07-1113

BLOCK 869.01 LOT 4 QUALIFICATION CODE ____ ADDRESS (SITE) 1905 RT 88 EAST PERMIT NO. ____

07-001126

# CONSTRUCTION PERMIT APPLICATION

(CS DVD Video)

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

## I. IDENTIFICATION

1. Proposed Work Site at: 1905 RT 88 W BRICK
2. Name of Owner in Fee: CAMP REALTY Tel. (908) 486-4480
   Address 1905 RT 88 W / BRICK (Call when ready)
   street municipality zip code
3. Ownership in fee: Public ____ Private ____
4. Principal Contractor: K BERNARD FERNANDO Tel. (732) 773-4965
   Address 14 Foxhedge Dr. JACKSON NJ 08527
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Federal Employee No. ____ FAX: (___) ____
5. Architect or Engineer ____ Tel. (___) ____
   Address ____ Contact ____
6. Responsible Person in Charge once Work has Begun ____
   Tel. (___) ____ FAX: (___) ____

Tenant Fit up COMMERCIAL

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

| | | | Update | Update |
|---|---|---|---|---|
| 1. | Building | $ | 84 | 40 |
| 2. | Electrical | | | |
| 3. | Plumbing | | | |
| 4. | Fire Protection | | 105 | |
| 5. | Elevator Devices | | | |
| 6. | Subtotal | $ | 5 | |
| 7. | Less 20% for State Plan Review | | | |
| 8. | Subtotal | $ | | |
| 9. | State Permit Fee Surcharge | | | |
| 10. | Subtotal | $ | | |
| 11. | Cert. of Occupancy | | | |
| 12. | Other ZA + ZA | | 30 | 30 |
| 13. | TOTAL | $ | 184 | 70 |

## VI. BUILDING/SITE CHARACTERISTICS

| | | (office use only) |
|---|---|---|
| 1. | Number of Stories | |
| 2. | Height of Structure ____ ft. | |
| 3. | Area — Largest Floor ____ sq. ft. | |
| 4. | New Building Area ____ sq. ft. | |
| 5. | Volume of New Structure ____ cu. ft. | |
| 6. | Construction Classification | |
| 7. | Total Land Area Disturbed ____ sq. ft. | |
| 8. | Flood Hazard Zone | |
| 9. | Base Flood Elevation ____ ft. | |
| 10. | Wetlands yes / no | |
| 11. | Max. Live Load | |
| 12. | Max. Occupancy Load | |

## II. PROPOSED WORK

**OPTIONAL (for office use only)**

| | | Est. Cost | Plans Rec'd by | Date Rec'd | Rejection Date | Approval Date | Re-viewer | Resubmission Dates Approval | Resubmission Dates Rejection | Re-viewer |
|---|---|---|---|---|---|---|---|---|---|---|
| 1. | ☐ Minor Work | | | | | | | | | |
| 2. | ☐ New Building | | | | | | | | | |
| 3. | ☐ Addition | | | | | | | | | |
| 4. | ☐ a. Repair | | | | | | | | | |
| | ☐ b. Alteration | | | | | | | | | |
| | ☐ c. Renovation | | | | | | | | | |
| | ☐ d. Reconstruction | | | | | | | | | |
| 5. | ☐ Fire Protection | | | | | 4/20/07 | RR | 6/4/07 | | |
| 6. | ☐ Plumbing | | | | | | | | | |
| 7. | ☐ Electrical | | | | | | | | | |
| 8. | ☐ Elevator Devices | | | | | | | | | |
| 9. | ☐ Asbestos Abat. Subch. 8 | | | | | | | | | |
| 10. | ☐ Lead Hazard Abatement | | | | | | | | | |
| 11. | ☐ Demolition | 3500 | EVL | 4/5/07 | | 4/5/07 | | 7/2/07 | | |
| | TOTAL COSTS | | | | | | | | | |

## VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:

| | All Units | Income-restricted |
|---|---|---|
| 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:

## 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
10. ☐ Swimming Pools, Spas and Hot Tubs



LDS BR-B 10100809

**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 03/21/07

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

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

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

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

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

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone ( _____ ) _____

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

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 | | | | | | | | | |
| ☐ Planning Board | | | | | | | | | |
| ☐ Zoning Board | | | | | | | | | |
| ☐ Sewer Authority | | | | | | | | | |
| ☐ Water Authority | | | | | | | | | |
| ☐ *Police Department* | | | | | | | | | |
| ☐ Health Department | | | | | | | | | |
| ☐ Soil Conservation | | | | | | | | | |
| ☐ N.J. Department of Community Affairs | | | | | | | | | |
| ☐ N.J. Department of Transportation | | | | | | | | | |
| ☐ N.J. Department of Environmental Protection | | | | | | | | | |
| ☐ Utility Dig No. | | | | | | | | | |
| ☐ | | | | | | | | | |
| ☐ | | | | | | | | | |

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

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

**X. CERTIFICATES ISSUED** (office use only)

| | | DATE ISSUED | DATE EXPIRED | DATE REISSUED | DATE EXPIRED |
|---|---|---|---|---|---|
| ☐ Temporary Certificate of Occupancy | No. | | | | |
| ☐ Temporary Certificate of Compliance | No. | | | | |
| ☐ Continued Certificate of Occupancy | No. | | | | |
| ☐ Certificate of Compliance | No. | | | | |
| ☐ Certificate of Occupancy | No. | | | | |
| ☐ Certificate of Approval | No. | | | | |
| ☐ Lead Abatement Clearance Certificate | No. | | | | |

IMPORTANT No fee required 4/4/05 SB
A.H.B.T. - MANDATORY FEE - COMMERCIAL

ANY BUILDING QUESTIONS
CALL 732-262-1027

*FOR OFFICE USE ONLY*

**Constituent Contact Report**

| Date | Comments | Initials |
|---|---|---|
| | | |
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| | | |

□ Zoning Application deemed complete Initialed: _____ Date: _____

□ Zoning Application approved Initialed: _____ Date: _____

□ Zoning permit updates:

_____

_____

_____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

| | |
|---|---|
| Date Issued | 07/06/2007 |
| Tracking Number | C-07-001126 |
| Permit Number | 07-1113 |
| Permit Issue Date | 05/02/2007 |
| Certificate Number | 07-1113 |

# Certificate

Construction Code Division

(Certificate of Occupancy)

## Identification

Work Site Location: 1905 ROUTE 88 Brick Township, NJ Block: 869.01 Lot: 4 Qual:

Owner in Fee: COUSINS MALL, INC.

Owner Address: 400 ASHTON ST. LINDEN NJ 07036

Telephone:

Contractor K BERNARD FERNANDO

Address 14 FOX HOLLOW DRIVE JACKSON NJ 08527

Telephone: (732) 773-4965 Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Use:

TENANT FIT UP CS DVD VIDEO

Certificate Comments:

☑ **Certificate of Occupancy**
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☐ **Certificate of Approval**
This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **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 Compliance***
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
**Conditions to be met:**

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period ( years); see file

☐ **Certificate of Clearance - Asbestos Abatement**
*This serves notice that based on written certification, asbestos* abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period ( years); see file

☐ **Certificate of Compliance**
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the *New Jersey Uniform Construction Code and is approved for use* until

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
**Conditions to be met:**

Construction Official

Fee: $0.00

Check Number:

Collected By:

*Date Printed: 07/06/2007*

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

| | |
|---|---|
| Date Issued | 05/29/2007 |
| Tracking Number | C-07-001126 |
| Permit Number | 07-1113 |
| Permit Issue Date | 05/02/2007 |
| Certificate Number | 07-1113 |

# Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

## Identification

Work Site Location: 1905 ROUTE 88 Brick Township, NJ Block: 869.01 Lot: 4 Qual:

Owner in Fee: COUSINS MALL, INC.

Owner Address: 400 ASHTON ST. LINDEN NJ 07036

Telephone:

Contractor COUSINS MALL, INC.

Address 400 ASHTON ST. LINDEN NJ 07036

Telephone: Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work Use:

TENANT FIT UP

Certificate Comments:

CS DVD VIDEO CENTER

☐ **Certificate of Occupancy**

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

☐ **Certificate of Approval**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **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 Compliance**

The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
**Conditions to be met:**

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

☐ Total removal of lead-based paint hazards in scope of work

☐ Partial or limited time period ( years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work

☐ Partial or limited time period ( years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☑ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: 06/05/2007
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: 06/05/2007
**Conditions to be met:**

PENDING FINAL BUILDING AND FIRE

6/4/07

Construction Official

Fee: $0.00

Check Number:

Collected By:

*Date Printed: 05/29/2007*

# CONSTRUCTION PERMIT

Date Issued 5/2/2007
Control # C-07-001126
Permit # 07-1113

IDENTIFICATION Block: 869.01 Lot: 4 Qualifier

Work Site Location: 1905 ROUTE 88 Brick Township, NJ

Owner in Fee COUSINS MALL, INC.
Address 400 ASHTON ST. LINDEN NJ 07036

Telephone:

Contractor COUSINS MALL, INC.
Address 400 ASHTON ST. LINDEN NJ 07036

Telephone:
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

**Is hereby granted permission to perform the following work:**

- [x] BUILDING
- [ ] PLUMBING
- [ ] LEAD HAZARD ABATEMENT
- [ ] ELECTRICAL
- [x] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:

TENANT FIT UP

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

**Estimated Cost of Work** $3,600

Construction Official Date

**PAYMENTS (Office Use Only)**

| | |
|---|---|
| Building | $84 |
| Electrical | $0 |
| Plumbing | $0 |
| Fire Protection | $65 |
| Elevator Devices | $0 |
| Other | $0.00 |
| DCA Training Fee | $5 |
| CO Fee | |
| Other | $30 |
| Total | $184 |
| Check No. | 2516 |
| Cash | $0 |
| Credit | $0 |
| Collected By | Inspection Account |

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

## REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

- [ ] Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- [ ] Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

- [ ] A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

- [ ] A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

# PERMIT UPDATE

Date Update Issued 07/03/2007
Control # C-07-003001
Permit # 07-1113+A

IDENTIFICATION Block: 869.01 Lot: 4 Qualifier
Work Site Location: 1905 ROUTE 88 Brick Township, NJ
Owner in Fee COUSINS MALL, INC.
Address 400 ASHTON ST. LINDEN NJ 07036
Telephone:

Contractor Kakulawalase Bernard Fernando
Address 14 Foxhollow Drive Jackson NJ 08527
Telephone: (732) 773-4965
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

**Is hereby granted permission to perform the following work:**

- [x] BUILDING
- [ ] PLUMBING
- [ ] LEAD HAZARD ABATEMENT
- [ ] ELECTRICAL
- [ ] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:

ALTERATION Re-rack to provide a smaller adult area to conform to Zoning Code.

**Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.**
**Estimated Cost of Work** $100

Construction Official Date

**PAYMENTS (Office Use Only)**

| | |
|---|---|
| Building | $40 |
| Electrical | $0 |
| Plumbing | $0 |
| Fire Protection | $0 |
| Elevator Devices | $0 |
| Other | $0.00 |
| DCA Training Fee | $0 |
| CO Fee | |
| Other | $30 |
| Total | $70 |
| Check No. | 317 |
| Cash | $0 |
| Credit | $0 |
| Collected By | Stephanie Capozzi |

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

## REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work *must not proceed in a* manner which will preclude the inspection until it has been made and approval granted.

- [ ] Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- [ ] Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

- [ ] A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

- [ ] A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

# BUILDING SUBCODE
## TECHNICAL SECTION

# COMMERCIAL

Date Received 07-1113
Control #

Date Issued 5-2-07
Permit #

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

Block 369.01 Lot 4 Qualification Code

Work Site Location 1905 RT 88 EAST BRICK NJ 08724.

