

TOWNSHIP OF BRICK



CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: Kennedy Mall Hopper Ave
 2. Owner Name: Blackbuster Video Tel. ()
 Address: Kennedy Mall Hopper Ave
 3. Principal Contractor: LAMAR Sign Co Tel. () 434-4434
 Address: 1000 Westside Ave Jersey City
 Lic. No. or Builder Reg. No. Federal Emp. No. 221846262
 4. Architect or Engineer: Tel. ()
 Address:
 5. Responsible Person in Charge of Work: Gerald J Kocot Tel. () 434-4434
1000 Westside Ave JC

II. PROPOSED WORK

A. TYPE OF WORK

1. ☐ Minor Work (Single Trade)
2. ☐ Small Job (\$5,000 and no Prior Approvals)
Complete only II.B., III and IV.A. and Page 2
3. ☐ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☒ Other: Signs

B. CATEGORIES OF WORK

Permit/Category	Estimated
1. ☐ Building/Structural	\$
2. ☐ Plumbing	
3. ☐ Electrical	
4. ☐ Fire Protection	
5. ☒ Other <u>Signs</u>	
6. ☐ Other	
TOTAL COST <u>\$6805</u>	

C. DO YOU WANT:

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
HMD Reg. No.:
3. ☐ Two Family (R-3b)
4. ☐ One-Family (R-3a)

If new construction, enter no. of dwelling units _____

If other than new construction, enter no. of dwelling units:

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, Infirmeries (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: _____

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 10310431

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 _____ DATE _____

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

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		Approval Date	Reviewer	Comments
		Date	Receiver			
☐	BUILDING					
	Footings/Foundations					
	Framing					
	Architectural			2/16/89	JCS	
	Other					
☐	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				
_____	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	\$ _____
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	\$ <u>114.00</u>
DATE <u>2/22/89</u> Collected By <u>Palo</u>	

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. 3623
DATE ISSUED 2-22-89
REVISION DATE _____
Block 620 Lot 4-25
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner Woodhouse Vids Contractor Anthony's Sons
Address 22nd Mall Address 1000 West 22nd St
Tel. 400-254-402 Tel. 434-4454
Work Site Address Same as above Lic. No. 22-1846262
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.
[Signature]
AGENT SIGNATURE

B. TECHNICAL SITE DATA

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

Install 1) 3' x 29' 6" sign on west elevation (89 ft)
Install 2) 2' x 14' sign on north elevation (25 ft)
(Total 114 ft)

TYPE OF WORK:

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

Fee Basis	Fee
Minimum Building Fee (if applicable)	\$ _____
Total Building Fee (Greater of Minimum or Subtotal)	\$ _____
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: \$ 6800-

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

TOWNSHIP OF BRICK



PERMIT NO. 3443
 DATE ISSUED 2-22-84
 REVISION DATE _____
 Block 6720 Lot 4-25
 Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only When changing contractors, notify this office
 Owner Blackwelder Vids Contractor LATHYTH, SANCOS
 Address 2400 W 111 Address 1030 N. 5th St
 Tel. 1 408-1402 Tel. 1 408-4434
 Work Site Address SAINT AS ABOVE Lic. No. 22-1846262
 Federal Emp. No. 22-1846262

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.
Thomas West
 AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK Give detail description including materials used, dimensions, etc.
Install 1) 3' x 29'-6" sign on west elevation (89 ft)
Install 2) 2' x 14' sign on north elevation (25 ft)
 (Total 114 ft)

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: \$6800

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

JOB CONDITION/COMMENTS

DATE _____

[illegible]

Maximum Live Load:

Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW		Date	Initials
☒ No Plans Required		2-22-75	WGA
☐ All			
☐ Footing/Foundation			
☐ Frame			
☐ Architectural			
☐ Other			

INSPECTIONS FINAL	
☐ CO	☐ CCO
☐ CA	

Date: _____

Inspected By: _____

INSPECTIONS		
Type	Failure Dates	Approval Date
☐ Footing/Foundation		
☐ Slab		
☐ Frame		
☐ Architectural		
☐ Insulation		
☐ Finishes		
☐ Energy		
☐ Mechanical		
☐ TCO		
☐ Other _____		