- Fruitta Bowls -

BLOCK 143 LOT 25.01 QUALIFICATION CODE _____ ADDRESS (SITE) 540 Shoppes BLVD PERMIT NO. 180235

46852

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Proposed Work Site at: 540 Shoppes BLVD. No Bruns. NJ
2. Name of Owner in Fee: JAMBRAS NB Partners LLC
   Tel 201-232-6893 e-mail _____
   Address 4 Brandywine Court (street) Manalapan (municipality) (zip code) OTB
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: LM Construction Tel. 732-579-7944
   Address 24 Juliet ST e-mail _____
   New Bruns. NJ 08901 pbuckley@lmelectricalconstruction.com
   License No. OR, if new home, Builder Reg. No. 13429 Exp. Date 8-18
   Home Improvement Contractor Registration No. or Exemption Reason _____
   Federal Emp. ID No. 452 257 715 FAX: 732 317-8081
5. Architect or Engineer Zimbler Arch Contact Alan Zimbler
   Address 30 So. Street Freehold NJ e-mail _____
   Tel. 732-780-8850 FAX: _____
6. Responsible Person in Charge once Work has Begun Pat Buckley
   Tel. 732-579-7944 FAX: 732-317-8081

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 5144		
2. Electrical	260		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal Admin	11		
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	160		
10. Subtotal	$		
11. Cert. of Occupancy		200-	
12. Other			
13. TOTAL	$ 885		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area — Largest Floor _____ 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 ____

00025_027688 20180235 2754 SF

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	15,000.00				2/14/18				
☒ Electrical	8000.00				2/14/18				
☒ Plumbing	9200.00				2-13-18	DA			
☐ Fire Protection									
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*

1. State Specific Use: _____
2. Use Group, Proposed: _____
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☒ Fire Alarm

U.C.C. F100-1 (rev. 8/08)

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(f)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, including such certification as the construction official may require, have been given or will be given prior to pemit issuance.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the 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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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.

(X) Check if contractor.

Agent Name Pat Buckley LM Construction

Address 24 Juliet St.
New Brunswick, NJ 08901

Telephone 732-579-7944

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

North Brunswick Township
710 Hermann Road
North Brunswick, NJ 08902

Date Issued 4/27/2018
Control Number 46852
Permit Number 20180235
Permit Issue Date 2/20/2018
Certificate Number 20180235

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ Block: 143 Lot: 25.01 Qual:

Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC

Owner Address: 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432

Telephone:

Contractor LM CONSTRUCTION

Address 24 JULIET STREET NEW BRUNSWICK NJ 08901

Telephone: (732) 579-7944 Fax: (732) 317-8081

License Number or Builders Registration Number: Federal Emp. Number: 452257715

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: A-2 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: TENANT FIT-OUT - FRUTTA BOWLS

Certificate Comments: OCCUPANCY DINING 27

☑ **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:

Thomas Paun

Thomas Paun, Construction Official

Construction Official

Fee: $200.00
Check Number: 1202
Collected By: Donna Ball

Date Printed: 4/27/2018

U.C.C. F260 (rev. 08/05)

CONSTRUCTION PERMIT

Date Issued 2/20/2018
Control # 46852
Permit # 20180235

IDENTIFICATION Block: 143 Lot: 25.01 Qualifier
Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ
Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432
Telephone:

Contractor: LM CONSTRUCTION
Address: 24 JULIET STREET NEW BRUNSWICK NJ 08901
Telephone: (732) 579-7944
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 452257715

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:
TENANT FIT-OUT - FRUTTA BOWLS

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 $32,200

Construction Official

2/20/2018
Date

PAYMENTS (Office Use Only)

Building	$510
Electrical	$44
Plumbing	$260
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$60
CO Fee	$200.00
Other	$11
Total	$1,085
Check No.	2893 1202
Cash	$0
Credit	$0
Collected By	Donna Ball

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

- [x] 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:

- [x] 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".

- [x] A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

APPLICATION FOR CERTIFICATE

Date Received 1/16/2018
Date Permit Issued 2/20/2018
Control # 46852
Permit # 20180235
Date Issued

IDENTIFICATION

Block 143 Lot 25.01 Qualifier

Work Site Location 540 SHOPPES BOULEVARD North Brunswick Township, NJ

Owner in Fee BRUNS CIR DEV LLC% AZARIAN GROUPLLC 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432

Telephone

Contractor LM CONSTRUCTION
Address 24 JULIET STREET NEW BRUNSWICK NJ 08901

Telephone (732) 579-7944
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 452257715

ACTION

- ☑ CERTIFICATE OF OCCUPANCY
- ☐ CERTIFICATE OF CONTINUED OCCUPANCY
- ☐ LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
- ☐ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP Previous A-2 Current

FINAL COST OF CONSTRUCTION: $ 32200
(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all the integral equipment exclusive of process or manufacturing equipment.)

