

BLOCK 383.40

LOT

1-4

ADDRESS (SITE)

Brick BLVD & Lakeshore Way

PERMIT NO.

TRUSS. CERTIFICATION Required
638-92 4/31/92

RECEIVED

FEB 24 1992

CONSTRUCTION PERMIT
APPLICATIONDIVISION OF INSPECTION
Sections I, II, III (optional), IV, VI and VII

I. IDENTIFICATION

1. Proposed Work-site at: Brick Blvd and Lakeshore Way
2. Name of Owner in Fee: Ramesh Pandya Tel. (908), 270-5414
Address 829 Oceanview Drive, Toms River, N.J. 08753
street municipality zip code
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Associated Cons. Services Inc. Tel. (615), 968-7822
Address 100 5th Street, Suite 2W, Bristol, TN 37620
- License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Emp. No. 48-0799063 Social Security No. _____
5. Architect or Engineer William D. Price Tel. (615), 323-4433
Address 232 Cherry Street, Blountville, TN 37617
6. Responsible Person In Charge of Work William H. Thompson Tel. (615), 968-7822

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>737-</u>		
2. Electrical			
3. Plumbing	<u>445-</u>		
4. Fire Protection	<u>178-</u>		
5. Other			
6. Subtotal	\$ <u>1360-</u>		
7. Less 20% for State Plan Review	<u>136-</u>		
8. Subtotal	\$		
9. DCA Training Fee	<u>131-</u>		
10. Subtotal	\$		
11. Cert. of Occupancy	<u>204-</u>		
12. Other			
13. TOTAL	\$ <u>1831-</u>		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories One
2. Height of Structure 22 ft.
3. Area—Largest Floor 3814 sq. ft.
4. Building Area—All Floors 3814 sq. ft.
5. Volume of Structure 81916 cu. ft.
6. Construction Classification _____
7. Total Land Area Disturbed 67,500 sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____ sq. ft.
no _____
11. Fire Grading _____
12. Max. Live Load _____
13. Max. Occupancy Load _____

II. PROPOSED WORK

1. ☐ Minor Work (single trade)
2. ☐ Small Job (\$5,000 and no prior approvals)
3. ☒ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☐ Fire Protection
7. ☒ Plumbing
8. ☒ Electrical
9. ☐ Asbestos Abatement
10. ☐ Demolition

Est. Cost

250,000

16,000

22,000

TOTAL COSTS

288,000

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
wp	2/24/92		3/12/92	RL			
			3/26/92	RL			
			3/29/92	RL	6/26/92		JAH
			3/13/92	RL	6/25/92		BK

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
6. ☐ Hazardous Uses/Places of Assembly
7. ☒ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

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:
Pizza Hut Restaurant
2. Use Group: A-3
3. Change in Use Group:
Indicate _____

LDS BR 10407617

20K

DR

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 William H. Thompson

Address 100 Fifth Street, Suite 2W
Bristol, TN 37620

Telephone (615) 968-7822

Signature _____ Date _____

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	
☒ Planning Board	Site Plan	12/11/91							
☐ 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 Protection									
☐ Utility Dig No.									
☒ Other zoning	SK	2/28/92	Pizza hut						
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition _____

Name of Code & Edition _____

Building _____

Electrical _____

Plumbing _____

Fire Protection _____

Mechanical _____

Energy _____

Barrier Free _____

Flood Hazard _____

As Built Elevation Cert. _____

Other _____

X. CERTIFICATES ISSUED (office use only)

☒ Temporary Certificate of Occupancy

No. 638

☐ Temporary Certificate of Occupancy

No. 630-92

☐ Continued Certificate of Occupancy

No. 638

☒ Certificate of Occupancy

No. 7-10-92

☐ Certificate of Approval

No. _____

☐ None

DATE EXPIRED 7-14-92



CERTIFICATE

Date Issued 7-10-92
Control #
Permit # 638-92

IDENTIFICATION

Block 383.40 Lot 1-4
Work Site Location Brick Blvd. and Lakeshore Way
Owner in Fee Ramesh Pandya
Address 829 Oceanview Dr.
Toms River, NJ 08753
Tele. ()
Contractor Associated Construction Services, Inc.
Address 100-5th Street, Suite 2W
Bristol, Tenn. 37620
Tele. ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group A-3 2 hours
Maximum Live Load
Description of Work/Use:

Pizza Hut Restaurant

Type of Warranty Plan: [] State [] Private
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☒ CERTIFICATE OF OCCUPANCY

☐ 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.

☐ 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 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:

Fee \$
Paid [] Check No.
Collected by:

CONSTRUCTION OFFICIAL

Arthur J. Perry



CERTIFICATE

Date Issued 6-30-92
Control #
Permit # 638-92

IDENTIFICATION

Block 383.40 Lot 1-4
Work Site Location Brick Blvd. and Lakeshore Way
Owner in Fee Ramesh Pandya
Address 829 Oceanview Dr.
Toms River, NJ 08753
Tele. ()
Contractor Associated Construction Services, Inc.
Address 100-5th Street, Suite 2W
Bristol, Tenn. 37620
Tele. ()
Lic. No. or Bldgs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group A-3 2 hours
Maximum Live Load
Description of Work/Use:

PIZZA HUT Restaurant

Type of Warranty Plan: [] State [] Private
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ CERTIFICATE OF OCCUPANCY

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.

☐ CERTIFICATE OF APPROVAL

☐ 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.

XXXX ☒ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than July 14, 19 92 or the owner will be subject to a fine or order to vacate: Pending compliance with Ocean County Soil District.

Fee \$
Paid [] Check No.
Collected by:

CONSTRUCTION OFFICIAL

Arthur J. Caruso



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

4/16/92

638-92

IDENTIFICATION Block 383.40 Lot 1-4Work Site Location Bruck BlvdContractor Associated Const. Serv.

Owner in Fee

Address

Address

Tele. ()

Tele. ()

Lic. No. or Bldrs. Reg. No.

Exp. Date

Federal Emp. No.

67044

or Social Security No.

BLOCK

0.00

is hereby granted permission to perform the following work:

[☒] BUILDING [☐] PLUMBING [☐] OTHER
[☐] ELECTRICAL [☒] FIRE PROTECTION

DESCRIPTION OF WORK:

New Com'l Bldg(81,916)

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 \$

288,000

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)		383 #
Building	<u>237</u> LOT	0.00
Plumbing	<u>445</u> 1 #	
Electrical	BUILDING	737.00
Fire Protection	PLUMBING	445.00
Other	<u>178</u> FIRE	178.00
Other	PLAN RWV	136.00
DCA Training Fee	<u>131</u> P.E.A.	131.00
Cert. of Occ.	<u>204</u> D	204.00
Other	TOTAL	1831.00
Total	<u>1831</u> CHECK	1831.00
Check No.	<u># 10</u> CRANCE	0.00
Cash		
Collected By	<u>84117693</u> NOV 5	0034A005

11:32

WILL CALL



Date Received
Date Issued
Control #
Permit #

FEB 26 92 002939

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

Block 383.40 Lot 143
Work Site Location BEICK BUDGET LAKESHORE WDC
Owner in Fee RAMESH
Address 829 CEDARVIEW DRIVE
TOMS RIVER, NJ 08753
Tele. (908) 270-5414
Contractor SHUELY ELECTRICAL CO., INC.
Address P.O. Box 745
ROCKY MOUNT, VA 24151
Tele. (703) 483-7131
Lic. No. 7577
Federal Emp. No. 54-1109167 or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

☐ Reinspection ☐ Resale ☐ Meter Set
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 16,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)
☐ No Plans Required	Type:	Failure Failure Approval Initial
Joint Plan Review Required:	Rough	<u>5-26-92</u> <u>5-27-92</u> <u>5-28-92</u>
☐ Bldg. ☐ Plumb. ☐ Fire	Temporary	<u>6-16-92</u> <u>6-17-92</u> <u>6-18-92</u>
☐ Elec. Plans Approved	Const. Serv.	<u>6-23-92</u> <u>6-24-92</u> <u>6-25-92</u>
Date: _____	Other	<u>5-1-92</u> <u>5-2-92</u> <u>5-3-92</u>
Approved by: _____	Service	<u>6-23-92</u> <u>6-24-92</u> <u>6-25-92</u>
SUBCODE APPROVAL:	Final	<u>6-23-92</u> <u>6-24-92</u> <u>6-25-92</u>
☐ CO ☐ CCO ☐ CA	Temp. Cut-in-Card Date Issued	<u>6-11-92</u> <u>6-12-92</u> <u>6-13-92</u>
Date: <u>6-25-92</u>	Final Cut-in-Card Date Issued	<u>6-25-92</u> <u>6-26-92</u> <u>6-27-92</u>
Approved by: <u>B. Carter</u>	Line Dept.	<u>P.P.</u>

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of
record and am authorized to make this application,
and perform the work listed on this application.
Richard L. Sherry
[☒ Licensed Electrical Contractor] [☐ Exempt Applicant] Signature-Contractor Seal

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
<u>62</u>		Fixtures (1)	
<u>31</u>		Receptacles (2)	
<u>11</u>		Switches (3)	
<u>94</u>		Total 1 + 2 + 3	<u>52-</u>
		Range	<u>4-</u>
		Oven(s)	<u>8-</u>
		Surface Unit	
		Dishwasher	
		Garbage Disposal	
		Dryer	
		A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
		Whirlpool/spa	
		Pool Bonding	
		Pool Filter Motor	
		Pool Lights	
		Water Heater(s)	
		Central heat:	
		oil, gas or elec.	
		Baseboard Heat Units	
		Thermostats	
		Heat Pump	
		Pump(s)	
		Motor Control Center/Sub Panels	
		Signs	
		Light Standards	
		Motors—Fractional H.P.	
		Motors—All Others	
		Transformers	
		Generators	
		Service Entrance	
		Other	

Administrative Surcharge \$ _____
Paid ☐ Check # 1095 Minimum Fee \$ _____
Collected by: _____ TOTAL FEE \$ 92.-

PIZZA HUT



Date Received
Date Issued
Control #
Permit #

4/16/92
638-92

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

Block 383.40 Lot 1-4
Work Site Location BECK BLVD & LAKE SHORE WAY
Owner in Fee RAMSEY PANAYA
Address 829 OCEANVIEW DR.
TOMS RIVER, NJ 08753
Tele. (908) 270-5414
Contractor ASSOCIATED CONST. SERVICES
Address 100 FIFTH ST. SUITE 2W
BRISTOL, TN 37620
Tele. (615) 968-7822
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. 48-0799063 or Social Security No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Failure	Approval	Initial
☒ No Plans Req.	<u>3/14/92</u>	<u>[Signature]</u>	<u>Foundation</u>			<u>4/16/92</u>	<u>[Signature]</u>
☐ All			<u>Footings</u>			<u>4/16/92</u>	<u>[Signature]</u>
☐ Footing			<u>Foundation</u>			<u>4/16/92</u>	<u>[Signature]</u>
☐ Foundation			<u>Slab</u>			<u>4/16/92</u>	<u>[Signature]</u>
☐ Frame			<u>Frame</u>			<u>4/16/92</u>	<u>[Signature]</u>
☐ Other			<u>Insulation</u>			<u>4/16/92</u>	<u>[Signature]</u>
Joint Plan Review Required:			Finishes:				
☐ Elec. ☐ Plumb. ☐ Fire			Energy				
SUBCODE APPROVAL			Mechanical				
<u>1100</u> <u>1</u> <u>6930</u> <u>CA</u> <u>92</u>			TCO				
Date: <u>6/9/92</u>			Other				
Approved By: <u>[Signature]</u>			Final				

B. BUILDING CHARACTERISTICS

Use Group Present N/A Proposed RESTAURANT
Constr. Class Present N/A Proposed _____
No. of Stories ONE
Height of Structure 22 Ft.
Area—Largest Floor 3,814 Sq. Ft.
Total Bldg. Area/All Floors 3,814 Sq. Ft.
Volume of Structure 81,916 Cu. Ft.
Total Land Area Disturbed 45,000 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$ 288,000
2. Alteration \$ _____
3. Total (1+2) \$ _____

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
(See Plans)

TYPE OF WORK:

- ☒ New Building
- ☐ Addition
- ☐ Alteration
- ☐ Roofing
- ☐ Siding
- ☐ Other _____
- ☐ Demolition
- ☐ Miscellaneous
- ☐ Fence _____ Height _____
- ☐ Sign _____ Sq. Ft. _____
- ☐ Pool _____
- ☐ Elevator _____
- ☐ Asbestos Abatement _____
- ☐ Other _____

(Office Use Only)

FEE

Paid ☐ Check # _____	Administrative Surcharge \$ _____
Collected by: _____	Minimum Fee \$ _____
	TOTAL FEE \$ _____



Date Received
Date Issued
Control #
Permit #

4/16/92

638482

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

Block 383.40 Lot 1 ± 4
Work Site Location BRICK BLVD & LARGE SHOREWAY
Owner in Fee RAMSESH PANDYA
Address 829 DEANVIEW DR.
Telephone (908) 270-5414
Contractor ASSOCIATED CONST. SERVICES
Address 100 FIFTH ST. SUITE 2W
Bristol, TN 37620
Telephone (615) 968-7822
Lic. No. or Bids. Reg. No. _____
Federal Emp. No. 48-0799063 or Social Security No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Failure	Approval	Initial
☒ No Plans Req.	3/12/92						
☐ All			Footings				
☐ Footing			Foundation				
☐ Foundation			Slab				
☐ Frame			Frame				
☐ Other			Insulation				
Joint Plan Review Required:			Finishes:				
☐ Elec. ☐ Plumb. ☐ Fire			Energy				
SUBCODE APPROVAL			Mechanical				
☐ CO ☐ CCO ☐ CA			TCO				
Date:			Other				
Approved By:			Final				

B. BUILDING CHARACTERISTICS

Use Group Present N/A Proposed RESTAURANT
Const. Class Present N/A Proposed _____
No. of Stories ONE
Height of Structure 22 Ft.
Area—Largest Floor 3,814 Sq. Ft.
Total Bldg. Area/All Floors 3,814 Sq. Ft.
Volume of Structure 81,916 Cu. Ft.
Total Land Area Disturbed 45,000 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$ 288,000
2. Alteration \$ _____
3. Total (1+2) \$ _____

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 Ramsesh Pandya

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK
(SEE PLANS)

(Office Use Only)

TYPE OF WORK:		(Office Use Only)
☒ New Building		\$ _____
☐ Addition		\$ _____
☐ Alteration		\$ _____
☐ Roofing		\$ _____
☐ Siding		\$ _____
☐ Other		\$ _____
☐ Demolition		\$ _____
☐ Miscellaneous		\$ _____
☐ Fence	Height	\$ _____
☐ Sign	Sq. Ft.	\$ _____
☐ Pool		\$ _____
☐ Elevator		\$ _____
☐ Asbestos Abatement		\$ _____
☐ Other		\$ _____

Administrative Surcharge \$ _____
Paid ☐ Check # _____ Minimum Fee \$ _____
Collected by: _____ TOTAL FEE \$ _____

Plumbing



Date Received
Date Issued
Control #
Permit #

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

Block 383-40 Lot 143
Work Site Location BRICK BLVD & LAKESHORE AVE
Owner in Fee RAMESH PANDYA
Address 829 QUEENVIEW DRIVE
TOMS RIVER, NJ 08753
Tel. (908) 210-5414
Contractor EDWARDS PLUMBING & HEATING CO.
Address 105 BELL AVE / 1405-14
RAE172AD D5 08869
Tele. (708) 704-1144
Lic. No. #889.5
Federal Emp. No. 22-3132594 or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present 411 Proposed NECO
Building Sewer Size 4 1/2"
Water Service Size 1 1/2"
Estimated Cost of Plumbing Work \$ 16,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS:	
		Type:	Dates (Month/Day)
☐ No Plans Required		Slab	Failure Approval Initial
Joint Plan Review Required:		Rough	5/19
☐ Bldg. ☐ Elec. ☐ Fire		Water	5/29/92
☐ Plumb. Plans Approved		Sewer	5/29/92
Date: <u>3/19/92</u>		Fixtures	5/29/92
Approved by: <u>[Signature]</u>		Gas Equipment	5/29/92
		Solar	
		Gas Final	
		TCO	
SUBCODE APPROVAL:			
☒ CO ☐ CCO ☐ CA			
Approved by: <u>6-26-92</u>			
Date: <u>6/26</u>			

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.

[Signature]
Signature-Contractor Seal

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIGURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	15-
1	Urinal/Bidet	5
4	Bath Tub	20.
1	Lavatory	
1	Shower	
1	Floor Drain	
1	Sink	35.
1	Dishwasher	5
1	Drinking Fountain	
1	Washing Machine	
1	Hose Bibb	10.
1	Gas Piping	26.
1	Fuel Oil Piping	5
1	Water Heater - 150	
1	Steam Boiler - 200	45.
1	Hot Water Boiler	
1	Sewer Pump	50
1	Interceptor/Separator	50
1	Backflow Preventer	50.
1	Greasetrap	40.
1	Water Cooled A/C	
1	or Refrigeration Unit	
1	Sewer Connection	
1	Water Service Connection	10.
1	Gas Service Connection	
1	Active Solar System	
1	Other	

Administrative Surcharge \$ 445-
Paid ☐ Check # _____ Minimum Fee \$ _____
Collected by: _____ TOTAL \$ 335-



PLUMBING
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

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

Block 383-440 Lot 143
Work Site Location BRICK BLVD & LAKESHORE WAY
Owner in Fee RAMESH PRADYA
Address 829 OCEANVIEW DRIVE
TOWNS RIVER NJ 08753
Tele. (908) 210-5414
Contractor ANJANAS PLUMBING & HEATING, INC.
Address 105 RAIL AVE
RAILROAD DS CRSG
Tele. (908) 704-1144
Lic. No. 8895
Federal Emp. No. 32-3132594 or Social Security No. _____

B. PLUMBING CHARACTERISTICS

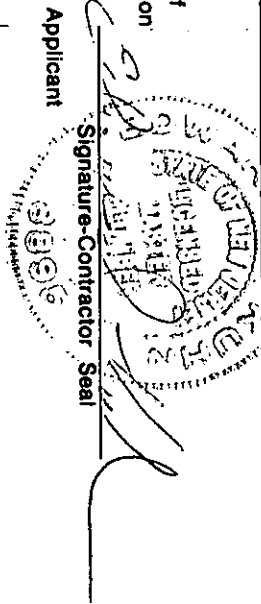
Use Group Present 4" Proposed None
Building Sewer Size 1 1/2"
Water Service Size _____
Estimated Cost of Plumbing Work \$ 16,000.00

JOB SUMMARY (Office Use Only)	
PLAN REVIEW:	INSPECTIONS:
	Type: Failure Failure Approval Initial
☐ No Plans Required	Slab _____
Joint Plan Review Required:	Rough _____
☐ Bldg. ☐ Elec. ☐ Fire	Water _____
☐ Plumb. Plans Approved	Sewer _____
Date: <u>3/19/92</u>	Fixtures _____
Approved by: <u>AR</u>	Gas Equipment _____
SUBCODE APPROVAL:	Gas Final _____
☐ CO ☐ CCO ☐ CA	Solar _____
Approved by: _____	TCO _____
Date: _____	_____

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.

☒ Licensed Plumbing Contractor ☐ Exempt Applicant



D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIGURE/EQUIPMENT	FEE (Office Use Only)
3	Water Closet	15-
1	Urinal/Bidet	5
4	Bath Tub	20.
1	Lavatory	
1	Shower	
1	Floor Drain	50.
1	Sink	25.
1	Dishwasher	5
1	Drinking Fountain	
1	Washing Machine	10.
1	Hose Bibb	20.
1	Gas Piping	5
1	Fuel Oil Piping	
1	Water Heater	45.
1	Steam Boiler	
1	Hot-Water Boiler	
1	Sewer Pump	
1	Interceptor/Separator	50.
1	Backflow Preventer	50.
1	Greasetrap	45.
1	Water Cooled A/C or Refrigeration Unit	
1	Sewer Connection	10.-
1	Water Service Connection	
1	Gas Service Connection	
1	Active Solar System	
1	Other	
Administrative Surcharge		\$ 445-
Paid ☐ Check # _____ Minimum Fee		\$
Collected by: _____ TOTAL		\$ 365.



FIRE PROTECTION SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

4/16/92
638-92

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

Block 383.40 tot 1-4
Work Site Location BRICE BLVD. & LAKE SHORE WAY
Owner in Fee RAMESH PANDYA
Address 829 OCEANVIEW DR. NJ 08753
Tele. (908) 270-5414
Contractor ASSOCIATED CONST. SERVICES
Address 100 FIFTH ST. SUITE 2W
Tele. (615) 968-7822
Lic. No. 48-0799063 or Social Security No.
Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present N/A Proposed RESTAURANT
Constr. Class. Present Proposed
Heating Systems X New Existing
Type: X Gas Oil Electrical Solar
Location: Roof Unit
Total Est. Cost of Fire Prot. Work \$ -0-

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)
	Type:	Failure Failure Approval Initial
☐ No Plans Required	Suppression Test	
☐ Bldg. ☐ Plumb. ☐ Elec.	Fire Alarm Test	
☒ Fire Plans Approved	Smoke Test	
Date: <u>3/26/92</u>	Mechanical	
Approved by: <u>[Signature]</u>	TCO	
SUBCODE APPROVAL:	Other <u>Lead</u>	
☒ CO ☒ VSCO ☒ CA	Other <u>Lead</u>	
Date: <u>6/30/92</u>	Other <u>Lead</u>	
Approved by: <u>[Signature]</u>	Other <u>Lead</u>	

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.

Ramesh Pandya
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work New Bld

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks
Combustible Liquid Storage Tanks
L.P.G. Storage Tanks
L.N.G. Storage Tanks

Wet Sprinkler Heads
Dry Sprinkler Heads

TOTAL
3
TOTAL
3

Kitchen Hood Exhaust Systems
Pre-Engineered Systems
CO₂ Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas or Oil Fired Appliance
OTHER Lead

Paid ☐ Check # Minimum Fee \$
Collected by TOTAL FEE \$ 78-

FEE (Office Use Only)

30-

ENCLOSURE
DUPLICATE

25-
73-



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

4/16/92
638-92

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

Block 383.40 Lot 1-4
Work Site Location BRICE BLVD. & LAKE SHORE WAY

Owner in Fee RAMESH PANDYA
Address 919 OCEANVIEW DR. D8753
Tele. (908) 270-5414
Contractor ASSOCIATED CONST. SERVICES
Address 100 FIFTH ST. SUITE 2W
Tele. (615) 968-7812
Lic. No. BA15PL TN 37620
Federal Emp. No. 448-0799063 or Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present N/A Proposed RESTAURANT A-3
Constr. Class. Present _____ Proposed _____
Heating Systems ☒ New ☐ Existing
Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar
Location: Roof Unit
Total Est. Cost of Fire Prot. Work \$ -0- [] Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)
[] No Plans Required	Type:	Failure Failure Approval Initial
Joint Plan Review Required:		
[] Bldg. [] Plumb. [] Elec.	Suppression Test	
☒ Fire Plans Approved	Fire Alarm Test	
Date: <u>3/26/92</u>	Smoke Test	
Approved by: <u>[Signature]</u>	Mechanical	
SUBCODE APPROVAL:	TCO	
[] CO [] CCO [] CA	Other	
Date: _____	Other	
Approved by: _____	Other	

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.

Ramesh Pandya
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work New Bld

Water Supply Source	_____
Method of Valve Supervision	_____
Local Alarm Supervision	_____
Central Supervision	_____
Proprietary Supervision	_____
Flammable Liquid Storage Tanks	() Capacity _____ Fuel _____
Combustible Liquid Storage Tanks	() Capacity _____ Fuel _____
L.P.G. Storage Tanks	() Capacity _____ Fuel _____
L.N.G. Storage Tanks	() Capacity _____ Fuel _____

Number

FEE (Office Use Only)

Wet Sprinkler Heads	_____
Dry Sprinkler Heads	_____
TOTAL	_____
Heat Detectors	_____
Smoke Detectors	_____
Heat Detectors	_____
TOTAL	_____
Emergency Exit Lighting	_____
Stand Pipes	_____
Kitchen Hood Exhaust Systems	_____
Pre-Engineered Systems	_____
CO ₂ Suppression	_____
Halon Suppression	_____
Foam Suppression	_____
Dry Chemical	_____
Wet Chemical	_____
Gas or Oil Filled Appliance	_____
OTHER	_____
Paid [] Check # _____	Minimum Fee \$ _____
Collected by _____	TOTAL FEE \$ <u>178-</u>

**THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY**

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
458-7000

CERTIFICATE OF COMPLIANCE

Date.....June..29.....1992.....

NAME.....Ramesh J. Pandya.....

ADDRESS.....820 Oceanview Drive, Toms River, NJ.....

PROPERTY LOCATION.....320 Brick Blvd.....

Account No..H821612..... Block...838-40. Lot.....1-4.....

I hereby certify that the above applicant has complied with all Rules
and Regulations of this Authority and has paid all required fees and charges.

For the Authority.....*Marilyn Schoof*.....

SEWER WILL BE RE-EVALUTED IN 1 YEAR



OCEAN COUNTY HEALTH DEPARTMENT

No: _____

NEW ESTABLISHMENT SANITARY INSPECTION REPORT

Block 383.4 LOT 1-3 ESTABLISHMENT INFORMATION

PHONE # 270-5414 (TEMP.)	ESTABLISHMENT CODE 26	GOODS ☐ DESTROYED ☐ EMBARGOED
-----------------------------	--------------------------	---

ESTABLISHMENT TRADING NAME PIZZA HUT	EVALUATION
---	------------

NUMBER AND STREET BRICK BLVD + LAKE SHORE DR	☒ SATISFACTORY
CITY OR MUNICIPALITY BRICK	☐ CONDITIONALLY SATISFACTORY
ZIP CODE 08723	☐ UNSATISFACTORY

ESTABLISHMENT LICENSE NO.	COMMUN. CODE 1506	RISK II	WATER SUPPLY ☒ Public - Community ☐ Individual (Public - Non-Community)
---------------------------	----------------------	------------	--

OWNER INFORMATION (Complete this section only if different from establishment information)	TIME (2400 HOURS)		
NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT RAY PANDYA	DATE 3-5-92	BEGIN 08:25	END 09:00
NUMBER AND STREET 829 OCEANVIEW DR			

CITY OR MUNICIPALITY TOMS RIVER	STATE NJ	COMPLAINT NO. _____
ZIP CODE 08753	COMMUN. CODE 1507	COMPLAINT REC. _____
		COMPLAINT INSPECTED _____

INSPECTION TYPE ☐ COMPLAINT ☐ INITIAL INSPECTION ☐ REINSPECTION ☒ PLAN REVIEW ☐ CONFERENCE	TYPE OF ESTABLISHMENT ☒ RETAIL ☐ WHOLESALE ☐ VENDING MACHINE NO. OF MACHINES ☐ FROZEN DESSERTS ☐ OTHER	Mr. Charles Kauffman Health Officer Sunset Avenue C.N. 2191 Toms River, N.J 08754 Telephone No. 201-341-9700
		NAME OF INSPECTING OFFICIAL (Print) Joseph A. Caprio
		SIGNATURE OF INSPECTING OFFICIAL Joseph A. Caprio
		PERMANENT REG. NO. B-375

DETAILED DATA SHEET

[illegible]

H.D.67

Page

of

Pages

TOWNSHIP OF BRICK

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



Stevan J. Zboyan, Mayor

Township Council:

Albert Chrobocinski, President
Victor Cantillo
Helen Fayad
Lee Hartman
Thomas G. Maiorino
Mary Lou Powner
Warren H. Wolf

Department of Engineering

Municipal Engineer
(908) 477-3000, Ext. 273

February 25, 1992

Ramesh Pandya
829 Oceanview Drive
Toms River, N.J. 08754

RE: Block 383.40, lot 1-4
Brick Blvd & Lakeshore Way

Dear Mr. Pandya:

Your application for zoning approval for a construction permit for a building on the referenced property is denied because a site plan has not been signed by the Planning Board.

