

BLOCK ~~10~~ 10.01

LOT

ADDRESS (SITE) 2700 Hooper Ave

PERMIT NO. 2454-92



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 2700 Hooper Ave
2. Name of Owner in Fee: Grl Salpierrez Tel. (920) 1170
- Address 17 Threshbrook street municipality zip code
3. Ownership in Fee: Public ☒ Private ☒
4. Principal Contractor: Sely Tel. ()
- Address
- License No. OR, if new home, Builder Reg. No. Exp. Date
- Federal Emp. No. Social Security No.
5. Architect or Engineer Tel. ()
- Address
6. Responsible Person In Charge of Work Tel. ()

II. PROPOSED WORK

1. ☐ Minor Work (single trade)
2. ☐ Small Job (\$5,000 and no prior approvals)
3. ☐ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☒ Fire Protection
7. ☒ Plumbing
8. ☒ Electrical
9. ☐ Asbestos Abatement
10. ☐ Demolition

TOTAL COSTS

25000

Est. Cost

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
se	11/5/92		11/12	RK	2/9/93	RK	
			12-1-92	X	1-22-93	RC	
			11/10	RC	1-19-93	RC	
					1-22-93	RC	
					1-20-93	RC	

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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	add \$ 54		
2. Electrical			
3. Plumbing	70 -		
4. Fire Protection	46	33 -	
5. Other	248 -		
6. Subtotal	\$ 418 -		
7. Less 20% for State Plan Review	42		
8. Subtotal	\$		
9. DCA Training Fee	36 -	26 + 10	36
10. Subtotal	\$		
11. Cert. of Occupancy	63 -		
12. Other			
13. TOTAL	\$ 559 -		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories
2. Height of Structure ft.
3. Area—Largest Floor 533 sq. ft.
4. Building Area—All Floors 6000 sq. ft.
5. Volume of Structure 6000 cu. ft.
6. Construction Classification 3B w/attic
7. Total Land Area Disturbed sq. ft.
8. Flood Hazard Zone
9. Base Flood Elevation ft.
10. Wetlands yes sq. ft.
no
11. Fire Grading
12. Max. Live Load
13. Max. Occupancy Load

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: Restaurant
2. Use Group: A-3
3. Change in Use Group. Indicate Former:

LDS BR 10106231

2016

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 New Jersey 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

Address

Telephone ()

Signature

Date

OFFICE DATE RECEIVED: _____

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	
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protection									
☐ Utility Dig No.									
☐ Other									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	
Electrical _____	Barrier Free _____	
Plumbing _____	Flood Hazard _____	
Fire Protection _____	As Built Elevation Cert. _____	
Mechanical _____	Other _____	

X. CERTIFICATES ISSUED (office use only)

	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____
☐ Temporary Certificate of Occupancy	No. _____
☐ Continued Certificate of Occupancy	No. _____
☐ Certificate of Occupancy	No. _____
☒ Certificate of Approval	No. <u>2454</u>
☐ None	<u>2-10-93</u>



CERTIFICATE

Date Issued 2-10-93
Control #
Permit # 2454-92

IDENTIFICATION

Block 670 Lot 10.01
Work Site Location 2700 Hooper Avenue
Owner in Fee Joseph Salpietro
Address 17 Tunesbrook Dr.
Brick, NJ
Tele. ()
Contractor same
Address
Tele. ()
Lic. No. or Bldgs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group A-3 2 hours
Maximum Live Load
Description of Work/Use:
Addition and alteration to Villa Vittoria
Restaurant
Type of Warranty Plan: [] State [] Private
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

☐ CERTIFICATE OF OCCUPANCY

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

☐ 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 OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than 19 or the owner will be subject to a fine or order to vacate:

Fee \$
Paid [] Check No.
Collected by:

CONSTRUCTION OFFICIAL

Arthur J. Cerra



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

12/2/92

2454-92

IDENTIFICATION Block 670 Lot 10.01

Work Site Location 2700 Haverhill Ave Contractor Self

Owner in Fee Vicki Victoria Fine Properties Address _____

Address 111 Tele. (____) _____

Lic. No. or Bldrs. Reg. No. _____ Exp. Date 2454RB

Federal Emp. No. _____ or Social Security No. 670 #

Tele. (____) _____

is hereby granted permission to perform the following work:

[☒] BUILDING [☒] PLUMBING [☐] OTHER _____
[☐] ELECTRICAL [☒] FIRE PROTECTION

533
6.970

DESCRIPTION OF WORK:

Alteration / add'n

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 \$ 75.80

[Signature]

PAYMENTS (Office Use Only) 001

Building	<u>54</u>	BUILDING	<u>50</u>	.00
Plumbing	<u>70</u>	PLUMBING	<u>70</u>	.00
Electrical	<u>70</u>	ELECTRICAL	<u>70</u>	.00
Fire Protection	<u>40</u>	FIRE PROTECTION	<u>40</u>	.00
Other	<u>42</u>	OTHER	<u>42</u>	.00
DCA Training Fee	<u>560</u>	DCA TRAINING FEE	<u>560</u>	.00
Cert. of Occ.	<u>550</u>	CERTIFICATE OF OCCUPANCY	<u>550</u>	.00
Other	<u>550</u>	OTHER	<u>550</u>	.00
Total	<u>5.56</u>	TOTAL	<u>5.56</u>	.00

Check No. 3388

Cash/03/02 100070005

Collected By: [Signature]



PERMIT UPDATE

Date Update Issued 930121

Control #

Permit # 916044

Date Permit Issued 12-21-92

Brick
IDENTIFICATION Block 670 Lot 10.01
Work Site Location VILLA VITTORIA RESTAURANT Contractor TOM'S RIVER ELECTRIC INC.
OLD HOO PER AVE BRICK Address 19 PINE BROOK DR
Owner in Fee JOE SALPETRO TOM'S RIVER
Address SAME Tele. () 505 9636
Tele. () 920 1550 Lic. No. or Bldrs. Reg. No. 5991
Federal Emp. No. 222-249-471
or Social Security No. _____

is hereby granted permission to perform the following work:

[] BUILDING [] PLUMBING [] Other _____

[x] ELECTRICAL [] FIRE PROTECTION

DESCRIPTION OF WORK:

100 AMP SIGNAL PANEL
Service

Estimated Cost of Work \$ 350.

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building _____
Plumbing _____
Electrical _____
Fire Protection _____
Other _____
Other _____
DCA Training Fee _____
Cert. of Occ. _____
Other _____
Total 33.-
Check No. 9839
Cash _____
Collected By: _____



PERMIT UPDATE

Date Update Issued 1-13-93
Control #
Permit # 2454-92
Date Permit Issued 12/2/92

IDENTIFICATION Block 670 Lot 10.01
Work Site Location 2700 Haddon Contractor R. Welding
Address 97 Man. St.
Owner in Fee Vicki & Thomas Address 2110 Haddon *40026*
Address same Tele. () 2424#
Tele. () _____ Lic. No. or Bldrs. Reg. No. BLOCK 0.00
Federal Emp. No. 670 #
or Social Security No. L1.01 #

is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ Other _____
☐ ELECTRICAL ☒ FIRE PROTECTION

DESCRIPTION OF WORK:

Fire suppression & Hood

Estimated Cost of Work \$ 3.00 — extension

W. P. Piers
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)		FIRE
Building	_____	TOTAL
Plumbing	_____	CASH
Electrical	_____	CHARGE
Fire Protection	_____	_____
Other	_____	_____
Other	_____	_____
DCA Training Fee	_____	_____
Cert. of Occ.	_____	_____
Other	_____	_____
Total	_____	_____
Check No.	_____	_____
Cash	✓	_____
Collected By:	_____	_____



PERMIT UPDATE

Date Update Issued

Control #

Permit #

Date Permit Issued

IDENTIFICATION Block

Lot

Work Site Location

Contractor

Address

Owner in Fee

Address

Tele. ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No.

or Social Security No.

Is hereby granted permission to perform the following work:

☐ BUILDING

☐ PLUMBING

☐ Other

☐ ELECTRICAL

☐ FIRE PROTECTION

DESCRIPTION OF WORK:

Estimated Cost of Work \$

U.C.C. Form F-190A

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

PAYMENTS (Office Use Only)		L18.01
Building	PLUMBING	25.00
Plumbing	FIRE	33.00
Electrical	TOTAL	58.00
Fire Protection	CASH	60.00
Other	CHANGE	2.00
Other	01/08/93 NO. 5 0023A005	15:35
DCA Training Fee		
Cert. of Occ.		
Other		
Total		50
Check No.		
Cash		
Collected By:		



