

RECEIVED 446.05 LOT 3

ADDRESS (SITE)

RIVIERA PLAZA
550 BRICK BLVD

-PERMIT NO.

2183-97

MAY 22 1997

called
6/11/97



CONSTRUCTION PERMIT APPLICATION

DIV. OF INSPECTION

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

I. IDENTIFICATION

1. Proposed Work-site at: FORBES LIQUORS - RIVIERA PLAZA
2. Name of Owner in Fee: THEODORE SMITH & SONS Tel. (908) 477-7779
- Address 550 BRICK BOULEVARD, BRICK, NJ 08723
street municipality zip code
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: SIGNMAKERS, INC. Tel. (908) 919-1703
- Address 5050 INDUSTRIAL WAY
- License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
- Federal Emp. No. 22/417/1956 Social Security No. _____
5. Architect or Engineer _____ Tel. (_____) _____
- Address _____
6. Responsible Person in Charge of Work AS ABOVE Tel. (_____) _____

V. FEE SUMMARY (for office use only)

- | | | Update | Update |
|--------------------------------------|-----------|--------|--------|
| 1. Building | \$ 147- | | |
| 2. Electrical | | | |
| 3. Plumbing | | | |
| 4. Fire Protection | | | |
| 5. Elevator Devices | | | |
| 6. Subtotal | \$ 147- | | |
| 7. Less 20% for
State Plan Review | | | |
| 8. Subtotal | \$ 6- | | |
| 9. DCA Training Fee | | | |
| 10. Subtotal | \$ | | |
| 11. Cert. of Occupancy | | | |
| 12. Other 200 | \$15 | | |
| 13. TOTAL | \$ 168.00 | | |

VI. BUILDING/SITE CHARACTERISTICS

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

(office use only)	
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II. PROPOSED WORK

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

Est. Cost

OPTIONAL (for office use only)

	Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re- viewer	Resubmission Dates		Re- viewer
						Approval	Rejection	
	<i>[Signature]</i>	5/12/17		6/14/17				
80000 -	CWB	6/17/17		6/17/17	<i>[Signature]</i>			

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 | 4. ☐ Refrigeration Systems | 7. ☐ Sprinklers |
| 2. ☐ High Pressure Boilers | 5. ☐ Cross-Connections/Backflow
Preventers | 8. ☐ Smoke Control Systems in Open Wells |
| 3. ☐ Pressure Vessels | 6. ☐ Hazardous Uses/Places of Assembly | 9. ☐ Underground Storage Tanks |

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No of dwelling units:

Before Construction _____
After Construction _____
Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
Liquors
3. Change in Use Group,
Indicate Former:

IMPORTANT!
A-48 BT - MANDATORY FEE - COMMERCIAL

LDS BR 10511402

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 Roger Wilson Date May 22, 1997

II. AGENT SECTION

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

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

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

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

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

☒ Check if contractor.

Agent Name SIGNMAKERS, INC.

Address 5050 INDUSTRIAL WAY
FARMINGDALE, N.J. 07727

Telephone (908) 919-1703

Signature Roger Wilson Date May 22, 1997

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

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

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

X. CERTIFICATES ISSUED (office use only)	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____
☐ Temporary Certificate of Occupancy	No. _____
☐ Continued Certificate of Occupancy	No. _____
☐ Certificate of Occupancy	No. _____
☐ Certificate of Approval	No. _____
☐ None	



CONSTRUCTION PERMIT

Date Issued 7-24-97
Control # 2183-97
Permit # 2183-97

IDENTIFICATION Block 446.05 Lot 3
Work Site Location 550 BRICK BLVD. Contractor Sigmunden, Inc.
Owner In Fee Theodore Smith & Sons Address _____
Address same Tele. (____) _____
Lic. No. or Bldrs. Reg. No. _____ Exp. Date 88000288
Tele. (____) _____ Federal Emp. No. 21434
or Social Security No. _____ INT 0.00

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

For Forbes Liquors

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 \$ 8000.00

U.C.C. Form F-170C

CONSTRUCTION OFFICIAL

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

PAYMENTS (Office Use Only)		
Building	<u>147.00</u>	BUILDING
Plumbing	<u>6.99</u>	Plumbing
Electrical	<u>15.00</u>	ELECTRICAL
Fire Protection	<u>168.00</u>	FIRE PROTECTION
Other	<u>168.00</u>	Other
Other	<u>0.00</u>	Other
DCA Training Fee	<u>14.00</u>	DCA Training Fee
Cert. of Occ.		Cert. of Occ.
Other	<u>15.00</u>	Other
Total	<u>168.00</u>	Total
Check No.	<u>2807</u>	Check No.
Cash		Cash
Collected By:		Collected By:

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

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



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received 7-24-97
Date Issued
Control # 2183-97
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
Work Site Location FORBES LIQUORS RIVERA PLAZA
Owner in Fee THEODORE SMITH & SONS
Address 550 BRICK BOULEVARD
BRICK N.J. 08723
Tele. (908) 477-7779
Contractor SIGNMAKERS INC.
5050 INDUSTRIAL WAY
Address FARMINGDALE, N.J. 07727
Tele. (908) 919-1703
Lic. No. or Bids. Reg. No. 22/417/1956 or Social Security No. _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☒ No Plans Req.	6-12-97	TH	Type:	Failure	Approval
☒ All			Footings		
☐ Footing			Foundation		
☐ Foundation			Slab		
☐ Frame			Frame		
☐ Other			Insulation		
Joint Plan Review Required:			Finishes:		
☐ Elec. ☐ Plumb. ☐ Fire			Energy		
SUBCODE APPROVAL			Mechanical		
☐ CO ☐ CCO ☐ CA			TCO		
Date:			Other		
Approved By:			Final		

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg. \$ 8,000.00
2. Alteration \$ 8,000.00
3. Total (1+2) \$ 16,000.00

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

Roger Williams

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

SUPPLY & INSTALL
(2) SIGNS, ONE STORE FRONT
ONE ON SIDE OF BUILDING

TYPE OF WORK:

☐ New Building
☐ Addition
☐ Alteration

☐ Roofing
☐ Siding
☐ Fence
☒ Sign 147 Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other
☐ Other
☐ Demolition

GOVERNMENT
OFFICE USE ONLY
FEE \$ 147.00

Administrative Surcharge

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

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: June 6, 1997 1997 - 1825

Block 446.05 Lot 3 Zone B-2, G.B.

Property Address: 550 Brick Boulevard, Riviera Plaza

Owner: Theodore Smith & Sons (Phone): (908) 477-7779

Applicant: Roger Wilson (Phone): (908) 919-1703

Mailing Address: 5050 Industrial Way, Brick, N.J. 08724

Existing Use: Liquor store.

Proposed Use: Liquor store.

Proposed Construction (if any): Two (2) wall signs:

(1) 40" by 32' facing Brick Boulevard;

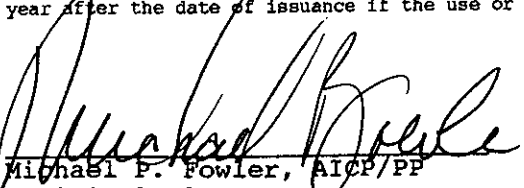
(2) 24" by 20' facing Cedar Bridge Road;

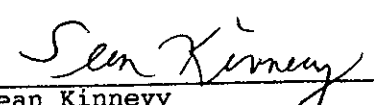
"Forbes Liquors", 147 square foot total.

Conditions: Sign area may not exceed 15% of facade areas.

Please note that a Construction Permit, as well as a Zoning Permit, must be obtained prior to any construction. You will be notified by the Division of Inspections to pick up and pay for your entire Construction Permit.

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


Michael P. Fowler, AICP/PP
Municipal Planner


Sean Kinnevy
Zoning Officer

X
CERTIFICATE OF COMPLIANCE

BLOCK 446.05 LOT 3 SITE ADDRESS 2600 S. 1st St. P.O. Box 100
TYPE OF SITE Commercial TYPE OF BUSINESS _____
Residential/Commercial
APPLICANT John L. Jones PHONE NUMBER 407-587-5276
APPLICANT ADDRESS 2600 S. 1st St. P.O. Box 100 CITY & STATE Fort Lauderdale, FL 33301
CASE # _____ NAME OF BUSINESS _____

INCLUSIONARY DEVELOPMENT

☐ Affordable Fee Required _____ Date _____
Down Payment _____ Date _____
Balance _____ Date _____
Pd. in Full _____ Date _____
☐ Market Rate No Fee Required

MANDATORY DEVELOPER FEES

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

Estimated Assessment: \$5,000.00 Date 6/1/97
Required Deposit on Estimate \$ 25.00 Date 6/1/97
Check # _____ Receipt # _____
Actual Assessment: \$5,000.00 Date 6/1/97
Actual Required Fee: \$ 50.00
Minus Deposit of Estimate \$ 25.00
Balance Due \$ 25.00
Amount Paid in Full \$ 50.00 Date 6/1/97
Check # 3529 Receipt # 6537

Total Fee Paid at this time

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

Carol A. Wolfe
Affordable Housing Administrator

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



Joseph C. Scarpelli, Mayor

Township Council:

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

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

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 6/9/97

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 4116.05 LOT 3 SITE ADDRESS 550 Brick Blvd.
TYPE OF SITE Commercial TYPE OF BUSINESS Retail
(Residential/Commercial)
APPLICANT Forbes Liquors CITY & STATE Brick NJ

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

\$ 5,000
Frederick R. Millman
Frederick R. Millman, CTA, Tax Assessor
6/9/97
Date

☒ Please review the attached application for a final assessed value for the construction at the above referenced site:

\$ 5,100
Frederick R. Millman
Frederick R. Millman, CTA, Tax Assessor
6/16/97
Date

PAY TO THE ORDER OF Township of Brick \$ 50.00
fifty no/100
CollectiveBank
FOR Sign permit Shedine Villano
⑈003539⑈ ⑈231270793⑈ 2678001565⑈

Mary Lou Powner

To: Scott M. Pezarras, Chief Financial Officer
From: Carol A. Wolfe, Affordable Housing Administrator
Re: Affordable Housing Fees
Date: 6/17/97

Business/Development: Forbes Liquors
Owner/Applicant: "
Property Address: 550 Brick Blvd. Brick NJ
Block: 446.05 Lot: 3

DEPOSIT RECEIVED
Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number _____
Estimated Fee _____

Deposit Amount \$ _____

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check No.: 3539
Final Fee: 50.00
Less Deposit: 50.00

Final Payment \$ 50.00

FOR DEPOSIT ONLY-AFFORDABLE HOUSING TRUST ACCT # 4880071456

Collection of said fees as authorized by Township Ordinance 354-2C-93, is pursuant to N.J.S.A. 52:27d-301 et seq. and N.J.A.C. 5:92-18 et seq.

Received in Treasurer's Office by:

H Villano
Signature

6/17/97
Date

24" Forbes' & Liquors

SIDE SIGN

40" 32'-0" Forbes' Liquors

FRONT SIGN

APPROVED FOR ZONING ONLY
SEAL: MURPHY, ZONING OFFICER
DATE: June 6, 1997
Jen King - wall signs

DEAN: THIS IS LAYOUT FOR
FORBES LIQUORS

ATTN: DEAN SMITH

NAV # 4477 2229