

RECEIVED

APR 6 Page 1
1989

CONSTRUCTION PERMIT OF INSPECTION APPLICATION

TOWNSHIP OF BRICK

I. IDENTIFICATION

1. Proposed Work at: BRICKTOWN SHOPPING CENTER (CALDERA SHOPPING CENTER)
2. Owner Name: B. PERIES + ASSOCIATES Tel. (201) 920 0808-9 (TRAILER)
- Address: 34 WEST 32ND ST NEW YORK, N.Y.
3. Principal Contractor: B. PERIES + ASSOCIATES Tel. 212 563 3300
- Address: _____
- Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
4. Architect or Engineer: _____ Tel. (____) _____
- Address: _____
5. Responsible Person in Charge of Work: _____ Tel. (____) _____

II. PROPOSED WORK

A. TYPE OF WORK

1. ☐ Minor Work (Single Trade)
2. ☒ Small Job (\$5,000 and no Prior Approvals)
Complete only II.B., III and IV.A. and Page 2
3. ☐ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☐ Other: Trailer

B. CATEGORIES OF WORK

- | Permit/Category | Estimated |
|---|-----------------|
| 1. ☐ Building/Structural | \$ _____ |
| 2. ☐ Plumbing | _____ |
| 3. ☐ Electrical | _____ |
| 4. ☐ Fire Protection | _____ |
| 5. ☐ Other _____ | _____ |
| 6. ☐ Other _____ | _____ |
| TOTAL COST | \$ 15000 |

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

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

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
HMD Reg. No.: _____
3. ☐ Two Family (R-3b)
4. ☒ 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

- | | |
|---|---|
| 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

- | 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 _____
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.

LDS BR 10312144

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

Michael Rapino

DATE

4-6-88

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					
	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. _____
- ☐ None

11/24/07
Ry1

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	\$ 50.00
PLUMBING	0.00
ELECTRICAL	0.00
FIRE PROTECTION	0.00
OTHER _____	0.00
SUBTOTAL	\$ 50.00
LESS: 20% of subtotal (when plan review performed by state agency).	(10.00)
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	\$ 50.00
DATE 4/13/89 Collected By <i>JK</i>	<i>CR</i>

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)	\$ 50.00
COLLECTED AFTER PERMIT (VB)	0.00
TOTAL	\$ 50.00

TOWNSHIP OF BRICK



**BUILDING
SUBCODE
TECHNICAL SECTION**



PERMIT NO.	39728
DATE ISSUED	4/13/89
REVISION DATE	
Block	701
Subdivision	Lot 2615

A. IDENTIFICATION

APPLICANT - Complete unrelated areas only		When changing contractors, notify this office	
Owner	BERKES + ASS.	Contractor	BERKES + ASS.
Address	34 WEST 32nd ST	Address	34 WEST 32nd ST
Tel.	672, 563.3300	Tel.	NEW YORK NY, 672, 563.3300
Work Site Address	BRICK TOWNE	L.C. No.	
	SHOPPING CENTER	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.

OFFICE TRAILER

TYPE OF WORK:

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

Fee Bands

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 _____	Volume of Structure _____	Cu. Ft. _____
Area-Largest Floor _____	Sq. Ft. _____	Total Land Area Disturbed _____
Estimated Cost of Building Work: \$ _____	Sq. Ft. _____	

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing