BLOCK 1205.05 LOT 8 & 9 QUALIFICATION CODE _____ ADDRESS (SITE) 205 Georges Rd. PERMIT NO. 06 1149

Called 4-21-06

CONSTRUCTION PERMIT APPLICATION

C06-0843

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

I. IDENTIFICATION

1. Proposed Work Site at: 205 Georges Rd.
2. Name of Owner in Fee: King Contractors Tel. (732) 920-6441
   Address 2597 Hooper Ave (street) Brick (municipality) NJ 08723 (zip code)
3. Ownership in fee: Public _____ Private ✓
4. Principal Contractor: King Contractors Tel. (732) 920-6441
   Address 2597 Hooper Ave Brick, NJ 08723
   License No. OR, if new home, Builder Reg. No. 27168 Exp. Date 2/28/06
   Federal Employee No. 22-3673814 FAX: (732) 920-2944
5. Architect or Engineer David Hartdorn Tel. (732) 899-1608
   Address 332 Deer foot lane Contact _____
6. Responsible Person in Charge once Work has Begun ~~King Contractors~~
   Tel. (732) 920-6441 FAX: (732) 920-2944

mail person

SFD

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 1038		
2.	Electrical	145		
3.	Plumbing	390		
4.	Fire Protection	205		
5.	Elevator Devices	Fees 0		
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	State Permit Fee Surcharge	10		
10.	Subtotal	$		
11.	Cert. of Occupancy	175		
12.	Other ZN DGP	60		
13.	TOTAL	$ 2,129		

VI. BUILDING/SITE CHARACTERISTICS

			(office use only)
1.	Number of Stories	2	
2.	Height of Structure	31 ft.	
3.	Area — Largest Floor	1274 sq. ft.	
4.	New Building Area	2516 sq. ft.	
5.	Volume of New Structure	38,458 cu. ft.	
6.	Construction Classification	5B	
7.	Total Land Area Disturbed	sq. ft.	
8.	Flood Hazard Zone	None	
9.	Base Flood Elevation	ft.	
10.	Wetlands yes		
	no		
11.	Max. Live Load		
12.	Max. Occupancy Load		

II. PROPOSED WORK

OPTIONAL (for office use only)

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work									
2.	☒ New Building	165,000		3/16/06		4/21/06				
3.	☐ Addition									
4.	☐ a. Repair									
	☐ b. Alteration									
	☐ c. Renovation									
	☐ d. Reconstruction									
5.	☒ Fire Protection	10,000				3-31-06				
6.	☒ Plumbing	15,000				6/7/06		8		
7.	☒ Electrical	10,000				3/1/06				
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition		Gw	3/6/06		3/6/06				
	TOTAL COSTS	200,000								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use:
2. Use Group: R-5
3. Change in Use Group, Indicate Former:
4. 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:

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

LDS BR-B 10526333

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

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

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

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

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

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

Signature _____ Date _____

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

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

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

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

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

( ) Check if contractor.

Agent Name King Contractors

Address 2597 Hooper Avenue Brick NJ 08723

Telephone (732) 920-6441.

Signature James Dickson

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			
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. _____	_____	_____	_____	_____

IMPORTANT Pd. prelim 3/6/06 Tot
A.H.B.T. - MANDATORY FEE - RESIDENTIAL

FOR OFFICE USE ONLY

ANY BUILDING QUESTIONS
CALL 732-262-1027

Constituent Contact Report

Date	Comments	Initials

☐ Zoning Application deemed complete Initialed: Tot Date: 2/15/06

☐ Zoning Application approved Initialed: _____ Date: _____

☐ Zoning permit updates:

_____

_____

_____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	10/22/2007
Control Number	C-06-0843
Permit Number	06-1149
Permit Issue Date	4/21/2006
Certificate Number	06-1149

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 205 GEORGES RD , NJ Block: 1205.05 Lot: 8 Qual:

Owner in Fee: KING CONTRACTORS

Owner Address: 2597 HOOPER AVENUE BRICK NJ 08723

Telephone: (732) 920-6441

Contractor KING CONTRACTORS

Address 2597 HOOPER AVENUE BRICK NJ 08723

Telephone: (732) 920-6441 Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number: 186757

Type of Warranty Plan: ☑ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Used: GAS BURNING FIREPLACE, NEW SF DWELLING

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: $179.00
Check Number: 10485
Collected By: Ellen Privett

Date Printed: 10/22/2007

APPLICATION FOR CERTIFICATE

Permit #
Date Issued
- or -
Control #
Certificate Application Received:
Certificate Issued:

IDENTIFICATION

Work Site Location 205 Georges Rd Brick NJ 08723 Block 205.05 Lot 8 Qualification Code

Owner in Fee King Contractors
Address 2597 Hooper Ave Brick NJ 08723
Tel. (732) 920-6441

Contractor King Contractors
Address 2597 Hooper Ave Brick NJ 08723
License No. 038949 Tel. (732) 920-6441
Federal Employee No. 22-3673814

ACTION

- [x] CERTIFICATE OF OCCUPANCY
- [ ] CERTIFICATE OF CONTINUED OCCUPANCY
- [ ] LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
- [ ] TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP R5 Previous R-5 Current

FINAL COST OF CONSTRUCTION: $ 225,000.00

(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

Describe below any substantive deviation in dimension, lay out or appearance of the building or structure from the released plans and specifications filed with the construction permit application. Please note, a set of amended drawings may be required.

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:

Single Family Dwelling

I hereby attest that to the best of my knowledge, the completed project meets the conditions of the construction permit and all prior approvals, and all work has been completed substantially in accordance with the code and with those portions of the plans and specifications controlled by the code, with any substantial deviations noted. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED _____
OWNER/AGENT

- [ ] OWNER
- [ ] AGENT

U.C.C. F270
(rev. 5/2003)

CONSTRUCTION PERMIT

Date Issued 04/21/2006
Control # C-06-0843
Permit # 06-1149

IDENTIFICATION Block: 1205.05 Lot: 8 Qualifier
Work Site Location: 205 GEORGES RD , NJ
Owner in Fee KING CONTRACTORS
Address 2597 HOOPER AVENUE BRICK NJ 08723
Telephone: (732) 920-6441

Contractor KING CONTRACTORS
Address 2597 HOOPER AVENUE BRICK NJ 08723
Telephone: 732-920-6441
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
GAS BURNING FIREPLACE, NEW SF DWELLING

Note: If constuction 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 $165,000

Construction Official — 04/21/2006 Date

PAYMENTS (Office Use Only)

Building	$1,038
Electrical	$145
Plumbing	$380
Fire Protection	$225
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$102
CO Fee	$179.00
Other	$60
Total	$2,129
Check No.	10485
Cash	$0
Credit	$0
Collected By	Ellen Privett

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

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

Date Received
Control #

Date Issued 1/13/06
Permit # 06-0131

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

Block 1205.5 Lot 5 Qualification Code

Work Site Location 205 Georges Road
Brick NJ 08723

Owner in Fee King Contractors
Address 2597 Hooper Ave
Brick NJ. 08723

Tel. (732) 920-6441

Contractor King Contractors
Address 2597 Hooper Ave
Brick NJ 08723

Tel. (732) 920-6441 FAX (732) 920-2944

Contractor License No. or Builder Registration No. 27108

Federal Emp. No 22-3673814

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 10-4-07
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free		6/5/06		

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 11,000.

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.

James Dickson
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

SFD
Demo

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

FEE (Office Use Only)
$

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $ 60.

U.C.C. F110
(rev. 07/03)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 4-21-06

Date Issued Permit # 06 1149

A. IDENTIFICATION—APPLICANT: COMPL[illegible] APPLICA[illegible] NFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFIC[illegible] 1-800-272-1000.

Block 1205.05 Lot 8 Qualification Code ____

Work Site Location 205 Georges Road. Brick NJ 08723.

Owner in Fee King Contractors.

Address 2597 Hooper Ave Brick NJ 08723

Tel. (732) 920-6441

Contractor King Contractors

Address 2597 Hooper Ave. Brick NJ 08723.

Tel. (732) 920-6441 FAX (732) 920-2944

Contractor License No. or Builder Registration No. 27168

Federal Emp. No 22-3673814

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	4-20-06	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 10-4-07
Approved by: [signature]

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Footing			6-5-06	
Footing Bonding				
Foundation			6-20-06	
Slab				
Frame			8/10/06	
Truss Sys./Bracing				
Barrier-Free				
Insulation		8/16/06	8/16/06	
Finishes -Base Layer				
Finishes -Final				
Energy Sheathing			7/13/06	
Mechanical				
TCO				
Other				
Final				
Barrier-Free			10/4/07	

B. BUILDING CHARACTERISTICS

Use Group	Present R-5	Proposed ____
Constr. Class	Present 5B	Proposed ____
No. of Stories	2	
Height of Structure	31	Ft.
Area — Largest Floor	1274	Sq. Ft.
New Bldg. Area/All Floors	2516	Sq. Ft.
Volume of New Structure	38,458	Cu. Ft.
Total Land Area Disturbed	____	Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $165,000
2. Rehabilitation $ ____
3. Total (1+ 2) $200,000

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
SFD
GAS fireplace
See Notes In Red on Plan

TYPE OF WORK:
[X] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence ____ Height (exceeds 6')
[ ] Sign ____ Sq. Ft.
[ ] 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 $ ____

U.C.C. F110 (rev. 07/03)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 4-21-06

Date Issued Permit # 06 1149

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

Block 1205.05 Lot ~~5~~ Qualification Code _____

Work Site Location 205 Georges Road.
Brick NJ 08723.

Owner in Fee King Contractors

Address 2597 Hooper Ave
Brick NJ 08723

Tel. (732) 920-6441

Contractor King Contractors

Address 2597 Hooper Ave.
Brick NJ 08723.

Tel. (732) 920-6441 FAX (732) 920-7944

Contractor License No. or Builder Registration No. 27168

Federal Emp. No 27-3607338 14

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	4-20-06	FH
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed _____
Constr. Class Present 5B Proposed _____
No. of Stories 2
Height of Structure 31 Ft.
Area — Largest Floor 1274 Sq. Ft.
New Bldg. Area/All Floors 2516 Sq. Ft.
Volume of New Structure 38,458 Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 165,100
2. Rehabilitation $ _____
3. Total (1+ 2) $ 210,100

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
5 Fd
GAS fireplace
See Notes in Red on Plan

TYPE OF WORK:
[X] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] Sign _____ Sq. Ft.
[ ] 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 $ _____

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 4-21-06

Date Issued / Permit # 061149

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

Block 1205.05 Lot 8 & 38 Qualification Code

Work Site Location 205 Georges Road. Brick NJ 08723.

Owner in Fee King Contractors

Address 2597 Hooper Avenue Brick NJ 08723.

Tel (732) 920-6441

Contractor Dickson Electric

Address 2597 Hooper Avenue Brick NJ 08723

Tel (732) 920-6441 FAX (732) 920-2944

Contractor License No. 8392

Federal Emp. No. 22-2707689.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 10,000

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
15		Lighting Fixtures	
50		Receptacles	
20		Switches	
7		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
4		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
1	1KW	KW Dishwasher	
		HP Garbage Disposal	
2	3ton	KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	150	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
2		Furnaces	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[X] Elec. Plans Approved

Date: 5/1/06

Approved by:

SUBCODE APPROVAL

[X] CO [ ] CCO [ ] CA

Date: 10-3-07

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough			7/31	
Barrier-Free				
Trench				
Temp. Serv.			7/31	
Constr. Serv.				
TCO				
Other				
Service				
Final			10/3	
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control # 4-21-06

Date Issued
Permit # 061149

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

Block 1205.05 Lot 5 Qualification Code

Work Site Location 205 Georges Road.
Brick NJ 08723.

Owner in Fee King Contracting

Address 2597 Hooper Avenue
Brick NJ 08723.

Tel (732) 920-104141

Contractor Dickson Electric

Address 2597 Hooper Avenue
Brick NJ 08723

Tel (732) 920-6441 FAX (732) 920-2944

Contractor License No. 8392

Federal Emp. No. 22-270-7689

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 10,000

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
15		Lighting Fixtures	
50		Receptacles	
20		Switches	
7		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
4		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
1	1KW	KW Dishwasher	
		HP Garbage Disposal	
2	3ton	KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	150	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
	2	Furnace	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[X] Elec. Plans Approved
Date: 3/1/06
Approved by: LA

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 4-21-06
Control #

Date Issued
Permit # 06-1149

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

Block 1205.05 Lot 8 5 Qualification Code

Work Site Location 205 Forges Road.
Brick NJ 08723.

Owner in Fee King Contractors

Address 2597 Hooper Avenue.
Brick NJ 08723

Tel (732) 920-6441

Contractor Dickson Electric.

Address 2597 Hooper Avenue
Brick NJ 08723.

Tel (732) 920-6441 FAX (732) 920-2944

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. 8392.

Federal Emp. No. 22-2707689

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

Heating System: [ ] New OR [ ] Existing [ ] HVAC

Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other _____

Location: _____

Fuel Storage Tank:

Fuel Type: [ ] *Flammable* OR [ ] *Combustible* *Capacity* _____

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel: _____

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing

Location of Main Control Valve: _____

Total Cost of Fire Protection Work $ 10,100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[ ] Fire Plans Approved
Date: 3-31-06
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 4-3-06
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval Dates (Month/Day)	Initial
Alarm System			1003	DS
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical			1003	DS
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			1003	DS
Other 4/11 Ins			1003	DS

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. James Dickson
Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	7	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [ ] Gas or [ ] Oil	3	
Fireplace Venting/Metal Chimney		
Other GAS Fireplace	1	

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

U.C.C. F140
(rev. 1/04)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 4-21-06
Control #

Date Issued
Permit # 06-1149

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

Block 1205.05 Lot 5 Qualification Code

Work Site Location 265 Arrigas Road
Brick NJ 08723.

Owner in Fee King Contractors

Address 2597 Hooper Avenue.
Brick NJ 08723

Tel (732) 920-6441

Contractor Dickson Electric.

Address 2597 Hooper Avenue
Brick NJ 08723.

Tel (732) 920-6441 FAX (732) 920-2444

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. 5392.

Federal Emp. No. 22-2707089

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

Heating System: [ ] New OR [ ] Existing [ ] HVAC

Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other

Location:

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing

Location of Main Control Valve:

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible Capacity

Total Cost of Fire Protection Work $ 10,100.

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.

Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	7	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [ ] Gas or [ ] Oil	3	
Fireplace Venting/Metal Chimney		
Other HD Alarm	1	
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[ ] Fire Plans Approved

Date: 5-30-06

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

U.C.C. F140
(rev. 1/04)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received Control # 4-21-06

Date Issued Permit # 061149

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

Block 1205.05 Lot 8 5 Qualification Code

Work Site Location 205 Georges Road.
Brick NJ 08723.

Owner in Fee King Contractors

Address 2597 Hooper Avenue.
Brick NJ 08723

Tel (732) 920-6441

Contractor All County Plumbing & Heating INC.

