Called 6/17/96 and left message on Machine.

RECEIVED MAY 30 1996 DIV. OF CONSTRUCTION

BLOCK 1149 LOT 1 ADDRESS (SITE) 191 VAN ZILE ROAD PERMIT NO. 1455-96

COMMERCIAL CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: ~~135-167~~ VAN ZILE ROAD
2. Name of Owner in Fee: ROBERT GRYGIEL Tel. [redacted]
   Address 155 MIZZEN ROAD, BRICK, N.J. 08723 (street, municipality, zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: ROBERT GRYGIEL Tel. [redacted]
   Address 155 MIZZEN ROAD BRICK, N.J. 08723
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Emp. No. _____ Social Security No. [redacted]
5. Architect or Engineer R.W. DILL Tel. (908) 549-1717
   Address 1 LINCOLN HIGHWAY SUITE 10, EDISON, N.J.
6. Responsible Person in Charge of Work ROBERT GRYGIEL Tel. [redacted]

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 30.-		
2. Electrical			
3. Plumbing			
4. Fire Protection	50		
5. Elevator Devices			
6. Subtotal	$ 80.-		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee			
10. Subtotal	$ 1		
11. Cert. of Occupancy			
12. Other ZPA	$15		
13. TOTAL	$ 96.00		

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 ____ sq. ft. / no ____	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

Tenant fit up

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

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
CP	5/31/96		6/14/96	AC			
			6/12/96	JC	8/6/96		MK
EMC	6/6/96		6/6/96				

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 EXISTING
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: RETAIL VIDEO RENTAL
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10413203

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 6/4/96

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 _____

Address _____

_____

Telephone (____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: ______

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final. Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date	COMMENTS
☐ Zoning Officer			X	X	X	X	X	X	
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Fire Department					X	X	X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X	X	X	
☐ Soil Conservation							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	
☐									
☐									

IMPORTANT
A.H.B.T. - EXEMPT

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 Approvai	No 1455	8/9/96			

CERTIFICATE

Date Issued 8-9-96
Control #
Permit # 1455-96

IDENTIFICATION

Block 1149 Lot 1
Work Site Location 135-167 Van Zile Road

Owner in Fee Robert Grygiel
Address 155 Mizzen Rd.
Brick, NJ 08723
Tele. ( )
Contractor same
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group B 2 hrs.
Maximum Live Load
Description of Work/Use:

Tenant fit-up - Video rental

Type of Warranty Plan: [ ] **State** [ ] **Private**
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ **CERTIFICATE OF OCCUPANCY** XXXX☒ **CERTIFICATE OF APPROVAL**

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

☐ **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 OCCUPANCY**

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate: ELEVATOR DOORS LOCKED

Ray Kahn
CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

CONSTRUCTION PERMIT

Date Issued 6/19/96
Control #
Permit # 1455-96

IDENTIFICATION Block 1149 Lot 1

Work Site Location 191 Vanzile Rd

Owner in Fee Robert [illegible]

Address 155 [illegible]

Tele. ( )

Contractor Same

Address

Tele. ( )

Lic. No. or Bldrs. Reg. No. Exp. Date

Federal Emp. No.

or Social Security No.

is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] OTHER

[ ] ELECTRICAL [X] FIRE PROTECTION

[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

Tenant Fit up

PAYMENTS (Office Use Only)		
Building	30 —	
Plumbing		
Electrical		
Fire Protection	50 —	
Other		
Other		
DCA Training Fee	1 —	
Cert. of Occ.		
Other	2[illegible]-15	
Total	96	
Check No.	[illegible]	
Cash		
Collected By	[illegible]	

1455** BLOCK 0.00

1147 # LOT 0.00

1 # BUILDING 30.00

FIRE 50.00

D.C.A. 1.00

ZONEPLOT 15.00

TOTAL 96.00

CHECK 95.00

CASH 1.00

CHANGE 0.00

6/19/96 NO. 5 00144005 09:33

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 $ 1000.00

[signature] CONSTRUCTION OFFICIAL

U.C.C. Form F-170C

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

BUILDING SUBCODE TECHNICAL SECTION

Date Received 6/19/96
Date Issued
Control #
Permit # 1455-96

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

Block 1149 Lot 6
Work Site Location 191 VAN ZILE ROAD, BRICK, N.J. 08723

Owner in Fee ROBERT GRYGIEL
Address 155 MIZZEN ROAD
BRICK N.J. 08723
Tele. [redacted]
Contractor ROBERT GRYGIEL
Address 155 MIZZEN ROAD
BRICK N.J. 08723
Tele. [redacted]
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security N [redacted]

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

48 LINEAR FEET OF PARTITION WALL 18" BELOW CEILING TILES.
Tenant fit up.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All	6/19/96	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 8-9-96
Approved By: J Daos

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Foundation				
Slab				
Frame	8/6/96	JDaos	8/9/96	JDaos
Insulation				
Finishes:				
Energy				
Mechanical				
TCO				
Other				
Final			8/9/96	JDaos

OK per Letter

Per letter for elevator

TYPE OF WORK:
[ ] New Building
[ ] Addition
[X] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (6' or over)
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Asbestos Abatement
[X] Other PARTITION
[ ] Other _____
[ ] Demolition

(Office Use Only)
FEE
$

B. BUILDING CHARACTERISTICS

Use Group Present COMMERCIAL 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. $
2. Alteration $
3. Total (1+2) $ 1,000.00

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: DCA TRAINING FEE $
TOTAL FEE $

U.C.C. Form F-110B
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

8/6/96 Has Wood Partitions - plan called for stud. J Haas
OK per Arch letter.

8/9/96 O'K per letter on these elevator will not be in use - J Haas

BUILDING SUBCODE TECHNICAL SECTION

Date Received 6/19/96
Date Issued
Control #
Permit # 1465-96

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

Block 1140 Lot 15-16
Work Site Location 155-16 VAN ZILE ROAD BRICK, N.J. 08723

Owner in Fee ROBERT GRYGIEL
Address 155 MIZZEN ROAD
BRICK N.J. 08723
Tele. [redacted]
Contractor ROBERT GRYGIEL
Address 155 MIZZEN ROAD
BRICK N.J. 08723
Tele [redacted]
Lic. No. or Bldrs. Reg. No. [redacted]
Federal Emp. No. _____ or Social Security No. [redacted]

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All	6/19/96	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved By: _____

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

B. BUILDING CHARACTERISTICS

Use Group Present COMMERCIAL 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. $ _____
2. Alteration $ _____
3. Total (1+2) $ 1,000.

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 [redacted]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

48 LINEAR FEET OF PARTITION WALL 18" BELOW CEILING TILES.
TENANT FIT UP.

TYPE OF WORK:
[ ] New Building
[ ] Addition
[X] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (6' or over)
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement
- [X] Other PARTITION
- [ ] Other _____

[ ] Demolition

6/19/96

(Office Use Only) FEE

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

Paid [ ] Check # _____
Collected by: _____

U.C.C. Form F-110B

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 6/19/96
Date Issued
Control #
Permit # 1455-96
Tenant fit up

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

Block 1149 Lot 1
Work Site Location 191 VAN ZILE ROAD
BRICK, N.J. 08723
Owner in Fee ROBERT GRYGIEL
Address 155 MIZZEN RD.
BRICK, N.J. 08723
Tele. [redacted]
Contractor ROBERT GRYGIEL
Address 155 MIZZEN ROAD
BRICK, N.J. 08723
Tele. ([redacted]
Lic. No.
Federal Emp. No. or Social Security No. [redacted]

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present COMMERCIAL Proposed M. occupancy
Constr. Class. Present 2C Proposed 2C
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location: ROOF
Total Est. Cost of Fire Prot. Work $ [ ] Other

Sprinkler Heads Need Certificate
Board 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date: 6/12/96 JL
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [X] CA
Date: 8/6/96 JL
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO Tenant			8/6/96	JL
Other				
Other				
Other				

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

Water Supply Source PUBLIC
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks	( ) Capacity		Fuel
Combustible Liquid Storage Tanks	( ) Capacity		Fuel
L.P.G. Storage Tanks	( ) Capacity		Fuel
L.N.G. Storage Tanks	( ) Capacity		Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		50
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL Fire Extinguishers		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical Panic Bars on Door		
Gas or Oil Fired Appliance		
OTHER		

Administrative Surcharge $ 50
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-140B

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 6/19/96
Date Issued
Control #
Permit # 1455-96
Tenant fit up

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

Block 135-16 1149 Lot 1
Work Site Location 1149 VAN ZILE ROAD
BRICK, N.J. 08723
Owner in Fee ROBERT GRYGIEL
Address 155 MIZZEN RD.
BRICK N.J. 08723
Tele. ([redacted]
Contractor ROBERT GRYGIEL
Address 155 MIZZEN ROAD
BRICK, N.J. 08723
Tele [redacted]
Lic. No.
Federal Emp. No. or Social Security No. [redacted] 4

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present COMMERCIAL Proposed M occupancy
Constr. Class: Present 2C Proposed 2C Roof
Heating Systems [ ] New [X] Existing 100
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location: ROOF
Total Est. Cost of Fire Prot. Work $ [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Elec. [ ] Elevator
[ ] Fire Plans Approved
Date: 6/12/96
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS:

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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

Water Supply Source PUBLIC
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks	( ) Capacity		Fuel
Combustible Liquid Storage Tanks	( ) Capacity		Fuel
L.P.G. Storage Tanks	( ) Capacity		Fuel
L.N.G. Storage Tanks	( ) Capacity		Fuel

	Number
Wet Sprinkler Heads Existing to remain	
Dry Sprinkler Heads Certificate	
TOTAL	
Smoke Detectors	
Heat Detectors	
TOTAL Fire Extinguishers	
Stand Pipes	
Kitchen Hood Exhaust Systems	
Pre-Engineered Systems	
CO_2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance Panic Bars on Door	
OTHER	

FEE (Office Use Only)

50

Administrative Surcharge $ 50
Paid [ ] Check # Minimum Fee $
DCA Training Fee $
Collected by: TOTAL FEE $

U.C.C. Form F-140B
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

TOWNSHIP OF BRICK
ZONING PERMIT

Date of Issue: June 5, 1996 — 1996 z 0716

Block 1149 Lot 1 Zone B-3, H.D.

Property Address: 191 Van Zile Road

Owner: Robert Grygiel (Phone): [redacted]

Applicant: Same (Phone): Same

Use: Former Little Peoples Palace retail store.

Proposed Construction (if any): Alteration for "Easy Video" retail store.

Conditions: Second-floor is for stockroom only.

Please note that Building Permits, as well as Zoning Permits, must be obtained prior to any construction.

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
Administrative Officer

Sean Kinnevy
Zoning Officer

7-11-96
CALLED

BOCA®
PLAN REVIEW RECORD

Valuation: _____

Fee: _____

Plan Review # _____

Date _____

NATIONAL BUILDING CODE
(All Articles except 24, 28, 29, 30, 31 and 32)

JURISDICTION 191 VAN Zile RD
(City, County, Township, etc.)

BUILDING LOCATION _____
(Street address)

BUILDING DESCRIPTION _____

REVIEWED BY _____

Numerals indicated in parenthesis are applicable code sections of the *1987 BOCA National Building Code.*

CORRECTION LIST

No.	DESCRIPTION	Code Section
	Only one Plan	
	JACKET N.O.T. Signed	
	Brought in	
	Dan picked	

The plan review accomplished as indicated in this record is limited to those code sections specifically identified herein. NOTE: In order that we might develop other programs and provide additional services of benefit to the Code Administration profession, please re-order additional copies of this form from:

BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.
4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60477-5795

8/9/96

TO WHOM IT MAY CONCERN,

THE ELEVATOR (FREIGHT) LOCATED AT 191 VAN ZILE ROAD, BLOCK # 1149, LOT 1 WILL NOT BE IN SERVICE AND BOTH DOORS TO THE ELEVATOR WILL BE LOCKED AT ALL TIMES.

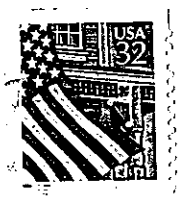
VERY TRULY YOURS

ROBERT GRYGIEL

rwd

robert w. dill
architect and planner

one lincoln hwy.
suite 10
Edison, NJ 08820



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Judy Gass
Construction Subcode Official
Township of Brick
401 Chambersbridge Road
Brick, New Jersey 08723

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5 August 1996

Judy Gass
Construction Subcode Official
Township of Brick
401 Chambersbridge Road
Brick, New Jersey 08723

re: Easy Video
our file no. 96.131

Dear Ms. Gass:

In regard to the above referenced project I have been informed of a discrepancy from the drawings, by Bob Grygiel, the owner.

Instead of using metal studs, as shown on the drawings, the owner and his contractor used 2" x 4" wood studs for the partition shown on the plans to be installed.

Although the BOCA Code Table 602 addresses all building elements and their fireresistant ratings, I would like you to consider that this "partition" be classified as actually being a part of the "furniture" therefore allowing it to be constructed out of non-fireretardant wood.

The basis for this interpretation is that this entire "partition" is separated from the actual structure, specifically from the ceiling by 30" or more, and from the floor by a layer of mastic (adhesive) applied while the bottum plate was being installed.

I further believe that Section 2311.4.2, & 2311.4.3 do not apply, in this specific case since the slab is interior and the adhesive separates the wood from being in contact with the concrete.

Should you have any further questions please do not hesitate to call.

Sincerely:

Robert W. Dill, R.A.,P.P.

cc: Bob Grygiel

robert w. dill
architect and planner

one lincoln hwy.
suite 10
Edison, NJ 08820
908 • 549 •1717
fax: 908•549•1202

robert w. dill
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5 August 1996

1149 Lt 1

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Although the BOCA Code Table 602 addresses all building elements and their fireresistant ratings, I would like you to consider that this "partition" be classified as actually being a part of the "furniture". therefore allowing it to be constructed out of non-fireretardant wood.

The basis for this interpretation is that this entire "partition" is separated from the actual structure. specifically from the ceiling by 30" or more, and from the floor by a layer of mastic (adhesive) applied while the bottom plate was being installed.

I further believe that Section 2311.4.2, & 2311.4.3 do not apply, in this specific case . since the slab is interior and the adhesive separates the wood from being in contact with the concrete.

Should you have any further questions please do not hesitate to call.

Sincerely:

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