

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

James Shepherd

Date

9/2/99

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									IMPORTANT A.H.B.T. - EXEMPT
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition _____

Name of Code & Edition _____

Building _____	Energy _____	Other _____
Electrical _____	Barrier Free _____	
Plumbing _____	Flood Hazard _____	
Fire Protection _____	As Built Elevation Cert. _____	
Mechanical _____	Other _____	

X. CERTIFICATES ISSUED (office use only)

	DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Approval	No. _____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

0004
3492**
BLOCK 842 # 0.00
LOT 30 # 0.00
BUILDING 171.00
D.C.A. 10.00
ZONE/LOT 15.00
ENG P.R. 15.00
TOTAL 211.00
CHECK 211.00
CHANGE 0.00
0015A005 11:20

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 09/14/99
Control #
Permit # 99-3492

IDENTIFICATION Block 842 Lot 30 Qual 09/14/99

Work Site Location 1704 W PRINCETON AVE
Owner In Fee SHEPHERD, JAMES & KAREN
Address SAME
Telephone BRICK, NJ 08724-
Contractor HOME OWNER
Address
Telephone ()
Lic. No. or Bids. Reg. No.
Federal Emp. No. HQ-

Is hereby granted permission to perform the following work:
[X] BUILDING [] PLUMBING [] LEAD HAZARD ABATEMENT
[] ELECTRICAL [] FIRE PROTECTION [] DEMOLITION
[] ELEVATOR DEVICES [] ASBESTOS ABATEMENT [] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
REMOVE 1 CAR GARAGE W/ NO UTILITIES
CONSTRUCT DETACHED 2 CAR GARAGE 20X22X16

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 \$ 12,000

Construction Official [Signature] Date 09/14/99

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

PAYMENTS (Office Use Only)
Building 171
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other 0
DCA Training Fee 10
Cert. of Occupancy 0
Total 211 - 181
Check No. 2435
Cash
Collected By JL

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 09/02/99
Date Issued 9/14/99
Control # C8-230
Permit # 99-3492

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

Block 842 Lot 30 Qual
Work Site Location 1704 W PRINCETON AVE

DENRO GARAGE/NEW GARAGE

Owner in Fee SERPERD, JAMES & KAREN

Address SAME

BRICK, NJ 08724-

Telephone

Contractor

Address

Tele. ()

lic. No. or Bldrs. Reg. No.

Federal Reg. No. NO-

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☒ No Plans Req.

☒ All

☐ Footing

☐ Foundation

☐ Frame

☐ Other

Joint Plan Review Required:

☐ Elect ☐ Plumbing ☐ Fire

SUBCODE APPROVAL ☐ Elev

☐ CO ☐ CCO ☒ CA

Date: 10-29-99

Approved By: [Signature]

INSPECTIONS

Type

☒ Footing

☐ Foundation

☐ Slab

☐ Frame

☐ BarrierFree

☐ Insulation

☐ Finishes

☐ Energy

☐ Mechanical

☐ TCO

☐ Other

☐ Final

☐ BarrierFree

Dates (Month/Day)

Failure Approval Initial

9/27/99

9/29/99

10/12/99

TYPE OF WORK

☐ New Building

☒ Addition

☐ Alteration

☐ Roofing

☐ Siding

☐ Fence

☐ Sign

☐ Pool

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☐ Other

☐ Demolition

FBS (Office Use Only)

176

28

0

0

0

0

0

0

0

0

0

0

B. BUILDING CHARACTERISTICS

Use Group Present R-3 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 440 Sq. Ft.

Volume of New Structure 5720 7-050 Cu. Ft.

Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ 11,200

2. Alteration \$ 800

3. Total (1+2) \$ 12,000

Industrialized Building:

☐ State Approved

☐ HUD

* changed in computer

09/14/99

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

REMOVE 1 CAR GARAGE W/ NO UTILITIES
CONSTRUCT DETACHED 2 CAR GARAGE 20122116

NO ATTIC STORAGE Allowed

C. CERTIFICATION IN LIBR OF DATA

I hereby certify that I am the (agent of) owner
of record and am authorized to make this application.

