

BLOCK

701

LOT

7

ADDRESS (SITE)

SAMIE'S CARDS & GIFTS
CALDON'S S/C
644 RT 70 & CHAMBERSBURG RD
PERMIT NO. 3928-97RECEIVED mail in
Applicant Completes: Sections I, II, III (optional), IV, VI and VII

DEC 04 1997

IV. OF INSPECTION

I. IDENTIFICATION

Proposed Work-site at: SAMIE'S CARDS & GIFTS 20K
CALDON'S S/C
644 RT 70 & CHAMBERSBURG RD

Name of Owner in Fee: SAMIE'S CARDS & GIFTS Tel. (732) 255-2655

Address 1843 HOPKINS AVE. TOM RIVER NJ 08753
street municipality zip code

3. Ownership in Fee: Public ☐ Private ☒

4. Principal Contractor: YATES SIGN CO., INC. Tel. (732) 578-1818
 Address 556 INDIAN WY. W. EATONTOWN NJ 07724

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Federal Emp. No. 21-718-184 Social Security No. _____

5. Architect or Engineer _____ Tel. () _____
 Address _____

6. Responsible Person in Charge of Work Jim Suttell Tel. (732) 578-1818

V. FEE SUMMARY (for office use only)

violation		Update	Update
1. Building	\$ <u>60</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	\$ <u>2</u>		
10. Subtotal	\$		
11. Cert. of Occupancy	\$ <u>15</u>		
12. Other <u>20A</u>			
13. TOTAL	\$ <u>177</u>		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories _____

2. Height of Structure _____ ft.

3. Area—Largest Floor _____ sq. ft.

4. New Building Area _____ sq. ft.

5. Volume of New Structure _____ cu. ft.

6. Construction Classification _____

7. Total Land Area Disturbed _____ sq. ft.

8. Flood Hazard Zone _____

9. Base Flood Elevation _____ ft.

10. Wetlands yes _____ sq. ft.
 no _____

11. Max. Live Load _____

12. Max. Occupancy Load _____

II. PROPOSED WORK

1. ☐ Minor work (single trade)
2. ☐ Small Job (\$5,000 and no prior approvals)
3. ☐ New Building
4. ☐ Addition
5. ☒ Alteration
6. ☐ Fire Protection
7. ☐ Plumbing
8. ☐ Electrical
9. ☐ Elevator Devices
10. ☐ Asbestos Abatement
11. ☐ Demolition
- TOTAL COSTS

Est. Cost

2,500.-

2,500.-

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>JS</u>	<u>12/4/97</u>		<u>12-12-97</u>	<u>JS</u>	<u>12-23-97</u>		<u>JS</u>
<u>JS</u>	<u>12/9/97</u>		<u>12/9/97</u>	<u>JS</u>			<u>JS</u>

III. DO YOU WANT: (optional) 1 ☐ Partial Releases 2 ☐ Prototype Processing

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

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:

Before Construction _____

After Construction _____

Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use:

retail

2. Use Group:

3. Change in Use Group.

Indicate Former:

AHBT PRELIMINARY APPROVAL

LDS BR 10408843

B.T. - MANDATORY FEE - COMMERCIAL

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 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; I further acknowledge that said new home is not covered under the New Home Warranty and Builder 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 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 at 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 at 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 New Jersey 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 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 YATES SIGN CO., INC.

Address 556 INDUSTRIAL WAY WEST
BATONTOWN NJ 07724

Telephone (732) 578-1818

Signature [Signature] Date 12/1/97

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	
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protection									
☐ Utility Dig No.									
☐ Other									
☐									
☐									

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 EXPIRED
☐ Temporary Certificate of Occupancy	No. _____
☐ Temporary Certificate of Occupancy	No. _____
☐ Continued Certificate of Occupancy	No. _____
☐ Certificate of Occupancy	No. _____
☐ Certificate of Approval	No. _____
☐ None	

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.
- ☐ A complete copy of approved plans must be kept on the job site.
If you do not understand any of this information, please ask.



CONSTRUCTION PERMIT

Date Issued 12-19-97
Control #
Permit # 3928-97

IDENTIFICATION. Block 701 Lot 7
Work Site Location 1044 Rt 70 + Cranford Edge Contractor Halligan Co.
Address Paterson, NJ
Owner In Fee Sam's Cards & Gifts
Address 1843 Harper Ave
Paterson, NJ
Tele. () 255 21055
Tele. ()
Lic. No. or Bldrs. Reg. No. Exp. Date
Federal Emp. No.
or Social Security No.

Is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER
☐ ELECTRICAL ☐ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

sign

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 \$ 2500 -
Flurea 2013
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	<u>100 -</u>
Plumbing	
Electrical	
Fire Protection	
Other	<u>violation 100 -</u>
Other	
DCA Training Fee	<u>2 -</u>
Cert. of Occ.	
Other	<u>70 15 -</u>
Total	<u>177 -</u>
Check No.	<u>994</u>
Cash	
Collected By:	<u>JM</u>

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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

Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

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

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

(908) 828-1808



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 701 Lot 7

Work Site Location Samie's Cakes & Gifts
644 Rt. 70 & Chambersbridge Rd

Owner In Fee Samie's Cakes & Gifts
Address 1813 Hooper Ave Toms River NJ 08753

Tele. (732) 255-2655 C. / 12

Contractor Yates Sign
Address 556 Industrial Way West
Eatontown NJ 07024

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

Lic. No. or Bids. Reg. No. 210-718-184
Federal Emp. No. 210-718-184

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Failure	Approval	Initial
☐ No Plans Required			Type:				
☒ All	<u>12-19-97</u>	<u>EG</u>	Footing				
☐ Footing			Foundation				
☐ Foundation			Slab				
☐ Frame			Frame				
☐ Other			Barrier-Free				
Joint Plan Review Required:			Insulation				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Finishes				
SUBCODE APPROVAL			Energy				
☐ CO ☐ CCO ☐ CA			Mechanical				
Date:			TCO				
Approved by:			Other				
			Final				
			Barrier-Free				

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg. \$ 2500.00
2. Alteration \$ 2500.00
3. Total (1+2) \$ 5000.00



Date Received 12-19-97
Date Issued 3988-97
Control # 3988-97
Permit # 3988-97

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 [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
<u>ALTERATION SET BY SAMIE'S CAKES & GIFTS. ILLUM. OF CHARNEL LETTERS ON STOREFRONT ELEVATION</u>

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☒ Alteration
 - ☐ Roofing
 - ☐ Siding
 - ☐ Fence
 - ☒ Sign 59.5 Sq. Ft.
 - ☐ Pool
 - ☐ Asbestos Abatement Subchapter 8
 - ☐ Lead Haz. Abatement NJAC 5:17
 - ☐ Other
- ☐ Demolition

FEE (Office Use Only)

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

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: December 8, 1997 1997 - 2837

Block 701 Lot 7 Zone B-3, H.D.

Property Address: 644 Route 70, Caldor Plaza

Owner: Landthorp Enterprises, Inc. (Phone): ----

Applicant: Yates Sign Co., Inc. (Phone): (732) 578-1818

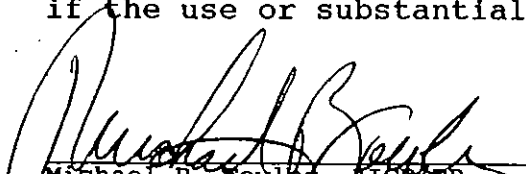
Existing Use: Retail unit, cards and gifts.

Proposed Use: Retail unit, cards and gifts.

Proposed Construction (if any): 18" by 9' and 24" by 23' channel letter sign,
13.5 square feet and 46 square feet,
"Samie's Cards & Gifts".

Conditions: Total sign area may not exceed 15% of total facade area.

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

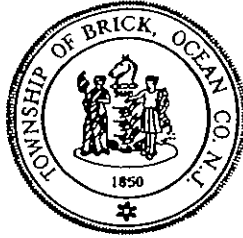

Michael P. Fowler, AICP/PP
Municipal Planner


Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723



Joseph C. Scarpelli, Mayor

Township Council

Helen Fayad, President
Stephen C. Acropolis
Martin J. Anton
Victor Cantillo
Lee Hartman
Mary Lou Powner
Michael A. Thulen

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048
FAX (732) 262-8954
<http://gbshost.com/brick>

December 12, 1997

Samies Cards & Gifts
1843 Hooper Avenue
Toms River, NJ 08753

RE: Mandatory Development Fee
Block 701, Lots 7; Sign at Samies Cards & Gifts, 644 Rt. 70 & Chambers Bridge Road

To Whom It May Concern:

The Township of Brick has enacted Ordinance 354-2C-93 in conjunction with our Fair Share Plan, which was certified by the New Jersey Council on Affordable Housing on February 3, 1993.

This Ordinance requires that commercial development applicants pay a fee in the amount of one percent of the assessed value per project. The municipal Tax Assessor has estimated the value of the work to be completed under the construction permit application received on December 4, 1997, for the above block and lot at \$1,000.00, resulting in an estimated fee of \$10.00.

Therefore, it is required that one half of the estimated fee (\$5.00) be submitted in the form of a check payable to the Township of Brick for deposit into the Affordable Housing Trust Fund. The balance is to be collected prior to issuance of the Certificate of Occupancy.

May I suggest that you contact this office approximately two weeks prior to your request for a C.O. to allow adequate time for the Assessor to conduct a final evaluation of the site.

If you have any questions, please contact me.

Sincerely,

Carol A. Wolfe
Affordable Housing Administrator

CAW/da
MDF tr

**OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE**

BLOCK 71 LOT 71 SITE ADDRESS 1211 2nd St
TYPE OF SITE Residential / Commercial TYPE OF BUSINESS None
APPLICANT None PHONE NUMBER None
APPLICANT ADDRESS None CITY & STATE None
PERMIT # None NAME OF BUSINESS None

INCLUSIONARY DEVELOPMENT

◇ Affordable	Fee Required	_____	Date	_____
	Down Payment	_____	Date	_____
	Balance	_____	Date	_____
	Paid In Full	_____	Date	_____
◇ Market Rate	No Fee Required			

MANDATORY DEVELOPER FEES

◇ Residential is .005 %

◇ Commercial is .01 %

Estimated Assessment \$ 1000.00 Date 12-11-97

Estimated Required Fee \$ 10.00

Required Deposit on Estimate \$ 5.00 Date 12-16-97

Check # 1264 Receipt # 3274

Actual Assessment \$ _____ Date _____

Actual Required Fee \$ _____

Minus Deposit of Estimate \$ _____

Balance Due \$ _____ Date _____

Check # _____ Receipt # _____

Amount Paid In Full \$ _____

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.

Carol A. Wolfe
Affordable Housing Administrator

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



Joseph C. Scarpelli, Mayor

Township Council:

Michael A. Thulen, President
Stephen C. Acropolis
Martin J. Anton
Victor Cantillo
Helen Fayad
Lee Hartman
Mary Lou Powner

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 12-11-97

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 701 LOT 7 SITE ADDRESS 144 RT-70
TYPE OF SITE Commercial TYPE OF BUSINESS General Office
(Residential/Commercial)

APPLICANT James J. ... CITY & STATE Trenton NJ

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

\$ _____

Frederick R. Millman, CTA, Tax Assessor

Date

☐ Please review the attached application for a final assessed value for the construction at the above referenced site:

\$ _____

Frederick R. Millman, CTA, Tax Assessor

Date

**OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE**

BLOCK 701 LOT 7 SITE ADDRESS 644 N. 7th St. #101
TYPE OF SITE Residential / Commercial TYPE OF BUSINESS Food
APPLICANT John Doe PHONE NUMBER 202-212-1234
APPLICANT ADDRESS 1234 Main St. Apt 101 CITY & STATE Texas 75001
PERMIT # _____ NAME OF BUSINESS John Doe's Food

INCLUSIONARY DEVELOPMENT

◇ Affordable	Fee Required _____	Date _____
	Down Payment _____	Date _____
	Balance _____	Date _____
	Paid In Full _____	Date _____
◇ Market Rate	No Fee Required	

MANDATORY DEVELOPER FEES

◇ Residential is .005 %
X Commercial is .01 %

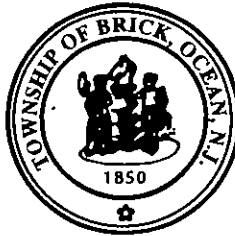
Estimated Assessment \$ 1000.00 Date 12-11-97
Estimated Required Fee \$ 10.00
Required Deposit on Estimate \$ 5.00 Date 12-16-97
Check # 1214 Receipt # 3254
Actual Assessment \$ 1000.00 Date 3-18-99
Actual Required Fee \$ 10.00
Minus Deposit of Estimate \$ 5.00
Balance Due \$ 5.00 Date 4-21-99
Check # 1234 Receipt # 3257
Amount Paid In Full \$ 10.00

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.

Carol A. Wolfe
Affordable Housing Administrator

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



Joseph C. Scarpelli, Mayor

Township Council:

Michael A. Thulen, President
Stephen C. Acropolis
Martin J. Anton
Victor Cantillo
Helen Fayad
Lee Hartman
Mary Lou Powner

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 12-11-97

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 701 LOT 7 SITE ADDRESS 644 RT-10 Chambers Bridge Rd
Samie's Cards & Gifts
TYPE OF SITE Commercial TYPE OF BUSINESS Caldor's S/C
(Residential/Commercial)

APPLICANT Samie's Cards & Gifts CITY & STATE Toms River, NJ

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

\$ 1,000
But
Frederick R. Millman, CTA, Tax Assessor
12/11/97

Date

☒ Please review the attached application for a final assessed value for the construction at the above referenced site:

\$ 1,000
Frederick R. Millman
Frederick R. Millman, CTA, Tax Assessor
3/18/99
Date

FRANK SCRUDATO
4 CROWDER DR.
TOMS RIVER, NJ 08753

1264

55-2/212
96778

12/12/97

PAY TO THE
ORDER OF

Township of Brick

\$ 5.00

Five ^{xx}/₁₀₀

DOLLARS

Security Features
are indicated
on back of note.

FIRST
UNION

First Union National Bank
Toms River, N.J.

SIGN Permit

FOR SAMIES CARDS & GIFTS

Frank Scrudato

Joseph C. Scarpetti, M

Township Council

Helen Fayad, Pr
Stephen C. Acropolis
Marlin J. Anton
Victor Cantillo
Lee Hartman
Mary Lou Powner
Michael A. Thulen

© 1996 American W

(800) 262-1040
Fax (908) 262-8954
<http://gbshost.com/brick>

To: Scott M. Pezarras, Chief Financial Officer
From: Carol A. Wolfe, Affordable Housing Administrator
Re: Affordable Housing Fees
Date: 12-16-97

Business/Development: Samies Cards & Gifts
Owner/Applicant: Frank Scrudato
Property Address: 644 RT 70 & Chambers Bridge Rd
Block: 701 Lot: 7

DEPOSIT RECEIVED

Mandatory Development Fee

Commercial

Residential

Inclusionary Development Fee

Check Number 1264

Estimated Fee \$ 10.00

Deposit Amount \$ 5.00

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee

Commercial

Residential

Inclusionary Development Fee

Check Number:

Final Fee: \$

Less Deposit: \$

Final Payment \$

FOR DEPOSIT ONLY-AFFORDABLE HOUSING TRUST ACCOUNT # 4880071456

Collection of said fees as authorized by Township Ordinance
354-2C-93, is pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C.
5:92-18 et seq.

Received in Treasurer's Office by:

Signature

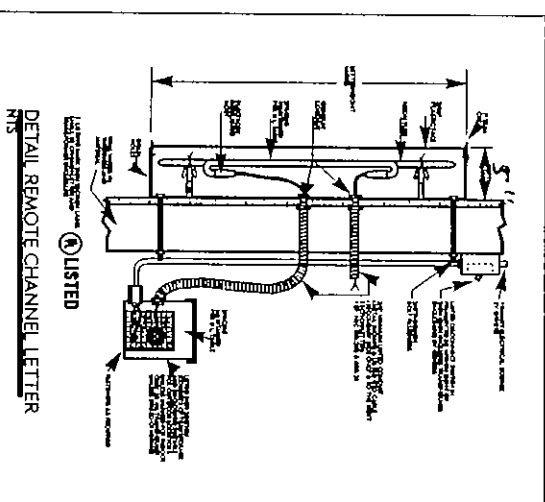
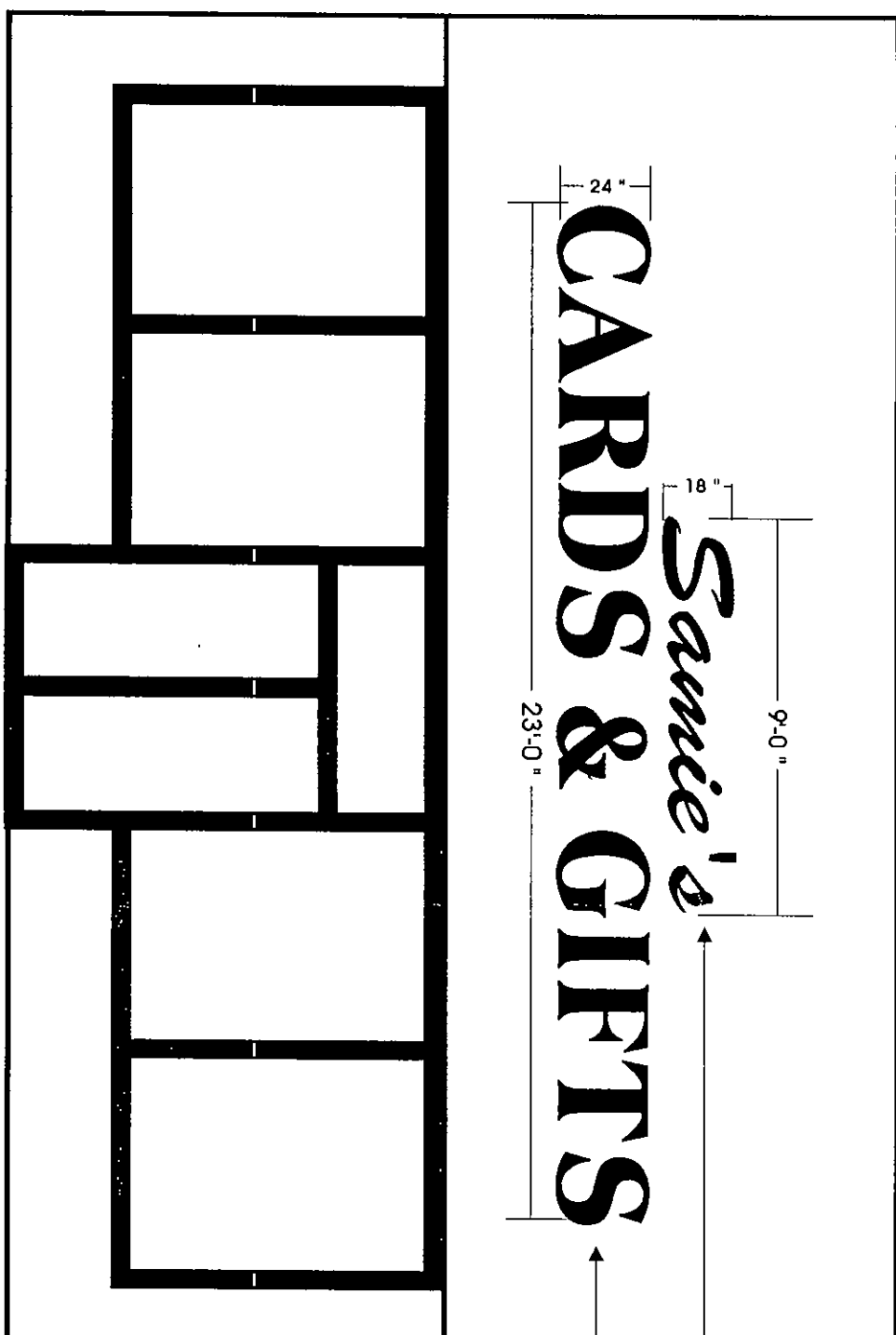
12-16-97
Date

30'-0"

24" 18" *Samie's* CARDS & GIFTS

- UNIT #1: 1.5' x 9' = 13.5 SQ. FT.

- UNIT #2: 2' X 23' = 46 SQ. FT.



SCALE: $\frac{1}{4}'' = 1'$

SAMIE'S CARD & GIFTS
1843 HOOPER AVE.
TOMS RIVER, NJ 08753
SKETCH FOR BRICK LOCATION
732-255-2655 - PHN
732-255-9053 - FAX

REV: 11-20-97

APPROVED FOR FORTIFICATION CITY
December 8, 1992
San Xun - wall 1992 -

BUILDING LENGTH: 30'
SIGNAGE ALLOWED: 80% OF BUILDING LENGTH
PROPOSED SIGN: 23' LENGTH
BUILDING FACIA: 20' x 30' = 600 SQ. FT.
SIGN ALLOWED (BRICK TWP CODE 10% OF FACIA): = 60 SQ. FT.
SIGN PROPOSED: UNIT #1: 1.5' x 9' = 13.5 SQ. FT.
UNIT #2: 2' x 23' = 46 SQ. FT.
TOTAL SIGNAGE PROPOSED: 59.5 SQ. FT.

APPROVED FOR FABRICATION

 Yates Sign Co. 1809 R. 33 Neptune, NJ 07754 Tel: 732/588-6161 / FAX: 732/742-1746	LISTED  Equal Housing Opportunity Call today for more information
--	---

NEW T.J. SAMUEL'S CLO. CARD & QFT	11-14-97
K. WHITE	G. Flack

FRASAM, INC
d/b/a SAMIE'S CARDS & GIFTS

682 ROUTE 70
BRICK, NEW JERSEY 08723
(732) 262 2374

FIRST STATE BANK
TOMS RIVER OFFICE
2100 HOOPER AVENUE
TOMS RIVER, NEW JERSEY 08753

55 667/212

4/20/1999

1598
DOLLARS

Township of Brick

Five and 00/100

Township of Brick

401 CHAMBERS BRIDGE RD
BRICK, NJ 08723

MEMO

BLOCK 701 LOT 7

vacating fees

Date 4-29-99

Business/Development Sam es Cards & G fts

Owner/Applicant Frasam, Inc

Property Address 644 RT 70 & Chambers br dge Rd

Block 701 Lot 7

DEPOSIT RECEIVED

Mandatory Development Fee

Commercial

Residential

Inclusionary Development Fee

Check Number _____

Estimated Fee \$ _____

Deposit Amount \$ _____

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee

Commercial

Residential

Inclusionary Development Fee

Check Number 1598

Final Fee \$ 10.00

Less Deposit \$ 5.00

Final Payment \$ 5.00

FOR DEPOSIT ONLY AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance
354 2C 93 Is pursuant to N J S A 52 27D 301 et seq And N J A C 5 92 18 et seq

Received In Treasurer's Office by

Signature

Date

4-29-99