CCV

BLOCK ~~701 B06~~ 701/12 LOT 1 ADDRESS (SITE) ~~[illegible]~~ 238-244 Chambers Bridge Rd. (91-242) PERMIT NO. 242-91

3/6 TCO

Get plb final

Eng

Soil ok

Soil OK

5283

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 244-250 Chambers Bridge Rd.
2. Name of Owner in Fee: Brick Roller Skating Center Inc Tel. (201) ~~840-6464~~ 542-5891
   Address: PO BOX 554 (street) BRICK (municipality) NJ 08724 (zip code)
3. Ownership in Fee: Public ____ Private X
4. Principal Contractor: Same Tel. (201) ~~840-6464~~ 542-5891
   Address ____
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Federal Emp. No. ____ Social Security No. ____
5. Architect or Engineer THEO. LEWIS JR. Tel. (201) 542-8833
   Address 227 Wyckoff Rd. Eatontown N.J.
6. Responsible Person In Charge of Work Richard Jones Tel. (201) 542-7034 542-5891

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	120-	8 Pd 7-27-92	
2. Electrical				
3. Plumbing		130-		
4. Fire Protection		167-	46 Pd 7-27-92	
5. Other				
6. Subtotal	$	417-		
7. Less 20% for State Plan Review		5-		
8. Subtotal	$			
9. DCA Training Fee				
10. Subtotal	$			
11. Cert. of Occupancy		20		
12. Other				
13. TOTAL	$	442-		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	1	
2. Height of Structure	15 ft.	
3. Area—Largest Floor	15475 sq. ft.	
4. Building Area—All Floors	15475 sq. ft.	
5. Volume of Structure	273300 cu. ft.	
6. Construction Classification	3B	
7. Total Land Area Disturbed	sq. ft.	
8. Flood Hazard Zone		
9. Base Flood Elevation	ft.	
10. Wetlands yes	sq. ft.	
no		
11. Fire Grading		
12. Max. Live Load		
13. Max. Occupancy Load		

II. PROPOSED WORK

	Est. Cost
1. ☐ Minor Work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☒ Alteration	15000
6. ☒ Fire Protection	500
7. ☒ Plumbing	
8. ☐ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS	15,500

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Reviewer	Resubmission Dates Approval	Resubmission Dates Rejection	Reviewer
WP	1/29/91		2/21/91	RK			
	2-21-91		2-21-91	[illegible]	TCO [illegible]		
			2-19-91	[illegible]			
	elec.		3-27-91	[illegible]			
Eng					3/27/91		

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

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: Roller Rink
2. Use Group: A-3
3. Change in Use Group, Indicate Former:

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

U.C.C. Form F-100A

20C

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 RICHARD JONES

Address ~~97-105 Hwy 35~~ POB 554
~~EATONTOWN, N.J.~~ BRICK NJ 08724

Telephone ~~(201) 542-6464~~ 542-5891

Signature _____ Date 1/30/91

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL Prelimin. Initial	LOCAL APPROVAL Final Date	COUNTY APPROVAL Prelimin. Initial	COUNTY APPROVAL Final Date	REGIONAL APPROVAL Prelimin. Initial	REGIONAL APPROVAL Final Date	STATE APPROVAL Prelimin. Initial	STATE APPROVAL Final Date
☒ Planning Board	SPX	1/24/91						
☐ 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 Zoning	SJC	1/30/91	Roller Rink					
☐								
☐								

COMMENTS

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

Name of Code & Edition		Name of Code & Edition	
Building		Energy	
Electrical	3-27-91 app 3 units (Roller Rink	Barrier Free	
Plumbing	TCO 14 days from 3/27 to 4/10/91	Flood Hazard	
Fire Protection		As Built Elevation Cert.	
Mechanical		Other	

Other: Sng OK 3-26-91 ED
Sail OK 8-8-89
CC - OK 3-28-91

X. CERTIFICATES ISSUED (office use only)

☑ Temporary Certificate of Occupancy	No. 242	3-28-91	DATE EXPIRED 4-10-91 extend 5/10/91
☐ Temporary Certificate of Occupancy	No.		
☐ Continued Certificate of Occupancy	No.		
☐ Certificate of Occupancy	No.		
☐ Certificate of Approval	No.		
☐ None			

CUT-IN-CARD

MUNICIPALITY Brick twp

LOCATION 250 Chambers Bridge rd. UTILITY CO OP

BLK 701-12 LOT 1

OWNER Brick Roller Skating Ctr. OCCUPANT

"Installation in the above premises has been inspected and is in accordance with N.E.C, utility and DCA requirements."

☑ FINAL ☐ TEMPORARY This approval void after _____ days

SERVICE Service RANGE _____ WATER HEATER _____

AIR COND _____ ELECT HEAT _____ MISC _____

COMMENTS Complete 3 units

DATE 3-27-91 PERMIT # 01374 INSPECTOR [signature]

Elec. 104 Insp. Lic# 185

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

1551 HIGHWAY 88 WEST
BRICK, NEW JERSEY 08724
458-7000

CERTIFICATE OF COMPLIANCE

Date 3-28-91

NAME W & F Developers/Jack & Jan Inc.

ADDRESS 317 Brick Blvd. Brick, NJ 08723

PROPERTY LOCATION 248 Chambersbridge Rd.

Account No. K450649 Block 701-12 Lot 1

I hereby certify that the above applicant has complied with all Rules and Regulations of this Authority and has paid all required fees and charges.

For the Authority J. Evan

Pineland Plumbing & Heating, Inc.

Art.

Gas Pipe Inspection's

Parkway Plaza:

Chambersbridge Rd.

STORE #

230' 12-8-91

232'

1½" MAINS For 150,000 BTU

CONSTRUCTION PERMIT

Date Issued 3/6/91
Control #
Permit # 242-91

IDENTIFICATION Block 701.12 Lot 1

Work Site Location 238-244 Chamberlain Bridge Contractor [illegible]

Address [illegible]

Owner in Fee Burl Tollis Skating Center

Address P.O Box 554 Brad. NJ

Tele. ( ) **0001**

Lic. No. or Bldrs. Reg. No. Exp. Date 243**

Federal Emp. No. BLOCK 0.00

or Social Security No. 701.12 #

LOT 0.00

is hereby granted permission to perform the following work:

[✓] BUILDING [ ] PLUMBING [ ] OTHER

[ ] ELECTRICAL [ ] FIRE PROTECTION

DESCRIPTION OF WORK:

Alteration

PAYMENTS (Office Use Only)	1 #
Building	BUILDING 120.00
Plumbing	PLUMBING 130.00
Electrical	FIRE 187.00
Fire Protection	PLAN RVW 5.00
Other	C / O 20.00
Other	TOTAL 442.00
DCA Training Fee	CHECK 442.00
Cert. of Occ.	CHANGE 0.00
Other	3/06/91 NO. 5 0013A005 11:41
Total	
Check No.	
Cash	
Collected By: Val	

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 $ 15,500.-

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

PERMIT UPDATE

Date Update Issued
Control #
Permit #
Date Permit Issued

IDENTIFICATION Block 201-12 Lot 1
Work Site Location [illegible] Contractor [illegible]
Address
Owner in Fee [illegible]
Address [illegible] Tele. ( )
Lic. No. or Bldrs. Reg. No.
Tele. ( ) [illegible] Federal Emp. No.
or Social Security No. [illegible]

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] Other
[ ] ELECTRICAL [ ] FIRE PROTECTION
DESCRIPTION OF WORK:

[illegible]

Estimated Cost of Work $ [illegible]

CONSTRUCTION OFFICIAL

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

U.C.C. Form F-190A

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

New Jersey
UNIFORM CONSTRUCTION CODE

CERTIFICATE

Date Issued 3/28/91
Control #
Permit # 242-91

IDENTIFICATION

Block 701.12 Lot 1
Work Site Location 238-244 Chambers Bridge Rd
Brick, N.J.
Owner in Fee Jack & Jen Inc.
Address P.O. Box 554
Brick, N.J.
Tele. ( )
Contractor Same
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No.
Use Group X A - 2 hour
Maximum Live Load
Description of Work/Use:

Tenant Fit Up

Roller Rink

Type of Warranty Plan: [ ] State [ ] Private
Construction Classification
Maximum Occupancy Load 670 ✓

extend 30 day

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.

extend 30 day
4-10-91 to 5-10-91
per (a 9-c.)

☐ 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 April 10, , 19 91 or the owner will be subject to a fine or order to vacate: 14 dayTCO from Plumbing and 30 day to complete site plan requests.

Arthur J. Cerjo 7-24-1
CONSTRUCTION OFFICIAL

(BA) Area, (1-100)

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

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

CERTIFICATE

Date Issued 3/28/91
Control #
Permit # 242-91

IDENTIFICATION

Block 701.12 Lot 1
Work Site Location 238-244 Chambers Bridge Rd
Brick, N.J.
Owner in Fee Jack & Jen Inc.
Address P.O. Box 554
Brick, N.J.
Tele. ( )
Contractor Same
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No.
Use Group X A - 2 hour
Maximum Live Load
Description of Work/Use:

Tenant Fit Up

Roller Rink

Type of Warranty Plan: [ ] State [ ] Private
Construction Classification
Maximum Occupancy Load 670 ~~ppl~~.

extend. 30 days

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.

Extend 30 days 4-10-91 to 5-10-91 per a.g.c.)

☐ CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspeciion 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 April 10, , 19 91 or the owner will be subject to a fine or order to vacate: 14 dayTCO from Plumbing and 30 day to complete site plan requests.

Arthur J. Cerzo
CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

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

BUILDING SUBCODE TECHNICAL SECTION

Date Received 3/6/91
Date Issued
Control #
Permit # 242-91

238-244 CHAMBERSBRIDGE Rd.

