



CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: MCDONALD'S

2. Owner Name: MCDONALD'S CORP. Tel. () 338-5380

Address: 1455 Broad St. Broomfield N.J.

3. Principal Contractor: HELLY CONST CO., INC Tel. () 449-3367

Address: P.O. Box 242 SEA GIRT N.J.

Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____

4. Architect or Engineer: WM. HOUTHUYSEN Tel. () _____

Address: QUINTON, N.J.

5. Responsible Person in Charge of Work: WALTER ZWILL Tel. () _____

II. PROPOSED WORK

A. TYPE OF WORK	B. CATEGORIES OF WORK	D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?																
1. ☐ Minor Work (Single Trade) 2. ☐ Small Job (\$5,000 and no Prior Approvals) <i>Complete only II.B., III and IV.A. and Page 2</i> 3. ☐ New Building 4. ☒ Addition 5. ☒ Alteration 6. ☒ Repair, Replacement 7. ☐ Demolition 8. ☐ Other: _____	<table border="1"> <thead> <tr> <th>Permit/Category</th> <th>Estimated</th> </tr> </thead> <tbody> <tr> <td>1. ☐ Building/Structural</td> <td>\$ _____</td> </tr> <tr> <td>2. ☐ Plumbing</td> <td>_____</td> </tr> <tr> <td>3. ☐ Electrical</td> <td>_____</td> </tr> <tr> <td>4. ☐ Fire Protection</td> <td>_____</td> </tr> <tr> <td>5. ☐ Other _____</td> <td>_____</td> </tr> <tr> <td>6. ☐ Other _____</td> <td>_____</td> </tr> <tr> <td colspan="2">TOTAL COST <u>\$20,000</u></td> </tr> </tbody> </table>	Permit/Category	Estimated	1. ☐ Building/Structural	\$ _____	2. ☐ Plumbing	_____	3. ☐ Electrical	_____	4. ☐ Fire Protection	_____	5. ☐ Other _____	_____	6. ☐ Other _____	_____	TOTAL COST <u>\$20,000</u>		1. ☐ Elevators/Dumbwaiters 2. ☐ High-Pressure Boilers 3. ☐ Refrigeration Systems 4. ☐ Pressure Vessels 5. ☐ Hazardous Uses/Places of Assembly 6. ☐ Cross-connections/Backflow Preventors 7. ☐ Sprinklers 8. ☐ Smoke Control Systems in Open Wells
Permit/Category	Estimated																	
1. ☐ Building/Structural	\$ _____																	
2. ☐ Plumbing	_____																	
3. ☐ Electrical	_____																	
4. ☐ Fire Protection	_____																	
5. ☐ Other _____	_____																	
6. ☐ Other _____	_____																	
TOTAL COST <u>\$20,000</u>																		
C. DO YOU WANT: 1. ☐ Partial Releases 2. ☐ Prototype Processing																		

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R-1) If new construction, enter no. of dwelling units _____

2. ☐ Multi-Family (R-2) HMD Reg. No.: _____

3. ☐ Two Family (R-3b) If other than new construction, enter no. of dwelling units: _____

4. ☐ One-Family (R-3a) Before Construction: _____

After Construction: _____

Net Gain (or loss): _____

3. NON-RESIDENTIAL

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

State Specific Use: _____

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

B. HEATING FUEL

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

C. TYPE OF SEWAGE DISPOSAL

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

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

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

LDS BR 10110202

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

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

- A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.
- B. ☐ I further certify that I will perform the work below.
- B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 46:3B-1 et. seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.
- D. ☐ I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

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

SIGNATURE R. D'Amico DATE 1/27/88

II. AGENT SECTION

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

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

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

☐ Check if contractor.

AGENT NAME _____ TEL. () _____

ADDRESS _____

SIGNATURE _____

PERMIT CONTROL

I. PLAN REVIEW STATUS

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

☐ PARTIAL RELEASES

☐ PROTOTYPE PLAN - FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date	Receiver	Approval Date	Reviewer	Comments
☐	BUILDING			1-21-88	ED	
	Footings/Foundations					
	Framing					
	Architectural			1/27/88	gc	
	Other					
☐	PLUMBING					
☐	ELECTRICAL					
☐	FIRE PROTECTION					
☐	OTHER					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
☒	ALL CONSTRUCTION			
☒	BUILDING		4-14-88	EF
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
☒	PLUMBING			
☒	ELECTRICAL		5-13-88	RE
☒	FIRE PROTECTION		4-27-88	gc
	OTHER			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

Date Issued

☐ Temporary Certificate of Occupancy

Date Expired _____

☐ Temporary Certificate of Occupancy

Date Expired _____

☐ Certificate of Occupancy

No. _____

☐ Certificate of Continued Occupancy

No. _____

☒ Certificate of Approval

No. 147

☐ None

5-16-88

IV. ON-GOING INSPECTIONS

On-going Inspections Required
(See Page 1, II.D.)

Date Posted to
Log and Ticker

V. FEE SUMMARY

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

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$ 150.00
PLUMBING	.
ELECTRICAL	.
FIRE PROTECTION	15.00
OTHER	.
SUBTOTAL	\$ 165.00
- LESS: 20% of subtotal (when plan review performed by state agency).	(5.00)
D.C.A. TRAINING FEE .0006 x	.
CERTIFICATE OF OCCUPANCY	20.00
OTHER	.
OTHER	.
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ 190.00
DATE _____	Collected By _____

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			.
OTHER			.
OTHER			.
- LESS: Refunds			(.)
TOTAL COLLECTED AFTER PERMIT ISSUED			\$.

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	\$.
COLLECTED AFTER PERMIT (VB)	.
TOTAL	\$.

TOWNSHIP OF BRICK



CERTIFICATE

CERT. NO.	147
DATE ISSUED	5-16-88
Block	701
Lot	8-1
Subdivision	

IDENTIFICATION

Owner McDonald's Corp. Agent Holly Constr. Co., Inc.
 Address 1455 Broad St. Address _____
Bloomfield, NJ
 Tel. () _____ Tel. () _____
 Work Site Address Chambers Bridge Rd. Lic. No. _____
and Rt. 70 Federal Emp. No. _____

PAYMENTS

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

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☐ CERTIFICATE OF OCCUPANCY

XXX ☒ CERTIFICATE OF APPROVAL

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

B. ☐ CERTIFICATE OF CONTINUED OCCUPANCY

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

C. ☐ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate:

D. DESCRIPTION OF WORK:

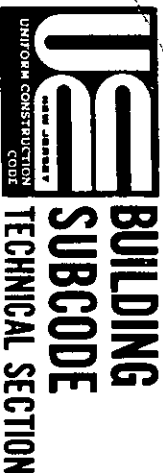
Vestibule and drive-thru addition to restaurant

USE GROUP A-3 FIRE GRADING 2 hours
 MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____
 SPECIFIC USE Restaurant

FINAL COST OF CONSTRUCTION: \$ 20,000.

Arthur J. Cierzo
 CONSTRUCTION OFFICIAL

TOWNSHIP OF BRICK



PERMIT NO. 1447
 DATE ISSUED 2-1-88
 REVISION DATE _____
 Block 201 Lot 8-1
 Subdivision _____

A. IDENTIFICATION

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

Owner McDONALD'S Corp Contractor McHUGH Const. Co. Inc.
 Address 1451 BRAND ST. Address P.O. Box 242
BLAIRMONT, N.J. SEA GIRT, N.J.
 Tel. () 338-5300 Tel. () 449-3367
 Work Site Address CHARITABLES BR RD. Lic. No. _____
- MC DONALD'S Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
 (Complete for Minor Work and Small Job Only)
 I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
 AGENT SIGNATURE _____

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK
 Give detail description including materials used, dimensions, etc.
CONSTRUCTION OF
VESTIBULES & DRIVE
TRUCK ADDITION

TYPE OF WORK:
☐ New Building
☐ Addition
☐ Alteration/Renovation
☐ Roofing
☐ Siding
☐ Other _____
☐ Demolition
☐ Miscellaneous
☐ Fence
☐ Sign
☐ Pool
☐ Elevator
☐ Other _____

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

☒ See Plans

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____

No. of Stories _____ Total Building Area—All Floors _____ Sq. Ft.
 Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.
 Area—Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.
 Estimated Cost of Building Work: \$ 20,000

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

JOB CONDITION/COMMENTS

DATE _____

[illegible]

Fire Grading:

Maximum Live Load:

Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW		INSPECTIONS		
Date	Initials	Type	Failure Dates	Approval Date
☐ No Plans Required	<u>1-27-88</u>	☒ Footing/Foundation		<u>2-4-88</u>
☒ All	<u>EC</u>	☐ Slab		
☐ Footing/Foundation		☐ Frame		
☐ Architectural		☐ Architectural		
☐ Other		☒ Insulation		<u>3-10-88</u>
		☒ Finishes		<u>3-4-88</u>
		☐ Energy		
		☐ Mechanical		
		☐ TCO		
		☐ Other		

INSPECTIONS FINAL	
☒ CO	☐ CCO
☐ CA	
Date: <u>3-4-88</u>	Inspected By: <u>llg</u>



FIRE SUBCODE TECHNICAL SECTION



PERMIT NO. 147
DATE ISSUED 2-1-88
REVISION DATE _____
Block 701 Lot 8-1
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner Mc DONALDS Corp.

Contractor _____

Address 1455 BRAD ST.

Address _____

Bloomfield NJ.

Tel. () _____

Tel. () _____

Work Site Address _____

Lic. No. _____

CHAMBERS BRIDGE

Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and
Small Job Only)

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

AGENT SIGNATURE _____

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other _____ FEE _____

Areas Sprinkled: ☐ Full ☐ Partial (specify in comments)

No. of Heads: _____ No. of Spare Heads: _____

☐ Valves Supervised - Method: _____

Water Supply - Source: _____ Size: _____

FD Connection Location: _____

Estimated Cost of Work: \$ _____

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO₂

☐ Halon ☐ Foam

☐ Other _____

Manual Pull: ☐ Yes ☐ No

Locations: _____

Estimated Cost of Work: \$ _____

B3. ALARM

TYPE: ☐ Manual ☐ Automatic FEE _____

Supervision Type: ☐ Local ☐ Central

☐ Proprietary ☐ Remote Location

Estimated Cost of Work: \$ _____

B4. STAND PIPES

Pipe Size: _____ Pump Size: _____

Water Source: _____ Size: _____

FD Connection Location: _____

Hose Station: ☐ Yes ☐ No

Estimated Cost of Work: \$ _____

B5. OTHER

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Subtotal	\$ _____

Minimum Fire Protection Fee (If Applicable) \$ _____

Total Fire Protection Fee (Greater of Minimum
or Subtotal) \$ 15

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP _____ Present _____ Proposed _____

Heating Systems - Location: _____

Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other _____

Fuel Storage Tank - Location: _____ Fuel Type: _____ Capacity: _____

Total Estimated Cost of Fire Protection Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION – FIRE

DATE _____

JOB CONDITION/COMMENTS

DATE	JOB CONDITION/COMMENTS
4-21-88	Needs two Gate Signs & 1 Emergency Gate

[illegible]

JOB SUMMARY

- ☐ No Plans Required
☐ Plan Review Approved

Date: _____

Approved By: _____

INSPECTIONS FINAL

☒	CO	☐	CCO	☐	CA
-------------------------------------	----	--------------------------	-----	--------------------------	----

Date: 4/27/88

Inspected By: AS

INSPECTIONS

Type

- | | |
|-------------------------------------|-----------------------|
| ☐ | Fire Suppression Test |
| ☐ | Fire Alarm Test |
| ☐ | Smoke Test |
| ☐ | TCO |
| ☒ | Other <i>Small</i> |
| ☐ | Other |
| ☐ | Other |
| ☐ | Other |

4/21/88

Failure Date

Approval Date

4/27/88



CUT-IN-CARD

MUNICIPALITY B.T.

LOCATION _____ UTILITY CO AP

Chambersbridge Rd & Rte 70 BLK 701 LOT 8-2

OWNER D Ambrosio Associates OCCUPANT M Donald

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

☒ FINAL ☐ TEMPORARY

This approval void after _____ days

SERVICE _____ RANGE _____ WATER HEATER _____

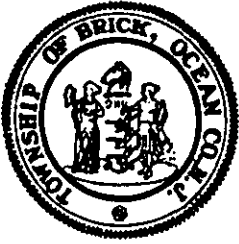
AIR COND / ELECT HEAT _____ MISC _____

COMMENTS _____

DATE 5.12.88 PERMIT # 16486 Addition INSPECTOR B. Kocher

Elec. 104

Insp. Lic # 24



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

January 26, 1988

John Paul Doyle, Esq.
1500 Route 88 West
Brick, New Jersey 08723

SUBJECT: Request for Exemption from Site Plan Approval from
Anthony D'Ambrosio for McDonald's, Chambers Bridge Road,
Block 701, Lot 8.1 for An Addition Under 1,000 Square Feet-
Affidavit & Plan Dated & Received November 10,
1987-Objection sent December 2, 1987-Additional
information submitted by John P. Doyle, Esq. on January 14,
1988 by letter dated January 11, 1988

After review and discussion of the amended request for exemption from
site plan approval at the January 17th Executive Session, the Planning
Board has determined that they have no objection to the request as
submitted.

All other necessary permits and approvals must be obtained from the
Building Department.

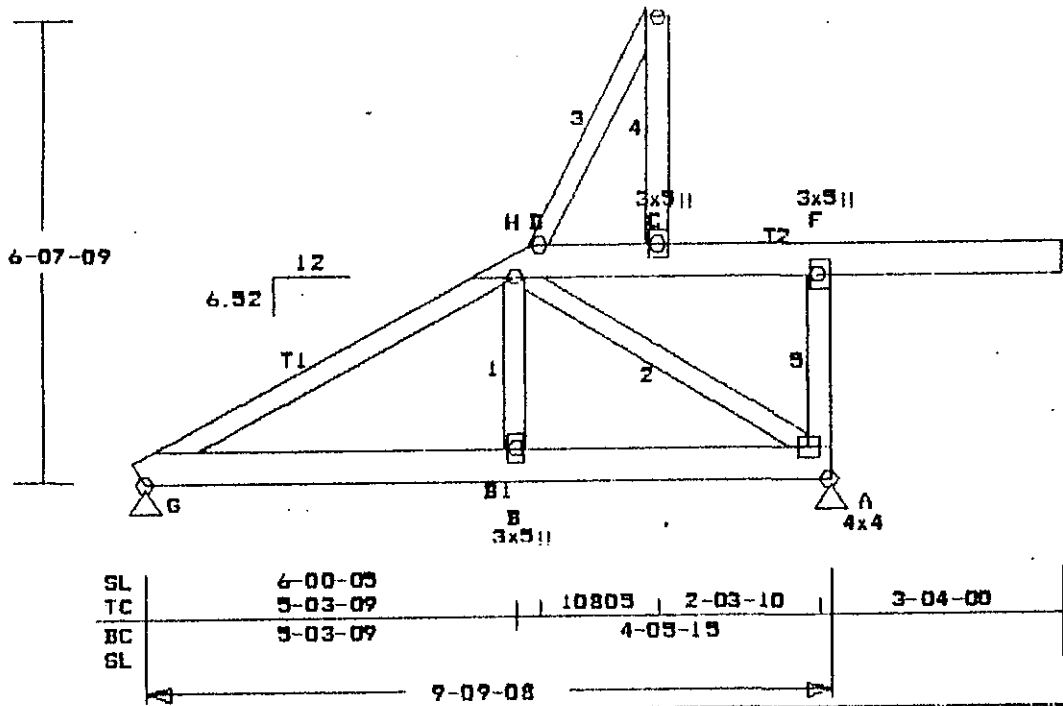
Very truly yours,

Arthur J. Cierzo
Construction Official

cc: J. Kull, Planning Bd. Sec.

8861

QUAN TYPE	SPAN	P1-H1	OVERHANGS	JOB	MARK
22 SP				HOLLY CONSTRUCTION 01209	G



CSI	SIZE	LUMBER	1.15FB
TOP	.52	2X 6 NO2SP15	1500
BTM	.10	2X 6 NO2SP15	1500
WBS	.21	2X 4 NO3SP15	975
EXCEPTIONS:			
G-H		2X 4 NO2SP15	1750
LUMBER STRESS INCREASE: 15.0%			
REPETITIVE MEMBER STRESS USED.			

LATERAL BRACING:
TOP CHORD - CONTINUOUS
BOT CHORD - 120 IN. OC
SPACING - 24.0 IN.

LOADING	LIVE	DEAD (PSF)
TOP CHD	30.0	7.0
BTM CHD	.0	10.0
TOTAL	30.0	17.0 47.0

SUPPORT CRITERIA			
JT REACT WIDTH	JT REACT WIDTH	LBS IN-SX	LBS IN-SX
G	439 3- B	A	439 3- B

LEFT RIGHT
GIRD 4IN - 9SX

MEMBR	CSI	P(LBS)	M01ST	M02ND
TOP CHORDS				
G-H	.52	422 C	0	0
H-D	.05	0 T	0	628
D-C	.16	0 T	-628	2090
C-F	.16	0 T	-2090	0
BOTTOM CHORDS				
G-B	.10	370 T	0	-355
B-A	.09	370 T	355	0
WEBS				
B-H	=	107 T	H-A	= 445 C
D-E	=	0 T	C-E	= 0 T
A-F	=	161 C		

DL+LL DEFL = .14" IN G-H
LL DEFL < S/360
S/DL+LL DEFL=803 S/DEPTH= 1.5

PLATING CONFORMS TO TPI
CODE. GRIPPING BASED ON
SYP LUMBER.
PLATES - 20 GAUGE T-GIG
GRIPPING 529-363 PSI PER PAIR
INCLUDES 15.0% INCREASE
TENSION 838- 807 PLI PER PAIR
SHEAR 853- 495 PLI PER PAIR

JT TYPE	PLATE	SIZE	X	Y
A	4010	4.00 X 4.00	CTR	CTR
B	1001	3.00 X 5.00	CTR	CTR
C	1001	3.00 X 5.00	CTR	CTR
D		3.00 X 4.00		
E		3.00 X 4.00		
F	4000	3.00 X 5.00	CTR	CTR
G		3.00 X 6.00		
H		4.00 X 8.00		

NOTES:
1. CONFORMS TO TPI-85.
2. PROVIDE DRAINAGE TO
PREVENT WATER PONDING.

Concord Roof Truss Co.
432 S. EVERGREEN AVE
WOODBURY HEIGHTS
NJ 08097

MISCELLANEOUS INFORMATION

THIS DATA SHEET AND THE INFORMATION HEREON IS THE PROPERTY OF ANDERS ENGINEERING, INC. AND IS NOT TO BE COPIED IN WHOLE OR IN PART, OR USED FOR UNAUTHORIZED EXPLOITATION OF THE ITEMS DISCLOSED HEREIN OR IN ANY OTHER WAY DISCLOSED OR USED FOR FURNISHING INFORMATION TO OTHERS.

THE USE OF THIS COMPONENT SHALL BE SPECIFIED BY THE DESIGNER OF THE COMPLETE STRUCTURE.

OBTAIN ALL NECESSARY CODE COMPLIANCES APPROVALS AND INSTRUCTIONS FROM THE DESIGNER OF THE COMPLETE STRUCTURE BEFORE USING THIS COMPONENT.

IF THE DESIGN CRITERIA LISTED ABOVE DOES NOT MEET LOCAL BUILDING CODE REQUIREMENTS, DO NOT USE THIS DESIGN.

WHEN THIS DRAWING IS SIGNED AND SEALED, ANDERS ENGINEERING, INC. IS APPROVING ONLY THE STRUCTURAL DESIGN OF THE UNIT SHOWN ON THE BASIS OF DATA PROVIDED BY THE CUSTOMER AND SHOWN ON THIS DRAWING.

ANDERS ENGINEERING, INC.
1000 WHITE HORSE ROAD, SUITE 612
P.O. BOX 1079
VOORHEES, NEW JERSEY 08043
(609) 795-7230

Paul D. Breier 2/3/88
PAUL D. BREIER
Professional Engineer
N.J. License No. 28932

LUMBER

LUMBER MUST BEAR A GRADE MARK FROM AN APPROVED INSPECTION BUREAU AND MUST BE OF THE SIZE AND SPECIES SHOWN AND EQUAL TO OR BETTER THAN THE GRADE SPECIFIED.

DESIGN CRITERIA

THE DESIGN AND THE MATERIALS SPECIFIED ARE IN SUBSTANTIAL CONFORMITY WITH THE LATEST REVISION OF NDS, AISC AND TPI.

BRACING INFORMATION

ALL LATERAL BRACING SPECIFIED IS FOR BRACING INDIVIDUAL WEB MEMBERS AND MUST BE INSTALLED.

WEB BRACES WHERE REQUIRED ARE TO BE EQUALLY SPACED ALONG WEB LENGTH.

CHORD MEMBERS ARE ASSUMED TO BE LATERALLY RESTRAINED BY SHEATHING, FURLINS OR CEILING MATERIALS.

RESTRAINT OR LATERAL BRACING AND ADDITIONAL BRACING FOR THE OVERALL STRUCTURE IS TO BE PROVIDED BY THE DESIGNER OF THE COMPLETE STRUCTURE.

CONNECTOR HARDWARE

CONNECTOR PLATES ARE MANUFACTURED IN ACCORDANCE WITH TPI.

PLATES MUST BE INSTALLED ON BOTH FACES OF THE LUMBER WITH TEETH FULLY ENBEDDED.

PLATES MUST BE OF THE SIZE, GAUGE AND CAPACITY SHOWN.

HANDLING & ERECTION

CARELESS HANDLING OF COMPONENTS SHALL NOT BE PERMITTED. TEMPORARY AND PERMANENT BRACING FOR HOLDING COMPONENT PLUMB AND FOR RESISTING LATERAL FORCES SHALL BE DESIGNED AND INSTALLED BY OTHERS. NO LOADS ARE TO BE APPLIED TO THE COMPONENT UNTIL LATERAL BRACING AND FASTENINGS ARE COMPLETE. AT NO TIME SHALL LOADS GREATER THAN DESIGN LOADS BE APPLIED TO THE COMPONENT.

CARE MUST BE EXERCISED TO INSTALL COMPONENT AT PROPER BEARING POINTS, RIGHT SIDE UP AND PROPERLY BRACED. READ ALL NOTES HEREON AND OBTAIN ANY DESIGN ASSISTANCE INDICATED.

ANDERS ENGINEERING, INC. EXERCISES NO CONTROL AND ACCEPTS NO RESPONSIBILITY ON THE FABRICATION, HANDLING, ERECTION AND INSTALLATION OF COMPONENTS.