BLOCK 1149 LOT 1 QUALIFICATION CODE _____ ADDRESS (SITE) 135-167 VanZile Rd. PERMIT NO. 05-3588

CONSTRUCTION PERMIT APPLICATION

C05-135353

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

I. IDENTIFICATION

1. Proposed Work Site at: 135-167 VanZile Rd. Brick NJ C05-135353-
2. Name of Owner in Fee: Bricktown Plaza Assoc. Tel. ( )
   Address C/o Skyline Management 600 Cantry Line Rd. Garden City NY 11530
   street municipality state zip code
3. Ownership in fee: Public _____ Private _____
4. Principal Contractor: CAST Construction Co. Inc Tel. (856) 795-0001
   Address 2W. Evesham Rd. Cherry Hill NJ 08003
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. [redacted]-22-3170834 FAX: (856) 795-6040
5. Architect or Engineer JRS Architects Tel. (609) _____
   Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Dan McGrath
   Tel. 856 795-0001 FAX: 856 795-6040

DAN's [redacted]

Commercial Alter

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$	84.00	
2.	Electrical			add
3.	Plumbing		80	
4.	Fire Protection		120	
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$	730	47
9.	State Permit Fee Surcharge			
10.	Subtotal	$		
11.	Cert. of Occupancy			
12.	Other ZA + Cur		60	
13.	TOTAL	$	9482.312	

VI. BUILDING/SITE CHARACTERISTICS

			(office use only)
1.	Number of Stories	1	
2.	Height of Structure	30' +/- ft.	
3.	Area — Largest Floor	EXIST. sq. ft.	
4.	New Building Area	EXIST. sq. ft.	
5.	Volume of New Structure	EXIST. cu. ft.	
6.	Construction Classification	2C	
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		

Building Code

II. PROPOSED WORK

OPTIONAL (for office use only)

		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									
3.	☐ Addition									
4.	☐ a. Repair									
	☐ b. Alteration									
	☒ c. Renovation Facade upgrades	525,500								
	☐ d. Reconstruction									
5.	☒ Fire Protection	10,000				6/2/05		12/15/05		
6.	☒ Plumbing	5,000				6/2/05		12/15/05		
7.	☒ Electrical	35,000				6/2/05		12/15/05		
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☒ Demolition	35,000	Cur	6/15/05		6/15/05				
	TOTAL COSTS	575,500								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. 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:

NO FEE REQUIRED

APPROVED BY _____ DATE 6/15/05

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
10. ☐ Swimming Pools, Spas and Hot Tubs

LDS BR-B 10524328

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 CAST Construction Co., Inc.

Address 2 West Evesham Road
Cherry Hill NJ 08003

Telephone (856) 795-0001

Signature Marlene Cecelo

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. _____	_____	_____	_____	_____

IMPORTANT
A.H.B.T. - MANDATORY FEE - COMMERCIAL

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

☒ Zoning Application deemed complete Initialed: RLT Date: 5/19/05

□ Zoning Application approved Initialed: _____ Date: _____

□ Zoning permit updates:

_____

_____

_____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	02/14/2006
Tracking Number	C-05-135353
Permit Number	05-3588
Permit Issue Date	09/08/2005

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 135-167 VAN ZILE RD. Brick Township, NJ Block: 1149 Lot: 1 Qual:

Owner in Fee: BRICKTOWN PLAZA ASSOCIATES

Owner Address: 600 OLD COUNTRY RD #425 GARDEN CITY NJ 11530

Telephone:

Contractor CAST CONSTRUCTION CO INC

Address 2 W EVESHAM ROAD CHERRY HILL NJ 08003

Telephone: 856-795-0001 Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number: N/A

Type of Warranty Plan: ☑ State ☐ Private

Use Group: U Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Use:
ALTERATION FACADE UPGRADES

Comments:

☐ **Certificate of Occupancy**
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☑ **Certificate of Approval**
This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **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.

☐ **Temporary Certificate of Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Fee: $0.00
Check Number: 251086
Collected By: Ann Marie Hanlon

Date Printed: 02/14/2006

CONSTRUCTION PERMIT

Date Issued 09/08/2005
Control # C-05-135353
Permit # 05-3588

IDENTIFICATION Block: 1149 Lot: 1 Qualifier
Work Site Location: 135-167 VAN ZILE RD. Brick Township, NJ
Owner in Fee BRICKTOWN PLAZA ASSOCIATES
Address 600 OLD COUNTRY RD #425 GARDEN CITY NJ 11530
Telephone:

Contractor CAST CONSTRUCTION CO INC
Address 2 W EVESHAM ROAD CHERRY HILL NJ 08003
Telephone: (856) 795-0001
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 22-3170834

