

TOWNSHIP OF BRICK



CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: Marshall's, Rte 70 & Chamber's Bridge Rd., Bricktown, NJ
2. Owner Name: Vornado Properties Tel. (201) 773-4000
Address: 174 Passaic St., Garfield, NJ
3. Principal Contractor: County Neon Sign Corporation Tel. (516) 349-9550
Address: 163 Dupont St., Plainview, NY 11803
Lic. No. or Builder Reg. No. _____ Federal Emp. No. 11-1666107
4. Architect or Engineer: _____ Tel. (____) _____
Address: _____
5. Responsible Person in Charge of Work: George L. Schneider Tel. (516) 349-9550

II. PROPOSED WORK

A. TYPE OF WORK	B. CATEGORIES OF WORK	D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?																
1. ☐ Minor Work (Single Trade) 2. ☐ Small Job (\$5,000 and no Prior Approvals) <i>Complete only II.B., III and IV.A. and Page 2</i> 3. ☐ New Building 4. ☐ Addition 5. ☐ Alteration 6. ☐ Repair, Replacement 7. ☐ Demolition 8. ☒ Other: <u>Sign</u> <u>4'x6'x34'4"</u>	<table border="1"> <thead> <tr> <th>Permit/Category</th> <th>Estimated</th> </tr> </thead> <tbody> <tr> <td>1. ☐ Building/Structural</td> <td>\$ _____</td> </tr> <tr> <td>2. ☐ Plumbing</td> <td>_____</td> </tr> <tr> <td>3. ☐ Electrical</td> <td>_____</td> </tr> <tr> <td>4. ☐ Fire Protection</td> <td>_____</td> </tr> <tr> <td>5. ☐ Other _____</td> <td>_____</td> </tr> <tr> <td>6. ☒ Other <u>Sign</u></td> <td>_____</td> </tr> <tr> <td colspan="2">TOTAL COST <u>\$ 8,000</u></td> </tr> </tbody> </table>	Permit/Category	Estimated	1. ☐ Building/Structural	\$ _____	2. ☐ Plumbing	_____	3. ☐ Electrical	_____	4. ☐ Fire Protection	_____	5. ☐ Other _____	_____	6. ☒ Other <u>Sign</u>	_____	TOTAL COST <u>\$ 8,000</u>		1. ☐ Elevators/Dumbwaiters 2. ☐ High-Pressure Boilers 3. ☐ Refrigeration Systems 4. ☐ Pressure Vessels 5. ☐ Hazardous Uses/Places of Assembly 6. ☐ Cross-connections/Backflow Preventors 7. ☐ Sprinklers 8. ☐ Smoke Control Systems in Open Wells
Permit/Category	Estimated																	
1. ☐ Building/Structural	\$ _____																	
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4. ☐ Fire Protection	_____																	
5. ☐ Other _____	_____																	
6. ☒ Other <u>Sign</u>	_____																	
TOTAL COST <u>\$ 8,000</u>																		
C. DO YOU WANT: 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.: _____	If other than new construction, enter no. of dwelling units: _____
3. ☐ Two Family (R-3b)	Before Construction: _____
4. ☐ One-Family (R-3a)	After Construction: _____
	Net Gain (or loss): _____
B. NON-RESIDENTIAL	
5. ☐ Theatres with Stage (A-1-A)	16. ☐ Institutional Detention Center (I-1)
6. ☐ Movie Theatres (A-1-B)	17. ☐ Hospitals, Infirmeries (I-2)
7. ☐ Night Clubs (A-2)	18. ☐ Group Homes (I-3)
8. ☐ Restaurants, Libraries, Museums (A-3)	19. ☐ Mercantile (M)
9. ☐ Religious Assembly (A-4)	20. ☐ Moderate-Hazard Warehouse (S-1)
10. ☐ Outdoor Assembly (A-5)	21. ☐ Low-Hazard Warehouse (S-2)
11. ☐ Business (B)	22. ☐ Temporary, Misc. (U)
12. ☐ Educational (E)	23. ☐ Other _____
13. ☐ Moderate-Hazard Factory (F-1)	
14. ☐ Low-Hazard Factory (F-2)	
15. ☐ High-Hazard (H)	

State Specific Use: _____

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP																								
1. ☐ Private (Individual, Corp., Non-profit Inst., Etc.)																								
2. ☐ Public (State, County or Local Govt.)																								
B. HEATING FUEL																								
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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 _____																								
15. Height of Structure _____ Ft.																								
16. Area—Largest Floor _____ Sq. Ft.																								
17. Bldg. Area—All Fls. _____ Sq. Ft.																								
18. Volume of Structure _____ Cu. Ft.																								
19. Total Land Area Disturbed _____ Sq. Ft.																								

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. 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 _____ TEL.() _____

ADDRESS _____

SIGNATURE

Richard Rowan V-P
RICHARD ROWAN V-P

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 Footings/Foundations Framing Architectural Other <u>2</u>			<u>10/10/98</u> <u>JE</u>	
☐	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		<u>2/8/99</u> <u>JC</u>	
☐	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. <u>40 Chase</u>	<u>11/20/91</u>
☐ None	<u>Ryl</u>

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	\$ _____
PLUMBING	\$ _____
ELECTRICAL	\$ _____
FIRE PROTECTION	\$ _____
OTHER <u>Sign</u>	\$ _____
SUBTOTAL	\$ <u>150.00</u>
- LESS: 20% of subtotal (when plan review performed by state agency).	
D.C.A. TRAINING FEE .0006 x	\$ _____
CERTIFICATE OF OCCUPANCY	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ <u>150.00</u>
DATE <u>10/25/98</u> Collected By <u>Palo</u>	

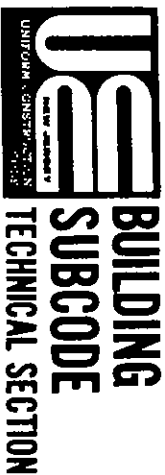
B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

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



PERMIT NO. 2935
 DATE ISSUED 10-25-88
 REVISION DATE _____
 Block 701 Lot 7 & 9.03
 Subdivision _____

A. IDENTIFICATION

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

Owner Vornado Properties Contractor County Neon Sign Corporation
 Address 174 Passaic St. Address 163 Dupont St.
Garfield, NJ 07026 Plainview, NY 11803
 Tel. (201) 773-4000 Tel. (516) 349-9550
 Work Site Address Rte 70 & Chambers Bridge Bldg. No. _____
Bricktown, NJ Rd. Federal Emp. No. 11-1666107

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.

Sign
 4' & 6' x 34'4" -
 Illuminated - Metal &
 Plastic-reading
 "Marshalls"

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)

C. BUILDING CHARACTERISTICS

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: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

COUNTY NEON

163 Dupont St.
Plainview, N.Y. 11803
516-349-9550
718-445-3710

LETTER OF TRANSMITTAL

to

Township of Brick
401 Chambers Bridge Rd.
Brick, NJ 08723

Att: John Kinnevy
Zoning Officer

date October 14, 1988

project no.

project Marshalls
Rte 70 & Chambers Brick
Rd.
Bricktown, NJ

we are sending

- | | |
|--|---|
| ☐ prints of drawings | ☐ Shop Drawings |
| ☐ reproducibles | ☐ Change order |
| ☐ specifications | ☐ Catalog cuts |
| ☐ samples | ☐ Copy of letter |
| ☐ copy/scripts | ☐ |
| ☐ original art | ☐ |
| ☐ transparencies/photos | ☐ |
| ☐ mechanicals | |

by way of

- ☐ herewith
☐ first class mail
☐ air freight
☐ messenger
☐

for

- ☐ your approval
☐ review & comment
☐ signature & return
☐ per your request
☐ your use
☐ your record
☐ your information
☐ please return
☐

quantity

description

	Application for Wall Sign Permit
2	Drawings
1	Elevation
1	Site Plan

remarks Dear Mr. Kinnevy:

It is our understanding, we may call re. the fee for the permit.

Thank you for your assistance.

copies sent to

by *B. Laddabbe*