



CONSTRUCTION PERMIT APPLICATION

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

1. IDENTIFICATION

1. Proposed Work Site at: 204 PAGE DRIVE BRICK NJ

2. Name of Owner in Fee: LEN NEBETSKI Tel. (732) 785-9583

Address 304 PAGE DR BRICK NJ 08723
street municipality zip code

3. Ownership in fee: Public _____ Private ✓

4. Principal Contractor: LEN NERBETSKI Tel. (732) 785-9583

Address 204 PAGE DR BRICK NJ 08723

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

Federal Employee No. _____ FAX: (____) _____

5. Architect or Engineer SAMIE Tel. ()

[illegible]

6. Responsible Person in Charge once Work has Begun GLEN NEBELSKI

Tel. 732 785-9583 FAX: ()

V. FEE SUMMARY (for office use only)

1.	Building	\$	12		
2.	Electrical				
3.	Plumbing				
4.	Fire Protection				
5.	Elevator Devices				
6.	Subtotal	\$	4		
7.	Less 20% for State Plan Review				
8.	Subtotal	\$			
9.	State Permit Fee Surcharge				
10.	Subtotal	\$			
11.	Cert. of Occupancy				
12.	Other 214		30		
13.	TOTAL	\$	106		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories		
2. Height of Structure	15	ft.
3. Area — Largest Floor		sq. ft.
4. New Building Area		sq. ft.
5. Volume of New Structure		cu. ft.
6. Construction Classification		
7. Total Land Area Disturbed		sq. ft.
8. Flood Hazard Zone		
9. Base Flood Elevation		ft.
10. Wetlands	yes	
	no	
11. Max. Live Load		
12. Max. Occupancy Load		

(office use only)

OPTIONAL (for office use only)

I. PROPOSED WORK	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Reviewer	Resubmission Dates Approval	Rejection	Reviewer
1. ☐ Minor Work		82	4/23/07		4-27-07	R	6/19/07		
2. ☐ New Building									
3. ☐ Addition									
4. ☐ a. Repair ☐ b. Alteration ☐ c. Renovation ☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abet. Subch. B									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition		Gm	4/27/07		4/27/07	M			
TOTAL COSTS	\$5000								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group. Indicate Former:
4. No. of dwelling units:

	<i>All Units</i>	<i>Income-restricted</i>
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:

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

10. ☐ Swimming Pools, Spas and Hot Tubs

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

- B. ☒ I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1 vii:
I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

- C. ☒ I further certify that I will perform or supervise the following work:

C.1. ☒ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical C.4. ☐ Plumbing

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

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

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

Signature _____

Date

4/18/07

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 _____	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. _____	_____	_____	_____



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 06/21/2007
Tracking Number C-07-001783
Permit Number 07-1099
Permit Issue Date 05/01/2007
Certificate Number 07-1099

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 204 PAGE DR. , NJ Block: 1205.04 Lot: 1 Qual: _____
Owner in Fee: NERBETSKI, LEONARD J & SARA H
Owner Address: 204 PAGE DR. BRICK NJ 08723
Telephone: (732) 785-9583
Contractor: NERBETSKI, LEONARD J & SARA H
Address: 204 PAGE DR. BRICK NJ 08723
Telephone: (732) 785-9583 Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Use:
DECK RESIDENTIAL

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

Date Printed: 06/21/2007

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1



CONSTRUCTION PERMIT

Date Issued 5/1/2007
Control # C-07-001783
Permit # 07-1099

IDENTIFICATION Block: 1205.04 Lot: 1 Qualifier _____
Work Site Location: 204 PAGE DR. , NJ Contractor NERBETSKI, LEONARD J & SARA H
Address 204 PAGE DR. BRICK NJ 08723
Owner in Fee NERBETSKI, LEONARD J & SARA H Telephone: (732) 785-9583
Address 204 PAGE DR. BRICK NJ 08723 Lic. No. or Bldrs. Reg. No. _____
Telephone: (732) 785-9583 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:

DECK RESIDENTIAL

Note: If construction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work \$3,000

Construction Official _____

Date _____

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$72
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$4
CO Fee	
Other	\$30
Total	\$106
Check No.	7141
Cash	\$0
Credit	\$0
Collected By	Inspection Account