Owner in Fee: CAMP REALTY (JEFF)

Tel. (908) 486-4480 e-mail

Address 1905 RT 88 W (street) BRICK (municipality) NJ 08724 (zip code)

Contractor: K. BERNARD FERNANDO Tel. (732) 773-4965

Address 14 FOX HOLLOW DR. JACKSON e-mail

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. FAX: ( )

**C. CERTIFICATION IN LIEU OF OATH**

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

Signature

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

Tenant Fitup

CS DVD Video

**JOB SUMMARY (Office Use Only)**

| PLAN REVIEW | Date | Initial |
|---|---|---|
| [ ] No Plans Required | | |
| [X] All | 4-30-07 | |
| [ ] Footing | | |
| [ ] Foundation | | |
| [ ] Frame | | |
| [ ] Other | | |

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 6-4-07
Approved by:

| INSPECTIONS Type: | Failure | Dates (Month/Day) Failure | Approval | Initial |
|---|---|---|---|---|
| Footing | | | | |
| Footing Bonding | | | | |
| Foundation | | | | |
| Slab | | | | |
| *Frame* | | | | |
| Truss Sys./Bracing | | | | |
| Barrier-Free | | | | |
| Insulation | | | | |
| Finishes -Base Layer | | | | |
| Finishes -Final | | | | |
| Energy | | | | |
| Mechanical | | | *5/25/07 | |
| TCO | | | | |
| Other | | | | |
| Final | | | 6/9/07 | |
| Barrier-Free | | | | |

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

**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. $
2. Rehabilitation $3500
3. Total (1+ 2) $

COMMERCIAL

5/25/07 MV- Recomend TCO

1) Exit Sign Not operating properly

2) Remove Screen door from Rear

# BUILDING SUBCODE
## TECHNICAL SECTION

Date Received / Control # 07-1113

Date Issued / Permit # 5-2-07

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

Block 869.01 Lot 4 Qualification Code

Work Site Location 1905 RT 88 EAST BRICK NJ 08724.

Owner in Fee: CAMP REALTY (JEFF)

Tel. (908) 486-4480 e-mail

Address 1905 RT 88 IN (street) BRICK (municipality) NJ (zip code) 08724

Contractor: K. BERNARD. FERNANDO. Tel. (732) 773-4965

Address 14 FOX HOLLOW DR. JACKSON e-mail

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. FAX: ( )

**C. CERTIFICATION IN LIEU OF OATH**

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

Signature

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

Tenant Fitup

CS DVD Video

**JOB SUMMARY (Office Use Only)**

| PLAN REVIEW | Date | Initial |
|---|---|---|
| [ ] No Plans Required | | |
| [X] All | 4-30-07 | |
| [ ] Footing | | |
| [ ] Foundation | | |
| [ ] Frame | | |
| [ ] Other | | |

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

| INSPECTIONS Type: | Dates (Month/Day) Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Footing | | | | |
| Footing Bonding | | | | |
| Foundation | | | | |
| Slab | | | | |
| Frame | | | | |
| Truss Sys./Bracing | | | | |
| Barrier-Free | | | | |
| Insulation | | | | |
| Finishes -Base Layer | | | | |
| Finishes -Final | | | | |
| Energy | | | | |
| Mechanical | | | | |
| TCO | | | | |
| Other | | | | |
| Final | | | | |
| Barrier-Free | | | | |

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

**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. $ 2500
2. Rehabilitation $
3. Total (1+ 2) $

update on-1113A

# BUILDING SUBCODE
## TECHNICAL SECTION

Date Received
Control #
Date Issued 7/3/07
Permit # 07-1113A
C07-008001

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

Block 869.01 Lot 4 Qualification Code

Work Site Location 1905 RT 88 E BRICK, NJ 08724

Owner in Fee: KAKULAWALASE. B. FERNANDO

Tel. (732) 773.4965 e-mail

Address 14 FOX HOLLOW (street) JACKSON (municipality), NJ. 08527 (zip code)

Contractor: SAME Tel. (732) 773.4965

Address SAME As ABOVE e-mail

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. FAX: ( )

**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 6.22.07

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

ReRack existing store

MUST Comply with Ordinance

**JOB SUMMARY (Office Use Only)**

| PLAN REVIEW | Date | Initial |
|---|---|---|
| [ ] No Plans Required | | |
| [X] All | 7-3-07 | FM |
| [ ] Footing | | |
| [ ] Foundation | | |
| [ ] Frame | | |
| [ ] Other | | |

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 7-6-07
Approved by: FM

| INSPECTIONS Type: | Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| | Dates (Month/Day) | | | |
| Footing | | | | |
| Footing Bonding | | | | |
| Foundation | | | | |
| Slab | | | | |
| Frame | | | | |
| Truss Sys./Bracing | | | | |
| Barrier-Free | | | | |
| Insulation | | | | |
| Finishes -Base Layer | | | | |
| Finishes -Final | | | | |
| Energy | | | | |
| Mechanical | | | | |
| TCO | | | | |
| Other | | | | |
| Final | | | 7/6/07 | FM |
| Barrier-Free | | | | |

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Retaining Wall _____ Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other _____
[ ] Demolition

FEE (Office Use Only)
$ 100 -
COMMERCIAL

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

**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. $
2. Rehabilitation $
3. Total (1+ 2) $ 100 -

Update 07-1113

# BUILDING SUBCODE
## TECHNICAL SECTION

Date Received
Control #
Date Issued 7.6.17
Permit # 17 1113 1

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

Block 869.01 Lot 4 Qualification Code
Work Site Location 1905 RT 88E BRICK, N.J. 08724

Owner in Fee: KAKULAMALAKE. A. FERNANDO
Tel. (732) 773-1965 e-mail
Address 14 FOX HOLLOW DR. JACKSON, N.J. 08527
street municipality zip code

Contractor: SAME Tel. (732) 773-1965
Address SAME AS ABOVE e-mail
Contractor License No. or Builder Registration No. Exp. Date
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Emp. ID No. FAX: ( )

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW — Date — Initial
- [ ] No Plans Required
- [ ] All 7-18-07 KM
- [ ] Footing
- [ ] Foundation
- [ ] Frame
- [ ] Other

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS — Dates (Month/Day)

| Type: | Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Footing | | | | |
| Footing Bonding | | | | |
| Foundation | | | | |
| Slab | | | | |
| Frame | | | | |
| Truss Sys./Bracing | | | | |
| Barrier-Free | | | | |
| Insulation | | | | |
| Finishes -Base Layer | | | | |
| Finishes -Final | | | | |
| Energy | | | | |
| Mechanical | | | | |
| TCO | | | | |
| Other | | | | |
| Final | | | | |
| Barrier-Free | | | | |

**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. $
2. Rehabilitation $
3. Total (1+ 2) $

**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 6.22.07

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

KITCHEN
ADDITION

MUST Comply with Ordinance

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence Height (exceeds 6')
- [ ] Sign Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other
- [ ] Demolition

FEE (Office Use Only)
$

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

# FIRE PROTECTION SUBCODE — COMMERCIAL
## TECHNICAL SECTION

Date Received Control # 07-113

Date Issued Permit # 5-2-07

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

Block 869.01 Lot 4 Qualification Code

Work Site Location 1905 Rt 88 W BRICK

Owner in Fee CAMP REALTY (JEFF)

Address 1705 Rt. 88 West BRICK NJ 08724

Tel (908) 486-4480

Contractor K. BERNARD, FERNANDO

Address 14 FOX HOLLOW DR. JACKSON, NJ 08527

Tel (732) 773-4915 FAX ( )

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No.

Federal Emp. No.

**B. FIRE PROTECTION CHARACTERISTICS**

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Existing [ ] HVAC

Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar

[ ] Other

Location:

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve:

***Fuel Storage Tank:***

*Fuel Type: [ ] Flammable OR [ ] Combustible Capacity*

Total Cost of Fire Protection Work $

**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.

Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

**D. TECHNICAL SITE DATA**

**DESCRIPTION OF WORK:** Tenant Fit up (CS DVD Video)

**Water Supply Source**

**Method of Alarm/Suppression System Supervision**

| | NUMBER | FEE (Office Use Only) |
|---|---|---|
| Flammable/Combustible Tanks | | |
| **Alarm Systems** | | |
| [ ] System | | |
| [ ] 110v Interconnected | | |
| [ ] CO Detectors/110v | | |
| Alarm Devices (i.e., smoke, heat, pulls, water/flow) | | |
| Supervisory Devices (i.e., tampers, low/high air) | | |
| Signaling Devices (i.e., horn/strobes, bells) | | |
| Other Devices | | |
| TOTAL | | |
| **Suppression Systems** | | |
| Fire Pump ___ GPM Type ___ | | |
| Dry Pipe/Alarm Valves | | |
| Pre-action Valves | | |
| Sprinkler Heads (Dry and Wet) | | |
| Standpipes | | |
| **Pre-engineered Systems** | | |
| Wet Chemical | | |
| Dry Chemical | | |
| $CO_2$ Suppression | | |
| Foam Suppression | | |
| FM200 Suppression | | |
| Other | | |
| **Other Systems** | | |
| Kitchen Hood Exhaust System | | |
| Smoke Control System | | |
| Fired Appliances [ ] Gas or [ ] Oil | | |
| Fireplace Venting/Metal Chimney | | |
| Other Tenant Fit up | | |

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[ ] Fire Plans Approved

Date: 5-2-07

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 6-4-07

Approved by:

| INSPECTIONS Type: | Dates (Month/Day) Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Alarm System | | | | |
| Suppression Sys. | | | | |
| Standpipe | | | | |
| Fire Pump | | | | |
| Pre-Eng. System | | | | |
| Mechanical | | | | |
| Smoke Control | | | | |
| TCO | | | | |
| Flam/Combust Tanks | | | | |
| Fireplace Venting | | | | |
| Final | 5-25-07 | | 6-4-07 | |
| Other | | | | |

Rear exit light not working in emergency backup
2 TCO lights with Building

COMMERCIAL

# FIRE PROTECTION SUBCODE
## TECHNICAL SECTION

Date Received 07-1143
Control #

Date Issued 5-2-07
Permit #

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

Block 869.01 Lot 4 Qualification Code

Work Site Location 1905 RT 88 W BRICK

Owner in Fee CAMI REALTY (TEFF)

Address 1905 RT 88 WEST BRICK, NJ 08724

Tel (908) 486-4480

Contractor K. BERNARD. FERNANDO

Address 14 FOX HOLLOW DR. JACKSON NJ 08527

Tel (732) 743-4915 FAX ( )

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No.

Federal Emp. No.

**B. FIRE PROTECTION CHARACTERISTICS**

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Existing [ ] HVAC

Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar

[ ] Other

Location:

***Fuel Storage Tank:***

*Fuel Type: [ ] Flammable OR [ ] Combustible Capacity*

Total Cost of Fire Protection Work $

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve:

**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.

Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

**D. TECHNICAL SITE DATA**

**DESCRIPTION OF WORK:** Tenant Fit up (CS DVD Video)

**Water Supply Source**

**Method of Alarm/Suppression System Supervision**

| | NUMBER | FEE (Office Use Only) |
|---|---|---|
| Flammable/Combustible Tanks | | |
| **Alarm Systems** | | |
| [ ] System | | |
| [ ] 110v Interconnected | | |
| [ ] CO Detectors/110v | | |
| Alarm Devices (i.e., smoke, heat, pulls, water/flow) | | |
| Supervisory Devices (i.e., tampers, low/high air) | | |
| Signaling Devices (i.e., horn/strobes, bells) | | |
| Other Devices | | |
| TOTAL | | |
| **Suppression Systems** | | |
| Fire Pump ___ GPM Type ___ | | |
| Dry Pipe/Alarm Valves | | |
| Pre-action Valves | | |
| Sprinkler Heads (Dry and Wet) | | |
| Standpipes | | |
| **Pre-engineered Systems** | | |
| Wet Chemical | | |
| Dry Chemical | | |
| $CO_2$ Suppression | | |
| Foam Suppression | | |
| *FM200 Suppression* | | |
| Other | | |
| **Other Systems** | | |
| Kitchen Hood Exhaust System | | |
| Smoke Control System | | |
| Fired Appliances [ ] Gas or [ ] Oil | | |
| Fireplace Venting/Metal Chimney | | |
| Other Tenant Fit up | | |

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] *Building* [ ] *Plumbing*

[ ] Electric [ ] Elevator

[ ] Fire Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

| INSPECTIONS Type: | Dates (Month/Day) Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Alarm System | | | | |
| Suppression Sys. | | | | |
| Standpipe | | | | |
| Fire Pump | | | | |
| Pre-Eng. System | | | | |
| Mechanical | | | | |
| Smoke Control | | | | |
| TCO | | | | |
| Flam/Combust Tanks | | | | |
| Fireplace Venting | | | | |
| Final | | | | |
| Other | | | | |

# Township of Brick
## Zoning Permit

**Approved:** Tuesday, March 27, 2007 **Number:** 262

**Block** 869.01 **Lot** 4 **Zone:** B-2, Gen. Business

**Property Address:** 1905 Route 88

**Applicant:** Kakulawalage Bernard Fernando; CS DVD Video

**Property Owner:** Cousins Mall, Inc.

**Existing Use:** Vacant unit No. 6 (former half of Brick Thrift Shop).

**Proposed Use:** Retail DVD/video store with regular section and adult section, "CS DVD Video Center".

**Proposed Construction:** Interior alterations for new business.

**Conditions:** An additional zoning permit is required for any sign or banner, or any other additional work.

**This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.**

Michael P. Fowler, AICP/PP
*Principal Planner*

Sean Kinnevy
Zoning Officer

# Township of Brick
## Zoning Permit

**Approved:** Wednesday, June 27, 2007 **Number:** 789

**Block** 869.01 **Lot** 4 **Zone:** B-2, Gen. Business

**Property Address:** 1905 Route 88; Camp Mall, Unit No. 6

**Applicant:** Kakulawalase Bernard Fernando

**Property Owner:** Cousins Mall, Inc., t/a Camp Realty c/o Jeff Dattilo

**Existing Use:** "CS DVD Video" store.

**Proposed Use:** "CS DVD Video" store.

**Proposed Construction:** Interior alterations to provide for an adult dvd, video, and magazine display area of less than 20% of the total unit area.

**Conditions:**
As per the conditions agreed to by Mr. Fernando in the letter dated and signed on June 20, 2007.
As per the architectural drawings prepared by Paul L. Barlo, AIA, PP, of Barlo & Associates, LLC dated April 27, 2007 and with the latest revison date of June 22, 2007.
An additional zoning permit is required for any revised or additional construction plans, any sign or banner, or any other additional work.

**This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.**

Michael P. Fowler, AICP/PP
Principal Planner

Sean Kinnevy
Zoning Officer

# TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

MAR 22 2007

(Please Type or Print Neatly in Ink, Not Pencil)

**Applications missing any of the following information will delay processing and may be returned to you.**

BLOCK 869.01 LOT 4 QUALIFIER

PROPERTY ADDRESS 1905 RT 88 BRICK NJ 08724

PERSONAL NAME OF APPLICANT KAKULAWALAGE BERNARD FERNANDO

BUSINESS NAME OF APPLICANT CS DVD VIDEO

MAILING ADDRESS OF APPLICANT 14 - FOX HOLLOW DR JACKSON. NJ 08527

PROPERTY OWNER'S FULL NAME CAMI REALTY - JEFF (908) 486-4480

PRESENT USE OF PROPERTY (check all that apply)

☑ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☐ Commercial (please describe) VACANT STORE (FORMER BRICK HOSPITAL THRIFT STORE) UNIT 6

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☑ Commercial (please describe) REGULAR DVD, VIDEO STORE WITH ADULT SECTION CS DVD VIDEO CENTER DVD, VIDEO

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) _____ Height _____
☐ Addition - Height _____
☑ Alteration
☐ Porch or deck - Height _____
☐ Shed - Height _____
☐ Fence - Type _____ Height _____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☑ Other (please describe) NEW FLOOR ~~TILE~~ TILES AND PAINTING THE WALLS.

CHECKLIST

☑ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

**Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.**

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT _____ Date 3.7.2007.

Reviewed by Zoning Office JMC Date 3/27/7 ☒ Approved ( ) Denied

March 2003----------

TWO COPIES

3/30/07

Update 07-1113

RECEIVED
JUN 22 2007
ZONING

# TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

**Applications missing any of the following information will delay processing and may be returned to you.**

BLOCK 869.01 LOT 4 QUALIFIER _____

PROPERTY ADDRESS 1905 RT 88 E BRICK, N.J 08724

PERSONAL NAME OF APPLICANT KAKULAWALASE BERNARD FERNANDO

BUSINESS NAME OF APPLICANT ~~SAME~~

MAILING ADDRESS OF APPLICANT 1905 RT 88 E BRICK, N.J 08724.

PROPERTY OWNER'S FULL NAME JEFF DAPITTO

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☑ Commercial (please describe) VIDEO STORE CS DVD VIDEO

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☑ Commercial (please describe) 80% WITH RES DVD, VIDEO & FLOOR AREA - 20% ADULT DVD'S VIDEOS MASAZINE WITH FLOOR AREA

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) _____ Height _____
☐ Addition - Height _____
☑ Alteration
☐ Porch or deck - Height _____
☐ Shed - Height _____
☐ Fence - Type _____ Height _____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) _____

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

**Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.**

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT [signature] Date 06/22/07

Reviewed by Zoning Office [signature] Date 6/27/7 (X) Approved ( ) Denied



6/28/07

# TOWNSHIP OF BRICK

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



*Department of Engineering*

Office of the Municipal Engineer
732-262-1040
Fax: 732-262-8954
www.twp.brick.nj.us

Date: _____

## PLOT PLAN EXEMPT FORM

Block: 869.01 Lot: 4

Property Address: 1905 RT 88 EAST BRICK NJ 08724

I, K. BERNARD. FERNANDO of 14 FOX HOLLOW DR JACKSON
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

_____
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.

2. Proof that the property is not located in a Flood Hazard Area.

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

---

FOR OFFICE USE ONLY

Approved on: 4/5/07 Signed: _____

Rejected on: _____ Signed: _____

Comments: Interior Only!

311 ACCESS BRICK TOWNSHIP

COMMERCIAL

(Bldg) Elect Fire Plumbing ( Please mark subcode)

CONTROL NUMBER 00126

# TOWNSHIP OF BRICK
## APPLICATION REVIEW PROCESS

resubmit 4-27-07

ADDRESS OF APPLICATION: 1905 Rt 88

DATE REVIEWED: 4-10-07 @ 8.55

REVIEWED BY: FM FAX TO 732-349-2252

CONTACT (CALLED) FAXED: 908-486-4480 @ 1:30 & 732-458-8088 Doreen 732-773-4965 spoke to Bernard @ 2.00

(1) ~~THRIFT Store was Divided into Smaller Unit, But No Permit was Issued For This Demising Wall~~ set 8.d 4

(2) Application Does Not Comply with Section 5:23-2.15 e ix of The UniForm Construction Code Supplimat Dated 4-3-06

(3) Plans Must Address Type of work under Subchapter 6 To Define IF it Falls under 5:23-6.3 OR 5:23-6.4 or 6.5; 6.6 Supply All Details Related to Above

Frank/plan review template

Land Use/ Bldg Dept Fax:732-262-8954

** Transmit Conf. Report **

Apr 10 2007 9:03

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|---|---|---|---|
| P.1 | T.1.1 | Check condition of remote fax. | 7323492252 |

Bldg Elect Fire Plumbing (Please mark one)

CONTROL NUMBER 001126

# TOWNSHIP OF BRICK
## APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 1905 Rt 88

DATE REVIEWED: 4-

REVIEWED BY: FM FAX TO 732

CONTACT CALLED FAXED: 732-458-8088 Doreen 908-486-4480 @ 1:30 & 773-4965 spoke t

(1) THRIFT Store was Divided into Smaller U
No Permit was issued For This Demising U

