Called 11/1/96 [illegible]

BLOCK 701 LOT 7 ADDRESS (SITE) Route 70 & Chamberbridge Road PERMIT NO. 2827-96

RECEIVED OCT 23 1996 DIV. OF INSPECTION

PLANS MUST BE ON JOB SITE

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: Route 70 & Chamberbridge Road, Bricktown, NJ
2. Name of Owner in Fee: Caldor Inc. Tel. (203) 849-2000
   Address 20 Glover Avenue, Norwalk, Ct 06856-1299 (street, municipality, zip code)
3. Ownership in Fee: Public ______ Private ______
4. Principal Contractor: E. Amboy Sprinkler System, Inc. Tel. (908) 225-2444
   Address 86 Gibian Street, Edison, NJ 08837
   License No. OR, if new home, Builder Reg. No. ______ Exp. Date ______
   Federal Emp. No. 22-2970117 Social Security No. ______
5. Architect or Engineer ______ Tel. ( ) ______
   Address ______
6. Responsible Person in Charge of Work Tim Mc Namara Tel. (908) 225-2444

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$			
2. Electrical				
3. Plumbing				
4. Fire Protection		85		
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review				
8. Subtotal	$			
9. DCA Training Fee		4		
10. Subtotal	$			
11. Cert. of Occupancy				
12. Other				
13. TOTAL	$	89.00		

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

1. Number of Stories ______
2. Height of Structure ______ ft.
3. Area—Largest Floor ______ sq. ft.
4. New Building Area ______ sq. ft.
5. Volume of New Structure ______ cu. ft.
6. Construction Classification ______
7. Total Land Area Disturbed ______ sq. ft.
8. Flood Hazard Zone ______
9. Base Flood Elevation ______ ft.
10. Wetlands yes ______ sq. ft. no ______
11. Max. Live Load ______
12. Max. Occupancy Load ______

Sprinkler.

II. PROPOSED WORK

	Est. Cost
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	5170

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
[illegible]							
		10/23/96	10/30/96	[illegible]	11/15/96		[illegible]

VII. DESCRIPTION OF BUILDING USE

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

No of dwelling units:
Before Construction ______
After Construction ______
Net gain or loss ______

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group. Indicate Former:

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

Rec'd Plans. Returned 11-1-96

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 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 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 Divisio 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 East Amboy Sprk. Sys, Inc

Address 86 Gilbian St
Edison NJ 08837

Telephone (908) 225-2444

Signature Constance McNamara Date 10-23-96

OFFICE DATE RECEIVED _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date	COMMENTS
☐ Zoning Officer									
☐ 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 Protect.									
☐ 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.				

CONSTRUCTION PERMIT

Date Issued

Permit #

IDENTIFICATION Block _____ Lot _____

Work Site Location Route 70 & Chamberbridge Rd.
Bricktown, NJ

Owner In Fee Caldor, Inc.

Address 20 Glover Avenue
Norwalk, CT 06856-1299

Tele. (203) 849-2000

Contractor E. Amboy Sprinkler Systems, Inc.

Address 86 Gibian Street
Edison, NJ 08837

Tele. (908) 225-2444

Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Federal Emp. No. 22-2970117

or Social Security No. _____

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER _____

[ ] ELECTRICAL [x] FIRE PROTECTION

DESCRIPTION OF WORK:

Install 24 sprinkler heads.

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 $ 5,170.00

PAYMENTS (Office Use Only)
Building
Plumbing
Electrical
Fire Protection
Other
Other
DCA Training Fee
Cert. of Occ.
Other
Total
Check No.
Cash
Collected By:

U.C.C. Form F-170A

CONSTRUCTION OFFICIAL

(see reverse side)

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 11-1-96
Control #
Permit # 2827-96

IDENTIFICATION Block 701 Lot 7

Work Site Location Route 70 & Chambers Bridge Rd Brick NJ

Contractor E. Amboy Sprinkler System Inc

Owner in Fee Palmer Inn.

