BLOCK 672 LOT 8 C6-8 QUALIFICATION CODE ______ ADDRESS (SITE) ______ PERMIT NO. 99-0097

RECEIVED

CONSTRUCTION PERMIT APPLICATION

OLD RICKELS

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

I. IDENTIFICATION

1. Propsed Work Site at: 51 CHAMBERSBRIDGE ROAD (RICKELS)
2. Name of Owner in Fee: SHL BRICK LLC Tel. (201) 945-9555
   Address 525 RIVER ROAD, EDGEWATER, N.J. 07020 (street, municipality, zip code)
3. Ownership in Fee: Public ______ Private ✓
4. Principal Contractor: MILRIC CONSTRUCTION CORP. Tel. (732) 544-1818
   Address ONE INDUSTRIAL WAY WEST, BLDG C, EATONTOWN, N.J. 07724
   License No. OR, if new home, Builder Reg. No. ______ Exp. Date ______
   Federal Employee No. 22-2467088 FAX: (732) 544-1350
5. Architect or Engineer ROSENBAUM DESIGN GROUP Tel. (516) 616-6111
   Address 2001 MARCUS AVE, LAKE SUCCESS, N.Y. 11042
6. Responsible Person in Charge of Work VINCENT SANTILLI
   Tel. (732) 544-1818 FAX (732) 544-1350

~~Shell~~ - General interior alteration - Building only 3 retail units

V. FEE SUMMARY (for office use only)

			7A Update	7B Update
1. Building	$	15010.		
2. Electrical			35	
3. Plumbing				145
4. Fire Protection				
5. Elevator Devices				
6. Subtotal	$			
7. Less 20% for State Plan Review				
8. Subtotal	$			
9. DCA Training Fee		480.	14	8
10. Subtotal				
11. Cert. of Occupancy				
12. Other		30		
13. TOTAL	$	15520.	49	53

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	1	
2. Height of Structure	ft.	
3. Area — Largest Floor	sq. ft.	
4. New Building Area	76,146 [redacted] sq. ft.	
5. Volume of New Structure	cu. ft.	
6. Construction Classification	2A PROTECTED	
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		

COMMERCIAL

II. PROPOSED WORK

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	600,000				1-13-99	FM			
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☑ Electrical					1/14/99	WM			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition		Fwl	1/8/99		1/8/99				
TOTAL COSTS	600,000								

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) 0
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: 0
2. Use Group: M
3. Change in Use Group, Indicate Former:

IMPORTANT MANDATORY FEE A.B.T.

LDS BR 10408865

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.

(X) Check if contractor.

Agent Name MILRIC CONSTRUCTION CORPORATION

Address ONE INDUSTRIAL WAY WEST, BLDG C
EATONTOWN, N.J. 07724

Telephone (732) 544-1818

Signature Vincent Santelle

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

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

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

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

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No.				
☐ Temporary Certificate of Compliance	No.				
☐ Continued Certificate of Occupancy	No.				
☐ Certificate of Compliance	No.				
☐ Certificate of Occupancy	No.				
☐ Certificate of Approval	No.				
☐ Lead Abatement Clearance Certificate	No.				

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

0004
0097*#

BLOCK	0.00
672 #	
LOT	0.00
8 #	
BUILDING	150.10
D.C.A.	480.00
ZONEPLOT	15.00
ENG P.R.	15.00
BUILDING	-150.10
BUILDING	15010.00
TOTAL	15520.00
CHECK	15520.00
CHANGE	0.00

01/14/99 NO. 5 00164005 12:09

Date Issued 01/14/99
Control #
Permit # 99-0097

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 672 Lot 8 Qual

Work Site Location 51 CHAMBERSBRIDGE RD RICKELS
SHELL/ INTERIOR ALT
Owner in Fee SHL BRICK LLC
Address 525 RIVER RD
EDGEWATER, NJ 07724-
Telephone (732)544-1818

Contractor MILRIC CONSTRUCTION CORP
Address ONE INDUSTRIAL WAY WEST
EATONTOWN, NJ 07724-
Telephone (732)544-1350
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2467088

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
SHELL WORK ONLY IN OLD RICKELS STORE TO CREATE 3 RETAIL STORES
ALL OTHER SUBCODES TO BE UPDATED- PER FM

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 $ 600,002

Construction Official 01/14/99 Date

U.C.C. P170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	15,010
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	480
Cert. of Occupancy	0
Other 2 PER	30
Total 15,520	~~15,490~~
Check No.	7112
Cash	
Collected By	TL

0004
0097*#
BLOCK 672 # 0.00
LOT 8 # 0.00
ELETRIC* 35.00
D.C.A. 14.00
TOTAL 49.00
CASH 49.00
CHANGE 0.00
02/11/99 NO. 5 0010A005 13:09

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 02/11/99
Control #
Permit # 99-0097+A
Permit Issued 01/14/99

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 672 Lot 8 Qual

Work Site Location 51 CHAMBERSBRIDGE RD RICKELS
ELECTRICAL/ COMM POINTS
Owner in Fee SHL BRICK LLC
Address 525 RIVER RD
EDGEWATER, NJ 07724-
Telephone (732)544-1818

Contractor A O KAY
Address PO BOX 415
PEMBERTON, NJ 08068-
Telephone (609)894-9295
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2742015

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
CCTV INSTALLATION

PAYMENTS (Office Use Only)

Building	0
Electrical	35
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	14
Cert. of Occupancy	0
Other	
Total	49
Check No.	
Cash	X
Collected By	TL

Estimated Cost of Work $ 18,000

Construction Official

02/11/99
Date

U.C.C. P190 (rev. 3/96)

COMMERCIAL

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 05/05/99
Control #
Permit # 99-0097+B
Permit Issued 01/14/99

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 672 Lot 8 Qual

Work Site Location 51 CHAMBERSBRIDGE RD RICKELS
3 WATER SERVICE CONN 2"
Owner in Fee SHL BRICK LLC
Address 525 RIVER RD
EDGEWATER, NJ 07724-
Telephone (732)544-1818

Contractor TOTAL PIPE
Address 15 PROSPECT LN
COLONIA, NJ 07067-
Telephone (732)827-8565
Lic. No. or Bldrs. Reg. No. 10377
Federal Emp. No. 22-3225315

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
3 WATER SERVICE CONNECTION

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	45
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	8
Cert. of Occupancy	0
Other	
Total	53
Check No.	5978
Cash	
Collected By	AJP

Estimated Cost of Work $ 10,000

Construction Official

05/05/99
Date

U.C.C. #190 (rev. 3/98)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 05/12/99
Control 0
Permit 0 99-0097+C
Permit Issued 01/14/99

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 672 Lot 8 Qual

Work Site Location 51 CHAMBERSBRIDGE RD RICKELS
AUX METER
Owner in Fee SHL BRICK LLC
Address 525 RIVER RD
EDGEWATER, NJ 07724-
Telephone (732)544-1818

Contractor TOTAL PIPE
Address 15 PROSPECT LN
COLONIA, NJ 07067-
Telephone (732)827-8565
Lic. No. or Bldrs. Reg. No. 10377
Federal Emp. No. 22-3225315

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
AUX METER CONNECTION TO EXISTING HOSE BIBS

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	15
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Other	
Total	15
Check No.	
Cash	X
Collected By	AJP

