BLOCK 446.05 LOT 3 QUALIFICATION CODE _____ ADDRESS (SITE) 580 BRICK BLVD PERMIT NO. 17-2993

CONSTRUCTION PERMIT APPLICATION

CM-002788

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

I. IDENTIFICATION

1. Proposed Work Site at: 580 BRICK BLVD
2. Name of Owner in Fee: Theodore Stains & Sons
   Tel. (732) 477-2000 e-mail deansmith@rivierarealty.com
   Address 550 (street) BRICK BLVD BRICK (municipality) NJ 08723 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: DNA CUSTOM CARPENTRY Tel. (609) 758-1513
   Address 13 HUTCHINSON RD e-mail dnacc@optonline.net
   Allentown NJ 08501
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 22-2416 12 FAX: (609) 482-4443
5. Architect or Engineer TOKARSKI & MILLEMANN Contact MIKE MILLEMANN
   Address 228 BRICK BLVD BRICK NJ 08723 e-mail info@tm-architects.com
   Tel. (732) 262-0046 FAX: (732) 262-0045
6. Responsible Person in Charge once Work has Begun MIKE SABBATINI
   Tel. (609) 203-4100 FAX: (609) 482-4443

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 500 ✓		
2. Electrical	150 ✓		
3. Plumbing	150 ✓		
4. Fire Protection	116 ✓		
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	46		
10. Subtotal 2	$ 116		
11. Cert. of Occupancy	150		
12. Other			
13. TOTAL	$ 1181		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	1	
2. Height of Structure	22 ft.	
3. Area — Largest Floor	2689 sq. ft.	
4. New Building Area	n/a sq. ft.	
5. Volume of New Structure	n/a cu. ft.	
6. Max. Live Load	100 psf	
7. Max. Occupancy Load	69 people	
8. If Industrialized Building: State Approved ____ HUD ____		
9. Total Land Area Disturbed	sq. ft.	
10. Flood Hazard Zone		
11. Base Flood Elevation	ft.	
12. Wetlands yes ____ no ____		

COMMERCIAL

IIa. PROPOSED WORK

- ☐ Minor Work
- ☐ Repair
- ☐ Asbestos Abat. -Subch. 8
- ☐ New Building
- ☑ Alteration
- ☐ Lead Hazard Abatement
- ☐ Addition
- ☐ Renovation
- ☐ Radon Remediation
- ☐ Demolition
- ☐ Reconstruction
- ☐ Annual Permit

Tenant fit up

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building		MP			08/16/17	MAK			
☑ Electrical		6/29/17			7/5/17	PJC			
☐ Plumbing					7-2-17				
☐ Fire Protection					7/3/17	PO			
☐ Elevator		Eng Exempt			6/29/17	ECC			
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____ ____
   Gained, Rental ____ ____
   Lost, Sale ____ ____
   Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____ *Proposed* _____

III. PLAN REVIEW (optional)

DO YOU WANT:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 10/26/2017
Control Number C-17-002788
Permit Number 17-2993
Permit Issue Date 09/08/2017
Certificate Number 17-2993

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 580 BRICK BLVD. Brick Township, NJ Block: 446.05 Lot: 3 Qual:

Owner in Fee: THEODORE SMITH & SONS

Owner Address: 550 BRICK BLVD BRICK NJ 08723

Telephone:

Contractor DNA CUSTOM CARPENTRY

Address 13 HUTCHINSON RD ALLENTOWN NJ 08501

Telephone: (609) 758-1513 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: 29

Description of Work/Use: TENANT FIT UP - VERIZON WIRELESS ZONE

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:

Kenneth E. Kisil - ACTING
Construction Official

Fee: $150.00
Check Number: 1297
Collected By: Nichol Ponsi

Date Printed: 10/26/2017

U.C.C. F260 (rev. 08/05)

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(f)1.ix:

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

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature _____ Date _____

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

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(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 MAS CORPORATION / MIKE SABBATINI

Address 9 DUTCHESS DR.
Allentown NJ 08501

Telephone (609) 203-4100

Signature _____

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 9/8/17
Control #
Date Issued
Permit # 17-2993