PERMIT UPDATE

Date Update Issued 930121,
Control #
Permit #916044
Date Permit Issued 12-21-92

Brick

IDENTIFICATION Block 670 Lot 10.01
Work Site Location VILLA VITTORIA RESTAURANT Contractor TOM'S RIVER ELECTRICAL INC.
OLD HOOVER AVE. BRICK Address 19 PINE BROOK DR
Owner in Fee JOE SALPETRO TOM'S RIVER
Address SAME Tele. () 505 9636
Tele. () 920 1550 Lic. No. or Bldrs. Reg. No. 5791
Federal Emp. No. 222 249-471
or Social Security No. _____

is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ Other _____

☒ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

100 AMP SWR PANEL
Service

Estimated Cost of Work \$ 350.

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building _____
Plumbing _____
Electrical _____
Fire Protection _____
Other _____
Other _____
DCA Training Fee _____
Cert. of Occ. _____
Other _____
Total 33.-
Check No. 9637
Cash _____
Collected By: _____

U.C.C. Form F-190A

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

Date Received
Date Issued
Control #
Permit #

12/2/92
2454-92

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

Block 44-50 Lot 1001
Work Site Location 5700 S. Fort Apache Rd
Owner in Fee Joe Del Puerto
Address 17 Schubert Ave
Tele. (930) 1550
Contractor Self
Address _____
Tele. ()
Lic. No. or Bids. Reg. No. _____
Federal Emp. No. _____ or Social Security No. _____

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.
X *Shirley Scott*
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

addition to rear of
existing structure
as per plans

JOB SUMMARY (Office Use Only)		PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
☒	No Plans Req.	12/3/02	AK	Type:	Failure	Failure	Approval	Initial	
☐	All			Footing					
☐	Footing			Foundation					
☐	Foundation			Slab					
☐	Frame			Frame					
☐	Other			Insulation					
Joint Plan Review Required:				Finishes:					
☐	Elec.	☐	Plumb.	☐	Fire				
SUBCODE APPROVAL				Energy					
				Mechanical					
☐	CO	☐	CCO	☐	CA				
Date:	12/11/02			TCO					
				Other					
Approved By:	AK			Final					

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed
Constr. Class	Present	Proposed
No. of Stories	43	43
Height of Structure		
Area—Largest Floor		
Total Bldg. Area/All Floors		
Volume of Structure		
Total Land Area Disturbed		

Est. Cost of Bldg. Work:

1. New Bldg.	\$ 25,000
2. Alteration	\$ _____
3. Total (1+2)	\$ _____

TYPE OF WORK:		(Office Use Only)	
☐ New Building	☐ Addition	\$	FEE
☐ Alteration	☐ Roofing	_____	_____
☐ Siding	☐ Other _____	_____	_____
☐ Demolition	☐ Miscellaneous	_____	_____
☐ Fence _____	_____ Height	_____	_____
☐ Sign _____	_____ Sq. Ft.	_____	_____
☐ Pool	☐ Elevator	_____	_____
☐ Asbestos Abatement	☐ Other _____	_____	_____
Paid ☐ Check # _____ Collected by: _____		Administrative Surcharge \$ _____ Minimum Fee \$ _____ TOTAL FEE \$ _____	

WILL CALL



ELECTRICAL
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

DEC 21 92 01 60 44

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

Block 670 Lot 10.01
Work Site Location VILLA VITTORIA RESTAURANT
OLD HOBOKEN AVE + MANTOLOKING RD
Owner in Fee 50E SALPIETRO
Address _____

Tele. (908) 920 1550
Contractor TOHYS RIVER ELECTRIC LLC.
Address 19 PLUM AVE
TOHYS RIVER
Tele. (908) 505 9636
Lic. No. 5991
Federal Emp. No. 222-248474 or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

☐ Reinspection ☐ Resale ☐ Meter Set
☐ Pole/Pad # _____ ☐ Temporary ☐ Other ADDITION
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 5000

JOB SUMMARY (Office Use Only)

PLAN REVIEW:		INSPECTIONS:	
☐ No Plans Required	Type:	Dates (Month/Day)	
☐ Joint Plan Review Required:		Failure	Approval
☐ Bldg. ☐ Plumb. ☐ Fire	Rough		
☐ Elec. Plans Approved	Temporary		
Date: <u>12/17/92</u>	Const. Serv.		
Approved by: _____	TCG		
	Other		
	Service		
	Final		
SUBCODE APPROVAL:		Temp. Cut-in-Card Date Issued	
<u>18 CO 18 CO</u>		Final Cut-in-Card Date Issued	
Date: <u>12/30/93</u>			
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.

