

BLOCK 1421 LOT 2282 ADDRESS (SITE) LANES-MILL RD. BRICK PERMIT NO. 2563-97

RECEIVED

15 1997



CONSTRUCTION PERMIT APPLICATION

Applicable Ordinances: Sections I, II, III (optional), IV, VI and VII

I. IDENTIFICATION

1. Proposed Work-site at: HERBERTSVILLE ELEMENTARY SCHOOL
Name of Owner in Fee: BRICK BOARD FED. Tel. (908) 785 3005
Address 101 HENDRICKSON BLVD. BRICK N.J. 08740
street municipality zip code
3. Ownership in Fee: Public ☒ Private ☐
Principal Contractor: Space Master Buildings Tel. (908) 862-1010
Address 1701 Lower Road Linden N.J. 07036
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Federal Emp. No. 94-165-4805 Social Security No. _____
5. Architect or Engineer YEZZI ASSOCIATES Tel. (908) 2403433
Address 18 WASHINGTON STREET, TOMS RIVER N.J.
6. Responsible Person in Charge of Work DR. P. NICASTRO - BRICK BOE Tel. (908) 785 3005

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee			
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other <u>2 PAFFP</u>	\$ <u>30</u>		
13. TOTAL	\$		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories ONE
2. Height of Structure 14'-0" ADDITION ft.
3. Area—Largest Floor 13,353 EXIST sq. ft.
4. New Building Area 5,905 sq. ft.
5. Volume of New Structure 64,995 cu. ft.
6. Construction Classification 2C
7. Total Land Area Disturbed 5,905 sq. ft.
8. Flood Hazard Zone N/A
9. Base Flood Elevation N/A ft.
10. Wetlands yes ☐ no ☒ sq. ft.
11. Max. Live Load 100 # S.F.
12. Max. Occupancy Load 105 PERSONS

(office use only)

II. PROPOSED WORK

1. ☐ Minor work (single trade)
2. ☐ Small Job (\$5,000 and no prior approvals)
3. ☐ New Building
4. ☒ Addition
5. ☐ Alteration
6. ☒ Fire Protection
7. ☐ Plumbing
8. ☐ Electrical
9. ☐ Elevator Devices
10. ☐ Asbestos Abatement
11. ☐ Demolition

Est. Cost

950.00

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>WSP</u>	<u>7/15/97</u>		<u>8-4-97</u>	<u>FM</u>	<u>11/24/97</u>		<u>TEO</u>
			<u>8-6-97</u>	<u>FM</u>	<u>11/24/97</u>		<u>TEO</u>
			<u>11/20/97</u>	<u>FM</u>	<u>11/20/97</u>		<u>OK</u>
	<u>7/29/97</u>		<u>7/29/97</u>	<u>FM</u>			

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. ☐ Refrigeration Systems
4. ☐ Cross-Connections/Backflow Preventers
5. ☒ Sprinklers LIMITED
6. ☐ Smoke Control Systems in Open Wells
7. ☐ 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: ELEM. SCHOOL
2. Use Group: E
3. Change in Use Group, Indicate Former: _____

LDS BR 10317638

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 New Jersey 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 MASSIMO F. YERZZI JR - T/A - YERZZI ASSOCIATES - ARCHITECT

Address 18 WASHINGTON STREET

TOMS RIVER N.J. 08753

Telephone (908) 240 3433 - FAX 908-240 3463

Signature *Massimo F. Yerzzi Jr* Date 7-11-97

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL	
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date
☒ Planning Board								
☐ Zoning Board								
☐ Sewer Authority								
☐ Water Authority								
☐ Fire Department								
☐ Police Department								
☐ Health Department								
☐ Soil Conservation								
☐ N.J. Dept. of Community Affairs								
☐ N.J. Department of Transportation								
☐ N.J. Dept. of Environmental Protect.								
☐ Utility Dig No.								
☒ Other <i>DBC</i>								
☒ <i>STATE D.O.E.</i>								
☐								

COMMENTS

IMPORTANT
A.H.B.T. - EXEMPT

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

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

X. CERTIFICATES ISSUED (office use only)

- ☒ Temporary Certificate of Occupancy
☒ Temporary Certificate of Occupancy
☐ Continued Certificate of Occupancy
☒ Certificate of Occupancy
☐ Certificate of Approval

DATE EXPIRED

No. 2563 11/25/97 12/9/97
 No. _____ _____ _____
 No. 2563 10/20/99
 No. _____ _____



CERTIFICATE

Date Issued 11-25-97
Control #
Permit # 2563-97

IDENTIFICATION

Block 1421 Lot 14
Work Site Location 2282 James Mill Rd.
Owner in Fee Brick Twp. Board of Education
Address 101 Hendrickson Blvd.
Brick, NJ
Tele. ()
Contractor Space Master Buildings
Address 1701 Lower Rd.
Linden, NJ 07036
Tele. ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

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

Four classroom addition to Herbertsville
Elementary School

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 APPROVAL

☐ 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 December 9, 19 97, or the owner will be subject to a fine or order to vacate:

Pending compliance with Building and Fire.

Fee 12/31/97

Sold 5/1/98

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

CONSTRUCTION OFFICIAL

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 10/20/99
Control #
Permit # 97-2563

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 1421 Lot 14 Qual
Work Site Location 2282 LANES MILL RD
ADDITION TO HERB. SCHOOL
Owner In Fee/Occupant BRICK RD OF EDUCATION
Address 101 HENDRICKSON AVE.
BRICK, NJ 08723-
Telephone (908) 785-3005
Contractor
Address
Telephone () Fax ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.

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

[X] CERTIFICATE OF OCCUPANCY

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

[] CERTIFICATE OF 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

[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.

[] 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/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 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 , .

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

[Signature]

Fee \$ 0
Paid [] Check No. 1
Collected by:



CONSTRUCTION PERMIT

Date issued

Control #

Permit #

8/26/97
2563-97

IDENTIFICATION Block 1421 Lot 14
Work Site Location 2252 Forest Hill Rd Contractor Space Masters Buildings
Herbertsville Elem. SC RA# Address 1721 Leman Rd
Owner in Fee Brick Board of C Linden NJ 07030
Address 121 Henderson Ave Tele. () 7
Tele. () Brick NJ Lic. No. or Bldrs. Reg. No. 94 165 Exp. Date 4805
Federal Emp. No. 4805
or Social Security No. _____

Is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER
☐ ELECTRICAL ☒ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Addition to Herbertsville Elem
School Along & fellow

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 \$ 950,000

[Signature]
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	_____
Plumbing	_____
Electrical	_____
Fire Protection	_____
Other	_____
Other	_____
DCA Training Fee	_____
Cert. of Occ.	_____
Other	_____
Total	_____
Check No.	_____
Cash	_____
Collected By:	_____

U.C.C. Form F-170C



PERMIT UPDATE

Date, Update Issued

Control #

Permit #

Date Permit Issued 2563-97

9-10-47.

IDENTIFICATION Block 1421 Lot 24Work Site Location 2285 Lanes Mills Rd
Herbertsville Elementary SchoolOwner in Fee Board of EducationAddress 101 Henderson Rd - Brick

Tele. ()

Contractor Speer Boston BuildingsAddress 1701 Lower RdLinden N.J.Tele. (908) 862-1010

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 94-165-4805

or Social Security No.

is hereby granted permission to perform the following work:

- ☐ BUILDING ☒ PLUMBING ☐ OTHER _____
☐ ELECTRICAL ☐ FIRE PROTECTION
☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

RELocate Sewer Conn.Estimated Cost of Work \$ 500 -J. Garrahy/MS
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building	
Electrical	
Plumbing	<u>15</u>
Fire Protection	
Elevator Devices	
Other	
DCA Training Fee	
Cert. of Occ.	
Other	
Total	
Check No.	
Cash	
Collected By:	<u>White</u>



PERMIT UPDATE

Date Update Issued

Control #

Permit #

Date Permit Issued

11/24/97

2563-97

IDENTIFICATION Block

1421

Lot

14

Work Site Location

Hackettsville Elem Sch

Contractor

Lynbrook C South Inc

2282 Lanes Mill Rd

Address

235 Penn St

Owner in Fee

Brick Bldg of Ed

Address

101 Hendrickson St

Tele. (908)

920 6611

Lic. No. or Bldrs. Reg. No.

55414

Federal Emp. No.

222209 325

or Social Security No.

is hereby granted permission to perform the following work:

☐ BUILDING☐ PLUMBING☐ OTHER☐ ELECTRICAL☒ FIRE PROTECTION☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

UPDATE FIRE ALARMS

Estimated Cost of Work

\$ 4000 -

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building

Electrical

Plumbing

Fire Protection

Elevator Devices

Other

DCA Training Fee

Cert. of Occ.

Other

Total

Check No.

Cash

Collected By:

DUPLICATE



Date Issued
Control #
Permit #

1111
2563-97

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

Block 142 Lot 24
Work Site Location HERBERTS WALK ELEMENTARY SCHOOL
Owner in Fee LAVERNE WILLARD, JR. BRICK NJ
Address BRICK BOARD OF EDUCATION
Address 101 HENDERICKSON BLVD.
Address BRICK NJ - 08605-3005
Tel. (908) 785-3005
Contractor Space Master Buildings
Address 1701 Lower Rock
Address Kinden, NJ
Tel. (908) 862-1010
Lic. No. or Bldgs. Reg. No. _____
Federal Emp. No. 84-165-4805 or Social Security No. _____

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 [Signature] - ARCHITECT
908-2403433

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
4 CLASSROOM ADDITION -
SEE PLANS BY ARCHITECT
SITE PERM BY CIVIL ENGR.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Type	Dates (Month/Day)	Failure	Approval	Initial
☒ No Plans Req.	<u>8-4-97</u>	<u>EW</u>	☒ Footing	<u>Foundation</u>	<u>8-18-97</u>	<u>Failure</u>	<u>9/24/97</u>	<u>[Signature]</u>
☐ All			☐ Foundation	<u>Slab</u>	<u>9/24/97</u>	<u>Failure</u>	<u>10/24/97</u>	<u>[Signature]</u>
☐ Footing			☐ Frame					
☐ Foundation			☐ Insulation					
☐ Frame			☐ Finishes					
☐ Other			☐ Energy					
Joint Plan Review Required:			☐ Elec. [] Plumb. [] Fire					
SUBCODE APPROVAL			☐ CO [] CCO [] CA					
Date:			☐ Mechanical					
			☐ Other					
Approved By:			<u>TCG</u>					
			<u>Other</u>					
			<u>ASBONE CIELING</u>					
			<u>Final</u>					

B. BUILDING CHARACTERISTICS

Use Group Present E Proposed E
Const. Class Present 3B Proposed 2C
No. of Stories ONE
Height of Structure 14'-0" Ft.
Area - Largest Floor 13,353 Sq. Ft.
New Bldg. Area/All Floors 2,905 Sq. Ft.
Volume of New Structure 14,955 Cu. Ft.
Total Land Area Disturbed 5,105 Sq. Ft.

Est. Cost of Bldg. Work: 950,000
1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ 950,000

(Office Use Only)

TYPE OF WORK:	(Office Use Only)
☐ New Building	\$ _____
☒ Addition	\$ _____
☐ Alteration	\$ _____
☐ Roofing	\$ _____
☐ Siding	\$ _____
☐ Fence	\$ _____
☐ Sign	\$ _____
☐ Pool	\$ _____
☐ Asbestos Abatement	\$ _____
☐ Other	\$ _____
☐ Other	\$ _____
☐ Demolition	\$ _____

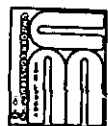
Height (6' or over) _____ Sq. Ft. _____

Paid [] Check # _____
Collected by: _____
DCA TRAINING FEE \$ _____
TOTAL FEE \$ _____

Administrative Surcharge \$ _____
Minimum Fee \$ _____

9/26/97 cells in block pilled solid

11/24/97 - OK for temp. work completed but not
cleaned up & ~~the~~ trailer still on site.



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

11/24/97
Update 2563-97

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source

Method of Valve Supervision

Local Alarm Supervision

Central Supervision

Proprietary Supervision

Flammable Liquid Storage Tanks

Combustible Liquid Storage Tanks

L.P.G. Storage Tanks

L.N.G. Storage Tanks

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

UPDATE

FIRE ALARMS

() Capacity _____ Fuel _____
() Capacity _____ Fuel _____
() Capacity _____ Fuel _____

FEE (Office Use Only)

45

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

Block 1421 Lot 14

Work Site Location Herbertville Elem School

Owner in Fee Price 130 of ED

Address 101 Handerson Ave

City Price MS

State MS

Contractor Robert C. Smith Inc

Address 235 Penn. St

City Price MS

State MS

Zip 38703

Telephone (732) 5414

Federal Emp. No. 222 208 325 or Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group E Present _____ Proposed _____

Constr. Class. E Present _____ Proposed _____

Heating Systems [] New [] Existing

Type: [] Gas [] Oil [] Electrical [] Solar

[] Other

Location: _____

Total Est. Cost of Fire Prot. Work \$ 4000 [] Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW: [] No Plans Required

INSPECTIONS: _____

Suppression Test _____

Fire Alarm Test _____

Smoke Test _____

Mechanical _____

TCO _____

Other _____

Other _____

Other _____

Other _____

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.

William Smith

SIGNATURE

Administrative Surcharge \$ _____

Minimum Fee \$ _____

DCA Training Fee \$ _____

TOTAL FEE \$ No fee

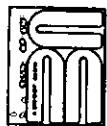
Contractor indicates only door
closure left on list until

12/12/97 Spack records

most outstanding items

tests of

CD



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received 8/26/97
Date Issued
Control #
Permit # 2563-97

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 3-800-272-1000.

Block 1421 Lot 24
Work Site Location HERBERTS VILL ELEMENTARY SCHOOL
Owner in Fee BRICK BOARD OF EDUCATION
Address 101 HENDRICKSON RD. 240-3433
Tele. 908. 785-3005
Contractor Space Master Building Bill LeBek
Address 1301 Lawrence Road 920-6611
Tele. 908. 862-1010
L.C. No. SPRUE 836-0556
Federal Emp. No. 94-165-4805 or Social Security No. FRATLIN

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present E Proposed E
Const. Class. Present 3B Proposed 2C - ADDITION
Heating System ☒ New ☐ Existing
Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar
Location: NO NEW ADDITION - EQUIPMENT
Total Est. Cost of Fire Prot. Work \$ 4,500 - 1 Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW: ☐ No Plans Required
Joint Plan Review Required: ☐ Bldg. ☐ Plumb.
☐ Elec. ☐ Elevator
☒ Fire Plans Approved
Date: 8-26-97
Approved by: [Signature]
SUBCODE APPROVAL: CCO
Date: 12/31/97
Approved by: [Signature]

INSPECTIONS: Type: Failure Failure Approval Initial

Type	Failure	Failure	Approval	Initial
Suppression Test	11-13-97	11-13-97	11-24-97	11-24-97
Fire Alarm Test				
Smoke Test				
Mechanical Flow	11-13-97	11-13-97	11-24-97	11-24-97
TCO				
Other	11-13-97	11-13-97	11-24-97	11-24-97
Other	11-13-97	11-13-97	11-24-97	11-24-97
Other	11-13-97	11-13-97	11-24-97	11-24-97

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] 7/11/97
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work ADDITION + 5%
Water Supply Source CITY
Method of Valve Supervision SEE FEELS - LIMITED
Local Alarm Supervision SEE FEELS - LIMITED
Central Supervision N/A
Proprietary Supervision N/A

Flammable Liquid Storage Tanks	Number	Fuel
Combustible Liquid Storage Tanks	2	N/A
L.P.G. Storage Tanks	2	N/A
L.N.G. Storage Tanks	2	N/A

Wet Sprinkler Heads	Number	Fuel
Dry Sprinkler Heads	2	N/A
TOTAL	2	N/A

Smoke Detectors	Number	Fuel
Heat Detectors	17	N/A
TOTAL	17	N/A

Stand Pipes	Number	Fuel
Kitchen Hood Exhaust Systems	1	N/A

Pre-Engineered Systems	Number	Fuel
CO ₂ Suppression	1	N/A
Halon Suppression	1	N/A
Foam Suppression	1	N/A
Dry Chemical	1	N/A
Wet Chemical	1	N/A

Gas or Oil Fired Appliance	Number	Fuel
OTHER	3	N/A

Paid ☐ Check #	Administrative Surcharge	Minimum Fee	DCA Training Fee	TOTAL FEE
				185

FEE (Office Use Only)

U.C.C. Form F-140B

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

JOHN H 609 441-3079 609-633-0800 Andy
 TESTED NEW SMOKE DETECTORS AND AP
 TESTED NEW MANU PUL ALARMS AND RD
 AUDIO VISUAL ALARM - FALC
 VI STROKE SOUTH HA

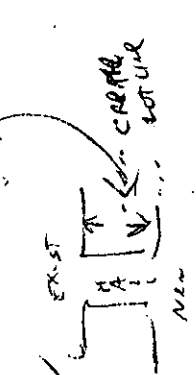
11-13-97 VISUAL CCO ADDITIONAL 5% E USE - FALC

- ✓ ① STROKE - SOUTH HALL NOT WORKING
- ✓ ② DOOR CLOSURES NOT ON - N/A NOT WORKING
- ✗ ③ WIRE GLASS NOT IN DOORS
- ✓ ④ EXIST STOR RM. NOT SPRINKLED NO LAMP DOWN
- 11-19 ✓ ⑤ SPRINKLER HEADS NOT IN N/A
- 11-24 ✗ ⑥ FIRM ALARM NOT STANDING UP
- 11-19 ✓ ⑦ TAMPER ALARM NOT STANDING UP
- 11-19 ✓ ⑧ CHECK HALL DOOR TOP - FOR GLASS
- 11-19 ✓ ⑨ NEED 3 FIRE LOCATIONS & CHECK FOR I MACHINES
- 11-19 ✓ ⑩ VISUAL CCO 100 75% F - CANCEL - NOT
- 11-19 ✓ ⑪ RE TEST AUDIO VISUAL ALARM - FALC
- 11-19 ✓ ⑫ VISUAL CCO 100 75% FUSE - FALC
- 11-19 ✓ ⑬ TAMPER ALARM ON SPRINKLER TESTED AND RD
- 11-24 ✓ ⑭ CANCEL INSD
- 11-24 ✓ ⑮ FIRE SPRINKLER ALARM TESTED AND RD
- 11-24 ✓ ⑯ VISUAL CCO 100 75% FUSE - 120% ALARM
- 11-24 ✓ ⑰ LETTER AND PLANS RES IF ADDITION OR SEPARATE BLDG

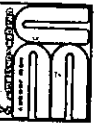
11-17-97 VISUAL CCO 100 75% F - CANCEL - NOT
 11-19-97 RE TEST AUDIO VISUAL ALARM - FALC
 11-19-97 FIRM TEST ON SPRINKLER - FALC
 11-19-97 VISUAL CCO 100 75% FUSE - FALC
 11-19-97 TAMPER ALARM ON SPRINKLER TESTED AND RD
 11-24-97 CANCEL INSD
 11-24-97 FIRE SPRINKLER ALARM TESTED AND RD
 11-24-97 VISUAL CCO 100 75% FUSE - 120% ALARM
 11-24-97 LETTER AND PLANS RES IF ADDITION OR SEPARATE BLDG

12/12/97 Locked at bldg posted
 checked door closer

3 Submit Cent
 of Compliance
 for Fire Alarm.



1276-



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

11/24/97
Update 256397

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

Block 1421 Lot 1
Work Site Location Hebedville Elm School
2382 Lanes Mill Rd
Owner in Fee Perick 3d of ED
Address 101 Hebedville Ave
Brick NY
Tele. (712) 322-6611
Lic. No. 5414
Federal Emp. No. 221 205 321 or Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Module Add.

Use Group _____ Present _____ Proposed _____
Constr. Class. _____ Present _____ Proposed _____
Heating Systems [] New [] Existing
Type: [] Gas [] Oil [] Electrical [] Solar
[] Other _____
Location: _____

Total Est. Cost of Fire Prot. Work \$ 4000- [] Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)	Initial
[] No Plans Required	Type:	Failure	Failure
Joint Plan Review Required:	Suppression Test		
[] Bldg. [] Plumb.	Fire Alarm Test		
[] Elec. [] Elevator	Smoke Test		
[] Fire Plans Approved	Mechanical		
Date: <u>4-10-97</u>	TCO		
Approved by: _____	Other		
SUBCODE APPROVAL:	Other		
[] CO [] CCO [] CA	Other		
Date: _____	Other		
Approved by: _____			

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]
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

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

Flammable Liquid Storage Tanks
Combustible Liquid Storage Tanks
L.P.G. Storage Tanks
L.N.G. Storage Tanks

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 _____

UPDATE

FIRE ALARMS

Number	Fuel
() Capacity	Fuel
() Capacity	Fuel
() Capacity	Fuel
() Capacity	Fuel

FEE (Office Use Only)

45

[Signature]

Paid [] Check # _____
DCA Training Fee \$ _____
TOTAL FEE \$ 45



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

9-10-41
2563-97

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

Block 142 Lot 24
Work Site Location 2283 Kansas Mills Rd
Herbertsville Elementary School
Owner in Fee Board of Education
Address Beck New Storey 101 Henderson Rd
Tele. (562) 262-1010
Contractor Contractor Herbertsville Space Heater Buildings
Address 1701 Keweenaw Road
Kindler AD
Tele. ()
Lic. No. 94-165-4825 or Social Security No.
Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Estimated Cost of Plumbing Work \$

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS			
Type:		Failure	Failure	Approval	Initial
☒ No Plans Required	Slab				
☐ Joint Plan Review Required:	Rough				
☐ Bldg. [] Elec.	Water				
☐ Fire [] Elevator	Sewer				
☐ Plumb. Plans Approved	Fixtures				
Date: <u>9-10-97</u>	Gas Equipment				
Approved by: <u>[Signature]</u>	Gas Piping				
SUBCODE APPROVAL:	Solar				
☐ CO ☐ CCO ☐ CA	TCO				
Approved By: <u></u>					
Date: <u></u>					

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.
Signature—Contractor Seal [Signature]
[] Licensed Plumbing Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C	
	or Refrigeration Unit	
	Sewer Connection <u>Relocate</u>	<u>15</u>
	Water Service Connection	
	Active Solar System	
	Other	

Paid [] Check # <u></u>	Administrative Surcharge \$ <u></u>
	Minimum Fee \$ <u>15</u>
	DCA Training Fee \$ <u></u>
Collected by: <u></u>	TOTAL \$ <u></u>

Joe or Mark
Trailer 836-0556



Date Received 9/15/97
Date Issued
Control #
Permit # 2563-97

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING.

CONTRACTORS. NOTIFY THIS OFFICE. CALL UTILITY DIG. NO. 1-800-272-1000.

Block 142 Lot 14
Work Site Location HANOVERVILLE ELEM. SCHOOL -
LAUREL MILL RD., BRICK N.J.
Owner in Fee BRICK BOARDS OF CO,
101 HANOVERVILLE BLVD.
Address BRICK N.J.
Tele. 908 785-3005

Contractor TOLON & P
48 W. TOLON AVE
Address TEANECK, N.J. 07666
Tele. 201 652-1216

Lic. No. B1704
Federal Emp. No. 22-201201 or Social Security No.

B. PLUMBING CHARACTERISTICS

Use Group Present 4 Proposed E
Building Sewer Size 4 Public Sewer Private Septic
Water Service Size 2 Public Water Private Well
Estimated Cost of Plumbing Work \$ 67,500 -

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)	Initial
☐ No Plans Required	Type:	Failure	Failure
Joint Plan Review Required:	Slab		
☐ Bldg. ☐ Elec.	Rough		
☐ Fire ☐ Elevator	Water		
☐ Plumb. Plans Approved	Sewer	10-20-97	DA
Date: 10-15-97	Fixtures	11-14-97	DA
Approved by: [Signature]	Gas Equipment	11-14-97	DA
	Gas Piping	10-15-97	DA
	Solar		
SUBCODE APPROVAL:	TCO		
☐ CO ☐ CCO ☒ CA	Smoke Test	11-15-97	DA
Approved By: [Signature]			
Date: 11-15-97			

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.

[Signature] Architect Seal
908-240 3433

D. TECHNICAL SITE DATA (List all fixtures.)

FIXTURE/EQUIPMENT	FEE (Office Use Only)
Water Closet	
Urinal/Bidet	
Bath Tub	
Lavatory	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bibb	
Water Heater	
Fuel Oil Piping	
Gas Piping	
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Water Cooled A/C	
or Refrigeration Unit	
Sewer Connection	
Water Service Connection	
Active Solar System	
Other	

Paid ☐ Check # Minimum Fee \$
DCA Training Fee \$
Collected by: TOTAL \$

10-28-97 - sewer OK to MAIN entrance
extended to new building that is phase II

11-18-97 - ① no hot water
② chimney on boiler not connected

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: July 25, 1997 1997 - 2116

Block 1421 Lot 14 Zone R-20

Property Address: 2282 Lanes Mill Road

Owner: Brick Township Board of Education (Phone): (732) 785-3005

Applicant: Massimo Yezzi (Phone): (732) 240-3433

Mailing Address: 18 Washington Street, Toms River, N.J. 08753

Existing Use: Herbertsville Elementary School

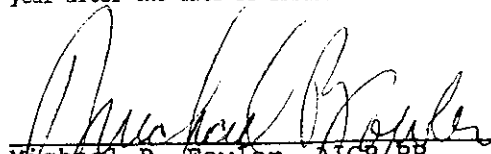
Proposed Use: Herbertsville Elementary School

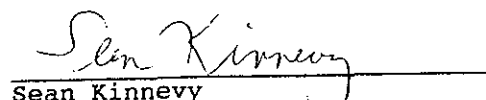
Proposed Construction (if any): One-story addition for a multi-purpose room
and a four-classroom addition; 14' high;
5,905 square feet.

Conditions: Resolution approved by Planning Board March 26, 1997.
Resolution No. R-44-97.

Please note that a Construction Permit, as well as a Zoning Permit, must be obtained prior to any construction. You will be notified by the Division of Inspections to pick up and pay for your entire Construction Permit.

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



State of New Jersey

DEPARTMENT OF EDUCATION
CN 500
TRENTON NJ 08625-0500

CHRISTINE TODD WHITMAN
Governor

July 1, 1997

LEO KLAGHOLZ
Commissioner

Mr. Massimo Yezzi
Yezzi Associates
18 Washington Street
Toms River, NJ 08753

RE: **Brick Township School District**
Herbertsville Elementary School
Ocean County
FINAL EDUCATIONAL APPROVAL

SP#97323

Dear Mr. Yezzi:

Final Educational Approval are given for the above project. Per your Affidavit of June 16, 1997, there are no changes to the educational program as previously submitted.

Per your request, the enclosed "Release Form for School Construction Plans" is also approved.

Sincerely,


THOMAS MISERENDINO
Educational Facilities Planning Services

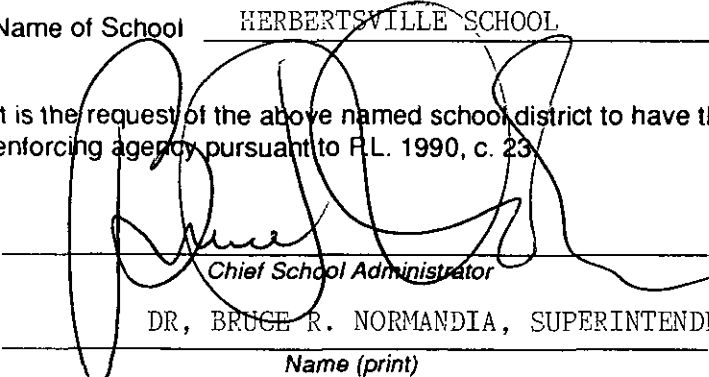
c: Superintendent
Business Administrator
Board President
Ocean County Superintendent

7

NEW JERSEY STATE DEPARTMENT OF EDUCATION
Bureau of Facility Planning Services
Release Form for School Construction Plans

State Plan No. SP#97323 Municipality: BRICK TOWNSHIP
County OCEAN
School District BRICK TOWNSHIP BOARD OF EDUCATION
Name of School HERBERTSVILLE SCHOOL

It is the request of the above named school district to have this project reviewed for U.C.C. compliance by a municipal code enforcing agency pursuant to P.L. 1990, c. 23

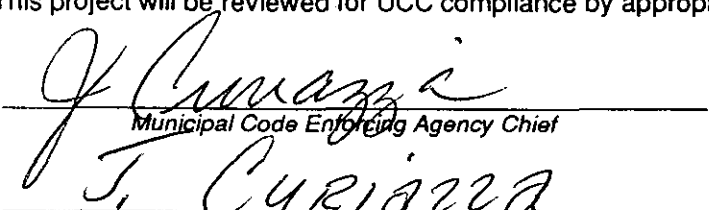


Chief School Administrator
DR, BRUCE R. NORMANDIA, SUPERINTENDENT

Name (print)

6/8/97

Date

This project will be reviewed for UCC compliance by appropriately licensed code officials employed by Brick
(Municipality)


Municipal Code Enforcing Agency Chief
J. Curiaza

Name (print)

6/9/97

Date

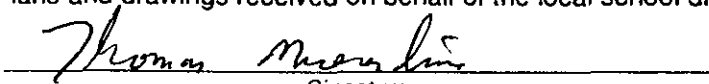
Below this line to be completed by the Bureau of Facility Planning Services.

This plan has been approved for
conformance with N.J.A.C. 6:22

~~Director, Bureau of~~ Facility Planning Services

Date

Plans and drawings received on behalf of the local school district by:



Signature

THOMAS MISERENDINO

Name (print)

EDUCATIONAL SPECIALIST

Title

6/30/97

Date

YEZZI ASSOCIATES
Architects & Planners

P.O. Box 1638
TOMS RIVER, NJ 08754

TEL: (908) 240-3433

FAX: (908) 240-3463

1-800-376-3433

LETTER OF TRANSMITTAL

TO MR. JOSEPH CURIAZZA
BUILDING INSPECTOR
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE ROAD
BRICK, NEW JERSEY 08723

JOB NUMBER
YC97116

DATE
7/10/97

ATTENTION
STATE PLAN #97323

RE:
HERBERTSVILLE SCHOOL ADDITION
LOT 24, BLOCK 1421
2282 LANES MILL ROAD

WE ARE SENDING YOU ☒ Attached ☐ Under separate cover via the following items.

☐ Shop Drawings ☐ Prints ☒ Plans ☒ Specifications ☐ Samples
☒ Copy of Letter ☐ Change Order ☒ Other:

COPIES	DATE	NUMBER	DESCRIPTION
3	6/30/97		NJ DEPARTMENT OF EDUCATION BUREAU OF FACILITY PLANNING SERVICES RELEASE FORM FOR SCHOOL CONSTRUCTION PLANS NJ DEPT. OF EDUCATION LETTER RE EDUCATIONAL APPROVAL COMPLETE SETS OF CONSTRUCTION DRAWINGS - SIGNED AND SEALED COMPLETE SETS OF SPECIFICATIONS - SIGNED AND SEALED
1	7/1/97		
3			
2			

THESE ARE TRANSMITTED as checked below:

☒ For approval ☐ Approved as submitted ☐ Resubmit ☐ Copies for approval
☐ For your use ☐ Approved as noted ☐ Submit ☐ Copies for distribution
☐ As requested ☐ Returned for corrections ☐ Returned ☐ Corrected prints
☐ For review and comment ☐ Other
☐ FOR BIDS DUE/DATE: ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS

PLEASE REVIEW FOR BUILDING PERMITS AS SOON AS POSSIBLE. THANK YOU.

HAND DELIVERED: DATE: _____ TIME: _____

RECEIVED BY: _____

COPY TO DR. P. NICASTRO

SIGNED _____ M. F. YEZZI, JR.

If enclosures are not as noted, please notify us at once.

YEZZI ASSOCIATES
Architects & Planners

P.O. Box 1638
TOMS RIVER, NJ 08754
TEL: (908) 240-3433
FAX: (908) 240-3463
1-800-376-3433

LETTER OF TRANSMITTAL

TO MR. JOSEPH CURIAZZA
BUILDING INSPECTOR
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE ROAD
BRICK, NEW JERSEY 08723

JOB NUMBER
YC97116

DATE
7/10/97

ATTENTION
STATE PLAN #97323

RE: HERBERTSVILLE SCHOOL ADDITION
LOT 24, BLOCK 1421
2282 LANES MILL ROAD

WE ARE SENDING YOU ☒ Attached ☐ Under separate cover via the following items.

☐ Shop Drawings ☐ Prints ☒ Plans ☒ Specifications ☐ Samples
☒ Copy of Letter ☐ Change Order ☒ Other:

COPIES	DATE	NUMBER	DESCRIPTION
3	6/30/97		NJ DEPARTMENT OF EDUCATION BUREAU OF FACILITY PLANNING SERVICES RELEASE FORM FOR SCHOOL CONSTRUCTION PLANS NJ DEPT. OF EDUCATION LETTER RE EDUCATIONAL APPROVAL
1	7/1/97		
3			COMPLETE SETS OF CONSTRUCTION DRAWINGS - SIGNED AND SEALED COMPLETE SETS OF SPECIFICATIONS - SIGNED AND SEALED
2			

THESE ARE TRANSMITTED as checked below:

☒ For approval ☐ Approved as submitted ☐ Resubmit ☐ Copies for approval
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☐ As requested ☐ Returned for corrections ☐ Returned ☐ Corrected prints
☐ For review and comment ☐ Other
☐ FOR BIDS DUE/DATE: ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS

PLEASE REVIEW FOR BUILDING PERMITS AS SOON AS POSSIBLE. THANK YOU.

HAND DELIVERED: DATE: _____ TIME: _____

RECEIVED BY: _____

COPY TO DR. P. NICASTRO

SIGNED _____ M. F. YEZZI, JR.

If enclosures are not as noted, please notify us at once.

YEZZI ASSOCIATES
Architects & Planners

P.O. Box 1638
TOMS RIVER, NJ 08754

TEL: (908) 240-3433
FAX: (908) 240-3463

1-800-376-3433

LETTER OF TRANSMITTAL

TO MR. JOSEPH CURIAZZA
BUILDING INSPECTOR
BRICK TOWNSHIP
401 CHAMBERS BRIDGE ROAD
BRICK, NJ 08723

JOB NUMBER
YC97116

DATE
7/15/97

ATTENTION

RE:

HERBERTSVILLE SCHOOL ADDITION
BLOCK 1421, LOT 24
LANES MILL ROAD

WE ARE SENDING YOU ☒ Attached ☐ Under separate cover via the following items.

☐ Shop Drawings ☐ Prints ☐ Plans ☐ Specifications ☐ Samples
☐ Copy of Letter ☐ Change Order ☒ Other:

COPIES	DATE	NUMBER	DESCRIPTION
1			CONSTRUCTION PERMIT APPLICATION FOLDER - COMPLETED ZONING PER APPLICATION PLOT PLAN REVIEW CHECK LIST PLUMBING SUBCODE TECHNICAL SECTION FIRE PROTECTION SUBCODE TECHNICAL SECTION BUILDING SUBCODE TECHNICAL SECTION

THESE ARE TRANSMITTED as checked below:

☒ For approval ☐ Approved as submitted ☐ Resubmit ☐ Copies for approval
☒ For your use ☐ Approved as noted ☐ Submit ☐ Copies for distribution
☐ As requested ☐ Returned for corrections ☐ Returned ☐ Corrected prints
☐ For review and comment ☐ Other
☐ FOR BIDS DUE/DATE: ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS

PLANS AND SPECIFICATIONS AND STATE RELEASE FORM DELIVERED 7/9/97.
HAND DELIVERED: RECEIVED BY: Winnie Delo DATED: 7-15-97

COPY TO _____

SIGNED M. F. YEZZI, JR.

If enclosures are not as noted, please notify us at once.

P L O T P L A N R E V I E W

C H E C K L I S T

BLOCK 1421 LOT 24 DATE RECEIVED _____

ADDRESS HERBERTSVILLE - ELEMENTARY SCHOOL, LANES-MILL RD.

