

BLOCK 530 LOT 1-4 ADDRESS (SITE) 489 JACKSON AVE PERMIT NO. 2886-95

NOV 1 1993



CONSTRUCTION PERMIT APPLICATION

DIV. OF INSPECTION

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

I. IDENTIFICATION

1. Proposed Work-site at: 489 Jackson Ave, Brick
2. Name of Owner in Fee: Home Mark Homes Tel. (908) 477-7874
Address 509 Drum Point Rd, Brick, NJ 08723
street municipality zip code
3. Ownership in Fee: Public ☒ Private ☐
4. Principal Contractor: Home Mark Homes Tel. (908) 477-7874
Address 509 Drum Point Rd, Brick, NJ 08723
- License No. OR, if new home, Builder Reg. No. 020653 Exp. Date 12/31/94
- Federal Emp. No. 22-28-18653 Social Security No. _____
5. Architect or Engineer John De Palma Tel. (608) 688-7738
Address 2165 Morris Ave, Union, NJ 07083
6. Responsible Person In Charge of Work Joseph Minaya Tel. (908) 477-7874

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>183-</u>	☒	☐
2. Electrical		☒	☐
3. Plumbing	<u>116-</u>	☒	☐
4. Fire Protection	<u>145-</u>	☒	☐
5. Other		☒	☐
6. Subtotal	\$ <u>438-</u>	☒	☐
7. Less 20% for State Plan Review	<u>44-</u>	☒	☐
8. Subtotal	\$	☒	☐
9. DCA Training Fee	<u>33</u>	☒	☐
10. Subtotal	\$	☒	☐
11. Cert. of Occupancy	<u>66-</u>	☒	☐
12. Other		☒	☐
13. TOTAL	\$ <u>581-</u>	☒	☐

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	<u>2</u>	
2. Height of Structure	<u>26</u> ft.	
3. Area—Largest Floor	<u>861</u> sq. ft.	
4. Building Area—All Floors	<u>1635</u> sq. ft.	
5. Volume of Structure	<u>20,360</u> cu. ft.	
6. Construction Classification		
7. Total Land Area Disturbed	<u>1131</u> sq. ft.	
8. Flood Hazard Zone		
9. Base Flood Elevation		
10. Wetlands yes		
no		
11. Fire Grading		
12. Max. Live Load		
13. Max. Occupancy Load		

II. PROPOSED WORK

1. ☐ Minor Work (single trade)
2. ☐ Small Job (\$5,000 and no prior approvals)
3. ☒ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☒ Fire Protection
7. ☐ Plumbing
8. ☐ Electrical
9. ☐ Asbestos Abatement
10. ☐ Demolition

TOTAL COSTS

Est. Cost

53000

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>MP</u>	<u>11-1-93</u>		<u>12-10-93</u>	<u>RE</u>			
			<u>1/14-94</u>	<u>RE</u>	<u>5/27/94</u>		<u>RE</u>
			<u>1/15-93</u>	<u>RE</u>	<u>5/24/94</u>		<u>RE</u>
					<u>5/25/94</u>		<u>RE</u>
<u>Eng</u>	<u>11/8/93</u>		<u>11/8/93</u>	<u>RE</u>			

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 10109286

20K

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 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 HOMER MARK HOMER S
Address 509 Datura Pt Rd Brick N.J. 08723

Telephone (908) 477-7874

Signature [Signature] Date 10-30-83

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL	
	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. Initial	Final Date
☐ Planning Board								
☒ Zoning Board	1643	9/11/93						
☐ 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 Protection								
☐ Utility Dig No.								
☐ Other								
☐								
☐								

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

Name of Code & Edition

Name of Code & Edition

Other

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Mechanical _____

Energy _____
Barrier Free _____
Flood Hazard _____
As Built Elevation Cert. _____
Other _____

X. CERTIFICATES ISSUED (office use only)

DATE EXPIRED

- ☐ Temporary Certificate of Occupancy
☐ Temporary Certificate of Occupancy
☐ Continued Certificate of Occupancy
☒ Certificate of Occupancy
☐ Certificate of Approval
☐ None

No. _____
No. _____
No. 2826
No. _____
No. _____

IMPORTANT
A.H.B.T. - EXEMPT

COMMENTS

11-8-93
AHP



CERTIFICATE

Date Issued 6-7-94
Control #
Permit # 2886-93

IDENTIFICATION

Block 530 Lot 1-4
Work Site Location 489 Jackson Ave.
Owner in Fee Home Mark Homes
Address 509 Drum Point Rd.
Brick, NJ
Tele. ()
Contractor same
Address
Tele. ()
Lic. No. or Bldgs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. 131972
Use Group R-3 1 hour
Maximum Live Load 40+
Description of Work/Use:

Single family dwelling

Type of Warranty Plan: [] State [x] Private
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☒ CERTIFICATE OF OCCUPANCY

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

☐ CERTIFICATE OF APPROVAL

☐ 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 OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than , 19 or the owner will be subject to a fine or order to vacate:

Fee \$
Paid [] Check No.
Collected by:

CONSTRUCTION OFFICIAL

Arthur J. Cicero
wp

INSPECTOR: DON FORGIOWEDATE: 5-31-94JOB: HOMES MARK
HOMES SECTION:TYPE OF WORK: C.O. INSPECTIONWEATHER: SWLOCATION: 489 JACKSON AVETEMPERATURE: 75°BLOCK: 530LOT: 1**ENGINEERING RECOMMENDATIONS FOR
CERTIFICATE OF OCCUPANCY
INSPECTION CHECK LIST**

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway	✓	
2. Grading	✓	
3. Sidewalk	N/A	
4. Road Pavement	✓	
5. Landscaping & Sodding	SEEDS	
6. Clean-up Procedures	✓	
7. Note on going construction in immediate area	✓	
8. Safety	✓	

COMMENTS REFERENCING ITEM NUMBER:

RECOMMENDATIONS:☐ TEMP. C.O.☒ FINAL C.O.☐ DETAILED REINSPECTION☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED PLANNING BOARD ENGINEERThomas K. Noyes MUNICIPAL ENGINEER

_____, Authorized representative of _____, hereby acknowledge the above deficiencies, and further realize that the Certificate of Occupancy will be conditioned upon the acceptable resolution thereof within _____ days of the issuance of Certificate of Occupancy.



CONSTRUCTION PERMIT

Date Issued 12-10-93
Control #
Permit # 886-93

IDENTIFICATION Block 530 Lot 1-4

Work Site Location 489 Jackson

Owner in Fee Home Depot Homes

Address 509 Owen Pl.

Tele. () Bull D &

Contractor Jes

Address Jes

Tele. () MI.

Lic. No. or Bldrs. Reg. No. 12-10-93 Exp. Date

Federal Emp. No.

or Social Security No.

is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ OTHER

☐ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

Vol. 20366
Dwelling by ft 163.

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 \$ 53,000

a & C

PAYMENTS (Office Use Only)	
Building	<u>183</u>
Plumbing	<u>110</u>
Electrical	
Fire Protection	<u>145</u> **0005**
Other	<u>2886</u> #
Other	<u>PIR 44</u> BLOCK
DCA Training Fee	<u>93</u> - 530 #
Cert. of Occ.	<u>660F</u>
Other	<u>1-4</u> #
Total	<u>581</u> BUILDING
Check No.	<u>#1568</u> PLUMBING
Cash	<u>PLAN RW</u>
Collected By:	<u>[Signature]</u>



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

12-10-93
2886-83

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

Block 530 Lot 1-4
Work Site Location 489 Jackson Ave, Brick

Owner in Fee Home Mark Thomas
Address 509 Duane Court Rd
Brick, NJ

Tele. () 920 4640
Contractor Dunham Proplastic Inc
Address 24 Woodland Dr
Brick, NJ

Tele. () 920 4640
Lic. No. 7370
Federal Emp. No. 22-3060446 or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present 44 Proposed _____
Building Sewer Size 3/4
Water Service Size 3/4
Estimated Cost of Plumbing Work \$ 400

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS:		Dates (Month/Day)	
	Type:	Failure	Failure	Approved	Initial
☐ No. Plans Required	Slab				
☐ Joint Plan Review Required:	Rough				
☐ Bldg. ☐ Elec. ☐ Fire	Water				
☐ Plumb. Plans Approved	Sewer				
Date: <u>11/18/93</u>	Fixtures				
Approved by: <u>[Signature]</u>	Gas Equipment				
	Gas Final				
	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.

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

Signature-Contractor Seal

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
2	Water Closet	10
1	Urinal/Bidet	
1	Bath Tub	5
1	Lavatory	5
1	Shower	10
1	Floor Drain	5
1	Sink	
1	Dishwasher	5
1	Drinking Fountain	5
1	Washing Machine	
1	Hose Bibb	3
1	Gas Piping	10
1	Fuel Oil Piping	15
1	Water Heater	5
1	Steam Boiler	
1	Hot Water Boiler	15
1	Sewer Pump	
1	Interceptor/Separator	
1	Backflow Preventer	
1	Greasetrap	
1	Water Cooled A/C or Refrigeration Unit	15
1	Sewer Connection	
1	Water Service Connection	
1	Gas Service Connection	
1	Active Solar System	
1	Other	
Administrative Surcharge		10
Paid ☐ Check # _____ Minimum Fee		110
Collected by: _____ TOTAL		120

WR 0050286
2nd Floor
LH Den



ELECTRICAL
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control
Permit #

1794001682

FEE (Office Use Only)

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

Block 439 Lot 1-9
Work Site Location JACKSON AVE BRICK
Owner-in-Fee SD4 Home
Address SD4 Home
Contractor MALE
Address 63 Logansberry TR. N.S. 08755
Tele. (908) 235-7133
Lic. No. 1415
Federal Emp. No. or Social Security No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[] Pole/Pad # [] Temporary [] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work \$ 2500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)
[] No Plans Required	Type:	Failure Failure
Joint Plan Review Required:	Rough	940322
[] Bldg. [] Plumb.	Temporary	3-28-00
[] Fire [] Elevator	Constr. Serv.	3-28-00
[] Elec. Plans Approved	TCO	
Date:	Other	
Approved by:	Service	
	Final	
SUBCODE APPROVAL	Temp. Cut-in-Card Date Issued	3-28-00
[] TCO [] GCO [] CA	Final Cut-in-Card Date Issued	
Date: <u>3-28-00</u>		
Approved By: <u>[Signature]</u>		

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.

[] Licensed Electrical Contractor [] Exempt Applicant
Signature-Contractor Seal

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
48		Fixtures (1)
6		Receptacles (2)
59		Switches (3)
		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
		Smoke Detectors
		Whirlpool/spa
		Pool Bonding
		hp Pool Filler 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
		Other

Paid [] Check # <u>635</u>	Administrative Surcharge	\$
	Minimum Fee	\$
	DCA Training Fee	\$
Collected by: <u>[Signature]</u>	TOTAL FEE	\$ <u>91.-</u>

U.C.C. Form F-1209 RPF
1 White - Inspector Copy
2 White - Office Copy
3 Pink - Office Copy
4 Gold - Applicant Copy



Date Received
Date Issued 12-10-93
Control #
Permit # 2886-93

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

Block 530

Lot 1-4

Work Site Location: 489 Jackson Ave Brick NJ

Owner in Fee: Home Mark Homes
Address: 509 Drum Point Rd
Briarcliff, NY

Tele. [REDACTED]

Contractor: Same

Address: [REDACTED]

Telex: [REDACTED]

Lic. No. or Bids. Reg. No. 020653

Federal Emp. No. 22-28-18653 or Social Security No. [REDACTED]

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

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

2 stories single family
Frame building w/ masonry

JOB SUMMARY: (Office Use Only)

PLAN REVIEW Date Initial INSPECTIONS

☒ No Plans Req.

☒ All ☒ Footing ☒ Foundation

☒ Frame

☒ Other

Joint Plan Review Required:

☒ Elec. ☒ Plumb. ☒ Fire

SUBCODE APPROVAL

☒ CO ☒ CC ☒ CA

Date: [REDACTED] Other: [REDACTED]

Approved By: [REDACTED] Final: [REDACTED]

Dates (Month/Day)

Failure

Failure

Approval Initial

12/13/93

1/24/94

3/18/94

6-11-94

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Alteration

☐ Roofing

☐ Siding

☐ Other

☐ Demolition

☐ Miscellaneous

☐ Fence Height

☐ Sign Sq. Ft.

☐ Pool

☐ Elevator

☐ Asbestos Abatement

☐ Other

Administrative Surcharge \$

Paid ☐ Check # Minimum Fee \$

Collected by: TOTAL FEE \$

B. BUILDING CHARACTERISTICS

Use Group Present Proposed

Constr. Class Present Proposed

No. of Stories 2

Height of Structure 22.6 Ft.

Area Largest Floor 861 Sq. Ft.

Total Bldg. Area/All Floors 1635 Sq. Ft.

Volume of Structure 20360 Cu. Ft.

Total Land Area Disturbed 1131 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ 53,000

2. Alteration \$ 53,000

3. Total (1+2) \$ 106,000

(Office Use Only)

FEE

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$



FIRE PROTECTION SUBCODE TECHNICAL SECTION



Date Received
Date Issued 12-10-93
Control #
Permit # 2886-93

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

Block 530 Lot 1-4
Work Site Location 489 Jackson Ave, Brick

Owner In Fee Home Mark Homes

Address 509 Drum Point Rd
Brick, N.J.

