BLOCK 702 LOT 30 QUALIFICATION CODE _____ ADDRESS (SITE) 774 + 780 Route 70 PERMIT NO. 13-1689

CONSTRUCTION PERMIT APPLICATION

C-13-000024

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

I. IDENTIFICATION

1. Proposed Work Site at: Old Food Town Site 774 + 780 Route 70
2. Name of Owner in Fee: Twp of Brick
   Tel. (732) 262-1058 e-mail _____
   Address 401 Chambers Bridge Rd, Brick (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Rostan Solutions Tel. (713) 823-2002
   Address 4318 No. 56th St. e-mail _____
   Tampa, FL 33610
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. _____ FAX: ( ) _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____ ✓
6. Responsible Person in Charge once Work has Begun _____
   Tel. ( ) _____ FAX: ( ) _____

V. FEE SUMMARY (for office use only)

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

Overpaid

VI. BUILDING/SITE CHARACTERISTICS

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

IIa. PROPOSED WORK

Steve Dickel - Grant Mgr. sdickel@rostansolutions.com #251-455-6707

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

IIb. SUBCODES

(Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☑ Building					04/19/13	RLK			
☑ Electrical					4-9-13	JJ			
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units:

	Total Units	Income-restricted
Gained, Sale		
Gained, Rental		
Lost, Sale		
Lost, Rental		

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:

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

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

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

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

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/29/2013
Control Number C-13-002034
Permit Number 13-1689
Permit Issue Date 04/19/2013
Certificate Number 13-1689

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 774 & 780 ROUTE 70 (Old Foodtown Site) Brick Township, NJ Block: 702 Lot: 30 Qual:

Owner in Fee: TOWNSHIP OF BRICK

Owner Address: 401 CHAMBERS BRIDGE RD BRICK NJ 08723

Telephone:

Contractor Rostan Solutions

Address 4318 No. 56th Street Tampa FL 33610

Telephone: (713) 823-2002 Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: Trailer

Certificate Comments:

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

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

☐ **Certificate of Continued Occupancy**
This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

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

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

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

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 04/29/2013 U.C.C. F260 (rev. 08/05)

CONSTRUCTION PERMIT

Date Issued 04/19/2013
Control # C-13-002034
Permit # 13-1689

IDENTIFICATION Block: 702 Lot: 30 Qualifier
Work Site Location: 774 & 780 ROUTE 70 (Old Foodtown Site) Brick Township, NJ
Owner in Fee TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD BRICK NJ 08723
Telephone:

Contractor Rostan Solutions
Address 4318 No. 56th Street Tampa FL 33610
Telephone: (713) 823-2002
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
Trailer

PAYMENTS (Office Use Only)

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

Note: If constuction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $2

Daniel J. Newman Jr. 4/19/13
Construction Official Date

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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

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

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

- [ ] A complete copy of released plans must be kept on the job site.

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

DR# 328701573

Date Received 4/19/13
Control # 13-1689

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

Block 702 Lot 30 Qualification Code

Work Site Location Old Fool Farm site
3747360 Rt 70, Buck, NJ 08723

Owner in Fee: Twp. of Beidl

Tel. 732 262-1058 e-mail

Address 401 Chambers bridge Rd, Brick, NJ 08723
street municipality zip code

Contractor: Bahr & Sons Electrical Contractors Inc. Tel. (732) 269-5333

Address 82 Shorewood Drive, e-mail info@bahrandsons.com
Bayville, New Jersey, 08721

Contractor License No. 11244 Exp. Date

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

Federal Emp. ID No. 223152770 FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ Exempt

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[✓] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 4-22-13
Approved by: JT

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 4-23-13
Approved by: JT

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			4-22-13	DT
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here:

Print name here: Joseph W Bahr Jr

[X] Licensed Elec. Contractor [ ] Certified Landscape Irrigation Contr. [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
200A Service

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	200	AMP Service	
1	100	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1		Office Trailer	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$

U.C.C. F120 (rev. 11/09)
Internet version

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

Brick Township
Building Department (732) 262-1030

DR\UR # 328-701-573

CUT-IN-CARD

MUNICIPALITY Brick Township

LOCATION 774 & 780 ROUTE 70 UTILITY CO

(Old Foodtown Site) Brick Township, NJ BLK 702 LOT 30

OWNER TOWNSHIP OF BRICK OCCUPANT TOWNSHIP OF BRICK

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

☑ FINAL ☐ TEMPORARY This approval void after ___ days

DESCRIPTION OF SERVICE trailer service

INSTALLED BY BAHR & SONS LICENSE NO 11244

DATE 04/08/2013 PERMIT # INSPECTOR Douglas Donohue

☐ FAXED IN

Lic. No: 008914

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 13-1689
Control #
Date Issued 4/19/13
Permit #

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

Block 702 Lot 30 Qualification Code ______

Work Site Location OLD Food Town Site

Owner in Fee: Twp of Brick

Tel. (732) 262-1058 e-mail ______

Address 401 Chambers Bridge Rd, Brick, NJ 08723 (street / municipality / zip code)

Contractor: Rostan Solutions Tel. (713) 823-2002

Address 4318 N 56th ST e-mail [illegible].mays@[illegible]-us.com

Tampa, Fl 33610

Contractor License No. or Builder Registration No. ______ Exp. Date ______

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

Federal Emp. ID No. 20-5425053 FAX: ( ) ______

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.

Sign here: [signature]

Print name here: ______

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TRAiler

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	04/19/13	[initials]
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:

[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 04/19/13
Approved by: [initials]

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 04/25/13
Approved by: [initials]

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			4-23-13	G.P.
Barrier-Free				

(Dates (Month/Day) apply to the Failure, Failure and Approval columns.)

B. BUILDING CHARACTERISTICS

Use Group Present ______ Proposed ______

No. of Stories ______

Height of Structure ______ ft.

Area — Largest Floor ______ sq. ft.

New Bldg. Area/All Floors ______ sq. ft.

Volume of New Structure ______ cu. ft.

Max. Live Load ______

Max. Occupancy Load ______

Constr. Class Present ______ Proposed ______

If Industrialized Building:
State Approved ______ HUD ______

Est. Cost of Bldg. Work:
1. New Bldg. $ ______
2. Rehabilitation $ ______
3. Total (1+ 2) $ 100-

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence ______ Height (exceeds 6')
- [ ] Sign ______ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall ______ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other ______
- [ ] Demolition

FEE (Office Use Only)
$ ______

Administrative Surcharge $ ______
Minimum Fee $ ______
State Permit Surcharge Fee $ ______
TOTAL FEE $ ______

U.C.C. F110
(rev. 11/09)

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

From: "Mays, Travis" <Travis.Mays@arcadis-us.com>
Subject: FW: Anchor Literature
Date: Wed, April 17, 2013 8:41 am
To: "steve@lacatteam.com" <steve@lacatteam.com>

From: Battinieri, Matthew [/promail/src/compose.php?send_to=Matthew.Battinieri@modspace.com]
Sent: Wednesday, April 17, 2013 10:27 AM
To: Mays, Travis
Subject: Anchor Literature

Travis,

Here is some general information on the anchors.

Hope this helps.

Thanks,

Matt Battinieri

Modular Space Corporation

1200 Swedesford Road

Berwyn, PA 19312

P- 866-322-0120 ext 20910

D- 610-232-0910

F- 610-232-1210

www.modspace.com

See the exclusive promotions for ModSpace customers

From: Nguyen, Alex
Sent: Thursday, July 12, 2012 5:02 PM
To: Battinieri, Matthew
Subject:

Standard is the cross drive anchors

Alexander Nguyen

ModSpace

Territory Sales Manager

4255 Carbon Rd.

Irving, Tx 75038

U.S.

T 800-523-7918

972-252-2001

C 214-564-8779

F 972-252-2201

alex.nguyen@modspace.com

www.modspace.com

Modular Space Corporation

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INSTALLATION INSTRUCTIONS

FIRST CHECK FOR UNDERGROUND UTILITY LOCATION:

EZDH EARTH AUGERS

1. SEE DETAIL THIS BOOKLET FOR INSTALLATION INSTRUCTIONS.

EARTH AUGERS

1. INSTALL AUGERS INTO SOIL WITH CONSTANT DOWNWARD PRESSURE TO MINIMIZE SOIL DISTURBANCE LEAVING APPROX. 12" OF SHAFT EXPOSED.
2. INSTALL STABILIZER PLATE - DRIVE FLUSH WITH GROUND SURFACE.
3. COMPLETE TURNING AUGER INTO GROUND UNTIL AUGER HEAD IS FLUSH WITH GROUND SURFACE AND TOP OF STABILIZER PLATE.

CROSS DRIVE ANCHORS

1. CROSS DRIVES ARE USED WHERE HARD ROCKY SOIL OCCURS. IF THE GROUND SURFACE IS OTHER THAN ROCK OR MINIMUM 2" ASPHALT, INSTALL MMA-SD2 STABILZER PLATE, OR PLACE 12"x12"x12" DEEP CONCRETE.

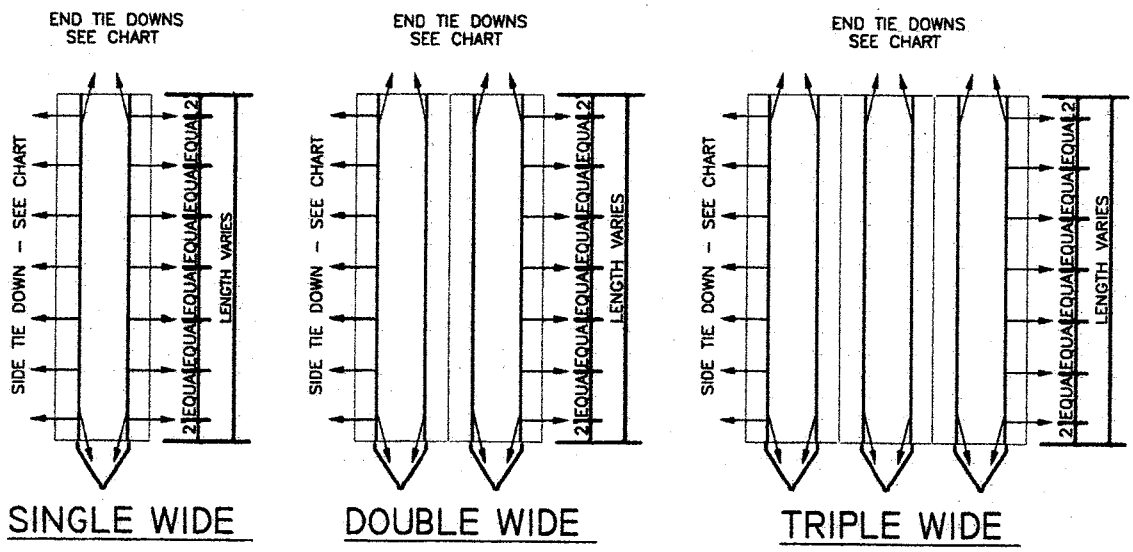
CONCRETE SLAB ANCHORS

1. CONCRETE SLAB TO BE MINIMUM 3 1/2" THICK AND IN GOOD CONDITION.
2. MINIMUM SLAB AREA REQUIRED FOR EACH ANCHOR IS 28 SQ. FEET.
3. DRILL PROPER SIZE HOLE IN SLAB MINIMUM 12" FROM ANY EDGE.

ALL APPLICATIONS

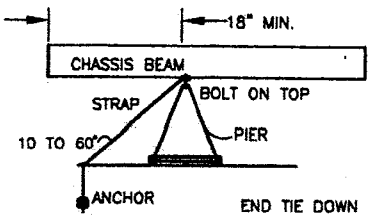
1. ATTACH STRAPS TO CHASSIS BEAM IN MANNER SHOWN.
2. INSERT STRAP THROUGH SPLIT NUT, CUT OFF EXCESS STRAP AND TIGHTEN UNTIL SNUG.

TIE DOWN LOCATIONS



EARTH AUGERS						CROSS DRIVE ANCHORS						CONCRETE SLAB ANCHORS					
MAX. LENGTH OF MFG'D HOME	32'	42'	52'	62'	73'	MAX. LENGTH OF MFG'D HOME	32'	42'	52'	62'	73'	MAX. LENGTH OF MFG'D HOME	34'	42'	50'	59'	68'
MAX. NO. OF SIDE TIE DOWNS	3	4	5	6	7	MAX. NO. OF SIDE TIE DOWNS	3	4	5	6	7	MAX. NO. OF SIDE TIE DOWNS	4	5	6	7	8

NOTE: IF OBSTRUCTIONS PRECLUDE THE PLACEMENT OF THE SIDE TIE DOWNS AT THE 2' LOCATION SHOWN SIDE TIE DOWNS AT 2'-0" FROM EACH END HAVE A TOLERANCE OF 1'±



MINUITE MAN PRODUCTS
LISTED BY:
TRI STATE TESTING SERVICES, INC
5101 WILFONG ROAD
MEMPHIS, TN. 38134
LISTING NUMBER AT IS-01
TIE DOWN SYSTEM TO BE IDENTIFIED BY A STICKER PLACED ON THE STEEL STRAPS MM-32 OR MMA-71 - STICKER TO CONTAIN THE FOLLOWING.
MINIUTE MAN PRODUCTS ETS-119
TRI STATE TESTING SERVICE, INC
LISTING NO. AT IS-01

NOTE: TIE DOWN STRAPS AT THE CHASSIS BEAM ENDS (END TIE DOWNS) CAN BE ATTACHED TO A CHASSIS SUPPORT PIER WITH A PIER BOLT ON TOP. (SEE SKETCH ABOVE).

HCD HCD 1/19/11
ETS 119