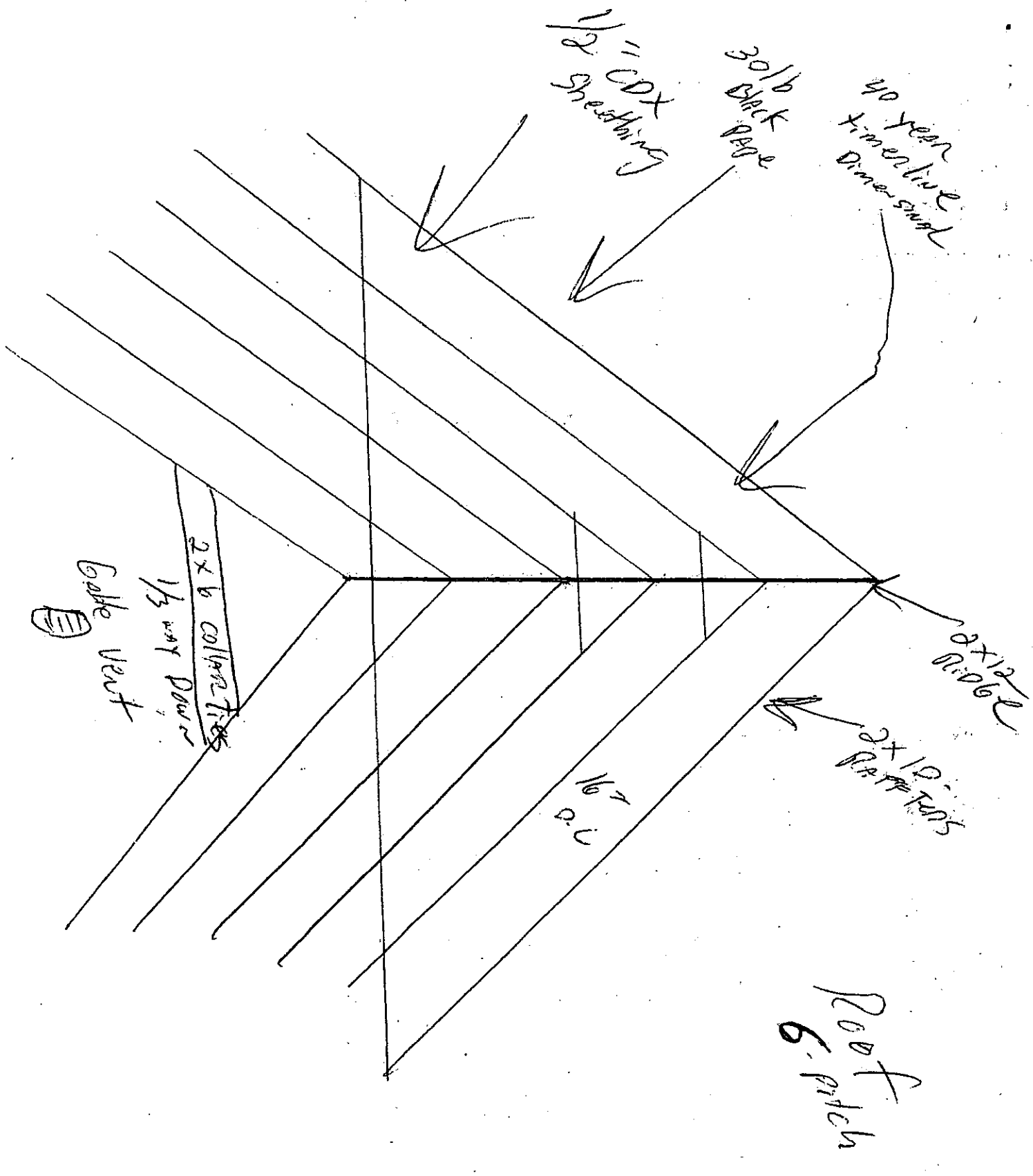
16" o.c.

2x6 collar ties

1/3 way down

Cable Vent

Roof
6: pitch



Applicable to Ordinance 720-92

This form must be handed in with permit application or a permit will not be issued

TOWNSHIP OF BRICK
Debris Form

Work Site Address: 1678 W - Princeton Ave

Block: 836 Lot: 6

Contractor: _____

Contractor's Address: _____

Type of Construction (minor ^{Cap 6} new home): _____

Type of Debris (shingles, siding, wood, etc.): _____

Party responsible for removal: Amstar Dumpsters

Dumpster size: 20 yd

Destination of debris: Manchester Dump

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

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

Ralph Stora Jr
Signature

12-19-03
Date

Ralph Stora Jr
Print Name

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

Joseph C. Scarpelli, Mayor

Township Council:

Kimberley S. Casten — President

Stephen C. Acropolls

Gregory S. Kavanagh

Leon C. Mowadla

Kathy M. Russell

Anthony R. Shupin

Frederick J. Underwood, Sr.



Township of Brick

(732) 262-1000

Fax: (732) 920-4850

<http://www.twp.brick.nj.us>

Date: 12-19-03

Block: 836 Lot: 6

Property Address: 1688 - W Princeton Ave

I, Ralph Steia Jr of 1688 - W Princeton Ave
(name) (address)

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

Ralph Steia Jr
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: 1/5/04

Signed: [Signature]

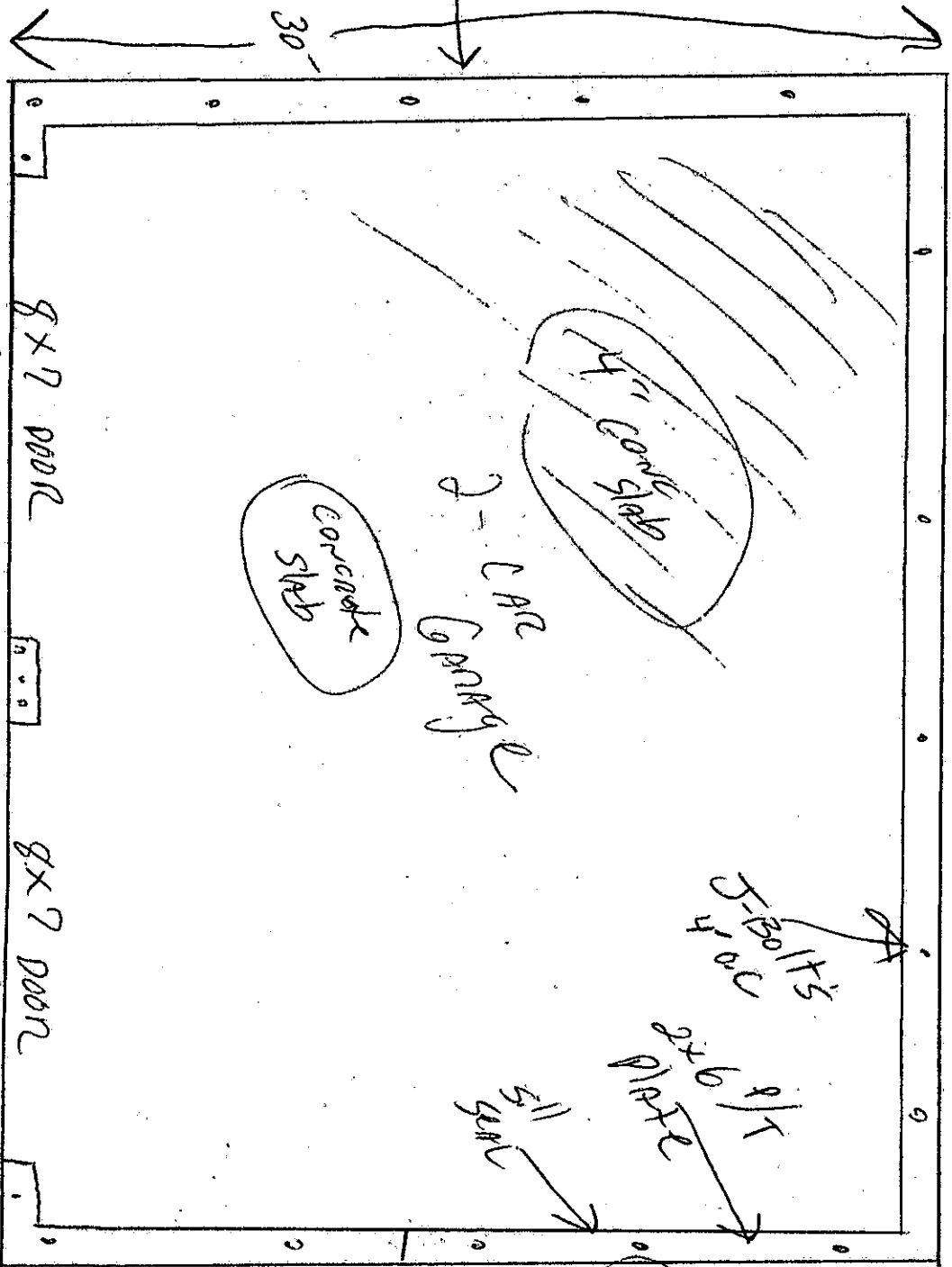
Rejected on: _____

Signed: _____

Comments: _____

← 15' →
set
Back
From
Side

30'



30' set Back
From
Street

20'

8x7 door



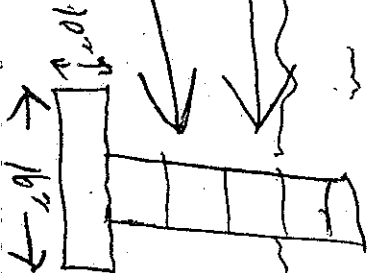
8x7 door

5-1/2\"/>

2x6
plate
8/1

5\"/>

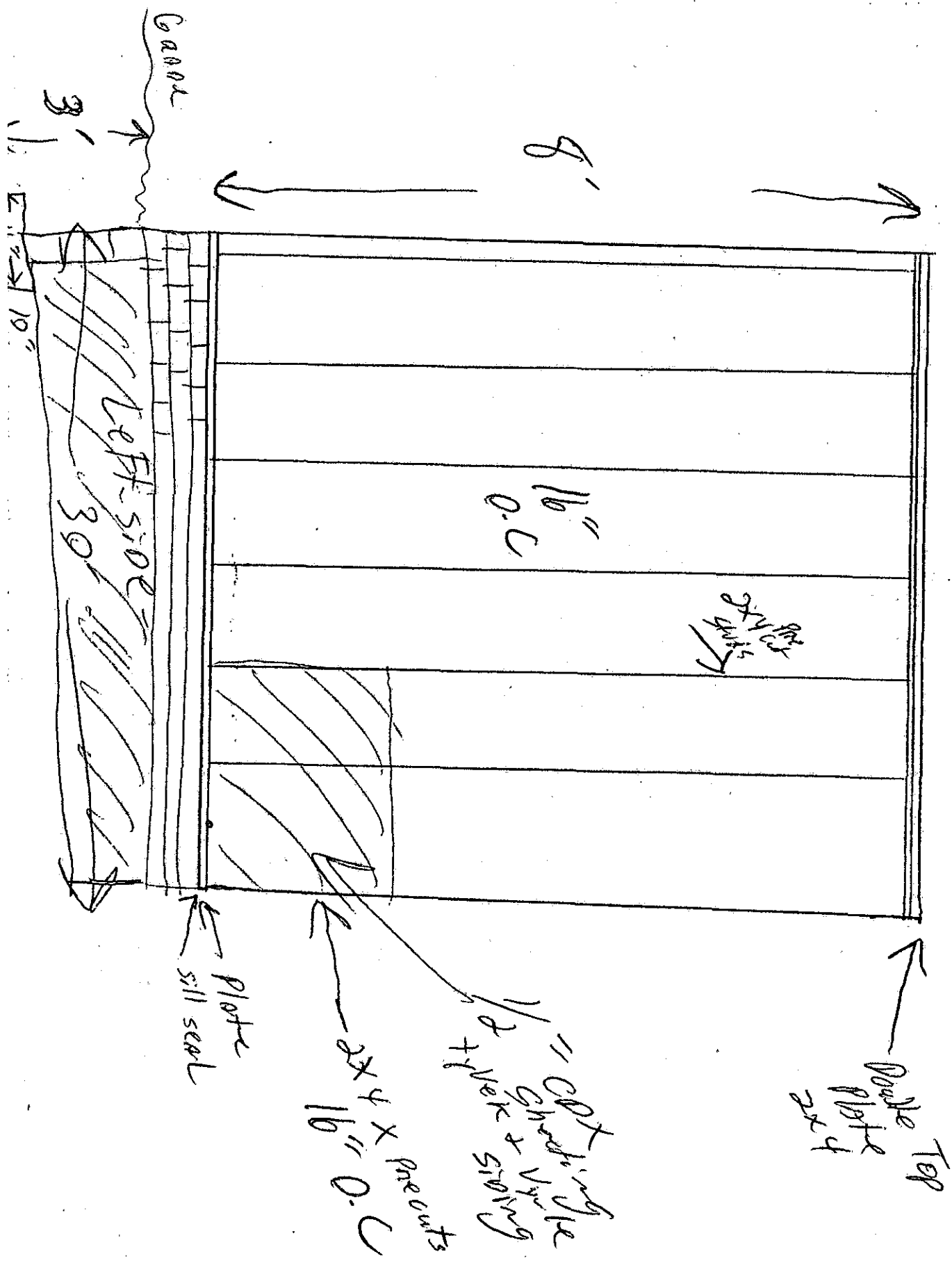
Footing

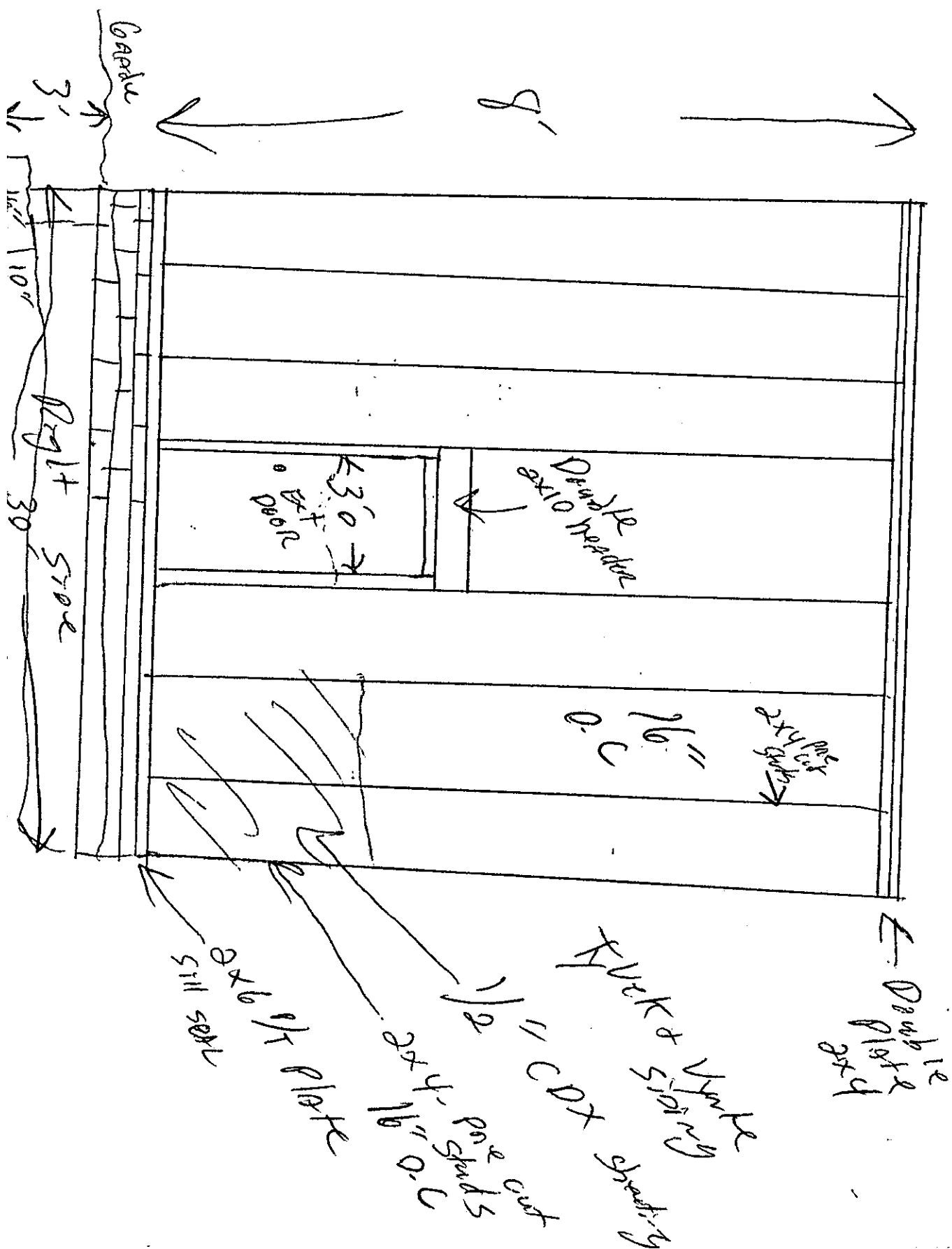


Foot

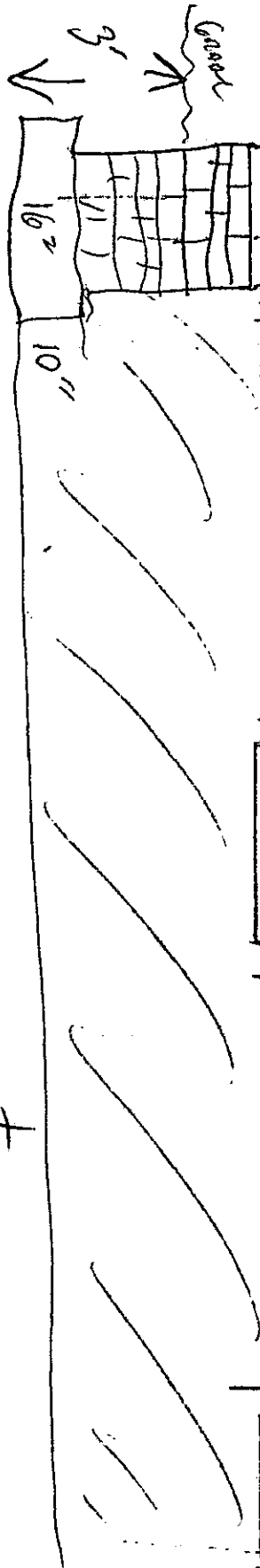
30'

← 20' set
Back
From
HWS





20' Front

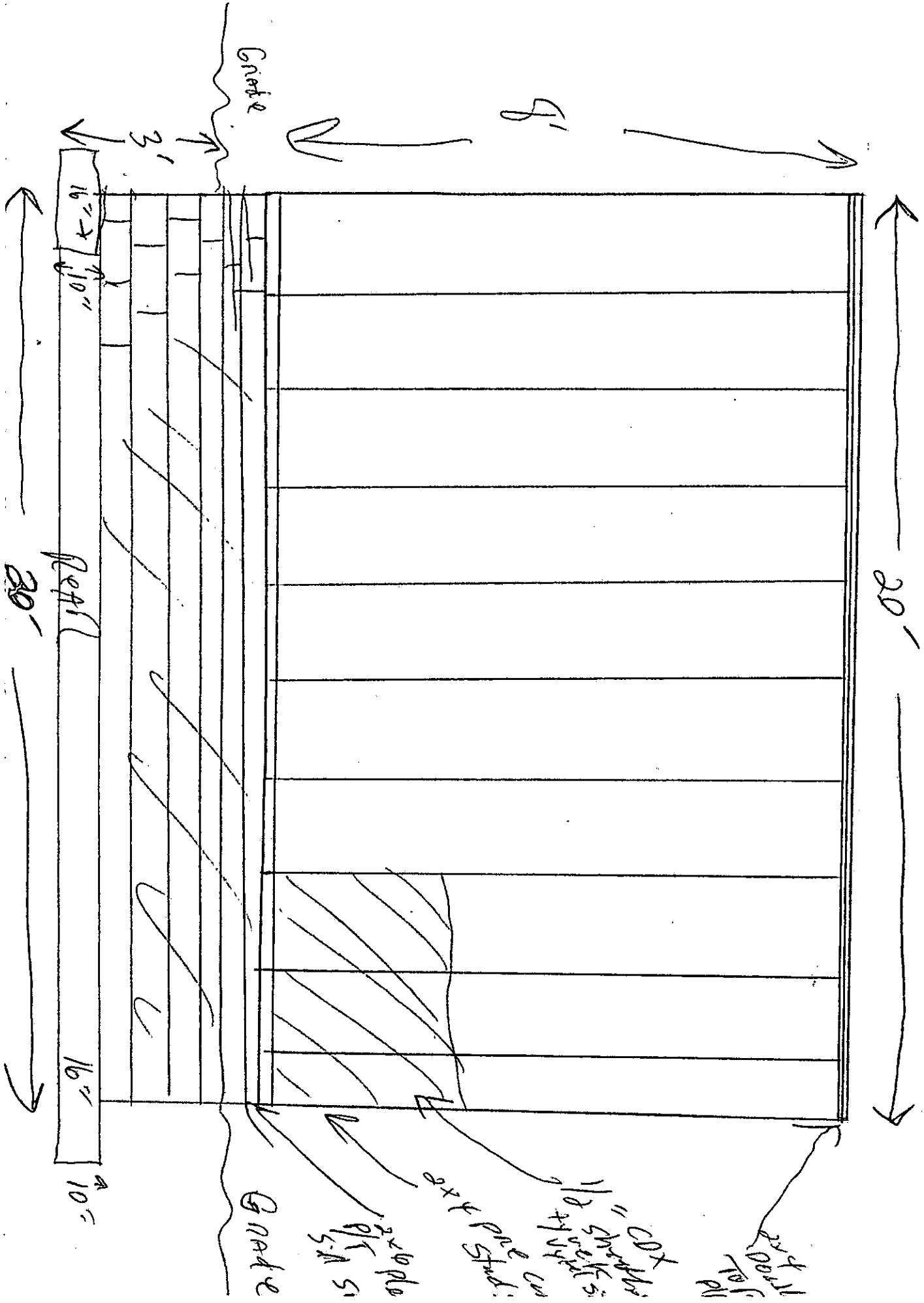


Back
1/2" gap
2x4's
Plate
P/T

2x10 Double Header

2x10 Double Header 2x10 Double Header

16" C



1/2" CDX Sheathing

30lb Black Paper

40 year time line Dimension

2x12 Ridge

2x10 Rafters

16" P.C.

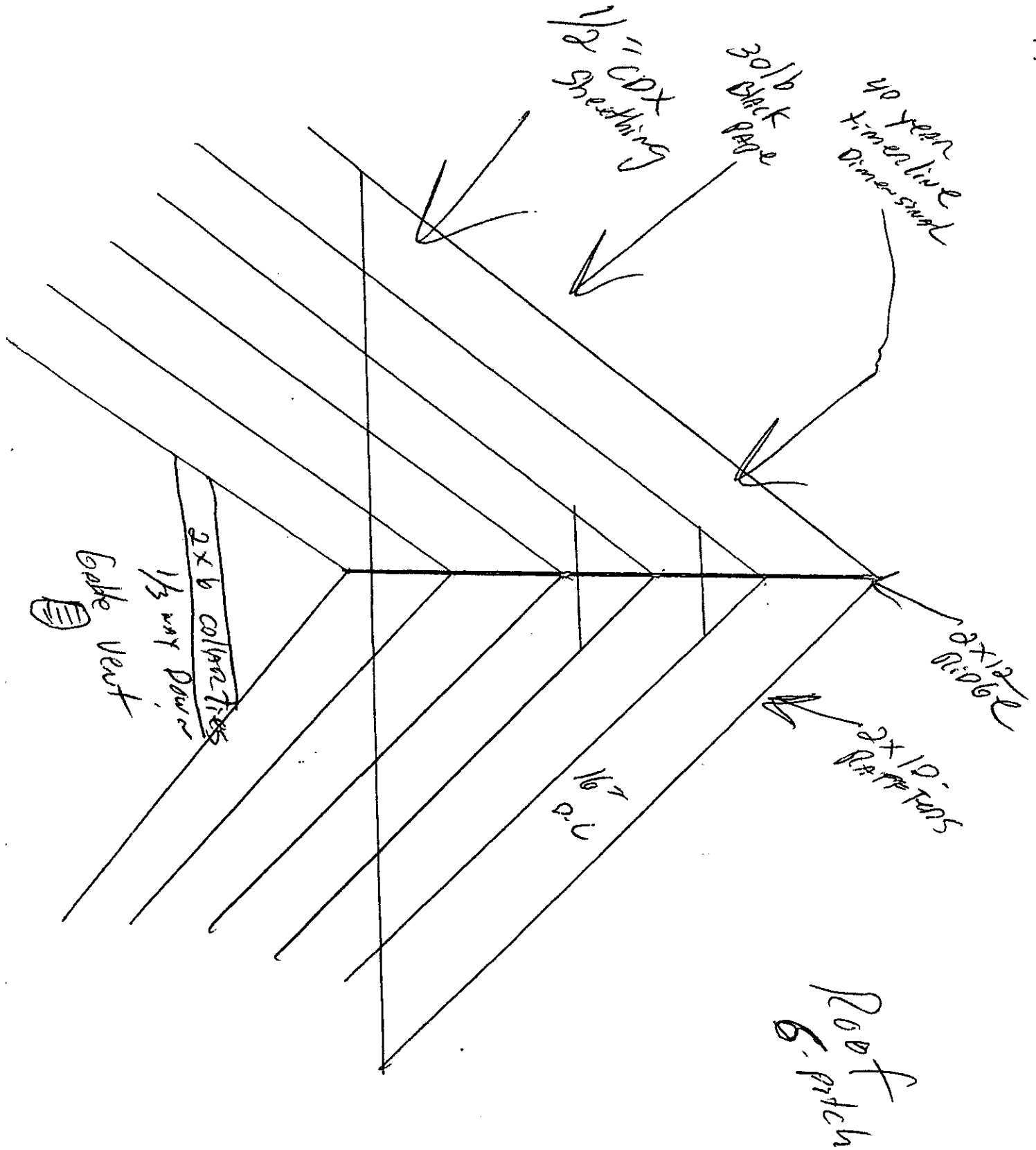
2x6 collar ties

1/3 way Down

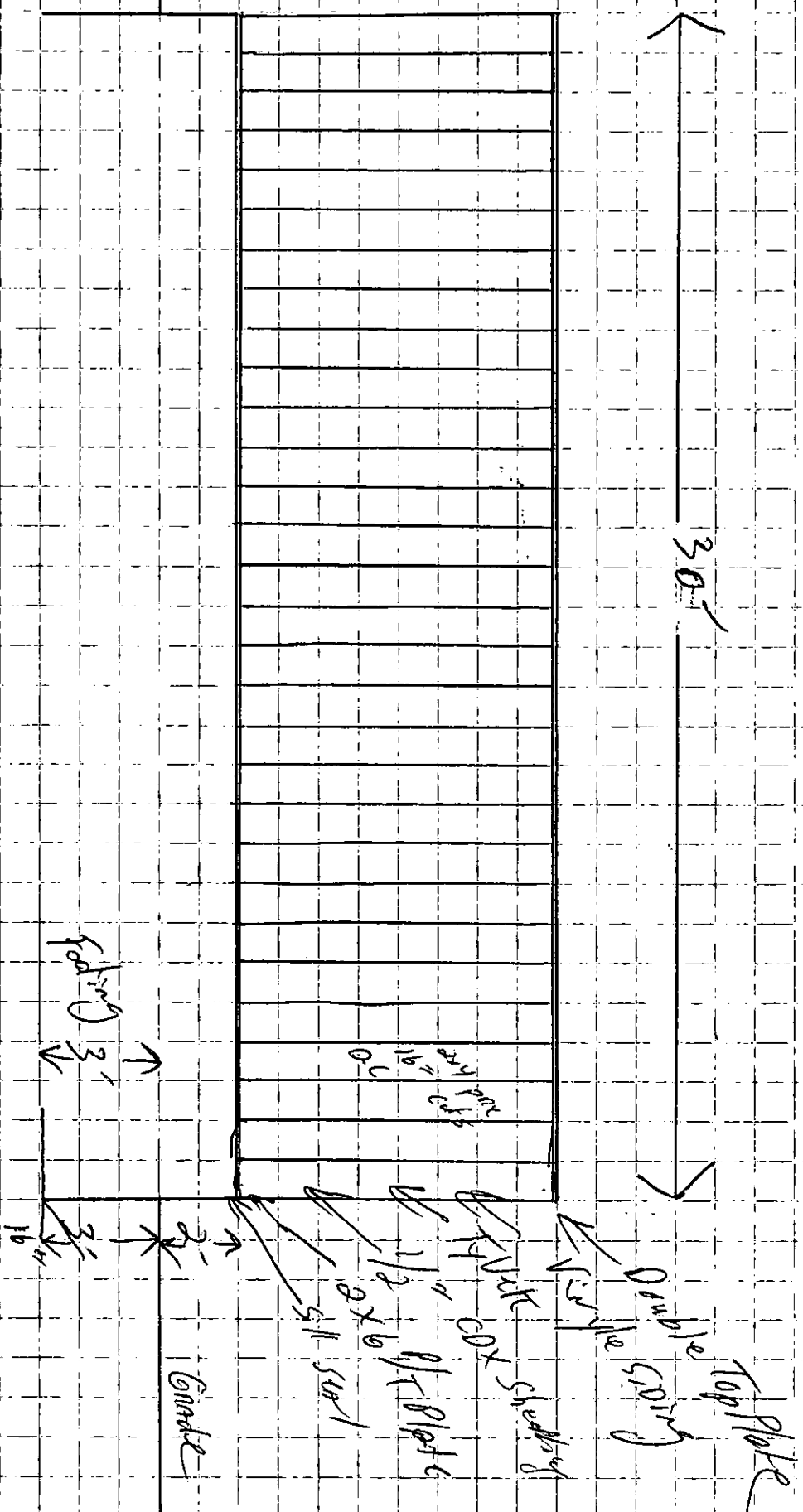
Gable Vent



Roof 6:12 pitch



Brick Township
Plan Review Class Date By
Zoning _____
Plumbing _____
Building _____
Fire _____
Electrical _____



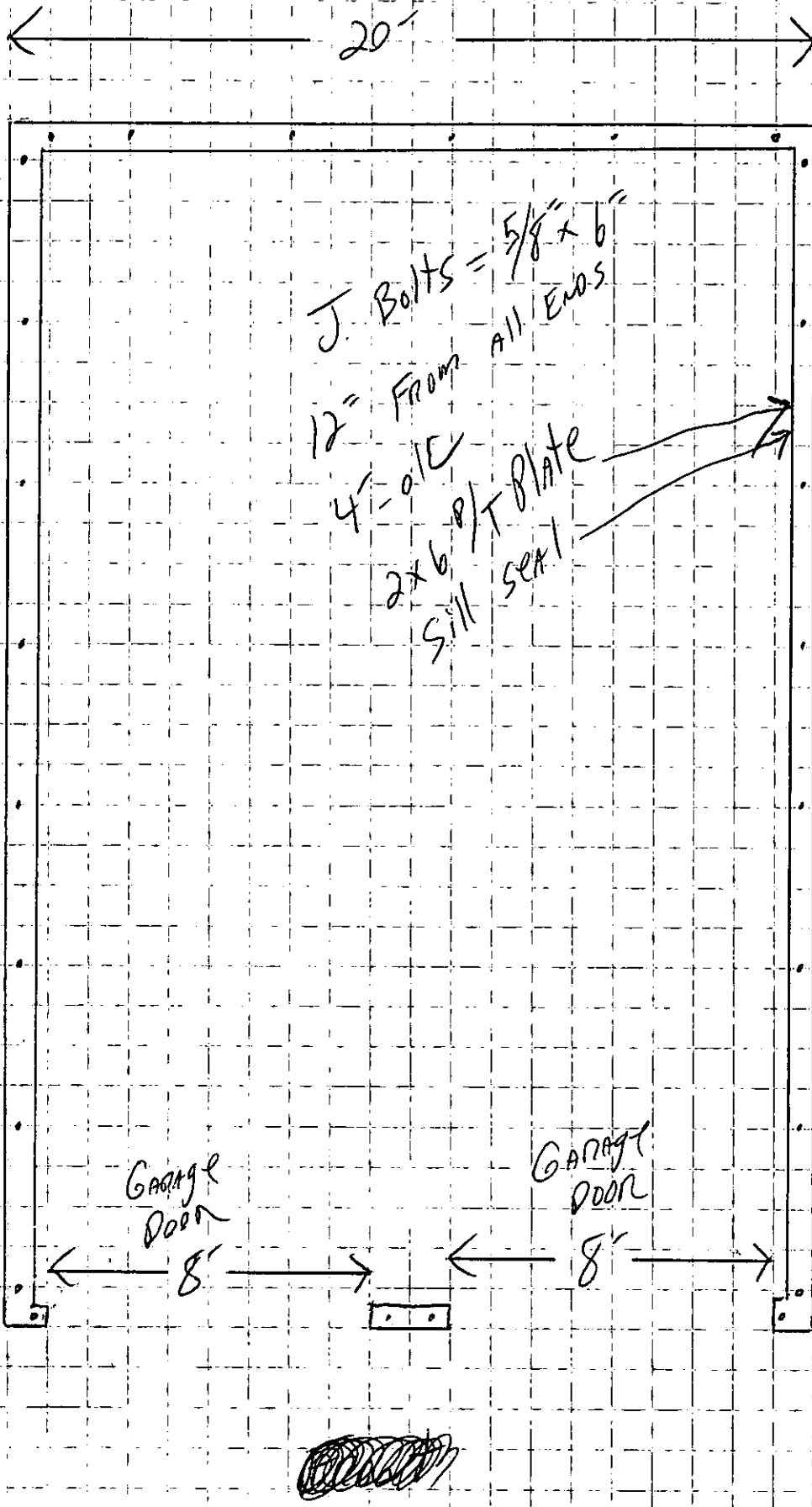
Left Side

Left Side

Scale
1/4" = 1'-0"

Plan Review Brick Township
Zoning Class Date By
Plumbing
Building 1-9-04 PVL
Fire
Electrical

