



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

C-20-003444

I. IDENTIFICATION

1. Proposed Work Site at: 1723 W. Princeton Ave, Brick

2. Name of Owner in Fee: Michael P. Bailey

T. [Redacted] e-mail [Redacted]

Address 1723 W. Princeton Ave, Brick 08724

3. Ownership in Fee: Public ☐ Private ☒ Municipality ☐ zip code

4. Principal Contractor: Self (home owner) Tel. _____

Address _____ e-mail _____

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

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

5. Architect or Engineer _____ Contact _____

Address _____ e-mail _____

Tel. _____ FAX: _____

6. Responsible Person in Charge once Work has Begun Michael P. Bailey

Te [Redacted] FAX: _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>150</u>		
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	\$ <u>2</u>		
10. Subtotal	\$ <u>95</u>		
11. Cert. of Occupancy			
12. Other	\$ <u>227</u>		
13. TOTAL	\$		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories 1

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 No

11. Base Flood Elevation _____ ft.

12. Wetlands yes _____ no _____

IIa. PROPOSED WORK

- ☒ Minor Work ☐ New Building ☐ Addition ☐ Demolition
- ☐ Repair Deck ☐ 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
\$1,000	<u>Qu</u>	<u>10/6/20</u>		<u>11/3/20</u>	<u>Pr</u>			

TOTAL COST \$1000 \$0

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

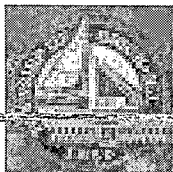
VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: Single Family home
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 _____



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 03/24/2021
Control Number C-20-003444
Permit Number 20-2774
Permit Issue Date 11/17/2020
Certificate Number 20-2774

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 1723 W. PRINCETON AVE Brick Township, NJ 08724 Block: 848 Lot: 20 Qual: _____
Owner in Fee: BAILEY, MICHAEL P & SUZAN M
Owner Address: 1723 W PRINCETON AVE BRICK NJ 08724
Telephone: [REDACTED]
Contractor: BAILEY, MICHAEL P & SUZAN M
Address: 1723 W PRINCETON AVE BRICK NJ 08724
Telephone: [REDACTED] Fax: _____ Federal Emp. Number: _____
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:

Daniel Newman Jr

Construction Official

Date Printed: 03/24/2021

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

Fee: \$0.00

Check Number: _____

Collected By: _____



BUILDING SUBCODE TECHNICAL SECTION



Date Received
Control #

11-17-2020

Date Issued
Permit #

20-2774

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

Block 848 Lot 20 Qualification Code _____

Work Site Location 1723 W. Princeton Ave

Brick

Owner in Fee: Michael Bailey

Ti _____ e-mail _____

Address 1723 W. Princeton Ave Brick 08724

street

municipality

zip code

Contractor: Homeowner Tel. _____

Address _____ e-mail _____

Contractor License No. or Builder Registration No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	INSPECTIONS
			Type Failure Failure Approval Initial
☐ No Plans Required			Footings (4)
☐ All <u>11/12/20</u>			Footings Bonding
☐ Footings/Foundations			Foundation
☐ Structural/Framework			Slab
☐ Exterior			Frame
☐ Interior			Truss Sys./Bracing
Joint Plan Review Required:			Barrier-Free
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation
SUBCODE APPROVAL for PERMIT			Finishes -Base Layer
Date: <u>11.12.20</u>			Finishes -Final
Approved by: <u>[Signature]</u>			Energy
SUBCODE APPROVAL for CERTIFICATE			Mechanical
☐ CO ☐ CCO ☒ CA			TCO
Date: <u>03/22/21</u>			Other
Approved by: <u>[Signature]</u>			Final <u>11/22/20</u>
			Barrier-Free

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed _____ Constr. Class Present _____ Proposed _____

No. of Stories _____ If Industrialized Building:

Height of Structure _____ ft. State Approved _____ HUD _____

Area — Largest Floor _____ sq. ft.

New Bldg. Area/All Floors _____ sq. ft.

Volume of New Structure _____ cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Rehabilitation \$ 1000.00
3. Total (1+ 2) \$ 1000.00

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: Michael Bailey

Print name here: Michael Bailey

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Remove block/concrete porch
Replace with small freestanding deck
Structure supported on 4 pilings

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 \$ _____

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.



CONSTRUCTION PERMIT

Date Issued 11-17-2020
Control # C-20-003444
Permit # 20-2119

IDENTIFICATION Block: 848 Lot: 20 Qualifier _____
Work Site Location: 1723 W. PRINCETON AVE Brick Township, NJ Contractor BAILEY, MICHAEL P & SUZAN M
08724 Address 1723 W PRINCETON AVE BRICK NJ 08724
Owner in Fee BAILEY, MICHAEL P & SUZAN M
1723 W PRINCETON AVE BRICK NJ 08724 Telephone: _____
Telephone: _____ Lic. No. or Bldg. Reg. No. _____
Federal Employee No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

DECK

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 \$1,000

D. Neuman
Construction Official

Date 11/12/20

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$150
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$2
CO Fee	
Other	\$0
Total	\$152
Check No.	<u>2379</u>
Cash	\$0
Credit	\$0
Collected By	<u>M. Lopez</u>

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.

RECEIVING CLERK FW
DATE REC'D 10/6/20

ZONING PERMIT APPLICATION

PERMIT # ZP-20-01321
DATE ISSUED 11-17-2020

BLOCK: 848 LOT: 20 QUALIFIER: _____ SITE ADDRESS: 1723 W. Princeton Ave

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Michael Bailey
COMPLETE ADDRESS: 1723 W. Princeton Ave
Brick N.J. 08724
PHONE [REDACTED] EMAIL: [REDACTED]
2. NAME OF APPLICANT: Michael Bailey
APPLICANT ADDRESS: 1723 W. Princeton Ave
Brick N.J. 08724
PHONE # [REDACTED] EMAIL: [REDACTED]
3. RESPONSIBLE PERSON FOR WORK: Michael Bailey
PHONE# [REDACTED] - FAX# _____
4. SIGNATURE OF APPLICANT: Michael Bailey

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 75.00
OTHER: \$ _____
TOTAL: \$ 75.00

REQUIRED BY APPLICANT

RESIDENTIAL: Single family dwelling
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 X Replace *DECK _____

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____ MATERIAL _____

HEIGHT: _____ (*IF APPLICABLE)

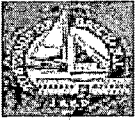
OTHER _____

DESCRIPTION:

ZONING REVIEW:

DATE REVIEWED: 10-18-20 DATE DENIED: _____ DATE APPROVED: 10-18-20 INTLS: Ce

(SEE BACK PAGE)



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

Date Issued: 11-17-2020
Application Number: ZA-20-01355
Application Date: 10/14/2020
Project Number: _____
Permit Number: 23-20 01322
Fee: \$96.00

Zoning Permit

Worksite **1723 W. PRINCETON AVE**
Location: **Brick Township, NJ 08724**

Owner: **BAILEY, MICHAEL P & SUZAN M**
Address: **1723 W PRINCETON AVE**
BRICK, NJ 08724

Applicant: **BAILEY, MICHAEL P & SUZAN M**
Address: **1723 W PRINCETON AVE**
BRICK, NJ 08724

Block: 848 Lot: 20 Qualifier: _____ Zone: R-10

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 - Construction of a replacement access platform/deck attached to the front of the house. Replacing existing concrete platform with wood deck.

Replace existing same size and location.

Additional Zoning Permit is required for additional work.

Application Approved Date: 10/19/2020

Upon review it was determined that the Zoning Permit:

