

OCT 10 1984

## BUILDING

CONSTRUCTION PERMIT  
APPLICATION

## I. IDENTIFICATION

1. Proposed Work at: Rt 70 (WALKST)

2. Owner Name: L.C. JR INC Tel. ( )

Address Rt 70 BRICKTOWN NJ

3. Principal Contractor: D.C. BARNHARTT CONSTRUCTION CO Tel. ( )

Address Rt 37 T.R.

Lic. No. or Builder Reg. No. Federal Emp. No.

4. Architect or Engineer: H. STAURCH Tel. ( ) 341-9090

Address TOMS RIVER N.J.

5. Responsible Person in Charge of Work Tel. ( ) ELMER WRIGHT

## II. PROPOSED WORK

| A. TYPE OF WORK                                                                                                         | B. CATEGORIES OF WORK                                                                         | D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?       |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| 1. <input type="checkbox"/> Minor Work (Single Trade)                                                                   | Permit/Category Estimated                                                                     | 1. <input type="checkbox"/> Elevators/Dumbwaiters                 |
| 2. <input type="checkbox"/> Small Job (\$5,000 and no Prior Approvals)<br>Complete only II.B., III and IV.A. and Page 2 | 1. <input checked="" type="checkbox"/> Building/Structural \$                                 | 2. <input type="checkbox"/> High-Pressure Boilers                 |
| 3. <input type="checkbox"/> New Building                                                                                | 2. <input type="checkbox"/> Plumbing                                                          | 3. <input type="checkbox"/> Refrigeration Systems                 |
| 4. <input type="checkbox"/> Addition                                                                                    | 3. <input type="checkbox"/> Electrical                                                        | 4. <input type="checkbox"/> Pressure Vessels                      |
| 5. <input checked="" type="checkbox"/> Alteration                                                                       | 4. <input type="checkbox"/> Fire Protection                                                   | 5. <input type="checkbox"/> Hazardous Uses/Places of Assembly     |
| 6. <input type="checkbox"/> Repair, Replacement                                                                         | 5. <input type="checkbox"/> Other                                                             | 6. <input type="checkbox"/> Cross-connections/Backflow Preventors |
| 7. <input type="checkbox"/> Demolition                                                                                  | 6. <input type="checkbox"/> Other                                                             | 7. <input type="checkbox"/> Sprinklers                            |
| 8. <input type="checkbox"/> Other: <u>Plg. Reduction</u>                                                                | TOTAL COST \$ <u>25,000</u> X                                                                 | 8. <input type="checkbox"/> Smoke Control Systems in Open Wells   |
|                                                                                                                         | C. DO YOU WANT:                                                                               |                                                                   |
|                                                                                                                         | 1. <input type="checkbox"/> Partial Releases 2. <input type="checkbox"/> Prototype Processing |                                                                   |

## III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R-1) If new construction, enter no. of dwelling units

2. ☐ Multi-Family (R-2) HMD Reg. No.:

3. ☐ Two Family (R-3b)

4. ☐ One-Family (R-3a) If other than new construction, enter no. of dwelling units:

Before Construction: \_\_\_\_\_

After Construction: \_\_\_\_\_

Net Gain (or loss): \_\_\_\_\_

## B. NON-RESIDENTIAL

5. ☐ Theatres with Stage (A-1-A)

6. ☐ Movie Theatres (A-1-B)

7. ☐ Night Clubs (A-2)

8. ☒ Restaurants, Libraries, Museums (A-3)

9. ☐ Religious Assembly (A-4)

10. ☐ Outdoor Assembly (A-5)

11. ☐ Business (B)

12. ☐ Educational (E)

13. ☐ Moderate-Hazard Factory (F-1)

14. ☐ Low-Hazard Factory (F-2)

15. ☐ High-Hazard (H)

16. ☐ Institutional Detention Center (I-1)

17. ☐ Hospitals, Infirmeries (I-2)

18. ☐ Group Homes (I-3)

19. ☐ Mercantile (M)

20. ☐ Moderate-Hazard Warehouse (S-1)

21. ☐ Low-Hazard Warehouse (S-2)

22. ☐ Temporary, Misc. (U)

23. ☐ Other

State Specific Use: KITCHEN EXPANSION

If Change in Use Group, Indicate Former: \_\_\_\_\_

## IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☒ Private (Individual, Corp., Non-profit Inst., Etc.)

2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

| Principal                              | Secondary                | Type                     |
|----------------------------------------|--------------------------|--------------------------|
| 3. <input checked="" type="checkbox"/> | <input type="checkbox"/> | Gas                      |
| 4. <input type="checkbox"/>            | <input type="checkbox"/> | Oil                      |
| 5. <input type="checkbox"/>            | <input type="checkbox"/> | Electric                 |
| 6. <input type="checkbox"/>            | <input type="checkbox"/> | Solid (Wood, Coal, Etc.) |
| 7. <input type="checkbox"/>            | <input type="checkbox"/> | Propane                  |
| 8. <input type="checkbox"/>            | <input type="checkbox"/> | Solar                    |
| 9. <input type="checkbox"/>            | <input type="checkbox"/> | Other                    |

C. TYPE OF SEWAGE DISPOSAL

10. ☒ Public or Private Company

11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☒ Public or Private Company

13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories ONE

15. Height of Structure 12.7 Ft.

16. Area—Largest Floor 866.40 Sq. Ft.

17. Bldg. Area—All Fls. 1532.46 Sq. Ft.

18. Volume of Structure 21578.88 Cu. Ft.

19. Total Land Area Disturbed \_\_\_\_\_ Sq. Ft.

LDS BR 10207696

# CERTIFICATION IN LIEU OF OATH

## I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

- A. ☒ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.
- B. ☐ I further certify that I will perform the work below.  
     B1. ☐ Building                      B2. ☐ Electrical                      B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.
- 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 understand that if any of the above statements are willfully false, I am subject to punishment.

SIGNATURE Donato D'Aglio Pres DATE \_\_\_\_\_

## II. AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

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 \_\_\_\_\_ TEL. (    ) \_\_\_\_\_

ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SIGNATURE \_\_\_\_\_

9470

PERMIT NO 2482-

# PRIOR APPROVALS CHECKLIST

☐ Planning Board  
☐ Zoning Board  
☐ Sewer Authority  
☐ Water Authority  
☐ Fire Department  
☐ Police Department  
☐ Health Department  
☐ Soil Conservation  
☐ N.J. Dept. of Community Affairs  
☐ N.J. Dept. of Transportation  
☐ N.J. Dept. of Environmental Protection  
☐ Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ Flood Hazard

- ☐ One and Two Family Dwellings
- ☐ Building
- ☐ Electrical
- ☐ Plumbing

- ☐ Mechanical
- ☐ Energy
- ☐ Barrier Free
- ☐ Other

☐ As Built  
Elevation  
Certification

☐ Other

# PERMIT CONTROL

## I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

- ☐ PARTIAL RELEASES  
☐ PROTOTYPE PLAN - FILE LOCATION AND NO. \_\_\_\_\_

| Plan Review Required                | Type of Work         | Plans Received By<br>Date Receiver | Approval Date | Reviewer | Comments       |
|-------------------------------------|----------------------|------------------------------------|---------------|----------|----------------|
| <input checked="" type="checkbox"/> | BUILDING             | 10-16-84                           | 11-16-84      | E.B.     |                |
|                                     | Footings/Foundations |                                    |               |          |                |
|                                     | Framing              |                                    |               |          |                |
|                                     | Architectural        |                                    |               |          |                |
|                                     | Other <i>Joining</i> |                                    | 10/18/84      | JDE      | R.H. dies only |
| <input checked="" type="checkbox"/> | PLUMBING             |                                    | 11-16-84      | 28       |                |
| <input checked="" type="checkbox"/> | ELECTRICAL           |                                    | 10-21-84      | M.L.     | ATP AS NOTED   |
| <input type="checkbox"/>            | FIRE PROTECTION      |                                    |               |          |                |
| <input type="checkbox"/>            | OTHER                |                                    |               |          |                |

## II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

| Issue Date | Category             | Revisions | Final Inspection | Comments |
|------------|----------------------|-----------|------------------|----------|
|            | ALL CONSTRUCTION     |           |                  |          |
|            | BUILDING             |           | 7-30-86          | K.H.     |
|            | Footings/Foundations |           |                  |          |
|            | Framing              |           |                  |          |
|            | Architectural        |           |                  |          |
|            | Other                |           |                  |          |
|            | PLUMBING             |           | 7-30-86          | J8       |
|            | ELECTRICAL           |           |                  |          |
|            | FIRE PROTECTION      |           | 9-12-80          | 28       |
|            | OTHER                |           |                  |          |

## III. CERTIFICATES ISSUED

| CERTIFICATES TO BE ISSUED:                                  | Date Issued |
|-------------------------------------------------------------|-------------|
| <input type="checkbox"/> Temporary Certificate of Occupancy | _____       |
| Date Expired _____                                          |             |
| <input type="checkbox"/> Temporary Certificate of Occupancy | _____       |
| Date Expired _____                                          |             |
| <input type="checkbox"/> Certificate of Occupancy           | _____       |
| No. _____                                                   |             |
| <input type="checkbox"/> Certificate of Continued Occupancy | _____       |
| No. _____                                                   |             |
| <input type="checkbox"/> Certificate of Approval            | _____       |
| No. _____                                                   |             |
| <input type="checkbox"/> None                               |             |

## IV. ON-GOING INSPECTIONS

| On-going Inspections Required<br>(See Page 1, II.D.) | Date Posted to<br>Log and Tickler |
|------------------------------------------------------|-----------------------------------|
| _____                                                | _____                             |
| _____                                                | _____                             |
| _____                                                | _____                             |
| _____                                                | _____                             |
| _____                                                | _____                             |
| _____                                                | _____                             |
| _____                                                | _____                             |
| _____                                                | _____                             |
| _____                                                | _____                             |
| _____                                                | _____                             |

## V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

### A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

|                                                                      | AMOUNT             |
|----------------------------------------------------------------------|--------------------|
| BUILDING                                                             | \$ 193.05          |
| PLUMBING                                                             | 20.00              |
| ELECTRICAL                                                           | .                  |
| FIRE PROTECTION                                                      | 213.05             |
| OTHER                                                                | 213.05             |
| <b>SUBTOTAL</b>                                                      | \$ 425.10          |
| - LESS: 20% of subtotal (when plan review performed by state agency) |                    |
| D.C.A. TRAINING FEE .0006 x 27578.80                                 | 16.55              |
| CERTIFICATE OF OCCUPANCY                                             | 31.91              |
| OTHER                                                                | .                  |
| OTHER                                                                | .                  |
| <b>TOTAL COLLECTED WHEN PERMIT ISSUED</b>                            | \$ 282.81          |
| DATE _____                                                           | Collected By _____ |

### B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

|                                            | Date  | Collected By | AMOUNT |
|--------------------------------------------|-------|--------------|--------|
| CERTIFICATE OF OCCUPANCY                   | _____ | _____        | .      |
| OTHER                                      | _____ | _____        | .      |
| OTHER                                      | _____ | _____        | .      |
| - LESS: Refunds ( )                        |       |              |        |
| <b>TOTAL COLLECTED AFTER PERMIT ISSUED</b> |       |              | \$ .   |

### C. TOTAL CONSTRUCTION FEES COLLECTED

|                             | AMOUNT |
|-----------------------------|--------|
| COLLECTED WITH PERMIT (VA)  | \$ .   |
| COLLECTED AFTER PERMIT (VB) | .      |
| <b>TOTAL</b>                | \$ .   |

# BUILDING SUBCODE TECHNICAL SECTION



Block 672 Lot 12  
Subdivision Well Street

**APPLICANT** – Complete unshaded areas only

**When changing contractors, notify this office**

Owner L.C. JR INC  
Address Rt 70 WALL ST.  
BRIGHTON.  
Tel. (      ) OFFICE 349-2710  
Work Site Address SAME.

Contractor OCEAN CONSTRUCTION  
Address RT 37 TOMS RIVER  
Tel. 1 349-2710  
Lic. No. \_\_\_\_\_  
Federal Emp. No. \_\_\_\_\_

**CERTIFICATION IN LIEU OF OATH:**

*(Complete for Minor Work and Small Job Only)*

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

agent. [Signature]  
AGENT SIGNATURE

### DESCRIPTION OF WORK

*Give detail description including materials used, dimensions, etc.*

Kitchen Expansion  
(Addition)

**TYPE OF WORK:**

- ☐ New Building  
☒ Addition  
☐ Alteration/Renovation  
     ☐ Roofing  
     ☐ Siding  
     ☐ Other \_\_\_\_\_  
☐ Demolition  
☐ Miscellaneous  
     ☐ Fence  
     ☐ Sign  
     ☐ Pool  
     ☐ Elevator  
     ☐ Other \_\_\_\_\_

### Fee Basis

**F**

|                                                    |    |            |
|----------------------------------------------------|----|------------|
|                                                    | \$ |            |
| [REDACTED]                                         |    | [REDACTED] |
|                                                    |    |            |
|                                                    |    |            |
|                                                    |    |            |
| [REDACTED]                                         |    | [REDACTED] |
|                                                    |    |            |
|                                                    |    |            |
|                                                    |    |            |
|                                                    |    |            |
| SUBTOTAL                                           | \$ |            |
| Minimum Building Fee (if applicable)               | \$ |            |
| Total Building Fee<br>Greater of Minimum Subtotal) | \$ |            |

☒ See Plans

### C. BUILDING CHARACTERISTICS

USE GROUP: Common Present Common Proposed

No. of Stories 1 Total Building Area—All Floors \_\_\_\_\_ Sq. Ft.

Height of Structure \_\_\_\_\_ Ft.      Volume of Structure \_\_\_\_\_ Cu. Ft.

Area—Largest Floor \_\_\_\_\_ Sq. Ft. Total Land Area Disturbed \_\_\_\_\_ Sq. Ft.

Estimated Cost of Building Work: \$ 25,000.

#### D. COMMENTS

☐ Partial Releases    ☐ Prototype Processing

# TOWNSHIP OF BRICK



## BUILDING SUBCODE TECHNICAL SECTION



|                  |                 |               |
|------------------|-----------------|---------------|
| PERMIT NO.       | DATE ISSUED     | REVISION DATE |
| Block 672 Lot 12 | Subdivision 212 |               |

### A. IDENTIFICATION

|                                          |                  |                                              |  |
|------------------------------------------|------------------|----------------------------------------------|--|
| APPLICANT — Complete unshaded areas only |                  | When changing contractor, notify this office |  |
| Owner                                    | Contractor       |                                              |  |
| Address                                  | Address          |                                              |  |
| Tel. ( )                                 | Tel. ( )         |                                              |  |
| Work Site Address                        | Lic. No.         |                                              |  |
|                                          | Federal Emp. No. |                                              |  |

|                                                                                                                                                             |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| CERTIFICATION IN LIEU OF OATH:<br>(Complete for Minor Work and Small Job Only)                                                                              |  |
| I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent. |  |
| AGENT SIGNATURE                                                                                                                                             |  |

### B. TECHNICAL SITE DATA

|                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           |                                                                                             |
|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------------------------------------------------|
| DESCRIPTION OF WORK<br>Give detail description including materials used, dimensions, etc. | TYPE OF WORK:<br><input type="checkbox"/> New Building<br><input checked="" type="checkbox"/> Addition<br><input type="checkbox"/> Alteration/Renovation<br><input type="checkbox"/> Roofing<br><input type="checkbox"/> Siding<br><input type="checkbox"/> Other<br><input type="checkbox"/> Demolition<br><input type="checkbox"/> Miscellaneous<br><input type="checkbox"/> Fence<br><input type="checkbox"/> Sign<br><input type="checkbox"/> Pool<br><input type="checkbox"/> Elevator<br><input type="checkbox"/> Other | Fee Basis | Fee                                                                                         |
|                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | SUBTOTAL  | Minimum Building Fee (if applicable)<br>Total Building Fee (Greater of Minimum or Subtotal) |

### C. BUILDING CHARACTERISTICS

|                                     |         |                                |
|-------------------------------------|---------|--------------------------------|
| USE GROUP:                          | Present | Proposed                       |
| No. of Stories                      |         | Total Building Area—All Floors |
| Height of Structure                 |         | Volume of Structure            |
| Area—Largest Floor                  |         | Total Land Area Disturbed      |
| Estimated Cost of Building Work: \$ |         |                                |

### D. COMMENTS

|                                                                                            |
|--------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Partial Releases<br><input type="checkbox"/> Prototype Processing |
|--------------------------------------------------------------------------------------------|

**JOB CONDITION/COMMENTS**Maximum Occupancy Load:

## U.C.C. Form F-110 (8/83)

TOWNSHIP OF BRICK



# FIRE SUBCODE TECHNICAL SECTION



PERMIT NO. 2882  
DATE ISSUED 1-10-85  
REVISION DATE \_\_\_\_\_  
Block 672 Lot 12  
Subdivision WALL ST.

## A. IDENTIFICATION

APPLICANT — Complete unshaded areas only

When changing contractors, notify this office

Owner L.C. JR INC

Contractor OCEAN CONSTRUCTION

Address RT 70

Address RT 37

BRICK TOWN

TOMS RIVER

Tel. ( ) 349-2710

Tel. ( ) 349-2710

Work Site Address RT 70

Lic. No. \_\_\_\_\_

WALL STREET

Federal Emp. No. \_\_\_\_\_

## CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE \_\_\_\_\_

## B. TECHNICAL SITE DATA

### B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other \_\_\_\_\_ FEE

Area Sprinkled: ☐ Full ☐ Partial (specify in comments)

No. of Heads: \_\_\_\_\_ No. of Spare Heads: \_\_\_\_\_

☐ Valves Supervised — Method: \_\_\_\_\_

Water Supply — Source: \_\_\_\_\_ Size: \_\_\_\_\_

FD Connection Location: \_\_\_\_\_

Estimated Cost of Work: \$ \_\_\_\_\_ \$

### B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO<sub>2</sub>

☐ Halon ☐ Foam

☐ Other \_\_\_\_\_

Manual Pull: ☐ Yes ☐ No

Locations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Estimated Cost of Work: \$ \_\_\_\_\_ \$

### B3. ALARM

TYPE: ☐ Manual ☐ Automatic FEE

Supervision Type: ☐ Local ☐ Central

☐ Proprietary ☐ Remote Location

Estimated Cost of Work: \$ \_\_\_\_\_ \$

### B4. STAND PIPES

Pipe Size: \_\_\_\_\_ Pump Size: \_\_\_\_\_

Water Source: \_\_\_\_\_ Size: \_\_\_\_\_

FD Connection Location: \_\_\_\_\_

Hose Station: ☐ Yes ☐ No

Estimated Cost of Work: \$ \_\_\_\_\_ \$

### B5. OTHER

\_\_\_\_\_ \$

\_\_\_\_\_ \$

\_\_\_\_\_ \$

Subtotal \$ \_\_\_\_\_

Minimum Fire Protection Fee (If Applicable) \$ \_\_\_\_\_

Total Fire Protection Fee (Greater of Minimum or Subtotal) \$ \_\_\_\_\_

## C. FIRE PROTECTION CHARACTERISTICS

USE GROUP \_\_\_\_\_ Present A Proposed

Heating Systems — Location: \_\_\_\_\_

Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other \_\_\_\_\_

Fuel Storage Tank — Location: \_\_\_\_\_ Fuel Type: \_\_\_\_\_ Capacity: \_\_\_\_\_

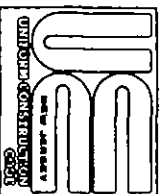
Total Estimated Cost of Fire Protection Work: \$ \_\_\_\_\_

## D. COMMENTS

ADDITION TO KITCHEN  
AND DINING AREA

☐ Partial Releases ☐ Prototype Processing

# TOWNSHIP OF BRICK



## TECHNICAL SECTION



PERMIT NO. \_\_\_\_\_  
DATE ISSUED \_\_\_\_\_  
REVISION DATE \_\_\_\_\_  
Block 172 Lot 12  
Subdivision 172-12-121

### A. IDENTIFICATION

APPLICANT — Complete unshaded areas only

When changing contractors, notify this office.

Owner L.C. JR. INC.  
Address RT 1  
BRICK TOWN  
Tel. ( ) 349-7710  
Work Site Address RT 70  
WALL STREET

Contractor ACELAN CONSTRUCTION  
Address RT 37  
77M<sup>2</sup> KILMER  
Tel. ( ) 349-7710  
Lic. No. \_\_\_\_\_  
Federal Emp. No. \_\_\_\_\_

### CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE

### B. TECHNICAL SITE DATA

#### B1. SPRINKLERS

TYPE: ☐ Wet ☐ Dry ☐ Other \_\_\_\_\_ FEE \_\_\_\_\_  
Area Sprinkled: ☐ Full ☐ Partial (specify in comments) \_\_\_\_\_  
No. of Heads: \_\_\_\_\_ No. of Spare Heads: \_\_\_\_\_  
☐ Valves Supervised — Method: \_\_\_\_\_  
Water Supply — Source: \_\_\_\_\_ Size: \_\_\_\_\_  
FD Connection Location: \_\_\_\_\_  
Estimated Cost of Work: \$ \_\_\_\_\_

#### B2. SPECIAL SUPPRESSION SYSTEMS

TYPE: ☐ Dry Chemical ☐ CO<sub>2</sub>  
☐ Halon ☐ Foam  
☐ Other \_\_\_\_\_  
Manual Pull: ☐ Yes ☐ No  
Locations: \_\_\_\_\_  
Estimated Cost of Work: \$ \_\_\_\_\_

#### B3. ALARM

TYPE: ☐ Manual ☐ Automatic FEE \_\_\_\_\_  
Supervision Type: ☐ Local ☐ Central  
☐ Proprietary ☐ Remote Location  
Estimated Cost of Work: \$ \_\_\_\_\_

#### B4. STAND PIPES

Pipe Size: \_\_\_\_\_ Pump Size: \_\_\_\_\_  
Water Source: \_\_\_\_\_ Size: \_\_\_\_\_  
FD Connection Location: \_\_\_\_\_  
Hose Station: ☐ Yes ☐ No  
Estimated Cost of Work: \$ \_\_\_\_\_

#### B5. OTHER

Subtotal \$ \_\_\_\_\_  
Total Fire Protection Fee (Greater of Minimum or Subtotal) \$ \_\_\_\_\_

### C. FIRE PROTECTION CHARACTERISTICS

USE GROUP \_\_\_\_\_ Present \_\_\_\_\_ Proposed \_\_\_\_\_  
Heating Systems — Location: \_\_\_\_\_  
Type: ☒ Gas ☐ Oil ☐ Electrical ☐ Solar ☐ Other \_\_\_\_\_  
Fuel Storage Tank — Location: \_\_\_\_\_ Fuel Type: \_\_\_\_\_ Capacity: \_\_\_\_\_  
Total Estimated Cost of Fire Protection Work: \$ \_\_\_\_\_

### D. COMMENTS

ADDITIONAL COMMENTS: \_\_\_\_\_  
☐ Partial Releases ☐ Prototype Processing

# PLAN REVIEW AND INSPECTION - FIRE

DATE

JOB CONDITION/COMMENTS

10-24-84

PLAN REVIEW: APP AS NOTED

① INSTALL FIRE EXT IN KITCHEN

② INSTALL EXIT DOORS AS PER OCCUPANCY CODE

③ DIVINE AREA TO BE TABLES

7-30-86 Rep ext obstructed

## JOB SUMMARY

☐ No Plans Required

☒ Plan Review Approved AS NOTED

Date: 10-24-84

Approved By: Mike Layton

### INSPECTIONS FINAL

☒ CO ☐ CCO ☐ CA

Date: 9/12/86

Inspected By: C. J. Wells

## INSPECTIONS

Type

☐ Fire Suppression Test

☐ Fire Alarm Test

☐ Smoke Test

☐ TCO

☒ Other FINAL

☐ Other

☐ Other

☐ Other

Failure Date

Approval Date

7-30-86

TOWNSHIP OF BRICK



# PLUMBING SUBCODE TECHNICAL SECTION



PERMIT NO. 2882  
 DATE ISSUED 1-10-85  
 REVISION DATE \_\_\_\_\_  
 Block 67a Lot 17  
 Subdivision Wall St

## A. IDENTIFICATION

APPLICANT — Complete unshaded areas only

When changing contractors, notify this office

Owner L.C. JR. (WALL ST.)

Contractor 1 Berkeley Plumb & Htg Inc.

Address RT 70 BRICKTOWN

Address 381 RT 9 - BOX E

Tel. ( ) OFFICE 349-2710

Tel. (201) 269-1244

Work Site Address \_\_\_\_\_

Lic.No./Bus. Permit #3725

Federal Emp. No. \_\_\_\_\_

## CERTIFICATION IN LIEU OF OATH:

(Complete for Minor Work and Small Job Only)

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

M. H. Lange Jr.  
 AGENT SIGNATURE

## B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

| No.      | Fixture                   | Fee      | No.      | Fixture                          | Fee       | Fee                                                    |
|----------|---------------------------|----------|----------|----------------------------------|-----------|--------------------------------------------------------|
|          | Water Closet/Bidet/Urinal | \$       |          | Garbage Disposal                 | \$        | COLUMN 1 \$ <u>5</u>                                   |
|          | Bathtub                   |          |          | Air Conditioner Unit             |           | COLUMN 2 \$ <u>15</u>                                  |
| <u>1</u> | Lavatory/Sink             | <u>5</u> |          | Indirect Connection              |           | SUBTOTAL \$ <u>20-</u>                                 |
|          | Shower/Floor Drain        |          |          | Sewer Ejector                    |           | Minimum Plumbing Fee (If applicable) \$                |
|          | Washing Machine           |          |          | Grease Trap                      |           | Total Plumbing Fee (Greater of Minimum or Subtotal) \$ |
|          | Dishwasher                |          |          | Interceptor                      |           |                                                        |
|          | Commercial Dishwasher     |          |          | Backflow Device                  |           |                                                        |
|          | Water Heater              |          |          | Reduced Pressure Backflow Device |           |                                                        |
|          | Domestic Boiler/Furnace   |          | <u>1</u> | Vent Stack                       | <u>10</u> |                                                        |
|          | Steam Boiler              |          |          | Solar System                     | <u>5</u>  |                                                        |
|          | Water Util. Connection    |          | <u>2</u> | Other <u>Floor drains</u>        |           |                                                        |
|          | Sewer Util. Connection    |          |          | Other                            |           |                                                        |
|          | Hose Bibb                 |          |          | Other                            |           |                                                        |
|          | Water Cooler              |          |          | Other                            |           |                                                        |
|          | COLUMN 1 \$ <u>5</u>      |          |          | COLUMN 2 \$ <u>15</u>            |           |                                                        |

## C. PLUMBING CHARACTERISTICS

USE GROUP: \_\_\_\_\_ Present \_\_\_\_\_ Proposed

Drainage — Material ABS Size 3"

Building Sewer — Material \_\_\_\_\_ Size \_\_\_\_\_

Water Service — Material \_\_\_\_\_ Size \_\_\_\_\_

Venting — Material ABS Size 3"

Estimated Cost of Plumbing Work: \$ 700.00

## D. COMMENTS

WORK TO CONSIST OF EXTENDING  
 Drain line's of above 3 fixtures  
 to new location by new outside  
 wall & relocate existing vent

☐ Partial Releases ☐ Prototype Processing

# TOWNSHIP OF BRICK



## PLUMBING SUBCODE TECHNICAL SECTION



PERMIT NO. 2882  
 DATE ISSUED 1-10-85  
 REVISION DATE \_\_\_\_\_  
 Block 1 Lot 3  
 Subdivision \_\_\_\_\_

### A. IDENTIFICATION

APPLICANT — Complete unshaded areas only  
 When changing contractors, notify this office  
 Owner ...  
 Address ...  
 Contractor ...  
 Address 361 AFY - P.O. Box 5  
 Tel. (201) 409-1247  
 Tel. (201) 409-1247  
 Lic. No./Bus. Permit 3725  
 Federal Emp. No. 221-730-440-0000  
 Work Site Address \_\_\_\_\_

CERTIFICATION IN LIEU OF OATH:  
 (Complete for Minor Work and Small Job Only)  
 I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.  
 AGENT SIGNATURE ...

### B. TECHNICAL SITE DATA

List all fixtures

TYPE OF WORK:

| No. | Fixture                   | Fee | No. | Fixture                          | Fee | Fee                                                 |
|-----|---------------------------|-----|-----|----------------------------------|-----|-----------------------------------------------------|
|     | Water Closet/Bidet/Urinal | \$  |     | Garbage Disposal                 | \$  | COLUMN 1                                            |
|     | Bathub                    |     |     | Air Conditioner Unit             |     | COLUMN 2                                            |
|     | Lavatory/Sink             |     |     | Indirect Connection              |     | SUBTOTAL \$                                         |
|     | Shower/Floor Drain        |     |     | Sewer Ejector                    |     | Minimum Plumbing Fee (if applicable)                |
|     | Washing Machine           |     |     | Grease Trap                      |     | \$                                                  |
|     | Dishwasher                |     |     | Interceptor                      |     | Total Plumbing Fee (Greater of Minimum or Subtotal) |
|     | Commercial Dishwasher     |     |     | Backflow Device                  |     | \$                                                  |
|     | Water Heater              |     |     | Reduced Pressure Backflow Device |     |                                                     |
|     | Domestic Boiler/Furnace   |     |     | Vent Stack                       |     |                                                     |
|     | Steam Boiler              |     |     | Solar System                     |     |                                                     |
|     | Water Util. Connection    |     |     | Other <u>Fixed div</u>           |     |                                                     |
|     | Sewer Util. Connection    |     |     | Other                            |     |                                                     |
|     | Hose Bibb                 |     |     | Other                            |     |                                                     |
|     | Water Cooler              |     |     | Other                            |     |                                                     |
|     | COLUMN 1                  | \$  |     | COLUMN 2                         | \$  |                                                     |

### C. PLUMBING CHARACTERISTICS

USE GROUP: \_\_\_\_\_ Present \_\_\_\_\_ Proposed \_\_\_\_\_  
 Drainage — Material 485 Size \_\_\_\_\_  
 Building Sewer — Material \_\_\_\_\_ Size \_\_\_\_\_  
 Water Service — Material \_\_\_\_\_ Size \_\_\_\_\_  
 Venting — Material \_\_\_\_\_ Size \_\_\_\_\_  
 Estimated Cost of Plumbing Work: \$ 7,000.00

### D. COMMENTS

WITHIN THE SCOPE OF EXISTING...  
 Partial Releases ☐ Prototype Processing ☐

**JOB CONDITION/COMMENTS**

DATE \_\_\_\_\_

[illegible]

☐ No Plans Required  
☐ Plan Review Approval

Date: 10-21-84

Approved By: \_\_\_\_\_

## INSPECTIONS FINAL

|                                     |    |                          |     |                          |    |
|-------------------------------------|----|--------------------------|-----|--------------------------|----|
| <input checked="" type="checkbox"/> | CO | <input type="checkbox"/> | CCO | <input type="checkbox"/> | CA |
|-------------------------------------|----|--------------------------|-----|--------------------------|----|

Date: 7/30/86

Inspected By: [Signature]

## INSPECTIONS

Type

- |                                     |            |
|-------------------------------------|------------|
| <input checked="" type="checkbox"/> | Slab       |
| <input type="checkbox"/>            | Rough      |
| <input type="checkbox"/>            | Water      |
| <input type="checkbox"/>            | Sewer      |
| <input type="checkbox"/>            | Energy     |
| <input type="checkbox"/>            | Mechanical |
| <input type="checkbox"/>            | TCO        |
| <input type="checkbox"/>            | Other      |

Failure Date

**Approval Date**

11-27-84



OCEAN COUNTY HEALTH DEPARTMENT

C.N. 2191

Toms River, N.J. 08754

201-341-9700

CHARLES KAUFFMAN  
PUBLIC HEALTH COORDINATOR

October 30, 1984

Mr. Donato D'Onofrio,  
c/o Wall Street Restaurant  
& Lounge  
Route 70  
Brick, N.J. 08723

re: Floor Plans - Kitchen Expansion  
Wall Street Restaurant & Lounge  
Route 70  
Brick

*Handwritten signature*  
Dear Mr. D'Onofrio:

The proposed kitchen expansion floor plan has been reviewed by this department and is in substantial compliance with Chapter XII, the New Jersey State Retail Food Code.

Please notify us when the project is complete as an inspection is required under Chapter XII.

If further assistance is required, please feel free to contact me at this office.

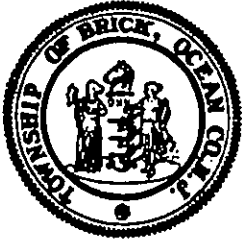
Sincerely,

*Handwritten signature of Joseph A. Gallos*

Joseph A. Gallos,  
Principal Sanitary Inspector

cc: Brick Building Inspector

JAG/pjp



# *Township of Brick*

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

Office of  
Division of Inspections

November 19, 1984

TO: Judy Gass  
FROM: Arthur J. Clerzo, Construction Official  
REF: Wall Street Addition.

On this date, November 19, 1984, Mr. D'Onofrio presented the Township Clerk, Francis Smith, with a check in the amount of Three thousand seven hundred sixty dollars and fifty cents (\$3760.50), for case number 1478, Block 672, Lot 12.

This is a performance bond.

AJC/tz

cc: Division of Inspections



# Township of Brick

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

Office of  
Division of Inspections

## UNIFORM CONSTRUCTION CODE Chapter 23, Title 5

Approval of Part  
5.23-2.5 (7)

OWNER/AGENT LC JR DAN DONOFIO  
ADDRESS Rt 37  
TOWN TOMS RIVER NJ ZIP 08754  
BLOCK 672 LOT 12  
WALK STREET



FOOTING



FOUNDATION



OTHER

OWNER/AGENT PROCEED AT OWN RISK



OWNER/AGENT Donat J. Offici Pas

BUILDING SUB-CODE OFFICIAL Edward Dyer

CONSTRUCTION OFFICIAL Arthur Guizzo



Art  
Joe  
Ed  
Judy

October 10, 1984

WHEREAS, application has been made by L.C. Jr., Inc., a corporation for premises known as Lot 12, Block 672 for a site plan for an expansion of the existing building, housing, a restaurant and lounge with a variance request for lot area, lot width, front setback and side setback; and

WHEREAS, proper service has been made upon all of the property owners within 200 feet of the premises in question and proper notice and publication has been made as required by New Jersey Statute and proper proof of service has been filed by the applicant with the Planning Board of the Township of Brick; and

WHEREAS, the Planning Board having considered the application and plans filed with its secretary and having heard the witnesses and evidence and examined the exhibits of the parties in interest and having heard and considered the comments of the public, if any, on the 26th day of September, 1984; and

In conjunction with this Resolution, the Board has made the following findings of the fact:

1. That the applicants are the lessees of the  
aforesaid premises.
2. That the property is in a B-3 zone.
3. That the proposed use is a permitted use within  
the zone.

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Cfr  
Kriegsge  
Krieg, Lysen  
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Kriegsge  
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Kriegsge

4. That the application, as submitted, does not conform with the Zoning Ordinance of the Township of Brick.

5. That the applicant has requested a variance for lot area of 0.612 existing, when 2 acres is required, a lot width of 79 $\pm$  feet existing, when 200 feet is required, a front setback as existing, of 45 $\pm$  feet and a side setback of 10.3 feet as existing and as proposed, when 30 feet is required.

6. That the aforesaid requests are reasonable due to the following:

A. That the premises in question are existing premises and the variances as requested are existing conditions on the site.

B. That the expansion would be for 51 additional seats for additional seating and additional kitchen space.

C. That the expansion is necessary due to the volume of business done by the applicant.

7. That the applicant needs 97 parking spaces for the proposed facility and provides 102 with a Cross-Access Agreement and Cross-Parking Agreement which will be provided to the Planning Board which encompasses a portion of lot 11 in the same block.

8. That the applicant has an ingress and egress agreement with adjoining lot 8.

9. That there has been parking on the Department of Transportation right of way along Route 70 which the applicant must hinder.

10. That the applicant must comply with the Engineer's report of September 20, 1984 as to the location of the leaching basin or inlet and lighting.

11. That the variances and site plan can be granted without substantial detriment to the surrounding area and the public good and will not substantially impair the intent and purpose of the Master Plan and Zoning Ordinance of the Township of Brick.

NOW, THEREFORE, BE IT RESOLVED that the application of L.C., Jr., Inc. for site plan and variances is hereby approved on this 10th day of October, 1984 subject to the following conditions:

1. Applicant shall comply with all standard Planning Board conditions for site plans set forth on Attachment "A".

2. Applicant shall comply with all representations and agreements made by applicant or applicant's representatives during the consideration of this application.

3. Applicant shall submit the Ingress and Egress Agreement with Rickel's Home Center located on Lot 8.

4. Applicant shall submit the Parking Agreement with Lot 11.

5. Applicant will agree to the field location of the storm sewer inlet by the Planning Board Engineer in conjunction with the applicant.

6. Applicant shall provide for the placement of concrete bumpers along the Department of Transportation right of way to prevent parking on the right of way.

7. Applicant shall comply with the Engineer's report of September 20, 1984.

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Page 4

CASE NO. 1478

October 10, 1984

8. Applicant shall contact the State of New Jersey, Department of Transportation and shall request permission to allow applicant to plant trees, shrubs or flowers and otherwise landscape / <sup>and</sup> improve that portion of the Department of Transportation right of way along Route 70 located at the corner of Chambersbridge Road and Route 70, said plantings and improvement to be outside of the site triangle at that location. In the event that such permission is granted, applicant shall be required to cause such plantings to be made subject to design review and approval by the Planning Board Engineer.

Moved By: Mrs. Cook

Seconded By: Mr. Hayes

Voting in the Affirmative: Mr. Cierzo

Mrs. Cook Mr. Geller Mr. Vespi

Mr. Hayes Mr. Cevalasco

Voting in the Negative:

Abstaining:

Absent: Mr. Gunther, Mayor Newman, Mr. Scherer, Mr. Taubenkimel

Ineligible to Vote: Councilman Bottazzi

#### CERTIFICATION

I, E. Joan Kull, Clerk to the Planning Board of the Township of Brick, County of Ocean, State of New Jersey, do hereby certify that the foregoing resolution was duly passed by the said Planning Board of the Township of Brick at a regular meeting held on the 10th day of October, 1984.

RESOLUTION R-96-84

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IN WITNESS WHEREOF, I have set my hand this 11th day of  
October, 1984.

*E. Joan Kull*

E. JOAN KULL, Clerk  
Planning Board of the Township of Brick

ATTACHMENT A

STANDARD PLANNING BOARD CONDITIONS FOR SITE PLANS

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Page 6.

CASE NO. 1478

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1. Applicant shall obtain certification by the Local Soil Conservation District of a plan for soil erosion and sediment control in accordance with Public Law 1975, Chapter 251, "Soil Erosion and Sediment Control Act."
2. All materials, methods of construction, and details shall be in conformance with the current Township of Brick "Engineering Specifications and Construction Details", available at the office of the Township Engineer.
3. Applicant shall obtain any other approvals with respect to submission to any other federal, state, county or municipal agency having jurisdiction over same. Upon receipt of the approval, the applicant shall supply a copy of said permit or permits to the Board. In the event that any other jurisdictional agency requires a change in the applicant's plans, the applicant must reapply to the Brick Township Planning Board for approval of that change.
4. Applicant shall resubmit this entire proposal should there be any deviation from this Resolution or the submitted documents which are hereby made a part hereof and shall be binding on the applicant.
5. Applicant shall supply evidence by way of a statement from the Brick Township Tax Collector that all taxes are paid to date at the date of the fulfillment of the conditions of this resolution.
6. Applicant shall post an inspection fund with the Township Clerk in an amount to be determined by the Township Engineer.

RESOLUTION R-96-84

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CASE NO. 1478

October 10, 1984

7. Before the issuance of a building permit, the applicant shall furnish the Township Clerk with a performance bond in an amount to be determined by the Township Engineer. Said performance bond shall be updated on a six (6) month basis at the discretion of the Township Engineer.

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