BLOCK 1068 LOT 15.01 QUALIFICATION CODE _____ ADDRESS (SITE) 101 HENDRICKSON DR PERMIT NO. 05-0663

05-1338753

CONSTRUCTION PERMIT APPLICATION

Called 3/10/05 Judy

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII 05

I. IDENTIFICATION

1. Proposed Work Site at: ~~Site~~ 101 Hendrickson Dr Veterans
2. Name of Owner in Fee: BRICK BD OF EDUCATION Tel. (___) _____
   Address _____ (street / municipality / zip code)
3. Ownership in fee: Public X Private _____
4. Principal Contractor: SUN ELECTRICAL CONSTRUCTION Tel. (732) 477-3500
   Address 308 DRUM POINT RD, BRICK, N.J. 08723
   License No. OR, if new home, Builder Reg. No. 7146 Exp. Date 3/31/06
   Federal Employee No. 22-2763732 FAX: (732) 477-0567
5. Architect or Engineer _____ Tel. (___) _____
   Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Anthony Zisa
   Tel. (732) 477-3500 FAX: (732) 477-0567

V. FEE SUMMARY (for office use only)

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

Exempt

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. Construction Classification	
7. Total Land Area Disturbed sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ft.	
10. Wetlands yes	
no	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

OPTIONAL (for office use only)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☒ Electrical	20,000				2-2205	MK			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition		Gm	3/10/05		3/10/05	JL	(CC)		
TOTAL COSTS		SITE LIGHTING - 4 POLES							

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:
   Before Construction _____
   After Construction _____
   Net Gain or Loss _____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10325220

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow 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

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

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

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

I further certify that I will perform the following work:
C.3. (X) 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 Jerry T. Burlew Date 2/15/05

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. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

( ) Check if contractor.

Agent Name _____

Address _____

_____

Telephone (_____) _____

Signature _____

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

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

Name of Code & Edition		Name of Code & Edition			
Building	_____	Energy	_____	Other	_____
Electrical	_____	Barrier Free	_____		_____
Plumbing	_____	Flood Hazard	_____		_____
Fire Protection	_____	As Built Elevation Cert.	_____		_____
Mechanical	_____	Other	_____		_____

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

□ Zoning Application deemed complete Initialed: _____ Date: _____

□ Zoning Application approved Initialed: _____ Date: _____

□ Zoning permit updates:

_____

_____

_____

CONSTRUCTION PERMIT

Date Issued 03/10/2005
Control # C-05-132853
Permit # 05-0663

IDENTIFICATION Block: 1068 Lot: 15.01 Qualifier

Work Site Location: 101 - 107 HENDRICKSON AVE Brick Township, NJ

Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION

Address: 101 HENDRICKSON AVE. BRICK NJ 08724

Telephone:

Contractor: SUN ELECTRICAL CONST CORP

Address: 308 DRUM POINT BRICK NJ 08723-

Telephone:

Lic. No. or Bldrs. Reg. No.

Federal Employee. No. 22-2733732

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:

ELECTRICAL ALTERATIONS

LIGHT POLES

Note: If constuction does not commence *within one* (1) *year* of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $24,000

Construction Official

03/10/2005
Date

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

INSPECTOR COPY

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	

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 02/18/2005
Date Issued ~~12/31/1899~~ 3/10/05
Control # C-05-132853
Permit # 05-0663

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

Block 1068 Lot 15.01 Qualification Code

Work Site Location: 101 - 107 HENDRICKSON AVE

Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION

Address 101 HENDRICKSON AVE. BRICK NJ

Tel.

Contractor: SUN ELECTRICAL CON

Address 308 DRUM POINT BRICK NJ

Tel. Fax.

Lic No.

Federal Employee No. 22-2733732

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed U

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $24,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
☐ No Plan Required		
Joint Plan Review Required		
☐ Building ☐ Plumbing		
☐ Fire ☐ Elevator		
☒ Electrical Plans Approved		
Date: 2 23 05		
Approved by:		

SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
Date:
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
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				

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

C. CERTIFICATION IN LIEU OF OATH
I hereby certifiy that I am the (agent of) owner of the record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
0		Lighting Fixtures	
0		Recepticles	
0		Switches	
0		Detectors	
4		Light Poles	
0		Motors - Fract. HP	
0		Emergency & Exit Lights	
0		Communication Points	
0		Alarm Devices/F.A.C. Panel	
0			
4		TOTAL NUMBERS	~~$35~~
0		Pool Permit/with UW Lights	$0
0		Storable Pool/Spa/Hot Tub	$0
0	0	KW Elec. Range/Receptical	$0
0	0	KW Oven/Surface Unit	$0
0	0	KW Elec. Water Heater	$0
0	0	KW Elec. Dryer/Recepticle	$0
0	0	KW Dishwasher	$0
0	0	PH Garbage Disposal	$0
0	0	KW Central A/C Unit	$0
0	0	HP/KW Space Heater/Air	$0
0	0	KW Baseboard Heat	$0
0	0	HP Motors 1/+ HP	$0
0	0	KW Transformer/Generator	$0
0	0	AMP Service	$0
0	0	AMP Subpanels	$0
0	0	AMP Motor Control Center	$0
0	0	KW Elec. Sign/Outline Light	$0
0	0		$0
0	0		$0
		Administrative Surcharge	$0
		Minimum Fee	~~$40~~
		State Permit Surcharge Fee	~~$32~~
		TOTAL FEE	~~$32~~

Paid

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 02/18/2005
Date Issued ~~12/5/71899~~ 3/10/05
Control # C-05-132853
Permit # 05-0663

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Block 1068 Lot 15.01 Qualification Code

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Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION

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Tel.

Contractor: SUN ELECTRICAL CON

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Tel. Fax.

Lic No.

Federal Employee No. 22-2733732

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed U

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $24,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
☒ No Plan Required		
Joint Plan Review Required		
☐ Building ☐ Plumbing		
☐ Fire ☐ Elevator		
☒ Electrical Plans Approved		
Date:	2 23 05	
Approved by:		

SUBCODE APPROVAL

☐ CO ☐ CCO ☒ CA

Date: 4/10/05

Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			4/10/05	
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 certifiy that I am the (agent of) owner of the record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
0		Lighting Fixtures	
0		Recepticles	
0		Switches	
0		Detectors	
4		Light Poles	
0		Motors - Fract. HP	
0		Emergency & Exit Lights	
0		Communication Points	
0		Alarm Devices/F.A.C. Panel	
0			
4		TOTAL NUMBERS	~~$35~~
0		Pool Permit/with UW Lights	$0
0		Storable Pool/Spa/Hot Tub	$0
0	0	KW Elec. Range/Receptical	$0
0	0	KW Oven/Surface Unit	$0
0	0	KW Elec. Water Heater	$0
0	0	KW Elec. Dryer/Recepticle	$0
0	0	KW Dishwasher	$0
0	0	PH Garbage Disposal	$0
0	0	KW Central A/C Unit	$0
0	0	HP/KW Space Heater/Air	$0
0	0	KW Baseboard Heat	$0
0	0	HP Motors 1/+ HP	$0
0	0	KW Transformer/Generator	$0
0	0	AMP Service	$0
0	0	AMP Subpanels	$0
0	0	AMP Motor Control Center	$0
0	0	KW Elec. Sign/Outline Light	$0
0	0		$0
0	0		$0

Administrative Surcharge	$0
Minimum Fee	~~$40~~
State Permit Surcharge Fee	~~$32~~
TOTAL FEE	~~$32~~

Exempt

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink; Not Pencil)

COPY of the Signed Site Plan approval

Applications missing any of the following information will delay processing and may be returned to you.

BLOCK_____ LOT_____ QUALIFIER_____

PROPERTY ADDRESS_____

PERSONAL NAME OF APPLICANT _____

BUSINESS NAME OF APPLICANT _____

MAILING ADDRESS OF APPLICANT_____

PROPERTY OWNER'S FULL NAME_____

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☐ Commercial (please describe)_____

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☐ Commercial (please describe)_____

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) _____Height_____
☐ Addition - Height_____
☐ Alteration
☐ Porch or deck - Height_____
☐ Shed - Height _____
☐ Fence - Type_____Height_____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) _____

CHECKLIST

☐ All information completed above
☐ Two (2) copies of a 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

Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.

☐ 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.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT_____Date_____

Reviewed by Zoning Office_____ Date_____( ) Approved ( ) Denied

TYPE:

CATALOG #:

McGRAW-ED

DESCRIPTION

McGraw-Edison's Galleria combines beauty and versatility to make it an excellent choice for architects, specifiers and contractors in today's energy- and design-conscious environment. An aesthetic reveal in the formed aluminum housing gives the Galleria a distinctive look while a variety of mounting options and lamp wattages provide maximum flexibility.

APPLICATION

The Galleria achieves superior light distribution by utilizing a seamless reflector system, making it the optimum choice for almost any large area lighting application.

SPECIFICATION FEATURES

A···Housing
Formed aluminum housing with stamped reveal has interior-welded seams for structural integrity and is finished in polyester powder coat. U.L. listed for wet locations. CSA approved.

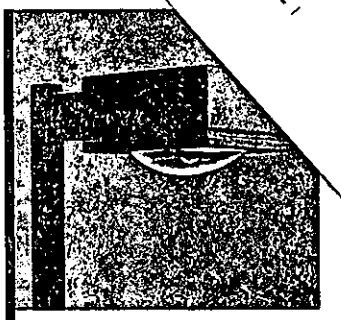
B···Ballast Tray
Ballast tray is hard-mounted to housing interior for cooler operation.

C···Ballast
Long-life core and coil ballast.

D···Reflector
Spun and stamped aluminum reflector in vertical lamp units, or hydroformed anodized aluminum reflector in horizontal lamp units.

E···Door
Formed aluminum door has heavy-duty hinges, captive retaining screws and is finished in polyester powder coat. (Spider mount unit has steel door.)

F···Lens
Convex tempered glass lens.

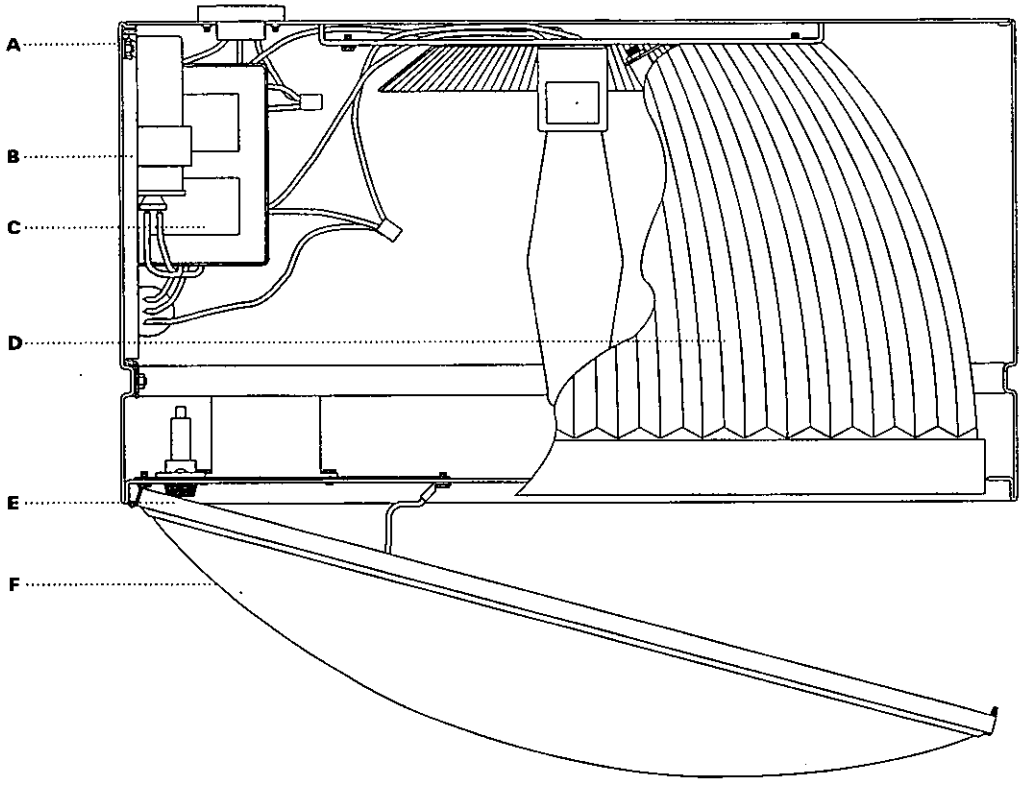


GLGALLERIA

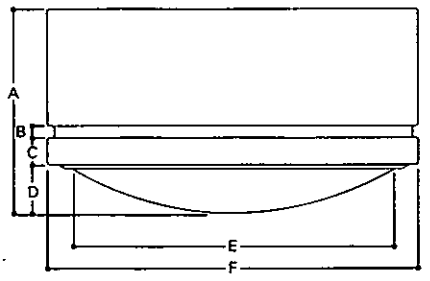
400-1000W

High Pressure Sodium

ARCHITECTURAL AREA LIGHT

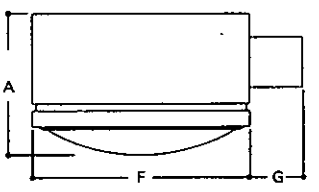


DIMENSIONS

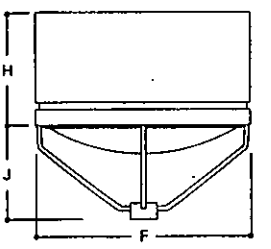


Fixture	A	B	C	D	E	F	G	H	J
Large (in.)	18 1/2	3/4	3 3/8	4	12 7/8	27	6 or 14	14 1/2	12
(mm)	464	19	85	102	327	686	152 or 356	362	305

Arm Mount



Spider Mount



ENERGY DATA

CWA Ballast Input Watts
400W HPS HPF (485 Watts)
1000W HPS HPF (1100 Watts)

DSF10, DSF15 External Hinge

valmont STRUCTURES

DSF10

Nominal Mounting Height (ft)	Shaft				Pole Base			Anchor Bolts	Winch	80MPH w/1.3 Gust		90MPH w/1.3 Gust		100MPH w/1.3 Gust	
	Designation Number	Base O.D. (in)	Wall Thk. (ga)	Struct. Weight (lbs)	Bolt Circle Dia. (in)	Square (in)	Thk. (in)	Dia. x Lngth. x Hk. (in)	Model No.	Max. EPA (ft^2)	Max. Weight (lbs)	Max. EPA (ft^2)	Max. Weight (lbs)	Max. EPA (ft^2)	Max. Weight (lbs)
20	** 400F200	4.00	7	300	8.5-10	9.75	0.75	.75 x 17 x 3	M180A	11.6	217	8.5	21[illegible]	6.2	217
25	** 400F250	4.00	7	370	8.5-10	9.75	0.75	.75 x 17 x 3	M180A	7.1	160	4.8	16[illegible]	3.1	160
	641A250	6.41	11	355	12.5	11.88	0.88	1.00 x 36 x 4	M136	18.0	254	13.0	25[illegible]	9.3	254
30	** 400F300	4.00	7	435	8.5-10	9.75	0.75	.75 x 17 x 3	M180A	4.0	120	2.1	12[illegible]	0.8	120
	641A300	6.41	11	440	12.5	11.88	0.88	1.00 x 36 x 4	M136	12.5	230	8.3	23[illegible]	5.1	230
35	718A350	7.18	11	540	13.5	12.63	0.88	1.00 x 36 x 4	M135	7.1	160	3.2	16[illegible]	-	-
	713E350	7.13	7	700	13.5	12.63	1.25	1.00 x 36 x 4	M135	22.0	155	16.9	15[illegible]	12.1	155
39	718A389	7.18	11	555	13.5	12.63	0.88	1.00 x 36 x 4	M135	4.3	135	-	-	-	-
	713E389	7.13	7	740	13.5	12.63	1.25	1.00 x 36 x 4	M135	19.5	110	13.5	11[illegible]	9.2	110

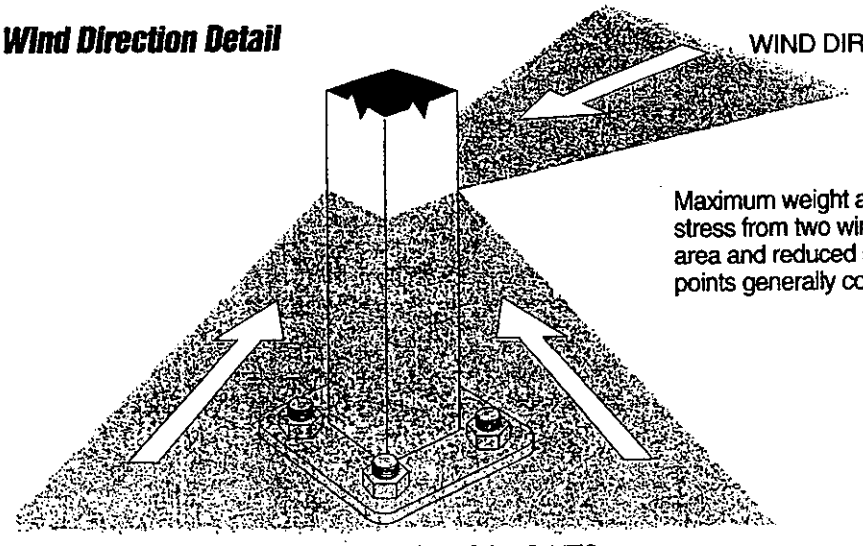
DSF15

Nominal Mounting Height (ft)	Shaft				Pole Base			Anchor Bolts	Winch	80MPH w/1.3 Gust		90MPH w/1.3 Gust		100MPH w/1.3 Gust	
	Designation Number	Base O.D. (in)	Wall Thk. (ga)	Struct. Weight (lbs)	Bolt Circle Dia. (in)	Square (in)	Thk. (in)	Dia. x Lngth. x Hk. (in)	Model No.	Max. EPA (ft^2)	Max. Weight (lbs)	Max. EPA (ft^2)	Max. Weight (lbs)	Max. EPA (ft^2)	Max. Weight (lbs)
25	641A250	6.41	11	355	12.5	11.88	0.88	1.00 x 36 x 4	M136	17.5	493	12.6	49[illegible]	9.0	493
30	641A300	6.41	11	440	12.5	11.88	0.88	1.00 x 36 x 4	M136	12.0	446	7.8	44[illegible]	4.7	446
35	718A350	7.18	11	540	13.5	12.63	0.88	1.00 x 36 x 4	M135	6.7	334	3.0	33[illegible]	-	-
	713E350	7.13	7	700	13.5	12.63	1.25	1.00 x 36 x 4	M135	22.0	347	16.4	34[illegible]	11.7	347
39	718A389	7.18	11	555	13.5	12.63	0.88	1.00 x 36 x 4	M135	4.0	295	-	-	-	-
	713E389	7.13	7	740	13.5	12.63	1.25	1.00 x 36 x 4	M135	18.9	271	13.1	27[illegible]	8.9	271

DSF10 & DSF15 NOTES:

1. ** 3" x 5" Nominal handhole - all others 4" x 6.5" nominal.
2. Structure weight is a nominal value which includes the pole shaft and base plate only.
3. The base plate is provided with bolt holes 0.25" larger than the anchor bolt diameter.
4. DSF15 design utilizes a shroud stiffener support angle (see drawing).
5. Maximum weight and EPA values are based on top mounted luminaires and/or brackets having a centroid 2'-6" above the nomina mounting height.
6. CAUTION: To prevent damage to the pole the winch cable must be kept taut when raising or lowering the pole.

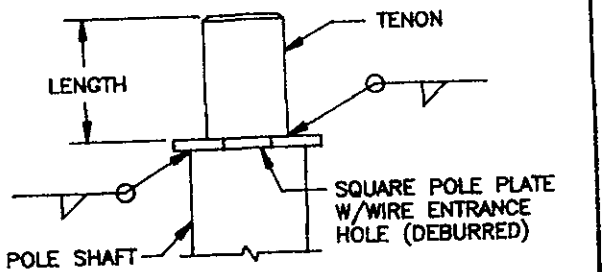
Wind Direction Detail



Maximum weight and EPA values are determine d by analyzing stress from two wind directions as shown. Due tc the increased area and reduced section properties, stress level s across the points generally control the allowable loads.

