Called 4/10/96 JS

BLOCK 1149 LOT 4 ADDRESS (SITE) 133 Vanzile Rd. PERMIT NO. 595-96

MAR -7 1996

# CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

## I. IDENTIFICATION

1. Proposed Work-site at: 133 Vanzile Rd, Bricktown
2. Name of Owner First Fidelity Bank Tel. (215) 785-6083
   Address 123 S. Broad St. (street) Philadelphia, Pa (municipality) 19109 (zip code)
3. Ownership Public ✓ Private
4. Principal Contractor: NW Sign Industries Tel. (___) ___
   6985 Airport Highway Lane
   Pennsauken, NJ 08110
   (609) 488-6366
   Address ___
   License No. OR, if new home, Builder Reg. No. ___ Exp. Date ___
   Federal Emp. No. 223176338 Social Security No. ___
5. Architect or Engineer ___ Tel. (___) ___
   Address ___
6. Responsible Person in Charge of Work Suzanne Parker Tel. (609) 488-6366

## V. FEE SUMMARY (for office use only)

| | | | Update. | Update |
|---|---|---|---|---|
| 1. Building | $ | 84 ✓ | | |
| 2. Electrical | | | | |
| 3. Plumbing | | | | |
| 4. Fire Protection | | N/A | | |
| 5. Elevator Devices | | | | |
| 6. Subtotal | $ | 84 | | |
| 7. Less 20% for State Plan Review | | 8 | | |
| 8. Subtotal | $ | | | |
| 9. DCA Training Fee | | 3 | | |
| 10. Subtotal | $ | | | |
| 11. Cert. of Occupancy | | | | |
| 12. Other 20A | | $11.00 | | |
| 13. TOTAL | $ | 110 ✓ | | |

## 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. Construction Classification | |
| 7. Total Land Area Disturbed ___ sq. ft. | |
| 8. Flood Hazard Zone | |
| 9. Base Flood Elevation ___ ft. | |
| 10. Wetlands yes ___ sq. ft. | |
| no ___ | |
| 11. Max. Live Load | |
| 12. Max. Occupancy Load | |

## II. PROPOSED WORK

| | Est. Cost |
|---|---|
| 1. ☐ Minor work (single trade) | 4000 00 |
| 2. ☐ Small Job ($5,000 and no prior approvals) | |
| 3. ☐ New Building | |
| 4. ☐ Addition | |
| 5. ☐ Alteration | |
| 6. ☐ Fire Protection | |
| 7. ☐ Plumbing | |
| 8. ☐ Electrical | |
| 9. ☐ Elevator Devices | |
| 10. ☐ Asbestos Abatement | |
| 11. ☐ Demolition | |
| TOTAL COSTS | 4000 00 |

**OPTIONAL (for office use only)**

| Plans Rec'd By | Date Rec'd | Rejection Date | Approval Date | Re-viewer | Resubmission Dates Approval | Resubmission Dates Rejection | Re-viewer |
|---|---|---|---|---|---|---|---|
| JP | 3/7/96 | | 4/10/96 JP | | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| Sm | 3/10/96 | | Sm | Pell | | | |

**III. DO YOU WANT:** (optional) 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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

## VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:
Before Construction ___
After Construction ___
Net gain or loss ___

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10414693

**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(e)1.vii:

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 New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(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 NW Sign Industries

Address 6985 Airport Highway Lane
Pennsauken, NJ 08110
(609) 488-6366

Telephone ( )

Signature Theresa Frenz Date 2/29/96

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 | | | | | | | | | |
| ☐ Planning Board | | | | | | | | | |
| ☐ Zoning Board | | | | | | | | | |
| ☐ Sewer Authority | | | | | | | | | |
| ☐ Water Authority | | | | | | | | | |
| ☐ Fire Department | | | | | | | | | |
| ☐ Police Department | | | | | | | | | |
| ☐ Health Department | | | | | | | | | |
| ☐ Soil Conservation | | | | | | | | | |
| ☐ N.J. Dept. of Community Affairs | | | | | | | | | |
| ☐ N.J. Department of Transportation | | | | | | | | | |
| ☐ N.J. Dept. of Environmental Protect. | | | | | | | | | |
| ☐ Utility Dig No. | | | | | | | | | |
| ☐ | | | | | | | | | |
| ☐ | | | | | | | | | |

