Gail Smith, PE Township Engineer Phone: (908) 359-8211 Fax: (908) 359-2006



Municipal Building 2261 Van Horn Road (Route 206) Belle Mead, NJ 08502

Engineering Department Information Sheet for Building and Zoning Permit Single Lot Applications

| TO: | Brooke Katzman for | DATE: October 15, 2021 | | | | |
|-------------|---|---|--|--|--|--|
| | Robin Azzam | | | | | |
| | 107 Platz Drive | | | | | |
| | Skillman. NJ 08558 | Permits@nationalpoolsandspas.com | | | | |
| | | Sent VIA: <u>slynneng@yahoo.com</u> | | | | |
| RE: | BLOCK: 21002 LOT: 1 SITE ADDRESS: | 107 Platz Drive, Skillman, New Jersey | | | | |
| | DEVELOPMENT NAME N/A | PHASE/SECTION N/A | | | | |
| | Revised Grading Plan, entitled, | Pool Grading Plan, prepared for Block 21002, Lot 1, situated | | | | |
| | | erset County, New Jersey', prepared by D.S. Engineering, P.C. | | | | |
| | APPROVED PLAN dated on April 21, 2021, last re- | vised on October 14, 2021. | | | | |
| | WORK DESCRIPTION Installation of In-Ground | Pool, Patio, and Fencing (1,830 SF) | | | | |
| determ | ngineering Department has reviewed the plot plan associated in the plot plan associated in the sections of the Townshill need approvals from other Township departments, state, court | nip Code requiring approval from the Township Engineer. You | | | | |
| Departr | ment, or outside agencies accordingly. | | | | | |
| The fol | llowing apply to your application: (note – 0 | CA: Certificate of Approval, CO: Certificate of Occupancy | | | | |
| \boxtimes | Utility mark-out: required by State Law. The excavator must cal | ll (800) 272-1000. <u>Utility mark-outs are FREE.</u> | | | | |
| \boxtimes | Site Plan changes: field changes require a revised plan approve | d by Engineering before changes are made. | | | | |
| \boxtimes | Inspections: all drainage, grading, driveway, or other site work without proper inspections may result in removal and reinstalla us. | | | | | |
| | Soil Erosion and Sediment Control: public and private roadwar | ys, streams, and neighboring lands must be kept clear and | | | | |
| \boxtimes | clean. Soil deposits must be removed immediately. Soil erosion and sediment control measures must be installed before | | | | | |
| | any land disturbance begins and maintained throughout constru | | | | | |
| | Soil Hauling or Soil Disturbance Permit: application required if disturbed. Soil hauling greater than 20 cubic yards requires Plan | • | | | | |
| \boxtimes | Soil Disturbance A-2 Permit #SSR-21-77; 4,890 SF of disturbance permitted for the above work. Any additional | | | | | |
| | disturbance will require review from the Somerset-Union Soil Conservation District (SUSCD) | | | | | |
| | No Soil Hauling permitted for the described work. Any soil hauling (import to or export from the property) will | | | | | |
| | require the submission of a Soil Hauling Authorization Form. See note #10 on the approved revised plan. | | | | | |
| | Damage to Township sidewalk, curbing, or infrastructure: Acce | ess to location must be from existing driveway. | | | | |
| | Construction equipment shall access site through driveway whe | | | | | |
| | Township infrastructure is not permitted unless approved by Road Opening Permit. Fees, guarantees, and inspections | | | | | |
| | required. Damaged public infrastructure shall be replaced by th | | | | | |
| | should be taken by applicant and submitted to Township Engine | er before work begins. | | | | |

Failure to adhere to approved plans, conditions of your approval, the requirements listing herein, or the Township Code will prevent or delay the issuance of a temporary or final CA or CO. Noncompliance may result in a **Stop Work Order and/or enforcement. Use of improvements without a temporary or final Certificate is unlawful.**

Final As-Built Survey and/or Professional Certification(s) (e.g. grading, stormwater, critical area, etc.):

shall be provided for final inspection at time CA or CO is requested.

 \boxtimes

| MONTGOMERY TOWNSHIP ZONING PERMIT APPLICATION | Township Use Only AMOUNT PAID \$ 00 100 100 100 100 100 100 100 100 10 |
|---|--|
| WORKSITE: | CASH_or CHECK # 13752 DATE 6/21/2011 |
| Block 2\00Z Lot \ | Zoning District |
| Street Address 107 Platz Dr | : Skilmon, NJ, 08558 |
| Property Owner Robin Azzam | |
| Mailing Address (if different) | CityState Zip Code |
| Daytime PhoneFax_ | Email |
| APPLICANT (if not owner): | |
| | D Tenant Other |
| Address 2495 Bruswick Pikeity K | State NJ Zip Code 08648 |
| Contact Person Brooke Katzman | |
| Daytime Phone 69-583-4542 Fax | 69-587-4489 Email Permits @ and spas. con |
| TYPE OF PERMIT REQUESTED (CHECK ALIMNew Construction Deck Addition/Alteration Pool/Spa/Hot Tub Accessory Building Lot Coverage (Shed, Garage, etc.) (Patio, Driveway, etc.) Description of Project/Use (please be specific): | Fence Sign Change Tenant/Use Other - (Commercial) Demolition - No Tenant Fit-Out Charge |
| Commercial Change of Tenant/Use: Previous Tena | antExisting Use |
| New Tenant | New Use Sq. Ft. |
| CERTIFICATION: I hereby certify that I am either the legal property of make this application. I understand that if any of the subject to penalties. | And the second s |
| AUDIT AZZAN | 31/21 Township Use Only |
| Owner's Name Printed & Signature Date Scoole Katzman 3/ Applicant's Name Printed & Signature Date | 31/21 1 1/1/1001 |

| 4. Health Department – Review Date 6 | 30/21 | | lk: ype: | 102 Lot: |
|---|-----------|--------------|-------------|--------------------------------|
| The existing <u>septic system</u> will not be encroached | unon all | HD seth | acks wil | The maintained and it is |
| adequately sized for the proposed work. | apon, an | | YE | S NO N/A |
| The existing well will not be encroached upon by | the propo | sed wor | k. YES | o NO (NA public wat |
| APPROVED 7/22/2\ DENIED | Date | | PENDIN | NG |
| Special Requirements: | | | | |
| 101 | | 1 | | |
| The Samould | | 7/2: | 2/21 | |
| Health Department Sign-off Signature of Approval | | Date | 1 | |
| 5. Engineering – Review Date 7/23/2021 | | | | |
| | | | 37/1 | Resolution / Permit No. / etc. |
| Critical Areas / Flood Hazard Area | Yes | No | N/A | |
| Sewer Participation / Capacity Agreement Son Hauling / Disturbance Permit | Yes | No | N/A | C. 114.1.1. 200 01 00 (100) |
| Drivoway Apron | Yes | No | W/A | No SOIL HAULING PERMITTED |
| Road / Driveway Opening Permit | Yes | No | NA | |
| andscape Approval | Yes | No | MA | |
| Limit of Disturbance / SUSCD Approval | Yes | No | MA | |
| Grading Approval | Tes | No | N/A | |
| Stormwater Management | Yes | No | MA | |
| Easements Shown / Respected | Tes | No | N/A | |
| Conservation Easement / Deed Restriction | Yes | No | NTA | bk/pg: |
| Resolution/Developer's Agreement Conditions Satisfied | Yes | No | MA | |
| Other Outside Agency Approvals | Yes | No | MA | |
| Information Sheet Completed | Yes | No | N/A | |
| Eng. Approval Required for CO/CA | Yes | No | | |
| REVIEW LETTER(S) / CONDITIONS (see attached |): | 7/30/21 | 8/25/201 | 1/9/17/2021, 9/24/2021, |
| Malan Marine | | | | |
| Engineering Sign-off Signature of Approval | | 10/15 | /2021 | |
| Engineering Sign-off Signature of Approval | | | Date | |
| 6. Assessor's Office – Review Date | | | | |
| Assessor's Signature of Approval Date | (s | ee worksheel | :) | |
| Assessor's Signature of Approval | | | | |

TOWNSHIP OF MONTGOMERY OFFICE OF THE TOWNSHIP ENGINEER MUNICIPAL BUILDING 2261 U.S. ROUTE 206 BELLE MEAD, NEW JERSEY 08502

Soil Disturbance Permit-Application for Permit A-2 FOR SOIL DISTURBANCE (MORE THAN 1500 SQ. FT.) SOIL EROSION AND SEDIMENT CONTROL AND CRITICAL AREAS

PLAN REVIEW

I.

PERMIT APPLICATION #SSR- 21 - 77

It is the responsibility of the applicant or person responsible for this Permit to contact New Jersey One Call at 1-800-272-1000 to have Utilities marked out prior to digging.

Anticipated Start Date 30 days post approva

(All applications for permits shall be submitted at least (2) two weeks prior to the start date for proper review by the Engineering Department.

| GENERAL DATA | |
|---|--|
| Name of Applicant National Pools | and Spas |
| Address 2495 Brunswick Pik | e |
| City <u>Lawrence ville</u> State | |
| Phone (Office) <u>609-583-4542 × 121</u> | |
| Person responsible for ensuring compliance with | requirements of this permit: |
| Dan Katzman | Phone 609-583-454z x 120 |
| Applicant interest in land (Owner, Purchaser, Ot | |
| Name of Owner (if not applicant) Robin | Azzam |
| Address 107 Platz Dr. | |
| | |
| City Man State | |
| | zip <u>08.558</u> on i.e. fronting on road, nearest intersection, etc.) |
| Address of tract or parcel (Please specify location | |
| Address of tract or parcel (Please specify location | on i.e. fronting on road, nearest intersection, etc.) |
| Address of tract or parcel (Please specify location | on i.e. fronting on road, nearest intersection, etc.) |
| Address of tract or parcel (Please specify location Block 21002 Lot Lot Lot Area of tract or parcel 617018 sc | Tax Map Pagesq. ft |
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