BLOCK 1149 LOT 5 QUALIFICATION CODE _____ ADDRESS (SITE) 1930 Rt88 UNIT #18 PERMIT NO. 15-2056

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

(LH)

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-15-002924

I. IDENTIFICATION

1. Proposed Work Site at: 1930 Rt88 UNIT #18
2. Name of Owner in Fee: BEIXMOR Laurel Square Owner LLC / LC Dance Studio LLC
   Tel. (908) 510 5644 e-mail LCATELLI@icloud.com
   Address 1930 (street) Rt88 UNIT #18 Brick (municipality) NJ 08724 (zip code)
3. Ownership in Fee: Public _____ Private XX
4. Principal Contractor: Reliable Building Services, LLC Tel. (732) 408 5285
   Address 1358 Hooper Ave Ste 218 e-mail _____
   Toms River, NJ 08753
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date 3/16
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VHC09952100
   Federal Emp. ID No. _____ FAX: ( ) _____
5. Architect or Engineer Dario L. Pasquariello Contact _____
   Address 709 Atlantic City Blvd. Beachwood NJ 08722 e-mail Dariopasquariello@gmail.com
   Tel. (732) 608-6838 FAX: (732) 358-0236
6. Responsible Person in Charge once Work has Begun Adam Warren
   Tel. (732) 408 5285 FAX: (732) 810 0355

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 225		
2. Electrical	110		
3. Plumbing	179		
4. Fire Protection		110	
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	15		
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 529		

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

- ☐ 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	5000	LH	6/1/15	6/15/15	6/25/15	MV			
☒ Electrical	1000				6/24/15	[illegible]			
☒ Plumbing	1500			6/23/15	6/23/15	[illegible]			
☐ Fire Protection				8-5-15	8-5-15	[illegible]			
☐ Elevator		Corr	Exempt		6/25/15	EOD			
TOTAL COST	7500								

VII. DESCRIPTION OF BUILDING USE

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

6 C-U LC Dance Studio 9

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 9/9/2015
Control Number C-15-002924
Permit Number 15-2056
Permit Issue Date 6/29/2015
Certificate Number 15-2056

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1930 ROUTE 88 LC DANCE STUDIO LLC, UNIT 18 Brick Township, NJ 08724 Block: 1149 Lot: 5 Qual:

Owner in Fee: CENTRO NP LAUREL SQ OWNER LLC

Owner Address: PO BOX 4900 SCOTTSDALE NJ 85261

Telephone:

Contractor RELIABLE BUILDING SERVICES

Address 1358 HOOPER AVE STE 218 TOMS RIVER NJ 08753

Telephone: (732) 408-5285 Fax:

License Number or Builders Registration Number: 13VH06952100 Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: TENANT FIT UP - LC DANCE STUDIO

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: 9/9/2015

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

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 Adam Warren

Address 1358 Hooper Ave Ste 218

Toms River, NJ 08753

Telephone (732) 408 5285

Signature _____

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

BLOCK 1149 LOT 5 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 15-2056

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Proposed Work Site at: 1930 Route 88
2. Name of Owner in Fee: LC DANCE STUDIO
   Tel. ( ) e-mail
   Address SAME AS ABOVE (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Cintas Fire Protection Tel. ( ) _____
   Address 1705 US Highway 46 e-mail
   License No. OR, if new home, Builder Registration No. Ledgewood, NJ 07852 Exp. Date
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): (973) 347-3901
   Federal Emp. ID No. NJ DFS Lic. # P01276 FAX: ( ) _____
5. Architect or Engineer Federal ID: 31-1703809 Contact
   Address Attn: Lucas DeLosh, CET e-mail
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun LUCAS DELOSH
   Tel. (973) 804-7243 FAX: (888) 398-4210

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
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	$		

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. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____ no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

IIa. PROPOSED WORK

☐ 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		Mandela							
☐ Electrical									
☐ Plumbing									
☒ Fire Protection	$00								
☐ Elevator									
TOTAL COSTS									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:

	All Units	Income-restricted
Before Construction		
After Construction		
Net Gain or Loss		

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

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

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

7/22/15 – Called + L/M on Lucas V/M - Need to find out if new tenant.
Also - owner in fee is wrong + need to find out Unit #. MP

7/29/15 – L/M for Lucas (Returning his phonecall) - (MP)

(2)

(2)

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(e)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.

(X) Check if contractor.

Agent Name Cintas Fire Protection

Address 1705 US Highway 46
Ledgewood, NJ 07852

(973) 347-3901
NJ DFS Lic. # P01276
Federal ID: 31-1703809

Telephone ( ) Attn: Lucas DeLosh, CET

Signature

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 6/29/15

Date Issued Permit # 15-2056

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 Qualification Code

Work Site Location 1930 Rt 88 UNIT 18

Owner in Fee: Brixmor Laurel Square Owner LLC / LC Dance Studio

Tel. (908) 510 5644 e-mail

Address 1930 Rt 88 UNIT 18 (street) Brick (municipality) 08724 (zip code)

Contractor: Reliable Building Services Tel. (732) 408 5285

Address 1358 Hooper Ave Ste 2R e-mail

Toms River, NJ 08753

Contractor License No. or Builder Registration No. Exp. Date 3/16

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH06952100

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.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Dance Studio Remodel

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	6/25/15	MV
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 06/26/15
Approved by: MM

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 09/02/15
Approved by: MM

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame	11/24/15 MM		12/15 MM	lm
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final	8/25/15 fm		8/27/15 fm	
Barrier-Free				

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [X] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] 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. $ 0
2. Rehabilitation $ 5000-
3. Total (1+ 2) $ 5000-

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Update 11/22/15

Date Received
Control #

Date Issued 8/19/15
Permit # 15-2056+A

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 Qualification Code

Work Site Location 1930 Route 88 Suite 18
Brick, NJ

Owner in Fee: LC Dance Studio Brick More Properties.

Tel. e-mail

Address Same as above.
street municipality zip code

Contractor: Cintas Fire Protection Tel. (973) 347-3901

Address 1705 US Route 46 e-mail

Ledgewood, NJ 07852

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. P01276 Exp. Date 04/30/2016

Home Improvement Contractor Registration No. or Exemption Reason (P-License Holder)

Federal Emp. ID No. 311703809 FAX: (888) 398-4210

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present B Proposed B

Constr. Class: Present Proposed 3b

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location: n/a

Total Cost of Fire Protection Work $ 500

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible

Capacity

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:

[ ] New OR [X] Existing

Location of Main Control Valve: Rear of Space

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.

Applicant/Contractor sign here: Rehab

Print name here: Lucas J. DeLosh, CET / Cintas Corporation

D. TECHNICAL SITE DATA [X] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK:

Water Supply Source Relocate/Add Sprinkler (29 per plan)

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	0	
Suppression Systems		
Fire Pump GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)	7	
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial - Uniestab Utilities Approved

Date: Approved by:

[ ] Fire Protection Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 8-21-15

Approved by: RCH

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: 8-21-15

Approved by: RCH

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			8/21/15	RCH
Other				

Dates (Month/Day)

U.C.C. F140 (rev. 02/11)
Internet version

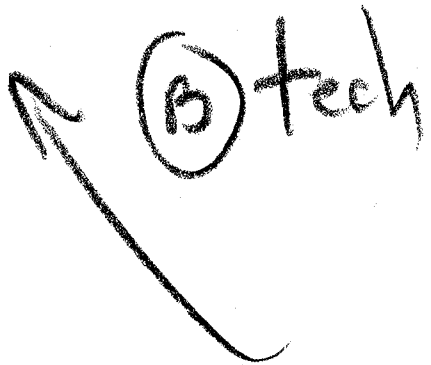
Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

7/24/15 BM

* Brace walls

Barrier free baths

8/25/15 BM NOT Ready



Emerg Contact

Luciano Catelli
(908)-510-5644 cell
LCATELLI @ 6 mail

Adam 732-998-2009

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 6/29/15
Control #
Date Issued
Permit # 15-2056

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 Qualification Code

Work Site Location 1930 Rt 88 UNIT 18

Owner in Fee: Brixmor Lawrence Square Owner LLC / LC Dance Studio

Tel. (908) 510 5644 e-mail

Address 1930 Rt 88 UNIT 18 Brick 08724
street municipality zip code

Contractor: Andrews Plumbing Tel. ( )

Address 905 Waterworks Rd e-mail
Freehold

Contractor License No. 11079 Exp. Date 6-15

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

Federal Emp. ID No. ~~22-~~ 571-63-3157 FAX: (732) 303-9443

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 1500 —

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Andrew Todd

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Dance Studio Remodel

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
1	Lavatory	
	Shower	
	Floor Drain	
1	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

