BLOCK 835 LOT 21,22,24 QUALIFICATION CODE C29-22 ADDRESS (SITE) 1677 1674 Lauretton St PERMIT NO. 98-3473

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Propsed Work Site at: 1674 Lauretton St.
2. Name of Owner in Fee: Frank J Edelins Tel. ([redacted]
   Address 1308 Cedar Ave (street) Brick (municipality) (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: F. David Edelins, Inc Tel. ( ) 223-6464
   Address 142 Atlantic Ave., Manasquan
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: ( ) _____
5. *Architect or Engineer* _____ Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work _____
   Tel. ( ) _____ FAX ( ) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 50		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee			
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 50.		

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

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

Demolish Dwelling

II. PROPOSED WORK

	Est. Cost	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
1. ☐ Minor Work									
2. ☐ New Building		LAP	9/28/98		9-30-98	FM			
3. ☐ Addition									
4. ☐ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ *Demolition*									
TOTAL COSTS	9500.-								

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 10103491

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

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

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature _____ Date _____

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

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

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

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

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

( ) Check if contractor.

Agent Name F. David Eddins, Inc.
Address 142 Atlantic Ave.
(Manasquan
Telephone (732) 223-6464
Signature D. Eddins

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

OFFICE DATE RECEIVED: _____

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

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

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

X. CERTIFICATES ISSUED (office use only)

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

10/06/98 NO. 5
0002
983473*#
BLOCK 835 # 0.00
LOT 21 # 0.00
BUILDING 50.00
TOTAL 50.00
CHECK 50.00
CHANGE 0.00
0029A005 13:07

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 10/06/98
Control #
Permit # 98-3473

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 835 Lot 21 Qual

Work Site Location 1674 LAURELTON ST
DEMOLISH DWELLING
Owner in Fee EDOLINS, FRANK J
Address 1308 CEDAR AVE
BRICK, NJ
Telephone [redacted]

Contractor F DAVID EDDINS
Address 142 ATLANTI AVE
MANASQUAN, NJ 08736-
Telephone (732)223-6464
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
DEMOLISH DWELLING

PAYMENTS (Office Use Only)

Building	50
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Other	
Total	50
Check No.	1677
Cash	
Collected By	WP

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 $ 2,500

Construction Official

10/06/98
Date

U.C.C. F170 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 09/29/98
Date Issued 10/16/98
Control # C29-22
Permit # 98-3473

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

Block 835 Lot 21 Qual
Work Site Location 1674 LAURELTON ST
DEMOLISH DWELLING
Owner in Fee EDOLINS, FRANK J
Address 1308 CEDAR AVE
BRICK, NJ
Tele.(732)458-2174
Contractor F DAVID EDDINS
Address 142 ATLANTI AVE
MANASQUAN, NJ 08736-
Tele.(732)223-6464 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. 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

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

DEMOLISH DWELLING

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
X No Plans Req.	9-30-98	FM
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

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

TYPE OF WORK			FEE (Office Use Only)
[ ] New Building			$ 0
[ ] Addition			0
[ ] Alteration			0
[ ] Roofing			0
[ ] Siding			0
[ ] Fence	0	Height (exceeds 6')	0
[ ] Sign	0	Sq. Ft.	0
[ ] Pool			0
[ ] Asbestos Abatement Subchapter 8			0
[ ] Lead Haz Abatement NJAC 5:17			0
[ ] Other			0
Other			0
[X] Demolition			50

B. BUILDING CHARACTERISTICS

	Present	Proposed
Use Group	R-3	R-3
Constr. Class		
No. of Stories		0
Height of Structure		0 Ft.
Area Largest Floor		0 Sq. Ft.
New Bldg. Area/All Floors		0 Sq. Ft.
Volume of New Structure		0 Cu. Ft.
Total Land Area Disturbed		0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 2,500
3. Total (1+2)$ 2,500

Industrialized Building:
[ ] State Approved
[ ] HUD

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 50
	DCA Training Fee	$ 0

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

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
FAX# 732-458-5378
PHONE 732-458-7000

9/23/98 CLERK MCO

EDDINS, FRANK & LITTLE, JAMES
8 LANES MILL RD.
BRICK, NJ 08724-7009

ROUTE 020 ACCOUNT L353603
BLOCK- 835- LOT-21-24
S/L-1674 LAURELTON ST.

SUBJECT: BUILDING TO BE DEMOLISHED AND RECONSTRUCTED

DEAR CUSTOMER,

THIS IS TO CERTIFY THAT THE WATER SERVICE AT THE SUBJECT PROPERTY HAS BEEN TERMINATED AND THE WATER METERING SYSTEM HAS BEEN REMOVED.

PLEASE NOTE THAT IT IS THE RESPONSIBILITY OF THE HOMEOWNER TO INSURE THAT THE SEWER LINE IS PROPERLY CAPPED AT THE CURB, SO THAT DEBRIS FROM THE DEMOLITION PROCEDURE DOES NOT ENTER THE SEWER SYSTEM.

RESPECTFULLY YOURS,

MAUREEN COLLIER
CUSTOMER ACCOUNTS REPRESENTATIVE

LTR115

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
FAX# 732-458-5378
PHONE 732-458-7000

9/23/98

CLERK MCO

EDDINS, FRANK & LITTLE, JAMES
8 LANES MILL RD.
BRICK, NJ 08724-7009

ROUTE 020 ACCOUNT 1355803
BLOCK- 085- LOT-21-24
S/L-1674 LAURELTON ST.

SUBJECT: BUILDING TO BE DEMOLISHED AND RECONSTRUCTED

DEAR CUSTOMER,

THIS IS TO CERTIFY THAT THE WATER SERVICE AT THE SUBJECT PROPERTY HAS BEEN TERMINATED AND THE WATER METERING SYSTEM HAS BEEN REMOVED.

PLEASE NOTE THAT IT IS THE RESPONSIBILITY OF THE HOMEOWNER TO INSURE THAT THE SEWER LINE IS PROPERLY CAPPED AT THE CURB, SO THAT DEBRIS FROM THE DEMOLITION PROCEDURE DOES NOT ENTER THE SEWER SYSTEM.

RESPECTFULLY YOURS,

MAUREEN COLLIER
CUSTOMER ACCOUNTS REPRESENTATIVE

LTR115

NEW JERSEY
NATURAL GAS
COMPANY
People and Resources Dedicated to Service

J.J. MOUNT SERVICE CENTER, 775 VASSAR AVENUE, LAKEWOOD, NJ 08701 1-800-221-0051

Sept. 22, 1998

Mr. D. Eddins
142 Atlantic Ave.
Manasquan, NJ 08736

RE: 1674 LAURELTON - BRICK 1683 Rt. 88- Brick-No Gas
Retired srvc at main

Dear

Per your request, New Jersey Natural Gas company has investigated the above reference property for the presence of our natural gas facilities. The facilities (if any) have been permanently retired at the main, which may be in the road or behind the curb.

*****IMPORTANT***** PLEASE READ CAREFULLY*****

If you would like to have the gas service restored, please contact our Customer Assistant representative at 1-800-221-0051 six weeks prior to the estimated reconnection date. Request and schedule a "Sketch For New Service", Operating order. This time frame is necessary in order for us to obtain permits required to restore your service. The service will be installed in a straight line, perpendicular from the curb line to the meter location.

NEW JERSEY NATURAL GAS COMPANY
775 VASSAR AVENUE
LAKEWOOD, NJ 08701

CC: R. Gallo
File - Operations Dept.

GPU ENERGY

417 New Jersey Avenue
Point Pleasant Beach, NJ 08742

September 15, 1998

F D Eddins Inc.
142 Atlantic Ave
Manasquan, NJ 08736

Dear Mr. Eddins:

This letter confirms that GPU ENERGY has performed a field inspection of the building listed below and determined that our electric service cables and meters have been removed.

1674 Laurelton Street
Brick, NJ 08724

This notification is effective as of the above date, and certifies the referenced building is now electrically safe for demolition.

Sincerely,

James J. Butterly
Project Specialist

JJB/ms

demoltr.pf1

COUNTER FORM
PLEASE PRINT

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: 1674 Laurelton St. Date Rec'd.: 9.28.98
Block: 835 Lot: 21, 22, 24 Date Issued:
Owner in Fee: Frank J Eddins Control #:
Address: 1308 Cedar Ave Permit #:
Brick
State: NJ Zip: Phone: ( )
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature:

Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR: F David Eddins, Inc.
ADDRESS: 142 Atlantic Ave
Manasquan, NJ 08736
PHONE: 223-6464
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #): 137-52-3043

TECHNICAL SITE DATA

DESCRIPTION OF WORK:

demolish building
(house)

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☒ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories: 1
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature: D. Eddins

Estimated Cost of Building Work: ~~$5000~~ 500
New Building (1): $
Aleration (2): $
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date: