

TOWNSHIP OF BRICK

JES JEWELRY BOUTIQUE

CONSTRUCTION PERMIT
APPLICATIONRECEIVED
JUN 10
BUILDING

IDENTIFICATION

Proposed Work at: 2528 Hooper Ave (Red Lion Plaza)
Owner Name: SUE & JOE IHNAT Tel. (201) 458-8150
Address: 1450 VIOLETTA CT LAKEWOOD, N.J. 08701
Principal Contractor: _____ Tel. (____) _____
Address: _____
Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
Architect or Engineer: _____ Tel. (____) _____
Address: _____
Responsible Person in Charge of Work: _____ Tel. (____) _____

PROPOSED WORK

TYPE OF WORK		B. CATEGORIES OF WORK		D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?	
1. ☐ Minor Work (Single Trade)	Complete only II.B., III and IV.A. and Page 2	Permit/Category	Estimated	1. ☐ Elevators/Dumbwaiters	
2. ☐ Small Job (\$5,000 and no Prior Approvals)		1. ☐ Building/Structural	\$ _____	2. ☐ High-Pressure Boilers	
3. ☐ New Building		2. ☐ Plumbing	_____	3. ☐ Refrigeration Systems	
4. ☐ Addition		3. ☐ Electrical	_____	4. ☐ Pressure Vessels	
5. ☒ Alteration		4. ☐ Fire Protection	_____	5. ☐ Hazardous Uses/Places of Assembly	
6. ☐ Repair, Replacement		5. ☐ Other _____	_____	6. ☐ Cross-connections/Backflow Preventors	
7. ☐ Demolition		6. ☐ Other _____	_____	7. ☐ Sprinklers	
8. ☐ Other: <u>C/O</u>		TOTAL COST \$ <u>100</u>		8. ☐ Smoke Control Systems in Open Wells	
C. DO YOU WANT:					
1. ☐ Partial Releases		2. ☐ Prototype Processing			

I. DESCRIPTION OF BUILDING USE (USE GROUPS)

RESIDENTIAL

1. ☐ Hotels (R-1) If new construction, enter no. of dwelling units _____
2. ☐ Multi-Family (R-2) HMD Reg. No.: _____
3. ☐ Two Family (R-3b) If other than new construction, enter no. of dwelling units: _____
4. ☐ One-Family (R-3a) Before Construction: _____
After Construction: _____
Net Gain (or loss): _____

NON-RESIDENTIAL

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

State Specific Use: Jewelry Store

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

B. HEATING FUEL

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

C. TYPE OF SEWAGE DISPOSAL

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

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

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

LDS BR 10109775

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

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

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

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

SIGNATURE

Joseph Shatt

DATE

6-10-87

II. AGENT SECTION

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

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

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

☐ Check if contractor.

AGENT NAME

TEL. ()

ADDRESS

SIGNATURE

PERMIT CONTROL

I. PLAN REVIEW STATUS

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

- ☐ PARTIAL RELEASES
☐ PROTOTYPE PLAN - FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date Receiver	Approval Date	Reviewer	Comments
☐	BUILDING	6/19/87	6/25/87	B.V.	
	Footings/Foundations				
	Framing				
	Architectural				
	Other 2		6/10/87	J.C.	
☐	PLUMBING				
☐	ELECTRICAL				
☒	FIRE PROTECTION		6/11/87	J.C.	
☐	OTHER				

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
	BUILDING		6-25-87	W.S.
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
	PLUMBING		6-11-87	J.C.
	ELECTRICAL		6-25-87	J.C.
	FIRE PROTECTION			
	OTHER			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

- ☒ Temporary Certificate of Occupancy
 Date Expired 6-26-87
☐ Temporary Certificate of Occupancy
 Date Expired _____
☒ Certificate of Occupancy
 No. 11350
☐ Certificate of Continued Occupancy
 No. _____
☐ Certificate of Approval
 No. _____
☐ None

Date issued

6-26-87
9-25-87

IV. ON-GOING INSPECTIONS

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

Date Posted to
 Log and Tickler

V. FEE SUMMARY

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

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$ 7.50
PLUMBING	
ELECTRICAL	
FIRE PROTECTION	15.00
OTHER	
SUBTOTAL	\$ 22.50
- LESS: 20% of subtotal (when plan review performed by state agency).	(5.00)
D.C.A. TRAINING FEE .0006 x _____	
CERTIFICATE OF OCCUPANCY	20.00
OTHER	
OTHER	
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ 47.50
DATE <u>9/16/87</u> Collected By <u>J.C.</u>	

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

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

C. TOTAL CONSTRUCTION FEES COLLECTED

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

TOWNSHIP OF BRICK



CERTIFICATE

CERT. NO.	11380
DATE ISSUED	9-25-87
Block	549
Lot	5, 6, 9, 10,
Subdivision	12.2

IDENTIFICATION

Owner	Sue's Jewelry Boutique	Agent	
Address	2528 Hooper Ave.	Address	
	Red Lion Plaza		
Tel. ()	Brick, NJ	Tel. ()	
Work Site Address		Lic. No.	
	2528 Hooper Ave.	Federal Emp. No.	

PAYMENTS

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

CERTIFICATE OF OCCUPANCY/APPROVAL

A. ☒ 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.

B. ☐ CERTIFICATE OF CONTINUED OCCUPANCY

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

C. ☐ TEMPORARY CERTIFICATE OF OCCUPANCY

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

D. DESCRIPTION OF WORK:

Retail Store

USE GROUP B

FIRE GRADING 2 hours

MAXIMUM LIVE LOAD _____

MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE Business

FINAL COST OF CONSTRUCTION: \$ 100.

Arthur J. Cenzo
CONSTRUCTION OFFICIAL

TOWNSHIP OF BRICK



CERTIFICATE

CERT. NO.	11380
DATE ISSUED	6-26-87
Block	549
Lot	5, 6, 9, 10, 12
Subdivision	

IDENTIFICATION

Owner	Sue's Jewelry Boutique	Agent	S & J. Ihnat
Address	2528 Hooper Ave Red Lion Plaza Brick, N.J.	Address	
Tel. ()		Tel. ()	
Work Site Address	2528 Hooper Ave	Lic. No.	
		Federal Emp. No.	

PAYMENTS

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

CERTIFICATE OF OCCUPANCY/APPROVAL

- A. ☐ 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.

- B. ☐ CERTIFICATE OF CONTINUED OCCUPANCY

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

- C. ☒ TEMPORARY CERTIFICATE OF OCCUPANCY

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

Pending completion of entire building

- D. DESCRIPTION OF WORK:

Retail Store

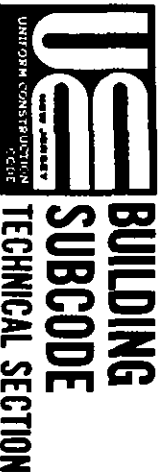
USE GROUP	B	FIRE GRADING	2 hour
MAXIMUM LIVE LOAD		MAXIMUM OCCUPANCY LOAD	
SPECIFIC USE	Retail Jewelry Store		

FINAL COST OF CONSTRUCTION: \$ 100.00

Arthur J. Cery
CONSTRUCTION OFFICIAL

TOWNSHIP OF BRICK

Sue's Jewelry Boutique



PERMIT NO. 11280
 DATE ISSUED 6-16-87
 REVISION DATE _____
 Block 5449 Lot 569101-2
 Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner Sue & Joe THNAT

Contractor _____

Address 1450 VIOLET CT

Address _____

Tel. 201, 458-8150Work Site Address 2528 Hooper Ave

Tel. (_____) _____

Federal Emp. No. _____

Lic. No. _____

LAKESWOOD, N.J. 08761

KED Lion Plaza

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Give detail description including materials used, dimensions, etc.

%

TYPE OF WORK:

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

Fee Basis

\$

Fee

\$

SUBTOTAL

\$

\$

Minimum Building Fee (if applicable)

\$

\$

Total Building Fee (Greater of Minimum or Subtotal)

\$

\$

☐ See Plans

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____

No. of Stories _____ Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area—Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

TOWNSHIP OF BRICK

Sue's Jewelry Boutique



**BUILDING
SUBCODE
TECHNICAL SECTION**



PERMIT NO. 11280
DATE ISSUED 6.16.87
REVISION DATE _____
Block SH4 Lot 6.9.10.1
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner SUE & JOE LHMAT
Address 1450 VIOLET CT
LAKEWOOD, N.J. 08701
Tel. (201) 458-8150
Work Site Address 2528 HOOVER AVE
KED LION PLAZA

Contractor _____
Address _____
Tel. (____) _____
Lic. No. _____
Federal Emp. No. _____

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

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Give detail description including materials used, dimensions, etc.

2/0

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

☐ See Plans

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____

No. of Stories _____ Total Building Area—All Floors _____ Sq. Ft.

Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.

Area—Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.

Estimated Cost of Building Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

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

JOB CONDITION/COMMENTS[illegible]

PLAN REVIEW

	Date	Initials
☒ No Plans Required	6-15-87	CA
☐ All		
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

☒ CO	☐ CCD	☐ CA
--	------------------------------	-----------------------------

Date: 6-24-87

Inspected By: U.S.

Type

☐	Footings/Foundation
☐	Slab
☐	Frame
☐	Architectural
☐	Insulation
☐	Finishes
☐	Energy
☐	Mechanical
☐	TCO
☐	Other

Approval Date

--	--	--	--	--	--	--	--	--

Sue's Jewelry Boutique



**FIRE
SUBCODE
TECHNICAL SECTION**



PERMIT NO. 11380
DATE ISSUED 8.16.87
REVISION DATE _____
Block 549 Lot 54, 24, 22
Subdivision _____

A. IDENTIFICATION

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

Owner Sue & Joe IHUAT Contractor _____

Address 1450 VIOLA CT Address _____

Tel. 201, 458-8156 Tel. (____) _____

Work Site Address 2528 HOPPER AVE Lic. No. _____

RED LION PLAZA Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE _____

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other _____ FEE _____

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

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

☐ Valves Supervised - Method: _____

Water Supply - Source: _____ Size: _____

FD Connection Location: _____

Estimated Cost of Work: \$ _____

B3. ALARM

TYPE: ☐ Manual ☐ Automatic FEE _____

Supervision Type: ☐ Local ☐ Central

☐ Proprietary ☐ Remote Location

Estimated Cost of Work: \$ _____

B4. STAND PIPES

Pipe Size: _____ Pump Size: _____

Water Source: _____ Size: _____

FD Connection Location: _____

Hose Station: ☐ Yes ☐ No

Estimated Cost of Work: \$ _____

B5. OTHER

Subtotal \$ 15-

Estimated Cost of Work: \$ _____

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO₂

☐ Halon ☐ Foam

☐ Other _____

Manual Pull: ☐ Yes ☐ No

Locations: _____

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP _____ Present _____ Proposed _____

Heating Systems - Location: _____

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

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

Total Estimated Cost of Fire Protection Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

Minimum Fire Protection Fee (If Applicable)
Total Fire Protection Fee (Greater of Minimum or Subtotal)

\$ _____

Sue's Deluxery Boutique



**FIRE
SUBCODE
TECHNICAL SECTION**



PERMIT NO. 11380
DATE ISSUED 6.18.87
REVISION DATE _____
Block 549 Lot 6, 7, 10
Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner Sue & Joe IHNAT

Contractor _____

Address 1450 Viola Ct

Address _____

LAKEWOOD, N.T. 08701

Tel. (201) 458-8156

Tel. (_____) _____

Work Site Address 3528 Hopper Ave

Lic. No. _____

Ken Lion PLAZA

Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

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

AGENT SIGNATURE

B. TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other _____

FEE

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

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

☐ Valves Supervised - Method: _____

Water Supply - Source: _____ Size: _____

FD Connection Location: _____

Estimated Cost of Work: \$ _____

B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO₂

☐ Halon ☐ Foam

☐ Other _____

Manual Pull: ☐ Yes ☐ No

Locations: _____

Estimated Cost of Work: \$ _____

B3. ALARM

TYPE: ☐ Manual ☐ Automatic

FEE

Supervision Type: ☐ Local ☐ Central

☐ Proprietary ☐ Remote Location

Estimated Cost of Work: \$ _____

B4. STAND PIPES

Pipe Size: _____ Pump Size: _____

Water Source: _____ Size: _____

FD Connection Location: _____

Hose Station: ☐ Yes ☐ No

Estimated Cost of Work: \$ _____

B5. OTHER

Subtotal

Minimum Fire Protection Fee (If Applicable)

Total Fire Protection Fee (Greater of Minimum

or Subtotal)

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP _____ Present _____ Proposed _____

Heating Systems - Location:

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

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

Total Estimated Cost of Fire Protection Work: \$ _____

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION – FIRE

DATE _____

JOB CONDITION/COMMENTS[illegible]

JOB SUMMARY

- ☐ No Plans Required
☒ Plan Review Approved

Date: 6-15-87
Approved By: C. Buelb

Approved By: _____

INSPECTIONS FINAL

☒	CCO
☐	CCO
☐	CA

Date: 6-25-77
Inspected By: R. Adels

Inspected By: *[Signature]*

INSPECTIONS

Type	
Fire Suppression	☐
Fire Alarm	☐
Smoke Test	☐
TCO	☐
Other	☐
Other	☐
Other	☐
Other	☐

Failure Date

Approval Date

[illegible]

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John J. [unclear]
James J. [unclear]
MUNICIPALITY B.T.



CUT-IN-CARD

LOCATION Red Lion Plaza Corp. Asso. Ave + UTILITY CO RP
DRUM POINT RD. STORE 2528 BLK 549 LOT 5, 6, 9, 10-12, 2

OWNER PAT BOTTAZZI OCCUPANT _____

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

☒ FINAL ☐ TEMPORARY This approval void after _____ days
SERVICE 150 RANGE _____ WATER HEATER _____
AIR COND _____ ELECT HEAT _____ MISC _____
COMMENTS _____

DATE 6-11-87 PERMIT # 257877 INSPECTOR [Signature]
Elec. 104 Insp. Lic# 1477