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:
Alteration TENANT FIT-OUT - FRUTTA BOWLS

I hereby attest that to the best of my knowledge, the completed project meets the conditions of construction permit and all prior approvals, and all work has been completed substantially in accordance with the code and with those portions of the plans and specifications controlled by the code, with any substantial deviations noted. Incomplete items listed on a Temporary Certificate of Occupancy will be complete by the date on the

SIGNED: _____
Owner/Agent

☐ OWNER

☐ AGENT

UCC F270 equiv.

North Brunswick Township
710 Hermann Road
North Brunswick, NJ 08902

Date Issued 4/9/2018
Control Number 46852
Permit Number 20180235
Permit Issue Date 2/20/2018
Certificate Number 20180235

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ Block: 143 Lot: 25.01 Qual:

Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC

Owner Address: 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432

Telephone:

Contractor LM CONSTRUCTION

Address 24 JULIET STREET NEW BRUNSWICK NJ 08901

Telephone: (732) 579-7944 Fax: (732) 317-8081

License Number or Builders Registration Number: Federal Emp. Number: 452257715

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: A-2 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0 27

Description of Work/Use: TENANT FIT-OUT - FRUTTA BOWLS

Certificate Comments: OCCUPANCY DINING 27

☐ **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:

Thomas Paun

Thomas Paun, Construction Official

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 4/9/2018

U.C.C. F260 (rev. 08/05)

COUNTY OF MIDDLESEX
DEPARTMENT OF PUBLIC SAFETY AND HEALTH
Office of Health Services
35 KENNEDY BLVD
EAST BRUNSWICK, NJ 08816 • (732) 745-3100

Township of North Brunswick
710 Hermann Road, NJ 08902
732-947-0922 x254

TO: CONSTRUCTION OFFICIAL/CLERK'S OFFICE
RE: PRE-OPERATIONAL INSPECTION/CHANGE OF OWNERSHIP

DATE: 4/9/18

ESTABLISHMENT: Frutta Bowls

ADDRESS: 540 Shoppes Blvd

☒ PRE-OPERATIONAL ☐ CHANGE OF OWNERSHIP

A Pre-Operational Inspection was conducted and the Establishment Requesting Permission to Open has been rated the following:

☒ SATISFACTORY

☐ CONDITIONALLY SATISFACTORY: _____

☐ UNSATISFACTORY: _____

DATE INSPECTED: 4/9/18

REGISTERED ENVIRONMENTAL HEALTH SPECIALIST: Nick DeStefano

SIGNATURE

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 1/16/2018
Control # 46852
Date Issued 2/20/2018
Permit # 20180235

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

Block 143 Lot 25.01 Qualification Code ______

Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ

Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC

Address 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432

Tel. ______ Email ______

Contractor: LM CONSTRUCTION

Address 24 JULIET STREET NEW BRUNSWICK NJ 08901

______ Email ______

Tel. (732) 579-7944 Fax. (732) 317-8081

Contractor License No. or, if new home, Bldrs Reg. No. ______ Exp. ______

Home improvment Contractor Registration No. or Exemption Reason(is applicable): ______

Federal Emp. ID No. 452257715

C. CERTIFICATION IN LIEU OF OATH

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

Signature ______

Print Name Here: ______

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TENANT FIT-OUT, - FRUTTA BOWLS

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☐ All		
☐ Footing/Foundation		
☐ Struct/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: 4/9/18
Approved by: ______

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame			3.6.18	[illegible]
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes-Base Layer				
Finishes-Final				
Energy				
Mechanical				
TCO				
Other				
Final			4.5.18	[illegible]
Barrier-Free				

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	
☐ Addition	
☑ Rehabilitation	$510
☐ 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	
☐ Other ______	
☐ Demolition	
Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	$28
TOTAL FEE	$538

B. BUILDING CHARACTERISTICS

Use Group Present ______ Proposed A-2
Constr. Class Present ______ Proposed ______
Number of Stories ______
Height of Structure ______ Ft.
Area - Largest Floor ______ Sq. Ft.
New Blbg. Area / All Floors ______ Sq. Ft.
Volume of New Structure ______ Cu. Ft.
Total Land Area Disturbed ______ Sq. Ft.

If Industrial Building:
State Approved ______
HUD ______

Est. Cost of Bldg. Work:
1. New Bldg. ______
2. Rehabilitation $15,000
3. Total (1+2) $15,000

U.C.C F110 (rev. 11/09)

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

PLUMBING SUBCODE

TECHNICAL SECTION

Date Received 1/16/2018
Control # 46852
Date Issued 2/20/2018
Permit # 20180235

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

Block 143 Lot 25.01 Qualification Code

Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ

Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC

Address 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432

Email

Tel.

Contractor: TRIMBLE PLUMBING & HVAC LLC

Address 1569 S. OLDEN AVE HAMILTON NJ 08610

Email

Tel. (609) 888-3900 Fax.

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Contractor License No. 7513 Expiration Date:

Federal Employee No. 460802651

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed A-2

Building Sewer Size ☐ Public Sewer ☐ Private Septic

Water Service Size ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work $9,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plan Required

Partial Underslab Utilities Approved

Date: by:

☐ Plumbing Plans Approved

Date:

Approved by:

Joint Plan Review Required

☐ Building ☐ Electrical

☐ Fire ☐ Elevator

SUBCODE APPROVAL for PERMIT

Date: by:

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☒ CA

Date: 4/5/18

Approved by: DA

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Slab				
Rough				
Water			4/27/18	DA
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				
			4/5/18	DA

Dates (Month/Day)

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

C. CERTIFICATION IN LIEU OF OATH

I hereby certifiy that I am the (agent of) owner of the record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature and Printed Name

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
TENANT FIT-OUT, - FRUTTA BOWLS

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	$15
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	$15
	Shower	
3	Floor Drain	$45
7	Sink	$105
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater	$65
	Fuel Oil Piping	
1	Gas Piping	$15
	LP Gas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventor	
	Greasetrap	
	Sewer Connector	
	Water Service Connection	
	Stacks	
	Other	

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	$17
TOTAL FEE	$277

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 1/16/2018
Date Issued 2/20/2018
Control # 46852
Permit # 20180235

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

Block 143 Lot 25.01 Qualification Code

Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ

Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC

Address 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432

Email

Tel.

Contractor: LM CONSTRUCTION

Address 24 JULIET STREET NEW BRUNSWICK NJ 08901

Email

Tel. (732) 579-7944 Fax. (732) 317-8081

Lic No. Exp. Date

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Employee No. 452257715

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed A-2

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $8,000

C. CERTIFICATION IN LIEU OF OATH

I hereby certifiy that I am the (agent of) owner of the record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
TENANT FIT-OUT, - FRUTTA BOWLS

QTY.	SIZE	ITEMS	FEE (Office Use Only)
30		Lighting Fixtures	
25		Recepticles	
6		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
6		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
67		TOTAL NUMBERS	$59
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
1	1	KW Elec. Water Heater	$15
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		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 $11
Minimum Fee
State Permit Surcharge Fee $15
TOTAL FEE $70

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
☐ No Plan Required		
Partial Underslab Utilities Approved		
Date: by:		
Electric Plans Approved		
Date: by:		
Joint Plan Review Required		
☐ Building ☐ Plumbing		
☐ Fire ☐ Elevator		
☐ Electrical Plans Approved		
SUBCODE APPROVAL for PERMIT		
Date: by:		
SUBCODE APPROVAL for CERTIFICATE		
☐ CO ☐ CCO ☑ CA		
Date: 4/5/18		
Approved by:		

INSPECTIONS

Type	Failure	Failure	Dates (Month/Day) Approval	Initial
Rough			2/23/18	
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			4/5/18	
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

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.

CONSTRUCTION PERMIT

Date Issued 2/20/2018
Control # 46852
Permit # 20180235

IDENTIFICATION Block: 143 Lot: 25.01 Qualifier
Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ
Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432
Telephone:

Contractor: LM CONSTRUCTION
Address: 24 JULIET STREET NEW BRUNSWICK NJ 08901
Telephone: (732) 579-7944
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 452257715

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:
TENANT FIT-OUT - FRUTTA BOWLS

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 $32,200

Construction Official

2/20/2018
Date

PAYMENTS (Office Use Only)

Building	$510
Electrical	$44
Plumbing	$260
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$60
CO Fee	
Other	$11
Total	$885
Check No.	2893
Cash	$0
Credit	$0
Collected By	Donna Mikolajewski

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

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.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 1/16/2018
Control # 46852
Date Issued 2/20/2018
Permit # 20180235

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

Block 143 Lot 25.01 Qualification Code ______

Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ

Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC

Address 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432

Tel. ______ Email ______

Contractor: LM CONSTRUCTION

Address 24 JULIET STREET NEW BRUNSWICK NJ 08901

______ Email ______

Tel. (732) 579-7944 Fax. (732) 317-8081

Contractor License No. or, if new home, Bldrs Reg. No. ______ Exp. ______

Home improvment Contractor Registration No. or Exemption Reason(is applicable): ______

Federal Emp. ID No. 452257715

C. CERTIFICATION IN LIEU OF OATH

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

Signature ______

Print Name Here: ______

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TENANT FIT-OUT, - FRUTTA BOWLS

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☐ All		
☐ Footing/Foundation		
☐ Struct/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: ______
Approved by: ______

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes-Base Layer				
Finishes-Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	
☐ Addition	
☑ Rehabilitation	$510
☐ 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	
☐ Other ______	
☐ Demolition	
Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	$28
TOTAL FEE	$538

B. BUILDING CHARACTERISTICS

Use Group Present ______ Proposed A-2

Constr. Class Present ______ Proposed ______

Number of Stories ______

Height of Structure ______ Ft.

Area - Largest Floor ______ Sq. Ft.

New Blbg. Area / All Floors ______ Sq. Ft.

Volume of New Structure ______ Cu. Ft.

Total Land Area Disturbed ______ Sq. Ft.

If Industrial Building:
State Approved ______
HUD ______

Est. Cost of Bldg. Work:
1. New Bldg. ______
2. Rehabilitation $15,000
3. Total (1+2) $15,000

U.C.C F110 (rev. 11/09)

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 1/16/2018
Date Issued 2/20/2018
Control # 46852
Permit # 20180235

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

Block 143 Lot 25.01 Qualification Code

Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ

Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC

Address 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432

Email

Tel.

Contractor: LM CONSTRUCTION

Address 24 JULIET STREET NEW BRUNSWICK NJ 08901

Email

Tel. (732) 579-7944 Fax. (732) 317-8081

Lic No. Exp. Date

Home improvment Contractor Registration No. or Exemption Reason(is applicable):

Federal Employee No. 452257715

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed A-2

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $8,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
☐ No Plan Required		
Partial Underslab Utilities Approved		
Date: ____ by: ____		
Electric Plans Approved		
Date: ____ by: ____		
Joint Plan Review Required		
☐ Building ☐ Plumbing		
☐ Fire ☐ Elevator		
☐ Electrical Plans Approved		
SUBCODE APPROVAL for PERMIT		
Date: ____ by: ____		
SUBCODE APPROVAL for CERTIFICATE		
☐ CO ☐ CCO ☐ CA		
Date:		
Approved by:		

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of the record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
TENANT FIT-OUT, - FRUTTA BOWLS

QTY.	SIZE	ITEMS	FEE (Office Use Only)
30		Lighting Fixtures	
25		Recepticles	
6		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
6		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
67		TOTAL NUMBERS	$59
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
1	1	KW Elec. Water Heater	$15
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		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	$11
Minimum Fee	
State Permit Surcharge Fee	$15
TOTAL FEE	$70

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

CONSTRUCTION PERMIT

Date Issued
Control # 46852
Permit #

IDENTIFICATION Block: 143 Lot: 25.01 Qualifier
Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ
Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432
Telephone:

Contractor: LM CONSTRUCTION
Address: 24 JULIET STREET NEW BRUNSWICK NJ 08901
Telephone: (732) 579-7944
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 452257715

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:
TENANT FIT-OUT - FRUTTA BOWLS

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 $32,200

Thomas Paun 2/15/18
Construction Official Date
Thomas Paun, Construction Official

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

PAYMENTS (Office Use Only)

Building	$510
Electrical	$44
Plumbing	$260
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$60
CO Fee	
Other	$11
Total	$885
Check No.	
Cash	$0
Credit	$0
Collected By	

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.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit # 180235

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

Block 143 Lot 25.01 Qualification Code

Work Site Location 540 SHOPPES BLVD
No. BRUNSWICK, NJ 08902

Owner in Fee JAMBRASNB PARTNERS LLC

Tel. 201-232-6893 e-mail jasonrschwartz@yahoo.com

Address 4 BRANDYWINE Ct. (street) MANALAPAN (municipality) NJ 07726 (zip code)

Contractor: LM CONSTRUCTION Tel. 732-579-7944

Address 24 JULIET St. NEW BRUNS. NJ. 08901 e-mail pbuckley@palmelectricalconstruction.com

Contractor License No. or Builder Registration No. 13429 Exp. Date 8-18

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 452257715 FAX: 732-317-8081

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[X] Interior	2/14/18	

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS

Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present X Proposed
No. of Stories 1
Height of Structure ft.
Area — Largest Floor 1800 sq. ft.
New Bldg. Area/All Floors sq. ft.
Volume of New Structure cu. ft.
Max. Live Load
Max. Occupancy Load 30

Constr. Class Present Proposed
If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 15,000 — per jacket cover on

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:
Print name here: Pat Buckley

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TENNANT Fit-out
Retail Space

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 Fit out
[ ] Demolition

FEE (Office Use Only)
$

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

Applicant: When submitting this form to your Local Construction Code [illegible] Office, please provide [illegible]

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued
Permit #

18023 5

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

Block 143 Lot 25.01 Qualification Code

Work Site Location 540 SHOPPES BLVD. No. BRUNSWICK, NJ 08902

Owner in Fee: JAMBRASNB PARTNERS LLC

Tel. 201-232-6893 e-mail

Address 4 BRANDYWINE Ct. MANALAPAN, NJ 07726
street municipality

Contractor: DANE CONST. Tel. 732-579-7944
zip code

Address 24 JULIET ST e-mail pbuckley@lmelectricalconstruction.com
NEW BRUNS. NJ. 08901

Contractor License No. 13429 Exp. Date 8-18

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 452257715 FAX: 732 317-8081

B. ELECTRICAL CHARACTERISTICS

Use Group Present

[ ] Pole/Pad # Proposed Fitout

Building Occupied as Retail [ ] Temporary [ ] Other

Est. Cost of Elec. Work $ 8000.00 Utility Co. PSE&G

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[✓] Electric Plans Approved
Date: 2/14/18 Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 2/14/18
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
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:

Print name here: Pat Buckley

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Fitout Retail SPACE

QTY.	SIZE	ITEMS
30		Lighting Fixtures
25		Receptacles
6		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
6		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
67		TOTAL NUMBERS
		Pool Permit/with UW Lights
		Storable Pool/Spa/Hot Tub
		KW Elec. Range/Receptacle
		KW Oven/Surface Unit
1		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

FEE (Office Use Only)

$ 59

15

Administrative Surcharge $ 74
Minimum Fee $
State Permit Surcharge Fee $

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

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit # 180235

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

Block 143 Lot 25.01 Qualification Code

Work Site Location 540 SHOPPES BLVD. NORTH BRUNSWICK, NJ 08902

Owner in Fee: JAMBRAS NB PARTNERS LLC

Tel. (201) 232-6893 e-mail

Address 4 BRANDYWINE CT., MANALAPAN, NJ 07726
street municipality zip code

Contractor: TRIMBLE PLUMBING & HEATING Tel. (609) 888-3900

Address 1569 S. OLDEN AVE. e-mail
HAMILTON, N.J. 08610

Contractor License No. 7513 Exp. Date 06/19

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

Federal Emp. ID No. 460802651 FAX: (609) 888-3902

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 $ 9,200.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] 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				
Final				

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: M.A. Trimble

Print name here: MARK TRIMBLE

[✓] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
TENANT FIT-OUT

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	
	Shower	
3	Floor Drain	
7	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater	
	Fuel Oil Piping	
80 Ft	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 143 Lot 25.01 Qualification Code

Work Site Location 580 Shoppes BLVD.
North BRUNSWICK, NJ 08902

Owner in Fee: JAMBRAS NB PARTNERS LLC

Tel. (201) 232-6893 e-mail

Address 4 Brandywine Ct., MANALAPAN, NJ 07726
street municipality zip code

Contractor: TRIMBLE PLUMBING · HEATING Tel. (609) 888-3900

Address 1569 S. OLDEN Ave. e-mail
HAMILTON, N.J. 08610

Contractor License No. 7513 Exp. Date 06/19

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

Federal Emp. ID No. 460802651 FAX: (609) 888-3902

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size 4" Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 9,200.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] 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				
Final				

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:

Print name here: MARK TRIMBLE

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
TENANT FIT-OUT

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	
	Shower	
3	Floor Drain	
7	Sink	
	Dishwasher	
17	Drinking Fountain	
	Washing Machine	5.4
	Hose Bibb	
1	Water Heater	
	Fuel Oil Piping	11
80FT	Gas Piping	
	LPGas Tank	15
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$ 74

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 143 Lot 25.01 Qualification Code

Work Site Location 500 Sibonies BLVD.
North Brunswick NJ 08902

Owner in Fee: JAMBRAS NB PARTNERS LLC

Tel. (201) 232-6893 e-mail

Address 4 Brandywine Ct. Manalapan NJ 07726

Contractor: Trimble Plumbing · Heating (street / municipality) Tel. (609) 888-3900 (zip code)

Address 1569 S. Olden Ave. e-mail
Hamilton N.J. 08610

Contractor License No. 7513 Exp. Date 06/19

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

Federal Emp. ID No. 461402651 FAX: (609) 888-3902

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 $ 9,200.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] 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				
Final				

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:

Print name here: Thomas Trimble

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
TENANT FIT-OUT

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	
	Shower	
3	Floor Drain	
7	Sink	
	Dishwasher	
(1)	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater	
	Fuel Oil Piping	
1	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 143 Lot 2501 Qualification Code

Work Site Location 22 ELV...

Owner in Fee: ... LLC

Tel. (01) 233-6893 e-mail

Address ... (street) ... (municipality) ... (zip code)

Contractor: ... Tel. (...)

Address ... e-mail

Contractor License No. ... Exp. Date ...

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

Federal Emp. ID No. ... FAX: (...)

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 $ ...

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date:_____ Approved by:_____
[ ] Plumbing Plans Approved
Date:_____ Approved by:_____
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] 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				
Final				

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:

Print name here:

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
7	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	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	

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

CONSTRUCTION PERMIT

Date Issued
Control # 46852
Permit # 180235

IDENTIFICATION Block: 143 Lot: 25.01 Qualifier
Work Site Location: 540 SHOPPES BOULEVARD North Brunswick Township, NJ
Owner in Fee: BRUNS CIR DEV LLC% AZARIAN GROUPLLC 6 PROSPECT STRET STE 1B MIDLAND PARK NJ 07432
Telephone:

Contractor: LM CONSTRUCTION
Address: 61 JULIET STREET NEW BRUNSWICK NJ 08901
Telephone: (732) 579-7944
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 452257715

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:
TENANT FIT-OUT - FRUTTA BOWLS

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 $32,200

Construction Official _____ Date _____

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$60
CO Fee	
Other	$0
Total	$60
Check No.	
Cash	$0
Credit	$0
Collected By	

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

DISPOSAL OF BUILDING MATERIALS AND CONSTRUCTION DEBRIS

1802235

IN ACCORDANCE WITH ORDINANCE #97-26, WHICH REGULATES THE COLLECTION OF GARBAGE

THE TOWNSHIP OF NORTH BRUSNWICK DOES **NOT** PICK UP:

LUMBER, SHINGLES, WALLBOARD OR OTHER BUILDING MATERIAL OR DEBRIS THAT COMES FROM A PROJECT REQUIRING A CONSTRUCTION PERMIT FROM THE TOWNSHIP. THE EXCEPTION TO THIS RULE IS HOT WATER HEATERS, WHICH THE TOWNSHIP WILL COLLECT UPON CALLING THE DEPARTMENT OF PUBLIC WORKS TO SCHEDULE A PICK-UP

PLEASE INDICATE BELOW HOW YOU ARE PROVIDING FOR THE DISPOSAL OF CONSTRUCTION DEBRIS:

_____ THE CONTRACTOR WILL BE REQUIRED TO DISPOSE OF CONSTRUCTION MATERIALS AND DEBRIS

__X__ A DUMPSTER WILL BE PLACED ON THE PROPERTY AND A PRIVATE HAULER WILL REMOVE CONSTRUCTION MATERIALS AND DEBRIS

_____ OTHER (SPECIFY)_____

I, Pat Buckley certify that the materials will be disposed of in one of the above manners

_____
APPLICANT'S SIGNATURE

541 Shoppes BLVD.
PROPERTY ADDRESS

01-10-18
DATE

540 Shoppes Blvd.

4. Has a variance been granted for the proposed work? Yes____ No✓ File no. _____

5. Did you attach a copy of your **Survey / Plot Plan** as required? Yes_____ No X

A copy of the original survey to scale of the entire property must be provided and must show all existing structures and all proposed structures, including setback distances *drawn to scale*, and all property lines and easements.

6. Do you have a Homeowners Association or other organization? Yes____ No X

If yes, please attach written permission or a Declaration of No Jurisdiction from the Association.

7. Did you attach **Construction Plans** or **Company Brochure**? Yes____ No X

Construction plans (or company brochure) must be provided and must show:

- **Details and dimensions of all proposed structures, indicating the square footage, height and materials (if applicable, i.e. fences)**
- **Existing and intended use of each building and structure.**

8. Do any **Easements** exist on your property? Yes____ No X If yes, what type _____

An Easement Agreement must be executed if the proposed fence is to be installed within a township easement.

Print Applicant Name: JASON Schwartz **Signature:** _____ **Date:** 01-11-18

Print Owner Name: The Shoppes at North Brunswick, LLC **Signature:** _____ **Date:** 1-11-2018

John M. Azarian, Principal Manag

Office use only: **Paid Amount:** $50- **Check:** #3047 **Cash:** _____

MAP _____ 1/29/18 DR 1A-01-18-014

Approved **Denied** **Date** **Zone** **Control No.**

Comments: Zoning permit ✓

Tenant Fit Out Plans for Fruita Bowls Interior Alterations

Shoppes at North Brunswick

ENGINEERING APPROVAL REQUIRED _____ **Engineering Approval Not Required** X

North Brunswick Township
710 Hermann Road

North Brunswick, NJ 08902
(732) 247-0922

Date Issued:
Application Number: ZA-01-18-014
Application Date: 1/16/2018
Project Number:
Permit Number: ZA-01-18-014
Fee: $50.00

Zoning Permit

Worksite Location: **522 SHOPPES BOULEVARD**
North Brunswick Township, NJ

Block: **143**
Lot: **25.01**
Qualifier:
Zone:

Owner: **BRUNS CIR DEV LLC% AZARIAN GROUPLLC**
Address: **6 PROSPECT STRET STE 1B**
MIDLAND PARK, NJ 07432

Applicant: **FRUTTA BOWLS**
Address: **522 SHOPPES BOULEVARD**
NORTH BRUNSWICK, NJ 08902

Application Approved Date: 1/29/2018

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: (None)
Nonconforming Use is:

Work Description:
Alteration

Upon review it was determined that the Zoning Permit:

- [x] Permitted by Ordinance
- [ ] Permitted by Variance approved on:
- [ ] Valid Nonconforming Use is established by
  - [ ] Zoning Board of Adjustment
  - [ ] Zoning Officer

Additional Comments:
Zoning permit app., UCC permit apps., Technical review sections and various documents.
Tenant Fit Out Plans for Frutta Bowls , Interior Alterations, Shoppes at North Brunswick

Zoning permit app., UCC permit apps., Technical review sections and various documents.
Tenant Fit Out Plans for Frutta Bowls , Interior Alterations, Shoppes at North Brunswick

Michael Proietti, Zoning Officer — 1/29/2018 Date

18023

MIDDLESEX COUNTY • NJ

Department of Public Safety and Health
Office of Health Services

TOWNSHIP OF NORTH BRUNSWICK
710 HERMANN ROAD • NORTH BRUNSWICK, NJ 08902

180235

TO: CONSTRUCTION OFFICIAL
RE: PLAN REVIEW

DATE: 02/02/18
PROJECT: Frutta Bowls
ADDRESS: 541 Shoppes Boulevard
BLOCK: _____ LOT: _____

WE HAVE RECEIVED AN APPLICATION AND/OR PLANS FOR THE ABOVE PROPOSED FOOD SERVICE ESTABLISHMENT AND HAVE:

☒ APPROVED

☐ APPROVED SUBJECT TO THE FOLLOWING:

_____

_____

_____

☐ REJECTED

THE APPLICATION/PLANS DATED: 2/2/18

REGISTERED ENVIRONMENTAL HEALTH SPECIALIST: Nick DeStefano

SIGNATURE

35 Kennedy Boulevard, East Brunswick, NJ 08816
Tel: 732-745-3100 TTY: 732-745-8994 Fax: 732-745-2568

www.middlesexcountynj.gov

TOWNSHIP OF NORTH BRUNSWICK ZONING PERMIT APPLICATION

Per Section 205-138 of the North Brunswick Land Use Ordinance revised September 15, 2008, a Zoning Permit must be obtained prior to the erection, restoration, addition to, or alteration of any structure within the Township of North Brunswick, prior to the issuance of a building permit..

18023

A survey/plot plan and/or construction plans, as described below, must be submitted with the application.

1. Date of Application: 01-09-18 Block 143 Lot: 25.01
   Applicant Name: Frutta Bowls JAMBRAS NB PARTNERS LLC
   Property Address: 540 Shoppes BLVD NO BRUNSWICK, NJ 08902
   Property Owner Name: Shoppes@ North BRUNSWICK
   Owner Phone #: 201-232-6893 Fax #:
2. Contact Name: Pat Buckley Contact Phone #: 732-579-7944
   Contact Address: 24 Juliet ST. New BRUNS. NJ 08902

Payment of application fees are required with submission of application as follows:

3. Description of proposed work:		Fee:	
____ (a)	New Building	$100.00	Commercial ✓ Res1F ___ 2F ___ Multi F ___
____ (b)	Building Addition	$ 50.00	Non Residential ____ Residential ____
X (c)	Building Alteration First 50,000.00 sf	$ 50.00	Non Residential ✓ Residential ____
____ (d)	Building Alteration Second 50,000 sf	$100.00	Non Residential ____ Residential ____
____ (e)	Building Alteration Over 100,000 sf	$150.00	Non Residential ____ Residential ____
____ (f)	Deck/Patio/Porch/Gazebo/Fireplace	$ 30.00	L: ____ W: ____
____ (g)	Fence	$ 30.00	LF: ____ W: ____ H: ____ Type: ____
____ (h)	Finished Basement	$ 30.00	
____ (i)	Garage detached	$ 30.00	L: ____ W: ____ H: ____
____ (j)	Pool Above Ground	$ 30.00	Dimension: ____
____ (k)	Pool In Ground	$ 30.00	Dimension: ____
____ (l)	Sign	$ 30.00	L: ____ W: ____ H: ____
____ (m)	Temporary Sign	$ 30.00	L: ____ W: ____ H: ____
____ (n)	Temporary Structures *	$ 30.00	L: ____ W: ____ H: ____
____ (o)	Accessory Building or Structure (Shed)	$ 30.00	L: ____ W: ____ H: ____
____ (p)	Temporary Storage Containers **	$ 30.00	L: ____ W: ____ H: ____
____ (q)	Portable Storage Units	$ 30.00	L: ____ W: ____ H: ____
____ (r)	Retaining Walls ***	$ 30.00	L: ____ W: ____ H: ____
____ (s)	Telecommunications Tower	$ 50.00	
____ (t)	Emergency Generator	$ 30.00	

