BLOCK 853 LOT 2 QUALIFICATION CODE C1.32 ADDRESS (SITE) 848 Rt 70 PERMIT NO. 02-1844

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 848 Rt 70
2. Name of Owner in Fee: Bed Room Wkshp Tel [redacted]
   Address _____ (street) _____ (municipality)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: self Tel. ( ) _____
   Address Same
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. _____ FAX: ( ) _____
5. Architect or Engineer _____ Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work Mike Moore
   Tel. [redacted] 732 FAX ( ) _____

Temp Tent

COMMERCIAL

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 35		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection	35		
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
	Subtotal	$		
	DCA Training Fee			
	Subtotal			
	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 70-		

VI. BUILDING/SITE CHARACTERISTICS

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

II. PROPOSED WORK

		Est. Cost
1.	☑ Minor Work	$200
2.	☐ New Building	
3.	☐ Addition	
4.	☐ Alteration	
5.	☐ Fire Protection	
6.	☐ Plumbing	
7.	☐ Electrical	
8.	☐ Elevator Devices	
9.	☐ Asbestos Abat. Subch. 8	
10.	☐ Lead Hazard Abatement	
11.	☐ Demolition	
	TOTAL COSTS	$200

OPTIONAL (for office use only)

Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
			5/9/02	FP	10/1/03		
			5-8-02	DB	10/1/03		

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 05/06/2002
Date Issued 5/28/02
Control # ~~C7-32~~
Permit # 02-1844

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

Block 853 Lot 2 Qual
Work Site Location 848 ROUTE 70 - BEDROOM WORLD
30X30 TEMP TENT
Owner in Fee BEDROOM WORLD
Address SAME
BRICK, NJ -
Tele [redacted] Fax (__)
Contractor BEDROOM WORLD
Address 848 RTE 70
BRICK, NJ 08723-
Tele. [redacted]
Lic. No. or Bldrs. Reg. No. COMM
Federal Emp. No. 20-69777

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present U Proposed U
Constr Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 100

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
~~[ ]~~ No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 5-8-02
Approved By: SS
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 10-1-07
Approved By: R

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

Closed permit & sdc test out

C. CERTIFICATION IN LIEU OF OATH

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

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other TEMP TENT		35
Other		0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	35
DCA Training Fee	$	0

Paid [ ] Check #
Collected by:

U.C.C. F140 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 05/28/2002
Control #
Permit # 02-1044

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 853 Lot 2 Qual

Work Site Location 840 ROUTE 70 - BEDROOM WORLD
30X30 TEMP TENT
Owner is Fee BEDROOM WORLD
Address SAME
BRICK, NJ
Telephone [redacted]

Contractor BEDROOM WORLD
Address 840 RTE 70
BRICK, NJ 08723
Telephone [redacted]
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 20-69777

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
30X30 FRAMED TEMP TENT FOR TENT SALE FROM MAY 27TH TO JUNE 3RD

PAYMENTS (Office Use Only)

Building	35
Electrical	0
Plumbing	0
Fire Protection	35
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Other	
Total	70
Check No.	6408
Cash	
Collected By	EMP

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WK07 SERV.007

M021044	
BUILDING	$35.00
FIRE	$35.00
CHECK	$70.00

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 200

Construction Official — 05/28/2002 Date

O.C.C. F170 (rev. 3/96)

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Department of Engineering

Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
http://www.gbshost.com/brick
http://www.twp.brick.nj.us

Date: _____

Township Engineer
401 Chambers Bridge Road
Brick, NJ 08723

RE: Block: 853 Lot: 2

Property Address: 848 Rt 70

I, Eric Zanetti (name) of 848 Rt 70 (address),

COMMERCIAL

Request to be exempted from the plot plan requirement for an addition as outlined in the Brick Land Use Book, Chapter 190.31, part B.

