TOWNSHIP OF BRICK

Detached Building — Satalite Bldg.

CONSTRUCTION PERMIT APPLICATION

RECEIVED MAR 31 — Page

Little People's Palace BUILDING

I. IDENTIFICATION

1. Proposed Work at: S/W CORNER OF VAN ZILE ROAD AND N.J. ROUTE 70
2. Owner Name: SANFORD NALITT Tel. (718) ~~667-2000~~ 816-3000 1/5/95
   Address 79 FLAGG COURT, STATEN ISLAND NEW YORK 10304
3. Principal Contractor: SUKAR CONSTRUCTION CORP Tel. (718) 667-2000
   Address G.P.O. BOX W. STATEN ISLAND, NEW YORK 10314
   Lic. No. or Builder Reg. No. 0100295433 Federal Emp. No.
4. Architect or Engineer: EDWARD L. PEPIN P.E., R.A. Tel. (203) 243-1471
   Address 17 MOUNTAIN AVE. BLOOMFIELD CONN. 06002
5. Responsible Person in Charge of Work RICHARD NAIMAN Tel. (718) 667-2000 or 840-4387

Duplicate

II. PROPOSED WORK

A. TYPE OF WORK

1. ☐ Minor Work (Single Trade)
2. ☐ Small Job ($5,000 and no Prior Approvals)
   Complete only II.B., III and IV.A. and Page 2
3. ☒ New Building
4. ☐ Addition
5. ☐ Alturation
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☐ Other:

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☒	Building/ Structural	$
2. ☒	Plumbing	
3. ☒	Electrical	
4. ☒	Fire Protection	
5. ☐	Other	
6. ☐	Other	
	TOTAL COST	$206,000

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Dumbwaiters
2. ☐ High-Pressure Boilers
3. ☐ Refrigeration Systems
4. ☐ Pressure Vessels
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Cross-connections/ Backflow Preventors
7. ☒ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R–1)
2. ☐ Multi-Family (R–2) HMD Reg. No.:
3. ☐ Two Family (R–3b)
4. ☐ One-Family (R–3a)

If new construction, enter no. of dwelling units

If other than new construction, enter no. of dwelling units:
Before Construction:
After Construction:
Net Gain (or loss):

B. NON-RESIDENTIAL

5. ☐ Theatres with Stage (A–1–A)
6. ☐ Movie Theatres (A–1–B)
7. ☐ Night Clubs (A–2)
8. ☐ Restaurants, Libraries, Museums (A–3)
9. ☐ Religious Assembly (A–4)
10. ☐ Outdoor Assembly (A–5)
11. ☐ Business (B)
12. ☐ Educational (E)
13. ☐ Moderate-Hazard Factory (F–1)
14. ☐ Low-Hazard Factory (F–2)
15. ☐ High-Hazard (H)
16. ☐ Institutional Detention Center (I–1)
17. ☐ Hospitals, Infirmaries (I–2)
18. ☐ Group Homes (I–3)
19. ☒ Mercantile (M)
20. ☐ Moderate-Hazard Warehouse (S–1)
21. ☐ Low-Hazard Warehouse (S–2)
22. ☐ Temporary, Misc. (U)
23. ☐ Other

State Specific Use:

If Change in Use Group, Indicate Former:

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☒ Private (Individual, Corp., Non-profit Inst., Etc.)
2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

	Principal	Secondary	Type
3.	☒	☐	Gas
4.	☐	☐	Oil
5	☐	☐	Electric
6.	☐	☐	Solid (Wood, Coal, Etc.)
7.	☐	☐	Propane
8.	☐	☐	Solar
9.	☐	☐	Other

C. TYPE OF SEWAGE DISPOSAL

10. ☒ Public or Private Company
11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☒ Public or Private Company
13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories 1
15. Height of Structure 19'-4" Ft.
16. Area–Largest Floor 6,895 Sq. Ft.
17. Bldg. Area–All Fls. 8,244 Sq. Ft.
18. Volume of Structure 159109 Cu. Ft.
19. Total Land Area Disturbed 10.69 ~~Sq. Ft.~~ ACRES

LDS BR 10413192

83608

N.J.C.C. Form F-100 (8/83)

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.

B. ☐ I further certify that I will perform the work below.

B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing

C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.

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

SIGNATURE _____ DATE _____

II. AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

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 SUKAR CONSTRUCTION CORP. TEL.(718) 667-2000

ADDRESS G.P.O. BOX W

STATEN ISLAND N.Y. 10314

SIGNATURE Richard Newman, V.P.

BLOCK NO. 1149 LOT NO. 1 SUBDIVISION N/A PERMIT NO. 10697

PRIOR APPROVALS CHECKLIST

APPROVALS	LOCAL				COUNTY				REGIONAL				STATE				COMMENTS
	Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		
	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	
☑ Planning Board				1/28/87													
☐ Zoning Board																	
☑ Sewer Authority	12/18/85		12/18/85														
☑ Water Authority	12/18/85		12/18/85														
☐ Fire Department																	
☐ Police Department																	
☐ Health Department																	
☑ Soil Conservation	1/7/86		1/7/86														
☐ N.J. Dept. of Community Affairs																	
☑ N.J. Dept. of Transportation													5/6/86		5/6/86		
☐ N.J. Dept. of Environmental Protection																	
☑ Other: O.C.U.A.															5/21/86		
☐																	
☐																	
☐																	
☐																	
☐																	
☐																	

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

	EDITION OF CODE		EDITION OF CODE		
☐ One and Two Family Dwellings		☐ Mechanical		☐ Flood Hazard	
☐ Building		☐ Energy		☐ As Built Elevation Certification	
☐ Electrical		☐ Barrier Free		☐ Other	

PERMIT CONTROL

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN – FILE LOCATION AND NO.

Plan Review Required	Type of Work	Plans Received By Date	Plans Received By Receiver	Approval Date	Reviewer	Comments
☐	BUILDING			3/26/87	EJ	Approved part 3/26/87
	Footings/Foundations					
	Framing					
	Architectural					
	Other			4/30/86	gc	(Sit cabo. ltr.)
☐	PLUMBING			4-30-87	AC	
☐	ELECTRICAL					
☒	FIRE PROTECTION			4/21/87	ak	
☐	OTHER					Commercial

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION		3/23/88	Rough Elec. gc. Temp. 3/23
	BUILDING			
	Footings/Foundations			
	Framing			
	Architectural			
	Other Soil			5-21-88 Temp Appr. KJ unless
	PLUMBING		3-9-88	gc
	ELECTRICAL		3-15-88	RK
	FIRE PROTECTION		3-10-88	gc
	OTHER Eng		3/28/88	Final Eng. Temp.
			3-23-88	TEMP C.O. TO 4-22-88

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

		Date Issued
☑	Temporary Certificate of Occupancy Eng Soil Date Expired 4-22-88	3-23-88
☐	Temporary Certificate of Occupancy Date Expired	
☐	Certificate of Occupancy No.	
☐	Certificate of Continued Occupancy No.	
☐	Certificate of Approval No.	
☐	None	

IV. ON-GOING INSPECTIONS

On-going Inspections Required (See Page 1, II.D.)	Date Posted to Log and Tickler

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	$ 1,113.7
PLUMBING	135.
ELECTRICAL	.
FIRE PROTECTION	30.
OTHER SPE. PEU.	26.
SUBTOTAL	1303.7
– LESS: 20% of subtotal (when plan review performed by state agency).	(130.3
D.C.A. TRAINING FEE .0006 x 159109 =	95.4
CERTIFICATE OF OCCUPANCY	195.5
OTHER	.
OTHER	.
TOTAL COLLECTED WHEN PERMIT ISSUED	$ 1725.

DATE 5-1-87 Collected By

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY	2-17-87	35 pm 75.	80.
OTHER	3-10-88		25.
OTHER			.
– LESS: Refunds			(.
TOTAL COLLECTED AFTER PERMIT ISSUED			$.

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	$.
COLLECTED AFTER PERMIT (VB)	.
TOTAL	$.

TOWNSHIP OF BRICK

NEW JERSEY UNIFORM CONSTRUCTION CODE

CERTIFICATE

CERT. NO. 10697 ~~10697~~

DATE ISSUED 3-23-88

Block 1149 ~~50~~ Lot 1

Subdivision

IDENTIFICATION

Owner Sanford Nalitt

Address 79 Flagg Ct.
Staten Island, N.Y.

Tel. ( )

Work Site Address Channel Plaza
VanZile Rd. & Rt. 70

Agent

Address

Tel. ( )

Lic. No.

Federal Emp. No.

PAYMENTS

Fees Remitted $

☐ Check No.

☐ Cash

☐ Other

Collected By:

Date:

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☐ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL

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

B. ☐ 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.

C. ☒ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than April 23, 19 88 or the owner will be subject to a fine or order to vacate:

OK 7-15-88

Pending final ~~soil~~ and engineering. And Must have final resolution compliance within thirty days.
Final building pending → Pending

D. DESCRIPTION OF WORK:

Business

USE GROUP B

FIRE GRADING 2 Hours

MAXIMUM LIVE LOAD

MAXIMUM OCCUPANCY LOAD

SPECIFIC USE Little peoples Palace

FINAL COST OF CONSTRUCTION: $ 206,000.

CONSTRUCTION OFFICIAL

U.C.C. Form F-260 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

TOWNSHIP OF BRICK

CERTIFICATE

CERT. NO. 10697

DATE ISSUED 1/11/90

Block 1149 Lot 1

Subdivision

IDENTIFICATION

Owner Sanford Nalitt

Address 79 Flagg Ct.
Staten Island, N.Y.

Tel. ( )

Agent Sukar Const.

Address

Tel. ( )

Work Site Address Satelitte Bldg.
Channel Pl. VanZile & Rt. 70

Lic. No.

Federal Emp. No.

PAYMENTS

Fees Remitted $

☐ Check No.

☐ Cash

☐ Other

Collected By:

Date:

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☐ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL

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

B. ☐ 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.

C. ☒ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than 4/30/90, 19_____ or the owner will be subject to a fine or order to vacate:

Pending amended Site Plan approval

D. DESCRIPTION OF WORK:

Business

USE GROUP B FIRE GRADING 2 hours

MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE Little Peoples Palace

FINAL COST OF CONSTRUCTION: $ 206,000.

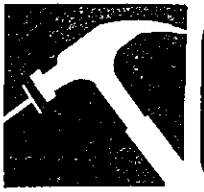
Arthur J. Cerizo
CONSTRUCTION OFFICIAL

U.C.C. Form F-260 (8/83) Light Green = Office Copy White = Applicant's Copy Goldenrod = Tax Assessor's Copy

TOWNSHIP OF BRICK

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE



PERMIT NO. 10697
DATE ISSUED 5-1-87
REVISION DATE

Block 1149 Lot 1
Subdivision N/A

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner SANFORD NALITT
Address 79 FLAGG COURT
STATEN ISLAND, N.Y. 10304
Tel. (718) 667-2000
Work Site Address S/W CORNER OF RTE. 70 AND VAN ZILE RD.

Contractor SUKAR CONSTRUCTION CORP.
Address G.P.O. BOX W.
STATEN ISLAND. N.Y. 10314
Tel. (718) 667-2000
Lic. No. 0100295433
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

7000 sq ft Satalite Bldg.

☐ See Plans

TYPE OF WORK:

- ☒ New Building
- ☐ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ *Other* _____
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other 159109 Cu Ft

	Fee Basis	Fee
		$
SUBTOTAL		$
Minimum Building Fee (if applicable)		$
Total Building Fee *(Greater of Minimum or Subtotal)*		$

C. BUILDING CHARACTERISTICS

USE GROUP: VACANT LAND Present MERCANTILE Proposed

No. of Stories 1
Height of Structure 19'-4" Ft.
Area—Largest Floor 6,895 Sq. Ft.
Total Building Area—All Floors 8,244 Sq. Ft.
Volume of Structure 159,109 Cu. Ft.
Total Land Area Disturbed 10.69 ACRES ~~Sq. Ft.~~
Estimated Cost of Building Work: $ 206,000

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION — BUILDING

DATE	JOB CONDITION/COMMENTS
2-9-88	No Electrical Insp

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☒ All	4-23-87	KM
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 3/88 KM WS

Inspected By: KM WS

INSPECTIONS

Type	Failure Dates			Approval Date
☒ Footing/Foundation				5-12-87 KM
☒ Slab				1-6-88 KM
☒ Frame	2-8-88 KM			2-9-88 KM
☐ Architectural				
☒ Insulation				
☒ Finishes				3/88 KM
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

Satalite Bldg

FIRE SUBCODE
TECHNICAL SECTION

PERMIT NO. 10107
DATE ISSUED 5.1.87
REVISION DATE

Block 114 Lot 1
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only* — When changing contractors, notify this office

Owner [illegible]
Address [illegible]
Tel. (201) 617 [illegible]
Work Site Address [illegible]

Contractor
Address
Tel. ( )
Lic. No.
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other _____ FEE
Area Sprinkled: ☐ Full ☐ Partial (specify in comments)
No. of Heads: _____ No. of Spare Heads: _____
☐ Valves Supervised – Method: _____
Water Supply – Source: _____ Size: _____
FD Connection Location: _____
Estimated Cost of Work: $ _____ $ _____

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other _____
Manual Pull: ☐ Yes ☐ No
Locations: _____
Estimated Cost of Work: $ _____ $ _____

B3. ALARM

TYPE: ☐ Manual ☐ Automatic FEE
Supervision Type: ☐ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $ _____ $ _____

B4. STAND PIPES

Pipe Size: _____ Pump Size: _____
Water Source: _____ Size: _____
FD Connection Location: _____
Hose Station: ☐ Yes ☐ No
Estimated Cost of Work: $ _____ $ _____

B5. OTHER

[illegible] $ _____
[illegible] $ _____
[illegible] $ _____

Subtotal $ 15
Minimum Fire Protection Fee (If Applicable) $ 15
Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ 30

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP _____ Present M Proposed
Heating Systems – Location: Roof-top
Type: ☑ Gas ☐ Oil ☐ Electrical ☑ Solar ☐ Other _____
Fuel Storage Tank – Location: _____ Fuel Type: _____ Capacity: _____
Total Estimated Cost of Fire Protection Work: $ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION — FIRE

DATE	JOB CONDITION/COMMENTS
12-24-87	Insp Sprinkler test pipe from outside Building to Inside Build Connection good & Test on Gage ok. with hose test done on Sprinkler head when Job. Complete A.S.
3-7-88	needs one more Exit Signs & Fire — Extinguishers.
3/10/88	Violation abated Exit Sign. Installed & Lock installed on Elevator Door. J.K.

JOB SUMMARY

- ☐ No Plans Required
- ☑ Plan Review Approved

Date: 1/23/88

Approved By: C. Wells

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 3/10/88

Inspected By: J.K.

INSPECTIONS

Type	Failure Date			Approval Date
☐ Fire Suppression Test				
☐ Fire Alarm Test				
☐ Smoke Test				
☐ TCO				
☒ Other Insp	3-7-88			3/10/88
☒ Other Lock installed on Elevator				3/10/88
☐ Other				
☐ Other				

U.C.C. Form F-140 (8/83)

FIRE SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 10697
DATE ISSUED 5-1-87
REVISION DATE 2-17-88
Block 1149 Lot 1
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* — When changing contractors, notify this office

Owner SANFORD NALITT
Address 79 Flagg Court
STATEN ISLAND NY 10304
Tel. (718) 667-2000
Work Site Address S/W Corner of RT 70 and Van Zile Rd.

Contractor F+J Zengel
Address RT 33 Freehold NJ
Tel. (201) 780-0550
Lic. No. 5216
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☒ Wet ☐ Dry ☐ Other
Area Sprinkled: ☒ Full ☐ Partial (specify in comments)
No. of Heads: No. of Spare Heads:
☐ Valves Supervised — Method: Local
Water Supply — Source: City Size: 8"
FD Connection Location: West Wall
Estimated Cost of Work: $

FEE $

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other
Manual Pull: ☐ Yes ☒ No
Locations:
Estimated Cost of Work: $

45
$ 45

B3. ALARM

TYPE: ☐ Manual ☒ Automatic
Supervision Type: ☒ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $

FEE $ 45

B4. STAND PIPES

Pipe Size: Pump Size:
Water Source: Public Size: 8"
FD Connection Location:
Hose Station: ☐ Yes ☒ No
Estimated Cost of Work: $

$

B5. OTHER

Emergency Lites $
Exit Signs $
Fire Extinguishers $

Subtotal $ 45
Minimum Fire Protection Fee (If Applicable) $
Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ 45

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP Present M Proposed
Heating Systems — Location: Roof Top
Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other
Fuel Storage Tank — Location: Fuel Type: Capacity:
Total Estimated Cost of Fire Protection Work: $

D. COMMENTS

Pd 2-17-88

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-140(8/83) Green - Office Copy White - Applicant Copy Pink - County Copy White Tag - Inspector Copy

FIRE SUBCODE
TECHNICAL SECTION

PERMIT NO. 10697
DATE ISSUED 7-1-97
REVISION DATE 2-17-98
Block 1147 Lot 1
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only* — When changing contractors, notify this office

Owner Samuel NaLitt
Address 79 Flagg Court
Staten Island NY 10304
Tel. (718) 667-2000
Work Site Address S/ES Corner of Rt 70 and Van Zile Rd.

Contractor F+J Zensel
Address RT 33 Freehold NS
Tel. (732) 462-0750
Lic. No. 5216
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)
I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☒ Wet ☐ Dry ☐ Other
Area Sprinkled: ☒ Full ☐ Partial (specify in comments)
No. of Heads: No. of Spare Heads:
☐ Valves Supervised – Method: Local
Water Supply – Source: City Size: 2"
FD Connection Location: West Wall
Estimated Cost of Work: $

FEE $

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☒ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other
Manual Pull: ☐ Yes ☒ No
Locations:
Estimated Cost of Work: $

45
$ 45

B3. ALARM

TYPE: ☐ Manual ☒ Automatic
Supervision Type: ☒ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $

FEE $

B4. STAND PIPES

Pipe Size: Pump Size:
Water Source: Public Size: 6"
FD Connection Location:
Hose Station: ☐ Yes ☒ No
Estimated Cost of Work: $

$

B5. OTHER

Enclosure Fee $
F.I.R.S. $
Fire Protection Fee $

Subtotal $ 45
Minimum Fire Protection Fee (If Applicable) $
Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ 45

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP Present M Proposed
Heating Systems – Location: Roof Top
Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other
Fuel Storage Tank – Location: Fuel Type: Capacity:
Total Estimated Cost of Fire Protection Work: $

D. COMMENTS

Pd 7-17-97
CN

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION — FIRE

DATE	JOB CONDITION/COMMENTS
2-18-88	Insp above Sprinkler Layout - Sprinkler Sys is installed as per plans.
3-7-88	Run sprinkler test at 200 psi for two hrs. Sprinkler test Complies with Code.

JOB SUMMARY

- ☐ No Plans Required
- ☒ Plan Review Approved

Date: 2-17-88

Approved By: JE

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 3-7-88

Inspected By: JE

INSPECTIONS

Type	Failure Date			Approval Date
☒ Fire Suppression Test				3-7-88
☐ Fire Alarm Test				
☐ Smoke Test				
☐ TCO				
☒ Other Sprinkler Layout Insp.				2-18-88.
☐ Other				
☐ Other				
☐ Other				

U.C.C. Form F-140 (8/83)

TOWNSHIP OF BRICK

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 10697
DATE ISSUED 5-1-87
REVISION DATE 2-17-88
Block 1149 Lot 1
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only* When changing contractors, notify this office

Owner Sanford Nalick
Address 79 Flagg Court
Staten Island NY 10304
Tel. (718) 667-2000
Work Site Address S/W Corner of Rt 70 & Van Zile Rd. Brick Town NJ.

Contractor F & J Lange C
Address RT 33 Freehold NJ
Tel. (201) 780-0550
Lic.No./Bus. Permit 5216
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
	Water Closet/Bidet/Urinal	$		Garbage Disposal	$
	Bathtub			Air Conditioner Unit	
	Lavatory/Sink			Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher		1	Backflow Device	25.—
	Water Heater			Reduced Pressure Backflow Device	
	Domestic Boiler/ Furnace			Vent Stack	10.—
	Steam Boiler			Solar System	
	Water Util. Connection			Other	
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$		COLUMN 2	$ 35.—

Fee	
COLUMN 1	$ —0—
COLUMN 2	$ 35.—
SUBTOTAL	$
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 35.—

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed
Drainage — Material _____ Size _____
Building Sewer — Material _____ Size _____
Water Service — Material _____ Size _____
Venting — Material _____ Size _____
Estimated Cost of Plumbing Work: $ _____

D. COMMENTS

ADDITIONAL FEE FIRE SUPPRESSION SYSTEM
PD 2-17-88

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-130 (8/83) Green = Office Copy White = Applicant Copy Blue = Inspector Copy

PLAN REVIEW AND INSPECTION — PLUMBING

DATE	JOB CONDITION/COMMENTS
3/8/88	LAV faucet ?

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved
Date: 4/30/87
Approved By:

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 3/9/88
Inspected By:

INSPECTIONS

Type	Failure Dates			Approval Date
☒ Slab				12-28-87
☒ Rough				2/3/88
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

U.C.C. Form F-130 (8/83)

TOWNSHIP OF BRICK

PLUMBING SUBCODE TECHNICAL SECTION

PERMIT NO. 10697
DATE ISSUED 5-1-87
REVISION DATE 2-17-88
Block 119 Lot 1
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner Sanford Molitt
Address 79 Flagg Court Staten Island NY 10304
Tel. (718) 667-2000
Work Site Address S/W Corner of Rt 70 + Van Zile Rd. Brick Town NJ

Contractor T+J Zenek
Address Rt 33 Freehold NJ
Tel. (201) 780-0550
Lic.No./Bus. Permit 5216
Federal Emp. No.

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
	Water Closet/Bidet/Urinal	$		Garbage Disposal	$
	Bathtub			Air Conditioner Unit	
	Lavatory/Sink			Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
	Washing Machine			Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher		1	Backflow Device	25.-
	Water Heater			Reduced Pressure Backflow Device	
	Domestic Boiler/ Furnace			Vent Stack	10.-
	Steam Boiler			Solar System	
	Water Util. Connection			Other	
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$		COLUMN 2	$ 35.-

Fee	
COLUMN 1	$ -0-
COLUMN 2	$ 35.-
SUBTOTAL	$
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 35.-

X
2-21-C

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage — Material _____ Size _____
Building Sewer — Material _____ Size _____
Water Service — Material _____ Size _____
Venting — Material _____ Size _____

Estimated Cost of Plumbing Work: $ _____

D. COMMENTS

ADDITIONAL FEE FIRE SUPPRESSION SYSTEM
PD 2-17-88

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-130 (8/83) Green = Office Copy White = Applicant Copy Blue = Inspector Copy

PLAN REVIEW AND INSPECTION — PLUMBING

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved
Date: 2-16-88
Approved By: J. W. Lyle

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 7-1-88
Inspected By: J. W. Lyle

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Slab				
☐ Rough				
☒ Water				2/18/88 Ow
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other _____				

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

UNIFORM CONSTRUCTION CODE
Chapter 23, Title 5

Approval of Part
5.23-2.5 (7)

OWNER/AGENT Sukar Construction Corp.

ADDRESS G.P.O. Box W.

TOWN Staten Island, NY ZIP 10314

BLOCK 1149 LOT 1

[X] FOOTING

[X] FOUNDATION

10697

OWNER/AGENT PROCEED AT OWN RISK [X]

OWNER/AGENT Sukar Construction Corp, V.P.

BUILDING SUB-CODE OFFICIAL Edward Wright

CONSTRUCTION OFFICIAL Wilhelm Lurzo

4/22/87

Only

March 26, 1987

Township of Brick
Stop Construction Order

Permit #
Date issued
Block 1149
Lot 1

Owner; Sanford Nalitt

Agent; Same

Address; 79 Flagg Court
Staten Island, NY 10304

Address; Same

Work site; Van Zile Rd & Route 70
Date of Issue; 8/18/87 Compliance Date; 9/1/87 Inspection Date;

You are hereby ordered to STOP CONSTRUCTION at the above location as of immediately until further notice from this enforcing agency.

This Order is entered pursuant to N.J.A.C.5:23-s.31(d) for violation of Which provides:

NON-COMPLIANCE WITH PERMIT PLANS

STOP WORK HAS BEEN LIFTED AS OF TODAY 10-23-87

Permission to resume construction may be obtained from this enforcing agency after the following conditions are met:

AS BUILT PLANS ARE REQUIRED
SPEAK TO MR. CIERZO

Failure to comply with this order will result in a penalty of $ 500.00 per day for each day in which work continues after issuance of this order.

If necessary the enforcing agency will concurrently seek the Order of a court Of competent jurisdiction restraining further work at the above location.

Pursuant to N.J.A.C. 5:23-2.35 et. seq., if you wish to contest the validity of the above action, you may file an appeal with the Construction Board of Appeal of the county of Ocean, within 20 business days of receipt of this form.

The Application to the Construction Board of Appeals may be used for this purpose. Your application for appeal must be in writing, setting forth your name and address, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of your reliance upon the Regulations and, if necessary, a brief statement setting forth your position and the nature of the relief sought by you. You may append any documents that you consider useful.

The fee for an appeal is $ 50.00 to be forwarded with your application to the Board of Appeals office at: Ocean County Board of Appeals, Toms River NJ 08753

Should you have any question concerning this order, please call:
Arthur J Cierzo Construction Official, 201-477-3000 Ext. 261.

Satellite Building
@ former Channel Plaza

Andy Silberfein
Property Manager

1-718-816-3000
x222

CUT-IN-CARD

MUNICIPALITY B.T.

LOCATION Chesnut Plaza. UTILITY CO P.P.

Van Zile Rd. BLK 9119 LOT 1

OWNER Sandland Valett OCCUPANT Little Pronto Dalai

"Installation in the above premises has been inspected and is in accordance with N.E.C, utility and DCA requirements."

☑ FINAL ☐ TEMPORARY This approval void after _____ days

SERVICE _____ RANGE _____ WATER HEATER _____

AIR COND 2 ELECT HEAT _____ MISC _____

COMMENTS Shell only. Does not include outdoor lites.

DATE 3-14-88 PERMIT # 17968 INSPECTOR B Tolbus

P. 2.29.88 Insp. Lic # 24

Elec. 104

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724

CERTIFICATE OF COMPLIANCE

Date March 17, 1988

NAME Sanford Nalitt Co.=Little People's Palace

ADDRESS GPO BOX W Staten Island, NY 10314

PROPERTY LOCATION Van Zile Road-Little People's Palace

Account No. 0231021 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 Patti Evan

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

DATE March 17, 1987

SUBJRCT: LOT(S) 1149

BLOCK 1

AFFIDAVIT

I Richard O. Naiman hereby request a temporary building permit to proceed with construction of footings and foundation (only) on the subject property at my own risk. I understand and acknowledge that the issuance of the full building permit is subject to further approvals as normally required. I understand that adjustments in the foundation and first floor elevation may be necessary in order to comply with the approved plot plan grading. The below department approvals are required prior to issuance of a temporary building permit.

Bukar Construction Corp
Richard Naiman, V.P. 3-17-87
Applicant Date

Twp. Engineer or Ass't. Engineer Date
Engineering Department

Zoning Officer Date
Zoning Department

Edward Izzo 3-18-87
Building Inspector Date
Building Department

TOWNSHIP OF BRICK

NOTICE OF PERMIT UPDATE

PERMIT NO. 10697
DATE ISSUED 2-17-88
Block 1147 Lot 1
Subdivision

IDENTIFICATION

Owner Raffael Nalitt
Address 11 Flagg Ct.
Staten Island N.Y.
Tel. (718) 667-2000
Work Site Address S/W Corner of Rt 70 & Van Zile Rd

Agent F. J. Zengel
Address RD 3
Freehold N.J.
Tel. ( )
Lic. No. 5216
Federal Emp. No.

PAYMENTS

Permit Fee $ 80.00
Fees Remitted $
☑ Check No. 1218
☐ Cash
☐ Other
Collected By
Date: 2-17-88

is hereby granted permission to perform the following work:

☐ BUILDING ☐ ELECTRICAL
☑ PLUMBING ☑ FIRE PROTECTION
☐ OTHER

Description of work:

Plmg. Sprinklers 35
" 45
Fire
Total $ 80.
additional fees.

Estimated Cost of Work: $

Arthur J. Cruz
CONSTRUCTION OFFICIAL

U.C.C. Form F-190 (8/83) Light Green = Office Copy White = Applicant Copy

SIZING FOR WATER AND SEWER SERVICES

Property Owner SANFORD Date 4/22/87

Property Address R+70 VAN. ZILE 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	2	( )	10	( )	10
2. Lavatory	2	(5)	10	( )	10
3. Bath Tub		( )		( )	
4. Shower Stall		( )		( )	
5. Kitchen Sink		( )		( )	
6. Service Sink		( )		( )	
7. Laundry Tray		( )		( )	
8. Dishwasher		( )		( )	
9. Washing Machine		( )		( )	
10. Urinal		( )		( )	
11. Floor Drain		( )		( )	
12. Drinking Fountain	1	( )	1	( )	1
13. Air Conditioner (water cooled)		( )		( )	
14. Dental Unit		( )		( )	
15. Lawn Sprinkler No. of Heads		( )		( )	
16. Fire Sprinkler No. of Heads		( )		( )	
17. _____		( )		( )	
18. _____		( )		( )	

10697

Total 21 26

Gallons per minute 16

Size of Service 1" _____

Date: _____ Approved: _____
Brick Township Plumbing Inspector

CONTRACTOR'S MATERIAL & TEST CERTIFICATE FOR ABOVEGROUND PIPING

PROCEDURE

Upon completion of work, inspection and tests shall be made by the contractor's representative and witnessed by an owner's representative. All defects shall be corrected and system left in service before contractor's personnel finally leave the job.

A certificate shall be filled out and signed by both representatives. Copies shall be prepared for approving authorities, owners and contractor. It is understood the owner's representative's signature in no way prejudices any claim against contractor for faulty material, poor workmanship, or failure to comply with approving authority's requirements or local ordinances.

PROPERTY NAME: Little Peoples Palace/Channel Plaza

DATE: 3/9/88

PROPERTY ADDRESS: Van Zile Ave Brick New Jersey

PLANS

ACCEPTED BY APPROVING AUTHORITY('S) NAMES

ADDRESS

INSTALLATION CONFORMS TO ACCEPTED PLANS ☒ YES ☐ NO

EQUIPMENT USED IS APPROVED ☒ YES ☐ NO

IF NO, EXPLAIN DEVIATIONS

INSTRUCTIONS

HAS PERSON IN CHARGE OF FIRE EQUIPMENT BEEN INSTRUCTED AS TO LOCATION OF CONTROL VALVES AND CARE AND MAINTENANCE OF THIS NEW EQUIPMENT ☐ YES ☐ NO

IF NO, EXPLAIN

HAVE COPIES OF THE FOLLOWING BEEN LEFT ON THE PREMISES:

1. SYSTEM COMPONENTS INSTRUCTIONS ☒ YES ☐ NO
2. CARE AND MAINTENANCE INSTRUCTIONS ☒ YES ☐ NO
3. NFPA 13A ☒ YES ☐ NO

LOCATION OF SYSTEM

SUPPLIES BLDGS. Sprinkler Room

SPRINKLERS

MAKE	MODEL	YEAR OF MANUFACTURE	ORIFICE SIZE	QUANTITY	TEMPERATURE RATING
Reliable	F1	1988	17/32	66	165

PIPE AND FITTINGS

PIPE CONFORMS TO ASTM STANDARD ☐ YES ☐ NO

FITTINGS CONFORM TO ASTM STANDARD ☐ YES ☐ NO

IF NO, EXPLAIN

ALARM VALVE OR FLOW INDICATOR

ALARM DEVICE			MAXIMUM TIME TO OPERATE THROUGH TEST CONNECTION	
TYPE	MAKE	MODEL	MIN.	SEC.
Flow	Reliable	A	0	0

DRY PIPE OPERATING TEST

DRY VALVE			Q.O.D.		
MAKE	MODEL	SERIAL NO.	MAKE	MODEL	SERIAL NO.

	TIME TO TRIP THRU TEST CONNECTION*		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET*		ALARM OPERATED PROPERLY	
	MIN.	SEC.	PSI	PSI	PSI	MIN.	SEC.	YES	NO
Without Q.O.D.									
With Q.O.D.									

IF NO, EXPLAIN

*MEASURED FROM TIME INSPECTOR'S TEST CONNECTION IS OPENED.

85A (10-80) PRINTED IN USA (OVER)

Contractor's Material and Test Certificate for Aboveground Piping

DELUGE & PREACTION VALVES

OPERATION ☐ PNEUMATIC ☐ ELECTRIC ☐ HYDRAULIC

PIPING SUPERVISED ☐ YES ☐ NO | DETECTING MEDIA SUPERVISED ☐ YES ☐ NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATIONS ☐ YES ☐ NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING ☐ YES ☐ NO | IF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM YES	NO	DOES EACH CIRCUIT OPERATE VALVE RELEASE YES	NO	MAXIMUM TIME TO OPERATE RELEASE MIN.	SEC.

TEST DESCRIPTION

HYDROSTATIC: Hydrostatic tests shall be made at not less than 200 psi (13.6 bars) for two hours or 50 psi (3.4 bars) above static pressure in excess of 150 psi (10.2 bars) for two hours. Differential dry-pipe valve clappers shall be left open during test to prevent damage. All aboveground piping leakage shall be stopped.
FLUSHING: Flow the required rate until water is clear as indicated by no collection of foreign material in burlap bags at outlets such as hydrants and blow-offs. Flush at flows not less than 400 GPM (1514 L/min) for 4-inch pipe, 600 GPM (2271 L/min) for 5-inch pipe, 750 GPM (2839 L/min) for 6-inch pipe, 1000 GPM (3785 L/min) for 8-inch pipe, 1500 GPM (5678 L/min) for 10-inch pipe and 2000 GPM (7570 L/min) for 12-inch pipe. When supply cannot produce stipulated flow rates, obtain maximum available.
PNEUMATIC: Establish 40 psi (2.7 bars) air pressure and measure drop which shall not exceed 1-½ psi (0.1 bars) in 24 hours. Test pressure tanks at normal water level and air pressure and measure air pressure drop which shall not exceed 1-½ psi (0.1 bars) in 24 hours.

TESTS

ALL PIPING HYDROSTATICALLY TESTED AT 225 PSI FOR 2 HRS. | IF NO, STATE REASON

DRY PIPING PNEUMATICALLY TESTED ☐ YES ☒ NO | No dry piping.

EQUIPMENT OPERATES PROPERLY ☒ YES ☐ NO

DRAIN TEST: READING OF GAGE LOCATED NEAR WATER SUPPLY TEST CONNECTION: _____ PSI | RESIDUAL PRESSURE WITH VALVE IN TEST CONNECTION OPEN WIDE _____ PSI

Underground mains and lead in connections to system risers flushed before connection made to sprinkler piping.

VERIFIED BY COPY OF THE U FORM NO. 85B ☐ YES ☐ NO | OTHER EXPLAIN

FLUSHED BY INSTALLER OF UNDERGROUND SPRINKLER PIPING ☐ YES ☐ NO

BLANK TESTING GASKETS

NUMBER USED	LOCATIONS	NUMBER REMOVED

WELDING

WELDED PIPING ☐ YES ☒ NO

IF YES . . .

DO YOU CERTIFY AS THE SPRINKLER CONTRACTOR THAT WELDING PROCEDURES COMPLY WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3 ☐ YES ☐ NO

DO YOU CERTIFY THAT THE WELDING WAS PERFORMED BY WELDERS QUALIFIED IN COMPLIANCE WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3 ☐ YES ☐ NO

DO YOU CERTIFY THAT WELDING WAS CARRIED OUT IN COMPLIANCE WITH A DOCUMENTED QUALITY CONTROL PROCEDURE TO INSURE THAT ALL DISCS ARE RETRIEVED, THAT OPENINGS IN PIPING ARE SMOOTH, THAT SLAG AND OTHER WELDING RESIDUE ARE REMOVED, AND THAT THE INTERNAL DIAMETERS OF PIPING ARE NOT PENETRATED ☐ YES ☐ NO

CUTOUTS (DISCS)

DO YOU CERTIFY THAT YOU HAVE A CONTROL FEATURE TO ENSURE THAT ALL CUTOUTS (DISCS) ARE RETRIEVED? ☒ YES ☐ NO

HYDRAULIC DATA NAMEPLATE

NAMEPLATE PROVIDED ☒ YES ☐ NO | IF NO, EXPLAIN

REMARKS

DATE LEFT IN SERVICE WITH ALL CONTROL VALVES OPEN: March 5, 1988

SIGNATURES

NAME OF SPRINKLER CONTRACTOR

TESTS WITNESSED BY

FOR PROPERTY OWNER (SIGNED) | TITLE Foreman | DATE 3/15/88

FOR SPRINKLER CONTRACTOR (SIGNED) | TITLE | DATE

ADDITIONAL EXPLANATION AND NOTES

New Jersey Natural Resources Conservation Program

OCEAN COUNTY SOIL CONSERVATION DISTRICT

6 Mott Place, CN 2191, Toms River, NJ 08754
Telephone: 201-244-7048

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK TOWNSHIP

PROJECT: Channel Plaza SCD NO.: 1640

BLOCK NO.(s) 1149 LOT NO.(s) 1

Commercial Building

Complete Compliance ☐ Temporary Compliance ☒

BLOCK NO.	LOT NO.	CONDITIONS
1149	1	Applicant remains responsible to repair and stabilize any areas subject to soil erosion

This temporary compliance expires May 15, 1988. The applicant is required to notify our office when work has been properly completed. A $25 reinspection fee will be billed to the applicant for each day that the required work has not been properly completed. No temporary compliances will be issued after April 30, 1988.

Total Fees Due: $ —

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: Barry Jennings

Date: 3/21/88

Distribution: White-Township Canary-Applicant Pink-District

A4687

OCEAN COUNTY SOIL CONSERVATION DISTRICT

5 Mott Place, CN 2191, Toms River, NJ 08754
Telephone: 201-244-7048

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: _____

PROJECT: _____ SCD NO.: _____

BLOCK NO.(s) _____ LOT NO.(s) _____

_____ _____

☐ Complete Compliance ☒ Temporary Compliance

BLOCK NO.	LOT NO.	CONDITIONS

Total Fees Due: $ _____

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: _____

Date: _____

Distribution: White-Township Canary-Applicant Pink-District

cc Mayor

APR 22 1988
ADMINISTRATION

SANFORD NALITT
and associated companies

April 21, 1988

Temp. C/O issued 5/15/88
Final Bldg Pending Resolution Compliance
Eng. Pending Res. Compliance
Was supposed to be done by 4-23-88
Tenant needs finals

Mr. Robert Chankalian, P.E.
Business Administrator/Municipal Engineer
Township of Brick
401 Chambers Bridge Rd.
Brick, N.J.

Re: Channel Plaza

Dear Mr. Chankalian,

Please be advised that in accordance with the conditions of the temporary C of O issued on the 7,000SF building at the referenced site, all of the items have been satisfied as follows:

1. Updated "resolution compliance" drawings were submitted on April 20, 1988. This set included the outdoor cart storage area and a few other minor resolution items which did not appear on the December submittal set.

2. The engineering department has advised us that there are no outstanding issues.

3. The Freehold Soil Conservation District (FSCD) made an inspection this week. However, they advised us that they will not issue a final certificate until the newly placed plant material has had a chance to root and stabilize. A reinspection will occur in the early part of May. The current temporary certificate expires on May 15, 1988, by which time the reinspection will be made. We have every reason to believe a final approval will be granted.

Based on the above, we are requesting that the final C of O be granted for the 7,000SF building at the referenced site.

Very truly yours,

John Vokral, P.E.

JV:lac
cc: Cierzo
Duddy
Kull
Giuliano

N.N. Check status w/ Art C. - advise
4/23/88

New Jersey Natural Resources Conservation Program

OCEAN COUNTY SOIL CONSERVATION DISTRICT

6 Mott Place, CN 2191, Toms River, NJ 08754
Telephone: 201-244-7048

RECEIVED
JUL 19 1988
DIV. OF INSPECTION

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK TOWNSHIP

PROJECT: CHANNEL PLAZA SCD NO.: 1640

BLOCK NO.(s) 1149 LOT NO.(s) 1

COMMERCIAL BUILDING

Complete Compliance ☒ Temporary Compliance ☐

BLOCK NO.	LOT NO.	CONDITIONS
		VEGETATION MUST BE MAINTAINED TO PREVENT FUTURE EROSION PROBLEMS.

Total Fees Due: $_____

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: Alan Perry

Date: 7/15/88

Distribution: White-Township Canary-Applicant Pink-District

A4687

OCEAN COUNTY SOIL CONSERVATION DISTRICT

8 Nice Trace, CN 2191, Toms River, NJ 08753

Telephone: 201-244-2948

DIV. OF INSPECTION

REPORT OF COMPLIANCE

TO CONSTRUCTION CODE OFFICIAL MUNICIPALITY: _____

PROJECT: _____ SCD NO.: _____

BLOCK NO.(s) _____ LOT NO.(s) _____

_____

☒ Complete Compliance ☐ Temporary Compliance

BLOCK NO.	LOT NO.	CONDITIONS

Total Fees Due: $ _____

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: _____

Date: _____

Distribution: White-Township Canary-Applicant Pink-District

A6687

OCEAN COUNTY SOIL CONSERVATION DISTRICT

6 Mott Place, CN 2191, Toms River, NJ 08754
Telephone: 201-244-7048

RECEIVED
MAY 10 1988
DIV. OF INSPECTION

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: Brick Township

PROJECT: Channel Plaza SCD NO.: #1640

BLOCK NO.(s) 1149 LOT NO.(s) 1

Commercial Building

Complete Compliance ☐ Temporary Compliance ☒

BLOCK NO.	LOT NO.	CONDITIONS
		This temporary compliance expires June 15, 1988. The applicant is required to notify our office when work has been properly completed. A $25 re-inspection fee will be billed to the applicant for each day that the required work has not been properly completed.

Total Fees Due: $25.00

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: Alan Penny

Date: May 5, 1988

Distribution: White-Township Canary-Applicant Pink-District

A4687