BLOCK 1149 LOT 5, 5.01, 6 QUALIFICATION CODE _____ ADDRESS (SITE) 1930 Rt 88 Laurel Sq Brick PERMIT NO. 15-1904

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-15-001294

I. IDENTIFICATION

1. Proposed Work Site at: 1930 Rt 88 - Laurel Square, Brick
2. Name of Owner in Fee: Brick Fitness For Women
   Tel. (___) 262-0800 e-mail _____
   Address 1930 Rt 88 (street) Brick (municipality) 08721 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Danny Zarrillo Tel. (732) 814-7114
   Address 36 Gladney Ave. e-mail czarrill@aol.com
   Toms River, NJ
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. _____ FAX: (___) _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. (___) _____ FAX: (___) _____
6. Responsible Person in Charge once Work has Begun _____
   Tel. (732) 814-7114 FAX: (___) —

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 675		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 675		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area — Largest Floor _____ sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Max. Live Load _____
7. Max. Occupancy Load _____
8. If Industrialized Building: State Approved ____ HUD ____
9. Total Land Area Disturbed _____ sq. ft.
10. Flood Hazard Zone _____
11. Base Flood Elevation _____ ft.
12. Wetlands yes ____ no ____

IIa. PROPOSED WORK Fill in pool

- ☐ Minor Work
- ☐ New Building
- ☐ Addition
- ☐ Demolition
- ☐ Repair
- ☐ Alteration
- ☐ Renovation
- ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Radon Remediation
- ☐ Annual Permit

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building					04/08/15	WG			
☐ Electrical									
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE N/A

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____ ____
   Gained, Rental ____ ____
   Lost, Sale ____ ____
   Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 9/8/2017
Control Number C-15-001294
Permit Number 15-1904
Permit Issue Date 6/17/2015
Certificate Number 15-1904

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1930 ROUTE 88 BRICK FITNESS FOR WOMEN Brick Township, NJ 08723 Block: 1149 Lot: 5 Qual:

Owner in Fee: CENTRO NP LAUREL SQ OWNER LLC

Owner Address: PO BOX 4900 SCOTTSDALE NJ 85261

Telephone: (732) 262-0800

Contractor ZARRILLO CONSTRUCTION

Address 36 GLADNEY AVE TOMS RIVER NJ 08753

Telephone: (732) 814-7114 Fax:

License Number or Builders Registration Number: 13VH02371200 Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: ALTERATION - COMMERCIAL ...DEMOLITION OF INDOOR INGROUND POOL

Certificate Comments:

☐ **Certificate of Occupancy**
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☑ **Certificate of Approval**
This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **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 Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

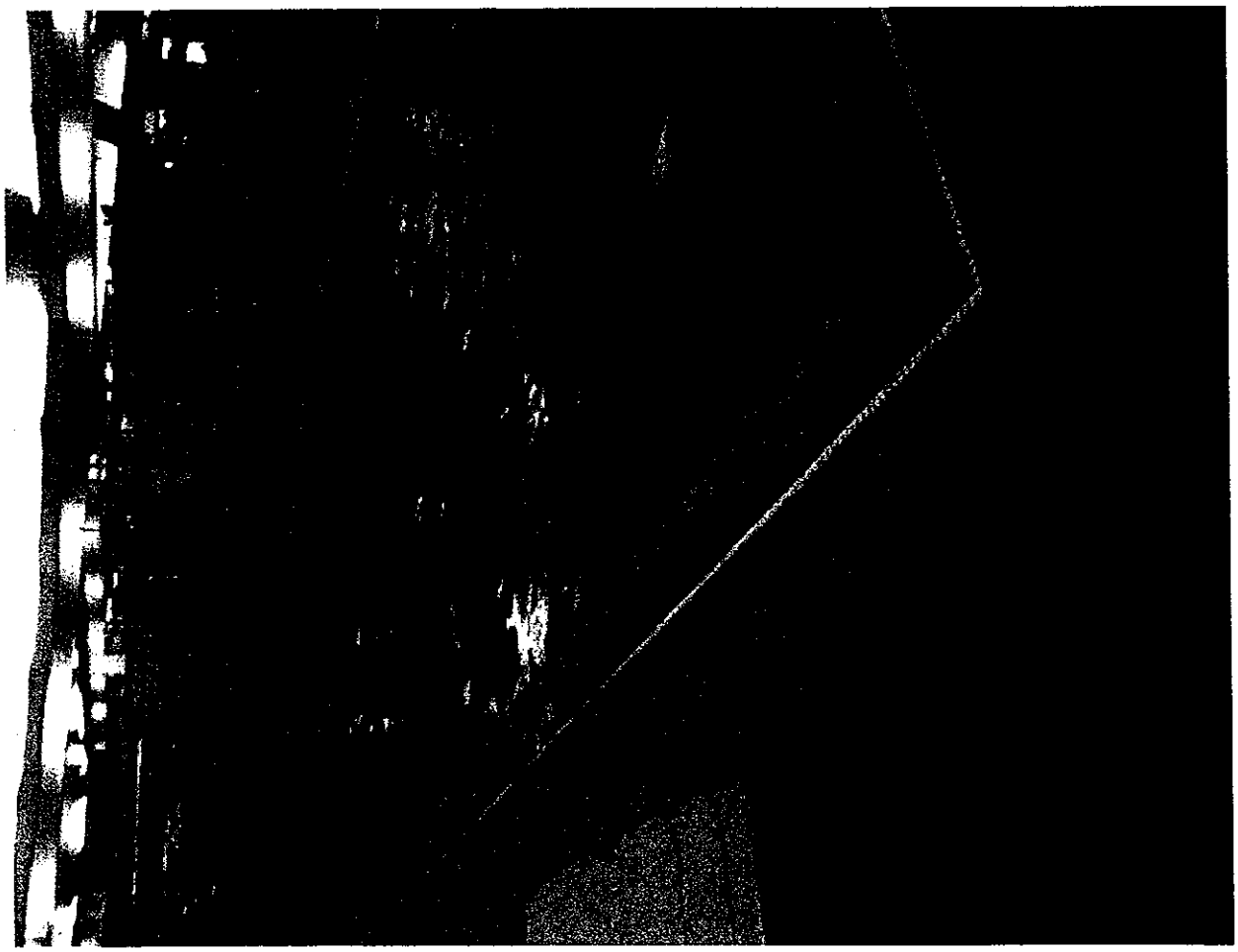
Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 9/8/2017

U.C.C. F260 (rev. 08/05)

