BLOCK 851 LOT 6 QUALIFICATION CODE _____ ADDRESS (SITE) 1742 Forge Rd Rd Brick NJ. PERMIT NO. 09-1520

CONSTRUCTION PERMIT APPLICATION

09-4.001764

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

I. IDENTIFICATION

1. Propsed Work Site at: 1742 Forge Rd Rd. Brick NJ.
2. Name of Owner in Fee: GREG Pomanski Tel [redacted]
   Address 1742 (street) Forge Rd Rd (municipality) Brick (zip code) NJ.
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: GREG Pomanski Te [redacted]
   Address 1742 Forge Rd Rd Brick
   License No. OR, if new hom [redacted] Exp. Date _____
   Federal Employee No. X [redacted] FAX: ( ) _____
5. Architect or Engineer _____ Tel [redacted]
   Address DRAWING BY GREG. Pomanski Contact _____
6. Responsible Person in Charge once Work has Begun GREG Pomanski
   [redacted] FAX: ( ) _____

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$	40 ✓	
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review		7	
8.	Subtotal	$		
9.	State Permit Surcharge Fee			
10.	Subtotal	$		
11.	Cert. of Occupancy		25	
12.	Other EPTZP		60	
13.	TOTAL	$	132	

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	1
2.	Height of Structure ft.	12
3.	Area — Largest Floor sq. ft.	96
4.	New Building Area sq. ft.	96
5.	Volume of New Structure cu. ft.	1,100
6.	Construction Classification	5B
7.	Total Land Area Disturbed sq. ft.	100
8.	Flood Hazard Zone	X
9.	Base Flood Elevation ft.	N/A
10.	Wetlands yes	—
	no	
11.	Max. Live Load	40PSF
12.	Max. Occupancy Load	2

II. PROPOSED WORK

OPTIONAL (for office use only)

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work							6/17/09		
2.	☐ New Building				6/10					
3.	☒ Addition	7500	WP	5/21/09	6/10/09 AB					
4.	☐ a. Repair									
	☐ b. Alteration									
	☐ c. Renovation									
	☐ d. Reconstruction									
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☒ Electrical	50				6-25-9	AB			
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition	8000	Eng	6/9/09		6/10/09	AB			
	TOTAL COSTS									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use: RES. ADD.
2. Use Group: R5
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:

	All Units	Income-restricted
Before Construction	1	
After Construction	1	
Net Gain or Loss	0	

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

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
10. ☐ Swimming Pools, Spas and Hot Tubs

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. (X) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. (X) 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 E.S. Ponnucki Date 4/30/09

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 _____

Address _____

_____

Telephone (_____) _____

Signature _____

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

IMPORTANT

A.H.B.T. - MANDATORY FEE - RESIDENTIAL

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 12/11/2009
Control Number C-09-001704
Permit Number 09-1520
Permit Issue Date 06/26/2009
Certificate Number 09-1520

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 1742 FORGE POND RD. Brick Township, NJ Block: 851 Lot: 6 Qual:

Owner in Fee: POMARANSKI, GREG & EVA S

Owner Address: 1742 FORGE POND RD BRICK NJ 08724

Telephone: [redacted]

Contractor POMARANSKI, GREG & EVA S

Address 1742 FORGE POND RD BRICK NJ 08724

Telephone: [redacted] Fax:

License Number or Builder's Registration Number: Federal Emp. 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: RESIDENTIAL ADDITION SMALL ADDITION

Certificate Comments:

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

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

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

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

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

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

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

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

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

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

Construction Official

Fee: $35.00
Check Number: 1993
Collected By: Mary Jane Rinaldi

Date Printed: 12/11/2009 U.C.C. F260 (rev. 08/05)

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued: 6-26-09
Control #: C-09-001704
Permit #: 09-1[illegible]

IDENTIFICATION Block: 851 Lot: 6 Qualifier:

Work Site Location: 1742 FORGE POND RD. Brick Township, NJ

Contractor: POMARANSKI, GREG & EVA S
Address: 1742 FORGE POND RD BRICK NJ 08724

Owner in Fee: POMARANSKI, GREG & EVA S
1742 FORGE POND RD BRICK NJ 08724

Telephone: [redacted]

Lic. No. or [redacted] No.:

Federal Employee. No.:

Telephone: [redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

RESIDENTIAL ADDITION SMALL ADDITION

Note: If constuction 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 $8,500

Construction Official: [signature]

Date: 6-25-09

PAYMENTS (Office Use Only)	
Building	$40
Electrical	$40
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$3
CO Fee	$35.00
Other	$60
Total	$178
Check No.	1940
Cash	$0
Credit	$0
Collected By	

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

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

06/26/09 [illegible] 0015[illegible]1893
BUILDING 40.00
ELECTRIC 40.00
[illegible] .00
C/O 35.00
TPA 60.00
[illegible] 0.00

- [ ] 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.

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 09-1520

Date Issued / Permit # 6-26-09

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

Block 851 Lot 6 Qualification Code

Work Site Location 1742 Forge Road Rd. Buck Mt.

Owner in Fee: GREG Pomarolli

Tel. [redacted] e-mail

Address 1742 Forge Road Rd. Buck Mt. (street / municipality)

Contractor: GREG Pomarolli H.O. [redacted]

Address 1742 Forge Road Rd. Buck Mt. e-mail

Contractor License No. Spec E.S. Pomarolli Exp. Date

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

Federal Emp. ID No. [redacted] FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required 6-23-09

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 12-10-09
Approved by:

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type:				
Rough			8-25-09	
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			12-4-09	
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

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 and perform the work listed on this application.

E.S. Pomarolli
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Install 1 light 1 Switch 3 outlets

QTY.	SIZE	ITEMS	FEE (Office Use Only)
1		Lighting Fixtures	
3		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

NEW JERSEY UNIFORM CONSTRUCTION CODE

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control # 09-1520

Date Issued
Permit # 6-26-09

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

Block 851 Lot 6 Qualification Code
Work Site Location 1742 Forge Pond Rd.
Brick New Jersey
Owner in Fee GREG. Pomainville
Address 1742 Forge Pond Rd.
Brick New Jersey
Tel. [redacted]
Contractor GREG. Pomainville
Address 1742 Forge Pond Rd.
Brick. New Jersey.
Tel [redacted] FAX ( )
Contractor License No. or Builder Registration No. V E S. Pomainville
Federal Emp. No [redacted]

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.

X E S. Pomainville
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Small addition rear of Home.
See Plan, Drawn by. owner.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[X] Other	6/17/09	

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 12-11-09
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Footing			7-29-09	JM
Footing Bonding				
Foundation/OPEN DECK			*8-3-09	JM
~~Slab~~ OPEN DECK			8-4-09	JM
Frame			*10-2-09	
Truss Sys./Bracing				
Barrier-Free				
Insulation*	8-10-09			
Finishes -Base Layer				
Finishes -Final				
~~Energy~~ Sh *8 HVAC			8-17-09	JM
Mechanical				
TCO				
Other				
Final			12-8-09	JM
Barrier-Free				

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

FEE (Office Use Only)
$

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

B. BUILDING CHARACTERISTICS

	Present	Proposed
Use Group		
Constr. Class		
No. of Stories		1
Height of Structure		12' Ft.
Area — Largest Floor		96 Sq. Ft.
New Bldg. Area/All Floors		96 Sq. Ft.
Volume of New Structure		1152 Cu. Ft.
Total Land Area Disturbed		15000 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $ 8000
3. Total (1+ 2) $ 8000

U.C.C. F110 (rev. 07/03)

8-4-09 J.L.

*OPEN DECK NOT APPROVED

*TREATED SILL W/ SILL SEAL REQUIRED

8-10-09 J.L.

*FLOOR INSULATION MISSING VAPOR BARRIER (UNFACED)

8-11-09 J.L. *FLOOR INSULATION CHANGED TO KRAFT FACED.

8/14/09 MV SH Rej.

1) Nail top + Bottom plate every 6"
2) Hurricane clips to extend from top plate down to studs (sheathing does not reach uppermost top plate)

* 10-2-09 J.L.

FRAMING CHECKLIST REQUIRED

PERMIT # 09-1520 LOT: 6 BLOCK: 851

FRAMING CHECKLIST

Instructions: Builder or Builder's representative checks boxes marked 'B'. Building Inspector checks boxes marked 'I'. Responsible Person in Charge of Work signs, initials and dates in spaces provided. Building Inspector initials and dates in spaces provided.

NOTE: ALL ITEMS SHOULD BE AS SHOWN ON THE PLANS OR AS REQUIRED BY CODE.

A. BASEMENT OR CRAWL SPACE

1. ANCHORAGE:
   - BOLTS
     - SPACING
     - SIZE
   - STRAPS
     - SPACING (PER MANUFACTURER'S SPECS)
     - SIZE

2. SILL PLATES:
   - SIZE
   - GRADE, SPECIES
   - TREATMENT
   - LAPS
   - SILL SEALER
   - PROPER TREATMENT OVER FOUNDATION OPENINGS (BEARING OF JOIST)
   - TERMITE PROTECTION

3. BEAM POCKETS:
   - BEARING/SHIMS
   - TERMITE PROTECTION OR CLEARANCE

4. COLUMNS:
   - SIZED PER PLAN
   - ATTACHMENT/PLATES
   - SPACING/LOCATION
   - PAINT/COATING

B. FLOOR FRAMING AND FLOORING

1. BOX OR RIM JOIST, OR PERIMETER BAND JOIST:

1ST	2ND	3RD	FLOOR
			SIZE
			GRADE, SPECIES
			SINGLE OR DOUBLE
			PRE-ENGINEERED PER MANUFACTURER'S SPECS
			CANTILEVERS AS PER DESIGN

2. GIRDERS AND BEAMS:
   - SIZED PER PLAN
   - TYPE
   - GRADE, SPECIES
   - LOCATION AND RELATION TO THE PLAN
   - NAILING
   - ATTACHMENT SCHEDULE
   - BEARING
   - LAPPING

3. FLOOR JOIST:

1ST	2ND	3RD	FLOOR
			SIZED PER PLAN
			GRADE, SPECIES
			PRE-ENGINEERED COMPONENTS AS SPECIFIED
			BEARING
			NAILING
			BRIDGING
			CUTTING AND NOTCHING (AS PER CODE)
			POINT LOADS - SUPPORTED AS PER PLAN
			SPAN HANGERS
			HEADERS
			FRAMED OPENINGS

4. FLOORING, SHEATHING, OR DECKING:

1ST	2ND	3RD	FLOOR
			MATERIAL
			PANEL SPAN, THICKNESS

5. STAIR ATTACHMENT:

1ST	2ND	3RD	FLOOR
			BEARING
			NAILING

SPECIAL REQUIREMENTS
- EDGE BLOCKING (IF REQUIRED)
- GAPPING
- LAYOUT

I hereby certify that I inspected this building using this checklist and it conforms to the released plans and to the requirements of the Uniform Construction Code, N.J.A.C. 5:23.

Responsible Person in Charge of Work: _____ Date: 10/2/09

Building Inspector Initials: _____ Date: 10-2-09

U.C.C. F390-1 (01/06)

(COVER)

PERMIT # 09-1520 LOT: 6 BLOCK: 851

C. WALL FRAMING

1. EXTERIOR WALL FRAME:

1ST	2ND	3RD	FLOOR
☒	☑	B ☐	SIZE
☒	☑	B ☐	SPACE
☒	☑	B ☐	SPECIES AND GRADE
☒	☑	B ☐	CUTTING, NOTCHING, AND BORING
☒	☑	B ☐	HEADER SIZES
☒	☑	B ☐	JACK STUD BEARING
	TOP PLATES		
☒	☑	B ☐	NAILING
☒	☑	B ☐	LAPS
☒	☑	B ☐	RAFTER TIES
☒	☑	B ☐	HURRICANE STRAPS (AS REQUIRED)

2. INTERIOR LOAD-BEARING WALLS:

1ST	2ND	3RD	FLOOR
☒	☐	B ☐	SIZE
☒	☐	B ☐	SPACE
☒	☐	B ☐	LAYOUT - SUPPORT BELOW PER CODE
☒	☑	B ☐	SPECIES AND GRADE
☒	☑	B ☐	CUTTING, NOTCHING, AND BORING
B ☐	B ☐	B ☐	FIRE BLOCKING
☒	☑	B ☐	HEADER SIZES
☒	☑	B ☐	JACK STUD BEARING
	TOP PLATES		
☒	☑	B ☐	NAILING
☒	☑	B ☐	LAPS
B ☐	B ☐	B ☐	STRAPPING

3. INTERIOR NON-LOAD-BEARING WALLS:

1ST	2ND	3RD	FLOOR
B ☐	B ☐	B ☐	SIZE
B ☐	B ☐	B ☐	SPACE
B ☐	B ☐	B ☐	SPECIES AND GRADE
B ☐	B ☐	B ☐	CUTTING, NOTCHING, AND BORING
B ☐	B ☐	B ☐	FIRE BLOCKING
B ☐	B ☐	B ☐	HEADER SIZES
B ☐	B ☐	B ☐	TOP PLATE NAILING

D. ROOF FRAMING

1. TRUSS ROOF FRAMING (AS PER DESIGN):

APPROVED DOCUMENTS WHICH SHOW:

- ☒ ☑ LAYOUT PLANS
- B ☐ TRUSS MEMBERS
- ☒ ☑ CONNECTION SCHEDULE
- B ☐ PERMANENT BRACING DETAILS
- B ☐ DORMERS/ROOF STRUCTURES ON MANUFACTURER'S DRAWINGS
- B ☐ EQUIPMENT/APPLIANCES ON MANUFACTURER'S DRAWINGS
- ☒ ☑ LOCATION AS PER LAYOUT
- B ☐ ALIGNMENT
- ☒ ☑ BEARING
- ☒ ☑ SPACING
- ☒ ☑ CONNECTIONS TO BEARING POINTS
- ☒ ☑ NO CONNECTION TO NON-BEARING POINTS
- ☒ ☑ DAMAGE AND DEFECTS
- B ☐ ENGINEERED METHOD OF REPAIR

2. PERMANENT TRUSS-TO-TRUSS BRACING (AS PER DESIGN):

- B ☐ LAYOUT
- B ☐ SIZE
- B ☐ TYPE
- B ☐ NAILING
- B ☐ OVERLAP
- B ☐ TERMINATION
- B ☐ TRANSITION (I.E., CROSS) BRACING

3. GABLE END BRACING (AS PER DESIGN):

- ☒ ☑ LAYOUT
- ☒ ☑ SIZE
- ☒ ☑ TYPE
- ☒ ☑ NAILING
- ☒ ☑ OVERLAP
- ☒ ☑ TERMINATION

4. SOLID SAWN ROOF FRAMING:

- B ☐ SIZE
- B ☐ GRADES, SPECIES

LAYOUT

- B ☐ SPACING
- B ☐ SPAN
- B ☐ BEARING
- B ☐ FASTENING
- B ☐ DAMAGE CAUSED BY FASTENERS (RAFTERS NOT SPLIT BY TOENAILS)
- B ☐ CUTTING, NOTCHING, AND BORING
- B ☐ BRIDGING
- B ☐ RIDGE SIZE
- B ☐ HURRICANE TIES WHERE APPLICABLE

E. SHEATHING

1. SHEATHING - EXTERIOR WALLS:

MATERIAL

- ☒ ☐ PANEL SPAN, THICKNESS

SPECIAL REQUIREMENTS

- ☒ ☐ GAPPING
- B ☐ LAYOUT
- B ☐ CORNER BRACING (IF REQUIRED)

2. SHEATHING - ROOF:

MATERIAL

- ☒ ☑ PANEL SPAN, THICKNESS

SPECIAL REQUIREMENTS

- ☒ ☐ BLOCKING, EDGE (IF REQUIRED)
- B ☐ CLIPS (IF REQUIRED)
- B ☐ GAPPING
- B ☐ LAYOUT

SHEATHING, FRT - ROOF

- B ☐ FOUR FEET FROM FIREWALL
- B ☐ NONCORROSIVE FASTENERS

U.C.C. F390-2 (01/06)

Initials: Resp. Person in Charge of Work _____ Building Inspector _____

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 09-1520 09-1530

Date Issued
Permit # 6-26-09

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

Block 851 Lot 6 Qualification Code

Work Site Location 1742 Forge Pond Rd Rd
Birch Run

Owner in Fee: GREG Pomarolski

Tel. [redacted] e-mail

Address 1742 Forge Pond Rd Birch Run N.J.
street municipality zip code

Contractor: GREG Pomarolski H.O. Tel [redacted]

Address 1742 Forge Pond Rd e-mail

Contractor License No. (Spec E.S. Pomarolski) Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable) X E.S. Pomarolski

Federal Emp. ID No. [redacted] FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[X] No Plans Required 6-23-09

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

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 and perform the work listed on this application.

X E.S. Pomarolski
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Install 1 light + 1 Switch
3 outlets

QTY.	SIZE	ITEMS	FEE (Office Use Only)
1		Lighting Fixtures	
3		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 09-1520

Date Issued
Permit # 6-26-09

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

Block 851 Lot 6 Qualification Code

Work Site Location 1742 Forge Pond Rd Brick NJ

Owner in Fee: GREG Pomaski

Tel. [redacted] e-mail

Address 1742 Forge Pond Rd Brick NJ
street municipality

Contractor: GREG Pomaski H.O. Tel. [redacted]

Address 1742 Forge Pond Rd e-mail

Contractor License No. E.S. Pomaski Exp. Date

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

Federal Emp. ID No. [redacted] FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
No Plans Required	6-23-09	

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date:
Approved by:

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

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 and perform the work listed on this application.

E.S. Pomaski
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Install 1 light 1 Switch
3 outlets

QTY.	SIZE	ITEMS	FEE (Office Use Only)
1		Lighting Fixtures	
3		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

U.C.C. F120 (rev. 7/06) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

BUILDING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 09-1520

Date Issued
Permit # 6-26-09

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

Block 851 Lot 6 Qualification Code

Work Site Location 1742 Forge Pond Rd.
Brick New Jersey

Owner in Fee Greg Pomeroy

Address 1742 Forge Pond Rd.
Brick New Jersey

Tel. [redacted]

Contractor Greg Pomeroy

Address 1742 Forge Pond Rd.
Brick New Jersey

Tel. [redacted] FAX ( )

Contractor License No. G. S. Pomeroy

Federal Emp. No [redacted]

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[X] Other	6/17/09	CAK

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

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

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

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed
Constr. Class	Present	Proposed
No. of Stories	1	
Height of Structure	12'	Ft.
Area — Largest Floor	96	Sq. Ft.
New Bldg. Area/All Floors	96	Sq. Ft.
Volume of New Structure	8x12x12	Cu. Ft.
Total Land Area Disturbed	15000	Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $ 8000
3. Total (1+ 2) $ 8000

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.

G. S. Pomeroy
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Small addition rear of Home
See Plan, Drawn by Owner.

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

FEE (Office Use Only)
$ 1 00

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

U.C.C. F110 (rev. 07/03)

NEW JERSEY UNIFORM CONSTRUCTION CODE

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 09-1520
Control #
Date Issued 6-26-09
Permit #

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

Block ______ Lot 6 ______ Qualification Code ______
Work Site Location ______
Owner in Fee ______
Address ______
Tel. [redacted]
Contractor ______
Address ______
Tel. [redacted] FAX ( )
Contractor License No. or Builder Registration No. ______
Federal Emp. No [redacted]

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[X] Other	6/17/09	

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: ______
Approved by: ______

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

(Dates (Month/Day) apply to Failure, Failure, Approval, Initial columns)

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.
Total Land Area Disturbed ______ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ ______
2. Rehabilitation $ ______
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

See Plan Drawn by Owner

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

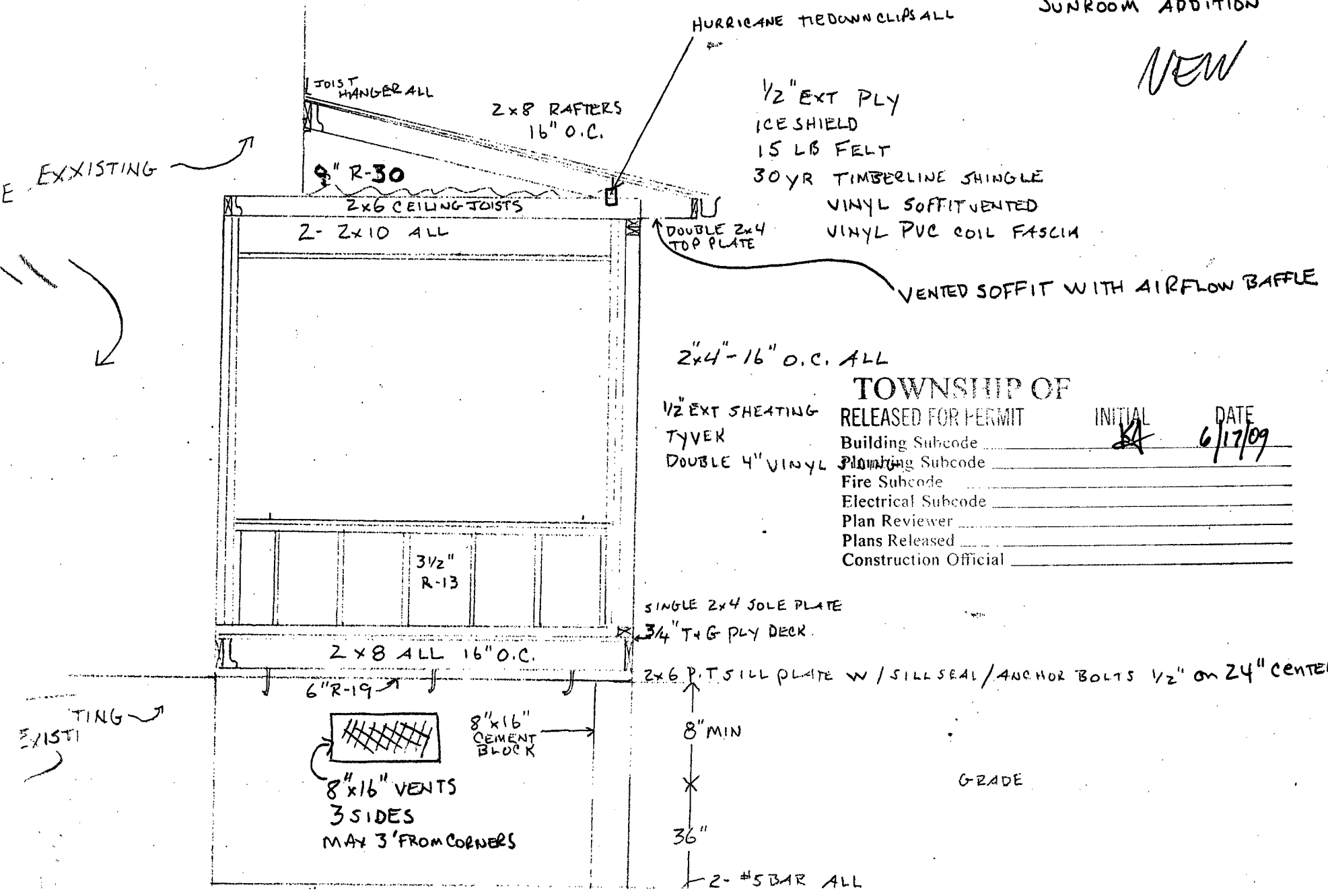
FEE (Office Use Only)
$ ______

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

U.C.C. F110 (rev. 07/03)

DRAWN BY C S Townsend
DATE 4/30/09
SUNROOM ADDITION

NEW

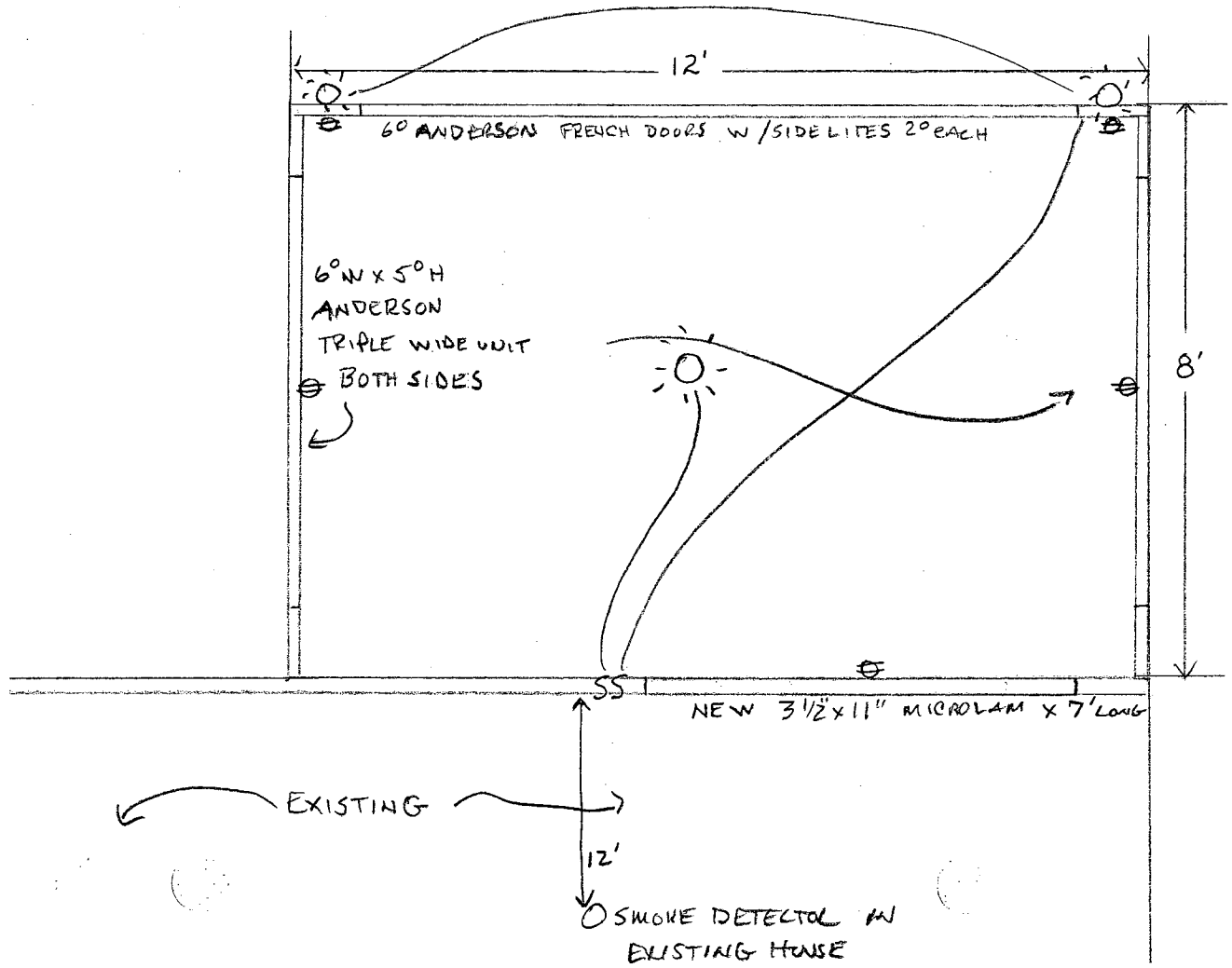


TOWNSHIP OF

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode	KA	6/17/09
Plumbing Subcode		
Fire Subcode		
Electrical Subcode		
Plan Reviewer		
Plans Released		
Construction Official		

TOP VIEW

DRAWN BY E.S. Pomeroy
DATE 4/30/09



APPROVED FOR ZONING
SEAN KINNEVY, ZONING OFFICER

MAY 28 2009

Township of Brick
Zoning Permit

Approved: Thursday, May 28, 2009 **Number:** 2009-391

Block 851 **Lot** 6 **Zone:** R-10

Property Address: 1742 Forge Pond Road

Applicant: Greg Pomaranski

Property Owner: Greg Pomaranski

Existing Use: Single Family Residential

Proposed Use: Single Family Residential

Proposed Construction: One story addition, 8' x 12', 12' high.

Conditions: The addition must be set back at least six (6) feet, 20 feet combined, from the side property lines, and at least 20 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
Administrative Officer

Sean Kinnevy, Zoning Officer
Zoning Reviewer

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.

RECEIVED
MAY 28 2009

BLOCK 257 LOT 6 QUALIFIER _____

PROPERTY ADDRESS 1742 FORGE POND RD

PERSONAL NAME OF APPLICANT GREG POMARANSKI

BUSINESS NAME OF APPLICANT _____

MAILING ADDRESS OF APPLICANT 1742 FORGE POND RD BRICK NJ 08724

PROPERTY OWNER'S FULL NAME GREG POMARANSKI

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 12'
☐ Alteration
☐ Porch or deck - Height _____
☐ 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 _____ Date 5/28/09

Reviewed by Zoning Office _____ Date 5/28/09 (X) Approved ( ) Denied

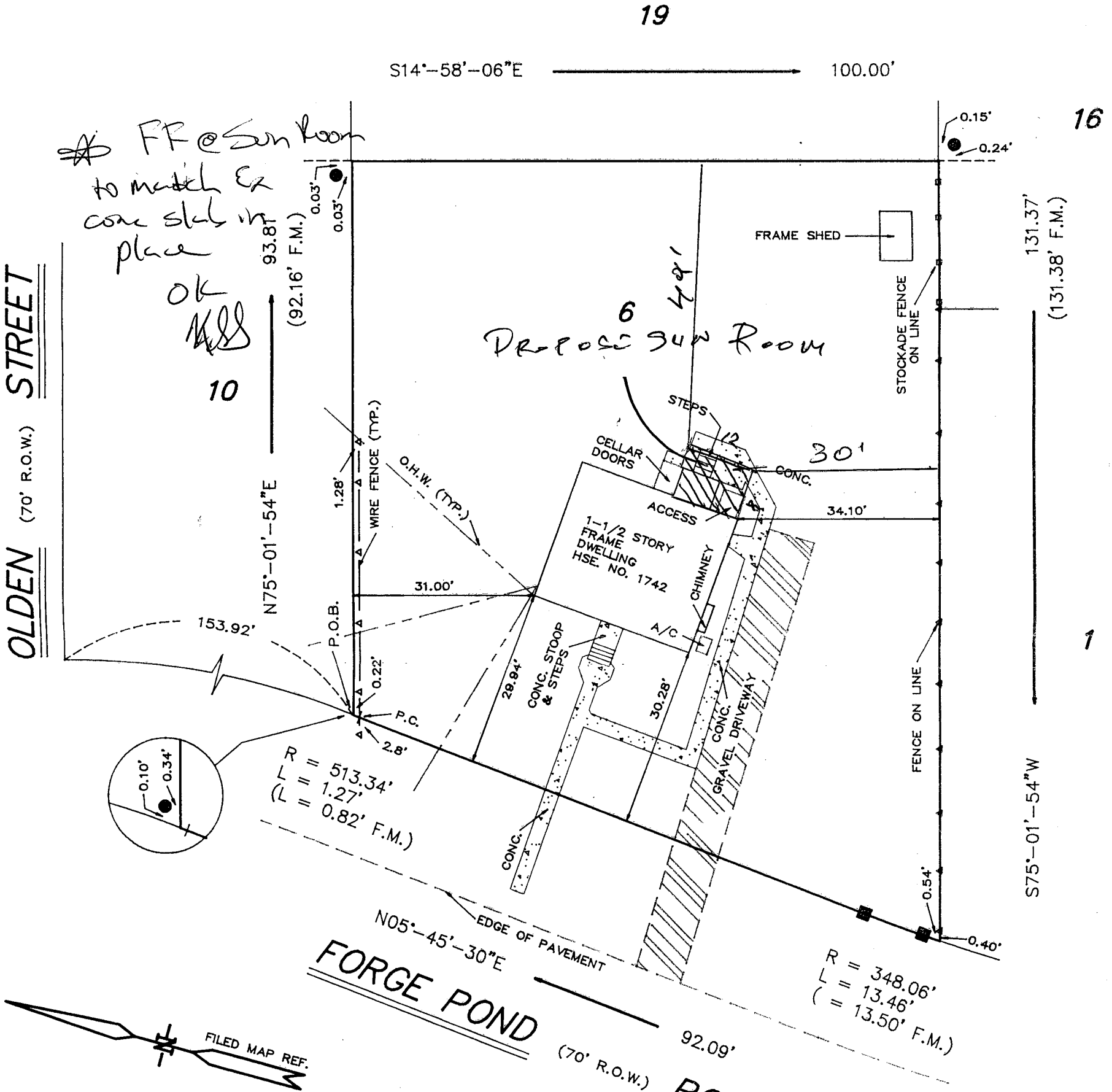
5/28/09

NOTES:
1. CONTRACTUAL AGREEMENT STATES THAT PROPERTY CORNERS ARE TO BE SET BY THIS SURVEY.
2. UNDERGROUND UTILITIES NOT LOCATED BY THIS SURVEY.
3. NO ATTEMPT WAS MADE TO DETERMINE IF ANY PORTION OF THIS PROPERTY IS CLAIMED BY THE STATE OF N.J. AS TIDELANDS.
4. DEED REFERENCE: BOOK , PAGE
5. ENVIRONMENTALLY SENSITIVE AREAS ARE NOT LOCATED BY THIS SURVEY
6. THIS SURVEY IS SUBJECT TO CONDITIONS WHICH AN ACCURATE TITLE SEARCH MIGHT DISCLOSE

Title Co. File No. TAC – 0077214

Job No. S– 15707

A.K.A. 1742 FORGE POND ROAD



LEGEND:

■ – MONUMENT FOUND

● – PIPE FOUND

CERTIFICATION:

IN CONSIDERATION OF FEE PAID I HEREBY CERTIFY THIS SURVEY WAS MADE UNDER MY IMMEDIATE SUPERVISION TO:

GREG POMARANSKI

TIDAL ABSTRACT COMPANY, INC. / STEWART TITLE GUARANTY COMPANY

CUCCI AND McCARTHY, ESQS.

LUMBERMENS MORTGAGE CORPORATION AND/OR SECRETARY OF HOUSING AND URBAN DEVELOPMENT OF WASHINGTON D.C. THEIR SUCCESSORS AND ASSIGNS AS THEIR INTEREST MAY APPEAR

APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER

MAY 28 2009

5/28/09

Map of Survey

LOT 6, BLOCK 851, TAX MAP, (SHEET NO. 45.01)
BRICK TOWNSHIP --- OCEAN COUNTY --- NEW JERSEY

A.K.A. LOTS 6, 7, 8 & 9, BLOCK 1, AS SHOWN ON A MAP ENTITLED "AMENDED MAP OF LAURELTON PARK WATERFRONT SECTION BRICK TOWNSHIP, OCEAN COUNTY." FILED MAY 13, 1947, AS MAP NO. F–179.

DELCO Land Surveying Corp.
109 West Island Road
Bayville, N.J. 08721
(908) 341–4200

SCALE	DATE
1" = 20'	7/9/97
DRAWN BY	SHEET
R.H.B.	1 OF 1

Bernard M. Collins
LICENSED LAND SURVEYOR N.J. LIC. NO. 29181
PROFESSIONAL PLANNER N.J. LIC. NO. 02863
DATE 7/9/97

RES*check* Software Version 4.0.1
Compliance Certificate

Project Title: POMARANSKI RESIDENCE

Report Date: 05/13/09

Data filename: C:\Program Files\Check\REScheck\POMARANSKI.rck

Energy Code:	**2006 IECC**
Location:	**Lakewood, New Jersey**
Construction Type:	**Single Family**
Conditioned Floor Area:	**96 ft2**
Glazing Area Percentage:	**49%**
Heating Degree Days:	**5294**
Climate Zone:	**4**

Construction Site:	Owner/Agent:	Designer/Contractor:
1742 Forge Pond Road Brick Township, NJ	Greg Pomaranski 1742 Forge Pond Road Brick Township, NJ	Greg Pomaranski 1742 Forge Pond Road Brick Township, NJ

Compliance: Passes on UA Maximum UA: 68 Your Home UA: 56 => 17.6% Better Than Code

Assembly	Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Glazing or Door U-Factor	UA
Ceiling 1: Flat Ceiling or Scissor Truss:	96	19.0	0.0		5
Wall 2: Wood Frame, 16" o.c.:	252	13.0	0.0		10
Window 1: Vinyl Frame:Double Pane: SHGC: 0.32	30			0.280	8
Window 2: Vinyl Frame:Double Pane: SHGC: 0.32	30			0.280	8
Door 1: Glass: SHGC: 0.24	39			0.310	12
Door 2: Glass: SHGC: 0.22	25			0.310	8
Floor 1: All-Wood Joist/Truss:Over Unconditioned Space:	96	19.0	0.0		5

Compliance Statement: The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the 2006 IECC requirements in RES*check* Version 4.0.1 and to comply with the mandatory requirements listed in the RES*check* Inspection Checklist.

Name - Title | Signature | Date

RES*check* Software Version 4.0.1
Inspection Checklist

Date: 05/13/09

Ceilings:

☐ Ceiling 1: Flat Ceiling or Scissor Truss, R-19.0 cavity insulation
Comments: _____

Above-Grade Walls:

☐ Wall 2: Wood Frame, 16" o.c., R-13.0 cavity insulation
Comments: _____

Windows:

☐ Window 1: Vinyl Frame:Double Pane, U-factor: 0.280
For windows without labeled U-factors, describe features:
#Panes ____ Frame Type _____ Thermal Break? ____ Yes ____ No
Comments: _____

☐ Window 2: Vinyl Frame:Double Pane, U-factor: 0.280
For windows without labeled U-factors, describe features:
#Panes ____ Frame Type _____ Thermal Break? ____ Yes ____ No
Comments: _____

Note: Up to 15 sq.ft. of glazed fenestration per dwelling is exempt from U-factor and SHGC requirements.

Doors:

☐ Door 1: Glass, U-factor: 0.310
Comments: _____

☐ Door 2: Glass, U-factor: 0.310
Comments: _____

Floors:

☐ Floor 1: All-Wood Joist/Truss:Over Unconditioned Space, R-19.0 cavity insulation
Comments: _____
Floor insulation is installed in permanent contact with the underside of the subfloor decking.

Air Leakage:

☐ Joints, penetrations, and all other such openings in the building envelope that are sources of air leakage are sealed.

☐ Recessed lights are either 1) Type IC rated with enclosures sealed/gasketed against leaks to the ceiling, or 2) Type IC rated and ASTM E283 labeled, or 3) installed inside an air-tight assembly with a 0.5" clearance from combustible materials and a 3" clearance from insulation.

Materials Identification:

☐ Materials and equipment are identified so that compliance can be determined.

☐ Manufacturer manuals for all installed heating and cooling equipment and service water heating equipment have been provided.

☐ Insulation R-values and glazing U-factors are clearly marked on the building plans or specifications.

☐ Insulation is installed according to manufacturer's instructions, in substantial contact with the surface being insulated, and in a manner that achieves the rated R-value without compressing the insulation.

Duct Insulation:

☐ Ducts in unconditioned spaces are insulated to R-8.

☐ Ducts in floor trusses are insulated to R-6.

Duct Construction:

- ☐ Air handlers, filter boxes, and duct connections to flanges of air distribution system equipment or sheet metal fittings are sealed and mechanically fastened.
- ☐ All joints, seams, and connections are made substantially airtight with tapes, gasketing, mastics (adhesives) or other approved closure systems. Tapes and mastics are rated UL 181A or UL 181B.
- ☐ Building framing cavities are not used as supply ducts.
- ☐ Automatic or gravity dampers are installed on all outdoor air intakes and exhausts.
- ☐ Additional requirements for tape sealing and metal duct crimping are included by an inspection for compliance with the International Mechanical Code.

Temperature Controls:

- ☐ Thermostats exist for each separate HVAC system. A manual or automatic means to partially restrict or shut off the heating and/or cooling input to each zone or floor is provided.

Heating and Cooling Equipment Sizing:

- ☐ Additional requirements for equipment sizing are included by an inspection for compliance with the International Mechanical Code.

Circulating Hot Water Systems:

- ☐ Circulating hot water pipes are insulated to R-2.
- ☐ Circulating hot water systems include an automatic or accessible manual switch to turn off the circulating pump when the system is not in use.

Heating and Cooling Piping Insulation:

- ☐ HVAC piping conveying fluids above 105 degrees F or chilled fluids below 55 degrees F are insulated to R-2.

Certificate:

- ☐ A permanent certificate is provided on or in the electrical distribution panel listing the predominant insulation R-values; window U-factors; type and efficiency of space-conditioning and water heating equipment.

NOTES TO FIELD: (Building Department Use Only)

2006 IECC Energy Efficiency Certificate

Insulation Rating	R-Value
Ceiling / Roof	19.00
Wall	13.00
Floor / Foundation	19.00
Ductwork (unconditioned spaces):	_____

Glass & Door Rating	U-Factor	SHGC
Window	0.28	0.32
Door	0.31	0.24

Heating & Cooling Equipment	Efficiency
Water Heater:_____	_____

Name: _____ Date: _____

Comments:

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Department of Community Development & Land Use
Division of Engineering

Office of the Municipal Engineer
732-262-1040
Fax: 732-262-8954
www.twp.brick.nj.us

Date: 5/4/09

ENGINEERING
PLOT PLAN EXEMPT FORM

Block: 851 Lot: 6

Property Address: 1742 Forge Rd Brick NJ

I, GREG Pomorski (name) of 1742 Forge AVE Brick, N.J (address)
request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

X G. Pomorski
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the 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 on: 6/2/09 Signed: KSS

Rejected on: _____ Signed: _____

Comments:

~~ID copy of home improvement contractor license~~

w/c done by Hargrove

ADDITION CHECK LIST

1. Construction jacket signed & completed	Yes ✓	No ____
2. Zoning application completed	Yes ✓	No ____
3. Engineering form completed	Yes ✓	No ____
4. Soil borings showing seasonal high water table required on any new basements	Yes ✓	No ____
5. Two true size surveys showing dimensions & setbacks of existing and proposed structures	Yes ✓	No X
6. Bldg/Plmg/Fire/Electrical subcode information completed	Yes ✓	No ____
7. Completed section VI on jacket –building characteristics	Yes ✓	No ____
8. Separate addn/alteration cost	Yes ____	No ____
9. Two sets of plans-architecturals signed and sealed homeowner drawings-all pages signed(existing & proposed floor plan)	Yes ✓	No ____
10. 2nd Story additions require engineer certification for foundation if the plans are not done by an architect	Yes ____	No ____
11. If using engineered floor joist(TJI) a joist layout showing blocking where applicable must be submitted with plans (also on jobsite with plans)	Yes ____	No ____
12. Energy Code compliance report REScheck (www.energycodes.gov)	Yes ✓	No ____
13. Manufacturer Brochures (Furnace, Boiler, A/C, Fireplace)	Yes ____	No ____
14. Gas pipe drawing if applicable	Yes ____	No ____
15. Drain Waste Vent schematic if applicable	Yes ____	No ____
16. List of Existing Plumbing Fixtures	Yes ____	No ____
17. Detail of all electrical locations (receptacles, switches, detectors, etc)	Yes ✓	No ____
18. Detail of existing & proposed smoke & carbon monoxide detectors.	Yes ✓	No ____
19. Completed debris form	Yes ____	No ____

Note: We are now using the International Building Code Effective May 6, 2003

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

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

RECEIVED
MAY 21 2009

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

BLOCK 851 LOT 6 QUALIFIER

PROPERTY ADDRESS 1742 Forge Rd Brick N.J

PERSONAL NAME OF APPLICANT GREG Pomarelli

BUSINESS NAME OF APPLICANT GREG Pomarelli

MAILING ADDRESS OF APPLICANT 1742 Forge Rd Brick. Nej. 08724

PROPERTY OWNER'S FULL NAME GREG Pomarelli

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) Addition To Rear Of Home Height (8')
☐ Addition - Height (12')
☐ Alteration
☐ Porch or deck - Height
☐ Shed - Height
☐ Fence - Type Height
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe)

See Drawings

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 Date 5/13/09

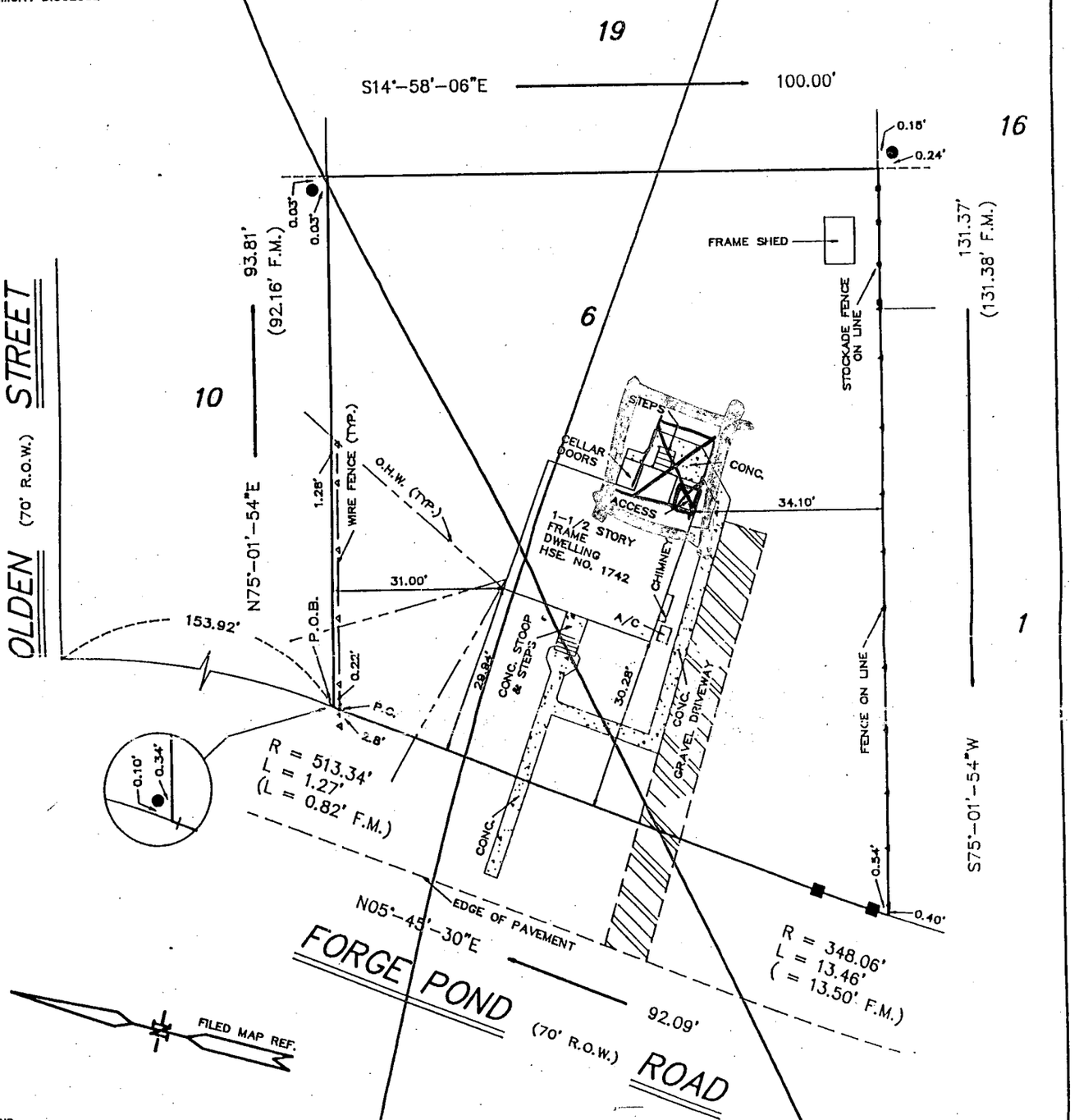
Reviewed by Zoning Office Date 5/20/9 ( ) Approved (X) Denied

Job No. S– 15707

Title Co. File No. TAC – 0077214

NOTES:
1. CONTRACTUAL AGREEMENT STATES THAT PROPERTY CORNERS ARE TO BE SET BY THIS SURVEY.
2. UNDERGROUND UTILITIES NOT LOCATED BY THIS SURVEY.
3. NO ATTEMPT WAS MADE TO DETERMINE IF ANY PORTION OF THIS PROPERTY IS CLAIMED BY THE STATE OF N.J. AS TIDELANDS.
4. DEED REFERENCE: BOOK . PAGE
5. ENVIRONMENTALLY SENSITIVE AREAS ARE NOT LOCATED BY THIS SURVEY
6. THIS SURVEY IS SUBJECT TO CONDITIONS WHICH AN ACCURATE TITLE SEARCH MIGHT DISCLOSE

A.K.A. 1742 FORGE POND ROAD



LEGEND:

■ – MONUMENT FOUND

● – PIPE FOUND

CERTIFICATION:

IN CONSIDERATION OF FEE PAID I HEREBY CERTIFY THIS SURVEY WAS MADE UNDER MY IMMEDIATE SUPERVISION TO:

GREG POMARANSKI

TIDAL ABSTRACT COMPANY, INC. / STEWART TITLE GUARANTY COMPANY

CUCCI AND McCARTHY, ESQS.

LUMBERMENS MORTGAGE CORPORATION AND/OR SECRETARY OF HOUSING AND URBAN DEVELOPMENT OF WASHINGTON D.C. THEIR SUCCESSORS AND ASSIGNS AS THEIR INTEREST MAY APPEAR

Map of Survey

LOT 6, BLOCK 851, TAX MAP, (SHEET NO. 45.01)
BRICK TOWNSHIP --- OCEAN COUNTY --- NEW JERSEY

A.K.A. LOTS 6, 7, 8 & 9, BLOCK 1, AS SHOWN ON A MAP ENTITLED "AMENDED MAP OF LAURELTON PARK WATERFRONT SECTION BRICK TOWNSHIP, OCEAN COUNTY." FILED MAY 13, 1947, AS MAP NO. F–179.

DELCO Land Surveying Corp.
109 West Island Road
Bayville, N.J. 08721
(908) 341–4200

SCALE	DATE
1" = 20'	7/9/97
DRAWN BY	SHEET
R.H.B.	1 OF 1

Bernard M. Collins
LICENSED LAND SURVEYOR N.J. LIC. NO. 29181
PROFESSIONAL PLANNER N.J. LIC. NO. 02863
DATE 7/9/97

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Department of Community Development & land Use
Division of Land Use & Planning

Office of Zoning

732-262-1041
732-262-1046
Fax: 732-262-8954
www.twp.brick.nj.us

May 26, 2009

Greg Pomaranski
1742 Forge Pond Road
Brick, NJ 08724

Re: Block 851, Lot 6
1742 Forge Pond Road
Zoning Permit Application

Dear Mr. Pomaranski:

Your zoning permit application cannot be approved because the application form is incomplete and inaccurate, as noted. Please meet with the Permit Clerk and submit a complete and accurate application form and two (2) copies of a survey map/plot plan showing all the required information.

Please feel free to contact this office for any additional information or assistance.

Very truly yours,

5/28/09 - Resubmit - Lot

Sean Kinnevy

Sean Kinnevy
Zoning Officer

C: James Priolo, Township Engineer
Michael Fowler, Principal Planner
Daniel Newman, Jr., Construction Official
Juan Bellu, Administration
Zoning Office File

311 ACCESS BRICK TOWNSHIP

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1027

06.12.09
GAVE CUSTOMER
1 COPY OF PLANS SO
ADJUSTMENT CAN BE
MADE

Subcode Official Review

To: 1742 FORGE POND RD BRICK, NJ 08724 CC:

RE: Building Subcode
Block: 851 Lot: 6 Qual:
1742 FORGE POND RD.
Permit Number: Control Number: C-09-001704
Last Submit Date: Tuesday, June 09, 2009

Date: Wednesday, June 10, 2009

Dear POMARANSKI, GREG & EVA S,

The following comments were made during the Plan Review process:

Indicate use of space.

Crawl vents, access to be shown. Venting min 3 sides, max 3' from corners.

R-30 ceiling.

Anchor bolt spacing per 115mph wind speed design.

Specify all framing connectors for 115mph wind speed design.

Attic/soffit ventilation.

06.12.09
FAX # 732-836-
1754

ATTN: GREG

Sincerely,

K Anderson 6/10/09

Kenneth Anderson, Subcode Official

06.12.09
CALLED
732-836-
1754

RESUBMIT
BLDG
6/15/09

06.12.09 NEW
FAX # 732-349
GAVE ME 2191
WORK # INSTEAD OF FAX #
732-864-
9102
FAX #

** Transmit Conf.Report **

P.1 Jun 12 2009 10:06

T.1.1	Check condition of remote fax.	7328361754

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1027

Subcode Official Review

To: 1742 FORGE POND RD BRICK, NJ 08724 CC:

RE: Building Subcode
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06: 12.09
fax # 732-836-1754
Attn: GREG

Sincerely,

K Anderson 6/10/09

Kenneth Anderson, Subcode Official

** Transmit Conf.Report **

P.1 Jun 12 2009 10:42

T.1.1	Check condition of remote fax.	7323492191

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1027

Subcode Official Review

To: 1742 FORGE POND RD BRICK, NJ 08724 CC:

RE: Building Subcode
Block: 851 Lot: 6 Qual:
1742 FORGE POND RD.
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Attic/soffit ventilation.

Sincerely,

K Anderson 6/10/09

Kenneth Anderson, Subcode Official

06.12.09
fax # 732-836-
1754

Attn: GREG

06.12.09
Called
732-836-
1754

Land Use/ Bldg Dept Fax:732-262-8954

**** Transmit Conf.Report ****

P.1 Jun 12 2009 10:41

Telephone Number	Mode	Start	Time	Page	Result	Note
7328649102	NORMAL	12,10:40	0'26"	1	* O K	

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1027

Subcode Official Review

To: 1742 FORGE POND RD BRICK, NJ 08724 CC:

RE: Building Subcode
Block: 851 Lot: 6 Qual:
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Sincerely,

Kenneth Anderson 6/10/09

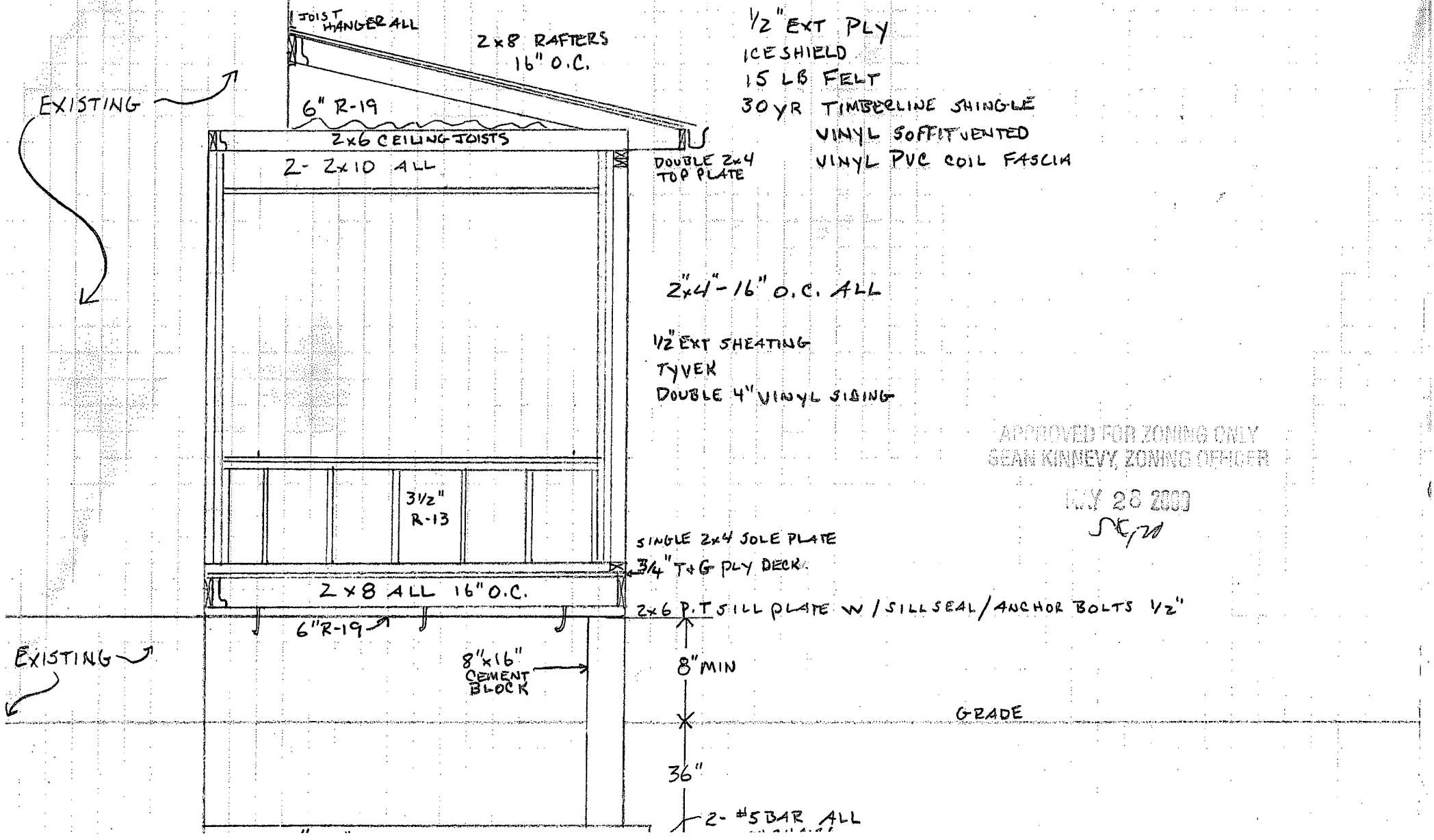
Kenneth Anderson, Subcode Official

06.12.09 fax # 732-836-1754

Attn: GREG

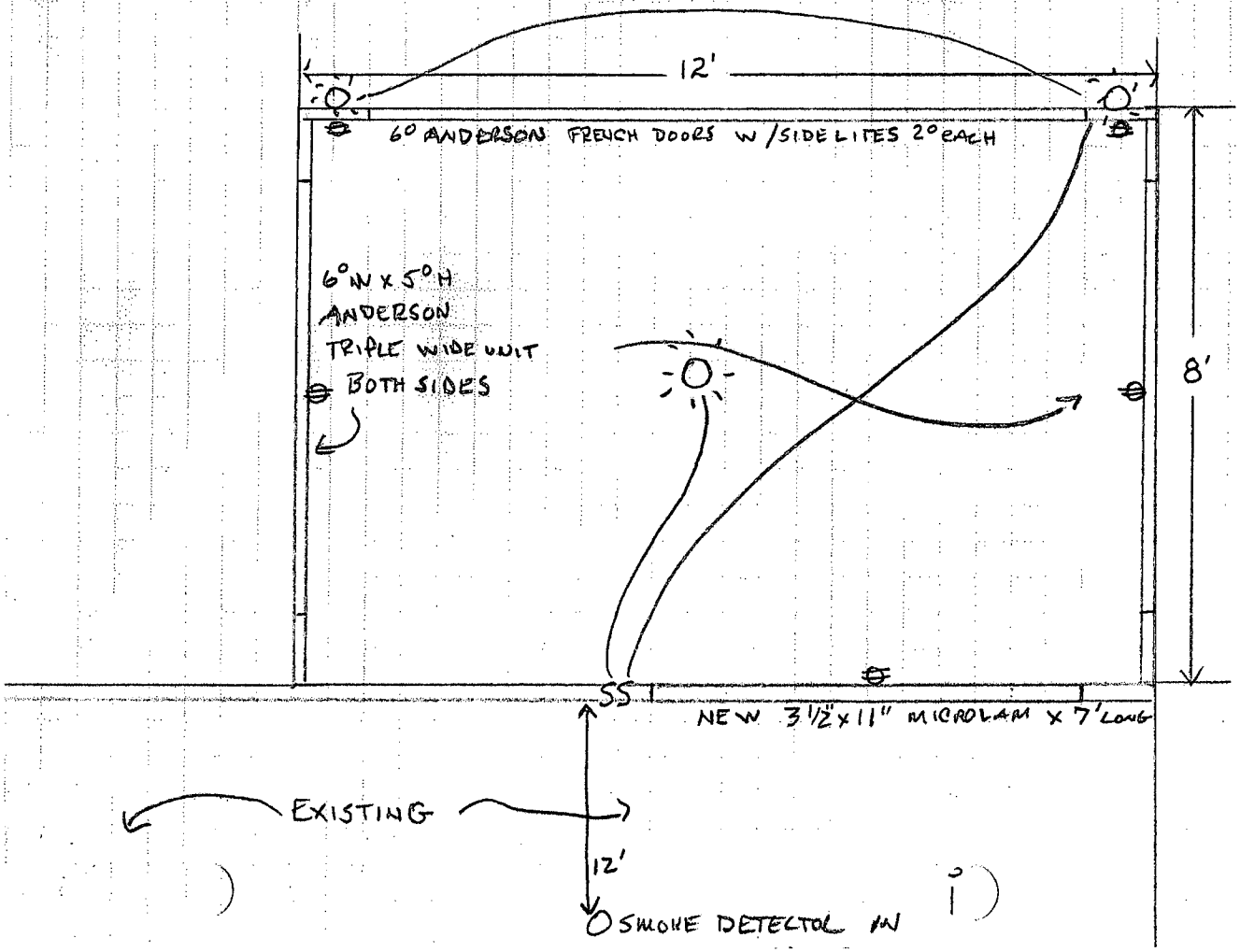
06.12.09 Called 732-836-1754

DRAWN BY E. S. Tommaldi
DATE 4/30/09



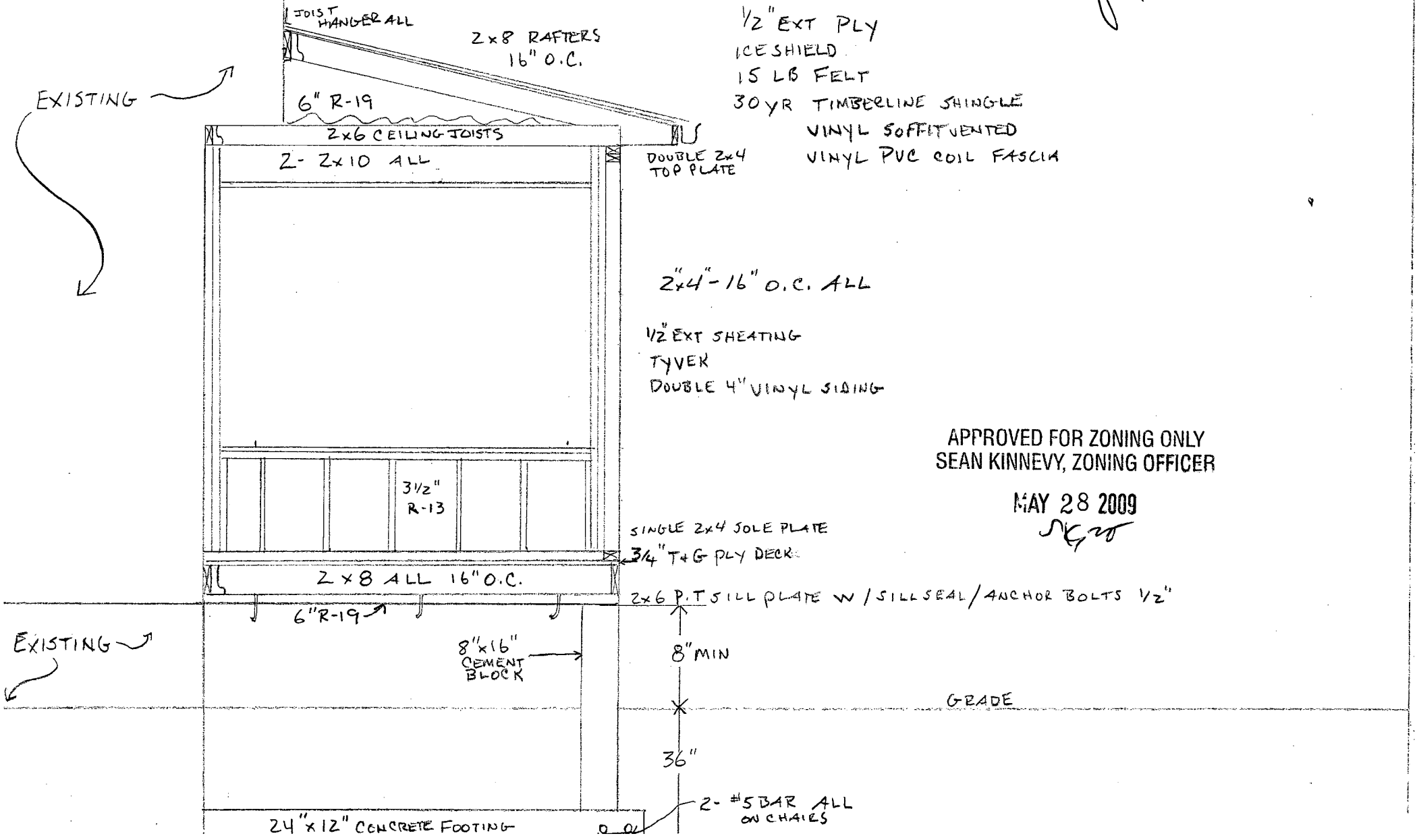
DRAWN BY E.S. Ponnecke
DATE 4/30/09

TOP VIEW



APPROVED FOR ZONING ONLY
JAN KINNEY, ZONING OFFICER
JUL 28 2009

DRAWN BY C. S. Tomaselli
DATE 4/30/09



APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
MAY 28 2009