

Brick

Permit Without a Jacket

Permit Number 2197

LDS BR 10310264

Construction Permit # 2197

Oct. 3, 1984

Owner . Riviera Cleaners .
Location . . . 343 Brick Blvd .
 Drum Pt. Plaza .
Block . . . 547 A Lot . . . 15 .
Contractor Same .
Fee \$. . . 25.00 Use . . . Commer. Alter. & c/o .

BUILDING SUB-CODE INSPECTIONS

VIOLATIONS

Footing Trench
Foundation
Slab
Sheathing
Framing
Insulation
Sheet Rock
Plumbing
Fire Inspection
Final
C.O. Issued

PLUMBING SUB-CODE INSPECTIONS

Slab
Rough
Septic/Sewer
Water
Final
Electrical Final

Use reverse side for additional remarks

OK on orig. 9-22-84 DM

10-16-84 DE - NO FIRE EXTINGUISHERS 10-11-84

10-16-84

Plumb. OK on original

C/O 2/97

10-30-84



CERTIFICATE

CERT. NO. 2197
 DATE ISSUED 10-30-84
 Block 547A Lot 15
 Subdivision _____

IDENTIFICATION

Owner Riviera Cleaners Agent SAME
 Address 343 Brick Blvd Address _____
Brick N.J.
 Tel. (____) _____ Tel. (____) _____
 Work Site Address _____ Lic. No. _____
343 Brick Blvd. 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:

USE GROUP M FIRE GRADING 3 1/2
 MAXIMUM LIVE LOAD _____ MAXIMUM OCCUPANCY LOAD _____
 SPECIFIC USE Riviera Cleaners

FINAL COST OF CONSTRUCTION: \$ _____

Arthur J. Ciesla
 CONSTRUCTION OFFICIAL

CONSTRUCTION PERMIT APPLICATION			
Riviera Cleaners BRICK TOWNSHIP, NEW JERSEY			
IMPORTANT — Complete ALL items. Mark boxes where applicable			
I. LOCATION OF BUILDING	Number and street	Section	Loc. Block
	343 BRICK BLVD.	DRUM POINT PLAZA	15 547A
	N S	N S	
E W side of _____ feet E W from intersection of _____ (Other local geographic, political, or legal subdivision identification)			
II. TYPE AND COST OF BUILDING — All applicants complete Parts A - D			
A. TYPE OF IMPROVEMENT		D. PROPOSED USE — For "Wrecking" most recent use	
1 ☐ New buildings		Residential	
2 ☐ Addition (If residential, enter number of new housing units added, if any, in Part D, 13)		12 ☐ One family	
3 ☒ Alteration (See 2 above)		13 ☐ Two or more family — Enter number of units _____	
4 ☐ Repair, replacement		14 ☐ Transient hotel, motel, or dormitory — Enter number of units _____	
5 ☐ Demolition		15 ☐ Garage	
6 ☐ Moving (relocation)		16 ☐ Carport	
7 ☐ Garage		17 ☒ Other — Specify <u>RETAIL STORE</u>	
☐ Swim Pool ☐ In ☐ Out		Nonresidential	
☐ Fence		18 ☐ Amusement, recreational	
		19 ☐ Church, other religious	
		20 ☐ Industrial	
		21 ☐ Parking garage	
		22 ☐ Service station, repair garage	
		23 ☐ Hospital, institutional	
		24 ☐ Office, bank, professional	
		25 ☐ Public utility	
		26 ☐ School, library, other educational	
		27 ☐ Stores, mercantile	
		28 ☐ Tanks, towers	
		29 ☐ Other - Specify _____	
B. OWNERSHIP		3. <u>PARTICULAR</u>	
8 ☐ Private (individual, corporation, nonprofit institution, etc.)		C/o <u>fee</u>	
9 ☐ Public (Federal, State, or local government)			
C. COST		(Omit cents)	
10. Cost of Improvement <u>400.00</u>		\$ _____	
To be installed but not included in the above cost			
a. Electrical (# Fixtures, Outlets) _____			
b. Plumbing (# of Fixtures) _____			
c. Heating, air conditioning _____			
d. Other (elevator, etc.) _____			
11. TOTAL COST OF IMPROVEMENT _____		\$ <u>400</u>	
III. SELECTED CHARACTERISTICS OF BUILDING — For new buildings and additions, complete Parts E - I; for wrecking, complete only Part H, for all others skip to IV.			
E. PRINCIPAL TYPE OF FRAME		H. DIMENSIONS	
☐ Masonry (wall bearing)		Number of stories _____	
☐ Wood frame		Total square feet of floor area, all floors, based on exterior dimensions _____	
☐ Structural steel		Total land area, sq. ft. _____	
☐ Reinforced concrete			
☐ Other - Specify _____			
F. TYPE OF HEATING SYSTEM		I. RESIDENTIAL BUILDING ONLY	
Specify _____		Number of bedrooms _____	
Air Cond. Yes ☐ No ☐		Number of bathrooms _____	
G. TYPE OF SEWERAGE DISPOSAL		{ Full _____	
☐ Public		{ Partial _____	
☐ Individual			
		FEE COMPUTATIONS	
		VOLUME OF BUILDING _____	
		BUILDING SUB CODE _____	
		ELECTRICAL CODE <u>OK</u>	
		PLUMBING CODE <u>CCOK</u>	
		PLAN REVIEW _____	
		CERTIFICATE OF OCCUPANCY <u>25.00</u>	
		STATE TRAINING FUND _____	
		CONSTRUCTION _____	
		PERMIT FEE <u>25.00</u>	

SUB CONTRACTORS				
NAME	TRADE	ADDRESS	ZIP CODE	PHONE #
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

PERSON TO BE IN CHARGE OF CONSTRUCTION

NAME

JOHN DEGEORGE

ADDRESS

IV. IDENTIFICATION — To be completed by all applicants

Name	Mailing address — Number, street, city, and State	ZIP code	Tel. No.
1. Owner Agent	CARMINE AFFARO		
2. Contractor			
3. Architects			

The owner of this building and the undersigned agree to conform to all applicable laws of Township of Brick and that all required state, county and local prior approvals have been given.

Signature of applicant

Address

Application date

Carmine Affaro

DO NOT WRITE IN THIS SPACE — FOR OFFICE USE ONLY

Approved by

Date permit issued

Permit Number

Edward L. [Signature]

I agree to construct said building in conformity with the plans and specifications filed with the Construction Official and in compliance with the provisions of the Building Code whether shown on plans or not.

TOWNSHIP OF BRICK



TECHNICAL SECTION



PERMIT NO. 2197
 DATE ISSUED 10-3-84
 REVISION DATE _____
 Block 5474 Lot 15
 Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only When changing contractors, notify this office
 Name Store Mgr. CHAMINE ALIANO Contractor JOHN DE GEORGE
 Address 343 BRICK BLVD. Address DRUM POINT PLAZA
BRICK, N.J. 07703
 Tel. (201) 477-7754 Tel. () _____
 Work Site Address 343 BRICK BLVD. Lic. No. _____
BRICK, N.J. 07703 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 SHEET DATA

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

TYPE OF WORK:	Fee Basis	Fee
☐ New Building		
☐ Addition		
☐ Alteration/Renovation		
☐ Roofing		
☐ Siding		
☐ Other		
☐ Demolition		
☐ Miscellaneous		
☐ Fence		
☐ Sign		
☐ Pool		
☐ Elevator		
☐ Other		
SUBTOTAL		
Minimum Building Fee (if applicable)		
Total Building Fee (Greater of Minimum or Subtotal)		

☐ See Plans

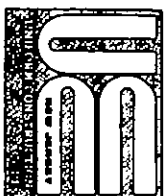
C. BUILDING CHARACTERISTICS

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



**FIRE
SUBCODE
TECHNICAL SECTION**



PERMIT NO. 2197
DATE ISSUED 10-3-87
REVISION DATE _____
Block 5474 Lot 15
Subdivision _____

IDENTIFICATION

APPLICANT - Complete unshaded areas only

When changing contractors, notify this office

Owner RIVIERA CLEANERS

Contractor SAME

Address 343 BRICK BLVD

Address _____

Tel. 201, 477-7754

Tel. (____) _____

Work Site Address 343 BRICK BLVD

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 _____

TECHNICAL SITE DATA

B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other _____ FEE _____

Areas 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

2 FIRE EXT. \$ _____

2 EXT SIGNS \$ _____

2 EMERGENCY LIGHTS \$ _____

Subtotal \$ _____

Minimum Fire Protection Fee (If Applicable) \$ _____

Total Fire Protection Fee (Greater of Minimum or Subtotal) \$ _____

C. FIRE PROTECTION CHARACTERISTICS

USE GROUP _____ Present _____ Proposed 8

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

RIVIERA CLEANERS

☐ Partial Releases ☐ Prototype Processing

PLAN REVIEW AND INSPECTION - FIRE

 343 DRUM POINT PLAZA
 BLOCK 547 A LOT 15

DATE

JOB CONDITION/COMMENTS

10-9-84

GET FLOOR PLANS

10-11-84

PLAN REVIEW: APPROVED AS NOTED

10-4-84

① EXIT SIGNS

10-4-84

② (2) AOC FIRE EXT, 5 LB

10-4-84

③ EMERGENCY LIGHTING

10-4-84

FIRE INSP; NOT READY

10-9-84

FIRE INSP; NO FIRE EXT. BY DOORS = FAIL

 BACK DOOR
 Front DOOR

JOB SUMMARY

☐ No Plans Required

☒ Plan Review Approved AS NOTED

Date: 10-11-84

Approved By: Mike Clayton

INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 10-16-84

Inspected By: R. N. Chubard

INSPECTIONS

Type

☐ Fire Suppression Test

☐ Fire Alarm Test

☐ Smoke Test

☐ TCO

☒ Other FINAL

☐ Other

☐ Other

☐ Other

Failure Date

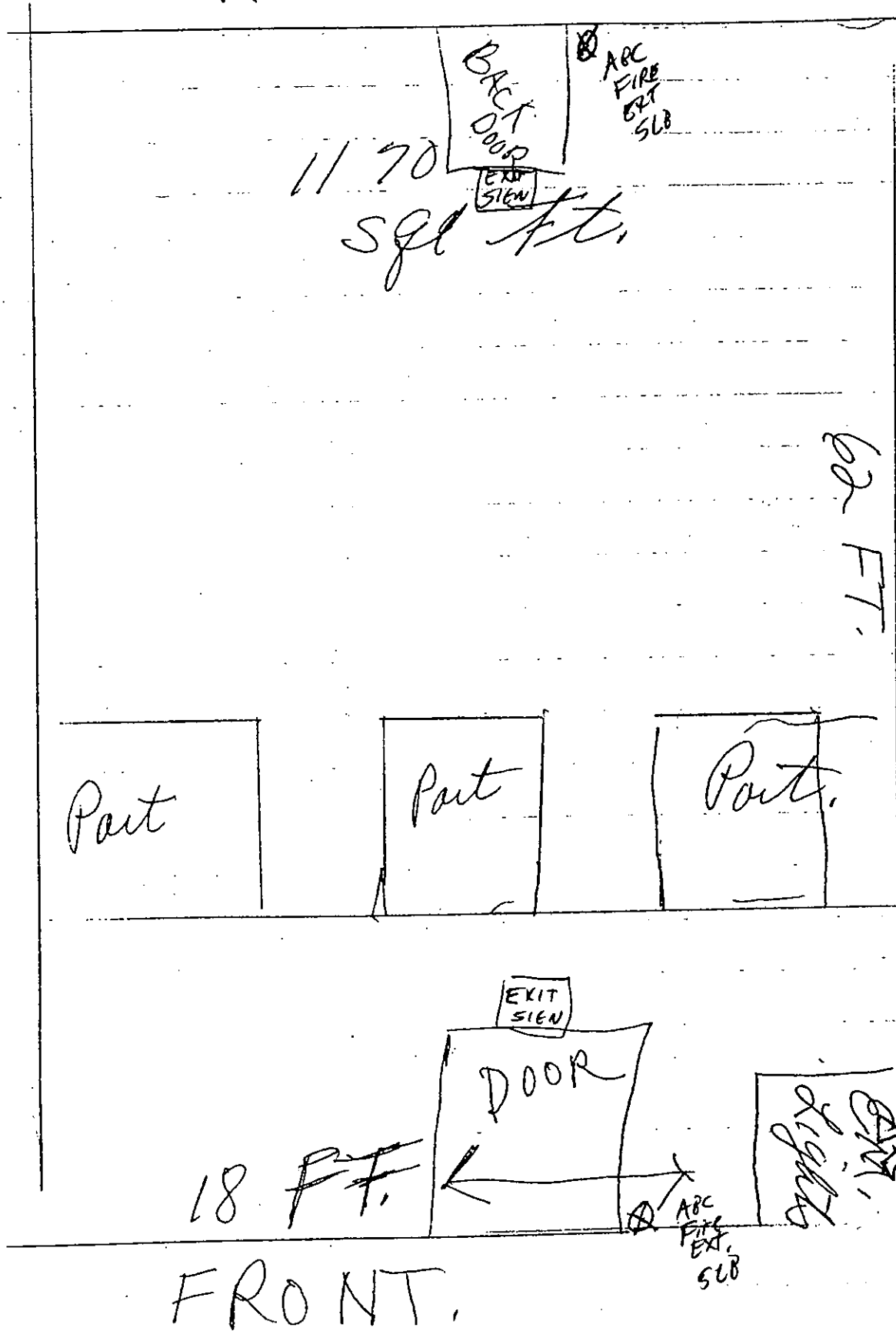
10-4-84

10-9-84

Approval Date

PERMIT 2197
343 BRICK BLVD

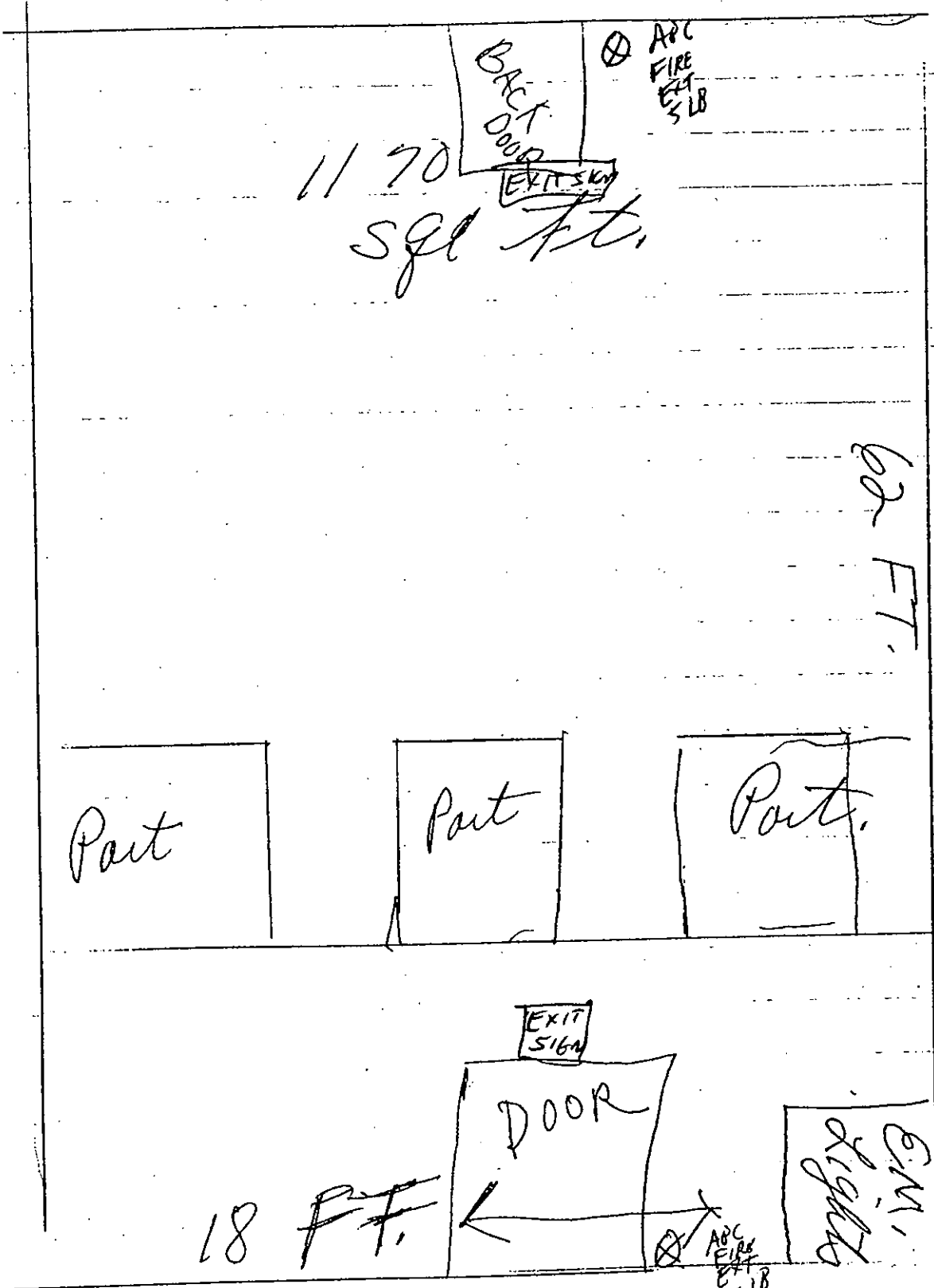
Rivera Cleaners



PERMIT 2197

343 BRICK BLVD

Rivera Cleaners



FRONT.