BLOCK 103305 LOT 32 QUALIFICATION CODE _____ ADDRESS (SITE) 85 Oak Knoll Drive PERMIT NO. 17-1385

CONSTRUCTION PERMIT APPLICATION C-17-601447

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

I. IDENTIFICATION

1. Proposed Work Site at: 85 Oak Knoll Drive Brick
2. Name of Owner in Fee: George J. + Nancy Pizzuta
   Tel. [redacted] e-mail [redacted]
   Address 85 Oak Knoll Drive (street) municipality zip code
3. Ownership in Fee: Public _____ Private municipality
4. Principal Contractor: Carl's Fencing Tel. (732) 505 1749
   Address 1579 Rt. 9 e-mail info@bycarls.com
   Toms River, NJ 08755
   License No. OR, if new home, Builder Reg. No. 13VH04391000 Exp. Date 03/31/18
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 208 919 157 FAX: (732) 505 1552
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun Mike McDonough
   Tel. (732) 505 1749 FAX: (732) 505 1552

V. FEE SUMMARY (for office use only)

		$	Update	Update
1.	Building	350		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal			
7.	Less 20% for State Plan Review	$		
8.	Subtotal	$		
9.	State Permit Surcharge Fee	13		
10.	Subtotal	$ 50		
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 413		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

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

IIa. PROPOSED WORK

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

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☑ Building					4.20.17	JG			
☐ Electrical		CW	4/6/17						
☐ Plumbing									
☐ Fire Protection									
☐ Elevator		Eng	4/18/17	Exempt		ECC			
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____ ____
   Gained, Rental ____ ____
   Lost, Sale ____ ____
   Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed. _____
3. Change In Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

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(f)1.ix:

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. 5:23-2.15(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 Carls Fencing

Address 1579 RT 9
Toms River, NJ 08755

Telephone (732) 505-1749

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE USE ONLY

DATE:	COMMENTS:	INITIALS:
4/21/17	Spoke to Debbie-c	BSP

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.				

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 5/11/2017
Control Number C-17-001447
Permit Number 17-1385
Permit Issue Date 5/1/2017
Certificate Number 17-1385

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 85 OAK KNOLL DR. Brick Township, NJ Block: 1033.05 Lot: 32 Qual:

Owner in Fee: PIZZUTA, GEORGE J. & NANCY A.

Owner Address: 85 OAK KNOLL DR. BRICK NJ 08724

Telephone: [redacted]

Contractor CARL'S FENCING AND DECKING

Address 1579 ROUTE 9 TOMS RIVER NJ 08755

Telephone: (732) 505-1749 Fax: (732) 505-1552

License Number or Builders Registration Number: 13VH04391000 Federal Emp. Number: 20-8919157

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U *Construction Classification:*

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: FENCE ...POOL-BARRIER COMPLIANT

Certificate Comments:

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

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

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

☐ **Temporary Certificate of Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

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

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

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 5/11/2017

U.C.C F260 (rev 08/05)

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 5/1/17

Date Issued Permit # 17-1385

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

Block 10330.05 Lot 32 Qualification Code

Work Site Location 85 Oak Knoll Drive

Owner in Fee: George J + Nancy Pizzuta

Tel. [redacted] e-mail [redacted]

Address 85 Oak Knoll Drive

Contractor: Carl's Fencing (street) (municipality) Tel. (732) 505 1749 (zip code)

Address 1579 Rt 9 T.R. e-mail www.bycarls.com

Contractor License No. or Builder Registration No. 13VH04391000 Exp. Date 3/31/18

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

Federal Emp. ID No. 208 919 157 FAX: (732) 505 1552

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[✓] Exterior	4.20.17	JSP
[ ] Interior		

Joint Plan Review Required:

[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT

Date: 04/20/17

Approved by: KEK

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [✓] CA

Date: 05/05/17

Approved by: MPH

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			5.5.17	JSP
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group 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.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:

State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $ _____
2. Rehabilitation $ _____
3. Total (1+ 2) $ 7,000.

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

C. CERTIFICATION IN LIEU OF OATH

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

Sign here: George J Pizzuta

Print name here. George J Pizzuta Jr

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Install 6' high Wood Privacy fence

POOL-BARRIER COMPLIANT

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$ _____

Administrative Surcharge $ _____

Minimum Fee $ _____

State Permit Surcharge Fee $ _____

TOTAL FEE $ _____

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

CONSTRUCTION PERMIT

Date Issued 5/1/17
Control # C-17-001447
Permit # 17-1387

IDENTIFICATION Block: 1033.05 Lot: 32 Qualifier
Work Site Location: 85 OAK KNOLL DR. Brick Township, NJ
Owner in Fee: PIZZUTA, GEORGE J. & NANCY A.
85 OAK KNOLL DR. BRICK NJ 08724
Telephone: [redacted]

Contractor: CARL'S FENCING AND DECKING
Address: 1579 ROUTE 9 TOMS RIVER NJ 08755
Telephone: (732) 505-1749
Lic. No. or Bldrs Reg. No: 13VH04391000 13VH04391000
Federal Employee. No.: 20-8919137

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
FENCE ...POOL-BARRIER COMPLIANT

PAYMENTS (Office Use Only)

Building	$350
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$13
CO Fee	
Other	$0
Total	$363
Check No	1191
Cash	$0
Credit	$0
Collected By	M. Fuga

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $7,000

Construction Official

Date 4/27/17

UCC F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N J.A.C. 5.23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

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

- [x] 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:

- [x] 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".

- [x] 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 5/1/17
Control #
Date Issued
Permit # 17-1355

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

Block 1033.05 Lot 32 Qualification Code

Work Site Location 85 Oak Knoll Drive

Owner in Fee. George J + Nancy Pizzuta

Tel [redacted] e-mail [redacted]

Address 85 Oak Knoll Drive

Contractor: Carl's Fencing (street / municipality) Tel. (732) 505 1749 (zip code)

Address 1579 Rt 9 TR. e-mail www.bycarls.com

Contractor License No. or Builder Registration No. 13VH04391000 Exp. Date 3/31/18

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

Federal Emp. ID No. 208 919 157 FAX: (732) 505 1552

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[✓] Exterior	4/20/17	SDP
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 04/20/17
Approved by: KEK

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

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
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 ____ 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.
Max. Live Load ____
Max. Occupancy Load ____

Constr. Class Present ____ Proposed ____
If Industrialized Building.
State Approved ____ HUD ____

Est. Cost of Bldg. Work:
1. New Bldg. $ ____
2. Rehabilitation $ ____
3. Total (1+ 2) $ 7,000.

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.
Sign here: George J Pizzuta Jr
Print name here. George J Pizzuta Jr

. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Install 6' high Wood Privacy fence

POOL-BARRIER COMPLIANT

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

FEE (Office Use Only)
$ ____

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

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

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 5/1/17
Control #
Date Issued
Permit # 17-1255

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

Block 11.03 Lot 2 Qualification Code

Work Site Location 35 Oak Knoll Drive

Owner in Fee: Teresa T. Wood Trustee

Tel. [redacted] e-mail [redacted]

Address 35 Oak Knoll Drive
street municipality zip code

Contractor: Cali's Fencing Tel. (732) 505-1117

Address 1577 Rt 9 TR e-mail [illegible]

Contractor License No. or Builder Registration No. 13VH04541000 Exp. Date 3/31/18

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

Federal Emp. ID No. [illegible] FAX: (732) 505-1552

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 5/12/17
Approved by: RCK

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
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				

B. BUILDING CHARACTERISTICS

Use Group 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.
Max. Live Load
Max. Occupancy Load

Constr. Class Present Proposed
If Industrialized Building:
State Approved HUD

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

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.

Sign here. [signature]

Print name here: George Fencing LLC

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Install 6 high white privacy fence

POOL-BARRIER COMPLIANT

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

FEE (Office Use Only)
$

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

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

UCC F110
(rev 11/09)

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1336

Date Issued: 5/1/17
Application Number: ZA-17-00443
Application Date: 04/10/2017
Project Number:
Permit Number: 28-17-00537
Fee: $50.00

Zoning Permit

Worksite **85 OAK KNOLL DR.**
Location: **Brick Township, NJ 08724**

Block: **1033.05**
Lot: **32**
Qualifier:
Zone: **R-10**

Owner: **PIZZUTA, GEORGE J. & NANCY A.**
Address: **85 OAK KNOLL DR.**
BRICK, NJ 08724

Applicant: **PIZZUTA, GEORGE J. & NANCY A.**
Address: **85 OAK KNOLL DR.**
BRICK, NJ 08724

Application Approved Date: 04/11/2017

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

Use is: Single-Family Residential
Nonconforming Use is:

Work Description:
Fence - Replace existing 6' wood fence.

The 6' stockade fence must be setback at least 30' from the front property line, 15' from the second frontage on Aldgate Dr., and can be placed on the side and rear property line.

Additional Zoning Permit is required for additional work.

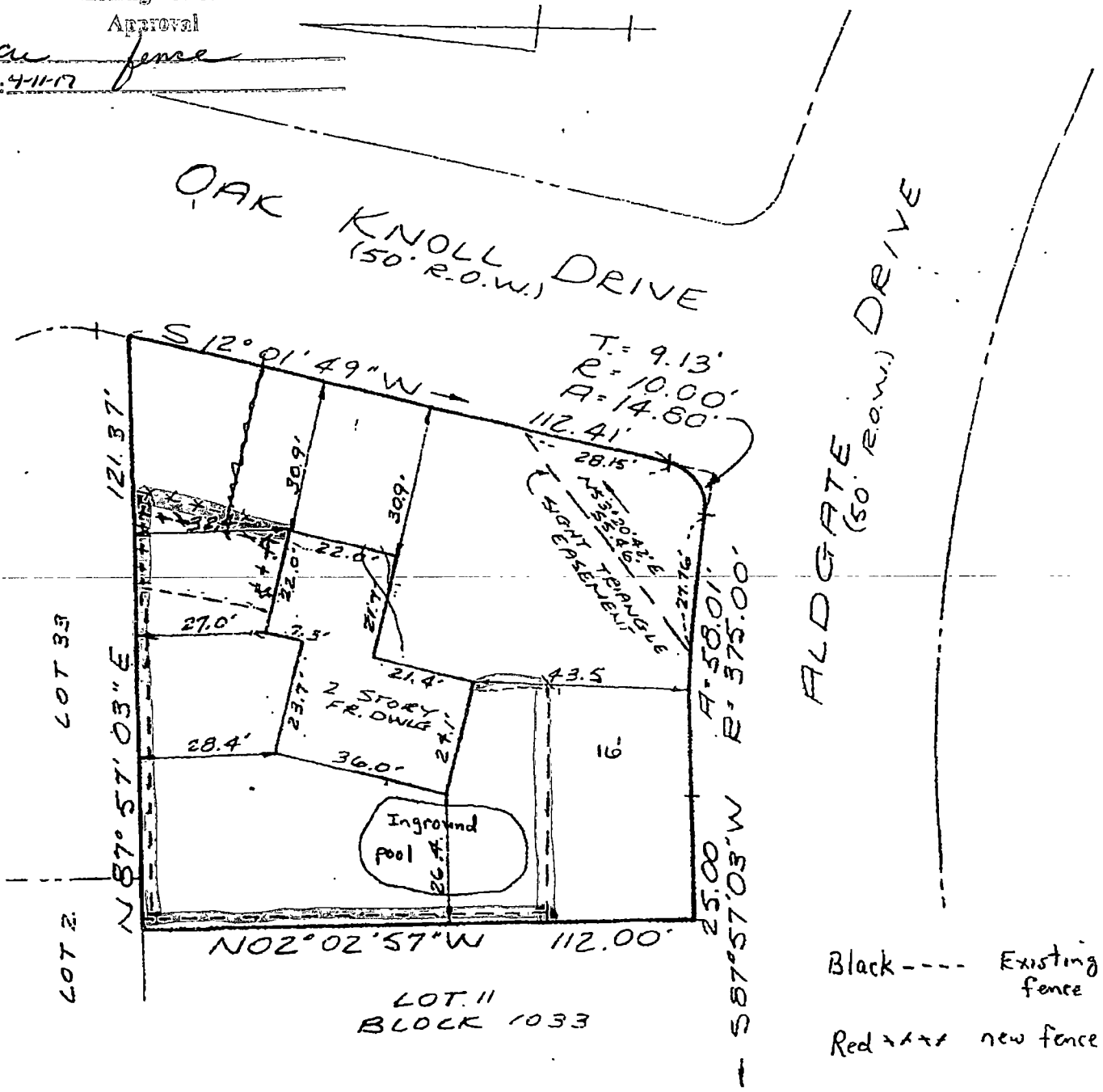
Upon review it was determined that the Zoning Permit:

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

Christopher J. Romano, Assistant Zoning Officer — 04/11/2017 Date

Michael P. Fowler, Twp. Planner — 4/14/17 **Date**

Zoning Review
Approval
By: CW fence
Date: 4-11-17



March 28, 1986, Certified to George J. Pizzuta and Nancy A. Pizzuta, Eric [illegible] Anchor Mortgage Services, Inc. its successors and/or assigns and all parties in interest.

GEORGE C. LISSENDEN, JR., P.E. & L.S.
LICENSE #12946, TOMS RIVER, N.J.

LOCATION SURVEY

LOT 32 BLOCK 1033.5

AS SHOWN ON MAP OF

BAY BRIDGE VILLAGE

SECTION 4

BRICK TOWNSHIP, OCEAN COUNTY, NEW JERSEY

COUNTY FILE No. M-1613 FILED: 12-24-1985

SCALE: 1" = 30' DATE: MARCH 28, 1986 LPK

RECEIVING CLERK CW
DATE REC'D 4/6/17

ZONING PERMIT APPLICATION

PERMIT # ZP-17-00537
DATE ISSUED

BLOCK: 10330.05 LOT: 32 QUALIFIER: — SITE ADDRESS: 85 Oak Knoll Drive Brick

IDENTIFICATION:

1. NAME OF OWNER IN FEE: George J. + Nancy Pizzuta
   COMPLETE ADDRESS: 85 Oak Knoll Drive, Brick
   PHONE # [redacted] EMAIL: [redacted]
2. NAME OF APPLICANT: George J Pizzuta
   APPLICANT ADDRESS: 85 Oak Knoll Drive Brick
   PHONE [redacted] EMAI [redacted]
3. RESPONSIBLE PERSON FOR WORK: Carl's Fencing
   PHONE# 732 505 1749 FAX# 732 505 1552
4. SIGNATURE OF APPLICANT: George J Pizzuta

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 50-
OTHER: $
TOTAL: $ 50-

REQUIRED BY APPLICANT

RESIDENTIAL: X
COMMERCIAL:
EXISTING USE: SFD
PROPOSED USE: SFD

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

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

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

POOL: ABOVE GROUND IN GROUND FENCE: HEIGHT 6' (SIX) TYPE ~~W~~ SOLID (1x4) MATERIAL Wood

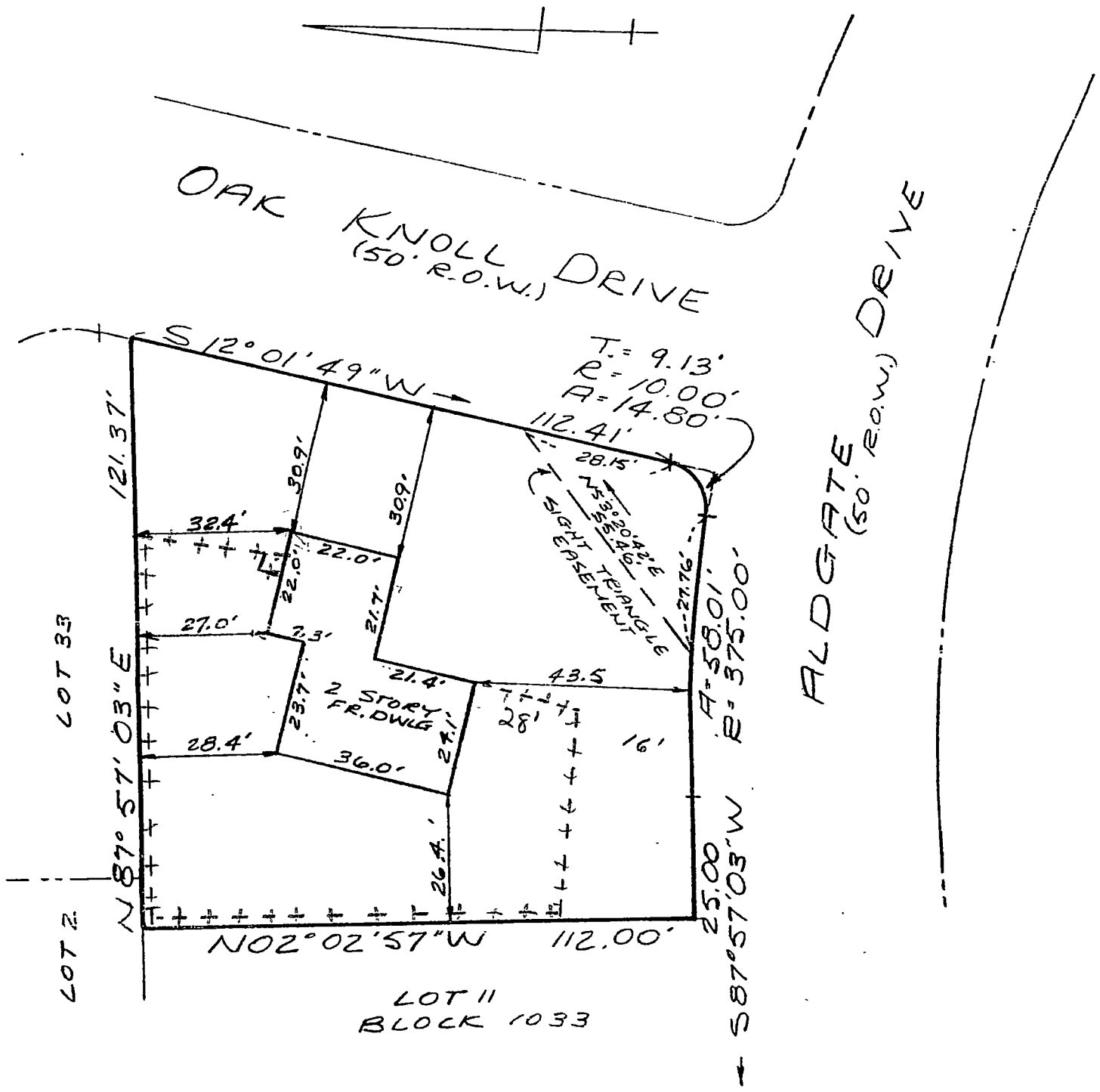
HEIGHT: (*IF APPLICABLE)

OTHER Replacing existing 6' (SIX) wood fence

DESCRIPTION:

ZONING REVIEW:
DATE REVIEWED: 4-11-17 DATE DENIED: DATE APPROVED: 4-11-17 INTLS:

(SEE BACK PAGE)



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GEORGE C. LISSENDEN, JR., P.E. & L.S.
LICENSE #12946, TOMS RIVER, N.J.

LOCATION SURVEY

LOT 32 **BLOCK** 1033-5

AS SHOWN ON MAP OF

BAY BRIDGE VILLAGE

SECTION 4

BRICK TOWNSHIP, OCEAN COUNTY, NEW JERSEY

COUNTY FILE No. H-1613 FILED: 12-24-1985

SCALE: 1" = 30' | DATE: MARCH 28, 1986 | LPK. JJM

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PROPOSAL / CONTRACT

Date Ordered:

Date Received:

Job Ready:

Installer Name:

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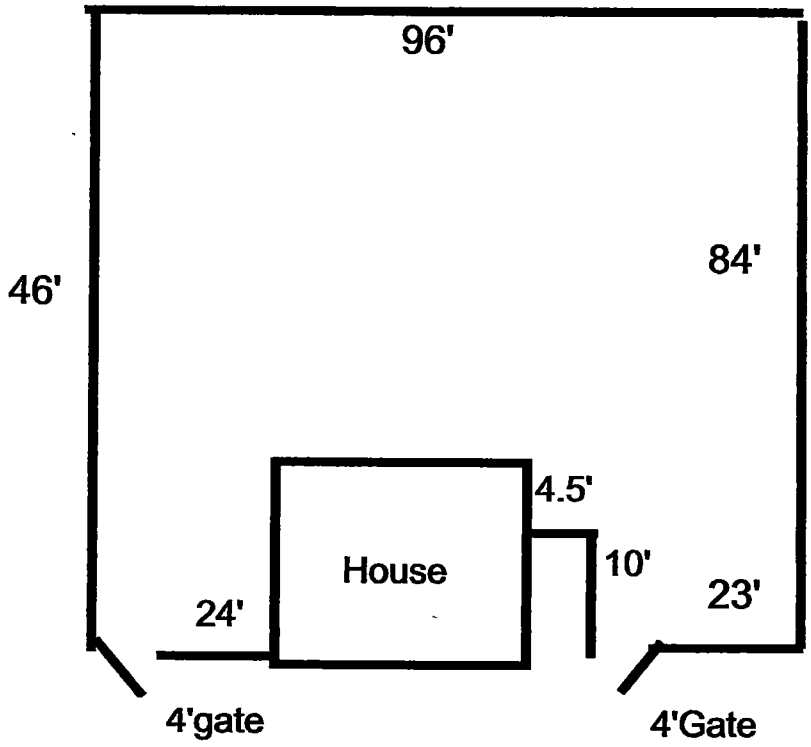

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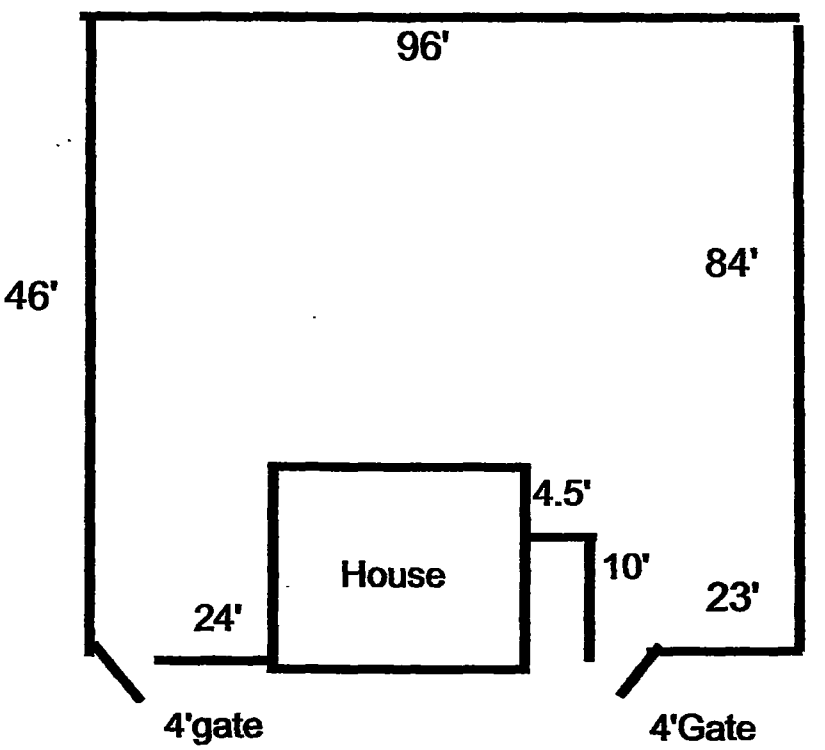


ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 10330.5 LOT: 32 ADDRESS: 85 Oak Knoll Drive Brick

IDENTIFICATION:

1. WORK SITE ADDRESS: 85 Oak Knoll Drive
2. NAME OF OWNER IN FEE: George J Pizzuta

   ADDRESS: 85 Oak Knoll Drive PHONE #: [redacted]

   _____ FAX #: (__) _____
3. PRINCIPAL CONTRACTOR: Carl's Fencing

   ADDRESS: 1579 Rt. 9 PHONE #: (732) 505 1749

   Toms River FAX #: (732) 505 1552
4. ARCHITECT OR ENGINEER: _____

   ADDRESS: _____ PHONE: # (__) _____
5. RESPONSIBLE PERSON FOR WORK: Mike McDonough

   ADDRESS: 1579 Rt. 9 Toms River, NJ 08755

PHONE #: (732) 505 1749 FAX #: (732) 505 1552 E-MAIL: info@bycarls.com

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☑ OTHER Replacing existing 68' wood fence

LENGTH: _____ WIDTH: 8' HEIGHT: 6'

FEE SUMMARY:

APPLICATION FEE: $ _____

REVIEW FEE: $ _____

INSPECTION FEE: $ _____

OTHER _____: $ _____

BOND(S): $ _____

TOTAL: $ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

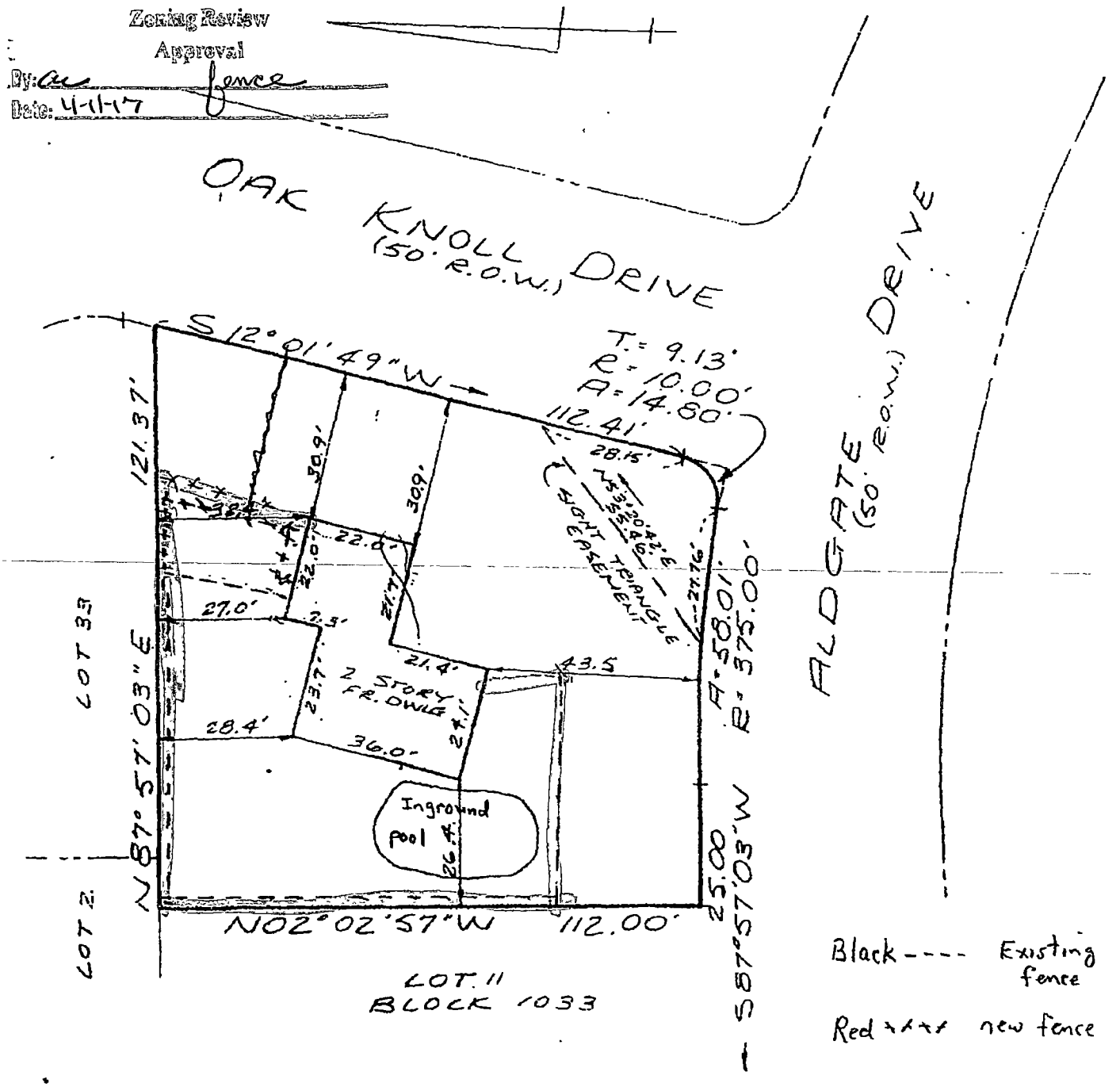
APPLICATION NUMBER: _____

APPROVED DATE: _____

ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE REJECTED: _____ DATE APPROVED: _____ INITIALS: _____

Zoning Review
Approval
By: fence
Date: 4-11-17

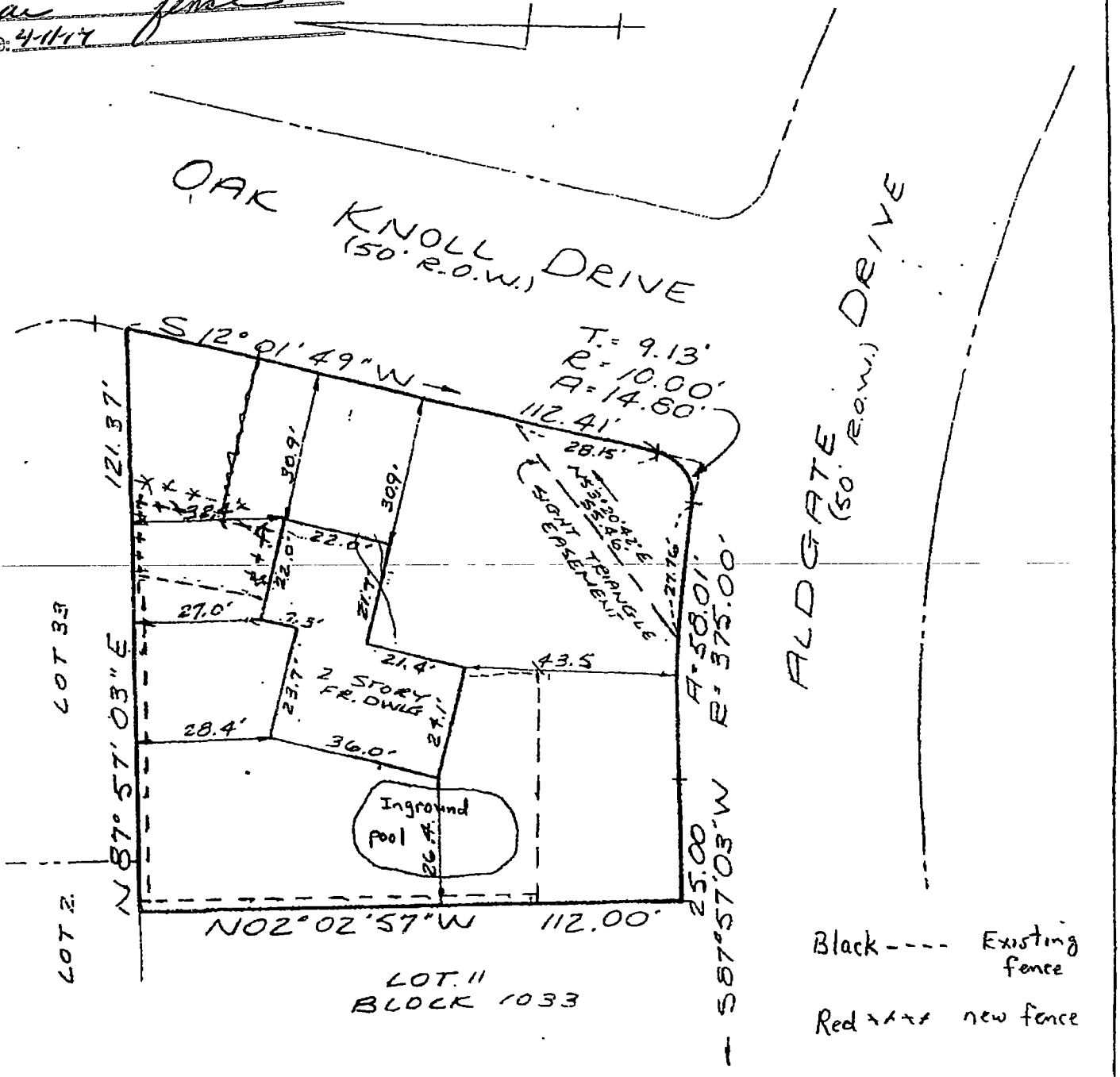


March 28, 1986, Certified to George J. Pizzuta and Nancy A. Pizzuta, Eric [illegible] Anchor Mortgage Services, Inc. its successors and/or assigns and all parties in interest.

GEORGE C. LISSENDEN, JR., P.E. & L.S.
LICENSE #12946, TOMS RIVER, N.J.

LOCATION SURVEY
LOT 32 BLOCK 1033-5
AS SHOWN ON MAP OF
BAY BRIDGE VILLAGE
SECTION 4
BRICK TOWNSHIP, OCEAN COUNTY, NEW JERSEY
COUNTY FILE No. M-1613 FILED: 12-24-1985
SCALE: 1" = 30' DATE: MARCH 28, 1986 LCK. 1101

Zoning Review
Approval
By: [illegible]
Date: 4-11-87



Black ---- Existing fence

Red xxxx new fence

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GEORGE C. LISSENDEN, JR., P.E. & L.S.
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LOCATION SURVEY

LOT 32 BLOCK 1033.5

AS SHOWN ON MAP OF

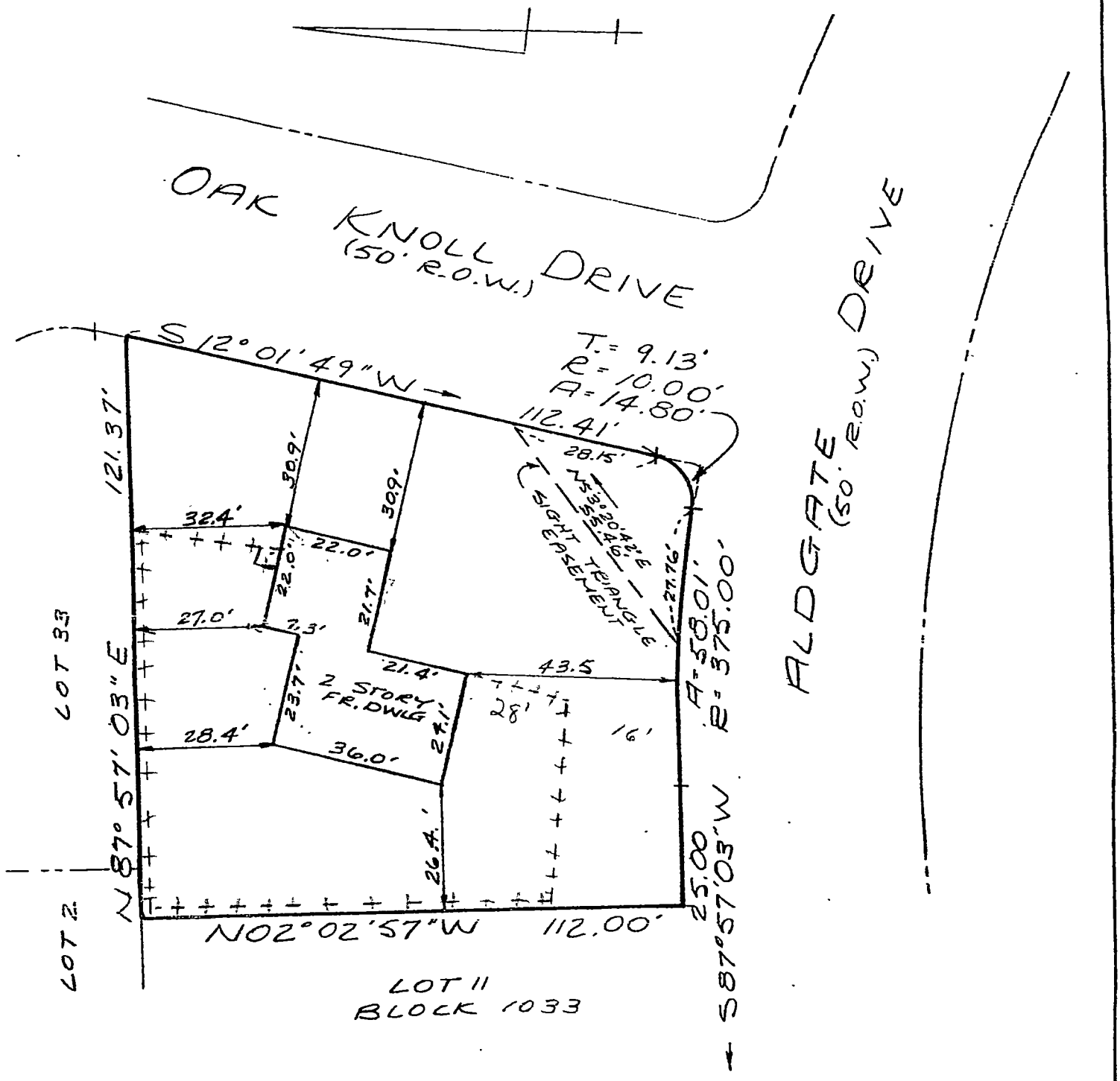
BAY BRIDGE VILLAGE

SECTION 4

BRICK TOWNSHIP, OCEAN COUNTY, NEW JERSEY

COUNTY FILE No. H-1613 FILED: 12-24-1985

SCALE: 1" = 30' DATE: MARCH 28, 1986 LPK



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LICENSE #12946, TOMS RIVER, N.J.

LOCATION SURVEY

LOT 32 BLOCK 1033-5

AS SHOWN ON MAP OF

BAY BRIDGE VILLAGE

SECTION 4

BRICK TOWNSHIP, OCEAN COUNTY, NEW JERSEY

COUNTY FILE No. H-1613 FILED: 12-24-1985

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PROPOSAL / CONTRACT

Date Ordered:

Date Received:

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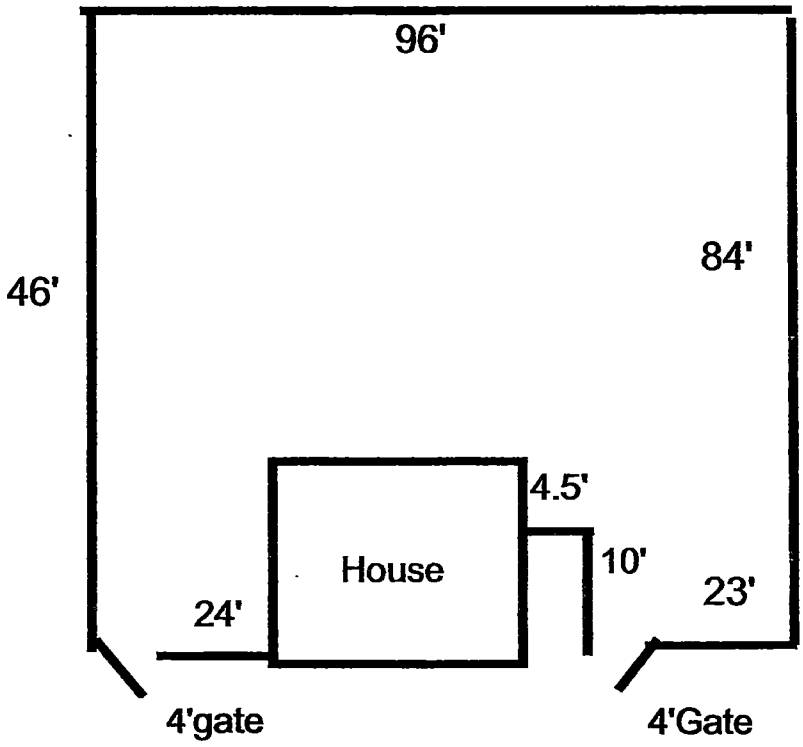

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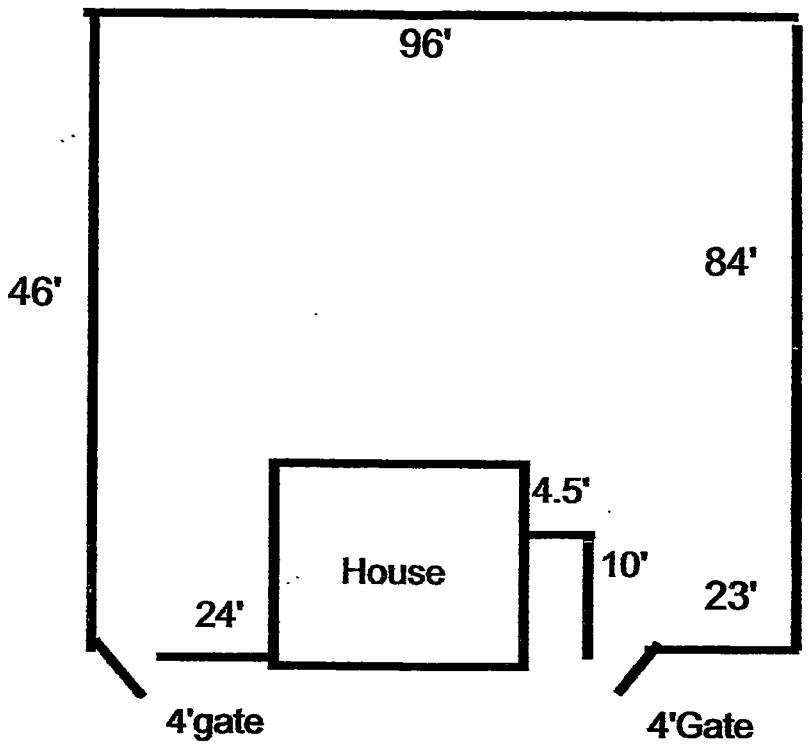

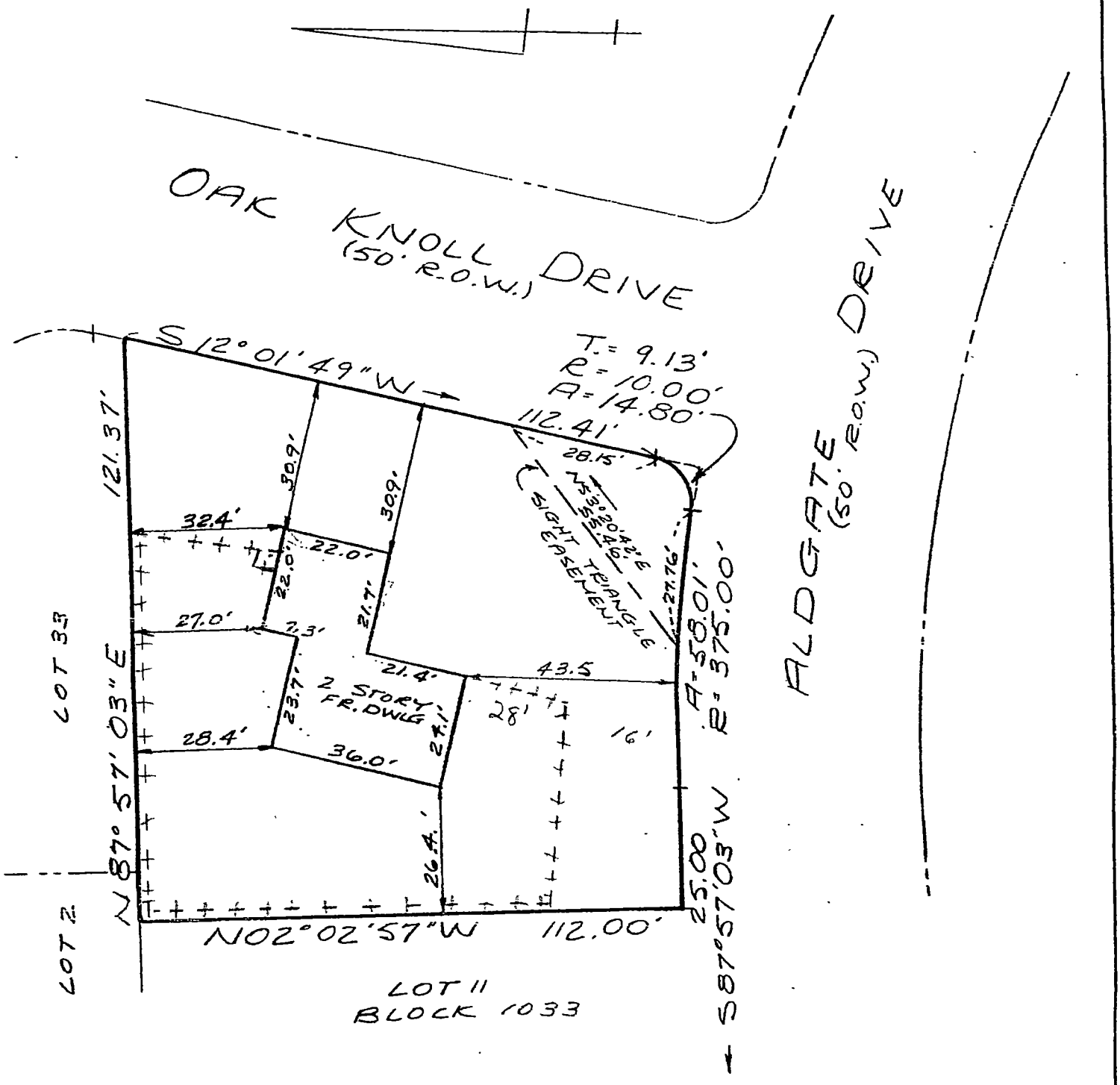

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LICENSE #12946, TOMS RIVER, N.J.

LOCATION SURVEY

LOT 32 **BLOCK** 1033-5

AS SHOWN ON MAP OF

BAY BRIDGE VILLAGE

SECTION 4

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CARL'S
Surrounded By The Best
FENCING - DECKING
HOME IMPROVEMENTS

Date Ordered:

Date Received:

Job Ready:

Installer Name:

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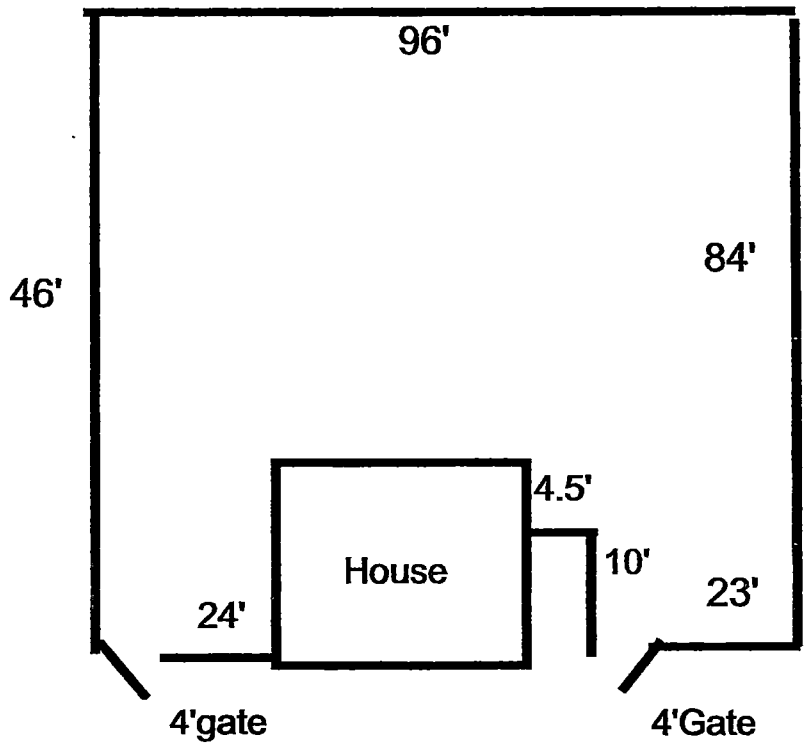

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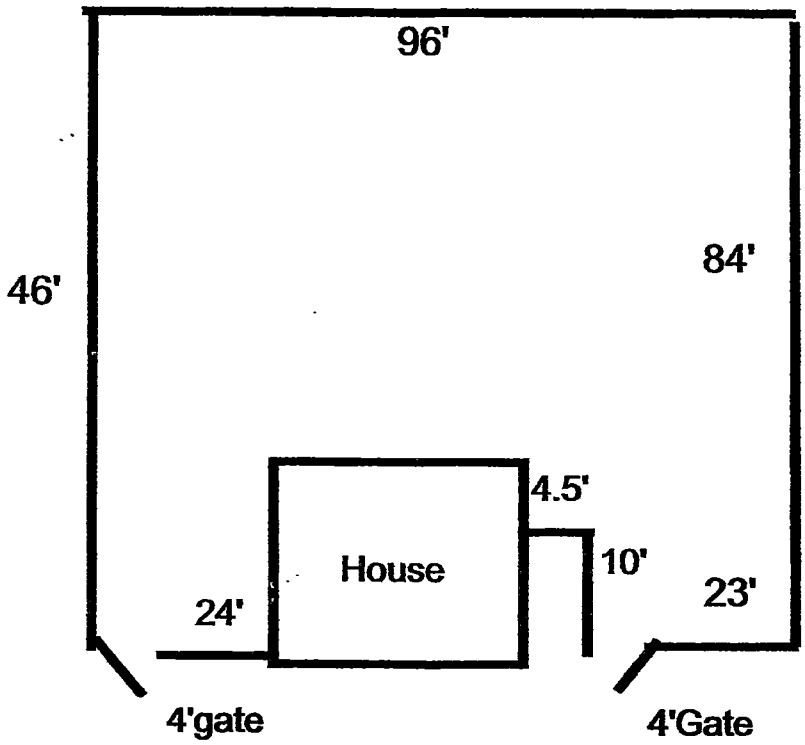


HOMEOWNER'S POOL CERTIFICATION

FENCE REQUIRMENTS:

Outdoor private swimming pool: An outdoor private swimming pool, includes an in-ground, above-ground or on-ground pool, hot tub or spa shall comply with the following.

1. The top of the barrier shall be at least 48 inches above finished ground level measured on the side of the barrier which faces away from the swimming pool. The maximum vertical clearance between finished ground level and the barrier shall be 2 inches measured on the side of the barrier which faces away from the swimming pool. Where the top of the pool structure is above finished ground level, such as an above-ground pool, the barrier shall be at finished ground level, such as the pool structure, or shall be mounted on top of the pool structure. Where the barrier is mounted on the pool structure, the opening between the top surface of the pool frame and the bottom of the barrier shall not allow passage of a 4 inch diameter sphere.

2. Openings in the barrier shall not allow passage of a 4 inch diameter sphere.

3. Solid barriers shall not contain indentations or protrusions except for normal construction tolerances and tooled masonry joints.

4. Where the barrier is composed of horizontal and vertical members and the distance between the tops of the horizontal members is less than 45 inches, the horizontal members shall be located on the swimming pool side of the fence. Spacing between vertical members shall not exceed 1 ¾ inches in width. Decorative cutouts shall not exceed 1 ¾ inches in width.

5. Where the barrier is composed of horizontal and vertical members and the distance between the tops of the horizontal members is 45 inches or more, spacing between vertical members shall not exceed 4 inches. Decorative cutouts shall not exceed 1 ¾ inches in width.

6. Maximum mesh size for chain link fences shall be a 2 ¼ inch square unless the fence is provided with slats fastened at the top or the bottom which reduce the openings to not more than 1 ¾ inches.

7. Where the barrier is composed of diagonal members, such as a lattice fence, the maximum opening formed by the diagonal members shall be not more than 1 ¾ inches.

8. Access gates shall comply with the requirements of items 1 through 7, and shall be equipped to accommodate a locking device. Pedestrian access gates shall open outwards away from the pool and shall be self-closing and have a self-latching device. Gates other than pedestrian access gates shall have a self-latching device. Where the release mechanism of the self-latching device is located less than 54 inches from the bottom of the gate: (a) the release mechanism shall be located on the pool side of the gate at least 3 inches below the top of the gate and; (b) the gate and barrier shall not have an opening greater than ½ inch within 18 inches of the release mechanism.

BLOCK: 1033-5 **LOT:** 32 **ADDRESS:** 85 Oak Knoll Drive

In accordance with the NJAC 5:23-2.23, no pool shall be used in whole or in part until a Certificate of Approval has been issued by the Construction Official.

I certify that I am the owner of the above referenced pool being built. I further certify that the pool will not be used in whole or in part until a permanent fence is installed and a Certificate of Approval has been issued by the Construction Official.

I have read the fence requirements listed above and understand them.

George J Pizzuta Jr

Owner's Signature

George J Pizzuta Jr

Print Name

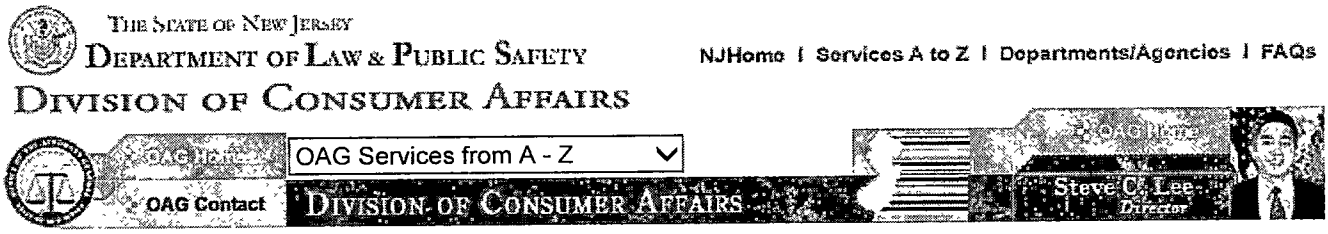
Sworn and subscribed to before me on this 6 **day of** April **20**17

Betty Baptista

Notary Signature

Barrier Exceptions: Spas or hot tubs with a safety cover which complies with ASTM F 1346, as listed in Section AG107, shall be exempt from the provisions of this appendix.

BETTY L. BAPTISTA
NOTARY PUBLIC OF NEW JERSEY
ID # 2445532
My Commission Expires 4/23/2019



License Information

Accurate as of April 06, 2017 9:34 AM

Return to Search Results

Name:	PIZZO CONTRACTING INCT/A CARL'S FENCING DECKING & EXTERIORS	**Doing Business As:**	Pizzo Contracting Inc/Carl's Commercial Fencing
Owner Name:	William Rankin		
Address:	1579 Rt 9, Toms River, NJ 08755		
Profession:	Home Improvement Contractors		
License Type:	Home Improvement Contractor		
License No:	13VH04391000		
License Status:	Active	**Status Change Reason:**	License Issuance
Issue Date:	4/1/2008	**Expiration Date:**	3/31/2018

For Contractors needing information regarding registration contact the New Jersey Home Improvement Contractors registration section (973) 424-8150 prompt #2. For consumers requiring information concerning Contractor complaints contact the New Jersey Home Improvement Contractors complaints section (973) 424-8150 prompt #6.

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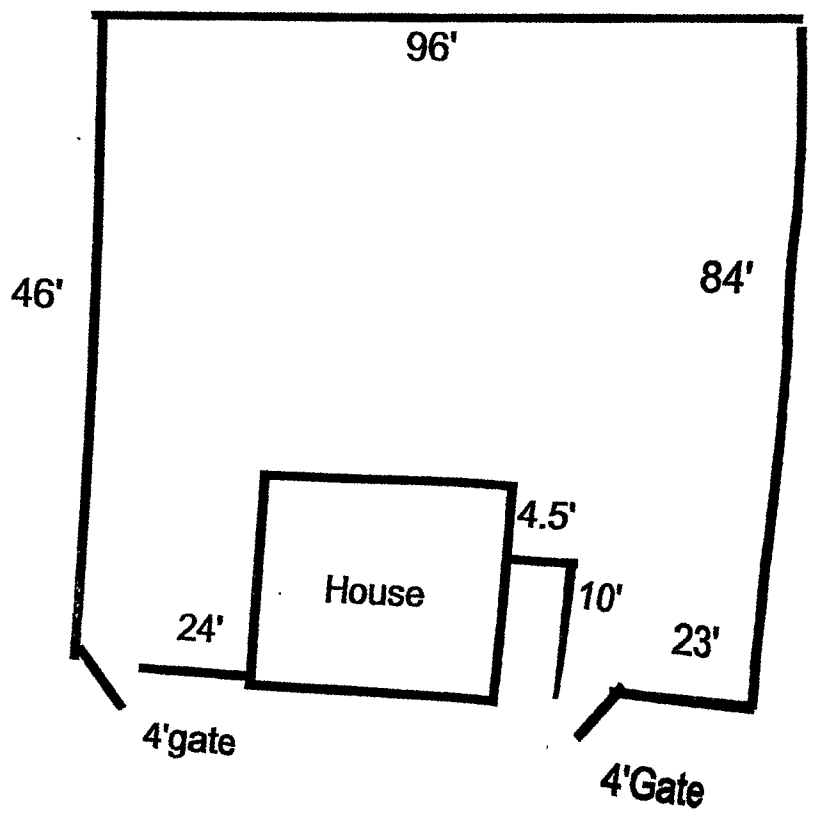

TOWNSHIP OF BRICK
RELEASED FOR PERMIT INIT DATE
Building Subcode
Plumbing Subcode
Fire Subcode
Electrical Subcode
Plan Reviewer JCF 4.20.
Plans Released
Construction Official