NORTH BRUNSWICK TWSP.
RECEIVED
JAN 16 2018
ZONING OFFICE

* *Temporary Structures are defined as any membrane or fabric structures which exceed four hundred square feet (400 sf) and which will be in place for a period of time greater than fourteen (14) days*

** *Temporary storage containers are defined as containers without wheels on a non-residential property for a one-time non renewable period of one (1) year.*

*** *Retaining Walls are defined as not connected to the principal building and exceeding thirty inches (30") in height.*

PLEASE CONTINUE ON OTHER SIDE/NEXT PAGE

4. Has a variance been granted for the proposed work? Yes____ No____ File no. _____

5. Did you attach a copy of your **Survey / Plot Plan** as required? Yes_____ No _____

A copy of the original survey to scale of the entire property must be provided and must show all existing structures and all proposed structures, including setback distances *drawn to scale*, and all property lines and easements.

6. Do you have a Homeowners Association or other organization? Yes ____ No X

If yes, please attach written permission **or a** Declaration of No Jurisdiction from the Association.

7. Did you attach **Construction Plans** or **Company Brochure?** Yes ____ No X

Construction plans (or company brochure) must be provided and must show:

- Details and dimensions of all proposed structures, indicating the square footage, height and materials (if applicable, i.e. fences)
- Existing and intended use of each building and structure.

8. Do any **Easements** exist on your property? Yes ____ No X. If yes, what type _____

An Easement Agreement must be executed if the proposed fence is to be installed within a township easement.

Print Applicant Name: JASON Schwartz **Signature:** _____ **Date:** 01-11-18

Print Owner Name: _____ **Signature:** _____ **Date:** _____

Office use only: Paid Amount:_____ Check:_____ Cash:_____

_____ _____ _____ _____ _____

Approved Denied Date Zone Control No.

Comments: _____

ENGINEERING APPROVAL REQUIRED _____ Engineering Approval Not Required _____

MIDDLESEX COUNTY • NJ

Department of Public Safety and Health
Office of Health Services

TOWNSHIP OF NORTH BRUNSWICK
710 HERMANN ROAD • NORTH BRUNSWICK, NJ 08902

TO: CONSTRUCTION OFFICIAL
RE: PLAN REVIEW

DATE: 02/02/18
PROJECT: Frutta Bowls
ADDRESS: 540541 Shoppes Boulevard
BLOCK: _____ LOT: _____

180235

WE HAVE RECEIVED AN APPLICATION AND/OR PLANS FOR THE ABOVE PROPOSED FOOD SERVICE ESTABLISHMENT AND HAVE:

☒ APPROVED

☐ APPROVED SUBJECT TO THE FOLLOWING:

☐ REJECTED

x254

THE APPLICATION/PLANS DATED: 2/2/18
REGISTERED ENVIRONMENTAL HEALTH SPECIALIST: Nick DeStefano
SIGNATURE

35 Kennedy Boulevard, East Brunswick, NJ 08816
Tel: 732-745-3100 TTY: 732-745-8994 Fax: 732-745-2568
www.middlesexcountynj.gov

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit # 18025

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

Block 143 Lot 25.01 Qualification Code

Work Site Location 540 Shoppes BLVD.
North BRUNSWICK, NJ 08902

Owner in Fee: JAMBRAS NB PARTNERS LLC

Tel. (201) 232-6893 e-mail

Address 4 BRANDYWINE Ct., MANALAPAN, NJ 07726
street municipality zip code

Contractor: TRIMBLE PLUMBING · HEATING Tel. (609) 888-3900

Address 1569 S. OLDEN Ave. e-mail
HAMILTON, N.J. 08610

Contractor License No. 7513 Exp. Date 06/19

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

Federal Emp. ID No. 460802651 FAX: (609) 888-3902

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 $ 9,200.00

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.

Applicant sign/Contractor sign and seal here: Mark Trimble

Print name here: MARK TRIMBLE

[✓] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
TENANT FIT-OUT

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
1	Water Closet	15
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	15
	Shower	45
3	Floor Drain	
7	Sink	105
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater	65
	Fuel Oil Piping	
20ft	Gas Piping	91
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	336

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Plumbing Plans Approved
Date: 2-13-18 Approved by: DAN.
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [✓] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 2-13-18
Approved by: DAN.

SUBCODE APPROVAL for CERTIFICATE
[ ] 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				
Final				

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.				

2/20/18 gave fee to Pat.