

BLOCK

1149

LOT

5

QUALIFICATION CODE

ADDRESS (SITE)

1930 RT 88

PERMIT NO.

BRICK NJ 08742
10-1510

CONSTRUCTION PERMIT APPLICATION

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

C10-001797

I. IDENTIFICATION

1. Proposed Work Site at: BRICK FITNESS FOR WOMEN

2. Name of Owner in Fee: BRICK FITNESS FOR WOMEN

Tel. (732) 206-0800 e-mail

Address 1930 RT 88 BRICK NJ 08742

3. Ownership in Fee: Public Private municipality zip code

4. Principal Contractor: GENESIS ELECTRIC Tel. (732) 245-7255

Address 1260 M 220th AVE e-mail

BEACKWOOD NJ

License No. OR, if new home, Builder Reg. No. 9841 Exp. Date

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

Federal Emp. ID No. 223467491 FAX: ()

5. Architect or Engineer Contact

Address e-mail

Tel. () FAX: ()

6. Responsible Person in Charge once Work has Begun

Tel. () FAX: ()

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical	\$	50	
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	\$	50	

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)

- ☐ Building
☐ Electrical
☐ Plumbing
☐ Fire Protection
☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
	10/12	6/1/10		6/3/10	9			

TOTAL COST

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

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.

☐ Check if contractor.

Agent Name _____

Address _____

Telephone (_____) _____

Signature _____

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued _____
Control Number C-10-001797
Permit Number 10-1510
Permit Issue Date 06/15/2010
Certificate Number 10-1510

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1930 ROUTE 88 Brick Township, NJ Block: 1149 Lot: 5 Qual: _____
Owner in Fee: SUPER INTERMEDIATECO LLC%E PROP TAX
Owner Address: PO BOX 4900 - DEPT 124 SCOTTSDALE AZ 85261
Telephone: (732) 206-0800
Contractor: GENESIS ELECTRIC
Address: 1200 MIZZEN AVE BEACHWOOD NJ
Telephone: (732) 286-1586 Fax: _____
License Number or Builders Registration Number: 9841 Federal Emp. Number: 22-3467491

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: POOL BONDING - COMMERCIAL ONLY

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: 08/05/2010

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

Page 1



CONSTRUCTION PERMIT

Date Issued 06/15/10
Control # C-10-001797
Permit # 10-1510

IDENTIFICATION Block: 1149 Lot: 5 Qualifier _____
Work Site Location: 1930 ROUTE 88 Brick Township, NJ Contractor: GENESIS ELECTRIC
Address: 1200 MIZZEN AVE BEACHWOOD NJ
Owner in Fee: SUPER INTERMEDIATE CO LLC % E PROP TAX
PO BOX 4900 - DEPT 124 SCOTTSDALE AZ Telephone: (732) 286-1586
85261 Lic. No. or Bldrs. Reg. No. 9841
Telephone: (732) 206-0800 Federal Employee No. 22-3467491

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:

POOL BONDING - COMMERCIAL ONLY

Note: If construction 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 \$ 1

[Signature]
Construction Official

6-8-10
Date

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$50
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$50
Check No.	
Cash	\$0
Credit	\$0
Collected By	

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:

- 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.
- Foundations and all walls up to grade level prior to back filling.
- 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.
- Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

06/15/10 12:27PM 00155848736
XX06 SERV.006
ELECTRIC \$50.00
CHECK \$50.00

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:

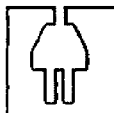
☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment;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



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

10-1510
06115110

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 BRICIC N.J. 08742

Owner in Fee
Address 1930 RT 88 BRICIC N.J. 08742

Tel (732) 206-0800
Contractor GENESIS ELECTRIC
Address 1260 M132 RD NJ
BRICIC 08742
Tel (732) 2437255 FAX (732) 3447112
Contractor License No. 9841
Federal Emp. No. 223467491

