

AHBT PRELIMINARY APPROVAL

Soil
Eng

ALD
RECEIVED
DEC 4 1995

BLOCK 1149 LOT 1 ADDRESS (SITE) CHANNEL PLAZA PERMIT NO. 144-96



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: CHANNEL PLAZA BRICK TOWNSHIP
2. Name of Owner: ALDI INC Tel. (610) 798-9200
Address: 2700 SAUCON VALLEY RD CENTER VALLEY PA 18034
3. Ownership: Public ☐ Private ☒
Principal Contractor: MID-ATLANTIC CONST CO INC Tel. (215) 641-9280
Address: 1301 S. BETHLEHEM PIKE AMBLET PA 19002
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Emp. No. 23 225 8403 Social Security No. _____
5. Architect or Engineer: OPN ARCHITECTS Tel. (319) 363-6018
Address: 201 THIRD AVE SUITE 210 CEDAR RAPIDS IOWA 52401
6. Responsible Person in Charge of Work: MR JIM CURRAN Tel. (610) 798-9200
109 122

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 3990		
2. Electrical	451		
3. Plumbing	374		
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$ 4815		
7. Less 20% for State Plan Review	482		
8. Subtotal	\$		
9. DCA Training Fee	260		
10. Subtotal	\$		
11. Cert. of Occupancy	130.00		
12. Other <u>2-PAY</u>			
13. TOTAL	\$ 5607		

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 _____

(office use only)

II. PROPOSED WORK

1. ☐ Minor work (single trade)
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

Est. Cost

200,000
250,000
100,000
425,000

Renovation Existing Building
to New Food Store

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
AS	12/4/95		2/9/96	AL	6/25/96		
			8-9-96		6/26/96		
			1-30-96		6/10/96		
			2-2-96		10/12/96		
	1/18/96		1/18/96	Paul			

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)
4. ☐ Two-Family (R-4)
5. ☐ One-Family (R-5)
6. ☐ One-Family (R-6)

No. of dwelling units:
Before Construction _____
After Construction _____
Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use
2. Use Group: M
3. Change in Use Group.
Indicate Former: _____

LDS BR 10413202

IMPORTANT!
A.H.B.T. - MANDATORY FEE - COMMERCIAL
AHBT FINAL APPROVAL

Occupying
527
1-12-96

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.

(X) Check if contractor.

Agent Name BRIAN R. HENRY

Address 1301 S. BETHLEHEM PIKE
AMBLER PA 19002

Telephone (215) 641 9200

Signature Brian R. Henry Date 12-9-95

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		Other	
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. <u>1100</u>	<u>7/1/10</u>		



CERTIFICATE

Date Issued 6-26-96
Control #
Permit # 144-96

IDENTIFICATION

Block 1149 Lot 1
Work Site Location Rt. 70 and Van Zile Rd.
Owner in Fee Aldi Inc.
Address 2700 Saucon Valley Rd.
Center Valley, Pa. 18034
Tele. ()
Contractor Mid-Atlantic Constr. Co., Inc.
Address 1301 S. Bethlehem Pike
Ambler, Pa 19002
Tele. ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group M 3 hours
Maximum Live Load
Description of Work/Use:

Renovation of existing building for
"ALDI Food Store"

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

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ CERTIFICATE OF OCCUPANCY

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 APPROVAL

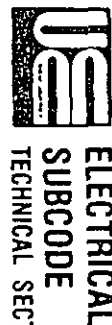
☐ CERTIFICATE OF CONTINUED OCCUPANCY

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:

Fee \$
Paid [] Check No.
Collected by:



Date Received
Date Issued
Control #
Permit #

APR 23 05 00 30 22

FEE (Office Use Only)

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

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
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

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
() Pole/Pad # _____ () Temporary () Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 152.

JOB SUMMARY (Office Use Only)

PLAN REVIEW:

() No Plans Required
Joint Plan Review Required:

() Bldg. () Plumb.

() Fire () Elevator

() Elec. Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL

() CO () CCO () CA

Date: 6/18/96

Approved By: 6/18/96

INSPECTIONS

Type:

Rough _____

Temporary _____

Constr. Smp _____

TCO 6/18/96

Other 6/18/96

Service _____

Final _____

Dates (Month/Day)

Failure _____

Failure _____

Approval _____

Initial _____

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

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.

X Licensed Electrical Contractor () Exempt Applicant

Signature—Contractor Seal

Paid by Check # 3418 Administrative Surcharge \$
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$ 40.

U.C.C. Form F-120B

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

6/14/96 11:06:59

no article Discard for sign



Opm Niclona
ALB 1 FOOD
FOOD - Parkman



ELECTRICAL
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

FEB 28 08 00 12 98
FEE (Office Use Only)

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 CHURCH PLAZA
Owner in Fee ADP INC
Address 2700 SUGAR VALLEY RD
CENTER VALLEY PA, 15034
Tele (CO) 798-0200
Contractor PROLITE LIGHTING & SIGN MAINTENANCE CO INC
Address 2800 BLACKHAWK PL
PHILA, PA 19154
Tele (CO) 876-1239
Lic. No. 4757
Federal Emp. No. 232435540 or Social Security No. _____
Est. Cost of Elec. Work \$ 40,000.00

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as FOOD RETAIL Utility Co. JC P&L
Est. Cost of Elec. Work \$ 40,000.00

JOB SUMMARY (Office Use Only)
PLAN REVIEW: Patrick H. Smith 4-12-90
☐ No Plans Required
Joint Plan Review Required: _____
Rough _____
Temporary _____
Const. Serv. _____
TCO _____
Other _____
Date: 2-15-90
Approved by: [Signature]
SUBCODE APPROVAL
Date: 2-15-90
Approved by: [Signature]
Final _____
Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
95		Fixtures (1)
24		Receptacles (2)
30		Switches (3)
149		Total 1 + 2 + 3
		Kw Range
		Kw Oven(s)
		Kw Surface Unit
		hp Dishwasher
		hp Garbage Disposal
		Kw Dryer
3		Kw AC Unit
		Burglar Alarms
		Intercoms Panels
		Smoke Detectors
		hp Whirlpool/spa
		Pool Bonding
		hp Pool Filler Motor
2		Pool Lights
2		Kw Water Heater(s)
		Kw Central heat:
		oil, gas or elec.
		Kw Baseboard Heat Units
		Thermostats
		hp Heat Pump
		hp Pump(s)
3		30 Amp Motor Control Center/Sub Panels
1		Signs
		Light Standards
2		Motors-Fractional H.P.
5		Motors-All Others
		Kw Transformers
		Kw Generators
1		800 Amp Service Entrance

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.

[X] Licensed Electrical Contractor [] Exempt Applicant

Signature-Contractor Seal

Paid by Check # 3753 Administrative Surcharge \$ 447.00
Minimum Fee \$ 32.00
DCA Training Fee \$ 479.00
TOTAL FEE \$ 958.00

3.15-90 No work started

4.3.90. Inside wall pipe trap. OK to Shetbrook.

4.12.90 outside Side wall Bitterness (2) & Office R/W only and cable & ent.

Burb



ELECTRICAL
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

JUN 11 96 00 4 9000

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 ALDI FOOD STORE #69 / 140 VAN ZILE ROAD
BRICK, NJ

Owner in Fee ALDI, INC. - CENTER VALLEY DIVISION
Address P.O. BOX 369 - CENTER VALLEY, PA 18034
ATTENTION: JIM CURRAN

Tele. (610) 798-9200

Contractor SECURITEC, INC.
Address 2753-L MEDINA ROAD - MEDINA, OH 44256-8284
ATTENTION: DOUG WILLIAMS

Tele. (800) 860-7413

Lic. No. _____
Federal Emp. No. 34-1651034 or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW: _____

☐ No Plans Required
Joint Plan Review Required: _____

☐ Bldg. ☐ Plumb. _____

☐ Fire ☐ Elevator _____

☐ Elec. Plans Approved _____

Date: _____
Approved by: _____

SUBCODE APPROVAL
(4601) DC9 / 96
Date: 6/14/96
Approved By: WMB/DC9

INSPECTIONS
Type: _____ Failure _____ Approval _____ Initial _____
Rough _____
Temporary _____
Constr. Serv. _____
TCO _____
Other _____
Service _____
Final _____
Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

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—Contractor Seal
DOUGLAS C. WILLIAMS
VP

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

XXXXX0-25

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 by Check # <u>5882</u>	Administrative Surcharge	\$ _____
	Minimum Fee	\$ _____
	DCA Training Fee	\$ _____
Collected by: _____	TOTAL FEE	\$ <u>35.-</u>



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit # 2003011290

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 CHAMBERLAIN PLAZA
Owner in Fee ADBI INC
Address 2700 SAUNDON VALLEY RD
CENTER VALLEY PA, 15034
Tele (412) 798-0200
Contractor PROLITE LIGHTING & SIGN MAINTENANCE CO INC
Address 2800 BLACKLICK PLACE
PHILA, PA. 19154
Tele (215) 376-1239
Lic. No. 4757
Federal Emp. No. 232435540 or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

Use: Group _____ Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as Food Retail Utility Co. JCP&L
Est. Cost of Elec. Work \$ 40,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)	Initials
	Type:	Failure	Approval
☐ No Plans Required	Rough		
☐ Joint Plan Review Required:	Temporary		
☐ Bldg. ☐ Plumb.	Constr. Serv.		
☐ Fire ☐ Elevator	TCO		
☐ Elec. Plans Approved	Other		
Date: <u>2-15-96</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: _____			
Approved By: _____			

C. CERTIFICATION IN LIEU OF OATH

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

☒ Licensed Electrical Contractor ☐ Exempt Applicant

Signature—Contractor Seal

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
<u>95</u>		Fixtures (1)
<u>24</u>		Receptacles (2)
<u>30</u>		Switches (3)
<u>149</u>		Total 1 + 2 + 3
		Kw Range
		Kw Oven(s)
		Kw Surface Unit
		hp Dishwasher
		hp Garbage Disposal
		Kw Dryer
<u>3</u>		Kw A/C Unit \$ 200 IS KVA
		Burglar Alarms
		Intercoms Panels
		Smoke Detectors
		hp Whirlpool/Spa
		Pool Bonding
		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)
<u>3</u>		34 Amp Motor, Control Center/Sub Panels
<u>1</u>		Signs <u>100150 & 200225</u>
		Light Standards
<u>2</u>		hp Motors—Fractional H.P.
<u>5</u>		hp Motors—All Others \$ 300 S4P
		Kw Transformers
		Kw Generators
<u>1</u>		800 Amp Service Entrance 30/20/208V
<u>1-100</u>		Other Const. Pole

FEE (Office Use Only)

Paid ☒ Check # 2753 Administrative Surcharge \$ 401-
Minimum Fee \$ 321
DCA Training Fee \$ 147
Collected by: [Signature] TOTAL FEE \$ 147



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

2/14/96
144-96

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

Block 1149 Lot 1
Work Site Location ALDI Food Store CHANDLER PLAZA
Owner in Fee ALDI, INC.
Address 2700 SAUGAN VILLEY RD.
CENTER VALLEY PA. 18034
Tele. (610) 798-9200
Contractor ALPHA SPRINKLER, INC.
Address 2208 STEUBAN AVE.
PENNSAUKEN, N.J. 08002
Tele. (609) 661-9200
Lic. No. _____
Federal Emp. No. 13-2728924 or Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____
Const. Class. Present _____ Proposed _____
Heating Systems ☐ New ☐ Existing
Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar
☐ Other _____
Location: _____
Total Est. Cost of Fire Prot. Work \$ 9,000. ☐ Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)
☐ No Plans Required	Type:	Failure Failure
Joint Plan Review Required:	Suppression Test	Approval Initial
☐ Bldg. ☐ Plumb.	Fire Alarm Test	<u>6/23/96</u> <u>JS</u>
☐ Elec. ☐ Elevator	Smoke Test	
☒ Fire Plans Approved	Mechanical	<u>6/23/96</u> <u>JS</u>
Date: <u>1-30-96</u>	TCO	
Approved by: <u>JS</u>	Other	
SUBCODE APPROVAL:	Other	
<u>MC011CCO11CA</u>	Other	
Date: <u>6/28/96</u>	Other	
Approved by: <u>JS</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.

JS
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work
Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision
City LAUREL
YES
YES
W/A

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

Wet Sprinkler Heads Drop Number 126
Dry Sprinkler Heads 126
TOTAL 163

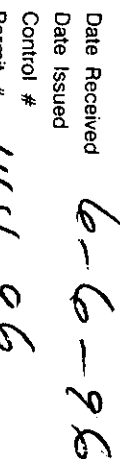
Smoke Detectors
Heat Detectors
TOTAL 46

Stand Pipes
Kitchen Hood Exhaust Systems

Pre-Engineered Systems
CO₂ Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas for Oil Fired Appliance
OTHER 5

Paid ☐ Check # _____
Collected by: _____
Administrative Surcharge \$ 374
Minimum Fee \$ _____
DCA Training Fee \$ _____
TOTAL FEE \$ 165



Block 1149 Lot 1
Work Site Location CHANNEL PLAZA

Suite del Number PR 19002

Tele. (109) 661-9200

Test 2 hrs 200
Test 281 OK

Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar
☐ Other _____

JOB SUMMARY (Office Use Only)

Joint Plan review required.	_____
☐ Bidg. ☐ Plumb.	_____
☐ Elec. ☐ Elevator	_____
Fire Alarm Test	_____
Smoke Test	_____

Date: _____
Approved by: JH
SUBCODE APPROVAL:
Other _____
Other _____

Approved by: 1/11/96 Weeks one 6/26/96 for

Sarah McRae
SIGNATURE

Description of Work

Central Supervision
Proprietary Supervision

Combustible Liquid Storage Tanks

Wet Sprinkler Heads

Smoke Detectors *check*
Heat Detectors *side*
Be

Stand Pipes ✓
Kitchen Hood Exhaust Systems

CO₂ suppression
Halon suppression
Earm suppression

Gas or Oil Fired Appliance

Paid [] Check #

U.C.C. Form F-140B 1 White 3 Pink =

1

yes
yes

() Capacity _____	Fuel _____
() Capacity _____	Fuel _____

Number <u>136</u>	FEE (Office Use Only)
----------------------	-----------------------

111

Administrative Surcharge	\$ 163
Minimum Fee	\$

2 Canary = Office Copy
4 Gold = Applicant Copy

163



FIRE PROTECTION SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

2/14/96
144-96

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

Block 1149 Lot 1
Work Site Location ALDI Food Store, N.J. CHANNEL PLAZA
Owner in Fee ALDI INC.
Address 2700 SAUGEN VALLEY RD. 18034
Center Valley PA.
Tele. (610) 798-9200
Contractor ALPHA SPRINKLER INC.
Address 2208 SUTHERLAND AVE. 08002
PENNSAUKEN, N.J.
Tele. (609) 661-9200
Lic. No. _____
Federal Emp. No. 23-2728924 or Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group _____ Present _____ Proposed _____
Constr. Class. _____ Present _____ Proposed _____
Heating Systems ☐ New ☐ Existing
Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar
☐ Other _____
Location: _____
Total Est. Cost of Fire Prot. Work \$ 9,000.00 ☐ Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
	Type	Failure Failure Approval Initial
☐ No Plans Required	Suppression Test	
Joint Plan Review Required:	Fire Alarm Test	
☐ Bldg. ☐ Plumb.	Smoke Test	
☐ Elec. ☐ Elevator	Mechanical	
☒ Fire Plans Approved	TCO	
Date <u>1-30-96</u>	Other	
Approved by: <u>[Signature]</u>	Other	
SUBCODE APPROVAL	Other	
☐ CO ☐ CCO ☐ CA	Other	
Date: _____	Other	
Approved by: _____	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]
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

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

CITY
TAMPA
YES
YES
N/A

Flammable Liquid Storage Tanks
Combustible Liquid Storage Tanks
L.P.G. Storage Tanks
L.N.G. Storage Tanks

() Capacity _____ Fuel _____
() Capacity _____ Fuel _____
() Capacity _____ Fuel _____

Wet Sprinkler Heads
Dry Sprinkler Heads
TOTAL

Number
126
126

FEE (Office Use Only)

Smoke Detectors
Heat Detectors
TOTAL

2 Alarm
Del Loop Top units

163
46

Stand Pipes
Kitchen Hood Exhaust Systems

Pre-Engineered Systems

CO₂ Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas or Oil Fired Appliance
OTHER

5

165

Paid ☐ Check # _____

Administrative Surcharge \$ _____
Minimum Fee \$ _____

374

Collected by: _____

DCA Training Fee \$ _____
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
Date Issued
Control #
Permit #

6-6-96
144-96
update

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 CHANDLER PLAZA
Owner in Fee ATD ALUMINUM CONSTRUCTION CO.
Address 1361 BETHEL RD. N.W.
SW 161 1/2 RD. N.W. 19002
Tele. ()
Contractor ALUMINUM SPRINKLER
Address 2225 SHELTON RD. N.W. 19002
Tele. ()
Lic. No. 661-9200
Federal Emp. No. 332228924 or Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group _____ Present _____ Proposed _____
Const. Class. _____ Present _____ Proposed _____
Heating Systems [] New [] Existing
Type: [] Gas [] Oil [] Electrical [] Solar
[] Other _____

Location: _____
Total Est. Cost of Fire Prot. Work \$ 81,500 [] Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)	Initial	
	Type:	Failure	Failure	Approval
[] No Plans Required	Suppression, Test			
Joint Plan Review Required:	Fire Alarm Test			
[] Bldg. [] Plumb.	Smoke Test			
[] Elec. [] Elevator	Mechanical			
[4] Fire Plans Approved	TCO			
Date: _____	Other			
Approved by: _____	Other			
SUBCODE APPROVAL:	Other			
[] CO [] CCO [] CA	Other			
Date: _____				
Approved by: _____				

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 _____
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

Description of Work	Number	Fuel
Water Supply Source		
Method of Valve Supervision		
Local Alarm Supervision		
Central Supervision		
Proprietary Supervision		
Flammable Liquid Storage Tanks		
Combustible Liquid Storage Tanks		
L.P.G. Storage Tanks		
L.N.G. Storage Tanks		

FEE (Office Use Only)

163-

Description of Work	Number	Fuel
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
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		
OTHER		

Description of Work	Number	Fuel
Paid [] Check #		
Collected by: _____		
Administrative Surcharge		
Minimum Fee		
DCA Training Fee		
TOTAL FEE		



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

2/14/96
144-96

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

Block 1149 Lot 1
Work Site Location 8101 Leag Street - CHANNING PLG 39
Back Township, New Jersey
Owner in Fee 3100 Spacon Valley Rd
Center Valley, Pa 15034
Tele. () 412 754 9493
Contractor Amity Mechanical
Address 3507 Big Road
Tele. (602) 754 9493
Lic. No. 7765
Federal Emp. No. 228-2271248 or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Estimated Cost of Plumbing Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS		Dates (Month/Day)	
		Type:	Failure	Failure	Approval
☐ No Plans Required		Slab	<u>PARIN 315-96</u>		
Joint Plan Review Required:		Rough <u>Final 4-22-96</u>		<u>5-10-96</u>	<u>DN</u>
☐ Bldg. ☐ Elec.		Water			
☐ Fire ☐ Elevator		Sewer			
☐ Plumb. Plans Approved		Fixtures			
Date: <u>2-2-96</u>		Gas Equipment		<u>5-10-96</u>	<u>DN</u>
Approved by: <u>gaf</u>		Gas Piping		<u>6-7-96</u>	
SUBCODE APPROVAL:		Solar			
☐ CO ☐ CPO ☐ CPO		TCO		<u>6-14-96</u>	
Approved by: <u>[Signature]</u>					
Date: <u>6-18-96</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.

Signature—Contractor Seal

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIGURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	21
1	Urinal/Bidet	7
2	Bath Tub	14
2	Lavatory	14
2	Shower	56
2	Floor Drain	14
1	Sink	7
1	Dishwasher	7
1	Drinking Fountain	7
1	Washing Machine	50
2	Hose Bibb	7
1	Water Heater	15
1	Fuel Oil Piping	125
1	Gas Piping	25
1	Hot Water Boiler	25
1	Sewer Pump	25
1	Interceptor/Separator	25
1	Backflow Preventer	25
3	Greasetrap	25
1	Water Cooled A/C or Refrigeration Unit	10
1	Sewer Connection	
1	Water Service Connection	
1	Active Solar System	
	Other	

Paid ☐ Check # _____	Administrative Surcharge \$ _____
	Minimum Fee \$ _____
	DCA Training Fee \$ _____
Collected by: _____	TOTAL \$ <u>451</u>

3-15-96 - partial - NO floor drains. Rest of slab OK

4-26-96 partial rough Jolt

4-30-96 partial rough - ① Vent in brick room not pitched -
② Vent in brick room by cooler not strapped -
rest of rough OK

5-10-96 - GAS pipe not to plan - must check gas sizing

6-7-96 - must change tank to Right HAND flush



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

2/14/96
144-96

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

Block 1149 Lot 1
Work Site Location ALCO FOOD STORE - CHANDLER PLAZA
Owner in Fee ALCO INC.
Address 8001 S. MACON BLVD RD
CANTON TOWNSHIP, PA 18034
Tele. () AMITY MECHANICAL
Contractor 35071816 ROAD
Address 2861351 PA 19492
Tele. (60) 754 9495
Lic. No. 7765
Federal Emp. No. 283-22712463 or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Estimated Cost of Plumbing Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS		Dates (Month/Day)	
		Type:	Failure	Failure	Approval
☐ No Plans Required	☒	Slab			
☐ Joint Plan Review Required	☒	Rough			
☐ Bldg. [] Elec.	☒	Water			
☐ Fire [] Elevator	☒	Sewer			
☐ Plumb. Plans Approved	☒	Fixtures			
Date: <u>2-2-96</u>		Gas Equipment			
Approved by: <u>[Signature]</u>		Gas Piping			
SUBCODE APPROVAL:		Solar			
☐ CO ☐ CCO ☐ CA		TCO			
Approved By: _____					
Date: _____					

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIGURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	21
1	Urinal/Bidet	7
2	Bath Tub	14
2	Lavatory	56
8	Shower	14
2	Floor Drain	7
1	Sink	7
1	Dishwasher	50
1	Drinking Fountain	7
1	Washing Machine	135
1	Hose Bibb	25
1	Water Heater	25
1	Fuel Oil Piping	10
1	Gas Piping	25
1	Steam/Boiler Heating Units	75
1	Hot Water Boiler	10
1	Sewer Pump	
1	Interceptor/Separator	
1	Backflow Preventer	
5	Greasetrap	
1	Water Cooled A/C	
1	or Refrigeration Unit	
1	Sewer Connection	
1	Water Service Connection	
1	Active Solar System	
1	Other	

Collected by: _____ TOTAL \$ 451

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____

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.

Signature—Contractor Seal

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: January 5, 1996 1996 Z 0005
Block 1149 Lot 1 Zone B-3, H.D.
Property Address: 135-167 Van Zile Road
Owner: Aldi, Inc. (Phone): (610) 798-9200
Applicant: Mid-Atlantic Construction Company, Inc. (Phone): (215) 641-9280
Use: Part of building in Channel Plaza.
Proposed Construction (if any): Renovation of part of building for an Aldi Supermarket:
15,440 square feet.

Conditions: Site plan approved by Planning Board.

Case No. PB-2163-ASP-V-6/95.

Resolution No. R-66-95.

Approved October 25, 1995.

Map signed January 5, 1996.

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.



Sean Kinnevy

Land Use Officer

**THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY**

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
458-7000

CERTIFICATE OF COMPLIANCE

Date 6-12-96

NAME Aldi, Inc.

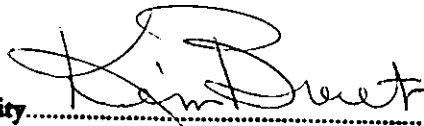
ADDRESS P.O. Box 369 Center Valley, Pa.

PROPERTY LOCATION 131A Van Zile - Channel Plaza

Account No. Q231011 Block 1149 Lot 1

I hereby certify that the above applicant has complied with all Rules
and Regulations of this Authority and has paid all required fees and charges.

For the Authority



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



Joseph C. Scarpelli, Mayor

Township Council:
Victor Cantillo, President
Stephen C. Acropolis
Helen Fayad
Lee Hartman
Thomas G. Majorine
Mary Lou Powner
Michael A. Thulen

Department of Administration & Finance

Office of Land Use Management
Michael P. Fowler, AICP/PP
Municipal Planner
(908) 262-1042
Fax: (908) 920-4850

December 8, 1995

Brian Henry
Mid-Atlantic Construction Company, Inc.
1301 S. Bethlehem Pike
Ambler, Pennsylvania 19002

RE: Block 1149, Lot 1
135-167 Van Zile Road - Channel Plaza
Zoning Permit Application

Dear Mr. Henry:

Your application for a zoning permit for a new food store on the referenced property is denied because the site plan map has not been signed by the Planning Board.

Please contact the Planning Board Secretary, Joan Kull, for map signing procedures.

Very truly yours,

Sean Kinnevy
Zoning Officer

SK/cas

c: Scott R. MacFadden, Business Administrator
Michael P. Fowler, AICP/PP, Municipal Planner
Arthur J. Cierzo, Construction Code Official
Planning Board

OPN ARCHITECTS

INCORPORATED
201 THIRD AVENUE S.E.
SUITE 210
CEDAR RAPIDS, IOWA 52401-1534
(319) 363-6018
FAX (319) 363-7349

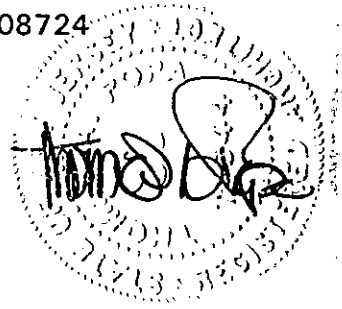
MEMBERS AMERICAN INSTITUTE OF ARCHITECTS

February 9, 1996

Building Department, 401 Chambers Bridge Road, Brick Township, NJ 08724

Attn: Mr. Ray Korkowski, Building Official

RE: Aldi Grocery Store Remodeling, Brick Township, NJ



MR. KORKOWSKI: As a result of our telephone conversations, the following are my written responses to the various points that we discussed:

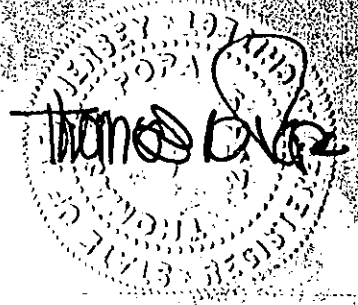
1. The occupancy load of the building has been revised to 326 based on "egress". This supersedes the occupancy load of 198 indicated in my letter of January 25, 1996. It is my understanding after discussions with you and the plumbing inspector that this increase in occupancy load will not require any alterations in the design of our exits or the number of our plumbing fixtures.
2. See the attached addendum which modifies the handrail detail to meet BOCA. The contractor can provide you with actual shop drawings when they are available if you require them.
3. As indicated in my January 25 letter, the "Sprinkler Notes" on Drawing A-2 require the sprinkler subcontractor to provide you with all required calculations and drawings.
4. The Owner shall provide you with cooler/freezer shop drawings that you may require. These two items are provided directly by the Owner and do not fall under the construction contract with Mid-Atlantic Construction, Inc.

We have also been requested to make some minor changes to the electrical documents by an electrical plan review from the Ocean County Construction Inspection Department. These are included in the enclosed addendum.

This letter and the noted addendum will be faxed to you. Hard copies of this letter and all issued addenda properly signed and embossed with my architectural registration stamp will be mailed to you directly.

OPN

Mr. Ray Korkowski
February 9, 1996
Page 2



Should there be any additional information that we can provide, please contact us.

OPN ARCHITECTS, INC.

A handwritten signature of Thomas A. Popa is written below the company name.

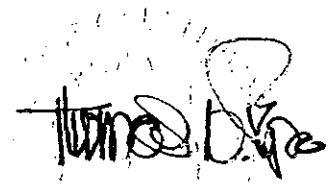
Thomas A. Popa, AIA
TAP/lis

cc: Jim Curran, Aldi Inc.
Jack Jeffers, Mid-Atlantic Construction Co.

Enclosures

ADDENDUM NO. 1 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
January 25, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA



The following addendum items may cause changes to the issued drawings and specifications on drawing sheets and specification in addition to those indicated.

DRAWINGS

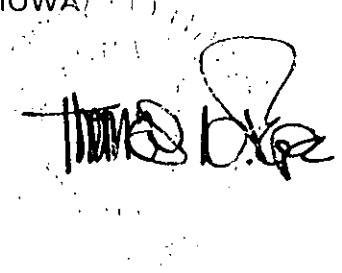
1. SHEET M-4 - PLUMBING MATERIAL LIST: WC-1 and WC-2 shall be pressurized flush type water closets. Change WC-1 to American Standard Model Number 2168.128. Change WC-2 to American Standard Model Number 2174.139.

Provide metered, self-closing handles for L-1 in lieu of wristblade handles currently shown.

2. DRAWING E-2 - POWER PLAN: The duct smoke detector specified for RTU-1 and RTU-2 shall be moved from the return duct to the supply duct.

ADDENDUM NO. 2 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
February 9, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA



The following addendum items may cause changes to the issued drawings and specifications on drawing sheets and specification in addition to those indicated.

DRAWINGS

1. SHEET S-2 - DETAILS 12 AND 15/STAIR SECTIONS: Lower the bottom rail so that the triangular opening formed by the riser, tread, and bottom rail shall be of a maximum size so that a 6" diameter sphere cannot pass through the opening. This will mean lowering the bottom rail to within approximately 1" of the stair nosing.
2. SHEET E-2 - POWER FLOOR PLAN: Install one receptacle in the ceiling, centered above the window in the north wall. Connect the receptacle with three #12 wires in conduit to the spare 20 amp breaker, "L-29".
3. SHEET E-3 - ONE LINE DIAGRAM: Change the breakers in "DP/1" for circuits No. 1 and No. 2 to 25 amp single pole breakers.
4. The electrical contractor shall see that the Owner's refrigeration equipment suppliers provide the proper panel schedules for the "freezer" and "cooler" schedules.

ADDENDUM NO. 1 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
January 25, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA



The following addendum items may cause changes to the issued drawings and specifications on drawing sheets and specification in addition to those indicated.

DRAWINGS

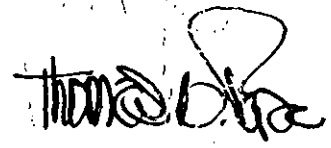
1. SHEET M-4 - PLUMBING MATERIAL LIST: WC-1 and WC-2 shall be pressurized flush type water closets. Change WC-1 to American Standard Model Number 2168.128. Change WC-2 to American Standard Model Number 2174.139.

Provide metered, self-closing handles for L-1 in lieu of wristblade handles currently shown.

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ADDENDUM NO. 2 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
February 9, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA



The following addendum items may cause changes to the issued drawings and specifications on drawing sheets and specification in addition to those indicated.

DRAWINGS

1. SHEET S-2 - DETAILS 12 AND 15/STAIR SECTIONS: Lower the bottom rail so that the triangular opening formed by the riser, tread, and bottom rail shall be of a maximum size so that a 6" diameter sphere cannot pass through the opening. This will mean lowering the bottom rail to within approximately 1" of the stair nosing.
2. SHEET E-2 - POWER FLOOR PLAN: Install one receptacle in the ceiling, centered above the window in the north wall. Connect the receptacle with three #12 wires in conduit to the spare 20 amp breaker, "L-29".
3. SHEET E-3 - ONE LINE DIAGRAM: Change the breakers in "DP/1" for circuits No. 1 and No. 2 to 25 amp single pole breakers.
4. The electrical contractor shall see that the Owner's refrigeration equipment suppliers provide the proper panel schedules for the "freezer" and "cooler" schedules.



May 17, 1996

Mr. Brian Henry
ALDI Inc.
1301 South Bethlehem Pike
Amdler, PA 19022

Re: ALDI Inc.
140 van Zyle Road
Brick

Dear Mr. Henry:

We will supply you eight inch water column (w.c.) at this location.

If you have any questions, or require further assistance, please call me at (908) 938-1146.

Sincerely,

A handwritten signature in cursive script that reads "Jay D. Adams".

Jay D. Adams

Commercial Sales Representative

JDA/sa

Block 1149

LOT 1

96-144

ALPHA SPRINKLER, INC.
2228 Sherman Avenue
PENNSAUKEN, NEW JERSEY 08110

LETTER OF TRANSMITTAL

(609) 661-9200
FAX (609) 661-9480

TO

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

DATE	4-2-96	JOB NO.
ATTENTION	Fire Subcode Official	
RE:	Aldi	

WE ARE SENDING YOU ☐ Attached ☐ Under separate cover via _____ the following items:

- ☐ Shop drawings ☐ Prints ☒ Plans ☐ Samples ☐ Specifications
☐ Copy of letter ☐ Change order ☐ _____

COPIES	DATE	NO.	DESCRIPTION
1 set			Plans - Aldi, Inc

THESE ARE TRANSMITTED as checked below:

- ☐ For approval ☐ Approved as submitted ☐ Resubmit _____ copies for approval
☐ For your use ☐ Approved as noted ☐ Submit _____ copies for distribution
☐ As requested ☐ Returned for corrections ☐ Return _____ corrected prints
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☐ FOR BIDS DUE _____ 19 _____ ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS _____

COPY TO _____

 RECYCLED PAPER:
Contents: 40% Pre-Consumer • 10% Post-Consumer

SIGNED: _____

If enclosures are not as noted, kindly notify us at once.

05/20/96 MON 13:33 FAX
05/17/96 12:02 319 363 7349
05/17/96 11:33 319 309 786 5867

OPN ARCHITECTS

003
002/002
001/001

KJWW ENGINEERING OPN ARCHITECTS



623 28th Avenue
Rock Island, Illinois 61201-5290
(309) 788-0873 FAX (309) 786-5867

FAX TRANSMITTAL

TO: John Olson
COMPANY: OPN
FROM: David W. Bodenschatz

DATE: May 17, 1996
FAX NO: preset
RE: Aldi - Brick Township: Gas
Service
KJWW #95010E

TOTAL PAGES: 1
HARD COPY FOLLOWS: no

REMARKS:

As requested, we reviewed the Natural Gas pipe size with respect the new meter location.

We understand the new meter location requires 300 ft of piping and 4 elbows in addition to the piping shown on the construction documents. The local natural gas company indicated they can provide 8" W.C after the meter/regulator. The Construction Documents indicates a 2-1/2" gas main from the meter into the building.

Given the above information, a 2-1/2" gas pipe from the meter to the building is acceptable. A 2" gas pipe from the meter is unacceptable per NFPA 54.

This facsimile may contain privileged and/or confidential information intended for the use of the addressee. If you are not the addressee (or the person responsible for delivering it to the person addressed), you may not copy or deliver this to anyone else. If you received this facsimile by mistake or if it has not been received properly, please notify sender immediately by calling (309) 788-0873.

OPN ARCHITECTS

INCORPORATED
201 THIRD AVENUE S.E.
SUITE 210
CEDAR RAPIDS, IOWA 52401-1534
(319) 363-6018
FAX (319) 363-7349

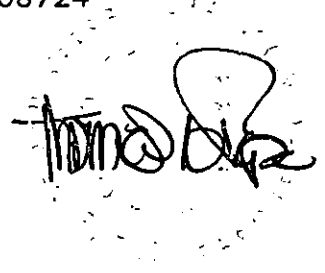
MEMBERS AMERICAN INSTITUTE OF ARCHITECTS

February 9, 1996

Building Department, 401 Chambers Bridge Road, Brick Township, NJ 08724

Attn: Mr. Ray Korkowski, Building Official

RE: Aldi Grocery Store Remodeling, Brick Township, NJ



MR. KORKOWSKI: As a result of our telephone conversations, the following are my written responses to the various points that we discussed:

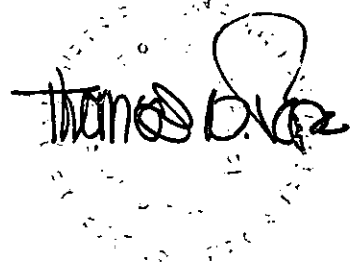
1. The occupancy load of the building has been revised to 326 based on "egress". This supersedes the occupancy load of 198 indicated in my letter of January 25, 1996. It is my understanding after discussions with you and the plumbing inspector that this increase in occupancy load will not require any alterations in the design of our exits or the number of our plumbing fixtures.
2. See the attached addendum which modifies the handrail detail to meet BOCA. The contractor can provide you with actual shop drawings when they are available if you require them.
3. As indicated in my January 25 letter, the "Sprinkler Notes" on Drawing A-2 require the sprinkler subcontractor to provide you with all required calculations and drawings.
4. The Owner shall provide you with cooler/freezer shop drawings that you may require. These two items are provided directly by the Owner and do not fall under the construction contract with Mid-Atlantic Construction, Inc.

We have also been requested to make some minor changes to the electrical documents by an electrical plan review from the Ocean County Construction Inspection Department. These are included in the enclosed addendum.

This letter and the noted addendum will be faxed to you. Hard copies of this letter and all issued addenda properly signed and embossed with my architectural registration stamp will be mailed to you directly.

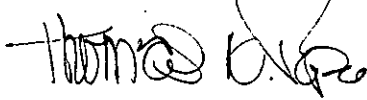
The logo for OPN Architects, featuring the letters 'OPN' in a stylized, rounded, outlined font.

Mr. Ray Korkowski
February 9, 1996
Page 2



Should there be any additional information that we can provide, please contact us.

OPN ARCHITECTS, INC.



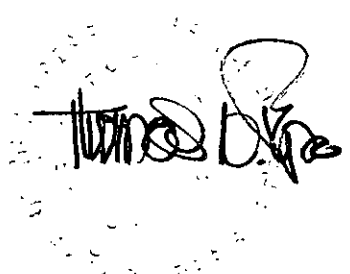
Thomas A. Popa, AIA
TAP/lis

cc: Jim Curran, Aldi Inc.
Jack Jeffers, Mid-Atlantic Construction Co.

Enclosures

ADDENDUM NO. 1 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
January 25, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA

A handwritten signature in black ink, appearing to read "Jim Curran", is written over a faint circular stamp. The signature is stylized and cursive.

The following addendum items may cause changes to the issued drawings and specifications on drawing sheets and specification in addition to those indicated.

DRAWINGS

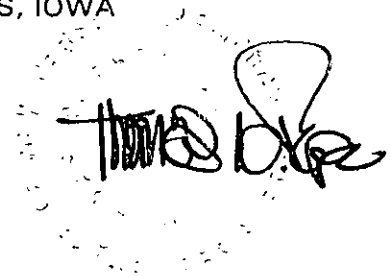
1. SHEET M-4 - PLUMBING MATERIAL LIST: WC-1 and WC-2 shall be pressurized flush type water closets. Change WC-1 to American Standard Model Number 2168.128. Change WC-2 to American Standard Model Number 2174.139.

Provide metered, self-closing handles for L-1 in lieu of wristblade handles currently shown.

2. DRAWING E-2 - POWER PLAN: The duct smoke detector specified for RTU-1 and RTU-2 shall be moved from the return duct to the supply duct.

ADDENDUM NO. 2 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
February 9, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA



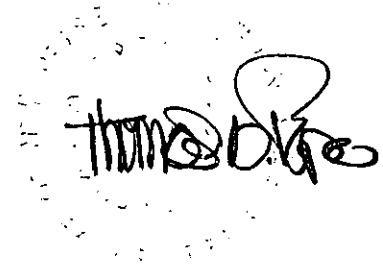
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DRAWINGS

1. SHEET S-2 - DETAILS 12 AND 15/STAIR SECTIONS: Lower the bottom rail so that the triangular opening formed by the riser, tread, and bottom rail shall be of a maximum size so that a 6" diameter sphere cannot pass through the opening. This will mean lowering the bottom rail to within approximately 1" of the stair nosing.
2. SHEET E-2 - POWER FLOOR PLAN: Install one receptacle in the ceiling, centered above the window in the north wall. Connect the receptacle with three #12 wires in conduit to the spare 20 amp breaker, "L-29".
3. SHEET E-3 - ONE LINE DIAGRAM: Change the breakers in "DP/1" for circuits No. 1 and No. 2 to 25 amp single pole breakers.
4. The electrical contractor shall see that the Owner's refrigeration equipment suppliers provide the proper panel schedules for the "freezer" and "cooler" schedules.

ADDENDUM NO. 1 - 1 PAGE
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BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
January 25, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA



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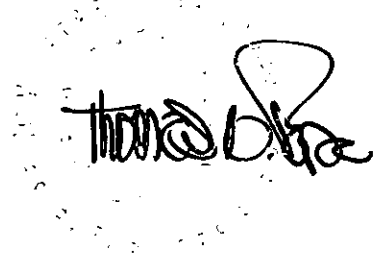
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CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
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(610) 798-9200
February 9, 1996

OPN ARCHITECTS, INC.
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623 - 26TH AVENUE
ROCK ISLAND, ILLINOIS 61201
(309) 788-0673 FAX (309) 788-5967

Project # 95010E

TO: Mr. Arturo CIERZO
COMPANY: TOWNSHIP OF BRICK
FAX NO: (908) 262-1024
FROM: DAVID W. BODEN-SCHATZ
RE: ADD - GROCERY STORE
DATE: FEBRUARY 7, 1996
NUMBER OF PAGES: 1

HARD COPY TO FOLLOW: ☐ YES ☒ NO

REMARKS:

7.24.2 OCCUPANT LOAD.

SUBPARAGRAPH b.:

WHENEVER BOTH SEXES ARE PRESENT
IN APPROX EQUAL #'S, THE TOTAL
OCCUPANT LOAD SHALL BE MULTIPLIED
BY 60% TO DETERMINE # OF EACH SEX.

$326 \text{ TOTAL OCCUPANT LOAD} \times 0.60 = 196 \text{ MEN} \pm 196 \text{ WOMEN.}$

TABLE 7.24.1.C (BASED ON 196 MEN & 196 WOMEN):

Men = 2 WC OR 1 WC + 1 UR, 1 LAV.

WOMEN = 2 WC, 1 LAV.

MY INTERPRETATION OF THE CODE LEADS ME TO BELIEVE WE
HAVE AN ADEQUATE # OF FIXTURES. I WILL FOLLOW UP
WITH A CALL TO CONFIRM.

THANK YOU FOR YOUR TIME

CC: TOM POPA.
C:\SMK\FORMS\WRITTEN.FAX

D

FAX TRANSMITTAL



623 - 26TH AVENUE
ROCK ISLAND, ILLINOIS 61201
(309) 786-0673 FAX (309) 786-5967

Project # 95010E

TO: McARTHUR CIERZO
COMPANY: TOWNSHIP OF BRUCE
FAX NO: (908) 262-1024
FROM: DAVID W. BODEN-SCHATZ
RE: ADD - GROCERY STORE
DATE: FEBRUARY 7, 1996
NUMBER OF PAGES: 1

HARD COPY TO FOLLOW: ☐ YES ☒ NO

REMARKS:

7.24.2 OCCUPANT LOAD.SUBPARAGRAPH D.:

WHenever both sexes are present
in approx equal #'s, the total
occupant load shall be multiplied
by 60% to determine # of each sex.

$326 \text{ TOTAL OCCUPANT LOAD} \times 0.60 = 196 \text{ MEN} \pm 196 \text{ WOMEN.}$

TABLE 7.24.1.C (BASED ON 196 MEN & 196 WOMEN):

Men = 2 WC OR 1 WC & 1 UR, 1 LAV.

Women = 2 WC, 1 LAV.

MY INTERPRETATION OF THE CODE LEADS ME TO BELIEVE WE
HAVE AN ADEQUATE # OF FIXTURES. I WILL FOLLOW UP
WITH A CALL TO CONFIRM.

THANK YOU FOR YOUR TIME

CC: TOM POPA.
C:\SMK\FORMS\WRITTEN.FAX

FAX TRANSMITTAL

SIZING FOR WATER AND SEWER SERVICES

Property Owner _____ Date 2-2-96

Property Address Aldi Food - Channel Plaza, Block 1149 Lot 1

Zoning _____ Use Group _____

Contractor _____ License No. Registration _____

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu)	Water Units	(dfu)	Drainage Units
1: Water Closet	<u>3</u>	(5)	<u>15</u>	()	
2. Lavatory	<u>2</u>	(2)	<u>4</u>	()	
3. Bath Tub		()		()	
4. Shower Stall		()		()	
5. Kitchen Sink	<u>1</u>	()	<u>2</u>	()	
6. Service Sink	<u>1</u>	()	<u>3</u>	()	
7. Laundry Tray		()		()	
8. Dishwasher		()		()	
9. Washing Machine		()		()	
10. Urinal	<u>1</u>	()	<u>5</u>	()	
11. Floor Drain		()		()	
12. Drinking Fountain	<u>1</u>	()	<u>25</u>	()	
13. Air Conditioner (water cooled)		()		()	
14. Dental Unit		()		()	
15. Lawn Sprinkler No. of Heads		()		()	
16. Fire Sprinkler No. of Heads		()		()	
17. _____		()		()	
18. _____		()		()	

Total 29.25

Gallons per minute 20

Size of Service 1"

Date: 2-2-96

Approved: [Signature]
Brick Township Plumbing Inspector

BOCA® PLAN REVIEW RECORD

Valuation: _____

Plan Review # _____

Fee: _____

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

Date _____

JURISDICTION _____

(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.

NO - SEAL - OCCUPANCY 326
CORRECTION LIST

No.	DESCRIPTION	Code Section
	<i>1008 - occupancy 30' x 22' =</i>	<i>326</i>
	<i>1021.3 SEE EXCEPTION</i>	
	<i>Bill Hieking</i>	
	<i>349-1800</i>	
	<i>APGAR</i>	
	<i>80 - ST. CLARK</i>	
	<i>PO ST</i>	
	<i>LAURENCE</i>	
	<i>BEA</i>	

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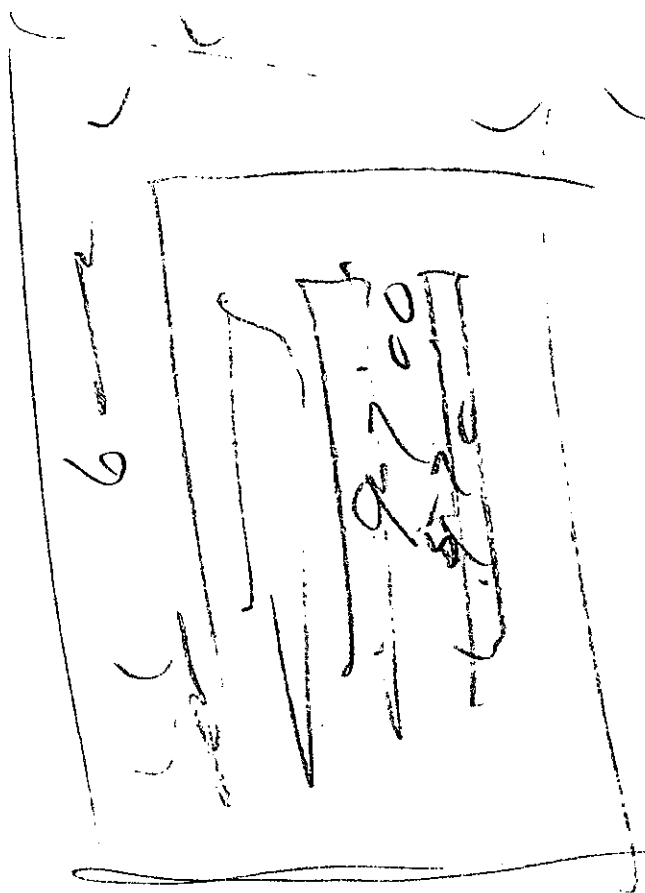
BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.
4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60477-5795

APGAR

211.08 H15



1-300



BOCA® PLAN REVIEW RECORD

Valuation: _____

Plan Review # _____

Fee: _____

Date _____

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

JURISDICTION Brockton
(City, County, Township, etc.)

BUILDING LOCATION Channel Plaza
(Street address)

BUILDING DESCRIPTION New Food Store

REVIEWED BY _____

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

CORRECTION LIST

No.	DESCRIPTION	Code Section
	<i>Needs Occupying Load</i>	
	<i>use Groups. Fire Rating</i>	
	<i>Need Drawing for sprinklers in Freezers & Ice Boxes. Heating Unit if 2000 CFM must have</i>	
	<i>SD. Shut-offs on Supply Side if 150000 or more must be on Return Side #10. of. Furnaces in</i>	
	<i>Store or Roof.</i>	
	<i>Hand rail Shop Drawn</i>	
	<i>Needs Seals 2-8-96</i>	
	<i>Called 2-7-96</i>	

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

MID ATLANTIC

CONSTRUCTION CO., INC.

DATE: 1/26/96

FAX TRANSMISSION

COVER PAGE

TO: Mr. Joe Everesto FAX #: (908) 920-4850
AT: Township of Brick
FROM: Jack Jeffers
SUBJECT: Aldi Food Store
Channel Plaza

Total number of pages including cover sheet 4
Confidential Urgent
Reply Needed

Special Instructions: _____

ADDENDUM NO. 1 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
January 25, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA

The following addendum items may cause changes to the issued drawings and specifications on drawing sheets and specification in addition to those indicated.

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Channel Plaza

Total number of pages including cover sheet 4
Confidential Urgent
Reply Needed

Special Instructions: _____

MID ATLANTIC

CONSTRUCTION CO., INC.

January 26, 1996

Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

Re: Aldi Food Store
Channel Plaza

Attn: Mr. Joe Everesto

Dear Mr. Everesto:

In response to your request, OPN Architects has issued the attached clarifications and addendum for the proposed Aldi Food Store located in Brick, New Jersey.

Please review this information and advise us if it is adequate to finalize your review process.

Very truly yours,


John F. Jeffers
Vice President

JFJ:jm
Enc.

OPN ARCHITECTS

INCORPORATED
301 THIRD AVENUE S.E.
SUITE 210
CEDAR RAPIDS, IOWA 52401 1534
(319) 363-6016
FAX (319) 363-7349

January 25, 1996

MEMBERS AMERICAN INSTITUTE OF ARCHITECTS

Mr. Jack Jeffers, Mid-Atlantic Construction, Inc., 1301 Bethlehem Pike, Suite 101, Ambler, PA 19002

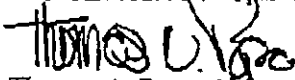
RE: Aldi Retail Facility, Township of Brick
Code Review dated 1/24/96

JACK: In response to the above referenced code review and your subsequent fax and phone calls, the following are my responses based on the BOCA Code:

1. The occupancy type is group "M", Mercantile. The occupancy load of the building is 198. This is made up of 7 employees (maximum) and 191 customers based on 30 square feet per occupant in the occupiable portion of the Sales area (5,730 sq. ft.). Each component of egress must be .15" wide for each occupant. .15" times 198 occupants equals 29.7" of required width. Each of our exit doors is 36" wide and our exit corridor is 44" wide, exceeding the minimum requirements.
2. The group fire rating is "2C-Unprotected".
3. Per the Sprinkler Notes on Drawing A-2, the sprinkler subcontractor shall provide the local authority with all required calculations and drawings. Sprinklers in and above the freezer and cooler are required (see Sprinkler Notes No. 5, 6, 7).
4. Drawings E-2 and E-4 indicate the required smoke detectors in the return air ducts at rooftop units RTU-1 and RTU-2. See the attached addendum which moves the smoke detectors from the return air duct to the supply duct.
5. The plans call for the store to have a total of 5 heating units, all indicated on Drawing M-2. There are three rooftop units located above Sales No. 103 and Cart Room No. 108. There are also two ceiling unit heaters located at Backrooms "A" and "B".
6. See the attached addendum changing the toilets to "Power Flush".
7. See the attached addendum changing the lavatory faucets to "Metered, Self Closing".

Should there be any additional information that you need, please contact me.

OPN ARCHITECTS, INC.


Thomas A. Popa, AIA
TAP/ls

cc: Jim Curran, Aldi Inc.



ADDENDUM NO. 1 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
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January 25, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
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Members

Gary Casperson, Chairman
Walter F. Rehak, Vice Chairman
Robert Singer, Secretary-Treasurer
Leon Dwulet, M.D.
Barbara Hierung
Robert S. Laureigh
John J. Mallon
Patricia Seeber
Warren Wolf
James F. Lacey, Freeholder Liaison
Seymour J. Kagan, Counsel



OCEAN COUNTY HEALTH DEPARTMENT

P.O. Box 2191
Toms River, N.J. 08754-2191
908-341-9700

Herbert W. Roeschke
Public Health Coordinator

January 31, 1996

Township of Brick
401 Chambers Bridge Road
Brick, New Jersey 08723

RE: Proposed Floor Plans
Block 1149 Lot 1
Aldi
140 Van Zile Road
Brick, NJ 08723

Dear Sir,

I have reviewed the floor plans for the above-referenced proposed floor establishments and have found them to be in substantial compliance with Chapter XII, the N.J. State Retail Food Code.

If you should have any questions, please feel free to contact me at this office.

Very truly yours,

Stephen Klaniacki
Stephen Klaniacki
Sanitary Inspector

cc: Brick Township Board of Health
Brick Township Construction Official (Arthur Cierzo)

SK:bd



OCEAN COUNTY HEALTH DEPARTMENT

No: _____

SANITARY INSPECTION REPORT

ESTABLISHMENT INFORMATION

PHONE # Bk 1149 Lot 1 TEMP. 610-798-9200 EXT. 122		ESTABLISHMENT CODE 12	GOODS ☐ DESTROYED ☒ EMBARGOED
ESTABLISHMENT TRADING NAME ALDI		EVALUATION ☒ SATISFACTORY ☐ CONDITIONALLY SATISFACTORY ☐ UNSATISFACTORY	
NUMBER AND STREET 140 VAN ZILE ROAD		WATER SUPPLY ☒ Public - Community ☐ Individual (Public - Non-Community)	
CITY OR MUNICIPALITY BRICK	ZIP CODE 08723		
ESTABLISHMENT LICENSE NO. TO BE OBTAINED	COMMUN. CODE 1500	RISK II	

OWNER INFORMATION

(Complete this section only if different from establishment information)

NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT ALDI Inc. c/o Jim Curran		TIME (2400 HOURS)		
NUMBER AND STREET P.O. Box 369		DATE 1-30-76	BEGIN 1450	END 1530
CITY OR MUNICIPALITY CENTER VALLEY	STATE PA	COMPLAINT NO. _____		
ZIP CODE 18034	COMMUN. CODE _____	COMPLAINT REC. _____		
		COMPLAINT INSPECTED _____		

INSPECTION TYPE ☐ COMPLAINT ☐ INITIAL INSPECTION ☐ REINSPECTION ☒ PLAN REVIEW ☐ CONFERENCE	TYPE OF ESTABLISHMENT ☒ RETAIL ☐ WHOLESALE ☐ VENDING MACHINE NO. OF MACHINES ☐ FROZEN DESSERTS ☐ OTHER	Herbert W. Roeschke Health Officer Sunset Avenue P.O. Box 2191 Toms River, N.J. 08754-2191 Telephone No. 908-341-9700
		NAME OF INSPECTING OFFICIAL (Print) STEPHEN KLANIECH
		SIGNATURE OF INSPECTING OFFICIAL <i>Stephen Klaniach</i>
		PERMANENT REG. NO. B-1463

OCEAN COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

[illegible]

H.D.67

Page 1 of 1 Pages

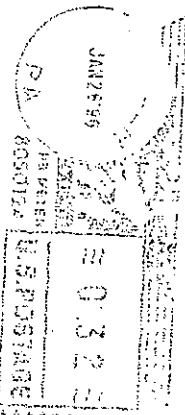
MID ATLANTIC CONSTRUCTION COMPANY, INC.

1301 B. BETHLEHEM PIKE / SUITE 101
AMBLER, PA 19002-5634

Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

32# 36/32/10 84 12 161 H4 H7H4

08723-2444 43



MID ATLANTIC

CONSTRUCTION CO., INC.

January 26, 1996

Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

Re: Aldi Food Store
Channel Plaza

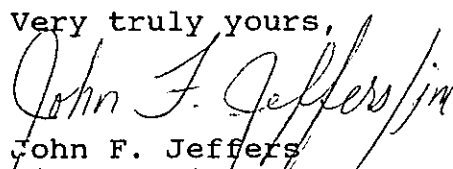
Attn: Mr. Joe Everesto

Dear Mr. Everesto:

In response to your request, OPN Architects has issued the attached clarifications and addendum for the proposed Aldi Food Store located in Brick, New Jersey.

Please review this information and advise us if it is adequate to finalize your review process.

Very truly yours,


John F. Jeffers
Vice President

JFJ:jm
Enc.

OPN ARCHITECTS

INCORPORATED
201 THIRD AVENUE S.E.
SUITE 210
CEDAR RAPIDS, IOWA 52401 1534
(319) 363-6016
FAX (319) 363-7349

January 25, 1996

MEMBERS AMERICAN INSTITUTE OF ARCHITECTS

Mr. Jack Jeffers, Mid-Atlantic Construction, Inc., 1301 Bethlehem Pike, Suite 101, Ambler, PA 19002

RE: Aldi Retail Facility, Township of Brick
Code Review dated 1/24/96

JACK: In response to the above referenced code review and your subsequent fax and phone calls, the following are my responses based on the BOCA Code:

1. The occupancy type is group "M", Mercantile. The occupancy load of the building is 198. This is made up of 7 employees (maximum) and 191 customers based on 30 square feet per occupant in the occupiable portion of the Sales area (5,730 sq. ft.). Each component of egress must be .15" wide for each occupant. .15" times 198 occupants equals 29.7" of required width. Each of our exit doors is 36" wide and our exit corridor is 44" wide, exceeding the minimum requirements.
2. The group fire rating is "2C-Unprotected".
3. Per the Sprinkler Notes on Drawing A-2, the sprinkler subcontractor shall provide the local authority with all required calculations and drawings. Sprinklers in and above the freezer and cooler are required (see Sprinkler Notes No. 5, 6, 7).
4. Drawings E-2 and E-4 indicate the required smoke detectors in the return air ducts at rooftop units RTU-1 and RTU-2. See the attached addendum which moves the smoke detectors from the return air duct to the supply duct.
5. The plans call for the store to have a total of 5 heating units, all indicated on Drawing M-2. There are three rooftop units located above Sales No. 103 and Cart Room No. 108. There are also two ceiling unit heaters located at Backrooms "A" and "B".
6. See the attached addendum changing the toilets to "Power Flush".
7. See the attached addendum changing the lavatory faucets to "Metered, Self Closing".

Should there be any additional information that you need, please contact me.

OPN ARCHITECTS, INC.

Thomas A. Popa, AIA
TAP/ls

cc: Jim Curran, Aldi Inc.



ADDENDUM NO. 1 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
January 25, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA

The following addendum items may cause changes to the issued drawings and specifications on drawing sheets and specification in addition to those indicated.

DRAWINGS

1. SHEET M-4 - PLUMBING MATERIAL LIST: WC-1 and WC-2 shall be pressurized flush type water closets. Change WC-1 to American Standard Model Number 2168.128. Change WC-2 to American Standard Model Number 2174.139.

Provide metered, self-closing handles for L-1 in lieu of wristblade handles currently shown.

2. DRAWING E-2 - POWER PLAN: The duct smoke detector specified for RTU-1 and RTU-2 shall be moved from the return duct to the supply duct.

TOWNSHIP OF BRICK

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



Joseph C. Scarpelli, Mayor

Township Council:
Victor Cantillo, President
Stephen C. Acropolis
Helen Fayad
Lee Hartman
Thomas G. Maiorine
Mary Lou Powner
Michael A. Thulen

Department of Administration & Finance

Division of Inspections
A. J. Cierzo
Construction Official
(908) 262-1024
Fax: (908) 920-4850

FACISIMILE CORRESPONDENCE

(908) 262-8954

DATE 2/7/96 TO FAX NO. 309 706-5967 PAGES 2

TO Don Bodenschatz

ATTN

FROM Arthur Cierzo

MESSAGE

1. This table shall be used unless superseded by the Building Code. For handicap requirements see local, state or national codes. Additional fixtures may be required where environmental conditions or special activities may be encountered.
4. Whenever both sexes are present in approximately equal numbers, multiply the total census by 60% to determine the number of persons for each sex to be provided for. This regulation only applies when specific information, which would otherwise affect the fixture count, is not provided.
5. Not more than 50% of the required number of water closets may be urinals.
6. In buildings with multiple floors, accessibility to the fixtures shall not exceed one vertical story.
8. In stores with floor areas of 150 sq. ft. or less, the requirements to provide facilities for use by employees may be met by providing central facilities located accessible to several stores. The maximum distance from entry to any store from this facility shall not exceed 300 ft.
9. Fixtures accessible only to private offices shall not be counted to determine compliance with this section.
12. Requirements for employees and customers may be met with a single set of restrooms. The required number of fixtures shall be the greater of the required number of employees, or the required number of customers.
13. If the design number of customers in food handling establishments exceeds 100, separate facilities for employees and customers are required.

TABLE 7.24.1.C
MINIMUM NUMBER OF REQUIRED PLUMBING FIXTURES¹

Building Use Group	Water closets (Urinals) ²		Lavatories	Drinking Water Facilities	Bath tub or Shower	Other	Note
	No. of Persons	Male ⁴	Female ⁴				
Mercantile/Business	Customers in stores, banks	1-50	1	1	1/2 no. req.	1/1000	
	shopping centers, office buildings and carry-out	51-300	2	2	water closets	people	2, 6, 7, 12
	food establishments where seating is not provided.	ea. add 1 300 over 300	add 1	add 2			

Notes for Table 7.24.1.C

1. This table shall be used unless superseded by the Building Code. For handicap requirements see local, state or national codes. Additional fixtures may be required where environmental conditions or special activities may be encountered.
2. Drinking fountains are not required in restaurants or other food handling establishments if drinking water service is available. Drinking water is not required for customers where normal occupancy is short term. A kitchen or bar sink may be considered the equivalent of a drinking fountain for employees.
4. Whenever both sexes are present in approximately equal numbers, multiply the total census by 60% to determine the number of persons of each sex to be provided for. This regulation only applies when specific information, which would otherwise affect the fixture count, is not provided.
5. Not more than 50% of the required number of water closets may be urinals.
6. In buildings with multiple floors, accessibility to the fixtures shall not exceed one vertical story.
7. Fixtures for public use as required by this section may be met by providing a centrally located facility accessible to several stores. The maximum distance from entry to any store to this facility shall not exceed 300 feet.
12. Requirements for employees and customers may be met with a single set of restrooms. The required number of fixtures shall be the greater of the required number of employees, or the required number of customers.

ADDENDUM NO. 1 - 1 PAGE
ALDI INC.
BRICK TOWNSHIP, NEW JERSEY
CENTER VALLEY DIVISION
P.O. BOX 369
CENTER VALLEY, PENNSYLVANIA 18034
MR. JIM CURRAN, DIRECTOR OF REAL ESTATE
(610) 798-9200
January 25, 1996

OPN ARCHITECTS, INC.
201 THIRD AVENUE SE
SUITE 210
CEDAR RAPIDS, IOWA

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Gary Casperson, Chairman
Walter F. Rehak, Vice Chairman
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Barbara Hiering
Robert S. Laureigh
John J. Mallon
Patricia Seeber
Warren Wolf
James F. Lacey, Freeholder Liaison
Seymour J. Kagan, Counsel



OCEAN COUNTY HEALTH DEPARTMENT

P.O. Box 2191
Toms River, N.J. 08754-2191
908-341-9700

Herbert W. Roeschke
Public Health Coordinator

January 31, 1996

Township of Brick
401 Chambers Bridge Road
Brick, New Jersey 08723

RE: Proposed Floor Plans
Block 1149 Lot 1
Aldi
140 Van Zile Road
Brick, NJ 08723

Dear Sir,

I have reviewed the floor plans for the above-referenced proposed floor establishments and have found them to be in substantial compliance with Chapter XII, the N.J. State Retail Food Code.

If you should have any questions, please feel free to contact me at this office.

Very truly yours,

Stephen Klaniecki
Stephen Klaniecki
Sanitary Inspector

cc: Brick Township Board of Health
Brick Township Construction Official (Arthur Cierzo)

SK:bd



OCEAN COUNTY HEALTH DEPARTMENT

No: _____

SANITARY INSPECTION REPORT

ESTABLISHMENT INFORMATION			
PHONE # Bk 1149 Lot 1 TEMP. 610-798-9200 EXT. 122		ESTABLISHMENT CODE 12	GOODS ☐ DESTROYED ☒ EMBARGOED
ESTABLISHMENT TRADING NAME ALDI		EVALUATION ☒ SATISFACTORY ☐ CONDITIONALLY SATISFACTORY ☐ UNSATISFACTORY	
NUMBER AND STREET 140 VAN ZILE ROAD			
CITY OR MUNICIPALITY BRICK	ZIP CODE 08723		
ESTABLISHMENT LICENSE NO. TO BE OBTAINED	COMMUN. CODE 1500	RISK II	WATER SUPPLY ☒ Public - Community ☐ Individual (Public - Non-Community)
OWNER INFORMATION (Complete this section only if different from establishment information)		TIME (2400 HOURS)	
NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT ALDI Inc. c/o Jim Curran		DATE 1-30-96	BEGIN 1450 END 1530
NUMBER AND STREET P.O. Box 369			
CITY OR MUNICIPALITY CENTER VALLEY	STATE PA	COMPLAINT NO. _____ COMPLAINT REC. _____ COMPLAINT INSPECTED _____	
ZIP CODE 18034	COMMUN. CODE _____		
INSPECTION TYPE ☐ COMPLAINT ☐ INITIAL INSPECTION ☐ REINSPECTION ☒ PLAN REVIEW ☐ CONFERENCE	TYPE OF ESTABLISHMENT ☒ RETAIL ☐ WHOLESALE ☐ VENDING MACHINE NO. OF MACHINES ☐ FROZEN DESSERTS ☐ OTHER	Herbert W. Roeschke Health Officer Sunset Avenue P.O. Box 2191 Toms River, N.J. 08754-2191 Telephone No. 908-341-9700	
		NAME OF INSPECTING OFFICIAL (Print) STEPHEN KLANIECKI	
		SIGNATURE OF INSPECTING OFFICIAL <i>Stephen Klaniacki</i>	PERMANENT REG. NO. B-1463

OCĖAN COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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H.D.67

Page 1 of 1 Pages

TOWNSHIP OF BRICK

DIVISION OF HEALTH

Nº 3175

OCEAN COUNTY, NEW JERSEY

SEWERAGE DATA

Property Owner: Date

Number of people who occupy unit

Street: No. Lot: Block:
(From Your Tax Bill)

Mailing Address:

Sewer Connection: Size: Number:

STRUCTURES: Type: Private:

Use: Public:

CLASSIFICATION Place (x) opposite

Domestic ☐ Mercantile ☐ Industrial ☐

Type:

Place number of units opposite fixtures and items below:

Public Toilets	Restaurant Sinks	No. Family Units
Private Toilets	Wash Racks	No. Rooms, each
Bath or Showers	Barber Chairs	Hosp. Rooms
Laboratories	Air Conditioning	Hospital or
Kitchen Sinks	gallons per day	Institutional
Floor Drains	Refrigeration	Occupants
Slop Sinks	gallons per day	Hotel Rooms
Laundry Tubs	Condensers	No. Employees
Drinking Fountains	gallons per day	No. Pupils
	Urinals	

DOMESTIC

Residential ☐
Church ☐
Hospital ☐
Hotel ☐
Rooming House ☐
Lodge Rooms ☐
Garage ☐
School ☐
Public Buildings ☐
Apartment Houses ☐
..... ☐

MERCANTILE

Store ☐
Office ☐
Barber or ☐
Beauty Shop ☐
Garage or ☐
Service Sta. ☐
Restaurant ☐
Tavern ☐
Soda Fountain ☐
Bank ☐
Theater ☐
..... ☐

INDUSTRIAL

Factory ☐
Shop ☐
Greenhouses ☐
Laundry ☐
Warehouse ☐
Car Wash ☐
..... ☐
..... ☐
..... ☐
..... ☐
..... ☐
..... ☐

Brick Twp. Sewer Connection Fee \$.....

Plumber

Plumbing Inspector's Fee \$.....

Plumbing Inspector

Channel Plaza
ALDI INC.

Called
Plumber
1-24-96 2:52

Called
Jim Curren
1-610-798-9200
apt 109 or 122 (Jims)
Curren called back 4:11 PM

add to Plumbing
app

- ↓
3 roof top units (HAC)
2 unit heaters (NOAC)

water heaters
are elect.

must be toilets - power flush
low faucets - manual self closing

Plumber returned
call 1-24-96
3:11 PM
was told about
Toilets + faucets
Jost

~~Handwritten scribble~~ need board of Health
9-2-96

Members

Gary Casperson, Chairman
Walter F. Rehak, Vice Chairman
Robert Singer, Secretary-Treasurer
Leon Dwulet, M.D.
Barbara Hiering
Robert S. Laureigh
John J. Mallon
Patricia Seeber
Warren Wolf
James F. Lacey, Freeholder Liaison
Seymour J. Kagan, Counsel



OCEAN COUNTY HEALTH DEPARTMENT

P.O. Box 2191
Toms River, N.J. 08754-2191
908-341-9700

Herbert W. Roeschke
Public Health Coordinator

January 31, 1996

Township of Brick
401 Chambers Bridge Road
Brick, New Jersey 08723

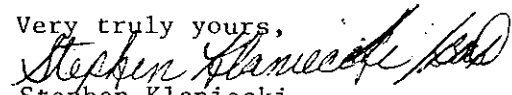
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Block 1149 Lot 1
Aldi
140 Van Zile Road
Brick, NJ 08723

Dear Sir,

I have reviewed the floor plans for the above-referenced proposed floor establishments and have found them to be in substantial compliance with Chapter XII, the N.J. State Retail Food Code.

If you should have any questions, please feel free to contact me at this office.

Very truly yours,


Stephen Klaniecki
Sanitary Inspector

cc: Brick Township Board of Health
Brick Township Construction Official (Arthur Cierzo)

SK:bd



OCEAN COUNTY HEALTH DEPARTMENT

No: _____

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NUMBER AND STREET 140 VAN ZILE ROAD		WATER SUPPLY ☒ Public - Community ☐ Individual (Public - Non-Community)	
CITY OR MUNICIPALITY BRICK	ZIP CODE 08723		
ESTABLISHMENT LICENSE NO. TO BE OBTAINED	COMMUN. CODE 1500	RISK II	
OWNER INFORMATION (Complete this section only if different from establishment information)		TIME (2400 HOURS)	
NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT ALDI Inc. c/o Jim Curran		DATE 1-30-96	BEGIN 1450 END 1530
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OCEAN COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

CONTINUATION SHEET[illegible]

Members

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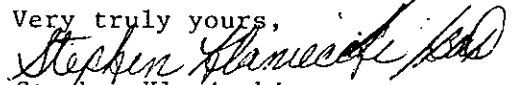
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Stephen Klaniecki
Sanitary Inspector

cc: Brick Township Board of Health
Brick Township Construction Official (Arthur Cierzo)

SK:bd



OCEAN COUNTY HEALTH DEPARTMENT

No: _____

SANITARY INSPECTION REPORT

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NUMBER AND STREET 140 Van Zile Road			
CITY OR MUNICIPALITY BRICK	ZIP CODE 08723		
ESTABLISHMENT LICENSE NO. To Be Obtained	COMMUN. CODE 1500	RISK II	WATER SUPPLY ☒ Public - Community ☐ Individual (Public - Non-Community)

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(Complete this section only if different from establishment information)

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OCEAN COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

[illegible]

H.D.67

Page 1 of 1 Pages

SIZING FOR WATER AND SEWER SERVICES

Property Owner _____ Date 2-2-96

Property Address Aldi Food - Channel Plaza, Block 1149 Lot 1

Zoning _____ Use Group _____

Contractor _____ License No. Registration _____

Water Main Size _____ Water Pressure _____ Sewer Main Size 7

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1: Water Closet	<u>3</u>	<u>(5) 15</u>	<u>()</u>
2. Lavatory	<u>2</u>	<u>(2) 4</u>	<u>()</u>
3. Bath Tub	_____	<u>()</u>	<u>()</u>
4. Shower Stall	_____	<u>()</u>	<u>()</u>
5. Kitchen Sink	<u>1</u>	<u>() 2</u>	<u>()</u>
6. Service Sink	<u>1</u>	<u>() 3</u>	<u>()</u>
7. Laundry Tray	_____	<u>()</u>	<u>()</u>
8. Dishwasher	_____	<u>()</u>	<u>()</u>
9. Washing Machine	_____	<u>()</u>	<u>()</u>
10. Urinal	<u>1</u>	<u>() 5</u>	<u>()</u>
11. Floor Drain	_____	<u>()</u>	<u>()</u>
12. Drinking Fountain	<u>1</u>	<u>() 25</u>	<u>()</u>
13. Air Conditioner (water cooled)	_____	<u>()</u>	<u>()</u>
14. Dental Unit	_____	<u>()</u>	<u>()</u>
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	<u>()</u>
17. _____	_____	<u>()</u>	<u>()</u>
18. _____	_____	<u>()</u>	<u>()</u>

Total 29.25

Gallons per minute 20

Size of Service 1"

Date: 2-2-96

Approved: [Signature]
Brick Township Plumbing Inspector

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



Joseph C. Scarpelli, Mayor

Township Council:
Michael A. Thulen, President
Stephen C. Acropolis
Martin J. Anton
Victor Cantillo
Helen Fayad
Lee Hartman
Mary Lou Powner

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(908) 262-1048

January 10, 1996

Aldi, Inc.
2700 Savcon Valley Road
Center Valley, PA 18034

RE: Block 1149 Lot 1
Channel Plaza

Dear Mr. J. Curran:

The Township of Brick has enacted Ordinance 354-2C-93 in conjunction with our Fair Share Plan, which was certified by the New Jersey Council on Affordable Housing on February 3, 1993.

This Ordinance requires that applicants for commercial construction which affects an added value assessment of \$15,000.00 or more pay a fee in the amount of 1% of the total value added assessment. The Municipal Tax Assessor has estimated that the added equal assessed value for the work to be completed under the construction permit application for Block 1149, Lot 1 is \$310,020.00, which results in a total fee due in the amount of \$3,100.20. Therefore, it is required that one half of the required fee (\$1550.10) be paid at this time, said check being made payable to the Township of Brick for deposit in the Affordable Housing Trust Fund. The balance to be collected prior to the issuance of the Certificate of Approval/Occupancy. Until we receive the above due amount, your application will remain in the Affordable Housing Office.

We also suggest that you notify this office two weeks prior to your request for a Certificate of Approval so that the Tax Assessor's office will have adequate time to prepare a final assessment.

If you have any questions or wish to discuss this matter, please contact me.

Sincerely,



Carol A. Wolfe
Affordable Housing Administrator

CAW/bmb

cc: Frederick R. Millman, CTA, Tax Assessor
Arthur J. Cierzo, Construction Code Official

FIREPLACE & WOOD STOVE: If masonry chimney is being built on outside of house, submit two plot plans showing location along with two copies of cross section of foundation, hearth and throat. A wood burning stove should be installed according to manufacturers specifications.

PLUMBING: Submit 1 Plumbing Technical Section with the heatloss, gas pipe sizing and a isometric sketch. Also a list of any existing plumbing fixtures.

PORCH ENCLOSURES: If you live in a development with an Association you must first receive the Association's approval. Bring us a copy of the approval, submit 2 copies of cross section drawing showing how the porch will be constructed from the footing (if it's not there already) to the roof, and what materials will be used. Also submit 2 copies of the elevation view showing how the porch will be enclosed & the snow load. Two plot plans are required showing location of porch and the distance to your property lines.

ROOFING: Just fill out application and Building Technical form.

SHEDS: If you're building your own shed, submit 2 copies of cross section of materials being used and one plot plan showing the location of shed on property and the setbacks to the property lines. If a pre-fab shed submit plot plan showing location and setbacks. In both cases you must state how the shed will be anchored.

SIDING: Just fill our application and Building Technical form.

SWIMMING POOLS: Submit 2 plot plans showing location of swimming pool on the property and distance to the property line, 2 sealed pool designs, and a brochure of the filter system. **NEW STATE REQUIREMENT,** information regarding door alarm.

ABOVE GROUND: Submit 1 plot plan showing location of pool and the distance to the property line, a brochure of pool and filter system. **NEW STATE REQUIREMENT,** the ladder or stair area must be fenced in with 48 inch X 1 1/4 inch chain link fence, with a self closing and latching gate.

ZONING REQUIREMENTS FOR ADDITIONS AND NEW HOMES: All plot plans must show the required yard areas for the particular zone. All yard requirements are shown to the building line. The building line is a line formed by the intersection of a horizontal plane and a vertical plane that coincides with the most projected exterior surface of the building including eaves and overhangs.

All yard areas facing on a public street shall be considered a front yard and shall conform to the minimum front yard requirements for the particular area. The rear yard shall be deemed to be the area opposite the narrowest lot frontage and the remaining lot yard shall be determined to the side yard.

TOWNSHIP OF BRICK

TYPES OF WORK THAT REQUIRES BUILDING PERMITS AND WHAT THE REQUIREMENTS ARE FOR OBTAINING A BUILDING PERMIT

Please read this requirement list carefully. The applicant is completely responsible for submitting everything listed below. Failure to do so will result in the delay of your permit...

ADDITION: Submit two plot plans (see zoning below) showing the location of the addition with setbacks marked on the plot plan. Submit two sets of drawings consisting of cross section drawings showing all materials from footing to roof, and finished elevation view of the sides of the addition. If more than one room is involved, submit two floor plans. If plumbing work to be done by the homeowner state this, otherwise a plumber must sign and seal the plumbing tech section. ELECTRICAL permits are obtained from Ocean County Electrical Bureau, 2 Mott Place, Toms River. If the plans are drawn by the homeowner, the owner signs each page of plans and the owner section on the application.

ALTERATION: For inside changes, submit 2 copies of floor plan showing the changes.

BULKHEADS: As of September 26, 1980, on man-made lagoons only, a permit from the State is an approval from the Army Corps of Engineers. This approval is required for a permit in Brick. On all other natural waterways such as Metedeconk River, Kettle Creek, etc. both State and Army permits are necessary. Submit two plot plans showing location of bulkhead and the bulkhead design sealed by an Engineer.

DECK: Two sets of plans showing how the deck will be constructed from the footing to the rails, (a top view, & side view) what materials are to be used, their size, and the depth of the footings. Also, include one plot plan showing the location of the proposed deck and what the distance will be to the side and rear property lines.

ELECTRICAL: If there is Electrical work to be done a permit is to be obtained from the OCEAN COUNTY ELECTRICAL BUREAU, TOMS RIVER. The phone number is (908) 244-2121. IT IS THE OWNERS RESPONSIBILITY TO OBTAIN ELECTRICAL PERMITS. NO CERTIFICATES OF OCCUPANCY WILL BE ISSUED WITHOUT A FINAL ELECTRICAL APPROVAL.

FENCES: Submit one Plot Plan showing the location of the fence by placing X's along the property line that the fence will be on.

MR
Curran
610-798-
9200
X100

☐ EXEMPT
☒ PRELIMINARY 1-5-96
☐ TEMPORARY
☐ FINAL

12-2113-100-1-0/95

CERTIFICATE OF COMPLIANCE

NAME: ALDI INC. DATE: 1/5/96

ADDRESS: 2700 SWEET VALLEY RD
CENTER HALL, PA 16831

PROPERTY LOCATION: CHURCH 1124

ACCOUNT NO: _____ BLOCK 1149 LOT 1

INCLUSIONARY DEVELOPMENT

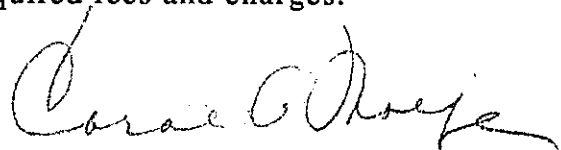
☐ Affordable	Fee Required	<u>\$500.00</u>	Date	_____
	Down Payment	_____	Date	_____
	Balance	_____	Date	_____
	Pd. in Full	_____	Date	_____
☒ Market Rate	No Fee Required	_____	Date	<u>1/5/96</u>

MANDATORY DEVELOPER FEES

☐ Residential is .005%
☒ Commercial is .01%

Estimated Fee : \$3100.00 Date: 1/9/96
Down Payment : \$1550.00 Date: 1/18/96 #225031
Final Fee : _____ Date: _____
(Less down payment)
Balance : _____ Date: _____
Pd. in Full : 1449.90 Date: 6-19-96 #314900

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.



CAROL A. WOLFE
AFFORDABLE HOUSING ADMINISTRATOR

SIZING FOR WATER AND SEWER SERVICES

Property Owner _____ Date 4-17-96

Property Address ALDI FOOD STORES Chapel Plaza Block 1149 Lot 1

Zoning _____ Use Group _____

Contractor _____ License No. Registration _____

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	<u>3</u>	() <u>15</u>	() _____
2. Lavatory	<u>2</u>	() <u>4</u>	() _____
3. Bath Tub	_____	() _____	() _____
4. Shower Stall	_____	() _____	() _____
5. Kitchen Sink	<u>2</u>	() <u>8</u>	() _____
6. Service Sink	_____	() _____	() _____
7. Laundry Tray	_____	() _____	() _____
8. Dishwasher	_____	() _____	() _____
9. Washing Machine	_____	() _____	() _____
10. Urinal	<u>1</u>	() <u>5</u>	() _____
11. Floor Drain	_____	() _____	() _____
12. Drinking Fountain	<u>1</u>	() <u>126</u>	() _____
13. Air Conditioner (water cooled)	_____	() _____	() _____
14. Dental Unit	_____	() _____	() _____
15. Lawn Sprinkler No. of Heads	_____	() _____	() _____
16. Fire Sprinkler No. of Heads	_____	() _____	() _____
17. _____	_____	() _____	() _____
18. _____	_____	() _____	() _____

Total 32,26

Gallons per minute _____

Size of Service 1"

Date: 4-17-96

Approved: JAH
Breck Township Plumbing Inspector

BRICK TOWNSHIP PLANNING BOARD
PRELIMINARY AND FINAL SITE APPROVAL
WITH VARIANCES AND DESIGN WAIVERS

RESOLUTION R-66-95

PAGE 1

CASE NO. PB-2163-ASP-V-6/95

October 25, 1995

WHEREAS, Aldi, Inc., with a mailing address of 2700 Saucon Valley Road, Center Valley, PA 18034, has applied to the Brick Township Planning Board for preliminary and final site approval with variances and design waivers pursuant to N.J.S.A. 40:55D-46, 50, 51, and 60; and

WHEREAS, proof of service as required by law upon appropriate property owners and governmental bodies has been furnished and determined to be in proper order; and

WHEREAS, a public hearing was held on October 4, 1995 in the Municipal Building at which time testimony and exhibits were presented on behalf of the applicant, and all interested parties having been heard; and

WHEREAS, the Board makes the following factual findings and findings of law:

1. This property is designated as Block 1149, Lot 1 on the Municipal Tax Map.

2. The property is located in the B-3 Highway Development Zone.

3. The applicant proposes to occupy 15,440 sq. ft. of an 50,400 sq. ft. existing building to operate Aldi Supermarket. The existing 50,400 sq. ft. building was formerly occupied by a Channel Home Improvement Center, and presently, 25,200 sq. ft. are occupied by a Sears Outlet Store, 10,080 sq. ft. are vacant, with the remaining 15,440 sq. ft. to be utilized by the proposed Aldi Supermarket. The building is located within the Channel Plaza Commercial Center and supported by existing site amenities such as parking, access drives and landscaping. In addition to occupying the

*File-2
Aldi
Goldstein
Lew Smith
Jond
Curley
Bldg
Eng: 2
Zoning
B.F.S.
COAH*

existing building space, the applicant proposes a 320 sq. ft. loading dock and ramp. The provision of the loading dock will require an adjustment of the Fire Lane in the rear of the building, the reduction of existing landscaping and a rear setback variance.

4. Lynch, Giuliano & Associates prepared a report to the Board dated August 17, 1995. The Board hereby adopts the findings in that report and incorporates that document in this Resolution by reference.

5. The Board Planner, Michael P. Fowler, prepared a report to the Board dated September 1, 1995. The Board hereby adopts the findings in that report and incorporates that document in this Resolution by reference.

6. Kevin C. Batzel, Bureau Chief/Fire Official, prepared a report to the Board dated July 28, 1995. The Board hereby adopts the findings in that report and incorporates that document in this Resolution by reference.

7. Kenneth Baenziger, Traffic Safety Officer, prepared a report to the Board dated July 21, 1995. The Board hereby adopts the findings in that report and incorporates that document in this Resolution by reference.

8. The following variances have been applied for:

<u>Bulk Requirement</u>	<u>Required</u>	<u>Provided</u>
Min. Rear Setback	50 Ft.	41.80 Ft.
No Parking Spaces	539	483 *
Max. Sign Height	25 Ft.	29 Ft.*
Min. Sign Setback from property line	50 Ft.	10 Ft.*
Min. Sign Setback from residential zone	200 Ft.	70 Ft.*

Parking in Residential
Buffer

60 Ft.

40 Ft.*

*Existing Conditions

The deviation from the minimum sq. ft. area of the sign is as a result of the location of the existing sign, in that the enlarged sign is needed in order to be viewed by the travelling public based upon the trees surround the signs. The Board finds it would be unreasonable to impose a requirement that the sign be altered to comply with this Ordinance Requirement.

The applicant has requested a waiver for the submission of drainage calculations.

9. The Board finds the following variances are reasonable and should be granted because:

(a) The deviation from the minimum rear setback distance for the building is a result of the existing location of the building. The Board finds that it would be unreasonable to impose a requirement that the building be altered to comply with this Ordinance requirement.

10. In regard to the remaining variances, they are all existing conditions and were approved when the initial applicant appeared before the Planning Board.

11. The Board finds that the requested design waiver is reasonable and should be granted in that the applicant is extending the existing drainage area and the impervious area is minimal.

12. The applicant has complied with the requirements of the Site Plan Ordinance and the overall development plan for this property constitutes a substantial upgrading of the Multi-Tenant Commercial Building and is consistent with the

intent and purpose of the Municipal Development Ordinance. Accordingly, the Board finds that the relief requested can be granted without substantial detriment to the public good and will not substantially impair the intent and purpose of the Township Zoning Ordinance or Master Plan.

NOW, THEREFORE, BE IT RESOLVED by the Brick Township Planning Board on this 25th day of October, 1995, that this application be approved subject to the following conditions:

1. The applicant shall comply with all standard Planning Board conditions for site plan approval as set forth on Attachment "A."

2. The applicant shall comply with all representations and agreements made by the applicant or its attorney during the presentation of this case.

3. The applicant shall comply with all the terms and conditions proposed in the report of Lynch, Giuliano & Associates dated August 17, 1995.

4. The applicant shall comply with all of the terms and conditions in the report of Michael P. Fowler dated September 1, 1995.

5. The applicant shall comply with all of the terms and conditions proposed in the report of Kevin C. Batzel, Bureau Chief/Fire Official, dated July 28, 1995, in and about the entire area surrounding the Aldi store.

6. The applicant shall comply with all of the terms and conditions proposed in the report of Kenneth Baenziger, Traffic Safety Officer, dated July 21, 1995.

7. The applicant is required to landscape in the area

immediately adjacent to the building in accordance with the landscape plan, Sheet 2 of 4, dated 4/12/95, last revision date 6/23/93 in regard to Resolution R-13-87 which was approved on January 28, 1987. The aforesaid landscape plan was prepared by Donald Smith, and the applicant was New Jersey Special Realty Corporation, Case No. 1551. More particularly, the applicant is to replace 11 trees in accordance with the regular plan.

8. In regard to the trash enclosure, the applicant will provide a masonry enclosure similar to the facade of the building with gates of chain link, and subject to the approval of the Fire Safety Officials, as well as the Planner for the Planning Board.

✓ 9. The applicant shall bring the handicap parking in compliance with the ADA requirement for handicap parking, on the eastern side of the Adli store.

✓ 10. The applicant shall locate 3 cart corals in the parking lot, at a location to be agreed upon between Aldi, the Board Planner and Engineer. There will also be one cart coral under the canopy in front of the store.

✓ 11. A sign will be installed in accordance with the rendering submitted by applicant to the Planning Board, said sign totalling 25 ft. in height, 128 sq. ft. sign surface, and the sign is to be installed on the Route 70 side of the property, at a location 10 ft. south of the current sign; said site location agreed upon at a site meeting with the Board Planner. The current sign on Van Zile Road 10 feet from the proposed site for the new sign will be removed.

✓ 12. The applicant shall replace in kind all shrubs that are taken down and/or destroyed by the construction.

RESOLUTION: R-66-95

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CASE NO. 2163-ASP-V-6/95

October 25, 1995

MOVED BY Councilwoman Fayad

SECONDED BY: Mrs. Fox

VOTING IN THE AFFIRMATIVE: Mr. Anderson Mr. Cierzo

Councilwoman Fayad Mrs. Fox Mr. Heidrick Mrs. LaDuke

Mr. Petoia Mr. Underwood Mr. Reo

VOTING IN THE NEGATIVE: _____

INELIGIBLE TO VOTE: _____

PRESENT BUT NOT VOTING: Ms. Doyle

ABSTAINING: _____

ABSENT: Mr. Scherer

CERTIFICATION

I, E. Joan Kull, Clerk of the Planning Board of the Township of Brick, County of Ocean, State of New Jersey, do hereby certify that the foregoing resolution was duly ADOPTED by the said Planning Board of the Township of Brick at a regular meeting held on the 25th day of October, 1995.

IN WITNESS WHEREOF, I have set my hand this 26th day of October, 1995.

E. Joan Kull
E. JOAN KULL
Clerk of the Planning Board

ATTACHMENT "A"

BRICK TOWNSHIP PLANNING BOARD

STANDARD CONDITIONS FOR SITE PLAN APPROVAL

RESOLUTION R-66-95

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CASE NO. 2163-ASP-V-6/95

October 25, 1995

1. Applicant shall obtain certification by the Local Soil Conservation District of a plan for soil erosion and sediment control in accordance with N.J.S.A. 4:24-39 et seq., commonly known as the "Soil Erosion and Sediment Control Act."

2. All materials, methods of construction and details shall be in conformance with the current "Engineering Specifications and Construction Details" of the Township of Brick, which are on file in the office of the Township Engineer.

3. Applicant shall obtain all approvals required by any Federal, State, County or Municipal agency having regulatory jurisdiction of this development. Upon receipt of such approval(s), the applicant shall supply a copy of the permit(s) to the Board. In the event that any other agency requires a change in the plans approved by this Board, the applicant must reapply to the Brick Township Planning Board for approval of that change.

4. Applicant shall resubmit this entire proposal for re-approval should there be any deviation from the terms and conditions of this resolution or the documents submitted as part of this application, all of which are made a part hereof and shall be binding on the applicant.

5. Applicant shall provide a statement from the Brick Township Tax Collector that all taxes are paid in full as of the date of this Resolution and as of the date of the fulfillment of any condition(s) of this Resolution.

6. Prior to the issuance of a construction permit, the

RESOLUTION R-66-95

PAGE 8

CASE NO. 2163-ASP-V-6/95

October 25, 1995

applicant shall furnish the Township Clerk with a cash bond and performance guarantee in an amount to be determined by the Township Engineer.

7. Applicant shall post an inspection fund with the Township Clerk in an amount to be determined by the Township Engineer.

8. No soil shall be removed from the site without the written approval of the Township Council.

9. The applicant shall comply with all provisions and pay all fees established under Article VB (Mandatory Development Fees) of Chapter 190 of the Code of the Township of Brick.