BLOCK 832 LOT 4 QUALIFICATION CODE ____ ADDRESS (SITE) 1649 HARVARD AV PERMIT NO. 11-2128

CONSTRUCTION PERMIT APPLICATION C-11-001485

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

I. IDENTIFICATION

1. Proposed Work Site at: 1649 HARVARD AV, BRICK, NJ 08724
2. Name of Owner in Fee: IGOR MAKAROVSKIY
   Tel. [redacted] e-mail ____
   Address 1649 HARVARD AV (street) BRICK (municipality) 08724 (zip code)
3. Ownership in Fee: Public ____ Private V
4. Principal Contractor: IGOR MAKAROVSKIY Tel [redacted]
   Address 1649 HARVARD AV, e-mail ____
   BRICK, NJ 08724
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): ____
   Federal Emp. ID No. ____ FAX: ( ) ____
5. Architect or Engineer ____ Contact ____
   Address ____ e-mail ____
   Tel. ( ) ____ FAX: ( ) ____
6. Responsible Person in Charge once Work has Begun IGOR MAKAROVSKIY
   Te[redacted]

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 156 ✓		
2. Electrical	40 ✓	40 ✓	
3. Plumbing	50 ✓	80 ✓	
4. Fire Protection	45		
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee		2	
10. Subtotal	$ 13		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 304	122	

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ____ ft.	
3. Area — Largest Floor ____ sq. ft.	
4. New Building Area ____ sq. ft.	
5. Volume of New Structure ____ cu. ft.	
6. Max. Live Load	
7. Max. Occupancy Load	
8. If Industrialized Building: State Approved ____ HUD ____	
9. Total Land Area Disturbed ____ sq. ft.	
10. Flood Hazard Zone	
11. Base Flood Elevation ____ ft.	
12. Wetlands yes ____ no ____	

IIa. PROPOSED WORK

- ☐ Minor Work
- ☐ Repair
- ☑ Asbestos Abat. - Subch. 8
- ☐ New Building
- ☑ Alteration
- ☐ Lead Hazard Abatement
- ☐ Addition
- ☑ Renovation
- ☐ Radon Remediation
- 08-09
- ☐ Demolition
- ☐ Reconstruction
- ☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

- ☑ Building
- ☑ Electrical
- ☑ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
Building	950			5/17/11	7/8/11	IW		6/21/11	
Electrical					5-24-11	DD	7-12-11		J
Plumbing				05.20.11	7-10-11	PB	6/20/11		
Fire Protection					7/3/11	DD			
Elevator		Emg	Exempt		5/7/11	ECC	EXEMPT		MD
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*

1. State Specific Use:
2. Use Group, Proposed: ____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   - Gained, Sale
   - Gained, Rental
   - Lost, Sale
   - Lost, Rental

B. NON-RESIDENTIAL *(primary use)*

1. State Specific Use:
2. Use Group, Proposed: ____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): ____

D. Construct. Classification: Present ____ Proposed ____

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

7/5/12

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
11. ☐ LPGas Tanks

U.C.C. F100-1 (rev. 12/07)

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

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. (V) 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 04/07/2011

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

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☒ Zoning Officer	SC	7/5/12							ZA-12-00715
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

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

Name of Code & Edition		Name of Code & Edition			
Building		Energy		Other	
Electrical		Barrier Free			
Plumbing		Flood Hazard			
Fire Protection		As Built Elevation Cert.			
Mechanical		Other			

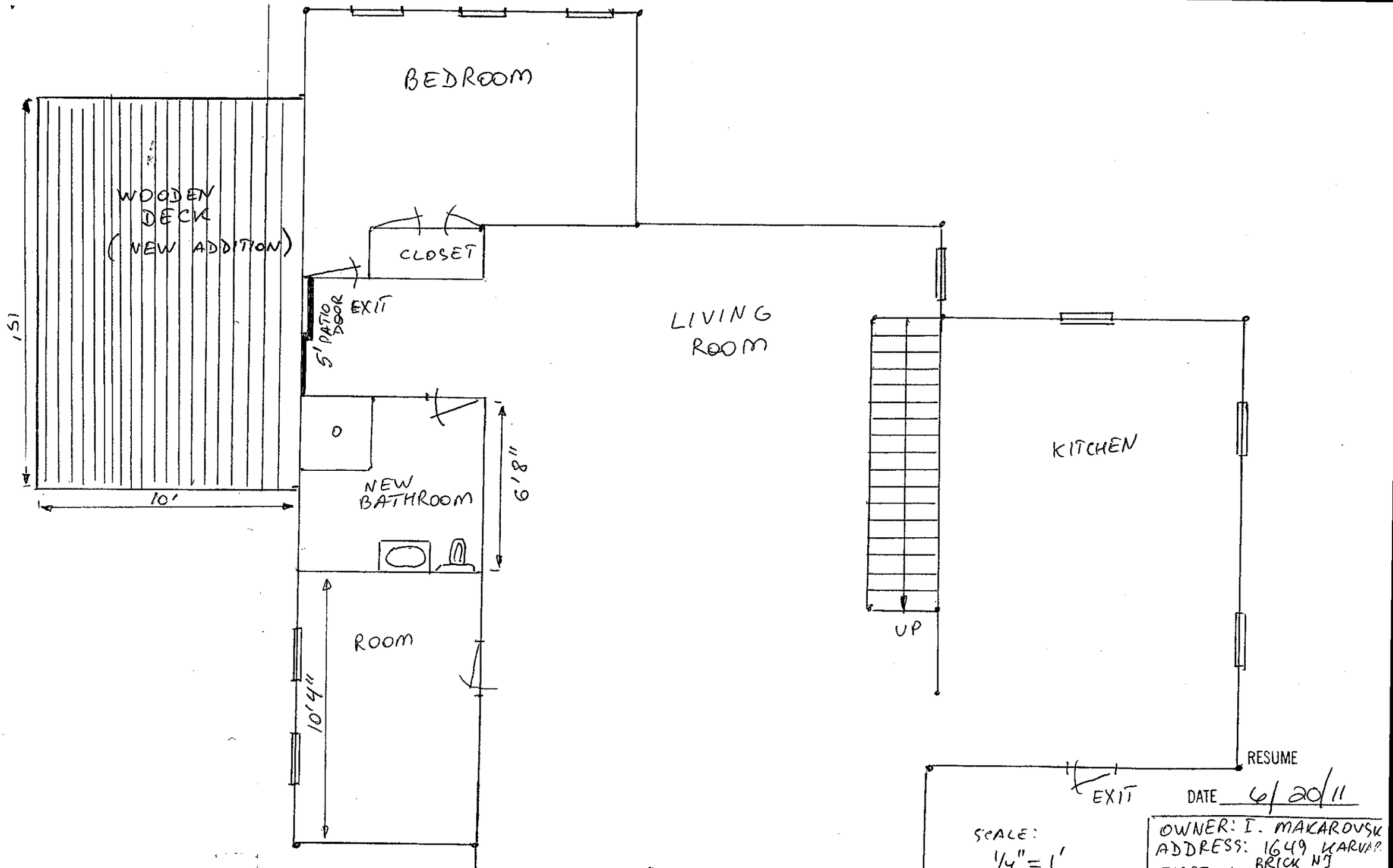
X. CERTIFICATES ISSUED (office use only)

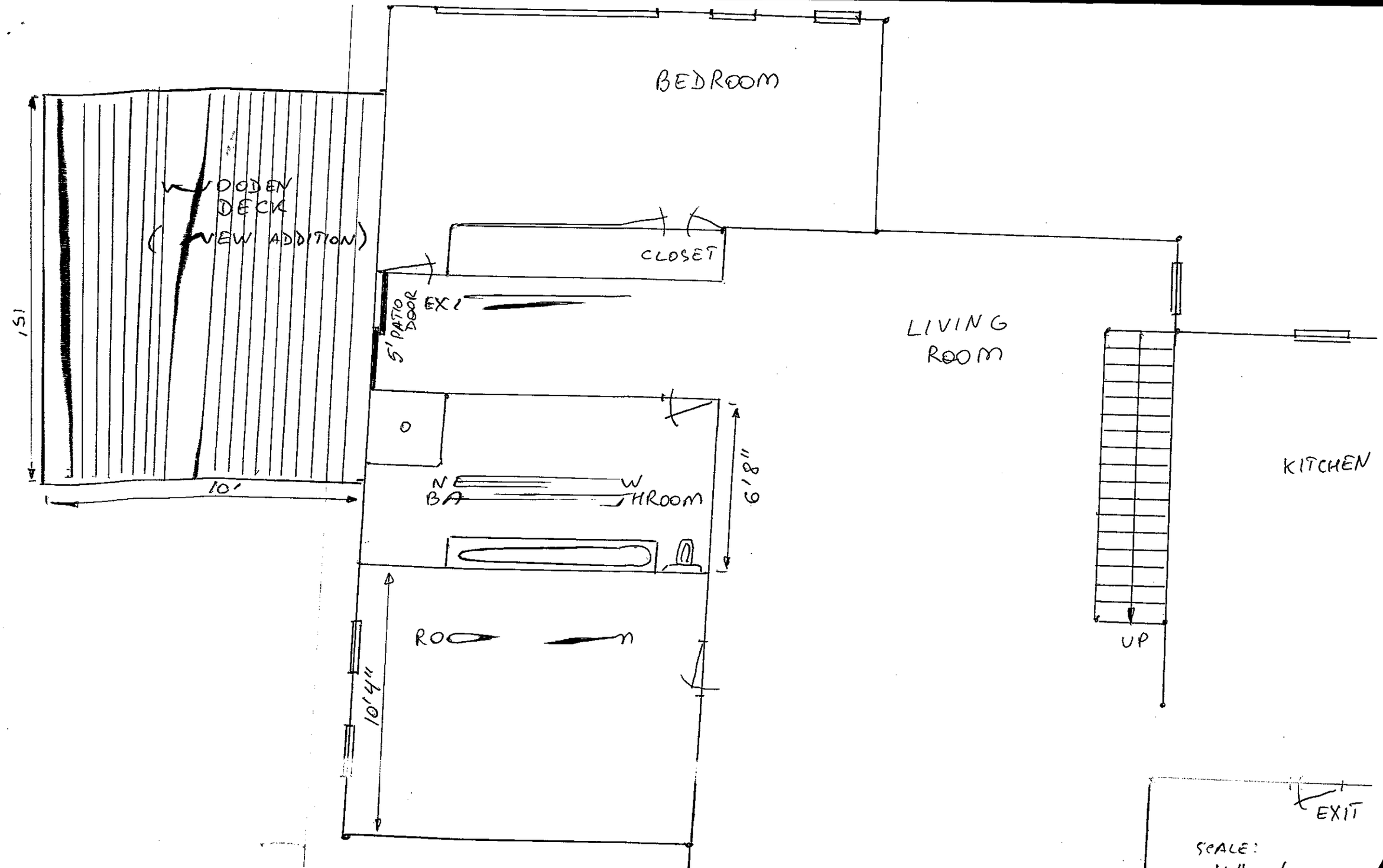
		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				
☐ Lead Abatement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

OFFICE USE ONLY

IMPORTANT
A.H.B.T. - EXEMPT

DATE:	COMMENTS:	INITIALS:
5/4/11	Called H/O purchased in 3/11	


BEDROOM
WOODEN DECK (NEW ADDITION)
15'
10'
CLOSET
EXIT
5' PATIO DOOR
LIVING ROOM
KITCHEN
UP
NEW BATHROOM
6'8"
ROOM
10'4"
RESUME
EXIT
DATE 6/20/11
SCALE: 1/4" = 1'
OWNER: I. MAKAROVSK
ADDRESS: 1649 HARVA
BRICK NJ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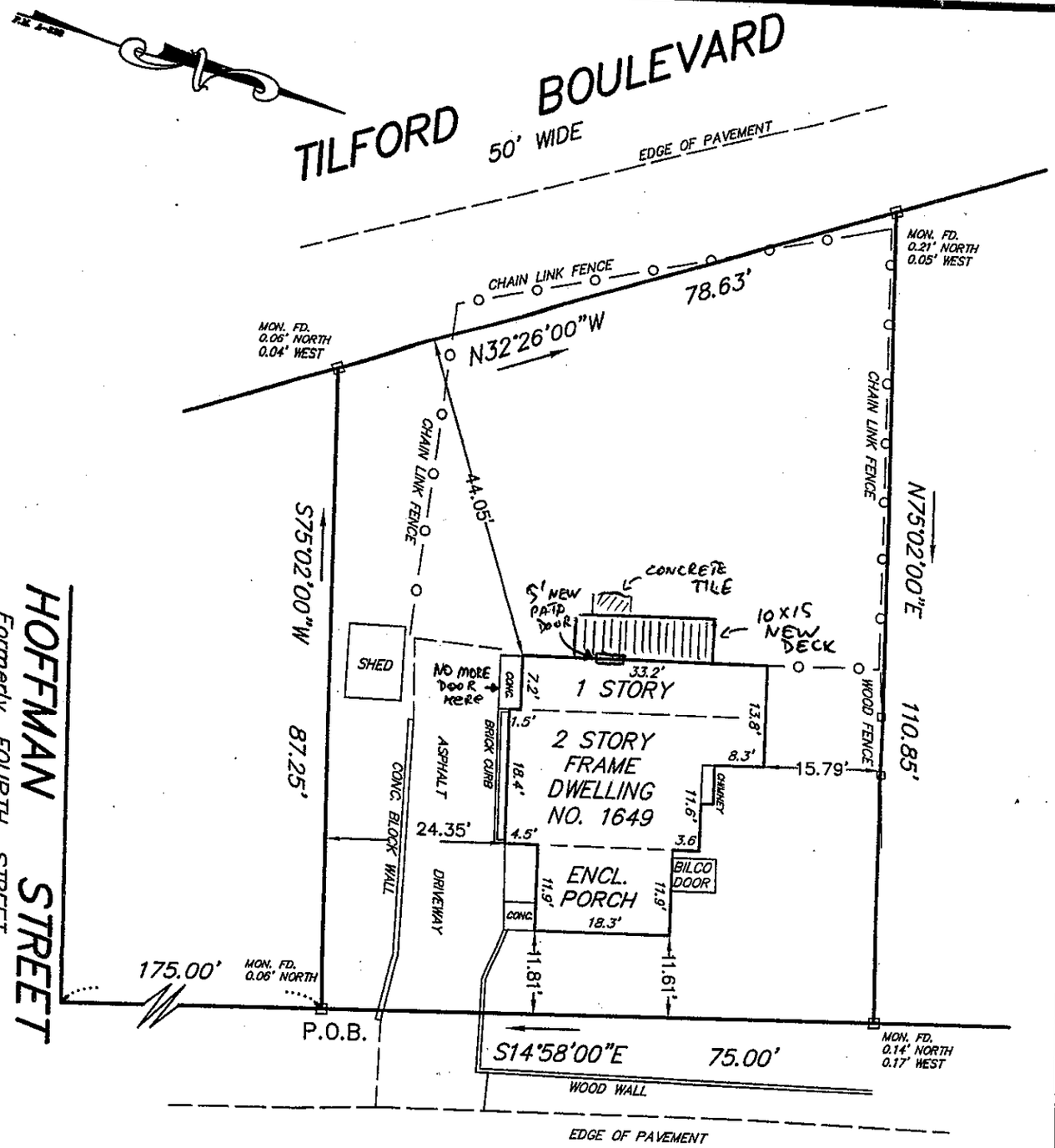
SCALE:



Zoning Review
Approval
By: [signature]
Date: 5/13/11

ALSO KNOWN AS LOT 4 BLOCK 832 ON THE BRICK TOWNSHIP TAX MAP.

WAIVER OF SETTING CORNER MARKERS HAS BEEN OBTAINED FROM IGOR MAKAROVSKIY PURSUANT TO N.J.A.C. 13:40-5.1(d).

SURVEY OF PROPERTY
LOTS 4, 5 & 6 BLOCK 12
LAURELTON PARK

BRICK TOWNSHIP
OCEAN COUNTY NEW JERSEY
Filed Map No. A- 328 DATE FILED 9/25/1929

THIS SURVEY IS CERTIFIED AS HAVING BEEN PREPARED UNDER MY DIRECT SUPERVISION TO:
IGOR MAKAROVSKIY

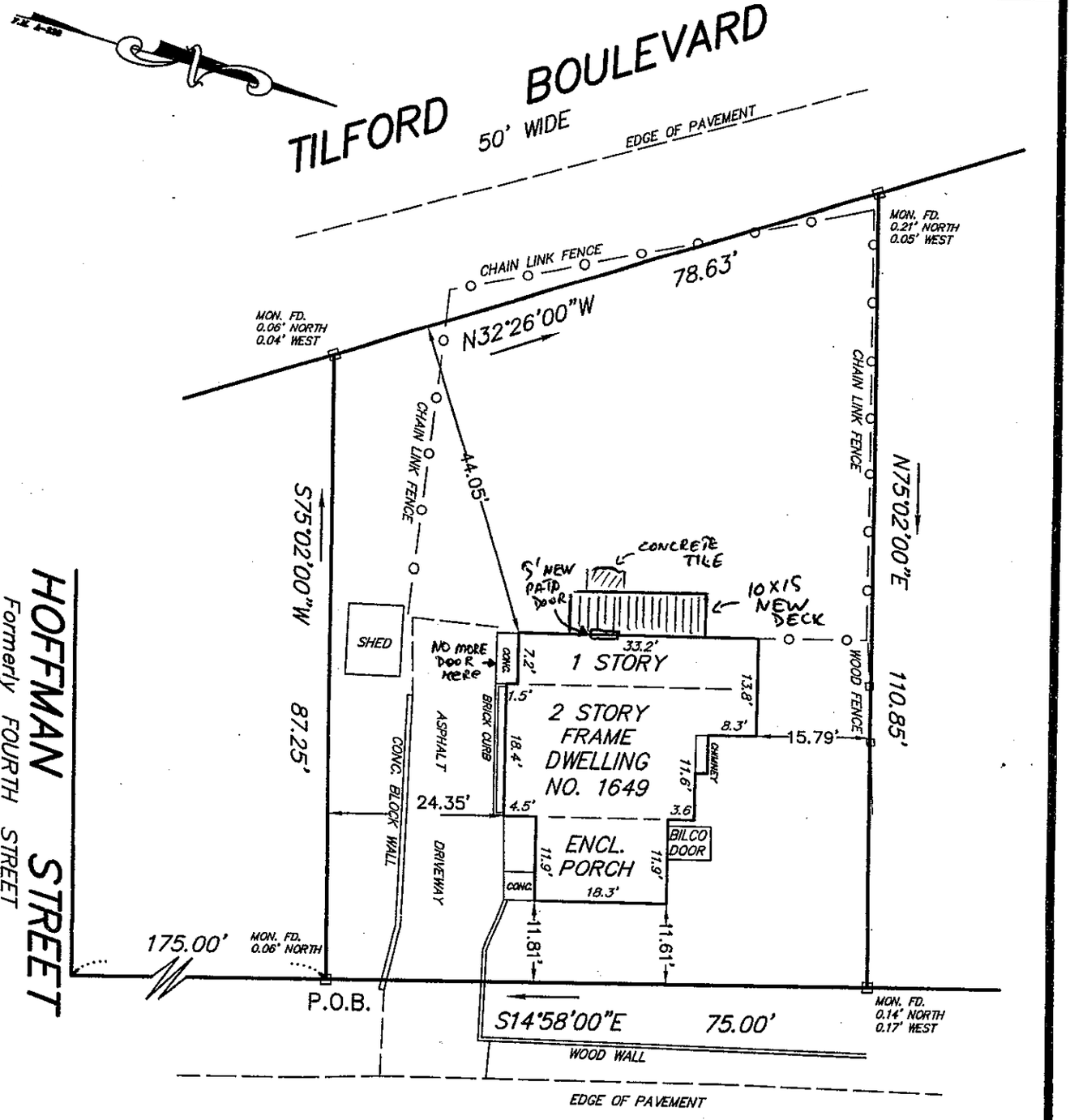
MORRIS SURVEYORS, INC.
LAND SURVEYING
1119 ARNOLD AVENUE
POINT PLEASANT BOROUGH, N.J. 08742
732-899-0965
CERT. OF AUTHORIZATION NO. 24GA28102100

[signature] 4/13/11

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

Date:	Scale:	Job No.	Map No.
4/11/2011	1"=20'	11-018-	2-3516

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



Zoning Review Approval

By: [signature]

Date: 5/13/11

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SURVEY OF PROPERTY

LOTS 4, 5 & 6 BLOCK 12

LAURELTON PARK

BRICK TOWNSHIP

OCEAN COUNTY NEW JERSEY

Filed Map No. A- 328 DATE FILED 9/25/1929

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LAND SURVEYING

1119 ARNOLD AVENUE

POINT PLEASANT BOROUGH, N.J. 08742

732-899-0965

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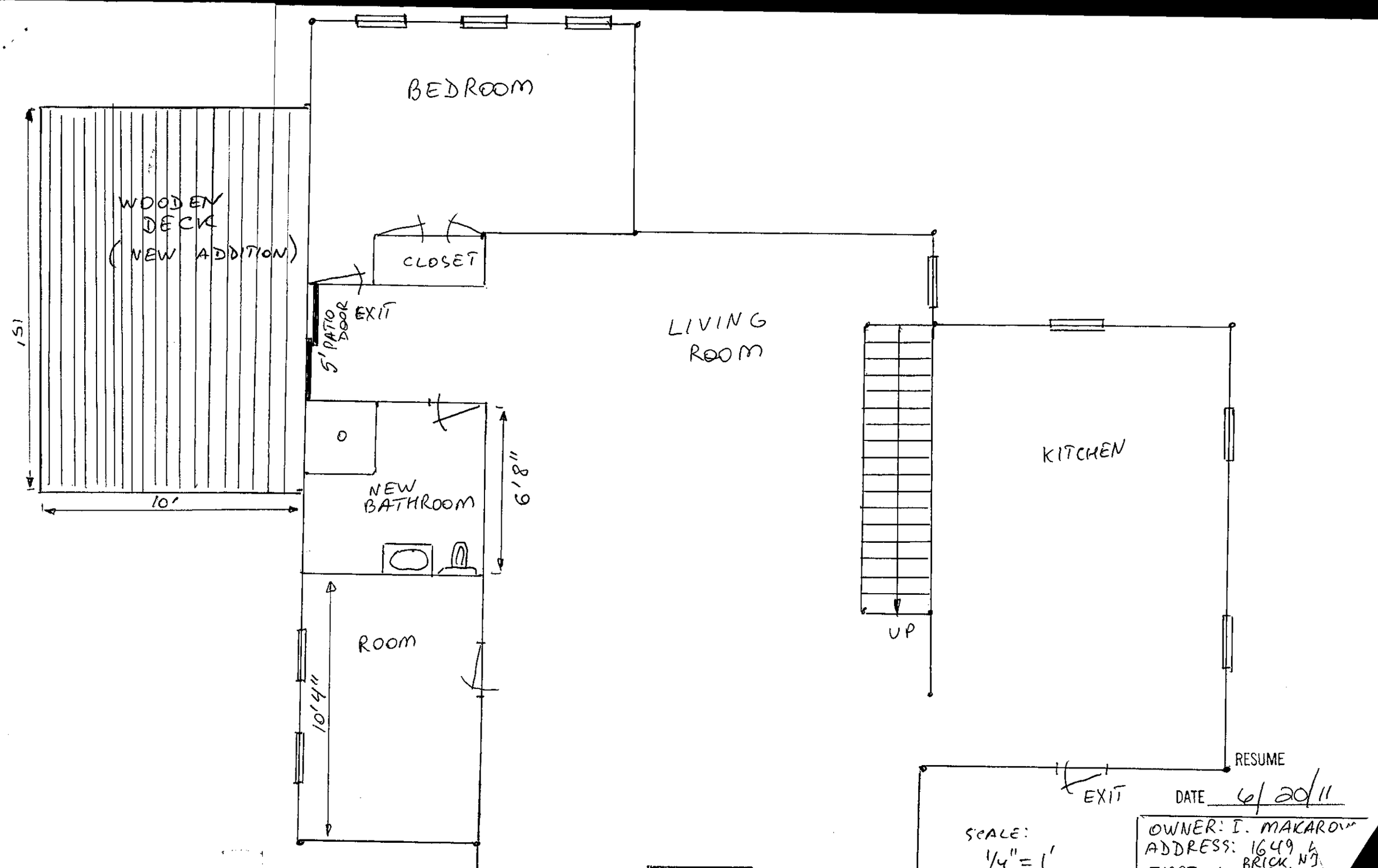
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RESUME
EXIT
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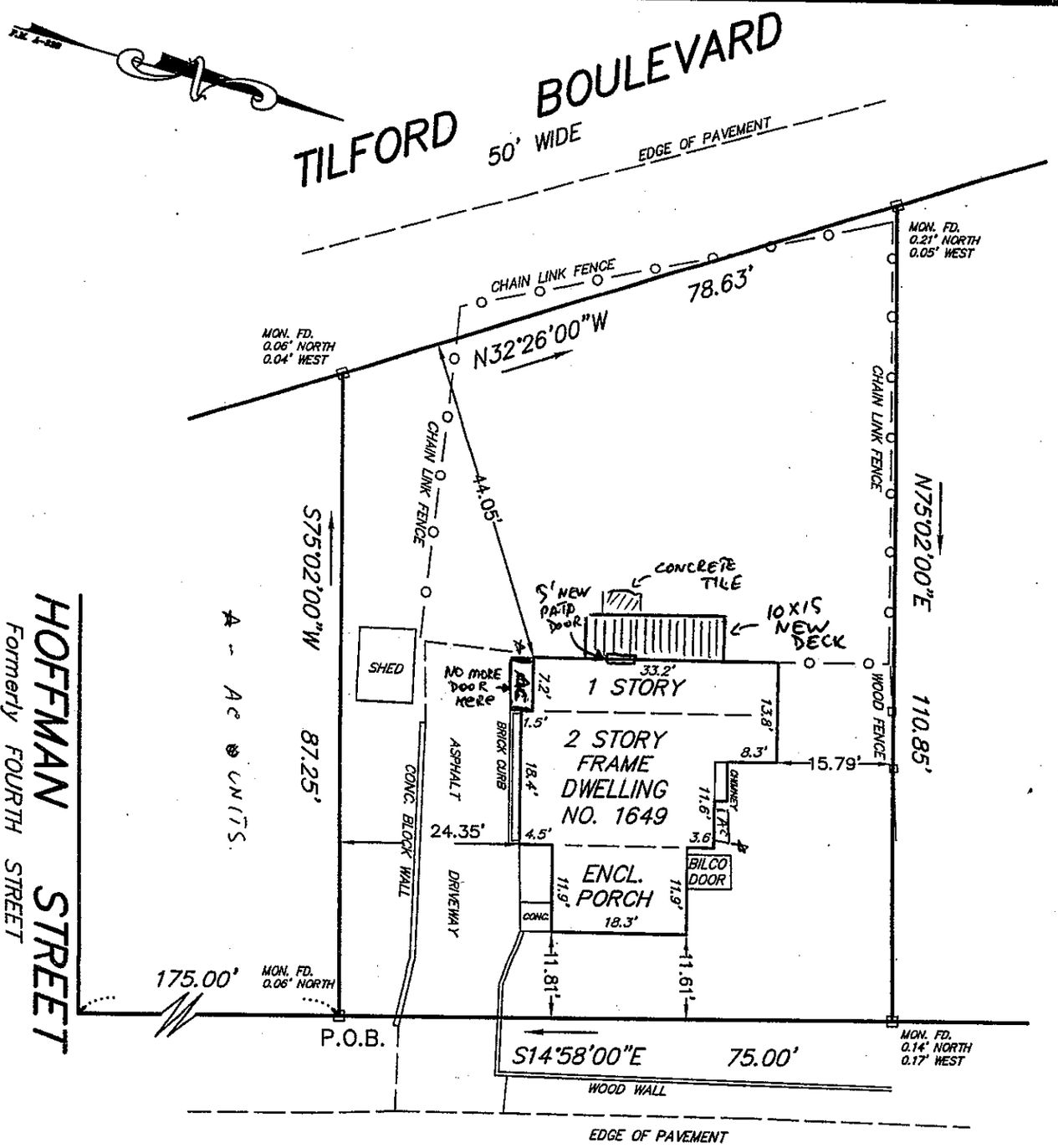
SCALE: 1/4" = 1'
OWNER: I. MAKAROV
ADDRESS: 1649
BRICK, NJ



APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
JUL 05 2012
-A/c units-

Zoning Review Approval
By: [signature]
Date: 5/13/11

ALSO KNOWN AS LOT 4 BLOCK 832 ON THE BRICK TOWNSHIP TAX MAP.

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SURVEY OF PROPERTY
LOTS 4, 5 & 6 BLOCK 12
LAURELTON PARK

BRICK TOWNSHIP
OCEAN COUNTY NEW JERSEY
Filed Map No. A- 328 DATE FILED 9/25/1929

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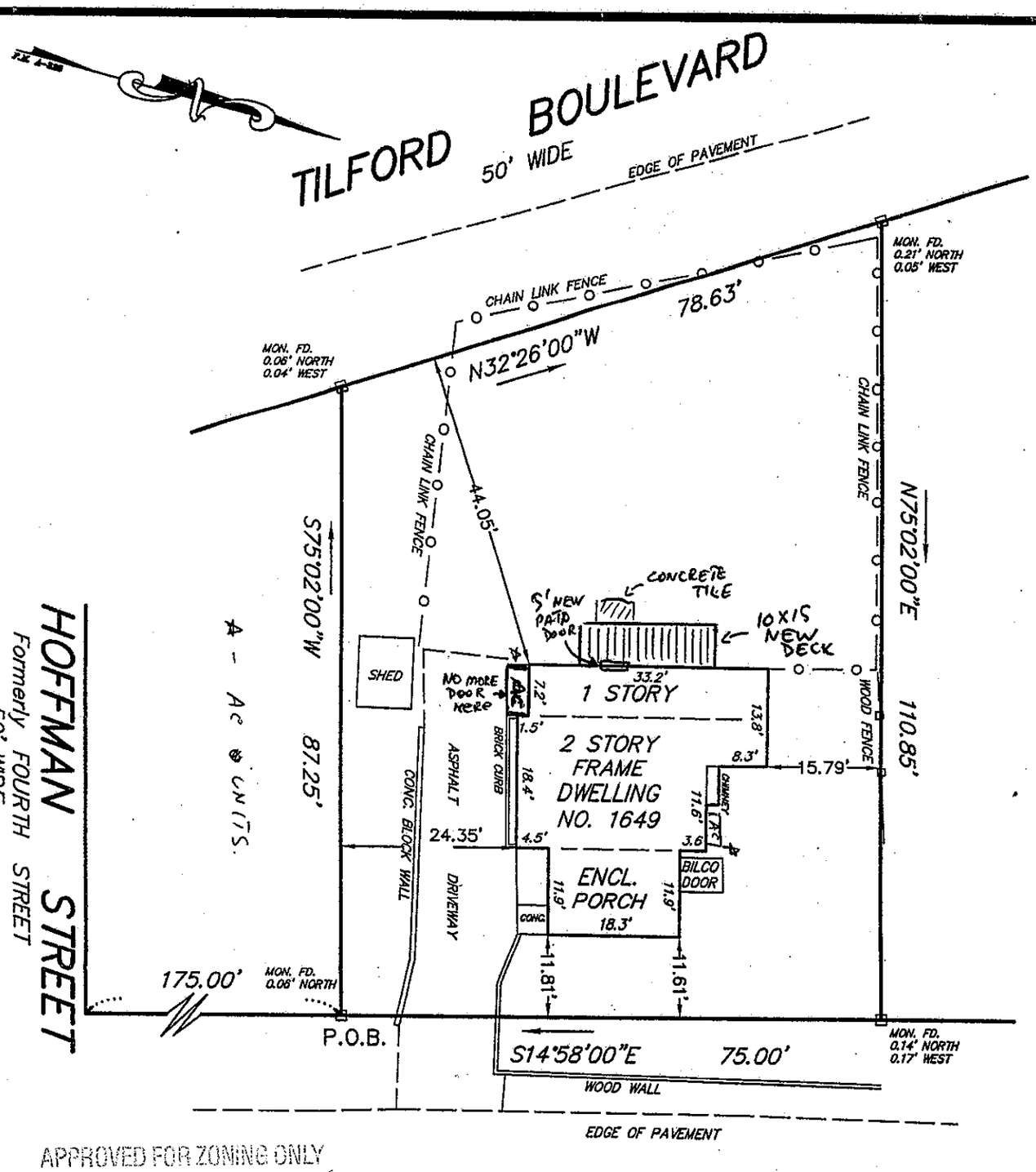
MORRIS SURVEYORS, INC.
LAND SURVEYING
1119 ARNOLD AVENUE
POINT PLEASANT BOROUGH, N.J. 08742
732-899-0965
CERT. OF AUTHORIZATION NO. 24GA28102100

E. Albert Morris, Pres. 4/13/11
ELBERT MORRIS Date
New Jersey Lic. Professional Land Surveyor No. 8509

Date:	Scale:	Job No.	Map No.
4/11/2011	1"=20'	11-018	2-3516



APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
JUL 05 2012
SKSO
- A/C units -

HARVARD AVENUE
50' WIDE

Zoning Review Approval
By: [signature]
Date: 5/13/11

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SURVEY OF PROPERTY
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BRICK TOWNSHIP
OCEAN COUNTY NEW JERSEY
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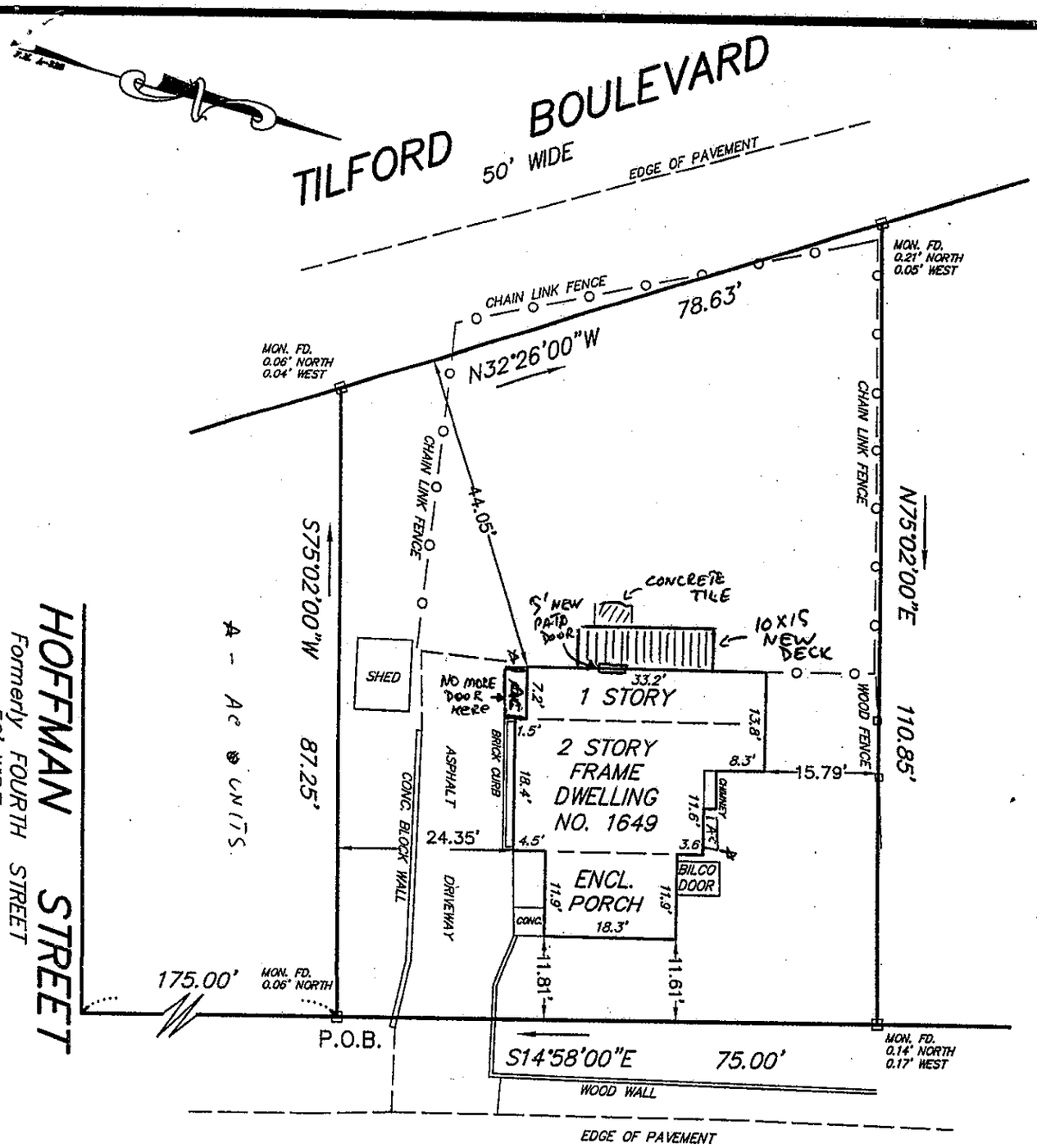
POINT PLEASANT BOROUGH, N.J. 08742
732-899-0965
CERT. OF AUTHORIZATION NO. 24GA28102100

E. Elbert Morris, P.L.S. 4/13/11

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

Date:	Scale:	Job No.	Map No.
4/11/2011	1"=20'	11-018-	2-3516



APPROVED FOR ZONING ONLY
SEAN KINNEY, ZONING OFFICER
JUL 05 2012
-A/c units-

Zoning Review Approval
By: [signature]
Date: 5/13/11

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Elbert Morris, P.L.S. 4/13/11
ELBERT MORRIS Date
New Jersey Lic. Professional Land Surveyor No. 8509

Date:	Scale:	Job No.	Map No.
4/11/2011	1"=20'	11-018-	2-3516

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 8/10/2012
Control Number C-11-001485
Permit Number 11-2128
Permit Issue Date 7/18/2011
Certificate Number 11-2128

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1649 HARVARD AVE Brick Township, NJ Block: 832 Lot: 4 Qual:

Owner in Fee: BARRETT, JOSEPH & STEINER, ANNA

Owner Address: 1649 HARVARD AVENUE BRICK NJ 08724

Telephone:

Contractor Igor Makarovskiy

Address 1649 Harvard Avenue Brick NJ 08724

Telephone: [redacted] Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: ALTERATION - -RESIDENTIAL, DECK, SIDING

Certificate Comments:

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

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

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

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

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

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

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

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

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 8/10/2012 U.C.C. F260 (rev. 08/05)

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 7/18/11
Control #

Date Issued
Permit # 11-2128

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

Block 832 Lot 4 Qualification Code

Work Site Location 1649 HARVARD AV, BRICK, NJ 08724

Owner in Fee: IGOR MAKAROVSKIY

Tel. [redacted] e-mail

Address 1649 HARVARD AV, BRICK, NJ 08724
street municipality

Contractor: IGOR MAKAROVSKIY Tel. [redacted]

Address 1649 HARVARD AV e-mail
BRICK, NJ, 08724

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar Other

Location:

Total Cost of Fire Protection Work $ 50

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

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. Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	1	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: 7/21/11 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 7-13-11
Approved by: KeR

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System			7/28	08
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			8/8	8/8
Other				

U.C.C. F140 (rev. 12/07) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 7/18/11

Date Issued Permit # 11-2128

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

Block 832 Lot 4 Qualification Code

Work Site Location 1649 HARVARD AV, BRICK, NJ 08724

Owner in Fee: IGOR MAKAROVSKIY

[redacted] e-mail

Address 1649 HARVARD AV, BRICK, NJ 08724 (street, municipality)

Contractor: IGOR MAKAROVSKIY [redacted]

Address 1649 HARVARD AV e-mail

BRICK, NJ 08724

Contractor License No. or Builder Registration No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

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

replace DOORS AND WINDOWS, replace SIDING. Building new bathroom on the 1ST Floor. Convert regular room into the bedroom. Building new deck

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	7/18/11	MW
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:

[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT

Date: 7/12/11

Approved by: KA

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [✓] CA

Date: 8-9-12

Approved by: KA JTA

INSPECTIONS Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Footing				
Footing Bonding				
Foundation				
Slab				
Frame			12/12/11	MW
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final		✓		
~~Energy~~ OD			12/22/11	MW
Mechanical				
TCO				
Other				
Final			8-8-12	G.P.
Barrier-Free				

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [✓] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [✓] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____

No. of Stories 2

Height of Structure _____ ft.

Area — Largest Floor _____ sq. ft.

New Bldg. Area/All Floors _____ sq. ft.

Volume of New Structure _____ cu. ft.

Max. Live Load

Max. Occupancy Load

Constr. Class Present _____ Proposed _____

If Industrialized Building:

State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $

U.C.C. F110 (rev. 12/07)

1 White = Inspector Copy 2 Canary = Office Copy

3 Pink = Office Copy 4 Gold = Applicant Copy

ELECTRICAL SUBCODE
TECHNICAL SECTION

update

7-16-12

Date Received
Control #
Date Issued
Permit # 11-21284A

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

Block 832 Lot 4 Qualification Code

Work Site Location 1649 HARVARD AV

Owner in Fee: IGOR MAKAROVSKIY

T [redacted] e-mail

Address 1649 HARVARD AV BRICK NJ 08724
street municipality zip code

Contractor: NO Tel. ( )

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work ($) 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[✓] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 7-12-12
Approved by: JS

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 7-19-12
Approved by: JS

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			7-18-12	JS
Barrier-Free				

Dates (Month/Day)

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here: X

Print name here:

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
2	5,5	(KW) Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 7/18/11
Control #

Date Issued
Permit # 11-2128

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

Block 832 Lot 4 Qualification Code

Work Site Location 1649 HARVARD AV, BRICK, NJ 08724

Owner in Fee IGOR MAKAROVSKIY

Address 1649 HARVARD AV, BRICK, NJ 08724

Tel [redacted]

Contractor IGOR MAKAROVSKIY

Address 1649 HARVARD AV, BRICK, NJ 08724

[redacted] FAX ( )

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 500

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

D. TECHNICAL SITE DATA

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

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[9] Elec. Plans Approved

Date: 5-24-11

Approved by: D. Daniel

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 7-19-12

Approved by: JJ

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough			12-5-11	DJ
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			7-18-11	DJ
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 7/18/11

Date Issued / Permit # 11-2128

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

Block 832 Lot 4 Qualification Code

Work Site Location 1649 HARVARD AV, BRICK, NJ 08724

Owner in Fee: IGOR MAKAROVSKIY

Tel. [redacted] e-mail

Address 1649 HARVARD AV BRICK, NJ 08724

Contractor: IGOR (street) MAKAROVSKIY (municipality) Te [redacted]

Address 1649 HARVARD AV e-mail

BRICK, NJ 08724

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 2,000

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 sign/Contractor sign and seal here: IGOR MAKAROVSKIY

Print name here: IGOR MAKAROVSKIY

[ ] Licensed Plumbing Contractor [V] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Building a new bathroom on the 1st floor

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: 6/20/11 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 6-20-11
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 5-1-12
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough	10/13/11		10/31/11	
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			4/30/12	

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	
1	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

3/4 WATER

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

U.C.C. F130 (rev. 11/09) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

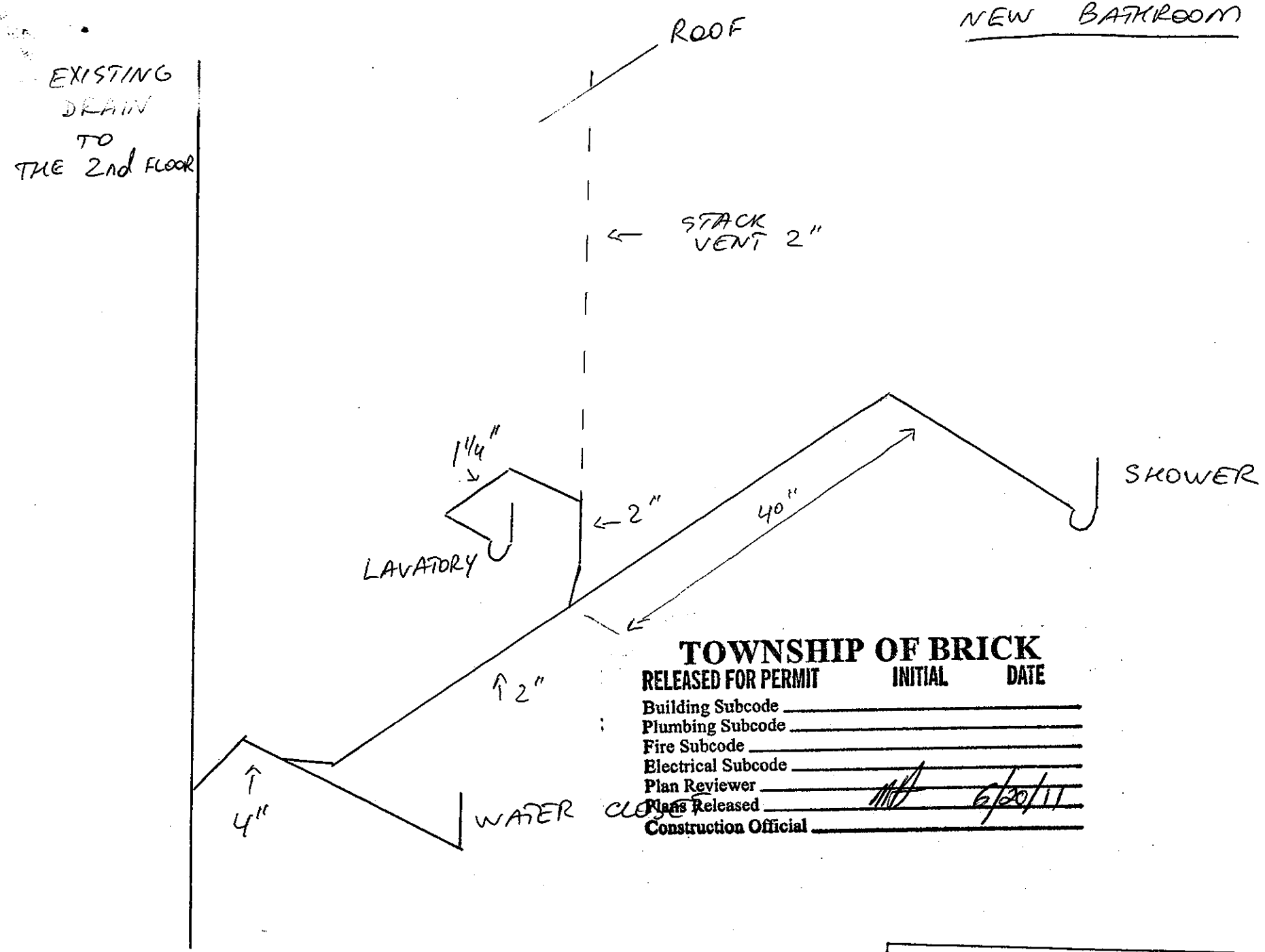
10/17/4 - MB

① NO TEST ON D.W.V. OK

② - REMOVE 4" FLANGES IN WALL OK - (4")

ALL GAS EXISTING - NO NEW GAS PIPING

NEW BATHROOM

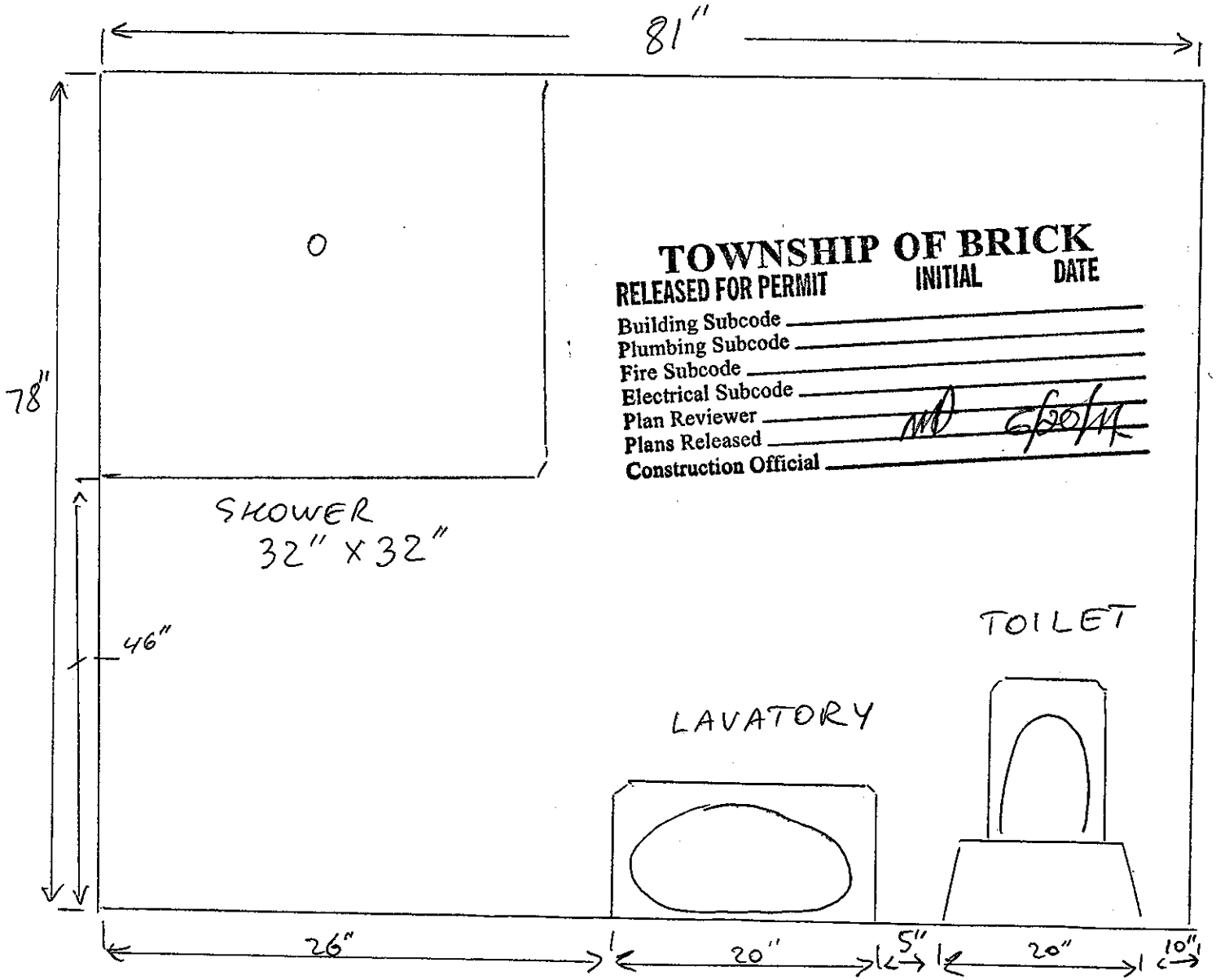


TOWNSHIP OF BRICK

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode		
Plumbing Subcode		
Fire Subcode		
Electrical Subcode		
Plan Reviewer		
Plans Released	MH	6/20/11
Construction Official		

OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD AV.
BRICK, NJ 08724

NEW BATHROOM



TOWNSHIP OF BRICK

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode		
Plumbing Subcode		
Fire Subcode		
Electrical Subcode		
Plan Reviewer		
Plans Released	MD	6/20/11
Construction Official		

OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD A
BRICK, NJ 08724

update

7-16-12

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued 11-2128+A
Permit #

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

Block 832 Lot 4 Qualification Code

Work Site Location 1649 HARVARD AV

Owner in Fee: IGOR MAKAROVSKIY

Tel [redacted] e-mail

Address 1644 HARVARD AV BRICK NJ 08723
street municipality zip code

Contractor: Tel. ( )

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work ($) 500

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 sign/Contractor sign and seal here:

Print name here:

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	~~Slacks~~ AC	
	Other	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Plumbing Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 7-10-12

Approved by: 2

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [X] CA

Date: 7-19-12

Approved by: Wow

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO			7/19/12	2
Final				

7-16-12

LM 7-13-12

PERMIT UPDATE

Date Update Issued
Control # C-12-002416
Permit # 11-2128+A

IDENTIFICATION Block: 832 Lot: 4 Qualifier
Work Site Location: 1649 HARVARD AVE Brick Township, NJ
Contractor Igor Makarovskiy
Address 1649 Harvard Avenue Brick NJ 08724
Owner in Fee BARRETT, JOSEPH & STEINER, ANNA
1649 HARVARD AVENUE BRICK NJ 08724
Telephone [redacted]
Telephone:
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
AIR CONDITIONER New

PAYMENTS (Office Use Only)

Building	$0
Electrical	$40
Plumbing	$80
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$2
CO Fee	
Other	$0
Total	$122
Check No.	847
Cash	$0
Credit	$0
Collected By	

Note: If constuction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $1,000

Construction Official

7-12-12
Date

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

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

REQUIRED INSPECTIONS

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

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

#2128
ELECTRICAL $40.00
PLUMBING $80.00
DCA $2.00
CHECK $122.00

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☑ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☑ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

VERTU SERIES SPECIFICATIONS	VERTU SERIES MULTI-INVERTER SPECIFICATIONS	VERTU SERIES MULTI-INVERTER SPECIFICATIONS

	Model		MSV1-09HRFN1 MOC-09HFN1-MTOW	MSV1-12HRFN1 MOC-12HFN1-MTOW	MSV1-12HRDN1 MOC-12HDN1-MQ0W	MSV1-18HRDN1 MOF-18HDN1-MQ0W	MSV1-24HRDN1 MOG-24HDN1-
Capacity	Cooling Capacity	Btu/h	9000	12000	12000	17500	23000
		kW	2.63	3.51	3.51	5.27	6.74
	Heating Capacity	Btu/h	10000	12500	12500	18000	24000
		kW	2.93	3.66	3.66	5.27	7.03
Electrical Parts	Power Supply	V~,Hz,Ph	208/230V, 60Hz,1Ph	208/230V, 60Hz,1Ph	208/230V, 60Hz,1Ph	208/230V, 60Hz,1Ph	208/230V, 60Hz,1Ph
	Power Input (W)	Cooling	700	970	1150	1500	2150
		Heating	760	1200	1200	1420	2050
	Operating Current (A)	Cooling	3.5	4.7	5.2	6.8	9.7
		Heating	3.8	5.4	5.4	6.3	9.5
Performance	SEER		19	20	17	17	17
	Energy Star		YES	YES	NO	YES	NO
	Air Flow Volume	Indoor (m3/h)	700	730	570	1050	1250
			412	430	336	618	736
	Noise Level (dB (A))	Indoor (Hi/Med/Lo)	40/35/29	40/35/29	40/35/29	42/39/34	47/44/40
		Outdoor	52	54	54	56	58
Dimension & Weight	Net Dimension (mm)	Indoor (WxHxD)	845 x 286 x 165	845 x 286 x 165	845 x 286 x 165	1080 x 320 x 200	1080 x 320 x 200
			33-4/16 x 11-4/16 x 6-8/16	33-4/16 x 11-4/16 x 6-8/16	33-4/16 x 11-4/16 x 6-8/16	42-8/16 x 12-10/16 x 7-14/16	42-8/16 x 12-10/16 x 7-14/16
		Outdoor (WxHxD)	76 0 x 590 x 285	760 x 590 x 285	760 x 590 x 285	845 x 695 x 335	895 x 860 x 330
			29-15/16 x 23-4/16 x 11-4/16	29-15/16 x 23-4/1 6x 11-4/16	29-15/16 x 23-4/16x 11-4/16	33-4/16x27-6/16x13-3/16	35-4/16x33-14/16x13
	Net Weight (kg)	Indoor/Outdoor	9/38.5	9/39.5	10/40	15/56	15/64
		lb	20/85	20/85	22/88	33/123	33/141
	Packing (mm)	Indoor (WxHxD)	905 x355 x 285	905 x355 x 285	905 x355 x 285	1180 x425 x 310	118 0x425 x 310
	Packing (inch)	Indoor (WxHxD)	35-10/16 x 14 x 11-4/16	35-10/16 x 1 4 x 11-4/16	35-10/16 x 14 x 11-4/16	46-7/16 x 16-12/16 x 12-3/16	46-7/16 x 16-12/16 x 12-3/16
		Outdoor (WxHxD)	887 x 655 x 355	887 x 655 x 355	887 x 655 x 355	965 x 755 x 395	1043 x 915 x 395
		Outdoor (WxHxD)	34-15/16 x 25-13/16 x 14	34-15/16 x 25-13/16 x 14	34-15/16 x 25-13/16 x 14	38 x 29-12/16 x 15-9/16	41-1/16 x 36 x 15-9/16
	Gross Weight (kg)	Indoor/ Outdoor	11/41	11/42	13.5/41.5	20/54	20/67
	Gross Weight (lb)	Indoor/ Outdoor	24/90	24/93	30/92	44/119	44/147
	Piping Size (mm)	Liquid	Ø6.35(1/4")	Ø6.35(1/4")	Ø6.35(1/4")	Ø6.35(1/4")	Ø9.53(3/8")
		Gas	Ø9.53(3/8")	Ø12.7(1/2")	Ø12.7(1/2")	Ø12.7(1/2")	Ø16(5/8")
Packing Qty.		20'/40'/40'HQ	96/196/238	96/196/238	96/196/238	66/135/150	50/112/120