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ALTERATION FACADE UPGRADES

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $540,500

Construction Official — Date 09/08/2005

PAYMENTS (Office Use Only)

Building	$8,482
Electrical	$0
Plumbing	$80
Fire Protection	$130
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$730
CO Fee	
Other	$60
Total	$9,482
Check No.	251086
Cash	$0
Credit	$0
Collected By	Ann Marie Hanlon

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

- [ ] Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- [ ] Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

- [ ] A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

- [ ] A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

PERMIT UPDATE

Date Update Issued 09/08/2005
Control # C-05-135353-1
Permit # 05-3588+A

IDENTIFICATION Block: 1149 Lot: 1 Qualifier
Work Site Location: 135-167 VAN ZILE RD. Brick Township, NJ
Owner in Fee BRICKTOWN PLAZA ASSOCIATES
Address 600 OLD COUNTRY RD #425 GARDEN CITY NJ 11530
Telephone:

Contractor CAST CONSTRUCTION CO INC
Address 2 W EVESHAM ROAD CHERRY HILL NJ 08003
Telephone: (856) 795-0001
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 22-3170834

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:

ELECTRICAL ALTERATIONS FACADE UPGRADES

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $35,000

Construction Official

09/08/2005
Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$265
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$47
CO Fee	
Other	$0
Total	$312
Check No.	251086
Cash	$0
Credit	$0
Collected By	Ann Marie Hanlon

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control # 9/8/05
Date Issued
Permit # 05-3588

COMMERCIAL

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 Qualification Code
Work Site Location 135-161 VanZile Road (DAN
Brick, New Jersey 856-261-5449)
Owner in Fee Brektown Plaza Assoc.
Address C/O Skyline Management
608 Old Country Rd. Garden City, NY 11530
Tel. (516) 393-8400
Contractor CAST Construction Co., Inc.
Address 2 West Evesham Road
Cherry Hill NJ 08003
Tel. (856) 795-0001 FAX (856) 795-6040
Contractor License No. or Builder Registration No.
Federal Emp. No ~~22-3170834~~ 22-3170834

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
Fascade Upgrades

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	7-29-05	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 2-13-06
Approved by: FM

INSPECTIONS Type:	Failure	Failure	Approval	Initial
			Dates (Month/Day)	
Footing				
Footing Bonding				
Foundation				
Slab				
Frame			9/13/05	
Trues Sys./Bracing				
Barrier-Free			Remainder 12/14/05	
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			2/13/06	
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[X] Other Fascade Upgrades
[ ] Demolition

FEE (Office Use Only)
$ _____

Administrative Surcharge $ _____
Minimum Fee $ _____
State Permit Surcharge Fee $ _____
TOTAL FEE $ _____

B. BUILDING CHARACTERISTICS

	Present	Proposed
Use Group	M	M
Constr. Class	2C	2C
No. of Stories	1	
Height of Structure	30' 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. Rehabilitation $ 525,500
3. Total (1+ 2) $ 525,500

U.C.C. F110 (rev. 07/03)
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

Bricktown Plaza

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 9/8/05
Control # 05-3558 JA
Date Issued
Permit # Update C05-135353-1

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 Qualification Code

Work Site Location 135-167 Van Zile Road
Brick, New Jersey

Owner in Fee Bricktown Plaza Associates

Address C/o Skyline Management
600 Old Country Road Garden City New York 11530

Tel (516) 393-8400 FAX (516) 393-8484

Contractor Meridian Electrical Associates, Inc

Address 2501 Bristol Rd
Warrington, PA 18976

Tel (215) 918 0277 FAX (215) 918 0299

Contractor License No. 10693

Federal Emp. No. 23 274 3158

B. ELECTRICAL CHARACTERISTICS

Use Group Present M Proposed M

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as RETAIL Utility Co. GPU

Est. Cost of Elec. Work $ 35,000

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

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
55		Lighting Fixtures
		Receptacles
22		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		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
22	1	KW Elec. Sign/Outline Light

COMMERCIAL

FEE (Office Use Only)

$

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[X] Elec. Plans Approved
Date: 9 7 05
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 12 15 05
Approved by:

INSPECTIONS — Dates (Month/Day) — Failure — Failure — Approval — Initial

Type:				
Rough	Partial at dishwasher only		9 30 05	
~~Barrier-Free~~ Rough			12 10 05	
Trench				
Temp. Serv.				
Constr. Serv.				
~~TCO~~ Sched.				
Other DNTO P.220				
Service				
Final			12 15 05	
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

Bricktown Plaza

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control #
Date Issued 9/8/05
Permit # 05-3588

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 Qualification Code F
Work Site Location 135-167 Van Zile Road
Brick, New Jersey 08724
Owner in Fee Bricktown Plaza Associates
Address c/o Skyline Management
600 Old Country Rd. Garden City, New York 11530
Tel (516) 393-8400
Contractor MAC Sprinkler
Address 1601-G Farmers Street
Newtown PA 19057
Tel (215) 547-5884 FAX (215) 547-4228
Fire Protection Equipment, NJ Div of Fire Safety Permit No. P00538
Fire Protection Equipment, NJ Div of Fire Safety Installer No. 154234
Fire Alarm Contractor No.
Federal Emp. No. 23-2885967

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present M Proposed M
Constr. Class: Present 2C Proposed 2C
Heating System: [ ] New OR [X] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other
Location:
Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible Capacity
Total Cost of Fire Protection Work $ 10,000

Fire Alarm System: [ ] New OR [X] Existing
Location of Panel:
Fire Suppression/Standpipe System:
[ ] New OR [X] Existing
Location of Main Control Valve:

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.
Applicant's Signature/Contractor's Signature
[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: MODIFICATIONS TO EXISTING SYSTEM
Water Supply Source TOWNSHIP EXISTING
Method of Alarm/Suppression System Supervision

COMMERCIAL

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		Call for Test
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)	60	
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [ ] Gas or [ ] Oil		
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[X] Fire Plans Approved
Date: 8/30/05
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 11-5-05
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.			12-7-05	
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final	12-7-05		12-20-05	
Other				

(Rollback)

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

2 hrs. hydro ac. 11 - 1 30 pm

12/21/00 need better bracing in canopy.
Bob ok

PLUMBING SUBCODE TECHNICAL SECTION

Date Rec 9/8/05
Date Is
Contract #
Permit # 05-3588

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 135-167 Van Zile Road
Brick, New Jersey
Owner in Fee Brickstown Plaza Associates
Address c/o Skyline Management
600 Old Country Road Garden City, New York 11530
Tele. (516) 393-8400
Contractor GREAT Plumbers
Address 215 W. Clinton Ave.
Oakyn, NJ 08107
Tele. (856) 858-9690 Fax (856) 854-4638
Lic. No. 7665
Federal Emp. No. 22 3163194

B. PLUMBING CHARACTERISTICS

Use Group Present M Proposed M
Building Sewer Size Exist. Public Sewer X Private Septic
Water Service Size Exist. Public Water X Private Well
Est. Cost of Plumbing Work $ 5,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 6/30/05
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 12-2-05
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO	Roof Drains 11/21/05	11/22/05	9/12/05	
	Addition			
	Rain Leaders		10/19/05	
	Final		12/14/05	

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's Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
2	Other Roof Drain	
6	Other Rain Leaders	
	Other	

COMMERCIAL

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

U.C.C. F130
(rev 3/96)

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

9/21/05

① NEED NEW DRAWING ON STORM DRAIN -
EXISTING 6" TO 4" -

ALSO - ROOF DRAINS - NEED NEW DRAWINGS

Township of Brick
Zoning Permit

Approved: Wednesday, June 08, 2005 **Number:** 783

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

Property Address: 135-167 Van Zile Road; Bricktown Plaza

Applicant: James C. Gibson III; Casi Construction Co., Inc.

Property Owner Bricktown Plaza Associates

Existing Use: Shopping plaza.

Proposed Use: Shopping plaza.

Proposed Construction: Exterior alterations, including façade.

Conditions:
An additional zoning permit is required for any sign or any other additional work.
All nonpermitted signs and banners must be removed from the property immediately.

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
Principal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

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

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

BLOCK 1149 LOT 1 QUALIFIER _____

PROPERTY ADDRESS 135-167 VanZile Road Brick, NJ

PERSONAL NAME OF APPLICANT James C. Gibson, III

BUSINESS NAME OF APPLICANT CAST Construction Co., Inc.

MAILING ADDRESS OF APPLICAN [redacted]

PROPERTY OWNER'S FULL NAME Skyline Management - Brielle Plaza Assoc.

PRESENT USE OF PROPERTY (check all that apply)

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

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☒ Commercial (please describe) Shopping Center - All facades being changed to match Big Kettle.

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) Facade Upgrades

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.

COMPLETED

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 Darlene Leeds Date 5/16/05

Reviewed by Zoning Office _____ Date 6/5/05 (X) Approved ( ) Denied

5/19/05

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

C-05-135353

BLOCK 1149 LOT 1 SITE ADDRESS 135-167 Van Zile Rd.
TYPE OF SITE Residential / Commercial NAME OF BUSINESS Shopping Plaza Village
APPLICANT CAST [redacted] PHONE NUMBER [redacted]
APPLICANT ADDRESS [redacted] CITY & STATE [redacted]

INCLUSIONARY DEVELOPMENT

Affordable
- Fee Required _____ Date _____
- Down Payment _____ Date _____
- Balance _____ Date _____
- Paid In Full _____ Date _____

Market Rate — No Fee Required

NO FEE REQUIRED

APPROVED BY [signature] DATE 6/15/05

MANDATORY DEVELOPER FEES

◊ Residential is .005 %

☒ Commercial is ~~.04%~~ .02%

◊ The estimated equalized assessed value of the proposed construction is

$ -0-

Frederick R Millman — 6/15/05

Frederick R. Millman, CTA, Tax Assessor — Date

◊ The final equalized assessed value of the construction at the above referenced site is:

$ -0-

Frederick R Millman — 6/15/05

Frederick R. Millman, CTA, Tax Assessor — Date

Preliminary Fee _____ Date _____
Check # _____ Receipt # _____

Final Fee _____ Date _____
Check# _____ Reciept # _____

Total Fee Due/Paid _____
Balance Due _____

Fees Imposed To Date _____
Fees Reached $15,000 _____ Date

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.

6/9/05 - Tapeless.

[signature]
Office of Affordable Housing

TOWNSHIP OF BRICK

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

Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
http://www.twp.brick.nj.us

Date: May 13, 2005

Block: 1149 Lot: 1

Property Address: 135-167 VanZile Road Brick N.J.

I, Charlene Aceto (name) of [redacted]

request to be exempt from the plot plan requirement for [redacted] pool, retaining wall, ect. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

Charlene Aceto
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.

2. Proof that the property is not located in a Flood Hazard Area.

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

COMMERCIAL

FOR OFFICE USE ONLY

Approved on: 6/15/05 Signed: [signature]

Rejected on: _____ Signed: _____

Comments:

Bldg Elect (Fire) Plumbing (Please mark subcode)

CONTROL NUMBER CO5 135353

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 135-167 VAN ZILE (BRICKTOWN PLAZA)

DATE REVIEWED: 8 2 05

REVIEWED BY: (ECR)

CONTACT CALLED/FAXED: Spoke to Bob Jordan @ MA Sprinkler 8-2-05 @ 825

1 - Need # of heads

2 - PLAN SHOWING LAYOUT AS THEY ARE CURRENTLY REMOVING OLD SYSTEM AND REPLACING

Bldg Elect Fire Plumbing (Please mark subcode)

CONTROL NUMBER C05135353

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 135-167 Van Zile Rd

DATE REVIEWED: 81005

REVIEWED BY: MM

CONTACT CALLED/FAXED: ~~Dan Wright 856-795-0001 not this #~~

PLEASE call this #
856 261 5449

L O R I N G
CONSULTING ENGINEERS

NEW YORK, NY WASHINGTON, DC PRINCETON, NJ

12 December 2005

Mr. Marc Hibbard
Building Sub-Code official
Brick, NJ

Re: Bricktown Plaza – Façade Improvement
135-67 Van Zile Road
Brick, NJ 08724
LORING No. 6695

Dear Mr. Hibbard:

Attached for your use are the revised sketches SK-P-1, SK-P-2 & SK-P-3 associated with the above referenced project.

The sketches indicate the current installed condition. The indicated pipe sizes are of adequate capacity in accordance with the latest National Standard Plumbing Code 2003.

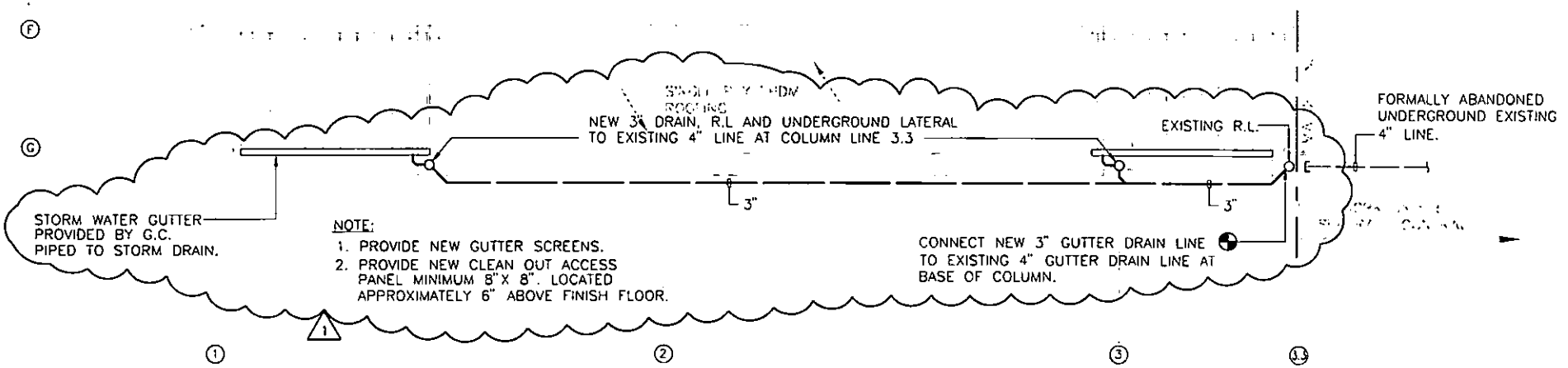
Please retain this information for your records and do not hesitate to contact us if any questions or require any further information.

Very truly yours,
Joseph R. Loring & Associates, Inc.

Danny K. Cobourne, CEM, CFPS
Senior Associate

cc: F. Consoli – JRS Architects

231 Clarksville Road
Suite 4A
Princeton Junction, New Jersey
08550
P 609 716.6160
F 609 716.6162
E info@loringengineers.com
www.loringengineers.com



1 GENERAL REVISION PER INSPECTION OFFICAL REQUEST

REFERENCED DRAWING: P-2

LORING
CONSULTING ENGINEERS

JOSEPH R. LORING & ASSOC., INC.
231 CLARKSVILLE ROAD, SUITE 4A
PRINCETON JUNCTION, NJ 08550
TEL. (609) 716-6160
FAX (609) 716-6162
WWW.LORINGENGINEERS.COM

LORING NO. 6695

PROJECT: BRICKTOWN PLAZA			JOB No.: 6695
DRAWING TITLE: NEW UNDERGROUND DRAIN FOR ALDI'S			
DRAWN BY: AT	CHECKED BY: DC	DATE: 12/09/05	DRAWING No.: SK-P-1

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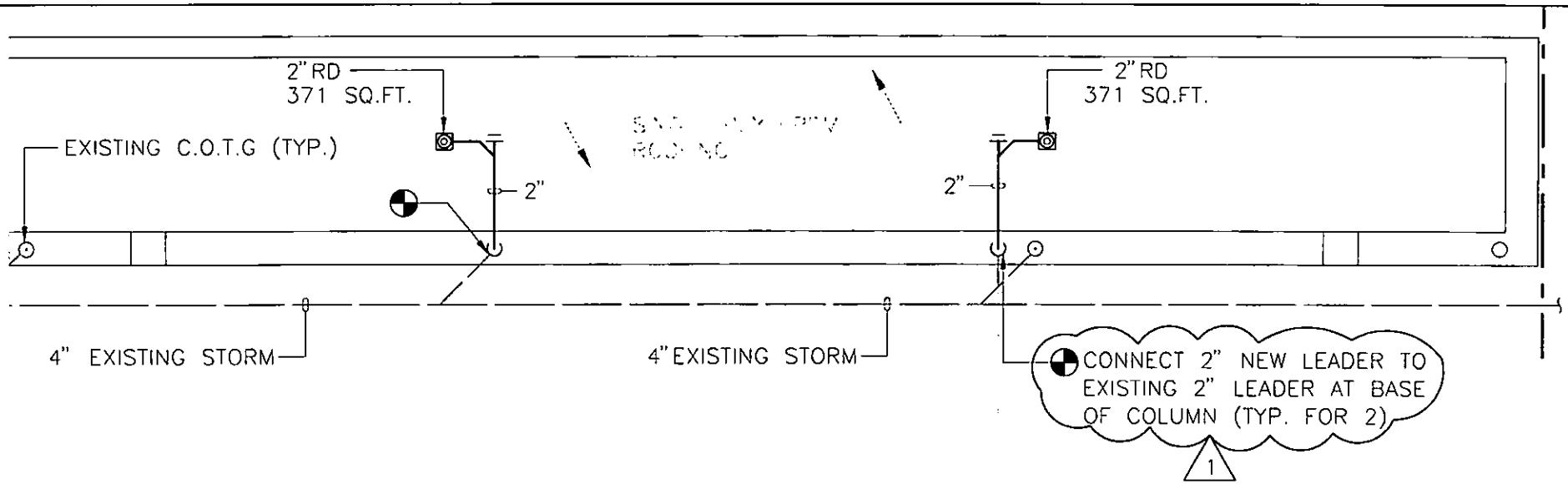

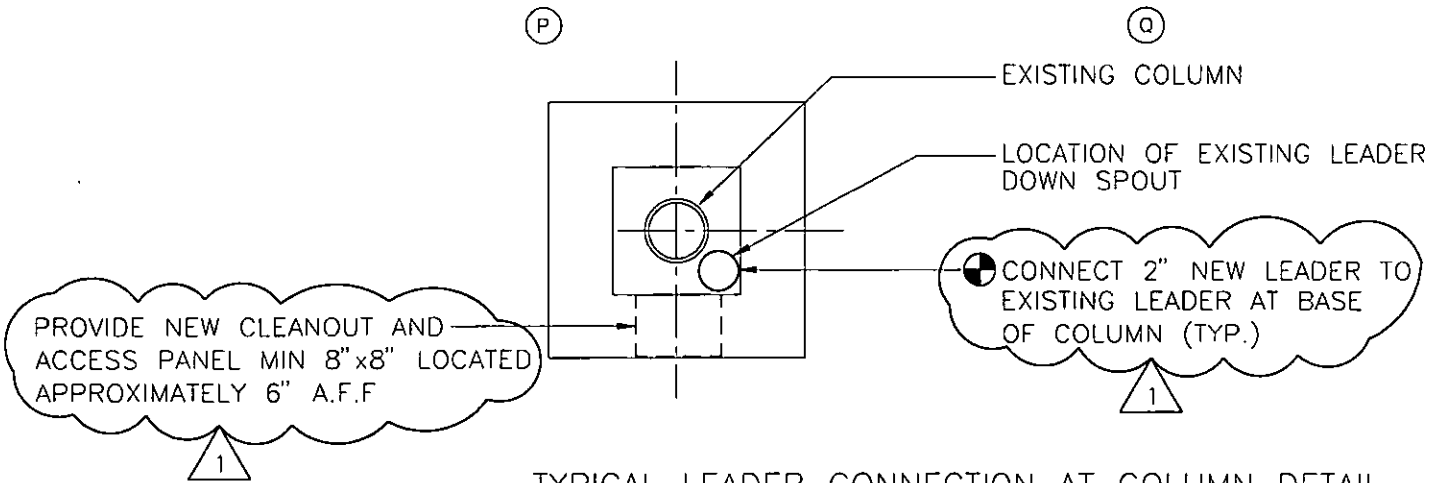

TYPICAL LEADER CONNECTION AT COLUMN DETAIL

2 GENERAL REVISION PER INSPECTION OFFICAL REQUEST

REFERENCED DRAWING: P-2

L O R I N G
CONSULTING ENGINEERS

JOSEPH R. LORING & ASSOC., INC.
231 CLARKSVILLE ROAD, SUITE 4A
PRINCETON JUNCTION, NJ 08550
TEL. (609) 716-6160
FAX (609) 716-6162
WWW.LORINGENGINEERS.COM

LORING NO. 6695

PROJECT: BRICKTOWN PLAZA			JOB No.: 6695
DRAWING TITLE: STORM PIPING CONNECTION FOR STRIP MALL			
DRAWN BY: AT	CHECKED BY: DC	DATE: 11/22/05	DRAWING No.: SK-P-2

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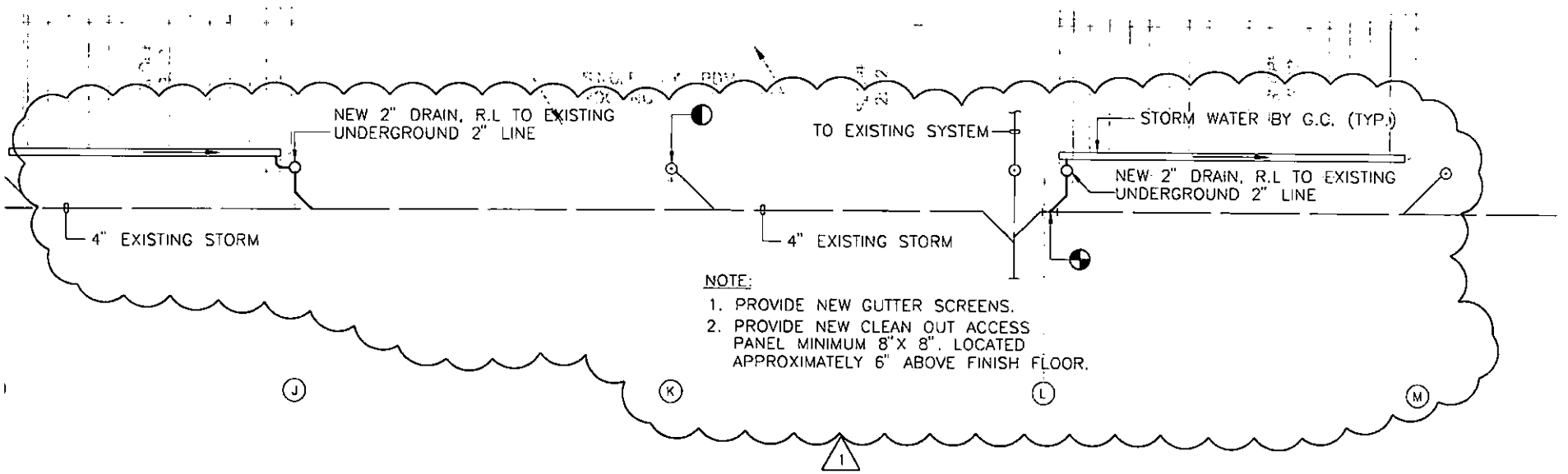

1 GENERAL REVISION PER INSPECTION OFFICAL REQUEST

REFERENCED DRAWING: P-2

LORING
CONSULTING ENGINEERS

JOSEPH R. LORING & ASSOC., INC.
231 CLARKSVILLE ROAD, SUITE 4A
PRINCETON JUNCTION, NJ 08550
TEL. (609) 716-6160
FAX (609) 716-6162
WWW.LORINGENGINEERS.COM

LORING NO. 6695

PROJECT: BRICKTOWN PLAZA			JOB No.: 6695
DRAWING TITLE: NEW UNDERGROUND DRAIN FOR BIG LOTS			
DRAWN BY: AT	CHECKED BY: DC	DATE: 12/09/05	DRAWING No.: SK-P-3

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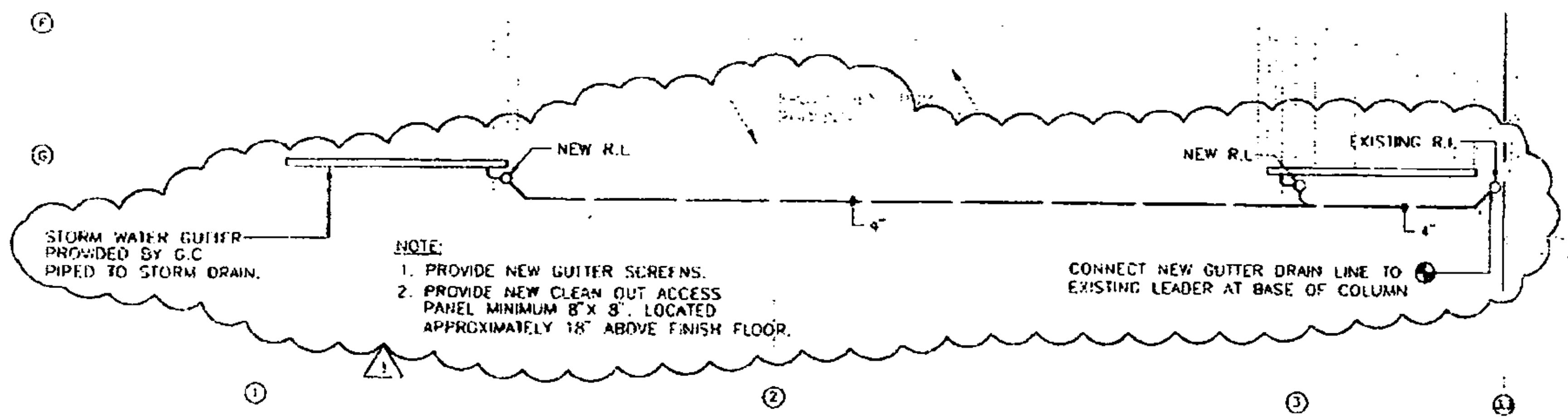


1 GENERAL REVISION

REFERENCED DRAWING: P-2

LORING CONSULTING ENGINEERS

JOSEPH R. LORING & ASSOC. INC
231 CLARKSVILLE ROAD, SUITE 4A
PRINCETON JUNCTION, NJ 08550
TEL. (609) 716-5160
FAX (609) 716-5167
WWW.LORINGENGINEERS.COM

LORING NO. 6695

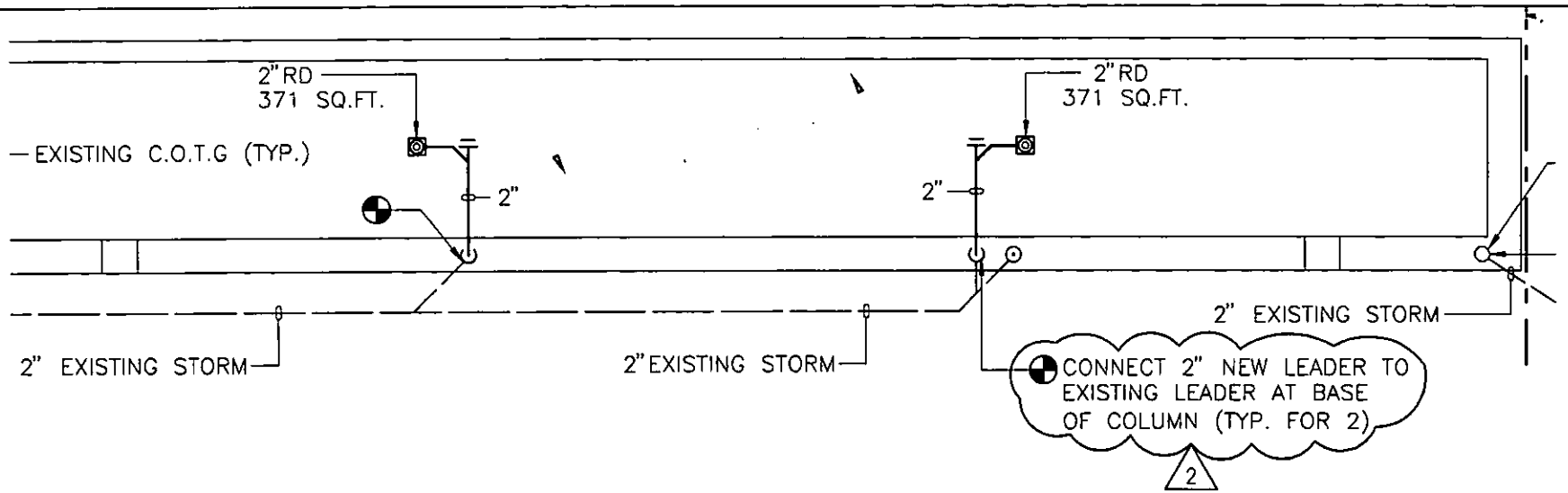
PROJECT: BRICKTOWN PLAZA			JOB NO.: 6695
DRAWING TITLE: NEW UNDERGRADE RAIN LEADER			
DRAWN BY: AT	CHECKED BY: DC	DATE: 09/22/05	DRAWING NO.: SK-P-1

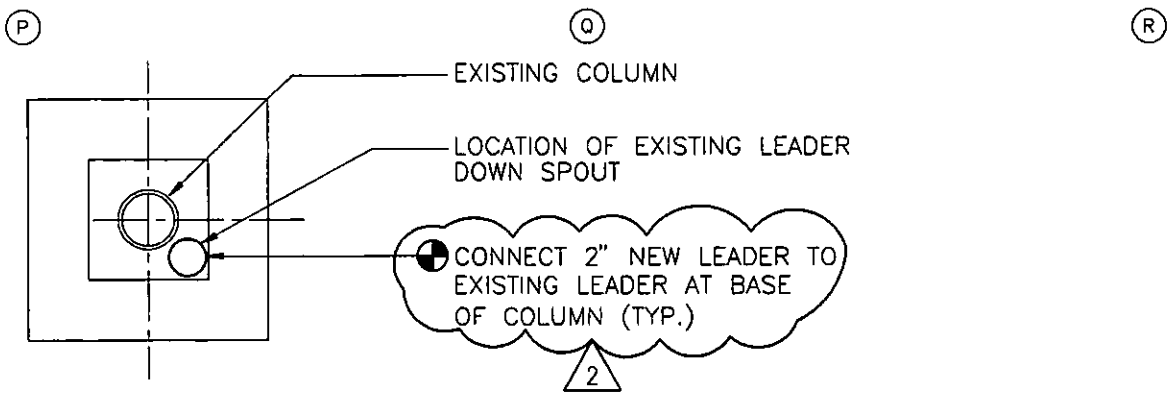
11/21/05

① - APPROVED PLANS NOT ON JOB SITE

11/22/05 ROOF DRAIN'S

① - 3" PER PLAN - (2" INSTALLED)





TYPICAL LEADER CONNECTION AT COLUMN DETAIL

2 REVISED PER CONTRACTOR COMMENTS

REFERENCED DRAWING: P-2

LORING
CONSULTING ENGINEERS

JOSEPH R. LORING & ASSOC., INC.
231 CLARKSVILLE ROAD, SUITE 4A
PRINCETON JUNCTION, NJ 08550
TEL. (609) 716-6160
FAX (609) 716-6162
WWW.LORINGENGINEERS.COM

LORING NO. 6695

PROJECT: BRICKTOWN PLAZA			JOB No.: 6695
DRAWING TITLE: STORM PIPING CONNECTION			
DRAWN BY: AT	CHECKED BY: DC	DATE: 11/22/05	DRAWING No.: SK-P-2

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