

TOWNSHIP OF BRICK



CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: Kennedy Mall

2. Owner Name: Little Caesars Claude A. DiDion, Tel. 201-899-8850

Address 214 A Sawmill Rd. Brick NJ 08724

3. Principal Contractor: Modular Structure, Inc., Tel. () 920-5869

Address P.O. Box 368 Somerville, NJ 08876

Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____

4. Architect or Engineer: _____ Tel. () _____

Address _____

5. Responsible Person in Charge of Work _____ Tel. () _____

II. PROPOSED WORK

A. TYPE OF WORK	B. CATEGORIES OF WORK	D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?																
1. ☐ Minor Work (Single Trade) 2. ☐ Small Job (\$5,000 and no Prior Approvals) <i>Complete only II.B., III and IV.A. and Page 2</i> 3. ☐ New Building 4. ☐ Addition 5. ☐ Alteration 6. ☐ Repair, Replacement 7. ☐ Demolition 8. ☒ Other: <u>Sign</u>	<table border="1"> <thead> <tr> <th>Permit/Category</th> <th>Estimated</th> </tr> </thead> <tbody> <tr> <td>1. ☐ Building/Structural</td> <td>\$ _____</td> </tr> <tr> <td>2. ☐ Plumbing</td> <td>_____</td> </tr> <tr> <td>3. ☐ Electrical</td> <td>_____</td> </tr> <tr> <td>4. ☐ Fire Protection</td> <td>_____</td> </tr> <tr> <td>5. ☐ Other _____</td> <td>_____</td> </tr> <tr> <td>6. ☐ Other _____</td> <td>_____</td> </tr> <tr> <td colspan="2">TOTAL COST \$ <u>1200</u></td> </tr> </tbody> </table> C. DO YOU WANT: 1. ☐ Partial Releases 2. ☐ Prototype Processing	Permit/Category	Estimated	1. ☐ Building/Structural	\$ _____	2. ☐ Plumbing	_____	3. ☐ Electrical	_____	4. ☐ Fire Protection	_____	5. ☐ Other _____	_____	6. ☐ Other _____	_____	TOTAL COST \$ <u>1200</u>		1. ☐ Elevators/Dumbwaiters 2. ☐ High-Pressure Boilers 3. ☐ Refrigeration Systems 4. ☐ Pressure Vessels 5. ☒ Hazardous Uses/Places of Assembly 6. ☐ Cross-connections/Backflow Preventors 7. ☐ Sprinklers 8. ☐ Smoke Control Systems in Open Wells
Permit/Category	Estimated																	
1. ☐ Building/Structural	\$ _____																	
2. ☐ Plumbing	_____																	
3. ☐ Electrical	_____																	
4. ☐ Fire Protection	_____																	
5. ☐ Other _____	_____																	
6. ☐ Other _____	_____																	
TOTAL COST \$ <u>1200</u>																		

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL	
1. ☐ Hotels (R-1)	If new construction, enter no. of dwelling units _____
2. ☐ Multi-Family (R-2) HMD Reg. No.: _____	
3. ☐ Two Family (R-3b)	If other than new construction, enter no. of dwelling units: _____
4. ☐ One-Family (R-3a)	
Before Construction: _____	
After Construction: _____	
Net Gain (or loss): _____	
B. NON-RESIDENTIAL	
5. ☐ Theatres with Stage (A-1-A)	16. ☐ Institutional Detention Center (I-1)
6. ☐ Movie Theatres (A-1-B)	17. ☐ Hospitals, Infirmarys (I-2)
7. ☐ Night Clubs (A-2)	18. ☐ Group Homes (I-3)
8. ☒ Restaurants, Libraries, Museums (A-3)	19. ☐ Mercantile (M)
9. ☐ Religious Assembly (A-4)	20. ☐ Moderate-Hazard Warehouse (S-1)
10. ☐ Outdoor Assembly (A-5)	21. ☐ Low-Hazard Warehouse (S-2)
11. ☐ Business (B)	22. ☐ Temporary, Misc. (U)
12. ☐ Educational (E)	23. ☐ Other _____
13. ☐ Moderate-Hazard Factory (F-1)	
14. ☐ Low-Hazard Factory (F-2)	
15. ☐ High-Hazard (H)	

State Specific Use: Little Caesars Pizza

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP		
1. ☐ Private (Individual, Corp., Non-profit Inst., Etc.)		
2. ☐ Public (State, County or Local Govt.)		
B. HEATING FUEL		
Principal	Secondary	Type
3. ☐	☐	Gas
4. ☐	☐	Oil
5. ☐	☐	Electric
6. ☐	☐	Solid (Wood, Coal, Etc.)
7. ☐	☐	Propane
8. ☐	☐	Solar
9. ☐	☐	Other _____
C. TYPE OF SEWAGE DISPOSAL		
10. ☐ Public or Private Company		
11. ☐ Private (Septic Tank, Etc.)		
D. TYPE OF WATER SUPPLY		
12. ☐ Public or Private Company		
13. ☐ Private (Well, Etc.)		
E. BUILDING CHARACTERISTICS		
14. No. of Stories _____		
15. Height of Structure _____	Ft.	
16. Area—Largest Floor _____	Sq. Ft.	
17. Bldg. Area—All Fls. _____	Sq. Ft.	
18. Volume of Structure _____	Cu. Ft.	
19. Total Land Area Disturbed _____	Sq. Ft.	

LDS BR 10310424

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

- A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.
- B. ☐ I further certify that I will perform the work below.
- B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.
- 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 understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE Ronald Abou-Diwan DATE 11-22-88

II. AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

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 _____ TEL. () _____

ADDRESS _____

SIGNATURE _____

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SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

☐ Flood Hazard

- | | | |
|---|---------------------------------------|---|
| ☐ One and Two Family Dwellings | ☐ Mechanical | ☐ As Built Elevation Certification |
| ☐ Building | ☐ Energy | |
| ☐ Electrical | ☐ Barrier Free | ☐ Other |
| ☐ Plumbing | ☐ Other | |

PERMIT CONTROL

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

☐ PARTIAL RELEASES

☐ PROTOTYPE PLAN - FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date	Receiver	Approval Date	Reviewer	Comments
☐	BUILDING			12/16/88	ICG	
	Footings/Foundations					
	Framing					
	Architectural			11/30/88	JE	
	Other 2					
☐	PLUMBING					
☐	ELECTRICAL					
☐	FIRE PROTECTION					
☐	OTHER					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
	BUILDING		1-16-89	ICG
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
	PLUMBING			
	ELECTRICAL			
	FIRE PROTECTION			
	OTHER			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

Date Issued

- ☐ Temporary Certificate of Occupancy
Date Expired _____
- ☐ Temporary Certificate of Occupancy
Date Expired _____
- ☐ Certificate of Occupancy
No. _____
- ☐ Certificate of Continued Occupancy
No. _____
- ☐ Certificate of Approval
No. _____
- ☐ None

IV. ON-GOING INSPECTIONS

On-going Inspections Required
(See Page 1, II.D.)

Date Posted to
Log and Tickler

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$.
PLUMBING	
ELECTRICAL	
FIRE PROTECTION	
OTHER sign	50.00
SUBTOTAL	\$.
- LESS: 20% of subtotal (when plan review performed by state agency).	(.)
D.C.A. TRAINING FEE .0006 x	
CERTIFICATE OF OCCUPANCY	
OTHER	
OTHER	
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ 50.00
DATE 12/1/88 Collected By P. Allen	

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			
OTHER			
OTHER			
- LESS: Refunds			(.)
TOTAL COLLECTED AFTER PERMIT ISSUED			\$.

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	\$.
COLLECTED AFTER PERMIT (VB)	
TOTAL	\$.

TOWNSHIP OF BRICK



BUILDING SUBCODE TECHNICAL SECTION



PERMIT NO. 3215
 DATE ISSUED 12-1-83
 REVISION DATE _____
 Block 670 Lot 4, 5, 8, 23, 25
 Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only When changing contractors, notify this office
 Owner Claude Abby-DiDona Contractor Modular Structure, Inc
 Address 2149 Sawmill Rd Address Box 368 Spencerville
Brick NJ 08724 NJ 08876
 Tel. (201) 899-8850 Tel. (201) 920-5869
 Work Site Address Kennedy Mall L.I. No. _____
Brick & Chambers Bridge Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
 (Complete for Minor Work and Small Job Only)
 I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
 AGENT SIGNATURE _____

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK Give detail description including materials used, dimensions, etc.
Sign

☐ See Plans

TYPE OF WORK:	Fee Basis	Fee
☐ New Building		
☐ Addition		
☐ Alteration/Renovation		
☐ Roofing		
☐ Siding		
☐ Other _____		
☐ Demolition		
☐ Miscellaneous		
☐ Fence		
☐ Sign		
☐ Pool		
☐ Elevator		
☐ Other _____		
SUBTOTAL	\$	
Minimum Building Fee (if applicable)	\$	
Total Building Fee (Greater of Minimum or Subtotal)	\$	

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____

No. of Stories _____ Total Building Area-All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

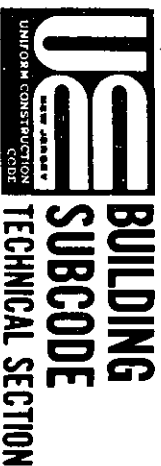
Area-Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

TOWNSHIP OF BRICK



PERMIT NO.	
DATE ISSUED	
REVISION DATE	
Block	670
Subdivision	Lot 5, 8, 23, 25

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner	Contractor
Address	Address
Tel. ()	Tel. ()
Work Site Address	Lic. No.
	Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration/Renovation
- ☐ Roofing
- ☐ Siding
- ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
- ☐ Fence
- ☐ Sign
- ☐ Pool
- ☐ Elevator
- ☐ Other

Fee Basis

Fee

SUBTOTAL

Minimum Building Fee (if applicable)

Total Building Fee (Greater of Minimum or Subtotal)

C. BUILDING CHARACTERISTICS

USE GROUP: Present Proposed

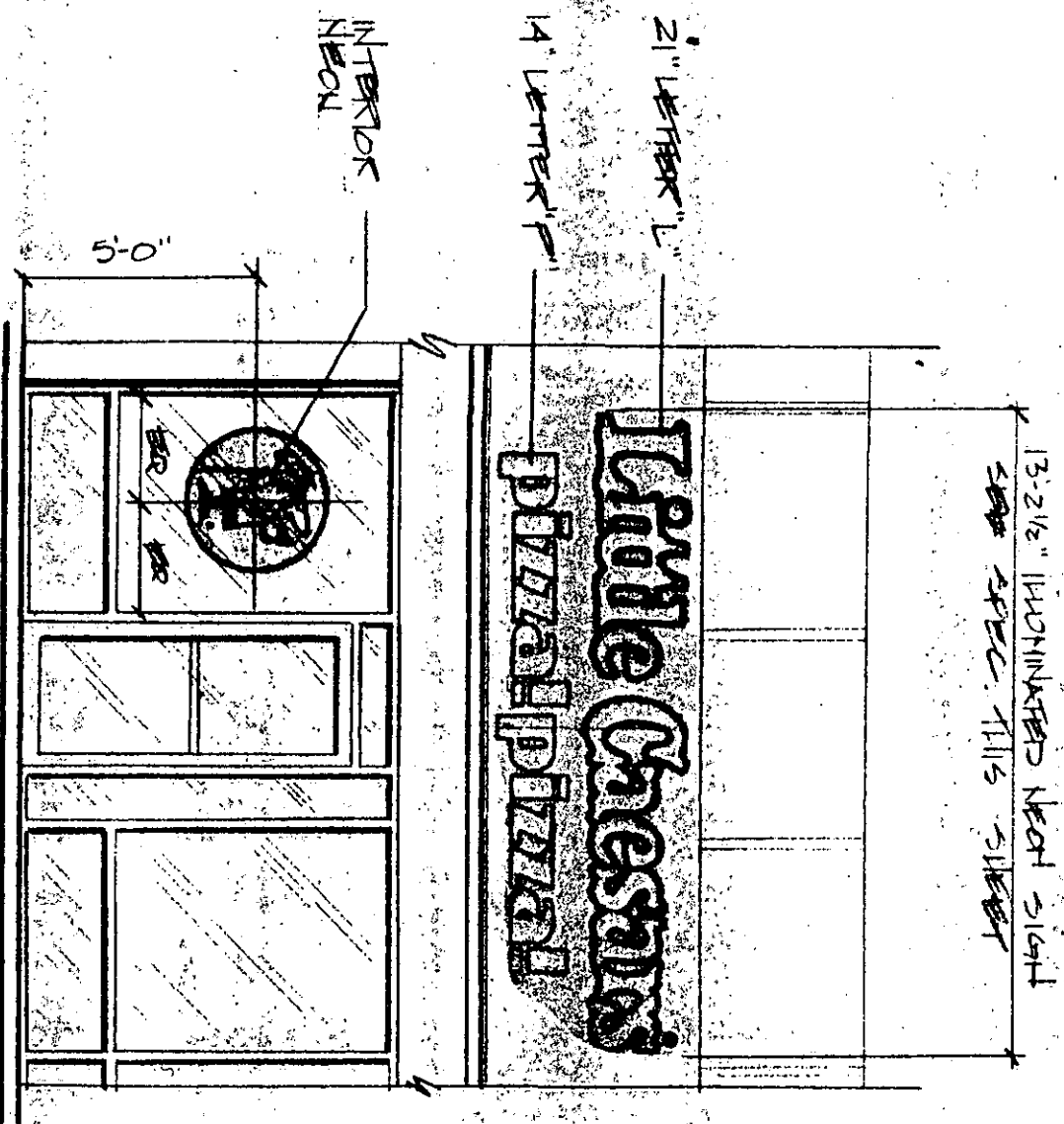
No. of Stories	Total Building Area-All Floors	Sq. Ft.
Height of Structure	Volume of Structure	Cu. Ft.
Area-Largest Floor	Total Land Area Disturbed	Sq. Ft.
Estimated Cost of Building Work: \$		

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

JOB CONDITION/COMMENTSMaximum Occupancy Load:

U.C.C. Form F-110 (8/83)



(USE A LETTER SPECIES SPECIFIED AS SUCH. USE CHARACTER OF LOW A LETTER SPECIES TO OBTAIN EXACTED LENGTH)

NOTE: "CAB" is connected as shown

THESE SPECIES
WILL BE
SPECIES NAME SPECIES
SPECIES NAME
SPECIES NAME

**Little Caesars
Pizza Division**

THESE SPECIES
WILL BE
SPECIES NAME SPECIES
SPECIES NAME
SPECIES NAME

PLEASE NOTE: Where applicable, all species should be painted by the sign installer to match existing face color.

This is to be provided in all cases where a factory is used.