



**Township Archives**  
**Township of Brick, NJ**  
**401 Chambers Bridge Rd, Brick, NJ 08723**

***This File Contains Personal Identifiable  
Information of Private Citizen(s).***

Certain information contained in this file is ***Exempt from Release*** under the Open Public Records Act (OPRA) (Public Law 2001, CHAPTER 404 (N.J.S.A. 47:1A-1 et seq.)) and Executive Orders issued by the Governor of New Jersey. The following information ***MUST*** be redacted prior to release:

- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson", is written over a horizontal line.

Bryan J. Dickerson, CA, CMR  
Township Archivist

Issued: 8 January 2020





# CONSTRUCTION PERMIT APPLICATION

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

**I. IDENTIFICATION**

1. Proposed Work Site at: 1684 West Princeton Avenue

2. Name of Owner in Fee: Turtie Caravella

Tel. [REDACTED] e-mail [REDACTED]

Address 1684 W Princeton Ave Brick Township NJ 08724

3. Ownership in Fee: Public \_\_\_\_\_ Private \_\_\_\_\_

4. Principal Contractor: Pizzo Contracting Tel. (732) 505-1749

Address 1579 Route 9 e-mail Bob.bx@pizzofencing.com

Toms River NJ 08755

License No. OR, if new home, Builder Reg. No. 13VH04391000 Exp. Date 3/31/21

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

Federal Emp. ID No. 20-8919157 FAX: ( )

5. Architect or Engineer \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ e-mail \_\_\_\_\_

Tel. ( ) FAX: ( )

6. Responsible Person in Charge once Work has Begun Pizzo Contracting

Tel. (732) 505-1749 FAX: (732) 505-1552

| V. FEE SUMMARY (for office use only) |               | Update | Update |
|--------------------------------------|---------------|--------|--------|
| 1. Building                          | \$ <u>475</u> |        |        |
| 2. Electrical                        |               |        |        |
| 3. Plumbing                          |               |        |        |
| 4. Fire Protection                   |               |        |        |
| 5. Elevator Devices                  |               |        |        |
| 6. Subtotal                          |               |        |        |
| 7. Less 20% for State Plan Review    | \$ <u>18</u>  |        |        |
| 8. Subtotal                          | \$ <u>45</u>  |        |        |
| 9. State Permit Surcharge Fee        | \$ <u>2</u>   |        |        |
| 10. Subtotal                         |               |        |        |
| 11. Cert. of Occupancy               |               |        |        |
| 12. Other                            | \$ <u>568</u> |        |        |
| 13. TOTAL                            |               |        |        |

**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 ☒ New Building ☐ Addition ☐ Demolition

☐ Repair ☐ Alteration ☐ Renovation ☐ Reconstruction

☐ Asbestos Abat. -Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit

**IIb. SUBCODES** (Check all that apply)

☒ Building ☐ Electrical ☐ Plumbing ☐ Fire Protection ☐ Elevator

| FOR OFFICE USE ONLY (Optional) |                |                |                |                |            |                             |           |           |
|--------------------------------|----------------|----------------|----------------|----------------|------------|-----------------------------|-----------|-----------|
| Est. Cost                      | Plans Rec'd by | Date Rec'd     | Rejection Date | Approval Date  | Re-viewer  | Resubmission Dates Approval | Rejection | Re-viewer |
|                                | <u>CW</u>      | <u>8/23/20</u> |                | <u>7-21-20</u> | <u>JB</u>  |                             |           |           |
|                                | <u>ENG</u>     | <u>9/14/20</u> |                | <u>9/15/20</u> | <u>KJS</u> |                             |           |           |
| TOTAL COST <u>9500</u> EXEMPT  |                |                |                |                |            |                             |           |           |

**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

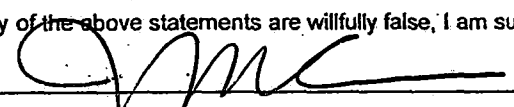
I further certify that I will perform the following work:

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 8/26/2020

**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.

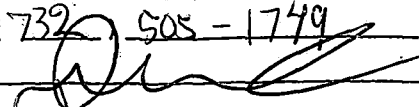
I understand that if any of the above statements are willfully false, I am subject to punishment.

☐ Check if contractor.

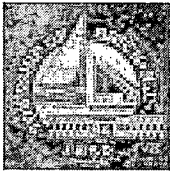
Agent Name Pizzo Contracting

Address 1579 Route 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.**



Brick Township  
401 Chambersbridge Rd  
Brick, NJ 08723

Date Issued 11/02/2020  
Control Number C-20-002829  
Permit Number 20-2283  
Permit Issue Date 09/28/2020  
Certificate Number 20-2283

**Certificate**  
Construction Code Division  
(Certificate of Approval)

**Identification**

Work Site Location: 1684 W. PRINCETON AVE. Brick Township, NJ Block: 835 Lot: 1 Qual: \_\_\_\_\_  
Owner in Fee: CARAVELLA, DAVID & RODRIGUES, J  
Owner Address: 1684 WEST PRINCETON AVE BRICK NJ 08724  
Telephone: [REDACTED]  
Contractor PIZZO CONTRACTING INC.  
Address 1579 ROUTE 9 TOMS RIVER NJ 08755  
Telephone: (732) 505-1749 Fax: (732) 505-1552 Federal Emp. Number: 20-8919157  
License Number or Builders Registration Number: \_\_\_\_\_

Home Warranty Number: \_\_\_\_\_ Type of Warranty Plan: ☐ State ☐ Private  
Use Group: R-5 Construction Classification: \_\_\_\_\_  
Maximum Live Load: 0 Maximum Occupancy Load: 0  
Description of Work/Use: DECK

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:**

*David Newman Jr*

Construction Official

Date Printed: 11/02/2020

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

Fee: \$0.00

Check Number: \_\_\_\_\_

Collected By: \_\_\_\_\_

James M. Clark



Date Issued  
Permit #

9/28/20  
20-2283

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

Block 835 Lot 1 Qualification Code \_\_\_\_\_  
Work Site Location 1684 West Princeton Avenue

Owner In Fee: Jackie Caravella

Tel. \_\_\_\_\_ e-mail \_\_\_\_\_

Address 1684 west princenton Brick township NJ 08724

Contractor: Pizzo Contracting Tel. (732) 525 1749/361

Address 1519 Route 9 Toms River 08755 e-mail rob-by-lar15@comcast.net

Contractor License No. or Builder Registration No. \_\_\_\_\_ Exp. Date 3/31/20

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH04391000

Federal Emp. ID No. 20,8919157 FAX: ( )

**JOB SUMMARY (Office Use Only)**

| PLAN REVIEW                                |          |          | INSPCTIONS           |         | Dates (Month/Day) |          |         |  |
|--------------------------------------------|----------|----------|----------------------|---------|-------------------|----------|---------|--|
|                                            | Date     | Initial  | Type:                | Failure | Failure           | Approval | Initial |  |
| [ ] No Plans Required                      |          |          | Footng. (5) Piers    |         |                   | 10/13/20 | KEK     |  |
| [ ] All                                    | 7-7-20   | KEK      | Footng Bondng        |         |                   |          |         |  |
| [ ] Footng                                 |          |          | Foundation           |         |                   |          |         |  |
| [ ] Foundation                             |          |          | Slab                 |         |                   |          |         |  |
| [ ] Frame                                  |          |          | Frame - Open Deck    |         |                   | 10/15/20 | KEK     |  |
| [ ] Other                                  |          |          | Truss Sys./Bracing   |         |                   |          |         |  |
| Subcode                                    | App'l    | 09/22/20 | Barrier-Free         |         |                   |          |         |  |
| Joint Plan Review Required:                |          |          | Insulation           |         |                   |          |         |  |
| [ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator |          |          | Finishes -Base Layer |         |                   |          |         |  |
| SUBCODE APPROVAL                           |          |          | Finishes -Final      |         |                   |          |         |  |
| [ ] CO [ ] CCO                             |          | CA       | Energy               |         |                   |          |         |  |
| Date:                                      | 10/26/20 |          | Mechanical           |         |                   |          |         |  |
| Approved by:                               |          | KEK      | TCO                  |         |                   |          |         |  |
|                                            |          |          | Other                |         |                   |          |         |  |
|                                            |          |          | Final                |         |                   | 10/26/20 | KEK     |  |
|                                            |          |          | Barrier-Free         |         |                   |          |         |  |

## 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.

Land Area Disturbed \_\_\_\_\_ Sq. Ft.

**Est. Cost of Bldg. Work:**

1. New Bldg. \$ \_\_\_\_\_

2. Rehabilitation \$ \_\_\_\_\_

3. Total (1+2) \$ 9500

U.C.C. F110  
(rev. 01/08)

1 White = Inspector Copy  
3 Pink = Office Copy

2 Canary = Office Copy  
4 Gold = Applicant Copy

### 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 Wm. W. W.

#### D. TECHNICAL SITE DATA

### DESCRIPTION OF WORK

Constructing a new 392 Sq ft Deck

**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 \$ \_\_\_\_\_







# CONSTRUCTION PERMIT

Date Issued  
Control #  
Permit #

9/28/20  
C-20-002829

20-2283

IDENTIFICATION Block: 835 Lot: 1 Qualifier  
Work Site Location: 1684 W. PRINCETON AVE. Brick Township, NJ Contractor: PIZZO CONTRACTING INC.  
Owner in Fee: CARAVELLA, DAVID & RODRIGUES, J. Address: 1579 ROUTE 9 TOMS RIVER NJ 08755  
1684 WEST PRINCETON AVE. BRICK NJ 08724 Telephone: (732) 505-1749 / (732) 740-9809  
Telephone: [REDACTED] Lic. No. or Bldrs. Reg. No. 13VH04391000  
Federal Employee No. 20-8919157

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

DECK

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 \$9,500

Construction Official

Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

| PAYMENTS (Office Use Only) |        |
|----------------------------|--------|
| Building                   | \$475  |
| Electrical                 | \$0    |
| Plumbing                   | \$0    |
| Fire Protection            | \$0    |
| Elevator Devices           | \$0    |
| Other                      | \$0.00 |
| DCA Training Fee           | \$18   |
| CO Fee                     |        |
| Other                      | \$0    |
| Total                      | \$493  |
| Check No.                  | 24279  |
| Cash                       | \$0    |
| Credit                     | \$0    |
| Collected By               |        |

BUILDING \$475.00  
DCA 4 GOLD - APPLICANT \$18.00  
TOTAL \$493.00  
CHECK \$493.00

## 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:

- 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.
- Foundations and all walls up to grade level prior to back filling.
- 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.
- 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.

# ENGINEERING PERMIT APPLICATION

RECEIVING CLERK \_\_\_\_\_

PERMIT # \_\_\_\_\_

BLOCK 835LOT 1

ADDRESS \_\_\_\_\_

**IDENTIFICATION:**1. WORK SITE ADDRESS 1684 West Princenton Avenue2. APPLICANT Pizzo Contracting3. NAME OF OWNER IN FEE Jackie CaravellaADDRESS 1684 West Princenton Avenue Brick Township NJ 08724

PHONE [REDACTED] EMAIL [REDACTED]

4. PRINCIPAL CONTRACTOR Pizzo ContractingADDRESS 1579 Route 9 Toms River NJ 08755PHONE 732-505-1744 EMAIL rob.bycarlsfencing@gmail.com

5. ARCHITECT OR ENGINEER \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

6. RESPONSIBLE PERSON FOR WORK Pizzo Contracting

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**FEE SUMMARY:**

APPLICATION FEE \$ \_\_\_\_\_

REVIEW FEE \$ N/A

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 \_\_\_\_\_

**PROJECT DESCRIPTION:**☐ GRADING/CLEARING ☐ ROAD OPENING ☐ SOIL REMOVAL / FILL☐ RETAINING WALL ☐ POOL ☐ BULKHEAD / DOCK ☐ DWELLING☐ TREE REMOVAL ☐ COMMERCIAL SITE MAINTENANCE☐ DESCRIPTION Constructing a new 392 Sq ft Deck**ENGINEERING REVIEW:**DATE RECEIVED 9/14/20

DATE REJECTED \_\_\_\_\_

DATE APPROVED 9/15/20 **EXEMPT**INITIALS KJ

RECEIVING CLERK CWDATE REC'D 9/28/20

## ZONING PERMIT APPLICATION

PERMIT # ZP-20-01105DATE ISSUED 9/28/20BLOCK: 835 LOT: 1 QUALIFIER: ✓ SITE ADDRESS: 1684 W. Princeton Ave.

## IDENTIFICATION:

1. NAME OF OWNER IN FEE: Jackie Caravella  
COMPLETE ADDRESS: 1684 W. Princeton Ave  
Brick Township NJ 08724  
PHONE # [REDACTED] EMAIL: [REDACTED]
2. NAME OF APPLICANT: Pizzo Contracting  
APPLICANT ADDRESS: 1579 Route 9, Toms River NJ 08755  
PHONE # 732-505-1749 EMAIL: rod.bypizzocontracting@gmail.com
3. RESPONSIBLE PERSON FOR WORK: Pizzo Contracting  
PHONE # 732-505-1749 FAX # 732-505-1552
4. SIGNATURE OF APPLICANT: [Signature]

## FOR OFFICE USE ONLY

## FEE SUMMARY:

APPLICATION FEE: \$ 75  
OTHER: \$ 0  
TOTAL: \$ 75

## REQUIRED BY APPLICANT

RESIDENTIAL: ✓  
COMMERCIAL: SD  
EXISTING USE: SD  
PROPOSED USE: SD

BOARD APPROVAL:      PB      ZB       
RESOLUTION#:       
APPROVAL DATE:     

## PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK &amp; DESCRIBE)

\*NEW BUILDING: Deck \*ADDITION      \*ALTERATION      \*PORCH      \*DECK ✓

POOL: ABOVE GROUND      IN GROUND      FENCE: HEIGHT      TYPE      MATERIAL     

HEIGHT:      (\*IF APPLICABLE)

OTHER     

DESCRIPTION: Constructing a new 392 sq ft Deck

## ZONING REVIEW:

DATE REVIEWED: 9-11-20 DATE DENIED:      DATE APPROVED: 9-11-20 INTLS: ce

(SEE BACK PAGE)

## **TOWNSHIP OF BRICK ZONING CHECKLIST**

### **1) Four(4) copies of 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
- 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.

### **2) Two copies of the plans with dimensions and heights noted:**

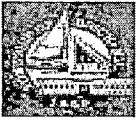
- Floor plans and elevations
- Signed site plans
- Property map
- Survey map

Choose which is applicable for submission

### **3) Plot plans and building plans must match for complete review**

**NOTE: NO PARTIAL, TAPED, FAXED, REDUCED OR ENLARGED COPIES CAN BE ACCEPTED**

**01/2010**



Brick Township  
401 Chambers Bridge Rd.  
Brick, NJ 08723  
(732) 262-1041

Date Issued:

Application Number: 9/28/20  
ZA-20-01103

Application Date: 9/3/2020

Project Number:

Permit Number: ZP-20-01105

Fee:

\$75.00

## Zoning Permit

Worksite **1684 W. PRINCETON AVE.**  
Location: **Brick Township, NJ 08724**

Owner: **CARAVELLA, DAVID & RODRIGUES, J**  
Address: **1684 WEST PRINCETON AVE**  
**BRICK, NJ 08724**

Applicant: **PIZZO CONTRACTING INC.**  
Address: **1579 ROUTE 9**  
**TOMS RIVER, NJ 08755**

Block: 835 Lot: 1 Qualifier: \_\_\_\_\_ Zone: R-7.5

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

Present Use: Single-Family Residential

☐ Non Conforming Use

☐ Non Conforming Structure

Proposed Use: Single-Family Residential

Work Description:

**Deck/Porch - Deck 392 sq. ft. Construction of a 392 sq. ft. deck.**

**The deck must be setback at least 25' from the front property line, 6'/15' combined from the side property line and 15' from the rear property line.**

**Additional Zoning Permit is required for additional work.**

Application Approved Date: 9/11/2020

Upon review it was determined that the Zoning Permit:

☒ Permitted by Ordinance

☐ Permitted by Variance approved on: \_\_\_\_\_

☐ Approved with Conditions

☐ Valid Nonconforming Use/Structure is established by

☐ Zoning Board of Adjustment

☐ Zoning Officer

Christopher J. Romano, Zoning Officer

9/11/2020

Date



NOT AN  
ELECTRICIAN'S  
OR PLUMBER'S  
LICENSE

State Of New Jersey  
New Jersey Office of the Attorney General  
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE  
Home Improvement Contractors

HAS REGISTERED

PIZZO CONTRACTING INC T/A CARL'S FENCING DECKI  
William Rankin  
1579 Rt 9  
Toms River NJ 08755

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

02/07/2020 TO 03/31/2021

VALID

  
Signature of Licensee/Registrant/Certificate Holder

13VH04391000

LICENSE/REGISTRATION/CERTIFICATION #

  
ACTING DIRECTOR

**CARAVELLA  
1684 WEST  
PRINCETON AVE  
BRICK TWP  
DECK PLANS**

DECK TO CONFORM W/  
2018 IRC-NJ  
LIVE LOAD 40 PSF

ALL LUMBER USED WILL BE  
PRESSURE TREATED SYP #2  
BETTER, ALL NAILS, SCREWS  
AND HARDWARE WILL BE  
GALVANIZED OR STAINLESS  
STEEL

DECKING WOLF BRAND ROSEWOOD  
PICTURE FRAME W/ FIELD COLOR  
ROSEWOOD WITH CORTEX SCREWS  
AND PLUGS  
36" HIGH WHITE T-RAIL STYLE VINYL  
RAILING W/ 4X4 POSTS, SQUARE  
BALUSTERS SPACED LESS THAN 4"  
36" HIGH  
ACCESS FOR WATER AND GAS LINE

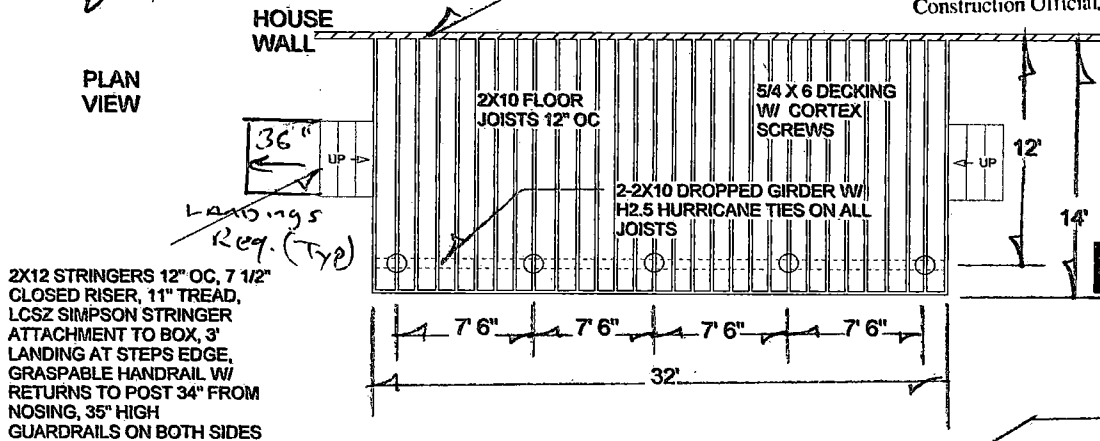
**TOWNSHIP OF BRICK**

RELEASED FOR PERMIT INITIAL DATE  
Building Subcode \_\_\_\_\_  
Plumbing Subcode \_\_\_\_\_  
Fire Subcode \_\_\_\_\_  
Electrical Subcode \_\_\_\_\_  
Plan Reviewer JGP 9.21.20  
Plans Released \_\_\_\_\_  
Construction Official \_\_\_\_\_

*Jme*

2X10 LEDGER TO HOUSE W/  
SYNTHETIC HOUSE WRAP  
BEHIND LEDGER AND VINYL  
FLASHING UP WALL OVER  
AND DOWN LEDGER, 1/2" X 4  
1/2" LAG 16" OC, LUS210  
JOIST HANGERS

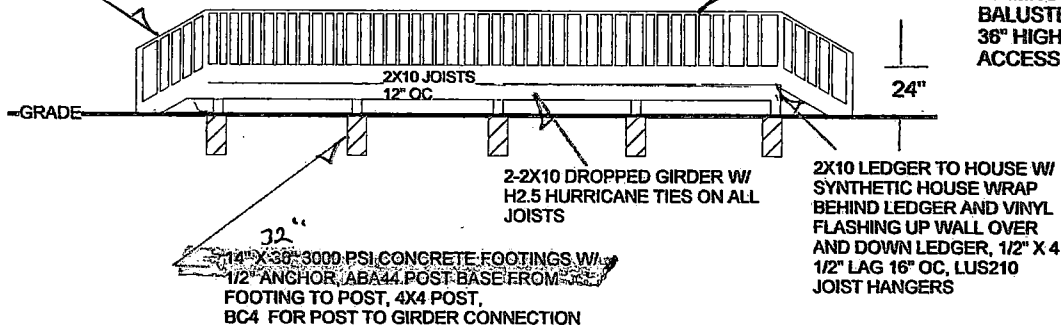
PLAN  
VIEW



**FILE COPY**

DECKING WOLF BRAND ROSEWOOD  
PICTURE FRAME W/ FIELD COLOR  
ROSEWOOD WITH CORTEX SCREWS  
AND PLUGS  
36" HIGH WHITE T-RAIL STYLE VINYL  
RAILING W/ 4X4 POSTS, SQUARE  
BALUSTERS SPACED LESS THAN 4"  
36" HIGH  
ACCESS FOR WATER AND GAS LINE

SECTION  
VIEW





# TOWNSHIP OF BRICK

## DEBRIS FORM

WORK SITE ADDRESS: 1684 west Princeton Avenue

BLOCK: 835 LOT: 1

CONTRACTOR: Pizzo Contracting

CONTRACTOR'S ADDRESS: 1579 Route 9 Toms River NJ 08755

Type of Construction (minor, new home): Deck

Type of Debris (shingles, siding, wood, etc.): Woods, Nails Screws

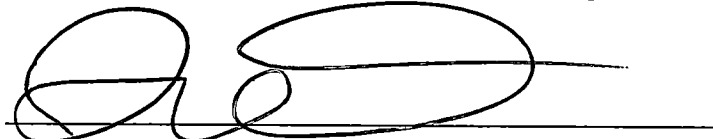
Party responsible for removal: Pizzo Contracting

Dumpster Size: 20 Yard

Destination of Debris: 1579 Route 9 Toms River NJ 08755

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclables.

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 I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."

  
Signature

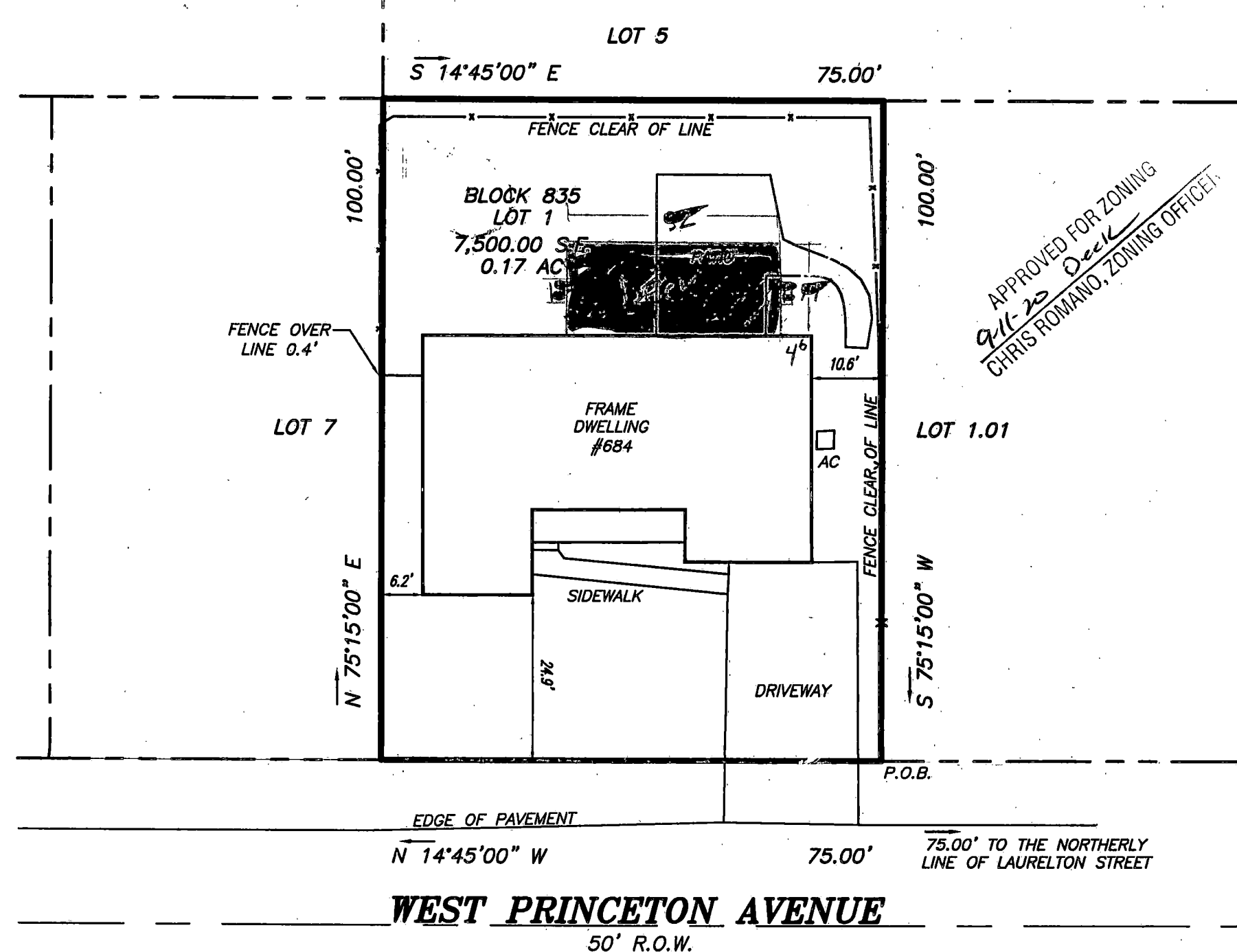
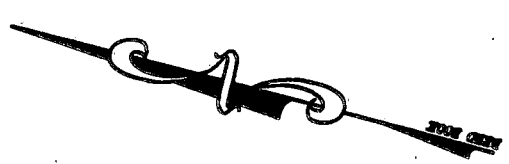
8/28/20  
Date

Pizzo Contracting  
Print Name

NOTE: A WRITTEN "WAIVER AND DIRECTION NOT TO SET CORNER MARKERS" HAS BEEN OBTAINED FROM THE ULTIMATE USER PURSUANT TO N.J.A.C. 13:40-5.1(d).

THE INFORMATION SHOWN HEREIN CORRECTLY REPRESENTS THE CONDITIONS FOUND AT, AND AS OF THE DATE OF THE FIELD SURVEY, EXCEPT SUCH IMPROVEMENTS OR EASEMENTS, IF ANY, BELOW THE SURFACE AND NOT VISIBLE

THIS SURVEY IS SUBJECT TO CHANGE ACCORDING TO THE FACTS THAT A CURRENT TITLE REPORT MAY DISCLOSE



APPROVED FOR ZONING  
9-11-20 *Deek*  
CHRIS ROMANO, ZONING OFFICER

THIS SURVEY CERTIFIED TO:  
DAVID CARAVELLA AND JACQUELINE RODRIGUES  
TWO RIVERS TITLE COMPANY TRT10633

OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY  
ADVISORS MORTGAGE GROUP, LLC, ITS SUCCESSORS  
AND/OR ASSIGNS AS THEIR INTERESTS MAY APPEAR  
ZAGER FUCHS, PC.  
KEVIN I. ASADI, ESQUIRE

LOT KNOWN AS LOT 1 IN BLOCK 835 ON THE TAX MAP OF THE TOWNSHIP OF BRICK, OCEAN COUNTY, NEW JERSEY.  
LOT ALSO KNOWN AS LOTS 1,2,3&4 IN BLOCK 10 ON A MAP ENTITLED "MAP OF LAURELTON PARK, LAURELTON, OCEAN COUNTY, NEW JERSEY." FILED IN THE OCEAN COUNTY CLERK'S OFFICE ON SEPTEMBER 25, 1929 AS MAP NUMBER A-328.

GRAPHIC SCALE



( IN FEET )  
1 inch = 20 ft.

NO DETERMINATION HAS BEEN MADE AS TO THE PRESENCE OR ABSENCE OF WETLANDS ON THIS PROPERTY. NO STATEMENT IS BEING MADE OR IMPLIED HEREIN, NOR SHOULD IT BE CONSTRUED THAT ANY STATEMENT IS BEING MADE BY THE FACT THAT NO EVIDENCE OF THE SAME IS PORTRAYED HEREIN.

I HEREBY CERTIFY THAT THIS IS A TRUE AND ACCURATE SURVEY MADE ON THE GROUND. THERE ARE NO ENCROACHMENTS EITHER WAY ACROSS PROPERTY LINES EXCEPT AS SHOWN

IF THIS DOCUMENT DOES NOT CONTAIN A RAISED IMPRESSION SEAL OF THE PROFESSIONAL IT IS NOT AN ORIGINAL

*Thomas P. Santry, Jr.*  
RESPONSIBLE PROFESSIONAL'S SIGNATURE  
THOMAS P. SANTRY, JR., P.L.S.  
PROFESSIONAL LAND SURVEYOR  
P.L.S. LIC. No. 24GS3540000  
DATE: 08/15/17

**SURVEY OF**  
**LOT 1 ~ BLOCK 835**  
1684 West Princeton Avenue  
Township of Brick  
Ocean County, New Jersey  
**THOMAS P. SANTRY, P.A.**  
ENGINEERS AND SURVEYORS  
ONE HUNDRED TWENTY EIGHT EAST RIVER ROAD  
RUMSON, NEW JERSEY 07760  
PHONE (732) 741-4800 FAX (732) 741-0084

|                 |          |
|-----------------|----------|
| PROJ. No.       | 17-259   |
| SCALE           | 1" = 20' |
| DATE            | 08/15/17 |
| DRAWN BY        | BEJ      |
| TAX MAP SHEET # | 45.02    |
| SHEET           | 1 OF 1   |
| DRAWING No.     | OC207    |