RECEIVED
SEP 19 1996
DIV. OF INSPECTION

BLOCK 670 LOT 4-8 ADDRESS (SITE) 2770 Hooper Ave. PERMIT NO. 3250-96

UCC CONSTRUCTION PERMIT APPLICATION

COMMERCIAL

Living Well Lady

RECEIVED SEP 11 1996 DIV. OF INSPECTION

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

I. IDENTIFICATION

1. Proposed Work-site at: 2770 Hooper Ave, Bricktown, N.J.
2. Name of Owner in Fee: Kennedy Mall Associates Tel. (201) 966-2800
   Address 641 Shunpike Rd, Chatam, N.J. (street / municipality / zip code)
3. Ownership in Fee: Public ______ Private ______
4. Principal Contractor: AllAmerican Contracting Corp Tel. (201) 943-0778
   Address 1203 River Rd, Edgewater, N.J. 07020
   License No. OR, if new home, Builder Reg. No. ______ Exp. Date ______
   Federal Emp. No. 11268-5260 Social Security No. ______
5. Architect or Engineer Henry O. Trimm AIA Tel. (305) 666-2898
   Address 4904-B S.W. 72nd Ave/Miami, FLA - 33155
6. Responsible Person in Charge of Work HARRY Royle Tel. (201) 943-0778

AHBT FINAL APPROVAL

AHBT PRELIMINARY APPROVAL

V. FEE SUMMARY (for office use only)

		$	Update	Update
1.	Building	$ 1960		
2.	Electrical			
3.	Plumbing	255		
4.	Fire Protection	150		
5.	Elevator Devices			
6.	Subtotal	$ 2365		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	91		
10.	Subtotal	$		
11.	Cert. of Occupancy	15		
12.	Other 20A			
13.	TOTAL	$ 2471.00		

VI. BUILDING/SITE CHARACTERISTICS

			(office use only)
1.	Number of Stories	1	
2.	Height of Structure	22 ft.	
3.	Area—Largest Floor	7,176 sq. ft.	
4.	New Building Area	7,176 sq. ft.	
5.	Volume of New Structure	cu. ft.	
6.	Construction Classification	3B	
7.	Total Land Area Disturbed	sq. ft.	
8.	Flood Hazard Zone		
9.	Base Flood Elevation	ft.	
10.	Wetlands yes / no	sq. ft.	
11.	Max. Live Load		
12.	Max. Occupancy Load	70 by (Arch. letter)	

IMPORTANT: MANDATORY FEE - COMMERCIAL

Fire ok 2/21/97

II. PROPOSED WORK

	Est. Cost
1. ☐ Minor work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☒ Alteration ↓ Demo clean out	77,500
6. ☐ Fire Protection	
7. ☒ Plumbing	36,000
8. ☒ Electrical	15,000
9. ☐ Elevator Devices	
10. ☐ Asbestos Abatement	
11. ☐ Demolition	
TOTAL COSTS	128,500

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Reviewer	Resubmission Dates Approval	Rejection	Reviewer
[illegible]			12/5/96	[illegible]	2/14/97		[illegible]
		11/13/96	11/25/96	[illegible]	02/14/97		[illegible] 2/21/97
			12-0-96	[illegible]	2-14-97		[illegible]
					2/14/97		[illegible]
CWG	11/4/96		11/4/96	[illegible]			

III. DO YOU WANT: (optional) 1 ☐ Partial Releases 2. ☐ Prototype Processing

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction ______
After Construction ______
Net gain or loss ______

B. NON-RESIDENTIAL
1. State Specific Use: Fitness Center
2. Use Group: A-3
3. Change in Use Group, Indicate Former:

LDS BR 10207551

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

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( )I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( )I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey 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 All American Contracting Corp

Address 1203 River Rd, Edgewater, N.J. 07020

Telephone (201) 943-0778

Signature Harry Royle Date 9-18-96

Harry Royle

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									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ 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. 3256	2/14/97	2/21/97		
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				

CERTIFICATE

Date Issued 2-14-97
Control #
Permit # 3250-96

IDENTIFICATION

Block 670 Lot 4
Work Site Location 2770 Hooper Avenue

Owner in Fee Kennedy Mall Associates
Address 641 Shunpike Rd.
Chatam, NJ
Tele. ( )
Contractor All American Contracting Corp.
Address 1203 River Rd.
Edgewater, NM
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group A-3 2 hours
Maximum Live Load
Description of Work/Use:

Tenant fit-up "LIVING WELL LADY"

Type of Warranty Plan: [ ] **State** [ ] **Private**
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ **CERTIFICATE OF OCCUPANCY**

XXX☑ **CERTIFICATE OF APPROVAL**

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

☐ **CERTIFICATE OF CONTINUED OCCUPANCY**

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

XXX☐ **TEMPORARY CERTIFICATE OF OCCUPANCY**

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate:

Pending compliance with Fire (2-21-97)

OK 2/21/97

CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

CONSTRUCTION PERMIT

Date Issued 12/26/96
Control #
Permit # 3250-96

IDENTIFICATION Block 670 Lot 4

Work Site Location 2770 [illegible] Ave

Owner in Fee [illegible]

Address [illegible]

Tele. ( )

Contractor All American Cont

Address

Tele. ( )

Lic. No. or Bldrs. Reg. No. Exp. Date

Federal Emp. No.

or Social Security No.

is hereby granted permission to perform the following work:

[X] BUILDING [X] PLUMBING [ ] OTHER

[ ] ELECTRICAL [X] FIRE PROTECTION

[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

Interior alteration

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 $ 128,500.00

[signature]
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	1400
Plumbing	255
Electrical	
Fire Protection	150
Other	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	
Check No.	#1099
Cash	
Collected By:	

3250## BLOCK 0.00
670 # LOT 0.00
4 # [illegible]

U.C.C. Form F-170C

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

PERMIT UPDATE

Date Update Issued 970204
Control # 900301
Permit # Bucd
Date Permit Issued 970113

IDENTIFICATION Block 673 Lot 4-5-8

Work Site Location 2770 HOOPER AVE BRICK N.J. (LIVING WELL LADY)

Owner in Fee Kennedy Mall ASSOC.

Address 641 SHUNPIKE ROAD CHATAM N.J.

Tele. (201) 966-2800

Contractor TROTTER ELECTRIC INC

Address 153 CEDARHURST RD BRICK N.J. 08723

Tele. (908) 477-442

Lic. No. or Bldrs. Reg. No. 15234

Federal Emp. No. 22-3375-386

or Social Security No.

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER

[ ] ELECTRICAL [ ] FIRE PROTECTION

[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK: DELETE 1-400AMP Service Entrance INSTALL 2-200AMP 3PHASE PANELS IN PLACE OF 1-400AMP & 1-150AMP SUB PANEL ALSO ADD 1-SIGN

Estimated Cost of Work $

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	Unit
Check No.	
Cash	
Collected By:	

U.C.C. Form F-190B

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

BUILDING SUBCODE TECHNICAL SECTION

Date Received 12/26/96
Date Issued
Control #
Permit # 3250-96

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

Block 673 Lot 4-5.P-23-25

Work Site Location 2770 Hooper Ave, Brick town, N.J.
Living Wall Ladd's

Owner in Fee Kennedy Mall Associates

Address 641 Shunpike Rd, Chatham, N.J. 07928

Tele. (201) 966-2800

Contractor All American Contracting Corp

Address 1203 River Rd Edgewater, N.J. 07020

Tele. (201) 943-0778

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 112628260 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

Interior Alteration
Bldg Not Sprinkled

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Req.	12/26/96	
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date:

Approved By:

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

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

[ ] Demolition

(Office Use Only)
FEE

$

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ 128,000
3. Total (1+2) $ 128,000

Administrative Surcharge $
Paid [ ] Check # _____ Minimum Fee $
Collected by: _____ DCA TRAINING FEE $
TOTAL FEE $

U.C.C. Form F-110B
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 1-1-96/96
Date Issued
Control #
Permit # 2-25-96

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

Block 673 Lot 4-5-8-23-25
Work Site Location 2770 Hopper Ave. Brickstown, NJ.
Living Wall Lady
Owner in Fee Kennedy Mall Associates
Address 641 Shunpike Rd. Chatam, NJ. 07928

Tele. (201) 966-2800
Contractor Central Jersey Mechanical
Address P.O. Box 3476
Red Bank, N.J. 07701
Tele. (908) 530-6868
Lic. No. 9369
Federal Emp. No. 223211662 or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present ____ Proposed X
Building Sewer Size 4" Public Sewer X Private Septic ____
Water Service Size 1½" Public Water X Private Well ____
Estimated Cost of Plumbing Work $ 36,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 12-10-96
Approved by: BJL

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

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 record and am authorized to make this application and perform the work listed on this application.

Signature—Contractor Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
4	Water Closet	40
-	Urinal/Bidet	
-	Bath Tub	
4	Lavatory	40
3	Shower	30
3	Floor Drain	30
1	Sink	10
-	Dishwasher	
1	Drinking Fountain	10
-	Washing Machine	
-	Hose Bibb	
1	Water Heater	35
-	Fuel Oil Piping	
X	Gas Piping	25
-	Steam Boiler	
-	Hot Water Boiler	
-	Sewer Pump	
-	Interceptor/Separator	
-	Backflow Preventer	
-	Greasetrap	
-	Water Cooled A/C or Refrigeration Unit	
-	Sewer Connection	
X	Water Service Connection	
-	Active Solar System	
1	Other New Fixture	35

Administrative Surcharge $ ____
Paid [ ] Check # ____ Minimum Fee $ 25 5
DCA Training Fee $ ____
Collected by: ____ TOTAL $ ____

PRO 204 B

UCC FORM F-130 B

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

PLUMBING SUBCODE TECHNICAL SECTION

Change 1-8-97
Date Received 12/26/96
Date Issued
Control #
Permit # 3250-96

Change plb.

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

Block 673 Lot 4-5-9-23-25
Work Site Location 2770 Hooper Ave
BRICK Kennedy Mall
Owner in Fee Kennedy Mall Associates
Address 691 Shunpike Rd
Chatham N.J. 07928
Tele. (201) 966-2600
Contractor John Izzo Jr Plumbing & Heating
Address P.O. Box 4196
Brick N.J 07723
Tele. (908) [redacted] 920-2689
Lic. No. 9532
Federal Emp. No. _____ or Social Security No [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size 4" Public Sewer X Private Septic _____
Water Service Size 1½ Public Water X Private Well _____
Estimated Cost of Plumbing Work $ 20,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: _____
Approved by: _____

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
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/Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
4	Water Closet	
—	Urinal/Bidet	
—	Bath Tub	
4	Lavatory	
3	Shower	
3	Floor Drain	
1	Sink	
—	Dishwasher	
1	Drinking Fountain	
—	Washing Machine	
—	Hose Bibb	
1	Water Heater	
—	Fuel Oil Piping	
X	Gas Piping	
—	Steam Boiler	
—	Hot Water Boiler	
—	Sewer Pump	
—	Interceptor/Separator	
—	Backflow Preventer	
—	Greasetrap	
—	Water Cooled A/C or Refrigeration Unit	
—	Sewer Connection	
—	Water Service Connection	
—	Active Solar System	
1	Other New Furnace	

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
DCA Training Fee $ _____
Collected by: _____ TOTAL $ _____

U.C.C. Form F-130B

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 12/26/96
Date Issued
Control #
Permit # 3250-96

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

Block 67 Lot 4-5.8-23-25

Work Site Location 2770 Hooper Ave, Bricktown, N.J.
Living Well Lady

Owner in Fee Kennedy Mall Associates

Address 641 Shunpike Rd., Chatam, N.J. 07928

Tele. (201) 966-2800

Contractor All American Contracting Corp

Address 1203 River Rd, Edgewater, N.J. 07020

Tele. (201) 943-0778

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 112685260 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

Interior Alteration
Bldg Not Sprinkled

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	12/26/96	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date:

Approved By:

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

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

[ ] Demolition

(Office Use Only) FEE

$

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ 128,000
3. Total (1+2) $ 128,000

Paid [ ] Check # _____ Collected by: _____

Administrative Surcharge	$
Minimum Fee	$
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

Brick

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # JAN 13 97 0 0 0 3 0 1

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

Block 670 Lot 4-5-8-23-25
Work Site Location 2770 Hooper Ave, BRICK N.J.
LIVING WELL CADY
Owner in Fee Kennedy Mall Assoc.
Address 641 SHUNPIKE RD CHATAM N.J
Tele. (201) 966-2600
Contractor TROTTER ELECTRIC INC.
Address 153 CEDARHURST RD.
BRICK N.J. 08723
Tele. (908) 477-4412
Lic. No. 13234
Federal Emp. No. 22-3375-386 or Social Security No. —

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 15,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[X] Elec. Plans Approved
Date: 961112
Approved by: BB

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temporary				
Constr. Serv.				
TCO				
Other				
Service				
Final				

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

C. CERTIFICATION IN LIEU OF OATH

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

TROTTER ELECTRIC STATE OF NEW JERSEY LICENSED ELECTRICAL CONTRACTOR 13234

Signature—Contractor/Seal

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO	SIZE	ITEM	FEE (Office Use Only)
25		Fixtures (1)	
31		Receptacles (2)	
6		Switches (3)	40
62		Total 1 + 2 + 3	
	___ Kw	Range	
	___ Kw	Oven(s)	
	___ Kw	Surface Unit	
	___ hp	Dishwasher	
	___ hp	Garbage Disposal	
	___ Kw	Dryer	
4	14 Kw	A/C Unit 35kw	140
		Burglar Alarms	
		Intercoms Panels	
4	Duct	Smoke Detectors	
	___ hp	Whirlpool/spa	
		Pool Bonding	
	___ hp	Pool Filter Motor	
		Pool Lights	
	___ Kw	Water Heater(s)	
	___ Kw	Central heat:	
		oil, gas or elec.	
	___ Kw	Baseboard Heat Units	
5		Thermostats	
	___ hp	Heat Pump	
	___ hp	Pump(s) 1-400w 1-150w	
2	___ Amp	Motor Control Center/~~Sub Panels~~	135
		Signs	
	___	Light Standards	
	___ hp	Motors—Fractional H.P.	
	___ hp	Motors—All Others	
	___ Kw	Transformers	
	___ Kw	Generators	
1	400 Amp	Service Entrance	150
		Other	

	Administrative Surcharge	$ 415
Paid [ ] Check # 1312	Minimum Fee	$
	DCA Training Fee	$ 12
Collected by: _____	TOTAL FEE	$ 427

U.C.C. Form F-120B RPF 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

Paid by Kennedy Mall Assoc.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 12/26/96
Date Issued
Control #
Permit # 3250-96

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 Living Well Lady
13 Kennedy Mall, Brick, NJ. 08723
Owner in Fee Living Well Lady
Address 13 Kennedy mall
Brick, NJ. 08723
Tele. (908) 262-8086
Contractor AllAmerican Contracting Corp
Address 1203 River Rd
Edgewater, NJ. 07020
Tele. (201) 943-0778
Lic. No.
Federal Emp. No. 112685260 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Rec Proposed Rec
Constr. Class. Present Proposed
Heating Systems [ ] New [✓] Existing
Type: [✓] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 1100 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date: 11/25/96
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS:

Type:	Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				12/27
TCO				
Other				
Other				
Other				1/2/97

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.

SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source
Method of Valve Supervision 156
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
3 Pull Stations		
Smoke Detectors	7	$35
Heat Detectors Duct Detectors	4	
TOTAL		
Horns & Strobes 5 - 2 Dives		
Stand Pipes		35-
Kitchen Hood Exhaust Systems		
Fire Alarm Panel - 1		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance	2	70
OTHER		

Administrative Surcharge $ 150
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-140B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

A 0181571
B 0181573

Brick

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # JAN 13 97 0 0 0 3 0 1

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

Block 673 Lot 4-5-8-23-25
Work Site Location 2770 Hooper Ave, Brick N.J.
LIVING WELL LADY
Owner in Fee Kennedy Mall Assoc.
Address 641 SHUNPIKE RD CHATAM N.J
Tele. (201) 966-2800
Contractor TROTTER ELECTRIC INC
Address 153 CEDARHURST RD.
BRICK N.J. 08723
Tele. (908) 477-4412
Lic. No. 13234
Federal Emp. No. 22-3375-386 or Social Security No. —

B. ELECTRICAL CHARACTERISTICS
Use Group Present ______ Proposed ______
[ ] Pole/Pad # ______ [ ] Temporary [ ] Other ______
Building Occupied as ______ Utility Co. ______
Est. Cost of Elec. Work $ 15,000

JOB SUMMARY (Office Use Only)
PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[X] Elec. Plans Approved
Date: 96.11.13
Approved by: RMc 23 BB

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 2/14/97
Approved By: 5433

INSPECTIONS Type: PARTIAL	Failure	Failure	Approval	Initial
Rough			1/21/97	5433 over
Temporary			2/4/97	5433
Constr. Serv.				
~~TCO~~ CEILING			1/31/97	5433
Other TRENCH			1/14/97	5433 over
Service				
Final			2/14/97	5433
Temp. Cut-in-Card Date Issued			2/14/97	5433
Final Cut-in-Card Date Issued			2/14/97	5433

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.

Matthew T Trotter
Signature—Contractor Seal

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
25		Fixtures (1)	
31		Receptacles (2)	
6		Switches (3)	
62		Total 1 + 2 + 3	40
	Kw	Range	
	Kw	Oven(s)	
	Kw	Surface Unit	
	hp	Dishwasher	
	hp	Garbage Disposal	
	Kw	Dryer	
4	14 Kw	A/C Unit 35KW	140
		Burglar Alarms	
		Intercoms Panels	
4	Duct	Smoke Detectors	
	hp	Whirlpool/spa	
		Pool Bonding	
	hp	Pool Filter Motor	
		Pool Lights	
	Kw	Water Heater(s)	
	Kw	Central heat: oil, gas or elec.	
	Kw	Baseboard Heat Units	
5		Thermostats	
	hp	Heat Pump	
	hp	Pump(s) 1-400A 1-150A	
2	Amp	Motor Control Center/~~Sub Panels~~	135
		Signs	
		Light Standards	
	hp	Motors—Fractional H.P.	
	hp	Motors—All Others	
	Kw	Transformers	
	Kw	Generators	
2	200 Amp	Service Entrance 5% upgrade	100
		Other	

Paid [ ] Check # 1312
Collected by: ______

Administrative Surcharge	$
Minimum Fee	$ 415
DCA Training Fee	$ 12
TOTAL FEE	$ 427.

pd bu

U.C.C. Form F-120B RPF 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received 12/26/96
Date Issued
Control #
Permit # 3250-96

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

Block 670 Lot 4-5-8-23-25
Work Site Location 2770 Hopper Ave, Bricktown, N.J.
Living Well Lady
Owner in Fee Kennedy Mall Associates
Address 641 Shunpike Rd, Chatam, N.J. 07928

Tele. (201) 966-2800
Contractor All American Contracting Corp
Address 1203 River Rd, Edgewater, N.J. 07020

Tele. (201) 943-0778
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 112685260 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
Interior Alteration
Bldg Not Sprinkled

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	12/26/96	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[X] CCO [ ] CCO [ ] CA
Date:
Approved By: F. Mugl

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame			1-17-97	
Insulation				
Finishes			2/14/97	
Energy				
Mechanical				
TCO				
Other			Hemoer 1-24-97	
Final				

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

(Office Use Only)
FEE
$

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $ 128,500
3. Total (1+2) $ 128,500

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: DCA TRAINING FEE $
TOTAL FEE $

U.C.C. Form F-1108 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

Living Well LADY

PLUMBING SUBCODE TECHNICAL SECTION

Change 1-8-97
Date Received
Date Issued 12/26/96
Control #
Permit # 3250_96

Change plb.

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

Block 670 Lot 4-5-8-23-25
Work Site Location 2770 Hooper Ave
Brick Kennedy Mall
Owner in Fee Kennedy Mall Associates
Address 641 Shunpike Rd
Chatham, N.J. 07928
Tele. (201) 966-2500
Contractor John Zoo Jr Plumbing & Heating Co
Address P.O. Box 4196
Brick N.J. 08723
Tele. (908) ~~732~~ 920-2684
Lic. No. 9532
Federal Emp. No. _____ or Social Security No [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size 4" Public Sewer X Private Septic _____
Water Service Size 1½ Public Water X Private Well _____
Estimated Cost of Plumbing Work $ 20,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: _____
Approved by: _____

SUBCODE APPROVAL:
[X] CO [ ] CCO [ ] CA
Approved By: _____
Date: 2-14-97

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab	1-9-97		1-10-97	
Rough			1-17-97	
Water				
Sewer			1-9-97	
Fixtures				
Gas Equipment				
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 Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
4	Water Closet	
—	Urinal/Bidet	
—	Bath Tub	
4	Lavatory	
3	Shower	
3	Floor Drain	
1	Sink	
—	Dishwasher	
1	Drinking Fountain	
—	Washing Machine	
—	Hose Bibb	
1	Water Heater	
—	Fuel Oil Piping	
X	Gas Piping	
—	Steam Boiler	
—	Hot Water Boiler	
—	Sewer Pump	
—	Interceptor/Separator	
—	Backflow Preventer	
—	Greasetrap	
—	Water Cooled A/C or Refrigeration Unit	
—	Sewer Connection	
—	Water Service Connection	
—	Active Solar System	
1	Other NEW FURNACE	

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
DCA Training Fee $ _____
Collected by: _____ TOTAL $ _____

U.C.C. Form F-130B

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

1-9-97 ① NO test
② Must cap lines under slab from old bathroom

PLUMBING SUBCODE TECHNICAL SECTION

Date Received 12/26/96
Date Issued
Control #
Permit # 3250-96

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

Block 673 Lot 4-5-8-23-25
Work Site Location 2770 Hopper Ave. Brickstown, N.J.
Living Well Lady
Owner in Fee Kennedy Mall Associates
Address 641 Shunpike Rd, Chatam, NJ. 07928

Tele. (201) 966-2800
Contractor Central Jersey Mechanical
Address P.O. Box 8476
Red Bank, N.J. 07701
Tele. (908) 530-6868
Lic. No. 9369
Federal Emp. No. 223211662 or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed X
Building Sewer Size 4" Public Sewer X Private Septic
Water Service Size 1½" Public Water X Private Well
Estimated Cost of Plumbing Work $ 30,000.00

JOB SUMMARY (Office Use *Only*)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 12-10-96
Approved by: BJC

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

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
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 record and am authorized to make this application and perform the work listed on this application.

Signature—Contractor Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO:	FIXTURE/EQUIPMENT	FEE (Office Use Only)
4	Water Closet	40
—	Urinal/Bidet	
—	Bath Tub	
4	Lavatory	40
3	Shower	30
3	Floor Drain	30
1	Sink	10
—	Dishwasher	
1	Drinking Fountain	10
—	Washing Machine	
—	Hose Bibb	
1	Water Heater	35
—	Fuel Oil Piping	
X	Gas Piping	25
—	Steam Boiler	
—	Hot Water Boiler	
—	Sewer Pump	
—	Interceptor/Separator	
—	Backflow Preventer	
—	Greasetrap	
—	Water Cooled A/C or Refrigeration *Unit*	
—	Sewer Connection	
X	Water Service Connection	
—	Active Solar System	
-1	Other New Furnace	35

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $ 255
DCA Training Fee $
Collected by: TOTAL $

PRO 204 B

UCC FORM F-130 B

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

A 0181571
B 0181573

Brick

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # JAN 13 97 0 0 0 3 0 1

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

Block 573 Lot 4-5-8-23-25
Work Site Location 2770 Hooper Ave, Brick N.J.
LIVING WELL LADY
Owner in Fee Kennedy Mall Assoc.
Address 641 Shunpike Rd Chatam N.J.

Tele. (201) 966-2800
Contractor TROTTER ELECTRIC INC.
Address 153 Cedarhurst Rd.
Brick N.J. 08723
Tele. (908) 477-4412
Lic. No. 13234
Federal Emp. No. 22-3375-386 or Social Security No. —

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 15,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[X] Elec. Plans Approved
Date: 96113
Approved by: MeKS BB

SUBCODE APPROVAL
[+CO [ ] CCO [ ] CA
Date: 2/14/97
Approved By: 5433

INSPECTIONS

Type: PARTIAL	Failure	Failure	Dates (Month/Day) Approval	Initial
Rough			1/21/97	5433
Temporary			2/4/97	5433
Constr. Serv.				
~~TCO~~ CEILING			1/31/97	5433
Other TRENCH			1/14/97	5433
Service				
Final			2/14/97	5433
Temp. Cut-in-Card Date Issued			2/4/97	5433
Final Cut-in-Card Date Issued			2/14/97	5433

over
over

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.

Matthew T Trotter
Signature—Contractor Seal

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO	SIZE	ITEM
25		Fixtures (1)
31		Receptacles (2)
6		Switches (3)
62		Total 1 + 2 + 3
	___ Kw	Range
	___ Kw	Oven(s)
	___ Kw	Surface Unit
	___ hp	Dishwasher
	___ hp	Garbage Disposal
	___ Kw	Dryer
4	14 Kw	A/C Unit 35kw
		Burglar Alarms
		Intercoms Panels
4	Duct	Smoke Detectors
	___ hp	Whirlpool/spa
		Pool Bonding
	___ hp	Pool Filter Motor
		Pool Lights
	___ Kw	Water Heater(s)
	___ Kw	Central heat:
		oil, gas or elec.
	___ Kw	Baseboard Heat Units
5		Thermostats
	___ hp	Heat Pump
	___ hp	Pump(s) 1-4000 1-150A
2	___ Amp	Motor Control Center/~~Sub Panels~~
		Signs
	___	Light Standards
	___ hp	Motors—Fractional H.P.
	___ hp	Motors—*All Others*
	___ Kw	Transformers
	___ Kw	Generators
1	~~200~~ Amp	Service Entrance 5th UPDATE
	___	Other

FEE (Office Use Only)

40
140
135
100

Administrative Surcharge	$
Minimum Fee	$ 415
DCA Training Fee	$ 12
TOTAL FEE	$ 427

Paid [ ] Check # 1312
Collected by: _____

U.C.C. Form F-120B RPF 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

pd by Kennedy Mall Assoc.

12/14/98 ② 2/4 PVC [illegible] LIGHTWEIGHT - CREATION OF STONE OK

② OFFICE (FRONT) R/W APPROVED.

③ BATH (MAN) " "

④ LOCKER (RIGHT) " "

⑤ SHOWERS TO HAVE 1 UL APPROVED

1/21 ABOVE R/W APPROVED

PLUS KNEEWALL UNDER WINDOW AND 5' TRENCH AT FRONT OF SPACE & UNDER OFFICE WINDOW

1/31/99 FILE PERMITS FOR ALL WORK

CEILING APPROVED - RW.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 12/26/96
Date Issued
Control #
Permit # 3250-96

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

Block 67 Lot 4
Work Site Location Livingwell Lady
13 Kennedy Mall, Brick, N.J. 08723
Owner in Fee Livingwell Lady
Address 13 Kennedy mall
Brick, N.J. 08723
Tele. (908) 262-8086
Contractor AllAmerican Contracting Corp
Address 1203 River Rd
Edgewater, N.J. 07020
Tele. (201) 943-0778
Lic. No.
Federal Emp. No. 112685260 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Rec Proposed Rec occupancy
Constr. Class. Present Proposed
Heating Systems [ ] New [✓] Existing
Type: [✓] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 1,100 [ ] Other

70 ~~330~~ Casper Act Letter

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date: 11/25/96
Approved by:
SUBCODE APPROVAL:
[X] CO [ ] CCO [ ] CA
Date: 2/21/97
Approved by:

INSPECTIONS: Type:	Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test			2/21/97	
Mechanical			2/21/97	
TCO				
Other Temper		tell test 1/31/97	2-14-97	
Other				
Other OT				

(over)

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

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
3 Pull Stations		
Smoke Detectors	7	~~45~~ 35
Heat Detectors Duct Detectors	4	
TOTAL		
Horns + Strobes 5 - 7	2 Dives	
Stand Pipes		35-
Kitchen Hood Exhaust Systems		
Fire Alarm Panel - 1	5	
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance	2.	70
OTHER		

Administrative Surcharge $ 50
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-140B 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

2-14-97 Childrens Room to be closed till pull Sta & Strobe Lites are installed. in Play Room need Panic Bar in Rear Exit

OK Temp. for 7 Days, till Friday Feb 21 1997. OK JE

Letter att from Alarm Co. JE

2-21-97 Abated JE

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: October 28, 1996 1996 - 1544

Block 670 Lot 4 Zone R-3, H.D.

Property Address: 2770 Hooper Avenue

Owner: Kennedy Mall Associates (Phone): 201-966-2800

Applicant: All American Constracting Corp (Phone): 201-943-0778

Use: Vacant Retail Unit in Kennedy Mall

Proposed Construction (if any): Interior alterations for change of use to fitness center, "Living Well Lady", 7,176 square feet.

Conditions: Abridged site plan approved by Planning Board. Resolution No. ABR-171-CU-9/96 approved October 24, 1996. Maximum occupancy permitted - 70 persons.

Please note that a Construction Permit, as well as a Zoning Permit, must be obtained prior to any construction. You will be notified by the Division of Inspections to pick up and pay for your entire Construction Permit.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which 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

TOWNSHIP OF BRICK
DEPARTMENT OF INSPECTIONS

OCCUPANCY

OCCUPANT LOAD 10 MAX
LIVE LOAD _____ P. S. F.
FIRE GRADING _____ HOURS
USE GROUP R-3

TOWNSHIP OF BRICK

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

Joseph C. Scarpelli, Mayor

Township Council:
Michael A. Thulen, President
Stephen C. Acropolis
Martin J. Anton
Victor Cantillo
Helen Fayad
Lee Hartman
Mary Lou Powner

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(908) 262-1048

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 10/28/96

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 670 LOT 4 SITE ADDRESS 2770 Hooper Ave

TYPE OF SITE Commercial (Residential/Commercial) TYPE OF BUSINESS Retail

APPLICANT Kennedy Mall CITY & STATE Brick, NJ

☑ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

$ 122,000.

FRM/BCH

Frederick R. Millman, CTA, Tax Assessor

12/29/96

Date

☐ Please review the attached application for a final assessed value for the construction at the above referenced site:

$ _____

Frederick R. Millman, CTA, Tax Assessor

Date

CERTIFICATE OF COMPLIANCE

BLOCK 670 W LOT 4 SITE ADDRESS 2770 Hooper Ave.

TYPE OF SITE Commercial TYPE OF BUSINESS Retail
Residential/Commercial

APPLICANT Kennedy Mall PHONE NUMBER 201-963-2500

APPLICANT ADDRESS _____ CITY & STATE _____

CASE # _____ NAME OF BUSINESS Livin' Well Lady

INCLUSIONARY DEVELOPMENT

☐ Affordable

Fee Required _____ Date _____

Down Payment _____ Date _____

Balance _____ Date _____

Pd. in Full _____ Date _____

☐ Market Rate — No Fee Required

MANDATORY DEVELOPER FEES

☐ Residential is .005%

☑ Commercial is .01%

Estimated Assessment: $ 122,000.00 Date 10/29/96

Required Deposit on Estimate $ 610.00 Date 11/1/96

Check # 1714 Receipt # 6650

Actual Assessment: $ 122,000.00 Date 2/27/97

Actual Required Fee: $ 1220.00

Minus Deposit of Estimate $ 610.00

Balance Due $ $610.00

Amount Paid in Full $ ~~610.00~~ 1220.00 Date 11-6-97

Check # 1542 Receipt # 9992

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.

Carol A. Wolfe
Affordable Housing Administrator

TOWNSHIP OF BRICK

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

Joseph C. Scarpelli, Mayor

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Martin J. Anton
Victor Cantillo
Helen Fayad
Lee Hartman
Mary Lou Powner

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(908) 262-1048

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 10/28/96

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 670 LOT 4 SITE ADDRESS 2770 Harper Ave

TYPE OF SITE Commercial (Residential/Commercial) TYPE OF BUSINESS Retail

APPLICANT Kennedy Mall CITY & STATE Brick . NJ

☑ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

$ 122,000.

FRM/BCH

Frederick R. Millman, CTA, Tax Assessor

12/29/96

Date

☑ Please review the attached application for a final assessed value for the construction at the above referenced site:

$ 122,000

Frederick R. Millman, CTA, Tax Assessor

2/24/97

Date

TELEFAX

FAX TO

DATE 11/21/96

FAX NUMBER

ATTENTION: NAME BUILDING PLAN REVIEW

COMPANY BRICK TOWNSHIP

CITY BRICK, NJ.

FROM: NAME HENRY TRIMM

TRIMM & ASSOCIATES ARCHITECTS

SUBJECT LIVINGWELL LADY FITNESS CENTER
2770 HOOPER AVE
CHANGES TO PLAN LETTER

PAGES TO FOLLOW: 2

DRAWINGS TO FOLLOW:

REMARKS

TRIMM & ASSOCIATES ARCHITECTS

FAX (000) 000-0000
TEL (000)000-0000

TRIMM &
ASSOCIATES
ARCHITECTS

AA0002672

November 21, 1996

Building Department
Building Plan Processing
Brick Township
Municipal Building
401 Chambers Bridge Road
Brick, NJ

RE: LivingWell Lady Fitness Center
2770 Hooper Avenue
Kennedy Mall
Plan Review Comments

Gentlemen;

Per your plan review comments on the above referenced project, the following requested revisions and additions will be made to the construction plans and constructed on the site:

BUILDING REVIEW

1- Play Room door swing will be changed to swing out of the room.

2- Furnace data - No furnace will be used.

FIRE REVIEW

1- Play Room door swing will be changed to swing out of the room.

2- Seven additional smoke detectors will be supplied and located in the main aerobics area, locker room, vanity, play room, storage and utility room.

3- Furnace data - No furnace will be used.

4- Pull Stations - Three pull stations will be located at the exit doors supplied with horns and strobes. four duct detectors and five strobe lights will be installed controled by a Fire Alarm Panel.

4904-B S.W. 72nd AVENUE / MIAMI, FLORIDA 33155 / (305) 666-2898 /FAX (305) 665-5498

Building Plan Processing
Brick Township
LivingWell Lady Fitness Center
November 21, 1996

FIRE REVIEW (continued)

5- Fire Permit Application will be supplied to you on Friday November 21, 1996 by the Plan Processor.

PLUMBING

1- Play Room - The play room toilet will be supplied with children fitted and heigth toilet fixtures. Also a diper changing station (fold down type) will be furnished and installed in the room.

2- Showers - Type "D" Assembly Occupancy; Zoning Department and Owners Occupancy Letter established a maximum occupancu of 70 persons.

The composition of this occupancy is as follows:

Employees	10
Children	15
Customers	45
Total	12

Showers required 45/ 15 = 3

Showers provided 3

If you have and question on the above please call or fax me at the numbers listed on the letterhead.

Sincerely,

Henry O. Trimm, AIA/NCARB
Architect
Lic. No. 11987

BOCA®
PLAN REVIEW RECORD

Valuation: _____ Plan Review #. _____

Fee: _____ Date _____

NATIONAL BUILDING CODE
(All Articles except 24, 28, 29, 30, 31 and 32)

JURISDICTION BRICK TWP.
(City, County, Township, etc.)

BUILDING LOCATION 2770 Hooper Kennedy MALL
(Street address)

BUILDING DESCRIPTION LIVING WELL LADY

REVIEWED BY JK 11/13/96

Numerals indicated in parenthesis are applicable code sections of the *1987 BOCA National Building Code.*

CORRECTION LIST

No.	Bldg. Review DESCRIPTION	Code Section
	DOOR SWING FOR P/Rroom 1071.4	
	FURNACE INFO-	
	TRIED TO 11/20 # UNAVAILABLE FAX CELLULAR # OF	

The plan review accomplished as indicated in this record is limited to those code sections specifically identified herein. NOTE: In order that we might develop other programs and provide additional services of benefit to the Code Administration profession, please re-order additional copies of this form from:

BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.
4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60477-5795

BOCA®
PLAN REVIEW RECORD

ıation: _____

Plan Review #: _____

Date 11/13/96

NATIONAL BUILDING CODE
(All Articles except 24, 28, 29, 30, 31 and 32)

ISDICTION BRICK TWP.
(City, County, Township, etc.)

LDING LOCATION 2770 ~~Brook~~ Hooper Ave.
(Street address)

.DING DESCRIPTION Kennedy Meth. Assoc.

IEWED BY _____

Numerals indicated in parenthesis are applicable code sections of the *1987 BOCA National Building Code.*

CORRECTION LIST

No.	Fire Review DESCRIPTION	Code Section
1.	~~Play Room Door must Swing means of Egress~~	
2.	S.D.	
3.	~~Need Information Emergency~~	
4.	~~Pull Sta. at Exit Doors~~	
5.	~~Storage Room Need Sprinklers~~	
5.	Need Fire Test Date	

BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.
4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60477-5795

SIZING FOR WATER AND SEWER SERVICES

Property Owner Living Well Lady Date 12-10-96

Property Address 2770 Hooper Ave Block 673 Lot 4.25

Zoning _____ Use Group _____

Contractor Central Jersey Mech License No. Registration 9369

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu) Water Units	(dfu) Drainage Units
1. Water Closet	4	(5) 20	( )
2. Lavatory	4	(2) 8	( )
3. Bath Tub		( )	( )
4. Shower Stall	3	(4) 12	( )
5. Kitchen Sink		( )	( )
6. Service Sink	1	(3) 3	( )
7. Laundry Tray		( )	( )
8. Dishwasher		( )	( )
9. Washing Machine		( )	( )
10. Urinal		( )	( )
11. Floor Drain		( )	( )
12. Drinking Fountain	1	( ) .25	( )
13. Air Conditioner (water cooled)		( )	( )
14. Dental Unit		( )	( )
15. Lawn Sprinkler No. of Heads		( )	( )
16. Fire Sprinkler No. of Heads		( )	( )
17. _____		( )	( )
18. _____		( )	( )

Total 43

Gallons per minute 32.6

Size of Service 1 1/4"

Date: 12-10-96

Approved: _____
Brick Township Plumbing Inspector

TOWNSHIP OF BRICK

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

Planning Board
(908) 262-1045
Fax: (908) 920-4850

October 24, 1996

Kennedy Mall Associates
641 Shunpike Road
Chatham, N.J. 07928

Re: ABR-171-CU-9/96
Kennedy Mall Associates
Block 671, Lot 4
7,176 s.f. Retail to Women's
Fitness Center
Maximum Occupancy-70 persons

Gentlemen:

Attached is a copy of the report from the Bureau of Fire Safety for the above application. Mr. Batzel has advised that you have submitted a plan indicating the location of the dumpters as requested. Since you have resolved the outstanding items in his report of October 3, 1996 to his satisfaction, your request for abridged site plan approval for the above change of use is approved.

As stated in the attached report from Michael P. Fowler, Municipal Planner, any increase in the maximum permitted occupancy load of 70 persons will require an amended site plan with a variance for parking.

Yours truly,

E. Joan Kull

E. Joan Kull, Secretary

Att.
cc: Michael P. Fowler, AICP/PP
Zoning Officer
Division of Inspections

BRICK TOWNSHIP
BUREAU OF FIRE SAFETY

500 Herbertsville Road
Brick Township, New Jersey 08724
(908) 458-4100
FAX: (908) 458-4153

October 22, 1996
District 1

Office of the Planning Board
401 Chambers Bridge Road
Brick, New Jersey 08723

BLOCK: 670 LOT: 4,5,8,23,25 OWNER/APPLICANT: Kennedy Mall Assoc/Sal Davino
641 Shunpike Road
B.T.P.B. #: ABR-171 Chatham, New Jersey 07928

ENGINEER/FILE: TRIMM Associates

SITE PLAN FEE: Revision of 10-22-96

LOCATION: Existing Kennedy Mall - Living Well Lady

PROPOSED USE/DESCRIPTION: Proposed 7,176 s.f. "Ladies Only, FITNESS CENTER", to take over existing space adjoining Cost Cutters. Hydrants and fire lanes on site. NOTE: Occupant Load - to be limited to 70 maximum, as per architect and posted as same.

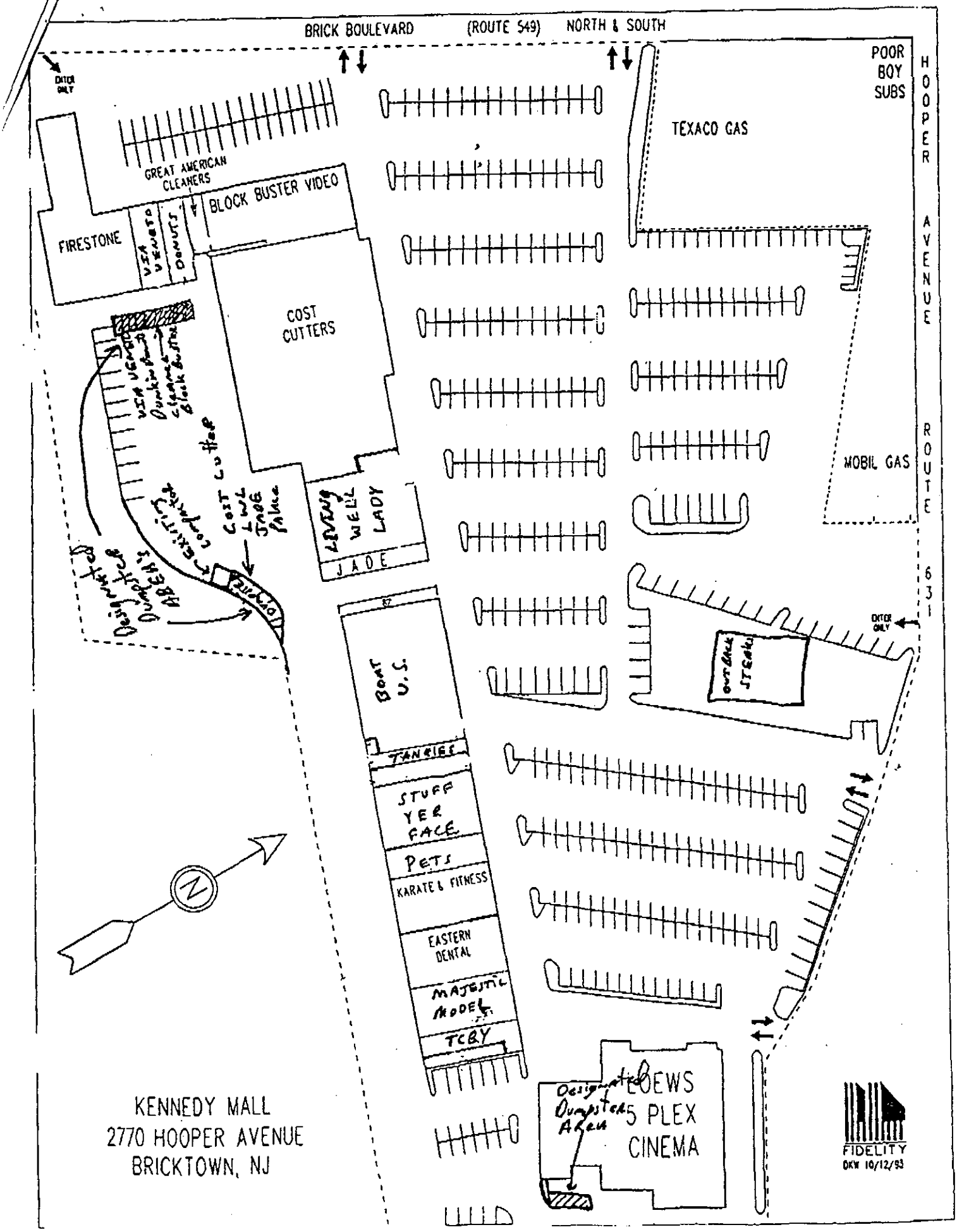
The above referenced revised abridged site plan has been reviewed and accepted based on the noted trash dumpster locations, indicated on the attached drawing, dated 10-22-96 and also with the below condition.

1. Use must meet all applicable fire codes as required by the Building Department and Fire Sub-Code Official. This review is for abridged site requirements and comment only

Very Truly Yours,

Kevin C. Batzel
Bureau Chief/Fire Official

attachment
KCB/rlf


BRICK BOULEVARD (ROUTE 549) NORTH & SOUTH
ENTER ONLY
POOR BOY SUBS
TEXACO GAS
HOOPER AVENUE ROUTE 631
GREAT AMERICAN CLEANERS
BLOCK BUSTER VIDEO
FIRESTONE
USA VIDEO
DONUTS
COST CUTTERS
MOBIL GAS
LEVENG WEDL LADY
JADE
BOAT U.S.
TANNING
STUFF YER FACE
PETS
KARATE & FITNESS
EASTERN DENTAL
MAJESTIC MODELS
TCBY
LOEWS 5 PLEX CINEMA
OUTBACK STEAK
N
KENNEDY MALL
2770 HOOPER AVENUE
BRICKTOWN, NJ
FIDELITY
DKW 10/12/93

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

Joseph C. Scarpelli, Mayor

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Helen Fayad
Lee Hartman
Mary Lou Powner

Department of Administration & Finance

Office of Land Use Management
Michael P. Fowler, AICP/PP
Municipal Planner
(908) 262-1042
Fax (908) 262-8954

TO: Brick Township Planning Board

FROM: Michael P. Fowler,AICP/PP-Office of Land Use Management MPF

DATE: October 2, 1996

RE: Abridged Site Plan ABR-171-CU-9/96
Applicant/Owner: Kennedy Mall Associates

SECOND REVIEW

In reviewing the above referenced application we find the following:

Existing Conditions:

The subject site is Block 670, Lots 4,5,8,23 & 25, a 13.19 acre site containing Kennedy Mall, including Sony Theaters and Outback Steakhouse, and is located in the B-3 zone.

Proposal:

The applicants are proposing a change of use from retail to a women's fitness facility. The unit will be 7,176 sq ft and will occupy the Karin's Kurtains unit as well as part of the Cost Cutter's unit. The applicant will restrict the total occupany load to 70 people.

Ordinance Compliance:

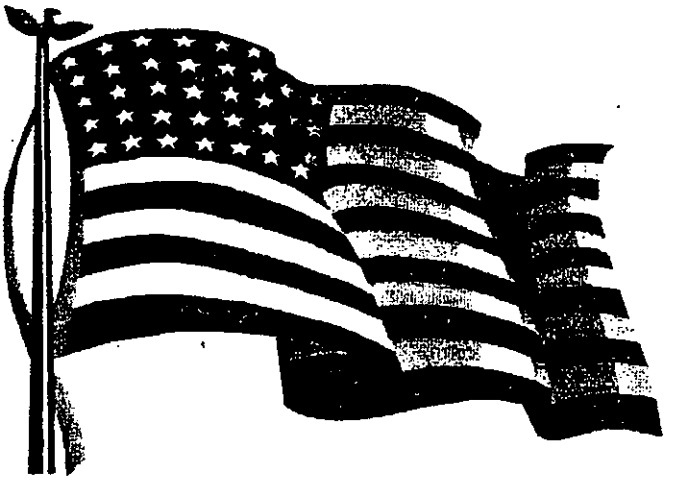
Item	Ordinance	Proposal
Use	Must be permitted conforming	Permitted & Conforming
Variance	None may be required	None required
Parking	No additional required	No additional required for maximum occupancy of 70 persons

Internal Driveways & Firelanes	No relocation or alteration	No reloaction or alteration
Operating Hours	No increase	Existing 10 A.M. - 9 P.M. Proposed 7 A.M. - 9 P.M.
Buffer	No additional required/ no intrusion or reduction	No additional required/ no intrusion or reduction
Notice	Must be given to property owners within 200 feet	Notice sent 9/18/96
Property Maintenance & other codes	Must be fully complied with	No violations pending
Taxes/ Assessments	Must not be due or delinquent	Taxes are paid to date
Previous Approvals	Must be in full compliance	Construction is currently underway in compliance with most recent approval

Recommendations:

Based on Ordinance compliance this application may be approved.

The applicant should be aware that any increase in the maximum permitted occupancy load will require an amended site plan with a variance for parking.



ALL AMERICAN CONTRACTING CORP.

1203 River Road, Edgewater, NJ 07020

201-943-0778 201-943-0424 - Fax

Date: September 24, 1996

Number of pages including cover sheet: 4

To:

Allison

BRICK TOWN BUILDING DEPARTMENT

Phone: 908-262-1028

Fax phone: 908-262-8954

CC:

From:

Harry Royle

All American Contracting Corp.

1203 River Road

Edgewater, NJ 07020

Phone: 201-943-0778

Fax phone: 201-943-0424

REMARKS: ☐ Urgent ☐ For your review ☒ Reply ASAP ☐ Please comment

TOWNSHIP OF BRICK

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

Allison
262 1028

Department of Administration & Finance
Office of Land Use Management
Michael P. Fowler, AICP/PP
Municipal Planner
(908) 262-1042
Fax: (908) 920-4650

FAX CORRESPONDENCE

(908) 262-8954

DATE: 09-23-96

To Fax Number: 201-943-0424 Pages to Follow: 2

Attention: Jim Layel - All American Contracting Corp.

From: Allison - Brick Twp Bldg. Dept.

Message: Pls. fill out form where checked and fax back to my attention - 908-262-8954. #1 - Fill out Bldg. Characteristics and description of Bldg. Use. I apologize for any inconvience and thank-you for your co-operation.

!!

TOWNSHIP OF BRICK

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

Department of Administration & Finance

Office of Land Use Management
Michael P. Fowler, AICP/PP
Municipal Planner
(908) 262-1042
Fax (908) 262-8954

OK 10/28 SK

September 25, 1996

Harry Royle
All American Contracting Corporation
1203 River Road
Edgewater, NJ 07020

RE: Block 675, Lot 4
2770 Hooper Avenue - Kennedy Mall
Zoning Permit Application - Living Well Lady

Dear Mr. Royle:

Your application for a zoning permit for health club on the referenced property is denied because in order to change the use of the part of the building from a retail store, a site plan must first be submitted to and approved by the Planning Board, as per Section 190-240 of the Township Code.

Application forms can be obtained from E. Joan Kull, the Board Secretary.

Very truly yours,

Sean Kinnevy

Sean Kinnevy
Zoning Officer

CC: Scott R. MacFadden, Business Administrator
Michael P. Fowler, AICP/PP, Municipal Planner
Raymond S. Korkowski, Acting Construction Official
E. Joan Kull, Planning Board

TOWNSHIP OF BRICK

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

Planning Board
(908) 262-1045
Fax: (908) 920-4850

September 23, 1996

Kennedy Mall Associates
641 Shunpike Road
Chatham, N.J. 07928

Re: ABR-171-CU-9/96
Kennedy Mall Associates
Block 671, Lot 4

Gentlemen:

After administrative review of your application, it has been determined that it does not qualify for abridged site plan approval because of insufficient parking. Attached is a copy of the report from Michael P. Fowler, Municipal Planner.

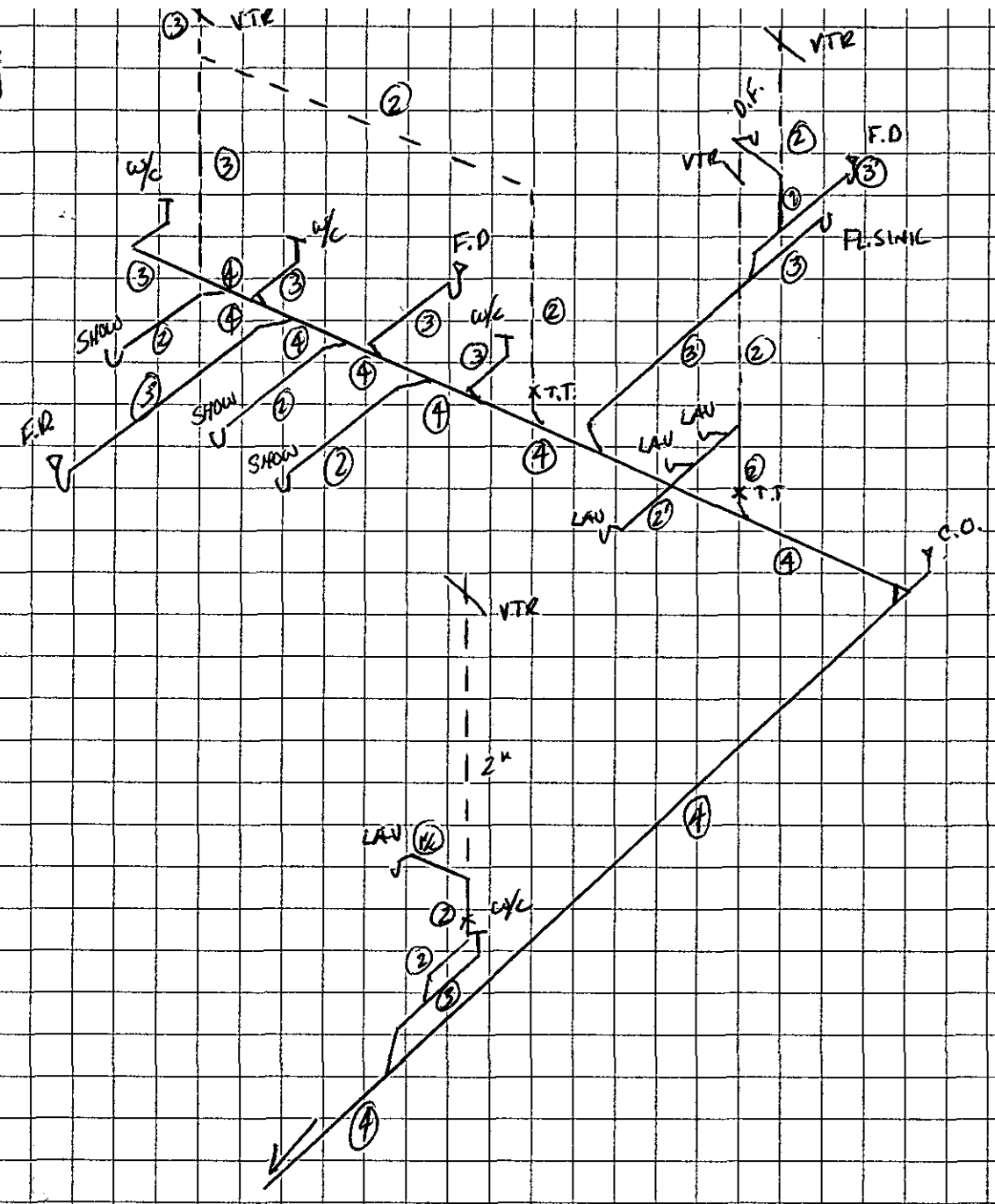
Based upon this determination, site plan approval will be required. Your application fee, minus any charges, can be applied to any future site plan application. Since the Bureau of Fire Safety check was not processed it is being returned to you.

Yours truly,

E. Joan Kull

E. Joan Kull, Secretary

Att.
cc: Michael P. Fowler, AICP/PP
Zoning Officer
Division of Inspections



BLK 673
LT. 4-5-8-23-25
2770 HOOPER AVE
KENNEDY MALL
LIVINGWELL LADY

Applicable to Ordinance 728-92
This form must be handed in with permit application or a permit will not be issued.

TOWNSHIP OF BRICK

2720 Hooper Ave, Bricktown, N.J.
Work Site Address Block Lot

Kennedy Mall Associates 641 Shunpike Rd, Chatam, N.J. 201-966-2800
Owner's Name, Address, Phone

All American Contracting Corp. 1203 River Rd, Edgewater, NJ 07020 - 201-943-0778
Contractor's Name, Address, Phone

Construction Interior Alteration for Health Club
Describe type (Single-family home, etc.)

Demolition Interior walls, carpet etc.
Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material Approx 30 cubic yards
Sheet Rock, Carpet, Store fixtures

Name, address and phone of party responsible for removal of debris:
Mid-Jersey Disposal, N. Mainstore Road, Waretown NJ 08758

Size of dumpster: 30 CUBIC YARD CONTAINER

Destination of discarded debris: OCEAN COUNTY LANDFILL, MANCHESTER, NJ

Hauler's DEP Permit No.: #222320477

**Note: Any recyclable material, including, but not limited to: corrugated cardboard, vegetative waste, concrete, asphalt, clean wood, etc., must be delivered to an approved recycling center, and receipts provided to the Township of Brick along with tipping receipts for non-recyclable material.

Generator's Certification: Under penalty of criminal and civil prosecution, for the making or submissin of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are

RECEIVED
SEP 19 1996
DIV. OF INSPECTION

RECEIVED
SEP 19 1996
DIV. OF INSPECTION

BLOCK 673 LOT 4-5-8-23-25 ADDRESS (SITE) 2770 Hooper Ave. PERMIT NO.

Living Shell Lady

CONSTRUCTION PERMIT APPLICATION

OFFICIAL COPY

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

I. IDENTIFICATION

1. Proposed Work-site at: 2770 Hooper Ave, Bricktown, NJ.
2. Name of Owner in Fee: Kennedy Mall Associates Tel. (201) 966-2800
   Address 641 Shrewsbury Rd, Chatham, N.J.
   (street) (municipality) (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: All American Contracting Corp Tel. (201) 943-0778
   Address 1203 River Rd, Edgewater, N.J. 07020
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. 11268-5260 Social Security No. _____
5. Architect or Engineer Henry O. Trimm AIA Tel. (305) 666-2898
   Address 4904-B S.W. 72nd Ave/Miami, FLA. 33155
6. Responsible Person in Charge of Work Harry Royle Tel. (201) 943-0778

V. FEE SUMMARY (for office use only)

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

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ft.	
3. Area—Largest Floor sq. ft.	
4. New Building Area sq. ft.	
5. Volume of New Structure cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ft.	
10. Wetlands yes sq. ft. / no	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

	Est. Cost
1. ☐ Minor work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ Alteration	70,000
6. ☐ Fire Protection	
7. ☐ Plumbing	36,000
8. ☐ Electrical	15,000
9. ☐ Elevator Devices	
10. ☐ Asbestos Abatement	
11. ☐ Demolition	7,500
TOTAL COSTS	128,500

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
WJP							

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
4. ☐ Refrigeration Systems
7. ☐ Sprinklers
5. ☐ Cross-Connections/Backflow
8. ☐ Smoke Control Systems in Open Malls

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction _____
After Construction _____
Net gain or loss _____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:

TOWNSHIP OF BRICK

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

Department of Administration & Finance
Office of Land Use Management
Michael P. Fowler, AICP/PP
Municipal Planner
(908) 262-1042
Fax: (908) 920-4850

FAX CORRESPONDENCE

(908) 262-8954

DATE: 09-23-96

To Fax Number: 201-943-0424 Pages to Follow: 2

Attention: Jim Loyal - All American Contracting Corp.

From: Allison - Brick Twp Bldg. dept.

Message: P/S - fill out form where checked and fax back to my attention - 908-262-8954. Also - fill out Bldg. characteristics and description of Bldg. Use. I apologize for any inconvience and thank-you for your co-operation.

!!

Please type or
PRINT NEATLY

TOWNSHIP OF BRICK
ZONING PERMIT APPLICATION
NONRESIDENTIAL PROPERTIES
MULTIFAMILY PROPERTIES

Applicant's Name and Address_____

_____Phone_____

Owner's Name and Address_____

_____Phone_____

Property Address_____Block_____Lot_____

Existing or most recent use_____

Proposed use_____

Proposed construction_____

Check and give dates of prior approvals:

Abridged site plan___. Resolution No._____. Date_____.

Minor site plan___. Resolution No._____. Date_____.

Full site plan____. Resolution No._____. Date_____.

Subdivision exemption___. Resolution No._____. Date_____.

Minor subdivision___. Resolution No._____. Date_____.

Major subdivision___. Resolution No._____. Date_____.

Zoning Board of Adjustment___. Planning Board___. Other_____.

Additional information_____

_____

NOTE: All maps must be signed before a zoning permit can be issued.

If no Board approval is required a plot plan must be submitted which shows all existing and proposed structures and setbacks. Proposals for signs must show all sign dimensions, area, clearance from ground, location and wording. Wall signs must show location on building.

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_____. Date_____.

Received by zoning office: Date_____. Complete___. Incomplete_____.

TOWNSHIP OF BRICK

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

Planning Board
(908) 262-1045
Fax: (908) 920-4850

October 24, 1996

Kennedy Mall Associates
641 Shunpike Road
Chatham, N.J. 07928

Re: ABR-171-CU-9/96
Kennedy Mall Associates
Block 671, Lot 4
7,176 s.f. Retail to Women's Fitness Center
Maximum Occupancy-70 persons

Gentlemen:

Attached is a copy of the report from the Bureau of Fire Safety for the above application. Mr. Batzel has advised that you have submitted a plan indicating the location of the dumpters as requested. Since you have resolved the outstanding items in his report of October 3, 1996 to his satisfaction, your request for abridged site plan approval for the above change of use is approved.

As stated in the attached report from Michael P. Fowler, Municipal Planner, any increase in the maximum permitted occupancy load of 70 persons will require an amended site plan with a variance for parking.

Yours truly,

E. Joan Kull

E. Joan Kull, Secretary

Att.
cc: Michael P. Fowler, AICP/PP
Zoning Officer
Division of Inspections

BRICK TOWNSHIP
BUREAU OF FIRE SAFETY

500 Herbertsville Road
Brick Township, New Jersey 08724
(908) 458-4100
FAX: (908) 458-4153

October 22, 1996
District 1

Office of the Planning Board
401 Chambers Bridge Road
Brick, New Jersey 08723

BLOCK: 670 LOT: 4,5,8,23,25 OWNER/APPLICANT: Kennedy Mall Assoc/Sal Davino
641 Shunpike Road
B.T.P.B. #: ABR-171 Chatham, New Jersey 07928

ENGINEER/FILE: TRIMM Associates

SITE PLAN FEE: Revision of 10-22-96

LOCATION: Existing Kennedy Mall - Living Well Lady

PROPOSED USE/DESCRIPTION: Proposed 7,176 s.f. "Ladies Only, FITNESS CENTER", to take over existing space adjoining Cost Cutters. Hydrants and fire lanes on site. NOTE: Occupant Load - to be limited to 70 maximum, as per architect and posted as same.

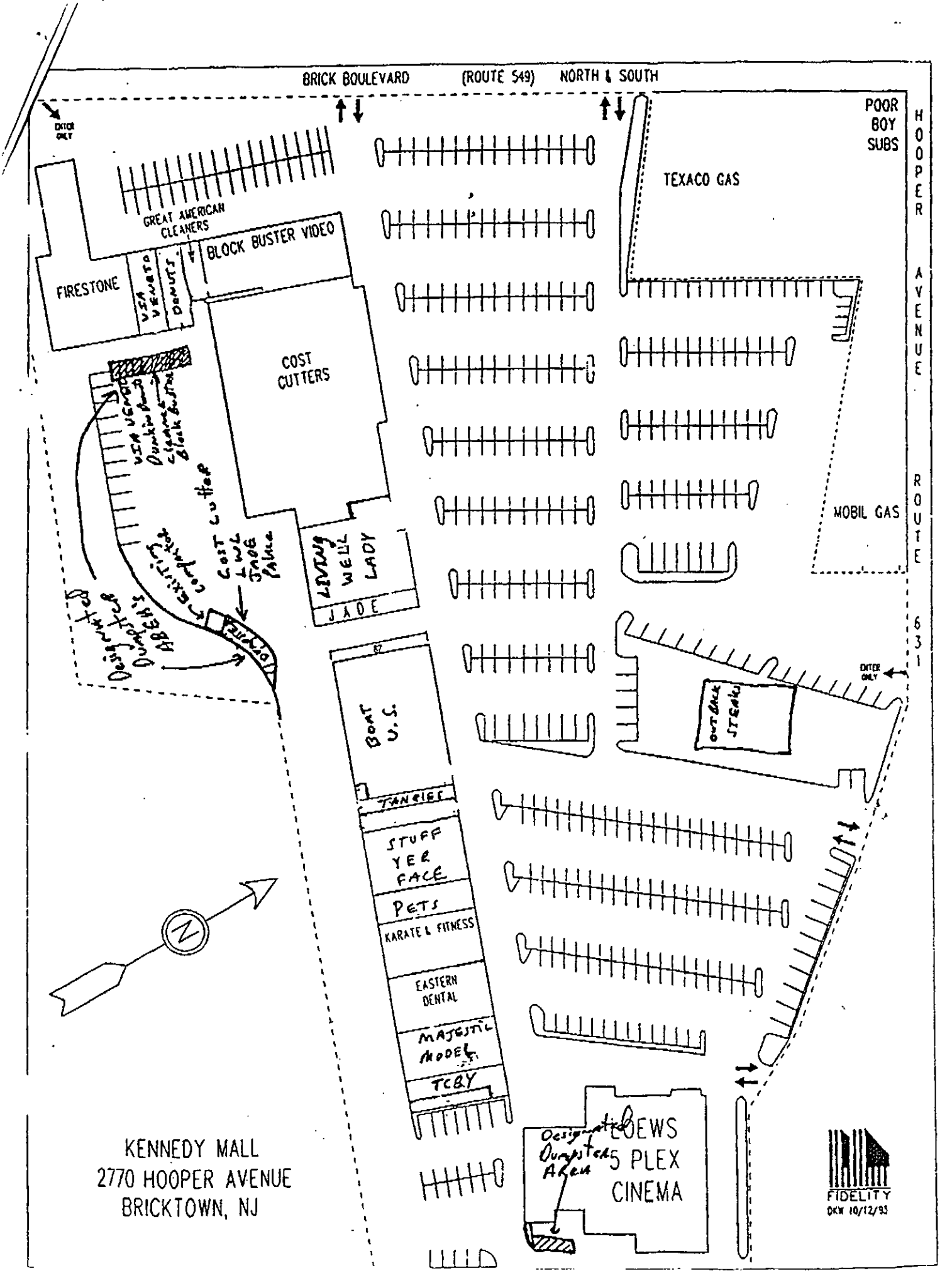
The above referenced revised abridged site plan has been reviewed and accepted based on the noted trash dumpster locations, indicated on the attached drawing, dated 10-22-96 and also with the below condition.

1. Use must meet all applicable fire codes as required by the Building Department and Fire Sub-Code Official. This review is for abridged site requirements and comment only

Very Truly Yours,

Kevin C. Batzel
Bureau Chief/Fire Official

attachment
KCB/rlf


BRICK BOULEVARD (ROUTE 549) NORTH & SOUTH
ENTER ONLY
GREAT AMERICAN CLEANERS
BLOCK BUSTER VIDEO
FIRESTONE
USA VENETO
DONUTS
COST CUTTERS
POOR BOY SUBS
TEXACO GAS
HOOPER AVENUE ROUTE 631
MOBIL GAS
LOVING WELL LADY
JADE
BOAT U.S.
TANGIES
STUFF YER FACE
PETS
KARATE & FITNESS
EASTERN DENTAL
MAJESTIC MODELS
TCBY
OUT BACK STEAKS
ENTER ONLY
N
Designated Dumpsters Area
LOEWS 5 PLEX CINEMA
KENNEDY MALL
2770 HOOPER AVENUE
BRICKTOWN, NJ
FIDELITY
DKW 10/12/93

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

Joseph C. Scarpelli, Mayor

Township Council:
Michael A. Thulen, President
Stephen C. Acropolis
Martin J. Anton
Victor Cantillo
Helen Fayad
Lee Hartman
Mary Lou Powner

Department of Administration & Finance

Office of Land Use Management
Michael P. Fowler, AICP/PP
Municipal Planner
(908) 262-1042
Fax (908) 262-8954

TO: Brick Township Planning Board

FROM: Michael P. Fowler,AICP/PP-Office of Land Use Management MPF

DATE: October 2, 1996

RE: Abridged Site Plan ABR-171-CU-9/96
Applicant/Owner: Kennedy Mall Associates

SECOND REVIEW

In reviewing the above referenced application we find the following:

Existing Conditions:

The subject site is Block 670, Lots 4,5,8,23 & 25, a 13.19 acre site containing Kennedy Mall, including Sony Theaters and Outback Steakhouse, and is located in the B-3 zone.

Proposal:

The applicants are proposing a change of use from retail to a women's fitness facility. The unit will be 7,176 sq ft and will occupy the Karin's Kurtains unit as well as part of the Cost Cutter's unit. The applicant will restrict the total occupany load to 70 people.

Ordinance Compliance:

Item	Ordinance	Proposal
Use	Must be permitted conforming	Permitted & Conforming
Variance	None may be required	None required
Parking	No additional required	No additional required for maximum occupancy of 70 persons

Internal Driveways & Firelanes	No relocation or alteration	No reloaction or alteration
Operating Hours	No increase	Existing 10 A.M. - 9 P.M. Proposed 7 A.M. - 9 P.M.
Buffer	No additional required/ no intrusion or reduction	No additional required/ no intrusion or reduction
Notice	Must be given to property owners within 200 feet	Notice sent 9/18/96
Property Maintenance & other codes	Must be fully complied with	No violations pending
Taxes/ Assessments	Must not be due or delinquent	Taxes are paid to date
Previous Approvals	Must be in full compliance	Construction is currently underway in compliance with most recent approval

Recommendations:

Based on Ordinance compliance this application may be approved.

The applicant should be aware that any increase in the maximum permitted occupancy load will require an amended site plan with a variance for parking.

TRIMM & ASSOCIATES ARCHITECTS

September 30, 1996

Building and Zoning Officials
Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

RE: Occupancy Load
Proposed LivingWell Lady Fitness Center
Kennedy Mall, Blk. 671, Lot 4
Brick, New Jersey

Dear Sir:

The Occupancy Load calculations shown on S-1 under Project Data are being revised to show a maximum occupancy of 70 people.

I hope the above is sufficient for your purposes.

Sincerely,

Henry O. Trimm, AIA/NCARB

4904-B S.W. 72nd AVENUE/MIAMI, FLORIDA 33155/(305) 666-2898/FAX (305) 665-5498

TELEFAX

FAX TO

DATE 11/21/96

FAX NUMBER

ATTENTION: NAME BUILDING PLAN REVIEW

COMPANY BRICK TOWNSHIP

CITY BRICK, NJ.

FROM: NAME HENRY TRIMM

TRIMM & ASSOCIATES ARCHITECTS

SUBJECT LIVINGWELL LADY FITNESS CENTER
2770 HOOPER AVE
CHANGES TO PLAN LETTER

PAGES TO FOLLOW: 2

DRAWINGS TO FOLLOW:

REMARKS

TRIMM & ASSOCIATES ARCHITECTS

FAX (000) 000-0000
TEL (000)000-0000

TRIMM &
ASSOCIATES
ARCHITECTS

AA0002672

November 21, 1996

Building Department
Building Plan Processing
Brick Township
Municipal Building
401 Chambers Bridge Road
Brick, NJ

RE: LivingWell Lady Fitness Center
2770 Hooper Avenue
Kennedy Mall
Plan Review Comments

Gentlemen;

Per your plan review comments on the above referenced project, the following requested revisions and additions will be made to the construction plans and constructed on the site:

BUILDING REVIEW

1- Play Room door swing will be changed to swing out of the room.

2- Furnace data - No furnace will be used.

FIRE REVIEW

1- Play Room door swing will be changed to swing out of the room.

2- Seven additional smoke detectors will be supplied and located in the main aerobics area, locker room, vanity, play room, storage and utility room.

3- Furnace data - No furnace will be used.

4- Pull Stations - Three pull stations will be located at the exit doors supplied with horns and strobes. four duct detectors and five strobe lights will be installed controled by a Fire Alarm Panel.

4904-B S.W. 72nd AVENUE / MIAMI, FLORIDA 33155 / (305) 666-2898 /FAX (305) 665-5498

Building Plan Processing
Brick Township
LivingWell Lady Fitness Center
November 21, 1996

FIRE REVIEW (continued)

5- Fire Permit Application will be supplied to you on Friday November 21, 1996 by the Plan Processor.

PLUMBING

1- Play Room - The play room toilet will be supplied with children fitted and heigth toilet fixtures. Also a diper changing station (fold down type) will be furnished and installed in the room.

2- Showers - Type "D" Assembly Occupancy; Zoning Department and Owners Occupancy Letter established a maximum occupancu of 70 persons.

The composition of this occupancy is as follows:

Employees	10
Children	15
Customers	45
Total	12

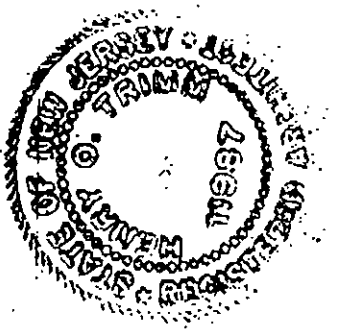
Showers required 45/ 15 = 3

Showers provided 3

If you have and question on the above please call or fax me at the numbers listed on the letterhead.

Sincerely,

Henry O. Trimm, AIA/NCARB
Architect
Lic. No. 11987



GA DYNAMICS
SECURITY SYSTEMS, INC.
423 UNION AVENUE • MIDDLESEX, N.J. 08846 • (908) 469-5551 • FAX (908) 469-7048

February 13, 1997

Mr. Anthony Davino
Kennedy Mall Associates
641 Shunpike Road
Chatham, N.J. 07928

Re: Fire Alarm Installation
Living Well Lady -- 13 Kennedy Mall - Bricktown

Dear Anthony:

To confirm our conversation of this morning, we anticipate starting the above installation on Tuesday, February 18th with completion by Thursday, February 20th.

If we can possibly rearrange our schedule (this is not likely, however) we may be able to begin on Monday and will notify you of this change as soon as possible.

Regards,

Gary Ascolese

CERTIFICATE OF COMPLIANCE

BLOCK 670 LOT 4 SITE ADDRESS 2770 Hooper Ave.

TYPE OF SITE Commercial TYPE OF BUSINESS Retail
Residential/Commercial

APPLICANT Kennedy Mall PHONE NUMBER 201-966-2500

APPLICANT ADDRESS _____ CITY & STATE _____

CASE # _____ NAME OF BUSINESS Living Well Lindy

INCLUSIONARY DEVELOPMENT

❒ Affordable Fee Required _____ Date _____

Down Payment _____ Date _____

Balance _____ Date _____

Pd. in Full _____ Date _____

❒ Market Rate No Fee Required

MANDATORY DEVELOPER FEES

❒ Residential is .005%

☑ Commercial is .01%

Estimated Assessment: $ 122,000.00 Date 10/24/16

Required Deposit on Estimate $ 610.00 Date 11/1/16

Check # 1121 Receipt # 16430

Actual Assessment: _____ Date _____

Actual Required Fee: $ _____

Minus Deposit of Estimate $ _____

Balance Due $ _____

Amount Paid in Full $ _____ Date _____

Check # _____ Receipt # _____

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.

Carol A. Wolfe
Affordable Housing Administrator

FOUR CORNERS HEALTH CLUBS (NORTH NJ), INC.
DBA LIVINGWELL FITNESS CENTERS
OPERATING ACCOUNT
P.O. BOX 56224
HOUSTON, TX 77256-6224

SOUTHWEST BANK OF TEXAS, N.A.
HOUSTON, TEXAS 77227-7459
35-1125-1130

7904

CHECK DATE	CONTROL NO.	CHECK AMOUNT
10/31/96	007904	$*********610.00

PAY

Six Hundred Ten and 00/100 ---------- dollars

TO THE ORDER OF

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
BRICK NJ 08723

VOID AFTER 90 DAYS

[redacted]

Security features included. Details on back.

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

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

CERTIFICATE OF COMPLIANCE

Date 4-25-97

NAME Kennedy Mall Associates

ADDRESS 641 Shunpike Rd. Chatham, NJ

PROPERTY LOCATION Kennedy Mall-Living Well

Account No. J948828 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 Patti Evan

1542

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

THE CHASE MANHATTAN BANK NA
183 MILLBURN AVENUE
MILLBURN, NJ 07041

55-233
212

Date: 10/29/97
Check Amount: $610.00

SIX HUNDRED TEN and 00/100 DOLLARS

Pay to the order of:

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE ROAD
BRICKTOWN, NJ 08723

[redacted]

To: Scott M. Pezarras, Chief Financial Officer

From: Carol A. Wolfe, Affordable Housing Administrator

Re: Affordable Housing Fees

Date: 11-6-97

Business/Development: Living Well Lady

Owner/Applicant: Kennedy Mall Associates

Property Address: 2770 Hooper Ave

Block: 670 Lot: 4

DEPOSIT RECEIVED
Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number _____
Estimated Fee $ _____

Deposit Amount $ _____

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee
Commercial
(Residential)
Inclusionary Development Fee

Check Number: 1542
Final Fee: $ 1220.00
Less Deposit: $ 610.00

Final Payment $ 610.00

FOR DEPOSIT ONLY-AFFORDABLE HOUSING TRUST ACCOUNT # 4880071456

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

11-6-97
Date

Applicable to Ordinance 728-92
This form must be handed in with permit application or a permit will not be issued.

T O W N S H I P O F B R I C K

2770 Hooper Ave, Bricktown, N.J.
Work Site Address Block Lot

Kennedy Mall Associates, 641 Shunpike Rd, Chatam, N.J. 201-966-2800
Owner's Name, Address, Phone

All American Contracting Corp, 1203 River Rd, Edgewater, N.J. 07020 - 201-943-0778
Contractor's Name, Address, Phone

Construction Interior Alteration for Health Club
Describe type (Single -family home, etc.)

Demolition Interior Walls, Carpet, etc.
Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material Approx 30 cubic yards
Sheet Rock, Carpet, Store fixtures

Name, address and phone of party responsible for removal of debris:
Mid Jersey Disposal N. Mainshore Rd, Waretown, NJ 08758

Size of dumpster: 30 Cubic Yard Container

Destination of discarded debris: Ocean County Landfill, Manchester, N.J.

Hauler's DEP Permit No.: # 222320477

**Note: Any recyclable material, including, but not limited to: corrugated cardboard, vegetative waste, concrete, asphalt, clean wood, etc., must be delivered to an approved recycling center, and receipts provided to the Township of Brick along with tipping receipts for non-recyclable material.

Generator's Certification: Under penalty of criminal and civil prosecution, for the making or submissin 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 or recycled in accordance with all applicable State and Federal laws and regulations, and that I have been authorized, in writing, to make such declarations by the person in charge of the generator's operation.

Printed/Typed Name Signature Date

****

FOR OFFICE USE ONLY

MUST BE COMPLETED BEFORE CERTIFICATE OF OCCUPANCY OR CERTIFICATION OF APPROVAL IS ISSUED

Recycling tonnage receipts attached? _____

Certified tipping receipts attached? _____

**Note: Receipts must show certified weights, date of disposal and name and address of disposal center.

DISTRIBUTION LIST:
1. Original to Code Enforcement Officer
2. Construction Code Office
3. Applicant

TOWNSHIP OF BRICK

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

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(908) 262-1048

To: Scott M. Pezarras, Chief Financial Officer

From: Carol A. Wolfe, Affordable Housing Administrator

Re: Affordable Housing Fees

Date: November 1, 1996

Business/Development: Living Well Lady

Owner/Applicant: Kennedy Mall Assoc.

Property Address: 2770 Hooper Ave.

Block: 670 Lot: 4

DEPOSIT RECEIVED

- [x] Mandatory Development Fee
  - [x] Commercial
  - [ ] Residential
- [ ] Inclusionary Development Fee

Check Number 4904
Estimated Fee $1,220.00

Deposit Amount $ 610.00

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

- [ ] Mandatory Development Fee
  - [ ] Commercial
  - [ ] Residential
- [ ] Inclusionary Development Fee

Check No.: _____
Estimated Fee: _____

Final Payment $_____

FOR DEPOSIT ONLY-AFFORDABLE HOUSING TRUST ACCT # 4880071456

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:

H Thulen
Signature

11.1.96
Date