

05-0456



I. IDENTIFICATION

1 PA 5th bldg interior Clean out ✓

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

1. Number of Stories 1

2. Height of Structure 18 ft.

3. Area — Largest Floor 30,000 sq. ft.

4. New Building Area NA sq. ft.

5. Volume of New Structure NA cu. ft.

6. Construction Classification _____

7. Total Land Area Disturbed ~0~ sq. ft.

8. Flood Hazard Zone NA

9. Base Flood Elevation NA ft.

10. Wetlands yes NA
 no _____

11. Max. Live Load NA

12. Max. Occupancy Load _____

[illegible]

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

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	

1. State Specific Use: *commercial store*
2. Use Group: *commercial store*
3. Change in Use Group, Indicate Former:

USE BUILDING SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

2-16-05
05-0456

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
Owner in Fee Brick Plaza Assoc
Address _____
Tele. (____) 211-999
Contractor Environmental Systems
Address 550 E. Union St
Washington Pa 154382
Tele. (610) 701 9000
Lic. No. or Bldgs. Reg. No. _____
Federal Emp. No. 23-2727748 or Social Security No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
			Type:	Failure	Approval
☐ No Plans Req.			Footings		
☐ All			Foundation		
☐ Footing			Slab		
☐ Foundation			Frame		
☐ Other			Insulation		
Joint Plan Review Required:			Finishes:		
☐ Elec. ☐ Plumb. ☐ Fire			Energy		
SUBCODE APPROVAL			Mechanical		
☐ CO ☐ CCO ☐ CA			TCO		
Date: _____			Other		
Approved By: _____			Final		

B. BUILDING CHARACTERISTICS

Use Group Store Present Store Proposed Store
Constr. Class 1 Present 1 Proposed 1
No. of Stories 18
Height of Structure 18' Ft.
Area—Largest Floor 30,000 Sq. Ft.
New Bldg. Area/All Floors -0-774 Sq. Ft.
Volume of New Structure -0-774 Cu. Ft.
Total Land Area Disturbed -0-774 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ 50,000

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.

Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

*Selective demolition
floor tile non asbestos
non bearing interior walls (qwb)
existing storefront
drooping in 11.8 bts*

(Office Use Only)
FEE

\$ _____

TYPE OF WORK:
☐ New Building
☐ Addition
☐ Alteration
☐ Roofing
☐ Siding
☐ Fence
☐ Sign
☐ Pool
☐ Asbestos Abatement
☐ Other
☒ Demolition

Height (6' or over)
Sq. Ft.

Selective interior

Paid ☐ Check # _____ Administrative Surcharge \$ _____
Collected by: _____ Minimum Fee \$ _____
DCA TRAINING FEE \$ _____
TOTAL FEE \$ _____

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.

☒ Check if contractor.

Agent Name Alliance Environmental Systems
Address 550 E Union St
West Chester Pa 19382
Telephone (610) 701 9000
Signature Samy Bandy

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

Applicable to Ordinance 720-92

This form must be handed in with permit application or a permit will not be issued

TOWNSHIP OF BRICK

Debris Form

Work Site Address: 135-167 Van Zile Rd

Block: 1149 Lot: 1

Contractor: Alliance Environmental Systems

Contractor's Address: 550 E Union St

Type of Construction (minor, new home): interior demolition

Type of Debris (shingles, siding, wood, etc.): floor tile drops 1/25

Party responsible for removal: Alliance Environmental Systems

Dumpster size: Trailers 60 - 100 yds

Destination of debris: DRPI 198 Marsh Rd New Castle De
19720

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclable.

Generator's Certification: Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation.

Larry Brownell
Signature

2/16/05
Date

Larry Brownell
Print Name



CONSTRUCTION PERMIT

Date Issued 02/16/2005
Control # C-05-132794
Permit # 05-0456

IDENTIFICATION Block: 1149 Lot: 1 Qualifier _____
Work Site Location: 135-167 VAN ZILE RD. Brick Township, NJ Contractor _____
Address _____
Owner in Fee BRICKTOWN PLAZA ASSOCIATES
Address 600 OLD COUNTRY RD #425 GARDEN CITY NJ Telephone: _____
11530 Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ Federal Employee No. _____

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:

Note: If construction 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 \$1

Construction Official _____ Date 02/16/2005

U.C.C. F170
equiv (rev 8/03)

INSPECTOR COPY

PAYMENTS (Office Use Only)

Building	\$40
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$40
Check No.	
Cash	\$40
Credit	\$0
Collected By	Mary Jane Rinaldi