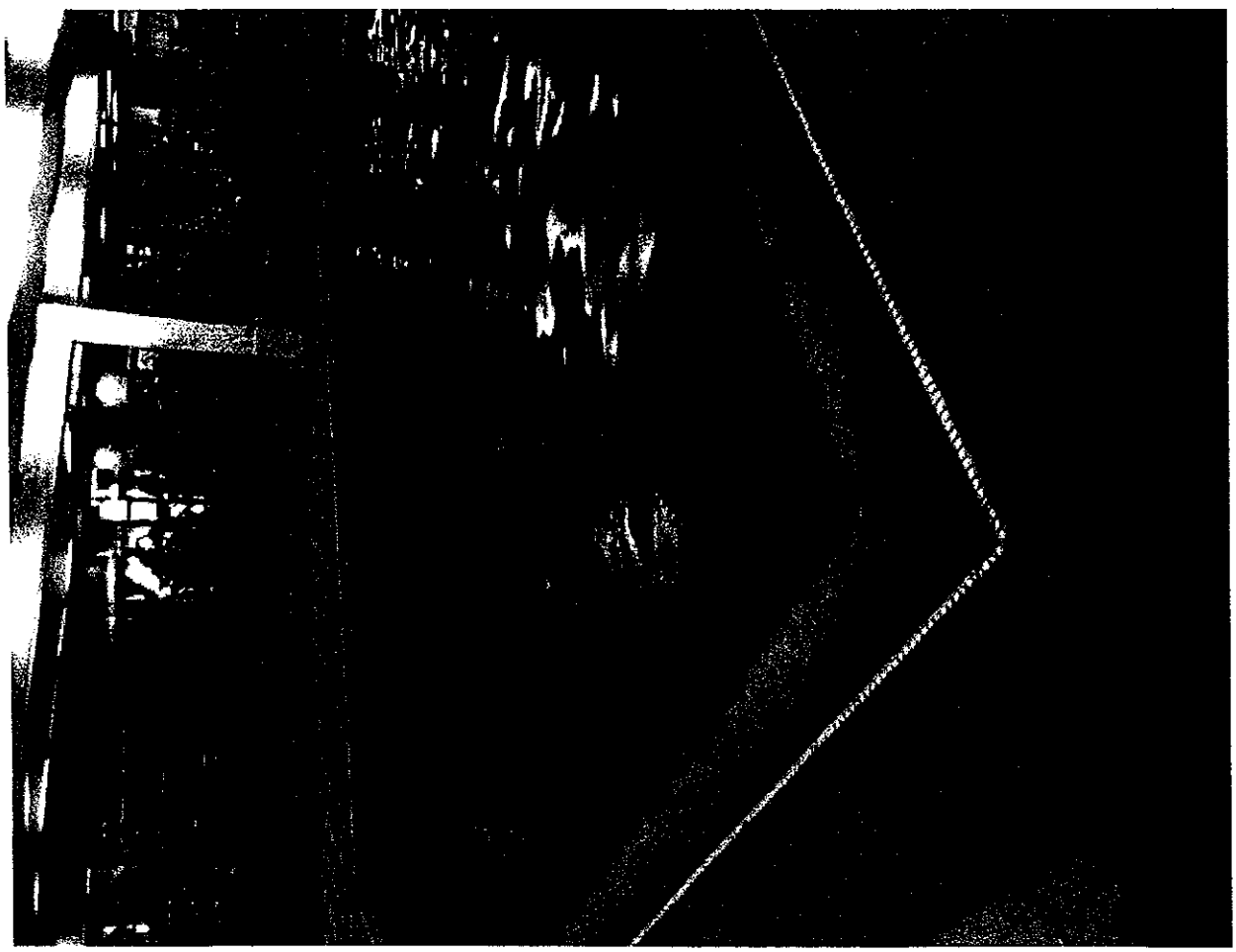
Subj: **(no subject)**
Date: 3/20/2015 10:08:26 A.M. Eastern Daylight Time
From: billbrickfitness@aol.com
To: billbrickfitness@aol.com



Bill

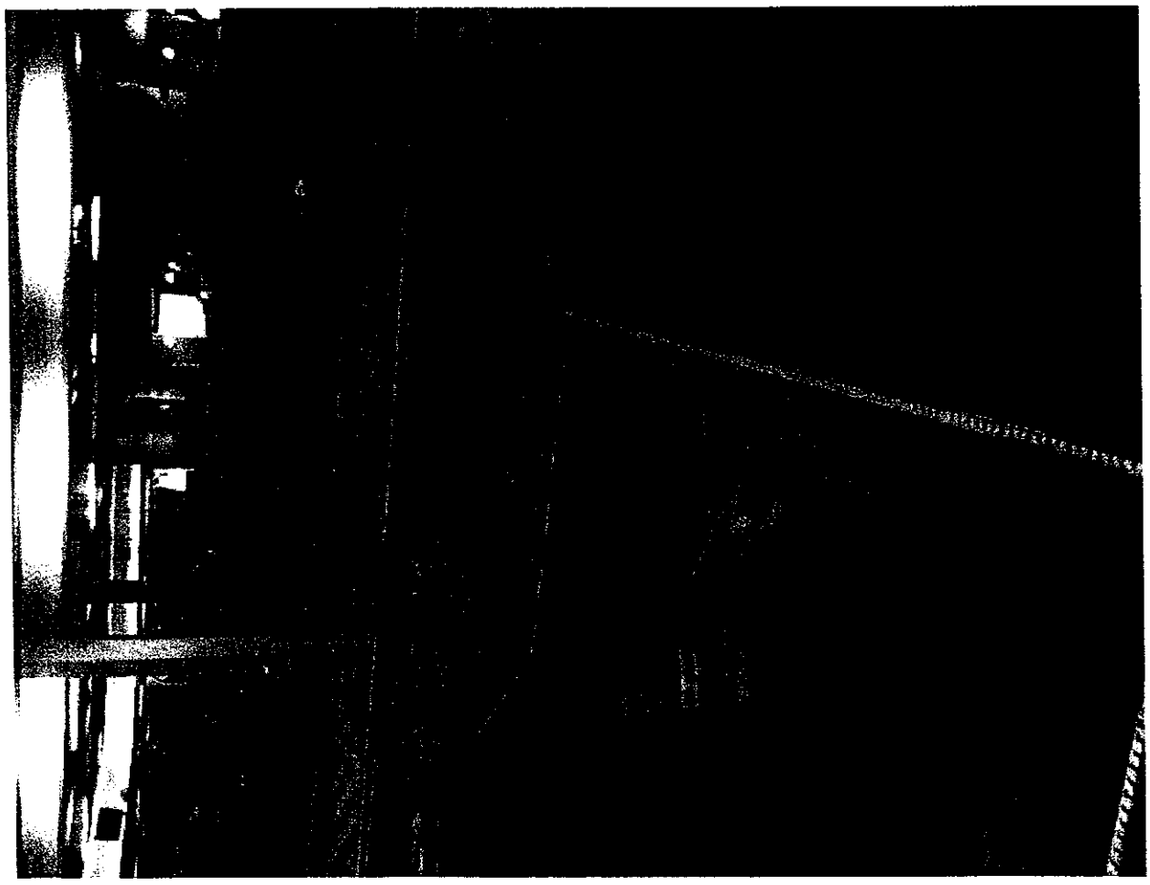
4 Foot deep
20 x 40

Subj: **(no subject)**
Date: 3/20/2015 10:08:40 A.M. Eastern Daylight Time
From: billbrickfitness@aol.com
To: billbrickfitness@aol.com



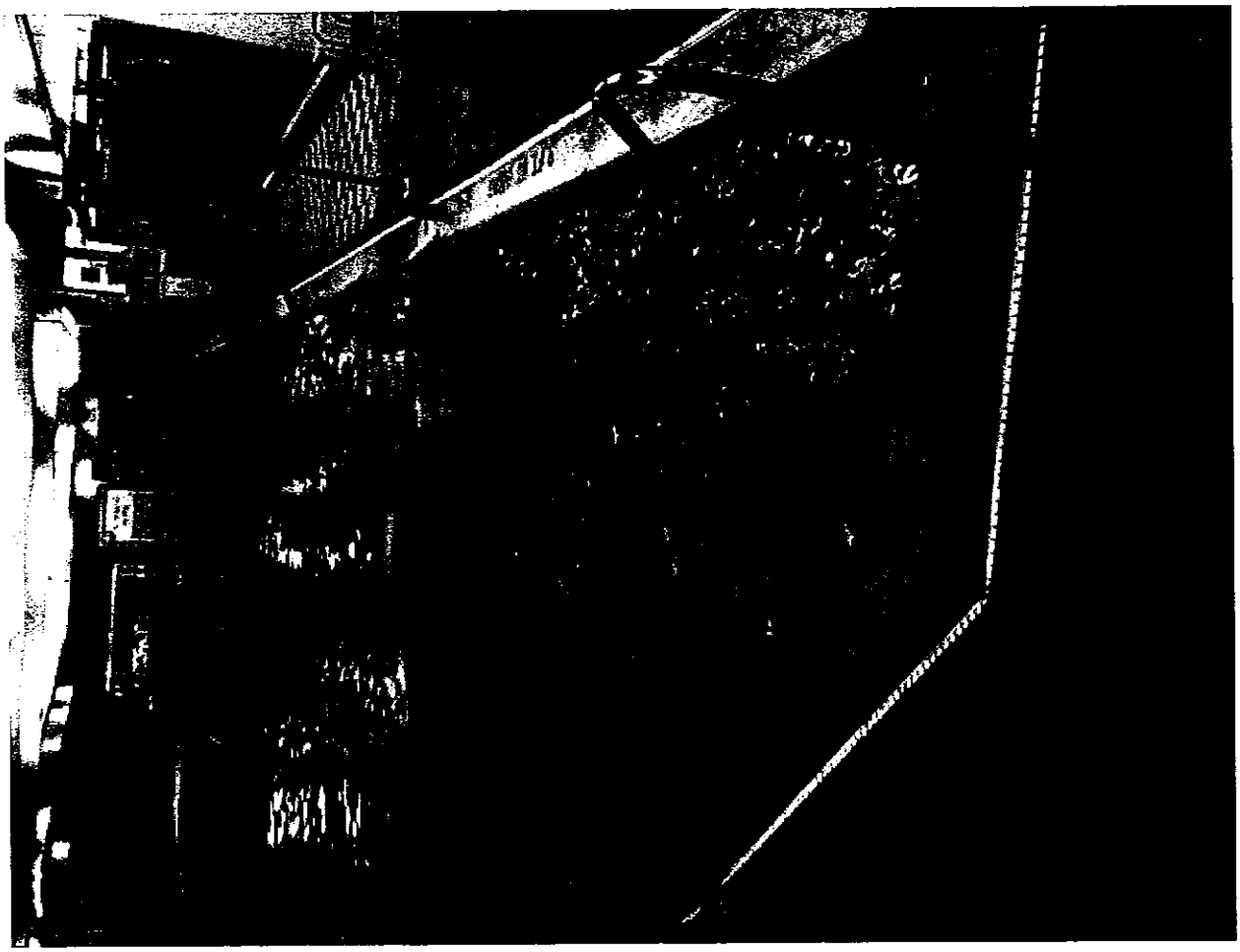
Bill

Subj: **(no subject)**
Date: 3/20/2015 10:08:08 A.M. Eastern Daylight Time
From: billbrickfitness@aol.com
To: billbrickfitness@aol.com



Bill

Subj: **(no subject)**
Date: 3/20/2015 10:07:50 A.M. Eastern Daylight Time
From: billbrickfitness@aol.com
To: billbrickfitness@aol.com



Bill

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 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.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(f)1.ix:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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 further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

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 Danny Zarrillo

Address 36 Gladney Ave.

Toms River, NJ 08753

Telephone (732) 814-7114

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

CONSTRUCTION PERMIT

Date Issued 6-17-15
Control # C-15-001294
Permit # 15-1904

IDENTIFICATION Block: 1149 Lot: 5 Qualifier
Work Site Location: 1930 ROUTE 88 BRICK FITNESS FOR WOMEN
Brick Township, NJ 08723
Owner in Fee CENTRO NP LAUREL SQ OWNER LLC
PO BOX 4900 SCOTTSDALE NJ 85261
Telephone: (732) 262-0800

Contractor ZARRILLO CONSTRUCTION
Address 36 GLADNEY AVE TOMS RIVER NJ 08753
Telephone: (732) 814-7114
Lic. No. or Bldrs. Reg. No. 13VH02371200
Federal Employee. No.

Is hereby granted permission to perform the following work:

- ☑ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
ALTERATION - COMMERCIAL ...DEMOLITION OF INDOOR INGROUND POOL

PAYMENTS (Office Use Only)

Building	$675
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$0
CO Fee	
Other	$0
Total	$675
Check No.	7457
Cash	$0
Credit	$0
Collected By	

Note: If constuction 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 $15,000

Construction Official Date 4/8/15

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

#1904
$675.00
$675.00

☑ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☑ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints; mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control # 6-17-15.

Date Issued
Permit # 15-1904

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 1149 Lot 5.01, 6 Qualification Code _____

Work Site Location 1930 Rt 88 Laurel Square Brick

Owner in Fee: Brick Fitness For Women

Tel. (732) 262-0800 e-mail _____

Address 1930 Rt 88 (street) Brick (municipality) 08721 (zip code)

Contractor: Danny Zarrillo Tel. (732) 814-7114

Address 36 Gladney Ave e-mail czarrill@aol.com
Toms River, NJ 08753

Contractor License No. or Builder Registration No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. _____ FAX: (____) _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Sign here: _____

Print name here: DANNY ZARRILLO

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

- Fill in pool, remove coping + punch holes in floor of pool
- Backfill pool w/compactable material
- Backfill in 6" lifts as required for proper compaction
- Install 4" of 3/4 clean stone + vapor barrier to underside of new pour
- Drill + dowel old slab for proper tie in.
- Pour new concrete slab where pool was removed even with existing floor
- New slab to be 4" w/power trowel finish 3500 PSI

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[✓] No Plans Required	6/08/15	VCH
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 06/08/15
Approved by: VCH.

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 08/24/17
Approved by: VCH.

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
~~Foundation~~ Backfill			7/7/15	JW
Slab			7-16-16	JW
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			08/24/17	VCH
Barrier-Free				

Dates (Month/Day)

PERMIT CLOSED OUT ISSUED PER C/O ISSUED #16-0373 FOR PLANET FITNESS

TYPE OF WORK: OPEN HOLE INSP'N REQ'D PRIOR TO BACKFILL.

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [✓] Pool Fill in
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$ _____

Administrative Surcharge $ _____
Minimum Fee $ _____
State Permit Surcharge Fee $ _____
TOTAL FEE $ _____

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ ft.
Area — Largest Floor _____ sq. ft.
New Bldg. Area/All Floors _____ sq. ft.
Volume of New Structure _____ cu. ft.
Max. Live Load _____
Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____
If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $ .00
2. Rehabilitation $ _____
3. Total (1+ 2) $ 15,000.00

U.C.C. F110
(rev. 11/09)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

ZARRILLO CONSTRUCTION
Dan Zarrilo
36 Gladney Ave
Toms River NJ 08753

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

09/10/2014 TO 12/31/2014
VALID

Signature of Licensee/Registrant/Certificate Holder

13VH02371200
LICENSE/REGISTRATION/CERTIFICATION #

ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED
ZARRILLO CONSTRUCTION
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

09/10/2014 TO 12/31/2014
VALID

SIGNATURE

13VH02371200
License/Registration/Certificate #

ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

PLEASE DETACH HERE

Status Change Reason: Reinstatement

Issue Date: 4/11/2006

Expiration Date: 3/31/2015

For Contractors needing information regarding registration contact the New Jersey Home Improvement Contractors registration section (973) 424-8150 prompt #2. For consumers requiring information concerning Contractor complaints contact the New Jersey Home Improvement Contractors complaints section (973) 424-8150 prompt #6.

TOWNSHIP OF BRICK

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

Code Enforcement

732-262-1033
Fax: 732-262-2941
www.twp.brick.nj.us

UNIFORM CONSTRUCTION CODE

Construction Permits Application
5:23-2.15 (e) (vii) (1x)

Owner/Agent: Danny Zarrillo

Property Address: 1930 Rt 88 Laurel Square

Town: Brick Zip: 08721

Block: 1149 Lot: 5, 5.01, 6

The construction official upon the advice of the appropriate subcode official may waive the requirement for plans when the work is of a minor nature. In signing this document I am asserting that the work being proposed is of a minor nature. I therefore request that plans that include the seal and signature of the registered architect or licensed Engineer not be required for the proposed work. I am aware that inspections are still required. If during an inspection the work is deemed not to be of a minor nature a plan, signed and sealed by a registered architect or licensed Engineer, may be required.

✓ **I have read and understand the above statement, and by signing this I do assert that the work being proposed is of a minor nature.**

OWNER/AGENT PROCEED AT OWN RISK

Signature: [signature]

Owner/Agent: DANNY ZARRILLO

Building Subcode Official: _____
Kenneth Kiseli

Construction Official: _____
Daniel F. Newman Jr

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 1930 Rt 88

BLOCK: 149 **LOT:** 5, 5.01, 6

CONTRACTOR: Danny Zarrillo

CONTRACTOR'S ADDRESS: 36 Gladney Ave., Toms River, NJ 08753

Type of Construction(minor, new home): Fill in pool

Type of Debris (shingles, siding, wood, etc.): 4 inches of concrete floor around perimeter of pool.

Party responsible for removal: Sindel Dumpsters

Dumpster Size: 15 yd. dumpster

Destination of Debris: Sindel Dumpsters

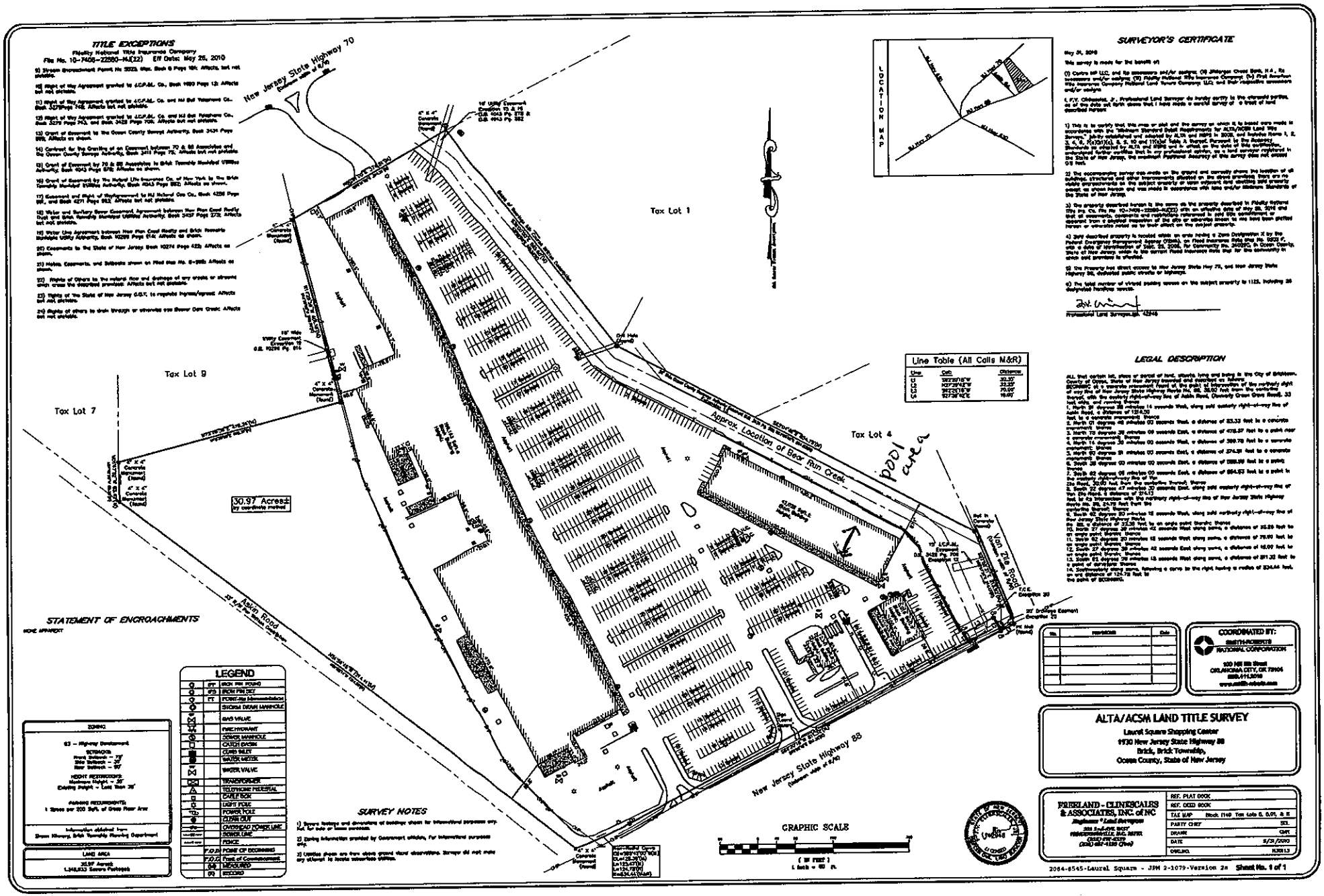
Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclables.

Generator's Certification: "Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."

Signature

3/20/15
Date

DANNY ZARRILLO
Print Name


TITLE EXCEPTIONS
Fidelity National Title Insurance Company
File No. 10-7406-22580-MJ(22) Eff Date: May 25, 2010
SURVEYOR'S CERTIFICATE
LEGAL DESCRIPTION
New Jersey State Highway 70
Tax Lot 1
Tax Lot 9
Tax Lot 7
Tax Lot 4
Approx. Location of Bear Run Creek
30.97 Acres±
Atkin Road
New Jersey State Highway 88
Van Zile Road
LOCATION MAP
Line Table (All Calls M&R)
STATEMENT OF ENCROACHMENTS
SURVEY NOTES
GRAPHIC SCALE
LEGEND
ZONING
LAND AREA
COORDINATED BY:
ALTA/ACSM LAND TITLE SURVEY
Laurel Square Shopping Center
1930 New Jersey State Highway 88
Brick, Brick Township,
Ocean County, State of New Jersey
FERELAND - CLINESCALES & ASSOCIATES, INC. of NC
2084-6545-Laurel Square - JPM 2-1079-Version 2a
Sheet No. 1 of 1