Very truly yours,

Sean Kinnevy
Sean Kinnevy
Zoning Officer

SK/kb

cc: Scott MacFadden, Business Adm
Arthur Cierzo, Construction Official
Division of Inspections

OK
2/28
JIC



OCEAN COUNTY HEALTH DEPARTMENT

C.N. 2191

Toms River, N.J. 08754

201-341-9700

CHARLES KAUFFMAN
PUBLIC HEALTH COORDINATOR

March 5th, 1992

Township of Brick
401 Chambers Bridge Road
Brick, New Jersey 08723

P123A
HUT

re: Proposed Floor Plans
Block 383.4 Lot 1-3
Pizza Hut
Brick Blvd & Lake Shore Drive
Brick

Dear Sir,

I have reviewed the floor plans for the above-referenced proposed food establishments and have found them to be in substantial compliance with Chapter XII, the N.J. State Retail Food Code.

If you should have any questions, please feel free to contact me at this office.

Very truly yours,

Joseph A. Caprio

Joseph A. Caprio
Sanitary Inspector

cc: Brick Township Board of Health
Brick Township, Arthur Cierzo, Construction Official

JAC/pjp

INSPECTOR:

K Shuter

DATE:

6-30-02

JOB:

Pizza Hut
SP# 1982

SECTION:

Lake Riviera

TYPE OF WORK:

Final Eng

WEATHER:

Sunny

LOCATION:

inter Brick Blvd / Lake
Shore Way

TEMPERATURE:

80°'s

BLOCK: 383.40

LOT:

1-4

ENGINEERING RECOMMENDATIONS FOR CERTIFICATE OF OCCUPANCY INSPECTION CHECK LIST

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway	✓	
2. Grading	✓	
3. Sidewalk	✓	
4. Road Pavement	✓	
5. Landscaping & Sodding	✓	
6. Clean-up Procedures	✓	
7. Note on going construction in immediate area	✓	
8. Safety	✓	

COMMENTS REFERENCING ITEM NUMBER:

OK 40
7/1/98

RECOMMENDATIONS:

☐ TEMP. C.O.☒ FINAL C.O.☐ DETAILED REINSPECTION☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED

PLANNING BOARD ENGINEER

[Signature]

MUNICIPAL ENGINEER

I _____, Authorized representative of _____, hereby acknowledge the above deficiencies, and further realize that the Certificate of Occupancy will be conditioned upon the acceptable resolution thereof within _____ days of the issuance of Certificate of Occupancy.

THE BRICK TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY
1551 Highway 88 West
Brick, New Jersey 08724
(201) 458-7000

MAIL TO DIANE
AT TOWN HALL-BUILDING DEPT.

STATEMENT OF UTILITY SERVICES

APPLICANT: NAME Pizza Hut TEL. NO. _____

ADDRESS _____

PROPERTY IN QUESTION:

BLOCK 383.40 LOT(S) 1-4 ADDRESS Lake Shore Way

BTMUA ACCOUNT NUMBER _____

SINGLE FAMILY RESIDENTIAL (IN EXISTING SUB-DIVISIONS ONLY)

1. UTILITY SERVICE CAN BE PROVIDED. APPLICATION
FOR SERVICE IS REQUIRED.

<u>WATER</u>	<u>SEWER</u>
<u>X</u>	<u>X</u>

CONNECTION WILL BE PROVIDED AS FOLLOWS:

WATER Lake Shore Dr.
(STREET)

SEWER Lake Shore Dr.
(STREET)

2. UTILITY SERVICE CANNOT BE PROVIDED AT THIS DATE.
APPLICATION IS NOT REQUIRED.
3. UTILITY SERVICE IS PLANNED FOR CONSTRUCTION
DURING THE BUDGET YEAR ENDING MARCH 31, 19____.
SERVICE MAY BE AVAILABLE SOME TIME THEREABOUT.

ALL OTHER DEVELOPMENT

EXISTING BRICK TOWNSHIP MUA LINES ARE AS SHOWN ON ATTACHED
TAX MAP DRAWING NO. _____.

APPLICANT/DEVELOPER IS REQUIRED TO SUBMIT A FORMAL DEVELOPER
APPLICATION TO THE AUTHORITY AS SET OUT IN BRICK TOWNSHIP ZONING
ORDINANCE NO. 354-79 AS AMENDED, AND AS REQUIRED BY BRICK TOWNSHIP
MUA RULES AND REGULATIONS (LATEST REVISION).

DATE: March 11, 1992

SIGNED: Tariq M. S. Siddiqui

NOTE: STATEMENT GOOD FOR
90 DAYS ONLY

UTILITY SERVICES FOR NEW HOMES

1. OBTAIN "STATEMENT OF UTILITY SERVICES" AND SIZING SHEET AT BTMUA.
2. FILL OUT SIZING SHEET AND HAVE APPROVED BY THE BRICK TOWNSHIP PLUMBING INSPECTOR.
3. APPLICATION FOR UTILITIES SHOULD BE MADE TO BTMUA AS EARLY AS POSSIBLE, AT WHICH TIME THE SIZING SHEET, SIGNED BY THE TOWNSHIP PLUMBING INSPECTOR, MUST BE SUBMITTED.

APPLICATIONS WITHOUT THE SIGNED SIZING SHEET WILL NOT BE ACCEPTED.

A DEPOSIT OF \$130 IS REQUIRED.

LEAD TIME FOR TAPS TO BE INSTALLED IS BETWEEN 6 AND 8 WEEKS, WEATHER PERMITTING; HOWEVER, TAPS WILL NOT BE SCHEDULED FOR INSTALLATION UNTIL AT LEAST A FOUNDATION EXISTS. FOR INFORMATION ON SCHEDULED INSTALLATIONS, CONTACT THE AUTHORITY OPERATIONS OFFICE.

4. AFTER THE TAPS HAVE BEEN INSTALLED, SEWER AND WATER SERVICE PERMITS ARE TO BE OBTAINED AT THE BTMUA (PERMIT FEE OF \$15 FOR EACH SERVICE).
5. ONCE YOUR SERVICE LINES HAVE BEEN CONNECTED, CALL THE CUSTOMER ACCOUNT DIVISION AT BTMUA TO ARRANGE FOR AN OUTSIDE INSPECTION.

INSPECTIONS WILL NOT BE MADE UNLESS THE PERMIT HAS BEEN OBTAINED.

6. WATER METER

A METER AND A REMOTE READOUT WILL BE INSTALLED.

IF YOU ARE BUILDING ON A SLAB BASE, PLEASE MAKE ARRANGEMENTS WITH YOUR BUILDER TO RUN A PAIR OF WIRES (18 GAUGE, 2 CONDUIT SOLID BELL WIRE) FROM THE INSIDE METER LOCATION TO WHERE THE OUTSIDE READOUT IS TO BE LOCATED, OR CALL THE BTMUA TO DO SO. THIS MUST BE DONE PRIOR TO INSTALLATION OF SHEET ROCK FOR INTERIOR WALLS.

AFTER ALL INSPECTIONS HAVE BEEN COMPLETED, CALL THE CUSTOMER ACCOUNT DIVISION AT BTMUA TO SCHEDULE THE WATER METER INSTALLATION.

7. CERTIFICATE OF COMPLIANCE

THE C.C. WILL BE ISSUED AFTER THE METER IS INSTALLED AND ALL REQUIREMENTS MET, AT WHICH TIME ANY OPEN TAP FEES AND PERMIT FEES MUST BE PAID IN FULL.

8. INITIAL SERVICE CHARGES

IF THE OWNER DESIRES, THE APPLICABLE INITIAL SERVICE CHARGES MAY BE PAID IN QUARTERLY INSTALLMENTS (PLUS INTEREST) ACCORDING TO AN ESTABLISHED PAYMENT PLAN. SEE OUR CUSTOMER ACCOUNT DIVISION FOR DETAILS.

SIZING FOR WATER AND SEWER SERVICES

Property Owner _____ Date _____

Property Address _____ Block _____ Lot _____

Zoning _____ Use Group _____

Contractor _____ License No. Registration _____

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

<u>Plumbing Fixtures</u>	<u>Number</u>	<u>(sfu) Water Units</u>	<u>(dfu) Drainage Units</u>
1. Water Closet	_____	() _____	() _____
2. Lavatory	_____	() _____	() _____
3. Bath Tub	_____	() _____	() _____
4. Shower Stall	_____	() _____	() _____
5. Kitchen Sink	_____	() _____	() _____
6. Service Sink	_____	() _____	() _____
7. Laundry Tray	_____	() _____	() _____
8. Dishwasher	_____	() _____	() _____
9. Washing Machine	_____	() _____	() _____
10. Urinal	_____	() _____	() _____
11. Floor Drain	_____	() _____	() _____
12. Drinking Fountain	_____	() _____	() _____
13. Air Conditioner (water cooled)	_____	() _____	() _____
14. Dental Unit	_____	() _____	() _____
15. Lawn Sprinkler No. of Heads	_____	() _____	() _____
16. Fire Sprinkler No. of Heads	_____	() _____	() _____
17. _____	_____	() _____	() _____
18. _____	_____	() _____	() _____

Total _____

Gallons per minute _____

Size of Service _____

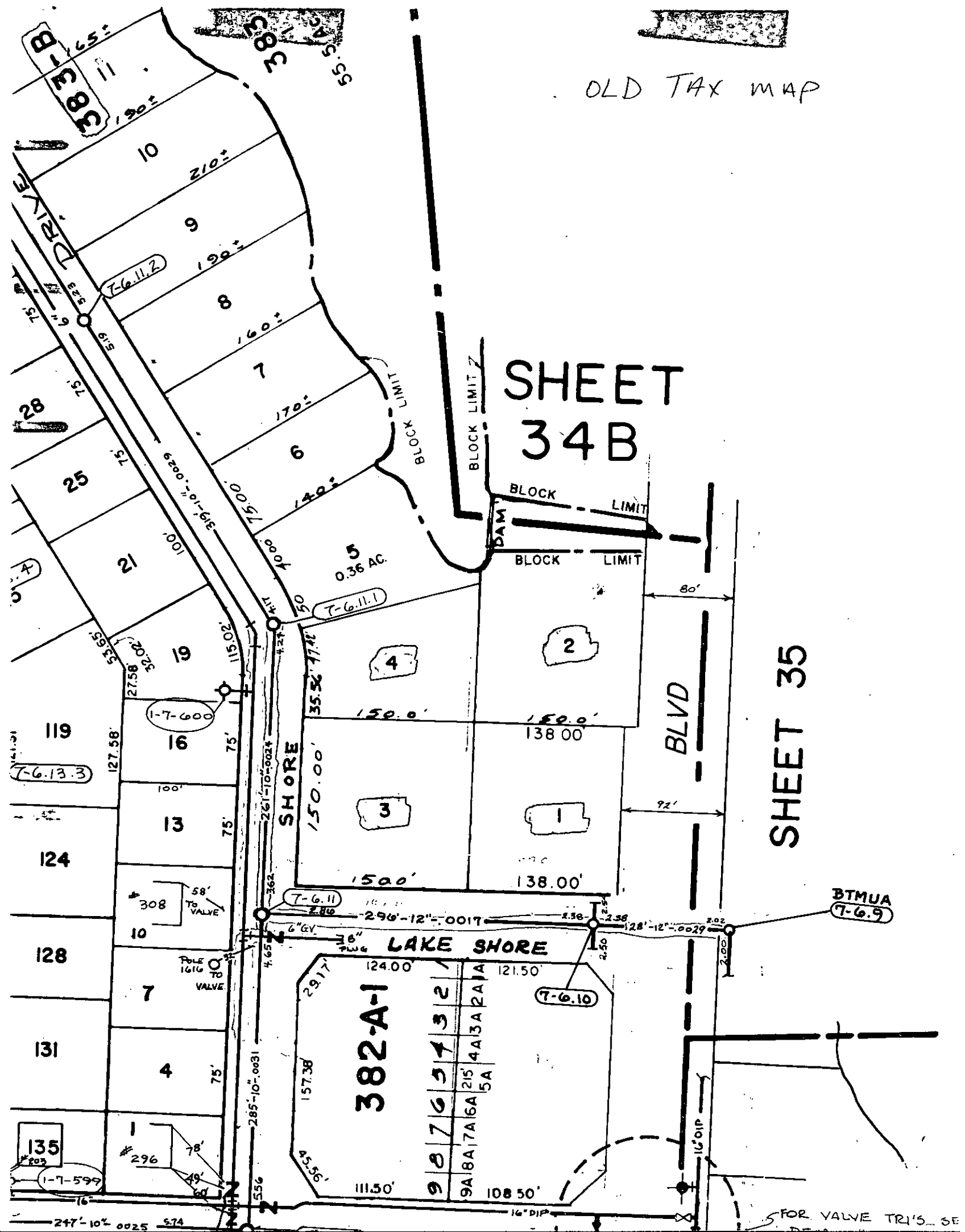
Date: _____

Approved: _____
Brick Township Plumbing Inspector

OLD TAX MAP

SHEET
34B

SHEET 35



NEW TAX MAP.

WATCH

08/11/80

13th

BLOCK	LIMIT
1	100
2	100
3	100
4	100
5	100
6	100
7	100
8	100
9	100
10	100
11	100
12	100
13	100
14	100
15	100
16	100
17	100
18	100
19	100
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89	100
90	100
91	100
92	100
93	100
94	100
95	100
96	100
97	100
98	100
99	100
100	100

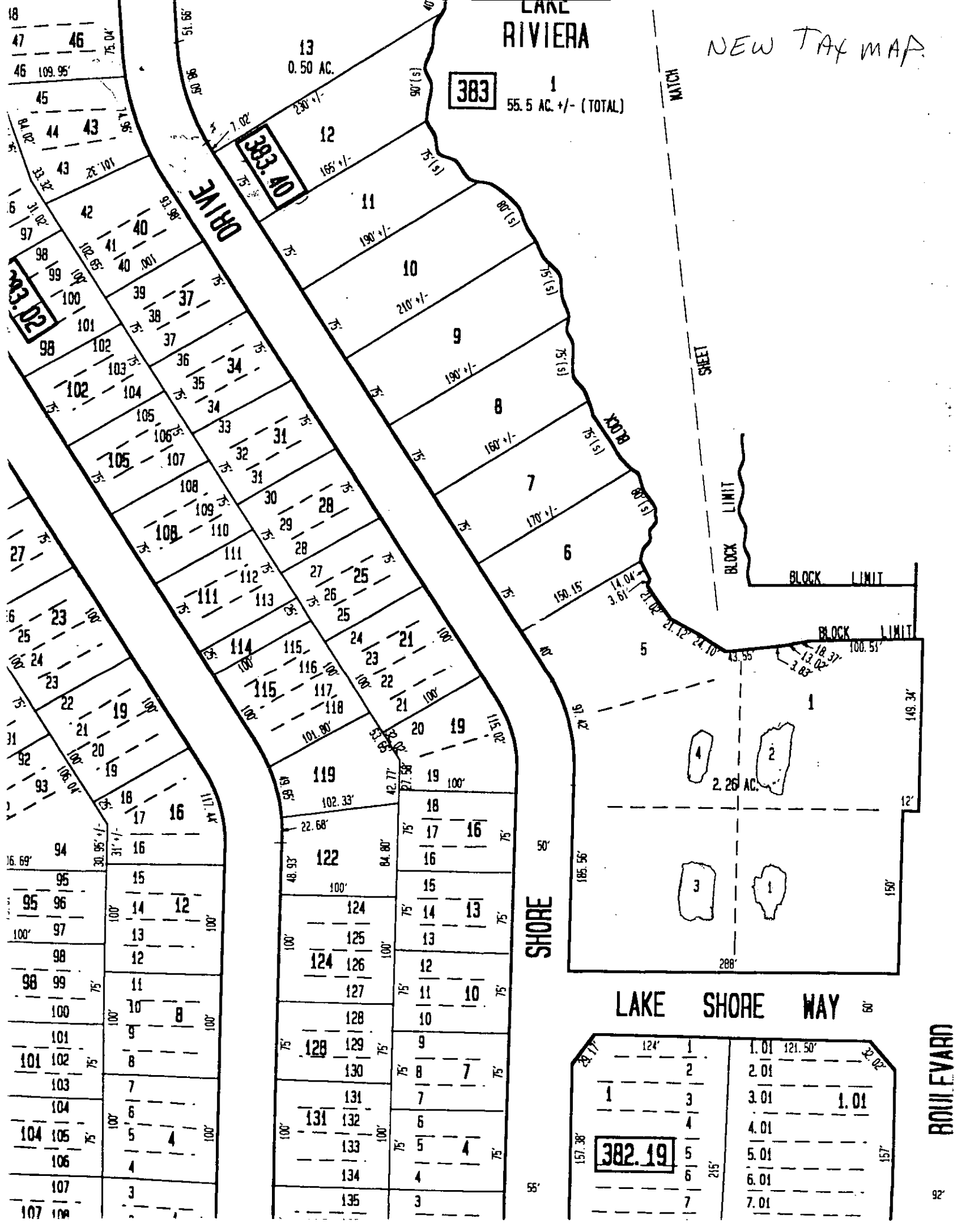
BLOCK LIMIT

SHORE

LAKE SHORE WAY 60'

BOULEVARD

92'



No. Stories 1
Ht. Structure
Sq. Feet

PLAN REVIEW RECORD
BOCA BASIC/NATIONAL BUILDING CODE

Plan Review # 3-13-92
Date

JURISDICTION Bruck Town N.J.
(City, County, Township, etc.)

BUILDING LOCATION Bruck Brook Lake Shore way.
(Street address)

Job Name Pizza Hut.

New Building ☒ Addition ☐ Alteration ☐ Other ☐

Construction Classification, Use Group A3 Block 383.40 Lot 1-4

CORRECTION LIST

No.	DESCRIPTION	Page	Section	Code Sect.	Dept. Chk. Off.
1	Need Construction Classification	57	Fire	Art 4	OK
2	Occupant Load	135	Fire	Art. 806.0	OK
3	Storage Rooms.	56	Fire	Table 313.4.1	OK
4	Storage area Special use areas.	222	Fire	1005.2.2	1005.6.3k
5	Standby Power.	444	Fire	2707.2	OK
6	Fire Extinguishers	242	Fire	1021.1-2	OK
7	Out Door Appliances Insulation	BOCA Mec. Code 41	Fire	M-405.0	OK
8	Mish. Equipment	BOCA Mec 39	Fire	Art 4	OK
9	Fire Dampers	BOCA Bldg 911.5 " "	35	" M-311.0	OK
10	Exhausts 2000 CFM or more need S.D. shut off				OK
11	Smoke detectors Common Areas				OK.
12					
13					
14					
15	Letter from W.D. Price AIA				

Letter from W.D. Price AIA
address Pizza Hut

Other Comments:

7AX 286 - 9140

908

CIBA-GEIGY CORPORATION
TOMS RIVER PLANT
ENVIRONMENTAL TECHNOLOGY
WTP - B743

920-4850

DATE: March 25, 1992
TO: Joe, Fire Inspection, Bldg. Dept.
LOCATION: Bricktown Municipal Bldg.
FROM: Raj Pandya - Pizza Hut
COMMENTS: As discussed, I am faxing
2 pages of comments by Architect
Mr. Price. Please call me @
(908) 349-5200 x 2340 if you
need any additional information.

NUMBER OF PAGES 3 (INCLUDING COVER)

P.O. BOX 71
ROUTE 37 WEST
TOMS RIVER, NJ 08754

FACSIMILE NO: (908) 286-9140
(908) 349-5200, EXT. 2348

MISC\CGFAX

WILLIAM D. PRICE A.I.A.

ARCHITECT • PLANNER
232 CHERRY STREET
BLOUNTVILLE, TN 37617

25 March 1992

(615) 323-4433

Bricktown Planning Board
Bricktown, New Jersey

Re: Pizza Hut
Block 383-40, Lots 1 - 4
Brick Boulevard & Lake Shore Way

In reply to your items listed in the Correction List of the Plan Review Record dated 3-13-92, please consider the following clarifications;

01. NEED CONSTRUCTION CLASSIFICATION. BOCA page 57.
Construction classification is Type 5B (Combustible/Unprotected) with requirements listed in table 401, page 58.
Use Group A-3 Assembly (Restaurant) with one story, 4,200 square feet maximum gross allowed. Proposed construction is one story and 3,674 square feet.
02. OCCUPANT LOAD. BOCA page 135.
Per 806.1.1 - Actual Number of seats in Dining Room as shown on Sheet A Equipment Plan and Sheet 2 Floor Plan IS 130. Maximum number of employees is 15. Total occupant load is 145 for the standard floor plan of 43'-0" x 90'-0".
03. STORAGE ROOMS. BOCA Page 56.
There are no specified storage rooms in this facility. There are shelving units throughout the Kitchen area that hold various canned goods, and other supplies associated with Kitchen and Dining services. No specific requirements on page 56 of the BOCA code apply to this project.
04. STORAGE AREA SPECIAL USE AREAS. BOCA Page 222.
Special use areas 1005.2.2 not applicable in this project. No specific storage rooms or areas are designated on the Equipment Plan Sheet A or Floor Plan Sheet 2.
05. STANDBY POWER. BOCA Page 444.
Section 2706.0 Emergency Electrical Systems. 2706.1 General:
Emergency electrical systems are those systems required to supply power automatically for illumination and equipment in the event of failure of the normal power supply.

2706.2 Capacity: The emergency systems shall have the capacity to operate equipment such as means of egress lighting, exit signs, door locks, and any other emergency equipment as required by other sections of this code. COMPLIANCE IN NEXT PARAGRAPH.

(Continued)

Page 2

Bricktown Planning Board
RE: Pizza Hut

Egress lighting (Fixture K) and Exit lights (Fixture E) as shown on the Electrical Floor Plan sheet 8, are equipped with battery power. This is the only emergency power required for this project by BOCA.

07. OUT DOOR APPLIANCES INSTALLATION. BOCA MECHANICAL CODE Page 41. All roof top mechanical equipment complies with Section M-405.0 OUTDOOR INSTALLATION and M-403.0 EQUIPMENT INSTALLATION. Access to the roof top equipment is via pull down stair as shown on Floor Plan Sheet 2 in rear of building. This stair leads to the attic, and access to the roof is via ladder thru the roof hatch, location shown on sheet A-5 (Roof Framing Plan) and sheet 9 (Roof Equipment Location Plan). The requirement for guards as noted in M-405.2 is met by the roof parapet that is 60" high around the perimeter of all roof top equipment, see Elevation Sheet 3 and Truss Section on Sheet 6.
08. MECHANICAL EQUIPMENT. BOCA MECHANICAL CODE Page 39. All roof top equipment meets or exceeds the requirements of Article 4, MECHANICAL EQUIPMENT beginning page 39 of BOCA MECHANICAL CODE.
09. FIRE DAMPERS. BOCA MECHANICAL CODE Page 35. Fire dampers not required as the mechanical duct system does not penetrate any fire rated structure.
10. FURNACES 2000 CFM OR MORE NEED S.D. SHUT OFF. BOCA MECH. Page 32. M-307 will be complied with. See Sheet 9 and note the "SD" (smoke detector) location in the return air grills of AC-1 and AC-3. AC-2 is less than 2000 CFM, therefore smoke detectors are not required per BOCA Mechanical Code.
11. SMOKE DETECTORS COMMON AREAS. NO BOCA REFERENCE LISTED. Cannot find reference to smoke detectors being required, other than the mechanical equipment requirement, in any part of the A-3 Group Use definition. We will gladly install smoke detectors, other than those shown, if required.

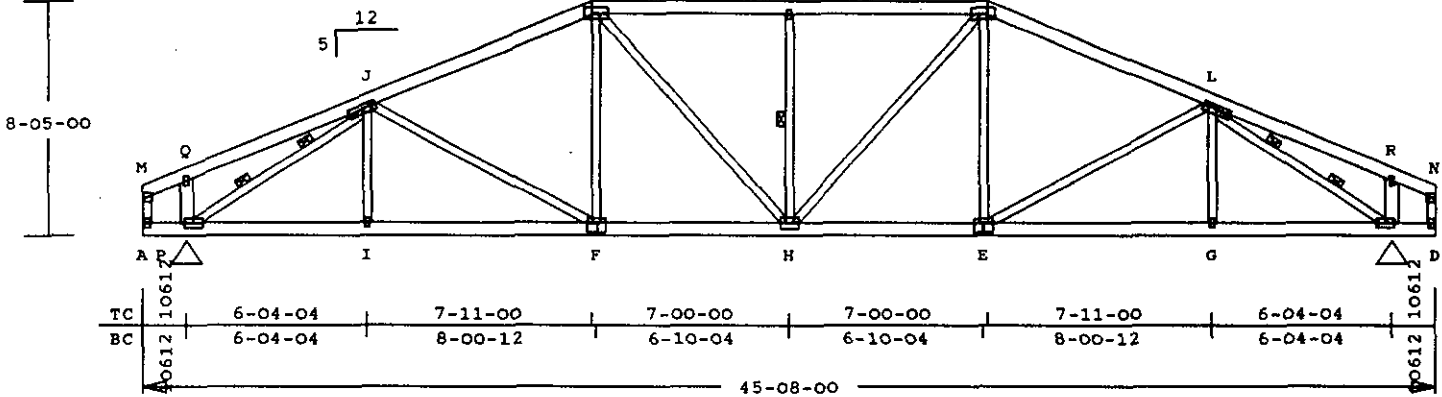


William D. Price AIA
New Jersey Registration #9737



HO 1-09-13

HO 1-09-13



TRUSSTAR2 -- VERSION 33.1.501
RUN DATE: 3-27-92

CSI SIZE LUMBER 1.15FB
TOP .74 2X 6 SP-#2 1440
BTM .57 2X 6 SP-#2 1440
WBS .81 2X 4 SP-#2 1720
EXCEPTIONS:
B-K 2X 6 SP-#1 1900
K-C SAME AS B-K
P-Q 2X 6 SP-#2 1440
O-R SAME AS P-Q
LUMBER STRESS INCREASE: 15.0%
REPETITIVE MEMBER STRESS USED.

LATERAL BRACING:
TOP CHORD - CONTINUOUS
BTM CHORD - CONTINUOUS
ONE BRACE - H-K
TWO BRACES - P-J L-O
TRUSS 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
EXCEPTIONS:
B-C .0 70.0

SUPPORT CRITERIA
JT REACT WIDTH JT REACT WIDTH
LBS IN-SX LBS IN-SX
P 2608 3- 8 0 2608 3- 8

MEMBR	CSI	P(LBS)	M#1ST	M#2ND
TOP CHORDS				
M-Q	.10	25 T	0	-1199
Q-J	.39	18 T	1199	-4680
J-B	.57	3483 C	4680	0
B-K	.74	3800 C	0	-9506
K-C	.74	3800 C	9506	0
C-L	.57	3483 C	0	-4680
L-R	.39	18 T	4680	-1199
R-N	.10	25 T	1199	0
BOTTOM CHORDS				
A-P	.01	0 T	0	-177
P-I	.51	3021 T	177	-607
I-F	.57	3021 T	607	0
F-H	.55	3198 T	0	-931
H-E	.55	3198 T	931	0
E-G	.57	3021 T	0	-607
G-O	.51	3021 T	607	-177
O-D	.01	0 T	177	0
WEBS				
A-M	=	7 T	P-Q	= 312 C

MEMBR CSI P(LBS) M#1ST M#2ND
P-J = 3745 C I-J = 155 T
J-F = 206 T F-B = 28 T
B-H = 912 T H-K = 1207 C
H-C = 912 T E-C = 28 T
E-L = 206 T G-L = 155 T
L-O = 3745 C O-R = 312 C
D-N = 7 T

DL+LL DEFL = .38" IN B-K
LL DEFL = .07" < S/360
S/DL+LL DEFL=999 S/DEPTH= 5.3

PLATING CONFORMS TO TPI.
(ICBO 1591, BOCA 80-88)
(DILHR 870040N)
PLATE VALUES MAY BE
VERIFIED WITH:
HYDRO-AIR ENG. INC.
GRIP VALUES BASED ON SYP
LUMBER USING GROSS
AREA TEST METHOD.
PLATES - 20 GAUGE PTX
GRIPPING 593-496 PSI PER PAIR
INCLUDES 15.0% INCREASE
TENSION 910- 565 PLI PER PAIR
SHEAR 885- 431 PLI PER PAIR

JT TYPE	PLATE SIZE	X	Y
A 4000	3.00 X 4.00	CTR	CTR
B 5150	5.00 X10.00	CTR	2.7
C 5150	5.00 X10.00	CTR	2.7
D 4000	3.00 X 4.00	CTR	CTR
E 1150	6.00 X 8.00	CTR	4.0
F 1130	6.00 X 8.00	CTR	4.0
G 1001	2.00 X 4.00	CTR	CTR
H 1070	5.00 X 8.00	CTR	CTR
I 1001	2.00 X 4.00	CTR	CTR
J 1073	4.00 X12.00	3.6	1.7
K 1001	2.00 X 4.00	CTR	CTR
L 1073	4.00 X12.00	3.6	1.7
M 4100	4.00 X 4.00	CTR	1.8
N 4100	4.00 X 4.00	CTR	1.8
O 1030	4.00 X 8.00	CTR	CTR
P 1050	4.00 X 8.00	CTR	CTR
Q 1001	2.00 X 4.00	CTR	CTR
R 1001	2.00 X 4.00	CTR	CTR

NOTES:

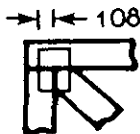
1. TRUSSES MANUFACTURED BY - AUTOMATED BLDG. SYS.
2. CONFORMS TO TPI-85.
3. PREVENT TRUSS ROTATION AT ALL BEARING LOCATIONS.

SEE REVERSE SIDE FOR IMPORTANT INFORMATION



Symbols

PLATE LOCATION



Center plates on joints unless otherwise noted in plate list or on drawing. Dimensions are given in inches (i.e. 1½" or 1.5") or in IN-16ths (i.e. 108)

PLATE SIZE

6.3 x 8.8

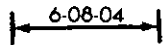
The first dimension is the width measured perpendicular to slots. Second dimension is the length measured parallel to slots.

PLATE ORIENTATION



Indicates direction of slots in connector plate.

DIMENSIONS

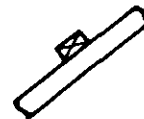


Dimensions are shown in FT-IN-16ths (i.e. 6'-8¼" or 6-08-04)



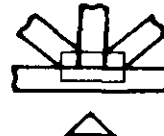
Shorter dimensions may be shown in inches only (i.e. 7½" or 7.5") or IN-16ths (i.e. 708).

LATERAL BRACING



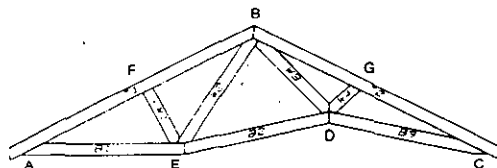
Indicates approximate location of continuous lateral bracing required for member stability.

BEARING



Indicates support (bearing) at joint.

Identification System



STANDARD AND SEMI-STANDARD TRUSSES

Joints are lettered clockwise from leftmost joint with chord end joints being done first, followed by web end joints. Top and bottom chords are labeled T1, T2, etc. and B1, B2, etc., respectively. Webs are described W1, W2, etc., from the center outward for standards and in the order of entry for semi-standards.

NOTICE:

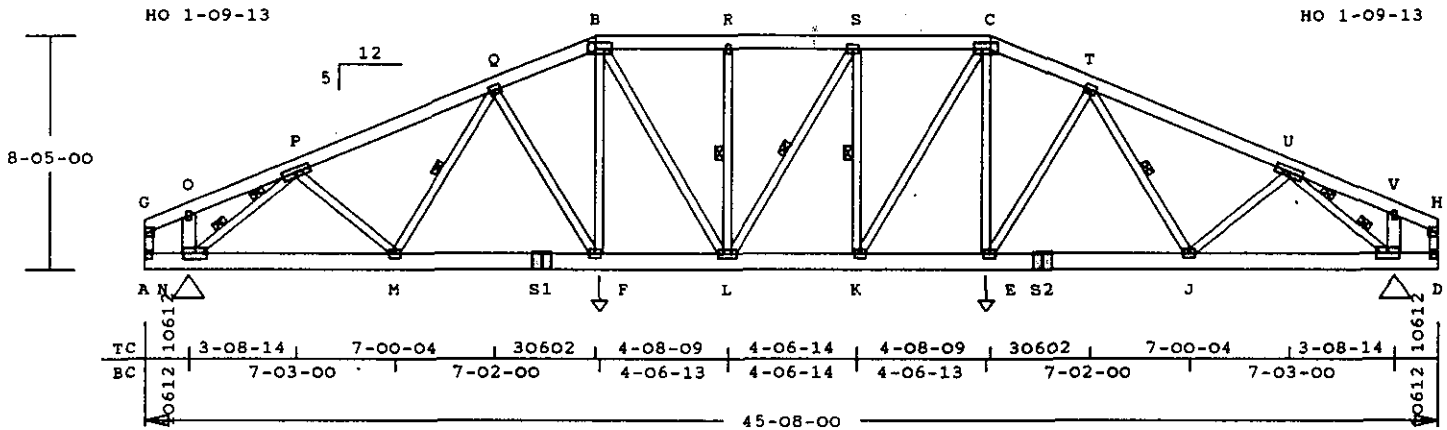
This truss designed at request and specification of customer as an individual building component, in a vertical plane, to be incorporated into building design at the specification of building designer. Bracing shown is for lateral support of individual web members only. Additional temporary bracing to insure stability during construction is the responsibility of the erector. Additional permanent bracing of the overall structure is the responsibility of the building designer. Design and materials are in accordance with latest editions of **NDS** and/or **TPI** specifications. For general guidance regarding fabrication, quality control, storage, delivery, erection and bracing, consult **Quality Control Manual, Bracing of Wood Trusses**, and **Recommended Code of Standard Practice** available from Truss Plate Institute, 583 D'Oonofrio Drive, Madison, WI 53719.

General Notes

1. Provide copies of this truss design to the building designer and erection supervisor.
2. Cut members to bear tightly against each other.
3. Place plates on each face of truss at each joint and seat securely. Avoid knots and wane at joint locations.
4. Locate panel splices at ¼ panel length ($\pm 6"$) from adjacent joint.
5. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication.
6. Unless specifically noted, this design is not applicable for use with fire retardant or preservative treated lumber.
7. Top chords must be sheathed throughout or purlins provided at prescribed spacing.
8. Bottom chords require lateral bracing at 10 ft. spacing if no ceiling is installed unless otherwise noted.
9. Anchorage and/or tie-in components are the responsibility of others unless shown.
10. Do not stack construction materials on floor or roof that induces loading on truss greater than design loads.
11. Do not cut or alter truss without prior approval of a professional engineer.
12. Building designer is responsible to insure that loading shown hereon is applicable to building site.
13. Care should be exercised in handling, erection, and installation of trusses.
14. Camber is a non-structural consideration and is the responsibility of truss fabricator. General practice is to camber for dead load deflection.
15. Plate type, size and location dimensions shown indicate minimum plate requirements.
16. Refer to On-Line Data's Ch. VI-B for joint details.

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ON-LINE DATA P.O. Box 2750
Richardson, TX 75080



TRUSSTAR2 -- VERSION 33.1.501
RUN DATE: 3-27-92

* 2-PLY TRUSS *

CSI	SIZE	LUMBER	FB
TOP .47	2X 6	SP-#2	1250
BTM .77	2X 8	SP-#1	1500
WBS .67	2X 4	SP-#2	1500

EXCEPTIONS:
N-O 2X 6 SP-#2 1250
I-V SAME AS N-O
LUMBER STRESS INCREASE: 15.0%

LATERAL BRACING:
TOP CHORD - CONTINUOUS
BTM CHORD - CONTINUOUS
ONE BRACE - M-Q L-R L-S
- K-S T-J

TWO BRACES - N-P U-I
TRUSS SPACING - 24.0 IN.

LOADING	LIVE	DEAD (PLF)
TOP CHD	60.0	14.0
BTM CHD	.0	20.0
TOTAL	60.0	34.0
94.0		

EXCEPTIONS:
F-E 187.5 126.2

CONCENTRATED LOADS (LBS)
F 3224 E 3224

SUPPORT CRITERIA
JT REACT WIDTH JT REACT WIDTH
LBS IN-SX LBS IN-SX
N 7427 4- 6 I 7427 4- 6

MEMBER FORCES - EACH PLY
MEMBR CSI P(LBS) M01ST M02ND

MEMBR	CSI	P(LBS)	M01ST	M02ND
TOP CHORDS				
G-O	.06	12 T	0	-566
O-P	.06	0 T	566	-455
P-Q	.45	5419 C	455	-1028
Q-B	.45	6497 C	1028	0
B-R	.46	6544 C	0	-248
R-S	.46	6544 C	248	-419
S-C	.47	6550 C	419	0
C-T	.45	6497 C	0	-1030
T-U	.45	5420 C	1030	-454
U-V	.06	0 T	454	-570
V-H	.06	12 T	570	0

MEMBR	CSI	P(LBS)	M01ST	M02ND
BOTTOM CHORDS				
A-N	.01	0 T	0	-121
N-M	.44	3760 T	121	1395
M-S1	.61	5671 T	-1395	0
S1-F	.61	5671 T	0	-1265
F-L	.73	5988 T	1265	-2647
L-K	.77	6550 T	2647	-3057
K-E	.72	5988 T	3057	-1257
E-S2	.61	5671 T	1257	0
S2-J	.61	5671 T	0	1371
J-I	.43	3760 T	-1371	-117
I-D	.01	0 T	117	0

MEMBR	CSI	P(LBS)	M01ST	M02ND
WEBS				
A-G	=	1 T	N-O	= 131 C
N-P	=	5147 C	P-M	= 1757 T
M-Q	=	1387 C	Q-F	= 663 T

MEMBR	CSI	P(LBS)	M01ST	M02ND
F-B	=	1443 T	B-L	= 1082 T
L-R	=	173 C	L-S	= 12 C
K-S	=	172 C	K-C	= 1094 T
E-C	=	1436 T	E-T	= 662 T
T-J	=	1387 C	J-U	= 1757 T
U-I	=	5147 C	I-V	= 131 C
D-H	=	2 T		

DL+LL DEFL = .41" IN R-S
LL DEFL = .33" < S/360
S/DL+LL DEFL=999 S/DEPTH= 5.4

PLATES ARE FOR EACH PLY

PLATING CONFORMS TO TPI.
(ICBO 1591, BOCA 80-88)
(DILHR 870040N)
PLATE VALUES MAY BE
VERIFIED WITH:

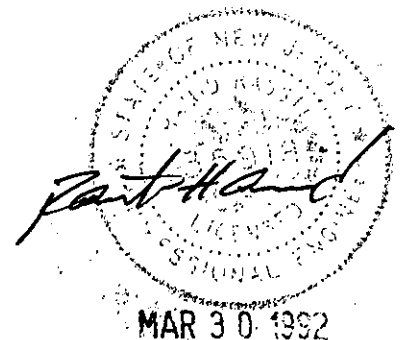
HYDRO-AIR ENG. INC.
GRIP VALUES BASED ON SYP
LUMBER USING GROSS
AREA TEST METHOD.
PLATES - 20 GAUGE PTX
GRIPPING 593-496 PSI PER PAIR
INCLUDES 15.0% INCREASE
TENSION 910- 565 PLI PER PAIR
SHEAR 885- 431 PLI PER PAIR

JT TYPE	PLATE	SIZE	X	Y
A	4000	3.00 X 4.00	2.5	1.5
B	5150	5.00 X 10.00	CTR	2.7
C	5150	5.00 X 10.00	CTR	2.7
D	4000	3.00 X 4.00	2.5	1.5
E	1050	7.00 X 8.00	CTR	4.0
F	1030	7.00 X 8.00	CTR	4.0
G	4100	4.00 X 4.00	CTR	1.8
H	4100	4.00 X 4.00	CTR	1.8
I	1030	5.00 X 10.00	CTR	CTR
J	1010	4.00 X 5.00	CTR	CTR
K	1050	6.00 X 6.00	CTR	CTR
L	1070	6.00 X 8.00	CTR	CTR
M	1010	4.00 X 5.00	CTR	CTR
N	1050	5.00 X 10.00	CTR	CTR
O	1001	2.00 X 4.00	CTR	CTR
P	1010	4.00 X 12.00	CTR	CTR
Q	1010	4.00 X 5.00	CTR	CTR
R	1001	2.00 X 4.00	CTR	CTR
S	1030	4.00 X 5.00	CTR	CTR
T	1010	4.00 X 5.00	CTR	CTR
U	1010	4.00 X 12.00	CTR	CTR
V	1001	2.00 X 4.00	CTR	CTR
S1	1101	8.00 X 8.00	CTR	.0
S2	1101	8.00 X 8.00	CTR	.0

NOTES:

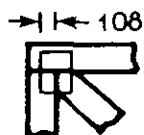
1. TRUSSES MANUFACTURED BY - AUTOMATED BLDG. SYS.
2. CONFORMS TO TPI-85.
3. TIE-IN LOADS SHOWN WITHOUT DAMAGE TO TRUSS.
4. PREVENT TRUSS ROTATION AT ALL BEARING LOCATIONS.
5. GIRDER CONDITION:
STEPPED DOWN HIP
-SETBACK 14'-6"
-KINGJACK ALONG HIP LINE
6. FASTEN EACH PLY TO THE NEXT WITH 10d NAILS AS FOLLOWS:
MEMBER ROWS SPACING(IN)
TOP CHD 1 12
BOT CHD 2 8
WEBS 1 12
7. STAGGER NAILS TO AVOID SPLITTING OF WOOD.
8. USE PROPERLY RATED HANGERS FOR LOADS FRAMING INTO GIRDER TRUSS.
9. NAIL WEB(S) INDICATED BELOW WITH #10d NAILS AT 4 INCHES OC IN 1 ROWS ALONG THE LENGTH OF THE WEB.
B-F, Q-F, C-E, E-T

SEE REVERSE SIDE FOR IMPORTANT INFORMATION



Symbols

PLATE LOCATION



Center plates on joints unless otherwise noted in plate list or on drawing. Dimensions are given in inches (i.e. 1½" or 1.5") or in IN-16ths (i.e. 108)

PLATE SIZE

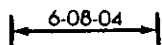
The first dimension is the width measured perpendicular to slots. Second dimension is the length measured parallel to slots.
6.3 x 8.8

PLATE ORIENTATION



Indicates direction of slots in connector plate.

DIMENSIONS

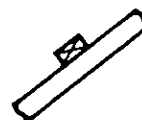


Dimensions are shown in FT-IN-16ths (i.e. 6'-8¼" or 6-08-04)



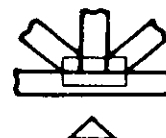
Shorter dimensions may be shown in inches only (i.e. 7½" or 7.5") or IN-16ths (i.e. 708).

LATERAL BRACING



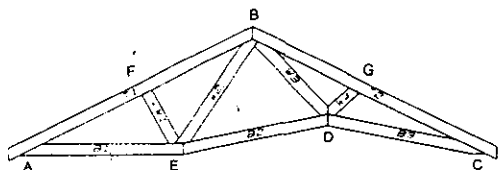
Indicates approximate location of continuous lateral bracing required for member stability.

BEARING



Indicates support (bearing) at joint.

Identification System



STANDARD AND SEMI-STANDARD TRUSSES

Joints are lettered clockwise from leftmost joint with chord end joints being done first, followed by web end joints. Top and bottom chords are labeled T1, T2, etc. and B1, B2, etc., respectively. Webs are described W1, W2, etc., from the center outward for standards and in the order of entry for semi-standards.

NOTICE:

This truss designed at request and specification of customer as an individual building component, in a vertical plane, to be incorporated into building design at the specification of building designer. Bracing shown is for lateral support of individual web members only. Additional temporary bracing to insure stability during construction is the responsibility of the erector. Additional permanent bracing of the overall structure is the responsibility of the building designer. Design and materials are in accordance with latest editions of **NDS** and/or **TPI** specifications. For general guidance regarding fabrication, quality control, storage, delivery, erection and bracing, consult **Quality Control Manual, Bracing of Wood Trusses**, and **Recommended Code of Standard Practice** available from Truss Plate Institute, 583 D'Onofrio Drive, Madison, WI 53719.

General Notes

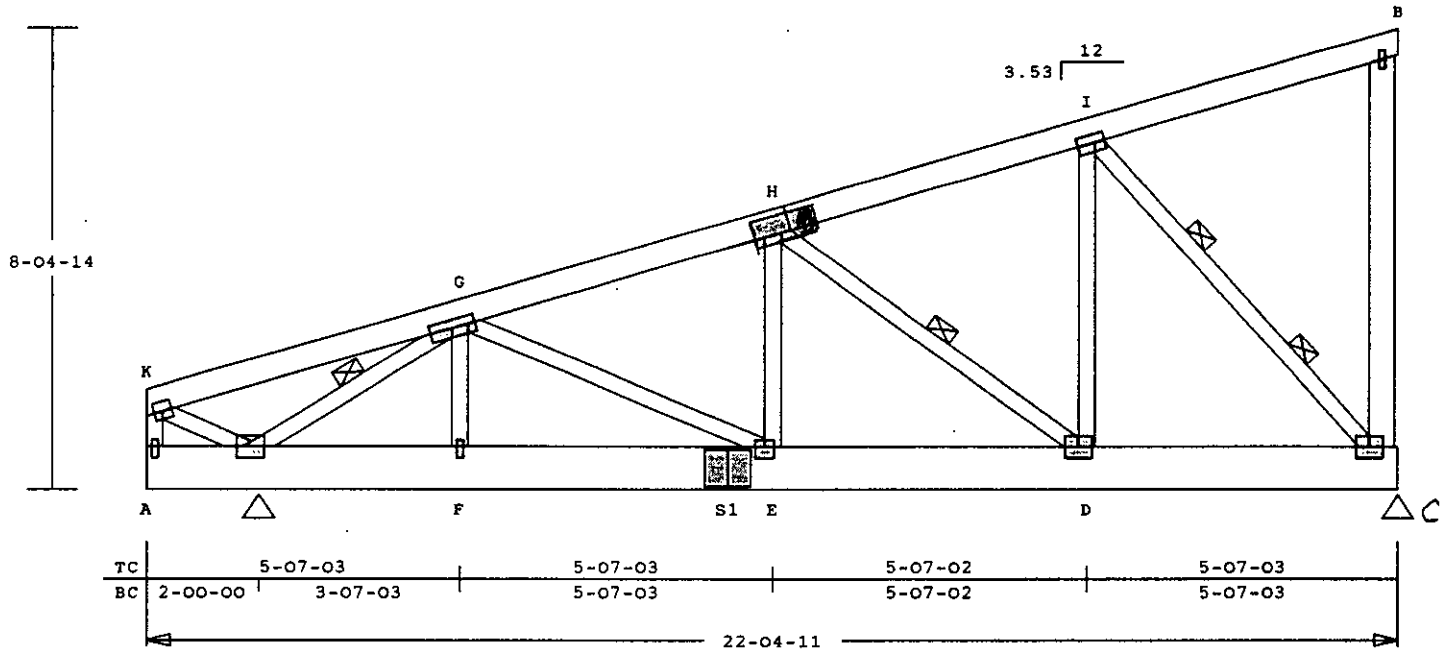
1. Provide copies of this truss design to the building designer and erection supervisor.
2. Cut members to bear tightly against each other.
3. Place plates on each face of truss at each joint and seat securely. Avoid knots and wane at joint locations.
4. Locate panel splices at ¼ panel length (± 6") from adjacent joint.
5. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication.
6. Unless specifically noted, this design is not applicable for use with fire retardant or preservative treated lumber.
7. Top chords must be sheathed throughout or purlins provided at prescribed spacing.
8. Bottom chords require lateral bracing at 10 ft. spacing if no ceiling is installed unless otherwise noted.
9. Anchorage and/or tie-in components are the responsibility of others unless shown.
10. Do not stack construction materials on floor or roof that induces loading on truss greater than design loads.
11. Do not cut or alter truss without prior approval of a professional engineer.
12. Building designer is responsible to insure that loading shown hereon is applicable to building site.
13. Care should be exercised in handling, erection, and installation of trusses.
14. Camber is a non-structural consideration and is the responsibility of truss fabricator. General practice is to camber for dead load deflection.
15. Plate type, size and location dimensions shown indicate minimum plate requirements.
16. Refer to On-Line Data's Ch. VI-B for joint details.

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ON-LINE DATA P.O. Box 2750
Richardson, TX 75080

HO 1-09-13

HO 8-04-14



TRUSSTAR2 -- VERSION 33.1.501
RUN DATE: 3-27-92

	CSI	SIZE LUMBER	FB
TOP	.20	2X 6 SP-#2	1250
BTM	.82	2X10 SP-#1	1300
WBS	.79	2X 4 SP-#2	1500

EXCEPTIONS:
C-B 2X 6 SP-#2 1250
LUMBER STRESS INCREASE: 15.0%

LATERAL BRACING:
TOP CHORD - CONTINUOUS
BTM CHORD - CONTINUOUS
ONE BRACE - J-G H-D
TWO BRACES - I-C
TRUSS SPACING - 12.0 IN.

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

EXCEPTIONS:
LINEAR VARIATION

ALONG A-C
AT A .0 .0
AT C 308.0 175.0

SUPPORT CRITERIA
JT REACT WIDTH JT REACT WIDTH
LBS IN-SX LBS IN-SX
J 2434 3- 8 C 3801 4- 8

MEMBER FORCES (LBS)

TOP CHORDS			
K-G	=	138 T	G-H = 3489 C
H-I	=	2339 C	I-B = 0 T
BOTTOM CHORDS			
A-J	=	0 T	J-F = 2657 T
F-S1	=	2657 T	S1-E = 2657 T
E-D	=	3347 T	D-C = 2244 T
WEBS			
A-K	=	15 T	K-J = 155 C
J-G	=	3554 C	F-G = 622 T

MEMBER FORCES (LBS)
G-E = 774 T E-H = 1002 T
H-D = 1414 C D-I = 2913 T
I-C = 3329 C C-B = 104 C

DL+LL DEFL = .13" AT E
LL DEFL = .09" < S/360
S/DL+LL DEFL=999 S/DEPTH= 2.6

PLATING CONFORMS TO TPI.
(ICBO 1591, BOCA 80-88)
(DILHR 870040N))
PLATE VALUES MAY BE
VERIFIED WITH:
HYDRO-AIR ENG. INC.
GRIP VALUES BASED ON SYP
LUMBER USING GROSS
AREA TEST METHOD.
PLATES - 20 GAUGE PTX
GRIPPING 593-496 PSI PER PAIR
INCLUDES 15.0% INCREASE
TENSION 910- 565 PLI PER PAIR
SHEAR 885- 431 PLI PER PAIR

JT	TYPE	PLATE	SIZE	X	Y
A	4000	1.50 X	4.00	2.5	.8
B	4200	3.00 X	4.00	CTR	CTR
C	4010	5.00 X	6.00	CTR	CTR
D	1030	6.00 X	6.00	CTR	CTR
E	1030	6.00 X	6.00	CTR	4.0
F	1001	3.00 X	4.00	2.5	.8
G	1070	4.00 X	10.00	3.3	1.7
H	1150	6.00 X	14.00	9.0	4.0
I	1050	4.00 X	6.00	2.2	1.9
J	1030	5.00 X	6.00	4.5	2.5
K	4110	4.00 X	4.00	CTR	CTR
S1	1100	8.00 X	10.00	CTR	CTR

NOTES:

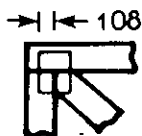
1. TRUSSES MANUFACTURED BY - AUTOMATED BLDG. SYS.
2. CONFORMS TO TPI-85.
3. END VERTICAL(S) NOT DESIGNED FOR WIND EXPOSURE.
4. PREVENT TRUSS ROTATION AT ALL BEARING LOCATIONS.

SEE REVERSE SIDE FOR IMPORTANT INFORMATION.



Symbols

PLATE LOCATION



Center plates on joints unless otherwise noted in plate list or on drawing. Dimensions are given in inches (i.e. 1½" or 1.5") or in IN-16ths (i.e. 108)

PLATE SIZE

6.3 x 8.8

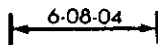
The first dimension is the width measured perpendicular to slots. Second dimension is the length measured parallel to slots.

PLATE ORIENTATION



Indicates direction of slots in connector plate.

DIMENSIONS

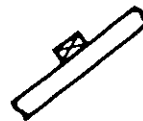


Dimensions are shown in FT-IN-16ths (i.e. 6'-8¼" or 6-08-04)



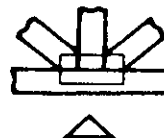
Shorter dimensions may be shown in inches only (i.e. 7½" or 7.5") or IN-16ths (i.e. 708).

LATERAL BRACING



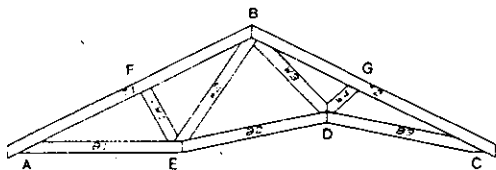
Indicates approximate location of continuous lateral bracing required for member stability.

BEARING



Indicates support (bearing) at joint.

Identification System



STANDARD AND SEMI-STANDARD TRUSSES

Joints are lettered clockwise from leftmost joint with chord end joints being done first, followed by web end joints. Top and bottom chords are labeled T1, T2, etc. and B1, B2, etc., respectively. Webs are described W1, W2, etc., from the center outward for standards and in the order of entry for semi-standards.

NOTICE:

This truss designed at request and specification of customer as an individual building component, in a vertical plane, to be incorporated into building design at the specification of building designer. Bracing shown is for lateral support of individual web members only. Additional temporary bracing to insure stability during construction is the responsibility of the erector. Additional permanent bracing of the overall structure is the responsibility of the building designer. Design and materials are in accordance with latest editions of **NDS** and/or **TPI** specifications. For general guidance regarding fabrication, quality control, storage, delivery, erection and bracing, consult **Quality Control Manual, Bracing of Wood Trusses**, and **Recommended Code of Standard Practice** available from Truss Plate Institute, 583 D'Onofrio Drive, Madison, WI 53719.

General Notes

1. Provide copies of this truss design to the building designer and erection supervisor.
2. Cut members to bear tightly against each other.
3. Place plates on each face of truss at each joint and seat securely. Avoid knots and wane at joint locations.
4. Locate panel splices at ¼ panel length ($\pm 6"$) from adjacent joint.
5. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication.
6. Unless specifically noted, this design is not applicable for use with fire retardant or preservative treated lumber.
7. Top chords must be sheathed throughout or purlins provided at prescribed spacing.
8. Bottom chords require lateral bracing at 10 ft. spacing if no ceiling is installed unless otherwise noted.
9. Anchorage and/or tie-in components are the responsibility of others unless shown.
10. Do not stack construction materials on floor or roof that induces loading on truss greater than design loads.
11. Do not cut or alter truss without prior approval of a professional engineer.
12. Building designer is responsible to insure that loading shown hereon is applicable to building site.
13. Care should be exercised in handling, erection, and installation of trusses.
14. Camber is a non-structural consideration and is the responsibility of truss fabricator. General practice is to camber for dead load deflection.
15. Plate type, size and location dimensions shown indicate minimum plate requirements.
16. Refer to On-Line Data's Ch. VI-B for joint details.

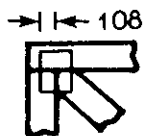
©1988 On-Line Data, Inc.

ON-LINE DATA P.O. Box 2750
Richardson, TX 75080



Symbols

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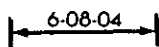
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DIMENSIONS

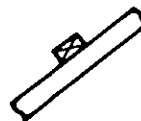


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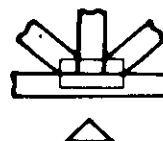
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LATERAL BRACING



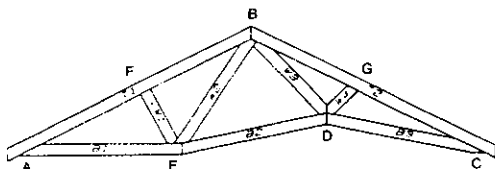
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ON-LINE DATA P.O. Box 2750
Richardson, TX 75080

DOYLE, OLES & CUCCI

*A Professional Corporation
Counsellors at Law*

JOHN PAUL DOYLE
EDWARD M. OLES
STEVEN N. CUCCI

1500 ROUTE 88 WEST

P.O. BOX 1609

Brick, New Jersey 08723
(908) 840-3600

TELEFAX # (908) 840-4443

March 11, 1992

RE: PANDYA/PIZZA HUT SITE PLAN
OUR FILE NO. 7494

Mrs. E. Joan Kull, Secretary
Brick Township Planning Board
401 Chambers Bridge Road
Brick, NJ 08723

RECEIVED
MAY 1 2 1992
BRICK TWP. PLANNING BOARD

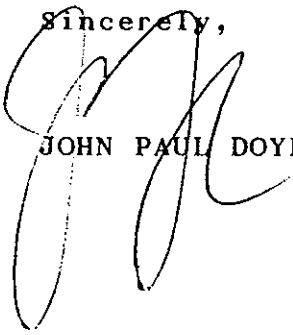
Dear Mrs. Kull:

I am in receipt of your letter of March 3, 1992. A review of the application indicates that it was only for Lots 1, 2 and 3. The resolution states this absolutely. Moreover, at the hearing we specifically said that Lot 4 would be excluded from the application, for if it were otherwise, the whole case would have to start anew with new notices. The Board concurred.

The applicant voluntarily agreed to consolidate Lot 4 which voluntary consolidation was noted in the approval resolution. Under the circumstances I do not believe that my client is required to install, at additional expense to him, curbs and sidewalks.

Let me note, however, in any event, the curb already exists. In addition, after speaking to my client, he indicates as a part of his ongoing site work, he will install the sidewalks voluntarily. I assume the Township will accept them as well as the existing curb in fulfillment of any obligation.

Sincerely,


JOHN PAUL DOYLE

JPD:dcl

cc: Kenneth B. Fitzsimmons, Esq.
William P. Farrell, Jr, P.E.
James F. Stanton, P.E., P.P.
Ramesh J. Pandya

SIZING FOR WATER AND SEWER SERVICES

Property Owner Pizza Hut Date 2/28/92
 Property Address BRICK BLVD Block 383-40 Lot 1-4

Zoning _____ Use Group _____

Contractor ED'S PLG e HTg License No. Registration 8869

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu)	Water Units	(dfu)	Drainage Units
1. Water Closet	<u>3</u>	<u>(10)</u>	<u>30</u>	<u>()</u>	_____
2. Lavatory	<u>4</u>	<u>(2)</u>	<u>8</u>	<u>()</u>	_____
3. Bath Tub	_____	<u>()</u>	_____	<u>()</u>	_____
4. Shower Stall	_____	<u>()</u>	_____	<u>()</u>	_____
5. Kitchen Sink	<u>4</u>	<u>(4)</u>	<u>16</u>	<u>()</u>	_____
6. ^{map} Service Sink	<u>1</u>	<u>(4)</u>	<u>4</u>	<u>()</u>	_____
7. ^{pat} Laundry Tray	<u>1</u>	<u>(4)</u>	<u>4</u>	<u>()</u>	_____
8. Dishwasher	<u>1</u>	<u>(3)</u>	<u>3</u>	<u>()</u>	_____
9. Washing Machine ^{BAR Sink}	<u>1</u>	<u>(4)</u>	<u>4</u>	<u>()</u>	_____
10. Urinal	<u>1</u>	<u>()</u>	<u>10</u>	<u>()</u>	_____
11. Floor Drain	<u>11</u>	<u>(-)</u>	<u>—</u>	<u>()</u>	_____
12. Drinking Fountain	<u>1</u>	<u>()</u>	<u>1</u>	<u>()</u>	_____
13. Air Conditioner (water cooled)	_____	<u>()</u>	_____	<u>()</u>	_____
14. Dental Unit	_____	<u>()</u>	_____	<u>()</u>	_____
15. Lawn Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
16. Fire Sprinkler No. of Heads	_____	<u>()</u>	_____	<u>()</u>	_____
17. _____	_____	<u>()</u>	_____	<u>()</u>	_____
18. _____	_____	<u>()</u>	_____	<u>()</u>	_____

Total 80
 Gallons per minute 38
 Size of Service 1 1/2

Date: 2/8/92 Approved: Cervino Arthur
 Brick Township Plumbing Inspector

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK, N. J. 08723



Daniel F. Newman, Mayor

Members of Township Council:
Warren H. Wolf, Council President
Charles E. Anderson
Patrick L. Bottazzi
Mary Anne L. Butler
Andrew R. Ciesla
Joseph C. Scarpelli
David W. Wolfe

Office of Municipal Clerk
(201) 477-3000

Francis E. Smith, RMC
Municipal Clerk

Joyce A. Shafer, RMC
Assistant Municipal Clerk

RE: ORDINANCE NO. 181-73 ADOPTED DECEMBER 18, 1973, ENTITLED:
"AN ORDINANCE ADOPTING PROCEDURES AND REGULATIONS FOR THE
ACCEPTANCE AND RETURN OF ESCROW MONIES FOR SITE PLANS AND
SUBDIVISIONS LOCATED IN THE TOWNSHIP OF BRICK, COUNTY OF
OCEAN AND STATE OF NEW JERSEY.

(Major Subdivision)

(Minor Subdivision)

(Site Plan)

Block 383.40 Lot(s) 1, 2 + 3
Location BRICK BLVD
Applicant's Name: PIZZA HUT % RAMESH PANDYA Case No.: 1982
Address: 829 OCEANVIEW DRIVE TOMS RIVER N.J. 08753

This is to certify that PIZZA HUT % RAMESH PANDYA
deposited the following monies as determined by the Township Engineer
by letter dated APRIL 15 1992

Cash Performance Bond Guarantee \$ 96,897.81 → posted 4/16/92
Letter of Credit No. \$ _____
Surety Performance Bond Guarantee \$ _____

Name of Bonding Company/Bank _____
Address _____

Approval of Bond
by Township Attorney _____

Signature

Date

Maintenance Bond (Two Years) (Three Years)

Name of Bonding Company _____
Address _____

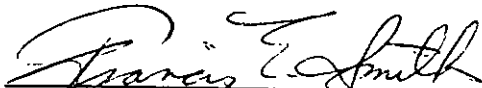
Approval of Bond
by Township Attorney _____

Signature

Date

I am, as of this date, releasing and returning SURETY PERFORMANCE BOND
No. _____, in the amount of \$ _____.

Name of Bonding Company _____
Address _____



FRANCIS E. SMITH, Municipal Clerk


Date

cc: Planning Board
Building Department

Municipal Engineer
Applicant

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



Stevan J. Zboyan, Mayor

Township Council:

Albert Chrobocinski, President
Victor Cantillo
Helen Fayad
Lee Hartman
Thomas G. Malorine
Mary Lou Powner
Warren H. Wolf

Department of Engineering

Municipal Engineer
(908) 477-3000, Ext. 273

April 15, 1992

Mr. Fran Smith
Township Clerk
Brick, N.J. 08723

REVISED ESTIMATE

SUBJECT: Pizza Hut
% Ramesh Pandya
Case # 1982 Site Plan
Block 383.40 Lots 1,2,3
Location: Brick Blvd.

Dear Fran:

Enclosed please find the cost estimate for the required Performance Guarantee and Engineering Inspection Fund for the subject project as follows:

Performance Guarantee: \$96,897.81 Must be Cash or Surety

Engineering Insp. Fund: \$ 9,354.18 Must be Cash.**

Very truly yours,

Henry W. Deibel
Henry W. Deibel, P.E., P.P.
Municipal Engineer

HWD/dea

cc: Mayor

Bus. Adm.
Council
Planning/Bd. of Adj. Sec.
Zoning Officer
Division of Inspections
Applicant w/ encl./Appl. Eng.
Dorothy Alach

** Applicant posted one-half of the required amount. Balance due once notified by the Engineering Dept.

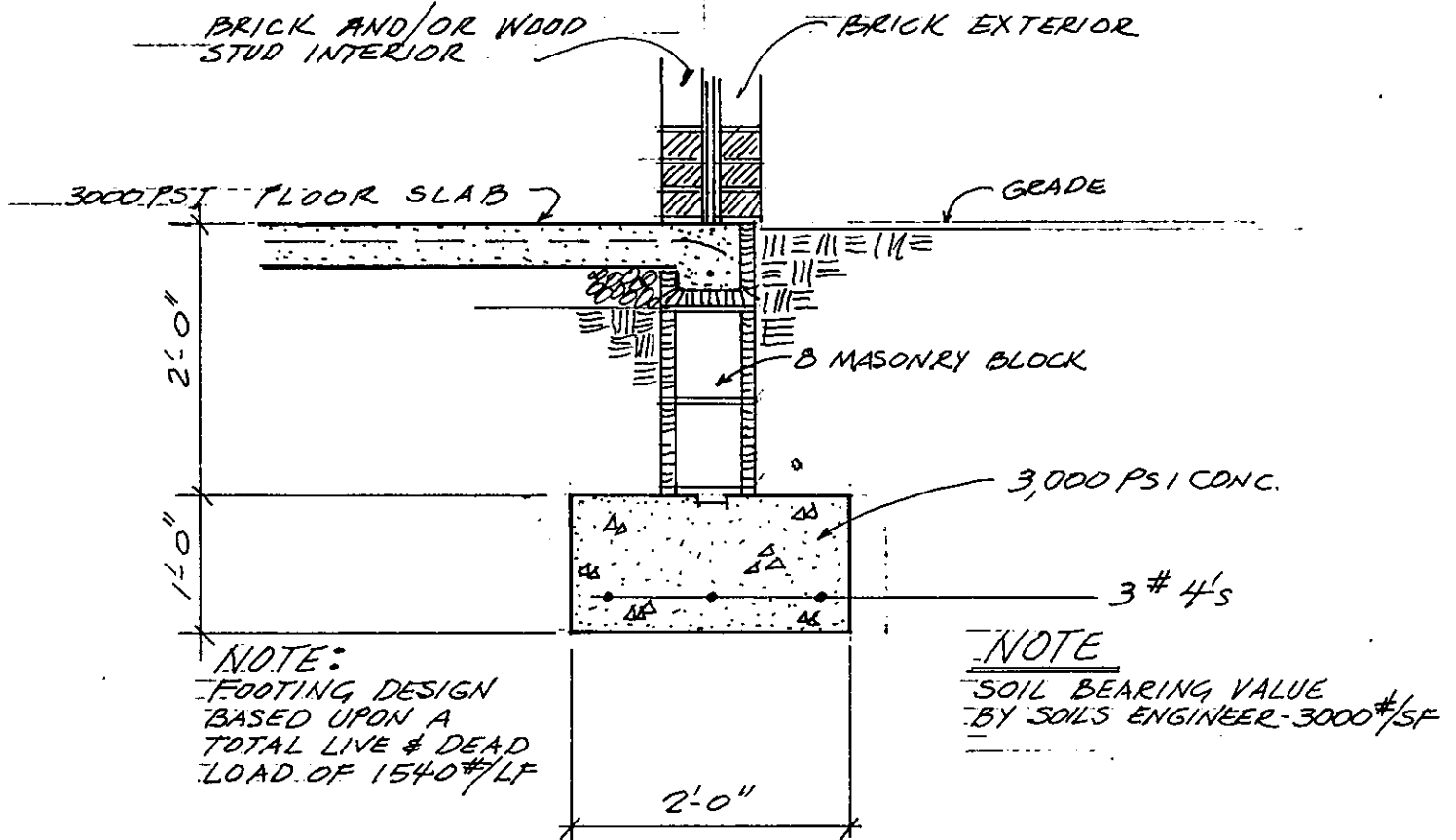
ATTN:

RONALD BYRD

908-370-4928 FAX

ORIGINAL BEING SENT VIA FEDERAL EXPRESS

WP



WILLIAM D. PRICE
ARCHITECT-PLANNER
232 CHERRY STREET
BLOUNTVILLE, TN 37617
615-323-4433 PH & FAX

FOOTING DETAIL

34" = 1'-0" JAN '92 WP

PIZZA HUT

BRICKTOWN, NJ



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

Stevan J. Zboyan, Mayor

Township Council:

Albert Chrobocinski, President
Victor Cantillo
Helen Fayad
Lee Hartman
Thomas G. Maiorine
Mary Lou Powner
Warren H. Wolf



Department of Administration & Finance

Division of Inspections
A.J. Cierzo
Construction Official
(908) 477-3000, Ext. 260
Fax: (908) 920-4850

May 18, 1992

To: Ray Korkowski, Building Sub-Code Official

From: Arthur J. Cierzo, Construction Official

Re: Placard Display on all Commercials

Please be advised that when a final commercial inspection is being made the owners or tenants of said building or store must have a placard displayed as per the UCC. indicating 1) the use group 2) occupancy load 3) fire rating.

This shall apply to any new tenant fit-ups and to existing when any changes, ie. alterations or modifications are made.

AJC/tl

cc: Building Inspectors
Plumbing Inspectors
Fire Inspectors
K. Batzel,



Please note our new address:
OCEAN SOIL CONSERVATION DISTRICT
714 Lacey Road
Forked River, NJ 08731
Telephone: 609-971-7002

ION DISTRICT

ms River, NJ 08754

RECEIVED

JUL 02 1992

DIV. OF INSPECTION

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK

PROJECT: PIZZA HUT SCD NO.: 4005

BLOCK NO.(s) 323-B LOT NO.(s) 1, 3

Complete Compliance ☐

Temporary Compliance ☒

BLOCK NO.	LOT NO.	CONDITIONS
		THIS TEMPORARY COMPLIANCE EXPIRES 7/1/92 ALL REQUIRED WORK TO BE COMPLETED BY ABOVE DATE. FAILURE TO COMPLETE REQUIRED WORK WILL RESULT IN ADDITIONAL FEES BEING CHARGED. Total Fees Due: \$ <u>55.00</u>

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT: [Signature]

AUTHORIZED DISTRICT SIGNATURE: [Signature]

Date: 6/30/92

Distribution: White-Township Canary-Applicant Pink-District

A4687



OCEAN COUNTY SOIL CONSERVATION DISTRICT

6 Mott Place, CN. 2191, Toms River, NJ 08754
Telephone: 201-244-7048

RECEIVED

JUL 15 1992

REPORT OF COMPLIANCE

DIV. OF INSPECTION

TO: CONSTRUCTION CODE OFFICIAL

MUNICIPALITY: BRICK

PROJECT: PIZZA HUT

SCD NO.: 4005

BLOCK NO.(s) 383 - B 40

LOT NO.(s) 1, 3

Complete Compliance ☒

Temporary Compliance ☐

BLOCK NO.	LOT NO.	CONDITIONS
		APPLICANT REMAINS RESPONSIBLE FOR COMPLETE GERMINATION OF ALL SEEDED AREAS.
		Total Fees Due: \$ <u> </u>

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act. (N.J.S.A. 4:24-39 et. seq.)

AGENT RESPONSIBLE FOR PROJECT:

AUTHORIZED DISTRICT SIGNATURE:

Date: 7/10/92

Distribution: White-Township Canary-Applicant Pink-District

A4687

ATTN:RONALD BYRD

708-370-4928 FAX

ORIGINAL BEING SENT VIA FEDERAL EXPRESS

WP

BRICK AND/OR WOOD
STUD INTERIOR

BRICK EXTERIOR

3000 PSI FLOOR SLAB

GRADE

8 MASONRY BLOCK

3,000 PSI CONC.

3 # 4's

NOTE:FOOTING DESIGN
BASED UPON A
TOTAL LIVE & DEAD
LOAD OF 1540 #/LFNOTESOIL BEARING VALUE
BY SOILS ENGINEER 3000 #/SF

WILLIAM D. PRICE
ARCHITECT • PLANNER
232 CHERRY STREET
BLOUNTVILLE, TN 37617
615-323-4433 PH • FAX

FOOTING DETAIL

34" = 1'-0" JAN '92 WP

PIZZA HUT

BRICKTOWN, NJ



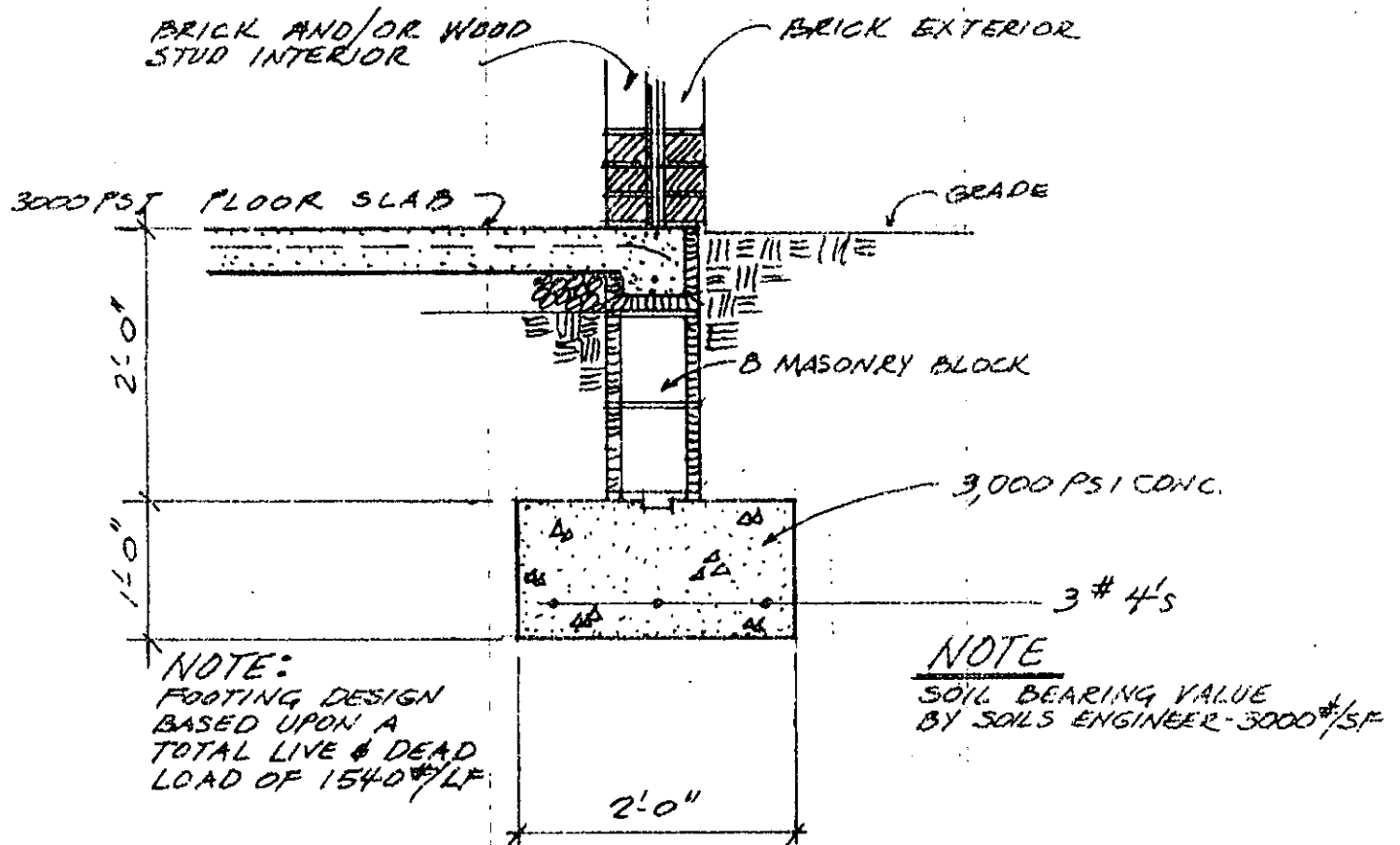
ATTN:

RONALD BYRD

908-370-4928 FAX

ORIGINAL BEING SENT VIA FEDERAL EXPRESS

WP



WILLIAM D. PRICE
ARCHITECT-PLANNER
232 CHERRY STREET
BLOUNTVILLE, TN 37617
615.323.4433 PH+FAX

FOOTING DETAIL

34" = 1'-0"

JAN '92 WP

PIZZA HUT
BRICKTOWN, NJ



ASSOCIATED CONSTRUCTION
SERVICES, INC.

FACSIMILE COVER SHEET

TO: Fire Inspector
&/or Ron Byrd

DATE: 6/30/92

FAX TO #: 908-920-4850

FROM: David Owens

FAX #: (615) 968-5930

RE: Pizza Hut
Bricktown, NJNUMBER OF PAGES: 3
(Including Cover)

TIME SENT:

HANDLING INSTRUCTIONS:

High Priority (Deliver Immediately)
Call When Completed - (615) 968-7822
Normal Processing

REMARKS:

100 FIFTH STREET
BRISTOL, TN 37620 - (615) 968-7822

W.D.PRICE-ARCHITECT TEL:615-323-4433

Mar 25,92 14:55 No.002 P.01

25 March 1992

WILLIAM D. PRICE A.I.A.
ARCHITECT • PLANNER
232 CHERRY STREET
BLOUNTVILLE, TN 37817
(615) 323-4433Bricktown Planning Board
Bricktown, New JerseyRe: Pizza Hut
Block 383-40, Lots 1 - 4

COPY

In reply to your items listed in the Correction List of the Plan Review Record dated 3-13-92, please consider the following clarifications:

01. NEED CONSTRUCTION CLASSIFICATION. BOCA page 57.
Construction classification is Type 5B (Combustible/Unprotected) with requirements listed in table 401, page 58.
Use Group A-3 Assembly (Restaurant) with one story, 4,200 square feet maximum gross allowed. Proposed construction is one story and 3,674 square feet.
02. OCCUPANT LOAD. BOCA page 135.
Per 806.1.1 - Actual Number of seats in Dining Room as shown on Sheet A Equipment Plan and Sheet 2 Floor Plan IS 130. Maximum number of employees is 15. Total occupant load is 145 for the standard floor plan of 43'-0" x 90'-0".
03. STORAGE ROOMS. BOCA Page 56.
There are no specified storage rooms in this facility. There are shelving units throughout the Kitchen area that hold various canned goods, and other supplies associated with Kitchen and Dining services. No specific requirements on page 56 of the BOCA code apply to this project.
04. STORAGE AREA SPECIAL USE AREAS. BOCA Page 222.
Special use areas 1005.2.2 not applicable in this project. No specific storage rooms or areas are designated on the Equipment Plan Sheet A or Floor Plan Sheet 2.
05. STANDBY POWER. BOCA Page 444.
Section 2706.0 Emergency Electrical Systems. 2706.1 General:
Emergency electrical systems are those systems required to supply power automatically for illumination and equipment in the event of failure of the normal power supply.

2706.2 Capacity: The emergency systems shall have the capacity to operate equipment such as means of egress lighting, exit signs, door locks, and any other emergency equipment as required by other sections of this code. COMPLIANCE IN NEXT PARAGRAPH.

(Continued)

Page 2

Bricktown Planning Board
RE: Pizza Hut

Egress lighting (Fixture K) and Exit lights (Fixture E) as shown on the Electrical Floor Plan sheet 8, are equipped with battery power. This is the only emergency power required for this project by BOCA.

07. OUT DOOR APPLIANCES INSTALLATION. BOCA MECHANICAL CODE Page 41.
All roof top mechanical equipment complies with Section M-405.0 OUTDOOR INSTALLATION and M-403.0 EQUIPMENT INSTALLATION. Access to the roof top equipment is via pull down stair as shown on Floor Plan Sheet 2 in rear of building. This stair leads to the attic, and access to the roof is via ladder thru the roof hatch, location shown on sheet A-5 (Roof Framing Plan) and sheet 9 (Roof Equipment Location Plan). The requirement for guards as noted in M-405.2 is met by the roof parapet that is 60" high around the perimeter of all roof top equipment, see Elevation Sheet 3 and Truss Section on Sheet 6.
08. MECHANICAL EQUIPMENT. BOCA MECHANICAL CODE Page 39.
All roof top equipment meets or exceeds the requirements of Article 4, MECHANICAL EQUIPMENT beginning page 39 of BOCA MECHANICAL CODE.
09. FIRE DAMPERS. BOCA MECHANICAL CODE Page 35.
Fire dampers not required as the mechanical duct system does not penetrate any fire rated structure.
10. FURNACES 2000 CFM OR MORE NEED S.D. SHUT OFF. BOCA MECH. Page 32.
M-307 will be complied with. See Sheet 9 and note the "SD" (smoke detector) location in the return air grills of AC-1 and AC-3. AC-2 is less than 2000 CFM, therefore smoke detectors are not required per BOCA Mechanical Code.
11. SMOKE DETECTORS COMMON AREAS. NO BOCA REFERENCE LISTED.
Cannot find reference to smoke detectors being required, other than

the mechanical equipment requirement, in any part of the A-3 Group Use definition. We will gladly install smoke detectors, other than those shown, if required.

William D. Price

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