BLOCK 547.01 LOT 15 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 13-4118

[redacted]

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-13-005088

I. IDENTIFICATION

1. Proposed Work Site at: 351 Brick Boulevard (LAUNDROMAT)
2. Name of Owner in Fee: Shawky Soliman
   Tel. (732) 500-6587 e-mail _____
   Address 351 Brick Boulevard (street) Brick (municipality) 07724 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Super Laundry Equip. Tel. (800) 892-7269
   Address 1500 W. Blancke St e-mail dluca@superlaundry.com
   Linden, NJ 07036
   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. 11-3292320 FAX: (908) 862-0591
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____ Cell
6. Responsible Person in Charge once Work has Begun DICK Luca 908 482-4664
   Tel. (800) 992-7269 FAX: (908) 862-0591

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 75-		
2. Electrical	50- ✓		
3. Plumbing	60-		
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	7-		
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 195-		

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. 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 ____

COMMERCIAL Hanna Laundromat

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	600				9/16/13	LW			
☒ Electrical	1500	VW	09-05-13 A 11:		9/17/13	JJ			
☒ Plumbing	1500			9-19-13		JV	9-26-13		
☐ Fire Protection									
☐ Elevator									
TOTAL COST									

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

311 ACCESS BRICK TOWNSHIP

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.

(✓) Check if contractor.

Agent Name Super Laundry Equipment

Address 1500 W. Blanchard St

Linden, NJ 07036

Telephone (801) 992-7269

Signature _____

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

Shoprite Mall at 7-11 Corner of Brick Blvd & Drum Pt

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 9/30/13

Date Issued / Permit # 13-4118

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 351 Brick Boulevard

Owner in Fee: Shawtry Soliman

Tel. (732) 500-6587 e-mail

Address 351 Brick Blvd (street) Brick (municipality) 07724 (zip code)

Contractor: Centurion Electric Inc. Tel. (201) 935-1200

Address 110 Hackensack St., East Rutherford, NJ 07073 e-mail centurionelectric@verizon.net

Contractor License No. 14195A Exp. Date 2015

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. 223690893 FAX: (201) 935-1800

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1500

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[✓] Elec. Plans Approved

Date: 9/17/13

Approved by: JD

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 12/5/13

Approved by: JD

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final	11-14-13		12-3-13	JK
Barrier-Free	JK			
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

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. John J. Centurion, President

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Wiring of 6 Washing Machines.
& sub panel Relocate.

COMMERCIAL

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		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	
1	60	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
6	15 Amp	220 Volt Washing Machines	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$

called contractor
9/27/13

CONSTRUCTION PERMIT

Date Issued 9/30/13
Control # C-13-005088
Permit # 13-4118

IDENTIFICATION Block: 547.01 Lot: 15 Qualifier
Work Site Location: 335-399 BRICK BLVD. (351) Laundromat Brick Township, NJ
Owner in Fee DRUM POINT PLAZA LLC
249 BRICK BLVD BRICK NJ 08723
Telephone: (732) 500-6587

Contractor Super Laundry Equipment
Address 1500 West Blancke St. Linden NJ 07036
Telephone: (800) 992-7269
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
PLUMBING ALTERATIONS ...NEW WAHING MACHINES w/PLATFORM

PAYMENTS (Office Use Only)

Building	$75
Electrical	$50
Plumbing	$60
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$7
CO Fee	
Other	$0
Total	$192
Check No.	126
Cash	$0
Credit	$0
Collected By	

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 $3,600

Daniel J. Newman Jr. 9/27/13
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.

09/30/13 [illegible] (0155847023
BUILDING $75.00
ELEC $50.00
PLUMB $60.00
DCA $7.00
CHECK $192.00

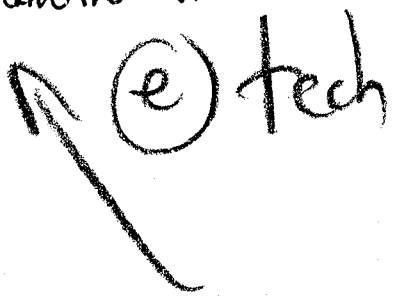
- [ ] Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements.

- [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".

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

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

NEED E.C. TO CALL ME JK



[redacted]

BUILDING SUBCODE TECHNICAL SECTION

Date Received 9/30/13
Date Issued
Control #
Permit # 13-4118

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
Work Site Location 351 Brick Boulevard

Owner in Fee Shawkey Solomon
Address 351 Brick Blvd Brick, NJ

Tele. (732) 500-6587
Contractor Super LAUNDRY Equipment
Address 1500 W. Blancke St
LINDEN, NJ 07036
Tele. (800) 992-7289 Fax (908) 862-0591
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 11-329 2320

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 RICHARD R LUCA

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Pour concrete pad (10") for 6 new washers.
*No Relocation- These are replacements
COMMERCIAL

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	9/16/13	LW
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
~~Joint~~ Plan Review Required: SUBCODE	09/16/13	KER
~~[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator~~		

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

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

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [X] Other Concrete pad.

[ ] Demolition

FEE (Office Use Only)
$

Administrative Surcharge $
Minimum Fee $
DCA Training 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 Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Alteration $
3. Total (1+ 2) $ 600

PLUMBING SUBCODE TECHNICAL SECTION

State of New Jersey — Department of Community Affairs

Date Received
Date Issued
Control #
Permit #

9/30/13
13-4118

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
Work Site Location 351 BRICK Boulevard

Owner in Fee SHAWKY Soliman
Address 351 BRICK BOULEVARD
BRICK, NJ 07724
Tele. (732) 500-6587
Contractor Rich J LUCA
Address 2505 ANNE Terrace
WALL, NJ 07719
Tele. (732) 861-4845 Fax ( )
Lic. No. 9453
Federal Emp. No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present BUS Proposed BUS
Building Sewer Size 4" Public Sewer ✓ Private Septic
Water Service Size 2" Public Water ✓ Private Well
Est. Cost of Plumbing Work $ 1500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[X] Plumbing Plans Approved
Date: 9-26-13
Approved by:

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				

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.

Richard Luca
Signature — Contractor's Seal

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal/Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
6	Washing Machine
	Hose Bibb
	Water Heater
	Fuel Oil Piping
	Gas Piping
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
	Sewer Connection
	Water Service Connection
	Stacks
1	Other Indirect Trough.
	Other
	Other

COMMERCIAL

FEE (Office Use Only)

$

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F130 (rev. 3/98)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

9.19.13 faxed 908-862-0591

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Thursday, September 19, 2013

To: DRUM POINT PLAZA LLC
249 BRICK BLVD
BRICK, NJ 08723

Laundry Mat

RE: Plumbing Subcode
Block: 547.01 Lot: 15 Qual:
335-399 BRICK BLVD.
Permit Number: Control Number: C-13-005088
Last Submit Date: Tuesday, September 17, 2013

Dear DRUM POINT PLAZA LLC,

The following comments were made during the Plan Review process:

#1-provide code approved material for trench drain

Sincerely,

Robert Wennlund, Subcode Official

CC:

** Transmit Confirmation Report **

P.1
TWP OF BRICK - FINANCE Fax:732-262-3048

Sep 19 2013 03:24pm

Name/Fax No.	Mode	Start	Time	Page	Result	Note
9088620591	Normal	19,03:24pm	0'14"	1	# 0 K	

9.19.13 faxed 908-928-0591

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Thursday, September 19, 2013

To: DRUM POINT PLAZA LLC
249 BRICK BLVD
BRICK, NJ 08723

Laundry Mat

RE: Plumbing Subcode
Block: 547.01 Lot: 15 Qual:
335-399 BRICK BLVD
Permit Number: Control Number: C-13-005088
Last Submit Date: Tuesday, September 17, 2013

Dear DRUM POINT PLAZA LLC,

The following comments were made during the Plan Review process:

#1-provide code approved material for trench drain

Sincerely,

Robert Wennlund, Subcode Official

CC:

SUPER LAUNDRY EQUIPMENT
LUCA LAUNDRY EQUIPMENT
1500 WEST BLANCKE STREET
LINDEN, NJ 07036

FACSIMILE TRANSMITTAL SHEET

TO: Robert Wennlund, Subcode

FROM: Dick Luca

COMPANY: Brick Twp.

DATE: 9/24/13

FAX NUMBER: 732-262-2941

TOTAL NO. OF PAGES INCLUDING COVER: 8

PHONE NUMBER: 732-262-1032

SENDER'S REFERENCE NUMBER:

RE: C-13-005088 (Laundromat)

YOUR REFERENCE NUMBER:

☐ URGENT ☒ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

Robert:
We have been using this type of epoxy for decades. It is virtually indestructabile in this application.

Please review so we may finish this small job.

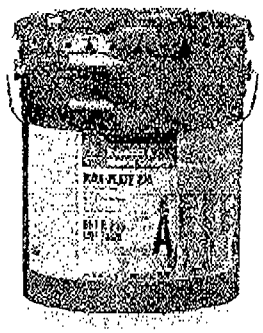
Thanks,

SHERWIN-WILLIAMS.

Products by Category:

Epoxy

Epoxy



Dura-Plate 235 Multi-Purpose Epoxy

Dura-Plate 235 Multi-Purpose Epoxy is a modified epoxy phenalkamine, formulated specifically for immersion and atmospheric service in marine and industrial environments. Dura- Plate 235 provides exceptional performance in corrosive environment, and can be applied at temperatures as low as 0°F.

- Self-priming
- Low temperature application
- Surface tolerant - damp surfaces

- Provides salt water and fresh water immersion resistance
- Cures at temperatures as low as 0°F
- Approved as a primer per MIL-P-23236, Type V, Class 7,

Grade C

Recommended Usage

For use over prepared steel and masonry surfaces.

- Salt water and fresh water immersion resistance
- Ballast tanks, offshore and marine structures
- Bilges and wet void areas
- Above- and below- water hull areas
- Decks and superstructures
- Water and waste water tanks
- Acceptable for use with cathodic protection systems.
- Dura-Plate 235 Black meets or exceeds the performance criteria of C-200; SSPC Paint 16; and Mil-P-23236B(SH) Type I or IV Class 2
- Suitable for use in USDA inspected facilities

Note: Not for immersion service when tinted.

Resources

Product Number	Product Name	MSDS	Data Page
B67R235	Red Oxide Part A	MSDS	Data Page
B67B235	Black Part A	MSDS	Data Page
B67A235	Haze Gray Part A	MSDS	Data Page
B67W235	Mill White Part A	MSDS	Data Page
B67T235	Ultradeep Clear Part A	MSDS	Data Page
B67V235	Hardener Part B	MSDS	Data Page

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    - Fire Protection
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    - Heat Resistant
    - Marine & Specialty Coatings
    - Pavement Marking
    - Polyurethane
    - Tank Linings, Secondary Containment

MATERIAL SAFETY DATA SHEET

B67A235
15 00

DATE OF PREPARATION
Jul 23, 2013

SECTION 1 — PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NUMBER
B67A235
PRODUCT NAME
DURA-PLATE® 235 Multi-Purpose Epoxy (Part A), Haze Gray
MANUFACTURER'S NAME
THE SHERWIN-WILLIAMS COMPANY
101 Prospect Avenue N.W.
Cleveland, OH 44115

Telephone Numbers and Websites

Product Information	(800) 524-5979 www.sherwin-williams.com
Regulatory Information	(216) 566-2902 www.paintdocs.com
Medical Emergency	(216) 566-2917
Transportation Emergency*	(800) 424-9300
**for Chemical Emergency ONLY (spill, leak, fire, exposure, or accident)*	

SECTION 2 — COMPOSITION/INFORMATION ON INGREDIENTS

% by Weight	CAS Number	Ingredient	Units	Vapor Pressure
1	100-41-4	**Ethylbenzene**		
		ACGIH TLV	20 PPM	7.1 mm
		OSHA PEL	100 PPM	
		OSHA PEL	125 PPM STEL	
8	1330-20-7	**Xylene**		
		ACGIH TLV	100 PPM	5.9 mm
		ACGIH TLV	150 PPM STEL	
		OSHA PEL	100 PPM	
		OSHA PEL	150 PPM STEL	
3	71-36-3	**1-Butanol**		
		ACGIH TLV	20 PPM	5.5 mm
		OSHA PEL	50 ppm (Skin) CEILING	
4	110-43-0	**Methyl n-Amyl Ketone**		
		ACGIH TLV	50 PPM	3.855 mm
		OSHA PEL	100 PPM	
23	67924-34-9	**Epoxy Polymer**		
		ACGIH TLV	Not Available	
		OSHA PEL	Not Available	
3	Proprietary	**Phenol blocked TDI Polymer**		
		ACGIH TLV	Not Available	
		OSHA PEL	Not Available	
27	14807-96-6	**Talc**		
		ACGIH TLV	2 mg/m3 as Resp. Dust	
		OSHA PEL	2 mg/m3 as Resp. Dust	
11	12001-26-2	**Mica**		
		ACGIH TLV	3 mg/m3 as Resp. Dust	
		OSHA PEL	3 mg/m3 as Resp. Dust	
8	13463-67-7	**Titanium Dioxide**		
		ACGIH TLV	10 mg/m3 as Dust	
		OSHA PEL	10 mg/m3 Total Dust	
		OSHA PEL	5 mg/m3 Respirable Fraction	

SECTION 3 — HAZARDS IDENTIFICATION

B67A235

ROUTES OF EXPOSURE
INHALATION of vapor or spray mist.
EYE or SKIN contact with the product, vapor or spray mist.

HMIS Codes

Health	2*
Flammability	3
Reactivity	0

EFFECTS OF OVEREXPOSURE
EYES: Irritation.
SKIN: Prolonged or repeated exposure may cause irritation.
INHALATION: Irritation of the upper respiratory system.

May cause nervous system depression. Extreme overexposure may result in unconsciousness and possibly death.
Prolonged overexposure to hazardous ingredients in Section 2 may cause adverse chronic effects to the following organs or systems:
- the liver
- the urinary system
- the reproductive system

SIGNS AND SYMPTOMS OF OVEREXPOSURE
Headache, dizziness, nausea, and loss of coordination are indications of excessive exposure to vapors or spray mists.
Redness and itching or burning sensation may indicate eye or excessive skin exposure.

MEDICAL CONDITIONS AGGRAVATED BY EXPOSURE
May cause allergic skin reaction in susceptible persons or skin sensitization.

CANCER INFORMATION
For complete discussion of toxicology data refer to Section 11.

SECTION 4 — FIRST AID MEASURES

EYES: Flush eyes with large amounts of water for 15 minutes. Get medical attention.
SKIN: Wash affected area thoroughly with soap and water.
If irritation persists or occurs later, get medical attention.
Remove contaminated clothing and launder before re-use.
INHALATION: If affected, remove from exposure. Restore breathing. Keep warm and quiet.
INGESTION: Do not induce vomiting. Get medical attention immediately.

SECTION 5 — FIRE FIGHTING MEASURES

FLASH POINT	LEL	UEL	FLAMMABILITY CLASSIFICATION
94 °F PMCC	1.0	11.2	RED LABEL – Flammable, Flash below 100 °F (38 °C)

EXTINGUISHING MEDIA
Carbon Dioxide, Dry Chemical, Foam

UNUSUAL FIRE AND EXPLOSION HAZARDS
Closed containers may explode when exposed to extreme heat.
Application to hot surfaces requires special precautions.
During emergency conditions overexposure to decomposition products may cause a health hazard. Symptoms may not be immediately apparent. Obtain medical attention.

SPECIAL FIRE FIGHTING PROCEDURES
Full protective equipment including self-contained breathing apparatus should be used.
Water spray may be ineffective. If water is used, fog nozzles are preferable. Water may be used to cool closed containers to prevent pressure build-up and possible autoignition or explosion when exposed to extreme heat.

SECTION 6 — ACCIDENTAL RELEASE MEASURES

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED
Remove all sources of ignition. Ventilate the area.
Remove with inert absorbent.

SECTION 7 — HANDLING AND STORAGE

STORAGE CATEGORY
DOL Storage Class IC

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORAGE
Contents are FLAMMABLE. Keep away from heat, sparks, and open flame.
During use and until all vapors are gone: Keep area ventilated - Do not smoke - Extinguish all flames, pilot lights, and heaters - Turn off stoves, electric tools and appliances, and any other sources of ignition.
Consult NFPA Code. Use approved Bonding and Grounding procedures.
Keep container closed when not in use. Transfer only to approved containers with complete and appropriate labeling. Do not take internally. Keep out of the reach of children.

SECTION 8 — EXPOSURE CONTROLS/PERSONAL PROTECTION

PRECAUTIONS TO BE TAKEN IN USE
Use only with adequate ventilation.

Avoid contact with skin and eyes. Avoid breathing vapor and spray mist.
Wash hands after using.
This coating may contain materials classified as nuisance particulates (listed "as Dust" in Section 2) which may be present at hazardous levels only during sanding or abrading of the dried film. If no specific dusts are listed in Section 2, the applicable limits for nuisance dusts are ACGIH TLV 10 mg/m3 (total dust), 3 mg/m3 (respirable fraction), OSHA PEL 15 mg/m3 (total dust), 5 mg/m3 (respirable fraction).

VENTILATION
Local exhaust preferable. General exhaust acceptable if the exposure to materials in Section 2 is maintained below applicable exposure limits. Refer to OSHA Standards 1910.94, 1910.107, 1910.108.

RESPIRATORY PROTECTION
If personal exposure cannot be controlled below applicable limits by ventilation, wear a properly fitted organic vapor/particulate respirator approved by NIOSH/MSHA for protection against materials in Section 2.
When sanding or abrading the dried film, wear a dust/mist respirator approved by NIOSH/MSHA for dust which may be generated from this product, underlying paint, or the abrasive.

PROTECTIVE GLOVES
Wear gloves which are recommended by glove supplier for protection against materials in Section 2.

EYE PROTECTION
Wear safety spectacles with unperforated sideshields.

OTHER PROTECTIVE EQUIPMENT
Use of barrier cream on exposed skin is recommended.

OTHER PRECAUTIONS
This product must be mixed with other components before use. Before opening the packages, READ AND FOLLOW WARNING LABELS ON ALL COMPONENTS.
Intentional misuse by deliberately concentrating and inhaling the contents can be harmful or fatal.

SECTION 9 — PHYSICAL AND CHEMICAL PROPERTIES

PRODUCT WEIGHT	12.05 lb/gal	1444 g/l
SPECIFIC GRAVITY	1.45	
BOILING POINT	243 - 308 °F	117 - 153 °C
MELTING POINT	Not Available	
VOLATILE VOLUME	30%	
EVAPORATION RATE	Slower than ether	
VAPOR DENSITY	Heavier than air	
SOLUBILITY IN WATER	Not Available	

VOLATILE ORGANIC COMPOUNDS (VOC Theoretical - As Packaged)

2.10 lb/gal	251 g/l	Less Water and Federally Exempt Solvents
2.10 lb/gal	251 g/l	Emitted VOC

VOLATILE ORGANIC COMPOUNDS (VOC - As Applied)

<2.26 lb/gal	<272 g/l	Less Water and Federally Exempt Solvents

SECTION 10 — STABILITY AND REACTIVITY

STABILITY — Stable

CONDITIONS TO AVOID
None known.

INCOMPATIBILITY
None known.

HAZARDOUS DECOMPOSITION PRODUCTS
By fire: Carbon Dioxide, Carbon Monoxide

HAZARDOUS POLYMERIZATION
Will not occur

SECTION 11 — TOXICOLOGICAL INFORMATION

CHRONIC HEALTH HAZARDS
Reports have associated repeated and prolonged overexposure to solvents with permanent brain and nervous system damage.
Ethylbenzene is classified by IARC as possibly carcinogenic to humans (2B) based on inadequate evidence in humans and sufficient evidence in laboratory animals. Lifetime inhalation exposure of rats and mice to high ethylbenzene concentrations resulted in increases in certain types of cancer, including kidney tumors in rats and lung and liver tumors in mice. These effects were not observed in animals exposed to lower concentrations. There is no evidence that ethylbenzene causes cancer in humans.
IARC's Monograph No. 93 reports there is sufficient evidence of carcinogenicity in experimental rats exposed to titanium dioxide but inadequate evidence for carcinogenicity in humans and has assigned a Group 2B rating. In addition, the IARC summary concludes, "No significant exposure to titanium dioxide is thought to occur during the use of products in which titanium is bound to other materials, such as paint."

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TOXICOLOGY DATA

CAS No.	Ingredient Name			
100-41-4	Ethylbenzene			
		LC50 RAT	4HR	Not Available
		LD50 RAT		3500 mg/kg
1330-20-7	Xylene			
		LC50 RAT	4HR	5000 ppm
		LD50 RAT		4300 mg/kg
71-36-3	1-Butanol			
		LC50 RAT	4HR	8000 ppm
		LD50 RAT		790 mg/kg
110-43-0	Methyl n-Amyl Ketone			
		LC50 RAT	4HR	Not Available
		LD50 RAT		1670 mg/kg
67924-34-9	Epoxy Polymer			
		LC50 RAT	4HR	Not Available
		LD50 RAT		Not Available
Proprietary	Phenol blocked TDI Polymer			
		LC50 RAT	4HR	Not Available
		LD50 RAT		Not Available
14807-96-6	Talc			
		LC50 RAT	4HR	Not Available
		LD50 RAT		Not Available
12001-26-2	Mica			
		LC50 RAT	4HR	Not Available
		LD50 RAT		Not Available
13463-67-7	Titanium Dioxide			
		LC50 RAT	4HR	Not Available
		LD50 RAT		Not Available

SECTION 12 — ECOLOGICAL INFORMATION

ECOTOXICOLOGICAL INFORMATION

No data available.

SECTION 13 — DISPOSAL CONSIDERATIONS

WASTE DISPOSAL METHOD

Waste from this product may be hazardous as defined under the Resource Conservation and Recovery Act (RCRA) 40 CFR 261.
Waste must be tested for ignitability to determine the applicable EPA hazardous waste numbers.
Incinerate in approved facility. Do not incinerate closed container. Dispose of in accordance with Federal, State/Provincial, and Local regulations regarding pollution.

SECTION 14 — TRANSPORT INFORMATION

Multi-modal shipping descriptions are provided for informational purposes and do not consider container sizes. The presence of a shipping description for a particular mode of transport (ocean, air, etc.), does not indicate that the product is packaged suitably for that mode of transport. All packaging must be reviewed for suitability prior to shipment, and compliance with the applicable regulations is the sole responsibility of the person offering the product for transport.

US Ground (DOT)

5 Liters (1.3 Gallons) and Less may be Classed as LTD. QTY. OR ORM-D
Larger Containers are Regulated as:
UN1263, PAINT, 3, PG III, (ERG#128)

DOT (Dept of Transportation) Hazardous Substances & Reportable Quantities

Xylenes (isomers and mixture) 100 lb RQ

Bulk Containers may be Shipped as (check reportable quantities):

RQ, UN1263, PAINT, 3, PG III, (XYLENES (ISOMERS AND MIXTURE)), (ERG#128)

Canada (TDG)

UN1263, PAINT, CLASS 3, PG III, LIMITED QUANTITY, (ERG#128)

IMO

5 Liters (1.3 Gallons) and Less may be Shipped as Limited Quantity.
UN1263, PAINT, CLASS 3, PG III, (34 C c.c.), EmS F-E, S-E

IATA/ICAO

UN1263, PAINT, 3, PG III

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SECTION 15 — REGULATORY INFORMATION

SARA 313 *(40 CFR 372.65C)* SUPPLIER NOTIFICATION

CAS No.	CHEMICAL/COMPOUND	% by WT	% Element
100-41-4	Ethylbenzene	1	
1330-20-7	Xylene	8	
71-36-3	1-Butanol	3	

CALIFORNIA PROPOSITION 65

WARNING: This product contains chemicals known to the State of California to cause cancer and birth defects or other reproductive harm.

TSCA CERTIFICATION

All chemicals in this product are listed, or are exempt from listing, on the TSCA Inventory.

SECTION 16 — OTHER INFORMATION

This product has been classified in accordance with the hazard criteria of the Canadian Controlled Products Regulations (CPR) and the MSDS contains all of the information required by the CPR.

The above information pertains to this product as currently formulated, and is based on the information available at this time. Addition of reducers or other additives to this product may substantially alter the composition and hazards of the product. Since conditions of use are outside our control, we make no warranties, express or implied, and assume no liability in connection with any use of this information.