APPLICANT BRICK BOARD OF ED. PHONE 908-785-3005

CONTRACTOR PENDING - PHONE _____

ADDRESS LANES MILL RD, BRICK NJ SUBDIVISION N/A

TYPE OF WORK SITE, G.C. + MECHANICAL ZONING APPROVAL ✓

REVIEW - FLOOD ZONE IDENTIFIED BY FIRM N/A ELEV. NA

N/A PANEL # N/A MAP# N/A DATED -

FEMA LETTER RECEIVED YES NO ✓

	SHOWN	ACCEPTED	DEFICIENT	N/A
1. SITE PLAN &/OR SURVEY SIGNED & SEALED	✓			
2. DRAW TO A SCALE OF NOT LESS THAN 1"=100'	✓			
3. EXISTING ELEVATIONS (NGVD IN FLOOD ZONES)	✓			
4. SIDE PROPERTY LINES & DWELLING & PROP. CORNERS	✓			
5. STREET GUTTER, TOP CURB & CENTER LINE ELEV.	✓			
6. CONTOURS: 1' INCREMENTS/IF ELEV. FLUCTUATES 2'	✓			
7. ADJACENT DWELLING CORNERS				✓
8. PROPOSED GRADING	✓			
9. GARAGE/1ST FLOOR/CRAWL SPACE/BASEMENT ELEV.	✓			
10. LOT GRADING/FILLING & FINAL ELEVATION	✓			
11. METHOD OF DRAINING	✓			
12. FLOOD OPENINGS SIZED & PLACED	✓			
13. DRIVEWAY WIDTH/TYPE & DRAINAGE	✓			
14. DIMENSIONS/ACREAGE OF PARCEL IN QUESTION	✓			

	SHOWN	ACCEPTED	DEFICIENT	N/A
15. LOCATION OF FLOODWAY BOUNDARY/HAZARD AREA				
16. FRESH WATER WETLANDS				✓
17. PARKING AREAS	✓			
18. FACILITY & CONNECTIONS: WATER/SEWER/GAS/ELEC.	✓			
19. PLANTINGS, SEEDLINGS, SCREENINGS, FENCES, SIGNS	✓			
20. STREETS	✓			
21. CURBING	✓			
22. DESCRIPTION OF ALTERATIONS/REL. OF WATERCOURSE				✓
23. PRIOR APPR: ARMY CORP/D.E.P./WETLANDS, ETC.				✓
24. DAM SAFETY				✓
25. SOIL CONSERVATION SERVICE				✓
26. PLANNING BOARD	✓			

PLOT PLAN REVIEW	DATE	APPROVED	REJECTED
SIGNATURE			
REVISED			
REVISED			
REVISED			
FIELD CHECK			
REVISED			
REVISED			
REVISED			
MUNICIPAL ENGINEER			
REVISED			
REVISED			
REVISED			

190-31: Plot plan (Added 12-28-80 by Ord. No. 354-2P-80:
amended 6-12-84 by Ord. No. 354 2P-84)

- A. Except where approval has been obtained after application under Part 3 or 4 of this chapter, no principal building or addition to a principal building shall be constructed in the Township of Brick except after approval by the Township Engineer of a plot plan to be submitted in accordance with the following specifications.
- (1) Such plot plan shall be a survey of the lot in question showing the existing topography of the lot and the proposed location and elevation of the building and/or addition and the proposed grading. Existing topography and proposed grading shall at a minimum, consist of elevations at the property corners and the corners of the proposed building and/or addition. In the event that there is more than a two-foot difference in lot elevations, contours at one-foot intervals shall be shown. The existing topography of the lots immediately adjacent to the lot in question and the road fronting such lot shall also be indicated on the plot plan.
 - (2) Such plot plan shall include the following additional information:
 - (a) The width and type of pavement on the road in front of the proposed building and/or addition.
 - (b) The proposed method of drainage from the property in question.
 - (c) The proposed garage and first floor elevations.
 - (3) Plot plans must be prepared by a licensed engineer or land surveyor and shall bear his signature and seal. Surveys and topographical information certified to National Geodetic Vertical Datum must be prepared by a licensed land surveyor and shall bear his signature and seal.
 - (4) Building or additions in a flood hazard area shall be in compliance with the National Flood Insurance Program (NFIP) as regulated by Federal Emergency Management Agency (FEMA).
- B. Exemption from the plot plan requirement for an addition is subject to the approval of the Township Engineer, said exemption to be contingent upon:
- (1) Proof that the subject addition is not in a flood hazard area.
 - (2) A survey locating the existing dwelling.
 - (3) A site inspection by a Brick Township Engineering Inspector to verify that the proposed addition will not create a drainage problem.
- C. Petitions for plot plan exemptions are to be made to the Township Engineer in writing.

STATE OF NEW JERSEY DIVISION OF CONSUMER AFFAIRS
THIS IS TO CERTIFY, THAT
BOARD OF MASTER PLUMBERS
HAS LICENSED
JOSEPH D. WOLONS JR.
MASTER PLUMBER
07/01/97 TO 06/30/99
VALID
BI 01704
LICENSE NO.
DIRECTOR
Signature: [Handwritten Signature]
Signature: [Handwritten Signature]

**LUBECK CO. SOUTH, INC.**235 Drum Point Rd.
BRICK, NJ 08723 •DATE 12/30/97 TIME 9:40 ☒ A.M. ☐ P.M.NUMBER OF PAGES
(Including Cover Letter): 6

NOTE: If you did not receive all of the pages or if you have a question, please call the verifying number (below).

TO: GARY LICKNIE

FROM:

CO. NAME BRICK FIRE INSP.NAME Bill Lubeck

ADDRESS

SUBJECT Herbertsville

ATTENTION

FAX NO.

Phone

FAX NO.

262-1035908-920-9277908-920-6611

VERIFYING NO.

908-920-6611**FAX Transmission**

REMARKS:

For Herbertsville School -1421 14

FROM :

PHONE NO. : 7322705821 +

Dec. 29 1997 07:08PM P3

72-112

NATIONAL FIRE ALARM CODE

ALARM INDICATING APPLIANCES AND CIRCUIT INFORMATION

QTY OF	CIRCUIT STYLE	
<u>0</u>	<u>-</u>	BELLS
<u>2</u>	<u>B</u>	HORNS + Strobes
<u>0</u>	<u>-</u>	CHIMES
<u>2</u>	<u>B</u>	STROBES
<u>0</u>	<u>-</u>	SPEAKERS
<u>0</u>	<u>-</u>	OTHER: (SPECIFY) _____
<u>0</u>	<u>-</u>	

NO. OF ALARM INDICATING CIRCUITS: 5

ARE CIRCUITS SUPERVISED? ☒ YES ☐ NO

SUPERVISORY SIGNAL INITIATING DEVICES AND CIRCUIT INFORMATION

QTY OF	CIRCUIT STYLE	
<u>N/A</u>	<u>N/A</u>	BUILDING TEMP.
<u> </u>	<u> </u>	SITE WATER TEMP.
<u> </u>	<u> </u>	SITE WATER LEVEL
<u> </u>	<u> </u>	FIRE PUMP POWER
<u> </u>	<u> </u>	FIRE PUMP RUNNING
<u> </u>	<u> </u>	FIRE PUMP AUTO POSITION
<u> </u>	<u> </u>	FIRE PUMP OR PUMP CONTROLLER TROUBLE
<u> </u>	<u> </u>	FIRE PUMP RUNNING
<u> </u>	<u> </u>	GENERATOR IN AUTO POSITION
<u> </u>	<u> </u>	GENERATOR OR CONTROLLER TROUBLE
<u> </u>	<u> </u>	SWITCH TRANSFER
<u> </u>	<u> </u>	GENERATOR ENGINE RUNNING
<u> </u>	<u> </u>	OTHER: _____

SIGNALING LINE CIRCUITS

Quantity and style (See NFPA 72, Table 3-6.1) of signaling line circuits connected to system:

Quantity _____ Style(s) _____

SYSTEM POWER SUPPLIES

a. Primary (Main): Nominal Voltage 24, Amps 3

Overcurrent Protection: Type -, Amps -

Location (Panel Number): MS 9200

Disconnecting Means Location: main breaker

b. Secondary (Standby):

12V Storage Battery: Amp-Hr. Rating 7 Amp hr
 Calculated capacity to operate system, in hours: 24 60
 Engine-driven generator dedicated to fire alarm system:
 Location of fuel storage:

TYPE BATTERY

☒ Dry Cell

☐ Nickel Cadmium

☐ Sealed Lead-Acid

☐ Lead-Acid

☐ Other (Specify) _____

c. Emergency or standby system used as a backup to primary power supply, instead of using a secondary power supply:

_____ Emergency system described in NFPA 70, Article 700

_____ Legally required standby described in NFPA 70, Article 701

_____ Optional standby system described in NFPA 70, Article 702, which also meets the performance requirements of Article 700 or 701.

PRIOR TO ANY TESTING

NOTIFICATIONS ARE MADE:

YES

NO

WHO

TIME

MONITORING ENTITY

☒

☐

BUILDING OCCUPANT'S

☒

☐

BUILDING MANAGEMENT

☐

☐

OTHER (SPECIFY)

☒

☐

AHJ (NOTIFIED) OF ANY IMPAIRMENTS

☒

☐

SYSTEM TESTS AND INSPECTIONS

TYPE

VISUAL

FUNCTIONAL

COMMENTS

CONTROL PANEL

☒

☒

INTERFACE EQ.

☐

☒

LAMPS/LEDS

☒

☒

FUSES

☒

☒

PRIMARY POWER SUPPLY

☒

☒

TROUBLE SIGNALS

☒

☒

DISCONNECT SWITCHES

☒

☒

GROUND FAULT MONITORING

☒

☒

SECONDARY POWER

TYPE

VISUAL

FUNCTIONAL

COMMENTS

BATTERY CONDITION

☒

☒

LOAD VOLTAGE

☒

☒

DISCHARGE TEST

☒

☒

CHARGER TEST

☒

☒

SPECIFIC GRAVITY

☒

☒

Figure 7-5.) Inspection and Testing Form. (cont.)

[New figure.]

FROM :

PHONE NO. : 7322705821 +

Dec. 29 1997 07:09PM P5

72-114

NATIONAL FIRE ALARM CODE

TRANSIENT SUPPRESSORS

[]

REMOTE ANNUNCIATORS

[]

[]

NOTIFICATION APPLIANCES

AUDIBLE

[✓]

[✓]

VISUAL

[✓]

[✓]

SPEAKERS

[]

[]

VOICE CLARITY

[]

INITIATING AND SUPERVISORY DEVICE TESTS AND INSPECTIONS

LOC. & S/N	DEVICE TYPE	VISUAL CHECK	FUNCTIONAL TEST	FACTORY SETTING	MEAS. SETTING	PASS	FAIL
—	—	[]	[]	—	—	[]	[]
—	—	[]	[]	—	—	[]	[]
—	—	[]	[]	—	—	[]	[]
—	—	[]	[]	—	—	[]	[]
—	—	[]	[]	—	—	[]	[]
—	—	[]	[]	—	—	[]	[]

COMMENTS: All Devices were tested
at Time of Final Inspection
with Fire Official

EMERGENCY COMMUNICATIONS EQUIPMENT

VISUAL

FUNCTIONAL

COMMENTS

PHONE SET

[]

[]

PHONE JACKS

[]

[]

OFF-HOOK INDICATOR

[]

[]

AMPLIFIER(S)

[]

[]

TONE GENERATOR(S)

[]

[]

ROM :

PHONE NO. : 7322705821 +

Dec. 29 1997 02:09PM P5

72.114

NATIONAL FIRE ALARM CODE

TRANSIENT SUPPRESSORS	☐		
REMOTE ANNUNCIATORS	☐	☐	
NOTIFICATION APPLIANCES			
AUDIBLE	☒	☒	
VISUAL	☒	☒	
SPEAKERS	☐	☐	
VOICE CLARITY	☐		

INITIATING AND SUPERVISORY DEVICE TESTS AND INSPECTIONS

LOC. & S/N	DEVICE TYPE	VISUAL CHECK	FUNCTIONAL TEST	FACTORY SETTING	MEAS. SETTING	PASS	FAIL
—	—	☐	☐	—	—	☐	☐
—	—	☐	☐	—	—	☐	☐
—	—	☐	☐	—	—	☐	☐
—	—	☐	☐	—	—	☐	☐
—	—	☐	☐	—	—	☐	☐
—	—	☐	☐	—	—	☐	☐

COMMENTS:

All Devices were tested
at Time of Final Inspection
with Fire Official

EMERGENCY COMMUNICATIONS EQUIPMENT	VISUAL	FUNCTIONAL	COMMENTS
PHONE SET	☐	☐	
PHONE JACKS	☐	☐	
OFF-HOOK INDICATOR	☐	☐	
AMPLIFIER(S)	☐	☐	
TOE GENERATOR(S)	☐	☐	
CALL IN SIGNAL	☐	☐	
SYSTEM PERFORMANCE	☐	☐	

INTERFACE EQUIPMENT	VISUAL	DEVICE OPERATION	SIMULATED OPERATION
(SPECIFY) —	☐	☐	☐
(SPECIFY) —	☐	☐	☐
(SPECIFY) —	☐	☐	☐
SPECIAL HAZARD SYSTEMS			
(SPECIFY) —	☐	☐	☐
(SPECIFY) —	☐	☐	☐
(SPECIFY) —	☐	☐	☐

Figure 7-5.1 Inspection and Testing Form. (cont.)

[New figure]

ROM :

PHONE NO. : 7322705821 +
INSPECTION, TESTING, AND MAINTENANCEDec. 29,1997 07:09PM P6
72-115

SPECIAL PROCEDURES:

Please note these Devices are
For the new Addition only

COMMENTS:

Door Holders were Installed on
12/10/97. Door Holders were tested + operational
at this time.

ON/OFF PREMISES MONITORING:

	YES	NO	TIME	COMMENTS
ALARM SIGNAL	☐	☐	_____	_____
ALARM RESTORAL	☐	☐	_____	_____
TROUBLE SIGNAL	☐	☐	_____	_____
SUPERVISORY SIGNAL	☐	☐	_____	_____
SUPERVISORY RESTORAL	☐	☐	_____	_____

NOTIFICATIONS THAT TESTING IS COMPLETE:

	YES	NO	WHO	TIME
BUILDING MANAGEMENT	☒	☐	_____	_____
MONITORING AGENCY	☒	☐	_____	_____
BUILDING OCCUPANTS	☐	☐	_____	_____
OTHER (SPECIFY)	☐	☐	_____	_____

THE FOLLOWING DID NOT OPERATE CORRECTLY: _____

SYSTEM RESTORED TO NORMAL OPERATION: DATE _____ TIME _____

THIS TESTING WAS PERFORMED IN ACCORDANCE WITH APPLICABLE NFPA STANDARDS.

NAME OF INSPECTOR: Guy FichterDATE: 12/29/97

TIME: _____

SIGNATURE: Guy Fichter

NAME OF OWNER OR REPRESENTATIVE: _____

DATE: _____

TIME: _____

SIGNATURE: _____

Figure 7-5.1 Inspection and Testing Form. (cont.)

[New figure]

MS-9200

Addressable Fire Alarm Control Panel

GENERAL

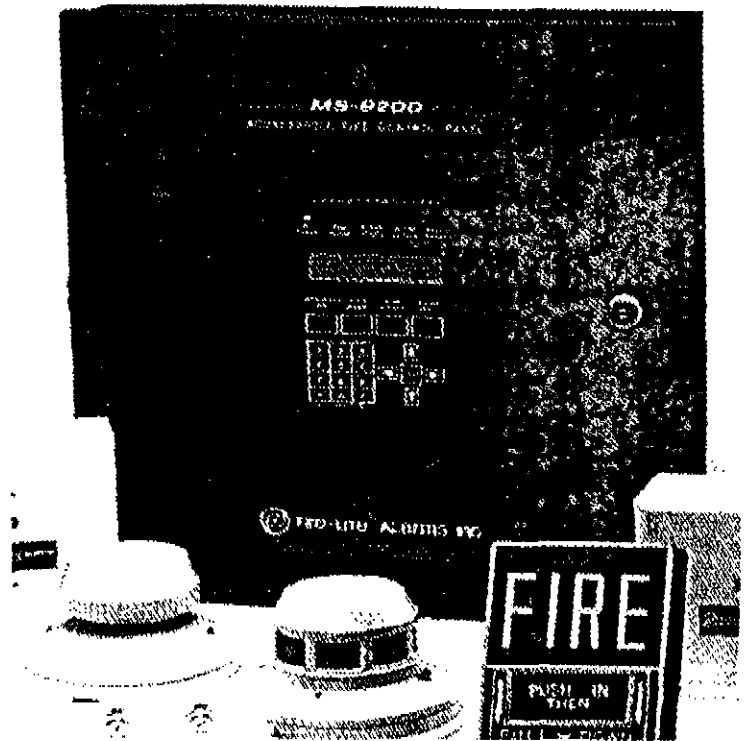
The MS-9200 is a compact, cost effective, addressable fire alarm control panel with a capacity of 198 Fire-Lite Series 300 devices. A single SLC loop supports up to 99 smoke or heat detectors and 99 control or monitor modules. The panel uses the latest in surface-mount technology, and is designed for ease of installation and programming. It features the latest in fire protection technology, including: maintenance alert and automatic detector test.



S624

FEATURES

- 198 addressable device capacity (99 detectors and 99 monitor or control modules), Style 4, 6, or 7.
- 2 programmable internal Notification Appliance (bell, signal) Circuits, Style Y or Z (Class B or A).
- Alarm, trouble and supervisory relays, standard.
- Maintenance alert warns when smoke detector dust accumulation is excessive.
- Optional plug-in Digital Alarm Communicator.
- Remote serial annunciators operate over high speed EIA-485 port.
- Optional printer interface.
- 3.0 A Notification Appliance (bell,signal) power, expandable to 6.0 A.
- 40 character LCD display with back-lighting.
- Custom English labels per point may be manually entered or selected from an internal library file.
- Real time clock/calendar.
- History file with 500 event capacity.
- Waterflow or supervisory selection per monitor point.
- System alarm verification, smoke only.
- Walk Test reports 2 devices set to same address.
- Presignal delay option per NFPA 72.
- Silence Inhibit and Auto Silence timer options.
- March Time/Temporal/California code for non-silenceable bell circuits.
- Field-programmable on panel, with user-defined passwords, plus an Autoprogram feature.
- Battery charger for up to 60 hours of standby power.
- Remote Acknowledge/Silence/Reset/Drill via M300 modules.
- Optional monitor module supports two-wire smoke detectors.



The MS-9200
15.0" H x 14.5" W x 3.0" D

- Rapid poll algorithm for manual stations. Responds in less than 2 seconds.
- Operates with untwisted, unshielded wire (up to 1,000 feet) for retrofit applications (U. S. Patent 5,210,523).
- New 300 Series addressable devices feature decimal address selection. Address of each device can be easily set in the field by use of a screwdriver. Smoke detectors also feature a plug-in wiring connector.



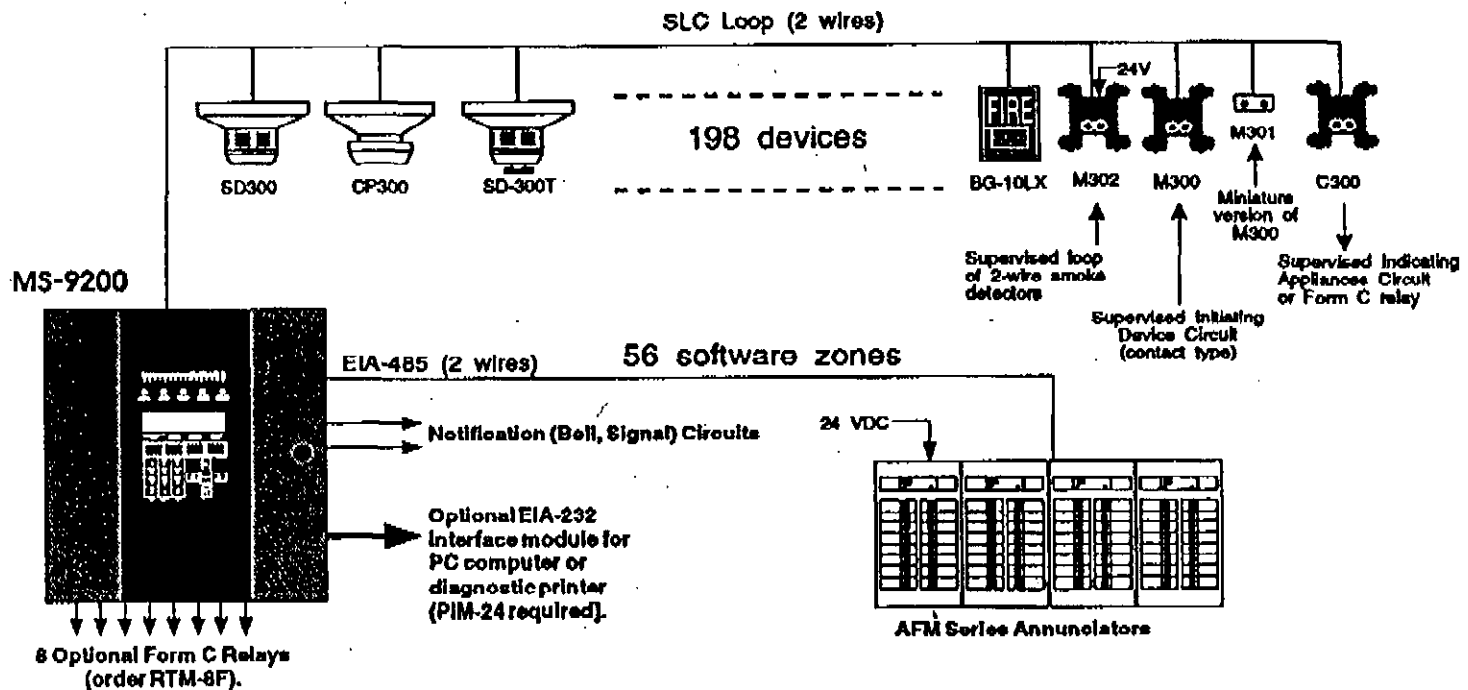
12 Clintonville Road
Northford, CT 06472
Phone: (203) 484-7161
FAX: (203) 484-7118

ISO-9001
Engineering and Manufacturing
Quality System Certified to
International Standard ISO-9001



DF-51276
Page 1 of 4
September 22, 1993

SYSTEM PERIPHERALS



ADDRESSABLE DEVICES

- **SD300** Addressable photoelectric smoke detector. Includes mounting plate and plug-in wiring terminal block.
- SD300T** Same as SD300, plus a 135° F. thermostat heat detector.
- CP300** Addressable Ionization smoke detector.
- **BG-10LX** Addressable manual station based on the popular Fire-Lite BG-10 dual-action station. Made of LEXAN®.
- **M300** Addressable monitor module for one zone of dry contact initiating devices. Mounts in standard 4-inch box. Includes plastic cover plate and end-of-line resistor. Features polling/alarm LED and decimal address switches. May be configured for either Style B (Class B) or Style D (Class A).
- **M301** Miniature version of M300. Excludes LED and Style D option. Connects with wire pigtails.
- **M302** Similar to M300, but may monitor up to 20 conventional 2-wire detectors. Requires external 24 V power. (Consult factory for compatible smoke detectors & availability).
- C300** Addressable control module for one Style Y zone of supervised polarized Notification Appliances, or may be configured as a dry contact (Form C) relay. Mounts in standard 4-inch box. Features polling LED and decimal address switches. Notification Appliance Circuit option requires external 24 VDC power. (Consult factory for compatible Notification Appliances).
- I300** This module isolates the SLC loop from short circuit conditions.

AFM ANNUNCIATORS

AFM-16ATX/AEM-16ATF

Serial remote annunciator modules may be located up to 6,000 feet from the panel. The AFM-16ATX displays alarm and trouble for 16 points or zones. Expandable to 64 points using up to three AEM-16ATF's. May also perform remote silence and reset. The first four switches from one annunciator may be used to remotely acknowledge, silence, reset, or to perform a drill.

AFM-32AX/AEM-32AF

Alarm-only indication by zone, with 32 alarm LEDs per module. AFM-32AX may support one AEM-32AF for a maximum of 64 zones.

AFM-16AF

Alarm indication only. 16 alarm LEDs, common trouble LED. Mounts to standard 4 gang box.

ABS-1F & ABS-2F

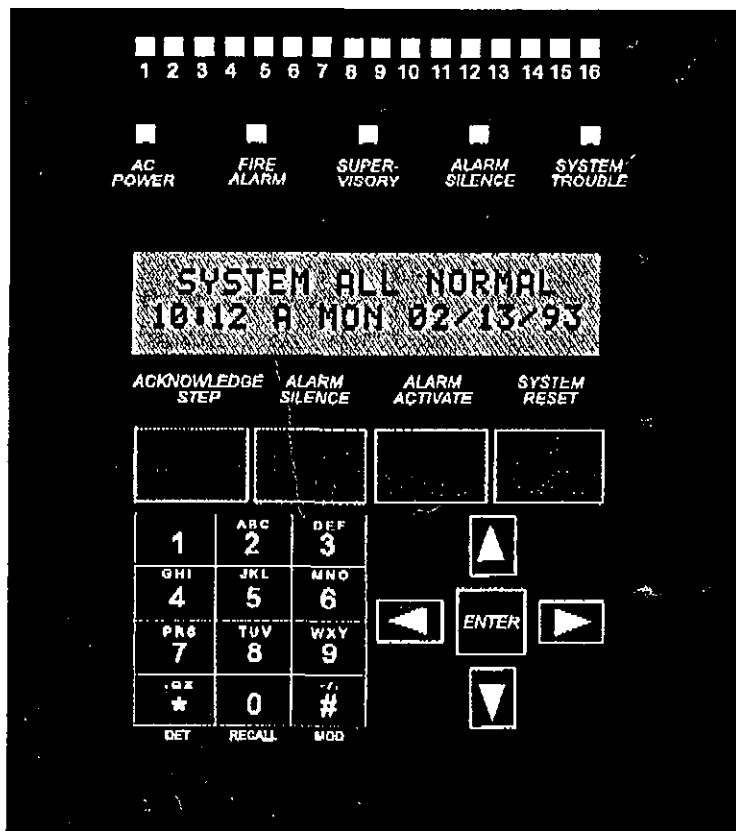
Surface mount annunciator boxes accept one or two annunciator modules.

ABF-1F, ABF-2F, & ABF-4F

Flush mount boxes accept 1, 2, or 4 modules.

AKS-1F

Annunciator key switch kit for use with AFM-16AT when used with ABF boxes.



Keypad and 40 Character LCD Display (with back lighting feature)

MAINTENANCE ALERT

The MS-9200 continually monitors each smoke detector and responds to a reading of 80% of the detectors alarm threshold. If the detector continually reports an 80% threshold reading (8/10 of what is required to be an alarm) for 24 hours, a trouble condition is created. This reduces the risk of false alarms due to dust and dirt by creating a trouble condition and not an alarm.

AUTOMATIC TEST OPERATION

The MS-9200 performs an automatic test of each detector every 2 hours. Failure to meet the test limits causes an **AUTO TEST FAIL** trouble type. System Reset clears this trouble.

FIELD PROGRAMMING FEATURES

Off-Line Programming

Create entire program in your office using a DOS based PC computer (order programming kit PK-9200 separately). Upload/Download system programming to the MS-9200 in less than one minute.

Auto-Programming

Command the MS-9200 to program itself (takes less than 30 seconds). In the Auto-Program mode, the MS-9200 scans for all possible devices at all addresses, stores the device types, and addresses found, and then loads default values for all options (General Alarm). It also checks for two or more devices set to the same address.

On-Line Edit

While still providing fire protection, the MS-9200 may be programmed from the front panel. Simple menu trees displayed on the LCD allow the trained user to perform all functions without referring back to the programming manual.

English Label Library

Quickly select labels from a standard library "FLR 3 HALLWAY:", or enter them in letter-by-letter. Use recall function to repeat previously used label.

Program Check

Automatically catch common errors, such as relays not linked to any zone or point.

SPECIFICATIONS

- Primary input power: 120 VAC, 50/60 Hz, 2.3 Amps.
- Total output 24 V power: 3.6 A (expandable to 6.6).
- Standard Notification Circuits: 2 (Style Y or Z).
 - Expansion Notification Circuits: up to 99 (using C300 module).
- Notification Appliance Power: 3.0 A (expandable to 6.0 A with XRM-24).
- Four-wire detector power: 300 mA.
- Non-resettable regulated power: 300 mA.
- Non-regulated power: 2.5 Amps Maximum
- Battery charger range: 7 AH — 17 AH (BB-17F battery cabinet for 12 — 17 AH batteries).
- Remote charger (panel charger disabled): 25—55 AH (use R45-24).
- Charge float rate: 27.6 V.
- Charger current limited to 0.8 A.
- Control panel Alarm, Trouble, Supervisory Relay contact rating: 2.0 A @ 30 VDC.

SYSTEM CAPACITY:

- Total programmable input/output points198
- Addressable Detectors99
- Addressable monitor or control modules99
- Programmable NAC (bell) circuits in panel2*
- Programmable software zones56
- AFM annunciators per system4

NOTE: * NAC circuits are expandable using C300 control module.

CONTROLS AND INDICATORS**LED INDICATORS**

1. AC POWER (green).
2. FIRE ALARM (red).
3. SUPERVISORY (yellow).
4. ALARM SILENCE (yellow).
5. SYSTEM TROUBLE (yellow).

MEMBRANE SWITCH CONTROLS

1. ACKNOWLEDGE/STEP
2. ALARMSILENCE
3. DRILL
4. SYSTEM RESET (lamp test)
- 5 — 16. 12 key pad with full alphabet
- 17 — 20. 4 cursor keys
21. ENTER

LCD DISPLAY

40 characters (2 X 20) with long-life LCD display, back-lit.

COMPATIBLE ADDRESSABLE DEVICES

MODEL	DESCRIPTION
CP300	Ionization Smoke Detector.
SD300	Photoelectric Smoke Detector.
SD300T	Photoelectric with 135° F. thermal element.
M300	Monitor Module.
M301	Miniature Monitor Module.
M302	2-Wire Detector Monitor Module.
C300	Control Module.
BG-10LX	Manual Fire Alarm Station, Addressable.

I300**Isolator Module****EIA-232 PORT**

MODEL	DESCRIPTION
PIM-24	Printer/PC Interface Module.

COMPATIBLE DEVICES, EIA-485 PORT

MODEL	DESCRIPTION
AFM-16ATX	Annunciator Fixed Module, 16 Alarm LEDs, 16 Trouble LEDs, and 16 Switches. Accepts up to 3 AEM-16ATF expanders.
AEM-16ATF	Annunciator Expander Module, 16 Alarm LEDs, 16 Trouble LEDs.
AFM-32AX	Annunciator Fixed Module, 32 Alarm LEDs, Common Trouble LED.
AEM-32AF	Annunciator Expander Module, 32 Alarm LEDs.
AFM-16AF	Annunciator Fixed Module, 16 Alarm LEDs, Common Trouble LEDs. Mounts to four gang box.

PRODUCT LINE INFORMATION

MODEL	DESCRIPTION
MS-9200	Addressable Fire Panel. Includes display, single printed circuit board, and cabinet.
ZDM-16F	16 Zone LED Annunciator Option Module.
RTM-8F	Plug-in Relay Transmitter Option Module. Provides 8 Form-C relays, plus municipal box & remote station connections.
DP-9200	Full length internal dead front panel (required for Canadian applications).
UDACT-485	Digital Alarm Communicator/Transmitter (Availability to be announced).
XRM-24	120 VAC, 100 VA Transformer. Expands systems power supply. Expands Notification Appliance power from 2.0 amps to 5.0 amps.
PIM-24	Printer and PC Interface Module required for PC programming or to connect a printer.
PK-9200	Programming Kit for DOS based PC computer.
PS-1270	Battery, 12 volt, 7.0 AH, (two required).
PS-12120	Battery, 12 volt, 12.0 AH, (two required).
PS-12170	Battery, 12 volt, 17.0 AH, (two required).
BB-17F	Battery box, required to mount PS-12120 or PS-12170.
R45-24	Remote charger and battery cabinet. Allows charging 25 to 55 AH batteries.
PS-12250	Battery, 12 volt, 25 AH, (two required).
PS-12550	Battery, 12 volt, 55 AH, (two required).

Note: The following modules are in various stages of design and UL-Listing. Please contact Fire-Lite for availability information.

- SD300T
- M302
- I300
- UDACT-485

We try to keep our product information up-to-date and accurate. We cannot cover specific applications or anticipate all requirements. All specifications are subject to change without notice. For more information, contact FIRE-LITE®

DF-51276



OCEAN COUNTY SOIL CONSERVATION DISTRICT

714 LACEY ROAD, FORKED RIVER, N.J. 08731
Telephone (609) 971-7002

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK
PROJECT: HERBERTSVILLE Elem. School SCD NO.: 6100
BLOCK NO.(s) 1421 LOT NO.(s) 14

Final Compliance ☐

Conditional Compliance ☒

Block No.	Lot No.	Conditions
		This CONDITIONAL COMPLIANCE expires on <u>5/1/98</u>. The applicant is required to notify this office when work is PROPERLY COMPLETED. A \$75.00 re-inspection fee will be billed to the applicant for each day the required work is NOT properly completed.
		TOTAL FEES DUE: \$ <u>75.00</u>

This verifies that the soil erosion and sediment control measures for the above designated block and lot numbers are in compliance to the extent indicated above with the soil erosion and sediment control plan as certified by the Ocean County Soil Conservation District and required by Chapter 251, P.L. 1975 as amended, the Soil Erosion and Sediment Control Act, (N.J.S.A. 4:24-39 et. seq.).

AGENT RESPONSIBLE FOR PROJECT: [Signature] Space Park Bldgs

AUTHORIZED DISTRICT SIGNATURE: [Signature]

DATE: 14/11/97

DISTRIBUTION: WHITE - Township
CANARY - Applicant
PINK - District

BRICK TOWNSHIP PLANNING BOARD
CAPITAL PROJECT APPROVAL RESOLUTION

RESOLUTION R-44-97

PAGE 1

March 26, 1997

WHEREAS, the Brick Township Board of Education has applied to the Brick Township Planning Board for Capital Project Approval pursuant to N.J.S.A. 40:55D-31; and

WHEREAS, the applicant appearing before the Planning Board on March 19, 1997, at which time all interested parties had an opportunity to be heard; and

WHEREAS, the Planning Board makes the following factual findings and findings of law:

1. The Brick Township Board of Education proposes to construct a multi-purpose room and a 4 class room addition to the Herbertsville School and a 6 class room addition and multi-purpose room to the Veterans Memorial Middle School.

2. The applicant submitted and explained the plans and specifications for the proposed construction. Representatives of the Brick Township Board of Education were present at the March 19, 1997 meeting and explained in detail the proposed plans and specifications, and the Board found said plans to be satisfactory. The plans were prepared by Yezzi Associates, Architect and Planner, and said plans bear the date of 2/13/97 for the Herbertsville School, and 3/10/97 for the Veterans Memorial Middle School.

3. The Board finds that the proposed project is consistent with the Municipal Zoning Ordinance and Master Plan, and will not interfere or adversely impact neighboring properties.

NOW, THEREFORE, BE IT RESOLVED by the Brick Township Planning Board on this 26th day of March, 1997, that it favorably recommends undertaking the completion of this project by the Brick Township Board of Education.

File-3
Bd of Ed
Mayor
Boardman
Lupine
Ford
Moxley

RESOLUTION: R-44-97

Page 2

CASE NO.

March 26, 1997

MOVED BY Mr. Petoia

SECONDED BY: Mr. Scherer

VOTING IN THE AFFIRMATIVE: Mr. Haney Councilwoman Hartman
Mr. Petoia Mr. Scherer Mr. Aiello Mr. Cevasco Mr. Underwood

VOTING IN THE NEGATIVE: _____

INELIGIBLE TO VOTE: _____

ABSTAINING: Mrs. LaDuke

ABSENT: Mr. Bruno Mrs. Fox Mr. Reo

CERTIFICATION

I, E. Joan Kull, 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 26th day of March, 1997.

IN WITNESS WHEREOF, I have set my hand this 27th day of March, 1997.

E. Joan Kull
E. JOAN KULL
Clerk of the Planning Board

INSPECTOR: KEN SHAFER
JOB: Herbertsville School SECTION:

DATE: 9/16/98

TYPE OF WORK: Final

WEATHER: Sunny

LOCATION: LAWES Mill Road

TEMPERATURE: 80°

BLOCK: 1421

LOT: 14

**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:

Soils OK 9/15/98 per Bldg. Dept.
Fire OK 9/15/98 per K. Batzel
Letter from Board of Ed. Attached

RECOMMENDATIONS:

☐ TEMP. C.O.

☒ FINAL C.O.

☐ DETAILED REINSPECTION

☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED

[Signature]

PLANNING BOARD ENGINEER

[Signature]

MUNICIPAL ENGINEER

I, _____, Authorized representative of

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