



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.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson", is written over a horizontal line.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020

BLOCK 670 LOT 9.01 QUALIFICATION CODE _____ ADDRESS (SITE) 990 Cedarbridge Ave TOWN HALL SHOPPES PERMIT NO. 22-0690



CONSTRUCTION PERMIT APPLICATION

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

C22-000610

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>800</u>		
2. Electrical	\$ <u>100</u>		
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	\$ <u>20</u>		
11. Cert. of Occupancy	\$ <u>45</u>		
12. Other			
13. TOTAL	\$ <u>45</u>		

VI. BUILDING/SITE CHARACTERISTICS

- Number of Stories _____
- Height of Structure _____ ft.
- Area — Largest Floor _____ sq. ft.
- New Building Area _____ sq. ft.
- Volume of New Structure _____ cu. ft.
- Max. Live Load _____
- Max. Occupancy Load _____
- If Industrialized Building: State Approved _____ HUD _____
- Total Land Area Disturbed _____ sq. ft.
- Flood Hazard Zone _____
- Base Flood Elevation _____ ft.
- Wetlands yes _____ no _____

(office use only)

I. IDENTIFICATION

- Proposed Work Site at: 990 Cedar Bridge Ave Brick
- Name of Owner in Fee: c/o Paramount Realty / 4th Venture
Tel. 732-916-8140 e-mail tt@paramountrealty.com
Address 1195 Route 70, Suite 200 Lakewood
street municipality zip code
- Ownership in Fee: Public _____ Private _____
- Principal Contractor: Signarama TR Tel. 732-914-1150
Address 1333 RT 9 Toms River e-mail Sales@
signarama-tomsriver.com
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason _____
Federal Emp. ID No. 45-5281148 FAX: _____
- Architect or Engineer _____ Contact _____
Address _____ e-mail _____
Tel. _____ FAX: _____
- Responsible Person in Charge once Work has Begun Warren / Signarama
Tel. 732-914-1150 FAX: 732-914-1152

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)

- ☐ Building
- ☐ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
	<u>W</u>	<u>2/16/22</u>		<u>03/07/22</u>	<u>W</u>			
				<u>2/28/22</u>	<u>W</u>			
	<u>Estg Exempt</u>			<u>2/25/22</u>	<u>ECC</u>			

TOTAL COST \$0

III. PLAN REVIEW (optional)

- DO YOU WANT:
- ☐ Partial Releases
 - ☐ Prototype Processing

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

- ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
- ☐ High Pressure Boilers
- ☐ Pressure Vessels
- ☐ Refrigeration Systems
- ☐ Cross-Connections/Backflow Preventers
- ☐ Hazardous Uses/Places of Assembly
- ☐ Sprinklers/Standpipes
- ☐ Smoke Control Systems in Open Wells
- ☐ Underground Storage Tanks
- ☐ Swimming Pools, Spas and Hot Tubs
- ☐ LPGas Tanks
- ☐ Fire Alarm

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

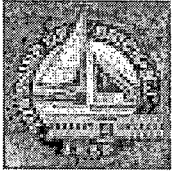
- State Specific Use: _____
- Use Group, Proposed: _____
- Change in Use Group, Indicate Present: _____
- No. of dwelling units: Total Units Income-restricted
Gained, Sale _____
Gained, Rental _____
Lost, Sale _____
Lost, Rental _____

B. NON-RESIDENTIAL (primary use)

- State Specific Use: _____
- Use Group, Proposed: _____
- 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 05/16/2022
Control Number C-22-000610
Permit Number 22-0690
Permit Issue Date 03/09/2022
Certificate Number 22-0690

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 990 CEDAR BRIDGE AVE. Brick Township, NJ Block: 670 Lot: 9.01 Qual: _____

Owner in Fee: FOURTH VENTURE LLC%PARAMOUNT REALTY

Owner Address: 1195 ROUTE 70 #2000 LAKEWOOD NJ 08701

Telephone: _____

Contractor SIGNARAMA OF TOMS RIVER

Address 1333 Route 9 Toms River NJ 08755

Telephone: (732) 914-1150 Fax: (732) 914-1152 Federal Emp. Number: 22-3359939

License Number or Builders Registration 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: SIGN INSTALLATION -- PM PEDIATRICS ...INSTALL ILLUMINATED FACADE SIGN

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 Newman Jr

Construction Official

Date Printed: 05/16/2022

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

Fee: \$0.00

Check Number: _____

Collected By: _____



22-0690

2 Canary = Office Copy
4 Gold = Applicant Copy



PM Pediatrics

**ELECTRICAL SUBCODE
TECHNICAL SECTION**

Date Received

Control #

3/9/22

22-0690

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 9.01 Qualification Code _____

Work Site Location 990 Cedar Bridge Ave Brick

Owner In Fee: c/o Paramount Realty / 4th Venture

Tel. 732-961-8140 e-mail tt@paramountrealty.com

Address 1195 Route 70, Suite 200 Lakewood NJ

Contractor: Expor Electric Inc Tel. (732) 245-7435

Address 1889 Route 9 Unit 100 e-mail ExporElectric@gmail.com
Toms River NJ 08755

Contractor License No. 14890 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 223842618 FAX: (732) 240-2082

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 350

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[] Partial - Understab Utilities Approved

Date: _____ Approved by: _____

[] Electric Plans Approved

Date: 2-28-22 Approved by: [Signature]

Joint Plan Review Required:

[] Bldg: [] Plumb. [] Fire. [] Elev.