(2) Application Does Not Comply with Section 5:23
OF The Uniform Construction Code Supplement Data

(3) Plans Must Address Type OF work Under Sub
To Define IF IT Falls Under 5:23-6.3 OR 5:
Supply All Details Related to Above

Frank/plan review template

Bldg Elect (Fire) Plumbing ( Please mark subcode)

CONTROL NUMBER 00126

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

908-496-8610
John Tatlo

ADDRESS OF APPLICATION: 1905 Rt 88

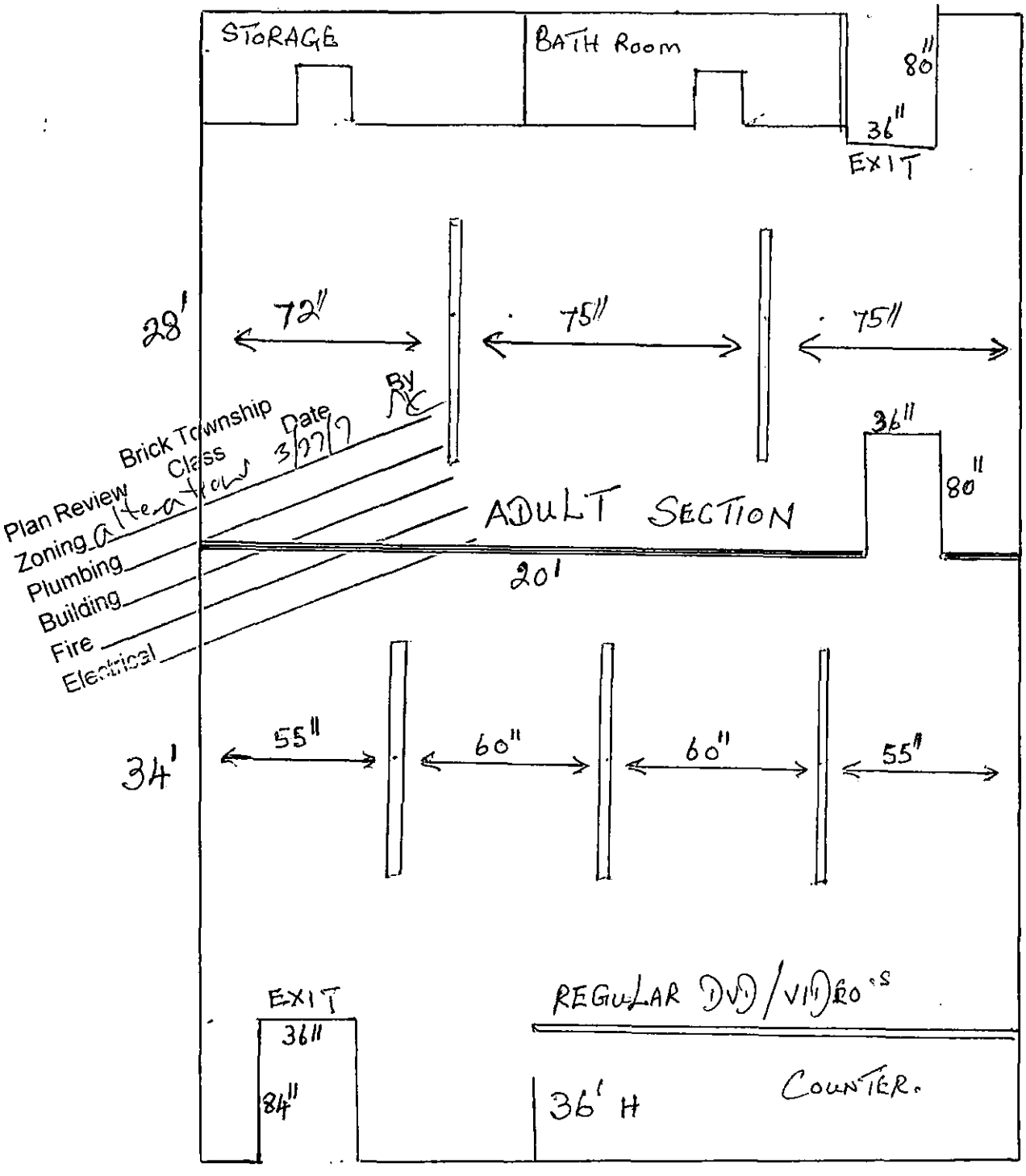
DATE REVIEWED: 4/9/07

REVIEWED BY: RD

CONTACT (CALLED)/FAXED: by Bldg

Same as bldg ①, ②, ③

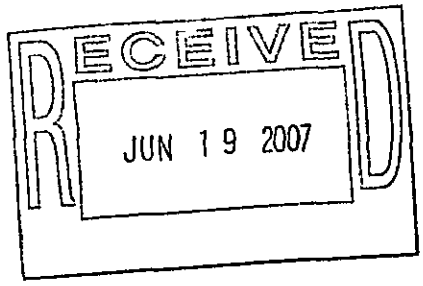
Frank/plan review template




CS DVD VIDEO
1905 RT 88 ~~EAST~~
BRICK N.J. 08724

Block: 869.01 LOT 4 UNIT. 6

COMMERCIAL




Kakulawalage Fernando
14 Fox Hollow Dr.
Jackson, NJ 08527
732-987-6177
June 15, 2007

Dear Sir or Madam:

My name is Kakulawalage Bernard Fernando. I am the owner of CS DVD/VIDEO in Brick, NJ.

In the second week of March 2007, I went to Brick Township and the zoning office; I spoke to Ms. Kate MacDonald, the assistant zoning officer. I explained to her that I wanted to open a regular video store with an adult section in No.1905 Rt. 88 E. (camp mall) Brick, NJ 08724. I asked her the law for opening this type of a store and whom I'd have to meet with to start the legal paper work for my proposal in Brick. Then, she sent me to the clerk's office and I spoke to a lady, whom I did not get the name from, and she sent me to the zoning office again saying that this matter belongs to the zoning office. Again, I went to the zoning office and met with Ms. Kate MacDonald. She said that she can't answer my question about the adult section, so she sent me back to the Clerk's Office once more. For a second time, I spoke to the same lady at the clerk's office and she wasn't able to answer if I can legally have an adult section in the store. Again, she said this was a matter of the zoning office; however, she volunteered to help by calling a detective in the same building and inquired about opening a video store with an adult section. He took me to his department and gave the number to contact the Brick Township attorney, Jean Cipriani, to get advice. Then, I called Ms. Jean Cipriani and left her a message. After two days, Ms. Cipriani called me and I explained to her that I was

interested in opening a video store with an adult section; I gave her the location, and all necessary information. She advised me to go to the zoning office again and get the information about the zoning law to open this kind of store and to apply for the zoning permit. I went to the zoning office for the third time and I met Mr. Sean Kinnery, the zoning officer. I asked him about the regular video store with the adult section in the specific location, and he responded by giving me an application and asked me to bring the plan (drawing) for the video store with the adult section. The next day, I went to the township with the application and my own drawing of the store. When I presented the material to Mr. Sean Kinnery, he opened the file for me and he gave it to the secretary. Then, the secretary said that I would have my permit within seven to ten days. After that, I got a call from Mr. Frank Mizer, the building inspector of Brick, NJ. He said that they can't accept my own drawings of the proposed store and that I had to get a professional architect to draw the plan. Therefore, I had contacted an architect from Barlo and Associate, Mr. Jim thru the yellow pages. When he came to the store and took a look at it, he gave a price of $1,950 to draw the plan. Since I had a very limited budget, I wanted to make sure that I wasn't throwing away money. I called Mr. Sean Kinnery again, before paying Mr. Jim to draw the plan, to make sure that it was legal with the zoning law to have an adult section. Mr. Kinnery said zoning is passed and that he had already signed my papers. He also said that he understood that it costs a lot of money, but it was alright to go ahead and get the legal drawing, and not to worry that everything will be taken care of. Then I got Mr. Jim to professionally draw the same plan that I had drawn previously. Mr. Jim finished the plan in five days and I took it to the zoning office and handed two copies of the plan to the secretary that had my file. I specifically asked her to make sure

to give one copy to Mr. Sean Kinnery and the other copy to Mr. Frank Mizer. Then the zoning office called me seven days later on May 2nd 2007, asking me to pick up my approved construction permit (yellow paper #07-1113) and the professional drawing of the store with the approved seal and that I can start construction on my store. Then according to the drawing, a contracted carpenter built the wall and the door to separate the adult section, tiles and carpet on the floor, alarm system, exit lights, and the emergency lights. Once all construction was finished, I called for fire and building inspection. The inspector, Mr. Mike Vecchio came to my location on May 25th 2007. He checked all constructions and the store and passed the building inspection (green tag). The fire inspector came on the same day, May 25th. At the time, somehow the rear exit light in the back of the store wasn't working, so he didn't approve the fire inspection (red tag). He said to fix the rear exit light and call for another inspection. An electrician fixed the light and I called for another inspection the same day. On May 29th, I went to the building department, to the same secretary and asked about my certificate of occupancy. Then, she called another inspector in the same department and he issued me a temporary certificate of occupancy and he also gave a date (June 4th) for the final inspection. Mr. Mike Vecchio came for the final inspection on June 4th and approved the store with another green tag. On June 4th 2007, another fire inspector came and he also approved the fire inspection (white tag). On June 5th, I went to the zoning office, the same secretary handed me the certificate of occupancy and said with that certificate I can now open the store for business.

On June 5th 2007, Mr. Stephen C. Acropolis, the council president came to the store. He mentioned that he had some complaints about the adult section from the

community. I showed him all my permits and approved floor plan. He looked around and checked the store. He acknowledged that I had all the permits and wished me good luck and left. June 6th 2007, I open the store for business. Some neighbors came to the store yelling, complaining that they received a misleading flyer about the "adult store" and were concerned that I had opened the store on my own without following proper procedure. I asked them to listen to my side. I showed them all the legal paper work. I showed them that I only carry adult magazines, videos, and DVD's in that section. I also showed them that the adult section is completely closed off and a person can only enter if they are 21 years or older with proper photo driver's license. The neighbors also acknowledged that I worked with the township and I did everything to the law and left. After few days, Mr. Daniel Kelly, the Mayor came to the store. He said that he had received complains from the neighbors about the adult section and he came to check the store. I also showed him all the paper work and I told him that I had done everything the zoning and the building department had asked me to do. He politely said that he had no answer for this and left.

On June 14th around 11:30 AM, three detectives and a police officer came to the store. They went to the adult section and looked around. Then one detective said, according to the township order, he had to arrest me. At that time, I told him that I had not done anything wrong intentionally and asked to hear my side. They were very professional and politely agreed. I showed them all the legal documents and told them I had done everything the zoning and the building department had asked me to do. Then, the detective went outside and called the prosecutor's office, and he came back and said that he was not going to arrest me. The three detectives took my inventory of the adult

section and the regular section. Then with my permission, they took pictures of the entire store and one adult DVD with them for their records. They asked me to close the store. They advised me to call my attorney and gave a number to call the business administrator, Mr. Scott Pezarras. First, I called my attorney explaining the whole situation and that I was asked by the police department to close the store. My attorney asked if I was issued a legal document to close the store. At that time, I had no paper work handed to me, so I told her that I didn't receive any. Then she advised me not to close the store without any legal paper work. I called Mr. Scott Pezarras and explained my situation, asking for a legal document for the reason to close the store. Within half an hour, Mr. Pezarras came to the store with the legal document signed by Mr. Sean Kinnery requesting to close the store and a copy of the code book of Brick Township (highlighted section 2C:34-7 sexually oriented business; location, building requirements; penalty). I faxed all these documents to my attorney and closed the store.

I am a small business owner, and I am married with two children. I have a very limited budget, so to prevent any problems I wanted to make sure that I was following the Brick Township law for opening the video store with the adult section from day one. I turned to Brick Township to seek advice, believing it was the best place to learn about the Brick Law. Each time I spoke to Brick officials, I over emphasized the adult section of the store, because I wasn't familiar with the township rules and I really wanted to make sure that I was following them. Brick officials knew exactly what my store would be like. I followed all the advice and laws the Brick attorney and the rest of the Brick officials gave me. I worked very cooperatively over two months with all the departments that I was asked to deal with, taking the time to make sure that I was following the law. Each

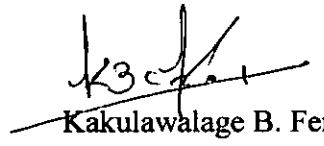
step I took to open the store, I double checked and got permits from the township before hand. First, I was told that everything was passed and to go ahead with the store. Then, after spending many hours with the Brick Township, spending all my money, and finally opening the store, I was told by the same zoning department and officials that I had worked with all along that I had violated sections of the Brick law (construction violations etc) and my zoning permit had been revoked. According to Mr. Kinnery's letter, one of the reasons to revoke the permit was that the zoning permit was approved without the knowledge of the legal drawing; however, the legal drawing was approved with the Brick Township seal prior to getting my permit. I presented all the material that was asked of me to the township before getting the permit. I am disappointed that after my willingness to work cooperatively with the Brick Township that I was not advised properly. I feel that I was misled by the township. I never received a direct "No, you cannot open a store with an adult section according to the Brick Township law" from anyone at the beginning. All I was asked to do was, if I was to open the store with the adult section in Brick Township, to fill out the application and follow the rules, which I have done up to this point. If the Brick Township wasn't sure of the laws for the adult section, I would've appreciated it very much if I was told the first day that I couldn't open the store, instead of revoking my permit after everything had been settled. If that was the case, I wouldn't have spent my time and my money opening the store. Now, this situation has mentally and financially affected me greatly. By now, I have met with pretty much all the Brick officials and you all know it was never my intention to go above the law. I politely request that before accusing me of any further violations, to check all my records, because I have permits to the store from the Brick Township. I kindly ask not to

be penalized if there were errors made within the Brick Township office; because once again, whether the legal drawing were over looked or whatever else happened inside of the Brick Township was out of my hands and I have done my part in following everything I was asked to do.

Finally, my intention of writing this letter is not to offend anyone, but simply to get the Brick Township officials to see my side of the story. I hope that you will all understand the position that I have fallen in financially and mentally. Please, give me a final answer soon without further delay, because without any sales, I have the store bills piling up and rent coming up. Thank you.

To the police department: Thank you for listening to my side and not falsely arresting me.

Sincerely,



Kakulawalage B. Fernando.

# TOWNSHIP OF BRICK

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



June 13, 2007

Department of Administration & Finance
Division of Land Use and Planning
Sean Kinnevy
Zoning Officer
732-262-1041
skinn@twp.brick.nj.us

Kate MacDonald
Asst.Zoning Officer
732-262-1043
Fax: 732-262-8954
kmacdon@twp.brick.nj.us
www.twp.brick.nj.us

Kakulawalage Bernard Fernando
CS DVD Video
14 Fox Hollow Road
Jackson, NJ 08527

Re: Block 869.01, Lot 4
1905 Route 88 – CS DVD Video; Camp Mall, Unit No. 6
Zoning Permit No. 2007-0262

Dear Ms. Fernando:

The Township of Brick is hereby revoking your zoning permit for your business on the referenced property for the following reasons:

1. The construction work done on the property does not match the construction plans for alterations approved by the zoning officer on March 27, 2007, which were part of the basis for approving the zoning permit;

2. A condition of the zoning permit is that an additional zoning permit is required for any additional work, yet work was done without an additional zoning permit being approved;

3. You were told that any new or additional construction drawings submitted to and/or required by the Division of Inspections has to be submitted, reviewed, and approved by the zoning officer prior to being reviewed by the construction official, yet plans drawn by your architect, Paul L. Barlo, AIA,PP of Barlo & Associates, LLC, were submitted without the knowledge or approval of the zoning officer;

4. Mr. Barlo's drawings were approved by the Division of Inspections, inspections were made, and a certificate of approval was issued, but without the required zoning permit for the approval of Mr. Barlo's drawings;

5. Based on conversations with the Township Attorney and township administrative officials, it appears that your business is in violation of the requirements of Chapter 362 of the Code of the Township of Brick, "Sexually Oriented Businesses" and also possibly of N.J.S.A. 2C:34-2(b).

Please cease the operation of your business until a zoning permit is approved and issued based on Mr. Barlo's drawings.

Very truly yours,

Sean Kinnevy

Sean Kinnevy
Zoning Officer

C: Daniel Kelly, Mayor
Scott Pezarras, Business Administrator
Jean Cipriani, Township Attorney
Michael Fowler, Principal Planner
Daniel Newman, Construction Official
Captain William Farnkopf, Police Department
CS DVD Video
Cousins Mall, Inc.
Zoning Office File

Mr. Kakulawalage Fernando, proprietor of, located at 1905 Rte 88 East, hereby agrees and acknowledges the following terms regarding his ownership and operation of the above-referenced business within the Township of Brick:

1) The principal use of CS DVD/VIDEO, located at 1905 Rte 88 East shall be rental and sales of videos/DVD's and magazines of a non-sexually-oriented nature. Such non-sexually-oriented materials shall comprise no less than 80% of the stock, and shall occupy no less than 80% of the floor area of CS DVD/VIDEO, located at 1905 Rte 88 East.

2) No more than 20% of the floor area, nor 20 % of the stock of CS DVD/VIDEO, located at 1905 Rte 88 East shall be dedicated to sexually-oriented materials, such materials to be limited to videos, DVDs and magazines.

3) All sexually-oriented materials located at CS DVD/VIDEO, located at 1905 Rte 88 East shall be displayed in the back of the store, in a manner so that no such materials are visible from the 80% of the store dedicated to non-sexually-oriented materials. The area dedicated to sexually-oriented materials shall have signage clearly restricted access to such area to individuals over the age of 21.

4) There shall be no signage outside of, nor within the 80% of CS DVD/VIDEO, located at 1905 Rte 88 East, which designates the store as one containing sexually-oriented materials.

5) Mr. Kakulawalage Fernando shall submit a revised zoning application and Certificate of Occupancy application, containing the representations made in this document and which also contains a drawing, sufficient for the use of the zoning, building and fire inspection departments, clearly delineating the precise, no more than 20%, portion of the premises of CS DVD/VIDEO, located at 1905 Rte 88 East which may be dedicated to sexually-oriented materials, and the manner in which such portion shall be shielded from the view of patrons of the portion of 80% of CS DVD/VIDEO, located at 1905 Rte 88 East.

6) Kakulawalage Fernando hereby acknowledges that it is the position of the Township of Brick that any violation of these terms shall constitute the violation of a sexually-oriented business in violation of the Code of the Township of Brick and NJSA 2c:34-7.

I hereby agree to, and acknowledge, the above terms:

Kakulawalage Fernando, Proprietor of CS DVD/VIDEO, located at 1905 Rte 88 East

Dated: