"FANTASTIC SAMS"

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Page

DEC 5 RECD

TOWNSHIP OF BRICK

OLD TOWN HALL

CONSTRUCTION PERMIT APPLICATION

BUILDING

I. IDENTIFICATION

1. Proposed Work at: Cedar Bridge Ave 920-0920
2. Owner Name: BICUSPID, INC FANTASTIC SAMS Tel. (201) 308-9692
   Address 27 STEEPLECHASE DRIVE MARLBORO, N.J. 07746
3. Principal Contractor: D'AGOSTINO CONSTRUCTION CORP Tel. (609) 695-5314
   Address 1001 BRUNSWICK AVE. LAWRENCEVILLE, N.J. 08648
   Lic. No. or Builder Reg. No. _____ Federal Emp. No. 22-2246776
4. Architect or Engineer: THOMAS GALLAGHER Tel. (609) 883-6285
   Address 6 SHERBROOKE RD. TRENTON, N.J.
5. Responsible Person in Charge of Work DOMINIC VULANTE Tel. (609) 695-5314

II. PROPOSED WORK

A. TYPE OF WORK

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

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☒	Building/ Structural	$ 5,000.00
2. ☒	Plumbing	2000.00
3. ☒	Electrical	2000.00
4. ☐	Fire Protection	
5. ☐	Other _____	
6. ☐	Other _____	
	TOTAL COST	$ 9000.00

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

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

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

469

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

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

If new construction, enter no. of dwelling units _____

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

B. NON-RESIDENTIAL

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

State Specific Use: HAIR-CARE STORE (FANTASTIC SAMS)

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

B. HEATING FUEL

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

C. TYPE OF SEWAGE DISPOSAL

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

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

14. No. of Stories _____
15. Height of Structure _____ Ft.
16. Area–Largest Floor _____ Sq. Ft.
17. Bldg. Area–All Fls. _____ Sq. Ft.
18. Volume of Structure _____ Cu. Ft.
19. Total Land Area Disturbed _____ Sq. Ft.

12

LDS BR 10510949

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

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

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

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

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

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

C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 46:3B-1 et. seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

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

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

SIGNATURE _____ DATE _____

II. AGENT SECTION

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

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

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

☒ **Check if contractor.**

AGENT NAME Dominic Volante TEL. 609) 695-5314

ADDRESS D'Agostino Construction Co

1001 Brunswick Ave. Lawrenceville, NJ 08648

SIGNATURE Dominic Volante Pres.

BLOCK NO. 469 LOT NO. 12 SUBDIVISION _____ PERMIT NO. 406

PRIOR APPROVALS CHECKLIST

APPROVALS	LOCAL				COUNTY				REGIONAL				STATE				COMMENTS
	Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		
	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	
☐ Planning Board																	
☐ Zoning Board																	
☐ Sewer Authority																	
☐ Water Authority																	
☐ Fire Department																	
☐ Police Department																	
☐ Health Department																	
☐ Soil Conservation																	
☐ N.J. Dept. of Community Affairs																	
☐ N.J. Dept. of Transportation																	
☐ N.J. Dept. of Environmental Protection																	
☐ Other: _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

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

PERMIT CONTROL

I. PLAN REVIEW STATUS

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

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

Plan Review Required	Type of Work	Plans Received By Date	Plans Received By Receiver	Approval Date	Reviewer	Comments
☐	BUILDING			3-11-88	Ida	
	Footings/Foundations					
	Framing					
	Architectural 2			3/11/88	JC	
	Other _____			3/14/88	Dan	
☐	PLUMBING					
☐	ELECTRICAL					
☒	FIRE PROTECTION			3/14/88	JC	as noted on plans
☐	OTHER _____					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
✓	ALL CONSTRUCTION		4-7-88 JC	
✓	BUILDING			
	Footings/Foundations			
	Framing			
	Architectural			
	Other _____			
	PLUMBING			
✓	ELECTRICAL			
✓	FIRE PROTECTION		4-7-88 JC	
	OTHER _____			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☑ Temporary Certificate of Occupancy Date Expired Comp. of bldg.	4-11-88
☐ Temporary Certificate of Occupancy Date Expired _____	
☐ Certificate of Occupancy No. _____	
☐ Certificate of Continued Occupancy No. _____	
☐ Certificate of Approval No. _____	
☐ None	

IV. ON-GOING INSPECTIONS

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

V. FEE SUMMARY

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

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	$ 67.50
PLUMBING	75.-
ELECTRICAL	•
☒ FIRE PROTECTION	30.
OTHER _____	•
SUBTOTAL	$ 172.50
– LESS: 20% of subtotal (when plan review performed by state agency).	(34.00)
D.C.A. TRAINING FEE .0006 x _____ =	•
CERTIFICATE OF OCCUPANCY	20.00
OTHER _____	•
OTHER _____	•
TOTAL COLLECTED WHEN PERMIT ISSUED	$ 147.50

DATE 3/15/88 Collected By Pala

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			•
OTHER			•
OTHER			•
– LESS: Refunds			(•)
TOTAL COLLECTED AFTER PERMIT ISSUED			$ •

C. TOTAL CONSTRUCTION FEES COLLECTED

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

TOWNSHIP OF BRICK
FANTASTIC SAMS

NEW JERSEY UNIFORM CONSTRUCTION CODE

CERTIFICATE

CERT. NO. 406
DATE ISSUED 4-11-88
Block 469 Lot 12
Subdivision

IDENTIFICATION

Owner Bicuspid Inc. (Fantastic Sams) Agent
Address 27 Steeplechase Dr. Marlboro, N.J. Address
Tel. ( ) Tel. ( )
Work Site Address Cedar Bridge Avenue Lic. No.
Federal Emp. No.

PAYMENTS

Fees Remitted $
☐ Check No.
☐ Cash
☐ Other
Collected By:
Date:

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☐ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL

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

B. ☐ CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

C. ☒ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than April 15, 1988, 1988 or the owner will be subject to a fine or order to vacate:

Pending final engineering OK and completion of entire bldg.

D. DESCRIPTION OF WORK:

extend to 3/92 AF wp

Business

USE GROUP B FIRE GRADING 2 Hours

MAXIMUM LIVE LOAD MAXIMUM OCCUPANCY LOAD

SPECIFIC USE Hairstylist

FINAL COST OF CONSTRUCTION: $ 9000.00

Arthur J. Crenzo
CONSTRUCTION OFFICIAL

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

TOWNSHIP OF BRICK

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 406
DATE ISSUED 3-15-88
REVISION DATE

Block 469 Lot 12
Subdivision

FANTASTIC SAMS

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner BICUSPID INC
Address 27 STEEPLECHASE DRIVE
MARLBORO, N.J.
Tel. (201) 308-9692

Work Site Address

Contractor D'AGOSTINO CONSTRUCTION
Address 1001 BRUNSWICK AVE.
LAWRENCEVILLE, NJ. 08648
Tel. (609) 695-5314
Lic. No.
Federal Emp. No. 22-246776 F

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

Dominic Volante
AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc. FINISH INTERIOR

NEW INTERIOR PARTITIONS
FLOOR TILE, PAINTING, PLUMBING
& ELEC TO MAKE HAIR CARE STORE

NO STRUCTURAL

☐ See Plans

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

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

C. BUILDING CHARACTERISTICS

USE GROUP: M Present M Proposed

No. of Stories 1

Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft.

Volume of Structure _____ Cu. Ft.

Area—Largest Floor _____ Sq. Ft.

Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: $ 5,000.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

TOWNSHIP OF BRICK

Building B

FANTASTIC SAMS

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 406
DATE ISSUED 3-15-88
REVISION DATE

Block 469 Lot 12
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner BICUSPID INC
Address 27 STEEPLECHASE DRIVE
MARLBORO, N.J.
Tel. (201) 308-9692

Work Site Address

Contractor D'AGOSTINO CONSTRUCTION
Address 1001 BRUNSWICK AVE.
LAWRENCEVILLE, NJ. 08648
Tel. (609) 695-5314
Lic. No.
Federal Emp. No. 22-246776

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

Domenic Volante

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc. FINISH INTERIOR

NEW INTERIOR PARTITIONS
FLOOR TILE, PAINTING, PLUMBING
& ELEC TO MAKE HAIR CARE STORE

NO STRUCTURAL

☐ See Plans

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration/Renovation
  - ☐ Roofing
  - ☐ Siding
  - ☐ Other
- ☐ Demolition
- ☐ Miscellaneous
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☐ Elevator
  - ☐ Other

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

C. BUILDING CHARACTERISTICS

USE GROUP: M Present M Proposed

No. of Stories 1 Total Building Area–All Floors ____ Sq. Ft.

Height of Structure ____ Ft. Volume of Structure ____ Cu. Ft.

Area–Largest Floor ____ Sq. Ft. Total Land Area Disturbed ____ Sq. Ft.

Estimated Cost of Building Work: $ 5,000.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION — BUILDING

DATE	JOB CONDITION/COMMENTS
	Final
	OK 10-18-88

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☒ All	3-11-88	KM
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: _____

Inspected By: _____

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☐ Frame				
☐ Architectural				
☐ Insulation				
☐ Finishes				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

FANTASTIC SAM. Town Shapes

FIRE SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 406
DATE ISSUED 3-15-88
REVISION DATE

Block 469 Lot 12
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner Biscus PUD INC.
Address 27 Steeplechase DR.
Marlboro N.J.
Tel. ( )
Work Site Address

Contractor D'Agostino Const.
Address 1001 Brunswick Ave
Lawrenceville N.J.
Tel. ( )
Lic. No.
Federal Emp. No. 22-2467776

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

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

FEE $

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other
Manual Pull: ☐ Yes ☐ No
Locations:

Estimated Cost of Work: $ $

B3. ALARM

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

FEE $

B4. STAND PIPES

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

B5. OTHER

Exit Signs	$ 30
Fire Extinguishers	$
Emergency Lites	$
Subtotal	$
Minimum Fire Protection Fee (If Applicable)	$
Total Fire Protection Fee (*Greater of Minimum or Subtotal*)	$ 30

C. FIRE PROTECTION CHARACTERISTICS

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

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

Fantastic Sam.
Town Shapes

FIRE SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 11016
DATE ISSUED 3-15-85
REVISION DATE
Block 467 Lot 12
Subdivision

A. IDENTIFICATION

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

Owner Biscuspup Inc.
Address 27 Stephanie Dr.
Marlboro N.J.
Tel. ( )

Work Site Address

Contractor D'Agostino Const.
Address 1001 Brunswick Ave
Lawrenceville N.J.
Tel. ( )
Lic. No.
Federal Emp. No. 22-246776

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

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

FEE $

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO_2 ☐ Halon ☐ Foam ☐ Other
Manual Pull: ☐ Yes ☐ No
Locations:

Estimated Cost of Work: $

$

B3. ALARM

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

FEE $

B4. STAND PIPES

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

$

B5. OTHER

Exit Signs
Fire Extinguishers
Emergency Lites

$ 215
$
$

Subtotal $
Minimum Fire Protection Fee (If Applicable) $ 75
Total Fire Protection Fee (*Greater of Minimum or Subtotal*) $ 367

C. FIRE PROTECTION CHARACTERISTICS

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

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

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

PLAN REVIEW AND INSPECTION — FIRE

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☑ Plan Review Approved
Date: 3/11/88
Approved By: JL

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 4/7/88
Inspected By: JL

INSPECTIONS

Type	Failure Date			Approval Date
☐ Fire Suppression Test				
☐ Fire Alarm Test				
☐ Smoke Test				
☐ TCO				
☒ Other Final				4/7/88
☐ Other				
☐ Other				
☐ Other				

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

TOWNSHIP OF BRICK

FANTASTIC SAMS

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 406
DATE ISSUED 3-15-88
REVISION DATE

Block 469 Lot 12
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

When changing contractors, notify this office

Owner BICUSPID FANTASTIC SAMS
Address 27 STEEPLE CHASE DRIVE
MARLBORO, N.J. 07746
Tel. (201) 308-9692
Work Site Address

Contractor JIM MULE'
Address 35 LOPATCONG DR
E. WINDSOR N.J.
Tel. (609) 882 2990
Lic.No./Bus. Permit 1922
Federal Emp. No. 144 22-6100

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

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

Jim Mule
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
~~2~~	Water Closet/Bidet/Urinal	$		Garbage Disposal	$
	Bathtub		1	Air Conditioner Unit	15
5 ~~2~~	Lavatory/Sink	25		Indirect Connection	
	Shower/Floor Drain			Sewer Ejector	
1	Washing Machine	5		Grease Trap	
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
1	Water Heater	5		Reduced Pressure Backflow Device	
1	Domestic Boiler/ Furnace		1	Vent Stack	10
	Steam Boiler			Solar System	
	Water Util. Connection		1	Other Gas	15
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 35		COLUMN 2	$ 40

