BLOCK 670 LOT 4 QUALIFICATION CODE C09.55 ADDRESS (SITE) 2770 ~~Hooper Ave~~ Hooper Ave PERMIT NO. 05-0823

CONSTRUCTION PERMIT APPLICATION

Beauty Supply

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII TENANT 3

I. IDENTIFICATION

1. Proposed Work Site at: 2770 Hooper Ave. (Old Theater.)
2. Name of Owner in Fee: Kennedy Mall Assoc Tel. (973) 966 2800
   Address 641 Shunpike Rd Chatham NJ 07928
   street municipality zip code
3. Ownership in fee: Public _____ Private X
4. Principal Contractor: Fidelity Maintenance Tel. (973) 966 2800
   Address 641 Shunpike Rd Chatham NJ 07928
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 22-3053500 FAX: (973) 966 0161
5. Architect or Engineer E. Maceiko Tel. (973) 966 2800
   Address 641 Shunpike Rd Chatham NJ Contact _____
6. Responsible Person in Charge once Work has Begun Joe Serino
   Tel. (973) 296 6193 FAX: (973) 966 0101

Tenant Fit Up

V. FEE SUMMARY (for office use only)

			Update #3	Update #6
1.	Building	$ 346		
2.	Electrical	105		135
3.	Plumbing	60		
4.	Fire Protection			65
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$ 33	2	4
9.	State Permit Fee Surcharge			
10.	Subtotal	$		
11.	Cert. of Occupancy			
12.	Other	30		
13.	TOTAL	$ 606	1165	204

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	
	no	
11.	Max. Live Load	
12.	Max. Occupancy Load	

OPTIONAL (for office use only)

II. PROPOSED WORK	Est. Cost	Plans Rec'd/rev	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building			12/8/04		3/3/05	FM			
3. ☐ Addition									
4. ☐ a. Repair									
☑ b. Alteration	112,00								
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection					3-23-05				
6. ☑ Plumbing	6000				3/07/05				
7. ☑ Electrical	6800				3/9/05				
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement		KM	2/17/05		2/11/05				
11. ☐ Demolition									
TOTAL COSTS	24,000								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. 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:

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 Certain Malls
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

IMPORTANT NOTICE MANDATORY FEE - COMMERCIAL

LDS BR 10625277

called 3/23/05 MR

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 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.

( ) Check if contractor.

Agent Name [redacted] Bobby Cifrodello

Address 641 B Shunpike Rd Chatham NJ 07928

Telephone (973) 296 6193

Signature _____

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

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. _____	_____	_____	_____	_____

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

☒ Zoning Application deemed complete Initialed: KCT Date: 12/8/04

☐ Zoning Application approved Initialed: _____ Date: _____

☐ Zoning permit updates:

_____

_____

_____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	06/08/2005
Tracking Number	C09-55
Permit Number	05-0823
Permit Issue Date	03/24/2005

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 2770 HOOPER AVE , NJ Block: 670 Lot: 4

Owner in Fee: KENNEDY MALL ASSOC

Owner Address: 641 SHUNPIKE RD CHATHAM NJ 07928-

Telephone: 973/966-2800

Contractor: FIDELITY MAINTENANCE

Address: 641 SHUNPIKE RD CHATHAM NJ 07928-

Telephone: 973/966-2800 Fax:

License Number or Builders Registration Number: Federal Emp. Number: 22-3053500

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:
TENANT FIT UP

Comments: "Beauty Supply" (Tenant 3)

☑ **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 vivible 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: $35.00

Date Printed: 06/08/2005

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	06/08/2005
Tracking Number	C09-55
Permit Number	05-0823
Permit Issue Date	03/24/2005

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 2770 HOOPER AVE , NJ Block: 670 Lot: 4

Owner In Fee: KENNEDY MALL ASSOC

Owner Address: 641 SHUNPIKE RD CHATHAM NJ 07928-

Telephone: 973/966-2800

Contractor FIDELITY MAINTENANCE

Address 641 SHUNPIKE RD CHATHAM NJ 07928-

Telephone: 973/966-2800 Fax:

License Number or Builders Registration Number: Federal Emp. Number: 22-3053500

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:
TENANT FIT UP

Comments: "Beauty Supply" (Tenant 3)

☑ **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 vivible 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: $35.00

Date Printed: 06/08/2005

CONSTRUCTION PERMIT

Date Issued 03/24/2005
Control # C09-55
Permit # 05-0823

IDENTIFICATION Block: 670 Lot: 4 Qualifier

Work Site Location: 2770 HOOPER AVE-TENANT 3 TENANT FIT UP , NJ

Owner in Fee: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ 07928-

Telephone: 973/966-2800

Contractor: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ 07928-

Telephone: 973/966-2800
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

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:

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $24,000

Construction Official

03/24/2005
Date

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

INSPECTOR COPY

PAYMENTS (Office Use Only)

Building	$346
Electrical	$105
Plumbing	$60
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$32
CO Fee	
Other	$30
Total	$573
Check No.	3931
Cash	$0
Credit	$0
Collected By	Ann Marie Hanlon

PERMIT UPDATE

Date Update Issued 05/25/2005
Control # C-05-134968
Permit # 05-0823+B

IDENTIFICATION Block: 670 Lot: 4 Qualifier

Work Site Location: 2770 HOOPER AVE-TENANT 3 TENANT FIT UP , NJ

Owner in Fee: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ 07928-
Telephone: 973/966-2800

Contractor: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ 07928-
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:

ELECTRICAL ALTERATIONS, FIRE ALTERATIONS 1 HOUR RATED FIRE WALL

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $3,200

Construction Official

05/25/2005
Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$135
Plumbing	$0
Fire Protection	$65
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$4
CO Fee	
Other	$0
Total	$204
Check No.	4026
Cash	$0
Credit	$0
Collected By	Mary Jane Rinaldi

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

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.

PERMIT UPDATE

Date Update Issued 05/25/2005
Control # C-05-134968
Permit # 05-0823+B

IDENTIFICATION Block: 670 Lot: 4 Qualifier

Work Site Location: 2770 HOOPER AVE-TENANT 3 TENANT FIT UP , NJ

Owner in Fee: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ 07928-
Telephone: 973/966-2800

Contractor: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ 07928-
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:

ELECTRICAL ALTERATIONS, FIRE ALTERATIONS 1 HOUR RATED FIRE WALL

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $3,200

Construction Official

05/25/2005
Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$135
Plumbing	$0
Fire Protection	$65
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$4
CO Fee	
Other	$0
Total	$204
Check No.	4026
Cash	$0
Credit	$0
Collected By	Mary Jane Rinaldi

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

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.

PERMIT UPDATE

Date Update Issued 05/25/2005
Control # C-05-134478
Permit # 05-0823+A

IDENTIFICATION Block: 670 Lot: 4 Qualifier

Work Site Location: 2770 HOOPER AVE-TENANT 3 TENANT FIT UP , NJ

Owner in Fee: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ 07928-
Telephone: 973/966-2800

Contractor: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ 07928-
Telephone: 973/966-2800
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

ALTERATION tenant fixtures as per plan

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $1,800

Construction Official — Date 05/25/2005

PAYMENTS (Office Use Only)

Building	$43
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$2
CO Fee	
Other	$0
Total	$45
Check No.	4026
Cash	$0
Credit	$0
Collected By	Mary Jane Rinaldi

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

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
Date Issued 5-25-05
Control #
Permit #

update 05-0823 tA 105.13/478

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

Block 670 Lot 4
Work Site Location Kennedy Mall
2770 Hooper Ave - Tenant 3
Owner in Fee Kennedy Mall Assoc.
Address 641 Shunpike Rd
Chatham NJ 07928
Tele. (973) 966 2800
Contractor Fidelity Maintenance
Address 641 Shunpike Rd
Chatham NJ 07928
Tele. (973) 966 2800
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3033500 or Social Security No.

