BLOCK 1149 LOT 1 QUALIFICATION CODE _____ ADDRESS (SITE) 147 Von Zale Rd Brick Nj. PERMIT NO. 03-4997

called 10-22-03

CONSTRUCTION PERMIT APPLICATION

COM-11

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

I. IDENTIFICATION

Bricktown Plaza

1. Propsed Work Site at: 147 Von Zale Rd Brick Nj.
2. Name of Owner in Fee: Brick Plaza Assoc Tel. ( )
   Address 600 Old Country Rd Suite 445 Garden City NY 11530
   (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: KOPP Electric Co Tel. (732) 864-0001
   Address 143 Pinewood Rd Toms River NJ 08753
   License No. OR, if new home, Builder Reg. No. 13013 Exp. Date 3/2006
   Federal Employee No. 22-2893204 FAX: (732) 255-5826
5. Architect or Engineer n/a Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work _____
   Tel. ( ) _____ FAX ( ) _____

ELEC

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical		75	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee		1	
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	76	

VI. BUILDING/SITE CHARACTERISTICS

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

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building			10-17-03						
3. ☐ Addition									
4. ☐ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☒ Electrical					10/21/03	WA			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS									

OPTIONAL (for office use only)

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

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: Store
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10402511

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 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.

(X) Check if contractor.

Agent Name KOPP Electric Co

Address 143 Pinewood Rd
Toms River NJ 08753

Telephone (732) 864-0001

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition			
Building		Energy		Other	
Electrical		Barrier Free			
Plumbing		Flood Hazard			
Fire Protection		As Built Elevation Cert.			
Mechanical		Other			

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				
☐ Lead Abatement Clearance Certificate	No.				

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 11/06/2003
Control #
Permit # 03-4997

UCC NEW JERSEY

CONSTRUCTION PERMITE

IDENTIFICATION Block 115 Lot 1 Qual

Work Site Location 147 VAN ZILE RD
ELEC
Owner in Fee BRICK PLAZA ASSOC
Address 600 OLD COUNTRY RD
GARDEN CITY, NY 11530-
Telephone ( ) -

Contractor KOPP ELECTRIC
Address 143 PINEWOOD ROAD
TOMS RIVER, NJ 08753-
Telephone (7321656-5826
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2893204

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
ELECTRIC

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 1,000

D F Newman Jr 11/06/2003
Construction Official Date

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

PAYMENTS (Office Use Only)

Building	0
Electrical	35
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	1
Cert. of Occupancy	0
Other	
Total	36
Check No.	8960
Cash	
Collected By	JB

11/06/03 3:31PM 000000#5079
XX06 SERV.006
#034997
ELECTRIC $35.00
DCA $1.00
CHECK $36.00

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 10/17/2003
Date Issued 11/16/03
Control # C99-11
Permit # 03-4997

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

Block 1149 Lot 1 Qual
Work Site Location 147 VAN ZILE RD
ELEC
Owner in Fee BRICK PLAZA ASSOC
Address 600 OLD COUNTRY RD
GARDEN CITY, NY 11530-
Tele.( ) -
Contractor KOPP ELECTRIC
Address 143 PINEWOOD ROAD
TOMS RIVER, NJ 08753-
Tele.(732)255-5826
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2893204

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed B
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 10/21/03
Approved By: MR

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 12/4/03
Approved By: MR

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough	11/20/03 MR		11/21/03 MR	
Temp Serv				
Const Serv				
TCO			12/4/03 MR	
Other				
Service				
Final			12/4/03 MR	
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				

No access 11:30 am

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
10		Receptacles	
2		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
12		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	35
DCA State Permit Fee	$	1

Paid [ ] Check # Collected by:

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

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued 12/3/03
Control #
Permit # 03-5372

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

Block 1149 Lot 1
Work Site Location 147 Van Zile Road
Brick, NJ 08724
Owner in Fee/Occupant Jackson Hewitt Tax Services
Address (Same as above).
Tele. ( ) 732-458-2065
Contractor Slomin's Security
Address 28 Kennedy Blvd.
East Brunswick, NJ 08816
Tele. ( ) 800-997-2585 Fax ( )
Lic. No. 11-1339259
Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS # 3789690

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ $150.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[X] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: 12 3 03
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 12 5 03
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final	12-4-03 M		12 5 03 M	

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.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles 2 Doors	
		Switches 1 Motion	
		Detectors 1 Keypad	~
		Light Poles 1 Siren	
		Motors—Fract. HP 1-6 Zone Control	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		x Burglar Alarm	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		.....	
		.....	

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

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

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

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 10/17/2003
Date Issued 11/6/03
Control # C99-11
Permit # 03-4997

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

Block 1149 Lot 1 Qual
Work Site Location 147 VAN ZILE RD
ELEC
Owner in Fee BRICK PLAZA ASSOC
Address 600 OLD COUNTRY RD
GARDEN CITY, NY 11530-
Tele.( ) -
Contractor KOPP ELECTRIC
Address 143 PINEWOOD ROAD
TOMS RIVER, NJ 08753-
Tele.(732)255-5826
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2893204

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed B
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 10/21/03
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
10		Receptacles	
2		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/P.A.C. Panel	
12		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 35
DCA State Permit Fee $ 1

U.C.C. P120 (rev. 3/96)

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 10/17/2003
Date Issued 11/6/03
Control # C99-11
Permit # 03-4997

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

Block 1149 Lot 1 Qual
Work Site Location 147 VAN ZILE RD
ELEC
Owner in Fee BRICK PLAZA ASSOC
Address 600 OLD COUNTRY RD
GARDEN CITY, NY 11530-
Tele.( ) -
Contractor KOPP ELECTRIC
Address 143 PINEWOOD ROAD
TOMS RIVER, NJ 08753-
Tele.(732)255-5826
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2893204

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed B
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 1,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 10/21/03
Approved By: JMV

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
10		Receptacles	
2		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
12		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 35
DCA State Permit Fee $ 1

U.C.C. P120 (rev. 3/96)

C3E
DIVISION OF INSPECTIONS
401 CHAMBERS BRIDGE ROAD
BRICK, NJ 08723

Date Issued 11/24/03
Control #
Permit #

hand delivered by Judy 11/24/03

UCC NEW JERSEY

STOP CONSTRUCTION ORDER

IDENTIFICATION

Work Site Location 147 VAN ZILE RD — Block 1149 — Lot 1
TENANT FIT UP

Owner in Fee BRICK PLAZA ASSOC — Agent LORI A. SEARY
Address 600 OLD COUNTRY RD — Address P.O. BOX 4591
GARDEN CITY, NY 11530- — TOMS RIVER, NJ 08754

ACTION

Date of Notice 11/24/03 — Compliance Due Date 11/30/03 — Date of Inspection 11/24/03

You are hereby ordered to STOP CONSTRUCTION at the above location as of 11/24/03 until further notice from this enforcing agency.

This Order is entered pursuant to N.J.A.C. 5:23-2.31(d) for violation of N.J.A.C.5:23-2.14A which provides:
FAILURE TO OBTAIN REQUIRED PERMIT

Permission to resume construction may be obtained from this enforcing agency after the following conditions are met:
FILE APPLICATION FOR TENANT FIT UP

Failure to comply with this Order will result in a penalty of $ 500 per day for each day in which work continues after issuance of this Order.

If necessary, the enforcing agency will concurrently seek the Order of a court of competent jurisdiction restraining further work at the above location.

Pursuant to N.J.A.C. 5:23A-2.1, if you wish to contest the validity of the above action, you may file an appeal with the Construction Board of Appeals of the BOARD OF APPEAL/OCEAN COUNTY, within 15 days of receipt of this form. The Application to the Construction Board of Appeals may be used for this purpose. You application for appeal must be in writing, setting forth your name and address, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of the relief sought by you. You may append any documents that you consider useful.

The fee for an appeal is $100 to be forwarded with your application to the Construction Board of Appeals office at 2 MOTTS PLACE, TOMS RIVER, NJ 08753.

Should you have any questions concerning this Order, please call: DANIEL F. NEWMAN, JR., CONSTRUCTION OFFICIAL 732-262-1027.

BY ORDER OF: Daniel F. Newman Jr. Subcode Official

FCBEC.C. F250 (rev. 3/96)
DIVISION OF INSPECTIONS
401 CHAMBERS BRIDGE ROAD

Date Issued 11/24/03
Control #

C3E
DIVISION OF INSPECTIONS
401 CHAMBERS BRIDGE ROAD
BRICK, NJ 08723

Date Issued 11/24/03
Control #
Permit #

hand delivered by Judy 11/24/03

UCC NEW JERSEY

STOP CONSTRUCTION ORDER

IDENTIFICATION

Work Site Location 147 VAN ZILE RD — Block 1149 — Lot 1
TENANT FIT UP

Owner in Fee BRICK PLAZA ASSOC
Address 600 OLD COUNTRY RD
GARDEN CITY, NY 11530-

Agent LORI A. SEARY
Address P.O. BOX 4591
TOMS RIVER, NJ 08754

ACTION

Date of Notice 11/24/03 — Compliance Due Date 11/30/03 — Date of Inspection 11/24/03

You are hereby ordered to STOP CONSTRUCTION at the above location as of 11/24/03 until further notice from this enforcing agency.

This Order is entered pursuant to N.J.A.C. 5:23-2.31(d) for violation of N.J.A.C.5:23-2.14A which provides:
FAILURE TO OBTAIN REQUIRED PERMIT

Permission to resume construction may be obtained from this enforcing agency after the following conditions are met:
FILE APPLICATION FOR TENANT FIT UP

Failure to comply with this Order will result in a penalty of $ 500 per day for each day in which work continues after issuance of this Order.

If necessary, the enforcing agency will concurrently seek the Order of a court of competent jurisdiction restraining further work at the above location.

Pursuant to N.J.A.C. 5:23A-2.1, if you wish to contest the validity of the above action, you may file an appeal with the Construction Board of Appeals of the BOARD OF APPEAL/OCEAN COUNTY, within 15 days of receipt of this form. The Application to the Construction Board of Appeals may be used for this purpose. You application for appeal must be in writing, setting forth your name and address, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of the relief sought by you. You may append any documents that you consider useful.

The fee for an appeal is $100 to be forwarded with your application to the Construction Board of Appeals office at 2 MOTTS PLACE, TOMS RIVER, NJ 08753.

Should you have any questions concerning this Order, please call: DANIEL F. NEWMAN, JR., CONSTRUCTION OFFICIAL 732-262-1027.

BY ORDER OF: Daniel F. Newman Jr. Subcode Official

FCDEC.C. F250 (rev. 3/96)
DIVISION OF INSPECTIONS
401 CHAMBERS BRIDGE ROAD

Date Issued 11/24/03
Control #

BRICK, NJ 08723 Permit #

UCC NEW JERSEY

NOTICE OF VIOLATION AND ORDER TO TERMINATE

hand delivered by Judy 11/24/03

IDENTIFICATION

Work Site Location 147 VAN ZILE RD Block 1149 Lot 1
TENANT FIT UP

Owner in Fee BRICK PLAZA ASSOC
Address 600 OLD COUNTRY RD
GARDEN CITY, NY 11530-

Agent/Contractor LORI A. SEARY
Address P.O. BOX 4591
TOMS RIVER, NJ 08754

ACTION

Date of Notice 11/24/03 Compliance Due Date 11/30/03 Date of Inspection 11/24/03

TAKE NOTICE that you have been found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder in that:
N.J.A.C. 5:23-2.23B CERTIFICATE REQUIREMENTS OCCUPYING WITHOUT A CERTIFICATE OF OCCUPANCY

You are hereby ordered to terminate the said violations on or before 11/30/03. No Certificate of Occupancy or Approval will be issued unless the said violations are corrected.

[X] Failure to comply with this Order will subject you to a penalty of $ 500 per week.

[ ] You are hereby ordered to pay a penalty in the amount of $ 0 for each violation for a total penalty of $ 0. Each week that any of the said violations remain outstanding after 11/30/03 shall result in an additional penalty of $ 500 per week.

If you wish to contest the validity of the above action, you may request a hearing before the Construction Board of Appeals of the BOARD OF APPEAL/OCEAN COUNTY within 15 days of receipt of these Orders. The Application to the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your address and name, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of your reliance on the Regulations and, if necessary, a brief statement setting forth your position and the nature of the relief sought by you. You may also append any documents that you consider useful.

The fee for an appeal is $100 to be forwarded with your application to the Construction Board of Appeals office at 2 MOTTS PLACE, TOMS RIVER, NJ 08753.

If you have any questions concerning this matter, please call: DANIEL F. NEWMAN, JR., CONSTRUCTION OFFICIAL 732-262-1027.

NOTICE OF VIOLATION AND ORDER TO TERMINATE: sco DATE:
NOTICE AND ORDER OF PENALTY: Daniel F Newman Jr co DATE: 11-24-03

U.C.C. F210 (rev. 3/96)

BRICK, NJ 08723 Permit #

UCC NEW JERSEY

NOTICE OF VIOLATION AND ORDER TO TERMINATE

hand delivered by Judy 11/24/03

IDENTIFICATION

Work Site Location 147 VAN ZILE RD Block 1145 Lot 1
TENANT FIT UP

Owner in Fee BRICK PLAZA ASSOC
Address 600 OLD COUNTRY RD
GARDEN CITY, NY 11530-

Agent/Contractor LOPI A. SEARY
Address P.O. BOX 4591
TOMS RIVER, NJ 08754

ACTION

Date of Notice 11/24/03 Compliance Due Date 11/30/03 Date of Inspection 11/24/03

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N.J.A.C. 5:23-2.23B CERTIFICATE REQUIREMENTS OCCUPYING WITHOUT A CERTIFICATE OF OCCUPANCY

You are hereby ordered to terminate the said violations on or before 11/30/03. No Certificate of Occupancy or Approval will be issued unless the said violations are corrected.

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[ ] You are hereby ordered to pay a penalty in the amount of $ 0 for each violation for a total penalty of $ 0. Each week that any of the said violations remain outstanding after 11/30/03 shall result in an additional penalty of $ 500 per week.

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The fee for an appeal is $100 to be forwarded with your application to the Construction Board of Appeals office at 2 HOTTS PLACE, TOMS RIVER, NJ 08753.

If you have any questions concerning this matter, please call: DANIEL F. NEWNAM, JR., CONSTRUCTION OFFICIAL 732-282-1027.

NOTICE OF VIOLATION AND ORDER TO TERMINATE: _____ SCO DATE: _____

NOTICE AND ORDER OF PENALTY: Daniel F Newnam Jr CO DATE: 11-24-03

U.C.C. F210 (rev. 3/96)

BRICK, NJ 08724 PERMIT #

UCC NEW JERSEY

NOTICE OF VIOLATION AND ORDER TO TERMINATE

hand delivered by Judy 11/24/03

IDENTIFICATION

Work Site Location 1-7 VAN ZILE RD Block 114 Lot 1
TENANT FIT UP

Owner in Fee BRICK PLAZA ASSOC
Address 600 OLD COUNTRY RD
GARDEN CITY, NY 11530-

Agent/Contractor LORI A. SCARR
Address P.O. BOX 4591
TOMS RIVER, NJ 08754

ACTION

Date of Notice 11/24/03 Compliance Due Date 11/30/03 Date of Inspection 11/24/03

TAKE NOTICE that you have been found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder in that:
N.J.A.C. 5:23-2.23B CERTIFICATE REQUIREMENTS OCCUPYING WITHOUT A CERTIFICATE OF OCCUPANCY

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The fee for an appeal is $100 to be forwarded with your application to the Construction Board of Appeals office at 2 HOTTS PLACE, TOMS RIVER, NJ 08753.

If you have any questions concerning this matter, please call: DANIEL F. MENNAN, JR., CONSTRUCTION OFFICIAL 732-2.2-1027.

NOTICE OF VIOLATION AND ORDER TO TERMINATE: _____ sca DATE: _____

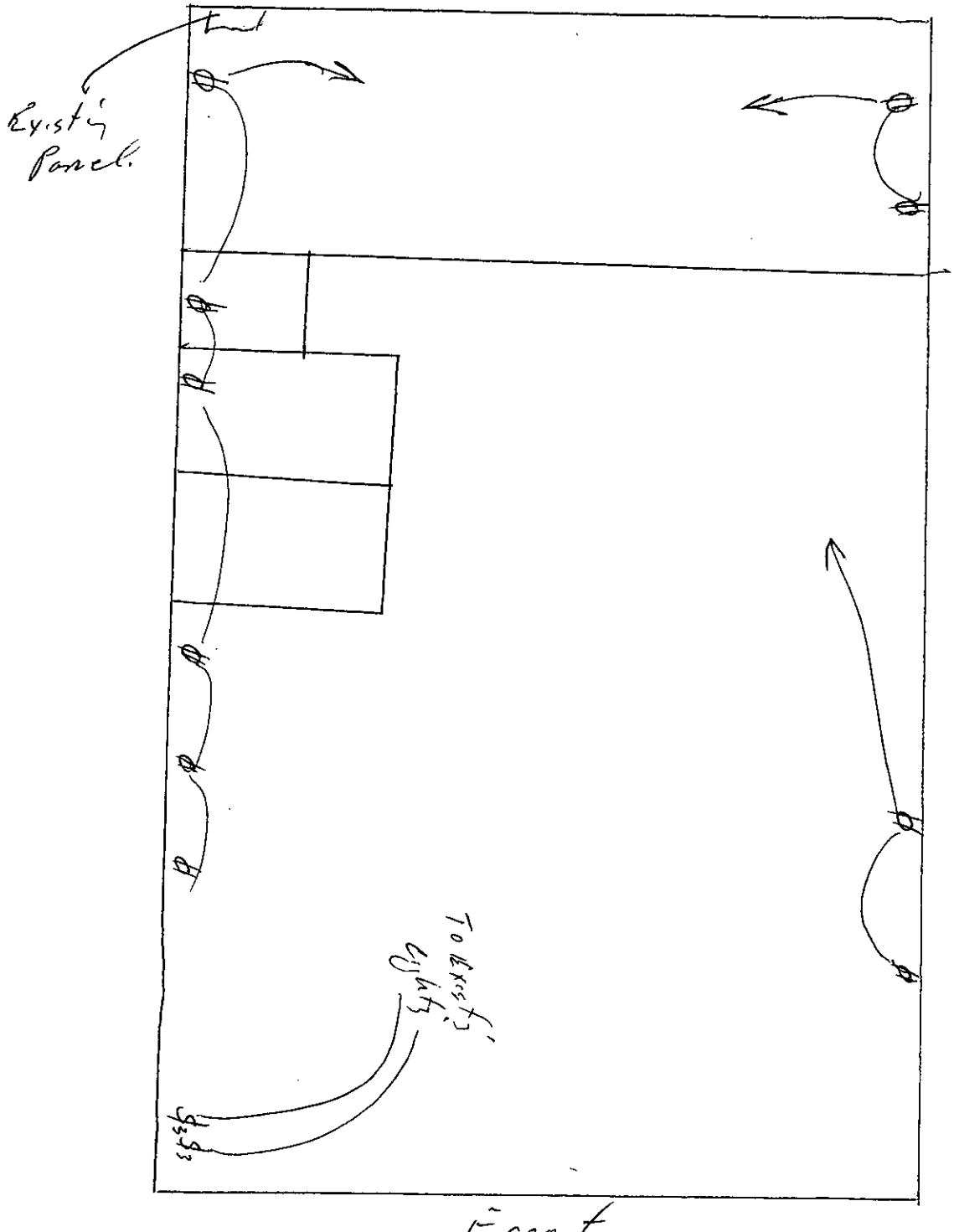
NOTICE AND ORDER OF PENALTY: Daniel F. Mennan Jr. co DATE: 11-24-03

U.C.C. F210 (rev. 3/96)

Proposed New Recs & Switches.

147 Van Sile Rd, Brick NJ.

BL 1149 Lot 1

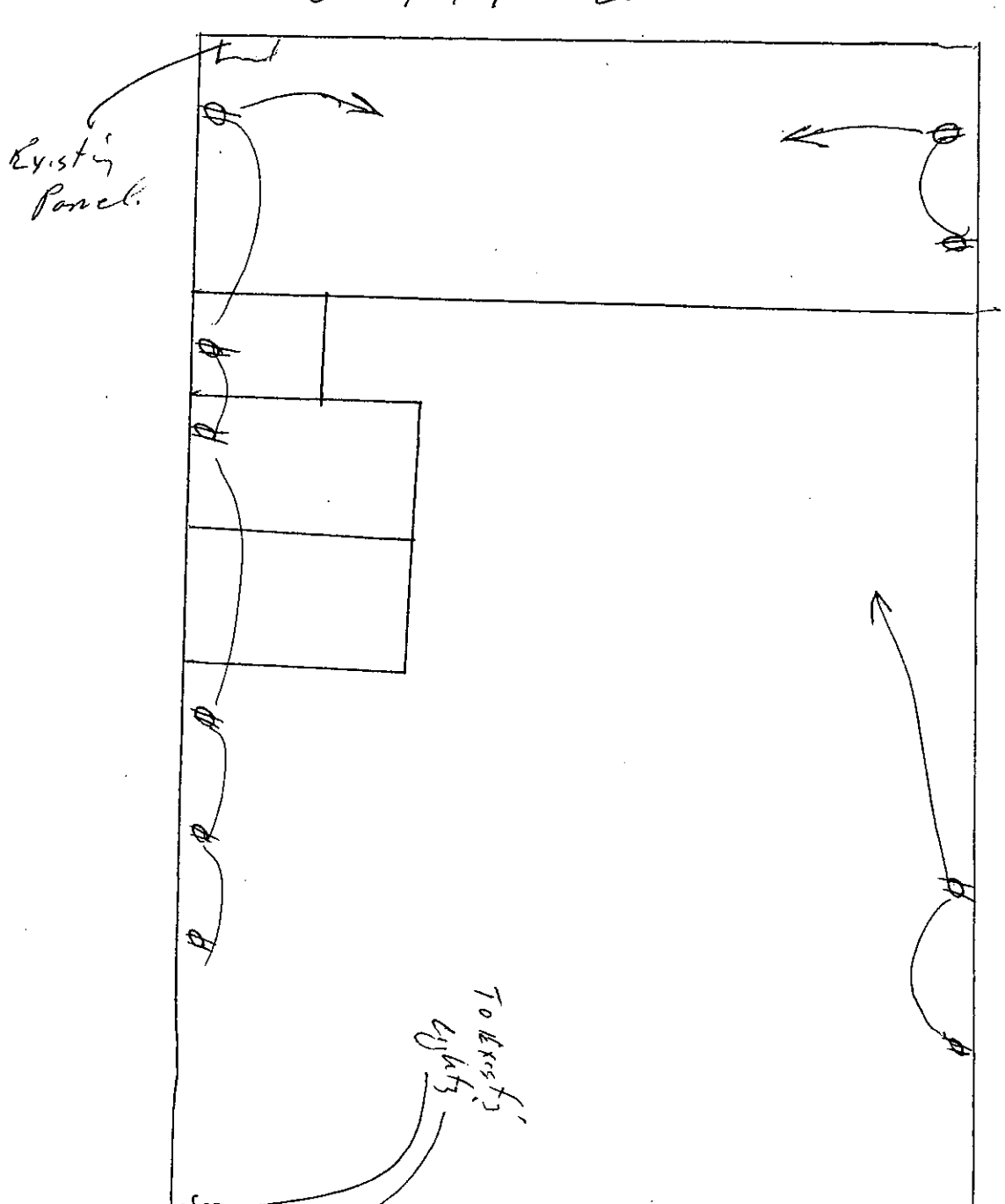


TOZ103

Kopp Electric Co
143 Pinewood Rd
Toms River NJ 08753
Lic #13013

Renovation:
Addition of Receptacles & Switches to Existing Space

Proposed new Rec & Switches
for
147 Van Sicle Rd, Brick NJ.
BL 1149 Lot 1



Kopp Electric Co
143 Pinewood Rd
Toms River NJ 08753
Lic 13013

Renovation:
Addition of Receptacles & Switches to Existing Space

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: Brick Plaza 147 Van Zile Rd. Brick NJ.
Block: 1149 Lot: 1
Owner's Name: Brick Plaza Assoc/Skyline Mgt.
Owner's Mailing Address: 600 Old County Rd. Suite 425 Garden City N.Y. 11530
Phone: (516) 393-9767

BUILDING

Contractor:
Address:

Phone#:
Lis #
Federal Emp # or SSN

Technical Data

Description of Work:

Type of Work

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

Building Characteristics

Use Group Present:_____ Proposed:_____
No of Stories:
Height of Structure:
Area of the largest floor:
Area of New Structure:
Volume of New Structure:
Total Land Disturbed:

Cost of Alteration: $

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $

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

Signature:

Please Print Name

ELECTRICAL

Contractor: KOPP Electric Co
Address: 143 Pinewood Rd Toms River NJ. 08753
Phone#: 732-864-8001
Lis #: 13013
Federal Emp # or SSN 22-2893204

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	10
Switches	2
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	12

Pool (Receptacles, Switches, Lights, Motor 1HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: $1000 ~

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

Signature:

Please Print Name Harold Kopp

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

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

Technical Data

Fixtures Quantity

Water Closets (Toilet)_____
Urinals/Bidets_____
Bath Tub (w/or w/out shower head)_____
Lavatory (BR Sink)_____
Shower_____
Floor Drain_____
Sink_____
Dishwasher_____
Drinking Fountain_____
Washing Machine_____
Hose Bib_____
Gas Piping_____
Fuel Oil Piping_____
Water Heater_____
Steam Boiler_____
Hot Water Boiler_____
Sewer Pump_____
Interceptor/Separator_____
Backflow Preventer_____
Greasetrap_____
Air Conditioner (Condensate Drain)_____
Septic Tank Closure_____
Sewer Service Connection_____
Water Service Connection_____
Active Solar System_____
Auxiliary Meter_____
Sprinkler Heads_____
Sump Pump_____
Pool Heater_____
Other:

Estimated Cost of Plumbing Work_____

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

Signature:_____

Please Print Name:_____

CONTRACTOR'S SEAL

FIRE

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

Technical Data

Description of Work:

Heating Type: ____Gas ____Oil ____Electric ____Solar
Heating System is ____New ____Existing
Location of Furnace/Boiler:_____
Water Supply Source_____
Method of Valve Supervision_____
Local Alarm Supervision_____
Central Supervision:_____
Proprietary Supervision:_____

Flammable Storage Tanks _____capacity_____fuel
Combustible Storage Tanks_____capacity_____fuel
LPG Storage Tanks_____capacity_____fuel

Item Quantity

Wet Sprinkler Heads_____
Dry Sprinkler Heads_____
Total_____

Smoke Detectors_____
Heat Detectors_____
Total_____

Stand Pipes_____
Kitchen Hood Exhaust System_____

Pre-Engineered Systems:
CO2 Suppression_____
Halon Suppression_____
Foam Suppression_____
Dry Chemical_____
Wet Chemical_____

Gas/ Oil Fired Appliances:
Gas Stove_____
Gas Dryer_____
Furnace (Gas or Oil)_____
Gas Fireplace_____
Gas Logs_____
Total Appliances_____

Wood Burning Stove_____
Wood Fireplace_____
Other:

Estimated Cost of Fire Work_____

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

Signature:_____

Print Name:_____