BLOCK 819 LOT 1 ADDRESS (SITE) 582 Larsen St. PERMIT NO. 222-92

RECEIVED
FEB 24 1992
DIV. OF INSPECTION

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 582 Larsen Street
2. Name of Owner in Fee: Edward J Wilkowski [redacted]
   Address None (street) (municipality) (zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor None Tel. (____) _____
   Address _____
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. _____ Social Security No. _____
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person In Charge of Work Edward Wilkowski [redacted]

Shed

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 15 —		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other			
6. Subtotal	$ 15 —		
ss 20% for ate Plan Review	3 —		
btotal	$		
9. DCA Training Fee			
10. Subtotal	$		
11. Cert. of Occupancy	20 —		
12. Other			
13. TOTAL	$ 40 —		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ____ ft.	
3. Area—Largest Floor ____ sq. ft.	
4. Building Area—All Floors ____ sq. ft.	
5. Volume of Structure ____ cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed ____ sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ____ ft.	
10. Wetlands yes ____ sq. ft.	
no	
11. Fire Grading	
12. Max. Live Load	
13. Max. Occupancy Load	

II. PROPOSED WORK

	Est. Cost
1. ☐ Minor Work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS	1100 00

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
DC	2/24/92		2/25/92	AK	3/17/92		JC

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☒ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction ____
After Construction ____
Net gain or loss ____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

U.C.C. Form F-100A

LDS BR 10410236

20K

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature _____ Date 2-24-92

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

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

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

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

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

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date	COMMENTS
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Fire Department					X	X	X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Dept. of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Dept. of Environmental Protect.	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☒ Other Zoning	SK	2/24/92	replace Fred.						
☐									
☐									

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 EXPIRED
☐ Temporary Certificate of Occupancy	No.		
☐ Temporary Certificate of Occupancy	No.		
☐ Continued Certificate of Occupancy	No.		
☐ Certificate of Occupancy	No.		
☐ Certificate of Approval	No.		
☐ None			

CONSTRUCTION PERMIT

Date Issued 2/26/92
Control #
Permit # 222-92

IDENTIFICATION Block 819 Lot 1

Work Site Location 1582 Jersey St

Owner In Fee E J Mikolowski

Address same

Tele. ( ) —

Contractor same

Address —

Tele. ( ) —

Lic. No. or Bldrs. Reg. No. — Exp. Date —

Federal Emp. No. —

or Social Security No. 222*#

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER —

[ ] ELECTRICAL [ ] FIRE PROTECTION

DESCRIPTION OF WORK:

Shed

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 $ 1100

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)		
Building	15	
Plumbing		0.00
Electrical		
Fire Protection		15.00
Other FIRE	5	5.00
Other		20.00
DCA Training Fee		40.00
Cert. of Occ.	20	40.00
Other		0.00
Total	40	
Check No.	200	
Cash		
Collected By:		

BLOCK
LOT
1 #
BUILDING
PLAN RVW
C / O
TOTAL
CHECK
CHANGE
2/26/92 NO. 9012A005 10:06

U.C.C. Form F-170A

1- WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

BUILDING SUBCODE TECHNICAL SECTION

Date Received 2/26/92
Date Issued
Control #
Permit # 222-92

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

Block 819 Lot
Work Site Location 582 Larsen Street
Owner in Fee Edward J. Wiekenski
Address 582 Larsen Street
[redacted]
Tele.
Contractor
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

Shed
MUST BE ANCHORED

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[✓] All	2/27/92	RV
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: 3/27/92
Approved By: J. Chusalkin

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence Height
  [ ] Sign Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other

(Office Use Only)
FEE
$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: TOTAL FEE $

B. BUILDING CHARACTERISTICS

Use Group Present R.3 Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
Total Bldg. Area/All Floors Sq. Ft.
Volume of Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

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

U.C.C. Form F-110A
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received 2/26/92
Date Issued
Control #
Permit # 222-92

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

Block 819 Lot
Work Site Location 1572 Larsen Street
Owner in Fee Edward J. Wiktorski
Address 1572 Larsen Street
Tele. [redacted]
Contractor
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All	2/25/92	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
Total Bldg. Area/All Floors Sq. Ft.
Volume of Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

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

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

40 - 24

Shed

MUST BE ANCHORED

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence Height
  [ ] Sign Sq. Ft.
  [ ] Pool N/A
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other

(Office Use Only)
FEE
$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-110A
1 White = Inspector Copy
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BUILDING SUBCODE TECHNICAL SECTION

Date Received 2/26/92
Date Issued
Control #
Permit # 222-92

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

Block 819 Lot
Work Site Location 1572 Hansen Street
Owner in Fee Church of St. Wilhemina
Address 1572 Hansen Street
Tele. [redacted]
Contractor
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Shed

Must Be Anchored

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	2/27	AI
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present R.3 Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
Total Bldg. Area/All Floors Sq. Ft.
Volume of Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

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

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence Height
  [ ] Sign Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other

(Office Use Only)
FEE
$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-110A
1 White = Inspector Copy
2 Canary = Office Copy
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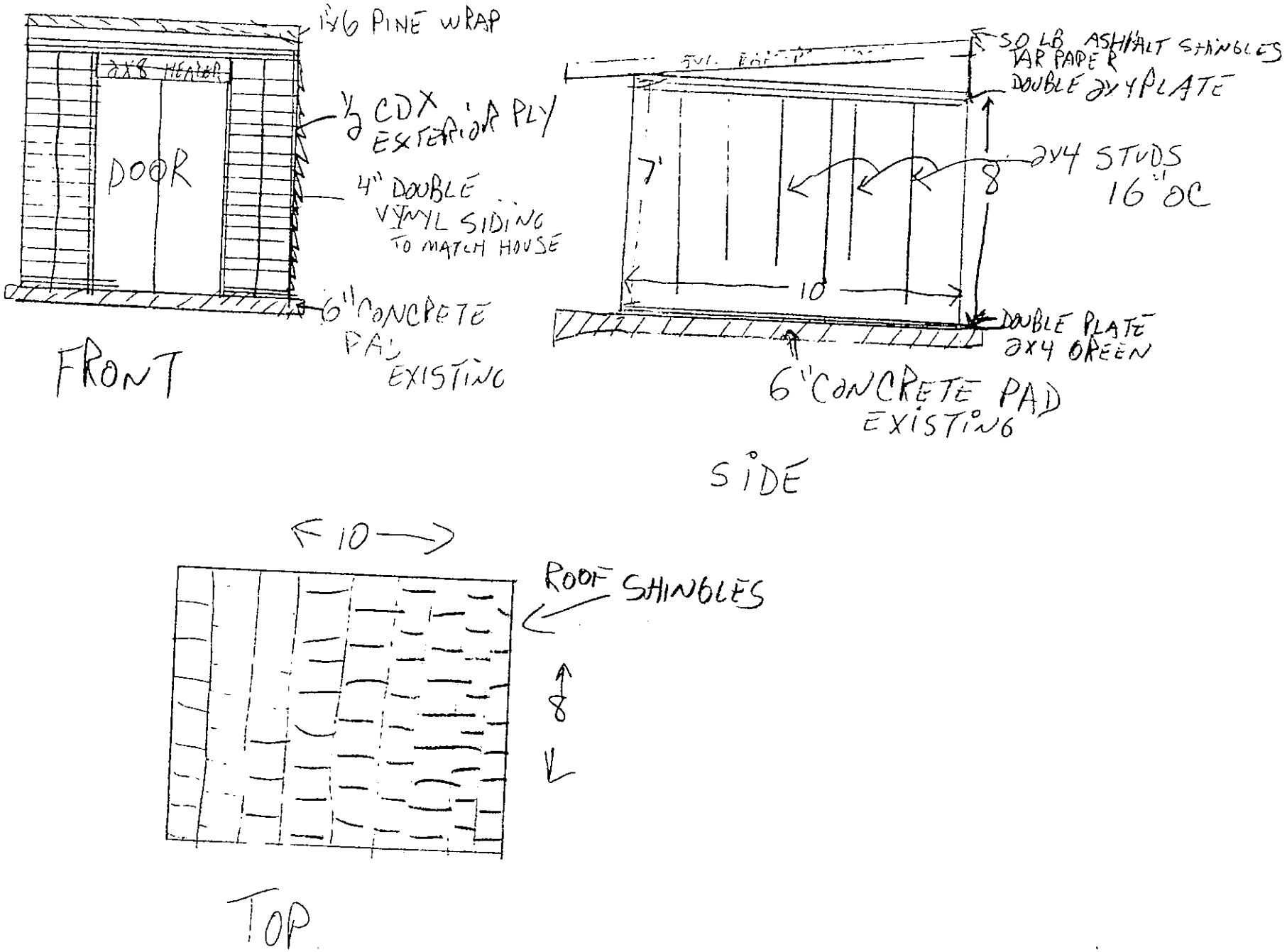

1x6 PINE WRAP
2x8 HEADER
DOOR
½ CDX EXTERIOR PLY
4" DOUBLE VINYL SIDING TO MATCH HOUSE
6" CONCRETE PAD EXISTING
FRONT
50 LB ASPHALT SHINGLES
TAR PAPER
DOUBLE 2x4 PLATE
2x4 STUDS 16" OC
7'
8
10
DOUBLE PLATE 2x4 GREEN
6" CONCRETE PAD EXISTING
SIDE
10
ROOF SHINGLES
8
TOP

TOWNSHIP OF BRICK

TYPES OF WORK THAT REQUIRE BUILDING PERMITS AND WHAT THE REQUIREMENTS ARE FOR OBTAINING A BUILDING PERMIT

Please read this requirement list carefully. The applicant is completely responsible for submitting everything listed below. Failure to do so will result in the delay of your permit.

ADDITION: Submit two plot plans (see zoning below) showing the location of the addition with setbacks marked on the plot plan. Submit two sets of drawings consisting of cross section drawings showing all materials from footing to roof, and finished elevation view of the sides of the addition. If more than one room is involved, submit two floor plans. If plumbing is involved one application must be submitted by whoever is doing the plumbing. Electrical permits are obtained from Ocean County Electrical Bureau, 2 Mott Place, Toms River. If the plans are drawn by the homeowner, the owner signs each page and the owner section on the application.

ALTERATION: For inside changes, submit 2 copies of floor plan showing changes.

BULKHEADS: As of September 26, 1980, on man-made lagoons only, a permit from the State is an approval from the Army Corps of Engineers. This approval is required for a permit in Brick. On all other natural waterways such as Metedeconk River, Kettle Creek, etc. both State and Army permits are necessary. Submit two plot plans showing location of bulkhead and the bulkhead design sealed by an Engineer.

DECK: Two sets of plans showing how the deck will be built from the footing to the rails, what materials are going to be used, their size, and the depth of the footing. Also include two plot plans showing the location of the proposed deck and what the distance will be to the side and rear property lines.

ELECTRICAL: If there is Electrical work to be done a permit is to be obtained from the Ocean County Electrical Bureau in Toms River. The phone number is (908) 244-2121. IT IS THE OWNERS RESPONSIBILITY TO OBTAIN ELECTRICAL PERMITS. NO CERTIFICATES OF OCCUPANCY WILL BE ISSUED WITHOUT A FINAL ELECTRICAL APPROVAL.

FENCES: Submit one Plot plan showing the location of the fence by placing X's along the property line that the fence will be on.

FIREPLACE & WOOD STOVE: If masonry chimney is being built on outside of house, submit two plot plans showing location along with 2 copies of cross section of foundation, hearth and throat. A Wood burning stove should be installed according to manufacturers specifications.

PLUMBING: Submit 1 Plumbing Technical Section with the heatloss, gas pipe sizing and a isometric sketch. Also a list of any existing plumbing fixtures.

PORCH ENCLOSURES: If you live in a development with an Association you must first receive the Association's approval. Bring us a copy of the approval, submit 2 copies of cross section drawing showing how the porch will be constructed from the footing (if its not there already) to the roof, and what materials you will be using. Also submit 2 copies of the elevation view showing how the porch will be enclosed. Two plot plans showing location of porch and the distance to your property lines. Make sure you complete the Engineering Exemption Form.

ROOFING: Just fill out application form.

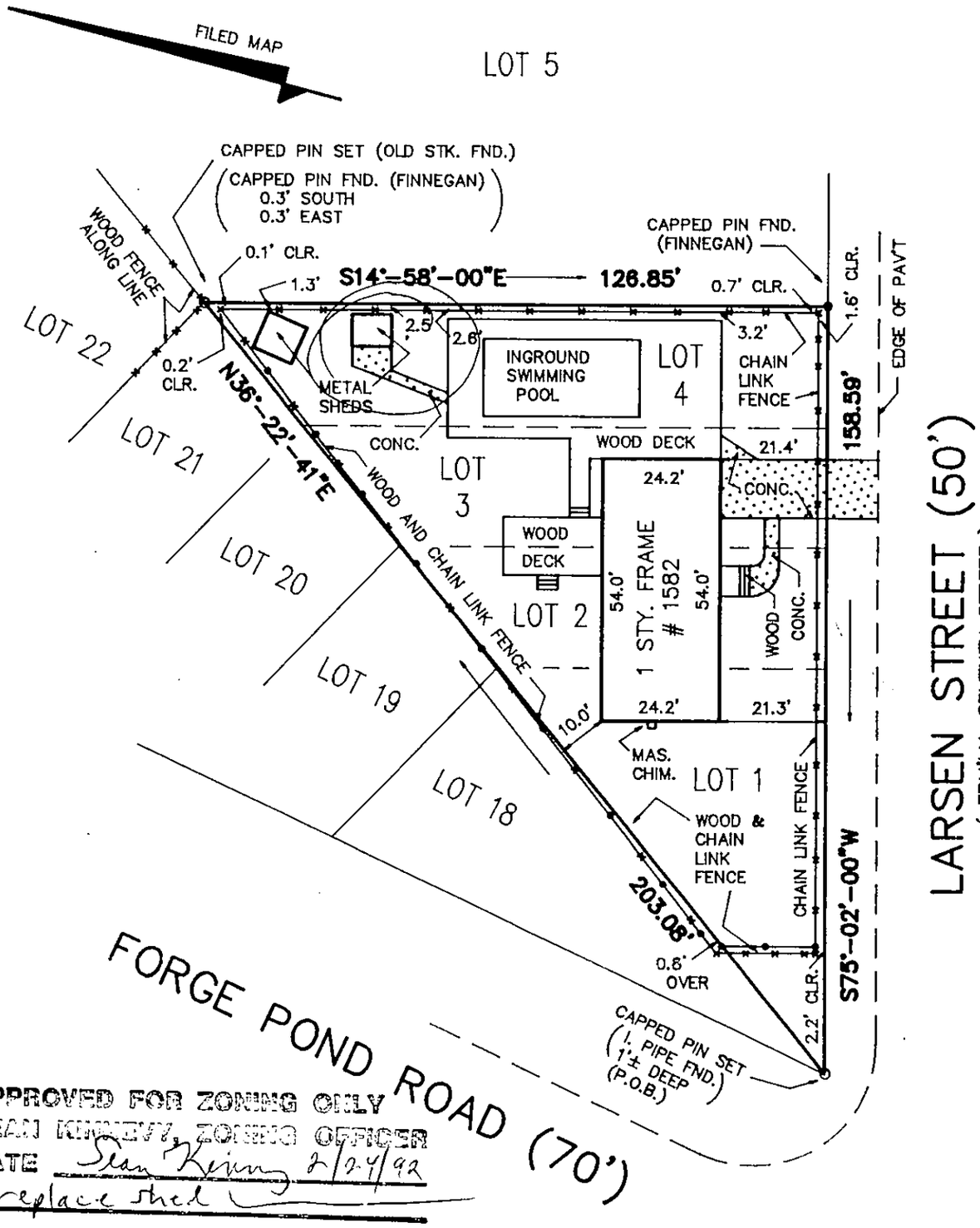
SHEDS: If you're building your own shed, submit 2 copies or cross section of materials materials being used and 2 plot plans showing the location of shed on property and the setbacks to the property lines. If a pre-fab shed just submit plot plan showing location and setbacks.

SIDING: Just fill out application form.

SWIMMING POOLS: Submit 2 plot plans showing location of swimming pool on the property and distance to the property line, 2 pool designs sealed, and a brochure on the filter system. Above Ground pools, submit brochure on pool and filter system, along with 2 plot plans showing location of pool on the property and the setbacks to the property line.

ZONING REQUIREMENTS FOR ADDITIONS AND NEW HOMES: All plot plans must show the required yard areas for the particular zone. All yard requirements are shown to the building line. The building line is a line formed by the intersection of a horizontal plane and a vertical plane that coincides with the most projected exterior surface of the building including eves and overhangs.

All yard areas facing on a public street shall be considered a front yard and shall conform to the minimum front yard requirements for the particular area. The rear yard shall be deemed to be the area opposite the narrowest lot frontage and the remaining lot yard shall be determined to the side yard.



APPROVED FOR ZONING ONLY
OCEAN COUNTY, ZONING OFFICER
DATE Sean Kenny 2/24/92
replace shed

LOT AREA = 10,058.66 SQ. FT.
DEED REF. = BK. 4029, PG. 4

THIS CERTIFICATION IS MADE ONLY TO BELOW NAMED PARTIES FOR PURCHASE AND/OR MORTGAGE OF HEREIN DELINEATED PROPERTY BY BELOW NAMED PURCHASER. NO RESPONSIBILITY OR LIABILITY IS ASSUMED BY SURVEYOR FOR USE OF SURVEY FOR ANY OTHER PURPOSE INCLUDING, BUT NOT LIMITED TO USE OF SURVEY FOR SURVEY AFFIDAVIT, RESALE OF PROPERTY, OR TO ANY OTHER PERSON NOT LISTED IN CERTIFICATION, EITHER DIRECTLY OR INDIRECTLY.

"OFFSETS SHOWN HEREIN ARE NOT TO BE USED AS A BASIS FOR CONSTRUCTION OF FENCES OR OTHER PERMANENT STRUCTURES."

"THIS SURVEY DOES NOT PURPORT TO IDENTIFY ENCROACHMENTS, UTILITIES, SERVICE LINES OR STRUCTURES BELOW GRADE, IF ANY, EXCEPT AS SPECIFICALLY NOTED HEREON."

ALSO KNOWN AS BLOCK 819.24 LOT 1
AS SHOWN ON THE BRICK TOWNSHIP TAX MAP

10238

SURVEY OF PROPERTY

BLOCK 24 LOTS 1, 2, 3 & 4

" LAURELTON PARK "
BRICK TOWNSHIP

OCEAN COUNTY NEW JERSEY

FILED MAP No. A-328 DATE FILED 9/25/1929

TO: EDWARD J. WILKOWSKI AND WENDY L. WILKOWSKI, H/W
CITICORP MORTGAGE, INC., AND/OR ITS SUCCESSORS AND ASSIGNS
REGENCY ABSTRACT, INC.
SHERMAN, SILVERSTEIN AND KOHL, ESQUIRES

I HEREBY CERTIFY THAT THIS SURVEY WAS ACTUALLY MADE ON THE GROUND AS PER RECORD DESCRIPTION AND IS CORRECT AND THERE ARE NO ENCROACHMENTS EITHER WAY ACROSS PROPERTY LINES EXCEPT AS SHOWN.

DATE	SCALE	DRAWN BY:	CHKD. BY	DRAWING NO.
4/18/89	1" = 30'	ACU-PLAT	SC	89-305

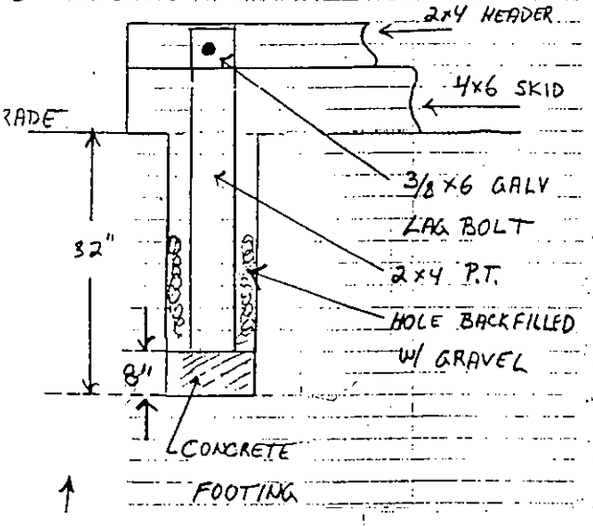
CHRISTIE-WERNER ASSOCIATES INC.
PROFESSIONAL LAND SURVEYORS
PROFESSIONAL PLANNERS
520 MAIN STREET
P.O. BOX 1899
TOMS RIVER, N.J. 08754-0639
(201) 341-7750
STUART D. CHRISTIE, P.L.S., P.P.
P.L.S. No. 29345 P.P. No. 2947
CARL P. WERNER, P.L.S., P.P.
P.L.S. No. 30094 P.P. No. 3152

Stuart D. Christie 4/20/89

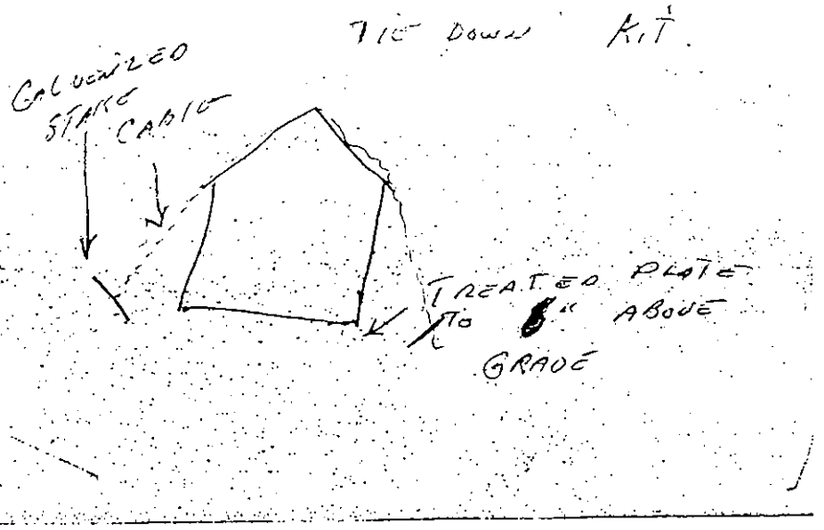
STUART D. CHRISTIE, P.L.S.
Professional Land Surveyor, N.J. Lic. No. 29345

ANCHORING METHOD
(ALL 4 CORNERS)

SHED IS ANCHORED TO EARTH BY A VERTICAL P.T. 2x4, LAG BOLTED TO THE FLOOR FRAMING HEADER & BURRIED IN A HOLE 32" DEEP W/ AN 8" CONCRETE FOOTING

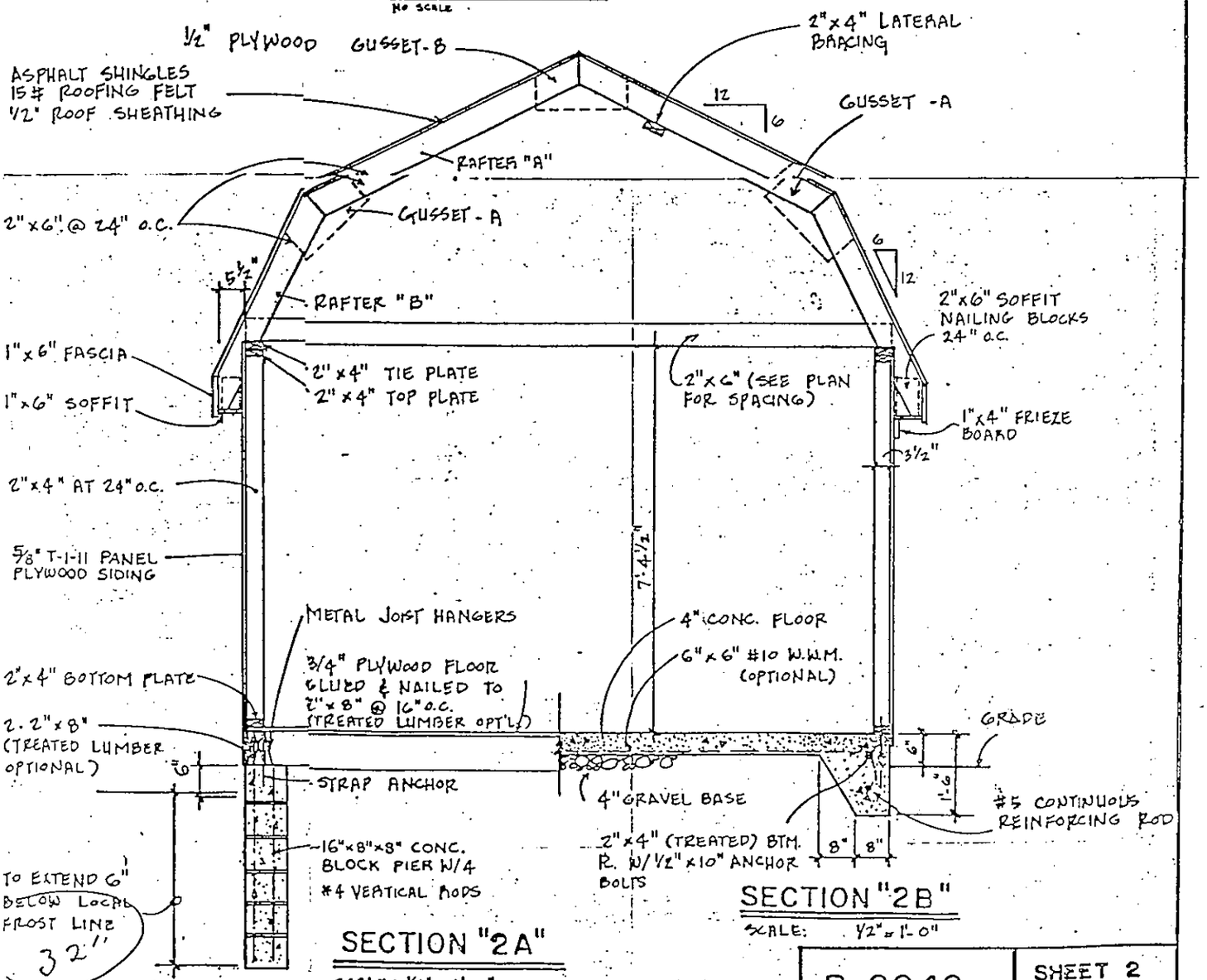


TIE DOWN KIT



SHED ISOMETRIC

NO SCALE



SECTION "2A"

SCALE: 1/2" = 1'-0"

SECTION "2B"

SCALE: 1/2" = 1'-0"

9/85

B-2042

SHEET 2
TOTAL 5