

04271



Case 01

1. Proposed Work Site at: 619 IVANHOE RD.

2. Name of Owner in Fee: KAREN MIKE PROVINZANO Tel. [REDACTED]

Address 619 IVANHOE RD BRICK N.J. 08723

street municipality zip code

3. Ownership in Fee: Public Private

4. Principal Contractor: [Signature] Tel.

Address

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

Federal Employee No. FAX: ()

5. Architect or Engineer Tel. ()

Address

6. Responsible Person in Charge of Work

Tel. () FAX ()

Attached deck

See Notes

1. Building
2. Electrical
3. Plumbing
4. Fire Protection
5. Elevator Devices
6. Subtotal
7. Less 20% for
State Plan Review
8. Subtotal
9. DCA Training Fee
10. Subtotal
11. Cert. of Occupancy
12. Other
13. TOTAL

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. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____
 no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

1. ☐ Minor Work
2. ☐ New Building
3. ☐ Addition
4. ☐ Alteration
5. ☐ Fire Protection
6. ☐ Plumbing
7. ☐ Electrical
8. ☐ Elevator Devices
9. ☐ Asbestos Abat. Subch. 8
10. ☐ Lead Hazard Abatement
11. ☐ Demolition

TOTAL COSTS

OPTIONAL (for office use only)[illegible]

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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:

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

- C. ☐ I further certify that I will perform or supervise the following work:

C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical C.4. ☐ Plumbing

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

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

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

Signature

Date

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

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

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

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 06/30/2004
Control #
Permit # 04-2717

IDENTIFICATION Block 446.07 Lot 50.05

Sheet 1

Work Site Location 619 WYNNER RD

ATTACHED DECK

Owner in Fee PROVINCIAL, KAREN & MINE

Address SAME

BRICK, NJ 08723-

Telephone

Contractor HOMEOWNER
Address

Telephone ()

Lic. No. of Bldgs. Reg. No.

Federal Emp. No. NC-

Is hereby granted permission to perform the following work:

- ☐ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
- ☐ ELEVATOR SERVICES ☐ ASBESTOS ABATEMENT ☐ OTHER

(Subchapter 2 only)

DESCRIPTION OF WORK:

ATTACHED 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 \$900

Construction Official

06/30/2004

U.C.C. F170 (rev. 3/96) NJ DECS 5.24E

Date

PAYMENTS (Office Use Only)

Building	40
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	0
DCA State Permit Fee	1
Cert. of Occupancy	0
Other	0
Total	41
Check No.	1309
Cash	
Collected By	ERP

06/30/04 2:56PM 00153840728
#042717
BUILDING
DCA
ZPA
CHECK
\$40.00
\$1.00
\$15.00
\$56.00

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

DEC. NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 06/24/2004
Date Issued 6/30/04
Control # G24-01
Permit # 042717

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

Block 646.07 Lot 60.06 Qual
Work Site Location 619 IVANHOE RD

ATTACHED DECK

Owner in Fee PROVINZANO, KAREN & MIKE

Address SAME

BRICK, NJ 08723-

Tele

Contractor

Address

Tele () Fax ()

Lic. No. or Bldgs. Reg. No.

Federal Emp. No. NO-

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☒ All

☐ No Plans Req.

☐ Footing

☐ Foundation

☐ Frame

☐ Other

Joint Plan Review Required:

☐ Elect ☐ Plumb ☐ Fire

SUBCODE APPROVAL ☐ Elev

☐ CO ☐ CCO ☐ CA

Date:

Approved By:

INSPECTIONS

Type

Footing

Foundation

Slab

Frame

BarrierFree

Insulation

Finishes

Energy

Mechanical

TGO

Other

BarrierFree

Dates (Month/Day)

Failure Failure Approval Initial

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

Failure

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

ATTACHED DECK

Signature

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.

after 10/1/01
Deck no longer
Present # 07-249
Permit #

FEE (Office Use Only)

