BLOCK 5470.1 LOT 15 QUALIFICATION CODE _____ ADDRESS (SITE) 391 Brick Blvd (Drum Point Plaza) PERMIT NO. 13-0827

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII E-13-000758

I. IDENTIFICATION

1. Proposed Work Site at: 391 Brick Blvd (Drum Point Plaza)
2. Name of Owner in Fee: John DeGeorge
   Tel. 732-477-6363 e-mail _____
   Address 249 Brick Blvd (street) Brick (municipality) NJ 08723 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: GIRTAIN SIGN CO. Tel. 732 349 8499
   Address 1765 RT.9 e-mail _____
   TOMS RIVER N.J. 08755
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 223057 86 FAX: _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. _____ FAX: _____
6. Responsible Person in Charge once Work has Begun A Girtain
   Tel. 732 349 8499 FAX: 732 505 3673

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 96-		
2. Electrical	50		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	6		
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 152-		

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 Copy Fax + sq. ft.	
5. Volume of New Structure cu. ft.	
6. Max. Live Load	
7. Max. Occupancy Load	
8. If Industrialized Building: State Approved ____ HUD ____	
9. Total Land Area Disturbed sq. ft.	
10. Flood Hazard Zone	
11. Base Flood Elevation ft.	
12. Wetlands yes ____ no ____	

IIa. PROPOSED WORK

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

IIb. SUBCODES

(Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☒ Building	3200	CR	2-5-13		2/11/13	MV			
☒ Electrical	350				2-19-13	JS			
☐ Plumbing									
☐ Fire Protection									
☐ Elevator		Emp	Exempt		2/19/13	EC			
TOTAL COST	3,500								

VII. DESCRIPTION OF BUILDING USE

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

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

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

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

TOWNSHIP OF BRICK

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

Department of Community Development & Land Use

732-262-1027

Fax: 732-262-2941
www.twp.brick.nj.us

May 21, 2014

The following permits for Drum Point plaza are in need of the following inspections:

12-0651
375 Brick Blvd (Soccer Post)
Sign Installation needs: Final Elect

13-0827
391 Brick Blvd (Copy Fax)
Sign Installation needs: Building &Elect Finals

12-2016
335 Brick Blvd (7-11)
Sign Installation needs: Building Final

13-5291
335-399 Brick Blvd (Nature's Nutrition)
Sign Installation needs: Building & Elect

13-1232
387 Brick Blvd (Chiropractor)
Sign Installation needs: Building & Elect

13-4118
351 Brick Blvd (Laundry Matt)
Plumbing Alterations (new washing machines w/platform) needs: Building & Plumbing

14-0179
335 Brick Blvd (7-11)
Nonstructural repairs needs: Building

12-1955
335 Brick Blvd (7-11)
Sign Installation needs: Building & Electric

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(f)1.ix:

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

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

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

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

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

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

Signature _____ Date _____

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

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

X Check if contractor.

Agent Name _____ GIRTAIN SIGN CO.

Address _____ 1765 RT.9

TOMS RIVER N.J. 08755

Telephone 732.349.8499

Signature _____

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

CONSTRUCTION PERMIT

Date Issued 2/20/13
Control # C-13-000758
Permit # 13-0827

IDENTIFICATION Block: 547.01 Lot: 15 Qualifier
Work Site Location: 335-399 BRICK BLVD. Brick Township, NJ
Owner in Fee: DRUM POINT PLAZA LLC
249 BRICK BLVD BRICK NJ 08723
Telephone: (732) 477-6363

Contractor: GIRTAIN SIGN CO.
Address: 1765 ROUTE 9 TOMS RIVER NJ 08753-
Telephone: (732) 349-8499
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 22-3305786

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SIGN INSTALLATION

PAYMENTS (Office Use Only)

Building	$96
Electrical	$50
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$6
CO Fee	
Other	$0
Total	$152
Check No.	1311
Cash	$0
Credit	$0
Collected By	

150
209.

Note: If constuction 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 $21000

David Heffernan Jr 2/19/13
Construction Official Date

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR **2 CANARY - OFFICE** 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

- [ ] Required inspections for all subcodes for one- and two-family dwellings are as follows:
  1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
  2. Foundations and all walls up to grade level prior to back filling.
  3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
  4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

  Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

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

- [x] A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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

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

RECEIVING CLERK CR
DATE REC'D 2-5-13

ZONING PERMIT APPLICATION

PERMIT # ZP-13-00090
DATE ISSUED 2/20/13

BLOCK: 547.01 LOT: 15 QUALIFIER: — SITE ADDRESS: 391 Brick Blvd Brick Point Plaza

IDENTIFICATION:

1. NAME OF OWNER IN FEE: John DeGeorge
   COMPLETE ADDRESS: 249 Brick Blvd Brick NJ 08723
   PHONE # 732-477-6363 EMAIL:
2. NAME OF APPLICANT: Girtain Sign Co
   APPLICANT ADDRESS: 1765 Rt 9 Toms River NJ 08755
   PHONE # 732-349-8499 EMAIL: —
3. RESPONSIBLE PERSON FOR WORK: A. Girtain
   PHONE# 732-349-8499 FAX# 732-505-3673
4. SIGNATURE OF APPLICANT: W.Johnsal@GirtainSignCo.

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 50.00
OTHER: $
TOTAL: $

REQUIRED BY APPLICANT

RESIDENTIAL: —
COMMERCIAL: ✓
EXISTING USE:
PROPOSED USE Copy Center

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

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

POOL: ABOVE GROUND ___ IN GROUND ___ FENCE: HEIGHT ___ TYPE ___

HEIGHT: ___ (*APPLICABLE)

OTHER Wall sign

DESCRIPTION: 16" x 135" Letter Sign " Copy Fax + "

ZONING REVIEW:
DATE REVIEWED: 2-7-13 DATE DENIED: — DATE APPROVED: 2-7-13 INTLS: MGR

(SEE BACK PAGE)

OFFICE USE ONLY

RECEIVED
FEB 7 2013
SGD

ZONING REVIEW:

DATE REVIEWED: 2-7-13 DATE DENIED: — DATE APPROVED: 2-7-13 INTLS: SGD

DATE:	COMMENTS:	INITIALS:

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued: 2/20/13
Application Number: ZA-13-00072
Application Date: 02/07/2013
Project Number:
Permit Number: ZP-13-00090
Fee: $50

Zoning Permit

Worksite Location: **335-399 BRICK BLVD.**
391 Brick Boulevard - Drum Point Plaza
Brick Township, NJ 08723

Block: **547.01**
Lot: **15**
Qualifier:
Zone: **B-2**

Owner: **DRUM POINT PLAZA LLC**
Address: **249 BRICK BLVD**
BRICK, NJ 08723

Applicant: **Andy Girtain; Girtain Sign Company**
Address: **1765 Route 9**
Toms River, NJ 08755

Application Approved Date: 02/07/2013

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

Use is: Commercial -"Copy Fax +" copy cewnter.
Nonconforming Use is:

Work Description:
Sign - Wall sign, channel letters on a raceway, 16" x 135", "Copy Fax +".

The total sign area may not exceed 15% ofd the total facade area.

The street address/unit number must be displayed on the front and the back doors.

Upon review it was determined that the Development Application:

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

Sean Kinnevy, Zoning Officer — 02/07/2013 Date

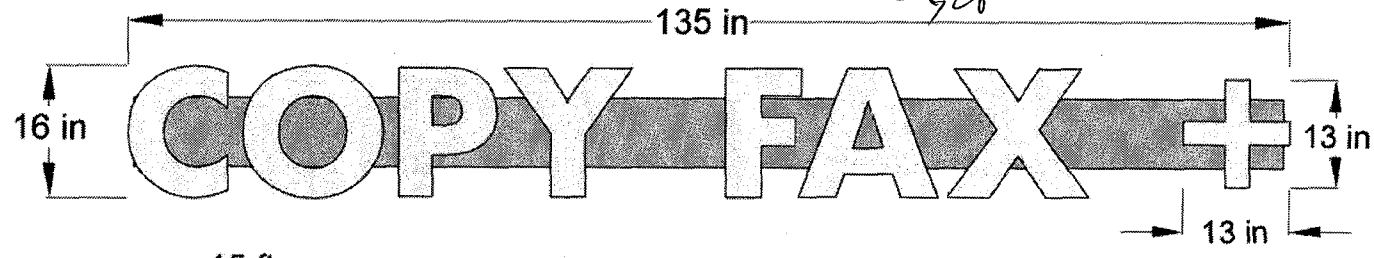
Michael P. Fowler, Township Planner — **Date**

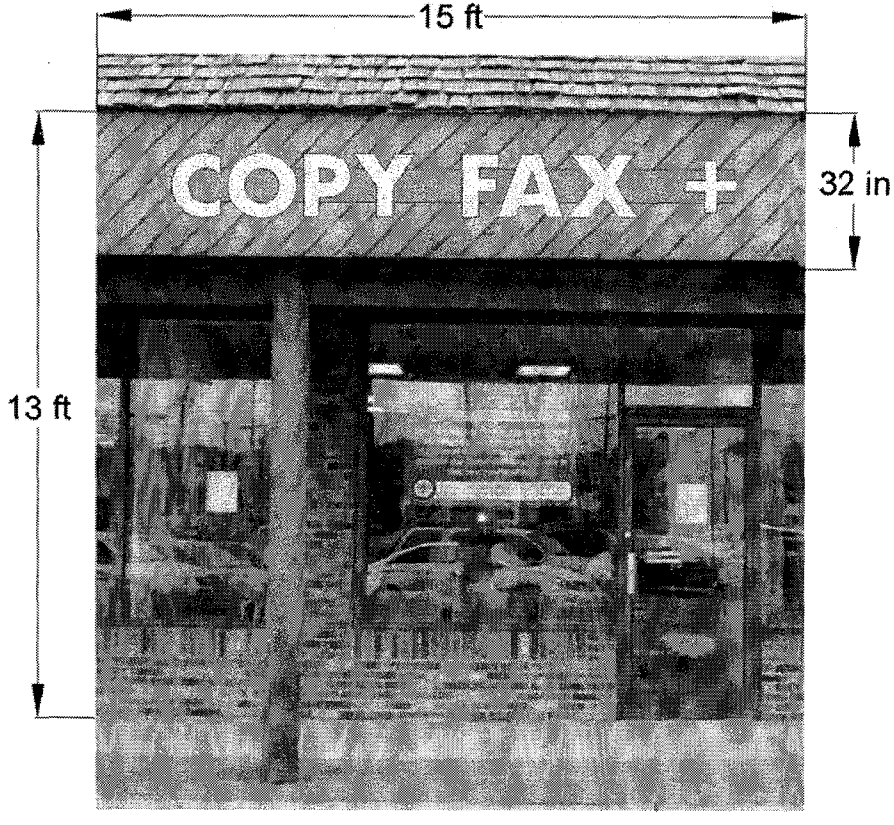
ATTN: ZONING
BUILDING IS 13' HIGH x 15' LONG OR 195 SQ. FT. 15% OF 195 IS 29.25 SQ. FT.
THE PROPOSED NEW SIGN IS ONLY 15 SQ. FT.

Installation Address:
391 Brick Blvd.
Brick, NJ 08723

FEB 07 2013

3/16" Yellow Plexi
1" Black Jewelite Trim
Black .040 Aluminum Return
Raceway Color TBD





FASTENER APPLICATION GUIDE

			WALL CONSTRUCTION			
HARDWARE	DIAM.	Row Spacing*	MASONRY (CMU-Block)	EFIS/DRYVIT OVER min. 1/2" PLYWOOD	EFIS/DRYVIT OVER GYPSUM/ DENSGLASS	METAL PANEL OVER METAL STUD
THRU-BOLT	3/8"	48" O.C.	YES	YES	ONLY WITH BACKER	YES
EXPANSION ANCHOR	3/8"	48" O.C.	YES**	NO	NO	NO
LAG BOLT	3/8"	40" O.C	NO	1" SOLID WOOD PENETRATION REQ'D	NO	NO
TOGGLE BOLT	3/8"	36" O.C.	IF THROUGH BLOCK FACE	YES	ONLY WITH MIN. 3/4" PLYWOOD BACKER	YES

*Each 'Row' shall have two fasteners, top and bottom of raceway
**Expansion anchors require a minimum 3-1/2" embedment

Designed per IBC -2009 NJ edition
Snow Loads:
Ground Snow Load.....Pg-25 psf
Snow Exposure Factor...Ce=1.0
Snow Load Importance..1s=1.1
Thermal Factor.....Ct=1.0

Wind Loads:
Basic Wind Speed.....115 mph
Wind Importance Factor..1=1.15
Wind Exposure.....C
ASCE Force Coef.....1.8 (or per table)
Gust Factor.....0.85

Exterior Components designed in accordance with applicable provisions of the ASCE 7-10

Murdoch Engineering
8308 Avalon Ct.
West Long Branch, NJ 07764
(973)-570-8215

Jere Murdoch, P.E.
Professional Engineer
NJ P.E. License #48980

GIRTAIN SIGN Company
1765 ROUTE 9 TOMS RIVER, NJ 08755
732-349-8499
Fax 732-505-3673 1-800-834-8499
Three Generations
A LIMITED LIABILITY COMPANY

NAME: COPY FAX +

DATE: R.K. 01-22-13 SA: copy fax plus

SIGNATURE

DATE

GIRTAIN SIGN Company

1765 ROUTE 9 TOMS RIVER, NJ 08755
732-349-8499
Fax 732-505-3673 1-800-834-8499
Three Generations
A LIMITED LIABILITY COMPANY

January 29th, 2013

Name of Business: COPY FAX PLUS

Address of Site: 391 Brick Blvd., Brick, NJ 08723

Lot 15 Block 547.01

Owner of Properties:
Name DRUM POINT PLAZA, LLC
Adress 249 BRICK BLVD., BRICK, NJ 08723
Phone # 732-477-6363

Dear Zoning:

This letter is to inform you that I give permission to Girtain Sign Company to install a new sign as drawn and approved for my tenant. Girtain Sign Company meets all of our insurance and business requirements.

Sincerely,

Signature

JOHN DEGEORGE
Print Name

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 2/20/13

Date Issued / Permit # 13 0827

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

Block 547.01 Lot 13 Qualification Code

Work Site Location 341 Brick Blvd Brick Twp NJ 08724

Building Owner John DeGeye

Address 249 Brick Blvd Brick NJ 08723

Tel. (732) 477-1303

Contractor Circle Sign Co

Address 476 Rt 9 Toms River NJ 08755

Tel. (732) 349-5449 FAX (732) 505-3693

Contractor License No. or Builder Registration No.

Federal Emp. No 22-3365786

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

Installing 15 sq ft set channel letters.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All 2/19/13		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required: 2/19/13

[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

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

TYPE OF WORK

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign 15 Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

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 Distributed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. $ 2,200
2. Rehabilitation $ _____
3. Total (1+2) $ 2,200

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 2/20/13

Date Issued / Permit # 13 0127

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

Block 547.01 Lot 15 Qualification Code

Work Site Location 341 Brick Blvd Brick NJ 08723

Owner in Fee John & Cecelyn

Address 244 Brick Blvd

Brick NJ 08723

Tel (732) 477-6363

Contractor On - Site Electrical Contractor

Address 475 Admiral Rd.

Forked River, NJ 08731

Tel (609) 693-6766 FAX (609) 693-6685

Contractor License No. 15603

Federal Emp. No. 20-3738168

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 300

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Light	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
1	1.8	KW Elec. Sign/Outline Light	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[✓] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS

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

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 547.01 LOT: 15 ADDRESS: 391 Brick Blvd.

IDENTIFICATION:

1. WORK SITE ADDRESS: 391 Brick Blvd

2. NAME OF OWNER IN FEE: John DeGeorge

ADDRESS: 249 Brick Blvd PHONE #: 732-477-6363

Brick FAX #: ( ) _____

3. PRINCIPAL CONTRACTOR: Certain Sign Co

ADDRESS: 1765 Rt 9 PHONE #: 732-349-8499

Toms River NJ FAX #: 732 505 3678

4. ARCHITECT OR ENGINEER: _____

ADDRESS: _____ PHONE: # ( ) _____

5. RESPONSIBLE PERSON FOR WORK: _____

ADDRESS: _____

PHONE #: ( ) _____ FAX #: ( ) _____ E-MAIL: _____

FEE SUMMARY:

APPLICATION FEE: $ _____

REVIEW FEE: $ _____

INSPECTION FEE: $ _____

OTHER _____: $ _____

BOND(S): $ _____

TOTAL: $ _____

PROJECT DESCRIPTION:

☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☐ OTHER _____

LENGTH: _____ WIDTH: _____ HEIGHT: _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

ENGINEERING REVIEW:

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

TOWNSHIP OF BRICK

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

Department of Community Development & Land Use

Juan Carlos Bellu
Director

732-262-1027

Fax: 732-262-2941
www.twp.brick.nj.us

Date: _____

ENGINEERING
PLOT PLAN EXEMPT FORM

Block: 547.01 Lot: 15

Property Address: 391 Brick Blvd

I, H Johnson of 1765 Rt 9 Toms River N.J.
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

H. Johnson
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the 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.

FOR OFFICE USE ONLY

Approved on: _____ Signed: _____

Rejected on: _____ Signed: _____

Comments:

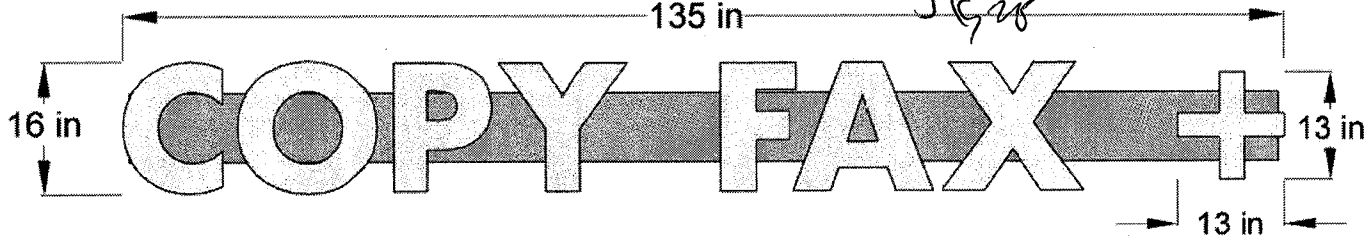
311 ACCESS BRICK TOWNSHIP

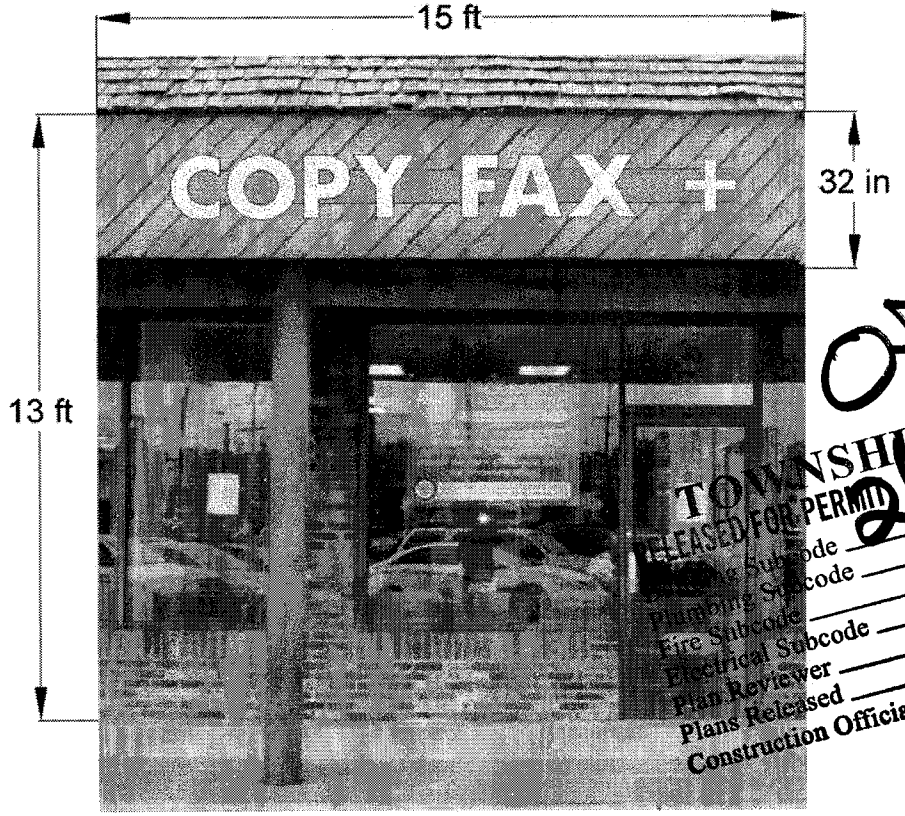
ATTN: ZONING
BUILDING IS 13' HIGH x 15' LONG OR 195 SQ. FT. 15% OF 195 IS 29.25 SQ. FT.
THE PROPOSED NEW SIGN IS ONLY 15 SQ. FT.

Installation Address:
391 Brick Blvd.
Brick, NJ 08723

3/16" Yellow Plexi
1" Black Jewelite Trim
Black .040 Aluminum Return
Raceway Color TBD

FEB 07 2013





FASTENER APPLICATION GUIDE

			WALL CONSTRUCTION			
HARDWARE	DIAM.	Row Spacing*	MASONRY (CMU-Block)	EFIS/DRYVIT OVER min. 1/2" PLYWOOD	EFIS/DRYVIT OVER GYPSUM/ DENSGLASS	METAL PANEL OVER METAL STUD
THRU-BOLT	3/8"	48" O.C.	YES	YES	ONLY WITH BACKER	YES
EXPANSION ANCHOR	3/8"	48" O.C.	YES**	NO	NO	NO
LAG BOLT	3/8"	48" O.C	NO	1" SOLID WOOD PENETRATION REQ'D	NO	NO
[illegible] BOLT	3/8"	36" O.C.	THROUGH BLOCK FACE	YES	ONLY WITH MIN. 3/4" PLYWOOD BACKER	YES

*Fasteners required: two fasteners, top and bottom of raceway
**Expansion anchors require a minimum 3-1/2" embedment

Office Set

TOWNSHIP OF BRICK
RELEASED FOR PERMIT
Building Subcode
Plumbing Subcode
Fire Subcode
Electrical Subcode
Plan Reviewer
Plans Released
Construction Official
DATE 2/11/13
WITH

Design to be IBC -2009 NJ edition
Snow Loads:
Ground Snow Load.....Pg-25 psf
Snow Exposure Factor...Ce=1.0
Snow Load Importance..1s=1.1
Thermal Factor.....Ct=1.0

Wind Loads:
Basic Wind Speed.....115 mph
Wind Importance Factor..1=1.15
Wind Exposure.....C
ASCE Force Coef.....1.8 (or per table)
Gust Factor.....0.85

Exterior Components designed in accordance with applicable provisions of the ASCE 7-10

Murdoch Engineering
8308 Avalon Ct.
West Long Branch, NJ 07764
(973)-570-8215

Jere Murdoch, P.E.
Professional Engineer
NJ P.E. License #48980

GIRTAIN SIGN Company
1765 ROUTE 9 TOMS RIVER, NJ 08755
732-349-8499
Fax 732-505-3673 1-800-834-8499
Three Generations
A LIMITED LIABILITY COMPANY

NAME: COPY FAX +

DATE: R.K. 01-22-13

SA: copy fax plus

SIGNATURE

DATE

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	✓	2/7/13							ZA-13-00072
☐ 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. _____	_____	_____	_____	_____