South Side



~~Scale~~
Scale = $\frac{1}{4}" = 1\text{-Foot}$

1688
1683
West Princeton

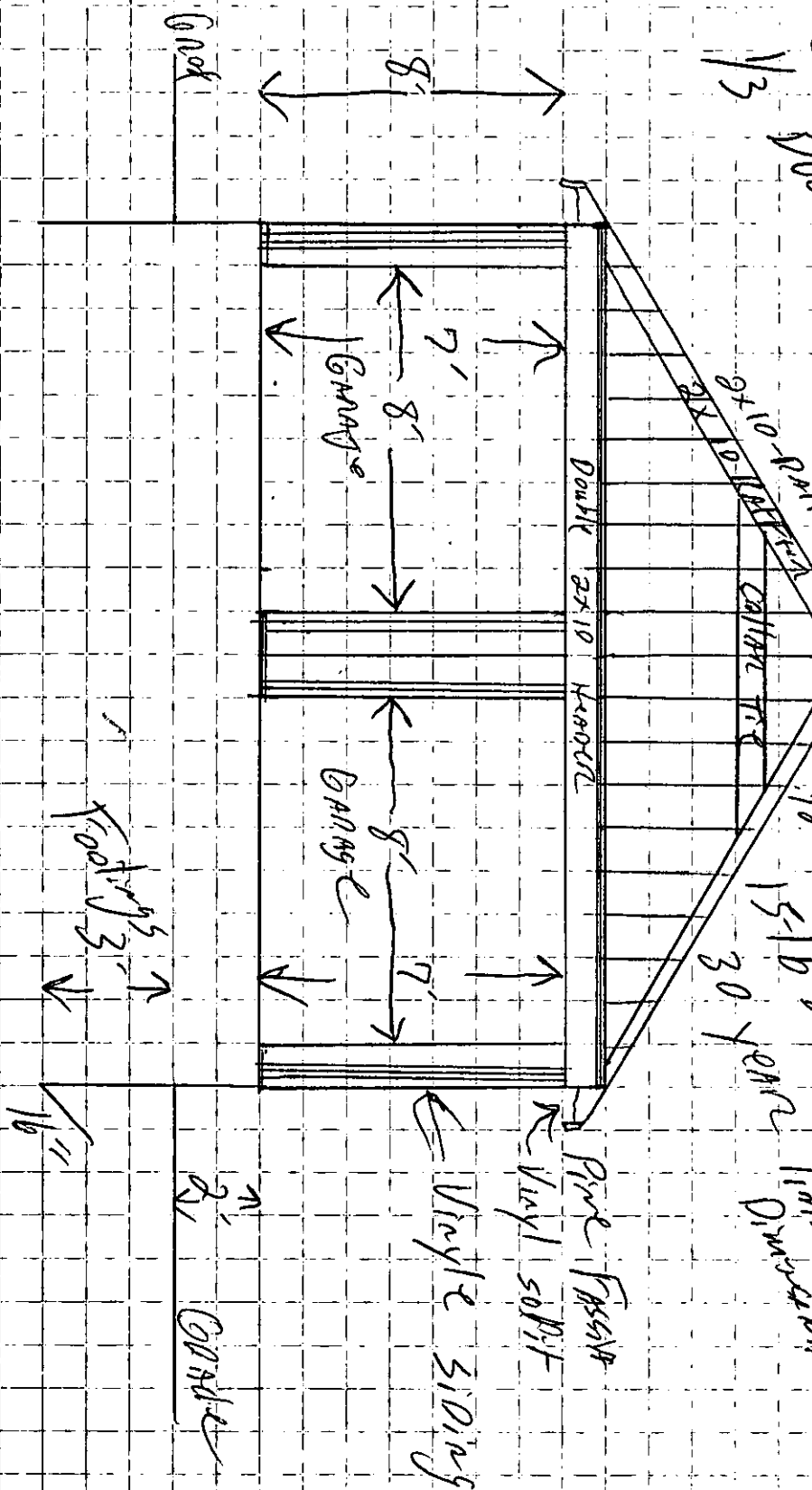
	Brick Township		
Plan Review	Class	Date	By
Zoning			
Plumbing			
Building	1-9-00		EV
Fire			
Electrical			

Ties
collar
down

6-Pitch

Ribc - 16" O.C.
 RAFF + AS - 16" O.C.
 RAFF + AS - 16" O.C.

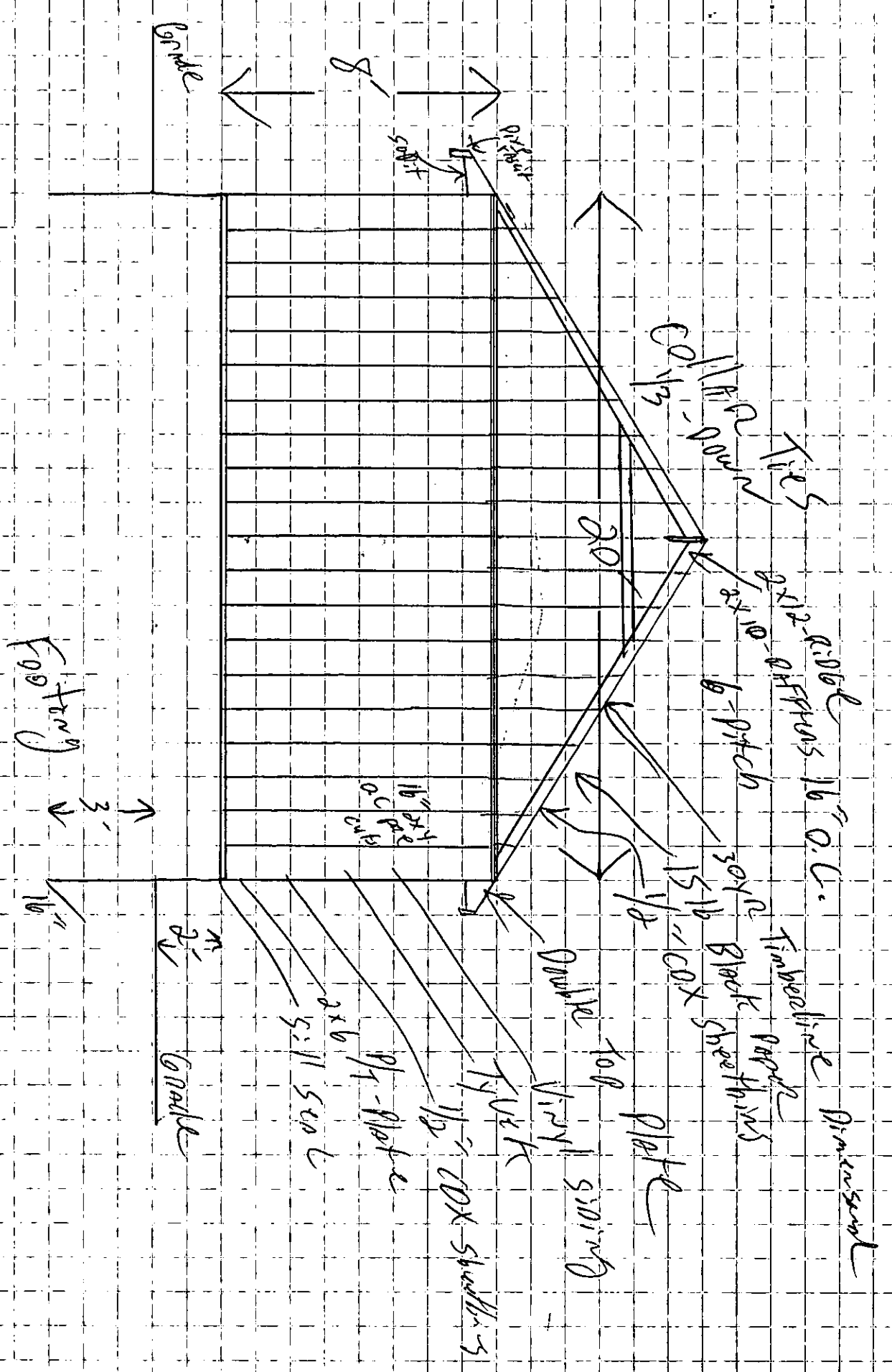
CH 11
CDX
1516
20
Sheldn
Bk
Tib
Dw

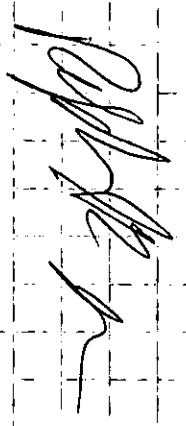


John D. ...

$$Foot - Scale - \frac{1}{4} = 1 - Foot$$

Brick Township
Plan Review Glass Date By
Zoning
Plumbing
Building 1-9-04 LK
Fire
Electrical



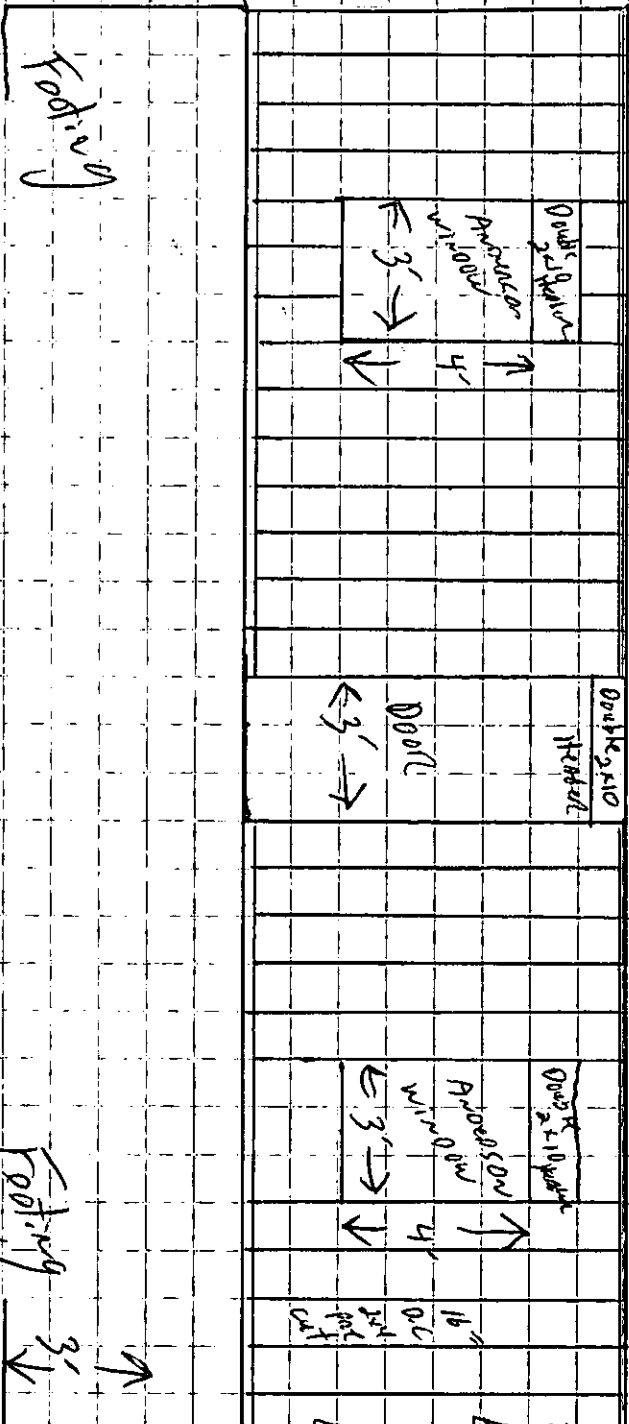


REAR - Scale = $\frac{1}{4}'' = 1' - 0''$

Plan Review Brick Township
Zoning Class Date By
Plumbing
Building 1-9-06 LFA
Fire
Electrical

30'

8'



Left side

Right side

Double doors

Window

2x6 cut

2x12 cut

2x6 cut

5th floor

Grade

Footings 3' x 16"

Scale

1/4" = 1 foot

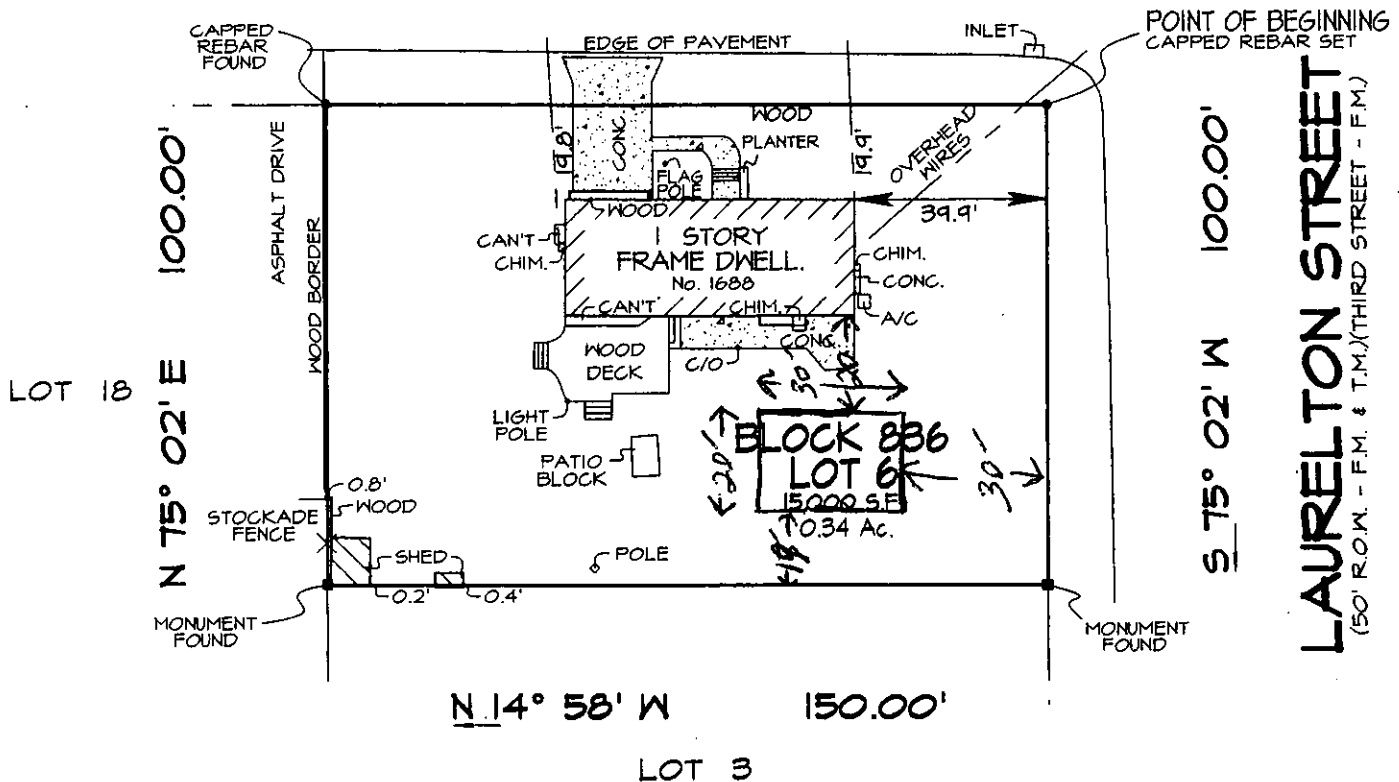
1688 } west Princeton Ave
OR }
1683 } Staia - Ralph

	Brick Township		
Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		1-9-04	FW
Fire			
Electrical			

WEST PRINCETON AVENUE

(50' R.O.W. - F.M. & T.M.)

