

**V. FEE SUMMARY (for office use only)**

1. Proposed Work-site at 140 VAN ZILE ROAD / 11251

2. Name of Owner, in Fee: BRICK PIERA ASSOC Tel. ()

Address 1688 VICTORY ROAD STATEN ISLAND, N.Y. 10214
street municipality zip code

3. Ownership in Fee: Public Private

4. Principal Contractor: Phila Sign Co Tel. (609) 829-1460

Address 707 W SPRING GARDEN ST PALMYRA, N.J. 08065

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

Federal Emp. No. 23-0973470 Social Security No.

5. Architect or Engineer Tel. ()

Address

6. Responsible Person in Charge of Work AL YOUNG UP Tel. (608) 829-1460

1. ☐ Minor work
(single trade)
2. ☐ Small Job (\$5,000
and no prior approvals)
3. ☐ New Building
4. ☐ Addition
5. ☒ Alteration *5162*
6. ☐ Fire Protection
7. ☐ Plumbing
8. ☐ Electrical
9. ☐ Elevator Devices
10. ☐ Asbestos Abatement
11. ☐ Demolition

TOTAL COSTS

Est. Cost

OPTIONAL (for office use only)[illegible]

III. DO YOU WANT: (optional) 1 ☐ Partial Releases 2 ☐ Prototype Processing

1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks

2. ☐ High Pressure Boilers

3. ☐ Pressure Vessels

4. ☐ Refrigeration Systems

5. ☐ Cross-Connections/Backflow
Preventers

6. ☐ Hazardous Uses/Places of Assembly

7. ☐ Sprinklers

8. ☐ Smoke Control Systems in Open Wells

9. ☐ Underground Storage Tanks

		Update	Update
1. Building	\$ 256		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$ 256		
7. Less 20% for State Plan Review	26		
8. Subtotal	\$ 7		
9. DCA Training Fee			
10. Subtotal	\$ 20		
11. Cert. of Occupancy	571.50		
12. Other ZPA			
13. TOTAL	\$ 324		

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}								
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A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:

Before Construction

After Construction

Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change in Use Group,
Indicate Former:

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. AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

- B. ☐ I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

- C. ☐ I further certify that I will perform or supervise the following work:

C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical C.4. ☐ Plumbing

- D. ☐ I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State county, and local prior approvals have been given, including such certification as the construction official may require

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State county, and local prior approvals have been given, including such certification as the construction official may require

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

☒ Check if contractor.

Agent Name Phila. Sica Co

Address 707 W SPRING GARDEN ST
PALMYRA, NJ 08065

Telephone (609) 829-1460

Signature Richard J. Jones Date 2-13-96

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									IMPORTANT A.A.H.B.T. - EXEMPT
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

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. _____	_____	_____	_____
☐ Certificate of Approval	No. _____	_____	_____	_____



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

2/26/96
209-96

IDENTIFICATION Block

11419

Lot

1

Work Site Location

141 Van Dyke Rd

Contractor

Philan Lion Co.

Address

Owner in Fee

Philan Lion Co.

Address

141 Van Dyke Rd

Tele. ()

D. M. P. V.

0.00

Lic. No. or Bldrs. Reg. No.

Exp. Date

11/90

Federal Emp. No.

LOT

0.00

or Social Security No.

1 #

is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER☐ ELECTRICAL ☐ FIRE PROTECTION☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Sign

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$

9000.00

CONSTRUCTION OFFICIAL

U.C.C. Form F-170C

1 WHITE - OFFICE

2 CANARY - TAX ASSESSOR

3 PINK - JACKET

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building

2516 - PLUMBING

56.00

Plumbing

D. C. R.

26.00

Electrical

G / U

7.00

Fire Protection

ZUNEPLUT

20.00

Other

TOTAL

15.00

Other

2516 - CHECK

24.00

DCA Training Fee

7 CHANGE

0.00

Cert. of Occ.

2516

Other

02/26/96 NO. 5 0023A005

12:25

Total

3241

Check No.

3251

Cash

Collected By:



CONSTRUCTION PERMIT

Date Issued _____

Control # _____

Permit # _____

IDENTIFICATION Block 1149 Lot 1Work Site Location 140 VAN ZILE RD
BRICK, N JOwner in Fee BRICK PLAZA ASSOCAddress 1688 VICTORY RD
STATEN ISLAND, N Y 10214

Tele. (____) _____

Contractor Phila Sign CoAddress 707 W SPRING GARDEN ST
PALMYRA N J 08065Tele. (609) 829-1460

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

Federal Emp. No. 23-6973470

or Social Security No. _____

is hereby granted permission to perform the following work:

- ☒ BUILDING ☐ PLUMBING ☐ OTHER _____
☐ ELECTRICAL ☐ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

ERECT ① PYLON SIGN "ALDI"
8'X16' D/F INT-ILLUM

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$ 9,000⁰⁰**PAYMENTS (Office Use Only)**

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

CONSTRUCTION OFFICIAL _____

(see reverse side)



Date Received
Date Issued
Control #
Permit #

2/26/96
2001-96

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 3610 VAN ZILE RD
Owner in Fee BEICK DIENH, ASSOC
Address 1618 VICTORY RD
Address STARTED 150000 NY 16214
Tele. () PHILM. SIGN CO
Contractor 707 W SPAINING GARDEN ST
Address 291, 4444 NT 04065
Tele. (609) 323-1466
Lic. No. or Bids. Reg. No. 23-0973470 or Social Security No.
Federal Emp. No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☐ No Plans Req.			Type:	Failure	Approval
☐ All			Footings		
☐ Footing			Foundation		
☐ Foundation			Slab		
☐ Frame			Frame		
☐ Other			Insulation		
Joint Plan Review Required:			Finishes:		
☐ Elec. ☐ Plumb. ☐ Fire			Energy		
SUBCODE APPROVAL			Mechanical		
☐ CO ☐ CCO ☐ CA			TCO		
Date:			Other		
Approved By:			Final		

B. BUILDING CHARACTERISTICS

Use Group Present Proposed
Constr. Class Present Proposed
No. of Stories
Height of Structure Ft.
Area—Largest Floor Sq. Ft.
New Bldg. Area/All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ 9,000.
2. Alteration \$ 4,000.
3. Total (1+2) \$ 13,000.

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature Richard J. Hines

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK EXISTING FENCE

11500 (1) 14200 SIGN 8'X16'
01F 127-12200 "NOVI" STARS

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration
- ☐ Roofing
- ☐ Siding
- ☐ Fence 128 Height (6' or over) Sq. Ft.
- ☐ Sign
- ☐ Pool
- ☐ Asbestos Abatement
- ☐ Other
- ☐ Other
- ☐ Demolition

(Office Use Only)
FEE

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

John Morsha
808-714-1722



**ELECTRICAL
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

MMR 18.97001973

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

Block 149 Lot 1
Work Site Location RT 70 + Van Zile Rd
Owner in Fee Brick Plaza Associates
Address 1658 Victoria Boulevard
Staten Island NY
Contractor ETC Inc Savanah
Address 5105 1/2 14th Ave
Belmont NJ
Tele. (808) 280-5815
Lic. No. 3249
Federal Emp. No. _____ or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as Dry clean maid Utility Co. ICPC
Est. Cost of Elec. Work \$ 1,340.92

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS			
Type:		Failure	Failure	Approval	Initial
☐ No Plans Required					
Joint Plan Review Required:					
☐ Bldg. ☐ Plumb.					
☐ Elevator					
☐ Elec. Plans Approved <u>noted</u>					
Date: <u>9/20/19</u>					
Approved by: <u>MM</u>					
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 record 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	
10		Fixtures (1)	
5		Receptacles (2)	
3		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 Filler Motor	
		Pool Lights	
		Kw Water Heater(s)	
1		Kw Central heat: <u>Steam boiler</u> oil, gas or elec.	
		Kw Baseboard Heat Units	
		Thermostats	
		hp Heat Pump	
1		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	
1		Other <u>dry clean maid</u>	

FEE (Office Use Only)

Paid ☐ Check # <u>2978</u>	Administrative Surcharge	\$	
	Minimum Fee	\$	70
	DCA Training Fee	\$	1
Collected by: _____	TOTAL FEE	\$	71

U.C.C. Form F-120B 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy



ELECTRICAL
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

APR 23 96 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.

Block 1149 Lot 140 Van Zile Rd

Work Site Location Beck Pinner Assoc

Owner in Fee Beck Pinner Assoc

Address 1685 Victoria Rd

STATED ISLANDLY 10214

Tele. () 338-7308

Contractor CLAUSS ELEC INC

Address 3001 BALCHTON ST

Phila Pa 19149

Lic. No. 6190 A

Federal Emp. No. 2314261 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 \$ 156.

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:

Approved By:

INSPECTIONS

Type: Failure 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

01909

D. TECHNICAL SITE DATA

NO. SIZE ITEM

Fixtures (1)

Receptacles (2)

Switches (3)

Total 1 + 2 + 3

Kw Range

Kw Oven(s)

Kw Surface Unit

hp Dishwasher

hp Garbage Disposal

Kw Dryer

Kw A/C Unit

Burglar Alarms

Intercoms Panels

Smoke Detectors

hp Whirlpool/spa

Pool Bonding

hp Pool Filter Motor

Pool Lights

Kw Water Heater(s)

Kw Central heat

oil, gas or elec.

Kw Baseboard Heat Units

Thermostats

hp Heat Pump

hp Pump(s)

Amp Motor Control Center/Sub Panels

Signs

Light Standards

hp Motors—Fractional H.P.

hp Motors—All Others

Kw Transformers

Kw Generators

Amp Service Entrance

Other

Paid by Check # 3418 Administrative Surcharge

Minimum Fee

DCA Training Fee

TOTAL FEE

U.C.C. Form F-120B

1 White = Inspector Copy

2 Canary = Office Copy

3 Pink = Office Copy

4 Gold = Applicant Copy

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: February 15, 1996

1996 Z 0082

Block 1149

Lot 1

Zone B-3

Property Address: 140 Van Zile Road (former Channel Plaza)

Owner: Brick Plaza Associates

(Phone): _____

Applicant: Philadelphia Sign Co.

(Phone): 609-829-1460

Use: Ground sign for shopping plaza

Proposed Construction (if any): 8' by 16' ground sign, 128 Square feet, 25
feet high, 10 feet south of existing sign on the Route 70 side
of the property.

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

Existing ground sign to be removed.

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

To:

PHILADELPHIA SIGN CO.

707 W. SPRING GARDEN STREET

PALMYRA, N. J. 08065-1798

AREA CODE 609 • 829-1460

FAX NUMBER 609 • 829-8549

SUBJECT

DATE

Reply Message

FOLD -

MESSAGE

PLEASE MAIL "ALD1" SIGN PERMIT TO
Phila Sign Co

Thru

SIGNED

DICK JANERU

REPLY

DATE OF REPLY

REPLY TO

FOLD -

LOCATION

ALD1
140 VAN ZILE RD

SIGNED

SEND WHITE AND PINK COPIES WITH CARBONS INTACT. PINK COPY IS RETURNED WITH REPLY.

To:

MUNICIPAL BLDG
401 CHAMBERS BRIDGE RD
BRICK, N.J. 08723
ATTN: SEAN KINNEVY

PHILADELPHIA SIGN CO.

707 W. SPRING GARDEN STREET
PALMYRA, N. J. 08065-1798
AREA CODE 609 • 829-1460
FAX NUMBER 609 • 829-8549

SUBJECT

"ALDI" PYLON SIGN

FOLD -

140 VAN ZILE RD

DATE

2-13-96

Reply Message

MESSAGE

SIGN PERMIT APPLIC'S AS APPROVED BY
SIGN VARIANCE

Thanks

SIGNED

DICK JANECIC

REPLY

DATE OF REPLY

REPLY TO

FOLD -

SIGNED

SEND WHITE AND PINK COPIES WITH CARBONS INTACT. PINK COPY IS RETURNED WITH REPLY.

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.

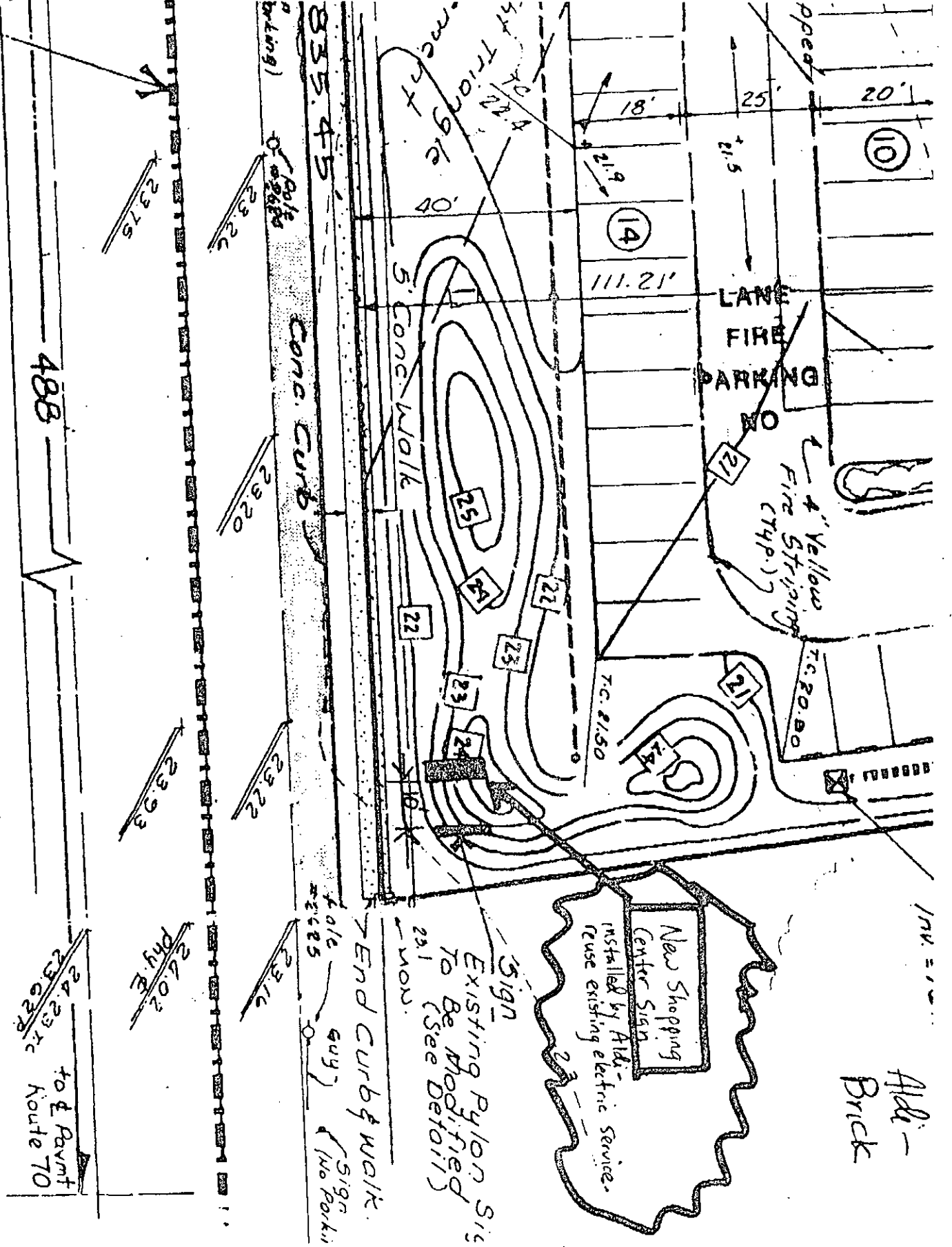
9. The applicant shall bring the handicap parking in compliance with the ADA requirement for handicap parking, on the eastern side of the Aldi store.

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.

*Aldi
Brick*

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.



10

14

LANE FIRE PARKING

NO

4 Yellow Fire Stripping (TYP.)

70.20.00

70.21.50

21

New Shopping Center Sign

Installed by Aldi - reuse existing electric service

Aldi - Brick

Sign - Existing Pylon Sign To Be Modified (See Detail)

CONC. CURB

END CURB & WALK

40' (No Sign)

5' CONC. WALK

22

25

24

22

23

23

24

22

23.1

23.1

23.1

23.1

23.1

23.1

23.1

23.1

23.1

23.1

23.25

23.25

23.20

23.22

23.16

23.93

24.02

24.02

24.02

24.02

24.02

24.02

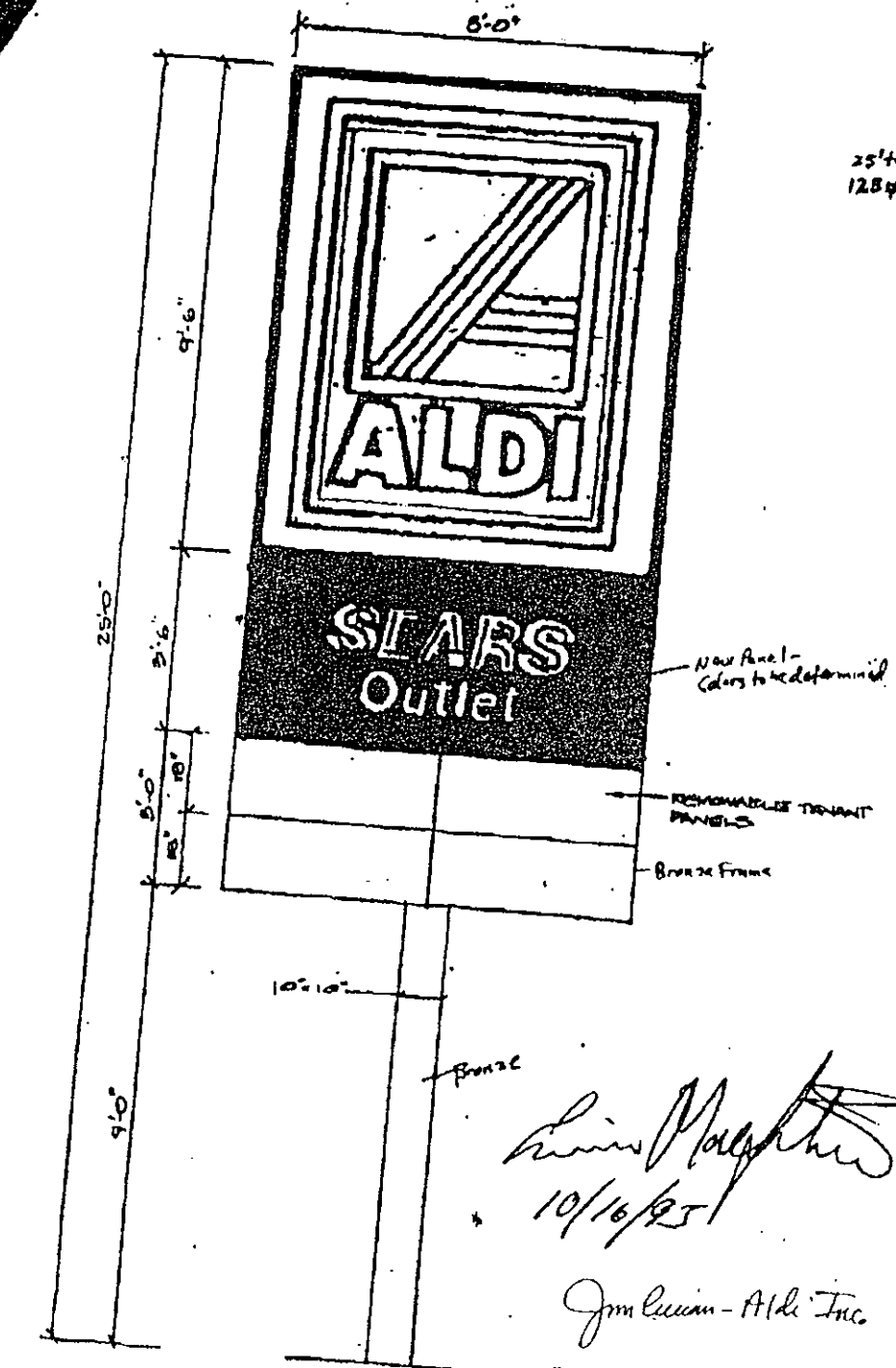
24.02

24.02

24.02

488

to & From Route 70



PLAN ELEVATION
SCALE: 1/8" = 1'-0"



Philadelphia Sign Company
707 West Spring Garden Street
Philadelphia, New Jersey 08045-1799
(609) 829-1460 Fax (609) 829-1461
Christopher A. Reed
Account Executive