

Brick

Permit Without a Jacket

Permit Number A-9452

Construction Permit # A-9452

Feb. 17, 1982

Owner.....Joans Hair Castle (Joan Brothers)
Location.....1681 Rt. 88 W.
.....Laurelton
Block.....835-10.....Lot 27
Contractor.....Same
Fee \$ 20.00 cash.....Use Sign

BUILDING SUB-CODE INSPECTIONS

Footing Trench
Slab
Foundation
Framing
Insulation
Final6-1-89 164
C. O. Issued

VIOLATIONS

PLUMBING SUB-CODE INSPECTIONS

Slab
Rough
Septic/Sewer
Water
Final
Electrical Final

Use reverse side for additional remarks

FEB 16 1982

CONSTRUCTION PERMIT APPLICATION

BRICK TOWNSHIP, NEW JERSEY

BULL

IMPORTANT — Complete ALL items. Mark boxes where applicable

I. LOCATION OF BUILDING	Number and street	Section	Lot	Block
	Joan's Ha. & Castle B.T.N.J.	Laurelton	27	835-10
N S	feet E W from intersection of			
	(Other local geographic, political, or legal subdivision identification)			
	N S			

II. TYPE AND COST OF BUILDING — All applicants complete Parts A-D

A. TYPE OF IMPROVEMENT	D. PROPOSED USE — For "Wrecking" most recent use	
	1 ☐ New buildings 2 ☐ Addition (if residential, enter number in Part D, 13) 3 ☐ Alteration (See 2 above) 4 ☐ Repair, replacement 5 ☐ Demolition 6 ☐ Moving (relocation) 7 ☐ Garage ☐ Swim Pool ☐ In ☐ out ☐ Fence	Residential 12 ☐ One family 13 ☐ Two or more family — Enter number of units 14 ☐ Transient hotel, motel, or dormitory — Enter number of units 15 ☐ Garage 16 ☐ Carport 17 ☐ Other — Specify <u>SIGN</u>
B. OWNERSHIP	8 ☐ Private (individual, corporation, nonprofit institution, etc.) 9 ☐ Public (Federal, State, or local government)	

C. COST	(Unit cents)
10. Cost of Improvement <u>100.00</u> \$	
To be installed but not included in the above cost	
a. Electrical (# Fixtures, Outlets)	
b. Plumbing (# of Fixtures)	
c. Heating, air conditioning	
d. Other (elevator, etc.)	
11. TOTAL COST OF IMPROVEMENT	\$

III. SELECTED CHARACTERISTICS OF BUILDING —

For new buildings and additions, complete Parts E-I; for wrecking, complete only Part H, for all others skip to IV.

E. PRINCIPAL TYPE OF FRAME	H. DIMENSIONS	FEE COMPUTATIONS
☐ Masonry (wall bearing) ☐ Wood frame ☐ Structural steel ☐ Reinforced concrete ☐ Other - Specify	Number of stories Total square feet of floor area, all floors, based on exterior dimensions Total land area, sq. ft.	VOLUME OF BUILDING BUILDING SUB CODE ELECTRICAL CODE PLUMBING CODE PLAN REVIEW CERTIFICATE OF OCCUPANCY STATE TRAINING FUND CONSTRUCTION PERMIT FEE
F. TYPE OF HEATING SYSTEM	I. RESIDENTIAL BUILDING ONLY	
Specify	Number of bedrooms	
Air Cond. Yes ☐ No ☐	Number of bathrooms	
G. TYPE OF SEWERAGE DISPOSAL		
☐ Public		
☐ Individual		

SEE REVERSE

A 9452

Cash

20.00

SUB CONTRACTORS

NAME	TRADE	ADDRESS	ZIP CODE	PHONE #
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

PERSON TO BE IN CHARGE OF CONSTRUCTION

NAME Joan's Hair's CastleADDRESS 1681 RT. 88 West. Bricktown nj - 08123

IV. IDENTIFICATION — To be completed by all applicants

Name	Mailing address — Number, street, city, and State	ZIP code	Tel. No.
1. <u>Owner Agent</u> <u>Joan Brothers</u>	<u>1681 Route 88 West Bricktown</u>	<u>08123</u>	<u>958-0730</u>
2. <u>Contractor</u>			
3. <u>Architects</u>			

The owner of this building and the undersigned agree to conform to all applicable laws of Township of Brick and that all required state, county and local prior approvals have been given.

Signature of applicant

Joan Brothers

Address

390 Englewood. B.T.N.J.

Application date

2/14/82

DO NOT WRITE IN THIS SPACE — FOR OFFICE USE ONLY

Approved by

John Kinney III

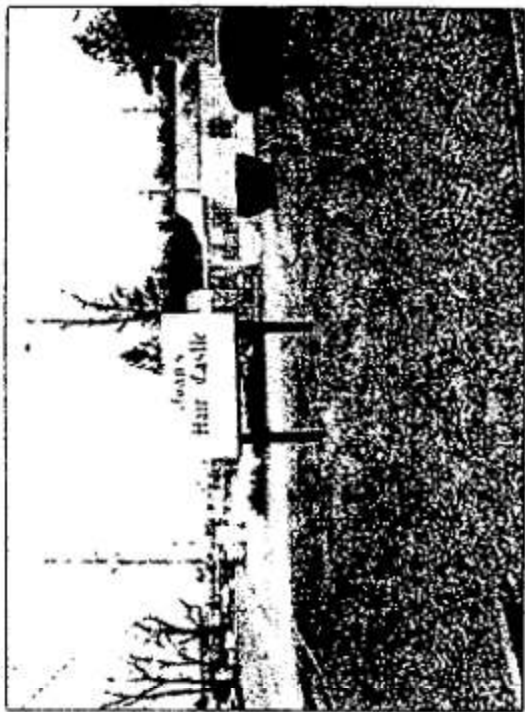
Date permit issued

2/17/82

Permit Number

A-9452

I agree to construct said building in conformity with the plans and specifications filed with the Construction Official and in compliance with the provisions of the Building Code whether shown on plans or not.



Sign # 1029

PERMIT NO.

A-9452

APPLICATION
TO ERECT
SIGNS OR BILLBOARDS

DIVISION OF INSPECTION
OFFICE OF CODE ENFORCEMENT
TOWNSHIP OF BRICK

LOCATION Laurelton

OWNER OF SIGN Joan Brothers

OWNER'S ADDRESS 1681 RT. 88 WEST

CONTRACTORS Same

CONTRACTOR'S ADDRESS _____

DRAW OUTLINE OF PROPOSED SIGN
GIVING ALL DIMENSIONS, IN SPACE BELOW

8 FT.

4 FT.

Joans Hair Castle
1681 Hwy 88 West
458-7030

Beauty is our Business

Fee 20-

Permit No. _____

ADDENDUM FOR SIGNS
REGISTRATION and PERMIT

1. LOCATION: Street Address 1681 BT. St West

Block 835-10 Lot 27 Zone ~~B-2~~ B-2

2. WORDING OF SIGN: Joans Hair Castle - 458-0730

Beauty is our Business

3. TYPE(S) OF SIGN: Ground

4. SIZE OF SIGN: Height 4 FT Length 8 FT. Sq.Ft. 32

Distance from ground level _____

5. MATERIAL OF SIGN Metal

6. In space below, describe dimensions, shape, and wording of sign. If new advertising structure, submit plot plan showing location of sign on property, relationship of sign to all property lines, distance of sign from building, and method of attachment to building, if applicable.

7. APPLICATION: Approved ☒ Denied _____ Date 2-16-82 Signed JPK3