S 14° 58' E 150.00'



CERTIFICATION:

TO: RALPH STOIA JR. AND RUTH ANN STOIA, I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF, THIS MAP OR PLAN IS THE RESULT OF A FIELD SURVEY MADE ON NOVEMBER 20, 2003, BY ME OR UNDER MY DIRECT SUPERVISION, IN ACCORDANCE WITH THE RULES AND REGULATIONS PROMULGATED BY THE "STATE BOARD OF PROFESSIONAL ENGINEERS AND LAND SURVEYORS".

THIS CERTIFICATION IS GIVEN SOLELY TO THE ABOVE NAMED PARTIES EXCEPT AS FOLLOWS:

- TO THE TITLE INSURER SO THAT IT MAY INSURE TITLE TO THE PREMISES AS SHOWN HEREON: COASTAL TITLE AGENCY, INC.
- TO THE MORTGAGE HOLDER: VALLEY NATIONAL BANK, ITS SUCCESSORS AND/OR ASSIGNS, AS THEIR INTERESTS MAY APPEAR.
- TO THE CLOSING ATTORNEY: RILEY & GUTMAN; MICHAEL L. GUTMAN, ESQ.

REFERENCES:

- FILED MAP - "LAURELTON PARK, LAURELTON, OCEAN COUNTY, NEW JERSEY," FILED IN THE OCEAN COUNTY CLERK'S OFFICE AS MAP No. A-328.
- TAX MAP OF THE TOWNSHIP OF BRICK, SHEET No. 45.02.
- DEED BOOK 3403, PAGE 287, et. seq.

DEED DESCRIPTION:

BEING KNOWN AND DELINEATED AS LOTS 6, 7, 8 & 9, BLOCK 9, AS SHOWN ON A CERTAIN MAP ENTITLED, "LAURELTON PARK, LAURELTON, OCEAN COUNTY, NEW JERSEY," FILED IN THE OCEAN COUNTY CLERK'S OFFICE AS MAP No. A-328.

NOTES:

- THIS SURVEY IS SUBJECT TO SUCH FACTS AS AN ACCURATE TITLE SEARCH MAY DISCLOSE.
- IF THIS DOCUMENT DOES NOT CONTAIN A RAISED IMPRESSION SEAL OF THE PROFESSIONAL, IT IS NOT AN AUTHORIZED ORIGINAL AND MAY HAVE BEEN ALTERED.
- THE INFORMATION SHOWN HEREON CORRECTLY REPRESENTS THE CONDITIONS FOUND AT, AND AS OF THE DATE OF THE FIELD SURVEY, EXCEPT SUCH IMPROVEMENTS OR EASEMENTS, IF ANY, BELOW THE SURFACE AND NOT VISIBLE
- THIS SURVEY IS INTENDED SOLELY FOR PURCHASE AND/OR MORTGAGE TO THOSE LISTED HEREON. THEREFORE NO RESPONSIBILITY OR LIABILITY IS ASSUMED BY THIS SURVEYOR FOR ANY OTHER PURPOSE INCLUDING, BUT NOT LIMITED TOO, USE OF SURVEY FOR SURVEY AFFIDAVIT OR INSTALLATION OF FENCES.

SURVEY OF PROPERTY

PREPARED FOR

RALPH STOIA JR. & RUTH ANN STOIA

SITUATED IN THE

TOWNSHIP OF BRICK

OCEAN COUNTY,

NEW JERSEY

ROBERT J. RAHA, JR.
PROFESSIONAL LAND SURVEYOR & PLANNER
N.J.P.L.S. LIC. No. 35397, P.P. LIC. No. 4948

P.O. BOX 1152
JACKSON, NEW JERSEY 08527 (732) 928-5554

SCALE : 1" = 40'

DATE : NOVEMBER 21, 2003

REVISIONS :

CHECKED BY: RJR
DRAWN BY: RJR/CMR
FILE NO. 23478

Township of Brick

Counter Form
(PLEASE PRINT)

Site Location: 1688 - W. Princeton Ave
 Block: 836 Lot: 6
 Owner's Name: Ralph Stora Jr
 Owner's Mailing Address: 1688 - W. Princeton Ave
 Phone: [REDACTED]

BUILDING

Contractor: _____
 Address: _____
 Phone#: H/O
 Lis # _____
 Federal Emp # or SSN _____

Technical Data

Description of Work:

2 CAR DETACHED
GARAGE
20x30

Type of Work

☒ New Building _____ Siding _____
☐ Addition _____ Fence _____
☐ Alteration _____ Pool _____
☐ Roofing _____ Demolition _____
☐ Asbestos Abatement _____ Sign _____ sq ft
☐ Fireplace wd/gas _____

Building Characteristics

Use Group Present: _____ Proposed: _____
 No of Stories: ONE
 Height of Structure: 16'
 Area of the largest floor: 600 sq ft
 Area of New Structure: 600 sq ft
 Volume of New Structure: _____
 Total Land Disturbed: 600 sq ft
 Cost of Alteration: \$ ~~2500.00~~
 Cost of New Building: \$ 5,000.00
 Cost of Site Work \$ 2,500.00
 Total Cost of New Building Work: \$ 7,500.00

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: Ralph Stora Jr
 Please Print Name Ralph Stora Jr

ELECTRICAL

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

Technical Data

Item	Quantity
Lighting Fixtures	_____
Receptacles	_____
Switches	_____
Detectors	_____
Light Poles	_____
Motors w/ Fract. HP	_____
Emergency & Exit Lights	_____
Communication Points	_____
Alarm Devices/FAC Panel	_____
Total	_____

Pool (Receptacles, Switches, Lights, Motor 1HP) _____
 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 _____ AMP
 Motor Control Center _____ AMP
 Sign/Outline Light _____ KW
 Furnace _____
 Steam Boiler _____
 Other: _____

Estimated Cost of Electrical 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

Counter Form
PLEASE PRINT

PLUMBING

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

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	_____
Urinals/Bidets	_____
Bath Tub (w/or w/out shower head)	_____
Lavatory (BR Sink)	_____
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	_____
Air Conditioner (Condensate Drain)	_____
Septic Tank Closure	_____
Sewer Service Connection	_____
Water Service Connection	_____
Active Solar System	_____
Auxiliary Meter	_____
Sprinkler Heads	_____
Sump Pump	_____
Pool Heater	_____
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:

Gas Stove _____
Gas Dryer _____
Furnace (Gas or Oil) _____
Gas Fireplace _____
Gas Logs _____
Total Appliances _____

Wood Burning Stove _____
Wood Fireplace _____
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: _____