Cell 908-419-6830 - David

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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Tenant fixturing As Per Attached plan.
Air Ballance Test Required For Final Inspection

TWO COPIES

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	5-18-05	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] DCA
Date: 6-6-05
Approved By:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final			6/6/05	

Need Report

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 $ 1800
3. Total (1+2) $ ____

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence ____ Height (6' or over)
[ ] Sign ____ 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-110B
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 #

5-25-05

update 05-0823-TA (105-134/78

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

Block 670 Lot 4
Work Site Location Kennedy Mall
2770 Hooper Ave. - Tenant 3
Owner in Fee Kennedy Mall Assoc.
Address 641 Shunpike Rd
Chatham NJ 07928
Tele. (973) 966 2800
Contractor Fidelity Maintenance
Address 641 Shunpike Rd
Chatham NJ 07928
Tele. (973 966 2800
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3053500 or Social Security No.
(Cell 908-419-6830-David

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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Tenant fixturing As Per Attached plan.
Air Ballance Test Required For Final Inspection

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	5-18-05	FY
[ ] 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)
[ ] Sign _____ 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 $ 1800
3. Total (1+2) $ _____

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

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 12/08/2004
Date Issued 3/24/05
Control # C09-55
Permit # 05-0823

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

Block 670 Lot 4 Qual
Work Site Location 2770 HOOPER AVE ~~TENANT~~
TENANT FIT UP
Owner in Fee KENNEDY MALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Tele.(973)966-2800
Contractor FIDELITY MAINTENANCE
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Tele.(973)966-2800 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3053500

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

~~TENANT FIT UP~~-TENANT 3-NEW STOREFRONT-NEW SIDEWALK, STEPS, AND RAMP
~~BEAUTY SUPPLY~~

Vanella Box Only

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	3-23-05	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] GA
Date: 5-25-05
Approved By: FM

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab			04/18/05	KEK
Frame			05/06/05	KEK
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			5-25-05	FM
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present B Proposed B
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 11,200
3. Total (1+2) $ 11,200

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	346
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 346
DCA State Permit Fee	$ 15

U.C.C. F110 (rev.

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 12/08/2004
Date Issued 3/24/05
Control # C09-55
Permit # 05-0823

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

Block 670 Lot 4 Qual
Work Site Location 2770 HOOPER AVE-TENANT 3
TENANT FIT UP
Owner in Fee KENNEDY MALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Tele.(973)966-2800
Contractor FIDELITY MAINTENANCE
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Tele.(973)966-2800 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3053500

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

~~TENANT FIT~~ UP-TENANT 3-NEW STOREFRONT-NEW SIDEWALK, STEPS, AND RAMP
BEAUTY SUPPLY

Vanella Box Only

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	3/23/05	FMM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire [ ] Elev

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date:
Approved By:

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

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	346
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present B Proposed B
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Pt.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 11,200
3. Total (1+2) $ 11,200

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 346
DCA State Permit Fee	$ 15

Paid [ ] Check #
Collected by:

U.C.C. F110 (rev. 3/96)

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 12/08/2004
Date Issued 3/24/05
Control # C09-55
Permit # 05-0823

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

Block 670 Lot 4 Qual
Work Site Location 2770 HOOPER AVE-TENANT 3
TENANT FIT UP
Owner in Fee KENNEDY HALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Tele.(973)966-2800
Contractor FIDELITY MAINTENANCE
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Tele.(973)966-2800 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3053500

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	3/29/05	FMH
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

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

B. BUILDING CHARACTERISTICS

Use Group Present B Proposed B
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 11,200
3. Total (1+2) $ 11,200

Industrialized Building:
[ ] State Approved
[ ] HUD

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

~~TENANT FIT~~ UP-TENANT 3-NEW STOREFRONT-NEW SIDEWALK, STEPS, AND RAMP
BEAUTY SUPPLY

Vanella Box Only

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	346
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 346
DCA State Permit Fee	$ 15

Paid [ ] Check #
Collected by:

U.C.C. F110 (rev. 3/96)

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control # 09-55A
Date Issued 5-25-05
Permit # update-05-0823 +B

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

Block 670 Lot 4 Qualification Code

Work Site Location 2770 Hooper Avenue Brick, NJ

Owner in Fee Kennedy Mall Assoc.

Address 641 Shunpike Rd. Chatham, NJ 07928

Tel (973) 966-2800

Contractor Mike Chambers' Oakhurst Electric

Address 823 West Park Avenue #168 Ocean, NJ 07712

Tel ( ) (732) 531-9400 8716 FAX (732) 531-6635

Contractor License No 311-810-060/000

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 2,200.00

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'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)
5		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
3+4=7		Communications Points	
		Alarm Devices/F.A.C. Panel	
5		Speakers	
		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	
2	20	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
11		CAT-5	
2	20Amp	computer circuits	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[X] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date: 5/20/05

Approved by: MM

SUBCODE APPROVAL

[ ] CO [ ] CCO [X] CA

Date: 6/9/05

Approved by: MM

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			6/8/05	RB
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

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 04-554
Date Issued 5-25-05
Permit # Update-05-0823 +B

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

Block 670 Lot 4 Qualification Code

Work Site Location 2770 Hooper Avenue
Brick, NJ

Owner in Fee Kennedy Mall Assoc.

Address 641 Shunpike Rd.
Chatham, NJ 07928

Tel (973) 966-2800

Contractor Mike Chambers' Oakhurst ~~Electric~~
~~823 West Park Avenue #168~~
~~Ocean, NJ 07712~~
~~(732) 531-9400~~

Address 8716

Tel ( ) FAX (732) 531-6635

Contractor License No. ~~311-810-060/000~~

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 2,200.00

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'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)
5		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
3+1=4		Emergency & Exit Lights	
		Communications Points	
5		Alarm Devices/F.A.C. Panel Speakers	
		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	
2	20	AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1		CAT. 5E	
8		Computer Circuits	

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[X] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved

Date: 5/20/05

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

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/08/2004
Date Issued 3/21/05
Control # C09-55
Permit # 05-0823

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

Block 670 Lot 4 Qual
Work Site Location 2770 HOOPER AVE-TENANT 3
TENANT FIT UP
Owner in Fee KENNEDY MALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Tele.(973)966-2800
Contractor MIKE CHAMBERS OAKHURST ELECTRI
Address 823 WEST PARK AVENUE #168
OCEAN, NJ 07712-
Tele.(732)531-9400
Lic. No. or Bidrs. Reg. No. 8716
Federal Emp. No. 31-1810060

B. ELECTRICAL CHARACTERISTICS

Use Group - Present B Proposed B
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 6,800

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 3/21/05
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

B. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
38		Lighting Fixtures	
11		Receptacles	
3		Switches	
1		Detectors	
0		Light Poles	
0		Motors-Fract HP	
4		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
57		TOTAL NUMBERS	45
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
1	3	KW Elect Water Heater	10
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
1	100	AMP Subpanels	50
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 105
DCA State Permit Fee	$ 9

U.C.C. P120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/08/2004
Date Issued 3/21/05
Control # C09-55
Permit # 05-0823

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

Block 670 Lot 4 Qual
Work Site Location 2770 HOOPER AVE-TENANT 3
TENANT FIT UP
Owner in Fee KENNEDY HALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Tele.(973)966-2800
Contractor MIKE CHAMBERS OAKHURST ELECTRI
Address 823 WEST PARK AVENUE #168
OCEAN, NJ 07712-
Tele.(732)531-9400
Lic. No. or Bldrs. Reg. No. 8716
Federal Emp. No. 31-1810060

B. ELECTRICAL CHARACTERISTICS

Use Group - Present B Proposed B
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 6,800

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 3/21
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
38		Lighting Fixtures	
11		Receptacles	
3		Switches	
1		Detectors	
0		Light Poles	
0		Motors-Fract HP	
4		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
57		TOTAL NUMBERS	45
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
1	3	KW Elect Water Heater	10
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
1	100	AMP Subpanels	50
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 105
DCA State Permit Fee	$ 9

Paid [ ] Check #
Collected by:

U.C.C. F120 (rev. 3/96)

NJ UCCAR 5.24

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/08/2004
Date Issued 3/2/05
Control # C09-55
Permit # 05-0823

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

Block 670 Lot 4 Qual
Work Site Location 2770 HOOPER AVE TENANT 2
TENANT FIT UP
Owner in Fee KENNEDY MALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Tele.(973)966-2800
Contractor MIKE CHAMBERS OAKHURST ELECTRI
Address 823 WEST PARK AVENUE #168
OCEAN, NJ 07712-
Tele.(732)531-9400
Lic. No. or Bldrs. Reg. No. 8716
Federal Emp. No. 31-1810060

Brady Supply

COMMERCIAL

B. ELECTRICAL CHARACTERISTICS

Use Group - Present B Proposed B
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 6,800

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 3/2/05
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 6/9/05
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			5-4-05	TO
Temp Serv				
Const Serv				
TCO			5/20/05	TO
Other	CANCELLED		6/2/2005	
Service				
Final			6/3/05	BB

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

paid

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 Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
38		Lighting Fixtures	
11		Receptacles	
3		Switches	
1		Detectors	
0		Light Poles	
0		Motors-Fract HP	
4		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
57		TOTAL NUMBERS	45
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
1	3	KW Elect Water Heater	10
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
1	100	AMP Subpanels	50
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 105
DCA State Permit Fee	$ 4.9

Paid [ ] Check # Collected by:

U.C.C. F120 (rev. 3/96)

6-4-05 walls, Back Bathroom, & office

Schoneman Beauty Supply

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 5-25-05
Control #
Date Issued
Permit # 05-0823 HB Update

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

Block 670 Lot 4 Qualification Code
Work Site Location Kennedy Mall
2770 Hooper Ave.
Owner in Fee Kennedy Mall Assoc.
Address 641 Shunpike Rd
Chatham NJ 07928
Tel (973) 966 2800
Contractor Fidelity Maintenance
Address 641 Shunpike Rd
Chatham NJ
Tel (973) 966 2800 FAX (973) 966 6161
Fire Protection Equipment, NJ Div of Fire Safety Permit No.
Fire Protection Equipment, NJ Div of Fire Safety Installer No.
Fire Alarm Contractor No.
Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed
Constr. Class: Present Proposed
Heating System: [ ] New OR [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other
Location:

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:
Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible Capacity

Total Cost of Fire Protection Work $ 1,000.00

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. CO5-134968

Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
1 hr. Rated Fire Wall

Water Supply Source
Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [ ] Gas or [ ] Oil		
Fireplace Venting/Metal Chimney		
Other		

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[✓] Fire Plans Approved
Date: 5-23-05
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [✓] CA
Date: 6-7-05
Approved by: KB

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			6-7-05	
Other rough			5-25-05	

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

Schoreman Beauty Supply

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received Control # 5-25-05

Date Issued Permit # 05-0823 fb Updtr

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

Block 670 Lot 4 Qualification Code

Work Site Location Kennedy Mall
2770 Hooper Ave

Owner in Fee Kennedy Mall Assoc.

Address 641 Shunpike Rd
Chatham NJ 07928

Tel (973) 966 2800

Contractor Fidelity Maintenance

Address 641 Shunpike Rd.
Chatham NJ

Tel (973) 966 2800 FAX (973) 966 0161

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No.

Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present ____ Proposed ____

Constr. Class: Present ____ Proposed ____

Heating System: [ ] New OR [ ] Existing [ ] HVAC

Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other

Location:

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing

Location of Main Control Valve:

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible Capacity

Total Cost of Fire Protection Work $ 1,000.00

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. D. Wright (105 134 76%)
Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

1 hr. Rated Fire Wall

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [ ] Gas or [ ] Oil		
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[✓] Fire Plans Approved

Date: 5-25-05

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

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

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 12/08/2004
Date Issued 3/24/05
Control # C09-55
Permit # 05-0823

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

Block 670 Lot 4 Qual

Work Site Location 2770 HOOPER AVE-TENANT 3
TENANT FIT UP

Owner in Fee KENNEDY MALL ASSOC

Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-

Tele.(973)966-2800

Contractor NIELSON PLUMBING

Address 241 CHERRY QUAY RD
BRICK, NJ 08723-

Tele.(732)920-1695

Lic. No. or Bldrs. Reg. No. 8568

Federal Emp. No. 15-8544466

B. PLUMBING CHARACTERISTICS

Use Group Present B Proposed B

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 6,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [+] Elevator
[+] Plumb. Plans Approved
Date: 3/17/05
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

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

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

Changed in System

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
+2	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
+2	Lavatory	10
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
1	Water Heater	40
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 60
DCA State Permit Fee $ 8

3/4" WATER.

U.C.C. F130 (rev. 3/96)

NJ UCCARS 5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBIN
SUBCO
TECHNICAL SECTION

Date Received 12/08/2004
Date Issued 3/24/05
Control # C09-55
Permit # 05-0823

COMMERCIAL

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

Block 670 Lot 4 Qual

Work Site Location 2770 HOOPER AVE-~~TENANT~~
TENANT FIT UP

Owner in Fee KENNEDY MALL ASSOC

Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-

Tele.(973)966-2800

Contractor NIELSON PLUMBING

Address 241 CHERRY QUAY RD
BRICK, NJ 08723-

Tele.(732)920-1695

Lic. No. or Bldrs. Reg. No. 8568

Federal Emp. No. 15-8544466

Beauty Supply

B. PLUMBING CHARACTERISTICS

Use Group Present B Proposed B

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 6,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 3/17/05
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date: 6-9-05

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab			4-15-05	
Rough			5-2-05	
Water			4-21-05	
Sewer			4-21-05	
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO			5-2005	

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.

3/4 in NOTAR.

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

Change in System

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
2	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
2	Lavatory	10
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
1	Water Heater	40
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Minimum Fee $ 0
TOTAL FEE $ 60
DCA State Permit Fee $ 8

Paid [ ] Check # Collected by:

U.C.C. F130 (rev. 3/96)

Township of Brick
Zoning Permit

Approved: Tuesday, February 15, 2005 **Number:** 141

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

Property Address: 2770 Hooper Avenue; Kennedy Mall

Applicant: David Voight; Kennedy Mall Associates

Property Owner Kennedy Mall Associates

Existing Use: Vacant Unit #3 (former movie theater building).

Proposed Use: Beauty supply store.

Proposed Construction: Interior alterations for tenant fit-up.

Conditions: Approved by the Township Engineer on January 10, 2005. An additional zoning permit is required for any sign or any other additional work.

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
Principal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

DEC 9 2003

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

FEB 15 2005

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

BLOCK 670 LOT 4 QUALIFIER _____

PROPERTY ADDRESS 2770 Hooper Ave. # 3

PERSONAL NAME OF APPLICANT ~~Kennedy Mall Assoc.~~ David Voight

BUSINESS NAME OF APPLICANT Kennedy Mall Assoc.

MAILING ADDRESS OF APPLICANT 641 Shunpike Rd., Chatham, NJ 07928

PROPERTY OWNER'S FULL NAME KENNEDY MALL Assoc.

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☒ Commercial (please describe) Old Movie Theater to Retail

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☒ Commercial (please describe) RETAIL - Beauty Supply

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) NEW STOREFRONT - Interior Fit. Out.

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.

COMMERCIAL

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 Dave Voight Agent for Kennedy Mall Date 12.7.04

Reviewed by Zoning Office _____ Date 12/14/4 (X) Approved ( ) ~~Denied~~

2/15/05

12/8/04

March 2003----------

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
(732) 458-7000

CERTIFICATE OF COMPLIANCE

Date 6/1/05

NAME Kennedy Mall Associates

ADDRESS 642 Shunpike Rd Chatham NJ 07928

PROPERTY LOCATION 2770 Hooper Ave Unit3

Account No K294603 Block 670 Lot 4

I hereby certify that the above applicant has complied with all Rules and Regulations of this Authority and has paid all required fees and charges.

For the Authority Carol Hurdel

STREAMLINE SYSTEMS, LLC.

1117 Hollywood Blvd. – Point Pleasant – N.J. – 08742
Phone: 732-701-1120 * Fax: 732-701-9145

BALANCING REPORT

DATE: JUNE 6, 2005
FOR: KENNEDY MALL AND ASSOCIATES
LOCATION: SHOEMONS BEAUTY SUPPLY

ROOM NAME	AIR OUTLET	ACTUAL CFM-1
SHOWROOM	1	390
SHOWROOM	2	405
SHOWROOM	3	395
SHOWROOM	4	400
SHOWROOM	5	420
SHOWROOM	6	410
TOILET 1	1	90
TOILET 2	1	85
HALLWAY	1	285
OFFICE	1	260

05-0823

Beauty Supply (Tenant 3)

CERTIFICATE OF APPROVAL FOR TENNANT FIT UP AND COMMERCIAL

Location 2770 Hooper Ave Block 670 Lot 4

Final Inspections needed if applicable as follows:

1. Final Building
2. Final Plumbing
3. Final Electric
4. Final Fire
5. Certificate of Compliance BTMUA
6. Final Engineering
7. Ocean County Soil
8. Affordable Housing

Dave
908 419-6830

Report of Compliance from Ocean County Soils needed when; more than 5000 sq ft are disturbed. NEW COMMERCIAL Building that have been approved by PLANNING BD or BD OF ADJUSTMENT always need soil report.

	FINALS	FINALS	FINALS
BUILDING	APPROVED	5/25/05	
PLUMBING	5/24 APPROVED		
FIRE	APPROVED	6/7/05	
ELECTRIC	6/2 APPROVED		
ENGINEERING	APPROVED	6/7/05	
O.C.SOIL	APPROVED		
COMMERCIAL OCCUPANCY CARD			
C.C. FROM B.T.M.U.A	6/1/05		

CALL THE WATER CO. BTMUA 458-7000 EXT. 224 OR 225 ASK WHETHER A C.C. IS NEEDED.

AFFORDABLE HOUSING paid 6/7

ALL COMMERCIAL APPLICATIONS MUST BE REVIEWED BY AFFORDABLE HOUSING BEFORE A C/A OR C/O IS ISSUED. SECOND HALF OF PAYMENT IS DUE AT THIS TIME.

UNIT #3

For Information Call: _____

Permit No. 05 0823 ~~+~~ 05.0823

APPROVAL FOR ELECTRICAL

	Date	Inspector
[ ] Rough		
[ ] Service	Cell 6/3/05	
[ ] Other	LCA Boxed	
[ ] Final	6/2/05	

U.C.C. Form F-222A

TOWNSHIP OF BRICK

For Information Call: Security Lugnuts

Permit No. 05-0823

APPROVAL FOR PLUMBING

	Date	Inspector
( ) Slab		
( ) Rough	5-2-05	
( ) Water		
( ) Gas		
( ) Mechanical		
( ) Other		
( ) Final	5-24-05	

U.C.C. Form F-223A

INSPECTOR: K Shafer

DATE: 6/7/05

JOB: Kennedy Mall

SECTION: II

TYPE OF WORK: Final Insp

LOCATION: ⓐ Wiechart Reality School
ⓑ Beauty Supply Store

WEATHER: Pt Cloudy

TEMPERATURE: 70°s

BLOCK:

LOT:

ENGINEERING RECOMMENDATIONS FOR CERTIFICATE OF OCCUPANCY INSPECTION CHECK LIST

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway	/	
2. Grading	/	
3. Sidewalk	/	
4. Road Pavement	/	
5. Landscaping & Sodding	/	
6. Clean-up Procedures	/	
7. Note on going construction in immediate area	/	
8. Safety	/	

COMMENTS REFERENCING ITEM NUMBER:

RECOMMENDATIONS:

☐ TEMP. C.O.

☒ FINAL C.O.

☐ DETAILED REINSPECTION

☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED

PLANNING BOARD ENGINEER

MUNICIPAL ENGINEER

I _____, Authorized representative of _____, hereby acknowledge the above deficiencies, and further realize that the Certificate of Occupany will be conditioned upon the acceptable resolution thereof within _____ days of the issuance of Certificate of Occupancy.

327552
327553

00403

KENNEDY MALL ASSOCIATES
C/O FIDELITY MANAGEMENT COMPANY
641 SHUNPIKE ROAD
CHATHAM, NJ 07928

JPMORGAN CHASE BANK
2 WAVERLY PLACE
MADISON, NJ 07940

55-233
212

Date
6/2/2005

Check Amount
$173.50

One Hundred Seventy Three AND 50/100 Dollars

Pay to the order of:

TOWNSHIP OF BRICK

401 CHAMBERS BRIDGE ROAD
BRICKTOWN, NJ 08723

⑈004038⑈ ⑆021202337⑆ 2810 515672⑈

Re: Affordable Housing Fees

Business/Development: Beauty Supply

Owner/Applicant: Kennedy Mall Assoc.

Property Address: 2770 Hooper Ave #3

Block: 670 Lot: 4

DEPOSIT RECEIVED
Mandatory Development Fee
(Commercial)
Residential
Inclusionary Development Fee

DATE: 6/8/05

Check Number 004038

Preliminary Fee Paid

Final Fee Paid *100.00 (part of 173.50)

FOR DEPOSIT ONLY - AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance
354-2C-93, is pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C. 5:92-18 et seq.

Received in Treasurer's Office by:

Kathy Tinbergen
Signature

6-8-05
Date

OFFICE OF AFFORDABLE HOUSING

AWAIT FINAL APPROVAL

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 670 LOT 4 SITE ADDRESS 2770 Hooper Ave # 3
TYPE OF SITE Residential / (Commercial) NAME OF BUSINESS Beauty Supply
APPLICANT Fidelity Maintenance PHONE NUMBER 973-906-2800
APPLICANT ADDRESS 641 Shurpike Rd CITY & STATE Chatham, NJ 07928

INCLUSIONARY DEVELOPMENT

Affordable
- Fee Required _____ Date _____
- Down Payment _____ Date _____
- Balance _____ Date _____
- Paid In Full _____ Date _____

Market Rate — No Fee Required

Owner 908-419-6830

MANDATORY DEVELOPER FEES

◊ Residential is .005 %

X Commercial is .01%

X The estimated equalized assessed value of the proposed construction is

$ 20,000.

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 2/23/05 Date

◊ The final equalized assessed value of the construction at the above referenced site is:

$ 20 000

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 6/1/05 Date

Preliminary Fee $100.00 — Date 2/28/05
Check # 003877 — Receipt # 327444

Final Fee +100.00 — Date 6/8/05
Check# 004038 — Reciept # 327555

Total Fee Due/Paid $200.00
Balance Due _____

Fees Imposed To Date _____
Fees Reached $15,000 _____ Date

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

Office of Affordable Housing

2/17/05 - Ta prelim
2/25/05 - Mailed letter called
5/27/05 - Ta final
6/7/05 - NJ called David

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER Heavenly Mall Assoc DATE 4/25/05

PROPERTY ADDRESS 2770 Hooper Ave BLOCK 610 LOT 4

ZONING USE GROUP

CONTRACTOR LICENSE # REGISTRATION

WATER MAIN SIZE WATER PRESSURE SEWER MAIN SIZE

PLUMBING FIXTURES	NUMBER	(sfu) WATER UNITS	(dfu) DRAINAGE
1:BATHROOM GROUP			
2:KITCHEN GROUP			
3:WATER CLOSETS	2	5.0	
4:LAVATORY	2	2.0	
5:BATH TUB			
6:SHOWER STALL			
7:KITCHEN SINK			
8:SERVICE SINK	1	3.0	
9:LAUNDRY TRAY			
10:DISHWASHER			
11:WASHING MACHINE			
12:URINAL			
13:FLOOR DRAIN			
14:DRINK FOUNTAIN			
15:AIR COND WATER COOLED			
16:DENTAL UNIT			
17:LAWN SPRINKLE			
18:FIRE SPRINKLE			
19:HOSE BIBS			

TOTAL 10.0

GALLONS PER MINUTE

SIZE OF SERVICE 1" Water Service 3/4" Yoke

DATE: 4/25/05 APPROVED:

FIDELITY

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

March 8, 2005

Via: Fax 732-262-8954 & Fedex

Mr. Frank Mizer
Building Sub Code Official
Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

RE: Weichert Tenant
Shoenemann Beauty Supply Tenant
Former Theatre Building
Kennedy Mall
Brick, NJ

Dear Mr. Mizer:

Pursuant to your discussion with David Voight of my office and in accordance with your request, please accept the following modifications to the construction documents you have on file:

Item	Weichert Real Estate Tenant #2	Shoenemann Beauty Supply Tenant #3
1.) Use Group	B-Business	M-Mercantile
2.) Occupancy Load	15 people (max)	23 people (max)
3.) Code	IBC-NJ Edition 2000	IBC-NJ Edition 2000
4.) Toilet Room Elevations	See Attached Exhibit "A"	See Attached Exhibit "A"
5.) Partition Walls	All interior drywall partitions not designated as (1) hr. Demising walls shall be 35/g" metal studs with 16" o.c. (Height to underside of suspended ceiling-10'0") with 5/8" gypsum board both sides.	
6.) HVAC Ductwork Layout	Forwarded under separate cover.	Forwarded under separate cover.

Kindly update the permanent records for these Tenants to reflect the preceding.

If you require any additional information or have any questions, please do not hesitate to contact me.

Thank you for your continued cooperation in regard to this project.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates, L.L.C.

Edward D. Maceiko, AIA, P.E. 3/8/05 Date

EDM:nc

Attachments

Cc: David Voight

FIDELITY

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

March 8, 2005

Via: Fax 732-262-8954 & Fedex

Mr. Frank Mizer
Building Sub Code Official
Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

RE: Weichert Tenant
Shoenemann Beauty Supply Tenant
Former Theatre Building
Kennedy Mall
Brick, NJ

Dear Mr. Mizer:

Pursuant to your discussion with David Voight of my office and in accordance with your request, please accept the following modifications to the construction documents you have on file:

Item	Weichert Real Estate Tenant #2	Shoenemann Beauty Supply Tenant #3
1.) Use Group	B-Business	M-Mercantile
2.) Occupancy Load	15 people (max)	23 people (max)
3.) Code	IBC-NJ Edition 2000	IBC-NJ Edition 2000
4.) Toilet Room Elevations	See Attached Exhibit "A"	See Attached Exhibit "A"
5.) Partition Walls	All interior drywall partitions not designated as (1) hr. Demising walls shall be 35/g" metal studs with 16" o.c. (Height to underside of suspended ceiling-10'0") with 5/8" gypsum board both sides.	
6.) HVAC Ductwork Layout	Forwarded under separate cover.	Forwarded under separate cover.

Kindly update the permanent records for these Tenants to reflect the preceding.

If you require any additional information or have any questions, please do not hesitate to contact me.

Thank you for your continued cooperation in regard to this project.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates, L.L.C.

Edward D. Maceiko, AIA, P.E. 3/8/05 Date

EDM:nc

Attachments

Cc: David Voight

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER KENNEDY MALL ASSOC DATE 3/17/05

PROPERTY ADDRESS 2770 HOOPAD AVE BLOCK 670 LOT 4

ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMBING FIXTURES	NUMBER	(sfu) WATER UNITS	(dfu) DRAINAGE
1:BATHROOM GROUP			
2:KITCHEN GROUP			
3:WATER CLOSETS	2	5.0	
4:LAVATORY	2	2.0	
5:BATH TUB			
6:SHOWER STALL			
7:KITCHEN SINK			
8:SERVICE SINK	1	3.0	
9:LAUNDRY TRAY			
10:DISHWASHER			
11:WASHING MACHINE			
12:URINAL			
13:FLOOR DRAIN			
14:DRINK FOUNTAIN			
15:AIR COND WATER COOLED			
16:DENTAL UNIT			
17:LAWN SPRINKLE			
18:FIRE SPRINKLE			
19:HOSE BIBS			

TOTAL 10.0

GALLONS PER MINUTE _____

SIZE OF SERVICE 3/4"

DATE: 3/17/05 APPROVED: 3/17/05

(Bldg) Elect Fire Plumbing (Please mark subcode)

CONTROL NUMBER C05-134478

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 2770 Hooper. Kennedy Mall

DATE REVIEWED: 4-29-05

REVIEWED BY: FY

CONTACT CALLED/FAXED: Spoke to David /

Poor Plans Again

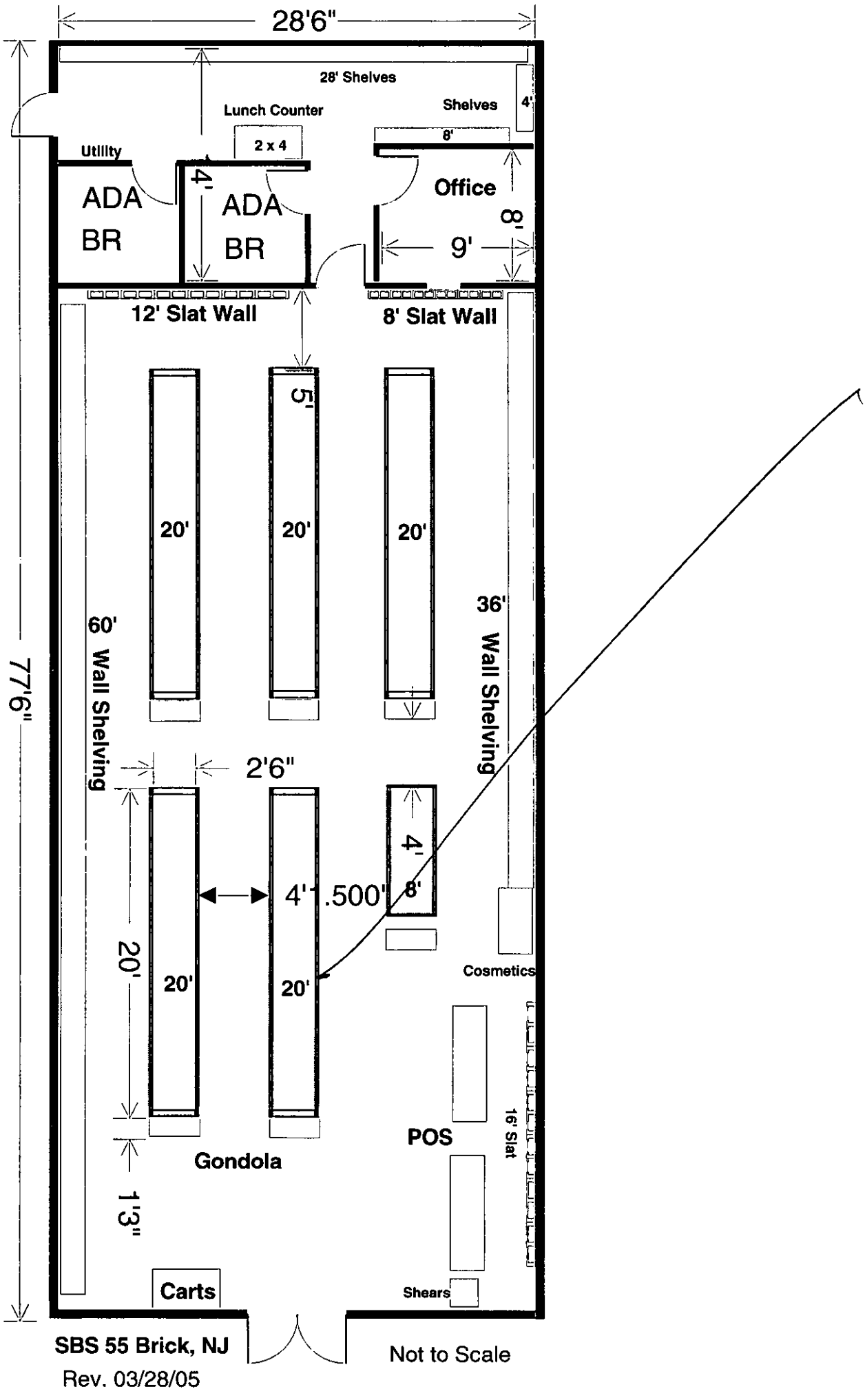
(1) Use Group - Occupancy load.

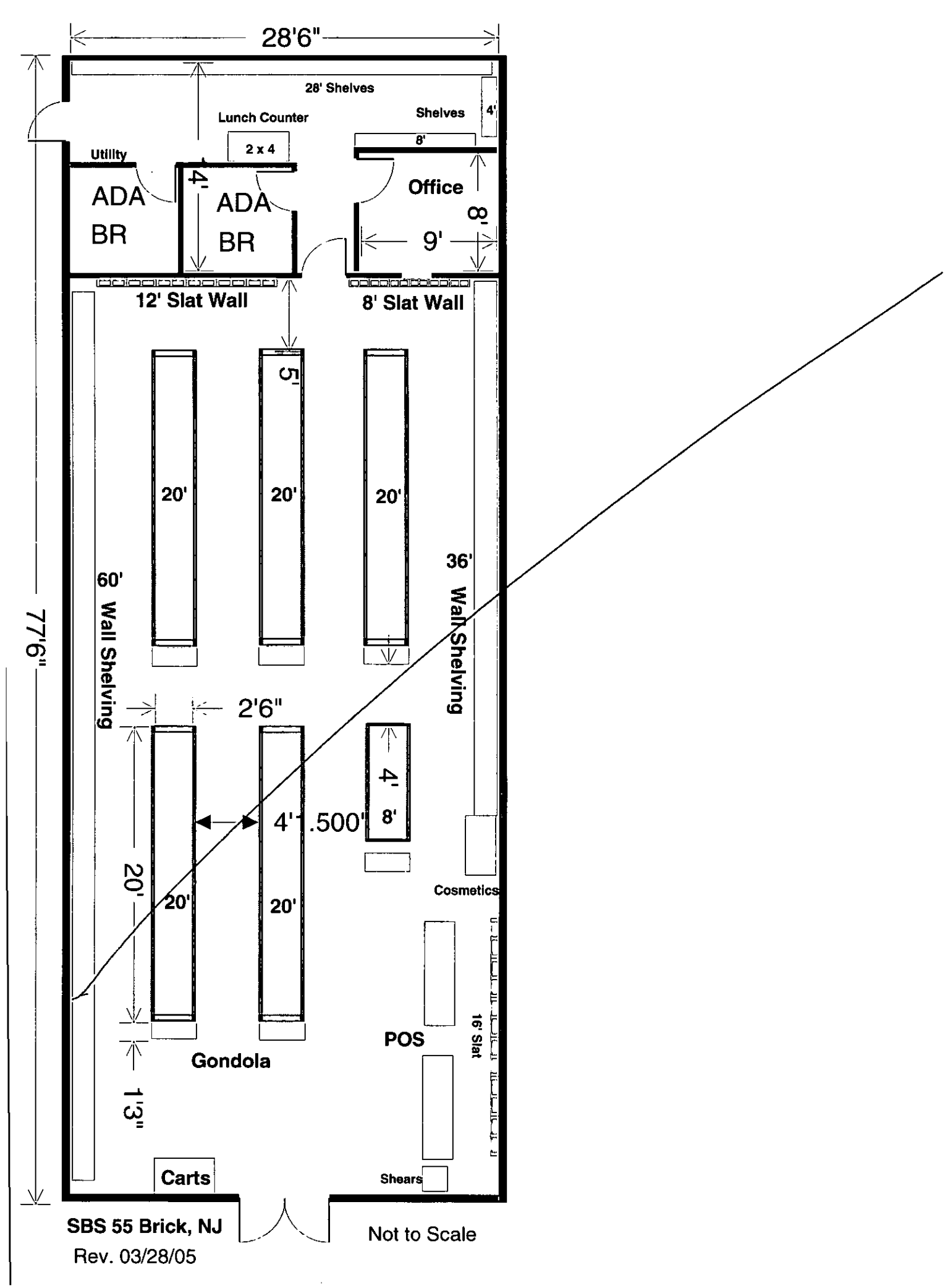
(2) NOT To Scale

(3) Show New V/s Existing

(4) Drawings NOT Sealed

909-419-6830


28'6"
28' Shelves
Lunch Counter
Shelves
4'
8'
2 x 4
Utility
4'
ADA
BR
ADA
BR
Office
8'
9'
12' Slat Wall
8' Slat Wall
5'
20'
20'
20'
60'
Wall Shelving
36'
Wall Shelving
77'6"
2'6"
4'
8'
4'
.500'
20'
20'
20'
Cosmetics
POS
16' Slat
Gondola
1'3"
Carts
Shears
SBS 55 Brick, NJ
Rev. 03/28/05
Not to Scale


28'6"
28' Shelves
Lunch Counter
Shelves
4'
8'
2 x 4
Utility
4'
ADA
BR
ADA
BR
Office
8'
9'
12' Slat Wall
8' Slat Wall
5'
20'
20'
20'
60' Wall Shelving
36' Wall Shelving
77'6"
2'6"
4'
8'
4'
.500'
20'
20'
20'
Cosmetics
POS
16' Slat
Gondola
1'3"
Carts
Shears
SBS 55 Brick, NJ
Rev. 03/28/05
Not to Scale

Bldg Elect Fire Plumbing (Please mark subcode)

CONTROL NUMBER C09-65 ~~555~~ resubmit 3/8/05 MB

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

Both Jackets

ADDRESS OF APPLICATION: 2770 Hooper Ave

DATE REVIEWED: 3-1-05

REVIEWED BY: FM

CONTACT CALLED/FAXED: Joe Sering Left message

No Details on Fresh Air makeup - ventalation Ductwork per Rehab Subcode.

Frank/plan review template

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

March 8, 2005 Via: Fax 732-262-8954 & Fedex

Mr. Frank Mizer
Building Sub Code Official
Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

RE: Weichert Tenant
Shoenemann Beauty Supply Tenant
Former Theatre Building
Kennedy Mall
Brick, NJ

Dear Mr. Mizer:

Pursuant to your discussion with David Voight of my office and in accordance with your request, please accept the following modifications to the construction documents you have on file:

Item	Weichert Real Estate Tenant #2	Shoenemann Beauty Supply Tenant #3
1.) Use Group	B-Business	M-Mercantile
2.) Occupancy Load	15 people (max)	23 people (max)
3.) Code	IBC-NJ Edition 2000	IBC-NJ Edition 2000
4.) Toilet Room Elevations	See Attached Exhibit "A"	See Attached Exhibit "A"
5.) Partition Walls	All interior drywall partitions not designated as (1) hr. Demising walls shall be 35/g" metal studs with 16" o.c. (Height to underside of suspended ceiling-10'0") with 5/8" gypsum board both sides.	
6.) HVAC Ductwork Layout	Forwarded under separate cover.	Forwarded under separate cover.

FIDELITY

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

March 10, 2005

Via: Hand Delivery

Mr. Frank Mizer
Building Sub Code Official
Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

RE: Tenant #2 and Tenant #3 HVAC Plans
Kennedy Mall
Brick, NJ

Dear Mr. Mizer:

Pursuant to your request, enclosed please find three (3) signed and sealed HVAC plans for Tenant #2 and Tenant #3 for the above referenced project.

If you have any questions or require any additional information, please do not hesitate to contact me with.

Thank you for your cooperation with this matter.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates

EDM/kc
Enclosures
cc: David Voight
Joe Serino

W:\SHARDATA OWNDPROP KENNEDY CONSTRUC\Mizer01.doc

973-966-2800 • FAX NO. 973-966-6161 • FIDELITYLAND.COM

Bldg Elect Fire (Plumbing) (Please mark subcode)

CONTROL NUMBER C09-55

resubmit to plumb. 3/17/05 MP

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 2720 Hooper Ave

DATE REVIEWED: 3/7/05

REVIEWED BY: Mark Ahrard 732-262-1241.

CONTACT CALLED/FAXED: Joe Sarno 973-966-6161.

1. Need Mop Sink - Unit #3 - Beauty Store Supply

2. Need Detail Plans - Bathroom + Water Closet - Laundry

3. M - Group - Occupancy

1 more lav + w.c. needed for women

Frank/plan review template

FedEx Express
Customer Support Trace
3875 Airways Boulevard
Module H, 4th Floor
Memphis, TN 38116

U.S. Mail: PO Box 727
Memphis, TN 38194-4643

Telephone: 901-369-3600

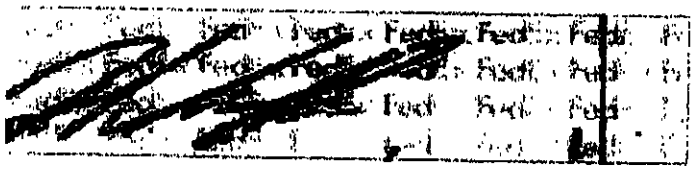
03/10/2005

Dear Customer:

Here is the proof of delivery for the shipment with tracking number **851264671400**. Our records reflect the following information.

Delivery Information:

Signed for by: J.LOLLA



Delivery Location: 401 CHAMBERS BRIDGE RD
Delivery Date: Mar 9, 2005 12:25

Shipping Information:

Tracking number: 851264671400

Ship Date: Mar 8, 2005

Recipient:
FRANK MIZER
401 CHAMBERS BRIDGE RD
BRICK , NJ 08723
US

Shipper:
ED MACERKO
FIDELITY MANAGEMENT COMPANY
641 SHUNPIKE RD STE 1
CHATHAM , NJ 079281567
US

Reference: KENNEDY WEICHERT & SHOEM

Thank you for choosing FedEx Express. We look forward to working with you in the future.

FedEx Worldwide Customer Service
1-800-Go-FedEx®

Joe Lerro
973-296-6193

TOWNSHIP OF BRICK

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

Department of Engineering
Office of the Municipal Engineer
(732) 262-1036
Fax: (732) 262-9954
http://www.twp.brick.nj.us

January 10, 2005

KC
cc: DD/SAM
Fill

Fidelity Land Development Corporation
641 Shunpike Road
Chatham, NJ 07928

Attention: Edward D. Maceiko

Re: Former Theater Building
Kennedy Mall
Brick, NJ

Dear Mr. Maceiko:

Our office has received your December 23, 2004 request for administrative approval to modify the exterior platform, stairs and handicap ramp at the above-referenced location. Upon review of the submitted plan, we have no objection to these modifications and your request for approval is hereby granted.

Please note that this approval is subject to any approvals that may be required by the Township's Building Department. Should you have any other questions, please call me.

Very truly yours,

James A. Priolo, P.E.
Township Engineer

JAP/mk

Cc: Daniel Newman, Jr., Construction Official

TOWNSHIP OF BRICK

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

Department of Administration & Finance
Office of Land Use Management
Sean Kinnevy
Zoning Officer
(732) 262-1041
skinn@twp.brick.nj.us

Kate MacDonald
Asst. Zoning Officer
(732) 262-1043
Fax: (732) 262-8954
kmacdon@twp.brick.nj.us
http://www.twp.brick.nj.us

December 14, 2004

David Voight
Kennedy Mall Associates
641 Shunpike Road
Chatham, NJ 07928

Re: Block 670, Lot 4
2770 Hooper Avenue – Kennedy Mall
Zoning permit application – Beauty Supply

Dear Mr. Voight:

Your application for a zoning permit for an alteration to the building on the referenced property for a tenant fit-up cannot be approved because a site plan must be approved by the Planning Board for the change of use, as per Section 190-240 of the Township Code and because you proposing parking and landscaping changes on the site.

Very truly yours,

Sean Kinnevy

Sean Kinnevy
Zoning Officer

Cc: Scott MacFadden, Business Administrator
Michael Fowler, Township Planner
Kate MacDonald, Assistant Zoning Officer
Lisa Rose Tavalaiccio, Zoning Permit Clerk
Daniel Newman, Jr., Construction Official

2/15/05 - Resubmit Plot

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 670 LOT 4 SITE ADDRESS 2770 Hooper Ave # 3
TYPE OF SITE Residential / (Commercial) NAME OF BUSINESS Scotty Lawn
APPLICANT Facility Maintenance PHONE NUMBER 973-906-2800
APPLICANT ADDRESS 641 Shunpike Rd CITY & STATE Chatham, NJ 07928

INCLUSIONARY DEVELOPMENT

Affordable
- Fee Required _____ Date _____
- Down Payment _____ Date _____
- Balance _____ Date _____
- Paid In Full _____ Date _____

Market Rate — No Fee Required

MANDATORY DEVELOPER FEES

◊ Residential is .005 %

X Commercial is .01%

X The estimated equalized assessed value of the proposed construction is

$ 20,000.

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 2/23/05 Date

◊ The final equalized assessed value of the construction at the above referenced site is:

$ _____

_____ Frederick R. Millman, CTA, Tax Assessor — _____ Date

Preliminary Fee 100.00
Check # 003577
Date 2/28/05
Receipt # 337444

Final Fee _____
Check# _____
Date _____
Reciept # _____

Total Fee Due/Paid 1200.00
Balance Due _____

Fees Imposed To Date _____
Fees Reached $15,000 _____ Date

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

2/17/05 - Ta pkelen
3/22/05 - Final letter faxed

_____ Office of Affordable Housing

KENNEDY MALL ASSOCIATES
C/O FIDELITY MANAGEMENT COMPANY
641 SHUNPIKE ROAD
CHATHAM, NJ 07928

337494

JPMORGAN CHASE BANK
2 WAVERLY PLACE
MADISON, NJ 07940

003877

55-233
212

Date
2/25/2005

Check Amount
$100.00

One Hundred AND 00/100 Dollars

Pay to the order of:

TOWNSHIP OF BRICK

401 CHAMBERS BRIDGE ROAD
BRICKTOWN, NJ 08723

[redacted]

Business/Development: Realty Supply

Owner/Applicant: Kennedy Mall Assoc.

Property Address: 2220 Hooper Ave #3

Block: 670 Lot: 4

DEPOSIT RECEIVED
Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

DATE: 2/28/05

Check Number 003877

Preliminary Fee Paid $100.00

Final Fee Paid

FOR DEPOSIT ONLY - AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance
354-2C-93, is pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C. 5:92-18 et seq.

Received in Treasurer's Office by:

Signature

2/28/05
Date

OFFICE OF AFFORDABLE HOUSING

AHBT PRELIMINARY APPROVAL

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: 2720 Hooper Ave - TENANT 3
Block: 670 Lot: 4
Owner's Name: Kennedy Mall Assoc.
Owner's Mailing Address: 641 Shunpike Rd
Chatham NJ 07928
Phone: (973) 966 2800

BUILDING

Contractor: Fidelity Maintenance
Address: 641 Shunpike Rd
Chatham NJ 07928
Phone#: 973 966 2800
Lis #
Federal Emp # or SSN 22-3053500

Technical Data

Description of Work:

- Interior Fit. out
- New sidewalk, steps + ramp.
- New storefront.

Type of Work

___ New Building	___ Siding
___ Addition	___ Fence
X Alteration	___ Pool
___ Roofing	___ Demolition
___ Asbestos Abatement	___ Sign _____ sq ft
___ Fireplace wd/gas	

Building Characteristics

Use Group Present:_____ Proposed:_____
No of Stories:
Height of Structure:
Area of the largest floor:
Area of New Structure:
Volume of New Structure:
Total Land Disturbed:

Cost of Alteration: $ 11,200

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $

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

Signature: David Voight
Please Print Name David Voight

ELECTRICAL

Contractor: Mike Chambers Oakhurst Electric
Address: 823 West Park Ave., #168
Ocean, NJ 07712
Phone#: 732 531-9400
Lis #: 8716
Federal Emp # or SSN 311-810-060/000

Technical Data

Item	Quantity
Lighting Fixtures	38
Receptacles	11
Switches	3
Detectors	1
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	4
Communication Points	
Alarm Devices/FAC Panel	
Total	

Pool (Receptacles, Switches, Lights, Motor 1HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	1 KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Sprinkler System	
Service	AMP
Subpanel	100 AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: 6,800

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

Signature: James A. Benson
Please Print Name James A. Benson

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor: Nielsen Plumbing
Address: 241 Cherry Quay Rd
Brick NJ 08723
Phone #: 732 920 1695
Lis #: 816
Federal Emp # or SSN [redacted]

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	1
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	
Lavatory (BR Sink)	1
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bib	
Gas Piping ____ No. of outlets	
Fuel Oil Piping	
Water Heater	1
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Air Conditioner (Condensate Drain) ____ Tons	
Septic Tank Closure	
Sewer Service Connection	
Water Service Connection	
Active Solar System	
Auxiliary Meter	
Sump Pump	
Pool Heater	

Other:

Estimated Cost of Plumbing Work $6,000.00

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

Signature: [signature]

Please Print Name: Ronald S Nielsen

CONTRACTOR'S SEAL

FIRE

Contractor: _____
Address: _____
_____
Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Description of Work:

Heating Type: ____Gas ____Oil ____Electric ____Solar
Heating System is ____New ____Existing
Location of Furnace/Boiler: _____
Water Supply Source _____
Method of Valve Supervision _____
Local Alarm Supervision _____
Central Supervision: _____
Proprietary Supervision: _____

Tank Removal _____
Flammable Storage Tanks _____capacity_____fuel
Combustible Storage Tanks _____capacity_____fuel
LPG Storage Tanks _____capacity_____fuel

Item	Quantity
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
CO Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust System Commercial	

Pre-Engineered Systems:
CO2 Suppression _____
Halon Suppression _____
Foam Suppression _____
Dry Chemical _____
Wet Chemical _____

Gas/ Oil Fired Appliances:
Gas Stove _____
Gas Dryer _____
Furnace (Gas or Oil) _____
Gas Fireplace _____
Gas Logs _____
Total Appliances _____

Wood Burning Stove _____
Wood Fireplace _____
Other:

Estimated Cost of Fire Work _____

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

Signature: _____

Print Name: _____