Applicant's Signature

The following shall be submitted with this request:

1. Submit survey locating existing dwelling and proposed addition. Dimensions of addition should be included.

2. Proof that the property is not located in a Flood Hazard Area.

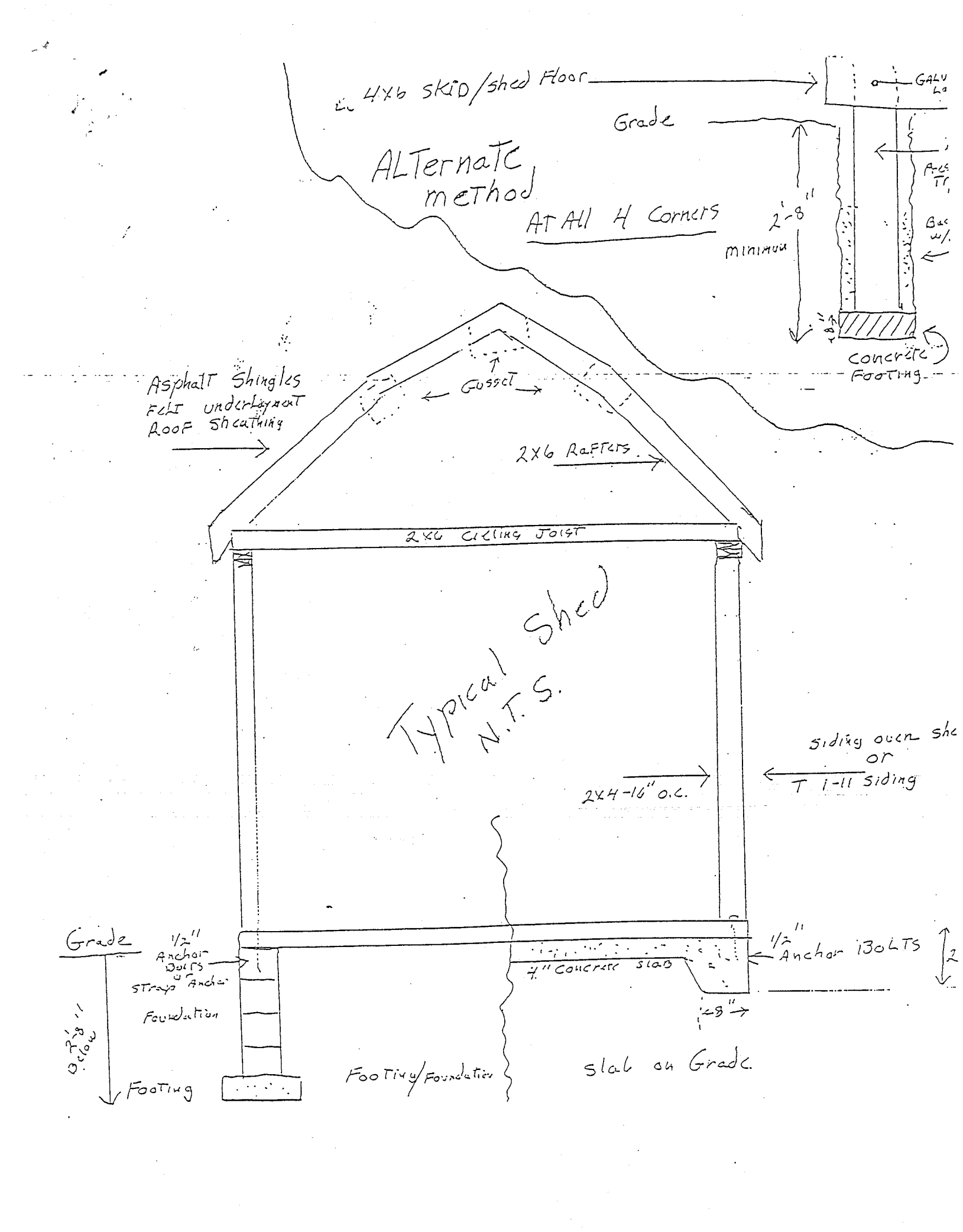
Note: Prior to approval, a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

OFFICE USE

Approved: _____ Signed: _____

Rejected: _____ Signed: _____

Comments: _____


4x6 skid/shed floor
Grade
ALTernaTe method
At All H Corners
2'-8" minimum
Concrete Footing
Asphalt Shingles
felt underlayment
Roof Sheathing
Gussel
2x6 Rafters
2x6 Ceiling Joist
Typical Shed
N.T.S.
2x4-16" o.c.
Siding over sh
or
T 1-11 siding
Grade
1/2" Anchor Bolts or Anchor Straps
Foundation
8'-7" below
Footing
Footing/Foundation
4" Concrete slab
1/2" Anchor Bolts
8"
slab on Grade

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

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. 5:32-2.15(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 Eric Zanetti

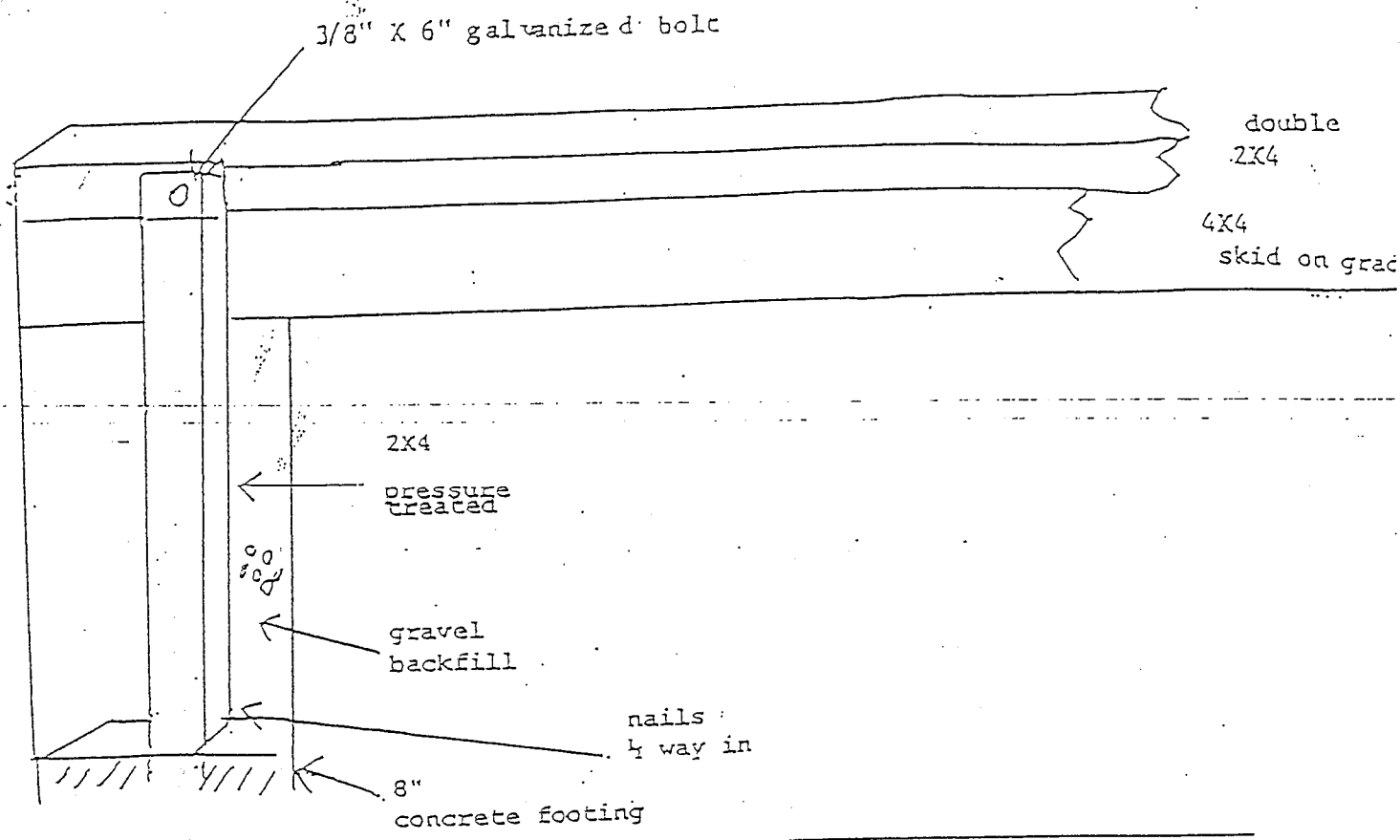
Address 848 Rt 70

Telephone (732) 206-9777

Signature _____

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

SHED ANCHORING METHOD (not to scale)



ANCHORING METHOD

Shed is anchored to earth at all four corners using vertical pressure treated 2X4, lag bolted to floor framing, buried in a hole 32" deep.

ALTERNATE METHOD

4 - 36" ground augers attached to floor froming with continuous 4" cable through eye bolts lagged into floor framing.

GAS CONVERSIONS: Always complete fire, plumbing, and electrical and include brochures for boiler, furnace and/or air conditioner. Building is required if a chimney certification is not completed & submitted. Elevation certificate must be submitted if located in a flood zone.

HOT TUBS: Treat as an AG pool permit application. See swimming pools.

MEMEBRANE STRUCTURES: Complete zoning, engineering and building. Must submit brochure and anchoring method.

PLUMBING: Complete plumbing application along with gas piping, isometric sketch, and/or list of existing fixtures.

ROOFING & SIDING: Complete building application. A debris form must be completed for any rip off. Only D225 or D3462 shingles are acceptable.

SHEDS: If shed is 100 sq. ft. or more, complete a zoning, engineering, and building application. Include 2 surveys indicating location, dimensions and setbacks. Submit 2 details on how the shed is constructed. If it is a pre fab shed, submit the brochure. If shed is under 100 sq. ft., follow the above instructions omitting the engineering and building application. Either case, submit anchoring method.

SIGNS: Commercial – require 2 signed site plans from the Planning board, submitting one original and 1 copy of the original, 2 sets of drawings of sign detailing mounting & construction. Also include electrical detail if applicable. Complete zoning, engineering, building and/or electrical application. Building mounted signs do not require the signed site plans.

SWIMMING POOLS: Complete zoning, engineering, building and electrical application. Submit 2 surveys showing location of pool, dimensions and setbacks. Submit 2 engineered sealed plans for an in ground pool and a brochure for an above ground pool. Also include a brochure on the filter and pump system and a pool certification form which needs to be signed by the homeowner and notorized. The STATE requires the ladder or stairs to the pool be fenced in and must have a self closing latched gate. If a chain link fence is to be used, the link must be an 1 ¼".

TANK INSTALLATION: New AG tank install requires 2 true size surveys indicating the location of tank with dimensions and set backs showing for zoning review. Replacing an AG tank does not require zoning. Although both require building and plumbing.

BEDROOM WORLD

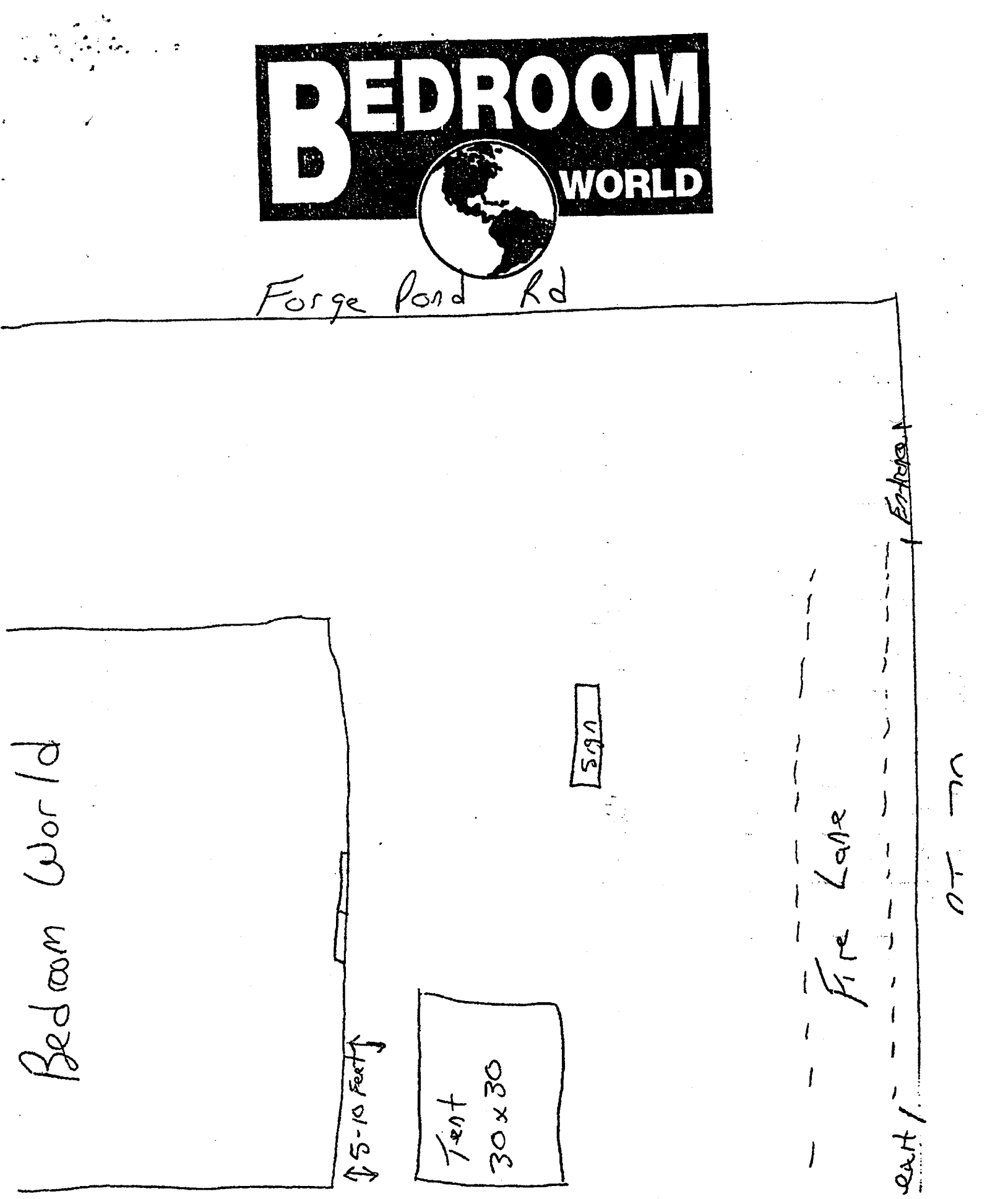
To Whom It May Concern,

Bedroom World will be holding its tent sale From MAY 27th. to JUNE 3RD The tent is 30x30 & Fire resistant, see certificate. The tent will be located 5-10 feet From the building there will only be Furniture stored under it.

Any questions please call
732-206-9777

Thank you
Michael Moore
general manager

848 Route 70 • Brick, NJ 08723 • (908) 206-9777 • (800) 851-7378
Discount Center For: Mattresses–Waterbeds–Futons–Platform Beds–Bedroom Furniture–Day Beds–Bunk Beds
STORE HOURS: Mon. - Fri. 10-9 – Sat. 10-6 – Sun 12-5



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Discount Center For: Mattresses–Waterbeds–Futons–Platform Beds–Bedroom Furniture–Day Beds–Bunk Beds
STORE HOURS: Mon. - Fri. 10-9 – Sat. 10-6 – Sun 12-5

MILLERS PARTY CENTER

Certificate of Flame Resistance

REGISTERED APPLICATION NUMBER

PI21.4

ISSUED BY

ANCHOR INDUSTRIES INC.

EVANSVILLE, INDIANA 47711

MANUFACTURERS OF THE FINISHED TENT PRODUCTS DESCRIBED HEREIN

Date of Manufacture

INV#952005 1/1/91

This is to certify that the materials described herein have been flame-retardant treated (or are [illegible]) and were supplied to:

NAME: Killers REntals

CITY Edison STATE NJ

Certification is hereby made that:

The articles described on this Certificate have been treated with a flame-retardant approved chemical and that the application of said chemical was done in conformance with California Fire Marshall Code, equal to or exceeds NFPA 701, CPAI 84 GOVERNMENT CERTIFIED LAB #3056 U.L.-214

Method of application: LAMINATED

MIL-C-43006D, NYC-374-65-SM

Type, color and weight of canvas/vinyl: 10 oz. BOYLES BIG TOP VINYL LAMINATE red/white

Description of items certified: 30' X 30' Framed Tent

Flame Retardant Process Used Will Not Be Removed By Washing And Is Effective For The Life Of The Fabric

JOHN BOYLE & CO.

Name of Applicator of Flame Resistant Finish

STATESVILLE, NC

Signed:

TENT DEPARTMENT—ANCHOR INDUSTRIES INC.

LOUIS R. BROWN