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

Block ~~701.B06~~ 701-12 Lot 1
Work Site Location ~~[illegible]~~ CHAMBERS BRIDGE Rd. BRICKTOWN, NJ.
Owner in Fee JACK & JEN INC.
Address ~~97-105 Hwy 35~~ P.O.B 554 ~~EATONTOWN, NJ.~~ BRICK NJ 08724
Tele. (201) ~~840-6464~~ 542-5891
Contractor Same
Address
Tele. (201) 840-6464
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. _____ 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

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

TENANT FIT UP.
ROLLER SKATING RINK

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	2/24/91	AK
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

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

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed A3
Constr. Class Present _____ Proposed 3B
No. of Stories 1
Height of Structure 15 Ft.
Area—Largest Floor 15475 Sq. Ft.
Total Bldg. Area/All Floors 15475 Sq. Ft.
Volume of Structure 273,300 Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Alteration $ 15000
3. Total (1+2) $ 15000

TYPE OF WORK:
[ ] New Building
[ ] Addition
[X] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other TENANT FIT UP.
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence _____ Height
  [ ] Sign _____ Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other _____

(Office Use Only)
FEE
$ _____

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL FEE $ _____

U.C.C. Form F-110A
1 White - Inspector Copy
2 Canary - Office Copy
3 Pink - Applicant Copy
4 Manila Tag - Office Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received 3/6/91
Date Issued
Control #
Permit # 242-91

238-244 CHAMBERSBRIDGE Rd.

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

Block ~~701-B06~~ 701-12 Lot 1
Work Site Location ~~[illegible]~~ CHAMBERS BRIDGE RD. BRICKTOWN, NJ.
Owner in Fee JACK & JEN INC.
Address ~~99-105 Hwy 35 EATONTOWN, NJ.~~ P.O.B. 554 BRICK NJ 08724
Tele. (201) ~~840-6464~~ 542-5891
Contractor SAME
Address
Tele. (201) 840-6464
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TENANT FIT UP.
ROLLER SKATING RINK

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
[ ] No Plans Req.			Type:				
[X] All	2/24/91	[illegible]	Footing				
[ ] Footing			Foundation				
[ ] Foundation			Slab				
[ ] Frame			Frame				
[ ] Other			Insulation				
Joint Plan Review Required:			Finishes:				
[ ] Elec. [ ] Plumb. [ ] Fire			Energy				
SUBCODE APPROVAL			Mechanical				
[ ] CO [ ] CCO [ ] CA			TCO				
Date:			Other				
Approved By:			Final				

B. BUILDING CHARACTERISTICS

Use Group Present ____ Proposed A3
Constr. Class Present ____ Proposed 3B
No. of Stories 1
Height of Structure 15 Ft.
Area-Largest Floor 15475 Sq. Ft.
Total Bldg. Area/All Floors 15475 Sq. Ft.
Volume of Structure 273,300 Cu. Ft.
Total Land Area Disturbed ____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ ____
2. Alteration $ 15000
3. Total (1+2) $ 15000

TYPE OF WORK:
[ ] New Building
[ ] Addition
[X] Alteration
  [ ] Roofing
  [ ] Siding
  [ ] Other TENANT FIT UP.
[ ] Demolition
[ ] Miscellaneous
  [ ] Fence ____ Height
  [ ] Sign ____ Sq. Ft.
  [ ] Pool
  [ ] Elevator
  [ ] Asbestos Abatement
  [ ] Other ____

(Office Use Only)
FEE $

Administrative Surcharge $
Paid [ ] Check # ____ Minimum Fee $
Collected by: ____ TOTAL FEE $

U.C.C. Form F-110A
1 White - Inspector Copy
2 Canary - Office Copy
3 Pink - Applicant Copy
4 Manila Tag - Office Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received 7/27/92
Date Issued
Control #
Permit # 242-91

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

Block 701-12 Lot 1
Work Site Location 238-244 CHAMBERS BRIDGE RD
BRICK NJ 08724
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION
Address P.O. BOX 554
BRICK
Tele. (908) 477-5939
Contractor SAME
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No [redacted]

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS Type:	Failure	Failure	Approval	Initial
[✓] No Plans Req.			Footing				
[ ] All	11/20		Foundation				
[ ] Footing	11/15		Slab				
[ ] Foundation	11/24		Frame				
[ ] Frame	11/5		Insulation				
[ ] Other NON-BEARING WALL	NA		Finishes:				
Joint Plan Review Required:			Energy				
[ ] Elec. [ ] Plumb. [ ] Fire			Mechanical				
SUBCODE APPROVAL			TCO				
[ ] CO [ ] CCO [ ] CA			Other				
Date:			Final				
Approved By:							

B. BUILDING CHARACTERISTICS

Use Group Present ____ Proposed ____
Constr. Class Present 2B Proposed ____
No. of Stories 1
Height of Structure 15 Ft.
Area—Largest Floor 15,475 Sq. Ft.
Total Bldg. Area/All Floors ~~71,000~~ Sq. Ft.
Volume of Structure 273,300 Cu. Ft.
Total Land Area Disturbed ____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ ____
2. Alteration $ 800
3. Total (1+2) $ ____

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
ENCLOSE AREA PARTY (BIRTHDAY)

TYPE OF WORK:
[ ] New Building
[ ] Addition
[✓] Alteration
[ ] Roofing
[ ] Siding
[✓] Other NON-BEARING WALL
[ ] Demolition
[ ] Miscellaneous
[ ] Fence ____ Height
[ ] Sign ____ Sq. Ft.
[ ] Pool
[ ] Elevator
[ ] Asbestos Abatement
[ ] Other ____

(Office Use Only)
FEE
$ ____

Administrative Surcharge $ ____
Paid [ ] Check # ____ Minimum Fee $ ____
Collected by: ____ TOTAL FEE $ ____

U.C.C. Form F-110A
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

BUILDING SUBCODE TECHNICAL SECTION

Date Received 7/27/92
Date Issued
Control #
Permit # 242-91

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

Block 701-12 Lot 1
Work Site Location 238-244 CHAMBERS BRIDGE RD
BRICK NJ 08724
Owner in Fee BRICK TOWN SHOPPING CENTER INC
Address P.O.B. 551
BRICK
Tele. (908) 477-5939
Contractor SAME
Address
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No. [redacted]

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS Type:	Failure	Failure	Approval	Initial
[ ] No Plans Req.			Footing				
[ ] All			Foundation				
[ ] Footing			Slab				
[ ] Foundation			Frame				
[ ] Frame			Insulation				
[ ] Other			Finishes:				
Joint Plan Review Required:			Energy				
[ ] Elec. [ ] Plumb. [ ] Fire			Mechanical				
SUBCODE APPROVAL			TCO				
[ ] CO [ ] CCO [ ] CA			Other				
Date:			Final				
Approved By:							

Dates (Month/Day)

B. BUILDING CHARACTERISTICS

Use Group Present ____ Proposed ____
Constr. Class Present 5B Proposed ____
No. of Stories 1
Height of Structure 15 Ft.
Area—Largest Floor 15,475 Sq. Ft.
Total Bldg. Area/All Floors ~~15,475~~ Sq. Ft.
Volume of Structure 273,300 Cu. Ft.
Total Land Area Disturbed ____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ ____
2. Alteration $ 800
3. Total (1+2) $ ____

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
ENCLOSE AREA (PARTY/BIRTHDAY)

TYPE OF WORK:
[ ] New Building
[ ] Addition
[X] Alteration
[ ] Roofing
[ ] Siding
[X] Other NON-BEARING WALL
[ ] Demolition
[ ] Miscellaneous
[ ] Fence ____ Height
[ ] Sign ____ Sq. Ft.
[ ] Pool
[ ] Elevator
[ ] Asbestos Abatement
[ ] Other ____

(Office Use Only)

FEE	$
Administrative Surcharge	$
Minimum Fee	$
TOTAL FEE	$

Paid [ ] Check # ____
Collected by: ____

U.C.C. Form F-110A
1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 7/27/92
Date Issued
Control #
Permit # 242-91

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

Block 701-12 Lot 1
Work Site Location 238-244 CLAMBOATS BRIDGE RD BRICK
Owner in Fee BRICK TOWN SKATING CTR
Address POB 554, BRICK NJ 08723
Tele. (908) 542-5891
Contractor STAMO
Address
Tele. ( )
Lic. No.
Federal Emp. No. or Social Security No. [redacted]

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [X] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 0 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date: 7/9/92
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
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.

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 ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	Sprinklers	46
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER		

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by TOTAL FEE $ 46

U.C.C. Form F-140A
1 White=Inspector Copy 2 Canary=Office Copy
3 Pink=Office Copy 4 Gold=Applicant Copy

Roller Rink Comm.
238-244 CHAMBERSBRIDGE RD

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 3/6/91
Date Issued
Control #
Permit # 241-91

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

Block ~~701.B06~~ 701-12 Lot 1
Work Site Location ~~244-250~~ Chambers Bridge Rd.
Brick
Owner in Fee JACK JEN INC
Address 97-105 Hwy 35
EATONTOWN, NJ
Tele. (201) 840-6464
Contractor Same
Address
Tele. (201) 8406464
Lic. No.
Federal Emp. No. _____ or Social Security No. _____

Sprinkler test 200 PSI for 2 Hrs. at ~~[illegible]~~

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed ~~[illegible]~~ 3A
Constr. Class. Present _____ Proposed ~~3B~~ 3
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location: ROOF TOP.
Total Est. Cost of Fire Prot. Work $ 500 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date: 2-21-91
Approved by: JE

SUBCODE APPROVAL:
[X] CO [ ] CCO [ ] CA
Date: 3-28-91
Approved by: JE

INSPECTIONS: Type:	Failure	Failure	Approval (Dates Month/Day)	Initial
Suppression Test			3-28-91	JE
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO Final			3-28-91	JE
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.