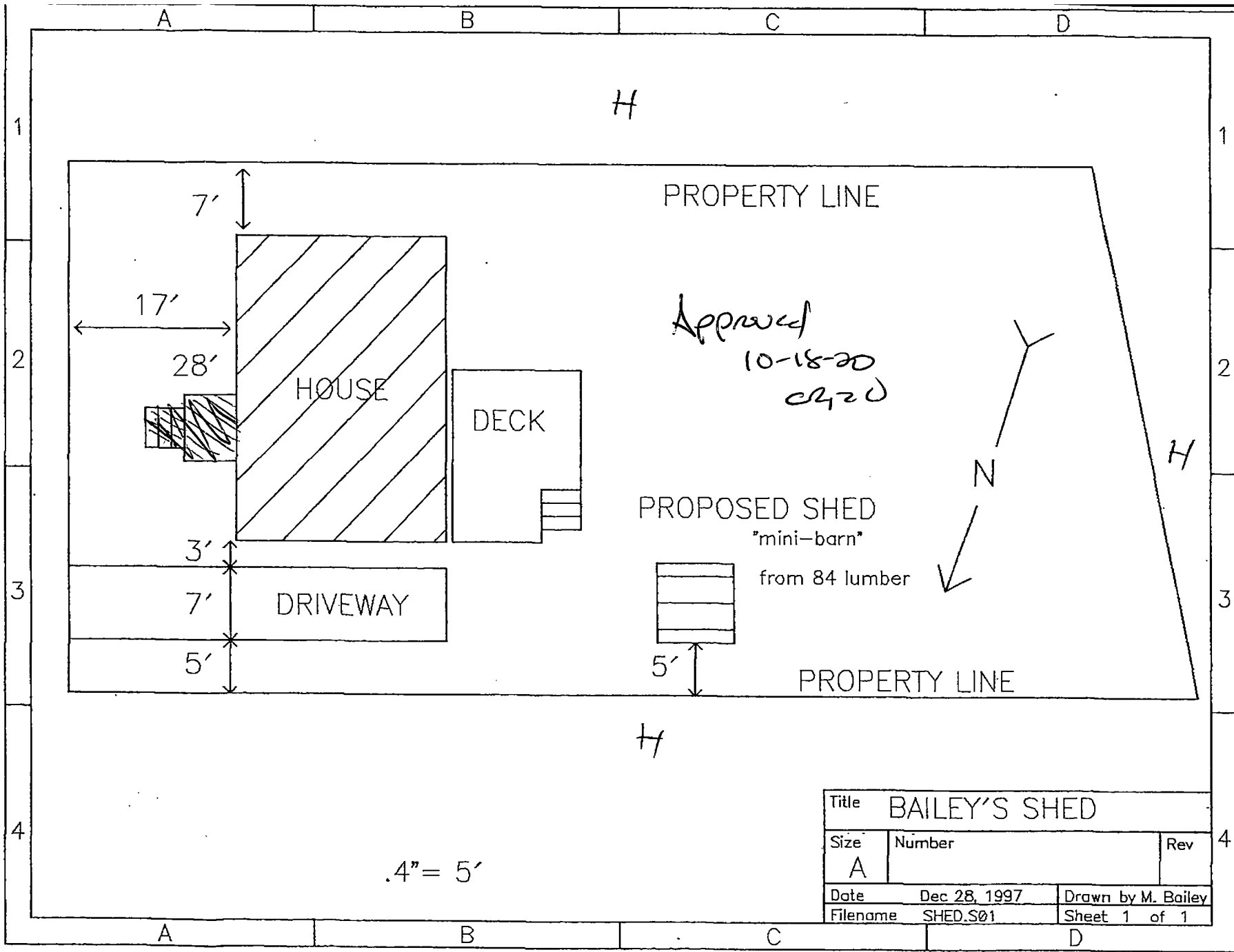
- ☒ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Approved with Conditions
☐ Valid Nonconforming Use/Structure is established by
☐ Zoning Board of Adjustment ☐ Zoning Officer

Christopher J. Romano, Zoning Officer

10/19/2020

Date

5



Title BAILEY'S SHED		
Size A	Number	Rev
Date Dec 28, 1997	Drawn by M. Bailey	
Filename SHED.S01	Sheet 1 of 1	

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK _____

PERMIT # _____

BLOCK 848 LOT 20 ADDRESS 1723 W. Princeton Ave. 08724**IDENTIFICATION:**1. WORK SITE ADDRESS 1723 W. Princeton Ave Brick 087242. APPLICANT Michael Bailey3. NAME OF OWNER IN FEE Michael BaileyADDRESS 1723 W. Princeton Ave Brick 08724PH([REDACTED] EMAIL [REDACTED]4. PRINCIPAL CONTRACTOR Self Homeowner

ADDRESS _____

PHONE _____ EMAIL _____

5. ARCHITECT OR ENGINEER Homeowner

ADDRESS _____

PHONE _____ EMAIL _____

6. RESPONSIBLE PERSON FOR WORK Homeowner

ADDRESS _____

PHONE _____ EMAIL _____

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

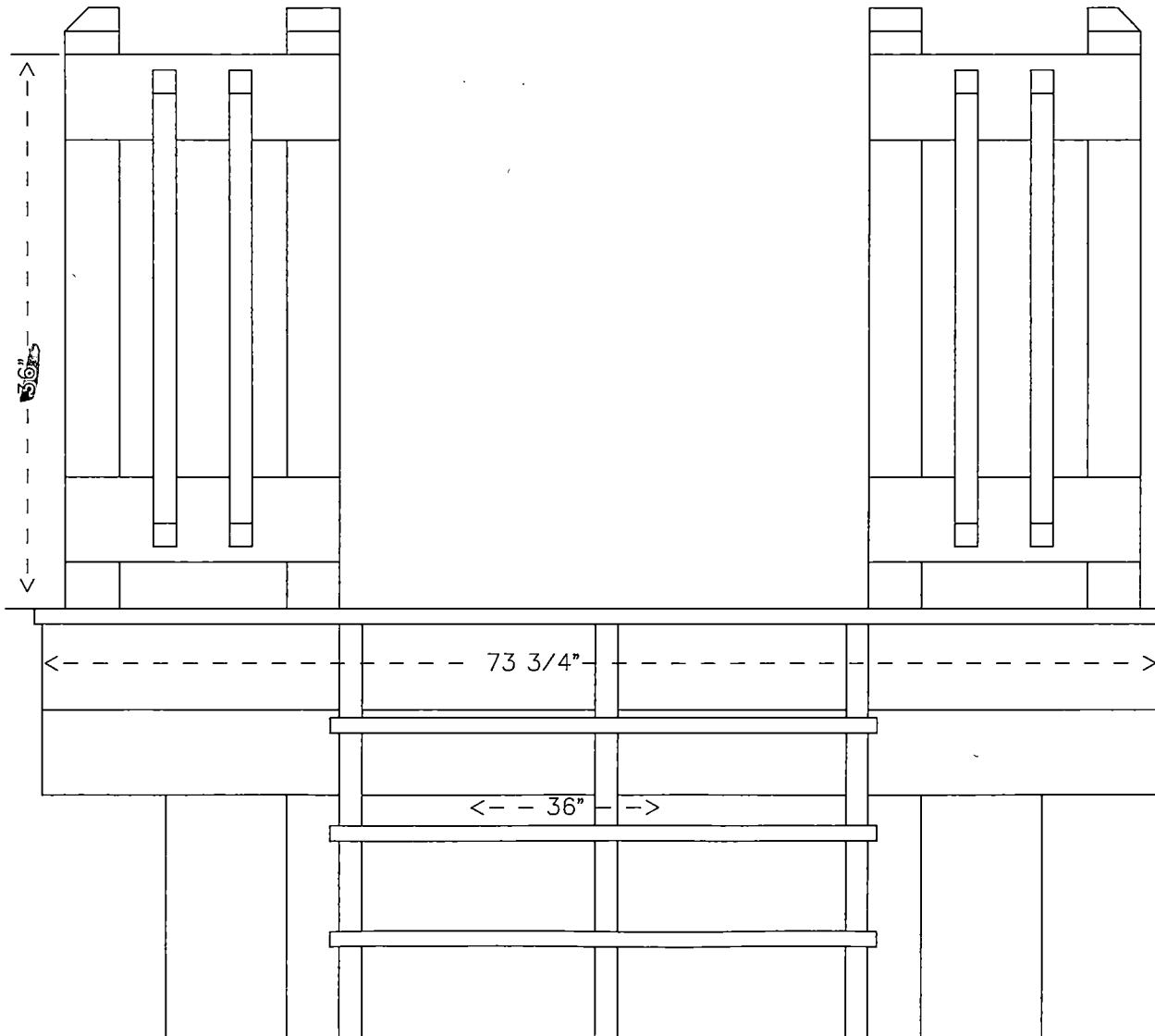
APPLICATION NUMBER _____

APPROVED DATE _____

PROJECT DESCRIPTION:☐ GRADING/CLEARING☐ ROAD OPENING☐ SOIL REMOVAL / FILL☐ RETAINING WALL☐ POOL☐ BULKHEAD / DOCK☐ DWELLING☐ TREE REMOVAL☐ COMMERCIAL SITE MAINTENANCE☒ DESCRIPTION Replace Concrete Porch with small deck**ENGINEERING REVIEW:**

DATE RECEIVED _____ DATE REJECTED _____ DATE APPROVED _____ INITIALS _____

A	B	C	D	E	F	G	H
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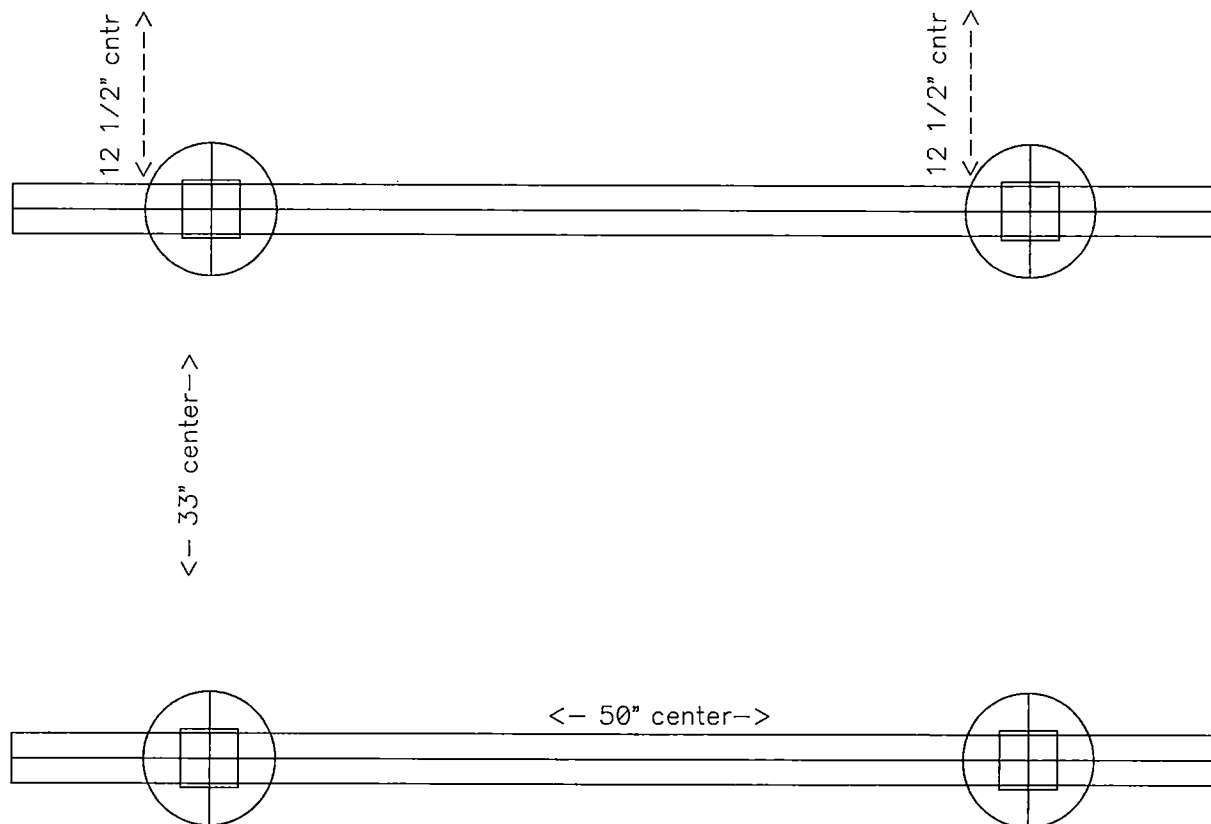
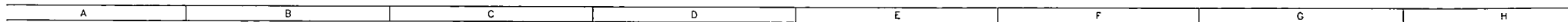
TOWNSHIP OF BRICK
 RELEASED FOR PERMIT **INITIAL** **DATE**
 Building Subcode _____
 Plumbing Subcode _____
 Fire Subcode _____
 Electrical Subcode _____
 Plan Reviewer Don M. M. 11/12/20
 Plans Released _____
 Construction Official _____

FILE COPY

scale 250mils = 1"

Michael Bailey

Block 848 Lot 20
 1723 W. Princeton Ave.
 Brick NJ 08724



vertical height total above ground 26"
 $1 + 5.5 + 5.5 = 12"$

qty	
2	2x6 10'
2	2x6 8'
7	4x4 4'
4	8" dia sonotubes 36" long
<i>min dia 90" 12"</i>	
<i>min depth 32"</i>	

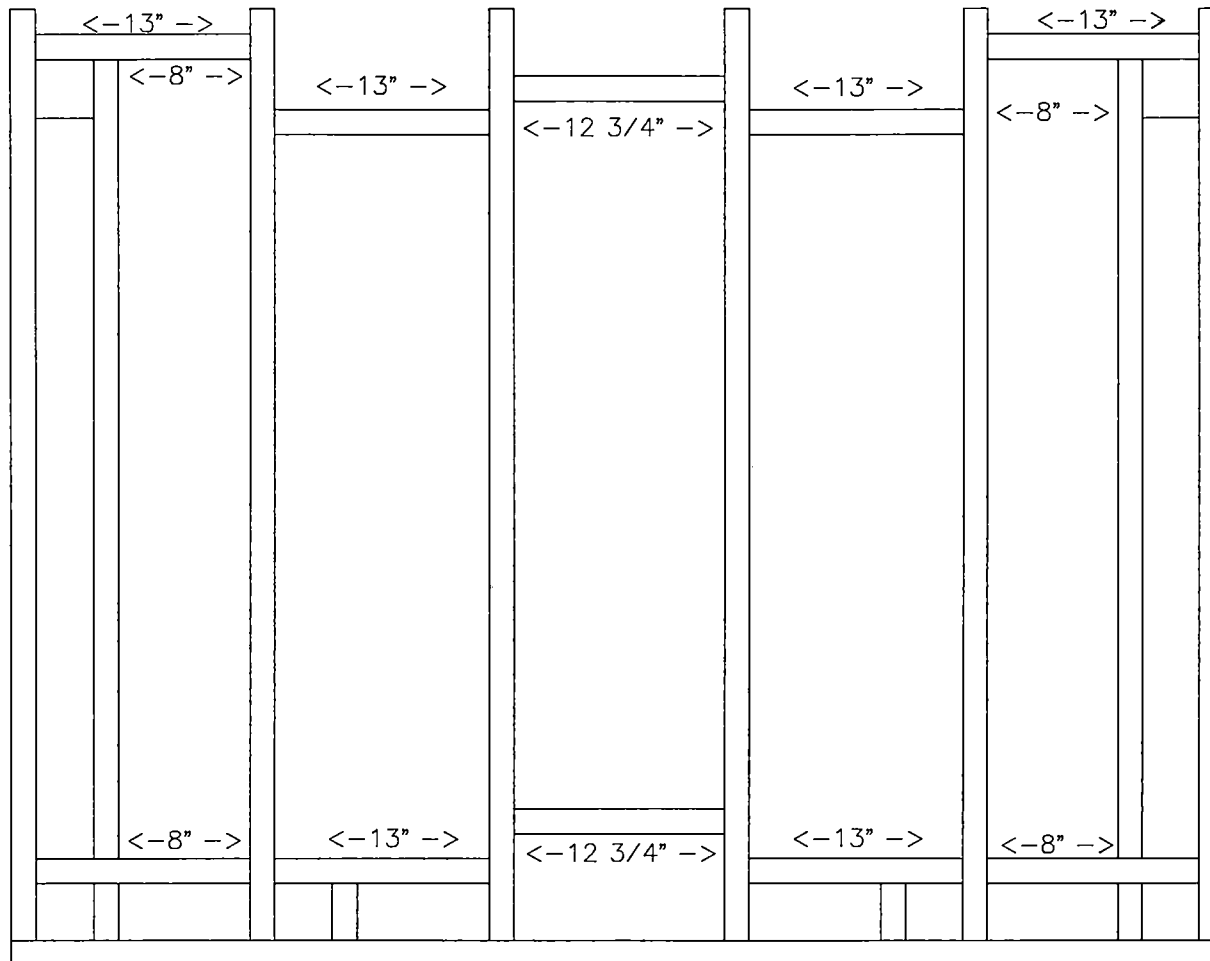
FILE COPY

scale 250mils = 1"

Michael Barber

Block 848 Lot 20
1723 W. Princeton Ave.
Brick NJ 08724

A	B	C	D	E	F	G	H
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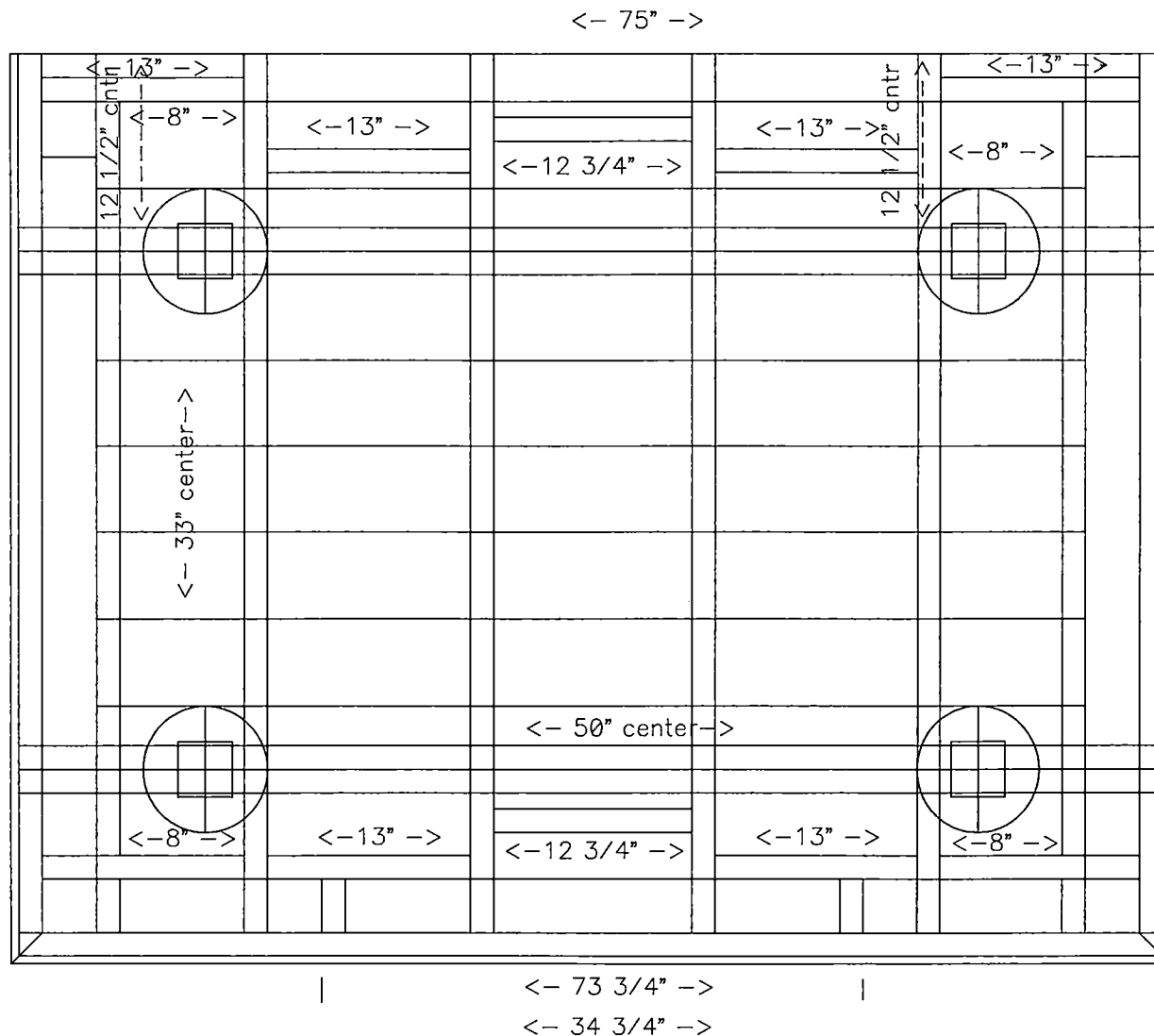
qty		
3	2x6	12ft.
6	2x6	8ft.

FILE COPY

Michael B. G. G.

Block 848 Lot 20
1723 W. Princeton Ave.
Brick NJ 08724

A	B	C	D	E	F	G	H
---	---	---	---	---	---	---	---



vertical height total above ground 26"
 $1 + 5.5 + 5.5 = 12"$

qty		
2	2x6	10'
2	2x6	8'
7	4x4	4'
4	8" dia sonotubes	36" long
qty	<i>MIN 12" SLOPE 32" DEPTH</i>	
3	2x6	12ft.
6	2x6	8ft.

qty		
5	1x6	16ft.

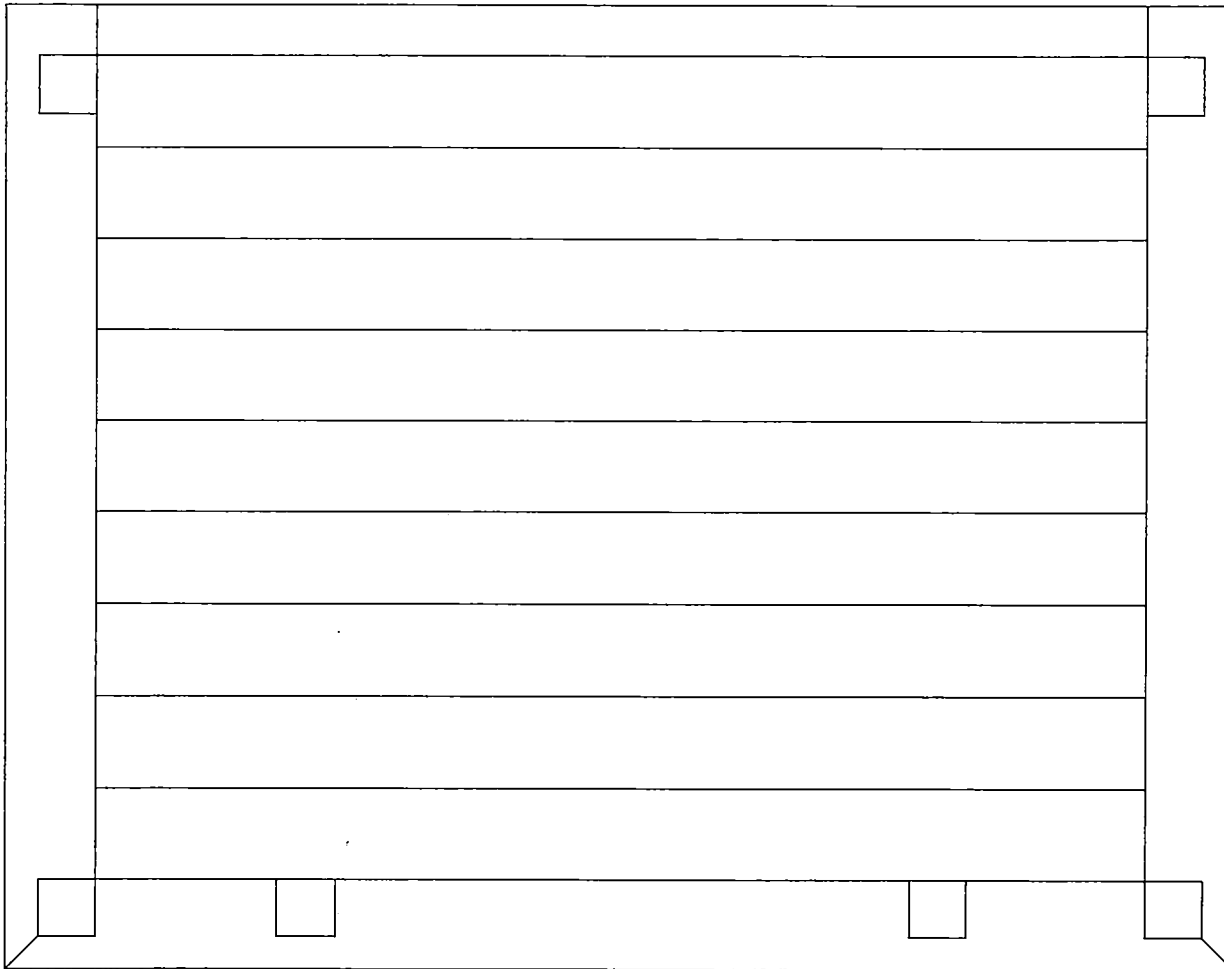
FILE COPY

scale 250mils = 1"

Michael Baile
 Block 848 Lot 20
 1723 W. Princeton Ave.
 Brick NJ 08724

A	B	C	D	E	F	G	H
---	---	---	---	---	---	---	---

<- 75" ->



<- 58" ->

qty
5 1x6 16ft.

FILE COPY

Michael Bailey

Block 848 Lot 20
1723 W. Princeton Ave.
Brick NJ 08724

<- 34 3/4" ->

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 1723 W. Princeton Ave

BLOCK: 848 LOT: 20

CONTRACTOR: Self Michael Bailey

CONTRACTOR'S ADDRESS: 1723 W. Princeton Ave.

Type of Construction(minor, new home): Minor

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

Party responsible for removal: Michael Bailey

Dumpster Size: 1 Ton Trailer

Destination of Debris: Ocean County Recycling

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."

Michael Bailey

Signature

10/4/20

Date

Michael Bailey

Print Name