

BLOCK

1149

LOT

5

ADDRESS (SITE)

1930 Route 88

PERMIT NO.

99-0773

RESUBMIT

DATE

12/9/98 11/30/98



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: NEW PLNN ACCTZ Tel. ()
- Address 1120 AVE OF THE AMERICAS NY, NY 10026
street municipality zip code
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Phila Sign Co Tel. (609) 829-1460
- Address 707 W SPRING GARDEN ST PALMYRA NJ 08065
- License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
- Federal Emp. No. 23-0973470 Social Security No. _____
5. Architect or Engineer _____ Tel. ()
- Address _____
6. Responsible Person in Charge of Work DICK JANERIC Tel. (609) 829-1460

II. PROPOSED WORK

1. ☐ Minor work (single trade)
2. ☐ Small Job (\$5,000 and no prior approvals)
3. ☐ New Building
4. ☐ Addition
5. ☒ Alteration SIGNS
6. ☐ Fire Protection
7. ☐ Plumbing
8. ☒ Electrical
9. ☐ Elevator Devices
10. ☐ Asbestos Abatement
11. ☐ Demolition
- TOTAL COSTS

Est. Cost

9500.-

9500.-

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
WRR	11/30/98		1-8-99	FM			
12/9/98							
			32399	mm			
EWG	12/30/98		1/30/99	JS			

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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 234.-		
2. Electrical	\$ 35.-		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	\$ 8.-		
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other <u>2PA+PP</u>	\$ 30.-		
13. TOTAL	\$ 307.-		

VI. BUILDING/SITE CHARACTERISTICS

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 _____ sq. ft.
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: SIGN, PATHWAY
2. Use Group: M

3. Change in Use Group, Indicate Former: _____

NO FEE REQUIRED

APPROVED BY KT DATE 1-5-99

B.T. COMMERCIAL

LDS BR 10502203

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 New Jersey 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 Phila Sign Co

Address 707 W SPRING GARDEN ST
PALMYRA NJ 08065

Telephone (609) 829 1460

Signature Richard J. Jorgic Date 11-25-98

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			X	X	X	X	X	X	
☐ Planning Board			X	X	X	X	X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority			X	X	X	X	X	X	
☐ Water Authority			X	X	X	X	X	X	
☐ Fire Department			X	X	X	X	X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department			X	X	X	X	X	X	
☐ Soil Conservation			X	X	X	X	X	X	
☐ N.J. Dept. of Community Affairs			X	X	X	X	X	X	
☐ N.J. Department of Transportation			X	X	X	X	X	X	
☐ N.J. Dept. of Environmental Protect.			X	X	X	X	X	X	
☐ Utility Dig No.			X	X	X	X	X	X	
☐			X	X	X	X	X	X	
☐			X	X	X	X	X	X	

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)	
Name of Code & Edition	Name of Code & Edition
Building _____	Energy _____
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. _____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

0002
990773#H

BLOCK	1149 #	0.00
LOT	5 #	0.00
BUILDING		234.00
ELECTRIC*		35.00
D.C.A.		8.00
ZONEPLOT		15.00
ENG P.R.		15.00
TOTAL		307.00
CHECK		307.00
CHANGE		0.00
		10.51

Date Issued 03/24/99
Control #
Permit # 99-0773

IDENTIFICATION Block 1149 Lot 5 Qual

Work Site Location 1930 RT 88 PATHMARK
3 SIGNS

Owner in Fee NEW PLAN REALTY

Address 1120 AVE OF THE AMERICAS
NEW YORK, NY 10026-

Telephone () -

Contractor PHILADELPHIA SIGN COMPANY
Address 707 W SPRING GARDEN STREET
PALMYRA, NJ 08065-

Telephone (609)829-1460

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 23-0973470

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
3 SIGNS

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 \$ 9,800

Construction Official *[Signature]*

03/24/99
Date

U.C.C. #170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	234
Electrical	35
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	8
Cert. of Occupancy	0
Other	30
Total	307
Check No.	207
Cash	4606
Collected By	WP

File # 11-1556
11-1556
11-1556



ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

3/24/99
99.0773

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 BATHING
Owner in Fee 1930 Route 88 Brick NJ
Address 1120 Ave of the Americas
NY, NY 10026
Tele. ()
Contractor MAH HON A SICTAS
Address 300 CRENSHAW AVE
HAWAII, TOWN OF HONOLULU
Tele. (602) 858-3326
Lic. No. 10605 or Social Security No. 022481005
Federal Emp. No. 022481005

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
☐ Pole/Pad # 1 ☐ Temporary ☒ Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work \$ 300.

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)
	Type:	Failure Failure Approval Initial
☐ No Plans Required	Rough	
☐ Joint Plan Review Required:	Temporary	
☐ Bidg. ☐ Plumb.	Constr. Serv.	
☐ Fire ☐ Elevator	TCO	
☒ Elec. Plans Approved	Other	
Date: <u>3/28/99</u>	Service	
Approved by: <u>[Signature]</u>	Final	
SUBCODE APPROVAL	Temp. Cut-in-Card Date Issued	
☐ CO ☐ CCO ☐ CA	Final Cut-in-Card Date Issued	
Date: <u>3/28/99</u>		
Approved By: <u>[Signature]</u>		

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.

☒ Licensed Electrical Contractor ☐ Exempt Applicant



Signature of Contractor Seal

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
		Fixtures (1)
		Receptacles (2)
		Switches (3)
		Total 1 + 2 + 3
		Kw Range
		Kw Oven(s)
		Kw Surface Unit
		hp Dishwasher
		hp Garbage Disposal
		Kw Dryer
		Kw A/C Unit
		Burglar Alarms
		Intercoms Panels
		Smoke Detectors
		hp Whirlpool/spa
		Pool Bonding
		hp Pool Filter Motor
		Pool Lights
		Kw Water Heater(s)
		Kw Central heat:
		oil, gas or elec.
		Kw Baseboard Heat Units
		Thermostats
		hp Heat Pump
		hp Pump(s)
		Amp Motor Control Center/Sub Panels
		Signs
		Light Standards
		hp Motors—Fractional H.P.
		hp Motors—All Others
		Kw Transformers
		Kw Generators
		Amp Service Entrance
		Other

FEE (Office Use Only)

Paid ☐ Check #	Administrative Surcharge	\$
	Minimum Fee	\$
	DCA Training Fee	\$
Collected by: _____	TOTAL FEE	\$

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: December 14, 1998 1998 - 1981

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

Property Address: 1930 Route 88, Laurel Square

Owner: New Plan Realty (Phone): -----

Applicant: Richard Janezic (Phone): (609) 829-1460

Existing Use: Pathmark Store

Proposed Use: same

Proposed Construction (if any): Replace three wall signs:

(1) 6'x25'4 1/2" "Pathmark" sign

(2) 2'x18'6 1/2" "Super Center" sign

(3) 21'x21'3" "Pharmacy" sign

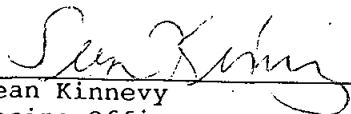
239 square foot total

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

Sign may not extend above the roof line.

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. Powell, Mayor/T.P.~~
~~Mayor/T.P.~~


Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK
Zoning Permit Application
(Please Type or Print Neatly)

BLOCK 1149 LOT 5
PROPERTY ADDRESS 1930 ROUTE 88 BRICK 08724
NAME OF OWNER NEW PLAN REALTY OWNER'S PHONE ()
NAME OF APPLICANT PHILN SIGN CO - RICHARD JANEZIC - AGENT
APPLICANT'S COMPLETE ADDRESS PHILN SIGN CO 707 W SPRING GARDEN ST PALMYRA NJ 08054
APPLICANT'S PHONE NUMBER (609) 829-1460 APPLICANT'S BUSINESS NAME _____

PRESENT USE OF PROPERTY (check one)

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

PROPOSED USE OF PROPERTY (check one)

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

PROPOSED CONSTRUCTION NEW SIGNAGE

All Dimensions _____ W _____ L _____ 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

① 6'x25'4 1/4" PAVING MARK SIGN
① 2'x18'6 1/4" SUPER CENTER SIGN
① 2'x21'3" PHARMACY SIGN
23459 FT TTL

- ☐ 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 application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

Signature of Applicant _____

Date 12-9-98

Reviewed by Zoning Officer _____

Date 12/14/98

☒ Approved ☐ Rejected

FROM

PHILADELPHIA SIGN CO.

707 W. Spring Garden Street
PALMYRA, NJ 08065-1798(609) 829-1460
Fax (609) 829-8549Message
Reply

DATE:

3/18/99

FILE NO:

PRIORITY

- ☐
- URGENT!
-
- ☐
- SOON AS POSSIBLE
-
- ☐
- NO REPLY NEEDED

ATTENTION:

ELECTRIC INSP.

SUBJECT:

PATAMARK

1930 RT. 88

TO

BRICK TOWNSHIP
401 CHAMBERS BRIDGE RD
BRICK, N.J. 08723
ATTN: MR. MARCEL

MESSAGE

DEAR SIR,

FOR YOUR REVIEW OF
NEW DRAWINGS FOR "PATAMARK"
LETTERING AT ABOVE LOCATION.
THIS WILL ALLOW FOR SERVICE
& REPAIRS THRU FRONT. ANY
QUESTIONS PLEASE CALL.

THANK YOU

SIGNED:

STAN LEWIS

DATE OF REPLY:

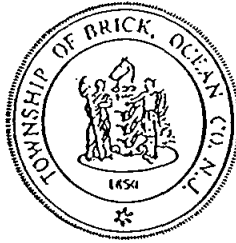
REPLY TO:

REPLY

SIGNED:

SENDER: MAIL RECIPIENT WHITE AND PINK SHEETS.

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



Joseph C. Scarpelli, Mayor

Township Council:

Victor Cantillo - President
Martin J. Anton
Helen Fayad
Gregory S. Kavanagh
Mary Lou Powner
Kathy M. Russell
Frederick J. Underwood, Sr.

Department of Administration & Finance

Division of Inspections

Joseph Curiaza

Construction Official

(732) 262-1024

Fax (732) 262-8954

<http://www.gbshost.com/brick>

Date: 12-9-98

Municipal Engineer
401 Chambers Bridge Rd
Brick, N.J. 08723

RE: Block: 1149 Lot: 5

Phila Sica Co

I, RICHARD J SAWERK of 1930 ROUTE 88,
(name) (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,

Richard Sawerk
applicant's signature

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is 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 ☒ Date: 12/30/98 By: [Signature]

Rejected ☐ Date: _____ By: _____

Remarks: _____

BRICK NJ



REMOVE 5'X40' WALL SIGN
 REMOVE 3'X20' WALL SIGN
 (260 SQ FT)

ERECT 6'X25'4 $\frac{1}{4}$ " WALL SIGN (PATIMARK) 153 SQ FT
 " 2'X18'6 $\frac{1}{4}$ " " " (SUPER CENTER) 38 SQ FT
 " 2'X24'3" " " (PHARMACY DEPT) 43 SQ FT
 (234 SQ FT)



BRICK NJ

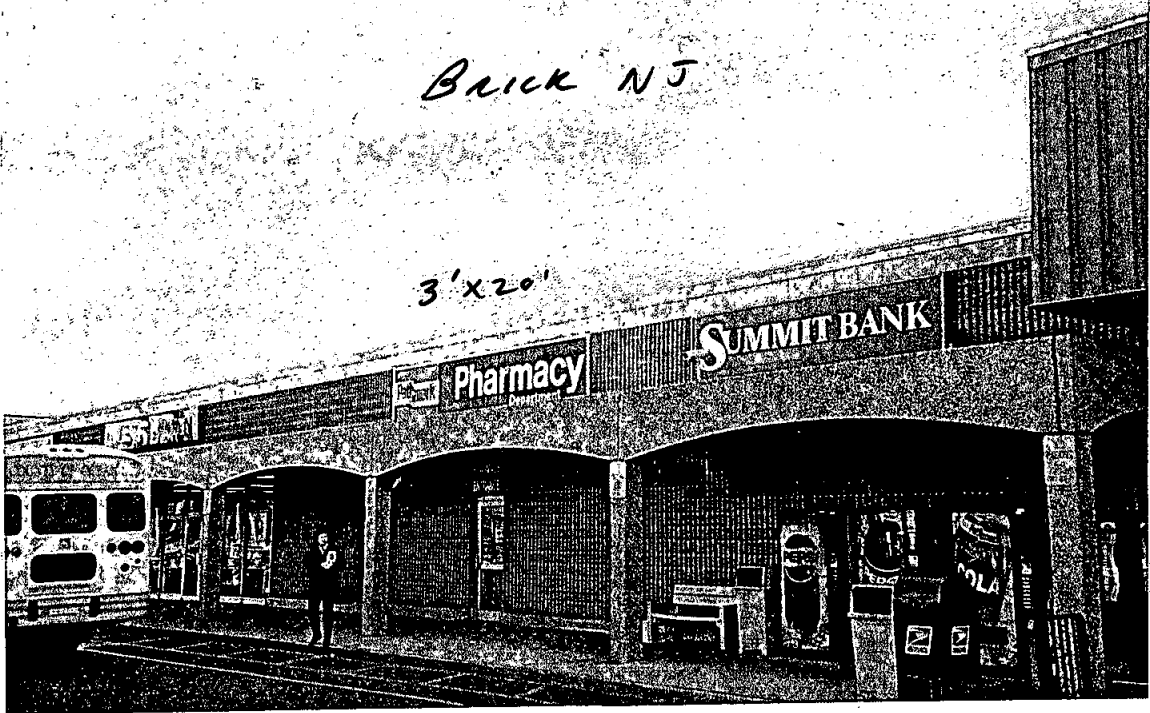
5'x40'

(EXISTING SIGNS
TO BE REMOVED)



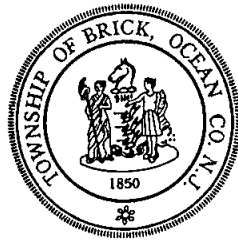
BRICK NJ

3'x20'



TOWNSHIP OF BRICK

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



Joseph C. Scarpelli, Mayor

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Kathy M. Russell
Frederick J. Underwood, Sr.

Department of Administration & Finance

Division of Inspections
Joseph Curiazza
Construction Official
(732) 262-1030
Fax (732) 262-8954
<http://www.gbshost.com/brick>
<http://www.twp.brick.nj.us>

February 08, 1999

Phila Sign co _____
707 W Spring Garden St
Palmyra, NJ 08065
re: 1930 Route 88 _____

On 01-13-99, your application for a sign at Pathmark permit has been rejected or denied. You have been contacted by either phone or mail in regards to why the application has been rejected. If the information is not supplied within 14 days of this letter, we will consider the application null and void and it will be filed appropriately for a period of six (6) months.

If you have any questions or need an extension for any particular reason, please contact me at 732-262-1031.

Sincerely,

Lisa Rose Tavalaiaccio
Control Person

Curiazza Approval
J. Curiazza
Construction Code Official

/ajp

2/23/99 no response