Take [Redacted]

Contractor [Redacted]

Address [Redacted]

Tele. () 020653

Lic. No. 020653 or Social Security No. [Redacted]

Federal Emp. No. 22-28-18653

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed [Redacted]

Const. Class. Present Proposed [Redacted]

Heating Systems N New [Redacted] Existing [Redacted]

Type: N Gas [Redacted] Oil [Redacted] Electrical [Redacted] Solar [Redacted]

Location: Garage - Fire Hydrant - 180 Above 1/200

Total Est. Cost of Fire Prot. Work \$ 50 [] Other [Redacted]

JOB SUMMARY (Office Use Only)

PLAN REVIEW:

[] No Plans Required

Joint Plan Review Required: [] Bldg. [] Plumb. [] Elec. [] Elevator [] Fire Plans Approved

Date: 12/8/93

Approved by: [Signature]

SUBCODE APPROVAL: UCCO 11 CCO 11 CA

Date: 3/2/94

Approved by: [Signature]

C. CERTIFICATION IN LIEU OF OATH

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

[Signature]
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source

Method of Valve Supervision

Local Alarm Supervision

Central Supervision

Proprietary Supervision

Flammable Liquid Storage Tanks

Combustible Liquid Storage Tanks

L.P.G. Storage Tanks

L.N.G. Storage Tanks

Wet Sprinkler Heads

Dry Sprinkler Heads

TOTAL

Smoke Detectors A/C & D/C

Heat Detectors Wet & Dry

TOTAL Back Up

Stand Pipes

Kitchen Hood Exhaust Systems

Pre-Engineered Systems

CO₂ Suppression

Halon Suppression

Foam Suppression

Dry Chemical

Wet Chemical

Gas or Oil Fired Appliance

OTHER

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

CO₂ Suppression

Halon Suppression

Foam Suppression

Dry Chemical

Wet Chemical

Gas or Oil Fired Appliance

OTHER

Administrative Surcharge

Paid [] Check # [Redacted]

Collected by: [Redacted]

U.C.C. Form F-1408

1 White - Inspector Copy

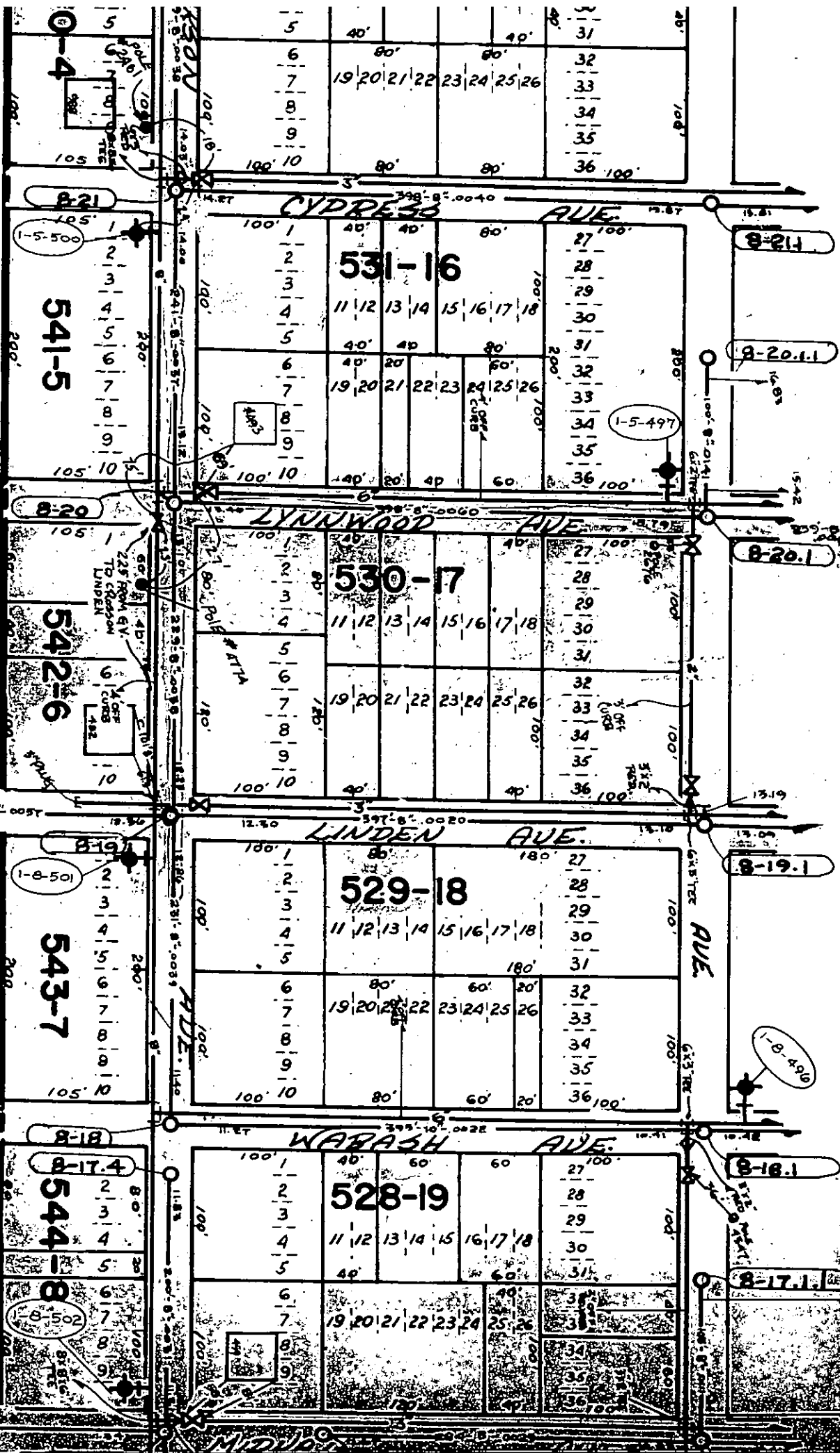
2 Green - Office Copy

3 Pink - Office Copy

4 Gold - Applicant Copy

SHEET 35B

SHEET 25



CALL FOR PICK UP

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 EAST
BRICK, NEW JERSEY 08724
(908) 458-7000

STATEMENT OF UTILITY SERVICES

APPLICANT: NAME: MR. JOE MINAYA PHONE NO. 477-7874 (bus.)
ADDRESS: 509 DRUM POINT ROAD (home)
BRICK, NJ 08724

PROPERTY IN QUESTION: ADDRESS 489 JACKSON
BLOCK(S) 530 LOT(S) 1-4
BTMUA ACCOUNT NO: I770408 TAX MAP DRAWING NO. 35A

SINGLE FAMILY RESIDENCE X MINOR SUBDIVISION _____
COMMERCIAL _____ MAJOR SUBDIVISION _____

1. UTILITY SERVICE CAN BE PROVIDED. APPLICATION FOR SERVICE IS
REQUIRED. WATER X SEWER X

CONNECTION WILL BE PROVIDED AS FOLLOWS:

INITIAL SERVICE CHARGES

WATER Jackson Ave. 3/4" 1379.00 1" 2405.00
(STREET)

SEWER Jackson Ave. 1973.00
(STREET)

2. UTILITY SERVICE CANNOT BE PROVIDED AT THIS DATE.
APPLICATION FOR EXTENSION IS ☐ IS NOT ☐ REQUIRED.

3. UTILITY SERVICE CANNOT BE PROVIDED AT THIS DATE. IT SHALL BE
AVAILABLE UPON COMPLETION OF WORK BY A DEVELOPER UNDER
APPLICATION NO. _____ CONTACT THE AUTHORITY
TO CONFIRM AVAILABILITY OF SERVICES.

K.B.

DATE: 10/29/93

SIGNED: Sarif M. S. Siddiqui

NOTE: STATEMENT GOOD FOR ONE YEAR.

UTILITY SERVICES FOR NEW HOMES

1. OBTAIN "STATEMENT OF UTILITY SERVICES" AND SIZING SHEET AT BTMUA
2. FILL OUT SIZING SHEET AND HAVE APPROVED BY THE BRICK TOWNSHIP PLUMBING INSPECTOR.
3. APPLICATION FOR UTILITIES SHOULD BE MADE TO BTMUA AS EARLY AS POSSIBLE, AT WHICH TIME THE SIZING SHEET, SIGNED BY THE TOWNSHIP PLUMBING INSPECTOR, MUST BE SUBMITTED.

APPLICATIONS WITHOUT THE SIGNED SIZING SHEET WILL NOT BE ACCEPTED.

LEAD TIME FOR TAPS TO BE INSTALLED IS BETWEEN 8 AND 12 WEEKS, WEATHER PERMITTING; HOWEVER, TAPS WILL NOT BE SCHEDULED FOR INSTALLATION UNTIL AT LEAST A FOUNDATION EXISTS. FOR INFORMATION ON SCHEDULED INSTALLATIONS, CONTACT THE AUTHORITY OPERATIONS OFFICE.

4. AFTER THE TAPS HAVE BEEN INSTALLED, SEWER AND WATER SERVICE PERMITS ARE TO BE OBTAINED AT THE BTMUA (PERMIT FEE OF \$15 FOR EACH SERVICE).
5. ONCE YOUR SERVICE LINES HAVE BEEN CONNECTED, CALL THE CUSTOMER ACCOUNT DIVISION AT BTMUA TO ARRANGE FOR AN OUTSIDE INSPECTION.
6. **CERTIFICATE OF COMPLIANCE**

THE C.C. WILL BE ISSUED AFTER THE METER IS INSTALLED AND ALL REQUIREMENTS MET, AT WHICH TIME ALL FEES MUST BE PAID IN FULL.

LAND DEVELOPMENT
UNDERSIZED LOT
HOME MARK HOMES, INC.
Block 530, Lot 1 (1-4)
JACKSON AVENUE
Zone: R-7.5

**RESOLUTION OF APPROVAL
BOARD OF ADJUSTMENT, TOWNSHIP OF BRICK**

Case #BA-1643

September 1, 1993

WHEREAS, an application has been made by HOME MARK HOMES, INC. for the granting of a variance for minimum lot area on Block 530, Lot 1 (1-4) as set forth on the Tax Maps of the Township of Brick; and

WHEREAS, the Board, after carefully considering the evidence presented by the applicant, and the report from its professional staff, the Board of Adjustment hereby makes the following findings of fact:

1. The applicant is the builder of the proposed structure; the contract purchaser intends to utilize the home as his primary residence. The current owner of the parcel is Emilio Rinelli.

2. The applicant has requested approval in accordance with the Ordinances of the Township of Brick.

3. The site in question is located in R-7.5 zone, at the corner of Jackson and Lynnwood Avenues.

4. The applicant is requesting a variance from minimum lot size from the Brick Township Land Use and Development Regulations of the Code of the Township of Brick to construct a two-story, single-family, frame structure with a garage on an undersized corner lot (9,000 sf. required; 8,000 sf. proposed).

WHEREAS, the Board of Adjustment has determined that the

File
Home Mark
Morris
Doyle
Owen
Coronato
Building
Zoning

September 1, 1993

WHEREAS, the Board of Adjustment has determined that the applicants should be granted the requested relief for the following reasons:

1. The proposed structure would be inherently beneficial to the applicant and the contract purchaser who intends to live in the home and would pose no danger to the surrounding area.

2. The granting of the variance would not have a substantial detriment to the public good and will not substantially impair the intent and purposes of the Zone Plan and Zoning Ordinances of the Township of Brick.

3. With the exception of lot area, the proposed structure will conform to the requirements of the R-7.5 zone for setbacks and lot coverage.

4. The adjoining land owner has not responded to correspondence requesting whether the he/she (adjoining land owner) would be interested in purchasing Block 530, Lot 1 (1-4) or selling his/her property to the owner of the subject property.

5. The proposed structure would be consistent with the character of the surrounding area.

6. The requirement for two off-street parking spaces is met by the proposed one-car garage and the proposed 25' long driveway.

NOW, THEREFORE, BE IT RESOLVED, by the Brick Township Board of Adjustment that the application is hereby approved subject to the following conditions:

1. The applicant must submit proof of payment of all currently due taxes to the Brick Township Board of Adjustment.

September 1, 1993

2. Applicant must comply with conditions as set forth in the Engineer's Report dated June 1, 1993.

ROLL CALL VOTE

Moved by: D. Jayne

Seconded by: C. Hilsheimer

Affirmative Vote: C. Hilsheimer, J. MacDonald, A. Marchetti,
D. Jayne, S. Szucs

Negative Vote:

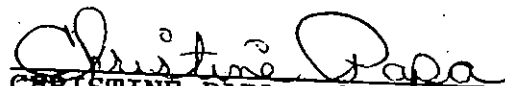
Abstaining:

Absent: B. Kelly, R. Graham

Ineligible: J. Palmisano, R. Collier

CERTIFICATION

I, CHRISTINE PAPA, Clerk, Board of Adjustment of the Township of Brick, County of Ocean and State of New Jersey, do hereby certify that the foregoing Resolution was duly passed by the said Board of Adjustment of the Township of Brick at a meeting held on this 1st day of September, 1993.


CHRISTINE PAPA, Clerk
Brick Township Board of Adjustment

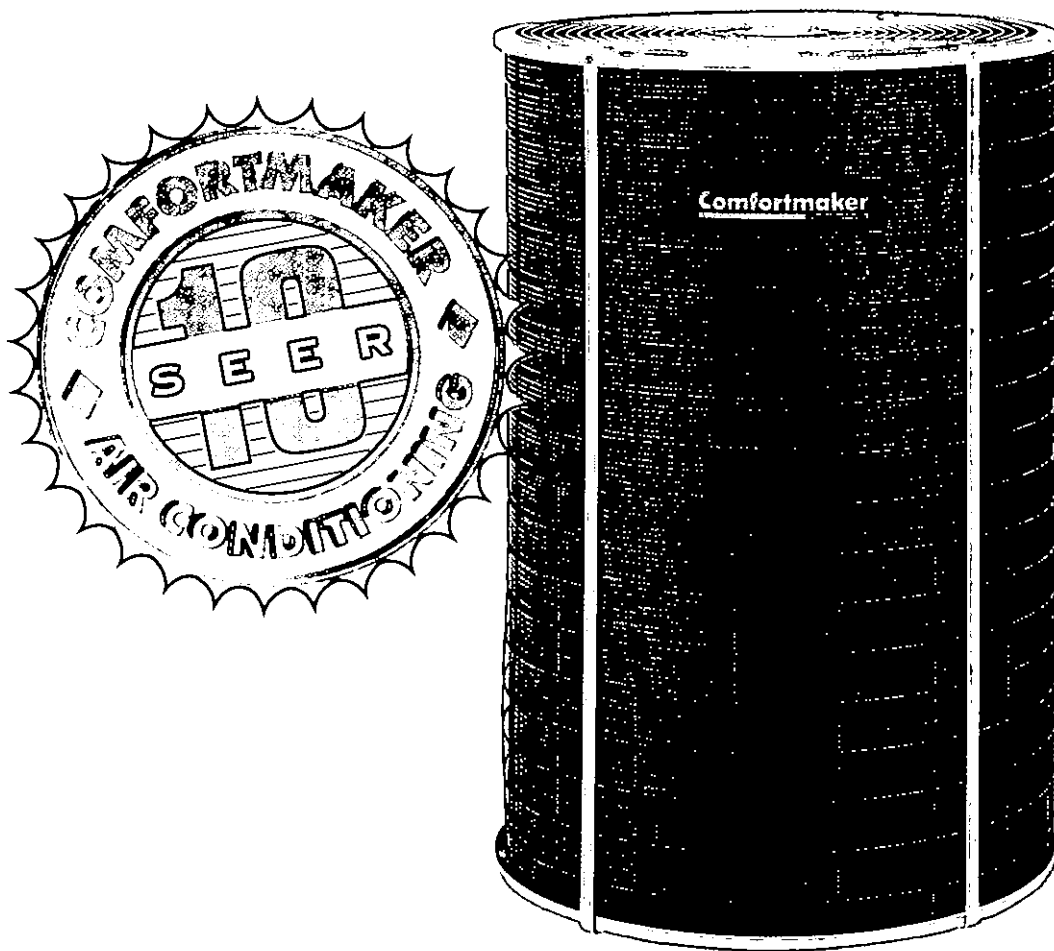
Deluxe High Efficiency Air Conditioners

Comfortmaker's Deluxe High Efficiency Air Conditioners Incorporate Total Quality With Unsurpassed Performance. Only

Comfortmaker delivers high quality cooling capabilities for the long run. In fact, our Deluxe High Efficiency Air Conditioners have been field tested for years to prove their dependability. Utilizing the latest technology and engineering design, these units let you enjoy a high level of comfort. With energy efficiencies up to 10 SEER, you'll also enjoy lower energy consumption and significant savings over your old unit.

To keep things running quietly, we've designed these units with low speed fan motors, specially designed fan blades and internal compressor mufflers. And we always incorporate only the best components available to ensure quality performance.

Comfortmaker Deluxe High Efficiency Air Conditioners are available in 1½ to 5 ton sizes to suit your specific cooling needs. See your Comfortmaker dealer for system combinations and efficiencies.



Comfortmaker®
Air Conditioning & Heating

See What Goes Into Comfortmaker Quality . . .

Protective Top Grille

Our sturdy, highly attractive top grille protects fan blades and vital components, keeping little fingers safe from injury. Its plastic coating helps keep it looking new.

Quiet Top Discharge

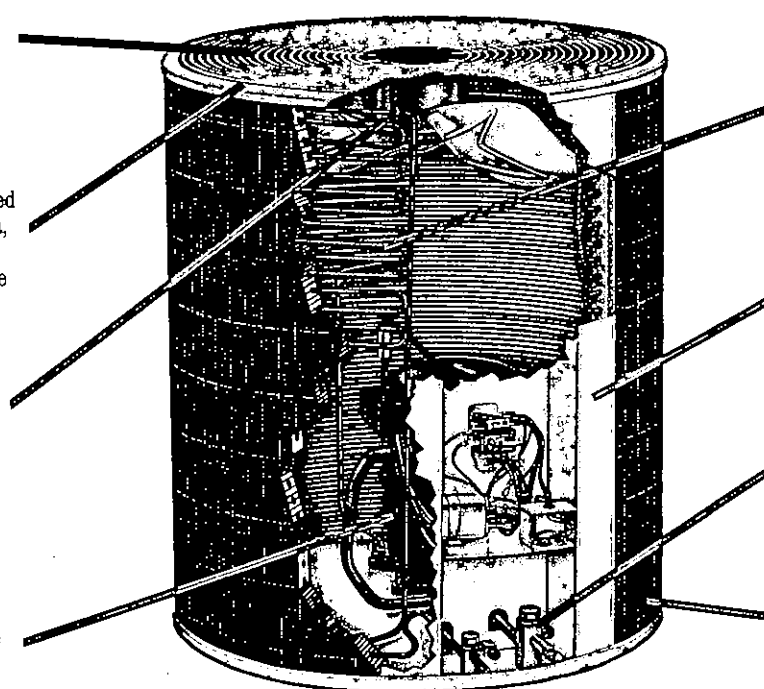
Because noise and heat are directed upward, away from your living area, these units are as quiet for you as they are for your neighbors. They're also safe for your shrubs and children.

Totally Enclosed Motor

To keep out moisture that can decrease its longevity, we've totally enclosed our outdoor motor. Fewer revolutions per minute give these units higher efficiencies and a decreased noise level.

High Efficiency Compressor

Our reciprocating compressors are field tested to produce optimum sound levels as well as ensure reliability, low cost and efficiency for more BTUs per watt of electricity.



High Performance Copper Tubes/ Aluminum Fin Coils

Copper tubing delivers high efficiency and trouble-free operation while the aluminum fin surfaces maximize the coil's heat transfer.

Corrosion-proof Finish

Quality steel chassis and galvanized steel cabinet are electrostatically painted for a superior finish that provides years of corrosion protection.

Easy Access Brass Service Valves

These valves feature high and low pressure service ports for faster, more accurate installation and service.

Protective Coil Guard

Vital components, including the coil, are protected from damage by an attractive plastic-coated guard that encompasses the unit.

Footnote: Manufacturer reserves the right to discontinue or change at any time specifications or designs without notice and without incurring obligation.

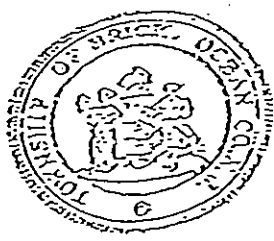
Annual Fuel Cost Comparison Chart

Approximate Air Conditioning Efficiency	Approximate Annual Operating Cost						
	1½ Ton	2 Ton	2½ Ton	3 Ton	3½ Ton	4 Ton	5 Ton
7.0 SEER	\$175	\$252	\$300	\$350	\$401	\$500	\$630
8.0 SEER	163	231	280	325	383	458	580
9.0 SEER	149	209	256	298	355	416	530
10.0 SEER	138	180	230	276	327	374	480

Note: All figures shown are based 1000 operating hours and average national power cost of .0788 \$/KWH.

EXAMPLE: Current operating cost with 7 SEER unit \$350.00
 Average operating cost with 10 SEER unit — 276.00
TOTAL ANNUAL SAVINGS \$ 74.00

*Based on 3 Ton Unit.



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

CHECK LIST

Re: Block 530 Lot 1

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

Administrative

Zoning

Engineering

Building

Plumbing

Electric

Fire

ANCHOR BOLTS SPACING 6'-0" MAX.

GARAGE DOOR TO BE 29'3" CLEAR

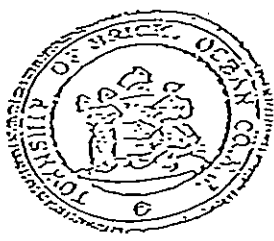
DOOR SIZES TO BE 32" DOOR

MS PER 1017.3 EXCEPTION 8

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

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

Arthur J. Cierzo, Construction Official



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3339

called
12-3-93
JL

Office of
Division of Inspections

CHECK LIST

489 JACKSON AV.

Re: Block 530 Lot 1-4

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

- Administrative
- Zoning
- Engineering
- Building
- Plumbing
- Electric
- Fire

~~HERE ATTACHED~~
~~PLANS FOR DIFFERENT~~
~~STREETS~~
~~Termination I.F.U. not shown~~

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

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

Arthur J. Cierzo, Construction Official

PLOT PLAN REVIEW

CHECK LIST

TOWNSHIP OF BRICK

BLOCK: 530 LOT: 1-4 DATE RECEIVED: _____

ADDRESS: _____

APPLICANT: Home Mark Homes PHONE: _____

CONTRACTOR: same PHONE: _____

ADDRESS: 489 Jackson Ave SUBDIVISION: _____

TYPE OF WORK: Dwelling ZONING APPROVAL: _____

REVIEW: _____ FLOOD ZONE IDENTIFIED BY FIRM _____ ELEV. C

PANEL # _____ MAP# _____ DATED: _____

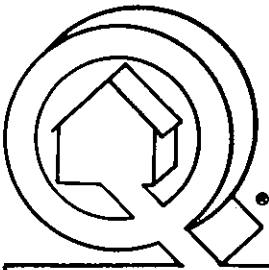
FEMA LETTER RECEIVED: YES _____ NO _____

	SHOWN	ACCEPTED	DEFICIENT	N/A
1. SITE PLAN &/OR SURVEY SIGNED & SEALED				
2. DRAW TO A SCALE OF NOT LESS THAN 1"=100'	✓			
3. EXISTING ELEVATIONS (NGVD IN FLOOD ZONES)				✓
4. SIDE PROPERTY LINES & DWELLING & PROP. CORNERS	✓			
5. STREET GUTTER, TOP CURB & CENTER LINE ELEV.	✓			
6. CONTOURS: 1' INCREMENTS/IF ELEV. FLUCTUATES 2'				✓
7. ADJACENT DWELLING CORNERS	✓			
8. PROPOSED GRADING	✓			
9. GARAGE/1ST FLOOR/CRAWLSPACE/BASEMENT ELEV.	✓			
10. LOT GRADING/FILLING & FINAL ELEVATION	✓			
11. METHOD OF DRAINING	✓			
12. FLOOD OPENINGS SIZED & PLACED				✓
13. DRIVEWAY WIDTH/TYPE & DRAINAGE	✓			
14. DIMENSIONS/ACREAGE OF PARCEL IN QUESTION	✓			

	SHOWN	ACCEPTED	DEFICIENT	N/A
15. LOCATION OF FLOODWAY BOUNDARY/HAZARD AREA				
16. FRESH WATER WETLANDS				✓
17. PARKING AREAS				✓
18. FACILITY & CONNECTIONS; WATER/SEWER/GAS/ELEC.	✓			
19. PLANTINGS, SEEDLINGS, SCREENINGS, FENCES, SIGNS				✓
20. STREETS	✓			
21. CURBING	✓			
22. DESCRIPTION OF ALTERATIONS/REL. OF WATERCOURSE				✓
23. PRIOR APPR: ARMY CORP./D.E.P./WETLANDS, ETC.				✓
24. DAM SAFETY				✓
25. SOIL CONSERVATION SERVICE				✓
26. PLANNING BOARD				✓

PLOT PLAN REVIEW

	DATE	APPROVED	REJECTED
SIGNATURE	11/8/93	<i>[Signature]</i>	
REVISED			
REVISED			
REVISED			
FIELD CHECK			
REVISED			
REVISED			
REVISED			
MUNICIPAL ENGINEER			
REVISED			
REVISED			
REVISED			



Quality Builders Warranty Corporation

P.O. Box 271
Camp Hill, PA 17011
(717) 737-2522

Quality Builders Warranty Corporation
P.O. Box 271
Camp Hill, PA 17011

TO: Local Construction Officials
FROM: Quality Builders Warranty Corporation
RE: Confirmation of Home Enrollment and Warranty Coverage

This will serve as notification that the "home" listed below has been accepted and approved for final enrollment in the 10-year Quality Builders Warranty Corporation Program per NJAC 5:25-5.5 (a)iii.

Builder's Name: HOME-MARK HOMES REG.NO: 70164

Purchaser's Name: HAGIN, CAROL/, FREDERICK

HOUSE #: 489 STREET: JACKSON AVENUE

Lot: 1-4 Development:

Block/Job: 530

Township: BRICK

City : BRICK

County: OCEAN

State : NJ

QBW Enrollment Number: 131972

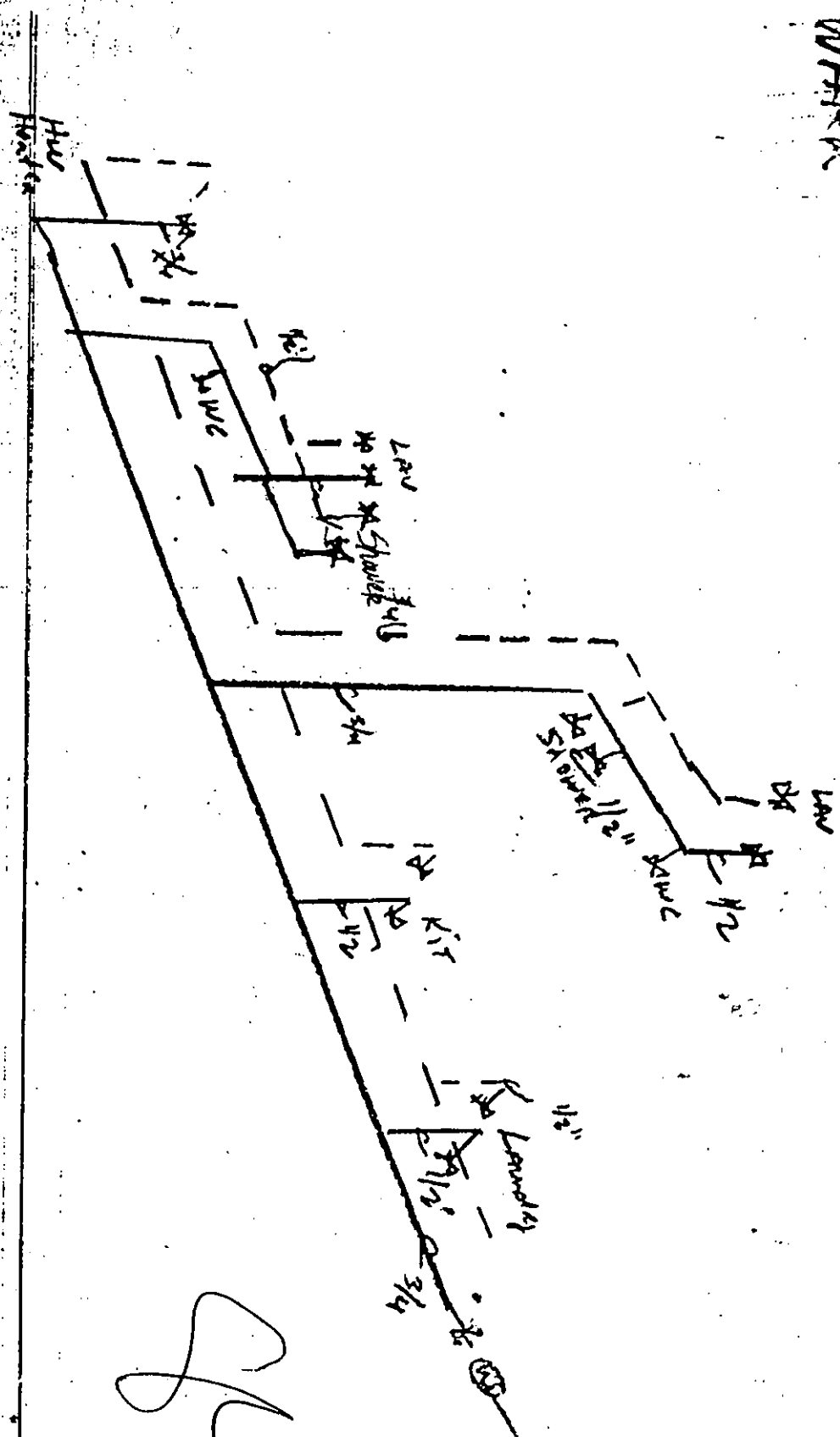

Authorized Representative of QBW

FEB 17 1994

Date

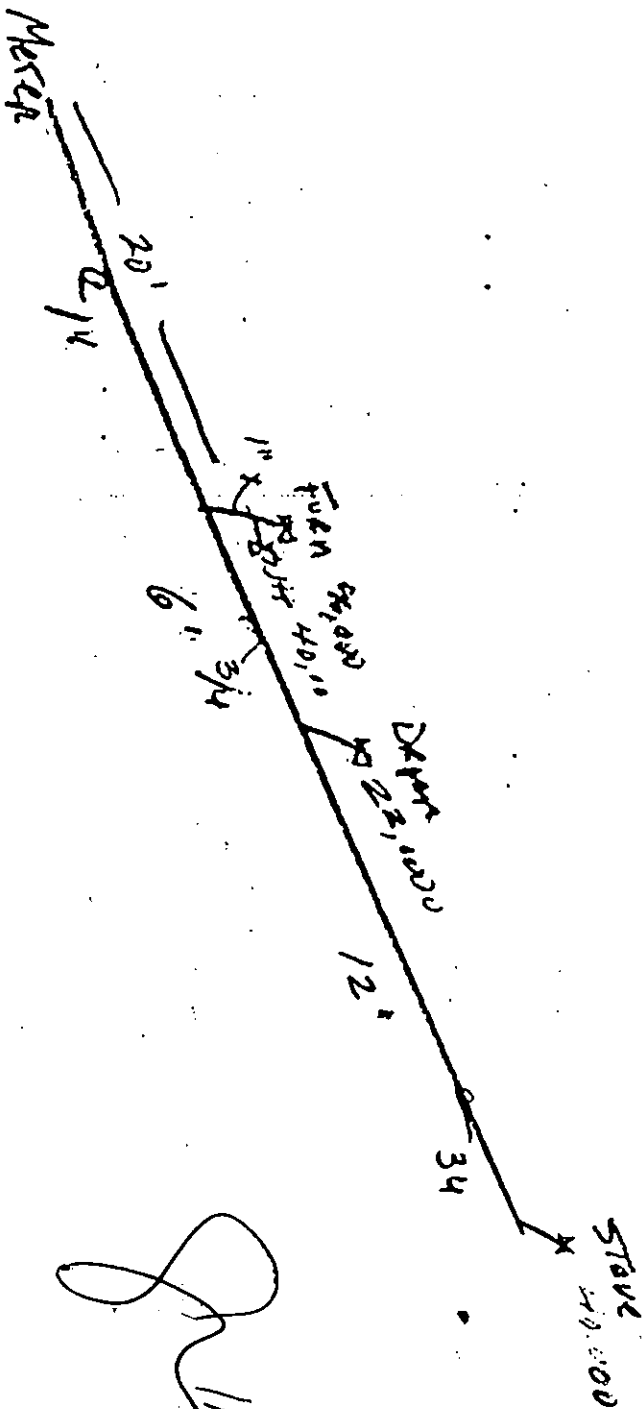
(To be presented by Builder when seeking the Certificate of Occupancy)

WATER



11/15/93

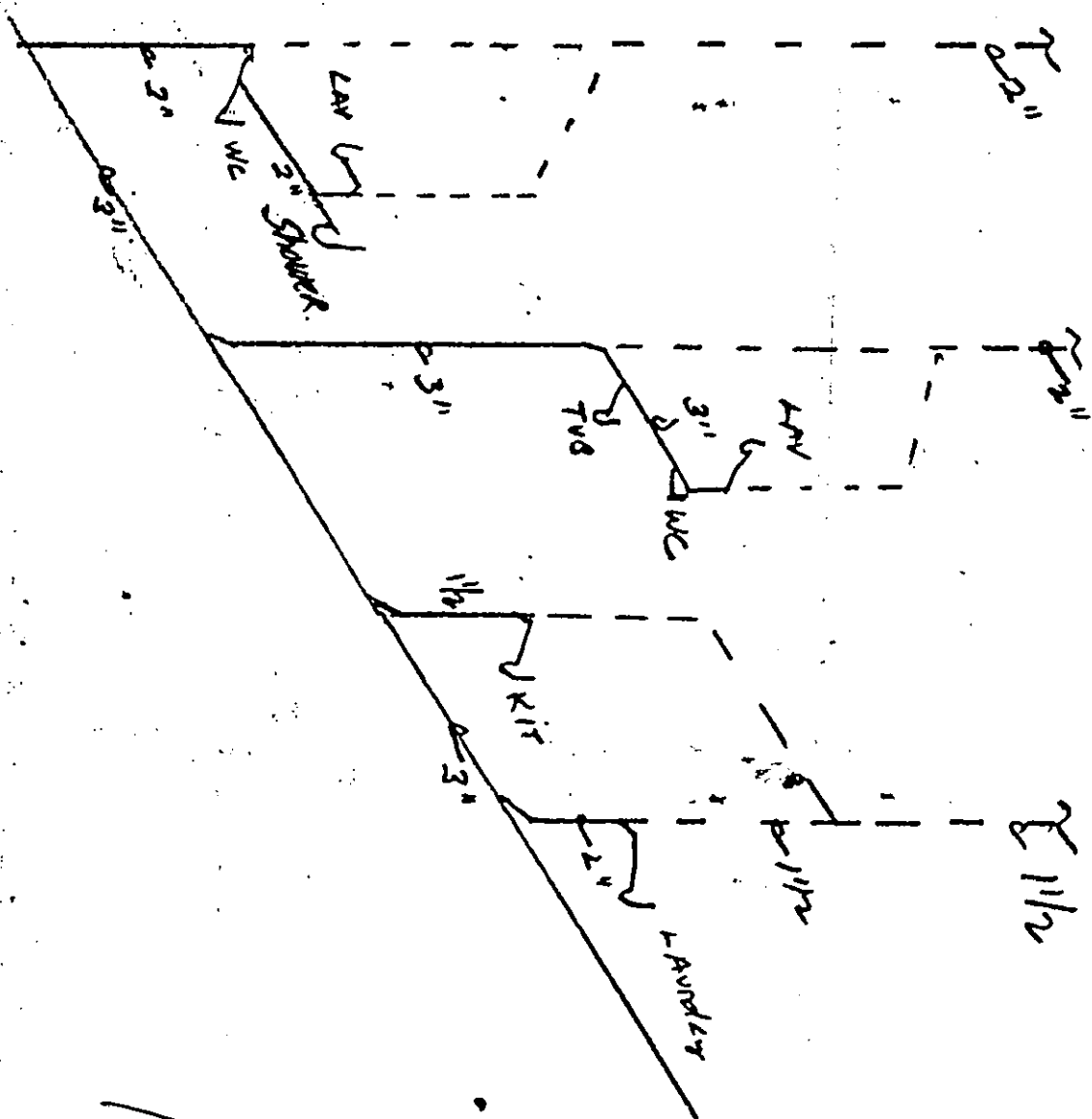
GHS



[Signature]
11/10/93

2 bath

Dinh and Pib
11/10/93

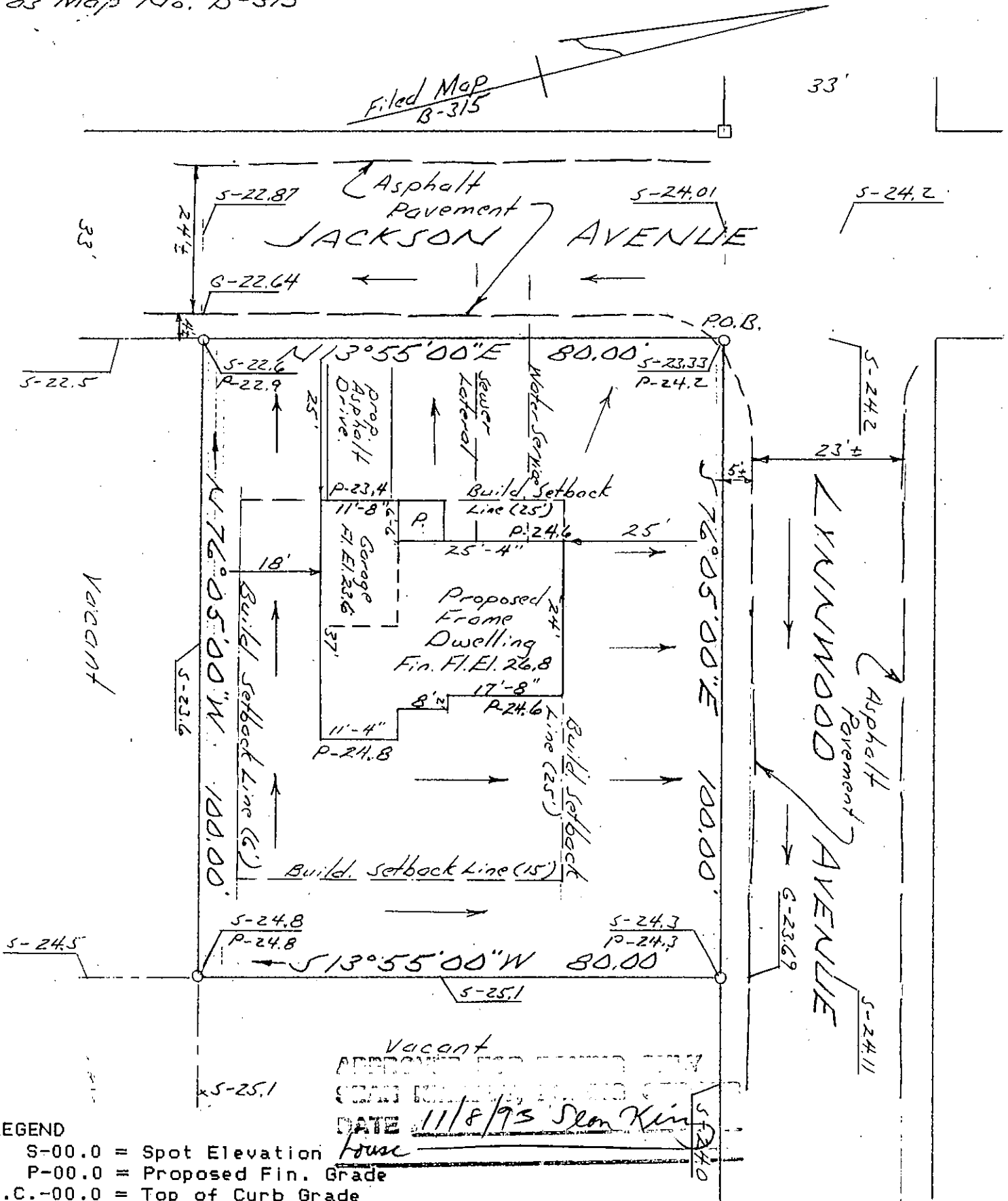


11-15/93

JULIAN P/bg

7340

Being Lot 1 Block 530 on the Brick Township Tax Map. Also being Lots 1, 2, 3 & 4 Block 17 on map of "Cedarwood Park, Subdivision C-Annex" filed in the Ocean County Clerk's Office as Map No. B-315



VACANT
APPROXIMATE FOR PLANNED CITY
CENTRAL PARK, N.J. AND CITY
DATE 11/8/93 Sean King
house

LEGEND
S-00.0 = Spot Elevation
P-00.0 = Proposed Fin. Grade
T.C.-00.0 = Top of Curb Grade
G.-00.0 = Gutter Grade
→ = Direction of Runoff
Elevations refer to N.G.V.D.

PREMISES SURVEYED FOR
HOME-MARK HOMES, INC.
BRICK TOWNSHIP, OCEAN COUNTY, N.J.

SURVEYED March 29, 1993

SCALE 1" = 20'

Elbert Morris
MORRIS & GLASGOW, INC.

Elbert Morris
Lic. L.S. No. 8509

ENGINEERING AND SURVEYING
1119 ARNOLD AVENUE
POINT PLEASANT BORO, N.J.

Charles W. Glasgow
Lic. P.E. & L.S. No. 9095

MAP No. 2-2687

BOOK
93-056