REQUIRED INSPECTIONS

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

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

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

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

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

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

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

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

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



BUILDING SUBCODE TECHNICAL SECTION



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

Block 120504 Lot 1-6 Qualification Code 08723

Work Site Location 204 PAGE DR BRICK NJ 08723

Owner in Fee LEW NIEBETSKI
Address 204 PAGE DR BRICK NJ 08723

Tel. (732) 785-9583 FAX ()
Contractor LEW NIEBETSKI
Address SATM

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Dates (Month/Day)
☒ No Plans Required			Time: <u>5-2-07</u>	Failure	Initial
☒ All	<u>4-17-07</u>	<u>fm</u>	Footings		
☐ Footing			Foundation		
☐ Foundation			Slab		
☐ Frame			Frame		
☐ Other			Truss Sys/Bracing		
Joint Plan Review Required:			Barrier-Free		
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation		
SUBCODE APPROVAL			Finishes -Base Layer		
☐ CO ☐ CCO			Energy		
Date: <u>6-19-07</u>			Mechanical		
Approved by: <u>FM</u>			TCO		
			Final		
			Permit-Free		

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed
Constr. Class	<u>1</u>	
No. of Stories	<u>15</u>	
Height of Structure	<u>15</u>	
Area - Largest Floor		
New Bldg. Area/All Floors		
Volume of New Structure		
Total Land Area Disturbed		

Est. Cost of Bldg. Work:

1. New Bldg.	\$ <u> </u>
2. Rehabilitation	\$ <u> </u>
3. Total (1+2)	\$ <u>3000.00</u>

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 LEW NIEBETSKI

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Deck

TYPE OF WORK:

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

FEE (Office Use Only)

Administrative Surcharge	\$ <u> </u>
Minimum Fee	\$ <u> </u>
State Permit Surcharge Fee	\$ <u> </u>
TOTAL FEE	\$ <u> </u>

Date Received 07-10-09
Control # 5-1-07
Date Issued
Permit #



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 9120504 Lot 1-6 Qualification Code 08722

Work Site Location 204 PAGE DR BRICK NJ 08722

Owner In Fee DIEN NIEBETSKI

Address 204 PAGE DR BRICK NJ 08722

Tel. (932) 785-9583

Contractor DIEN NIEBETSKI

Address SHAME

Tel. (932) 785-9583

FAX ()

Contractor License No. or Builder Registration No.

Federal Emp. No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Type	Failure	Dates (Month/Day)	Initial
☒ No Plans Required							
☒ All	<u>4/27/07</u>	<u>km</u>					
☐ Footing							
☐ Foundation							
☐ Frame							
☐ Other							
Joint Plan Review Required:							
☐ Elec.	☐ Plumb	☐ Fire	☐ Elevator	Insulation			
SUBCODE APPROVAL				Barrier-Free			
☐ CO	☐ CCO	☐ CA	Finishes - Base Layer				
Date:				Finishes - Final			
Approved by:				Energy			
				Mechanical			
				TCO			
				Other			
				Final			
				Barrier-Free			

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class	<u>Present</u>	<u>Proposed</u>	1. New Bldg. \$
No. of Stories	<u>1</u>		2. Rehabilitation \$
Height of Structure	<u>15</u>		3. Total (1+2) \$ <u>3000.00</u>
Area — Largest Floor			
New Bldg. Area/All Floors			
Volume of New Structure			
Total Land Area Disturbed			

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 [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Deck

TYPE OF WORK:

☐ New Building	Height (exceeds 6')
☐ Addition	Sq. Ft.
☐ Rehabilitation	
☐ Roofing	
☐ Siding	
☐ Fence	
☐ Sign	
☐ Pool	
☐ Asbestos Abatement Subchapter 8	
☐ Lead Haz. Abatement NJAC 5:17	
☐ Other	
☐ Demolition	

FEE (Office Use Only)

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

Date Received
Control #
Date Issued
Permit #

02-11-09
5-1-07

**Township of Brick
Zoning Permit**

Approved: Wednesday, April 25, 2007 **Number:** 447

Block 1205 **Lot** 1 **Zone:** R-7.5

Property Address: 204 Page Drive

Applicant: Len Nebetski

Property Owner: Glen Nebetski

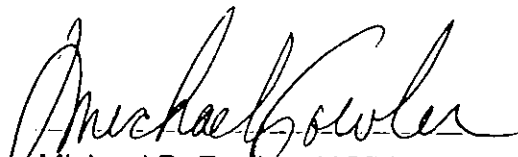
Existing Use: Single Family Residential

Proposed Use: Single Family Residential

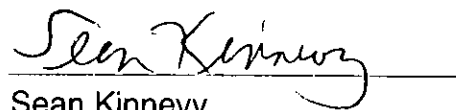
Proposed Construction: Attached deck surrounding existing swimming pool
20' x 29', 50" high.

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

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


Michael P. Fowler, AICP/PP

Principal Planner



Sean Kinnevy

Zoning Officer

(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.**

March 2003-----

4/23/09

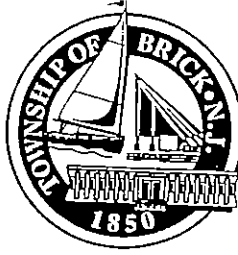
TOWNSHIP OF BRICK

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

Daniel J. Kelly, Mayor

Township Council:

Stephen C. Acropolis - President
Ruthanne Scaturro - Vice President
Anthony Matthews
Kathy M. Russell
Joseph Sangiovanni
Michael A. Thulen, Sr.
Dan Toth



Department of Engineering

Office of the Municipal Engineer

732-262-1040

Fax: 732-262-8954

www.twp.brick.nj.us

Date: 4/18/07

PLOT PLAN EXEMPT FORM

Block: 12'05 Lot: 1-6

Property Address: 204 PAGE DR BRICK NJ 08723

I, BIEN NEBETSKI of 204 PAGE DR BRICK
(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 Brick Land Use Book Chapter 190.31, Part B.

Applicant's Signature

The following shall be submitted with this request:

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

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

FOR OFFICE USE ONLY

Approved on: 4/27/07

Signed:

Rejected on: _____

Signed: _____

Comments:



EXISTING
HOUSE

DOOR

EXISTING DECK
DECK HEIGHT
15"

DECK
HEIGHT
15"

DECK
HEIGHT
50"

1 STEP
Down

STAIRS
5 STEPS
UP

DECK
HEIGHT
50"

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

DECK HEIGHT
50"

--- NEW DECK

Plan Review
Zoning pool deck 4/20/07 RC
Plumb
Builder 4-27-07
Fire

Deok

$$\leftarrow 3' \rightarrow$$

EXISTING
Pool

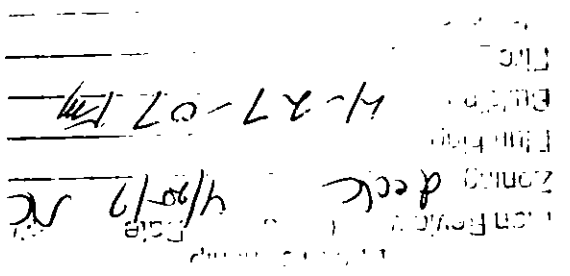
Plan Room _____ Date 4/20/17 HC
Zoning pool deck
Plumbing _____
Build # 4-27-07
Fire _____
Electric _____

☒ FOOTINGS 12'x12'x36"

--- NEW DECK

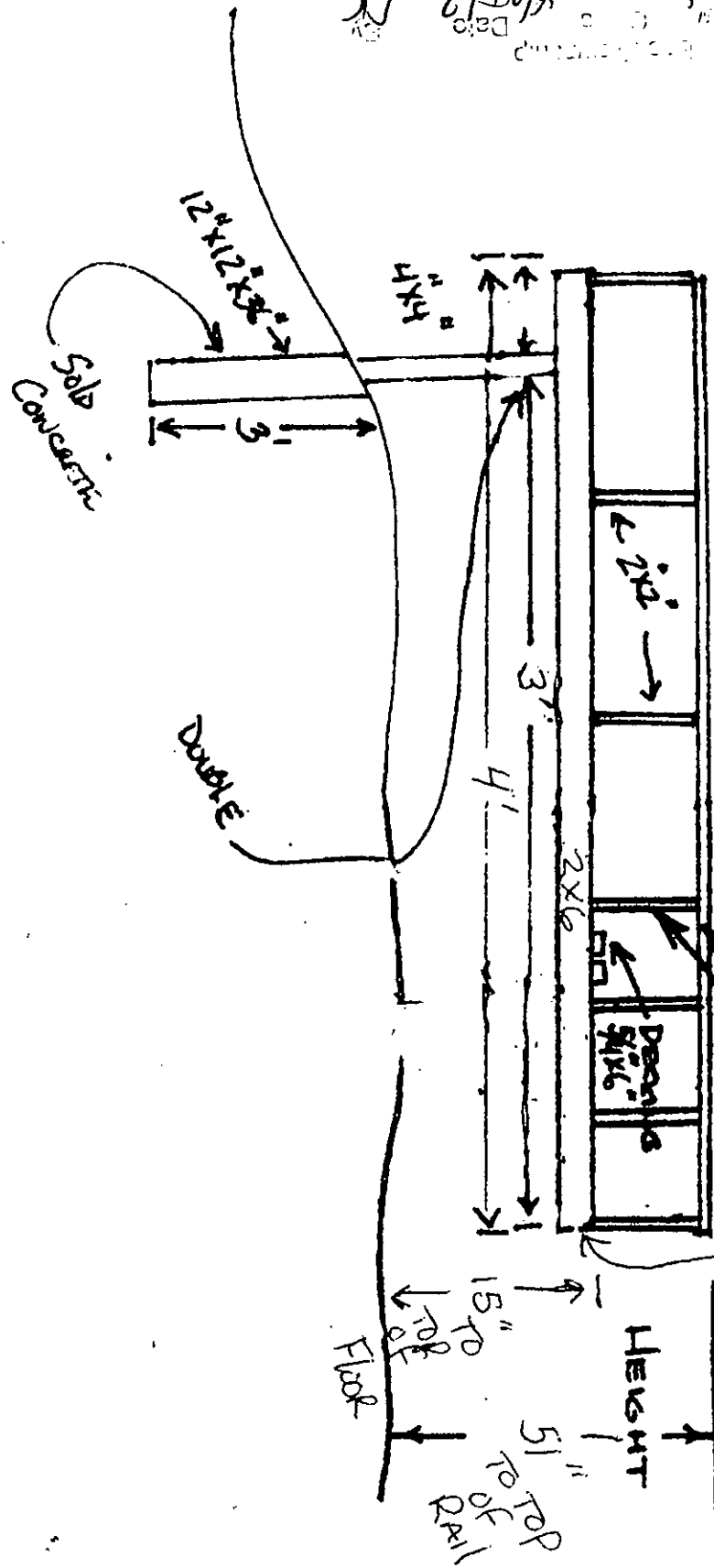
3

۷۲



MAIN DECK
20' X 13'

Plan Review: *Dec*
 Zoning: *Dec*
 Plumbing:
 Building: *4-27-07*
 Fire:
 Title:



SIDE DECK
 4x11'

SIDE VIEW
 * FRAMING SECTION

2x6 BATTED TO
 EXISTING HOUSE + DECK
 3

HEIGHT

51" TOP
 15" TOP
 OF
 DECK

Floor

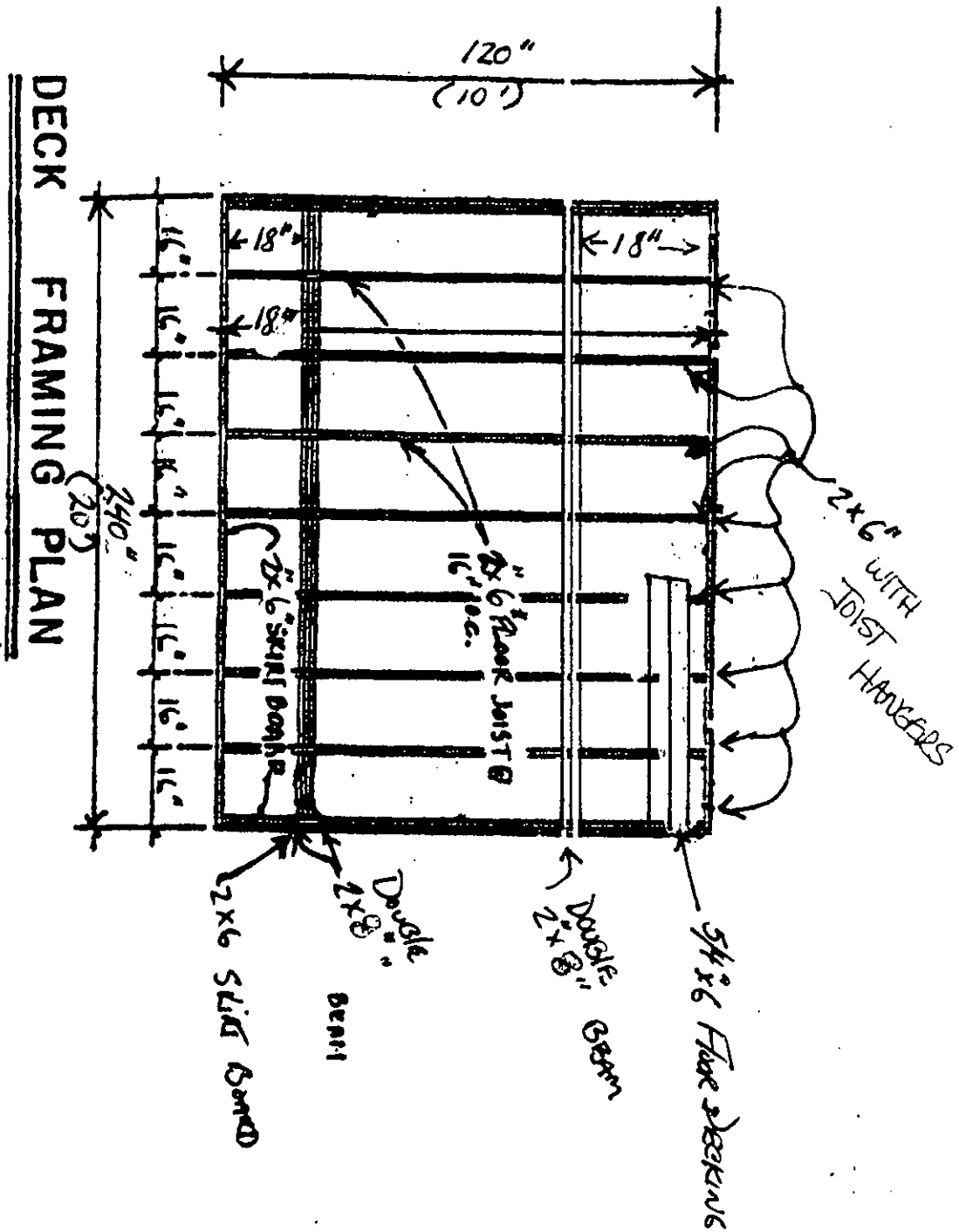
DOUBLE

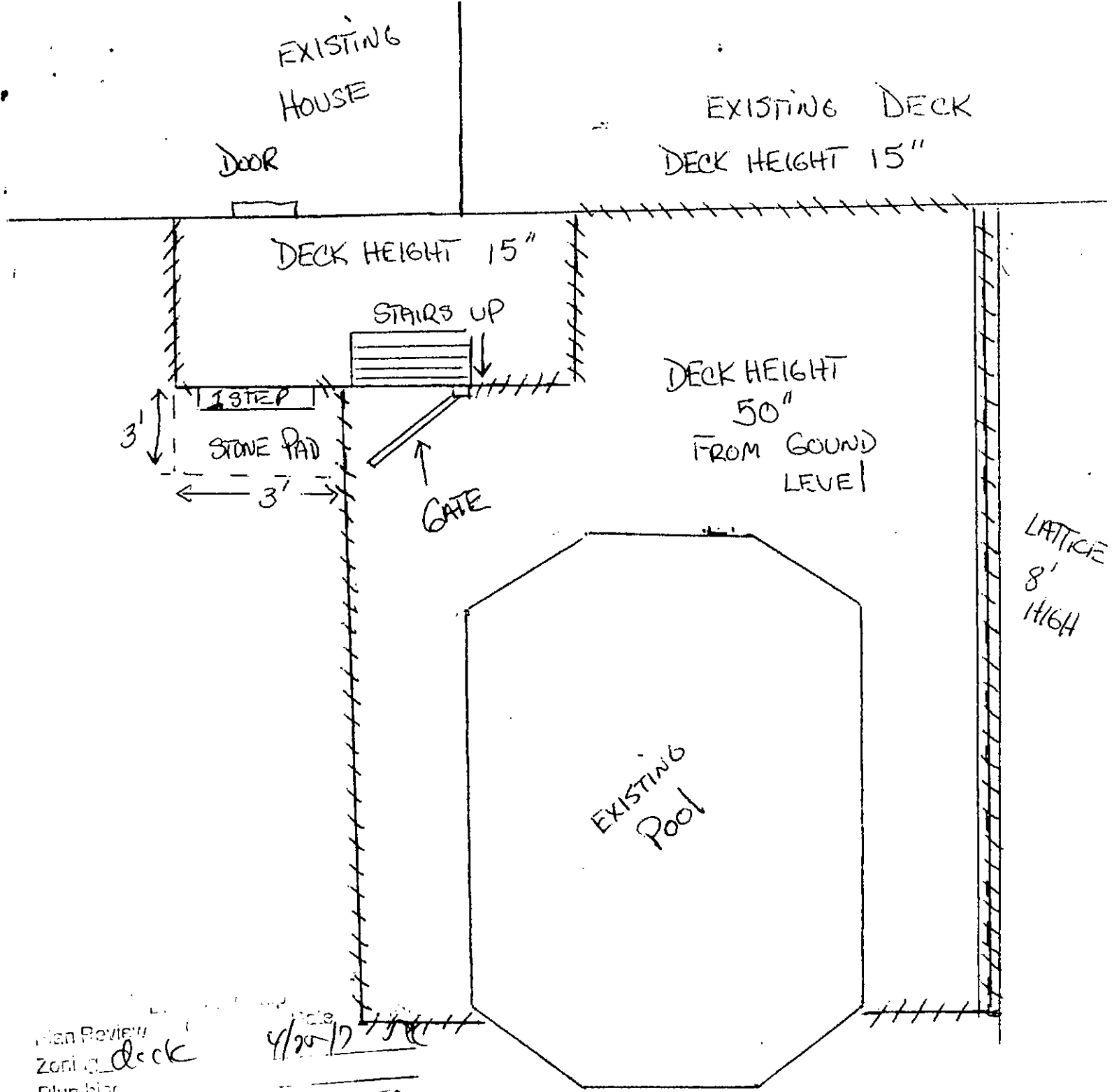
Solo
Concrete

SIDE DECK

4x11'

Plan Review
 Date 4/20/19
 By JEC
 Zoning DEC
 Planning
 Building 4-27-0713P
 File
 Title



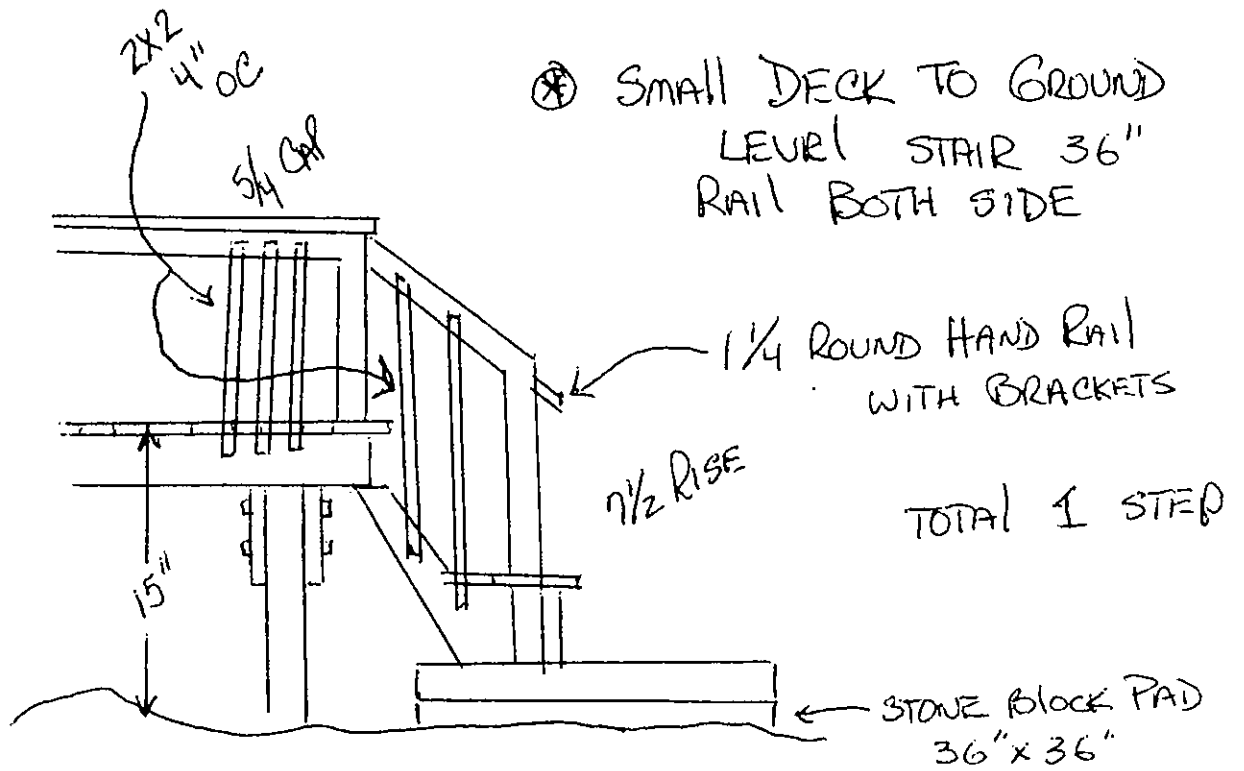


* NEW DECK WITH STAIR + RAIL LOCATIONS

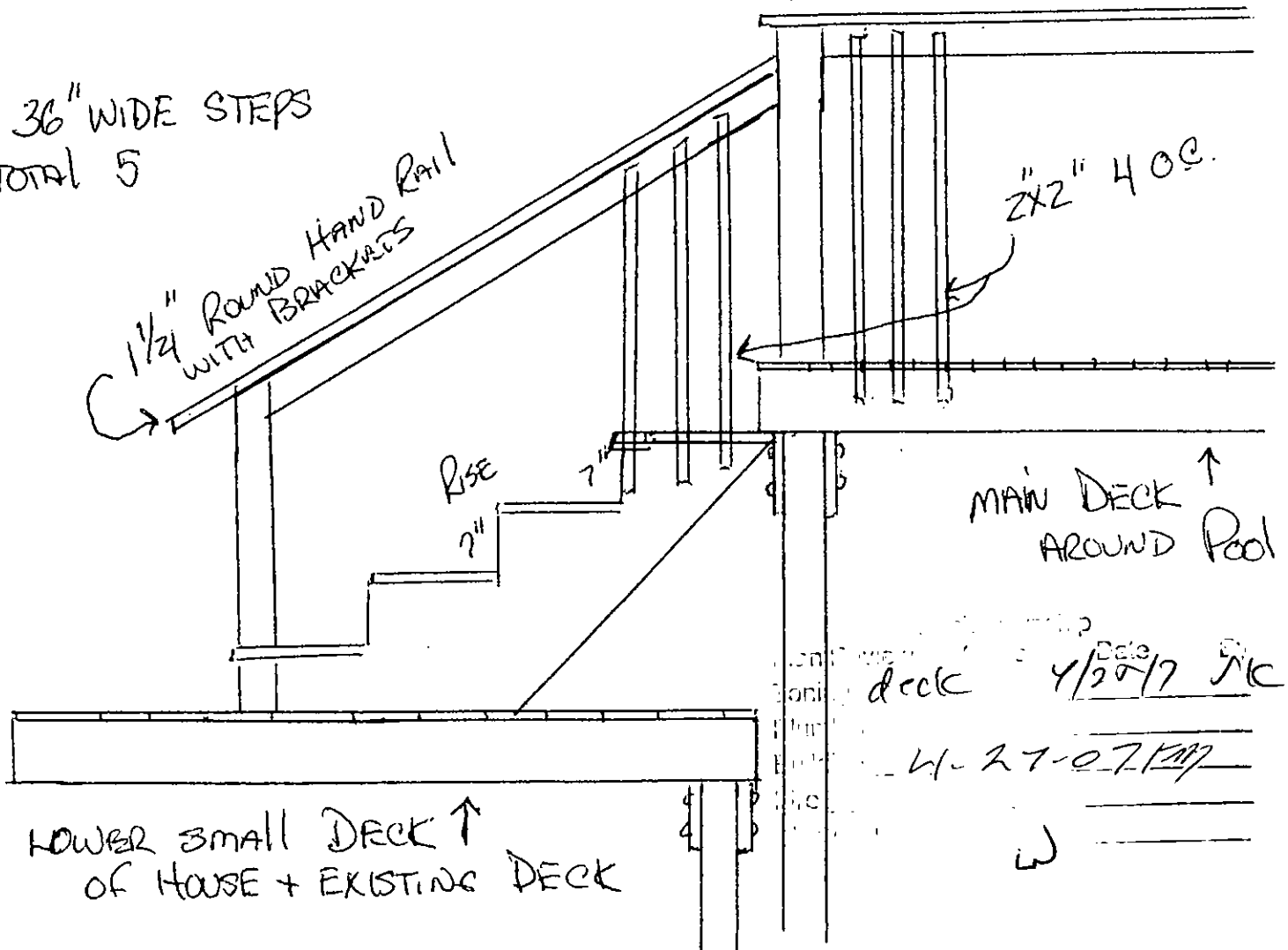
RAIL

LATTICE

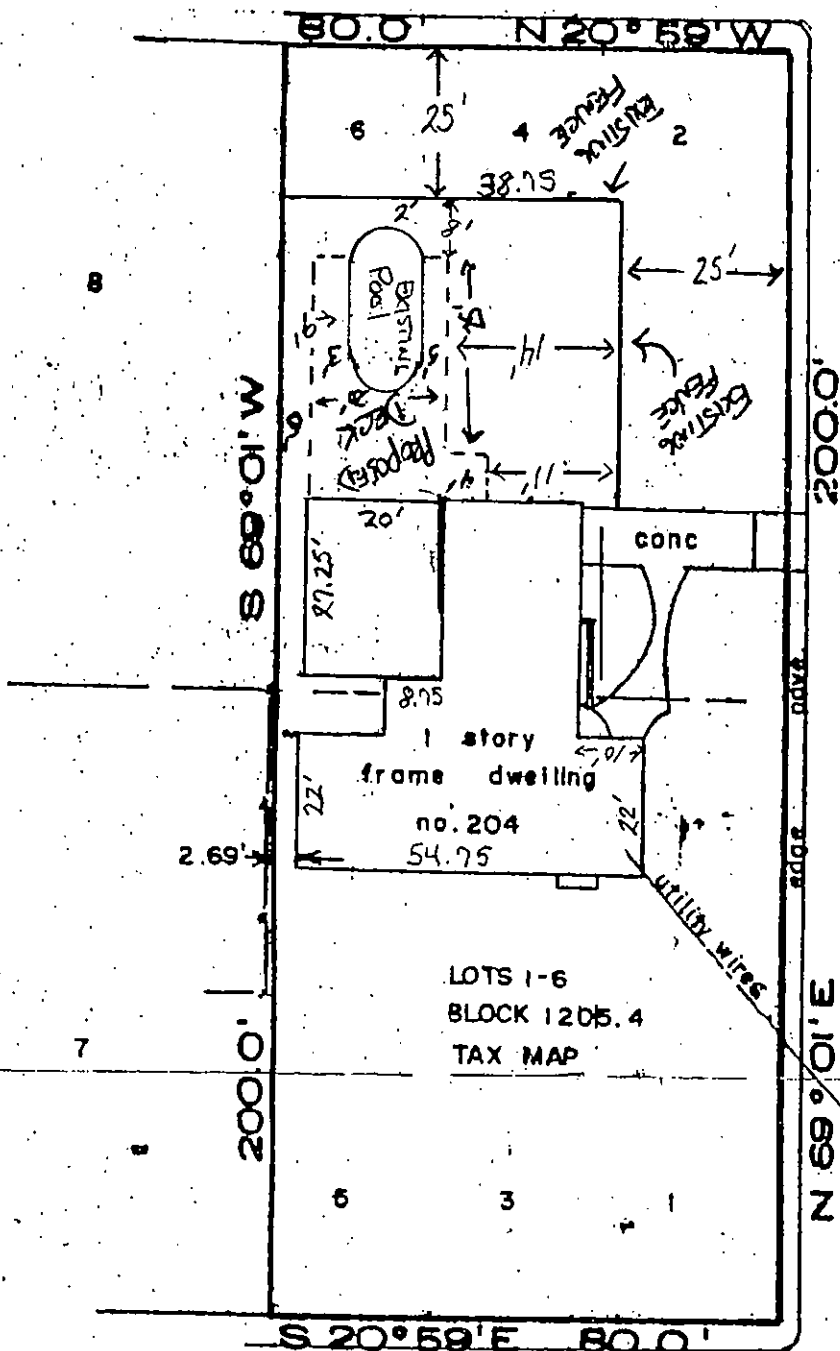
LW



36" WIDE STEPS
TOTAL 5



VERONICA DRIVE



PAGE DRIVE

NEW DECK

APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER

APR 24 2007

GEORGE'S ROAD

CERTIFIED TO: SALVATORE O. SANTOLLA AND MAURA C. DEMPSEY, INVESTORS
TITLE AGENCY, INC./ TRANSAMERICA TITLE INSURANCE COMPANY, CENLAR FEDERAL
SAVINGS BANK, AND/OR ITS SUCCESSORS AND ASSIGNS AND RAYMOND F. FAHEY, ESQ.

BEING KNOWN AND DESIGNATED AS LOTS 1 THRU 6, BLOCK 4 ON PLAN OF THE
DEVELOPMENT OF RIVERLAND, MADE SEPT. 29, 1953 BY CARL C. EVANS, C.E.
AND FILED IN THE OCEAN COUNTY CLERK'S OFFICE ON JAN. 7, 1955, MAP B-374

SURVEY OF PROPERTY

BRICK TOWNSHIP
SCALE 1"=30'

OCEAN COUNTY, N.J.
JUNE 21, 1987
LIC. NO. 15106

WALTER J. PARTINGTON
licensed land surveyor

OFFSET DIMENSIONS FROM STRUCTURES
TO PROPERTY LINES SHOWN HEREON ARE
NOT TO BE USED FOR ESTABLISHING
PROPERTY LINES

THIS SURVEY WAS MADE BY MEASURING THE DISTANCES BETWEEN THE CORNERS OF THE LOTS AND THE CORNERS OF THE ADJACENT LOTS. THE DISTANCES WERE MEASURED BY THE SURVEYOR OR HIS ASSISTANT. THE DISTANCES WERE MEASURED BY THE SURVEYOR OR HIS ASSISTANT. THE DISTANCES WERE MEASURED BY THE SURVEYOR OR HIS ASSISTANT.