BLOCK 672 LOT 8 QUALIFICATION CODE _____ ADDRESS (SITE) 51 Chambers Bridge Rd PERMIT NO. 05-4111

~~CITY OF ORANGE~~
~~OFFICE OF THE CONSTRUCTION OFFICIAL~~
~~29 North Day Street~~
~~Orange, NJ 07050~~
~~(973) 266-4099~~

CONSTRUCTION PERMIT APPLICATION

C05-137932

NEW JERSEY UNIFORM CONSTRUCTION CODE

Called 10/6/05 OK

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

I. IDENTIFICATION

1. Propsed Work Site at: sign installation
2. Name of Owner in Fee: Levitz Furniture Tel. (631) 589-0620
   Address 300 Crossways Pk Dr. Woodbury NY 11797
   street municipality zip code
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: Capital Signs + Service Inc. Tel. (631) 753-2586
   Address 61 Cabot St. West Babylon, NY 11704
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 113401389 FAX: (631) 753-2587
5. Architect or Engineer N/A Tel. ( ) _____
   Address _____
6. Responsible Person in Charge of Work Capital Signs + Service Inc. - John Florentz
   Tel. (631) 753-2586 FAX (631) 753-2587

V. FEE SUMMARY (for office use only)

			Update	Update
1. Building	$	150 / 40		
2. Electrical				
3. Plumbing				
4. Fire Protection				
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review				
8. Subtotal	$			
9. DCA Training Fee				
10. Subtotal				
11. Cert. of Occupancy				
12. Other ZA		30		
13. TOTAL	$	231		

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

1. Number of Stories	1	
2. Height of Structure	21'-11"	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	–	

RECEIVED 9/21/05

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☒ Alteration	$8,000				09/20/05	MK	10-4-07		
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☒ Electrical					9-27-05	MW	11-9-08		
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition	EWC	9/21/05			9/21/05				
TOTAL COSTS									

OPTIONAL (for office use only)

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:

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/18/2008
Control Number C-05-137932
Permit Number 05-4111
Permit Issue Date 10/12/2005
Certificate Number 05-4111

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 51 CHAMBERS BRIDGE RD Brick Township, NJ Block: 672 Lot: 8 Qual:

Owner in Fee: INLAND SOUTHEAST BRICK LLC%INLAND

Owner Address: 2907 BUTTERFIELD RD OAK BROOK NJ 60523

Telephone:

Contractor CAPITAL SIGNS & SERVICES INC

Address 61 CABOT STREET W BABYLON NY 11704-

Telephone: 631-753-2586 Fax:

License Number or Builders Registration Number: Federal Emp. Number: 11-3401389

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: SIGN INSTALLATION installation of 2 sets of channel letters

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: 04/18/2008 U.C.C. F260 (rev. 08/05)

CONSTRUCTION PERMIT

Date Issued 10/12/2005
Control # C-05-137932
Permit # 05-4111

IDENTIFICATION Block: 672 Lot: 8 Qualifier
Work Site Location: 51 CHAMBERS BRIDGE RD Brick Township, NJ
Owner in Fee INLAND SOUTHEAST BRICK LLC%INLAND
Address 2907 BUTTERFIELD RD OAK BROOK NJ 60523
Telephone:

Contractor CAPITAL SIGNS & SERVICES INC
Address 61 CABOT STREET W BABYLON NY 11704-
Telephone: 631-753-2586
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 11-3401389

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SIGN INSTALLATION installation of 2 sets of channel letters

Note: If constuction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $8,300

Construction Official — 10/12/2005 Date

PAYMENTS (Office Use Only)

Building	$150
Electrical	$40
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$11
CO Fee	
Other	$30
Total	$231
Check No.	10325
Cash	$0
Credit	$0
Collected By	Ann Marie Hanlon

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

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

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 09/08/2005
Date Issued ~~12/31/1899~~ 10/12/05
Control # C-05-137932
Permit # 05-4111

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

Block 672 Lot 8 Qualification Code

Work Site Location: 51 CHAMBERS BRIDGE RD Brick Township, NJ

Owner in Fee: INLAND SOUTHEAST BRICK LLC%INLAND

Address 2907 BUTTERFIELD RD OAK BROOK NJ

Tel.

Contractor: LUNAR ELECTRIC CONTR INC

Address P.O. BOX 777 OLD BRIDGE NJ

Tel. 732/823-1777 Fax.

Lic No.

Federal Employee No. 22-3225018

Levitz furniture

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed U

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $300

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
☒ No Plan Required		

Joint Plan Review Required
☐ Building ☐ Plumbing
☐ Fire ☐ Elevator
☐ Electrical Plans Approved

Date: 92705
Approved by: MM

SUBCODE APPROVAL
☐ CO ☐ CCO ☒ CA

Date: 4708
Approved by: MM

INSPECTIONS

Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			11/08/05	O MM
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH
I hereby certifiy that I am the (agent of) owner of the record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
0		Lighting Fixtures	
0		Recepticles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors - Fract. HP	
0		Emergency & Exit Lights	
0		Communication Points	
0		Alarm Devices/F.A.C. Panel	
0			
0		TOTAL NUMBERS	$0
0		Pool Permit/with UW Lights	$0
0		Storable Pool/Spa/Hot Tub	$0
0	0	KW Elec. Range/Receptical	$0
0	0	KW Oven/Surface Unit	$0
0	0	KW Elec. Water Heater	$0
0	0	KW Elec. Dryer/Recepticle	$0
0	0	KW Dishwasher	$0
0	0	HP Garbage Disposal	$0
0	0	KW Central A/C Unit	$0
0	0	HP/KW Space Heater/Air	$0
0	0	KW Baseboard Heat	$0
0	0	HP Motors 1/+ HP	$0
0	0	KW Transformer/Generator	$0
0	0	AMP Service	$0
0	0	AMP Subpanels	$0
0	0	AMP Motor Control Center	$0
1	2	KW Elec. Sign/Outline Light	$10
0	0		$0
0	0		$0

COMMERCIAL

Administrative Surcharge	$0
Minimum Fee	$40
State Permit Surcharge Fee	$0
TOTAL FEE	$40

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received 09/08/2005
Control # C-05-137937
Date Issued 10/12/05
Permit # 05-4111

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

Block 672 Lot 8 Qualification Code

Work Site Location: 51 CHAMBERS BRIDGE RD Brick Township, NJ

Owner in Fee: INLAND SOUTHEAST BRICK LLC%INLAND

Address 2907 BUTTERFIELD RD OAK BROOK NJ

Tel.

Contractor: CAPITAL SIGNS & SERVICES INC

Address 61 CABOT STREET W BABYLON NY

Tel. 631-753-2586 Fax.

Contractor License No. or, if new home, Bldrs Reg. No.

Federal Employee No. 11-3401389

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

SIGN INSTALLATION, installation of 2 sets of channel letters

COMMERCIAL

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☑ All	09/30/05	
☐ Footing		
☐ Foundation		
☐ Frame		
☐ Other		

Joint Plan Review Required
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator

SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
Date: 10-4-07
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes-Base Layer				
Finishes-Final				
Energy				
Mechanical				
TCO				
Other				
Final			10/4/07	
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present 0 Proposed U
Constr. Class Present 0 Proposed 0
Number of Stories
Height of Structure Ft.
Area - Largest Floor Sq. Ft.
New Bldg. Area / All Floors Sq. Ft.
Volume of New Structure Cu. Ft.
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. $0
2. Rehabilitation $8,000
3. Total (1+2) $8,000

TYPE OF WORK

☐ New Building
☐ Addition
☐ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence Height (exceeds 6')
☑ Sign 150 Sq. Ft.
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz Abatement NJAC 5:17
☐ Other
☐ Demolition

FEE (Office Use Only)

	$0
	$0
	$0
	$0
	$0
	$0
	$150
	$0
	$0
	$0
	$0
	$0
Administrative Surcharge	$0
Minimum Fee	$0
State Permit Surcharge Fee	$11
TOTAL FEE	$161

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

- ACCESS IS AVAILABLE
- ELECTRIC IS AVAILABLE
- DEDICATED GROUNDLINE IS PRESENT
- REMOVAL OF EXISTING SIGNAGE IS NECESSARY
  PATCH & TOUCH UP IS REQUIRED

"LEVITZ" SELF CONTAINED STYLE
CHANNEL LTRS.
"FURNITURE" REMOTE STYLE
IND. CHANNEL LTRS.
SEE SECTION FOR DETAILS

FASCIA IS STUCCO CONST.
BACKED W/ PLYWOOD
COLOR IS BEIGE

STOREFRONT ELEVATION - (MAIN ENTRANCE)
SCALE: 3/16"=1'-0"

LOC: LEVITZ FURNITURE
51 CHAMBERS BRIDGE RD.
BRICK, NJ

DWG: ELEVATION

UNDERWRITERS LABORATORIES, INC. LISTED

SCALE: AS NOTED

DATE: 7-05

CAPITOL SIGNS & SERVICE, INC.
61 CABOT STREET W. BABYLON, NY 11704
PH: 631-753-2586 FX: 631-753-2587

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.twp.brick.nj.us

Date: _____

Block: 612 Lot: 8

Property Address: 51 Chambersbridge Road

I, _____ (name) of _____ (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, ect. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

_____
Applicant's Signature

COMMERCIAL

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the 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.

FOR OFFICE USE ONLY

Approved on: 9/21/05 Signed: _____

Rejected on: _____ Signed: _____

Comments:

Township of Brick
Zoning Permit

Approved: Thursday, September 15, 2005 **Number:** 1366

Block 672 **Lot** 8 **Zone:** B-3, Highway Dev.

Property Address: 51 Chambers Bridge Road

Applicant: John Florentz; Capitol Sign & Service, Inc.

Property Owner Inland Southeast Brick, LLC

Existing Use: Levitz Furniture store.

Proposed Use: Levitz Furniture store.

Proposed Construction: Replacing front and side façade signs to change name from "Seaman's Furniture" to "Levitz Furniture"; Front, 5'8" x 19'; Side, 3'x14'2".

Conditions:
The total sign areas may not exceed 15% of the total façade areas.
An additional zoning permit is required for any additional sign.
Thestreet address number must be displayed on the signs or building.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.

Michael P. Fowler, AICP/PP
Principal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

SEP 15 2005

Applications missing any of the following information will delay processing and may be returned to you.

BLOCK 672 LOT 8 QUALIFIER _____

PROPERTY ADDRESS 51 Chambers Bridge Rd. Brick, NJ

PERSONAL NAME OF APPLICANT John Florentz

BUSINESS NAME OF APPLICANT Capitol Sign + Service, Inc.

MAILING ADDRESS OF APPLICANT 61 Cabot St. W. Babylon, NY 11704

PROPERTY OWNER'S FULL NAME ~~Inland Mid-Atlantic Management Corp.~~ Southeast Brick, LLC

PRESENT USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-family dwelling
☒ Commercial (please describe) Levitz Furniture

PROPOSED USE OF PROPERTY (check all that apply)

☐ Vacant Lot ☐ Single-family dwelling ☐ Multi-dwelling
☒ Commercial (please describe) Levitz Furniture

PROPOSED CONSTRUCTION (check all that apply)

☐ New Building (please describe) _____ Height _____
☐ Addition - Height _____
☐ Alteration
☐ Porch or deck - Height _____
☐ Shed - Height _____
☐ Fence - Type _____ Height _____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☒ Other (please describe) new sign installation

CHECKLIST

☑ All information completed above
☑ Two (2) copies of a 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.

Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT _____ Date 8/30/05

Reviewed by Zoning Office _____ Date 9/15/5 (X) Approved ( ) Denied

61 Cabot Street, West Babylon, New York 11704
ph: 631-753-2586 • fx: 631-753-2587

October 6, 2005

TOWNSHIP OF BRICK
Building Department
401 Chambers Bridge Road
Brick, NJ 08723

RE: Levitz Furniture
51 Chambers Bride Road
Brick, NJ

To Whom It May Concern:

Enclosed is check for the required permit application fee of $231.00 for the above-mentioned location. Please put in the permits in the self-address stamped envelope that has been provide.

Should you have any questions and/or comments please feel free to contact me at (631) 753-2586.

Thank you,

Melissa Mc Ginn
Project Coordinator

631 155
2587

TOWNSHIP OF BRICK
OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

PLANNING BOARD

(732) 262-1045
FAX: (732) 262-8954
http://www.twp.brick.nj.us

DATE: October 13, 2000

MEMO TO FILE: Case #2311-PSP-V/FSP-8/99
SHL Brick, LLC
Block 672, Lot 8

FROM: E. Joan Kull, Secretary

At the September 6, 2000 Work Session, Michael P. Fowler, Municipal Planner, discussed with the Board the proposed sign elevations for the new Seaman's store at the above site. Proposed elevations were submitted to Mr. Fowler by Arthur J. Michels, AIA by fax on August 8, 2000. After discussion with Mr. Fowler, the Board accepted the sign elevations as submitted.

cc: SHL Brick LLC
Michels Associates
Mark Troncone, Esq.
Michael P. Fowler, AICP/PP

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

DEPARTMENT: ADMINISTRATION & FINANCE

OFFICE: LAND USE MANAGEMENT
Mich: P. Fowler, AICP/PP
Principal Planner
(732) 262-1042
F : (732) 262-8954
http www.twp.brick.nj.us

Joseph C. Scarpelli, Mayor

Township Council:
Frederick J. Underwood, Sr. - President
Stephen C. Acropolis
Kimberley S. Castan
Steven N. Cucci
Gregory S. Kavanagh
Kathy M. Russell
Tony R. Shupin

August 11,2000

Brick Township Planning Board
401 Chambers Bridge Road
Brick, New Jersey 08723

RE: PB-2311-PSP- FSP-8/99
SHL Brick, LLC
Brick Center Pl a
Block 872, Lot
Prel & Final Site Plan
2nd Resolution ompliance

Dear Board Members:

We have reviewed the above referenced Preliminary & Final sit plan, last revised July 24,2000, and dated August 16,1999, for compliance with e conditions stated in Planning Board Resolution R-11-00, and dated Fe ruary 16,2000.

Prior to signing the subject plans, the following items must be a dressed:

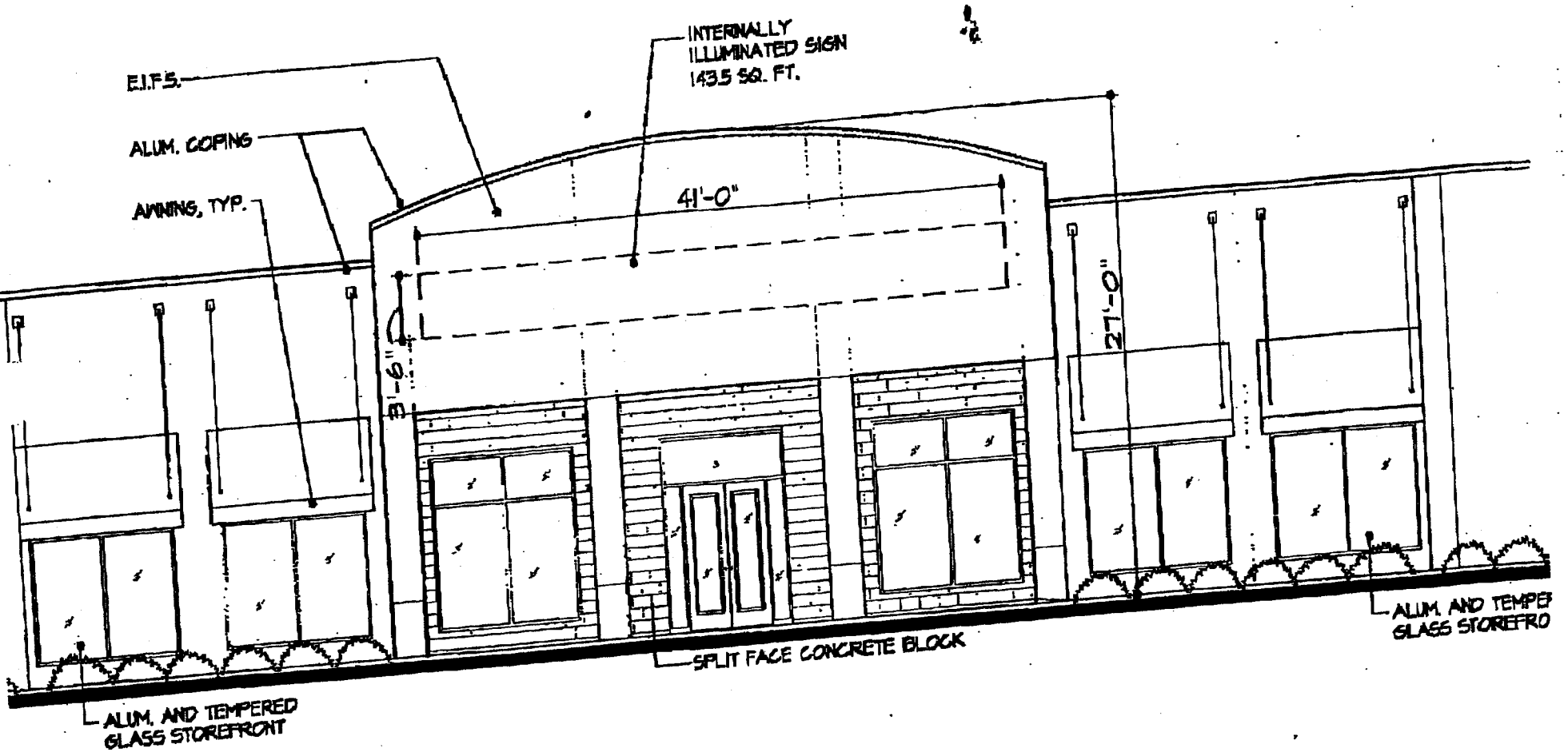
1) It is required that the building sign on the façade elevation fa ing Chambers Bridge Road be approved by the Planning Board rior to the issuance of a building permit. The façade sign on the side e vation was required to be smaller than the façade sign on the front levation.

With the exception of the above stated item and any items contained in the Planning Board Engineer's letter the plans conform with the conditions of resolution compliance.

Very truly yours,

Michael P. Fowler, AICP/PP
Office of Land Use Management

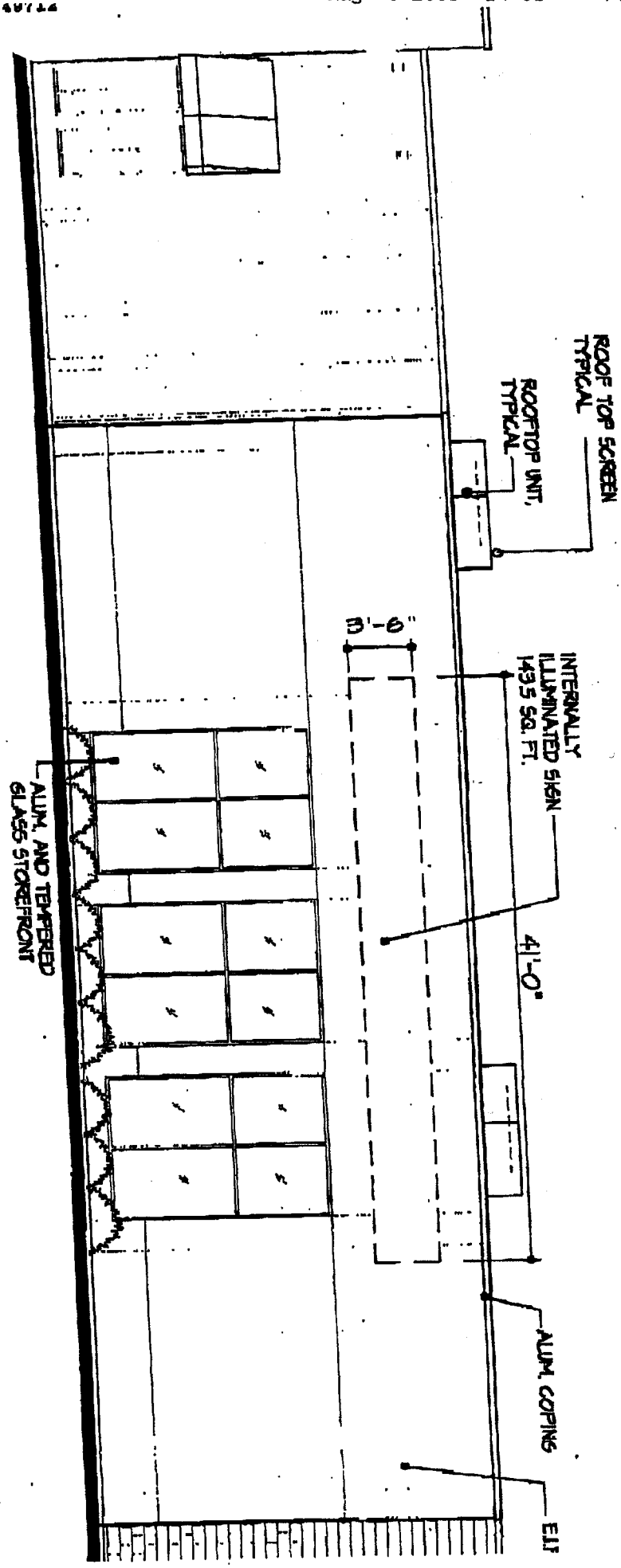
MPF/kb



FRONT ELEVATION

SCALE: 1/8" = 1'-0"

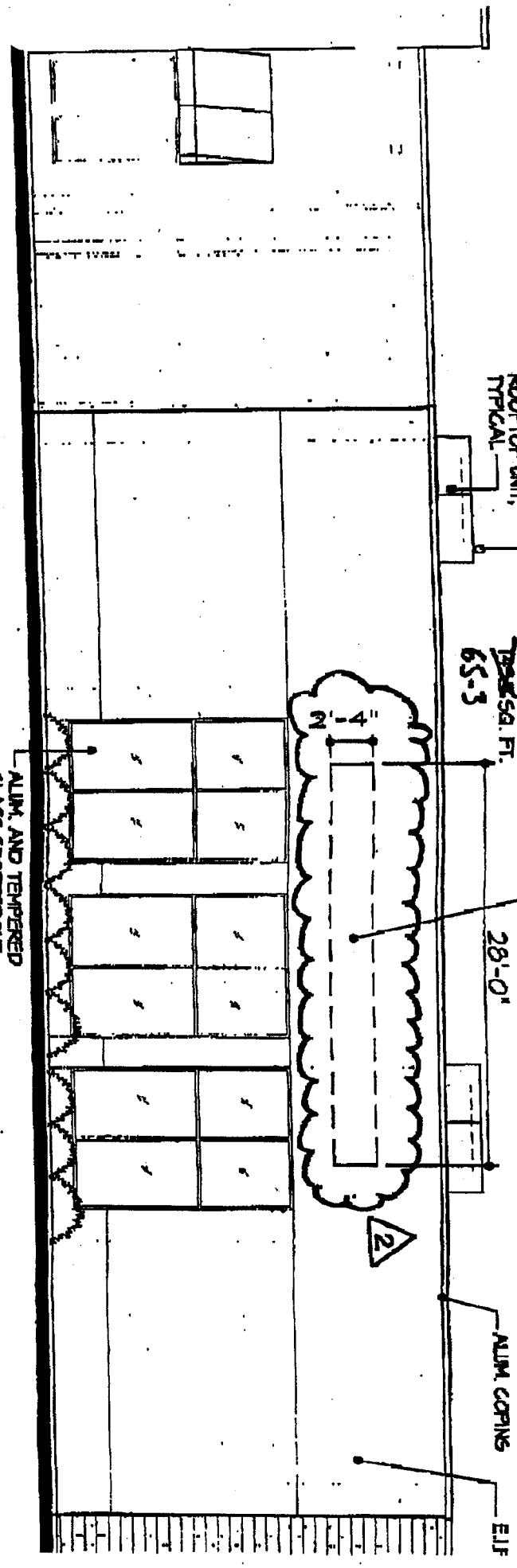
Existing Plan



SIDE ELEVATION

SCALE: 1/8" = 1'-0"

Existing plans



SIDE ELEVATION

SCALE: 1/8" = 1'-0"

Proposed changes

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 Capitol Signs + Service Inc - John Florentz

Address 61 Cabot Street

West Babylon, NY 11704

Telephone (631) 753-2586

Signature _____

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