INSIDE UNITS: 3 x 9000 BTU
1 x 18000 BTU

OUTSIDE UNITS: MOC-09HFN1-MTOW
MOF-18HDN1-MQ0W

RECEIVING CLERK
DATE REC'D 7-5-12

ZONING PERMIT APPLICATION

PERMIT #
DATE ISSUED

BLOCK: 832 LOT: 4 QUALIFIER: — SITE ADDRESS: 1649 HARVARD AV

IDENTIFICATION:

1. NAME OF OWNER IN FEE: IGOR MAKAROVSKIY
   COMPLETE ADDRESS: 1649 HARVARD AV.
   PHONE # [redacted] EMAIL:

2. NAME OF APPLICANT: IGOR MAKAROVSKIY
   APPLICANT ADDRESS: 1649 HARVARD AV BRICK NJ
   PHONE # EMAIL:

3. RESPONSIBLE PERSON FOR WORK: H/O
   PHONE# FAX#

4. SIGNATURE OF APPLICANT: X

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 50,00
OTHER: $
TOTAL: $

REQUIRED BY APPLICANT

RESIDENTIAL: ✓
COMMERCIAL:
EXISTING USE: SFR
PROPOSED USE SFR

BOARD APPROVAL: ___ PB ___ ZB
RESOLUTION#:
APPROVAL DATE:

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)
*NEW BUILDING: *ADDITION *ALTERATION X *PORCH *DECK

POOL: ABOVE GROUND IN GROUND FENCE: HEIGHT TYPE

HEIGHT: (*APPLICABLE)

OTHER

DESCRIPTION: A/c Units

ZONING REVIEW:
DATE REVIEWED: 7-9-12 DATE DENIED: — DATE APPROVED: 7-9-12 INTLS: SLGR

(SEE BACK PAGE)

TOWNSHIP OF BRICK ZONING CHECKLIST

1) **Two (2) copies of 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.

2) **Two copies of the plans with dimensions and heights noted:**

- Floor plans and elevations
- Signed site plans
- Property map
- Survey map

Choose which is applicable for submission

3) **Plot plans and building plans must match for complete review**

NOTE: NO PARTIAL, TAPED, FAXED, REDUCED OR ENLARGED COPIES CAN BE ACCEPTED

01/2010

OFFICE USE ONLY

RECEIVED
JUL 5 2012
SGS

ZONING REVIEW:

DATE REVIEWED: 7-5-12 DATE DENIED: — DATE APPROVED: 7-5-12 INTLS: SGS

DATE:	COMMENTS:	INITIALS:

245 Attachment 5

Township of Brick

SCHEDULE OF AREA, YARD AND BUILDING REQUIREMENTS
Township of Brick
Ocean County, New Jersey

[Amended 6-26-1979 by Ord. No. 354-2B-79; 4-22-1980 by Ord. No. 354-2H-80; 10-14-1980 by Ord. No. 354-2N-80; 9-23-1980 by Ord. No. 354-1B-80; 8-25-83 by Ord. No. 354-2SS-83; 11-5-1984 by Ord. No. 354-2-AAA-84; 11-5-1984 by Ord. No. 354-2CCC-84; 6-24-1986 by Ord. No. 354-2WWW-86; 9-13-1988 by Ord. No. 354-2TTTT-88; 9-27-1988 by Ord. No. 354-2XXXX-88; 9-12-2000 by Ord. No. 354-2EE-00; 5-9-2000 by Ord. No. 354-2Z-00; 3-26-2002 by Ord. No. 354-2C-02; 11-26-2002 by Ord. No. 354-2L-02; 3-25-2003 by Ord. No. 354-2D-03; 6-13-2006 by Ord. No. 19-06]

	Minimum Lot Size						Minimum Required Yard Depth												
	Interior Lots			Corner Lots			Principal Building				Accessory Building		Maximum Lot Coverage by Building	Maximum Building Height				Minimum Floor/ Building Area (square feet) 2 stories/1 story	Maximum Allowable Impervious Coverage
Zone	Area (square feet)	Width (feet)	Depth (feet)	Area (square feet)	Width (feet)	Depth (feet)	Front Yard (feet)	Side Yard, Each (feet)	Both Sides Combined (feet)	Rear Yard (feet)	Side Yard (feet)	Rear Yard[3] (feet)		Stories	Eaves (feet)	Feet	Ridge (feet)		
R-R	40,000	150	150	40,000	150	150	50	25		50	25	25	25%	–	25			–	
RR-2	See § 245-90.																		
RR-3	See § 245-103.																		
R-20	20,000	100	125	25,000	100	125	40	15	–	40	10	10	25%	–	25	35	38.5	–	
R-15	15,000	100	115	17,250	100	115	35	12	–	35	10	10	25%	–	25	35	38.5	–	
R-10	10,000	90	100	10,500	100	100	30	6	20	20	5	5	30%	–	25	35	38.5	–	
R-7.5	7,500	75	90	9,000	75	90	25	6	15	15	5	5	30%	–	25	35	38.5	–	
R-5	5,000	50	75	6,000	50	75	20	5	12	15	5	5	35%	–	25	35	38.5	–	
O-P	15,000	100	150	15,000	100	150	50	10	–	50	20	50	35%[2]	2	–	35	38.5	1,500	70%
B-1	10,000	100	90	12,500	100	125	30	10	–	20	10	20	30%[2]	2	–	35	38.5	1,000	60%
B-2	20,000	125	125	20,000	125	125	50	10	–	50	10	50	30%[2]	2	–	35	38.5	2,000	65%
B-3	2 acres	200	200	2 acres	200	200	75	30	–	50	20	50	25%[2]	–	–	35	38.5	2,000	65%
B-4	5 acres	300	300	–	–	–	100	50(150[1])	–	100(150[1])	20	50	25%	3	–	35	38.5	30,000	70%
M-1	5 acres	300	300	5 acres	300	300	100	50	–	150	75	150	30%[2]	–	–	35	38.5	5,000	65%
R-M	25 acres	350	200	–	–	–	50	50	–	30	30	30	20%	–	25	35	38.5	–	65%
O-P-T	40,000	150	150	40,000	150	150	50	20	–	50	20	50	25%[2]	2	–	35	38.5	2,000	50%
H-S	See § 245-261.													–	–	–	–		70%

NOTES:
1. If adjacent to residential zone or use.
2. The maximum lot coverage shall refer only to that percentage of an affected lot which is suitable for building.
3. For rear yard setback requirements for accessory buildings on waterfront property, see § 245-10D.

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued:
Application Number: ZA-12-00713
Application Date: 07/05/2012
Project Number:
Permit Number:
Fee: $50

Zoning Permit

Worksite Location: **1649 HARVARD AVE**
Laurelton Park
Brick Township, NJ 08724

Block: **832**
Lot: **4**
Qualifier:
Zone: **R-7.5**

Owner: **MAKAROVSKY, IGOR**
Address: **40 OCEANA DRIVE WEST**
BROOKLYN, NY 11325

Applicant: **MAKAROVSKY, IGOR**
Address: **40 OCEANA DRIVE WEST**
BROOKLYN, NJ 11325

Application Approved Date: 07/05/2012

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Single-Family Residential
Nonconforming Use is:

Work Description:
Air-Conditioner Condenser Unit - Two (2) a/c units.

The units must be set back at least 25 feet from the property line at each street and at least six (6) feet from the side property lines.

ZA-11-00416 approved on May 13, 2011.

Upon review it was determined that the Development Application:

- ☑ Permitted by Ordinance
- ☐ Permitted by Variance approved on: _____
- ☐ Valid Nonconforming Use is established by
  - ☐ Zoning Board of Adjustment
  - ☐ Zoning Officer

Sean Kinney

Sean Kinney, Zoning Officer — 07/05/2012 Date

Michael P. Fowler, Township Planner — 7/5/12 **Date**

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued:
Application Number: ZA-12-00713
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Project Number:
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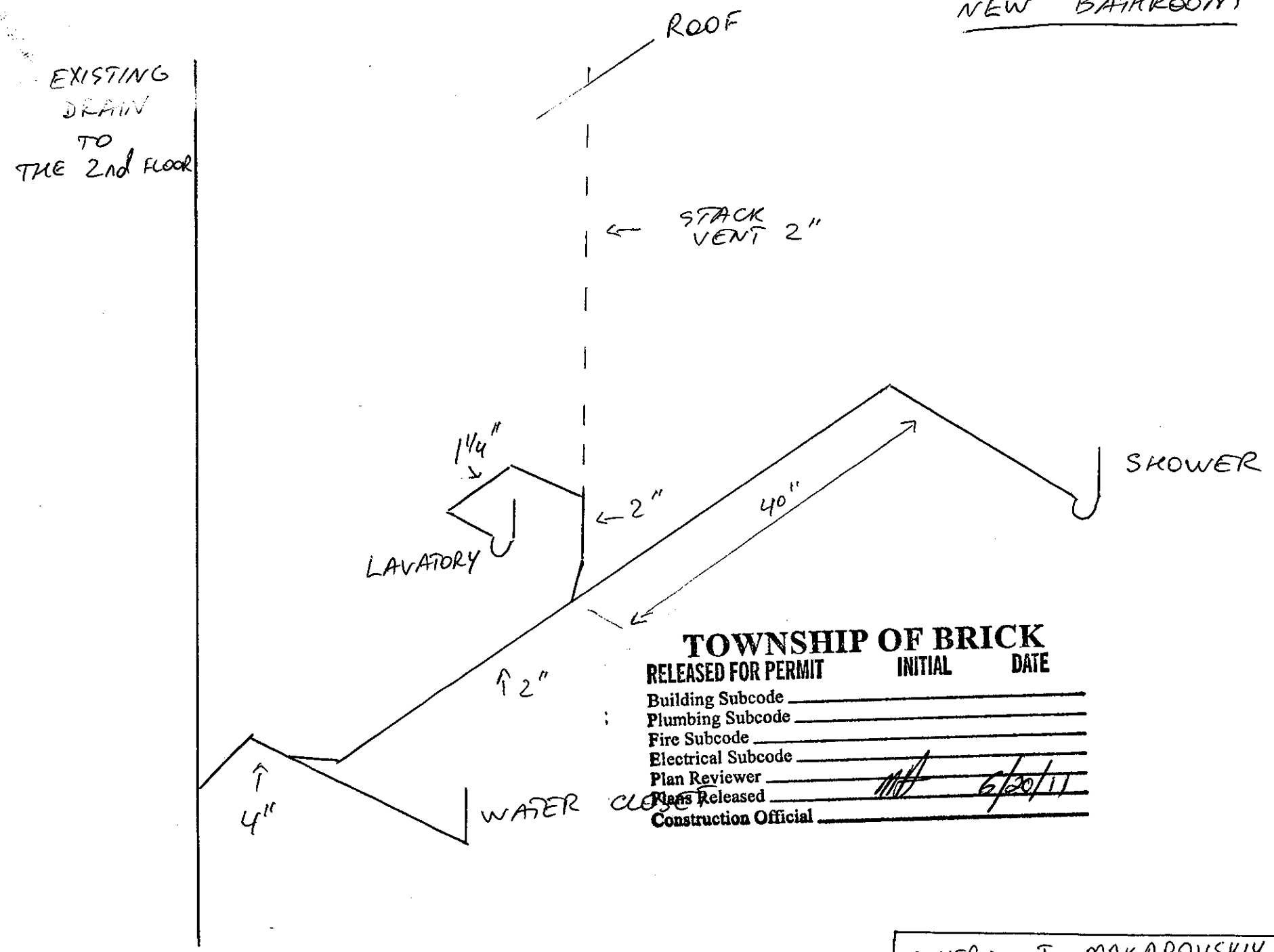
  - ☐ Zoning Board of Adjustment
  - ☐ Zoning Officer

Sean Kinney, Zoning Officer — 07/05/2012 Date

Michael P. Fowler, Township Planner — 7/5/12 **Date**

NEW BATHROOM



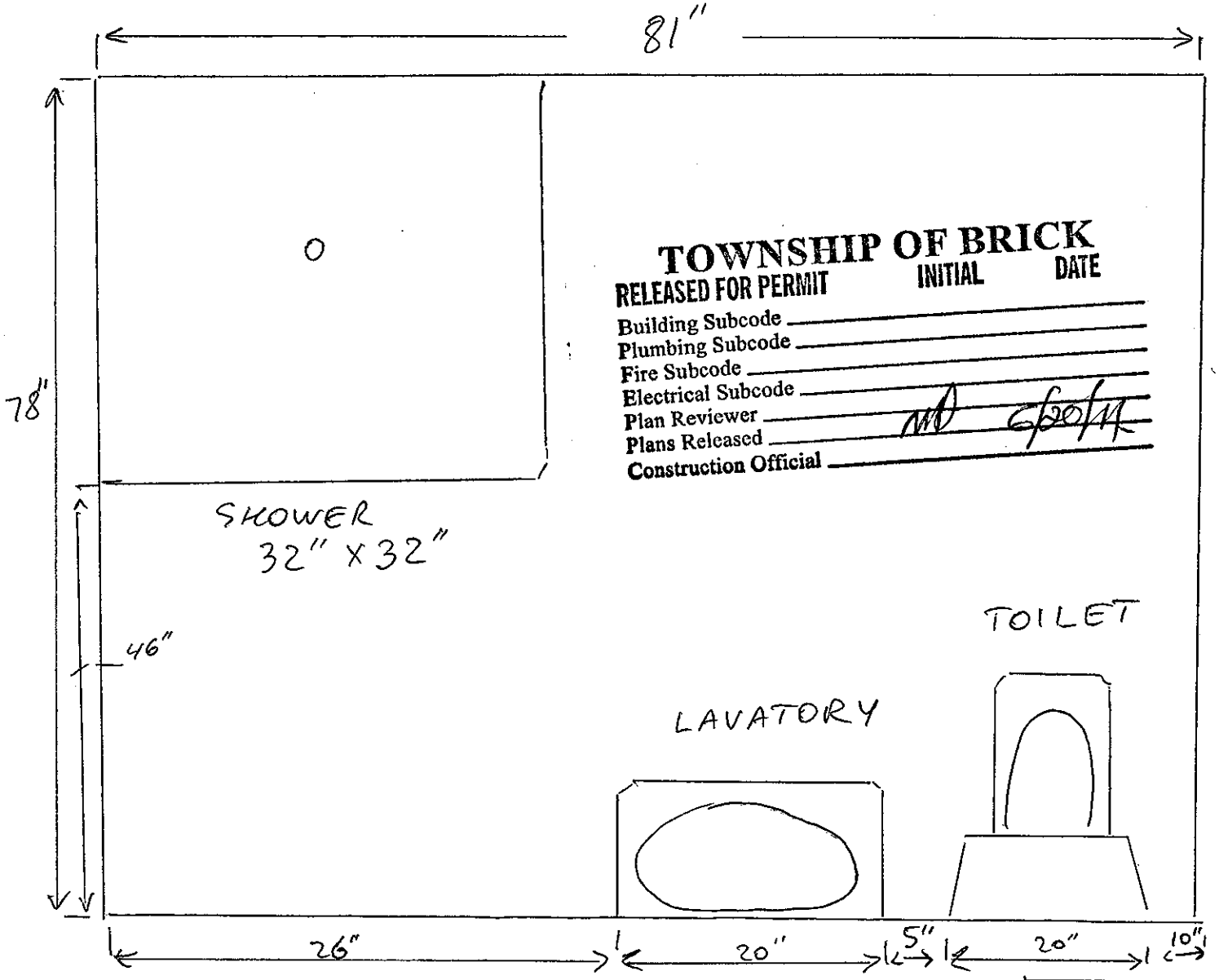
TOWNSHIP OF BRICK

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode		
Plumbing Subcode		
Fire Subcode		
Electrical Subcode		
Plan Reviewer		
Plans Released	MH	6/20/11
Construction Official		

OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD AV.
BRICK NJ 08724

Construction Official

NEW BATHROOM



TOWNSHIP OF BRICK

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode		
Plumbing Subcode		
Fire Subcode		
Electrical Subcode		
Plan Reviewer		
Plans Released	MD	6/20/14
Construction Official		

OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD AV
BRICK NJ 08724

CONSTRUCTION PERMIT

Date Issued 7/18/11
Control # C11-001488
Permit # 11-2128

IDENTIFICATION Block: 832 Lot: 4 Qualifier
Work Site Location: 1649 HARVARD AVE Brick Township, NJ
Owner in Fee: BARRETT, JOSEPH & STEINER, ANNA
1649 HARVARD AVENUE BRICK NJ 08724
Telephone:

Contractor: Igor Makarovskiy
Address: 1649 Harvard Avenue Brick NJ 08724
Telephone: [redacted]
Lic. No. or Bldrs. Reg. No.:
Federal Employee. No.

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 (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
ALTERATION - -RESIDENTIAL, DECK, SIDING

PAYMENTS (Office Use Only)

Building	$156
Electrical	$40
Plumbing	$50
Fire Protection	$45
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$13
CO Fee	
Other	$0
Total	$304
Check No.	708
Cash	$0
Credit	$0
Collected By	

150
154

Note: If constuction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $7,750

Construction Official (ACO) Date 7-13-11

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

7/18/11 1:01PM 00158827
XX01 SERV.001
#2128
BUILDING $156.00
ELECTRIC $40.00
PLUMBING $50.00
FIRE $45.00
DCA $13.00
CHECK $304.00

- [ ] Required inspections for all subcodes for one- and two-family dwellings are as follows:
  1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
  2. Foundations and all walls up to grade level prior to back filling.
  3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
  4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

  Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- [ ] Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

- [x] A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

- [x] A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

Community Development and Land Use
401 Chambers Bridge Rd.
Brick NJ 08723
(732) 262-1027

Receipt

Payment Date 07/18/2011
Transaction # PMT-11-04724
Receipt #

Issued To IGOR MAKAROVSKY

Description DECK/ALTERATION/SIDING
1649 HARVARD AVENUE

Date Printed 07/18/2011
Check Number 708

Cash	$0.00
Check	$50.00
Charge	$0.00
Total Paid	$50.00

07/18/11 1:21PM 001558#7686
XX01 SERV.001
#04724
ZPA $50.00
CHECK $50.00

LM Failed Plan Review (3)
Wed 5/25/11
Need Fax# _____
or e mail address _____

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

Subcode Official Review

To: 1649 HARVARD AVENUE BRICK, NJ 08724 CC:

RE: Plumbing Subcode
Block: 832 Lot: 4 Qual:
1649 HARVARD AVE
Permit Number: Control Number: C-11-001485
Last Submit Date: Thursday, May 19, 2011

Date: Friday, May 20, 2011

1 Set of Plans given to H/O

Dear BARRETT, JOSEPH & STEINER, ANNA,
Your request is hereby denied based upon the following infractions.
1- plumbing drawing not to code NSPC 12.10.1
2- floor plan doesn't reflect the bath room size and the fixture clearances

Sincerely,

_____

Paul Auth , Subcode Official

6/10/11 - Resubmit - Ltr

1649 HARVARD AV,
BRICK, NJ 08724

ADDITION & ALTERATION COST.

ALTERATION.

1. NEW BATHROOM : 2,000
2. WINDOWS & DOORS REPLACEMENT: 1,700
3. KITCHEN CABINETS REPLACEMENT: 1,850
4. SIDING REPLACEMENT: 1,500

ADDITION:

1. NEW DECK: 2,000

TOTAL: $9,050.

Igor Makarovskiy

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: 1649 HARVARD AV

Block: 832 Lot: 4

Contractor: WASTE MANAGEMENT OF PENNSYLVANIA, INC.

Contractor's Address: 1121 Bordentown Rd, Morrisville, PA 19067

Type of Construction (minor, new home): MINOR

Type of Debris (shingles, siding, wood, etc.): asbestos siding, wood,

Party responsible for removal: _____

Dumpster size: 20 yds

Destination of debris: PA

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.

Signature

04/25/11
Date

STRASEVSKI
Print Name

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER _____ DATE 05.20.11

PROPERTY ADDRESS 1649 HARVARD BLOCK 832 LOT 4

ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMING FIXTURES	NUMBER	(sfu)	WATER UNITS	(dfu)	DRANAGE
1. BATHROOM GROUP	2	( )	7.0	( )	
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 CONDITION WATER COOLED		( )		( )	
16. DENTAL UNIT		( )		( )	
17. LAWN SPRINKLE		( )		( )	
18. FIRE SPRINKLE		( )		( )	
19. HOSE BIBS		( )		( )	
TOTALS			13.		

GALLONS PER MINUTE _____

SIZE of SERVICE 3/4"

DATE: _____ APPROVED BY: _____

List of Existing Plumbing Fixtures

BLOCK 832 LOT 4

ADDRESS 1649 HARVARD AV, BRICK, NJ 08724

OWNER IGOR MAKAROVSKIY

1 WATER CLOSET (TOLIET)

— URINAL/BIDET

1 BATH TUB

1 LAVATORY (BATHROOM SINKS)

_____ SHOWER

1 SINK (KITCHEN)

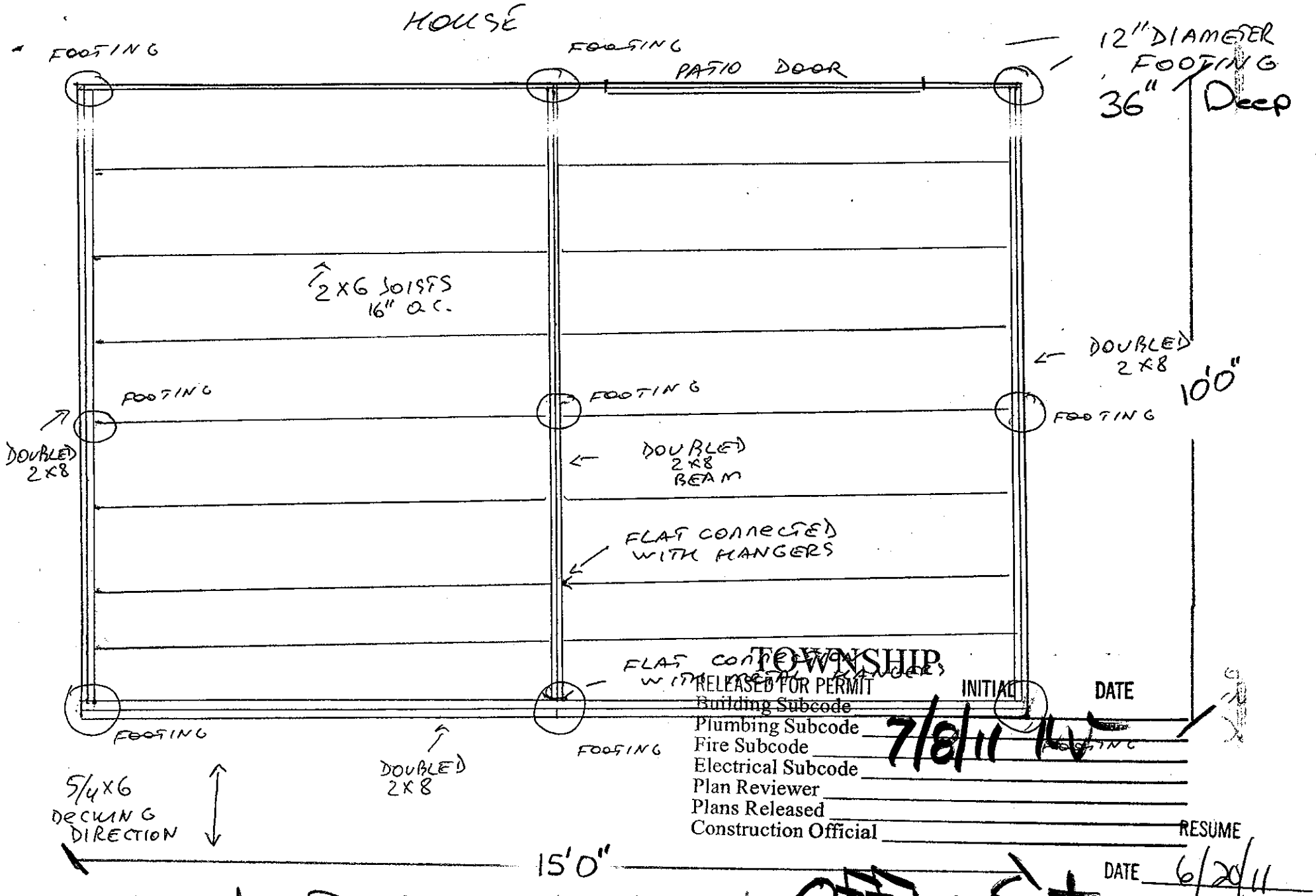
1 DISHWASHER

1 WASHING MACHINE

_____ HOSE BIBS (TOWNSHIP WATER ONLY)

— MOP SINK

ONLY FILL OUT ABOVE IF YOU ARE ADDING PLUMBING TO YOUR ADDITION.



TOWNSHIP

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode		
Plumbing Subcode		7/8/11
Fire Subcode		
Electrical Subcode		
Plan Reviewer		
Plans Released		
Construction Official		

RESUME
DATE 6/20/11

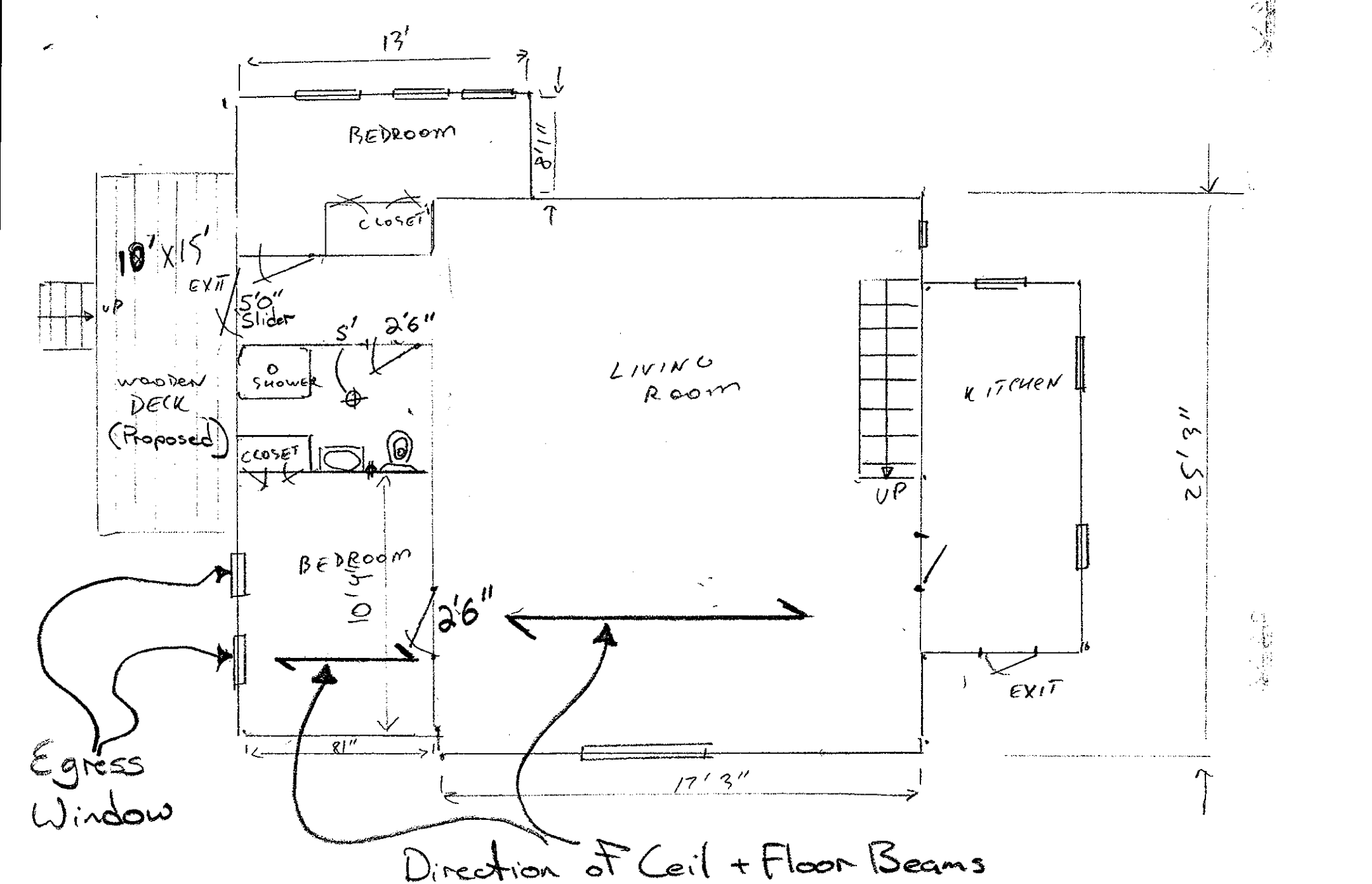
* Note Deck will be less than 2' High From Grade

Office Set

SCALE: 1/2" = 1'

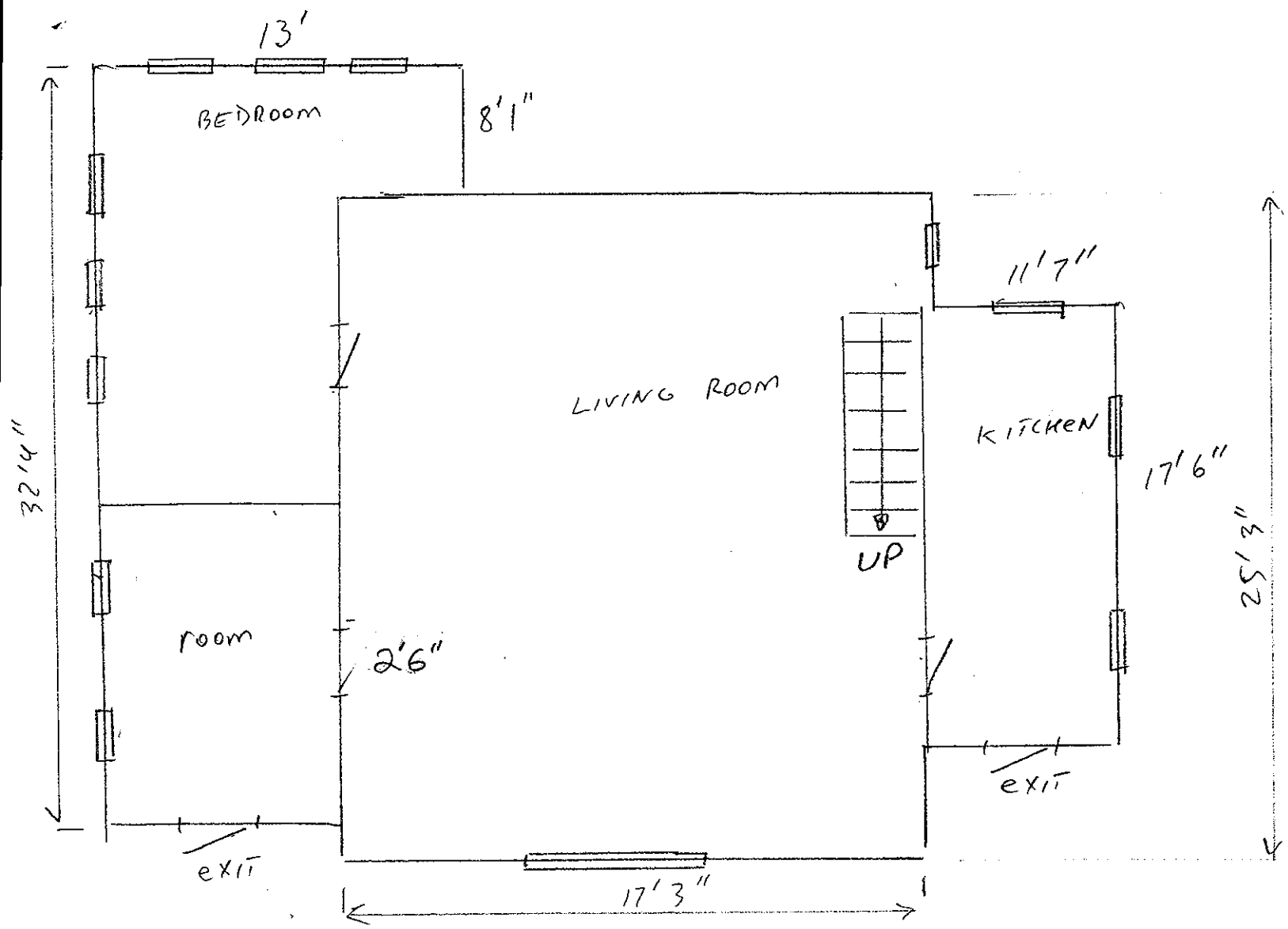
OWNER: IGOR MAKAROVSKY
ADDRESS: 1649 HARVARD
BRICK, NJ 08724

DECK PLAN VIEW



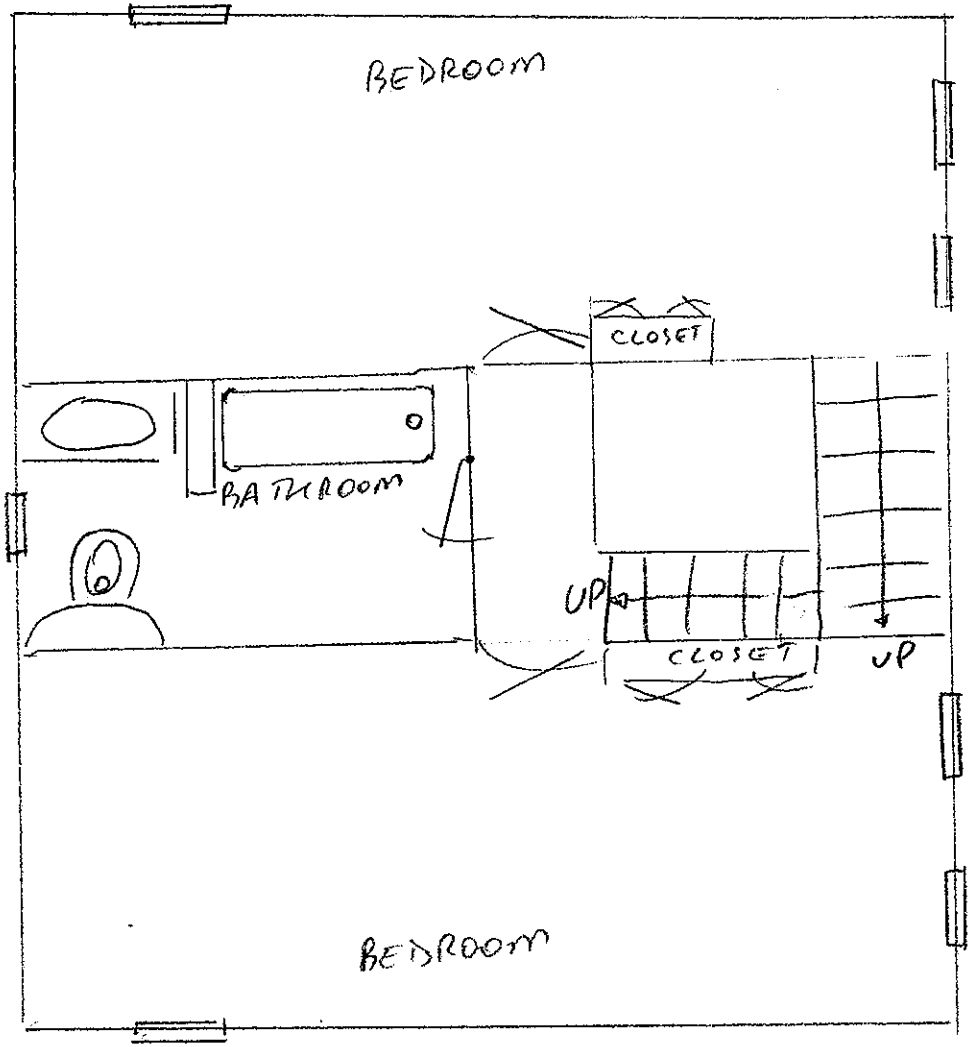
OWNER I. MAKAROVSKIY
ADDRESS: 1640 HARVARD AV, BRICK, N.

FIRST FLOOR PLAN WITH ALTERATIONS



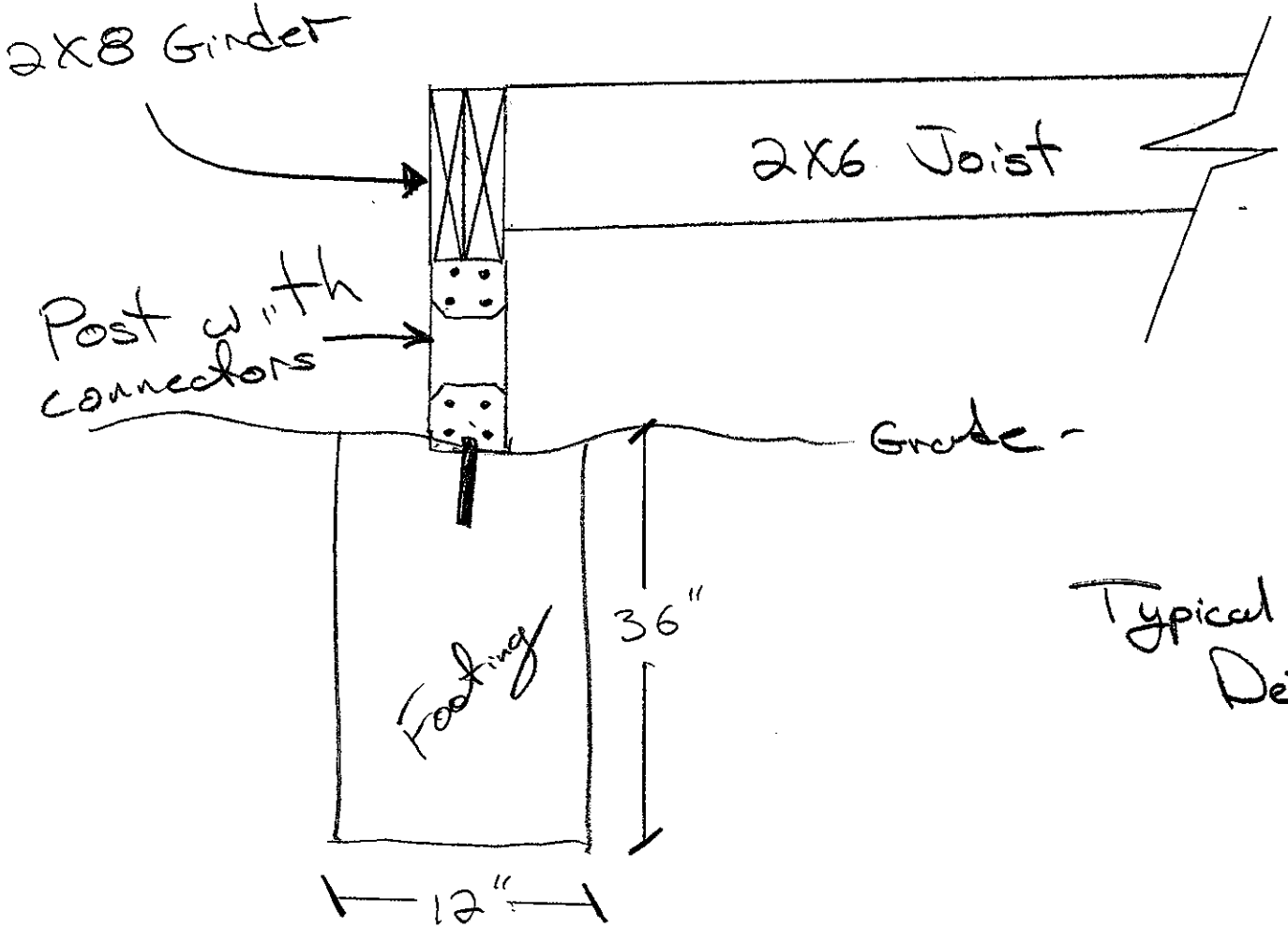
OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD AV,
BRICK, NJ

FIRST FLOOR PLAN
(EXISTING STRUCTURE)



OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD A
BRICK, NJ

SECOND FLOOR PLAN
(EXISTING STRUCTURE,



Typical Connection Detail

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

Subcode Official Review

To: 1649 HARVARD AVENUE BRICK, NJ 08724 CC:

RE: Fire Subcode
Block: 832 Lot: 4 Qual:
1649 HARVARD AVE
Permit Number: Control Number: C-11-001485
Last Submit Date: Tuesday, May 17, 2011

Date: Thursday, May 19, 2011

Dear BARRETT, JOSEPH & STEINER, ANNA,
Your request is hereby denied based upon the following infractions.

Require electric/battery operated smoke detector inside new bedroom being created.

Require electric/battery operated smoke detectors within 10ft. of all bedrooms on every level.

Smoke detectors are to be interconnected.

Same as items 1, 2 and 3 on building review.

Sincerely,

Ron Piszar, Subcode Official

6/16/11 - Resubmit - Lot

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

2nd Review

Subcode Official Review

To: 1649 HARVARD AVENUE BRICK, NJ 08724 CC:

RE: Building Subcode
Block: 832 Lot: 4 Qual:
1649 HARVARD AVE
Permit Number: Control Number: C-11-001485
Last Submit Date: Monday, June 20, 2011

Date: Tuesday, June 21, 2011

Dear BARRETT, JOSEPH & STEINER, ANNA,
Your request is hereby denied based upon the following infractions.

Home owner must schedule appt to meet with plan reviewer to discuss the resubmit and do the plan review at the counter.

6/21/11 MV - Contacted H.O. to discuss

Sincerely,

Michael Vecchio, Subcode Official

Andre

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

Subcode Official Review

1st Review

To: 1649 HARVARD AVENUE BRICK, NJ 08724 CC:

RE: Building Subcode
Block: 832 Lot: 4 Qual:
1649 HARVARD AVE
Permit Number: Control Number: C-11-001485
Last Submit Date: Tuesday, May 17, 2011

Date: Tuesday, May 17, 2011

Dear BARRETT, JOSEPH & STEINER, ANNA,
Your request is hereby denied based upon the following infractions.

Plans must be drawn TO SCALE

Minimum bedroom dimension must be 7'0"

Egress window required for bedroom. (select manufacturer and provide spec sheet)

Deck details too vague.

**** Set up appointment to meet with plan reviewer to discuss rejections

Sincerely,

Michael Vecchio, Subcode Official

6/16/11 - Resubmitted - Ltr

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

Subcode Official Review

To: 1649 HARVARD AVENUE BRICK, NJ 08724 CC:

RE: Building Subcode
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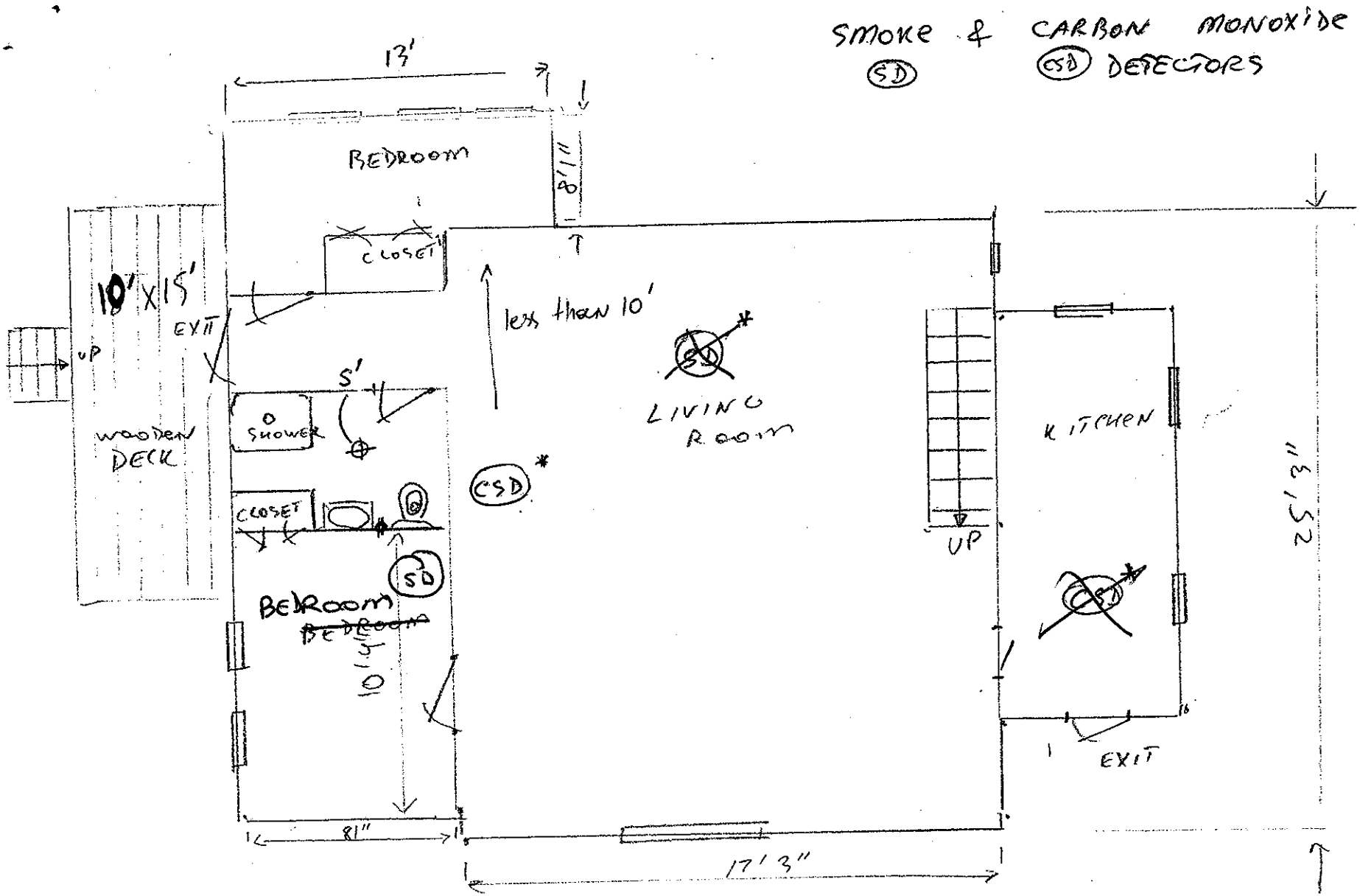
Michael Vecchio, Subcode Official

Ken Anderson
thursday 10:30.

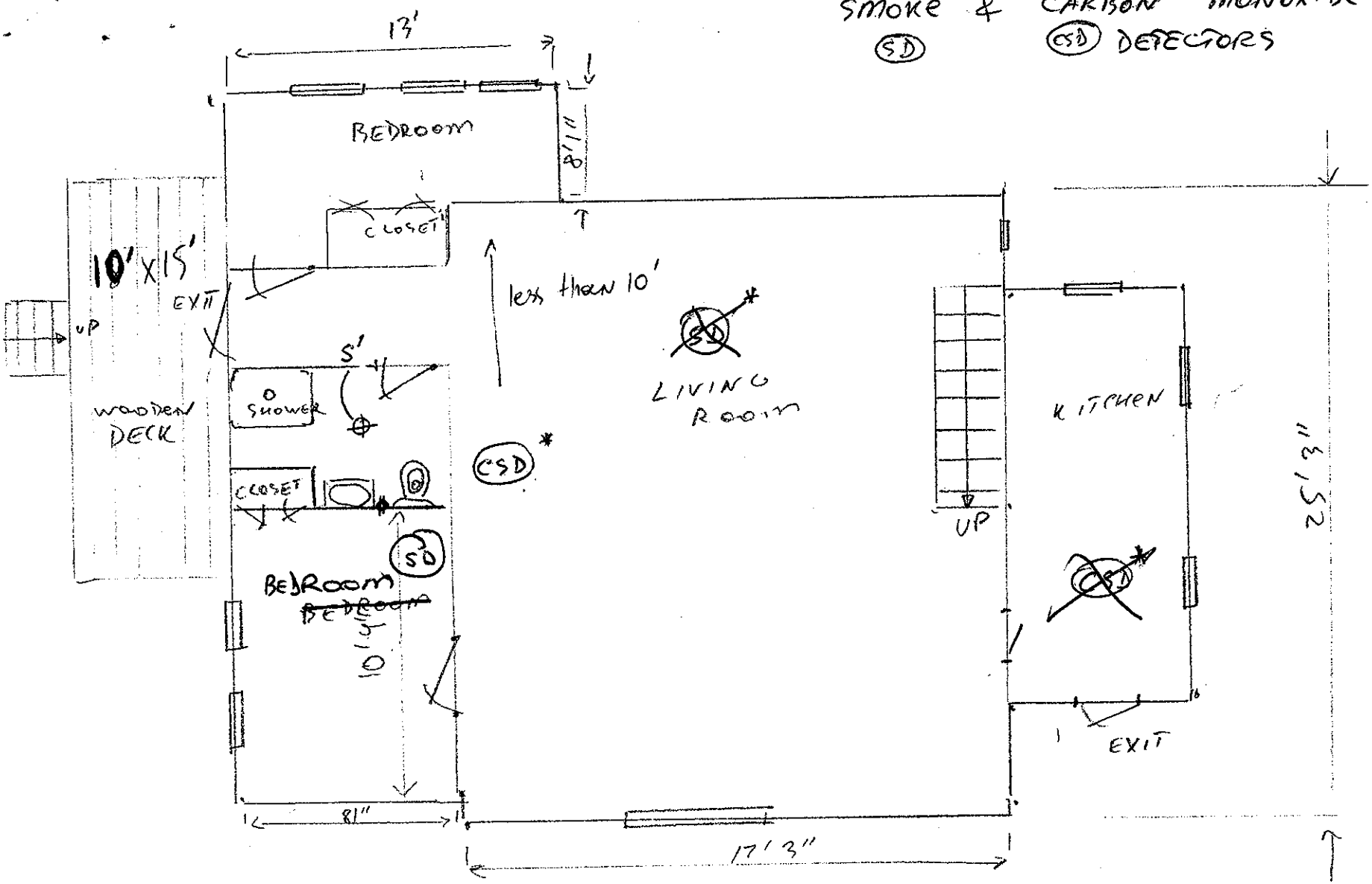


* = ~~BATTERY OPERATED~~

SD's = hardwired, battery backup interconnected

OWNER I. MAKAROVSKIY
ADDRESS: 1640 HARVARD AV, BRICK, NJ

FIRST FLOOR PLAN
WITH ALTERATIONS

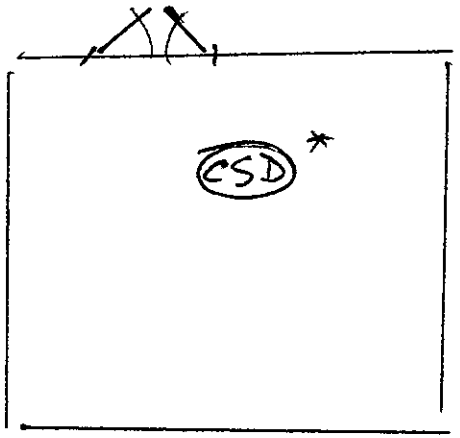


* = ~~BATTERY OPERATED~~

SD's = hardwired, battery backup, interconnected

OWNER I. MAKAROVSKIY
ADDRESS: 1640 HARVARD AV, BRICK, NJ
FIRST FLOOR PLAN WITH ALTERATIONS

SMOKE & CARBON MONOXIDE DETECTORS

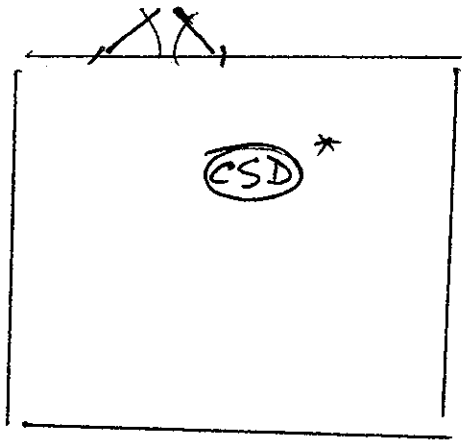


~~* BATTERY OPERATED~~

*SD's = hardwired, Battery Backup Interconnected

OWNER: IGOR MAKAROVSKIY
ADDRESS:
1649 HARVARD AV,
BRICK NJ.
BASEMENT PLAN

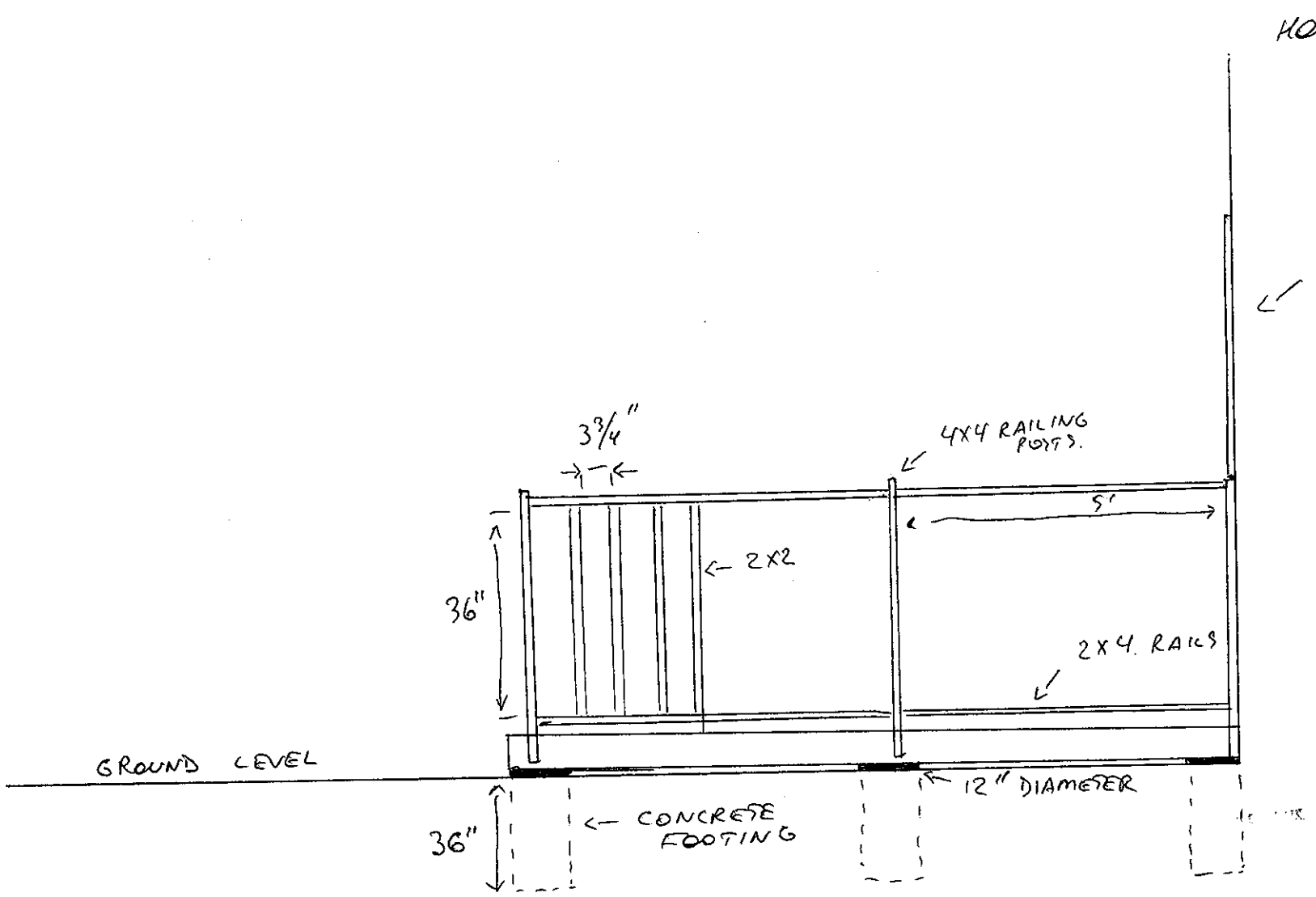
SMOKE & CARBON MONOXIDE DETECTORS



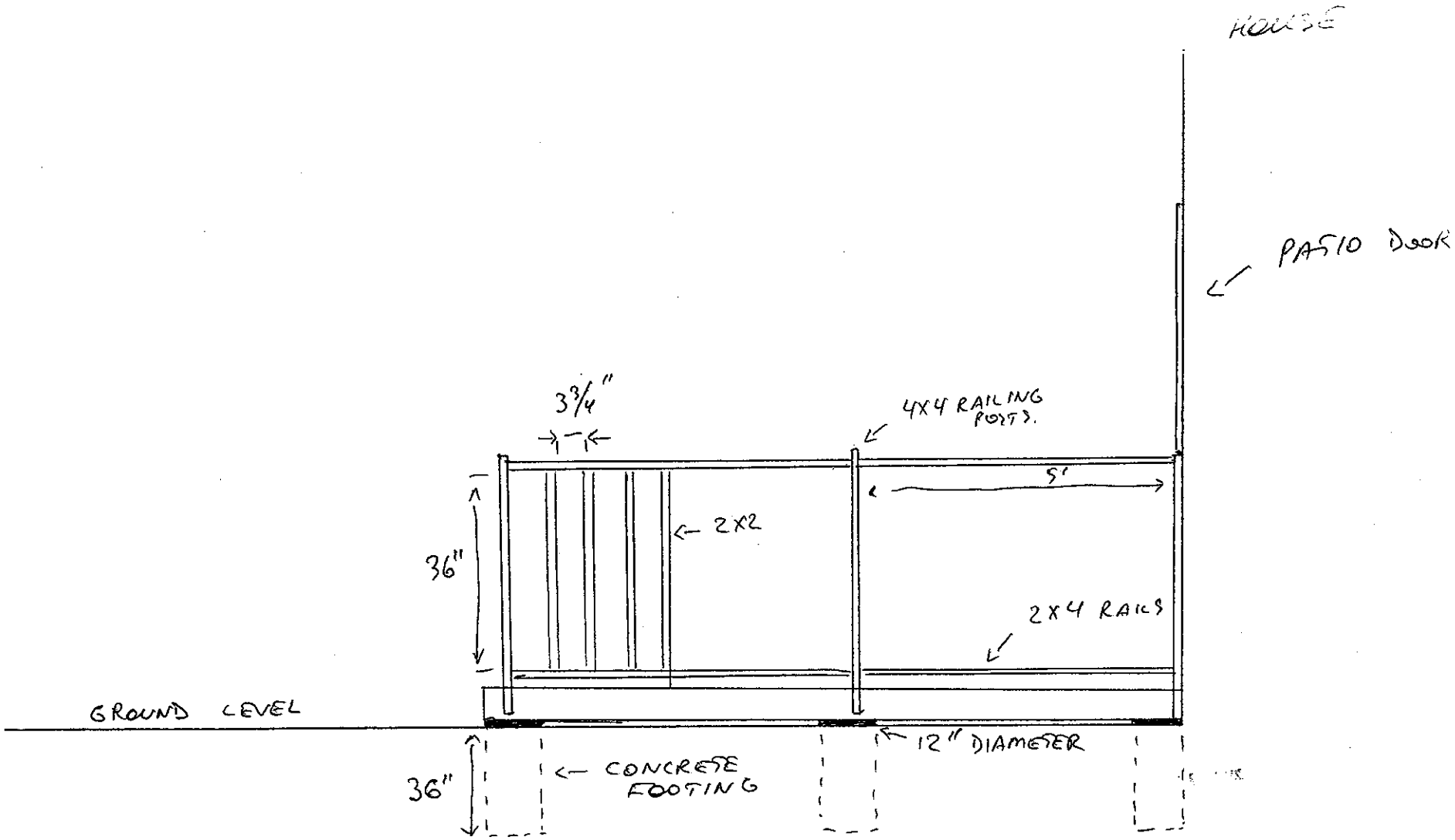
~~* BATTERY OPERATED~~

*SD's = hardwired, battery backup interconnected

OWNER: IGOR MAKAROVSKI
ADDRESS:
1649 HARVARD AV,
BRICK NJ.



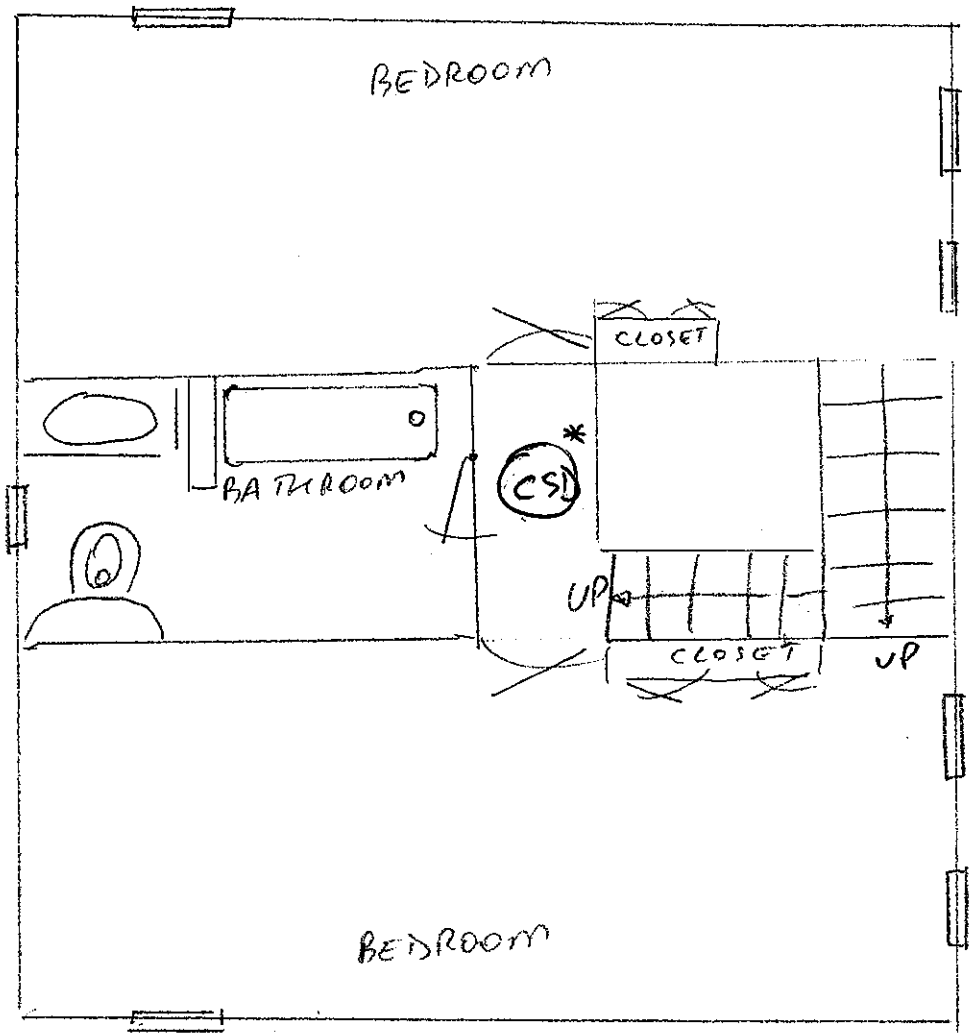
OWNER: IGOR MAKAROVSKIY
ADDRESS: 1649 HARVARD
BRICK NJ 0872
DECK ELEVATION VIE



OWNER: IGOR MAKAROVSKIY
ADDRESS: 1649 HARVARD
BRICK NJ 08
DECK ELEVATION VIE

SMOKE & CARBON MONOXIDE DETECTORS

(SD) (CSD)



Existing - Battery

~~* - BATTERY OPERATED~~

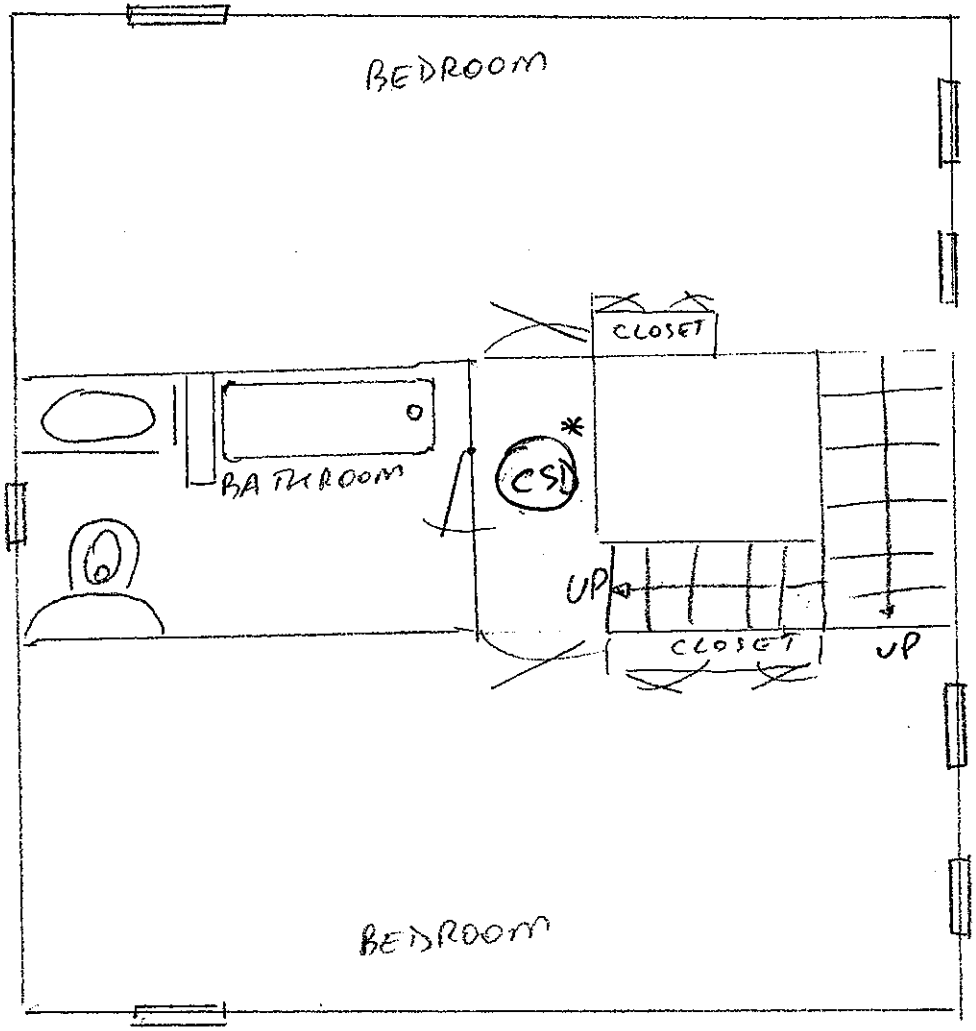
SD's = hardwired, battery backup interconnected.

OWNER: I. MARAROVSKIY
ADDRESS: 1649 HARVARD A BRICK, NJ

SECOND FLOOR PLAN / EXISTING STRUCTURE

SMOKE & CARBON MONOXIDE DETECTORS

(SD) (CSD)



Existing - Battery

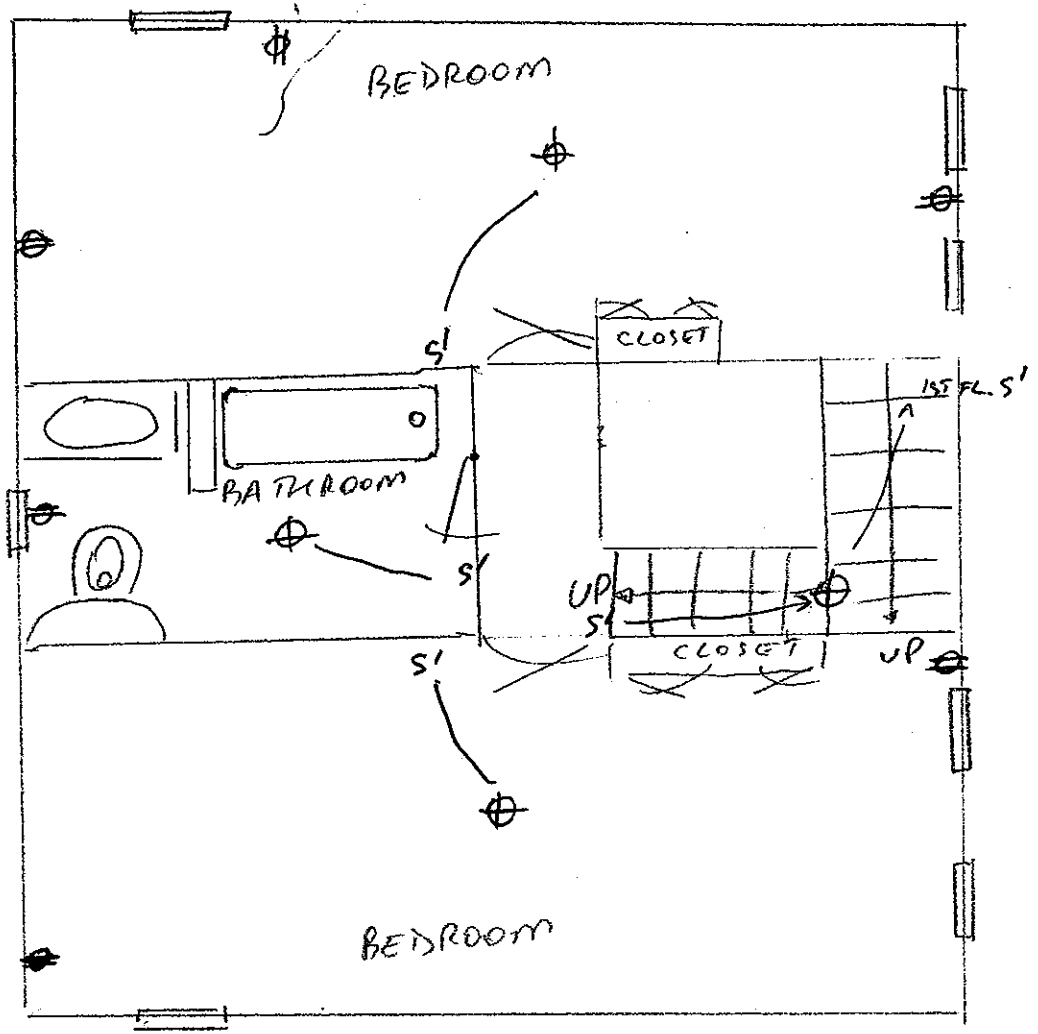
~~* = BATTERY OPERATED~~

SD's = hardwired, battery backup interconnected.

OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD A
BRICK, NJ

SECOND FLOOR PLAN
/EXISTING STRUCTURE

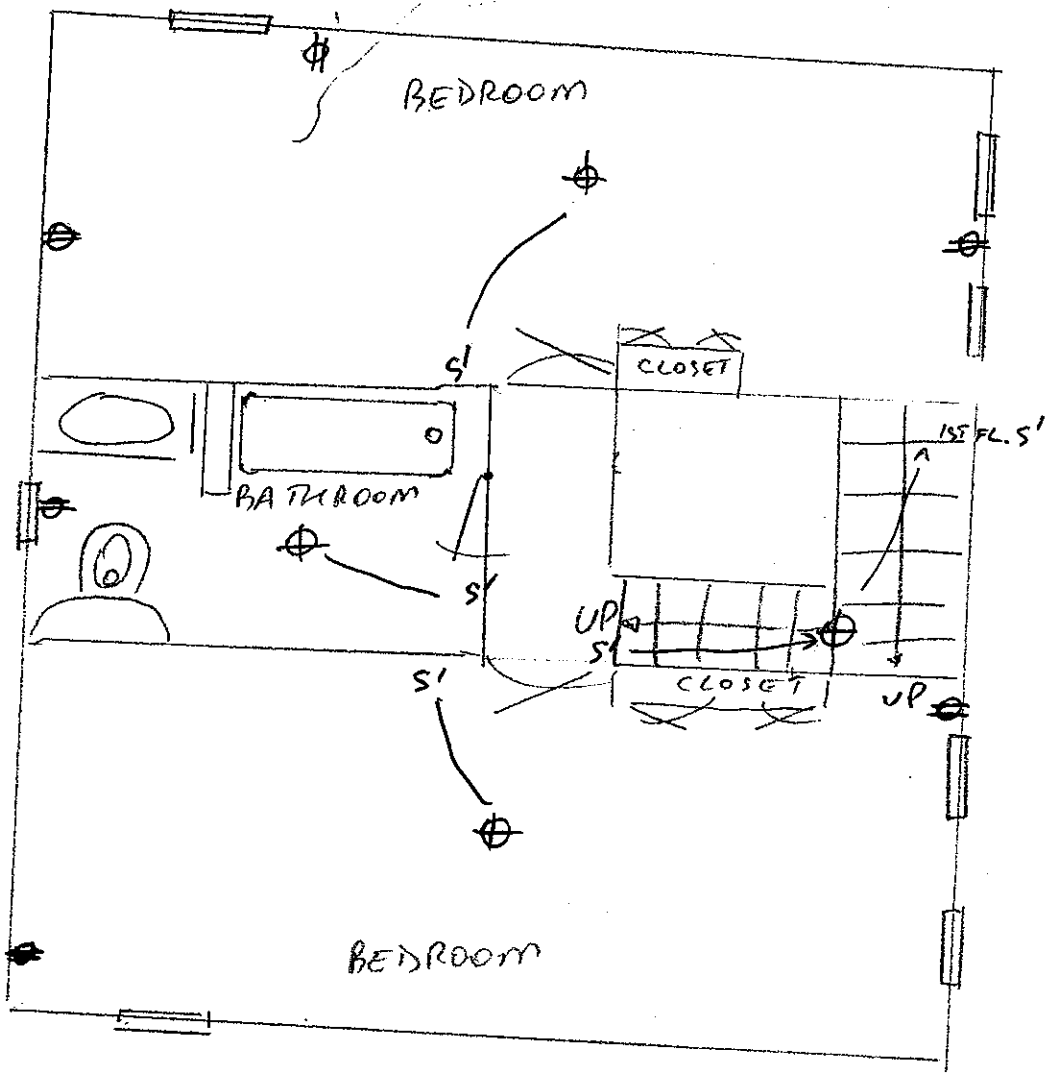
ELECTRICAL LOCATIONS



OWNER: I. MAKAROVSK...
ADDRESS: 1649 HARVARD
BRICK, NJ

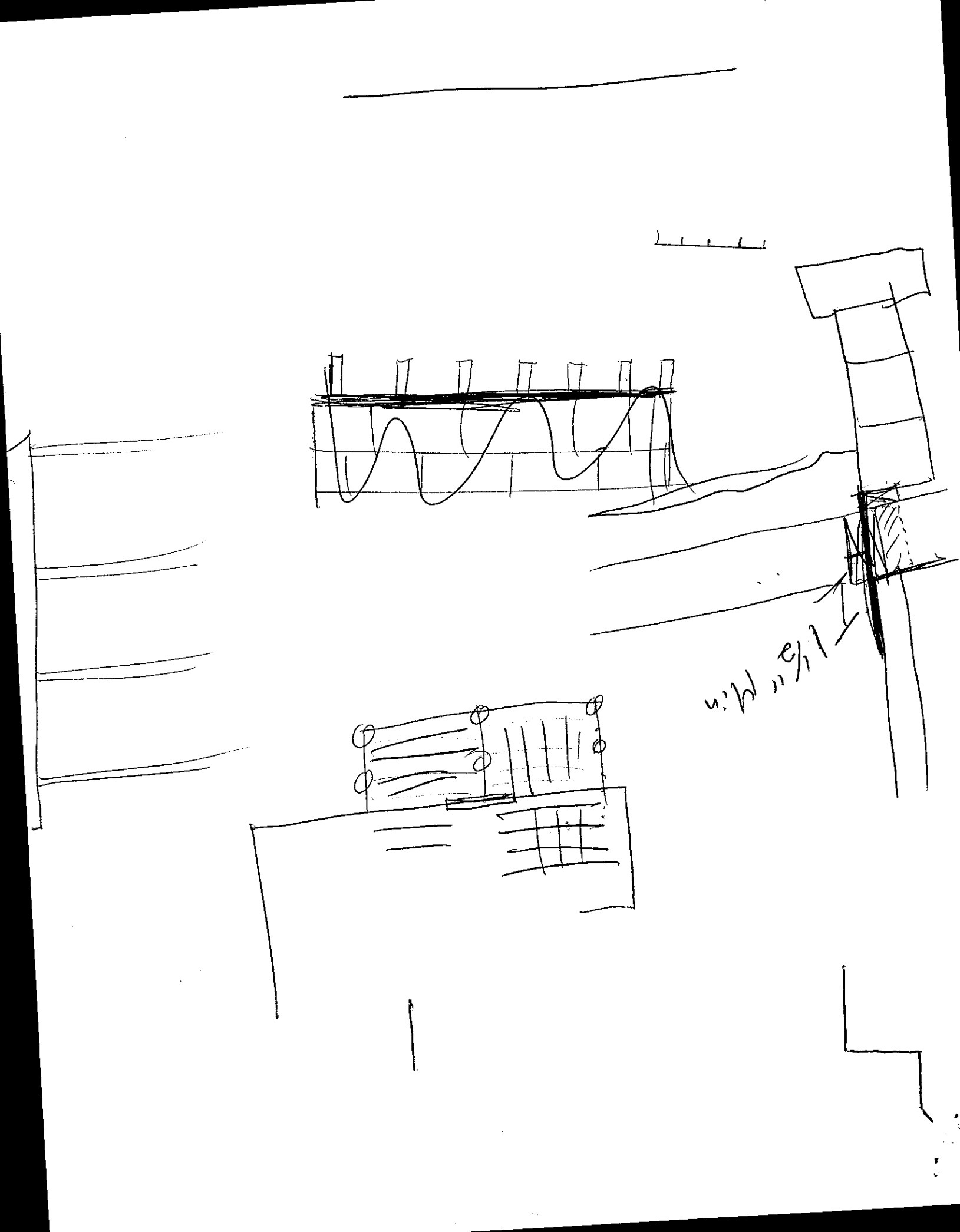
SECOND FLOOR PL...
/EXISTING STRUCTU...

ELECTRICAL LOCATIONS

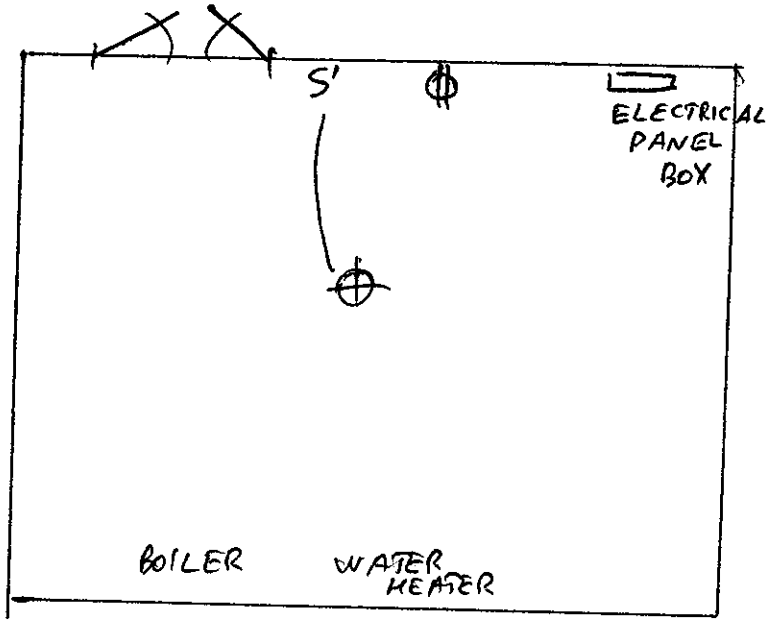


OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD
BRICK, NJ

SECOND FLOOR PLAN
/EXISTING STRUCTU


1 1/2" min.

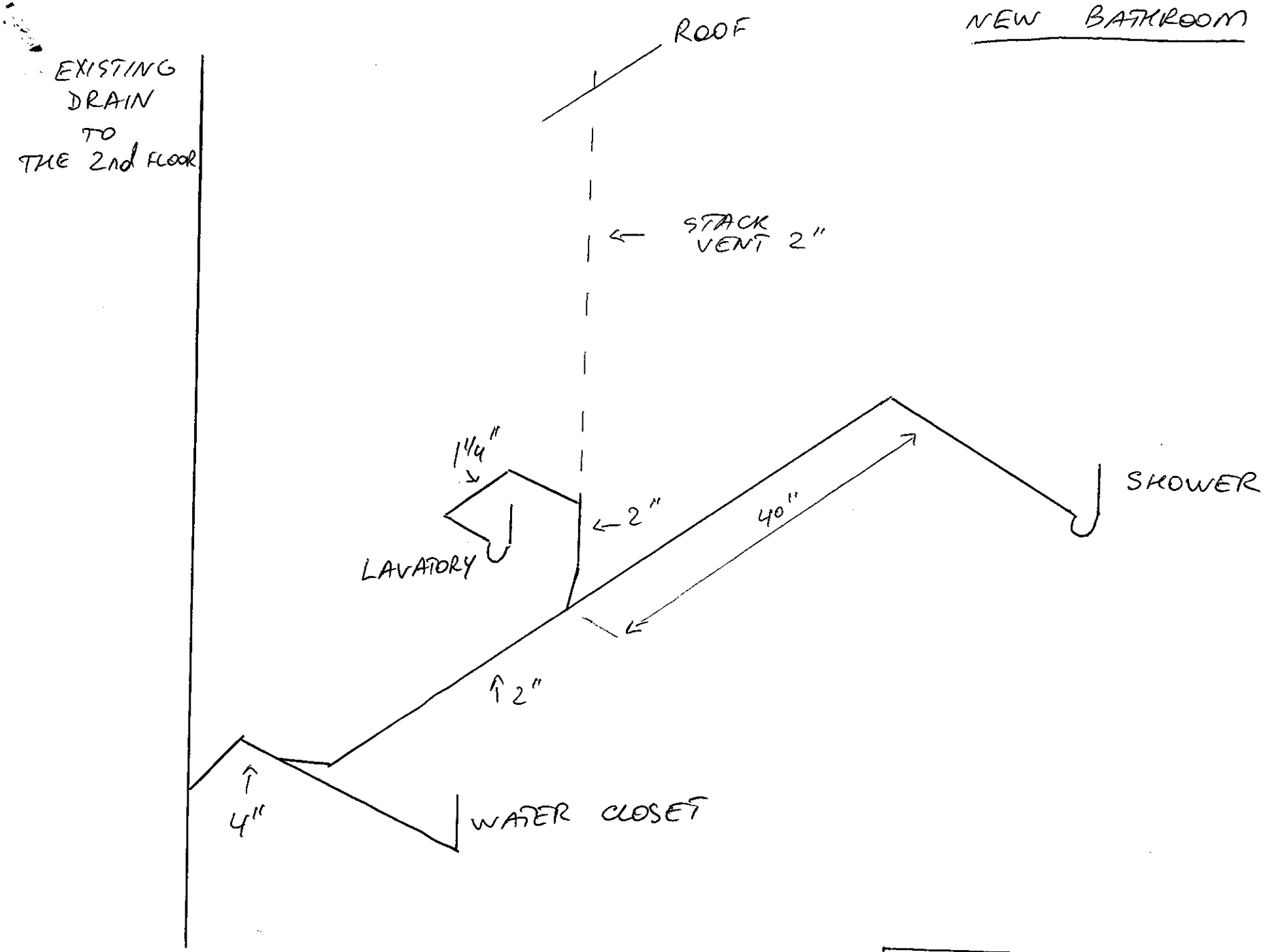
ELECTRICAL LOCATIONS



OWNER: IGOR MAKAROVSKIY
ADDRESS: 1649 HARVARD AV
BRICK, NJ 08724

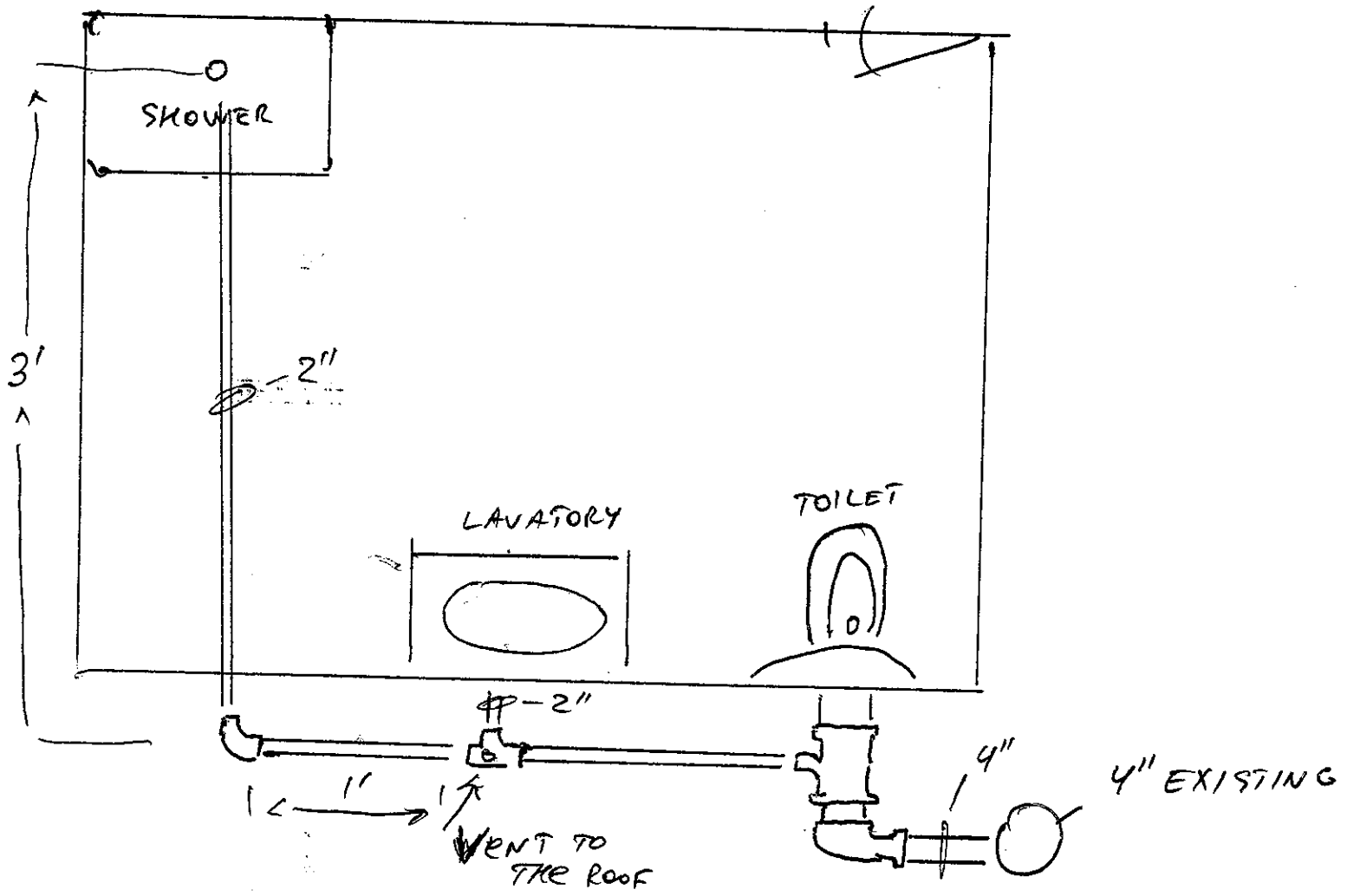
BASEMENT PLAN

NEW BATHROOM



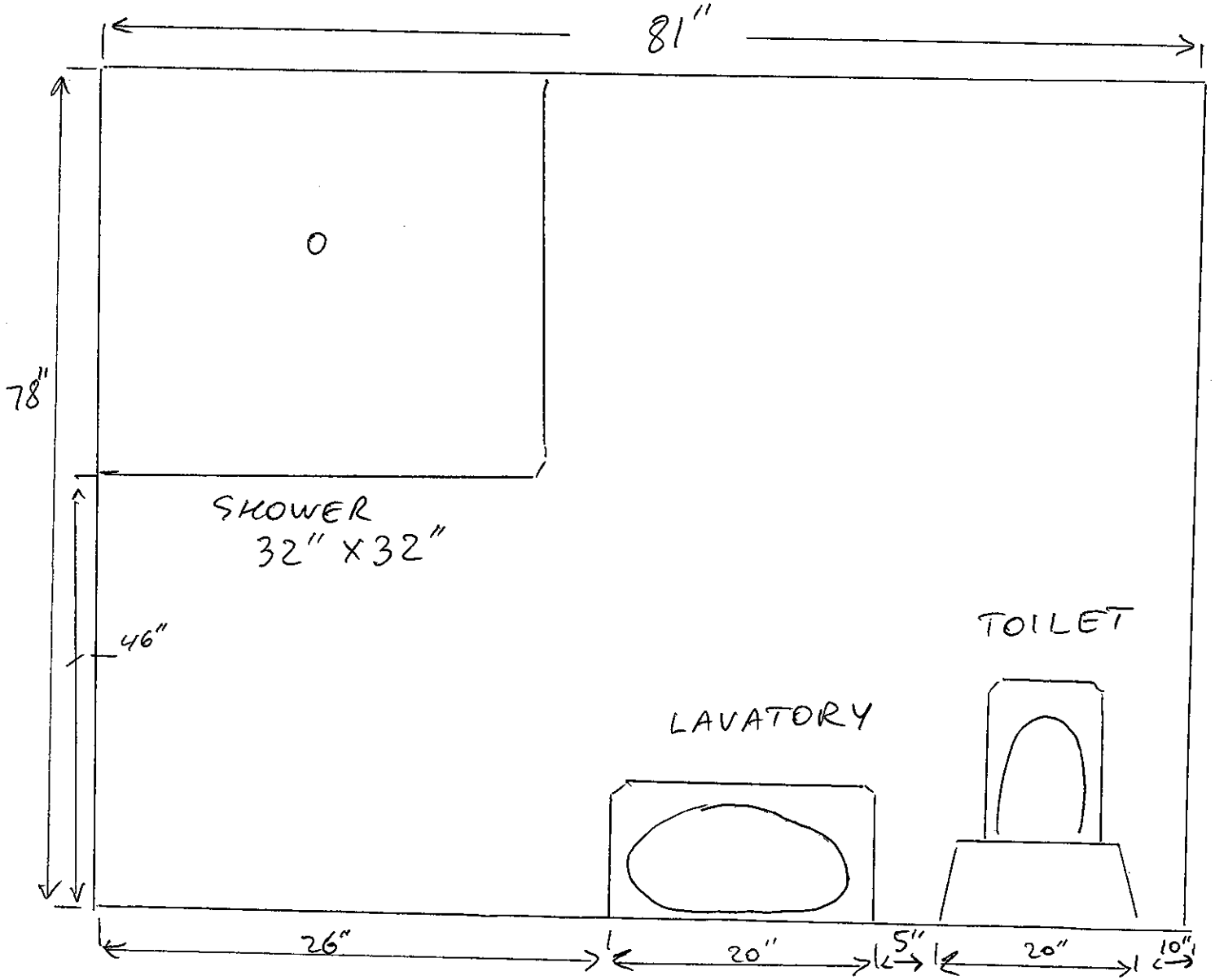
OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD AV.
BRICK, NJ 08724

NEW BATHROOM (PROPOSED)



OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD AV,
BRICK, NJ 08724
DRAIN WASTE VENT PLAN

NEW BATHROOM



OWNER: I. MAKAROVSKIY
ADDRESS: 1649 HARVARD AV
BRICK, NJ 08724