☐ Licensed Electrical Contractor ☐ Exempt Applicant _____
Signature-Contractor Seal

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
<u>20</u>		Fixtures (1)	
<u>12</u>		Receptacles (2)	
<u>12</u>		Switches (3)	
		Total 1 + 2 + 3	<u>40</u>
		Range	
		Oven(s)	
		Surface Unit	
<u>1</u>	<u>6kw</u>	Dishwasher	<u>7</u>
		Garbage Disposal	
		Dryer	
		A/C Unit	
		Burglar Alarms	
		Intercoms Panels	
		Smoke Detectors	
		Whirlpool/spa	
		Pool Bonding	
		Pool Filter Motor	
		Pool Lights	
		Water Heater(s)	
		Central heat:	
		oil, gas or elec.	
		Baseboard Heat Units	
		Thermostats	
		Heat Pump	
		Pump(s)	
		Motor Control Center/Sub Panels	
		Signs	
		Light Standards	
		Motors-Fractional H.P.	
		Motors-All Others	
		Transformers	
		Generators	
		Service Entrance	
<u>1</u>		Other <u>200 Amp 508 Panel</u>	<u>33</u>

Paid ☐ Check # 9773 Minimum Fee \$ 80
Collected by: _____ TOTAL FEE \$ 80

new contract



FIRE PROTECTION SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

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

Block 1610 Lot B.01

Work Site Location 1700 Wagon Lane

Owner In Fee 1700 Wagon Lane

Address 1700 Wagon Lane

Tele. () 1920-1510

Contractor 1700 Wagon Lane

Address 1700 Wagon Lane

Tele. () 1920-1510

Lic. No. 1920-1510

Federal Emp. No. 1920-1510 or Social Security No. 1920-1510

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present A-3 Proposed A-3
Constr. Class. Present 5-3 Proposed 5-3
Heating Systems ☒ New ☒ Existing
Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar
Location: 1700 Wagon Lane
Total Est. Cost of Fire Protection 1700 Wagon Lane

C. CERTIFICATION IN LIEU OF OATH

PLAN REVIEW: ☐ No Plans Required ☐ Plans Required
Joint Plan Review Required: ☐ Yes ☐ No

INSPECTION: ☐ No Inspection ☐ Inspection
Type: ☐ Fire Alarm Test ☐ Smoke Test ☐ Mechanical

Suppression Test ☐ Fire Alarm Test ☐ Smoke Test ☐ Mechanical

Approved by: 1700 Wagon Lane
Date: 1-22-93

Signature: 1700 Wagon Lane

D. TECHNICAL SITE DATA

Description of Work
Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks
Combustible Liquid Storage Tanks
L.P.G. Storage Tanks
L.N.G. Storage Tanks

Wet Sprinkler Heads
Dry Sprinkler Heads
TOTAL

Smoke Detectors
Heat Detectors
TOTAL

Stand Pipes
Kitchen Hood Exhaust Systems
Pre-Engineered Systems
CO₂ Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas or Oil Fired Appliance
OTHER

Administrative Surcharge \$
Paid ☐ Check # 1700 Wagon Lane Minimum Fee \$
Collected by 1700 Wagon Lane TOTAL FEE \$



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received 1-8-93
Date Issued
Control #
Permit # 2454-92
update

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

Block 670 Lot 10.01
Work Site Location VILLA VICTORIA DEST.
Owner in Fee JOE GALPINSKY DR.
Address 17445 BROOK DR.
Tele. (908) 420-1550
Contractor 138-4 INDUSTRIAL INC.
Address PAVE US 0874
Tele. (908) 458-7200
Lic. No. 1310 8237
Federal Emp. No. 222 822 593 or Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed _____
Constr. Class. Present Proposed _____
Heating Systems [] New [] Existing
Type: [X] Gas [] Oil [] Electrical [] Solar
[] Other
Location: ATTN AREA (RELOCATE)
Total Est. Cost of Fire Prot. Work \$ 700 [] Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW: _____
[] No Plans Required
Joint Plan Review Required: _____
[] Bldg. [] Plumb. [] Elec.
[X] Fire Plans Approved
Date: 1-5-93
Approved by: _____
SUBCODE APPROVAL
[] CO [] CCO [X] CA
Date: 1-22-93
Approved by: _____
INSPECTIONS: _____
Type: _____
Failure Failure Approval Initial
Suppression Test _____
Fire Alarm Test _____
Smoke Test _____
Mechanical _____
TCO _____
Other _____
Other _____
Other _____

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

furman

Water Supply Source

Method of Valve Supervision

Local Alarm Supervision

Central Supervision

Proprietary Supervision

Flammable Liquid Storage Tanks

Combustible Liquid Storage Tanks

L.P.G. Storage Tanks

L.N.G. Storage Tanks

Number

FEE (Office Use Only)

Wet Sprinkler Heads

Dry Sprinkler Heads

TOTAL

Smoke Detectors

Heat Detectors

TOTAL

Stand Pipes

Kitchen Hood Exhaust Systems

Pre-Engineered Systems

CO₂ Suppression

Halon Suppression

Foam Suppression

Dry Chemical

Wet Chemical

Gas or Oil Fired Appliance

OTHER

Administrative Surcharge \$

Paid [] Check # _____ Minimum Fee \$

Collected by _____ TOTAL FEE \$



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

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

Block 670 Lot 10.01
Work Site Location 2700 Hopson Ave
Owner in Fee Joe Valerio's
Address 117 Tenthredin Ave
Tele. () 361-1111
Contractor Self
Address _____
Tele. () _____
Lic. No. _____
Federal Emp. No. _____ or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____
Water Service Size _____
Estimated Cost of Plumbing Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)
	Type:	Failure Failure Approval Initial
☐ No Plans Required	Slab	
☐ Joint Plan Review Required:	Rough	
☐ Bldg. ☐ Elec. ☐ Fire	Water	
☐ Plumb. Plans Approved	Sewer	
Date: _____	Fixtures	
Approved by: _____	Gas Equipment	
	Gas Final	
SUBCODE APPROVAL:	Solar	
☐ CO ☐ CCO ☐ CA	TCO	
Approved by: _____		
Date: _____		

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.

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature-Contractor Seal

D. TECHNICAL SITE DATA (List all fixtures.)

Hand on 8 spec piping

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Gas Piping	15
	Fuel Oil Piping	
	Water Heater	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C	
	or Refrigeration Unit.	
	Sewer Connection	
	Water Service Connection	
	Gas Service Connection	
	Active Solar System	
	Other	

Paid [] Check # _____	Minimum Fee	\$ _____
Collected by: _____	TOTAL	\$ _____



PLUMBING
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

Update
12/15/92
2454-92

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

Block 620 Lot 112-01
Work Site Location 2700 Hooper Ave.

Owner in Fee Joe Velfauto
Address 2700 Hooper Ave.
Telephone () 920-1550
Contractor Richard J. Thacker
Address 1015 E. 11th St.
Telephone () 855-4393
Lic. No. 4953 or Social Security No. 143-42-5541
Federal Emp. No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present N Proposed _____
Building Sewer Size 4"
Water Service Size 1"
Estimated Cost of Plumbing Work \$ 4800-

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)
☐ No Plans Required	Type:	Failure Failure Approval Initial
Joint Plan Review Required:	Slab	<u>1-6-93</u> <u>94</u>
☐ Bldg. ☐ Elec. ☒ Fire	Rough	<u>1-11-93</u> <u>94</u>
☐ Plumb. Plans Approved	Water	
Date: <u>1-15-93</u>	Sewer	
Approved by: <u>[Signature]</u>	Fixtures	
	Gas Equipment	
SUBCODE APPROVAL:	Gas Final	
☐ CO ☐ CPO ☐ CA	Solar	
Approved by: <u>1-22-93</u>	TCO	
Date: <u>1-22-93</u>		

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.

[X] Licensed Plumbing Contractor [] Exempt Applicant
Signature-Contractor Seal

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Gas Piping	
	Fuel Oil Piping	
	Water Heater	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C	
	or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Gas Service Connection	
	Active Solar System	
	Other	

Administrative Surcharge \$ 10
Paid ☐ Check # _____ Minimum Fee \$ 70
Collected by: _____ TOTAL \$ 70

Date Received
Date Issued
Control #
Permit #

U.C.C. Form F-130A

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



Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of
Division of Inspections

CHECK LIST

Re: Block _____ Lot _____

Please be advised that your application for a construction permit for the subject property has been rejected due to deficiencies in the following areas:

Administrative	_____
Zoning	_____
Engineering	_____
Building	_____
Plumbing	_____
Electric	_____
Fire	_____

See attached review check list (s) for details as to the reason your submission has been rejected. Please revise your application accordingly and resubmit to this office.

