O.K. ED

RECEIVED
SEP 7 1984
BUILDING

TOWNSHIP OF BRICK

CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: 395 BRICK BLVD. BRICKTOWN NJ. (Drum Plaza)
2. Owner Name: GEORGE MARRONE Tel. (201) 2703701
   Address 1057 SHEILA DRIVE TOMS RIVER NJ.
3. Principal Contractor: MICHAEL COLUCCI Tel. (201) 2553951
   Address PO BOX 2104
   Lic. No. or Builder Reg. No. 02852 Federal Emp. No.
4. Architect or Engineer: JOE VALENTE. Tel. ( )
   Address 852 ASTORIA DRIVE.
5. Responsible Person in Charge of Work GEORGE MARRONE Tel. (201) 2703701

920-2224

5417

II. PROPOSED WORK

A. TYPE OF WORK

1. ☐ Minor Work (Single Trade)
2. ☐ Small Job ($5,000 and no Prior Approvals)
   Complete only II.B., III and IV.A. and Page 2
3. ☒ New Building
4. ☐ Addition
5. ☒ Alteration
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☐ Other:

B. CATEGORIES OF WORK

Permit/Category		Estimated
1. ☑	Building/ Structural	$ 1000
2. ☐	Plumbing	3,800
3. ☐	Electrical	2,000
4. ☐	Fire Protection	1,000
5. ☐	Other	
6. ☐	Other	
	TOTAL COST	$ 7800.00

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Dumbwaiters
2. ☐ High-Pressure Boilers
3. ☐ Refrigeration Systems
4. ☐ Pressure Vessels
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Cross-connections/ Backflow Preventors
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R–1)
2. ☐ Multi-Family (R–2)
   HMD Reg. No.:
3. ☐ Two Family (R–3b)
4. ☐ One-Family (R–3a)

If new construction, enter no. of dwelling units

If other than new construction, enter no. of dwelling units:
Before Construction:
After Construction:
Net Gain (or loss):

B. NON-RESIDENTIAL

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

State Specific Use:

If Change in Use Group, Indicate Former:

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

B. HEATING FUEL

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

C. TYPE OF SEWAGE DISPOSAL

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

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

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

15-16

LDS BR 10310212

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.

X SIGNATURE George Marlow DATE Sept 7, 1984

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 _____

BLOCK NO. 547-A LOT NO. 15-16 SUBDIVISION _____ PERMIT NO. 2017

PRIOR APPROVALS CHECKLIST

APPROVALS	LOCAL				COUNTY				REGIONAL				STATE				COMMENTS
	Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		
	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	
☐ Planning Board																	
☐ Zoning Board																	
☐ Sewer Authority																	
☐ Water Authority																	
☐ Fire Department																	
☐ Police Department																	
☐ Health Department																	
☐ Soil Conservation																	
☐ N.J. Dept. of Community Affairs																	
☐ N.J. Dept. of Transportation																	
☐ N.J. Dept. of Environmental Protection																	
☐ Other: _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

	EDITION OF CODE		EDITION OF CODE		
☐ One and Two Family Dwellings	_____	☐ Mechanical	_____	☐ Flood Hazard	_____
☐ Building	_____	☐ Energy	_____	☐ As Built Elevation Certification	_____
☐ Electrical	_____	☐ Barrier Free	_____	☐ Other	_____
☐ Plumbing	_____	☐ Other	_____		_____

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	Plans Received By Receiver	Approval Date	Reviewer	Comments
☒	BUILDING	9-10-84	[illegible]	9-17-84	BD	
	Footings/Foundations					
	Framing					
	Architectural					
	Other Zoning					
☒	PLUMBING			9/18/84		- Rejected 9-18-84
☒	ELECTRICAL					
☒	FIRE PROTECTION			9-18-84	M.C.	ALL AS NOTED
☐	OTHER					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION			
✓	BUILDING		10-12-84 E. Jay	
	Footings/Foundations			
	Framing			
	Architectural			
	Other			
✓	PLUMBING			Plans OK on as noted
	ELECTRICAL			
✓	FIRE PROTECTION		10/29/84 Ehrhardt	
	OTHER			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☒ Temporary Certificate of Occupancy Date Expired 11-26-84	10-12-84
☐ Temporary Certificate of Occupancy Date Expired	
☐ Certificate of Occupancy No.	
☐ Certificate of Continued Occupancy No.	
☐ Certificate of Approval No.	
☐ None	

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	$ 60.00
PLUMBING	70.00
ELECTRICAL	•
FIRE PROTECTION	•
OTHER	•
SUBTOTAL	$ 130.00
– LESS: 20% of subtotal (when plan review performed by state agency).	(- 5.00)
D.C.A. TRAINING FEE .0006 x	= •
CERTIFICATE OF OCCUPANCY	20.00
OTHER	•
OTHER	•
TOTAL COLLECTED WHEN PERMIT ISSUED	$ 155.00

DATE 9-19-84 Collected By Pabe

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	$ •

CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work at: PASQUALS REST
2. Owner Name: George Morone Tel. (20) 477-7544
   Address FISHER BLVD BRICKTOWN, NJ
3. Principal Contractor: Design By Caldwell Tel. (609) 587-6320
   Address 825 RT #33 POBOX K HAMILTON SQUARE, NJ 08690
   Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
4. Architect or Engineer: _____ Tel. (___) _____
   Address _____
5. Responsible Person in Charge of Work ED CALDWELL Tel. (609) 587-6320

II. PROPOSED WORK

A. TYPE OF WORK

1. ☒ Minor Work (Single Trade)
2. ☐ Small Job ($5,000 and no Prior Approvals)
   Complete only II.B., III and IV.A. and Page 2
3. ☐ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☐ Repair, Replacement
7. ☐ Demolition
8. ☐ Other: _____

B. CATEGORIES OF WORK

Permit/Category	Estimated
1. ☐ Building/ Structural	$ _____
2. ☐ Plumbing	_____
3. ☐ Electrical	_____
4. ☒ Fire Protection	750.00
5. ☐ Other _____	_____
6. ☐ Other _____	_____
TOTAL COST	$ 750.00

C. DO YOU WANT:

1. ☐ Partial Releases 2. ☐ Prototype Processing

D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Dumbwaiters
2. ☐ High-Pressure Boilers
3. ☐ Refrigeration Systems
4. ☐ Pressure Vessels
5. ☐ Hazardous Uses/Places of Assembly
6. ☐ Cross-connections/ Backflow Preventors
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R–1)
2. ☐ Multi-Family (R–2)
   HMD Reg. No.: _____
3. ☐ Two Family (R–3b)
4. ☐ One-Family (R–3a)

If new construction, enter no. of dwelling units _____

If other than new construction, enter no. of dwelling units:

Before Construction: _____
After Construction: _____
Net Gain (or loss): _____

B. NON-RESIDENTIAL

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

State Specific Use: _____

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

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

B. HEATING FUEL

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

C. TYPE OF SEWAGE DISPOSAL

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

D. TYPE OF WATER SUPPLY

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

E. BUILDING CHARACTERISTICS

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

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 _____ DATE _____

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 Design By Caldwell TEL. 609, 587-6320

ADDRESS 825 Rt #33 a/a Box K

Hamilton Square, NJ 08690

SIGNATURE David Caldwell

BLOCK NO. _____ LOT NO. _____ SUBDIVISION Drum Pt Plaza PERMIT NO. 2077

PRIOR APPROVALS CHECKLIST

APPROVALS	LOCAL				COUNTY				REGIONAL				STATE				COMMENTS
	Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		Prelim. Approval		Final Approval		
	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	Init.	Date	
☐ Planning Board																	
☐ Zoning Board																	
☐ Sewer Authority																	
☐ Water Authority																	
☐ Fire Department																	
☐ Police Department																	
☐ Health Department																	
☐ Soil Conservation																	
☐ N.J. Dept. of Community Affairs																	
☐ N.J. Dept. of Transportation																	
☐ N.J. Dept. of Environmental Protection																	
☐ Other: _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	
☐ _____																	

SUBCODES AND SPECIAL REGULATIONS APPLICABLE:

	EDITION OF CODE		EDITION OF CODE		
☐ One and Two Family Dwellings	_____	☐ Mechanical	_____	☐ Flood Hazard	_____
☐ Building	_____	☐ Energy	_____	☐ As Built Elevation Certification	_____
☐ Electrical	_____	☐ Barrier Free ✓	_____	☐ Other	_____
☐ Plumbing	_____	☐ Other	_____		_____

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	Plans Received By Receiver	Approval Date	Reviewer	Comments
☐	BUILDING					
	Footings/Foundations					
	Framing					
	Architectural					
	Other _____					
☐	PLUMBING					
☐	ELECTRICAL					
☐	FIRE PROTECTION					
☐	OTHER _____					

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions			Final Inspection	Comments
_____	ALL CONSTRUCTION					
_____	BUILDING					
_____	Footings/Foundations					
_____	Framing					
_____	Architectural					
_____	Other _____					
_____	PLUMBING					
_____	ELECTRICAL					
X	FIRE PROTECTION				10-29-84	BE Lambert
X	OTHER Sprk. Test				10-30	MP

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:	Date Issued
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☐ Temporary Certificate of Occupancy Date Expired _____	_____
☐ Certificate of Occupancy No. _____	_____
☐ Certificate of Continued Occupancy No. _____	_____
☐ Certificate of Approval No. _____	_____
☐ None	

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	$ _____ •
PLUMBING	_____ •
ELECTRICAL	_____ •
FIRE PROTECTION	_____ •
OTHER _____	_____ •
SUBTOTAL	$ _____ •
– LESS: 20% of subtotal (when plan review performed by state agency).	(_____ •)
D.C.A. TRAINING FEE .0006 x _____	= _____ •
CERTIFICATE OF OCCUPANCY	_____ •
OTHER _____	_____ •
OTHER _____	_____ •
TOTAL COLLECTED WHEN PERMIT ISSUED	$ _____ •

DATE _____ Collected By _____

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

	Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY			•
OTHER			•
OTHER			•
– LESS: Refunds			(•)
TOTAL COLLECTED AFTER PERMIT ISSUED			$ •

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	$ _____ •
COLLECTED AFTER PERMIT (VB)	_____ •
TOTAL	$ _____ •

TOWNSHIP OF BRICK

"Pasquales Pizza"

CERTIFICATE

CERT. NO. 2077
DATE ISSUED 10-12-84
Block 547-A Lot 15, 16
Subdivision Drum Point Plaza

IDENTIFICATION

Owner George Marrone
Address 1057 Sheila Dr.
Toms River, NJ
Tel. ( )

Agent
Address
Tel. ( )
Lic. No.
Federal Emp. No.

Work Site Address 395 Brick Blvd.

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 November 26, 19 84 or the owner will be subject to a fine or order to vacate:

1. Full Compliance with Fire Department.

Ok 10-16-84

D. DESCRIPTION OF WORK:

Restaurant

USE GROUP M FIRE GRADING 3½ hours

MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE mercantile

FINAL COST OF CONSTRUCTION: $ 7,800.

Arthur J. Ciesyo
CONSTRUCTION OFFICIAL

U.C.C. Form F-260 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

TOWNSHIP OF BRICK

Pasquale's Pizzeria

CERTIFICATE

CERT. NO. 2077

DATE ISSUED 10-16-84

Block 547-A Lot 15,16

Subdivision Drum Point Plaza

IDENTIFICATION

Owner George Marrone

Address 1057 Sheila Drive
Toms River, NJ

Tel. ( ) _____

Work Site Address 395 Brick Blvd.

Agent Michael Colucci

Address _____

Tel. ( ) _____

Lic. No. _____

Federal Emp. No. _____

PAYMENTS

Fees Remitted $ _____

☐ Check No. _____

☐ Cash

☐ Other _____

Collected By: _____

Date: _____

CERTIFICATE OF OCCUPANCY/APPROVAL

A. XXX ☐ 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:

Restaurant

USE GROUP M

FIRE GRADING 3 hours

MAXIMUM LIVE LOAD _____

MAXIMUM OCCUPANCY LOAD _____

SPECIFIC USE mercantile

FINAL COST OF CONSTRUCTION: $ 7,800.

Arthur J. Ciesza
CONSTRUCTION OFFICIAL

U.C.C. Form F-260 (8/83) Light Green = Office Copy White = Applicant Copy Yellow/Orange = Tax Assessor Copy

TOWNSHIP OF BRICK

BUILDING SUBCODE TECHNICAL SECTION

PERMIT NO. _____
DATE ISSUED _____
REVISION DATE _____
Block 547 A Lot 1.5-1.6
Subdivision DRUM PT.

A. IDENTIFICATION

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

Owner GEORGE MARRONE
Address 345 BRICK BLVD BRICKTOWN N.J.
Tel. ( ) 840 2284
Work Site Address DRUM POINT PLAZA

Contractor MICHAEL COLUCCI
Address P.O. Box 2164 TOMS RIVER N.J.
Tel. (201) 255 3951
Lic. No. 02852
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.

☒ See Plans

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)*	$

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: $ 2000.00

D. COMMENTS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION — BUILDING

DATE	JOB CONDITION/COMMENTS

Fire Grading: Maximum Live Load: Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW

	Date	Initials
☐ No Plans Required		
☑ All	9-17-84	EW
☐ Footing/Foundation		
☐ Frame		
☐ Architectural		
☐ Other		

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 10-11-84 C

Inspected By: Ed Wyzo

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Footing/Foundation				
☐ Slab				
☐ Frame				
☐ Architectural				
☐ Insulation				
☒ Finishes				10-11-84 Ed
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other C/O				10-11-84 Ed

U.C.C. Form F-110 (8/83)

TOWNSHIP OF BRICK

FIRE SUBCODE TECHNICAL SECTION

PERMIT NO. 2077
DATE ISSUED
REVISION DATE
Block 542A Lot 15-16
Subdivision DRUM PT.

A. IDENTIFICATION

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

Owner GEORGE MARRANÉ
Address 1057 SHEILA DR. TOMS RIVER
Tel. (201) 270-6980
Work Site Address 395 BRICKTOWN NJ.

Contractor WORTH Fire Protection
Address 825 ST. Hwy. 33 P.O. Box K Hamilton Sq., NJ 08619
Tel. (609) 587-6320
Lic. No.
Federal Emp. No. 002-071-710/000

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.

Edward P. Caldwell
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 ☐ CO_2
☐ Halon ☐ Foam
☒ Other ANSUL #R-102 - wet system
Manual Pull: ☒ Yes ☐ No
Locations: _____

Estimated Cost of Work: $ 750.00 $ _____

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 B 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

PASQUELLAS PIZZA

☐ Partial Releases ☐ Prototype Processing

PERMIT 2077 PASQUELLAS PIZZA

PLAN REVIEW AND INSPECTION — FIRE

395 BRICK 6640
BLOCK 547A LOT 15-16

DATE	JOB CONDITION/COMMENTS
9-18-84	PLAN Review (1) FIRE EXT BY DOOR Kitchen-HALL
	(2) FULL STATION BY DOOR Kitchen-Hallway
	(3) CHECK ON (1) OR (2) SEPERATE BOTTLES
	FOR (2) SYSTEM (1 Bottle OK)
9-20-84	FIRE INSP: NOT DONE
10-2-84	SUPPRESSION TEST: APPROVED
10-4-84	FIRE INSP: NOT DONE
10-16-84	FINAL FIRE: APPROVED

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved AS NOTED
Date: 9-18-84
Approved By: MIKE CLAYTON

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 10-16-84
Inspected By: Mike Clayton

INSPECTIONS

Type	Failure Date			Approval Date
☒ Fire Suppression Test				10-2-84 MC
☐ Fire Alarm Test				
☐ Smoke Test				
☐ TCO				
☒ Other FINAL	9-20-84	10-4-84		10-16-84 MC
☐ Other				
☐ Other				
☐ Other				

U.C.C. Form F-140 (8/83)

PLAN REVIEW AND INSPECTION — PLUMBING

DATE	JOB CONDITION/COMMENTS
7-6-84	Extra fix Slab Rough ok DM
8-30-84	Extra " Vents OK

JOB SUMMARY

☐ No Plans Required
☒ Plan Review Approved
Date: 6-1-84
Approved By: J. D. Spl

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA
Date: 10-25-84
Inspected By: D Metcalf

INSPECTIONS

Type	Failure Dates			Approval Date
☒ Slab				6-14-84 DM
☒ Rough				8-30-84 DM
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCQ				
☐ Other ____				

U.C.C. Form F-130 (8/83)

PLUMBING SUBCODE TECHNICAL SECTION

UNIFORM CONSTRUCTION CODE — NEW JERSEY

PERMIT NO.
DATE ISSUED
REVISION DATE
Block 547-A Lot 15-16
Subdivision DRUM PT

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only*

When changing contractors, notify this office

Owner GEORGE MAKRONE
Address 395 BRICK BLVD
BRICKTOWN, N. J.
Tel. (201) 840-2224
Work Site Address 395 DRUM POINT PLAZA

Contractor ANTHONY T. DAMIANO SR.
Address 161 MAPLE AVE
IRVINGTON, N. J.
Tel. (201) 349-9310
Lic.No./Bus. Permit 927
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.

Anthony T. Damiano Sr.
AGENT SIGNATURE

B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

No.	Fixture	Fee	No.	Fixture	Fee
1	Water Closet/Bidet/Urinal	$ 6.00		Garbage Disposal	$
	Bathtub			Air Conditioner Unit	
3	Lavatory/Sink	15.00		Indirect Connection	
2	Shower/Floor Drain	10.00		Sewer Ejector	
1	Washing Machine	5.00	1	Grease Trap	25.00
	Dishwasher			Interceptor	
	Commercial Dishwasher			Backflow Device	
	Water Heater			Reduced Pressure Backflow Device	
	Domestic Boiler/ Furnace		3	Vent Stack	10.00
	Steam Boiler			Solar System	
	Water Util. Connection			Other	
	Sewer Util. Connection			Other	
	Hose Bibb			Other	
	Water Cooler			Other	
	COLUMN 1	$ 36.00		COLUMN 2	$ 35.00

Fee	
COLUMN 1	$ 36.00
COLUMN 2	$ 35.00
SUBTOTAL	$ 71.00
Minimum Plumbing Fee (if applicable)	$ 30.00
Total Plumbing Fee (Greater of Minimum or Subtotal)	$ 101.00

4/21/11

C. PLUMBING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed

Drainage — Material PVC SCHD 40 Size 4"-3"-2"-1½"
Building Sewer — Material PVC SCHD 25 Size 4"
Water Service — Material ABS 1" 160PSI Size 1"
Venting — Material PVC SCHD 40 Size 2"
Estimated Cost of Plumbing Work: $ 3,950

D. COMMENTS

Pasquale Rizzo

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION — PLUMBING

DATE	JOB CONDITION/COMMENTS

JOB SUMMARY

☐ No Plans Required
☐ Plan Review Approved
Date: 9/13/84
Approved By: [signature]

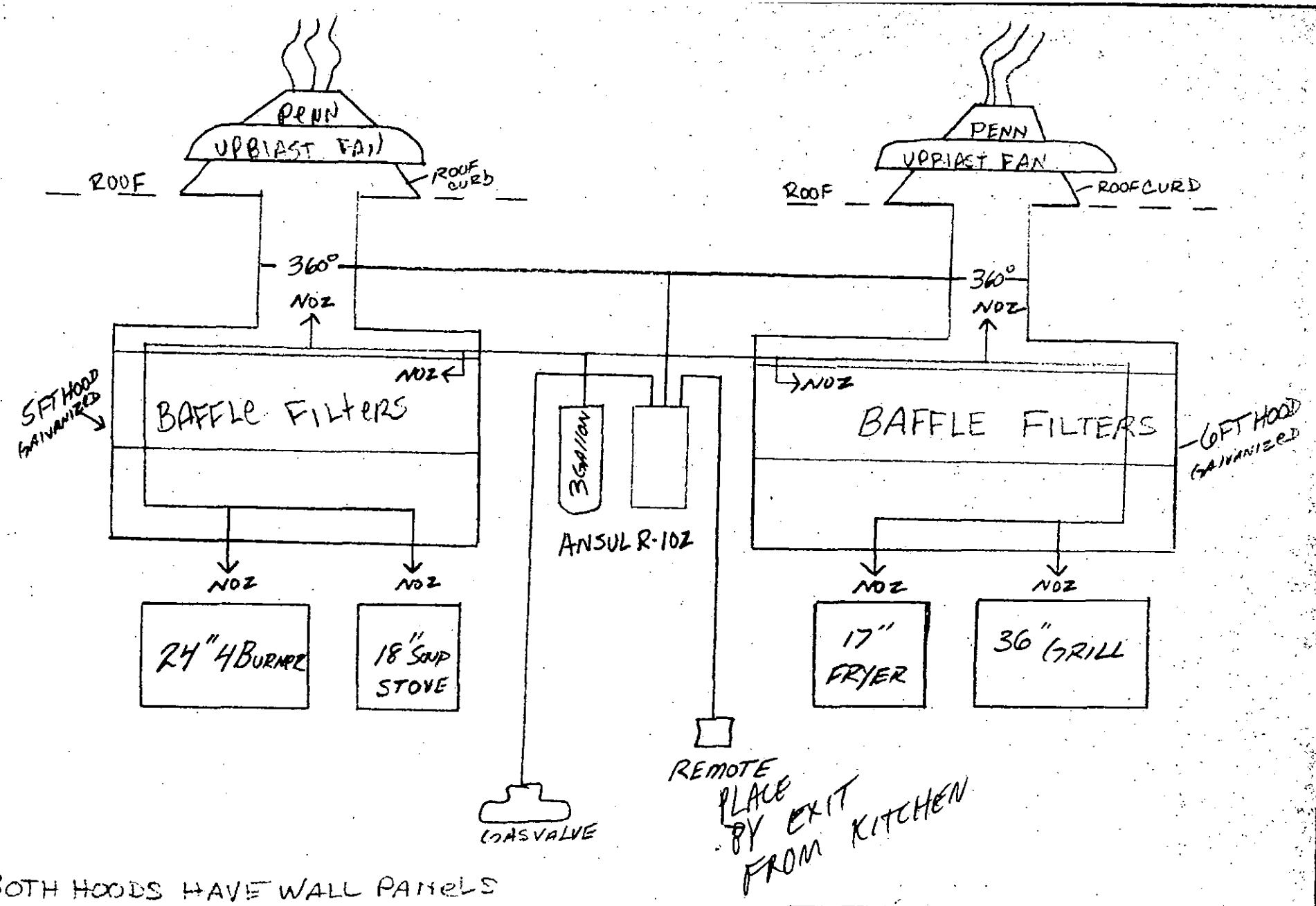
INSPECTIONS FINAL

☐ CO ☐ CCO ☐ CA
Date: 10-25-84
Inspected By: [signature]

INSPECTIONS

Type	Failure Dates			Approval Date
☐ Slab				
☐ Rough				
☐ Water				
☐ Sewer				
☐ Energy				
☐ Mechanical				
☐ TCO				
☐ Other _____				

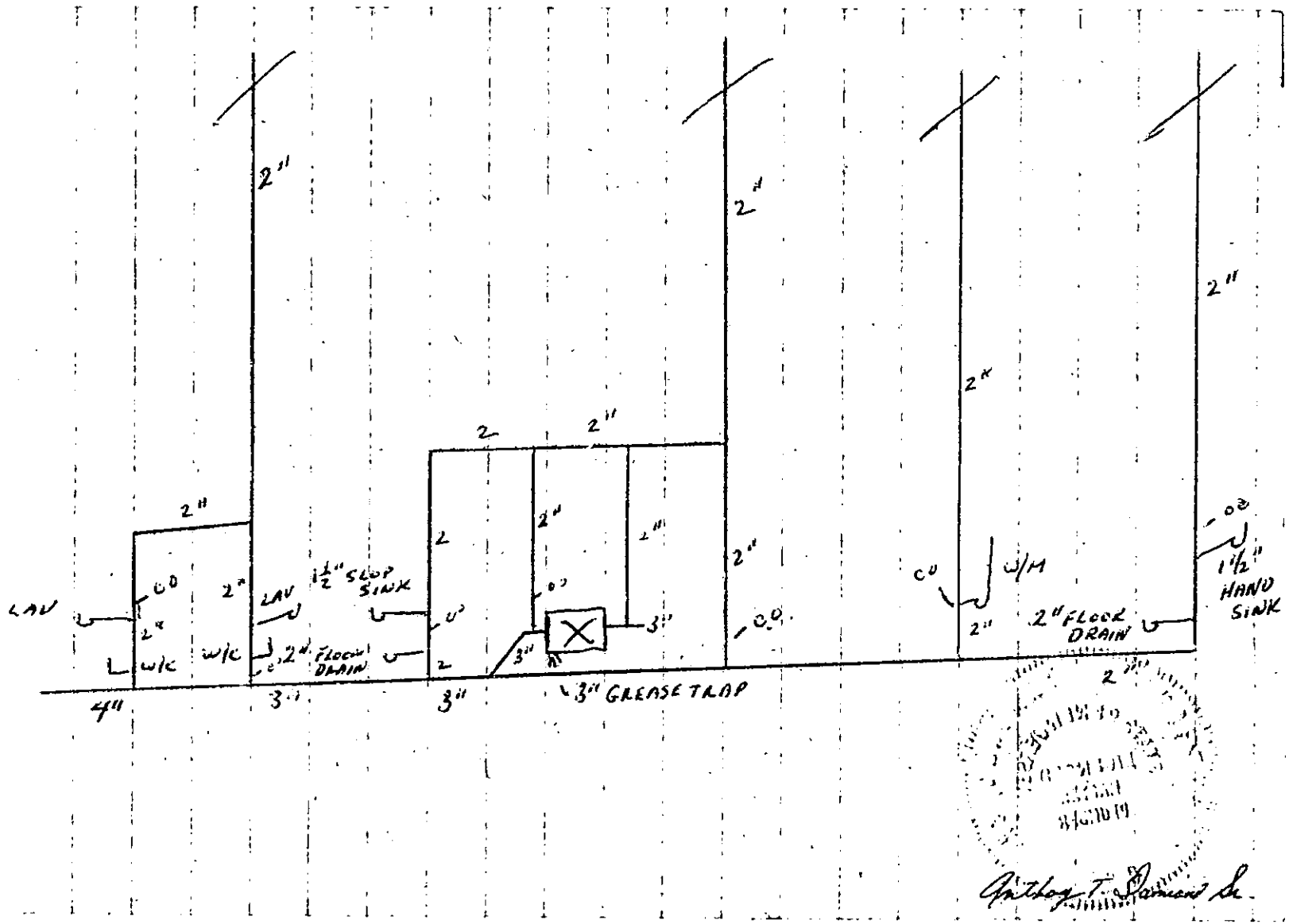
U.C.C. Form F-130 (8/83)



BOTH HOODS HAVE WALL PANELS
Remote 10' - 35' FROM HOODS
ALL ELECTRIC BY OTHERS
ALL WORK meets OR EXCEEDS
NFPA-96 + BOCA CODES

PASQUALS REST
FISHER BVD

DESIGN BY CALDWELL
POBOX K 825 RT #33
HAMILTON SQUARE, NJ 08690


LAV
2"
W/C
4"
LAV
1½" SLOP SINK
2" FLOOR DRAIN
3"
3" GREASE TRAP
W/M
2" FLOOR DRAIN
1½" HAND SINK
CO

Field

SIZING FOR WATER AND SEWER SERVICES

Property Owner Drum Point Plaza = Pizzeria Date 8-17-84

Property Address 395 Brick Blvd Block 397A Lot 15

Zoning _____ Use Group _____

Contractor Damiano License No. Registration 927

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu) Water Units		(dfu) Drainage Units	
1. Water Closet	2	(5)	10	(6)	12
2. Lavatory	3	(2)	6	(2)	6
3. Bath Tub		( )		( )	
4. Shower Stall		( )		( )	
5. Kitchen Sink	1	(4)	4	(3)	3
6. Service Sink	1	(3)	3	(3)	3
7. Laundry Tray		( )		( )	
8. Dishwasher		( )		( )	
9. Washing Machine	1	(3)	3	(3)	3
10. Urinal		( )		( )	
11. Floor Drain	2	(0)		(3)	6
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	26		33

WATER $15.00

SEWER $15.00

Gallons per minute 18

Size of Service 1" 4"

Date: _____

Approved: D Mutcall
Brick Township Plumbing Insp.

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

Date 10-29-84

NAME Drum Point Plaza

ADDRESS 305 Brick Blvd, Brick, NJ

PROPERTY LOCATION 395 Brick Blvd, Pasquale's Pizza

Account No. I851220 Block 547-A Lot 15

Residential	Commercial—Specify Type	No. of Units
	✓	

Size Sewer Svc.	Size Water Svc.	Meter Size
4"	1"	1"

	WATER SVC.	SEWER SVC.
APPLICATION FEES		
CONNECTION FEES	785-	900-
INSPECTION FEES	To be billed	

For the Authority N Mattiacci

OCEAN COUNTY HEALTH DEPARTMENT
C.N. 2191
Toms River, N.J. 08754
201-341-9700

CHARLES KAUFFMAN
PUBLIC HEALTH COORDINATOR

September 10, 1984

Mr. Arthur Cierzo,
Building Inspector
Township of Brick
401 Chambers Bridge Road
Brick, N.J. 08723

re: Proposed Floor Plans
Pizzeria Restaurant
395 Brick Blvd. (Drum Point Plaza)
Brick

Dear Mr. Cierzo:

This is to inform you that I have reviewed the proposed floor plans for the above-referenced restaurant and have found them to be in substantial compliance with Chapter 12, the N.J. State Retail Food Code. Therefore, I have no objections to the construction of this facility.

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

Sincerely,

Joseph A Gallos/pjp
Joseph A. Gallos,
Principal Sanitary Inspector

cc: Don Metcalf, Plumbing Inspector

JAG/pjp

BRICK TOWNSHIP

BUREAU OF FIRE PREVENTION

District No. 1

INSPECTOR'S REPORT

Date Oct. 16, 1984

Location Pasquale's Pizza Drum Point Plaza

Owner Jack Randezzo Jr. Owner's Address Brick Realty Apt. 111 Bldg 1

Occupants and purpose for which used Serving Food 477-8779

1st Floor Kitchen + Rest 2nd Floor None

Construction Mason Stories One With / Without Basement

Roof Construction Fire Resistant Condition Good

Attic Crawl space Access to Ceiling Tile Location —

Unprotected Openings:

Stairs, enclosed or open None Locations —

Inside Protection:

Date of Recharge Oct. 84 Condition of Extinguishers Good 2 DC CO2 WP AP Foam 5

Other fire detecting or extinguishing appliances:

Type Hood Ext Condition Good - Oct. 20 B.

Fire doors None Operating condition — If not automatic, are they kept closed —

Heating System. Kind Hot Air Fuel used Gas Storage arrangements Meter outside

Condition of stoves or furnace Good - New Mounting Roof

Protection above and around furnace and smoke pipe Unknown

Furnace room enclosed or open Open Door automatic or self-closing None

Light and Power: Voltage used 120-240 Fuses/Breakers examined O.K.

Location of entrance switch Hall Branch Fuses/Breakers of proper size O.K.

General condition Good

Trash: Facilities for storage Outside Bldg Frequency of removal Daily

Flammable Liquids and Compressed Gases: Kind Grill - Deep Fry

Location Right Side Kitchen Amount Single - Deep Fry

Storage arrangements Deep Fry Permit provided ✓

Egress Facilities:

Doors Front + Rear Condition of doors Good

Fire stairways None Condition of doors —

Open stairways None Unencumbered —

Fire escapes None Condition —

Exit lights Yes Visibility Good

Ordinance 102-71 Good

Conditions noted in violation of regulations None

Occupants Signature Jack Randezzo Jr. Fire Inspector Signature Robert F. Ehrlandt

Phone 477-9666