BLOCK 12111 LOT 2 C22-2 QUALIFICATION CODE _____ ADDRESS (SITE) 200 n Lanes Mill Rd. PERMIT NO. 98-4154

RECEIVED
OCT 16 1998
DIV. OF INSPECTION

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Propsed Work Site at: 200 n Lanes Mill Rd. Brick Memorial High School
2. Name of Owner in Fee: Brick Twp. Board of Education Tel. (732) 785-3000
   Address 101 Hendrickson Rd, Brick, NJ 08724
   street municipality zip code
3. Ownership in Fee: Public ✓ Private _____
4. Principal Contractor: Aldarelli Enterprises Tel. (732) 493-1787
   Address 1 Pollack Avenue, Ocean, NJ 07712
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 22-2888662 FAX: (732) 493-3213
5. Architect or Engineer T&M Associates Tel. (732) 671-6400
   Address 11 Tindall Road, Middletown, NJ (Neid)
6. Responsible Person in Charge of Work Christopher M. Aldarelli Sr.
   Tel. (732) 493-1787 FAX (732) 493-3213

F & F only FM

Org outs + addition - press box only

V. FEE SUMMARY (for office use only)

		+A	+B
		Update	Update
1. Building	$	Footing & Foundation only	X
2. Electrical		X	
3. Plumbing		X	X
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee			
10. Subtotal			
11. Cert. of Occupancy			
12. Other ZPA			
13. TOTAL	$		

+C X

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	2	
2. Height of Structure	20'9" ft.	
3. Area — Largest Floor	27'8" X 15'4" sq. ft.	
4. New Building Area	428 sq. ft.	X
5. Volume of New Structure	6220 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		

+D

COMM.

II. PROPOSED WORK

	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	60,000	JRT	10/22/98		12-1-98	FM			
3. ☐ Addition									
4. ☐ Alteration									
5. ☐ Fire Protection									
6. ☒ Plumbing	51,000				12-9-98				
7. ☒ Electrical	56,212				123098	WW	4/15/99	4154 +A	
8. ☐ Elevator Devices								+ Comm	
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition		Eng.	11/16/98		11/16/98	JL			
TOTAL COSTS									

OPTIONAL (for office use only)

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:
Before Construction
After Construction
Net Gain or Loss

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

MANDATORY FEE INCLUDED

DS BR 10516020

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. ( ) 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. 5:32-2.15(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 Aldarelli Enterprises

Address 1 Pollack Avenue, Ocean, NJ 07712

Telephone (732) 493-1787

Signature Chris Aldarelli

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.									
☐									
☐									

IMPORTANT: FAX

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	Dungeons	No. 4154	4-16-99	30 days	5/16/99	
☐ Temporary Certificate of Compliance	Rest Boy	No. 4154	5-5-99		8-1-99	
☐ Continued Certificate of Occupancy		No.				
☐ Certificate of Compliance		No.				
☐ Certificate of Occupancy		No.				
☑ Certificate of Approval		No. 4154	7-14-99			
☐ Lead Abatement Clearance Certificate		No.				

New Jersey

CERTIFICATE

Date Issued 5-5-99
Control #
Permit # 98-4154

IDENTIFICATION

Block 1211 Lot 2
Work Site Location 2001 Lanes Mill Rd.

Owner in Fee ~~BrickkBoard of Education~~
Address ~~101 Hendrickson Ave.~~
~~Brick, NJ 08724~~
Tele. ( )
Contractor Aldarelli Enterprises
Address 1 Pollack Ave.
Ocean, NJ 07712
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group E
Maximum Live Load
Description of Work/Use:

Press box only

Brick Memorial High School

Type of Warranty Plan: [ ] **State** [ ] **Private**
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ **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.

☐ **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.

XXXX☒ **TEMPORARY CERTIFICATE OF OCCUPANCY**

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than 8-1, 1999 or the owner will be subject to a fine or order to vacate: Pending roof repairs

CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 07/14/99
Control #
Permit # 98-4154

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD
FOOTING & FOUNDATION ONLY
Owner in Fee/Occupant BRICK BD OF ED
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Telephone (732)785-3000
Contractor ALDARELLI ENTERPRISES
Address 1 POLLACK AVE
OCEAN, NJ 07712-
Telephone (732)493-1787 Fax (732)493-3213
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2888662

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group A-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

PRESS BOX FOOTING & FOUNDATION ONLY
BRICK MEMORIAL

[ ] 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.

[X] 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.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ___.

J. Siviano
CONSTRUCTION OFFICIAL
U.C.C. F260 (rev. 3/96)

Fee $ 0
Paid [ ] Check No.
Collected by:

CERTIFICATE

Date Issued 4/16/99
Control #
Permit # 98-4154+C

IDENTIFICATION

Block 1211 Lot 2
Work Site Location 2001 Lanes Mill Rd
Brick, N.J.
Owner in Fee Brick Bd of Education
Address 101 Hendrickson Ave
Brick, N.J. 08724
Tele. ( )
Contractor Aldarelli Ent.
Address 1 Pollack Ave
Ocean, N.J. 07712
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group
Maximum Live Load
Description of Work/Use:

ConreteDBlock Dugouts

Type of Warranty Plan: [ ] State [ ] Private
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ **CERTIFICATE OF OCCUPANCY**

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.

☐ **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 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:

☒ **CERTIFICATE OF APPROVAL** /30 day Temporary

Frank Mtg per JC

CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 12/02/98
Control #
Permit # 98-4154

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 1211 Lot 2 Qual

Work Site Location 2001 LANES MILL RD
ADDITION/PRESS BOX
Owner in Fee BRICK BD OF ED
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Telephone (732)785-3000

Contractor ALDARELLI ENTERPRISES
Address 1 POLLACK AVE
OCEAN, NJ 07712-
Telephone (732)493-1787
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2888662

Is hereby granted permission to perform the following work:

[X] BUILDING [X] PLUMBING [ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
PRESS BOX FOOTING & FOUNDATION ONLY
BRICK MEMORIAL

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Other	
Total	0
Check No.	
Cash	
Collected By	

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 $ 60,002

Construction Official

12/02/98
Date

U.C.C. F170 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 02/18/99
Control #
Permit # 98-4154+C
Permit Issued 12/02/98

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 1211 Lot 2 Qual

Work Site Location 2001 LANES MILL RD
4 DUGOUTS
Owner in Fee BRICK BD OF ED
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Telephone (732)785-3000

Contractor ALDARELLI ENTERPRISES
Address 1 POLLACK AVE
OCEAN, NJ 07712-
Telephone (732)493-1787
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2888662

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:
4 CONCRETE BLOCK DUGOUTS

Mem. Hi School

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Other	
Total	0
Check No.	
Cash	
Collected By	

Estimated Cost of Work $ 80,000

J. Ciriazza 1165

Construction Official

02/18/99
Date

U.C.C. P190 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 01/25/99
Date Issued ~~01/01/54~~
Control # 2-18-99
Permit # 98-4154+C

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

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD
4 DUGOUTS
Owner in Fee BRICK BD OF ED
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Tele.(732)785-3000
Contractor ALDARELLI ENTERPRISES
Address 1 POLLACK AVE
OCEAN, NJ 07712-
Tele.(732)493-1787 Fax (732)493-3213
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2888662

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	2-18-99	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type				
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed A-5
Constr. Class Present Proposed
No. of Stories 1
Height of Structure 7 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 896 Sq. Ft.
Volume of New Structure 6,272 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 80,000
2. Alteration $ 0
3. Total (1+2)$ 80,000

Industrialized Building:
[ ] State Approved
[ ] HUD

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

4 CONCRETE BLOCK DUGOUTS

Note: Roofing Shall Not Be shingles per Drawing Due to Low Slope

TYPE OF WORK	FEE (Office Use Only)
[X] New Building	$ 157
[ ] Addition	0
[ ] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 0
DCA Training Fee	$ 0

Paid [ ] Check #
Collected by:

U.C.C. F110 (rev. 3/96)

Note, No inspections listed By anyone. For Footing Foundation But was Done By Bob Meyers school Rep & Quality control person

Alt 2289
776 5591

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 10/22/98
Date Issued 12/2/98
Control # C22-2
Permit # 98-4154

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

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD
ADDITION/PRESS BOX
Owner in Fee BRICK BD OF ED
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Tele.(732)785-3000
Contractor ALDARELLI ENTERPRISES
Address 1 POLLACK AVE
OCEAN, NJ 07712-
Tele.(732)493-1767 Fax (732)493-3213
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2888662

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

PRESS BOX
BRICK MEMORIAL
Footing & Foundation only

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	12-1-98	
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date: 7-14-99
Approved By: FM

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing	12/4		1/28/99	JKO
Foundation				
Slab			2/24/99	
Frame				
BarrierFree				
Insulation				
Finishes				
~~Energy~~	~~Sheetrock~~		~~2/25/99~~	
~~Mechanical~~	Sheetrock		2/25/99	
TCO				
Other	PRESS BOX Fdt.		1/29/99	
Final				
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[X] New Building	$ 156
[ ] Addition	0
[ ] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present Proposed A-5
Constr. Class Present Proposed
No. of Stories 2
Height of Structure 21 Ft.
Area Largest Floor 428 Sq. Ft.
New Bldg. Area/All Floors 428 Sq. Ft.
Volume of New Structure 6,220 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 60,000
2. Alteration $ 0
3. Total (1+2)$ 60,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 0
DCA Training Fee	$ 0

Paid [ ] Check #
Collected by:

U.C.C. F110 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 01/25/99
Date Issued 02/18/99
Control #
Permit # 98-4154+C

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

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD
4 DUGOUTS
Owner in Fee BRICK BD OF ED
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Tele.(732)785-3000
Contractor WALLACE BROTHERS INC.
Address 2222 RT. 88
BRICK, NJ 08723-
Tele.(908)295-9340 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2775668

Change of Contractor 4/30/99

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

4 CONCRETE BLOCK DUGOUTS
CHANGE OF CONTRACTOR 04-30-99

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date: 7-14-99
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[X] New Building	$ 157
[ ] Addition	0
[ ] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present Proposed A-5
Constr. Class Present Proposed
No. of Stories 1
Height of Structure 7 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 896 Sq. Ft.
Volume of New Structure 6,272 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 80,000
2. Alteration $ 0
3. Total (1+2)$ 80,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 0
DCA Training Fee	$ 0

U.C.C. F110 (rev. 3/96)

Brick WC

SUBCODE
TECHNICAL SECTION

Control #
Permit #

OCT 28 93 0 i 4307

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

Block 1211 Lot 2

Work Site Location Brick Memorial High School
Lanes Mill Rd. Brick

Owner in Fee Brick Township Bd. of Education

Address 101 Hendrickson Ave.
Brick, NJ 08724-2599

Tele. (908) 477-2800

Contractor Allied Boiler Repair Co

Address 1520 Rt. 37 West
Toms River, NJ 08754

Tele. (908) 341-5907

Lic. No.

Federal Emp. No. 22-2800-830 or Social Security No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb.
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 9/15/93
Approved By:

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Rough				
Temporary				
Constr. Serv.				
TCO				
Other				
Service				
Final			9/15/93	

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

William Bozzuto
Signature—Contractor Seal

[ ] Licensed Electrical Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
		Fixtures (1)	
		Receptacles (2)	
		Switches (3)	
		Total 1 + 2 + 3	
	___ Kw	Range	
	___ Kw	Oven(s)	
	___ Kw	Surface Unit	
	___ hp	Dishwasher	
	___ hp	Garbage Disposal	
	___ Kw	Dryer	
	___ Kw	A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
	___ hp	Whirlpool/spa	
		Pool Bonding	
	___ hp	Pool Filter Motor	
		Pool Lights	
	___ Kw	Water Heater(s)	
2	___ Kw	Central heat: (oil) (gas) or elec.	
	___ Kw	Baseboard Heat Units	
		Thermostats	
	___ hp	Heat Pump	
	___ hp	Pump(s)	
	___ Amp	Motor Control Center/Sub Panels	
		Signs	
	___	Light Standards	
	___ hp	Motors—Fractional H.P.	
2	2 hp	Motors—All Others	
	___ Kw	Transformers	
	___ Kw	Generators	
	___ Amp	Service Entrance	
	___	Other	

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
DCA Training Fee $ n/c
Collected by: TOTAL FEE $

U.C.C. Form F-120B

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

Brick

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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

Block 1211 Lot 2
Work Site Location Brick Memorial High School
2001 Lane Mills Rd Brick
Owner in Fee/Occupant Brick Board of Ed
Address 101 Hendrickson Ave
Brick N.J. 08724
Tele. (732) 262-2625
Contractor Brick Schools Maintenance
Address 346 Chambers Bridge Rd
Brick N.J. 08724
Tele. (732) 262-2625 Fax (732) 477-8228
Lic. No.
Federal Emp. No. 26-22625

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as School Utility Co.
Est. Cost of Elec. Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 4/15/99
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			4/15/99	MM

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

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

APR 13 98 00 2958

Administrative Surcharge $
Minimum Fee $
DCA Training Fee $
TOTAL FEE $ n/c

M

U.C.C. F120 (rev. 3/96)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

SUPV. OFFICE

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

980413. 2958

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

Block 1211 Lot 2
Work Site Location Brick Memorial High School
2001 LANE Mills Rd Brick
Owner in Fee/Occupant Brick Board of Ed
Address 101 Hendrickson Ave
Brick N.J. 08724
Tele. (732) 262-2625
Contractor Brick Schools Maintenance
Address 346 Chambers Bridge Rd
Brick N.J. 08724
Tele. (732) 262-2625 Fax (732) 477-8228
Lic. No.
Federal Emp. No. 26-22625

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as School Utility Co.
Est. Cost of Elec. Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[ ] No Plans Required
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	Dates (Month/Day) Approval	Initial
Rough			4/28	DAG
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [✓] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
		Lighting Fixtures
6		Receptacles
2		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		TOTAL NUMBERS
		Pool Permit/with UW Lights
		Storable Pool/Spa/Hot Tub
		KW Elec. Range/Receptacle
		KW Oven/Surface Unit
		KW Elec. Water Heater
		KW Elec. Dryer/Receptacle
		KW Dishwasher
		HP Garbage Disposal
		KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
		HP Motors 1/+ HP
		KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

FEE (Office Use Only)

$

Administrative Surcharge $
Minimum Fee $
DCA Training Fee $
TOTAL FEE $

U.C.C. F120
(rev. 3/96)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

check
Plan review

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/04/98
Date Issued ~~01/01/54~~
Control # 1-11-99
Permit # 98-4154+A

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

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD
BLDG REV/PLBG/ELECT
Owner in Fee BRICK BD OF ED
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Tele.(732)223-8600 Fax ( )
Contractor GARDEN STATE ELECTRIC
Address 208 E MAIN ST
MANASQUAN, NJ
Tele.(732)223-8600
Lic. No. or Bldrs. Reg. No. 6720
Federal Emp. No. 22-2937324

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed A-5
[ ] Pole/Pad # [ ] Temporary [X] Other PRESS BOX
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 56,212

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 12 30 98
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough	2 26 99 MM		3 3 99 MM	
Temp Serv				
Const Serv				
TCO				
~~Other~~ Partial			3 17 99 MM	
Service				
Final	3 18 99 MM		4 15 99 MM	

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	0
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
1	300	AMP Service	100
2	150	AMP Subpanels	80
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

277

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 0
DCA Training Fee $ 0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 04/20/99
Date Issued 01/01/54
Control #
Permit # 98-4154+D

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

Block 1211 Lot 2 Qual
Work Site Location 2001 LANES MILL RD
VARIATION FOR FIRE
Owner in Fee BRICK BD OF ED
Address 101 HENDRICKSON AVE
BRICK, NJ 08724-
Tele.(732)493-1787 Fax (732)493-3213
Contractor ALDARELLI ENTERPRISES
Address 1 POLLACK AVE
OCEAN, NJ 07712-
Tele.(732)493-1787
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2888662

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed A-5
Constr Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 10

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

After the fact

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 4-30-99
Approved By: KEB

SUBCODE APPROVAL
[ ] CCO [X] CA
Date: 4-23-99
Approved By: KEB

VARIATION

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys			4-23-99	GB
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final			4-23-99	GB
Other				

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.

Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other VARIATION		35
Other		0

2 S/D
1 UP
1 DOWN / Stacked

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	0
DCA Training Fee	$	0

Paid [ ] Check #
Collected by:

U.C.C. F140 (rev. 3/96)

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: February 3, 1999 1999- 0076

Block 1211 Lot 2 Zone R-R-1

Property Address: 2001 Lanes Mill Road

Owner: Brick Township Board of Education (Phone): 785-3000

Applicant: Christopher Aldarelli (Phone): 493-1787

Existing Use: Brick Memorial High School

Proposed Use: Brick Memorial High School

Proposed Construction (if any): Concrete block dug-outs, 7'x32', 6'8" high

Conditions: Capital Project reviewed by the Planning Board. Site Plan prepared by William Farrell, P.E.; dated 8/11/98.

Zoning Permit NO. 1998-1748, approved 10/23/98

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Municipal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK

Zoning Permit Application

(Please Type or Print Neatly)

BLOCK 1211 LOT 2 C22-2

PROPERTY ADDRESS Brick Memorial High School, 2001 Lanes Mill Rd.

NAME OF OWNER Brick Twp Board of Education OWNER'S PHONE (732) 785-3000

NAME OF APPLICANT Christopher M. Aldarelli, Sr. of Aldarelli Enterprises

APPLICANT'S COMPLETE ADDRESS 1 Pollack Avenue, Ocean, NJ 07712

APPLICANT'S PHONE NUMBER (732) 493-1787 APPLICANT'S BUSINESS NAME Aldarelli Enterprises

PRESENT USE OF PROPERTY (check one)

☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment

☐ Commercial (please describe) _____

☒ Other (please describe) School baseball/softball fields

PROPOSED USE OF PROPERTY (check one)

☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment

☐ Commercial (please describe) _____

☒ Other (please describe) Concrete Block Dugouts

PROPOSED CONSTRUCTION Concrete Block Dugouts

All Dimensions 7' W 32' L 6' 8" Ht

Deck or Garage ☐ Attached ☐ Detached

Fence Type _____ Ht _____

CHECKLIST:

☐ All information completed above

☐ Two (2) accurate Survey / Plot Plans containing:

- ☐ all existing and proposed structures
- ☐ all dimensions of lot and structures
- ☐ set backs to all property lines
- ☐ all streets and waterways shown

☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

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 1/21/99

Reviewed by Zoning Officer Date 2/3/99 ☒ Approved ☐ Rejected

Construction Management Consultants

16 Forest Lane
Tabernacle, NJ 08088
Ph. (609) 268-2404 Fax (609) 268-1727

Sent Via Fax 732-262-8954

January 26, 1999

Mr. Frank Mizer, Building Subcode Official
Building Department
Township of Brick
401 Chambers Bridge Road
Brick, New Jersey 08723

RE: Athletic Field Dugout Structures- Brick High School and Brick Memorial High School

Dear Dr. Mizer:

The General Contractor has notified us, that the Township is requesting a letter regarding changes needed as a result of the Township's plan review.

1. Per Brick Township's plan review of the Dugout Structures for the above referenced projects, we have instructed the contractor to use roll roofing in lieu of shingles on the roof.

2. The lolly column supports as indicated on the drawings are **set in a concrete footing and filled with concrete.** We have been advised by T&M Associates, the Engineer, that they are adequate to support the designed roof structure and will not collect water. They will also be painted. We trust this will meet with the Township's concerns regarding the support columns.

If you have any further concerns, please feel free to call. We appreciate your cooperation in the construction of these important projects for the Board of Education.

Sincerely,

Robert L. Myers
Construction Manager for the Board

cc: file
Aldarelli Enterprises
Dr. Philip Nicastro- BBE
Dennis Mantlick- T&M Associates

Not good enough
Lee Drake

BOCA®
NATIONAL BUILDING CODE
PLAN REVIEW RECORD

Valuation: _____ Plan Review # _____

Fee: _____ Date: 11-23-98

JURISDICTION Building

BUILDING LOCATION Brick (City, County, Township, etc.) High School (Dug outs)
(Street address)

BUILDING DESCRIPTION Dug outs

REVIEWED BY FM

Numerals indicated in parenthesis are applicable code sections of the 1993 *BOCA National Building Code*. The organization of this Plan Review Record follows the common Building Code format implemented in the 1993 *BOCA National Building Code*. The plan review accomplished as indicated in this record is limited to those code sections specifically identified herein. This record references commonly applicable code sections. It does not reference all code provisions which may be applicable to specific buildings. This record is designed to be used only by those who are knowledgeable and capable of exercising competent judgement in evaluating construction documents for code compliance.

CORRECTION LIST

No.	DESCRIPTION	Code Section
(1)	Roof on Dug out shows Shingles & Pitch is less than 3 on 12. This should be Rolled Roofing	
(2)	Lally Column Noted should be. (Structural tubing as it is exposed)	

FAX to Dennis 671-1365

Wilbert & Montenegro

A PROFESSIONAL CORPORATION

ATTORNEYS AT LAW

MICHAEL E. WILBERT
CERTIFIED CRIMINAL TRIAL ATTORNEY
NICHOLAS C. MONTENEGRO*
SCOTT D. THOMPSON**

DONALD W. BEDELL, JR.
DONNA J. MONTENEGRO**
BEN A. MONTENEGRO*

531 BURNT TAVERN ROAD
(BRIDGE AVENUE EXTENSION)
P.O. BOX 1049
BRICK, NEW JERSEY 08724
(732) 295-4500

TELEFAX
(732) 295-2530
(732) 295-4867

* MEMBER N.J. AND FLA. BARS
** MEMBER N.J. AND VA. BARS
+ MEMBER N.J. AND PA. BARS
++ MEMBER N.J. AND N.Y. BARS

April 15, 1999

FILE NO.

VIA FACSIMILE 262-8954 AND REGULAR MAIL

Frank Mizer, Construction Official
Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

Attn: Joan Kull

RE: BRICK BOARD OF EDUCATION/ALDARELLI ENTERPRISES, INC.

Dear Ms. Kull:

With regard to the above referenced matter, the Brick Township Board of Education (hereinafter the "Board") has been advised by representatives of Aldarelli Enterprises, Inc. (hereinafter "Aldarelli") that you have requested certain information related to the project prior to your being able to complete your review and issue temporary certificates of occupancy on the project. Please be advised as follows:

- Due to Aldarelli's inability to complete the project in a timely and adequate fashion, the Board has undertake to complete the press boxes at the high school fields. Aldarelli shall not be involved with the construction work necessary to complete those items.

