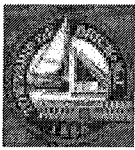


Application Completes: Sections I, II, III (optional), IV, VI, and VII

LAUREL SQ ANNEX BLDG.

- U.C.C. F100-1 (rev. 3/96)



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/25/2008
Control Number _____
Permit Number 02-1728
Permit Issue Date 05/20/2002
Certificate Number 02-1728

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: ROUTE 88 POOL BONDING, NJ Block: 1149 Lot: 5 Qual: _____
Owner in Fee: NEW PLAN REALTY TRUST
Owner Address: PO BOX 966 NEW YORK NJ 10108-
Telephone: 212/869-3000
Contractor: NEW PLAN REALTY TRUST
Address: PO BOX 966 NEW YORK NJ 10108-
Telephone: 212/869-3000 Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____
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: _____

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: _____



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION L'AMREL S& ANNEX BLDG.
1. Proposed Work Site at: RT 88, GARCK, N.J. 08723
2. Name of Owner in Fee: NEW PLUM REALTY TRUST Tel: (212) 869-3000
Address: P.O. Box 966, NEW YORK, N.Y. 10108
3. Ownership in Fee: Public ☒ Private ☒
4. Principal Contractor: GARCK FITNESS FOR WOMEN, INC. Tel: (732) 206-0800
Address: L'AMREL S& SHIRAZI CT, RT 88, GARCK, N.J. 08723
License No. OR, if new home, Builder Reg. No. Exp. Date
Federal Employee No. 22-3069445 FAX: (732) 206-8954
5. Architect or Engineer: M/A - Paul Grounding Inc. Tel: ()
Address:
6. Responsible Person in Charge of Work: LOUISE VERDE, PECCATORE
Tel: (732) 206-0800 FAX: (732) 206-8954

II. PROPOSED WORK
1. ☐ Minor Work
2. ☐ New Building
3. ☐ Addition
4. ☐ Alteration
5. ☐ Fire Protection
6. ☐ Plumbing
7. ☐ Electrical
8. ☐ Elevator Devices
9. ☐ Asbestos Abat. Subch. 8
10. ☐ Lead Hazard Abatement
11. ☐ Demolition
TOTAL COSTS
IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?
1. ☐ Elevators/Escalators/Lifts/
Dumbbells/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

V. FEE SUMMARY (for office use only)

1. Building	\$	Update	Update
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for			
State Plan Review			
8. Subtotal	\$		
9. DCA Training 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

VII. DESCRIPTION OF BUILDING USE
A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO
No. of dwelling units:
Before Construction
After Construction
Net Gain or Loss
B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

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.vii:

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. 5:32-2.15(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 LOUISE VERDE Pescatore

Address % BRICK FITNESS FOR WOMEN, INC.

RAUNEL SG. SHOPPING CTR., RT 88, BRICK, N.J. 08723

Telephone (732) 206-0800

Signature Louise Verde Pescatore

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC
TECHNICAL
SECTION

Date Received 05/14/2002
Date Issued 5/20/02
Control # C15-5
Permit # 02-1728

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 Qual

Work Site Location ROUTE 88

POOL BONDING

Owner in Fee NEW PLAN REALTY TRUST

Address PO BOX 966

NEW YORK, NY 10108-

Tele. (732) 286-1586 Fax ()

Contractor GENESIS ELECTRIC

Address 1200 MIZZEN AVE

BEACHWOOD, NJ

Tele. (732) 286-1586

Lic. No. or Bldrs. Reg. No. 9841

Federal Emp

COMMERCIAL

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[] Pole/Pad # [] Temporary [] Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work \$ 10

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required

☐ Joint Plan Review Required:

[] Bldg [] Plumb

[] Fire [] Elevator

[] Elect Plans Approved

Date: 5/5/02

Approved By: VM

SUBCODE APPROVAL

[] CO [] CCO

Date: 4/21/02

Approved By: VM

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 Electrical Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

NO. SIZE

ITEM

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 Elect Range/Receptacle

KW Oven/Surface Unit

KW Elect Water Heater

KW Elect Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

Baseboard Heat

HP Motors 1/+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elect Sign/Outline Light

Other POOL BONDING

Other

Administrative Surcharge \$

Minimum Fee \$

TOTAL FEE \$

DCA Training Fee \$

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/26/2004
Date Issued 12/13/04
Control # 001-80
Permit # 04-5295

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

Block 1149 Lot 5 Qual _____
Work Site Location 1930 ROUTE 86-BRICK FITNESS

POOL BONDING

Owner in Fee NEW PLAN EXCEL REALTY
Address 1120-6TH AVE

NEW YORK, NY 10036-

Tele. (212) 869-3000

Contractor GENESIS ELECTRIC

Address 1200 NIZZEN AVE

BEACHWOOD, NJ

Tele. (732) 286-1586

Lic. No. or Bldgs. Reg. No. 9841

Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
☐ Pole/Pad ☐ Temporary ☐ Other

Building Occupied as _____ Utility Co. _____

Estimated Cost of Electrical Work \$ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required
☐ Joint Plan Review Required:

☐ Oldg ☐ Plumb

☐ Fire ☐ Elevator

☐ Elect Plans Approved

Date: 4/7/04

Approved By: [Signature]

SUBCODE APPROVAL

☐ CC ☐ CC ☒ CA

Date: 12/13/04

Approved By: [Signature]

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 Electrical Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	
0		Pool Permit/with UM Lights	
0		Storable Pool/Spa/hot tub	
0		KW Elect Range/Receptacle	
0		KW Oven/Surface Unit	
0		KW Elect Water Heater	
0		KW Elect Dryer/Receptacle	
0		KW Dishwasher	
0		KW Garbage Disposal	
0		KW Central A/C Unit	
0		HP/KW Space Heater/Air Handler	
0		Baseboard Heat	
0		HP Motors 1/4 HP	
0		KW Transformer/Generator	
0		AMP Service	
0		AMP Subpanels	
0		AMP Motor Control Center	
0		KW Elect Sign/Outline light	
0		Other <u>POOL BONDING</u>	
0		Other <u>_____</u>	

Paid ☐ Check \$ _____
Collected by: _____

Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 50
DCA State Permit Fee \$ 0

Township of Brick

Counter Form
(PLEASE PRINT)

Site Location: LAUREL SQ SHOPPING CENTER ANNEX, RT88 BRICK, N.J.

Block: 1149 Lot: 5

Owner's Name: Shopping Center: New Plan Realty

Business: BRICK FITNESS FOR WOMEN, INC

Owner's Mailing Address: PO Box 966
RT. 88
BRICK, NJ 08723

Phone: (732) 206-0800

BUILDING

Contractor: _____

Address: _____

Phone#: _____

Lis # _____

Federal Emp # or SSN _____

ELECTRICAL

Contractor: Genosig Electric

Address: 1200 Mizzen Ave
BRICK, NJ 08722

Phone#: 732-286-1586

Lis #: 9841

Federal Emp # or SSN _____

Technical Data

Description of Work:

Tec

Item

Quantity

Lighting Fixtures _____
Receptacles _____
Switches _____
Detectors _____
Light Poles _____
Motors w/ Fract. HP _____
Emergency & Exit Lights _____
Communication Points _____
Alarm Devices/FAC Panel _____
Total _____

Type of Work

New Building _____ Siding _____
Addition _____ Fence _____
Alteration _____ Pool _____
Roofing _____ Demolition _____
Asbestos Abatement _____ Sign _____ sq ft

Building Characteristics

Use Group Present: _____ Proposed: _____
No of Stories: _____
Height of Structure: _____
Area of the largest floor: _____
Area of New Structure: _____
Volume of New Structure: _____
Total Land Disturbed: _____

Cost of Alteration: \$ _____

Cost of New Building: \$ _____

Total Cost of New Building Work: \$ _____

Pool (Receptacles, Switches, Lights, Motor IHP) _____
Spa/Hot Tub/Storable Pool _____
Electric Range _____ KW
Oven/Surface Unit _____ KW
Electric Water Heater _____ KW
Electric Dryer _____ KW
Dishwasher _____ KW
Garbage Disposal _____ HP
A/C Unit - Central Air _____ KW
Space Heater/Air Handler _____ KW
Baseboard Heating _____ KW
Motors 1+ HP _____
Transformer/Generator _____ KW
Light Stander _____ AMP
Service _____ AMP
Subpanel _____ AMP
Motor Control Center _____ AMP
Sign/Outline Light _____ KW
Furnace _____
Steam Boiler _____
Other: _____

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

Estimated Cost of Electrical Work: -0-

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

Signature: _____

Please Print Name _____

Signature: Anthony Lorenzo

Please Print Name Anthony Lorenzo

CONTRACTOR'S SEAL

-0- INSPECTION OF
POOL GROUNDING
NO WORK

4/21/08 TECH / PERMIT CLOSE OUT
DUE TO ATTACHED 045225
COPY SHOWING 12/04/04 PASS
RE. POOL BONDING. ~~SP~~

Back of
electric Tech



COMMITMENT

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.vii:

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)

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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.

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

☒ Check if contractor.

Agent Name LOUISE VERDE Pescatore
Address % BRICK FITNESS FOR WOMEN, INC.
RAUNEL SG. SHOPPING CTR., RT 88, BRICK, N.J. 08723
Telephone (732) 206-0800
Signature Louise Verde Pescatore

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