Paid ☐ Check #
Collected by: DCA Training Fee

Administrative Surcharge

Minimum Fee

TOTAL FBS

0

0

0

0

U.C.C. #110 (rev. 3/96)

TOWNSHIP OF BRICK
ZONING PERMIT

Permit Approved: September 9, 1999 No. 1999-1487

Block 842 Lot 30 Zone: R-7.5

Property Address: 1704 West Princeton Avenue

Owner: James Sheperd

Applicant: same

Phone: [REDACTED]

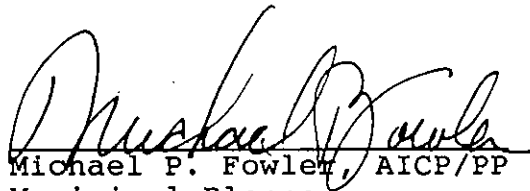
Existing Use: Vacant Lot

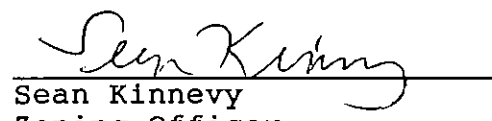
Proposed Use: Single-family residential

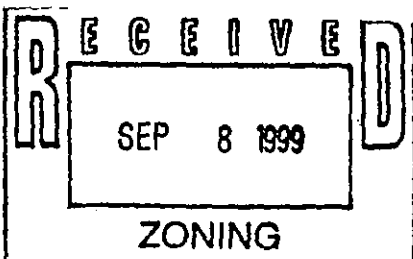
Proposed Construction: Demolish existing garage, construct new 20' x 22', 16' high 2 car garage

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

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.


Michael P. Fowler, AICP/PP
Municipal Planner


Sean Kinnevy
Zoning Officer



TOWNSHIP OF BRICK
Zoning Permit Application
(Please Type or Print Neatly)

BLOCK 842 LOT 30

PROPERTY ADDRESS (number and street) 1704 W. Princeton Ave. BRICK 08724
NAME OF PROPERTY OWNER James & Karen Shepherd
PERSONAL NAME OF APPLICANT James Shepherd
BUSINESS NAME OF APPLICANT _____
MAILING ADDRESS OF APPLICANT 1704 W. Princeton Ave. BRICK 08724
TELEPHONE NUMBER OF APPLICANT (732) 202-9156

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family Dwelling
☐ Commercial (please describe) Existing Garage to be Demd

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family Dwelling
☐ Commercial (please describe) _____

PROPOSED CONSTRUCTION New 2 Car Garage

☒ All dimensions: 20' Width 22' Length 16' Height
Deck or Garage: ☐ Attached ☒ Detached 16' Height
Fence: Style _____ Material _____ Height _____

CHECKLIST:

☒ All information completed above

☐ Two (2) copies of the property survey map 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

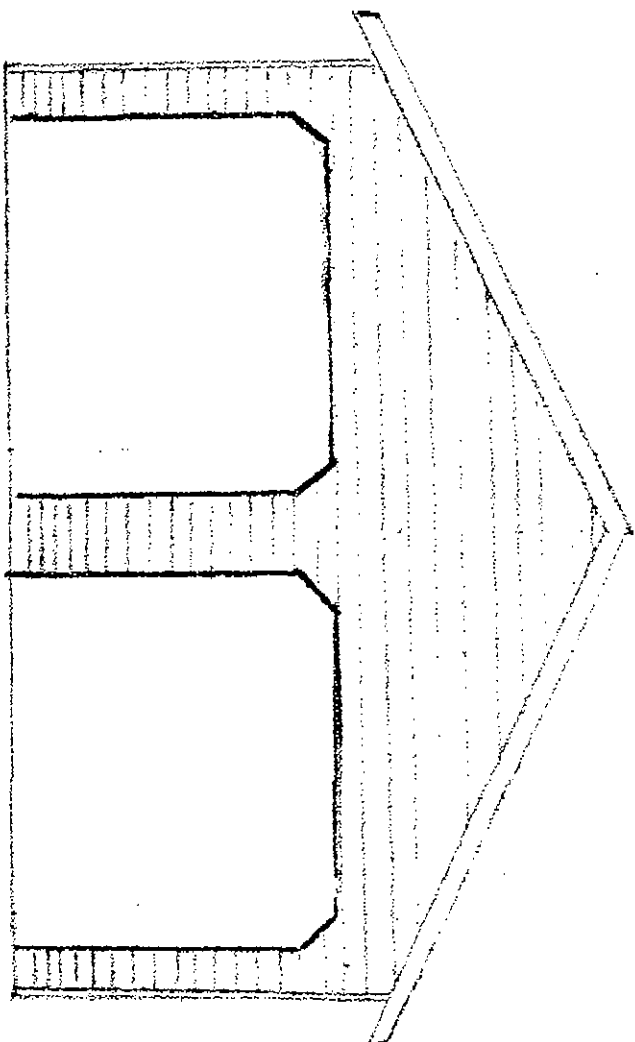
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the site map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

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.

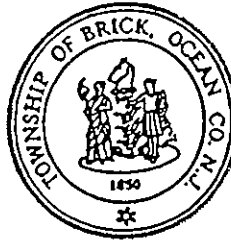
Signature of applicant James Shepherd Date 9/9/99
Reviewed by Zoning Officer _____ Date 9/9/99 ☒ Approved ☐ Rejected

James Jones and

Proposed detached garage 20' x 20'



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



Joseph C. Scarpelli, Mayor

Township Council:

Helen Fayad - President
Martin J. Anton
Victor Cantillo
Gregory S. Kavanagh
Mary Lou Powner
Kathy M. Russell
Frederick J. Underwood, Sr.

Department of Administration & Finance

Division of Inspections
Joseph Curiaza
Construction Official
(732) 262-1030
Fax (732) 262-8954
<http://www.gbshost.com/brick>
<http://www.twp.brick.nj.us>

Date: 9/2/99

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

RE: Block: 842 Lot: 30

I, James Shepherd of 1704 W. PRINCETON AVE.
(name) (address)
BRICK, N.J. 08724

~~request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book, Chapter 190-31, part B. The property (please circle one) is~~ is not located in a flood zone.

Respectfully yours,

James Shepherd
applicant's signature

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.
2. Proof that the property is not located in a Flood Hazard Area.

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

OFFICE USE

Approved ☒ Date: 9/13/99 By: [Signature]

Rejected ☐ Date: _____ By: _____

Remarks: _____

Applicable to Ordinance 728-92

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

TOWNSHIP OF BRICK

1704 W. PRINCETON AVE.
Work Site Address

842
Block

30
Lot

JAMES & KAREN SHEPHERD - 1704 W. PRINCETON AVE, BRICK 08724
Owner's Name, Address, Phone

JAMES SHEPHERD
Contractor's Name, Address, Phone

Detached
Construction 2 CAR GARAGE
Describe type (Single -family home, etc.)

Demolition Remove 1 Cen Garage Wood/
Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material

Name, address and phone of party responsible for removal of debris:

Size of dumpster: 20 YARD DUMPSTER

Destination of discarded debris: MANCHESTER DUMPS

Hauler's DEP Permit No.: _____

**Note: Any recyclable material, including, but not limited to: corrugated cardboard, vegetative waste, concrete, asphalt, clean wood, etc., must be delivered to an approved recycling center, and receipts provided to the Township of Brick along with tipping receipts for non-recyclable material.

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 or recycled in accordance with all applicable State and Federal laws and regulations, and that I have been authorized, in writing, to make such declarations by the person in charge of the generator's operation.

JAMES SHEPHERD
Printed/Typed Name

James Shepherd
Signature

9/2/99
Date

FOR OFFICE USE ONLY

MUST BE COMPLETED BEFORE CERTIFICATE OF OCCUPANCY OR CERTIFICATION OF APPROVAL IS ISSUED

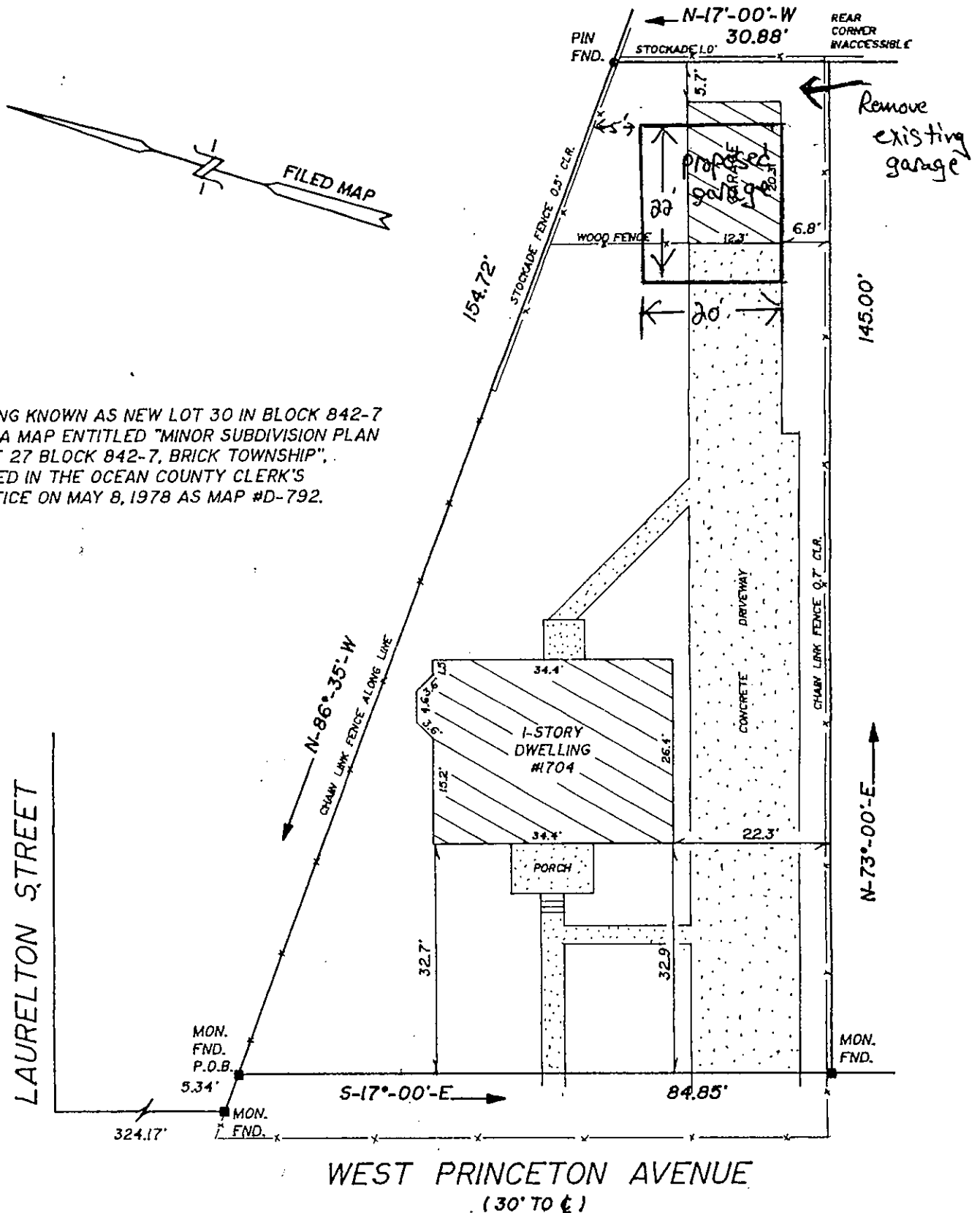
Recycling tonnage receipts attached? _____

Certified tipping receipts attached? _____

**Note: Receipts must show certified weights, date of disposal and name and address of disposal center.

DISTRIBUTION LIST:

1. Original to Code Enforcement Officer
2. Construction Code Office
3. Applicant



CHARLES O'MALLEY, P.L.S.

PROFESSIONAL LAND SURVEYOR
NEW JERSEY LIC. No. 34871
908 RIVERVIEW DRIVE
BRIELLE, NEW JERSEY, 08730
(732) 223-3141

PLAN OF SURVEY

LOT 30 BLOCK 842
TOWNSHIP OF BRICK
OCEAN COUNTY
NEW JERSEY

DRAWN BY E.J.	DATE BY C.O.M.	FILE NO. 99-5488	DATE 5/27/99	SCALE 1"=20'
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COUNTER FORM
PLEASE PRINT

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

Site Location: <u>1704 W. PRINCETON AVE.</u>	Date Rec'd: _____
Block: <u>892</u> Lot: <u>30</u>	Date Issued: _____
Owner in Fee: <u>JAMES + KAREN SHEPHERD</u>	Control #: _____
Address: <u>1704 W. PRINCETON AVE.</u>	Permit #: _____
<u>BRICK, NJ 08724</u>	
State: _____ Zip: _____ Phone: _____	_____
SS #: _____	Provide only if Applicant is owner

PLUMBING SUBCODE	BUILDING SUBCODE
CONTRACTOR: _____	CONTRACTOR: <u>JAMES SHEPHERD</u>
ADDRESS: _____	ADDRESS: <u>1704 W. PRINCETON AVE.</u>
	<u>BRICK, NJ 08724</u>
PHONE: _____	PHONE: _____
LIC #: _____	LIC #: _____
LIC EXPIRATION DATE: _____	LIC EXPIRATION DATE: _____
FEDERAL EMP. # (or S.S. #): _____	FEDERAL EMP. # (or S.S. #): _____
TECHNICAL SITE DATA (LIST ALL FIXTURES)	TECHNICAL SITE DATA
NO. FIXTURE/EQUIPMENT	DESCRIPTION OF WORK:
Water Closet	<u>Detached</u>
Urinal / Bidet	<u>2 Car Garage</u>
Bath Tub	<u>20 x 22</u>
Lavatory	<u>16' High</u>
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bibb	
Gas Piping	
Fuel Oil Piping	
Water Heater	
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor / Separator	
Backflow Preventer	
Greasetrap	
Water Cooled AC or Refrig. Unit	
Sewer Connection	
Septic (Disposal System) Closure	
Water Service Connection	
Gas Service Connection	
Active Solar System	
Vent Through Roof	
Other	
Estimated Cost of Plumbing Work: \$ _____	TYPE OF WORK
Signature: _____	☒ New Building
Owner ☐ Contractor ☐	☐ Addition ☐ Fence: _____ Height (6' or More)
SUBCODE APPROVAL: _____	☐ Alteration ☐ Sign: _____ Sq. Ft.
PLANS: Required ☐ Approved ☐	☐ Roofing ☐ Pool (In Ground)
Approved by: _____	☐ Siding ☐ Pool (Above Ground)
Date: _____	☐ Other: _____ ☐ Asbestos Abatement
CONTRACTOR AFFIX SEAL: _____	☐ Other: _____ ☐ Demolition
	BUILDING CHARACTERISTICS
	USE GROUP Present: _____ Proposed: _____
	CONSTR. CLASS Present: _____ Proposed: _____
	No. of Stories: _____
	Height of Structure: _____
	Area - Largest Floor: _____
	New Building Area / All Floors: _____
	Volume of Structure: _____ Total Land Disturbed: _____
	Signature: <u>James Shepherd</u>
	<u>800 Demo</u>
	Estimated Cost of Building Work: <u>11,200 Gm.</u>
	New Building (1): \$ _____
	Alteration (2): \$ _____
	TOTAL (1+2): \$ _____
	SUBCODE APPROVAL: _____
	PLANS: Required ☐ Approved ☐
	Approved by: _____
	Date: _____

ELECTRICAL SUBCODE			FIRE SUBCODE		
CONTRACTOR:			CONTRACTOR:		
ADDRESS:			ADDRESS:		
PHONE:			PHONE:		
LIC. #:		EXP. DATE:	LIC. #:		EXP. DATE:
FEDERAL EMPL. # (or S.S. #):			FEDERAL EMPL. # (or S.S. #):		
TECHNICAL DATA (LIST ALL FIXTURES)			TECHNICAL DATA (DESCRIPTION OF WORK)		
DESCRIPTION	QTY	SIZE			
ITEMS					
Lighting Fixtures					
Receptacles					
Switches					
Detectors					
Light Poles					
Motors - Fract. HP			Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar		
Emergency & Exit Lights			Heating Sys: ☐ New ☐ Existing		
Communications Points			Location of Furnace / Boiler		
Alarm Devices/E.A.C. Panel					
TOTAL NUMBERS					
Pool Permit w/UW Lights			Water Supply Source		
Storable Pool/Spa/Hot Tub			Method of Valve Supervision		
KW Elec. Range / Receptacle		KW	Local Alarm Supervision		
KW Oven / Surface Unit		KW	Central Supervision		
KW Elec. Water Heater		KW	Proprietary Supervision		
KW Elec. Dryer / Receptacle		KW			
KW Dishwasher		KW	Flammable Liquid Storage Tanks Capacity: _____		
HP Garbage Disposal		HP	Combustible Liquid Storage Tanks Capacity: _____		
KW Central A/C Unit		KW	L.G.P. Storage Tanks Capacity: _____		
HP/KW Space Heater/Air Handler		HP/KW	DESCRIPTION		
KW Baseboard Heat		KW	NUMBER		
HP Motors 1/+ HP		HP	Wet Sprinkler Heads		
KW Transformer/Generator		KW	Dry Sprinkler Heads		
AMP Service		AMP	Total		
AMP Subpanels		AMP	Smoke Detectors		
AMP Motor Control Center		AMP	Heat Detectors		
AMP Elec. Sign/Outline Light		KW	Total		
Other			Stand Pipes		
Other			Kitchen Hood Exhaust Systems		
Other			Pre-Engineered Systems		
Other			Co2 Suppression		
Estimated Cost of Electrical Work: \$			Halon Suppression		
Signature (print name):			Foam Suppression		
Estimated Cost of Electrical Work: \$			Dry Chemical		
Signature (print name):			Wet Chemical		
Owner ☐ Contractor ☐			Gas or Oil Fired Appliance		
SUBCODE APPROVAL:			Other		
PLANS: Required ☐ Approved ☐			Other		
Approved by:			Estimated Cost of Fire Protection Work: \$		
Date:			Signature:		
CONTRACTOR AFFIX SEAL:			Owner ☐ Contractor ☐		
			SUBCODE APPROVAL:		
			PLANS: Required ☐ Approved ☐		
			Approved by:		
			Date:		