- This office has been advised that representatives of Aldarelli have indicated that they wish the Board to complete the seeding/sodding/mulching of an area on the Brick Memorial High School Field that was damaged by Aldarelli at the time they completed their paving work at the site.

- The bleachers at the site are not part of Aldarelli's contract and was completed separately by the Board.

Please feel free to contact this office if any further information is required from the Board that would enable you to complete your review of the project and provide temporary certificates of occupancy with regard to the fields and dugouts at the site.

Thank you for your anticipated cooperation.

Very truly yours,

WILBERT & MONTENEGRO, P.C.

Ben Montenegro

BEN MONTENEGRO
For the Firm

BM/js
cc: Bob Myers (via fax (609)268-1727)
Dr. Philip Nicastro (via fax
John L. Bonello, Esq.
(via fax 728-1333 and regular mail)

OCEAN COUNTY SOIL CONSERVATION DISTRICT

714 Lacey Road
Forked River, NJ 08731
Tel 609.971.7002
Fax 609.971.3391

SOIL EROSION AND SEDIMENT CONTROL CERTIFICATION

AUGUST 18, 1998

DR. PHILIP NICASTRO
BRICK TOWNSHIP BOARD OF EDUCATION
101 HENDRICKSON AVENUE
BRICK NJ 08724

RE: **SCD #6518** BRICK HIGH SCHOOLS' ATHLETIC FIELDS;
BLOCK 701.39, LOT 12;
BLOCK 1211, LOT 2;
BRICK TOWNSHIP

Pursuant to Chapter 251, Soil Erosion and Sediment Control Act, P.L. 1975, the Ocean County Soil Conservation District hereby grants certification of the soil erosion and sediment control plan for the above-referenced project, subject to the following:

1. That the applicant carries out all land disturbance activities in accordance with the Standards for Soil Erosion and Sediment Control in New Jersey promulgated by the State Soil Conservation Committee.

2. THE APPLICANT MUST NOTIFY THE DISTRICT OFFICE, BY MAIL, AT LEAST 48 HOURS PRIOR TO INITIAL LAND DISTURBANCE.

3. **The applicant must notify District office of project completion.**
NOTE: NO CERTIFICATE OF OCCUPANCY CAN BE GRANTED UNTIL A REPORT OF COMPLIANCE IS ISSUED BY THE DISTRICT.

4. Changes in the certified plan relating to or that will affect land disturbance on the site must be submitted to the District office for re-evaluation and approval.

5 A copy of the certified plan and a copy of these provisions must be kept on the job site at all times.

Failure to comply with any of the above conditions may result in the issuance of a Stop Construction Order.

NOTE: This certification is limited to the controls specified in this plan. It is not authorization to engage in the proposed land use unless such use has been previously approved by the municipality or other controlling agency. THIS CERTIFICATION SHALL EXPIRE IN 3-1/2 YEARS.

SUPERVISOR

AP:bb

TOWNSHIP OF BRICK

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

Department of Administration & Finance
Division of Inspections
Joseph Curiazza
Construction Official
(732) 262-1024
Fax (732) 262-8954
http://www.gbshost.com/brick

Date: October 21, 1998

Municipal Engineer
401 Chambers Bridge Rd
Brick, N.J. 08723

RE: Block: 1211 Lot: 2

I, Christopher Aldarelli Aldarelli Enterprises (name) of 1 Pollock Avenue, (address) Ocean, NJ 07712 request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book, Chapter 190.31, part B. The property (please circle one) is / is not located in a flood zone.

Respectfully yours,

applicant's signature

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.

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

Note: Any excavations to be removed from the Township requires a mining permit.

OFFICE USE

Approved X Date: 11/16/98 By: [signature] pa (TE)

Rejected Date: _____ By: _____

Remarks: _____

BOCA®
NATIONAL BUILDING CODE
PLAN REVIEW RECORD

Valuation: _____ Plan Review #: _____

Fee: _____ Date: 12/15/98

JURISDICTION: Eloy (City, County, Township, etc.)

BUILDING LOCATION: 2009 Casa Grande Hwy (Street address)

BUILDING DESCRIPTION: Self Storage

REVIEWED BY: [signature]

Numerals indicated in parenthesis are applicable code sections of the 1993 *BOCA National Building Code*. The organization of this Plan Review Record follows the common Building Code format implemented in the 1993 *BOCA National Building Code*. The plan review accomplished as indicated in this record is limited to those code sections specifically identified herein. This record references commonly applicable code sections. It does not reference all code provisions which may be applicable to specific buildings. This record is designed to be used only by those who are knowledgeable and capable of exercising competent judgement in evaluating construction documents for code compliance.

CORRECTION LIST

No.	DESCRIPTION	Code Section
1	Item Elec Needed	
	Permit Incomplete	
	Any questions - 223-3360 Dan	
	12/16/98 Resubmit w/ Real	

06/93

TOWNSHIP OF BRICK

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

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # ______________________

APPROVAL DATE: ______________________
(Planning Board/BOA)

DATE: 11-17-98

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 1211 LOT 2 SITE ADDRESS [illegible]

TYPE OF SITE Commercial (Residential/Commercial) TYPE OF BUSINESS [illegible]

APPLICANT [illegible] CITY & STATE Brick NJ

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

$ ______________________

____
Frederick R. Millman, CTA, Tax Assessor

____
Date

☐ Please review the attached application for a final assessed value for the construction at the above referenced site:

$ ______________________

____
Frederick R. Millman, CTA, Tax Assessor

____
Date

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: October 23, 1998 1998 - 1748

Block 1211 Lot 2 Zone R-R-1

Property Address: 2001 Lanes Mill Road

Owner: Brick Township Board of Education (Phone): (732) 785-3000

Applicant: Christopher Aldarelli (Phone): (732) 493-1787

Existing Use: Brick Memorial High School

Proposed Use: Brick Memorial High School

Proposed Construction (if any): 15'4" by 27'8" athletic field press box; 20'9" high.

Conditions: Box must be setback at least 50' from the front property line and 25' from the side and rear property line.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Municipal Planner

Sean Kinnevy
Zoning Officer

Brick Memorial

TOWNSHIP OF BRICK

Zoning Permit Application

(Please Type or Print Neatly)

BLOCK 1211 LOT 2

PROPERTY ADDRESS 2001 Lanes Mills Rd.

NAME OF OWNER Brick Twp Board of Education OWNER'S PHONE (732) 785-3000

NAME OF APPLICANT Aldarelli Enterprises - Christopher Aldarelli

APPLICANTS COMPLETE ADDRESS 1 Pollack Avenue, Ocean, NJ 07712

APPLICANTS PHONE NUMBER (732) 493-1787 APPLICANTS BUSINESS NAME Aldarelli Enterpris

PRESENT USE OF PROPERTY (check one)

- ☒ Vacant Lot
- ☐ Single Family Dwelling
- ☐ Condo or Apartment
- ☐ Commercial (please describe) _____
- ☐ Other (please describe) _____

PROPOSED USE OF PROPERTY (check one)

- ☐ Vacant Lot
- ☐ Single Family Dwelling
- ☐ Condo or Apartment
- ☐ Commercial (please describe) _____
- ☒ Other (please describe) Athletic Field Press Box

PROPOSED CONSTRUCTION Press Box

All Dimensions 15'4" W 27'8" L 20'9" H

Deck or Garage N/A ☐ Attached ☐ Detached

Fence N/A Type _____ Ht _____

CHECKLIST:

- ☐ All information completed above
- ☐ Two (2) accurate Survey / Plot Plans containing:
  - ☐ all existing and proposed structures
  - ☐ all dimensions of lot and structures
  - ☐ set backs to all property lines
  - ☐ all streets and waterways shown
- ☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

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 10/21/98

Reviewed by Zoning Officer Date 10/25/98 ☑ Approved ☐ Rejected

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Department of Administration & Fina

Division of Inspections
Joseph Curiazza
Construction Official
(732) 262-1024
Fax (732) 262-8954
http://www.gbshost.com/brick

Date: 1/21/99

Municipal Engineer
401 Chambers Bridge Rd
Brick, N.J. 08723

RE: Block: 1211 Lot: 2 C22-2
Aldarelli Enterprises

I, Christopher Aldarelli (name) of 1 Pollack Ave, Ocean, NJ (address)

request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book , Chapter 190.31, part B. The property (please circle one) is /is not located in a flood zone.

Respectfully yours,

applicant's signature

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.

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

Note: Any excavations to be removed from the Township requires a mining permit.

OFFICE USE

Approved X Date: 2/9/99 By:

Rejected Date: _____ By: _____

Remarks: _____

TOWNSHIP OF BRICK

UNIFORM CONSTRUCTION CODE

APPLICATION FOR A VARIATION

PERMIT NO. 98-4154
DATE ISSUED 4-16-98
Block 1211 Lot 2
Subdivision

IDENTIFICATION

OWNER:
Name Brick Board of Education
Address 101 Hendrickson Ave
Town/State/Zip Brick, NJ 08724

CONSTRUCTION LOCATION:
Name Brick Memorial High School
Address 2001 Lanes Mill Rd
Town/State/Zip Brick, NJ 08724
2 PRESS BOXES

FEE

FEE: $
(Determined by Enforcing Agency)

APPLICANT STATEMENT

Please state the requirements of the subcode from which a variation is sought. (Use separate application forms for each variation request).:

Fire Sprinkler System

How would compliance with said provisions result in practical difficulties? Explain the nature and extent of these Difficulties.:

No Water Available

Please state an alternative to the subcode requirement that will still protect the health, safety and welfare of the occupants.:

Install in Each Press Box Audible, Hard- Wired with Battery Backup
Smoke Detectors - One in Storage Area and One Upstairs in Press Box Area.

DATE: April 19, 1999 SIGNED: Rolf Benninghoven
APPLICANT

DETERMINATION

This application is to be reviewed within 20 business days

I have reviewed the facts and recommended DENIAL ☐ APPROVAL ☑ of the above variation request, in accordance with N.J.A.C. 5:23-2.9 through 2.13, for the following reasons:

Rolf 908-216-0086

Date: 4/20/99

SUBCODE OFFICIAL

CONSTRUCTION OFFICIAL

INSPECTOR: Ken Shafer

DATE: 4/16/99

JOB: Brick High School

SECTION:

TYPE OF WORK: Temp.

WEATHER: Cloudy

LOCATION: CHAMBERS Bridge Rd.

TEMPERATURE: 50°

BLOCK:

LOT:

ENGINEERING RECOMMENDATIONS FOR CERTIFICATE OF OCCUPANCY INSPECTION CHECK LIST

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway		X
2. Grading		X
3. Sidewalk		X
4. Road Pavement		X
5. Landscaping & Sodding		X
6. Clean-up Procedures		X
7. Note on going construction in immediate area		X
8. Safety		X

COMMENTS REFERENCING ITEM NUMBER: See Attached reports & Letters
30 Day Temp. till May 15th

RECOMMENDATIONS:

☒ TEMP. C.O.

☐ FINAL C.O.

☐ DETAILED REINSPECTION

☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED

PLANNING BOARD ENGINEER

MUNICIPAL ENGINEER

I _____, Authorized representative of _____, hereby acknowledge the above deficiencies, and further realize that the Certificate of Occupany will be conditioned upon the acceptable resolution thereof within _____ days of the issuance of Certificate of Occupancy.

COUNTER FORM
PLEASE PRINT

Update 98-4155+C

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: Brick High School Date Rec'd.: 1/12/99
Block: 736 Lot: 1 C22-1 Date Issued:
Owner in Fee: Brick Twp Board of Ed Control #:
Address: 101 Hendrickson Rd. Permit #:
Brick, NJ 08724
State: NJ Zip: 08724 Phone: (732) 785-3000
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature:

Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR: Aldarelli Enterprises
ADDRESS: 1 Pollack Avenue
Ocean, NJ 07712
PHONE: (732) 493-1787
LIC #: N/A
LIC. EXPIRATION DATE: N/A
FEDERAL EMP. # (or S.S. #): 22-2888602

TECHNICAL SITE DATA

DESCRIPTION OF WORK:
4 Concrete block dugouts

TYPE OF WORK
☒ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS
USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories: 1
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors: 896
Volume of Structure: 6272 Total Land Disturbed:
Signature:

Estimated Cost of Building Work:
New Building (1): $ 80,000.00
Alteration (2): $ 0
TOTAL (1+2): $ 80,000.00
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM
PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

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

TOTAL NUMBERS	
Pool Permit w/UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range / Receptacle	KW
KW Oven / Surface Unit	KW
KW Elec. Water Heater	KW
KW Elec. Dryer / Receptacle	KW
KW Dishwasher	KW
HP Garbage Disposal	HP
KW Central A/C Unit	KW
HP/KW Space Heater/Air Handler	HP/KW
KW Baseboard Heat	KW
HP Motors 1/+ HP	HP
KW Transformer/Generator	KW
AMP Service	AMP
AMP Subpanels	AMP
AMP Motor Control Center	AMP
AMP Elec. Sign/Outline Light	KW
Other	
Other	
Other	
Other	

Estimated Cost of Electrical Work: $
Signature (print name):
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE PROTECTION SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

	Capacity:	Fuel:
Flammable Liquip Storage Tanks		
Combustable Liquid Storage Tanks		
L.G.P. Storage Tanks		

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust Systems	
Pre-Engineered Systems	
Co2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance	
Other	
Other:	

Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM
PLEASE PRINT

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: Brick Memorial High School — Date Rec'd.:
Block: Lot: — Date Issued:
Owner in Fee: Brick Twp Board of Ed. — Control #:
Address: 101 Hendrickson Rd. — Permit #:
Brick NJ 08724
State: NJ Zip: 08724 Phone: (732) 785-3000
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR: Aldarelli Enterprises
ADDRESS: 1 Pollack Avenue
Ocean, NJ 07712
PHONE: (732) 493-1787
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #): 22-2888062

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
2	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
2	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
158 Heads	Other

Estimated Cost of Plumbing Work: $51,000.00
Signature:
Owner ☐ Contractor ☒

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR: Aldarelli Enterprises
ADDRESS: 1 Pollack Avenue
Ocean, NJ 07712
PHONE: (732) 493-1787
LIC #:
LIC. EXPIRATION DATE: 22-2888062
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Construction of Press Box as per plans

TYPE OF WORK

☒ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories: 2
Height of Structure: 20'9"
Area - Largest Floor: 27'8" X 15'4"
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature:

Estimated Cost of Building Work: 60,000.00
New Building (1): $ 60,000.00
Aleration (2): $ 0
TOTAL (1+2): $ 60,000.00
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM
PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR: Aldarelli Enterprises
ADDRESS: 1 Pollack Ave
Ocean, NJ 07712
PHONE: (732)493-1787
LIC. #: EXP. DATE:
FEDERAL EMPL. #: (or S.S. #): 22-2888602

TECHNICAL DATA (LIST ALL FIXTURES)

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

NONE will update later

TOTAL NUMBERS		
Pool Permit w/UW Lights		
Storable Pool/Spa/Hot Tub		
KW Elec. Range / Receptacle		KW
KW Oven / Surface Unit		KW
KW Elec. Water Heater		KW
KW Elec. Dryer / Receptacle		KW
KW Dishwasher		KW
HP Garbage Disposal		HP
KW Central A/C Unit		KW
HP/KW Space Heater/Air Handler		HP/KW
KW Baseboard Heat		KW
HP Motors 1/+ HP		HP
KW Transformer/Generator		KW
AMP Service	1	300 AMP
AMP Subpanels	2	150 AMP
AMP Motor Control Center		AMP
AMP Elec. Sign/Outline Light		KW
Other		
Other		
Other		
Other		

Estimated Cost of Electrical Work: $ 6,212.00
Signature (print name): Chris Aldarelli
Owner ☐ Contractor ☑

Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE PROTECTION SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervsion
Proprietary Supervision

Flammable Liquip Storage Tanks Capacity: Fuel:
Combustable Liquid Storage Tanks Capacity: Fuel:
L.G.P. Storage Tanks Capacity: Fuel:

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	

Strand Pipes
Kitchen Hood Exhaust Systems

Pre-Engineered Systems
Co2 Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas or Oil Fired Appliance
Other
Other
Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

PLEASE PRINT

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: 2001 Hares Mill Rd Date Rec'd.: 12/16/98
Block: 121 Lot: 2 Date Issued:
Owner in Fee: Brick Bd of Ed. Control #:
Address: 101 Hendrickson Rd Brick N.J. 08724 Permit #:
State: Zip: Phone: ( ) 785-3000
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature:

Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA

DESCRIPTION OF WORK:

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories:
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature:

Estimated Cost of Building Work:
New Building (1): $
Alteration (2): $
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM
PLEASE PRINT

X

ELECTRICAL SUBCODE

CONTRACTOR: Gordon State Elect
ADDRESS: 208 E Main St
Manasquan N.J.
PHONE: 732-223-8600
LIC.#: 6720 EXP. DATE:
FEDERAL EMPL.#: (or S.S.#): 222937324

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Fract. HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		
TOTAL NUMBERS		
Pool Permit w/UW Lights		
Storable Pool/Spa/Hot Tub		
KW Elec. Range / Receptacle	KW	
KW Oven / Surface Unit	KW	
KW Elec. Water Heater	KW	
KW Elec. Dryer / Receptacle	KW	
KW Dishwasher	KW	
HP Garbage Disposal	HP	
KW Central A/C Unit	KW	
HP/KW Space Heater/Air Handler	HP/KW	
KW Baseboard Heat	KW	
HP Motors 1/+ HP	HP	
KW Transformer/Generator	KW	
AMP Service	AMP	
AMP Subpanels	AMP	
AMP Motor Control Center	AMP	
AMP Elec. Sign/Outline Light	KW	
Other		
Other		
Other		
Other		

Estimated Cost of Electrical Work: $
Signature (print name): Richard Gordon
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE PROTECTION SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC.#: EXP. DATE:
FEDERAL EMPL.# (or S.S.#):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquip Storage Tanks Capacity: Fuel:
Combustable Liquid Storage Tanks Capacity: Fuel:
L.G.P. Storage Tanks Capacity: Fuel:

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust Systems	
Pre-Engineered Systems	
Co2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance	
Other	
Other	

Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐

PLEASE PRINT

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: Brick Memorial HS Date Rec'd.: 12/29/98
Block: 12.11 Lot: 2 Date Issued:
Owner in Fee: Brick Township Control #:
Address: Permit #:

State: NJ Zip: 08724 Phone: ( )
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR: Russell P. Cogel Plbg
ADDRESS: 107 Greenwood Pl
Neptune, N.J.
PHONE: 988-0856
LIC.#: 7994
LIC. EXPIRATION DATE: 2000
FEDERAL EMP. # (or S.S. #): 22-2922030

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
2	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature: See Below
Owner ☐ Contractor ☒
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:
Russell Cogel

BUILDING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC.#:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA

DESCRIPTION OF WORK:

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories:
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature:

Estimated Cost of Building Work:
New Building (1): $
Alteration (2): $
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM
PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Fract. HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		
TOTAL NUMBERS		
Pool Permit w/UW Lights		
Storable Pool/Spa/Hot Tub		
KW Elec. Range / Receptacle	KW	
KW Oven / Surface Unit	KW	
KW Elec. Water Heater	KW	
KW Elec. Dryer / Receptacle	KW	
KW Dishwasher	KW	
HP Garbage Disposal	HP	
KW Central A/C Unit	KW	
HP/KW Space Heater/Air Handler	HP/KW	
KW Baseboard Heat	KW	
HP Motors 1/+ HP	HP	
KW Transformer/Generator	KW	
AMP Service	AMP	
AMP Subpanels	AMP	
AMP Motor Control Center	AMP	
AMP Elec. Sign/Outline Light	KW	
Other		
Other		
Other		
Other		

Estimated Cost of Electrical Work: $
Signature (print name):
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE PROTECTION SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervsion
Proprietary Supervision

Flammable Liquip Storage Tanks Capacity: Fuel:
Combustable Liquid Storage Tanks Capacity: Fuel:
L.G.P. Storage Tanks Capacity: Fuel:

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust Systems	
Pre-Engineered Systems	
Co2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance	
Other	
Other	

Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐

COUNTER FORM
PLEASE PRINT

Update 98.4154+C

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: Brick Memorial High School Date Rec'd: 1/21/99
Block: 1211 Lot: 2 C-22-2 Date Issued:
Owner in Fee: Brick Twp Board of Ed Control #:
Address: 101 Hendrickson Rd. Permit #:
Brick, NJ 08724
State: NJ Zip: 08724 Phone: (732) 785-3000
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC.#:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature:

Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR: Aldarelli Enterprises
ADDRESS: 1 Pollack Avenue
Ocean, NJ 07712
PHONE: (732)
LIC.#: N/A
LIC. EXPIRATION DATE: N/A
FEDERAL EMP. # (or S.S. #): 22-2888662

TECHNICAL SITE DATA

DESCRIPTION OF WORK:
4 Concrete block dugouts

TYPE OF WORK
☒ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS
USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories: 1
Height of Structure: 6' 8"
Area - Largest Floor: 32' X 7' 896
New Building Area / All Floors: 6272
Volume of Structure: Total Land Disturbed:
Signature:

Estimated Cost of Building Work:
New Building (1): $ 80,000.00
Alteration (2): $ 0
TOTAL (1+2): $ 80,000.00
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM
PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

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

TOTAL NUMBERS	
Pool Permit w/UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range / Receptacle	KW
KW Oven / Surface Unit	KW
KW Elec. Water Heater	KW
KW Elec. Dryer / Receptacle	KW
KW Dishwasher	KW
HP Garbage Disposal	HP
KW Central A/C Unit	KW
HP/KW Space Heater/Air Handler	HP/KW
KW Baseboard Heat	KW
HP Motors 1/+ HP	HP
KW Transformer/Generator	KW
AMP Service	AMP
AMP Subpanels	AMP
AMP Motor Control Center	AMP
AMP Elec. Sign/Outline Light	KW
Other	
Other	
Other	
Other	

Estimated Cost of Electrical Work: $
Signature (print name):
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE PROTECTION SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervsion
Proprietary Supervision

	Capacity:	Fuel:
Flammable Liquip Storage Tanks		
Combustable Liquid Storage Tanks		
L.G.P. Storage Tanks		

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	

Stand Pipes
Kitchen Hood Exhaust Systems

Pre-Engineered Systems
Co2 Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas or Oil Fired Appliance
Other
Other:
Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date: