



UNIFORM CONSTRUCTION CODE

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

C-13-003428

1. Proposed Work Site at: 1669 Forge pond rd

2. Name of Owner in Fee: Alan Stone

Tel. [REDACTED] e-mail _____

Address 1669 Forge pond rd
street municipality zip code

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: Pizzo contracting Tel. (732) 505-1749

Address 1579 Rt 9 e-mail _____
Toms River, NJ 08755

License No. OR, if new home, Builder Reg. No. 13VH04391000 Exp. Date 12/13

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

Federal Emp. ID No. 20-891-9157 FAX: (_____) _____

5. Architect or Engineer _____ Contact _____

Address _____ e-mail _____

Tel. (_____) _____ FAX: (_____) _____

6. Responsible Person in Charge once Work has Begun _____ ✓

Tel. (_____) _____ FAX: (_____) _____

1. Building	\$ 15	
2. Electrical		
3. Plumbing		
4. Fire Protection		
5. Elevator Devices		
6. Subtotal		
7. Less 20% for State Plan Review	\$	
8. Subtotal	\$ 3	
9. State Permit Surcharge Fee		
10. Subtotal	\$	
11. Cert. of Occupancy		
12. Other		
13. TOTAL	\$ 78	

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 _____

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

(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 Rejection
	JB	6/10/13		6/24/13	NEA	
	Eno	Ex. 05m. 06		6/19/13	ERC	

TOTAL COST

DO YOU WANT:

1. ☐ Partial Releases
2. ☐ Prototype Processing

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks	4. ☐ Refrigeration Systems	8. ☐ Smoke Control Systems in Open Wells	12. ☐ Fire Alarm
2. ☐ High Pressure Boilers	5. ☐ Cross-Connections/Backflow Preventers	9. ☐ Underground Storage Tanks	
3. ☐ Pressure Vessels	6. ☐ Hazardous Uses/Places of Assembly	10. ☐ Swimming Pools, Spas and Hot Tubs	
	7. ☐ Sprinklers/Standpipes	11. ☐ LPGas Tanks	

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 _____



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 7/24/2013
Control Number C-13-003428
Permit Number 13-2663
Permit Issue Date 6/24/2013
Certificate Number 13-2663

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1669 FORGE POND RD Brick Township, NJ Block: 839 Lot: 17 Qual: _____
Owner in Fee: STONE, ALAN & BONNIE G
Owner Address: 1669 FORGE POND RD BRICK NJ 08724
Telephone: [REDACTED]
Contractor PIZZO CONTRACTING INC.
Address 1579 ROUTE 9 TOMS RIVER NJ 08755
Telephone: (732) 505-1749 Fax: (732) 505-1552
License Number or Builders Registration Number: 13VH04391000 Federal Emp. Number: 20-8919157

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: FENCE UCC

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: _____



CONSTRUCTION PERMIT

Date Issued 6/24/13
Control # C-13-003428
Permit # 13-3663

IDENTIFICATION Block: 839 Lot: 17 Qualifier _____
Work Site Location: 1669 FORGE POND RD Brick Township, NJ Contractor PIZZO CONTRACTING INC.
Owner in Fee STONE, ALAN & BONNIE G Address 1579 ROUTE 9 TOMS RIVER NJ 08755
1669 FORGE POND RD BRICK NJ 08724 Telephone: (732) 505-1749
Telephone: _____ Lic. No. or Bldrs. Reg. No. 13VH04391000
Federal Employee No. 20-8919157

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:

FENCE UCC

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

Estimated Cost of Work \$1,000

Daniel Newman Jr
Construction Official

Date 6/24/13

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$75
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$3
CO Fee	
Other	\$0
Total	\$78
Check No.	<u>4055</u>
Cash	\$0
Credit	\$0
Collected By	

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.

- ☒ 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.



BUILDING SUBCODE TECHNICAL SECTION



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

Block 839 Lot 17 Qualification Code _____

Work Site Location 1669 Forces Pom Road

Owner in Charge BRUCE N S 08724

Tel. ALA-1-6-8-4-4-3

e-mail _____

Address 1669 Forces Pom Road Zip code 08724

Contractor CAULS FENCING Tel. (732) 505-1749

Address 1579 RT 9 TOMS RIVER NJ 08755 e-mail cauls@cauls.com

Contractor License No. or Builder Registration No. ATHC-13VH04341000 Exp. Date 12/13

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

Federal Emp. ID No. _____ FAX: () _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW ☒ No Plans Required 06/21/13 Initial W Type: _____

☐ All _____ Inspections _____

☐ Footings/Foundations _____ Failure _____

☐ Structural/Framework _____ Failure _____

☐ Exterior _____ Failure _____

☐ Interior _____ Failure _____

Joint Plan Review Required: _____

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator _____

SUBCODE APPROVAL for PERMIT 06/21/13 _____

Date: _____

Approved by: W _____

SUBCODE APPROVAL for CERTIFICATE _____

☐ CO ☐ CCO W _____

Date: 07/24/13 _____

Approved by: W _____

Barrier-Free _____

Use Group Present _____ Proposed _____

No. of Stories _____

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 _____

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.

Sign here: Alan C. Stone

Print name here: ALAN C STONE

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

REMOVE OLD FENCES & TAKE AWAY AND

REPLACE WITH NEW FENCE.

14 4X4 POLES

14 6X8 WICKER SQUARE STAKES

6X6 AVEL & NEW DIED

4ft wide gate UCC FENCE

25X5 DOGS FOR GATE POSTS

NEW HANDMADE STAP LINGERS & LATCHES/SPRING

TYPE OF WORK: BARRIER FREE FEE (Office Use Only) _____

☐ New Building ATTACHED TO _____

☐ Addition OWNER (GOLD) _____

☐ Rehabilitation COPY _____

☐ Roofing _____

☐ Siding _____

☒ Fence 6" 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 _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

U.C.C. F110

(rev. 11/09)

1 White = Inspector Copy

3 Pink = Office Copy

2 Canary = Office Copy

4 Gold = Applicant Copy

Date Received

6/24/13

Control #

Date Issued

13-2663

Permit #

RECEIVING CLERK JD
DATE REC'D 6/17/13

ZONING PERMIT APPLICATION

PERMIT # 20-13-00038
DATE ISSUED 6/24/13

BLOCK: 839 LOT: 17 QUALIFIER: — SITE ADDRESS: 1669 Forest Pond Rd Brick NJ

IDENTIFICATION:

1. NAME OF OWNER IN FEE: ALAN C. STONE
COMPLETE ADDRESS: 1669 Forest Pond Rd Brick NJ 08724
PHONE # — MAIL: —

2. NAME OF APPLICANT: ALAN C. STONE
APPLICANT ADDRESS: 1669 Forest Pond Rd
Brick NJ 08724
PHONE # 232-285-0153 EMAIL: —

3. RESPONSIBLE PERSON FOR WORK: CAROL'S FENCING
PHONE # 232-505-1749 FAX # 232-505-1552

4. SIGNATURE OF APPLICANT: Alan C Stone

FEE SUMMARY: FOR OFFICE USE ONLY

APPLICATION FEE: \$ 30.00
OTHER: \$ —
TOTAL: \$ —

REQUIRED BY APPLICANT

RESIDENTIAL: ✓
COMMERCIAL: —
EXISTING USE: SFD
PROPOSED USE: SFD

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

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: — *ADDITION — *ALTERATION — *PORCH — *DECK —

POOL: ABOVE GROUND — IN GROUND ✓ FENCE: HEIGHT 6" TYPE STACKED MATERIAL WOOD
HEIGHT: 6 ft (*IF APPLICABLE)

OTHER 14 8x8 space sections 22.5x5 Posts 4ft wide 6ft high with 1/2" wire, 5 posts

DESCRIPTION: 14 sections 6" high nailed space stackers w/ new plain PT post

ZONING REVIEW: 6/17/13 DATE REVIEWED: — DATE DENIED: — DATE APPROVED: 6/17/13 INTLS: SCZ (SEE BACK PAGE)

[illegible]

DATE REVIEWED: 6/17/13 DATE DENIED: — DATE APPROVED: 6/17/13 INTLS: 5628

[illegible]



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued:

6/24/13

Application Number:

ZA-13-00757

Application Date:

06/17/2013

Project Number:

Permit Number:

2 P-13-00638

Fee:

\$30

Zoning Permit

Worksite: **1669 FORGE POND RD**
Location: **Brick Township, NJ**

Block: **839**

Lot: **17**

Qualifier:

Zone: **R-10**

Owner: **STONE, ALAN & BONNIE G**
Address: **1669 FORGE POND RD**
BRICK, NJ 08724

Applicant: **STONE, ALAN & BONNIE G**
Address: **1669 FORGE POND RD**
BRICK, NJ 08724

Application Approved Date: 06/17/2013

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:

Fence - 14 6X8 wood stockade sections replacing same size and location.

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

Sam Kinney
Office of Zoning

06/17/2013

Date

Michael P. Fowler
Township Planner

6/19/13
Date

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

Pizzo Contracting Inc./A Carl's Fencing Decking & Extensions
William Rankin
1579 Rt 9
Toms River NJ 08755

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

Pizzo Contracting Inc./A Carl's Fencing Decking & Extensions
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

11/27/2012 TO 12/31/2013

VALID

SIGNATURE

13VH04391000

License/Registration/Certificate #

ACTING DIRECTOR

PLEASE DETACH HERE
IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:

Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

PLEASE DETACH HERE

11/27/2012 TO 12/31/2013
VALID

13VH04391000
LICENSE/REGISTRATION/CERTIFICATION #

William Rankin
Signature of Licensee/Registrant/Certificate Holder

E. Ky
ACTING DIRECTOR

HOMEOWNER'S POOL CERTIFICATION

FENCE REQUIREMENTS:

Outdoor private swimming pool: An outdoor private swimming pool, includes an in-ground, above-ground or on-ground pool, hot tub or spa shall comply with the following.

1. The top of the barrier shall be at least 48 inches above finished ground level measured on the side of the barrier which faces away from the swimming pool. The maximum vertical clearance between finished ground level and the barrier shall be 2 inches measured on the side of the barrier which faces away from the swimming pool. Where the top of the pool structure is above finished ground level, such as an above-ground pool, the barrier shall be at finished ground level, such as the pool structure, or shall be mounted on top of the pool structure. Where the barrier is mounted on the pool structure, the opening between the top surface of the pool frame and the bottom of the barrier shall not allow passage of a 4 inch diameter sphere.
2. Openings in the barrier shall not allow passage of a 4 inch diameter sphere.
3. Solid barriers shall not contain indentations or protrusions except for normal construction tolerances and tooled masonry joints.
4. Where the barrier is composed of horizontal and vertical members and the distance between the tops of the horizontal members is less than 45 inches, the horizontal members shall be located on the swimming pool side of the fence. Spacing between vertical members shall not exceed 1 1/4 inches in width. Decorative cutouts shall not exceed 1 1/4 inches in width.
5. Where the barrier is composed of horizontal and vertical members and the distance between the tops of the horizontal members is 45 inches or more, spacing between vertical members shall not exceed 4 inches. Decorative cutouts shall not exceed 1 1/4 inches in width.
6. Maximum mesh size for chain link fences shall be a 1 1/4 inch square unless the fence is provided with slats fastened at the top or the bottom which reduce the openings to not more than 1 1/4 inches.
7. Where the barrier is composed of diagonal members, such as a lattice fence, the maximum opening formed by the diagonal members shall be not more than 1 1/4 inches.
8. Access gates shall comply with the requirements of items 1 through 7, and shall be equipped to accommodate a locking device. Pedestrian access gates shall open outwards away from the pool and shall be self-closing and have a self-latching device. Gates other than pedestrian access gates shall have a self-latching device. Where the release mechanism of the self-latching device is located less than 54 inches from the bottom of the gate: (a) the release mechanism shall be located on the pool side of the gate at least 3 inches below the top of the gate and; (b) the gate and barrier shall not have an opening greater than 1/2 inch within 18 inches of the release mechanism.

BLOCK: 839 LOT: 17 ADDRESS: 1669 Forge Pond Rd Belvidere NJ

In accordance with the NJAC 5:23-2.23, no pool shall be used in whole or in part until a Certificate of Approval has been issued by the Construction Official.

I certify that I am the owner of the above referenced pool being built. I further certify that the pool will not be used in whole or in part until a permanent fence is installed and a Certificate of Approval has been issued by the Construction Official.

I have read the fence requirements listed above and understand them.

Alan C Stone / Alan C Stone
Owner's Signature

ALAN C. STONE / ALAN C. STONE
Print Name

Sworn and subscribed to before me on this 10th day of June 20 13

[Signature]
Notary Signature



Barrier Exceptions: Spas or hot tubs with a safety cover which complies with ASTM F 1346, as listed in Section AG107, shall be exempt from the provisions of this appendix.

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____
PERMIT #: _____

BLOCK: 839 LOT: 17 ADDRESS: 1669 Forests Row Rd Side NJ 08724

IDENTIFICATION:

1. WORK SITE ADDRESS: 1669 Forests Row Rd Side NJ 08724

2. NAME OF OWNER IN FEE: ALAN C. STONE

ADDRESS: 1669 Forests Row Rd Side NJ 08724 PHONE #:

FAX #: ()

3. PRINCIPAL CONTRACTOR: CARLIS PENSING

ADDRESS: 1579 Oak Brook Drive PHONE #: (832) 505-1552

FAX #: (832) 505-1552

4. ARCHITECT OR ENGINEER: _____

ADDRESS: _____ PHONE: # ()

5. RESPONSIBLE PERSON FOR WORK: _____

ADDRESS: _____

PHONE #: () FAX #: () E-MAIL: _____

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL

☒ OTHER NEW STAKEOUT SITES FENCE 6X8 (SECTIONS)

LENGTH: 112 ft WIDTH: 8 ft HEIGHT: 6 ft

ENGINEERING REVIEW: _____

DATE RECEIVED: _____

DATE REJECTED: _____

DATE APPROVED: _____

INITIALS: _____

FEE SUMMARY:

APPLICATION FEE: \$ _____

REVIEW FEE: \$ _____

INSPECTION FEE: \$ _____

OTHER: \$ _____

BOND(S): \$ _____

TOTAL: \$ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

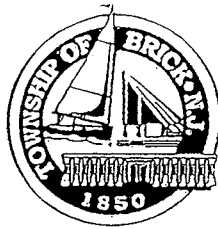
APPROVED DATE: _____

TOWNSHIP OF BRICK

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

Stephen C. Acropolis, Mayor

Department of Community Development & Land Use



Township Council:

Bob Moore – President
Susan Lydecker – Vice President
Domenick Brando
John Ducey
Jim Fozman
Joseph Sangiovanni
Dan Toth

Juan Carlos Bellu
Director

732-262-1027

Fax: 732-262-2941
www.twp.brick.nj.us

Date: _____

ENGINEERING PLOT PLAN EXEMPT FORM

Block: 839 Lot: 17

Property Address: 1669 Forge Pond Rd Brick NJ 08724

I, ALAN C. STONE of 1669 Forge Pond Rd Brick NJ
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

Alan C Stone
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.
2. Proof that the property is not located in a Flood Hazard Area.

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

FOR OFFICE USE ONLY

Approved on: _____ Signed: _____

Rejected on: _____ Signed: _____

Comments:



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(f)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. ☐ 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 Alan C. Stone

Date 06-10-13

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.