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

Block 446.05 Lot 3 Qualification Code

Work Site Location 580 BRICK BLVD
BRICK, NJ 08723

Owner in Fee: MICHAEL SABBATINI

Tel. (609) 203-4600 e-mail mas@nzwireless.com

Address 9 DUTCHESS DR. Allentown NJ 08501
street municipality zip code

Contractor: DNA CUSTOM CARPENTRY Tel. (609) 758-1513

Address 13 HUTCHINSON RD e-mail dnacc@optonline.net
Allentown NJ 08501

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

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

Federal Emp. ID No. 22-2416127 FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	08/16/17	KEK
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 08/16/17
Approved by: KEK

SUBCODE APPROVAL for CERTIFICATE
[✓] CO [ ] CCO [ ] CA
Date: 10/26/17
Approved by: KEK

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame			* 10-2-17	SCP
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			10/25/17	SCP
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present M Proposed M
No. of Stories 1
Height of Structure 22ft± ft.
Area — Largest Floor 2689 sq. ft.
New Bldg. Area/All Floors sq. ft.
Volume of New Structure N/a cu. ft.
Max. Live Load 100 ft²
Max. Occupancy Load 29

Constr. Class Present Proposed
If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $ 10000
3. Total (1+ 2) $ 10000

U.C.C. F110
(rev. 11/09)

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.

Sign here: [signature]

Print name here: MICHAEL SABBATINI

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Tenant fit out for relocation of cellular phone store.
(Signed & Sealed plans attached)

2689 ft² COMMERCIAL

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 $

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

RECEIVING CLERK TW
DATE REC'D 6/23/17

ZONING PERMIT APPLICATION

PERMIT # ZP17-0120
DATE ISSUED 7/6/17

BLOCK: 446.05 LOT: 3 QUALIFIER: / SITE ADDRESS: 580 BRICK BLVD BRICK NJ 08723

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Theodore Smith & Sons (Dean Smith)
   COMPLETE ADDRESS: 580 BRICK BLVD
   BRICK NJ 08723
   PHONE # 732-477-2000 EMAIL: deansmith@rivierarealty.com

2. NAME OF APPLICANT: MICHAEL SABBATINI
   APPLICANT ADDRESS: 9 DUTCHESS DR.
   Allentown NJ 08501
   PHONE # 609 203-4100 EMAIL: mas@w2wireless.com

3. RESPONSIBLE PERSON FOR WORK: MICHAEL SABBATINI
   PHONE# 609 203-4100 FAX# 609 482-4443

4. SIGNATURE OF APPLICANT:

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 75-
OTHER: $
TOTAL: $ 75-

REQUIRED BY APPLICANT

RESIDENTIAL:
COMMERCIAL: ✓
EXISTING USE: Coldwell Bankers
PROPOSED USE: Verizon store

BOARD APPROVAL: ___ PB ___ ZB
RESOLUTION#:
APPROVAL DATE:

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)
*NEW BUILDING: *ADDITION *ALTERATION ✓ *PORCH *DECK

POOL: ABOVE GROUND IN GROUND FENCE: HEIGHT TYPE MATERIAL

HEIGHT: 22 ft ± (building) (*IF APPLICABLE)

OTHER

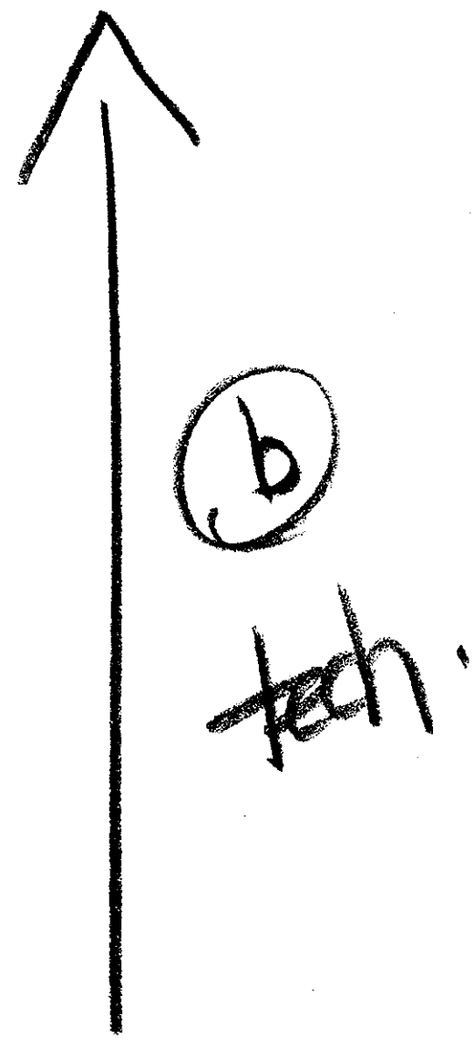
DESCRIPTION: relocating existing Verizon Store to another space in the plaza

ZONING REVIEW:
DATE REVIEWED: 6-28-17 DATE DENIED: DATE APPROVED: 6-28-17 INTLS:

(SEE BACK PAGE)

* 10-2-17 Frame o/k 1) check Fire stops on Demising wall Both side of wall. Need to add Emergency Exit From Back Rooms to Front Exit and Back exit.

*10-25-17 Final o/k Need Frame + sprinkle ceiling spac. for C.O.



OFFICE USE ONLY

RECEIVED
JUN 28 2017
ZONING

ZONING REVIEW:

DATE REVIEWED: 6/29/17 DATE DENIED: — DATE APPROVED: 6/29/17 INTLS:

DATE:	COMMENTS:	INITIALS:
6/29/17	SENT TO Comm	

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 446.05 LOT: 3 ADDRESS: 580 Brick Blvd Brick NJ 08723

IDENTIFICATION:

1. WORK SITE ADDRESS: 580 Brick Blvd
2. NAME OF OWNER IN FEE: Theodore Smith & Sons

   ADDRESS: 550 Brick Blvd PHONE #: (732) 477-2000

   Brick NJ 08723 FAX #: (__) _____
3. PRINCIPAL CONTRACTOR: _____

   ADDRESS: _____ PHONE #: (__) _____

   _____ FAX #: (__) _____
4. ARCHITECT OR ENGINEER: Mike Millemann

   ADDRESS: 228 Brick Blvd PHONE: #(732) 262-0046
5. RESPONSIBLE PERSON FOR WORK: Mike Sabbatini

   ADDRESS: 9 Duchess Dr. Allentown NJ 08501

PHONE #(609) 203-4100 FAX #: (609) 482-4443 E-MAIL: mas@wzwireless.com

FEE SUMMARY:

APPLICATION FEE: $ _____

REVIEW FEE: $ _____

INSPECTION FEE: $ _____

OTHER _____: $ _____

BOND(S): $ _____

TOTAL: $ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☐ OTHER _____

LENGTH: _____ WIDTH: _____ HEIGHT: _____

ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE REJECTED: _____ DATE APPROVED: _____ INITIALS: _____

"M" use 26895 sq ft 29 occupants Verizon store relocate

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 9/8/17

Date Issued / Permit # 17-2993

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

Block 446.05 Lot 3 Qualification Code

Work Site Location 550 Brick Blvd Brick NJ 08723

Owner in Fee: Theodore Smith & Sons

Tel. 732 477-2000 e-mail deansmith@rivieranealty.com

Address 550 Brick Blvd Brick NJ 08723

Contractor: Michael SABBATINI (street / municipality) Tel. 609 203-4100 (zip code)

Address 9 Duchess Dr e-mail mas@w2w.reless.com

Allentown NJ 08501

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

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

Fire Alarm Contractor No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

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

Location:

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible

Capacity

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve:

Total Cost of Fire Protection Work $ 10000

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/Contractor sign here:

Print name here: Michael SABBATINI

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Tenant Fit Out

Water Supply Source

Method of Alarm/Suppression System Supervision

COMMERCIAL

	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	1	
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		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other Interior Partitions	1	
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] *No Plans Required*

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[X] Fire Protection Plans Approved

Date: 7/13/17 Approved by: MJD

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 7-13-17

Approved by: KER

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [X] CA

Date: 10-25-17

Approved by: KER

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			10-25-17	KER
Other				

U.C.C. F140 (rev. 02/11) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 9/8/17
Control #
Date Issued
Permit # 17-2993

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

Block 446.05 Lot 3 Qualification Code

Work Site Location 580 BRICK BLVD
BRICK NJ 08723

Owner in Fee: Theodor Smith & Sons

Tel. (732) 477-2000 e-mail dean smith@rivierarealty.com

Address 550 BRICK BLVD BRICK NJ 08723
street municipality zip code

Contractor: ACCENT PLUMBING Tel. (609) 890 2727 *

Address 22 EDMUND ST Hamilton e-mail ACCENT2727@COMCAST
NJ 8610

Contractor License No. 6682 Exp. Date 7/17

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

Federal Emp. ID No. 22 2906444 FAX: (609) 890 2725

* CALL CELL: 609 516-6060

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ New $ 5800 Rehab

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
RUN 2" PVC BELOW SLAB, ROUGH & FINISH FOR KITCHEN SINK

QTY.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal/Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
1	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Water Heater
	Fuel Oil Piping
	Gas Appliances
	LPGas Tank
	Furnace
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Trap Prime
	Pressure Reducing Valve
	Greasetrap
	Sewer Connection
	Water Service Connection
	Stacks
	Mixing Valve
	Condensation Drains
	Hydronic Piping
	Radiant Heating
	Condenser
	Pool Heater
	Other
1	Other A/V Vent

FEE (Office Use Only)
$

DTD
NOT COMMERCIAL
OK

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 9-21-17
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 10-26-17
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

WORK NOT DONE OWNER DECIDED NOT TO INSTALL SINK See ATTACHED LETTER

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

Print Name

WIRELESS ZONE

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 9/8/17
Control #
Date Issued
Permit #

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

Block 446.05 Lot 3 Qualification Code

Work Site Location 580 BRICK BLVD

Owner in Fee: THEODORE SMITH & SONS

Tel. 732 477-2000 e-mail deansmith@rivierarealty.com

Address 550 BRICK BLVD (street) BRICK (municipality) NJ 08723 (zip code)

Contractor: DAVID NOBLE ELECTRIC CO. Tel. 609 954-6229

Address 360 ROUTE 539 e-mail nobleelectric1@gmail.com
CREAM RIDGE NJ 08514

Contractor License No. 34E 101740900 Exp. Date 3/18/18

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present M Proposed M

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 5000

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and I am making application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: David Noble

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: ALTERATION: TENANT FIT OUT

COMMERCIAL

QTY.	SIZE	ITEMS	FEE (Office Use Only)
48		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—F.act. HP	
3		Emergency & Exit Lights	
10		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[✓] Electric Plans Approved
Date: 7/5/17 Approved by: RJC

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 7/5/17
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[✓] CO [ ] CCO [ ] CA
Date: 10/25/17
Approved by:

INSPECTIONS

Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			9-29-17	MM
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			10-25-17	MM
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

APPLICATION FOR CERTIFICATE

Date Received	06/26/2017
Date Permit Issued	09/08/2017
Control #	C-17-002788
Permit #	17-2993
Date Issued	10/26/2017

IDENTIFICATION

Block 446.05 Lot 3 Qualifier

Work Site Location 580 BRICK BLVD. Brick Township, NJ

Owner in Fee THEODORE SMITH & SONS
550 BRICK BLVD BRICK NJ 08723

Telephone

Contractor DNA CUSTOM CARPENTRY
Address 13 HUTCHINSON RD ALLENTOWN NJ 08501

Telephone (609) 758-1513
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

ACTION

- [x] CERTIFICATE OF OCCUPANCY
- [ ] CERTIFICATE OF CONTINUED OCCUPANCY
- [ ] LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
- [ ] TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP Previous B Current

FINAL COST OF CONSTRUCTION: $ 20900
(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all the integral equipment exclusive of process or manufacturing equipment.)

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:
Alteration TENANT FIT UP - VERIZON WIRELESS ZONE

I hereby attest that to the best of my knowledge, the completed project meets the conditions of construction permit and all prior approvals, and all work has been completed substantially in accordance with the code and with those portions of the plans and specifications controlled by the code, with any substantial deviations noted. Incomplete items listed on a Temporary Certificate of Occupancy will be complete by the date on the

SIGNED: _____
Owner/Agent

- [ ] OWNER
- [x] AGENT

UCC F270 equiv.

Tenant fit-ups / Commercial Renovations

Certificate requirements

print
reset defaults
check all
complete

Tenant fit-ups / Commercial Renovations

UCC Requirements

Approved Final Building Inspection	comment	☑	☐
Approved Final Electrical Inspection	comment	☑	☐
Approved Final Plumbing Inspection	comment	☑	☐
Approved Final Fire Inspection	comment	☑	☐
Approved Final Elevator Inspection (If Applicable)	comment	☐	☑

Prior Approvals

Approval from the BTMUA (732) 458-7000	**comment**	☑	☐
emailed MUA on 10/20/17 MFF Ok as per MUA on 10/24/17 MFF			
Approval from the Division of Engineering (If Applicable)	comment	☐	☑
Final Ocean County Soil Conservation 714 Lacey Rd. Forked River (609) 971-7002 (If Applicable)	comment	☐	☑
Affordable Housing Approval (If Applicable)	comment	☐	☑
Signed Certificate of Occupancy Application	comment	☐	☐
All Updates Have Been Approved	comment	☑	☐

This checklist has been given to: (edit)

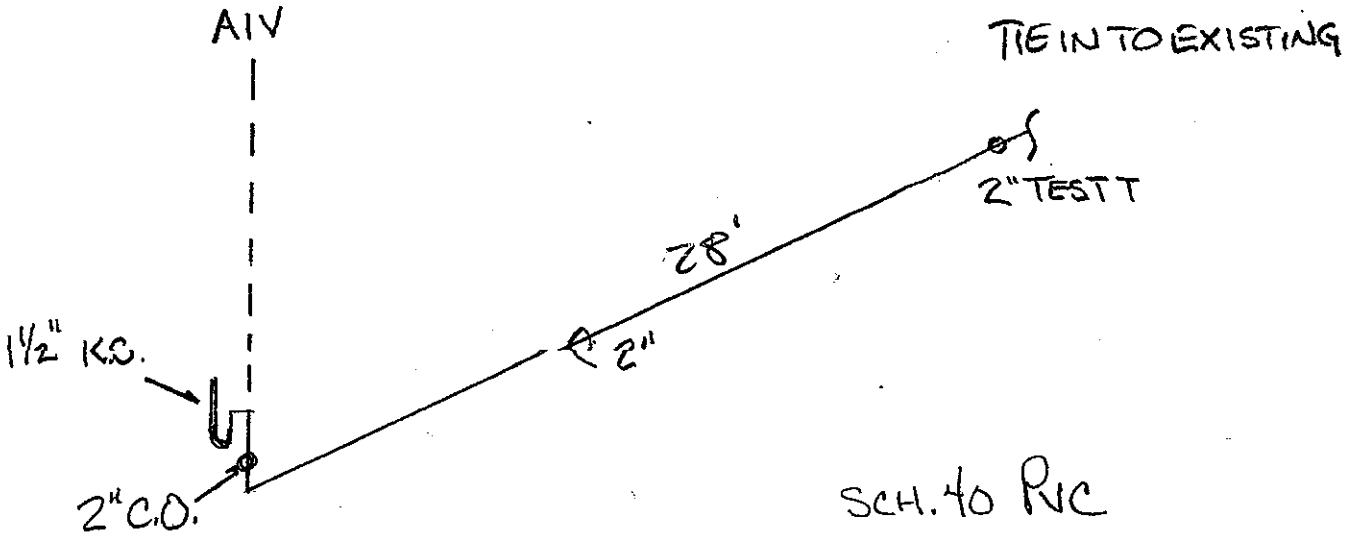
22 EDMUND STREET
TRENTON, N.J. 08610

PHONE: (609) 890-2727
N.J. LIC. NO. 6682

Accent

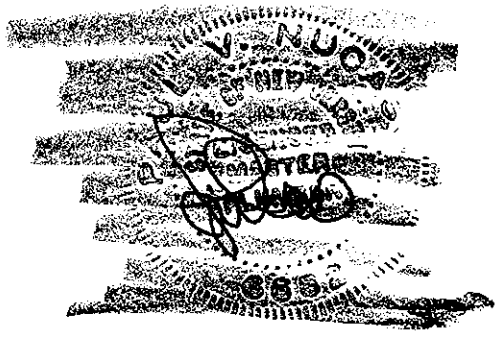
Plumbing — Heating

Paul V. Nucaso - Master Plumber



PLUMBING
JUL 12 2017
APPROVED

WIRELESS ZONE @ BRICK
SANITARY RISER DIAGRAM



22 EDMUND STREET
TRENTON, N.J. 08610

PHONE: (609) 890-2727
N.J. LIC. NO. 6682

Accent

Plumbing — Heating

Paul V. Nucaso - Master Plumber

To: Plumbing Subcode Official, Township of Brick, New Jersey

From: Paul Nucaso

Accent Plumbing

Re: Permitted work not to be done

To Whom it may concern,

A permit was applied for and issued to perform work at the tenant fit-out of the Verizon store at 580 Brick Blvd. The scope of the work was to install water lines and trench a drain line for a sink.

The owner has decided to not install these features in the break room, as is on the plans.

If there are any questions or concerns, kindly feel free to reach out to me at either my office (6090 890-2727 or directly by cell (609) 516-6060

Sincerely,

Paul Nucaso, Owner

Accent Plumbing

Matthew Fagen

From: Susan Stanisz <sstanisz@brickmua.com>
Sent: Tuesday, October 24, 2017 9:22 AM
To: Matthew Fagen
Cc: Susan Stanisz
Subject: VERIZON WIRELESS ZONE

HEY MATT, WE WERE OUT THERE THIS MORNING & EVERYTHING IS OK TO CO.

580 Brick Blvd. → Verizon Wireless Zone

TOWNSHIP OF BRICK
DEPARTMENT OF INSPECTIONS

OCCUPANCY

OCCUPANT LOAD 29
LIVE LOAD _____ P. S. F.
FIRE GRADING _____ HOURS
USE GROUP B

CONSTRUCTION PERMIT

Date Issued 9/8/17
Control # C-17-002788
Permit # 17-2113

IDENTIFICATION Block: 446.05 Lot: 3 Qualifier
Work Site Location: 580 BRICK BLVD. Brick Township, NJ
Owner in Fee THEODORE SMITH & SONS
550 BRICK BLVD BRICK NJ 08723
Telephone:

Contractor DNA CUSTOM CARPENTRY
Address 13 HUTCHINSON RD ALLENTOWN NJ 08501
Telephone: (609) 758-1513
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
TENANT FIT UP - VERIZON WIRELESS ZONE

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $20,900

D. Heuman Jr. HP
Construction Official

8/16/17
Date

PAYMENTS (Office Use Only)

Building	$500
Electrical	$150
Plumbing	$150
Fire Protection	$116
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$40
CO Fee	$150.00
Other	$0
Total	$1,106 +75
Check No.	1397 $1181
Cash	$0
Credit	$0
Collected By	

U.C.C. F170
equiv (rev.1/04)
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.

09/08/17 2:23PM 00155842406
XX10 SERV.010
#2993
BUILDING $500.00
ELECTRIC $150.00
PLUMBING $150.00
FIRE $116.00
DCA $40.00
C/O $150.00
ZPA $75.00
CHECK $1181.00

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

- [x] 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".

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

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

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1336

Date Issued: 9/8/17
Application Number: ZA-17-00834
Application Date: 06/27/2017
Project Number:
Permit Number: ZP-17-01122
Fee: $75.00

Zoning Permit

Worksite Location: **550-580 BRICK BLVD.**
Unit 8
Brick Township, NJ 08723

Block: **446.05**
Lot: **3**
Qualifier:
Zone: **B-2**

Owner: **THEODORE SMITH & SONS**
Address: **550 BRICK BLVD**
BRICK, NJ 08723

Applicant: **Michael Sabbatini**
Address: **9 Dutchess Dr.**
Allentown, NJ 08501

Application Approved Date: 06/28/2017

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Retail Store (Verizon Store-Formerly Coldwell Banker)
Nonconforming Use is:

Work Description:
Rehabilitation, Tenant Fit-Up - Interior alterations due to the relocation of the existing Verizon Store to another space in the plaza.

Additional Zoning Permit is required for additional work or signage.

Upon review it was determined that the Zoning Permit:

- ☑ Permitted by Ordinance
- ☐ Permitted by Variance approved on: _____
- ☐ Valid Nonconforming Use is established by
  - ☐ Zoning Board of Adjustment
  - ☐ Zoning Officer

Christopher J. Romano, Assistant Zoning Officer — 06/28/2017 Date

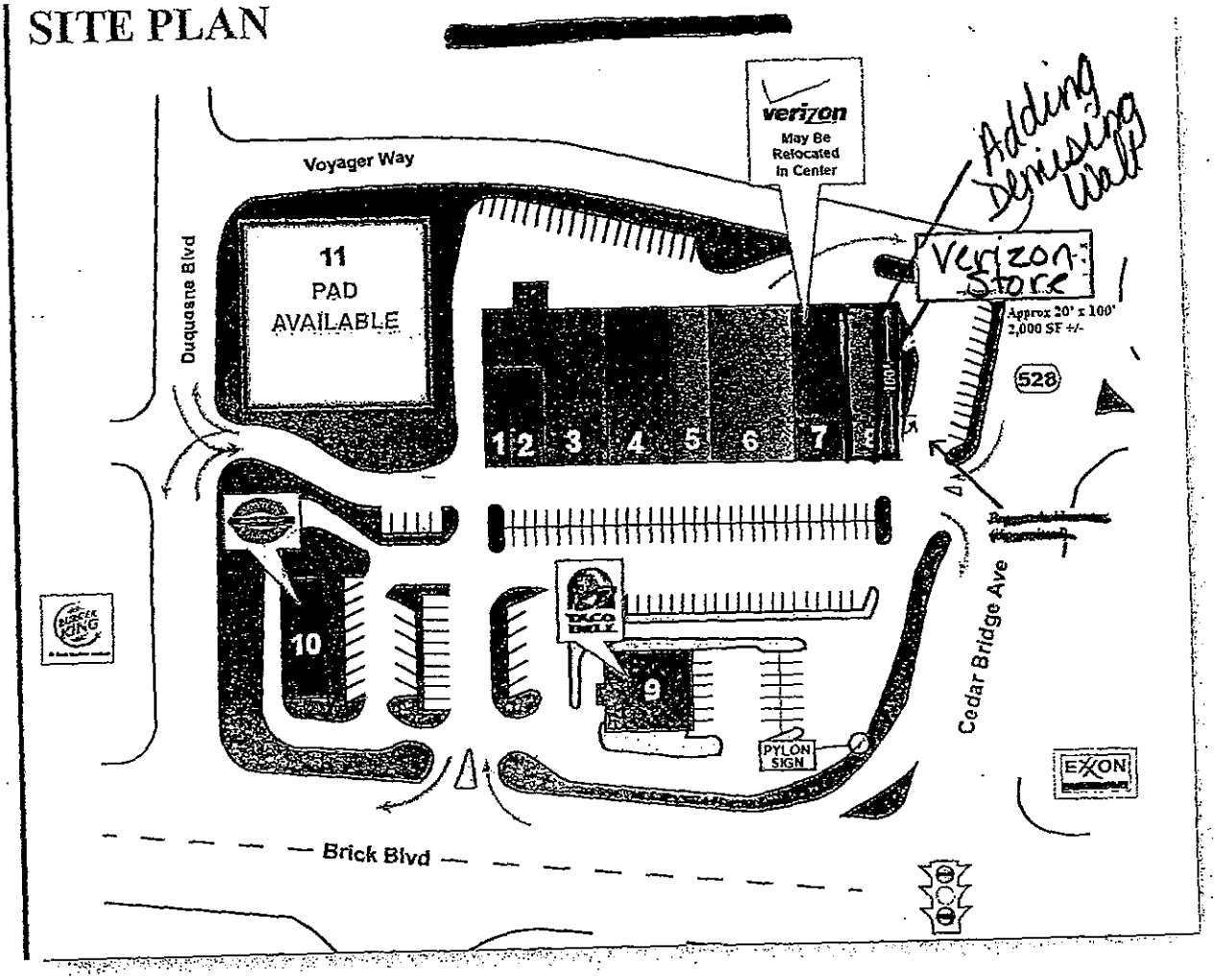
Sean Kinnevy, Zoning Officer — 6/29/17 **Date**

RIVIERA PLAZA
580 BRICK BLVD.
BRICK, NJ 08723

Zoning Review
Approved
By: Denise Hall
Date: 5-18-17

SITE PLAN

SITE PLAN



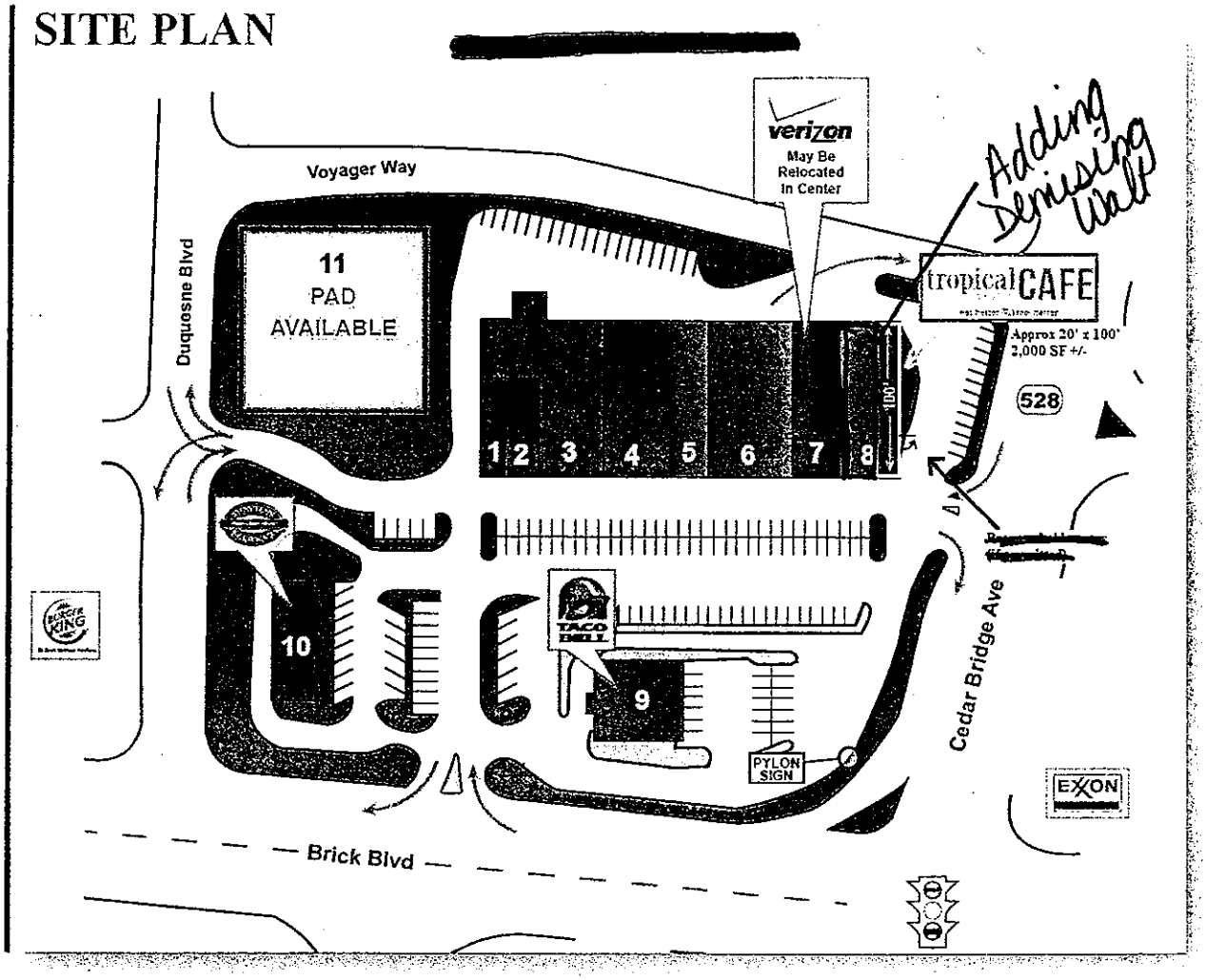
Zoning Review
Approved
By: Tenant fitup
Date: 6-28-17

RIVIERA PLAZA
580 BRICK BLVD.
BRICK, NJ 08723

Zoning Review
Approval
By: [illegible] Denise Wall
Date: 5-18-17

SITE PLAN

SITE PLAN



Zoning Review
Approval
By: [illegible] Tenant pylon
Date: 6-28-17

RIVIERA PLAZA
580 BRICK BLVD.
BRICK, NJ 08723

Approved
By: Denise Wall
Date: 5-18-17

SITE PLAN