



Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

***This File Contains Personal Identifiable
Information of Private Citizen(s).***

Certain information contained in this file is ***Exempt from Release*** under the Open Public Records Act (OPRA) (Public Law 2001, CHAPTER 404 (N.J.S.A. 47:1A-1 et seq.)) and Executive Orders issued by the Governor of New Jersey. The following information ***MUST*** be redacted prior to release:

- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson", is written over a horizontal line.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020



Q20-004117

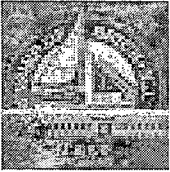
V. FEE SUMMARY (for office use only)		Update	Update
1. Building	\$ 150		
2. Electrical	180		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee	5		
10. Subtotal	\$ 145		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ 370		

VI. BUILDING/SITE CHARACTERISTICS		(office use only)
1. Number of Stories _____		
2. Height of Structure _____ ft.		
3. Area — Largest Floor _____ sq. ft.		
4. New Building Area _____ sq. ft.		
5. Volume of New Structure _____ cu. ft.		
6. Max. Live Load _____		
7. Max. Occupancy Load _____		
8. If Industrialized Building: State/Approved _____ HUD _____		
9. Total Land Area Disturbed _____ sq. ft.		
10. Flood Hazard Zone _____		
11. Base Flood Elevation _____ ft.		
12. Wetlands yes _____ no _____		

IIa. PROPOSED WORK ☐ Minor Work ☐ New Building ☐ Addition ☐ Demolition ☐ Repair ☐ Alteration ☐ Renovation ☐ Reconstruction ☐ Asbestos Abat. -Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit								
FOR OFFICE USE ONLY (Optional)								
IIb. SUBCODES (Check all that apply)	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval Rejection	Re-viewer
☐ Building								
☒ Electrical		CW	12/4/20		1-29-21	ECC		
☐ Plumbing								
☐ Fire Protection								
☐ Elevator								
TOTAL COST		\$0						

VII. DESCRIPTION OF BUILDING USE A. RESIDENTIAL (primary use) 1. State Specific Use: _____ 2. Use Group, Proposed: _____ 3. Change in Use Group, Indicate Present: _____ 4. No. of dwelling units: <u>Total Units</u> <u>Income-restricted</u> Gained, Sale _____ Gained, Rental _____ Lost, Sale _____ Lost, Rental _____		B. NON-RESIDENTIAL (primary use) 1. State Specific Use: _____ 2. Use Group, Proposed: _____ 3. Change in Use Group, Indicate Present: _____ C. MIXED USE -List secondary use(s): _____ D. Construct. Classification: Present _____ Proposed _____
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DO YOU WANT: 1. ☐ Partial Releases 2. ☐ Prototype Processing		DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING: 1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks 2. ☐ High Pressure Boilers 4. ☐ Refrigeration Systems 5. ☐ Cross-Connections/Backflow Preventers 6. ☐ Hazardous Uses/Places of Assembly 8. ☐ Smoke Control Systems in Open Wells 9. ☐ Underground Storage Tanks 10. ☐ Swimming Pools, Spas and Hot Tubs 12. ☐ Fire Alarm			
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Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 03/26/2021
Control Number C-20-004117
Permit Number 21-0308
Permit Issue Date 02/09/2021
Certificate Number 21-0308

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 135-197 VAN ZILE RD. Brick Township, NJ Block: 1149 Lot: 1 Qual: _____
Owner in Fee: BRICKTOWN PLAZA ASSOCIATES
Owner Address: 600 OLD COUNTRY RD #425 GARDEN CITY NY 11530
Telephone: (516) 393-8400
Contractor NJ LOGOWEAR
Address 100 MCKINLEY AVE MANAHAWKIN NJ 08050
Telephone: (609) 597-9400 Fax: _____ Federal Emp. Number: _____
License Number or Builders Registration Number: _____

Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: SIGN INSTALLATION - - GORDOUGH'S PIZZA ...INSTALL ILLUMINATED FACADE SIGN

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:

David A. Newman Jr.

Construction Official

Date Printed: 03/26/2021

U.C.C. F260 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____



GORDOUGHS PIZZA

ELECTRICAL SUBCODE TECHNICAL SECTION

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

Block 1149 Lot 1 Qualification Code _____

Work Site Location 135-197 VAN ZILE RD

Bricktownship NJ

Owner in Fee: Bricktown Plaza Assoc.

Tel. (516) 393-8400 e-mail _____

Address 500 OLD COUNTRY RD # 425 Garden City NJ 1103

Contractor: AJEC Electrical Contractors LLC Tel. (908) 757-9119

Address 43 Marne Street e-mail AJECLLC@outlook.com
Newark, NJ 07105

Contractor License No. 10311A Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. 47-4994784 FAX: (908) 757-0685

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 400

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Failure	Approval Initial
[] No Plans Required					
[] Partial Underslab Utilities Approved		Rough			
Date: _____ Approved by: _____		Barrier-Free			
[] Electric Plans Approved		Trench			
Date: <u>12-10-20</u> Approved by: <u>UW</u>		Temp. Serv.			
Joint Plan Review Required:		Constr. Serv.			
[] Bldg. [] Plumb. [] Fire. [] Elev.		TCO			
SUBCODE APPROVAL for PERMIT		Other			
Date: <u>12-28-10</u> Approved by: <u>UW</u>		Service			
SUBCODE APPROVAL for CERTIFICATE		Final			
[] CO [] CCO [] CA		Barrier-Free			
Date: <u>3-16-21</u> Approved by: <u>UW</u>		Temp. Cut-in-Card Date Issued			
		Final Cut-in-Card Date Issued			
		Annual Pool Inspection			
		Date of Grounding and Bonding Certification			

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here

Print name here: Joseph Livingston
[] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Inst. New Sign

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	_____
_____	_____	KW Elec. Sign/Outline Light	_____

To reorder call: ALLEGRA
Marketing • Print • Mail
(609) 390-1400

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



CONSTRUCTION PERMIT

Date Issued 1/9/21
Control # C-20-004117
Permit # 21-308

IDENTIFICATION Block: 1149 Lot: 1 Qualifier _____
Work Site Location: 135-197 VAN ZILE RD. Brick Township, NJ Contractor NJ LOGOWEAR
Address 100 MCKINLEY AVE MANAHAWKIN NJ 08050
Owner in Fee BRICKTOWN PLAZA ASSOCIATES
600 OLD COUNTRY RD #425 GARDEN CITY NY Telephone: (609) 597-9400
11530 Lic. No. or Bldrs. Reg. No. _____
Telephone: (516) 393-8400 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:

SIGN INSTALLATION - GORDOUGH'S PIZZA ...INSTALL ILLUMINATED FACADE SIGN

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

Estimated Cost of Work \$2,400

D. J. Muscarella
Construction Official

Date _____

U.C.C. F170
equiv (rev 1/04)

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.

PAYMENTS (Office Use Only)

Building	\$150
Electrical	\$150
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$5
CO Fee	
Other	\$0
Total	\$305
Check No.	<u>10002</u>
Cash	\$0
Credit	\$0
Collected By	<u>[Signature]</u>

745
378

RECEIVING CLERK _____
DATE REC'D _____

ZONING PERMIT APPLICATION

PERMIT # 2P-21-00152
DATE ISSUED 2/9/21

BLOCK: 1149 LOT: 1 QUALIFIER: _____ SITE ADDRESS: 151 van zile Rd

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Brick Town plaza associates
COMPLETE ADDRESS: 135-197 van zile Rd

PHONE # 516-393-8400 EMAIL: _____

2. NAME OF APPLICANT: Salvatore Colandrea
APPLICANT ADDRESS: 151 van zile rd

PHONE # 609-829-9331 EMAIL: sal@gordonghs.com

3. RESPONSIBLE PERSON FOR WORK: NJ Logo wear
PHONE# 609-661-9035 FAX# _____

4. SIGNATURE OF APPLICANT: Salvatore Colandrea

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 75-
OTHER: \$ _____
TOTAL: \$ 75-

REQUIRED BY APPLICANT

RESIDENTIAL: _____
COMMERCIAL: X
EXISTING USE: _____
PROPOSED USE: _____

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

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

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

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

HEIGHT: _____ (*IF APPLICABLE)

OTHER: _____

DESCRIPTION: New Signage

ZONING REVIEW:

DATE REVIEWED: 12-15-20 DATE DENIED: _____ DATE APPROVED: 12-15-20 INTI S. CW

(SEE BACK PAGE)

TOWNSHIP OF BRICK ZONING CHECKLIST

1) Four (4) copies of plot plan containing:

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

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

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

Choose which is applicable for submission

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

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



Brick Township
401 Chambers Bridge Rd.
Brick, NJ 08723
(732) 262-1041

Date Issued: _____
Application Number: ZA-20-01646
Application Date: 12/11/2020
Project Number: _____
Permit Number: _____
Fee: \$75.00

Zoning Permit

Worksite **135-197 VAN ZILE RD.**
Location: **Brick Township, NJ 08724**

Owner: **BRICKTOWN PLAZA ASSOCIATES**
Address: **600 OLD COUNTRY RD #425**
GARDEN CITY, NY 11530

Applicant: **Salvatore Colandrea**
Address: **151 Van Zile Rd.**
Brick, NJ 08724

Block: 1149 Lot: 1 Qualifier: _____ Zone: B-3

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

Present Use: Restaurant

☐ Non Conforming Use

☐ Non Conforming Structure

Proposed Use: Restaurant (Gordough's Pizza)

Work Description:

Sign - Installation of a facade sign for Gordough's Pizza.

The sign cannot exceed 15% of the storefront facade.

Additional Zoning Permit is required for additional work and signage.

Application Approved Date: 12/15/2020

Upon review it was determined that the Zoning Permit:

☒ Permitted by Ordinance

☐ Permitted by Variance approved on: _____

☐ Approved with Conditions

☐ Valid Nonconforming Use/Structure is established by

☐ Zoning Board of Adjustment

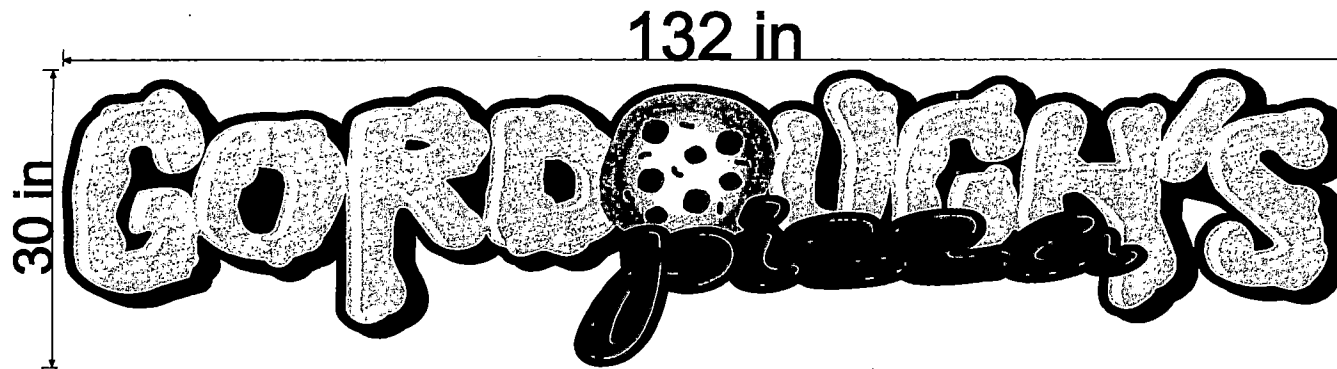
☐ Zoning Officer

Christopher J. Romano, Zoning Officer

12/15/2020

Date

Description: Custom Sign Work



Confirmation Drawing

Job: _____
Address: _____
Client: _____
Contact: _____
Phone: _____
Mobile/Cell: _____
Fax: _____
E-Mail: _____
Date: _____
Revision Date: _____

Turnaround Time:

Please allow 2 - 3 working weeks to manufacture - after receiving sign proposal, approved drawings, deposit and sign permits.

Terms:

- ☐ Net 30 Days.
- ☐ Purchase Order Required.
- ☒ 50% Deposit and Balance Due Upon Completion.
- ☐ Due Upon Receipt.
- ☐ C.O.D.

File Name:

M: _____

Sales: Randy _____

Drawn by: Randy _____

- ☐ New-Order
- ☐ Repeat

Approval:

Signature: _____

Date: ____ - ____ - 2019

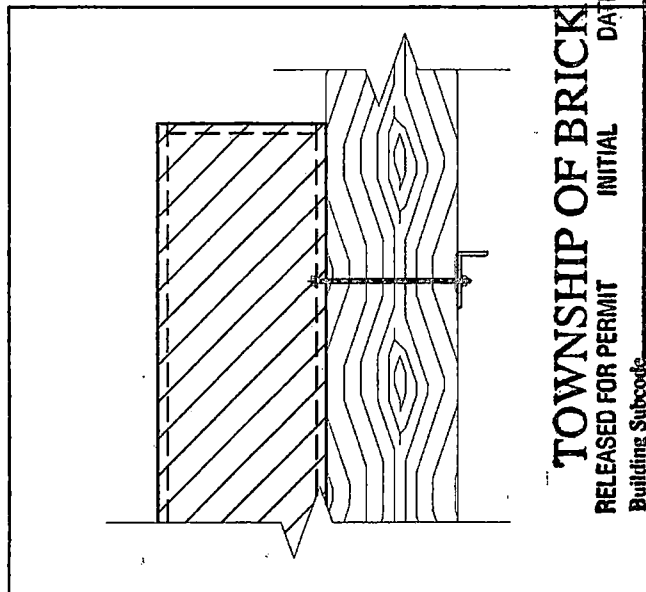
 **LOGOWEAR**
EMBROIDERY - ENGRAVING
TROPHIES - SCREEN PRINTING
FULL SERVICE
SIGN SHOP
609-597-9400
www.njlogowear.com
100 McKinley Ave
Manahawkin, NJ 08050

APPROVED FOR ZONING
12-15-20
CHRIS ROMANO, ZONING OFFICER



☐ Approved for Production, No Changes. ☐ Approved for Production with Changes, as Noted. ☐ Rejected, Correct and Resubmit for Approval.

PROPOSED 8'-Lx3'-Hx6 1/2"-W
DF ILLUMINATED SIGN CABINET:
UL LISTED (100-277V SYSTEM)



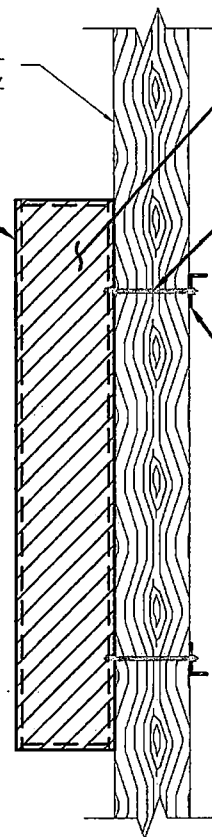
ENLARGED MOUNTING DETAL

NOTE:
N.T.S.
"ENLARGED MOUNTING DETAIL" SHOWN FOR
CLARITY, NOT TO BE USED FOR CONSTRUCTION.

TOWNSHIP OF BRICK
RELEASED FOR PERMIT INITIAL DATE

Building Subcode
Plumbing Subcode
Fire Subcode
Electrical Subcode
Plan Reviewer
Plans Released
Construction Official

EXISTING DRYVIT
FACED FRAMED WALL



2034 WIDE BODY FILLER
WITH RETAINER: 2056
ECONO MOLDING

PROPOSED
1/2"-GALVANIZED LAG BOLT, WITH
EVERBILT 1/2" GALVANIZED FLAT
WASHERS & EVERBILT 1/2" GALVANIZED
LOCK WASHERS OR APPROVED EQUAL,
(8 EQ. SPACED, TYP. 16)

PROPOSED
2"x1"x1/8" ALUMINUM ANGLE
BRACING OR APPROVED EQUAL
FOR WHEN STUD DOES NOT LINE
UP WITH MOUNTING HOLES (TYP.)

MOUNTING SECTION

SCALE: 1" = 1'-0"

NOTE:
SIGN, FASTENERS, BRACINGS, ETC. ARE
ALL MOUNTED AT A HEIGHT THAT AVOIDS
ALL PEDESTRIAN CLEARANCE HAZARD.

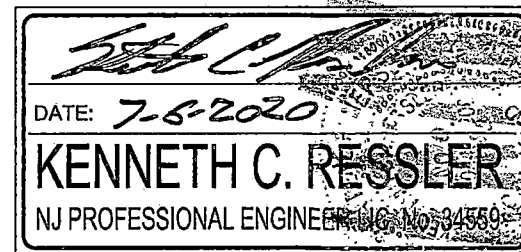
LE COPY



REMINGTON & VERNICK ENGINEERS

232 KINGS HIGHWAY EAST, HADDONFIELD, NJ 08033
(856) 795-9595, FAX (856) 795-1882, WEB SITE ADDRESS: WWW.RVE.COM
Certificate of Authorization: 24 GA 28003300

—ENGINEERING EXCELLENCE—



Job Number: 84370

Job Name: Competitive Edge

Customer:

Graphics:

- ☒ Applied Vinyl
- ☒ Paint
- ☐ Eradicated
- ☐ RF Weld
- ☐ Digital Print
- ☐ Plasti-Print
- ☐ RTA Vinyl

Colors:

- Paint:
- ☒ Cabinet painted black, matte
- ☐ Push thrus painted white, satin
- ☒ Push thrus painted PMS 877c, satin

Vinyl:

- ☒ 3630-121 silver vinyl, 1st surface
- ☐ 60% diffuser, 2nd surface

Quantity:

(1) S/F illuminated sign cabinet

Placement:

As Shown

Customer Approval

Date



100 McKinley Ave Suite 10
Manahawkin, NJ 08050

609-597-9400 njlogowear@comcast.net

FILE COPY

FILE COPY

GENERAL NOTES

DESIGN CRITERIA

1. LIVE LOAD:

- A. ROOF LIVE LOAD 30 PSF
- B. FLOOR LIVE LOAD 150 PSF
- C. PLATFORM LIVE LOAD 250 PSF

2. DEAD LOAD:

- A. STRUCTURAL AND BUILDING COMPONENTS SELF WEIGHT

3. WIND LOADING PER IBC 2018 - NEW JERSEY EDITION:

- A. BASIC WIND VELOCITY (V): 120 MPH
- B. EXPOSURE CATEGORY: C
- C. RISK CATEGORY: II

4. SEISMIC LOADING PER IBC 2018 - NEW JERSEY EDITION:

- A. RESPONSE ACCELERATOR:
 $S_s = 0.15$ $S_{DS} = 0.25$
 $S_1 = 0.05$ $S_{D1} = 0.117$
- B. SEISMIC DESIGN CATEGORY: B
- C. SEISMIC SITE CLASSIFICATION: D
- D. IMPORTANCE FACTOR I_E : 1.5

5. SNOW LOADING PER IBC 2018 - NEW JERSEY EDITION:

- A. GROUND SNOW LOAD: 20 PSF
- B. IMPORTANCE FACTOR: 1.2



REMINGTON
& VERNICK
ENGINEERS
232 KINGS HIGHWAY EAST
HADDONFIELD, NJ 08033
(856) 795-9595, FAX (856) 795-1802
WEB SITE ADDRESS: WWW.RVE.COM
Certification of Authorization: 24 GA 28001808
-ENGINEERING EXCELLENCE-

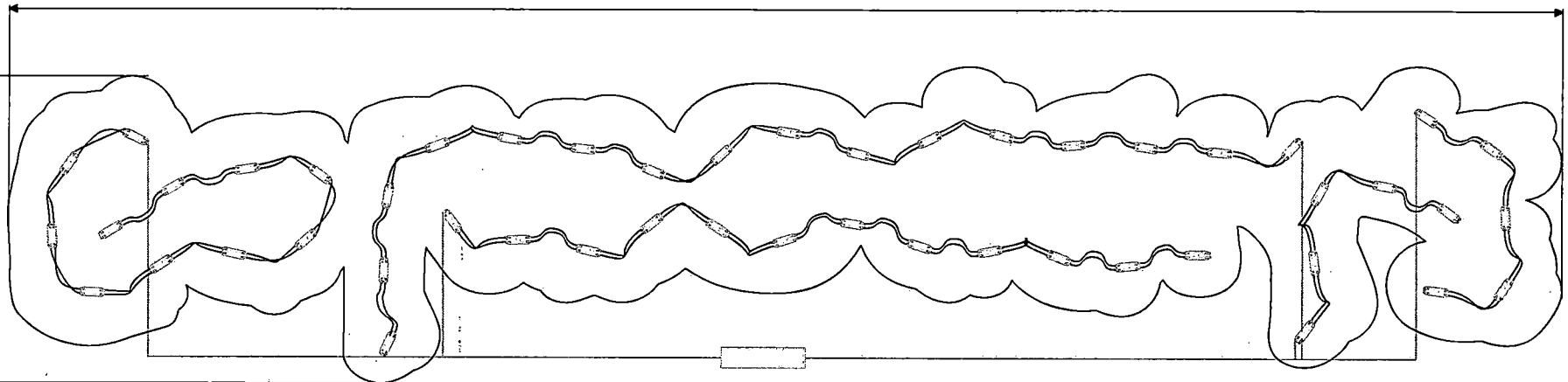
BRICK TOWNSHIP DESIGN LOADS



SK-1

2' 1 23/32"

11'



Load: 50.6
Modules: 49
Watts: 30.4 of 60.0
PS: HanleyLED 60w

49 Modules: Hanley LED - Phoenix NRG PE-2 - HLED-PE2
49 Total Modules , 30.4 Watts
1 Power Supply: Hanley LED - HanleyLED 60w
16.069 sq ft, 33.370 perimeter/feet



Grimco Knows Aluminum
Ask About 040/063/080 Painted Sheets
& Channel Letter Coil

GORDOUGHS PIZZA
49 mods
30.4 w
3.0 mod/ft²
16.069 sq ft

5" DEEP

≈ 10" MULTI STROKE
≈ 6.77" BETWEEN MODULES



Your Local Distributor: Grimco
(800) 542-9941
mkerber@grimco.com

www.hanleyledsolutions.com

HanleyLED™

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK _____

PERMIT # _____

BLOCK 1149 LOT 4 ADDRESS _____**IDENTIFICATION:**

1. WORK SITE ADDRESS 135-197 Van Zile Rd (151)
2. APPLICANT _____
3. NAME OF OWNER IN FEE Bricktown plaza associates
ADDRESS 135-197 Van Zile Rd
PHONE 513-393-8400 EMAIL _____
4. PRINCIPAL CONTRACTOR NS Logowen
ADDRESS 100 Melbury Ave Manhattan NJ 08050
PHONE 609-597-9400 EMAIL NSLogowen@comcast.net
5. ARCHITECT OR ENGINEER Remington & Vernick Engineers
ADDRESS 232 Kings Highway East Haddonfield NJ 08033
PHONE 856-795-9595 EMAIL _____
6. RESPONSIBLE PERSON FOR WORK _____
ADDRESS _____
PHONE _____ EMAIL _____

FEE SUMMARY:

APPLICATION FEE	\$ _____
REVIEW FEE	\$ _____
INSPECTION FEE	\$ _____
OTHER	\$ _____
BOND(S)	\$ _____
TOTAL	\$ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS _____

DRAINAGE EASEMENTS _____

UTILITY EASEMENTS _____

CONSERVATION EASEMENTS _____

FEMA REQUIREMENTS _____

D.E.P. PERMITS _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER _____

APPROVED DATE _____

PROJECT DESCRIPTION:

- ☐ GRADING/CLEARING ☐ ROAD OPENING ☐ SOIL REMOVAL / FILL
- ☐ RETAINING WALL ☐ POOL ☐ BULKHEAD / DOCK ☐ DWELLING
- ☐ TREE REMOVAL ☐ COMMERCIAL SITE MAINTENANCE
- ☐ DESCRIPTION new signage

ENGINEERING REVIEW:

DATE RECEIVED _____ DATE REJECTED _____ DATE APPROVED _____ INITIALS _____

Description: Custom Sign Work

Confirmation Drawing

Job: _____

Address: _____

Client: _____

Contact: _____

Phone: _____

Mobile/Cell: _____

Fax: _____

E-Mail: _____

Date: _____

Revision Date: _____

Turnaround Time:

Please allow 2 - 3 working weeks to manufacture - after receiving sign proposal, approved drawings, dep and sign permits.

Terms:

- ☐ Net 30 Days.
- ☐ Purchase Order Required.
- ☒ 50% Deposit and Balance Due Upon Completion.
- ☐ Due Upon Receipt.
- ☐ C.O.D.

File Name:

M: _____

Sales: Randy

Drawn by: Randy

- ☐ New-Order
- ☐ Repeat

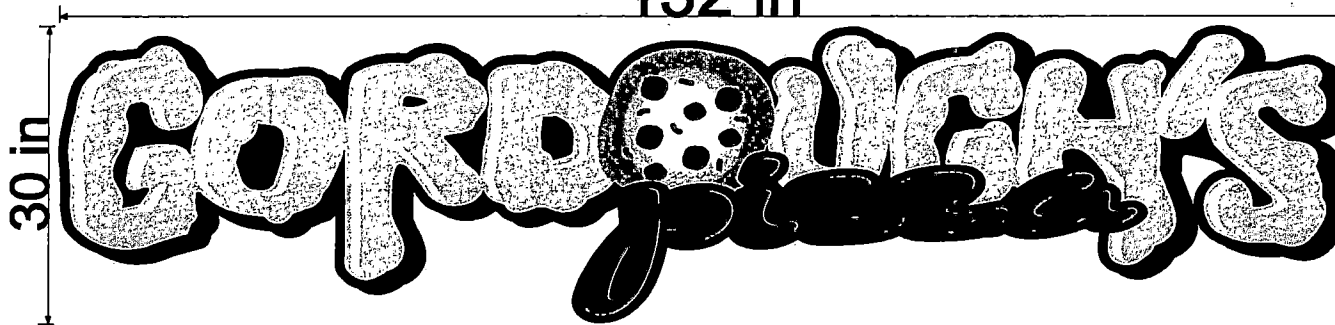
Approval:

Signature: _____

Date: ____ - ____ - 2019

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132 in



APPROVED FOR ZONING
12-15-20 Sign
CHRIS ROMANO, ZONING OFFICER



☐ Approved for Production, No Changes. ☐ Approved for Production with Changes, as Noted. ☐ Rejected, Correct and Resubmit for Approval.