_____
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

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

Flammable Liquid Storage Tanks ( ) Capacity ____ Fuel ____
Combustible Liquid Storage Tanks ( ) Capacity ____ Fuel ____
L.P.G. Storage Tanks ( ) Capacity ____ Fuel ____
L.N.G. Storage Tanks ( ) Capacity ____ Fuel ____

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	133	95—
Dry Sprinkler Heads		
TOTAL		
Fire Extinguishers	7	
Smoke Detectors		
Heat Detectors		
TOTAL		
Emergency lights Battery Back up & Exit Signs Battery Back up	8	32—
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER Plan & Insp		40—
Administrative Surcharge		
Minimum Fee		
TOTAL FEE		167—

Paid [ ] Check # _____
Collected by _____

U.C.C. Form F-140A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

238-244 CHAMBERSBRIDGE RD

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 3/6/91
Date Issued
Control #
Permit # 241 91

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

Block ~~701.B06~~ 701-12 Lot 1
Work Site Location ~~244-250~~ Chambers Bridge Rd.
Brick
Owner in Fee TACK JON INC
Address 97-105 Hwy 35
EATONTOWN, NJ
Tele. (201) 840-6464
Contractor Same
Address
Tele. (201) 8406464
Lic. No.
Federal Emp. No. _____ or Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed ~~B~~ 3A
Constr. Class. Present _____ Proposed ~~3B~~ 3
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location: ROOF TOP
Total Est. Cost of Fire Prot. Work $ 500 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date: 2-21-91
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
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.

SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

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

Flammable Liquid Storage Tanks ( ) Capacity ____ Fuel ____
Combustible Liquid Storage Tanks ( ) Capacity ____ Fuel ____
L.P.G. Storage Tanks ( ) Capacity ____ Fuel ____
L.N.G. Storage Tanks ( ) Capacity ____ Fuel ____

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	~~133~~	95-
Dry Sprinkler Heads		
TOTAL		
Fire Extinguishers	7	
Smoke Detectors		
Heat Detectors		
TOTAL		32-
Emergency Lights Battery back up 8		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Exit Signs Battery Back up 4		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER Plan & Insp		40-
Administrative Surcharge	$	
Paid [ ] Check # _____ Minimum Fee	$	
Collected by _____ TOTAL FEE	$	167-

U.C.C. Form F-140A
1 White=Inspector Copy
2 Canary=Office Copy
3 Pink=Office Copy
4 Gold=Applicant Copy

238-244 CHAMBERS

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 3/6/91
Date Issued
Control #
Permit # 242-91

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

Block 701-12 Lot 1
Work Site Location ~~244-250~~ CHAMBERS BRICK RD
BRICK
Owner in Fee JACK & JEN INC. BRICK HOUSE TOWN
Address 97-105.

Tele. ( )
Contractor MARK HIBBARD
Address 1446 LAKEWOOD AVE
BRICK
Tele. ( ) 458-2986
Lic. No. #5568
Federal Emp. No. _____ or Social Security No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed A-3
Building Sewer Size 4"
Water Service Size 1 1/4"
Estimated Cost of Plumbing Work $ —

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[✓] Plumb. Plans Approved
Date: 2-19-91
Approved by: Jack

SUBCODE APPROVAL:
[✓] CO [ ] CCO [X] CA
Approved by: 3 Jack
Date: _____

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab			2-9-91	Jack
Rough			3-27-91	Jack
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
Solar X				
TCO			3-27-91	Jack

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

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
6	Water Closet	30
2	Urinal/Bidet	10
	Bath Tub	
4	Lavatory	20
	Shower	
2	Floor Drain	10
1	Sink 3 BAY	5
	Dishwasher	
1	Drinking Fountain	5—
	Washing Machine	
	Hose Bibb	
1	Gas Piping	15—
	Fuel Oil Piping	
2	Water Heater	10—
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	15—
	Gas Service Connection	
	Active Solar System	
	Other	10—

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL $ 130—

U.C.C. Form F-130A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

O/K for TCO (14 days) 3-27-91 — 4-10-91
Jack

3-22-91 OK for TCO > 14 days Jack
(Drinking fountain not in yet and
one bar faucet not working - part missing)

MARK HIBBARD
PLUMBING & HEATING
1446 Lakewood Ave.
BRICK, NEW JERSEY 08724
Phone 458-2986

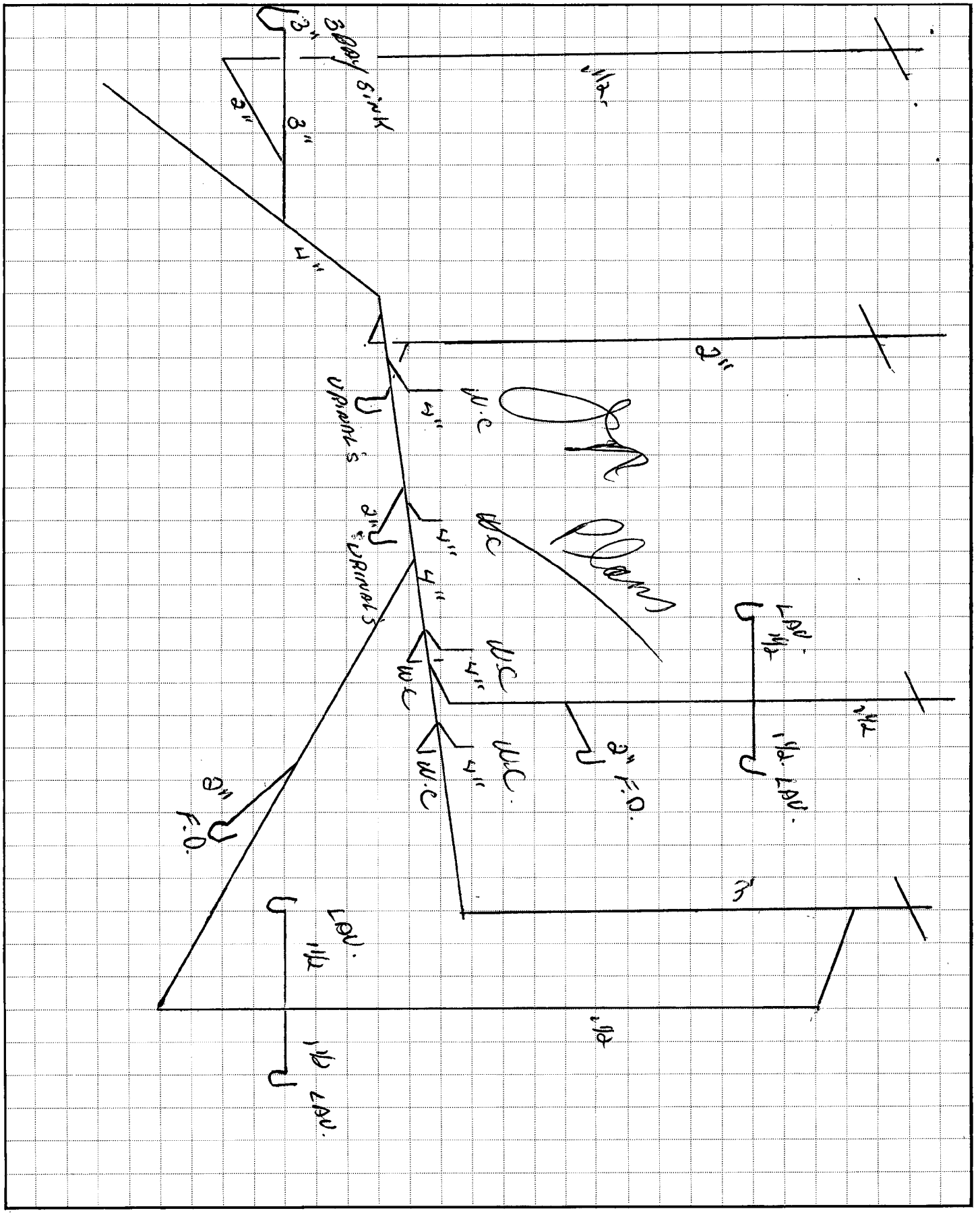
JOB _____

SHEET NO. _____ OF _____

CALCULATED BY _____ DATE _____

CHECKED BY _____ DATE _____

SCALE _____



MARK HIBBARD
PLUMBING & HEATING
1446 Lakewood Ave.
BRICK, NEW JERSEY 08724
Phone 458-2986

JOB _____

SHEET NO. _____ OF _____

CALCULATED BY _____ DATE _____

CHECKED BY _____ DATE _____

SCALE _____

6-	WATER CLOSETS - FLOSH TANK -	30
2-	URINAL - 3/4"	10
4-	LAVORTY	8
1-	SERVICE SINK - 3 BAY	3
		51

29 G.P.M
1 1/4

238-244 CHAMBERS ST.

PLUMBING 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 701-12 Lot 1
Work Site Location ~~244-250~~ CHAMBERS BRICK BD
Owner in Fee JACK-JEN INC. BRICK SHELF TOWN
Address 91-105
Tele, ( )
Contractor MARK HIBBARD
Address 1446 LAKEWOOD AVE BRICK
Tele, ( ) 458-2986
Lic. No. #5568
Federal Emp. No. _____ or Social Security No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed A-3
Building Sewer Size 4"
Water Service Size 1 1/4"
Estimated Cost of Plumbing Work $ —

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[✓] Plumb. Plans Approved
Date: 2-19-91
Approved by: [signature]

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved by: _____
Date: _____

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab			2-27-91	[signature]
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
Solar				
TCO				

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]
Signature-Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
6	Water Closet	30
2	Urinal/Bidet	10
	Bath Tub	
4	Lavatory	20
	Shower	
2	Floor Drain	10
1	Sink 3 BAY	5
	Dishwasher	
1	Drinking Fountain	5—
	Washing Machine	
	Hose Bibb	
1	Gas Piping	15—
	Fuel Oil Piping	
2	Water Heater	10—
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	15—
	Gas Service Connection	
	Active Solar System	
	Other	10—

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL $ 130—

U.C.C. Form F-130A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

313

TOTAL 13 toilets

7 - Drink water

1 - Sc sink

7 - lavs

400 m w

5 toilets 9

200

~~200~~

8

20)160

11 1 — B

238-244 CHAMBERS

PLUMBING SUBCODE TECHNICAL SECTION

Date Received 3/6/91-SS-S
Date Issued
Control #
Permit # 242-91

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

Block 701-12 Lot 1
Work Site Location ~~238-250~~ CHAMBERS BRIDGE RD BRICK
Owner in Fee JACK-DAN INC. BRICK TOWNSHIP
Address 91-105.
Tele. ( )
Contractor MARK HIBBARD
Address 1446 LAKEWOOD AVE BRICK
Tele. ( ) 458-2986
Lic. No. #5568
Federal Emp. No. _____ or Social Security No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed A-3 — 7.24.1
Building Sewer Size 4" (B)A
Water Service Size 1 1/4"
Estimated Cost of Plumbing Work $ —

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[✓] Plumb. Plans Approved
Date: 2-9-91
Approved by: Jack

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved by: _____
Date: _____

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab			2-9-91	Jack
Rough			3-27-91	Jack
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
Solar				
TCO			3-27-91	Jack

14 DAYS

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

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
6	Water Closet	30
2	Urinal/Bidet	10
	Bath Tub	
4	Lavatory	20
	Shower	
2	Floor Drain	10
1	Sink 3 BAY	5
	Dishwasher	
1	Drinking Fountain	5—
	Washing Machine	
	Hose Bibb	
1	Gas Piping	15—
	Fuel Oil Piping	
2	Water Heater	10—
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	15—
	Gas Service Connection	
	Active Solar System	
	Other	10—

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL $ 130 —

U.C.C. Form F-130A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

OK for TCO (14 days) 3-27-91 — 4-10-91

238-244 CHAMBERS

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Date Issued 3/6/91
Control #
Permit # 242-91

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

Block 701-12 Lot 1
Work Site Location ~~244-250~~ CHAMBERS BRIDGE RD
BRICK
Owner in Fee JACK- JAN INC. BRICK BOILER FORM.
Address 97-105.

Tele. ( )
Contractor MARK HIBBARD
Address 144 LAKEWOOD AVE
BRICK
Tele. ( ) 458-2986
Lic. No. #5968
Federal Emp. No. _____ or Social Security No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed A-3
Building Sewer Size 4"
Water Service Size 1 1/4"
Estimated Cost of Plumbing Work $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[✓] Plumb. Plans Approved
Date: 2-19-91
Approved by: JAH

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved by: _____
Date: _____

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
Solar				
TCO				

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

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
6	Water Closet	30
2	Urinal/Bidet	10
	Bath Tub	
4	Lavatory	20
	Shower	
2	Floor Drain	10
1	Sink 3 BAY	5
	Dishwasher	
1	Drinking Fountain	5 —
	Washing Machine	
	Hose Bibb	
1	Gas Piping	15 —
	Fuel Oil Piping	
2	Water Heater	10 —
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	15
	Gas Service Connection	
	Active Solar System	
	Other	10 —

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL $ 130 —

U.C.C. Form F-130A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

238-244 CHAMBERS ST

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Date Issued 3/6/91
Control #
Permit # 242-91

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

Block 701-12 Lot 1
Work Site Location ~~240~~ 238-244 CHAMBERS AVENUE NE
BUICK
Owner in Fee JACK JAN INC. 238-244 CHAMBERS AVENUE NE
Address 92-105.
Tele. ( )
Contractor MARK HIBBARD
Address 1454 LAMBERTON AVE
BUICK
Tele. ( ) 425 2986
Lic. No. #5268
Federal Emp. No. _____ or Social Security No [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed A-3
Building Sewer Size 4"
Water Service Size 1 1/4"
Estimated Cost of Plumbing Work $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[✓] Plumb. Plans Approved
Date: 2-19-91
Approved by: JAH

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved by: _____
Date: _____

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
Solar				
TCO				

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

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
6	Water Closet	30
2	Urinal/Bidet	10
	Bath Tub	
4	Lavatory	20
	Shower	
2	Floor Drain	10
1	Sink 3 BAY	5
	Dishwasher	
1	Drinking Fountain	5-
	Washing Machine	
	Hose Bibb	
1	Gas Piping	15-
	Fuel Oil Piping	
2	Water Heater	10-
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	15
	Gas Service Connection	
	Active Solar System	
	Other	10-

Administrative Surcharge	$ _____
Paid [ ] Check # _____ Minimum Fee	$ _____
Collected by: _____ TOTAL	$ 130-

U.C.C. Form F-130A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

1L

Schatz Bank

PLUMBING SUBCODE TECHNICAL SECTION

New Jersey Uniform Construction Code

Date Received 6/20/91
Date Issued
Control #
Permit # 789-91

Change of Plumber

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

Block 70.06 Lot 1
Work Site Location 224-228 Chambersbridge Rd
BACK BLDG.
Owner in Fee W + E Dev.
Address 317 Brick Blvd
Brick N.J.
Tele. ( )
Contractor WIGREN Plumbing + Heating
Address 241 Cherry Quay Rd.
Brick NJ. 08723
Tele. (908) 920-1695
Lic. No. 8568
Federal Emp. No. _____ or Social Security No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____
Water Service Size _____
Estimated Cost of Plumbing Work $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire
[ ] Plumb. Plans Approved
Date: 6-26-91
Approved by: JA

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved by: _____
Date: _____

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough			7-3-91	JA
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Final				
Solar				
TCO 7/5/91 JA (M)				

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

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

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

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
Collected by: _____ TOTAL $ _____

U.C.C. Form F-130A

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

Ready

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # 001374

Brick

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

Block 701-12 Lot 1
Work Site Location 250 CHAMBERS BRIDGE RD
BRICK, NJ 08724
Owner in Fee BRICK ROLLER SKATING CTR.
Address POB 554, BRICK, NJ 08724

Tele. (201) 477-5283
Contractor DRAW ELECTRIC
Address 1100 MAXIM SOUTHAMD RD
HOWELL, NJ
Tele. (201) 905 4500
Lic. No. 5897
Federal Emp. No. 222584121 or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

[ ] Reinspection [ ] Resale [X] Meter Set
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as ROLLER RINK Utility Co. JCP&L
Est. Cost of Elec. Work $ _____

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL:
[ ] CO [✓] CCO [ ] CA
Date: 3-27-91
Approved by: [illegible]-195

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temporary			3-14-91	#195
Constr. Serv.				
TCO				
Other				
Service				
Final			3-27-91	#195

Temp. Cut-in-Card Date Issued 3-14-91 #195
Final Cut-in-Card Date Issued 3-27-91
Line Dept. PP

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

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
32		Fixtures (1)	
40		Receptacles (2)	
28		Switches (3)	
110		Total 1 + 2 + 3	65-
		Range	
		Oven(s)	
		Surface Unit	
		Dishwasher	
		Garbage Disposal	
		Dryer	
4	7 TON	A/C Unit	12-
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
		Whirlpool/spa	
		Pool Bonding	
		Pool Filter Motor	
		Pool Lights	
		Water Heater(s)	
		Central heat:	
		oil, gas or elec.	
		Baseboard Heat Units	
		Thermostats	
		Heat Pump	
		Pump(s)	
		Motor Control Center/Sub Panels	
		Signs	
		Light Standards	
		Motors—Fractional H.P.	
		Motors—All Others	
		Transformers	
		Generators	
3	200	Service Entrance	24-
		Other	

'91 MAR 13 AM 9 53

Administrative Surcharge $ _____
Paid [ ] Check # 1028 Minimum Fee $ _____
Collected by: _____ TOTAL FEE $ 101.-

RF

pd by Brick Roller Skating Center POBx 554 Brick 0872

U.C.C. Form F-120A 1 White=Inspector Copy 2 Canary=Office Copy 3 Pink=Office Copy 4 Gold=Applicant Copy

INSPECTOR: George Rush

DATE: 3/26/91

JOB: Parkway Plaza SECTION:

TYPE OF WORK: final engineering

WEATHER: Sunny

LOCATION: Chamberbridge Rd

TEMPERATURE: 54°

BLOCK: 501.12 LOT: 1

ENGINEERING RECOMMENDATIONS FOR CERTIFICATE OF OCCUPANCY INSPECTION CHECK LIST

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway	✓	
2. Grading	✓	
3. Sidewalk	✓	
4. Road Pavement	1½" FABC	
5. Landscaping & Sodding	✓	
6. Clean-up Procedures	✓	
7. Note on going construction in immediate area		
8. Safety	✓	

COMMENTS REFERENCING ITEM NUMBER: Recommend final engineering

G.L.R.

RECOMMENDATIONS:

OK to R
3/27/91

☐ 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.

Ready

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

374

Brick

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

Block 761-12 Lot 55.1
Work Site Location 250 CHAMBERS BRIDGE RD
BRICK, NJ 08724
Owner in Fee BRICK ROLLER SKATING CTR.
Address POB 554, BRICK, NJ 08724

Tele. (201) 477-6283
Contractor ORCW ELECTRIC
Address 1100 MAXIM SOUTHAND RD
HOWELL, NJ
Tele. (201) 905 4500
Lic. No. 5897
Federal Emp. No. 222584121 or Social Security No. ____

B. ELECTRICAL CHARACTERISTICS

[ ] Reinspection [ ] Resale [X] Meter Set
[ ] Pole/Pad # ____ [ ] Temporary [ ] Other ____
Building Occupied as ROLLER RINK Utility Co. JCP&L
Est. Cost of Elec. Work $ ____

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date: ____
Approved by: ____

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temporary				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Line Dept.				

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

[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
52		Fixtures (1)	
40		Receptacles (2)	
28		Switches (3)	
140		Total 1 + 2 + 3	65-
		Range	
		Oven(s)	
		Surface Unit	
		Dishwasher	
		Garbage Disposal	
		Dryer	
4	7½ TON	A/C Unit	12-
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
		Whirlpool/spa	
		Pool Bonding	
		Pool Filter Motor	
		Pool Lights	
		Water Heater(s)	
		Central heat: oil, gas or elec.	
		Baseboard Heat Units	
		Thermostats	
		Heat Pump	
		Pump(s)	
		Motor Control Center/Sub Panels	
		Signs	
		Light Standards	
		Motors—Fractional H.P.	
		Motors—All Others	
		Transformers	
		Generators	
3	200	Service Entrance	24-
		Other	

Administrative Surcharge $ ____
Paid [ ] Check # 1024 Minimum Fee $ ____
Collected by: ____ TOTAL FEE $ 101-

RF

pd by Brick Roller Skating Ctr

U.C.C. Form F-120A

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

Date Received 1/29/91

701-12

BLOCK 701.B06 LOT 1 ADDRESS (SITE) 238-244 Chambers Bridge Rd. PERMIT NO. 242-91

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 244-250 Chambers Bridge Rd. 542-5891
2. Name of Owner in Fee: BRICK ROLLER SKATING CENTER INC Tel. (201) ~~840-6466~~
   Address: P.O. BOX 554 street BRICK municipality NJ 08724 zip code
3. Ownership in Fee: Public ____ Private X
4. Principal Contractor: Same Tel. (201) 542-5891 ~~840-6466~~
   Address ____
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Federal Emp. No. ____ Social Security No. ____
5. Architect or Engineer THEO. LEWIS JR. Tel. (201) 542-8883
   Address 227 Wyckoff Rd. EATONTOWN N.J.
6. Responsible Person In Charge of Work Richard Jones Tel. (201) 542-5891 542-7034

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 120-		
2. Electrical	130=		
3. Plumbing	167=		
4. Fire Protection			
5. Other			
6. Subtotal	$ 417-		
7. Less 20% for State Plan Review	5-		
8. Subtotal	$		
9. DCA Training Fee			
10. Subtotal	$		
11. Cert. of Occupancy	20		
12. Other			
13. TOTAL	$ 442-		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories 1	
2. Height of Structure 15 ft.	
3. Area—Largest Floor 15475 sq. ft.	
4. Building Area—All Floors 15475 sq. ft.	
5. Volume of Structure 273300 cu. ft.	
6. Construction Classification 3B	
7. Total Land Area Disturbed ____ sq. ft.	
8. Flood Hazard Zone ____	
9. Base Flood Elevation ____ ft.	
10. Wetlands yes ____ sq. ft. / no ____	
11. Fire Grading ____	
12. Max. Live Load ____	
13. Max. Occupancy Load ____	

II. PROPOSED WORK

	Est. Cost
1. ☐ Minor Work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	15000
4. ☐ Addition	500
5. ☒ Alteration	
6. ☒ Fire Protection	
7. ☒ Plumbing	
8. ☐ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS	15,500.

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval / Rejection	Re-viewer
WP	1/29/91		2/21/91	RK		
	2-21-91		2-21-91	JE	3-27-91 OKJE	
			2-19-91	JGH	TCO JH	
		elec.	3-27-91	RK		
Eng					3/27/91	

... DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

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:

INSPECTOR'S REPORT

FOR THE DAY/WEEK OF: MONDAY 7-22-91 INSPECTOR: Chussler 004030 D1-12

DATE	TIME	PERMIT NO.	BLOCK	LOT	OWNER/AGENT	CONSTRUCTION LOCATION	INSPECTION RESULTS: APPR	INSPECTION RESULTS: REJ	INSPECTION RESULTS: NOT DONE	COMMENTS
		20-	01	3	514 NORMANDY	FINAL	X			
		144-		10	12 RIVERSIDE DR	FINAL	X			
		194-	05	18	454 MAPLE DR	FRAME	X			
		93	125/126		12 BARNES DR	FOUNDATION	X			
		190-	06	11	ADAMSTON Rd	#1	X			
		323		8.01	369 Elm LA	FINAL			X	
		324-	812	7/8	37 CAPTAINS DR	FOUNDATION	X			
		400-	07	3	443 VALLEY WAY	FINAL/SIDING			X	
		673-	13	7/8	745 BARBERRY	FOUNDATION	X			
					305 6th.	INSULATION	X			
					Stop work 2 ohio					
						876 Roches - POSTED STOP WORK				

DEVELOPERS, INC.
317 BRICK BOULEVARD, SUITE J
P. O. BOX 1549
BRICKTOWN, N. J. 08723
(201) 477-2300

April 26, 1991

Township of Brick
401 Chambersbridge Road
Bricktown, NJ 08723

ATTN: Art Cierzo, Construction Official

RE: Parkwood Plaza
(Brick Roller Skating Center)

Dear Mr. Cierzo:

The purpose of this letter is to request a 30 day extension of our temporary C/O for the "Brick Roller Skating Center." As you will remember the temporary C/O was for the installation of glass panels in the front of the stores. We have ordered this work and we are currently waiting installation by our sub-contractor Wall Glass Co. This should take place very shortly.

Sincerely,

Vincent M. Gialanella
Vice President

VMG:kh

cc: Steven Fisch

HAND DELIVERED: E.T.

TOWNSHIP OF BRICK

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

Department of Engineering

Municipal Engineer
(908) 477-3000, Ext. 273

TO: Arthur Cierzo, Construction Official

FROM: Sean Kinnevy, Zoning Official SK

DATE: March 27, 1991

RE: Block 701.12, Lot 1
Chambers Bridge Road - Parkwood Plaza

Please be reminded that no certificate of occupancy, temporary or otherwise, is to be issued on the referenced property until the entire building is enclosed with doors and/or glass windows, as per the site plan exemption approval, a copy of which is attached.

SK/kb
cc: Brick Township Planning Board

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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

Department of Administration & Finance

Division of Inspections
A.J. Cierzo
Construction Official
(201) 477-3000, Ext. 260
Fax: (201) 920-4850

January 24, 1991

W & F Developers, Inc.
317 Brick Boulevard
Brick, New Jersey 08723

Subject: EX-R-6-12/90-W & F Developers for Parkwood Plaza/Chambers Bridge Road, Block 701.B06, Lot 1 for Change of Use-Approved January 4, 1991-Request for Amendment Received January 9, 1991

Dear Mr. Gianella,

The request for an amendment to the approval for the above exemption from site plan approval to include a snack bar and game room for 20 games was discussed by the Board at the January 16th Executive Session. After discussion and review by the Board's Attorneys, it has been determined that the request meets all the conditions of the conditional use and no variances were required by the approved site plan. The request, therefore, qualifies for site plan exemption. The Board has no objection to granting this amended request subject, however, to the following conditions:

1. There shall be a general clean-up of the site.

2. The balance of the building shall be enclosed with doors and/or windows in order to secure the building prior to the issuance of a C.O.

3. This amended approval to include the snack bar and game room shall be limited to twenty (20) games in accordance with the sketch, dated 1/1/91 (copy attached), submitted with the amended request.

4. All other necessary approvals shall be obtained.

Very truly yours,

Arthur J. Cierzo
Construction Official

cc: J. Kull, Planning Bd. Sec.
S. Kinnevy, Zoning Officer

TOWNSHIP OF BRICK

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

Department of Engineering

Municipal Engineer
(908) 477-3000, Ext. 273

March 6,1991

Mr. Vincent Gialanella
Vice President
W & F Developers, Inc.
317 Brick Boulevard
P.O. Box 1549
Brick, N.J. 08723

Re: Parkwood Plaza

Dear Mr. Gialanella:

In response to your letter of February 26,1991 to Mr. Frank Duddy relative to site improvements at Parkwood Plaza, we generally agree with your proposed plan, with the following exceptions.

The construction of final surface course paving shall be performed when all stores within the plaza are rented, or by September 1,1991, whichever date shall come first. Should all units within Parkwood Plaza not be rented by September 1,1991, or the surface course paving and final striping not be completed, the Township of Brick may arrange to have this work performed, with the cost of the work being deducted from the performance guarantee posted for this project. All temporary signs, pavement markings, fire lane striping,etc., shall be constructed and maintained in conformance with the requirements of the fire inspector and as shown on the approved plan during this interim period.

Very truly yours,

Henry Deibel, P.E.,P.P.
Municipal Engineer

HD/dea
cc:Scott MacFadden,Business Administrator
Arthur Cierzo,Construction Code Official
Frank Duddy,Supervising Road Inspector

CTURAL
DESIGN GROUP / ARCHITECTURE • INTERIOR DESIGN
392 MORRIS AVENUE, SUMMIT, NJ 07901 / 201 • 277-1915

February 27, 1991

Mr. V. Gialanella
V&F Developers Inc.
517 Brick Boulevard
Brick, N.J. 08723

RE: Bl. 701.12, Lot 1
238-244 Chambers Bridge Rd
/Roller Rink

Dear Mr. Gialanella;

This letter is to confirm our telephone conversation of 2/21/91, that our firm has been commissioned to provide the necessary drawings to convert from 3B to 3A construction at the above site.

We will need approximately two weeks to complete our drawings.

If you have any questions please feel free to call our office.

Very truly yours;

Don Zdanowski AIA

Architect

W & F DEVELOPERS, INC.
317 BRICK BOULEVARD
P.O.BOX 1549
BRICKTOWN, N.J. 08723

(201) 477-2300

LETTER OF TRANSMITTAL

DATE	JOB NO.
2/27/91	
ATTENTION: ART Cieryo	
RE: PARKWOOD PLAZA	

TO Twp of Brick
BUILDING DEPT.

WE ARE SENDING YOU ☑ Attached ☐ Under separate cover via Ed. the following items:

☐ Shop drawings ☐ Prints ☐ Plans ☐ Samples ☐ Specifications
☐ Copy of letter ☐ Change order ☐ _____

COPIES	DATE	NO.	DESCRIPTION
1	2/27/91		Copy of FAX letter ARCHITECTURAL DESIGN GROUP To Re DRAW PARKWOOD PLANS TO TYPE 3A per our DISCUSSION.

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 ☐ Return_____corrected prints
☐ For review and comment ☐ _____
☐ FOR BIDS DUE _____ 19_____ ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS _____

COPY TO _____

SIGNED: VINCENT M. GIANNELLA

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

THE ARCHITECTURAL DESIGN GROUP
392 MORRIS AVE. SUMMIT, N. J. 07901
TEL # 201 277-1915 FAX # 201 277-3942

FACSIMILE LEAD SHEET

MR. GIALANELLA DATE: 2-27-91

DON Z

RE: 238-244 CHAMBERS BRIDGE RD.

MESSAGE

SIGNED & SEALED LETTER IS IN MAIL TO YOUR OFFICE.

SENDING 2. PAGES INCLUDING THIS SHEET.

CALL US IMMEDIATLEY FOR RE-TRANSMISSION IF YOU DO NOT E ALL PAGES.

HAVE A NICE DAY!

DEVELOPERS, INC.
317 BRICK BOULEVARD, SUITE J
P. O. BOX 1549
BRICKTOWN, N. J. 08723
(201) 477-2300

February 26, 1991

Township of Brick
401 Chambersbridge Road
Bricktown, NJ 08723

ATTN: Frank Duddy, Engineering Department

RE: Parkwood Plaza (Roller Rink)

Dear Mr. Duddy:

As you know we are working on our first tenant fit up (Roller Rink) at this time. They are hoping to open within three (3) weeks. We, as landlords, know that we must make the site safe for the operation of the roller rink. We plan to do the following:

1. Install all (canope area) benches, rails, garbage cans, etc. per the approved drawings.
2. Install window wall frame (glass inserts to be temporarily replaced with plywood until store is rented) in all store fronts to secure building.
3. Repair/replace fence at rear of property (per plan).
4. Existing (base course) paving to remain as is with repairs done as needed. Final paving to be withheld until all stores are rented.
5. Signs, parking & fire lanes to be marked on existing paving to specifications on approved plans as agreed to by fire inspector, with the understanding that upon final paving (see item #4) all lines to be remarked.
6. All construction debris to be removed from site and the site shall be safe for the public prior to roller rink opening.

I trust the above covers the items required of us prior to roller rink opening. Please acknowledge by signing and returning copy to me.

Sincerely,

Vincent M. Gialanella
Vice President

cc: Art Cierzo
Steven Fisch

Engineering Department Brick Township

TOWNSHIP OF BRICK

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

Department of Administration & Finance

Division of Inspections
A.J. Cierzo
Construction Official
(201) 477-3000, Ext 260
Fax: (201) 920-4850

February 21, 1991

Mr. V. Gialanella
W & F Developers, Inc.
317 Brick Boulevard
Brick, New Jersey

Re: Bl. 701.12, Lot 1
238-244 Chambers Bridge Road/Roller Rink

Dear Mr. Gialanella,

In reference to the above referenced site: The application for same, does not mention the specific type of construction. By Code your plan would be required to be 3A type of Construction. Analyzation of plan reflects it to be 3B type of Construction.

Mr. Gialanella, of W & F has agreed to submit a letter within 7 business days that a licensed Architect or Engineer will submit the corrected plan to reflect a 3A type of Construction. The letter must be signed and sealed by an Architect, proving that he has been hired or commissioned for this purpose. If this is not received in the time requested the job will be stopped.

We are at this time releasing a portion (15,000 Sq. Ft) of the Roller Rink, by way of a Risk Permit, in order for you to proceed with your interior alteration.

If you have any further questions, please feel free to contact me.

Very truly yours,

Arthur J. Cierzo
Construction Official

Ray Korkowski
Subcode Official

AJC/tl

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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

Stevan J. Zboyan, Mayor

Township Council:
Andrew R. Ciesla, President
Albert Chrobocinski
Helen Fayad
Lee Hartman
Thomas G. Maiorine
Warren H. Wolf
David W. Wolfe

Department of Administration & Finance

Division of Inspections
A.J. Cierzo
Construction Official
(201) 477-3000, Ext. 260
Fax: (201) 920-4850

February 21, 1991

Mr. V. Gialanella
W & F Developers, Inc.
317 Brick Boulevard
Brick, New Jersey

Re: Bl. 701.12, Lot 1
238-244 Chambers Bridge Road/Roller Rink

Dear Mr. Gialanella,

In reference to the above referenced site: The application for same, does not mention the specific type of construction. By Code your plan would be required to be 3A type of Construction. Analyzation of plan reflects it to be 3B type of Construction.

Mr. Gialanella, of W & F has agreed to submit a letter within 7 business days that a licensed Architect or Engineer will submit the corrected plan to reflect a 3A type of Construction. The letter must be signed and sealed by an Architect, proving that he has been hired or commissioned for this purpose. If this is not received in the time requested the job will be stopped.

We are at this time releasing a portion (15,000 Sq. Ft) of the Roller Rink, by way of a Risk Permit, in order for you to proceed with your interior alteration.

If you have any further questions, please feel free to contact me.

Very truly yours,

Arthur J. Cierzo
Construction Official

Ray Korkowski
Subcode Official

AJC/tl

PRINCETON COMMONS
P.O. BOX 1028
BRICKTOWN, N.J. 08723

Attenion: Art Cierzo, Construction Official
Township of Brick
401 Chambers BridgeRoad
Bricktown, N. J. 08723

W & F DEVELOPERS, INC.
P. O. Box 1549
Brick, N. J. 08723

February 19, 1991

Township of Brick
401 Chambers Bridge Road
Bricktown, N. J. 08723

Attn: Art Cierzo, Construction Official

Re: Parkwood Plaza/ Retail Stores

Dear Mr. Cierzo:

The purpose of this letter is to confirm our conversation in regards to the construction type of the retail store area at Parkwood Plaza. It was agreed that all future construction at the retail stores would be of a Class 3A.

I trust this completes our agreement.

Sincerely,

W & F DEVELOPERS, INC.

Vincent M. Gialanella
Vice President

VMG/bag
CC: Building Inspector
Mike DeSalvo

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P. O. Box 1549
Brick, N. J. 08723

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TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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

Department of Administration & Finance

Division of Inspections
A.J. Cierzo
Construction Official
(201) 477-3000, Ext. 260
Fax: (201) 920-4850

January 24, 1991

W & F Developers, Inc.
317 Brick Boulevard
Brick, New Jersey 08723

Subject: EX-R-6-12/90-W & F Developers for Parkwood Plaza/Chambers Bridge Road, Block 701.B06, Lot 1 for Change of Use-Approved January 4, 1991-Request for Amendment Received January 9, 1991

Dear Mr. Gianella,

The request for an amendment to the approval for the above exemption from site plan approval to include a snack bar and game room for 20 games was discussed by the Board at the January 16th Executive Session. After discussion and review by the Board's Attorneys, it has been determined that the request meets all the conditions of the conditional use and no variances were required by the approved site plan. The request, therefore, qualifies for site plan exemption. The Board has no objection to granting this amended request subject, however, to the following conditions:

1. There shall be a general clean-up of the site.

2. The balance of the building shall be enclosed with doors and/or windows in order to secure the building prior to the issuance of a C.O.

3. This amended approval to include the snack bar and game room shall be limited to twenty (20) games in accordance with the sketch, dated 1/1/91 (copy attached), submitted with the amended request.

