BLOCK 1149 LOT 5 QUALIFICATION CODE _____ ADDRESS (SITE) 1930 Hwy 88 PERMIT NO. 98-2000

C11-59

Summit Bank, Path-Mark

RECEIVED JUN 09 199

CONSTRUCTION PERMIT APPLICATION

Pathmark Summit Bank

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

I. IDENTIFICATION

1. Propsed Work Site at: 1930 Hwy 88
2. Name of Owner in Fee: Nan Plaza Realty Trust Tel. (212) 869-3000
   Address 1120 Ave of the Americas, N.Y. N.Y. 10036
   street municipality zip code
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: East Coast Sign Adv Tel. (215) 781-8500
   Address 5058 N Rte 13, Bristol, Pa 19007
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 23-2180-291 FAX: (_____) _____
5. Architect or Engineer _____ Tel. (_____) _____
   Address _____
6. Responsible Person in Charge of Work Virginia B Kieffer
   Tel. (610) 272-5253 FAX (610) 272 8201

[redacted] Sign

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 45.-		
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	2		
10. Subtotal			
11. Cert. of Occupancy			
12. Other	$115		
13. TOTAL	$ 162		

PAID

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	

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☑ Minor Work	2300	CMS	6/4/98		6/16/98	FM	8/3/99		ok
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		EWC	6/15/98		6/15/98	DL			
TOTAL COSTS	2300								

OPTIONAL (for office use only)

III. DO YOU WANT: (optional)

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

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: Bank
3. Change in Use Group, Indicate Former:

LDS BR 10211201

Virginia B. Kieffer
Sign Permit Consultant
& Expeditor
306 Hazelton Street
East Norriton, PA 19401
215-272-5953
610

OATH

e completed if the applicant is the owner in fee)

wner in fee of the property listed on Page 1.

oxes:

new home (private residence) will be constructed on this property for my own use and occu-
is to be occupied by myself and is not to be used for any purpose other than single family
t that all construction, plumbing, or electrical work will be done, in whole or in part, by me or
ler my supervision, in accordance with all applicable laws; and, I further acknowledge that said
red under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.)
ll be disclosed to any person purchasing this property within ten years of the date of issuance
pancy.

IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR
N SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND
RFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EM-
E 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 Virginia B. Kieffer

Address 306 Hazelton St.
East Norriton, PA 19401

Telephone (610) 272-5953

Signature Virginia B Kieffer

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition			
Building		Energy		Other	
Electrical		Barrier Free			
Plumbing		Flood Hazard			
Fire Protection		As Built Elevation Cert.			
Mechanical		Other			

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				
☐ Lead Abatement Clearance Certificate	No.				

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 08/05/99
Control #
Permit # 98-2000

UCC NEW JERSEY

CERTIFICATE

IDENTIFICATION

Block 1149 Lot 5 Qual
Work Site Location 1930 RT 88
SIGN SUMMIT BANK
Owner in Fee/Occupant NEW PLAN REALTY TRUST
Address 1120 AVE OF THE AMERICAS
NEW YORK, NY 10036-
Telephone (212)869-3000
Contractor EAST COAST SIGN
Address 5058 RTE 13 N
BRISTOL, PA 19007-
Telephone (215)781-8500 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2180296

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group U
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

SINGLE FACED SIGN

[ ] 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.

[X] 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.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ___ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ___.

J Caniazza
CONSTRUCTION OFFICIAL
U.C.O. F260 (rev. 3/96)

Fee $ 0
Paid [X] Check No. 1535
Collected by: AJP

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 06/22/98
Control #
Permit # 98-2000

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 1149 Lot 5

Work Site Location 1930 RT 88
SIGN SUMMIT BANK
Owner in Fee NEW PLAN REALTY TRUST
Address 1120 AVE OF THE AMERICAS
NEW YORK, NY 10036-
Telephone (212)869-3000

Contractor EAST COAST SIGN
Address 5058 RTE 13 N
BRISTOL, PA 19007-
Telephone (215)781-8500
Lic. No. or Bldrs. Reg. No. Exp. Date / /
Federal Emp. No. 23-2180296
or Social Security No.

Is hereby granted permission to perform the following work:
[X] BUILDING [ ] PLUMBING [ ] OTHER
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:
SINGLE FACED SIGN

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 $ 2,300

D. Cucinotta/am
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building	45
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	2
Cert. of Occ.	0
~~Other~~ Zon	15
Total	62.37
Check No.	1535
Cash	
Collected By:	AJP

CONSTRUCTION PERMIT

UNIFORM CONSTRUCTION CODE — NEW JERSEY

Date Issued
Control #
Permit #

IDENTIFICATION Block 1149 Lot 5

Work Site Location 1930 Hwy 88
Laurel Square SC

Owner in Fee New Plan Realty Trust
Address 1120 Avenue of the Americas
New York, NY 10036
Tele. (212) 869-3000

Contractor East Coast Sign Adv.
Address 5058 N Rte 13
Bristol, PA 19007
Tele. (215) 781-8500
Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____
Federal Emp. No. 23-2180-296
or Social Security No. _____

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [X] OTHER Sign
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

Install 3'X 15' single faced wall sign reading "Summit Bank"

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 $ 2300

PAYMENTS **(Office Use Only)**

Building	
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	
Check No.	
Cash	
Collected By:	

(see reverse side)

CONSTRUCTION OFFICIAL

UCC FORM F-170C 1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT **PRO 208 B**

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

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

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
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
Work Site Location 1930 Hwy 88
Bricktown, N.J.
Owner in Fee New Plan Realty Trust
Address 1120 ave. of the Americas
New York N.Y. 10036
Tele. (212) 869-3000
Contractor East Coast Sign Adv.
Address 5058 N Rte 13
Bristol, Pa 19007
Tele. (215) 781-8500 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2180-296

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 Virginia B Kieffer

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Install one 3'x15' single faced wall sign reading "Summit Bank"
45 ft

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class 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.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 2300
2. Alteration $
3. Total (1+2) $ 2300

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence Height (exceeds 6')
- [X] Sign 45 Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Other

[ ] Demolition

FEE (Office Use Only)
$

Administrative Surcharge $
Minimum Fee $
DCA Training Fee $
TOTAL FEE $

U.C.C. F110
(rev. 3/96)

1 White-Office Copy
2 Canary-Office Copy
3 Pink-Applicant Copy
4 Hard-Inspector Copy

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: June 11, 1998 1998 - 0933

Block 1149 Lot 5 Zone B-3, H.D.

Property Address: 1930 Highway 88, Laurel Square

Owner: New Plan Realty Trust (Phone): (212) 869-3000

Applicant: Virginia Kieffer/Summit Bank (Phone): (610) 272-5953

Existing Use: Pathmark/ Summit Bank.

Proposed Use: Pathmark/Summit Bank.

Proposed Construction (if any): Wall sign, 3' by 15', 45 square feet, "Summit Bank".

Conditions: Total sign area may not exceed 15% of total facade area.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Municipal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK

Zoning Permit Application

(Please Type or Print Neatly)

BLOCK 1149 LOT 5

PROPERTY ADDRESS 1930 Hwy 88 Laurel Square S/C, Brick NJ 0872

NAME OF OWNER New Plan Realty Trust OWNER'S PHONE (212

NAME OF APPLICANT Virginia B Kuffler % Summit Bank 869-3000

APPLICANTS COMPLETE ADDRESS 306 Hazelton Ave, Norristown Pa 19401

APPLICANTS PHONE NUMBER (610) 272-5953 APPLICANTS BUSINESS NAME East Coast Sign Adv.

PRESENT USE OF PROPERTY (check one)

- ☐ Vacant Lot
- ☐ Single Family Dwelling
- ☐ Condo or Apartment
- ☒ Commercial (please describe) Fmr Pathmark/Summit Bank
- ☐ Other (please describe) _____

PROPOSED USE OF PROPERTY (check one)

- ☐ Vacant Lot
- ☐ Single Family Dwelling
- ☐ Condo or Apartment
- ☒ Commercial (please describe) same
- ☐ Other (please describe) _____

PROPOSED CONSTRUCTION Install (1) sign 3'x 15' - 45# on wall "Summit Ban

All Dimensions	~~8~~ W	15' L	3' Ht
Deck or Garage	☒ Attached	☐ Detached	
Fence	Type _____		Ht _____

CHECKLIST:

- ☐ All information completed above
- ☐ Two (2) accurate Survey / Plot Plans containing:
  - ☐ all existing and proposed structures
  - ☐ all dimensions of lot and structures
  - ☐ set backs to all property lines
  - ☐ all streets and waterways shown
- ☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

The applicant certifies that all statements and information made and provided as part of this
true to the best of the applicant's knowledge, information and belief. The applicant further st
applicant will comply with all other Municipal approvals and ordinances, and all County, State
Regulations.

Signature of Applicant Virginia B Kuffler Date 6-9-98

Reviewed by Zoning Officer Date 6/11/98 ☒ Approved ☐

TOWNSHIP OF BRICK

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

Department of Engineerin
Office of the Municipal Engir
(732) 262-1038
Fax: (732) 262-8954
http://www.gbshost.com/bri

DATE 6-9-98

Municipal Engineer
401 Chambers Bridge Road
Brick, New Jersey 08723

RE: Block 1149 Lot 5

Dear Sir:

I, Virginia B Kuffler (Name) of 1930 Hwy 38 Laurel Square S/C (Address)
request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book, Chapter 190.31, part B. The property (please circle one) is / is not located in a flood zone.

Respectfully yours,

Virginia B Kuffler
Applicant's Signature

610-272-5953
Phone #

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway being added, show type, width and length.

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

NOTE: Any excavations to be removed from the Township requires a mining permit.

OFFICE USE

Approved X Date 6/15/98 BY

Rejected Date BY

REMARKS: