

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 Gloria Beatty Date 8/20/01

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 _____

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.									
☐									
☐									

IMPORTANT
A.H.B.T. - EXEMPT

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	
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 CHANDLER BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 08/31/2001
Control #
Permit # 01-3217

IDENTIFICATION Block 051 Lot 10 Coal

Cont Site Location 1740 FORCE ROAD RD

FEED

Contractor H O H E O U H E D

Owner in Fee BRADY, GREGORY J

Address

Address SONE

Telephone ()

Telephone

Lic. Co. or Bldgs. Reg. Co.

Telephone

Federal Emp. Co. No.

Is hereby granted permission to perform the following work:

- ☒ BOILERWORK ☐ PLUMBING ☐ LEAD (PAINT REMOVAL)
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DETECTION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Schedule B only)
- DESCRIPTION OF WORK:
6' STEELCASE FEED

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 \$ 1,200

Michael J. ...
Construction Official

08/31/2001

U.C.C. F110 (rev. 1/96)

Date

PAYMENTS (Office Use Only)

Building \$
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
OTA Training Fee 1
Cert. of Occupancy 0
Other *perm 15*
Total \$ 1,215
Check No. *2001-001*
Cash *2001-001*
Collected By *...*

\$24.00
\$24.00
\$15.00
\$1.00
\$8.00

08/31/01 7:43AM 000000016520
**01 SERV.001

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/20/2001
Date Issued 8/30/1
Control # C26-51
Permit # 013217

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

Block 851 Lot 10 Qual
Work Site Location 1740 FORGE POND RD
FENCE

Owner in fee BEATTY, GLORIA J

Address SAME

BRICK NJ 08724-

Tele. ()

Contractor

Address

Tele. () Fax ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. HQ-

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' STOCKADE FENCE

30' From Front Property line

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plans Req. *8/20/01*

☒ All

☐ Footing

☐ Foundation

☐ Frame

☐ Other

Joint Plan Review Required:

☐ Elect ☐ Plumb ☐ fire

SUBCODE APPROVAL ☐ Elev

☐ CO ☐ CCO ☐ CA

Date: *8-30-02*

Approved by: *[Signature]*

INSPECTIONS

Type

Footing

Foundation

Slab

Frame

Barrierfree

Insulation

Finishes

Energy

Mechanical

TCO

Other

Final

Barrierfree

Dates (Month/Day)

Failure Failure Approval Initial

8. BUILDING CHARACTERISTICS

Use Group Present U 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 \$ 1,200

3. Total (1+2) \$ 1,200

Industrialized Building:

☐ State Approved

☐ HUD

FEE (Office Use Only)

\$

TOWNSHIP OF BRICK ZONING PERMIT

Approved: August 21, 2001

No. 1.1322

Block: 851 Lot: 10

Zone: R-10

Property Address: 1740 Forge Pond Road

Applicant: Gloria J. Beatty

Property Owner: Gloria J. Beatty

Existing Use: Single Family Residential

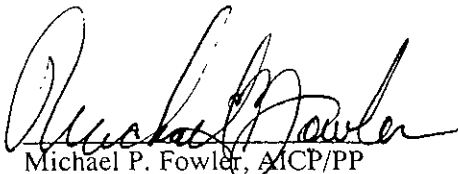
Proposed Use: Single Family Residential

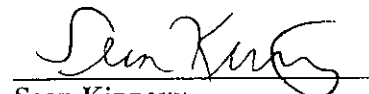
Proposed Construction: 6' high stockade fence.

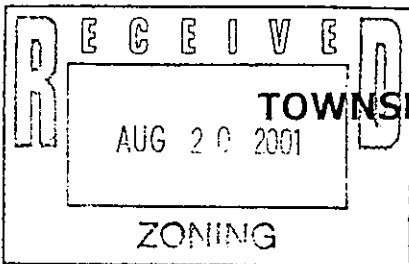
Conditions: The 6' high stockade fence must be set back at least 30 feet from the front property line. The finished side of the fence must face the exterior of the property.

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 851 Lot 10 Qualifier N/A

PROPERTY ADDRESS 1740 Forge Pond Rd.

PERSONAL NAME OF APPLICANT Gloria J. Beatty

BUSINESS NAME OF APPLICANT N/A

PROPERTY OWNER Gloria J. Beatty

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
☐ Alteration
☐ Porch or deck (state heights) _____
☐ Shed (state height) _____
☒ Fence (state type & height) Stockade 10 feet
☐ 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.

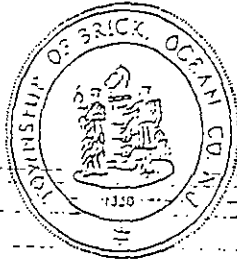
Signature of applicant Gloria Beatty Date 8/20/01

Reviewed by Zoning Office _____ Date 8/21/01 Approved ☒ Denied ☐

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723



Joseph C. Scarpelli, Mayor

Municipal Council:

Helen Fayad - President

Marion J. Anton

Victor Cantillo

Gregory S. Kavanagh

Mary Lou Powner

Kathy M. Russell

Frederick J. Underwood, Sr.

Department of Engineering

Office of the Municipal Engineer

(732) 262-1038

Fax: (732) 262-8954

<http://www.goshost.com/brick>

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

Date: 8/20/01

Township Engineer

401 Chambers Bridge Road

Brick, NJ 08723

RE:

Block: 851

Lot: 10

Property Address: 1740 Forge Pond Rd.

I Gloria J. Beatty

(name)

of

1740 Forge Pond Rd.

(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.

Gloria Beatty
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.

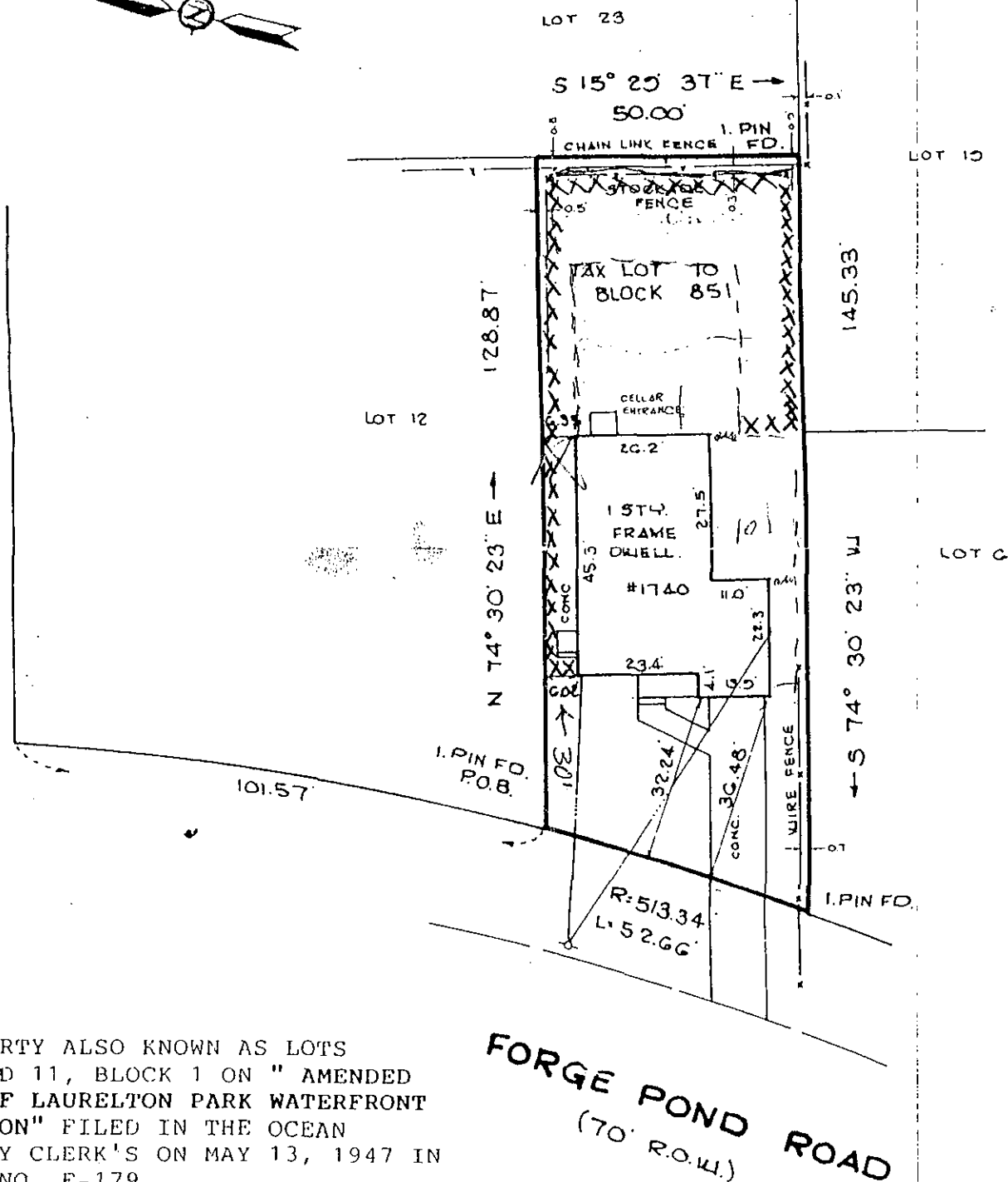
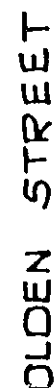
Note: Prior to approval, a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

OFFICE USE

Approved: 8/21/01

Signed: [Signature]

3/0



PROPERTY ALSO KNOWN AS LOTS
10 AND 11, BLOCK 1 ON " AMENDED
MAP OF LAURELTON PARK WATERFRONT
SECTION" FILED IN THE OCEAN
COUNTY CLERK'S ON MAY 13, 1947 IN
CASE NO. F-179.

SURVEY OF PROPERTY FOR GLORIA BEATTY

SITUATED IN TOWNSHIP OF BRICK OCEAN COUNTY NEW JERSEY

FILE NO. 2253

SCALE 1" = 30'

DATE 8-11-93

CERTIFIED TO:

Gloria Beatty, single;
Consumers Mortgage Corp., Its
Successors and/or Assigns;
Old Republic National Title
Insurance Company;
Alan M. Klatsky, Esquire

Thomas H. Stuart Jr
THOMAS H. STUART JR
PROFESSIONAL LAND SURVEYOR LIC NO. 18593

1223 NARRUMSON ROAD MANASQUAN, N.J.

201-528-6625

certification is made only to above named parties for purchase and/or
lease of herein delineated property by above named purchaser. No
liability or liability is assumed by Surveyor for use of survey for any other
purpose including, but not limited to use of survey for survey affidavit resale of
land, or to any other person not listed in certification either directly or indirectly.

Township of Brick

Counter Form
(PLEASE PRINT)

Site Location: 1740 Forge Pond Road
Block: 851 Lot: 10
Owner's Name: Gloria J. Beatty
Owner's Mailing Address: 1740 Forge Pond Rd.
Brick, NJ 08724
Phone: ()

BUILDING

Contractor: *[Signature]*
Address:
Phone#:
Lis #:
Federal Emp # or SSN

Technical Data

Description of Work:

6' Storkade

Type of Work

☐ New Building ☐ Siding
☐ Addition ☒ Fence
☐ Alteration ☐ Pool
☐ Roofing ☐ Demolition
☐ Asbestos Abatement ☐ Sign sq ft

Building Characteristics

Use Group Present: Proposed:
No of Stories:
Height of Structure:
Area of the largest floor:
Area of New Building:
Volume of Structure:
Total Land Disturbed:
Cost of Alteration:

Cost of New Building:

Total Cost of Building Work: \$ 1200.00

Signature: *Gloria Beatty*
Please Print Name Gloria J. Beatty

ELECTRICAL

Contractor:
Address:
Phone#:
Lis #:
Federal Emp # or SSN

Technical Data

Item	Quantity
Lighting Fixtures	<u> </u>
Receptacles	<u> </u>
Switches	<u> </u>
Detectors	<u> </u>
Light Poles	<u> </u>
Motors w/ Fract. HP	<u> </u>
Emergency & Exit Lights	<u> </u>
Communication Points	<u> </u>
Alarm Devices/FAC Panel	<u> </u>
Total	<u> </u>

Pool	<u> </u>
Spa/Hot Tub/Storable Pool	<u> </u>
Electric Range	<u> </u> KW
Oven/Surface Unit	<u> </u> KW
Electric Water Heater	<u> </u> KW
Electric Dryer	<u> </u> KW
Dishwasher	<u> </u> KW
Garbage Disposal	<u> </u> HP
A/C Unit - Central Air	<u> </u> KW
Space Heater/Air Handler	<u> </u> KW
Baseboard Heating	<u> </u> KW
Motors 1+ HP	<u> </u>
Transformer/Generator	<u> </u> KW
Light Stander	<u> </u> AMP
Service	<u> </u> AMP
Subpanel	<u> </u> AMP
Motor Control Center	<u> </u> AMP
Sign/Outline Light	<u> </u> KW
Furnace	<u> </u>
Steam Boiler	<u> </u>
Other:	<u> </u>

Estimated Cost of Electrical Work:

Signature:
Please Print Name

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor: _____
Address: _____

Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Fixtures	Quantity
Water Closets _____	
Urinals/Bidets _____	
Bath Tub _____	
Lavatory _____	
Shower _____	
Floor Drain _____	
Sink _____	
Dishwasher _____	
Drinking Fountain _____	
Washing Machine _____	
Hose Bib _____	
Gas Piping _____	
Fuel Oil Piping _____	
Water Heater _____	
Steam Boiler _____	
Hot Water Boiler _____	
Sewer Pump _____	
Interceptor/Separator _____	
Backflow Preventer _____	
Greasetrap _____	
Water Cooled A/C or Refrig. Unit _____	
Septic Tank Closure _____	
Sewer Service Connection _____	
Water Service Connection _____	
Active Solar System _____	
Auxiliary Meter _____	
Sprinkler Heads _____	
Sump Pump _____	
Other: _____	

Estimated Cost of Plumbing Work _____

Signature: _____

Please Print Name: _____

CONTRACTOR'S SEAL

FIRE

Contractor: _____
Address: _____

Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Description of Work:

Heating Type: _____ Gas _____ Oil _____ Electric _____ Solar _____
Heating System is _____ New _____ Existing _____
Location of Furnace/Boiler: _____

Water Supply Source _____
Method of Valve Supervision _____
Local Alarm Supervision _____
Central Supervision: _____
Proprietary Supervision: _____

Flammable Storage Tanks _____ capacity _____ fuel
Combustible Storage Tanks _____ capacity _____ fuel
LPG Storage Tanks _____ capacity _____ fuel

Item	Quantity
Wet Sprinkler Heads _____	
Dry Sprinkler Heads _____	
Total _____	

Smoke Detectors _____
Heat Detectors _____
Total _____

Stand Pipes _____
Kitchen Hood Exhaust System _____

Pre-Engineered Systems:

CO2 Suppression _____
Haloh Suppression _____
Foam Suppression _____
Dry Chemical _____
Wet Chemical _____

Gas/ Oil Fired Appliances:

Number of gas/oil fired appliances _____

Furnace _____
Gas/Wood Fireplace _____
Gas Logs _____
Wood Burning Stove _____
Other: _____

Estimated Cost of Fire Work _____

Signature: _____

Print Name: _____