BLOCK 670 LOT 4 QUALIFICATION CODE C31-601 ADDRESS (SITE) 2770 Hooper PERMIT NO. 04 4645

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: Kennedy Mall 2770 Hooper Ave
2. Name of Owner in Fee: Kennedy Mall Ass. Tel. (973) 966-2500
   Address 641 Shunpike Rd Chatham N.J.
   street municipality zip code
3. Ownership in fee: Public ____ Private X
4. Principal Contractor: Fidelity Mall Tel. (973) 966-2500
   Address 641 Shunpike Rd Chatham N.J.
   License No. OR, if new home, Builder Reg. No. 22-3053500 Exp. Date ____
   Federal Employee No. 22-3053500 FAX: (973) 966-6161
5. Architect or Engineer Ed Maeiko Tel. (973) 966-2500
   Address 641 Shunpike Rd Chatham Contact Joe Serino
6. Responsible Person in Charge once Work has Begun Joe Serino
   Tel. (973) 966-2500 FAX: (973) 966-6161

Tenant fit up

call 973-296-6193

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 2620	40	160
2.	Electrical	50		
3.	Plumbing	100		410
4.	Fire Protection	200		
5.	Elevator Devices		500	
6.	Subtotal	$		47
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	State Permit Fee Surcharge			
10.	Subtotal	$ 282		
11.	Cert. of Occupancy			
12.	Other	50	55	1031
13.	TOTAL	$ 3231		

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 by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work									
2.	☐ New Building									
3.	☐ Addition									
4.	☐ a. Repair									
	☐ b. Alteration									
	☐ c. Renovation									
	☐ d. Reconstruction									
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☒ Electrical					10-28-04				
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition		Ew	9/12/01		9/13/01				
	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:

IMPROVEMENT

LDS BR 10426069

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

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. (X) 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. (X) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. (X) Fire Protection

I further certify that I will perform the following work:
C.3. (X) Electrical C.4. (X) 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 Robert A Prodelli Date 8/30/04

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 Robert A Prodelli

Address _____

_____

Telephone (973) 332-8585

Signature Robert A Prodelli

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: _____ Date: _____

□ Zoning Application approved Initialed: _____ Date: _____

□ Zoning permit updates:

_____

_____

_____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/29/2005
Tracking Number
Permit Number 04-4645
Permit Issue Date 10/29/2004

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 -
Telephone: 978/966-2800
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: N/A
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: (Tool Warehouse)

☑ **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:

acc

Construction Official

Fee: $35.00

Date Printed: 04/29/2005

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/15/2005
Tracking Number
Permit Number 04-4645
Permit Issue Date 10/29/2004

Certificate

Construction Code Division

(Temporary 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 -

Telephone: 978/966-2800

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: N/A

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:

☐ **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: 05/15/2005
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: 05/15/2005
Conditions to be met:

PENDING FINAL BUILDING, ~~FIRE~~ AND ~~ELECTRICAL~~
INSPECTIONS 4/26 4/28 4/28

Construction Official

Fee: $0.00

Date Printed: 04/15/2005

APPLICATION FOR CERTIFICATE

Date Received
Date Permit Issued
Control #
Permit # 04-4645-A
Date Issued

IDENTIFICATION

Block 4710 Lot 4
Work Site Location Kennedy Mall
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 07928
Tel. (973) 966 2800
License No.
Federal Employee No.

ACTION

- ☐ CERTIFICATE OF OCCUPANCY
- ☐ CERTIFICATE OF CONTINUED OCCUPANCY
- ☐ LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
- ☒ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP Merch. Previous Current

FINAL COST OF CONSTRUCTION: $ 87,000
(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

No deviations

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

For Merchandising

DESCRIPTION OF WORK/USE:

Racking + merchandising

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit, and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate

SIGNED: David Voight
OWNER/AGENT

- ☐ OWNER
- ☒ AGENT

U.C.C. F270
(rev 3/96)

PERMIT UPDATE

Date Update Issued 02/03/2005
Control # C-05-132556
Permit # 04-4645+B

IDENTIFICATION Block: 670 Lot: 4 Qualifier

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

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

Telephone: 978/966-2800

Contractor
Address
Telephone:
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, PLUMBING ALTERATIONS

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 $35,000

Construction Official

02/03/2005
Date

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

INSPECTOR COPY

PAYMENTS (Office Use Only)

Building	$0
Electrical	$180
Plumbing	$410
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$47
CO Fee	
Other	$0
Total	$637
Check No.	999
Cash	$0
Credit	$0
Collected By	Mary Jane Rinaldi

PERMIT UPDATE

Date Update Issued 03/01/2005
Control # C-05-132809
Permit # 04-4645+D

IDENTIFICATION Block: 670 Lot: 4 Qualifier

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

Owner in Fee: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ -
Telephone: 978/966-2800

Contractor: KENNEDY MALL ASSOC
Address: 641 SHUNPIKE RD CHATHAM NJ -
Telephone: 978/966-2800
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:

ALARM SYSTEM (BURGLAR OR FIRE)

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 $7,625

Construction Official

03/01/2005
Date

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

INSPECTOR COPY

PAYMENTS (Office Use Only)

Building	$0
Electrical	$40
Plumbing	$0
Fire Protection	$45
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$10
CO Fee	
Other	$0
Total	$95
Check No.	3881
Cash	$0
Credit	$0
Collected By	Ann Marie Hanlon

C5L

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 10/29/2004
Control #
Permit # 04-4645

UCC NEW JERSEY

CONSTRUCTION PERMITE

IDENTIFICATION Block 670 Lot 4 Qual

Work Site Location 2770 HOOPER AVE
TENANT FIT UP
Owner in Fee KENNEDY MALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ -
Telephone (973)966-2600

Contractor FIDELITY MAINTENANCE
Address 641 SHUNPIKE RD
CHATHAM, NJ 07928-
Telephone (973)966-2500
Lic. No. or Bldrs. Reg. No.
Federal Esp. No. 22-3052500

Is hereby granted permission to perform the following work:

[ ] BUILDING [X] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [X] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 6 only)

DESCRIPTION OF WORK:
TENANT FIT UP - TOOL WAREHOUSE

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 $ 149,500

Construction Official 10/29/2004 Date

U.C.C. F170 (rev. 3/96) NJ UCCARS 5.24E

PAYMENTS (Office Use Only)

Building	2,620
Electrical	50
Plumbing	100
Fire Protection	229
Elevator Devices	0
Other	
DCA State Permit Fee	202
Cert. of Occupancy	0
Other	30
Total	3,231
Check No.	3707
Cash	
Collected By	ERF

10/29/04 9:04AM 001558#3838
XX07 SERV.007

#044645	
BUILDING	$2620.00
ELECTRIC	$50.00
PLUMBING	$100.00
FIRE	$229.00
DCA	$202.00
ZPA	$15.00
EPA	$15.00
CHECK	$3231.00

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

04-7695 TE
3/1/05
(05-13281)

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

Block 6070 Lot 4
Work Site Location Kennedy Mall
2770 Old Hooper Ave.
Owner in Fee Kennedy Mall Assoc.
Address 641 Shrewsbury Rd
Chatham NJ
Tele. (973 966 2800
Contractor Fidelity Maint.
Address 641 Shrewsbury Rd.
Chatham NJ 07928
Tele. (____)
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

RECEIVED
FEB 28 2005
CODE COMPLIANCE

Note: Rack manufacturers info must be on site for inspection

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

95 81 & 176 called 2/24/05 L.M.

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Interior Racking
Harbor Freight Tool Warehouse
(Sizemic Bracing)

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (6' or over)
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement
[ ] Other _____
[ ] Other _____
[ ] Demolition

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Req.	2/24/05	LM
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS	Dates (Month/Day)			
Type:	Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final			04/26/05	Mell

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 $ ____
3. Total (1+2) $ 3800 —

(Office Use Only)
FEE

Administrative Surcharge	$ 11
Minimum Fee	$ 4
DCA TRAINING FEE	$
TOTAL FEE	$ 81

Paid [ ] Check # ____
Collected by: ____

U.C.C. Form F-110B

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

N.J. UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/30/2004
Date Issued 10/29/04
Control # C31-61
Permit # 04-4645

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

ORIGINAL

Block 670 Lot 4 Qual
Work Site Location 2770 HOOPER AVE
TENANT FIT UP
Owner in Fee KENNEDY MALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ -
Tele.(978)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 - TOOL WAREHOUSE

Floor Plan Showing Isle width's and Related Displays must be Submitted Before Inspection

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	10/29/04	PM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab			12/2/04	PM
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			04/26/05	KEH
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present 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 $ 87,000
3. Total (1+2) $ 87,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration O.L. 80 Stated	2,620
[ ] 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	$ 2,620
DCA State Permit Fee	$ 117

Paid [ ] Check #
Collected by:

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 9-3-05
Date Issued
Control #
Permit # 04_4645 TA

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 Old Hooper Ave.
Owner in Fee ~~Fidelity~~ Kennedy Mall Assoc.
Address 641 Shrewsbury Rd.
Chatham, NJ 07928
Tele. (973) 966 2800
Contractor Fidelity Maintenance DAVE / JOHN
Address 641 Shrewsbury Rd. (c) 908-419-6830
Chatham NJ 07928
Tele. (973) 966 2800
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security 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

- DEMISING WALL to be straight - No jog.
- slope to loading dock. w/dry well,

All New Work Must Be Code.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	2-2-05	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 30 Day temp 4-1-05
Approved By: 4-1-05 (AM)

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame			03/08/05	Kell
Insulation			03/10/05	Kell
Finishes:				
Energy				
Mechanical				
CCO				
Other				
Final			04/26/05	Kell

TYPE OF WORK: COMMERCIAL

(SEE NOTE OVER)

- [ ] 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. $ ~~0~~
2. Alteration $ 0
3. Total (1+2) $

Administrative Surcharge $
Paid [ ] Check # _____ Minimum Fee $ 40
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

JJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 08/30/2004
Date Issued 10/29/04
Control # ~~E31-61~~
Permit # 04-4645

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 FIT UP
Owner in Fee KENNEDY MALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ -
Tele.(978)966-2800
Contractor S S ELECTRIC
Address 63 LOGANBERRY LANE
TOMS RIVER, NJ 08753-
Tele.(732)255-7133
Lic. No. or Bldrs. Reg. No. 11413
Federal Emp. No. 14-6725038

CONTRACTOR COPY

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed B
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 12,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 9 2 04
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

NOT THIS CONTRACTOR

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)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	0
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
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
1	19	KW Central A/C Unit	50
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
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 50
	DCA State Permit Fee	$ 17

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

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 5/10/05
Date Issued
Control # (05-132809
Permit # update 04-4645+D

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

Block 6070 Lot 4 Qualification Code

Work Site Location KENNEDY Mall
BRICKTOWN, N.J.
HARBOR ESTATES

Owner in Fee Fidelity Management

Address 411 ~~East~~ Shunpike Rd
Chatham, N.J. 07928

Tel (973) 966-2300

Contractor B & H SECURITIES, INC.

Address P. O. BOX 1507
SUMMIT, NEW JERSEY 07902

Tel (908) 277-0070 FAX (908) 686-9513

Contractor License No. 13PO0841

Federal Emp. No. 222-263-454/000

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 125

CONTRACTOR COPY

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 [X] ~~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	
44/1		Alarm Devices/F.A.C. Panel	
45		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	

Administrative Surcharge $ 40
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: 2 23 05
Approved by: WM

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA

Date: 4 28 05
Approved by: WM

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type: Ceiling				
Rough			3-24-05	JD
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			5/26/05	OVER
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

1. White-Inspector copy 2. Canary- Applicant copy

3. Pink- Office Copy 4. White Tag- Office copy

UCC/F-120 (REV. 7/03)
Professional Printing
(856) 468-7933

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

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

150 Retail
14 stock
164

Date Received 08/30/2004
Date Issued 10/29/04
Control # ~~C31-61~~
Permit # 04-4645

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 — Harbor Freight Tools
TENANT FIT UP
Owner in Fee KENNEDY MALL ASSOC
Address 641 SHUNPIKE RD
CHATHAM, NJ -
Tele.(978)966-2800 — mgr Tony Marino
Contractor MONMOUTH CONTROLS
Address 17 ANEGADA AVE — Leonard Wood
TOMS RIVER, NJ 08753-
Tele.(732)929-8174 — Brian Alsop
Lic. No. or Bldrs. Reg. No. — Rob Silsby
Federal Emp. No. 22-2543749

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present ____ Proposed B
Constr Class Present ____ Proposed ____
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 40,000

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 10-15-04
Approved By: KLB
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 5-25-05
Approved By: JG

INSPECTIONS Type	Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO			3-11-05	JG
Final			4-27-05	
Other	3-4-05	3-23-05	4-27-05	JG

5/25/05 ok

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: Need fire alarm update
Water Supply Source ✓
Method of Alarm/Suppr Sys Superv

M-13000
ord haz gr. 2

Storage Tanks
Type: [ ] Flammable Liquid [ ] Combust Liquid
[ ] LPG [ ] LNG Capacity ____ 0 Fuel ____
Alarm Systems [ ] 110v Interconnected
[ ] System

CO ✓ HVAC SD existing? Called BobC

	NUMBER	FEE (Office Use Only)
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump ____ 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	160	229
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other		0
Other		0

Administrative Surcharge $ 0
Paid [ ] Check # ________ Minimum Fee $ 0
Collected by: ________ TOTAL FEE $ 229
DCA State Permit Fee $ 54

U.C.C. F140 (rev. 3/96)

FIRE SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued 3/1/08
Control # 0605-132503
Permit # 04-4645 + D update

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

Block 1110 Lot 4
Work Site Location KENNEDY MALL
BRICKTOWN, N.J.
Owner in Fee FIDELITY MANAGEMENT
Address 641 ~~Old~~ Shumpike Rd.
CHATHAM, N.J. 07928
Tele. (973) 966-2800
Contractor B & H SECURITIES, INC.
Address P. O. BOX 1507
SUMMIT, NEW JERSEY 07902
Tele. (908) 277-0070 Fax (908) 686-2513
Lic. No. P008941
Federal Emp. No. 222-263-454/000

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other _____
Location: _____
Total Cost of Fire Protection Work $ 7500

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[✓] Fire Plans Approved
Date: 2-18-08
Approved by: [signature]

SUBCODE APPROVAL
[ ] CO [ ] TCO [✓] CA
Date: 4-25-07
Approved by: [signature]

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Final			4-27-05	MG
Other				

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 [signature]

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

UCC/PRO F-140 (REV3/96)
Professional Printing
(856) 468-7933

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Installation of Fire Alarm System To monitor HVAC and
Water Supply Source _____
Method of Alarm/Suppression System Supervision _____

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combustible Liquid [ ] LPG [ ] LNG Capacity ____ Fuel ____		
Alarm Systems [ ] 110v Interconnected [✓] System		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	25	
Supervisory Devices (i.e., tampers, low/high air)	2	
Signaling Devices (i.e., horn/strobes, bells)	17	
Other Devices Control	1	
TOTAL	45	
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		
Halon Suppression		
Other		
Kitchen Hood Exhaust System		
Smoke Control System		
Gas [ ] or Oil [ ] Fired Appliances		
Other		

Administrative Surcharge	$	15
Minimum Fee	$	
DCA Training Fee	$	
TOTAL FEE	$	

PLUMBING SUBCODE
TECHNICAL SECTION

Copy

Date Received 02/01/2005
Control # C-05-132556
Date Issued 02/03/2005
Permit # 04-4645+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 AVE

PASSED 3-4-05
FINAL

Owner in Fee: KENNEDY MALL ASSOC

Address 641 SHUNPIKE RD CHATHAM NJ

Tel. 978/966-2800

Contractor:

Address

Tel. Fax.

Contractor License No.

Federal Employee No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed B

Building Sewer Size 0 ☐ Public Sewer ☐ Private Septic

Water Service Size 0 ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work $1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plan Required

Joint Plan Review Required

☐ Building ☐ Electrical

☐ Fire ☐ Elevator

☐ Plumbing Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Date:

Approved by:

INSPECTIONS

Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of the 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 Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	$0
0	Urinal/Bidet	$0
0	Bath Tub	$0
0	Lavatory	$0
0	Shower	$0
0	Floor Drain	$0
0	Sink	$0
0	Dishwasher	$0
1	Drinking Fountain	$10
0	Washing Machine	$0
0	Hose Bibb	$0
0	Water Heater	$0
0	Fuel Oil Piping	$0
0	Gas Piping	$0
0	LP Gas Tank	$0
0	Steam Boiler	$0
0	Hot Water Boiler	$0
0	Sewer Pump	$0
0	Interceptor/Separator	$0
0	Backflow Preventor	$0
0	Greasetrap	$0
0	Sewer Connector	$0
0	Water Service Connection	$0
0	Stacks	$0
10	Other CONDENSATE DRAINS	$400
0	Other	$0

Administrative Surcharge	$0
Minimum Fee	$0
State Permit Surcharge Fee	$1
TOTAL FEE	$411

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

PLUMBING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

04-4645C
02/17/05

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

Block 670 Lot
Work Site Location 2470 Hooper Ave
Owner in Fee Fidelity Maintenance
Address 671 Shunpike Rd. Chatham, NJ
Tele. (973) 966-6161
Contractor Nielsen Plumbing
Address 241 Cherry Quay Rd. Brick NJ 08723
Tele. (732) 920 1695 Fax (732) 920 1695
Lic. No. 8568
Federal Emp. No. 158 54 4466

called 2/15/05 CMW L.M.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work $ 4,000

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
2	Gas Piping – 200' cfh @ .7 1½ - 300,000	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump 2-outlets	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	
	Other	
	Administrative Surcharge	$
	Minimum Fee	$
	DCA Training Fee	$
	TOTAL FEE	$

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 2/15/05
Approved by: MW

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 4-28-05
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment			4/28/05	MK
Gas Piping				
Solar				
TCO				

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.

Signature — Contractor's Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

cond. trap - on furnaces. Harbor Freight..

David. white truck

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

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

NJ UCCARS 5.24E

by Costumers mall

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 08/30/2004
Date Issued 10/29/04
Control # ~~C31-61~~
Permit # 04-4645

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 FIT UP

Owner in Fee KENNEDY MALL ASSOC

Address 641 SHUNPIKE RD
CHATHAM, NJ -

Tele.(978)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

OWNER COPY

added Theatre

B. PLUMBING CHARACTERISTICS

Use Group. Present Proposed B

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 10,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 10-28-04
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date: 2-4-05

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab			11/23/04	
Rough	1-5-05	2-4-05	2-10-05	
Water			2-17-05	
Sewer				
Fixtures			2-4-05	
Gas Equip.				
Gas Piping			2-2-05	
Solar				
TCO		2-21-05	2-2-05	

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
2	Water Closet	20
0	Urinal / Bidet	0
0 1	Bath Tub	0 ~~20~~
2 0	Lavatory	0
0	Shower	0
0	Floor Drain	0
2 0	Sink	20
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

charged in complete 11/28/04

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ ~~80~~ 100
DCA State Permit Fee $ 14

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

occ stated at 80 3/4" w
X. 60 = 48 min

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

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received upciale 04-4645 7# 6
Date Issued 2-3-05
Control #
Permit #

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 2770 Hooper Ave.

Owner in Fee Kennedy Mall Associates
Address 641 Shunpike Rd.
Chatham, NJ 07928

Tele. ( )
Contractor Nielsen Plumbing
Address 241 Cherry Quay
Brick NJ. 08723
Tele. (732) 920 1695 Fax ( ) Same
Lic. No. 8568
Federal Emp. No. 158-54-4466

B. PLUMBING CHARACTERISTICS

Use Group Present ______ Proposed ______
Building Sewer Size ______ Public Sewer ______ Private Septic ______
Water Service Size ______ Public Water ______ Private Well ______
Est. Cost of Plumbing Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[✓] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 2/2/05
Approved by: [signature]

SUBCODE APPROVAL
[✓] CO [ ] CCO [ ] CA
Date: 2-x-05
Approved by: [signature]

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				

Dates (Month/Day)

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.

[signature]
Signature - Contractor's Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

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

Administrative Surcharge $ 400
Minimum Fee $
DCA Training Fee $ 11
TOTAL FEE $ 411

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

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

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

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

CERTIFICATE OF COMPLIANCE

Date 4/27/05

NAME Kennedy Mall Associates

ADDRESS 642 Shunpike Rd. Chatham NJ 07928-153(

PROPERTY LOCATION 2770 Hooper Ave Unit 1 kennedy HARDWARE STORE mall

Account No J946402 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 Gundel

04-4645

Tool Warehouse

CERTIFICATE OF APPROVAL FOR TENNANT FIT UP AND COMMERCIAL

Location 2770 Hooper Ave Block 670 Lot 4

Final Inspections needed if applicable as follows:

Dave
908 419-6830

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

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	TCO 30 days		
PLUMBING	APPROVED	3/4/05		
FIRE ✓	APPROVED	TCO		
ELECTRIC ✓	APPROVED	TCO		
ENGINEERING ✓	APPROVED			
O.C.SOIL ✓	APPROVED			
COMMERCIAL OCCUPANCY CARD				
C.C. FROM B.T.M.U.A.	OK @ per Carol 4/12/05 ✓			
AFFORDABLE HOUSING	4/15/05 ✓			

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

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.

INSPECTOR: R Coleman

DATE: 4/28/05

JOB: SECTION:

TYPE OF WORK: Fence

WEATHER: Clear

LOCATION: 2770 Hooper Ave

TEMPERATURE: 55'

BLOCK: 70 LOT: 4

ENGINEERING RECOMMENDATIONS FOR CERTIFICATE OF OCCUPANCY INSPECTION CHECK LIST

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

COMMENTS REFERENCING ITEM NUMBER:

HARBOR FREIGHT HAS DONE LINE STRIPPING & 4 HANDY CAP SPOTS
2 VAN
2 REGULAR SCHNEKMAN BEAUTY SHOPPE NOT COMPLETE
WEIGHT &

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.

Lake Wareham

RECEIPT

DATE 4/15/05 No. 327510

FROM Fidelity Land Dev. $747.50

64 Stumpke Rd
Chatham, NJ 07928 CF DOLLARS

○ FOR RENT
○ FOR 2770 Harper Ave

ACCT.		○ CASH	FROM B 670 TO B 4
PAID	+39.65	⊘ CHECK	
DUE		○ MONEY ORDER	BY J. Tavalarro

1152

327510

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

JPMORGAN CHASE BANK
2 WAVERLY PLACE
MADISON, NJ 07940

003965

55-233
212

Date
4/14/2005

Check Amount
$747.50

Seven Hundred Forty Seven AND 50/100 Dollars

Pay to the order of:

TOWNSHIP OF BRICK

401 CHAMBERS BRIDGE ROAD
BRICKTOWN, NJ 08723

⑈003965⑈ ⑆021202337⑆ 2810 516572⑈

Business/Development: Ford Warehouse

Owner/Applicant: Kennedy Mall Assoc.

Property Address: 1770 Hooper Ave.

Block: 670 Lot: 4

DEPOSIT RECEIVED
Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

DATE: 4/15/05

Check Number 003965

Preliminary Fee Paid

Final Fee Paid *747.50

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:

Signature

4-15-05
Date

OFFICE OF AFFORDABLE HOUSING

AHBT FINAL APPROVAL

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 670 LOT 4 SITE ADDRESS 2770 Hyper Ave.
TYPE OF SITE Residential / (Commercial) NAME OF BUSINESS Self Warehouse
APPLICANT Fidelity Bond Developers PHONE NUMBER 973-332-8585
APPLICANT ADDRESS 641 Shurpiere Rd. CITY & STATE Chatham, NJ 07928

Jul 973-296-6193
Dawd 908-419-6830

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

$ 149,500

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 9/23/04 Date

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

$ 145,500

Frederick R. Millman

Frederick R. Millman, CTA, Tax Assessor — 4/13/05 Date

Preliminary Fee * 747.50 — Date 9/24/04
Check # 003675 — Receipt # 327445

Final Fee * 747.50 — Date 4/15/05
Check# 003965 — Reciept # 327510

Total Fee Due/Paid * 1495.00
Balance Due -0-

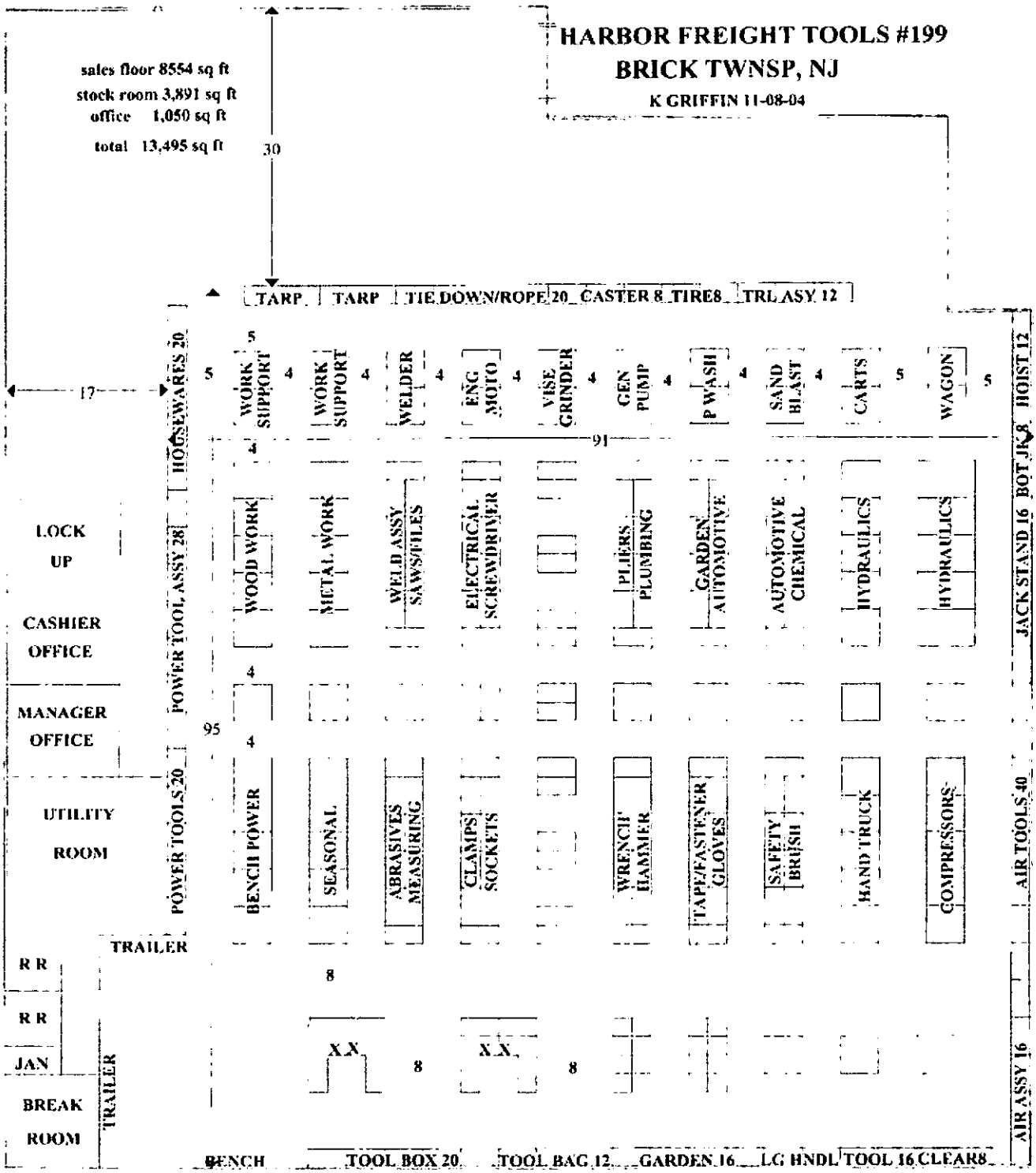
Fees Imposed To Date _____
Fees Reached $15,000 _____ Date

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.

Susan Lauriano
Office of Affordable Housing

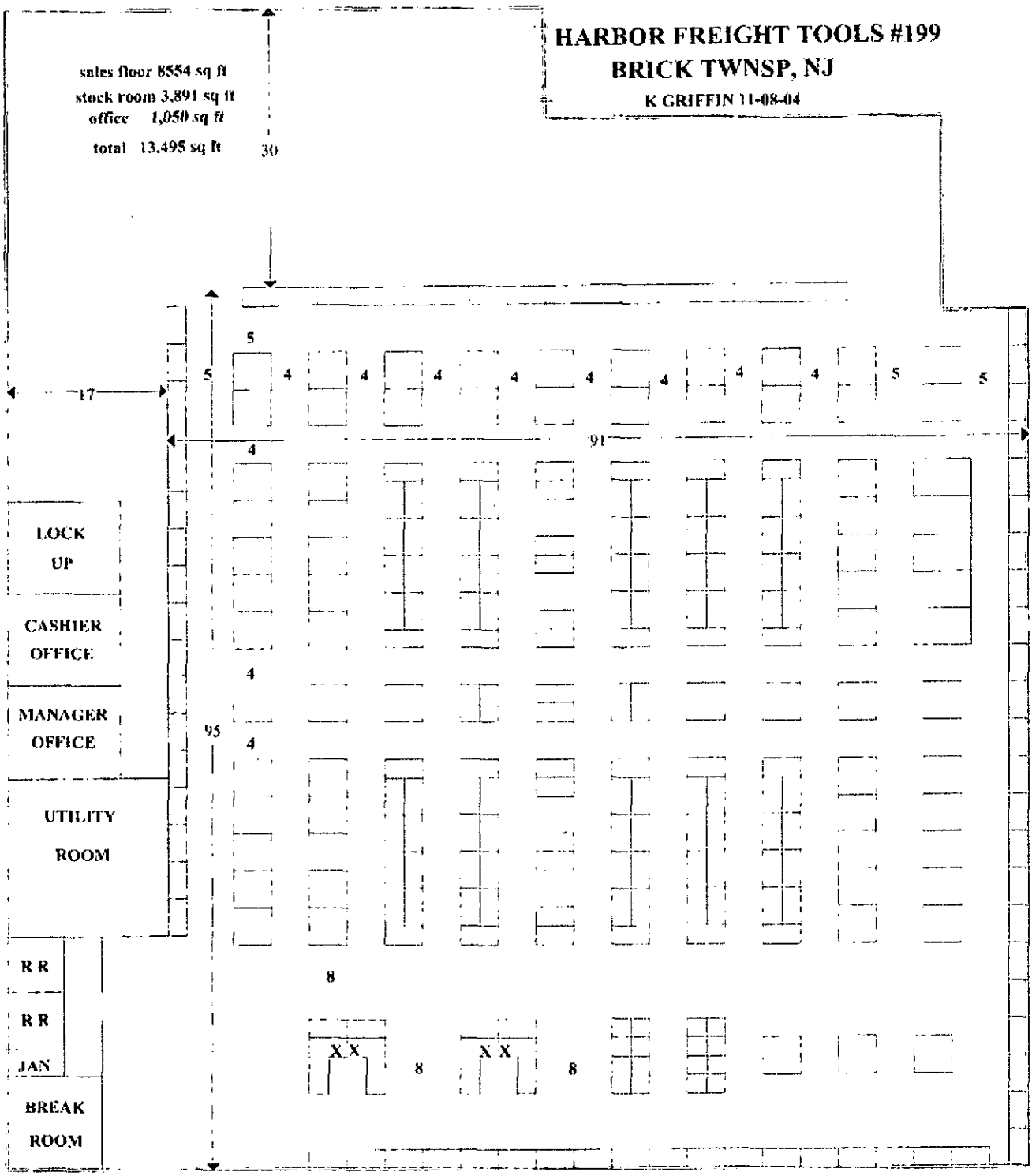
9/14/04 - Tapelleen.
9/23/04 - Mailed letter & called
4/8/05 - Tapleen
4/14/05 - Called - Dawd

FIRST FINAL APPROVAL


HARBOR FREIGHT TOOLS #199
BRICK TWNSP, NJ
K GRIFFIN 11-08-04
sales floor 8554 sq ft
stock room 3,891 sq ft
office 1,050 sq ft
total 13,495 sq ft
30
TARP
TARP
TIE DOWN/ROPE 20
CASTER 8
TIRE8
TRL ASY 12
HOUSEWARES 20
POWER TOOL ASSY 28
POWER TOOLS 20
TRAILER
TRAILER
17
LOCK UP
CASHIER OFFICE
MANAGER OFFICE
UTILITY ROOM
R R
R R
JAN
BREAK ROOM
WORK SUPPORT
WORK SUPPORT
WELDER
ENG MOTO
VISE GRINDER
GEN PUMP
P WASH
SAND BLAST
CARTS
WAGON
91
WOOD WORK
METAL WORK
WELD ASSY SAWS/FILES
ELECTRICAL SCREWDRIVER
PLIERS PLUMBING
GARDEN AUTOMOTIVE
AUTOMOTIVE CHEMICAL
HYDRAULICS
HYDRAULICS
95
BENCH POWER
SEASONAL
ABRASIVES MEASURING
CLAMPS SOCKETS
WRENCH HAMMER
TAPE/FASTENER GLOVES
SAFETY BRUSH
HAND TRUCK
COMPRESSORS
JACK STAND 16
BOT JK 8
HOIST 12
AIR TOOLS 40
AIR ASSY 16
BENCH
TOOL BOX 20
TOOL BAG 12
GARDEN 16
LG HNDL TOOL 16
CLEAR8

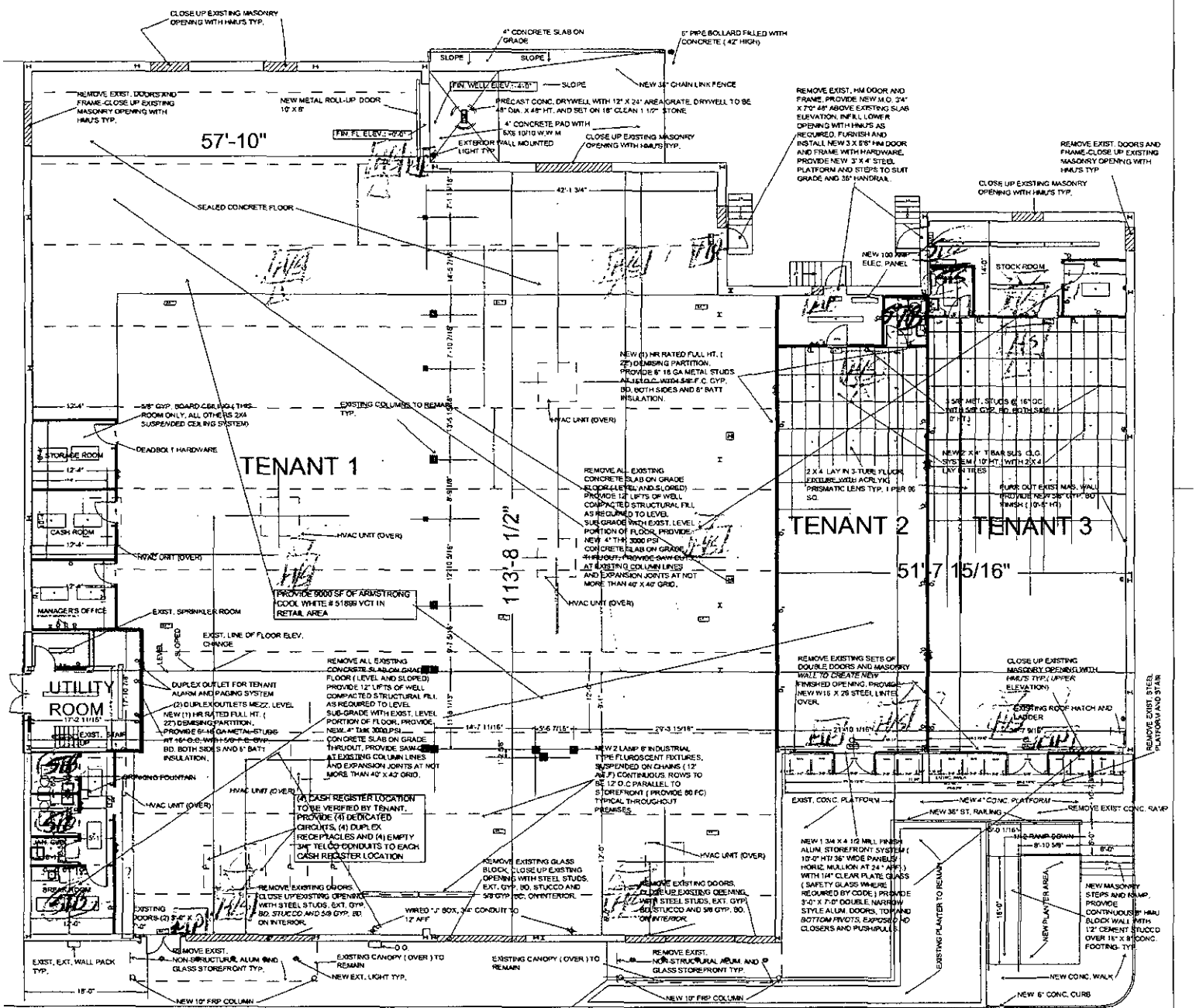
Brick Township

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building			
Fire			
Electrical			


HARBOR FREIGHT TOOLS #199
BRICK TWNSP, NJ
K GRIFFIN 11-08-04
sales floor 8554 sq ft
stock room 3,891 sq ft
office 1,050 sq ft
total 13,495 sq ft
30
17
91
95
LOCK UP
CASHIER OFFICE
MANAGER OFFICE
UTILITY ROOM
R R
R R
JAN
BREAK ROOM
5
4
8
X X

Brick Township

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building			
Fire			
Electrical			



GROUND FLOOR PLAN (SHOWING NEW FLOOR SLAB/ MASONRY)

1/8"=1'-0"

B & H Security
10 Progress Street
Union, NJ 07083
(908) 277-0070

12 H/S Hom Strobe

6 MP Manual pull

5 STB Strobe

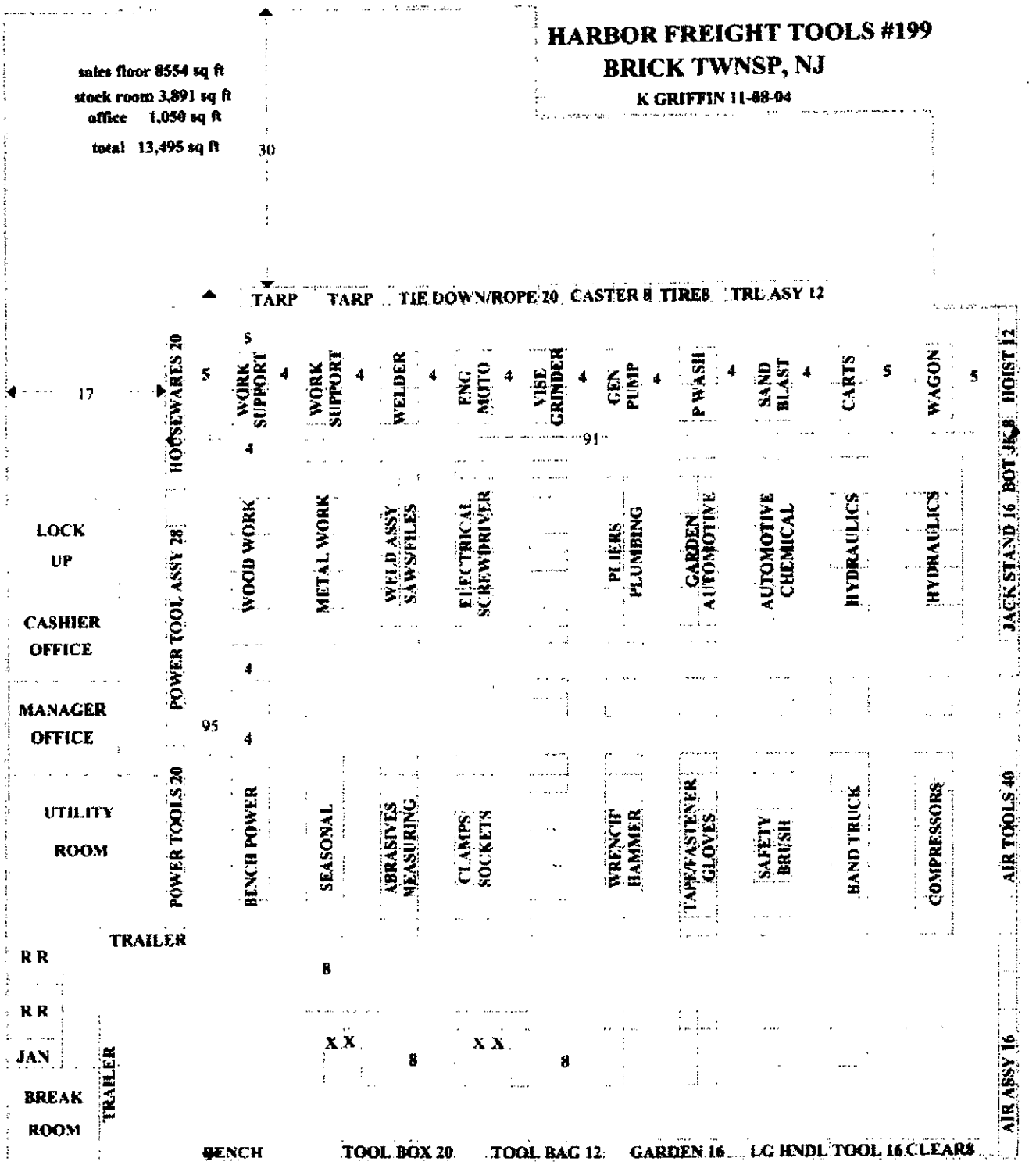
11 D.D.

3 W/F 6 Tampers

HARBOR FREIGHT TOOLS #199
BRICK TWNSP, NJ

K GRIFFIN 11-08-04

sales floor 8554 sq ft
stock room 3,891 sq ft
office 1,050 sq ft
total 13,495 sq ft



Meter

200' x 1½

15' x 1"

15' x 1"

150,000 BTUS.

150,000 BTUS

200' Chart.

1½ - 300,000.

2/15/05

TOWNSHIP OF BRICK

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

Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
http://www.twp.brick.nj.us

Date: 1-13-2005

Block: 670 Lot: 4

Property Address: 2770 Old Hooper Ave

I, David Voight (name) Agent for Kennedy Mall Assoc. of 2770 Old Hooper Ave. (address)
request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, ect. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

David Voight
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.

2. Proof that the property is not located in a Flood Hazard Area.

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

FOR OFFICE USE ONLY

Approved on: 2/2/05 Signed: [signature]

Rejected on: _____ Signed: _____

Comments:

Township of Brick

Engineering Review Form

Number: 461 **Date:** Wednesday, January 19, 2005

Applicant: VOIGHT

Address: 2770 OLD HOOPER AVE.

City: BRICK

State: NJ **Zip:** 08723

Property Address: SAME

Phone: (973) 966-2800

Block: 670 **Lot:** 4

Project Type: ALTERATIONS

Denied ☑

Denied Reason: SITE WORK IN FRONT AND REAR NOT SHOWN PROPERLY/MAY NEED BOND ESTIMATE/INSP. FUND, ETC. Insp Fee Posted $100.00

Approved ☒

Application Reviewed by _____

James A. Priolo, P.E.
Township Engineer

FIDELITY

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

October 22, 2004

Via: Fax 732-262-8954 & Fedex

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

C31-61

RE: Occupancy Loads
Harbor Freight Tools Tenant
(Former Theater Building)
Kennedy Mall
Brick, NJ

Dear Mr. Mizer:

Pursuant to my office's conversation with the Plumbing Sub-code Official, Mr. Bernie Riley, regarding the subject project, we have confirmed the following with our Tenant:

> Based upon national studies of their actual store utilizations, they have determined that for a store of approximately 13,495 SF, we can reasonable expect an occupancy load not to exceed 80 persons at one time.

I trust this responds to the issues discussed and confirms that 80 persons shall be used to calculate the required number of toilet rooms for this Tenant.

Thank you for your cooperation with this matter.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates

Edward D. Maceiko, AIA, PE
NJRA #08056

10/22/04
Date

EDM/kc
cc: Bobby C.
David V.
Larry Eccleston via Fax (805) 445-4902

W:\SHARDATA OWNDPROP KENNEDY\Harbor Freight\Twp\Mizer02.doc

FIDELITY

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

Via: Federal Express

October 14, 2004

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

RE: Harbor Freight Tools Tenant
(Former Theater Building)
Kennedy Mall
Brick, NJ

Dear Mr. Mizer:

Pursuant to your request, enclosed please find one (1) signed and sealed copy of the revised cross section of the floor systems revised by Richard Maloney P.E., for the above referenced project.

If you have any questions or require any additional information in order to expedite the required permits, please do not hesitate to contact me.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates

EDM/kc
Enclosure
cc: Bobby C. w/encl.
David V. w/encl.

W:\SHARDATA\OWNDPROP\KENNEDY\Harbor Freight\TwpMizer01.doc

FIDELITY

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

September 29, 2004

Via: Fax and Federal Express

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

RE: Harbor Freight Tools Tenant
(Former Theater Building)
Kennedy Mall
Brick, NJ

Dear Mr. Mizer:

Pursuant to your request, please incorporate the following information into the record for the subject project:

1. Use Group: M – Mercantile.
2. Occupancy Load – Retail Area = 150 People
   Stock Area = 14 People
   Total = 164 People
3. ADA Restroom Details – See attachment "A"
4. Floor Leveling Cross Section – See attachment "B".

Regarding your Township Engineer's comments, please note that the cross section referred above has been signed and sealed by the writer as a Professional Engineer in the State of New Jersey. Likewise, I am resubmitting the previous letter referred to in your fax received on 09/27/04 outlining the same professional credentials.

If you or your Engineer have any further questions, please do not hesitate to contact me.

Thank you for your anticipated cooperation.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates

Edward D. Maceiko, AIA, PE
NJRA #08056

9/29/04
Date

Edward D. Maceiko, AIA, PE
NJPE #GE28227

9/29/04
Date

W:\SHARDATA OWNDPROP\KENNEDY\Harbor Freight\Twsp Mizer.doc

Township of Brick
Zoning Permit

Approved: Friday, September 10, 2004 **Number:** 1400

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

Property Address: 2770 Hooper Avenue; Kennedy Mall

Applicant: Robert Cifrodello; Fidelity Land Developers

Property Owner Kennedy Mall Associates

Existing Use: Vacant commercial building (former movie theater)

Proposed Use: Two retail stores.
Tenant One: Harbor Freight Tools store; 13,000 square feet.

Proposed Construction: Partitioning building for two (2) commercial units.
Interior alterations for tenant fit-up for retail tool store.

Conditions: An additional zoning permit is required for any sign or any other addditional 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
Municipal Planner

Sean Kinnevy
Zoning Officer

RECEIVED
AUG 31 2004
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.

RECEIVED
SEP 7 2004
ZONING

BLOCK 670 LOT 4 QUALIFIER ____

PROPERTY ADDRESS 2770 Route Hwy

PERSONAL NAME OF APPLICANT ~~Fidelity Land Devel.~~ Robert Cifrodello

BUSINESS NAME OF APPLICANT Fidelity Land Devel.

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

PROPERTY OWNER'S FULL NAME ~~Fidelity~~ Kennedy Mall Ass.

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☒ Commercial (please describe) Tenant F.I.T.U.P. - Vacant movie theatre

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☒ Commercial (please describe) ~~Tool Warehouse~~ Retail Harbor Freight Tools

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) ____ Height ____
☐ Addition - Height ____
☒ Alteration
☐ Porch or deck - Height Tenant fit up - Tool Warehouse
☐ Shed - Height ____
☐ Fence - Type ____ Height ____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) ____

CONVENTIONAL

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 Robert Cifrodello Date 8/30/04

Reviewed by Zoning Office ____ Date 9/1/04 ( ) Approved (X) Denied

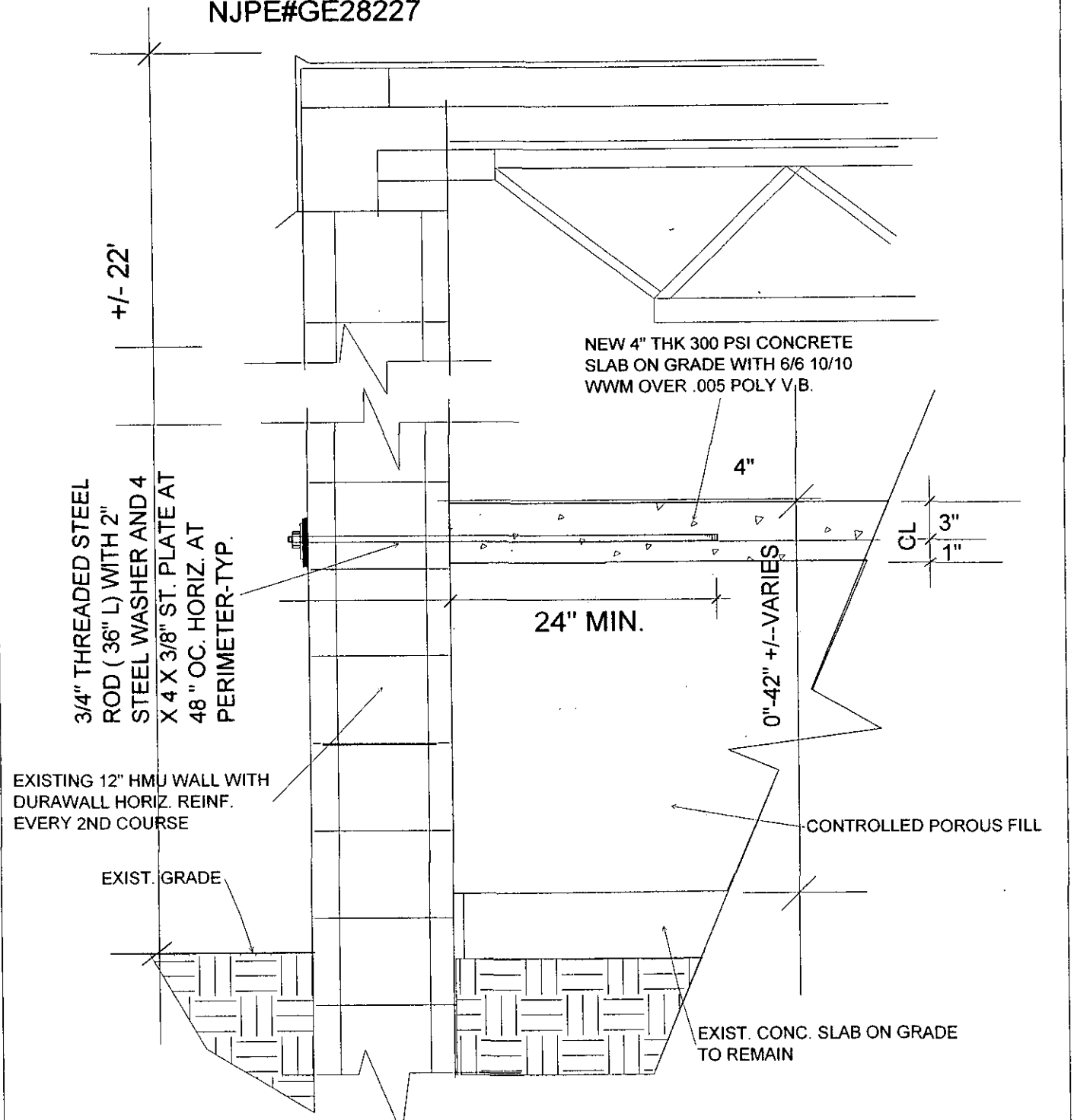
** ZONING PERMITS WILL NOT BE ACCEPTED BETWEEN 1-2 PM.

fax 8/30/04
9/7/04

EXHIBIT "A"-HARBOR FREIGHT TOOL TENANT
9.29.04
FORMER THEATRE-KENNEDY MALL
BRICK, NJ- REVISED- 10/5/04

10/14/04

EDWARD D. MACEIKO DATE
NJPE#GE28227



TYP. CROSS SECTION THROUGH NEW FLOOR SYSTEM NO SCALE

9-27-04

Township of Brick building subcode
Application review process
Building subcode

Address of application 2110 Hooper Ave

Please be advised that you have been rejected by the building subcode for the following reasons noted on either the framing checklist or our Township checklist.. OR the items listed below.

Please make any corrections on both sets of plans, as lists of information will be rejected.

1. Use Group
2. Occupancy LOAD
3. Details on Rest Rooms for ADA
4. No Cross Section Details on Floor modification only
5. Township Engineer will NOT Accept Letter From Architect on Filling with soil

10-14 Re-Reject Sketch NOT Sealed by Architect
Called ed macerko @ 9:45 LEFT message @ 973-966-6161 Fax 973-2
cell- 296-6193
Called Joe Sermo @ 9:20
Left message

HYDRAULIC CALCULATION NOTES

KENNEDY MALL, TENANT 2

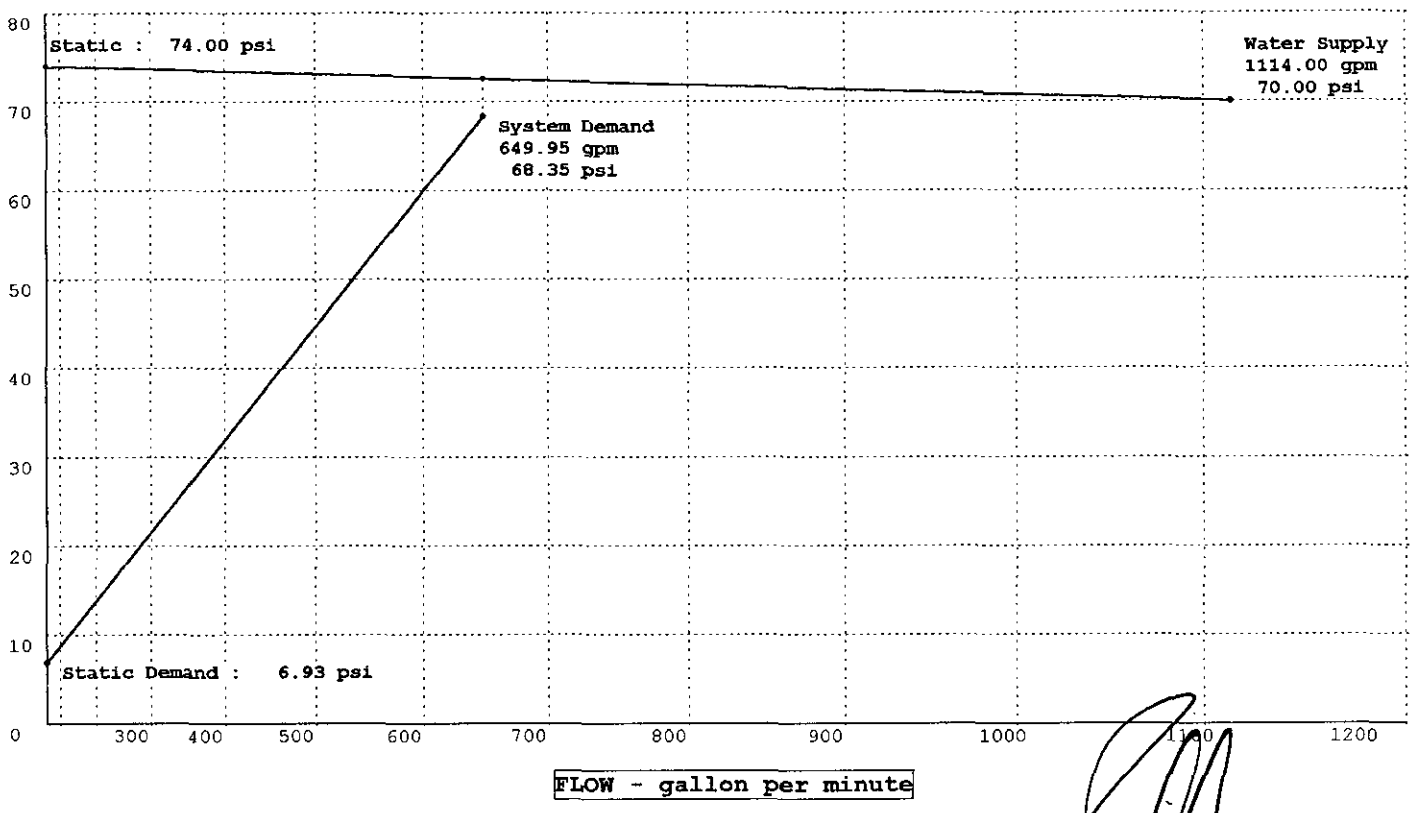
(1) CALCULATION SUMMARY

DATE	8/11/2004
LOCATION	TENANT 2
PROJECT	KENNEDY MALL
ADDRESS	HOOPER AVENUE, BRICK, N. J.
HAZARD	ORDINARY HAZARD GROUP 2
CONTRACTOR	MONMOUTH CONTROLS
AUTHORITY	LOCAL JURISDICTIONS
CRITERIA	0.20 gpm/sq.ft./1500 sq.ft. PLUS 250.00 gpm
SUPPLY	74.00 psi STATIC, 70.00 psi RESIDUAL FLOWING 1114.00 gpm
DEMAND	68.35 psi AT 649.95 gpm
AVAILABLE	72.52 psi AT 649.95 gpm

(2) SYMBOLS AND ABBREVIATION

T	Tee	BV	Butterfly Valves
E	Elbow	CV	Check Valve
EE	45-degree Elbow	AV	Alarm Valve
LE	Long Turn Elbow	DV	Dry Pipe Valve
GV	Gate Valve	DL	Deluge Valve

(3) WATER SUPPLY & DEMAND GRAPH



HYDRAULIC CALCULATION FOR SPRINKLER SYSTEM:

PROJECT NAME: KENNEDY MALL
PROJECT ADDRESS: HOOPER AVENUE, BRICK, N. J.
CALCULATION AREA: TENANT 2

DESIGN CRITERIA: DENSITY = 0.20 gpm/sq.ft./1500 sq.ft. PLUS 250.00 gpm
WATER SUPPLY: STATIC 74.00 psi, RESIDUAL 70.00 psi AT 1114.00 gpm

SPRINKLER SYSTEM DATA: (Pipe & Fittings)

FROM NODE	TO NODE	SIZE (inch)	LENGTH (feet)	HW-C VALUE	ELEV.DIFF. (feet)	FTG.EQV. LENGTH	TOTAL LENGTH	FITTINGS & DEVICES
1	3	5.890	80.00	140	0.00	54.20	134.20	1T 1GV 1E
3	5	6.065	6.00	120	0.00	81.00	87.00	1E 1GV 2CV
5	7	4.260	40.00	120	15.00	97.44	137.44	5E 1GV 1CV
7	28	3.260	109.00	120	0.00	28.22	137.22	3E
28	29	3.260	29.00	120	1.00	28.22	57.22	3E
29	30	1.610	4.50	120	0.00	8.00	12.50	1T
29	31	1.610	5.50	120	0.00	8.00	13.50	1T
31	32	1.610	10.00	120	0.00	0.00	10.00	none
32	33	1.380	10.00	120	0.00	0.00	10.00	none
33	34	1.049	10.00	120	0.00	0.00	10.00	none
29	35	3.260	12.00	120	0.00	0.00	12.00	none
35	36	1.610	4.50	120	0.00	8.00	12.50	1T
35	37	1.610	5.50	120	0.00	8.00	13.50	1T
37	38	1.610	10.00	120	0.00	0.00	10.00	none
38	39	1.380	10.00	120	0.00	0.00	10.00	none
39	40	1.049	10.00	120	0.00	0.00	10.00	none
35	41	3.260	12.00	120	0.00	0.00	12.00	none
41	42	1.610	4.50	120	0.00	8.00	12.50	1T
41	43	1.610	5.50	120	0.00	8.00	13.50	1T
43	44	1.610	10.00	120	0.00	0.00	10.00	none
44	45	1.380	10.00	120	0.00	0.00	10.00	none
45	46	1.049	10.00	120	0.00	0.00	10.00	none

SPRINKLER SYSTEM INPUT DATA: (Sprinkler "K", Node & Area)

OPERATING SPRINKLERS LOCATED AS FOLLOWS HAVE A "K" OF 5.60

NODE:	30	31	32	33	34	36	37	38	39	40	42	43	44	45
AREA:	120	120	120	120	120	120	120	120	120	120	120	120	120	120

NODE:	46
AREA:	120

SUMMARY OF SPRINKLER SYSTEM INPUT DATA:

SYSTEM CONSISTS OF 22 PIPES, 23 JUNCTIONS, 0 LOOPS

AREA CALCULATED = 1800.00 sq.ft., MINIMUM DENSITY = 0.200 gpm/sq.ft.

CALCULATION RESULTS WITH REQUIRED FLOW AT REMOTE HEAD: (system demand)

NODE NO.	ELEV. (ft.)	PIPE SIZE	PIPE LENGTH	DISCH. (gpm)	INFLOW (gpm)	PRESS. (psi)	LOSS Pf	LOSS Pe	AREA PER HD.	DSCHRG DNSITY
46	17.00	1.05	10.00	24.00	-24.00	18.37	1.82	0.00	120.00	0.20
45	17.00	1.38	10.00	25.16	-49.16	20.19	1.81	0.00	120.00	0.21
44	17.00	1.61	10.00	26.26	-75.43	22.00	1.88	0.00	120.00	0.22
43	17.00	1.61	13.50	27.37	-102.79	23.88	4.51	0.00	120.00	0.23
41	17.00					28.39				
42	17.00	1.61	12.50	29.62	-29.62	27.97	0.42	0.00	120.00	0.25
41	17.00	3.26	12.00	0.00	-132.41	28.39	0.21	0.00	0.00	0.00
35	17.00					28.59				
40	17.00	1.05	10.00	24.09	-24.09	18.50	1.84	0.00	120.00	0.20
39	17.00	1.38	10.00	25.26	-49.35	20.34	1.82	0.00	120.00	0.21
38	17.00	1.61	10.00	26.36	-75.71	22.16	1.90	0.00	120.00	0.22
37	17.00	1.61	13.50	27.47	-103.17	24.06	4.54	0.00	120.00	0.23
35	17.00					28.59				
36	17.00	1.61	12.50	29.72	-29.72	28.17	0.42	0.00	120.00	0.25
35	17.00	3.26	12.00	0.00	-265.31	28.59	0.75	0.00	0.00	0.00
29	17.00					29.34				
34	17.00	1.05	10.00	24.41	-24.41	19.00	1.88	0.00	120.00	0.20
33	17.00	1.38	10.00	25.59	-50.00	20.88	1.86	0.00	120.00	0.21
32	17.00	1.61	10.00	26.71	-76.71	22.75	1.94	0.00	120.00	0.22
31	17.00	1.61	13.50	27.83	-104.54	24.69	4.65	0.00	120.00	0.23
29	17.00					29.34				
30	17.00	1.61	12.50	30.11	-30.11	28.91	0.43	0.00	120.00	0.25
29	17.00	3.26	57.22	0.00	-399.95	29.34	7.60	0.43	0.00	0.00
28	16.00	3.26	137.22	0.00	-399.95	37.37	18.22	0.00	0.00	0.00
7	16.00	4.26	137.44	0.00	-399.95	55.58	4.96	6.50	0.00	0.00
5	1.00	6.07	87.00	0.00	-399.95	67.04	0.56	0.00	0.00	0.00
3	1.00	5.89	134.20	0.00	-399.95	67.60	0.75	0.00	0.00	0.00
1	1.00					68.35				

```
================================================================================
  CALCULATION RESULTS SUMMARY:
================================================================================
  TOTAL SPRINKLER FLOW =    400 gpm WITH MIN.DENSITY OF  0.200 gpm/sq.ft.
  THE MAXIMUM VELOCITY OF  16.47 FT/S OCCURS BETWEEN NODES  29 AND  31
  THE OUTSIDE  HOSESTREAM FLOW OF  250.00 gpm OPERATES AT    68.35 psi
--------------------------------------------------------------------------------
  PRESSURE REQUIRED AT WATER SUPPLY (Node #1) =   68.35
  AVAILABLE PRESSURE =    72.52 psi AT   649.95 gpm
================================================================================
```

HYDRAULIC CALCULATION NOTES

KENNEDY MALL, TENANT 1

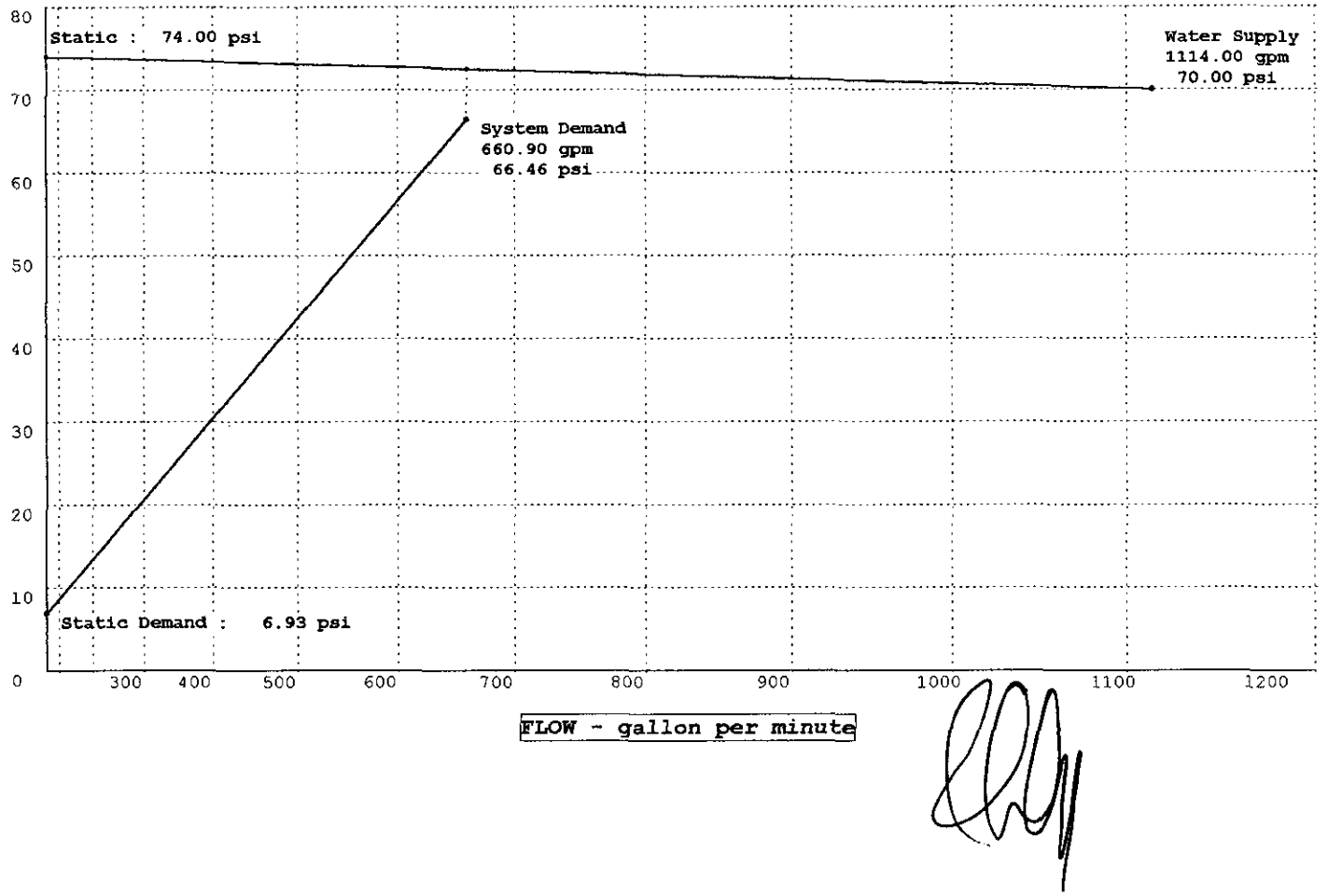
(1) CALCULATION SUMMARY

DATE	8/11/2004
LOCATION	TENANT 1
PROJECT	KENNEDY MALL
ADDRESS	HOOPER AVENUE, BRICK, N. J.
HAZARD	ORDINARY HAZARD GROUP 2
CONTRACTOR	MONMOUTH CONTROLS
AUTHORITY	LOCAL JURISDICTIONS
CRITERIA	0.20 gpm/sq.ft./1500 sq.ft. PLUS 250.00 gpm
SUPPLY	74.00 psi STATIC, 70.00 psi RESIDUAL FLOWING 1114.00 gpm
DEMAND	66.46 psi AT 660.90 gpm
AVAILABLE	72.48 psi AT 660.90 gpm

(2) SYMBOLS AND ABBREVIATION

T	Tee	BV	Butterfly Valves
E	Elbow	CV	Check Valve
EE	45-degree Elbow	AV	Alarm Valve
LE	Long Turn Elbow	DV	Dry Pipe Valve
GV	Gate Valve	DL	Deluge Valve

(3) WATER SUPPLY & DEMAND GRAPH



HYDRAULIC CALCULATION FOR SPRINKLER SYSTEM:

PROJECT NAME: KENNEDY MALL
PROJECT ADDRESS: HOOPER AVENUE, BRICK, N. J.
CALCULATION AREA: TENANT 1

DESIGN CRITERIA: DENSITY = 0.20 gpm/sq.ft./1500 sq.ft. PLUS 250.00 gpm
WATER SUPPLY: STATIC 74.00 psi, RESIDUAL 70.00 psi AT 1114.00 gpm

SPRINKLER SYSTEM DATA: (Pipe & Fittings)

FROM NODE	TO NODE	SIZE (inch)	LENGTH (feet)	HW-C VALUE	ELEV.DIFF. (feet)	FTG.EQV. LENGTH	TOTAL LENGTH	FITTINGS & DEVICES
1	3	5.890	80.00	140	0.00	54.20	134.20	1T 1GV 1E
3	5	6.065	6.00	120	0.00	81.00	87.00	1E 1GV 2CV
5	7	4.260	40.00	120	15.00	97.44	137.44	5E 1GV 1CV
7	9	3.260	82.00	120	1.00	48.38	130.38	1T 3E
9	11	2.067	17.00	120	0.00	10.00	27.00	1T
11	12	1.610	10.00	120	0.00	0.00	10.00	none
12	13	1.610	10.00	120	0.00	0.00	10.00	none
13	14	1.380	10.00	120	0.00	0.00	10.00	none
14	15	1.049	10.00	120	0.00	0.00	10.00	none
9	16	3.260	10.00	120	0.00	0.00	10.00	none
16	17	2.067	17.00	120	0.00	10.00	27.00	1T
17	18	1.610	10.00	120	0.00	0.00	10.00	none
18	19	1.610	10.00	120	0.00	0.00	10.00	none
19	20	1.380	10.00	120	0.00	0.00	10.00	none
20	21	1.049	10.00	120	0.00	0.00	10.00	none
16	22	3.260	8.00	120	0.00	0.00	8.00	none
22	23	2.067	17.00	120	0.00	10.00	27.00	1T
23	24	1.610	10.00	120	0.00	0.00	10.00	none
24	25	1.610	14.00	120	0.00	8.00	22.00	2E
25	26	1.380	10.00	120	0.00	0.00	10.00	none
26	27	1.049	10.00	120	0.00	0.00	10.00	none

SPRINKLER SYSTEM INPUT DATA: (Sprinkler "K", Node & Area)

OPERATING SPRINKLERS LOCATED AS FOLLOWS HAVE A "K" OF 5.60

NODE:	11	12	13	14	15	17	18	19	20	21	23	24	25	26
AREA:	120	120	120	120	120	120	120	120	120	120	80	80	120	120

NODE:	27
AREA:	120

SUMMARY OF SPRINKLER SYSTEM INPUT DATA:

SYSTEM CONSISTS OF 21 PIPES, 22 JUNCTIONS, 0 LOOPS

AREA CALCULATED = 1720.00 sq.ft., MINIMUM DENSITY = 0.200 gpm/sq.ft.

CALCULATION RESULTS WITH REQUIRED FLOW AT REMOTE HEAD: (system demand)

NODE NO.	ELEV. (ft.)	PIPE SIZE	PIPE LENGTH	DISCH. (gpm)	INFLOW (gpm)	PRESS. (psi)	LOSS Pf	LOSS Pe	AREA PER HD.	DSCHRG DNSITY
27	17.00	1.05	10.00	24.00	-24.00	18.37	1.82	0.00	120.00	0.20
26	17.00	1.38	10.00	25.16	-49.16	20.19	1.81	0.00	120.00	0.21
25	17.00	1.61	22.00	26.26	-75.43	22.00	4.14	0.00	120.00	0.22
24	17.00	1.61	10.00	28.63	-104.06	26.14	3.41	0.00	80.00	0.36
23	17.00	2.07	27.00	30.44	-134.50	29.56	4.39	0.00	80.00	0.38
22	17.00	3.26	8.00	0.00	-134.50	33.95	0.14	0.00	0.00	0.00
16	17.00					34.09				
21	17.00	1.05	10.00	25.02	-25.02	19.96	1.97	0.00	120.00	0.21
20	17.00	1.38	10.00	26.22	-51.24	21.93	1.95	0.00	120.00	0.22
19	17.00	1.61	10.00	27.36	-78.60	23.88	2.03	0.00	120.00	0.23
18	17.00	1.61	10.00	28.50	-107.11	25.91	3.60	0.00	120.00	0.24
17	17.00	2.07	27.00	30.42	-137.53	29.51	4.57	0.00	120.00	0.25
16	17.00	3.26	10.00	0.00	-272.03	34.09	0.65	0.00	0.00	0.00
9	17.00					34.74				
15	17.00	1.05	10.00	25.26	-25.26	20.35	2.00	0.00	120.00	0.21
14	17.00	1.38	10.00	26.48	-51.74	22.36	1.99	0.00	120.00	0.22
13	17.00	1.61	10.00	27.63	-79.37	24.34	2.07	0.00	120.00	0.23
12	17.00	1.61	10.00	28.78	-108.15	26.41	3.67	0.00	120.00	0.24
11	17.00	2.07	27.00	30.71	-138.87	30.08	4.66	0.00	120.00	0.26
9	17.00	3.26	130.38	0.00	-410.90	34.74	18.19	0.43	0.00	0.00
7	16.00	4.26	137.44	0.00	-410.90	53.36	5.21	6.50	0.00	0.00
5	1.00	6.07	87.00	0.00	-410.90	65.08	0.59	0.00	0.00	0.00
3	1.00	5.89	134.20	0.00	-410.90	65.67	0.79	0.00	0.00	0.00
1	1.00					66.46				

CALCULATION RESULTS SUMMARY:

TOTAL SPRINKLER FLOW = 411 gpm WITH MIN.DENSITY OF 0.200 gpm/sq.ft.
THE MAXIMUM VELOCITY OF 17.04 FT/S OCCURS BETWEEN NODES 11 AND 12
THE OUTSIDE HOSESTREAM FLOW OF 250.00 gpm OPERATES AT 66.46 psi

PRESSURE REQUIRED AT WATER SUPPLY (Node #1) = 66.46
AVAILABLE PRESSURE = 72.48 psi AT 660.90 gpm

Tool Warehouse

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER Kennedy Mall Assoc. DATE 10-28-04

PROPERTY ADDRESS 277 Cooper 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	
4:LAVATORY	2	2	
5:BATH TUB			
6:SHOWER STALL			
7:KITCHEN SINK	1	1.5	
8:SERVICE SINK	1	3	
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 11.5

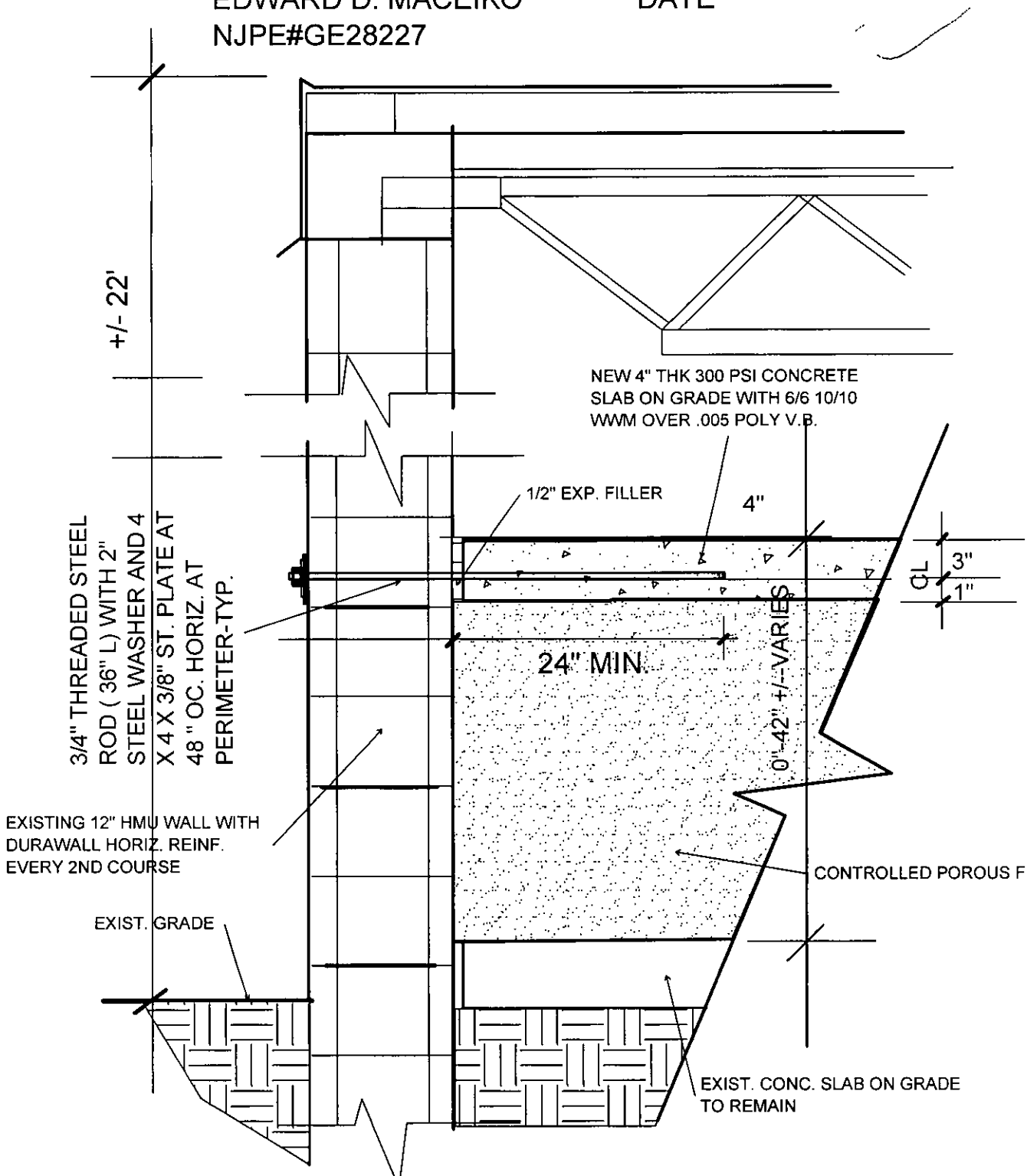
GALLONS PER MINUTE 11

SIZE OF SERVICE 3/4"

DATE: 10-28-04 APPROVED: ~~BAK~~

EXHIBIT "A"-HARBOR FREIGHT TOOL TENANT
9.29.04
FORMER THEATRE-KENNEDY MALL
BRICK, NJ- REVISED- 10/5/04

EDWARD D. MACEIKO DATE
NJPE#GE28227



TYP. CROSS SECTION THROUGH NEW FLOOR SYSTEM NO SCALE

Maloney, Richard

From: emaceiko [emaceiko@fidelityland.com]
Sent: Tuesday, October 05, 2004 12:23 PM
To: Maloney, Richard
Cc: FLDC1@aol.com; EDM56@aol.com
Subject: KENNEDY MALL FLOOR DETAIL

PER OUR TELCO TODAY PLEASE REVIEW THE ATTACHED PDF FILE INDUCATING THE CROSS SECTION OF THE PINNED FLOOR SLAB. PLEASE CALL ME WITH ANY QUESTIONS. THANKS.

EDM

Edward D. Maceiko
Fidlelity Land Development Corporation
641 Shunpike Road
Chatham, NJ 07928
Tel: 973-966-2800 x 251
Fax: 973-966-6161
Visit us at www.fidelityland.com

FIDELITY

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

September 10, 2004

Via: Fax and Mail

Mr. Daniel F. Newman, Jr.
Construction Official
Brick Township Municipal Building
401 Chambers Bridge Road
Brick, NJ 08723

RE: Harbor Freight Tools Tenant Installation (Former Theater Building)
Kennedy Mall
Brick, NJ

Dear Mr. Newman:

In anticipation of your request, please incorporate the following into the permanent record for the subject project:

A) I have re-examined the lateral loads on the existing exterior walls imposed by the filling of the interior sloped floor of the building as the design professional of record.

B) In the context of such "unbalanced fill" conditions, I have reviewed IBC-NJ 2000 Table 1805.5(1) for 12" plain masonry.

C) I have confirmed by way of the original construction drawings for the building, as well as my own field inspection, that the exterior walls are 12" HMU's with horizontal wire reinforcing.

D) In consideration of the preceding, I am of the opinion that the existing structure can safely sustain the total loads to be imposed as a result of this modification.

I trust this responds to your concerns and ask that if you have any questions, please do not hesitate to contact me.

We await your favorable response.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates

Edward D. Maceiko, AIA, PE
NJRA #08056

9/10/04
Date

Edward D. Maceiko, AIA, PE
NJPE #GE28227

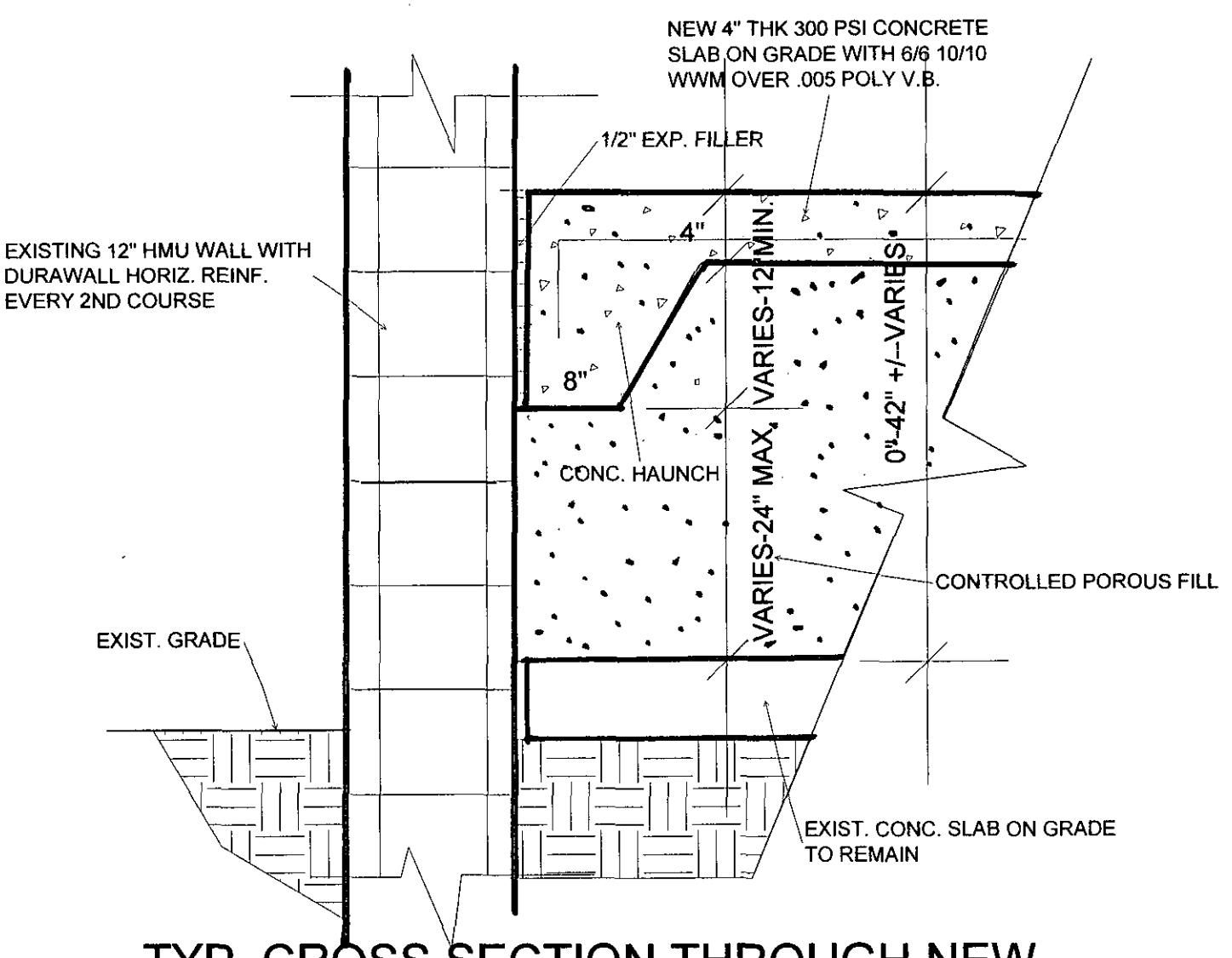
9/10/04
Date

W:\SHARDATA OWNDPROJ\KENNEDY Harbor Freight\Twsp Brick.doc

EXHIBIT "A"-HARBOR FREIGHT TOOL TENANT
9.29.04
FORMER THEATRE-KENNEDY MALL
BRICK, NJ

9/29/04

EDWARD D. MACEIKO DATE
NJPE#GE28227



TYP. CROSS SECTION THROUGH NEW FLOOR SYSTEM NO SCALE

Land Use/ Bldg Dept Fax:732-262-8954

** Transmit Conf.Report **

P.1 Sep 27 2004 14:20

Telephone Number	Mode	Start	Time	Page	Result	Note
19739666161	NORMAL	27,14:19	0'42"	2	* O K	

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

Department of Administration & Finance

Division of Inspections
Daniel F. Newman Jr.
Construction Official
(732) 262-1030
Fax: (732) 262-8954
http://www.twp.brick.nj.us

FAX CORRESPONDENCE

DATE: _____

FAX NUMBER 973-966-6161

ATTENTION: Joe Serino

PAGES TO FOLLOW 1

FROM: F. MIZER

MESSAGE _____

The Office of the Undersigned
AT

FIDELITY MANAGEMENT COMPANY, INC.

641 SHUNPIKE ROAD CHATHAM, NEW JERSEY 07928

FIDELITY
(973) 966-2800
FAX NO. (973) 966-6161

FACSIMILE TRANSMITTAL COVER SHEET

DATE: 9.10.04

TO: Daniel F. Newman, Jr

TO FAX NUMBER: 793.920.4850

FROM: Edward Macciko

REGARDING: Kennedy Mall

NUMBER OF PAGES: 2 ***(including this cover sheet)***

REMARKS: Please see attached letter.

C 31-61

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

September 10, 2004

Via: Fax and Mail

Mr. Daniel F. Newman, Jr.
Construction Official
Brick Township Municipal Building
401 Chambers Bridge Road
Brick, NJ 08723

RE: Harbor Freight Tools Tenant Installation (Former Theater Building)
Kennedy Mall
Brick, NJ

Dear Mr. Newman:

In anticipation of your request, please incorporate the following into the permanent record for the subject project:

A) I have re-examined the lateral loads on the existing exterior walls imposed by the filling of the interior sloped floor of the building as the design professional of record.

B) In the context of such "unbalanced fill" conditions, I have reviewed IBC-NJ 2000 Table 1805.5(1) for 12" plain masonry.

C) I have confirmed by way of the original construction drawings for the building, as well as my own field inspection, that the exterior walls are 12" HMU's with horizontal wire reinforcing.

D) In consideration of the preceding, I am of the opinion that the existing structure can safely sustain the total loads to be imposed as a result of this modification.

I trust this responds to your concerns and ask that if you have any questions, please do not hesitate to contact me.

We await your favorable response.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates

Edward D. Maceiko, AIA, PE
NJRA#08056 NJPE# G28227

9/10/04
Date

W:\SHARDATA\OWNDPROP\KENNEDY\Harbor Freight-Twsp Brick.doc

FIDELITY

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

September 10, 2004

Via: Fax and Mail

Mr. Daniel F. Newman, Jr.
Construction Official
Brick Township Municipal Building
401 Chambers Bridge Road
Brick, NJ 08723

RE: Harbor Freight Tools Tenant Installation (Former Theater Building)
Kennedy Mall
Brick, NJ

Dear Mr. Newman:

In anticipation of your request, please incorporate the following into the permanent record for the subject project:

A) I have re-examined the lateral loads on the existing exterior walls imposed by the filling of the interior sloped floor of the building as the design professional of record.

B) In the context of such "unbalanced fill" conditions, I have reviewed IBC-NJ 2000 Table 1805.5(1) for 12" plain masonry.

C) I have confirmed by way of the original construction drawings for the building, as well as my own field inspection, that the exterior walls are 12" HMU's with horizontal wire reinforcing.

D) In consideration of the preceding, I am of the opinion that the existing structure can safely sustain the total loads to be imposed as a result of this modification.

I trust this responds to your concerns and ask that if you have any questions, please do not hesitate to contact me.

We await your favorable response.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates

Edward D. Maceiko, AIA, PE
NJRA#08056 NJPE# G28227

9/10/04
Date

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 670 LOT 4 SITE ADDRESS 2770 Hooper Ave.
TYPE OF SITE Residential / (Commercial) NAME OF BUSINESS VCR Warehouse
APPLICANT Faculty Ward L. Wellspeers PHONE NUMBER 973-332-8585
APPLICANT ADDRESS 641 Shurpike Rd. CITY & STATE Chatham, NJ. 07928

Jil 973.246.6143

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

$ 149,500

Frederick R Millman

Frederick R. Millman, CTA, Tax Assessor — 9/23/04 Date

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

$ _____

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

Preliminary Fee 147.50 — Date 9/24/04
Check # 003675 — Receipt # 327445

Final Fee _____ — Date _____
Check# _____ — Reciept # _____

Total Fee Due/Paid 1495.00
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.

9/14/04 - Tapreleen.
1/23/04 - mailed letter & called.

_____ Office of Affordable Housing

Applicable to Ordinance 720-92
This form must be handed in with permit application or a permit will not be issued

TOWNSHIP OF BRICK
Debris Form

Work Site Address: 2770 Hooper Ave

Block: 670 Lot: 4

Contractor: American Coring

Contractor's Address: 89 Suzane St Toms River.

Type of Construction (minor, new home): Alteration, Demo.

Type of Debris (shingles, siding, wood, etc.): Concrete, Sheet Rock, Metal, Wood.

Party responsible for removal: American Coring

Dumpster size: 30yd.

Destination of debris: Ocean Cty Land Fill

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

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.

Signature

8/30/-4
Date

Robert C'Arpecio
Print Name

327445

003675

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
9/23/2004

Check Amount
$747.50

Seven Hundred Forty Seven AND 50/100 Dollars

Pay to the order of:

TOWNSHIP OF BRICK

401 CHAMBERS BRIDGE ROAD
BRICKTOWN, NJ 08723

⑈003675⑈ ⑆021202337⑆ 2810 51567 2⑈

Re: Affordable Housing Fees

Business/Development: Sam's Warehouse

Owner/Applicant: Kennedy Mall Assoc.

Property Address: 2770 Hooper Ave.

Block: 470 Lot: 4

DEPOSIT RECEIVED
Mandatory Development Fee
~~Commercial~~
Residential
Inclusionary Development Fee

DATE: 9/24/04

Check Number 003675

Preliminary Fee Paid *747.50

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

9-24-04
Date

OFFICE OF AFFORDABLE HOUSING

AHBT PRELIMINARY APPROVAL

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

September 1, 2004

Robert Cifrodello
Fidelity Land Dev.
641 Shunpike Road
Chatham, NJ 07928

Re: Block: 670 Lot: 4
2770 Hooper Avenue

Dear Mr. Cifrodello,

Your zoning permit application for a tenant fit-up for a tool warehouse on the referenced property cannot be approved because under Chapter 190 of the Township Code a warehouse is not a permitted use in the B-3 highway development zone.

In order to use the property for a warehouse the Zoning Board of Adjustment must first approve a use variance. Variance application forms can be obtained from Christine Papa, Board Secretary. Mrs. Papa can be reached at 732-262-1049 for additional information.

Very Truly Yours,

Sean Kinnevy
Zoning Officer

Received 9/7/04 SK

C: Scott R. MacFadden, Business Administrator
Michael P. Fowler, AICP/PP, Municipal Planner
Kate MacDonald, Assistant Zoning Officer
LisaRose Tavalaiccio, Zoning Permit Clerk
Daniel Newman, Construction Official

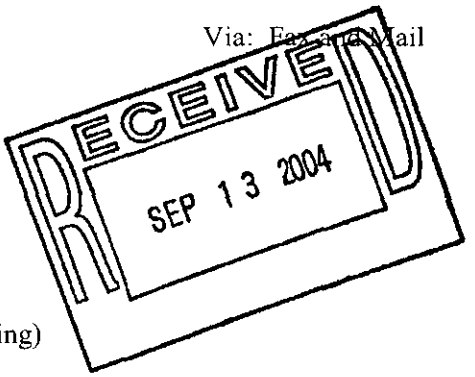
FIDELITY

FIDELITY LAND DEVELOPMENT CORPORATION

641 SHUNPIKE ROAD • CHATHAM, NEW JERSEY 07928

September 10, 2004

Via: Fax and Mail



Mr. Daniel F. Newman, Jr.
Construction Official
Brick Township Municipal Building
401 Chambers Bridge Road
Brick, NJ 08723

RE: Harbor Freight Tools Tenant Installation (Former Theater Building)
Kennedy Mall
Brick, NJ

Dear Mr. Newman:

In anticipation of your request, please incorporate the following into the permanent record for the subject project:

A) I have re-examined the lateral loads on the existing exterior walls imposed by the filling of the interior sloped floor of the building as the design professional of record.

B) In the context of such "unbalanced fill" conditions, I have reviewed IBC-NJ 2000 Table 1805.5(1) for 12" plain masonry.

C) I have confirmed by way of the original construction drawings for the building, as well as my own field inspection, that the exterior walls are 12" HMU's with horizontal wire reinforcing.

D) In consideration of the preceding, I am of the opinion that the existing structure can safely sustain the total loads to be imposed as a result of this modification.

I trust this responds to your concerns and ask that if you have any questions, please do not hesitate to contact me.

We await your favorable response.

Very truly yours,

Edward D. Maceiko
For Kennedy Mall Associates

Edward D. Maceiko, AIA, PE
NJRA#08056 NJPE# G28227

9/10/04
Date

W:\SHARDATA OW\DROP KENNEDY Harbor Freight\Twp Brick.doc

Kennedy Mill
old Theatre

Plumbing Plan Review Record

Work site location: 2770 Hooper Ave

Building Description: _____

Reviewed: [redacted]

Date: 10-21-07

Correction list

No.	Description	Code section
	Relab subcode	
	Pg 23-120.88.2 6.31 change of use	
	(2) Pg 120-88.9 Plbg requirements must comply with basic requirements of that use.	
	Fixture deficient in count	
	169 x .66 = 108 x .60 = 64 fixtures	
	Re-Submit to Plumbing	
	See Letter 10/22/07	

Township of Brick
Counter Form
(PLEASE PRINT)

UPDATE 04-4645
DATE 11/5/09
INITIALED BY
FOR Revised plans

Site Location: 2770 Old Hooper
Block: 670 Lot: 4
Owner's Name: Kenneoy Mall Ass.
Owner's Mailing Address: 641 Shunpike Rd Cliffton N.J.
Phone: (973) 966-2500

BUILDING

Contractor: Felicity Mart
Address: 641 Shunpike Rd
Cliffton N.J.
Phone#: 973-966-2500
Lis #
Federal Emp # or SSN 22-3053500

Technical Data

Description of Work:
Revised plans

Type of Work

___New Building
___Addition
___Alteration
___Roofing
___Asbestos Abatement
___Fireplace wd/gas
___Siding
___Fence
___Pool
___Demolition
___Sign _____sq ft

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: $ 15,000
Cost of New Building: $
Cost of Site Work $
Total Cost of New Building Work: $ 15,000

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: Robert Ciardello
Please Print Name ROBERT CIARDELLO
973-332-5500

ELECTRICAL

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

Technical Data

Item Quantity

Lighting Fixtures
Receptacles
Switches
Detectors
Light Poles
Motors w/ Fract. HP
Emergency & Exit Lights
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 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 AMP
Motor Control Center AMP
Sign/Outline Light KW
Furnace
Steam Boiler
Other:

Estimated Cost of Electrical 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:
Please Print Name

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

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

Technical Data

Fixtures Quantity

Water Closets (Toilet)_____
Urinals/Bidets_____
Bath Tub (w/or w/out shower head)_____
Lavatory (BR Sink)_____
Shower_____
Floor Drain_____
Sink_____
Dishwasher_____
Drinking Fountain_____
Washing Machine_____
Hose Bib_____
Gas Piping_____ No. of outlets_____
Fuel Oil Piping_____
Water Heater_____
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_____

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:_____

Please Print Name:_____

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:_____

Counter Form
PLEASE PRINT

PLUMBING

Contractor: Nielsen Plumbing
Address: 241 Cherry Quay Rd.
Brick NJ 08723
Phone #: 732 920 1695
Lis #: 8568
Federal Emp # or SSN 158 54 4466

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	2
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	
Lavatory (BR Sink)	2
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bib	
Gas Piping	
Fuel Oil Piping	
Water Heater	1
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Air Conditioner (Condensate Drain)	
Septic Tank Closure	
Sewer Service Connection	
Water Service Connection	
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	
Sump Pump	
Pool Heater	
Other:	

Estimated Cost of Plumbing Work $10,000

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:

Please Print Name: Ronald Nielsen

CONTRACTOR'S SEAL

FIRE

Contractor: Monmouth Controls
Address: 17 Anegada

Phone #: 732-929-8174
Lis #: P00527
Federal Emp # or SSN 22-2543749

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:

Flammable Storage Tanks ____capacity____fuel
Combustible Storage Tanks____capacity____fuel
LPG Storage Tanks____capacity____fuel

Item	Quantity
Wet Sprinkler Heads	160
Dry Sprinkler Heads	
Total	160
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust System	

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 40,000

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: Harry Smith

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: Kennedy Mall Movie Theater
Block: 670 Lot: 4
Owner's Name: Kennedy Mall Assoc.
Owner's Mailing Address: 641 Shrewsbury Ave
Chatham NJ 07928
Phone: (973) 966 2800

BUILDING

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

Technical Data

Description of Work:

slab - new
Mall fit up

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: $ 87,000

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $ [redacted]

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:
Please Print Name Robert Cipriello

ELECTRICAL

Contractor: SS Electric
Address: 63 Loganberry Lane
T.R. NJ 08753
Phone#: 732 255-7135
Lis #: 11413
Federal Emp # or SSN 146-72-5037

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	
Switches	
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
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 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
Light Stander AMP
Service AMP
Subpanel AMP
Motor Control Center AMP
Sign/Outline Light KW
Furnace
Steam Boiler
Other: 5-8 ton Rooftop Units - Re-wire

Estimated Cost of Electrical Work: 12,300

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:
Please Print Name Seth H. Shain

CONTRACTOR'S SEAL