BLOCK 701 LOT 7 QUALIFICATION CODE _____ ADDRESS (SITE) Brick Commons 744 Rt 70 PERMIT NO. 17-0954

12" Signs

CONSTRUCTION PERMIT APPLICATION

CM-000970

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

I. IDENTIFICATION

1. Proposed Work Site at: 744 Rt 70.
2. Name of Owner in Fee: Brick Town JE LLC
   Tel. 201-571-3500. e-mail _____
   Address 210 Route 4 East Paramus NJ 07652
   (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor Tel. 732-349-8499
   Address Girtain Sign Co. LLC
   1765 Route 9
   Toms River NJ 08755
   e-mail _____
   License No. OR, if r _____ Exp. Date _____
   Home Improvement Exemption Reason (if applicable): _____
   Federal Emp. ID No. 22-3305786 FAX: _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. _____ FAX _____
6. Responsible Person in Charge once Work has Begun
   Tel. 732-349-8499 FAX: 732-505-3673

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 200		
2. Electrical	150		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	12.		
10. Subtotal	$ 350		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 1137		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
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 ____	

COMMERCIAL

IIa. PROPOSED WORK

- ☐ Minor Work — Signs
- ☐ 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	1,000				03/23/17	MK			
☒ Electrical	500	3/9/17			3/16/17	RE			
☐ Plumbing									
☐ Fire Protection									
☐ Elevator		Eng Exempt			3/15/17	ECC			
TOTAL COST	1,500.								

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: M
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

8/08)

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. _____	_____	_____	_____	_____

3/10/17 – SENT TO anm – NGZ

3/23/17 – Called Gitain Sign. permit Ready for p/u. STP

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 have been given, including such certification as the construction official may require.

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

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 have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

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

( ) Check if contractor.

Agent Name _____ Girtain Sign Co. LLC

Address _____ 1765 Route 9

Toms River NJ 08755

Telephone 732.349.8499

Signature _____

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

(1) SIGNS

RECEIVING CLERK: YP
DATE REC'D: 3/14/17

ZONING PERMIT APPLICATION

PERMIT #: ZP-17-00375
DATE ISSUED: 3/28/17

BLOCK: 701 LOT: 15 QUALIFIER: — SITE ADDRESS: 444 & 744 RT 70 K/A Brick Commons

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Brickton UE LLC
   COMPLETE ADDRESS: 210 Route 4 East
   Paramus NJ 07652
   PHONE # 201-571-3500 EMAIL:

2. NAME OF APPLICANT:
   APPLICANT ADDRESS:
   PHONE # 732-349-8499

GIRTAIN SIGN CO.
1765 RT. 9
TOMS RIVER N.J.
08755

3. RESPONSIBLE PERSON FOR WORK: A Girtain
   PHONE # 732-349-8499 FAX # 732-505-3673

4. SIGNATURE OF APPLICANT:

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 50-
OTHER: $
TOTAL: $ 50-

REQUIRED BY APPLICANT

RESIDENTIAL:
COMMERCIAL: X
EXISTING USE: Vacant Lot
PROPOSED USE: Commercial

BOARD APPROVAL: ___ PB ___ ZB
RESOLUTION#:
APPROVAL DATE:

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE) Signs Installed

*NEW BUILDING: *ADDITION *ALTERATION *PORCH *DECK

POOL: ABOVE GROUND IN GROUND FENCE: HEIGHT TYPE MATERIAL

HEIGHT: (*IF APPLICABLE)

OTHER Signs

DESCRIPTION (2) Signs @ Front (1) Side 78sq ft each

ZONING REVIEW:
DATE REVIEWED: 3-14-17 DATE DENIED: DATE APPROVED: 3-14-17 INIT'S: AM

(SEE BACK PAGE)

TOWNSHIP OF BRICK ZONING CHECKLIST

1) **Three (3) copies of plot plan containing:**

- All existing and proposed structures
- All dimensions of the lot and structures
- All setbacks from the structures to the property lines
- All adjacent streets and waterways
- If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

2) **Two copies of the plans with dimensions and heights noted:**

- Floor plans and elevations
- Signed site plans
- Property map
- Survey map

Choose which is applicable for submission

3) **Plot plans and building plans must match for complete review**

NOTE: NO PARTIAL, TAPED, FAXED, REDUCED OR ENLARGED COPIES CAN BE ACCEPTED

01/2010

OFFICE USE ONLY

RECEIVED
MAR 15 2017
ZONING JG26

ZONING REVIEW:

DATE REVIEWED: 3/10/17 DATE DENIED: — DATE APPROVED: 3/10/17 INTLS: JG26

DATE:	COMMENTS:	INITIALS:
3/10/17	SENT TO comm	JG26

245 Attachment 5

Township of Brick

SCHEDULE OF AREA, YARD AND BUILDING REQUIREMENTS
Township of Brick
Ocean County, New Jersey

[Amended 6-26-1979 by Ord. No. 354-2B-79; 4-22-1980 by Ord. No. 354-2H-80; 10-14-1980 by Ord. No. 354-2N-80; 9-23-1980 by Ord. No. 354-1B-80; 8-25-83 by Ord. No. 354-2SS-83; 11-5-1984 by Ord. No. 354-2-AAA-84; 11-5-1984 by Ord. No. 354-2CCC-84; 6-24-1986 by Ord. No. 354-2WWW-86; 9-13-1988 by Ord. No. 354-2TTTT-88; 9-27-1988 by Ord. No. 354-2XXXX-88; 9-12-2000 by Ord. No. 354-2EE-00; 5-9-2000 by Ord. No. 354-2Z-00; 3-26-2002 by Ord. No. 354-2C-02; 11-26-2002 by Ord. No. 354-2L-02; 3-25-2003 by Ord. No. 354-2D-03; 6-13-2006 by Ord. No. 19-06]

	Minimum Lot Size						Minimum Required Yard Depth												
	Interior Lots			Corner Lots			Principal Building				Accessory Building		Maximum Lot Coverage by Building	Maximum Building Height				Minimum Floor/ Building Area (square feet) 2 stories/1 story	Maximum Allowable Impervious Coverage
Zone	Area (square feet)	Width (feet)	Depth (feet)	Area (square feet)	Width (feet)	Depth (feet)	Front Yard (feet)	Side Yard, Each (feet)	Both Sides Combined (feet)	Rear Yard (feet)	Side Yard (feet)	Rear Yard[3] (feet)		Stories	Eaves (feet)	Feet	Ridge (feet)		
R-R	40,000	150	150	40,000	150	150	50	25		50	25	25	25%	–	25			–	
RR-2	See § 245-90.																		
RR-3	See § 245-103.																		
R-20	20,000	100	125	25,000	100	125	40	15	–	40	10	10	25%	–	25	35	38.5	–	
R-15	15,000	100	115	17,250	100	115	35	12	–	35	10	10	25%	–	25	35	38.5	–	
R-10	10,000	90	100	10,500	100	100	30	6	20	20	5	5	30%	–	25	35	38.5	–	
R-7.5	7,500	75	90	9,000	75	90	25	6	15	15	5	5	30%	–	25	35	38.5	–	
R-5	5,000	50	75	6,000	50	75	20	5	12	15	5	5	35%	–	25	35	38.5	–	
O-P	15,000	100	150	15,000	100	150	50	10	–	50	20	50	35%[2]	2	–	35	38.5	1,500	70%
B-1	10,000	100	90	12,500	100	125	30	10	–	20	10	20	30%[2]	2	–	35	38.5	1,000	60%
B-2	20,000	125	125	20,000	125	125	50	10	–	50	10	50	30%[2]	2	–	35	38.5	2,000	65%
B-3	2 acres	200	200	2 acres	200	200	75	30	–	50	20	50	25%[2]	–	–	35	38.5	2,000	65%
B-4	5 acres	300	300	–	–	–	100	50(150[1])	–	100(150[1])	20	50	25%	3	–	35	38.5	30,000	70%
M-1	5 acres	300	300	5 acres	300	300	100	50	–	150	75	150	30%[2]	–	–	35	38.5	5,000	65%
R-M	25 acres	350	200	–	–	–	50	50	–	30	30	30	20%	–	25	35	38.5	–	65%
O-P-T	40,000	150	150	40,000	150	150	50	20	–	50	20	50	25%[2]	2	–	35	38.5	2,000	50%
H-S	See § 245-261.													–	–	–	–		70%

NOTES:

1. If adjacent to residential zone or use.
2. The maximum lot coverage shall refer only to that percentage of an affected lot which is suitable for building.
3. For rear yard setback requirements for accessory buildings on waterfront property, see § 245-10D.

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1336

Date Issued: 3/28/17
Application Number: ZA-17-00287
Application Date: 03/13/2017
Project Number:
Permit Number: ZP17-00375
Fee: $75.00

Zoning Permit

Worksite Location: **744 ROUTE 70**
Brick Township, NJ 08723

Block: **701**
Lot: **7**
Qualifier:
Zone: **B-3**

Owner: **BRICKTOWN UE LLC**
Address: **210 ROUTE 4 EAST**
PARAMUS, NJ 07652

Applicant: **GIRTAIN SIGN CO.**
Address: **1765 Route 9**
TOMS RIVER, NJ 08753-

Application Approved Date: 03/14/2017

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

Use is: Retail Store (Kirkland's)
Nonconforming Use is:

Work Description:
Sign - Installation of (2) custom dimensional letter signs on the storefront facade.

(1) Front sign 78 sq. ft.
(1) Side sign 78 sq. ft.

The sign area shall not exceed a maximum 15% of each first floor building facade.

Additional Zoning Permit is required for additional work or signage.

Upon review it was determined that the Zoning Permit:

☑ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Valid Nonconforming Use is established by
  ☐ Zoning Board of Adjustment
  ☐ Zoning Officer

Christopher J. Romano, Assistant Zoning Officer — 03/14/2017 Date

Sean Kinnevy, Zoning Officer — 3/10/17 **Date**

GIRTAIN SIGN COMPANY, LLC

1765 ROUTE 9 TOMS RIVER, NJ 08755
732-349-8499
Fax 732-505-3673 1-800-834-8499
Three Generations
A LIMITED LIABILITY COMPANY
ELECTRICAL CONTRACTOR LIC.# 34EB01290800

March 2, 2017

1. Name of Business: **KIRKLAND'S**

Address of Site: **744 NJ ROUTE 70**
BRICK, NJ 08723

Block: **701** Lot: **15**

Owner of Property:

Name: Bricktown UE LLC

Address: 210 Route 4 East, Paramus, NJ 07652

Phone: 201-571-3500

Dear Zoning:

This letter is to inform you that I (the property owner) give permission to Girtain Sign Company to install a new sign at the above listed property.

Sincerely,

Signature

Aaren Olsen

Print Name