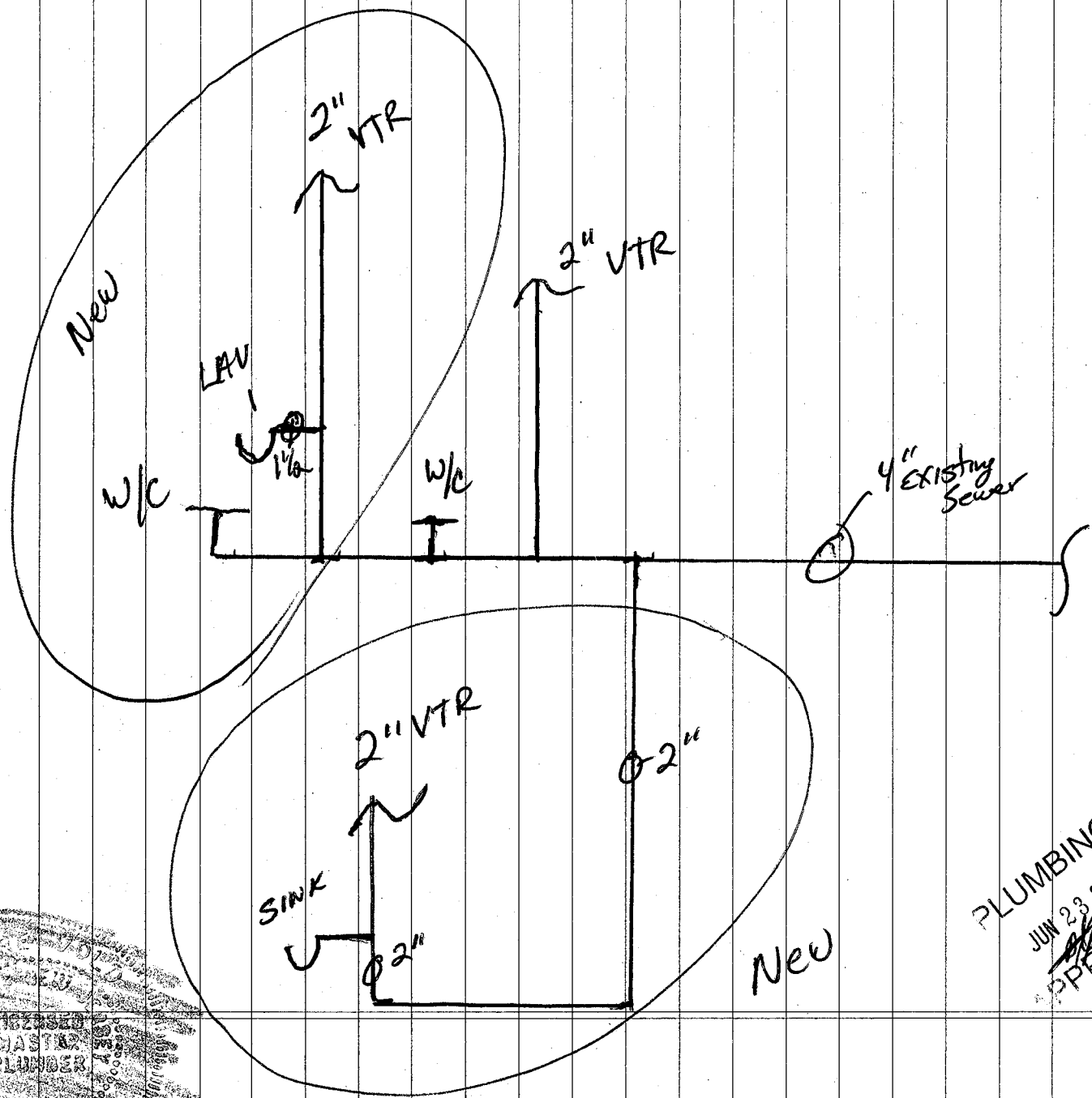
JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 6-23-15
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 9-3-15
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough			7-17-15	
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final	8-24-15		8-31-15	



DRAWN BY
ANDRE VOLD
Lic # 11079

PLUMBING
JUN 23 2015
APPROVED

LC Dance Studio

TOWNSHIP OF BRICK
DEPARTMENT OF INSPECTIONS

OCCUPANCY

OCCUPANT LOAD 29
LIVE LOAD _____ P. S. F.
FIRE GRADING _____ HOURS
USE GROUP B

8-24-15

TMV Valves under Lavs (2)

Single Lever Faucets (2)

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 6/29/15
Control # 15-2056
Date Issued
Permit #

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 Qualification Code

Work Site Location 1930 Rt 88 (Laurel Square) UNIT 18

Owner in Fee: Brixmor Laurel Square Owner LLC / LC Dance Studio

Tel. (908 510 5644 e-mail

Address 1930 Rt 88 UNIT 18 (street) Brick (municipality) 08724 (zip code)

Contractor: APPLEGATE ELEC SVCS LLC Tel. (732) 915-9541

Address 52 CRANBERRY DR e-mail
TINTON FALLS, NJ 07753

Contractor License No. 17656 Exp. Date 3/15

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS NEXT TO LESLIES POOLS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ $1000

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: ADAM APPLEGATE

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Dance Studio Remodel

QTY.	SIZE	ITEMS	FEE (Office Use Only)
2		Lighting Fixtures	
2		Receptacles	
2		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
6			
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
1	240V	KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[✓] Electric Plans Approved

Date 6/29/15 Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 6/29/15

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [✓] CA

Date: 8/25/15

Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough			7/24/15	JP
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			8/24/15	PS
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 11/09)

Attn: Richard Orlando

From: Luciano Catelli
908-510-5644
LC Dance Studio.

CINTAS FIRE PROTECTION VIP GUARANTEED

CINTAS FIRE PROTECTION
1705 ROUTE 46
UNIT B
LEDGEWOOD, NJ 07852
(973)347-3901 * (973)347-3905 fax
PERMIT #PD1276

Work Order : 114439 for Month :
Customer : 34930 Location : 00861
Terms : Route : 62 1/5 6
PO Number :

Date : 8/11/15 Time in :
Travel time: Time out :

Job Address:
LC Dance Studio
1930 RT #88
Brick NJ

Bill to:

Qty	Item	Description	Unit Price	Item Amount
1	LaBor73	Service Performed 8/11/15		
		-remove (6) sprinkler Heads -		
		-ADD (1) Head in Bathroom		
6		1" plugs thread		
1		1" pipe 10-6" thread		
1		155°F crome Pendent Head		
		System Back in Service		

Customer Signature: C.A.T.S. Date 8/11/15 Sub Total

Print Name: Tax

(MASTERCARD, VISA, DISCOVER & AMERICAN EXPRESS ACCEPTED FOR PAYMENT)
(Thank You For Your Business) Total

By signing this document, I hereby represent I have the authority to enter into this Agreement on behalf of my employer. The Customer's Authorized Representative, by his/her signature, acknowledges that all work has been completed and this work is subject to the Terms and Conditions indicated on the reverse hereof.

White: Bill Copy Yellow: File Copy Pink: Customer Copy TERMS NET 10 FIRE-INV-3PT

PERMIT UPDATE

Date Update Issued 8/19/15
Control # C-15-002924+A
Permit # 15-2056+A

IDENTIFICATION Block: 1149 Lot: 5 Qualifier
Work Site Location: 1930 ROUTE 88 LC DANCE STUDIO LLC, UNIT 18
Brick Township, NJ 08724
Owner in Fee CENTRO NP LAUREL SQ OWNER LLC
PO BOX 4900 SCOTTSDALE NJ 85261
Telephone:

Contractor RELIABLE BUILDING SERVICES
Address 1358 HOOPER AVE STE 218 TOMS RIVER NJ 08753
Telephone: (732) 408-5285
Lic. No. or Bldrs. Reg. No. 13VH06952100
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:
TENANT FIT UP - LC DANCE STUDIO ...UPDATE +A - SPRINKLER HEADS

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 $6000

David J. Newman Jr 8/5/15
Construction Official Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$0
Fire Protection	$110
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$1
CO Fee	
Other	$0
Total	$111
Check No.	
Cash 111	$0
Credit	$0
Collected By (3)	

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.

☐ 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.

6/27/15 spoke to Adam

CONSTRUCTION PERMIT

Date Issued 6/29/15
Control # C-15-002924
Permit # 15-2056

IDENTIFICATION Block: 1149 Lot: 5 Qualifier
Work Site Location: 1930 ROUTE 88 LC DANCE STUDIO LLC, UNIT 18
Brick Township, NJ 08724
Owner in Fee CENTRO NP LAUREL SQ OWNER LLC
PO BOX 4900 SCOTTSDALE NJ 85261
Telephone:

Contractor RELIABLE BUILDING SERVICES
Address 1358 HOOPER AVE STE 218 TOMS RIVER NJ 08753
Telephone: (732) 408-5285
Lic. No. or Bldrs. Reg. No. 13VH06952100
Federal Employee. No.

Is hereby granted permission to perform the following work:

- [x] BUILDING
- [x] PLUMBING
- [ ] LEAD HAZARD ABATEMENT
- [x] ELECTRICAL
- [ ] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
TENANT FIT UP - LC DANCE STUDIO

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 $7,500

Daniel J. Newman Jr
Construction Official

6/26/15
Date

PAYMENTS (Office Use Only)

Building	$225
Electrical	$110
Plumbing	$179
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$15
CO Fee	
Other	$0
Total	$529
Check No.	163
Cash	$0
Credit	$0
Collected By	

+50 579

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

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

06/29/15 1:28PM 00155812312
#2056
BUILDING $225.00
ELECTRIC $110.00
PLB $179.00
DCA $15.00
ZPA $50.00
CHECK $529.00
CHANGE $0.00

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.

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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.
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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.

