BLOCK 838 LOT 12 13 14 15 ADDRESS (SITE) 1676 Forge Pond Rd, Brick PERMIT NO. 1643-96

RECEIVED
MAY 14 1996
DIV. INSPECTIONS

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 1676 Forge Pond Road
2. Name of Owner in Fee: Daniel J Kelly Tel. [redacted]
   Address 1676 Forge Pond Road (street) Brick (municipality) N.J. 08724 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Same Tel. (___) _____
   Address _____
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. _____ Social Security No. [redacted]
5. Architect or Engineer _____
   Address _____
6. Responsible Person in Charge of Work _____ Tel. (___) _____

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	57-		
2. Electrical				
3. Plumbing		38		
4. Fire Protection		N/A		
5. Elevator Devices				
6. Subtotal	$	95-		
7. Less 20% for State Plan Review				
8. Subtotal	$			
9. DCA Training Fee		5-		
10. Subtotal	$			
11. Cert. of Occupancy		35-		
12. Other 20 Apps		$30		
13. TOTAL	$	165.00		

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

1. Number of Stories 2 — last line added
2. Height of Structure _____ ft.
3. Area—Largest Floor 1500 ; 260 sq. ft. — 260 sq ft
4. New Building Area existing ~~300~~ sq. ft Total
5. Volume of New Structure 3380 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. Max. Live Load _____
12. Max. Occupancy Load _____

II. PROPOSED WORK

ADDITION

	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. ☐ Elevator Devices	
10. ☐ Asbestos Abatement	
11. ☐ Demolition	
TOTAL COSTS AM X	20,000 00

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
	5/14/96		6/13/96		2/3/97		
			6/5/96				
			7-3-96		1/23/97		
JWG	5/23/96		5/23/96				

III. DO YOU WANT: (optional) 1 ☐ Partial Releases 2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☒ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction _____
After Construction _____
Net gain or loss _____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10209870

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 X Darrell A Kelly Date X 9 May 14 1996

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	
☐ Zoning Officer									
☐ 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.									
☐									
☐									

IMPORTANT
A.H.B.T. EXEMPT

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.				

CONSTRUCTION PERMIT

Date Issued 7/3/96
Control #
Permit # 1643-96

IDENTIFICATION Block 838.08 Lot 12-15

Work Site Location 1676 Fairmont Rd Contractor Same

Owner in Fee Daniel Kolly Address

Address Same Tele. ( ) Lic. No. or Bldrs. Reg. No. Exp. Date

Tele. ( ) Federal Emp. No. or Social Security No.

is hereby granted permission to perform the following work:

[X] BUILDING [X] PLUMBING [ ] OTHER

[ ] ELECTRICAL [ ] FIRE PROTECTION

DESCRIPTION OF WORK:

Addition

260
3380

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 $ 20,000.00

Ray Konkowski
CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

PAYMENTS (Office Use Only)	
Building	57 —
Plumbing	35 —
Electrical	
Fire Protection	
Other	
Other	
DCA Training Fee	5
Cert. of Occ.	35 —
Other	2H+HP 30 —
Total	
Check No.	# 1414
Cash	
Collected By:	LD

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 7/3/96
Control #
Permit # 1643-96

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

Block 838 Lot 12 13 14 15
Work Site Location 1676 Forge Pond Road
Brick NJ 08724
Owner in Fee Daniel J Kelly
Address 1676 Forge Pond Road
Brick NJ 08724
Tele. [redacted]
Contractor ERIC Keller Custom Carpentry
Address PO Box 93
Lavallette NJ 08735
Tele. (908) 681-8137
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

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 Daniel J Kelly

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK A 16'x26' ADDition to existing Home, ADDitional will Be A BATHRoom unto Existing BedRoom and will also ENLARGE Existing DINing Room.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS Type:	Failure	Failure	Approval	Initial
[ ] No Plans Req.							
[X] All	6/13/96	JL	Footing			7/16/96	
[ ] Footing			Foundation			7/25/96	JL
[ ] Foundation			Slab				
[ ] Frame			Frame			9/4/96	
[ ] Other			Insulation			9/19/96	
Joint Plan Review Required:			Finishes:				
[ ] Elec. [ ] Plumb. [ ] Fire			Energy				
SUBCODE APPROVAL			Mechanical				
[ ] CO [ ] CCO [X] CA			TCO				
Date: 2-3-99			Other				
Approved By:			Final				

TYPE OF WORK:
[ ] New Building
[X] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (6' or over)
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement
[ ] Other _____
[ ] Other _____
[ ] Demolition

(Office Use Only)
FEE
$ _____

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors 260 Sq. Ft.
Volume of New Structure 3380 Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Alteration $ _____
3. Total (1+2) $ 20,000

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ DCA TRAINING FEE $ _____
TOTAL FEE $ _____

U.C.C. Form F-110B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

9-16-96 added ridge vent eliminated ceiling joist, must add flashing
gutter J Davis

9/19/96 Still need revised plan and check gutter flashing on
final J Davis

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued 7/3/96
Control #
Permit # 1643-96

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

Block 838 - 8 Lot 12 13 14 15
Work Site Location 1676 Forge Pond Road
Brick NJ 08724
Owner in Fee Daniel J Kelly
Address 1676 Forge Pond Road
Brick NJ 08724
Tele. [redacted]
Contractor Eric Keller Custom Carpentry
Address PO Box 93
Lakehurst NJ 08733
Tele. (908) 608-8137
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

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 Daniel A Kelly

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK A 10'x26' Addition to existing Home, Addition will be a Bathroom unto Existing Bedroom and will also enlarge Existing Dining Room.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	6/13/96	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire

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

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
New Bldg. Area/All Floors 260 Sq. Ft.
Volume of New Structure 3380 Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $
3. Total (1+2) $ 20,000

TYPE OF WORK:
[ ] New Building
[X] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence Height (6' or over)
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement
[ ] Other
[ ] Other
[ ] Demolition

(Office Use Only)
FEE
$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: DCA TRAINING FEE $
TOTAL FEE $

U.C.C. Form F-110B

1. White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

Brick

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # AUG 22 96 0 0 7 6 6 8

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

Block 838.8 Lot 12
Work Site Location 1676 FORGE POND ROAD
BRICK, NJ
Owner in Fee DAN KELLY
Address SAME AS ABOVE
Tele. ([redacted]
Contractor KOCH ELECTRICAL CONT.
Address 520 WATERSEDGE DR
TOMS RIVER NJ
Tele. ( ) 288-9446
Lic. No. 12609
Federal Emp. No. _____ or Social Security No. [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed addition
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 2,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: _____
Approved by: _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: 1-23-97
Approved By: B. Kodlubay #24

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough	____	____	9/4/96	5437
Temporary	____	____	____	____
Constr. Serv.	____	____	____	____
TCO	12/13/96	5437	____	____
Other	12-2-96 #24		1-23-97	B.K. #24
Service	12-5-96 #24	____	____	____
Final	____	____	____	____

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued 1-23-97 #24

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

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
10		Fixtures (1)	
9		Receptacles (2)	
10		Switches (3)	
29		Total 1 + 2 + 3	____
____	____ Kw	Range	____
____	____ Kw	Oven(s)	____
____	____ Kw	Surface Unit	____
____	____ hp	Dishwasher	____
____	____ hp	Garbage Disposal	____
____	____ Kw	Dryer	____
____	____ Kw	A/C Unit	____
____		Burglar Alarms	____
____		Intercoms Panels	____
1		Smoke Detectors	____
1	____ hp	Whirlpool/spa	____
____		Pool Bonding	____
____	____ hp	Pool Filter Motor	____
____		Pool Lights	____
____	____ Kw	Water Heater(s)	____
____	____ Kw	Central heat:	
		oil, gas or elec.	____
____	____ Kw	Baseboard Heat Units	____
____		Thermostats	____
____	____ hp	Heat Pump	____
____	____ hp	Pump(s)	____
____	____ Amp	Motor Control Center/Sub Panels	____
____		Signs	____
____	____	Light Standards	____
____	____ hp	Motors—Fractional H.P.	____
____	____ hp	Motors—All Others	____
____	____ Kw	Transformers	____
____	____ Kw	Generators	____
____	100 Amp	Service Entrance OUTSIDE REPAIR ONLY	____
____	____	Other (TK)	____

Paid [✓] Check # 98 Administrative Surcharge $ _____
RPF Minimum Fee $ _____
DCA Training Fee $ _____
Collected by: _____ TOTAL FEE $ 75.—

U.C.C. Form F-1208 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

12-2-96 (1) Whirlpool Tub has been added
Needs pre-shut Both Pump motor heaters on same circuit
(2) 20 circuits in electric panel

12/17/96 SAME AS 9/4/96 CONTRACTOR STATES HE WILL:

(1) DO LOAD CALC
(2) INSTALL PROPER SIZE SERVICE AND EQUIPMENT
(3) MAINTAIN REQUIRED CLEARANCES

12-17-96(1) Same as above

PERMIT UPDATE

Date Update Issued 970121
Control #
Permit # 907663
Date Permit Issued 960822

Brick

IDENTIFICATION Block 838.8 Lot 12
Work Site Location 1676 FORGE POND ROAD BRICK, NJ.
Owner in Fee DAN KELLY
Address SAME
Tele. [redacted]

Contractor KOCH ELECTRICAL CONTRACTING
Address 820 WATERSEDGE DR TOMS RIVER, NJ 08753
Tele. (908) 288-9446
Lic. No. or Bldrs. Reg. No. 12609
Federal Emp. No. _____
or Social Security No. [redacted]

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER _____
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK: INSTALLED HEATING PUMP FOR INDOOR SPA. 120 VOLT 15 AMP 1/5 HP

Estimated Cost of Work $ 125.00

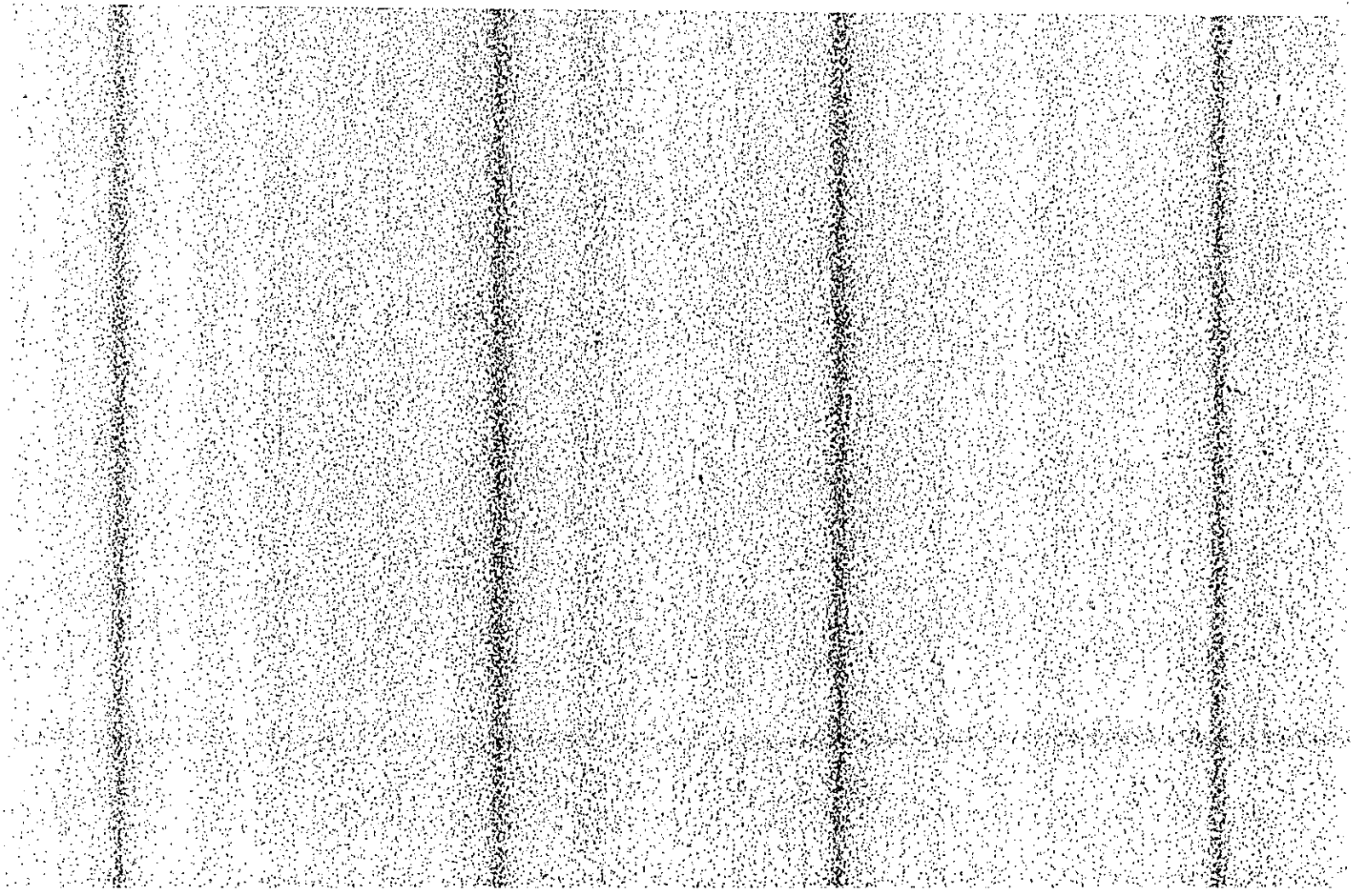
CONSTRUCTION OFFICIAL

PAYMENTS **(Office Use Only)**

Building	
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	N/C
Check No.	
Cash	
Collected By:	

U.C.C. Form F-190B

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY



FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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

Block 838.8 Lot 12 13 14 15
Work Site Location 1676 Forge Pond Road Brick NJ 08724

Owner in Fee Daniel J Kelly
Address 1676 Forge Pond Rd. Brick NJ 08724
Tel [redacted]
Contractor Eric Keller Custom Carpentry
Address PO Box 93 Lavallette NJ 08735
Tele. (908) 681-8137
Lic. No.
Federal Emp. No. or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ [ ] Other

Existing Smoke Detectors 1 Each Bedroom one each Level

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
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.

Daniel J Kelly
SIGNATURE

D. TECHNICAL SITE DATA All Smoke detector existing 1 EN EACH BEDROOM - ONE EACH FLOOR

Description of Work

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

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER		

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-140B
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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

Block 838.8 Lot 12 13 14 15
Work Site Location 1676 Forge Pond Road Lake NJ 08734

Owner in Fee Daniel J Kelly
Address 1676 Forge Pond Rd Lake NJ 08734

Tele. [redacted]
Contractor Eric Keller Custom Cabinetry
Address PO Box 93 Lanoka Hbr NJ 08734

Tele. (908) 608-1617
Lic. No.
Federal Emp. No. or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:

Total Est. Cost of Fire Prot. Work $ [ ] Other

Testing Smoke Detectors on Each Floor Level Testing one smoke detector on each floor

JOB SUMMARY (Office Use Only)

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

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

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
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 All Smoke detectors existing 1 IN EACH BEDROOM - ONE EACH FLOOR.

Description of Work

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

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER		

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-140B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

PLUMBING SUBCODE TECHNICAL SECTION

Date Received 7/3/96
Date Issued
Control #
Permit # 1643-96

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

Block 838-8 Lot 12 13 14 15
Work Site Location 1676 Forge Pond Road
Brick NJ 08724
Owner in Fee Daniel & Geraldine Kelly
Address 1676 Forge Pond Road
Brick NJ 08724
Tele. [redacted]
Contractor Arthur Turkowitz
Address PO Box 519
Lavallette NJ
Tele. (___) 793-3804
Lic. No. 6391
Federal Emp. No. 22 or Social Security No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present R3 Proposed R3
Building Sewer Size 4" EXIST Public Sewer X Private Septic
Water Service Size 1" EXIST Public Water X Private Well
Estimated Cost of Plumbing Work $ 2,000.

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] *No Plans Required*
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 7-3-96
Approved by: DW

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

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
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

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	7
	Urinal/Bidet	
1	Bath Tub	7
1	Lavatory	7
1	Shower	7
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Active Solar System	
1	~~Other~~ Vent	

Administrative Surcharge $ 10
Paid [ ] Check # ____ Minimum Fee $
DCA Training Fee $
Collected by: ____ TOTAL $ 38

1" service required

U.C.C. Form F-1308 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: May 21, 1996 1996 Z 0593

Block 838.08 Lot 12-15 Zone R-10

Property Address: 1676 Forge Pond Road

Owner: Daniel Kelly (Phone [redacted])

Applicant: Same (Phone): Same

Use: Single-family dwelling.

Proposed Construction (if any): 10' by 26', one-story addition, 14' high.

Conditions: Addition must be at least 6' from the side property line and 20' from the rear property line.

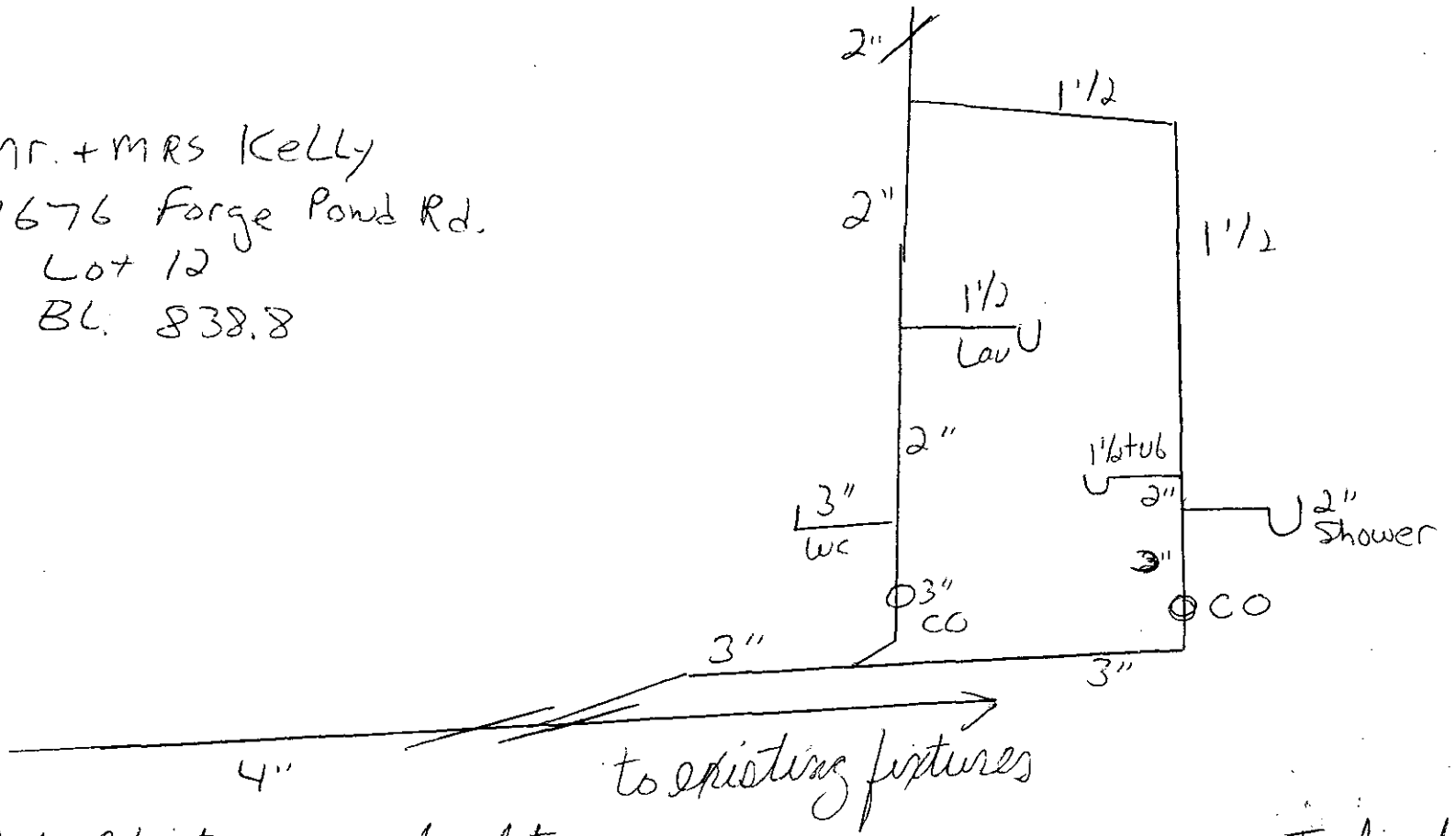
Please note that Building Permits, as well as Zoning Permits, must be obtained prior to any construction.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Administrative Officer

Sean Kinnevy
Zoning Officer

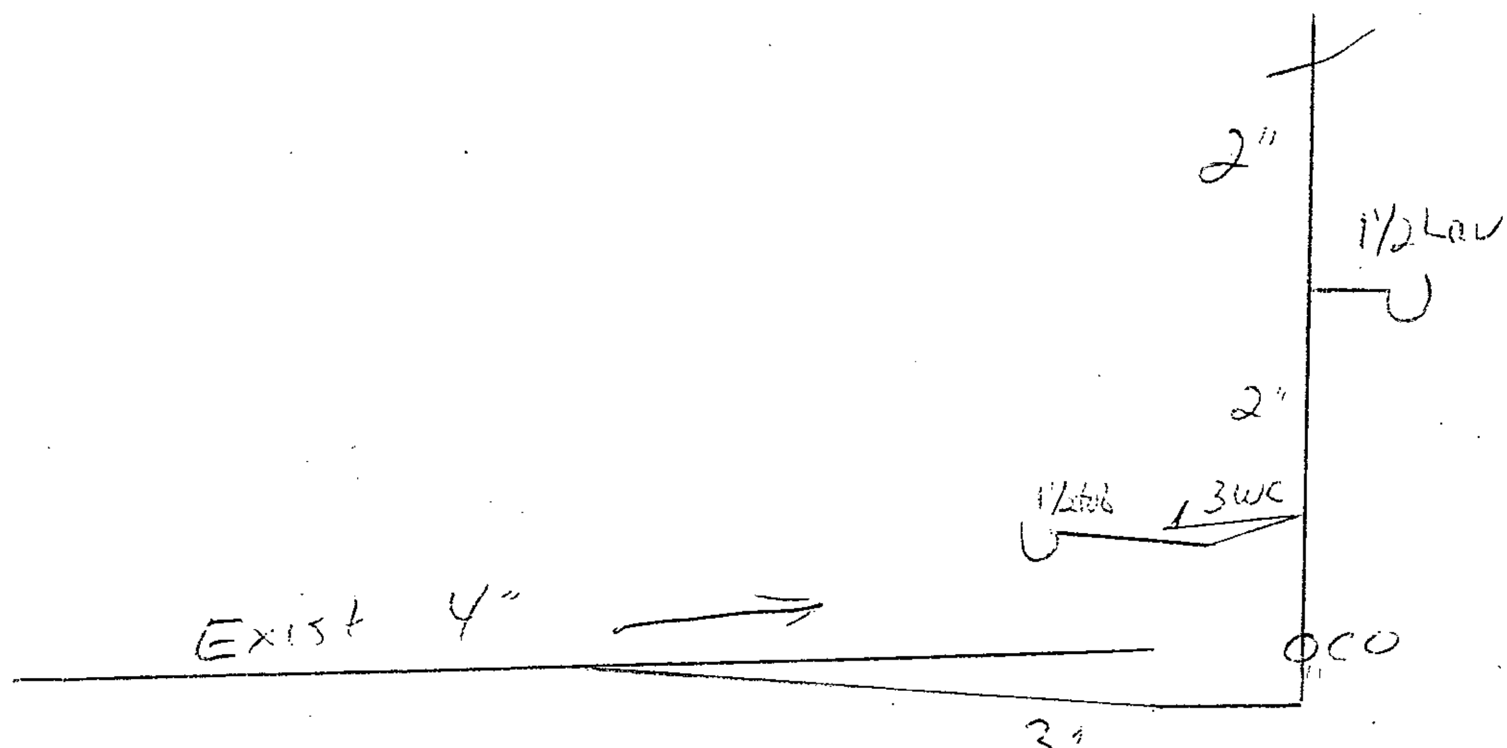
Mr. + Mrs Kelly
1676 Forge Pond Rd.
Lot 12
Bl. 838.8



total fixture count after addition is as follows

2 - toilets
2 - Lavs
2 - Tubs
1 - shower
1 - WM
1 - Kit. Sink

Arthur Turkowsky
6381
7933809



6381
793 3809

****

HEATLOSS vers 3.2 Copyright 1986,1987,1988, Thomas and Associates, Bellaire, Mi
(616) 533-8472

****

ANDY DAWSON
HEATING & AIR CONDITIONING
POINT PLEASANT, NJ 08742
(201) 892-0432

07-03-1996

ERIC KELLER Kelly Residence
FORGE POND 1676 Lot 12 Block 838.8
BRICK, N.J. 08723
Heatloss was computed with a Design Temp. Difference of 70
Heatgain was computed with a Design Temp. Difference of 15 ,with a Dark Roof
CFM for Heatloss is based on a Temp. Rise within the heat exchanger of 60

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

ADDITION DINING Prepared by ANDY DAWSON
ROOM NUMBER 1 CEILING HEIGHT IS 12.00 VOLUME IS 1440.00 CUBIC FEET
2 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>> 70.80 SQUARE FEET
2 EXPOSED WALLS, not including openings,TOTALING >>> 193.20 SQUARE FEET
ROOM SIZE IS 12.00 LONG by 10.00 WIDE, TOTALING >> 120.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS No Attic Space, part of Asphalt Shingled roof
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	1,082	290	BTUH
The Total BTUH for the Exposed Openings are	1,975	942	BTUH
The total BTUH for the ceilings	408	228	BTUH
The total BTUH for the floors	288	0	BTUH
The BTUH infiltration for the openings is	4,073	436	BTUH
DUCT LOSS OR DUCT GAIN for this room is	1,565	189	BTUH
SENSIBLE HEAT GAIN		2,085	BTUH
LATENT GAIN		150	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	9,392	2,235	BTUH
The total CFM of air required for this room is	173.9	76.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

BATH ROOM Prepared by ANDY DAWSON
ROOM NUMBER 2 CEILING HEIGHT IS 12.00 VOLUME IS 1440.00 CUBIC FEET
1 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>> 30.00 SQUARE FEET
2 EXPOSED WALLS, not including openings,TOTALING >>> 234.00 SQUARE FEET
ROOM SIZE IS 12.00 LONG by 10.00 WIDE, TOTALING >> 120.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS No Attic Space, part of Asphalt Shingled roof
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN

Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	1,310	351	BTUH
The Total BTUH for the Exposed Openings are	837	330	BTUH
The total BTUH for the ceilings	408	228	BTUH
The total BTUH for the floors	288	0	BTUH
The BTUH infiltration for the openings is	1,726	185	BTUH
DUCT LOSS OR DUCT GAIN for this room is	914	109	BTUH
SENSIBLE HEAT GAIN		1,202	BTUH
LATENT GAIN		150	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	5,483	1,352	BTUH
The total CFM of air required for this room is	101.5	44.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

MASTER BEDROOM Prepared by ANDY DAWSON
ROOM NUMBER 3 CEILING HEIGHT IS 8.00 VOLUME IS 2304.00 CUBIC FEET
4 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>> 28.00 SQUARE FEET
2 EXPOSED WALLS, not including openings,TOTALING >>> 260.00 SQUARE FEET
ROOM SIZE IS 24.00 LONG by 12.00 WIDE, TOTALING >> 288.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS Conditioned space above
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	1,456	390	BTUH
The Total BTUH for the Exposed Openings are	781	372	BTUH
The total BTUH for the ceilings	0	0	BTUH
The total BTUH for the floors	691	0	BTUH
The BTUH infiltration for the openings is	1,611	173	BTUH
DUCT LOSS OR DUCT GAIN for this room is	908	93	BTUH
SENSIBLE HEAT GAIN		1,027	BTUH
LATENT GAIN		240	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	5,447	1,267	BTUH
The total CFM of air required for this room is	100.9	37.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

LIVING ROOM Prepared by ANDY DAWSON
ROOM NUMBER 4 CEILING HEIGHT IS 8.00 VOLUME IS 2304.00 CUBIC FEET
1 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>> 24.00 SQUARE FEET
1 EXPOSED WALLS, not including openings,TOTALING >>> 72.00 SQUARE FEET
ROOM SIZE IS 24.00 LONG by 12.00 WIDE, TOTALING >> 288.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS Conditioned space above
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

HEATLOSS HEATGAIN

Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	403	108	BTUH

The Total BTUH for the Exposed Openings are	670	288	BTUH
The total BTUH for the ceilings	0	0	BTUH
The total BTUH for the floors	691	0	BTUH
The BTUH infiltration for the openings is	1,381	148	BTUH
DUCT LOSS OR DUCT GAIN for this room is	629	54	BTUH
SENSIBLE HEAT GAIN		597	BTUH
LATENT GAIN		240	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	3,774	837	BTUH
The total CFM of air required for this room is	69.9	21.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

KITCHEN Prepared by ANDY DAWSON

ROOM NUMBER 5 CEILING HEIGHT IS 8.00 VOLUME IS 1320.00 CUBIC FEET
1 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>> 12.00 SQUARE FEET
1 EXPOSED WALLS, not including openings,TOTALING >>> 76.00 SQUARE FEET
ROOM SIZE IS 11.00 LONG by 15.00 WIDE, TOTALING >> 165.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS Conditioned space above
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	426	114	BTUH
The Total BTUH for the Exposed Openings are	335	180	BTUH
The total BTUH for the ceilings	0	0	BTUH
The total BTUH for the floors	396	0	BTUH
The BTUH infiltration for the openings is	690	74	BTUH
DUCT LOSS OR DUCT GAIN for this room is	369	36	BTUH
SENSIBLE HEAT GAIN		403	BTUH
LATENT GAIN		137	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	2,216	540	BTUH
The total CFM of air required for this room is	41.0	14.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

FOYER Prepared by ANDY DAWSON

ROOM NUMBER 6 CEILING HEIGHT IS 8.00 VOLUME IS 864.00 CUBIC FEET
2 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>> 12.00 SQUARE FEET
2 EXPOSED WALLS, not including openings,TOTALING >>> 156.00 SQUARE FEET
ROOM SIZE IS 9.00 LONG by 12.00 WIDE, TOTALING >> 108.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS Conditioned space above
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	874	234	BTUH

The Total BTUH for the Exposed Openings are	335	180	BTUH
The total BTUH for the ceilings	0	0	BTUH

The total BTUH for the floors	259	0	BTUH
The BTUH infiltration for the openings is	690	74	BTUH
DUCT LOSS OR DUCT GAIN for this room is	432	48	BTUH
SENSIBLE HEAT GAIN		535	BTUH
LATENT GAIN		90	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	2,590	625	BTUH
The total CFM of air required for this room is	48.0	19.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

FAMILY ROOM Prepared by ANDY DAWSON
ROOM NUMBER 7 CEILING HEIGHT IS 8.00 VOLUME IS 2304.00 CUBIC FEET
4 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>>> 56.00 SQUARE FEET
2 EXPOSED WALLS, not including openings,TOTALING >>> 232.00 SQUARE FEET
ROOM SIZE IS 24.00 LONG by 12.00 WIDE, TOTALING >> 288.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS Conditioned space above
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	1,299	348	BTUH
The Total BTUH for the Exposed Openings are	1,879	615	BTUH
The total BTUH for the ceilings	0	0	BTUH
The total BTUH for the floors	691	0	BTUH
The BTUH infiltration for the openings is	3,222	345	BTUH
DUCT LOSS OR DUCT GAIN for this room is	1,418	130	BTUH
SENSIBLE HEAT GAIN		1,438	BTUH
LATENT GAIN		240	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	8,509	1,678	BTUH
The total CFM of air required for this room is	157.6	52.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

HALL Prepared by ANDY DAWSON
ROOM NUMBER 8 CEILING HEIGHT IS 8.00 VOLUME IS 448.00 CUBIC FEET
0 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>>> 0.00 SQUARE FEET
1 EXPOSED WALLS, not including openings,TOTALING >>> 160.00 SQUARE FEET
ROOM SIZE IS 20.00 LONG by 2.80 WIDE, TOTALING >> 56.00 SQUARE FEET
WINDOW TYPE IS: No openings in this room
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS Conditioned space above
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	896	240	BTUH
The Total BTUH for the Exposed Openings are	0	0	BTUH
The total BTUH for the ceilings	0	0	BTUH

The total BTUH for the floors	134	0	BTUH
The BTUH infiltration for the openings is	0	0	BTUH

DUCT LOSS OR DUCT GAIN for this room is	206	24	BTUH
SENSIBLE HEAT GAIN		264	BTUH
LATENT GAIN		46	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	1,236	310	BTUH
The total CFM of air required for this room is	22.9	9.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

BATH #2 Prepared by ANDY DAWSON
ROOM NUMBER 9 CEILING HEIGHT IS 8.00 VOLUME IS 400.00 CUBIC FEET
1 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>> 6.00 SQUARE FEET
2 EXPOSED WALLS, not including openings,TOTALING >>> 114.00 SQUARE FEET
ROOM SIZE IS 10.00 LONG by 5.00 WIDE, TOTALING >> 50.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS Conditioned space above
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	638	171	BTUH
The Total BTUH for the Exposed Openings are	167	90	BTUH
The total BTUH for the ceilings	0	0	BTUH
The total BTUH for the floors	120	0	BTUH
The BTUH infiltration for the openings is	345	37	BTUH
DUCT LOSS OR DUCT GAIN for this room is	254	29	BTUH
SENSIBLE HEAT GAIN		326	BTUH
LATENT GAIN		41	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	1,525	367	BTUH
The total CFM of air required for this room is	28.2	11.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

OFFICE Prepared by ANDY DAWSON
ROOM NUMBER 10 CEILING HEIGHT IS 8.00 VOLUME IS 1152.00 CUBIC FEET
3 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>> 18.00 SQUARE FEET
3 EXPOSED WALLS, not including openings,TOTALING >>> 310.00 SQUARE FEET
ROOM SIZE IS 16.00 LONG by 9.00 WIDE, TOTALING >> 144.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS Conditioned space above
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	1,736	465	BTUH
The Total BTUH for the Exposed Openings are	502	228	BTUH
The total BTUH for the ceilings	0	0	BTUH
The total BTUH for the floors	346	0	BTUH
The BTUH infiltration for the openings is	1,036	111	BTUH

LATENT GAIN		120	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	4,343	1,003	BTUH
The total CFM of air required for this room is	80.4	32.0	CFM

ESTIMATED HEAT LOSS CALCULATION FOR RESIDENTIAL BUILDINGS (C) 1986,1987,1988 TA

BEDROOM #2 Prepared by ANDY DAWSON
ROOM NUMBER 11 CEILING HEIGHT IS 8.00 VOLUME IS 1056.00 CUBIC FEET
2 EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>> 12.00 SQUARE FEET
3 EXPOSED WALLS, not including openings,TOTALING >>> 268.00 SQUARE FEET
ROOM SIZE IS 12.00 LONG by 11.00 WIDE, TOTALING >> 132.00 SQUARE FEET
WINDOW TYPE IS: Double Pane, Low e Coating, Clear Glass
WALL CONSTRUCTION IS: Frame Insulated
CEILING TYPE IS Conditioned space above
FLOOR TYPE IS Wood, over Enclosed, Unconditioned space

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances etc.		0	BTUH
The Total BTUH for the outside walls are	1,501	402	BTUH
The Total BTUH for the Exposed Openings are	335	156	BTUH
The total BTUH for the ceilings	0	0	BTUH
The total BTUH for the floors	317	0	BTUH
The BTUH infiltration for the openings is	690	74	BTUH
DUCT LOSS OR DUCT GAIN for this room is	569	63	BTUH
SENSIBLE HEAT GAIN		694	BTUH
LATENT GAIN		110	BTUH
THE TOTAL BTUH FOR THIS ROOM IS	3,411	804	BTUH
The total CFM of air required for this room is	63.2	25.0	CFM

T O T A L S F O R L I V I N G A R E A

VOLUME IS	15032	CUBIC FEET	
EXPOSED OPENINGS,TOTALING >>>>>>>>>>>>>>>>>>>>>>>>>>>	269	SQUARE FEET	
EXPOSED WALLS, not including openings,TOTALING >>>>>>	2075	SQUARE FEET	
TOTAL SQUARE FOOTAGE OF HOME	1759	SQUARE FEET	

Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
Additional BTUH for People, Appliances ect.		0	BTUH
The Total BTUH for the outside walls are	11,621	3,113	BTUH
The Total BTUH for the Exposed Openings are	7,816	3,381	BTUH
The total BTUH for the ceilings	816	456	BTUH
The total BTUH for the floors	4,222	0	BTUH
The BTUH infiltration for the openings is	15,464	1,657	BTUH
DUCT LOSS OR DUCT GAIN for this area is	7,988	855	BTUH
SENSIBLE HEAT GAIN		9,454	BTUH
LATENT GAIN		1,564	BTUH
THE TOTAL BTUH FOR THIS AREA IS	47,926	11,018	BTUH
The total CFM of air required for this area is	887.5	340.0	CFM

End of report

ANDY DAWSON
HEATING & AIR CONDITIONING
POINT PLEASANT, NJ 08742
(201) 892-0432

07-03-1996

ERIC KELLER
FORGE POND
BRICK, N.J. 08723

Heatloss was computed with a Design Temp. Difference of 70
Heatgain was computed with a Design Temp. Difference of 15 ,with a Dark Roof
CFM for Heatloss is based on a Temp. Rise within the heat exchanger of 60

ADDITION DINING Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	9,392	2,235	BTUH
The total CFM of air required for this room is	173.9	76.0	CFM

BATH ROOM Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	5,483	1,352	BTUH
The total CFM of air required for this room is	101.5	44.0	CFM

MASTER BEDROOM Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	5,447	1,267	BTUH
The total CFM of air required for this room is	100.9	37.0	CFM

LIVING ROOM Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	3,774	837	BTUH
The total CFM of air required for this room is	69.9	21.0	CFM

KITCHEN Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	2,216	540	BTUH
The total CFM of air required for this room is	41.0	14.0	CFM

FOYER Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	2,590	625	BTUH
The total CFM of air required for this room is	48.0	19.0	CFM

FAMILY ROOM Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	8,509	1,678	BTUH
The total CFM of air required for this room is	157.6	52.0	CFM

HALL Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	1,236	310	BTUH
The total CFM of air required for this room is	22.9	9.0	CFM

BATH #2 Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	1,525	367	BTUH
The total CFM of air required for this room is	28.2	11.0	CFM

OFFICE Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	4,343	1,003	BTUH
The total CFM of air required for this room is	80.4	32.0	CFM

BEDROOM #2 Prepared by ANDY DAWSON

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS ROOM IS	3,411	804	BTUH
The total CFM of air required for this room is	63.2	25.0	CFM

T O T A L S F O R L I V I N G A R E A

	HEATLOSS	HEATGAIN	
THE TOTAL BTUH FOR THIS AREA IS	47,926	11,018	BTUH
The total CFM of air required for this area is	887.5	340.0	CFM

End of report

BOCA®
PLAN REVIEW RECORD

Valuation: _____

Fee: _____

Plan Review # _____

Date _____

NATIONAL BUILDING CODE
(All Articles except 24, 28, 29, 30, 31 and 32)

JURISDICTION Brighton
(City, County, Township, etc.)

BUILDING LOCATION 1676 Forge Pond.
(Street address)

BUILDING DESCRIPTION J. Kelly.

REVIEWED BY _____

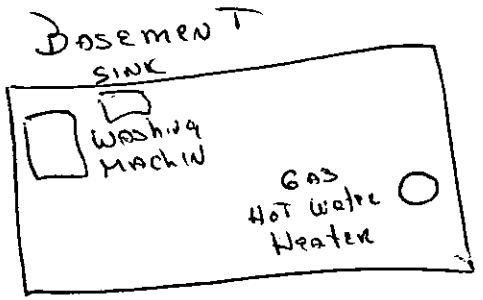
Numerals indicated in parenthesis are applicable code sections of the *1987 BOCA National Building Code.*

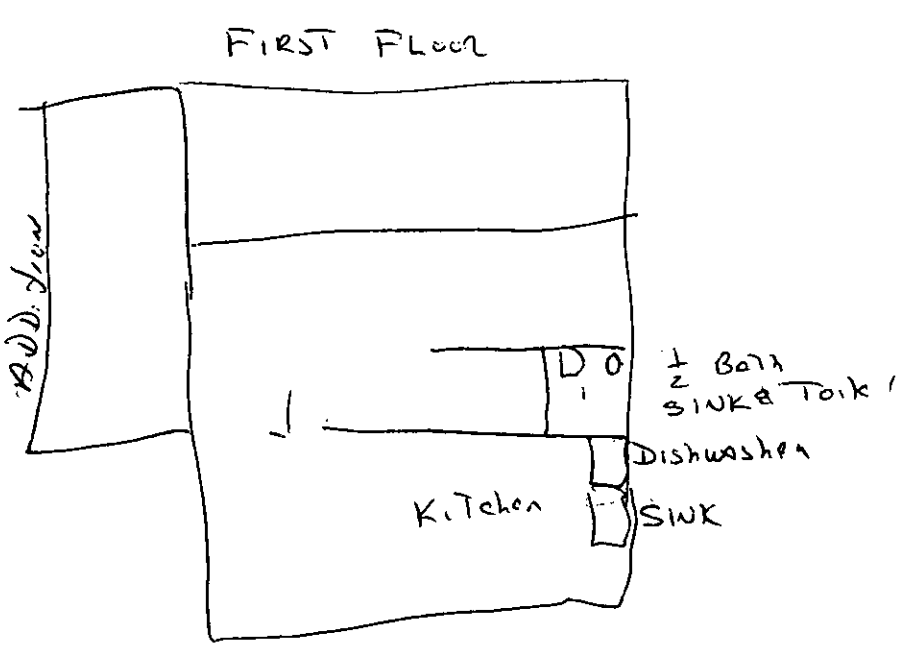
CORRECTION LIST

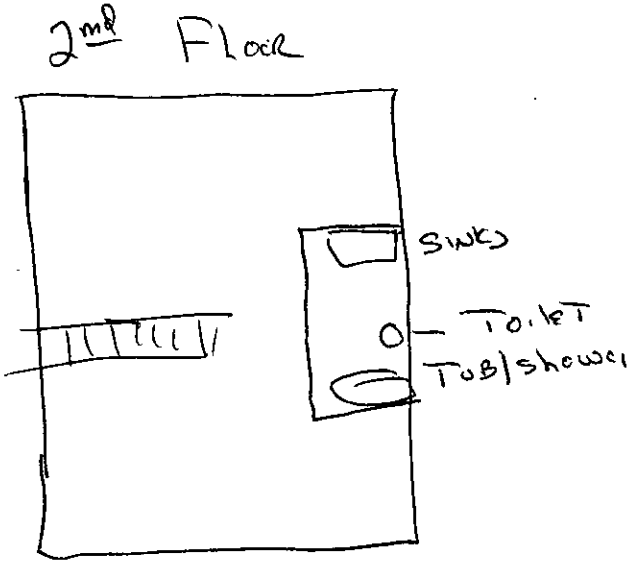
No.	DESCRIPTION	Code Section
	MUST Refer out Tech Coord SD. & appl.	
	Refer Tech Coord.	

The plan review accomplished as indicated in this record is limited to those code sections specifically identified herein. NOTE: In order that we might develop other programs and provide additional services of benefit to the Code Administration profession, please re-order additional copies of this form from:

BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.
4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60477-5795


Basement
SINK
Washing Machin
GAS
Hot Water
Heater


First Floor
Add. Room
½ Bath
SINK & Toilet
Dishwasher
Kitchen
SINK


2nd Floor
SINK
Toilet
Tub/shower

SIZING FOR WATER AND SEWER SERVICES

Property Owner Kelly Date 7-3-96

Property Address 1676 Forge Pond Rd Block 838.8 Lot 12-15

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	( ) 6	( )
2. Lavatory	2	( ) 2	( )
3. Bath Tub	2	( ) 4	( )
4. Shower Stall	1	( ) 2	( )
5. Kitchen Sink	1	( ) 2	( )
6. Service Sink		( )	( )
7. Laundry Tray		( )	( )
8. Dishwasher	1	( ) 1	( )
9. Washing Machine	1	( ) 3	( )
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 20

Gallons per minute 14

Size of Service 1"

Date: 7-3-96 Approved: _____

Brick Township Plumbing Inspector

TOWNSHIP OF BRICK

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

Department of Engineering

Municipal Engineer
(908) 262-1038
Fax (908) 920-4850

DATE: _____

Municipal Engineer
401 Chambers Bridge Road
Brick NJ 08723

RE: Block: 838-8 Lot: 12 13 14 15

Dear Sir;

I, Daniel J Kelly (Name) of 1676 Forge Pond Rd Brick NJ 08724 (Address) request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book, Chapter 190.31, part B. The property (please circle one) is / is not located in a flood zone.

Respectfully yours

_____ 908-458-7208
Applicant's signature Phone #

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.
2. Proof that the property is not located in a Flood Hazard Area.

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

OFFICE USE

Approved DATE: _____ BY: _____

Rejected DATE: _____ BY: _____

REMARKS: _____

190-31. Plot plan (Added 12-28-80 by Ord. No. 354-2P-80; amended 6-12-84 by Ord. NO. 354-2XXX-84)

A. Except where approval has been obtained after application under Part 3 or 4 of this chapter, no principal building or addition to a principal building shall be constructed in the Township of Brick except after approval by the Township Engineer of a plot plan to be submitted in accordance with the following specifications.

(1) Such plot plan shall be a survey of the lot in question showing the existing topography of the lot and the proposed location and elevation of the building and/or addition and the proposed grading. Existing topography and proposed grading shall at a minimum, consist of elevations at the property corners and the corners of the proposed building and/or addition. In the event that there is more than a two-foot difference in lot elevations, contours at one-foot intervals shall be shown. The existing topography of the lots immediately adjacent to the lot in question and the road fronting such lot shall also be indicated on the plot plan.

(2) Such plot plan shall include the following additional information:

(a) The width and type of pavement on the road in front of the proposed building and/or addition.
(b) The proposed method of drainage from the property in question.
(c) The proposed garage and first floor elevations.

(3) Plot plans must be prepared by a licensed engineer or land surveyor and shall bear his signature and seal. Surveys and topographical information certified to National Geodetic Vertical Datum must be prepared by a licensed land surveyor and shall bear his signature and seal.

(4) Building or additions in a flood hazard area shall be in compliance with the National Flood Insurance Program (NFIP) as regulated by Federal Emergency Management Agency (FEMA).

B. Exemption from the plot plan requirement for an addition is subject to the approval of the Township Engineer, said exemption to be contingent upon:

(1) Proof that the subject addition is not in a flood hazard area.

(2) A survey locating the existing dwelling.

(3) a site inspection by a Brick Township Engineering Inspector to verify that the proposed addition will not create a drainage problem.

C. Petitions for plot plan exemptions are to be made to the Township Engineer in writing.

Central Jersey ♣ Express
1676 Forge Pond Road
Brick, New Jersey 08724
908-840-2301

MAY 31, 1996

TOWNSHIP OF BRICK
PLUMBING INSPECTOR DEPT.
401 CHAMBERS BRIDGE RD.
BRICK , N.J. 08723
ATTN: DAN NEWMAN

DAN ,

AS A FOLLOW UP TO OUR CONVERSATION REGARDING MY PERMIT FOR THE ADDITION I AM PUTTING ON A 1676 FORGE POND RD.BRICK N.J. 08724.

I CALLED MY SUB WITH THE QUESTIONS YOU RAISED TO ME ON THE PHONE BUT UNFORTUNATLY HE IS ON VACATION RIGHT NOW.I HAVE INFORMED HIM THRU LETTER OF YOUR QUESTIONS BUT WILL TRY TO PROVIDE YOU WITH SOME OF THE INFORMATION YOU REQUESTED MYSELF

LOOKING A THE BLUE PRINTS I PROVIDED WITH THE PERMIT REQUEST THE STALL SHOWER IS SHOWN ON THOSE PLANS..

AS TO EXISTING FIXTURE THAT USE WATER, THEY ARE:

BASEMENT: HOT WATER HEATER(Gas) , WASHING MACHINE

FIRST FLOOR: ½BATH W/SINK & TOILET, DISH WASHER, KITCHEN SINK

SECOND FLOOR: FULL BATH SINK TOILET BATHTUB/SHOWER

HEATINGPLAN: PLAN TO USE THE EXISTING HEATING SYSTEM(GAS FORCED WARM AIR) RUN DUCK WORK OFF EXISTING UNIT TO THE ADDITION. EXISTING DUCKWORK IS A THE BACK OF THE HOUSE WHERE THE ADDITION IS PLANNNED.

I HOPE THIS INFORMATION IS USEFUL IN PREPARING THE PERMIT.

YOURS TRULY

DAN KELLY
908 458 7208

Applicable to Ordinance 728-92
This form must be handed in with permit application or a permit will not be issued.

TOWNSHIP OF BRICK

1676 Forge Pond Road 838-8 12 13 14 15
Work Site Address Block Lot

Daniel J & Geraldine Kelly
Owner's Name, Address, Phone

Eric Keller Custom Carpentry
Contractor's Name, Address, Phone

Construction 10' x 26' Addition onto Rear of Existing Home
Describe type (Single -family home, etc.)

Demolition
Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material

Name, address and phone of party responsible for removal of debris:
Denise Rosetto H&D Construction Cleanup

Size of dumpster:

Destination of discarded debris:

Hauler's DEP Permit No.:

**Note: Any recyclable material, including, but not limited to: corrugated cardboard, vegetative waste, concrete, asphalt, clean wood, etc., must be delivered to an approved recycling center, and receipts provided to the Township of Brick along with tipping receipts for non-recyclable material.

Generator's Certification: Under penalty of criminal and civil prosecution, for the making or submissin 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 or recycled in accordance with all applicable State and Federal laws and regulations, and that I have been authorized, in writing, to make such declarations by the person in charge of the generator's operation.

Daniel J Kelly Daniel J Kelly 5/14/96
Printed/Typed Name Signature Date

****

FOR OFFICE USE ONLY

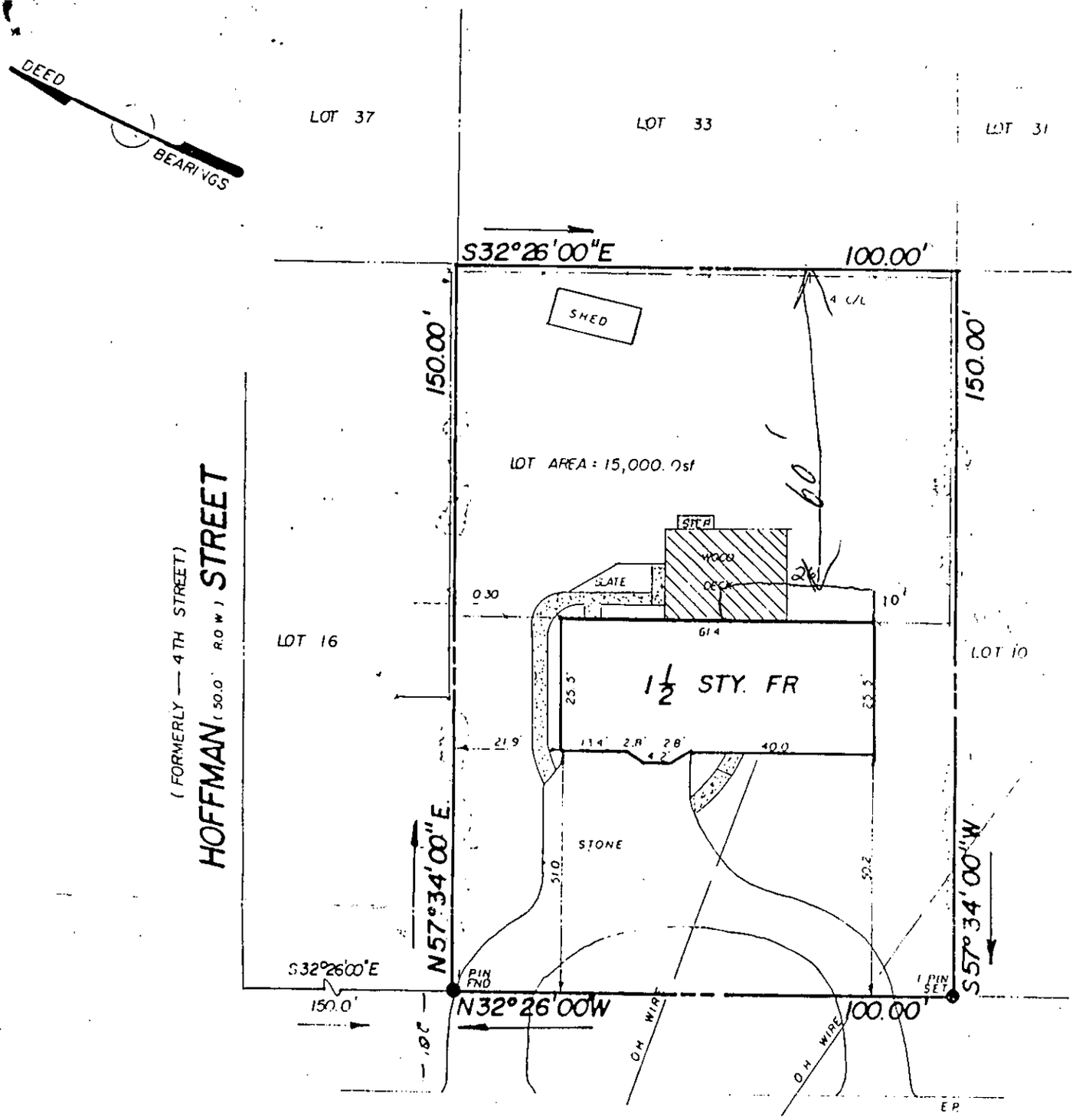
MUST BE COMPLETED BEFORE CERTIFICATE OF OCCUPANCY OR CERTIFICATION OF APPROVAL IS ISSUED.

Recycling tonnage receipts attached?

Certified tipping receipts attached?

**Note: Receipts must show certified weights, date of disposal and name and address of disposal center.

DISTRIBUTION LIST:
1. Original to Code Enforcement Officer



MAP of SURVEY

TAX LOT 12 TAX BLOCK 838.8

BRICK (TAX MAP SHEET No. 45B) TOWNSHIP

COUNTY of OCEAN, NEW JERSEY

LEONARD J. HENKEL, P.E.
Consulting Engineer

CERTIFICATION

TO Daniel J. & Geraldine Kelly, h/w
Commonwealth Land Title Insurance Co.
Sinn, Fitzsimmons, Cantoli, West & Pardes
Penn Federal Savings Bank
its successors and/or its assigns