IMPORTANT
A.I.B.I. EXPIRED

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. | | | | |

# CONSTRUCTION PERMIT

Date Issued 4/15/96
Control #
Permit # 595-96

IDENTIFICATION Block 1149 Lot 4

Work Site Location 132 Van Winkle Pkwy

Owner in Fee First Fidelity Trust

Address 123 S. Broad St

Tele. ( ) 

Contractor NJ Sign Co Inc

Address 

Tele. ( ) 

Lic. No. or Bldrs. Reg. No. 595*# Exp. Date 

Federal Emp. No. BLOCK 1149 # or Social Security No. LOT 4

is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] OTHER 
[ ] ELECTRICAL [ ] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

Sign

NOTE: If construction 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 $ 4000

CONSTRUCTION OFFICIAL

U.C.C. Form F-170C

| PAYMENTS (Office Use Only) | | |
|---|---|---|
| Building | SX | 84.00 |
| Plumbing | | 8.00 |
| Electrical | | 3.00 |
| Fire Protection | | 15.00 |
| Other | | 10.00 |
| Other | $1% X | 10.00 |
| DCA Training Fee | 2 | 0.00 |
| Cert. of Occ. | | |
| Other | Zoning | 11.50 |
| Total | | |
| Check No. | # 1214 | |
| Cash | | |
| Collected By: | | |

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

# BUILDING SUBCODE TECHNICAL SECTION

Date Issued 4/15/96
Control #
Permit # 595-96

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

Block 1149 Lot 4
Work Site Location 133 Vanzile Rd
Pittsburgh, PA
Owner in Fee First Fidelity Bank
Address 123 S. Broad St.
Philadelphia, Pa 19109
Tele. (215) 735-6623
Contractor
Address

Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 231762735 or Social Security No.

**JOB SUMMARY (Office Use Only)**

| PLAN REVIEW | Date | Initial |
|---|---|---|
| [ ] No Plans Req. | | |
| [X] All | 4/16/96 | JC |
| [ ] Footing | | |
| [ ] Foundation | | |
| [ ] Frame | | |
| [ ] Other | | |

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

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

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

**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:** CC
1. New Bldg. $ 4000
2. Alteration $
3. Total (1+2) $ 4000 CC

**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~~ Theresa Fiore
Signature

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

1) INSTALL (1) 6'4"X8'2" PYLON SIGN 50 SF
2) INSTALL (1) SET 18" NON ILLUM LTRS. 18 SF
3) REFACE EXISTING 2'X8' SIGN AT ENTRANCE 16 SF

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Alteration
[ ] Roofing
[ ] Siding
[ ] Fence ____ Height (6' or over)
[ ] Sign 84 Sq. Ft. Total
[ ] Pool
[ ] Asbestos Abatement
[ ] Other
[ ] Other
[ ] Demolition

**(Office Use Only) FEE**

$

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by: DCA TRAINING FEE $
TOTAL FEE $

U.C.C. Form F-110B

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

# FAX TRANSMITTAL

TO: Building Inspector
Brick Twp.
COMPANY

ADDRESS

908-262-8954
FAX NUMBER

FROM: Theresa Freni

SIGN INDUSTRIES
6985 Airport Hwy. Lane
Pennsauken, NJ 08110
Phone: (609)-488-6366
(800)-998-6366
Fax: (609)-488-1782

SUBJECT: 215 St. Hwy 70 & 133 Van Zile Rd.

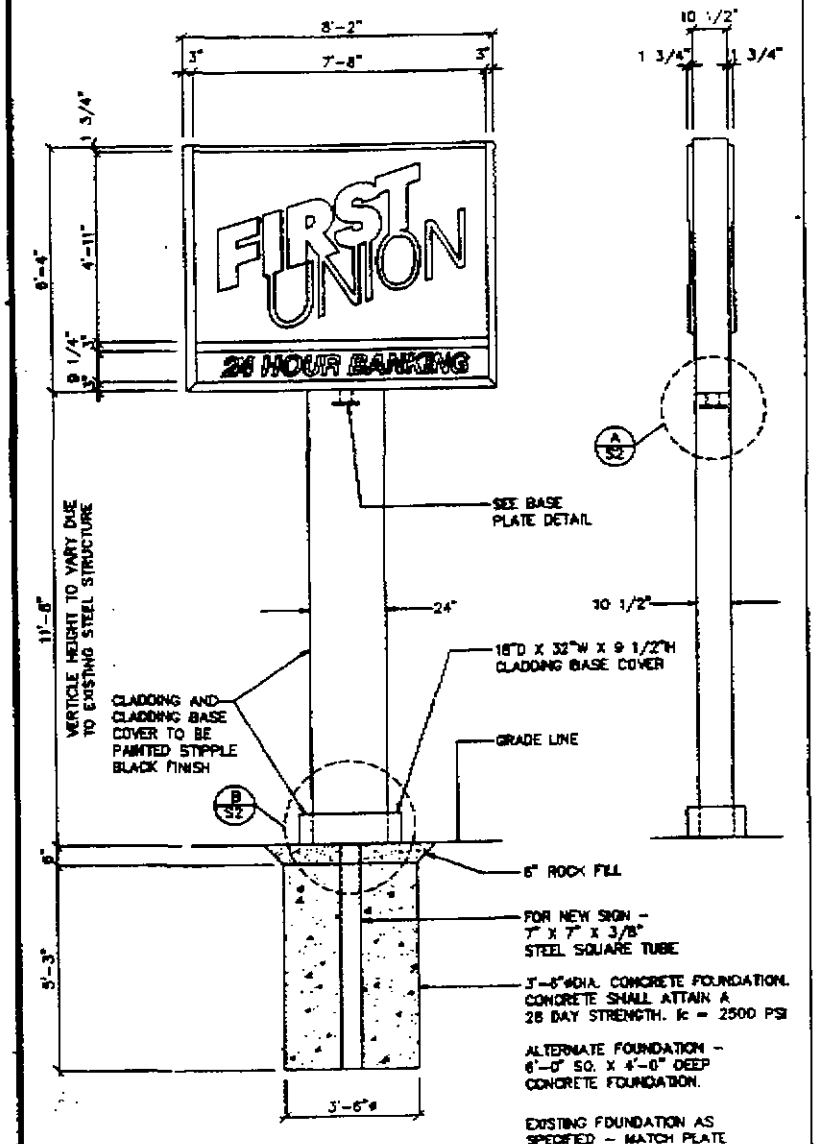
DATE: 3/29

MESSAGE: The attached Fax is in response to rejection of the above permit applications.
If you need additional information, please call or Fax back what is needed.

SIGNATURE

NUMBER OF PAGES, INCLUDING TRANSMITTAL SHEET: 2

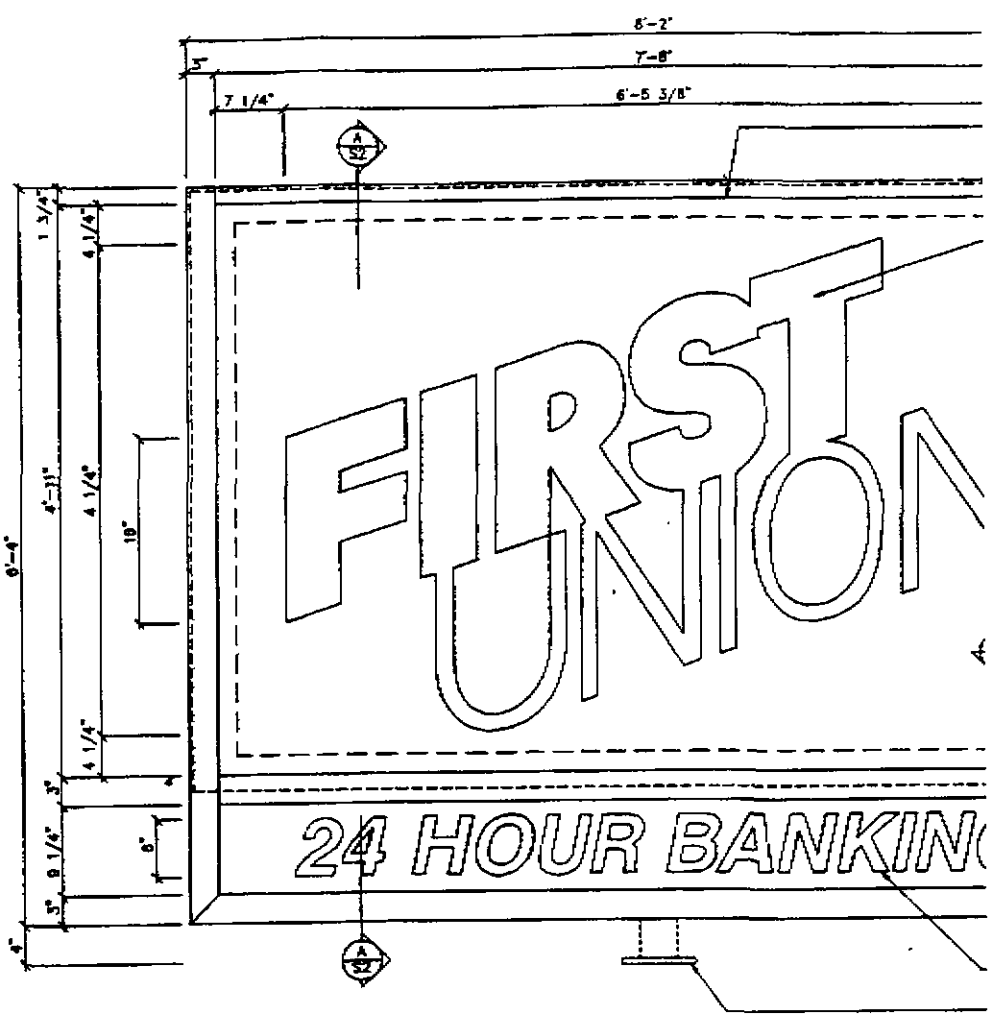
IF NOT RECEIVED COMPLETELY, PLEASE CALL:
(609)-488-6366
(800)-998-6366




CONSTRUCTION

SCALE: 1/4"=1'-0"
REF #

A




SIGN FACE DETAIL

REVISIONS

| No. | DATE: | BY: | DESCRIPTION |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

ACME WILEY CORPORATION
SIGNS AND SYSTEMS

2480 GREENLEAF ELK GROVE, ILLINOIS 60007

PROJECT:

FIRST UNION

SIGN TYPE - P1
D.F. ILLUMINATED PLYON

6'-4" HIGH X 8'-2" WIDE
OVERALL HEIGHT = 18'-0"

TYP. SIGN CONSTRUCTION

Called 3/29/96 TP

# BOCA®
# PLAN REVIEW RECORD

Valuation: _____

Fee: _____

Plan Review # _____

Date _____

**NATIONAL BUILDING CODE**
(All Articles except 24, 28, 29, 30, 31 and 32)

**JURISDICTION** _____
*(City, County, Township, etc.)*

**BUILDING LOCATION** 133 VAN 2, LE
*(Street address)*

**BUILDING DESCRIPTION** _____

**REVIEWED BY** _____

Numerals indicated in parenthesis are applicable code sections of the *1987 BOCA National Building Code.*

CORRECTION LIST

| No. | DESCRIPTION | Code Section |
|---|---|---|
| | No Seal on Plan | |
| | Sign. And Complete | |
| | Drawings. | |
| | | |
| | | |
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**BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.**
**4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60477-5795**

SIGN INDUSTRIES

Retail Sign Systems • Bank Identification Division • Hotel/Casino Division

Building Department
Township Office

To whom it may concern:

As you may have noticed, First Union Bank has bought First Fidelity Bank.

This transaction was very sudden. As a result, we are left with a tight turnaround date.

NW Sign Industries received information from First Union on 2/29/96. We have worked very hard to obtain accurate information for your township.

Please note most replacement signs have the same square footage as the old signs.

It would be greatly appreciated if you could review these locations and give a verbal response immediately.

Also, understand that all signs must be manufactured per you approval.

Thank you for your cooperation,

Theresa Freni

Theresa Freni, Project Manager
NW Sign Industries

TF/sr

6985 Airport Highway Lane, Pennsauken, NJ 08110 • (609) 488-6366 (800) 998-6366 • FAX (609) 488-1782

**First Union National Bank**
123 South Broad Street
Philadelphia, Pennsylvania 19109-1199
215 985-6000

FIRST UNION®

February 27, 1996

Mr. Dennis O'Hara
NW Sign Industries
6985 Airport Highway Lane
Pennsauken, NJ 08110

Dear Mr. O'Hara:

NW Sign Industries is hereby authorized by First Union National Bank, formerly First Fidelity Bank N.A., to act as our agent in obtaining any necessary permits and/or approvals necessary during the current sign conversion program.

This notice of authorization may be copied and distributed to any necessary party in order to effectively act as our agent during the above mentioned program.

If you have any questions or comments, please call Christopher Lindberg at (215) 985-7435. Thank you.

Sincerely,

Thomas Markert
Vice President

cc: C. Lindberg

NW Sign Industries
6985 Airport Highway Lane
Pennsauken, NJ 08110


LOCATION NO. 364

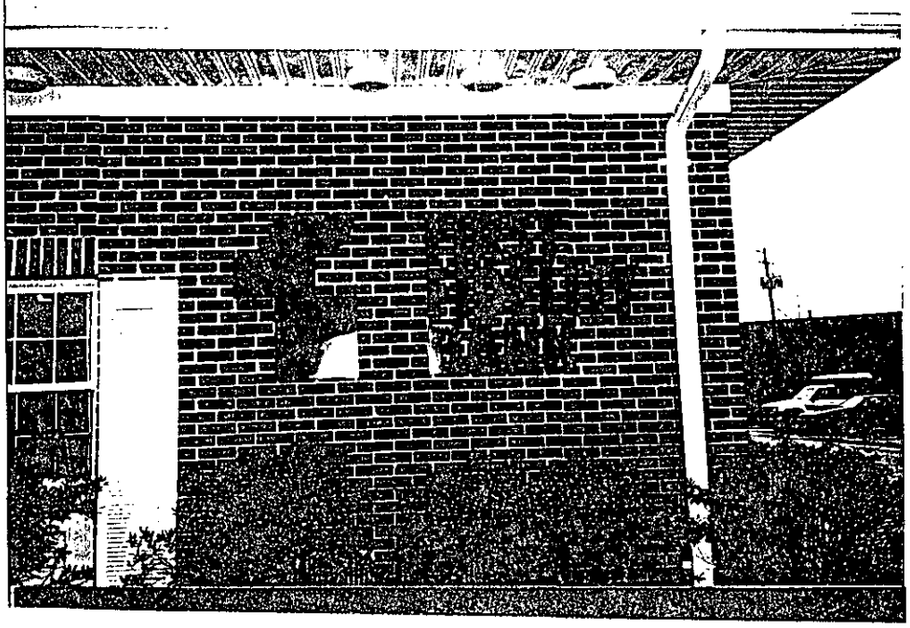
SIGN # 1

CABINET:
Vert Ht. 44 1/4" Horiz Lt. 61"
Depth _____ Retainer Size _____

INDIVIDUAL LETTERS:
Ltr Ht. _____ Ltr Depth _____
Overall Length _____
Transformers - Remote ☐ Self Contained ☐

FREESTANDING SIGNS:
Overall Ht. From Grade 6'-0"
Pipe / Sq Tube Size 3" tube
Deep Bury ☐ Anchor Bolts ☐ A.B. Dia. _____
Base Plate Size _____ X _____ X

ILLUMINATION:
Fluorescent ☐ Neon ☐ Other ☐ None ☒
Face Type _____
* Single Face Sign ☐ * Double Face Sign ☒



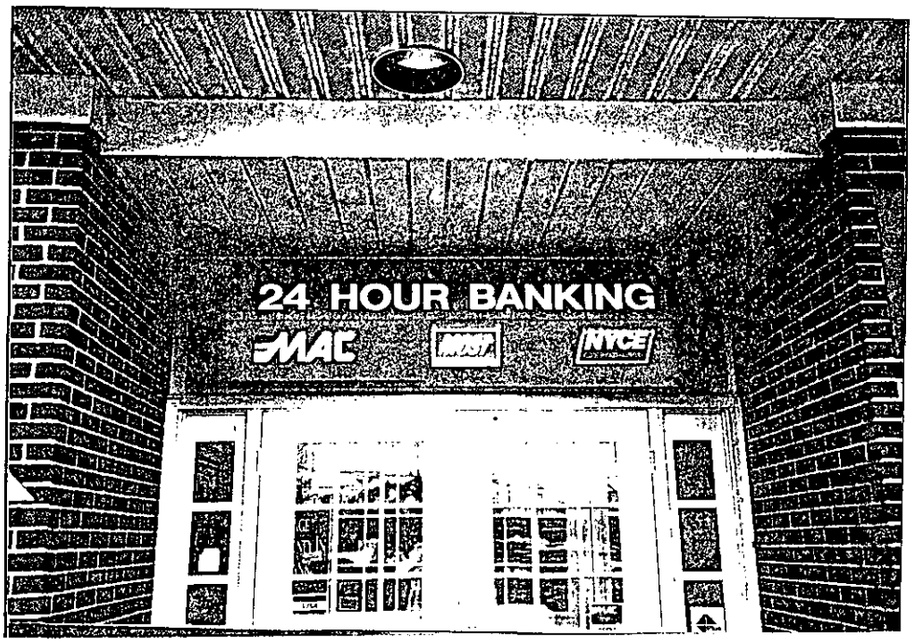
SIGN # 2

CABINET:
Vert Ht. 3' Horiz Lt. 7'
Depth _____ Retainer Size _____

INDIVIDUAL LETTERS:
Ltr Ht. _____ Ltr Depth _____
Overall Length _____
Transformers - Remote ☐ Self Contained ☐

FREESTANDING SIGNS:
Overall Ht. From Grade _____
Pipe / Sq Tube Size _____
Deep Bury ☐ Anchor Bolts ☐ A.B. Dia. _____
Base Plate Size _____ X _____ X _____

ILLUMINATION:
Fluorescent ☐ Neon ☐ Other ☐ None ☒
Face Type _____
* Single Face Sign ☒ * Double Face Sign ☐




LOCATION NO. 364

SIGN # 4 REFACE

CABINET:
Vert Ht. 24 1/8" Horiz Lt. 8'
Depth _____ Retainer Size 7 1/2"

INDIVIDUAL LETTERS:
Ltr Ht. _____ Ltr Depth _____
Overall Length _____
Transformers - Remote ☐ Self Contained ☐

FREESTANDING SIGNS:
Overall Ht. From Grade _____
Pipe / Sq Tube Size _____
Deep Bury ☐ Anchor Bolts ☐ A.B. Dia. _____
Base Plate Size _____ X _____ X _____

ILLUMINATION:
Fluorescent ☒ Neon ☐ Other ☐ None ☐
Face Type _____
* Single Face Sign ☒ * Double Face Sign ☐


LOCATION NO. 364

SIGN # 7

CABINET:
Vert Ht. 24" Horiz Lt. 30"
Depth _____ Retainer Size _____

INDIVIDUAL LETTERS:
Ltr Ht. _____ Ltr Depth _____
Overall Length _____
Transformers - Remote ☐ Self Contained ☐

FREESTANDING SIGNS:
Overall Ht. From Grade 4'-0"
Pipe / Sq Tube Size 2" sq tube
Deep Bury ☐ Anchor Bolts ☐ A.B. Dia. _____