Address 20 Colonial Ave. Norwalk Ct. 06856-[illegible]

Tele. ( )

Address 86 Gibian St. EDISON N.J 08837

Tele. ( )

Lic. No. or Bldrs. Reg. No. Exp. Date

Federal Emp. No. 22-240[illegible]

or Social Security No.

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER

[ ] ELECTRICAL [X] FIRE PROTECTION

[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK: Sprinkler

PAYMENTS (Office Use Only)	
Building	
Plumbing	
Electrical	
Fire Protection	85.-
Other	
Other	
DCA Training Fee	4-
Cert. of Occ.	
Other	
Total	89-
Check No.	6016
Cash	
Collected By:	[illegible]

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 $ 5170 -

CONSTRUCTION OFFICIAL

U.C.C. Form F-170C

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 11-1-96
Date Issued
Control #
Permit # 282796

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 Route 70 & Chambersbridge Road
Bricktown, NJ
Owner in Fee Caldor Inc.
Address 20 Glover Avenue
Norwalk, CT 06856-1299
Tele. (203) 849-2000
Contractor E. Amboy Sprinkler System, Inc.
Address 86 Gibian Street
Edison, NJ 08837
Tele. (908) 225-2444
Lic. No.
Federal Emp. No. 22-2970117 or Social Security No.

Letter from E. Amboy Sprinkler in jacket. Amby certificate of wiring completed will be given at Fire Insp.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 5,170.00 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date: 10/30/96
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date: 11/5/96
Approved by:

INSPECTIONS: Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Suppression Test			11/5/96	
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	24	
Dry Sprinkler Heads		85
TOTAL	24	
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER		

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $ 85

U.C.C. Form F-140B 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

BOCA®
PLAN REVIEW RECORD

NATIONAL BUILDING CODE
(All Articles except 24, 28, 29, 30, 31 and 32)

sation: _____
: _____

Plan Review #: _____
Date 10/23/96

ISDICTION BRICK
(City, County, Township, etc.)

LDING LOCATION Rt. 70 — CALDOR
(Street address)

LDING DESCRIPTION COMMERCIAL

IEWED BY FIRE - VAN

Numerals indicated in parenthesis are applicable code sections of the *1987 BOCA National Building Code.*

CORRECTION LIST

No.	DESCRIPTION	Code Section
(1)	LETTER (SEALED) FROM CONTRACTOR STATING SYSTEM WILL BE A SCHEDULED SYSTEM.	
(2)	MEASUREMENTS FOR DISTANCES OF NEW SPRINKLER LINE TO NEAREST LINE, AND BLDG WALL	
(3)	CERTIFIED LETTER UPON COMPLETION OF SPRINKLER LINE & TEST RESULTS ON SYSTEM	

BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.
4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60477-5795

(908)225-2444
(610)559-7767

E. Amboy Sprinler Systems Inc.
86 Gibian Street
Edison, NJ 08837

Fax#(908)225-5425

FACSIMILE COVER SHEET

DATE 10-28-96

TO: MR. Ryan / Brick twp fire Sub Code

FROM Tim McNamara

No. of pages including cover sheet 1 1/2

MESSAGE:

Please inform us immediately if you do not receive facsimile in full

(908)225-2444
(610)559-7767

E. Amboy Sprinkler Systems
86 Gibian Street
Edison, New Jersey 08837

Fax #(908)225-5425

October 28, 1996

Bricktown Building Department
500 Hertertsville Road
Brick, New Jersey 08024

Attention: Mr. Ryan
Fire Sub Code

RE: Calder, Bricktown

As per our phone conversation listed below are the clarification you requested.

1. The existing sprinkler system is a pipe scheduled system and the twenty four (24) new heads shall be pipe scheduled as per the existing.

2. The dimension off the rear sales wall is 4'-0'.

E. Amboy Sprinkler Systems, Inc.

Tim McNamara