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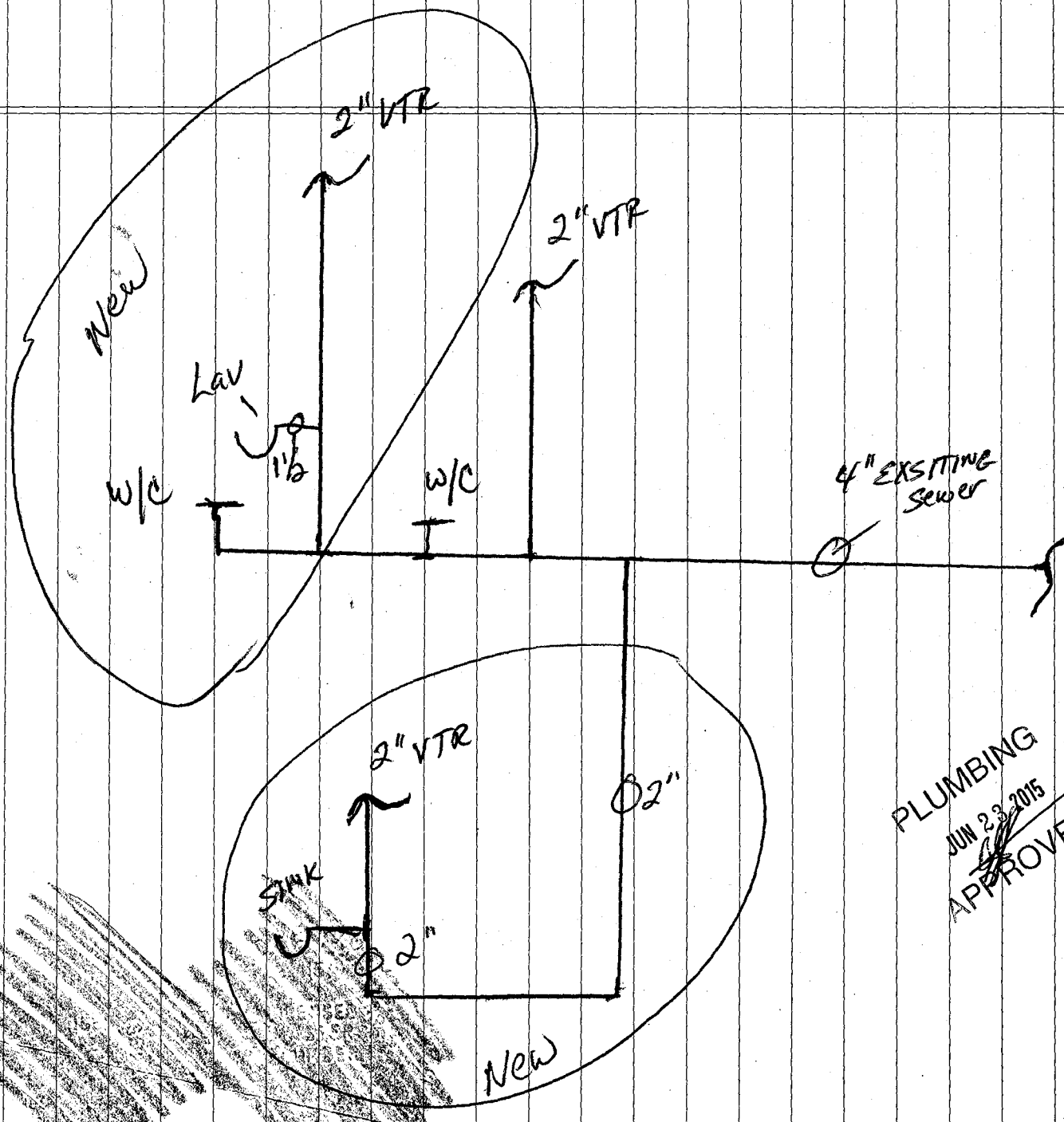
- [x] A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; 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".

- [x] A complete copy of released plans must be kept on the job site.

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



DRAWN BY
ANDRE VOLD
Lic #11079

PLUMBING
JUN 23 2015
APPROVED

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTI-COLORED 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

RELIABLE BUILDING SERVICES LLC DBA RJB CONTRA
Victor Pais, Solomon Adam Warren
1358 Hooper Ave
St #218
Toms River NJ 08753

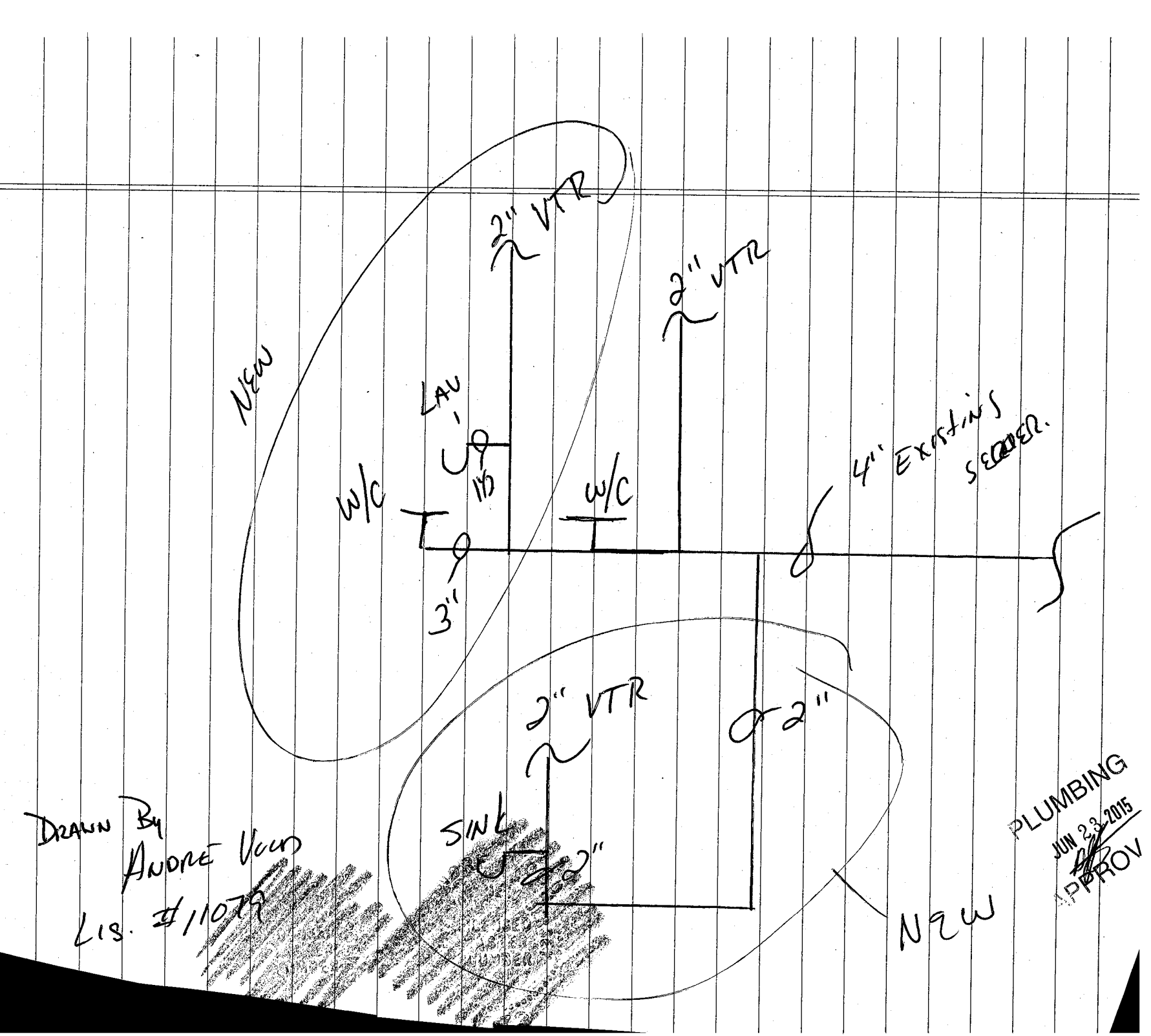
FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

03/02/2015 TO 03/31/2016
VALID

13VH06952100
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR



DRAWN BY
ANDRE VEUX
LIC. #11079

PLUMBING
JUN 23 2015
APPROV

RECEIVING CLERK LP
DATE REC'D 6/11/15

ZONING PERMIT APPLICATION

PERMIT # ZP-15-00766
DATE ISSUED 6/29/15

BLOCK: 1149 LOT: 5 QUALIFIER: ~ SITE ADDRESS: 1930 Rt88

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Brixmor-Lavie/SquareOneville/LCDance Studio.
   COMPLETE ADDRESS: 1930 Rt88, Brick, NJ 08724
   PHONE # 908-510-5644 EMAIL:
2. NAME OF APPLICANT: Reliable Building Services, LLC
   APPLICANT ADDRESS: 1358 Hooper Ave ste 218
   Toms River, NJ 08753
   PHONE # 732-408-5285 EMAIL: adam@rjbcontractingnj.com
3. RESPONSIBLE PERSON FOR WORK: Adam Warren
   PHONE# 732-4085285 FAX# 732 810 0355
4. SIGNATURE OF APPLICANT: [signature]

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $
OTHER: $
TOTAL: $

REQUIRED BY APPLICANT

RESIDENTIAL:
COMMERCIAL: ✓
EXISTING USE: Karate.
PROPOSED USE: Dance Studio

BOARD APPROVAL: ___ PB ___ ZB
RESOLUTION#:
APPROVAL DATE:

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)
*NEW BUILDING: *ADDITION *ALTERATION ✓ *PORCH *DECK

POOL: ABOVE GROUND IN GROUND FENCE: HEIGHT TYPE MATERIAL

HEIGHT: (*IF APPLICABLE)

OTHER

DESCRIPTION: Store Fit up

ZONING REVIEW:
DATE REVIEWED: 6-22-15 DATE DENIED: DATE APPROVED: 6-22-15 INTLS: ar

(SEE BACK PAGE)

OFFICE USE ONLY

ZONING REVIEW:

DATE REVIEWED: _____ DATE DENIED: _____ DATE APPROVED: _____ INTLS: _____

DATE:	COMMENTS:	INITIALS:

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1336

767

Date Issued:
Application Number: ZA-15-~~00744~~
Application Date: 06/19/2015
Project Number:
Permit Number: ZP-15-00766
Fee: $50

Zoning Permit

Worksite Location: **1930 ROUTE 88**
Brick Township, NJ

Block: **1149**
Lot: **5**
Qualifier:
Zone: **B-3**

Owner: **Brixmore Laurel Square Owner LLC/LC Dance Studio**
Address: **1930 Route 88 Unit #18**
Brick, NJ 08724

Applicant: **Reliable Bulding Services**
Address: **1358 Hooper Avenue**
Toms River, NJ 08753

Application Approved Date: 06/22/2015

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Commercial (Dance Studio)
Nonconforming Use is:

Work Description:
Tenant Fit-Up - Interior alterations to create a dance studio. Permitted use in the B-3 zone

Additional Zoning permit is required for additional work.

Upon review it was determined that the Zoning Permit:

☑ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Valid Nonconforming Use is established by
- ☐ Zoning Board of Adjustment
- ☐ Zoning Officer

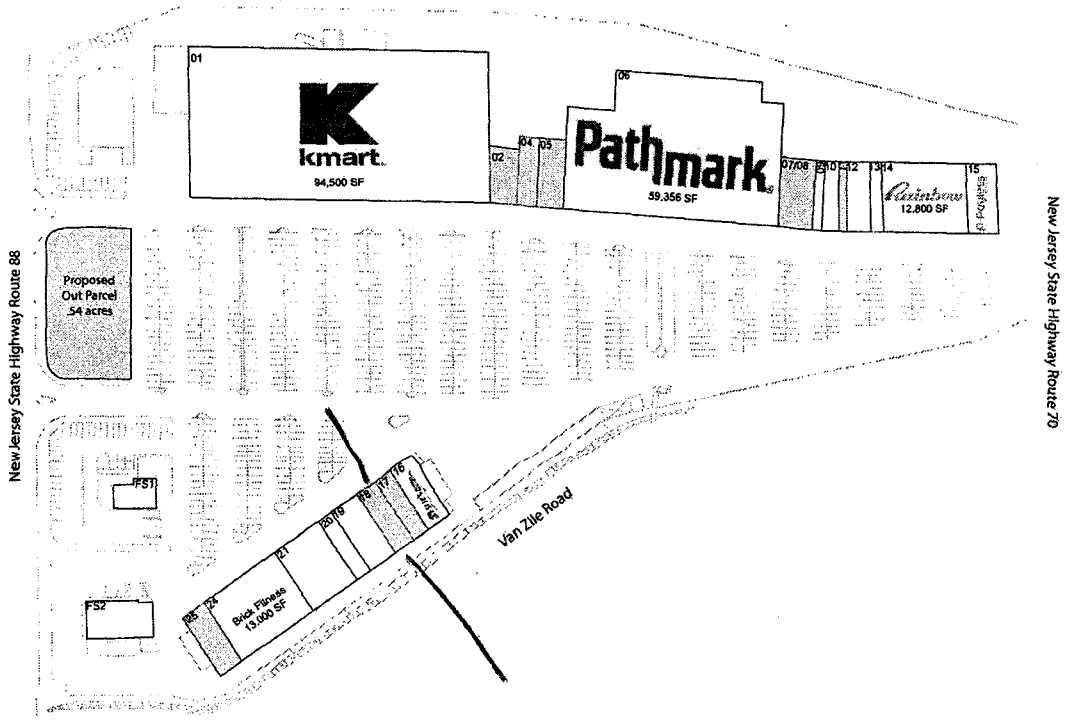
Christopher J. Romano, Office of Zoning — 06/22/2015 Date

Michael P. Fowler, Twp. Planner — 6/20/15 **Date**

New York-Northern New Jersey-Long Island, NY-NJ-PA

Laurel Square

1930 Route 88 | Brick, NJ 08724 40.07388661, -74.11828728



Center Size: 246,235 SF

1079

Available Space			
02	3,450 SF	11	1,300 SF
04	3,000 SF	17	2,700 SF
05	4,000 SF	18	3,300 SF
07/08	5,200 SF	25	4,000 SF

Zoning Review Approval

By: cw Tenant Fitup

Date: 6-22-15

Current Retailers

01	Kmart	94,500 SF
06	Pathmark	59,356 SF
09	Nail Salon	1,514 SF
10	The Scone Shop	2,240 SF
12	Photo Center	3,500 SF
13	Odyssey Hair Salon	1,600 SF
14	Rainbow	12,800 SF
15	Payless ShoeSource	4,500 SF
16	Leslie's Swimming Pool Supplie	4,000 SF
19	Cash Converters	4,600 SF
20	Image Sun Tanning	2,400 SF
21	Nick Catone's Mixed Martial Arts	8,000 SF
24	Brick Fitness	13,000 SF
FS1	The Provident Bank	2,275 SF
FS2	Fins, A Tropicali Restaurant	5,000 SF

Matthew Ryan
610.834.7641
matthew.ryan@brixmor.com
Brixmor.com

BRIXMOR

TITLE EXCEPTIONS

Fidelity National Title Insurance Company
File No. 10-7406-22580-N(22) Eff Date: May 26, 2010

9) Stream Encroachment Permit No 5525, Misc. Book 6 Page 161; Affects, but not plotable

10) Right of Way Agreement granted to J.C.P.&L. Co., Book 1060 Page 12; Affects but not plotable

11) Right of Way Agreement granted to J.C.P.&L. Co. and NJ Bell Telephone Co., Book 3279Page 745; Affects but not plotable.

12) Right of Way Agreement granted to J.C.P.&L. Co. and NJ Bell Telephone Co., Book 3279 Page 743, and Book 3428 Page 706; Affects but not plotable.

13) Grant of Easement to The Ocean County Sewage Authority, Book 3434 Page 589; Affects as shown.

14) Contract for the Granting of an Easement between 70 & 88 Associates and The Ocean County Sewage Authority, Book 3411 Page 75; Affects but not plotable.

15) Grant of Easement by 70 & 88 Associates to Brick Township municipal Utilities Authority, Book 4043 Page 878; Affects as shown.

16) Grant of Easement by The Mutual Life Insurance Co. of New York to The Brick Township Municipal Utilities Authority, Book 4043 Page 882; Affects as shown.

17) Easement and Right of WayAgreement to NJ Natural Gas Co., Book 4256 Page 961, and Book 4271 Page 993; Affects but not plotable.

18) Water and Sanitary Sewer Easement Agreement between New Plan Excel Realty Trust and Brick Township Municipal Utilities Authority, Book 5457 Page 275; Affects but not plotable.

19) Water Line Agreement between New Plan Excel Realty and Brick Township Municipal Utility Authority, Book 10299 Page 614; Affects as shown.

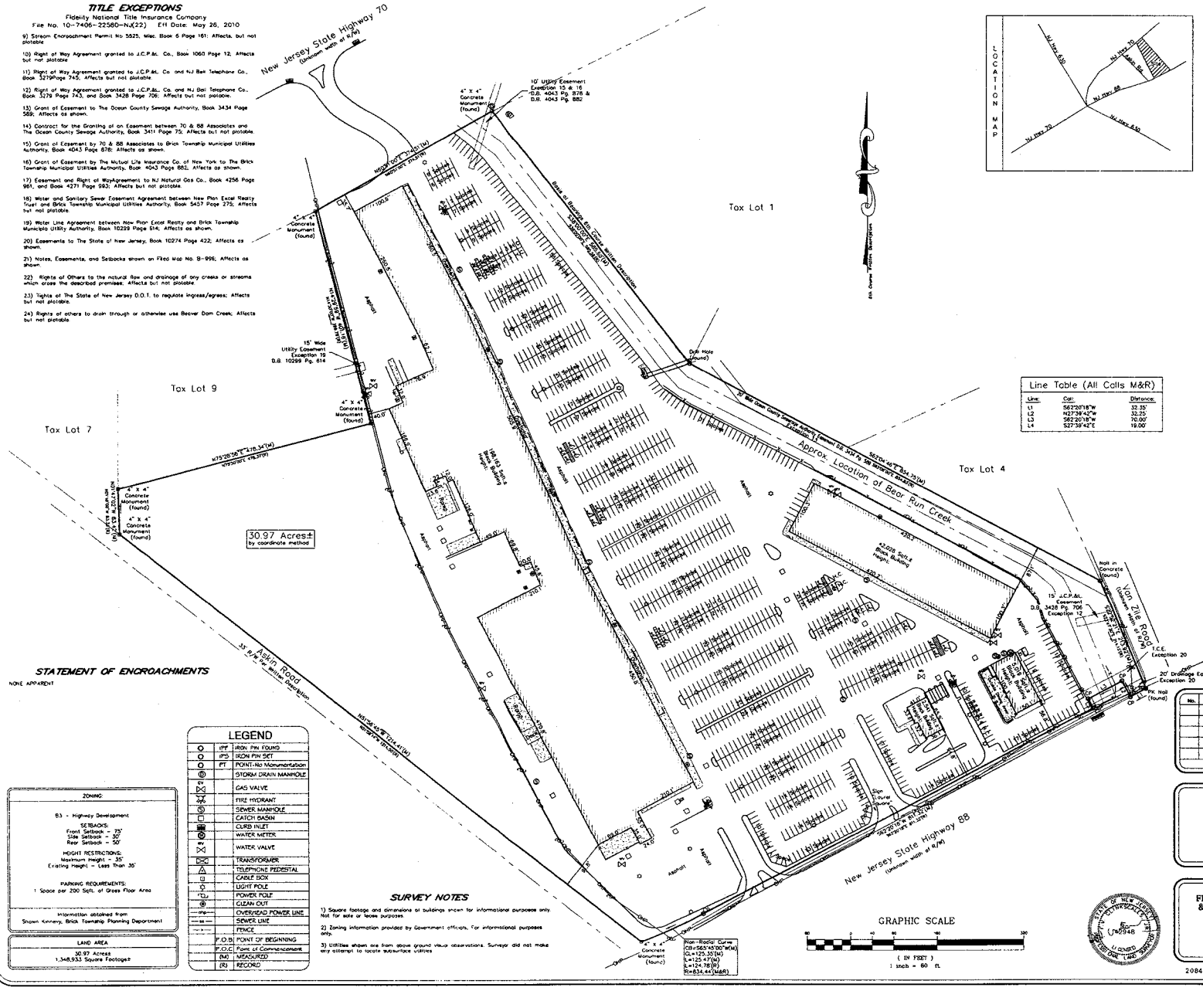
20) Easements to The State of New Jersey, Book 10274 Page 422; Affects as shown.