Estimated Cost of Work $ 100

Construction Official

05/12/99
Date

U.C.C. F190 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 01/05/99
Date Issued 1/14/99
Control # C6-8
Permit # 99-0097

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 Qual
Work Site Location 51 CHAMBERSBRIDGE RD RICKELS
SHELL/ INTERIOR ALT
Owner in Fee SHL BRICK LLC
Address 525 RIVER RD
EDGEWATER, NJ 07724-
Tele.(732)544-1818
Contractor MILRIC CONSTRUCTION CORP
Address ONE INDUSTRIAL WAY WEST
EATONTOWN, NJ 07724-
Tele.(732)544-1350 Fax (__)
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2467088

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

SHELL WORK ONLY IN OLD RICKELS STORE TO CREATE 3 RETAIL STORES

Plumbing & Electric To update, & Fire C.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	1-13-99	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed M
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 600,000
3. Total (1+2)$ 600,000

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	15,010
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 15,010
DCA Training Fee	$ 480

Paid [ ] Check #
Collected by:

U.C.C. F110 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 01/05/99
Date Issued ~~1/14/99~~ 1/19/99
Control # C6-8
Permit # 99-0097

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 Qual
Work Site Location 51 CHAMBERSBRIDGE RD RICKELS
SHELL/ INTERIOR ALT
Owner in Fee SHL BRICK LLC
Address 525 RIVER RD
EDGEWATER, NJ 07724-
Tele.(609)927-9770 Fax (609)927-9001
Contractor AFFORDABLE FIRE CO
Address 502 W PACONG AVE
LINWOOD, NJ 08221-
Tele.(609)927-9770
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3086664

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed M
Constr Class Present Proposed
Heating Systems [ ] New [X] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 10,100

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
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:
Water Supply Source
Method of Alarm/Suppr Sys Superv

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combust Liquid		
[ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected		
[ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	65	120
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other		0
Other		0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	120
DCA Training Fee	$	8

Paid [ ] Check # Collected by:

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

RETAIL 'C'

ELECTRICAL 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 672 Lot 8
Work Site Location 51 Chanlers Bridge Rd.

Owner in Fee/Occupant SHL Group LLC
Address 525 River Rd, Edgewater, NJ. 07020

Tele. (201) 945-9553
Contractor STAR-LO ELECTRIC, INC.
Address 32 S. JEFFERSON ROAD
WHIPPANY, NEW JERSEY 07981
Tele. (973) 515-0300 Fax (973) 515-0336
Lic. No. 2569
Federal Emp. No. 22 2616 156

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
Joint Plan Review Required:		
[ ] Building [ ] Plumbing		
[ ] Fire [ ] Elevator		
[X] Elec. Plans Approved		
Date: 1/14/99		
Approved by:		

INSPECTIONS	Dates (Month/Day)			
Type:	Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

C. CERTIFICATION IN LIEU OF OATH

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

_____
Applicant's Signature/Contractor's Seal and Signature
R. JOSEPH STARK, Pres.
[X] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
10		Lighting Fixtures	
2		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
5		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		.....	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
1	30	KW Transformer/~~Generator~~	
1	400	AMP Service 277/480V 3Ø	
1	100	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		.....	
		.....	

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

UCC/PRO F-120 (REV3/96)
Professional Printing
(609) 468-7933

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

TOWNSHIP OF BRICK

Zoning Permit Application

(Please Type or Print Neatly)

BLOCK 672 LOT ~~5-1, 9, 48~~ 8

PROPERTY ADDRESS ROUTE 70 & CHAMBERS ROAD, BRICKTOWN NJ 51 ChambersBridge Rd.

NAME OF OWNER BRICK NORSE REALTY LLC OWNER'S PHONE (516) 775-5500

NAME OF APPLICANT ROSENBAUM DESIGN GROUP - Fred C. Habenicht

APPLICANT'S COMPLETE ADDRESS 2001 MARCUS AVE LAKE SUCCESS NY 11042

APPLICANT'S PHONE NUMBER (516) 616-6111 APPLICANT'S BUSINESS NAME _____

PRESENT USE OF PROPERTY (check one)

☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment

☒ Commercial (please describe) FORMER RICKELS

☐ Other (please describe) _____

COMMERCIAL

PROPOSED USE OF PROPERTY (check one)

☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment

☒ Commercial (please describe) RETAIL SHOPPING CENTER

☐ Other (please describe) _____

PROPOSED CONSTRUCTION INTERIOR & EXTERIOR ALTERATION OF EXISTING BUILDING

All Dimensions _____ W _____ L _____ Ht

Deck or Garage ☐ Attached ☐ Detached

Fence Type _____ Ht _____

TO CREATE THREE RETAIL SPACES, NO CHANGE IN BUILDING AREA

CHECKLIST:

☐ All information completed above

☐ Two (2) accurate Survey / Plot Plans containing:

- ☐ all existing and proposed structures
- ☐ all dimensions of lot and structures
- ☐ set backs to all property lines
- ☐ all streets and waterways shown

☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

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 Fred C. Habenicht Date 11/25/98

Reviewed by Zoning Officer Date 11/30/98 ☒ Approved ☐ Rejected

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: November 30, 1998 1998 - 1920

Block 672 Lot 8 Zone B-3, H.D.

Property Address: 51 Chambers Bridge Road

Owner: Brick Norse Realty LLC (Phone): 516-775-5500

Applicant: Fred C. Habenicht (Phone): 516-616-6111

Existing Use: Retail store (former Rickel)

Proposed Use: Shopping plaza (three units)

Proposed Construction (if any): Interior and exterior alterations to create three retail units: Unit A, "Bed Bath & Beyond"; Unit B, "Bob's Store"; Unit C, unspecified retail tenant. Total floor area: 89,400 square feet.

Conditions: No change in the total floor area. No change in the approved site plan.

Void

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which 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
Municipal Planner

Sean Kinnevy
Zoning Officer

cc: Mayor Joseph Scarpelli
Scott MacFadden, BusAdm.

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: January 6, 1999 1999- 0011

Block 672 Lot 8 Zone B-3, H.D.

Property Address: 51 Chambers Bridge Road

Owner: SHL Brick LLC (Phone): 201-945-9555

Applicant: Vincent Santilli; Milric (Phone): 544-1818

Existing Use: Vacant retail store (former Rickels)

Proposed Use: Shopping Plaza (three units)

Proposed Construction (if any): Interior and exterior alterations to create three (3) retail units; Unit A "Bed Bath and Beyond", Unit B "Bob's Store", Unit C unspecified retail tenant. Total floor area: 89,400 square feet

Conditions: No change in the total floor area, no change in the approved site plan.

Zoning Permit No. 1998-1920 is null and void.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which 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
Municipal Planner

Sean Kinnevy
Zoning Officer

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: January 6, 1999 1999- 0011

Block 672 Lot 8 Zone B-3, H.D.

Property Address: 51 Chambers Bridge Road

Owner: SHL Brick LLC (Phone): 201-945-9555

Applicant: Vincent Santilli; Milric (Phone): 544-1818

Existing Use: Vacant retail store (former Rickels)

Proposed Use: Shopping Plaza (three units)

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Zoning Permit No. 1998-1920 is null and void.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which 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
Municipal Planner

Sean Kinnevy
Zoning Officer

SHELL

TOWNSHIP OF BRICK

Zoning Permit Application

(Please Type or Print Neatly)

BLOCK 672 LOT 8

PROPERTY ADDRESS 51 CHAMBERSBRIDGE ROAD

NAME OF OWNER SHL BRICK LLC OWNER'S PHONE (201) 945-9555

NAME OF APPLICANT MILRIC CONSTRUCTION CORPORATION VINCENT SANTILLI

APPLICANTS COMPLETE ADDRESS ONE INDUSTRIAL WAY WEST, BLDG C, EATONTOWN, N.J. 0772

APPLICANTS PHONE NUMBER (732) 544-1818 APPLICANTS BUSINESS NAME SAME AS ABOVE

PRESENT USE OF PROPERTY (check one)

- ☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment
- ☒ Commercial (please describe) EMPTY RICKELS STORE
- ☐ Other (please describe) _____

PROPOSED USE OF PROPERTY (check one)

- ☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment
- ☒ Commercial (please describe) SHELL FOR TWO NEW TENANTS - Retail
- ☐ Other (please describe) _____

PROPOSED CONSTRUCTION SAME AS EXISTING DIMENSIONS

All Dimensions _____ W _____ L _____ Ht

Deck or Garage ☐ Attached ☐ Detached

Fence Type _____ Ht _____

89,000 Sq. Ft.

CHECKLIST:

- ☐ All information completed above
- ☐ Two (2) accurate Survey / Plot Plans containing:
  - ☐ all existing and proposed structures
  - ☐ all dimensions of lot and structures
  - ☐ set backs to all property lines
  - ☐ all streets and waterways shown
- ☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

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 Vincent Santilli Date 1/4/99

Reviewed by Zoning Officer Date 1-6-99 ☒ Approved ☐ Rejected

Hydraulic Design Information Sheet

Name:NORSE REALTY-BOBS SALES AREA#1 Date:11/19/98 System No.:BSls
BSIS#1
Location:51 Chambers Bridge Road Brick Twonship NJ
Contractor:Carl Guinta Associates Telephone: 973-696-2208
11 Mathews Avenue Riverdale NJ. 07457
Calculated By:CGA Contract No.:098-174
Construction: Non-Combustible Drawing No.:SPR-3
Occupancy: Mercantile Sales Ceiling Height:14'

System Design

Code:NFPA #13 Ord Haz II Review Agency:Local FSCO

Area of Sprinkler Operation:1500
Density (gpm/sq.ft.):0.20
Area Per Sprinkler:<130
Hose Allowance gpm Inside:000
Hose Allowance gpm Outside:250
Rack Sprinkler Allowance:0

System Type:WET

Sprinkler or Nozzle
Make:Viking Model:M
Size:1/2" K-factor:5.5
Temperature Rating:155 F

Calculation Summary

Requires 693 gpm at 66.2 psi at Connection to Public Main
Interior C-factor:120 Underground C-factor:120

Water Supply Test Information
Test by:Engineers Test
Date:11/6/98
Time:11:00
Location:Yard Hydrant System off Brick
Elevation:Grade
Static Pressure:72
Residual Pressure:65
Flow:902

Pump Data
Type:N/A
Elevation:
Rated Psi:
Rated Gpm:

Tank Data
Elevation:N/A
Size:N/A

Well Proof Flow:N/A

Storage Details:

Commodity:N/A
Location:
Storage Height:
Single, Double, or Multi Row:
Pallet Type:

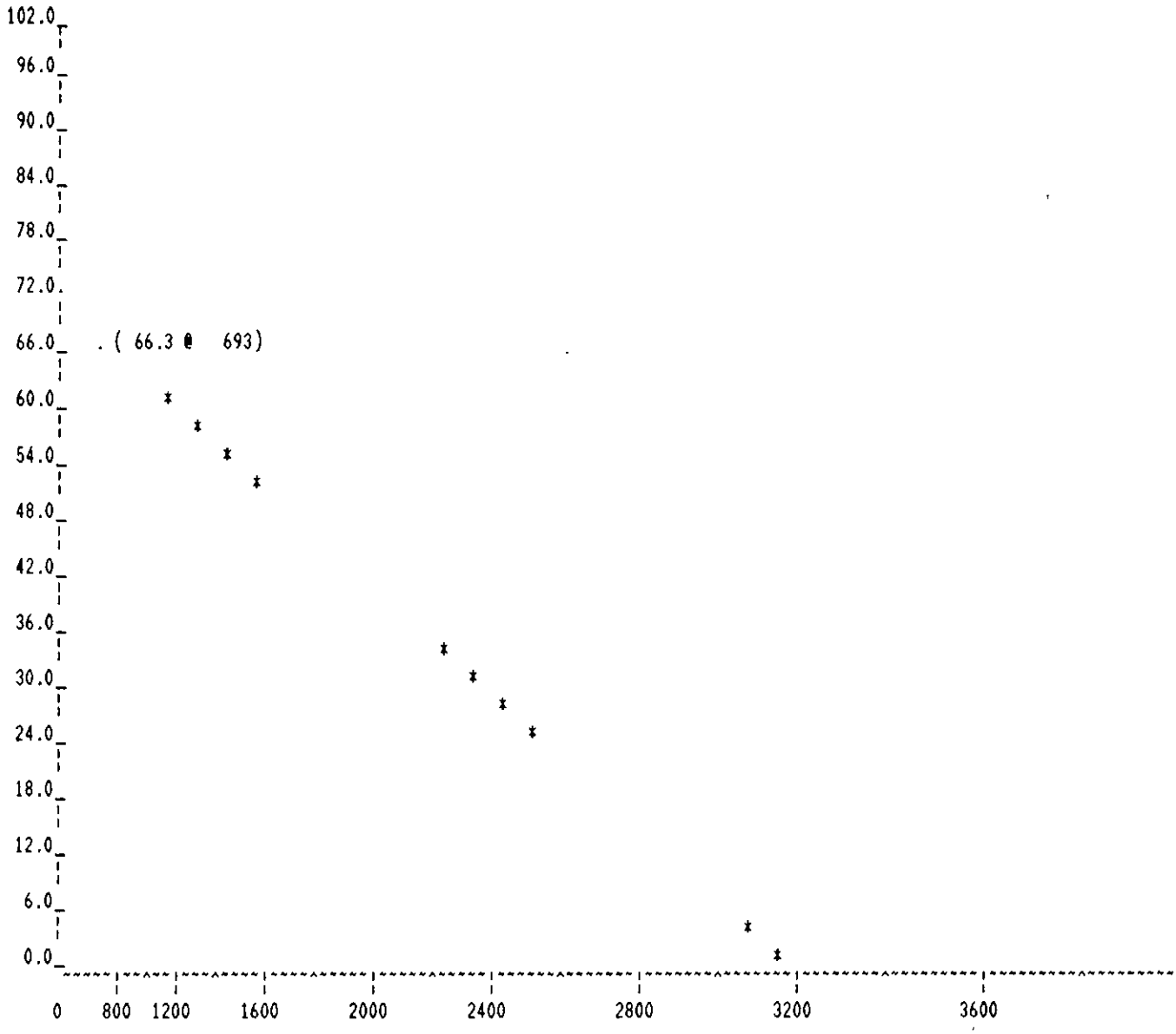
Class:
Storage Area:
Clearance to Ceiling:
Aisle Width:
Encapsulated?:n

Storage Method: %Solid Piled: %Palletized: %Rack:

Longitudinal Flue Spacing:
Horiz.Barriers Provided?:n

Transverse Flue Spacing:

Michael Stallone
11-23-98



Pressure vs. Flow

72.00	0.00
65.00	902.00
0	3179.50

NORSE REALTY-BOBS SALES AREA#1
51 Chambers Bridge Road
Brick Twonship NJ

Job Number:098-174
11/19/98

S U M M A R Y

O F

H Y D R A U L I C

C A L C U L A T I O N S

F O R

NORSE REALTY-BOBS SALES AREA#1

51 Chambers Bridge Road Brick Twonship NJ

Submitted By

Carl Guinta Associates 11 Mathews Avenue Riverdale NJ. 07457

Design Specifications		Water Supply Information		System Demand
Density :	0.200	72.00 psi @	0.00 gpm	66.25 psi
Design Area:	1500.00	65.00 psi @	902.00 gpm	@
				443.3 gpm
				+ 250.0 gpm Hose

Total Demand: 693.3 gpm @ 66.25 psi

System safety factor: 1.44 psi

Notes: _____

List of Fitting Abbreviations
Example: "E2TC" = one Std. Elbow, two Std. Tee , and one Check Va

Code:Description	Code:Description	Code:Description	Code:Description
A : Alarm Va	H : Deluge Val	O :	V : Vic.Cpl.
B : Butt'flyVa	I :	P : P.I.V.	W :
C : Check Va	J :	Q :	X : RPZ BckFlP
D : DryPipeVa	K : Globe Val.	R : Det.Ck.Val	Y :
E : Std. Elbow	L : LongTurnEl	S :	Z : 10VicCplgs
F : 45 Elbow	M : Meter	T : Std. Tee	
G : Gate Va	N :	U :	

Calcs By: CGA Checked: _____ 11/19/98

Summary of Sprinkler and Hose Flows

Job No:098-174 NORSE REALTY-BOBS SALES AREA#1

Design density: 0.20

Supplied flow and pressure is based on 66.25 psi available at supply
(67.70 psi is actually available)

Ref. Pt.	PRESSURE Pt	Pv	Pn	K Factor	FLOW Actual	Minimum	Percent Excess	Ref. Pt.
T01	21.81		21.81	5.50	25.7	24.0	7.1%	T01
T02	23.87		23.87	5.50	26.9	24.0	12.1%	T02
T03	24.79		24.79	5.50	27.4	24.0	14.2%	T03
T04	27.24		27.24	5.50	28.7	24.0	19.6%	T04
T05	30.93		30.93	5.50	30.6	24.0	27.5%	T05
T06	36.79		36.79	5.50	33.4	24.0	39.2%	T06
T07	19.03		19.03	5.50	24.0	24.0	0.0%	T07
T08	20.86		20.86	5.50	25.1	24.0	4.6%	T08
T09	27.72		27.72	5.50	29.0	24.0	20.8%	T09
T10	31.97		31.97	5.50	31.1	24.0	29.6%	T10
T11	35.70		35.70	5.50	32.9	24.0	37.1%	T11
T12	30.11		30.11	5.50	30.2	24.0	25.8%	T12
T13	32.89		32.89	5.50	31.5	24.0	31.3%	T13
T14	35.65		35.65	5.50	32.8	24.0	36.7%	T14
T15	38.51		38.51	5.50	34.1	24.0	42.1%	T15

Calcs By: CGA Checked:_____ 11/19/98

Flow and Pressure Summary

Job No:098-174 NORSE REALTY-BOBS SALES AREA#1

Elev. ft.	REF. POINT		Flow gpm	Pt psi	Pf psi	Pe psi	Pt psi	REF. POINT	Elev. ft.	FRICTION LOSS Length	Fitting	Length	Total	Pf/ft	Diam	C	Flow	Velocity fps
15.00	B01	((	172.6	43.00	1.30	0.00	44.30	B02	15.00	12.00			12.00	0.109	2.469	120	172.6	11.5
15.00	B01	))	172.6	43.00	-6.21	0.00	36.79	T06	15.00	14.10	T	10.00	24.10	0.258	2.067	120	172.6	16.5
15.00	B02	((	314.6	44.30	1.37	0.00	45.68	B03	15.00	12.00			12.00	0.114	3.068	120	314.6	13.6
15.00	B02	))	142.0	44.30	-2.54	0.00	41.77	X11	15.00	4.10	T	10.00	14.10	0.180	2.067	120	142.0	13.5
15.00	B03	((	443.3	45.68	2.59	0.00	48.27	B04	15.00	12.00			12.00	0.216	3.068	120	443.3	19.2
15.00	B03	))	128.7	45.68	-2.11	0.00	43.57	X15	15.00	4.10	T	10.00	14.10	0.150	2.067	120	128.7	12.3
15.00	B04	((	443.3	48.27	0.69	0.00	48.96	B05	15.00	12.00			12.00	0.057	4.026	120	443.3	11.1
15.00	B05	((	443.3	48.96	1.92	-3.04	47.84	B06	22.00	24.00	EE	20.00	44.00	0.044	4.260	120	443.3	10.0
22.00	B06	((	443.3	47.84	0.57	0.00	48.41	B07	22.00	13.10			13.10	0.044	4.260	120	443.3	10.0
22.00	B07	((	443.3	48.41	0.55	0.00	48.96	B08	22.00	12.50			12.50	0.044	4.260	120	443.3	10.0
22.00	B08	((	443.3	48.96	2.79	3.04	54.79	B09	15.00	44.00	EE	20.00	64.00	0.044	4.260	120	443.3	10.0
15.00	B09	((	443.3	54.79	0.71	0.00	55.49	B10	15.00	12.00	T	25.00	37.00	0.019	5.047	120	443.3	7.1
15.00	B10	((	443.3	55.49	0.67	0.00	56.16	B11	15.00	56.00	T	30.00	86.00	0.008	6.065	120	443.3	4.9
15.00	B11	((	443.3	56.16	0.08	0.00	56.25	B12	15.00	24.00	E	18.00	42.00	0.002	8.071	120	443.3	2.8
15.00	B12	((	443.3	56.25	0.86	-3.04	54.07	B13	22.00	110.00	2E	28.00	138.00	0.006	6.357	120	443.3	4.5
22.00	B13	((	443.3	54.07	1.89	-1.30	54.66	M01	25.00	235.00	5E	70.00	305.00	0.006	6.357	120	443.3	4.5
25.00	M01	((	443.3	54.66	0.38	9.98	65.02	M02	2.00	40.00	AGTGCE	156.00	196.00	0.002	8.071	120	443.3	2.8
2.00	M02	((	443.3	65.02	0.36	0.87	66.25	M03	0.00	100.00	2ETG	75.00	175.00	0.002	7.980	120	443.3	2.8
15.00	T01	((	25.7	21.81	2.07	0.00	23.87	T02	15.00	10.00			10.00	0.207	1.049	120	25.7	9.5
15.00	T02	((	52.6	23.87	0.92	0.00	24.79	T03	15.00	4.50			4.50	0.204	1.380	120	52.6	11.2
15.00	T03	((	79.9	24.79	2.44	0.00	27.24	T04	15.00	5.50			5.50	0.444	1.380	120	79.9	17.1
15.00	T04	((	108.6	27.24	3.70	0.00	30.93	T05	15.00	10.00			10.00	0.370	1.610	120	108.6	17.1
15.00	T05	((	139.2	30.93	5.85	0.00	36.79	T06	15.00	10.00			10.00	0.585	1.610	120	139.2	21.9
15.00	T07	((	24.0	19.03	1.82	0.00	20.86	T08	15.00	10.00			10.00	0.182	1.049	120	24.0	8.9
15.00	T08	((	49.1	20.86	6.86	0.00	27.72	T09	15.00	10.00			10.00	0.686	1.049	120	49.1	18.2
15.00	T09	((	78.1	27.72	4.25	0.00	31.97	T10	15.00	10.00			10.00	0.425	1.380	120	78.1	16.7
15.00	T10	((	109.2	31.97	3.73	0.00	35.70	T11	15.00	10.00			10.00	0.373	1.610	120	109.2	17.2
15.00	T11	((	142.0	35.70	6.07	0.00	41.77	X11	15.00	10.00			10.00	0.607	1.610	120	142.0	22.3
15.00	T12	((	30.2	30.11	2.79	0.00	32.89	T13	15.00	10.00			10.00	0.279	1.049	120	30.2	11.2
15.00	T13	((	61.7	32.89	2.75	0.00	35.65	T14	15.00	10.00			10.00	0.275	1.380	120	61.7	13.2
15.00	T14	((	94.6	35.65	2.86	0.00	38.51	T15	15.00	10.00			10.00	0.286	1.610	120	94.6	14.9
15.00	T15	((	128.7	38.51	5.06	0.00	43.57	X15	15.00	10.00			10.00	0.506	1.610	120	128.7	20.2

Calcs By: CGA Checked:_____ 11/19/98

Ser:*310230* Hypercalc Program by Crowley Design Group, (215)-337-7060

Path Summary Printout for NORSE REALTY-BOBS SALES AREA#1
Job No:098-174 11/19/98 System:BSls#1 Drawing:SPR-3

Path No:1 Remote to Supply

Principal path
Feeds Path:2 at Pt:B02, Path:3 at Pt:B03

Ref Pt.	Elev. ft.	Pressure (psi) Pt	Pv	Pn	K Factor	Flow Added	(gpm) Total	Veloc fps	Diam. in.	Actual Length	Fitting Summary	Fitting Length	Total Length	Frict.Loss per.ft	Total	Elev. Psi	Loss (ft.)	Next Press	Ref Pt.
														(C=120)					
T01	15.00	21.81		21.81	5.50	25.7	25.7	9.51	1.049	10.00			10.00	0.207	2.07			23.87	T02
T02	15.00	23.87		23.87	5.50	26.9	52.6	11.24	1.380	4.50			4.50	0.204	0.92			24.79	T03
T03	15.00	24.79		24.79	5.50	27.4	79.9	17.10	1.380	5.50			5.50	0.444	2.44			27.24	T04
T04	15.00	27.24		27.24	5.50	28.7	108.6	17.08	1.610	10.00			10.00	0.370	3.70			30.93	T05
T05	15.00	30.93		30.93	5.50	30.6	139.2	21.88	1.610	10.00			10.00	0.585	5.85			36.79	T06
T06	15.00	36.79		36.79	5.50	33.4	172.6	16.46	2.067	14.10	T	10.00	24.10	0.258	6.21			43.00	B01
B01	15.00	43.00		43.00			172.6	11.53	2.469	12.00			12.00	0.109	1.30			44.30	B02
B02	15.00	44.30		44.30		142.0	314.6	13.62	3.068	12.00			12.00	0.114	1.37			45.68	B03
B03	15.00	45.68		45.68		128.7	443.3	19.19	3.068	12.00			12.00	0.216	2.59			48.27	B04
B04	15.00	48.27		48.27			443.3	11.14	4.026	12.00			12.00	0.057	0.69			48.96	B05
B05	15.00	48.96		48.96			443.3	9.95	4.260	24.00	EE	20.00	44.00	0.044	1.92	-3.04	(-7.00)	47.84	B06
B06	22.00	47.84		47.84			443.3	9.95	4.260	13.10			13.10	0.044	0.57			48.41	B07
B07	22.00	48.41		48.41			443.3	9.95	4.260	12.50			12.50	0.044	0.55			48.96	B08
B08	22.00	48.96		48.96			443.3	9.95	4.260	44.00	EE	20.00	64.00	0.044	2.79	3.04	(7.00)	54.79	B09
B09	15.00	54.79		54.79			443.3	7.09	5.047	12.00	T	25.00	37.00	0.019	0.71			55.49	B10
B10	15.00	55.49		55.49			443.3	4.91	6.065	56.00	T	30.00	86.00	0.008	0.67			56.16	B11
B11	15.00	56.16		56.16			443.3	2.77	8.071	24.00	E	18.00	42.00	0.002	0.08			56.25	B12
B12	15.00	56.25		56.25			443.3	4.47	6.357	110.00	2E	28.00	138.00	0.006	0.86	-3.04	(-7.00)	54.07	B13
B13	22.00	54.07		54.07			443.3	4.47	6.357	235.00	5E	70.00	305.00	0.006	1.89	-1.30	(-3.00)	54.66	M01
M01	25.00	54.66		54.66			443.3	2.77	8.071	40.00	AGTGCE	156.00	196.00	0.002	0.38	9.98	(23.00)	65.02	M02
M02	2.00	65.02		65.02			443.3	2.84	7.980	100.00	2ETG	75.00	175.00	0.002	0.36	0.87	(2.00)	66.25	M03
M03		66.25					^^^^^^												
		^^^^^																	

Path No:2 Grid Line

Fed by path No.1

Ref Pt.	Elev. ft.	Pressure (psi) Pt	Pv	Pn	K Factor	Flow Added	(gpm) Total	Veloc fps	Diam. in.	Actual Length	Fitting Summary	Fitting Length	Total Length	Frict.Loss per.ft	Total	Elev. Psi	Loss (ft.)	Next Press	Ref Pt.
														(C=120)					
T07	15.00	19.03		19.03	5.50	24.0	24.0	8.88	1.049	10.00			10.00	0.182	1.82			20.86	T08
T08	15.00	20.86		20.86	5.50	25.1	49.1	18.18	1.049	10.00			10.00	0.686	6.86			27.72	T09
T09	15.00	27.72		27.72	5.50	29.0	78.1	16.70	1.380	10.00			10.00	0.425	4.25			31.97	T10
T10	15.00	31.97		31.97	5.50	31.1	109.2	17.16	1.610	10.00			10.00	0.373	3.73			35.70	T11
T11	15.00	35.70		35.70	5.50	32.9	142.0	22.32	1.610	10.00			10.00	0.607	6.07			41.77	X11
X11	15.00	41.77		41.77			142.0	13.54	2.067	4.10	T	10.00	14.10	0.180	2.54			44.30	B02
B02	15.00	44.30					^^^^^^												
		^^^^^																	

Calcs By:CGA Checked By:_____

Path Summary Printout for NORSE REALTY-BOBS SALES AREA#1
Job No:098-174 11/19/98 System:BSls#1 Drawing:SPR-3

Path No:3 Grid Line

Fed by path No.1

Ref Pt.	Elev. ft.	Pressure (psi) Pt	Pv	Pn	K Factor	Flow Added (gpm)	Total	Veloc fps	Diam. in.	Actual Length	Fitting Summary	Fitting Length	Total Length	Frict.Loss per.ft (C=120)	Total	Elev. Psi	Loss (ft.)	Next Press	Ref Pt.
T12	15.00	30.11		30.11	5.50	30.2	30.2	11.17	1.049	10.00			10.00	0.279	2.79			32.89	T13
T13	15.00	32.89		32.89	5.50	31.5	61.7	13.20	1.380	10.00			10.00	0.275	2.75			35.65	T14
T14	15.00	35.65		35.65	5.50	32.8	94.6	14.86	1.610	10.00			10.00	0.286	2.86			38.51	T15
T15	15.00	38.51		38.51	5.50	34.1	128.7	20.22	1.610	10.00			10.00	0.506	5.06			43.57	X15
X15	15.00	43.57		43.57			128.7	12.27	2.067	4.10	T	10.00	14.10	0.150	2.11			45.68	B03
B03	15.00	45.68																	

Calcs By:CGA Checked By:_____

Ser:*310230* Hypercalc Program by Crowley Design Group, (215)-337-7060

STARWOOD HELLER

January 7, 1999

Via: Fax & Mail

Mr. Jim Priolo
Birdsall Engineering, Inc.
17 "F" Street
South Belmar, New Jersey 07719

RE: RICKEL'S RENOVATION
BLOCK 672, LOT 8
BRICK, NEW JERSEY

Dear Jim:

Pursuant to our January 7, 1999 telephone conversation and as a condition of occupancy, we agree to renovate the parking lot and access roads within the limits of the project at your direction to include:

1. Repair of potholes.
2. Repair of cracks.
3. Sealing of asphalt.
4. Restripe parking stalls.
5. Repair bollards.

I trust that this address any site concerns in regards to the issuance of building permits for the renovation work.

Should you have any questions or require any additional information pertaining to this matter, please do not hesitate to call me.

Sincerely,

Starwood Heller, LLC
Richard A. LaBarbiera
Richard A. LaBarbiera, PE
Project Engineer

RAL/es
cc: Jim Cimis
Mark Troncone, Esq.

525 River Road, Edgewater, NJ 07020 ■ Phone (201) 945-9555 ■ Fax (201) 945-8333

732-681-5477

COU[redacted]FORM

"SHEET COVER"

FIRE PROTECTION SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #: EXP DATE:
FEDERAL EMPL # (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION ITEMS	QTY	SIZE
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Exact HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		

TOTAL NUMBERS

Pool Permit w/UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range / Receptacle	KW
KW Oven / Surface Unit	KW
KW Elec. Water Heater	KW
KW Elec. Dryer / Receptacle	KW
KW Dishwasher	KW
HP Garbage Disposal	HP
KW Central A/C Unit	KW
HP/KW Space Heater/Oil Heater	HP/KW
KW Baseboard Heat	KW
HP Motors 1/+ HP	HP
KW Transformer/Generator	KW
AMP Service	AMP
AMP Subpanels	AMP
AMP Motor Control Center	AMP
AMP Elec. Sign/Outline Light	KW
Other	
Other	
Other	
Other	

Estimated Cost of Electrical Work: $
Signature (print name):
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

CONTRACTOR: APPARATUS TECH INC.
ADDRESS: 502 W. PACONG AVE.
LINWOOD N.J. 08221
PHONE: (609) 927 9700 FAX 927 9001
LIC #: EXP DATE:
FEDERAL EMPL # (or S.S. #): 223086664

TECHNICAL DATA (DESCRIPTION OF WORK)

DESIGN & INSTALL ONE (1) WET TYPE FIRE SPR SYSTEM THROUGHT AREA

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☒ Existing
Location of Furnace / Boiler

Water Supply Source: EXISTING CITY
Method of Valve Supervision: TAMPER SW.
Local Alarm Supervision: WATER FLOW SW
Central Supervision: BY OTHERS
Proprietary Supervision: BY OTHERS

Flammable Liquip Storage Tanks — Capacity: N/A Fuel:
Combustable Liquid Storage Tanks — Capacity: N/A Fuel:
L.G.P. Storage Tanks — Capacity: N/A Fuel:

DESCRIPTION	NUMBER
Wet Sprinkler Heads	65
Dry Sprinkler Heads	0
Total	65
Smoke Detectors	BY OTHERS
Heat Detectors	N/A
Total	
Stand Pipes	N/A
Kitchen Hood Exhaust Systems	N/A
Pre-Engineered Systems	
Co2 Suppression	N/A
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance	
Other	
Other	

Estimated Cost of Fire Protection Work: $ 10,100.00
Signature: Pres.
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY
1551 Highway 88 West, Brick, New Jersey 08724-2399
(908)458-7000 • FAX (908)458-7725

APPLICATION FOR AUXILIARY WATER METER

DATE: 5/12/99

Applicant's Name: SHL Brick LLC Telephone No. (732) 827-8565 (TO TAZ PIPE DUSTIN)

Mailing Address: 525 River Road Edgewater NJ 07020

Service Location: 51 Chamberbridge Road

Account Number: V084546 Block: 673 Lot: 8

Size of Existing Service: 2" Size of Existing Meter: 2"

Applicant's Signature

Beverly O'Neill
Authority Representative

THIS APPLICATION IS VALID FOR 30 DAYS FROM DATE OF APPLICATION.

Please note the following:

At the customer's option, a separate account may be established, subject to all conditions of the rate schedule as applicable to water usage.

After completing this application, the following steps must be taken:

1. Obtain special device permit from the Township of Brick Plumbing Department.
2. A licensed plumber or homeowner must cut into the pipe BEFORE the existing yoke and install a second meter yoke.
3. Call the Township of Brick Plumbing Department (262-1000) for inspection.
4. Call Brick Utilities for installation of the meter. A copy of the completed permit, showing inspection approval, will be required before the meter is installed.
5. It is the customer's responsibility to insure that the meter is installed and the permit was approved. Failure to do so may result in a tampering fee of $250.00 and service will be terminated.
6. A charge for cost of the meter will be applied to the first billing. Quarterly bills for usage only will be issued.

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048
FAX (732) 262-8954 or (732) 920-1456
http://www.twp.brick.nj.us

January 11, 1999

Milric Construction
1 Industrial Way West, Bldg. C
Eatontown, NJ 07724

RE: Mandatory Development Fee
Block 672, Lot 8; Shell-3 Retail Units ~ 51 Chambers Bridge Road

To Whom It May Concern:

The Township of Brick has enacted Ordinance 354-2C-93 in conjunction with our Fair Share Plan, which was certified by the New Jersey Council on Affordable Housing on February 3, 1993.

This Ordinance requires that commercial development applicants pay a fee in the amount ofone percent of the assessed value per project. The municipal Tax Assessor has estimated the value of the work to be completed under the construction permit application received on January 5, 1999, for the above block and lot at $1,217,800.00, resulting in an estimated fee of $12,178.00.

Therefore, you are required to submit half of the estimated fee ($6,089.00) in the form of a check made payable to the Township of Brick for deposit into the Affordable Housing Trust Fund. The balance is to be collected prior to issuance of the Certificate of Occupancy.

May I suggest that you contact this office approximately two weeks prior to your request for a C.O. to allow adequate time for the Assessor to conduct a final evaluation of the site.

If you have any questions, please contact me.

Sincerely,

Carol A. Wolfe

Carol A. Wolfe
Affordable Housing Administrator

CAW/da

BLOCK 672

N.J.A.C. (Uniform Code) 5:23-2;.5, Paragraph 5. The approved set of plans must be on the job site at all times. If the plans are not on the site no inspections will be made.

LOT 8

APPROVED

This Permit Must Be Displayed Immediately At Start of Construction

APPROVAL OF THESE PLANS BY THE BUILDING INSPECTOR DOES NOT IN ANY WAY ALLOW THE ENCROACHMENT OF ANY BUILDING OR PART THEREOF IN CONNECTION THEREWITH BEYOND THE PROPERTY LINE, NOR IN ANY WAY PERMIT ANY VIOLATION OF THE BUILDING CODE WHETHER SHOWN ON PLANS OR NOT.

Before starting to build read the Building Code.

SHL BRICK ASC
Owner

Infinite Const., Corp.
Contractor

PERMIT NO. _____

DATE APPROVED _____

FEE PAID _____

CONSTRUCTION OFFICIAL
BRICK TOWNSHIP

THIS PERMIT EXPIRES ONE YEAR FROM ABOVE APPROVED DATE, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF SIX MONTHS.

INSPECTIONS
PLS CALL
732-262-4627

INSPECTIONS

1. FOOTING _____
2. FOUNDATION _____
3. SHEATHING _____
4. FRAMING _____
5. INSULATION _____
6. SHEET ROCK _____
7. PLUMBING _____
8. FIRE INSPECTION _____
9. FINAL _____

Infinite Const. Corp.

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 672 LOT 8 SITE ADDRESS [illegible] Rd
TYPE OF SITE Residential / Commercial TYPE OF BUSINESS [illegible]

APPLICANT [illegible] PHONE NUMBER [illegible]
APPLICANT ADDRESS [illegible] CITY & STATE [illegible]
PERMIT # [illegible] NAME OF BUSINESS [illegible]

INCLUSIONARY DEVELOPMENT

◊ Affordable
- Fee Required _____ Date _____
- Down Payment _____ Date _____
- Balance _____ Date _____
- Paid In Full _____ Date _____

◊ Market Rate — No Fee Required

MANDATORY DEVELOPER FEES

◊ Residential is .005 %

◊ Commercial is .01 %

Estimated Assessment $ 1217500.00 Date 1-3-99

Estimated Required Fee $ 12,175.00

Required Deposit on Estimate $ 1,000.00 Date [illegible]

Check # [illegible] Receipt # [illegible]

Actual Assessment $ _____ Date _____

Actual Required Fee $ _____

Minus Deposit of Estimate $ _____

Balance Due $ _____ Date _____

Check # _____ Receipt # _____

Amount Paid In Full $ _____

Fees Imposed To Date _____
Fees Reached $15,000 _____ Date

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

_____

Carol A. Wolfe
Affordable Housing Administrator

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Joseph C. Scarpelli, Mayor

Township Council:
Michael A. Thulen, President
Stephen C. Acropolis
Martin J. Anton
Victor Cantillo
Helen Fayad
Lee Hartman
Mary Lou Powner

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 1-8-99

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 172 LOT 8 SITE ADDRESS 51 Chambers Bridge Rd
Shell - Bottom Mkt. 75

TYPE OF SITE Commercial TYPE OF BUSINESS Shell Bldg
(Residential/Commercial)

APPLICANT N/A, Construction CITY & STATE Eatontown, NJ

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

$ 1 217 000

[illegible]

Frederick R. Millman, CTA, Tax Assessor

1-8-99

Date

☐ Please review the attached application for a final assessed value for the construction at the above referenced site:

$ _____

_____

Frederick R. Millman, CTA, Tax Assessor

_____

Date

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

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

December 14, 1998

Rosenbaum Design Group
2001 Marcus Avenue
Lake Success, NY 11042

Attn: Norman Freidman

Re: Application for Construction Permit
Block 672, Lot 8
51 Chambers Bridge Road

Dear Mr. Freidman;

Our office is currently reviewing the above referenced Construction Permit Application. Please be advised that the following improvements to the site will be required prior to the issuance of a certificate of occupancy:

1. Pavement and curb repairs at various locations.
2. Bollards at landscape areas and hydrants must be repaired or replaced.
3. Proper signage must be installed to insure safety to the public.
4. Parking lot must be restriped.

Please contact our office if you have any objection to the above. Should you have any questions, please call me.

Very truly yours,

James A. Priolo, P.E.
Assistant Township Engineer

cc: Joseph Curiazza, Construction Official

BEDBATH!

PLEASE BE ADVISED THAT THE FOLLOWING IMPROVEMENTS TO THE SITE WILL BE REQUIRED PRIOR

December 10, 1998

Rosenbaum Design Group
2001 Marcus Avenue
Lake Success, NY 11042

Attn: Norman Freidman

Re: Application for Construction Permit
Block 672, Lot 8
51 Chambers Bridge Road

Dear Mr. Freidman;

Our office is CURRENTLY reviewing the above referenced Construction Permit Application. ~~The following conditions must be met prior~~ to the issuance of a certificate of occupancy:

1. Pavement and curb repairs ~~must be made~~ at various locations.
2. Bollards AT LANDSCAPE AREAS AND HYDRANTS must be repaired or replaced.
3. ~~Signage must conform to Township Ordinances~~ PROPER SIGNAGE SHALL NOT BE INSTALLED TO INSURE SAFETY TO THE PUBLIC.
4. Parking lot must be restriped.
5. ~~Proposed sign across from TGI Fridays must be eliminated from the plan.~~

CONTACT OUR OFFICE IF YOU HAVE ANY OBJECTION TO THE ABOVE,

Please ~~provide this office with a letter stating agreement to these conditions~~. Should you have any questions, please call me.

Very truly yours,

James A. Priolo, P.E.
Assistant Township Engineer

cc: Joseph Curiazza, Construction Official

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Department of Administration & Finan

Division of Inspections
Joseph Curiazza
Construction Official
(732) 262-1024
Fax (732) 262-8954
http://www.gbshost.com/brick

Date: 1/5/99

Municipal Engineer
401 Chambers Bridge Rd
Brick, N.J. 08723

RE: Block: 672 Lot: 8

I, Vincent Santelli (name) of 51 Chambers Bridge Rd. (address)
Brick Coast.
request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book , Chapter 190.31, part B. The property (please circle one) is /is not located in a flood zone.

Respectfully yours,

applicant's signature

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.

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

Note: Any excavations to be removed from the Township requires a mining permit.

OFFICE USE

Approved X Date: 1/8/99 By:

Rejected Date: By:

Remarks:

COUNTER FORM
PLEASE PRINT

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

RECEIVED
FEB 0 8 1999
DIV. OF INSPECTION

Update

Site Location: BOB'S CLOTHING — Date Rec'd.:
Block: 672 Lot: 8 — Date Issued:
Owner in Fee: — Control #:
Address: 51 CHAMBERS BRIDGE RD. — Permit #:
State: Zip: Phone: ( )
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	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 AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature:

Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA

DESCRIPTION OF WORK:

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories:
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature:

Estimated Cost of Building Work:
New Building (1): $
Alteration (2): $
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM
PLEASE PRINT

(RICKERS)

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Site Location: 51 CHAMBERSBRIDGE ROAD Date Rec'd.:
Block: 672 Lot: 8 Date Issued:
Owner in Fee: SHL BRICK LLC Control #:
Address: 525 RIVE ROAD Permit #:
EDGEWATER, N.J. 07020
State: N.J. Zip: 07020 Phone: (201) 945-9555
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	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 AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature:

Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR: MILRIC CONSTRUCTION CORP.
ADDRESS: ONE INDUSTRIAL WAY WEST, BLDG. C
EATONTOWN, N.J. 07724
PHONE: 732-544-1818
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #): 22-2467088

TECHNICAL SITE DATA

DESCRIPTION OF WORK:

SHELL WORK
(OLD RICKERS)

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More)
☒ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP M Present: Proposed: M
CONSTR. CLASS 2A Present: Proposed: 2A
No. of Stories: 1
Height of Structure:
Area - Largest Floor: 76,146
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature: Vincent Santilli

Estimated Cost of Building Work: 600,000
New Building (1): $
Alteration (2): $ 600,000
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM

PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR:

ADDRESS:

PHONE:

LIC. #: EXP. DATE:

FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Fract. HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/E.A.C. Panel		

TOTAL NUMBERS	
Pool Permit w/UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range / Receptacle	KW
KW Oven / Surface Unit	KW
KW Elec. Water Heater	KW
KW Elec. Dryer / Receptacle	KW
KW Dishwasher	KW
HP Garbage Disposal	HP
KW Central A/C Unit	KW
HP/KW Space Heater/Air Handler	HP/KW
KW Baseboard Heat	KW
HP Motors 1/+ HP	HP
KW Transformer/Generator	KW
AMP Service	AMP
AMP Subpanels	AMP
AMP Motor Control Center	AMP
AMP Elec. Sign/Outline Light	KW
Other	
Other	
Other	
Other	

Estimated Cost of Electrical Work: $

Signature (print name):

Estimated Cost of Electrical Work: $

Signature (print name):

Owner ☐ Contractor ☐

SUBCODE APPROVAL:

PLANS: Required ☐ Approved ☐

Approved by:

Date:

CONTRACTOR AFFIX SEAL:

FIRE PROTECTION SUBCODE

CONTRACTOR:

ADDRESS:

PHONE:

LIC. #: EXP. DATE:

FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar

Heating Sys: ☐ New ☐ Existing

Location of Furnace / Boiler

Water Supply Source

Method of Valve Supervision

Local Alarm Supervision

Central Supervsion

Proprietary Supervision

Flammable Liquip Storage Tanks	Capacity:	Fuel:
Combustable Liquid Storage Tanks	Capacity:	Fuel:
L.G.P. Storage Tanks	Capacity:	Fuel:

DESCRIPTION	NUMBER
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	
Other:	

Estimated Cost of Fire Protection Work: $

Signature:

Owner ☐ Contractor ☐

SUBCODE APPROVAL:

PLANS: Required ☐ Approved ☐

Approved by:

Date:

UP DATE
99-0097 + B

COUNTER FORM
PLEASE PRINT

WNSHIP OF BRICK
Chambers Bridge Road
k, New Jersey 08723
732-262-1027

Site Location: 51 Chambers Bridge Rd Date Rec'd.:
Block: 672 Lot: 8 Date Issued:
Owner in Fee: SHL BRICK LLC Control #:
Address: 525 River Road Permit #:
Edgewater
State: NJ Zip: 07724 Phone: ( )
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR: TOTAL PIPE
ADDRESS: 15 PROSPECT LANE
COLONIA NJ 07067
PHONE: 827-8565
LIC #: 10377
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #): 22-3225315

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	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 AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
3	Water Service Connection 2"
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $ 10,000
Signature:
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA

DESCRIPTION OF WORK:

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories:
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature:

Estimated Cost of Building Work:
New Building (1): $
Alteration (2): $
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:

PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Fract. HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		

TOTAL NUMBERS

Pool Permit w/UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range / Receptacle	KW
KW Oven / Surface Unit	KW
KW Elec. Water Heater	KW
KW Elec. Dryer / Receptacle	KW
KW Dishwasher	KW
HP Garbage Disposal	HP
KW Central A/C Unit	KW
HP/KW Space Heater/Air Handler	HP/KW
KW Baseboard Heat	KW
HP Motors 1/+ HP	HP
KW Transformer/Generator	KW
AMP Service	AMP
AMP Subpanels	AMP
AMP Motor Control Center	AMP
AMP Elec. Sign/Outline Light	KW
Other	
Other	
Other	
Other	

Estimated Cost of Electrical Work: $
Signature (print name):
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WOR

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source	
Method of Valve Supervision	
Local Alarm Supervision	
Central Supervsion	
Proprietary Supervision	
Flammable Liquip Storage Tanks	Capacity: Fue
Combustable Liquid Storage Tanks	Capacity: Fue
L.G.P. Storage Tanks	Capacity: Fue

DESCRIPTION	NUMBER
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	
Other	

Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

RECEIVED

MAY 12 1999

DIV. OF INSPECTION

update 99-0097C

COUNTER FORM
PLEASE PRINT

WNSHIP OF BRICK
Chambers Bridge Road
k, New Jersey 08723
732-262-1027

Site Location: 51 Chambersbridge Rd Date Rec'd.:
Block: 672 Lot: 8 Date Issued:
Owner in Fee: Starwood Heller LLC Control #:
Address: 525 River Road Permit #:
Edgewater NJ 07724
State: NJ Zip: 07724 Phone: ( )
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

)NTRACTOR: Total Pipe
)DRESS: 15 Prospect Lane
Colonia NJ 07067
IONE: 827 8565
C #: 10377
C. EXPIRATION DATE:
DERAL EMP. # (or S.S. #): 22-3225315
TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
___	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 AC or Refrig. Unit
___	Sewer Connection
___	Septic (Disposal System) Closure
X	Water Service Connection AUX METER
___	Gas Service Connection
___	Active Solar System
___	Vent Through Roof
___	Other

timated Cost of Plumbing Work: $ 2000
;nature:
ner ☐ Contractor ☒
3CODE APPROVAL:
ANS: Required ☐ Approved ☐
)roved by:
e:
)NTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA

DESCRIPTION OF WORK:

TYPE OF WORK

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CONSTR. CLASS Present: Proposed:
No. of Stories:
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature:

Estimated Cost of Building Work:
New Building (1): $
Aleration (2): $
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐

Approved by:

PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Fract. HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		

TOTAL NUMBERS

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KW Oven / Surface Unit	KW
KW Elec. Water Heater	KW
KW Elec. Dryer / Receptacle	KW
KW Dishwasher	KW
HP Garbage Disposal	HP
KW Central A/C Unit	KW
HP/KW Space Heater/Air Handler	HP/KW
KW Baseboard Heat	KW
HP Motors 1/+ HP	HP
KW Transformer/Generator	KW
AMP Service	AMP
AMP Subpanels	AMP
AMP Motor Control Center	AMP
AMP Elec. Sign/Outline Light	KW
Other	
Other	
Other	
Other	

Estimated Cost of Electrical Work: $
Signature (print name):
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WOR

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Heating Sys: ☐ New ☐ Existing
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Method of Valve Supervision		
Local Alarm Supervision		
Central Supervsion		
Proprietary Supervision		
Flammable Liquip Storage Tanks	Capacity:	Fue
Combustable Liquid Storage Tanks	Capacity:	Fue
L.G.P. Storage Tanks	Capacity:	Fue

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
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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	
Other	

Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date: