

BLOCK 10E LOT 11 QUALIFICATION CODE _____ ADDRESS (SITE) 244 Chambers Blvd. PERMIT NO. 137316



I. IDENTIFICATION *240 CHAMBER BROSIE RD CHAFF*

1. Proposed Work Site at: 249 CHAMBER BRIDGE RD

2. Name of Owner in Fee: ~~Jason~~ Silvio Silvio & Robert Taff

Te [REDACTED] e-mail [REDACTED]

Address 249 CHAMBER BRIDGE RD BRICK NJ 08223

3. Ownership in Fee: Public _____ Private 1

4. Principal Contractor: C.A.I. Home Improvements Tel. 0737 915-0865

Address: 29 Cassat Drive

Address 27 Chestnut Street e-mail tommaso@cs.cmu.edu

RRJ Bank NO 07101

License No. OR, if new, name, Builder's Reg. No. 12114 06447 2012 - 12-31-2012

License No. OR, if new home, Builder Reg. No. 1501008120 Exp. Date 12/31/20

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

Federal Emp. ID No. FAX: 731-2450838

Federal Emp. ID No. _____ FAX: (132) 434830

5. Architect or Engineer _____ Contact _____

Address _____ e-mail _____

Tel. () FAX: ()

6. Responsible Person in Charge and What has been Done: CAT Has been assigned

6. Responsible Person in Charge once Work has Begun L. A. L. HORTON #1111000000000000

Tel. (732) 715-0820 FAX: ()

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

(Check all that apply)

☒ Building

☒ Electrical☐ Plumbing☐ Fire Protection☐ Elevator

TOTAL COST 731.00

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates		Re-viewer
						Approval	Rejection	
19,500	CR 2	6-13	3/14/13	3/24/13	✓			
3,500			3/19/13					
	Eng	Exempt		3/13/13	ECO			

Eng Exempt	3/13/13	ECO
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IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

- ☐ Partial Releases
- ☐ Prototype Processing

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 12. ☐ Fire Alarm

9. ☐ Underground Storage Tanks

10. ☐ Swimming Pools, Spas and Hot Tubs

11. ☐ LPG Gas Tanks

only)	Update	Update
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1. Building	\$	585	
2. Electrical		65	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee		39	
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$	689	

(office use only)

1. Number of Stories _____

2. Height of Structure _____

3. Area — Largest Floor _____

4. New Building Area _____

5. Volume of New Structure _____

6. Max. Live Load _____

7. Max. Occupancy Load _____

8. If Industrialized Building: State Approved _____ HUD _____

9. Total Land Area Disturbed _____

10. Flood Hazard Zone _____

11. Base Flood Elevation _____

12. Wetlands yes _____ no _____

COMMERCIAL

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	_____

1. State Specific User: _____
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____
D. Construct. Classification: Present _____
Proposed _____



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 6/6/2013
Control Number C-13-001376
Permit Number 13-1376
Permit Issue Date 3/29/2013
Certificate Number 13-1376

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 249 CHAMBERS BRIDGE RD. Unit 4 - Music school Brick Township, NJ Block: 702 Lot: 11 Qual: _____
Owner in Fee: TAFF, ROBERT H & SILVI, SILVIO
Owner Address: 2310 TAPESTRY COURT TOMS RIVER NJ 08755
Telephone: [REDACTED]
Contractor: CAI Home Improvements LLC
Address: 29 Crescent Parkway Red Bank NJ 07701
Telephone: (732) 915-0865 Fax: (732) 345-0838
License Number or Builders Registration Number: 13VH06247200 Federal Emp. Number: _____
Home Warranty Number: _____
Type of Warranty Plan: ☐ State ☐ Private
Use Group: B Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: TENANT FIT UP Music School

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:

Daniel Newman Jr

Construction Official

Fee: \$0.00
Check Number: _____
Collected By: _____



CONSTRUCTION PERMIT

Date Issued 3/29/13
Control # C-13-001376
Permit # 13-1376

IDENTIFICATION Block: 702 Lot: 11 Qualifier _____
Work Site Location: 249 CHAMBERS BRIDGE RD. Unit 4 - Music Contractor: CAI Home Improvements LLC
school Brick Township, NJ Address: 29 Crescent Parkway Red Bank NJ 07701
Owner in Fee: TAFF, ROBERT H & SILVI, SILVIO
2310 TAPESTRY COURT TOMS RIVER NJ 08755 Telephone: (732) 915-0865
Telephone: _____ Lic. No. or Bldrs. Reg. No. 13VH06247200
Federal Employee No. _____

Is hereby granted permission to perform the following work:

- ☒ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☒ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT (Subchapter 8 only) ☐ OTHER

DESCRIPTION OF WORK:

TENANT FIT UP Music School

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 \$23,000

David Newman Jr.
Construction Official

3/28/13
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$585
Electrical	\$65
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$39
CO Fee	
Other	\$0
Total	\$689
Check No. <u>100</u>	
Cash	\$0
Credit	\$0
Collected By	

+50
\$739

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations, N.J.A.C. 15:23-2.18. 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.

- ☐ 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:

- ☒ 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.

#1376

PAID

DATE PAID

BY

CCA

CHECK

\$689.00



ELECTRICAL SUBCODE TECHNICAL SECTION



Handwritten: 3/29/13

Date Received Control #

Handwritten: 13-1376

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

Block 202 Lot 11 Qualification Code

Work Site Location 249 CHAMBERS BRIDGE RD, BRICK 08723 UNIT 4

Owner in Fee: SILVIO SILVI & ROBERT TAFI

Tel. [REDACTED] e-mail [REDACTED]

Address 189 Route 37 West TOWNS KILMER 08715

Contractor: DEISCOLL ELECTRIC LLC Tel. (732) 500.8153 zip code 08715

Address 46 School Road West e-mail DEISCOLLELECTRIC@GMAIL

Contractor License No. 14093A Exp. Date 3-31-2015

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

Federal Emp. ID No. 45-5317574 FAX: ()

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work \$ 3500

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)	Initial
[] No Plans Required	Type: Failure Failure Approval		
[] Partial - Under-slab Utilities Approved	Rough Barrier-Free	<u>5/16/13</u>	<u>[Signature]</u>
Date: Approved by:	Trench		
[] Electric Plans Approved	Temp. Serv.		
Date: Approved by:	Constr. Serv.		
Joint Plan Review Required:	TCO	<u>5/28/13</u>	<u>[Signature]</u>
[] Bldg. [] Plumb. [] Fire. [] Elev.	Other		
SUBCODE APPROVAL for PERMIT	Service		
Date: <u>3-26-13</u>	Final	<u>5-28-13</u>	<u>[Signature]</u>
Approved by: <u>[Signature]</u> (ect)	Barrier-Free		
SUBCODE APPROVAL for CERTIFICATE	Temp. Cut-in-Card Date Issued		
[] CO [] CCO [] CA	Final Cut-in-Card Date Issued		
Date: <u>5-30-13</u>	Annual Pool Inspection		
Approved by: <u>[Signature]</u>	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's Signature/Contractor's Seal and Signature

☒ Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr [] Exempt Applicant

U.C.C. F120 (rev. 12/07)

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK COMMERCIAL SPACE
INSTALL FLUORESCENT FIXTURES AND RECEPTACLES
ON NEWLY DIVIDED COMMERCIAL STORE FRONT

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

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



Dario L. Pasquariello, R.A., A.I.A.

DARIO

Architecture – Design, LLC

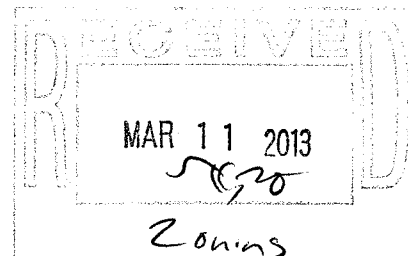
4057 Route 9 North #159

Howell, New Jersey 07731

Phone: 1-732-608-6838

Fax: 1-732-358-0236

March 6, 2013



Re: **Rita Plaza**
249 Chambers Bridge Rd. Unit #4
Lot: 11 Blk: 702
Brick, NJ

Plan review comments:

- A) As per the UCC code of 1977 slop sink not required. Slop sink shall be omitted from plan.**
- B) Tennant is responsible for cleaning with commercial cleaning products.**

Hereby certified,

Dario Pasquariello, R.A., A.I.A.
Principal Architect
NJ LIC. NO. AI-17852
NY LIC. NO. 033696
PA LIC. NO. 405008



Dario L. Pasquariello, R.A., A.I.A

DARIO

Architecture – Design, LLC

709 Atlantic Blvd

Beachwood, New Jersey, 08722

Phone: 1-732-608-6838

Fax: 1-732-358-0236

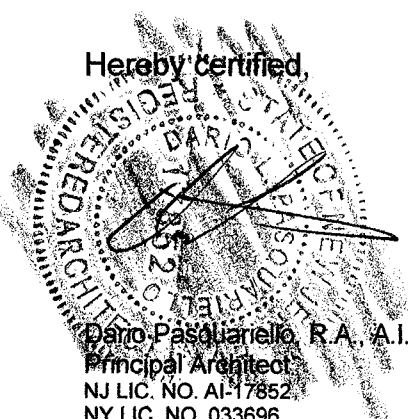
March 25, 2013

Re: **Sweet Music**
249 Chambersbridge Road
Bricktown, NJ

Dear Building Inspector,

New occupancy load as calculated 17 people for entire sq footage. There are 6 rooms with 2 people per room (as per building inspector comment) and remaining sq footage = 5 people, giving a total of 17 people.

Hereby certified,


Dario Pasquariello, R.A., A.I.A.

Principal Architect

NJ LIC. NO. AI-17852

NY LIC. NO. 033696

PA LIC. NO. 405008

Handwritten: 3/26/13

3/20/13 fax 732-345-0838



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Friday, March 15, 2013

To: TAFF, ROBERT H & SILVI, SILVIO
2310 TAPESTRY COURT
TOMS RIVER, NJ 08755

RE: Building Subcode
Block: 702 Lot: 11 Qual:
249 CHAMBERS BRIDGE RD.
Permit Number: Control Number: C-13-001376
Last Submit Date: Wednesday, March 13, 2013

Dear TAFF, ROBERT H & SILVI, SILVIO,

Your request is hereby denied based upon the following infractions.

Occupancy load is incorrectly indicated, (2) per lesson room then tabulation for the remainder.

Sincerely,

Michael Vecchio, ~~Subcode Official~~

CC:

3/26/13 - Resubmit - Not



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, March 19, 2013

To: TAFF, ROBERT H & SILVI, SILVIO
2310 TAPESTRY COURT
TOMS RIVER, NJ 08755

RE: Electrical Subcode
Block: 702 Lot: 11 Qual:
249 CHAMBERS BRIDGE RD.
Permit Number: Control Number: C-13-001376
Last Submit Date: Friday, March 15, 2013

Dear TAFF, ROBERT H & SILVI, SILVIO,

Your request is hereby denied based upon the following infractions.

needs electrical contractor seal on permit

Sincerely,

Geoffrey Stahl, Subcode Official

CC:

RESUBMIT KB
SUBCODES E
DATES 3/22/13



CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

New Jersey Office of the Attorney General

Division of Consumer Affairs
Board of Examiners of Electrical Contractors
124 Halsey Street, 6th Floor, Newark, NJ 07102



JEFFREY S. CHESBA
Attorney General

ERIC T. KANEFSKY
Acting Director

Mailing Address:
P.O. Box 45006
Newark, NJ 07101
(973) 504-6410

February 12, 2013

TO WHOM IT MAY CONCERN

Our records indicate that the holder of License and Business Permit **No. 14093A** has applied to the Board of Electrical Contractors for a pressure seal which has not yet been issued to him/her by the vendor.

Please accept this sealed letter as an interim device pending the furnishing of a seal to:

James Driscoll
Driscoll Electric LLC
46 School Road West
Marlboro, NJ 07746

This letter will be rendered invalid **180 days** after the date of its issuance.

Sincerely,

David Freed
Acting Executive Director

DF:es

RECEIVING CLERK CL
DATE REC'D 3-10-13

ZONING PERMIT APPLICATION

PERMIT # 2013-00182
DATE ISSUED 3/29/13

BLOCK: 702 LOT: 11

QUALIFIER: ---

SITE ADDRESS: ---

849 Chambers Bridge Rd. West
Unit 4

IDENTIFICATION:

Silvio Silvii & Robert Taff

1. NAME OF OWNER IN FEE: Jason Sweet

COMPLETE ADDRESS: 249 Chambers Bridge Rd West

BRICK NJ

PHONE ---

EMAIL ---

2. NAME OF APPLICANT: Jason Sweet

APPLICANT ADDRESS: ---

PHONE # ---

EMAIL ---

3. RESPONSIBLE PERSON FOR WORK: SEA C.A.I Home Improvement

PHONE # 732 915 0865

FAX # ---

4. SIGNATURE OF APPLICANT: Jason Sweet

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: --- *ADDITION --- *ALTERATION X

*PORCH --- *DECK ---

POOL: ABOVE GROUND ---

IN GROUND ---

FENCE: HEIGHT ---

TYPE ---

MATERIAL ---

HEIGHT: ---

(*IF APPLICABLE)

OTHER ---

DESCRIPTION: Front lot up "Sweet Marie"

ZONING REVIEW: 3-11-13

DATE REVIEWED: 3-11-13

DATE DENIED: ---

DATE APPROVED: 3-11-13

INTLS: NG 2

(SEE BACK PAGE)

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 50.00

OTHER: \$ ---

TOTAL: \$ ---

REQUIRED BY APPLICANT

RESIDENTIAL: ---

COMMERCIAL: X

EXISTING USE: Manufacturing

PROPOSED USE: Manufacturing

BOARD APPROVAL: --- PB --- ZB ---

RESOLUTION #: ---

APPROVAL DATE: ---

RECEIVED
MAR 11 2013
Red

ZONING REVIEW:

DATE REVIEWED: 3-11-13 DATE DENIED: DATE APPROVED: 3-11-13 INTLS: NC28

[illegible]



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued:

Application Number: ZA-13-00169

Application Date: 03/11/2013

Project Number: _____

Permit Number: 2P-13-00182

Fee: \$50

Zoning Permit

Worksite **249 CHAMBERS BRIDGE RD.**
Location: **Rita Plaza -Unit No. 4**
Brick Township, NJ 08723

Block: **702**

Lot: **11**

Qualifier: _____

Zone: **B-3**

Owner: **TAFF, ROBERT H & SILVI, SILVIO**
Address: **2310 TAPESTRY COURT**
TOMS RIVER, NJ 08755

Applicant: **TAFF, ROBERT H & SILVI, SILVIO**
Address: **2310 TAPESTRY COURT**
TOMS RIVER, NJ 08755

Application Approved Date: 03/11/2013

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Retail Store - "Sweet Music" store (former hair salon).

Nonconforming Use is: _____

Work Description:

Rehabilitation - Interior alteration for a tenant fit-up for a new business, changing from a hair salon to a music store, "Sweet Music".

An additional zoning permit is required for any sign and for any other additional work.

Upon review it was determined that the Development Application:

- ☒ Permitted by Ordinance
- ☐ Permitted by Variance approved on: _____
- ☐ Valid Nonconforming Use is established by
 - ☐ Zoning Board of Adjustment
 - ☐ Zoning Officer

Sean Kinney
Sean Kinney, Zoning Officer

Michael P. Fowler
Michael P. Fowler, Township Planner

03/11/2013

Date

3/12/13
Date

12TH FLA 24 BIRCHWOOD Mall

LEASING PLAN

Unit	Size	Sq. Ft.	Tenant
1	5032X50	2,516	Chocolate Belles
2	20X50	1,000	Vacant
3	20X50	1,000	Mid Jersey Garage Doors
4	20X50	1,000	Hair Salon
5	20X50	1,000	Dance Studio
6	20X55	1,100	What's Cookin'
7	20X55	1,100	What's Cookin'

*Also available as a double unit of 2,200 sq. ft.

total = 8,716 sq ft

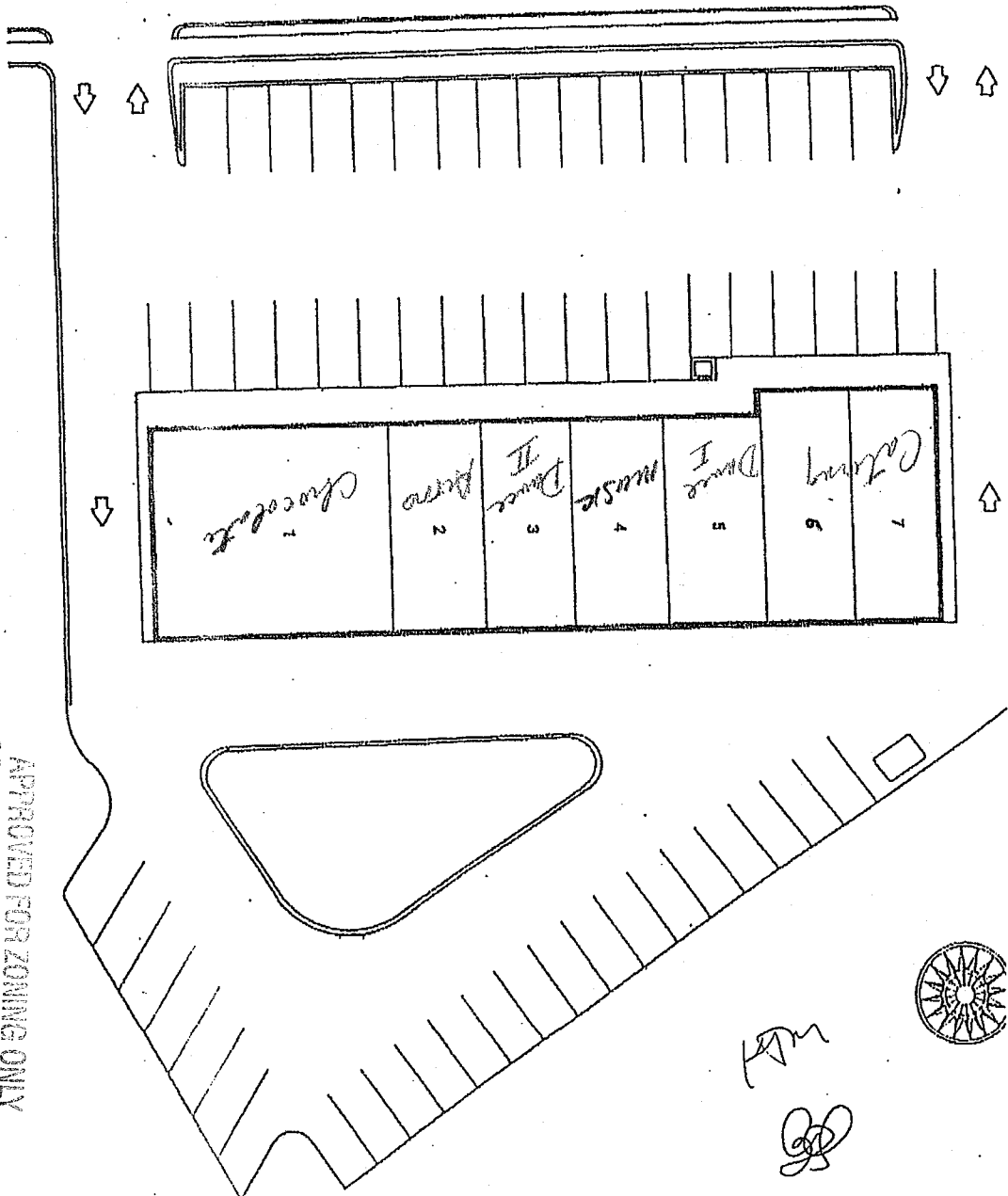
Coastal Group, Inc.

PROPERTIES

COLTS TOWNE PLAZA
41 Highway 34 South
Colts Neck, N.J. 07722

FOR LEASING INFORMATION
CALL STEVE SCHIEREN AT
(908) 431-2226

CHAMBERS BRIDGE ROAD - ROUTE 549

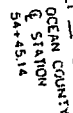


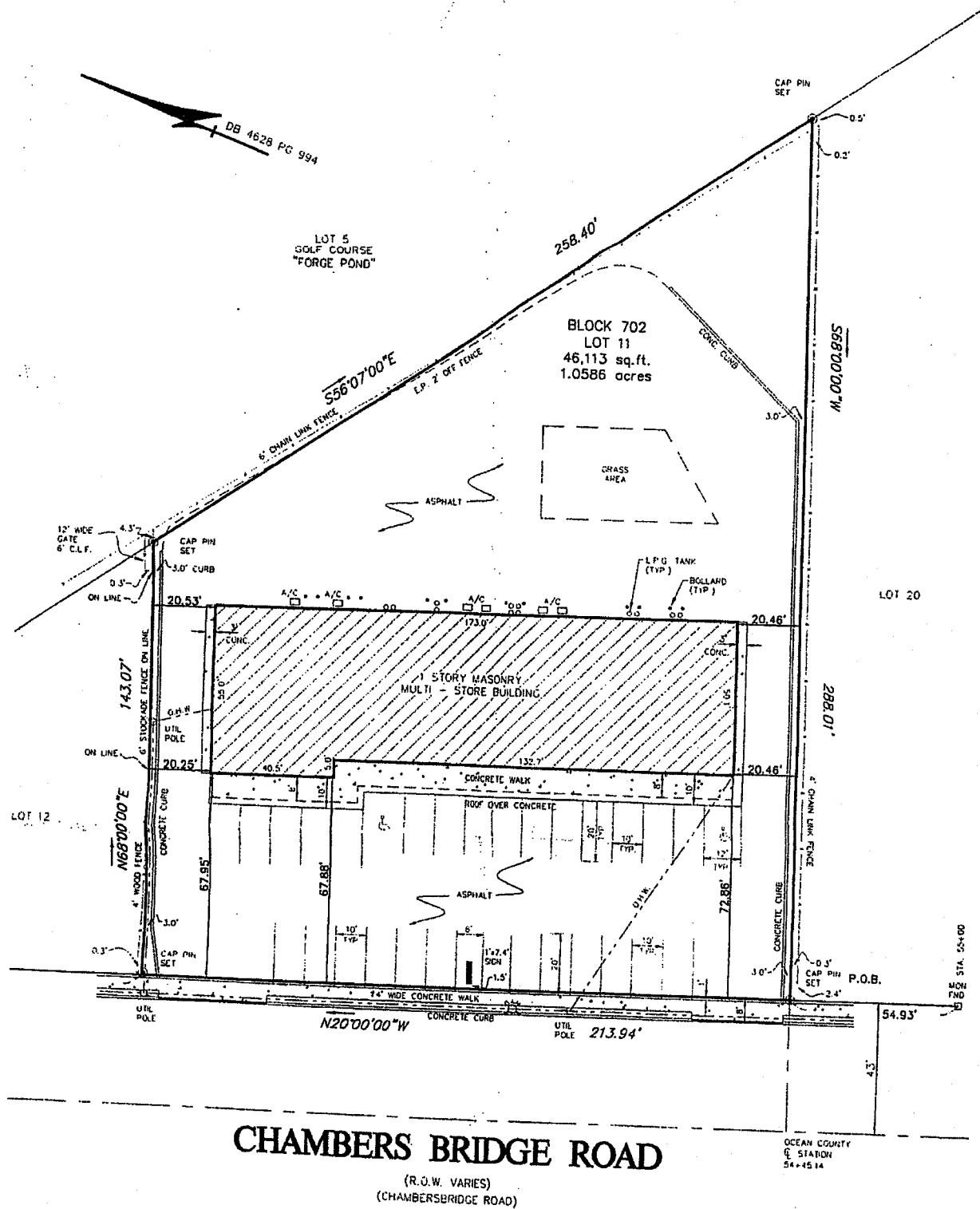
APPROVED FOR ZONING ONLY
SEANKINNEY, ZONING OFFICER

MAR 11 2013

TFU-a1t
Sweet Marie
Unit 4

(R.O.W. VARIES)
SPRIDGE ROAD)





(R.O.W. VARIES)
(CHAMBERSBRIDGE ROAD)

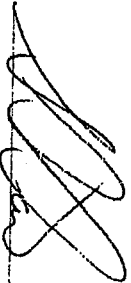
1 BLOCK 702 AS SHOWN ON THE OFFICIAL TAX MAP OF
F OCEAN AND STATE OF NEW JERSEY,
KNOWN AS 249 CHAMBERS BRIDGE ROAD, BRICK, NEW
JERSEY,
DATED BY THIS SURVEY.

W
S SUCCESSORS AND/OR ASSIGNS
ANY
E COMPANY
F, ESQ.

RWVP

Ronald W. Post Surveying, Inc.
Professional Land Surveying and Planning
1792 Hinds Road, Toms River, NJ 08753
Phone: (732) 255-9050 Fax: (732) 255-9196

Ronald W. Post
Professional Land Surveyor N.J. No. 28334
Steven D. Parent
Professional Planner N.J. No. 02910
Professional Land Surveyor N.J. No. 36269



7-21-98
DATE

This Survey subject to the provisions of the New Jersey Surveying and Mapping Act, N.J.S.A. 15:27, and the rules and regulations of the State Board of Surveying and Mapping, N.J.A.C. 15:27. The Surveyor and Planner are not responsible for the accuracy of the information provided by the client or the information shown on the official tax map.

SURVEY OF PROPERTY

LOT 11 BLOCK 702

TOWNSHIP OF BRICK

OCEAN COUNTY,

NEW JERSEY

Scale	3"	CHK	Date	JOB NO.
1" = 30'	S.E.M.	500	7/21/98	98-18493



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued: _____
Application Number: ZA-13-00169
Application Date: 03/11/2013
Project Number: _____
Permit Number: _____
Fee: \$50

Zoning Permit

Worksite **249 CHAMBERS BRIDGE RD.**
Location: **Rita Plaza -Unit No. 4**
Brick Township, NJ 08723

Block: 702
Lot: 11
Qualifier: _____
Zone: B-3

Owner: **TAFF, ROBERT H & SILVI, SILVIO**
Address: **2310 TAPESTRY COURT**
TOMS RIVER, NJ 08755

Applicant: **TAFF, ROBERT H & SILVI, SILVIO**
Address: **2310 TAPESTRY COURT**
TOMS RIVER, NJ 08755

Application Approved Date: 03/11/2013

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Retail Store - "Sweet Music" store (former hair salon).

Nonconforming Use is: _____

Work Description:

Rehabilitation - Interior alteration for a tenant fit-up for a new business, changing from a hair salon to a music store, "Sweet Music".

An additional zoning permit is required for any sign and for any other additional work.

Upon review it was determined that the Development Application:

- ☒ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Valid Nonconforming Use is established by
 ☐ Zoning Board of Adjustment
 ☐ Zoning Officer

Sean Kinney
Sean Kinney, Zoning Officer

Michael P. Fowler
Michael P. Fowler, Township Planner

03/11/2013

Date

3/12/13
Date

OFFICE USE ONLY

DATE:

COMMENTS:

INITIALS:

2/28/13

- Need money, car + auto plan

JS

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____
PERMIT #: _____

BLOCK: 702

LOT: 11

ADDRESS: 249 Chambers Bridge Rd

Red Bank

IDENTIFICATION:

1. WORK SITE ADDRESS: 249 Chambers Bridge Rd Bank

2. NAME OF OWNER IN FEE: Silvio Silva & Robert Taft

ADDRESS: 249 Chambers Bridge Rd PHONE #: () _____

BRICK NJ

FAX #: () _____

3. PRINCIPAL CONTRACTOR: CAI Home Improvement

ADDRESS: 29 Pleasant Hwy PHONE #: (332) 515-0865

Red Bank

FAX #: () _____

4. ARCHITECT OR ENGINEER: DARIO Architecture

ADDRESS: 4057 Rt 2 Howell NJ PHONE: # (332) 608-6838

5. RESPONSIBLE PERSON FOR WORK: CAI Home Improvement

ADDRESS: 29 Pleasant Hwy Red Bank

PHONE #: (712) 915-0865 FAX #: () _____ E-MAIL: _____

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL

☐ OTHER _____

LENGTH: _____ WIDTH: _____ HEIGHT: _____

ENGINEERING REVIEW: _____

FEE SUMMARY:

APPLICATION FEE: \$ _____

REVIEW FEE: \$ _____

INSPECTION FEE: \$ _____

OTHER: \$ _____

BOND(S): \$ _____

TOTAL: \$ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

DATE RECEIVED: _____

DATE REJECTED: _____

DATE APPROVED: _____

INITIALS: _____