335-399 Brick Blvd

BLOCK 547.01 LOT 15 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 14-0951

335-399 Brick Blvd

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

C-14-000953

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

I. IDENTIFICATION

1. Proposed Work Site at: 339 Brick Blvd. Brick NJ 08723
2. Name of Owner in Fee: John J. DeGeorge US TAEKWONDO CTR.
   Tel. (732) 477-6363 e-mail _____
   Address 249 Brick Blvd. Brick NJ 08723 (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Kyong H. Kim Tel. (732) 693-9058
   Address 1806 Adams Ave. e-mail USTC2000@MSN.com
   Toms River NJ 08753
   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. _____ FAX: ( ) _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun _____
   Tel. ( ) _____ FAX: ( ) _____

V. FEE SUMMARY (for office use only)

		$	Update	Update
1.	Building	75 ✓		
2.	Electrical	40 - ✓		
3.	Plumbing	50 - ✓		
4.	Fire Protection	65 - ✓		
5.	Elevator Devices			
6.	Subtotal			
7.	Less 20% for State Plan Review	$		
8.	Subtotal	$		
9.	State Permit Surcharge Fee	1		
10.	Subtotal	$		
11.	Cert. of Occupancy	50		
12.	Other			
13.	TOTAL	$ 281		

VI. BUILDING/SITE CHARACTERISTICS (office use only)

1. Number of Stories _____
2. Height of Structure _____
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

Taekwondo Center

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		CA		3/29/14	4/4/14	MV			
☐ Electrical					4/2/14	ZO			
☐ Plumbing					3-31-14	[illegible]			
☐ Fire Protection					4/3/14	KJ			
☐ Elevator		Eng Exempt			3/28/14	EC			
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

U.C.C. F100-1 (rev. 8/08)

03-18-14P01:52 RCVD

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 7/25/2014
Control Number C-14-000953
Permit Number 14-0951
Permit Issue Date 4/9/2014
Certificate Number 14-0951

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 335-399 BRICK BLVD. 339 Brick Blvd Martial Arts Brick Township, NJ Block: 547.01 Lot: 15 Qual:

Owner in Fee: DRUM POINT PLAZA LLC

Owner Address: 249 BRICK BLVD BRICK NJ 08723

Telephone: (732) 477-6363

Contractor Kyong H. Kim

Address 1806 Adams Rd. Toms River NJ 08753

Telephone: (732) 693-9058 Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 15

Description of Work/Use: TENANT FIT UP - US TAEKWONDO CENTER

Certificate Comments:

☑ **Certificate of Occupancy**
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☐ **Certificate of Approval**
This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **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.

☐ **Temporary Certificate of Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

David J. Newman Jr

Construction Official

Fee: $50.00
Check Number: 4195
Collected By: Nichol Ponsi

Date Printed: 7/25/2014

U.C.C. F260 (rev. 08/05)

emailed owner 6/23/14
final scheduled 7/16/14

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 4/17/2014
Control Number C-14-000953
Permit Number 14-0951
Permit Issue Date 4/9/2014
Certificate Number 14-0951

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Work Site Location: 335-399 BRICK BLVD. 339 Brick Blvd Martial Arts Brick Township, NJ Block: 547.01 Lot: 15 Qual:

Owner in Fee: DRUM POINT PLAZA LLC

Owner Address: 249 BRICK BLVD BRICK NJ 08723

Telephone: (732) 477-6363

Contractor Kyong H. Kim

Address 1806 Adams Rd. Toms River NJ 08753

Telephone: (732) 693-9058 Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 15

Description of Work/Use: TENANT FIT UP - US TAEKWONDO CENTER

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Conditions to be met:

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☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☑ **Temporary Certificate of Occupancy**
The following conditions must be met no later than: 6/17/2014
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: 6/17/2014
Conditions to be met:

Final Building

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 4/17/2014

U.C.C. F260 (rev. 08/05)

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 4/17/2014
Control Number C-14-000953
Permit Number 14-0951
Permit Issue Date 4/9/2014
Certificate Number 14-0951

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Work Site Location: 335-399 BRICK BLVD. 339 Brick Blvd Martial Arts Brick Township, NJ Block: 547.01 Lot: 15 Qual:

Owner in Fee: DRUM POINT PLAZA LLC

Owner Address: 249 BRICK BLVD BRICK NJ 08723

Telephone: (732) 477-6363

Contractor Kyong H. Kim

Address 1806 Adams Rd. Toms River NJ 08753

Telephone: (732) 693-9058 Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 15

Description of Work/Use: TENANT FIT UP - US TAEKWONDO CENTER

Certificate Comments:

☐ **Certificate of Occupancy**
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

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This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

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The following conditions must be met no later than: 6/17/2014
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: 6/17/2014
Conditions to be met:

Final Building

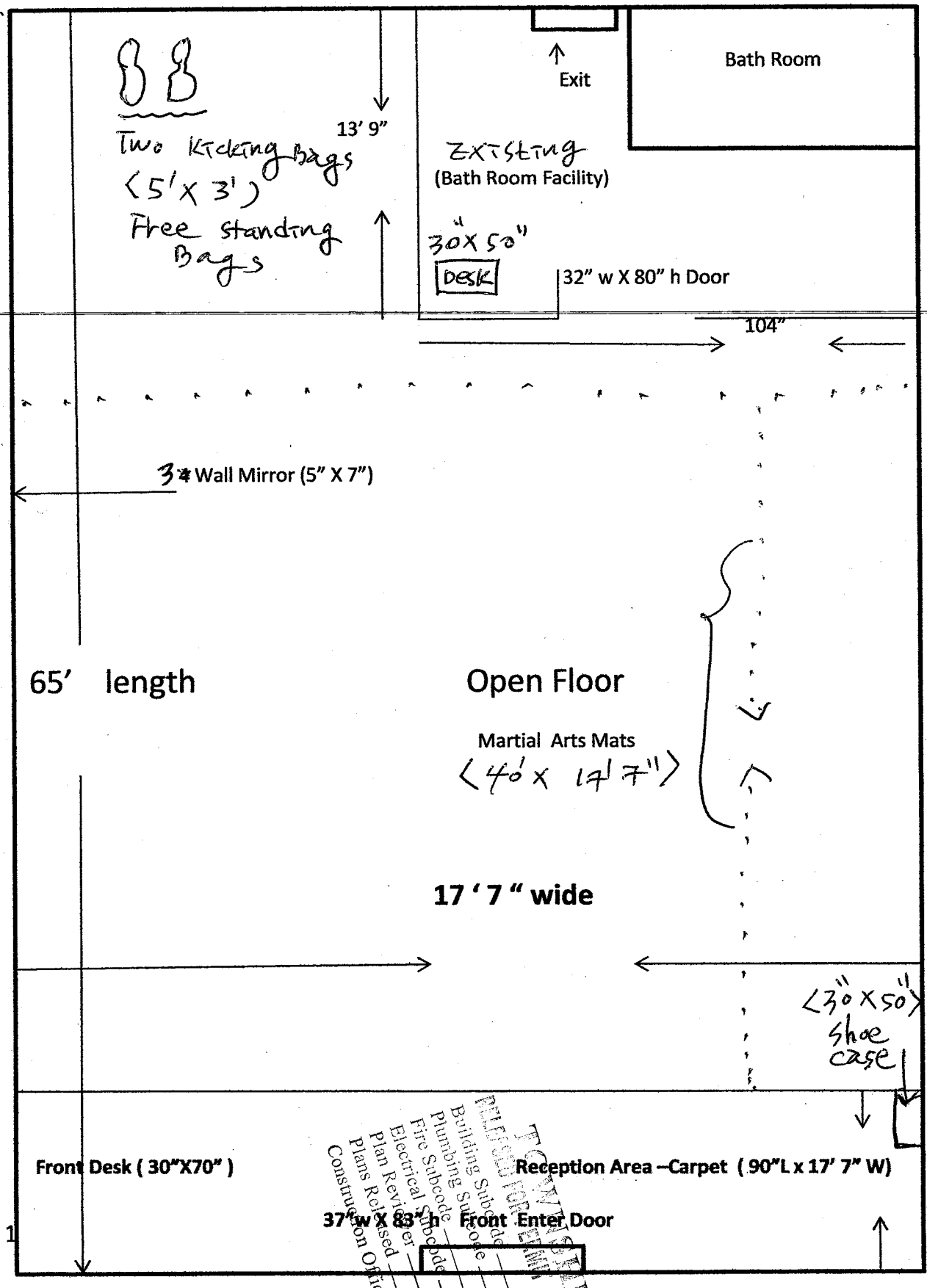
Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 4/17/2014

U.C.C. F260 (rev. 08/05)

US Taekwondo Center Floor Plan-339 Brick Blvd., Nj 08723
Phone 732-693-9058



BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 14-0951

Date Issued / Permit # 4/9/14

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 339 Brick Blvd. Brick NJ 08723
335-399 Brick Blvd US TAEKWONDO CENTER

Owner in Fee: John J. DeGeorge

Tel. (732) 477-6363 e-mail

Address 249 Brick Blvd. Brick NJ 08723
street municipality zip code

Contractor: Kyong H Kim Tel. (732) 693-9058

Address 1086 Adams Ave. e-mail USTC2000@MSN.COM
Toms River NJ 08753

Contractor License No. or Builder Registration No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

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.

Sign here:

Print name here: Kyong Kim

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Tenant Fit-up

No Work being done

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	4/4/14	W
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 04/07/14
Approved by: RAH

SUBCODE APPROVAL for CERTIFICATE
[✓] CO [ ] CCO [ ] CA
Date: 07/18/14
Approved by: RAH

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		60 Days	4/15/14 W	
Other				
Final * 7-9-14 W			07/18/14	RAH
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds)
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Retaining Wall _____ Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other _____
[ ] Demolition

COMMERCIAL

FEE (Office Use Only)

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

B. BUILDING CHARACTERISTICS

Use Group 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.
Max. Live Load
Max. Occupancy Load

Constr. Class Present _____ Proposed _____
If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work: * No Access
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 1

U.C.C. F110
(rev. 11/09)

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

TOMS RIVER TOWNSHIP CONSTRUCTION INSPECTION DEPT.

FIELD CORRECTION NOTICE

LOCATION Tae Kwan Do PERMIT # 14-0951

ISSUED TO 335-339 Brick Blvd BLOCK LOT
PERMIT HOLDER AND/OR ALL RESPONSIBLE PARTIES

NOTICE DELIVERED TO Recomend TCO 60 Days-

Upon inspection, violations of the Sec. were in evidence.

The following orders are hereby issued for their correction:

(1) Cut out voids (Keys) in mats so they can butt together without openings

(2) Transition Strips from hard floor to mats-

(3) Lever handles at all doors- Note: → Push button locks

(4) Add an emergency light at rear room

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED. ALL CORRECTIONS MUST BE MADE ON OR BEFORE.

DATE 4-15-14 BY
INSPECTOR

White - Original Yellow - Field Copy

APPLICATION FOR CERTIFICATE

Date Received	03/18/2014
Date Permit Issued	04/09/2014
Control #	C-14-000953
Permit #	14-0951
Date Issued	

IDENTIFICATION

Block 547.01 Lot 15 Qualifier

Work Site Location 335-399 BRICK BLVD. 339 Brick Blvd Martial Arts
Brick Township, NJ

Owner in Fee DRUM POINT PLAZA LLC
249 BRICK BLVD BRICK NJ 08723

Telephone (732) 477-6363

Contractor Kyong H. Kim
Address 1806 Adams Rd. Toms River NJ 08753

Telephone (732) 693-9058
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

ACTION

- [x] CERTIFICATE OF OCCUPANCY
- [ ] CERTIFICATE OF CONTINUED OCCUPANCY
- [ ] LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
- [ ] TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP Previous B Current

FINAL COST OF CONSTRUCTION: $ 4
(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all the integral equipment exclusive of process or manufacturing equipment.)

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:
Alteration TENANT FIT UP - US TAEKWONDO CENTER

I hereby attest that to the best of my knowledge, the completed project ~~meets~~ the conditions of construction permit and all prior approvals, and all work has been completed substantially in accordance with the code and with those portions of the plans and specifications controlled by the code, with any substantial deviations noted. Incomplete items listed on a Temporary Certificate of Occupancy will be complete by the date on the

SIGNED: _____
Owner/Agent

- [ ] OWNER
- [ ] AGENT

UCC F270 equiv.

APPLICATION FOR CERTIFICATE

Date Received	3/18/2014
Date Permit Issued	4/9/2014
Control #	C-14-000953
Permit #	14-0951
Date Issued	4/17/2014

IDENTIFICATION

Block 547.01 Lot 15 Qualifier

Work Site Location 335-399 BRICK BLVD. 339 Brick Blvd Martial Arts
Brick Township, NJ

Owner in Fee DRUM POINT PLAZA LLC
249 BRICK BLVD BRICK NJ 08723

Telephone (732) 477-6363

Contractor Kyong H. Kim
Address 1806 Adams Rd. Toms River NJ 08753

Telephone (732) 693-9058
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

ACTION

- ☐ CERTIFICATE OF OCCUPANCY
- ☐ CERTIFICATE OF CONTINUED OCCUPANCY
- ☐ LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
- ☑ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP _____ Previous B Current

FINAL COST OF CONSTRUCTION: $ 4
(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all the integral equipment exclusive of process or manufacturing equipment.)

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

I should give classes to children and I will Improve the problem which inspector point out very soon.

DESCRIPTION OF WORK/USE:
Alteration TENANT FIT UP - US TAEKWONDO CENTER

I hereby attest that to the best of my knowledge, the completed project meets the conditions of construction permit and all prior approvals, and all work has been completed substantially in accordance with the code and with those portions of the plans and specifications controlled by the code, with any substantial deviations noted. Incomplete ~~items listed on a Temporary~~ Certificate of Occupancy will be complete by the date on the

SIGNED: _____
Owner/Agent

☒ OWNER

☒ AGENT

UCC F270 equiv.

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 14-0957

Date Issued
Permit # 4/9/14

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 339 Brick Blvd. Brick NJ 08723
335-399 Brick Blvd.

Owner in Fee: John J. DeGeorge

Tel. (732) 477-6363 e-mail

Address 249 Brick Blvd. Brick NJ 08723
street municipality zip code

Contractor: Kyong H. Kim Tel. (732) 693-9058

Address 1806 Adams Ave. e-mail USTC2000@MSN.COM
Toms River NJ 08753

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 0

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: 4/2/14 Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 4/10/14
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 4/14/14
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			4/15/14	TD
Barrier-Free				

Dates (Month/Day)

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.

Applicant sign/Contractor sign and seal here:

Print name here: Kyong Kim

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Tenant Fit-up Nowork

COMMERCIAL

QTY.	SIZE	ITEMS
		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
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

FEE (Office Use Only)

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

U.C.C. F120 (rev. 11/09) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

4/9/14

Date Received
Control #

Date Issued
Permit # 14-0951

PLUMBING SUBCODE
TECHNICAL SECTION

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 339 Brick Blvd. Brick NJ 08723
335-399 Brick Blvd

Owner in Fee: John J. DeGeorge

Tel. (732) 477-6363 e-mail

Address 249 Brick Blvd. Brick NJ 08723
street municipality zip code

Contractor: Kyong H. Kim Tel. (732) 693-9058

Address 1806 Adams Ave. e-mail USTC2000@MSN.COM
Toms River NJ 08753

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 0 1

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: 3-31-14 Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 3-31-14
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 4-15-14
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final C.O			4-15-14	

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 sign/Contractor sign and seal here:

Print name here:

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Tenant Fit-up No work

COMMERCIAL

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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

U.C.C. F130 (rev. 11/09) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #

Date Issued
Permit #

14-0951
4/9/14

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

Block 5411.01 Lot 15 Qualification Code

Work Site Location 339 Brick Blvd. Brick NJ 08723
335-399 Brick Blvd

Owner in Fee: John J. DeGeorge

Tel. (732) 477-6363 e-mail

Address 249 Brick Blvd. Brick NJ 08723
street municipality zip code

Contractor: Kyong H Kim Tel. (732) 693-9058

Address 1806 Adams Ave. e-mail USTC2000@MSN.COM
Toms River NJ 08753

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar

Other

Location:

Total Cost of Fire Protection Work $ 1

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible

Capacity

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[✓] Fire Protection Plans Approved

Date: 4/24/14 Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 4-24-14

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [✓] CA

Date: 4/24/14

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other 4-14-14			4/4/14	

U.C.C. F140 (rev. 02/11) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

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.

Applicant/Contractor sign here:

Print name here: Kyong H Kim

D. TECHNICAL SITE DATA [ ] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK:

Water Supply Source No work being done

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		

Plan Rev — Exempt

COMMERCIAL

7

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

4/8/14 Hand to Dave

CONSTRUCTION PERMIT

Date Issued 4/8/14
Control # C-14-000953
Permit # 14-0951

IDENTIFICATION Block: 547.01 Lot: 15 Qualifier
Work Site Location: 335-399 BRICK BLVD. 339 Brick Blvd Martial Arts
Brick Township, NJ
Owner in Fee DRUM POINT PLAZA LLC
249 BRICK BLVD BRICK NJ 08723
Telephone: (732) 477-6363

Contractor Kyong H. Kim
Address 1806 Adams Rd. Toms River NJ 08753
Telephone: (732) 693-9058
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
- [x] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
TENANT FIT UP - US TAEKWONDO CENTER

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 $0

Daniel J. Newman Jr. 4/7/14
Construction Official Date

PAYMENTS (Office Use Only)

Building	$75
Electrical	$40
Plumbing	$50
Fire Protection	$65
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$1
CO Fee	$50.00
Other	$0
Total	$281
Check No.	150 331
Cash	$0
Credit	$0
Collected By	

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.

04/09/14 1:39PM 001558#1277
#0951
BUILDING $75.00
ELEC $40.00
PLUMB $50.00
FIRE $65.00
DCA $1.00
C/O $50.00
ZBA $50.00
CHECK $331.00

- [ ] 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".

- [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.

Block 347.01/13

TOWNSHIP OF BRICK
DEPARTMENT OF INSPECTIONS

OCCUPANCY

OCCUPANT LOAD 15
LIVE LOAD _____ P. S. F.
FIRE GRADING _____ HOURS
USE GROUP B

RECEIVING CLERK AC
DATE REC'D 3-18-14

ZONING PERMIT APPLICATION

PERMIT # ZP-14-0024
DATE ISSUED 4/9/14

BLOCK: 547.01 LOT: 15 QUALIFIER: — SITE ADDRESS: ~~339~~ 339 Brick Blvd.
335-399 Brick Blvd

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: Kyong Kim
   APPLICANT ADDRESS: 1806 Adams Ave. Toms River, NJ 08753
   PHONE # 732-623-9058 EMAIL: USTC2000@MSN.com
3. RESPONSIBLE PERSON FOR WORK: same as above
   PHONE# _____ FAX# _____
4. SIGNATURE OF APPLICANT: [signature]

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 50-
OTHER: $ —
TOTAL: $ 50-

REQUIRED BY APPLICANT

RESIDENTIAL: —
COMMERCIAL: ✓ Martial Arts
EXISTING USE: Pool store
PROPOSED USE: Martial Arts.

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

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

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____ MATERIAL _____

HEIGHT: _____ (*IF APPLICABLE)

OTHER _____

DESCRIPTION: Tenant Fit-up

ZONING REVIEW:
DATE REVIEWED: 3/27/14 DATE DENIED: _____ DATE APPROVED: 3/27/14 INTLS: [signature]

(SEE BACK PAGE)

OFFICE USE ONLY

ZONING REVIEW:

DATE REVIEWED: 3/27/14 DATE DENIED: — DATE APPROVED: 3/27/14 INTLS: SGB

DATE:	COMMENTS:	INITIALS:

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued: 4/9/14
Application Number: ZA-14-00244
Application Date: 03/26/2014
Project Number:
Permit Number: 2014-00247
Fee: $50

Zoning Permit

Worksite **335-399 BRICK BLVD.**
Location: **Brick Township, NJ**

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

Owner: **John De Goerge**
Address: **249 BRICK BLVD**
BRICK, NJ 08723

Applicant: **Kyong Ktun**
Address: **1806 Adams Avenue**
Toms River, NJ 08753

Application Approved Date: 03/27/2014

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

Use is: Fitness Center Pool Store to Martial Arts
Nonconforming Use is:

Work Description:
Tenant Fit Up - Tenant fit up from Pool store to Martial Arts.

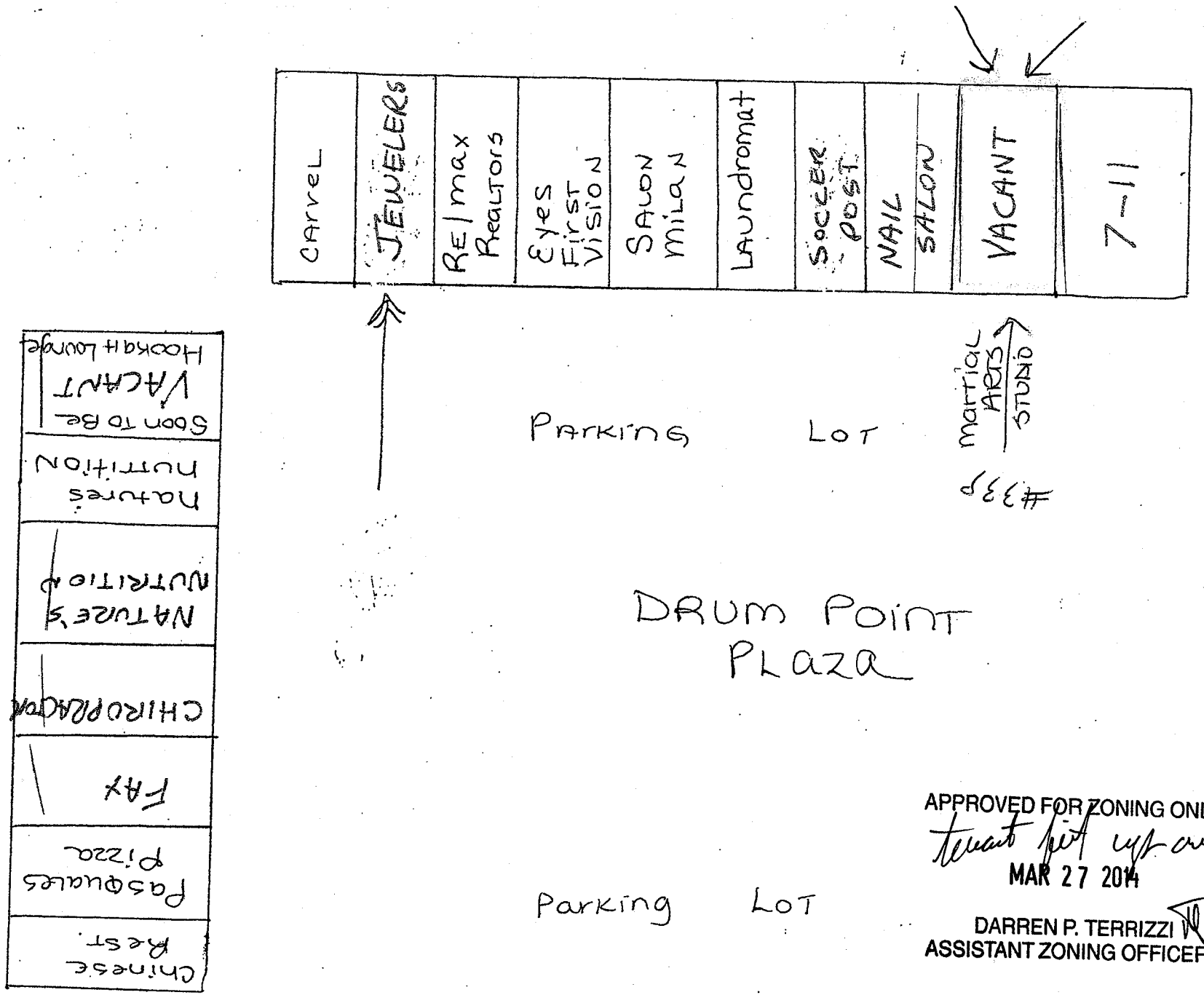
Additional Zoning permit required for any other work done on property including any signage.

Upon review it was determined that the Zoning Permit:

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

Darren P. Terrizzi, Assistant Zoning Officer — Date 03/27/2014

Michael P. Fowler, Township Planner — **Date** 3/20/14



APPROVED FOR ZONING ONLY
tenant fit up
MAR 27 2014
DARREN P. TERRIZZI
ASSISTANT ZONING OFFICER

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 547.01 LOT: 15 ADDRESS: 339 Brick Blvd.
335-399 Brick Blvd.

IDENTIFICATION:

1. WORK SITE ADDRESS: 339 Brick Blvd. Brick NJ 08723
2. NAME OF OWNER IN FEE: John J. DeGeorge
   ADDRESS: 249 Brick Blvd. PHONE #: (732) 477-6363
   Brick NJ 08723 FAX #: (__) _____
3. PRINCIPAL CONTRACTOR: Kyong H Kim
   ADDRESS: 1806 Adams Ave. PHONE #: (732) 693-9058
   Toms River NJ 08723 FAX #: (__) _____
4. ARCHITECT OR ENGINEER: Allan H. Borst
   ADDRESS: 1792 Hinds Road Toms River NJ 08753 PHONE: # (732) 255-2713
5. RESPONSIBLE PERSON FOR WORK: Kyong H Kim
   ADDRESS: 1806 Adams Ave. Toms River NJ 08753

PHONE #: (732) 693-9058 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

732-262-1027

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

Date:_____

ENGINEERING
PLOT PLAN EXEMPT FORM
(ONLY IF NOT IN A FLOOD ZONE)

Block: 547.01 Lot: 15

Property Address: 339 Brick Blvd. Brick, NJ 08723

I, Kyong Kim (name) of 1806 Adams Ave. Toms River (address)
request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Township Code, Chapter 245, Section 245-29.

_____
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

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

Subcode Official Review

Date: Saturday, March 29, 2014

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

RE: Building Subcode
Block: 547.01 Lot: 15 Qual:
335-399 BRICK BLVD.
Permit Number: Control Number: C-14-000953
Last Submit Date: Saturday, March 29, 2014

Dear DRUM POINT PLAZA LLC,

Your request is hereby denied based upon the following infractions.

Provide comprehensive plans of space and it's layout.

Identify all areas and show all furnishings.

Provide dimensions on the plans.

Show all egress points in all rooms.

Complete re-review required.

Sincerely,

Michael Vecchio

CC:

Resubmit
Building
4-9-14
CR

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	[illegible]	3/27/14							ZA-14-00244
☐ 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.				