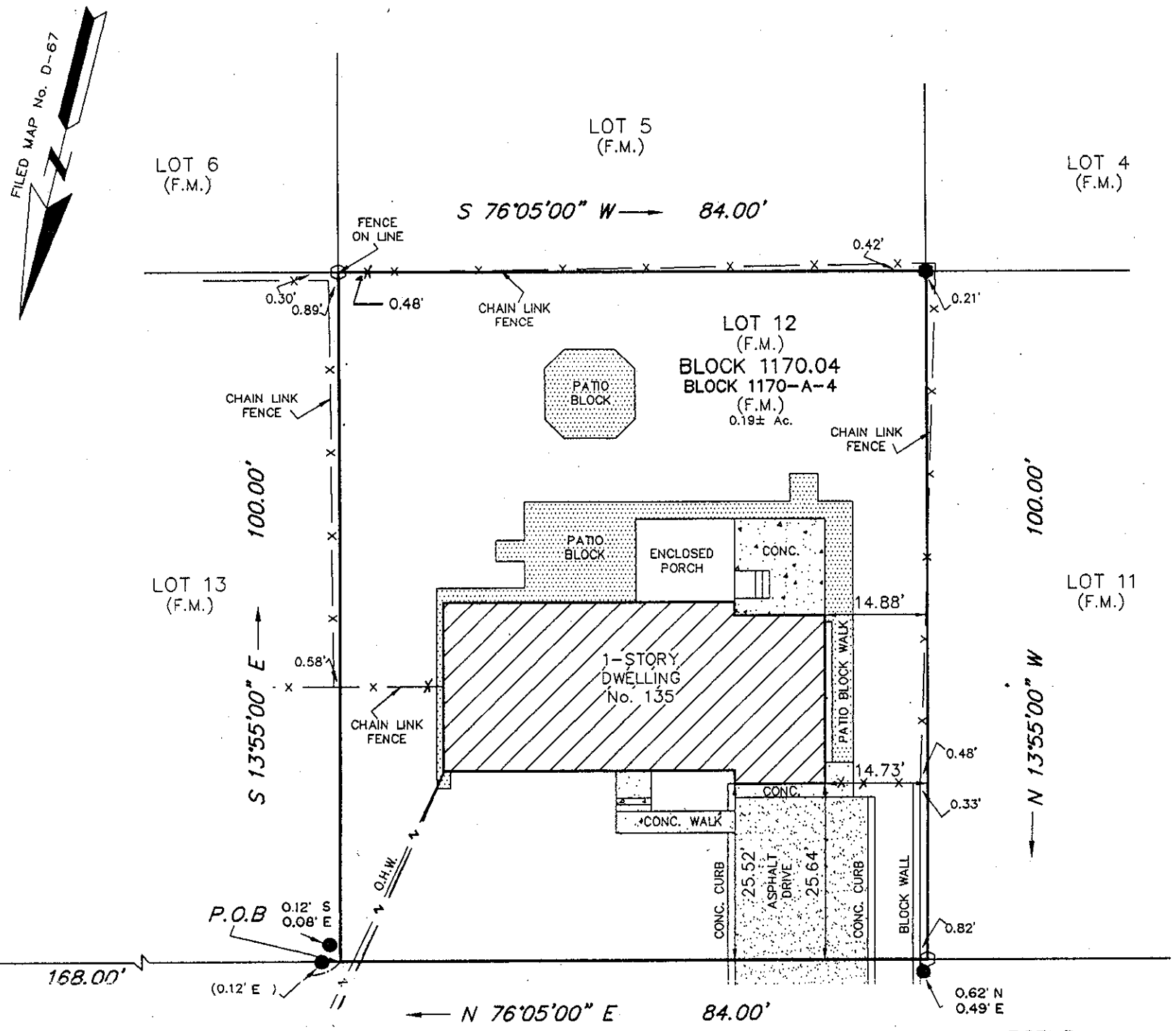
NOTE: NO ATTEMPT WAS MADE OR LIABILITY IS ASSUMED TO DETERMINE IF ANY PORTION OF THIS PROPERTY IS CLAIMED BY THE STATE OF NEW JERSEY AS TIDELANDS. ENVIRONMENTALLY SENSITIVE AREAS ARE NOT LOCATED BY THIS SURVEY.

THIS SURVEY IS SUBJECT TO CONDITIONS WHICH AN ACCURATE TITLE SEARCH MIGHT DISCLOSE.



LEGEND:
- ⬢ – REBAR FOUND
- ● – PIPE FOUND
- ⬡ – REBAR SET

THIS SURVEY IS CERTIFIED TO:

NICHOLAS CARDINALE AND LAURA CARDINALE, H/W

K. HOVNANIAN MORTGAGE INC., ITS SUCCESSORS AND/OR ASSIGNS

MID-STATE ABSTRACT COMPANY(MS-98060)
FIRST AMERICAN TITLE INSURANCE COMPANY

H. ALTON NEFF, ESQUIRE

DEED DESCRIPTION:
BEING KNOWN AS LOT 12 IN BLOCK 1170-A-4 AS SHOWN ON A MAP ENTITLED, "LAUREL ACRES, BRICK TOWNSHIP, OCEAN COUNTY, N.J.," WHICH MAP WAS DULY FILED IN THE OCEAN COUNTY CLERK'S OFFICE ON JULY 2, 1957 AS MAP No. D-67

ALSO KNOWN AS LOT 12 IN BLOCK 1170.04 AS SHOWN ON THE OFFICIAL TAX MAPS OF THE TOWNSHIP OF BRICK, OCEAN COUNTY NEW JERSEY.

APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
JUN 30 2008

DEED REFERENCE: DB 5264-139

"TO ANY INSUROR OF TITLE RELYING HEREON AND ANY OTHER PARTY IN INTEREST," IN CONSIDERATION OF THE FEE PAID FOR MAKING THIS SURVEY, I HEREBY CERTIFY TO ITS ACCURACY (EXCEPT SUCH EASEMENTS, IF ANY, THAT MAY BE LOCATED BELOW THE SURFACE OF THE LANDS OR ON THE SURFACE OF THE LANDS THAT ARE NOT VISIBLE) AS AN INDUCEMENT FOR ANY INSUROR OF TITLE TO INSURE THE TITLE TO THE LANDS AND PREMISES SHOWN HEREON. THIS RESPONSIBILITY LIMITED TO THE CURRENT MATTER AS OF THE DATE OF THIS SURVEY.

OFFSETS AS SHOWN HEREON ARE NOT TO BE USED AS A BASIS FOR CONSTRUCTION OF FENCES OR OTHER PERMANENT STRUCTURES.

DATE	REVISIONS

PLAN OF SURVEY

SITUATE

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

BLOCK 1170.04 LOT 12

10/23/97
DATE

FRANK J. ERNST
PROFESSIONAL LAND SURVEYOR N.J. LIC. NO. 28308
PROFESSIONAL PLANNER NO. 2864

SENECA SURVEY CO., INC.
SURVEYORS & PLANNERS
387 HERBERTSVILLE ROAD
BRICK, NEW JERSEY 08724
(908)206-0566

Date: 10-23-97	Drawn by: S.L.M.
Scale: 1" = 20'	Proj. No.: 97-10366

BLOCK 1170.04 LOT 12 QUALIFICATION CODE _____ ADDRESS (SITE) 135 WALTER RD. PERMIT NO. 08-2266

CONSTRUCTION PERMIT APPLICATION 08-003187

Left message called 7/17/08

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

I. IDENTIFICATION

1. Proposed Work Site at: 135 WALTER RD.
2. Name of Owner in Fee: N. CARDINALE
   Tel. (732) 840-4628 e-mail _____
   Address 135 (street) WALTER RD BRICK (municipality), N.J. 08723 (zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Joseph S. Fiumara Blg. Inc Tel. (732) 269-4472
   Address 23 Cove Road West e-mail _____
   Bayville, NJ. 08721
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH00189800
   Federal Emp. ID No. 222-948-160/000 FAX: (732) 269-4472
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. (____) _____ FAX: (____) _____
6. Responsible Person in Charge once Work has Begun Joseph Fiumara
   Tel. (Cell 848-992-0838 FAX: (732) 269-4472

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 12		
2. Electrical	45		
3. Plumbing	30	40	
4. Fire Protection	10830		
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$ 6		
9. State Permit Surcharge Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other ZA	35		
13. TOTAL	$ 228	40	

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	1	
2. Height of Structure	19' ft.	
3. Area — Largest Floor	1200 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 ____		

IIa. PROPOSED WORK

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

IIb. SUBCODES

(Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☒ Building	3,000		6/30/08		7-7-08		12-F-08		
☒ Electrical	850.00			7/7/08			11-21-08		
☒ Plumbing	5200.00				7.8.08		12-3-08		
☐ Fire Protection					AFF	Housing Pd			
☐ Elevator			7/7/08		7/7/08				
TOTAL COST	9050								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use: _____
2. Use Group, Proposed: R-5
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 _____

III. PLAN REVIEW (optional)

DO YOU WANT:
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
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks

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.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.

X Signature Laura Cardinale Date 6/17/08

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 Joseph S. Fiumara Builder Inc.

Address 73 Cove Road West
Bayville, NJ 08721

Telephone (732) 269. 4472

Signature J. S. Fiumara

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

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

□ Zoning Application deemed complete Initialed: _____ Date: _____

□ Zoning Application approved Initialed: _____ Date: _____

□ Zoning permit updates:

_____

_____

_____

IMPORTANT

A.H.B.T. - MANDATORY FEE - RESIDENTIAL

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. _____	_____	_____	_____	_____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 12/17/2008
Control Number C-08-003187
Permit Number 08-2266
Permit Issue Date 07/25/2008
Certificate Number 08-2266

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 135 WALTER RD. Brick Township, NJ Block: 1170.04 Lot: 12 Qual:

Owner in Fee: CARDINALE, NICHOLAS & LAURA

Owner Address: 135 WALTER RD BRICK NJ 08724

Telephone: (732) 840-4628

Contractor JOSEPH S FIUMARA BUILDER INC

Address 23 COVVE ROAD WEST BAYVILLE NJ 08721-

Telephone: (732) 269-4472 Fax:

License Number or Builders Registration Number: 13VH00189800 Federal Emp. Number: 22-2294810

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: FINISH BASEMENT BASEMENT BATHROOM

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:

Date Printed: 12/17/2008 U.C.C. F260 (rev. 08/05)

PERMIT UPDATE

Date Update Issued 8/19/2008
Control # C-08-003995
Permit # 08-2266+A

IDENTIFICATION Block: 1170.04 Lot: 12 Qualifier

Work Site Location: 135 WALTER RD. Brick Township, NJ

Owner in Fee: CARDINALE, NICHOLAS & LAURA
135 WALTER RD BRICK NJ 08724

Telephone: (732) 840-4628

Contractor: JOSEPH S FIUMARA BUILDER INC
Address: 23 COVVE ROAD WEST BAYVILLE NJ 08721-

Telephone: (732) 269-4472
Lic. No. or Bldrs. Reg. No. 13VH00189800
Federal Employee. No. 22-2294810

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:

PLUMBING ALTERATIONS SINK AND WASHING MACHINE

Note: If constuction 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 $150

Construction Official _____ Date _____

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$40
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$0
CO Fee	
Other	$0
Total	$40
Check No.	679
Cash	$0
Credit	$0
Collected By	Inspection Account

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

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.

CONSTRUCTION PERMIT

Date Issued 07/25/2008
Control # C-08-003187
Permit # 08-2266

IDENTIFICATION Block: 1170.04 Lot: 12 Qualifier
Work Site Location: 135 WALTER RD. Brick Township, NJ
Owner in Fee CARDINALE, NICHOLAS & LAURA
135 WALTER RD BRICK NJ 08724
Telephone: (732) 840-4628

Contractor JOSEPH S FIUMARA BUILDER INC
Address 23 COVVE ROAD WEST BAYVILLE NJ 08721-
Telephone: (732) 269-4472
Lic. No. or Bldrs. Reg. No. 13VH00189800
Federal Employee. No. 22-2294810

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
FINISH BASEMENT BASEMENT BATHROOM

Note: If constuction 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 $4,725

Construction Official _____ Date _____

PAYMENTS (Office Use Only)

Building	$72
Electrical	$40
Plumbing	$80
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$6
CO Fee	
Other	$30
Total	$228
Check No.	10830
Cash	$0
Credit	$0
Collected By	Stephanie Capozzi

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

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.

8' w of 70
30 KW
FEEDBACK

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 7/25/08
Permit # 08-2266

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

Block 1170.04 Lot 12 Qualification Code

Work Site Location 135 Walton Rd
Brick, NJ. 08721

Owner in Fee N. CARDINALE

Address SAME

Tel (732) 840-4628

Contractor Edward M. Lynch

Address 1878 Greenwood Rd.
Toms River, NJ.

Tel (732) 255 3203 FAX ( )

Contractor License No. 5159B

Federal Emp. No. 222074269

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed ADD BATH

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 725.00

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.

Edward M Lynch

Applicant's Signature/Contractor's Seal and Signature

[✓] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
3		Lighting Fixtures	
3		Receptacles	
4		Switches	
		Detectors	
		Light Poles	
1	Bath Fan	Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
10		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved

Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA

Date: 11/24/08

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough			9508	✓
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			11/21/08	B
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

24 2<

OFFICE OF AFFORDABLE HOUSING
MANDATORY DEVELOPMENT FEES

BLOCK:	*1170.04*	LOT:	*12*
SITE ADDRESS:	*135 Walter Rd.*		
CONTROL #:	*08-003187*	WORK TYPE:	*Partial Basement conversion*
APPLICANT:	*Joseph S. Fiumara Bldg. Inc*	PHONE #	*732-269-4472*
APPLICANT ADDRESS:	*23 Cove Rd. West*	CITY/STATE/ZIP:	*Bayville, NJ 08721*

MANDATORY DEVELOPER FEES

_X__ Residential is 1% Business Name:
___ Commercial is 2%
___ Waiver Signed for estimated Mandatory Development Fee

The estimated equalized assessed value: Residential $ *2,916.00*
Commercial

07/02/2008
Date

The final equalized assessed value at the above referenced site is: Residential *$4,100.00*
Commercial

12/02/2008
Date

Prel. Fee (Res)	*$14.58*	Final Fee (Res)	*$26.42*
Prel. Fee (Comm)	*$0.00*	Final Fee (Comm)	$ -
Waiver Fee(Res. Only)			
Check #	*10815*	Check #	*10941*
Date Paid	*07/07/2008*	Date Paid	*12/15/2008*
Paid by	*Cont.*	Paid by	*Cont.*

Total Fee Paid (Res) $ *41.00*
Total Fee Paid (Com) $ -

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

Authorized Signature – Township of Brick

PLUMBING SUBCODE
TECHNICAL SECTION

~~BERKELEY TOWNSHIP~~
~~P.O. Box B~~
~~Bayville, NJ 08721~~

Date Received
Control #
Date Issued 7/25/08
Permit # 08-2266

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

Block 1170.04 Lot 12 Qualification Code
Work Site Location 135 WALTER RD. BRICK
Owner in Fee D. CARDINALE
Address 135 WALTER RD. BRICK
Tel (732) 840-4628
Contractor ACH Plumbing Services
Address 400 Corporate Circle Toms River NJ 08755
Tel (732) 244-2880 FAX (732) 244-2889
Contractor License No. 11729
Federal Emp. No. 22-3399071

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work $ 1000 -

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 7-8-08
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 12-2-08
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab			8/12/08	
Rough			9/5/08	
Water				
Sewer				
Fixtures	11/21/08		12/2/08	
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH:

I hereby certify that I am the agent or owner of record and am authorized to make this application, and that the work listed on this application.

Applicant's Signature/Certification's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant
Cris J Schremmer

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
1	Water Closet	
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	
1	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
1	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	

3/4"

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

8/12/08

① - UPDATE FOR W/M - LAUNDRY TUB

11/21/08

① - HIGH WATER ALARM

Update 8/15/08

PLUMBING SUBCODE
TECHNICAL SECTION

~~BERKELEY TOWNSHIP~~
~~P.O. Box B~~
~~Bayville, NJ 08721~~

Date Received
Control #

08-2266 + A

Date Issued
Permit #

8/19/08

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

Block 1170.04 Lot 12 Qualification Code

Work Site Location 135 WALTER RD.
BRICK NJ 08723

Owner in Fee CARDINALE

Address 135 WALTER RD.
BRICK NJ. 08723

Tel (732) 840-4628

Contractor ACH Plumbing Services

Address 400 Corporate Circle
Toms River NJ 08755

Tel (732) 244-2880 FAX (732) 244-2889

Contractor License No. 11729

Federal Emp. No. 22-3399071

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 150 -

8/18/08

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date 8/18/08

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				

Called

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.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

Cris J. Schremmer

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
X	Sink	
	Dishwasher	
	Drinking Fountain	
X	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	

Administrative Surcharge	$ 40
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$ 40

U.C.C. F130
(rev. 01/04)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 7/25/08
Permit # 08-2266

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

Block 1170.04 Lot 12 Qualification Code

Work Site Location 135 Walton Rd. Brick, NJ. 08721

Owner in Fee: N. CARDINALE

Tel. (732) 840-4628 e-mail

Address SAME
street municipality zip code

Contractor Joseph S. Fiumara Builder Inc. Tel. (732) 269-4472

Address 23 Cove Road West e-mail
Bayville, NJ. 08721

Contractor License No. or Builder Registration No. 13VH00189800 Exp. Date 12/31/2008

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

Federal Emp. ID No. 222-948-160/000 FAX: (732) 269-4472

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 Joseph S. Fiumara

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Basement Bathroom

☒ see Plans—

Area under stairs must be sheetrocked completely FM

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[X] No Plans Required		
[ ] All	7-7-08	FM
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 12-1-08
Approved by: FM

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame			*9/5/08	M
Truss Sys./Bracing				
Barrier-Free				
Insulation			9/12/08	MV
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free			11/21/08	

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [X] Other Basement Bathroom
- [ ] Demolition

FEE (Office Use Only)

$

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

B. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed
No. of Stories 1
Height of Structure 19' ft.
Area — Largest Floor 1200 sq. ft.
New Bldg. Area/All Floors sq. ft.
Volume of New Structure cu. ft.
Max. Live Load
Max. Occupancy Load

Constr. Class Present Proposed

If Industrialized Building:
State Approved HUD

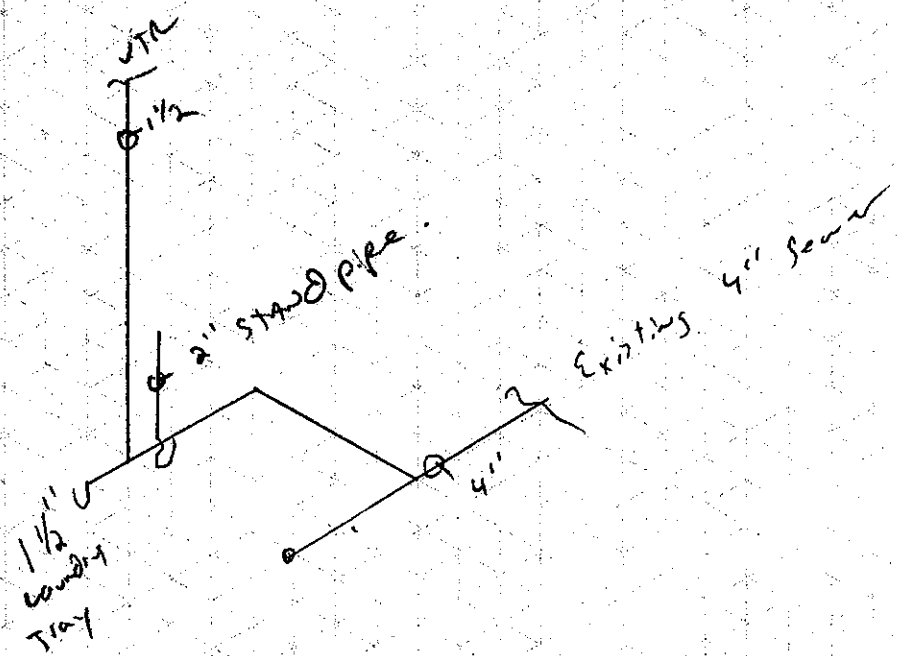
Est. Cost of Bldg. Work:
1. New Bldg. $ 3000.—
2. Rehabilitation $
3. Total (1+ 2) $ 3000.—

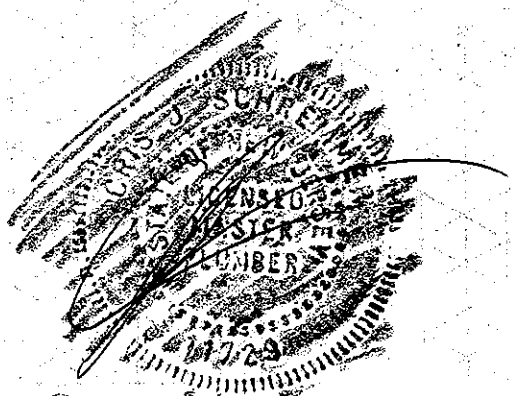
U.C.C. F110
(rev. 12/07)

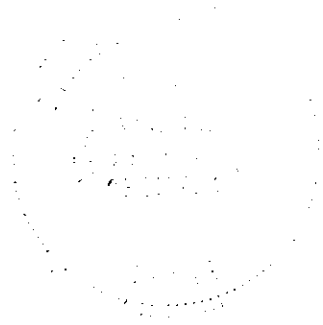
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

9/5/08 ov — Frame App. Chk @ insul
1) Block wall is sealed

ACH Plumbing Services
400 Corporate Circle
Toms River, N.J. 08755
#11729
Fed ID#22-3399071
732-244-2880







Bldg (Elect) Fire Plumbing (Please mark subcode)

CONTROL NUMBER 08 00387

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 135 WATER RD

DATE REVIEWED: 2 12 08

REVIEWED BY: THOMAS OLSEN

CONTACT CALLED/FAXED: CO LYNCH ELE. CONT 255-3203

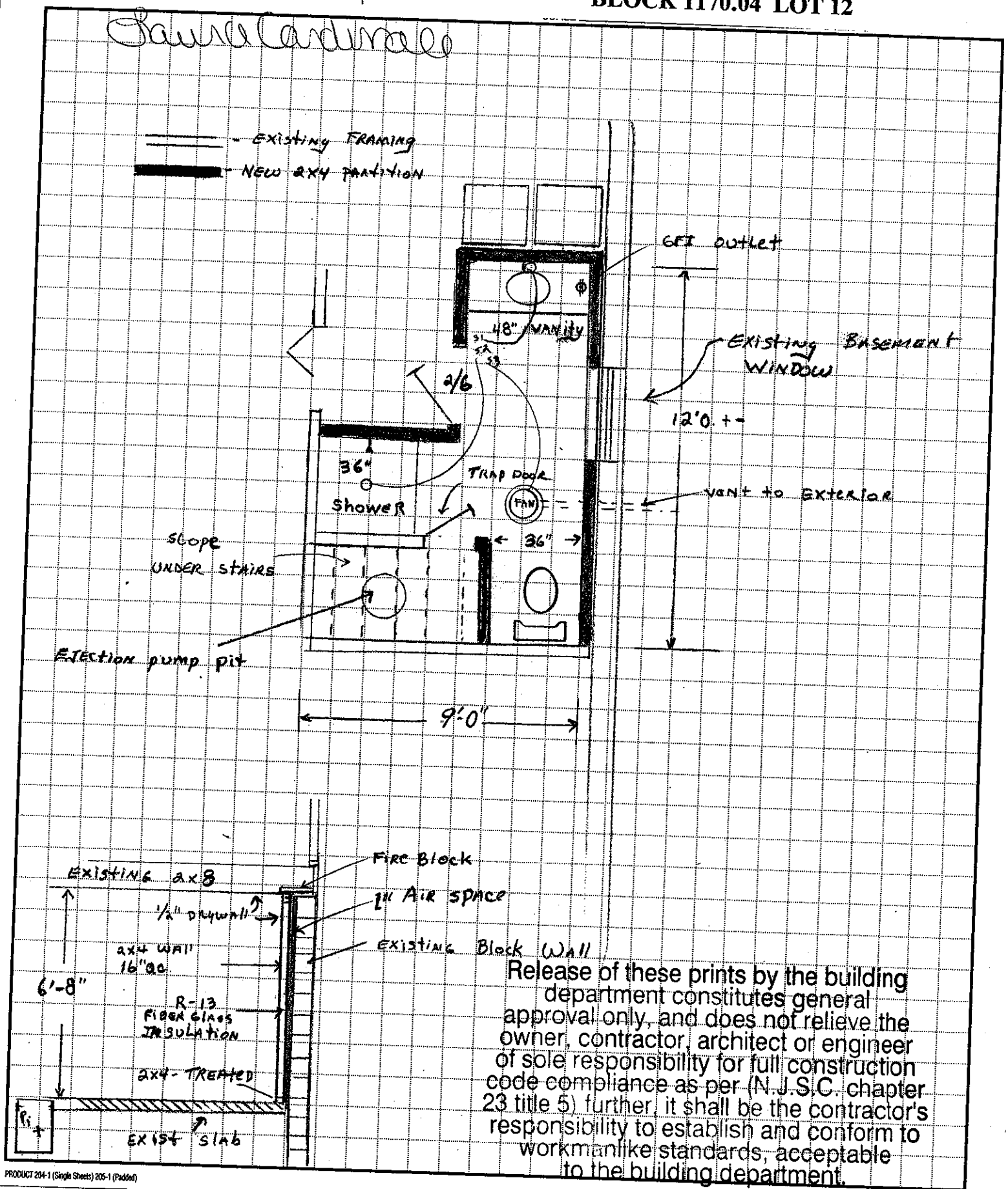
EJECTION PUMP MOTORS

TO BE LISTED ON TECH

MR. & MRS. NICK CARDINALE
135 WALTER RD.
BRICK, N.J. 08723

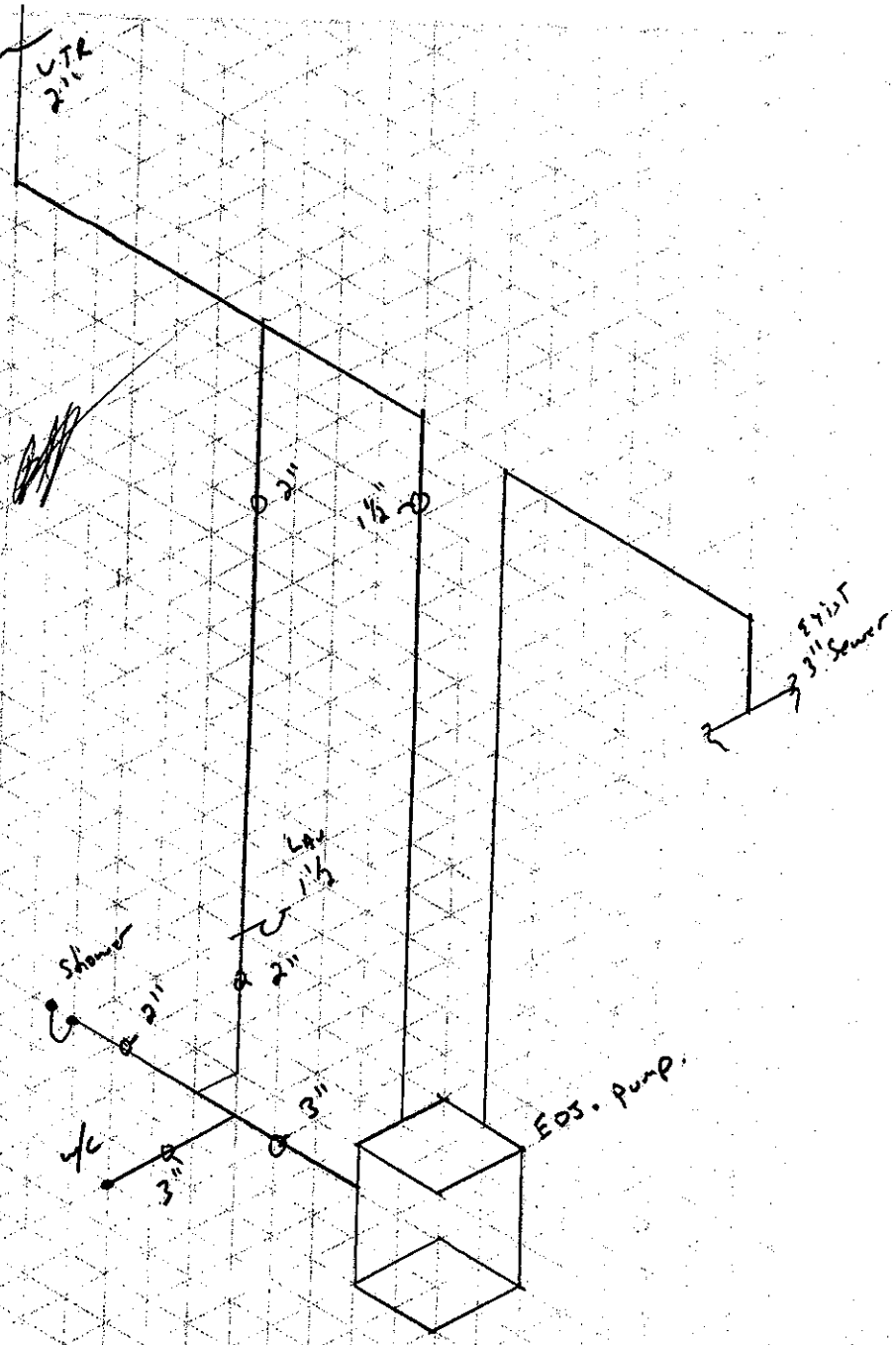
PROPOSED BASEMENT BATHROOM
BLOCK 1170.04 LOT 12

Laura Cardinale

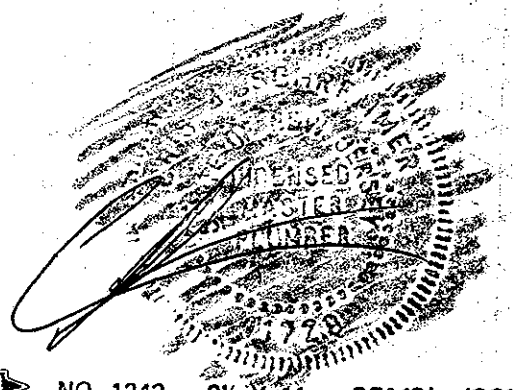


Release of these prints by the building department constitutes general approval only, and does not relieve the owner, contractor, architect or engineer of sole responsibility for full construction code compliance as per (N.J.S.C. chapter 23 title 5) further, it shall be the contractor's responsibility to establish and conform to workmanlike standards, acceptable to the building department.

ACH Plumbing Services
400 Corporate Circle
Toms River, N.J. 08755
#11729
Fed ID#22-3399071
732-244-2880



Bldg 7 8 88



N. CARDINALE

135 walter rd. Block 1170.04 Lot 12

1-full bath
1-kit sink w/dw
2- hosebibs
1-laundry

Existing ¾ plastic waterservice

TOWNSHIP OF BRICK

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

Department of Community Development & Land Use
Division of Engineering

Office of the Municipal Engineer
732-262-1040
Fax: 732-262-8954
www.twp.brick.nj.us

Date:_____

ENGINEERING
PLOT PLAN EXEMPT FORM

Block: 1170, 04 Lot: 12

Property Address: 135 Walter Rd. Brick, N.J. 08723

I, Joseph Fiumara (name) of 23 Cove Rd W Bayville, N.J. 087 (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 190.37, Part B.

J Fiumara
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: 7/7/08 Signed: _____

Rejected on: _____ Signed: _____

Comments:

311 ACCESS BRICK TOWNSHIP

Township of Brick
Zoning Permit

Approved: Monday, June 30, 2008 **Number:** 2008-700

Block 1170.04 **Lot** 12 **Zone:** R-7.5

Property Address: 135 Walter Road

Applicant: Joseph S. Fiumara

Property Owner: Nick Cardinale

Existing Use: Single Family Residential

Proposed Use: Single Family Residential

Proposed Construction: Alteration of a part of the basement area to create a bathroom.

Conditions: An additional zoning permit is required for any additional work.

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

Michael P. Fowler, AICP/PP
Administrative Officer

Sean Kinnevy
Zoning Reviewer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

RECEIVED
JUN 30 2008
ZONING

Applications missing any of the following information will delay processing and may be returned to you.

BLOCK 1170.04 LOT 12 QUALIFIER ____

PROPERTY ADDRESS 135 Walton Rd., Brick, NJ. 08723

PERSONAL NAME OF APPLICANT Joseph S. Fiumara

BUSINESS NAME OF APPLICANT Joseph S. Fiumara Builder, Inc.

MAILING ADDRESS OF APPLICANT 23 Cove Road West Bayville, NJ. 08721

PROPERTY OWNER'S FULL NAME Nick CARDINALE

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-family dwelling
☐ Commercial (please describe) ____

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-dwelling
☐ Commercial (please describe) ____

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) ____
☐ Addition - Height ____ Height ____
☐ Alteration
☐ Porch or deck - Height ____
☐ Shed - Height ____
☐ Fence - Type ____ Height ____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☒ Other (please describe) Basement Bath Room

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.

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 Joseph S. Fiumara Date 6/13/08

Reviewed by Zoning Office ____ Date 6/30/08 (X) Approved ( ) Denied

CA-20

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

Joseph S Fiumara Builder Inc
Joseph S Fiumara
23 Cove Road West
Bayville NJ 08721

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

11/14/2007 TO 12/31/2008
VALID

13VH00189800
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

Lawrence DeMuro
ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED
Joseph S Fiumara Builder Inc
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

11/14/2007 TO 12/31/2008
VALID

13VH00189800
License/Registration/Certificate #

Lawrence DeMuro
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