BLOCK 1149 LOT 4 QUALIFICATION CODE C9-49 ADDRESS (SITE) 133 VAN ZILE ROAD PERMIT NO. 98-3898

RECEIVED OCT 0 0 1998

NEW JERSEY UNIFORM CONSTRUCTION CODE

CONSTRUCTION PERMIT APPLICATION

DIV. OF INSPECTION

Application Comprises: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 133 Van Zile Road Brick, NJ
2. Name of Owner in Fee: First Union Tel. (800) 555-3272
   Address 133 Van Zile Road Brick, NJ (street, municipality, zip code)
3. Ownership in Fee: Public ___ Private ___
4. Principal Contractor: East Coast Sign Advertising Tel. (215) 781-8500
   Address 5058 Rt. 13 N Bristol PA 19007
   License No. OR, if new home, Builder Reg. No. ___ Exp. Date ___
   Federal Employee No. 232 180 296 FAX: (215) 781-8400
5. Architect or Engineer Robert Hearty Tel. ( )
   Address Lansdale PA
6. Responsible Person in Charge of Work Chuck McLaughlin
   Tel. (215) 570-1809 FAX ( )

signs

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 50.		
2.	Electrical	55.		
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	9.		
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other ZBA	$15		
13.	TOTAL	$ 109.		

6598

ABBT PRELIMINARY APPROVAL

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~~ (Signs)	50 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 / no		
11. Max. Live Load		
12. Max. Occupancy Load		

II. PROPOSED WORK

II. PROPOSED WORK	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Approval	Resubmission Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition					10-29-98		8/3/99		
4. ☐ Alteration	9500 -		10/9/98						
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☒ Electrical	800 -				11 4 98				
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition	10,300		10/19/98		10/19/98				
TOTAL COSTS									

OPTIONAL (for office use only)

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:

IMPORTANT MANDATORY FEE

LDS BR 10516358

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 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.

(X) Check if contractor.

Agent Name CHUCK McLAUGHLIN

Address 5058 RT. 13 N BRISTOL, PA 19007

Telephone (215) 570-1809

Signature CHUCK McLAUGHLIN

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

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									
☐ 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. _____	_____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

0004 0.00
3898# 0.00
BLOCK 1149 # 0.00
LOT 4 # 50.00
BUILDING 35.00
ELETRIC# 9.00
D.C.A. 15.00
ZONEPLOT 109.00
TOTAL 109.00
CHECK 0.00
CHANGE 14159
11/06/98 NO. 5 0035A005

Date Issued 11/06/98
Control #
Permit # 98-3898

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 1149 Lot 4 Qual

Work Site Location 133 VAN ZILE RD
SIGNS
Owner in Fee FIRST UNION
Address SAME
BRICK, NJ 08724-
Telephone (800)355-3272

Contractor EAST COAST SIGN
Address 5058 RTE 13 N
BRISTOL, PA 19007-
Telephone (215)781-8500
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2180296

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
REMOVE EXISTING SIGNS AND REPLACE WITH NEW

PAYMENTS (Office Use Only)

Building	50
Electrical	35
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	9
Cert. of Occupancy	0
Other ZDA	15
Total	109 — 94
Check No.	6598
Cash	
Collected By	TL

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 $ 10,300

Construction Official — 11/06/98 Date

U.C.C. F170 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 10/09/98
Date Issued 11/16/98
Control # C9-49
Permit # 98-3898

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 Qual
Work Site Location 133 VAN ZILE RD
SIGNS
Owner in Fee FIRST UNION
Address SAME
BRICK, NJ 08724-
Tele.(800)355-3272
Contractor EAST COAST SIGN
Address 5058 RTE 13 N
BRISTOL, PA 19007-
Tele.(215)781-8500 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2180296

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

REMOVE EXISTING SIGNS AND REPLACE WITH NEW

Direct Replacement

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	10-29-98	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
[ ] Elev

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 8-9-99
Approved By:

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

B. BUILDING CHARACTERISTICS

Use Group Present Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 9,500
3. Total (1+2)$ 9,500

