BLOCK 701 LOT 7 ADDRESS (SITE) 744 712 RT. 70 PERMIT NO. 12-1459

CONSTRUCTION PERMIT APPLICATION

C12-000881

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

I. IDENTIFICATION

1. Proposed Work-site at: 744 712 RT. 70 Unit #11
2. Name of Owner Pizza Pizza Tel. (732) 575-7558
   Address 712 RT. 70 BRICK (street / municipality / zip code)
3. Ownership Public ____ Private ✓
4. Principal Contractor: MARK-O-Lite Sign Co. Tel. (732) 462-8530
   Address 1420 Rt. 9 South Howell N.J. 07731
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Federal Emp. No. 22-2239194 Social Security No. ____
5. Architect or Engineer ____ Tel. (___) ____
   Address ____
6. Responsible Person in Charge of Work Howard Mark Tel. (732) 462-8530

COMMERCIAL

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	75.- ✓		
2. Electrical		40. ✓		
3. Plumbing				
4. Fire Protection				
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review		6.-		
8. Subtotal	$			
9. DCA Training Fee				
10. Subtotal	$			
11. Cert. of Occupancy				
12. Other. N				
13. TOTAL	$	121.-		

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. Construction Classification	
7. Total Land Area Disturbed ____ sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ____ ft.	
10. Wetlands yes ____ sq. ft. / no ____	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

	Est. Cost	Plans Rec'd	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor work (single trade)									
2. ☐ Small Job ($5,000 and no prior approvals)		MAR 19 2012		4/5/12			5/29/12		
3. ☐ New Building									
4. ☐ Addition									
5. ☐ Alteration									
6. ☐ Fire Protection									
7. ☐ Plumbing					4-5-12	JS			
8. ☐ Electrical									
9. ☐ Elevator Devices									
10. ☐ Asbestos Abatement		Emp Exempt			4/6/12	ECC			
11. ☐ Demolition									
TOTAL COSTS	3500-								

OPTIONAL (for office use only)

III. DO YOU WANT: (optional) 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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction ____
After Construction ____
Net gain or loss ____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

U.C.C. Form F-1008

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(e)1.vii:

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 New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(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.

(X) Check if contractor.

Agent Name MARK-O-Lite Sign Co.

Address 1420 Rt 9 South
Howell NJ 07731

Telephone (732) 462-8530

Signature H. Mark Date 3/16/12

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 10/22/2012
Control Number C-12-000881
Permit Number 12-1459
Permit Issue Date 6/1/2012
Certificate Number 12-1459

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 744 ROUTE 70 (912) Unit #11 Formerly real estate Brick Township, NJ Block: 701 Lot: 7 Qual:

Owner in Fee: BRICKTOWN VF LLC %VORNADO REALTY

Owner Address: 210 ROUTE 4 EAST PARAMUS NJ 07652

Telephone: (732) 515-7554

Contractor MARK O LITE SIGN CO

Address 1420 RT 9 SOUTH HOWELL NJ 07731-

Telephone: (732) 462-8530 Fax:

License Number or Builders Registration Number: Federal Emp. Number: 22-2239194

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: SIGN INSTALLATION Pizzo Pizza Building

Certificate Comments:

☐ **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:

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 10/22/2012 U.C.C. F260 (rev. 08/05)

6-1-12

12-1459

CONSTRUCTION PERMIT

Date Issued
Control # C-12-000881
Permit #

IDENTIFICATION Block: 701 Lot: 7 Qualifier

Work Site Location: 744 ROUTE 70 (912) Unit #11 Formerly real estate
Brick Township, NJ

Owner in Fee: BRICKTOWN VF LLC %VORNADO REALTY
210 ROUTE 4 EAST PARAMUS NJ 07652

Telephone: (732) 515-7554

Contractor: MARK O LITE SIGN CO
Address: 1420 RT 9 SOUTH HOWELL NJ 07731-

Telephone: (732) 462-8530
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 22-2239194

Is hereby granted permission to perform the following work:

- [x] BUILDING
- [ ] PLUMBING
- [ ] LEAD HAZARD ABATEMENT
- [x] ELECTRICAL
- [ ] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
SIGN INSTALLATION Pizzo Pizza
Building

PAYMENTS (Office Use Only)

Building	$75
Electrical	$40
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$6
CO Fee	
Other	$0
Total	$121
Check No.	6931
Cash	$0
Credit	$0
Collected By	

+50
171.-

Note: If constuction 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 $3,750

Construction Official

5-30-12
Date

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

6/1/12

#1459
BUILDING $75.00
ELEC $40.00
DCA $6.00
CHECK $121.00

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

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.

BUILDING SUBCODE TECHNICAL SECTION

Date Received 6-1-12
Date Issued
Control #
Permit # 12-1459

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

Block 701 Lot 7
Work Site Location ~~342~~ 744 RT. 70 Unit # 11
Owner in Fee PIZZA PIZZA
Address 712 RT. 70
BRICK, N.J.
Tele. (732) 575-7554
Contractor MARK-O-LITE SIGN CO.
Address 1420 RT. 9 South
Howell NJ 07731
Tele. (732) 462-8530
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2239194 or Social Security No.

COMMERCIAL

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.

H. Mark
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALL SIGN ON BLDG.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[X] Other	5/29/12	~~AA~~

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: ~~10/11/12~~ 10/16/12
Approved By: ~~AA~~

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other		N		
Final			10-16-12	L.P.

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (6' or over)
[X] Sign 36 Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement
[ ] Other _____
[ ] Other _____
[ ] Demolition

(Office Use Only) FEE

$ _____

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Alteration $ _____
3. Total (1+2) $ 3500.-

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ DCA TRAINING FEE $ _____
TOTAL FEE $ _____

U.C.C. Form F-110B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 6-1-12

Date Issued / Permit # 12-1459

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

Block 701 Lot 7 Qualification Code

Work Site Location ~~744~~ 744 RT. 70 Unit # 11

Owner in Fee PIZZO PIZZA

Address 712 RT. 70 BRICK, NJ.

Tel (732) 575-7559

Contractor STORM ELECTRIC

Address 45 SAMANTHA DR MORGANVILLE NJ

Tel (732) 591-0215 FAX ( )

Contractor License No. 12986

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 250.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[/] No Plans Required Date 4-12-12 Initial

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 10-4-12

Approved by: JD

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			10-2-12	JD
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's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
1	20AMP	KW Elec. Sign/Outline Light	
CONNECT NEW SIGN TO EXISTING LINE			

COMMERCIAL

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

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued: 6-1-12
Application Number: ZA-12-00259
Application Date: 04/02/2012
Project Number:
Permit Number: 12-00462
Fee: $50

Zoning Permit

Worksite Location: **744 ROUTE 70**
Brick Town Center - Unit No.11
Brick Township, NJ 08723

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

Owner: **BRICKTOWN VF LLC %VORNADO REALTY**
Address: **210 ROUTE 4 EAST**
PARAMUS, NJ 07652

Applicant: **Howard Mark; Mark-O-Lite Sign Compnay**
Address: **1420 Route 9**
Howell, NJ 07731

Application Approved Date: 04/02/2012

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

Use is: Restaurant -"PIZZOPIZZA" (former Mary Holder Agency).
Nonconforming Use is:

Work Description:
Sign - Facade sign, 3' x 12', "PIZZOPIZZA".

The total sign area shall not exceed 15% of the total facade area.

The street address/unit number shall be displayed on the facade, the front door, and the back door.

An additional zoning permit and a construction permit are required for the proposed restaurant use.

Upon review it was determined that:

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

06/01/12 3:39PM [illegible]
[illegible] SERV 002
#00462
ZPA $50.00
CHECK $50.00

Sean Kinnevy, Zoning Officer — 04/02/2012 Date

Michael P. Fowler, Township Planner — 6/2/12 Date

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 6-1-12

Date Issued / Permit # 12-14159

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

Block 701 Lot 7 Qualification Code

Work Site Location ~~712~~ 744 RT. 70 UNIT # 11

Owner in Fee PIZZA PIZZA

Address 712 RT 70
BRICK, NJ.

Tel (732) 575-7554

Contractor STORM ELECTRIC

Address 45 SHAWNTAH DR
MORGANVILLE NJ

Tel (732) 341-0215 FAX ( )

Contractor License No. 13486

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 250.00

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's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
1	20AMP	KW Elec. Sign/Outline Light	
CONNECT NEW SIGN TO EXISTING LINE			

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[/] No Plans Required Date 4-5-12 Initial JS

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [/] CA

Date:

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control # C-1-12

Date Issued
Permit # 12-1459

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

Block 701 Lot 7 Qualification Code

Work Site Location ~~7X2~~ RT 70

Owner in Fee PIZZA PIZZA

Address 712 RT 70

BRICK, NJ

Tel (732) 575-7554

Contractor [illegible] ELECTRIC

Address [illegible]

[illegible]

Tel (732) 341 0315 FAX ( )

Contractor License No. 12456

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 250.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[✓] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] 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's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
1	20AMP	KW Elec. Sign/Outline Light	
CONNECTION TO EXISTING LINE			

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

6-1-12
12-14159

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

Block 701 Lot 7
Work Site Location ~~Rt~~ 144 RT. 70 WALL
Owner in Fee PIZZA PIZZA
Address 712 RT 70
BRICK, N.J.
Tele. (732) 575-7576
Contractor Mark-O-Lite Sign Co.
Address 1420 Rt. 9 South
Howell NJ 07731
Tele. (732) 462-8530
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2239194 or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[X] Other	6/1/12	
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Alteration $ _____
3. Total (1+2) $ 3500-

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.

H. Mark
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALL SIGN ON BLDG.

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (6' or over)
[X] Sign 36 Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement
[ ] Other _____
[ ] Other _____
[ ] Demolition

(Office Use Only)
FEE
$ _____

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ DCA TRAINING FEE $ _____
TOTAL FEE $ _____

U.C.C. Form F-1108 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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

Block 741 Lot 7
Work Site Location 742 R T 9
Owner in Fee [illegible]
Address 742 Rt 9
Brick NJ
Tele. (732) 570-7[illegible]
Contractor Mark-O-Lite Sign Co.
Address 1420 Rt. 9 South
Howell NJ 07731
Tele. (732) 462-8530
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2239194 or Social Security No.

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.

H. Mark
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

[illegible] Sign

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (6' or over)
- [X] Sign 36 Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement
- [ ] Other
- [ ] Other

[ ] Demolition

(Office Use Only)
FEE
$

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Alteration $ _____
3. Total (1+2) $ 300.00

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ DCA TRAINING FEE $ _____
TOTAL FEE $ _____

U.C.C. Form F-110B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

RECEIVING CLERK _____
DATE REC'D 4-2-12

ZONING PERMIT APPLICATION

PERMIT # 12-00462
DATE ISSUED 6-1-12

BLOCK: 701 LOT: 7 QUALIFIER: — SITE ADDRESS: 712 RT. 70

IDENTIFICATION:

1. NAME OF OWNER IN FEE: PIZZO PIZZA
   COMPLETE ADDRESS: 712 RT. 70 BRICK, N.J.
   PHONE # 732-575-7554 EMAIL: _____

2. NAME OF APPLICANT: HOWARD MARK / MARK-O-LITE SIGN CO.
   APPLICANT ADDRESS: 1420 R.T. 9 SOUTH HOWELL, N.J.
   PHONE # 732-462-8530 EMAIL: _____

3. RESPONSIBLE PERSON FOR WORK: HOWARD MARK
   PHONE# 732-462-8530 FAX# 732-409-3772

4. SIGNATURE OF APPLICANT: H. Mark

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 50.00
OTHER: $ _____
TOTAL: $ _____

REQUIRED BY APPLICANT

RESIDENTIAL: _____
COMMERCIAL: ✓
EXISTING USE: REALTOR (MANY HOMES)
PROPOSED USE: PIZZA PARLOR

COMMERCIAL

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

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

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

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____

HEIGHT: _____ (*IF APPLICABLE)

OTHER INSTALL SIGN ON BUILDING

DESCRIPTION: _____

ZONING REVIEW:
DATE REVIEWED: 4-2-12 DATE DENIED: — DATE APPROVED: 4-2-12 INTLS: JG

(SEE BACK PAGE)

TOWNSHIP OF BRICK ZONING CHECKLIST

1) **Two (2) 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

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]

Zone	Minimum Lot Size						Minimum Required Yard Depth						Maximum Lot Coverage by Building	Maximum Building Height				Minimum Floor/ Building Area (square feet) 2 stories/1 story	Maximum Allowable Impervious Coverage
	Interior Lots			Corner Lots			Principal Building				Accessory Building								
	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.

OFFICE USE ONLY

RECEIVED
APR 2 2012

ZONING REVIEW:

DATE REVIEWED: 4-2-12 DATE DENIED: — DATE APPROVED: 4-2-12 INTLS: JKZ

DATE:	COMMENTS:	INITIALS:

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued:
Application Number: ZA-12-00259
Application Date: 04/02/2012
Project Number:
Permit Number:
Fee: $50

Zoning Permit

Worksite **744 ROUTE 70**
Location: **Brick Town Center - Unit No.11**
Brick Township, NJ 08723

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

Owner: **BRICKTOWN VF LLC %VORNADO REALTY**
Address: **210 ROUTE 4 EAST**
PARAMUS, NJ 07652

Applicant: **Howard Mark; Mark-O-Lite Sign Compnay**
Address: **1420 Route 9**
Howell, NJ 07731

Application Approved Date: 04/02/2012

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

Use is: Restaurant -"PIZZOPIZZA" (former Mary Holder Agency).
Nonconforming Use is:

Work Description:
Sign - Facade sign, 3' x 12', "PIZZOPIZZA".

The total sign area shall not exceed 15% of the total facade area.

The street address/unit number shall be displayed on the facade, the front door, and the back door.

An additional zoning permit and a construction permit are required for the proposed restaurant use.

Upon review it was determined that:

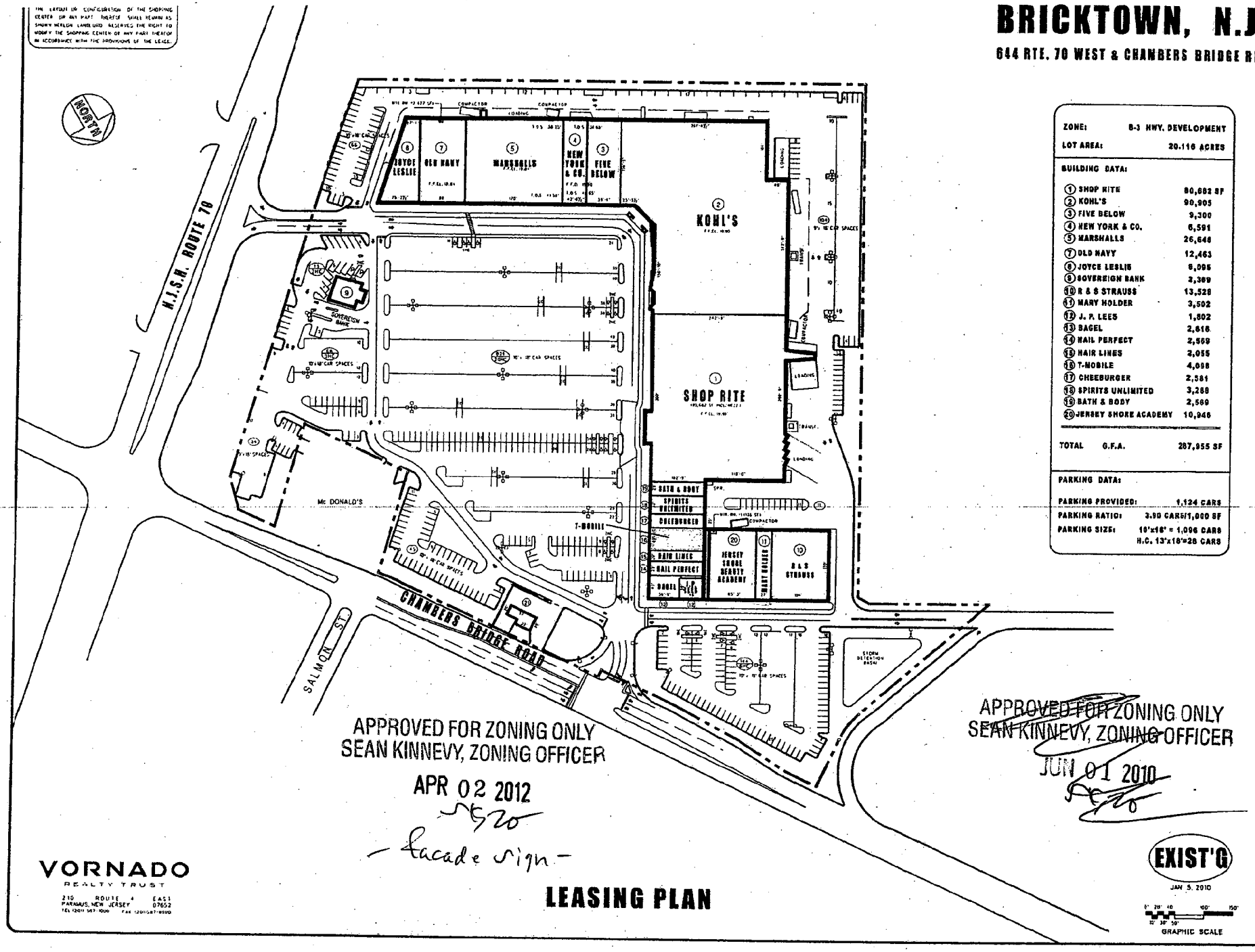
- ☑ Use is permitted by Ordinance
- ☐ Use is permitted by Variance approved on:_____
- ☐ Valid Nonconforming Use is established by
  - ☐ Zoning Board of Adjustment
  - ☐ Zoning Officer

Sean Kimeyy, Zoning Officer — 04/02/2012 Date

Michael P. Fowler, Township Planner — **Date** 4/2/12

BRICKTOWN, N.J.

644 RTE. 70 WEST & CHAMBERS BRIDGE RD.



ZONE:	B-3 HWY. DEVELOPMENT
LOT AREA:	20.116 ACRES

BUILDING DATA:

(1) SHOP RITE	80,682 SF
(2) KOHL'S	90,905
(3) FIVE BELOW	9,300
(4) NEW YORK & CO.	6,591
(5) MARSHALLS	26,646
(7) OLD NAVY	12,463
(8) JOYCE LESLIE	6,095
(9) SOVEREIGN BANK	2,369
(10) R & S STRAUSS	13,528
(11) MARY HOLDER	3,502
(12) J. P. LEES	1,802
(13) BAGEL	2,616
(14) NAIL PERFECT	2,569
(15) HAIR LINES	2,055
(16) T-MOBILE	4,098
(17) CHEESBURGER	2,581
(18) SPIRITS UNLIMITED	3,268
(19) BATH & BODY	2,569
(20) JERSEY SHORE ACADEMY	10,946
TOTAL G.F.A.	287,955 SF

PARKING DATA:

PARKING PROVIDED:	1,124 CARS
PARKING RATIO:	3.90 CARS/1,000 SF
PARKING SIZE:	10'x16' = 1,096 CARS H.C. 13'x18'=28 CARS

APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
APR 02 2012

- facade sign -

~~APPROVED FOR ZONING ONLY~~
~~SEAN KINNEVY, ZONING OFFICER~~
JUN 01 2010

EXIST'G

JAN. 5, 2010

GRAPHIC SCALE

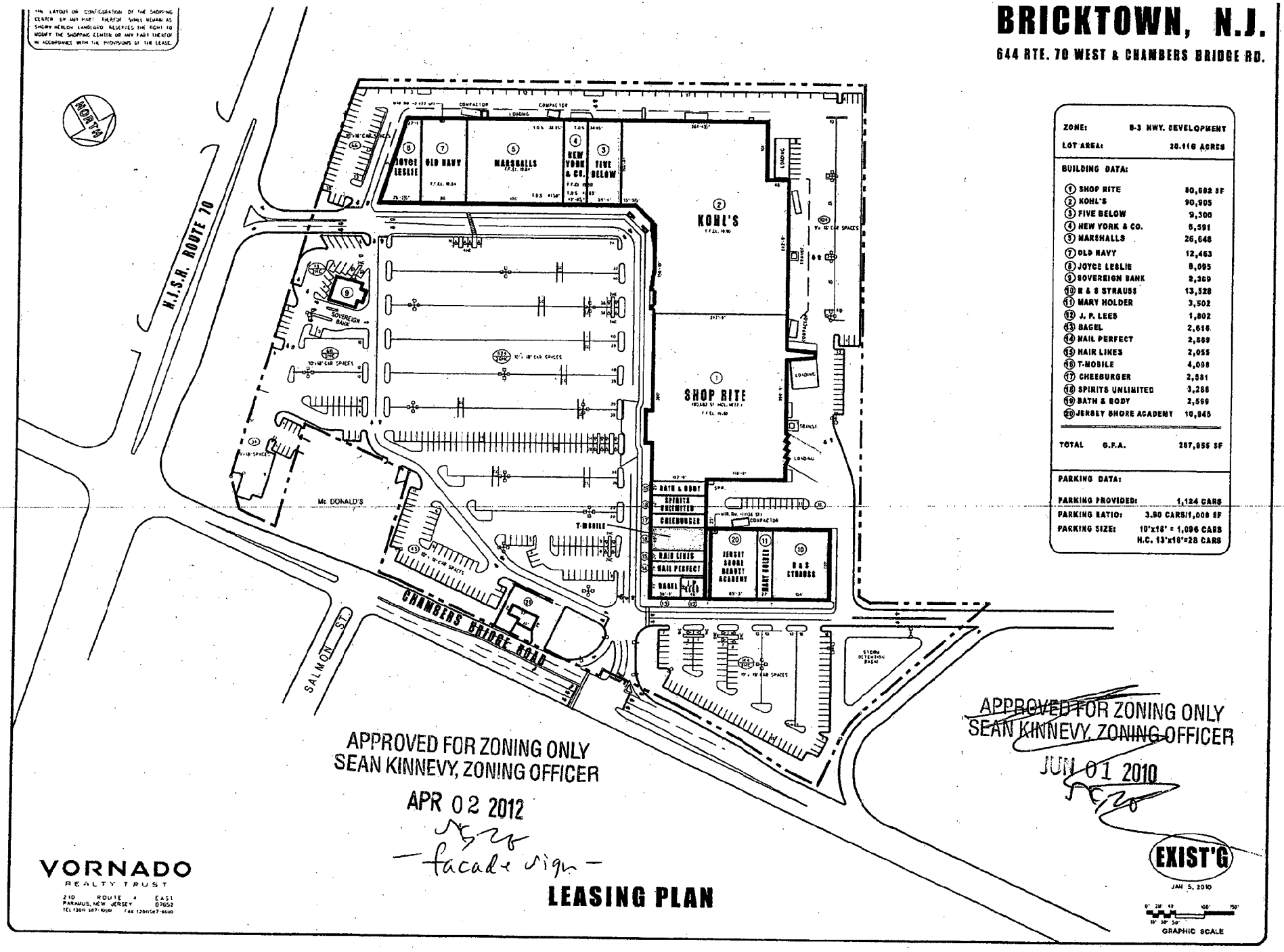
VORNADO
REALTY TRUST
210 ROUTE 4 EAST
PARAMUS, NEW JERSEY 07652

