BLOCK 670 LOT 4 QUALIFICATION CODE _____ ADDRESS (SITE) 2770 HOOPER AVE. PERMIT NO. 06-2621

CONSTRUCTION PERMIT APPLICATION

Called 8/17/06

C06101226

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

I. IDENTIFICATION

1. Proposed Work Site at: 2770 Hooper Ave. WEST MARINE / KENNEDY MALL
2. Name of Owner in Fee: WEST MARINE CORP. Tel. (732) 477-9661
   Address 2770 HOOPER AVE. (street) BRICK (municipality) NJ (zip code)
3. Ownership in fee: Public _____ Private ✓
4. Principal Contractor: PAUL SIGNS INC. Tel. (718) 788 7593
   Address 654 4 AVE. BROOKLYN NY 11232
   License No. C [redacted] Exp. Date _____
   Federal Empl [redacted] FAX: (718) 788 1512
5. Architect or Engineer _____ Tel. (___) _____
   Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun PAUL BOEGEMANN
   Tel. (718) 788 7593 FAX: (718) 788 1512

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	59 ✓		
2. Electrical		40 ✓		
3. Plumbing				
4. Fire Protection				
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review		5		
8. Subtotal	$			
9. State Permit Fee Surcharge				
10. Subtotal	$	30		
11. Cert. of Occupancy				
12. Other		134		
13. TOTAL	$			

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 _____

COMMERCIAL

OPTIONAL (for office use only)

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☒ Minor Work	3500.-				8-30-06	Emp	10-3-06		T
2. ☐ New Building		7	7						
3. ☐ Addition									
4. ☐ a. Repair		-	-						
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☒ Electrical					9-26-06	INV	10-16-06		
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS									

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 Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

LDS BR-B 10327999

U.C.C. F100-1 (rev. 04/03)

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 PAUL SIGNS INC.

Address 654 4 AVE,
BROOKLYN NY 11232

Telephone (718) 788-7593

Signature Paul Boeglin

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. _____	_____	_____	_____	_____

RECEIVED

MAR 23 2006

IMPORTANT *FOR OFFICE USE ONLY*

A.H.B.T. - EXEMPT

Constituent Contact Report

Date	Comments	Initials
3-23-6	LETTER OF INCOMPLETE APPLICATION ISSUED BY ZONING OFFICER	SK 20
5-3-6	LETTER OF ZONING DENIAL ISSUED	SK 20

□ Zoning Application deemed complete Initialed: _____ Date: _____

□ Zoning Application approved Initialed: _____ Date: _____

□ Zoning permit updates:

_____

_____

_____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	10/26/2007
Control Number	C-06-101226
Permit Number	06-2621
Permit Issue Date	08/08/2006
Certificate Number	06-2621

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 2770 HOOPER AVE. Brick Township, NJ Block: 670 Lot: 4 Qual:

Owner in Fee: KENNEDY MALL ASSOCIATES

Owner Address: 641 SHUNPIKE RD. CHATHAM NJ 07928

Telephone:

Contractor PAUL SIGNS INC

Address 654 4TH AVENUE BROOKLYN NY 11232

Telephone: (718) 788-7593 Fax: (718) 788-1512

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Used: SIGN INSTALLATION

Certificate Comments:

☐ **Certificate of Occupancy**
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☑ **Certificate of Approval**
This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **Certificate of Continued Occupancy**
This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ **Temporary Certificate of Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 10/26/2007

CONSTRUCTION PERMIT

Date Issued 8/8/2006
Control # C-06-101226
Permit # 06-2621

IDENTIFICATION Block: 670 Lot: 4 Qualifier

Work Site Location: 2770 HOOPER AVE. Brick Township, NJ

Owner in Fee: KENNEDY MALL ASSOCIATES
Address: 641 SHUNPIKE RD. CHATHAM NJ 07928
Telephone:

Contractor: PAUL SIGNS INC
Address: 654 4TH AVENUE BROOKLYN NY 11232
Telephone: (718) 788-7593
Lic. No. or Bldrs. Reg. No
Federal Employee. No. [redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SIGN INSTALLATION

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 $3,600

Construction Official Date

PAYMENTS (Office Use Only)

Building	$59
Electrical	$40
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$5
CO Fee	
Other	$30
Total	$134
Check No.	7420
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 Control # 06-2621

Date Issued Permit # 8-8-06

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 ~~WEST MARINE CORP.~~ Unit #17
2770 HOOPER AVE, BRICK NJ 08723

Owner in Fee ~~WEST MARINE~~ Kennedy MALL ASSOC.

Address ~~2770 HOOPER AVE.~~ 641 Shunpike Rd
~~BRICK NJ 08723~~ 08723 Chatham NJ 07928

Tel. (732) 477 6991

Contractor PAUL SIGNS INC.

Address 654 4 AVE.
BROOKLYN NY 11232

Tel. (718) 788 7593 FAX (718) 788 1512

Contractor License No. or Builder Registration No. [redacted]

Federal Emp. No

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALLATION OF NEW SIGN LETTERS

← 23' 5" →

West Marine 30" ↕

(2) 30" FACE REPLACEMENTS ON EXISTING SIGNS

SIGN = 58.75 SQ FT (59)

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Required	8-30-06	KM
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 10-7-07
Approved by: KM

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			10-7-07	
Barrier-Free				

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence Height (exceeds 6')
- [X] Sign ~~$~~ 58.75 Sq. Ft. (59)
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Other
- [ ] Demolition

Needs electrical

FEE (Office Use Only)

$ 150.00 ELECTRICAL

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

B. BUILDING CHARACTERISTICS

	Present	Proposed
Use Group		
Constr. Class		
No. of Stories	1	
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. $ 0
2. Rehabilitation $ 0
3. Total (1+ 2) $ 3500

U.C.C. F110 (rev. 07/03)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control # 06-2621

Date Issued
Permit # 8-8-06

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 ~~WEST MARINE CORP~~ Unit #17
2770 HOOPER AVE. BRICK NJ 08723

Owner in Fee ~~WEST MARINE~~ Kennedy MALL ASSOC.
Address 2770 HOOPER AVE. 641 Shunpike Rd
~~BRICK NJ 08755~~ 08723 Chatham NJ 07928

Tel. (732) 477 6991
Contractor PAUL SIGNS INC.
Address 654 4 AVE.
BROOKLYN NY 11232
Tel. (718) 788 7593 FAX (718) 788 1512
Contractor License No. or Builder Registration No.
Federal Emp. No 113274057

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Required	8-3-06	KM
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
No. of Stories 1
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. $ 0
2. Rehabilitation $ 0
3. Total (1+ 2) $ 3500

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALLATION OF NEW SIGN LETTERS

← 23' 5" →
West Marine 30" ↓

(2) 30" FACE REPLACEMENTS ON EXISTING SIGNS

SIGN = 58.75 SQ FT (59)

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[X] Roofing
[ ] Siding
[ ] Fence Height (exceeds 6')
[X] Sign 58.75 Sq. Ft. (59)
[ ] Pool
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Other
[X] Demolition

FEE (Office Use Only)
$

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 06-2621

Date Issued / Permit # 8-8-06

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

Block 670 Lot 4 Qualification Code

Work Site Location WEST MARINE Unit #17
2770 HOOPER AVE, BRICK NJ ~~08733~~ 08723

Owner in Fee WEST MARINE CORP, KENNEDY MALL ASSOC.

Address ~~2770 HOOPER AVE~~ 641 SHUNPIKE RD
~~BRICK NJ 08733~~ 08723 CHATHAM NJ 07928

Tel (732) 477-9661

Contractor PAUL SIGNS INC.

Address 65A 4 AVE
BROOKLYN NY 11232

Tel (718) 788-7593 FAX (718) 788 1512

Contractor License No. [redacted]

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed SIGN TO

[ ] Pole/Pad # [ ] Temporary [✓] Other EXISTING ELECTRIC

Building Occupied as Utility Co. NO PRIMARY WORK BY CONTRACTOR

Est. Cost of Elec. Work $

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.

Paul Baefmann

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

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

COMMERCIAL

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: 7260

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [X] CA

Date: 101607

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			101607	
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 06-2621

Date Issued / Permit # 8-8-06

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 ~~WEST MARINE~~ Unit #17
2770 HOOPER AVE. BRICK NJ ~~08735~~ 08723

Owner in Fee ~~WEST MARINE CORP.~~ KENNEDY MALL ASSOC.

Address ~~2770 HOOPER AVE~~ 641 SHUNPIKE RD
~~BRICK NJ 08735~~ 08723 CHATHAM NJ 07928

Tel (732) 477-9661

Contractor PAUL SIGNS INC.

Address 654 4 AVE
BROOKLYN NY 11232

Tel (718) 788-7593 FAX (718) 788 1512

Contractor License No [redacted]

Federal Emp. No. [redacted]

B. ELECTRICAL CHA

Use Group Prese[redacted] Proposed SIGN TO

[ ] Pole/Pad # [ ] Temporary [X] Other EXISTING ELECTRIC

Building Occupied as Utility Co. NO PRIMARY WORK BY CONTRACTOR

Est. Cost of Elec. Work $

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.

Paul Kaufmann

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

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

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: 7260

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

Township of Brick
Zoning Permit

Approved: Monday, July 24, 2006 **Number:** 977

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

Property Address: 2770 Hooper Avenue; Kennedy Mall

Applicant: Jeanne Boegemann; Paul Signs, Inc.

Property Owner Kennedy mall Associates

Existing Use: Boat U.S. Marine Center supply store; Unit No. 17

Proposed Use: West Marine supply store; Unit No. 17

Proposed Construction: Replace wall sign, 23'5" x 30", "West Marine", and logos.

Conditions: The total sign area may not exceed 15% of the total façade area.

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

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

RECEIVED
APR 27 2006

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. BRICK NJ 08723 unit #

PERSONAL NAME OF APPLICANT ODETTE INTILLI

BUSINESS NAME OF APPLICANT WEST MARINE CORP.

MAILING ADDRESS OF APPLICANT 2770 HOOPER AVE. BRICK NJ 08723

PROPERTY OWNER'S FULL NAME NATIONAL REALTY & DEVELOPMENT CORP.

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☒ Commercial (please describe) RETAIL STORE - MARINE SUPPLIES

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☒ Commercial (please describe) RETAIL STORE - MARINE SUPPLIES

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) NAME CHANGE ON EXISTING SIGN, US BOAT → WEST MARINE

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

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

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

SIGNATURE OF APPLICANT Paul Siegman PAUL SIEGMAN Date 3/16/06

Reviewed by Zoning Office SC Date 5/3/06 ( ) Approved (X) Denied

RECEIVED
JUL 24 2006
ZONING

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

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

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

BLOCK 670 LOT 4 QUALIFIER _____ Unit #17

PROPERTY ADDRESS 2770 Hooper Avenue Brick NJ 08723 Bldg 2.

PERSONAL NAME OF APPLICANT Jeanne Boegemann

BUSINESS NAME OF APPLICANT Paul E Signs Inc

MAILING ADDRESS OF APPLICANT 654 47th Ave Brooklyn NY 11232

PROPERTY OWNER'S FULL NAME Kennedy Mall Associates

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☒ Commercial (please describe) Retail Store - Marine Supplies

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☒ Commercial (please describe) Retail Store - Marine Supplies

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) NAME CHANGE ON EXISTING SIGN, US BOAT → WEST MARINE
23'5" x 30" 58.75 SQFT.

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

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

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

SIGNATURE OF APPLICANT Jeanne Boegemann Paul Signs Inc Date 7/20/06

Reviewed by Zoning Office SC Date 7/24/6 ☒ Approved ( ) Denied

TOWNSHIP OF BRICK

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

Department of Administration & Finance
Division of Land Use and Planning
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

May 3, 2006

Odette Intilli
West'Marine Corp.
2770 Hooper Avenue
Brick, NJ 08723

Re: Block: 670 Lot: 4
2770 Hooper Avenue – Kennedy Mall

Dear Ms Intilli,

Your zoning permit application for a sign on the referenced property cannot be approved because the application is incomplete.

- Mail-in and/or drop-off applications are not recommended. A lack of review by the Zoning Permit Clerk often results in incomplete and inaccurate applications which cause delays in the review process.
- The application must be completely and accurately filled out and signed by the applicant.
- The unit and building number must be provided.
- The applicant's name, signature and mailing address must match on all parts of the application.

Please amend your application and submit the required information to LisaRose Tavalaiccio, Zoning Permit Clerk. Ms Tavalaiccio can be reached at 732-262-1046 for further information. We will then be able to review your application.

Very Truly Yours,

Kate MacDonald
Assistant Zoning Officer

C: Scott R. MacFadden, Business Administrator
Michael P. Fowler, Principal Planner

TOWNSHIP OF BRICK

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

Department of Engineering

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

March 23, 2006

Paul Boegemann
Paul Signs, Inc.
654 Fourth Avenue
Brooklyn, NY 11232

Re: Block 670, Lot 4
2770 Hooper Avenue – Kennedy Mall
Sign Permit Application

Dear Mr. Boegemann:

Today I received a FedEx package from you containing construction and zoning permit applications for signs for West Marine on the referenced property. The applications are inaccurate and incomplete, as noted, and are being returned to you with this letter. Please correct and complete the application and submit it to the Division of Inspections office, which is the office which receives applications and issues construction and zoning permits.
Please contact the Division of Inspections office and the Zoning Permit Clerk for any additional information or clarification.

Very truly yours,

Sean Kinnevy
Zoning Officer

C: Scott MacFadden, Business Administrator
Michael Fowler, Principal Planner
Daniel Newman, Jr., Construction Official, Division of Inspections
Lisa Rose Tavalaiccio, Zoning Permit Clerk

TOWNSHIP OF BRICK

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

Division of Land Use, Planning
& Affordable Housing

Michael P. Fowler, AICP/PP
Municipal Planner
(732) 262-1042

Tara B. Paxton, AICP/PP
Assistant Municipal Planner
(732) 262-4783

Fax: (732) 262-8954
http://www.twp.brick.nj.us

FAX CORRESPONDENCE

DATE: 6-23-06

TO FAX #: 831 768 5979

PAGES TO FOLLOW: 1

ATTENTION: Jennifer

FROM: K. MacDonald

MESSAGE:

23'-5"

2'-11"

19'-8 1/2"

2'-6"

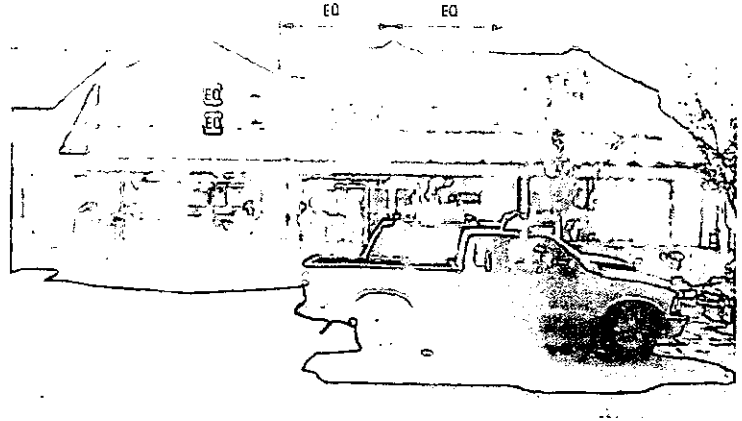
West Marine

A SIGN ELEVATION

SCALE: 1/4" = 1'-0"

Manufacture & install one (1) internally illuminated channel letters.

ITEM	DESCRIPTION	VENDOR	SPECIFICATION
Face	Acrylic	Acrylite	White #015-2
Face decoration	1st surface vinyl	3M	Blue Day/Night (DN000811)
Return	5" deep aluminum	Alliance	Heron Blue
Trimcap	1"	Jewelite	Blue
Illumination	Double Tube	Voltarc	6500/White/Argon



A PHOTO OVERLAY

NOT TO SCALE

1051 46th Avenue
Oakland, CA 94601
Phone 510.533.7693
Fax. 510.533.0815
Lic. #314794
www.arrowsigncompany.com

Job Name:	West Marine #1748
Address:	2770 Hooper Ave.
City:	Brick, NJ
Date:	12-6-05
Sales:	Mike Magee
Design:	Andre C.
Design:	120514-3
Filename:	2005/W/West Marine/ #1748 Brick
Sheet:	1

Customer Approval:

Revision	Date	Description

Brick Township

Plan Review	Class	Date	By
Zoning	wall sign	7/24/6	MC
Plumbing			
Building			
Fire			
Electrical			

PAUL SIGNS
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718.788.7593

654 4th Avenue
Brooklyn, New York

Fax: 718.788.3040
www.paulsigns.com

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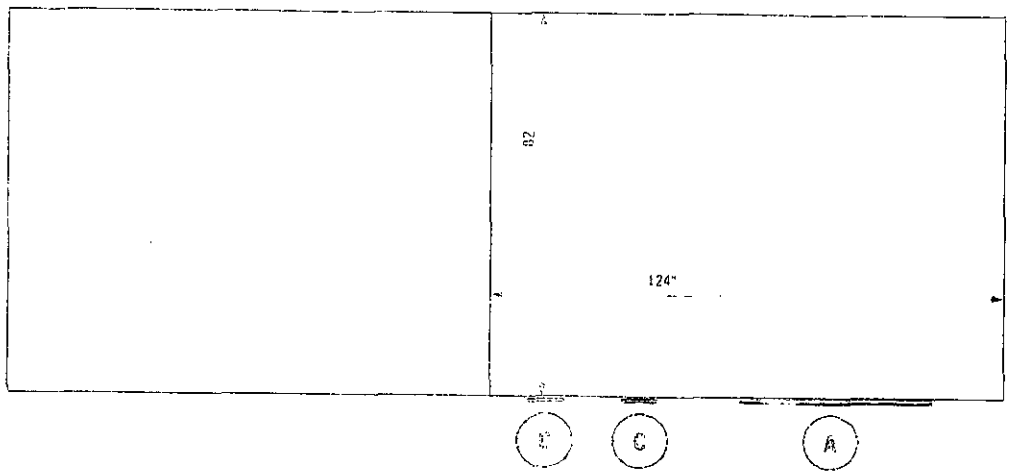

BRICK BLVD.

HOOPER AVENUE

SITE PLAN — NOT TO SCALE

ARROW

1051 46th Avenue
Oakland, CA 94601
Phone 510.533.7693
Fax. 510 533.0815
Lic. #314794
www.arrowsigncompany.com

Job Name:	West Marine #1748
Address:	2770 Hooper Ave.
City:	Brick, NJ
Date:	12-6-05
Sales:	Mike Magee
Design:	Andre C.
Design:	120514-3
Filename:	2005/W/West Marine/ #1748 Brick
Sheet:	4

Customer Approval:

Revision	Date	Description
A	12/2/05	Change to sheet 4, add sign C

Brick Township

Plan Review	Class	Date	By
Zoning	Wall Sign	9/24/6	JC
Plumbing			
Building			
Fire			
Electrical			

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654 4th Avenue
Brooklyn, New York

Fax: 718.788.3040
www.paulsigns.com

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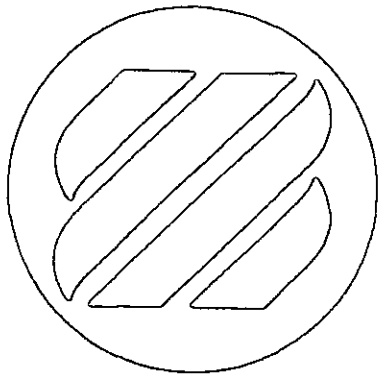
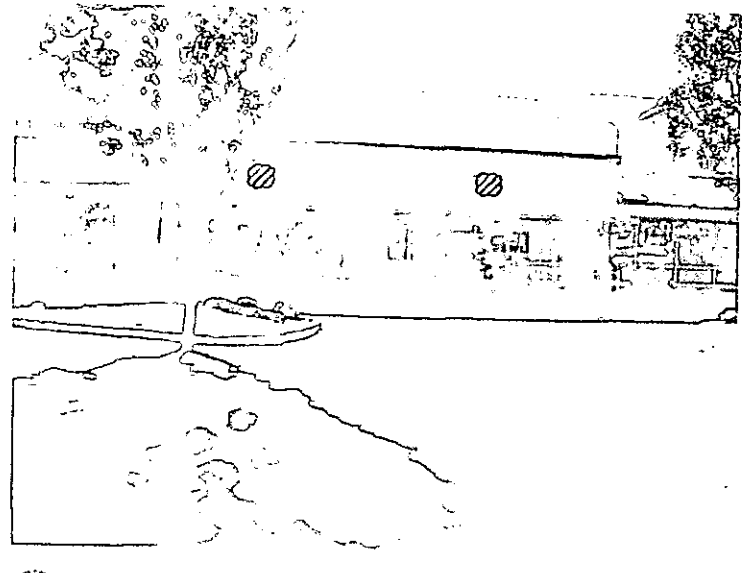


C SIGN ELEVATION — SCALE: 1" = 1'-0"

Reface two (2) single faced internally illuminated channel logo.

ITEM	DESCRIPTION	VENDOR	SPECIFICATION
Face	Acrylic	Acrylite	White #015-2
Face decoration	1st surface vinyl	3M	Blue #3630-8592
Graphic			Show thru white
Trimcap	1"	Jewelite	Blue
Cabinet	Repaint	Kelly Moore	To match Blue #3630-8592



C PHOTO OVERLAY — NOT TO SCALE

ARROW SIGN COMPANY

1051 46th Avenue
Oakland, CA 94601
Phone 510.533.7693
Fax. 510.533.0815
Lic. #314794
www.arrowsigncompany.com

Job Name:	West Marine #1748
Address:	2770 Hooper Ave.
City:	Brick, NJ
Date:	12-6-05
Sales:	Mike Magee
Design:	Andre C.
Design:	120514-3
Filename:	2005/W/West Marine/ #1748 Brick
Sheet:	3

Customer Approval:

Revision	Date	Description
A	12-29-05	Repaint cabinet

Brick Township

Plan Review	Class	Date	By
Zoning	Wall Sign	7/24/6	JC
Plumbing			
Building			
Fire			
Electrical			

CERTIFICATION TO OBTAIN MUNICIPAL PERMIT

STATE OF NEW JERSEY
MUNICIPALITY:____
Permit No.

In the Matter of the
Application for a
Construction Permit at
WEST MARINE
2770 HOOPER AVE, BRICK NJ
(Work site location)

I, PAUL BOEGEMANN, of full age, hereby certify and say:
(Your name)

1. I am making this certification on behalf of PAUL SIGNS INC. (the "Contractor").
(Name of Applicant on a Home Improvement Contractor Application for Initial Registration to the New Jersey Division of Consumer Affairs)

I am authorized by the Contractor to make the application for a construction permit for the work site identified above, and this certification.

2. The Contractor is identified as the principal contractor on the construction permit application and I am making this certification in support of the application.

3. The Contractor submitted a Home Improvement Contractor Application for Initial Registration (the "Application") to the New Jersey Division of Consumer Affairs on or before December 31, 2005. To the best of my knowledge, all of the questions on the Application were answered fully and truthfully. In addition, the Contractor completed and submitted the Disclosure Statement and all required documentation, and paid the $90.00 registration fee.

4. As of the date of this Certification, the Contractor's Application for registration has not been denied by the New Jersey Division of Consumer Affairs, but no registration number has yet been received.

5. The Contractor has obtained commercial general liability insurance in the minimum amount of $500,000 per occurrence, which policy is currently in full force and effect.

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements are willfully false, I am subject to punishment.

Dated: 3/16/06

_____
(Your signature)

owner
_____
(Title)

CONSUMER ADVISORY OF HOME IMPROVEMENT CONTRACTOR REGISTRATION STATUS

This advisory is provided, in accordance with instructions from the New Jersey Division of Consumer Affairs, to give you important information about home improvement contracts and my status as an applicant for registration as a home improvement contractor. Please be advised that there is a new law, which went into effect on December 31, 2005, that requires any person engaged in the business of making or selling home improvements to be registered with the New Jersey Division of Consumer Affairs.

Prior to December31, 2005, I filed a complete application for registration, paid the fee and demonstrated that I have obtained the commercial general liability insurance required under the law. I have not yet received a registration number; however, the Division of Consumer Affairs has notified municipal officials and applicants that, after December 31, 2005, applicants who have completed applications pending, which have not been denied, may continue to receive permits and make or sell home improvements while the application remains pending, without being deemed in violation of the law. Therefore, I am permitted to continue to obtain municipal construction permits without a registration number (unless my application for registration is denied). You should understand that the Division does not represent, warrant, or guarantee that the filing of a completed application will result in its approval.

In accordance with the direction of the New Jersey Division of Consumer Affairs, I have agreed to advise you immediately of any action taken by the Division regarding my application for registration. If you have any questions regarding this matter, you may contact the New Jersey Division of Consumer Affairs at 1-888-656-6225.

In signing this document, I acknowledge that I have made the above disclosures to the consumer whose signature appears below prior to the execution of the contract.

Paul Boegeman

Contractor

In signing this document, I acknowledge that I have received the above disclosures from the contractor whose signature appears above prior to the execution of the contract.

See Enclosed Landlord approval

Consumer

Store Development Department
Linda.L@westmarine.com
Phone: 831.761.4818
FAX 831.768.5818

West Marine

October 17, 2005

VIA U.S. MAIL, CERTIFIED
RETURN RECEIPT REQUESTED

Kennedy Mall Associates, NJ Partnership
Attention: Elliott Warm, General Counsel
c/o Fidelity Management Company
641 Shunpike Road
Chatham, NJ 07928

Dear Mr. Warm:

Re: **West Marine Store #1748 - Bricktown (Boat US) at Kennedy Mall**
2770 Hooper Avenue, Brick, NJ 08723

We are pleased to announce that we intend to change the names of a large majority of our Boat US stores from BOAT/U.S to WEST MARINE, the principal brand name of our nearly 400 store chain. Changing the brand names will greatly enhance our ability to reach our customers through West Marine's comprehensive brand marketing programs. We hope that you will join us in our enthusiasm for this change. Shortly we will have our national sign companies surveying each of our locations. We will, of course, obtain all necessary permits.

We would appreciate your evidencing your approval to this change by signing where indicated below and returning to us the extra enclosed copy of this letter by regular mail. In the meantime, we would appreciate your faxing this letter (to FAX 831.728.5926), signed as requested. By faxing the letter you agree that the fax will have the same effect as an original, signed copy. You will shortly be hearing from our sign company to coordinate installation.

Please note that the information contained in this letter has not been released publicly and therefore constitutes West Marine's proprietary and confidential information. As such, we require that you treat as private and privileged all of the information related to the business of West Marine including any information, projections, and timelines related to the above-referenced conversion and not release any such information to any other person (except as necessary to your employees or agents on a "need to know" basis or if compelled by legal proceeding) unless and until the information is released publicly by us. Thank you for you cooperation in this matter.

Should you have any questions or comments, please call Gretchen North at 760-767-4534.

Very truly yours,

West Marine Products, Inc., Tenant

Linda I. Leyba

Linda Isaida Leyba, AVP

Duplicate enclosed

Name Change Approved:

Kennedy Mall Associates, NJ Partnership
By: WSA/KENNEDY LLC, PARTNER

By: _____
Authorized Signature

Printed Name SALVATORE A. BAUNO

Title MANAGER

Date 10-20-05

FedEx Express **US Airbill**

FedEx Tracking Number **8558 4439 2763**

SPH32

Form ID No. **0215**

Recipient's Copy

RECIPIENT: PEEL HERE

1 From This portion can be removed for Recipient's records.

Date 3/23/06

FedEx Tracking Number 8558 4439 2763

Sender's Name Paul

Phone

Company PAUL SIONS

MAR 23 2006

Address 654 4TH AVE

Dept/Floor/Suite/Room

City BROOKLYN State NY ZIP 11232

2 Your Internal Billing Reference

3 To

Recipient's Name SEAN KINNEVY Phone 732 262 1041

Company TOWNSHIP OF BRICK

Recipient's Address ZONING OFFICE

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept/Floor/Suite/Room

Address 401 CHAMBERS BRIDGE ROAD

To request a package be held at a specific FedEx location, print FedEx address here.

City BRICK State NJ ZIP 08723

0328470035

8558 4439 2763

4a Express Package Service — *Packages up to 150 lbs.*

- [X] FedEx Priority Overnight — Next business morning.* Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
- [ ] FedEx Standard Overnight — Next business afternoon.* Saturday Delivery NOT available.
- [ ] FedEx First Overnight — Earliest next business morning delivery to select locations.* Saturday Delivery NOT available.
- [ ] FedEx 2Day — Second business day.* Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
- [ ] FedEx Express Saver — Third business day.* Saturday Delivery NOT available.

FedEx Envelope rate not available. Minimum charge: One-pound rate. * To most locations.

4b Express Freight Service — *Packages over 150 lbs.*

- [ ] FedEx 1Day Freight* — Next business day.** Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
- [ ] FedEx 2Day Freight — Second business day.** Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
- [ ] FedEx 3Day Freight — Third business day.** Saturday Delivery NOT available

* Call for Confirmation. ** To most locations.

5 Packaging

- [X] FedEx Envelope*
- [ ] FedEx Pak* — Includes FedEx Small Pak, FedEx Large Pak, and FedEx Sturdy Pak.
- [ ] FedEx Box
- [ ] FedEx Tube
- [ ] Other

* Declared value limit $500.

6 Special Handling — Include FedEx address in Section 3.

- [ ] SATURDAY Delivery — Not available for FedEx Standard Overnight, FedEx First Overnight, FedEx Express Saver, or FedEx 3Day Freight.
- [X] HOLD Weekday at FedEx Location — Not available for FedEx First Overnight.
- [ ] HOLD Saturday at FedEx Location — Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

Does this shipment contain dangerous goods? One box must be checked.

- [ ] No
- [ ] Yes — As per attached Shipper's Declaration.
- [ ] Yes — Shipper's Declaration not required.
- [ ] Dry Ice — Dry Ice, 9, UN 1845 ____ x ____ kg

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging. [ ] Cargo Aircraft Only

7 Payment *Bill to:* Enter FedEx Acct. No. or Credit Card No. below.

- [ ] Sender — Acct. No. in Section 1 will be billed.
- [ ] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

Obtain Recip. Acct. No. [ ]

Total Packages | Total Weight | Total Charges

†Our liability is limited to $100 unless you declare a higher value. See the current FedEx Service Guide for details.

Credit Card Auth.

8 *NEW* Residential Delivery Signature Options If you require a signature, check Direct or Indirect.

- [ ] No Signature Required — Package may be left without obtaining a signature for delivery.
- [ ] Direct Signature — Anyone at recipient's address may sign for delivery. *Fee applies.*
- [ ] Indirect Signature — If no one is available at recipient's address, anyone at a neighboring address may sign for delivery. *Fee applies.*

519

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