Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

This File Contains Personal Identifiable Information of Private Citizen(s).

Certain information contained in this file is ***Exempt from Release*** under the Open Public Records Act (OPRA) (Public Law 2001, CHAPTER 404 (N.J.S.A. 47:1A-1 et seq.)) and Executive Orders issued by the Governor of New Jersey. The following information ***MUST*** be redacted prior to release:

- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020

BLOCK 670 LOT 4 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 21-2961

CONSTRUCTION PERMIT APPLICATION C21-003360

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Proposed Work Site at: 2770 Hooper Ave. Brick, N.J. 08723
2. Name of Owner in Fee: Antsul Group LLC
   Tel. 732-917-7311 e-mail Stephen@antsulgroup.com
   Address 409 Joyce Kilmer Ave. (street) New Brunswick (municipality) 08901 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: The Bannett Group Tel. 856-751-8800
   Address 1998 Springdale Rd. Cherry Hill, N.J. 08003 e-mail LCOULTER@thebannettgroup.com
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason _____
   Federal Emp. ID No. 22-209176 FAX: 856-751-7692
5. Architect or Engineer The Bannett Group Contact mconnor@thebannettgroup.com
   Address 1998 Springdale Rd. Cherry Hill, NJ e-mail _____
   Tel. 856-751-8800 FAX: _____
6. Responsible Person in Charge once Work has Begun Mike Riley
   Tel. 856-751-8800 FAX: 856-751-7692
   Lauren 856-745-3878

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 3900		
2. Electrical	3900		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	$ 21		
10. Subtotal	$ 156		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 156		

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

1. Number of Stories 1
2. Height of Structure 32'-8" ft.
3. Area - Largest Floor 6380 sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Max. Live Load _____
7. Max. Occupancy Load 260
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

☐ 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	55,000				11/08/21	MEK			
☒ Electrical	30,000				9/15/21	TG			
☐ Plumbing									
☐ Fire Protection									
☐ Elevator		ENG	Exempt		9/10/21	ECC			
TOTAL COST	85,000,00								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use: _____
2. Use Group, Proposed: Select Group
3. Change in Use Group, Indicate Present: Select Group
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: RESTAURANT
2. Use Group, Proposed: Select Group A-2
3. Change in Use Group, Indicate Presen Select Group

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

D. Construct. Classification: Present _____
Proposed _____

III. PLAN REVIEW (optional)

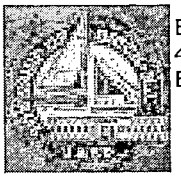
DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

Bubble Wild Wing

Rolled Plans



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 01/21/2022
Control Number C-21-003360
Permit Number 21-2961
Permit Issue Date 11/12/2021
Certificate Number 21-2961

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 2770 HOOPER AVE. Brick Township, NJ Block: 670 Lot: 4 Qual:

Owner in Fee: KENNEDY MALL ASSOCIATES

Owner Address: 641 SHUNPIKE RD. CHATHAM NJ 07928

Telephone:

Contractor THE BANNETT GROUP, LTD

Address 1998 SPRINGDALE RD SUITE 101 CHERRY HILL NJ 08003

Telephone: (856) 751-8800 Fax: (856) 751-7692 Federal Emp. Number:

License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: ALTERATION - COMMERCIAL - - BUFFALO WILD WINGS....INTERIOR RENOVATION; FACADE WORK

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:

David J. Mauman Jr.

Construction Official

Date Printed: 01/21/2022

U.C.C. F260 (rev. 08/05)

Fee: $0.00
Check Number:
Collected By:

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(f)1.ix:

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, including such certification as the construction official may require, have been given or will be given prior to pemit issuance.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature_____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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.

(X) Check if contractor.

Agent Name THE BANNETT GROUP

Address 1998 Springdale Rd
Cherry Hill, N.J. 08003

Telephone 856-751-8800

Signature

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

NEW JERSEY UNIFORM CONSTRUCTION CODE

Buffalo Wild Wings

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 11/12/21

Date Issued Permit # 21-2961

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

Block 670 Lot 4 Qualification Code

Work Site Location 2770 Hooper Ave.
Brick, N.J. 08723

Owner in Fee: Antsul Group LLC

Tel. 732-917-7311 e-mail stephen@antsulgroup.com

Address 409 Joyce Kilmer Ave. Ste 310 New Brunswick 08901
street municipality zip code

Contractor: The Bannett Group Tel. 856-751-8800

Address 1998 Springdale Rd. e-mail LCOULTER@thebannettgroup.com
Cherry Hill, N.J. 08003

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

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 22-209176 FAX:

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

- [ ] No Plans Required
- [✓] All — 11/08/21 KEK
- [ ] Footings/Foundations
- [ ] Structural/Framework
- [ ] Exterior
- [ ] Interior

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 11/08/21
Approved by: KEK.

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 01/04/22
Approved by: KEK

INSPECTIONS Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Footing				
Footing Bonding				
Foundation				
Slab				
Frame New Wall @ Takeout Area			11/29/21	KEK
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			1/4/22	KEK
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present A-2 Proposed

No. of Stories 1

Height of Structure 32'8" ft.

Area — Largest Floor 6380 sq. ft.

New Bldg. Area/All Floors sq. ft.

Volume of New Structure cu. ft.

Max. Live Load

Max. Occupancy Load 260

Constr. Class Present Proposed

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Rehabilitation $ 85,000.00
3. Total (1+ 2) $ 0

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: MRC

Print name here: MICHAEL RILEY

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INTERIOR COSMETIC REFRESH
EIFS (FACADE WORK)

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [X] 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)
Internet version

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 670 Lot 4 Qualification Code

Work Site Location 2770 HOOPER AVE
BRICK, NJ. 08723

Owner in Fee: ANTSUL GROUP

Tel. 732 917-7311 e-mail stephen@antsulgroup.com

Address 409 JOYCE KILMER Ave. NEW BRUNSWICK NJ.
street municipality

Contractor: Eddie B. Pumbing Inc. Tel. 8563038150
zip code

Address PO Box 3054 e-mail
Cinnaminson, NJ 08077

Contractor License No. 7274 Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 222880880 FAX:

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed E

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

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

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: Ed Bishop

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
SWAPPING OUT (5) SINKS (5) FAUCETS

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
5	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Administrative Surcharge	$
	Minimum Fee	$
	State Permit Surcharge Fee	$
	TOTAL FEE	$

Lawen - 856-745-3878

U.C.C. F130 (rev. 11/09)
Internet version

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

NEW JERSEY UNIFORM CONSTRUCTION CODE

Buffalo Wild Wings

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received Control # 11/12/21
Date Issued
Permit # 21-2961

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

Block 670 Lot 4 Qualification Code

Work Site Location BUFFALO WILD WINGS
2770 Hooper Ave, Brick NJ 08723

Owner in Fee: ANTSUL GROUP

Tel. (732) 917-7311 e-mail stephen@antsulgroup.com

Address 409 JOYCE KILMER Ave. New Brunswick
street municipality zip code

Contractor: Bursese Electric Inc. Tel. (973) 575-6868

Address 1275 Bloomfield Ave, Bldg 1-6A e-mail fburseseelectric@burseseelectric.com
Fairfield NJ 07004

Contractor License No. 12757 Exp. Date 3/2024

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

Federal Emp. ID No. 22-3389271 FAX: (973) 575-6864

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Currently Occupied Utility Co.

Est. Cost of Elec. Work $ 30,000

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: FRANK BURSESE

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Contr. [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Refresh Electrical Installations

QTY.	SIZE	ITEMS	FEE (Office Use Only)
52		Lighting Fixtures	0
6		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
1		Emergency & Exit Lights	
38		Communications Points	
		Alarm Devices/F.A.C. Panel	
97		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
2	5	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	
2	2	KW Elec. Sign/Outline Light	

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Electric Plans Approved
Date 9/22 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 9-15-21
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 12-22-21
Approved by:

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type:				
Rough Pick Up Window			11-23-21	MM
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final 12-16-21 MM			12-22-21 MM	
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

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

34778409 1

U.C.C. F120 (rev. 11/09) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

CONSTRUCTION PERMIT

Date Issued
Control # C-21-003360
Permit #

IDENTIFICATION Block: 670 Lot: 4 Qualifier
Work Site Location: 2770 HOOPER AVE, Brick Township, NJ
Owner in Fee: KENNEDY MALL ASSOCIATES
641 SHUNPIKE RD, CHATHAM NJ 07928
Telephone:

Contractor: THE BANNETT GROUP, LTD
Address: 1998 SPRINGDALE RD SUITE 101 CHERRY HILL NJ 08003
Telephone: (856) 751-8800
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:
ALTERATION - COMMERCIAL - BUFFALO WILD WINGS....INTERIOR RENOVATION; FACADE WORK

PAYMENTS (Office Use Only)

Building	$3,900
Electrical	$280
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$219
CO Fee	
Other	$0
Total	$4,399
Check No.	1075
Cash	$0
Credit	$0
Collected By	

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $115,000

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".

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

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

RECEIVING CLERK _____
DATE REC'D _____

ZONING PERMIT APPLICATION

PERMIT # ZP-21-01549
DATE ISSUED 11-12-21

BLOCK: 670 LOT: 4 QUALIFIER: _____ SITE ADDRESS: 2770 Hooper Ave.

IDENTIFICATION:

1. NAME OF OWNER IN FEE: ANTSUL GROUP LLC
   COMPLETE ADDRESS: 409 Joyce KILMER Ave.
   New Brunswick, N.J. 08901
   PHONE # 732-917-7311 EMAIL: STEPHEN@ANTSULGROUP.COM

2. NAME OF APPLICANT: The Bannett Group
   APPLICANT ADDRESS: 1998 SPRINGDALE Rd
   Cherry Hill, N.J. 08003
   PHONE # 856-751-8800 EMAIL: LCOULTER@thebannettgroup.com

3. RESPONSIBLE PERSON FOR WORK: MIKE RILEY
   PHONE# 856-751-8800 FAX# 856-751-7692

4. SIGNATURE OF APPLICANT: Lauren Coulter

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ _____
OTHER: $ _____
TOTAL: $ _____

REQUIRED BY APPLICANT

RESIDENTIAL: _____
COMMERCIAL: _____
EXISTING USE: A-2
PROPOSED USE: B Wid Wing

BOARD APPROVAL: ___ PB ___ ZB
RESOLUTION#: _____
APPROVAL DATE: _____

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: _____ *ADDITION _____ *ALTERATION ✓ *PORCH _____ *DECK _____

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____ MATERIAL _____

HEIGHT: _____ (*IF APPLICABLE)

OTHER _____

DESCRIPTION: FACADE FACELIFT W/ INTERIOR ALTERATIONS

ZONING REVIEW:
DATE REVIEWED: 9.9.21 DATE DENIED: DATE APPROVED: 9.9.21 INITIALS: CS

(SEE BACK PAGE)

TOWNSHIP OF BRICK ZONING CHECKLIST

1) **Four (4) copies of plot plan containing:**

- All existing and proposed structures
- All dimensions of the lot and structures
- All setbacks from the structures to the property lines
- All adjacent streets and waterways
- If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

2) **Two copies of the plans with dimensions and heights noted:**

- Floor plans and elevations
- Signed site plans
- Property map
- Survey map

Choose which is applicable for submission

3) **Plot plans and building plans must match for complete review**

NOTE: NO PARTIAL, TAPED, FAXED, REDUCED OR ENLARGED COPIES CAN BE ACCEPTED

01/2010

Brick Township
401 Chambers Bridge Rd.
Brick, NJ 08723
(732) 262-1041

Date Issued: 11/12/21
Application Number: ZA-21-01410
Application Date: 9/9/2021
Project Number:
Permit Number: ZP-21-01594
Fee: $75.00

Zoning Permit

Worksite **2770 HOOPER AVE.**
Location: **Brick Township, NJ 08723**

Owner: **Antul Group LLC**
Address: **409 Kilmer Avenue**
New Brunswick , NJ 08901

Applicant: **THE BANNETT GROUP, LTD**
Address: **1998 SPRINGDALE RD**
SUITE 101
CHERRY HILL, NJ 08003

Block: **670** Lot: **4** Qualifier: _____ Zone: **B-3**

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

Present Use: **Restaurant**

☐ Non Conforming Use ☐ Non Conforming Structure

Proposed Use: **Restaurant Buffallo Wild Wings**

Work Description:

Rehabilitation - Interior alterations to existing restaurant for "Buffallo Wild Wings." Facade alterations for exterior facelift.

Additional Zoning Permit is required for additional work or signage.

Application Approved Date: _____

Upon review it was determined that the Zoning Permit:

☐ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Approved with Conditions
☐ Valid Nonconforming Use/Structure is established by
☐ Zoning Board of Adjustment ☐ Zoning Officer

Christopher J. Romano, Zoning Officer

9/9/2021
Date

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK _____

PERMIT # _____

BLOCK 670 **LOT** 4 **ADDRESS** 2770 HOOPER AVE

IDENTIFICATION:

1. WORK SITE ADDRESS 2770 HOOPER AVE
2. APPLICANT Lauren Coulter The Bannett Group
3. NAME OF OWNER IN FEE ANTSUL GROUP LLC.
   ADDRESS 409 JOYCE KILMER AVE. NEW BRUNSWICK 08901
   PHONE 732-917-7311 EMAIL STEPHEN@ANTSULGROUP.COM
4. PRINCIPAL CONTRACTOR The Bannett Group
   ADDRESS 1998 Springdale Rd., Cherry Hill, N.J. 08003
   PHONE 856-751-8800 EMAIL LCOULTER@thebannettgroup.com
5. ARCHITECT OR ENGINEER ANTHONY SIRIZOTTI
   ADDRESS 1998 SPRINGDALE RD., CHERRY HILL, NJ. 08003
   PHONE 856-751-8800 EMAIL asirizotti@thebannettgroup.com
6. RESPONSIBLE PERSON FOR WORK MIKE RILEY
   ADDRESS 1998 SPRINGDALE RD. CHERRY HILL, N.J. 08003
   PHONE 856-751-8800 EMAIL MRILEY@thebannettgroup.com

PROJECT DESCRIPTION:

☐ GRADING/CLEARING ☐ ROAD OPENING ☐ SOIL REMOVAL / FILL

☐ RETAINING WALL ☐ POOL ☐ BULKHEAD / DOCK ☐ DWELLING

☐ TREE REMOVAL ☐ COMMERCIAL SITE MAINTENANCE

☒ DESCRIPTION FACADE FACELIFT W/ INTERIOR ALTERATIONS

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 _____

ENGINEERING REVIEW:

DATE RECEIVED _____ DATE REJECTED _____ DATE APPROVED _____ INITIALS _____