

RECEIVED

JUN 25 1998



CONSTRUCTION PERMIT APPLICATION

ALS-ash

INSPECTION

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

I. IDENTIFICATION

- Proposed Work Site at: 489 JACKSON AVENUE
- Name of Owner in Fee: Frederick G. HAGIN Tel. [REDACTED]
Address 489 JACKSON AVE BRICK NJ 08723
street municipality zip code
- Ownership in Fee: Public Private
- Principal Contractor: MISSING LINK FENCE CO Tel. (732) 920-1234
Address 333 DRUM POINT ROAD BRICKTOWN, NJ 08723
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 FREDERICK G. HAGIN
Tel. (732) 920-6022 FAX ()

shed / fence

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 70		
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	\$ 1		
10. Subtotal			
11. Cert. of Occupancy	\$ 15		
12. Other DPA			
13. TOTAL	\$ 86		

VI. BUILDING/SITE CHARACTERISTICS

- Number of Stories
- Height of Structure ft.
- Area — Largest Floor sq. ft.
- New Building Area sq. ft.
- Volume of New Structure cu. ft.
- Construction Classification
- Total Land Area Disturbed sq. ft.
- Flood Hazard Zone
- Base Flood Elevation ft.
- Wetlands yes no
- Max. Live Load
- Max. Occupancy Load

(office use only)

II. PROPOSED WORK

- ☐ Minor Work
- ☒ New Building
- ☐ Addition
- ☐ Alteration
- ☐ Fire Protection
- ☐ Plumbing
- ☐ Electrical
- ☐ Elevator Devices
- ☐ Asbestos Abat. Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Demolition

TOTAL COSTS

Est. Cost

\$1,695.00

\$1,695.00

OPTIONAL (for office use only)

Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
ASH			7-6-98	FM			
ENC	7/2/98		7/2/98	SL			

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

- ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
- ☐ High Pressure Boilers
- ☐ Pressure Vessels
- ☐ Refrigeration Systems
- ☐ Cross-Connections/Backflow Preventers
- ☐ Hazardous Uses/Places of Assembly
- ☐ Sprinklers
- ☐ Smoke Control Systems in Open Wells
- ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

- ☐ Hotels (R-1)
- ☐ Multi-Family (R-2)
- ☐ Two-Family (R-3) BOCA
- ☐ Two-Family (R-4) CABO
- ☒ One-Family (R-3) BOCA
- ☐ One-Family (R-4) CABO

No. of dwelling units:

Before Construction

After Construction

Net Gain or Loss

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change in Use Group, indicate Former:

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

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 *[Signature]* Date JUNE 24, 1998

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 _____

Address _____

Telephone (_____) _____

Signature _____

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

OFFICE DATE RECEIVED: _____

VII. 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									IMPORTANT A.H.B.T. - EXEMPT
☐ 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 _____

Other _____

Building _____
 Electrical _____
 Plumbing _____
 Fire Protection _____
 Mechanical _____

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

X. CERTIFICATES ISSUED (office use only)

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

Date Issued 07/08/98
Control #
Permit # 98-2243

IDENTIFICATION Block 530 Lot 1 Qual

Work Site Location 489 JACKSON AVE

SHED/FENCE

Contractor MISSING LINK FENCE
Address 333 DRUM POINT ROAD
BRICK, NJ 08723-

Owner in Fee HAOIN, FREDERICK AND CAROL
Address SAME
BRICK, NJ 08723-

Telephone

Telephone (908)920-1234
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2618570

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SHED AND FENCE

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 \$ 1,695

Construction Official

07/08/98
Date

U.C.C. #170 (rev. 3/96)

00000000
CHANGE
CASH
TOTAL
TOTAL
D.C.A.
BUILDING
1 #
TOTAL
230 #
BLOCK
#**2000**
#**2000**

PAYMENTS (Office Use Only)

Building 70
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
DCA Training Fee 1
Cert. of Occupancy 0
Other 214
Total 284
Check No. 80
Cash X
Collected By PA

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 06/26/98
Date Issued 7/18/98
Control # C26-530
Permit # 98-2273

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

Block 530 Lot 1
Work Site Location 489 JACSON AVE

SHED/FENCE

Owner in Fee HAGIM, FREDERICK AND CAROL

Address SAME

BRICK, NJ 08723-

Tel

Contractor MISSING LINK FENCE

Address 333 DEON POINT ROAD

BRICK, NJ 08723-

Tele. (908) 920-1234

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-2618570

or Social Security No.

Signature

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

C. CERTIFICATION IN LIEU OF OATH

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

SHED AND FENCE

Per Zoning Permit
Call For Footings Inspection

FEE (Office Use Only)

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JOB SUMMARY (Office Use Only)
PLAN REVIEW Date Initial

☒ No Plans Req.

☒ All

☐ Footing

☐ Foundation

☐ Frame

☐ Other

Joint Plan Review Required:

☐ Elect ☐ Plumb ☐ Fire

SUBCODE APPROVAL ☐ Elev

☐ CO ☐ CCO ☐ CA

Date:

Approved By:

INSPECTIONS

Type

Footing

Foundation

Slab

Frame

Insulation

Finishes

Energy

Mechanical

TCO

Other

Final

Dates (Month/Day)

Failure Failure Approval Initial

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U

Const. Class Present Proposed

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 \$ 1,695

3. Total (1+2) \$ 1,695

Industrialized Building:

☐ State Approved

☐ HUD

Administrative Surcharge

Paid ☐ Check \$

Collected by:

DCA Training Fee

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 06/26/98
Date Issued 7/18/98
Control # C26-530
Permit # 98-2273

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

Block 530 Lot 1
Work Site Location 489 JACSON AVE

SHED/FENCE

Owner in Fee HAGIE, FREDERICK AND CAROL

Address SAME

OWNER U108772

Tel

Contractor MISSING LINK FENCE

Address 333 DROM POINT ROAD

BRICK, NJ 08723-

Tele. (908) 920-1234

Lic. No. or Bldgs. Reg. No.

Federal Emp. No. 22-2618570

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

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

SHED AND FENCE

Per Zoning Permit
Call For Footings Inspection

FEE (Office Use Only)

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JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plans Req. *7-6-98*

☒ All

☐ Footing

☐ Foundation

☐ Frame

☐ Other

Joint Plan Review Required:

☐ Elect ☐ Plumb ☐ Fire

SUBCODE APPROVAL ☐ Elev

☐ CO ☐ CCO ☐ CA

Date:

Approved By:

INSPECTIONS

Type

Footing

Foundation

Slab

Frame

Insulation

Finishes

Energy

Mechanical

TCO

Other

Final

Dates (Month/Day)

Failure Approval Initial

Failure Approval Initial

Failure Approval Initial

Failure Approval Initial

Failure Approval Initial

Failure Approval Initial

Failure Approval Initial

Failure Approval Initial

Failure Approval Initial

Failure Approval Initial

Failure Approval Initial

TYPE OF WORK

☐ New Building

☐ Addition

☒ Alteration

☐ Roofing

☐ Siding

☐ Fence

☐ Sign

☐ Pool

☐ Asbestos Abatement

☒ Other SHED

Other FENCE

☐ Demolition

Height (6' or over)

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Sq. Ft.

Administrative Surcharge

Minimum Fee

TOTAL FEE

DCA Training Fee

U.C.C. Form P-1108

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: July 1, 1998 1998 - 1064

Block 530 Lot 1 Zone R-7.5

Property Address: 489 Jackson Avenue

Owner: Frederick Hagin (Phone): [REDACTED]

Applicant: Same (Phone): Same

Existing Use: Single-family dwelling.

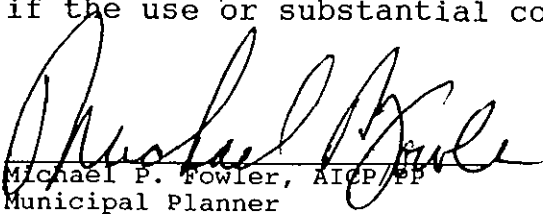
Proposed Use: Single-family dwelling.

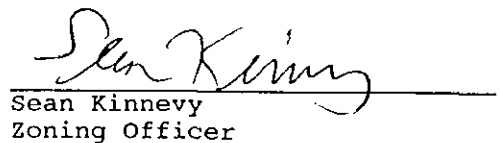
Proposed Construction (if any): 8' by 10' shed, 8' high and 4' high
chain-link fence.

Conditions: Shed must be setback at least 4 feet from the side and rear
property lines.

Fence must be setback at least 10 feet from the street
pavements.

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
Municipal Planner


Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK
Zoning Permit Application
(Please Type or Print Neatly)

BLOCK 530

LOT 1

PROPERTY ADDRESS 489 JACKSON AVE.

NAME OF OWNER FREDERICK G. HAGIN CAROL M. HAGIN

OWNER'S PHONE ()

NAME OF APPLICANT FREDERICK G. HAGIN

APPLICANT'S COMPLETE ADDRESS 489 JACKSON AVE BRICK NJ. 08723

APPLICANT'S PHONE NUMBER

APPLICANT'S BUSINESS NAME

PRESENT USE OF PROPERTY (check one)

- ☐ Vacant Lot ☒ Single Family Dwelling ☐ Condo or Apartment
☐ Commercial (please describe) _____
☐ Other (please describe) _____

PROPOSED USE OF PROPERTY (check one)

