

Brick

Permit Without a Jacket

Permit Number B-3834

Construction Permit # B-3834

. Aug. 1, . . . , 19. 83.

Owner . . . Food-A-Rama . . . (Shop Rite)

Location . . . Chambers Bridge Rd.

. Laurelton

Block. 701 Lot 16

Contractor . Mike Bruno

Fee \$ 30.00. ck. Use . . Plumbing Only

BUILDING SUB-CODE INSPECTIONS

VIOLATIONS

Footing Trench

Foundation

Slab

Sheathing

Framing

Insulation

Sheet Rock

Plumbing

Fire Inspection

Final

C.O. Issued

PLUMBING SUB-CODE INSPECTIONS

Slab

Rough

Septic/Sewer

Water

Final

Electrical Final

Use reverse side for additional remarks

CONSTRUCTION PERMIT APPLICATION BRICK TOWNSHIP, NEW JERSEY			
IMPORTANT — Complete ALL items. Mark boxes where applicable			
I. LOCATION OF BUILDING	Number and street <u>Chambers Bridge Rd.</u>	Section <u>16</u>	Lot <u>701</u>
	N S		
	E W side of _____ feet E W from intersection of _____ (Other local geographic, political, or legal subdivision identification)		
II. TYPE AND COST OF BUILDING — All applicants complete Parts A - D			
A. TYPE OF IMPROVEMENT 1 ☐ New buildings 2 ☐ Addition (If residential, enter number of new housing units added, if any, in Part D, 13) 3 ☐ Alteration (See 2 above) 4 ☒ Repair, replacement 5 ☐ Demolition 6 ☐ Moving (relocation) 7 ☐ Garage ☐ Swim Pool ☐ in ☐ out ☐ Fence		D. PROPOSED USE — For "Wrecking" most recent use Residential 12 ☐ One family 13 ☐ Two or more family — Enter number of units _____ 14 ☐ Transient hotel, motel, or dormitory — Enter number of units _____ 15 ☐ Garage 16 ☐ Carport 17 ☐ Other — Specify _____ Nonresidential 18 ☐ Amusement, recreational 19 ☐ Church, other religious 20 ☐ Industrial 21 ☐ Parking garage 22 ☐ Service station, repair garage 23 ☐ Hospital, institutional 24 ☐ Office, bank, professional 25 ☐ Public utility 26 ☐ School, library, other educational 27 ☐ Stores, mercantile 28 ☐ Tanks, towers 29 ☐ Other - Specify _____	
B. OWNERSHIP 8 ☒ Private (individual, corporation, nonprofit institution, etc.) 9 ☐ Public (Federal, State, or local government)			
C. COST 10. Cost of Improvement _____ To be installed but not included in the above cost a. Electrical (# Fixtures, Outlets) _____ b. Plumbing (# of Fixtures) _____ c. Heating, air conditioning _____ d. Other (elevator, etc.) _____ 11. TOTAL COST OF IMPROVEMENT _____ \$		(Omit cents) \$ <u>250</u>	Nonresidential — Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use. <u>Baker Dept - Shop Rite</u> <u>Plumbing Only</u>
III. SELECTED CHARACTERISTICS OF BUILDING — For new buildings and additions, complete Parts E - I; for wrecking, complete only Part H, for all others skip to IV.			
E. PRINCIPAL TYPE OF FRAME ☒ Masonry (wall bearing) ☐ Wood frame ☐ Structural steel ☐ Reinforced concrete ☐ Other - Specify _____	H. DIMENSIONS Number of stories _____ Total square feet of floor area, all floors, based on exterior dimensions _____ Total land area, sq. ft. _____	FEE COMPUTATIONS VOLUME OF BUILDING _____ BUILDING SUB CODE _____ ELECTRICAL CODE _____ PLUMBING CODE _____ PLAN REVIEW _____ CERTIFICATE OF OCCUPANCY _____ STATE TRAINING FUND _____ CONSTRUCTION _____ PERMIT FEE _____	30~ 30.00
F. TYPE OF HEATING SYSTEM Specify _____ Air Cond. Yes ☐ No ☐	I. RESIDENTIAL BUILDING ONLY Number of bedrooms _____ Number of bathrooms _____ Full _____ Partial _____		
G. TYPE OF SEWERAGE DISPOSAL ☐ Public ☐ Individual			

SUB CONTRACTORS				
NAME	TRADE	ADDRESS	ZIP CODE	PHONE #
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

PERSON TO BE IN CHARGE OF CONSTRUCTION

NAME

ADDRESS

IV. IDENTIFICATION — To be completed by all applicants

Name	Mailing address — Number, street, city, and State	ZIP code	Tel. No.
1. Owner Agent	Ford-a-rana	Freehold	462-4700
2. Contractor	Mike Bruno	522 W. LINCOLN AVE. OAKHURST NJ 07755	07755 531- 0594
3. Architects			

The owner of this building and the undersigned agree to conform to all applicable laws of Township of Brick and that all required state, county and local prior approvals have been given.

Signature of applicant	Address	Application date
<i>[Signature]</i>	522 W. LINCOLN OAKHURST	7-26-83

DO NOT WRITE IN THIS SPACE — FOR OFFICE USE ONLY

Approved by	Date permit issued	Permit Number
<i>[Signature]</i>	7/26/83	B-3834

I agree to construct said building in conformity with the plans and specifications filed with the Construction Official and in compliance with the provisions of the Building Code whether shown on plans or not.

Brick Township Construction Permit Application for Plumbing

SHOP-RITE

NUMBER and STREET	SECTION	LOT	BLOCK
Chambers Bridge Rd.		16	70 701

1. LOCATION

PROPOSED USE

2. TYPE of IMPROVEMENT NEW BUILDING ☒ ALTERATION ADDITIONAL FIXTURES
WELL SEPTIC SEWER (B.T.M.U.A.) WATER (B.T.M.U.A.)

3. PLUMBING FIXTURES

1. WATER CLOSET
2. LAVATORIES
3. BATH TUB
4. SHOWER STALL or DRAIN
5. KITCHEN SINK
6. SLOP SINK
7. LAUNDRY TRAY
8. DISHWASHER
9. WASHING MACHINE
10. URINALS
11. FLOOR DRAIN
12. DRINKING FOUNTAIN
13. FOOD WASTE GRINDER
14. SEWER PUMP or EJECTOR
15. GREASE TRAP
16. OIL SAND SEPARATOR
17. AIR CONDITIONER
REFRIGERATOR WATER COOLED
18. HOT WATER HEATER OIL
 GAS ELECTRIC
19. DENTAL UNIT
20. LAWN SPRINKLERS
NO. OF HEADS
21. WELL (PRIVATE)
22. WELL PUMP
23. SEPTIC
24. PLUMBING STACKS

NUMBER OF

FEE

1

5

10.00

4. MATERIAL SPECIFICATIONS

BUILDING SEWER
 WATER SERVICE
 BUILDING DRAIN
 WASTE
 VENTS
 WATER PIPE

5. INSPECTIONS

	DATE	INSPECTOR
SLAB		
ROUGH		
WATER		
SEWER		
FINAL		

6. COMMENTS

Replacement (temporary)

Bakery Dept.

PLUMBER Mike Brown

LICENSE NJ 4951

PLUMBING FEE \$ 15 PERMIT # B-3834

7-26-83

