

BLOCK 842 LOT 28 QUALIFICATION CODE _____ ADDRESS (SITE) 1715-4 RT 88W BRICK, N.J. 08724 PERMIT NO. 12-1334



CONSTRUCTION PERMIT APPLICATION C12-001415

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

I. IDENTIFICATION

1. Proposed Work Site at: 1715-4 RT 88W, BRICK, N.J. 08724
2. Name of Owner in Fee: OXFORD INTERNATIONAL LLC
Tel. (732) 740-6173 e-mail _____
Address 1361 VINCENZO DRIVE, TOMS RIVER, N.J. 08753
3. Ownership in Fee: Public _____ Private X Municipality _____ Zip code _____
4. Principal Contractor: DEANE'S CUISINE (SELF) Tel. (732) 701-1513
Address 47 BRUSHY NEAR DRIVE, BRICK, N.J. 08724 e-mail _____
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): Deane's Cuisine
Federal Emp. ID No. _____ FAX: (_____) _____
5. Architect or Engineer WALTER J. HESSBERGER Contact WALTER HESSBERGER
Address 2715 HADDER AVE, SUITE 2C e-mail _____
Tel. (732) 262-7444 FAX: (_____) _____
6. Responsible Person in Charge once Work has Begun VINCENT SANTILLI
Tel. (732) 701-1513 FAX: (732) 701-1514

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>78</u>	<u>✓</u>	
2. Electrical	\$ <u>40</u>	<u>✓</u>	
3. Plumbing	\$ <u>110</u>	<u>✓</u>	
4. Fire Protection	\$ <u>250</u>	<u>✓</u>	
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee	\$ <u>8</u>		
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>486</u>		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	<u>1</u>	
2. Height of Structure		ft.
3. Area — Largest Floor	<u>1030</u>	sq. ft.
4. New Building Area		sq. ft.
5. Volume of New Structure		cu. ft.
6. Max. Live Load		
7. Max. Occupancy Load		
8. If Industrialized Building: State Approved _____ HUD _____		
9. Total Land Area Disturbed		sq. ft.
10. Flood Hazard Zone		
11. Base Flood Elevation		ft.
12. Wetlands yes _____ no _____		

IIa. PROPOSED WORK

- ☒ 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>400</u>				<u>5/15/12</u>	<u>JA</u>			
<u>1800</u>				<u>5/20/12</u>	<u>JS</u>			
<u>400</u>				<u>5/9/12</u>	<u>MT</u>			
				<u>5/14/12</u>	<u>SB</u>			
				<u>5/18/12</u>	<u>ECO</u>			

TOTAL COST 2600

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group, Proposed: 14
3. Change in Use Group, Indicate Present: _____
4. No. of dwelling units: Total Units Income-restricted
Gained, Sale _____
Gained, Rental _____
Lost, Sale _____
Lost, Rental _____

B. NON-RESIDENTIAL (primary use)

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

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

- D. Construct. Classification: Present IFB
Proposed IFB

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

OFFICE USE ONLY

IMPORTANT
A.H.B.T. - EXEMPT

DATE: COMMENTS: INITIALS:

4/24/12 Need gas pipe drawing.

Net

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 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 VINCENT SANTILLI
Address 47 BRUSHY NECK DRIVE
BRICK, N.J. 08724
Telephone (732) 701-1513
Signature Vincent Santilli

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

OFFICE DATE RECEIVED: 5-9-12 *5/9/12*

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☒ Zoning Officer	<i>JK</i>	<i>5/9/12</i>							<i>2A-12-60411</i>
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)	
Name of Code & Edition	Name of Code & Edition
Building _____	Energy _____
Electrical _____	Barrier-Free _____
Plumbing _____	Flood Hazard _____
Fire Protection _____	As Built Elevation Cert. _____
Mechanical _____	Other _____

X. CERTIFICATES ISSUED (office use only)	
DATE ISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____
☐ Temporary Certificate of Compliance	No. _____
☐ Continued Certificate of Occupancy	No. _____
☐ Certificate of Compliance	No. _____
☐ Certificate of Occupancy	No. _____
☐ Certificate of Approval	No. _____
☐ Lead Abatement Clearance Certificate	No. _____



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 7/12/2012
Control Number C-12-001415
Permit Number 12-1334
Permit Issue Date 5/16/2012
Certificate Number 12-1334

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 1715 ROUTE 88 Unit 4 Brick Township, NJ Block: 842 Lot: 28 Qual: _____
Owner in Fee: OXFORD INTERNATIONAL LLC
Owner Address: 1361 VINCENZO DR TOMS RIVER NJ 08753
Telephone: 7327406173
Contractor: Deane's Cuisine/ Vincent Santilli
Address: 47 Brushy Neck Dr. SEE COMMENTS Brick NJ 08724
Telephone: 7327011513 Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification: _____

Maximum Live Load: 100 Maximum Occupancy Load: 12

Description of Work/Use: TENANT FIT UP
Dean's Cuisine

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.

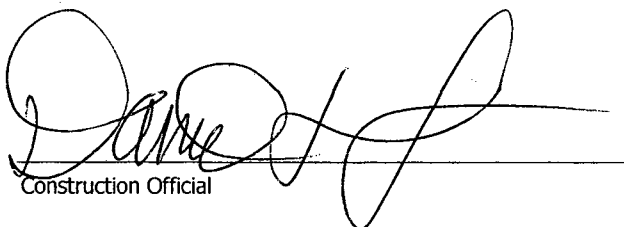
- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **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: 7/17/2012

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

Page 1

$$\begin{array}{r} +50 \\ \hline 1536. \end{array}$$

Dean's Cruise

TOWNSHIP OF BRICK
DEPARTMENT OF INSPECTIONS

OCCUPANCY

OCCUPANT LOAD	<u>12</u>	
LIVE LOAD	<u>100</u>	P. S. F.
FIRE GRADING	<u>2B</u>	HOURS
USE GROUP	<u>M</u>	



BUILDING SUBCODE TECHNICAL SECTION



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

Block 842 Lot 28 Qualification Code _____

Work Site Location BRICK, N.J. 08724

Owner in Fee: EXPLOD INTERNATIONAL LLC

Tel. (732) 740-6173 e-mail _____

Address 1361 VINCENT DRIVE, TOWNSHIP OF BRICK, N.J. 08753

Contractor: DEBROS CONSTRUCTION (SECT) Municipality BRICK Tel. (732) 207-7573

Address BRICK, N.J. 08724 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 _____

☐ Footings/Foundations _____

☐ Structural/Framework _____

☐ Exterior _____

☐ Interior _____

☐ Plan Review Required: _____

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator _____

SUBCODE APPROVAL for PERMIT _____

Date: 7-12-12 _____

Approved by: HA/JS _____

SUBCODE APPROVAL for CERTIFICATE _____

☐ CO ☐ CCO ☐ CA _____

Date: _____

Approved by: _____

Barrier-Free _____

Final _____

Other _____

TCO _____

Mechanical _____

Energy _____

Finishes -Base Layer _____

Finishes -Final _____

Insulation _____

Barrier-Free _____

Truss Sys./Bracing _____

Dates (Month/Day) Failure Failure Approval Initial

Footings _____

Footings Bonding _____

Foundation _____

Slab _____

Frame _____

Truss Sys./Bracing _____

Barrier-Free _____

Insulation _____

Finishes -Base Layer _____

Finishes -Final _____

Energy _____

Mechanical _____

TCO _____

Other _____

Final _____

Barrier-Free _____

Truss Sys./Bracing _____

Frame _____

Slab _____

Foundation _____

Footings Bonding _____

Footings _____

Barrier-Free _____

Truss Sys./Bracing _____

Frame _____

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: Vincent Struini

Print name here: VINCENT STRUINI

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK INSTALLATION OF 5 PIECES OF KITCHEN EQUIPMENT & RECEPTACLES IN EXISTING STORE. CONSTRUCT APPROX 6 L.F. OF DRYWALL PARTITION, TRUSSE CABINETS & WORK THALES

TYPE OF WORK: ☐ New Building ☐ Addition ☐ Rehabilitation ☐ Roofing ☐ Siding ☐ Fence ☐ Sign ☐ Pool ☐ Retaining Wall ☐ Asbestos Abatement Subchapter 8 ☐ Lead Haz. Abatement NJAC 5:17 ☐ Radon Remediation ☒ Other MINOR ☐ Demolition

Height (exceeds 6') _____

Sq. Ft. _____

Sq. Ft. _____

Sq. Ft. _____

Sq. Ft. _____

Sq. Ft. _____

Sq. Ft. _____

Sq. Ft. _____

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Sq. Ft. _____

Sq. Ft. _____

Sq. Ft. _____

Sq. Ft. _____

Sq. Ft. _____

Sq. Ft. _____

S-16-12

12-1334

Date Received

Control #

Date Issued

Permit #

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

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

HA/JS

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

6/29/12 w- Rec TCO 90 Days-

1) Add Remote Head-

2) Permit Reg'd for New RTU

7/11/12 w- Final Appud-

* RTU is in for Review under a separate permit.

① Existing hood - Need
Support

6/23/20
current report completed
with no appliances
(need cert)

② need update for kitchen supp system
not needed.

ALLIED FIRE & SAFETY EQUIPMENT CO., INC.

517 GREEN GROVE ROAD ♦♦ P.O. BOX 607 ♦♦ NEPTUNE, NJ 07754-0607

PHONE: (732) 922-3399 ♦♦ FAX: (732) 918-8668

WWW.ALLIEDFIRESAFETY.COM

SYSTEM INSPECTION REPORT

(REVISED AS OF 9/12/08)

Customer: Sotiris Sargiou Bldg: Deane's Cuisine

Address: 1715 Rt. 88 Brick NJ 08724

Contact: _____ Phone: _____

SYSTEM TYPE <u>Range Guard</u>						SYSTEM LOCATION <u>Left of Hood</u>						
NOZZLES <u>12</u>	#DUCT <u>3</u>	#PLENUM <u>3</u>	#SURFACE <u>6</u>	LINKS <u>5</u>	#360 <u>5</u>	#450 <u>1</u>	#500 <u>1</u>	OTHER	GAUGE PRESSURE <u>OK</u>	CART WT. <u>62.0</u>	REMOTE PULL FT FROM HOOD <u>10</u>	
HYDROTEST YEAR <u>6/12</u>		TANK SIZE <u>415</u>		YEAR <u>96/00</u>		TANK SIZE <u>46</u>		YEAR <u>95</u>		TANK SIZE YEAR <u>S</u>		
MICRO SWITCH (CIRCLE ONE) SINGLE DUAL DBL DUAL			GAS VALVE SIZE <u>2"</u>		MANUAL <u>1</u>		ELECTRIC		GAS VALVE LOCATION <u>Above System</u>		CART / CAPS CHANGED <u>✓</u>	ALARM <u>✓</u>
HOOD QTY / SIZES <u>26' x 48"</u>		HOOD LOCATION <u>Kitchen</u>			FILTER QTY / SIZES <u>16/24x24</u>		FANS QTY <u>1</u>		FAN TYPE (CIRCLE ONE) <u>ROOF</u> WALL		DUCT QTY / SIZE <u>12x28</u>	

1. All appliances properly covered w/ correct nozzles S
2. Duct and plenum covered w/ correct nozzles S
3. Check if seals intact, evidence of tampering S
4. Check remote pull location S
5. Pressure gauge in proper range (if applicable) S
6. Check cartridge weight (if applicable) S
7. Check hydrostatic test date S
8. Check chemical agent quality / level S
9. Inspect and clean cylinder and mount S
10. Operate system from terminal link S
11. Test for proper operation from remote S
12. Check operation of electric shutoffs ✓
13. Check operation of gas valve ✓
14. Replace fusible links S

15. Piping & conduit securely bracketed S
16. Proper separation between fryer & open flame S
17. Exhaust fan in operating order S
18. All filters in place S
19. Clean nozzle's S
20. Proper nozzle covers in place S
21. Check hood for grease build up S
22. System operational / seals in place S
23. Fan warning sign on hood S
24. Personnel instruct. In manual operation of system S
25. Does hood work properly and is it up to code S
26. Microns of Grease S
27. Last hood cleaning was 4/12 by who H+R

S - SATISFACTORY U - UNSATISFACTORY

NOZZLE & APPLIANCE LOCATIONS

↑ ↑ ↑ DUCT
→ → → PLENUM
↓ ↓ ↓ ↓ ↓ ↓ ↓ APPL.

		Grill	Skillet		oven	oven			
		17x17	36x17		35x27	35x27			

COMMENTS

On this date, the above system was tested and inspected in accordance with procedures of the most recent adopted editions of NFPA 17, 17a, 96 and the manufacturer's manual and was operated according to these procedures with the results indicated above. Any comments or unsatisfactory marks have been explained to the customer / customer's agent below.

	DATE	TIME	CUSTOMER SIGNATURE	NAME	TITLE

A COPY WILL BE FORWARDED TO THE AUTHORITY HAVING JURISDICTION (I.E. FIRE MARSHAL)



ELECTRICAL SUBCODE
TECHNICAL SECTION



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

Block 842 1715 W 88 Qualification Code 28

Work Site Location Bell NJ 08734

Owner in Fee: 1101 SADDLE HILL OXFORD INTERNATIONAL LLC

Tel. (732) 701 1573 e-mail 732-740-6173

Address 1361 MYELEN DRIVE, TOMS RIVER, NJ 08753

Contractor: BELK HUND ELECTRIC CONTRACTORS Tel. (732) 262 9700

Address BELK NJ 08734 e-mail 732 262 9700

Contractor License No. 12349 Exp. Date 3/31/15

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

Federal Emp. ID No. 26-0471406 FAX: (732) 262 9702

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Restaurant Utility Co.

Est. Cost of Elec. Work \$ 1800

JOB SUMMARY (Office Use Only)

PLAN REVIEW INSPECTIONS Dates (Month/Day)

☐ No Plans Required

☐ Partial Under-slab Utilities Approved

Date: Approved by:

☒ Electric Plans Approved

Date: 5/4/12 Approved by: JS

Joint Plan Review Required:

☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL for PERMIT

Date: 5/8/12

Approved by: JS

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date: 6-14-12

Approved by: JS

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:

☒ Licensed Elec. Contractor ☐ Certifd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: INSTALLATION OF ELECTRICAL FOR VARIOUS KITCHEN EQUIPMENT

QTY. SIZE ITEMS

12 Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

Del case

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 Air

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

Date Received
Control #
Date Issued
Permit #

5-16-12
12-1334

COMMERCIAL

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

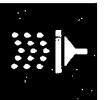
6-7-12

GFPS in Kitchens

C



PLUMBING SUBCODE TECHNICAL SECTION



UCC-#4

Date Received
Control #

Date Issued
Permit #

12-1334

5-16-12

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

Block 842 Lot 28 Qualification Code _____

Work Site Location 1715-4th Route BB

Owner in Fee: ORRIDGE INTERIORS LLC

Tel. (732) 740-6173 e-mail _____

Address 1361 VINCENT DRIVE TOWNSHIP N.J. 08753

Contractor: John Campbell street 1029 Campbell municipality 732 Tel. (732) 773-4670 e-mail _____

Address 1029 Campbell street 1029 municipality 732 Tel. (732) 773-4670 e-mail _____

Contractor License No. 1029 Exp. Date 6/13

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

Federal Emp. ID No. _____

B. PLUMBING CHARACTERISTICS

Use Group _____ Present _____ Proposed _____

Building Sewer Size _____ Public Sewer _____ Public Water _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Well _____

Est. Cost of Plumbing Work \$ 400.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

☐ Partial - Underslab Utilities Approved

Date: _____ Approved by: _____

☒ Plumbing Plans Approved

Date: 5/12 Approved by: mtt

Joint Plan Review Required: _____

☐ Bldg. ☐ Elec. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL for PERMIT

Date: 5-10-12

Approved by: mtt

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☒ CA

Date: 6-7-12

Approved by: mtt

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: John Campbell

Print name here: John Campbell

Licensed Plumbing Contractor ☒ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK Hook up GAS TO 5

PIECES OF GAS KITCHEN EQUIPMENT

QTY. _____

FIXTURE/EQUIPMENT

Water Closet _____

Urinal/Bidet _____

Bath Tub _____

Lavatory _____

Shower _____

Floor Drain _____

Sink _____

Dishwasher _____

Drinking Fountain _____

Washing Machine _____

Hose Bibb _____

Water Heater _____

Fuel Oil Piping _____

Gas Piping _____

LP Gas Tank _____

Steam Boiler _____

Hot Water Boiler _____

Sewer Pump _____

Interceptor/Separator _____

Backflow Preventer _____

Greasetrap _____

Sewer Connection _____

Water Service Connection _____

Stacks _____

Other _____

COMMERCIAL

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued: 05-16-12
Application Number: ZA-12-00411
Application Date: 05/07/2012
Project Number: _____
Permit Number: 12-00409
Fee: \$50

Zoning Permit

Worksite: **1715 ROUTE 88**
Location: **Oxford Plaza - Unit No. 4**
Brick Township, NJ 08724

Block: **842**
Lot: **28**
Qualifier: _____
Zone: **B-1**

Owner: **OXFORD INTERNATIONAL LLC**
Address: **1361 VINCENZO DR**
TOMS RIVER, NJ 08753

Applicant: **Vincent Santilli; Deane's Cuisine, LLC**
Address: **47 Brushy Neck Drive**
Brick, NJ 08724

Application Approved Date: 05/07/2012

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

Use is: Delicatessen - "Deane's Cuisine" (former "Jimmy's Cheesesteaks")

Nonconforming Use is: _____

Work Description:

Rehabilitation - Interior alterations to Unbit No. 4 for a tenant fit-up for a new business, changing from a restaurant, "Jimmy's Cheesesteaks", to a delicatessen, "Deane's Cuisine".

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

The unit number must be displayed on the front and back doors.

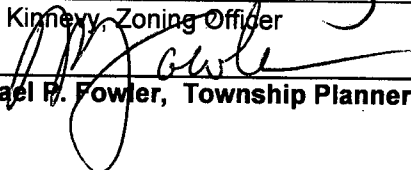
Upon review it was determined that:

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

05/16/12 3:17PM 201205160001
DATE SERV. 002

H001400
ZPA
CHECK

\$70.00
\$50.00


Sean Kinney, Zoning Officer

Michael P. Fowler, Township Planner

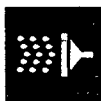
05/07/2012

Date

5/7/12
Date



PLUMBING SUBCODE TECHNICAL SECTION



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

Block 842 Lot 28 Qualification Code _____

Work Site Location BRICK N.J. 08724

Owner in Fee: OXFORD INTERNATIONAL LLC

Tel. (732) 740-6173 e-mail _____

Address 1361 VINCENTO DRIVE TOMS RIVER N.J. 08753

Contractor: John Campbell Municipality _____ Tel. (732) 773-4170

Address 1361 Vincento Drive e-mail _____

Contractor License No. 10298 Exp. Date 6/13

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

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

B. PLUMBING CHARACTERISTICS

Use Group _____ Present _____ Proposed _____

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Well _____

Est. Cost of Plumbing Work \$ 400.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

☐ Partial -Under-slab Utilities Approved

Date: _____ Approved by: _____

☒ Plumbing Plans Approved

Date: 5-16-12 Approved by: John Campbell

Joint Plan Review Required:

☐ Bldg. ☐ Elec. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL FOR PERMIT

Date: 5-16-12

Approved by: John Campbell

SUBCODE APPROVAL FOR CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date: _____

Approved by: _____

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: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK Hook up GAS TO 5

PIECES OF GAS KITCHEN EQUIPMENT

QTY: _____

FIXTURE/EQUIPMENT

Water Closet _____

Urinal/Bidet _____

Bath Tub _____

Lavatory _____

Shower _____

Floor Drain _____

Sink _____

Dishwasher _____

Drinking Fountain _____

Washing Machine _____

Hose Bibb _____

Water Heater _____

Fuel Oil Piping _____

Gas Piping _____

LP Gas Tank _____

Steam Boiler _____

Hot Water Boiler _____

Sewer Pump _____

Interceptor/Separator _____

Backflow Preventer _____

Greasetrap _____

Sewer Connection _____

Water Service Connection _____

Stacks _____

Other _____

Date Received _____

Control # _____

Date Issued _____

Permit # _____



Licensed Plumbing Contractor _____

Exempt Applicant _____

FEE (Office Use Only)

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

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\$ _____

\$ _____

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____





ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 842 Lot 28 Qualification Code _____

Work Site Location Belvid NJ 08734

Owner In Fee: UNION SQUARE LLC OXFORD INTERNATIONAL LLC

Tel. (732) 701.1613 e-mail 732-740-6473

Address 1361 VINCENT DRIVE, 70MS RIVER, N.J. 08753

Contractor: Bluebird Electric Co. LLC Tel. (732) 2629700

Address 1103 R Industrial Parkway e-mail _____

Contractor License No. 12344 Exp. Date 3/31/15

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

Federal Emp. ID No. 26-0771406 FAX: (732) 2629702

B. ELECTRICAL CHARACTERISTICS

Use Group _____ Present _____ Proposed _____

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as Restaurant Utility Co. _____

Est. Cost of Elec. Work \$ 1800

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required	Type: _____	Failure _____ Approval _____ Initial _____
☐ Partial-Underslab Utilities Approved	Rough _____	
Date: _____ Approved by: _____	Barrier-Free _____	
☒ Electric Plans Approved	Trench _____	
Date: <u>1/12</u> Approved by: <u>JS</u>	Temp. Serv. _____	
Joint Plan Review Required: _____	Const. Serv. _____	
☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.	TCO _____	
SUBCODE APPROVAL for PERMIT	Other _____	
Date: <u>1/12</u>	Service _____	
Approved by: <u>JS</u>	Final _____	
	Barrier-Free _____	
SUBCODE APPROVAL for CERTIFICATE	Temp. Cut-in-Card Date Issued _____	
☐ CO ☐ CCO ☐ CA	Final Cut-in-Card Date Issued _____	
Date: _____	Annual Pool Inspection _____	
Approved by: _____	Date of Grounding and Bonding _____	

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: _____

Licensed Elec. Contractor ☒ Certifying Landscape/Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: REPLACEMENT OF EXISTING LIGHT FIXTURES IN KITCHEN

QTY. 12 SIZE _____ ITEMS _____

Lighting Fixtures _____

Receptacles _____

Switches _____

Detectors _____

Light Poles _____

Motors—Fract. HP _____

Emergency & Exit Lights _____

Communications Points _____

Alarm Devices/F.A.C. Panel _____

12th case

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 _____

HP Garbage Disposal _____

KW Central A/C Unit _____

HP/KW Space Heater/Air Handler _____

KW Baseboard Heat _____

HP Motors 1/4 HP _____

KV Transformer/Generator _____

AMP Service _____

AMP Subpanels _____

AMP Motor Control Center _____

KV Elec. Sign/Outline Light _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

5-16-12
12-1334



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 842 Lot 1715 Qualification Code 88

Work Site Location 1715 SW 1 ST

Owner In Fee: 11001 SMOOTH, LLC CRIOID INTERNATIONAL LLC

Tel. (732) 701.1513 e-mail 732-740-6173

Address 1361 VINCEVOZ DE VE, TOWNS PLACE, NJ. 08853

Contractor: BRECKHORN ELECTRICAL LLC Tel. (732) 2629700

Address 1103 B T INDUSTRIAL PARKWAY e-mail 732-2629700

Contractor License No. 12284 Exp. Date 3/31/15

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

Federal Emp. ID No. 26-0471466 FAX: (732) 2629700

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Industrial Utility Co.

Est. Cost of Elec. Work \$ 1500

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
		Type:	Failure	Failure	Approval
[] No Plans Required					
[] Partial Under-slab Utilities Approved		Rough			
Date: <u> </u> Approved by: <u> </u>		Barrier-Free			
[] Electric Plans Approved		Trench			
Date: <u> </u> Approved by: <u> </u>		Temp. Serv.			
Joint Plan Review Required:		Constr. Serv.			
[] Bldg. [] Plumb. [] Fire. [] Elev.		TCO			
SUBCODE APPROVAL FOR PERMIT		Other			
Date: <u> </u>		Service			
SUBCODE APPROVAL FOR PERMIT		Final			
Date: <u> </u>		Barrier-Free			
Approved by: <u> </u>					
SUBCODE APPROVAL FOR CERTIFICATE		Temp. Cut-in-Card Date Issued			
[] CO [] CCO [] CA		Final Cut-in-Card Date Issued			
Date: <u> </u>		Annual Pool Inspection			
Approved by: <u> </u>		Date of Grounding and Bonding			
Certification					

C. CERTIFICATION IN LIEU OF OATH

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

Print name here:

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: REPLACEMENT OF EXISTING 100' X 100' CONCRETE

QTY. SIZE ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

100' X 100'

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

Date Received
Control #
Date Issued
Permit #

5-16-12
11-12-11

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



FIRE PROTECTION SUBCODE TECHNICAL SECTION



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

Block 842 Lot 28 Qualification Code _____

Work Site Location 1745-4 W ROUTE 88

Owner in Fee: BRICK, N.J. 08724

Tel. (732) 740-673 e-mail _____

Address 1341 VINCENZO DRIVE, TOWNSHIP, N.J. 08753

Contractor: VINCENT SAUTILLI street municipality zip code

Address 47 BRUSHY AVE, DEER Tel. () e-mail _____

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____

Fire Alarm Contractor No. _____ Exp. Date _____

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

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

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present M Proposed M Fuel Storage Tank: _____

Constr. Class: Present IB Proposed IB Fuel Type: [] Flammable or [] Combustible

Heating System: [] New or [] Modification to Existing Fire Alarm System: [] New or [] Existing

Fuel Type: [] Gas [] Oil [] Electric [] Solar Fire Suppression/Standpipe System: _____

Location: _____ Other: _____

Total Cost of Fire Protection Work \$ 100 Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[] Partial-Underlab Utilities Approved

Date: _____ Approved by: _____

[] Fire Protection Plans Approved

Date: _____ Approved by: _____

Joint Plan Review Required

[] Bldg. [] Elec. [] Plumb. [] Elev.

SUBCODE APPROVAL for PERMIT

Date: _____ Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

[] CO [] OCO [] CA

Date: _____ Approved by: _____

INSPECTIONS

Type: _____

Alarm System _____

Suppression Sys. _____

Standpipe _____

Fire Pump _____

Pre-Eng. System _____

Mechanical _____

Smoke Control _____

TCO _____

Flam/Combust Tanks _____

Fireplace Venting _____

Final _____

Other _____

DATES (Month/Day)

Failure _____

Approval _____

Initial _____

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.

Applicant/Contractor sign here: _____

Print name here: _____

D. TECHNICAL SITE DATA

[] Certified Contractor [] Exempt Applicant

DESCRIPTION OF WORK:

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

Flammable/Combustible Tanks

Alarm Systems

[] System

[] 110v Interconnected

[] CO Detectors/110v

Alarm Devices (i.e., smoke, heat, pulls, water/flow)

Supervisory Devices (i.e., tamper, low/high air)

Signaling Devices (i.e., horns/strobes, bells)

Other Devices _____

TOTAL

Suppression Systems

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) _____

Standpipes _____

Pre-engineered Systems

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

FM200 Suppression _____

Other _____

Other Systems

Kitchen Hood Exhaust System _____

Smoke Control System _____

Fuel-Fired Appliances _____ Gas [] Oil [] Solid

Fireplace Venting/Metal Chimney _____

Other _____

Date Received _____
Control # _____
Date Issued _____
Permit # _____

5-16-12
12-1334

NUMBER _____ FEE (Office Use Only) \$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____



BUILDING SUBCODE TECHNICAL SECTION



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

Block 842 Lot 28 Qualification Code _____

Work Site Location 1715-4 BIRCH

Owner In Fee: OXFORD INTERNATIONAL LLC

Tel. (732) 740-6173 e-mail _____

Address 1361 VANDERBILT DRIVE, TOWNSHIP OF BIRCH, N.J. 08753

Contractor: DAVID'S CONSTRUCTION (SEEK) Tel. (732) 201-1513

Address 47 BROOKLYN AVE, BIRCH, N.J. 08724 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 _____

☐ Footings/Foundations _____

☐ Structural/Framework _____

☐ Exterior _____

☐ Interior _____

Joint Plan Review Required: _____

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator _____

SUBCODE APPROVAL for PERMIT _____

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE _____

☐ CO ☐ CCO ☐ CA _____

Date: _____

Approved by: _____

Barrier-Free _____

B. BUILDING CHARACTERISTICS

Use Group Present M Proposed M

No. of Stories 1

Height of Structure _____ ft.

Area — Largest Floor 1030 sq. ft.

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

Volume of New Structure _____ cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present IB Proposed IB

If Industrialized Building: _____

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: Vincent Struini

Print name here: Vincent Struini

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK INSTALLATION OF 5 PIECES OF KITCHEN EQUIPMENT & RECEPTACLES IN EXISTING SPACE. CONSTRUCT APPROX 6 L.F. OF DRYWALL PARTITION, INSTALL CABINETS & WORK TOPS

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 5:47 _____

☐ Radon Remediation _____

☒ Other MAINT _____

☐ Demolition _____

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

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

S-16-12
18-1334



Federal Emp. ID No. _____

FAX: (_____) _____

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
-------------	------	---------	-------------	-------------------

	Type:	Failure	Failure	Approval	Initial
☐ No Plans Required					
☐ All	Footing				
☐ Footings/Foundations	Footing Bonding				
☐ Structural/Framework	Foundation				
☐ Exterior	Slab				
☐ Interior	Frame				
	Truss Sys./Bracing				
Joint Plan Review Required:	Barrier-Free				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator	Insulation				
SUBCODE APPROVAL for PERMIT	Finishes -Base Layer				
Date: _____	Finishes -Final				
Approved by: _____	Energy				
SUBCODE APPROVAL for CERTIFICATE	Mechanical				
☐ CO ☐ CCO ☐ CA	TCO				
Date: _____	Other				
Approved by: _____	Final				
	Barrier-Free				

Use Group Present M Proposed M Constr. Class Present 1 Proposed 15

No. of Stories 1

If Industrialized Building:

State Approved HUD

Height of Structure 13' ft.

Area — Largest Floor 13' sq. ft.

New Bldg. Area/All Floors 13' sq. ft.

Volume of New Structure 13' cu. ft.

Max. Live Load 13'

Max. Occupancy Load 13'

Est. Cost of Bldg. Work:

1. New Bldg. \$ 6000

2. Rehabilitation \$ 1000

3. Total (1+2) \$ 7000

U.C.C. F110

LETTERS OF INVITED LEADERSHIP
1. RETIREES IN VISITING SERVICE
2. VISITING ANOTHER GOVERNMENT
3. DEPARTMENTAL, NATIONAL
4. NATIONALS OF VISITING SERVICE

[] 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 | <u>MINOR</u> |
| ☐ | Demolition | |

\$

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

S-16-12
13-24

4 Gold = Applicant Copy

TOWNSHIP OF BRICK ZONING CHECKLIST

1) Two (2) 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

Attachment 5:1

FOR REFERENCE ONLY

NOTES:
1 If adjacent to residential zone or use.
2 The maximum lot coverage shall refer only to that percentage of an affected lot which is suitable for building.
3 For rear yard setback requirements for accessory buildings on waterfront property, see § 245-10D.

Zone	Minimum Lot Size										Minimum Required Yard Depth										Maximum Allowable Coverage
	Interior Lots					Corner Lots					Principal Building					Accessory Building					
	Area (square feet)	Width (feet)	Depth (feet)	Area (square feet)	Depth (feet)	Width (feet)	Depth (feet)	Front Yard (feet)	Side Yard, Each (feet)	Side Yard, Combined (feet)	Rear Yard (feet)	Side Yard (feet)	Rear Yard (feet)	Building Coverage by Lot	Maximum Building Height						
															Stories	Knees (feet)	Feet				
R-R	40,000	150	150	40,000	150	150	150	50	25	25	50	25	25	25	25%	-	25	-			
RR-2																					
RR-3																					
R-20	20,000	100	125	25,000	100	100	125	40	15	-	40	10	10	25%	-	25	35	38.5			
R-15	15,000	100	115	17,250	100	100	115	35	12	-	35	10	10	25%	-	25	35	38.5			
R-10	10,000	90	100	10,500	100	100	100	30	6	20	20	5	5	30%	-	25	35	38.5			
R-7.5	7,500	75	90	9,000	75	75	90	25	6	15	15	5	5	30%	-	25	35	38.5			
R-5	5,000	50	75	6,000	50	50	75	20	5	12	15	5	5	35%	-	25	35	38.5			
O-P	15,000	100	150	15,000	100	100	150	50	10	-	50	20	20	35%	2	25	35	38.5			
B-1	10,000	100	90	12,500	100	100	125	30	10	-	20	10	10	30%	2	25	35	38.5			
B-2	20,000	125	125	20,000	125	125	125	50	10	-	50	10	10	30%	2	25	35	38.5			
B-3	2 acres	200	200	2 acres	200	200	200	75	30	-	50	20	20	25%	3	25	35	38.5			
B-4	5 acres	300	300	5 acres	300	300	300	100	50(150')	-	100(150')	20	20	25%	3	25	35	38.5			
M-1	5 acres	300	300	5 acres	300	300	300	100	50	-	150	30	30	20%	-	25	35	38.5			
R-M	25 acres	350	350	25 acres	350	350	350	50	50	-	30	30	30	20%	-	25	35	38.5			
O-P-T	40,000	150	150	40,000	150	150	150	50	20	-	50	20	20	25%	-	25	35	38.5			
H-S																					

[Amended 6-26-1979 by Ord. No. 354-2B-79; 4-22-1980 by Ord. No. 354-2H-80; 10-14-1980 by Ord. No. 354-2N-80; 9-23-1980 by Ord. No. 354-1B-80; 8-25-83 by Ord. No. 354-2SS-83; 11-5-1984 by Ord. No. 354-2-AAA-84; 11-5-1984 by Ord. No. 354-2CCC-84; 6-24-1986 by Ord. No. 354-2WWW-86; 9-13-1988 by Ord. No. 354-2TTT-88; 9-27-1988 by Ord. No. 354-2KCKX-88; 9-12-2000 by Ord. No. 354-2EE-00; 5-9-2000 by Ord. No. 354-2Z-00; 3-26-2002 by Ord. No. 354-2C-02; 11-26-2002 by Ord. No. 354-2I-02; 3-25-2003 by Ord. No. 354-2D-03; 6-13-2006 by Ord. No. 19-06]

SCHEDULE OF AREA, YARD AND BUILDING REQUIREMENTS
Township of Brick
Ocean County, New Jersey

245 Attachment 5
Township of Brick

LAND USE

RECEIVING CLERK
DATE REC'D 5-7-12

ZONING PERMIT APPLICATION

PERMIT # 12-00409
DATE ISSUED 5-16-12

BLOCK: 842 LOT: 28 QUALIFIER: SITE ADDRESS: 1715-4 RT 88W, BRICK, N.J. 08724

IDENTIFICATION:
1. NAME OF OWNER IN FEE: OXFORD INTERNATIONAL LLC
COMPLETE ADDRESS: 1361 VINCENTO DRIVE, PMS RIVER, NJ 08253
PHONE # 732-740-6173 EMAIL:
2. NAME OF APPLICANT: DEANE'S CUISINE LLC
APPLICANT ADDRESS: 47 BRUSHY NECK DRIVE
BRICK, N.J. 08724
PHONE # 732-701-1573 EMAIL:
3. RESPONSIBLE PERSON FOR WORK: VINCENT SANTILI
PHONE# 732-701-1573 FAX# 732-701-1574
4. SIGNATURE OF APPLICANT: Vincent Santili

FOR OFFICE USE ONLY

FEE SUMMARY:
APPLICATION FEE: \$ 50.00
OTHER: \$
TOTAL: \$

REQUIRED BY APPLICANT
RESIDENTIAL:
COMMERCIAL: ☒
EXISTING USE: M RESTAURANT
PROPOSED USE M DELICATESSEN

BOARD APPROVAL: PB ZB
RESOLUTION#:
APPROVAL DATE:

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)
*NEW BUILDING: *ADDITION *ALTERATION X *PORCH *DECK

POOL: ABOVE GROUND IN GROUND FENCE: HEIGHT TYPE
HEIGHT: (*APPLICABLE)
OTHER "Deane's Cuisine" deli
DESCRIPTION: Tenant Fit up (former Jimmy's Cheese steaks)

ZONING REVIEW:
DATE REVIEWED: 5-7-12 DATE DENIED: DATE APPROVED: 5-7-12 INTLS: 5/21 (SEE BACK PAGE)

DATE: _____		COMMENTS: _____		INITIALS: _____	
DATE REVIEWED: 5-7-12		DATE DENIED: _____		DATE APPROVED: 5-7-12	
INTLS: 5/21					
ZONING REVIEW: _____					
OFFICE USE ONLY					
RECEIVED MAY 7 2012					



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued: _____
Application Number: ZA-12-00411
Application Date: 05/07/2012
Project Number: _____
Permit Number: _____
Fee: \$50

Zoning Permit

Worksite **1715 ROUTE 88**
Location: **Oxford Plaza - Unit No. 4**
Brick Township, NJ 08724

Block: 842
Lot: 28
Qualifier: _____
Zone: B-1

Owner: **OXFORD INTERNATIONAL LLC**
Address: **1361 VINCENZO DR**
TOMS RIVER, NJ 08753

Applicant: **Vincent Santilli; Deane's Cuisine, LLC**
Address: **47 Brushy Neck Drive**
Brick, NJ 08724

Application Approved Date: 05/07/2012

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

Use is: Delicatessen - "Deane's Cuisine" (former "Jimmy's Cheesesteaks")
Nonconforming Use is: _____

Work Description:

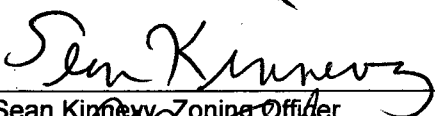
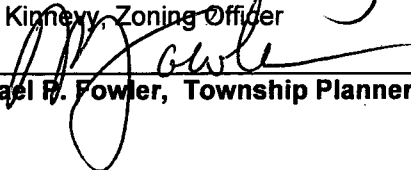
Rehabilitation - Interior alterations to Unbit No. 4 for a tenant fit-up for a new business, changing from a restaurant, "Jimmy's Cheesesteaks", to a delicatessen, "Deane's Cuisine".

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

The unit number must be displayed on the front and back doors.

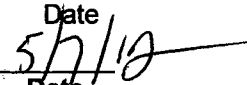
Upon review it was determined that:

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


Sean Kinney, Zoning Officer

Michael R. Fowler, Township Planner

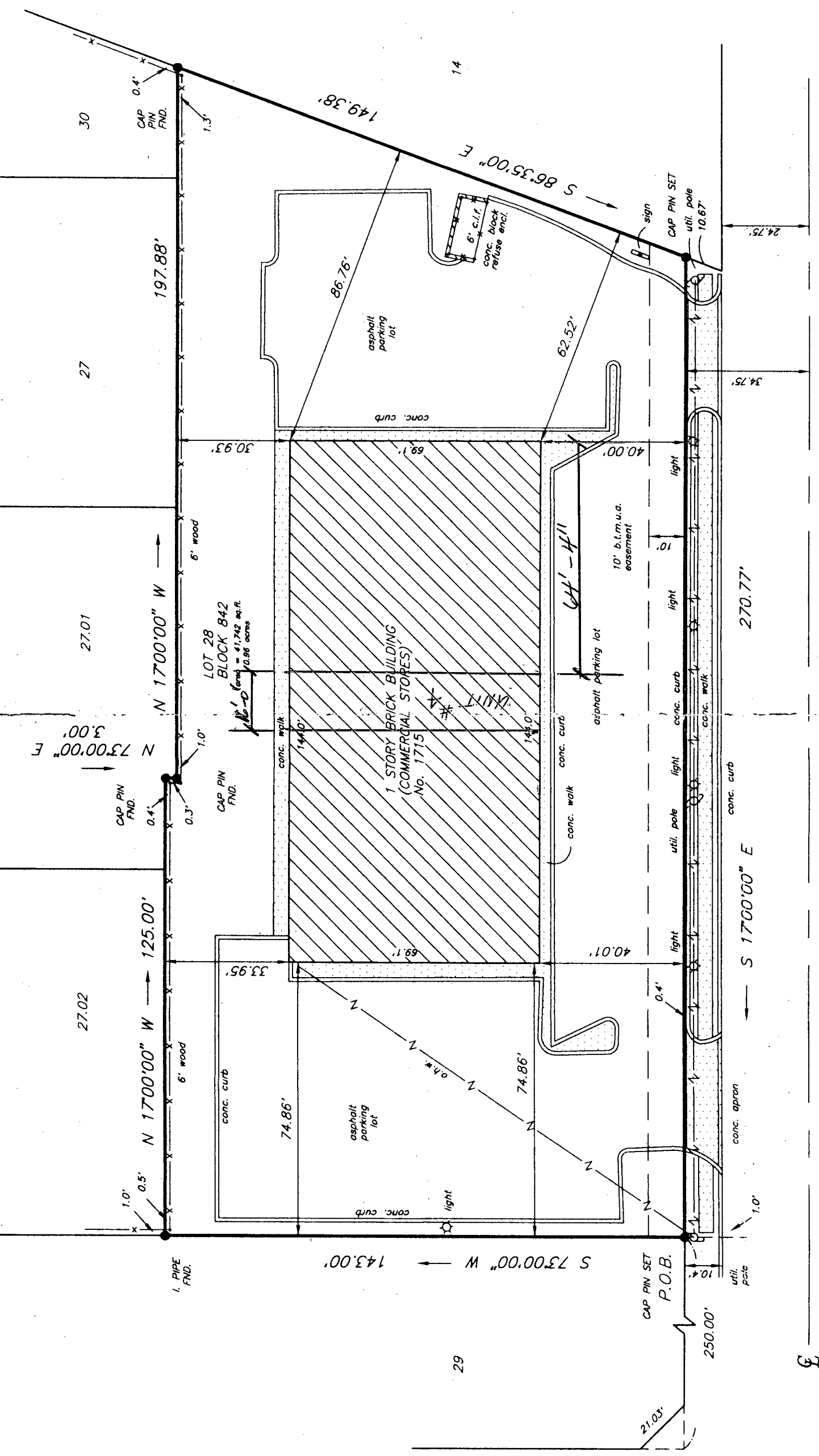
05/07/2012

Date


Date

OLDEN STREET

(FIRST STREET)
(OLDED STREET)
(70' R.O.W.)



APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER

MAY 07 2012

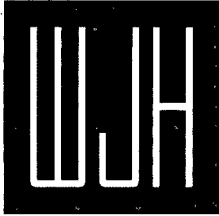
5628
TFU-alt-unity-

NEW JERSEY STATE HIGHWAY ROUTE 88

(OCEAN AVENUE)
(65' R.O.W.)

DEANE'S CUISINE, LLC
LOCATION: 1715 HIGHWAY #88 WEST, UNIT #4
BRICK, NJ 08724

Scale 1:30



Walter J. Hessberger, AIA
Architect

2715 Hooper Ave., Suite 2C
PO Box 450
Brick, New Jersey 08723
Phone: (732) 262-7444
Fax: (732) 262-1312
E-mail: aia476@verizon.net

May 8, 2012

Daniel Newman, Construction Official
Twp. of Brick Building Dept.
401 Chambersbridge Rd.
Brick, N.J. 08723

Re: Deane's Cuisine
1715-4 Route 88
Blk 842, Lot 28

Dear Mr. Newman,

Enclosed are two copies of Gas Riser Diagram for above project as requested.
Also enclosed are cuts of gas appliances for you information.

Please call me if you have any questions or need additional information.

Regards,

Walter J. Hessberger, AIA



COPY

OCEAN COUNTY HEALTH DEPARTMENT

No. 44393

SANITARY INSPECTION REPORT

ESTABLISHMENT INFORMATION

PHONE # <u>732-691-7491 (Vincent's cell)</u>		ESTABLISHMENT CODE <u>22 / 5</u>	GOODS ☐ DESTROYED ☒ EMBARGOED
ESTABLISHMENT TRADING NAME <u>Deane's Cuisine</u>		EVALUATION ☒ SATISFACTORY ☐ CONDITIONALLY SATISFACTORY ☐ UNSATISFACTORY	
NUMBER AND STREET <u>1715-4 Route 88</u>			
CITY OR MUNICIPALITY <u>Brick</u>	ZIP CODE <u>08724</u>		
ESTABLISHMENT LICENSE NO. <u>-</u>	COMMUN. CODE <u>1506</u>	RISK <u>III</u>	WATER SUPPLY ☒ Public - Community ☐ Individual (public - Non-community)

OWNER INFORMATION

(Complete this section only if different from establishment information)

NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT <u>Deane's Cuisine LLC</u> <u>Attn: Vincent & Madeline Santilli</u>		TIME (2400 HOURS)		
NUMBER AND STREET <u>4 Brushneck Drive</u>		DATE <u>4-16-12</u>	BEGIN <u>0845</u>	END <u>0930</u>

CITY OR MUNICIPALITY <u>Brick</u>	STATE <u>NJ</u>	COMPLAINT NO. <u>/</u>
ZIP CODE <u>08724</u>	COMMUN. CODE <u>1506</u>	COMPLAINT REC. <u>/</u>
		COMPLAINT INSPECTED <u>/</u>

INSPECTION TYPE ☐ COMPLAINT ☐ INITIAL INSPECTION ☐ REINSPECTION ☒ PLAN REVIEW ☐ CONFERENCE	TYPE OF ESTABLISHMENT ☒ RETAIL ☐ WHOLESALE ☐ VENDING MACHINE NO. OF MACHINES <u> </u> ☐ FROZEN DESSERT ☐ OTHER <u> </u>	Daniel E. Regeny Health Officer Sunset avenue P.O. Box 2191 Toms River, N.J. 08754-2191 Telephone No. 732-341-9700	Tobacco O, V, <u>NA</u>
		NAME OF INSPECTING OFFICIAL (Print) <u>C. de Flanagan</u>	
		SIGNATURE OF INSPECTING OFFICIAL <u>[Signature]</u>	PERMANENT REG. NO. <u>15-1748</u>

13 of 2

DETAILED DATA SHEET

OCEAN COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

CONTINUATION SHEET

Establishment Trading Name Deanes Cuisine		Establishment License No. —	Date 4-16-12
Signature of Inspecting Official Clyde J.		Municipality Brick Twp.	Time - (2400 Hours) Begin
REG. NO.	REMARKS (Please specify area)		
Note:	This department has been provided with all of the required documentation required according to the chapter 24 Retail Food Regulations Guidelines. This includes details pertaining to the catering part of the operation.		
Note:	I am informed that one of the employees will attend a Risk III Food Safe certification class prior to opening. This department requires proof the employee has successfully completed and passed the course and test, otherwise the establishment may not be opened under a satisfactory rating.		
Note:	This department must be contacted for a pre-opening inspection prior to opening to the public.		
	PCAW IS		
	Complete and Satisfactory		

(Attach additional sheets if necessary)

Deluxe Installation Kits & Hose Assemblies with SnapFast™ QD

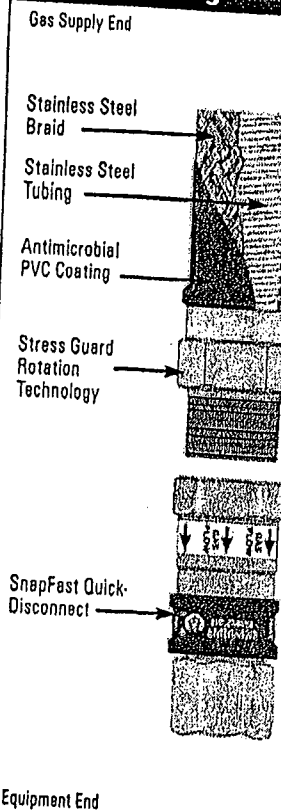
Product Part Numbers - Order Using Part Numbers Listed Below

Configuration	Inside Dia.	LENGTH				
		24"	36"	48"	60"	72"
DELUXE KIT *		1850KIT24	1850KIT36	1850KIT48	1850KIT80	1850KIT72
BASIC KIT **	1/2"	1850BQR24	1850BQR36	1850BQR48	1850BQR80	1850BQR72
HOSE ASSEMBLY		1850BPQ24	1850BPQ36	1850BPQ48	1850BPQ80	1850BPQ72
DELUXE KIT *		1875KIT24	1875KIT36	1875KIT48	1875KIT80	1875KIT72
BASIC KIT **	3/4"	1875BQR24	1875BQR36	1875BQR48	1875BQR80	1875BQR72
HOSE ASSEMBLY		1875BPQ24	1875BPQ36	1875BPQ48	1875BPQ80	1875BPQ72
DELUXE KIT *		18100KIT24	18100KIT36	18100KIT48	18100KIT80	18100KIT72
BASIC KIT **	1"	18100BQR24	18100BQR36	18100BQR48	18100BQR80	18100BQR72
HOSE ASSEMBLY		18100BPQ24	18100BPQ36	18100BPQ48	18100BPQ80	18100BPQ72
DELUXE KIT *		18125KIT24	18125KIT36	18125KIT48	18125KIT80	18125KIT72
BASIC KIT **	1-1/4"	18125BQR24	18125BQR36	18125BQR48	18125BQR80	18125BQR72
HOSE ASSEMBLY		18125BPQ24	18125BPQ36	18125BPQ48	18125BPQ80	18125BPQ72

BTU Flow Capacity (Flow rating BTU 0.64 SP. GR. @ 0.5 inch WC pressure drop)

Part #	Inside Dia.	LENGTH					
		12"	24"	36"	48"	60"	72"
1850BPQ	1/2"	98,000	87,000	77,000	68,000	60,000	55,000
1875BPQ	3/4"	260,000	232,000	218,000	180,000	158,000	139,000
18100BPQ	1"	425,000	414,000	379,000	334,000	294,000	279,000
18125BPQ	1-1/4"	783,000	699,000	615,000	541,000	478,000	419,000

Technical Drawing



STRESS GUARD SnapFast

Approvals & Certifications



NSF International Criteria C-2, Special Equipment and/or Devices

*Component



ANSI Z21.69 / CSA 8.18 - Connectors for Moveable Gas Appliances

US

ANSI Z21.41 / CSA 6.9 - Quick-Disconnect Devices For Use With Gas Fuel

Meets requirements of ANSI Z223.1 / NFPA 54 - National Fuel Gas Code

Refer to catalog page 23 for additional approvals & certifications and Dormont gas connector limited lifetime warranty

SnapFast is not for use in temperatures less than 32°F



Features & Specifications

THE DORMONT BLUE HOSE:

- Tubing Annealed, 304 stainless steel (ASTM A240)
- Braiding Multi-strand, 304 stainless steel wire
- Coating Antimicrobial (patent #6,742,815) PVC, melts at 350°F; coating will not hold a flame; blue color indicates braided connector
- End Fittings Carbon steel; zinc and yellow dichromate coating
- Stress Guard 360° rotation of end fittings at both ends before and after installation (patent pending)

THE SNAPFAST ONE-HANDED QUICK-DISCONNECT - QD:

- Quick-Disconnect Brass body, carbon steel threaded end fittings, and aluminum collar
- Thermal Shut-off Polymer insert in QD melts when internal temperatures exceed 350° F, to shut off gas flow

* DELUXE KITS INCLUDE:

- Elbow Malleable iron - 2 included
- Restraining Cable PVC coated, carbon steel, multi-strand cable
- Valve 100% full port, brass gas ball valve

** BASIC KITS INCLUDE: ..The Dormont Blue Hose and restraining cable and hardware required for ceiling-mounted installations

DEMAND THE DIFFERENCE!

1-800-DORMONT
Dormont
www.dormont.com



Ocean
County
Health
Department

COPY

OCEAN COUNTY HEALTH DEPARTMENT

SANITARY INSPECTION REPORT

No. 44393

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ESTABLISHMENT TRADING NAME <u>Deane's Cuisine</u>		EVALUATION ☒ SATISFACTORY ☐ CONDITIONALLY SATISFACTORY ☐ UNSATISFACTORY	
NUMBER AND STREET <u>1715-4 Route 88</u>		WATER SUPPLY ☒ Public - Community ☐ Individual (public - Non-community)	
CITY OR MUNICIPALITY <u>Brock</u>	ZIP CODE <u>08724</u>	RISK <u>III</u>	
ESTABLISHMENT LICENSE NO. <u>-</u>	COMMUN. CODE <u>1506</u>		

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(Complete this section only if different from establishment information)

NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT <u>Deane's Cuisine LLC</u> <u>Attn: Vincent & Nadine Santilli</u>		TIME (2400 HOURS)		
NUMBER AND STREET <u>4 Brushneck Drive</u>		DATE <u>4-16-12</u>	BEGIN <u>0845</u>	END <u>0930</u>
CITY OR MUNICIPALITY <u>Brock</u>	STATE <u>NJ</u>	COMPLAINT NO. <u>/</u>		
ZIP CODE <u>08724</u>	COMMUN. CODE <u>1506</u>	COMPLAINT REC. <u>/</u>		
		COMPLAINT INSPECTED <u>/</u>		

INSPECTION TYPE ☐ COMPLAINT ☐ INITIAL INSPECTION ☐ REINSPECTION ☒ PLAN REVIEW ☐ CONFERENCE		TYPE OF ESTABLISHMENT ☒ RETAIL ☐ WHOLESALE ☐ VENDING MACHINE ☐ NO. OF MACHINES ☐ FROZEN DESSERT ☐ OTHER		Daniel E. Regeny Health Officer Sunset avenue P.O. Box 2191 Toms River, N.J. 08754-2191 Telephone No. 732-341-9700	Tobacco O, V, <u>NA</u>
NAME OF INSPECTING OFFICIAL (Print) <u>C. de Flanagan</u>				SIGNATURE OF INSPECTING OFFICIAL <u>[Signature]</u>	
				PERMANENT REG. NO. <u>18-1748</u>	

13.1 of 2.

DETAILED DATA SHEET

OCEAN COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

CONTINUATION SHEET

Establishment Trading Name Deques Cuisine		Establishment License No. —	Date 4-16-12
Signature of Inspecting Official Clyde [Signature]		Municipality Black Twp.	Time - (2400 Hours) Begin
REG. NO.	REMARKS (Please specify area)		
Note:	This department has been provided with all of the required documentation required according to the chapter 24 Retail Food Regulations Guidelines. This includes details pertaining to the catering part of the operation.		
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Note:	This department must be contacted for a pre-opening inspection prior to opening to the public.		
	PCAN IS		
	Complete and Satisfactory		

(Attach additional sheets if necessary)

SunFire®

X Series 36" Gas Restaurant Range

Item: _____
 Quantity: _____
 Project: _____
 Approval: _____
 Date: _____

X Series 36" Gas Restaurant Range

Models:

☒ X36-6R

☐ X36-6S

☐ X36-4G12R

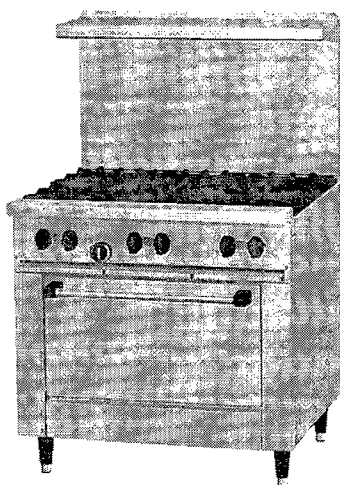
☐ X36-4G12S

☐ X36-2G24R

☐ X36-2G24S

☐ X36-G36R

☐ X36-G36S



Model X36-6R

NOTE: Ranges supplied with casters must be installed with an approved restraining device.

Standard Features:

- Large 27" (686mm) work top surface
- Stainless steel front and sides
- Stainless steel 4" (102mm) plate rail
- Stainless steel backguard w/ removable stainless steel shelf
- 12" (305mm) section stamped drip trays w/ dimpled bottom
- Durable easy to read control knobs
- Easy to clean 6" (152mm) steel core, injection molded legs
- Pressure regulator, 3/4" NPT

Standard on Applicable Models:

- Cabinet base in lieu of oven
- Ergonomic split cast iron top ring grates
- 30,000 Btuh/ 8.79 kW 2 piece cast iron "Q" style donut open burner
- 5/8" (15mm) thick steel griddle plate w/manual hi/lo valve control
- 4-1/4" (108mm) wide grease trough
- 20,000 Btuh/5.86 kW cast iron "H" style griddle burner per 12"(305mm) width of griddle
- Straight steel tube oven burner 33,000 Btuh/9.67 kW

- Standard size Sunfire oven w/ ribbed porcelain oven bottom and door interior, aluminized top, sides and back
- Oven thermostat w/ Low to 500° F (260° C)
- Nickel plated oven rack with two fixed position oven rack guides
- Heavy duty oven door w/keep-cool handle

Optional Features:

- ☐ Hot top 12" (305mm) plate, 5/8" (15mm) thick in lieu of two open burners, manual valve controlled w/20,000 Btuh/5.86 kW cast iron burner; standard on left side
- ☐ Shelf for cabinet base models
- ☐ Low profile 6" (152mm) backguard stainless steel front and sides
- ☐ Stainless steel back for backguard
- ☐ Additional oven racks
- ☐ 6" (152mm) swivel casters (4), w/ front locking
- ☐ Flanged deck mount legs
- ☐ Celsius temperature dials

Specifications:

Gas restaurant series range with standard size Sunfire oven. 35-7/16" (900mm) wide with a 27" (686mm) deep work top surface. Stainless steel front, sides and 4" (102mm) wide front rail. 6" (152mm) legs with adjustable feet. Six robust 2 piece 30,000 Btuh/8.797 kW (Natural gas), cast open burners set in split cast iron ergonomic grates. Griddle or optional hot top with cast iron "H" style burners, 20,000 Btuh/5.86 kW (natural gas), in lieu of open burners. Porcelain oven bottom and door liner. Two position fixed rack guide w/one oven rack. Heavy duty oven door with "keep cool" door handle. Straight steel tube oven burner 33,000 Btuh/9.67 kW (natural gas) provides quality bake and good recovery. Oven thermostat ranges from Low to 500° F (260° C). Available with storage base in lieu of oven



Garland Commercial
 Industries, LLC
 185 East South Street
 Freeland, PA 18224
 Phone: (570) 636-1000
 Fax: (570) 636-3903

Garland Commercial Ranges Ltd
 1177 Kamato Road,
 Mississauga, Ontario
 L4W 1X4 CANADA
 Phone: 905-624-0260
 Fax: 905-624-5669

Enodis UK LTD
 Swallowfield Way,
 Hayes, Middlesex
 UB3 1DQ ENGLAND
 Telephone: 081-561-0433
 Fax: 081-848-0041

Enodis

SunFire®

X Series 36" Gas Restaurant Range

Model Number	Description	Total BTU/Hr Natural	Shipping Information		
			Lbs.	Kg	Cu. Ft.
X36-6R	Six Open Burners w/26" Oven	213,000	430	195	37
X36-6S	Six Open Burners w/Storage Base	180,000	310	141	37
X36-4G12R	12" Griddle, Four Open Burners w/26" Oven	193,000	460	209	37
X36-4G12S	12" Griddle, Four Open Burners w/Storage Base	160,000	340	154	37
X36-2G24R	24" Griddle, Two Open Burners w/26" Oven	133,000	495	225	37
X36-2G24S	24" Griddle, Two Open Burners w/Storage Base	100,000	375	170	37
X36-G36R	36" Griddle w/26" Oven	93,000	530	240	37
X36-G36S	36" Griddle w/Storage Base	60,000	410	186	37

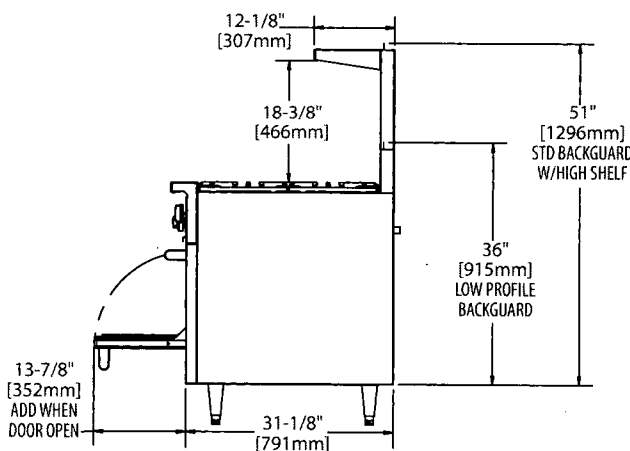
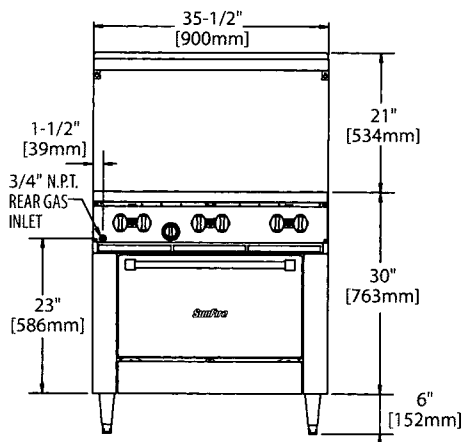
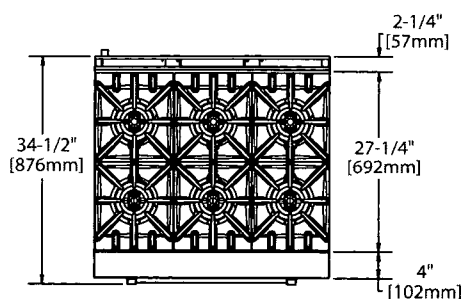
Width In (mm)	Depth In (mm)	Height w/shelf In (mm)	Oven Interior-in (mm)			Combustible Wall Clearance-In (mm)		Entry Clearances In (mm)		Manifold Operating Pressure	
			Height	Depth	Width	Sides	Rear	Crated	Uncrated	Natural	Propane
35-7/16 (900)	33-1/2 (851)	57 (1448)	13 (330)	22 (559)	26-1/4 (667)	12 (305)	6 (152)	37 (940)	36-1/2 (927)	4.5" WC 11 mbar	10" WC 25 mbar

Gas input ratings shown for installations up to 2000 ft.,(610m) above sea level. Please specify altitudes over 2000 ft.

Burner Ratings (BTU/Hr/kW)			
Gas Type	Open Top	Griddle/Hot Top	Standard Oven
Natural	30,000/8.79	20,000/5.8	33,000/9.67
Propane	26,000/7.61	19,000/5.56	29,000/8.50

Note: Installation clearance reductions are applicable only where local codes permit.

This product is not approved for residential use.



Form# X36 Series (01/31/08)

Garland Commercial Industries, LLC
185 East South Street
Freeland, PA 18224
Phone: (570) 636-1000
Fax: (570) 636-3903

Garland Commercial Ranges Ltd
1177 Kamato Road,
Mississauga, Ontario
L4W 1X4 CANADA
Phone: 905-624-0260
Fax: 905-624-5669

Enodis UK LTD
Swallowfield Way,
Hayes, Middlesex
UB3 1DQ ENGLAND
Telephone: 081-561-0433
Fax: 081-848-0041

Enodis



Champion Griddle Gas Manual

PRODUCT:

QUANTITY:

Models: ☐ GGM-18H ☐ GGM-24H ☐ GGM-36H ☐ GGM-48H
ITEM #:

Designed Smart

Increased Performance in Cooking

- Champion high output gas burners generate 25% more BTU's than competitive grills.
- Fast start-up to prime cooking temperatures
- Provides fast recovery and the ability to handle a variety of foods.
- Openings in the front allow the pilot light to be easily lit and adjusted without removing the front panel.

Safety Features

- Bull-nose front extension protects employees from burns.

Saves Time and Clean-up Labor Cost

- Maintenance is easier with bottom-mounted grease collection pan.
- Field convertible and adjustable gas regulator.

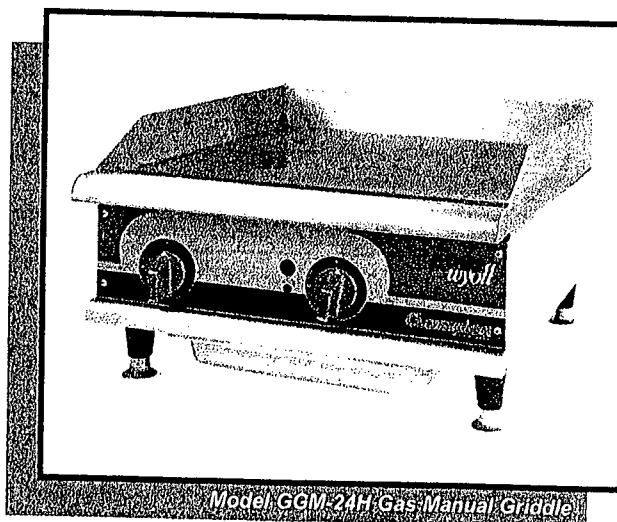
Built Solid

Built to Last

- Thick, stainless steel construction on front panel and top skirt protects against kitchen 'wear and tear' and rust.
- Welded construction.
- 3/4" polished steel griddle surface stands up to years of high output cooking.
- Griddle plate is fully welded to base.

Reliability backed by APW Wyott's Warranty

- All APW Wyott Champion Cooking Equipment is backed by a 3-year limited warranty and a 1-year on-site labor warranty.*
- Certified by the following agencies:



APW Wyott Design Features

- 3/4" (2 cm) flat polished "hot rolled" steel griddle plate.
- 3" (7.6 cm) stainless steel backsplash; sloped side splashers.
- Front access panels for easy adjustment.
- Extended bull-nose front.
- Heavy-duty 4" (10 cm) heat-resistant, adjustable legs.
- Field convertible and adjustable gas regulator.
- Smooth action, infinitely adjustable gas valves turn 180 degrees, giving the operator ultimate control.
- Viewable standing pilot. Safety pilot available.
- Pilot can be lit without removing front panel.
- Built-in rear flue.
- Gas connections use 3/4" NPT pipe.
- 4" x 1" (10.2 cm x 2.5 cm) grease chute drains into grease drawer.
- Stainless steel grease collector drawer.

Options & Accessories

- High altitude versions are available (contact factory).
- Safety Pilot

See reverse side for product specifications.



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Rev. 4/15/2006

PRODUCT:

QUANTITY:

Models: ☐ GGM-18H ☐ GGM-24H ☐ GGM-36H ☐ GGM-48H

ITEM #:

PRODUCT SPECIFICATIONS

Construction:

Stainless steel top skirt, grease through, grease collector drawer, and front panel. Aluminized steel sides and back panel. 4" adjustable legs. Welded construction, Field convertible and adjustable gas regulator.

Gas Specifications:

GGM-18H: 1 "S" burner, 37,500 BTU/hr. One manual high-low controls. (Propane is 33,750 BTU/hr.)

GGM-24H: 2 "U" burners, 25,000 BTU/hr. each, total 50,000 BTU/hr. input. Two manual high-low controls. (Propane is 45,000 BTU/hr.)

GGM-36H: 3 "U" burners, 25,000 BTU/hr. each, total 75,000 BTU/hr. input. Two manual high-low controls. (Propane is 67,500 BTU/hr.)

GGM-48H: 4 "U" burners, 25,000 BTU/hr. each, total 100,000 BTU/hr. input. Two manual high-low controls. (Propane is 90,000 BTU/hr.)

Cooking Surface:

GGM-18H: 19 1/2" H x 23 3/4" D (49.5 cm x 60.3 cm)

GGM-24H: 19 1/2" H x 23 3/4" D (49.5 cm x 60.3 cm)

GGM-36H: 19 1/2" H x 35 3/4" D (49.5 cm x 90.8 cm)

GGM-48H: 19 1/2" H x 47 3/4" D (49.5 cm x 121.3 cm)

*Grease through width: 4"

Overall Dimensions:

GGM-18H: 15 1/2" H x 18" W x 26 3/4" D
(39.4 cm x 45.7 cm x 68 cm)

GGM-24H: 15 1/2" H x 24" W x 26 3/4" D
(39.4 cm x 61 cm x 68 cm)

GGM-36H: 15 1/2" H x 36" W x 26 3/4" D
(39.4 cm x 91.4 cm x 68 cm)

GGM-48H: 15 1/2" H x 48" W x 26 3/4" D
(39.4 cm x 121.9 cm x 68 cm)

*Note: Regulator and pipe add 4 1/4" to the rear of the unit.

Shipping Information:

GGM-18H: 200 lbs. (90.9 kg)

GGM-36H: 280 lbs. (127.3 kg)

GGM-24H: 200 lbs. (90.9 kg)

GGM-48H: 355 lbs. (161.4 kg)

F.O.B. Cheyenne, WY 82007

*APW Wyott reserves the right to modify specifications or discontinue models without incurring obligation.



Champion Griddle Gas Manual

PRODUCT:

QUANTITY:

Models: ☐ GGM-18H ☐ GGM-24H ☒ GGM-36H ☐ GGM-48H
ITEM #:

Designed Smart

Increased Performance in Cooking

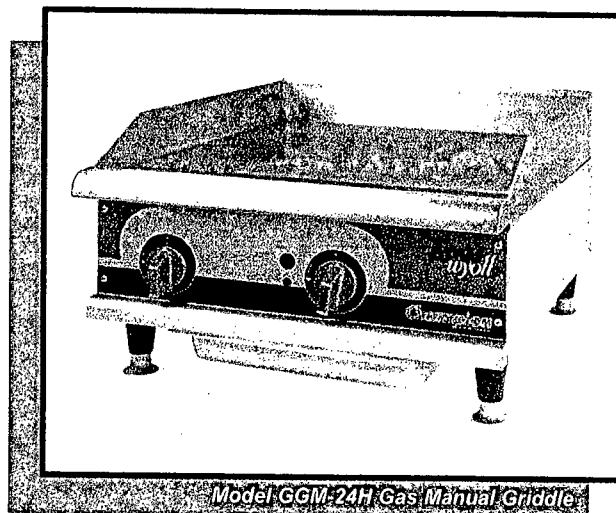
- Champion high output gas burners generate 25% more BTU's than competitive grills.
- Fast start-up to prime cooking temperatures
- Provides fast recovery and the ability to handle a variety of foods.
- Openings in the front allow the pilot light to be easily lit and adjusted without removing the front panel.

Safety Features

- Bull-nose front extension protects employees from burns.

Saves Time and Clean-up Labor Cost

- Maintenance is easier with bottom-mounted grease collection pan.
- Field convertible and adjustable gas regulator.



Built Solid

Built to Last

- Thick, stainless steel construction on front panel and top skirt protects against kitchen 'wear and tear' and rust.
- Welded construction.
- 3/4" polished steel griddle surface stands up to years of high output cooking.
- Griddle plate is fully welded to base.

Reliability backed by APW Wyott's Warranty

- All APW Wyott Champion Cooking Equipment is backed by a 3-year limited warranty and a 1-year on-site labor warranty.*
- Certified by the following agencies:



APW Wyott Design Features

- 3/4" (2 cm) flat polished "hot rolled" steel griddle plate.
- 3" (7.6 cm) stainless steel backsplash; sloped side splashes.
- Front access panels for easy adjustment.
- Extended bull-nose front.
- Heavy-duty 4" (10 cm) heat-resistant, adjustable legs.
- Field convertible and adjustable gas regulator.
- Smooth action, infinitely adjustable gas valves turn 180 degrees, giving the operator ultimate control.
- Viewable standing pilot. Safety pilot available.
- Pilot can be lit without removing front panel.
- Built-in rear flue.
- Gas connections use 3/4" NPT pipe.
- 4" x 1" (10.2 cm x 2.5 cm) grease chute drains into grease drawer.
- Stainless steel grease collector drawer.

Options & Accessories

- High altitude versions are available (contact factory).
- Safety Pilot

See reverse side for product specifications.



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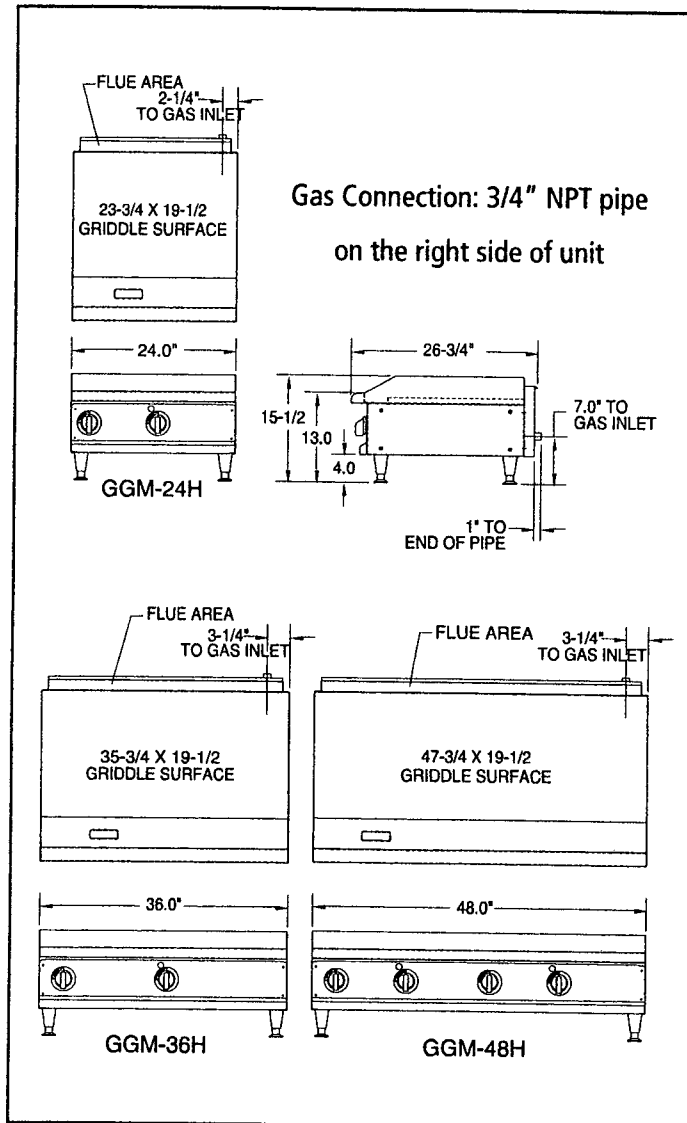
Rev. 4/15/2006

PRODUCT:

QUANTITY:

ITEM #:

Models: ☐ GGM-18H ☐ GGM-24H ☐ GGM-36H ☐ GGM-48H



PRODUCT SPECIFICATIONS

Construction:

Stainless steel top skirt, grease through, grease collector drawer, and front panel. Aluminized steel sides and back panel. 4" adjustable legs. Welded construction, Field convertible and adjustable gas regulator.

Gas Specifications:

GGM-18H: 1 "S" burner, 37,500 BTU/hr. One manual high-low controls. (Propane is 33,750 BTU/hr.)

GGM-24H: 2 "U" burners, 25,000 BTU/hr. each, total 50,000 BTU/hr. input. Two manual high-low controls. (Propane is 45,000 BTU/hr.)

GGM-36H: 3 "U" burners, 25,000 BTU/hr. each, total 75,000 BTU/hr. input. Two manual high-low controls. (Propane is 67,500 BTU/hr.)

GGM-48H: 4 "U" burners, 25,000 BTU/hr. each, total 100,000 BTU/hr. input. Two manual high-low controls. (Propane is 90,000 BTU/hr.)

Cooking Surface:

GGM-18H: 19 1/2" H x 23 3/4" D (49.5 cm x 60.3 cm)

GGM-24H: 19 1/2" H x 23 3/4" D (49.5 cm x 60.3 cm)

GGM-36H: 19 1/2" H x 35 3/4" D (49.5 cm x 90.8 cm)

GGM-48H: 19 1/2" H x 47 3/4" D (49.5 cm x 121.3 cm)

*Grease through width: 4"

Overall Dimensions:

GGM-18H: 15 1/2" H x 18" W x 26 3/4" D (39.4 cm x 45.7 cm x 68 cm)

GGM-24H: 15 1/2" H x 24" W x 26 3/4" D (39.4 cm x 61 cm x 68 cm)

GGM-36H: 15 1/2" H x 36" W x 26 3/4" D (39.4 cm x 91.4 cm x 68 cm)

GGM-48H: 15 1/2" H x 48" W x 26 3/4" D (39.4 cm x 121.9 cm x 68 cm)

*Note: Regulator and pipe add 4 1/4" to the rear of the unit.

Shipping Information:

GGM-18H: 200 lbs. (90.9 kg)

GGM-36H: 280 lbs. (127.3 kg)

GGM-24H: 200 lbs. (90.9 kg)

GGM-48H: 355 lbs. (161.4 kg)

F.O.B. Cheyenne, WY 82007

*APW Wyott reserves the right to modify specifications or discontinue models without incurring obligation.



Champion CharBroiler Gas CharRock

PRODUCT:

QUANTITY:

Models: ☒ GCRB-18H ☐ GCRB-24H ☐ GCRB-36H ☐ GCRB-48H

ITEM #:

Designed Smart

Increased Performance in Cooking

- One of the highest BTU ratings in its cooking class.
- Reduces amount of labor time to cook a 1/4 pound hamburger by 20%.
- Fast start-up and recovery to prime cooking temperatures.
- Versatile grate system can be adjusted in height to give maximum control.
- Special high temperature stainless steel provides even heat across the cooking area.
- Openings in the front allow the pilot light to be easily lit and adjusted without removing the front panel.
- Snap action infinitely adjustable gas valves turn 180 degrees, giving the operator ultimate control.

Safety Features

- Bull-nose front extension protects employees from burns.

Saves Time and Clean-up Labor Cost

- Maintenance is easier with bottom-mounted grease collection pan and removable top grates.
- Self-cleaning CharRocks.
- Field convertible and adjustable gas regulator

Built Solid

Built to Last

- Double walled firebox protects control panel from higher temperatures
- Thick, stainless steel construction on front panel and top skirt protects against kitchen 'wear and tear' and rust.
- Welded construction in frame.
- Thick, cast iron "steak char" grates stand up to years of high output char grilling

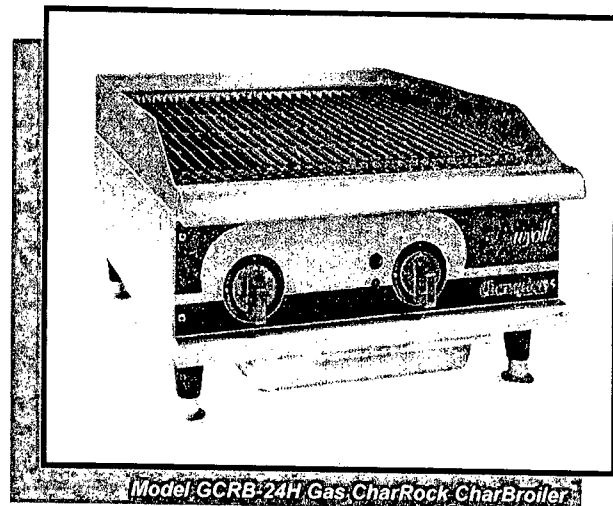
Reliability backed by APW Wyott's Warranty

• All APW Wyott Champion Cooking Equipment is backed by a 3-year limited warranty and a 1-year on-site labor warranty.

*Certified by the following agencies:



*Warranty does not include rock grates, cooking grates, burner shields or fireboxes.



Model GCRB-24H Gas CharRock CharBroiler

APW Wyott Design Features

- 3/4" (1.9 cm) cast iron "steak char" grate.
- Fish grate (#3102202) and flat griddle plate overlay (#21813095)
- Cast iron rock grate
- 3" (7.6 cm) stainless steel backsplash; sloped side splashers.
- Front access panels for easy adjustment.
- Extended bull-nose front.
- Heavy-duty 4" (10.2 cm) heat-resistant, adjustable legs.
- Viewable standing pilot. Safety pilot available.
- Pilot can be lit without removing front panel.
- Gas connections use 3/4" NPT pipe.
- Field convertible and adjustable gas regulator.
- 4" x 1" (10.2 cm x 2.5 cm) grease chute drains into grease drawer.
- Stainless steel grease collector drawer.

Options & Accessories

- High altitude versions are available (contact factory).
- Fish grate only versions available.
- Safety Pilot
- Griddle Plate

See reverse side for product specifications.



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Rev. 11/10/2008



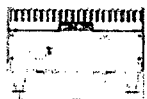
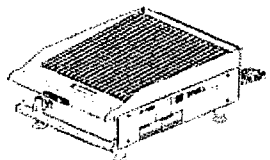
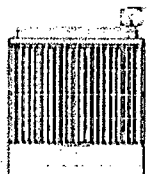
Champion CharBroiler Gas CharRock

Models: ☐ GCRB-18H ☐ GCRB-24H ☐ GCRB-36H ☐ GCRB-48H

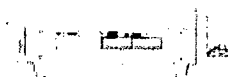
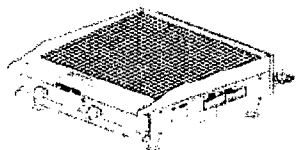
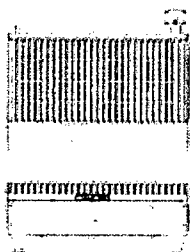
PRODUCT:

QUANTITY:

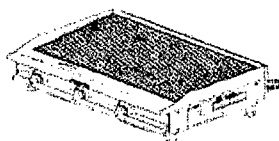
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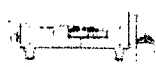
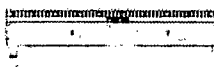
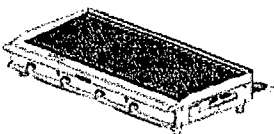
GCRB- 18H



GCRB- 24H



GCRB- 36H



GCRB- 48H

PRODUCT SPECIFICATIONS

Construction:

Stainless steel top skirt, grease through, grease collector drawer, and front panel. Stainless steel radiant, aluminized steel sides and back panel. 4" adjustable legs. Welded construction. Field convertible and adjustable gas regulator.

Gas Specifications:

GCRB-18H: 1 "S" burner, total 60,000 BTU/hr. One manual control. (Propane is 54,300 BTU/hr.)

GCRB-24H: 2 "U" burners, 40,000 BTU/hr. each, total 80,000 BTU/hr. input. Two manual high-low controls. (Propane is 72,500 BTU/hr.)

GCRB-36H: 3 "U" burners, 40,000 BTU/hr. each, total 120,000 BTU/hr. input. Two manual high-low controls. (Propane is 108,750 BTU/hr.)

GCRB-48H: 4 "U" burners, 40,000 BTU/hr. each, total 160,000 BTU/hr. input. Two manual high-low controls. (Propane is 145,000 BTU/hr.)

Cooking Surface:

GCRB-18H: 17 3/4" H x 18" D (45 cm x 45.7 cm)

GCRB-24H: 23 3/4" H x 18" D (60.3 cm x 45.7 cm)

GCRB-36H: 35 3/4" H x 18" D (90.8 cm x 45.7 cm)

GCRB-48H: 47 3/4" H x 18" D (121.3 cm x 45.7 cm)

*Grease through width: 3 3/16"

Overall Dimensions:

GCRB-18H: 15 1/2" H x 18" W x 25 57/64" D
(39.4 cm x 46 cm x 63.2 cm)

GCRB-24H: 15 1/2" H x 24" W x 25 57/64" D
(39.4 cm x 61 cm x 63.2 cm)

GCRB-36H: 15 1/2" H x 36" W x 25 57/64" D
(39.4 cm x 91.4 cm x 63.2 cm)

GCRB-48H: 15 1/2" H x 48" W x 25 57/64" D
(39.4 cm x 121.9 cm x 63.2 cm)

*Note: Regulator and pipe add 4 1/4" to the rear of the unit.

Shipping Information:

GCRB-18H: 126 lbs. (57.3 kg)

GCRB-36H: 224 lbs. (101.8 kg)

GCRB-24H: 157 lbs. (71.4 kg)

GCRB-48H: 289 lbs. (131.4 kg)

F.O.B. Cheyenne, WY 82007

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Rev. 11/10/2008

#1904





Champion CharBroiler Gas CharRock

PRODUCT:

QUANTITY:

Models: ☐ GCRB-18H ☐ GCRB-24H ☐ GCRB-36H ☐ GCRB-48H

ITEM #:

Designed Smart

Increased Performance in Cooking

- One of the highest BTU ratings in its cooking class.
- Reduces amount of labor time to cook a 1/4 pound hamburger by 20%.
- Fast start-up and recovery to prime cooking temperatures.
- Versatile grate system can be adjusted in height to give maximum control.
- Special high temperature stainless steel provides even heat across the cooking area.
- Openings in the front allow the pilot light to be easily lit and adjusted without removing the front panel.
- Snap action infinitely adjustable gas valves turn 180 degrees, giving the operator ultimate control.

Safety Features

- Bull-nose front extension protects employees from burns.

Saves Time and Clean-up Labor Cost

- Maintenance is easier with bottom-mounted grease collection pan and removable top grates.
- Self-cleaning CharRocks.
- Field convertible and adjustable gas regulator

Built Solid

Built to Last

- Double walled firebox protects control panel from higher temperatures
- Thick, stainless steel construction on front panel and top skirt protects against kitchen 'wear and tear' and rust.
- Welded construction in frame.
- Thick, cast iron "steak char" grates stand up to years of high output char grilling

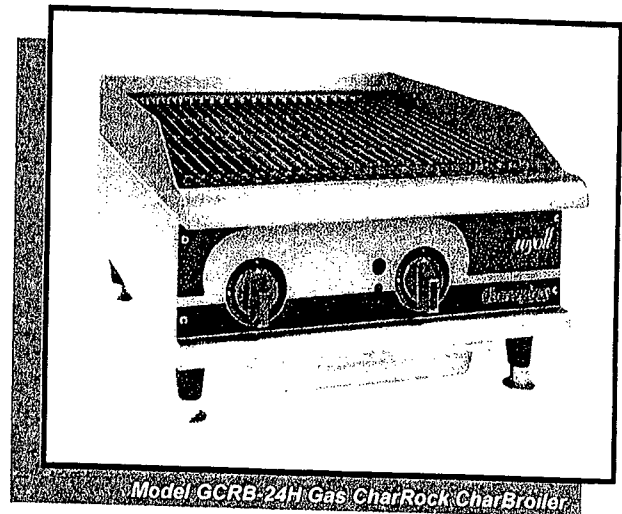
Reliability backed by APW Wyott's Warranty

- All APW Wyott Champion Cooking Equipment is backed by a 3-year limited warranty and a 1-year on-site labor warranty.

*Certified by the following agencies:



*Warranty does not include rock grates, cooking grates, burner shields or fireboxes.



APW Wyott Design Features

- 3/4" (1.9 cm) cast iron "steak char" grate.
- Fish grate (#3102202) and flat griddle plate overlay (#21813095)
- Cast iron rock grate
- 3" (7.6 cm) stainless steel backsplash; sloped side splashes.
- Front access panels for easy adjustment.
- Extended bull-nose front.
- Heavy-duty 4" (10.2 cm) heat-resistant, adjustable legs.
- Viewable standing pilot. Safety pilot available.
- Pilot can be lit without removing front panel.
- Gas connections use 3/4" NPT pipe.
- Field convertible and adjustable gas regulator.
- 4" x 1" (10.2 cm x 2.5 cm) grease chute drains into grease drawer.
- Stainless steel grease collector drawer.

Options & Accessories

- High altitude versions are available (contact factory).
- Fish grate only versions available.
- Safety Pilot
- Griddle Plate

See reverse side for product specifications.



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Rev. 11/10/2008



Champion CharBroiler

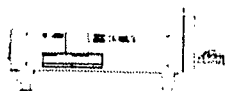
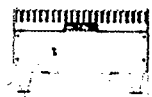
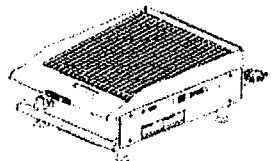
Gas CharRock

PRODUCT:

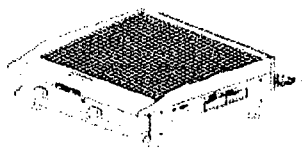
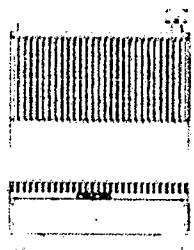
QUANTITY:

Models: ☐ GCRB-18H ☐ GCRB-24H ☐ GCRB-36H ☐ GCRB-48H

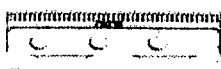
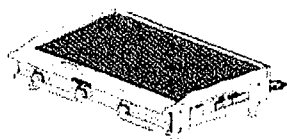
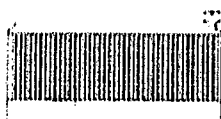
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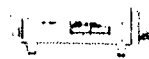
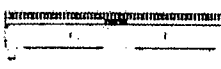
GCRB- 18H



GCRB- 24H



GCRB- 36H



GCRB- 48H

PRODUCT SPECIFICATIONS

Construction:

Stainless steel top skirt, grease through, grease collector drawer, and front panel. Stainless steel radiant, aluminized steel sides and back panel. 4" adjustable legs. Welded construction. Field convertible and adjustable gas regulator.

Gas Specifications:

GCRB-18H: 1 "S" burner, total 60,000 BTU/hr. One manual control. (Propane is 54,300 BTU/hr.)

GCRB-24H: 2 "U" burners, 40,000 BTU/hr. each, total 80,000 BTU/hr. input. Two manual high-low controls. (Propane is 72,500 BTU/hr.)

GCRB-36H: 3 "U" burners, 40,000 BTU/hr. each, total 120,000 BTU/hr. input. Two manual high-low controls. (Propane is 108,750 BTU/hr.)

GCRB-48H: 4 "U" burners, 40,000 BTU/hr. each, total 160,000 BTU/hr. input. Two manual high-low controls. (Propane is 145,000 BTU/hr.)

Cooking Surface:

GCRB-18H: 17 3/4" H x 18" D (45 cm x 45.7 cm)
GCRB-24H: 23 3/4" H x 18" D (60.3 cm x 45.7 cm)
GCRB-36H: 35 3/4" H x 18" D (90.8 cm x 45.7 cm)
GCRB-48H: 47 3/4" H x 18" D (121.3 cm x 45.7 cm)

*Grease through width: 3 3/16"

Overall Dimensions:

GCRB-18H: 15 1/2" H x 18" W x 25 57/64" D
(39.4 cm x 46 cm x 63.2 cm)

GCRB-24H: 15 1/2" H x 24" W x 25 57/64" D
(39.4 cm x 61 cm x 63.2 cm)

GCRB-36H: 15 1/2" H x 36" W x 25 57/64" D
(39.4 cm x 91.4 cm x 63.2 cm)

GCRB-48H: 15 1/2" H x 48" W x 25 57/64" D
(39.4 cm x 121.9 cm x 63.2 cm)

*Note: Regulator and pipe add 4 1/4" to the rear of the unit.

Shipping Information:

GCRB-18H: 126 lbs. (57.3 kg) GCRB-36H: 224 lbs. (101.8 kg)
GCRB-24H: 157 lbs. (71.4 kg) GCRB-48H: 289 lbs. (131.4 kg)

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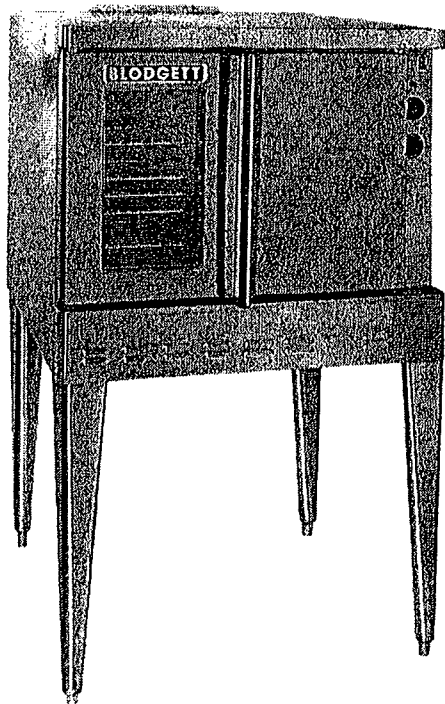
Rev. 11/10/2008
#1904





MODEL SHO-G

Full-Size Gas Convection Oven



OPTIONS AND ACCESSORIES (AT ADDITIONAL CHARGE)

- **Legs/casters/stands:**
 - ☐ 6" (152mm) seismic legs
 - ☐ 6" (152mm) casters
 - ☐ 4" (102mm) low profile casters (double only)
 - ☐ 25" (635mm) stainless steel open stand with rack guides
- **Gas hose with quick disconnect and restraining device:**
 - ☐ 48" (1219mm) hose
 - ☐ 36" (914mm) hose
- ☐ Extra oven racks
- ☐ Gas manifold (for double sections)
- ☐ Flue connector

Project _____
Item No. _____
Quantity _____

SHO-G

Standard depth baking compartment - accepts five 18" x 26" standard full-size baking pans in left-to-right positions.

All data is shown per oven section, unless otherwise indicated.

Refer to operator manual specification chart for listed model name.

EXTERIOR CONSTRUCTION

- Full angle-iron frame
- Stainless steel front, top, and sides
- Dual pane thermal glass window on left hand door, solid right hand door
- Tubular chrome handle with simultaneous door operation
- Triple-mounted pressure lock door design with turnbuckle assembly
- Removable front control panel
- Solid mineral fiber insulation at top, back, sides and bottom

INTERIOR CONSTRUCTION

- Double-sided porcelainized baking compartment liner (14 gauge)
- Aluminized steel combustion chamber
- Dual inlet blower wheel
- Five chrome-plated racks, eleven rack positions with a minimum of 1-5/8" (41mm) spacing

OPERATION

- Dual Flow Gas system combines direct and indirect heat
- Electronic spark ignition control system
- Removable dual tube burners
- Pressure regulator and manual gas service cut-off valve located in front control area
- Air mixers with adjustable air shutters
- Solid state thermostat with temperature control range of 200°F (93°C) to 500°F (260°C)
- Two speed fan motor
- 1/3 horsepower blower motor with automatic thermal overload protection
- Control area cooling fan

STANDARD FEATURES

- Solid state manual control with separate dials to control thermostat and timer
- 25" (635mm) adjustable stainless steel legs (for single units)
- 6" (152mm) adjustable stainless steel legs (for double sections)
- Draft diverter or draft hood for venting (select one)
- One year oven parts and labor warranty*

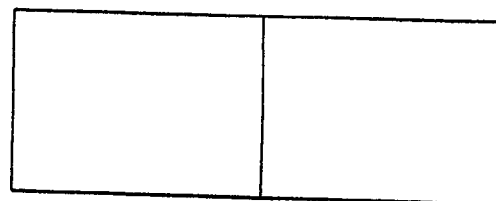
* For all international markets, contact your local distributor.



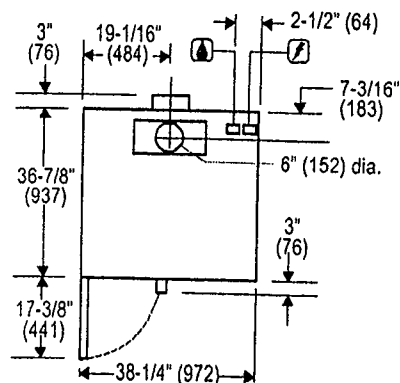
BLODGETT OVEN COMPANY

www.blodgett.com

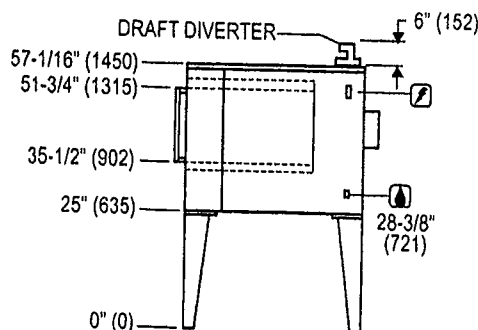
44 Lakeside Avenue, Burlington, VT 05401 • Phone: (802) 658-6600 • Fax: (802) 864-0183

BLODGETT**MODEL SHO-G**

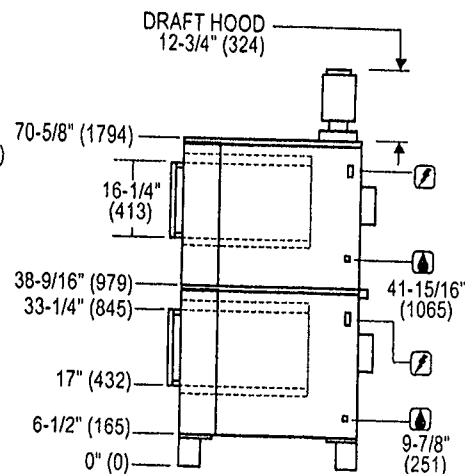
APPROVAL/STAMP



TOP VIEW



SINGLE



DOUBLE

Dimensions are in inches (mm)

SHORT FORM SPECIFICATIONS

Provide Blodgett full-size convection oven model SHO-G, (single/double) compartment. Each compartment shall have (porcelainized/stainless) steel liner and shall accept five 18" x 26" standard full-size bake pans. Stainless steel front, top and sides. Right door shall be stainless steel, left door shall be stainless steel with dual pane thermal glass. Door shall have single heat. Air in baking chamber distributed by dual inlet blower wheel powered by a two-speed, 1/3 HP motor with thermal overload protection. Each chamber shall be fitted with five chrome-plated removable racks. Control panel shall be recessed with Cook/Cool Down mode selector, solid state (manual/digital) infinite thermostat (200- 500°F), and 60-minute timer. Provide options and accessories as indicated.

DIMENSIONS:

Floor space	38-1/4" (972mm) W x 36-7/8" (937mm) D
Product clearance	
Oven Back	0" from combustible and non-combustible construction.
Oven Sides	2" from combustible and non-combustible construction.
Interior	29" (737mm) W x 20" (508mm) H x 24-1/4" (616mm) D
If oven is on casters:	
Single	Add 4-1/2" (114mm) to all height dimensions
Double	Dimensions do not change
Double Low Profile	Subtract 2-1/2" (64mm) from all dimensions

GAS SUPPLY:

3/4" NPT

Manifold Pressure:

- Natural - 3.5" W.C.
- Propane - 10" W.C.

Inlet Pressure:

- Natural - 7.0" W.C. min. - 10.5" W.C. max.
- Propane - 11.0" W.C. min. - 13.0" W.C. max.

MAXIMUM INPUT:

Single	50,000 BTU/hr (14.6 Kw)
Double	100,000 BTU/hr (29.2 Kw)

POWER SUPPLY:

115 VAC, 1 phase, 6 amp, 60 Hz., 2-wire with ground,
 1/3 H.P., 2 speed motor, 1140 and 1725 RPM
 6' (1.8m) electric cord set furnished on 115 VAC ovens only.

MINIMUM ENTRY CLEARANCE:

Uncrated	32-1/16" (814mm)
Crated	37-1/2" (953mm)

SHIPPING INFORMATION:

Approx. Weight:

Single	535 lbs. (243 kg)
Double	1070 lbs. (485 kg)

Crate sizes:

37-1/2" (952mm) x 43-1/2" (1105mm) x 51-3/4" (1315mm)

NOTE: The company reserves the right to make substitutions of components without prior notice

BLODGETT OVEN COMPANY

www.blodgett.com

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Printed in U.S.A.

NOTE: FOR COMMERCIAL USE ONLY

P/N 36946 Rev P (5/11)

SunFire®

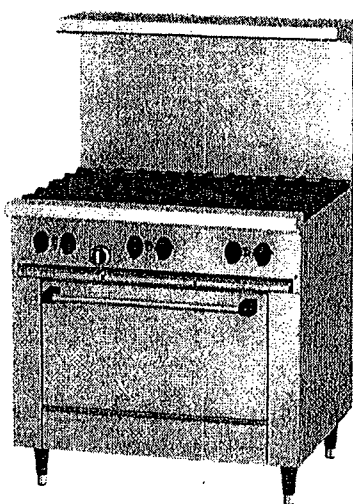
X Series 36" Gas Restaurant Range

Item: _____
 Quantity: _____
 Project: _____
 Approval: _____
 Date: _____

X Series 36" Gas Restaurant Range

Models:

- | | | | |
|--|------------------------------------|------------------------------------|-----------------------------------|
| ☒ X36-6R | ☐ X36-4G12R | ☐ X36-2G24R | ☐ X36-G36R |
| ☐ X36-6S | ☐ X36-4G12S | ☐ X36-2G24S | ☐ X36-G36S |



Model X36-6R

NOTE: Ranges supplied with casters must be installed with an approved restraining device.

Standard Features:

- Large 27" (686mm) work top surface
- Stainless steel front and sides
- Stainless steel 4" (102mm) plate rail
- Stainless steel backguard w/ removable stainless steel shelf
- 12" (305mm) section stamped drip trays w/ dimpled bottom
- Durable easy to read control knobs
- Easy to clean 6" (152mm) steel core, injection molded legs
- Pressure regulator, 3/4" NPT
- Standard size Sunfire oven w/ ribbed porcelain oven bottom and door interior, aluminized top, sides and back
- Oven thermostat w/ Low to 500° F (260° C)
- Nickel plated oven rack with two fixed position oven rack guides
- Heavy duty oven door w/keep-cool handle

Standard on Applicable Models:

- Cabinet base in lieu of oven
- Ergonomic split cast iron top ring grates
- 30,000 Btuh/ 8.79 kW 2 piece cast iron "Q" style donut open burner
- 5/8" (15mm) thick steel griddle plate w/manual hi/lo valve control
- 4-1/4" (108mm) wide grease trough
- 20,000 Btuh/5.86 kW cast iron "H" style griddle burner per 12"(305mm) width of griddle
- Straight steel tube oven burner 33,000 Btuh/9.67 kW

Optional Features:

- ☐ Hot top 12" (305mm) plate, 5/8" (15mm) thick in lieu of two open burners, manual valve controlled w/20,000 Btuh/5.86 kW cast iron burner; standard on left side
- ☐ Shelf for cabinet base models
- ☐ Low profile 6" (152mm) backguard stainless steel front and sides
- ☐ Stainless steel back for backguard
- ☐ Additional oven racks
- ☐ 6" (152mm) swivel casters (4), w/ front locking
- ☐ Flanged deck mount legs
- ☐ Celsius temperature dials

Specifications:

Gas restaurant series range with standard size Sunfire oven. 35-7/16" (900mm) wide with a 27" (686mm) deep work top surface. Stainless steel front, sides and 4"(102mm) wide front rail. 6" (152mm) legs with adjustable feet. Six robust 2 piece 30,000 Btuh/8.797 kW (Natural gas), cast open burners set in split cast iron ergonomic grates. Griddle or optional hot top with cast iron "H" style burners, 20,000 Btuh/5.86 kW (natural gas), in lieu of open burners. Porcelain oven bottom and door liner. Two position fixed rack guide w/one oven rack. Heavy duty oven door with "keep cool" door handle. Straight steel tube oven burner 33,000 Btuh/9.67 kW (natural gas) provides quality bake and good recovery. Oven thermostat ranges from Low to 500° F (260° C). Available with storage base in lieu of oven



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 Industries, LLC
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 Hayes, Middlesex
 UB3 1DQ ENGLAND
 Telephone: 081-561-0433
 Fax: 081-848-0041

Enodis

SunFire®

X Series 36" Gas Restaurant Range

Model Number	Description	Total BTU/Hr Natural	Shipping Information		
			Lbs.	Kg	Cu. Ft.
X36-6R	Six Open Burners w/26" Oven	213,000	430	195	37
X36-6S	Six Open Burners w/Storage Base	180,000	310	141	37
X36-4G12R	12" Griddle, Four Open Burners w/26" Oven	193,000	460	209	37
X36-4G12S	12" Griddle, Four Open Burners w/Storage Base	160,000	340	154	37
X36-2G24R	24" Griddle, Two Open Burners w/26" Oven	133,000	495	225	37
X36-2G24S	24" Griddle, Two Open Burners w/Storage Base	100,000	375	170	37
X36-G36R	36" Griddle w/26" Oven	93,000	530	240	37
X36-G36S	36" Griddle w/Storage Base	60,000	410	186	37

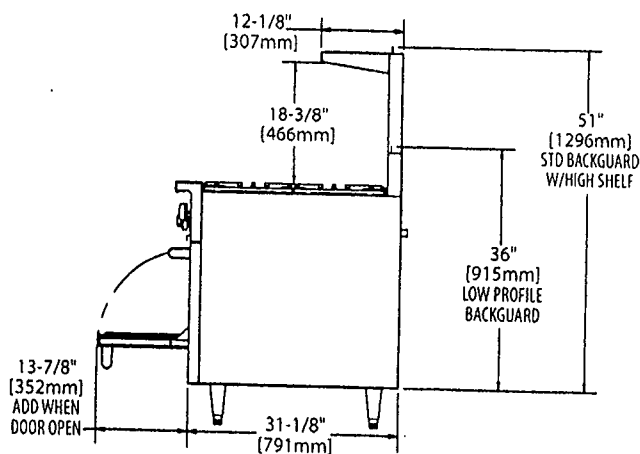
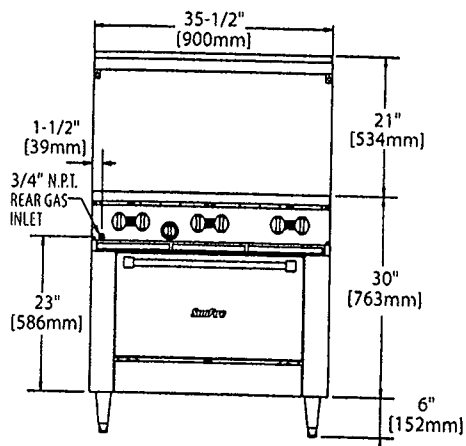
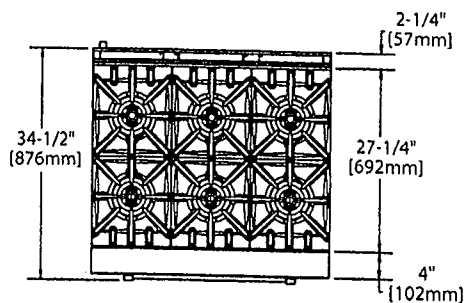
Width In (mm)	Depth In (mm)	Height w/shelf In (mm)	Oven Interior-In (mm)			Combustible Wall Clearance-In (mm)		Entry Clearances In (mm)		Manifold Operating Pressure	
			Height	Depth	Width	Sides	Rear	Crated	Uncrated	Natural	Propane
35-7/16 (900)	33-1/2 (851)	57 (1448)	13 (330)	22 (559)	26-1/4 (667)	12 (305)	6 (152)	37 (940)	36-1/2 (927)	4.5" WC 11 mbar	10" WC 25 mbar

Gas input ratings shown for installations up to 2000 ft., (610m) above sea level. Please specify altitudes over 2000 ft.

Burner Ratings (BTU/Hr/kW)			
Gas Type	Open Top	Griddle/ Hot Top	Standard Oven
Natural	30,000/8.79	20,000/5.8	33,000/9.67
Propane	26,000/7.61	19,000/5.56	29,000/8.50

Note: Installation clearance reductions are applicable only where local codes permit.

This product is not approved for residential use.



Form# X36 Series (01/31/08)

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Hayes, Middlesex
UB3 1DQ ENGLAND
Telephone: 081-561-0433
Fax: 081-848-0041

Enodis



TABLE 402.3(1)
MAXIMUM CAPACITY OF PIPE IN CUBIC FEET OF GAS PER HOUR FOR GAS PRESSURES
OF 0.5 PSI OR LESS AND A PRESSURE DROP OF 0.3-INCH WATER COLUMN
Based on a 0.50 Specific Gravity Gas

NOMINAL IRON PIPE SIZE (Inches)	INTERNAL DIAMETER (Inches)	LENGTH OF PIPE (feet)													
		10	20	30	40	50	60	70	80	90	100	125	150	175	200
1/4	.364	32	22	18	15	14	12	11	11	10	9	8	7	6	5
3/8	.493	72	49	40	34	30	27	25	23	22	21	18	17	15	14
1/2	.622	132	92	73	63	56	50	46	43	40	38	34	31	28	26
3/4	.824	278	190	152	130	113	105	96	90	84	79	72	64	59	55
1	1.049	520	350	285	245	215	195	180	170	160	150	130	120	110	100
1 1/4	1.380	1,050	730	590	500	440	400	370	350	320	305	275	250	225	210
1 1/2	1.610	1,600	1,100	890	760	670	610	560	530	490	460	410	380	350	320
2	2.067	3,050	2,100	1,650	1,450	1,270	1,150	1,050	990	930	880	780	710	650	610
2 1/2	2.469	4,800	3,300	2,700	2,300	2,000	1,850	1,700	1,600	1,500	1,400	1,250	1,130	1,050	980
3	3.068	8,500	5,900	4,700	4,100	3,600	3,300	3,000	2,800	2,600	2,500	2,200	2,000	1,850	1,700
4	4.026	17,500	12,000	9,700	8,300	7,300	6,600	6,000	5,800	5,400	5,100	4,500	4,100	3,800	3,500

For SI: 1 inch = 25.4 mm, 1 foot = 304.8 mm, 1 cubic foot per hour = 0.0283 m³/h, 1 pound per square inch = 0.0703 kg/cm², 1-inch water column = 0.2488 kPa.

TOWNSHIP OF BRICK

RELEASED FOR PERMIT

Building Subcode

Plumbing Subcode

Fire Subcode

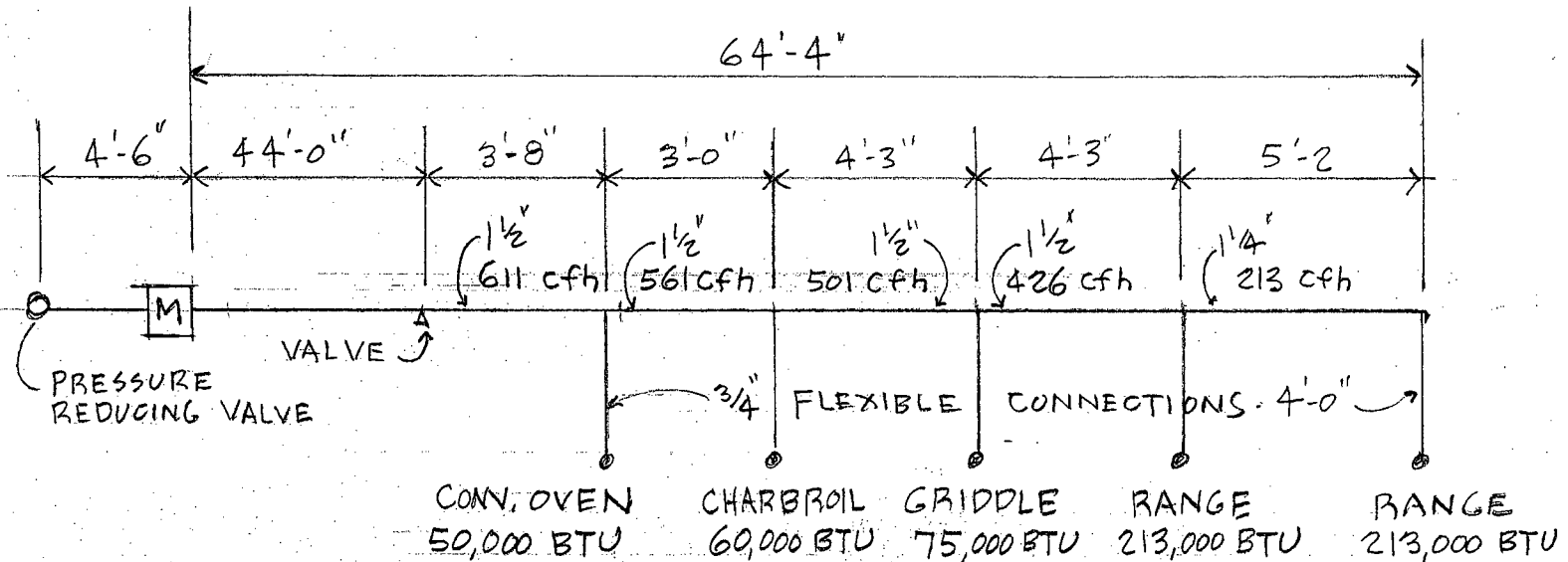
Electrical Subcode

Plan Reviewer

Plans Released

Construction Official

5/9/12



1. PIPE SIZES SHOWN ARE WHAT IS REQUIRED
ACTUAL PIPE SIZE OF MAIN IS 2"
2. GAS PRESSURE IS 8 INCH WATER COLUMN

GAS RISER DIAGRAM NTS.

DEANS CUISINE

1715-4 ROUTE 88

BLK 842 LOT 28

WALTER J HESSBERGER, AIA ARCHITECT

C4264

Walter J Hessberger