

called 8-12-93 BL



1. Proposed Work-site at: CHANNEL PLAZA / M-VAN ZIEK RD. & R70

2 Name of Owner in Fee: DALE POWELL T. 

Address SAME street municipality zip code

Ownership in Fee: Public _____ Private ✓

Principal Contractor: JERSEY SIGNS INC. Tel. (908) 206-1044

W. Address 390-19TH AVE BRICK N.J. - 08724

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

Federal Emp. No. 22-2875-876 Social Security No. _____

5. Architect or Engineer _____ Tel. (____) _____

Address _____

6. Responsible Person _____ Date _____

In Charge of Work VERSEY SIGNS INC Tel. (908) 246-1044

	Est. Cost
1000	1000
2000	2000
3000	3000
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100000	100000

- 2,500.00

TOTAL COSTS

[illegible]

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

		Update	Update
1. Building	\$		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Other <u>5154</u>	<u>40.00</u>	/	
6. Subtotal	\$		
7. Less 20% for State Plan Review	<u>5 -</u>	/	
8. Subtotal	\$	/	
9. DCA Training Fee	<u>2 -</u>	/	
10. Subtotal	\$	/	
11. Cert. of Occupancy	<u>20 -</u>	/	
12. Other		<u>9</u>	
13. TOTAL	\$ <u>67 -</u>		

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area—Largest Floor _____ sq. ft.
4. Building Area—All Floors _____ sq. ft.
5. Volume of 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. Fire Grading _____
12. Max. Live Load _____
13. Max. Occupancy Load _____

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 _____

1. State Specific Use:
~~retail store~~
2. Use Group:
3. Change in Use Group.
Indicate Former:

LDS BR 10213876

Zok

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 JERSEY SIGNS INC.

Address 390-19TH AVE BRICK N.J.

Telephone (908) 206-1044

Signature Joe [Signature] TREASURER Date 7/26

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL	
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date
☐ Planning Board								
☐ Zoning Board								
☐ Sewer Authority								
☐ Water Authority								
☐ Fire Department								
☐ Police Department								
☐ Health Department								
☐ Soil Conservation								
☐ N.J. Dept. of Community Affairs								
☐ N.J. Department of Transportation								
☐ N.J. Dept. of Environmental Protect.								
☐ Utility Dig No.								
☒ Other <i>Drivings</i>	<i>JK</i>	<i>8/4/93</i>	<i>Wg 11</i>	<i>5/9/94</i>				
☐								
☐								
☐								

COMMENTS

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

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

X. CERTIFICATES ISSUED (office use only)

DATE EXPIRED

- | | | |
|---|-----------|-------|
| ☐ Temporary Certificate of Occupancy | No. _____ | _____ |
| ☐ Temporary Certificate of Occupancy | No. _____ | _____ |
| ☐ Continued Certificate of Occupancy | No. _____ | _____ |
| ☐ Certificate of Occupancy | No. _____ | _____ |
| ☐ Certificate of Approval | No. _____ | _____ |
| ☐ None | | |



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

8/17/93
1915-93

IDENTIFICATION Block 1149 Lot 1

Work Site Location 179 Van Z. Rd

Contractor Jersey Signs #0008**

Address 290 19th Ave 1715**

Owner in Fee F. Jones 2000

Address 1401

Tele. () 206-1044 1147 #

Tele. ()

Lic. No. or Bldrs. Reg. No. Exp. Date 1 #

Federal Emp. No.

or Social Security No. SIGNS 30.00

Is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER
☐ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

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 \$ 2,500

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

PAYMENTS (Office Use Only)	
Building	C / O 30.00
Plumbing	TOTAL 17.00
Electrical	CHECK 17.00
Fire Protection	CHANGE 0.00
Other	08/17/93, NO. 48 - 0036A005 2:46
Other	<u>DR 5-</u>
DCA Training Fee	<u>2-</u>
Cert. of Occ.	<u>30-</u>
Other	
Total	<u>67-</u>
Check No.	<u>1064-</u>
Cash	
Collected By:	<u>gfr</u>



Date Received
Date Issued
Control #
Permit #

8/17/93
1915-93

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 179 - VAN ZILE ROAD RT 70 CHANNEL PLAZA,

Owner in Fee DAVE POWELL

Address SAME

Tele. () [REDACTED]

Contractor JERSEY SIGNS INC,

Address 390-19TH AVE BELLEVILLE N.J. 08724

Telephone () [REDACTED]

Lic. No. of Bldrs. Reg. No. 22-2875-816 or Social Security No. [REDACTED]

Federal Emp. No. [REDACTED]

JOB SUMMARY (Office Use Only)		PLANS REVIEW		Date		Initial		INSPECTIONS		Failure		Failure		Approval		Initial	
☒ No Plans Req.																	
☒ All																	
☐ Footing																	
☐ Foundation																	
☐ Frame																	
☐ Other																	
Joint Plan Review Required:																	
☐ Elec. ☐ Plumb. ☐ Fire																	
SUBCODE APPROVAL																	
☐ CO ☐ CCO ☐ CA																	
Date: <u>8/11/93</u>																	
Approved By: <u>[Signature]</u>																	

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	1. New Bldg. \$
No. of Stories			2. Alteration \$
Height of Structure			3. Total (1+2) \$
Area—Largest Floor			
Total Bldg. Area/All Floors			
Volume of Structure			
Total Land Area Disturbed			

9:50 - 2,500.00

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

TO FABRICATE & INSTALL ONE SET OF INDIVIDUAL NEON LETTERS, READING FITNESS 2000. SEE PLANS.

TYPE OF WORK:		(Office Use Only)	
		FEE	
☐ New Building			
☐ Addition			
☐ Alteration			
☐ Roofing			
☐ Siding			
☐ Other			
☐ Demolition			
☐ Miscellaneous			
☒ Fence	40	Height	
☒ Sign		Sq. Ft.	
☐ Pool			
☐ Elevator			
☐ Asbestos Abatement			
☐ Other			

Paid ☐ Check #	Administrative Surcharge	\$
Collected by: <u>[Signature]</u>	Minimum Fee	\$
	TOTAL FEE	\$

$$\frac{1}{2} \frac{1}{2}$$

10

34X210
SHEET METAL
SCREWS
4206 SCREWS
A LETTER

Alapianum
Stor East

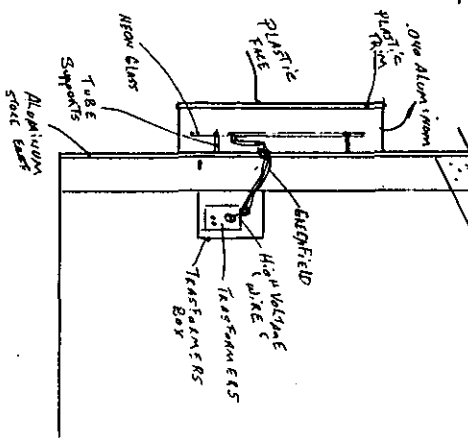
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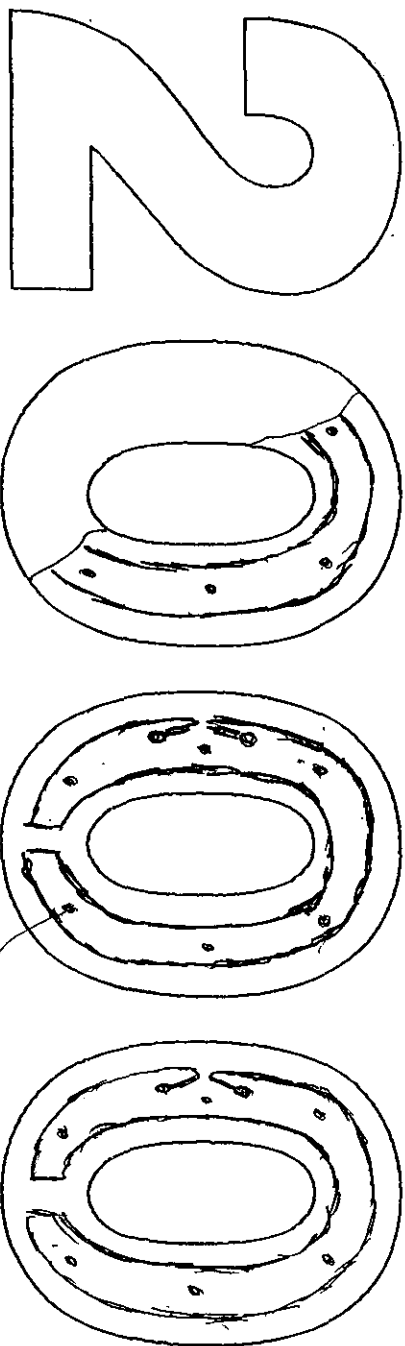
FITNES

20'

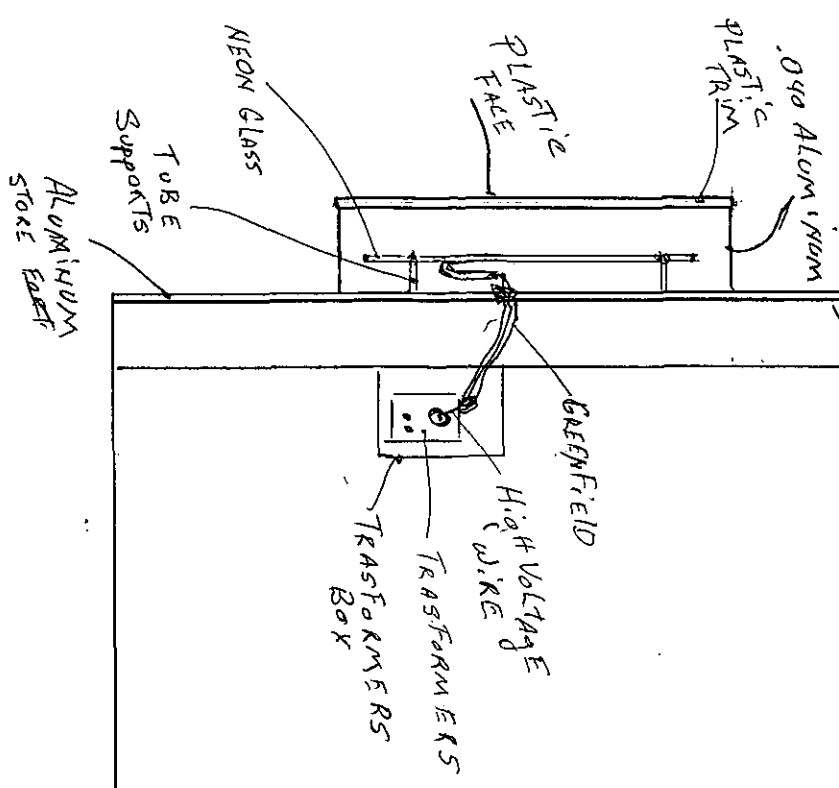
2000

3/4" MID
SHEET METAL
SCALE W/5
4 TO 6 SCALES
A LETTER





3/4" X #10
SHEET METAL
SCREWS
4 TO 6 SCREWS
A LETTER

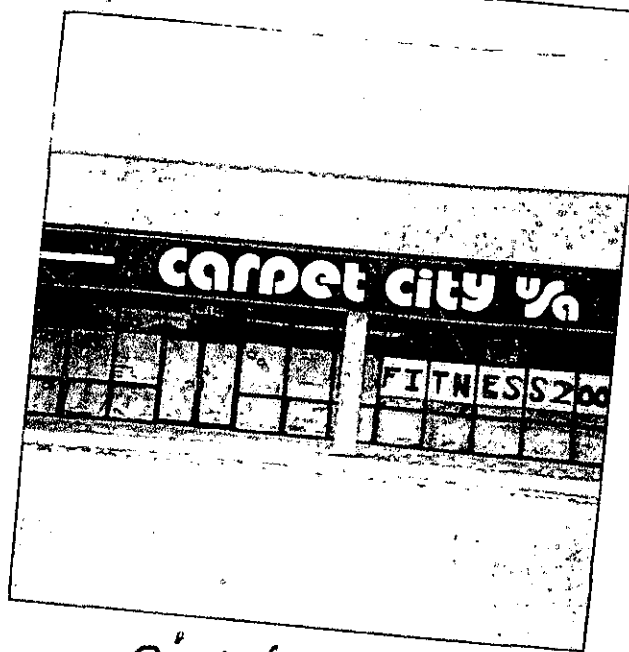


2'

FITNESS

20'

APPROVED FOR ZONING ONLY
CEAN KIMBLEY, ZONING OFFICER
DATE 8/4/93 Don Kinney
wall sign



3'x26'