BLOCK 446.05 LOT 3 QUALIFICATION CODE C13-60 ADDRESS (SITE) Cell Master Riviera Plaza PERMIT NO. 02-2360

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: Cell Master 550 Brick Blvd Riviera Plaza
2. Name of Owner in Fee: Theodore Smith & Sons Tel. (732) 477-2000
   Address 550 Brick Blvd (street) Brick (municipality), NJ (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Rock Solid Company Tel. (732) 774-1377
   Address 60 Steiner Ave Neptune City, NJ
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 22-3437134 FAX: (732) 988-1505
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person in Charge of Work William Miller (agent for)
   Tel. (732) 774-1377 FAX (732) 988-1509

Sign

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 85		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	5		
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other	30		
13.	TOTAL	$ 120		

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

		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	100	(illegible)	6/10/02		6-20-02	Fmy			
2.	☐ New Building									
3.	☐ Addition									
4.	☐ Alteration									
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☒ Electrical									
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition		Gal	6/19/02		6/19/02				
	TOTAL COSTS	100								

OPTIONAL (for office use only)

COMMERCIAL

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

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:
3. Change in Use Group, Indicate Former:

LDS BR 10301715

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 _____

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 Neo Sign Company William Mellon agent for S
Address 60 Steiner Court
Neptune City NJ
Telephone (732) 774-1377
Signature William Mellon

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.				

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 05/27/2002
Control #
Permit # 02-2969

UCC NEW JERSEY

CONSTRUCTION PERMIT

IDENTIFICATION Block 446.05 Lot 3 Qual

Work Site Location 550 BRICK BLVD-CELL MASTER SIGN
Owner in Fee WOODFORD SMITH & SONS
Address BRICK, NJ 08723-
Telephone (732)477-2000

Contractor REX SIGN CO
Address 1015 MAIN ST
Telephone (732)774-1377
Lic. No. or Bldrs. Reg. No.
Federal Exp. No. 22-3437134

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
2 SIGNS FOR CELL MASTER

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 $ 6,000

Construction Official

06/27/2002
Date

PAYMENTS (Office Use Only)

Building	85
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	15
DCA Training Fee	5
Cert. of Occupancy	0
Other	15
Total	120 00
Check No.	2359
Cash	
Collected By	BC

06/27/02 11:11AM 0000000R2903
*X01 SERV.001

#022360	
BUILDING	$85.00
FPA	$15.00
ZPA	$15.00
DCA	$5.00
**TOTAL	$120.00
CHECK	$105.00
CASH	$15.00
CHANGE	$0.00

U.C.C. P170 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 06/10/2002
Date Issued 6/27/2
Control # C13-60
Permit # 02-2860

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 Qual
Work Site Location 550 BRICK BLVD-CELL MASTER SIGN
Owner in Fee THEODORE SMITH & SONS
Address SAME
BRICK, NJ 08723-
Tele.(732)477-2000
Contractor REX SIGN CO
Address 1015 MAIN ST
BRADLEY BEACH, NJ 07720-
Tele.(732)774-1377 Fax (732)988-1509
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3437134

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

2 SIGNS FOR CELL MASTER

COMMERCIAL

Must Have Street Address

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	6/20/02	Fig
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
[ ] Elev
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 6,000
3. Total (1+2)$ 6,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[X] Sign 85 Sq. Ft.	85
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 85
	DCA Training Fee	$ 5

U.C.C. F110 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 06/10/2002
Date Issued 6/27/2
Control # C13-60
Permit # 02-2360

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 Qual
Work Site Location 550 BRICK BLVD-CELL MASTER SIGN
Owner in Fee THEODORE SMITH & SONS
Address SAME
BRICK, NJ 08723-
Tele.(732)477-2000
Contractor REX SIGN CO
Address 1015 MAIN ST
BRADLEY BEACH, NJ 07720-
Tele.(732)774-1377 Fax (732)988-1509
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3437134

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

2 SIGNS FOR CELL MASTER

Must Have Street Address

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	6-20-02	EJZ
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
[ ] Elev

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 6,000
3. Total (1+2)$ 6,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[X] Sign 85 Sq. Ft.	85
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 85
DCA Training Fee	$ 5

Paid [ ] Check #
Collected by:

U.C.C. F110 (rev. 3/96)

TOWNSHIP OF BRICK
ZONING PERMIT

Approved: June 17, 2002 **No.** 2.1016

Block: 446.05 **Lot:** 3 **Zone:** B-2, General Business

Property Address: 550 Brick Boulevard, Riviera Plaza

Applicant: William M. Clark; Rex Sign Co.

Property Owner: Theodore Smith & Sons

Existing Use: Retail unit, "Cell Master" store.

Proposed Use: Same.

Proposed Construction: Two (2) wall signs, 12' x 3' and 14' x 3'8", "Cell Master".

Conditions: The total sign areas cannot exceed 15% of the total façade areas.

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
Municipal Planner

Sean Kinnevy
Zoning Officer

RECEIVED
JUN 13 2002
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 446.05 Lot 3 Qualifier

PROPERTY ADDRESS Riviera Plaza 550 Brick Blvd

PERSONAL NAME OF APPLICANT William McClurk (agent for)

BUSINESS NAME OF APPLICANT New Sign Company

PROPERTY OWNER Theodore Smith & Sons (732) 477-2000

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☑ Commercial (please describe) Retail Strip mall

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☑ Commercial (please describe) Same as present use

PROPOSED CONSTRUCTION (check all that apply)

☑ New Building (please describe) Manufacture & installation on new sign
☐ Addition
☐ Alteration
☐ Porch or deck (state heights)
☐ Shed (state height)
☐ Fence (state type & height)
☐ Swimming Pool ☐ in-ground ☐ above-ground
☑ Other (please describe) Sign

COMMERCIAL

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

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

☐ 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.

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 William McClurk (agent) Date June 6, 2002

Reviewed by Zoning Office JK Date 6/18/2 (X) Approved ( ) Denied

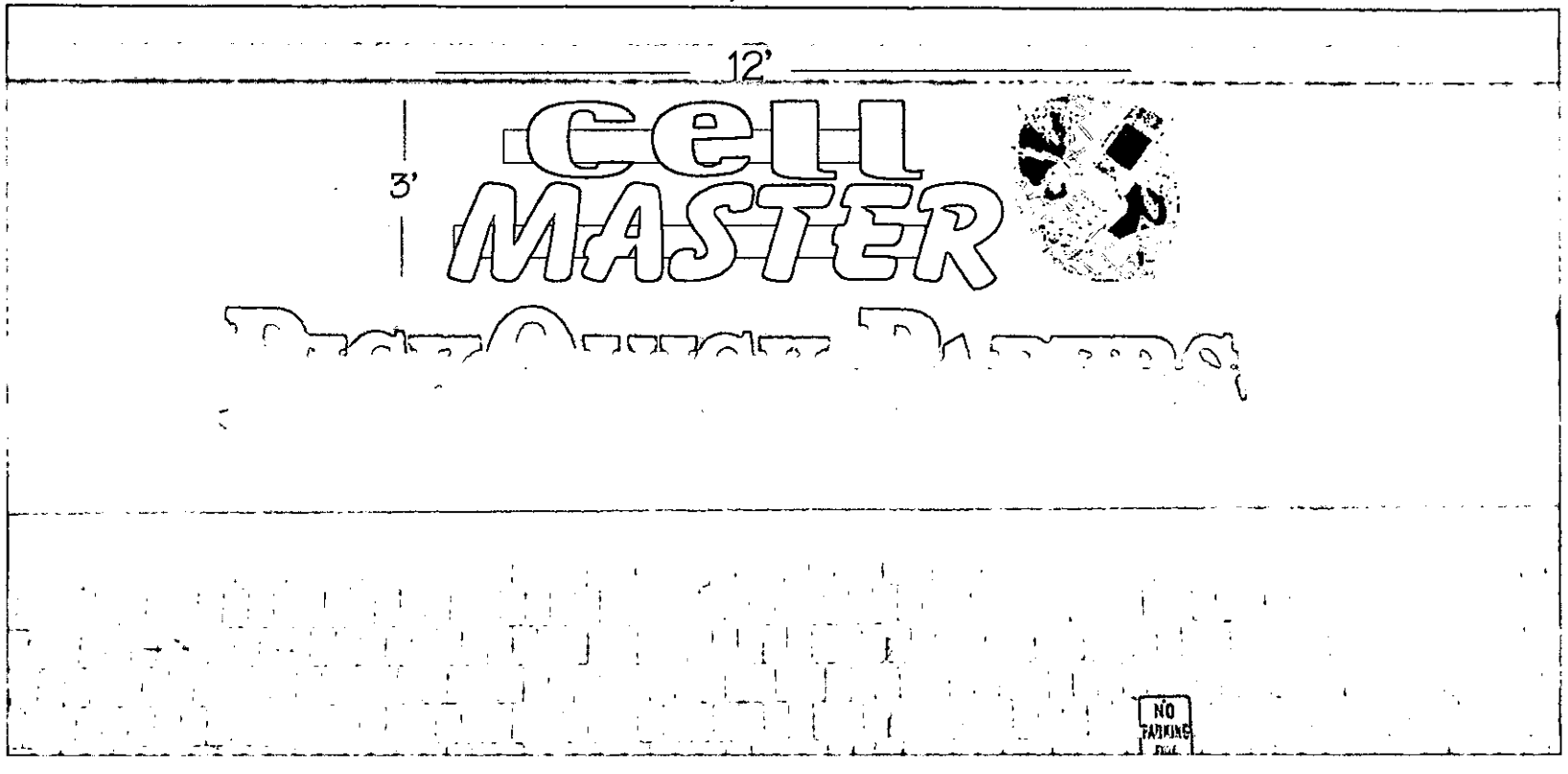
7 / 2001

Side Elevation

combination of 20" & 16" letters on raceway

Total of 36 sqft

1"=1.5'



APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
DATE 6-17-22

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Department of Engineering

Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
http://www.gbshost.com/brick
http://www.twp.brick.nj.us

Date: June 6, 2002

COMMERCIAL

Township Engineer
401 Chambers Bridge Road
Brick, NJ 08723

RE: Block: 446.05 Lot: 3

Property Address: 550 Brick Blvd

I, William McClurk agent for of 550 Brick Blvd,
(name) (address)

Request to be exempted from the plot plan requirement for an addition as outlined in the Brick Land Use Book, Chapter 190.31, part B. * Building mounted sign -

William McClurk (agent for)
Applicant's Signature

The following shall be submitted with this request:

1. Submit survey locating existing dwelling and proposed addition. Dimensions of 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.

OFFICE USE

Approved: 6/19/02 Signed:

Rejected: Signed:

Comments:

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000
Zoning, extension 269

Office of
Division of Inspections

SIGN CONSTRUCTION PERMITS

1. A construction permit is required before a sign or advertising structure may be erected or replaced.
2. Zoning approval is required before a sign construction permit may be issued. All requirements of Chapter 190 of the Township Code must be met.
3. A plot plan or survey map must be submitted with the sign permit application and must show the proposed location of the sign and the setbacks from all property lines.
4. A drawing must be submitted with the sign permit application showing the following:
   a. Dimensions of the sign
   b. Square footage of the sign
   c. Total height of the sign
   d. Distance above ground level
   e. Wording of the sign
5. The fee for a sign construction permit shall be one dollar ($1.-) per square foot of the surface area of the sign, [redacted]. In the case of double-faced signs, the area of the surface of only one (1) side of the sign shall be used for purpose of the fee computation.

John Kennevy
Zoning Officer 4-19-89

GAS CONVERSIONS: Always complete fire, plumbing, and electrical and include brochures for boiler, furnace and /or air conditioner. Building is required if a chimney certification is not completed & submitted. Elevation certificate must be submitted if located in a flood zone.

HOT TUBS: Treat as an AG pool permit application. See swimming pools.

MEMBRANE STRUCTURES: Complete zoning, engineering and building. Must submit brochure and anchoring method.

PLUMBING: Complete plumbing application along with gas piping isometric sketch, and /or list of existing fixtures.

ROOFING & SIDING: Complete building application. A debris form must be completed for any rip off. Only D225 or D3462 shingles are acceptable.

SHEDS: If shed is 100-sq. ft. or more, complete a zoning, engineering and building application. Include 2 surveys indicating location, dimensions and setbacks. Submit 2 details on how the shed is constructed. If it is a pre fab shed, submit the brochure. If shed is less than 100-sq. ft follow the above instructions omitting the engineering and building application. Either case, submit anchoring method.

SIGNS: Commercial – require 2 signed site plans from the Planning board, submitting one original &1 copy of the original with 2 sets of drawings of sign detail mounting & construction. Also include electrical detail if applicable. Complete zoning, engineering, building and/or electrical application. Building mounted signs do not require the signed site plans.

SWIMMING POOLS: Complete zoning, engineering, building and electrical application. Submit 2 surveys showing location of pool, dimensions and setbacks. Submit 2 engineered sealed plans for an ingroung pool and a brochure for an above ground pool. Also include a brochure on the filter and pump system and a pool certification form, which needs to be signed by the homeowner and notarized. The STATE requires the ladder or stairs to the pool be fenced in, and must have a self-closing latched gate. If a chain link is preferred the links must be 1 ¼ ".

TANK INSTALLATION: New AG tank install requires 2 true size surveys indicating the location of tank with dimensions and set backs for zoning review. Replacing an AG tank does not require zoning. Although both require building and plumbing.

TOWNSHIP OF Brick Township
TYPES OF IMPROVEMENTS THAT REQUIRE BUILDING PERMITS AND THE REQUIREMENTS FOR OBTAINING A BUILDING PERMIT

ALL SURVEYS MUST BE TO SCALE – NO EXCEPTIONS

A/C BOILER, FURNACE: New or replacement requires a brochure and electrical. All new units require a licensed electrician if work is not being done by the homeowner. Replacement units may require a chimney certification when the vent/chimney is being cleaned; otherwise building needs to be completed. Furnace requires fire, if a boiler it requires plumbing, a/c requires plumbing and electric. If in a flood zone please provide your elevation certificate.

ADDITION: Submit 2 surveys showing the location with the dimensions of the addition and your setbacks from your property line. Submit 2 sets of drawings and a cross section showing all materials used from the footing to the roof. Submit a floor plan labeling rooms, size of windows and doors. If plans are drawn by homeowner each page of the detail must be signed. Ask for addition checklist for further information.

ALTERATION: For inside changes, submit 2 copies of the existing and proposed floor plans, include detail of construction to be done.

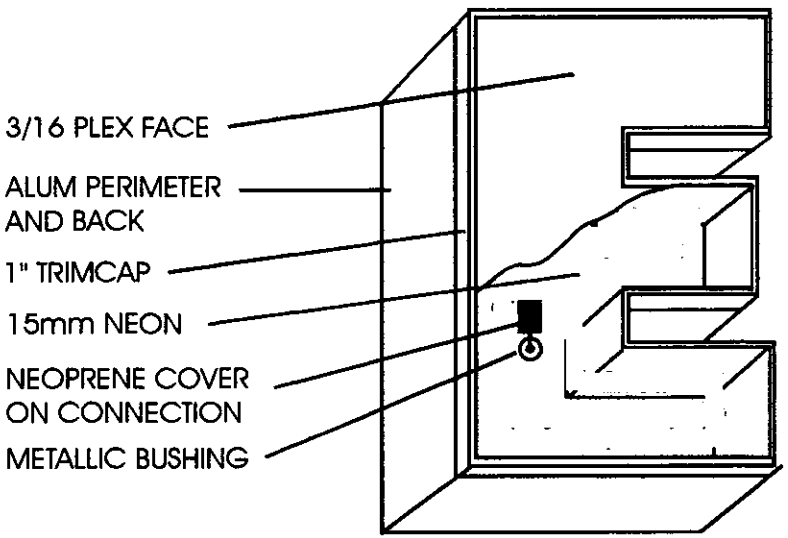
BULKHEAD & DOCKS: Copy of State and Army Corps permits. Complete engineering and building application. Submit 2 surveys showing bulkhead and or dock and 2 cross section details signed by contractor.

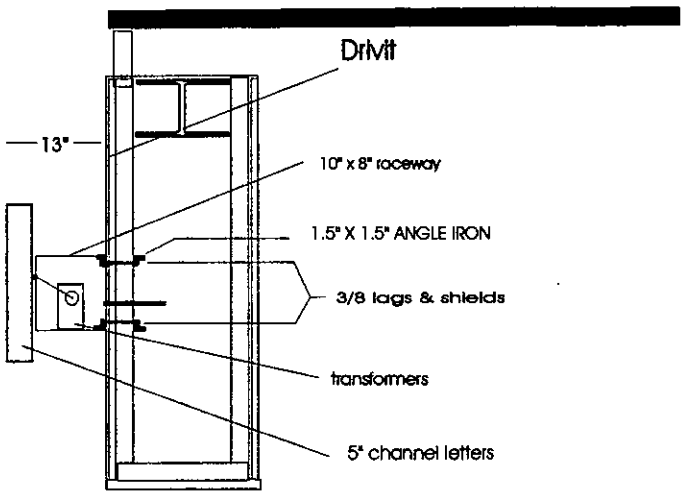
DECK: Submit 2 surveys showing the location dimensions and setbacks of deck. Complete a zoning and engineering application along with a building application. Submit 2 sets of plans showing how the deck will be constructed from the footing to the rail. A top view and a side view showing size of lumber being used. Refer to our deck-planning guide.

FENCES: Complete a zoning, engineering and building application along with 2 surveys of the property indicating with X's, the location of the fence, height and type proposed.

FIREPLACES & WOOD STOVES: If a masonry chimney is being built on the outside of the house, complete a zoning and engineering application include 2 surveys showing location, dimensions and setbacks. Also include 2 copies of a cross section of foundation, hearth and throat. Wood burning stove requires a brochure, complete a building and fire application and must be installed according to manufacturers specs. Gas fireplaces require brochure, gas sketch and complete plumbing, building and fire applications.

cell MASTER


3/16 PLEX FACE
ALUM PERIMETER AND BACK
1" TRIMCAP
15mm NEON
NEOPRENE COVER ON CONNECTION
METALLIC BUSHING


Drivit
13"
10" x 8" raceway
1.5" X 1.5" ANGLE IRON
3/8 lags & shields
transformers
5" channel letters

Township of Brick

Counter Form

(PLEASE PRINT)

Site Location: Cell MASTER (Mrrica Plaza) 550 Brick Blvd unit 5
Block: 446.05 Lot: 3
Owner's Name: Theodore Smith & Sons
Owner's Mailing Address: 550 Brick Blvd

Phone: (732) 477 - 2000

BUILDING

Contractor: Neo Sign Company
Address: 60 STEINER Ave
Neptune City, NJ
Phone#: 732. 774 0377
Lis #
Federal Emp # or SSN 22- 3407734

Technical Data

Description of Work:

Type of Work

___New Building	___Siding
___Addition	___Fence
___Alteration	___Pool
___Roofing	___Demolition
___Asbestos Abatement	✓Sign 85 sq ft

2 SIGNS

Building Characteristics

Use Group Present: Retail Proposed:
No of Stories: 1
Height of Structure: 24'
Area of the largest floor: N/A
Area of New Structure: N/A
Volume of New Structure: N/A
Total Land Disturbed: 0

Cost of Alteration: $ 0

Cost of New Building: $ $600

Total Cost of New Building Work: $ $600

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

Signature: William A. McCorrick (agent for) Neo Sign
Please Print Name William A. McCorrick

ELECTRICAL

Contractor:
Address:
Phone#:
Lis #:
Federal Emp # or SSN

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	
Switches	
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	
Pool (Receptacles, Switches, Lights, Motor HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work:

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

Signature:
Please Print Name

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Fixtures Quantity

Water Closets (Toilet)_____
Urinals/Bidets_____
Bath Tub (w/or w/out shower head)_____
Lavatory (BR Sink)_____
Shower_____
Floor Drain_____
Sink_____
Dishwasher_____
Drinking Fountain_____
Washing Machine_____
Hose Bib_____
Gas Piping_____
Fuel Oil Piping_____
Water Heater_____
Steam Boiler_____
Hot Water Boiler_____
Sewer Pump_____
Interceptor/Separator_____
Backflow Preventer_____
Greasetrap_____
Air Conditioner (Condensate Drain)_____
Septic Tank Closure_____
Sewer Service Connection_____
Water Service Connection_____
Active Solar System_____
Auxiliary Meter_____
Sprinkler Heads_____
Sump Pump_____
Pool Heater_____
Other:

Estimated Cost of Plumbing Work_____

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

Signature:_____

Please Print Name:_____

CONTRACTOR'S SEAL

FIRE

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Description of Work:

Heating Type: ____Gas ____Oil ___Electric ____Solar
Heating System is ___New ___Existing
Location of Furnace/Boiler:_____
Water Supply Source_____
Method of Valve Supervision_____
Local Alarm Supervision_____
Central Supervision:_____
Proprietary Supervision:_____

Flammable Storage Tanks _____capacity_____fuel
Combustible Storage Tanks_____capacity_____fuel
LPG Storage Tanks_____capacity_____fuel

Item Quantity

Wet Sprinkler Heads_____
Dry Sprinkler Heads_____
Total_____

Smoke Detectors_____
Heat Detectors_____
Total_____

Stand Pipes_____
Kitchen Hood Exhaust System_____

Pre-Engineered Systems:
CO2 Suppression_____
Halon Suppression_____
Foam Suppression_____
Dry Chemical_____
Wet Chemical_____

Gas/ Oil Fired Appliances:
Gas Stove_____
Gas Dryer_____
Furnace (Gas or Oil)_____
Gas Fireplace_____
Gas Logs_____
Total Appliances_____

Wood Burning Stove_____
Wood Fireplace_____
Other:

Estimated Cost of Fire Work_____

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

Signature:_____

Print Name:_____