Address 816 Bartlett Circle
Toms River NJ 08753

Tel (732) 288-0459 FAX (732) 288-0554

Contractor License No. 10554

Federal Emp. No. 22-3627069

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 15,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 3/2/06

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 10-5-07

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough	8/9/06		8/10/06	
Water			8/11/06	
Sewer			8/11/06	
Fixtures			10/3/07	
Gas Equipment				
Gas Piping	8/9/06		8/10/06	
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Voltex			10/3/07	
Final			10/3/07	

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT
3	Water Closet
	Urinal/Bidet
2	Bath Tub
5	Lavatory
	Shower
	Floor Drain
1	Sink K.I.
1	Dishwasher
	Drinking Fountain
1	Washing Machine
2	Hose Bibb
1	Water Heater
45	Fuel Oil Piping
	Gas Piping 90' chart 1¼ - 310,000
	LPGas Tank
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
	Sewer Connection
	Water Service Connection
12	Stacks 2½" Pvc Vent
2	Other AV
	Other

FEE (Office Use Only) $

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

3/4" Water. (17.5)

U.C.C. F130 (rev. 01/04)

1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

8/9/06

2.5	8.0	(1) - CSST NAIL PLATES
K. 1	2.0	(2) - LEAK ON BOTH TUB TRAP'S (Hurl)
	1.0	
W/D 1	4.0	(3) - NAIL PLATES
	1.4 / 3.5	(4) - 3/4" WATER OK (17.5)
21	17.5	

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 4-21-06

Date Issued / Permit # 061149

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

Block 1105.05 Lot 8 Qualification Code

Work Site Location 205 Georges Road. Brick NJ 08723

Owner in Fee King Contractors

Address 7507 Hooper Avenue. Brick NJ 08723

Tel (732) 920-1041

Contractor All County Plumbing & Heating INC.

Address 810 Bayfield Circle Toms River NJ 08753

Tel (732) 288-0459 FAX (732) 288-0554

Contractor License No. 10554

Federal Emp. No. 22-3127010

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 15,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 3/7/06

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
3	Water Closet	
	Urinal/Bidet	
2	Bath Tub	
5	Lavatory	
	Shower	
	Floor Drain	
1	Sink K.I.	
1	Dishwasher	
	Drinking Fountain	
1	Washing Machine	
2	Hose Bibb	
1	Water Heater	
1	Fuel Oil Piping 40' Copper 1 1/4" 310,000	
45	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
14	Stacks 12" Rubber	
2	Other A/I	
	Other	

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

3/4" Water. (17.5)

U.C.C. F130 (rev. 01/04)

1 White = Inspector Copy 2 Canary = Office Copy

3 Pink = Office Copy 4 Gold = Applicant Copy

INSPECTOR: K Shafer

JOB: /

SECTION: off R-20

DATE: 10/19/07

TYPE OF WORK: Final

WEATHER: Overcast

LOCATION: 205 Georges Rd

TEMPERATURE: 20°C

BLOCK: 1205.05 LOT: 8

ENGINEERING RECOMMENDATIONS FOR CERTIFICATE OF OCCUPANCY INSPECTION CHECK LIST

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway	✓	
2. Grading	✓	
3. Sidewalk	✓	
4. Road Pavement	✓	
5. Landscaping & Sodding	✓	
6. Clean-up Procedures	✓	
7. Note on going construction in immediate area	✓	
8. Safety	✓	

COMMENTS REFERENCING ITEM NUMBER:

RECOMMENDATIONS:

☐ TEMP. C.O.

☒ FINAL C.O.

☐ DETAILED REINSPECTION

☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED

PLANNING BOARD ENGINEER

MUNICIPAL ENGINEER

I _____, Authorized representative of _____, hereby acknowledge the above deficiencies, and further realize that the Certificate of Occupany will be conditioned upon the acceptable resolution thereof within _____ days of the issuance of Certificate of Occupancy.

Township of Brick
Zoning Permit

Approved: Wednesday, February 22, 2006 **Number:** 161

Block 1205.05 **Lot** 8 **Zone:** R-7.5

Property Address: 205 Georges Road

Applicant: James C. Dickson, King Contractors

Property Owner: James C. Dickson

Existing Use: Single Family Residential (has been removed)

Proposed Use: Single Family Residential

Proposed Construction: Two story single family dwelling 48' x 44', eave ht. 20.4', building ht. 26.4', ridge ht. 32.4'.

Conditions: The house must be set back at least 25 feet from the front property line, 6 feet minimum/15 feet total from the side property lines and 15 feet from the rear property line. Subdivision Certication approved by Michael Fowler February 14, 2006.

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

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

FEB 21 2006

Applications missing any of the following information will delay processing and may be returned to you.

BLOCK 1205.05 LOT 8 QUALIFIER _____

PROPERTY ADDRESS 205 Georges Rd

PERSONAL NAME OF APPLICANT James C. Dickson

BUSINESS NAME OF APPLICANT King Contractors.

MAILING ADDRESS OF APPLICANT 2597 Hooper Avenue Brick, NJ 08723

PROPERTY OWNER'S FULL NAME James C. Dickson.

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) Residential Height 31'
☐ Addition - Height_____
☐ 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 James C Dickson Date 2/14/06

Reviewed by Zoning Office JC Date 2/22/06 (X) Approved ( ) Denied

March 2003----------

2/13/06

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY
1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
(732) 458-7000

CERTIFICATE OF COMPLIANCE

Date 10/17/07

NAME King Contracting

ADDRESS 2597 Hooper Ave Brick NJ 08723

PROPERTY LOCATION 205 Georges Rd

Account No R313605 Block 1205.05 Lot 8

I herby certify that the above applicant has complied with all Rules and Regulations of this Authority and has paid all required fees and charges.

For the Authority Carol Gundel

DAVID B. HARTDORN, A.I.A.

ARCHITECT & PLANNER L.L.C.

EST. 1986

12-19-05

Brick Building Department
att: Marcel Renson
401 Chambers Bridge Road
Brick, New Jersey
08723

RE: 205 Georges Road
Blk. 1205.05 Lot 8 (add'l. lot 9 & 10)
file No. 05-774
dated: 11-29-05

Dear Building Official,

Please be advised that I have given permission to King Contractors to update for electrical code compliance the above project if additional information shall be required upon your review. Thank you.

DBH/llh

Sincerely,

David B. Hartdorn, A.I.A.
Architect & Planner

cc: King Contractors

(732) 899-1608 (732) 714-1606---FAX 332 DEERFOOT LANE, BRICK NJ, 08724

DAVID B. HARTDORN, A.I.A.

ARCHITECT & PLANNER L.L.C.

EST. 1986

01-06-06

Brick Building Department
401 Chambers Bridge Road
Brick, New Jersey
08723

RE: King Contractors
205 Georges Road
Lot 8 (add'l. lot 9 & 10) Blk. 1205.05
file No. 05-774
dated: 11-29-05

Dear Building Official,

I have reviewed the "Boise" layout framing plans dated 12-20-05 and find them to be in general conformance with the intent of the architectural construction documents. The plans prepared by this office shall be utilized for additional information as appropriate to make to the job whole and complete.

Please review the above information and contact my office with any comments or questions. Thank you.

DBH/llh

Sincerely,

David B. Hartdorn, R.A.
Architect & Planner

cc: King Contractors

(732) 899-1608 (732) 714-1606---FAX 332 DEERFOOT LANE, BRICK NJ, 08724

SINGLE FAMILY DWELLING CHECKLIST

1. Construction Permit Jacket Completed and Signed — Yes ___ No___
2. Zoning Application Completed — Yes ___ No___
3. Two True Size Surveys — Yes ___ No___
4. Engineering Form:
   - Single Family Home Checklist — Yes ___ No___
   - Major Subdivision — Yes ___ No___
5. Shade Tree Application — Yes ___ No___
6. Debris Form — Yes ___ No___
7. BTMUA Availability Statement — Yes ___ No___
8. Building, Plumbing, Electrical and Fire Permits — Yes ___ No___
9. Gas Pipe Drawing — Yes ___ No___
10. Drain Waste Venting Schematic (DWV) — Yes ___ No___
11. Brochures:
    - Furnace — Yes ___ No___
    - Air Conditioner — Yes ___ No___
    - Fireplace — Yes ___ No ___
    - Boiler — Yes ___ No ___
12. Indicate options:
    - Fireplace (Gas or Wood) — Yes ___ No___
    - Basement — Yes ___ No___
    - Crawl — Yes ___ No___
    - Slab — Yes ___ No___
    - Deck — Yes ___ No___
13. Two Sets of Plans-architectural plans signed and sealed
    Homeowners Plans signed by homeowner on all pages — Yes ___ No___
14. Soil Boring Report showing seasonal high water table required for any new basements * on plot plan * — Yes ___ No___
15. Joist layout showing blocking for any engineered floor joist (TJI) — Yes ___ No___
16. Modular Homes separate cost - the house is new building; site preparation, garages and decks are alterations — Yes ___ No___
17. Model Energy Code — Yes ___ No___

Please separate the cost for fireplaces and decks from the cost of the new building - they are considered alterations

YOUR PERMIT APPLICATION WILL NOT BE ACCEPTED IF ANY OF THE ABOVE INFORMATION IS MISSING

STATE OF NEW JERSEY
DEPARTMENT OF COMMUNITY AFFAIRS
Division of Codes and Standards
New Home Warranty Program
This is to certify that

KING CONTRACTORS

is a registered builder under the New Home Warranty and Builder Registration Act, (N.J.S.A. 46:3B-1 et. seq.)

(This registration expires on the date shown)

REGISTERED BUILDER

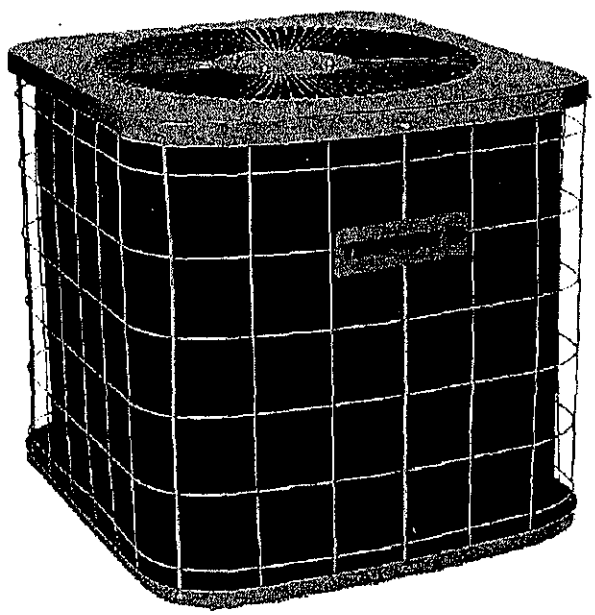
Director

027168 FEB 28 80

10 TEMPSTAR®

Heating and Cooling Products

10+ SEER - AIR CONDITIONER



Representative photo only, some models may vary in appearance.

1 1/2 THRU 5 TONS SPLIT SYSTEM

FEATURES

- Service valves on all models with $3^{-1}/_{2}$" stubs
- External refrigerant connections
- Copper tube / aluminum fin coil
- Prepainted condenser fins
- Fan motor in-line disconnect plug
- Factory charge
- Top air discharge for quieter operation
- Galvanized steel cabinet with integral base rails
- Triple step paint process
- Coated inlet grille
- 5 Year parts, 5 year compressor limited warranties

LIMITED PARTS 5 YEAR WARRANTY

MANUFACTURER CERTIFIED TO ARI AS COMPLYING WITH UNITARY AIR-CONDITIONING EQUIPMENT CERTIFICATION SECTION OF ARI STANDARD 210

Rated in accordance with ARI Standard 210. Certification applies only when used with proper components as listed with ARI.

c UL US LISTED

International Comfort Products Corporation (USA)
651 Heil-Quaker Ave.
Lewisburg, Tennessee 37091

RESIDENTIAL AND COMMERCIAL SYSTEMS • SPLIT SYSTEMS • PACKAGED AIR CONDITIONERS • COMBINATION GAS/ELECTRIC UNITS • HEAT PUMPS • AIR HANDLERS • MANUFACTURED HOME AIR CONDITIONERS • GAS, OIL AND ELECTRIC FURNACES

Printed in U.S.A.

SPECIFICATIONS SUBJECT TO CHANGE WITHOUT NOTICE

PART NO. 421 21 3002 00
Dec. 2003

Base Specifications

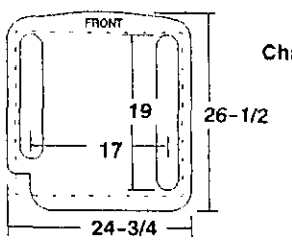
Model Number	NAC018AKC / NAC018GKC	NAC024AKC / NAC024GKC	NAC030AKC / NAC030GKC	NAC036AKC / NAC036GKC	NAC042AKC / NAC042GKC	NAC048AKC / NAC048GKC	NAC060AKC / NAC060GKC
Max. Cooling Capacity (Btuh)	17200	22800	28000	33600	39500	45000	56000
SEER Label	10	10	10	10	10	10	10
Sound Rating Decibels	74	76	76	76	78	80	80
Compressor Type	Recip.	Recip.	Recip.	Recip.	Recip.	Recip.	Scroll
Fan HP / Type / Speeds	1/8-PSC-1	1/8-PSC-1	1/5-PSC-1	1/4-PSC-1	1/4-PSC-1	1/3-PSC-1	1/3-PSC-1
Fan RPM / Max. CFM	1100 / 600	1100 / 800	1100 / 1000	1100 / 1200	1100 / 1400	1100 / 1600	1100 / 1750
Coil Face Area (Sq Ft)	9.90	9.90	9.90	12.60	14.40	15.40	16.60
Coil Rows / Fins Per Inch	1 / 24	1 / 24	1 / 24	1 / 24	1 / 24	1 / 24	1 / 24
Line Connection Suction I.D. Size (In.)	3/4	3/4	3/4	3/4	7/8	7/8	1-1/8
Line Connection Liquid I.D. Size (in.)	3/8	3/8	3/8	3/8	3/8	3/8	3/8
Supplied Optional Evaporator Orifice Size	.050	.053	.061	.065	.074	.083	.093
Factory Charge - R22 (Oz)	62	70.8	75.2	99.2	111.7	112.0	124.0
Weight Lbs. (Ship)	135	140	142	145	165	190	198

Electrical Specifications - 208 - 230 / 1 / 60, Voltage Range 197V - 253V

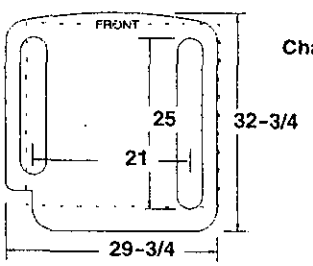
Minimum Circuit Ampacity	11.7	13.2	18.2	20.0	22.7	24.7	35.7
Wire SizeMax. Length (AWG Cu) Ft.	14 /62	14 / 58	14 / 42	14 / 37	12 / 52	12 / 48	8 / 36
Time Delay Fuse (Amps)	20	20	30	30	35	35	50
Max. Fuse or HACR Breaker Size (Amps)	20	20	30	30	35	40	50
Compressor Full Run / Lock Rotor Amps	8.6 / 49	9.8 / 56	13.7 / 75	14.9 / 96	17.1 / 105	18.3 / 102	27 / 144
Fan Full Load / Lock Rotor Amps.	.93 / 2.20	.93 / 2.20	1.08 / 2.40	1.40 / 3.00	1.40 / 3.00	1.9 / 3.7	1.9 / 3.7

Dimensions		
Model	Chassis	Height (H)
NAC018	1	24
NAC024	1	24
NAC030	1	24
NAC036	1	30
NAC042	1	32
NAC048	2	28
NAC060	2	32

ALL DIMENSIONS IN INCHES



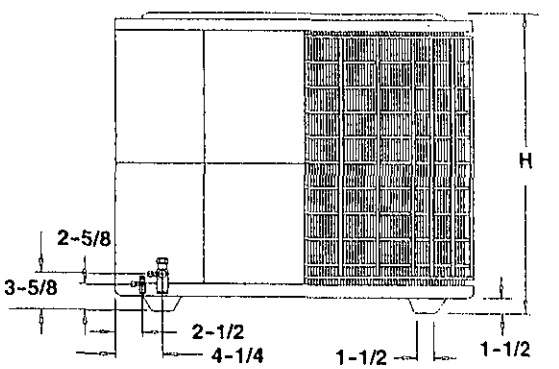
Chassis #1



Chassis #2

Minimum Mounting Pad Sizes with pad starting at 15" from structure for minimum clearance of 12" to structure.

Chassis #1 20" W X 20" D
Chassis #2 24" W X 26" D



Accessory	Description	Used On
AMF153TKB	Expansion Valve Kit	1 1/2 - 3 Ton
AMF355TKB	Expansion Valve Kit	3 1/2 - 5 Ton
AMA001TDA	Indoor Blower Time Delay	All Models
AMB001CMA	Mesh Grille Guard (Pkg of 6) Trim to Fit	All Models
24370800 *	Compressor Anti-short cycle 24 Volt 3 Min. Time Delay	All Models
1070822*	Compressor Anti-short cycle 24 Volt 5 Min. Time Delay	All Models
1148671 *	Low Ambient Kit (Fan Cycling Switch)	All Models
1053477 *	Compressor Crankcase Heater Solid State "Stick On" Type	All Models
1148113 *	Compressor Crankcase Heater "Wrap-around" Type (6.5 to 8.5 inch Dia Compressors)**	**All Models
1061482 *	Compressor Crankcase Heater "Wrap-around" Type (4.2 to 6.7 inch Dia Compressors)**	**All Models
1060834 *	Compressor Sound Jacket (Large Scroll)	5 Ton

* Order from Service Parts

PERFORMANCE DATA COOLING

Model Number	Air Handler	Rating A Cooling Capacity(MBtuh)	SEER Rating (Btuh/watt)	Rating A EER Rating (Btuh/watt)	Outdoor Coil Air Quantity (SCFM)	Indoor Coil Air Quantity (SCFM)
NAC018AKC*	EP*18B****+TD1	17200	10	9.4	1450	600
NAC018AKC*	EMH24F****+TD1	18200	10	9.75	1450	600
NAC018AKC*	EMH30F****+TD1	18500	10.3	9.85	1450	600
NAC018AKC*	EP*24B****+TD1	18200	10.2	9.75	1450	600
NAC018AKC*	EP*30B****+TD1	18500	10.5	9.85	1450	600
NAC018AKC*	EP*30F****+TD1	18500	10.5	9.85	1450	600
NAC018AKC*	EP*30F****+MV12F19****+TXV	19000	11.5	11.25	1450	695
NAC018AKC*	EX*24B****+MV08B15****	19000	11.5	11.45	1450	665
NAC018AKC*	EBP18****	17500	10.2	9.85	1450	600
NAC018AKC*	EBP24****	18500	10.2	10.15	1450	600
NAC018AKC*	FWM18****	18000	10.2	10.1	1450	600
NAC018AKC*	FWM24****	18500	10.5	10.05	1450	600
NAC018AKC*	EBV24****	19000	12	11.6	1450	600
NAC018AKC*	EBX18****	18000	11	10.4	1450	600
NAC018AKC*	EBX24****	19000	11	10.4	1450	600
NAC024AKC*	EP*24B****+TD1	22800	10	9.15	1450	800
NAC024AKC*	EMH24F****+TD1	22800	10	9.15	1450	800
NAC024AKC*	EMH30F****+TD1	22800	10	9.25	1450	800
NAC024AKC*	EMH36F****+TD1	23200	10	9.45	1450	800
NAC024AKC*	EP*30B****+TD1	23000	10	9.25	1450	800
NAC024AKC*	EP*30F****+TD1	23000	10	9.25	1450	800
NAC024AKC*	EP*30F****+MV12F19****+TXV	23600	11	10.3	1450	790
NAC024AKC*	EP*36B****+TD1	23600	10	9.45	1450	800
NAC024AKC*	EP*36F****+TD1	23600	10	9.45	1450	800
NAC024AKC*	EP*36F****+MV12F19****+TXV	23600	11	10.6	1450	800
NAC024AKC*	EP*36J****+TD1	23000	10	9.45	1450	800
NAC024AKC*	EP*36J****+MV16J22****+TXV	24000	11	10.65	1450	885
NAC024AKC*	EX*24B****+MV08B15****	24000	11	10.45	1450	850
NAC024AKC*	EBP24****	23600	10.5	9.55	1450	800
NAC024AKC*	EBP30****	23800	10.5	9.6	1450	800
NAC024AKC*	FWM24****	23600	10	9.35	1450	800
NAC024AKC*	EBV24****	24600	11	10.5	1450	800
NAC024AKC*	EBX24****	24000	10.5	9.8	1450	800
NAC030AKC*	EP*30B****+TD1	28000	10	8.9	2000	1000
NAC030AKC*	EMH30F****+TD1	28000	10	8.9	2000	1000
NAC030AKC*	EMH36F****+TD1	29000	10	9.1	2000	1000
NAC030AKC*	EP*30F****+TD1	28000	10	8.9	2000	1000
NAC030AKC*	EP*30F****+MV12F19****+TXV	28400	10.5	9.6	2000	1025
NAC030AKC*	EP*36B****+TD1	29000	10	9.1	2000	1000
NAC030AKC*	EP*36F****+TD1	29000	10	9.1	2000	1000
NAC030AKC*	EP*36F****+MV12F19****+TXV	29600	11	9.9	2000	1040
NAC030AKC*	EP*36J****+TD1	29000	10	9.1	2000	1000
NAC030AKC*	EP*36J****+MV16J22****+TXV	29600	11	10.05	2000	1005
NAC030AKC*	EBP30****	29600	10	9.3	2000	1000
NAC030AKC*	EBP36****	29600	10	9.15	2000	1000
NAC030AKC*	FWM30****	29600	10	9.2	2000	1000
NAC030AKC*	EBV24****	30000	11	9.8	2000	1000
NAC030AKC*	EBV36****	30600	11	10.05	2000	1000
NAC030AKC*	EBX36****	30000	10.5	9.45	2000	1000
NAC036AKC*	EP*36F****+TD1	33600	10	9.15	2500	1250
NAC036AKC*	EP*36B****+TD1	32600	10	9.25	2500	1000
NAC036AKC*	EMH36F****+TD1	33400	10	9.2	2500	1200
NAC036AKC*	EMH42F****+TD1	34000	10	9.45	2500	1100
NAC036AKC*	EMH48F****+TD1	35000	10	9.55	2500	1200
NAC036AKC*	EP*36F****+MV12F19****+TXV	34000	10.5	9.7	2500	1240
NAC036AKC*	EP*36J****+TD1	33400	10	9.2	2500	1200
NAC036AKC*	EP*36J****+MV16J22****+TXV	34000	10.5	9.95	2500	1215
NAC036AKC*	EP*42F****+TD1	34200	10	9.45	2500	1100
NAC036AKC*	EP*42F****+MV12F19****+TXV	35000	10.5	9.95	2500	1205
NAC036AKC*	EP*42J****+TD1	34600	10	9.4	2500	1200
NAC036AKC*	EP*42J****+MV16J22****+TXV	34600	10.5	9.9	2500	1000
NAC036AKC*	EP*48F****+TD1	34800	10	9.5	2500	1200
NAC036AKC*	EP*48F****+MV12F19****+TXV	35000	11	10.05	2500	1235
NAC036AKC*	EP*48J****+TD1	35000	10	9.55	2500	1200

PERFORMANCE DATA COOLING

Model Number	Air Handler	Rating A Cooling Capacity(MBtuh)	SEER Rating (Btuh/watt)	Rating A EER Rating (Btuh/watt)	Outdoor Coil Air Quantity (SCFM)	Indoor Coil Air Quantity (SCFM)
NAC036AKC*	EP*48J****+MV16J22****+TXV	35600	11.5	10.4	2500	1235
NAC036AKC*	EP*48N****+TD1	35600	10	9.55	2500	1200
NAC036AKC*	EP*48N****+MV20N26****+TXV	35600	11.5	10.45	2500	1245
NAC036AKC*	EX*36B****+TD1	35000	10.3	9.6	2500	1100
NAC036AKC*	EX*36F****+TD1	35000	10.3	9.6	2500	1100
NAC036AKC*	EX*36J****+TD1	35000	10.3	9.6	2500	1200
NAC036AKC*	EBP36****	35000	10	9.25	2500	1200
NAC036AKC*	EBP42****	35000	10	9.45	2500	1200
NAC036AKC*	EBV36****	35600	11	10.1	2500	1200
NAC036AKC*	EBX36****	35400	10.3	9.5	2500	1200
NAC042AKC*	EP*42J****+TD1	39500	10	9.2	2500	1400
NAC042AKC*	EP*42F****+TD1	38000	10	9.3	2500	1100
NAC042AKC*	EMH42F****+TD1	38000	10	9.3	2500	1100
NAC042AKC*	EP*42J****+MV16J22****+TXV	39500	10	9.3	2500	1435
NAC042AKC*	EMH48F****+TD1	40000	10	9.35	2500	1300
NAC042AKC*	EP*48F****+TD1	39500	10	9.3	2500	1300
NAC042AKC*	EP*48J****+TD1	40500	10	9.3	2500	1400
NAC042AKC*	EP*48J****+MV16J22****+TXV	41000	11	9.95	2500	1415
NAC042AKC*	EP*48N****+TD1	40500	10	9.3	2500	1400
NAC042AKC*	EP*48N****+MV16J22****+TXV	41000	11	9.95	2500	1430
NAC042AKC*	EX*42J****+TD1	40000	10.3	9.5	2500	1200
NAC042AKC*	EBP42****	40000	10	9.2	2500	1400
NAC042AKC*	EBP48****	41000	10	9.3	2500	1400
NAC042AKC*	EBV48****	42500	11	10.25	2500	1400
NAC042AKC*	EBX48****	42000	10.5	9.5	2500	1400
NAC048AKC*	EP*48L****+TD1	45000	10	9.65	2900	1600
NAC048AKC*	EP*48J****+TD1	44000	10.3	9.75	2900	1400
NAC048AKC*	EMH48F****+TD1	43500	10.3	9.75	2900	1300
NAC048AKC*	EP*48F****+TD1	43000	10.3	9.7	2900	1300
NAC048AKC*	EP*48N****+TD1	44000	10.3	9.75	2900	1400
NAC048AKC*	EP*60J****+TD1	45500	10.3	9.75	2900	1600
NAC048AKC*	EP*60J****+MV16J22****+TXV	46000	11	10.3	2900	1660
NAC048AKC*	EP*60N****+TD1	45500	10.5	9.75	2900	1600
NAC048AKC*	EP*60N****+MV20N26****+TXV	46000	11	10.3	2900	1655
NAC048AKC*	EBP48****	46000	10	9.6	2900	1600
NAC048AKC*	EBP60****	47000	10	9.6	2900	1600
NAC048AKC*	EBV48****	47500	11	10.3	2900	1600
NAC048AKC*	EBX48****	47000	10.5	9.85	2900	1600
NAC060AKC*	EP*60N****+TD1	56000	10	8.7	2900	1750
NAC060AKC*	EP*60J****+TD1	55500	10	8.7	2900	1750
NAC060AKC*	EP*60J****+MV16J22****+TXV	57000	10	8.9	2900	1875
NAC060AKC*	EP*60N****+MV20N26****+TXV	57000	10	8.9	2900	1840
NAC060AKC*	EBP60****	58000	10	8.75	2900	1700
NAC060AKC*	EBV60****	58500	10.5	9.3	2900	1700
NAC060AKC*	EBX60****	58500	10	8.95	2900	1700

MODEL NUMBER IDENTIFICAION GUIDE

MODEL NUMBER	N	AC	0	24	A	K	C

PRODUCT FAMILY
N = Brand

PRODUCT TYPE
AC = Air Conditioning CA = Condenser A/C
HP = Heat Pump CH = Condenser H/P

NOMINAL SEER RATING
0 = 10 2 = 12 4 = 14

NOMINAL CAPACITY MBTUH
18 = 18,000 24 = 24,000 30 = 30,000 36 = 36,000
42 = 42,000 48 = 48,000 60 = 60,000

OPTION CODE
A = Std. Coil Gaurd G = Hail Coil Guard M = Mesh Coil Gaurd

ELECTRICAL
K = 208/230-1-60
H = 208/230-3-60

SALES CODE

EXTENDED REFRIGERANT LINE CORRECTION FACTORS

Varying Line Length in Feet (m) vs. Total Capacity Multiplier

25 (8)	50 (15)	75 (23)	100 (30)	125 (38)	150 (46)
1.00	.99	.98	.96	.94	.92

REFRIGERANT CHARGE DATA

All models are factory charged with R-22 for outdoor unit, 15' (8m) of refrigerant line and matching indoor section. Refrigerant charge correction per foot (305mm) of line: 1/4" O.D. = .25 oz.; 5/16" O.D. = .45 oz.; 3/8" O.D. = .60 oz.; 1/2" O.D. = 1.2 oz.

VOLTAGE CORRECTION FACTORS

Volts	Capacity	Watts
208	.98	.99

INDOOR AIRFLOW CORRECTION TABLE

% Rated Air	90	95	100	105	110
Total Cap. Mult.	.98	.99	1.00	1.01	1.03
Sens Cap. Mult.	.95	.98	1.00	1.03	1.05

INDOOR TEMPERATURE CORRECTION TABLE

(Based on 95° F Ambient)

Indoor D.B. °F (°C).	Correction Factor	Entering Indoor Wet Bulb °F (°C). 59 (15)	61 (16)	63 (17)	65 (18)	67 (19)	69 (20)	71 (21)
70 (21)	Total Cap. Mult.	**.90**	.93	.96	.99	1.02	-	-
	Sens Cap. Mult.	**.86**	.85	.82	.77	.70	-	-
75 (24)	Total Cap. Mult.	.89	.92	**.95**	.98	1.01	1.04	-
	Sens Cap. Mult.	1.04	1.03	**1.00**	.95	.88	.78	-
80 (26)	Total Cap. Mult.	.88	.91	.94	.97	**1.00**	1.03	1.06
	Sens Cap. Mult.	1.18	1.17	1.14	1.08	**1.00**	.89	.73
85 (29)	Total Cap. Mult.	-	.90	.93	.96	.99	1.02	1.05
	Sens Cap. Mult.	-	1.29	1.26	1.20	1.11	.98	.81

Bold Type = approximately 50% Relative Humidity

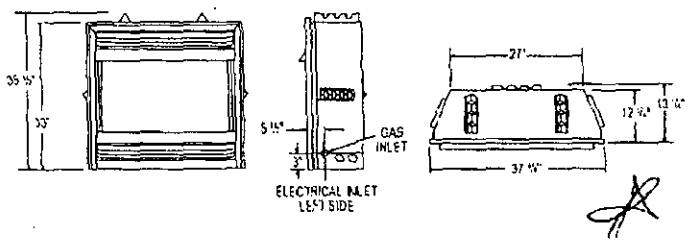
Frame
36" H x 38"W x 14" deep

Model **GVF36**

Beautiful Focal Point

With up to 30,000 BTU's, state-of-the-art vent free technology and a variety of options and accessories, this fireplace is the ideal choice to bring style and warmth to your home! Zero clearance design allows ease of installation almost anywhere!

Standard Features:
Fireplace screen, hood, millivolt valve with built-in adjustable flame/heat control, multi level pan-style burner, oxygen depletion sensor (ODS), piezo ignitor, six piece PHAZER® logs, on/off switch, available in clean burning natural gas or propane, no electricity required to operate - millivolt system ensures reliable use even during power failures, no chimney or vent required, zero clearance to combustibles.

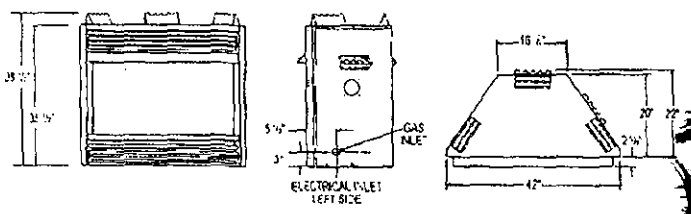


Model **GVF42**

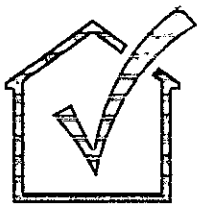
Comfort & Style

This classy looking fireplace boasts beautiful campfire logs, 30,000 BTU's and 99.9% Steady State Efficiency. All you do is sit back and enjoy the warmth! Customize your unit with your choice of accessories including cast iron surrounds and a variety of trim options.

Standard Features:
Fireplace screen, hood, millivolt valve with built-in adjustable flame/heat control, dual receptacle junction box, oxygen depletion sensor (ODS), multi-level pan style burner, piezo ignitor, six piece PHAZER® logs, charcoal embers, on/off switch, available in clean burning natural gas or propane, no electricity required to operate - millivolt system ensures reliable use even during power failures, no chimney or vent required, zero clearance to combustibles.



Permit #
Permit Date



RES*check* Software Version 3.7 Release 1

Compliance Certificate

Project Title: King Contractors

Report Date: **12/13/05**

Energy Code:	**2000 IECC**
Location:	**Lakewood, New Jersey**
Construction Type:	**Single Family**
Glazing Area Percentage:	**12%**
Heating Degree Days:	**5294**

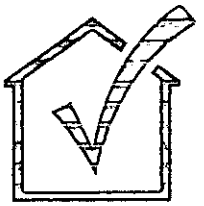
Construction Site:	Owner/Agent:	Designer/Contractor:
205 Georges Road Brick, NJ 08723		David Hartdorn David B. Hartdorn, A.I.A.

Compliance: Passes — Maximum UA: 401 — Your Home UA: 371 — 7.5% Better Than Code (UA)

Assembly	Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Glazing or Door U-Factor	UA
Ceiling 1: Flat Ceiling or Scissor Truss:	1336	0.0	30.0		41
Wall 1: Wood Frame, 16" o.c.:	2205	0.0	13.0		186
Window 1: Metal Frame with Thermal Break:Double Pane with Low-E:	269			0.340	91
Floor 1: All-Wood Joist/Truss:Over Unconditioned Space:	1242	0.0	19.0		53

Compliance Statement: Statement of Compliance: The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the 2000 IECC requirements in RES*check* Version 3.7 Release 1 and to comply with the mandatory requirements listed in the RES*check* Inspection Checklist.

Builder/Designer — Company Name — Date 12-13-05



RES*check* Software Version 3.7 Release 1

Inspection Checklist

Date: 12/13/05

Ceilings:

☐ Ceiling 1: Flat Ceiling or Scissor Truss, R-30.0 continuous insulation
Comments: _____

Above-Grade Walls:

☐ Wall 1: Wood Frame, 16" o.c., R-13.0 continuous insulation
Comments: _____

Windows:

☐ Window 1: Metal Frame with Thermal Break:Double Pane with Low-E, U-factor: 0.340
For windows without labeled U-factors, describe features:
#Panes _____ Frame Type _____ Thermal Break? _____ Yes _____ No
Comments: _____

Floors:

☐ Floor 1: All-Wood Joist/Truss:Over Unconditioned Space, R-19.0 continuous insulation
Comments: _____

Air Leakage:

☐ Joints, penetrations, and all other such openings in the building envelope that are sources of air leakage must be sealed.
☐ *Recessed lights must be 1) Type IC rated, or 2)* installed inside an appropriate air-tight assembly with a 0.5" clearance from combustible materials. If non-IC rated, the fixture must be installed with a 3" clearance from insulation.

Vapor Retarder:

☐ Required on the warm-in-winter side of all non-vented framed ceilings, walls, and floors.

Materials Identification:

☐ Materials and equipment must be installed in accordance with the manufacturer's installation instructions.
☐ Materials and equipment must be identified so that compliance can be determined.
☐ Manufacturer manuals for all installed heating and cooling equipment and service water heating equipment must be provided.
☐ Insulation R-values and glazing U-factors must be clearly marked on the building plans or specifications.

Duct Insulation:

☐ Ducts in unconditioned spaces must be insulated to R-5. Ducts outside the building must be insulated to R-6.5.

Duct Construction:

☐ All joints, seams, and connections must be securely fastened with welds, gaskets, mastics (adhesives), mastic-plus-embedded-fabric, or tapes. Tapes and mastics must be rated UL 181A or UL 181B.
Exception: Continuously welded and locking-type longitudinal joints and seams on ducts operating at less than 2 in. w.g. (500 Pa).
☐ The HVAC system must provide a means for balancing air and water systems.

Temperature Controls:

☐ Thermostats are required for each separate HVAC system. A manual or automatic means to partially restrict or shut off the heating and/or cooling input to each zone or floor shall be provided.

Service Water Heating:

- ☐ Water heaters with vertical pipe risers must have a heat trap on both the inlet and outlet unless the water heater has an integral heat trap or is part of a circulating system.
- ☐ Insulate circulating hot water pipes to the levels in Table 1.

Circulating Hot Water Systems:

- ☐ Insulate circulating hot water pipes to the levels in Table 1.

Swimming Pools:

- ☐ All heated swimming pools must have an on/off heater switch and require a cover unless over 20% of the heating energy is from non-depletable sources. Pool pumps require a time clock.

Heating and Cooling Piping Insulation:

- ☐ HVAC piping conveying fluids above 105 degrees F or chilled fluids below 55 degrees F must be insulated to the levels in Table 2.

Table 1: ***Minimum Insulation Thickness for Circulating Hot Water Pipes***

Heated Water Temperature (°F)	Insulation Thickness in Inches by Pipe Sizes			
	Non-Circulating Runouts		Circulating Mains and Runouts	
	Up to 1"	Up to 1.25"	1.5" to 2.0"	Over 2"
170-180	0.5	1.0	1.5	2.0
140-169	0.5	0.5	1.0	1.5
100-139	0.5	0.5	0.5	1.0

Table 2: ***Minimum Insulation Thickness for HVAC Pipes***

Piping System Types	Fluid Temp. Range(°F)	Insulation Thickness in Inches by Pipe Sizes			
		2" Runouts	1" and Less	1.25" to 2.0"	2.5" to 4"
Heating Systems					
Low Pressure/Temperature	201-250	1.0	1.5	1.5	2.0
Low Temperature	120-200	0.5	1.0	1.0	1.5
Steam Condensate (for feed water)	Any	1.0	1.0	1.5	2.0
Cooling Systems					
Chilled Water, Refrigerant and	40-55	0.5	0.5	0.75	1.0
Brine	Below 40	1.0	1.0	1.5	1.5

NOTES TO FIELD: (Building Department Use Only)

TEMPSTAR®
Heating and Cooling Products

N9MP2

Performance 90 Single Stage

Flexibility

- Direct Vent ONLY (2 pipe only).
- 40" high with narrower cabinets, for more flexibility in tight locations.
- Factory shipped as natural gas, with LP Gas conversion kits available.
- Four position - upflow/downflow/ horizontal installation.
- Vent pipe can be run horizontally or vertically.
- Internal condensate drain system.

Service

- Self diagnostics.
- Entire blower assembly mounted on rails.

Quality

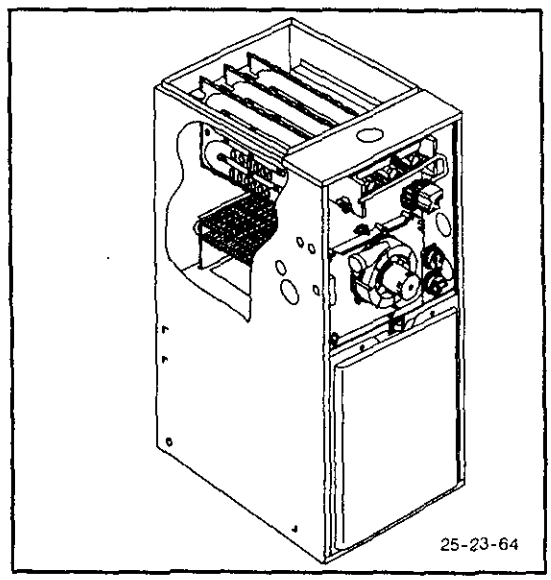
- RPJ III Aluminized steel heat exchanger.
- Stainless steel secondary heat exchanger.
- 20 year limited warranty on heat exchangers and 5 years on parts.
- High temperature limit control prevents overheating.
- Hot surface pilot ignition device.
- Flame roll-out sensors standard.
- Solid doors.

Comfort

- Adjustable timed blower Off delay.
- Humidifier terminal
- Electronic air cleaner terminal.

Efficiency

- 90% AFUE efficiency range.
- Single stage gas valve operation.
- Single stage fan timer.
- Multispeed, prelubricated PSC blower motors.
- Induced draft blower.
- In-shot burners.



Representative drawing only, some models may vary in appearance.

WARNING

This furnace is not designed for use inside mobile homes, trailers, or recreational vehicles. Such use could result in property damage, bodily injury, and/or death.

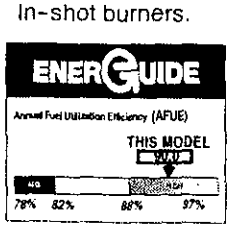
UPFLOW/DOWNFLOW/HORIZONTAL (NATURAL GAS)

Model Number	Heat Exchangers *	Dimensions H x W x D (In.)	Price
N9MP2050B12B	20	40 x 15 1/2 x 29	
N9MP2075B12B	20	40 x 15 1/2 x 29	
N9MP2080F16B	20	40 x 19 1/8 x 29	
N9MP2100F14B	20	40 x 19 1/8 x 29	
N9MP2100J20B	20	40 x 22 3/4 x 29	
N9MP2125J20B	20	40 x 22 3/4 x 29	

* 20 YEAR WARRANTY

PERFORMANCE DATA HEATING

Model Number	Input (MBTUH)	Efficiency AFUE	Cooling Cap. @ .5 In. W.C.
N9MP2050B12B	50	90.0	1.5 - 3.0 TON
N9MP2075B12B	75	90.0	1.5 - 3.0 TON
N9MP2080F16B	80	90.0	2.5 - 4.0 TON
N9MP2100F14B	100	90.0	2 - 3.5 TON
N9MP2100J20B	100	90.0	3.5 - 5.0 TON
N9MP2125J20B	125	90.0	3.5 - 5.0 TON



FURNACE SPECIFICATIONS

Model Number NATURAL GAS	N9MP2050B12	N9MP2075B12	N9MP2080F16	N9MP2100F14	N9MP2100J20	N9MP2125J20
INPUT (btuh)	50,000	75,000	80,000	100,000	100,000	125,000
HTG. CAP. (btuh)	45,500	67,500	72,000	90,000	90,000	113,125
AFUE % (ICS)	90.0	90.0	90.0	90.0	90.0	90.0
ALTERNATE INPUT BTUH	40,000	60,000	NA	80,000	80,000	100,000
ALTERNATE OUTPUT BTUH	36,000	54,000	NA	72,000	72,000	90,500
CSE %	84.9	85.1	85.1	85.5	85.5	85.2
TEMP. RISE (deg. F)	35-65	40-70	35-65	40-70	40-70	40-70
VOLTS/PH/HZ	115/60/1	115/60/1	115/60/1	115/60/1	115/60/1	115/60/1
MIN./MAX. VOLTAGE	97/132	97/132	97/132	97/132	97/132	97/132
F.L.A.	9.8	8.9	9.0	9.0	10.5	11.2
TRANSFORMER (V.A.)	40	40	40	40	40	40
GAS PIPE SIZE (IN.)	1/2	1/2	1/2	1/2	1/2	1/2
VENT SIZE*	2" or 3" OD	2" or 3" OD	2" or 3" OD	3" OD	3" OD	3" OD
COOLING CAP.	3.0	3.0	4.0	3.5	5.0	5.0
HIGH ALTITUDE PRESSURE SWITCH	1013803	1013803	1013812	1013803	1013803	1013157
FILTER SIZE (IN.) (1 required)	16X25X1	16X25X1	16X25X1	16X25X1	16X25X1(2)	16X25X1(2)
DIMENSIONS (in.) HEIGHT X WIDTH X DEPTH	40 X 15 1/2 x 29	40 X 15 1/2 x 29	40 X 19 1/8 x 29	40 X 19 1/8 x 29	40 X 22 3/4 x 29	40 X 22 3/4 x 29
WEIGHT (Lbs.)	139	140	140	160	180	185

* Vent size may vary depending on length, number of elbows, standard vent or direct vent. See Installation Instructions.

BLOWER PERFORMANCE

Model Number NATURAL GAS	N9MP2050B12	N9MP2075B12	N9MP2080F16	N9MP2100F14	N9MP2100J20	N9MP2125J20
BLOWER TYPE AND SIZE	11 x 8	11 x 8	11 x 10	11 x 10	11 x 10	11 x 10
MOTOR H.P. (TYPE)	1/2 PSC	1/2 PSC	1/2 PSC	1/2 PSC	3/4 PSC	3/4 PSC
MOTOR SPEEDS	4	4	4	4	4	4

AIRFLOW DATA

.10 ESP IN. W.C.	LOW	826	706	823	700	1682	1720
	MEDIUM LOW	1083	917	1109	912	1870	1910
	MEDIUM HIGH	1301	1163	1527	1209	2081	2127
	HIGH	1408	1368	1850	1550	2263	2315
.20 ESP IN. W.C.	LOW	804	677	795	660	1654	1686
	MEDIUM LOW	1050	875	1087	884	1826	1881
	MEDIUM HIGH	1242	1120	1482	1171	2031	2087
	HIGH	1347	1319	1791	1492	2193	2268
.30 ESP IN. W.C.	LOW	770	636	747	616	1597	1644
	MEDIUM LOW	1028	840	1056	843	1775	1833
	MEDIUM HIGH	1195	1076	1426	1139	1963	2024
	HIGH	1295	1283	1720	1434	2165	2201
.40 ESP IN. W.C.	LOW	735	595	677	575	1547	1600
	MEDIUM LOW	985	812	1016	790	1719	1777
	MEDIUM HIGH	1153	1031	1382	1088	1899	1961
	HIGH	1237	1202	1648	1378	2056	2131
.50 ESP IN. W.C.	LOW	698	546	617	528	1498	1533
	MEDIUM LOW	952	766	970	735	1653	1720
	MEDIUM HIGH	1093	987	1317	1040	1825	1891
	HIGH	1183	1148	1575	1317	1978	2029
.60 ESP IN. W.C.	LOW	657	490	544	472	1428	1494
	MEDIUM LOW	909	702	854	677	1583	1647
	MEDIUM HIGH	1040	889	1245	979	1737	1804
	HIGH	1118	1077	1485	1247	1854	1948
.70 ESP IN. W.C.	LOW	---	---	---	---	1355	1413
	MEDIUM LOW	863	630	763	608	1503	1571
	MEDIUM HIGH	935	821	1154	909	1650	1708
	HIGH	1053	989	1401	1161	1757	1820

MODEL NUMBER IDENTIFICATION GUIDE

N	9	MP	2	075	F	12	A	#

Brand Identifier
N = Non-Brand Specific (Generic)

Model Efficiency
8 = Non-Condensing, 80+% Gas Furnace
9 = Condensing, 90+% Gas Furnace

Installation Configuration
UP = Upflow DN = Downflow UH = Upflow/Horizontal
HZ = Horizontal DH = Downflow/Horizontal
MP = Multiposition, Up/Down/Horizontal

Major Design Feature

1 = One (Single) Pipe	N = Single Stage
2 = Two Pipe	P = PVC Vent
D = 1 or 2 Pipe	T = Two Stage
L = Low NOx	V = Variable Speed

Engineering Rev.
Denotes minor changes

Marketing Digit
Denotes minor change

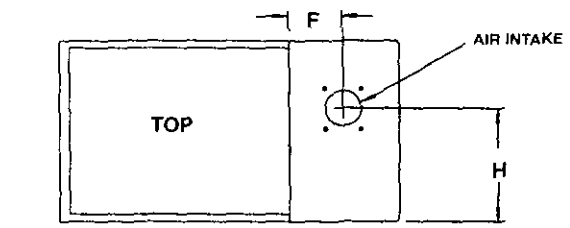
Cooling Airflow
08 = 800 CFM
12 = 1200 CFM
14 = 1400 CFM
16 = 1600 CFM
20 = 2000 CFM

Cabinet Width

B = 15.5" Wide	J = 22.8" Wide
F = 19.1" Wide	L = 24.5" Wide

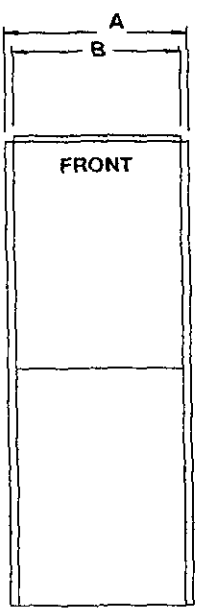
Input (Nominal MBTUH)

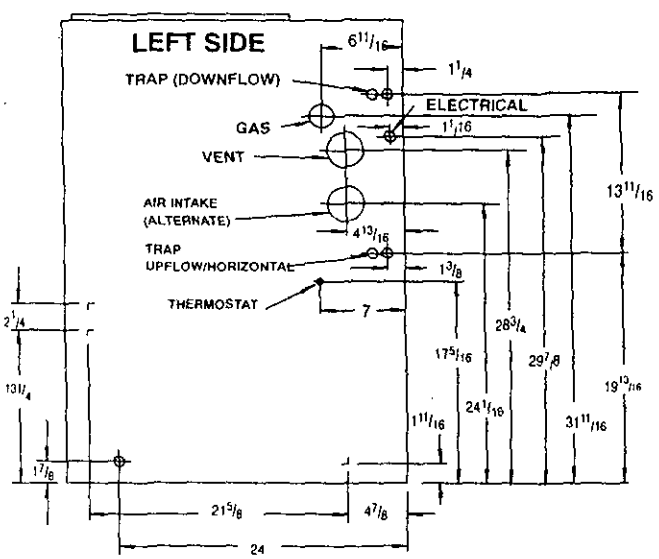
DIMENSIONS

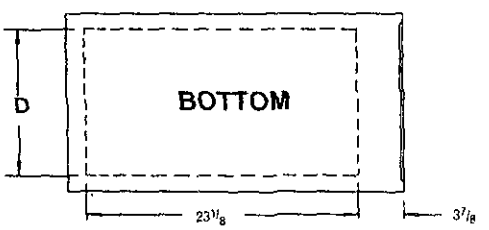


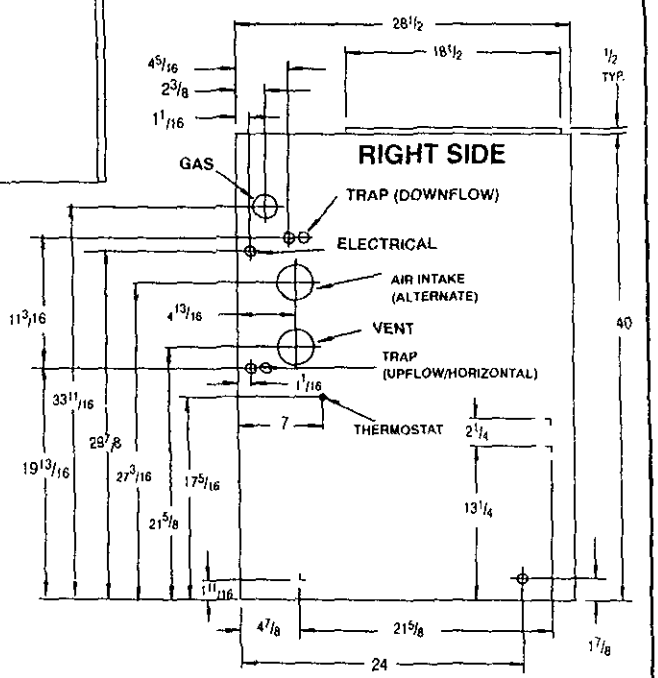
Cabinet to Combustible Clearances

TOP	BOT.	RH	LH	BACK	FRNT	FLUE
1"	0"	0"	0"	0"	3"	0"









ALL DIMENSIONS IN INCHES

Unit Capacity	Cabinet A	Cabinet B	Bottom D	Top F	Top H
N9MP2050B12A	15 1/2	14	12 5/8	4 1/2	7 3/4
N9MP2075B12A	15 1/2	14	12 5/8	4 1/2	7 3/4
N9MP2080F16A	19 1/8	17 5/8	14 3/4	4 1/2	9 1/2
N9MP2100F14A	19 1/8	17 5/8	14 3/4	4 1/2	9 1/2
N9MP2100J20A	22 3/4	21 1/4	18 3/4	4 1/2	11 3/8
N9MP2125J20A	22 3/4	21 1/4	18 3/4	4 1/2	11 3/8

25-23-36A

ACCESSORIES

Model Number	Description	Used With Models
NAHA003WK	Twinning Kit - Allows operation of two identical-size model furnaces.	All N9MP2 Furnaces
NAHF002NG 1009510 *	Gas Conversion Kits - LP (Propane) to natural gas conversion kit. Allows field conversion to natural gas.	All N9MP2 Models
NAHF002LP 1009509 *	Gas Conversion Kits - Natural gas to LP (Propane) conversion kit. Allows field conversion to LP (Propane) gas. Includes LP Pressure Switch.	All N9MP2 Models
NAHF003NG 1013816 *	Gas Conversion Kits - LP (Propane) to natural gas conversion kit. Allows field conversion to natural gas.	N9MP2080
NAHF003LP 1013815 *	Gas Conversion Kits - Natural gas to LP (Propane) conversion kit. Allows field conversion to LP (Propane) gas. Includes LP Pressure Switch.	N9MP2080
NAHK001LF 1009910 *	Alternate Input Kit (Nat Gas). Derates input by 20%	All N9MP2 Models
NAHK002LF 1009911 *	Alternate Input Kit (LP Gas). Derates input by 20%	All N9MP2 Models
NAHA001FF	Filter Kits - External filter frame. 16" x 25"	Side Return (All Furnaces) Bottom Return (All "F" $19^1/_8$" Furnaces under 1650 CFM)
NAHA001FP	External filter frame. 16" x 25" (Bulk Pack Kit - Qty 10)	
NAHA002FF	Filter Kits - Bottom return filter frame kit 20" x 25"	(All "J" $22^3/_4$" Furnaces)
NAHA002FP	Bottom return filter frame kit 20" x 25" (Bulk Pack Kit - Qty 10)	
NAHA003FF	Filter Kits - Bottom or side return filter frame kit 14" x 25".	(All "B" $15^1/_2$" Furnaces)
NAHA003FP	Bottom or side return filter frame kit 14" x 25" (Bulk Pack Kit - Qty 10)	
NAHA001TK	Duct Standoff Filter Kit. To adapt 20" x 25" filter for single side return.	Side Return (All single return applications with 1650 CFM or greater) Bottom Return (All "F" $19^1/_8$" Furnaces under 1650 CFM)
NAHA001NK 612833 *	Condensate neutralizer kit for condensing gas furnaces	ALL 90+ FURNACES IF REQUIRED
NAHH001SB	Combustible Floor Subbase - Subbase Furnace ONLY: All $15^1/_2$" wide furnace models	N9MP2050/075
NAHH002SB	Combustible Floor Subbase - Subbase Furnace ONLY: All $19^1/_4$" wide furnace models	N9MP2080/100F
NAHH003SB	Combustible Floor Subbase - Subbase Furnace ONLY: All $22^3/_4$" wide furnace models	N9MP2100J, N9MP2125
NAHH004SB	Subbase Furnace w/$15^1/_2$" cased coil	N9MP2050/075 Counterflow furnace w/$15^1/_2$" cased coil
NAHH005SB	Subbase Furnace w/$19^1/_4$" cased coil	N9MP2080/100F Counterflow furnace w/$19^1/_4$" cased coil
NAHH006SB	Subbase Furnace w/$22^3/_4$" cased coil	N9MP2100J, N9MP2125 Counterflow furnace w/$22^3/_4$" cased coil
NAHA001CV 1011129*	3" Concentric vent kit - allows single wall penetration for 2 pipe direct vent applications (90+).	N9MP2100/125 N9MP2080 (35' & (4) 90°elbows)
NAHA002CV	2" Concentric vent kit allows - single wall penetration for 2 pipe direct vent applications (90+).	N9MP2050/075 N9MP2080 (65' & (4) 90°elbows)
NAHA001CA	Coil Adapter for Downflow Furnaces	All Downflow Models
1013801*	Standard Pressure Switch Kit (1 Pressure Switch)	N9MP2075 & 100F
1013802*	Standard Pressure Switch Kit (1 Pressure Switch)	N9MP2050 & 100J
1013811*	Standard Pressure Switch Kit (1 Pressure Switch)	N9MP2080
1013166*	Standard Pressure Switch Kit (2 Pressure Switches)	N9MP2125
1013803*	High Altitude Pressure Switch Kit (1 Pressure Switch)	N9MP2050, 075 & 100
1013812*	High Altitude Pressure Switch Kit (1 Pressure Switch)	N9MP2080
1013157*	High Altitude Pressure Switch Kit (2 Pressure Switches)	N9MP2125
NAHA001LV	Long Vent Kit	N9MP2075/100
NAHA003LV	High Altitude Long Vent Kit	N9MP2075/100
NAHL001WL	To replace Warning Labels, Operating Instructions & Wiring Labels on Blower Door when needed	N9MP2

* Must be ordered from Service Parts

ATTACHMENT 'A'

If during construction the existing sanitary sewer clean out and water service curb box is found to be located in the driveway apron or walkways, the applicant will be required to relocate the sewer clean out and/or water curb box at the applicant's expense.

SIZING FOR WATER AND SEWER SERVICES

Property Owner _____ Date _____

Property Address _____ Block _____ Lot _____

Zoning _____ Use Group _____

Contractor _____ License No. Registration _____

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu) Water Units	(dfu) Drainage Units
1. Water Closet	_____	( ) _____	( ) _____
2. Lavatory	_____	( ) _____	( ) _____
3. Bath Tub	_____	( ) _____	( ) _____
4. Shower Stall	_____	( ) _____	( ) _____
5. Kitchen Sink	_____	( ) _____	( ) _____
6. Service Sink	_____	( ) _____	( ) _____
7. Laundry Tray	_____	( ) _____	( ) _____
8. Dishwasher	_____	( ) _____	( ) _____
9. Washing Machine	_____	( ) _____	( ) _____
10. Urinal	_____	( ) _____	( ) _____
11. Floor Drain	_____	( ) _____	( ) _____
12. Drinking Fountain	_____	( ) _____	( ) _____
13. Air Conditioner (water cooled)	_____	( ) _____	( ) _____
14. Dental Unit	_____	( ) _____	( ) _____
15. Lawn Sprinkler No. of Heads	_____	( ) _____	( ) _____
16. Fire Sprinkler No. of Heads	_____	( ) _____	( ) _____
17. _____	_____	( ) _____	( ) _____
18. _____	_____	( ) _____	( ) _____
Total		_____	_____

Gallons per minute _____

Size of Service _____ _____

Date: _____ Approved: _____

Brick Township Plumbing Inspector

BRICK UTILITIES
THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

Legend
- Road Edges
- Road Names
- Hydrants
- FIRE
- OTHER
- WATER QUALITY
- Valves
- Water Pipes
- BTMUA Sanitary Manholes
- Sanitary Sewer Pipes
- Buildings
- Parcel Boundaries
- Map Sheet Index - 2003

205 Georges Road

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 EAST
BRICK, NEW JERSEY 08724
~~(908)~~ 732 458-7000

STATEMENT OF UTILITY SERVICES

APPLICANT: NAME: King Contracting PHONE NO. 920-6441 (bus.)

ADDRESS: 2597 Hooper Ave _____ (home)

Brick NJ 08723

PROPERTY IN QUESTION: ADDRESS 205 Georges Rd

BLOCK(S) 1205.05 LOT(S) 5

BTMUA ACCOUNT NO. E588918 TAX MAP DRAWING NO. 61.01

SINGLE FAMILY RESIDENCE X MINOR SUBDIVISION _____

COMMERCIAL _____ MAJOR SUBDIVISION _____

* LOT HAS EXISTING SERVICE

	WATER	SEWER
1. UTILITY SERVICE CAN BE PROVIDED. APPLICATION FOR SERVICE IS **REQUIRED.**	X	X

CONNECTION WILL BE PROVIDED AS FOLLOWS: INITIAL SERVICE CHARGES

* WATER GEORGES ROAD (STREET) 3/4" 2528.00 1" 4435.00

* SEWER GEORGES ROAD (STREET) 2796.00

2. UTILITY SERVICE CANNOT BE PROVIDED AT THIS DATE. APPLICATION FOR EXTENSION IS ☐ IS NOT ☐ REQUIRED. _____ _____

3. UTILITY SERVICE CANNOT BE PROVIDED AT THIS DATE. IT SHALL BE AVAILABLE UPON COMPLETION OF WORK BY A DEVELOPER UNDER APPLICATION NO. _____ CONTACT THE AUTHORITY TO CONFIRM AVAILABILITY OF SERVICES. _____ _____

DATE: Mar 29, 2005 SIGNED: James R Allen

NOTE: STATEMENT GOOD FOR ONE YEAR.

C.G. 11/28/05

TOWNSHIP OF BRICK

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

Division of Land Use, Planning
& Affordable Housing

Michael P. Fowler, AICP/PP
Municipal Planner
(732) 262-1042

Tara B. Paxton, AICP/PP
Assistant Municipal Planner
(732) 262-4783

Fax: (732) 262-8854
http://www.twp.brick.nj.us

SUBDIVISION SEARCH OFFICE

February 14, 2006

TO: James Dickson
King Contractors
2597 Old Hooper Avenue
Brick, NJ 08723

RE: SUBDIVISION CERTIFICATION
Block 1205.05, Lots 5-10
Brick, NJ 08724 (1st Update)

CERTIFICATE AS TO APPROVAL OF SUBDIVISION OF LAND N.J.S. 40:55D-56

I, Michael P. Fowler, Municipal Planner of the Township of Brick, Ocean County, New Jersey, do hereby certify:

a. There exists in the Township of Brick a duly established Planning Board and there exists in said Township a duly adopted ordinance regulation and subdivision of lands, enacted under the authority of the Municipal Land Use Law, Chapter 291, Laws of N.J. 1985.

b. The subdivision or resubdivision, as it relates to the land shown in the application **has** been approved by the Brick Township Planning Board or Council.

DATE OF APPROVAL: January 7, 1955, Map No. B-374

The subject property **can** be statutorily exempt from the requirement of subdivision approval as described in the **NOTE BELOW**.

I have hereunto affixed my hand and the seal on this 14th day of February, 2006.

Michael P. Fowler, AICP/PP
Municipal Planner

Fee $10.00
Search No. 19-05

CC: Twp Clerk
Tax Assessor
Tax Collector
Zoning Officer
Richard Garnett, MUA
File

NOTE:
The proposed Subdivision Exemption creates two fully conforming lots in the R-7.5 Zone (Block 1205.05, Lots 5-7 & Block 1205.05, Lots 8-10). The house and accessory uses have been removed from the property.

R.C. BURDICK, P.E., P.C.

1023 OCEAN RD., PT. PLEASANT, N.J. 08742 TEL. (732) 892-5050 FAX (732) 892-5888

Brick Township Construction Code Official
401 Chambersbridge Rd.
Brick, N.J. 08723

December 30, 2005

Re: Lot 8, Block 1205.05
205 Georges Rd.
Brick Township
Project No. 05-3129

Dear Brick Township Construction Code Official,

We have analyzed the plot plan and building plans for the construction of a single family home at the above referenced site to determine compliance with Brick Township Ordinance 354-2D-03. We find the following:

	Elevation	Height	Max. Allowed
Lowest Adjacent Elevation*	39.9	-	-
Finished Floor Elevation	43.3	3.4'	-
Eave Elevation	60.3	20.4'	25'
Building Height	66.3	26.4'	35'
Ridge Height	72.3	32.4'	38.5'

* Using lowest adjacent elevation to show conservative analysis

Based on the above, we believe that the proposed building plans and plot plan comply with Brick Township Ordinance 354-2D-03 and that the building heights are in conformance with Township requirements.

We trust that this will enable you to issue a permit for this portion of the building permit analysis. Should you require additional information or have any questions, please call.

Sincerely yours,

Robert C. Burdick P.E.
NJPE 30929

1/16/06

TOWNSHIP OF BRICK

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

Department of Administration & Finance
Office of Tax Assessor
Frederick R. Milliman, CTA
Tax Assessor
(732) 262-1069
Fax: (732) 262-9687
http://www.twp.brick.nj.us

February 17, 2006

Mr. James Dickson
King Contractors
2597 Old Hooper Avenue
Brick, NJ 08723

Re: Subdivision Exemption
Block: 1205.05, Lots: 5-10
Georges Road, Brick, NJ

To Whom It May Concern:

This office has received a copy of the Subdivision Certification dated February 14, 2006. The following addresses have been tentatively assigned by our office, pending compliance with all necessary Township requirements:

Block 1205.05, Lot 5 (addl lots 6-7), 203 George's Road
Block 1205.05, Lot 8 (addl lots 9-10), 205 George's Road

Please reference the above blocks/ lots/addresses on all future correspondence, building permits or map submissions to the Township. Pursuant to law, the above parcels will remain joined until January 1, 2007, thereafter they will appear as separate line items in our tax rolls.

If you have any questions, please do not hesitate to contact me.

Very truly yours,

Irene F. Raftery, CTA
Assistant Tax Assessor
(732) 262-1064

cc: Michael P. Fowler, Municipal Planner
Allison Peltier, Building Dept.

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: 205 Georges Rd

Block: 1205.05 Lot: 8 & 5

Contractor: King Contractors.

Contractor's Address: 2597 Hooper Avenue

Type of Construction (minor, new home): New Home.

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

Party responsible for removal: King Contractors.

Dumpster size: 30yrd

Destination of debris: Ocean County land Fill.

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.

James Dickson
Signature

2/14/12
Date

James C. Dickson.
Print Name

TOWNSHIP OF BRICK

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

Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
http://www.twp.brick.nj.us

SHADE TREE PERMIT

RECEIPT OF FEES

DATE: 2/14/00

BLOCK: 1205.05

LOT: 8 5

FEE: $ 0

INSPECTION: _____

APPLICATION FOR SHADE TREE PERMIT
ORDINANCE #158-E-99

1. **Name and address of Applicant:** King Contractors

   2597 Hooper Avenue Brick NJ 08723

   Provide name & address of person applying for permit. If applicant is other than owner, give and identify names and addresses of both;

2. **Property Block:** 1205.05 **, Lot(s):** 8
   This information is available from your deed or tax bill;

3. **Address if different from applicant:** 205 Georges Rd.
   Give street and number if one is assigned. If there is no street number, estimate distance and direction from nearest intersection or other easily recognizable landmark;

4. **Location of trees on property** _____ **and number of trees presently on property** _____**;**

   A. FOR INDIVIDUAL BUILDING LOTS:
   Provide either a copy of a recent survey or a sketch of the property drawn to scale including any pertinent distances not easily read from the sketch. Include existing buildings, driveways and other constructions in SOLID LINES. Show all existing trees (see note below) with a circle. Trees may be keyed as to genus and species if desired, otherwise include a "C" inside circle for coniferous (pine, etc.) trees and "A" "D" for deciduous trees.

   NOTE Trees to be removed will have an "X" through the circle.**

   If removal is desired because of proposed construction of any kind, include such construction in DOTTED LINES and identify. If planting of new trees (including but not limited to those in note below), is proposed in application to replace those removed, or for any other reason, show approximate proposed location with a DOTTED CIRCLE and specify species and approximate planting size (height & caliper).

   There should be a minimum of one tree for each 2,000 square foot after all tree removal and replacement, (e.g. an 80 X 100 ft lot includes 8,000 SF and would require a minimum of 4 trees).

   B. FOR OTHER ACREAGE
   Include copy of subdivision plot plan or equivalent outlining all wooded areas and solitary trees. Identify each (e.g. "heavily wooded mature oak with scattered Dogwood" or sparsely wooded mixed Pitch Pine and small Oak, etc.)

Same minimum of one tree per 2,000 SF as above is required.

APPLICATION FOR SHADE TREE PERMIT – ORDINANCE #158-E-99

Note **

"Tree" for the purpose of this permit means (1)-one any live coniferous tree, 4" or more DBH (diameter breast high), (2)-two any deciduous tree (live 3" or more DBH, (3)-three any live American Holly or Dogwood 1" or more, one foot above-ground and (4)-four any live Laurel 3" or more across root crown.

Date: _____

Name of Applicant: King Contractors

Address: 2597 Hooper Ave. Brick NJ 08723

Block: 1205.05 **, Lot(s):** 8

Residential: X **, Commercial:** _____

Address (if different from applicants): _____

LOCATION OF TREES ON PROPERTY

NUMBER OF TREES PRESENTLY ON PROPERTY

++

FEES:

$5.00 per tree (maximum $25.00) on individual building lot;

$25.00 per acre for approved subdivisions/site plans.

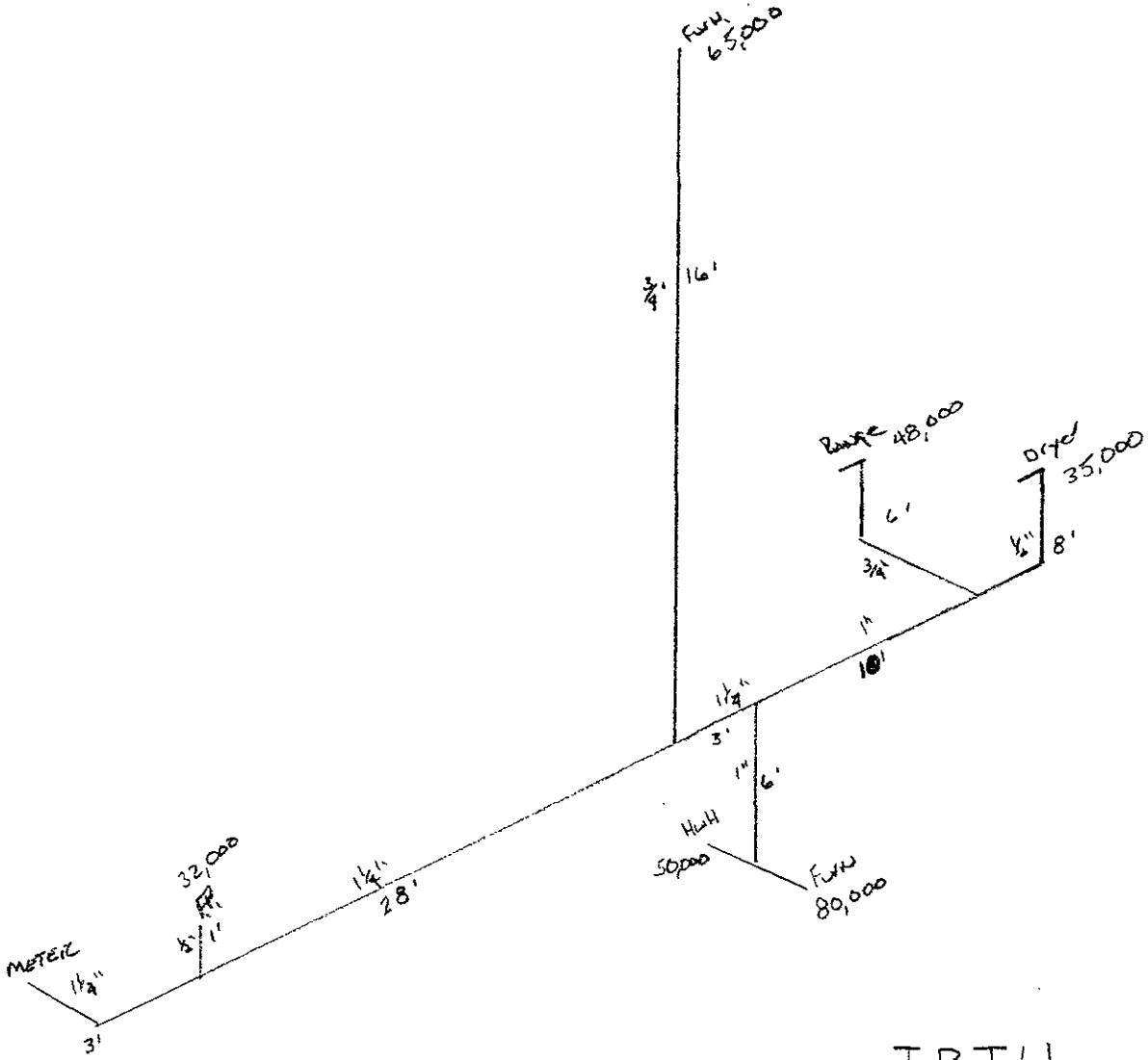
AMOUNT OF FEE $_____

++

Reviewed by: _____

Approved by: _____ **Date:** 5/6/06

Township Engineer



90° elbow
1 1/4 - 310,000.

TBTU = 310,000

TDL = 81 FEET

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER HINTC CONTRACTORS DATE 3/7/06

PROPERTY ADDRESS 205 GEORGES RD BLOCK 1205.05 LOT 5

ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMING FIXTURES	NUMBER	(sfu)	WATER UNITS	(dfu)	DRANAGE
1. BATHROOM GROUP	2.5	( )	8.0	( )	
2. KITCHEN GROUP	1	( )	2.0	( )	
3. WATER CLOSETS		( )		( )	
4. LAVATORY		( )		( )	
5. BATH TUB		( )		( )	
6. SHOWER STALL		( )		( )	
7. KITCHEN SINK		( )		( )	
8. SERVICE SINK		( )		( )	
9. LAUNDRY TRAY		( )		( )	
10. DISHWASHER		( )		( )	
11. WASHING MACHINE	1	( )	4.0	( )	
12. URINAL		( )		( )	
13. FLOOR DRAIN		( )		( )	
14. DRINK FOUNTAIN		( )		( )	
15. AIR CONDITION WATER COOLED		( )		( )	
16. DENTAL UNIT		( )		( )	
17. LAWN SPRINKLE		( )		( )	
18. FIRE SPRINKLE		( )		( )	
19. HOSE BIBS	2	( )	3.5	( )	
	TOTALS		17.5		

GALLONS PER MINUTE _____

SIZE of SERVICE 3/4"

DATE: _____ APPROVED BY: Mark A. Bogard

B[illegible]ect Fire Plumbing (Please mark subcode)

CONTROL NUMBER C06-0843

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 205 Georges

DATE REVIEWED: 3/30/06

REVIEWED BY: MV

CONTACT CALLED/FAXED: ① Indicate whether or not basement option will be used

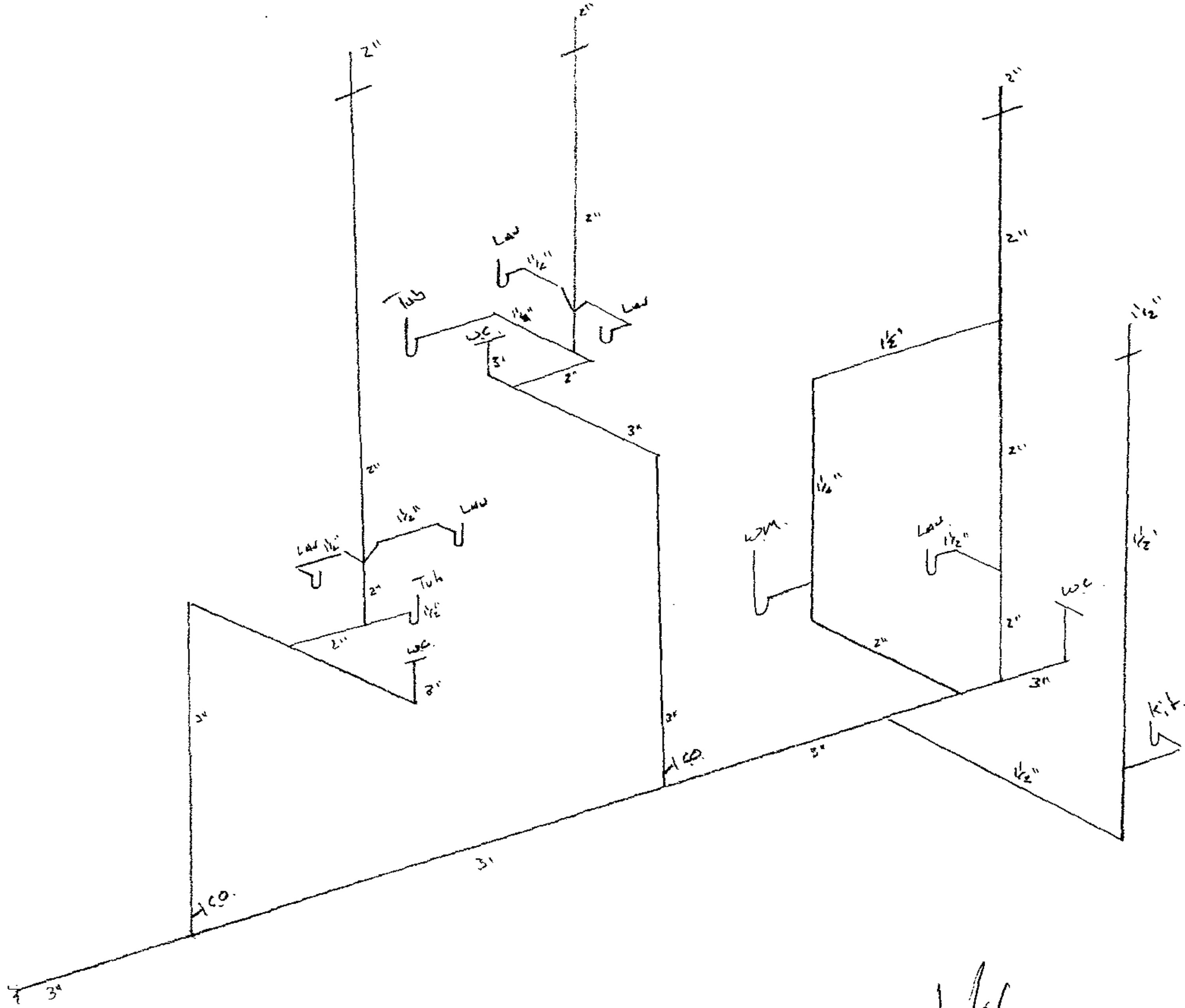
② Posts at porch area require 115 MPH wind design for connections to Foot/Girder

③ Provide 115 MPH Connection details at rafter and sheathing & top plate

④ Indicate which elevation will be used A or B, How ~~many~~ Car garage.

⑤ 2 car Garage option requires shear wall design & garage door wall

Frank/plan review template



2"
2"
2"
1½"
Lav
1½"
Lav
Tub
1¼"
W.C.
3"
2"
3"
1½"
1½"
W.M.
Lav
1½"
Lav 1½"
1½"
Lav
Tub
1½"
2"
W.C.
3"
3"
3"
C.O.
3"
C.O.
3"
3"
W.C.
3"
Kit.
1½"

3/7/06

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER KING CONTRACTORS DATE 3/7/06

PROPERTY ADDRESS 205 GEORGES RD BLOCK 1205.05 LOT 5

ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMING FIXTURES	NUMBER	(sfu)	WATER UNITS	(dfu)	DRANAGE
1. BATHROOM GROUP	2.5	( )	8.0	( )	
2. KITCHEN GROUP	1	( )	2.0	( )	
3. WATER CLOSETS		( )		( )	
4. LAVATORY		( )		( )	
5. BATH TUB		( )		( )	
6. SHOWER STALL		( )		( )	
7. KITCHEN SINK		( )		( )	
8. SERVICE SINK		( )		( )	
9. LAUNDRY TRAY		( )		( )	
10. DISHWASHER		( )		( )	
11. WASHING MACHINE	1	( )	4.0	( )	
12. URINAL		( )		( )	
13. FLOOR DRAIN		( )		( )	
14. DRINK FOUNTAIN		( )		( )	
15. AIR CONDITION WATER COOLED		( )		( )	
16. DENTAL UNIT		( )		( )	
17. LAWN SPRINKLE		( )		( )	
18. FIRE SPRINKLE		( )		( )	
19. HOSE BIBS	2	( )	3.5	( )	
		TOTALS	17.5		

GALLONS PER MINUTE _____

SIZE of SERVICE 3/4"

DATE: _____ APPROVED BY: Mark A. Disbrow

PERMIT # 06-1149 LOT: 4 BLOCK: 1205.05

FRAMING CHECKLIST

Instructions: Builder or Builder's representative checks boxes marked 'B'. Building Inspector checks boxes marked 'I'. Responsible Person in Charge of Work signs. initials and dates in spaces provided. Building Inspector initials and dates in spaces provided.

NOTE: ALL ITEMS SHOULD BE AS SHOWN ON THE PLANS OR AS REQUIRED BY CODE.

A. BASEMENT OR CRAWL SPACE

1. ANCHORAGE:

BOLTS
- SPACING
- SIZE

STRAPS
- SPACING (PER MANUFACTURER'S SPECS)
- SIZE

2. SILL PLATES:
- SIZE
- GRADE, SPECIES
- TREATMENT
- LAPS
- SILL SEALER
- PROPER TREATMENT OVER FOUNDATION OPENINGS (BEARING OF JOIST)
- TERMITE PROTECTION

3. BEAM POCKETS:
- BEARING/SHIMS
- TERMITE PROTECTION OR CLEARANCE

4. COLUMNS:
- SIZED PER PLAN
- ATTACHMENT/PLATES
- SPACING/LOCATION
- PAINT/COATING

B. FLOOR FRAMING AND FLOORING

1. BOX OR RIM JOIST, OR PERIMETER BAND JOIST:

1ST	2ND	3RD	FLOOR
			SIZE
			GRADE, SPECIES
			SINGLE OR DOUBLE
			PRE-ENGINEERED PER MANUFACTURER'S SPECS
			CANTILEVERS AS PER DESIGN

2. GIRDERS AND BEAMS:
- SIZED PER PLAN
- TYPE
- GRADE, SPECIES
- LOCATION AND RELATION TO THE PLAN
- NAILING
- ATTACHMENT SCHEDULE
- BEARING
- LAPPING

3. FLOOR JOIST:

1ST	2ND	3RD	FLOOR
			SIZED PER PLAN
			GRADE, SPECIES
			PRE-ENGINEERED COMPONENTS AS SPECIFIED
			BEARING
			NAILING
			BRIDGING
			CUTTING AND NOTCHING (AS PER CODE)
			POINT LOADS - SUPPORTED AS PER PLAN
			SPAN HANGERS
			HEADERS
			FRAMED OPENINGS

4. FLOORING, SHEATHING, OR DECKING:

	1ST	2ND	3RD	FLOOR
MATERIAL				
				PANEL SPAN, THICKNESS

SPECIAL REQUIREMENTS
- EDGE BLOCKING (IF REQUIRED)
- GAPPING
- LAYOUT

5. STAIR ATTACHMENT:

1ST	2ND	3RD	FLOOR
			BEARING
			NAILING

I hereby certify that I inspected this building using this checklist and it conforms to the released plans and to the requirements of the Uniform Construction Code, N.J.A.C. 5:23.

Responsible Person in Charge of Work: [signature] Date: 8-10-06

Building Inspector Initials: Date: 8/10/06

U.C.C. F390-1 (01/06)

PERMIT #: _____ LOT: 8 BLOCK: 1205.05

C. WALL FRAMING

1. EXTERIOR WALL FRAME:

1ST	2ND	3RD	FLOOR
		B I	SIZE
		B I	SPACE
		B I	SPECIES AND GRADE
		B I	CUTTING, NOTCHING, AND BORING
		B I	HEADER SIZES
		B I	JACK STUD BEARING
TOP PLATES			
		B I	NAILING
		B I	LAPS
		B I	RAFTER TIES
		B I	HURRICANE STRAPS (AS REQUIRED)

2. INTERIOR LOAD-BEARING WALLS:

1ST	2ND	3RD	FLOOR
		B I	SIZE
		B I	SPACE
		B I	LAYOUT - SUPPORT BELOW PER CODE
		B I	SPECIES AND GRADE
		B I	CUTTING, NOTCHING, AND BORING
		B I	FIRE BLOCKING
		B I	HEADER SIZES
		B I	JACK STUD BEARING
TOP PLATES			
		B I	NAILING
		B I	LAPS
		B I	STRAPPING

3. INTERIOR NON-LOAD-BEARING WALLS:

1ST	2ND	3RD	FLOOR
		B I	SIZE
		B I	SPACE
		B I	SPECIES AND GRADE
		B I	CUTTING, NOTCHING, AND BORING
		B I	FIRE BLOCKING
		B I	HEADER SIZES
		B I	TOP PLATE NAILING

D. ROOF FRAMING

1. TRUSS ROOF FRAMING (AS PER DESIGN):

APPROVED DOCUMENTS WHICH SHOW:

- B I LAYOUT PLANS
- B I TRUSS MEMBERS
- B I CONNECTION SCHEDULE
- B I PERMANENT BRACING DETAILS
- B I DORMERS, ROOF STRUCTURES ON MANUFACTURER'S DRAWINGS
- B I EQUIPMENT/APPLIANCES ON MANUFACTURER'S DRAWINGS
- B I LOCATION AS PER LAYOUT
- B I ALIGNMENT
- B I BEARING
- B I SPACING
- B I CONNECTIONS TO BEARING POINTS
- B I NO CONNECTION TO NON-BEARING POINTS
- B I DAMAGE AND DEFECTS
- B I ENGINEERED METHOD OF REPAIR

2. PERMANENT TRUSS-TO-TRUSS BRACING (AS PER DESIGN):

- B I LAYOUT
- B I SIZE
- B I TYPE
- B I NAILING
- B I OVERLAP
- B I TERMINATION
- B I TRANSITION (I.E., CROSS) BRACING

3. GABLE END BRACING (AS PER DESIGN):

- B I LAYOUT
- B I SIZE
- B I TYPE
- B I NAILING
- B I OVERLAP
- B I TERMINATION

4. SOLID SAWN ROOF FRAMING:

- B I SIZE
- B I GRADES, SPECIES

LAYOUT

- B I SPACING
- B I SPAN
- B I BEARING
- B I FASTENING
- B I DAMAGE CAUSED BY FASTENERS (RAFTERS NOT SPLIT BY TOENAILS)
- B I CUTTING, NOTCHING, AND BORING
- B I BRIDGING
- B I RIDGE SIZE
- B I HURRICANE TIES WHERE APPLICABLE

E. SHEATHING

1. SHEATHING - EXTERIOR WALLS:

MATERIAL

- B I PANEL SPAN, THICKNESS

SPECIAL REQUIREMENTS

- B I GAPPING
- B I LAYOUT
- B I CORNER BRACING (IF REQUIRED)

2. SHEATHING - ROOF:

MATERIAL

- B I PANEL SPAN, THICKNESS

SPECIAL REQUIREMENTS

- B I BLOCKING, EDGE (IF REQUIRED)
- B I CLIPS (IF REQUIRED)
- B I GAPPING
- B I LAYOUT

SHEATHING, PRT - ROOF

- B I FOUR FEET FROM FIREWALL
- B I NONCORROSIVE FASTENERS

U.C.C. F390-2 (01/06)

Initials: Reso. Person in Charge of Work _____ Building Inspector _____

R.P. = Rob Dickson

WASTE MANAGEMENT

200PC

[illegible]

WASTE MANAGEMENT

[illegible]

200PC

[illegible]

WASTE MANAGEMENT

[illegible]

Land Use/ Bldg Dept Fax:732-262-8954

*** Transmit Conf. Report ***

Jul 31 2006 16:27

P.1

	Telephone Number	Mode	Start	Time	Page	Result	Note
[J]	CUTIN	NORMAL	31,16:26	0'33"	1	* O K	

MUNICIPALITY Bricktown

CUT-IN-CARD

LOCATION 393 Cedarcroft UTILITY CO PP

DR 31 4788 499 BLK 889 LOT 13

OWNER L Glidden OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C., utility and DCA requirements."

☑ FINAL ☐ TEMPORARY This approval void after ____days

DESCRIPTION OF SERVICE 100 Amp Temp pole

INSTALLED BY Salsano Elect LICENSE NO 9042

DATE 7-31-06 PERMIT # 06-2240 HB INSPECTOR [illegible]

☐ CALLED IN / / Lic. No: 6455

U.C.C. Form F-3508 1 WHITE–UTILITY 2 CANARY–OFFICE/FILE 3 PINK–OFFICE/CONTRACTOR

MUNICIPALITY Bricktown

LOCATION

OWNER

"Installation in the above p
in accordance with N.E.C

☐ FINAL ☐ TEMPORARY This approval voi

DESCRIPTION OF SERVICE

INSTALLED BY

DATE PERMIT #

☐ CALLED IN / /

U.C.C. Form F-3508 1 WHITE–UTILITY 2 CANARY–OFF

MUNICIPALITY Bricktown

CUT-IN-CARD

LOCATION 205 Georges Rd UTILITY CO PP

BLK 1205.05 LOT 8

OWNER King Contractors OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C., utility and DCA requirements."

☒ FINAL ☐ TEMPORARY This approval void after ____days

DESCRIPTION OF SERVICE 150 Amp Service

INSTALLED BY Dickson Elect LICENSE NO 8392

DATE 7-31-06 PERMIT # 06-1149 INSPECTOR [illegible]

☐ CALLED IN / / Lic. No: 6455

MUNICIPALITY Bricktown

LOCATION

OWNER

"Installation in the above p
In accordance with N.E.C

☐ FINAL ☐ TEMPORARY This approval voi

DESCRIPTION OF SERVICE

INSTALLED BY

DATE PERMIT #

☐ CALLED IN / /

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/21/2006
Control Number C-06-0843
Permit Number 06-1149

Construction Inspection

Identification

Work Site Location: 205 GEORGES RD , NJ
Block: 1205.05
Lot: 8
Owner in Fee: KING CONTRACTORS
Owner Address: 2597 HOOPER AVENUE BRICK NJ 08723
Telephone: (732) 920-6441

Inspection Details

Start Date: 07/31/2006
Start Time:
Subcode:
Inspector: Marcel Renson
Inspection Level: Progress inspection
Inspection Type: ROUGH & SERVICE
Result: Pass
Result Comments:
Inspection Comment:

New Jersey Natural Resources Conservation Program

OCEAN COUNTY SOIL CONSERVATION DISTRICT

714 LACEY ROAD, FORKED RIVER, N.J. 08731
Phone 609-971-7002
Fax 609-971-3391

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: Brick

PROJECT: King Contractors-Two lots SCD NO.: 11525

BLOCK NO.(s) 1205.05 LOT NO.(s) 5, 8

Final Compliance ☒ Conditional Compliance ☐

Block No.	Lot No.	Conditions
1205.05	5	203 Georges Road
	8	205 Georges Road

TOTAL FEES DUE: $ _____

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act, (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: Jean M Balwanz

DATE: 5/8/07

DISTRIBUTION: WHITE - Township
CANARY - Applicant
PINK - District

Revised 6/96

#A5464

TOWNSHIP OF BRICK

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

Department of Administration & Finance

Office of the Tax Collector

Jo Anne R. Lambusta, CTC
Tax Collector
732-262-1021
Fax: 732-477-3746
jlambusta@twp.brick.nj.us
www.twp.brick.nj.us

Receipt for Public Works Garbage Can Deposit

Date: 10-17-07

Block: 1205.05 Lot: 8

AC 625741

Property Address: 205 GEORGES RD

CK# 20789

Date of Payment: 10-17-07

Jeanne

Tax Collectors Office

311 ACCESS BRICK TOWNSHIP

OFFICE OF AFFORDABLE HOUSING
MANDATORY DEVELOPMENT FEES

BLOCK:	1205.05	LOT:	8
SITE ADDRESS:	205 Georges Rd.		
CONTROL #:	06-0843	WORK TYPE:	SF Dwelling
APPLICANT:	King Contractors	PHONE #	732-920-6441
APPLICANT ADDRESS	2597 Hooper Ave.	CITY/STATE/ZIP:	Brick, NJ 08723

MANDATORY DEVELOPER FEES

_X__ Residential is 1%
___ Commercial is 2%
___ Waiver Signed for estimated Mandatory Development Fee

Business Name:

The estimated equalized assessed value: Residential $ 301,920.00
Commercial

02/24/2006
Date

The final equalized assessed value at the above referenced site is: Residential $ 356,400.00
Commercial

09/21/2007
Date

Prel. Fee (Res)	$ 1,509.60	Final Fee (Res)	$ 2,054.40
Prel. Fee (Comm)	$ -	Final Fee (Comm)	$ -
Waiver Fee(Res. Only)			
Check #	100191	Check #	20814
Date Paid	03/06/2006	Date Paid	10/22/2007

Total Fee Paid (Res) $ 3,564.00
Total Fee Paid (Com) $ -

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

Authorized Signature – Township of Brick

06-1149

Certificate of Occupancy Single Family Dwelling

Address 205 Georges Rd. Block 1205.05 Lot 8

Final Inspections:

1. Final Building
2. Final Electric
3. Final Plumbing
4. Final Fire
5. Certificate of Compliance
6. Final Engineering
7. Final Ocean County Soil
8. Home Owners Warranty / Affidavit

Report of compliance of Ocean County Soils is needed or a report from Ocean County Soils stating that a report of compliance is not needed. The phone number for Ocean County Soils is 609-971-7002.

Building _____ Approval Date 10-4-07

Plumbing _____ Approval Date 10-5-07

Fire _____ Approval Da 10-3-07

Electrical _____ Approval Date 10-3-07

Cert. Of Compliance _____ Approval Date 10-17-07

HOW / Affidavit _____ Approval Date 10-10-07

Engineering _____ Approval Date 10-19-07

Soil _____ Approval Date 5/8/07

Affordable Housing _____ Approval Date pd 10/23/07

Occupancy Load _____ Approval Date N/A

Garbage Can Receipt _____ Approval Date 10-17-07

CO Application _____ Approval Date 10/22/07

NJ Department of Community Affairs
Division of Codes and Standards
Bureau of Homeowner Protection
New Home Warranty Program
PO Box 805
Trenton, NJ 08625-0805

Certificate of Participation

in the New Home Warranty Security Fund

Owner ☐ Check if for Common Elements*

1 Alain and Josee Dumais

Name of Owner who will be first resident. *When used for common elements, enter name of condominium development. See builder instruction sheet. A separate Certificate of Participation is required for each individual building in a condominium development.*

New Dwelling Location

3 205 Georges Rd

Street Name and Number

Building Number	Unit Number	Total Number of Units in Building

Brick NJ 08723

City State Zip Code

Block Number 205.05 Lot Number 5

Brick Ocean

Municipality County 006

Registered Builder-Warrantor**

2 King Contractors II Inc.

Name

2597 Hwy 88

Street and Number (Mailing Address)

Brick NJ 08723

City State Zip Code

Phone Number (732) 920-0441

NJ Builder Registration Number 38949

Print Builder Name James C. Dickson

Registered Builder's Signature

***Where title is transferred, the seller must be the registered builder and warrantor.*

Commencement Date of Warranty

4 Commencement Date*** 10 15 2002

Month Day Year

****The date of closing or first occupancy, whichever occurs first. ANY CHANGE IN THE COMMENCEMENT DATE MUST BE REPORTED TO THE PROGRAM.*

Premium Payment

5 a. Selling Price**** $ 450,000

Amount of Premium $ 1,435.50

(Rate .00319 x Selling Price)

*****Any change in the selling price and premium must be reported to the Program along with supplemental payment if applicable.*

A premium payment is not required if this certificate is for common elements in a condominium development.

b. ☐ Check if house is constructed on owner's lot. Then calculate warranty premium as follows:

Total Contract Price _____ For Office Use Only

Amount of Premium $ _____

(1.25 x Total Contract Price x Rate _____)

FHA Mortgage

6 ☐ Check if FHA Mortgage

FHA Case Number ☐☐☐-☐☐☐☐☐☐

☐ Check if VA Mortgage

VA Case Number n/a

Exclusions

7 ☐ Check if exclusion sheet is included.

Building Type (check one)

8
- ☑ Single family detached (101)
- ☐ Townhouse (102)
- ☐ Two Family (103)
  - ☐ Side by Side
  - ☐ Top/Bottom
- ☐ Condominium - *three or four units in each building* (104)
- ☐ Condominium - *five or more units in each building* (105)

Construction Type (check one)

9
- ☐ Premanufactured (industrial or modular) (M)
- ☑ Conventional Construction (C)

Stories

10 Number of stories 2

Owner Type (check one)

11
- ☐ Condominium or Cooperative (C)
- ☐ Homeowners' Association - fee simple (H)
- ☑ No Homeowners' Association - fee simple (N)

PRED

12 PRED Registration or Exemption Number (R or E)

n/a

Note: See reverse side for assignment of property.

Note to Owner:
Any disagreement with information in blocks 1, 3, 4, and 5 on this certificate must be reported to the New Home Warranty Program within 45 days from its receipt. Your Builder/Warrantor must give you a Homeowner's Booklet with this certificate. If you did not receive it, write to the above address.

This certifies that the above described dwelling unit carries a New Home Warranty issued pursuant to the New Home Warranty and Builders' Registration Act, NJSA 46:3B-1 et seq. Said warranty is valid for varying periods of 1, 2, and 10 years.

VALIDATION STAMP

CERTIFICATE NUMBER

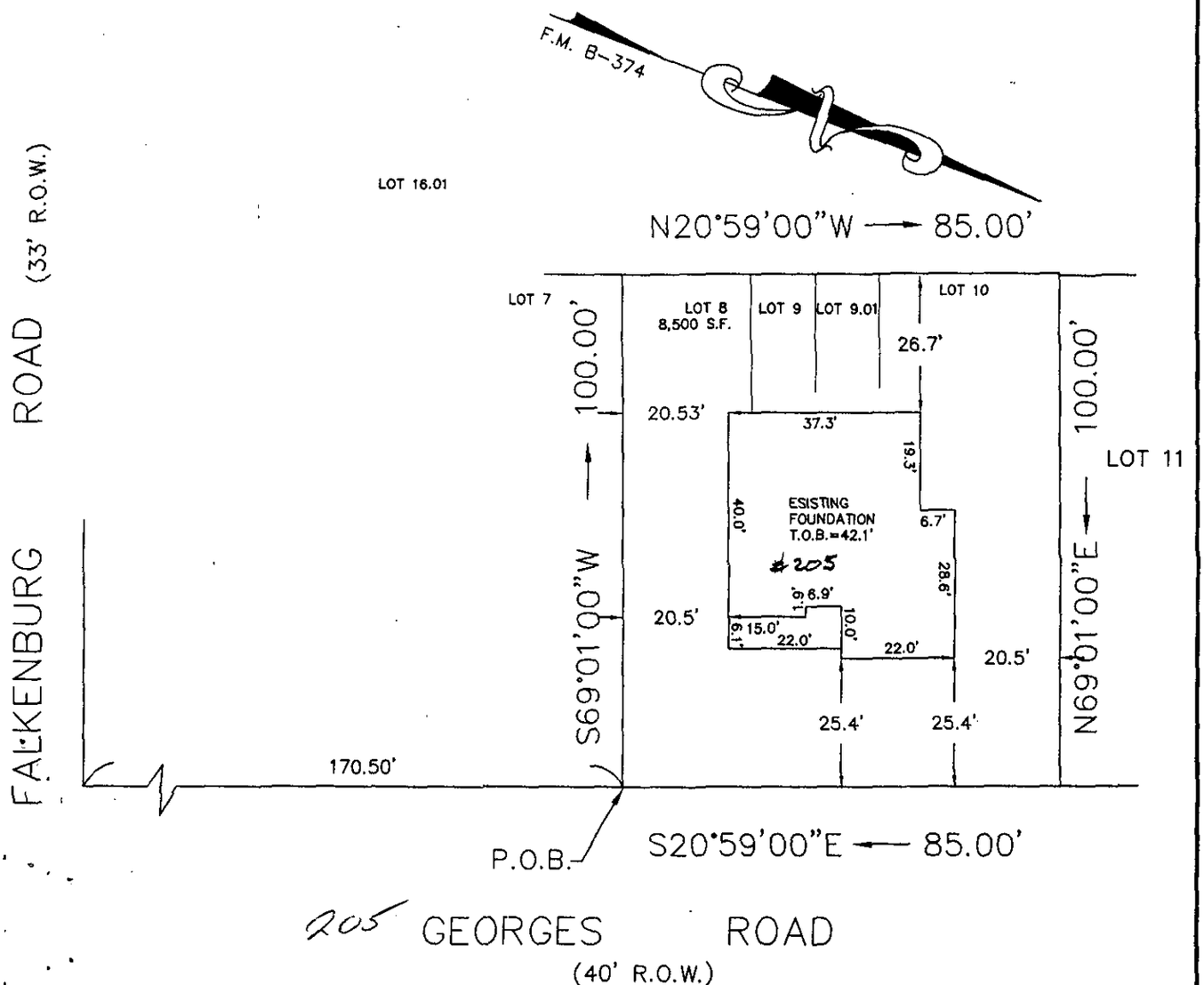
186757 OCT 10 5

WARRANTY NUMBER

7685c rev.7/93

MUNICIPAL COPY

NOTE: PROPERTY CORNERS TO BE SET AFTER GRADING.



only 4 Lots
6-19-06

DEED DESCRIPTION

BEING KNOWN AND DESIGNATED AS LOTS 8, 9 & 10 IN BLOCK 5, AS SHOWN ON A MAP ENTITLED "SUBDIVISION MAP OF THE J.W. FALKENBURG PROP., BRICK TOWNSHIP, OCEAN COUNTY. NEW JERSEY" AS FILED IN THE OCEAN COUNTY CLERK'S OFFICE ON JANUARY 7, 1955, AS MAP NO. B-374.

ALSO KNOWN AS LOT 8 IN BLOCK 1205.05 ON THE OFFICIAL TAX MAP OF BRICK TOWNSHIP.

UNDER GROUND UTILITIES NOT SHOWN SUBJECT TO ANY EASEMENTS AND/OR RESTRICTIONS OF RECORD.

CERTIFIED TO:
JAMES C. DICKSON, MARRIED;
JAMES C. DICKSON d/b/a KING CONTRACTORS;
SHORE COMMUNITY BANK AND/OR ITS SUCCESSORS AND ASSIGNS;
MID-STATE ABSTRACT COMPANY,
AGENT FOR FIRST AMERICAN TITLE INSURANCE COMPANY;
KING, KITRICK & JACKSON, L.L.C.

STANLEY HANS JR., P.L.S., P.P.
N.J. PROFESSIONAL LAND SURVEYOR LICENSE # 29182
N.J. PROFESSIONAL PLANNER LICENSE # 2877

SKETCH OF SURVEY FOR: FND Loc.

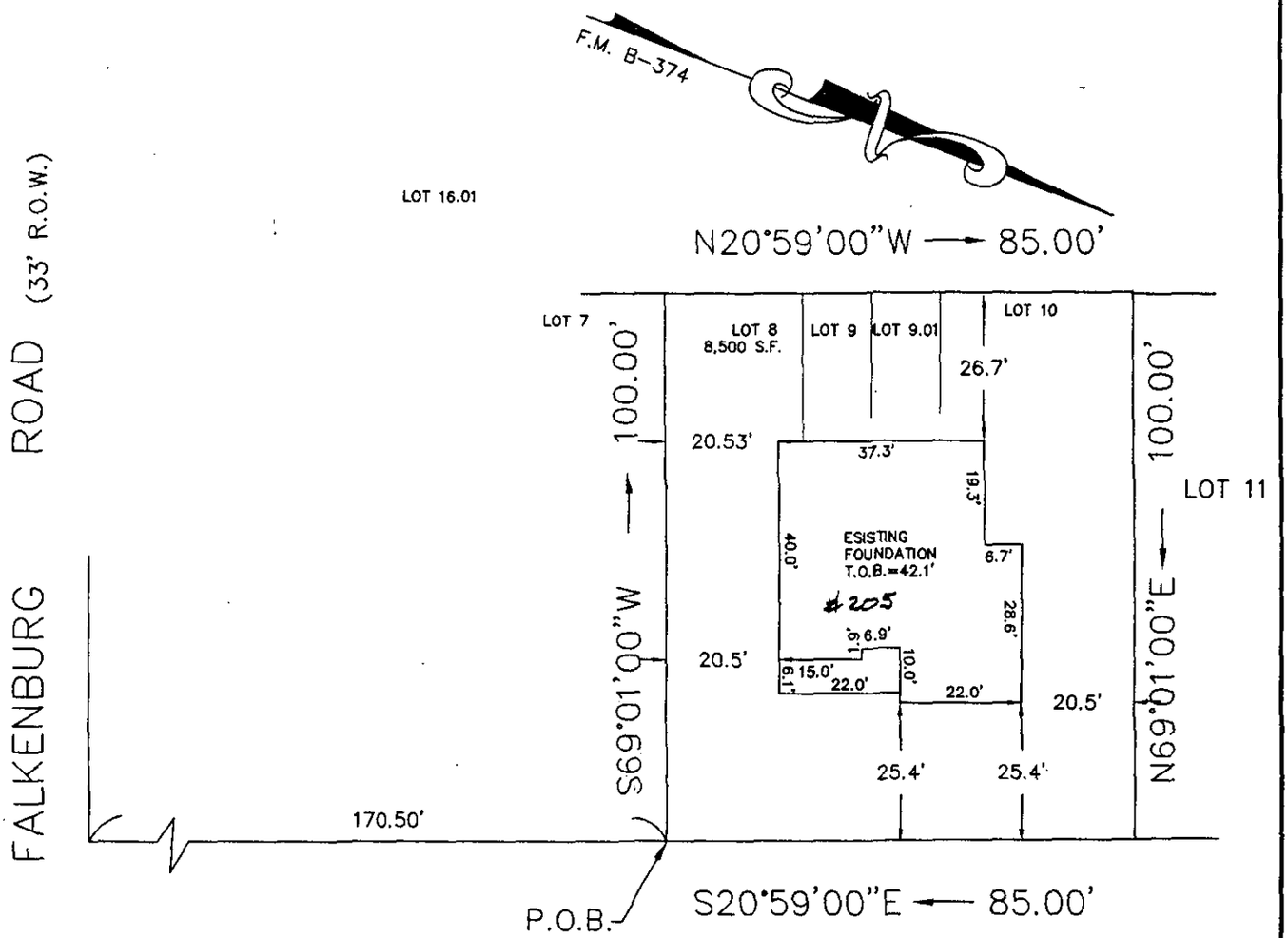
LOT 8 IN BLOCK 1205.05
BRICK TOWNSHIP
OCEAN COUNTY, NEW JERSEY

DATE: 6/17/06
SCALE: 1" = 30'
JOB No.: S3129-8 KING CONTR.
SHEET: 1 OF 1

R.C. BURDICK
CONSULTING ENGINEERS · SURVEYORS
PLANNING · ENVIRONMENTAL PERMITTING
1023 OCEAN ROAD
POINT PLEASANT, NJ 08742
(732)892-5050 FAX (732)892-5888

ROBERT C. BURDICK
NJ PROFESSIONAL ENGINEER #30929
NJ PROFESSIONAL PLANNER #04383

NOTE: PROPERTY CORNERS TO BE SET AFTER GRADING.



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NJ PROFESSIONAL PLANNER #04383

REVISED 9/24/02

TOWNSHIP OF BRICK

PLOT PLAN REVIEW
CHECK LIST

BLOCK 205.05 LOT 5 DATE RECEIVED _____

PROPERTY ADDRESS 203 Georges Rd.

APPLICANT King Contractors. PHONE 732-920-6441.

ADDRESS 2597 Hooper Avenue.

CONTRACTOR King Contracting. PHONE 732-920-6441

ADDRESS 2597 Hooper Avenue. Brick NJ 08723

TYPE OF WORK Residential ZONING APPROVAL _____

FLOOD ZONE _____ FLOOD ELEVATION _____

PANEL # _____ MAP # _____ DATE _____

PLANNING BOARD/BOARD OF ADJUSTMENT APPROVAL YES _____ NO _____

		YES	NO	N/A
1.	PLAN SIGNED & SEALED	X		
2	SCALE OF NOT LESS THAN 1"-50"	X		
3.	EXISTING ELEVATIONS (NGVD IN FLOOD ZONES)	X		
4.	PROPERTY LINES, CORNERS, BEARINGS & DISTANCES	X		
5	STREET GUTTER, CURB & CENTER LINE ELEVATIONS	X		
6.	CONTOURS 1' INCREMENTS	X		
7.	ADJACENT DWELLING CORNERS & CORNER ELEVATIONS	X		
8.	PROPOSED GRADING/ELEVATIONS	X		(cc)
9.	GARAGE/ST FLOOR/CRAWL SPACE/BASEMENT ELEVATIONS	X		
10.	PROPOSED DWELLING, DIMENSIONS & CORNER ELEVATIONS	X		
11.	METHOD OF DRAINAGE	X		
12.	NORTH ARROW	X		
13.	DRIVEWAY WIDTH/TYOE	X		
14.	DIMENSIONS/ACREAGE OF PARCEL/SETBACK LINES	X		
15.	PROPERTY ADDRESS/LOT AND BLOCK NUMBER	X		
16.	SIDEWALK, CURB AND APRONS	X		
17.	PARKING AREAS	X		
18.	UTILITY AND CONNECTIONS; WATER/SEWER/GAS/ELECTRIC	X		
19.	PLANTINGS, SEEDLINGS, SCREENINGS, FENCES, SIGNS			
20.	STREET WIDTH, STREET NAME, RIGHT-OF-WAY WIDTH	X		
21.	LIMITS OF CLEARING			
22.	BASEMENTS/DEDICATIONS/ENVIRONMENTAL CONSTRAINTS			
23.	PRIOR APPR: ARMY CORP/NJDEP/SOIL EROSION, ETC.			
24.	EXISTING STRUCTURES	X		
25.	RETAINING WALLS/SERVICE WALKS, OTHER MISC. ITEMS			

PLOT PLAN REVIEW:

APPROVED X REJECTED _____ SIGNED _____ DATE 3/6/06

REVISION:

APPROVED _____ REJECTED _____ SIGNED _____ DATE _____

COMMENTS: _____