BLOCK 851 LOT 12 QUALIFICATION CODE _____ ADDRESS (SITE) 1736 Forge Pond Rd. PERMIT NO. 04-0814

CONSTRUCTION PERMIT APPLICATION

COA · 18

Called 3/16/04

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

I. IDENTIFICATION

1. Propsed Work Site at: 1736 Forge Pond Rd.
2. Name of Owner in Fee: Knisti-Shaw Construction Tel. (732) 477-4665
   Address 63 Channel Dr Brick NJ 08723
   street municipality zip code
3. Ownership in Fee: Public ✓ Private _____
4. Principal Contractor: Knisti-Shaw Construction Tel. (732) 477-4665
   Address 63 Channel Dr Brick NJ 08723
   License No. OR, if new home, Builder Reg. No. 26379 Exp. Date 11/04
   Federal Employee No. 22-3528140 FAX: (732) 477-4665
5. Architect or Engineer Ken Kwiecinski Tel. (732) 295-4515
   Address 1100 Rt 88 Pt. Pleasant Contact Ken K
6. Responsible Person in Charge once Work has Begun Sam Reynolds
   Tel. (732) 477-4665 FAX: (732) 477-9115

NEW SINGLE FAMILY HOME
4 BR 2½ BATH
BASEMENT 1 CAR GARAGE

V. FEE SUMMARY (for office use only)

			Update 1A	Update 1B
1.	Building	$ 462		
2.	Electrical	113		75
3.	Plumbing	193	30	
4.	Fire Protection	173		
5.	Elevator Devices	23		
6.	Subtotal	$ 1000's		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	State Permit Fee Surcharge	49		
10.	Subtotal	$ 94		
11.	Cert. of Occupancy			
12.	Other	30		
13.	TOTAL	$ 1141	30	15

VI. BUILDING/SITE CHARACTERISTICS

			(office use only)
1.	Number of Stories	2	
2.	Height of Structure	25 ft.	
3.	Area — Largest Floor	240 sq. ft.	
4.	New Building Area	1845 sq. ft.	
5.	Volume of New Structure	16,492 cu. ft.	
6.	Construction Classification	5B	
7.	Total Land Area Disturbed	2200 sq. ft.	
8.	Flood Hazard Zone	C	
9.	Base Flood Elevation	ft.	
10.	Wetlands yes		
	no		
11.	Max. Live Load		
12.	Max. Occupancy Load		

OPTIONAL (for office use only)

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	50,000.00	RM	3/1/04		3/1/04	RM			
3.	☐ Addition									
4.	☐ a. Repair									
	☐ b. Alteration									
	☐ c. Renovation									
	☐ d. Reconstruction									
5.	☒ Fire Protection	500.00				3/15/04	JB			
6.	☒ Plumbing	3500.00				3/11/04				
7.	☒ Electrical	3000.00				3/16/04				
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition		EWC	3/11/04		3/11/04				
	TOTAL COSTS	57,000.00								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use:
2. Use Group: R-3C
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:
   Before Construction 1
   After Construction 1
   Net Gain or Loss 0

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group: ~~R-3~~
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

LDS BR 10400842

U.C.C. F100-1 (rev. 04/03)

4-25

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 KRISTI-SHAY CONSTRUCTION

Address 63 CHANNEL DR

BRICK NJ 08723

Telephone (732) 477-4465

Signature Saul Ryllo

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

Constituent Contact Report

Date	Comments	Initials

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 06/10/2004
Control #
Permit # 04-0814

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee/Occupant KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4661
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4665 Fax ( )
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

Home Warranty No. 165855
Type of Warranty Plan: [X] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

SF DWELLING/BASEMENT/1-CAR GARAGE

[X] 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 CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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 OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ___ or the owner will be subject to fine or order to vacate:

[ ] 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 _____, ___.

CONSTRUCTION OFFICIAL

Fee $ 94
Paid [X] Check No. 13690
Collected by: ERP

U.C.C. F260 (rev. 3/96) NJ OCCADS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 06/10/2004
Control #
Permit # 04-0814

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee/Occupant KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4661
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4665 Fax ( )
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

Home Warranty No. 165855
Type of Warranty Plan: [X] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

SF DWELLING/BASEMENT/1-CAR GARAGE

[X] 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 CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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 OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ___ or the owner will be subject to fine or order to vacate:

[ ] 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 _____, ___.

CONSTRUCTION OFFICIAL

Fee $ 94
Paid [X] Check No. 13690
Collected by: ERP

U.C.C. F260 (rev. 3/96) NJ UCCAOS 5.24E

TOWNSHIP OF LAKEWOOD
Department of Inspections
212 4th Street
LAKEWOOD, NJ 08701
(908) 364-3760

APPLICATION FOR CERTIFICATE

Date Received
Date Permit Issued
Control #
Permit #
Date Issued

IDENTIFICATION

Block 851 Lot 12
Work Site Location 1736 Pine Pond Rd

Owner in Fee KRISTI-SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK NJ
Tele. (732) 477-4665

Contractor KRISTI-SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK NJ 08723
Tele. (732) 477-4665
Lic. No. 26379
Federal Emp. No. 22-3528185180
or Social Security No.

ACTION

☒ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL
☐ CERTIFICATE OF CONTINUED OCCUPANCY ☐ TEMPORARY CERTIFICATE OF OCCUPANCY
USE GROUP _____ Previous _____ Current

FINAL COST OF CONSTRUCTION: $ _____
(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:

NEW SINGLE-FAMILY HOME

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: _____ OWNER/AGENT

☐ Owner
☒ Agent

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 03/18/2004
Control #
Permit # 04-0814

UCC NEW JERSEY

CONSTRUCTION PERMITE

IDENTIFICATION Block 851 Lot 12 Qual

Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4661

Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4665
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SF DWELLING/BASEMENT/1-CAR GARAGE

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 $ 57,000

Construction Official

03/18/2004
Date

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

PAYMENTS (Office Use Only)

Building	462
Electrical	113
Plumbing	195
Fire Protection	173
Elevator Devices	0
~~Other~~	2
DCA State Permit Fee	49
Cert. of Occupancy	94
~~Other~~ ZPA	15
Total	1,086
Check No.	13690
Cash	
Collected By	ERP

03/18/04 9:01AM 000000#7615
XX07 SERV.007

#040814	
BUILDING	$462.00
ELECTRIC	$113.00
PLUMBING	$195.00
FIRE	$173.00
MISC	$25.00
DCA	$49.00
C/O	$94.00
ZPA	$15.00
EPA	$15.00
CHECK	$1141.00

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 04/16/2004
Control 0
Permit 0 04-0814+B
Permit Issued 03/18/2004

UCC NEW JERSEY

PERMIT UPDATE

IDENTIFICATION Block 851 Lot 12 Qual

Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4661

Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Telephone (732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ADD'L ELEC

PAYMENTS (Office Use Only)

Building	0
Electrical	75
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	75
Check No.	1132
Cash	
Collected By	ERP

04/16/04 12:00PM 000000#8416
**07 SERV.007
#040814
ELECTRIC $75.00
CHECK $75.00

Estimated Cost of Work $ 6,100

Construction Official 04/16/2004 Date

U.C.C. F190 (rev. 3/96) NJ UCCARS 5.29E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

06/10/04 3:13PM 00155840130
XX03 SERV.003
$20.00
$20.00
$20.00
$0.00
#040814
PLUMBING
XXXTOTAL
CASH
CHANGE

UCC NEW JERSEY
PERMIT UPDATE

Update Issued 06/10/2004
Control #
Permit # 04-0814+A
Permit Issued 03/18/2004

IDENTIFICATION Block 851 Lot 12 Qual

Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Telephone (732)477-4661

Contractor BODE MECHANICAL
Address 312 HAYES AVE
BAYVILLE, NJ 08721-
Telephone (732)237-3300
Lic. No. or Bldrs. Reg. No. BIO 8957
Federal Emp. No. 22-3640638

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
HOSE BIBS

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	20
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	0
Cert. of Occupancy	0
Other	
Total	20
Check No.	
Cash	X
Collected By	SC

Estimated Cost of Work $ 50

Construction Official

06/10/2004
Date

B.C.C. F190 (rev. 3/96) NJ UCCARS 5.24E

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

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/8/04
Control # ~~C02-18~~
Permit # 04-C814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665 Fax ( )
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

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

SF DWELLING/BASEMENT/1-CAR GARAGE

As Built Foundation Survey Req

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	3-11-04	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] 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				
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[X] New Building	$ 462
[ ] Addition	0
[ ] Alteration	0
[ ] 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 R-5 Proposed R-5
Constr. Class Present Proposed
No. of Stories 2
Height of Structure 25 Ft.
Area Largest Floor 240 Sq. Ft.
New Bldg. Area/All Floors 1,845 Sq. Ft.
Volume of New Structure 18,492 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 50,000
2. Alteration $ 0
3. Total (1+2) $ 50,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 462
DCA State Permit Fee	$ 49

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

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

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/15/04
Control # ~~C02-18~~
Permit # 04-0314

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665 Fax (___)
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

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

SF DWELLING/BASEMENT/1-CAR GARAGE

As Built Foundation Survey Req

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	3.11.04	Tjf
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] 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				
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[X] New Building	$ 462
[ ] Addition	0
[ ] Alteration	0
[ ] 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 R-5	Proposed R-5	
Constr. Class	Present	Proposed	
No. of Stories	2		
Height of Structure	25	Ft.	
Area Largest Floor	240	Sq. Ft.	
New Bldg. Area/All Floors	1,845	Sq. Ft.	
Volume of New Structure	18,492	Cu. Ft.	
Total Land Area Disturbed	0	Sq. Ft.	

Est. Cost of Bldg. Work:
1. New Bldg. $ 50,000
2. Alteration $ 0
3. Total (1+2) $ 50,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 462
DCA State Permit Fee	$ 49

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

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

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/18/04
Control # ~~C02-18~~
Permit # 04-0814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/8ASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665 Fax ( )
Lic. No. or Bldrs. Reg. No. 26379
Federal Emp. No. 22-3528180

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

SF DWELLING/BASEMENT/1-CAR GARAGE

As Built Foundation Survey Req

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	3-11-04	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date: 6-17-04
Approved By: FM

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing			3-19-04	FM
Foundation			3-30-04	
Slab				
Frame	4-8	No Plans at	4/13/04	over
BarrierFree		No Roof Sh		
Insulation	4-16-04	mx		JKC
Finishes	4/21/04	over	6/7/04	
Energy	6-7-04	over.		
Mechanical				
TCO				
Other				
Final	N/A		6/16/04	JKC
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[X] New Building	$ 462
[ ] Addition	0
[ ] Alteration	0
[ ] 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 R-5 Proposed R-5
Constr. Class Present Proposed
No. of Stories 2
Height of Structure 25 Ft.
Area Largest Floor 240 Sq. Ft.
New Bldg. Area/All Floors 1,845 Sq. Ft.
Volume of New Structure 18,492 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 50,000
2. Alteration $ 0
3. Total (1+2) $ 50,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 462
DCA State Permit Fee	$ 49

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

4/13 - OK to insulate - pending TJI plan - changed from 21's JK

4-16-04 Ck Framing approval per ~~of~~ above also No ~~INS IN CENTER BAY~~ behind ~~Tub~~ ~~AND Shower NOT ALL The WAY DOWN~~ ~~ALL~~ JK
A ~~ND Shower NOT~~
AN~~D INS IN BOX IS IN BACKWARDS~~

4/20 no changes in Above

4/21/04 No FRAMING Approval JKG
Submitted FIRST Floor TJI LAYOUT ONLY Need 2ND

4/22/04 Floor TJI LAYOUT AND ReInspection on FRAME with LAYOUTS ON SITE per JC

4/27 - FRAME O.K. AS per ARCH letter in File) JK

6-7-04 ~~No plans on site Room in garage 8" x 7" Vent~~ Anti Tilt missing
~~Cover missing in half Bath~~
~~No Register Covers in one Bedroom~~, access Door in Closet to Attic over garage not Properly Done JKG
~~No Attic ACCESS cover To main attic~~
~~Doors Not All on. JK~~

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/18/04
Control # ~~602-18~~
Permit # 04/0314

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor ROBERT J MCLAUGHLIN ELEC CON
Address 12 8TH STREET
BARNEGAT, NJ 08005-
Tele.(609)660-0306
Lic. No. or Bldrs. Reg. No. 10990A
Federal Emp. No. 22-3451834

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 3,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 3/16/04
Approved By: MC

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
20		Lighting Fixtures	
50		Receptacles	
26		Switches	
6		Detectors	
0		Light Poles	
3		Motors-Fract HP	
0		Emergency & Exit Lights	
4		Communications Points	
0		Alarm Devices/F.A.C. Panel	
110		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
1	1	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	10	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	150	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge	$	0
Paid [ ] Check # Minimum Fee	$	0
Collected by: TOTAL FEE	$	113
DCA State Permit Fee	$	0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/18/04
Control # ~~C02-18~~
Permit # 04-0814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor ROBERT J MCLAUGHLIN ELEC CON
Address 12 8TH STRET
BARNEGAT, NJ 08005-
Tele.(609)660-0306
Lic. No. or Bldrs. Reg. No. 10990A
Federal Emp. No. 22-3451834

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 3,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 31604
Approved By: MC

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
20		Lighting Fixtures	
50		Receptacles	
26		Switches	
6		Detectors	
0		Light Poles	
3		Motors-Fract HP	
0		Energency & Exit Lights	
4		Communications Points	
0		Alarm Devices/F.A.C. Panel	
110		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
1	1	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	10	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	150	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 113
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 03/18/2004
Control #
Permit # 04-0814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

Check # 13690
Withdrawn
4-8-04

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 3,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By:

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

INSPECTIONS Type	Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
20		Lighting Fixtures	
50		Receptacles	
26		Switches	
6		Detectors	
0		Light Poles	
3		Motors-Fract HP	
0		Emergency & Exit Lights	
4		Communications Points	
0		Alarm Devices/F.A.C. Panel	
110		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
1	1	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	10	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	150	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

	Administrative Surcharge	$ 0
Paid [X] Check # 13690	Minimum Fee	$ 0
Collected by: ERP	TOTAL FEE	$ 113
	DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 03/18/2004
Control #
Permit # 04-0814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

Check Collected 4-8-04

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 3,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
20		Lighting Fixtures	
50		Receptacles	
26		Switches	
6		Detectors	
0		Light Poles	
3		Motors-Fract HP	
0		Emergency & Exit Lights	
4		Communications Points	
0		Alarm Devices/F.A.C. Panel	
110		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
1	1	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	10	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	150	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [X] Check # 13690 Minimum Fee $ 0
Collected by: ERP TOTAL FEE $ 113
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 03/18/2004
Control #
Permit # 04-0814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 3,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
20		Lighting Fixtures	
50		Receptacles	
26		Switches	
6		Detectors	
0		Light Poles	
3		Motors-Fract HP	
0		Emergency & Exit Lights	
4		Communications Points	
0		Alarm Devices/F.A.C. Panel	
110		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
1	1	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	10	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	150	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [X] Check # 13690 Minimum Fee $ 0
Collected by: ERP TOTAL FEE $ 113
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

* ATTACH TO PRIMARY PERMIT

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

C&C

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 04/08/2004
Date Issued ~~01/01/1954~~
Control # 4/16-04
Permit # 04-0814+B

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 6,100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[~~ ~~] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 4/14/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
2		Lighting Fixtures	
0		Receptacles	
3		Switches	
2		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
7		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 75
DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

* ATTACH TO PRIMARY PERMIT

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

C&C

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 04/08/2004
Date Issued 01/01/1954
Control # 4 16 04
Permit # 04-0814+B

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 6,100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[✓] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 4/14/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
2		Lighting Fixtures	
0		Receptacles	
3		Switches	
2		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
7		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge	$	0
Paid [ ] Check # Minimum Fee	$	0
Collected by: TOTAL FEE	$	75
DCA State Permit Fee	$	0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 03/18/2004
Control #
Permit # 04-0814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

Change of Contractor 4-8-04

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 3,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 6 CO 04
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			4804	MK
Temp Serv			4804	MK
Const Serv				
TCO				
Other				
Service				
Final	6-14-04	6 CO 04		MK

Temp. Cut-in-Card Date Issued 4804 MK
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
20		Lighting Fixtures	
50		Receptacles	
26		Switches	
6		*Detectors*	
0		Light Poles	
3		Motors-Fract HP	
0		Emergency & Exit Lights	
4		Communications Points	
0		Alarm Devices/F.A.C. Panel	
110		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
1	1	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	10	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	150	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge	$ 0
Paid [X] Check # 13690 Minimum Fee	$ 0
Collected by: ERP TOTAL FEE	$ 113
DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/18/04
Control # ~~C02-18~~
Permit # 04-0814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor ROBERT J MCLAUGHLIN ELEC CON
Address 12 8TH STREET
BARNEGAT, NJ 08005-
Tele.(609)660-0306
Lic. No. or Bldrs. Reg. No. 10990A
Federal Emp. No. 22-3451834

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 3,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 31604
Approved By: WL

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			4804	WW
Temp Serv			4804	WW
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued 4804 WW
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
20		Lighting Fixtures	
50		Receptacles	
26		Switches	
6		Detectors	
0		Light Poles	
3		Motors-Fract HP	
0		Emergency & Exit Lights	
4		Communications Points	
0		Alarm Devices/F.A.C. Panel	
110		TOTAL NUMBERS	55
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
1	1	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	10	KW Central A/C Unit	9
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	150	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 113
	DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

NJ UCCARS5.24E

* ATTACH TO PRIMARY PERMIT

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

C of C

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 04/08/2004
Date Issued ~~01/01/1954~~ 4-16-04
Control #
Permit # 04-0814+B

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor DICKSON ELECTRIC
Address 347 DRUM POINT RD
BRICK, NJ 08723-6838
Tele.(732)920-6441
Lic. No. or Bldrs. Reg. No. 8392
Federal Emp. No. 22-2707689

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 6,100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 4/14/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
2		Lighting Fixtures	
0		Receptacles	
3		Switches	
2		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
7		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	200	AMP Service	40
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 75
	DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

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

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/18/04
Control # ~~C02-18~~
Permit # 04-CX14

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3528180

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location: BASEMENT
Total Est Cost of Fire Prot Work $ 500

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[✓] Fire Plans Approved
Date: 3-15-04
Approved By: DJO

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	6	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices CO DECT	1	
TOTAL	7	35
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [X] or Oil [ ] Fired Appliances	2	92
Other FURNACE		46
Other		0

Administrative Surcharge	$	0
Paid [ ] Check # Minimum Fee	$	0
Collected by: TOTAL FEE	$	173
DCA State Permit Fee	$	0

U.C.C. F140 (rev. 3/96)

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

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/18/04
Control # ~~602-18~~
Permit # 04-014

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3528180

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location: BASEMENT
Total Est Cost of Fire Prot Work $ 500

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[✓] Fire Plans Approved
Date:
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	6	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices CO DECT	1	
TOTAL	7	35
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [X] or Oil [ ] Fired Appliances	2	92
Other FURNACE		46
Other		0

Administrative Surcharge	$	0
Paid [ ] Check # Minimum Fee	$	0
Collected by: TOTAL FEE	$	173
DCA State Permit Fee	$	0

U.C.C. F140 (rev. 3/96)

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

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/18/04
Control # ~~C02-18~~
Permit # 04-0814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor KRISTI SHAY CONSTRUCTION
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4665
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3528180

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location: BASEMENT
Total Est Cost of Fire Prot Work $ 500

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[X] Fire Plans Approved
Date: 3-15-04
Approved By: DB

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 6-8-04
Approved By: MB

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys	6-4-04		6-7-04	DB
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical			6-4-04	MB
Smoke Ctl				
TCO				
Final	6-4-04		6-7-04	DB
Other				

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:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks		FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System	NUMBER	
Alarm Devices(smoke,heat,pulls,water/flow)	6	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices CO DECT	1	
TOTAL	7	35
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [X] or Oil [ ] Fired Appliances	2	92
Other FURNACE		46
Other		0

Administrative Surcharge	$	0
Paid [ ] Check # Minimum Fee	$	0
Collected by: TOTAL FEE	$	173
DCA State Permit Fee	$	0

U.C.C. F140 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 03/18/2004
Control #
Permit # 04-0814

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

Block 851 Lot 12 Qual

Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT

CHANGE CONTRACTOR 4-8-04

Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor BODE MECHANICAL
Address 312 HAYES AVE
BAYVILLE, NJ 08721-
Tele.(732)237-3300
Lic. No. or Bldrs. Reg. No. BIO 8957
Federal Enp. No. 22-3640638

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 3,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb/Plans Approved
Date: 4/8/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	30
0	Urinal / Bidet	0
1	Bath Tub	10
3	Lavatory	30
1	Shower	10
0	Floor Drain	0
1	Sink	10
0	Dishwasher	0
0	Drinking Fountain	0
1	Washing Machine	10
0	Hose Bib	0
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping - 50' total 1/4-229,000	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other A/C	35
	Other	0

	Administrative Surcharge	$ 0
Paid [X] Check # 13690	Minimum Fee	$ 0
Collected by: ERP	TOTAL FEE	$ 195
	DCA State Permit Fee	$ 0

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I an the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/18/04
Control # ~~C02-18~~
Permit # 04 0814

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor JEHCO PLG & HTG INC
Address 5 AMY CT
HOWELL, NJ 07731-
Tele.(732)458-4744
Lic. No. or Bldrs. Reg. No. 11191
Federal Exp. No. 22-3816578

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 3,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 3/11/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	30
0	Urinal / Bidet	0
1	Bath Tub	10
3	Lavatory	30
1	Shower	10
0	Floor Drain	0
1	Sink	10
0	Dishwasher	0
0	Drinking Fountain	0
1	Washing Machine	10
0	Hose Bib	0
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other A/C	35
	Other	0

30' CHART 230,000 1/1

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 195
	DCA State Permit Fee	$ 0

3/4" WATER

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/11/04
Control # ~~C02-18~~
Permit # 04 C 314

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor JEHCO PLG & HTG INC
Address 5 AMY CT
HOWELL, NJ 07731-
Tele.(732)458-4744
Lic. No. or Bldrs. Reg. No. 11191
Federal Emp. No. 22-3816578

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 3,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] ~~Plumb.~~ Plans Approved
Date: 3/11/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	30
0	Urinal / Bidet	0
1	Bath Tub	10
3	Lavatory	30
1	Shower	10
0	Floor Drain	0
1	Sink	10
0	Dishwasher	0
0	Drinking Fountain	0
1	Washing Machine	10
0	Hose Bib	0
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other A/C	35
	Other	0

3 C FURNACE
1 @ 30,000

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 195
	DCA State Permit Fee	$ 0

3/4" WATER

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 03/18/2004
Control #
Permit # 04-0814

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

Block 851 Lot 12 Qual

Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT

Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor BODE MECHANICAL
Address 312 HAYES AVE
BAYVILLE, NJ 08721-
Tele.(732)237-3300
Lic. No. or Bldrs. Reg. No. BIO 8957
Federal Emp. No. 22-3640638

CHANGE CONTRACTOR 4-8-04

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 3,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date:
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	30
0	Urinal / Bidet	0
1	Bath Tub	10
3	Lavatory	30
1	Shower	10
0	Floor Drain	0
1	Sink	10
0	Dishwasher	0
0	Drinking Fountain	0
1	Washing Machine	10
0	Hose Bib	0
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other A/C	35
	Other	0

	Administrative Surcharge	$ 0
Paid [X] Check # 13690	Minimum Fee	$ 0
Collected by: ERP	TOTAL FEE	$ 195
	DCA State Permit Fee	$ 0

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 04/08/2004
Date Issued 01/01/~~1954~~
Control #
Permit # 04-0814+A 6/11/04

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor BODE MECHANICAL
Address 312 HAYES AVE
BAYVILLE, NJ 08721-
Tele.(732)237-3300
Lic. No. or Bldrs. Reg. No. BIO 8957
Federal Emp. No. 22-3640638

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 4/8/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I an the (agent of) owner of record and an authorized to make this application and perform the work listed on this application.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
2	Hose Bib	20
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 20
DCA State Permit Fee $ 0

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 04/08/2004
Date Issued 01/01/1954
Control #
Permit # 04-0814+A 4/16/04

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor BODE MECHANICAL
Address 312 HAYES AVE
BAYVILLE, NJ 08721-
Tele.(732)237-3300
Lic. No. or Bldrs. Reg. No. BIO 8957
Federal Emp. No. 22-3640638

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[+] Plumb. Plans Approved
Date: 4/16/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
2	Hose Bib	20
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 20
DCA State Permit Fee $ 0

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 03/18/2004
Control #
Permit # 04-0814

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

Block 851 Lot 12 Qual

Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT

CHANGE CONTRACTOR 4-8-04

Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor BODE MECHANICAL
Address 312 HAYES AVE
BAYVILLE, NJ 08721-
Tele.(732)237-3300
Lic. No. or Bldrs. Reg. No. BIO 8957
Federal Emp. No. 22-3640638

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 3,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date: 6.9.04

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough			4/12/04	
Water			4/12/04	
Sewer			4/12/04	
Fixtures	6/4/04		6/7/04	
Gas Equip.			6/7/04	
Gas Piping			4/12/04	
Solar				
TCO			6/4/04	
FINAL			6/7/04	

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	30
0	Urinal / Bidet	0
1	Bath Tub	10
3	Lavatory	30
1	Shower	10
0	Floor Drain	0
1	Sink	10
0	Dishwasher	0
0	Drinking Fountain	0
1	Washing Machine	10
0	Hose Bib	0
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other A/C	35
	Other	0

Administrative Surcharge $ 0
Paid [X] Check # 13690 Minimum Fee $ 0
Collected by: ERP TOTAL FEE $ 195
DCA State Permit Fee $ 0

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/01/2004
Date Issued 3/18/04
Control # ~~C02-18~~
Permit # 04-0814

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

Block 851 Lot 12 Qual

Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT

Owner in Fee KRISTI SHAY CONST

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Tele.(732)477-4661

Contractor JEMCO PLG & HTG INC

Address 5 AMY CT
HOWELL, NJ 07731-

Tele.(732)458-4744

Lic. No. or Bldrs. Reg. No. 11191

Federal Emp. No. 22-3816578

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 3,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 3/11/04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date: 6.907

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough	3/7/04	4/		
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping	4/7/04			
Solar				
TCO				

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	30
0	Urinal / Bidet	0
1	Bath Tub	10
3	Lavatory	30
1	Shower	10
0	Floor Drain	0
1	Sink	10
0	Dishwasher	0
0	Drinking Fountain	0
1	Washing Machine	10
0	Hose Bib	0
1	Water Heater	35
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other A/C	35
	Other	0

30' SHORT 1/4 220,000

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 195
	DCA State Permit Fee	$ 0

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.

3/4" WATER

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. F130 (rev. 3/96)

4/7/04

(A) CLEAN OUT FOR KIT CHEN

(C) CHANGE OF CONTRACTOR

(B) - 1¼ ON TREE FOR CAR 1" INSTALLED

(D) - LEAK ON TUB TRIP

6/4/04

(1) - 7.3.2 - NEED 21" IN FRONT OF WATER CLOSET - ONLY 15"

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 04/08/2004
Date Issued 01/01/1954
Control # 6/10/04
Permit # 04-0814+A

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

Block 851 Lot 12 Qual
Work Site Location 1736 FORGE POND RD
SF DWELLING/BASEMENT
Owner in Fee KRISTI SHAY CONST
Address 63 CHANNEL DR
BRICK, NJ 08723-
Tele.(732)477-4661
Contractor BODE MECHANICAL
Address 312 HAYES AVE
BAYVILLE, NJ 08721-
Tele.(732)237-3300
Lic. No. or Bldrs. Reg. No. BIO 8957
Federal Emp. No. 22-3640638

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 4/8/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
2	Hose Bib	20
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 20
DCA State Permit Fee $ 0

U.C.C. F130 (rev. 3/96)

Township of Brick
Zoning Permit

Approved:	Tuesday, March 09, 2004	**Number:**	204
Block	851 **Lot** 12	**Zone:**	R-10

Property Address:	1736 Forge Pond Road
Applicant:	Samuel J. Reynolds, Kristi-Shay Construction
Property Owner:	Kristi-Shay Construction
Existing Use:	Single Family Residential (to be removed)
Proposed Use:	Single Family Residential
Proposed Construction:	Two story single family dwelling 39.67' x 34.33', building eave height 19', building height 24', ridge height 29' 6".
Conditions:	The house must be set back at least 30 feet from the front property lines, at least 6 feet from the side property line 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
Municipal Planner

Sean Kinnevy
Zoning Officer

RECEIVED
MAR 2 2004
ZONING

RECEIVED
MAR 5 2004
ZONING

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 12 QUALIFIER

PROPERTY ADDRESS 1736 Forge Pond Rd.

PERSONAL NAME OF APPLICANT Samuel J. Reynolds

BUSINESS NAME OF APPLICANT Kristi Shay Construction, Inc.

MAILING ADDRESS OF APPLICANT 63 Channel Dr. Brick 08723

PROPERTY OWNER'S FULL NAME KRISTI-SHAY CONSTRUCTION

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) NEW SINGLE-FAMILY HOME Height 25'
☐ Addition - Height 4 BR 2½ BATH BASEMENT 1 CAR GARAGE
☐ Alteration
☒ Porch or deck - Height 12' x 7' x 12" HIGH
☐ 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 Sam Reynolds Date 2/10/04

Reviewed by Zoning Office Date 3/4/04 ( ) Approved ( ) Denied

3/9/04

March 2003

MUNICIPALITY B Ricketown

CUT-IN-CARD

LOCATION 1736 Forge Pond Rd UTILITY CO pp

BLK 851 LOT 12

OWNER Kristy Shay Const OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C., utility and DCA requirements."

☐ FINAL ☒ TEMPORARY This approval void after ____days

DESCRIPTION OF SERVICE 150 amp over Head

INSTALLED BY Robert McLaughlin Elect LICENSE NO 10990A

DATE 4-8-04 PERMIT # 04-0814 INSPECTOR [illegible]

☐ CALLED IN / / Lic. No: 6455

U.C.C. Form F-350B 1 WHITE—UTILITY 2 CANARY—OFFICE/FILE 3 PINK—OFFICE/CONTRACTOR

MUNICIPALITY B R-cktow

LOCATION

OWNER

"Installation in the above pre in accordance with N.E.C.,

☐ FINAL ☐ TEMPORARY This approval void

DESCRIPTION OF SERVICE

INSTALLED BY

DATE PERMIT #

☐ CALLED IN / /

U.C.C. Form F-350B 1 WHITE—UTILITY 2 CANARY—OFFIC

MUNICIPALITY BR.cktown

CUT-IN-CARD

UTILITY CO pp

BLK 895.01 LOT 14

OWNER Haupt OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C., utility and DCA requirements."

☐ FINAL ☒ TEMPORARY This approval void after ____days

DESCRIPTION OF SERVICE 200 Amp

INSTALLED BY Van Wagner Elect LICENSE NO 12605

DATE 4 8 04 PERMIT # 03-5395 INSPECTOR UWE

☐ CALLED IN / / Lic. No: 6455

U.C.C. Form F-350B 1 WHITE—UTILITY 2 CANARY—OFFICE/FILE 3 PINK—OFFICE/CONTRACTOR

MUNICIPALITY BR.cktown

LOCATION

OWNER

"Installation in the above pre in accordance with N.E.C.,

☐ FINAL ☐ TEMPORARY This approval void

DESCRIPTION OF SERVICE

INSTALLED BY

DATE PERMIT #

☐ CALLED IN / /

U.C.C. Form F-350B 1 WHITE—UTILITY 2 CANARY—OFFIC

WILL BE PICKING UP

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 EAST
BRICK, NEW JERSEY 08724
(908) 458-7000

STATEMENT OF UTILITY SERVICES

APPLICANT: NAME: Kristi Shay PHONE NO. 278-0350 (bus.)

ADDRESS: 63 Channel Dr. _____ (home)

Brick, NJ 08724

PROPERTY IN QUESTION: ADDRESS 1736 (Froge) Pond Rd.

BLOCK(S) 851 LOT(S) 12

BTMUA ACCOUNT NO. L431207 TAX MAP DRAWING NO. 45A

SINGLE FAMILY RESIDENCE X MINOR SUBDIVISION _____

COMMERCIAL _____ MAJOR SUBDIVISION _____

* LOT HAS EXISTING SERVICE

	WATER	SEWER
1. UTILITY SERVICE CAN BE PROVIDED. APPLICATION FOR SERVICE IS **REQUIRED.**	X	X

CONNECTION WILL BE PROVIDED AS FOLLOWS:

INITIAL SERVICE CHARGES

* WATER FORGE POND ROAD (STREET) 3/4" 2332.00 1" 4091.00

* SEWER FORGE POND ROAD (STREET) 2715.00

2. UTILITY SERVICE CANNOT BE PROVIDED AT THIS DATE. APPLICATION FOR EXTENSION IS ☐ IS NOT ☐ REQUIRED.

3. UTILITY SERVICE CANNOT BE PROVIDED AT THIS DATE. IT SHALL BE AVAILABLE UPON COMPLETION OF WORK BY A DEVELOPER UNDER APPLICATION NO. _____ CONTACT THE AUTHORITY TO CONFIRM AVAILABILITY OF SERVICES.

DATE: Feb. 9, 2004 SIGNED: [signature]

NOTE: STATEMENT GOOD FOR ONE YEAR.

C.G. 2/9/04

UTILITY SERVICES FOR NEW HOMES

1. OBTAIN "STATEMENT OF UTILITY SERVICES" AND SIZING SHEET AT BTMUA
2. FILL OUT SIZING SHEET AND HAVE APPROVED BY THE BRICK TOWNSHIP PLUMBING INSPECTOR.
3. APPLICATION FOR UTILITIES SHOULD BE MADE TO BTMUA AS EARLY AS POSSIBLE, AT WHICH TIME THE SIZING SHEET, SIGNED BY THE TOWNSHIP PLUMBING INSPECTOR, MUST BE SUBMITTED.

APPLICATIONS WITHOUT THE SIGNED SIZING SHEET WILL NOT BE ACCEPTED.

LEAD TIME FOR TAPS TO BE INSTALLED IS BETWEEN 8 AND 12 WEEKS, WEATHER PERMITTING; HOWEVER, TAPS WILL NOT BE SCHEDULED FOR INSTALLATION UNTIL AT LEAST A FOUNDATION EXISTS. FOR INFORMATION ON SCHEDULED INSTALLATIONS, CONTACT THE AUTHORITY OPERATIONS OFFICE.

4. AFTER THE TAPS HAVE BEEN INSTALLED, SEWER AND WATER SERVICE PERMITS ARE TO BE OBTAINED AT THE BTMUA (PERMIT FEE OF $15 FOR EACH SERVICE).
5. ONCE YOUR SERVICE LINES HAVE BEEN CONNECTED, CALL THE CUSTOMER ACCOUNT DIVISION AT BTMUA TO ARRANGE FOR AN OUTSIDE INSPECTION.
6. CERTIFICATE OF COMPLIANCE

   THE C.C. WILL BE ISSUED AFTER THE METER IS INSTALLED AND ALL REQUIREMENTS MET, AT WHICH TIME ALL FEES MUST BE PAID IN FULL.

ATTACHMENT 'A'

If during construction the existing sanitary sewer clean out and water service curb box is found to be located in the driveway apron or walkways, the applicant will be required to re-locate the sewer clean out and/or water curb box at the applicant's expense.

SIZING FOR WATER AND SEWER SERVICES

Property Owner _____ Date _____

Property Address _____ Block _____ Lot _____

Zoning _____ Use Group _____

Contractor _____ License No. Registration _____

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

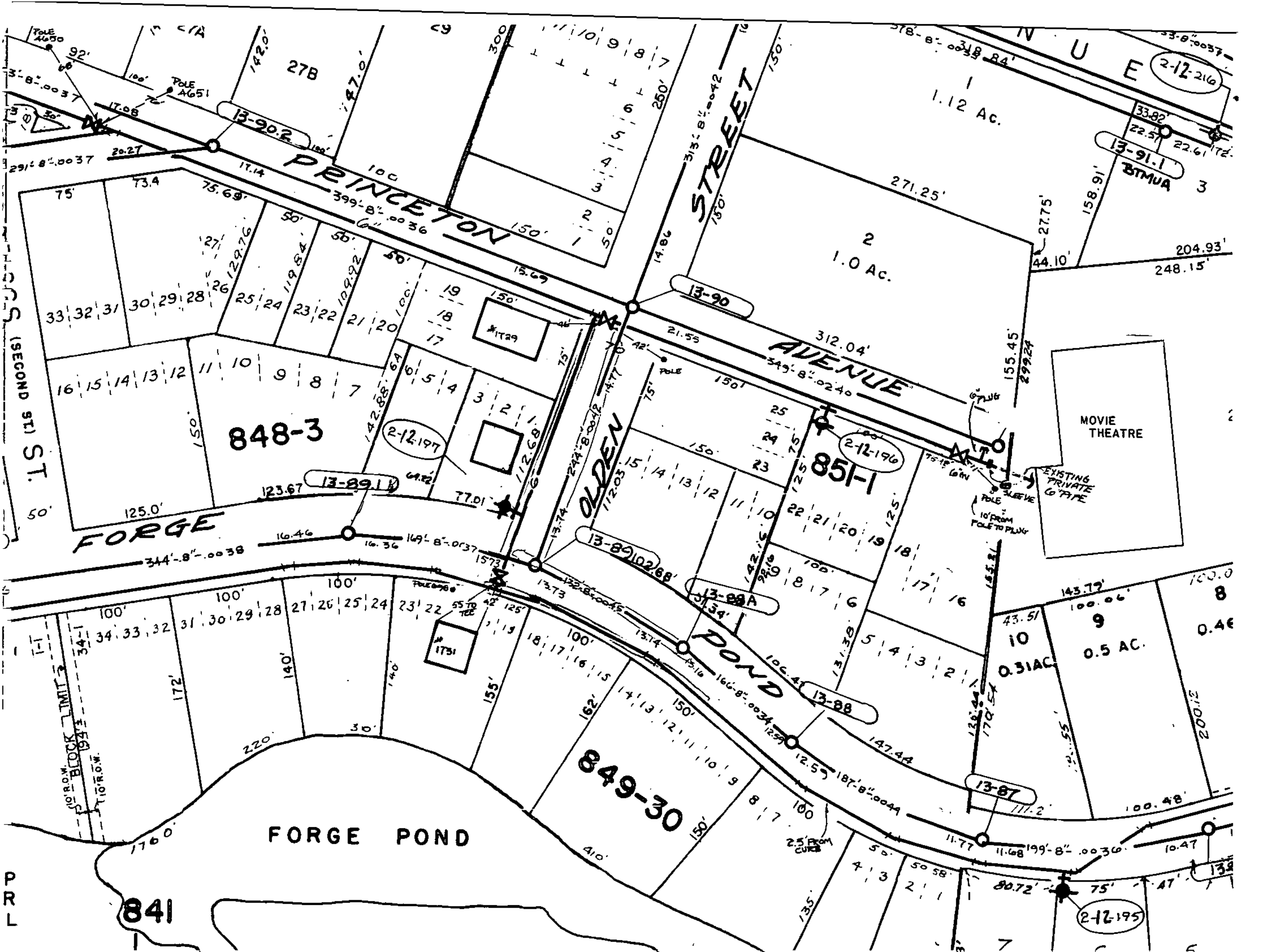
Plumbing Fixtures	Number	(sfu) Water Units	(dfu) Drainage Units
1. Water Closet	_____	( ) _____	( ) _____
2. Lavatory	_____	( ) _____	( ) _____
3. Bath Tub	_____	( ) _____	( ) _____
4. Shower Stall	_____	( ) _____	( ) _____
5. Kitchen Sink	_____	( ) _____	( ) _____
6. Service Sink	_____	( ) _____	( ) _____
7. Laundry Tray	_____	( ) _____	( ) _____
8. Dishwasher	_____	( ) _____	( ) _____
9. Washing Machine	_____	( ) _____	( ) _____
10. Urinal	_____	( ) _____	( ) _____
11. Floor Drain	_____	( ) _____	( ) _____
12. Drinking Fountain	_____	( ) _____	( ) _____
13. Air Conditioner (water cooled)	_____	( ) _____	( ) _____
14. Dental Unit	_____	( ) _____	( ) _____
15. Lawn Sprinkler No. of Heads	_____	( ) _____	( ) _____
16. Fire Sprinkler No. of Heads	_____	( ) _____	( ) _____
17. _____	_____	( ) _____	( ) _____
18. _____	_____	( ) _____	( ) _____
Total		_____	_____

Gallons per minute _____

Size of Service _____ _____

Date: _____ Approved: _____

Brick Township Plumbing Inspector

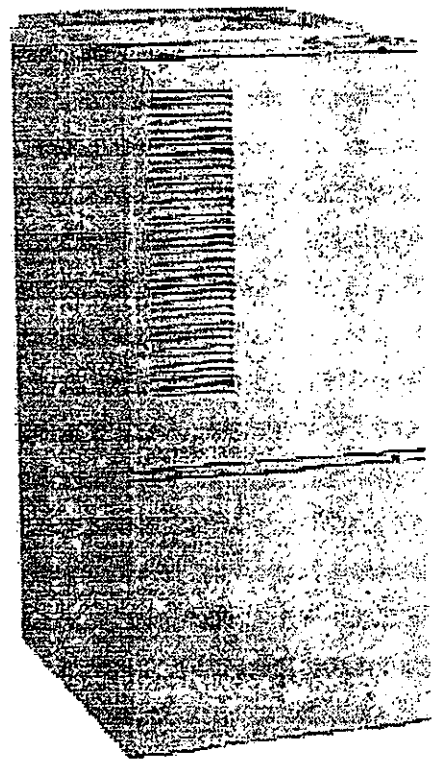


PRINCETON
AVENUE
STREET
OLDEN
FORGE
POND
FORGE POND
(SECOND ST) ST
848-3
849-30
851-1
841
27B
MOVIE
THEATRE
EXISTING PRIVATE 6" PIPE
BLOCK LIMIT
13-90.2
13-90
13-89.1
13-89
13-89A
13-88
13-87
13-91.1
BTMUA
2-12-216
2-12-197
2-12-196
2-12-195
1.12 Ac.
1.0 Ac.
0.31AC
0.5 AC.
POLE A650
POLE A651

TECHNICAL SPECIFICATIONS

G6RA Series

High Efficiency Upflow/Horizontal Gas Furnace



Induced Draft - 80+ AFUE

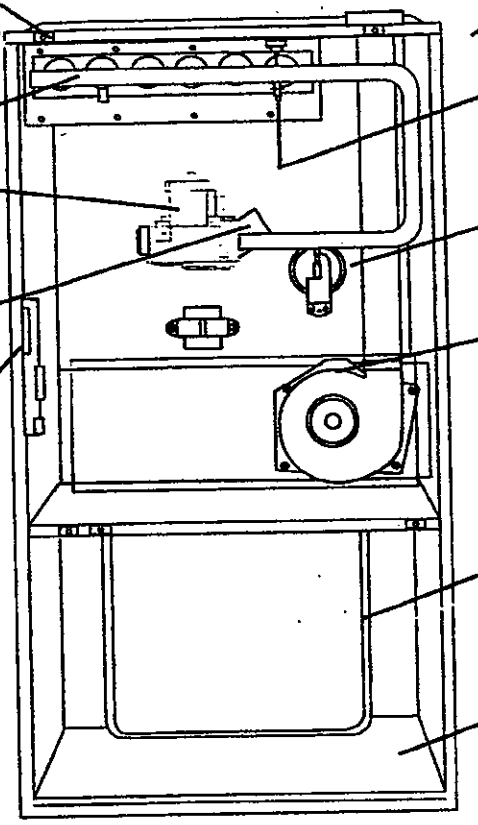
Input 45,000 - 144,000 Btuh

The high efficiency upflow gas furnace may be installed free standing in a utility room, basement, or enclosed in an alcove or closet. The extended flush jacket provides a pleasing "appliance appearance." Design certified by the American Gas Association (AGA) Laboratories and the Canadian Gas Association (CGA) Laboratories. The product is truly designed with the contractor and the consumer in mind.

FEATURES and BENEFITS

- Best warranty in the business —
  – A full 20 years on the heat exchanger
  – 6 years on all parts
- 100% fired and tested — All units and each component (both mechanical and electrical) are tested on the manufacturing line.
- Best packaging in the industry — Unique design assures product will arrive to the homeowner dent free.
- Clean and quiet operation — Due to the unique design of in-shot burners, location of inducer, return air vents, and use of insulation.
- Fixed 30-second blower delay at burner start-up assures a warm duct temperature at furnace start-up. Adjustable blower off settings (60, 90, 120 and 180 seconds).
- Fixed 30-second post purge increases life of heat exchanger.
- Dependable, shock-mounted hot surface ignitor — Innovative application of an appliance type igniter with a 20-year history of reliability, assures no call-backs because of handling.
- Color coded wire harness — Designed to fit the components, all with quick-connect fittings for ease of service and replacement.
- Approved for categories I and III venting systems — May be common, dedicated, or through-the-wall vented for maximum flexibility in installation.
- Tubular primary heat exchanger — Heavy gauge aluminized steel heat exchanger assures a long life.
- 90-second fixed cooling cycle blower-off delay (TDR) increases cooling performance when matched with a NORDYNE coil.
- Variable speed blower kit is available to maximize air conditioner and heat pump efficiencies. On selected units, SEER ratings up to 14 and HSPF ratings up to 8.5 are ARI listed.
- Multi-speed direct drive blower — Designed to give a wide range of cooling capacities. 40VA transformer included.
- LP convertible — Simple burner orifice and regulator spring change for ease of convertibility.
- Diagnostic lights flash to identify limit failure, pressure switch failure, improper ground and polarization, and low flame signal — for easy troubleshooting.
- Incorporates new integrated control board with connections for electronic air cleaner, humidifier and twinning.
- New two piece door design enhances furnace appearance and uses screw fasteners for easier accessibility.
- 3 amp fuse protection against low voltage shorts; protects transformer and control board.
- Low voltage terminal board for easy field wiring.
- Components and Controls — Designing quality into our products means selecting manufacturers that have a reputation for delivering high quality, dependable products.

FEATURES
High Efficiency Upflow/Horizontal 80+ Gas Furnace



Front door screw fasteners ensure tight fit.

Vent switch protects against blocked flue. (Not Shown)

Remote flame sensor for proof of flame carry-over

Aluminized steel in-shot burners, hot surface ignitor and redundant gas valve provide safe, reliable ignition and efficient combustion.

Single pressure switch assures proper operation of the induced draft system up to 10,000 feet.

Supply air limit.

Isolation grommets on the induced draft blower provide quiet operation.

Solid state integrated control monitors the burner flame and limit circuit continuously. Blower timing has adjustable OFF settings. Provides humidifier and electronic air cleaner connections.

Multi-speed PSC motor/blower provides quiet airflow, reliable operation and is installed on a slide-out track.

Solid bottom base plate for sturdy construction — with easily removed full bottom knock-out for bottom return applications.

STANDARD EQUIPMENT

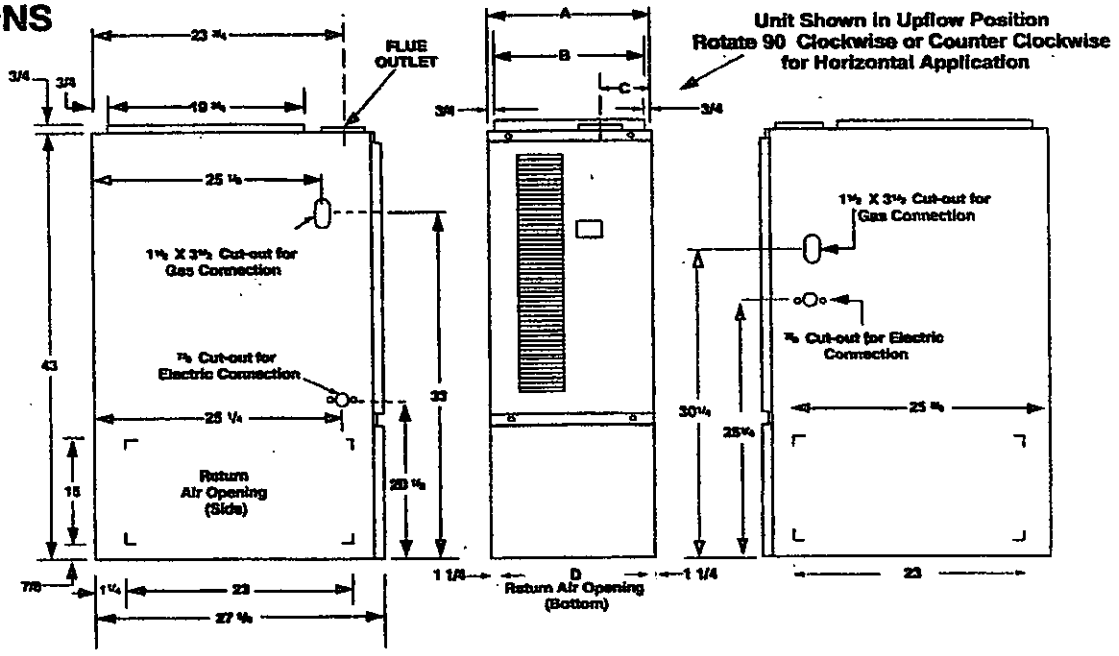
Draft inducer; pressure switch; redundant main gas control; hot-surface ignition; timed ON/OFF blower controls(TDR) ; 40VA transformer for air conditioner application; limit controls; solid base plate with knock-out for easy removal; direct drive motor; all models can be converted to use L.P. (propane) gas. Factory approved kits *only* must be used and are available as an optional accessory from your distributor.

SPECIFICATIONS

GGRA MODEL NUMBERS:	-045( )16	-060( )12	-072( )12	-072( )16	-096( )12	-096( )16	-096( )20	-120( )16	-120( )20	-144( )20
Input-Btuh (a)	45,000	60,000	72,000	72,000	96,000	96,000	96,000	120,000	120,000	144,000
Heating Capacity - Btuh	36,000	48,000	58,000	58,000	77,000	77,000	77,000	96,000	96,000	115,000
AFUE	80+	80+	80+	80+	80+	80+	80+	80+	80+	80+
Max. Htg. Ext. St. Press. In W.C.	.5	.5	.5	.5	.5	.5	.5	.5	.5	.5
Blower Wheel D x W	10 x 6	10 x 6	10 x 6	10 x 10	10 x 9	10 x 10	11 x 10	10 x 10	11 x 10	11 x 10
Motor H.P. -Speed -Type	1/5 - 3 - PSC	1/3 - 3 - PSC	1/3 - 3 -PSC	1/2 - 4 -PSC	1/3 - 3 - PSC	1/2 - 4 -PSC	3/4 - 4 -PSC	1/2 - 4 -PSC	3/4 - 4 -PSC	3/4 - 4 -PSC
Motor FLA	2.8	6.0	6.0	7.9	6.0	7.9	11.1	7.9	11.1	11.1
Temperature Rise Range - °F	45 - 75	45 - 75	45 - 75	40 - 70	50 - 80	50 - 80	40 - 70	50 - 80	45 - 75	45 - 75
Approximate Shipping Wt. - lbs.	108	120	120	125	157	158	165	172	174	183

All models are 115 V, 60 HZ. Gas connections are 1/2" N.P.T
AFUE= Annual Fuel Utilization Efficiency

DIMENSIONS



MODEL NUMBER G6RA	A (in.)	B (in.)	C (in.)	D (in.)	MODEL NUMBER G6RA	A (in.)	B (in.)	C (in.)	D (in.)
045(*)-08	14 1/4	12 3/4	3 1/4	11 3/4	096(*)-16	19 3/4	18 1/4	3 3/4	17 1/4
060(*)-12	14 1/4	12 3/4	3 3/4	11 3/4	096(*)-20	22 1/2	21	3 3/4	20
072(*)-12	14 1/4	12 3/4	3 3/4	11 3/4	120(*)-16	19 3/4	18 1/4	3 3/4	17 1/4
072(*)-16	19 3/4	18 1/4	3 3/4	17 1/4	120(*)-20	22 1/2	21	3 3/4	20
096(*)-12	19 3/4	18 1/4	3 3/4	17 1/4	144(*)-20	22 1/2	21	4 1/4	20

BLOWER PERFORMANCE

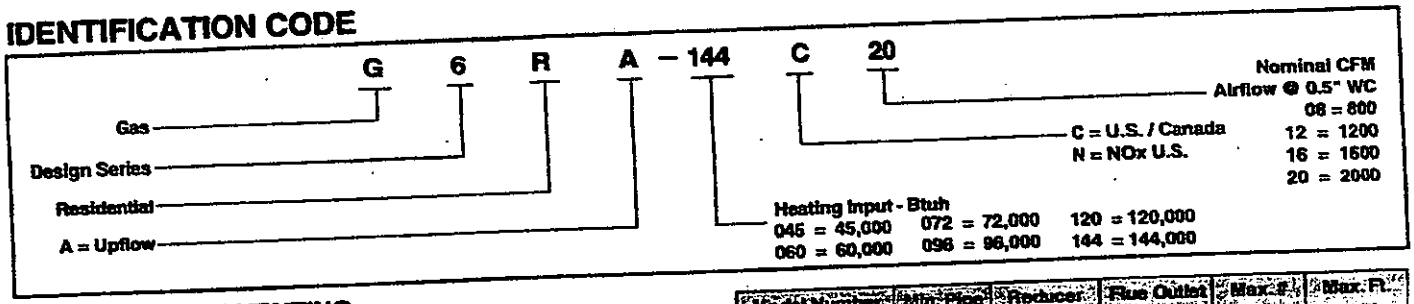
Upflow Furnace Airflow Data

G6RA Furnace Model No.	Motor HP	Motor Speed	External Static Pressure (inches Water Column) 0.1 CFM	0.1 Rise	0.2 CFM	0.2 Rise	0.3 CFM	0.3 Rise	0.4 CFM	0.4 Rise	0.5 CFM	0.5 Rise
045C-08	1/5	High *	1000	-	970	-	950	-	920	-	870	-
		Medium	760	46	740	47	730	47	720	48	690	50
		Low **	630	55	620	56	610	57	600	58	570	61
060C-12	1/3	High *	1380	-	1350	-	1310	-	1260	-	1210	-
		Medium	1220	-	1190	-	1160	-	1120	-	1070	-
		Low **	820	57	800	58	780	59	760	61	730	63
072C-12	1/3	High *	1380	-	1350	-	1310	-	1260	-	1210	-
		Medium	1220	46	1190	47	1160	48	1120	49	1070	52
		Low **	820	68	800	69	780	71	760	73	730	76
072C-16	1/2	High *	1980	-	1910	-	1830	-	1760	-	1660	-
		Med-High	1710	-	1660	-	1610	-	1540	-	1470	-
		Med-Low	1490	-	1470	-	1420	-	1380	-	1320	-
		Low **	1270	44	1250	45	1230	45	1190	47	1140	49
096C-12	1/3	High *	1530	-	1450	-	1390	-	1300	-	1220	-
		Medium**	1380	64	1320	67	1250	71	1190	75	1100	81
		Low	930	-	900	-	870	-	820	-	750	-
096C-16	1/2	High *	1980	-	1910	-	1840	-	1760	-	1680	-
		Med-High	1720	-	1670	-	1610	-	1560	-	1480	-
		Med-Low **	1470	50	1440	52	1410	53	1370	54	1320	56
		Low	1270	58	1240	60	1220	61	1190	62	1140	65
096C-20	3/4	High *	2340	-	2290	-	2280	-	2180	-	2150	-
		Med-High	1910	-	1880	-	1860	-	1830	-	1810	-
		Med-Low	1520	49	1510	49	1490	50	1480	50	1460	51
		Low **	1370	54	1350	55	1340	55	1320	56	1300	57
120C-16	1/2	High *	1900	-	1830	-	1750	-	1630	-	1580	-
		Med-High **	1720	54	1670	56	1610	58	1560	59	1480	63
		Med-Low	1450	64	1420	65	1380	67	1340	69	1280	72
		Low	1260	-	1230	-	1200	-	1170	-	1120	-
120C-20	3/4	High *	2300	-	2250	-	2190	-	2130	-	2080	-
		Med-High	1910	49	1880	49	1860	50	1830	51	1800	52
		Med-Low**	1540	60	1530	61	1520	61	1500	62	1480	63
		Low	1320	-	1310	-	1300	-	1280	-	1260	-
144C-20	3/4	High *	2240	-	2190	-	2130	-	1070	-	2020	-
		Med-High**	1900	49	1880	50	1820	51	1760	52	1740	53
		Med-Low	1520	61	1510	61	1490	62	1480	63	1450	64
		Low	1330	-	1310	-	1290	-	1280	-	1250	-

*Factory wired cooling speed tap. **Factory wired heating speed tap.

- Not Recommended

IDENTIFICATION CODE



Through-the-Wall VENTING
Venting Requirements

These furnaces are approved to use with 3" single wall AL29-4C stainless steel vent pipe in through-the-wall vent applications, and with the required through-the-wall vent kit listed below. The pipe is available from the following manufacturers:

Z-Flex Inc. - vent brand name **(Z-VENT)**
Heat-fab Inc. - vent brand name **(Saf-T Vent)**
Flex-L International - vent brand name **(STAR-34 Vent)**

When venting through-the-wall, this is a Category III furnace, the vent pressure is positive, and the venting system must be sealed in both horizontal and vertical runs.

Model Number G6RA	Min. Pipe Size	Reducer Needed*	Flue Outlet (in.)	Max. # Elbows	Max. Ft. Vent Pipe
045( )-08	3"	None	3	4	35
060( )-12	3"	4" to 3"	4	4	35
072( )-12	3"	4" to 3"	4	4	35
072( )-16	3"	4" to 3"	4	4	35
096( )-12	3"	4" to 3"	4	4	35
096( )-16	3"	4" to 3"	4	4	35
096( )-20	3"	4" to 3"	4	4	35
120( )-16	3"	4" to 3"	4	4	35
120( )-20	3"	4" to 3"	4	4	35
144( )-20*	3"	4" to 3"	5	3	30

* NOTE: Special 5" to 4" Reducer Kit (#902249) required for model G6RA144C-120.

High Efficiency 80+ with Honeywell VR Gas Valve		
Kit		**Order Number**
U.S. High Altitude Natural Gas Conversion Kit (2,000 to 10,000 ft.)		903491
U.S. Propane Kit (0 to 2,000 ft.)		903492
U.S. High Altitude Propane Gas Conversion Kit (2,000 to 10,000 ft.)		903493
Canadian High Altitude Natural Gas Conversion Kit (2,000 to 4,500 ft.)		903494
Canadian Propane Gas Conversion Kit (0 to 4,500 ft.)		903495
Fossil Fuel Kit		914762
Side Return Filter Kit		541036
Bottom Return Filter Kit	A Cabinet	903088
	B Cabinet	903089
	C Cabinet	903090
Downflow Sub-Base	A Cabinet	902974
	B Cabinet	902677
Horizontal Vent Kit		903196
Internal Side Return Filter Wire		903152

VENTING

All models, with the exception of the reduced NOx models, are approved for vertical and through-the-wall venting applications (see table above). All models may be common vented with a gas water heater. Type B gas vent materials may be used when connected to a vertical vent system. The installation must be in accordance with the venting instructions supplied with the furnace.

GENERAL TERMS OF LIMITED WARRANTY **

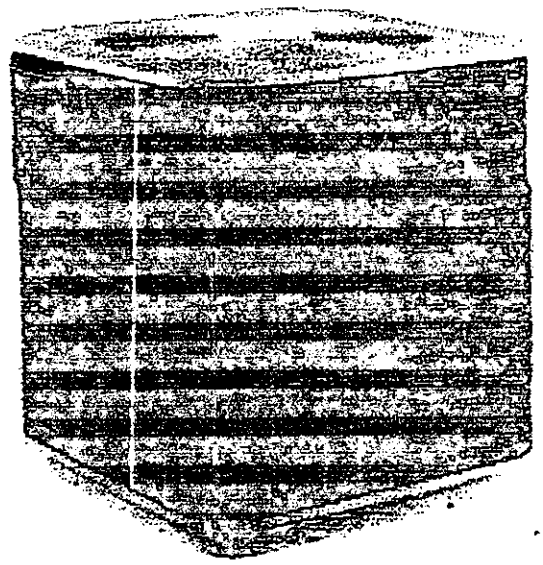
NORDYNE will furnish a replacement for any part of this product which fails in normal use and service within the applicable periods stated below, in accordance with the terms of the warranty.

G6RA Models Warranty
Gas Heat Exchanger ..... 20-Year Limited Warranty
Any Other Part ..... 6-Year Limited Warranty

** For complete details of the Limited Warranty, including applicable terms and conditions, see your local installer or contact the factory for a copy.

TECHNICAL
SPECIFICATIONS

S3BA Series
High Efficiency Air Conditioner
10 SEER
1-1/2 – 5 Ton Capacity



The S3BA Series of air conditioners offers exceptional performance from a small, compact package. The unit, when combined with our engineered coils or air handlers, offers a full line of quality, split system cooling equipment. Units are ideally sized for slab or rooftop mounting in single, multifamily, and light commercial applications.

FEATURES and BENEFITS

- **Durable, Attractive Cabinet**–Designed using galvanized steel with a high gloss polyester urethane powder coat finish. The 750 hour salt spray finish is 1.5 mil thick and resists corrosion 50% better than comparable units.
- **Copper Tube / Aluminum Fin Coils** – Both indoor and outdoor coils are designed to optimize heat transfer, minimize size and cost, and increase durability and reliability.
- **Permanently Lubricated Motor** – A heavy duty PSC motor for long lasting reliability and quiet operation. Requires no maintenance and is completely protected from rain and snow.
- **Full Service Valves** – These brass valves are easily accessible and simplify servicing of the refrigeration system.
- Plastic Coated Coil Guard – A wire guard that will never rust and protects the units coil from being damaged by balls, lawnmowers, etc.
- **Removable Top Grille Assembly** – Allows ease of service from the top without disconnecting fan motor leads.
- **One Piece Top/Orifice** – Designed for maximum airflow and quiet operation.
- **2-1/2" Pedestal Base** – The sturdy base keeps the bottom of the coil out of harms way. Secondly, the base has weep holes along the edge to allow the water from rain to flow away from the unit.
- **Five Minute Restart Time Delay** – When the unit shuts down, a five minute delay keeps the unit from restarting, eliminating the highest cause for compressor failure.
- **Easy Compressor and Control Access** – Designed to make servicing easier for the contractor, access panels are provided to all controls and the compressor from the side of the unit.
- **6 Year Limited All Parts Warranty** – The best in the industry and has proven to be a major benefit to the consumer.

MODEL IDENTIFICATION CODES

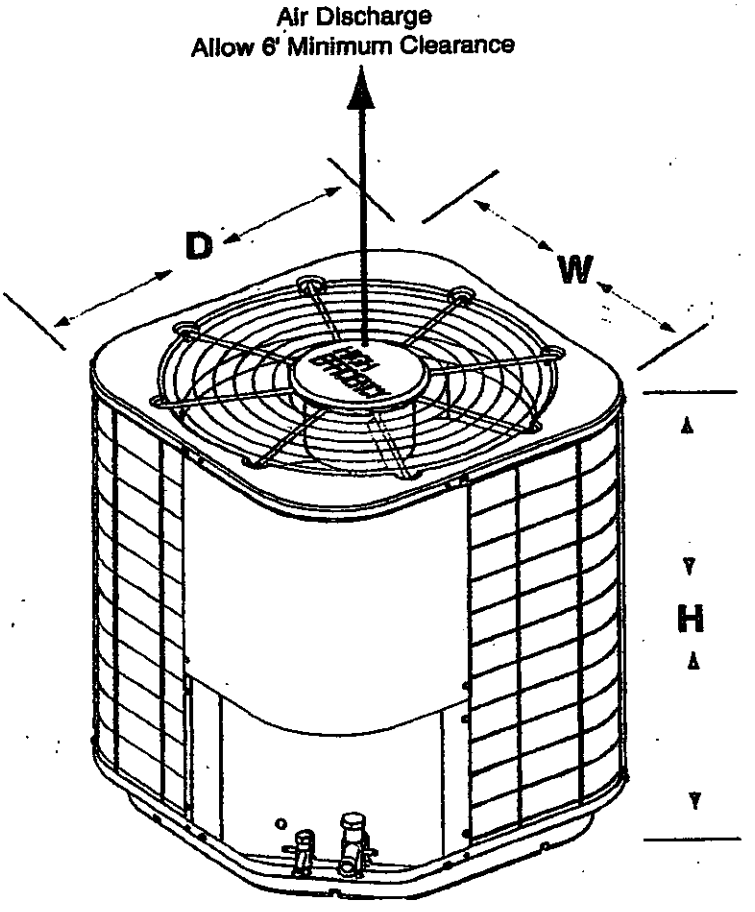
EX: S3BA-036K

S 3 B A - 036 K

- **S** - S - Air Conditioner; T - Heat Pump
- **3** - Generation 1, 2, 3. etc.
- **B A** - Product Identifier: BA = Braze 10 SEER; BC = Braze 12 SEER; BE = Braze 14 SEER
- **036** - Nominal Capacity (000) BTU
- **K** - Electrical Code: C = 208/230-60-3; K = 208/230-60-1

DIMENSIONS
OUTDOOR SECTION

S3BA-	018	024	030	036	042	048	060
H	22-1/2	22-1/2	26-1/2	30-1/2	34-1/2	26-1/2	34-1/2
W	22-1/2	22-1/2	22-1/2	22-1/2	22-1/2	30-1/2	30-1/2
D	22-1/2	22-1/2	22-1/2	22-1/2	22-1/2	30-1/2	30-1/2



PHYSICAL AND ELECTRICAL SPECIFICATIONS / OUTDOOR UNITS

10 SEER — High Efficiency — Single Phase

Model No. S3BA-			018K	024K	030K	036K	042K	048K	060K
Electrical Data	Volts-Cycles-Phase		208/230-60-1	208/230-60-1	208/230-60-1	208/230-60-1	208/230-60-1	208/230-60-1	208/230-60-1
	Total Amps		9.2	10.5	14.9	15.7	18.3	19.6	26.5
	Delay Fuse Max.		20	20	30	30	40	40	50
	Min. Circuit Ampacity		11.4	12.9	18.4	19.3	22.5	24.2	32.7
Component Data	Coil	Area	8.3	8.3	10.0	11.7	13.3	15.3	20.4
		Rows-FPI	1-16	1-18	1-20	1-20	1-22	1-18	1-22
		Tube Dia.	3/8 O.D.	3/8 O.D.	3/8 O.D.	3/8 O.D.	3/8 O.D.	3/8 O.D.	3/8 O.D.
	Fan Motor	Type	PSC	PSC	PSC	PSC	PSC	PSC	PSC
		Amps	0.67	0.67	1.25	1.25	1.25	1.4	1.5
		Watts-HP	145-1/10	145-1/10	210-1/8	210-1/8	210-1/8	245-1/4	300-1/4
	Fan Blade	Dia.-#Blades	18 in. - 3	18 in. - 3	18 in. - 3	18 in. - 3	18 in. - 3	24 in. - 2	24 in. - 3
		SCFM	2100	2100	2500	2500	2500	3300	4000
	Compress	RLA	8.6	9.8	13.7	14.4	17.0	18.2	25.0
		LRA	49	56	75	82	105	102	170
Refrigerant Suction Line-Length/O.D. (Liq. Line All Lengths - 3/8"O.D.)		15 ft.	5/8"	5/8"	3/4"	3/4"	3/4"	7/8"	7/8"
		25 ft.	5/8"	3/4"	3/4"	3/4"	7/8"	7/8"	1-1/8"
		40 ft.	3/4"	3/4"	3/4"	7/8"	7/8"	7/8"	1-1/8"
Refrigerant Charge R-22 Ounces	(Outdoor unit, Indoor Unit 15' Line Set)		62	72	76	90	102	105	130
Weight Approximate (lbs.)		Net	140	142	148	154	160	166	178
		Ship	152	154	160	166	172	178	190

10 SEER — High Efficiency — Three Phase

Model No. S3BA-			036C	048C	060C
Electrical Data	Volts-Cycles-Phase (1)		208/230-60-3	208/230-60-3	208/230-60-3
	Total Amps		10.2	14	16.9
	Delay Fuse Max. (2)		20	30	35
	Min. Circuit Ampacity		12.5	17.2	20.8
Component Data	Coil	Area	11.7	15.3	20.4
		Rows-FPI	1-20	1-18	1-22
		Tube Dia.	3/8 O.D.	3/8 O.D.	3/8 O.D.
	Fan Motor	Type	PSC	PSC	PSC
		Amps	1.25	1.4	1.5
		Watts-HP	210-1/8	245-1/4	300-1/4
	Fan Blade	Dia.-#Blades	18 in. - 3	24 in. - 2	24 in. - 3
		SCFM	2500	3000	3600
	Compress Data*	RLA	9.0	12.6	15.4
		LRA	70	91	124
Refrigerant Suction Line-Length/O.D. (Liq. Line All Lengths - 3/8"O.D.)		15 ft.	3/4"	7/8"	7/8"
		25 ft.	3/4"	7/8"	1-1/8" (5)
		40 ft.	7/8" (4)	7/8"	1-1/8" (5)
Refrigerant Charge R-22 Ounces	(Outdoor unit, Indoor Unit 15' Line Set)		90	105	130
Weight Approximate (lbs.)		Net	154	166	178
		Ship	166	178	190

COPPER WIRE SIZE — AWG (1% Voltage Drop)				
Supply Wire Length-Feet				Supply Circuit Ampacity
200	150	100	50	
6	8	10	14	15
4	6	8	12	20
4	6	8	10	25
4	4	6	10	30
3	4	6	8	35
3	4	6	8	40
2	3	4	6	45
2	3	4	6	50

Wire Size based on N.E.C. for 60° type copper conductors.

* Values shown are most severe and may vary slightly depending on the make of the compressor supplied.

(1) Operating Voltage Range: 198v min. — 253v max.

(2) HACR Type Circuit Breakers may be used.

(3) Requires 3/4" to 5/8" reducer from unit to line.

(4) Requires 7/8" to 3/4" reducer from line to unit.

(5) Requires 7/8" to 1-1/8" reducer from line to unit.

SYSTEM HEATING & COOLING CAPACITIES

10 SEER — High Efficiency — Single Phase

Outdoor Unit	With This Coil				
Model Number	Model Number	Cooling Btuh	SEER	Nominal cfm	Required Orifice Size
S3BA-018K	C3BL-018C/U-A	17,800	10.0	675	.051
S3BA-024K	C3BA-024C/U-B	23,600	10.0	800	.060
S3BA-024K	C3BL-023C/U-A	22,800	10.0	800	.060
S3BA-030K	C3BA-030C/U-B	29,600	10.0	1100	.067
S3BA-030K	C3BL-028C-A	28,200	10.0	1100	.067
S3BA-036K	C3BA-036C/U-B	34,600	10.0	1250	.073
S3BA-042K	C3BA-042C/U-C	40,000	10.0	1400	.077
S3BA-048K	C3BA-048C/U-C	45,500	10.0	1600	.082
S3BA-048K	C3BA-048C/U-B	45,000	10.0	1500	.082
S3BA-060K	C3BA-060C/U-C	56,500	10.0	1800	.096

Outdoor Unit	With This Air Handler				
Model Number	Model Number	Cooling Btuh	SEER	Nominal cfm	Required Orifice Size
S3BA-018K	B2B(M,V)-018K-A	17,800	10.0	675	.051
S3BA-024K	B2B(M,V)-024K-A	22,800	10.0	800	.060
S3BA-030K	B2B(M,V)-030K-B	29,600	10.0	1100	.067
S3BA-036K	B2B(M,V)-036K-B	34,600	10.0	1250	.073
S3BA-042K	B2B(M,V)-042K-C	40,000	10.0	1400	.077
S3BA-048K	B2B(M,V)-048K-C	45,500	10.0	1600	.082
S3BA-060K	B2B(M,V)-060K-C	56,500	10.0	1800	.096

ACCESSORIES - Condensing Unit

Start Assist Kit - 912933
Provides additional starting torque for the compressor motor when operating with low line voltage or high operating temperatures.

Thermostat
Two thermostats are available.
911096 - Single-Stage
911100 - Two-Stage Heat / One-Stage Cool

325A-0497 (Replaces 325A-1296)

R.C. BURDICK, P.E., P.C.

1023 OCEAN RD., PT. PLEASANT, N.J. 08742 TEL. (732) 892-5050 FAX (732) 892-5888

Brick Township Construction Code Official
401 Chambers Bridge Road
Brick, NJ 08723

February 4, 2004
Re: 1736 Forge Pond Road
Brick Township
Ocean County, NJ
Project No. 04-2279

Dear Construction Code Official,

Please be advised that our office has performed a soil boring at the above referenced lot to determine the adequacy of the site for the construction of a basement for a single-family residence. The soil around the basement and footings consists primarily of medium sand to a depth of 11'. The seasonal high water table was not encountered to a depth of 11'.

Based on the above, we believe that the home is exempt from foundation drainage system requirements specified in the BOCA Code under sections 1813.2,1813.3 and 1813.5.

Should you require additional information or have any questions, please call.

Sincerely yours,

Robert C. Burdick P.E.
NJPE # 30929

Cc: Kristi Shay

Soil Boring No. 1
1734 Forge Pond Road
Lot 12, Block 851.1
Brick Township, New Jersey
Project No. 04-2279

0" – 3"	Peat organic top soil
3" – 19"	Grey, loamy sand, 10 YR 5/1
19" – 24"	Very Pale Brown, sand, 10 YR 7/3
24" – 63"	Very Pale Brown, sand, 10 YR 7/4
63" – 67"	Very Pale Brown, sand with some gravel, 10 YR 7/4 damp
67" – 96"	Yellow, sand, 10 YR 7/6 dry
96" – 112"	Very Pale Brow, coarse sand, 10 YR 8/4
112" – 130"	Yellow, sand, 10 YR 8/6,
130" – 136"	White, fine sand, 10 YR 8/2,

Boring performed February 4, 2004
No standing water encountered
Seasonal high water table not encountered
Weather: 40°, Sunny
Boring elevation approximately at road elevation.

Robert C. Burdick P.E. 30929

Permit Number

Checked By/Date

RES*check* Compliance Certificate

New Jersey Energy Subcode

RES*check* Software Version 3.5 Release 1a
Data filename: Untitled.rck

COUNTY: Ocean
STATE: New Jersey
HDD: 5000
CONSTRUCTION TYPE: Single Family

DATE: 02/05/04
DATE OF PLANS: 2/04/04

PROJECT INFORMATION:
KRISTI SHAY CONSTRUCTION
LOT 12 BLOCK 851 1736 FORGE POND RD
BRICK TOWNSHIP, OCEAN COUNTY

COMPLIANCE: Passes

Maximum UA = 591
Your Home UA = 513
13.2% Better Than Code (UA)

	Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Glazing or Door U-Factor	UA
Ceiling 1: Raised or Energy Truss	917	19.0	0.0		45
Wall 2: Wood Frame, 16" o.c.	545	13.0	0.0		45
Wall 4: Wood Frame, 16" o.c.	482	13.0	0.0		39
Wall 5: Wood Frame, 16" o.c.	556	13.0	0.0		46
Wall 3: Wood Frame, 16" o.c.	581	13.0	0.0		48
Wall 1: Masonry Block with Empty Cells:No Insulation	928				290

Furnace 1: Forced Hot Air, 94 AFUE
Air Conditioner 1: Electric Central Air, 10 SEER

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 New Jersey Energy Subcode requirements in RES*check* Version 3.5 Release 1a (formerly MEC*check*) and to comply with the mandatory requirements listed in the RES*check* Inspection Checklist.

Builder/Designer _____ Date 2.5.2004

FOR ALL PERMITS AFFECTING A RESIDENTIAL STRUCTURE (REGARDLESS IF A FIRE PERMIT IS REQUIRED) A MINIMUM OF 1 (ONE) BATTERY OPERATED OR ELECTRIC SMOKE DETECTOR IS REQUIRED ON EACH LEVEL AND IN THE VICINITYOF THE SLEEPING ROOMS. AS OF APRIL 7, 2003 THE STATE OF NJ REQUIRES THE INSTALLATION OF AT LEAST 1 (ONE) CARBON MONOXIDE DETECTOR IN THE VICINITY OF ALL SLEEPING ROOMS. THIS APPLIES TO ALL DWELLING UNITS CONTAINING A FUEL BURNING APPLIANCE OR ATTACHED GARAGE.

For work not requiring a fire inspection for fire alarms in accordance with the code, homeowners or their agents (contractors) shall be required to confirm the installation of these devices. This may be done by signing the below affidavit in lieu of an inspection.

******PLEASE READ AND SIGN******

I hereby certify that a minimum of one smoke detector is installed and is operational on each level of this residential structure in the immediate vicinity of the sleeping rooms. I further certify that a minimum of one carbon monoxide detector is installed and operational in the vicinity of the sleeping rooms. Also, I understand that failure to install and maintain these devices in an operational condition is a violation of the New Jersey Administrative Code 5:23 and may subject me to penalties as prescribed by law.

NAME: RAISTI-SHAY CONSTRUCTN

SIGNATURE: [signature] DATE: 2/10/04

BLOCK: 851 LOT: 12 ADDRESS: 1736 FORGE POND Rd

Applicable to Ordinance 720-92
This form must be handed in with permit application or a permit will not be issued.

TOWNSHIP OF BRICK
Debris Form

Work Site Address 1736 Forge Pond Rd

Block 851 Lock 12

Contractor Kristi Shay Construction, Inc

Contractor's Address 63 Channel Dr.

Type of Construction (minor, new home) New home

Type of Debris (shingles, siding, wood, etc.) Shingles - siding - wood

Party Responsible for removal Sindel Carting

Dumpster Size 40 Yard

Destination of Debris Discard OC Landfill

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclable.

Generator's Certification: Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation.

Sam Reynolds
Signature

2/10/04
Date

SAM REYNOLDS
Print Name

SHADE TREE PERMIT

RECEIPT OF FEES

BLOCK: 851

LOT: 12

FEE: $ 25.00

INSPECTION: _____

APPLICATION FOR SHADE TREE PERMIT
ORDINANCE # 158-E-99

1. Name of Applicant: Kristi Shay Construction, Inc.

   Address: 63 Channel Dr. Brick NJ 08723
   Give name and address of person applying for permit. If Applicant is other than owner, give and identify names and addresses of both.

   Telephone: 732 477-4665

2. Block: 851 Lot: 12
   This information is located on deed or tax bill

3. Address if different from Applicant: _____
   Give street & number if one is assigned. If there is no street number assigned, estimate distance and direction from nearest intersection or other easily recognizable landmark.

4. Location of trees on property SEE SURVEY and number of trees presently on property _____.

   A. FOR INDIVIDUAL BUILDING LOTS:
   Provide either a copy of a recent survey or a sketch of the property drawn to scale including any pertinent distances not easily read from the sketch. Include existing buildings, driveways, and other construction IN SOLID LINES. Show all existing trees (see note below) with a circle. Trees may be keyed as to genus and species if desired, otherwise include a C inside circle for coniferous (pine, etc.) trees and a D for deciduous trees.

   *Note Trees to be removed will have an X through the circle.

   If removal is desired because of proposed construction of any kind, include such construction in DOTTED LINES and identify if planting of new trees (including but not limited to those in note below) is proposed in application to replace those removed, or for any reason, show approximate proposed location with a DOTTED circle and specify species and approximate planting size (height & caliper)

   There should be a minimum of one tree for each 2000 square foot after all tree removal and replacement (e.g. and 80 x 100 ft lot includes 8000 sqft & would require a minimum of 4 trees).

   B. FOR OTHER ACREAGE
   Include copy of subdivision plot plan or equivalent outling all wooded areas and solitary trees. Identify each (e.g. "heavily wooded mature oak with scattered Dogwood" or "sparsely wooded mixed Pitch Pine and small oak", etc.)

APPLICATION FOR SHADE TREE PERMIT
Page 2

*Note "Tree" for the purpose of this permit means
1. Any live coniferous tree 4' or more DBH (diameter breast high).
2. Any deciduous tree (live) 3' or more DBH.
3. Any live American Holly or Dogwood 1' or more, one foot above ground.
4. Any live Laurel 3' or more across root crown.

Date: 2/10/04

Name of Applicant: Kristi Shay Construction, Inc

Address: 63 Channel Drive

Brick NJ 08723

Block: 851 Lot: 12

Residential ✓ Commercial _____

Address if different from Applicant: _____

_____

SEE SURVEY

LOCATION OF TREES ON PROPERTY

SEE SURVEY

NUMBER OF TREES PRESENTLY ON PROPERTY

Fees:

$5.00 per tree (maximum $25.00) on individual building lot

$25.00 per acre for approved subdivision/site plans

Amount of fee: $ 25.00

Reviewed by _____

Approved _____ Date: 3/11/04

Township Engineer

Kwiecinski and Associates
ARCHITECTS
architecture space planning

February 5, 2004

Brick Township Building Department
401 Chambers Bridge Road
Brick, N.J. 08723

Re: New Residence for:
Kristi Shay Construction
1736 Forge Pond Road
Block 851 Lot 12
Brick, N.J.

Dear Construction Official,

As per Ordinance No. 354-2D-03, following is the building height information for the above referenced project:

Building Eave Height – 19'-6"
Building Height – 24'-0"
Building Ridge Height – 29'-6"

Based upon the proposed heights shown, the building is within the height requirements of the township ordinance.

Please feel free to contact our office should you have any additional questions.

Very Truly Yours,

Kenneth S. Kwiecinski

1100 Ocean Road ▪ Point Pleasant ▪ New Jersey ▪ 08742
Phone: 732-295-4515 ▪ Fax: 732-295-5330

TOWNSHIP OF BRICK

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

Department of Administration & Finance
Office of Land Use Management
Sean Kinnevy
Zoning Officer
(732) 262-1041
skinn@twp.brick.nj.us

Kate MacDonald
Asst. Zoning Officer
(732) 262-1043
Fax: (732) 262-8954
kmacdon@twp.brick.nj.us
http://www.twp.brick.nj.us

March 4, 2004

Samuel J. Reynolds
Kristi-Shay Construction
63 Channel Drive
Brick, NJ 08723

Re: Block: 851 Lot: 12
1736 Forge Pond Road

Dear Mr. Reynolds,

Your zoning permit application for a house on the referenced property can not be approved because the property is located in the R-10 Single Family Residential Zone in which a minimum front yard setback of 30 feet is required and you are proposing a setback of only 26 feet.

In order to build the house as proposed the Zoning Board of Adjustment must first approve a variance. Variance application forms can be obtained from Christine Papa, Board Secretary. Mrs. Papa can be reached at 732-262-1049 for additional information.

Very Truly Yours,

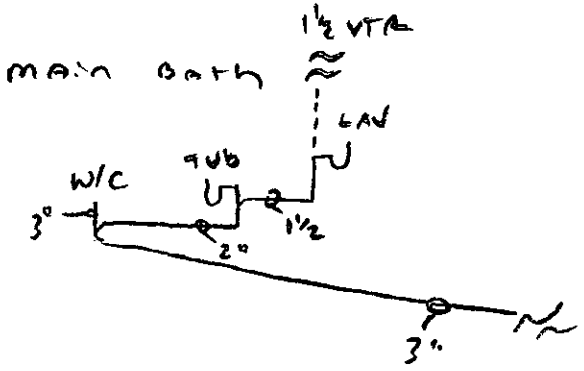
Kate MacDonald

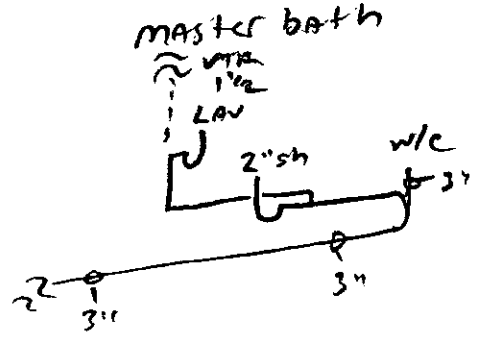
Kate MacDonald
Assistant Zoning Officer

C: Scott R. MacFadden, Business Administrator
Michael P. Fowler, AICP/PP, Municipal Planner
Sean Kinnevy, Zoning Officer
Daniel Newman, Construction Official

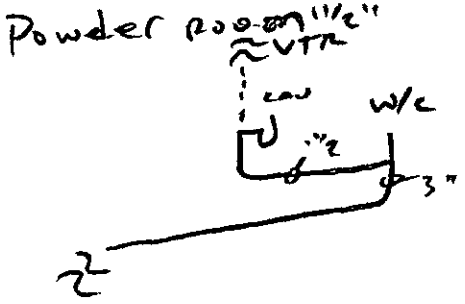
Received 03-05-04

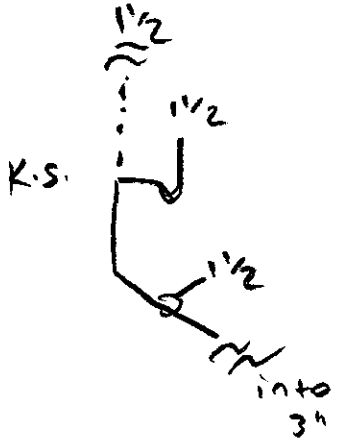
1736 Forge Pond Rd
Brick

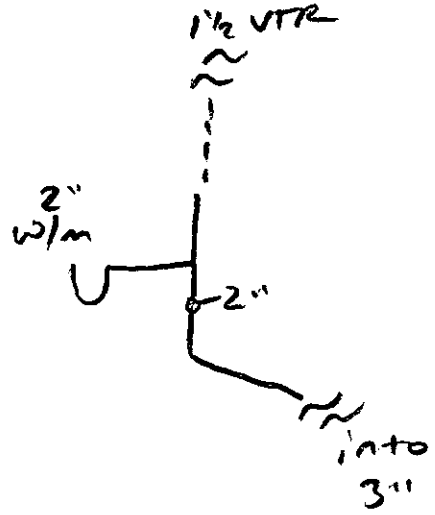




3/11/04



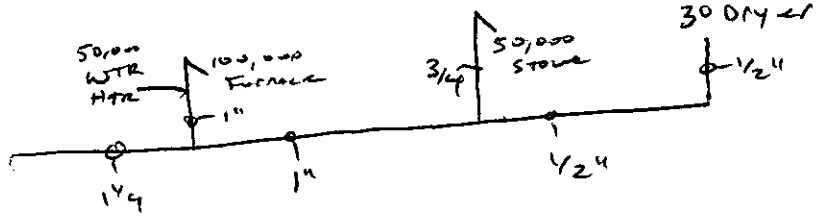




Jemco Pt H Inc
5 Amy ct
Howell NJ
07731
732-458-4744
Lic # 11191

Furnace	100,000
WTR htr	50,000
Stove	50,000
Dryer	30,000
TOTAL load	230,000 BTH

D.L. 30'
1¼ black pipe



30' CHART
1¼ - 230,000

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER Kristi Shay Const DATE 3/11/04

PROPERTY ADDRESS 1736 Forbie Pond Rd BLOCK 851 LOT 12

ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMBING FIXTURES	NUMBER	(sfu) WATER UNITS	(dfu) DRAINAGE
1:BATHROOM GROUP	2.5	8.0	
2:KITCHEN GROUP	1	2.0	
3:~~WATER~~ CLOSETS			
4:LAVATORY			
5:BATH TUB			
6:SHOWER STALL			
7:KITCHEN SINK			
8:SERVICE SINK			
9:LAUNDRY TRAY			
10:DISHWASHER			
11:WASHING MACHINE	1	4.0	
12:URINAL			
13:FLOOR DRAIN			
14:DRINK FOUNTAIN			
15:AIR COND WATER COOLED			
16:DENTAL UNIT			
17:LAWN SPRINKLE			
18:FIRE SPRINKLE			
19:HOSE BIBS	2	3.5	

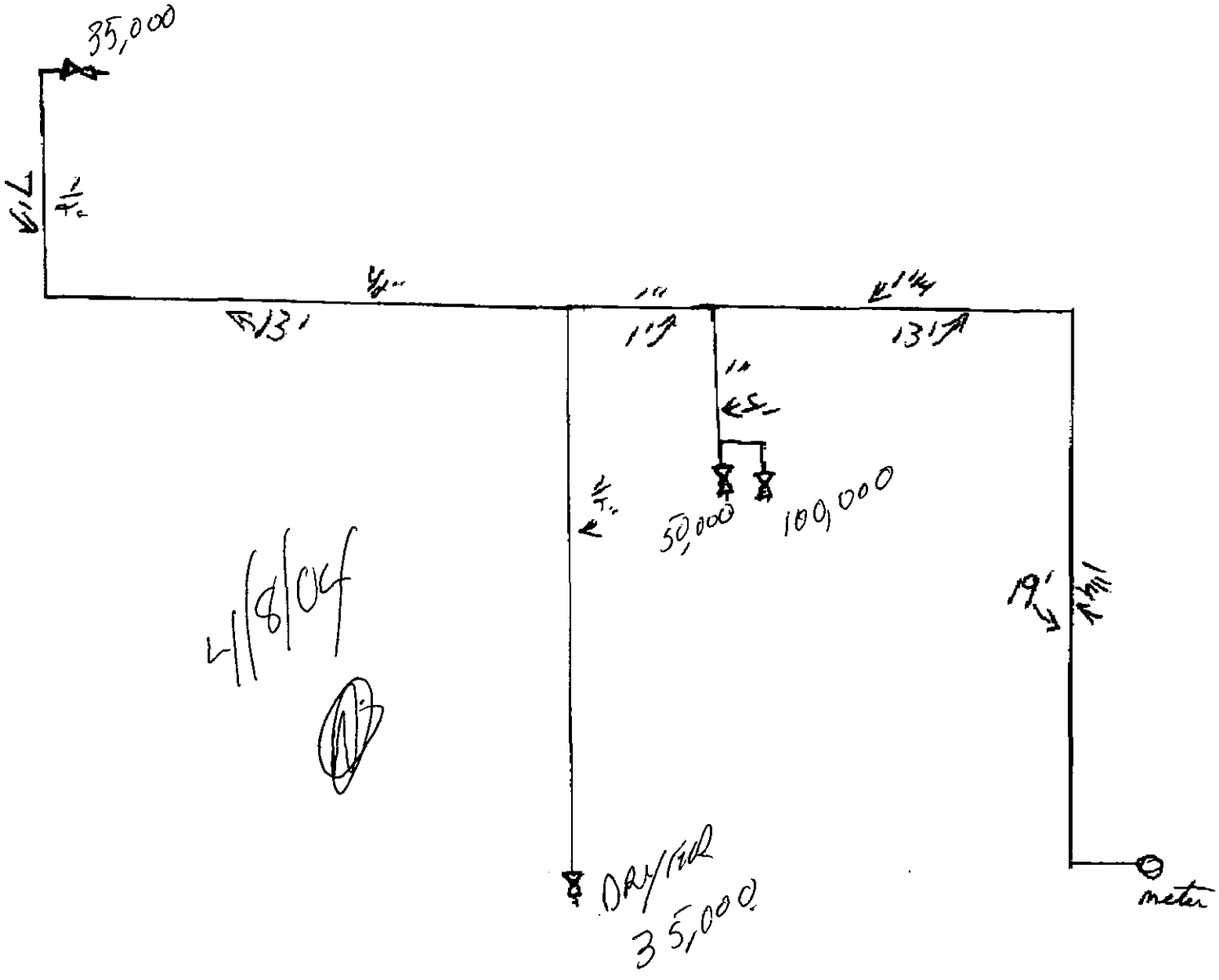
TOTAL 17.5

GALLONS PER MINUTE _____

SIZE OF SERVICE 3/4"

DATE: 3/11/04 APPROVED: _____

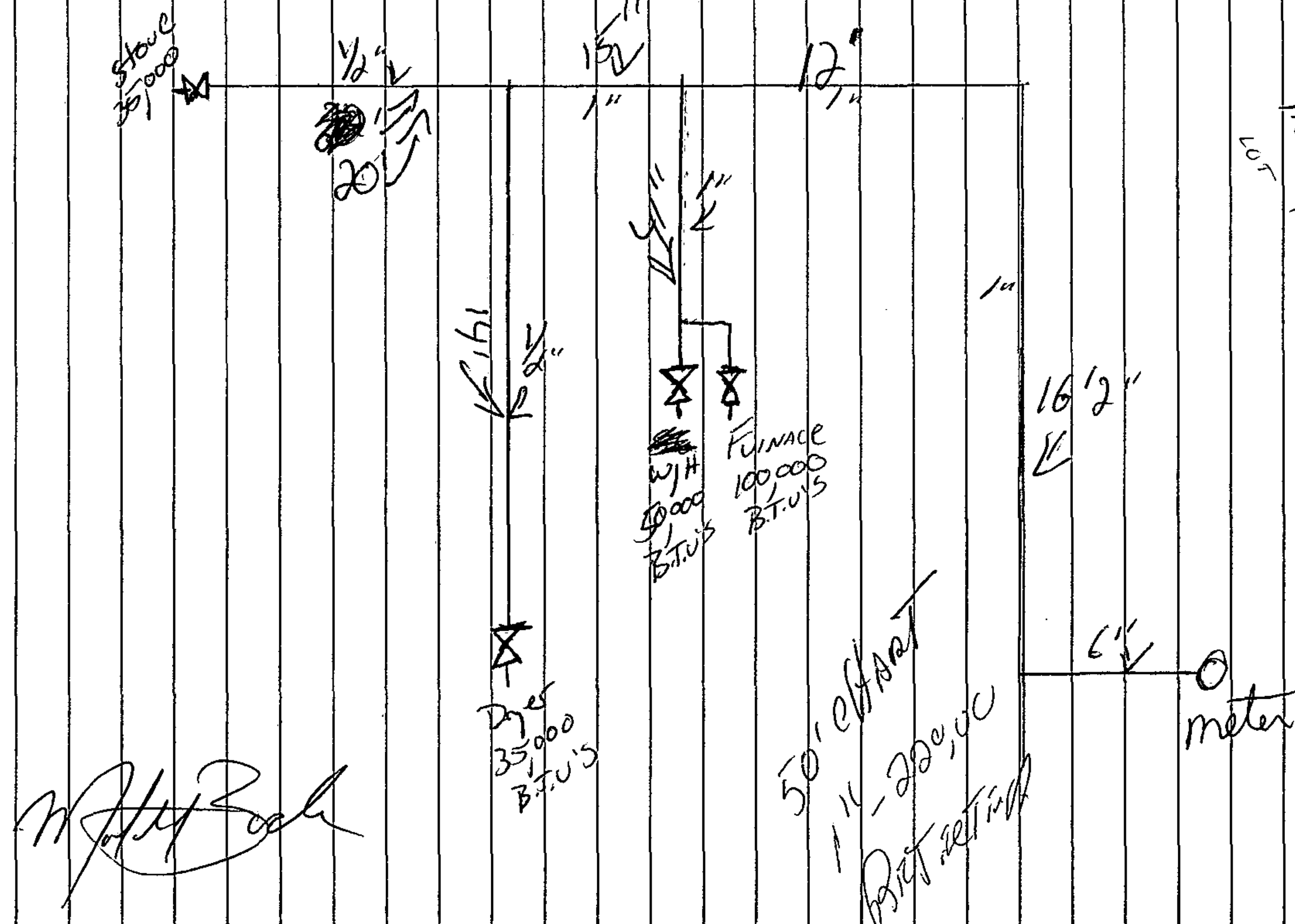
ATTN:
MARK HIBBARD



4/8/04

04/08/2004 12:53 7322373300 BODEMECHANICAL PAGE 01

1736 Forge Pond Rd
MUC 851
LOT 12



Plumbing Plan Review Record

Work site location: 1736 FORGE POND RD.

Building Description: _____

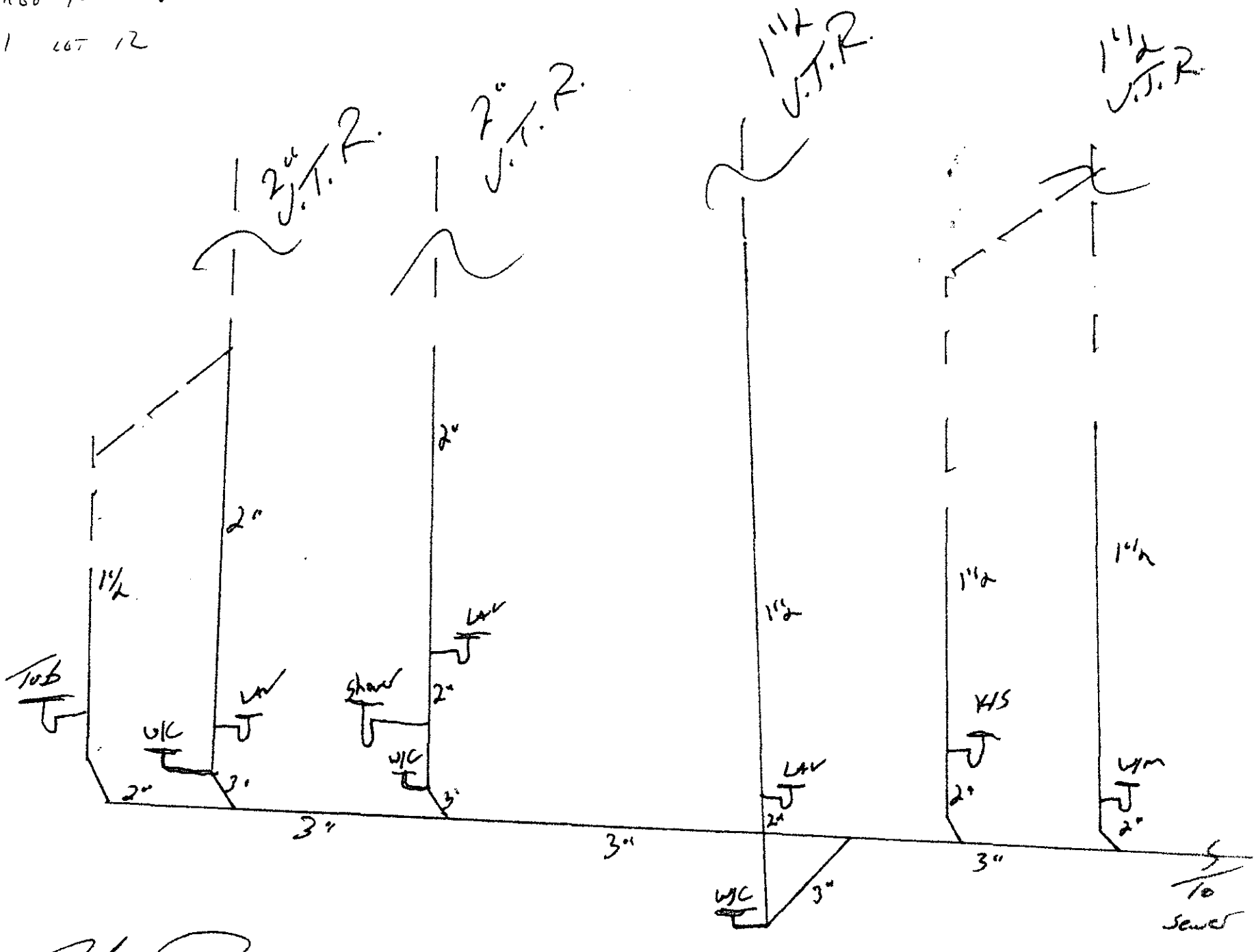
Reviewed: _____

Date: 4/8/04

Correction list

No.	Description	Code section
1.	Gas Drawing does not meet code	
	50 CFM @ 1" = 220,000 BTUs	
	Rejected	
		Bode Mechanical 732-921-6094

1736 FORGE POND 06
BLK 451 LOT 12



Kwiecinski and Associates
ARCHITECTS
architecture space planning

April 22, 2003

Brick Township Building Department
401 Chambers Bridge Road
Brick, N.J. 08723

Re: New Residence for:
Kristi Shay Construction
1736 Forge Pond Road
Block 851 Lot 12
Brick, N.J.

Dear Construction Official,

Pleased be advised that we have changed the floor framing material at the above referenced project location. In lieu of 2" x 10" joists, we have utilized 9 ½" deep wood I-Beam joists which are installed as per the plan in regard to spacing and doubling of joists. This change is acceptable as the I-Beam joists have equal or greater capacity than the original 2" x 10" joists specified.

Please feel free to contact our office should you have any additional questions.

Very Truly Yours,

Kenneth S. Kwiecinski

Rec 4/21/04

1100 Ocean Road ▫ Point Pleasant ▫ New Jersey ▫ 08742
Phone: 732-295-4515 ▫ Fax: 732-295-5330

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
(732) 458-7000

CERTIFICATE OF COMPLIANCE

Date 6/10/04

NAME Kristi Shay Const

ADDRESS 63 Channel Dr. Brick NJ 08723

PROPERTY LOCATION 1736 Forge Pond Rd.

Account No L431207 Block 851 Lot 12

I hereby certify that the above applicant has complied with all Rules and Regulations of this Authority and has paid all required fees and charges.

For the Authority

TOWNSHIP OF BRICK

For Information Call:

Permit No. 04-0814

APPROVAL FOR BUILDING

	Date	Inspector
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Mechanical		
[ ] Other PPD Codes For Deal		
[X] Final	6/10/04	JKa

U.C.C. Form F-221B

TOWNSHIP OF BRICK

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

Department of Administration & Finance
Office of the Tax Collector
Jo Anne R. Lambusta, CTC
Tax Collector
(732) 262-1021
Fax: (732) 477-3746
jlambusta@twp.brick.nj.us
http://www.twp.brick.nj.us

Receipt for Public Works Garbage Can Deposit

Date: 6-8-04

Block: 851 Lot: 12

Property Address: 1736 FORGE ROAD

Date of Payment: 6-8-04

Tax Collectors Office

04-0814

Certificate of Occupancy Single Family Dwelling

Address 1736 Forge Pond Rd Block 851 Lot 12

Final Inspections:

1. Final Building
2. Final Electric
3. Final Plumbing
4. Final Fire
5. Certificate of Compliance
6. Final Engineering
7. Final Ocean County Soil
8. Home Owners Warranty/Affidavit

Report of compliance from Ocean County Soils is needed when more than 5000 sq. ft. are disturbed, always when more than 1 house is constructed (Major/Minor Subdivisions).

Building _____ Approval Date 6/10/04 OK

Plumbing _____ Approval Date 6/9/04 OK

Fire _____ Approval Date 6/8/04 OK

Electrical _____ Approval Date 6/10/04 OK

Cert. Of Compliance _____ Approval Date 6/10/04 OK

HOW/ Affidavit _____ Approval Date 165855 DCA

Engineering _____ Approval Date 5/20/04 OK

Soil _____ Approval Date n/a

Affordable Housing _____ Approval Date EXEMPT

Occupancy Load _____ Approval Date n/a

Garbage Can Receipt _____ Approval Date 6/8/04 OK

CO Application _____ Approval Date 6/8/04 OK

INSPECTOR: K Shafer

DATE: 5/20/04 04-0814

JOB: /

SECTION: Forge Pond

TYPE OF WORK: Final

WEATHER: Sunny

LOCATION: 1736 Forge Pond Rd

TEMPERATURE: 70's

BLOCK: 851 LOT: 12

ENGINEERING RECOMMENDATIONS FOR CERTIFICATE OF OCCUPANCY INSPECTION CHECK LIST

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway	/	
2. Grading	/	
3. Sidewalk	/	
4. Road Pavement	/	
5. Landscaping & Sodding	/	
6. Clean-up Procedures	/	
7. Note on going construction in immediate area	/	
8. Safety	/	

COMMENTS REFERENCING ITEM NUMBER:

RECOMMENDATIONS:

☐ TEMP. C.O.

☒ FINAL C.O.

☐ DETAILED REINSPECTION

☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED

☐ PLANNING BOARD ENGINEER

EC Co. MUNICIPAL ENGINEER

I _____, Authorized representative of _____, hereby acknowledge the above deficiencies, and further realize that the Certificate of Occupany will be conditioned upon the acceptable resolution thereof within _____ days of the issuance of Certificate of Occupancy.

04-0814

Township of Brick

Counter Form

(PLEASE PRINT)

Change of Contractor + update

Site Location: 1736 Forge Pond Rd

Block: ~~55~~ 85/ Lot: 12

Owner's Name: Kristi Shay Const

Owner's Mailing Address: 63 Channel Dr

Brick NJ 08723

Phone: (732) 477 4665

BUILDING

Contractor:

Address:

Phone#:

Lis #

Federal Emp # or SSN

Technical Data

Description of Work:

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 Structure:

Volume of New Structure:

Total Land Disturbed:

Cost of Alteration: $

Cost of New Building: $

Total Cost of New Building Work: $

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

ELECTRICAL

Contractor: Dickson Electric

Address: 2597 Old Hooper Ave

Brick NJ 08723

Phone#: 732 920 6441

Lis #: 8392

Federal Emp # or SSN 222 707 689

Technical Data

Item	Quantity
Lighting Fixtures	~~22~~ 2
Receptacles	~~50~~
Switches	~~29~~ 3
Detectors	~~8~~ 2
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	~~4~~
Alarm Devices/FAC Panel	
Total	

Pool (Receptacles, Switches, Lights, Motor HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	~~1~~ 3 Ton KW
Space Heater/Air Handler	~~1~~ 10.5Kw KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	200 AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: $6,100

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name James C Dickson

CONTRACTOR'S SEAL

Change of contractor
Plumbing

Township of Brick
Counter Form
(PLEASE PRINT)

04-0814

Site Location: 1736 FUNGO PWD Rd
Block: 851 Lot: 12
Owner's Name: KRISTI-SHM. CONSTRUCT.
Owner's Mailing Address: 63 CHANNA PL
BRICK NJ 08723
Phone: (732) 477-4665

needs new Soil sketch

BUILDING

Contractor:
Address:

Phone#:
Lis #
Federal Emp # or SSN

Technical Data

Description of Work:

Type of Work

___New Building	___Siding
___Addition	___Fence
___Alteration	___Pool
___Roofing	___Demolition
___Asbestos Abatement	___Sign _____sq ft
___Fireplace wd/gas	

Building Characteristics

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

Cost of Alteration: $

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

ELECTRICAL

Contractor:
Address:

Phone#:
Lis #:
Federal Emp # or SSN

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	
Switches	
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	
Pool (Receptacles, Switches, Lights, Motor 1HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work:

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

Update

PLUMBING

Contractor: BODE Mech
Address: 312 Hayes Ave
Bayville, N.J. 08721
Phone #: 732-237-9300
Lis #: BTO-8957
Federal Emp # or SSN 22-3640638

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	3
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	1
Lavatory (BR Sink)	3
Shower	1
Floor Drain	
Sink	1 - Kitchen
Dishwasher	1
Drinking Fountain	
Washing Machine	1
Hose Bib	2
Gas Piping	1
Fuel Oil Piping	
Water Heater	1
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Air Conditioner (Condensate Drain)	1
Septic Tank Closure	
Sewer Service Connection	1
Water Service Connection	1
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	
Sump Pump	
Pool Heater	
Other:	

Estimated Cost of Plumbing Work 2,500.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: Mark Bode

Please Print Name: Mark S Bode

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
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas/ Oil Fired Appliances:
Gas Stove
Gas Dryer
Furnace (Gas or Oil)
Gas Fireplace
Gas Logs
Total Appliances

Wood Burning Stove
Wood Fireplace
Other:

Estimated Cost of Fire Work

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Print Name:

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: 1736 FORGE POND Rd.
Block: 851 Lot: 12
Owner's Name: KNIGHT-SHAY CONSTRUCTION
Owner's Mailing Address: 63 CHANNEL DR
BRICK NJ 08723
Phone: (732) 477-4665

BUILDING

Contractor: KNIGHT-SHAY CONSTRUCTION
Address: 63 CHANNEL DR
BRICK NJ
Phone#: 732 477-4665
Lis # 26379
Federal Emp # or SSN 22-3528180

Technical Data

Description of Work:

NEW SINGLE FAMILY HOME
4 BR 2½ BATH
BASEMENT
1 CAR GARAGE

Type of Work

X New Building	___Siding
___Addition	___Fence
___Alteration	___Pool
___Roofing	___Demolition
___Asbestos Abatement	___Sign _____sq ft
___Fireplace wd/gas	

Building Characteristics

Use Group Present: 1RC-R5 Proposed: _____
No of Stories: 2
Height of Structure: 25'
Area of the largest floor: 940 SQ FT
Area of New Structure: 1845 SQ FT
Volume of New Structure: 18,492 CU FT
Total Land Disturbed: 2200 SQ FT

Cost of Alteration: $_____

Cost of New Building: $ 50,000.00

Cost of Site Work $_____

Total Cost of New Building Work: $ 50,000.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: Sam Reynolds
Please Print Name SAM REYNOLDS

ELECTRICAL

Contractor: Robert J. McLaughlin Elec. Contr. Inc.
Address: 12- 8th ST
BARNEGAT, N.J. 08005
Phone#: 609-660-0306
Lis #: 10990
Federal Emp # or SSN 22-345 1834

Technical Data

Item	Quantity
Lighting Fixtures	20
Receptacles	50
Switches	25
Detectors	6
Light Poles	
Motors w/ Fract. HP	3
Emergency & Exit Lights	
Communication Points	4
Alarm Devices/FAC Panel	
Total	

Pool (Receptacles, Switches, Lights, Motor 1HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	1 - 1.2 KW
Garbage Disposal	HP
A/C Unit –Central Air	- 1 - 4 TON KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	1 - 150 AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	1 - GAS
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: 3,500.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: Robert J McLaughlin
Please Print Name ROBERT J McLAUGHLIN

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor: Jemco P&H Inc
Address: 5 Amy Court
Howell NJ 07731
Phone #: 732-458-4744
Lis #: 11191
Federal Emp # or SSN 22-3816578

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	3
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	1
Lavatory (BR Sink)	3
Shower	1
Floor Drain	
Sink	1
Dishwasher	
Drinking Fountain	
Washing Machine	1
Hose Bib	✓
Gas Piping	
Fuel Oil Piping	
Water Heater	1
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Air Conditioner (Condensate Drain)	
Septic Tank Closure	
Sewer Service Connection	
Water Service Connection	
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	A/C - 1
Sump Pump	
Pool Heater	
Other:	see electrical

Estimated Cost of Plumbing Work $3,500.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: [signature]

Please Print Name: Anthony Cacciotti

CONTRACTOR'S SEAL

FIRE

Contractor: KRISTI-SHAY CONSTRUCTION
Address: 63 CHANNA DR
BRICK NJ 08723
Phone #: 732 477-4665
Lis #: 26378
Federal Emp # or SSN 22-3528180

Technical Data

Description of Work:

Heating Type: X Gas ___ Oil ___ Electric ___ Solar
Heating System is X New ___ Existing
Location of Furnace/Boiler: BASEMENT
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	6
Heat Detectors	1 C.O.
Total	7
Stand Pipes	
Kitchen Hood Exhaust System	

Pre-Engineered Systems:
CO2 Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas/ Oil Fired Appliances:

Gas Stove	1
Gas Dryer	1
Furnace (Gas or Oil)	1
Gas Fireplace	
Gas Logs	
Total Appliances	4

Wood Burning Stove
Wood Fireplace
Other:
H/W HTR

Estimated Cost of Fire Work $500.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature: [signature]

Print Name: SAM REYNOLDS

Change Contractor

04-0814

Township of Brick

Counter Form

(PLEASE PRINT)

Site Location: 1736 Forge Pond Rd

Block: 851 Lot: 12

Owner's Name: Kristi Sky Const

Owner's Mailing Address: 63 Channel Dr

Brick NJ 08723

Phone: (732) 477-4665

BUILDING

Contractor:

Address:

Phone#:

Lis #

Federal Emp # or SSN

Technical Data

Description of Work:

Type of Work

___New Building	___Siding
___Addition	___Fence
___Alteration	___Pool
___Roofing	___Demolition
___Asbestos Abatement	___Sign _____ sq ft
___Fireplace wd/gas	

Building Characteristics

Use Group Present: _____ Proposed: _____

No of Stories:

Height of Structure:

Area of the largest floor:

Area of New Structure:

Volume of New Structure:

Total Land Disturbed:

Cost of Alteration: $

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

DR# 31146891

ELECTRICAL

Contractor: Dickson Electric

Address: 2597 Old Hooper Ave

Brick NJ, 08723

Phone#: 732-920-6441

Lis #: 8392

Federal Emp # or SSN 22-2707689

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	
Switches	
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	
Pool (Receptacles, Switches, Lights, Motor 1HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: 15,700

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name James C. Dickson

CONTRACTOR'S SEAL

NJ Department of Community Affairs
Division of Codes and Standards
Bureau of Homeowner Protection
New Home Warranty Program
PO Box 805
Trenton, NJ 08625-0805

received 11/27/04

Department Of Community Affairs

Certificate of Participation

in the New Home Warranty Security Fund

Owner ☐ **Check if for Common Elements***

1 Emad & Sanaa Ghatley
Name of Owner who will be first resident. *When used for common elements, enter name of condominium development. See builder instruction sheet. A separate Certificate of Participation is required for each individual building in a condominium development.*

Registered Builder-Warrantor**

2 Kristi Shay Construction, Inc.
Name
63 Channel Drive
Street and Number (Mailing Address)
Brick NJ 08723
City State Zip Code
Phone Number (732) 477-4665
NJ Builder Registration Number 026379
Print Builder Name Samuel Reynolds
Sam Reynolds
Registered Builder's Signature
Where title is transferred, the seller must be the registered builder and warrantor.

New Dwelling Location

3 17316 Forge Pond Road
Street Name and Number
Building Number Unit Number Total Number of Units in Building
Brick NJ 08723
City Zip Code
851 12
Block Number Lot Number
Brick Ocean
Municipality County 1506

Commencement Date of Warranty

4 Commencement Date*** 05 20 04
Month Day Year
****The date of closing or first occupancy, whichever occurs first. ANY CHANGE IN THE COMMENCEMENT DATE MUST BE REPORTED TO THE PROGRAM.*

Premium Payment

5 a.
Selling Price**** $ 329,900.00
Amount of Premium $ 839.00
(Rate .00255 x Selling Price)
*****Any change in the selling price and premium must be reported to the Program along with supplemental payment if applicable.*
A premium payment is not required if this certificate is for common elements in a condominium development.

b.
☐ Check if house is constructed on owner's lot. Then calculate warranty premium as follows:
Total Contract Price _____ For Office Use Only
Amount of Premium $ _____
(1.25 x Total Contract Price x Rate _____)

FHA Mortgage

6 ☐ Check if FHA Mortgage
FHA Case Number ☐☐☐–☐☐☐☐☐☐
☐ Check if VA Mortgage
VA Case Number _____

Exclusions

7 ☐ Check if exclusion sheet is included.

Building Type (check one)

8 ☒ Single family detached (101)
☐ Townhouse (102)
☐ Two Family (103)
☐ Side by Side
☐ Top/Bottom
☐ Condominium - *three or four units in each building* (104)
☐ Condominium - *five or more units in each building* (105)

Construction Type (check one)

9 ☐ Premanufactured (industrial or modular) (M)
☒ Conventional Construction (C)

Stories

10 Number of stories 2

Owner Type (check one)

11 ☐ Condominium or Cooperative (C)
☐ Homeowners' Association - fee simple (H)
☒ No Homeowners' Association - fee simple (N)

PRED

12 PRED Registration or Exemption Number (R or E)

Note: See reverse side for assignment of property.

Note to Owner:
Any disagreement with information in blocks 1, 3, 4, and 5 on this certificate must be reported to the New Home Warranty Program within 45 days from its receipt. Your Builder/Warrantor must give you a Homeowner's Booklet with this certificate. If you did not receive it, write to the above address.

This certifies that the above described dwelling unit carries a New Home Warranty issued pursuant to the New Home Warranty and Builders' Registration Act, NJSA 46:3B-1 et seq. Said warranty is valid for varying periods of 1, 2, and 10 years.

VALIDATION STAMP
VALIDATION STAMP
CERTIFICATE NUMBER
165855 MAY -3 05
WARRANTY NUMBER

7685c rev.7/93

MUNICIPAL COPY

TOWNSHIP OF BRICK
PLOT PLAN REVIEW
CHECKLIST

BLOCK 851 LOT 12 DATE RECEIVED _____

PROPERTY ADDRESS 1736 Forge Pond Rd

APPLICANT Kristi Shay Construction Inc PHONE 732 477-4665

ADDRESS 63 Channel Dr Brick Nj 08723

CONTRACTOR Kristi Shay Construction Inc PHONE 732 477-4665

ADDRESS 63 Channel Dr Brick Nj 08723

TYPE OF WORK NEW HOME ZONING APPROVAL _____

FLOOD ZONE C FLOOD ELEV. _____

PANEL # _____ MAP # _____ DATE _____

PLANNING BOARD/BOARD OF ADJUSTMENT APPROVED YES _____ NO _____

		YES	NO	N/A
1.	PLAN SIGNED & SEALED	X		
2.	SCALE OF NOT LESS THAN 1"-50'	X		
3.	EXISTING ELEVATIONS (NGVD IN FLOOD ZONES)	X		"C"
4.	PROPERTY LINES, CORNERS, BEARINGS & DISTANCES	X		
5.	STREET GUTTER, CURB & CENTER LINE ELEVATIONS	X		
6.	CONTOURS; 1' INCREMENTS	—		
7.	ADJACENT DWELLING CORNERS & CORNER ELEVATIONS	X		
8.	PROPOSED GRADING/ELEVATIONS	X		
9.	GARAGE/1ST FLOOR/CRAWLSPACE/BASEMENT ELEVATIONS	X		
10.	PROPOSED DWELLING, DIMENSIONS & CORNER ELEVATIONS	X		
11.	METHOD OF DRAINAGE	X		
12.	NORTH ARROW	X		
13.	DRIVEWAY WIDTH/TYPE	X		
14.	DIMENSIONS/ACREAGE OF PARCEL/SETBACK LINES	X		
15.	PROPERTY ADDRESS/LOT & BLOCK NUMBER	X		
16.	SIDEWALK, CURB AND APRONS	—		—
17.	PARKING AREAS	X		
18.	UTILITY & CONNECTIONS; WATER/SEWER/GAS/ELECTRIC	X		
19.	PLANTINGS, SEEDLINGS, SCREENINGS, FENCES, SIGNS	—		—
20.	STREET WIDTH, STREET NAME, RIGHT-OF-WAY WIDTH	X		
21.	LIMITS OF CLEARING	—		—
22.	BASEMENTS/DEDICATIONS/ENVIRONMENTAL CONSTRAINTS	—		—
23.	PRIOR APPR: ARMY CORP/NJDEP/SOIL EROSION, ETC.	—		—
24.	EXISTING STRUCTURES	X		
25.	RETAINING WALLS/SERVICE WALKS/OTHER MISC. ITEMS	—		—

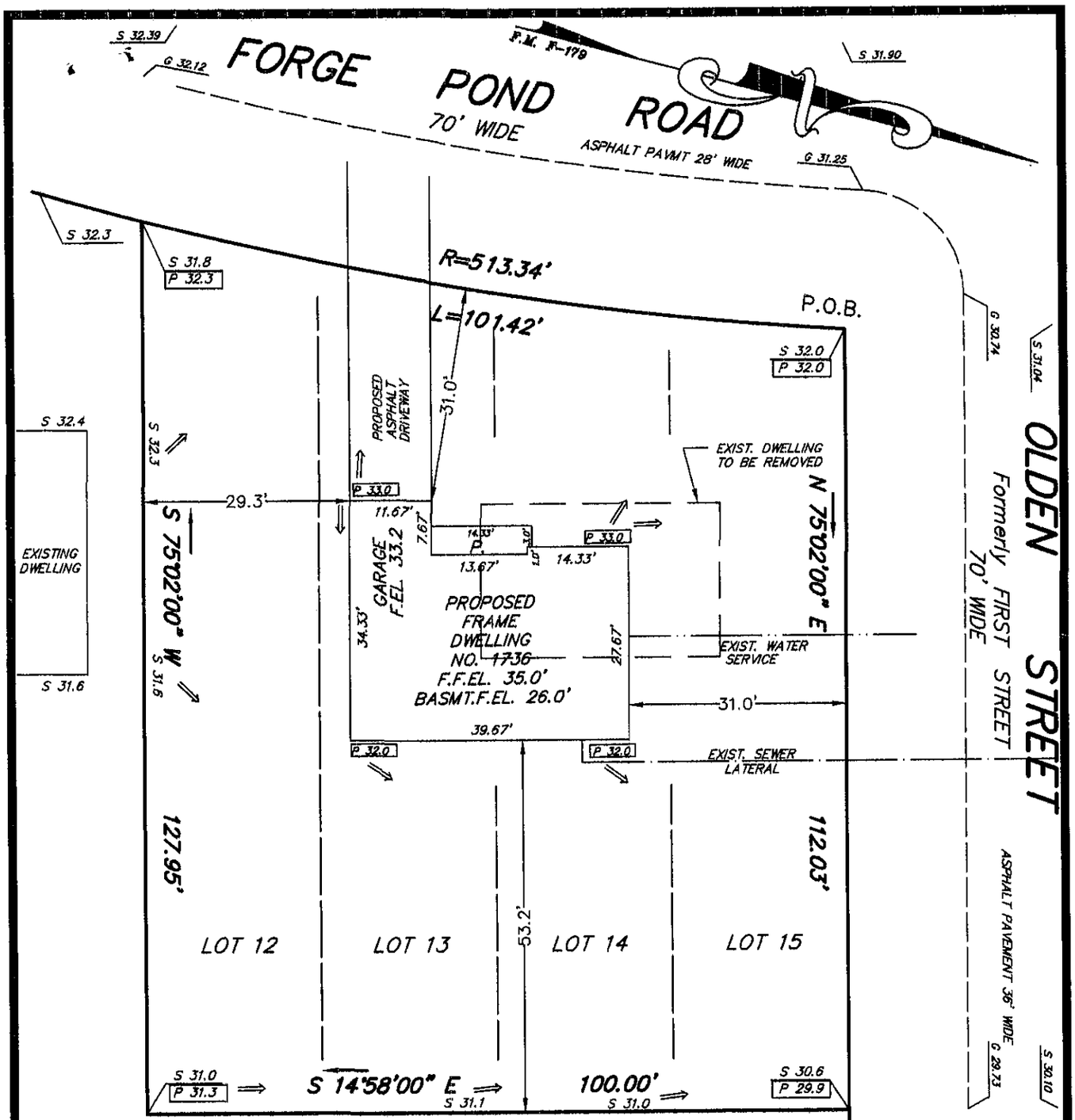
PLOT PLAN REVIEW

APPROVED 3/11/04 REJECTED _____ SIGNED _____ DATE 3/11/04

REVISION

APPROVED _____ REJECTED _____ SIGNED _____ DATE _____

COMMENTS _____



LEGEND:
S 0.00 = Spot Elevation
p 0.00 = Proposed Fin. Grade
TC 0.00 = Top of Curb Elev.
G 0.00 = Gutter Elev.
←—— = Direction of Runoff
Elevations refer to N.G.V.D. 1929

P.Q. IS IN FLOOD HAZARD ZONE C AS PER F.I.R.M. # 345285-0004

ALSO KNOWN AS LOT 12 BLOCK 851 ON THE BRICK TOWNSHIP TAX MAP.

REVISED 3/04/04 - MOVE PROP. DWELLING
REVISED 2/27/04 - ADD PROP. DWELLING & GRADES

SURVEY OF PROPERTY

LOTS 12, 13, 14 & 15 BLOCK 1

AMENDED MAP OF LAURELTON PARK, WATERFRONT SECTION

BRICK TOWNSHIP

OCEAN COUNTY NEW JERSEY

Filed Map No. F-179 DATE FILED 5/13/47

THIS SURVEY IS CERTIFIED AS HAVING BEEN PREPARED UNDER MY DIRECT SUPERVISION TO:
KRISTI SHAY CONSTRUCTION, INC.
AMBOY NATIONAL BANK
KING, KITRICK, JACKSON & TRONCONE, LLC
MID-STATE ABSTRACT COMPANY, INC./
FIRST AMERICAN TITLE INSURANCE COMPANY

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

MORRIS & GLASGOW, INC.
LAND SURVEYING & PLANNING
1119 ARNOLD AVENUE
POINT PLEASANT BOROUGH, N.J. 08742
732-899-0965
CERT. OF AUTHORIZATION NO. 24GA28024500

Elbert Morris, Pres. 2/9/04

ELBERT MORRIS Date

New Jersey Lic. Professional Land Surveyor No. 8509

Date:	Scale:	Job No.	Map No.
2/09/04	1"=20'	04-019	2-3315

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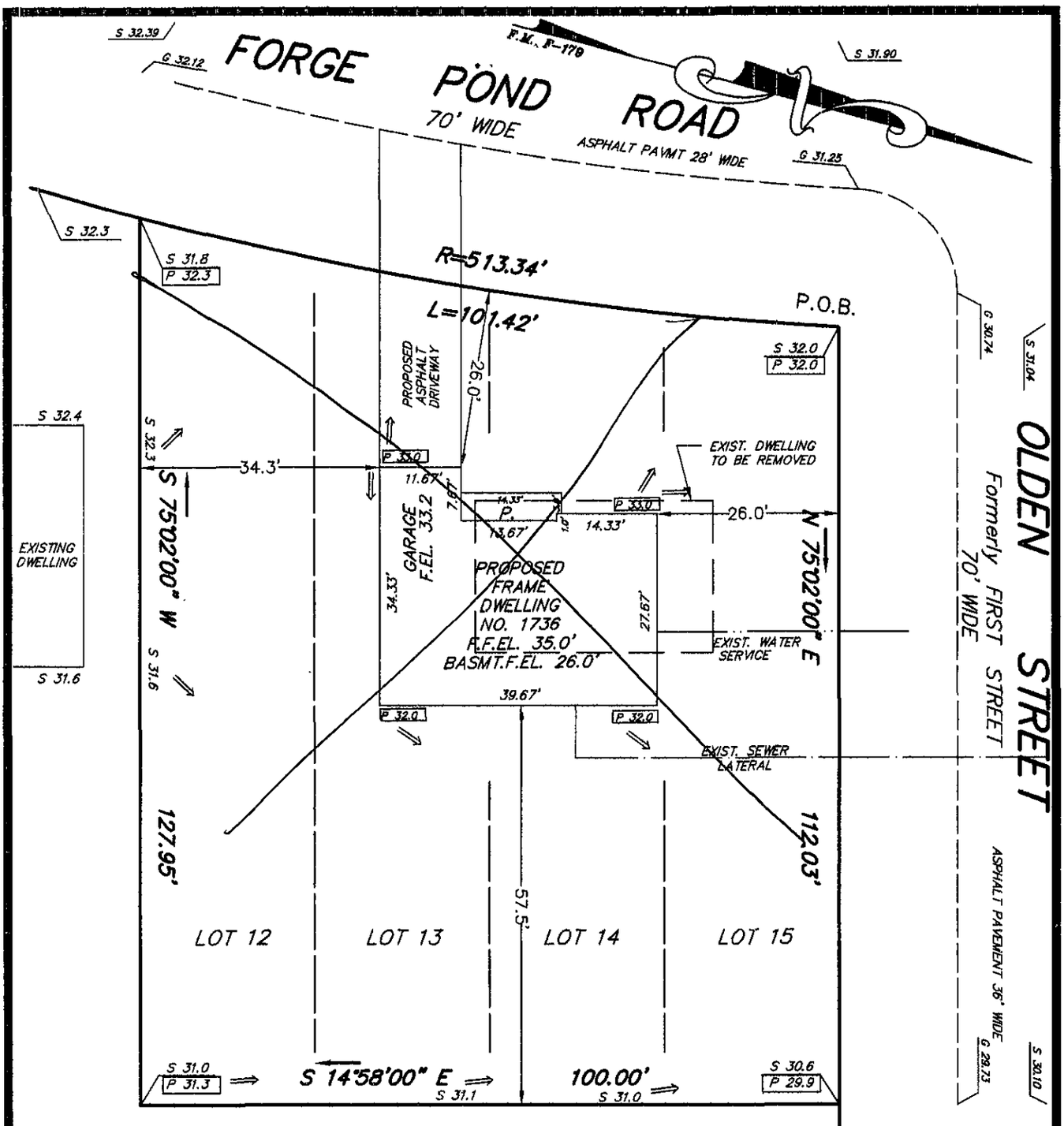

LEGEND:
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REVISED 2/27/04 - ADD PROP. DWELLING & GRADES

SURVEY OF PROPERTY

LOTS 12, 13, 14 & 15 BLOCK 1

AMENDED MAP OF LAURELTON PARK, WATERFRONT SECTION

BRICK TOWNSHIP

OCEAN COUNTY NEW JERSEY

Filed Map No. F-179 DATE FILED 5/13/47

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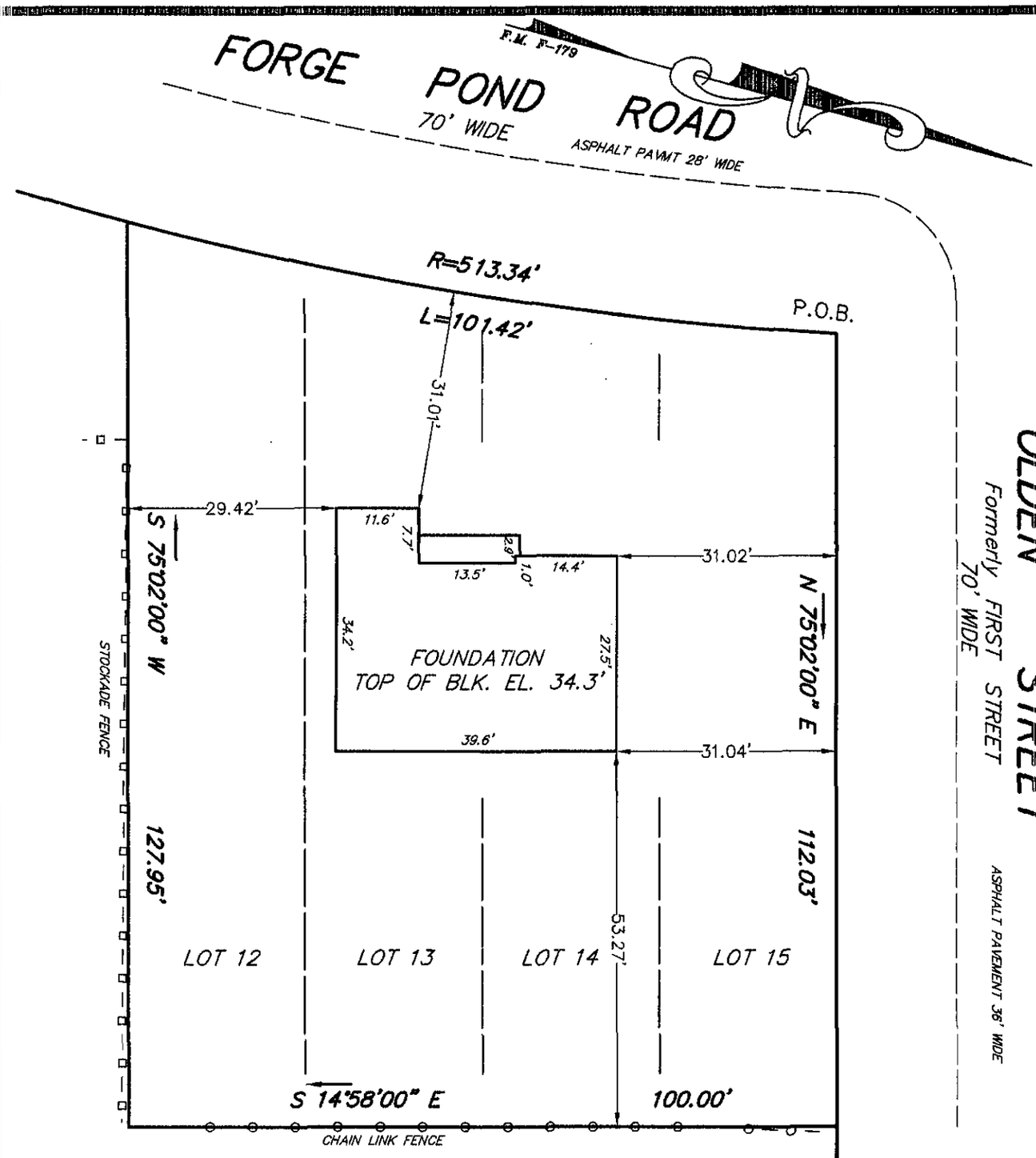

P.Q. IS IN FLOOD HAZARD ZONE C AS PER F.I.R.M. # 345285–0004
ALSO KNOWN AS LOT 12 BLOCK 851 ON THE BRICK TOWNSHIP TAX MAP.

REVISED 3/25/04 – FOUNDATION LOCATION
REVISED 3/04/04 – MOVE PROP. DWELLING
REVISED 2/27/04 – ADD PROP. DWELLING & GRADES

SURVEY OF PROPERTY

LOTS 12, 13, 14 & 15 BLOCK 1

AMENDED MAP OF LAURELTON PARK, WATERFRONT SECTION
BRICK TOWNSHIP
OCEAN COUNTY NEW JERSEY
Filed Map No. F–179 DATE FILED 5/13/47

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Elbert Morris P.L.S. 2/9/04

ELBERT MORRIS Date
New Jersey Lic. Professional Land Surveyor No. 8509

Date:	Scale:	Job No.	Map No.
2/09/04	1"=20'	04–019	2–3315

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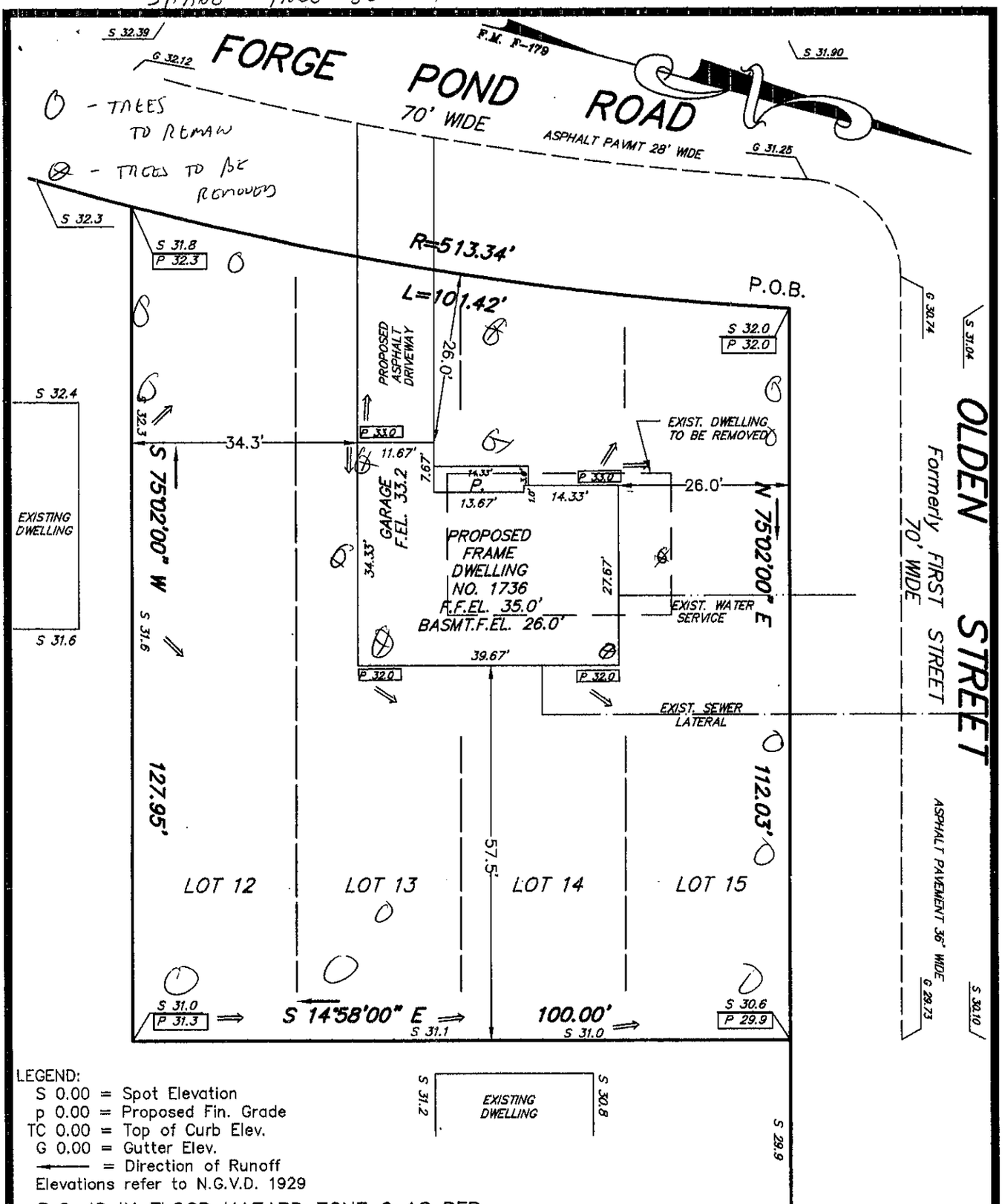
SHADE TREE SURVEY



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Elevations refer to N.G.V.D. 1929

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ALSO KNOWN AS LOT 12 BLOCK 851 ON THE BRICK TOWNSHIP TAX MAP.

REVISED 2/27/04 - ADD PROP. DWELLING & GRADES

SURVEY OF PROPERTY

LOTS 12, 13, 14 & 15 BLOCK 1

AMENDED MAP OF LAURELTON PARK, WATERFRONT SECTION

BRICK TOWNSHIP

OCEAN COUNTY NEW JERSEY

Filed Map No. F-179 DATE FILED 5/13/47

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Elbert Morris Jr. 2/9/04

ELBERT MORRIS Date

New Jersey Lic. Professional Land Surveyor No. 8509

Date:	Scale:	Job No.	Map No.
2/09/04	1"=20'	04-019	2-3315

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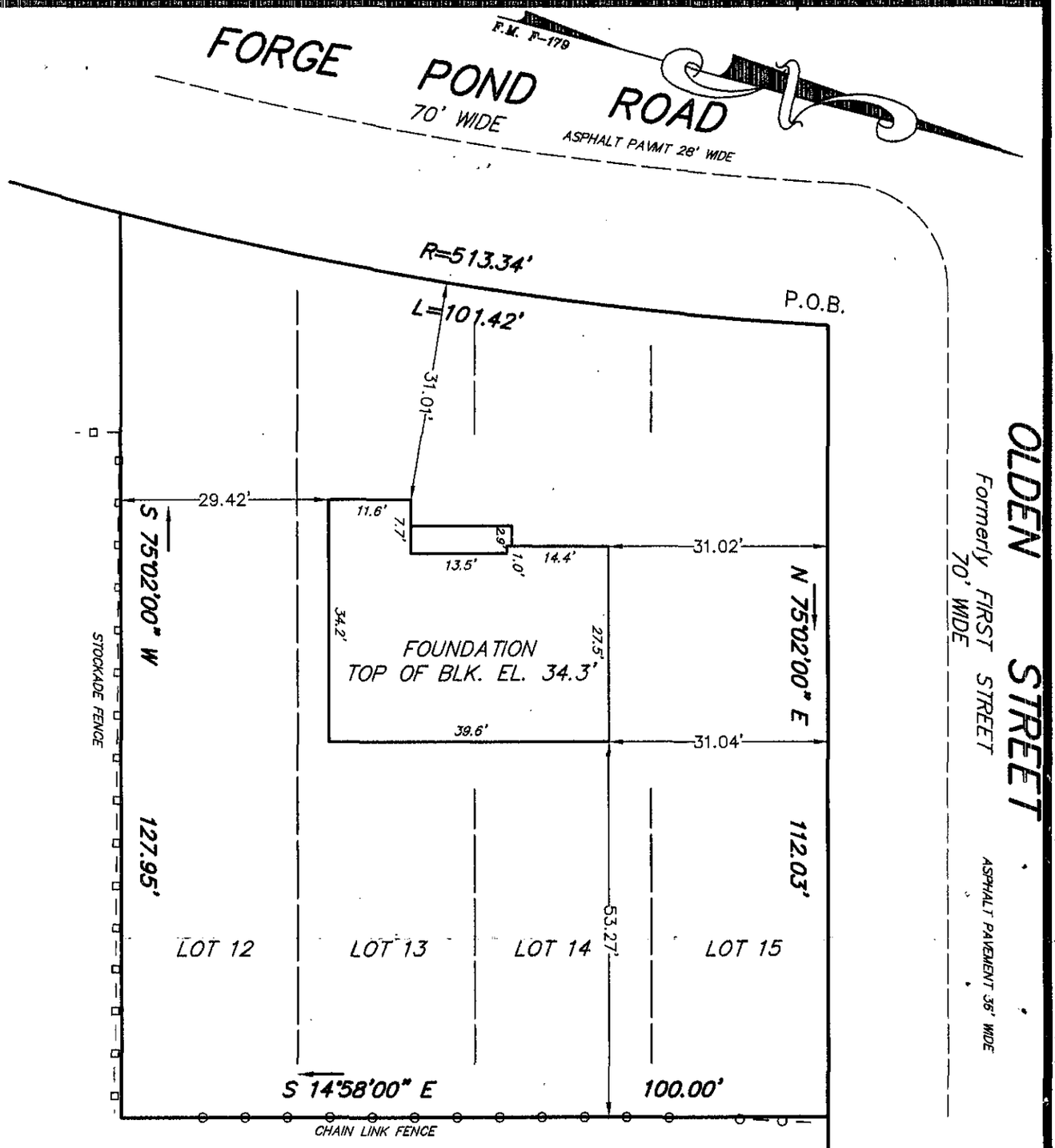

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REVISED 3/25/04 - FOUNDATION LOCATION
REVISED 3/04/04 - MOVE PROP. DWELLING
REVISED 2/27/04 - ADD PROP. DWELLING & GRADES

13 High
ok FHO
3-5-04

SURVEY OF PROPERTY

LOTS 12, 13, 14 & 15 BLOCK 1

AMENDED MAP OF LAURELTON PARK, WATERFRONT SECTION
BRICK TOWNSHIP
OCEAN COUNTY NEW JERSEY
Filed Map No. F-179 DATE FILED 5/13/47

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Elbert Morris Prof. 2/9/04

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