

BLOCK 832 LOT 1 ADDRESS (SITE) 1652 TILFORD BLVD PERMIT NO. 1265-93

RECEIVED

APR 22 1993



CONSTRUCTION PERMIT APPLICATION

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

DIV. OF INSPECTION

I. IDENTIFICATION

1. Proposed Work-site at: 1652 TILFORD BLVD

2. Name of Owner in Fee: DONNA MELCHORNE Tel. 908
Address 1652 TILFORD BLVD BRICK N
street municipality zip code

3. Ownership in Fee: Public _____ Private X

4. Principal Contractor: SAME
Address _____
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Emp. No. _____ Social Security No. _____

5. Architect or Engineer _____ Tel. (____) _____
Address _____

6. Responsible Person
In Charge of Work _____ Tel. (____) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>8-</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other			
6. Subtotal	\$ <u>5</u>		
7. Less 20% for State Plan Review			
8. Subtotal	\$ <u>1</u>		
9. DCA Training Fee			
10. Subtotal	\$ <u>20</u>		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>34</u>		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

1. Number of Stories	_____
2. Height of Structure	_____ ft.
3. Area—Largest Floor	_____ sq. ft.
4. Building Area—All Floors	_____ sq. ft.
5. Volume of Structure	_____ cu. ft.
6. Construction Classification	_____
7. Total Land Area Disturbed	_____ sq. ft.
8. Flood Hazard Zone	_____
9. Base Flood Elevation	_____ ft.
10. Wetlands yes _____ sq. ft. no _____	
11. Fire Grading	_____
12. Max. Live Load	_____
13. Max. Occupancy Load	_____

II. PROPOSED WORK

	Est. Cost
1. ☐ Minor Work (single trade)	
2. ☐ Small Job (\$5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ Alteration	
6. ☐ Fire Protection	
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS	<u>600</u>

L-R. ALTERATION

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>WP</u>	<u>4/22/93</u>		<u>6/17/93</u>	<u>[Signature]</u>			

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)

2. ☐ Multi-Family (R-2)

3. ☐ Two-Family (R-3) BOCA

4. ☐ Two-Family (R-4) CABO

5. ☒ One-Family (R-3) BOCA

6. ☐ One-Family (R-4) CABO

No of dwelling units: _____

Before Construction _____

After Construction _____

Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use: _____

2. Use Group: _____

3. Change in Use Group, Indicate Former: _____

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	3. ☐ Pressure Vessels	6. ☐ Hazardous Uses/Places of Assembly
2. ☐ High Pressure Boilers	4. ☐ Refrigeration Systems	7. ☐ Sprinklers
	5. ☐ Cross-Connections/Backflow	8. ☐ Smoke Control Systems in Open Wells

LDS BR 10312394

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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

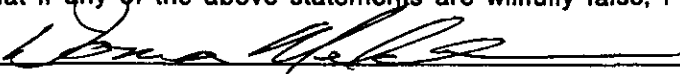
I further certify that I will perform the following work:

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 4-22-93

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

☐ Check if contractor.

Agent Name _____

Address _____

Telephone (_____) _____

Signature _____ Date _____

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	
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☐ Other									
☐									
☐									

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

Name of Code & Edition _____ Building _____ Electrical _____ Plumbing _____ Fire Protection _____ Mechanical _____	Name of Code & Edition _____ Energy _____ Barrier Free _____ Flood Hazard _____ As Built Elevation Cert. _____ Other _____	Other _____ _____ _____ _____
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X. CERTIFICATES ISSUED (office use only)

☐ Temporary Certificate of Occupancy	No. _____
☐ Temporary Certificate of Occupancy	No. _____
☐ Continued Certificate of Occupancy	No. _____
☐ Certificate of Occupancy	No. _____

DATE EXPIRED _____



CONSTRUCTION PERMIT

Date Issued 6-17-93
Control #
Permit # 1265-93

IDENTIFICATION Block 832 Lot 1
Work Site Location 1652 Tipton Road, Blvd Contractor None
Owner in Fee Donna Melchione Address _____
Address same Tele. (____) _____
Tele. (____) _____ Lic. No. or Bldrs. Reg. No. _____ Exp. Date 1265-93
Federal Emp. No. _____ BLOCK
or Social Security No. 832 #

is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER _____
☐ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

alteration

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 \$ 600.-

[Signature]
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only) \$	
Building <u>8.-</u>	0.00
Plumbing	0.00
Electrical	0.00
Fire Protection	0.00
Other <u>Plan 5.</u>	0.00
Other	0.00
DCA Training Fee <u>1.00</u>	0.00
Cert. of Occ. <u>500.-</u>	0.56
Other	
Total <u>34.-</u>	
Check No. <u>1324</u>	
Cash	
Collected By:	



Date Received
Date Issued 6-17-93
Control #
Permit # 1265-93

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

Block 832 Lot 1
Work Site Location 1652 TILFORD BLVD

Owner in Fee DONNA MELCHIONE
Address 1652 TILFORD BLVD

Tele. [REDACTED]
Contractor SPARE
Address

Telex [REDACTED]
Lic. No. or Bldg. Reg. No.
Federal Emp. No. or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
			Type:	Failure	Approval
☐ No Plans Req.			Footings		
☐ All			Foundation		
☐ Footing			Slab		
☐ Foundation			Frame		
☐ Other			Insulation		
Joint Plan Review Required:			Finishes:		
☐ Elec. ☐ Plumb. ☐ Fire			Energy		
SUBCODE APPROVAL			Mechanical		
☐ CO ☐ CCO ☐ CA			TCO		
Date			Other		
Approved By:			Final		

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. \$
2. Alteration \$1,800.00
3. Total (1+2) \$

C. CERTIFICATION IN LIEU OF OATH

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

Signature [Signature]

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

REPAIR AND UPGRADE EXISTING PORCH
SHEATHING
REPLACE WINDOWS
SIDING
FOUNDATION
ROOFING

(Office Use Only)
FEE

TYPE OF WORK:	(Office Use Only)
☐ New Building	\$
☐ Addition	
☐ Alteration	
☐ Roofing	
☐ Siding	
☐ Other	
☐ Demolition	
☐ Miscellaneous	
☐ Fence	Height
☐ Sign	Sq. Ft.
☐ Pool	
☐ Elevator	
☐ Asbestos Abatement	
☐ Other	

Administrative Surcharge	\$
Paid ☐ Check #	
Minimum Fee	\$
Collected by: TOTAL FEE	\$

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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



Carolyn L. Patetta, Mayor

Township Council:

Warren H. Wolf, President
Albert Chrobocinski
Victor Cantillo
Helen Fayad
Lee Hartman
Thomas G. Maiorine
Mary Lou Powner

Department of Administration & Finance

Office of Land Use Management
Richard E. Garnett, P.L.S., P.P.
Municipal Surveyor/Planner
(908) 262-1040
Fax: (908) 920-4850

May 21, 1998

Donna Melchionne
1652 Tilford Blvd.
Brick, N.J. 08723

RE: Block 832, Lot 1
1652 Tilford Blvd.

Dear Ms. Melchionne:

Your application for zoning approval for a construction permit for an alteration and dog run fence on the referenced property is denied because under Section 190-33.1 of the Township Code a fence over four (4) feet high must be setback at least 25 feet from the property line at the street and you propose a setback of only 12 feet.

In order to build within the setback a variance must first be approved by the Board of Adjustment. Since the fence is already erected in violation, please either remove it or make application for a variance immediately.

Thank you for your anticipated cooperation.

Very truly yours,

Sean Kinnevy
Zoning Officer

SK/kb

cc: Mayor Carolyn Patetta
Warren H. Wolf, Council President
Scott MacFadden, Business Adm.
Arthur J. Cierzo, Construction Official
Division of Inspections
Valentine Bernhardt



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3239

Office of
Division of Inspections

CHECK LIST

Re: Block 892 Lot 1

Please be advised that your application for a construction permit for the subject property has been rejected due to deficiencies in the following areas:

Administrative	<u>Show height of dog run fence</u>
Zoning	_____
Engineering	_____
Building	_____
Plumbing	_____
Electric	_____
Fire	_____

See attached review check list (s) for details as to the reason your submission has been rejected. Please revise your application accordingly and resubmit to this office.

There is a 20 working day time limit for review of all documents submitted with a building permit application. This time limit ceases in the event of a rejection of any type, and starts over again when the rejection/(s) have been corrected and the application resubmitted.

4-26-93

Arthur J. Cierzo, Construction Official

*Called
N/A
4-27-93*