

RECEIVED

JAN 18 1989

Page 1

TOWNSHIP OF BIRCHWOOD INSPECTION



CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: CHAMBERS BRIDGE RT 70

2. Owner Name: VORNAARD SENE Tel. (201) 773 4000

Address: 174 PASSAIC ST CARFIELD, N.J.

3. Principal Contractor: _____ Tel. (_____) _____

Address: _____

Lic. No. or Builder Reg. No.: _____ Federal Emp. No.: _____

4. Architect or Engineer: _____ Tel. (_____) _____

Address: _____

5. Responsible Person in Charge of Work: JAMES J. FALLON Tel. (201) 773-4000

II. PROPOSED WORK

A. TYPE OF WORK	B. CATEGORIES OF WORK	D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?
1. ☐ Minor (Single Trade)	1. ☐ Building/Structural	1. ☐ Elevators/Dumbwaiters
2. ☐ Small J.C. (\$5,000 and no Prior Approvals) Complete only II.B., III and IV.A. and Page 2	2. ☐ Plumbing	2. ☐ High-Pressure Boilers
3. ☒ New Building	3. ☐ Electrical	3. ☐ Refrigeration Systems
4. ☒ Addition	4. ☐ Fire Protection	4. ☐ Pressure Vessels
5. ☐ Alteration	5. ☒ Other <u>Foundation</u>	5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Repair, Replacement	6. ☐ Other _____	6. ☐ Cross-connections/Backflow Preventors
7. ☐ Demolition	TOTAL COST <u>\$4,000.00</u>	7. ☒ Sprinklers
8. ☐ Other: _____	C. DO YOU WANT:	8. ☐ Smoke Control Systems in Open Wells
	1. ☐ Partial Releases	
	2. ☐ Prototype Processing	

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R-1) If new construction, enter no. of dwelling units _____

2. ☐ Multi-Family (R-2) HMD Reg. No.: _____

3. ☐ Two-Family (R-3b)

4. ☐ One-Family (R-3a) If other than new construction, enter no. of dwelling units: _____

Before Construction: _____

After Construction: _____

Net Gain (or loss): _____

B. NON-RESIDENTIAL

5. ☐ Theatres with Stage (A-1-A)

6. ☐ Movie Theatres (A-1-B)

7. ☐ Night Clubs (A-2)

8. ☐ Restaurants, Libraries, Museums (A-3)

9. ☐ Religious Assembly (A-4)

10. ☐ Outdoor Assembly (A-5)

11. ☐ Business (B)

12. ☐ Educational (E)

13. ☐ Moderate-Hazard Factory (F-1)

14. ☐ Low-Hazard Factory (F-2)

15. ☐ High-Hazard (H)

16. ☐ Institutional Detention Center (I-1)

17. ☐ Hospitals, Infirmeries (I-2)

18. ☐ Group Homes (I-3)

19. ☒ Mercantile (M)

20. ☐ Moderate-Hazard Warehouse (S-1)

21. ☐ Low-Hazard Warehouse (S-2)

22. ☐ Temporary, Misc. (U)

23. ☐ Other _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☒ Private (Individual, Corp., Non-profit Inst., Etc.)

2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

Principal	Secondary	Type
3. ☒	☐	Gas
4. ☐	☐	Oil
5. ☐	☐	Electric
6. ☐	☐	Solid (Wood, Coal, Etc.)
7. ☐	☐	Propane
8. ☐	☐	Solar
9. ☐	☐	Other _____

C. TYPE OF SEWAGE DISPOSAL

10. ☒ Public or Private Company

11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☒ Public or Private Company

13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories: 1

15. Height of Structure: 22 Ft.

16. Area—Largest Floor: 100,000 Sq. Ft.

17. Bldg. Area—All Fls.: 100,000 Sq. Ft.

State Specific Use: SHOPPING CENTER EXPANSION

LDS BR 10312125

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

- A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.
- B. ☐ I further certify that I will perform the work below.
B1. ☐ Building B2. ☒ Electrical B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 17:27). This fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.
- 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 understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE

Jane J. Fella

DATE

1/18/89

II. AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

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

TEL. ()

ADDRESS

SIGNATURE

PERMIT CONTROL

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

- ☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN - FILE LOCATION AND NO.

Plan Review Required	Type of Work	Plans Received By Date	Receiver	Approval Date	Reviewer	Comments
☐	BUILDING			1-10-89		
	Footings/Foundations					
	Framing					
	Architectural			1/10/89		
	Other 2			4/6/89		
☒	PLUMBING			6/4/89		
☐	ELECTRICAL					
☒	FIRE PROTECTION					
☐	OTHER					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
	BUILDING			OK for temp 11-30-89 WS
	Footings/Foundations			
	Framing			
	Architectural			
	Other eng			
	PLUMBING		10-20-89	J.S. (See paper)
	ELECTRICAL			
	FIRE PROTECTION			
	OTHER			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

- ☒ Temporary Certificate of Occupancy
 Date Issued 11-6-89
 Date Expired 12/6/89
☐ Temporary Certificate of Occupancy
 Date Expired _____
☒ Certificate of Occupancy
 No. 4721
 Date Issued 5-7-90
☐ Certificate of Continued Occupancy
 No. _____
☐ Certificate of Approval
 No. _____
☐ None

IV. ON-GOING INSPECTIONS

On-going Inspections Required
 (See Page 1, II.D.)

Date Posted to
 Log and Tickler

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$16,388.12
PLUMBING	1,740.00
ELECTRICAL	
FIRE PROTECTION	
OTHER	
SUBTOTAL	\$18,472.40
- LESS: 20% of subtotal (when plan review performed by state agency)	(18,472.40) x .20 = 3,694.48
D.C.A. TRAINING FEE .0006 x 2,341,200	1,404.72
CERTIFICATE OF OCCUPANCY	2,770.86
OTHER	
OTHER	
TOTAL COLLECTED WHEN PERMIT ISSUED	\$24,495.22
DATE 6-22-89 Collected By Palo	

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY		
OTHER		
OTHER		
- LESS: Refunds		
TOTAL COLLECTED AFTER PERMIT ISSUED		\$

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	\$
COLLECTED AFTER PERMIT (VB)	\$
TOTAL	\$

TOWNSHIP OF BRICK



CERTIFICATE

CERT. NO. 4721
 DATE ISSUED 11-6-89
 Block 701 Lot 7, 8, 8.2, 15, 16
 Subdivision _____

IDENTIFICATION

Owner Vornado, Inc Agent _____
 Address 174 Passaic St. Address _____
Garfield, N.J.
 Tel. (____) _____ Tel. (____) _____
 Work Site Address _____ Lic. No. _____
Rt. 70 & Chambers Bridge Rd Emp. No. _____

PAYMENTS

Fees Received \$ _____
☐ Check No. _____
☐ Cash _____
☐ Other _____
 Collected By: _____
 Date: _____

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☐ CERTIFICATE OF OCCUPANCY

☐ CERTIFICATE OF APPROVAL

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

B. ☐ 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.

C. ☒ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than Dec. 6, 1989 or the owner will be subject to a fine or order to vacate:

Temporary C/O for Structure only (shell)

30 Days

TCO extended to December 31, 1989

D. DESCRIPTION OF WORK:

Addition of stores to existing plaza

USE GROUP M FIRE GRADING 3½ hours
 MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____
 SPECIFIC USE Addition to existing plaza

FINAL COST OF CONSTRUCTION: \$ 4,000,000.

Arthur J. Cerys
 CONSTRUCTION OFFICIAL



CERTIFICATE

Date Issued 5-7-90
Control #
Permit # 4721

IDENTIFICATION

Block 701 Lot 7, 8, 15, 16
Work Site Location Rt. 70 & Chambersbridge Rd.
Owner in Fee Vornado, Inc.
Address 174 Passaic St.
Garfield, NJ
Tele. ()
Contractor same
Address
Tele. ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. none
Use Group M 34 hours
Maximum Live Load
Description of Work/Use:
Addition of stores to existing plaza
Shell only
Type of Warranty Plan: [] State [] Private
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☒ CERTIFICATE OF OCCUPANCY

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

☐ CERTIFICATE OF APPROVAL

☐ 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 OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than , 19 or the owner will be subject to a fine or order to vacate:

CONSTRUCTION OFFICIAL

Arthur J. Cery

Fee \$
Paid [] Check No.
Collected by:

TOWNSHIP OF BRICK



PERMIT NO.	4721
DATE ISSUED	6-22-88
REVISION DATE	
Block	702
Lot	7-8-15
Subdivision	+16

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner VERANO INC Contractor _____
 Address 174 PASSAIC ST Address _____
GARFIELD N.J. 07026
 Tel. (201) 773-4000 Tel. () _____
 Work Site Address RT 70 L.C. No. _____
CHAMBERS BARBERS RD Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

FOUNDATION PERMIT
 AS PER ATTACHED
 STRUCTURAL DRAWINGS.

TYPE OF WORK:

- ☐ New Building
☐ Addition
☐ Alteration/Renovation
☐ Roofing
☐ Siding
☐ Other _____
☐ Demolition
☐ Miscellaneous
☐ Fence
☐ Sign
☐ Pool
☐ Elevator
☐ Other _____

Fee Basis

Fee

SUBTOTAL

Minimum Building Fee (if applicable)

Total Building Fee (Greater of Minimum or Subtotal)

D. COMMENTS

C. BUILDING CHARACTERISTICS

USE GROUP: SLAB ON GRADE SUBMITTAL

No. of Stories 1 Total Building Area--All Floors _____ Sq. Ft.
 Height of Structure 22 Ft. Volume of Structure _____ Cu. Ft.
 Area--Largest Floor 10000 Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.
 Estimated Cost of Building Work: \$ 50000

☐ Partial Releases ☐ Prototype Processing

JOB CONDITION/COMMENTS

DATE _____

[illegible]

Fire Grading:

Maximum Live Load:

Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW		INSPECTIONS			
	Date	Initials	Type	Failure Dates	Approval Date
☐ No Plans Required	_____	_____	☐ Footing/Foundation		
☐ All	_____	_____	☐ Slab		
☐ Footing/Foundation	_____	_____	☐ Frame		
☐ Frame	_____	_____	☐ Architectural		
☐ Architectural	_____	_____	☐ Insulation		
☐ Other _____	_____	_____	☐ Finishes		
			☐ Energy		
			☐ Mechanical		
			☐ TCO		
			☐ Other _____		
INSPECTIONS FINAL					
☐ CO ☐ CCO ☐ CA					
Date: _____					
Inspected By: _____					

PLAN REVIEW AND INSPECTION - BUILDING

DATE

JOB CONDITION/COMMENTS

4.14.89 Section "B" footing O.K. along with all interior piers & 10-26-89 WEST SECTION 3 STORES MARSHALL'S 3-A - STAX 3 B + RAFTERS ~~FINISH~~ ONLY NOT-CO OK TO STOCK ONLY - ~~RAFTERS~~

11-8-89 SOME FASER WORK REMAINING ROOF COOPOLLO NOT FINISHED. - OK FOR TEMP ~~FINISH~~

Fire Grading:

Maximum Live Load:

Maximum Occupancy Load:

60

JOB SUMMARY

PLAN REVIEW

☐ No Plans Required

☒ All ~~Plans~~ ^{1/25-19 1/4}

☒ Footing/Foundation

☒ Frame

☐ Architectural

☐ Other

Date Initials

1/25-19 1/4

~~1/25-19 1/4~~

5/28/89

6/15/89

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: 1/26

Inspected By:

INSPECTIONS

Type

☒ Footing/Foundation

☐ Slab

☐ Frame

☐ Architectural

☐ Insulation

☒ Finishes

☐ Energy

☐ Mechanical

☒ TCO

☒ Other Free Style

Failure Dates

A Section

OK - 4-15-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

Approval Date

OK - 4-15-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

11-3-89

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11-3-89



FIRE SUBCODE TECHNICAL SECTION



DATE: 4-22-89
Block: 701 Lot: 78.8.2
Subdivision: 15416

A. IDENTIFICATION

APPLICANT - Complete unsited areas only

When changing contractors, notify this office

Owner: VORWARD INC.

Contractor: MODERD ELEC CO.

Address: 774 PASSAGE ST.

Address: 71 CREOPUS AV.

Address: CLAREFIELD NJ 07060

Address: CLIFTON NJ 07011

Tel: 201-777-4600

Tel: 201-478-1212

Work Site Address: Rt. 70 SCHAMBERS

Lic. No. _____

BRIDGE RD.

Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other _____

Area Sprinkled: ☐ Full ☐ Partial (specify in comments)

No. of Heads: _____ No. of Spare Heads: _____

☐ Valves Supervised - Method: _____ Size: _____

Water Supply - Source: _____

FD Connection Location: _____

Estimated Cost of Work: \$ _____

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☒ CO₂

☐ Halon ☐ Foam

☐ Other _____

Manual Pull: ☐ Yes ☐ No

Locations: _____

Estimated Cost of Work: \$ _____

B3. ALARM

TYPE: ☐ Manual ☐ Automatic

Supervision Type: ☐ Local ☐ Central

☐ Proprietary ☐ Remote Location

Estimated Cost of Work: \$ _____

B4. STAND PIPES

Pipe Size: _____ Pump Size: _____

Water Source: _____ Size: _____

FD Connection Location: _____

Hose Station: ☐ Yes ☐ No

Estimated Cost of Work: \$ _____

B5. OTHER

40. exit doors
49. equipment
41. smoke pit

Subtotal

Minimum Fire Protection Fee (If Applicable)

Total Fire Protection Fee (Greater of Minimum or Subtotal)

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP: U-2A Present U-2A Proposed

Heating System - Location: _____

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

Fuel Storage Tank - Location: _____ Fuel Type: _____ Capacity: _____

Total Estimated Cost of Fire Protection Work: \$ _____

D. COMMENTS

☐ Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION - FIRE

JOB CONDITION/COMMENTS

for DATE 1st Carol.

10/13/89 1300 hr. Rubbed on job site was still the
Same nothing changed.
10/16/89 Passed work site found Rubbish
on Site.

10/17/89 11¹⁵ Fire Co's Responded Fire Co. sent to back of Blvd.
Dumbster loaded with Rubbish, Rubbish in Cars
of Blvd in Plastic Bags & Boxes

10/19/89 2⁰⁰ Snap. found Rubbish and Piles of
Construction Material. & Dumpster cleaned.
up. Work site removed.

11-3-89 Re-Snap job site, 90% of Rubbish cleaned up
only 3 Dumpsters in work area & being removed on 11-4-89

JOB SUMMARY

- ☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: _____

Inspected By: _____

INSPECTIONS

- Type
- ☐ Fire Suppression Test
☐ Fire Alarm Test
☐ Smoke Test
☒ TCO
☐ Other
☐ Other
☐ Other
☐ Other

Failure Date

Approval Date

11-6-89



FIRE
SUBCODE



PERMIT NO. 47222
DATE ISSUED 6-22-89
REVISION DATE
Block 701 Lot 288-2 Pp 154
Subdivision Township of Rock 16

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner: Alfred Vonnado

Contractor: Alfred

Address: 174 Passaic St

Address: _____

City: CARFIELD NJ 07026

City: _____

Work Site Address: At Rt 26 Chambersburg Pike, L.C. No. 221 904 087
Ed, Bricktown NJ 07026 Federal Emp. No. 221 904 087

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☒ Wet ☐ Dry ☐ Other _____

FEE

Area Sprinkled: ☒ Full ☐ Partial (Specify in comments)

No. of Heads: 945 No. of Spare Heads: 36

☒ Valves Supervised - Method: City of Chambersburg Size: 8"

Water Supply - Source: City of Chambersburg

FD Connection Location: Ed, Bricktown NJ

Estimated Cost of Work: \$ 125,000

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO₂

☐ Halon ☐ Foam N/A

Other: _____

Manual Pull: ☐ Yes ☐ No

Locations: _____

Estimated Cost of Work: \$ _____

B3. ALARM

TYPE: ☐ Manual ☒ Automatic

Supervision Type: ☐ Local ☒ Central

☐ Proprietary ☐ Remote Location

Estimated Cost of Work: \$ 5000

FEE

B4. STAND PIPES

Pipe Size: _____

Water Source: _____

FD Connection Location: _____

Hose Station: ☐ Yes ☐ No

Estimated Cost of Work: \$ _____

B5. OTHER

D. COMMENTS

Addition Bldg 1 and 964m to
existing Shopping Center

☐ Partial Releases

☐ Prototype Processing

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP _____ Present _____ Proposed _____

Heating Systems - Location: _____

Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other _____

Fuel Storage Tank - Location: _____ Fuel Type: _____ Capacity: _____

Total Estimated Cost of Fire Protection Work: \$ _____

PLAN REVIEW AND INSPECTION - FIRE

DATE

JOB CONDITION/COMMENTS

9-11-89 Needs Sprinkler test when Complete
Tested Sprinklers Raiser at Sakis &
one Raiser at Rambow Shops. one Raiser
Not Complete as get Total of three. Sept
Took 215 PSI for two his.

9/28/89 Sprinkler Test 200 PSI for two his. all three
raisers meet Code and that only still
needs Fire Dept. Connection of 4"
Cross over pipe from one Raiser to the
other & small chip on screw at Cpl. leading
will not release till fire connection &
4" Cross over pipe are installed
10/12/89 issued Notice of Violation attached to this Card.

JOB SUMMARY

- ☐ No Plans Required
☐ Plan Review Approved

Date: 5/5/89

Approved By: JS

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: _____

Inspected By: _____

INSPECTIONS

Type

☒ Fire Suppression Test

☒ Fire Alarm Test

☒ Smoke Test

☐ TCO

☐ Other

☐ Other

☐ Other

☐ Other

Failure Date

9/28/89

Approval Date

9/28/89

11-3-89

11-3-89



FIRE SUBCODE TECHNICAL SECTION



PERMIT NO. 4721
DATE ISSUED 6-22-89
REVISION DATE _____
Block 2a1 Lot 78.8.2
Subdivision 15810

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner YORBA LIND INC. Contractor ANDERD ELEC. CO.
Address 174 PASSAIC ST. Address 218 BROAD ST. AV.
CLIFTON NJ 07011 CLIFTON NJ 07011
Tel. (201) 977-4600 Tel. (201) 478-1222
Work Site Address Rt. 70 Clifton NJ Lic. No. _____
BRIDGE RD. Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and
Small Job Only)

I hereby certify that the proposed work
is authorized by the owner of record
and I have been authorized by the
owner to make this application as his
agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other _____
Area Sprinkled: ☐ Full ☐ Partial (specify in comments)
No. of Heads: _____ No. of Spare Heads: _____
☐ Valves Supervised - Method: _____
Water Supply - Source: _____ Size: _____
FD Connection Location: _____
Estimated Cost of Work: \$ _____

FEE

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO₂
☐ Halon ☐ Foam
☐ Other _____
Manual Pull: ☐ Yes ☐ No
Locations: _____
Estimated Cost of Work: \$ _____

B3. ALARM

TYPE: ☐ Manual ☐ Automatic
Supervision Type: ☐ Local ☐ Central
☐ Proprietary ☐ Remote Location
Estimated Cost of Work: \$ _____

FEE

B4. STAND PIPES

Pipe Size: _____ Pump Size: _____
Water Source: _____ Size: _____
FD Connection Location: _____
Hose Station: ☐ Yes ☐ No
Estimated Cost of Work: \$ _____

B5. OTHER

40' steel piping
49' vertical pipe
49' vertical pipe

Subtotal

Minimum Fire Protection Fee (if Applicable) 100
Total Fire Protection Fee (Greater of Minimum
or Subtotal) 100

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP 1100 Present 1100 Proposed
Heating Systems - Location: 1100
Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other _____
Fuel Storage Tank - Location: _____ Fuel Type: _____ Capacity: _____
Total Estimated Cost of Fire Protection Work: \$ _____

D. COMMENTS

1100 and
100 addn
☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION - FIRE

DATE

JOB CONDITION/COMMENTS

11-3-89 *Except for Cosmetic Brick in Room*
Blat Shell Compbs with Fire Code
Reqs of Blat has 3 Dumpster & will be
taken away on 11-21-89

Ass-100.00 *100.*

JOB SUMMARY

- ☐ No Plans Required
☐ Plan Review Approved

Date: *6/14/89*

Approved By: *[Signature]*

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: _____

Inspected By: _____

INSPECTIONS

Type

Failure Date

Approval Date

- ☒ Fire Suppression Test
☒ Fire Alarm Test
☒ Smoke Test
☒ TCO
☒ Other *Lead*
☐ Other
☐ Other
☐ Other

9-28-89
9-28-89
11-6-89



NJ PLUMBING SUBCODE



Permit No. 47231
Date Issued 6-26-1989
Expiration Date 6-26-1990
Block 701 Lot 1, 2, 3, 4, 5, 6
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only When changing contractors, notify this office

Owner 108 Nassau Inc Contractor Frank C Gibbon Inc
Address 174 Passaic St Address 34 East Main St
Garfield NJ 07026 Freddick NJ 07124
Tel. 201 793-4000 Tel. 908 462-0442
Work Site Address Blacktown Center Lic. No./Bus. Permit 3281
FT 700 Chambers Bridge Rd Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)
I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
Frank C Gibbon
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures
TYPE OF WORK: COMPLETE ADDITIONS PART I + PART III

No.	Fixture	Fee	No.	Fixture	Fee	
<u>21</u>	Water Closer/Bidet/Urinal Bathing	<u>145-</u>	<u>32</u>	Garbage Disposal	<u>480-</u>	COLUMN 1
<u>20</u>	Lavatory/Sink	<u>100-</u>		Air Conditioner Unit	<u>825-</u>	COLUMN 2
<u>20</u>	Shower/Floor Drain	<u>100-</u>		Indirect Connection		
	Washing Machine			Sewer Ejector		
	Dishwasher			Grease Trap		
	Commercial Dishwasher			Interceptor		
<u>16</u>	Water Heater	<u>80-</u>		Backflow Device		
<u>32</u>	Domestic Boiler/Furnace	<u>480-</u>	<u>16</u>	Reduced Pressure Backflow Device	<u>80-</u>	
<u>16</u>	Steam Boiler			Vent Stack	<u>315-</u>	
<u>2</u>	Water Util. Connection		<u>21</u>	Solar System	<u>875-</u>	
	Sewer Util. Connection			Other <u>SAS Pumps</u>		
	Hose Bibb			Other _____		
	Water Cooler			Other _____		

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____

Drainage - Material MS Size 4"

Building Sewer - Material _____ Size _____

Water Service - Material COPPE Size 1 1/2"

Venting - Material MS Size 45-4

Estimated Cost of Plumbing Work: \$ 864000

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing



PLUMBING SUBCODE TECHNICAL SECTION



Project No.	43701
Submitted Date	6-23-92
Revision Date	
Block	701
Subdivision	7-8-2-15-4

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only		When changing contractors, notify this office	
Owner	<u>LYNN ADE INC</u>	Contractor	<u>FRANK C. FIDRON INC</u>
Address	<u>174 PARVALE ST</u>	Address	<u>34 EAST HAN ST</u>
	<u>CANTON NJ 07026</u>		<u>FREEDLAND NJ 07115</u>
Tel.	<u>973-4000</u>	Tel.	<u>901-462-0202</u>
Work Site Address	<u>Black Lion Center</u>	Lic. No./Bus. Permit	<u>3241</u>
	<u>PART I</u>	Federal Emp. No.	

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and
Small Job Only)

I hereby certify that the proposed work
is authorized by the owner of record
and I have been authorized by the
owner to make this application as his
agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

PART I

No.	Fixture	Fee	No.	Fixture	Fee	
15	Water Closet/Bidet/Urinal		18	Garbage Disposal		COLUMN 1 COLUMN 2
	Bath tub			Air Conditioner Unit		
16	Lavatory/Sink			Indirect Connection		SUBTOTAL
15	Shower/Floor Drain			Sewer Ejector		
	Washing Machine			Grease Trap		Backflow Preventing Fee (if applicable)
	Dishwasher			Interceptor		
12	Commercial Dishwasher			Backflow Device		Total Plumbing Fee (Greater of Minimum or Subtotal)
18	Water Heater			Reduced Pressure		
	Domestic Boiler/Furnace		13	Backflow Device		Solar System
	Steam Boiler			Vent Stack		
	Water Util. Connection		16	Other	<u>SAS PLUMB</u>	Other
	Sewer Util. Connection			Other		
	Hose Bibb			Other		Water Cooler
	Water Cooler			Other		

C. PLUMBING CHARACTERISTICS

USE GROUP:	Present	Proposed
Drainage -	Material	Size
Building Sewer -	Material	Size
Water Service -	Material	Size
Venting -	Material	Size
Estimated Cost of Plumbing Work: \$		

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SEC.

☐ Partial Releases ☐ Prototype Processing

TOWNSHIP OF BRICK

1A Liquor Store



PLUMBING SUBCODE

TECHNICAL SECTION



PERMIT NO. 4324
 DATE ISSUED 6-22-89
 REVISION DATE _____
 Block 701 Lot 7.8, 8.2, 15.8
 Subdivision _____ 16

A. IDENTIFICATION

APPLICANT — Complete unshaded areas only

When changing contractors, notify this office

Owner Vornado, Inc. Contractor Frank C. Gibson, Inc.
 Address 174 Passaic Street Address 34 E. Main St. Box 191
Garfield, NJ 07026 Freehold, NJ 07728
 Tel. (201) 773-4000 Tel. (201) 462-0282
 Work Site Address Route 70 & Chambers Lic. No./Bus. Permit 3281
Bridge Road Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
 (Complete for Minor Work and Small Job Only)
 I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
Frank C. Gibson
 AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
1	Water Closer/Bidet/Urinal	*		Garbage Disposal	*	COLUMN 1
	Bathrubb		2	Air Conditioner Unit		COLUMN 2
1	Lavatory/Sink			Indirect Connection		SUBTOTAL
	Shower/Floor Drain			Sewer Electrol		Minimum Plumbing Fee
	Washing Machine			Grease Trap		(If applicable)
	Dishwasher			Interceptor		Total Plumbing Fee
1	Commercial Dishwasher			Backflow Device		(Greater of Minimum or Subtotal)
	Water Heater			Reduced Pressure		
1	Domestic Boiler/Furnace			Backflow Device		
	Steam Boiler			Vent Stack		
	Water Util. Connection			Solar System		
	Sewer Util. Connection			Other <u>SAS PIPES</u>		
	Hose Bibb			Other _____		
	Water Cooler			Other _____		
COLUMN 1		*	COLUMN 2		*	

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____
 Drainage — Material _____ Size _____
 Building Sewer — Material _____ Size _____
 Water Service — Material _____ Size _____
 Venting — Material _____ Size _____
 Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SEC.

☐ Partial Releases ☐ Prototype Processing

TOWNSHIP OF BRICK

1B Rainbow Shops


**PLUMBING
SUBCODE**
TECHNICAL SECTION


PERMIT NO. 6224
 DATE ISSUED 8-22-85
 REVISION DATE _____
 Block 701 Lot 7, 8, 8.2, 15&
 Subdivision _____ 16

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner Vornado, Inc. Contractor Frank C. Gibson Inc.
 Address 174 Passaic Street Address 34 E. Main St. Box 191
Ganfield, NJ 07026 Freehold, NJ 07728
 Tel. (201) 773-4000 Tel. (201) 462-0282
 Work Site Address Route 70 & Chambers Lic. No./Bus. Permit 3281
Bridge Road Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal		1	Garbage Disposal	
1	Bathrubb			Air Conditioner Unit	
1	Lavatory/Sink			Indirect Connection	
1	Shower/Floor Drain			Sewer Electro	
1	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
	Water Heater			Reduced Pressure	
1	Domestic Boiler/Furnace			Backflow Device	
	Steam Boiler			Vent Stack	
	Water Util. Connection			Solar System	
	Sewer Util. Connection			Other <u>SAS PIPES</u>	
	Hose Bibb			Other _____	
	Water Cooler			Other _____	

COLUMN 1

COLUMN 2

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____
 Drainage - Material _____ Size _____
 Building Sewer - Material _____ Size _____
 Water Service - Material _____ Size _____
 Venting - Material _____ Size _____
 Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SDC

☐ Partial Releases

☐ Prototype Processing

1C Fairy Shoes



TECHNICAL SECTION



PERMIT NO. 4721
DATE ISSUED 6-22-89
REVISION DATE _____
Block 701 Lot 7, 8, 8, 2, 15 &
Subdivision _____ 16

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner *Vornado, Inc.*

Contractor *Frank C. Gibson Inc.*

Address 174 Passaic Street

Address 34 E. Main St. Box 191

Tel. (201) 773-4000

Tel. (201) 462-0282

Work Site Address Route 70 & Chambers

3281
 Lic No./Bus- Permit _____

Bridge Road

Federal Emp. No.

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
1	Water Closet/Bidet/Urinal			Garbage Disposal		COLUMN 1
	Bathtub			Air Conditioner Unit		COLUMN 2
4	Lavatory/Sink		1	Indirect Connection		SUBTOTAL
	Shower/Floor Drain			Sewer Ejector		Minimum Plumbing Fee (If applicable)
	Washing Machine			Grease Trap		
	Dishwasher			Interceptor		
	Commercial Dishwasher			Backflow Device		Total Plumbing Fee (Greater of Minimum or Subtotal)
4	Water Heater			Reduced Pressure		
	Domestic Boiler/ Furnace		1	Backflow Device		
	Steam Boiler			Vent Stack		
	Water Util. Connection			Solar System		
	Sewer Util. Connection			Other <u>GAS PIPING</u>		
	Hose Bibb			Other		
	Water Cooler			Other		

C. PLUMBING CHARACTERISTICS

USE GROUP:	Present	Proposed

Drainage -	Material	Size

Building Sewer—	Material	Size

Water Service—	Material	Size

Venting -	Material	Size

Estimated Cost of Plumbing Work: \$

D. COMMENTS

ALL FEES INDICATED ON MASTER TICKET. SEE.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and

Small Job Only

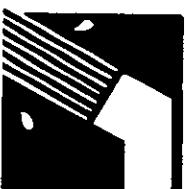
I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

ID Leora Cards



TECHNICAL SECTION



PERMIT NO. 2-K-23
DATE ASSIGNED 8/1
REVISION DATE _____
Block 701 Lot 7, 8, 8.2, 15&
Subdivision 16

APPLICANT -- Complete unshaded areas only

Owner Vornado, Inc.

Contractor Frank C. Gibson Inc.

Address 174 Passaic Street

Address 34 E. Main St. Box 191

Garfield, NJ 07026

Freehold, NJ 07728

Tel. (201) 773-4000

Tel. (201) 462-0282

Work Site Address Route 70 & Chambers

Lic.No./Bus. Permit 3281

Bridge Road

Federal Emp. No.

B. TECHNICAL SITE DATA

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Notes
1	Water Closet/Bidet/Urinal			Garbage Disposal		COLUMN 1 COLUMN 2 Minimum Plumbing Fee (if applicable) Total Plumbing Fee (Greater of Minimum or Sumtotal)
4	Bathub		1	Air Conditioner Unit		
4	Lavatory/Sink			Indirect Connection		
	Shower/Floor Drain			Sewer Ejector		
	Washing Machine			Grease Trap		
	Dishwasher			Interceptor		
	Commercial Dishwasher			Backflow Device		
4	Water Heater			Reduced Pressure		
	Domestic Boiler/ Furnace		1	Backflow Device		
	Steam Boiler			Vent Stack		
	Water Util. Connection			Solar System		
	Sewer Util. Connection			Other SAS P/B-25		
	Hose Bibb			Other		
	Water Cooler			Other		
				Other		

C. PLUMBING CHARACTERISTICS

USE GROUP:	Present	Proposed

Drainage -	Material	Size

Size

Building Sewer—	Material	Size

Size

Water Service—	Material	Size

Size

Venting -	Material	Size

Size

Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. S&C



Partial Releases

☐

Primitive Processing

U.C.C. FORM F-130 (8/83)

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Blue Ink - Inspector's Copy

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**PLUMBING
SUBCODE
TECHNICAL SECTION**



PERMIT NO. 147315
DATE ISSUED 10-22-19
REVISION DATE _____
Block 701 Lot 7, 8, 8.2, 15&
Subdivision _____ 16

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner Vornado, Inc.

Contractor Frank C. Gibson Inc.

Address 174 Passaic Street
Garfield, NJ 07026

Address 34 E. Main St. Box 191
Freehold, NJ 07728

Tel. (201) 773-4000

Tel. (201) 462-0282

Work Site Address
Route 70 & Chambers
Bridge Road

Lic.No./Bus. Permit 3281
Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

David H. Hahn

AGENT SIGNATURE

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

David H. Hahn

AGENT SIGNATURE

agent.
James H. [Signature]
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
1	Water Closet/Bidet/Urinal			Garbage Disposal		COLUMN 1
	Bathtub		1	Air Conditioner Unit		COLUMN 2
1	Lavatory/Sink			Indirect Connection		SUBTOTAL
	Shower/Floor Drain			Sewer Ejector		Maximum Plumbing Fee
	Washing Machine			Grease Trap		(If applicable)
	Dishwasher			Interceptor		Total Plumbing Fee
	Commercial Dishwasher			Backflow Device		(Greater of Maximum
1	Water Heater			Reduced Pressure		or Subtotal)
1	Domestic Boiler/ Furnace		1	Backflow Device		
	Steam Boiler			Vent Stack		
	Water Util. Connection			Solar System		
	Sewer Util. Connection			Other <u>GAS PIPES</u>		
	Hose Bibb			Other		
	Water Cooler			Other		
				Other		

C. PLUMBING CHARACTERISTICS

USE GROUP:	Present	Proposed

Drainage -	Material	Size

Size

Building Sewer—	Material	Size

Size

Water Service— Material _____ Size _____

Size

Venting -	Material	Size

Size

Estimated Cost of Plumbing Work: \$ _____

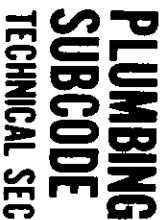
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D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SEC.

Partial Releases

Prototype Processing



PLUMBING SUBCODE TECHNICAL SECTION



PERMIT NO. 4121
DATE ISSUED 6-22-79
REVISION DATE _____
Block 701 Lot 7, 8, 8.2, 15.6
Subdivision _____
16

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner Vornado, Inc.

Contractor Frank C. Gibson Inc.

Address 174 Passaic Street

Address 34 E. Main St. Box 191

Garfield, NJ 07026

Freehold, NJ 07728

Tel. (201) 773-4000

Tel. (201) 462-0282

Work Site Address Route 70 & Chambers

Permit 3281

Bridge Road

Federal Emp. No.

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Notes
1	Water Closet/Bidet/Urinal			Garbage Disposal		COLUMN 1 COLUMN 2 SUBTOTAL Maximum Plumbing Fee (if applicable) Total Plumbing Fee (Sum of Maximum or Subtotal)
1	Bathtub		1	Air Conditioner Unit		
1	Lavatory/Sink			Indirect Connection		
	Shower/Floor Drain			Sewer Ejector		
	Washing Machine			Grease Trap		
	Dishwasher			Interceptor		
	Commercial Dishwasher			Backflow Device		
1	Water Heater			Reduced Pressure		
1	Domestic Boiler/ Furnace		1	Backflow Device		
	Steam Boiler			Vent Stack		
	Water Util. Connection			Solar System		
	Sewer Util. Connection			Other GAS PLANS		
	Hose Bibb			Other		
	Water Cooler			Other		
COLUMN 1			COLUMN 2			

C. PLUMBING CHARACTERISTICS

USE GROUP:	Present	Proposed

Drainage -	Material	Size
------------	----------	------

Building Sewer – Material	Size

Water Service—	Material	Size

Venting –	Material	Size

Estimated Cost of Plumbing Work: \$

D. COMMENTS

ALL FEES INDICATED ON MASTER TAG, SLR.

**CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and
Small Job Only)**

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

agent.
Edward J. [Signature]
AGENT SIGNATURE



TECHNICAL SECTION



PERMIT NO. 14-231
DATE ISSUED 6-23-83
REVISION DATE _____
Block 701 Lot 7, 8, 8.2, 15 &
Subdivision 16

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner Vornado, Inc.

Contractor Frank C. Gibson Inc.

Address 174 Passaic Street

Address 34 E. Main St. Box 191

Garfield, NJ 07026

Freehold, N

Tel. (201) 773-4000

Tel. (201) 462-0282

Work Site Address Rte 70 & Chambers

Lic.No./Bus. Permit 3281

Bridge Road

Federal Emp. No.

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
1	Water Closet/Bidet/Urinal			Garbage Disposal		COLUMN 1
1	Bathtub		1	Air Conditioner Unit		COLUMN 2
1	Lavatory/Sink			Indirect Connection		SUBTOTAL
	Shower/Floor Drain			Sewer Ejector		Maximum Plumbing Fee
	Washing Machine			Grease Trap		(If applicable) ?
	Dishwasher			Interceptor		Total Plumbing Fee
	Commercial Dishwasher			Backflow Device		(Greater of Maximum
1	Water Heater			Reduced Pressure		or Subtotal)
1	Domestic Boiler/ Furnace	1		Backflow Device		
	Steam Boiler			Vent Stack		
	Water Unit Connection			Solar System		
	Sewer Unit Connection			Other GAS PIPES		
	Hose Bibb			Other		
	Water Cooler			Other		
				Other		

COLUMN 1

COLUMN 2

C. PLUMBING CHARACTERISTICS

USE GROUP:

Present

Proposed

Drainage – Material

Size

Building Sewer—Material

Size

Water Service—Material

Size

Venting -

Material

Size

Estimated Cost of Plumbing Work: \$

1

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SEC.

Partial Releases

Prototype Processing

U.C.C. Form F-130 (8/83)

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TECHNICAL SECTION



PERMIT NO. 4721
DATE ISSUED 6-22-81
REVISION DATE: _____
Block 701 Lot 7, 8, 8-2, 15 & 16
Subdivision _____

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner	Vornado, Inc.	Contractor	Frank C. Gibson Inc.
Address	174 Passaic Street Garfield, NJ 07026	Address	34 E. Main St. Box 191 Freehold, NJ 07728
Tel. (201)	773-4000	Tel. (201)	462-0282
Work Site Address	Rte. 70 & Chambers Bridge Road	Lic. No./Bus. Permit	3281
		Federal Emp. No.	

Small Job Only

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

agent: James H. Kelly
AGENT SIGNATURE

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
1	Water Closer/Bidet/Urinal			Garbage Disposal		COD UNIT 1
1	Bathtub		1	Air Conditioner Unit		COLUMN 2
1	Lavatory/Sink			Indirect Connection		SUBTOTAL
1	Shower/Floor Drain			Sewer Ejector		Minimum Plumbing Fee (If applicable)
	Washing Machine			Grease Trap		Fixed Plumbing Fee (Greater of Minimum or Subtotal)
	Dishwasher			Interceptor		
	Commercial Dishwasher			Backflow Device		
	Water Heater			Reduced Pressure		
4	Domestic Boiler/ Furnace		1	Backflow Device		
	Steam Boiler			Vent Stack		
	Water Util. Connection			Solar System		
	Sewer Util. Connection			Other GAS REPAIRS		
	Hose Bibb			Other		
	Water Cooler			Other		

USE GROUP:	Present	Proposed
_____	_____	_____

Drainage —	Material	Size
Building Sewer—	Material	Size
Water Service—	Material	Size
Venting —	Material	Size
Estimated Cost of Plumbing Work: \$		

ALL FEES INDICATED ON MASTER CARD, SEC.

☐ Partial Releases ☐ Prototype Processing



PLUMBING SUBCODE



PERMIT NO. 4784
DATE ISSUED 6-22-69
REVISION DATE _____
Block 701 Lot 7, 8, 8.2, 15
Subdivision 2 16

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner Vornado, Inc.

Contractor Frank C. Gibson Inc.

Address 174 Passaic Street
Garfield, NJ 07026

Address 34 E. Main St. Box 191
Freehold, NJ 07728

Tel. (201) ~~773-4000~~

Tel. (201) 462-0282

Work Site Address Rte. 70 & Chambers

Lic.No./Bus. Permit 3281

Bridge Road

Federated EMP. No.

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Remarks
1	Water Closet/Bidet/Urinal			Garbage Disposal		COLUMN 1 COLUMN 2 SUBTOTAL Minimum Plumbing Fee (if applicable) ? Total Plumbing Fee (Sum of Minimum or Subtotal)
1	Bathub		1	Air Conditioner Unit		
1	Lavatory/Sink			Indirect Connection		
	Shower/Floor Drain			Sewer Ejector		
	Washing Machine			Grease Trap		
	Dishwasher			Interceptor		
	Commercial Dishwasher			Backflow Device		
	Water Heater			Reduced Pressure		
1	Domestic Boiler/ Furnace		1	Backflow Device		
	Steam Boiler			Vent Stack		
	Water Util. Connection			Solar System		
	Sewer Util. Connection			Other <i>SAS PIPES</i>		
	Hose Bibb			Other		
	Water Cooler			Other		
COLUMN 1			COLUMN 2			

C. PLUMBING CHARACTERISTICS

USE GROUP:	Present	Proposed
_____	_____	_____

Drainage -	Material	Size
------------	----------	------

Building Sewer—	Material	Size

Water Service—	Material	Size
----------------	----------	------

Venting -	Material	Size

Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

ALL FEES INDICATED ON MASTER TICKET. SEE

☐ Partial Releases

☐ Prototype Processing

U.C.C. Form F-150 (8/83)

Green = Office Copy

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Blue Ink = Inspector's Copy

TOWNSHIP OF BRICK

JK Vacant



**PLUMBING
SUBCODE**



PERMIT NO. 4-234
 DATE ISSUED 6-22-89
 REVISION DATE _____
 Block 701 Lot 7, 8, 8.2, 15&
 Subdivision _____ 16

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner Varnada, Inc. Contractor Frank C. Gibson Inc.
 Address 174 Passaic Street Address 34 E. Main St. Box 191
Garfield, NJ 07026 Freehold, NJ 07728
 Tel. (201) 773-4000 Tel. (201) 462-0282
 Work Site Address Rte. 70 & Chambers Lic. No./Bus. Permit 3281
Bridge Road Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
 (Complete for Minor Work and Small Job Only)
 I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
Frank C. Gibson
 AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closer/Bidet/Urinal		1	Garbage Disposal	
1	Bathrub			Air Conditioner Unit	
1	Lavatory/Sink			Indirect Connection	
1	Shower/Floor Drain			Sewer, Electro	
1	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
1	Water Heater			Reduced Pressure	
1	Domestic Boiler/Furnace		1	Backflow Device	
	Steam Boiler			Vent Stack	
	Water Util. Connection			Solar System	
	Sewer Util. Connection			Other <u>GAS PIPING</u>	
	Hose Bibb			Other _____	
	Water Cooler			Other _____	

COLUMN 1

COLUMN 2

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____
 Drainage - Material _____ Size _____
 Building Sewer - Material _____ Size _____
 Water Service - Material _____ Size _____
 Venting - Material _____ Size _____
 Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SEC.

☐ Partial Releases ☐ Prototype Processing

IL Lee Ward's



**PLUMBING
SUBCODE
TECHNICAL SECTION**



PERMIT NO. 4231
DATE ISSUED 6-23-58
REVISION DATE _____
Block 701 Lot 7, 8, 8.2, 15
Subdivision _____ 16

APPLICANT – Complete unshaded areas only

Owner Vornado, Inc.

Contractor Frank C. Gibson Inc.

Address 174 Passaic Street

Address 34 E. Main St. Box 191

Garfield, NJ 07026

Freehold, NJ 07728

Tel. (201) 773-4000

Tel. (201) 462-0282

Work Site Address Rte. 70 & Chambers

Lic. No./Bus. Permit 3281

Bridge Rd

Federal Emp. No.

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
✓	Water Closet/Bidet/Urnal	\$		Garbage Disposal	\$
✓	Bathrub	\$	4	Air Conditioner Unit	\$
✓	Lavatory/Sink	\$		Indirect Connection	\$
✓	Showet/Floor Drain	\$		Sewer Ejector	\$
	Washing Machine	\$		Grease Trap	\$
	Dishwasher	\$		Interceptor	\$
	Commercial Dishwasher	\$		Backflow Device	\$
	Water Heater	\$		Reduced Pressure	\$
✓	Domestic Boiler/ Furnace	\$	/	Backflow Device Vent Stack	\$
	Steam Boiler	\$		Solar System	\$
	Water Util. Connection	\$		Other GAS PIPES	\$
	Sewer Util. Connection	\$		Other _____	\$
	Hose Bibb	\$		Other _____	\$
	Water Cooler	\$		Other _____	\$

COLUMN 1 CURRENCY \$

COLUMN 2 CURRENCY \$

COLUMN 1
 CURRENCY \$

 SUBTOTAL
 Maximum Plumbing Fee
 (\$ if applicable)

 Total Plumbing Fee
 (Greater of Minimum
 or Subtotal)

C. PLUMBING CHARACTERISTICS

USE GROUP:	Present	Proposed

Drainage	Material	Size

Building Sewer—	Material	Size

Water Service--	Material	Size

Venting -	Material	Size

Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

ALL FEES INDICATED ON WASTE TECH. SEC.

☐ Partial Releases

☐ Prototype Processing

U.C.C. Form F-130 (8/83)

Green = Office Copy

White - Applicant's Copy

Blue Ink = Inspector's Copy

1

TOWNSHIP OF BRICK

IM R & S Strauss



PLUMBING SUBCODE



PERMIT NO. 74731
 DATE ISSUED 6-26-84
 REVISION DATE _____
 Block 701 Lot 7, 8, 8.2, 15 &
 Subdivision _____ 16

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner Vornado, Inc. Contractor Frank C. Gibson Inc.
 Address 174 Passaic Street Address 34 E. Main St. Box 191
Garfield, NJ 07026 Freehold, NJ 07728
 Tel. (201) 773-4000 Tel. (201) 462-0282
 Work Site Address Rte. 70 & Chambers Lic. No./Bus. Permit 3281
Bridge Road Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
<u>4</u>	Water Closet/Bidet/Urinal			Garbage Disposal	
<u>4</u>	Bathub			Air Conditioner Unit	
<u>5</u>	Lavatory/Sink			Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
<u>1</u>	Water Heater			Reduced Pressure	
	Domestic Boiler/Furnace			Backflow Device	
	Steam Boiler			Vent Stack	
	Water Util. Connection			Solar System	
	Sewer Util. Connection			Other <u>GAS PIPING</u>	
	Hose Bibb			Other _____	
<u>1</u>	Water Cooler			Other _____	

COLUMN 1

COLUMN 2

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____
 Drainage - Material _____ Size _____
 Building Sewer - Material _____ Size _____
 Water Service - Material _____ Size _____
 Venting - Material _____ Size _____
 Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SEC.

☐ Partial Releases☐ Prototype Processing



PLUMBING SUBCODE



PERMIT NO. 74234
DATE ISSUED 7-6-88
EXPIRATION DATE 7-6-89
Block 701 Lot 7-8-8-1-1516
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only When changing contractors, notify this office

Owner WOLFEARTH INC Contractor FRANK C GIBSON INC
Address 174 RAUCCI ST Address 94 EAST HART ST
HAERLID NJ 07026 FREHOLD NJ 07724
Tel. 701 723-4000 Tel. 701 466-0662
Work Site Address Black Box Centre Lic. No./Bus. Permit 3241
PHI III Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

[Signature]
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
5	Water Closet/Bidet/Urinal			Garbage Disposal		COLUMN 1
	Barhtub		14	Air Conditioner Unit		COLUMN 2
4	Lavatory/Sink			Indirect Connection		SCOTTAL
5	Shower/Floor Drain			Sewer Ejector		Minimum Plumbing Fee
	Washing Machine			Grease Trap		(if applicable)
	Dishwasher			Interceptor		Total Plumbing Fee
4	Commercial Dishwasher			Backflow Device		(Greater of Minimum
	Water Heater			Reduced Pressure		or Subcode)
14	Domestic Boiler/Furnace		4	Backflow Device		
	Steam Boiler			Vent Stack		
	Water Util. Connection		5	Solar System		
	Sewer Util. Connection			Other <u>SAS PIPES</u>		
	Hose Bibb			Other _____		
	Water Cooler			Other _____		

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____

Drainage - Material _____ Size _____

Building Sewer - Material _____ Size _____

Water Service - Material _____ Size _____

Venting - Material _____ Size _____

Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SEC.

☐ Partial Releases ☐ Prototype Processing

TOWNSHIP OF BRICK

3A Marshalls



PLUMBING SUBCODE TECHNICAL SECTION



PERMIT NO. 1422
 DATE ISSUED 6-22-89
 REVISION DATE _____
 Block 701 Lot 7, 8, 8.2, 15&
 Subdivision _____ 16

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only
 When changing contractors, notify this office
 Owner Yornado, Inc. Contractor Frank C. Gibson Inc.
 Address 174 Passaic Street Address 34 E. Main St. Box 191
Garfield, NJ 07026 Freehold, NJ 07728
 Tel. (201) 773-4000 Tel. (201) 462-0282
 Work Site Address Rte. 70 & Chambers Lic. No./Bus. Permit 3281
Bridge Road Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
 (Complete for Minor Work and Small Job Only)
 I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
Frank C. Gibson
 AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
<u>2</u>	Water Closet/Bidet/Urinal	\$			
	Bathub				
<u>5</u>	Lavatory/Sink		<u>2</u>	Garbage Disposal	\$
<u>2</u>	Shower/Floor Drain			Air Conditioner Unit	
	Washing Machine			Indirect Connection	
	Dishwasher			Sewer Elector	
	Commercial Dishwasher			Grease Trap	
	Water Heater			Interceptor	
<u>4</u>	Domestic Boiler/Furnace			Backflow Device	
	Steam Boiler			Reduced Pressure	
	Water Util. Connection			Backflow Device	
	Sewer Util. Connection			Vent Stack	
	Hose Bibb			Solar System	
	Water Cooler			Other <u>SAS PIPING</u>	
				Other _____	
				Other _____	
				Other _____	

COLUMN 1

COLUMN 2

Fee
 COLUMN 1
 COLUMN 2
 SUBTOTAL
 Minimum Retaining Fee
 (if applicable)
 Total Retaining Fee
 (Greater of Minimum
 or Subtotal)

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____
 Drainage - Material _____ Size _____
 Building Sewer - Material _____ Size _____
 Water Service - Material _____ Size _____
 Venting - Material _____ Size _____
 Estimated Cost of Plumbing Work: \$ _____

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH SECTION

☐ Partial Releases ☐ Prototype Processing



PLUMBING SUBCODE TECHNICAL SECTION



PERMIT NO. 44721
DATE ISSUED 6-22-89
REVISION DATE _____
Block 701 Lot 7, 8, 8.2, 15&
Subdivision 16

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner Vornado, Inc.
Address 174 Passaic Street
Garfield, NJ 07026
Tel. (201) 773-4000
Work Site Address Rte. 70 & Chambers
Bridge Road

Contractor Frank C. Gibson Inc.
Address 34 E. Main St. Box 191
Freehold, NJ 07728
Tel. (201) 462-0282
Lic. No./Bus. Permit 3281
Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	Fee
1	Water Closet/Bidet/Urinal			Garbage Disposal		COLUMN 1
4	Bathub		2	Air Conditioner Unit		COLUMN 2
4	Lavatory/Sink			Indirect Connection		SUBTOTAL
	Shower/Floor Drain			Sewer Ejector		Minimum Plumbing Fee
	Washing Machine			Grease Trap		(If applicable)
	Dishwasher			Interceptor		Total Plumbing Fee
	Commercial Dishwasher			Backflow Device		(Greater of Minimum
1/2	Water Heater			Reduced Pressure		or Subtotal)
	Domestic Boiler/ Furnace		1	Backflow Device		
	Steam Boiler			Vent Stack		
	Water Util. Connection			Solar System		
	Sewer Util. Connection			Other <u>SAS PIPES</u>		
	Hose Bibb			Other		
	Water Cooler			Other		
				Other		

COLUMN 1

COLUMN 2

C. PLUMBING CHARACTERISTICS

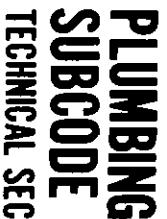
USE GROUP:	Present	Proposed
Drainage –	Material _____	Size _____
Building Sewer –	Material _____	Size _____
Water Service –	Material _____	Size _____
Venting –	Material _____	Size _____
Estimated Cost of Plumbing Work: \$ _____		

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SEC.

☐ Partial Releases

□ Prototype Processing



**PLUMBING
SUBCODE
TECHNICAL SECTION**



PERMIT NO. 15721
DATE ISSUED 6-22-89
REVISION DATE _____
Block 701 Lot 7, 8, 8.2, 15&
Subdivision 16

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner	<u>Vorndado, Inc.</u>	Contractor	<u>Frank C. Gibson Inc.</u>
Address	<u>174 Passaic Street</u> <u>Garfield, NJ 07026</u>	Address	<u>34 E. Main St. Box 191</u> <u>Freehold, NJ 07728</u>
Tel. (<u>201</u>)	<u>773-4000</u>	Tel. (<u>201</u>)	<u>462-0282</u>
Work Site Address	<u>Rte. 70 & Chambers</u> <u>Bridge Road</u>	Lic. No./Bus. Permit	<u>3281</u>
		Federal Emp. No.	

**CERTIFICATION IN LIEU OF OATH:
(Complete for *Minor Work* and
Small Job Only)**

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee	
1	Water Closet/Bidet/Urinal			Garbage Disposal		CITY USES 1 COLUMN 2
1	Bathtub		2	Air Conditioner Unit		
1	Lavatory/Sink			Indirect Connection		SUBTOTAL
	Shower/Floor Drain			Sewer Ejector		
	Washing Machine			Grease Trap		Minimum Plumbing Fee (If applicable)
	Dishwasher			Interceptor		
	Commercial Dishwasher			Backflow Device		Total Plumbing Fee (Greater of Minimum or Subtotal)
	Water Heater			Reduced Pressure Backflow Device		
4	Domestic Boiler/ Furnace		1	Vent Stack		
	Steam Boiler			Solar System		
	Water Util. Connection			Other \$45 PIPING		
	Sewer Util. Connection			Other		
	Hose Bibb			Other		
	Water Cooler			Other		

COLUMN 1

COLUMN 2

C. PLUMBING CHARACTERISTICS

USE GROUP:	Present	Proposed
Drainage —	Material _____	Size _____
Building Sewer —	Material _____	Size _____
Water Service —	Material _____	Size _____
Venting —	Material _____	Size _____
Estimated Cost of Plumbing Work: \$ _____		

D. COMMENTS

ALL FEES INDICATED ON MASTER TECH. SEC.

☐ Partial Releases ☐ Prototype Processing

3D Joyce Leslie



TECHNICAL SECTION



PERMIT NO. 24721
DATE ISSUED 6-13-89
REVISION DATE 1
Block 701 Lot 7, 8, 8.2, 15&
Subdivision 16

APPLICANT – Complete unshaded areas only

When changing contractors, notify this office

Owner	<u>Vornado, Inc.</u>	Contractor	<u>Frank C. Gibson Inc.</u>
Address	<u>174 Passaic Street</u> <u>Garfield, NJ 07026</u>	Address	<u>34 E. Main St. Box 191</u> <u>Freehold, NJ 07728</u>
Tel. (201)	<u>773-4000</u>	Tel. (201)	<u>462-0282</u>
Work Site Address	<u>Rte. 70 & Chambers</u> <u>Bridge Road</u>	Lic./No./Bus. Permit	<u>3281</u>
		Federal Emp. No.	

**CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and
Small Job Only)**

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

agent. *[Signature]*
AGENT SIGNATURE

List all fixtures

TYPE OF WORK:

[illegible]

USE GROUP: _____ Present _____ Proposed _____

Drainage —	Material	Size
Building Sewer—	Material	Size
Water Service—	Material	Size
Venting —	Material	Size
Estimated Cost of Plumbing Work: \$		

ALL FEES INDICATED ON MASTER TECH SEC.

☐ Partial Releases

☐ Prototype Processing

PLAN REVIEW AND INSPECTION - PLUMBING

DATE

JOB CONDITION/COMMENTS

9-13-89

ALL ROUGHS EXCEPT 1A-1J-1K

10-10-89

ROUGHS (1J BEAUTY BARN) (1K VACANT)

10-20-89

LIQUOR STORE ROUGH (1A)

JOB SUMMARY

☐ No Plans Required

☒ Plan Review Approved

Date:

6-6-89

Approved By:

[Signature]

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date:

11-16-89

Inspected By:

[Signature]

INSPECTIONS

Type

☒ Slab
☒ Rough
☐ Water
☐ Sewer
☐ Energy
☐ Mechanical
☐ TCO
☒ Other GAS PIPE

Failure Dates

Approval Date

6-21-89
 10-20-89
 8-30-89

JOB CONDITION/COMMENTS

DATE _____

[illegible]

INSPECTIONS

☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-88

Approved By:

INSPECTIONS FINAL

☒	CO	☐	CCO	☐	CA
-------------------------------------	----	--------------------------	-----	--------------------------	----

Date: 11-16-89

Inspected By:

Type	Slab	Rough	Water	Sewer	Energy	Mechanical	TCO	Other
	☒	☐	☐	☐	☐	☐	☐	☒ 6A

Other GAS PIPE

Approval Date

68-12-7

10-26-89

8-30-89

PLAN REVIEW AND INSPECTION – PLUMBING

DATE _____

JOB CONDITION/COMMENTS[illegible]

JOB SUMMARY

- | | |
|--------------------------|----------------------|
| ☐ | No Plans Required |
| ☐ | Plan Review Approved |

Date: 6-6-89

Approved By: _____

INSPECTIONS & FINAL

☒	CO	☐	CCO	☐	CA
-------------------------------------	----	--------------------------	-----	--------------------------	----

Date: 11-16-89

Inspected By: John J. Decker

INSPECTIONS

Type	Slab	Rough	Water	Sewer	Energy	Mechanical	TCO	Other
	☒	☒	☐	☐	☐	☐	☐	☒ 622

Other SAS Pipe

Failure Dates

Approval Date

6-21-88

9-13-89

8-30-89

- PLUMBING

JOB CONDITION/COMMENTS[illegible]

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By: NS

INSPECTIONS FINAL

☒	CO
☐	CCO
☐	CA

Date: 11-16-89

Inspected By: KZ

INSPECTIONS

Type	Slab	Rough	Water	Sewer	Energy	Mechanical	TCO	Other
	☒	☒	☐	☐	☐	☐	☐	☒

GAS PRICE

Failure Dates

[illegible]

Approved Date:

6-21-89

58-31-6

8-30-80

PLAN REVIEW AND INSPECTION - PLUMBING

DATE _____

109 CONDITION/COMMENTS

[illegible]

JOB SUMMARY

INSPECTIONS

☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By:

INSPECTION'S FINAL

☒	CO	☐	CA
☐	CCO	☐	

Date: 11-16-89

Inspected By:

Type

五十八

☒ Rough Water

Sewer

Energy

Mechanical

☒ Other GAS PIPE

Exhibit D

Abstracted Data

6-21-88

9-13-89

8-30-89

PLAN REVIEW AND INSPECTION - PLUMBING

DATE _____

100 CONDITION/COMMENTS[illegible]

JOB SUMMARY

INSPECTIONS

☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By:

INSPECTIONS FINAL

☐	CA
☐	CCO
☒	CO

Date: 11-6-89

Inspected By:

Type

☒ Slab☒ Rough

Water

Sewer

Energy

Mechanical

TCO

☒ Other GAS PIPE

Failure Dates

Approval Date:

6-21-89

9-13-89

PLAN REVIEW AND INSPECTION - PLUMBING

DATE _____

JOB CONDITION/COMMENTS[illegible]

JOB SUMMARY

INSPECTIONS

☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By: J. W. Fisher

INSPECTION'S FINAL

☒	CO	☐	CCO	☐	CA
-------------------------------------	----	--------------------------	-----	--------------------------	----

Date: 11-16-89

Inspected By: L.W. Spivey

Type	Slab	Rough	Water	Sewer	Energy	Mechanical	TCO	Other <u>GAs</u>
	☒	☒	☐	☐	☐	☐	☐	☒

Other GAS PIPE

Approved Date

6-21-88
9-13-88

8-30-89

PLAN REVIEW AND INSPECTION – PLUMBING

DATE _____

JOB CONDITION/COMMENTS[illegible]

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By: S. W.

INSPECTIONS FINAL

☒	CO	☐	CCO	☐	CA
-------------------------------------	----	--------------------------	-----	--------------------------	----

Date: 11-16-89

Inspected By: [Signature]

INSPECTIONS

Type

☒ Slab☒ Rough

Water

☐ Sewer

Energy

Mechanical

TCO ☐

☒ Other GAS PIPE

Failure Dates

Approval Date:

6-21-89

9-13-89 /

100

1

PLAN REVIEW AND INSPECTION – PLUMBING

DATE _____

JOB CONDITION/COMMENTS[illegible]

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By: David L. L.

INSPECTIONS/FINAL

☒	CO	☐	CCO	☐	CA
-------------------------------------	----	--------------------------	-----	--------------------------	----

Date: 11-16-89

Inspected By: ALW

INSPECTIONS

Type	Slab	Rough	Water	Sewer	Energy	Mechanical	TCO	Other
	☒	☒	☐	☐	☐	☐	☐	☒

Gas Pipe

Failure Dates

Approval Date

2-21-89

10-10-8

8-30-89

PLAN REVIEW AND INSPECTION - PLUMBING

DATE _____

JOB CONDITION/COMMENTS

107

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved

Date:

Approved By:

INSPECTIONS FINAL

☒	CO
☐	CCO
☐	CA

Date: 11-16-89

Inspected By:

INSPECTIONS

Type

[illegible]

Approval Date:

Slab

☐ Rough

Water

☐
 Answer

Energy

Mechanical

 Tco☐ Other

— PLUMBING

JOB CONDITION/COMMENTS[illegible]

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By: L. W. Spivey

INSPECTIONS FINAL

CA	☐	CCO	☐	CO	☒
----	--------------------------	-----	--------------------------	----	-------------------------------------

Date: 10-26-89

Inspected By: [Signature]

INSPECTIONS

Type	Slab	Rough	Water	Sewer	Energy	Mechanical	TCO	Other
	☒	☒	☐	☐	☐	☐	☐	☒ 60%

Other GAS PIPE

Failure Dates

Associated Data

6-21-89

9-13-89

8-30-89

JOB CONDITION/COMMENTS

DATE _____

[illegible]

INSPECTIONS

- ☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By: J.D. Sullivan

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 10-31-89

Inspected By: F.D. Sp...

Failure Data

Approved Date

- | | |
|-------------------------------------|-------------------|
| ☒ | Slab |
| ☒ | Rough |
| ☐ | Water |
| ☐ | Sewer |
| ☐ | Energy |
| ☐ | Mechanical |
| ☐ | TCO |
| ☒ | Other <u>6A55</u> |

[illegible]

GAS PIPES

U.C.C. Form F-130 (8/83)

JOB CONDITION/COMMENTS

DATE _____

[illegible]

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By: [Signature]

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 10-20-89

Inspected By: [Signature]

INSPECTIONS

Type	Failure Dates	Approval Date
☒ Slab		6-9-89
☒ Rough		8-8-89
☐ Water		
☐ Sewer		
☐ Energy		
☐ Mechanical		
☐ TCO		
☐ Other		

— PLUMBING

JOB CONDITION/COMMENTS[illegible]

INSPECTIONS

- Plan Review Approved**

Approved By: De W. J. [Signature]

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 10-20-89

Inspected By: LD

Type	Slab	Rough	Water	Sewer	Energy	Mechanical	T&O	Other
	☒	☒	☒	☐	☐	☐	☐	☐

Failure Dates

Approval Date

6-9-88-

8-8-89

10-19-88

JOBS CONDITION/COMMENTS

JOB SUMMARY

Inspected By:

Type	Slab	Rough	Water	Sewer	Energy	Mechanical	TCO	Other
	☒	☒	☒	☐	☐	☐	☐	☐

[illegible]

Approval Date

6-9-89
8-8-89
10-19-89

JOB CONDITION/COMMENTS

DATE _____

[illegible]

JOB SUMMARY

- ☐ No Plans Required
☒ Plan Review Approved

Date: 6-6-89

Approved By: SP [Signature]

INSPECTIONS FINAL

☒	CO
☐	CCO
☐	CA

Date: 10-20-89

Inspected By: [Signature]

INSPECTIONS

Type

- | | |
|-------------------------------------|------------|
| ☒ | Slab |
| ☒ | Rough |
| ☒ | Water YOLK |
| ☐ | Sewer |
| ☐ | Energy |
| ☐ | Mechanical |
| ☐ | TCO |
| ☐ | Other |

Failure Dates

Approved Date

68-6-9

8-8-89

28-67-01

— PLUMBING

JOB CONDITION/COMMENTS[illegible]

INSPECTIONS

Inspected By: NA

INSPECTIONS FINAL

Inspected By: N. J. [Signature]

► **Interpersonal Data**

6-9-89
8-8-89
10-19-89



CUT-IN-CARD

MUNICIPALITY

B.T.

LOCATION

HOOVER AVE + BRICK BLVD

UTILITY CO

P

BLK

670

LOT

4,582,25

OWNER

KENNEDY Plaza Mall

OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C. utility and DCA requirements."

☒ FINAL ☐ TEMPORARY

This approval void after _____ days

SERVICE

RANGE

WATER HEATER

AIR COND

ELECT HEAT

MISC

COMMENTS

2-600A 3 & SERVICE

DATE

11-21-89

PERMIT #

009024

INSPECTOR

H. H. H.

Elec. 104

P 881219

Insp. Lic#

1477

MUNICIPALITY

B.T.



CUT-IN-CARD

LOCATION

HOOPER AVE & BAICK BLVD

UTILITY CO

F.P.

OWNER PANEL

BLK

610

LOT

4, 5, 8, 23, 25

OWNER

KENNEDY PLAZA MALL ASSOC.

OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C. utility and DCA requirements."

☒ FINAL ☐ TEMPORARY

This approval void after _____ days

SERVICE

ROOA 3Ø

RANGE

WATER HEATER

AIR COND

ELECT HEAT

MISC

COMMENTS

R#0868323

DATE 11-21-89

PERMIT #

009025

INSPECTOR

F. H. Hinkel

Elec. 104

P 881219

Insp. Lic#

1427



CUT-IN-CARD

MUNICIPALITY B.T.

LOCATION OLD HOOPER & BACK BLVD. UTILITY CO T.

BLK 670 LOT 458,2325

OWNER KENNEDY MALL ASSO. OCCUPANT _____

"Installation in the above premises has been inspected and is in accordance with N.E.C, utility and DCA requirements."

☒ FINAL ☐ TEMPORARY

This approval void after _____ days

SERVICE _____ RANGE _____ WATER HEATER _____

AIR COND _____ ELECT HEAT _____ MISC _____

COMMENTS 11-100A 3 PHASE SERVICES

DATE 11-21-81 PERMIT # 004392 INSPECTOR [Signature]

Elec. 104

Insp. Lic# 1427

meter

**THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY**

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
458-7000

CERTIFICATE OF COMPLIANCE

Date..... 11-14-89

NAME..... Vornado, Inc

ADDRESS..... 174 Passiac St. Garfield, NJ

PROPERTY LOCATION..... Hwy. 70 Hallmark Cards

Account No..... G783219 Block..... 701 Lot..... 7

I hereby certify that the above applicant has complied with all Rules
and Regulations of this Authority and has paid all required fees and charges.

For the Authority..... James Koster
All sewer charges for use & is calculated of 72 ft
w/o permeability of 1 yr use & is calculated of 72 ft
of use is scheduled.



CUT-IN-CARD

MUNICIPALITY

B.T.

LOCATION

CHAMBERS BRIDGE RD AT

UTILITY CO.

P.P.

CALDON LNT.

BLK

LOT

OWNER

Ocean County Assoc.

OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C, utility and DCA requirements."

☒ FINAL ☐ TEMPORARY

This approval void after _____ days

SERVICE

60 A

RANGE

WATER HEATER

AIR COND

ELECT HEAT

MISC

COMMENTS

TRAFFIC SIGNAL

R1273823

DATE

11-3-89

PERMIT #

011929

INSPECTOR

Elec. 104

Insp. Lic#

1427

**THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY**

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
458-7000

CERTIFICATE OF COMPLIANCE

Date 11-14-89

NAME Vornado, Inc.

ADDRESS 174 Passiac St. Garfield, Nj

PROPERTY LOCATION Hwy. 70 Cut Ups

Account No. G784986 Block 701 Lot 7

I hereby certify that the above applicant has complied with all Rules
and Regulations of this Authority and has paid all required fees and charges.

For the Authority

Jose M. Montoya
All service connector fees w/o re-evaluation after
1 yr. of water usage, & w/o calculated of 72,000
is excluded.

PLUMBING & MECHANICAL CHECK LIST

~~TECHNICAL SECTION INCOMPLETE~~

~~PLUMBER'S IDENTIFICATION & SEAL~~

~~ISOMETRIC SKETCH~~

~~LIST OF EXISTING FIXTURES~~

~~GAS PIPING LAYOUT WITH APPLIANCE RATINGS~~

~~SIZE OF EXISTING HEATING UNIT~~

~~BROCHURE FOR HEATING UNIT~~

~~HEAT LOSS~~

X OTHER HANDICAPPED COMPLIANCE IN MARSHALLS & R & S NOT COMPLYING

~~(SEEDED SECTION FOR MARSHALLS & R & S NOT COMPLYING)~~

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC Date 6-5-89
 Property Address RTL 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15-1
 Zoning 1-A LIQUOR STORE Use Group _____
 Contractor GIBSON License No. Registration 3281
 Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu)	Water Units	(dfu)	Drainage Units
1. Water Closet	<u>1</u>	<u>(5)</u>	<u>5</u>	<u>()</u>	_____
2. Lavatory	<u>1</u>	<u>(2)</u>	<u>2</u>	<u>()</u>	_____
3. Bath Tub	_____	<u>()</u>	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____	<u>()</u>	_____

Total 7
 Gallons per minute 5.5
 Size of Service 1"

Date: 6-5-89

Approved: [Signature]
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC. Date 6-5-89
 Property Address RTL 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15
 Zoning 1 B RAINBOW SHOPS Use Group _____
 Contractor GIBSON License No. Registration 3281
 Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(5)</u>	<u>5</u>
2. Lavatory	<u>1</u>	<u>(2)</u>	<u>2</u>
3. Bath Tub	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____

Total

7

Gallons per minute

5.5

Size of Service

1"

Date:

6-5-89

Approved: -

J. D. Sp...
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC. Date 6-5-89
 Property Address RTL 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15
 Zoning 1 C FAYVA SHOES Use Group _____
 Contractor GIBSON License No. Registration 3281
 Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(5) 5</u>	<u>()</u>
2. Lavatory	<u>1</u>	<u>(2) 2</u>	<u>()</u>
3. Bath Tub	_____	<u>()</u>	<u>()</u>
4. Shower Stall	_____	<u>()</u>	<u>()</u>
5. Kitchen Sink	_____	<u>()</u>	<u>()</u>
6. Service Sink	_____	<u>()</u>	<u>()</u>
7. Laundry Tray	_____	<u>()</u>	<u>()</u>
8. Dishwasher	_____	<u>()</u>	<u>()</u>
9. Washing Machine	_____	<u>()</u>	<u>()</u>
10. Urinal	_____	<u>()</u>	<u>()</u>
11. Floor Drain	_____	<u>()</u>	<u>()</u>
12. Drinking Fountain	_____	<u>()</u>	<u>()</u>
13. Air Conditioner (water cooled)	_____	<u>()</u>	<u>()</u>
14. Dental Unit	_____	<u>()</u>	<u>()</u>
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
17. _____	_____	<u>()</u>	<u>()</u>
18. _____	_____	<u>()</u>	<u>()</u>

Total

7

Gallons per minute

5.5

Size of Service

1"

Date:

6-5-89

Approved:

[Signature]
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC. Date 6-5-89
 Property Address RTE 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15
 Zoning 1 D LEORA CARDS Use Group _____
 Contractor GIBSON License No. Registration 3281

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(5)</u>	<u>5</u>
2. Lavatory	<u>1</u>	<u>(2)</u>	<u>2</u>
3. Bath Tub	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____

Total 7

Gallons per minute 5.5

Size of Service 1"

Date: 6-5-89

Approved: [Signature]
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC. Date 6-5-89

Property Address RTE 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15

Zoning 1E BAKER SHOES Use Group _____

Contractor GIBSON License No. Registration 3281

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu)	Water Units	(dfu)	Drainage Units
1. Water Closet	<u>1</u>	<u>(5)</u>	<u>5</u>	<u>()</u>	_____
2. Lavatory	<u>1</u>	<u>(2)</u>	<u>2</u>	<u>()</u>	_____
3. Bath Tub	_____	<u>()</u>	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____	<u>()</u>	_____

Total 7

Gallons per minute 5.5

Size of Service 1"

Date: 6-5-89

Approved: J. W. Sol
Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC. Date 6-5-89
 Property Address RTE 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-82-15
~~Zoning~~ IF HIT OR MISS Use Group _____
 Contractor GIBSON License No. Registration 3281
 Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(5) 5</u>	<u>()</u>
2. Lavatory	<u>1</u>	<u>(2) 2</u>	<u>()</u>
3. Bath Tub	_____	<u>()</u>	<u>()</u>
4. Shower Stall	_____	<u>()</u>	<u>()</u>
5. Kitchen Sink	_____	<u>()</u>	<u>()</u>
6. Service Sink	_____	<u>()</u>	<u>()</u>
7. Laundry Tray	_____	<u>()</u>	<u>()</u>
8. Dishwasher	_____	<u>()</u>	<u>()</u>
9. Washing Machine	_____	<u>()</u>	<u>()</u>
10. Urinal	_____	<u>()</u>	<u>()</u>
11. Floor Drain	_____	<u>()</u>	<u>()</u>
12. Drinking Fountain	_____	<u>()</u>	<u>()</u>
13. Air Conditioner (water cooled)	_____	<u>()</u>	<u>()</u>
14. Dental Unit	_____	<u>()</u>	<u>()</u>
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
17. _____	_____	<u>()</u>	<u>()</u>
18. _____	_____	<u>()</u>	<u>()</u>

Total 7
 Gallons per minute 5.5
 Size of Service 1"

Date: 6-5-89

Approved: [Signature]
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC Date 6-5-89

Property Address RTL 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15

Zoning IG CUT-UPS Use Group _____

Contractor GIBSON License No. Registration 3281

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(5) 5</u>	<u>()</u>
2. Lavatory	<u>1</u>	<u>(2) 2</u>	<u>()</u>
3. Bath Tub	_____	<u>()</u>	<u>()</u>
4. Shower Stall	_____	<u>()</u>	<u>()</u>
5. Kitchen Sink	_____	<u>()</u>	<u>()</u>
6. Service Sink	_____	<u>()</u>	<u>()</u>
7. Laundry Tray	_____	<u>()</u>	<u>()</u>
8. Dishwasher	_____	<u>()</u>	<u>()</u>
9. Washing Machine	_____	<u>()</u>	<u>()</u>
10. Urinal	_____	<u>()</u>	<u>()</u>
11. Floor Drain	_____	<u>()</u>	<u>()</u>
12. Drinking Fountain	_____	<u>()</u>	<u>()</u>
13. Air Conditioner (water cooled)	_____	<u>()</u>	<u>()</u>
14. Dental Unit	_____	<u>()</u>	<u>()</u>
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
17. _____	_____	<u>()</u>	<u>()</u>
18. _____	_____	<u>()</u>	<u>()</u>

Total 7

Gallons per minute 5.5

Size of Service 1"

Date: 6-5-89

Approved: [Signature]
Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC. Date 6-5-89

Property Address RTL 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-151

Zoning 1 H (VACANT) Use Group _____

Contractor GIBSON License No. Registration 3281

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu)</u>	<u>Water Units</u>	<u>(dfu)</u>	<u>Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(5)</u>	<u>5</u>	<u>()</u>	_____
2. Lavatory	<u>1</u>	<u>(2)</u>	<u>2</u>	<u>()</u>	_____
3. Bath Tub	_____	<u>()</u>	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____	<u>()</u>	_____

Total 7

Gallons per minute 5.5

Size of Service 1"

Date: 6-5-89

Approved: *J. W. Sp...*
Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO INC Date 6-5-89
 Property Address RTE 70 + CHAMBERS BRIDGE Block 701 Lot 7-8-8.2-15-16
 Zoning UNIT 1-I Use Group _____
 Contractor _____ License No. Registration 3281
 Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(5) 5</u>	<u>()</u>
2. Lavatory	<u>1</u>	<u>(2) 2</u>	<u>()</u>
3. Bath Tub	_____	<u>()</u>	<u>()</u>
4. Shower Stall	_____	<u>()</u>	<u>()</u>
5. Kitchen Sink	_____	<u>()</u>	<u>()</u>
6. Service Sink	_____	<u>()</u>	<u>()</u>
7. Laundry Tray	_____	<u>()</u>	<u>()</u>
8. Dishwasher	_____	<u>()</u>	<u>()</u>
9. Washing Machine	_____	<u>()</u>	<u>()</u>
10. Urinal	_____	<u>()</u>	<u>()</u>
11. Floor Drain	_____	<u>()</u>	<u>()</u>
12. Drinking Fountain	_____	<u>()</u>	<u>()</u>
13. Air Conditioner (water cooled)	_____	<u>()</u>	<u>()</u>
14. Dental Unit	_____	<u>()</u>	<u>()</u>
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
17. _____	_____	<u>()</u>	<u>()</u>
18. _____	_____	<u>()</u>	<u>()</u>

Total 7
 Gallons per minute 5.5
 Size of Service 1"

Date: 6-5-89 Approved: J. D. [Signature]
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC. Date 6-5-89
 Property-Address RTE 70 + CHAMBERSBRIDGE RD Block 701 Lot 7-8-8.2-15
 Zoning 1-J BEAUTY BARN Use Group _____
 Contractor GIBSON License No. Registration 3281
 Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu) Water Units	(dfu) Drainage Units
1. Water Closet	<u>1</u>	<u>(5)</u>	<u>5</u>
2. Lavatory	<u>1</u>	<u>(2)</u>	<u>2</u>
3. Bath Tub	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____

Total 6 7
 Gallons per minute 5.5
 Size of Service 1"

Date: 6-5-89

Approved: J. W. Sp...
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC. Date 6-5-89

Property Address RTL 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-82-15

Zoning IK (VACANT) Use Group

Contractor GIBSON License No. Registration 3281

Water Main Size Water Pressure Sewer Main Size

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu)</u>	<u>Water Units</u>	<u>(dfu)</u>	<u>Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(5)</u>	<u>5</u>	<u>()</u>	<u></u>
2. Lavatory	<u>1</u>	<u>(2)</u>	<u>2</u>	<u>()</u>	<u></u>
3. Bath Tub	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
4. Shower Stall	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
5. Kitchen Sink	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
6. Service Sink	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
7. Laundry Tray	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
8. Dishwasher	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
9. Washing Machine	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
10. Urinal	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
11. Floor Drain	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
12. Drinking Fountain	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
13. Air Conditioner (water cooled)	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
14. Dental Unit	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
15. Lawn Sprinkler No. of Heads	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
16. Fire Sprinkler No. of Heads	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
17. <u></u>	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>
18. <u></u>	<u></u>	<u>()</u>	<u></u>	<u>()</u>	<u></u>

Total 7

Gallons per minute 5.5

Size of Service 1"

Date: 6-5-89

Approved: J. D. Sch
Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC Date 6-5-89
 Property Address RTE 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15
 Zoning 1 L LEE WARDS Use Group _____
 Contractor GIBSON License No. Registration 3281
 Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	<u>2</u>	<u>(5)</u> <u>10</u>	<u>()</u> _____
2. Lavatory	<u>3</u>	<u>(2)</u> <u>6</u>	<u>()</u> _____
3. Bath Tub	_____	<u>()</u> _____	<u>()</u> _____
4. Shower Stall	_____	<u>()</u> _____	<u>()</u> _____
5. Kitchen Sink	_____	<u>()</u> _____	<u>()</u> _____
6. Service Sink	_____	<u>()</u> _____	<u>()</u> _____
7. Laundry Tray	_____	<u>()</u> _____	<u>()</u> _____
8. Dishwasher	_____	<u>()</u> _____	<u>()</u> _____
9. Washing Machine	_____	<u>()</u> _____	<u>()</u> _____
10. Urinal	_____	<u>()</u> _____	<u>()</u> _____
11. Floor Drain	_____	<u>()</u> _____	<u>()</u> _____
12. Drinking Fountain	_____	<u>()</u> _____	<u>()</u> _____
13. Air Conditioner (water cooled)	_____	<u>()</u> _____	<u>()</u> _____
14. Dental Unit	_____	<u>()</u> _____	<u>()</u> _____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u> _____	<u>()</u> _____
16. Fire Sprinkler No. of Heads	_____	<u>()</u> _____	<u>()</u> _____
17. _____	_____	<u>()</u> _____	<u>()</u> _____
18. _____	_____	<u>()</u> _____	<u>()</u> _____

Total

16

Gallons per minute

11.6

Size of Service

1"

Date:

6-5-89

Approved:

J. D. Sp
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC Date 6-5-89

Property Address RTE 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15

Zoning 1M R+S STRAUSS Use Group _____

Contractor GIBSON License No. Registration 3281

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu)</u>	<u>Water Units</u>	<u>(dfu)</u>	<u>Drainage Units</u>
1. Water Closet	<u>4</u>	<u>(5)</u>	<u>20</u>	<u>()</u>	_____
2. Lavatory	<u>4</u>	<u>(2)</u>	<u>8</u>	<u>()</u>	_____
3. Bath Tub	_____	<u>()</u>	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____	<u>()</u>	_____

Total 28

Gallons per minute 18.5

Size of Service 1"

Date: 6-5-89

Approved: [Signature]
Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC Date 6-5-89
 Property Address RTE 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15
 Zoning 3A MARSHALLS Use Group _____
 Contractor GIBSON License No. Registration 3281
 Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu)	Water Units	(dfu)	Drainage Units
1. Water Closet	<u>2</u>	<u>(5)</u>	<u>10</u>	<u>()</u>	_____
2. Lavatory	<u>5</u>	<u>(2)</u>	<u>10</u>	<u>()</u>	_____
3. Bath Tub	_____	<u>()</u>	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____	<u>()</u>	_____

Total 20
 Gallons per minute 14
 Size of Service 1"

Date: 6-5-89

Approved: _____

J. D. Sch
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC Date 6-5-89
 Property Address RTL 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15
 Zoning 3B STAX Use Group _____
 Contractor GIBSON License No. Registration 3281
 Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(8) 5</u>	<u>()</u>
2. Lavatory	<u>1</u>	<u>(2) 2</u>	<u>()</u>
3. Bath Tub	_____	<u>()</u>	<u>()</u>
4. Shower Stall	_____	<u>()</u>	<u>()</u>
5. Kitchen Sink	_____	<u>()</u>	<u>()</u>
6. Service Sink	_____	<u>()</u>	<u>()</u>
7. Laundry Tray	_____	<u>()</u>	<u>()</u>
8. Dishwasher	_____	<u>()</u>	<u>()</u>
9. Washing Machine	_____	<u>()</u>	<u>()</u>
10. Urinal	_____	<u>()</u>	<u>()</u>
11. Floor Drain	_____	<u>()</u>	<u>()</u>
12. Drinking Fountain	_____	<u>()</u>	<u>()</u>
13. Air Conditioner (water cooled)	_____	<u>()</u>	<u>()</u>
14. Dental Unit	_____	<u>()</u>	<u>()</u>
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
17. _____	_____	<u>()</u>	<u>()</u>
18. _____	_____	<u>()</u>	<u>()</u>

Total 7

Gallons per minute 5.5

Size of Service 1"

Date: 6-5-89

Approved: _____

J. D. Sch
 Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC Date 6-5-89

Property Address RTE 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-82-15

Zoning 3C RAFTERS Use Group _____

Contractor GIBSON License No. Registration 3281

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu)</u>	<u>Water Units</u>	<u>(dfu)</u>	<u>Drainage Units</u>
1. Water Closet	<u>1</u>	<u>(5)</u>	<u>5</u>	<u>()</u>	_____
2. Lavatory	<u>1</u>	<u>(2)</u>	<u>2</u>	<u>()</u>	_____
3. Bath Tub	_____	<u>()</u>	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____	<u>()</u>	_____

Total 7

Gallons per minute 5.5

Size of Service 1"

Date: 6-5-89

Approved: [Signature]
Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC Date 6-5-89

Property Address RTL 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-8.2-15

Zoning 3D JOYCE LESLIE Use Group _____

Contractor GIBSON License No. Registration 3281

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu)	Water Units	(dfu)	Drainage Units
1. Water Closet	<u>1</u>	<u>(5)</u>	<u>5</u>	<u>()</u>	_____
2. Lavatory	<u>1</u>	<u>(2)</u>	<u>2</u>	<u>()</u>	_____
3. Bath Tub	_____	<u>()</u>	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____	<u>()</u>	_____
5. Kitchen Sink	_____	<u>()</u>	_____	<u>()</u>	_____
6. Service Sink	_____	<u>()</u>	_____	<u>()</u>	_____
7. Laundry Tray	_____	<u>()</u>	_____	<u>()</u>	_____
8. Dishwasher	_____	<u>()</u>	_____	<u>()</u>	_____
9. Washing Machine	_____	<u>()</u>	_____	<u>()</u>	_____
10. Urinal	_____	<u>()</u>	_____	<u>()</u>	_____
11. Floor Drain	_____	<u>()</u>	_____	<u>()</u>	_____
12. Drinking Fountain	_____	<u>()</u>	_____	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____	<u>()</u>	_____

Total 7

Gallons per minute 5.5

Size of Service 1"

Date: 6-5-89

Approved: [Signature]
Brick Township Plumbing Inspector

SIZING FOR WATER AND SEWER SERVICES

Property Owner VORNADO, INC. Date 6-5-89

Property Address RTE 70 + CHAMBERS BRIDGE RD Block 701 Lot 7-8-82-15

~~Zoning~~ COMPLETE BUILDING Use Group _____

Contractor GIBSON License No. Registration 3281

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	_____	() _____	() _____
2. Lavatory	_____	() _____	() _____
3. Bath Tub	_____	() _____	() _____
4. Shower Stall	_____	() _____	() _____
5. Kitchen Sink	_____	() _____	() _____
6. Service Sink	_____	() _____	() _____
7. Laundry Tray	_____	() _____	() _____
8. Dishwasher	_____	() _____	() _____
9. Washing Machine	_____	() _____	() _____
10. Urinal	_____	() _____	() _____
11. Floor Drain	_____	() _____	() _____
12. Drinking Fountain	_____	() _____	() _____
13. Air Conditioner (water cooled)	_____	() _____	() _____
14. Dental Unit	_____	() _____	() _____
15. Lawn Sprinkler No. of Heads	_____	() _____	() _____
16. Fire Sprinkler No. of Heads	_____	() _____	() _____
17. _____	_____	() _____	() _____
18. _____	_____	() _____	() _____

Total _____

Gallons per minute _____

Size of Service _____

Date: 6-5-89

Approved: J. W. Sp.
Brick Township Plumbing Inspector

ALAN FELD
ARCHITECT

AIA

3200 KENNEDY BLVD.
JERSEY CITY, NJ 07306
(201) 963-5877

June 7, 1989

RECEIVED
JUN 9 1989
DIV. OF INSPECTION

Building Department
Brick Township
401 Chambers Bridge Road
Brick, NJ 08723

ATT: Mr. Joe Spa

REF: R&S Strauss
Bricktown Centre

Gentlemen:

Please be advised that we have revised the toilet plan according to the handicapped requirements.

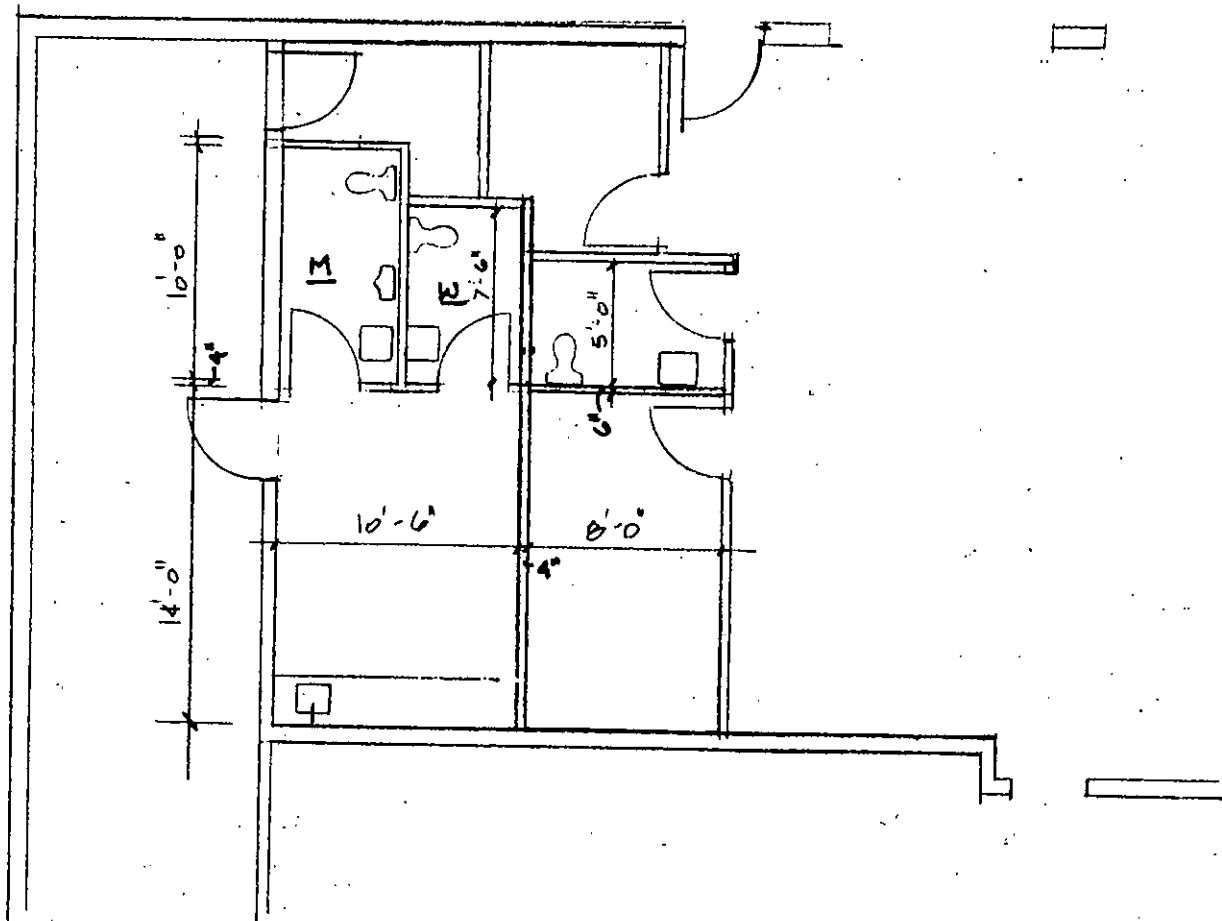
Enclosed are two copies of the revised plan for your approval.

Sincerely,

Alan Feld
Alan Feld, AIA (jmf)

AF/jmf

Encls.



PLAN @ TOILETS

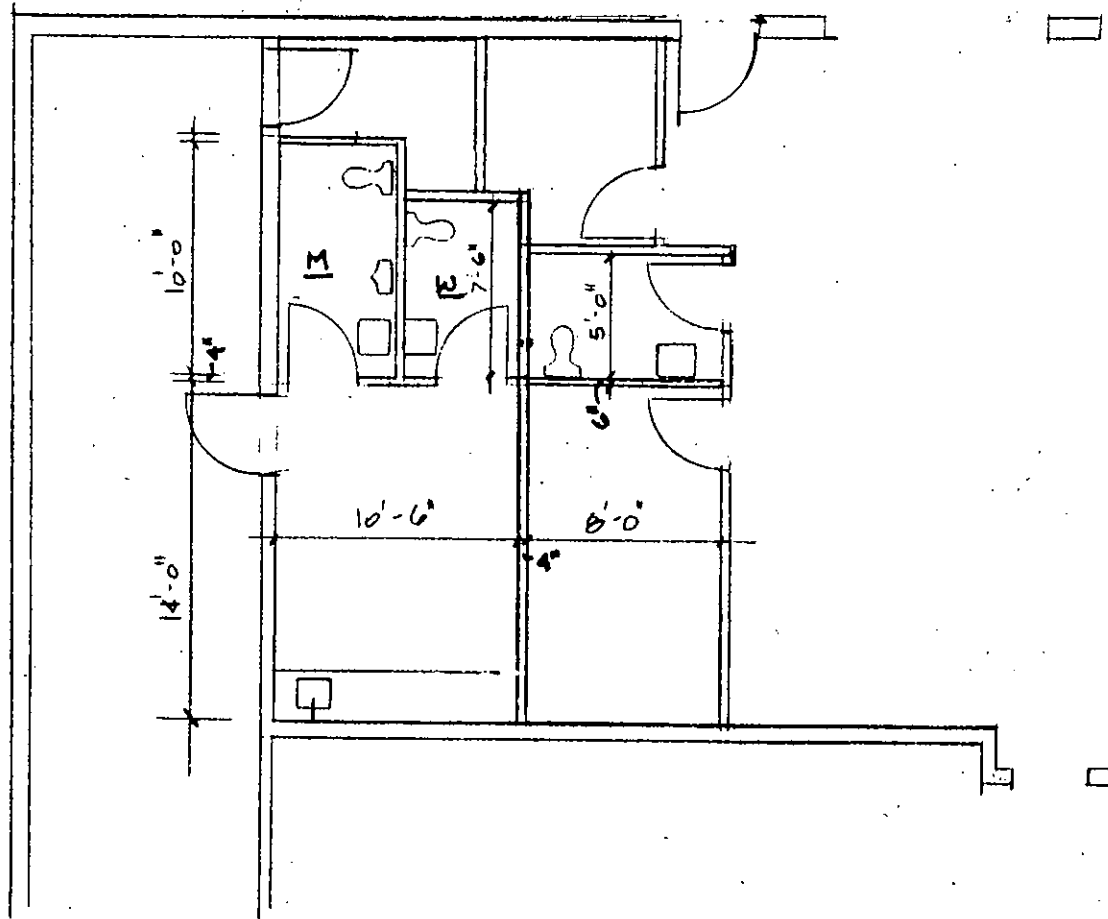
SCALE

1/8" = 1'-0"

R & S STROUSS
BRICKTOWN, NJ
6/6/89

ALAN FELD,
ARCHITECT
3100 KENNEDY BLVD
JERSEY CITY, NJ

MF



PLAN OF TOILETS

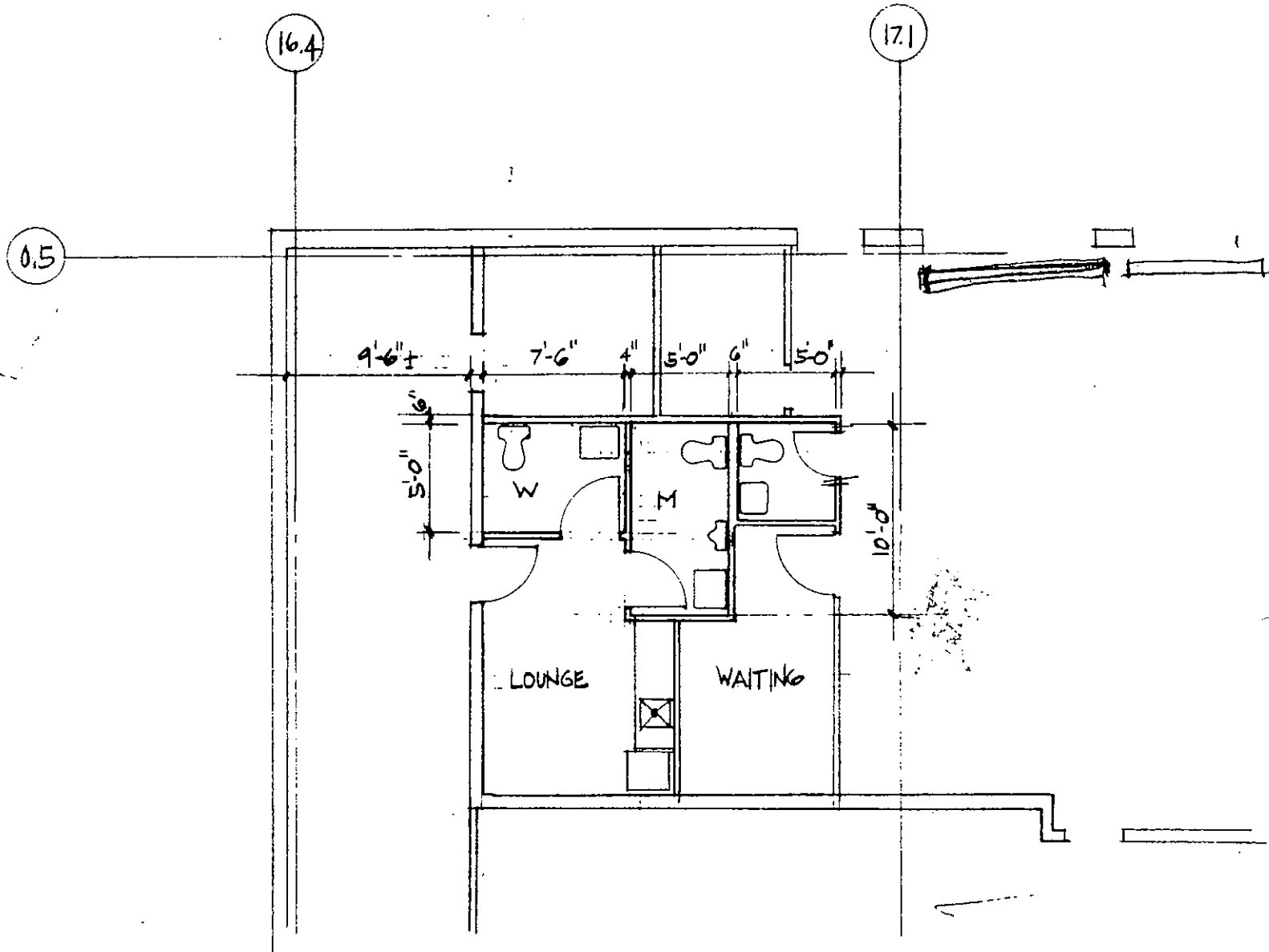
SCALE

1/8" = 1'-0"

R & S STROUSS
BRICKTOWN, NJ
6/6/89

ALON FELD,
ARCHITECT
3100 KENNEDY BLVD
JERSEY CITY, NJ

Handwritten signature



ALT. TOILET LAYOUT

SCALE:

$\frac{1}{8}'' = 1'-0''$

RECEIVED

JUN 1 1989

DIV. OF INSPECTION

R & S STRAUSS
BRICKTOWN, NJ

SK-1

5.30.89

Les. Heskett 455-8498

VORNADO

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



Daniel F. Newman, Mayor

Members of Township Council:
David W. Wolfe, Council President
Charles E. Anderson
Patrick L. Bottazzi
Mary Anne L. Butler
Andrew R. Ciesla
Joseph C. Scarpelli
Warren H. Wolf

Division of Inspections

A. J. Cierzo,
Construction Official

(201) 477-3000, Ext. 260

May 12, 1989.

TO: Daniel F. Newman, Mayor
FROM: Arthur J. Cierzo, Construction Official
RE: Plan Review for Class I

In January of this year under Section 5:23-3.10 (Enforcing Agency and Classification), this office went from a Class I to a Class II office. Use Group B less than 34,200 square feet, 6 stories, 75 feet requires Class I review.

Buildings like Vornados, which is 100,000 square feet and the new V.A. Building, which will be approximately 35,000 square feet, require a building inspector with an H.H.S. license for review. As per our conversation, I have been using William (Russ) Klumb from Howell Township, license #3280, for our review.

I spoke to our building inspectors and they are not or may not be interested at present to acquire their H.H.S. licenses. I hereby request that we employ someone with this license. If we do not, plans will have to be reviewed by the Department of Community Affairs and they will be collecting a percentage of the fees. Plans may also be detained for lengthy periods, preventing the issuance of a permit.

AJC/wp

cc: Business Administrator
Division of Inspections

(Littles)
from Klumb
#

ROBERT R. ROSEN ASSOCIATES

PROFESSIONAL ENGINEERS

SUITE 210
107-09 W. RIDGE PIKE
CONSHOHOCKEN, PA. 19438
PHONE (215) 828-1850

FAX: (215) 828-5080

FACSIMILE TRANSMITTAL SHEET

Date: 10/24/89 From: J. RosenTo: JUDY GASSCompany: BRICK TOWNSHIP OCEAN COUNTYFax # 201-920-4850Reference: BRICKTOWN SHOPPING CENTER

Remarks: _____

Total Number of Pages Including Transmittal Sheet 2

If you do not receive all pages, please call us immediately.

ROBERT R. ROSEN ASSOCIATES

PROFESSIONAL ENGINEERS

SUITE 210
107-09 W. RIDGE PIKE
CONSHOHOCKEN, PA. 19428
PHONE (215) 828-1550
FAX (215) 828-5080

October 24, 1989

Mr. James Fallon
Vornado Properties, Inc.
174 Passaic St.
Garfield, NJ 07026

Re: Site Inspection
Bricktown Shopping Center
Brick Town, NJ

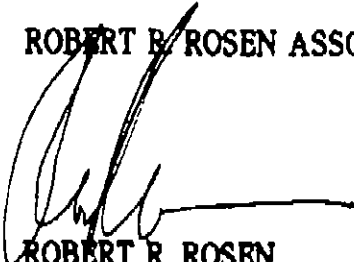
Dear Sir:

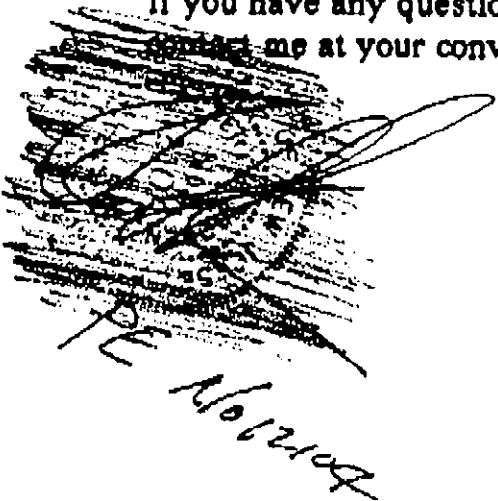
In accordance with your request, we are submitting to you this letter that confirms our conversation regarding the above mentioned project. All structural steel has been installed per our drawings and recommendations. As a result, this building is structurally adequate, and can fulfill its intended use.

If you have any questions regarding the above, please do not hesitate to contact me at your convenience.

Very truly yours,

ROBERT R. ROSEN ASSOCIATES


ROBERT R. ROSEN
Professional Engineer


RRR/jr

ROBERT R. ROSEN ASSOCIATES**PROFESSIONAL ENGINEERS**SUITE 210
107-09 W. RIDGE PIK
CONSHOHOCKEN, PA. 1.
PHONE (215) 828-181
FAX (215) 828-8002**May 17, 1989****Mr. James Fallon
Vornado Properties, Inc.
174 Passaic Ave.
Garfield, NJ 07026****Re: Bricktown Shopping Center
Rt. 70
Bricktown NJ****Dear Sir:**

In accordance with your request, on Friday, May 12, 1989 I inspected the above mentioned site and found the rear section of the masonry wall had been blown over. This composite wall was constructed of eight inch partially reinforced concrete masonry units and was to receive a four inch brick veneer.

Our inspection revealed the following recommendations must be completed in order to render this wall structurally satisfactory:

1. All damaged and out of plumb sections of the wall must be remove and disguard. Work on this wall can commence immediately for reconstruction of this wall.
2. All replacement sections must be constructed in accordance with the design drawings.

There is no evidence of any structural damage to any footings. We believe that after the above repairs are implemented this wall will be structurally sound.

ROBERT R. ROSEN ASSOCIATES

PROFESSIONAL ENGINEERS

SUITE 210
107-09 W. RIDGE P
CONSHOHOCKEN, PA.
PHONE (215) 828-1111
FAX (215) 828-2011

Page 2

Re: Bricktown Shopping Center
Rt. 70
Bricktown, NJ

If you have any questions regarding the above, please do not hesitate to contact me at your convenience.

Very truly yours,

ROBERT R. ROSEN ASSOCIATES

ROBERT R. ROSEN
Professional Engineer
N.J. Seal No. 12104

RRR/jr

ROBERT R. ROSEN ASSOCIATES

PROFESSIONAL ENGINEERS

SUITE 210
107-09 W. RIDGE PIKE
CONSHOHOCKEN, PA. 19428
PHONE (215) 828-1550
FAX (215) 828-5080

May 17, 1989

**Mr. James Fallon
Vornado Properties, Inc.
174 Passaic Ave.
Garfield, NJ 07026**

**Re: Bricktown Shopping Center
Rt. 70
Bricktown NJ**

Dear Sir:

In accordance with your request, on Friday, May 12, 1989 I inspected the above mentioned site and found the rear section of the masonry wall had been blown over. This composite wall was constructed of eight inch partially reinforced concrete masonry units and was to receive a four inch brick veneer.

Our inspection revealed the following recommendations must be completed in order to render this wall structurally satisfactory:

- 1. All damaged and out of plumb sections of the wall must be remove and disguard. Work on this wall can commence immediately for reconstruction of this wall.**
- 2. All replacement sections must be constructed in accordance with the design drawings.**

There is no evidence of any structural damage to any footings. We believe that after the above repairs are implemented this wall will be structurally sound.

ROBERT R. ROSEN ASSOCIATES

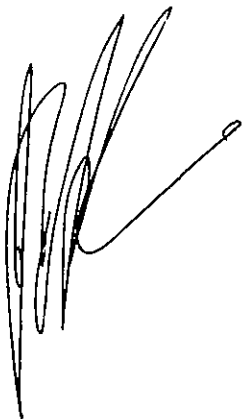
PROFESSIONAL ENGINEERS

SUITE 210
107-09 W. RIDGE PIKE
CONSHOHOCKEN, PA. 19428
PHONE (215) 828-1550
FAX (215) 828-5080

Page 2

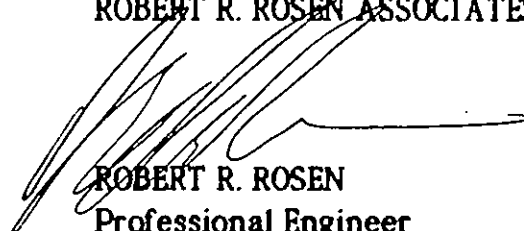
Re: Bricktown Shopping Center
Rt. 70
Bricktown, NJ

If you have any questions regarding the above, please do not hesitate to contact me at your convenience.



Very truly yours,

ROBERT R. ROSEN ASSOCIATES



ROBERT R. ROSEN
Professional Engineer
N.J. Seal No. 12104

RRR/jr



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

Date 1-23-89

Subject: VERNADO INC

Block 701 Lot 7-8-15-16

AFFIDAVIT:

I JAMES J. FALLOW DIR. OF DESIGN ^{PROWST.} hereby request a temporary building permit to proceed with construction of footings and foundation (only) on the subject property at my own risk. I understand and acknowledge that the issuance of the full building permit is subject to further approvals as normally required. I understand that adjustments in the foundation and first floor elevation may be necessary in order to comply with the approved plot plan grading. The below department approvals are required prior to issuance of a temporary building permit.

James J. Fallow 1/24/89
Applicant Date

James J. Fallow 1-23-89
Twp. Engineer or Ass't. Engineer Date

John King 1-23-89
Zoning Officer Date
Zoning Department

James J. Fallow 1-20-89
Building Inspector Date
Building Department



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3001

Office of
Division of Inspections

UNIFORM CONSTRUCTION CODE Chapter 23, Title 5

Approval of Part
5.23-2.16 (g)

OWNER/AGENT

VORNAO INC

ADDRESS

174 PASSAIC ST

TOWN

GARFIELD NJ

ZIP

BLOCK

701

LOT

7-8-15-16

Chambers Bridge Rd



FOOTING



FOUNDATION



OTHER

OWNER/AGENT PROCEED AT OWN RISK



OWNER/AGENT

James J. Felt

BUILDING SUB-CODE OFFICIAL

1-20-89 Ken Felt

CONSTRUCTION OFFICIAL

Archie Curzo

1-2

ROBERT R. ROSEN ASSOCIATES

PROFESSIONAL ENGINEERS

SUITE 210
107-09 W. RIDGE PIKE
CONSHOHOCKEN, PA. 19428
PHONE (215) 828-1550
FAX (215) 828-5080

May 17, 1989

Mr. James Fallon
Vornado Properties, Inc.
174 Passaic Ave.
Garfield, NJ 07026

Re: Bricktown Shopping Center
Rt. 70
Bricktown NJ

Dear Sir:

In accordance with your request, on Friday, May 12, 1989 I inspected the above mentioned site and found the rear section of the masonry wall had been blown over. This composite wall was constructed of eight inch partially reinforced concrete masonry units and was to receive a four inch brick veneer.

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ROBERT R. ROSEN ASSOCIATES

PROFESSIONAL ENGINEERS

SUITE 210
107-09 W. RIDGE PIKE
CONSHOHOCKEN, PA. 19428
PHONE (215) 828-1550
FAX (215) 828-5080

Page 2

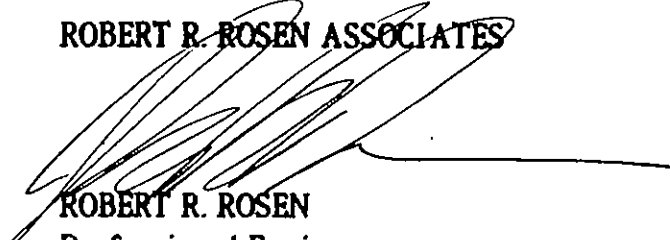
Re: Bricktown Shopping Center
Rt. 70
Bricktown, NJ

If you have any questions regarding the above, please do not hesitate to contact me at your convenience.



Very truly yours,

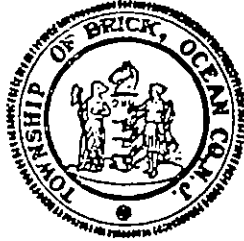
ROBERT R. ROSEN ASSOCIATES



ROBERT R. ROSEN
Professional Engineer
N.J. Seal No. 12104

RRR/jr

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



Daniel F. Newman, Mayor

Members of Township Council:
Warren H. Wolf, Council President
Charles E. Anderson
Patrick L. Bottazzi
Mary Anne L. Butler
Andrew R. Ciesla
Joseph C. Scarpelli
David W. Wolfe

Division of Inspections

A. J. Cierzo,
Construction Official

(201) 477-3000, Ext. 260

June 12, 1989

To: Scott MacFadden, Business Administrator

From: Arthur J. Cierzo, Construction Official

Re: Vornado, Block 701, Lots 7-16

William (Russ) Klumb Building Inspector, License #3280 has started plan review on the above referenced project.

AJC/tl



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

UNIFORM CONSTRUCTION CODE

Chapter 23, Title 5

Approval of Part
5.23-2.5 (7)

OWNER/AGENT B.R. FRIES & ASSOC. INC
ADDRESS 34 West 32nd St NYC 10001
TOWN Brick Town ZIP 08723
BLOCK 701 LOT 7, 8, 8.2, 15, 16

☒ FOOTING Structural Steel
☐ FOUNDATION
☒ OTHER

OWNER/AGENT PROCEED AT OWN RISK ☒

OWNER/AGENT [Signature]

BUILDING SUB-CODE OFFICIAL Tom Hennigues

CONSTRUCTION OFFICIAL Ally [Signature] 6/15/89

Stop Work 6/19/89

Copy 523-219

Total Calcs 523-219

Leonard
Kunkin
Associates
Steel
Construction

Box 47
Line Lexington
Pennsylvania
18932
723-6744 / 247-4160

To: VORNADO PROPERTIES

Date 6-14-89

Attn:

RE: Structure BRICKTOWN CENTER

Cont. No. 89-32

Location BRICKTOWN N.J.

Gentlemen:

We are sending you: ☒ herewith

☐ under separate cover

AB1 → AB4 EI → E8

1. _____ For _____ approval. (Please return one approved or corrected print/sepia.)
2. _____ Revised for _____ final approval. (Please return one approved or corrected print/sepia.)
3. _____ For use on job.
4. _____ For your files.
5. _____ For erectors.
6. _____ Released for fabrication.
7. 2-PRINTS Per your request.

Remarks:

*Certification on Bolts & Welding
from eng of record
2 updated sets of each*
6/20/89

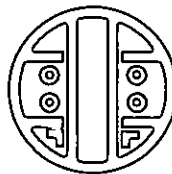
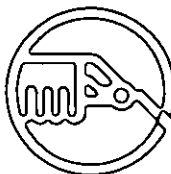
CC

via:

- ☐ 1st class
☐ UPS
☐ FED X
☐ hand carry
☒ Cust. Pick Up

LEONARD KUNKIN ASSOCIATES

By *Paul R. Schuman*



1468 W. Ninth at Superior
Cleveland, Ohio 44113-1220

216-781-9144 FAX: 216-781-6566

535 Anton Boulevard, Suite 980
Costa Mesa, California 92626-1902

714-540-7755 FAX: 714-540-7663

Keeva L. Kekst



Architects

RECEIVED
MAY 10 1989
DIV. OF INSPECTION

May 5, 1989

Mr. James Fallon
Vornado Properties
174 Passaic Street
Garfield, New Jersey 07026

Re: Bricktowne Centre
Bricktown, New Jersey
KJK/jn 87045

Dear Mr. Fallon:

Please be advised that Kekst Architects has been informed that the steel joist installation for the above-mentioned project is not being fabricated in accordance with structural steel drawings prepared by Shenberger & Associates. It is our understanding that steel joists are being fabricated in accordance with shop drawings prepared by John W. Hancock, Jr., Inc. These shop drawings were reviewed by Shenberger & Associates and returned with the attached written correspondence, marked "revise and resubmit" on April 15, 1989. The written response indicated that the steel joist drawings submitted incorporated a major redesign when compared to the original contract documents. Shenberger & Associates cannot review and approve the design of another engineer. It should also be noted that the shop drawings submitted were not stamped by a licensed professional engineer.

As the architect of record, we have an obligation to inform you that Vornado Properties will now incur any potential liabilities involved in constructing a building utilizing these unapproved shop drawings. Kekst Architects and Shenberger & Associates cannot accept responsibility for the integrity of the building structure.

Because it appears to be the intent of Vornado Properties to construct Bricktowne Centre utilizing a steel design not prepared in accordance with approved structural permit drawings, Kekst Architects must inform the building department of this change. Upon this action, the onus is upon Vornado Properties to provide signed and sealed drawings to the building department and to procure the required Errors and Omissions Insurance, thereby releasing Kekst Architects from all liability.



May 5, 1989
Mr. James Fallon - Vornado Properties
Re: Bricktowne Centre - Bricktown, New Jersey
KJK/jn 87045
Page 2

Although Kekst Architects is aware that Vornado is, in good faith, attempting to provide a building which is in all ways safe for public occupancy, we are concerned that the steel joist manufacturer is indeed offering competent, professional services that are in your best interest.

We look forward to resolving this issue with you satisfactorily.

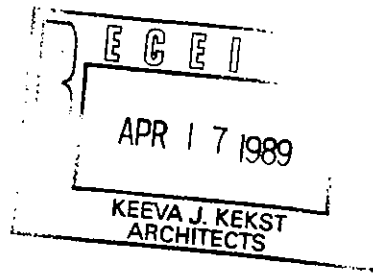
Very truly yours,

KEEVA J. KEKST ARCHITECTS, INC.

Thomas M. Milanich
Senior Vice President

TMM/fer

c: John Kundrat - Vornado Properties
Tom Shenberger - Shenberger & Associates
Arthur Clerzo - Bricktown Building Department
K. Kekst
S. Bercik
File



April 13, 1989

Mr. Jim Goggan
KEEVA J. KEKST & ASSOCS.
1468 W. 9th. St., Suite 600
Cleveland, Oh. 44113

Re: Bricktowne Roof Re-design

Dear Jim:

The John W. Hancock steel joist shop drawings dated March 24, 1989, that have been submitted incorporate some major re-design when compared to the contract documents. A rough take off of these drawings show an approximate savings of 26 tons of joist and joist girders; at \$800 per ton this is a proposed savings of \$20,800. The total estimated value of the joist and joist girders is \$130,000. This proposed savings can be broken down into 3 basic categories as follows:

1. The use of single joint under mechanical units in lieu of the double joist shown on the contract documents. This saves approximately 5,600 pounds of joist or \$2,240. This cost savings should be evaluated by the owner. The double joist have the advantage of greater field flexibility relating to installation; in addition this double joist defines the design location for the ease of addition of mechanical units in the future. The double joist joist also are capable of carrying more than the present design mechanical unit weight.
2. Reduction of design dead load by 5 pound have per square foot. The contract structural drawings have been reviewed and it appears that the dead load can be reduced by this amount without compromising the structural integrity of the building. This basically would reduce the joist by one size through out and would reduce the truss girder loads by 10 percent. This would save approximately 30,000 pounds or \$12,000 over the entire roof area. However, with the reduced dead load the effect of snow drifting becomes more

Shenberger & Associates, Inc.	8221 Brecksville Road
Consulting	Cleveland, Ohio 44141-1300
Engineers	Telephone (216) 526-3100
	Fax (216) 526-7753

important at certain areas of the roof. This would have to be re-evaluated in more detail. In addition it should be remembered that this reduction in dead load severely limits the future re-roofing possibilities.

3. Revision of joist spacing to 6'-3". This has a savings of 16,000 pounds of steel or a value of approximately \$6,400. The factory mutual requirements control on these items. The flexibility of the deck and resultant roofing problems determine the maximum joist spacing. Enclosed is the factory mutual table of allowable deck spans for the various deck manufacturers. As can be seen in the table, only one can supply a deck capable of spanning 6'-3", 6'-0" is the maximum for the rest. It is therefore impossible to design a job from the start with a 6'-3" spacing as this would eliminate all competitive bidding. In addition it has been the policy of SHENBERGER AND ASSOCIATES to not stretch the spacing of the joist to the absolute limit; especially in the northern states where snow load is a major consideration.

The following are SHENBERGER AND ASSOCIATES conclusions and recommendations:

- Item #1 The joist at the mechanical units. If the owner decides to utilize the single joist concept the structural drawings can be revised by the simple addition of a note as to the alternate joist size.
- Item #2 Reduction of dead load by 5 PSF. If the owner agrees to this reduction in load; the structural drawings will be revised by SHENBERGER AND ASSOCIATES, both the joist and joist girders, at no cost to the owner. The joist spacing would remain at 5'-0" on center.
- Item #3 SHENBERGER AND ASSOCIATES is the engineer of record for this job and should not be asked to check and become legally responsible for another engineers work. This was the reason for my call to John W. Hancock Steel; are they planning to stamp their drawings and does their engineer have liability insurance? Based on the legal problems involved, and the fact that the savings is only \$6,400, it is recommended that the joist spacing be kept at 5'-0".

Jim Goggan
April 13, 1989
page 3

As an alternate savings it is suggested that perhaps the mesh in the slab on grade be omitted. This should save \$.20 per sq. ft. or \$20,000. The J.C. Penney Company has been constructing buildings for years with unreinforced slabs on grade.

Please do not hesitate to call if you have any questions.

Very Truly Yours,

SHENBERGER AND ASSOCIATES, INC.

A handwritten signature in cursive script, appearing to read "Lyle Amiet".

Lyle Amiet, P.E.

LRA/mg

(63.5 mm), measured along the top surface. The top flange surface of the deck must be flat in order to effectively utilize adhesive quantity for securing the above deck components.

Roof assemblies are continuously subjected to concentrated loads from men and equipment during construction. Deflection from this type of loading is greater than with a uniformly distributed design load. The minimum acceptable steel thickness should conform to the following Manufacturers' Standard Gauges.

Gauge (MSG):	22	20	18
Min Uncoated Steel Thickness, in.:	0.0280	0.0340	0.0450
(mm)	(0.71)	(0.86)	(1.14)

Bowman Construction Products Elwin G Smith Div Cyclope Corp Box 482 Heidelberg PA 15108

FM Allowable Spans *			
Gauge (MSG)			
Deck	22 (0.0280 in., 0.71 mm)	20 (0.0340 in., 0.86 mm)	18 (0.0450 in., 1.14 mm)
Types FM1 and FM2 Deck. Nominal 1½ in. (38.1 mm) depth. No stiffening grooves.			
Type FM1 Narrow Rib	4'7" (1.4 m)	5'2" (1.6 m)	6'2" (1.9 m)
Type FM2 Wide Rib	5'5" (1.7 m)	6'2" (1.9 m)	7'6" (2.3 m)

Consolidated Systems Inc Box 1756 Columbia SC 29202

Types F, B, BI Deck. Nominal 1½ in. (38.1 mm) depth. No stiffening grooves.

Type F Intermediate Rib	4'11" (1.5 m)	5'5" (1.7 m)	6'3" (2.0 m)
Types B, BI Wide Rib	6'0" (1.8 m)	6'6" (2.0 m)	7'5" (2.3 m)
Mac-Fab Products Inc 700 S Spring Av Saint Louis MO 63110			
Types A, F and B Deck. Nominal 1½ in. (38.1 mm) depth. No stiffening grooves.			
Type A Narrow Rib	4'10" (1.5 m)	5'3" (1.6 m)	6'0" (1.9 m)
Type F Intermediate Rib	4'11" (1.5 m)	5'5" (1.7 m)	6'3" (2.0 m)
Types B2, B3 Wide Rib	6'0" (1.8 m)	6'6" (2.0 m)	7'5" (2.3 m)

Roll Form Products Inc 298 Summer St Boston MA 02210

Types B15RD, B16RD, P15RD, P16RD, F15RD, F16RD Deck. Nominal 1½ in. (38.1 mm) depth. No stiffening grooves.

Type B15RD Wide Rib	5'11" (1.6 m)	6'5" (2.0 m)	7'8" (2.4 m)
Types B16RD, P15RD, P16RD Wide Rib	6'0" (1.8 m)	6'6" (2.0 m)	7'5" (2.3 m)
Types F15RD, F16RD Intermediate Rib	4'11" (1.5 m)	5'5" (1.7 m)	6'3" (2.0 m)

Roof Deck Inc 7 Twin Rivers Dr W Box 295 Hightstown NJ 08520

Type B Deck. Nominal 1½ in. (38.1 mm) depth. No stiffening grooves.

Type B Wide Rib	6'0" (1.8 m)	6'6" (2.0 m)	7'5" (2.3 m)
--------------------	-----------------	-----------------	-----------------

United Steel Deck Inc Box 682 Summit NJ 07901

FM Allowable Spans *			
Gauge (MSG)			
Deck	22 (0.0280 in., 0.71 mm)	20 (0.0340 in., 0.86 mm)	18 (0.0450 in., 1.14 mm)
Types B, BI, F Deck. Nominal 1½ in. (38.1 mm) depth. No stiffening grooves.			
Types B, BI Wide Rib	6'0" (1.8 m)	6'6" (2.0 m)	7'5" (2.3 m)
Type F Intermediate Rib	4'11" (1.5 m)	5'5" (1.7 m)	6'3" (2.0 m)

Verco Mfg Inc 4340 N 42nd Av Phoenix AZ 85019

Type HSB Deck. Nominal 1½ in. (38.1 mm) depth. No stiffening grooves.

Type HSB Wide Rib	6'1" (1.9 m)	6'7" (2.0 m)	7'9" (2.4 m)
----------------------	-----------------	-----------------	-----------------

Vulcraft Div Nucor Corp 4425 Randolph Rd Charlotte NC 28211

Types 1.5A, 1.5F, 1.5B and 1.5BI Deck. Nominal 1½ in. (38.1 mm) depth. No stiffening grooves.

Type 1.5A Narrow Rib	4'10" (1.5 m)	5'3" (1.6 m)	6'0" (1.9 m)
Type 1.5F Intermediate Rib	4'11" (1.5 m)	5'5" (1.7 m)	6'3" (2.0 m)
Type 1.5B, BI Wide Rib	6'0" (1.9 m)	6'6" (2.0 m)	7'5" (2.3 m)

Wheeling Corrugating Co Div Wheeling-Pittsburgh Steel Corp 1134 Market St Wheeling WV 26003

Types A, B, BW, F Deck. Nominal 1½ in. (38.1 mm) depth. No stiffening grooves.

Type A Narrow Rib	4'9" (1.4 m)	5'5" (1.7 m)	6'6" (2.0 m)
Type F Intermediate Rib	4'11" (1.5 m)	5'7" (1.7 m)	6'9" (2.1 m)
Types B, BW Wide Rib	6'3" (1.9 m)	6'10" (2.1 m)	7'9" (2.4 m)

*Factory Mutual will allow these calculated spans to be extended by a max of 10% to satisfy the L/200 deflection, but only when the insulation is mechanically fastened to the steel deck by screws and plates (discs). Whenever this extension is allowed, side lap fastening must occur at a max of 18 in. (457.2 mm) intervals instead of the normally required 3 ft (0.9 m).

Roof Deck Fasteners — Class I Fire and I-60 or I-90 Wind-storm Rated

The deck is normally supported by steel beams or open web joists and secured to these supporting members by means of ½ in. (12.7 mm) diameter or larger puddle welds or by means of mechanical fasteners spaced 12 in. (304.8 mm) on center maximum. Mechanical fasteners should be provided at all side laps. Spacing between fasteners and supporting members should not exceed 36 in. (914.4 mm), or 18 in. (457.2 mm) when deck is installed at extended spans (see STEEL DECK). The listed deck fasteners are approved for Class I and II fire rated steel decks.

Buildex Corp Div ITW Inc 1349 W Bryn Mawr Av Itasca IL 60143

Taka/4 Self-Drilling Screw. For securing 18-22 ga. MSG (0.0474 in., 1.2 mm-0.0286 in., 0.75 mm) steel deck to roof-supporting steel members not exceeding ½ in. (6.4 mm) thickness.



ALLIED FIRE & SAFETY equipment company, inc.

P.O. BOX 8189 — 381 HWY. 35 — RED BANK, N. J. 07701

CONTRACTOR'S MATERIAL & TEST CERTIFICATE FOR ABOVEGROUND PIPING

PROCEDURE

Upon completion of work, inspection and tests shall be made by the contractor's representative and witnessed by an owner's representative. All defects shall be corrected and system left in service before contractor's personnel finally leave the job.

A certificate shall be filled out and signed by both representatives. Copies shall be prepared for approving authorities, owners and contractor. It is understood the owner's representative's signature in no way prejudices any claim against contractor for faulty material, poor workmanship, or failure to comply with approving authority's requirements or local ordinances.

PROPERTY NAME Bricktown Center DATE

PROPERTY ADDRESS RT 70 And Chambers Bridge Roads

PLANS

ACCEPTED BY APPROVING AUTHORITY(IES) NAMES

FACTORY MUTUAL AND BRICKTOWN FIRE PROTECTION

ADDRESS

INSTALLATION CONFORMS TO ACCEPTED PLANS

☒ YES ☐ NO

EQUIPMENT USED IS APPROVED

☒ YES ☐ NO

IF NO, EXPLAIN DEVIATIONS

INSTRUCTIONS

HAS PERSON IN CHARGE OF FIRE EQUIPMENT BEEN INSTRUCTED AS TO LOCATION OF CONTROL VALVES AND CARE AND MAINTENANCE OF THIS NEW EQUIPMENT

☒ YES ☐ NO

IF NO, EXPLAIN

HAVE COPIES OF APPROPRIATE INSTRUCTIONS AND CARE AND MAINTENANCE CHARTS AND NFPA 13A BEEN LEFT ON PREMISES

☒ YES ☐ NO

IF NO, EXPLAIN

LOCATION OF SYSTEM

SUPPLIES BLDGS.

PARTS I, II & PART III

SPRINKLERS

MAKE	MODEL	YEAR OF MANUFACTURE	ORIFICE SIZE	QUANTITY	TEMPERATURE RATING
<u>GLAC</u>	<u>ST</u>	<u>1989</u>	<u>1/2"</u>	<u>750</u>	<u>1450</u>

PIPE AND FITTINGS

PIPE CONFORMS TO NFPA 13 STANDARD

☐ YES ☐ NO

FITTINGS CONFORM TO NFPA 13 STANDARD

☒ YES ☐ NO

IF NO, EXPLAIN

ALARM VALVE OR FLOW INDICATOR

ALARM DEVICE			MAXIMUM TIME TO OPERATE THROUGH TEST PIPE	
TYPE	MAKE	MODEL	MIN.	SEC.
<u>WANE</u>	<u>DAITEX</u>	<u>125811</u>		<u>30</u>

DRY PIPE OPERATING TEST

DRY VALVE					Q.O.D.				
MAKE		MODEL	SERIAL NO.	MAKE		MODEL		SERIAL NO.	
N A									
	TIME TO TRIP THRU TEST PIPE*		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET*		ALARM OPERATED PROPERLY	
	MIN.	SEC.	PSI	PSI	PSI	MIN.	SEC.	YES	NO
Without Q.O.D.									
With Q.O.D.									

IF NO, EXPLAIN

SPRINKLER SYSTEMS

DELUGE & PREACTION VALVES	OPERATION <u>N/A</u> ☐ PNEUMATIC ☐ ELECTRIC ☐ HYDRAULIC							
	PIPING SUPERVISED ☐ YES ☐ NO DETECTING MEDIA SUPERVISED ☐ YES ☐ NO							
	DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATIONS ☐ YES ☐ NO							
	IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING ☐ YES ☐ NO IF NO, EXPLAIN							
	MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
			YES	NO	YES	NO	MIN.	SEC.
TEST DESCRIPTION	HYDROSTATIC: Hydrostatic tests shall be made at not less than 200 psi (13.6 bars) for two hours or 50 psi (3.4 bars) above static pressure in excess of 150 psi (10.2 bars) for two hours. Differential dry-pipe valve clappers shall be left open during test to prevent damage. All aboveground piping leakage shall be stopped. FLUSHING: Flow the required rate until water is clear as indicated by no collection of foreign material in burlap bags at outlets such as hydrants and blow-offs. Flush at flows not less than 400 GPM (1514 L/min) for 4-inch pipe, 800 GPM (2271 L/min) for 5-inch pipe, 750 GPM (2839 L/min) for 6-inch pipe, 1000 GPM (3785 L/min) for 8-inch pipe, 1500 GPM (5678 L/min) for 10-inch pipe and 2000 GPM (7570 L/min) for 12-inch pipe. When supply cannot produce stipulated flow rates, obtain maximum available. PNEUMATIC: Establish 40 psi (2.7 bars) air pressure and measure drop which shall not exceed 1-1/4 psi (0.1 bars) in 24 hours. Test pressure tanks at normal water level and air pressure and measure air pressure drop which shall not exceed 1-1/4 psi (0.1 bars) in 24 hours.							
TESTS	ALL PIPING HYDROSTATICALLY TESTED AT <u>200</u> PSI FOR <u>2</u> HRS. IF NO, STATE REASON							
	DRY PIPING PNEUMATICALLY TESTED ☐ YES ☐ NO							
	EQUIPMENT OPERATES PROPERLY ☐ YES ☐ NO							
	DRAIN TEST	READING OF GAGE LOCATED NEAR WATER SUPPLY TEST PIPE: STATIC PRESSURE: <u>60</u> PSI				RESIDUAL PRESSURE WITH VALVE IN TEST PIPE OPEN WIDE <u>47</u> PSI		
BLANK TESTING GASKETS	Underground mains and lead in connections to system risers flushed before connection made to sprinkler piping.							
	VERIFIED BY COPY OF THE U FORM NO. 858 ☐ YES ☐ NO OTHER EXPLAIN							
	FLUSHED BY INSTALLER OF UNDERGROUND SPRINKLER PIPING ☒ YES ☐ NO							
	NUMBER USED	LOCATIONS						NUMBER REMOVED
WELDING	WELDED PIPING ☐ YES ☒ NO							
	IF YES ...							
	DO YOU CERTIFY AS THE SPRINKLER CONTRACTOR THAT WELDING PROCEDURES COMPLY WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3 ☐ YES ☐ NO							
	DO YOU CERTIFY THAT THE WELDING WAS PERFORMED BY WELDERS QUALIFIED IN COMPLIANCE WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3 ☐ YES ☐ NO							
HYDRAULIC DATA NAMEPLATE	DO YOU CERTIFY THAT WELDING WAS CARRIED OUT IN COMPLIANCE WITH A DOCUMENTED QUALITY CONTROL PROCEDURE TO INSURE THAT ALL DISCS ARE RETRIEVED, THAT OPENINGS IN PIPING ARE SMOOTH, THAT SLAG AND OTHER WELDING RESIDUE ARE REMOVED, AND THAT THE INTERNAL DIAMETERS OF PIPING ARE NOT PENETRATED ☐ YES ☐ NO							
	NAMEPLATE PROVIDED ☐ YES ☐ NO IF NO, EXPLAIN							
REMARKS	DATE LEFT IN SERVICE WITH ALL CONTROL VALVES OPEN: <u>9-28-89</u>							
SIGNATURES	NAME OF SPRINKLER CONTRACTOR <u>ALLIED FIRE & SAFETY COMPANY</u>							
	TESTS WITNESSED BY							
	FOR PROPERTY OWNER (SIGNED) <u>Rich Rimmer</u>				TITLE <u>Field Sup.</u>		DATE <u>9/28/89</u>	
	FOR SPRINKLER CONTRACTOR (SIGNED) <u>Charles M. King</u>				TITLE <u>General Mgr</u>		DATE <u>9/28/89</u>	
ADDITIONAL EXPLANATION AND NOTES								

Contractor's Material & Test Certificate for Aboveground Piping



ALLIED FIRE & SAFETY equipment company, inc.

P.O. BOX 8189 — 381 HWY. 35 — RED BANK, N. J. 07701

CONTRACTOR'S MATERIAL & TEST CERTIFICATE FOR ABOVEGROUND PIPING

PROCEDURE

Upon completion of work, inspection and tests shall be made by the contractor's representative and witnessed by an owner's representative. All defects shall be corrected and system left in service before contractor's personnel finally leave the job.

A certificate shall be filled out and signed by both representatives. Copies shall be prepared for approving authorities, owners and contractor. It is understood the owner's representative's signature in no way prejudices any claim against contractor for faulty material, poor workmanship, or failure to comply with approving authority's requirements or local ordinances.

PROPERTY NAME

DATE

PROPERTY ADDRESS

ACCEPTED BY APPROVING AUTHORITY(3) NAMES

FACTORY MUTUAL AND BRICKTOWNSHIP FIRE PROTECTION

ADDRESS

PLANS

INSTALLATION CONFORMS TO ACCEPTED PLANS
EQUIPMENT USED IS APPROVED
IF NO, EXPLAIN DEVIATIONS

☒ YES ☐ NO
☒ YES ☐ NO

INSTRUCTIONS

HAS PERSON IN CHARGE OF FIRE EQUIPMENT BEEN INSTRUCTED AS TO LOCATION
OF CONTROL VALVES AND CARE AND MAINTENANCE OF THIS NEW EQUIPMENT
IF NO, EXPLAIN

☒ YES ☐ NO

HAVE COPIES OF APPROPRIATE INSTRUCTIONS AND CARE AND MAINTENANCE CHARTS
AND NFPA 13A BEEN LEFT ON PREMISES
IF NO, EXPLAIN

☒ YES ☐ NO

LOCATION
OF SYSTEM

SUPPLIES BLOCS.

PARTS I, II & PART III

SPRINKLERS

MAKE	MODEL	YEAR OF MANUFACTURE	ORIFICE SIZE	QUANTITY	TEMPERATURE RATING
GLABE	J	1989	1/2	950	1650

PIPE AND
FITTINGS

PIPE CONFORMS TO NFPA 13 STANDARD
FITTINGS CONFORM TO NFPA 13 STANDARD
IF NO, EXPLAIN

☐ YES ☐ NO
☒ YES ☐ NO

ALARM
VALVE
OR FLOW
INDICATOR

ALARM DEVICE

MAXIMUM TIME TO OPERATE THROUGH TEST PIPE

TYPE	MAKE	MODEL	MIN.	SEC.
VALE	DOITEL	1/5RD		30

DRY PIPE
OPERATING
TEST

DRY VALVE

Q.O.D.

MAKE			MODEL		SERIAL NO.		MAKE			MODEL		SERIAL NO.	
N A													
TIME TO TRIP THRU TEST PIPE*		WATER PRESSURE		AIR PRESSURE		TRIP POINT AIR PRESSURE		TIME WATER REACHED TEST OUTLET*		ALARM OPERATED PROPERLY			
MIN. SEC.		PSI		PSI		PSI		MIN. SEC.		YES NO			
Without Q.O.D.													
With Q.O.D.													

IF NO, EXPLAIN

SPRINKLER SYSTEMS

DELUGE & PREACTION VALVES	OPERATION <u>N-A</u> ☐ PNEUMATIC ☐ ELECTRIC ☐ HYDRAULIC								
	PIPING SUPERVISED ☐ YES ☐ NO				DETECTING MEDIA SUPERVISED ☐ YES ☐ NO				
	DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATIONS ☐ YES ☐ NO								
	IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING ☐ YES ☐ NO				IF NO, EXPLAIN				
TEST DESCRIPTION	MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE		
			YES	NO	YES	NO	MIN.	SEC.	
HYDROSTATIC: Hydrostatic tests shall be made at not less than 200 psi (13.6 bars) for two hours or 50 psi (3.4 bars) above static pressure in excess of 150 psi (10.2 bars) for two hours. Differential dry-pipe valve clappers shall be left open during test to prevent damage. All aboveground piping leakage shall be stopped. FLUSHING: Flow the required rate until water is clear as indicated by no collection of foreign material in burlap bags at outlets such as hydrants and blow-offs. Flush at flows not less than 400 GPM (1514 L/min) for 4-inch pipe, 600 GPM (2271 L/min) for 5-inch pipe, 750 GPM (2839 L/min) for 6-inch pipe, 1000 GPM (3785 L/min) for 8-inch pipe, 1500 GPM (5678 L/min) for 10-inch pipe and 2000 GPM (7570 L/min) for 12-inch pipe. When supply cannot produce stipulated flow rates, obtain maximum available. PNEUMATIC: Establish 40 psi (2.7 bars) air pressure and measure drop which shall not exceed 1-1/2 psi (0.1 bars) in 24 hours. Test pressure tanks at normal water level and air pressure and measure air pressure drop which shall not exceed 1-1/2 psi (0.1 bars) in 24 hours.									
TESTS	ALL PIPING HYDROSTATICALLY TESTED AT <u>200</u> PSI FOR <u>2</u> HRS. IF NO, STATE REASON								
	DRY PIPING PNEUMATICALLY TESTED ☐ YES ☐ NO EQUIPMENT OPERATES PROPERLY ☐ YES ☐ NO								
	DRAIN TEST	READING OF GAGE LOCATED NEAR WATER SUPPLY TEST PIPE: <u>60</u> PSI				RESIDUAL PRESSURE WITH VALVE IN TEST PIPE OPEN WIDE <u>47</u> PSI			
	Undergroud mains and lead in connections to system risers flushed before connection made to sprinkler piping. VERIFIED BY COPY OF THE U FORM NO. 85B ☐ YES ☐ NO OTHER EXPLAIN FLUSHED BY INSTALLER OF UNDERGROUND SPRINKLER PIPING ☒ YES ☐ NO								
BLANK TESTING GASKETS	NUMBER USED <u>0</u>	LOCATIONS						NUMBER REMOVED	
WELDING	WELDED PIPING ☐ YES ☒ NO								
	IF YES...								
	DO YOU CERTIFY AS THE SPRINKLER CONTRACTOR THAT WELDING PROCEDURES COMPLY WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3 ☐ YES ☐ NO								
	DO YOU CERTIFY THAT THE WELDING WAS PERFORMED BY WELDERS QUALIFIED IN COMPLIANCE WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3 ☐ YES ☐ NO								
HYDRAULIC DATA NAMEPLATE	NAMEPLATE PROVIDED ☐ YES ☐ NO		IF NO, EXPLAIN						
	DATE LEFT IN SERVICE WITH ALL CONTROL VALVES OPEN: <u>9-28-89</u>								
SIGNATURES	NAME OF SPRINKLER CONTRACTOR <u>ALLIED FIRE & SAFETY COMPANY</u>								
	TESTS WITNESSED BY								
	FOR PROPERTY OWNER (SIGNED) <u>Nick F. ...</u>				TITLE <u>Field Sup.</u>		DATE <u>9/28/89</u>		
	FOR SPRINKLER CONTRACTOR (SIGNED) <u>Edward M. King</u>				TITLE <u>General Mgr.</u>		DATE <u>9/28/89</u>		
ADDITIONAL EXPLANATION AND NOTES									

RECEIVED

RECEIVED

OCT 2 1989

OCT 23 1989

DIV. OF INSPECTION

October 23, 1989

DIV. OF INSPECTION

Mr. Arthur Cierzo
Building Department
Township of Brick
Ocean County, New Jersey
401 Chambers Bridge Road
Brick, NJ 08723

Re: Marshalls
650 Route 70
Brick, NJ 08723

Dear Mr. Cierzo:

Confirming our conversation of this date, Marshalls wants to stock their store and have assured us that they will do this with employees only and will not open for business until a ~~final~~ certificate of occupancy is issued by your office.

Very truly yours,

JF

VORNADO PROPERTIES

James J. Fallon
James J. Fallon
Director of Design & Construction

JJF/jp

Vornado INC. 174 PASSAIC STREET, GARFIELD, NEW JERSEY 07026 (201) 773-4000

TELECOPIER MESSAGE

SENT: Date October 23, 1989

Time

TO: James J. Fallon FAX #920-0943

COMPANY: Vornado, Inc.

NUMBER OF PAGES: 2 (INCLUDING COVER SHEET)

FROM: Joan Pierce

THANK YOU,

**Vornado**
properties

October 23, 1989

Mr. Arthur Cierzo
Building Department
Township of Brick
Ocean County, New Jersey
401 Chambers Bridge Road
Brick, NJ 08723

Re: Marshalls
650 Route 70
Brick, NJ 08723

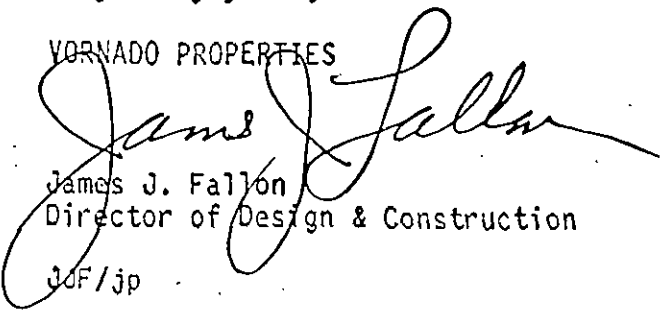
Dear Mr. Cierzo:

Confirming our conversation of this date, Marshalls wants to stock their store and have assured us that they will do this with employees only and will not open for business until a ~~final~~ certificate of occupancy is issued by your office.

97

Very truly yours,

VORNADO PROPERTIES



James J. Fallon
Director of Design & Construction

JDF/jp



A Subsidiary of Melville Corporation

200 Brickstone Square
Post Office Box 9030
Andover, MA 01810-0930

October 23, 1989

VIA: FACSIMILE

Mr. James Fallon
Vornado Properties
174 Passaic Street
Garfield, NJ 07026

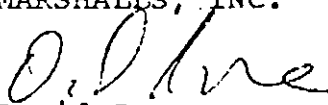
RE: MARSHALLS OF BRICK, NJ - # 358

Dear Jim:

We intend to begin the stocking of our store in anticipation of opening. Only store employees will be in the store during the process. Thank you.

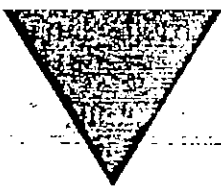
Sincerely,

MARSHALLS, INC.


David Sarre
Project Manager

DS/msm

CC: J. Haskins



Vornado
properties

920-0808

October 26, 1989

TOWNSHIP OF BRICK
Ocean County, New Jersey
401 Chambers Bridge Road
Brick, NJ 08723

RE: CALDOR/SHOP-RITE SHOPPING CENTER
BRICKTOWN, NEW JERSEY

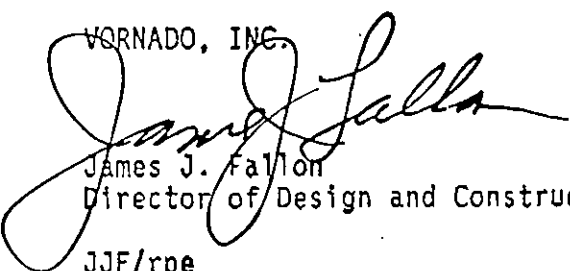
Dear Sir:

We are requesting permission to stock the Stax store in the above captioned shopping center.

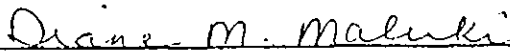
We will not hold the Township responsible in any way and the store will not be opened for "business" until a Certificate of Occupancy is issued.

Very truly yours,

VORNADO, INC.


James J. Fallon
Director of Design and Construction

JJF/rpe


Diane M. Malinski
Stax manager



Vornado
properties

October 26, 1989

TOWNSHIP OF BRICK
Ocean County, New Jersey
401 Chambers Bridge Road
Brick, NJ 08723

RE: CALDOR/SHOP-RITE SHOPPING CENTER
BRICKTOWN, NEW JERSEY

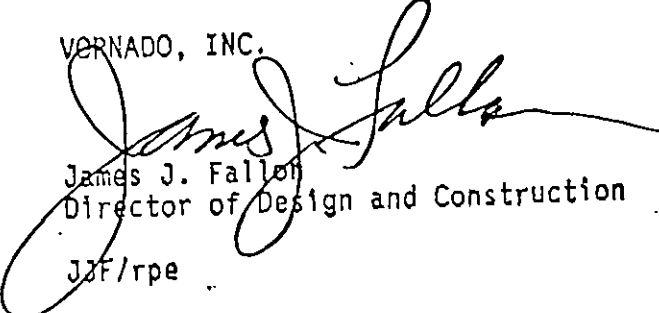
Dear Sir:

We are requesting permission to stock the Reynolds (Rafters) store in the above captioned shopping center.

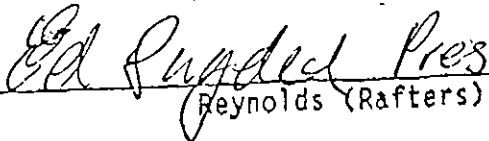
We will not hold the Township responsible in any way and the store will not be opened for "business" until a Certificate of Occupancy is issued.

Very truly yours,

VORNADO, INC.


James J. Fallon
Director of Design and Construction

JJF/rpe


Ed Sugden Pres.
Reynolds (Rafters)



Vornado
properties

October 26, 1989

TOWNSHIP OF BRICK
Ocean County, New Jersey
401 Chambers Bridge Road
Brick, NJ 08723

RE: CALDOR/SHOP-RITE SHOPPING CENTER
BRICKTOWN, NEW JERSEY

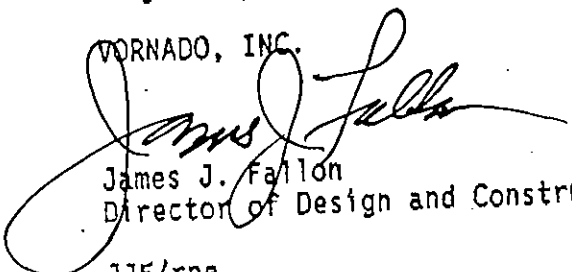
Dear Sir:

We are requesting permission to stock the Lee Wards store in the above captioned shopping center.

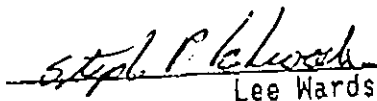
We will not hold the Township responsible in any way and the store will not be opened for "business" until a Certificate of Occupancy is issued.

Very truly yours,

VORNADO, INC.


James J. Fallon
Director of Design and Construction

JJF/rpe


Lee Wards

Phase III nearest 70

Pbb ok 10-20-89

Stones	Joyce Leslie	3D
	Marshall's	3A
	Star	3B
	Rafter's	3C

1A — Spirits unlimited

1B — Rainbow Shoes

1C — Fayva Shoes

1D — Leola Cards

1E — Baker Shoes

1F — Hit or Miss

1G — Cut - UPS

1H —

1J — Beauty Barn

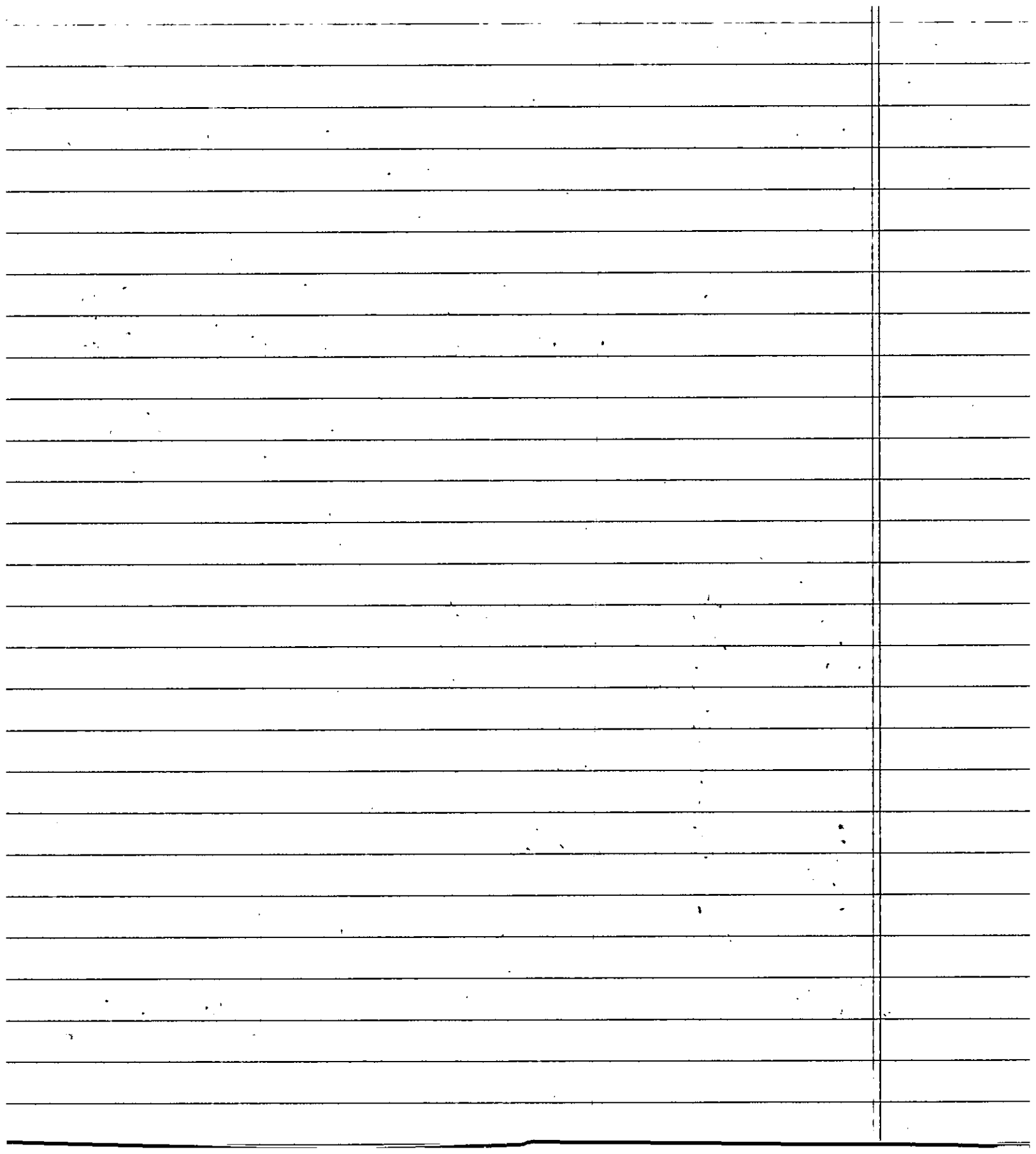
1K —

1L — Seewards

Pliny o'K 10-26-89 pS.

1M — R & S

Pbb ok 10-31-89



INSPECTOR: K. Shefer

DATE: 12-6-89

JOB: Vorne's Center
SP# 1676

SECTION: Birchwood

TYPE OF WORK: CO Re-Ins p

WEATHER: Overcast

LOCATION: Chamberbridge Rd

TEMPERATURE: 30°

BLOCK: 701¹¹⁶⁻¹⁰

LOT:

ENGINEERING RECOMMENDATIONS FOR
CERTIFICATE OF OCCUPANCY
INSPECTION CHECK LIST

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway		
2. Grading		
3. Sidewalk		
4. Road Pavement		
5. Landscaping & Sodding		
6. Clean-up Procedures		
7. Note on going construction in immediate area		
8. Safety		

COMMENTS REFERENCING ITEM NUMBER:

See attach & punch list items. No change.

RECOMMENDATIONS:

☐ TEMP. C.O.

☐ FINAL C.O.

☒ DETAILED REINSPECTION

☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED

PLANNING BOARD ENGINEER

MUNICIPAL ENGINEER

RETRACTED
12/7/89 JXL

I _____, Authorized representative of _____, hereby acknowledge the above deficiencies, and further realize that the Certificate of Occupancy will be conditioned upon the acceptable resolution thereof within _____ days of the issuance of Certificate of Occupancy.

920-0808

DAILY INSPECTION REPORT

no. _____

DEPARTMENT OF ENGINEERING BRICK TOWNSHIP, NEW JERSEY

PROJECT NAME:

DATE:

LOCATION:

Punch/ise

TEMP:

WEATHER:

PB;BA,C#:

BLOCK:

LOT:

TIME STARTED:

TIME ENDED:

TOTAL TIME:

BONDED OR PAY ITEMS(CIRCLE ONE)

DESCRIPTION OF WORK

ITEM
NUMBER QUANTITY

- Paint black old lane markings in
- East bound lane Chambersbridge
- Replace 2 sects side walk @
- N. west side Chambersbridge @ Light MH
- Trench repair needed across
- Chambersbridge (for lights)
- Need letter concerning side
- improvements @ Wieh
- Remove urinals @ Rt 70 (rear of prop ad)
- Fix sink holes @ MH Rt 70 (by rear of
- prop ad, south side)
- lg piece of concrete @ same loc.
- remove sign same loc as above
- restore ext signs @ same loc.
- lower MVA Casting / blow off
- needs "hook" @ same loc
- low spots for need to be fixed.

DATE: _____

CROSS REFERENCE

SHEET 1 OF _____

INSPECTION REQUESTED BY: _____

(1) Not as prop grading plan in
same area

INSPECTORS SIGNATURE

(2)

INSPECTORS SIGNATURE



DAILY INSPECTION REPORT

no. _____

DEPARTMENT OF ENGINEERING
BRICK TOWNSHIP, NEW JERSEY

PROJECT NAME:

DATE:

LOCATION:

Punchlist

TEMP:

PB;BA,C#:

BLOCK:

LOT:

TIME STARTED:

TIME ENDED:

TOTAL TIME:

BONDED OR PAY ITEMS(CIRCLE ONE)

ITEM
NUMBER

QUANTITY

DESCRIPTION OF WORK

- Broken curb to be fixed (skate) 1 sect
@ same loc.

* - Utility panel for ex sign, @ same
location, has exposed wires (hazardous)
will refer to Bldg Dept.

- grading @ road across from
"Soyce Lesles" store.

- ~~making entire Blvd by construct~~
~~road (McDonald)~~

- area @ south side of Real Estate
office not as planned

- Area to be designated storage
trailers only (being parked in
traffic lanes) Hazardous

- hazardous situation w/ utility pole
@ Shop-Rite loading area (JST review)

- Shop-Rite loading area needs JST review

- Brickstore relocated by R+S store

DATE: _____

(1)

CROSS REFERENCE

INSPECTORS SIGNATURE

SHEET 2 OF _____

(2)

INSPECTION REQUESTED BY:

INSPECTORS SIGNATURE



OCEAN COUNTY SOIL CONSERVATION DISTRICT

6 Mott Place, CN.2191, Toms River, NJ 08754
Telephone: 201-244-7048

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK TOWNSHIP
PROJECT: Caldor Shopping Center Expansion SCD NO.: 1674
BLOCK NO.(s) 701 LOT NO.(s) 7, 8, 15 & 16

Complete Compliance ☒

Temporary Compliance ☐

BLOCK NO.	LOT NO.	CONDITIONS
		The applicant shall remain responsible for proper stabilization of all areas until final bond release by the municipality.

Total Fees Due: \$

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT:

AUTHORIZED DISTRICT SIGNATURE:

Benny J. [Signature]
Date: 11/22/89

Distribution: White-Township Canary-Applicant Pink-District



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3030

Office of
Division of Inspections

Date

1-23-89

Subject:

VERNADO INC

Block

701

Lot

7-8-15-16

AFFIDAVIT:

I JAMES J. FALLOW DIR. OF DESIGN ^{PROWT.} hereby request a temporary building permit to proceed with construction of footings and foundation (only) on the subject property at my own risk. I understand and acknowledge that the issuance of the full building permit is subject to further approvals as normally required. I understand that adjustments in the foundation and first floor elevation may be necessary in order to comply with the approved plot plan grading. The below department approvals are required prior to issuance of a temporary building permit.

Applicant

James J. Fallow

Date

1/21/89

Twp. Engineer or Ass't. Engineer Date

Zoning Officer Date
Zoning Department

Building Inspector Date
Building Department



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

UNIFORM CONSTRUCTION CODE

Chapter 23, Title 5

Approval of Part
5.23-2.16 (g)

OWNER/AGENT

VORNAO INC

ADDRESS

174 PASSAIC ST

TOWN

GARFIELD NJ

ZIP

BLOCK

701

LOT

7-8-15-16

Chambers Bridge Rd



FOOTING



FOUNDATION



OTHER

OWNER/AGENT PROCEED AT OWN RISK



OWNER/AGENT

James J. Fulk

BUILDING SUB-CODE OFFICIAL

1-20-89 Ken Fenners

CONSTRUCTION OFFICIAL

Arthur Cierzo



OCEAN COUNTY SOIL CONSERVATION DISTRICT

6 Mott Place, CN.2191, Toms River, NJ 08754
Telephone: 201-244-7048

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK TOWNSHIP
PROJECT: Caldor Shopping Center Extension SCD NO.: 1674
BLOCK NO.(s) 701 LOT NO.(s) 7, 8, 15 & 16

Complete Compliance ☒

Temporary Compliance ☐

BLOCK NO.	LOT NO.	CONDITIONS
		The applicant shall remain responsible for proper stabilization of all areas until final bond release by the municipality.

RECEIVED
DEC 19 1989

Total Fees Due: \$ _____

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: _____

Date: 11/22/89

Distribution: White-Township Canary-Applicant Pink-District

TOWNSHIP OF BRICK



☒ NOTICE OF VIOLATION AND
ORDER TO TERMINATE
☐ NOTICE AND ORDER TO
PAY PENALTY

PERMIT NO. 4721
DATE ISSUED 10/12/89
Block 701 Lot 7, 8, 15, 16
Subdivision _____
Notice No. _____

IDENTIFICATION

OWNER: Vornado Inc. AGENT: _____
Name _____ Name Same
Address 174 Passaic St. Address _____
Town/State/Zip Garfield, N.J. 07060 Town/State/Zip _____
Work Site Address _____

ACTION

DATE OF NOTICE: 10/12/89 COMPLIANCE DUE DATE: immed. DATE OF INSPECTION: 10/11/89

TAKE NOTICE that you have been found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder (N.J.A.C. 5:23-2.30 and 2.31) in that:

- 1) Over flowing dumpsters
- 2) Piles of Combustible Material

This represents a Fire & Health Hazard to the Public.

You are hereby ordered to terminate the said violations on or before immediately. The owner and agent/contractor bear joint responsibility for bringing about compliance. No Certificate of Occupancy or Approval will be issued unless the said violations are corrected.

- ☒ Failure to comply with this Order will subject you to a penalty of \$ 500.00 per day.
- ☐ You are hereby ordered to pay a penalty in the amount of \$ _____ for each violation for a total penalty of \$ _____. Each _____ that any of the said violations remain outstanding after _____ shall result in an additional penalty of \$ _____ per _____.

If you wish to contest the validity of the above action, in accord with N.J.A.C. 5:23-2.35 et. seq., you may request a hearing before the Construction Board of Appeals of the _____ of _____, within 20 business days of receipt of these Orders. The Application to the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your address and name, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of your reliance on the Regulations and, if necessary, a brief statement setting forth your position and the nature of the relief sought by you. You may also append any documents that you consider useful.

The fee for an appeal is \$ _____ to be forwarded with your application to the Board of Appeals office at _____.

If you have questions concerning this matter, please call: Mr. Cierzo, Const. Official

477-3000 ext. 260

NOTICE OF VIOLATION AND ORDER TO TERMINATE: _____

SCO

DATE: Oct 12 1989

NOTICE AND ORDER OF PENALTY: _____

CO

DATE: Oct 13 1989

Brown Roof

LL = 30

DL = 80

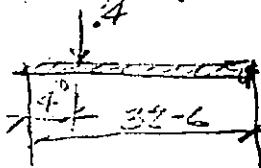
Section Dwg E1

ROBERT R. ROSEN ASSOCIATES
PROFESSIONAL ENGINEER
107-09 W. RIDGE PIKE
CONSHOHOCKEN, PA. 19428

Typical Joist

$$6.25 \times 50 = \frac{313}{188}$$

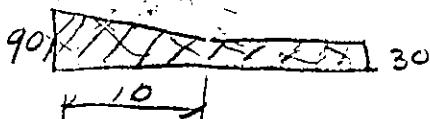
Joist w/AC UNIT



$$R_{LL} = \frac{313 \times 16.25}{4 \times 28.5} = \frac{5.09}{5.44}$$

$$\frac{5.44}{16.25} = .335$$

Joist AT.
High-Low
MAX 90# Snow



$$R_L = \frac{32.5 \times 50}{2} = 812.5$$

$$\frac{60 \times 10}{2} \times \frac{29.17}{32.5} = 269.3$$

$$1081.8$$

$$\frac{853.2}{50} = 17.06$$

$$R_K = 5.14$$

$$5.14 + 13.13 = 16.42$$

RECEIVED

JUN 16 1989

DIV. OF INSPECTION

Use 24 K5
@ 6-3

PER 1210

Use 24 K6
@ 6-3
w/AC UNIT
M.N.

$$R_L = 812.5$$

$$1082 \quad \frac{30.7}{853.2}$$

Use 313 @ 34" H.L.

Use 24 K6 H.L.

ROBERT R. ROSEN ASSOCIATES
 PROFESSIONAL ENGINEER
 107-09 W. RIDGE PIKE
 CONSHOHOCKEN, PA. 19428

TYP GIRDER

$$L = 50 - 0$$

$$P = .05(6.25)(32.5) = 10.15^k$$

USE 48G8N 10.2^k

TYP COL INT

$$P = .05(50)(32.5) = 81.25^k$$

$$H = 23 - 2 - 4 = 19 - 2"$$

$$P_{max} = 103^k$$

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 PE

USE W8x31

B.R.

$$10 \times 10 \quad n = 10 - 8(8) / 2 = 1.8" \quad \text{USE } 3.14"$$

$$t = 3.14 \sqrt{.82/9} = .94"$$

USE 1 x 10 x 10 IL
 2-3+0 A.B

TYP EXT COL

W8x31

$$P = .05(17)(25) = 21.3^k$$

$$P_{max} = 23 - 1 = 22'$$

$$P_{max} = 80^k$$

$$t = 3.14 \sqrt{.21/9} = .48"$$

USE 3/4 x 10 x 10
 2-3+0 A.B

EXT COL CANOPY

$$P = .06(25)(6.5) = 9.75^k$$

$$H = 20 - 1 = 19 - 0$$

USE W8x24

B.R.

$$16 \times 16$$

$$n = 16 - 8(6.5) / 2 = 5.4"$$

$$t = 5.4 \sqrt{.104/9} = .36"$$

USE 3/4 x 16 x 16 R

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FRONT SPANDREL

$$17 \times 50 = .85$$

$$\text{WALL} \quad \frac{.1}{.95} \quad \text{USE } 1 \frac{1}{2}$$

$$S = \frac{1}{8} \times 25^2 \times .5 = 39.06$$

$$I = \frac{.54 \times 5 \times 25^4 \times 1728}{384 \times 29000 \times .83} = 39.44$$

USE
 W16x26

FACIA CHANNEL @ CANOPY

$$65 \times 50 = .33$$

$$S = \frac{.33}{8} \times 25^2 \times .5 = 12.69$$

USE
 W12x14

TUB @ WALL (STORE FRONT)

$$\begin{array}{r} \text{CANOPY LOAD } .33 \\ \text{WALL} \quad \frac{.2}{.53} \end{array}$$

$$S = \frac{.53}{8} \times 25^2 \times .5 = 20.7$$

T.S. 12x8x4


 R. ROSEN

Township of Brick
NOTICE OF UNSAFE STRUCTURE

Block 701
Lot 7, 8, 15, 16

Owner; Vornado Inc

Agent; J. Fallon

Address; 174 Passaic St.
Garfield, N..J.

Address;

Work site; Caldor

Date of Issue; 5/9/89 Compliance Date is immediately Inspection date:
PLEASE TAKE NOTICE that as a result of inspections conducted by this
agency on 5/9/89 on the above property an unsafe condition has
been found to exist pursuant to N.J.S.A 52:27D-132 and N.J.A.C. 5:23-
2.32 The building or structure, portion thereof deemed unsafe is
described as follows: 5:23-2.32) Unsafe structures (B) Emergency
5:23-2.19) Special Technical Services, (3) Structural Analysis
5:23-2.20) Tests

You are hereby ordered by no later than immediately to demolish/vacate
the above structure or to make the following repairs or improvements to
render the structure safe and secure:

X Failure to comply with this Order will subject you to a
penalty of \$500.00 per day.

Failure to correct the unsafe condition or refusal to comply with this
notice will result in this matter being forwarded to legal counsel for
prosecution.

Please be advised you have until _____ in which to notify this
agency of your intention to accept or reject these terms.

If you wish to contest the validity of the above action, you may file
an appeal with the Construction Board of Appeals of the County of
Ocean of Toms River, N.J. 08753, within 10 business days of service as
required by N.J.A.C. 5:23-2.32(a) 4. The Application to the
Construction Board of appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your
address and name, the address of the building or site in question, the
specific sections of the Regulations in question, and the extent and
nature of the reliance on the Regulations. If necessary, you may
include a brief statement setting forth you position and the nature of
the relief sought by you.

The fee for an appeal is \$50.00 to be forwarded with your application
to the Board of Appeals office at Ocean County Construction Board of
Appeals, Toms River, N.J. 08753

If you have any questions concerning this matter, please call:
Arthur J. Cierzo, Construction Official of Brick, N.J. 201-477-3000
Ext. 261 or 296

By Order of

Arthur J. Cierzo
Arthur J. Cierzo

Construction Official

Inspection made by: John Chussler
477-3000, ext. 296

(If Applicable)

10/23/89

We are requesting Permission to
stock the Mashalls. Also
We will not hold the Ferry
Responsible in any way. & the
Store will not be open for
"Business" until a Certificate of
Occupancy is issued

Vernado Inc
James J. Talley
Dir of Design & Const.