



PERMIT UPDATE

Date Update Issued 2/19/19
Control # C-18-004058+A
Permit # 18-3471+A

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN) Contractor National Maintenance & Buildout
Brick Township, NJ Address 48A Vincent Circle Ivyland PA 18974
Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX Telephone: (215) 442-2538
76092 Lic. No. or Bldrs. Reg. No. 13vh07302100
Telephone: _____ Federal Employee No. 300020638

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:

ALTERATION - COMMERCIAL, VANILLA BOX - FORMER ETHAN ALLEN ...UPDATE +A

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 \$67,000

D. Newman Jr.
Construction Official

2/15/19
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$1,500
Electrical	\$730
Plumbing	\$0
Fire Protection	\$406
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$127
CO Fee	
Other	\$200
Total	\$2,963
Check No.	<u>25912</u>
Cash	\$0
Credit	\$0
Collected By	<u>CW</u>

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.



BUILDING SUBCODE TECHNICAL SECTION



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

Block 617 Lot 1.01 Qualification Code 08723
Work Site Location 56 CHAMBERS BRIDGE ROAD, BRICK NJ

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Tel. (301) 998-8173 e-mail SOUTHLAKE 76092

Address P.O. BOX 92129 SOUTHLAKE 76092

Contractor: NATIONAL MAINTENANCE & BUILD OUT CO Tel. (215) 442-5380 zip code 19002

Address 1044 PULINSKI ROAD e-mail j.kornsey@nmboc.com

IVYLAND, PA 18974

Contractor License No. or Builder Registration No. 13VH07302100 Exp. Date 03/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 300020638 FAX:

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
[] No. Plans Required			Type:	Failure
[] All	<u>01/25/19</u>	<u>JK</u>	Footings	Approval
[] Footings/Foundations			Foundation	Initial
[] Structural/Framework			Slab	
[] Exterior			Frame	
[] Interior			Truss Sys./Bracing	
Joint Plan Review Required:			Barrier-Free	
[] Elec. [] Plumb [] Fire [] Elevator			Insulation	
SUBCODE APPROVAL FOR PERMIT			Finishes -Base Layer	
Date: <u>01/25/19</u>			Finishes -Final	
Approved by: <u>JK</u>			Energy	
SUBCODE APPROVAL FOR CERTIFICATE			Mechanical	
[] CO [] CCO [] CA			TCO	
Date: <u></u>			Other	
Approved by: <u></u>			Final	
			Barrier-Free	

B. BUILDING CHARACTERISTICS

Use Group Present	Proposed	Constr. Class Present	Proposed
No. of Stories <u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>
Height of Structure <u>82</u> ft.	<u>82</u> ft.		
Area — Largest Floor <u>8500</u> sq. ft.	<u>8500</u> sq. ft.		
New Bldg. Area/All Floors <u></u> sq. ft.	<u></u> sq. ft.		
Volume of New Structure <u>130</u> cu. ft.	<u>130</u> cu. ft.		
Max. Live Load <u>7</u>	<u>7</u>		
May Occupancy <u>1</u>	<u>1</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.

Sign here: JOE KORNSEY

Print name here: JOE KORNSEY

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Modded Shell

TYPE OF WORK:

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

FEE (Office Use Only)

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

Date Received
Control #

2/19/19

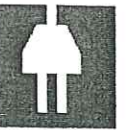
Date Issued
Permit #

18-3471

44



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 671 Lot 1st Qualification Code _____
Work Site Location 56 CHAMBERS BRIDGE ROAD, BRICK NJ 08723

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Tel. (301) 998-8173 e-mail _____

Address P.O. BOX 92129 SOUTHLAKE ZIP code 76092

Contractor: M.J.M. ELECTRIC INC Tel. (732) 223-9732

Address 7 SOUTH TAMARACK DRIVE e-mail mike@mjelectricnj.com
BRIELLE, NJ 08730

Contractor License No. 12715B Exp. Date 3/21

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 22-3485744 FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group M Present _____ Proposed M

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

Building Occupied as _____ Utility Co. SEI

Est. Cost of Elec. Work \$ 15,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)		
		Type	Failure	Failure	Approval	Initial
[] No Plans Required						
[] Partial - Underslab Utilities Approved		Rough				
Date <u>1/24/19</u> Approved by <u>OTC</u>		Barrier-Free				
[] Electric Plans Approved		Trench				
Date <u>1/24/19</u> Approved by <u>OTC</u>		Temp. Serv.				
Joint Plan Review Required:		Constr. Serv.				
[] Bldg. [] Plumb. [] Fire [] Elev.		TCO				
SUBCODE APPROVAL for PERMIT		Other				
Date <u>1/24/19</u> Approved by <u>OTC</u>		Service				
Final		Barrier-Free				
Approved by <u>OTC</u>		Temp. Cut-In-Card Date Issued				
SUBCODE APPROVAL for CERTIFICATE		Final Cut-In-Card Date Issued				
[] CO [] ECO [] CA		Annual Pool Inspection				
Date <u>1/24/19</u>		Date of Grounding and Bonding				
Approved by <u>OTC</u>		Certification				

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 sign/Contractor sign and seal here: Michael J. McKivern

Print name here: Michael J. McKivern

[X] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr [] Exempt Applicar

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	DESCRIPTION OF WORK
		Lighting Fixtures	Interior
		Receptacles	Shell
		Switches	Wiring
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	

0

TOTAL NUMBERS

\$ 15,000

Date Received 2/19/19
Control # 18-3471
Date Issued 18-3471
Permit # 18-3471 + A

Administrative Surcharge \$ 0
Minimum Fee \$ 0
State Permit Surcharge Fee \$ 0



PERMIT UPDATE

Date Update Issued 2/19/19
Control # C-18-004058+B
Permit # 18-3471+B

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN) Contractor National Maintenance & Buildout
Brick Township, NJ Address 48A Vincent Circle Ivyland PA 18974
Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX Telephone: (215) 442-2538
76092 Lic. No. or Bldrs. Reg. No. 13vh07302100
Telephone: _____ Federal Employee No. 300020638

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:

ALTERATION - COMMERCIAL, VANILLA BOX - FORMER ETHAN ALLEN ...UPDATE +B -
ALARMS

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$2,000

D. Newman Jr
Construction Official

2/15/19
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$150
Plumbing	\$0
Fire Protection	\$116
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$4
CO Fee	
Other	\$0
Total	\$270
Check No.	<u>23915</u>
Cash	\$0
Credit	\$0
Collected By	<u>CW</u>

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:

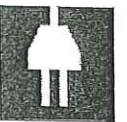
- ☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; 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.



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 671 Lot 1.21 Qualification Code _____
Work Site Location Ethan Allen/Halloween Store - Brick Plaza
110 Brick Plaza Brick, NJ

Owner in Fee: Federal Realty Investment Trust

Tel. (301) 580-0116 e-mail _____

Address 1626 East Jefferson Street Rockville, MD 20852

Contractor: ELECTRONIC SECURITY SOLUTIONS Tel. (215) 277-5248

Address 5115 Campus Drive e-mail tcapie@essfresys.com

Plymouth Meeting, PA 19462

Contractor License No. 34BF000377 Exp. Date 10/31/2019

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 25-189772 FAX: (215) 277-5263

B. ELECTRICAL CHARACTERISTICS

Use, Group Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Estimated of Elec. Work \$ 1,000

C. SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		DATES (Month/Day)	
Item	Approved by	Type	Failure	Approval	Initial
1. ☐ No Plans Required		Rough			
2. ☐ Partial - Under/Slab Utilities Approved		Barrier-Free			
3. ☐ Electric Plans Approved	<u>Specs</u>	Trench			
Date: <u>2/19/19</u> Approved by: <u>PEC</u>		Temp. Serv.			
Joint Plan Review Required:		Const. Serv.			
1. ☐ Bldg. 1. ☐ Plumb. 1. ☐ Fire. 1. ☐ Elev.		TCO			
SUBCODE APPROVAL FOR PERMIT		Other			
Date: <u>2/19/19</u>		Service			
Approved by: <u>PEC</u>		Barrier-Free			
SUBCODE APPROVAL FOR CERTIFICATE		Temp. Cut-In-Card			
1. ☐ CO 1. ☐ CCO 1. ☐ CA		Final Cut-In-Card			
Date: _____		Annual Pool Inspection			
Approved by: _____		Date of Grounding and Bonding			
Certification					

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 sign/Contractor Keith Freeman

sign and seal here: _____

Print name here: Keith Freeman

[] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:	QTY.	SIZE	ITEMS
WIRELESS DIALER			Lighting Fixtures
			Receptacles
			Switches
			Detectors
			Light Poles
			Motors—Fract. HP
			Emergency & Exit Lights
			Communications Points
			Alarm Devices/F.A.C. Panel
			DIALER
			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

DATE RECEIVED 2/19/19
Control # 18-34714B
Date Issued
Permit #

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

U.C.C. F120 (rev. 11/09)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one, original plus three photocopies.

Internal version

RECEIVED

JAN 22 2019



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 691 Lot 1.21 Qualification Code _____

Work Site Location Ethan Allen/Halloween Store - Brick Plaza
110 Brick Plaza Brick, NJ

Owner in Fee: Federal Realty Investment Trust

Tel. (301) 580-0116 e-mail _____

Address 1626 East Jefferson Street Rockville, MD 20852
street municipality zip code

Contractor: ELECTRONIC SECURITY SOLUTIONS Tel. (215) 277-5248
municipality

Address 5115 Campus Drive e-mail tcaple@essfireys.com

Plymouth Meeting, PA 19462

Contractor License No. 34BF000377 Exp. Date 10/31/2019

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 25-189772 FAX: (215) 277-5263

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[] 1 Temporary [] Other _____
[] 2 Under/Pad [] Utility Co. _____
Buried Occupied as _____
Est. Cost of Elec. Work \$ 1,000

C. CERTIFICATION IN LIEU OF OATH

D. TECHNICAL SITE DATA

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 sign/Contractor sign and seal here:

Keith Freeman

Print name here: _____
[] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr' [X] Exempt Applicant

DESCRIPTION OF WORK:
WIRELESS DIALER

QTY. SIZE

ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

DIALER

TOTAL NUMBERS

Pool Permit/with UV 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

JAN 22 2019

RECEIVED

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

FEE (Office Use Only)



PERMIT UPDATE

Date Update Issued _____
Control # C-18-004058+C
Permit # 18-3471+C

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN) Contractor National Maintenance & Buildout
Brick Township, NJ Address 48A Vincent Circle Ivyland PA 18974
Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX Telephone: (215) 442-2538
76092 Lic. No. or Bldrs. Reg. No. 13vh07302100
Telephone: _____ Federal Employee No. 300020638

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:

ALTERATION - COMMERCIAL, VANILLA BOX - FORMER ETHAN ALLEN ...UPDATE +C -
DEMISING WALL TO ENCLOSE LOADING DOCK

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 \$20,000

D. Newman
Construction Official

2/15/19
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$1,000
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$38
CO Fee	
Other	\$0
Total	\$1,038
Check No. <u>12-0000000150043204</u>	
Cash <u>1803 SERU</u>	\$0
Credit <u>1803</u>	\$0
Collected By <u>CHUD CW</u>	\$1,038.00

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.

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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.



BUILDING SUBCODE TECHNICAL SECTION



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

Block 671 Lot 160 Qualification Code RT 70
Work Site Location Chambers Bridge Rd # Rt 70
Brick Plaza Spg 43A (Ernest H. Aiken)
Owner in Fee: Federal Realty Investment Trust
Tel. Neil Cain 267-966-5239 e-mail ncain@federalrealty.com

Address 1044 Pylinski Rd. municipality Jerkinsay zip code 267-966-5239
Contractor: MBAC Beckinsay Tel. 267-966-5239
Address Lucy Lane, PA 18974 e-mail kornseyenmbac.com

Contractor License No. or Builder Registration No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____ FAX: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Failure	Approval	Initial
☐ No Plans Required			Type:	Failure	Approval	Initial	
☐ All			Footings				
☐ Footings/Foundations			Footings Bonding				
☐ Structural/Framework			Foundation				
☐ Exterior			Slab				
☐ Interior			Frame				
Joint Plan Review Required:			Truss Sys./Bracing				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Barrier-Free				
SUBCODE APPROVAL for PERMIT			Insulation				
Date: _____			Finishes -Base Layer				
Approved by: _____			Finishes -Final				
SUBCODE APPROVAL for CERTIFICATE			Energy				
☐ CO ☐ CCO ☐ CA			Mechanical				
Date: _____			TCO				
Approved by: _____			Other				
			Final				
			Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Constr. Class	Present	Proposed
No. of Stories			If Industrialized Building:		
Height of Structure	_____ ft.	_____ ft.	State Approved	_____ HUD	_____
Area — Largest Floor	_____ sq. ft.	_____ sq. ft.	Est. Cost of Bldg. Work:		
New Bldg. Area/All Floors	_____ sq. ft.	_____ sq. ft.	1. New Bldg.	\$ _____	
Volume of New Structure	_____ cu. ft.	_____ cu. ft.	2. Rehabilitation	\$ _____	
Max. Live Load	_____	_____	3. Total (1+2)	\$ _____	
Max. Occupancy Load	_____	_____			

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.

Print name here: Eric Wagner Sign here: [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Submit supplemental plans to revise scope of current permit # 18-3471
Sheets Added: A-3 & A-4

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☒ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence _____ Height (exceeds 6') _____ Sq. Ft.
- ☐ Sign _____ Sq. Ft.
- ☐ Pool
- ☐ Retaining Wall _____ Sq. Ft.
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☐ Other _____
- ☐ Demolition

FEE (Office Use Only)

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



PERMIT UPDATE

Date Update Issued 4/9/19
Control # C-18-004058+D
Permit # 18-3471+D

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN) Contractor National Maintenance & Buildout
Brick Township, NJ Address 48A Vincent Circle Ivyland PA 18974
Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX Telephone: (215) 442-2538
76092 Lic. No. or Bldrs. Reg. No. 13vh07302100
Telephone: _____ Federal Employee. No. 300020638

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:

- FORMER ETHAN ALLEN ...UPDATE +D - ALARM RECONFIGURATION

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 \$9,000

D. Newman
Construction Official

3/8/19
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$150
Plumbing	\$0
Fire Protection	\$116
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$18
CO Fee	\$0
Other	\$0
Total	\$284
Check No.	<u>24000</u>
Cash	\$0
Credit	\$0
Collected By	

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.



FIRE PROTECTION SUBCODE TECHNICAL SECTION



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

Block 671 Lot 1.01 Qualification Code Space 43

Work Site Location Trader Joes Vanilla Box - Brick Plaza Former Ethan Allen

Owner in Fee: Federal Realty

Tel. _____ e-mail _____

Address 50 E. Wynnwood ave. Wynnwood, PA

Contractor: Electronic Security Solutions municipality _____ Tel. (215) 277-5248

Address 5115 Campus Drive e-mail tcapie@essfiresys.com

Plymouth Meeting, PA 19462

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P01299

Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____ Exp. Date 10/31/2019

Home Improvement Contractor Registration No. or Exemption Reason
Federal Emp. ID No. 25-189772 FAX: (215) 277-5263

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present M Proposed M Fuel Storage Tank:
Constr. Class: Present 11B Proposed 11B Fuel Type: ☐ Flammable or ☐ Combustible
Capacity _____

Heating System: ☐ New or ☐ Modification to Existing
OR ☐ Conversion or ☐ Replacement
Fire Alarm System: ☒ New or ☐ Existing

Fuel Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
☐ Other _____ Location of Panel: Sprinkler Room
☐ New or ☐ Existing
Location of Main Control Valve: _____

Location: _____
Total Cost of Fire Protection Work \$ 4,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required
☐ Partial - Under/Under Utilities Approved
Approved by: _____
Date: 2/18/19 Approved by: [Signature]
Joint Plan Review Required: ☐ Bldg. ☐ Elec. ☐ Plumb. ☐ Elev. ☐ Mech. ☐ Pre-Eng. System

SUBCODE APPROVAL FOR PERMIT 23-113
Date: _____ TCO _____

Approved by: [Signature] Flam/Combust. Tanks _____
SUBCODE APPROVAL FOR CERTIFICATE _____ Fireplace Venting _____

Date: 2/18/19 ☐ CO ☐ L ☐ CCO ☐ CA _____
Approved by: _____ Other _____

U.C.C. F140 (rev. 02/11) Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one
Internet version original plus three photocopies.

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.

Applicant/Contractor sign here: [Signature]

Print name here: Tom Capie

D. TECHNICAL SITE DATA ☒ Certified Contractor ☐ Exempt Applicant

DESCRIPTION OF WORK:

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

Flammable/Combustible Tanks _____

Alarm Systems ☒ System

☐ 110v Interconnected

☐ CO Detectors/110v

Alarm Devices (i.e., smoke, heat, pulls, water/flow) _____

Supervisory Devices (i.e., tamper, low/high air) _____

Signaling Devices (i.e., horns/strobes, bells) _____

Other Devices facp/ann _____

TOTAL _____

Suppression Systems

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) _____

Standpipes _____

Pre-engineered Systems _____

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

FM200 Suppression _____

Other _____

Other Systems _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Fuel-Fired Appliances ☐ Gas ☐ Oil ☐ Solid _____

Fireplace Venting/Metal Chimney _____

Other _____

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

Date Received
Control #

Date Issued
Permit #

18-3471+D

4/19/19



ELECTRICAL SUBCODE
TECHNICAL SECTION



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

Block 671 Lot 1.01 Qualification Code 48
Work Site Location: 110 Brick Plaza Brick, NJ
Former Ethan Allen

Owner In Fee: Federal Realty
Tel: (973) 967-0967 e-mail
Address: 50 E. Wynnwood Wynnwood, PA
Contractor: ELECTRONIC SECURITY SOLUTIONS Tel: (215) 277-5248
Address: 5115 Campus Drive e-mail: jeffmitchell@essfiresys.com
Plymouth Meeting, PA 19462

Contractor License No. Exp. Date
Home Improvement Contractor Registration No. or Exemption Reason
Federal Emp. ID No. 25-189772 FAX: (215) 277-5263

B. ELECTRICAL CHARACTERISTICS
Use Group Present Proposed
[] Pole/Pad # [] Temporary [] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work \$ 4,500

JOB SUMMARY (Office Use Only)
PLAN REVIEW
[] No Plans Required
[] Partial - Underslab Utilities Approved
[] Electric Plans Approved
Date: 3/5/18 Approved by: [Signature]
Joint Plan Review Required:
[] Bldg. [] Plumb. [] Fire [] Elev.
SUBCODE APPROVAL FOR PERMIT
Date: 3/11/18 Approved by: [Signature]
SUBCODE APPROVAL FOR CERTIFICATE
[] CO [] CCO [] CA
Date: Annual/Pool Inspection
Approved by: Date of Grounding and Bonding Certification

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 sign/Contractor sign and seal here: [Signature]
Print name here: Tom Capie
[] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr [X] Exempt Applicant

Date Received 4/6/19
Control #
Date Issued 18-3471+D
Permit #

Table with 4 columns: QTY, SIZE, ITEMS, FEE (Office Use Only). Rows include: new fire alarm, Lighting Fixtures, Receptacles, Switches, Detectors, Light Poles, Motors—Frac. HP, Emergency & Exit Lights, Communications Points, Alarm Devices/F.A.C. Panel, 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.



PERMIT UPDATE

Date Update Issued _____
Control # C-18-004058+E
Permit # 18-3471+E

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN) Contractor National Maintenance & Buildout
Brick Township, NJ Address 48A Vincent Circle Ivyland PA 18974
Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX Telephone: (215) 442-2538
76092 Lic. No. or Bldrs. Reg. No. 13vh07302100
Telephone: _____ Federal Employee No. 300020638

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:

- FORMER ETHAN ALLEN ... UPDATE +E - Sprinklers

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 \$1,200

D. Newman
Construction Official

Date 4/15/19

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	_____	\$0
Electrical	_____	\$0
Plumbing	_____	\$0
Fire Protection	_____	\$116
Elevator Devices	_____	\$0
Other	_____	\$0.00
DCA Training Fee	_____	\$2
CO Fee	_____	
Other	_____	\$0
Total	_____	\$118
Check No.	_____	
Cash	_____	\$0
Credit	_____	\$0
Collected By	_____	

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.



FIRE PROTECTION SUBCODE TECHNICAL SECTION



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

Block 1071 Lot 1.01 Qualification Code _____

Work Site Location Space 43 5th Chambers bridge Rd brick NJ

Owner in Fee: Federal Realty e-mail _____

Tel. 949-419-1200 e-mail _____

Address 50 E Wayne Wood Waynewood Pa Municipality _____ Tel. 8484485512 code _____

Contractor: Premier Fire Systems e-mail _____

Address 2 Ilene Ct. e-mail _____

Hillsborough, NJ 08844

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P00647

Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____ Exp. Date 4/19

Fire Alarm Contractor No. _____

Home Improvement Contractor Registration No. or Exemption Reason 223828273 FAX: 7322621780

Federal Emp. ID No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____ Fuel Storage Tank: _____

Constr. Class: Present _____ Proposed _____ Fuel Type: [] Flammable or [] Combustible

Heating System: [] New or [] Modification to Existing Fire Alarm System: [] New or [] Existing

OR [] Conversion or [] Replacement Fire Suppression/Standpipe System: _____

Fuel Type: [] Gas [] Oil [] Electric [] Solar [] New or [] Existing

Location: _____ Location of Main Control Valve: _____

Total Cost of Fire Protection Work \$ 12000 tenant price

PLAN REVIEW _____

[] No Plans Required _____

[] Partial/Unusable Utilities Approved _____

Date _____

[] Fire Protection Plans Approved _____

Date _____

[] Fire Protection Plans Approved _____

Date _____

[] Fire Protection Plans Approved _____

Date _____

[] Fire Protection Plans Approved _____

Date _____

[] Fire Protection Plans Approved _____

Date _____

[] Fire Protection Plans Approved _____

Date _____

200 State Ave - Space
Venille
Box

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.

Applicant/Contractor sign here:

Print name here: Mike Kelly

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Canopy

Water Supply Source _____

Method of Alarm/Suppression System Supervision Existing

Flammable/Combustible Tanks _____

Alarm Systems _____

[] System _____

[] 110V Interconnected _____

[] CO Detectors/110V _____

Alarm Devices (i.e., smoke, heat, pulls, water/flow) _____

Supervisory Devices (i.e., tamper, low/high air) _____

Signaling Devices (i.e., horns/strobes, bells) _____

Other Devices _____

TOTAL _____

Suppression Systems _____

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) 4

Standpipes _____

Pre-engineered Systems _____

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

FM200 Suppression _____

Other _____

Other Systems _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Fuel-Fired Appliances [] Gas [] Oil [] Solid _____

Fireplace Venting/Metal Chimney _____

Other _____

Date Received
Control #
Date Issued
Permit #

18-3471 + E

[] Certified Contractor [] Exempt Applicant

NUMBER

FEE (Office Use Only)

\$

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$

U.C.C. F140 (rev. 02/11)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

Internet version

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