LEASING PLAN

BRICKTOWN, N.J.

644 RTE. 70 WEST & CHAMBERS BRIDGE RD.

THE LAYOUT OR CONFIGURATION OF THE SHOPPING CENTER OR ANY PART THEREOF SHALL REMAIN AS SHOWN HEREON. LANDLORD RESERVES THE RIGHT TO MODIFY THE SHOPPING CENTER OR ANY PART THEREOF IN ACCORDANCE WITH THE PROVISIONS OF THE LEASE.



ZONE:	B-3 HWY. DEVELOPMENT
LOT AREA:	28.116 ACRES
BUILDING DATA:	
(1) SHOP RITE	80,682 SF
(2) KOHL'S	90,905
(5) FIVE BELOW	9,300
(4) NEW YORK & CO.	6,591
(5) MARSHALLS	26,648
(7) OLD NAVY	12,463
(8) JOYCE LESLIE	8,095
(9) SOVEREIGN BANK	2,369
(10) B & S STRAUSS	13,528
(11) MARY HOLDER	3,502
(12) J. P. LEES	1,802
(13) BAGEL	2,616
(14) NAIL PERFECT	2,569
(15) HAIR LINES	2,055
(16) T-MOBILE	4,098
(17) CHEEBURGER	2,581
(18) SPIRITS UNLIMITED	3,286
(19) BATH & BODY	2,569
(20) JERSEY SHORE ACADEMY	10,945
TOTAL G.F.A.	287,955 SF
PARKING DATA:	
PARKING PROVIDED:	1,124 CARS
PARKING RATIO:	3.90 CARS/1,000 SF
PARKING SIZE:	10'x18' = 1,096 CARS H.C. 13'x18'=28 CARS

APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
APR 02 2012
-facade sign-

APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
JUN 01 2010

EXIST'G
JAN 5, 2010

GRAPHIC SCALE

LEASING PLAN

VORNADO
REALTY TRUST
210 ROUTE 4 EAST
PARAMUS, NEW JERSEY 07652
TEL (201) 587-1000 FAX (201) 587-8600

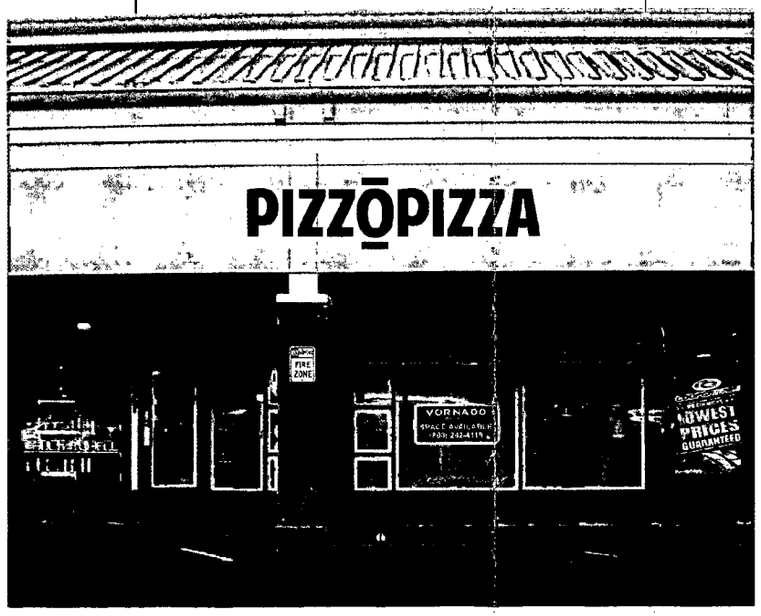
PizzoPizza
712 Rte. 70
Brick, N.J. 08723
Block: 701 / Lot: 7

12'-0"

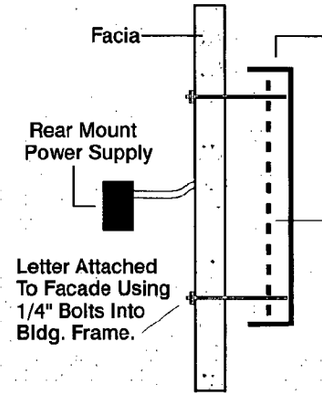
PIZZOPIZZA

3'-0"

25'-0"



24'-0"



APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
APR 02 2012

MARK-O-LITE SIGN CO., INC.

Scale: | Date:

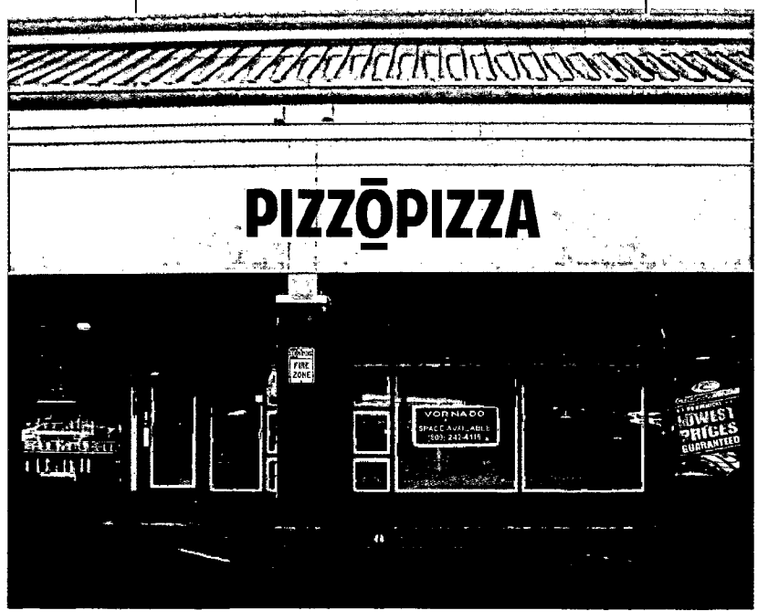
PizzoPizza
712 Rte. 70
Brick, N.J. 08723
Block: 701 / Lot: 7

12'-0"

PIZZOPIZZA

3'-0"

25'-0"



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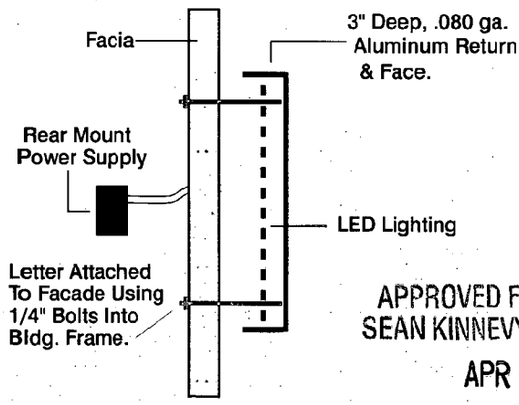


APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
APR 02 2012

MARK-O-LITE SIGN CO., INC.

Scale:	Date:

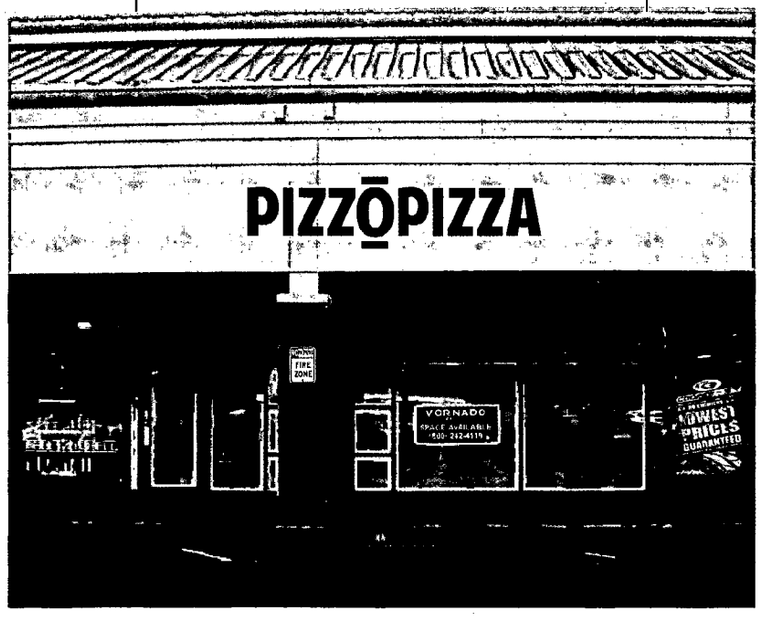
PizzoPizza
712 Rte. 70
Brick, N.J. 08723
Block: 701 / Lot: 7

12'-0"

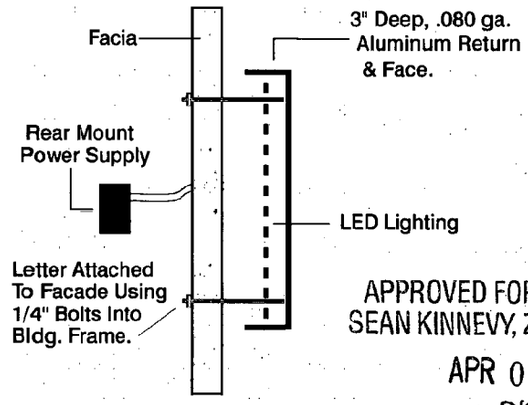
PIZZOPIZZA

3'-0"

25'-0"



24'-0"



APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
APR 02 2012

MARK-O-LITE SIGN CO., INC.

Scale:	Date:

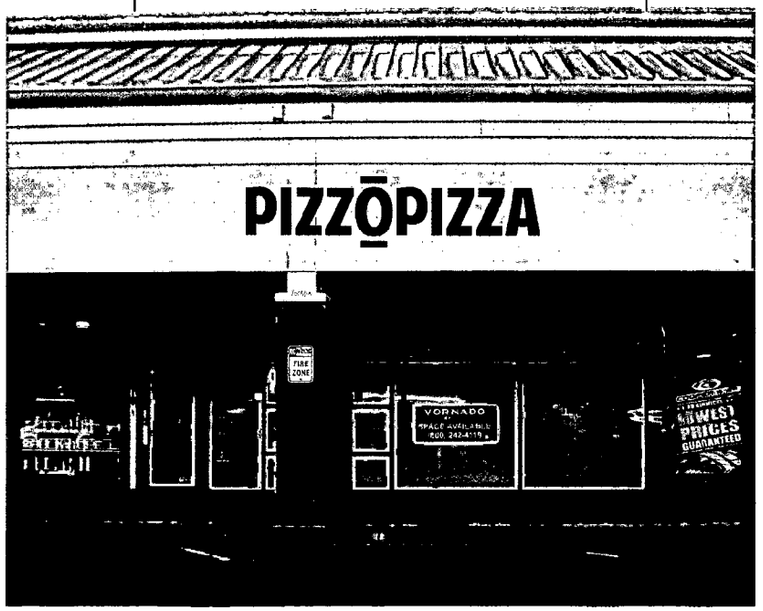
PizzoPizza
712 Rte. 70
Brick, N.J. 08723
Block: 701 / Lot: 7

12'-0"

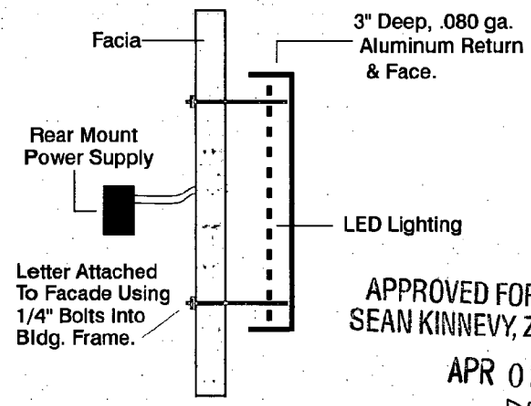
PIZZOPIZZA

3'-0"

25'-0"



24'-0"



APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
APR 02 2012

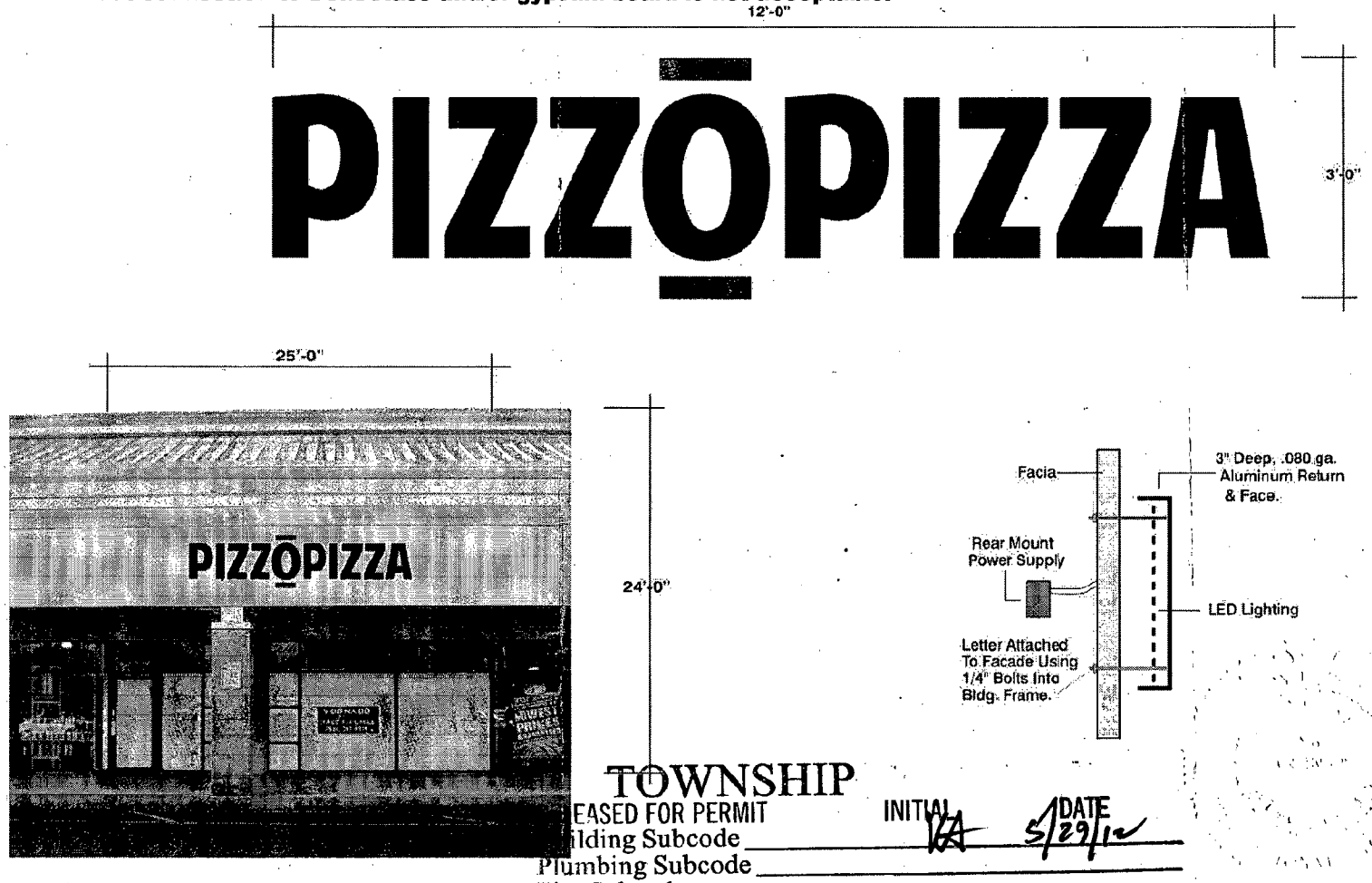
MARK-O-LITE SIGN CO., INC.

Scale:	Date:

Connection Notes:

1.) Provide a minimum of five (5) ¼" diameter thru-bolts with wide flange washer on inside of wall per letter.
2.) Alternate connection, provide a minimum of six (6) ¼" diameter toggle bolts per letter, evenly spaced.
3.) Thru-bolt and toggle connections require a minimum of ½" thk. Plywood in wall, provide backer if necessary, direct connection to DensGlass and/or gypsum board is not acceptable.

PizzoPizza
712 Rte. 70
Brick, N.J. 08723
Block: 701 / Lot: 7



Designed per IBC - NJ 2006
Snow Loads:
Ground Snow Load.....Pg-20 psf
Snow Exposure Factor...Ce=1.0
Snow Load Importance..Is=1.1
Thermal Factor.....Ct=1.0

Wind Loads:
Basic Wind Speed.....115 mph
Wind Importance Factor..I=1.15
Wind Exposure.....C
Interal Pressure Coef.....GCPI-/-0.18

Exterior Components designed in accordance with applicable provisions of the ASCE 7-98

Murdoch Engineering
8308 Avalon Ct.
West Long Branch, NJ 07764
(973)-570-8215

Jere Murdoch, P.E.
Professional Engineer
NJ P.E. License #48980

MARK-O-LITE SIGN CO., INC.
Scale: Date:

TOWNSHIP
EASED FOR PERMIT INITIAL DATE 5/29/12
ilding Subcode _____
Plumbing Subcode _____
Fire Subcode _____
Electrical Subcode _____
Plan Reviewer _____
Plans Released _____
Construction Official _____

4/5/12 Call - 732-462-8530 Howard Cont - Will bring ex plans

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1027

Subcode Official Review

05-23-12 FAX # 732-262-4901

To: 210 ROUTE 4 EAST PARAMUS, NJ 07652 CC:

RE: Building Subcode
Block: 701 Lot: 7 Qual:
744 ROUTE 70 (912) Unit #11
Permit Number: Control Number: C-12-000881
Last Submit Date: Thursday, April 05, 2012

Date: Thursday, April 05, 2012

Dear BRICKTOWN VF LLC %VORNADO REALTY,

The following comments were made during the Plan Review process:

Provide 2 sets of signed/sealed plans by NJ engioneer or architect.

Sincerely,

K Anderson 4/5/12

Kenneth Anderson, Subcode Official

RESUBMIT CR
SUBCODES Building
DATE 5-29-12

****
*** FAX TX REPORT ***
****

TRANSMISSION OK

JOB NO.	0210
DESTINATION ADDRESS	97322624901
PSWD/SUBADDRESS	
DESTINATION ID	
ST. TIME	05/23 14:13
USAGE T	00'19
PGS.	1
RESULT	OK

4/5/12 Call - 732-462-8530 Howard Cort - ↗ Well survey explains

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1027

Subcode Official Review

05-23-12 fax #732-262-4901

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Sincerely,

4/5/12

Kenneth Anderson, Subcode Official

CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block 701 Lot 7

Work Site Location 712 RT. 70

Owner in Fee PIZZO PIZZA
Address 712 RT 70
BRICK, N.J.
Tele. (732) 525-5554

Contractor MARK-O-Lite Sign Co
Address 1420 Rt. 9 South
Howell NJ 07731
Tele. (732) 462-8530
Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____
Federal Emp. No. 22-2239194
or Social Security No. _____

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [X] OTHER SIGN
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

INSTALL SIGN ON BLDG

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 $ 3500-

CONSTRUCTION OFFICIAL

PAYMENTS **(Office Use Only)**

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA Training Fee _____
Cert. of Occ. _____
Other _____
Total _____
Check No. _____
Cash _____
Collected By: _____

(see reverse side)

U.C.C. Form F-170C 1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT

CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block 701 Lot 7

Work Site Location 712 RT. 70

Owner in Fee PIZZO PIZZA
Address 712 RT 70
BRICK, N.J.
Tele. (732) 505-5554

Contractor MARK-O-Lite Sign Co
Address 1420 Rt. 9 South
Howell NJ 07731
Tele. (732) 462-8530
Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____
Federal Emp. No. 22-2239194
or Social Security No. _____

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [X] OTHER Sign
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

INSTALL SIGN ON BLDG

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 $ 3500-

CONSTRUCTION OFFICIAL

PAYMENTS **(Office Use Only)**	
Building	
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	
Check No.	
Cash	
Collected By:	

(see reverse side)

U.C.C. Form F-170C 1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT

CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block 701 Lot 7

Work Site Location 712 RT 70

Owner in Fee PIZZA PIZZA
Address 712 RT 70
BRICK NJ
Tele. (732) 570-5564

Contractor MARK-O-Lite Sign Co
Address 1420 Rt. 9 South
Howell NJ 07731
Tele. (732) 462-8530
Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____
Federal Emp. No. 22-2239194
or Social Security No. _____

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [X] OTHER SIGN
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

INSTALL SIGN ON BLDG

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 $ 3500-

CONSTRUCTION OFFICIAL

PAYMENTS **(Office Use Only)**

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA Training Fee _____
Cert. of Occ. _____
Other _____
Total _____
Check No. _____
Cash _____
Collected By: _____

(see reverse side)

U.C.C. Form F-170C 1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT

CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block 7.01 Lot 7

Work Site Location 710 RT 7

Owner in Fee [illegible]
Address [illegible]
Tele. ( ) [illegible]

Contractor MARK-O-Lite Sign Co
Address 1420 Rt. 9 South
Howell NJ 07731
Tele. (732) 462-8530
Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____
Federal Emp. No. 22-2239194
or Social Security No. _____

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [X] OTHER Sign
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

Install 1 S.F. on Pole

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 $ 3[illegible]

CONSTRUCTION OFFICIAL

PAYMENTS **(Office Use Only)**	
Building	
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	
Check No.	
Cash	
Collected By:	

(see reverse side)

U.C.C. Form F-170C 1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT