Block 16 Lot 1 108

RECEIVED SEP 16 1994 672

DIV. OF INSPECTION

9-14-94

2890-94

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 51 CHAMBERS BRIDGE RD.
2. Name of Owner in Fee: RICKEL Tel. (____) ____
   Address 51 CHAMBERS BRIDGE RD. (street) BRICKTOWN (municipality), N.J. (zip code)
3. Ownership in Fee: Public ____ Private ✓
4. Principal Contractor: GRINNELL FIRE PROTECTION Tel. (908) 381-7722
   Address 2323 RANDOLPH AVE. AVENEL, N.J.
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Federal Emp. No. 054034 6132 Social Security No. ____
5. Architect or Engineer ____ Tel. (____) ____
   Address ____
6. Responsible Person In Charge of Work JOHN TERODY Tel. 908 381-7722

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical			
3. Plumbing			
4. Fire Protection		85	
5. Other			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee		3	
10. Subtotal	$		
11. Cert. of Occupancy		20	
12. Other			
13. TOTAL	$	108	

VI. BUILDING/SITE CHARACTERISTICS

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

II. PROPOSED WORK

	Est. Cost
1. ☐ Minor Work (single trade)	
2. ☐ Small Job ($5,000 and no prior approvals)	
3. ☐ New Building	
4. ☐ Addition	
5. ☐ *Alteration*	
6. ☑ Fire Protection	4200.00
7. ☐ Plumbing	
8. ☐ Electrical	
9. ☐ Asbestos Abatement	
10. ☐ Demolition	
TOTAL COSTS	

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
			9/14/94 JE		11/17/94		JE

III. DO YOU WANT: (optional) 1. ☐ Partial Releases 2. ☐ Prototype Processing

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

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

VII. DESCRIPTION OF BUILDING USE

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

No of dwelling units:
Before Construction ____
After Construction ____
Net gain or loss ____

B. NON-RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10408828

U.C.C. Form F-100A

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection
I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( )I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

(✓) Check if contractor.

Agent Name GRINNELL FIRE PROTECTION

Address 2323 RANDOLPH AVE.
AVENEL, N.J. 07001

Telephone (908) 381-7722

Signature Paul A. Ang Date 9-1-94

BLOCK _____ **LOT** _____ **ADDRESS (SITE-ZONE)** 51 CHAMBERS BRIDGE RD **PERMIT NO.** _____

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Fire Department					X	X	X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Dept. of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Dept. of Environmental Protect.	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☐ Other									
☐									
☐									

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 EXPIRED
☐ Temporary Certificate of Occupancy	No.		
☐ Temporary Certificate of Occupancy	No.		
☐ Continued Certificate of Occupancy	No.		
☐ Certificate of Occupancy	No.		
☐ Certificate of Approval	No.		
☐ None			

CONSTRUCTION PERMIT

Date Issued 10-11-94
Control #
Permit # 2890-94

IDENTIFICATION Block 672 Lot 8

Work Site Location 51 Chamberbridge Rd. Contractor Sprinkler & Fire Protection

Owner in Fee Rudick

Address [illegible]

Tele. ( )

Address

Tele. ( )

Lic. No. or Bldrs. Reg. No. _____ Exp. Date [illegible]

Federal Emp. No. 2890-94

or Social Security No. BLOCK 0.00

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER _____

[ ] ELECTRICAL [✓] FIRE PROTECTION

DESCRIPTION OF WORK:

fire sprinklers

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 $ 4200.

U.C.C. Form F-170A

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	0.00
Plumbing	
Electrical	15.00
Fire Protection 85.	3.00
Other	20.00
Other	39.00
DCA Training Fee 3.	36.00
Cert. of Occ. 20.	12.00
Other	0.00
Total	18.19
Check No.	
Cash	
Collected By:	

1 WHITE - OFFICE 2 CANARY - TAX ASSESSER 3 PINK - JACKET 4 GOLD - APPLICANT

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Date Issued 10-11-94
Control #
Permit # 2890-94

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 CHAMBERS BRIDGE ROAD
BRICKTOWN, N.J.
Owner in Fee RICKEL
Address 51 CHAMBERS BRIDGE ROAD
BRICKTOWN, N.J.
Tele. ( )
Contractor GRINNELL FIRE PROTECTION
Address 2323 RANDOLPH AVE.
AVENEL, N.J. 07001
Tele. (908) 381-7722
Lic. No.
Federal Emp. No. 054034613 2 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 4200.00 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[X] Fire Plans Approved
Date: 9/14/94
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [X] CA
Date: 11/7/94
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test	2Hrs. 200psi		11/8/94	
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

C. CERTIFICATION IN LIEU OF OATH

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

Paul A. Aubry
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source EX
Method of Valve Supervision 1
Local Alarm Supervision STING
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	28	85.—
Dry Sprinkler Heads		
TOTAL	28	
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance		
OTHER		

Administrative Surcharge $ 85.—
Paid [ ] Check # Minimum Fee $
Collected by TOTAL FEE $

U.C.C. Form F-140A
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

CONTRACTOR'S MATERIAL & TEST CERTIFICATE FOR ABOVEGROUND PIPING

PROCEDURE

Upon completion of work, inspection and tests shall be made by the contractor's representative and witnessed by an owner's representative. All defects shall be corrected and system left in service before contractor's personnel finally leave the job.

A certificate shall be filled out and signed by both representatives. Copies shall be prepared for approving authorities, owners and contractor. It is understood the owner's representative's signature in no way prejudices any claim against contractor for faulty material, poor workmanship, or failure to comply with approving authority's requirements or local ordinances.

PROPERTY NAME: RICKLES — DATE: 11-17-94

PROPERTY ADDRESS: 51 CHAMBERSBRIDGE RD BRICK NJ

PLANS

ACCEPTED BY APPROVING AUTHORITY('S) NAMES

ADDRESS

INSTALLATION CONFORMS TO ACCEPTED PLANS — ☒ YES ☐ NO

EQUIPMENT USED IS APPROVED — ☒ YES ☐ NO

IF NO, EXPLAIN DEVIATIONS

INSTRUCTIONS

HAS PERSON IN CHARGE OF FIRE EQUIPMENT BEEN INSTRUCTED AS TO LOCATION OF CONTROL VALVES AND CARE AND MAINTENANCE OF THIS NEW EQUIPMENT — ☒ YES ☐ NO

IF NO, EXPLAIN

HAVE COPIES OF THE FOLLOWING BEEN LEFT ON THE PREMISES:

1. SYSTEM COMPONENTS INSTRUCTIONS — ☒ YES ☐ NO
2. CARE AND MAINTENANCE INSTRUCTIONS — ☒ YES ☐ NO
3. NFPA 13A — ☒ YES ☐ NO

LOCATION OF SYSTEM

SUPPLIES BLDGS.

SPRINKLERS

MAKE	MODEL	YEAR OF MANUFACTURE	ORIFICE SIZE	QUANTITY	TEMPERATURE RATING
GRINNELL	950 UPRIGHT	1994	½"	28	165

PIPE AND FITTINGS

PIPE CONFORMS TO NFPA-13 STANDARD — ☒ YES ☐ NO

FITTINGS CONFORM TO NFPA-13 STANDARD — ☒ YES ☐ NO

IF NO, EXPLAIN

ALARM VALVE OR FLOW INDICATOR

EXISTING SYSTEM ALARM DEVICE

TYPE	MAKE	MODEL
ALARM VB	SFER	D

MAXIMUM TIME TO OPERATE THROUGH TEST CONNECTION: MIN. — SEC. —

DRY PIPE OPERATING TEST

DRY VALVE MAKE	DRY VALVE MODEL	DRY VALVE SERIAL NO.	Q.O.D. MAKE	Q.O.D. MODEL	Q.O.D. SERIAL NO.

	TIME TO TRIP THRU TEST CONNECTION* MIN.	TIME TO TRIP THRU TEST CONNECTION* SEC.	WATER PRESSURE PSI	AIR PRESSURE PSI	TRIP POINT AIR PRESSURE PSI	TIME WATER REACHED TEST OUTLET* MIN.	TIME WATER REACHED TEST OUTLET* SEC.	ALARM OPERATED PROPERLY YES	ALARM OPERATED PROPERLY NO
Without Q.O.D.									
With Q.O.D.									

IF NO, EXPLAIN

*MEASURED FROM TIME INSPECTOR'S TEST CONNECTION IS OPENED.

(OVER)

85A (7-80) PRINTED IN USA

Contractor's Material and Test Certificate for Aboveground Piping

DELUGE & PREACTION VALVES

OPERATION ☐ PNEUMATIC ☐ ELECTRIC ☐ HYDRAULIC

PIPING SUPERVISED ☐ YES ☐ NO | DETECTING MEDIA SUPERVISED ☐ YES ☐ NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATIONS ☐ YES ☐ NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING ☐ YES ☐ NO | IF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM YES	NO	DOES EACH CIRCUIT OPERATE VALVE RELEASE YES	NO	MAXIMUM TIME TO OPERATE RELEASE MIN.	SEC.

TEST DESCRIPTION

HYDROSTATIC: Hydrostatic tests shall be made at not less than 200 psi (13.6 bars) for two hours or 50 psi (3.4 bars) above static pressure in excess of 150 psi (10.2 bars) for two hours. Differential dry-pipe valve clappers shall be left open during test to prevent damage. All aboveground piping leakage shall be stopped.

FLUSHING: Flow the required rate until water is clear as indicated by no collection of foreign material in burlap bags at outlets such as hydrants and blow-offs. Flush at flows not less than 400 GPM (1514 L/min) for 4-inch pipe, 600 GPM (2271 L/min) for 5-inch pipe, 750 GPM (2839 L/min) for 6-inch pipe, 1000 GPM (3785 L/min) for 8-inch pipe, 1500 GPM (5678 L/min) for 10-inch pipe and 2000 GPM (7570 L/min) for 12-inch pipe. When supply cannot produce stipulated flow rates, obtain maximum available.

PNEUMATIC: Establish 40 psi (2.7 bars) air pressure and measure drop which shall not exceed 1-½ psi (0.1 bars) in 24 hours. Test pressure tanks at normal water level and air pressure and measure air pressure drop which shall not exceed 1-½ psi (0.1 bars) in 24 hours.

TESTS

ALL PIPING HYDROSTATICALLY TESTED AT 200 PSI FOR 2 HRS. | IF NO, STATE REASON

DRY PIPING PNEUMATICALLY TESTED ☐ YES ☐ NO N/A

EQUIPMENT OPERATES PROPERLY ☒ YES ☐ NO

DRAIN TEST: READING OF GAGE LOCATED NEAR WATER SUPPLY TEST CONNECTION _____ PSI | RESIDUAL PRESSURE WITH VALVE IN TEST CONNECTION OPEN WIDE _____ PSI

Underground mains and lead in connections to system risers flushed before connection made to sprinkler piping.

VERIFIED BY COPY OF THE U FORM NO. 85B ☐ YES ☐ NO | OTHER EXPLAIN

FLUSHED BY INSTALLER OF UNDER-GROUND SPRINKLER PIPING ☐ YES ☐ NO

BLANK TESTING GASKETS

NUMBER USED	LOCATIONS	NUMBER REMOVED

WELDING

WELDED PIPING ☐ YES ☐ NO

IF YES . . .

DO YOU CERTIFY AS THE SPRINKLER CONTRACTOR THAT WELDING PROCEDURES COMPLY WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3 ☐ YES ☐ NO

DO YOU CERTIFY THAT THE WELDING WAS PERFORMED BY WELDERS QUALIFIED IN COMPLIANCE WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3 ☐ YES ☐ NO

DO YOU CERTIFY THAT WELDING WAS CARRIED OUT IN COMPLIANCE WITH A DOCUMENTED QUALITY CONTROL PROCEDURE TO INSURE THAT ALL DISCS ARE RETRIEVED, THAT OPENINGS IN PIPING ARE SMOOTH, THAT SLAG AND OTHER WELDING RESIDUE ARE REMOVED, AND THAT THE INTERNAL DIAMETERS OF PIPING ARE NOT PENETRATED ☐ YES ☐ NO

CUTOUTS (DISCS)

DO YOU CERTIFY THAT YOU HAVE A CONTROL FEATURE TO ENSURE THAT ALL CUTOUTS (DISCS) ARE RETRIEVED? ☐ YES ☒ NO

HYDRAULIC DATA NAMEPLATE

NAMEPLATE PROVIDED ☐ YES ☒ NO | IF NO, EXPLAIN N/A

REMARKS

DATE LEFT IN SERVICE WITH ALL CONTROL VALVES OPEN: 11-17-94

SIGNATURES

NAME OF SPRINKLER CONTRACTOR

TESTS WITNESSED BY

FOR PROPERTY OWNER (SIGNED) | TITLE | DATE

FOR SPRINKLER CONTRACTOR (SIGNED) T.S. Morton | TITLE | DATE 11-17-94

ADDITIONAL EXPLANATION AND NOTES

11/17/94 Witnessed by Fire Sub. Code Joe Enforcer

BLUE RHINO CORPORATION
represented by: J.W. GOODIFFE & SON, INC.
P.O. Box 4370 1900 E. Elizabeth Ave.
Linden, NJ 07036-8370
(800) 245-9353
Fax - (908) 486-9366

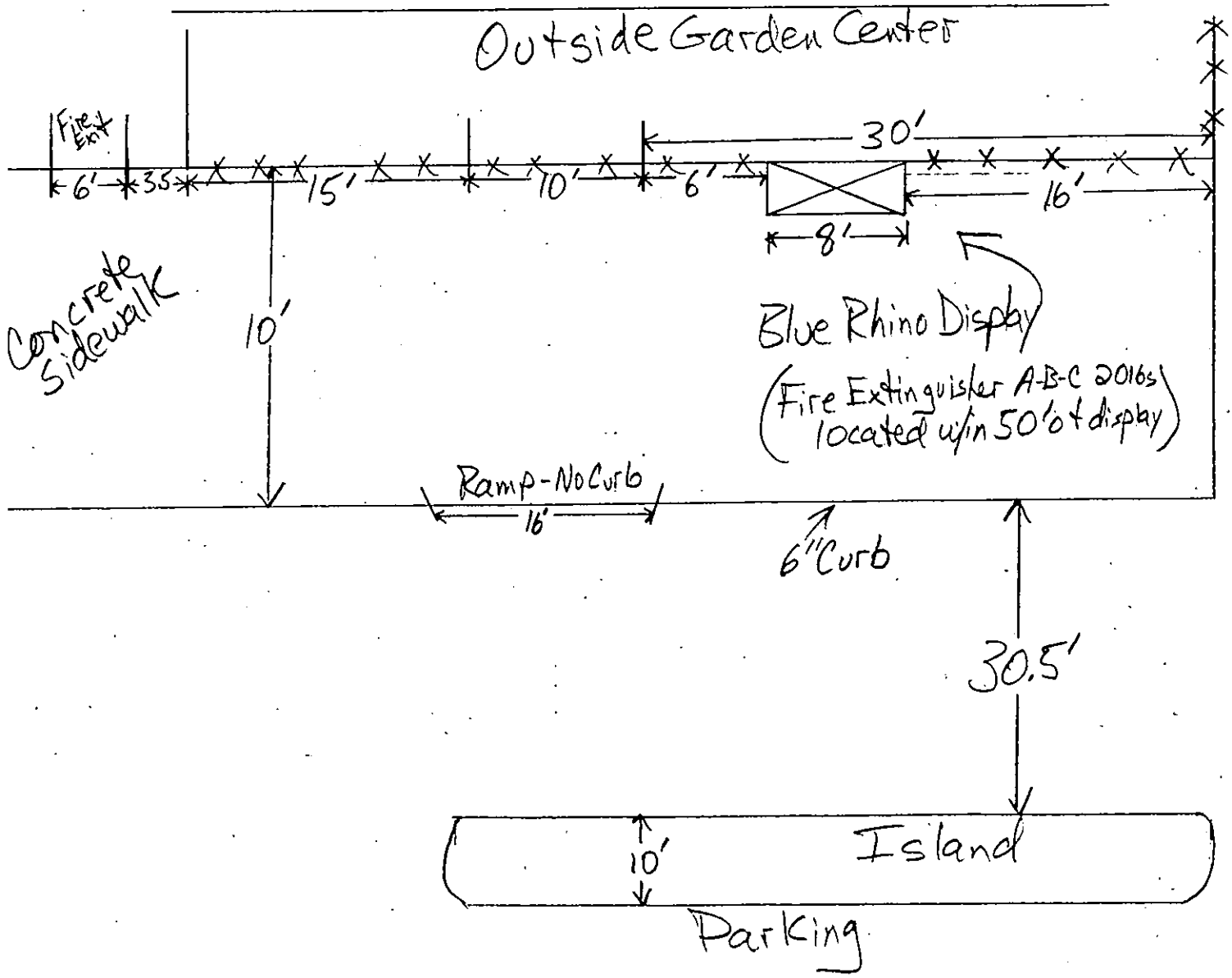
STORE NAME AND #: Wal*Mart #1977 CONTACT: John-Garden Dept.

DATE OF PLAN: 8/19/97 SITE PLANNER: Alan Burkhdz

STORE ADDRESS: 872 Route 88 Brick NJ 08723

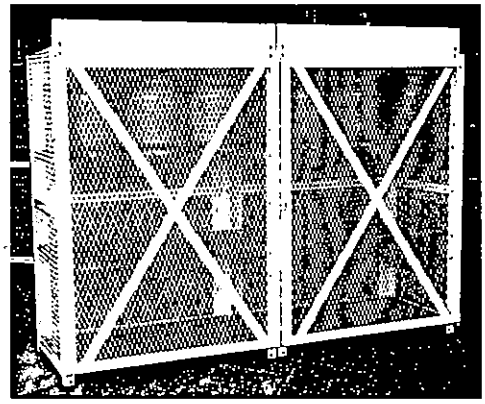
STORE PHONE #: 732-840-7772

(CYLINDER EXCHANGE UNIT XXX) (TANKS PER DISPLAY 36) (# OF DISPLAYS 1)

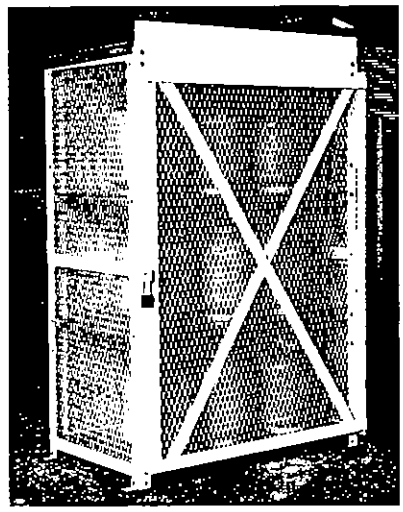


PRODUCT **DISPLAYS**

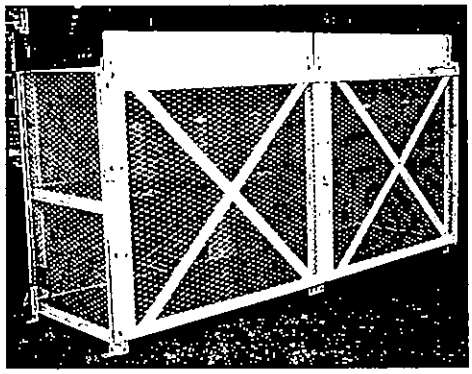
Blue Rhino
The Propane Authority



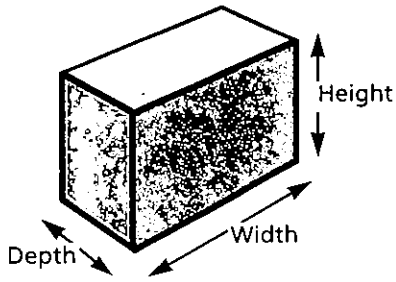
36 Display



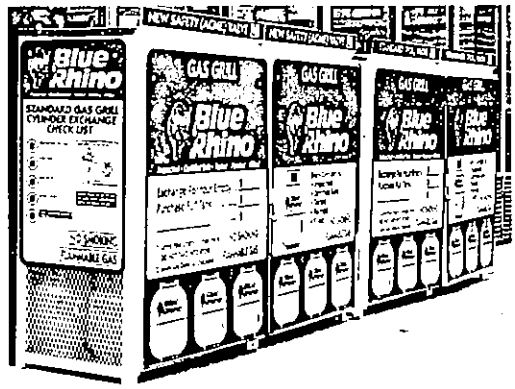
18 Display



24 Display



SIZE	WIDTH	HEIGHT	DEPTH	DISPLAY WEIGHT	SHIPPING WEIGHT	NO. OF DOORS
36 Display	89"	66"	30"	509 lbs.	558 lbs.	2
24 Display	89"	46"	30"	359 lbs.	404 lbs.	2
18 Display	46"	66"	30"	250 lbs.	280 lbs.	1



Display Panel Graphics. Set consists of 3 panels installed during setup.

BLUE RHINO CORPORATION
represented by: J.W. GOODIFFE & SON, INC.
P.O. Box 4370 1900 E. Elizabeth Ave.
Linden, NJ 07036-8370
(800) 245-9353
Fax - (908) 486-9366

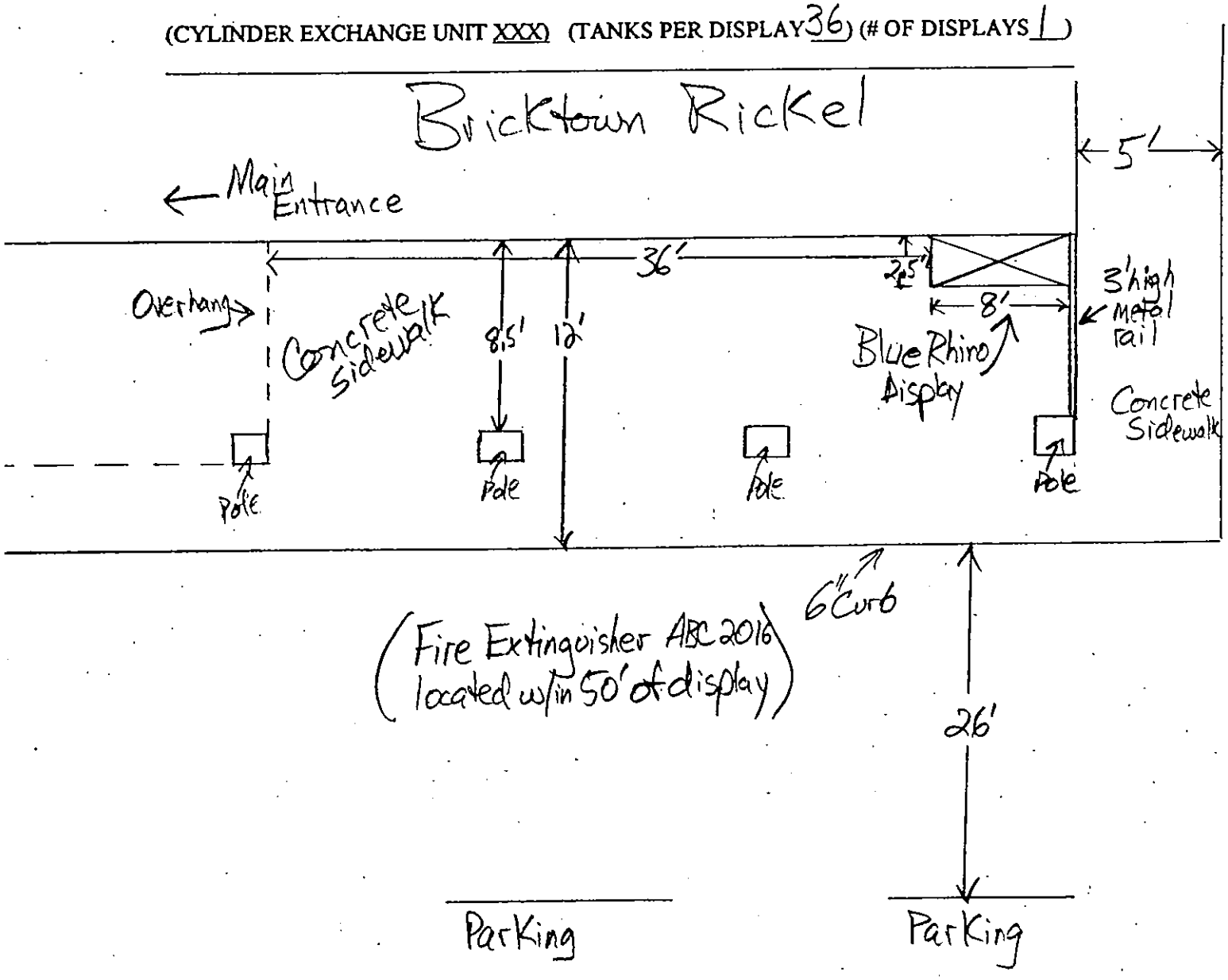
STORE NAME AND #: Rickel #9 CONTACT: Joe Palotnik

DATE OF PLAN: 8/19/97 SITE PLANNER: Alan Burkholz

STORE ADDRESS: 51 Chambers Bridge Rd, Bricktown NJ 08723

STORE PHONE #: 908-920-0800

(CYLINDER EXCHANGE UNIT XXX) (TANKS PER DISPLAY 36) (# OF DISPLAYS 1)



J. W. GOODLIFFE & SON

P.O. BOX 4370, 1900 E. ELIZABETH AVENUE, LINDEN, N.J. 07036—(908) 486-8230

Welding Supplies • Equipment
Commercial Gases

868
11.1

August 20, 1997

1174 868

Mike Clayton, Fire Official
Brick Municipal Building
401 Chambers Bridge Road
Brick, N.J. 08723

Re: Blue Rhino Propane Cylinder Exchange
Locations: Rickel, 51 Chambers Bridge Road 673.8
Wal*Mart, 1872 Route 88

Dear Mr. Clayton:

As recently discussed, enclosed please find two site plans, a display sheet, and a safety brochure concerning the above locations. Please call me at 908-389-4341 if I can answer any more questions about these locations or the Blue Rhino Cylinder Exchange Service.

Thank you for your courtesy and consideration.

Sincerely,

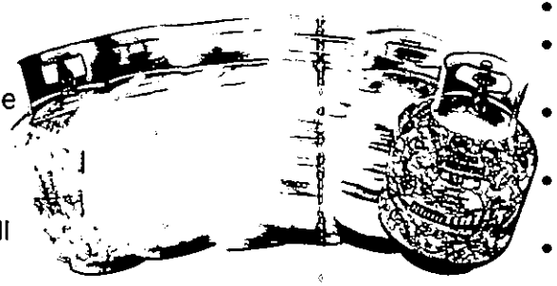
Alan E. Burkholz

Encs.

This year alone...

- 5 million new propane grills will be sold.
- 56 million consumers will need to fill their gas grill cylinders.
- Certification will expire on hundreds of thousands of cylinders.
- Thousands of consumers will use over-filled or damaged cylinders.

Questions



Do you have propane gas grill cylinder problems?

Do fill stations in your market meet all safety guidelines?

Are their employees trained and knowledgeable?

Do your neighbors have trouble disposing of dangerous and uncertified cylinders?

Answer

BLUE RHINO CYLINDER EXCHANGE SERVICE

Exchange is the ideal way for consumers to get propane for their grills, heaters, cookers and camping equipment. Rather than traveling to a fill station, the consumer simply brings the empty cylinder to a convenient retail location where it is exchanged for one that is inspected, precision filled and leak tested.

Consumers never need to fill their cylinders again. They can use it up, trade it in and feel confident in its safety. Your "backyard" will be safer than ever!

Blue Rhino Exchange Benefits

CONSUMER BENEFITS
Safety • Value • Convenience

COMMUNITY BENEFITS

- Eliminates dangerous cylinders from marketplace
- Introduces new cylinders
- Ensures cylinders are properly filled by trained professionals
- Liquid transfer occurs in a controlled environment
- Encourages consumers to up-grade to newer safety valves
- Enhances consumer awareness of safety issues

NFPA 58

The standard for the storage and handling of LP-Gas, NFPA 58 outlines the regulations and standards concerning propane, including cylinder exchange. Some of the highlights pertaining to cylinder exchange follow:

- All persons handling LP-Gases must be properly trained in appropriate handling and operating procedures. *(1-6; 4-2.2.1)*
- Cylinders can only be filled after having met several key criteria. The cylinder must comply with design, fabrication, inspection, marking and requalification provisions. *(4-2.2.3)*
- Storage of the cylinders must minimize their exposure to temperature rise, physical damage and tampering. Preferably stored outdoors. *(5-2.1.1)*
- Cylinder displays outside of building and awaiting resale to the public must be at least 5 feet from any doorway frequented by the public. There are additional conditions depending on the total weight of the LP-Gas stored at the site. *(5-4.1)*
- Cylinders at locations accessible to the public must be enclosed in a lockable, ventilated metal cage or rack to protect the cylinders from pilferage or tampering, or a fenced-in area with specific additional qualifications. *(5-4.2.1)*
- The storage location must have at least one approved portable fire extinguisher with a B:C rating and a minimum capacity of 18 lbs. dry chemical. *(5-5)*

Who Is Blue Rhino?

THE NATION'S LARGEST GAS GRILL CYLINDER EXCHANGE SERVICE

Winston-Salem, N.C.-based Blue Rhino Corporation is focused on delivering unrivaled cylinder exchange products and merchandising programs to retailers of gas grills and accessories. The Blue Rhino commitment to safety, quality and service has allowed us to secure business with the nation's premium retailers.

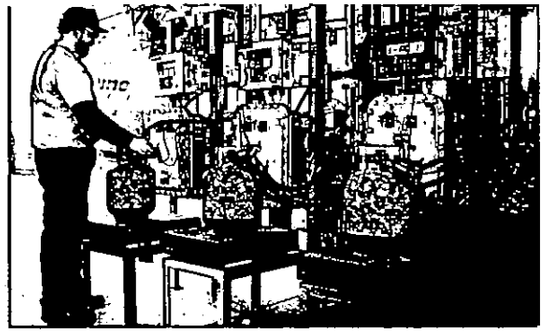
Blue Rhino product is produced and delivered to industry leading standards by established local propane professionals with proven safety histories. Compliance with NFPA 58, BOCA, UBC, DOT and local laws and codes is mandatory. Our minimum acceptable requirement for our product, delivery systems and merchandising displays exceeds the industry's highest standards.

Only If It's Blue.

Blue Rhino
Cylinder Exchange Service

The Safety Difference

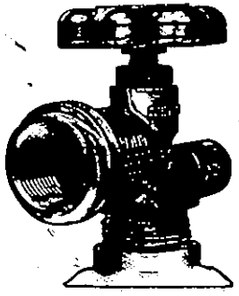
Industry data show up to 25% of gas grill cylinders filled should have been repaired or scrapped. Our manufacturing process ensures a consistently high quality product that reduces potential hazards for your community by repairing and recertifying any cylinder that is questionable. We properly dispose of dangerous cylinders so that they are never used again.

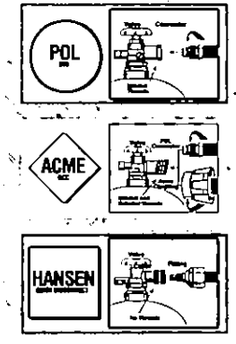


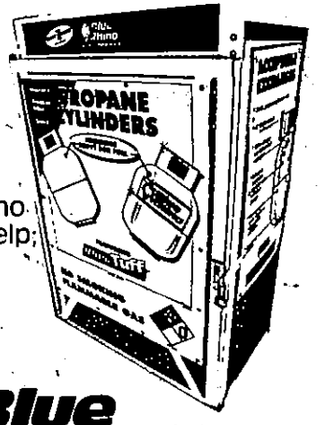
	Blue Rhino Exchange	Other Exchangers	Bulk Fill Locations
Inspected by Trained Propane Professionals	Absolutely	?	?
Repaired by Trained Propane Professionals	Absolutely	?	?
Recertified by Trained Propane Professionals	Absolutely	?	?
Precision Filled by Trained Propane Professionals	Absolutely	?	?
Tested by Trained Propane Professionals	Absolutely	?	?
Distributed by Trained Propane Professionals	Absolutely	?	NA
Consistent Audited Processes	Absolutely	?	?
24-Hour Emergency Response	Absolutely	?	?
Complete Liability Protection	Absolutely	?	?
Proper Cylinder Disposal	Absolutely	?	?
Retail Training Program	Absolutely	?	?
Educational & Attractive Displays	Absolutely	?	NA
Maintained NFPA 58, BOCA, Seismic-Approved Displays	Absolutely	?	NA
Complete Assortment of Valve Styles	Absolutely	?	?
"How to Make a Proper Connection" Instructions	Absolutely	?	?
Tamper-Evident, Color-Coded Valve Labels	Absolutely	?	?
Bilingual Warnings	Absolutely	?	?
24-Hour Consumer Support 800 Line	Absolutely	?	?
Available Close to Home	Absolutely	?	?
Liquid Propane Transfer	One Location	One Location	Many Locations

Leadership & Innovation

- New Acme/QCC safety valves available
- Tamper-evident valve identification labels with connection instructions
- DOT-compliant labeling
- Bilingual warning and usage information
- Comprehensive retail employee training
- Consumer education and awareness programs
- 24-hour toll-free consumer and retailer help line, 1-800-BLU-RINO







We welcome you to ask regulatory experts like yourself about their Blue Rhino experience. Let us help; call 1-800-BLU-RINO today.

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Cylinder Exchange Service

Can A 20 lb. Rhino Revolutionize Grilling Safety?