

BLOCK 548 LOT 21,20.01 QUALIFICATION CODE _____ADDRESS (SITE) 43 Drum Point RdPERMIT NO. 10-2008

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Proposed Work Site at: Drum Point Sports Complex

2. Name of Owner in Fee: Township of Birch
Tel. (732) 262-1057 e-mail _____
Address 401 Chambers bridge Rd, Birch, NJ 08721
street municipality zip code

3. Ownership in Fee: Public X Private _____

4. Principal Contractor: Bahr & Sons Inc. Tel. (732) 265-5333
Address 82 Shorewood Dr e-mail _____
Bayville, NJ, 08721

License No. OR, if new home, Builder Reg. No. 11244 Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. 22-315 2770 FAX: (____) _____

5. Architect or Engineer _____ Contact _____
Address _____ e-mail _____
Tel. (____) _____ FAX: (____) _____

6. Responsible Person in Charge once Work has Begun Joe Bahr
Tel. (732) 265-5333 FAX: (____) _____

V. FEE SUMMARY (for office use only)

	Update	Update
1. Building	\$	
2. Electrical		
3. Plumbing		
4. Fire Protection		
5. Elevator Devices		
6. Subtotal		
7. Less 20% for State Plan Review	\$	
8. Subtotal	\$	
9. State Permit Surcharge Fee		
10. Subtotal	\$	
11. Cert. of Occupancy		
12. Other		
13. TOTAL	\$	

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure	ft.
3. Area — Largest Floor	sq. ft.
4. New Building Area	sq. ft.
5. Volume of New Structure	cu. ft.
6. Max. Live Load	
7. Max. Occupancy Load	
8. If Industrialized Building: State Approved _____ HUD _____	
9. Total Land Area Disturbed	sq. ft.
10. Flood Hazard Zone	
11. Base Flood Elevation	ft.
12. Wetlands yes _____ no _____	

IIa. PROPOSED WORK

- ☐ Minor Work ☐ New Building ☐ Addition ☐ Demolition
- ☐ Repair ☐ Alteration ☐ Renovation ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

- ☐ Building
- ☐ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
	KD	7/15/10		7-29-10	JM		
				7-22-10	SD		
			7-27-10		SD		

TOTAL COST

VII. DESCRIPTION OF BUILDING USE**A. RESIDENTIAL (primary use)**

1. State Specific Use: _____
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present: _____
4. No. of dwelling units: Total Units Income-restricted
- Gained, Sale _____
- Gained, Rental _____
- Lost, Sale _____
- Lost, Rental _____

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present: _____

C. MIXED USE -List secondary use(s): _____

- D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)**DO YOU WANT:**

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks

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.ix:
I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

- C. ☐ I further certify that I will perform or supervise the following work:
C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

- C.3. ☐ Electrical C.4. ☐ Plumbing

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

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

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

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(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.

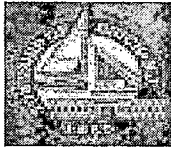
Agent Name Balot Sans Electrical Contractors Inc.

Address 82 Shorewood Dr
Bayville, NJ, 08721

Telephone (732) 269-5333

Signature B. M. J. 02/10

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/02/2019
Control Number C-10-002615
Permit Number 10-2008
Permit Issue Date 07/29/2010
Certificate Number 10-2008

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 41 & 43 DRUM POINT RD. Brick Township, NJ Block: 548 Lot: 21 Qual: _____
Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION
Owner Address: 101 HENDRICKSON AVE BRICK NJ 08723
Telephone: _____
Contractor Pyramid Poured Walls & Inc.
Address 1055 W LACEY ROAD Forked River NJ 08731
Telephone: (609) 693-5675 Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____
Home Warranty Number: _____
Type of Warranty Plan: ☐ State ☐ Private
Use Group: A-5 Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: - 4 x 8 slab

Certificate Comments:

☐ **Certificate of Occupancy**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☒ **Certificate of Approval**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **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 Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:

Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

David Newman Jr

Construction Official

Fee: \$0.00

Check Number: _____

Collected By: _____

8/3/2014 PM - final visual with them ok. from 2010 year.

RECEIVING CLERK _____
DATE REC'D _____

ZONING PERMIT APPLICATION

PERMIT # _____
DATE ISSUED _____

BLOCK: 548 LOT: 21 82001 QUALIFIER: _____ SITE ADDRESS: 43 Drum Point Road

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Township of Brick
COMPLETE ADDRESS: 401 Chambers Bridge Road
Brick NJ 08742
PHONE # 732-262-1040 EMAIL: ecc@birdball.com

2. NAME OF APPLICANT: Same
APPLICANT ADDRESS: _____

PHONE # _____ EMAIL: _____

3. RESPONSIBLE PERSON FOR WORK: Joe Barr
PHONE# 732-269-5333 FAX# 732 608 7020

4. SIGNATURE OF APPLICANT: Elena C. Corrao

FOR OFFICE USE ONLY

FEE SUMMARY: EXEMPT

APPLICATION FEE: \$ _____
OTHER: \$ _____
TOTAL: \$ _____

REQUIRED BY APPLICANT

RESIDENTIAL: _____
COMMERCIAL: _____
EXISTING USE: Recreational
PROPOSED USE Recreational

BOARD APPROVAL: X PB _____ ZB _____
RESOLUTION#: _____
APPROVAL DATE: _____

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: _____ *ADDITION _____ *ALTERATION _____ *PORCH _____ *DECK _____

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____

HEIGHT: _____ (*APPLICABLE)

OTHER 6' fence enclosure and condensing unit(s) for refrigeration units

DESCRIPTION: Condenser Units (2) for refrigeration of storage areas
fence enclosure around condensing units

ZONING REVIEW:

DATE REVIEWED: 7/27/10 DATE DENIED: _____ DATE APPROVED: 7/27/10 INTLS: MPK

(SEE BACK PAGE)

TOWNSHIP OF BRICK ZONING CHECKLIST

1) Two (2) copies of plot plan containing:

- All existing and proposed structures
- All dimensions of the lot and structures
- All setbacks from the structures to the property lines
- All adjacent streets and waterways
- If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

2) Two copies of the plans with dimensions and heights noted:

- Floor plans and elevations
- Signed site plans
- Property map
- Survey map

Choose which is applicable for submission

3) Plot plans and building plans must match for complete review

NOTE: NO PARTIAL, TAPED, FAXED, REDUCED OR ENLARGED COPIES CAN BE ACCEPTED



CONSTRUCTION PERMIT

Date Issued 7-9-10
Control # C-10-002615
Permit # 10-008

IDENTIFICATION Block: 548 Lot: 21 Qualifier _____
Work Site Location: 41 & 43 DRUM POINT RD. Brick Township, NJ Contractor Pyramid Poured Walls & Inc.
Address 1055 W LACEY ROAD Forked River NJ 08731
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION
101 HENDRICKSON AVE BRICK NJ 08723 Telephone: (609) 693-5675
Telephone: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. _____

Is hereby granted permission to perform the following work:

- | | | |
|--|--|--|
| ☒ BUILDING | ☐ PLUMBING | ☐ LEAD HAZARD ABATEMENT |
| ☒ ELECTRICAL | ☐ FIRE PROTECTION | ☐ DEMOLITION |
| ☐ ELEVATOR DEVICES | ☐ ASBESTOS ABATEMENT
(Subchapter 8 only) | ☐ OTHER |

DESCRIPTION OF WORK:

4 x 8 slab
electrical

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 \$4

Construction Official

Date

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	_____	\$0
Electrical	_____	\$0
Plumbing	_____	\$0
Fire Protection	_____	\$0
Elevator Devices	_____	\$0
Other	_____	\$0.00
DCA Training Fee	_____	\$0
CO Fee	_____	
Other	_____	\$0
Total	_____	\$0
Check No.	_____	
Cash	_____	\$0
Credit	_____	\$0
Collected By	_____	

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



CONSTRUCTION PERMIT

Date Issued _____
Control # C-10-002615
Permit # _____

IDENTIFICATION Block: 548 Lot: 21 Qualifier _____
Work Site Location: 41 & 43 DRUM POINT RD. Brick Township, NJ Contractor Pyramid Poured Walls & Inc.
Address 1055 W LACEY ROAD Forked River NJ 08731
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION
101 HENDRICKSON AVE BRICK NJ 08723 Telephone: (609) 693-5675
Telephones: _____ Lic. No. or Bldrs. Reg. No. _____
Federal Employee. No. _____

Is hereby granted permission to perform the following work:

- | | | |
|--|--|--|
| ☒ BUILDING | ☐ PLUMBING | ☐ LEAD HAZARD ABATEMENT |
| ☒ ELECTRICAL | ☐ FIRE PROTECTION | ☐ DEMOLITION |
| ☐ ELEVATOR DEVICES | ☐ ASBESTOS ABATEMENT
(Subchapter 8 only) | ☐ OTHER |

DESCRIPTION OF WORK:

4 x 8 slab
electrical

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 \$2

David A. Newman Jr.
Construction Official Date

U.C.C. F170 -
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	_____	\$0
Electrical	_____	\$0
Plumbing	_____	\$0
Fire Protection	_____	\$0
Elevator Devices	_____	\$0
Other	_____	\$0.00
DCA Training Fee	_____	\$0
CO Fee	_____	
Other	_____	\$0
Total	_____	\$0
Check No.	_____	
Cash	_____	\$0
Credit	_____	\$0
Collected By	_____	

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18; This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued:

Application Number: ZA-10-00767

Application Date: 07/27/2010

Project Number: _____

Permit Number: _____

Fee: \$0

Zoning Permit

Worksite **43 Drum Point Road**
Location: **Drum Point Sports Complex**
Brick Township, NJ

Block: 548

Lot: 20.01&21

Qualifier: _____

Zone: R-R-2

Owner: **TOWNSHIP OF BRICK**
Address: **401 CHAMBERS BRIDGE RD**
BRICK, NJ 08723

Applicant: **TOWNSHIP OF BRICK**
Address: **401 CHAMBERS BRIDGE RD**
BRICK, NJ 08723

Application Approved Date: 07/27/2010

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Public

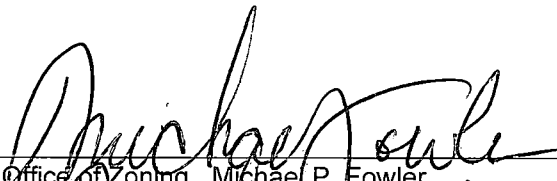
Nonconforming Use is: _____

Work Description:

Air-Conditioner condenser unit - Construct a 4' x 8' concrete pad to support two condensing units protected by 20 LF of 6' high chain link fencing behind the Pop-Warner Bldg. Plans prepared by Birdsall Engineering

Upon review it was determined that:

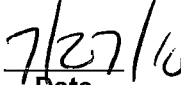
- ☒ Use is permitted by Ordinance
- ☐ Use is permitted by Variance approved on: _____
- ☐ Valid Nonconforming Use is established by
 - ☐ Zoning Board of Adjustment
 - ☐ Zoning Officer

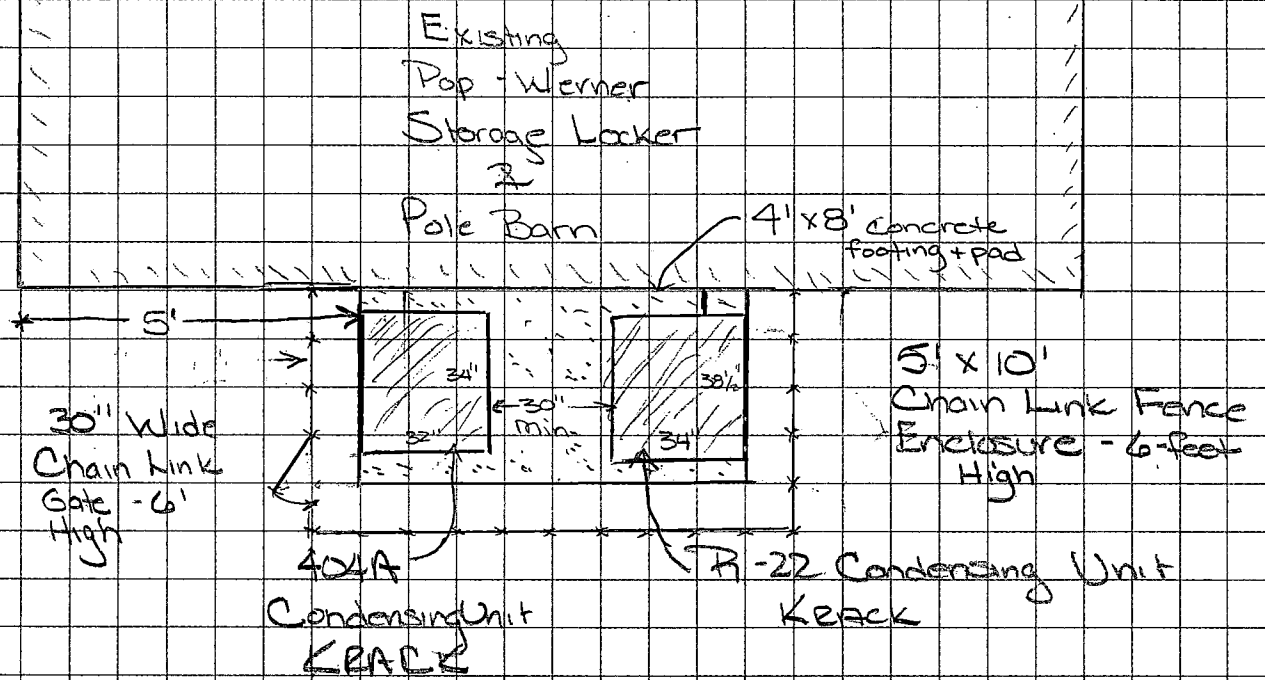

Office of Zoning, Michael P. Fowler

Michael P. Fowler, Township Planner

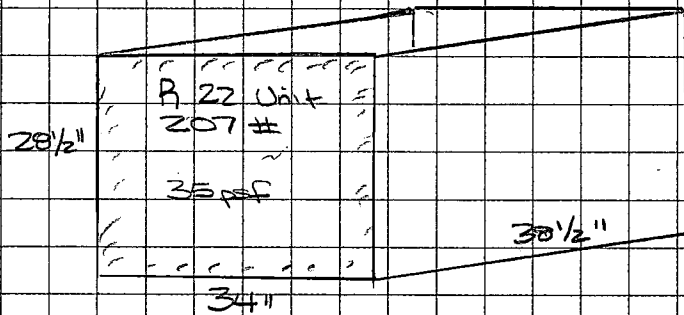
07/27/2010

Date

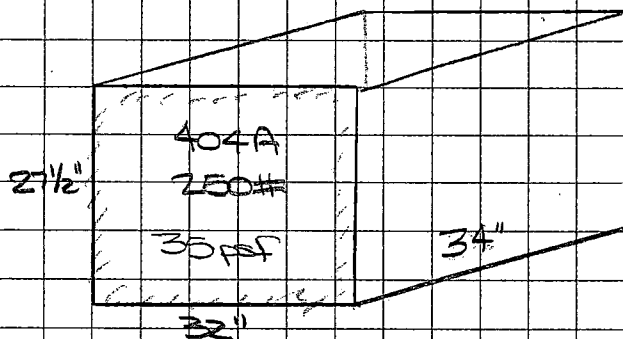

Date



SITE PLAN
1" = 4'



Locked Rotor 58
Running Amp 10.4
CRACK



Locked Rotor 102
Running 4.7 Amps

Elissa C. Campana
Elissa C. Campana
NJ Prof. Engineer
NJ Lic. No. 43116
07/22/2010



BIRDSALL SERVICES GROUP

BIRDSALL ENGINEERING • DI STASIO & VAN BUREN
LGA ENGINEERING • MORRIS, JOHNSON & ASSC. • PMK GROUP

611 Industrial Way West, Eatontown, NJ 07724
www.birdsall.com | 732-380-1700

Zoning Review

Approval
By: *[Signature]*
Date: 7/27/10

Drum Point Sports

JOB NO. Camdax

DATE July 21, 2010

SHEET NO. 1 OF 3

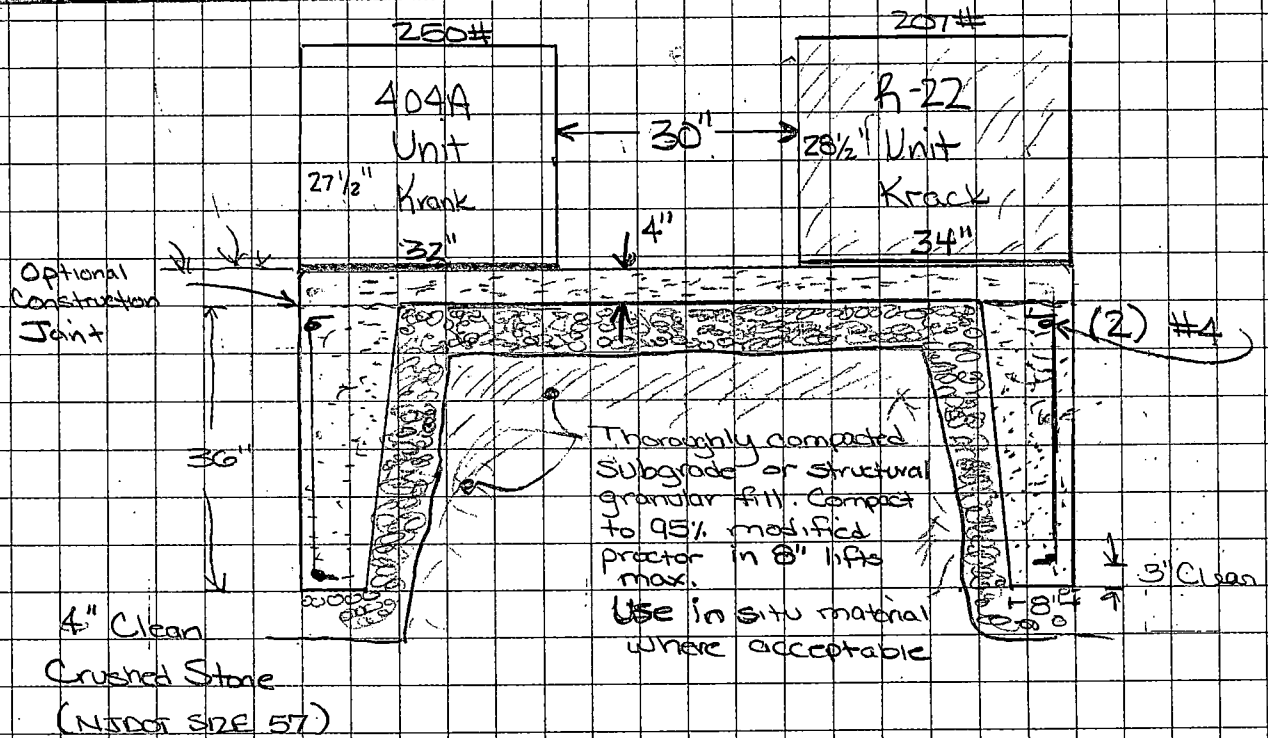
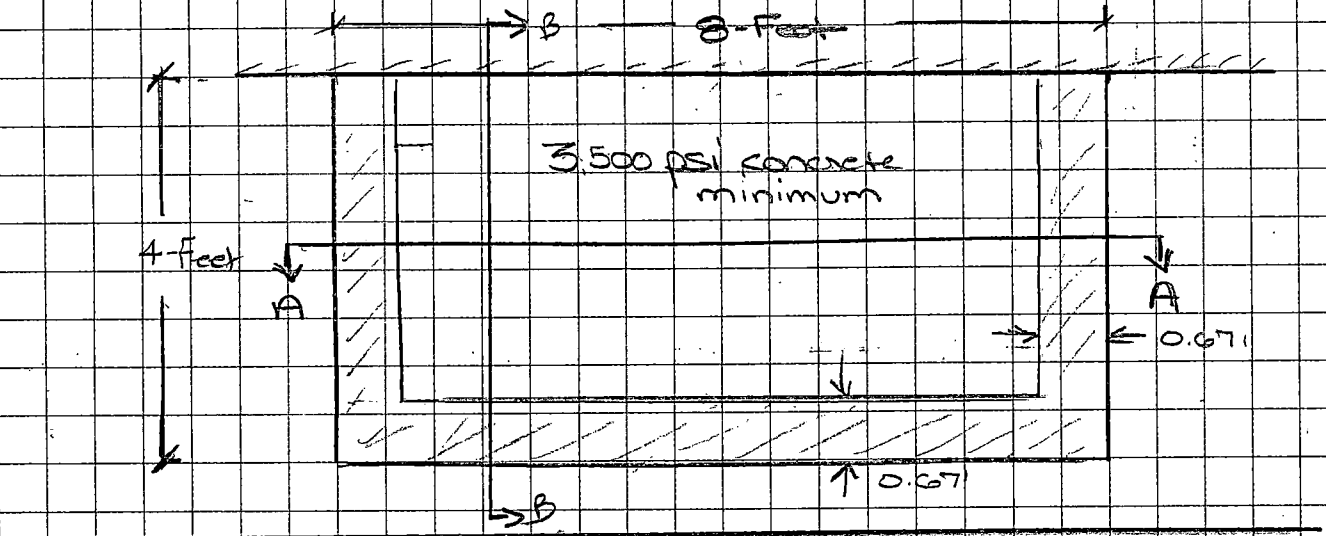
COMPUTED BY ECC

Subject Pop Warner - Condensing Units

B 548 L 21

41 Drum Point Pk.

CONCRETE FOOTING PLAN VIEW 1"=2'



SECTION
A-A
1"=2'

Elissa (Signature)
Elissa (Signature)
NJ P.E. Engineer
NJ Lic. No. 45116
07/22/2010



BIRDSALL SERVICES GROUP

BIRDSALL ENGINEERING • DI STASIO & VAN BUREN
LGA ENGINEERING • MORRIS, JOHNSON & ASSC. • PMK GROUP

611 Industrial Way West, Eatontown, NJ 07724
www.birdsall.com | 732-380-1700

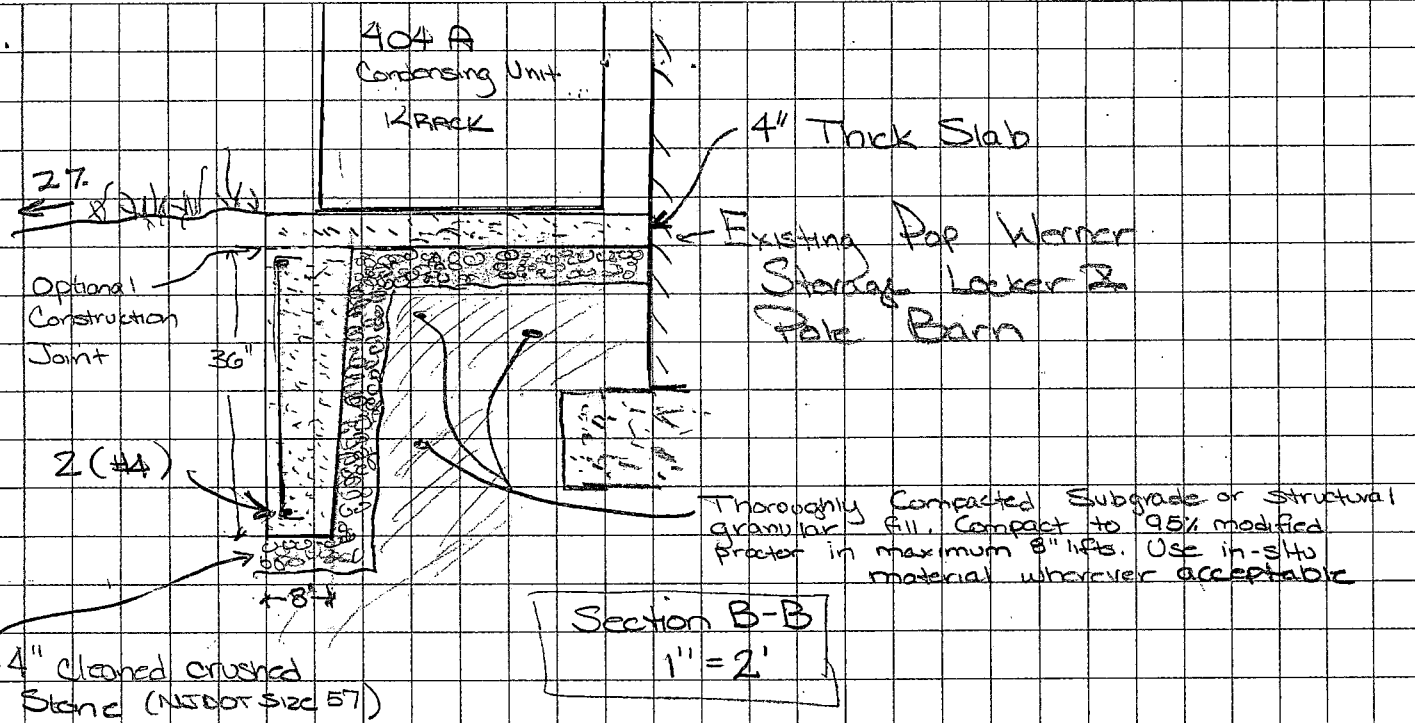
Subject Pop Warner Condensing Units
R F A R 1 - 2

Drum Point Sports
JOB NO. Complex

DATE July 21, 2010

SHEET NO. 2 OF 3

COMPUTED BY ECC



Elissa C. Cammino
 Elissa C. Cammino
 NJ Professional Engineer
 NJ Lic. No. 1316
 07/22/2010



BIRDSALL SERVICES GROUP

BIRDSALL ENGINEERING • DI STASIO & VAN BUREN
 LGA ENGINEERING • MORRIS, JOHNSON & ASSC. • PMK GROUP

611 Industrial Way West, Eatontown, NJ 07724
 www.birdsall.com | 732-380-1700

Subject POP WARNER CONDENSING UNITS
R FOR L21 41 Drum Point Rd.

Drum Point Sports
 JOB NO. Complex

DATE July 21, 2010

SHEET NO. 3 OF 3

COMPUTED BY ECC



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued: _____
Application Number: ZA-10-00767
Application Date: 07/27/2010
Project Number: _____
Permit Number: _____
Fee: \$0

Zoning Permit

Worksite **43 Drum Point Road**
Location: **Drum Point Sports Complex**
Brick Township, NJ

Block: 548
Lot: 20.01&21
Qualifier: _____
Zone: R-R-2

Owner: **TOWNSHIP OF BRICK**
Address: **401 CHAMBERS BRIDGE RD**
BRICK, NJ 08723

Applicant: **TOWNSHIP OF BRICK**
Address: **401 CHAMBERS BRIDGE RD**
BRICK, NJ 08723

Application Approved Date: 07/27/2010

This Certifies that an application for the issuance of a Zoning Permit has been examined.

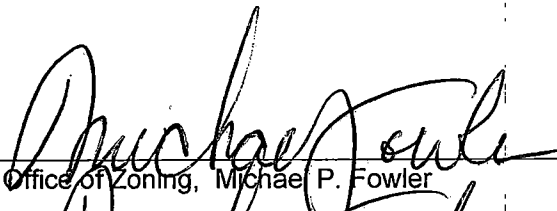
Use is: Public
Nonconforming Use is: _____

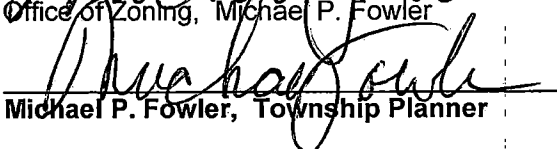
Work Description:

Air-Conditioner condenser unit - Construct a 4' x 8' concrete pad to support two condensing units protected by 20 LF of 6' high chain link fencing behind the Pop-Warner Bldg. Plans prepared by Birdsall Engineering

Upon review it was determined that:

- ☒ Use is permitted by Ordinance
☐ Use is permitted by Variance approved on: _____
☐ Valid Nonconforming Use is established by
 ☐ Zoning Board of Adjustment
 ☐ Zoning Officer



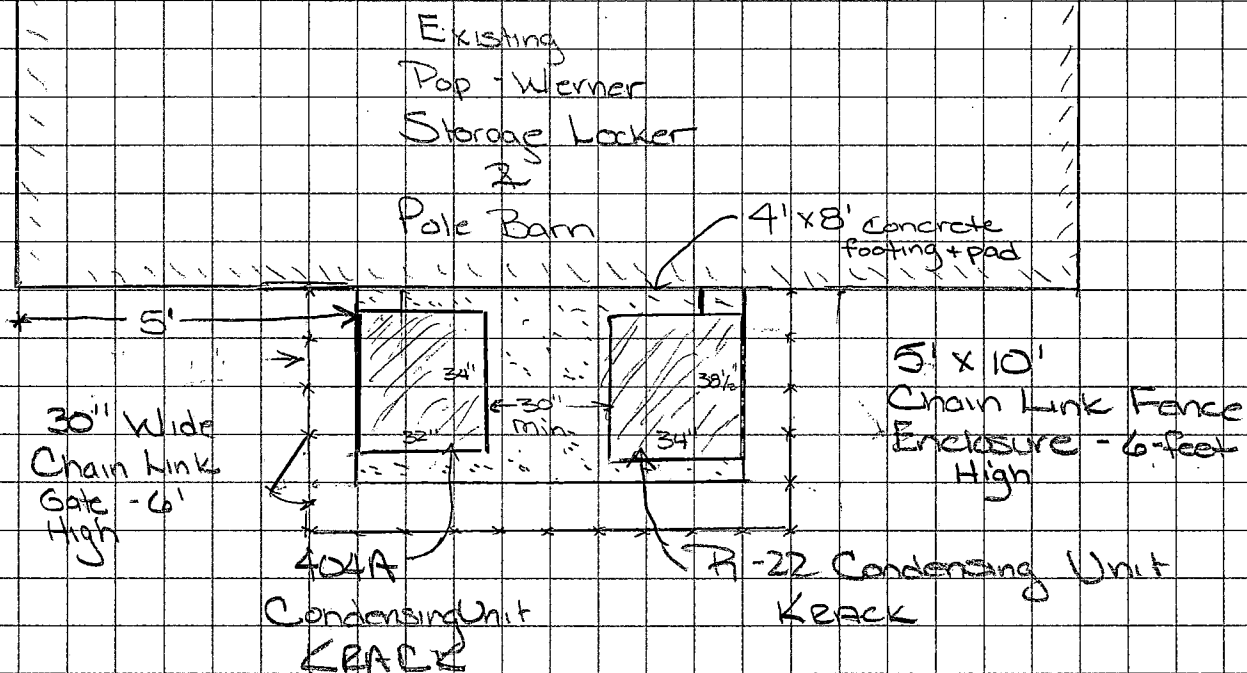
Office of Zoning, Michael P. Fowler


Michael P. Fowler, Township Planner

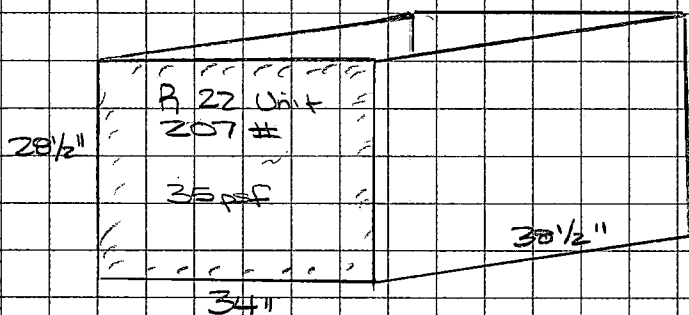
07/27/2010

Date

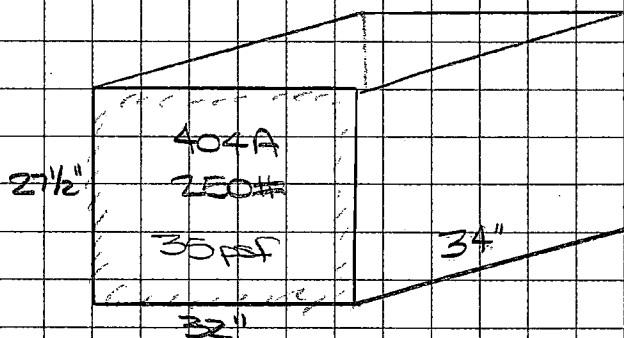
7/27/10
Date



SITE PLAN
1" = 4'



Locked Rotor 58
Running Amp 10.4
KRACK



Locked Rotor 102
Running 4.7 Amps

Elissa C. Commisso
Elissa C. Commisso
NJ Prof Engineer
NJ Lic No. 4816
07/22/2010



BIRDSALL SERVICES GROUP

BIRDSALL ENGINEERING • DI STASIO & VAN BUREN
LGA ENGINEERING • MORRIS, JOHNSON & ASSC • PMK GROUP

611 Industrial Way West, Eatontown, NJ 07724
www.birdsall.com | 732-380-1700

Zoning Review

By: *M. J. Fick*
Date: 7/27/10

Drum Point Sports

JOB NO. Complex

DATE July 21, 2010

SHEET NO. 1 OF 3

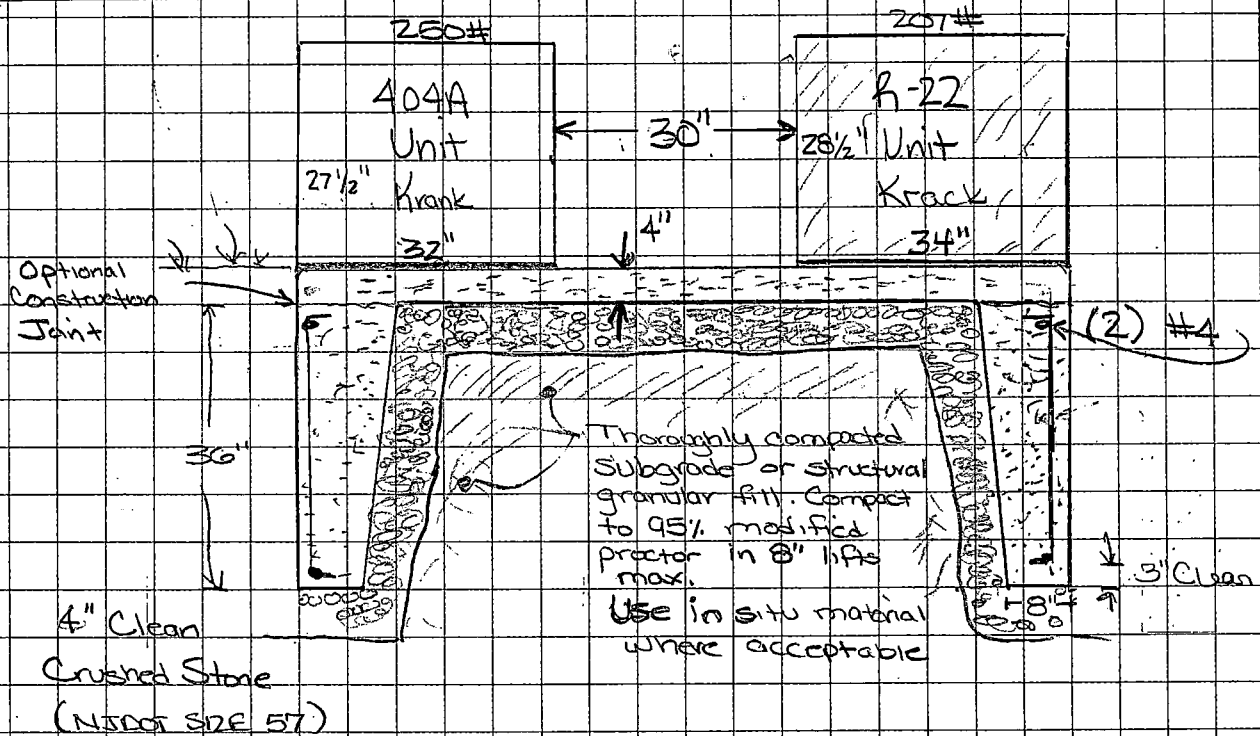
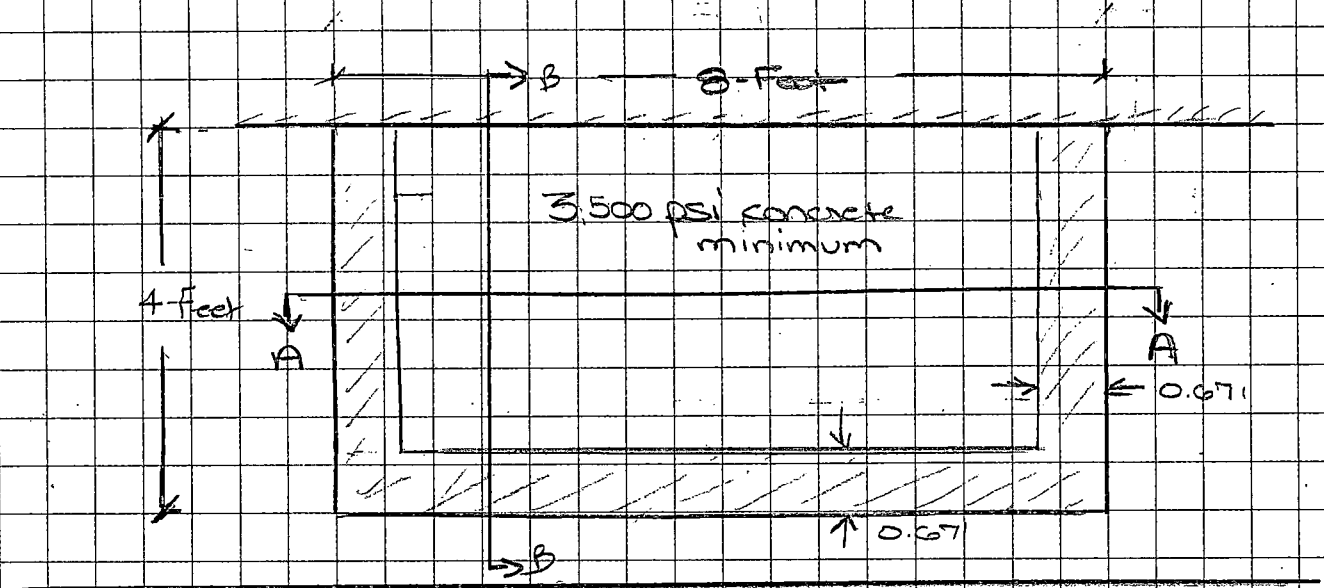
COMPUTED BY ECC

Subject Pop Werner - Condensing Units

B 548 L 21

41 Drum Point Pmt.

CONCRETE FOOTING PLAN VIEW 1"=2'



SECTION
A-A
1"=2'

Elissa O. Connors
Elissa O. Connors
NTP Professional Engineer
N.E. Lic. No. 45116
07/22/2010



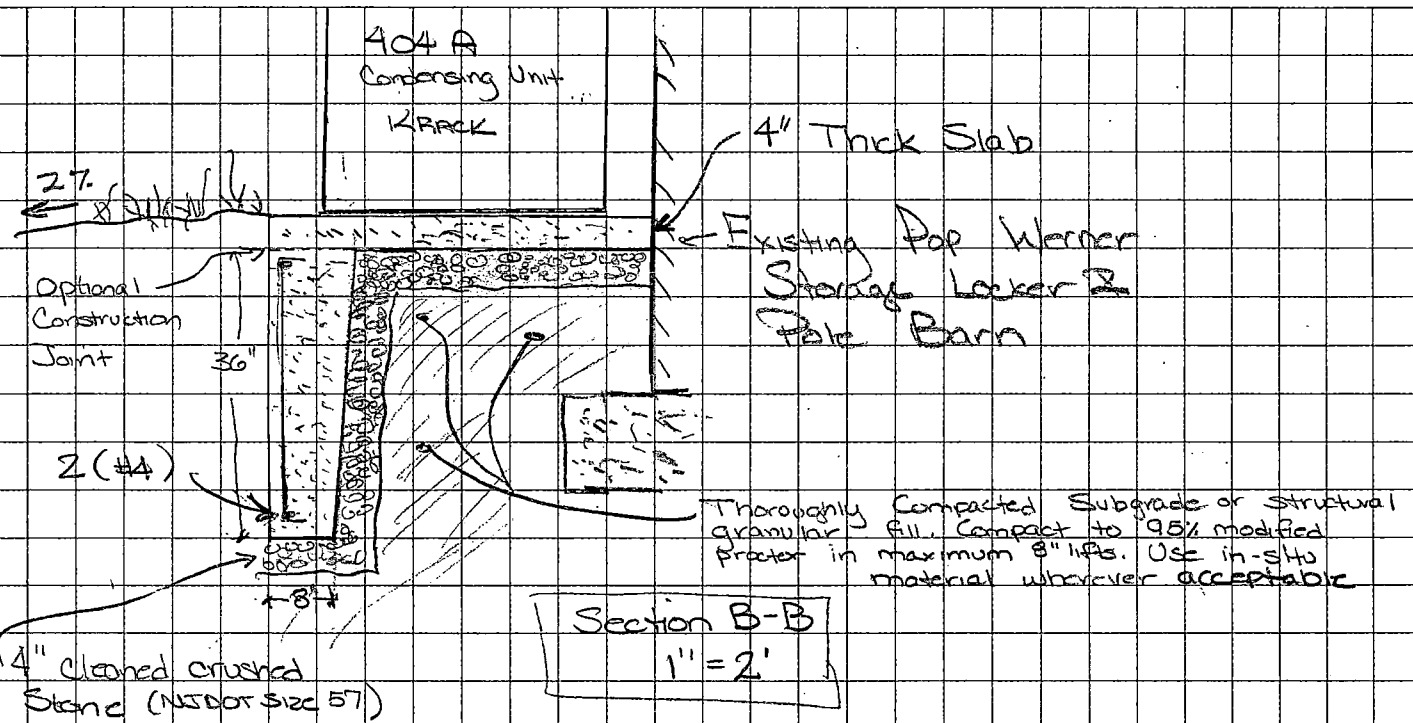
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Subject Pop Werner Condensing Units
RFAA 1-71

Drum Point Sports
JOB NO. Complex
DATE July 21, 2010
SHEET NO. 2 OF 3
COMPUTED BY ECC



Elissa C. Commins
 Elissa C. Commins
 NJ Professional Engineer
 NJ Lic. No. 13112
 07/22/2010



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 www.birdsall.com | 732-380-1700

Subject POP WERNER CONDENSING UNITS
R FOR L21 41 Drum Paint St.

Drum Paint Sports
 JOB NO. Complex

DATE July 21, 2010

SHEET NO. 3 OF 3

COMPUTED BY ECC



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1027

Subcode Official Review

To: 101 HENDRICKSON AVE BRICK, NJ 08723 CC:

RE: Plumbing Subcode
Block: 548 Lot: 21 Qual:
41 & 43 DRUM POINT RD.
Permit Number: Control Number: C-10-002615
Last Submit Date: Wednesday, July 28, 2010

Date: Thursday, July 29, 2010

Dear BRICK TOWNSHIP BOARD OF EDUCATION,

The following comments were made during the Plan Review process:

#1-where is approved point of disposal for condensate? doesn't appear on plans.

going to earth
elec pump to
grade!!
Seasonal

Sincerely,

Robert Wennlund, Subcode Official



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

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

Block 548 Lot 21.20.01 Qualification Code _____

Work Site Location Drum Point Sports Complex

43 Drum Point Road

Owner in Fee Township of Brick

Address 401 Chambers bridge Road

Brick, NJ, 08723

Tel (732) 262-1057

Contractor Bahr & Sons Elec. Cont. I-c.

Address 92 Sherwood Dr

Bayville, NJ, 08721

Tel (732) 265-5333 FAX (_____)

Contractor License No. 11244

Federal Emp. No. 22-3152770

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

[] Pole/Pad # _____ [] Temporary [] Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ Exempt

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required 7-11-10 D Date Initial

Joint Plan Review Required:

[] Building [] Plumbing

[] Fire [] Elevator

[] Elec. Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: _____

Approved by: _____

INSPECTIONS

Type: Failure Failure Approval Initial

Rough _____

Barrier-Free _____

Trench _____

Temp. Serv. _____

Constr. Serv. _____

TCO _____

Other _____

Service _____

Final _____

Barrier-Free _____

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

Annual Pool Inspection _____

Date of Grounding and Bonding _____

Certification _____

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.

B. J. Bahr

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
6		Lighting Fixtures
6		Receptacles
6		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

1	6.5	Pool Permit/with UW Lights
		Storable Pool/Spa/Hot Tub
		KW Elec. Range/Receptacle
		KW Oven/Surface Unit
		KW Elec. Water Heater <u>(used)</u>
		KW Elec. Dryer/Receptacle
		KW Dishwasher
		HP Garbage Disposal
		KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
1	112.5	HP Motors 1/+ HP
1	100	KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
2	5hp	KW Elec. Sign/Outline Light
2	2hp	Compressor - Refrigerator
		Condensers - Walk in

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 548 LOT: 21 + 209 ADDRESS: 43 Drum Point Road**IDENTIFICATION:**

1. WORK SITE ADDRESS: 43 Drum Point Road
2. NAME OF OWNER IN FEE: Township of Brick
ADDRESS: 401 Chambers Bridge Road PHONE #: (732) 262 1040
Brick NJ 08742 FAX #: (732) 262
3. PRINCIPAL CONTRACTOR: Joe Bahr
ADDRESS: _____ PHONE #: () _____
FAX #: () _____
4. ARCHITECT OR ENGINEER: Birdsall Services Group
ADDRESS: 611 Industrial Way West PHONE #: (732) 262 1040
5. RESPONSIBLE PERSON FOR WORK: Joe Bahr
ADDRESS: 82 Shorewood Drive, Bayville, NJ 08721-1049
PHONE #: (732) 262 5338 FAX #: (732) 608 7020 E-MAIL: info@bahrandsons.com

PROJECT DESCRIPTION: ☒ GRADING/CLEARING ☐ ROAD OPENING☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL☐ BULKHEAD/DOCK ☐ DWELLING☐ OTHER _____

LENGTH: _____ WIDTH: _____ HEIGHT: _____

FEE SUMMARY:

APPLICATION FEE: \$ Exempt

REVIEW FEE: \$ _____

INSPECTION FEE: \$ _____

OTHER _____: \$ _____

BOND(S): \$ _____

TOTAL: \$ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE: REJECTED _____ DATE APPROVED _____ INTLS: _____