SUBCODE APPROVAL for PERMIT

Date: 3-1-22

Approved by: [Signature]

SUBCODE APPROVAL for CERTIFICATE

[] CO [] CCO [] CA

Date: 4-29-22

Approved by: [Signature]

INSPECTIONS

Type: _____ Dates (Month/Day) _____

Rough _____ Failure _____ Approval _____ Initial _____

Barrier-Free _____

Trench _____

Temp. Serv. _____

Const. Serv. _____

TCO _____

Other _____

Service _____

Final _____

Barrier-Free _____

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: [Signature]

Print name here: Vincent Zenna

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Hook up sign to existing electric

QTY.	SIZE	ITEMS
_____	_____	Lighting Fixtures
_____	_____	Receptacles
_____	_____	Switches
_____	_____	Detectors
_____	_____	Light Poles
_____	_____	Motors—Fract. HP
_____	_____	Emergency & Exit Light
_____	_____	Communications Points
_____	_____	Alarm Devices/E.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 1/4 HP
_____	KW Transformer/Generator
_____	AMP Service
_____	AMP Subpanels
_____	AMP Motor Control Center
_____	KW Elec. Sign/Outline Light

FEE (Office Use Only)

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$



Date Issued 2/7/22
Control # C-22-000610
Permit # 22-0010

IDENTIFICATION	Block: 670	Lot: 9.01	Qualifier
Work Site Location:	990 CEDAR BRIDGE AVE. Brick Township, NJ		Contractor
			SIGNARAMA OF TOMS RIVER
Owner in Fee	FOURTH VENTURE LLC%PARAMOUNT REALTY		Address
	1195 ROUTE 70 #2000 LAKEWOOD NJ 08701		1333 Route 9 Toms River NJ 08755
Telephone:		Telephone:	(732) 914-1150
		Lic. No. or Bldrs. Reg. No.	
		Federal Employee. No.	22-3359939

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:

SIGN INSTALLATION - PM PEDIATRICS ...INSTALL ILLUMINATED FACADE SIGN

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 \$10,350

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.

- ☒ 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.

RECEIVING CLERK _____
DATE REC'D _____

ZONING PERMIT APPLICATION

PERMIT # 22-00291
DATE ISSUED 3/9/22

BLOCK: 670 LOT: 9.01 QUALIFIER: _____ SITE ADDRESS: 990 Cedar Bridge Ave

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Fourth Venture C/o Paramount Realty
COMPLETE ADDRESS: 1195 Rt 70, Suite 200 Lakewood
NJ 0701
PHONE # 732-961-8140 EMAIL: tt@paramountrealty.com

2. NAME OF APPLICANT: Signarama Toms River
APPLICANT ADDRESS: 1333 Route 9 Toms River NJ
PHONE # 732-914-1150 EMAIL: Sales@signarama-
tomsriver.com

3. RESPONSIBLE PERSON FOR WORK: WARREN SEGALL
PHONE # 732-914-1150 FAX # 732-914-1152

4. SIGNATURE OF APPLICANT: W Segall

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 75
OTHER: \$ _____
TOTAL: \$ 75

REQUIRED BY APPLICANT

RESIDENTIAL: _____
COMMERCIAL: ☒ _____
EXISTING USE: _____
PROPOSED USE: PM Pediatrics

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 * Sign - illuminated sign size: 48" H X 210" W - 70 sq ft

DESCRIPTION: Front lit LED illuminated channel letter sign on raceway

ZONING REVIEW:

DATE REVIEWED: 2-25-22 DATE DENIED: _____ DATE APPROVED: 2-25-22 INTLS: cc

(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



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

Date Issued: 3/9/22
Application Number: ZA-22-00210
Application Date: 2/23/2022
Project Number: _____
Permit Number: 22-00291
Fee: \$75.00

Zoning Permit

Worksite **990 CEDAR BRIDGE AVE.**
Location: **Brick Township, NJ 08723**

Owner: **FOURTH VENTURE LLC%PARAMOUNT REALTY**

Applicant: **SIGNARAMA OF TOMS RIVER**

Address: **1195 ROUTE 70 #2000 LAKEWOOD, NJ 08701**

Address: **1333 Route 9 Toms River, NJ 08755**

Block: 670 Lot: 9.01 Qualifier: _____ Zone: B-3

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

Present Use: Furniture Store

☐ Non Conforming Use

☐ Non Conforming Structure

Proposed Use: Medical Offices PM Pediatrics

Work Description:

Sign - Front Lit LED illuminated channel letter sign for "PM Pediatrics."

The sign cannot exceed 15% of the storefront facade.

Additional Zoning Permit is required for additional work and signage.

Application Approved Date: 2/25/2022

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

2/25/2022

Date



Toms River

1333 ROUTE 9, TOMS RIVER, NJ 08755
 732-914-1150 732-914-1152
 SALES@SIGNARAMA-TOMSRIVER.COM

CLIENT: Signarama Deer Park

PROOF DATE: 2/4/2022

ORDER#

PREPARED BY: Izzy

FILE NAME: Building Signage_02-04-22.fs DESIGN# Sealed Drawing

DIRECTORY NAME: W:\Jobs\Signarama Deer Park\2022 - New Design

Block 670, Lot 9.01

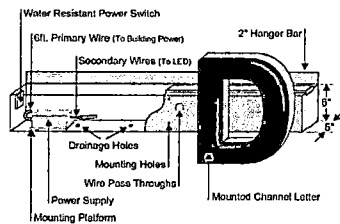
Customer is:

PM Pediatrics Management Group, LLC

990 Cedarbridge Ave
 Brick, NJ 08723

Permit # 19-2138

CHANNEL LETTERS ON RACEWAY

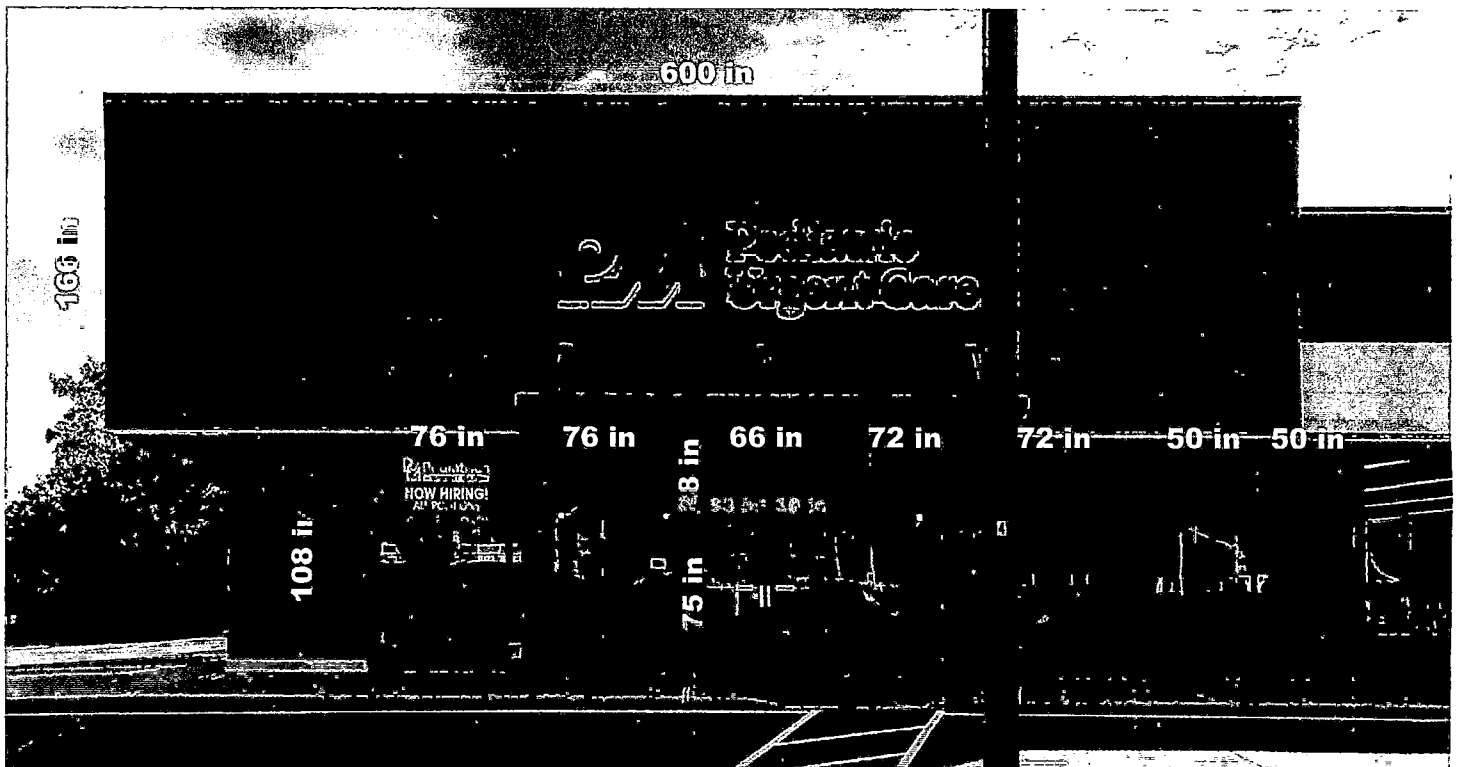


RACEWAY FRONT VIEW

Faces Material: 3/16" Acrylic #7328 Sign White covered with Black Perforated Vinyl (black letters will be white at night, black during the day)
 Border: Black
 Vinyl: Translucent, Midnight- PMS 2098, Night Scrubs - PMS 333
 Return Material: .040 Aluminum
 Depth: 4.75"
 Color: Black
 Wall sign letters not to exceed 18"h
 Specialized characters or logos shall not exceed 24"h
 5" letter depth maximum
 3/16" Minimum thickness for letter faces
 3" Minimum thickness for aluminum returns for illuminated
 Letter Trim: Black with matching screws
 Illumination: White LEDs
 Raceway Paint colors - To match building facade and brushed aluminum for the metal
 Facade Three inch (3") deep wireways
 Secondary Wire: 18 Ga. Low Voltage
 Service Switch: WesTrim #SW20
 Mounting Clips: Mechanical Fasteners as required
 Weep Holes: 1/4" at all water collection areas
 Fastening Hardware: #14 Self-Piercing Screws/PL Polyurethane
 Pass Thru: Palge Wall Buster
 Electrical Powercontrol: Photo Electric Cell and Mechanical Timer
 UL Listed

APPROVED FOR ZONING

2-25-22 Sign
 CHRIS ROMANO, ZONING OFFICER





CLIENT: Signarama Deer Park

PROOF DATE: 2/4/2022

ORDER#

PREPARED BY: Izzy

FILE NAME: Building Signage_02-04-22.fs DESIGN# Sealed Drawing

DIRECTORY NAME: W:\Jobs\Signarama Deer Park\2022 - New Design

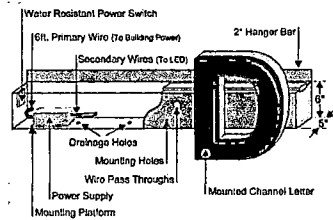
1333 ROUTE 9, TOMS RIVER, NJ 08755
732-914-1150 732-914-1152
SALES@SIGNARAMA-TOMS RIVER.COM

CHANNEL LETTERS ON RACEWAY

210 in

48.6 in

PM Pediatric Urgent Care

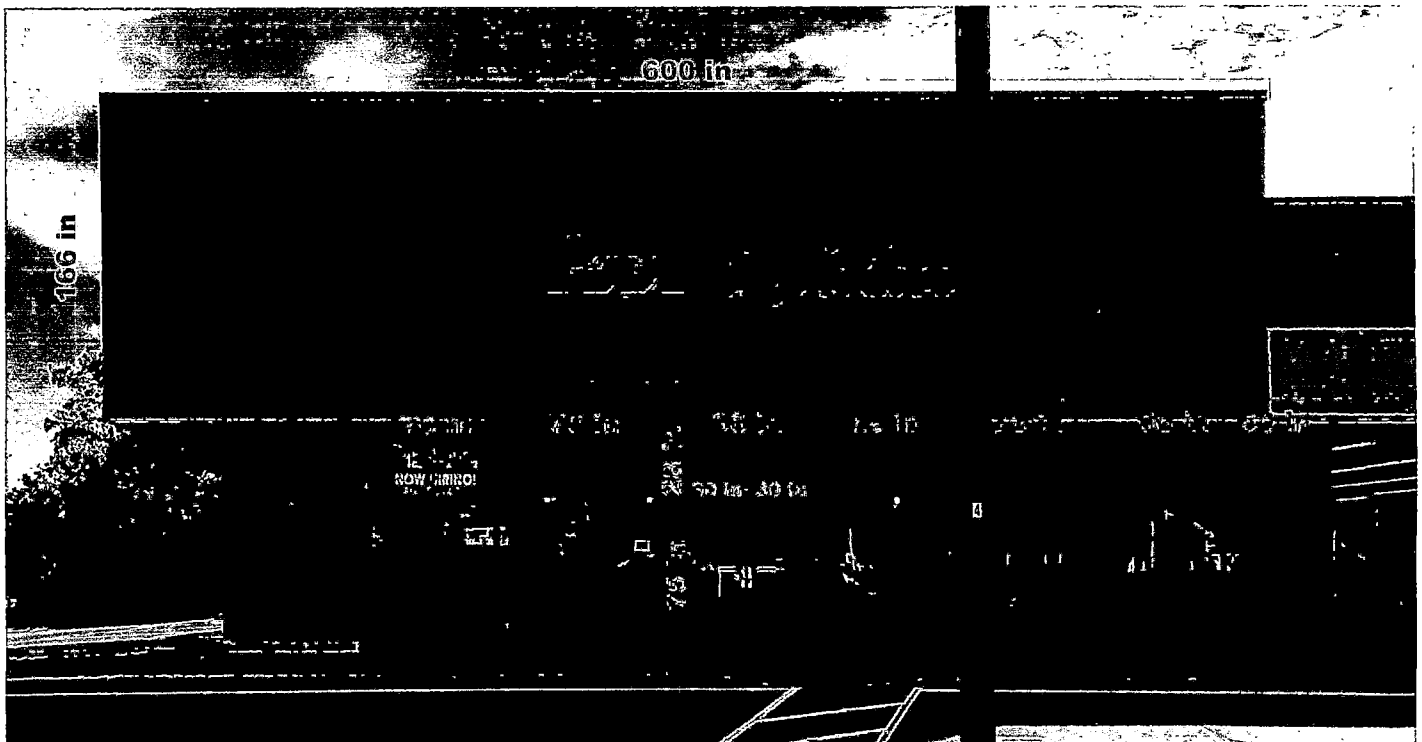


RACEWAY FRONT VIEW

Faces Material: 3/16" Acrylic #7328 Sign White covered with Black Perforated Vinyl (black letters will be white at night, black during the day)
Border: Black
Vinyl: Translucent, Midnight- PMS 2098, Night Scrubs - PMS 333
Return Material: .040 Aluminum
Depth: 4.75"
Color: Black
Wall sign letters not to exceed 18"h
Specialized characters or logos shall not exceed 24"h
5" letter depth maximum
3/16" Minimum thickness for letter faces
3" Minimum thickness for aluminum returns for illuminated
Letter Trim: Black with matching screws
Illumination: White LEDs
Raceway Paint colors - Yo match building facade and brushed aluminum for the metal
Facade Three Inch (3") deep wireways
Secondary Wire: 18 Ga. Low Voltage
Service Switch: WesTrim #SW20
Mounting Clips: Mechanical Fasteners as required
Weep Holes: 1/4" at all water collection areas
Fastening Hardware: #14 Self-Piercing Screws/PL Polyurethane
Pass Thru: Paige Wall Buster
Electrical Powercontrol: Photo Electric Cell and Mechanical Timer
UL Listed

APPROVED FOR ZONING

2-25-22 *Chris Romano*
CHRIS ROMANO, ZONING OFFICER



Multi-Tech Engineering, Inc.

834 Wave Drive, Forked River, NJ 08731
(201) – 803-7546 multitech417@gmail.com

Date: February 5, 2022

Client: Signarama
1333 Lakewood Rd. (Rt. 9)
Toms River, NJ 08755

Project: Pediatric Urgent Care (PM Pediatrics Management Group, LLC)
990 Cedarbridge Ave.
Brick, NJ 08723 Block 670 Lot 9.01

The proposed Store Front sign meets the following design criteria:

WIND LOADS

The sign is designed in accordance with section 1609.0 of the International Building Code / 2018 Chapter 16 to resist 125 MPH wind pressure from all directions per figure 1609.3 based on geographical location, building classification and exposure rating. Also complies with 115 MPH wind load at 3 second gusts. Also complies with NJ Building Codes 2018 Edition.

SNOW LOADS

The sign is designed in accordance with section 1608.0 of the International Building Codes / 2018 Chapter 16 to withstand a 35 lb/sq ft snow load. Snow loading is per figure 1608.2 of the IBC code and is classified as "Ground Snow Loads" which is based on the geographical location. Also complies with NJ Building Codes 2018 Edition.

LIVE LOADS

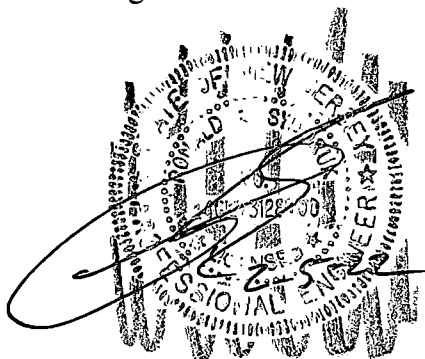
The sign is designed in accordance with section 1607.0 of the International Building Codes / 2018 Chapter 16 to withstand a 35 lb/sq ft live load. Also complies with NJ Building Codes 2018 Edition.

IBC Code 2018 Section H105 Design and Construction (Signs)

The design proposed is in compliance with sections H105.1 through Section H105.6 inclusive. The wind, snow and live loads comply with Section H105 as depicted in Chapter 16 of the IBC 2018 codes.

I hereby certify that this report, calculations, and/or evaluations has been prepared by me or under my direct supervision and that I am a duly licensed engineer under the laws of the States of New Jersey, New York and Pennsylvania.

Ronald R. Sydoruk, P.E.
Professional Engineer
NJ License # 24GE03128600
NY License # 079152
PA License # PE-035473-E



ENGINEERING PERMIT APPLICATION

RECEIVING CLERK _____

PERMIT # _____

BLOCK 670 LOT 9.01 ADDRESS 990 Cedar Bridge Ave**IDENTIFICATION:**

1. WORK SITE ADDRESS 990 Cedar Bridge Ave Bridge NJ
2. APPLICANT Signarama Toms River
3. NAME OF OWNER IN FEE Fourth Venture % Paramount Realty
ADDRESS 1195 Rt 70, Suite 2000 Lakewood NJ
PHONE 732-961-8140 EMAIL tt@paramountrealty.com
4. PRINCIPAL CONTRACTOR Signarama TR
ADDRESS 1333 Route 9 Toms River NJ 08755
PHONE 732-914-1150 EMAIL Sales@signarama-tomsriver.com
5. ARCHITECT OR ENGINEER _____
ADDRESS _____
PHONE _____ EMAIL _____
6. RESPONSIBLE PERSON FOR WORK Signarama / Warren Segall
ADDRESS 1333 Route 9 Toms River NJ 08755
PHONE 732-914-1150 EMAIL Sales@signarama-tomsriver.com

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 _____

PROJECT DESCRIPTION:

- ☐ GRADING/CLEARING ☐ ROAD OPENING ☐ SOIL REMOVAL / FILL
- ☐ RETAINING WALL ☐ POOL ☐ BULKHEAD / DOCK ☐ DWELLING
- ☐ TREE REMOVAL ☐ COMMERCIAL SITE MAINTENANCE ☒ Sign
- ☐ DESCRIPTION Front Lit, Led illuminated

ENGINEERING REVIEW:

DATE RECEIVED _____ DATE REJECTED _____ DATE APPROVED _____ INITIALS _____



Toms River

1333 ROUTE 9, TOMS RIVER, NJ 08755
732-914-1150 732-914-1152
SALES@SIGNARAMA-TOMSRIVER.COM

CLIENT: Signarama Deer Park

PROOF DATE: 2/4/2022

ORDER#

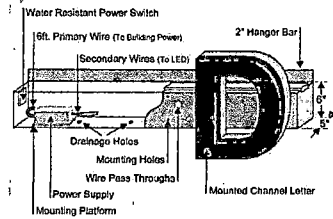
PREPARED BY: Izzy

FILE NAME: Building Signage_02-04-22.fs DESIGN# Sealed Drawing

DIRECTORY NAME: W:\Jobs\Signarama Deer Park\2022 - New Design

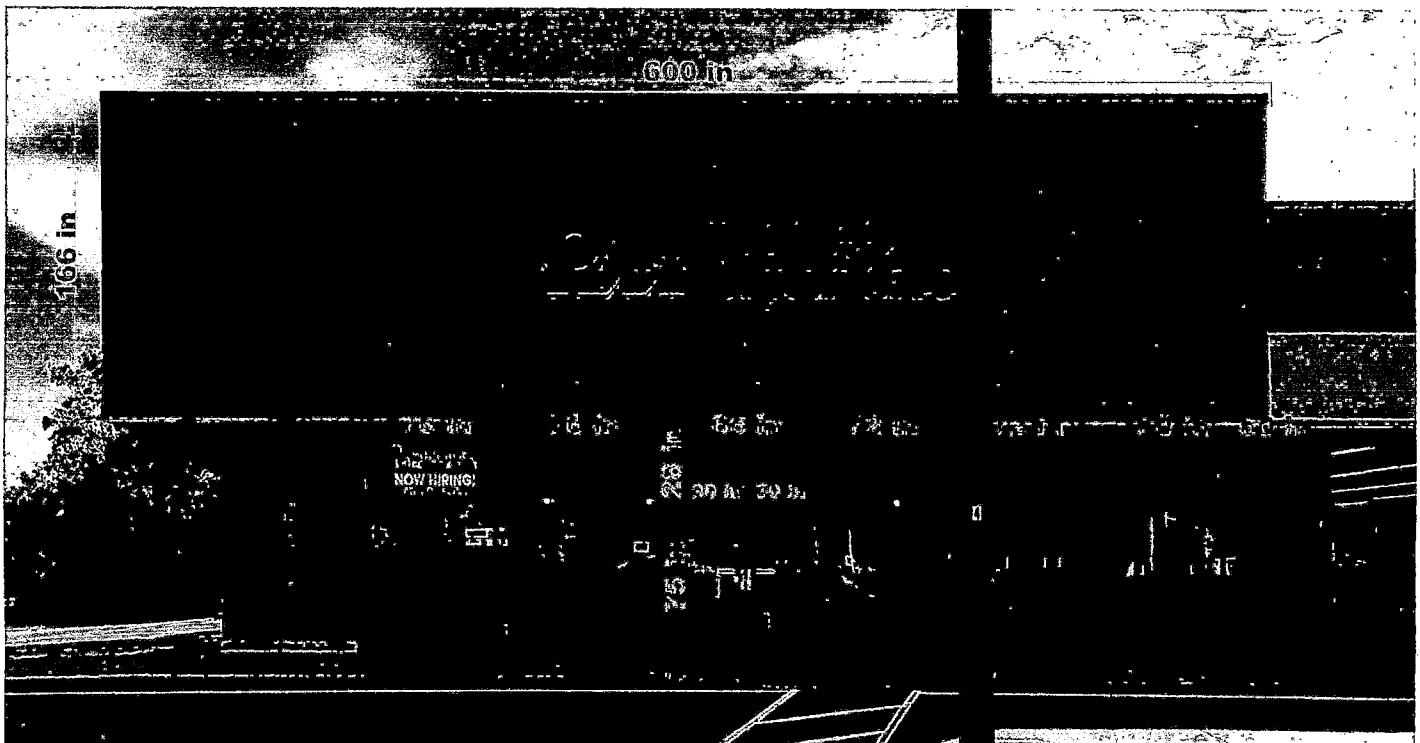
Block 670, Lot 9.01
Customers:
PM Pediatrics Management Group, LLC
930 Cedarbridge Ave
Brick, NJ 08723

CHANNEL LETTERS ON RACEWAY



RACEWAY FRONT VIEW

Faces Material: 3/16" Acrylic #7328 Sign White covered with Black Perforated Vinyl (black letters will be white at night, black during the day)
Border: Black
Vinyl: Translucent, Midnight- PMS 2098, Night Scrubs - PMS 333
Return Material: .040 Aluminum
Depth: 4.75"
Color: Black
Wall sign letters not to exceed 18"h
Specialized characters or logos shall not exceed 24"h
5" letter depth maximum
3/16" Minimum thickness for letter faces
3" Minimum thickness for aluminum returns for illuminated
Letter Trim: Black with matching screws
Illumination: White LEDs
Raceway Paint colors - Yo match building facade and brushed aluminum for the metal
Facade Three inch (3") deep wireways
Secondary Wire: 18 Ga. Low Voltage
Service Switch: WesTrim #SW20
Mounting Clips: Mechanical Fasteners as required
Weep Holes: 1/4" at all water collection areas
Fastening Hardware: #14 Self-Piercing Screws/PL Polyurethane
Pass Thru: Paige Wall Buster
Electrical Powercontrol: Photo Electric Cell and Mechanical Timer
UL Listed



Multi-Tech Engineering, Inc.

834 Wave Drive, Forked River, NJ 08731
(201) - 803-7546 multitech417@gmail.com

Date: February 5, 2022

Client: Signarama
1333 Lakewood Rd. (Rt. 9)
Toms River, NJ 08755

Project: Pediatric Urgent Care (PM Pediatrics Management Group, LLC)
990 Cedarbridge Ave.
Brick, NJ 08723 Block 670 Lot 9.01

The proposed Store Front sign meets the following design criteria:

WIND LOADS

The sign is designed in accordance with section 1609.0 of the International Building Code / 2018 Chapter 16 to resist 125 MPH wind pressure from all directions per figure 1609.3 based on geographical location, building classification and exposure rating. Also complies with 115 MPH wind load at 3 second gusts. Also complies with NJ Building Codes 2018 Edition.

SNOW LOADS

The sign is designed in accordance with section 1608.0 of the International Building Codes / 2018 Chapter 16 to withstand a 35 lb/sq ft snow load. Snow loading is per figure 1608.2 of the IBC code and is classified as "Ground Snow Loads" which is based on the geographical location. Also complies with NJ Building Codes 2018 Edition.

LIVE LOADS

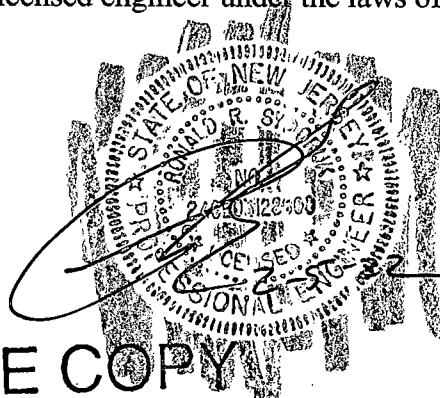
The sign is designed in accordance with section 1607.0 of the International Building Codes / 2018 Chapter 16 to withstand a 35 lb/sq ft live load. Also complies with NJ Building Codes 2018 Edition.

IBC Code 2018 Section H105 Design and Construction (Signs)

The design proposed is in compliance with sections H105.1 through Section H105.6 inclusive. The wind, snow and live loads comply with Section H105 as depicted in Chapter 16 of the IBC 2018 codes.

I hereby certify that this report, calculations, and/or evaluations has been prepared by me or under my direct supervision and that I am a duly licensed engineer under the laws of the States of New Jersey, New York and Pennsylvania.

Ronald R. Sydoruk, P.E.
Professional Engineer
NJ License # 24GE03128600
NY License # 079152
PA License # PE-035473-E



FILE COPY

TOWNSHIP OF BRICK	
RELEASED FOR PERMIT	INITIAL DATE
Building Subcode	24 03/07/22
Plumbing Subcode	
Fire Subcode	
Electrical Subcode	24 22822/31/22
Plan Reviewer	
Plans Released	
Construction Official	



1333 ROUTE 9, TOMS RIVER, NJ 08755
732-914-1150 732-914-1152
SALES@SIGNARAMA-TOMSRIVER.COM

CLIENT: Signarama Deer Park

PROOF DATE: 2/4/2022

ORDER#

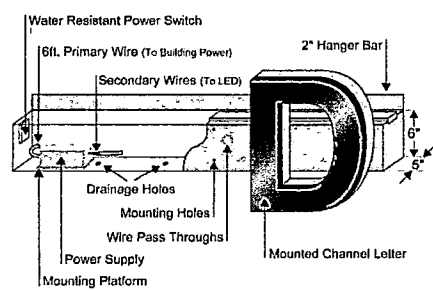
PREPARED BY: Izzy

FILE NAME: Building Signage_02-04-22.fs DESIGN# Sealed Drawing

DIRECTORY NAME: W:\Jobs\Signarama Deer Park\2022 - New Design

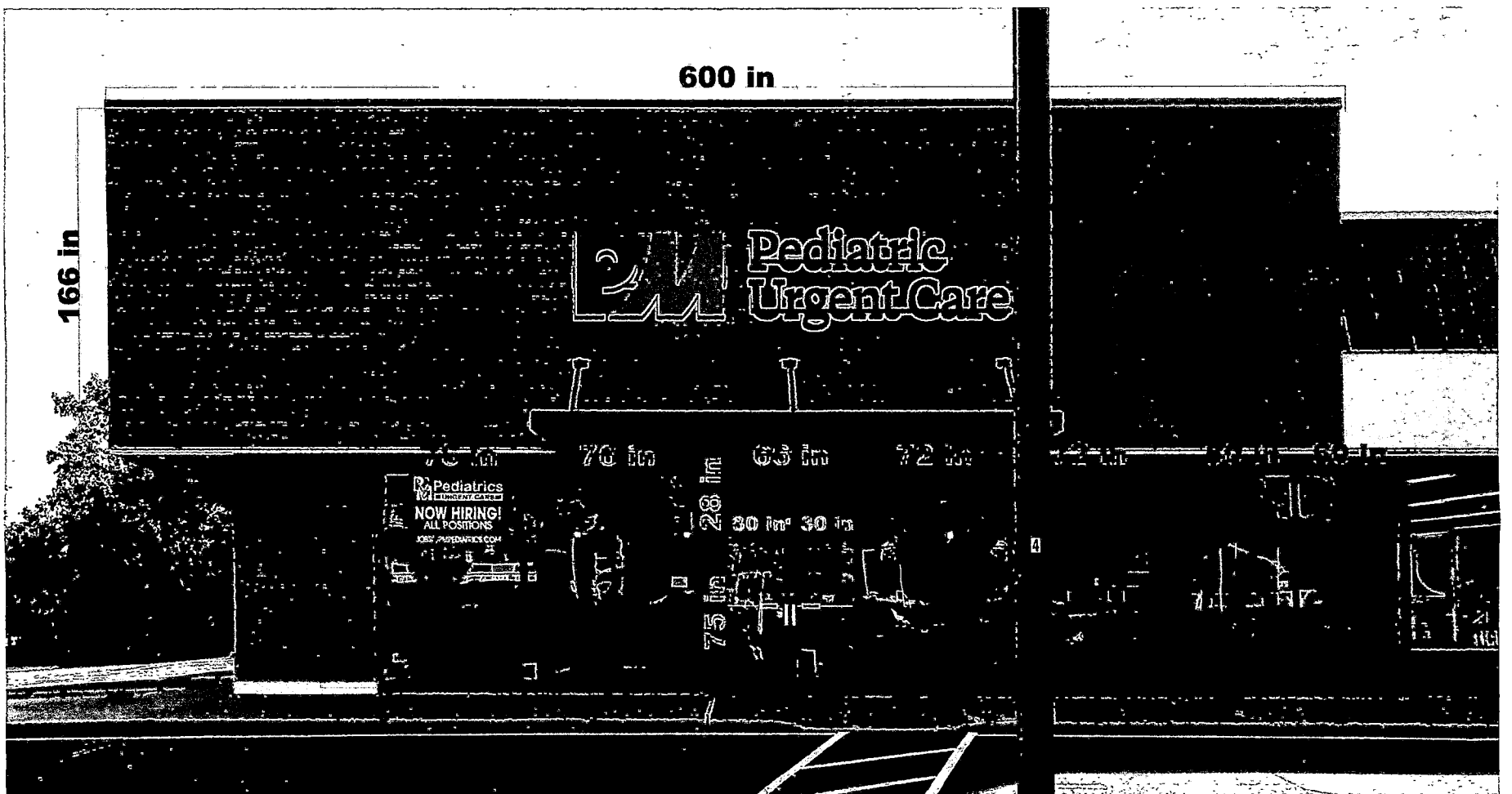
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Customer is:
PM Pediatrics Management Group, LLC
990 Cedarbridge Ave
Brick, NJ 08723

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UL Listed



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TOWNSHIP OF BRICK
RELEASED FOR PERMIT INITIAL DATE
Building Subcode
Plumbing Subcode
Fire Subcode
Electrical Subcode
Plan Reviewer
Plans Released
Construction Official

Ronald R. Sydoruk, P.E.
Professional Engineer
NJ License # 24GE03128600
834 Wave Drive
Forked River, NJ 08731