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[X] Sign 50 Sq. Ft.	50
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 50
DCA Training Fee	$ 8

U.C.C. F110 (rev. 3/96)

1149 4

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received 11/6/98
Date Issued
Control #
Permit # 98-3898

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 Van Zile Rd Branch NJ
Owner in Fee/Occupant First Union
Address 133 Van Zile Rd Branch NJ
Tele. (800) 355-3272
Contractor SKI ELECTRICAL CONT.
Address P.O. BOX 114 National Park, N.J. 08063
Tele. (609) 848-4070 Fax ( )
Lic. No. 11387
Federal Emp. No. 223875420

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Bank Utility Co.
Est. Cost of Elec. Work $ 800

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[X] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: 11498
Approved by: 645

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

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

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued 11/4/11

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

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 1	
		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	
2		KW Elec. Sign/Outline Light	

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

UCC/PRO F-120 (REV3/96)
Professional Printing
(609) 468-7933

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

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: October 14, 1998 1998 - 1694

Block 1149 Lot 4 Zone B-3, H.D.

Property Address: 133 Van Zile Road

Owner: First Union (Phone): (800) 355-3272

Applicant: Chuck McLaughlin (Phone): (215) 510-1809

Existing Use: Bank.

Proposed Use: Bank.

Proposed Construction (if any): Replace wall signs, directional signs and parking signs.

Conditions: ~~Existing signs to be removed.~~

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Municipal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK

Zoning Permit Application

(Please Type or Print Neatly)

BLOCK 1149 LOT 4

PROPERTY ADDRESS

NAME OF OWNER OWNER'S PHONE ( )

NAME OF APPLICANT

APPLICANTS COMPLETE ADDRESS

APPLICANTS PHONE NUMBER ( ) APPLICANTS BUSINESS NAME

PRESENT USE OF PROPERTY (check one)

- ☐ Vacant Lot
- ☐ Single Family Dwelling
- ☐ Condo or Apartment
- ☑ Commercial (please describe) BANK
- ☐ Other (please describe)

PROPOSED USE OF PROPERTY (check one)

- ☐ Vacant Lot
- ☐ Single Family Dwelling
- ☐ Condo or Apartment
- ☐ Commercial (please describe)
- ☐ Other (please describe)

PROPOSED CONSTRUCTION

All Dimensions 1st 6ft W 3ft L 7ft Illum 1st Illuminated Sign

Deck or Garage ☐ Attached ☐ Detached

Fence Type

2nd 6ft 3ft Illum Directional - 30 x 18 x 1

7ft 1st Illuminated Sign

CHECKLIST:

- ☐ All information completed above
- ☐ Two (2) accurate Survey / Plot Plans containing:
  - ☐ all existing and proposed structures
  - ☐ all dimensions of lot and structures
  - ☐ set backs to all property lines
  - ☐ all streets and waterways shown
- ☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

Clearance sign - 6ft wide 8 cm - 14ft 1/2 cm thick

Parking sign 18 in X 12 in

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

Signature of Applicant Charles McCarron Date 10-6-98

Reviewed by Zoning Officer Date

☐ Approved ☐ Rejected

TOWNSHIP OF BRICK

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

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048
FAX (732) 262-8954 or (732) 920-1456
http://www.twp.brick.nj.us

October 23, 1998

First Union
133 Van Zile Road
Brick, NJ 08724

RE: Mandatory Development Fee
Block 1149, Lot 4; First Union ~ signs

To Whom It May Concern:

The Township of Brick has enacted Ordinance 354-2C-93 in conjunction with our Fair Share Plan, which was certified by the New Jersey Council on Affordable Housing on February 3, 1993.

This Ordinance requires that commercial development applicants pay a fee in the amount of one percent of the assessed value per project. The municipal Tax Assessor has estimated the value of the work to be completed under the construction permit application received on October 6, 1998, for the above block and lot at $6,000.00, resulting in an estimated fee of $60.00.

Therefore, you are required to submit half of the estimated fee ($30.00) in the form of a check made payable to the Township of Brick for deposit into the Affordable Housing Trust Fund. The balance is to be collected prior to issuance of the Certificate of Occupancy.

May I suggest that you contact this office approximately two weeks prior to your request for a C.O. to allow adequate time for the Assessor to conduct a final evaluation of the site.

If you have any questions, please contact me.

Sincerely,

Carol A. Wolfe

Carol A. Wolfe
Affordable Housing Administrator

CAW/da

TOWNSHIP OF BRICK

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

Department of Administration & Finance

Division of Inspections
Joseph Curiazza
Construction Official
(732) 262-1024
Fax (732) 262-8954
http://www.gbshost.com/brick

Date: 10-6-98

Municipal Engineer
401 Chambers Bridge Rd
Brick, N.J. 08723

RE: Block: 1149 Lot: 4

I, Charles McGuire / East Coast Sign of 5058 Rt 13 N, Bristol PA
(name) (address)

request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book, Chapter 190.31, part B. The property (please circle one) is / is not located in a flood zone.

FIRST UNUM
Con/Agent EAST Coast Sign
BRISTOL PA 19007

Respectfully yours,

applicant's signature

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.

2. Proof that the property is not located in a Flood Hazard Area.

Note: Any excavations to be removed from the Township requires a mining permit.

OFFICE USE

Approved X Date: 10/19/98 By:

Rejected Date: _____ By: _____

Remarks: _____

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 1149 LOT 4 SITE ADDRESS 135 Van Zile Rd
TYPE OF SITE Residential / Commercial TYPE OF BUSINESS Sales
Charlene Laughlin 215-540-1904
APPLICANT First Union PHONE NUMBER 908-955-5276
APPLICANT ADDRESS 135 Van Zile Rd CITY & STATE Bkr NJ
PERMIT # NAME OF BUSINESS First Union

INCLUSIONARY DEVELOPMENT

◊ Affordable Fee Required _____ Date _____
Down Payment _____ Date _____
Balance _____ Date _____
Paid In Full _____ Date _____

◊ Market Rate No Fee Required

MANDATORY DEVELOPER FEES

◊ Residential is .005 %
◊ Commercial is .01 %

Estimated Assessment $ 6,000.00 Date 10-2-09
Estimated Required Fee $ 60.00
Required Deposit on Estimate $ 60.00 Date 10-2-09
Check # 6629 Receipt # 16581
Actual Assessment $ _____ Date _____
Actual Required Fee $ _____
Minus Deposit of Estimate $ _____
Balance Due $ _____ Date _____
Check # _____ Receipt # _____
Amount Paid In Full $ _____

Fees Imposed To Date _____
Fees Reached $15,000 _____ Date

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

_____

Carol A. Wolfe
Affordable Housing Administrator

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

TOWNSHIP OF BRICK

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

Joseph C. Scarpelli, Mayor

Township Council:
Michael A. Thulen, President
Stephen C. Acropolis
Martin J. Anton
Victor Cantillo
Helen Fayad
Lee Hartman
Mary Lou Powner

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 10-19-98

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 1149 LOT 4 SITE ADDRESS 133 Van Zile Road
Signs

TYPE OF SITE Commercial (Residential/Commercial) TYPE OF BUSINESS First Union

APPLICANT First Union CITY & STATE Brick NJ

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

$ 6,000

[signature]
Frederick R. Millman, CTA, Tax Assessor

10-22-98
Date

☒ Please review the attached application for a final assessed value for the construction at the above referenced site:

$ 6,000 EE

[signature]
Frederick R. Millman, CTA, Tax Assessor

3/18/99
Date

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK [illegible] LOT 4 SITE ADDRESS [illegible]

TYPE OF SITE Residential / Commercial TYPE OF BUSINESS [illegible]

APPLICANT [illegible] PHONE NUMBER [illegible]

APPLICANT ADDRESS [illegible] CITY & STATE [illegible]

PERMIT # ____ NAME OF BUSINESS [illegible]

INCLUSIONARY DEVELOPMENT

◊ Affordable — Fee Required ____ Date ____

Down Payment ____ Date ____

Balance ____ Date ____

Paid In Full ____ Date ____

◊ Market Rate — No Fee Required

MANDATORY DEVELOPER FEES

◊ Residential is .005 %

◊ Commercial is .01 %

Estimated Assessment $ [illegible] Date [illegible]

Estimated Required Fee $ [illegible]

Required Deposit on Estimate $ [illegible] Date [illegible]

Check # [illegible] Receipt # [illegible]

Actual Assessment $ ____ Date ____

Actual Required Fee $ ____

Minus Deposit of Estimate $ ____

Balance Due $ ____ Date ____

Check # ____ Receipt # ____

Amount Paid In Full $ ____

Fees Imposed To Date ____

Fees Reached $15,000 ____ Date

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

____

Carol A. Wolfe
Affordable Housing Administrator

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

COUNTER FORM
PLEASE PRINT

EXISTING

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: 133 VAN ZILE PLAIN Date Rec'd.:
Block: 1149 Lot: 4 Date Issued:
Owner in Fee: FIRST UNION Control #:
Address: 133 VAN ZILE RD. Permit #:
BRICK
State: NJ Zip: Phone: (800) 385-3372
SS #: Provide only if Applicant is owner

EXISTING

PLUMBING SUBCODE	BUILDING SUBCODE
CONTRACTOR:	CONTRACTOR: EASTCOAST SIGN ADVERTISING
ADDRESS:	ADDRESS: 5058 RT 13 N/ BRISTOL, PA 19007
PHONE:	PHONE: 215-781-8500
LIC #:	LIC #:
LIC. EXPIRATION DATE:	LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):	FEDERAL EMP. # (or S.S. #): 232 180 296
TECHNICAL SITE DATA (LIST ALL FIXTURES)	TECHNICAL SITE DATA
NO. FIXTURE/EQUIPMENT	DESCRIPTION OF WORK:
_____ Water Closet	REMOVE EXISTING SIGNS
_____ Urinal / Bidet	REPLACE WITH NEW
_____ Bath Tub	Clearance sign
_____ Lavatory	Directional sign
_____ Shower	2 1st Union Sign (wall signs)
_____ Floor Drain	
_____ Sink	
_____ Dishwasher	
_____ Drinking Fountain	
_____ Washing Machine	
_____ Hose Bibb	
_____ Gas Piping	
_____ Fuel Oil Piping	
_____ Water Heater	
_____ Steam Boiler	TYPE OF WORK
_____ Hot Water Boiler	☐ New Building
_____ Sewer Pump	☐ Addition ☐ Fence: Height (6' or More)
_____ Interceptor / Separator	☐ Alteration ☒ Sign: 50 Sq. Ft.
_____ Backflow Preventer	☐ Roofing ☐ Pool (In Ground)
_____ Greasetrap	☐ Siding ☐ Pool (Above Ground)
_____ Water Cooled AC or Refrig. Unit	☐ Other: ☐ Asbestos Abatement
_____ Sewer Connection	☐ Other: ☐ Demolition
_____ Septic (Disposal System) Closure	BUILDING CHARACTERISTICS
_____ Water Service Connection	USE GROUP Present: Proposed:
_____ Gas Service Connection	CONSTR. CLASS Present: Proposed:
_____ Active Solar System	No. of Stories:
_____ Vent Through Roof	Height of Structure:
_____ Other	Area - Largest Floor:
	New Building Area / All Floors:
Estimated Cost of Plumbing Work: $	Volume of Structure: Total Land Disturbed:
Signature:	Signature:
Owner ☐ Contractor ☐	
SUBCODE APPROVAL:	Estimated Cost of Building Work: 9,500.00
PLANS: Required ☐ Approved ☐	New Building (1): $
Approved by:	Aleration (2): $
Date:	TOTAL (1+2): $
CONTRACTOR AFFIX SEAL:	SUBCODE APPROVAL:
	PLANS: Required ☐ Approved ☐
	Approved by:
	Date:

COUNTER FORM

PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	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 w/UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range / Receptacle	KW
KW Oven / Surface Unit	KW
KW Elec. Water Heater	KW
KW Elec. Dryer / Receptacle	KW
KW Dishwasher	KW
HP Garbage Disposal	HP
KW Central A/C Unit	KW
HP/KW Space Heater/Air Handler	HP/KW
KW Baseboard Heat	KW
HP Motors 1/+ HP	HP
KW Transformer/Generator	KW
AMP Service	AMP
AMP Subpanels	AMP
AMP Motor Control Center	AMP
AMP Elec. Sign/Outline Light	KW
Other	
Other	
Other	
Other	

Estimated Cost of Electrical Work: $
Signature (print name):
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE PROTECTION SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source		
Method of Valve Supervision		
Local Alarm Supervision		
Central Supervsion		
Proprietary Supervision		
Flammable Liquip Storage Tanks	Capacity:	Fuel:
Combustable Liquid Storage Tanks	Capacity:	Fuel:
L.G.P. Storage Tanks	Capacity:	Fuel:

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust Systems	
Pre-Engineered Systems	
Co2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance	
Other	
Other	

Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

EAST COAST SIGN ADVERTISING CO., INC.
PERMIT ACCOUNT
5058 ROUTE 13 NORTH AT PA TURNPIKE
BRISTOL, PA 19007

6629

Oct 23 1998

3-50/310
96241

PAY TO THE ORDER OF Township of Brick $ 30.00/100

Thirty and 00/100 DOLLARS

FIRST UNION First Union National Bank
Huntingdon Valley, PA

FOR JOB 7112 PARTIAL PAYMENT AFFORDABLE HOUSING ~~Township~~ OCEAN

W. Wolfe MP

[redacted]

To: Scott M. Pezarras, Chief Financial Officer
From: Carol A. Wolfe, Affordable Housing Administrator
Re: Affordable Housing Fees

Date: 10-26-98

Business/Development: First Union

Owner/Applicant: East Coast Sign Advertising Co., Inc.

Property Address: 133 Van Zile Rd

Block: 1149 Lot: 4

DEPOSIT RECEIVED

Mandatory Development Fee
(Commercial)
Residential
Inclusionary Development Fee

Check Number 6629

Estimated Fee $ 60.00

Deposit Amount $ 30.00

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number _____

Final Fee $ _____

Less Deposit $ _____

Final Payment $ _____

FOR DEPOSIT ONLY - AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance
354-2C-93, is pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C. 5:92-18 et seq.

Received in Treasurer's Office by:

Signature

10-26-98
Date

FIRST UNION

First Union Corporation
P. O. Box 45032 Jacksonville FL 32232
86-21L
630

CHECK NO. 101615260

Center for Disbursements Processing
Telephone 1-904-361-7243 or 361 PAID

VENDOR	DATE	CHECK AMOUNT
0086779	04/21/99	$30.00

VOID AFTER 360 DAYS

PAY Thirty and 00/100 Dollars

PAY TO THE ORDER OF
TOWNSHIP OF BRICK
AFFORDABLE HOUSING ADMIN
401 CHAMBERS BRIDGE RD
BRICK NJ 08723

James H Hatch
SENIOR VICE PRESIDENT

[redacted]

Date 4-29 99

Business/Development First Union

Owner/Applicant First Union

Property Address 133 Van Zile Rd

Block 1149 Lot 4

DEPOSIT RECEIVED

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number _____

Estimated Fee $ _____

Deposit Amount $_____

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee
(Commercial)
Residential
Inclusionary Development Fee

Check Number 101615260

Final Fee $ 60 00

Less Deposit $ 30 00

Final Payment $ 30 00

FOR DEPOSIT ONLY AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance
354 2C 93 is pursuant to N J S A 52 27D 301 et seq And N J A C 5 92 18 et seq

Received In Treasurer s Office by

Signature

4-29-99
Date