There is a 20 working day time limit for review of all documents submitted with a building permit application. This time limit ceases in the event of a rejection of any type, and starts over again when the rejection/(s) have been corrected and the application resubmitted.

Arthur J. Cierzo, Construction Official

Carbone

map made

1/4 view & Calcul
done Syzy other
and Libby - city
addition for.

Freeman

I spoke to contract
you have until
1/8/93 or
stop work with
B. ush -

didn't do
because
I was out
there & the
man called
I was for you!
for you!

Buy
~~Reliance~~
Tower River



September 22, 1994

Brick Township Building Department
401 Chambers Bridge Road
Brick, New Jersey
08723

RE: Villa Victoria
Storage & Office Area (Second Floor)

Dear Mr. Cierzo,

With regards to the above project enclosed are revised preliminary plans for your review. Our last meeting a number of weeks ago dealt mainly with egress travel distance and the number of required exits. I have met with Joe from the Villa and he has selected to remove the storage in the far back corner and install a new door in the front of the building outside the stairwell. These two revisions reduces the travel distance to under seventy-five feet. Additional, the bathroom door that was in the fire stair has been relocated to the kitchen area. I have taken an approach of complying as much as practical. The main stair shall remain as is although it is non-conforming and there is an electrical service panel inside the stairwell. The relocation and reconstruction of these items would be extreme. However, the hot-water heater has been removed, the bathroom door relocated and a true fire stair constructed.

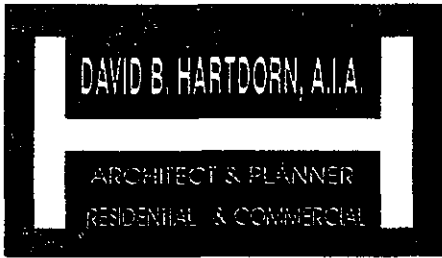
Please review these preliminary drawings and contact my office with any comments, etc. Upon approval of the preliminary drawings finalized construction documents shall be completed and submitted to your office for a building permit.

DBH/11h

Sincerely,

David B. Hartdorn, A.I.A.
Architect & Planner

cc: Villa Victoria
Bruce Clayton/ Brick Bureau of Fire Safty



September 22, 1994

Bruce Clayton
Brick Bureau of Fire Safty
500 Herbertsville Road
08724

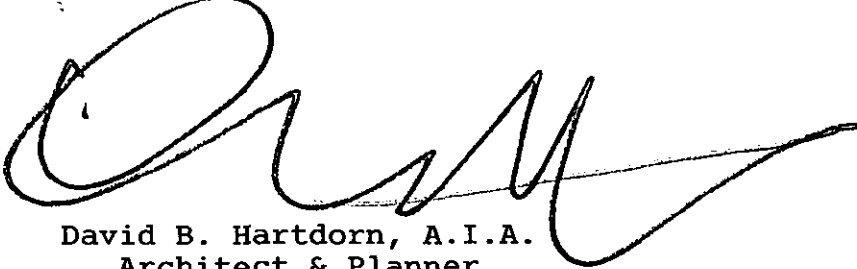
RE: Villa Victoria
Life Safty Upgrade

Dear Mr. Clayton,

This letter is to request a three month extension for the above project. We are presently in the process of having the preliminary plans reviewed by the local building department. Should your office have any questions please do not hesitate to contact my office.
Thankyou.

DBH/11h

Sincerly,



David B. Hartdorn, A.I.A.
Architect & Planner

cc: Villa Victoria
Brick Township Building Department

BRICK TOWNSHIP PLANNING BOARD
MINOR SITE PLAN APPROVAL WITH VARIANCES

RESOLUTION: R-36-92

Page -1-

CASE NO. PB-2039-MSP-V-1/92

June 10, 1992

WHEREAS, Guiseppe and Vittoria Sal Pietro, having a mailing address of 1842 Beach Boulevard, Point Pleasant, NJ 08742, have applied to the Brick Township Planning Board for minor site plan and variance approval pursuant to N.J.S.A. 40:55D-50 & 60; and

WHEREAS, proof of service as required by law upon appropriate property owners and governmental bodies has been furnished and determined to be in proper order; and

WHEREAS, a public hearing was held on May 27, 1992 in the municipal building, at which time testimony and exhibits were presented on behalf of the applicants and all interested parties having been heard; and

WHEREAS, the Board makes the following factual findings and findings of law:

1. This property is designated as Lot 10.01, Block 670 on the Municipal Tax Map.
2. The property is located in the B-2 General Business zone.
3. The applicant proposes to construct a 525 square foot addition to an existing restaurant located at the corner of

File 2
Sal Pietro
Onlowsky
L/D.
Fitzsimmons
Jannell
Blay
Eng
Zoning
O.F.S.
S.F.C.

RESOLUTION: R-36-92

Page -2-

CASE NO. PB-2039-MSP-V-1/92

June 10, 1992

Hooper and Cedar Bridge Avenues. . The addition will provide interior space for a vestibule, coat room, bar with seating and expand the existing kitchen area. There is no net increase of impervious coverage as the proposed addition replaces a paved area. The restaurant presently accommodates 130 patrons, and there is no proposed increase in the number of customer seats within the facility.

4. The Board's Engineers, T & M Associates, prepared a report to the Board dated April 2, 1992. The Board hereby adopts the findings in that report and incorporates that document in this Resolution by reference.

5. The Bureau of Fire Safety prepared a report to the Board dated February 26, 1992. The Board adopts the findings in that report and incorporates that document in this Resolution by reference.

6. The Bureau of Traffic Safety prepared a report to the Board dated March 17, 1992. The Board hereby adopts the findings in that report and incorporates that document in this Resolution by reference.

7. The following variances are required:

<u>Item</u>	<u>Required</u>	<u>Provided</u>
Lot Width	125'	122' (existing)
Front Setback	50'	7.12' (existing)

RESOLUTION: R-36-92

Page -3-

CASE NO. PB-2039-MSP-V-1/92

June 10, 1992

Landscaped Area	20% (minimum)	12% (existing)
Accessory Structure Side Setback	10'	6.7' (existing trash enclosure)
Rear Setback	50'	4.11' (existing trash enclosure)
Parking Spaces	10' x 20'	9' x 18'

8. All of the variances noted above result from existing conditions. The 525 square foot addition does not create any new variances. Based upon the limited size of the addition and the fact that new variances are not created, the Board finds it is reasonable and proper to grant relief for the deficiencies relating to existing conditions.

9. The applicants have complied with the requirements of the municipal site plan ordinance and the overall plan for the improvement of this property is consistent with the intent and purpose of the municipal development ordinance. Accordingly, the Board finds the relief requested can be granted without substantial detriment to the public good and will not substantially impair the intent and purpose of the Township Land Use Ordinance or master plan.

NOW, THEREFORE, BE IT RESOLVED, by the Brick Township Planning Board on this 10th day of June , 1992, that this application be approved subject to the following conditions:

1. The applicants shall comply with all standard Planning Board conditions for site plan approval as set forth on Attachment "A".

RESOLUTION: R-36-92

Page -4-

CASE NO. PB-2039-MSP-V-1/92

June 10, 1992

2. The applicants shall comply with all representations and agreements made by the applicants or their representatives during the presentation of this case.

3. The applicants shall comply with all requirements set forth in the report of the Board Engineer dated April 2, 1992, except that compliance with items 1, 2, 3 and that part of 4 requiring additional landscaping are hereby waived.

4. The applicants shall comply with all conditions set forth in the report of the Bureau of Fire Safety dated February 26, 1992.

5. The applicants shall comply with all conditions set forth in the report of the Bureau of Traffic Safety dated March 17, 1992.

6. The applicants shall require that patrons and employees park within the confines of the site. The current practice of parking automobiles on adjacent Lot 10, which is a vacant property, shall be discontinued.

7. The existing landscaping shall be shown on the site plan.

8. This approval is granted upon the condition that there is no increase in seating for restaurant patrons. The current number of seats available is 130, which shall be the maximum number of seats permitted. |

RESOLUTION: R-36-92

Page -5-

CASE NO. PB-2039-MSP-V-1/92

June 10, 1992

MOVED BY: Mrs. Barlo

SECONDED BY: Mr. Anderson

VOTING IN THE AFFIRMATIVE: Mayor Zboyan Mr. Anderson

Councilman Cantillo Mr. Heslin Mrs. LaDuke Mr. Vespi

Mr. Wylie Mrs. Barlo Mr. Heidrick

VOTING IN THE NEGATIVE:

INELIGIBLE TO VOTE:

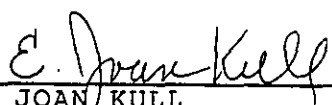
ABSTAINING:

ABSENT: Mr. Skirde Mr. Jordan

CERTIFICATION

I, E. JOAN KULL, Clerk of the Planning Board of the Township of Brick, County of Ocean, State of New Jersey, do hereby certify that the foregoing resolution was duly ADOPTED by the said Planning Board of the Township of Brick at a regular meeting held on the 10th day of June, 1992.

IN WITNESS WHEREOF, I have set my hand this 15th day of June, 1992.


E. JOAN KULL
Clerk of the Planning Board

ATTACHMENT "A"

BRICK TOWNSHIP PLANNING BOARD

STANDARD CONDITIONS FOR SITE PLAN APPROVAL

RESOLUTION: R-36-92

Page -6-

CASE NO: PB-2039-MSP-V-1/92

June 10, 1992

1. Applicant shall obtain certification by the Local Soil Conservation District of a plan for soil erosion and sediment control in accordance with N.J.S.A. 4:24-39 et seq., commonly known as the "Soil Erosion and Sediment Control Act."

2. All materials, methods of construction and details shall be in conformance with the current "Engineering Specifications and Construction Details" of the Township of Brick, which are on file in the office of the Township Engineer.

3. Applicant shall obtain all approvals required by any Federal, State, County or Municipal agency having regulatory jurisdiction of this development. Upon receipt of such approval(s), the applicant shall supply a copy of the permit(s) to the Board. In the event that any other agency requires a change in the plans approved by this Board, the applicant must reapply to the Brick Township Planning Board for approval of that change.

4. Applicant shall resubmit this entire proposal for re-approval should there be any deviation from the terms and

RESOLUTION: June 10, 1992

Page -7-

CASE NO. PB-2039-MSP-V-1/92

June 10, 1992

conditions of this Resolution or the documents submitted as part of this application, all of which are made a part hereof and shall be binding on the applicant.

5. Applicant shall provide a statement from the Brick Township Tax Collector that all taxes are paid in full as of the date of this Resolution and as of the date of the fulfillment of any condition(s) of this Resolution.

6. Prior to the issuance of a construction permit, the applicant shall furnish the Township Clerk with a cash bond and performance guarantee in an amount to be determined by the Township Engineer.

7. Applicant shall post an inspection fund with the Township Clerk in an amount to be determined by the Township Engineer.

8. No soil shall be removed from the site without the written approval of the Township Council.



PLUMBING • HEATING • AIR CONDITIONING
MAIN OFFICE

TOLL FREE
1-800-794-0523

1133-A INDUSTRIAL PARKWAY, BRICKTOWN, NEW JERSEY 08724
BRICKTOWN
458-7200

LAKESWOOD
363-0833

RED BANK
741-4801

EAST BRUNSWICK
238-4800

PRINCETON
497-1313

Villa Vittoria
Old Hooper Ave.
Brick, N.J. 08723

Subject, Heat Loss:

Room Name	heat loss	heat gain	cfm
existing utility room/hall	6600	3960	183
existing mens room	1800	1080	50
existing ladies room	1800	1080	50
existing seating area (Old Hooper Ave side)	21,616	26,520	1227
existing main seating area	58,360	84,400	3908
totals	90,176	117,040	5418
 new entrance area	 3600	 3960	 183
new bar area	21,593	19,790	916
new non smoking seating area	22,380	33,590	1555
totals	47,573	57,340	2654
 grand totals	 137,749	 174,380	 8072

Existing equipment schedule

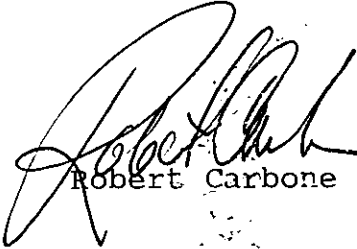
- 2- 80,000 BTU horizontal gas furnaces
- 2- 120,000 BTU horizontal gas furnaces
- 2- 36,000 BTU central air units
- 2- 59,000 BTU central air units

Total BTU requirements as follows:

heating available 314,000 BTU
heating required 137,749 BTU

cooling available 190,000 BTU
cooling required 174,380 BTU

cfm available 6,400
cfm required 8,072


Robert Carbone Co., Inc

SERVICE PLUS!