



CONSTRUCTION PERMIT APPLICATION

RECEIVED Page 1
OCT 10 1989
DIV. OF INSPECTION

I. IDENTIFICATION

- Proposed Work at: Caldor Shopping Center 70-2 Chambersbridge Rd. Brick.
- Owner Name: FAYVA SHOES MOYSE SHOES INC. Tel. (609) 828-9300 EXT 2073
Address: 555-TUTTAPIKE ST. CANTON MA. 02021
- Principal Contractor: JOYCE & CO. INC. Tel. (617) 326-5410
Address: P.O. Box 1355 DEDHAM, MASS. 02026
Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
- Architect or Engineer: _____ Tel. () _____
Address _____
- Responsible Person in Charge of Work: JERSEY SIGN CO. Tel. (201) 255-2211

II. PROPOSED WORK

A. TYPE OF WORK

- ☐ Minor Work (Single Trade)
- ☐ Small Job (\$5,000 and no Prior Approvals)
Complete only II.B., III and IV.A. and Page 2
- ☐ New Building
- ☐ Addition
- ☐ Alteration
- ☐ Repair, Replacement
- ☐ Demolition
- ☐ Other: SIGN

B. CATEGORIES OF WORK

Permit/Category	Estimated
1. ☐ Building/Structural	\$ _____
2. ☐ Plumbing	_____
3. ☐ Electrical	_____
4. ☐ Fire Protection	_____
5. ☐ Other _____	_____
6. ☐ Other _____	_____
TOTAL COST	<u>\$2,000.00</u>

C. DO YOU WANT:

- ☐ Partial Releases
- ☐ Prototype Processing

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

- ☐ Elevators/Dumbwaiters
- ☐ High-Pressure Boilers
- ☐ Refrigeration Systems
- ☐ Pressure Vessels
- ☐ Hazardous Uses/Places of Assembly
- ☐ Cross-connections/Backflow Preventors
- ☐ Sprinklers
- ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

- ☐ Hotels (R-1)
 - ☐ Multi-Family (R-2)
HMD Reg. No.: _____
 - ☐ Two Family (R-3b)
 - ☐ One-Family (R-3a)
- If new construction, enter no. of dwelling units: _____
- If other than new construction, enter no. of dwelling units:
Before Construction: _____
After Construction: _____
Net Gain (or loss): _____

B. NON-RESIDENTIAL

- ☐ Theatres with Stage (A-1-A)
- ☐ Movie Theatres (A-1-B)
- ☐ Night Clubs (A-2)
- ☐ Restaurants, Libraries, Museums (A-3)
- ☐ Religious Assembly (A-4)
- ☐ Outdoor Assembly (A-5)
- ☐ Business (B)
- ☐ Educational (E)
- ☐ Moderate-Hazard Factory (F-1)
- ☐ Low-Hazard Factory (F-2)
- ☐ High-Hazard (H)
- ☐ Institutional Detention Center (I-1)
- ☐ Hospitals, Infirmeries (I-2)
- ☐ Group Homes (I-3)
- ☐ Mercantile (M)
- ☐ Moderate-Hazard Warehouse (S-1)
- ☐ Low-Hazard Warehouse (S-2)
- ☐ Temporary, Misc. (U)
- ☐ Other _____

State Specific Use: _____

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

- ☐ Public or Private Company
- ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

- ☐ Public or Private Company
- ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

- No. of Stories _____
- Height of Structure _____ Ft.
- Area—Largest Floor _____ Sq. Ft.
- Bldg. Area—All Fls. _____ Sq. Ft.
- Volume of Structure _____ Cu. Ft.
- Total Land Area Disturbed _____ Sq. Ft.

LDS BR 10312140

ION IN LIEU OF OATH

I. OWNER

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. 46:3B-1 et. seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.
- 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 _____ DATE _____

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 Jersey Sign Co. TEL. (201) 255-2211

ADDRESS 194 Leone Dr. Brick N.J. 08724

SIGNATURE *John P. [Signature]* V.P.

PERMIT NO. 5612

PRIOR APPROVALS CHECKLIST

[illegible]

SUBCODES AND SPECIAL REGULATIONS APPLICABLE

EDITION OF CODE

EDITION OF CODE

- ☐ One and Two Family Dwellings

- Mechanical**

- Building**

- Energy

- Electrical**

- **Barrier Free**

- ☐ Plumbing

- ☐
- Other

- ☐ Flood Hazard

- ☐ **As Built
Elevation
Certification**

- ☐
- Other

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	Approval Date	Reviewer	Comments
☐	BUILDING	10/10/89			
	Footings/Foundations				
	Framing				
	Architectural				
	Other				
☐	PLUMBING				
☐	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			
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
	PLUMBING			
	ELECTRICAL			
	FIRE PROTECTION			
	OTHER			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED: _____ Date Issued _____

- ☐ Temporary Certificate of Occupancy Date Expired _____
☐ Temporary Certificate of Occupancy Date Expired _____
☐ Certificate of Occupancy No. _____
☐ Certificate of Continued Occupancy No. _____
☒ Certificate of Approval No. 11/20/89
☐ None Per Close R/C

IV. ON-GOING INSPECTIONS

On-going Inspections Required (See Page 1, II.D.) Date Posted to Log and Ticker

V. FEE SUMMARY

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

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$ 40.00
PLUMBING	0.00
ELECTRICAL	0.00
FIRE PROTECTION	0.00
OTHER	0.00
SUBTOTAL	\$ 40.00
- LESS: 20% of subtotal (when plan review performed by state agency)	
D.C.A. TRAINING FEE .0006 x	0.00
CERTIFICATE OF OCCUPANCY	0.00
OTHER	0.00
OTHER	0.00
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ 40.00
DATE <u>10/13/89</u> Collected By <u>Palo</u>	

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY		0.00
OTHER		0.00
OTHER		0.00
- LESS: Refunds		(0.00)
TOTAL COLLECTED AFTER PERMIT ISSUED		\$ 0.00

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	\$ 40.00
COLLECTED AFTER PERMIT (VB)	0.00
TOTAL	\$ 40.00



CONSTRUCTION PERMIT

Date Issued 10-13-89
Control #
Permit # 5612

IDENTIFICATION Block 701 Lot 7-8-15-16

Work Site Location Rt 701 Chambers Bridge Rd (Contractor) Jersey Sign Co.

Owner in Fee Morse Shoes, Inc Address _____

Address 555 Tilton Pike St Tele. (____) _____

Tele. (____) Canton, Ma. Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____

Federal Emp. No. _____ or Social Security No. ##000288

is hereby granted permission to perform the following work:

- ☐ BUILDING ☐ PLUMBING ☒ OTHER Sign
☐ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

sign (Fava Shoes)

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$ 2000.

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

PAYMENTS (Office Use Only)		5612*H
Building	701 #	0.00
Plumbing	17.8.15.16 #	
Electrical	SIGNS	40.00
Fire Protection	TOTAL	40.00
Other	CHECK	40.00
Other	CHANGE	0.00
DCA Training Fee	10/13/89 RD. 5 0026A005	13.58
Cert. of Occ.		
Other		
Total	40.00	
Check No.		
Cash		
Collected By:		



BUILDING SUBCODE TECHNICAL SECTION



PERMIT NO. 5612
DATE ISSUED 10-13-89
REVISION DATE _____
Block 701 Lot 7-8-16-16
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner FAYVA SHOES MOYSE SHOES INC Contractor THASEY SIGAL INC

Address 555-TURNPIKE ST. CANTON MA Address 104-KAOU DR BRICK

02086

SUSTAINABLE

Tel. 617-828-7300 EXT 2079

Tel. (601) 255-2411

Work Site Address Candler Shopping Center

Chambers in Bridge Rd. Brick RI 02801

Lic. No. _____

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.

To install one set of 30' individually illuminated letters & connect to circuit supplied by other's

(405g FT.)

FAYVA SHOES

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Alteration/Renovation

☐ Roofing

☐ Siding

☐ Other _____

☐ Demolition

☐ Miscellaneous

☐ Fence

☒ Sign

☐ Pool

☐ Elevator

☐ Other _____

Fee Basis

Fee

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

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_____ \$ _____

_____ \$ _____

_____ \$ _____

D. COMMENTS

USE GROUP: _____ Present _____ Proposed _____

No. of Stories _____ Total Building Area-All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area-Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: \$ _____

☐ Partial Releases ☐ Prototype Processing