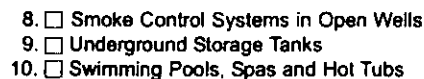


08.3588



LDS BR-B 10524328

APPROVED BY

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 CHST Construction Co., Inc.

Address 2 West Everham Road

Cherry Hill, NJ 08003

Telephone (856) 795-0001

Signature Therese Cecato

- 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
	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. 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	Other
Building _____	Energy _____	
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

[illegible]

☒ Zoning Application deemed complete

Initialed:

Date:

☐ 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.

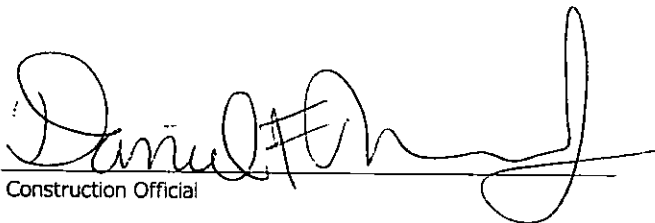
- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ **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

Date Printed: 02/14/2006

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

Page 1



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 Contractor CAST CONSTRUCTION CO INC
Address 2 W EVESHAM ROAD CHERRY HILL NJ 08003
Owner in Fee BRICKTOWN PLAZA ASSOCIATES
Address 600 OLD COUNTRY RD #425 GARDEN CITY NJ
11530 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:

ALTERATION FACADE UPGRADES

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 \$540,500

Construction Official _____ Date 09/08/2005

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

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

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 Contractor CAST CONSTRUCTION CO INC
Address 2 W EVESHAM ROAD CHERRY HILL NJ 08003
Owner in Fee BRICKTOWN PLAZA ASSOCIATES
Address 600 OLD COUNTRY RD #425 GARDEN CITY NJ
11530 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 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 \$35,000

Construction Official

09/08/2005
Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

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

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



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

Block 1149 Qualification Code 041N
Work Site Location 135-16th Ave 2nd Floor Jersey
Owner in Fee Bickel New Jersey Assoc. (856-261-5447)
Address 608 9th Ave 2nd Floor Jersey City, NJ 07310
Tel. (516) 393-8400
Contractor West Fresh Pond Road
Address West Fresh Pond Road
Tel. (856) 795-0001 FAX (856) 795-6040
Contractor License No. or Builder Registration No. 22-3170834
Federal Emp. No. 22-3170834

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Failure	Approval	Initial
☐ No Plans Required			Type:				
☒ All	<u>7/25/05</u>		Footing				
☐ Footing			Footing Bonding				
☐ Foundation			Foundation				
☐ Frame			Slab				
☐ Other			Frame				
Joint Plan Review Required:			Barrier-Free				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation				
SUBCODE APPROVAL			Finishes - Base Layer				
☐ CO ☐ CCO ☐ CA			Finishes - Final				
Date: <u>7-13-06</u>			Energy				
Approved by: <u>Final</u>			Mechanical				
			TCO				
			Other				
			Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present M Proposed M
Constr. Class Present 2C Proposed 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. \$ 525,500
2. Rehabilitation \$ 525,500
3. Total (1+2) \$ 1,051,000

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 Michael J. Bickel

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Fascade Upgrades

TYPE OF WORK:

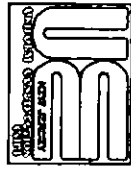
- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence
- ☐ Sign
- ☐ Pool
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☒ Other Fascade upgrades
- ☐ Demolition

FEE (Office Use Only)

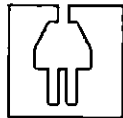
Administrative Surcharge \$
Minimum Fee \$
State Permit Surcharge Fee \$
TOTAL FEE \$

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

Bricktown Plaza



ELECTRICAL SUBCODE
TECHNICAL SECTION



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

Block 119 Lot 135467 Vag 2 Le Road Qualification Code 119

Work Site Location Bricktown New Jersey

Owner in Fee Bricktown Plaza Associates

Address 610 Skyline Management

600 Ad County Road Garden City New York 11530

Tel (516) 845-8841 393-8400 New York 11530

Contractor ATARIUM ELECTRIC ASSOCIATES INC

Address 2301 BRISTOL RD

WATERBURY, CT 06726

Tel (203) 918 0227 FAX (203) 918 0227

Contractor License No. 10693

Federal Emp. No. 23 274 3158

B. ELECTRICAL CHARACTERISTICS

Use Group Present M Proposed M

☐ Pole/Pad # 1 ☐ Temporary ☐ Other 1

Building Occupied as RETAIL Utility Co. CECU

Est. Cost of Elec. Work \$ 35,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plans Required

Joint Plan Review Required:

☐ Building ☐ Plumbing

☒ Fire ☐ Elevator

☒ Elec. Plans Approved

Date: 9 20 03

Approved by: WM

SUBCODE APPROVAL

☐ CO ☐ CCO MTCA

Date: 12 15 05

Approved by: WM

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

Licensed Elec. Contractor ☐ Certified Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

Lighting Fixtures

Receptacles

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 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

Date Received
Control # 918105
Date Issued 05-3588-44
Permit # 005-135353-1

COMMERCIAL

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

Buckhorn Plaza



FIRE PROTECTION SUBCODE TECHNICAL SECTION

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

Block 1149 Qualification Code P

Work Site Location 135-167th Ave 2nd Floor, Room 08724

Owner in Fee Buckhorn Plaza Assoc

Address 608 Old York Rd, Garden City, New York 11530

Tel (516) 393-8400

Contractor NYC Sprinkler

Address 1001-6 Farming Pt

Tel (212) 547-5884 FAX (212) 547-4228

Fire Protection Equipment, NJ Div of Fire Safety Permit No. 100538

Fire Protection Equipment, NJ Div of Fire Safety Installer No. 154234

Fire Alarm Contractor No. 23-2885967

Federal Emp. No. 23-2885967

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present M Proposed M Fire Alarm System: ☐ New or ☒ Existing

Constr. Class: Present 2C Proposed 2C Location of Panel: _____

Heating System: ☐ New or ☒ Existing ☐ HVAC Fire Suppression/Standpipe System: _____

Type: ☒ Gas ☐ Oil ☐ Electric ☐ Solar ☐ Other _____

Location: _____ Location of Main Control Valve: _____

Fuel Storage Tank: _____

Fuel Type: ☐ Flammable or ☐ Combustible Capacity _____

Total Cost of Fire Protection Work \$ 10,000

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent, owner, or) 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 DISMOUNT

Water Supply Source TOWNSHIP EXISTING

Method of Alarm/Suppression System Supervision _____

Flammable/Combustible Tanks _____

Alarm Systems _____

☐ System ☐ 110v Interconnected ☐ CO Detectors/110v

Alarm Devices (i.e., smoke, heat, pulls, water/flow) _____

Supervisory Devices (i.e., tamper, low/high air) _____

COMMERCIAL

Suppression Systems _____

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) _____

Standpipes _____

Pre-engineered Systems _____

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

FM200 Suppression _____

Other _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Fired Appliances ☐ Gas or ☐ Oil _____

Fireplace Venting/Metal Chimney _____



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

I hereby certify that I am the (agent, owner, or) 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 DISMOUNT

Water Supply Source TOWNSHIP EXISTING

Method of Alarm/Suppression System Supervision _____

Flammable/Combustible Tanks _____

Alarm Systems _____

☐ System ☐ 110v Interconnected ☐ CO Detectors/110v

Alarm Devices (i.e., smoke, heat, pulls, water/flow) _____

Supervisory Devices (i.e., tamper, low/high air) _____

Signaling Devices (i.e., horns/strobes, bells) _____

Other Devices _____

TOTAL _____

Suppression Systems _____

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) _____

Standpipes _____

Pre-engineered Systems _____

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

FM200 Suppression _____

Other _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Fired Appliances ☐ Gas or ☐ Oil _____

Fireplace Venting/Metal Chimney _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

2 hr. hydro dc. 11-130 pm
12/2/00 need better bracing in canopy.
Book



**PLUMBING
SUBCODE
TECHNICAL SECTION**

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

Block 1149 Lot 135-167 Van Zile Road
Work Site Location Block, New Jersey
Owner in Fee Backhaus Plaza Associates
Address 400 Old County Road, Garden City, New York 11530
Tel. (516) 393-1800
Contractor CREAT Plumbers
Address 215 W. Clinton Ave.
Tel. (856) 858-9690 Fax (856) 854 4638
Lic. No. 0A144/NJ 08127
Federal Emp. No. 02 3163114

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		INSPECTIONS			
Joint Plan Review Required:		Type:	Failure	Failure	Dates (Month/Day)
☐ No Plans Required		Slab			Approval Initial
☐ Building	☐ Electric	Rough			
☐ Fire	☐ Elevator	Water			
☐ Plumbing Plans Approved		Sewer			
Date: <u>6/30/05</u>		Fixtures			
Approved by: <u>[Signature]</u>		Gas Equipment			
		Solar			
SUBCODE APPROVAL					
☐ CO	☐ CCO				
Date: <u>12-2-05</u>	<u>EX</u>				
Approved by: <u>[Signature]</u>					

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 [Signature]

☒ Licensed Plumbing Contractor ☐ Exempt Applicant



Date Rec'd 9/8/05
Date Iss'd 05-3588
Contract #
Permit #

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		
	Other <u>Roof Drain</u>		
	Other <u>Rain leader</u>		
	Other		

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

COMMERCIAL

9/21/05

Need new drainage on Steam Drain -
Existing 6" TO 4" -

AND - Roof Drains - Need new Parameters

**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

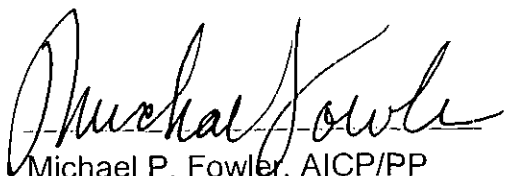
Existing Use: Shopping plaza.

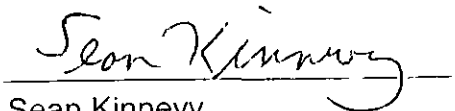
Proposed Use: Shopping plaza.

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 Van Zile Road Brick, NJ
PERSONAL NAME OF APPLICANT James C. Gibson, III
BUSINESS NAME OF APPLICANT CAST Construction Co., Inc.
MAILING ADDRESS OF APPLICANT 2 West Evesham Rd, Cherry Hill, NJ 08003
PROPERTY OWNER'S FULL NAME Skyline Management - Bricktown 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

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.

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 [Signature] Date 5/16/05

Reviewed by Zoning Office _____ Date 6/8/05 (X) Approved () Denied

COMMERCIAL

5/19/05

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

0-05-135353

BLOCK 1149 LOT 1 SITE ADDRESS 135-167 Vax Tide Rd.
TYPE OF SITE Residential / Commercial NAME OF BUSINESS SHORNICK PLAZA CARADE
APPLICANT CART CONSTRUCTION CO LLC 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

MANDATORY DEVELOPER FEES

- ◇ Residential is .005 %
- ✗ Commercial is .04% .02%
- ◇ The estimated equalized assessed value of the proposed construction is

APPROVED BY [Signature] DATE 6/15/05

\$ - 0 -

[Signature: Frederick R. Millman]
Frederick R. Millman, CTA, Tax Assessor

6/15/05
Date

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

\$ - 0 -

[Signature: Frederick R. Millman]
Frederick R. Millman, CTA, Tax Assessor

6/15/05
Date

Preliminary Fee _____
Check # _____

Date _____
Receipt # _____

Final Fee _____
Check# _____

Date _____
Receipt # _____

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 - Ta peller

[Signature: Maria Jose Linares]
Office of Affordable Housing

TOWNSHIP OF BRICK

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



Joseph C. Scarpelli, Mayor

Township Council:

Stephen C. Acropolis – President
Gregory S. Kavanagh
Anthony Matthews
Kathy M. Russell
Ruthanne Scaturro
Michael A. Thuiien, Sr.
Frederick J. Underwood, Sr.

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, NJ

I, Charlene Aceto of [REDACTED]
(name)

request to be exempt from the plot plan requirements for a swimming 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.

FOR OFFICE USE ONLY

Approved on: 6/15/05

Signed: [Signature]

Rejected on: _____

Signed: _____

Comments:

COMMERCIAL

Bldg

Elect

Plumbing

(Please mark subcode)

Fire

CONTROL NUMBER CoS 135353

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION:

135-167 VAR Zile

DATE REVIEWED:

8 205

REVIEWED BY:

ECR

CONTACT CALLED/FAXED:

Spoke to Bob Jordan @ Mr. Spradler
8-2-05 @ 825

1- Need #2 heads

2- Plan showing layout as they are comply

removing old system and replacing

Bldg

Elect

Fire

Plumbing

(Please mark subcode)

CONTROL NUMBER 605135353

amr
TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 135-167 Van Zile Rd

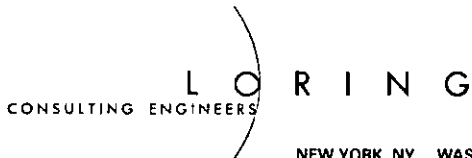
DATE REVIEWED: 81005

REVIEWED BY: MM

CONTACT CALLED/FAXED:

~~Van Zile~~
~~856-795-0001~~
~~not this~~

Please call this #
856 261 5449



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

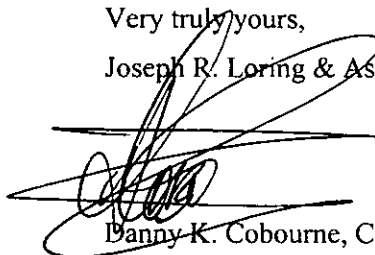
Dear Mr. Hibbard:

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.



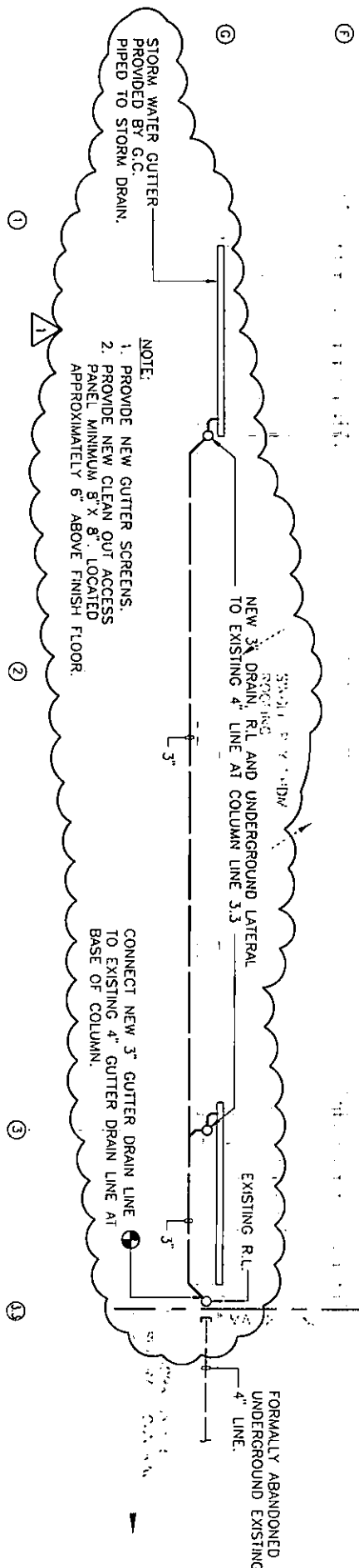
Danny K. Cobourne, CEM, CFPS
Senior Associate

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

Joseph R. Loring &
Associates, Inc.

05--12-12 Letter to Mark



1 GENERAL REVISION PER INSPECTION OFFICIAL 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:

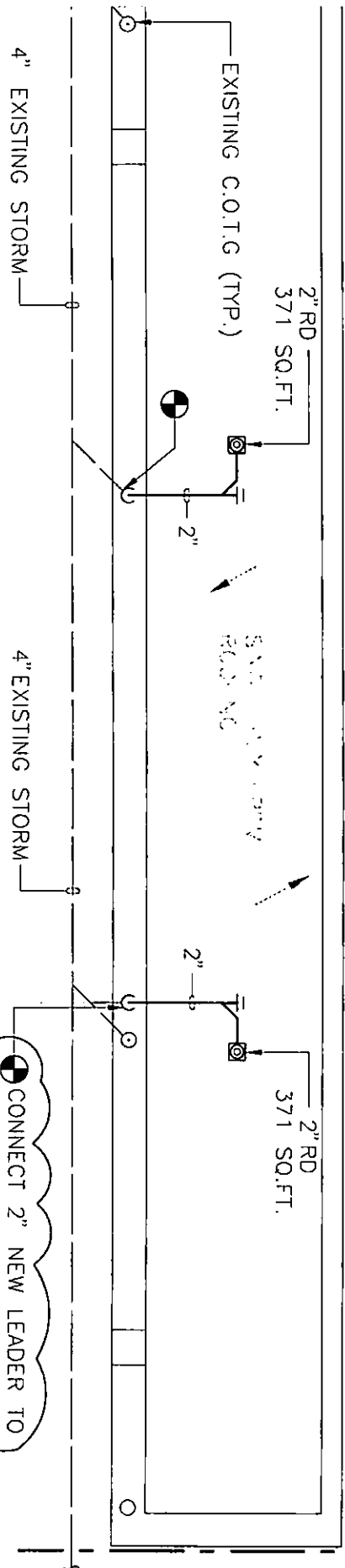
DC

DATE:

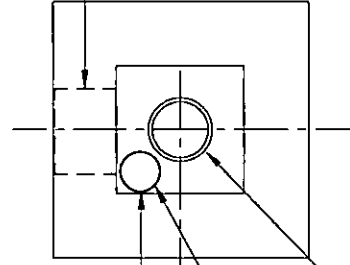
12/09/05

DRAWING No.:

SK-P-1



PROVIDE NEW CLEANOUT AND ACCESS PANEL MIN 8"x8" LOCATED APPROXIMATELY 6" A.F.F.



CONNECT 2" NEW LEADER TO EXISTING LEADER AT BASE OF COLUMN (TYP.)

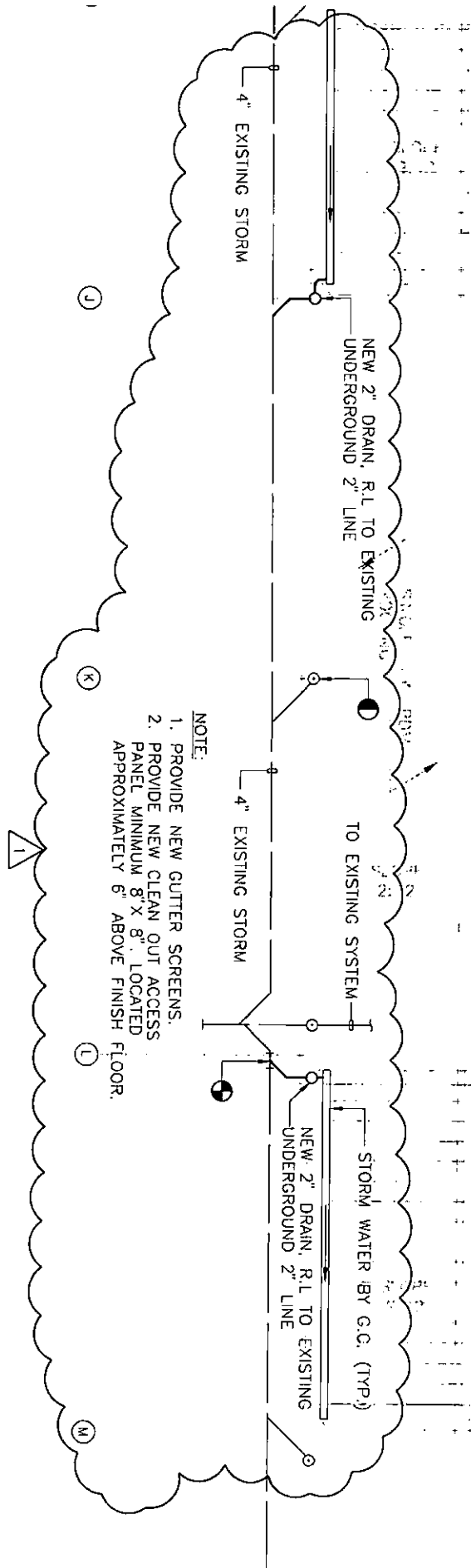
CONNECT 2" NEW LEADER TO EXISTING 2" LEADER AT BASE OF COLUMN (TYP. FOR 2)

TYPICAL LEADER CONNECTION AT COLUMN DETAIL

2 GENERAL REVISION PER INSPECTION OFFICAL REQUEST

REFERENCED DRAWING: P-2

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		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	



- NOTE:
1. PROVIDE NEW GUTTER SCREENS.
 2. PROVIDE NEW CLEAN OUT ACCESS PANEL MINIMUM 8" X 8" LOCATED APPROXIMATELY 6' ABOVE FINISH FLOOR.

1 GENERAL REVISION PER INSPECTION OFFICIAL REQUEST

REFERENCED DRAWING: P-2

CONSULTING ENGINEERS

L O R I N G

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:

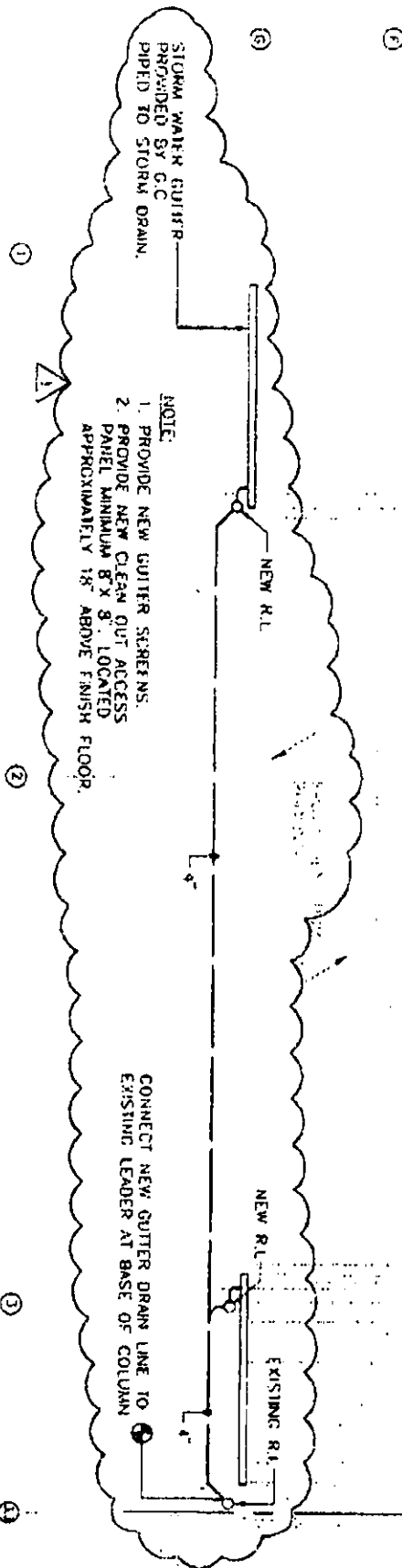
DC

DATE:

12/09/05

DRAWING No.:

SK-P-3



NOTE:
 1. PROVIDE NEW GUTTER SCREENS.
 2. PROVIDE NEW CLEAN OUT ACCESS PANEL MINIMUM 8" X 8" LOCATED APPROXIMATELY 18" ABOVE FINISH FLOOR.

CONNECT NEW GUTTER DRAIN LINE TO EXISTING LEADER AT BASE OF COLUMN

1 GENERAL REVISION

REFERENCED DRAWING: P-2

CONSULTING ENGINEERS

L R I N G

JOSEPH A. LORINC & ASSOC. INC.
 231 CLARKSVILLE ROAD SUITE 3A
 PRINCETON JUNCTION NJ 08550
 TEL: (609) 716-5160
 FAX: (609) 716-5162
 WWW.LORINCENGINEERS.COM
 LORINC NO. 6695

PROJECT: **BRICKTOWN PLAZA**

DRAWING TITLE:

NEW UNDERGRADE RAIN LEADER

JOB NO.: 6695

DRAWN BY:	CHECKED BY:	DATE:	DRAWING NO.:
AT	DC	09/22/05	ST-P-1

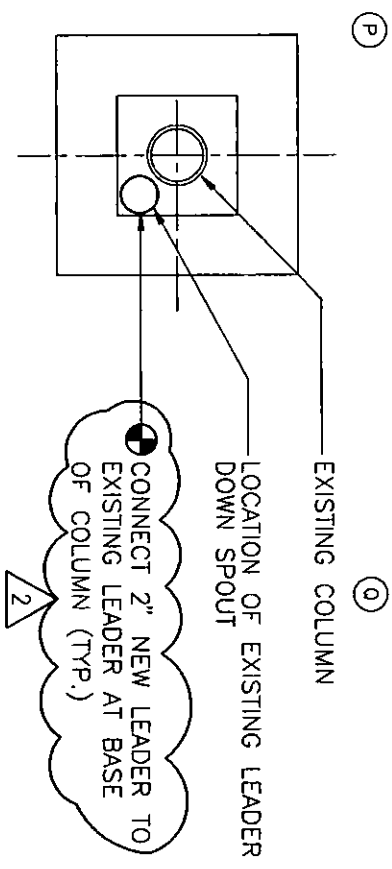
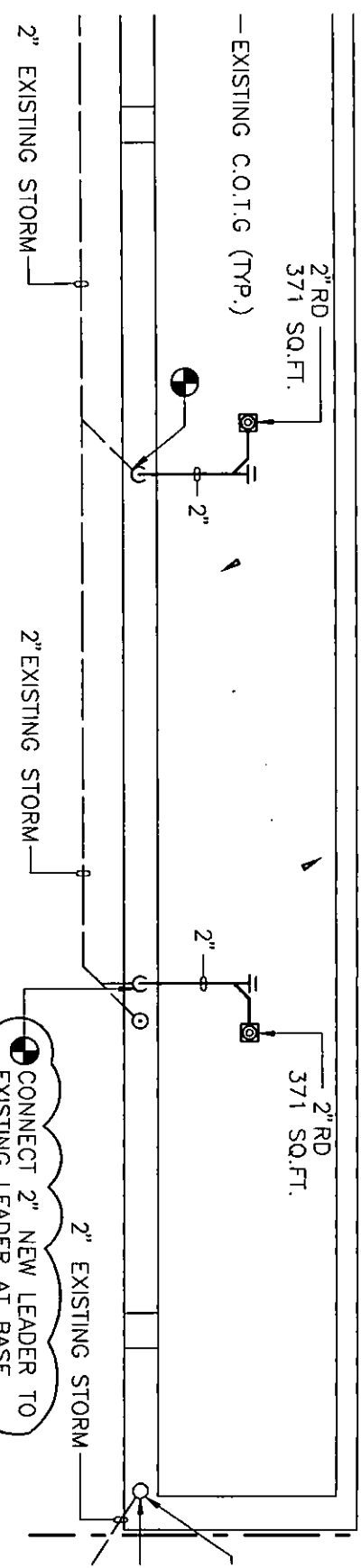
11/21/05

① - APPROVED PLANS NOT ON JOB SITE

11/22/05 ROOF DRAINS

① - 3" PER PLAN - (2" INSTALLED)

Marks Copy



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) 716-8162
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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