6-3-88 O.K.

TOWNSHIP OF BRICK "Tuxedo Junction"

COMMERCIAL CONSTRUCTION PERMIT APPLICATION

UCC NEW JERSEY UNIFORM CONSTRUCTION CODE

Unit 5B

I. IDENTIFICATION

1. Proposed Work at: Towne Hall Shoppes 99 Cedar Bridge & Brick Blvd, Brick, N.J.
2. Owner Name: Michael Haber (Tuxedo Junction) Tel. (201) 477-0222
   Address Tuxedo Junction Hooper Ave & Brick Blvd (Brick Mall) Brick, N.J.
3. Principal Contractor: Pace Associates - Development East. Tel. (201) 920-3645
   Address 20000 Horizon Way Mt. Laurel, N.J. 08054
   Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
4. Architect or Engineer: Joe Rikel Tel. (201) 370-7057
   Address RD#5 Box 134, White Rd. Jackson, N.J. 08527
5. Responsible Person in Charge of Work Rich Lemm, Jr. Tel. (201) 920-3645

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: C/O

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☑	Building/ Structural Interior	$ _____
2. ☐	Plumbing	_____
3. ☑	Electrical	_____
4. ☐	Fire Protection	_____
5. ☑	Other Tenant Fit Up	_____
6. ☑	Other Platform, Racks etc	_____
	TOTAL COST	$ 7,000.00

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

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: Tuxedo Sales & Rentals

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.

LDS BR 10309619

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 Michael Huber 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 _____ **TEL.(** **)** _____

ADDRESS _____

_____

SIGNATURE _____

BLOCK NO. 469 LOT NO. 12 SUBDIVISION _____ PERMIT NO. 1465

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	_____		_____

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			6-2-88	KM	
	Footings/Foundations					
	Framing					
	Architectural 2			6/1/88	JK	
	Other _____					
☐	PLUMBING					
☐	ELECTRICAL			6/3/88	JK	
☐	FIRE PROTECTION					
☐	OTHER _____					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
_____	ALL CONSTRUCTION			
✓	BUILDING		9-26-88 WS	
_____	Footings/Foundations			
_____	Framing			
_____	Architectural			
_____	Other _____			
_____	PLUMBING			
✓	ELECTRICAL		10-24-88 JK	Elec. Bu
✓	FIRE PROTECTION		9-26-88 JK	
_____	OTHER _____			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED: — Date Issued

- ☑ Temporary Certificate of Occupancy — 10/28/88
  Date Expired Comp. of Bldg
- ☐ 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	$ 52.50
PLUMBING	•
ELECTRICAL	130.—
FIRE PROTECTION	•
OTHER _____	•
SUBTOTAL	$ 82.50
— LESS: 20% of subtotal (when plan review performed by state agency).	(5.—)
D.C.A. TRAINING FEE .0006 x _____ =	•
CERTIFICATE OF OCCUPANCY	20.—
OTHER _____	•
OTHER _____	•
TOTAL COLLECTED WHEN PERMIT ISSUED	$ 197.50

DATE 6/3/88 Collected By Palo

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

"Tuxedo Junction"

NEW JERSEY UNIFORM CONSTRUCTION CODE

CERTIFICATE

CERT. NO. 1465

DATE ISSUED 10-28=88

Block 469 Lot 12

Subdivision

IDENTIFICATION

Owner Michael Haber

Address Hooper Ave. & Brick Blvd.
Brick, NJ

Tel. ( )

Work Site Address
990 Cedarbridge Avenue

Agent Pace Associates

Address

Tel. ( )

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 _____, 19_____ or the owner will be subject to a fine or order to vacate:

Until completion of building.

Extend to 3/92 AJC wo

D. DESCRIPTION OF WORK:

retail store

USE GROUP B

FIRE GRADING 2 hours

MAXIMUM LIVE LOAD

MAXIMUM OCCUPANCY LOAD

SPECIFIC USE Business

FINAL COST OF CONSTRUCTION: $ 7,000.

Arthur J. Cerzo

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. 1465
DATE ISSUED 6-3-88
REVISION DATE

Block 469 Lot 12
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner Michael Haber
Address Toledo Junction (Hooper Ave.) Brick Mail Brick, N.J.
Tel. (201) 477-0220
Work Site Address Towne Hall Shoppes Cedar Bridge Ave. Brick, N.J.

Contractor Pace Associates - Dev. East
Address 20000 Horizon Way Mt. Laurel, N.J.
Tel. (201) 920-3645
Lic. No.
Federal Emp. No.

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

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

☑ 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: _____ Present _____ Proposed

No. of Stories 1
Total Building Area–All Floors 1840 Sq. Ft.
Height of Structure 14FT Ft.
Volume of Structure 20,000 Cu. Ft.
Area–Largest Floor 23 x 80 Sq. Ft.
Total Land Area Disturbed – Sq. Ft.

Estimated Cost of Building Work: $

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

U.C.C. Form F-110 (8/83) Green = Office Copy White = Applicant Copy Beige = Inspector Copy

TOWNSHIP OF BRICK

Building B

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 1465
DATE ISSUED 6-3-88
REVISION DATE

Block 469 Lot 12
Subdivision

A. IDENTIFICATION

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

Owner Michael Haber
Address Toms River Junction (Hooper Ave.) Brick Mail Brick, N.J.
Tel. (201) 477-0228
Work Site Address Towne Hall Shoppes Cedar Bridge Ave. Brick, N.J.

Contractor Yale Associates - Div. East
Address 10000 Horizon Way Mt. Laurel, N.J.
Tel. (201) 920-3645
Lic. No.
Federal Emp. No.

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

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

☑ 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: _____ Present _____ Proposed

No. of Stories 1
Height of Structure 14Ft Ft.
Area–Largest Floor 22x80 Sq. Ft.
Total Building Area–All Floors 1840 Sq. Ft.
Volume of Structure 20,000. Cu. Ft.
Total Land Area Disturbed – Sq. Ft.

Estimated Cost of Building Work: $

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION – BUILDING

DATE

JOB CONDITION/COMMENTS

8-29-88 Must check grab bars in bath.
Crack's in floor showing but not shelving Ltb

05

9-26-88

Fire Grading:

Maximum Live Load:

Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☒ All	6-1-88	VM
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA

Date: 9-26-88

Inspected By:

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☒ Frame				7/13/88 JC
☐ Architectural				
☐ Insulation				
☒ Finishes				9-26-88
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other				

U.C.C. Form F-110 (8/83)

FIRE SUBCODE TECHNICAL SECTION

UNIFORM CONSTRUCTION CODE — NEW JERSEY

PERMIT NO. 1465
DATE ISSUED 6-3-88
REVISION DATE

Block 469 Lot 17
Subdivision

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner Michael Haber
Address Tuxedo Junction (Hooper Ave)
Brick Mall, Brick, NJ.
Tel. (201) 477-0222
Work Site Address Towne Hall Shoppes
(Goodan Bridge Ave Brick, NJ.

Contractor Pace Associates - Dev. East
Address 20000 Horizon Way
Mt. Laurel, NJ.
Tel. (201) 920-3645
Lic. No.
Federal Emp. No.

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 _____ FEE
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: $ _____ $ _____

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 FEE
Supervision Type: ☐ Local ☐ Central ☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $ _____ $ 30

B4. STAND PIPES

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

B5. OTHER

Emergency Lighting $ _____
Fire Extinguishers $ _____
& Exit Signs $ _____

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

Tuxedo Junction

FIRE SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT NO. 1116-5
DATE ISSUED 6 - 2 - 89
REVISION DATE ______
Block 419 Lot 10
Subdivision ______

A. IDENTIFICATION

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

Owner Michael Halcer
Address Tuxedo Junction (Reeves Ave)
Bound Brook, N.J.
Tel. (201) 477-0999
Work Site Address Tuxedo Junction (Reeves Ave) Bound Brook, N.J.

Contractor Pace Associates - Dev. East
Address 20000 Horizon Way
Mt. Laurel, N.J.
Tel. (201) 730-3645
Lic. No. ______
Federal Emp. No. ______

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

FEE

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: $ ______ $ ______

B2. SPECIAL SUPPRESSION SYSTEMS

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

Estimated Cost of Work: $ ______ $ ______

B3. ALARM

FEE

TYPE: ☐ Manual ☐ Automatic
Supervision Type: ☐ Local ☐ Central
☐ Proprietary ☐ Remote Location
Estimated Cost of Work: $ ______ $ 30

B4. STAND PIPES

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

B5. OTHER

[illegible] $
[illegible] $
[illegible] $

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

PLAN REVIEW AND INSPECTION – FIRE

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☑ Plan Review Approved
Date: 6/3/88
Approved By: JE

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 9/26/88
Inspected By: JE

INSPECTIONS

Type	Failure Date			Approval Date
☐ Fire Suppression Test				
☐ Fire Alarm Test				
☐ Smoke Test				
☐ TCO				
☒ Other Final				9/26/88
☐ Other				
☐ Other				
☐ Other				

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

5B

UE CUT-IN-CARD

MUNICIPALITY B T

LOCATION Cedar Bridge & Brick Blvd UTILITY CO PP

BLK 670 LOT 9

OWNER Pace Assoc. OCCUPANT

"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 100 A RANGE ____ WATER HEATER ____

AIR COND 3 ELECT HEAT ____ MISC ____

COMMENTS ____

DATE 88/024 PERMIT # 2235 INSPECTOR [signature]

Elec 104 880628 Insp. Lic # 2483

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724

CERTIFICATE OF COMPLIANCE

Date 10/25/88

NAME Cedar Bridge Associates /TUXEDO JUNCTION/Michael Haber

ADDRESS 510 So. Burnt Mill Rd. Vorhees, N.J.

PROPERTY LOCATION 990 Cedar Bridge Ave. B5

Account No. I398549 Block 670 Lot 19

I hereby certify that the above applicant has complied with all rules and Regulations of this Authority and has paid all required fees and charges.

For the Authority Joan Mootz

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: Kenneth Jerome

Date: 8/8/89

Distribution: White-Township Canary-Applicant Pink-District

A4687