BLOCK 852 LOT 4.01 QUALIFICATION CODE ADDRESS (SITE) 7-ELEVEN STORE 856 ROUTE 70 PERMIT NO. 11-0690

RECD MAR - 2011

CONSTRUCTION PERMIT APPLICATION

C-11-000591

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

I. IDENTIFICATION

1. Proposed Work Site at: 7-ELEVEN, 856 ROUTE 70
2. Name of Owner in Fee: SANDELMAN, SANFORD % KIN PROPERTIES
   Tel. (609) 273-3325 e-mail
   Address 185 NW SPANISH RIVER #100, BOCA RATON FL. 33431
   street municipality zip code
3. Ownership in Fee: Public Private ✓
4. Principal Contractor: VAN HORST GENERAL CONTR Tel. (860) 289-3072
   Address 17 NELSON ST. EAST HARTFORD CT E-mail 06108
   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. 06-1495988 FAX: (860) 289-2844
5. Architect or Engineer BOHLER ENGINEERING Contact JOHN SPARACO
   Address 35 TECHNOLOGY DR. WARREN NJ 07059
   Tel. (908) 668-8300 FAX: (908) 754-4701
6. Responsible Person in Charge once Work has Begun EARL HOWLEY
   Tel. (609) 273-3325 FAX: ( )

COMMERCIAL

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	135 ✓		
2. Electrical		110 N 50		
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	$	16		
11. Cert. of Occupancy				
12. Other				
13. TOTAL	$	311		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	1	
2. Height of Structure	NA ft.	
3. Area — Largest Floor	2716 sq. ft.	
4. New Building Area	NA sq. ft.	
5. Volume of New Structure	cu. ft.	
6. Construction Classification		
7. Total Land Area Disturbed	sq. ft.	
8. Flood Hazard Zone		
9. Base Flood Elevation	ft.	
10. Wetlands yes		
no		
11. Max. Live Load		
12. Max. Occupancy Load	53	

OPTIONAL (for office use only)

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building					3/18/11	RA			
3. ☐ Addition									
4. ☐ a. Repair									
☐ b. Alteration									
☒ c. Renovation	4500								
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☒ Plumbing	1500				03/18/11	RA			
7. ☒ Electrical	3200				3-15-11	JS			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	9,200.00								

CALLED 03/17/11

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:

	All Units	Income-restricted
Before Construction		
After Construction		
Net Gain or Loss		

B. NON-RESIDENTIAL

1. State Specific Use: RETAIL STORE
2. Use Group: M
3. Change in Use Group, Indicate Former:

III. DO YOU WANT: (optional)

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.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 have been given, including such certification as the construction official may require.

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

Signature _____ Date _____

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

I hereby certify the following as required by the 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 have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

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

( ) Check if contractor.

Agent Name Bruce Boyer

Address c/o Bohler Engineering
35 Technology Dr. Warren NJ 07059

Telephone (908) 668-8300

Signature Bruce E Boyer

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 07/26/2011
Control Number C-11-000591
Permit Number 11-0690
Permit Issue Date 03/21/2011
Certificate Number 11-0690

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 856 ROUTE 70 7-11 Brick Township, NJ Block: 852 Lot: 4.01 Qual:

Owner in Fee: SANDELMAN,SANFORD %KIN PROPERTIES

Owner Address: 185 NW SPANISH RIVER #100 BOCA RATON FL 33431

Telephone:

Contractor SANDELMAN,SANFORD %KIN PROPERTIES

Address 185 NW SPANISH RIVER #100 BOCA RATON FL 33431

Telephone: Fax:

License Number or Builders Registration Number: 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: ALTERATION - -COMMERCIAL, EMERGENCY/EXIT LIGHTS reconfigure coffee island and add hot food prep. area

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: 07/26/2011 U.C.C. F260 (rev. 08/05)

CONSTRUCTION PERMIT

Date Issued 03/01/11
Control # C-11-000591
Permit # 11-0690

IDENTIFICATION Block: 852 Lot: 4.01 Qualifier
Work Site Location: 856 ROUTE 70 7-11 Brick Township, NJ
Owner in Fee: SANDELMAN,SANFORD %KIN PROPERTIES 185 NW SPANISH RIVER #100 BOCA RATON FL 33431
Telephone:
Contractor
Address
Telephone:
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ALTERATION - -COMMERCIAL, EMERGENCY/EXIT LIGHTS reconfigure coffee island and add hot food prep. area

PAYMENTS (Office Use Only)

Building	$135
Electrical	$110
Plumbing	$50
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$16
CO Fee	
Other	$0
Total	$311
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 $9,200

Construction Official

3-16-11
Date

U.C.C. F170
equiv (rev 8/03)

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.

XX06 SERV.006

- [ ] Required inspections for all subcodes for one- and two-family dwellings are as follows:

#0690
BUILDING $135.00
ELECTRIC $110.00
PLUMBING $50.00
$16.00
$1.00

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.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 11-0690

Date Issued / Permit # 03/21/11

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

Block 852 Lot 4.01 Qualification Code

Work Site Location 7-ELEVEN STORE
856 ROUTE 70

Owner in Fee: SANDELMAN, SANFORD 40 KIN PROPERTIES

Tel. (609) 273-3325 e-mail

Address 185 NW SPANISH RIVER #100, BOCA RATON FL. 33431
street municipality zip code

Contractor: ALL STAR PLUMBING Tel. (732) 223-3511

Address 125A PARKER AVE e-mail

MANASQUAN COMMERCIAL

Contractor License No. 7112 Exp. Date 6/30/11

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

Federal Emp. ID No. 061200717 FAX: (732) 223-9185

B. PLUMBING CHARACTERISTICS

Use Group Present M Proposed M

Building Sewer Size EXIST Public Sewer ✓ Private Septic

Water Service Size " Public Water ✓ Private Well

Est. Cost of Plumbing Work $ 1500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: 03.14.11 Approved by: PA
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 03.14.11
Approved by: PA

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 7-26-11
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			07.27.11	PA

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: Michael Flemming

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
INTERIOR RENOVATION

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
1	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	
1	Stacks 3/8" CW LINE	
	Other	

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

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued
Control #
Permit #

11-0690
03/21/11

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

Block 852 Lot 4.01 Qualification Code

Work Site Location 7-Eleven Store
856 ROUTE 70

Owner in Fee: SANDELMAN, SANFORD % KIN PROPERTIES

Tel. (609) 273-3325 e-mail

Address 185 NW SPANISH RIVER #100, BOCA RATON FL 33431
street municipality zip code

Contractor: HAYMAN ELECTRIC, INC. Tel. (856) 691-8377

Address 885 E. SHERMAN AVENUE e-mail: hayelect@~~comcast~~.net Verizon
VINELAND, NEW JERSEY 08361

Contractor License No. 34EI00665000 Exp. Date 3-31-2012

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH00780700

Federal Emp. ID No. 22-2815179 FAX: (856) 692-4178

Cell (609) 381-4018

B.ELECTRICAL CHARACTERISTICS

Use Group: Present M Proposed M

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

Building Occupied as RETAIL STORE Utility Co. JCP&L

COMMERCIAL

Estimated Cost of Electrical Work $ 3,200

C. CERTIFICATION IN LIEU OF OATH

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

Walt Hayman
Applicant Signature/ Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
2		Lighting Fixture	
10		Receptacles	
2		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
1		Emergency & Exit Lights	
3		Communications Points	
18		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Rang/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
2	30A	KW Elec. Water Heater Hot Dog Relocate	
2	20A	KW Dishwasher Freezers	
		HP Garbage Disposal	
1	30A	KW Central A/C Unit Floor Freezer Relocate	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
1	30A 3ph	HP Motors 1/+ HP Comp. Sonetub	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1		Power Pole	

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Date Initial

Joint Plan Review Required

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date: 3-15-11

Approved by: JS

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 7/26/11

Approved by: JJ

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final		7-21-11	JJ	
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

UCC/F-120
Professional Printing
(856) 468-7933

1. White-Inspector Copy 2. Canary-Applicant Copy
3. Pink-Office Copy 4. White Tag-Office Copy

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

06/08

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 11-0690

Date Issued / Permit # 03/21/11

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

Block 852 Lot 4.01 Qualification Code

Work Site Location 7-ELEVEN STORE
856 ROUTE 70

Owner in Fee: SANDELMAN, SANFORD & KIN PROPERTIES

Tel. (609) 273-3325 e-mail

Address 185 NW SPANISH RIVER #100, BOCA RATON FL 33431
street municipality zip code

Contractor: VAN Horst General Contractor Tel. (860) 289-3072

Address 17 Nelson St. E. Hartford Ct. e-mail

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

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

Federal Emp. ID No. 06-1495988 FAX: (860) 289-2844

JOB SUMMARY (Office Use Only)

COMMERCIAL

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[X] Other	3/8/11	CA

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 7/26/11 CA
Approved by:

INSPECTIONS Type:	Dates (Month/Day) 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			7/21/11	LW
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present M Proposed M
Constr. Class Present Proposed
No. of Stories 1
Height of Structure NA Ft.
Area — Largest Floor 2716 Sq. Ft.
New Bldg. Area/All Floors NA Sq. Ft.
Volume of New Structure / Cu. Ft.
Total Land Area Disturbed / Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 4500.00
2. Rehabilitation $ —
3. Total (1+ 2) $ 4500.00

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

PROPOSED INTERIOR RENOVATION TO EXISTING RETAIL STORE

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
[X] Other INTERIOR RENOVATION
[ ] Demolition

FEE (Office Use Only)
$

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

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued
Control #
Permit #

11-0690
03/21/11

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

Block 852 Lot 4.01 Qualification Code

Work Site Location 7-Eleven Store
856 ROUTE 70

Owner in Fee: SANDELMAN, SANFORD c/o KIN PROPERTIES

Tel. (609) 273-3325 e-mail

Address 185 NW SPANISH RIVER #100, BOCA RATON FL. 33431
street municipality zip code

Contractor: HAYMAN ELECTRIC, INC. Tel. (856) 691-8377

Address 885 E. SHERMAN AVENUE e-mail: hayelect@comcast.net
VINELAND, NEW JERSEY 08361 Verizon

Contractor License No. 34EI00665000 Exp. Date 3-31-2012

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH00780700

Federal Emp. ID No. 22-2815179 FAX: (856) 692-4178

Cell (609) 381-4018

B.ELECTRICAL CHARACTERISTICS

Use Group: Present M Proposed M

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

Building Occupied as RETAIL STORE Utility Co. JCP&L

Estimated Cost of Electrical Work $ 3,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Date Initial

Joint Plan Review Required

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[✓] Elec. Plans Approved

Date: 3-15-11

Approved by: JS

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. 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 I am authorized to make this application, and perform the work listed on this application.

Walt Hayman
Applicant Signature/ Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
2		Lighting Fixture	
10		Receptacles	
2		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
1		Emergency & Exit Lights	
3		Communications Points	
18		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Rang/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
2	30A	KW Elec. Dryer/Receptacle Hot Door Relocate	
2	20A	KW Dishwasher Fixtures	
		HP Garbage Disposal	
1		KW Central A/C Unit Freezer Relocate	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
1	30A 3HP	Motors 1/+ HP Comp. Same Job	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1		Power Pole	

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

UCC/F-120
Professional Printing
(856) 468-7933

1. White-Inspector Copy 2. Canary-Applicant Copy
3. Pink-Office Copy 4. White Tag-Office Copy

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

06/08

ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued
Control #
Permit #

11-0690
03/21/11

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

Block 852 Lot 41.01 Qualification Code

Work Site Location 7-Eleven Store
856 ROUTE 70

Owner in Fee: SANDELMAN SANFORD C/O KIN PROPERTIES

Tel. (609) 275-3525 e-mail

Address 185 NW SPANISH RIVER BLVD, BOCA RATON FL. 33431
street municipality zip code

Contractor: HAYMAN ELECTRIC, INC. Tel. (856) 691-8377

Address 885 E. SHERMAN AVENUE e-mail: hayelect@comcast.net
VINELAND, NEW JERSEY 08361

Contractor License No. 34EI00665000 Exp. Date 8-31-2012

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH00780700

Federal Emp. ID No. 22-2815179 FAX: (856) 692-4178

Cell (609) 381-4018

B. ELECTRICAL CHARACTERISTICS

Use Group: Present M Proposed M

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

Building Occupied as RETAIL STORE Utility Co. JCP&L

Estimated Cost of Electrical Work $ 3,200

C. CERTIFICATION IN LIEU OF OATH

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

Walt Hayman
Applicant Signature/ Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
3		Lighting Fixture	
10		Receptacles	
2		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
1		Emergency & Exit Lights	
3		Communications Points	
18		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Rang/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
2	30A	KW Elec. Dryer Receptacle Hot Dog Relocate	
2	20A	KW Dishwasher Fixtures	
		HP Garbage Disposal	
1		KW Central A/C Unit Freezer Relocate	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
1	30A 3ph	AMP Motors 1/+ HP Comp. Sonotub	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1		Pwr Pole	

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Date Initial

Joint Plan Review Required

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[✓] Elec. Plans Approved

Date: 3-15-11

Approved by: JS

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. 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				

Dates (Month/Day)

UCC/F-120
Professional Printing
(856) 468-7933

1. White-Inspector Copy 2. Canary-Applicant Copy
3. Pink-Office Copy 4. White Tag-Office Copy

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

06/08

DATE	JOB CONDITION / COMMENTS

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 11-0690

Date Issued / Permit # 03/21/11

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

Block 852 Lot 4.01 Qualification Code

Work Site Location 7-ELEVEN STORE
856 ROUTE 70

Owner in Fee: SANDELMAN, SANFM & 4/0 KIN PROPERTIES

Tel. (609) 273-3325 e-mail

Address 185 NW SPANISH RIVER #100, BOCA RATON FL 33431
street municipality zip code

Contractor: VAN Horst General Contractor Tel. (860) 289-3072

Address 17 Nelson St. E. Hartford Ct. e-mail

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

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

Federal Emp. ID No. 06-1495988 FAX: (860) 289-2844

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[X] Other	3/8/11	

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

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

INSPECTIONS Type:	Failure	Dates (Month/Day) 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				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present M Proposed M
Constr. Class Present Proposed
No. of Stories 1
Height of Structure NA Ft.
Area — Largest Floor 2716 Sq. Ft.
New Bldg. Area/All Floors NA Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $4500.00
2. Rehabilitation $ —
3. Total (1+ 2) $4500.00

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

PROPOSED INTERIOR RENOVATION TO EXISTING RETAIL STORE

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
[X] Other INTERIOR RENOVATION
[ ] Demolition

FEE (Office Use Only)
$

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

BUILDING 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 _____ Lot _____ Qualification Code _____

Work Site Location _____

_____

Owner in Fee: _____

Tel. (_____) _____ e-mail _____

Address _____
street municipality zip code

Contractor: _____ Tel. (_____) _____

Address _____ e-mail _____

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

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

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

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

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

INSPECTIONS Type:	Failure	Dates (Month/Day) 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				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class 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.
Total Land Area Disturbed _____ Sq. Ft.

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

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

_____
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

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 $ _____

PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 11-0690

Date Issued / Permit # 03/21/11

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

Block 852 Lot 4.01 Qualification Code

Work Site Location 7-ELEVEN STORE
RT 6 ROUTE 70

Owner in Fee: SANDELMAN, SANFORD C/O K.N. PROPERTIES

Tel. (609) 273-3325 e-mail

Address 195 NW SPANISH RIVER #100, BOCA RATON FL. 33431
street municipality zip code

Contractor: ALL STAR PLUMBING Tel. (732) 223-3511

Address 125A PARKER AVE e-mail

MANASQUAN

Contractor License No. 7112 Exp. Date 6/30/11

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

Federal Emp. ID No. 061200717 FAX: (732) 223-9885

B. PLUMBING CHARACTERISTICS

Use Group Present M Proposed M

Building Sewer Size EXIST Public Sewer ✓ Private Septic

Water Service Size " Public Water ✓ Private Well

Est. Cost of Plumbing Work $ 1500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
[ ] Partial Underslab Utilities Approved
Date: 03.14.11 Approved by: PA
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg [ ] Elec [ ] Fire [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 03.14.11
Approved by: PA

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: Michael Mennig

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
INTERIOR RENOVATION

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
1	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	
1	Stacks 3/8" CW LINE	
	Other	

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

PLUMBING SUBCODE
TECHNICAL SECTION

New Jersey Uniform Construction Code

Date Received 11-0650
Control #
Date Issued 03/21/11
Permit #

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

Block 857 Lot Qualification Code

Work Site Location

Owner in Fee:

Tel. ( ) 273-3305 e-mail

Address (street, municipality, zip code) 33431

Contractor: All Star Plumbing Tel. (732) 223-3511

Address 125A Parker Ave e-mail

Manasquan

Contractor License No. 7112 Exp. Date 6/30/11

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

Federal Emp. ID No. 061.220717 FAX: (732) 223-7885

B. PLUMBING CHARACTERISTICS

Use Group Present M Proposed M

Building Sewer Size Public Sewer ✓ Private Septic

Water Service Size Public Water ✓ Private Well

Est. Cost of Plumbing Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: 03.14.11 Approved by: PA

[ ] Plumbing Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 03.14.11

Approved by: PA

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

Dates (Month/Day)

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: Michael Fleming

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Interior Renovation

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
1	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	
1	Stacks 3/4" lines	
	Other	

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

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

BOHLER
ENGINEERING

35 Technology Drive
Warren, NJ 07059
PHONE 908.668.8300
FAX 908.754.4401

March 3, 2011
Via FedEx

Construction Code Official
Brick Township
401 Chambers Bridge Road
Bricktown, NJ 08723

RE: 7-Eleven Store #34440
Block 852; Lot 4.01
856 Route 70
Brick Township
Ocean County, New Jersey
BENJ File No. J110948

Dear Mr. Daniel Newman:

On behalf of 7-Eleven Stores, Bohler Engineering is transmitting herein an application package for construction permits pertaining to the repairs and renovations associated with the above referenced store. Contained in this application package are the following:

- Three (3) sets of the plans (Existing Floor Plan, Proposed Floor Plan and Equipment Schedule);
- One (1) Construction Permit Application Jacket;
- One (1) Building Permit Application;
- One (1) Plumbing Permit Application (and accompanying sketch and equipment sheets);
- One (1) Electrical Permit Application and the equipment sheets.

It is 7-Eleven's goal is to begin this effort on March 20, 2011. We realize, of course, that your municipal review workload may vary, so we respectfully ask that when your workload allows, the review be expedited within those restraints.

We have made a concentrated effort to transmit a complete application package, however if you have any questions or require any additional information, please do not hesitate to contact me.

Thank you in advance for your cooperation in this matter.

Sincerely,

BOHLER ENGINEERING

John M. DeRiso, P.E., P.P.

JMD/scr - J:\2010\J100708\Due Diligence\34440 Brick\34440 Construction Department 03-03-11.doc
Enclosures

Cc: Brian McMorrow, Bohler Engineering
Bruce Boyer, Bohler Engineering
Earl Hawley, Bovis Land Lease, Inc.
Van Horst

IN COFFEE COUNTER

Delfield®

N8100B

Drop-In Self-Contained Mechanically Cooled Cold Pans

Project _____

Item _____

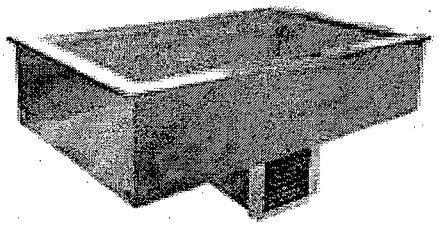
Quantity _____

CSI Section 11400

N8100B: DROP-IN SELF-CONTAINED MECHANICALLY COOLED COLD PANS

MODELS

❑ N8118B	18" mechanically cooled cold pan	❑ N8169B	69" mechanically cooled cold pan
❑ N8130B	30" mechanically cooled cold pan	❑ N8181B	81" mechanically cooled cold pan
❑ N8143B	43" mechanically cooled cold pan		
❑ N8156B	56" mechanically cooled cold pan		



Model N8156B

STANDARD FEATURES

- NSF-7 certified performance
- Integral V-stamped pan rest
- Polyurethane foam insulation
- Push-in perimeter gasket
- Stainless steel louver provided
- Environmentally friendly HFC-134A refrigerant
- 1" drain standard
- Thermostat for temperature control

OPTIONS AND ACCESSORIES

- ❑ Custom sizes and styles
- ❑ Single or double service flip-up sneezeguards
- ❑ Relocate compressor
- ❑ Mullion fan assembly
- ❑ Remote refrigeration (specify refrigerant)
- ❑ *220V/50 cycle

Inclusion of this option will alter the electrical specifications of the unit

SPECIFICATIONS

Top is one-piece 20-gauge stainless steel. Interior liner is 22-gauge stainless steel and is creased to a 1.00" (2.43cm) diameter drain. Integral V-stamped pan rest recessed 2" (5.1cm) to accommodate 12" x 20" (30.5cm x 50.8cm) pans 4" (10.2cm) or 6" (15.2cm) deep supplied by others. Product temperatures of 33°F (1°C) to 41°F (5°C) are maintained at 86°F (29°C) ambient room temperature, meeting NSF 7 requirements. Adapter bars are standard.

Sides and bottom are wrapped with refrigeration lines and insulated with high-density closed-cell polyurethane. Exterior housing is 24-gauge galvanized steel.

Condensing unit is suspended below the cold pan on a 16-gauge steel frame and uses HFC-134a refrigerant. Temperature control has an ON/OFF position to shut down cold pan. Unit has an 8' (2.4m) cord and NEMA 5-15P plug.

A stainless steel louver is provided for field installation; cutout dimension is 12" x 23.5" (30.5cm x 59.7cm). A second opening at the rear of the cabinet should be provided at installation to allow for proper air circulation.

Delfield®
980 S. Isabella Road
Mt. Pleasant, MI 48858
www.delfield.com
Phone: 800-733-8948
Fax: 800-669-0619
Email: info@delfield.com

Approval _____

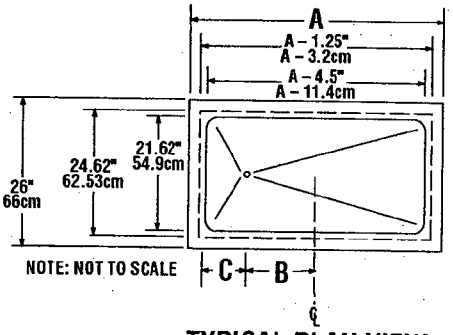
Date _____

Delfield

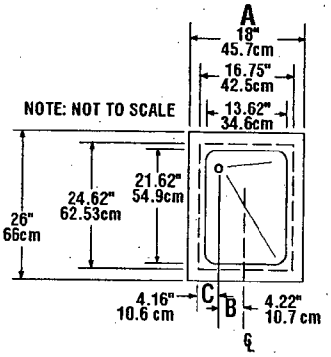
Model #_____

CSI Section 11400

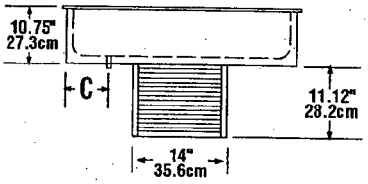
Drop-In Self-Contained Mechanically Cooled Cold Pans



TYPICAL PLAN VIEW
N8100B MODELS (EXCEPT N8118B)



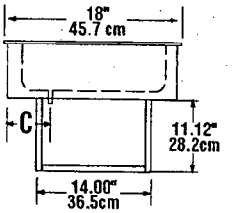
PLAN VIEW
MODEL N8118B



NOTE: NOT TO SCALE

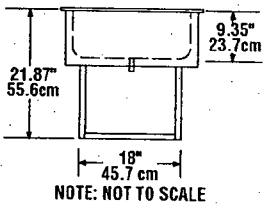
TYPICAL ELEVATION VIEW
N8100B MODELS (EXCEPT N8118B)

DRAIN LOCATION IF FACING SERVICE SIDE: N8118B-BACK, ALL OTHER N8100B MODELS-LEFT



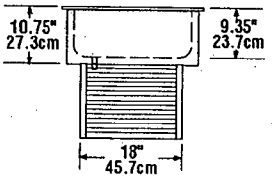
NOTE: NOT TO SCALE

FRONT ELEVATION VIEW
MODEL N8118B



NOTE: NOT TO SCALE

TYPICAL RIGHT END VIEW
N8100B MODELS (EXCEPT N8118B)



NOTE: NOT TO SCALE

RIGHT END VIEW
MODEL N8118B

Mechanical Data: Standard Unit

MODEL NUMBER	A	B	C	COUNTER CUTOUT DIMENSIONS (D x L)	# OF 12" x 20" PANS HELD	VOLTAGE HERTZ/PHASE	H.P.	AMPS	BTU LOAD	SYS. CAP.	SHIPPING WEIGHT
N8118B	18" 45.7cm	4.22" 10.7cm	4.16" 10.6cm	17" X 25" 43.2cm x 63.5cm	1	115/60/1	1/5	4.0	204	708	103 lbs 46 kg
N8130B	30.75" 78.1cm	8.75" 22.72cm	6.00" 15.24cm	29.75" x 25" 75.6cm x 63.5cm	2	115/60/1	1/5	4.0	379	812	161 lbs 72 kg
N8143B	43.5" 110.5cm	9.82" 24.9cm	11.31" 28.7cm	42.50" X 25" 108.58cm x 63.5cm	3	115/60/1	1/5	4.0	569	889	184 lbs 83 kg
N8156B	56.25" 142.9cm	9.82" 24.9cm	17.69" 44.9cm	55.25" x 25" 140.3cm x 63.5cm	4	115/60/1	1/4	7.0	758	1373	233 lbs 105 kg
N8169B	69" 175.3cm	9.82" 24.9cm	24.06" 61.1cm	68" X 25" 172.7cm x 63.5cm	5	115/60/1	1/4	7.0	948	1469	243 lbs 109 kg
N8181B	81.75" 208cm	9.82" 24.9cm	30.43" 77.3cm	80.75" x 25" 205.1cm x 63.5cm	6	115/60/1	1/3	8.0	1138	1547	260 lbs 117 kg

Delfield

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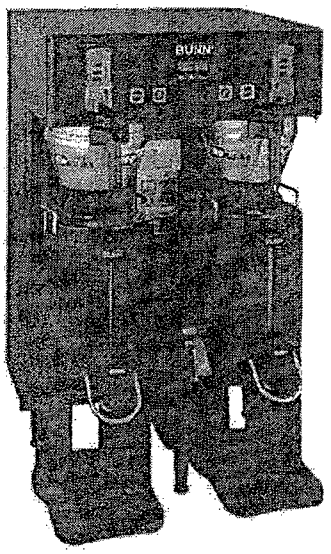
BUNN®

ITEM#

PROJECT

DATE

BrewWISE® Dual ThermoFresh® DBC Brewer

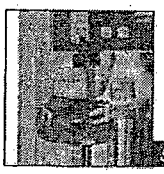


Model Dual TF DBC with 1.5 gallon TF Servers
(servers sold separately)
Dimensions: 35.7" H x 21.8" W x 20.2" D
(90.7cm H x 55.4cm W x 51.3cm D)

Features

BrewWISE® Brewing System with ThermoFresh® Servers

- Brews 16.3 to 18.9 gallons (61.7 to 71.5 litres) of perfect coffee per hour.
- Stores individual coffee recipes so operator can easily brew many varieties.
- Coffee extraction controlled with pre-infusion and pulse brew, digital temperature control, and large sprayhead; coffee strength controlled with variable by-pass.
- Easy pulse interface allows automatic programming of pulse routine.
- Operate any combination of BrewWISE® equipment error-free with wireless brewer-grinder interface through the Smart Funnel®.
- SplashGard® funnel and optional funnel locks help improve safety.
- Black and stainless models available.
- ThermoFresh® servers are vacuum insulated to keep coffee hot and fresh for hours.
- Create coffee recipe cards with custom recipes, ad cards with messages that display on the brewer LCD, and dedicated funnels for special coffees with the BrewWISE Recipe Writer using your PC (Windows® compatible).
- Preventive maintenance kit: 39641.0000. BUNN PM KIT



Stainless steel finish available

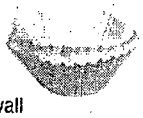
For current specification sheets and other information, go to *www.bunn.com*.

Related Products

Easy Clear® EQHP-25L
Product No.: 39000.0002

Easy Clear® EQHP-25
Product No.: 39000.0005

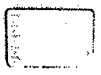
Single/Dual Filter Pack
Product No.: 20138.0000
Packed per case: 500
Dimensions:
5¼" Base x 4¼" Sidewall
13.3 cm Base x 10.8 cm Sidewall



BrewWISE® Recipe Writer (BRW)
Product No.: 34444.0000

Recipe Card
Product No.: 34447.0000
- Program a recipe to be used on brewer or grinder.

Ad Card
Product No.: 34448.0000
- Program a message to appear on the brewer's display.



Multi-Hopper Grinder (MHG)
Product No.: 35600.0002
Black finish

TF Servers
Product No.: 39550.0001
- 1.5 gallon, Mechanical Gauge, Black

Product No.: 39550.0000
- 1.5 gallon, Mechanical Gauge, Stainless Steel

TF Digital Servers
Product No.: 39550.0051
- 1.5 gallon, Digital Gauge, Black

Product No.: 39550.0050
- 1.5 gallon, Digital Gauge, Stainless Steel

Model	Agency Listing
Dual TF DBC	

Dimensions & Specifications

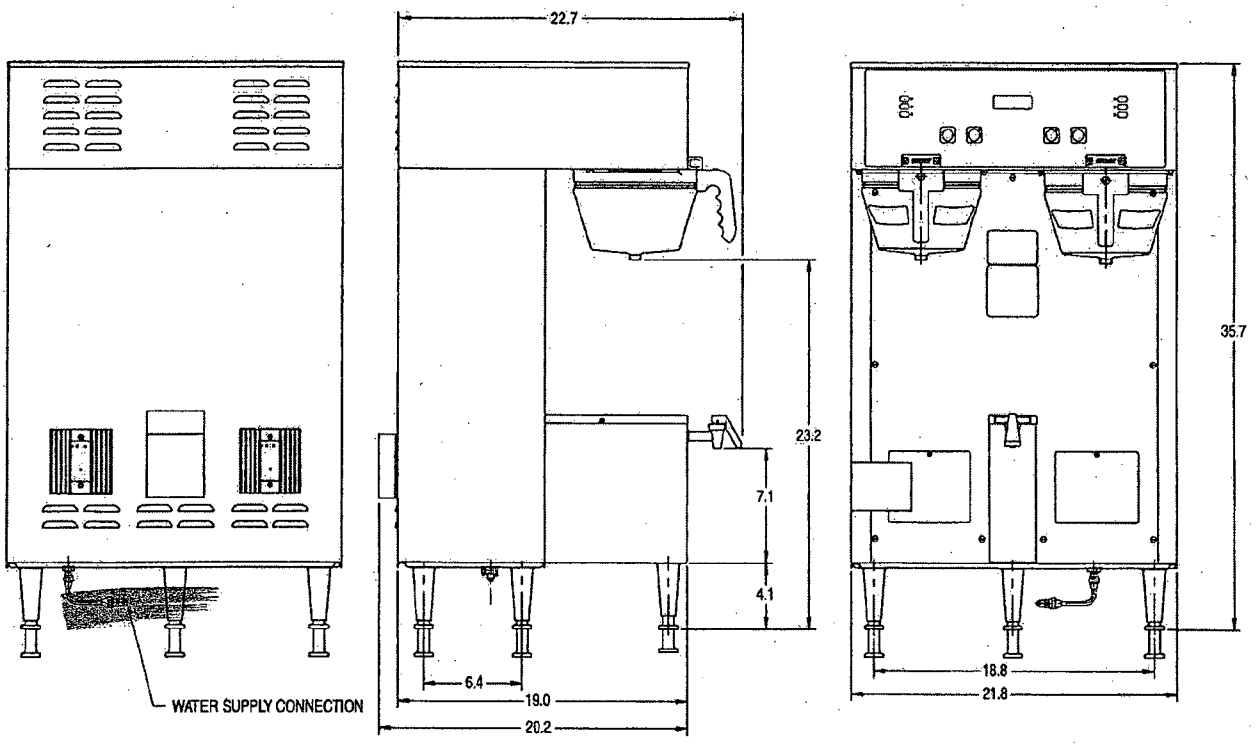
Model	Product #	Volts	Amps	Tank Heater Watts	Total Watts	Brewing Capacity	Cu. Ft.	Shipping Weight	Funnel Locks	Cord Attached
Dual TF DBC	34600.0000	120/240	27.5	2@3300	6600	18.9 gal/hr	14.6	92.5 lbs.	Yes	No
Dual TF DBC*	34600.0001	120/240	27.5	2@3300	6600	18.9 gal/hr	14.6	92.5 lbs.	Yes	No
Dual TF DBC	34600.0002	120/240	27.5	2@3300	6600	18.9 gal/hr	14.6	92.5 lbs.	No	No
Dual TF DBC*	34600.0003	120/240	27.5	2@3300	6600	18.9 gal/hr	14.6	92.5 lbs.	No	No
Dual TF DBC	34600.0004	120/208	27.4	2@2850	5700	16.3 gal/hr	14.6	92.5 lbs.	No	No
Dual TF DBC*	34600.0005	120/208	27.4	2@2850	5700	16.3 gal/hr	14.6	92.5 lbs.	No	No
Dual TF DBC	34600.0006	120/208	27.4	2@2850	5700	16.3 gal/hr	14.6	92.5 lbs.	Yes	No
Dual TF DBC*	34600.0007	120/208	27.4	2@2850	5700	16.3 gal/hr	14.6	92.5 lbs.	Yes	No

** Models have black decor.*

Brewing capacity: *based upon incoming water temp of 60°F (140°F rise).*
Models listed as 120/208V or 120/240V must be connected to 208V or 240V electrical service respectively. Please refer to the installation manual.

Electrical: Brewer is 3-wires plus ground service rated 120/208V or 120/240V, single phase, 60Hz.

Plumbing: 20-90 psi (138-621 kPa). Machine supplied with ⅜" male flare fitting. Tank capacity: 10.6 gallons *(40.1 L)*



Bunn-O-Matic® Corporation - 1400 Stevenson Drive Springfield, Illinois 62703 • 800-637-8606 • 217-529-6601 • Fax 217-529-6644 • www.bunn.com

All dimensions shown in inches.