

NEW JERSEY
UNIFORM CONSTRUCTION CODE

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

1. Proposed Work Site at: 120 W. FINELEY AVE

2. Name of Owner in Fee: WAMI, VIV, PAUL

Tel. [REDACTED] e-mail [REDACTED]

Address 1720 W Princeton Ave Brick 08724

3. Ownership in Fee: Public 1 Private X

4. Principal Contractor: _____ Tel. (____) _____

Address _____ e-mail _____

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. _____ FAX: (_____) _____

5. Architect or Engineer _____ Contact _____ ✓

Address _____ **e-mail** _____

Tel. () _____ FAX: () _____

6. Responsible Person in Charge once Work has Begun _____

Tel. () _____ FAX: () _____

✓✓✓	Update	Update
-----	--------	--------

- | | | | | |
|-----------------------------------|----|------|--|--|
| 1. Building | \$ | 9571 | | |
| 2. Electrical | | | | |
| 3. Plumbing | | | | |
| 4. Fire Protection | | | | |
| 5. Elevator Devices | | | | |
| 6. Subtotal | | | | |
| 7. Less 20% for State Plan Review | \$ | | | |
| 8. Subtotal | \$ | | | |
| 9. State Permit Surcharge Fee | | | | |
| 10. Subtotal | \$ | 1- | | |
| 11. Cert. of Occupancy | | | | |
| 12. Other | | | | |
| 13. TOTAL | \$ | 710- | | |

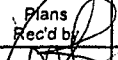
(office use only)	
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1. Number of Stories _____
2. Height of Structure 8 ft ft.
3. Area — Largest Floor 200 sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Max. Live Load _____
7. Max. Occupancy Load _____
8. If Industrialized Building: State Approved _____ HUD _____
9. Total Land Area Disturbed _____ sq. ft.
10. Flood Hazard Zone _____
11. Base Flood Elevation _____ ft.
12. Wetlands yes _____ no X

☒ Minor Work ☒ New Building ☐ Addition ☐ Demolition
☐ Repair ☐ Alteration ☐ Renovation ☐ Reconstruction
☐ Asbestos Abat.-Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit

(Check all that apply)

- ☒ Building
- ☐ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)							
Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	
						Approval	Rejection
		1/21/14		02/14/14	KEH		
	Eng	Exempt		1/21/14	ECC		

A. RESIDENTIAL (primary use)

1. State Specific Use: auto shelter
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present: _____
4. No. of dwelling units: Total Units Income-restricted
- | | |
|----------------|-------|
| Gained, Sale | _____ |
| Gained, Rental | _____ |
| Lost, Sale | _____ |
| Lost, Rental | _____ |
- B. NON-RESIDENTIAL (*primary use*)
1. State Specific Use: _____
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present: _____
- C. MIXED USE -List secondary use(s): _____
- D. Construct. Classification: Present _____
Proposed _____

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

- ☐ Partial Releases
- ☐ Prototype Processing

- | | | | |
|---|---|---|---|
| 1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks | 4. ☐ Refrigeration Systems | 8. ☐ Smoke Control Systems in Open Wells | 12. ☐ Fire Alarm |
| 2. ☐ High Pressure Boilers | 5. ☐ Cross-Connections/Backflow Preventers | 9. ☐ Underground Storage Tanks | |
| 3. ☐ Pressure Vessels | 6. ☐ Hazardous Uses/Places of Assembly | 10. ☐ Swimming Pools, Spas and Hot Tubs | |
| | 7. ☐ Sprinklers/Standpipes | 11. ☐ LPGas Tanks | |



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 03/04/2014
Control Number C-14-000227
Permit Number 14-0326
Permit Issue Date 02/18/2014
Certificate Number 14-0326

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1720 W. PRINCETON AVE. Brick Township, NJ Block: 842 Lot: 27.02 Qual: _____
Owner in Fee: PETILLO, MARY JANE
Owner Address: 1720 W PRINCETON AVE BRICK NJ 08724
Telephone: [REDACTED]
Contractor PETILLO, MARY JANE
Address 1720 W PRINCETON AVE BRICK NJ 08724
Telephone: [REDACTED] Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: MEMBRANE STRUCTURE

Certificate Comments:

☐ **Certificate of Occupancy**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☒ **Certificate of Approval**

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

☐ **Certificate of Continued Occupancy**

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

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:
Conditions to be met:

Construction Official _____

Fee: \$0.00

Check Number: _____

Collected By: _____



BUILDING SUBCODE TECHNICAL SECTION



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

Block 842 Loc 27.02 Qualification Code _____

Work Site Location 1720 W Princeton Ave

Owner in Fee: MANITANO PAVILIO

Te [redacted] e-mail [redacted]

Address 1720 W Princeton Ave Brick 08724 zip code

Contractor: [redacted] Tel. () () e-mail _____

Address [redacted] Tel. () () e-mail _____

Contractor License No. or Builder Registration No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. _____ FAX: () ()

JOB SUMMARY (Office Use Only)

PLAN REVIEW Page Initial 02/19/14 PER

☒ No Plans Required PER Type: _____

☐ All _____ Inspections _____

☐ Footings/Foundations _____ Failure _____

☐ Structural/Framework _____ Failure _____

☐ Exterior _____ Failure _____

☐ Interior _____ Failure _____

Joint Plan Review Required: _____

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator _____

SUBCODE APPROVAL for PERMIT _____

Date: 02/19/14 _____

Approved by: PER _____

SUBCODE APPROVAL for CERTIFICATE _____

☐ CO ☐ CCO CA _____

Date: 02/26/14 _____

Approved by: PER _____

B. BUILDING CHARACTERISTICS

Use Group Present X Proposed _____

No. of Stories _____

Height of Structure 8 ft. _____

Area — Largest Floor 200 sq. ft. _____

New Bldg. Area/All Floors _____ sq. ft. _____

Volume of New Structure _____ cu. ft. _____

Max. Live Load _____

Max. Occupancy Load _____

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.

Sign here: Manitano Pavilio

Print name here: Manitano Pavilio

TECHNICAL SITE DATA

DESCRIPTION OF WORK

10x20x8 Auto Shelter.

TYPE OF WORK:

☒ New Building

☐ Addition

☐ Rehabilitation

☐ Roofing

☐ Siding

☐ Fence _____ Height (exceeds 6') _____

☐ Sign _____ Sq. Ft. _____

☐ Pool _____

☐ Retaining Wall _____ Sq. Ft. _____

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☐ Radon Remediation

☐ Other _____

☐ Demolition

FEE (Office Use Only)

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Date Received 2/19/14
Control # 14-0306
Date Issued _____
Permit # _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

U.C.C. F110
(rev. 11/09)



CONSTRUCTION PERMIT

Date Issued 2/18/14
Control # C-14-000227
Permit # 14-0326

IDENTIFICATION Block: 842 Lot: 27.02 Qualifier _____
Work Site Location: 1720 W. PRINCETON AVE. Brick Township, NJ Contractor PETILLO, MARY JANE
Owner in Fee PETILLO, MARY JANE Address 1720 W PRINCETON AVE BRICK NJ 08724
1720 W PRINCETON AVE BRICK NJ 08724 Telephone: _____
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. _____

Is hereby granted permission to perform the following work:

- ☒ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT (Subchapter 8 only) ☐ OTHER

DESCRIPTION OF WORK:

MEMBRANE STRUCTURE

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 \$300

PAYMENTS (Office Use Only)

Building	\$75
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$76
Check No.	
Cash	<u>CASH</u> \$0
Credit	\$0
Collected By	

430
106

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

BUILDING	\$75.00
DEM	\$1.00
PL	\$30.00
EXT	\$105.00
CASH	\$116.00
TOTAL	\$217.00

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

BLOCK: 842 LOT: 27.02 QUALIFIER: --- SITE ADDRESS: 1720 W Princeton Ave

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Mary Jane Pello
COMPLETE ADDRESS: 1720 W Princeton Ave
Back RD 08724
PHONE # [REDACTED] MAIL [REDACTED]

2. NAME OF APPLICANT: Mary Jane Pello
APPLICANT ADDRESS: 1720 W Princeton Ave
Back RD 08724
PHONE # [REDACTED] MAIL [REDACTED]

3. RESPONSIBLE PERSON FOR WORK: ---
PHONE # --- FAX # ---

4. SIGNATURE OF APPLICANT: Mary Jane Pello

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: X *ADDITION --- *ALTERATION --- *PORCH --- *DECK ---

POOL: ABOVE GROUND --- IN GROUND --- FENCE: HEIGHT --- TYPE --- MATERIAL ---
HEIGHT: 8' (*IF APPLICABLE)
OTHER Auto Shelter

DESCRIPTION: 10 x 20 x 8 Auto Shelter (membrane structure)

ZONING REVIEW: 1/24/14 DATE DENIED: --- DATE APPROVED: 1/24/14 INTLS: ---
(SEE BACK PAGE)

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 30-
OTHER: \$ ---
TOTAL: \$ 30-

REQUIRED BY APPLICANT

RESIDENTIAL: ✓
COMMERCIAL: ---
EXISTING USE: SFD
PROPOSED USE: SFD

BOARD APPROVAL: --- PB --- ZB ---
RESOLUTION #: ---
APPROVAL DATE: ---

RECEIVED
JAN 24 2014
5624

JAN 24 2014

5624

2016

DATE REVIEWED: 1/24/14 DATE DENIED: — DATE APPROVED: 1/24/14 INTLS: 5628

INTLS: 5428

INITIALS:

[illegible]



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued:

Application Number: 2/18/14
ZA-14-00066

Application Date: 01/24/2014

Project Number:

Permit Number: 28-14-00088

Fee:

\$30

Zoning Permit

Worksite **1720 W. PRINCETON AVE.**
Location: **Brick Township, NJ**

Block: **842**

Lot: **27.02**

Qualifier:

Zone: **R-10**

Owner: **PETILLO, MARY JANE**
Address: **1720 W PRINCETON AVE**
BRICK, NJ 08724

Applicant: **PETILLO, MARY JANE**
Address: **1720 W PRINCETON AVE**
BRICK, NJ 08724

Application Approved Date: 01/24/2014

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Single-Family Residential

Nonconforming Use is: _____

Work Description:

**Membrane Structure - 10' x 20' x 8' High Membrane structure
Auto Shelter**

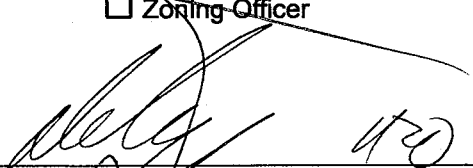
The structure must be set back at least 5' from the side and rear property lines.

**Structure can only be up for 6 months and has to be removed for 6 months. You must reapply every year
before assembling**

Additional Zoning Permit is required for additional work.

Upon review it was determined that the Development Application:

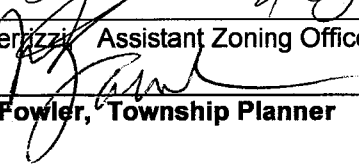
- ☒ Permitted by Ordinance
- ☐ Permitted by Variance approved on: _____
- ☐ Valid Nonconforming Use is established by
 - ☐ Zoning Board of Adjustment
 - ☐ Zoning Officer



Darren P. Teruzzi, Assistant Zoning Officer

01/24/2014

Date



Michael P. Fowler, Township Planner

1/25/14
Date



By:
Date: 1/24/14

1997-1998



Proposed
mental structure:

MARY JANE PETILLO

NEW JERSEY

43. 43X 1192

JACKSON, NEW JERSEY

14-00000	07/26/12
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1/07 17

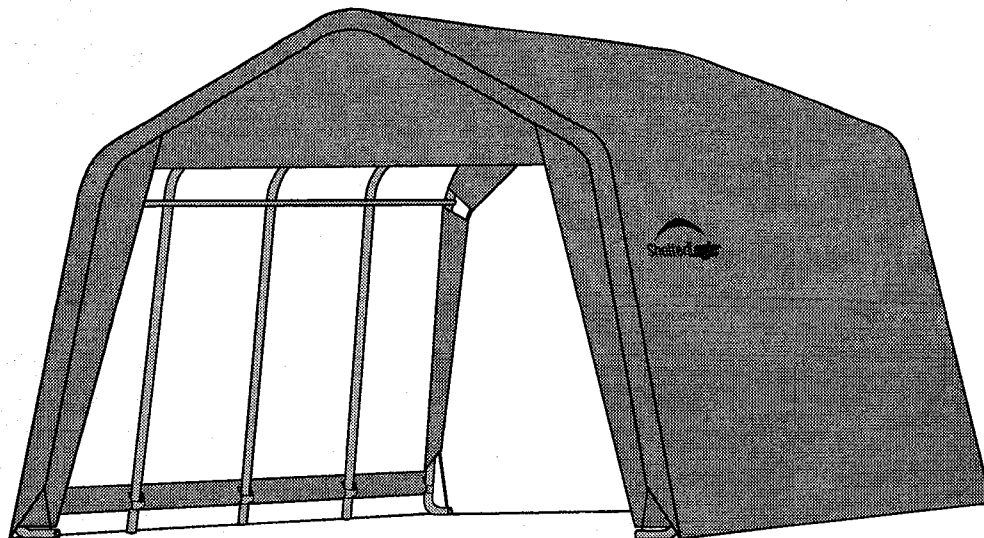
2001-2002

PROGRESS FOR LAND CONSERVATION IN FLORIDA
NORTH, 1917, No. 33397, P. 131, No. 4449

10' x 20' x 8' AutoShelter™

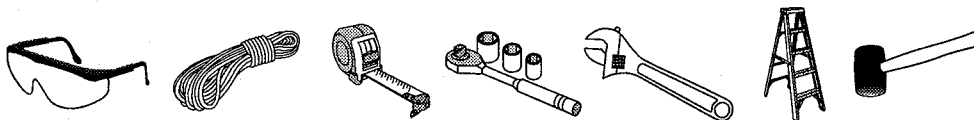
Peak Style Shelter

Assembly Instructions



DESCRIPTION	MODEL #
10' x 20' x 8' AutoShelter™ - Tan	62680

RECOMMENDED TOOLS



Please read instructions **COMPLETELY** before assembly. This shelter **MUST** be securely anchored. **THIS IS A TEMPORARY STRUCTURE AND NOT RECOMMENDED AS A PERMANENT STRUCTURE.**

Before you start: 2+ individual recommended for assembly, approximate time 2 hr.



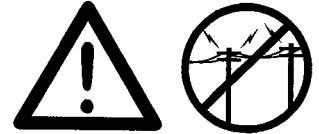
150 Callender Road
Watertown, CT 06795
www.shelterlogic.com

ATTENTION:

This shelter product is manufactured with quality materials. It is designed to fit the **ShelterLogic®**, LLC custom fabric cover included. **ShelterLogic®**, LLC Shelters offer storage and protection from damage caused by sun, light rain, tree sap, animal - bird excrement and light snow. Please anchor this **ShelterLogic®**, LLC structure properly. See manual for more anchoring details. Proper anchoring, keeping cover tight and free of snow and debris is the responsibility of the consumer. Please read and understand the installation detail, warnings and cautions prior to beginning installation. If you have any questions call the customer service number listed below. Please refer to the warranty card inside this package.

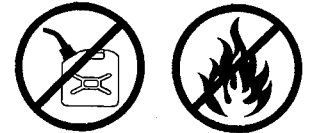
DANGER:

Prior to installation, consult with all local municipal codes regarding installation of temporary shelters. Choose the location of your shelter carefully. **DANGER: Keep away from electrical wires.** Check for overhead utility lines, tree branches or other structures. Check for underground pipes or wires before you dig. DO NOT install near roof lines or other structures that could shed snow, ice or excessive run off onto your shelter. DO NOT hang objects from the roof or support cables.



WARNING:

Risk of fire. DO NOT smoke or use open flame devices (including grills, fire pits, deep fryers, smokers or lanterns) in or around the shelter. DO NOT store flammable liquids (gasoline, kerosene, propane, etc.) in or around your shelter. Do not expose top or sides of the shelter to open fire or other flame source.



CAUTION:

Use **CAUTION** when erecting the frame. Use safety goggles during installation. Secure and bolt together overhead poles during assembly. Beware of pole ends.

PROPER ANCHORING AND INSTALLATION OF FRAME:

PROPER ANCHORING OF THE FRAME IS THE RESPONSIBILITY OF THE CONSUMER.

ShelterLogic®, LLC is not responsible for damage to the unit or the contents from acts of nature. Any shelter that is not anchored securely has the potential to fly away causing damage, and is not covered under the warranty. Periodically check the anchors to ensure stability of shelter. **ShelterLogic®**, LLC cannot be responsible for any shelter that blows away. **NOTE:** Your shelter's cover can be quickly removed and stored prior to severe weather conditions. If strong winds or severe weather is forecast in your area, we recommend removal of cover.

REPLACEMENT PARTS, ASSEMBLY, SPECIAL ORDERS:

Genuine **ShelterLogic®**, LLC replacement parts and accessories are available from the factory, including anchoring kits for nearly any application, replacement covers, wall and enclosure kits, vent and light kits, frame parts, zippered doors and other accessories. All items are shipped factory direct to your door.

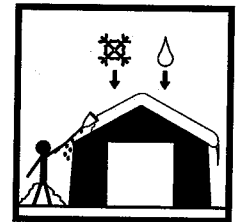
QUESTIONS - CLAIMS - SPECIAL ORDERS? CALL OUR CUSTOMER SERVICE HOTLINE:

U.S. CUSTOMER SERVICE: 1-800-524-9970 INTERNATIONAL CUSTOMER SERVICE: 001-860-945-6442 CANADA CUSTOMER SERVICE: 1-800-559-6175

HOURS OF OPERATION: MON-FRI 8:30AM-8:00PM EST, SAT-SUN 8:30AM-5:00PM EST.

CARE AND CLEANING:

A tight cover ensures longer life and performance. Always maintain a tight cover. Loose fabric can accelerate deterioration of cover fabric. Immediately remove any accumulated snow or ice from the roof structure with a broom, mop or other soft-sided instrument. Use extreme caution when removing snow from cover- always remove from outside the structure. DO NOT use hard-edged tools or instruments like rakes or shovels to remove snow. This could result in punctures to the cover. DO NOT use bleach or harsh abrasive products to clean the fabric cover. Cover is easily cleaned with mild soap and water.



WARRANTY:

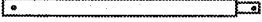
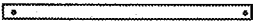
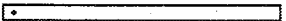
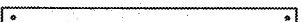
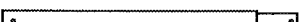
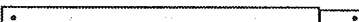
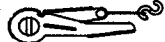
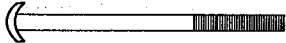
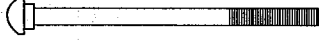
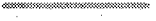
This shelter carries a full limited warranty against defects in workmanship. **ShelterLogic®**, LLC warrants to the Original Purchaser that if properly used and installed, the product and all associated parts, are free from manufacturer's defects for a period of:

1 YEAR FOR COVER FABRIC, END PANELS AND FRAMEWORK

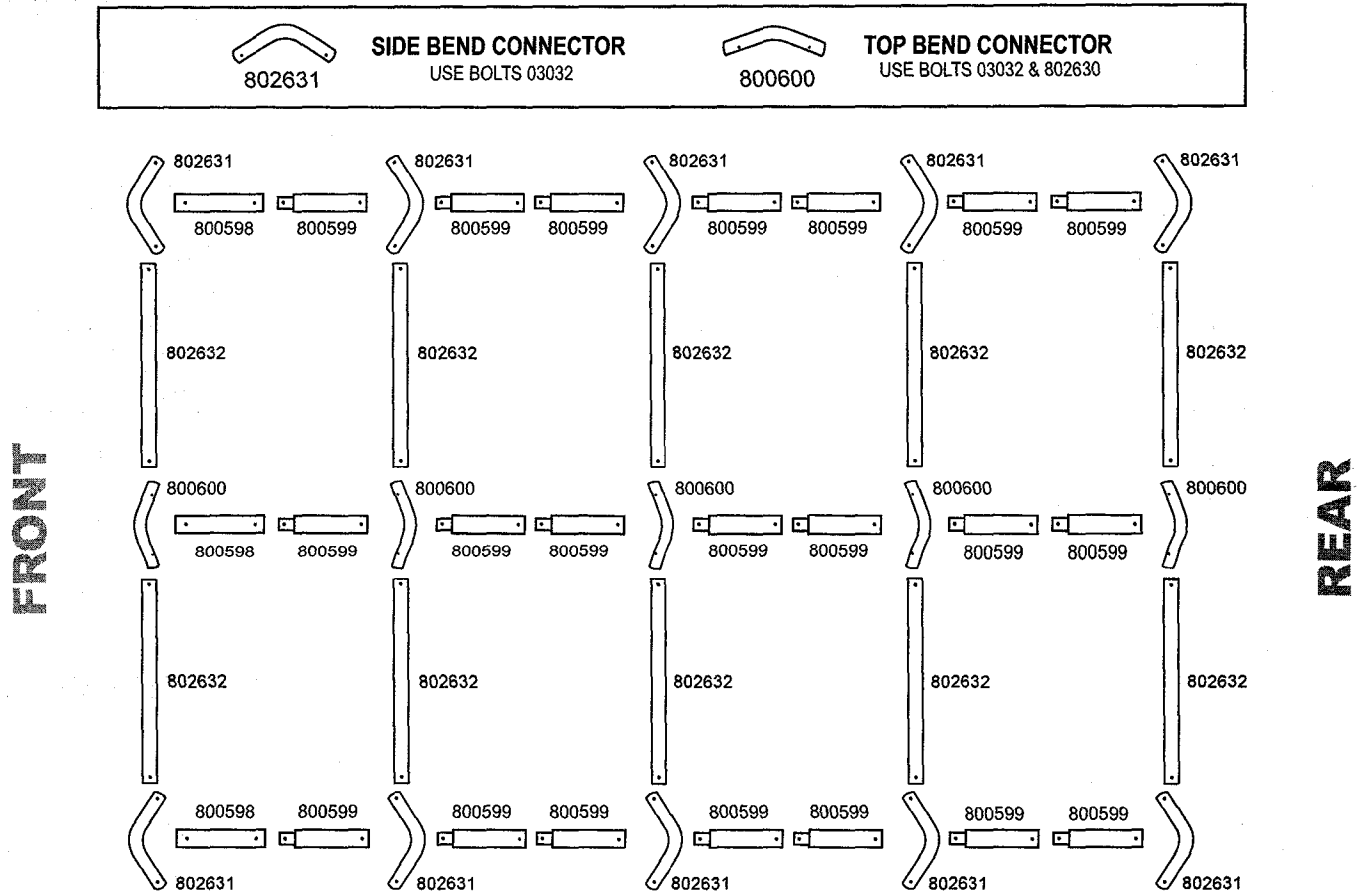
Warranty period is determined by date of shipment from **ShelterLogic®**, LLC for factory direct purchases or date of purchase from an authorized reseller, (please save a copy of your purchase receipt). If this product or any associated parts are found to be defective or missing at the time of receipt, **ShelterLogic®**, LLC will repair or replace, at it's option, the defective parts at no charge to the original purchaser. Replacement parts or repaired parts shall be covered for the remainder of the Original Limited Warranty Period. All shipping costs will be the responsibility of the customer. Parts and replacements will be sent C.O.D. You must save the original packaging materials for shipment back. If you purchased from a local dealer, all claims must have a copy of original receipt. After purchase, please fill out and return warranty card for product registration. Please see warranty card for more details.

Covered by U.S. Patents and patents pending: 6,871,614; 6,994,099; 7,296,584; D 430,306; D 415,571; D 414,564; D 409,310; D 415,572

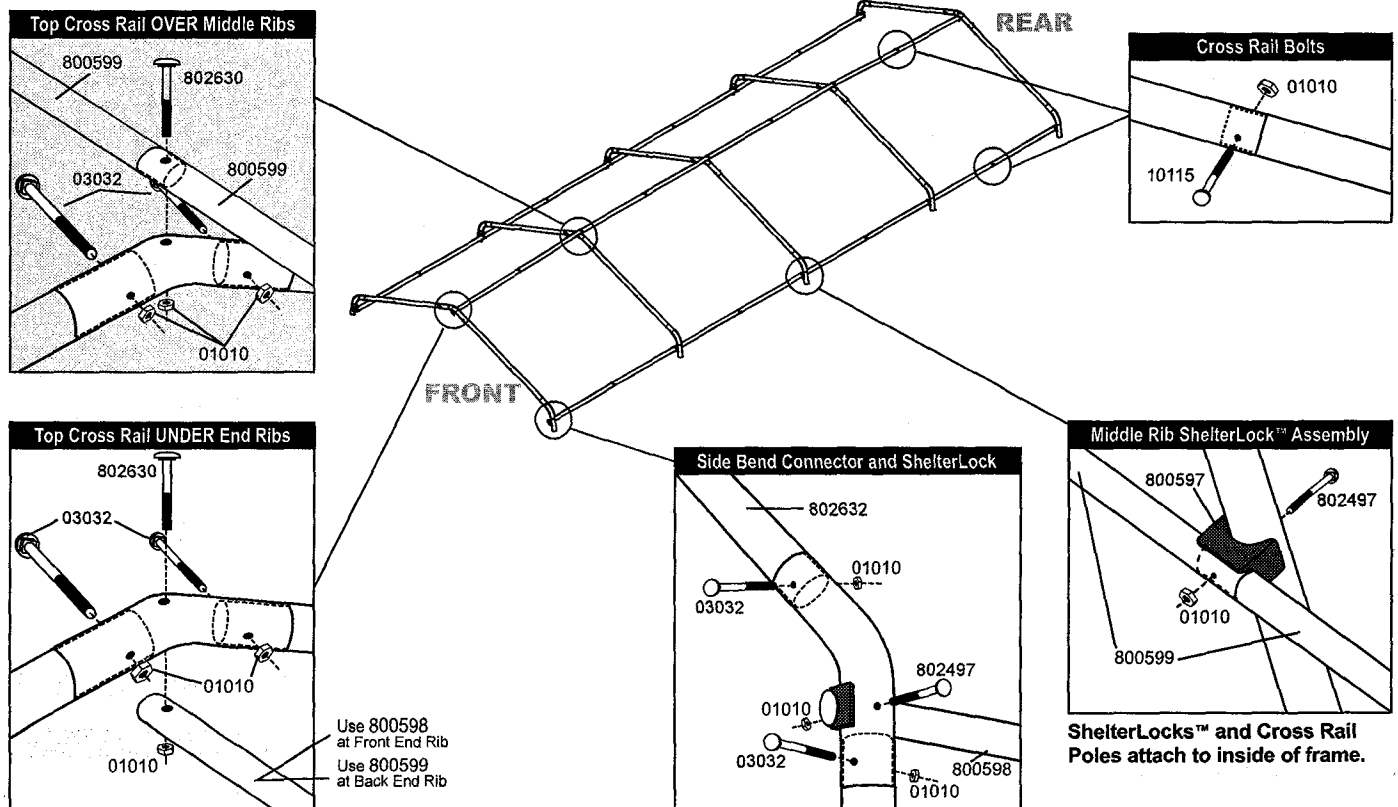
10' x 20' x 8' AutoShelter™ Parts List - Model #62680

Description of Parts:		Quantity	Part #
	Rafter Poles 42 1/4"	10	802632
	Cross Rails, Swedge 31 3/4"	21	800599
	Cross Rails 30 5/8"	3	800598
	Cross Rails 36 3/8"	8	800163
	Cross Rails 24 1/4"	8	13345
	Upright Poles 35 1/2"	10	802633
	Upright Poles, Swedge 30 1/4"	4	802634
	Middle Poles 40 11/16"	6	802635
	Corner Leg Bends	4	802637
	Side Corners	10	802631
	Top Connectors	5	800600
	Steel Foot Plate	6	12270
	ShelterLock™	10	800597
	Ratchet Clamp	8	10240
	Round Head Bolts 1/4" x 3"	5	802630
	Bolts 1/4" x 1 5/8"	48	10115
	Bolts 1/4" x 1 7/8"	30	03032
	Bolts 1/4" x 3 3/8"	10	802497
	Washer 1/4"	16	01011
	Nut 1/4"	93	01010
	White Bungee Cords <i>(For holding door open)</i>	2	10066
	Bolt Caps <i>(For bolt 802497)</i>	10	10150
	Half-Clamps for Middle Legs	12	13201
	Half-Clamps for Corner Legs	8	13202
	Cover	1	802490
	2-Zipper Door	1	802492
	Back Panel	1	802491
	15" Auger Anchors (Temporary)	4	10014
	Cable - 1' Length	4	10015
	Cable Clamps	4	10016

1. LAY OUT ROOF FRAME



2. ASSEMBLE ROOF FRAME Use bolts as shown in illustrations.

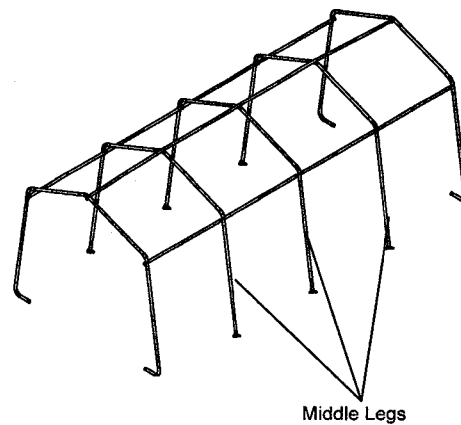
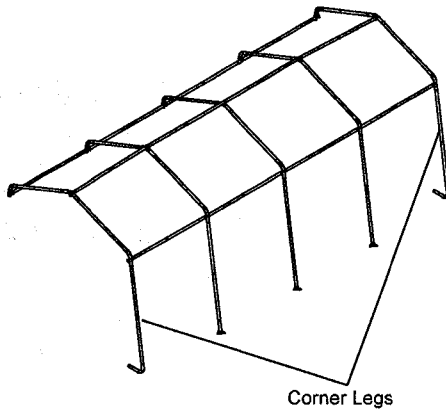
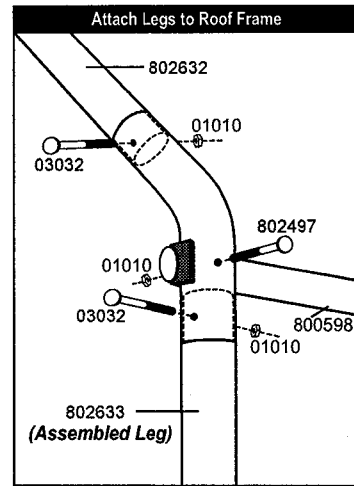
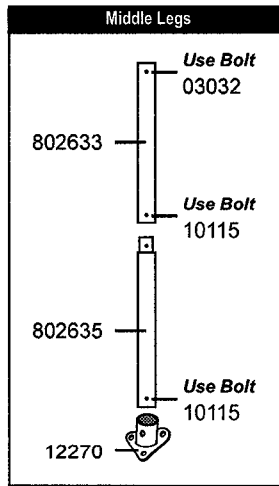
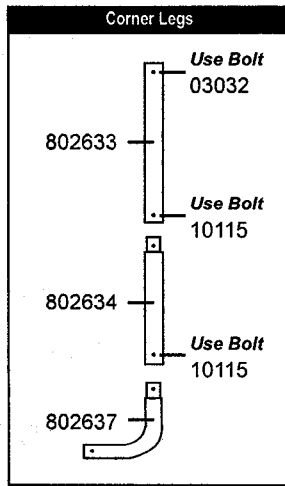


3. ASSEMBLE LEGS & ATTACH TO ROOF FRAME *Use bolts as shown in illustrations.*

A. Assemble Corner and Middle legs.

B. Attach legs with bolts on one side of roof frame, let the other side of roof frame rest on the ground.

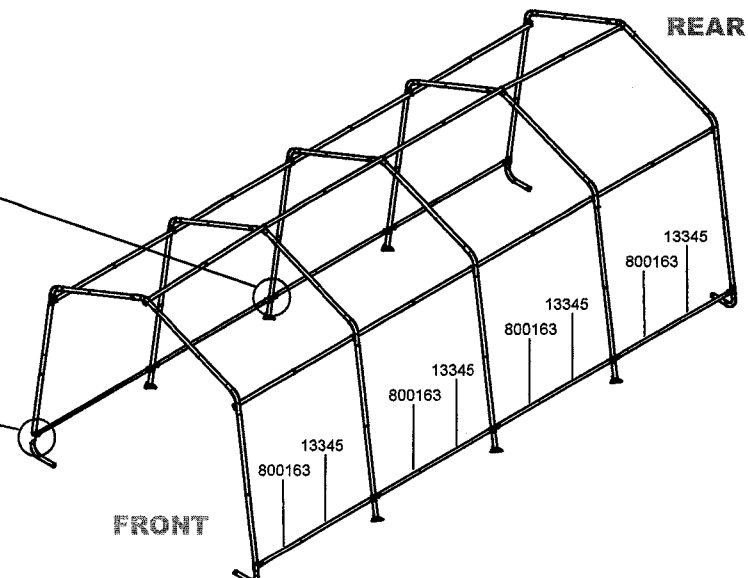
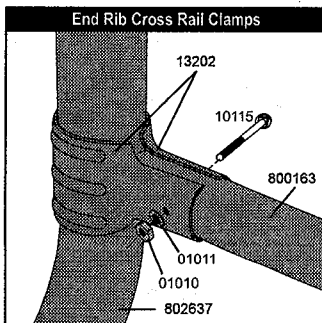
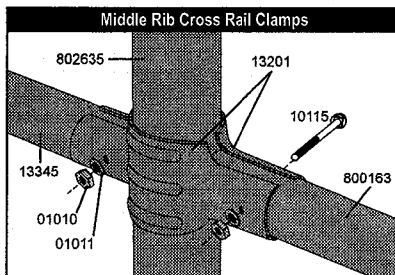
C. Attach remaining legs with bolts to opposite side of roof frame.



4. ASSEMBLE COVER RAILS

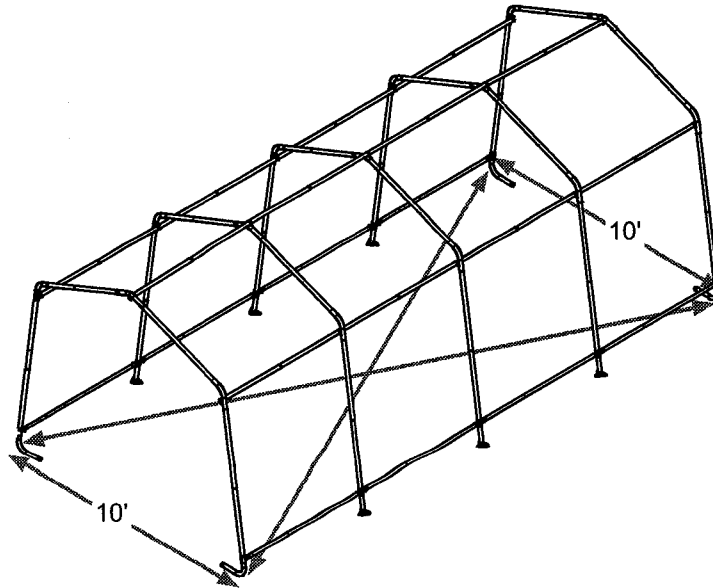
A. Place the cover rail (800163, 13345) at each leg and secure it at each leg with a cover clamp as shown below.

B. Slide the cover rails so they are 8" up from the ground and **hand tighten bolts on clamps**.



5. SQUARING UP THE FRAME

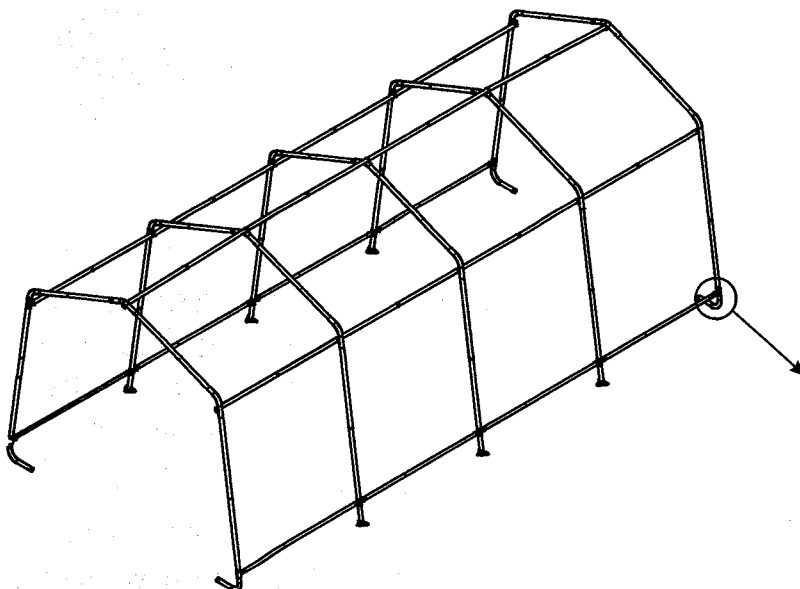
- A. Place frame in its final location, which needs to be as flat and level as possible.
- B. Measure across opposite corners. **These distances must be equal to within 1".**
- C. Check that the front and rear of the frame measures 10' in width.



6. PROPERLY ANCHOR THE FRAME

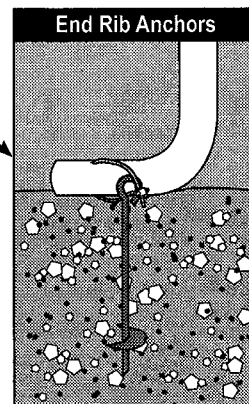
WARNING: Serious injury to persons or property could result if cover is installed and shelter is not anchored and is left unattended. Shelter **MUST** be securely anchored.

- A. Anchors must be placed inside shelter at the corners of the shelter.
- B. Insert a $\frac{3}{4}$ " pipe or steel rod, through the eyelet of the auger and screw the anchor into the ground until the eyelet is sticking out of the ground by 1-2" so it can be anchored to the legs.
If ground is too hard, dig a hole with a shovel or post hole tool. Optional: Fill with cement.
- C. Wrap cable provided through the eyelet of the anchor and around the frame as shown below. Secure the cable with the clamps provided.



NOTE:

15" Augers are for temporary use only! For best results ShelterLogic recommends using our Easy Hooks (#10036 4-pack, #10035 6-pack, or #10038 8-pack) or 30" Augers (#10075 4-pack, #10078 6-pack, or #10079 8-pack) for a stronger, more secure installation.



Call 1-800-524-9970
or visit
www.shelterlogic.com
for more information.

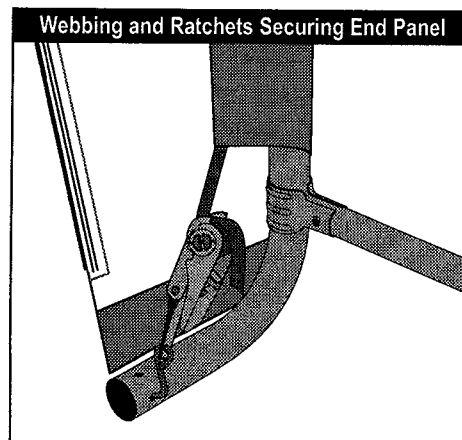
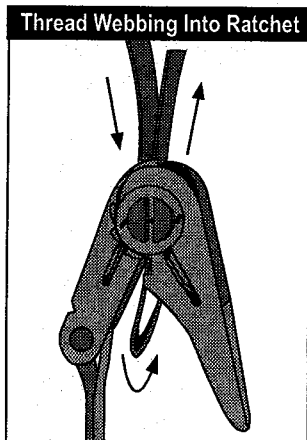
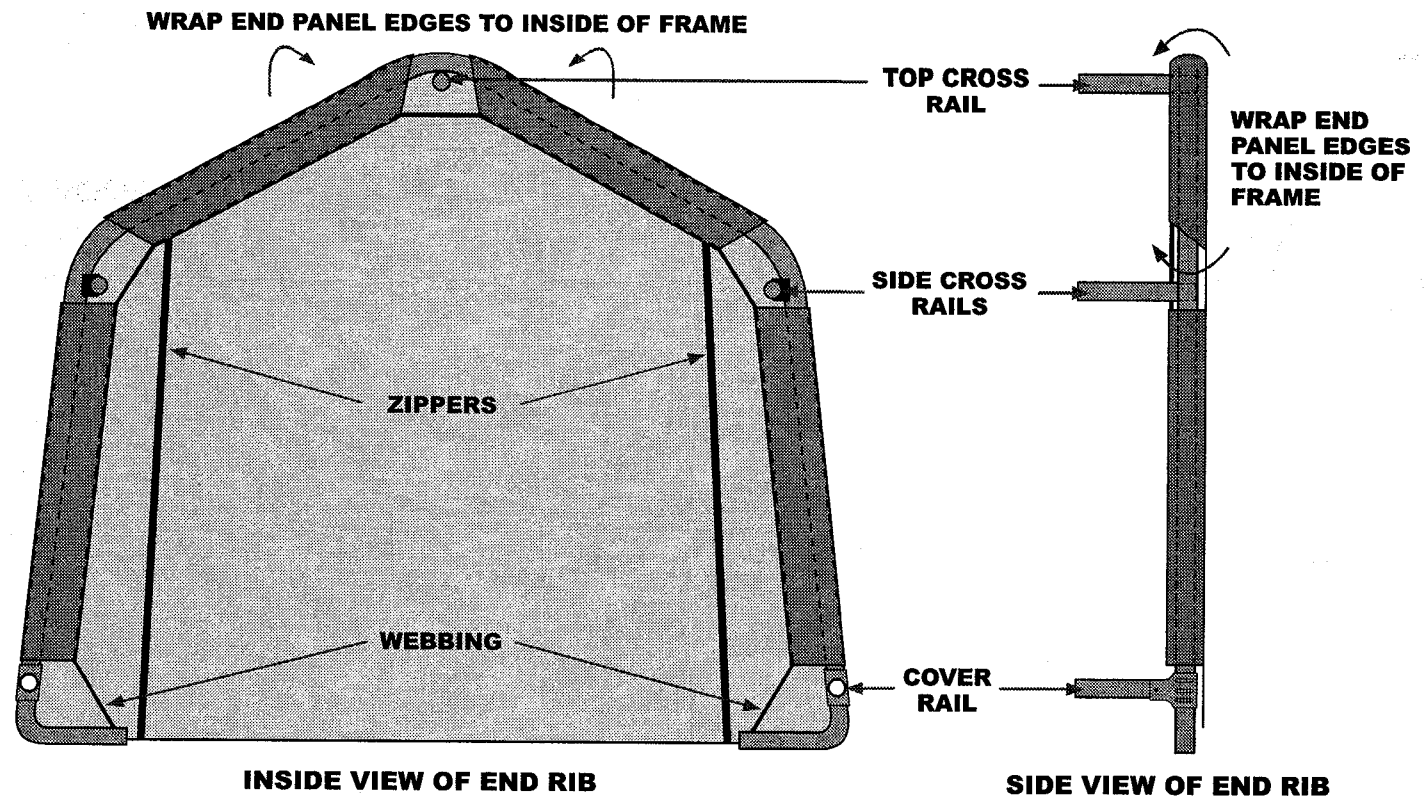
7. DOOR AND SOLID END PANEL INSTALLATION

- Hold end panel at the top center with white inner surface facing inside of the shelter. Wrap the edges of the fabric panel around the end rib.
- Disconnect top rail from the end rib. Pass the top cross rail through the gap in the fabric, in between the webbing and rib frame. Re-attach top cross rail to end rib. Repeat Step B for side cross rails.
- At the bottom, where the webbing exits the pocket on each side of end panel, pull webbing to remove the slack. **Be careful not to pull the webbing through the other side of the webbing pocket.**
- Insert the "S"- Hook on ratchet into hole on the leg bend. Insert the webbing into the spindle of the ratchet and pull tight. Wind the ratchet so that the webbing overlaps itself.

Position the end panel so that it is centered on the building before fully tightening the end panel.

- Tighten ratchets, alternating from one side to the other, until the end panel is centered and tight.

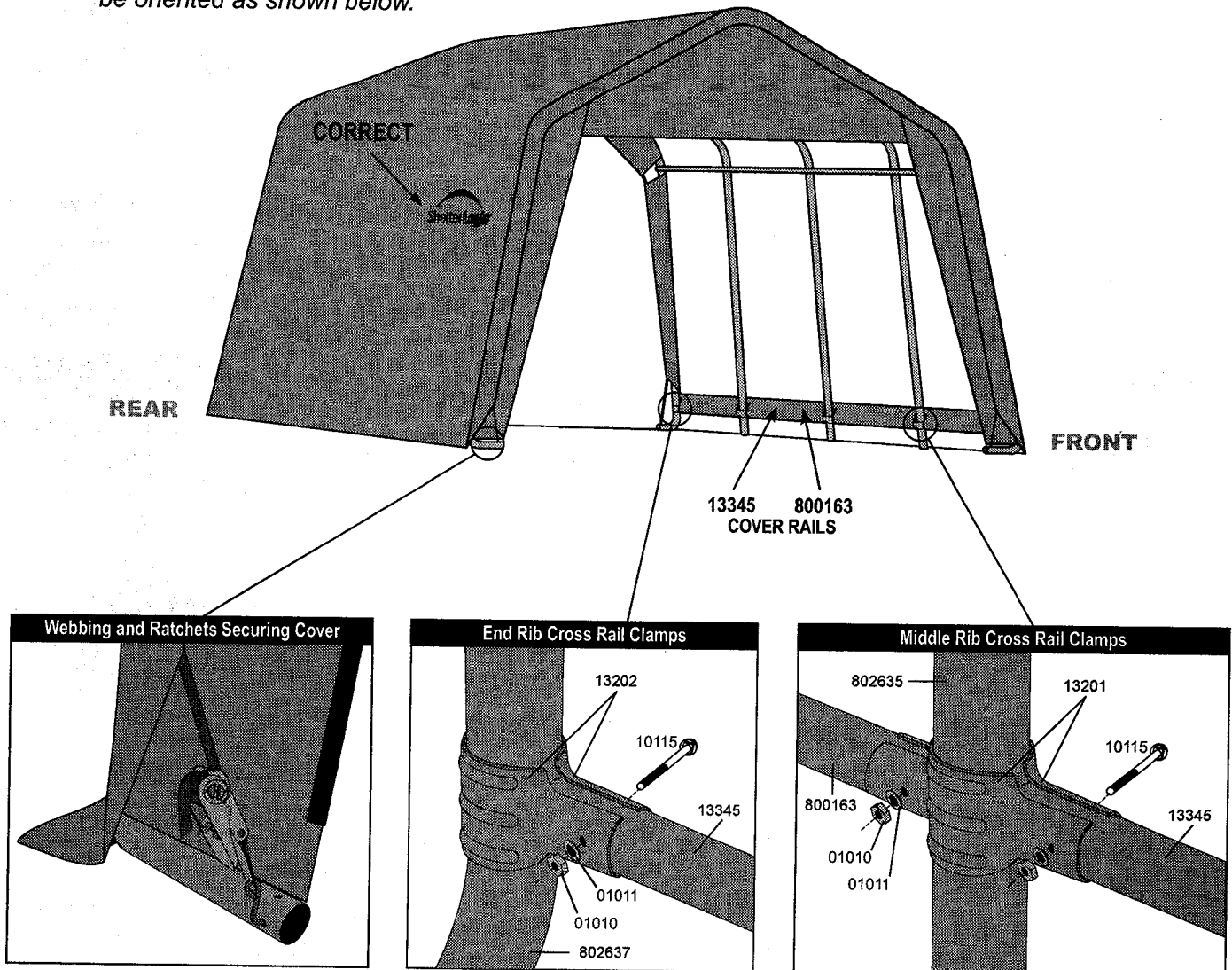
Zipper Door Panels: Zippers must be closed when tightening end panel.



8. INSTALLING COVER AND COVER RAILS

- A. Lay the cover on the ground next to the frame with inside of the cover (the side with the pipe pockets) facing down and the webbing on the front and rear of the corner of the building.
- B. Pull cover over the frame, making sure to center cover on frame. There should be an equal amount of overhang at all four corners.
- C. Insert the "S"- Hook on ratchet into hole on the leg bend. Insert the webbing into the spindle of the ratchet and pull tight. Wind the ratchet so that the webbing overlaps itself.
- D. Disassemble cover rails and slide through fabric pockets at each leg and reattach with clamps to each leg. Repeat this on other side. Push down on cover rails to tighten cover, before tightening bolts completely.
- E. Check and tighten Ratchets and Cover Rails monthly to ensure the cover is tight.

NOTE: The **ShelterLogic®** logo should be oriented as shown below.



ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 842 LOT: 2102 ADDRESS: 1720 W Princeton Ave Brick, NJ

IDENTIFICATION:

1. WORK SITE ADDRESS: 1720 W Princeton Ave Brick

2. NAME OF OWNER IN FEE: Mary Jane Pella

ADDRESS: 1720 W Princeton Ave PHONE: [REDACTED]

Brick NJ 08124 FAX #: () _____

3. PRINCIPAL CONTRACTOR: _____

ADDRESS: _____ PHONE #: () _____

FAX #: () _____

4. ARCHITECT OR ENGINEER: _____

ADDRESS: _____ PHONE #: () _____

5. RESPONSIBLE PERSON FOR WORK: _____

ADDRESS: _____

PHONE #: () _____ FAX #: () _____ E-MAIL: _____

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☒ OTHER 10x20x8 auto shelter

LENGTH: 10 WIDTH: 20 HEIGHT: 8

ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE REJECTED: _____

DATE APPROVED: _____ INITIALS: _____

FEE SUMMARY:

APPLICATION FEE: \$ _____

REVIEW FEE: \$ _____

INSPECTION FEE: \$ _____

OTHER: \$ _____

BOND(S): \$ _____

TOTAL: \$ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

TOWNSHIP OF BRICK

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

John G. Ducey, Mayor

Department of Community Development & Land Use

Township Council:

Susan Lydecker - President
Jim Fozman - Vice President
Heather deJong
Bob Moore
Paul Mummolo
Marianna Pontoriero



732-262-1027

Fax: 732-262-2941
www.twp.brick.nj.us

Date: 1/23/14

ENGINEERING PLOT PLAN EXEMPT FORM (ONLY IF NOT IN A FLOOD ZONE)

Block: 842 Lot: 27.02

Property Address: 1720 W Princeton Ave Brick

I, Mary Jane Petillo of 1720 W Princeton Ave
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Township Code, Chapter 245, Section 245-29.


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: _____ Signed: _____

Rejected on: _____ Signed: _____

Comments:



LOT 29.02

100.00	100.00
--------	--------

LOT 29.02

Proposed
Memorial
Structure

OLDEN STREET
100 A FIRST STREET
(TO ROOM - 5M & 7M)

WEST PRINCETON AVENUE

[illegible]

NOTICE TO THE PUBLIC

[illegible][illegible]

SURVEY OF PROPERTY
PREPARED FOR
MARY JANE PETILLO
RESIDING IN THE
TOWNSHIP OF THURCK

OCEAN COUNTY
TOWNSHIP OF BRICK
NEW JERSEY

ROBERT T. J. REAB, JR.,
PROFESSIONAL, LAND SURVEYOR & PLANNER

JACKSON, NEW JER

11/20/83 07:00

DATE:	FILED:
-------	--------

2/10 04:1

ALLNAYKI

100

ROBERT RAHAR,
PROFESSOR, LAND SURVEYING & PLANNING
N.J.P.S. INC., No. 3397, P.P. 1K², No. 4048

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	<i>[Signature]</i>	12/14							2A-14-006266
☐ 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	
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
☐ 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. _____	_____	_____