BLOCK 1149 LOT 1 QUALIFICATION CODE _____ ADDRESS (SITE) 135-167 Van Zile PERMIT NO. 04-06666

CONSTRUCTION PERMIT APPLICATION

C44-01

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

I. IDENTIFICATION

1. Propsed Work Site at: Sylvan learning Center Brick Plaza Van Zile RD
2. Name of Owner in Fee: Brick Plaza Associates Tel. (516) 393-8400
   Address 600 Old country Suit 425 garden city NY 11530
   street municipality zip code
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: YATES SIGN CO INC Tel. (732) 578-1818
   Address 556 INDUSTRIAL way west EATONTOWN NJ 07724
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 21-0718184 FAX: (_____) _____
5. Architect or Engineer _____ Tel. (_____) _____
   Address _____
6. Responsible Person in Charge of Work Pat Pesapane
   Tel. (732) 578-1818 FAX (732) 578-1808

COMMERCIAL

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 35		
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	1		
10. Subtotal			
11. Cert. of Occupancy			
12. Other	15		
13. TOTAL	$ 51		

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	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
1. ☐ Minor Work									
2. ☐ New Building					3-30-04	FM			
3. ☐ Addition									
4. ☑ Alteration	10000								
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition		Ewo	3/3/04		3/3/04				
TOTAL COSTS	1000								

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

Mail 1-16-04 called 3/4/04

E3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 03/05/2004
Control #
Permit # 04-0666

UCC NEW JERSEY
CONSTRUCTION PERMITE

IDENTIFICATION Block 1149 Lot 1 Qual

Work Site Location 135-167 VAN ZILE RD - SYLVAN CTR
SIGN
Owner in Fee BRICK PLAZA ASSOC
Address 600 OLD COUNTRY RD
GARDEN CITY, NY 11530-
Telephone (516)393-9000

Contractor YATES SIGN CO INC
Address 556 INDUSTRIAL WAY W
EATONTOWN, NJ 08753-
Telephone ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 21-0718184

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
30X12 CABINET SIGN

PAYMENTS (Office Use Only)

Building	35
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	1
Cert. of Occupancy	0
Other ZP	15
Total	36 51 -
Check No.	4473
Cash	
Collected By	MJR

03/05/04 12:35PM 000000#7346
**02 SERV.002

#0666	
BUILDING	$35.00
DCA	$1.00
ZPA	$15.00
CHECK	$51.00

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

Construction Official 03/05/2004 Date

U.C.C. F170 (rev. 3/96) NJ UCCARS 5:24E

YATES SIGN CO., INC.
556 Industrial Way West
Eatontown, NJ 07724
(732) 578-1818 • FAX (732) 578-1808

BUILDING SUBCODE TECHNICAL SECTION

Date Received 3-5-04
Date Issued
Control #
Permit # 04-0666

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

Block 114 Lot 1

Work Site Location Sylvan Learning Center
Brick Plaza Shopping Center

Owner in Fee Brick Plaza Associates

Address 600 Old Country Rd Suite 445
Garden City N.Y. 11530

Tele. (516) 393-8460

Contractor YATES SIGN CO INC

Address 556 INDUSTRIAL WAY WEST
EATONTOWN NJ 07724

Tele. (732) 578-1818 Fax (732) 578-1808

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 21-0718184

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 Pat Pizzuto

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

illum.
1- 30"x12' cabinet sign

51

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

- [ ] No Plans Required
- [X] All — 3-3-04 — PT
- [ ] Footing
- [ ] Foundation
- [ ] Frame
- [ ] Other

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

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

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Alteration $
3. Total (1+ 2) $

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [X] Alteration
  - [ ] Roofing
  - [ ] Siding
  - [ ] Fence Height (exceeds 6')
  - [X] Sign 30 Sq. Ft.
  - [ ] Pool
  - [ ] Asbestos Abatement Subchapter 8
  - [ ] Lead Haz. Abatement NJAC 5:17
  - [ ] Other
- [ ] Demolition

FEE (Office Use Only)

$

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

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

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

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 compiy 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 Yates Sign Co

Address 556 Industrial Way West
Eatontown NJ. 07724

Telephone (732) 578-1818

Signature Pat Pesapane

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

Township of Brick
Zoning Permit

Approved: Monday, March 01, 2004 **Number:** 167

Block 1149 **Lot** 1 **Zone:** B-3, Highway Dev.

Property Address: 173 Van Zile Road; Aldi Plaza

Applicant: Pat Pespane; Yates Sign Company

Property Owner Brick Plaza Associates

Existing Use: Sylvan Learning Center

Proposed Use: Sylvan Learning Center

Proposed Construction: Wall sign, 30" x 12', "Sylvan Learning Center".

Conditions:
The total sign area may not exceed 15% of the total façade area.
The street address number must be displayed on the door or wall.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Municipal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

RECEIVED JAN 23 2004 ZONING

RECEIVED FEB 12 2004 ZONING

resubmit 2/2/4

Applications missing any of the following information will delay processing and may be returned to you.

#193

BLOCK 1149 LOT 1 QUALIFIER

PROPERTY ADDRESS Brick Plaza ~~Dr. 2 Lots~~ ~~135-167~~ Van Zile Rd

PERSONAL NAME OF APPLICANT ~~Yates Sign Co~~ Pat Pesapane

BUSINESS NAME OF APPLICANT ~~Custom Fabricating Co. Inc.~~ Vintec sian Co.

MAILING ADDRESS OF APPLICAN [redacted]

PROPERTY OWNER'S FULL NAME Brick Plaza Associates

RECEIVED FEB 19 2004 ZONING

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☒ Commercial (please describe) Sylvan learning Center

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☒ Commercial (please describe) Sylvan LC ~~1 30"x12' Illum Cabinet Sign~~

RECEIVED MAR 1 2004 ZONING

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) _____ Height _____
☐ Addition - Height _____
☐ Alteration
☐ Porch or deck - Height _____
☐ Shed - Height _____
☐ Fence - Type _____ Height _____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☒ Other (please describe) Sign 30"x12' Illum cab. sign.

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT Pat Pesapane Date 1-9-04

Reviewed by Zoning Office JE Date 1-23-4 (X) Approved ~~( ) Denied~~

JE 2/5/4

JE 2/23/4

JE 3/1/4