4. All other necessary approvals shall be obtained.

Very truly yours,

Arthur J. Cierzo

Arthur J. Cierzo
Construction Official

cc: J. Kull, Planning Bd. Sec.
S. Kinnevy, Zoning Officer

TOWNSHIP OF BRICK

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

Planning Board
(908) 477-3000, Ext. 280
Fax: (908) 920-4850

DATE: January 24, 1991

TO: Arthur J. Cierzo, Construction Official

FROM: Planning Board, Victor Cantillo, Chairman

SUBJECT: EX-R-6-12/90-W & F Developers for Parkwood Plaza/ Chambers Bridge Road, Block 701.B06, Lot 1 for Change of Use-Approved January 4, 1991-Request for Amendment Received January 9, 1991

The request for an amendment to the approval for the above exemption from site plan approval to include a snack bar and game room for 20 games was discussed by the Board at the January 16th Executive Session. After discussion and review by the Board's attorneys, it has been determined that the request meets all the conditions of the conditional use and no variances were required by the approved site plan. The request, therefore, qualifies for site plan exemption. Board has no objection to granting this amended request subject, however, to the following conditions:

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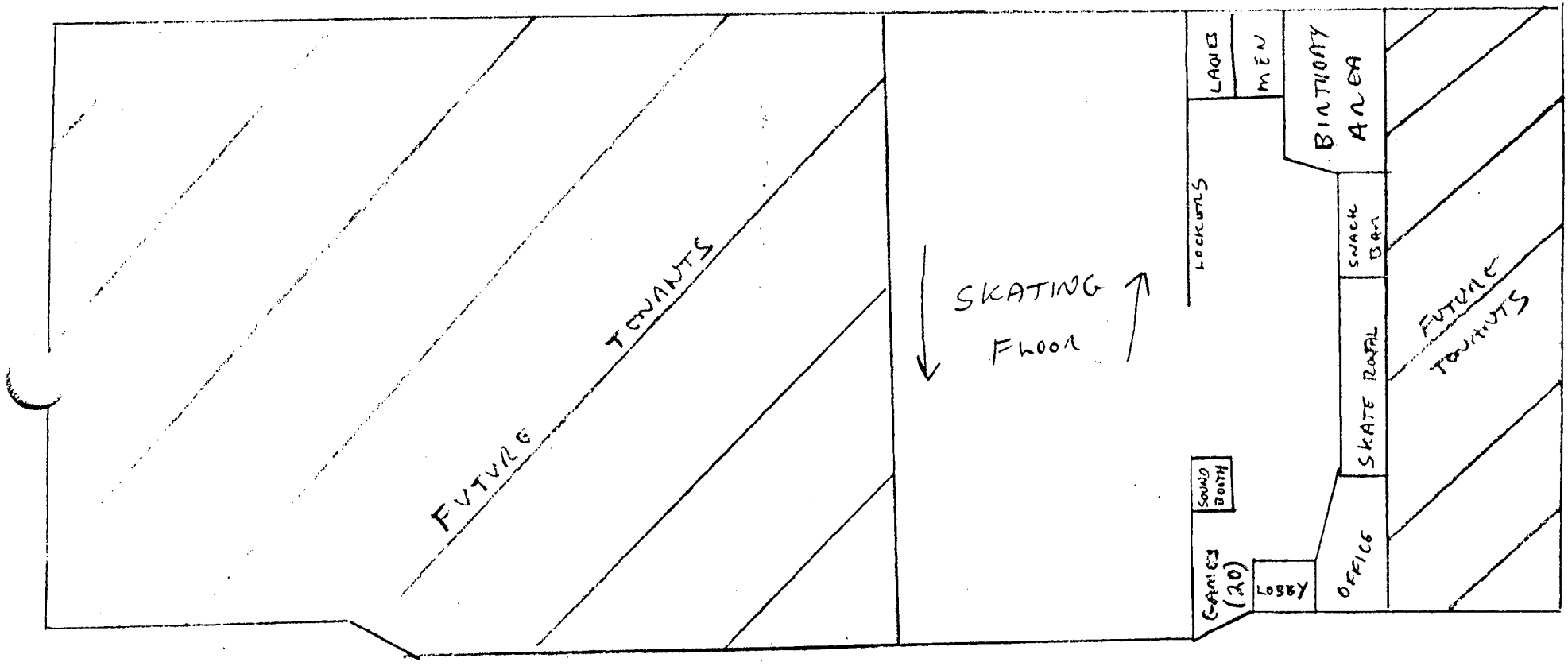
4. All other necessary approvals shall be obtained.

Att.

ejk

cc: Kenneth B. Fitzsimmons, Esq.
Sean Kinnevy, Zoning Officer



ROUGH LAYOUT

BRICK ROLLER SKATING

CENTER

APPROX 17,000 S/F ±

1/1/91

CHAMBERS BRIDGE ROAD

TOWNSHIP OF BRICK

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

Planning Board
(201) 477-3000, Ext. 280
Fax: (201) 920-4850

DATE: January 4, 1991

TO: Arthur J. Cierzo, Construction Official

FROM: Planning Board, Victor Cantillo, Chairman

SUBJECT: EX-R-6-12/90-W & F Developers for Parkwood Plaza/ Chambers Bridge Road, Block 701.B06, Lot 1 for Change of Use-Received December 10, 1990

The above request for exemption from site plan approval has been reviewed and the attached report issued. Based upon the report and the discussion at the January 2nd Executive Session, the Planning Board has no objection to granting this request subject, however, to the following conditions:

1. There shall be a general clean-up of the site

2. The balance of the building shall be enclosed with doors and/or windows in order to secure the building prior to the issuance of a C.O.

3. This approval is only for the roller skating rink. Any other use will require additional approvals.

4. All other necessary approvals shall be obtained.

Att.

ejk

cc: Kenneth B. Fitzsimmons, Esq.
Sean Kinnevy, Zoning Officer

TOWNSHIP OF BRICK

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

Department of Engineering

Municipal Engineer
(201) 477-3000, Ext. 273

Richard E. Garnett, L.S., P.P.
Municipal Surveyor/Planner
(201) 477-3000, Ext. 277
Fax: (201) 320-4850

TO: Brick Township Planning Board

FROM: Richard E. Garnett, L.S., P.P.

DATE: 12-11-90

RE: Site Plan exemption request
Ex-R-60-12/90
Change of Use
W & F Developers "Parkwood Plaza"

We are in receipt of an application for the above referenced request and in reviewing same offer the following for your consideration.

Existing Conditions

Subject property is a 7.42 acre site containing a 1 story 58,000 S.F. unoccupied retail center, and an occupied 2 story 10,384 S.F. office building, located at the intersection of Chambers Bridge Road and Sprucewood Roads. Current zoning is B-2.

Proposal

Applicant proposes to change the use of 17,000 S.F. of retail space to a Roller Rink. Indoor skateboarding will be allowed at certain times.

An ordinance amendment is pending before Council which will allow Roller Rinks in the B-3 & B-2 zones. The ordinance amendment also addresses parking requirements and operating hours. The second reading takes place 12-31-90.

Ordinance Compliance

Item	Ordinance	Proposed
Use	Must be permitted/ conforming	* Permitted/Conforming
Variance	None allowed	None
Parking	No increase	* No increase
Internal Driveways/ Fire Lanes	No relocation/ alteration	No relocation alteration
Buffer Zones	No reduction/ no additional required	No reduction no additional required
Landscaping	No reducation	No reducation
Operating	No increase allowed Site Plan states 8am-10pm	* 8am-10pm weekdays 8am-12am weekdays and School Holidays

* Proposed ordinance amendment provides for these non-conformities.

Comments

Based on the above, pending final adoption of amended ordinance, site plan exemption may be granted.

REG/kmd/kb

TOWNSHIP OF BRICK
LAND DEVELOPMENT APPLICATION

EXEMPTION FROM SITE PLAN REQUIREMENT

Application No. EX-R-60 - 12/90

Date of Submission 12 - 10 - 90
Month Day Year

Filing Fee $ 300.00

For Your Information

A. APPLICANT W & F Developers Inc
(Name)
317 Brick Blvd (P.O. Box 1549) 477-2300
(Address) (Telephone)
Bricktown NJ 08723
(City & State) (Zip)

(If not owner set forth ownership interest contract purchaser, etc., & attach copy of document following same).

OWNER Same
(Name)

(Address) (Telephone)

(City & Street) (Zip)

B. DESCRIPTION OF APPLICATION:

Change of Use

Retail to Roller Rink

Hours of Operation

8AM - 10PM Weekdays

8AM - 12PM Weekends & School Holidays

DEC 10 1990

BRICK TWP. PLANNING BOARD

C. PREVIOUS APPROVALS:

i) Site Plan ✓ Date: 5/87 ____ ____
Month Day Year

Case No: 1629-SP Resolution No: —

ii) Exemption: ____ Date: ____ ____ ____
Month Day Year

D. LOCATION: PARKWOOD PLAZA / CRANBERRY BROOK ROAD
Street Address

41B 701-B06 1
Tax Map# Block/s Lot/s

E. AFFIDAVIT OF APPLICANT:

STATE OF NEW JERSEY

COUNTY OF OCEAN

VINCENT GIALANELLA of full age being duly sworn according to law, on oath deposes and says, that all of the above statements and the statements contained in the papers submitted herewith are true, and that all conditions of C.44A-105 are met.

Sworn and Subscribed to:
before me this 10 day:
of Dec, 1990:

Steven Fisch Attorney at Law

(Applicant to sign here)

NOTE: Plans, sketches and surveys submitted in connection with the above are to contain the following, to properly evaluate the application as outlined in C.44A-105:

-Square footage of the property in question
-Location & square footage of all structures on site
-Location & dimensions of all driveways and parking areas
-Existing fire lanes
-Existing & proposed landscaped areas
-Zone in which property is located
-Schedule of zoning requirements compared to those provided

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

2/21/91

UNIFORM CONSTRUCTION CODE
Chapter 23, Title 5

Approval of Part
5.23-2.16 (g)

OWNER/AGENT W&F Developers INC

ADDRESS (PO Box 1549) 317 BRICK BLVD

TOWN BRICKTOWN NJ ZIP 08723

BLOCK 701-12 LOT 1

☐ FOOTING

☐ FOUNDATION

☒ OTHER Tenent Fitup

OWNER/AGENT PROCEED AT OWN RISK ☐

OWNER/AGENT [signature]
VINCENT GIALANELLA
V.P. W&F Developers

BUILDING SUB-CODE OFFICIAL [signature]

CONSTRUCTION OFFICIAL [signature]

Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

Date 2/21/91

Subject: PARKWOOD PLAZA / Roller Rink

Block _____ Lot _____

AFFIDAVIT:

I VINCENT M. GIBLANELLA hereby request a temporary building permit to proceed with construction of footings and foundation (only) on the subject property at my own risk. I understand and acknowledge that the issuance of the full building permit is subject to further approvals as normally required. I understand that adjustments in the foundation and first floor elevation may be necessary in order to comply with the approved plot plan grading. The below department approvals are required prior to issuance of a temporary building permit.

Applicant 2/21/91
Date

Henry Hubel Jr. (Fxd) 2/21/91
Twp. Engineer or Ass't. Engineer Date

Sean Kinney 2/21/91
Zoning Officer Date
Zoning Department

2/21/91
Building Inspector Date
Building Department

TOWNSHIP OF BRICK

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

Department of Engineering

Municipal Engineer
(908) 477-3000, Ext. 273

TO: Arthur Cierzo, Construction Official

FROM: Sean Kinnevy, Zoning Official SK

DATE: March 27, 1991

RE: Block 701.12, Lot 1
Chambers Bridge Road - Parkwood Plaza

Please be reminded that no certificate of occupancy, temporary or otherwise, is to be issued on the referenced property until the entire building is enclosed with doors and/or glass windows, as per the site plan exemption approval, a copy of which is attached.

SK/kb
cc: Brick Township Planning Board

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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

Department of Administration & Finance

Division of Inspections
A.J. Cierzo
Construction Official
(201) 477-3000, Ext. 260
Fax: (201) 920-4850

January 24, 1991

W & F Developers, Inc.
317 Brick Boulevard
Brick, New Jersey 08723

Subject: EX-R-6-12/90-W & F Developers for Parkwood Plaza/Chambers Bridge Road, Block 701.B06, Lot 1 for Change of Use-Approved January 4, 1991-Request for Amendment Received January 9, 1991

Dear Mr. Gianella,

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4. All other necessary approvals shall be obtained.

Very truly yours,

Arthur J. Cierzo
Construction Official

cc: J. Kull, Planning Bd. Sec.
S. Kinnevy, Zoning Officer

SIZING FOR WATER AND SEWER SERVICES

Property Owner _____ Date 2-19-91

Property Address 244-250 Chambersbridge Rd. Block 701-12 Lot 1

Zoning _____ Use Group _____

Contractor HIBBARD License No. Registration 5968

Water Main Size _____ Water Pressure _____ Sewer Main Size _____

Plumbing Fixtures	Number	(sfu) Water Units		(dfu) Drainage Units	
1. Water Closet	6	(5)	30	( )	
2. Lavatory	4	(2)	8	( )	
3. Bath Tub		( )		( )	
4. Shower Stall		( )		( )	
5. Kitchen Sink	1	(4)	4	( )	
6. Service Sink		( )		( )	
7. Laundry Tray		( )		( )	
8. Dishwasher		( )		( )	
9. Washing Machine		( )		( )	
10. Urinal	2	(5)	10	( )	
11. Floor Drain		( )		( )	
12. Drinking Fountain	1	(.25)	.25	( )	
13. Air Conditioner (water cooled)		( )		( )	
14. Dental Unit		( )		( )	
15. Lawn Sprinkler No. of Heads		( )		( )	
16. Fire Sprinkler No. of Heads		( )		( )	
17. _____		( )		( )	
18. _____		( )		( )	
Total			52		

Gallons per minute 30

Size of Service 1¼"

Date: 2-19-91 Approved: _____
Brick Township Plumbing Inspector

Conservation Program

6 Mott Place, CN 2191, Toms River, NJ 08754
Telephone: 201-244-7048

REPORT OF COMPLIANCE

TO: CONSTRUCTION CODE OFFICIAL MUNICIPALITY: BRICK TOWNSHIP

PROJECT: Parkwood Plaza - ALL UNITS SCD NO.: 1910

BLOCK NO.(s) 701 - B06 LOT NO.(s) 1

Complete Compliance ☒ Temporary Compliance ☐

BLOCK NO.	LOT NO.	CONDITIONS
		The applicant shall remain responsible for proper stabilization of all areas until final bond release by the municipality.
		SOD MUST REMAIN VIABLE

Total Fees Due: $ X

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:

AUTHORIZED DISTRICT SIGNATURE: Karen Reynolds

Date: 8/8/89

Distribution: White-Township Canary-Applicant Pink-District

A468

~~Block~~ Block 70/B06
Lot 1

244-250 ✓ Mark - no gas

252-254 ✓ exstyystores

224-228 ✓ skateboard - no gas

230-232 ✓ spring - approved

234 - no inspections ✓

236-238 - okay

240-242 ✓ not okay

224-228.
234, 240, 242
244-250

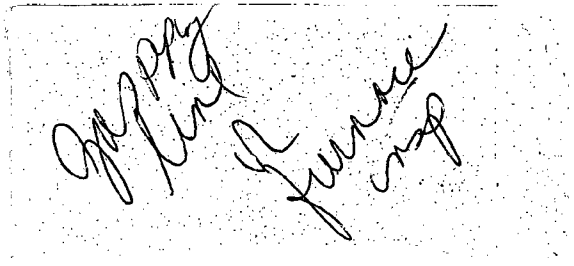
Skateboard - 920-6000

Roller Rink - 477-5283

gas piping line or
furnace inspector

In review of our files
there is no permit of
[illegible]

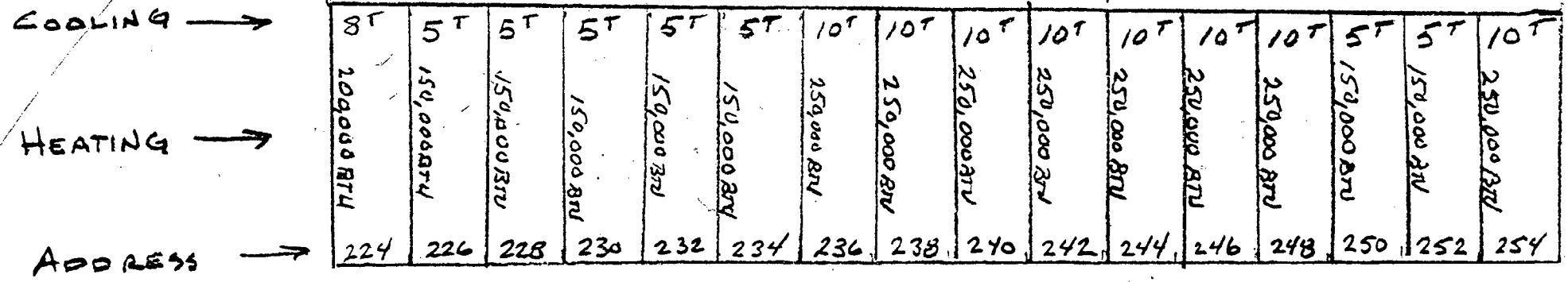
pl fill out CPA of
the above —



16-Unit TH

SKATE BD ?

ROLL SKATE ?



230-232 - piping - approved - 12/6/91
236-238 - okay
252-254 empty stores

Art, please call if you have any questions. Thank you, Richard DiSalvo
892-1300

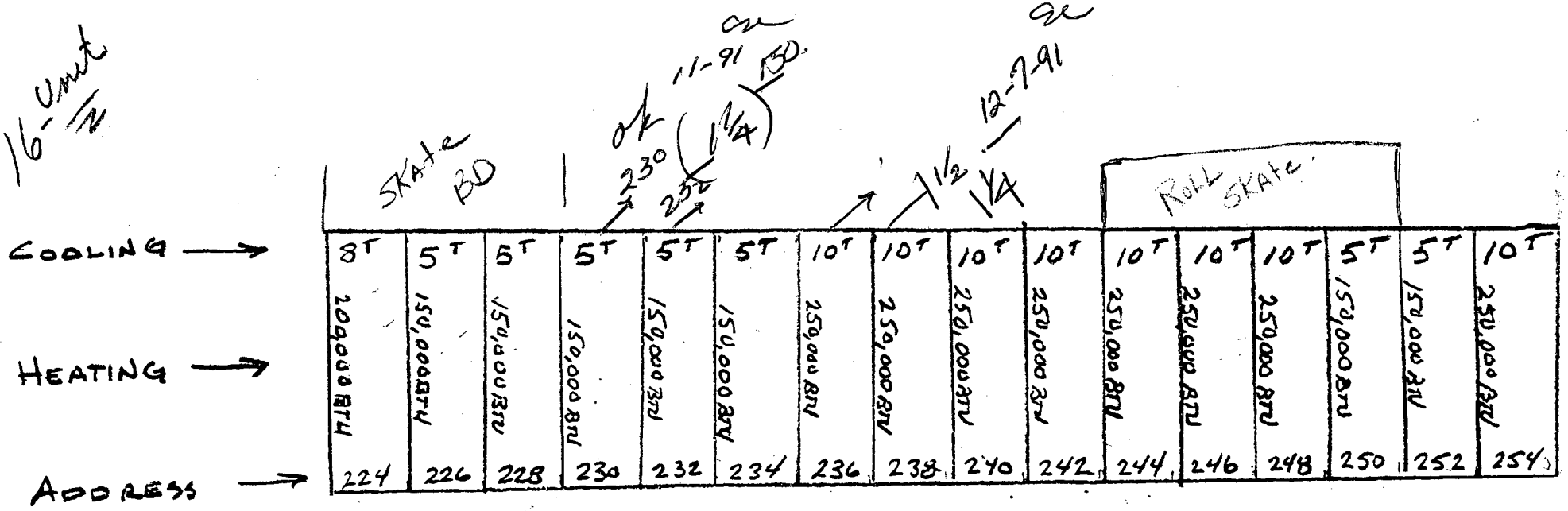
901-8876

295-2953

RECEIVED
NOV 15 1991
DIV. OF INSPECTION

PARKWOOD PLAZA RETAIL STORES
224-254 CHAMBERS BRIDGE ROAD
BRICK, NEW JERSEY

16-Unit TH



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892-1300

901-8876

295-2953

RECEIVED
NOV 15 1991
DIV. OF INSPECTION

PARKWOOD PLAZA RETAIL STORES
224-254 CHAMBERS BRIDGE ROAD
BRICK, NEW JERSEY