☐ New Building

☐ Addition

☒ Alteration

☐ Roofing

☐ Siding

☐ Fence

☐ Sign

☐ Pool

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☐ Other

☐ Demolition

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

B. BUILDING CHARACTERISTICS

Use Group Present U

Constr. Class Present

No. of Stories

Height of Structure

Area Largest Floor

New Bldg. Area/All Floors

Volume of New Structure

Total Land Area Disturbed

Proposed U

Proposed

0

0 Ft.

0 Sq. Ft.

0 Sq. Ft.

0 Cu. Ft.

0 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$

2. Alteration \$

3. Total (1+2) \$

800

800

800

800

800

Administrative Surcharge

Minimum Fee

TOTAL FEE

DCA State Permit Fee

FOOTING DEPTH

TECHNICAL SECTION
SUBCODE
BUILDING
UCC NEW JERSEY

Belmont # CS4-01
Control #
Date Issued /
Date Received 02/24/2004

2/23/07 W- Final Reg -

100420

- 2) Ledger requires proper support
- 3) Mechanical fastener reqd. (Foot to post)
- 4) Grippable handrail. Fixed -



NOTICE OF VIOLATION AND ORDER
TO TERMINATE

2-9-07
Permit Number
Date Issued
Violation Number V-07-00266

IDENTIFICATION

Work Site Location: 619 IVANHOE ROAD Brick Township, NJ
Block: 646.07 Lot: 60.06 Qualification Code: _____
Owner in Fee: OSTARTICKI, C & OSTERHOLZ, HEATHER
Owner Address: 619 IVANHOE RD BRICK NJ 08723
Agent/Contractor _____
Address _____
To: ☒ Owner ☐ Other:
☐ Agent/Contractor

DATE OF INSPECTION: _____ DATE OF THIS NOTICE: 01/26/2007

ACTION

Take NOTICE that you have been found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder in that:
no inspections done on this permit

You are hereby **ORDERED** to terminate the said violations on or before 02/26/2007.

No Certificate of Occupancy or Approval will be issued unless the said violations are corrected.

Further, take NOTICE that failure to comply with this **ORDER** may result in the assessment of penalties of up to \$500.00 per week per violation, and a certificate of occupancy will *not* be issued until such penalty has been paid.

If you wish to contest this **ORDER**, you may request a hearing before the Construction Board of Appeals of the County of Ocean within 15 days of receipt of this **ORDER** as provided by N.J.A.C. 5:23 A-2.1. The Application of the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your name and address, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of the relief sought by you. You may append any documents that you consider useful.

The fee for an appeal is \$100.00 and should be forwarded with your application to the Construction Board of Appeals Office at: CONSTRUCTION BOARD OF APPEALS
2 Mott Place
Toms River, NJ 08753

If you have any questions concerning this matter, please call: (732) 262-1027

NOTICE of Violation and **Order** to Terminate: _____

SubCode Official

Date: 1-26-07



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Construction Violation

Identification

Work Site Location: 619 IVANHOE ROAD Brick Township, NJ

Block: 646.07

Lot: 60.06

Owner: OSTARTICKI, C & OSTERHOLZ, HEATHER

Owner Address: 619 IVANHOE RD BRICK NJ 08723

Telephone:

Agent:

Agent Address:

Telephone:

Infraction Details

Subcode:

Issuing Officer: Frank Mizer

Issue Date:

Infraction: Notice of Violation and Order To Terminate

Statute: N.J.A.C. 5:23 Uniform Construction Code Regulations NJAC 5:23-2.18(c) Failure to Recieve Required Inspections

Infraction Summary: no inspections done on this permit

Certified Mail Number:

Enforcement Details

Inspection Date:

Notice Date: 01/26/2007

Compliance Date:

Compliance Inspection Date:

Compliance Summary:

LOT 53 / BLOCK 646 / VACANT

LOT 60.07
BLOCK 646.07
VACANT

LOT 60.05
BLOCK 646.07
VACANT

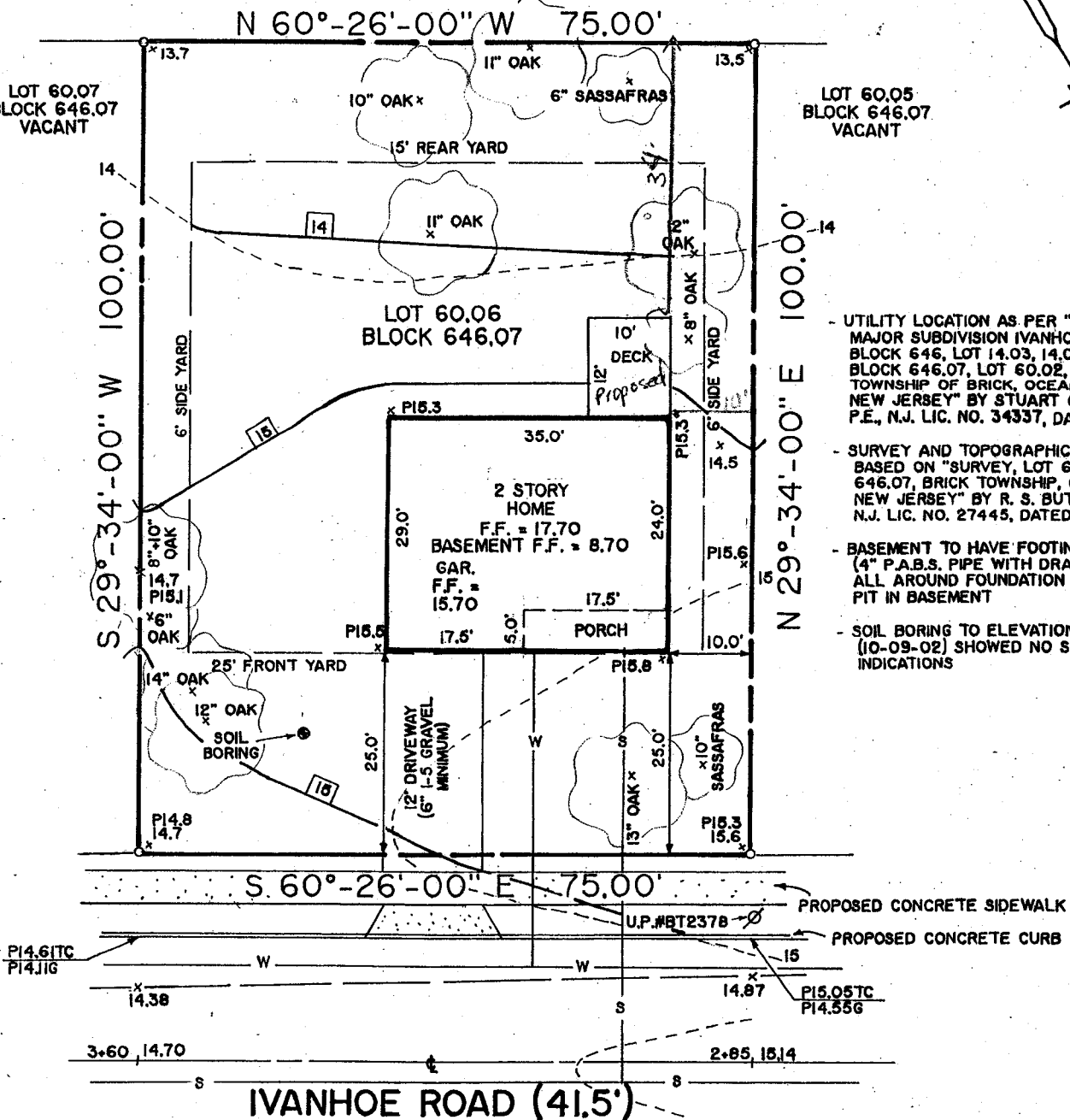
LOT 60.06
BLOCK 646.07

- UTILITY LOCATION AS PER "PRELIMINARY
MAJOR SUBDIVISION IVANHOE ROAD,
BLOCK 646, LOT 14.03, 14.04 & 53,
BLOCK 646.07, LOT 60.02, SITUATED IN
TOWNSHIP OF BRICK, OCEAN COUNTY,
NEW JERSEY" BY STUART C. CHALLONER,
P.E., N.J. LIC. NO. 34337, DATED 6-13-02

- SURVEY AND TOPOGRAPHICAL INFORMATION
BASED ON "SURVEY, LOT 60.06, BLOCK
646.07, BRICK TOWNSHIP, OCEAN COUNTY,
NEW JERSEY" BY R. S. BUTRYN P.E. & L.S.,
N.J. LIC. NO. 27445, DATED 10-23-02

- BASEMENT TO HAVE FOOTING DRAIN
(4" P.A.B.S. PIPE WITH DRAIN SOCK)
ALL AROUND FOUNDATION TIED TO SUMP
PIT IN BASEMENT

- SOIL BORING TO ELEVATION 4.50
(10-09-02) SHOWED NO S.H.W.L.
INDICATIONS



PLOT PLAN

LOT 60.06, BLOCK 646.07
BRICK TOWNSHIP
OCEAN COUNTY, NEW JERSEY

RICHARD S. BUTRYN

PROFESSIONAL ENGINEER & LAND SURVEYOR
749 SCHOOLHOUSE ROAD, BRICK, NEW JERSEY, 08724
(732) 836-9200, N.J., LICENCE # 27445

Richard S. Butryn

5-30-03

JOB No.	2174	DR. BY	U.R.
SCALE	1" = 20'	DATE	10-28-02

TOWNSHIP OF BRICK

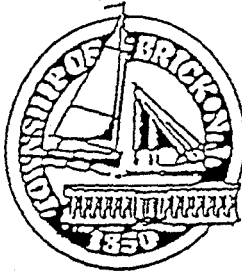
OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD - BRICK, NJ 08723

Joseph C. Scarpelli, Mayor

Township Council:

Steven M. Cucci — President
Stephen C. Acropolis
Kimberley S. Castan
Gregory S. Kavanagh
Kathy M. Russell
Tony A. Shupin
Frederick J. Underwood, Sr.



Department of Engineering

Office of the Municipal Engineer

(732) 262-1038

Fax: (732) 262-8954

<http://www.twp.brick.nj.us>

Date: 6.23.04

Township Engineer
401 Chambers Bridge Road
Brick, NJ 08723

Re: Block X 646 02 X Lot(s): 60.06

Property Address: X 619 IVANKE RD.

I X KAREN A PROVIZANO of X 619 IVANKE
(Name) (Address)

request to be exempted from the plot plan requirement for an addition as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

X [Signature]
(Applicant's Signature)

The following shall be submitted with this request:

1. Submit survey locating existing dwelling and proposed addition. Dimensions of addition should be included.
2. Proof that the property is not located in a Flood Hazard Area.

Note: Prior to approval, a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

For Office Use Only:

Approved: 6/28/04
(Date)

Signature: [Signature]

Rejected: _____
(Date)

Signature: _____

**Township of Brick
Zoning Permit**

Approved: Thursday, June 24, 2004 **Number:** 973

Block 646.07 **Lot** 60.06 **Zone:** R-7.5

Property Address: 619 Ivanhoe Road

Applicant: Karen Provinzano

Property Owner: Michael and Karen Provinzano

Existing Use: Single Family Residential

Proposed Use: Single Family Residential

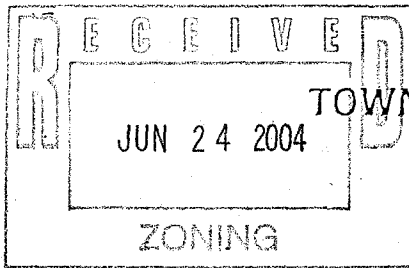
Proposed Construction: Attached deck 10' x 12', 2' 6" high.

Conditions: The deck must be set back at least 6 feet from the side property line and at least 15 feet from the rear property line.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.


Michael P. Fowler, AICP/PP
Municipal Planner


Sean Kinnevy
Zoning Officer



TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

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

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

BLOCK X 666.07 LOT X 60.06 QUALIFIER n/a
PROPERTY ADDRESS 619 IVANHOE RD BRICK, N.J. 08723
PERSONAL NAME OF APPLICANT KAREN PROVINZANO
BUSINESS NAME OF APPLICANT n/a
MAILING ADDRESS OF APPLICANT 619 IVANHOE RD
PROPERTY OWNER'S FULL NAME MICHAEL A. & KAREN A. PROVINZANO

PRESENT USE OF PROPERTY (check all that apply)

- ☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-family dwelling
☐ Commercial (please describe) _____

PROPOSED USE OF PROPERTY (check all that apply)

- ☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-dwelling
☐ Commercial (please describe) _____

PROPOSED CONSTRUCTION (check all that apply)

- ☐ New Building (please describe) _____ Height _____
☐ Addition - Height _____
☐ Alteration _____
☒ Porch or deck - Height 2' 6"
☐ Shed - Height _____
☐ Fence - Type _____ Height _____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) _____

CHECKLIST

- ☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ 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.

Note: No partial, taped, faxed,
reduced or enlarged copies
can be accepted.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT X [Signature] Date 6/23/04

Reviewed by Zoning Office _____ Date _____ () Approved () Denied