- ☐ Vacant Lot ☒ Single Family Dwelling ☐ Condo or Apartment
☐ Commercial (please describe) _____
☐ Other (please describe) _____

PROPOSED CONSTRUCTION STORAGE SHED AND FENCE

All Dimensions 8' W 10' L 8' HI

Deck or Garage ☐ Attached ☐ Detached

Fence Type CHAIN LINK 2" MESH GREEN VINYL HI 4'

CHECKLIST:

- ☐ All information completed above
☐ Two (2) accurate Survey / Plot Plans containing:
 ☐ all existing and proposed structures
 ☐ all dimensions of lot and structures
 ☐ set backs to all property lines
 ☐ all streets and waterways shown
☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

Signature of Applicant

[Signature]

Date

June 24, 1998

Reviewed by Zoning Officer

Date

7/1/98

☒ Approved

☐ Rejected

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



Joseph C. Scarpelli, Mayor

Township Council:

Mary Lou Powner, President
Stephen C. Acropolis
Victor Cantillo
Helen Fayad
Lee Hartman
Thomas G. Maionine
Michael A. Thulen

Department of Engineering

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

DATE: June 24, 1998

Municipal Engineer
401 Chambers Bridge Road
Brick NJ 08723

RE: Block: 530 Lot: 1

Dear Sir;

I, FREDERICK G. HAGIN of 489 JACKSON AVE, BRICK
(Name) (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

[Signature]
Applicant's signature

732-920-6022
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

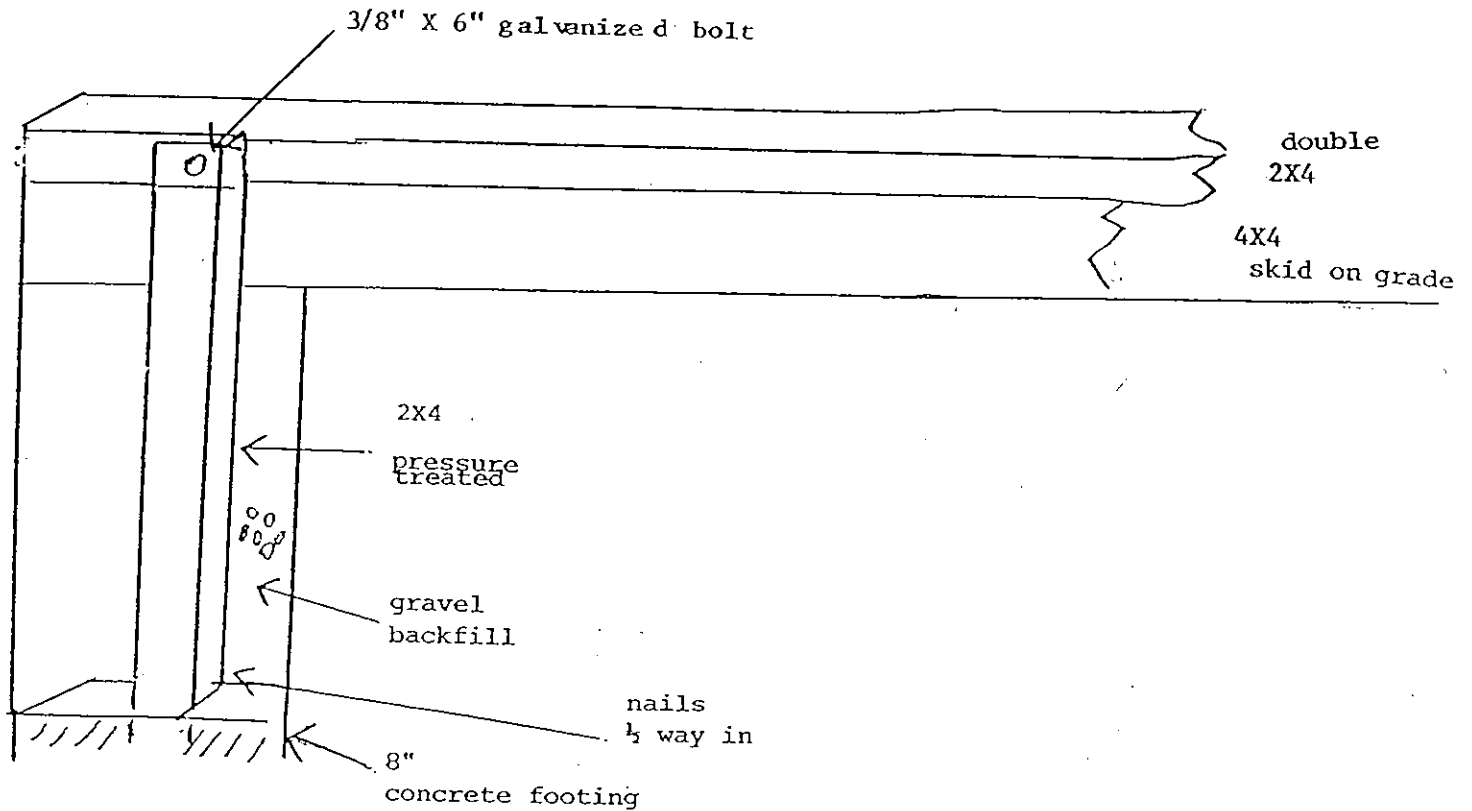
Approved X DATE: 7/2/98 BY: [Signature]

Rejected DATE: _____ BY: _____

REMARKS: _____

SHED ANCHORING METHOD

(not to scale)



ANCHORING METHOD

Shed is anchored to earth at all four corners using vertical pressure treated 2X4, lag bolted to floor framing, buried in a hole 32" deep.

ALTERNATE METHOD

4 - 36" ground augers attached to floor framing with continuous 1/2" cable through eye bolts lagged into floor framing.

BRICK TOWNSHIP

Plan Review

Class *Spec + fence*

Date *7/11/98*

BN SC

Zoning *7-6-CG PM*

Plumbing

Building

Fire

Energy

Electrical

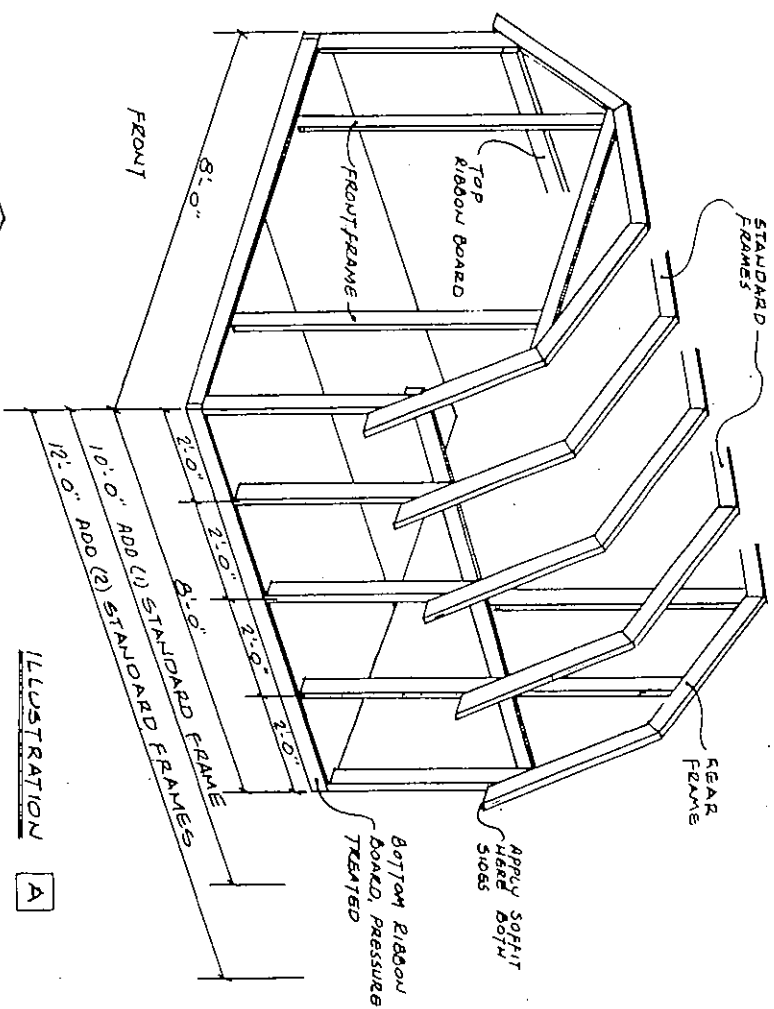
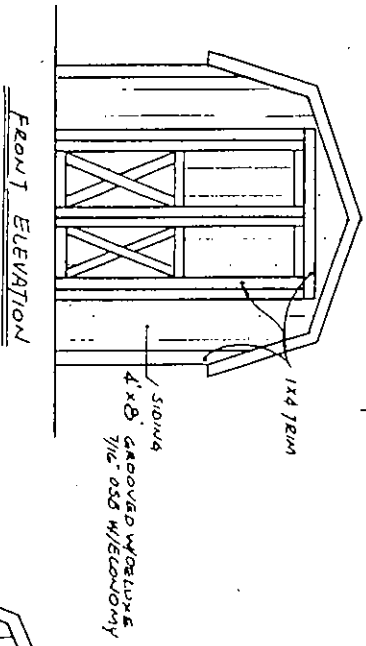
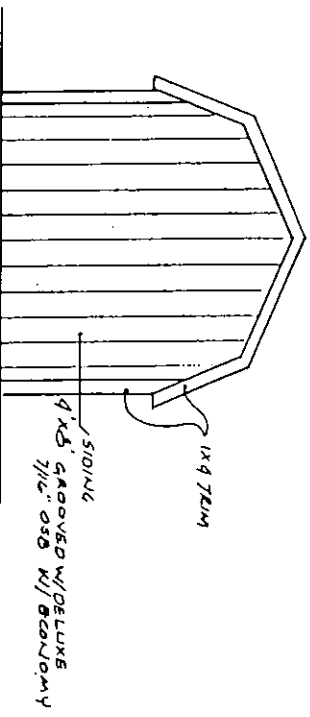


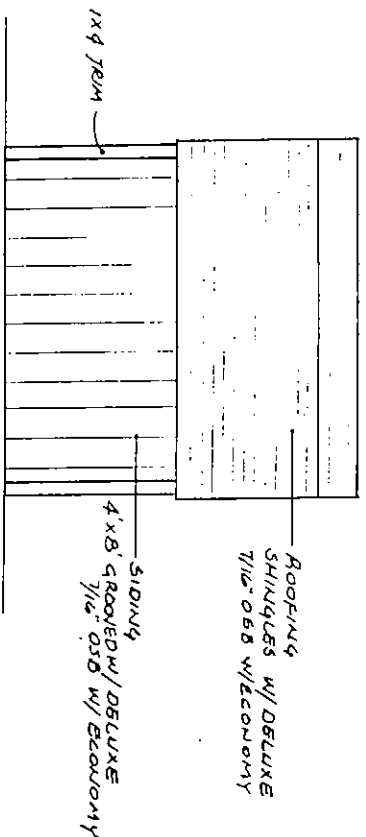
ILLUSTRATION A



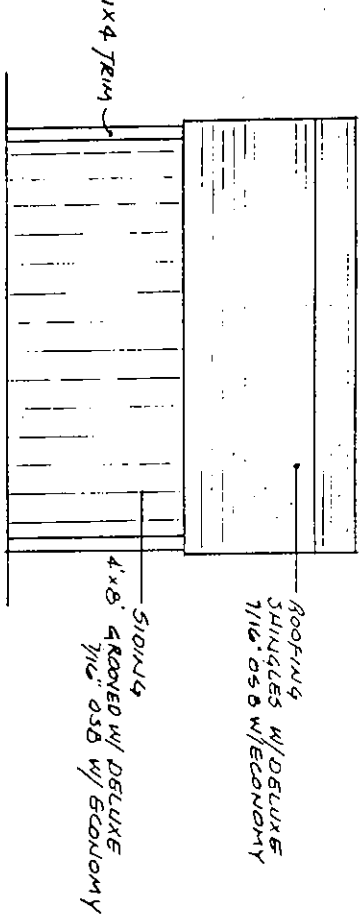
FRONT ELEVATION



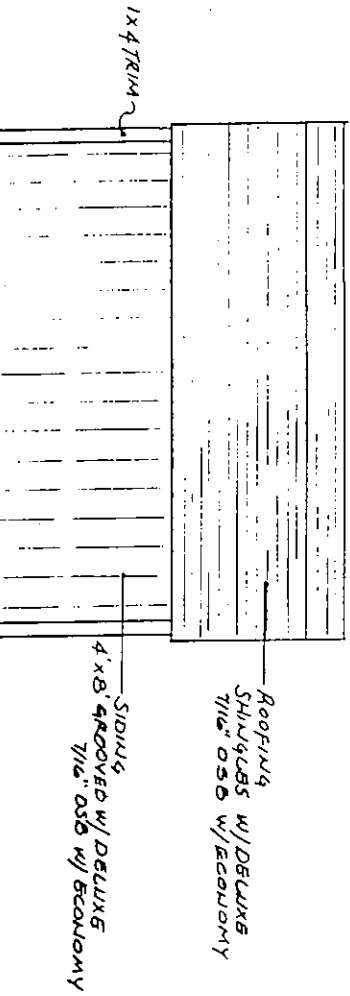
REAR ELEVATION



SIDE ELEVATION



SIDE ELEVATION



SIDE ELEVATION

BRICK TOWNSHIP

b:

Plan Review Class Date 9/11/98 NC

Zoning Shed + fence

plumbing 2-6-98 FM

Building _____

Fire _____

Energy _____

Electrical _____



Моген

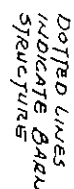


ILLUSTRATION G FRONT SIDING

NOTE:
TEMPORARILY JACK NAIL
SHEATHING TO FRAME.
DRAW GUIDELINES ALONG
ROOF SHEATHING @
DOTTED LINES.
DRAW GUIDELINES @ TOP
AND SIDES OF DOOR
FRAMING.
REMOVE SHEATHING, AND
MEASURE UP IT FROM
GUIDELINES @ TOP OF DOOR
DRAW GUIDELINES, CUT
SHEATHING TO NEW
GUIDELINE

BRICK TOWNSHIP

Plan Review

Class

Date

By

Zoning Mod & Lore

7/1/98

SR

Plumbing

Building

7-6-98

PM

Fire

Energy

Electrical

2 notch

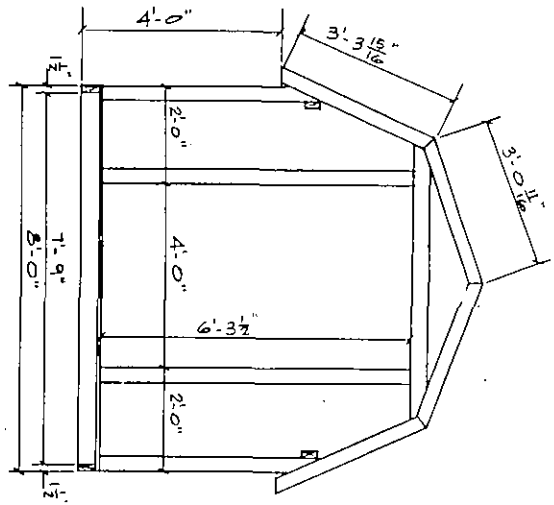


ILLUSTRATION D FRONT FRAME

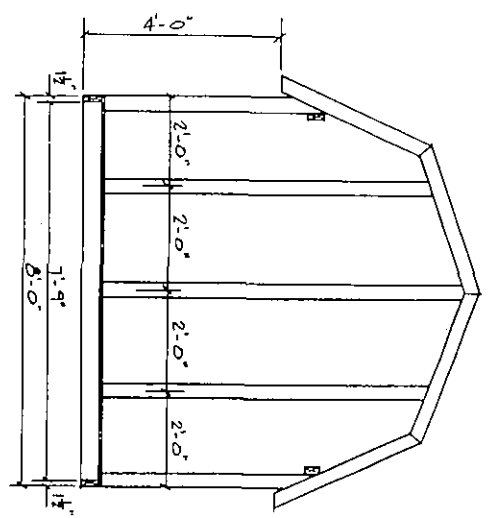
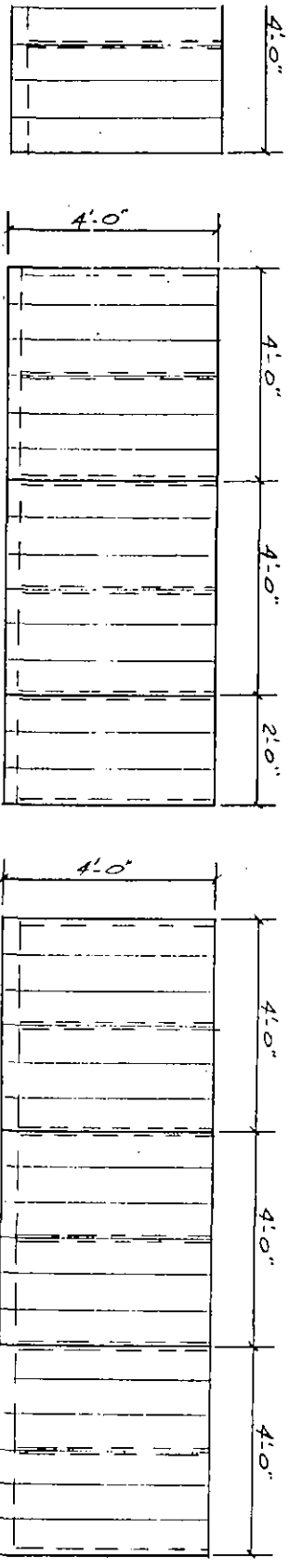
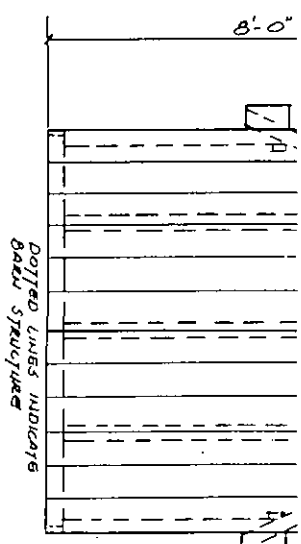


ILLUSTRATION E REAR FRAME



EATHING LAYOUT (LEFT AND RIGHT ELEVATIONS)



Note: TEMPORARILY TACK NAIL SHEATHING TO FRAME. DRAW GUIDELINES ALONG ROOF SHEATHING AT DOTTED LINES

ILLUSTRATION H REAR SIDING

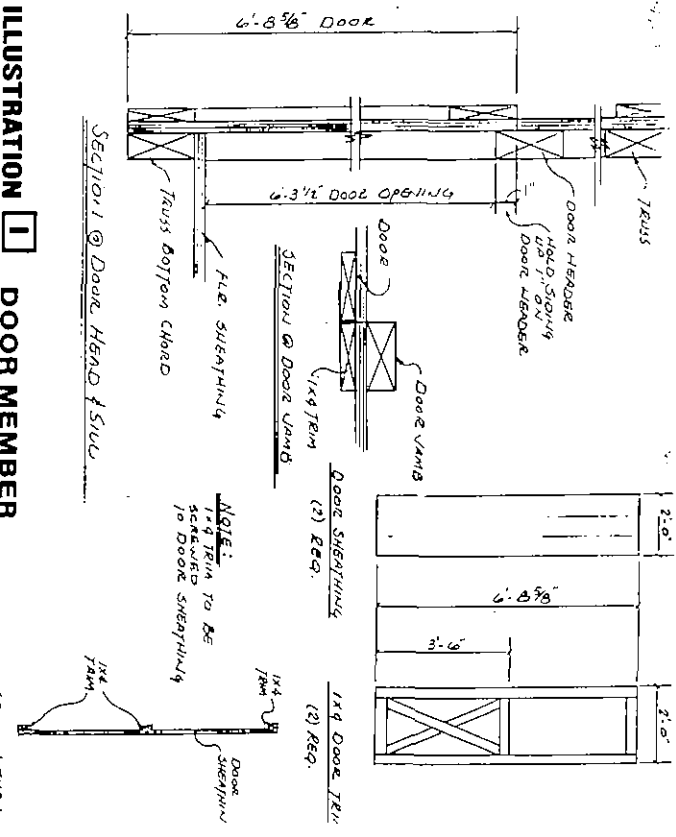
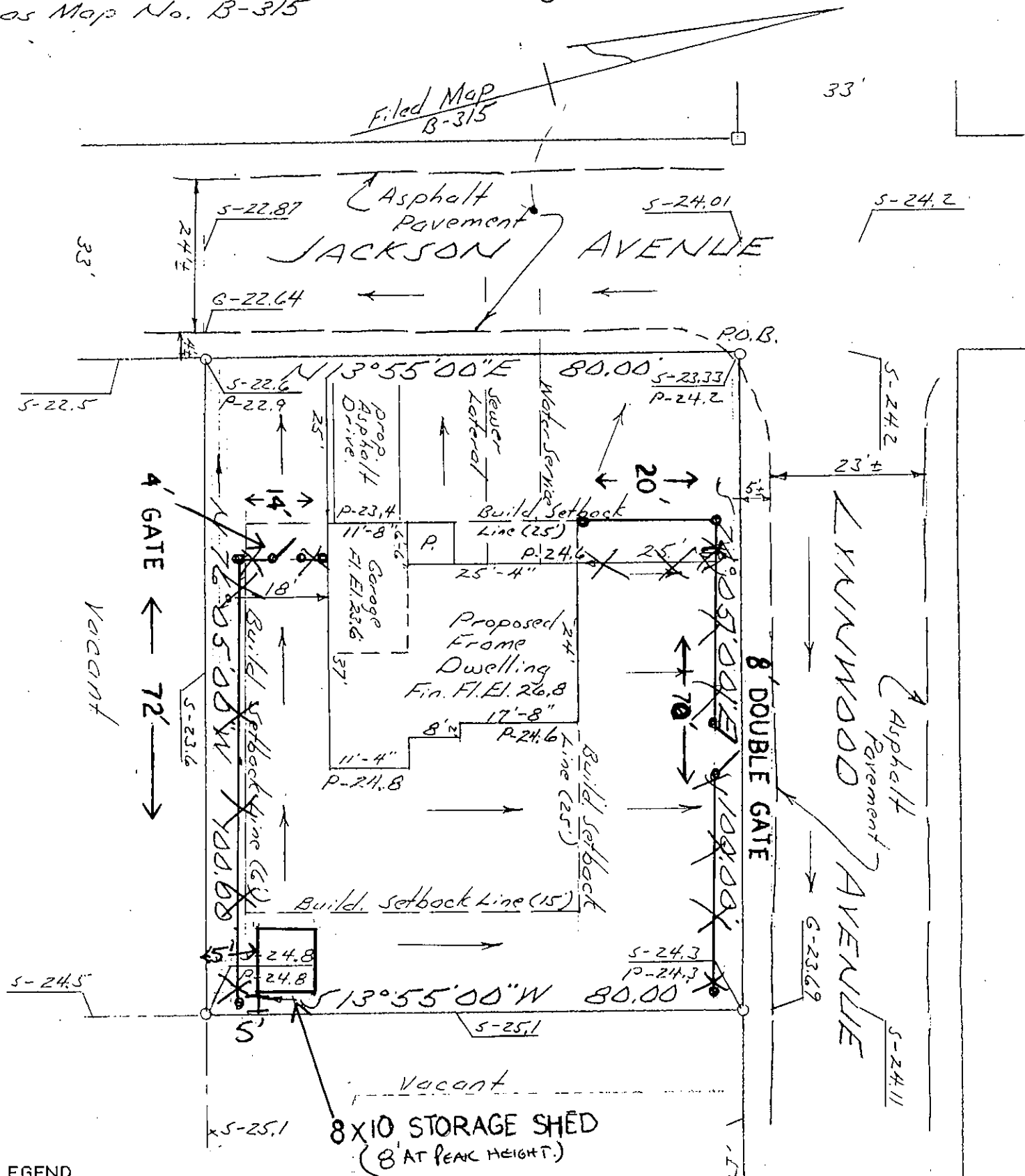


ILLUSTRATION I DOOR MEMBER

Plan Review	BRICK TOWNSHIP
Zoning	Class
Plumbing	Date 7/11/98
Building	9-6-98 PM
Fire	
Energy	
Electrical	

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



LEGEND

S-00.0 = Spot Elevation
P-00.0 = Proposed Fin. Gr
T.C.-00.0 = Top of Curb Grad.
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.

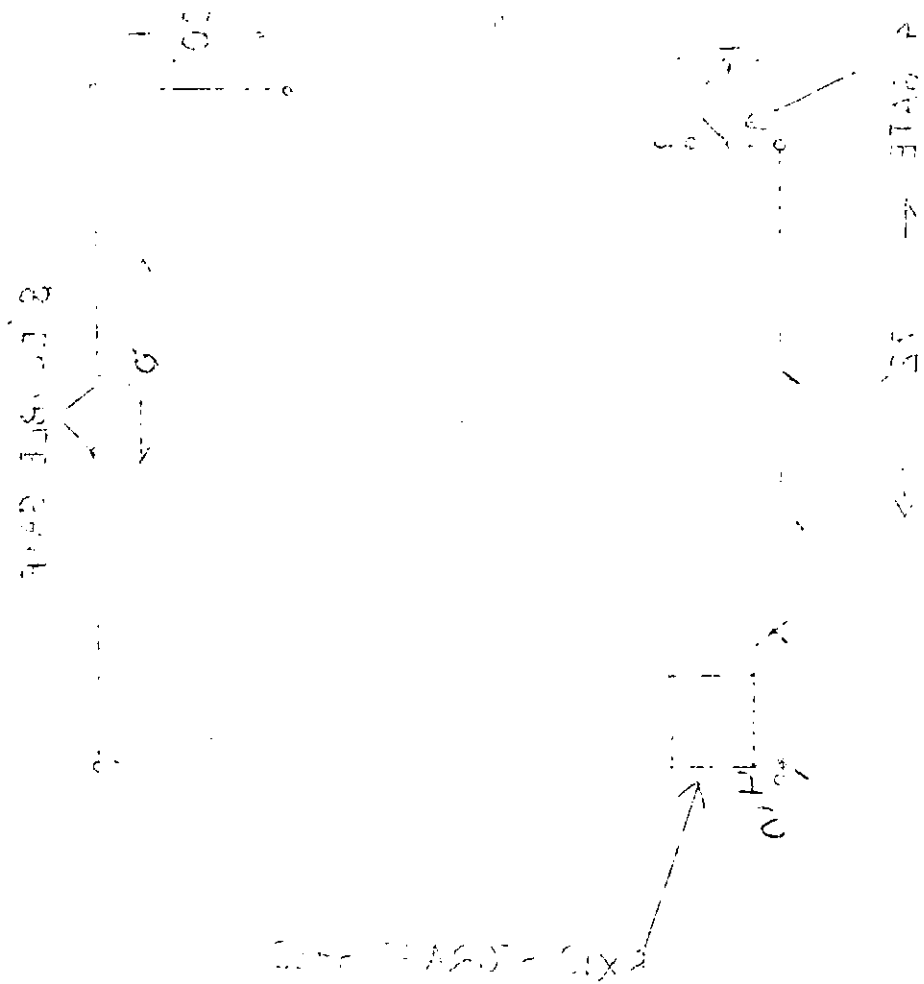
ENGINEERING AND SURVEYING
1119 ARNOLD AVENUE
POINT PLEASANT BORO, N.J.

Elbert Morris
Lic. L.S. No. 8509

Charles W. Glasgow
Lic. P.E. & L.S. No. 9075

MAP No. 2-2687

BOOK
93-056



APPROVED FOR ZONING ONLY
DEAN KINNEVY, ZONING OFFICER
DATE July 1, 1998
Dean Kinney - shed + fence