

BLOCK 670 LOT 4 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 08-2279



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: Kennedy Mall Assoc. 2070 Hoopesville
2. Name of Owner in Fee: Tenant
Tel. (973) 966-2800 e-mail _____
Address 641 Champike Rd street municipality NJ, 07928 zip code _____
3. Ownership in Fee: Public ☒ Private _____
4. Principal Contractor: H. Lums Tel. (917) 567-9608
Address _____ e-mail _____
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____ FAX: (____) _____
5. Architect or Engineer _____ Contact _____
Address _____ e-mail _____
Tel. (____) _____ FAX: (____) _____
6. Responsible Person in Charge once Work has Begun _____
Tel. (____) _____ FAX: (____) _____

V. FEE SUMMARY (for office use only)

	Update	Update
1. Building	\$ <u>40</u>	
2. Electrical		
3. Plumbing		
4. Fire Protection		
5. Elevator Devices		
6. Subtotal		
Less 20% for State Plan Review		
8. Subtotal		
9. State Permit Surcharge Fee		
10. Subtotal		
11. Cert. of Occupancy		
12. Other <u>ZA</u>		
13. TOTAL	\$ <u>70</u>	

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

(office use only)

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)

- ☐ Building
☐ Electrical
☐ Plumbing
☐ Fire Protection
☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
	<u>VB</u>	<u>7/19/08</u>		<u>7-22-08 PM</u>		<u>2-25-09</u>		
	<u>ENG</u>	<u>7/18/08</u>		<u>7/18/08</u>				

TOTAL COSTS 1500.00

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group: _____
3. Change in Use Group, Indicate Former: _____
4. No. of dwelling units: All Units Income-restricted
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group: _____
3. Change in Use Group, Indicate Former: _____

C. MIXED USE -List secondary use(s):

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 3/23/2009
Control Number C-08-003351
Permit Number 08-2279
Permit Issue Date 7/25/2008
Certificate Number 08-2279

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 2770 HOOPER AVE. Brick Township, NJ Block: 670 Lot: 4 Qual: _____
Owner in Fee: KENNEDY MALL ASSOCIATES
Owner Address: 641 SHUNPIKE RD. CHATHAM NJ 07928
Telephone: (973) 966-2800
Contractor KENNEDY MALL ASSOCIATES
Address 641 SHUNPIKE RD. CHATHAM NJ 07928
Telephone: (973) 966-2800 Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

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 UP CHANGED CHAIR AND TABLES AND CLEAN THE RESTAURANT. WAS OLD SUBWAY NOW RESELANCES

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: _____

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.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

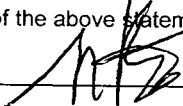
I further certify that I will perform the following work:

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.

X Signature  Date 7-7-08

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 _____

Address _____

Telephone (_____) _____

Signature _____

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

Existing & Proposed

Entrance

table

table

table

table

table

table

table

Men's
Room

Women's
Room

Master
Bath

working
table

hand
sink

Three compartment
sink

Freezer

working
table

0 0 0
warmer.
0 0 0

Bar B.Q.
1 2

Deep
fryer.

0 0 0 0 0
Cooking stove.

working
cooler.

Water
Heater

Exit

2-18-09- CARIT LOCATE- 2ND TIME THERE

③ Tech ↑
↓

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Daniel J. Kelly, Mayor



Department of Administration & Finance

Township Council:

Stephen C. Acropolis - President
Ruthanne Scaturro - Vice President
Anthony Matthews
Kathy M. Russell
Joseph Sangiovanni
Michael A. Thulen, Sr.
Dan Toth

Division of Inspections
Daniel F. Newman Jr.
Construction Official
732-262-1027
Fax: 732-262-8954
www.twp.brick.nj.us

UNIFORM CONSTRUCTION CODE

Construction Permits Application
5:23-2.15 (e) (vii) (1x)

Owner/Agent: Jul. Law

Property Address: 2770 Kennedy BL

Town: Brick New Jersey Zip: _____

Block: 670 Lot: 4

_____ Waiver architecturals for commercial interior work

_____ other _____

OWNER/AGENT PROCEED AT OWN RISK

Signature: _____

Owner/Agent: _____

Building Subcode Official: _____

Frank Mizer

Construction Official: _____

Daniel F. Newman, Jr.



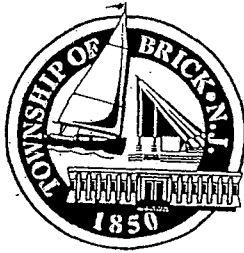
TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Stephen C. Acropolis, Mayor

Township Council:

Ruthanne Scaturro - President
Joseph Sangiovanni - Vice President
Brian DeLuca
Anthony Matthews
Kathy M. Russell
Michael A. Thulen, Sr.
Dan Toth



Department of Community Development & Land Use
Division of Engineering

Office of the Municipal Engineer
732-262-1040
Fax: 732-262-8954
www.twp.brick.nj.us

Date: 7/9/08

ENGINEERING PLOT PLAN EXEMPT FORM

Block: 670 Lot: 4
Property Address: 2770 Hooper Ave

I, _____ of _____
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck,
pool, retaining wall, etc. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

[Signature]
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.
2. Proof that the property is not located in a Flood Hazard Area.

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

FOR OFFICE USE ONLY

Approved on: 7/18/08 Signed: [Signature]

Rejected on: _____ Signed: _____

Comments:

COMMERCIAL





CONSTRUCTION PERMIT

Date Issued 7/25/2008
Control # C-08-003351
Permit # 08-2279

IDENTIFICATION Block: 670 Lot: 4 Qualifier _____
Work Site Location: 2770 HOOPER AVE. Brick Township, NJ Contractor KENNEDY MALL ASSOCIATES
Address 641 SHUNPIKE RD. CHATHAM NJ 07928
Owner in Fee KENNEDY MALL ASSOCIATES
641 SHUNPIKE RD. CHATHAM NJ 07928 Telephone: (973) 966-2800
Telephone: (973) 966-2800 Lic. No. or Bldrs. Reg. No. _____
Federal Employee. No. _____

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 UP CHANGED CHAIR AND TABLES AND CLEAN THE RESTAURANT. WAS OLD
SUBWAY NOW RESEALANCES

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 \$50

Construction Official _____

Date _____

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$40
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$30
Total	\$70
Check No.	
Cash	\$70
Credit	\$0
Collected By	Inspection Account

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.

**Township of Brick
Zoning Permit**

Approved: Thursday, July 10, 2008 **Number:** 2008-754

Block 670 **Lot** 4 **Zone:** B-3, Highway Dev.

Property Address: 2770 Hooper Avenue; Kennedy Mall

Applicant: Ju Lin; Far East Taste

Property Owner: Fidelity Management

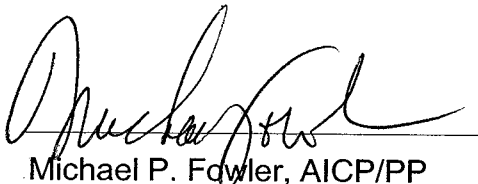
Existing Use: Restaurant (former Subway).

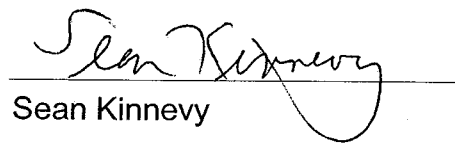
Proposed Use: "Far East Taste" restaurant.

Proposed Construction: Interior alterations for a new business.

Conditions: An additional zoning permit is required for any sign or banner.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

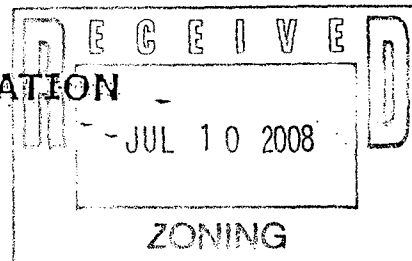

Michael P. Fowler, AICP/PP
Administrative Officer


Sean Kinnevy
Zoning Reviewer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

Applications missing any of the following information
will delay processing and may be returned to you.



BLOCK 670 LOT 4 QUALIFIER _____
PROPERTY ADDRESS 2770 Kennedy BL Brick NJ (Kennedy mall)
PERSONAL NAME OF APPLICANT JU LIN
BUSINESS NAME OF APPLICANT FAR EAST TASTE (917-567-9608) cell.
MAILING ADDRESS OF APPLICANT (Kennedy mall) 2770 Kennedy BL Brick.
PROPERTY OWNER'S FULL NAME Fidelity management

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling

☒ Commercial (please describe) take out Restaurant (Subway)

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling

☒ Commercial (please describe) Take out Restaurant

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) _____ Height _____

☐ Addition - Height _____

☐ Alteration _____

☐ Porch or deck - Height _____

☐ Shed - Height _____

☐ Fence - Type _____ Height _____

☐ Swimming Pool ☐ in-ground ☐ above-ground

☒ Other (please describe) Tenant Fit-up

CHECKLIST

☐ All information completed above

☐ Two (2) copies of a 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.

Note: No partial, taped, faxed,
reduced or enlarged copies
can be accepted.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT [Signature] Date 5-21-08

Reviewed by Zoning Office [Signature] Date 7/10/08 ☒ Approved () Denied

March 2003 _____

COMMERCIAL

Constituent Contact Report

[illegible]

- ☐ Zoning Application deemed complete Initialed: _____ Date: _____
- ☐ Zoning Application approved Initialed: _____ Date: _____
- ☐ Zoning permit updates:

A.H.B.T. - MANDATORY FEE - RESIDENTIAL

IMPORTANT

Not required