21) Notes, Easements, and Setbacks shown on Filed Map No. B-996; Affects as shown.

22) Rights of Others to the natural flow and drainage of any creeks or streams which cross the described premises. Affects but not plotable.

23) Tights of The State of New Jersey D.O.T. to regulate ingress/egress; Affects but not plotable.

24) Rights of others to drain through or otherwise use Beaver Dam Creek; Affects but not plotable



SURVEYOR'S CERTIFICATE

May 31, 2010

This survey is made for the benefit of:

(i) Centro NP LLC, and its successors and/or assigns, (ii) JPMorgan Chase Bank, N.A., its successors and/or assigns; (iii) Fidelity National Title Insurance Company; (iv) First American Title Insurance Company National Land Tenure Company, LLC; and their respective successors and/or assigns

I, F.V. Clinkscales, Jr., Professional Land Surveyor do hereby certify to the aforesaid parties, as of the date set forth above that I have made a careful survey of a tract of land described hereon:

1) This is to certify that this map or plat and the survey on which it is based were made in accordance with the "Minimum Standard Detail Requirements for ALTA/ACSM Land Title Surveys," jointly established and adopted by ALTA and NSPS in 2005, and includes Items 1, 2, 3, 4, 6, 7(a)(b)(c), 8, 9, 10 and 11(a)of Table A thereof. Pursuant to the Accuracy Standards as adopted by ALTA and NSPS and in effect on the date of this certification, undersigned further certifies that in my professional opinion, as a land surveyor registered in the State of New Jersey, the maximum Positional Accuracy of this survey does not exceed 0.5 feet.

2) The accompanying survey was made on the ground and correctly shows the location of all buildings, structures and other improvements situated on the above premises; there are no visible encroachments on the subject property or upon adjacent land abutting said property except as shown hereon and was made in accordance with laws and/or Minimum Standards of the State of New Jersey.

3) The property described hereon is the same as the property described in Fidelity National Title Ins. Co. File No. 10-7406-22580-N(22) with an effective date of May 26, 2010 and that all easements, covenants and restrictions referenced in said title commitment or apparent from a physical inspection of the site or otherwise known to me have been plotted hereon or otherwise noted as to their effect on the subject property.

4) Said described property is located within an area having a Zone Designation X by the Federal Emergency Management Agency (FEMA), on Flood Insurance Rate Map No. 0203 F, with a date of identification of Sept. 29, 2006, for Community No. 340259C, in Ocean County, State of New Jersey, which is the current Flood Insurance Rate Map for the community in which said premises is situated.

5) The Property has direct access to New Jersey State Hwy 70, and New Jersey State Highway 88, dedicated public streets or highways.

6) The total number of striped parking spaces on the subject property is 1129, including 28 designated handicap spaces.

F.V. Clinkscales, Jr.
Professional Land Surveyor, NJ 42948

Line Table (All Calls M&R)		
Line:	Car:	Distance:
L1	S62°20'18"W	32.35'
L2	N27°39'42"W	32.25'
L3	S62°20'18"W	70.00'
L4	S27°39'42"E	19.00'

LEGAL DESCRIPTION

ALL that certain lot, place or parcel of land, situate, lying and being in the City of Brick town, County of Ocean, State of New Jersey bounded and described as follows:
BEGINNING at a concrete monument found at the point of intersection of the northerly right of way line of New Jersey State Highway Route No. 88, 36.00 feet from the centerline thereof, with the easterly right-of-way line of Askin Road, (formerly Green Grove Road), 33 feet wide; and running thence
1. North 51 degrees 58 minutes 14 seconds West, along said easterly right-of-way line of Askin Road, a distance of 1214.50 feet to a concrete monument; thence
2. North 01 degrees 46 minutes 00 seconds West, a distance of 83.33 feet to a concrete monument; thence
3. North 75 degrees 30 minutes 00 seconds East, a distance of 478.37 feet to a point near a concrete monument; thence
4. North 14 degrees 30 minutes 00 seconds West, a distance of 399.78 feet to a concrete monument; thence
5. North 60 degrees 51 minutes 00 seconds East, a distance of 374.51 feet to a concrete monument; thence
6. South 38 degrees 00 minutes 00 seconds East, a distance of 565.58 feet to a point; thence
7. South 82 degrees 06 minutes 00 seconds East, a distance of 854.83 feet to a point in the westerly right-of-way line of Van Zile Road, 30.00 feet from the centerline thereof; thence
8. South 22 degrees 47 minutes 30 seconds East, along said westerly right-of-way line of Van Zile Road, a distance of 214.10 feet to its intersection with the northerly right-of-way line of New Jersey State Highway Route No. 88, 24.75 feet from the centerline thereof; thence
9. South 82 degrees 20 minutes 18 seconds West, along said northerly right-of-way line of New Jersey State Highway Route No. 88, a distance of 32.35 feet to an angle point therein; thence
10. North 77 degrees 39 minutes 42 seconds West along same, a distance of 32.25 feet to an angle point therein; thence
11. South 82 degrees 20 minutes 18 seconds West along same, a distance of 70.00 feet to an angle point therein; thence
12. South 27 degrees 39 minutes 42 seconds East along same, a distance of 19.00 feet to an angle point therein; thence
13. South 82 degrees 20 minutes 18 seconds West along same, a distance of 811.32 feet to a point of curvature; thence
14. Southwesterly along same, following a curve to the right having a radius of 834.44 feet, an arc distance of 124.78 feet to the point of BEGINNING.

STATEMENT OF ENCROACHMENTS

NONE APPARENT

SURVEY NOTES

1) Square footage and dimensions of buildings shown for informational purposes only. Not for sale or lease purposes.

2) Zoning information provided by Government officials. For informational purposes only.

3) Utilities shown are from above ground visual observations. Surveyor did not make any attempt to locate subsurface utilities

LEGEND

○	IPF	IRON PIN FOUND
○	IPS	IRON PIN SET
○	PT	POINT-No Monumentation
Ⓢ		STORM DRAIN MANHOLE
GV		GAS VALVE
FH		FIRE HYDRANT
Ⓢ		SEWER MANHOLE
□		CATCH BASIN
		CURB INLET
Ⓦ		WATER METER
WV		WATER VALVE
⋈		TRANSFORMER
△		TELEPHONE PEDESTAL
□		CABLE BOX
☼		LIGHT POLE
PP		POWER POLE
Ⓒ		CLEAN OUT
—ohe—		OVERHEAD POWER LINE
—ss—		SEWER LINE
—x—x—		FENCE
	P.O.B.	POINT OF BEGINNING
	P.O.C.	Point of Commencement
	(M)	MEASURED
	(R)	RECORD

ZONING:
B3 - Highway Development
SETBACKS: Front Setback = 75' Side Setback = 30' Rear Setback = 50'
HEIGHT RESTRICTIONS: Maximum Height = 35' Existing Height = Less Than 35'
PARKING REQUIREMENTS: 1 Space per 200 Sqft. of Gross Floor Area
Information obtained from Shawn Kinney, Brick Township Planning Department

LAND AREA
30.97 Acres± 1,348,933 Square Footage±

GRAPHIC SCALE

(IN FEET)
1 inch = 60 ft.

No.	REVISIONS	Date

COORDINATED BY:
SMITH-ROBERTS NATIONAL CORPORATION
100 NE 5th Street
OKLAHOMA CITY, OK 73104
800.411.2010
www.smith-roberts.com

ALTA/ACSM LAND TITLE SURVEY

Laurel Square Shopping Center
1930 New Jersey State Highway 88
Brick, Brick Township,
Ocean County, State of New Jersey

FREELAND - CLINKSCALES & ASSOCIATES, INC. of NC
*Engineers * Land Surveyors*
202 2nd AVE. EAST
HENDERSONVILLE, N.C. 28792
(828) 697-5333
(828) 697-9295 (fax)

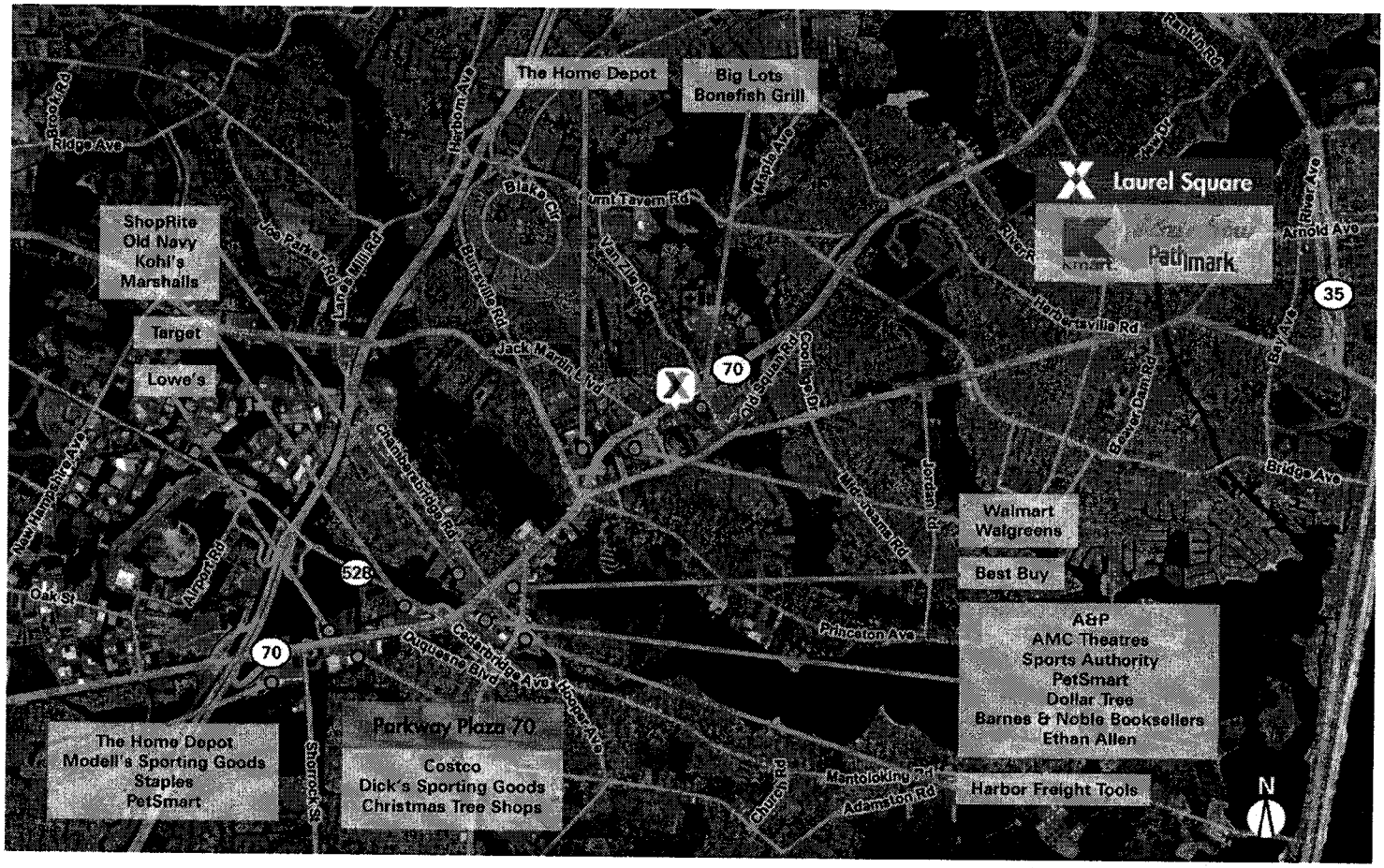
REF. PLAT BOOK	
REF. DEED BOOK	
TAX MAP	Block 1149 Tax Lots 5, 5.01, & 6
PARTY CHIEF	SCL
DRAWN	CMR
DATE	5/31/2010
DWG.NO.	H30113

2084-8545-Laurel Square - JPM 2-1079-Version 2a **Sheet No. 1 of 1**

New York-Northern New Jersey-Long Island, NY-NJ-PA

Laurel Square

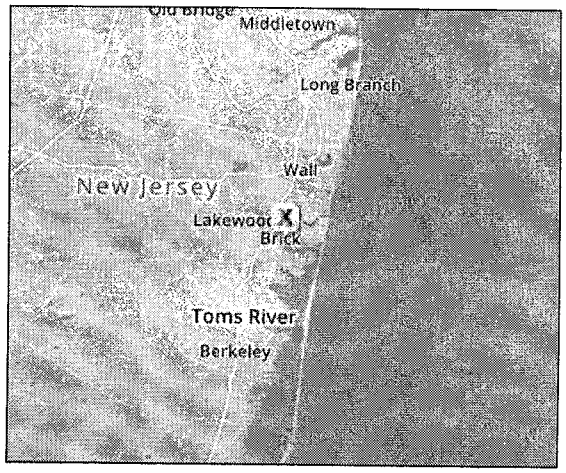
1930 Route 88 | Brick, NJ 08724 40.07388661, -74.11828728



Center Size: 246,235 SF

1079

	1 Mile	3 Mile	5 Mile
Population	9,531	81,683	175,417
Households	3,845	31,454	65,429
Average HH Income	83,023	86,777	87,163



Located in densely populated area of 82,000+ with average household income of $84,000+ within 3 miles

Convenient accessibility from Route 70 and Route 88

Neighborhood center dual-anchored by Pathmark and Kmart, drawing significant daily traffic

Matthew Ryan
610.834.7641
matthew.ryan@brixmor.com
Brixmor.com

BRIXMOR

1930 ROUTE 88, Brick, NJ 08724
Owner Name: CENTRO NP LAUREL SQ OWNER LLC
Block: 01149
Lot: 00005
Qualifier:
Property Class: 4A
Total Sq. Ft: 0
Last Sold Amount:
Last Deed Date:
Last Recorded Date:

TOWNSHIP OF BRICK

LIST OF EXISTING PLUMBING FIXTURES

BLOCK: 1149 LOT: 5

ADDRESS: 1930 Rt 88 UNIT #18, Brick, NJ 08724

OWNER: _____

X	WATER CLOSET (TOILET)
	URINAL/BIDET
	BATH TUB
X	LAVATORY (BATHROOM SINKS)
	SHOWER
	SINK (KITCHEN)
	DISHWASHER
	WASHING MACHINE
	HOSE BIBS (TOWNSHIP WATER ONLY)
X	MOP SINK

ONLY FILLOUT ABOVE IF YOU ARE ADDING PLUMBING TO YOUR ADDITION

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 1930 Rt 88

BLOCK: 1149 **LOT:** 5

CONTRACTOR: Reliable Building Services, LLC

CONTRACTOR'S ADDRESS: 1358 Hooper Ave ste. 218, Toms River, NJ 08753

Type of Construction(minor, new home): Store Fit up

Type of Debris (shingles, siding, wood, etc.): Dry wall, carpet, ceiling tiles

Party responsible for removal: Reliable Building Services, LLC

Dumpster Size: 30cyd

Destination of Debris: Ocean County Landfill

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

5/14/15
Date

Solomon Adam Warren
Print Name

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 1149 LOT: 5 ADDRESS: 1930 Route 88 Unit #18

IDENTIFICATION:

1. WORK SITE ADDRESS: 1930 Rt 88
2. NAME OF OWNER IN FEE: Brixmor Lacey Square Owner LLC / LC Dance Studio LLC

   ADDRESS: 1930 Rt 88 PHONE #: (908) 510-5644

   Brick, NJ 08724 FAX #: (__) _____
3. PRINCIPAL CONTRACTOR: Reliable Building Services, LLC

   ADDRESS: 1358 Hooper Ave Ste 218 PHONE #: (732) 408 5285

   Toms River, NJ 08753 FAX #: (732) 810 0355
4. ARCHITECT OR ENGINEER: _____

   ADDRESS: _____ PHONE: # (__) _____
5. RESPONSIBLE PERSON FOR WORK: [redacted] Adam Warren

   ADDRESS: 1358 Hooper Ave ste 218 Toms River

PHONE #: (732) 408 5285 FAX #: (732) 810-0355 E-MAIL: adam@rbcontractingsj.com

FEE SUMMARY:

APPLICATION FEE: $ _____

REVIEW FEE: $ _____

INSPECTION FEE: $ _____

OTHER _____: $ _____

BOND(S): $ _____

TOTAL: $ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☒ OTHER Store Fit up

LENGTH: _____ WIDTH: _____ HEIGHT: _____

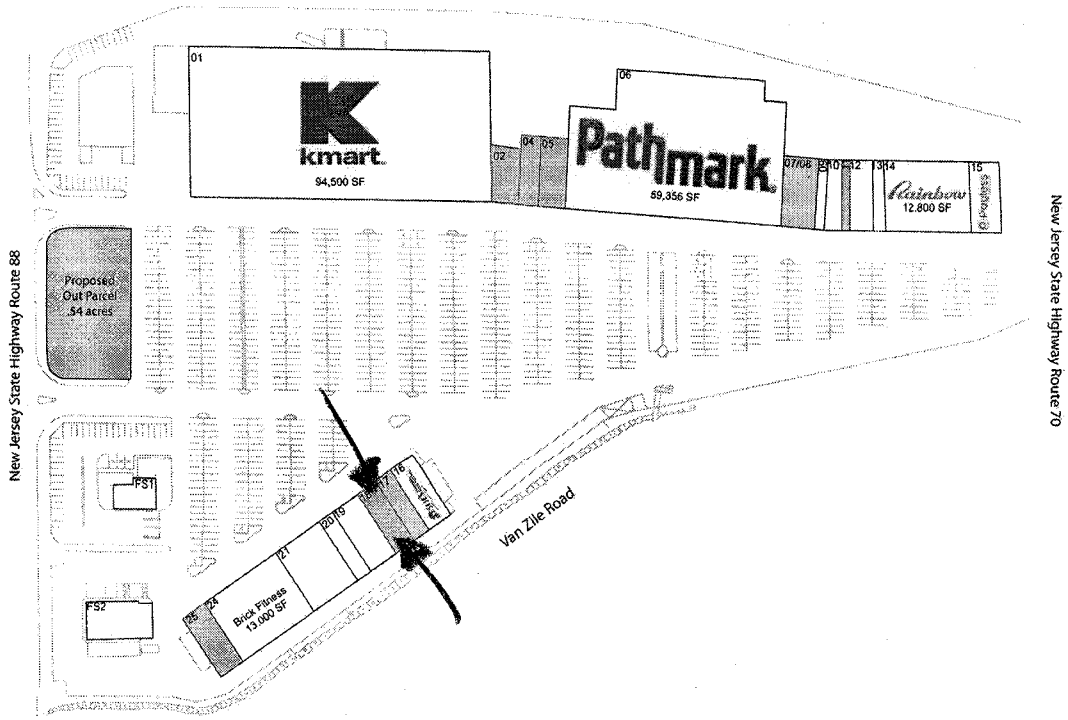
ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE REJECTED: _____ DATE APPROVED: _____ INITIALS: _____

New York-Northern New Jersey-Long Island, NY-NJ-PA

Laurel Square

1930 Route 88 | Brick, NJ 08724 40.07388661, -74.11828728



Center Size: 246,235 SF

1079

Available Space			
02	3,450 SF	11	1,300 SF
04	3,000 SF	17	2,700 SF
05	4,000 SF	18	3,300 SF
07/08	5,200 SF	25	4,000 SF

Current Retailers

01	Kmart	94,500 SF
06	Pathmark	59,356 SF
09	Nail Salon	1,514 SF
10	The Scone Shop	2,240 SF
12	Photo Center	3,500 SF
13	Odyssey Hair Salon	1,600 SF
14	Rainbow	12,800 SF
15	Payless ShoeSource	4,500 SF
16	Leslie's Swimming Pool Supplie	4,000 SF
19	Cash Converters	4,600 SF
20	Image Sun Tanning	2,400 SF
21	Nick Catone's Mixed Martial Arts	8,000 SF
24	Brick Fitness	13,000 SF
FS1	The Provident Bank	2,275 SF
FS2	Fins, A Tropicali Restaurant	5,000 SF

Zoning Review
Approval
By: Tenant fitout
Date: 6-22-15

Matthew Ryan
610.834.7641
matthew.ryan@brixmor.com
Brixmor.com

BRIXMOR

TOWNSHIP OF BRICK

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

Division of Engineering

Elissa C. Commins, PE, PP, CME, CPWM, CFM
Township Engineer & Floodplain Manger
Ecommins@twp.brick.nj.us

732-262-1040
Fax: 732-262-2941
www.twp.brick.nj.us

Date: 6/1/15

ENGINEERING
PLOT PLAN EXEMPT FORM
(ONLY IF NOT IN A FLOOD ZONE)

Block: 1149 Lot: 5

Property Address: 1930 Rt 88

I, Luciano Catelli of 1930 Rt 88 Brick NJ 08724
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Township Code, Chapter 245, Section 245-29.

Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.

2. **Proof that the property is not located in a Flood Hazard Area.**

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

FOR OFFICE USE ONLY

Approved on: _____ Signed: _____

Rejected on: _____ Signed: _____

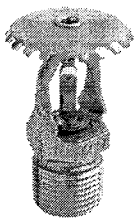
Comments:

311 ACCESS BRICK TOWNSHIP

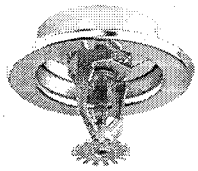
FireLock® V27, K5.6
Models V2703, V2707, V2704, V2708

Victaulic
40.10

Standard Spray
Upright, Pendent and Recessed Pendent
Standard and Quick Response


V2703/V2704
Upright


V2707/V2708
Pendent


V2707/V2708
Recessed Pendent

Approvals/Listings:

c UL us FM LPCB CE 0786

See Victaulic Publication 10.01 for more details.

Product Description:

These Model V27 standard spray sprinklers are designed to produce a hemispherical spray pattern for standard commercial applications. They are available with either standard or quick response bulbs. It is cast with a hex-shaped wrench boss to allow easy tightening from many angles, reducing assembly effort. This sprinkler is available in various temperature ratings (see chart on page 3) and finishes to meet many design requirements. The recessed pendent should be utilized with a Model V27 recessed escutcheon which provides up to 3/4"/19 mm of adjustments.

Coverage

For coverage area and sprinkler placement, refer to NFPA 13 or applicable standard.

Technical Specifications:

Models: V2703, V2704, V2707, V2708

Style: Pendent, Upright or Recessed Pendent

Nominal Orifice Size: ½"/13 mm

K Factor: 5.6 Imp./8.1 S.I.[1]

Nominal Thread Size: ½" NPT/15 mm

Max. Working Pressure:

- 175 psi/1200 kPa (FM)
- 250 psi/1725 kPa (UL)

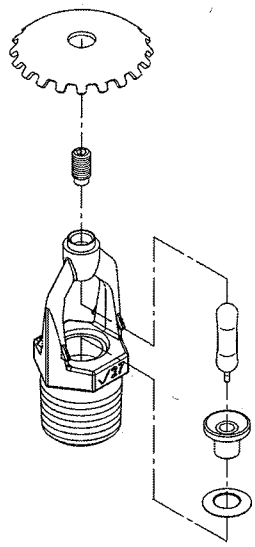
Factory Hydrostatic Test: 100% @ 500 psi/3450 kPa

Min. Operating Pressure:

- 7 psi/48 kPa
- 0.35 bar/5 psi (VdS for upright only)

Temperature Rating: See chart

[1] For K-Factor when pressure is measured in Bar, multiply S.I. units by 10.0.


Exaggerated for clarity

Job/Owner

System No.	1
Location	LC Dance Studio

Contractor

Submitted By	Cintas Fire Protection
Date	7/17/2015

Engineer

Spec Section	n/a
Paragraph	n/a
Approved	n/a
Date	n/a

Victaulic

Material Specifications:

Upright Deflector: Bronze per UNS C11000

Pendent Deflector: Bronze per UNS C51000

Bulb: Glass with glycerin solution

Bulb Nominal Diameter:

☑ Standard: 5.0 mm

☐ Quick Response: 3.0 mm

Load Screw: Bronze per UNS C65100

Pip Cap: Bronze per UNS C65100

Spring: Beryllium nickel

Seal: Teflon[2] tape

Frame: Die cast brass 65-30

Lodgement Spring: Stainless steel per UNS S30200

Accessories

Installation Wrench:

☑ Open End: V27

☐ Recessed: V27-2

Sprinkler Finishes:

☐ Plain Brass

☑ Chrome plated

☐ White painted[3]

☐ Black painted[3]

☐ Custom painted[3]

☐ Proprietary Nickel Teflon[2] coating[3]

☐ VC-250[4]

155, 200, 286 SR Only:

☐ Wax[3]

For cabinets and other accessories refer to separate sheet.

[2] Teflon is a registered trademark of Dupont Co.

[3] UL Listed for corrosion resistance.

[4] UL Listed and FM Approved for corrosion resistance.

Approvals/Listings:

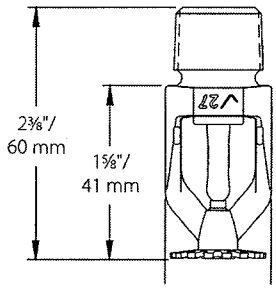
APPROVALS/LISTINGS	Model					
	V2703	V2707	V2707	V2704	V2708	V2708 [7]
Orifice Size (inches)	1/2"	1/2"	1/2"	1/2"	1/2"	1/2"
Orifice Size (mm)	13	13	13	13	13	13
Nominal K Factor Imperial	5.6	5.6	5.6	5.6	5.6	5.6
Nominal K Factor S.I.[5]	8.1	8.1	8.1	8.1	8.1	8.1
Response	Standard	Standard	Standard	Quick	Quick	Quick
Deflector Type	Upright	Pendent	Recessed Pendent	Upright	Pendent	Recessed Pendent
Approved Temperature Ratings	F°/C°					
cULus	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C
FM	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C
NYC/MEA 62-99-E	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C
CSFM 7690-0531:112	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C
LPCB	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	None	None	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C	None	None
VNIIPO	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C
CCC	ZSTZ 155°F/68°C 200°F/93°C	ZSTX 155°F/68°C 200°F/93°C	None	K-ZSTZ 155°F/68°C 200°F/93°C	K-ZSTZ 155°F/68°C 200°F/93°C	None
VdS	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	None	None	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	None	None
CE	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C 360°F/182°C	None	None	135°F/57°C 155°F/68°C 175°F/79°C 200°F/93°C 286°F/141°C	None	None

[5] For K Factor when pressure is measured in Bar, multiply S.I. units by 10.0

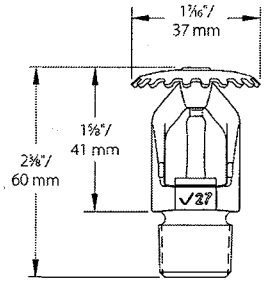
[7] FM Approved with 1/2" adjustment escutcheon only - quick response

Note: Listings and Approvals as of printing. All are approved open.

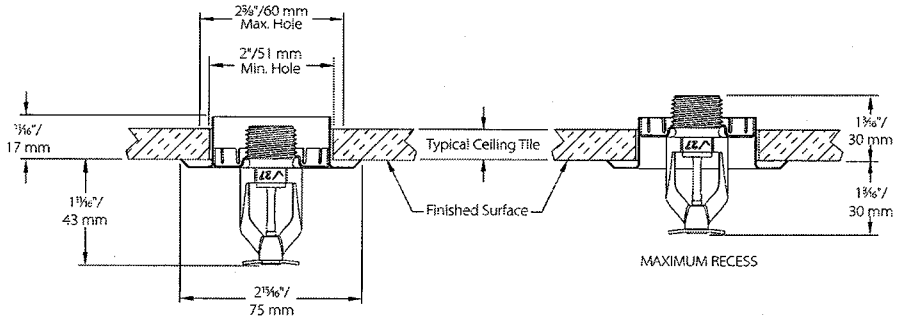
Dimensions:



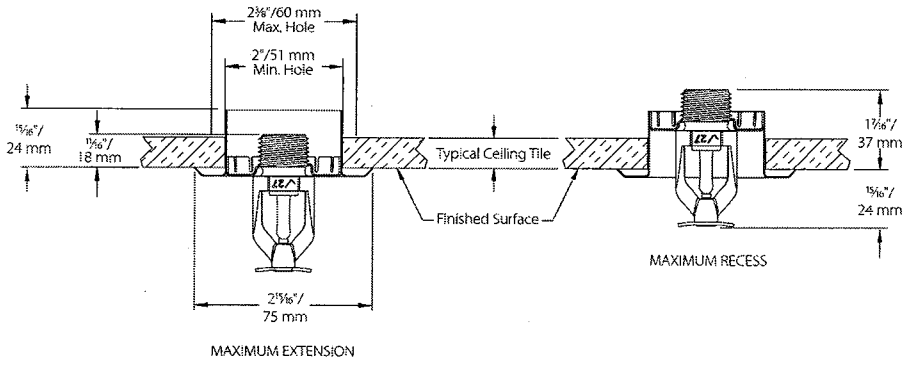
Standard Pendent –
V2707, V2708



Standard Upright –
V2703, V2704



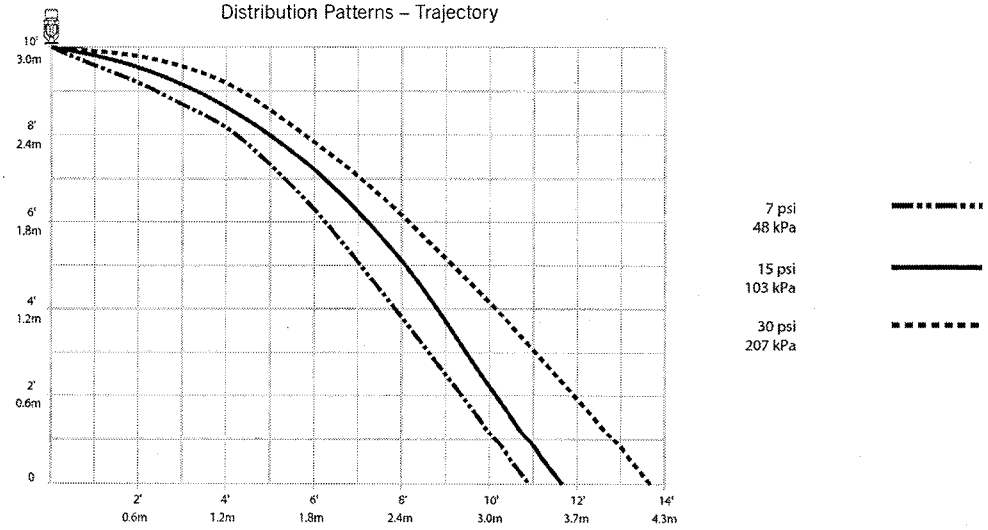
½" Adjustment Recessed – V2707, V2708 (drawing not to scale)



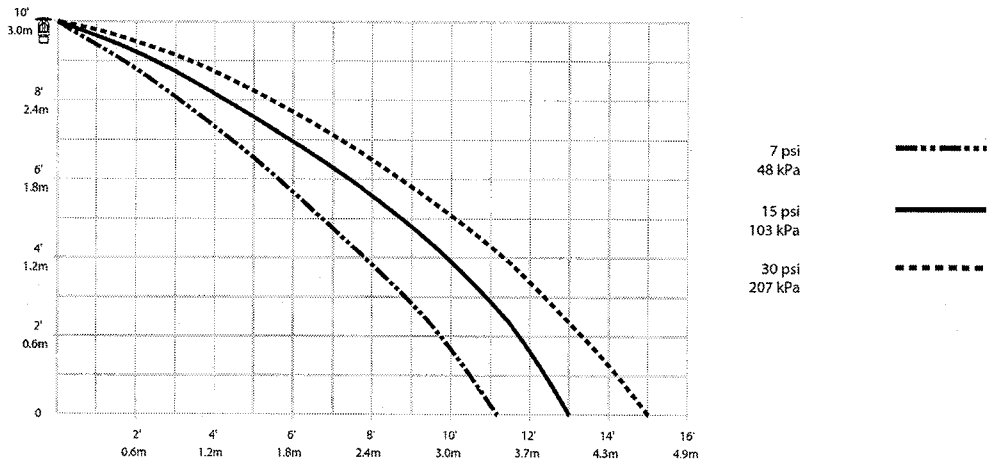
¾" Adjustment Recessed – V2707, V2708 (drawing not to scale)

Distribution Patterns:

Models V2707, V2708
K5.6 Standard Pendent and Recessed Pendent
Distribution Patterns – Trajectory



Models V2703, V2704
K5.6 Standard Upright
Distribution Patterns – Trajectory



NOTES:

A. Data shown is approximate and can vary due to differences in installation.

B. These graphs illustrate approximate trajectories, floor-wetting, and wall-wetting patterns for these specific Victaulic FireLock Automatic Sprinklers. They are provided as information for guidance in avoiding obstructions to sprinklers and should not be used as minimum sprinkler spacing rules for installation. **Refer to the appropriate NFPA National Fire Code or the Authority Having Jurisdiction for specific information regarding obstructions, spacing limitations and area of coverage requirements.** Failure to follow these guidelines could adversely affect the performance of the sprinkler and will void all Listings, Approvals and Warranties.

C. All patterns are symmetrical to the centerline of the waterway.

Ratings:

All glass bulbs are rated for temperatures from -67°F (-55°C) to those shown in the table below.

Sprinkler Temperature Classification	Victaulic Part Identification	Temperature – °F/°C		Glass Bulb Color
		Nominal Temperature Rating	Maximum Ambient Temperature Allowed	
Ordinary	A	135°F/57°C	100°F/38°C	Orange
Ordinary	C	155°F/68°C	100°F/38°C	Red
Intermediate	E	175°F/79°C	150°F/65°C	Yellow
Intermediate	F	200°F/93°C	150°F/65°C	Green
High	J	286°F/141°C	225°F [8]/107°C	Blue
Extra High [7]	K	360°F/182°C	300°F/149°C	Purple
–	M	Open	–	No Bulb

[7] Standard response only.

[8] 150/65 if wax coated.

Available Wrenches:

	V27-2 Recessed	V27 Open End
V2707, V2708 Pendent	✓	✓
V2707, V2708 Recessed Pendent	✓	–
V2703, V2704 Upright	–	✓

⚠ WARNING

- **Always read and understand installation, care, and maintenance instructions, supplied with each box of sprinklers, before proceeding with installation of any sprinklers.**
- **Always wear safety glasses and foot protection.**
- **Depressurize and drain the piping system before attempting to install, remove, or adjust any Victaulic piping products.**
- **Installation rules, especially those governing obstruction, must be strictly followed.**
- **Painting, plating, or any re-coating of sprinklers (other than that supplied by Victaulic) is not allowed.**

Failure to follow these instructions could result in serious personal injury and/or property damage.

The owner is responsible for maintaining the fire protection system and devices in proper operating condition. For minimum maintenance and inspection requirements, refer to the current National Fire Protection Association pamphlet that describes care and maintenance of sprinkler systems. In addition, the authority having jurisdiction may have additional maintenance, testing, and inspection requirements that must be followed.

If you need additional copies of this publication, or if you have any questions about the safe installation of this product, contact Victaulic World Headquarters: P.O. Box 31, Easton, Pennsylvania 18044-0031 USA, Telephone: 001-610-559-3300.

Installation
Reference should always be made to the I-40 Victaulic FireLock Automatic Sprinklers Installation and Maintenance Sheet for the product you are installing. This installation sheet is included with each shipment of Victaulic products for complete installation and assembly data, and is available in PDF format on our website at victaulic.com.

Warranty
Refer to the Warranty section of the current Price List or contact Victaulic for details.

Note
This product shall be manufactured by Victaulic or to Victaulic specifications. All products to be installed in accordance with current Victaulic installation/assembly instructions. Victaulic reserves the right to change product specifications, designs and standard equipment without notice and without incurring obligations.

Trademarks
Victaulic is a registered trademark of Victaulic Company.