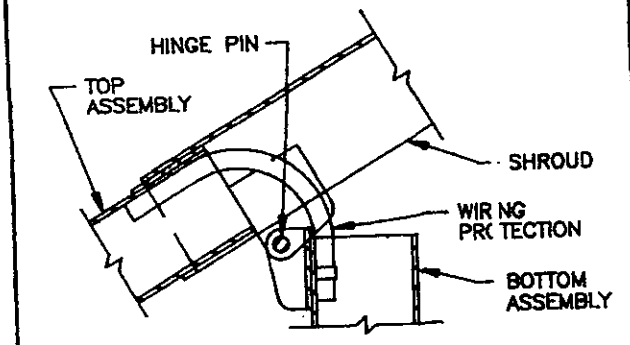
valmont STRUCTURES

DSF10 & DSF15 External Hinge

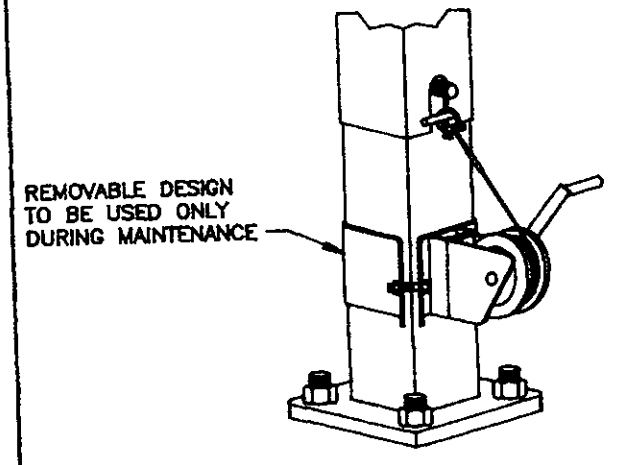


DESIGN NUMBER	O.D. (in)	PIPE SIZE	LENGTH (in)
P2	2.375	2.0" SCHED 80	4
P4	4.000	3.5" SCHED 40	6

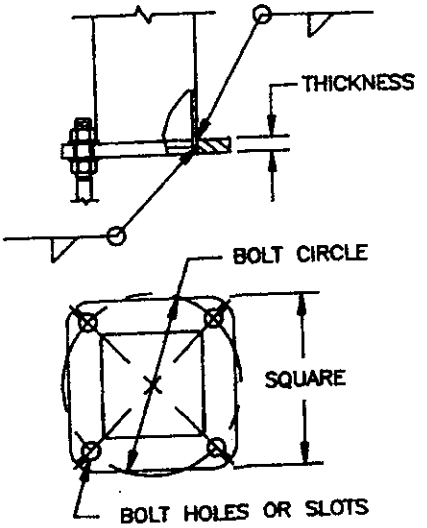
TENON DETAIL



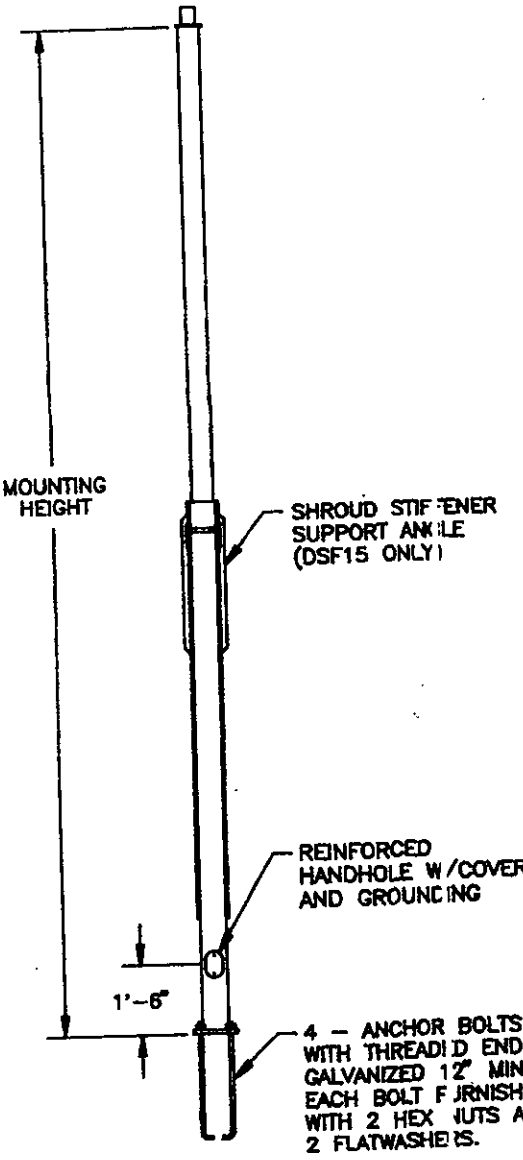
EXTERNAL HINGE DETAIL



WINCH DETAIL



POLE BASE DETAIL



DSF10 & DSF15 POLE DETAIL

TOWNSHIP OF BRICK

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

Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
http://www.twp.brick.nj.us

Date: 2/15/04

Block: 1068 Lot: 15.01

Property Address: 101 HUNDNICKSON AVE.

I, _____ (name) of _____ (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, ect. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

_____
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.

2. Proof that the property is not located in a Flood Hazard Area.

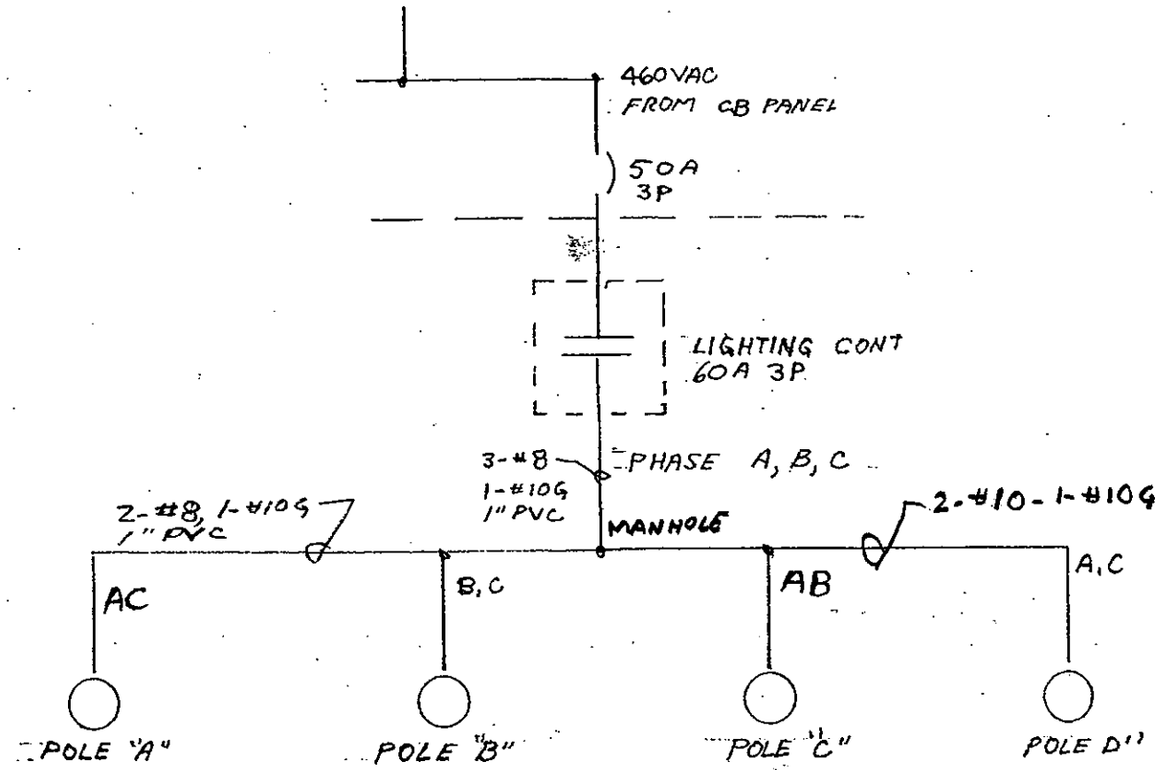
Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

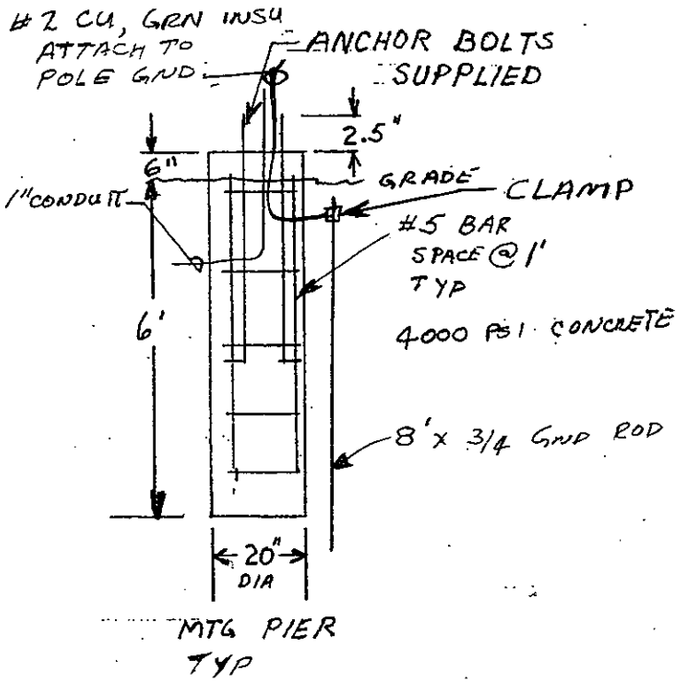
FOR OFFICE USE ONLY

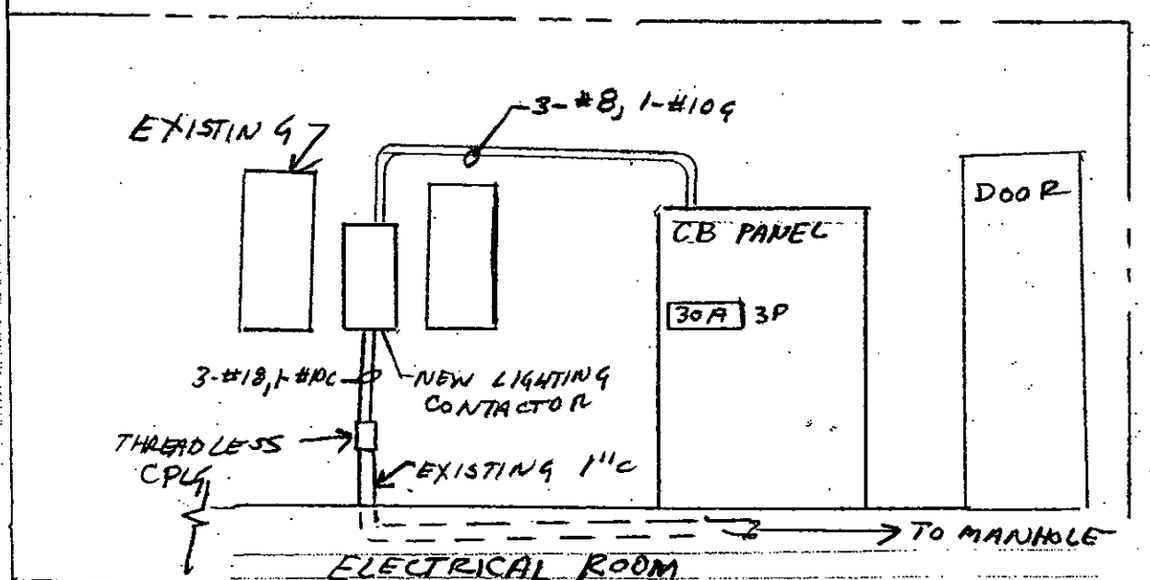
Approved on: 3/10/05 Signed: GC

Rejected on: _____ Signed: _____

Comments: Per Resolution P/B







RUSSEL S. MILLER, P.E.
N.J LIC. NO.
40024

Russel S Miller

04 JAN 2005

REV 11/29/04

BRICK TOWNSHIP BOARD OF EDUCATION
VETERANS SCHOOL COMPLEX
LIGHTING PLAN

SINGLE LINE / FOUNDATION

DATE 10/24	BY JMS	NO. E-2

BRICK TOWNSHIP PLANNING BOARD

CAPITAL PROJECT APPROVAL RESOLUTION

RESOLUTION R- 16 -05 **PAGE 1**

CASE NO. **March 9, 2005**

File 2
Bus. Adm
Clerk
Zoning
Eng.
PB Att
PB Eng

WHEREAS, the Brick Township Board of Education intends to take certain actions necessitating the expenditure of public funds for parking lot lighting with house side shields at the Veterans Memorial School Complex, located at Block 1068, Lot 15.01. The Board of Education proposes this action to enhance the lighting in the parking lot which is in need since the 2004 addition to the Veterans Memorial School Complex. The Brick Township Board of Education further represents that this proposal is consistent with the preliminary and final site plan previously presented to the Planning Board;

WHEREAS, pursuant to N.J.S.A. 40:55D-31, this proposed action as described hereinabove was referred to the Planning Board for its recommendation; and

WHEREAS, Elissa Cummins, P.E., Board Engineer, presented to the Planning Board certain information and materials relating to the development and necessity of this improvement;

NOW, THEREFORE, the Board does, based upon the foregoing information, make the following findings:

1. The proposal is consistent with the Master Plan and in particular those aspects of the Master Plan relating to the development of public facilities and the location thereof.

NOW, THEREFORE, be it resolved by the Brick Township Planning Board on this 9th day of March, 2005, that it favorably recommends the undertaking and completion of this project by the Brick Township Board of Education.

MOVED BY: Mr. Kelly

SECONDED BY: Mr. Fredo

VOTING IN THE AFFIRMATIVE: Mr. Vespi, Mr. Petoia, Mrs. LaDuke, Mr. Dockery, Mr. Fredo, Mr. Gross, Mr. Brando, Mr. Kelly

VOTING IN THE NEGATIVE:

INELIGIBLE TO VOTE:

ABSTAINING:

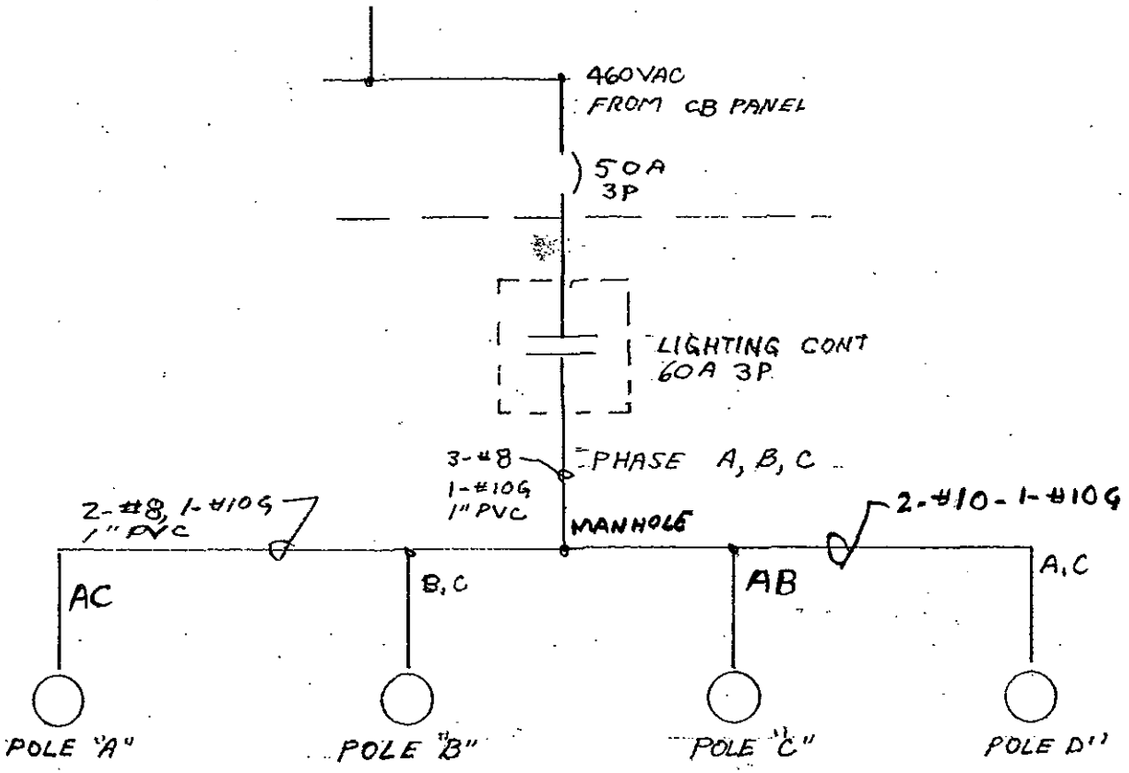
ABSENT: Councilwoman Scaturro, Mr. Aiello, Mr. Reilly

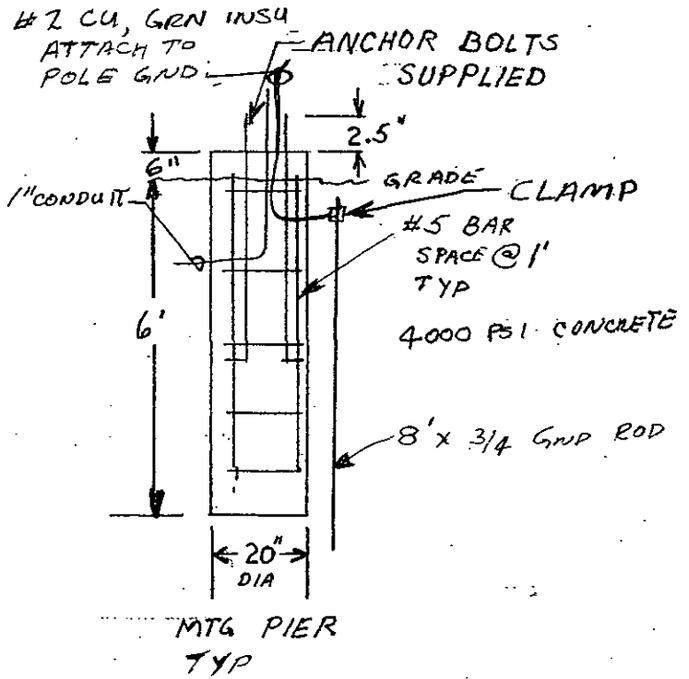
CERTIFICATION

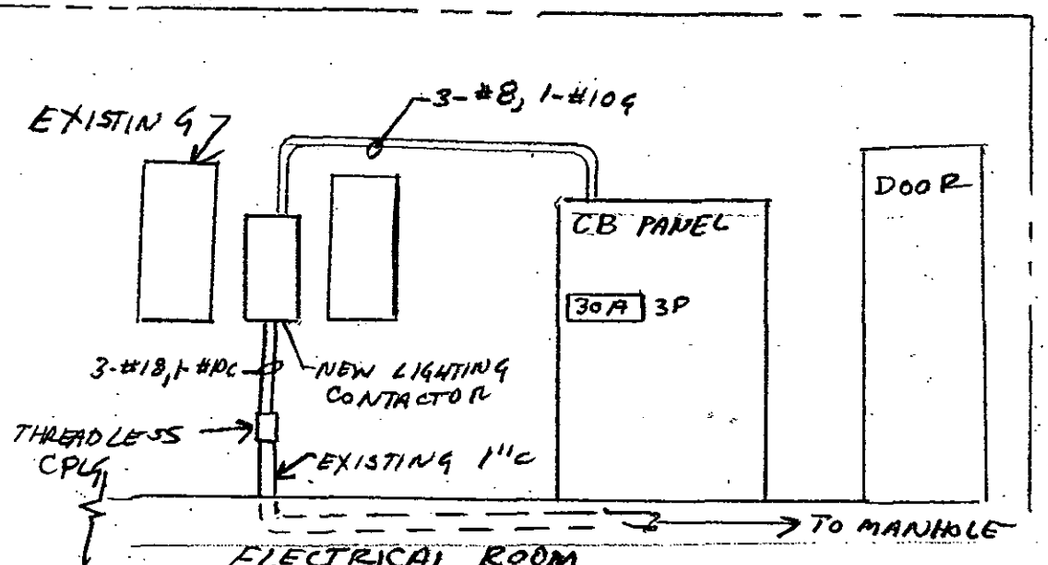
I, **JUDITH FOX NELSON**, Clerk of the Planning Board of the Township of Brick, County of Ocean, State of New Jersey, do hereby certify that the foregoing resolution was duly **ADOPTED** by the said Planning Board of the Township of Brick at a regular meeting held on the 9th day of March, 2005.

IN WITNESS WHEREOF, I have set my hand this 10th day of March, 2005.

Judith Fox Nelson
JUDITH FOX NELSON
Clerk of the Planning Board







RUSSEL S. MILLER, P.E.
N.J LIC. NO.
40024

04 JAN 2005

REV 11/29/04

BRICK TOWNSHIP BOARD OF EDUCATION
VETERANS SCHOOL COMPLEX
LIGHTING PLAN

SINGLE LINE / FOUNDATION

DATE 10/24 | BY JMS | NO E-2

Township of Brick
Counter Form
(PLEASE PRINT)

Site Location: 103/105 Hendrickson Avenue
Block: 1068 Lot: 15.01
Owner's Name: Brick Township Board of Education
Owner's Mailing Address: 101 Hendrickson Avenue
Brick, NJ 08723
Phone: (732) 785-3000

BUILDING

Contractor:
Address:
Phone#:
Lis #
Federal Emp # or SSN

Technical Data

Description of Work:

Type of Work

___New Building
___Addition
___Alteration
___Roofing
___Asbestos Abatement
___Fireplace wd/gas
___Siding
___Fence
___Pool
___Demolition
___Sign _____sq ft

Building Characteristics

Use Group Present:_____ Proposed:_____
No of Stories:
Height of Structure:
Area of the largest floor:
Area of New Structure:
Volume of New Structure:
Total Land Disturbed:

Cost of Alteration: $

Cost of New Building: $

Cost of Site Work $

Total Cost of New Building Work: $

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name

ELECTRICAL

Contractor: Sun Electrical Construction Corp.
Address: 308 Drum Point Road
Brick, NJ 08723
Phone#: 732-477-3500
Lis #: 7146
Federal Emp # or SSN 22-2763732

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	
Switches	
Detectors	
Light Poles	4
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	
Pool (Receptacles, Switches, Lights, Motor 1HP)	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Sprinkler System	
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: $24,000.00

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:

Please Print Name Anthony Zurella, President

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Fixtures Quantity

Water Closets (Toilet)_____
Urinals/Bidets_____
Bath Tub (w/or w/out shower head)_____
Lavatory (BR Sink)_____
Shower_____
Floor Drain_____
Sink_____
Dishwasher_____
Drinking Fountain_____
Washing Machine_____
Hose Bib_____
Gas Piping_____ No. of outlets_____
Fuel Oil Piping_____
Water Heater_____
Steam Boiler_____
Hot Water Boiler_____
Sewer Pump_____
Interceptor/Separator_____
Backflow Preventer_____
Greasetrap_____
Air Conditioner (Condensate Drain)_____Tons_____
Septic Tank Closure_____
Sewer Service Connection_____
Water Service Connection_____
Active Solar System_____
Auxiliary Meter_____
Sump Pump_____
Pool Heater_____
Other:

Estimated Cost of Plumbing Work_____

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:_____

Please Print Name:_____

CONTRACTOR'S SEAL

FIRE

Contractor:_____
Address:_____
_____
Phone #:_____
Lis #:_____
Federal Emp # or SSN_____

Technical Data

Description of Work:

Heating Type: ____Gas ____Oil ___Electric ___Solar
Heating System is ___New ___Existing
Location of Furnace/Boiler:_____
Water Supply Source_____
Method of Valve Supervision_____
Local Alarm Supervision_____
Central Supervision:_____
Proprietary Supervision:_____

Tank Removal _____
Flammable Storage Tanks _____capacity_____fuel
Combustible Storage Tanks_____capacity_____fuel
LPG Storage Tanks_____capacity_____fuel

Item Quantity

Wet Sprinkler Heads_____
Dry Sprinkler Heads_____
Total_____

Smoke Detectors_____
CO Detectors _____
Heat Detectors_____
Total_____

Stand Pipes_____
Kitchen Hood Exhaust System Commercial _____

Pre-Engineered Systems:
CO2 Suppression_____
Halon Suppression_____
Foam Suppression_____
Dry Chemical_____
Wet Chemical_____

Gas/ Oil Fired Appliances:
Gas Stove _____
Gas Dryer _____
Furnace (Gas or Oil)_____
Gas Fireplace_____
Gas Logs_____
Total Appliances _____

Wood Burning Stove_____
Wood Fireplace_____
Other:

Estimated Cost of Fire Work_____

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work listed on this application.

Signature:_____

Print Name:_____