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial		
☒ No Plans Required <u>4/10</u>			Type:	Failure	Failure	Approval	Initial
Joint Plan Review Required:			Rough				
☐ Building ☐ Plumbing			Barrier-Free				
☐ Fire ☐ Elevator			Trench				
☐ Elec. Plans Approved			Temp. Serv.				
Date: _____			Constr. Serv.				
Approved by: _____			TCO				
			Other				
			Service				
			Final				
			Barrier-Free				
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued				
☐ CO ☐ CCO ☐ CA			Final Cut-in-Card Date Issued				
Date: _____			Annual Pool Inspection				
Approved by: _____			Date of Grounding and Bonding				
			Certification				

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's Signature/Contractor's Seal and Signature

☐ Licensed Elec. Contractor ☐ Certified Landscape Irrigation Contr ☐ Exempt Applicant
D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

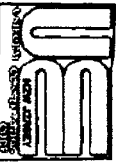
Lighting Fixtures
Receptacles
Switches
Detectors
Light Poles
Motors—Fract. HP
Emergency & Exit Lights
Communications Points
Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights
Storable Pool/Spa/Hot Tub
KW Elec. Range/Receptacle
KW Oven/Surface Unit
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
Pool Rem. 10/10/10

FEE: (Office Use Only)

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



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 1194 Lot 5 Qualification Code 1930 RT88 BRIC N.S. 08742

Owner in Fee Address 1930 RT 88 BRIC N.S. 08742

Tel (732) 206-0800

Contractor CEMEXIS ELECTRIC

Address 1200 N. 132nd Ave

Tel (732) 3457355 FAX (732) 3457112

Contractor License No. 9841

Federal Emp. No. 223467491

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work \$

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
☒ No Plans Required	<u>6/4/10</u>	<u>48</u>	Type:	Failure	Failure	Approval	Initial
Joint Plan Review Required:			Rough				
☐ Building	☐ Plumbing		Barrier-Free				
☐ Fire	☐ Elevator		Trench				
☐ Elec. Plans Approved			Temp. Serv.				
Date: <u> </u>			Constr. Serv.				
Approved by: <u> </u>			TCO				
			Other				
			Service				
			Final				
			Barrier-Free				
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued				
☐ CO	☐ CCO	☐ CA	Final Cut-in-Card Date Issued				
Date: <u> </u>			Annual Pool Inspection				
Approved by: <u> </u>			Date of Grounding and Bonding				
			Certification				

U.C.C. F120 (rev. 07/03) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

Date Received 10-1510
Control # 06115110
Date Issued
Permit #

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's Signature/Contractor's Seal and Signature

☐ Licensed Elec. Contractor ☐ Licensed Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range/Receptacle	
KW Oven/Surface Unit	
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 1/4 HP	
KW Transformer/Generator	
AMP Service	
AMP Subpanels	
AMP Motor Control Center	
KW Elec. Sign/Outline Light	
Pool Permit, w/Spa, Hot Tub	

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



Certified Pool / Spa Operator®

Achievement for

Frank B. Malpeta

as an Operator of Aquatic Facilities

CPO® Registration No. 08-248099, is hereby Certified and Registered
by the

NATIONAL SWIMMING POOL FOUNDATION

3/15/09

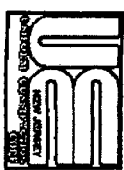
DATE CERTIFIED



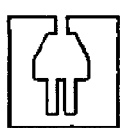
Trevor A. Sherwood
INSTRUCTOR

Thomas M. Lachocki
C.E.O.

K mads



ELECTRICAL SUBCODE TECHNICAL SECTION



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 1930 RT88 BRICL NJ-08742

Work Site Location 1930 RT88 BRICL NJ-08742

Owner in Fee Farmers for a Plan

Address 1930 RT 88 BRICL NJ-08742

Tel (732) 206-0800

Contractor CEWES ELECTRIC

Address 1200 M12249 AVE

BEACHTOWN NJ

Tel (732) 2457255 FAX (732) 3437112

Contractor License No. 9841

Federal Emp. No. 223467491

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work \$

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☒ No Plans Required	<u>4/10</u>	<u>AP</u>	Type: <u> </u>	Failure	Failure
Joint Plan Review Required:			Rough		
☐ Building	☐ Plumbing		Barrier-Free		
☐ Fire	☐ Elevator		Trench		
☐ Elec. Plans Approved			Temp. Serv.		
Date: <u> </u>			Constr. Serv.		
Approved by: <u> </u>			TCO		
			Other		
			Service		
			Final		
			Barrier-Free		
SUBCODE APPROVAL			Temp. Cut-In-Card Date Issued		
☐ CO ☐ CCO ☐ CA			Final Cut-In-Card Date Issued		
Date: <u>8-5-10</u>			Annual Pool Inspection	<u>6-2-10</u>	<u>7-29-10</u>
Approved by: <u> </u>			Date of Grounding and Bonding		
			Certification		

U.C.C. F120 (rev. 07/03) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

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's Signature/Contractor's Seal and Signature

☐ Licensed Elec. Contractor ☐ Certif'd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY SIZE ITEMS

- Lighting Fixtures
- Receptacles
- Switches
- Detectors
- Light Poles
- Motors—Fract. HP
- Emergency & Exit Lights
- Communications Points
- Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

- Pool Permit/with UW Lights
- Storage Pool/Spa/Hot Tub
- KW Elec. Range/Receptacle
- KW Oven/Surface Unit
- 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
- Pool Bands Installation

FEE (Office Use Only)

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

TOWNSHIP OF BRICK

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

Stephen C. Acropolis, Mayor

Township Council:

Anthony Matthews – President
Dan Toth – Vice President
Domenick Brando
Brian DeLuca
Joseph Sangiovanni
Ruthanne Scaturro
Michael A. Thulen, Sr.



Department of Community Development & Land Use

James A. Priolo, Director
Michael P. Fowler, Deputy Director

732-262-1027

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

July 7, 2010

Super Intermediate Co, LLC
PO Box 499, Dept 124
Scottsdale, AR 85261

RE: Brick Fitness for Women
1930 Route 88, Brick, NJ 08724

Dear Sir/Madam:

Please be advised New Jersey Administrative Code (NJAC) 5:23-2.23(l) requires that Equipment which has been determined by the New Jersey Department of Community Affairs to create a significant potential hazard to public health and safety, **such as a swimming pool**, shall periodically be reinspected or tested in accordance with the provisions of the regulations prior to the expiration of a certificate of compliance and any violation shall be corrected before a new certificate may be issued. **No device shall continue in operation unless a valid certificate of compliance has been reissued.**

Genesis Electric has applied for a permit and scheduled the reinspection that would be necessary to issue a new certificate of compliance for your pool. However on June 24, 2010 the inspector was refused access to inspect your property by a member of your staff. This is a violation of NJAC 5:23-2.18. The reinspection must be rescheduled at the earliest possible time. Failure to provide access at that time will subject you to a violation with a penalty of up to \$250 per occurrence for failing to allow access for inspection.



In accordance with NJAC 5:23-2.23(l) **the swimming pool should not be used** until a certificate of compliance has been issued. Use of the swimming pool without a new certificate issued subjects you to penalties of up to \$500 per occurrence.

Sincerely,

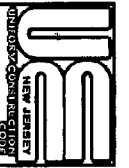
A handwritten signature in black ink, appearing to read "Daniel F. Newman Jr.", written in a cursive style.

Daniel F. Newman, Jr.

Construction Official

DFN/b

c: Genesis Electric, 1260 Mizzen Avenue, Beachwood, NJ



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 1149 Qualification Code 5

Work Site Location 1930 RT 88 BRICK N.J. 08724 BRICK
FITCHES FOR W004570-ANNUAL POOL BONDING

Owner in Fee: NEW PHAN CITY

Tel: (215) 708-3582 e-mail PHIL.AOEL@PHIA.PA.19149

Address 2311 COTTMAN AVE PHILADELPHIA PA 19149

Contractor: GENESIS ELECTRIC Tel: (215) 2457255
Address 1000 HIZZEMANNE e-mail GENELEC@AOL

Contractor License No. 7841 Exp. Date 03/09

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

Federal Emp. ID No. [REDACTED] FAX: (732) 3497112

B. ELECTRICAL CHARACTERISTICS

Use Group Present [] Proposed []

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

Building Occupied as [] Utility Co. []

Est. Cost of Elec. Work \$ 50.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[] Partial - Underslab Utilities Approved

Date: [] Approved by: []

[] Electric Plans Approved

Date: [] Approved by: []

Joint Plan Review Required:

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

SUBCODE APPROVAL FOR PERMIT

Date: [] Approved by: []

SUBCODE APPROVAL FOR CERTIFICATE

[] CO [] CCO [] CA

Date: []

Approved by: []

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Date Received 5/8/08
Control # 08-1263
Date Issued
Permit #

SIZE

ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UV Lights

Storable Pool/Spa/Hot Tub

KW Elec. Range/Receptacle

KW Oven/Surface Unit

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

Pool Bonding

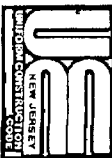
Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$

FEE (Office Use Only)



ELECTRICAL SUBCODE TECHNICAL SECTION



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 1930 RT 88 BRICK NJ 08744
 Work Site Location ANNA POOL BOODING
 Owner in Fee: BRICK FITNESS FOR WOMEN
 Tel. (932) 206-0800 e-mail _____

Address _____
 Contractor: CELESTIS ELECTRIC Tel. (732) 2467255
 Address 1200 MILLER AVE e-mail CELESTIS@AOL
BEACHWOOD NJ
 Contractor License No. 5841 Exp. Date 3/12

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

Federal Emp. ID No. 223467451 FAX: (____) _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
 Building Occupied as _____ Utility Co. _____
 Est. Cost of Elec. Work \$ 300

JOB SUMMARY (Office Use Only)		INSPECTIONS				
PLAN REVIEW		Type:	Failure	Failure	Approval	Initial
<u>24</u> No Plans Required <u>5-7-9</u> <u>AS</u>						
☐ Partial - Underslab Utilities Approved		Rough				
Date: _____ Approved by: _____		Barrier-Free				
☐ Electric Plans Approved		Trench				
Date: _____ Approved by: _____		Temp. Serv.				
☐ Joint Plan Review Required:		Constr. Serv.				
☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.		TCO				
☐ Other _____		Service				
SUBCODE APPROVAL FOR PERMIT		Final				
Date: _____		Barrier-Free				
Approved by: _____						
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued				
☐ CO ☐ CCO ☐ CA		Final Cut-in-Card Date Issued				
Date: _____		Annual Pool Inspection				
Approved by: _____		Date of Grounding and Bonding				
		Certification				

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's Signature/Contractor's Seal and Signature

☒ Licensed Elec. Contractor ☐ Certified Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

Date Received _____
 Control # _____
 Date Issued _____
 Permit # _____

09-0994
 5/11/09

QTY.	SIZE	ITEMS	DESCRIPTION OF WORK
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	

Lighting Fixtures
 Receptacles
 Switches
 Detectors
 Light Poles
 Motors—Fract. HP
 Emergency & Exit Lights
 Communications Points
 Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights
 Storable Pool/Spa/Hot Tub
 KW Elec. Range/Receptacle
 KW Oven/Surface Unit
 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
POOL - POOL
BEACHWOOD NJ

FEE (Office Use Only)

COMMERCIAL

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

BRICK FITNESS FOR WOMEN INC
BRICK TWP

Date	Type	Reference
05/27/2010	Bill	

Original Amt.
50.00

5/27/2010	
Balance Due	Discount
50.00	
Check Amount	
50.00	

5886

Payment
50.00
50.00

SHORE COMMUNITY B

50.00