BLOCK 851 LOT 6 QUALIFICATION CODE C19-61 ADDRESS (SITE) 1742 Forge Pond Rd PERMIT NO. 98-4161

RECEIVED NOV 18 19

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Propsed Work Site at: 1742 Forge Pond Rd.
2. Name of Owner in Fee: GREG. POMARANSKI Tel [redacted]
   Address 1742 Forge Pond Rd. Brick NJ 08724
   street municipality zip code
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Jersey Shore Fence Co. Tel. (732) 341-2001
   Address 2199 Route 9 Toms River, NJ 08755
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 22-2037982 FAX: (_____) _____
5. Architect or Engineer _____ Tel. (_____) _____
   Address _____
6. Responsible Person in Charge of Work _____
   Tel. (_____) _____ FAX (_____) _____

Fun 10

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 47.-		
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	1.-		
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other ~~2BA~~			
13.	TOTAL	$ ~~48~~ 48.		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	
2.	Height of Structure ft.	
3.	Area — Largest Floor sq. ft.	
4.	New Building Area sq. ft.	
5.	Volume of New Structure cu. ft.	
6.	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	

II. PROPOSED WORK

		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									
2.	☐ New Building		LWS	11-18-98		11/30/98	JKG	1/14/2000		DL
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		Env	11/25/98		11/25/98	JK			
	TOTAL COSTS	1445								

OPTIONAL (for office use only)

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:

LDS BR 10103511

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.

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 _____ Home Owner

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

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 ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

0084 12/02/98 NO. 5 0035A005 16:35
4161**
BLOCK 851 # 0.00
LOT 6 # 0.00
BUILDING 47.00
D.C.A. 1.00
ZONEPLOT 15.00
TOTAL 63.00
CHECK 63.00
CHANGE 0.00

Date Issued 12/02/98
Control #
Permit # 98-4161

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 851 Lot 6 Qual

Work Site Location 1742 FORGE POND RD
FENCE
Owner in Fee POMARANSKI, GREG
Address SAME
BRICK, NJ 08724-
Telephone [redacted]

Contractor JERSEY SHORE FENCE CO
Address 2199 RT 9
TOMS RIVER, NJ 08755-
Telephone (732)341-2001
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2037982

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
6' SOLID, SINGLE CONCAVE FENCE

PAYMENTS (Office Use Only)

Building	47
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	1
Cert. of Occupancy	0
Other ZPA	15
Total	63 — 48
Check No.	263
Cash	
Collected By	TL

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 1,495

J Ciuma 12/2/98
Construction Official

12/02/98
Date

U.C.C. P170 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 11/18/98
Date Issued 12/2/98
Control # C19-61
Permit # 98-416

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 Qual
Work Site Location 1742 FORGE POND RD
FENCE
Owner in Fee POMARANSKI, GREG
Address SAME
BRICK, NJ 08724-
Tele [redacted]
Contractor JERSEY SHORE FENCE CO
Address 2199 RT 9
TOMS RIVER, NJ 08755-
Tele.(732)341-2001 Fax (__)
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2037982

X AS PER ZONING CONDITIONS

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

6' SOLID, SINGLE CONCAVE FENCE

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	11/30/98	JKG
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
[ ] Elev
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			11/14/2000	JKG
BarrierFree				

TYPE OF WORK — FEE (Office Use Only)

[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	47
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 1,495
3. Total (1+2)$ 1,495

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 47
DCA Training Fee	$ 1

Paid [ ] Check #
Collected by:

U.C.C. F110 (rev. 3/96)

TOWNSHIP OF BRICK

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

Department of Administration & Finan

Division of Inspections
Joseph Curiazza
Construction Official
(732) 262-1024
Fax (732) 262-8954
http://www.gbshost.com/brick

Date: 11/17/98

Municipal Engineer
401 Chambers Bridge Rd
Brick, N.J. 08723

RE: Block: 851 Lot: 6

I, GREG POMARANSKI (name) of 1742 FORGE POND RD BRICK (address)

request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book , Chapter 190.31, part B. The property (please circle one) is /is not located in a flood zone.

Respectfully yours,

applicant's signature

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.

2. Proof that the property is not located in a Flood Hazard Area.

Note: Any excavations to be removed from the Township requires a mining permit.

OFFICE USE

Approved X Date: 11/25/98 By:

Rejected Date: _____ By: _____

Remarks: _____

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: November 20, 1998 1998 - 1877

Block 851 Lot 6 Zone R-10

Property Address: 1742 Forge Pond Road

Owner: Greg Pomaranski (Phone): [redacted]

Applicant: Greg Pomaranski (Phone): [redacted]

Existing Use: Single family dwelling

Proposed Use: Single family dwelling

Proposed Construction (if any): 6' high wood convex fence

Conditions: The fence must be set back at least 30' from the front property line.

The finished side of the fence must face the exterior of the lot.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which 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)

BLOCK 851 LOT 6

PROPERTY ADDRESS 1742 FORGE POND RD

NAME OF OWNER GREG POMARANSKI OWNER'S PHONE [redacted]

NAME OF APPLICANT GREG POMARANSKI

APPLICANT'S COMPLETE ADDRESS 1742 FORGE POND RD BRICK NJ 08724

APPLICANT'S PHONE NUMBER [redacted] APPLICANT'S BUSINESS NAME JOE RYAN

PRESENT USE OF PROPERTY (check one)

☐ Vacant Lot ☒ Single Family Dwelling ☐ Condo or Apartment

☐ Commercial (please describe) _____

☐ Other (please describe) _____

PROPOSED USE OF PROPERTY (check one)

☐ Vacant Lot ☒ Single Family Dwelling ☐ Condo or Apartment

☐ Commercial (please describe) _____

☐ Other (please describe) _____

PROPOSED CONSTRUCTION _____

All Dimensions _____ W _____ L _____ Ht

Deck or Garage ☐ Attached ☐ Detached

Fence Type WOOD Ht 6'

solid, single lattice

CHECKLIST:

☐ All information completed above

☐ Two (2) accurate Survey / Plot Plans containing:

- ☐ all existing and proposed structures
- ☐ all dimensions of lot and structures
- ☐ set backs to all property lines
- ☐ all streets and waterways shown

☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

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 G. Pomaranski Date 11/17/98

Reviewed by Zoning Officer Date 11/20/98 ☒ Approved ☐ Rejected

COUNTER FORM
PLEASE PRINT

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: 1742 Forge Pond RD. Date Rec'd.:
Block: 851 Lot: 6 Date Issued:
Owner in Fee: GREG DOMANSKI Control #:
Address: Permit #:
1742 FORGE POND RD. BRICK, NJ 08724
State: NJ Zip: 08724 Phon [redacted]
SS #: [redacted] Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature:

Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR: JERSEY SHORE FENCE COMPANY
ADDRESS: 2199 ROUTE 9
TOMS RIVER NJ 08755
PHONE: 732-341-2001
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #): 22-2037982

TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Erect 6' Wooden Fence
solid, single convex

TYPE OF WORK

☐ New Building
☐ Addition ☒ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories:
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature: G. Domanski

Estimated Cost of Building Work: #1495.00
New Building (1): $
Alteration (2): $
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM

PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR:

ADDRESS:

PHONE:

LIC. #: EXP. DATE:

FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

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

Estimated Cost of Electrical Work: $

Signature (print name):

Estimated Cost of Electrical Work: $

Signature (print name):

Owner ☐ Contractor ☐

SUBCODE APPROVAL:

PLANS: Required ☐ Approved ☐

Approved by:

Date:

CONTRACTOR AFFIX SEAL:

FIRE PROTECTION SUBCODE

CONTRACTOR:

ADDRESS:

PHONE:

LIC. #: EXP. DATE:

FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar

Heating Sys: ☐ New ☐ Existing

Location of Furnace / Boiler

Water Supply Source

Method of Valve Supervision

Local Alarm Supervision

Central Supervsion

Proprietary Supervision

Flammable Liquip Storage Tanks Capacity: Fuel:

Combustable Liquid Storage Tanks Capacity: Fuel:

L.G.P. Storage Tanks Capacity: Fuel:

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust Systems	
Pre-Engineered Systems	
Co2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance	
Other	
Other	

Estimated Cost of Fire Protection Work: $

Signature:

Owner ☐ Contractor ☐

SUBCODE APPROVAL:

PLANS: Required ☐ Approved ☐

Approved by: