



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

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- 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

BLOCK

1149

LOT

1

QUALIFICATION CODE

ADDRESS (SITE)

PERMIT NO.

13-4462



CONSTRUCTION PERMIT APPLICATION

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

C-13-005974

I. IDENTIFICATION

1. Proposed Work Site at: Pure Focus Sports Club2. Name of Owner in Fee: Kent BierlyTel. (732) 840-5393 e-mail krb46@comcast.netAddress 163 Van Zile Rd Brick NJ 087243. Ownership in Fee: Public self Private self4. Principal Contractor: self Tel. ()

Address e-mail

License No. OR, if new home, Builder Reg. No. Exp. Date

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

Federal Emp. ID No. FAX: ()

5. Architect or Engineer Contact

Address e-mail

Tel. () FAX: ()

6. Responsible Person in Charge once Work has Begun

Tel. () FAX: ()

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>75</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee			
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>75</u>		

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

IIb. SUBCODES

(Check all that apply)

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

TOTAL COST

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer

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: Total Units Income-restricted
 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

III. PLAN REVIEW (optional)

DO YOU WANT:

1. ☐ Partial Releases
 2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks
 2. ☐ High Pressure Boilers
 3. ☐ Pressure Vessels
 4. ☐ Refrigeration Systems
 5. ☐ Cross-Connections/Backflow Preventers
 6. ☐ Hazardous Uses/Places of Assembly
 7. ☐ Sprinklers/Standpipes
 8. ☐ Smoke Control Systems in Open Wells
 9. ☐ Underground Storage Tanks
 10. ☐ Swimming Pools, Spas and Hot Tubs
 11. ☐ LPGas Tanks
 12. ☐ Fire Alarm

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:
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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:

Daniel Newman Jr.

Construction Official

Date Printed: 03/26/2021

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

Fee: \$0.00

Check Number: _____

Collected By: _____



BUILDING SUBCODE TECHNICAL SECTION



Date Received
Control #
Date Issued
Permit #

13-4462
10-25-13

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 171 Van Zile Rd Brick NJ

Owner in Fee: Kent Bierly

Tel. (732) 840-5393 e-mail krb46@comcast.net

Address 163 - 171 Van Zile Rd Brick NJ 08724

Contractor: self Tel. (_____)

Address _____ e-mail _____

Contractor License No. or Builder Registration No. _____ Exp. Date _____

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

Federal Emp. ID No. _____ FAX: (_____)

JOB SUMMARY (Office Use Only)							
PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
				Type:	Failure	Approval	Initial
☐	No Plans Required			Footings/Foundations			
☐	All			Foundation			
☐	Footings/Foundations			Slab			
☐	Structural/Framework			Frame			
☐	Exterior			Truss Sys./Bracing			
☐	Interior			Barrier-Free			
Joint Plan Review Required:				Insulation			
☐	Elec.	☐	Plumb.	Finishes -Base Layer			
☐	Fire	☐	Elevator	Finishes -Final			
SUBCODE APPROVAL for PERMIT				Energy			
Date: _____				Mechanical			
Approved by: _____				TCO			
SUBCODE APPROVAL for CERTIFICATE				Other			
☐	CO	☐	CCO	Final			
☒	CA			Barrier-Free			
Date: <u>03/09/21</u>							
Approved by: <u>NRK</u>							

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ Constr. Class Present _____ Proposed _____

No. of Stories _____ If Industrialized Building: _____

Height of Structure _____ ft. State Approved _____ HUD _____

Area — Largest Floor _____ sq. ft. Est. Cost of Bldg. Work:

New Bldg. Area/All Floors _____ sq. ft. 1. New Bldg. \$ 1000

Volume of New Structure _____ cu. ft. 2. Rehabilitation \$ 0

Max. Live Load _____ 3. Total (1+2) \$ 1000

Max. Occupancy Load _____

U.C.C. F110
(rev. 11/09)

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.

Sign here: Kent R Bierly

Print name here: Kent R Bierly

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Interior clean-out

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence _____ Height (exceeds 6')
- ☐ Sign _____ Sq. Ft.
- ☐ Pool
- ☐ Retaining Wall _____ Sq. Ft.
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☐ Other _____
- ☐ Demolition

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

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

TOWNSHIP OF BRICK

Debris Form

Work Site Address: 171 Van Zile Rd Brick NJ

Block: _____ Lot: _____

Contractor: self

Contractor's Address: _____

Type of Construction (minor, new home): clean out

Type of Debris (shingles, siding, wood, etc): metal studs, sheet rock, wires

Party responsible for removal: scrap metal disposal

Dumpster Size: _____

Destination of Debris: Pureform dumpster

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclables.

Generator's Certification: "Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."

Kent R. Bierly

Signature

10 / 25 / 13

Date

Kent R. Bierly

Print Name



CONSTRUCTION PERMIT

Date Issued 10/25/2013
Control # C-13-005974
Permit # 13-4462

IDENTIFICATION Block: 1149 Lot: 1 Qualifier _____
Work Site Location: 135-197 VAN ZILE RD. 171 Van Zile (Solar Lounge) Contractor BRICKTOWN PLAZA ASSOCIATES
Now Pure Focus Brick Township, NJ Address 600 OLD COUNTRY RD #425 GARDEN CITY NJ 11530
Owner in Fee BRICKTOWN PLAZA ASSOCIATES
600 OLD COUNTRY RD #425 GARDEN CITY NJ Telephone: (732) 840-5393
11530 Lic. No. or Bldrs. Reg. No. _____
Telephone: (732) 840-5393 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:

INTERIOR DEMOLITION

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 \$1,000

Construction Official

Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$75
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$75
Check No.	
Cash	\$75
Credit	\$0
Collected By	<u>Christopher Romano</u>

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.