Fee	
COLUMN 1	$ 35
COLUMN 2	$ 40
SUBTOTAL	$ 75
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 75

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage — Material PVC Size 3
Building Sewer — Material PVC Size 4"
Water Service — Material Co-P Size 1"
Venting — Material PVC Size 2"
Estimated Cost of Plumbing Work: $ 2000

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

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

TOWNSHIP OF BRICK

FANTASTIC SAMS

PLUMBING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 406
DATE ISSUED 3-15-88
REVISION DATE
Block 469 Lot 12
Subdivision

A. IDENTIFICATION

APPLICANT — *Complete unshaded areas only*

Owner BICUSPID FANTASTIC SAMS
Address 27 STEEPLE CHASE DRIVE
MARLBORO, N.J. 07746
Tel. 201 308-9692
Work Site Address

When changing contractors, notify this office

Contractor JIM MULE
Address 35 LOFATCONG DR
EWING N.J.
Tel. ( ) 882-1170
Lic.No./Bus. Permit 1422
Federal Emp. No. 54 22-6100

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

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

Jim Mule
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
~~3~~	Water Closet/Bidet/Urinal	$	1	Garbage Disposal	$ 15
	Bathtub	25	1	Air Conditioner Unit	
5	Lavatory/Sink			Indirect Connection	
1	Shower/Floor Drain			Sewer Ejector	
	Washing Machine	5		Grease Trap	
	Dishwasher			Interceptor	
1	Commercial Dishwasher	~~5~~		Backflow Device	
1	Water Heater			Reduced Pressure Backflow Device	
1	Domestic Boiler/ Furnace		1	Vent Stack	10
	Steam Boiler			Solar System	
	Water Util. Connection		1	Other Spa	15
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 35		COLUMN 2	$ 40

Fee	
COLUMN 1	$ 35
COLUMN 2	$ 40
SUBTOTAL	$ 75
Minimum Plumbing Fee (If applicable)	$
Total Plumbing Fee *(Greater of Minimum or Subtotal)*	$ 75

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage —	Material PVC	Size	3
Building Sewer—	Material PVC	Size	4
Water Service—	Material COP	Size	1
Venting —	Material PVC	Size	2

Estimated Cost of Plumbing Work: $ 3,900

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

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

PLAN REVIEW AND INSPECTION – PLUMBING

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved
Date: 3/11/88
Approved By: D Metcalf

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 4/8/88
Inspected By: D Metcalf

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Slab				
☒ Rough				3/21/88 DM
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other _____				

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

CUT-IN-CARD

MUNICIPALITY B.T.

LOCATION Old Town Hall. UTILITY CO PE

Grn. Hooper & 528 BLK C/69 LOT 12

OWNER Municipal Inc. OCCUPANT Fantastic Sams

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

☑ FINAL ☐ TEMPORARY This approval void after _____ days

SERVICE _____ RANGE _____ WATER HEATER ✓

AIR COND _____ ELECT HEAT _____ MISC _____

COMMENTS Additional lights & Recps.

DATE 4-8-88 PERMIT # 17379 INSPECTOR R. Cochus

Elec. 104 Insp. Lic# 24

New Jersey Natural Resources Conservation Program

OCEAN COUNTY SOIL CONSERVATION DISTRICT

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

RECEIVED
AUG 9 1989
DIV. OF INSPECTION

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK TOWNSHIP

PROJECT: Cedar Bridge Plaza - ALL UNITS SCD NO.: 2276

BLOCK NO.(s) 469 LOT NO.(s) 12

670 9, 19, 20, 21, 22, & 26

Complete Compliance ☒ Temporary Compliance ☐

BLOCK NO.	LOT NO.	CONDITIONS
		The applicant shall remain responsible for proper stabilization of all areas until final bond release by the municipality.
		Applicant shall remain responsible to complete construction of additional parking spaces as directed by the municipality. all areas disturbed during the construction of additional parking spaces will be permanently stabilized as per the certified plan.

Total Fees Due: $ X

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

AGENT RESPONSIBLE FOR PROJECT: _____

AUTHORIZED DISTRICT SIGNATURE: Kevin Quinn

Date: 8/8/89

Distribution: White-Township Canary-Applicant Pink-District

A4687