BLOCK 1071 LOT 1.01 QUALIFICATION CODE _____ ADDRESS (SITE) 56 chambersbridge rd PERMIT NO. 18-3471

CONSTRUCTION PERMIT APPLICATION

18-004058

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

I. IDENTIFICATION

1. Proposed Work Site at: 56 chambersbridge rd (brick plaza former ethan allen space)
2. Name of Owner in Fee: Federal Realty investment Trust
   Tel. (484) 419-1208 e-mail ncain@federalrealty.com
   Address 50 e wynwood rd suite 200 (street) wynwood pa 19096 (municipality) (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: National Maintenance and Build Out Tel. (215) 442-5380
   Address 48 a vincent circle e-mail Jkornsey@nmboc.com
   Ivyland Pa 18974
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason _____
   Federal Emp. ID No. 300020638 FAX: _____
5. Architect or Engineer Kelly/Johnson/wagner Contact eric wagner
   Address _____ e-mail wagner@kjw.com
   Tel. _____ FAX: _____
6. Responsible Person in Charge once Work has Begun Joe Kornsey
   Tel. (267) 966-5239 FAX: _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 1500-	1500	
2. Electrical	150-	120-	150-
3. Plumbing	150-		
4. Fire Protection	1116-	406-	1116-
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	91-	126	4-
10. Subtotal	$	76	
11. Cert. of Occupancy		200 Eqs	
12. Other			
13. TOTAL	$ 3007	3038	270

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

1. Number of Stories		1
2. Height of Structure	ft.	150-E
3. Area — Largest Floor	sq. ft.	116-F
4. New Building Area	sq. ft.	18-DCA 2
5. Volume of New Structure	cu. ft.	
6. Max. Live Load		284-
7. Max. Occupancy Load		
8. If Industrialized Building: State Approved ____ HUD ____		
9. Total Land Area Disturbed	sq. ft.	
10. Flood Hazard Zone		
11. Base Flood Elevation	ft.	
12. Wetlands yes ____ no ____		

COMMERCIAL

IIa. PROPOSED WORK

- ☐ Minor Work
- ☐ Repair
- ☐ Asbestos Abat. -Subch. 8
- ☐ New Building
- ☐ Alteration
- ☐ Lead Hazard Abatement
- ☐ Addition
- ☒ Demolition
- ☐ Renovation
- ☐ Reconstruction
- ☐ Radon Remediation
- ☐ Annual Permit

1st floor partial demo

IIb. SUBCODES

(Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building	60,000				12/19/18	MGH			
☒ Electrical					11/26/18	PB			
☐ Plumbing					11-29-18				
☐ Fire Protection				1/7/19		RV	2-1-19		RV
☐ Elevator		Emp	1/14/19		1/14/19	EOC			
TOTAL COST	$60,000								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use: 401 DCA 20
2. Use Group, Proposed: Select Group
3. Change in Use Group, Indicate Present: Select Group
4. No. of dwelling units: *Total Units* ***Income-restricted***
   Gained, Sale
   Gained, Rental
   Lost, Sale
   Lost, Rental

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: Select Group
3. Change in Use Group, Indicate Present: Select Group

C. MIXED USE -List secondary use(s):

D. Construct. Classification: Present
   Proposed

III. PLAN REVIEW (optional)

DO YOU WANT:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 10/10/2019
Control Number C-18-004058
Permit Number 18-3471
Permit Issue Date 12/21/2018
Certificate Number 18-3471

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN) Block: 671 Lot: 1.01 Qual:
Brick Township, NJ

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST %

Owner Address: PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092

Telephone:

Contractor National Maintenance & Buildout

Address 48A Vincent Circle Ivyland PA 18974

Telephone: (215) 442-2538 Fax: (215) 442-5679

License Number or Builders Registration Number: Federal Emp. Number: 300020638

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: ALTERATION - COMMERCIAL, VANILLA BOX - - FORMER ETHAN ALLEN - SPACE 43 ...PARTIAL RELEASE - INTERIOR CLEANOUT

Certificate Comments:

☐ **Certificate of Occupancy**
This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☑ **Certificate of Approval**
This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **Certificate of Continued Occupancy**
This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ **Temporary Certificate of Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**
This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

David J. Newman Jr

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 10/10/2019

U.C.C. F260 (rev. 08/05)

PLUMBING SUBCODE
TECHNICAL SECTION

Update

Date Received 9/27/19
Control #

Date Issued
Permit # 18-31711-1

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

Block 671 Lot 1.01 Qualification Code

Work Site Location 56 CHAMBERS BRIDGE RD.

Owner in Fee: FEDERAL REALTY

Tel. e-mail

Address 56 CHAMBERS BRIDGE RD. (street) (municipality) (zip code)

Contractor: PINNACLE PLUMBING Tel.

Address 915 RT 9 NORTH e-mail

BAYVILLE, N.J. 08721

Contractor License No. 10500 Exp. Date 6-30-2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 81-0591940 FAX: 732 504-7428

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size 2" Public Water X Private Well

Est. Cost of Plumbing Work $ 1000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 10-15-19
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			9-30-19	PD

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 sign/Contractor sign and seal here:

Print name here: SHAWN FALLEN

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
BACK FLOW PREVENTER ON WATER SERVICE

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
1	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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

U.C.C. F130 (rev. 11/09) 1. White = Inspector 2. Canary = Office Copy 3. Pink = Office Copy 4. Gold = Applicant Copy

Backflow Prevention Assembly Test & Maintenance Form

Owner of Property: TRADER JOE'S / FEDERAL REALTY — Return Form By: _____

Mailing Address: 50 E. Wynnewood Rd. #290 — Test Date: _____

Wynnewood (CITY) PA (ST) 19096 (ZIP)

Contact Person: _____

Assembly Address: 516 Chambersbridge Rd

Brick (CITY) NJ (ST) 08723 (ZIP)

Exact Location: NEXT TO FIRE CHECK VALVE IN REAR STORAGE ROOM

- [ ] RP - ASSE #1013
- [ ] RPDA - ASSE #1047
- [X] DC- ASSE #1015
- [ ] DCDA - ASSE #1048
- [ ] PVB - ASSE #1020
- [ ] SRVB - ASSE #1056

Permit Number: _____

Make: WATTS — Model No.: LF007M2QT

Size: 2" — Serial No.: 053552

Line PSI: 60	Reduced Pressure Backflow Preventer			Pressure Vacuum Breaker / Spill Resistant Vacuum Breaker	
	Double Check Valve Assembly				
	Check Valve No. 1	Check Valve No. 2	Relief Valve	Check Valve	Air Inlet
Initial Test **PASS** [X] **FAIL** [ ]	Closed Tight [X] Leaked [ ] 8.0 PSID	Closed Tight [X] Leaked [ ] 2.0 PSID	Opened at _____PSID Did Not Open [ ]	Closed Tight [ ] Leaked [ ] _____PSID	Opened at _____PSID Did Not Open [ ]
Repairs					
Final Test **PASS** [ ]	Closed Tight [ ] _____PSID	Closed Tight [ ] _____PSID	Opened at [ ] _____PSID	Closed Tight [ ] _____PSID	Opened at _____PSID

Condition of No. 2 Shutoff Valve: Closed Tight [X] Leaked [ ] — Water Service Restored: Yes [X] No [ ]

Notes:

Certification: On this date, the above device was tested per applicable codes and the required performance standards.

Test Type	MACARTHUR	Gauge Ser. No.	3516950	Testing Firm	PINNACLE PLUMBING
Tester Name	SHAWN FORGIONE			Tester Certification No.	ASSE 15519

Tester Signature: _____ Date: 9.23.19

Contact Signature: _____ Date: _____

GAGE-IT, INC.

Pressure & Temperature Instrumentation

94 N. Branch Street
Sellersville, PA 18960
www.gageitinc.com

800-869-7294

(215) 453-8611
Fax: (215) 453-8770
e-mail: gageit@gageitinc.com

CERTIFICATION OF ACCURACY FROM GAGE-IT, INC STANDARDS LABORATORY

Certification No: 120941

SUBMITTED BY:

Customer: Pinnacle Plumbing
915 Route 9 North
Unit 2
Bayville, NJ 08721

Attn: Laura
P.O. #: Verbal

Manufacturer: MacArthur
Description: Back Flow Test Kit
Serial No: 356950
Customer Ref:
Range: 0 - 15 P.S.I.D.
Accuracy: +/- .2 P.S.I.D. DESC
Pre-Cal: IN-SPEC **Final:** IN-SPEC

STANDARD TRACEABILITY REPORT

Unit under test (UUT) conforms to present requirements of MIL-STD 45662A and ANSI/NCSL Z540-1-1994, PART II. Calibration is traceable to N.I.S.T. and is within manufacturers specifications, unless noted.

STANDARDS USED	N.I.S.T. Traceability	Standard Due Date
Description		
Crystal Digital Gauge	475-12791	3/22/2019

CALIBRATION DATA

Standard P.S.I.D.	UUT As Rcvd P.S.I.D.	UUT As Left P.S.I.D.	Min	Max
7.0	7.0	7.0	6.8	7.2
5.0	5.1	5.1	4.8	5.2
2.0	2.0	2.0	1.8	2.2
1.0	1.0	1.0	0.8	1.2

Temperature: 69 Degrees F
Humidity: 21 % RH
Void Seals: 0

Date Tested: 12/27/2018
Date Due: 12/27/2019
Certified By: Eric Stecker
Technician
Approved By: Amy Stecker
Quality Control

Amy Stecker

ASSE International

18927 Hickory Creek Drive, Suite 220
Mokena, Illinois 60448

Ph: 708.995.3019
http://www.asse-plumbing.org

Shawn C. Forlenza
915 Rt 9N
Unit 2
Bayville, NJ 08721

Certification #: 15519

Congratulations on becoming ASSE Certified!

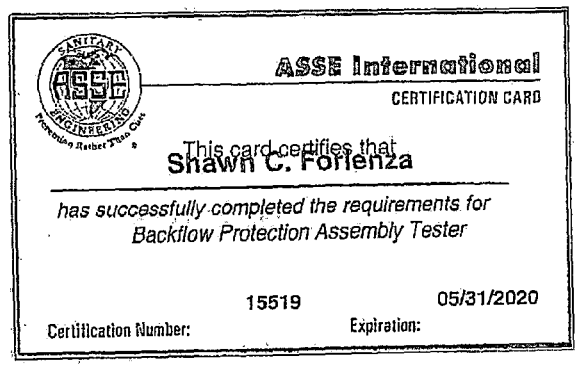
Attached is your ASSE backflow prevention certification card. Take careful notice of the expiration date on the card; you must renew your certification with ASSE International by that date. Notification will be mailed to you at least 30 days prior to your certification expiration.

Please note that being ASSE Certified does not mean that you are a member of ASSE International. However, if you are not currently a member, we strongly encourage you to join.

As a member of ASSE International, you will belong to an organization represented by all disciplines of the plumbing and mechanical industries, including contractors, engineers, inspectors, journeymen, apprentices, manufacturers, etc. Together you'll form a platform to receive, understand and solve industry problems relating to standards, codes, engineering and business. Our mission is to continually improve the performance, reliability and safety of plumbing and mechanical systems through our professional qualifications standards, professional certification, product performance standards and product listing programs. It is through the support and involvement of ASSE International members that we as an organization can continue to grow and promote the importance of our motto, "Prevention Rather Than Cure."

On a local level, members are able to attend their chapter's monthly meetings, participate in chapter outings, serve on chapter boards and receive local chapter publications. On a national level, members are eligible to participate in national committees, vote at Annual Meetings and receive free subscriptions to ASSE International's publications *(Backflow Prevention & Plumbing Standards (BPPS)* magazine and *eNewsletter).* Members are also entitled to discounts on publications published by ASSE International and other reciprocating organizations.

Rates are half-price for the first year of new membership. If you would like to become a member today, or if you would like further information about ASSE International, please visit http://www.asse-plumbing.org or call (708) 995-3019.



ASSE International
CERTIFICATION CARD

This card certifies that
Shawn C. Forlenza

has successfully completed the requirements for
Backflow Protection Assembly Tester

Certification Number: 15519 Expiration: 05/31/2020

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Exam. of Master Plumbers

HAS LICENSED

SHAWN C. FORLENZA
T/A PINNACLE PLBG & HTG INC
915 Rt.9 N Unit 2
Bayville NJ 08721

FOR PRACTICE IN NEW JERSEY AS A(N): Master Plumber

05/15/2019 TO 06/30/2021
VALID

36BI01050800
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Board of Exam. of Master Plumbers
P.O. Box 45008
Newark, NJ 07101

PLEASE DETACH HERE

SHAWN C. FORLENZA

EXPIRATION DATE 2021

YOUR LICENSE/REGISTRATION/CERTIFICATE NUMBER IS 36BI 01050800 . PLEASE USE IT IN ALL CORRESPONDENCE TO THE DIVISION OF CONSUMER AFFAIRS. USE THIS SECTION TO REPORT ADDRESS CHANGES. YOU ARE REQUIRED TO REPORT ANY ADDRESS CHANGES IMMEDIATELY TO THE ADDRESS NOTED BELOW.

Board of Exam. of Master Plumbers
P.O. Box 45008
Newark, NJ 07101

PRINT YOUR NEW **ADDRESS OF RECORD** BELOW.
YOUR ADDRESS OF RECORD IS THE ADDRESS THAT WILL PRINT ON YOUR LICENSE/REGISTRATION/CERTIFICATE AND IT MAY BE MADE AVAILABLE TO THE PUBLIC.

HOME ☐
BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

PRINT YOUR NEW **MAILING ADDRESS** BELOW.
YOUR MAILING ADDRESS IS THE ADDRESS THAT WILL BE USED BY THE DIVISION OF CONSUMER AFFAIRS TO SEND YOU ALL CORRESPONDENCE.

HOME ☐
BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

If the law governing your profession requires the current license/registration/certificate to be displayed, it should be within reasonable proximity of your original license/registration/certificate at your principal office or place of business.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 8/6/19
Control #
Date Issued
Permit # 18-3471+G

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

Block 671 Lot 1.01 Qualification Code

Work Site Location 56 CHAMBERSBRIDGE RD.

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Tel. 484 419-1200 e-mail

Address 50 E WYNNWOOD RD. SUITE 200 WYNNWOOD PA 19096

Contractor: PINNACLE PLUMBING & HEATING INC. (street / municipality) Tel. 732 818-0508 (zip code)

Address 915 RT. 9 N UNIT 2 e-mail

BAYVILLE, NJ. 08721

Contractor License No. 10508 Exp. Date 6.30.2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 81-0591940 FAX: 732 504-7728

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size 2" Public Water Private Well

Est. Cost of Plumbing Work $ 3000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 10-1-19
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar 2" Flanged Meter Spacer	8-12-19			WW
TCO				
Final	9-25-19		9-30-19	JR

* update main Backflow & Test Report

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 sign/Contractor sign and seal here:

Print name here: Shawn Pinnacle

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

WATER LINE FOR UNIT 43

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
X	Water Service Connection	
	Stacks	
	Other	
	Administrative Surcharge	$
	Minimum Fee	$
	State Permit Surcharge Fee	$
	TOTAL FEE	$

U.C.C. F130 (rev. 11/09) 1. White = Inspector 2. Canary = Office Copy 3. Pink = Office Copy 4. Gold = Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Trader Joe's

Date Received / Control # 6/27/17

Date Issued / Permit # 18-3471+F

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

Block 671 Lot 1.01 Qualification Code

Work Site Location Space 43
56 Chamberbridge Rd. Brick NJ

Owner in Fee: Federal Realty

Tel. 973-933-9382 e-mail

Address 50 E Wynnewood Wynnewood Pa
street municipality zip code

Contractor: Pinnacle Plumbing Heating Inc. Tel. 732 918-0500

Address 915 Rt-9 N Unit 2 e-mail
Bayville, N.J. 08721

Contractor License No. 10500 Exp. Date 6.30.2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 81-0591940 FAX: 732 5247428

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size 4" Public Sewer 4" Private Septic

Water Service Size 1" Public Water X Private Well

#5800-

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 sign/Contractor sign and seal here:

Print name here: Stanley Forlenza

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Run Sewer Lateral for unit 43

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
2	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
4	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
1	Sewer Connection	
	Water Service Connection	
	Stacks	
4	Other Condensate	

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial - Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 5-22-17
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[X] CO [ ] CCO [ ] CA
Date: 10-1-19
Approved by:

MIF 4/15/15

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Slab				
Rough				
Water				
Sewer			7-31-19	
~~Fixtures~~ Partial Sewer			7-30-19	
Gas Equipment				
Gas Piping			7-10-19	
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			9-25-19	

* paint Altered Black Existing
* ok Back Fill to Tmp V
Sewer stubbed out to Adjacent Store (ok) V

PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 12/21/18
Control #

Date Issued
Permit # 18-

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

Block 671 Lot 1.01 Qualification Code

Work Site Location Ethan Allen
56 Chambersbridge Rd. Brick

Owner in Fee: National Maintenance & Build out LLC

Tel. (215) 442-5380 e-mail

Address 48 Vincent Circle, Ivyland, PA 18974
(street, municipality)

Contractor: Pinnacle Plumbing and Heating Tel. (732) 818-0508
(zip code)

Address 915 Rt.9 N Unit 2 e-mail info@pinnacle1plumbing.co
Bayville, NJ 08721

Contractor License No. 10508 Exp. Date 06/30/2019

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. 810591940 FAX: (732) 504-7428

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer X Private Septic

Water Service Size Public Water X Private Well

Est. Cost of Plumbing Work $ 1,750

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 12-21-18
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 10-10-19
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			9-25-19	

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 sign/Contractor sign and seal here:

Print name here: Shawn Forlenza

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Cut and Cap of Sewer and Water

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
X	Sewer Connection	
X	Water Service Connection	
	Stacks	
1	Other Cut & Cap.	

COMMERCIAL

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

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

Shell

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

OLD ST. PAUL

Date Received 6/27/17
Control #

Date Issued
Permit # 19-3471 +F

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

Block 601 Lot 1.01 Qualification Code

Work Site Location 510 Chambersbridge Rd. Brick NJ
Space 943

Owner in Fee: Federal Realty

Tel. 973- e-mail Ncain@FederalRealty

Address 50 E. Wynnewood Rd. Wynnewood Pa

Contractor: National Maintenance and Building Tel. 215-442-5390
(street, municipality, zip code)

Address 1044 Ruinski Rd. e-mail JKorney@Nmbdc.com
Ivyland Pa 19096

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New *OR* [ ] Modification to Existing *OR* [ ] Conversion *OR* [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 5,000.00

Fuel Storage Tank:
Fuel Type: [ ] Flammable *OR* [ ] Combustible
Capacity

Fire Alarm System: [ ] New *OR* [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New *OR* [ ] Existing
Location of Main Control Valve:

4/19/19 MFF

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial - Underslab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: 4/26 Approved by: RD
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 4-26-19
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 10-7-19
Approved by:

INSPECTIONS	Dates (Month/Day)			
Type:	Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				4/19/19
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.

Applicant/Contractor sign here:

Print name Here: Aaron Fristo

D. TECHNICAL SITE DATA [ ] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		$
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices Exit Lights	8	
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other Roof top Units	4	

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

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OLD Starbucks space

Vanilla Bean

Date Received 4/19/19
Control #

Date Issued
Permit # 18-3471+B

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

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

Block 671 Lot 1.01 Qualification Code

Work Site Location Space 43 56 Chambers bridge Rd Brick NJ

Owner in Fee: Federal Realty

Tel. 484-419-1200 e-mail

Address 50 E Wynnewood (street) Wynnewood PA (municipality) (zip code)

Contractor: Premier Fire Systems Tel. 8484485512

Address 2 Ilene Ct. e-mail

Hillsborough, NJ 08844

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P00647

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date 4/19

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223828273 FAX: 7322621780

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present ____ Proposed ____

Constr. Class: Present ____ Proposed ____

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 1,200.-

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing

Location of Main Control Valve: Tenant Space

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date Approved by:
[X] Fire Protection Plans Approved
Date 4/11/19 Approved by: KA
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 4/15/19
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 10-18
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
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.

Applicant/Contractor sign here:

Print name here: Mike Kelly

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Canopy

Water Supply Source

Method of Alarm/Suppression System Supervision Existing

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		$
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	0	
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)	4	
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		

COMMERCIAL

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

U.C.C. F140 (rev. 02/11)
Internet version

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

43A

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Vinyl Box

Date Received 4/9/19
Control #
Date Issued
Permit # 18-3471+D

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

Block 6771 Lot 1.01 Qualification Code

Work Site Location ~~Trader Joes~~ Vanilla Box - Brick Plaza Space 43 Former Ethan ALLEN
110 Brick Plaza Brick, PA

Owner in Fee: Federal Reality

Tel. ____ e-mail

Address 50 E. Wynnewood ave. Wynnewood, PA
street municipality

Contractor: Electronic Security Solutions Tel. (215) 277-5248
zip code

Address 5115 Campus Drive e-mail tcapie@essfiresys.com
Plymouth Meeting, PA 19462

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P01299

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. 34BF000377 Exp. Date 10/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 25-189772 FAX: (215) 277-5263

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present M Proposed M

Constr. Class: Present 11B Proposed 11B

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 4,500

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [X] New OR [ ] Existing
Location of Panel: Sprinkler Room

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

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.

Applicant/Contractor sign here:

Print name here: Tom Capie

[X] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[X] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	5	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)	3	
Other Devices facp/ann	2	
TOTAL	10	
Suppression Systems		
Fire Pump ____ GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

COMMERCIAL

4/9/19

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: ____ Approved by: ____
[X] Fire Protection Plans Approved
Date: 3/8/19 Approved by:
Joint Plan Review Required:
[ ] Bldg [ ] Elec [ ] Plumb [ ] Elev

SUBCODE APPROVAL for PERMIT
Date: 3-7-19
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 10-7-19
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			10/4/19	LS
Other				

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

Shell only Spec 4BA

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 2/19/19
Control #
Date Issued
Permit # 18-3477+A

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

Block 671 Lot 101 Qualification Code OLD
Work Site Location Block Plaza Space 4BA (Eastern Plaza)
Owner in Fee: Federal Realty
Tel. 484 419 1008 e-mail
Address 50 East Wynnewood PA 19096
street municipality state zipcode
Contractor: Premier Fire Systems Tel. 848 4985572
Address 2 Wells Ct e-mail
Hillsborough NJ 08844
Fire Protection Equipment, NJ Div of Fire Safety Permit No. 0006647
Fire Protection Equipment, NJ Div of Fire Safety Installer No.
Fire Alarm Contractor No. Exp. Date 4/19
Home Improvement Contractor Registration No. or Exemption Reason
Federal Emp. ID No. 223828275 FAX: 732 2621780

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____
Constr. Class: Present _____ Proposed _____
Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement
Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other _____
Location: _____
Total Cost of Fire Protection Work $ 22,000.-

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity _____
Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel: _____
Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve: Utility Room

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.
Applicant/Contractor sign here:
Print name Here: Mike Kelly
[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: New system for Black Box
Water Supply Source
Method of Alarm/Suppression System Supervision Flow Tamper

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	4	
Supervisory Devices (i.e., tampers, low/high air)	2	
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices _____		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)	121	
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other _____		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other _____		

Administrative Surcharge $ _____
Minimum Fee $ _____
State Permit Surcharge Fee $ _____
TOTAL FEE $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial - Underslab Utilities Approved
Date: _____ Approved by: _____
[ ] Fire Protection Plans Approved
Date: 2/26 Approved by: DO
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 2-15-19
Approved by: KR
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 10-2-19
Approved by: JO

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			10-2-19	MS
Other _____				

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FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 2/19/19
Control #
Date Issued
Permit # 18-3471+B

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

Block 671 Lot 1.01 Qualification Code

Work Site Location Ethan Allen/Halloween Store - Brick Plaza
110 Brick Plaza Brick, NJ

Owner in Fee: Federal Realty Investment Trust

Tel. (301) 998-8100 e-mail

Address 1626 East Jefferson Street Rockville, MD 20852
street municipality zip code

Contractor: Electronic Security Solutions LLC Tel. (215) 277-5248

Address 5115 Campus Drive e-mail kfreeman@essfiresys.com
Plymouth Meeting, PA 19462

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P01299

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. 34BF000377 Exp. Date 10/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 25-189772 FAX: (215) 277-5263

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present M Proposed M

Constr. Class: Present 11B Proposed 11B

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 1,000

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [X] New OR [ ] Existing
Location of Panel: Electrical Room

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

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.

Applicant/Contractor sign here:

Print name here: Thomas Capie

D. TECHNICAL SITE DATA [X] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK: Starlink
Water Supply Source Fire Alarm System
Method of Alarm/Suppression System Supervision dialer only

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[X] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices Dialer	1	
TOTAL	1	
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Fire Protection Plans Approved
Date: 2-19-19 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 2-19-19
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

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

Interior cleanout only
for former Eatka Allen

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 12/21/18
Control #
Date Issued
Permit # 18-3471

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

Block 6701 Lot 1.01 Qualification Code
Work Site Location 56 Chamberlain Bridge RD

Owner In Fee: Federal Realty
Tel. 484 419-1268 e-mail
Address

Contractor: Premier Fire Systems (street, municipality, zip code) Tel. 848 448 5512
Address 2 Tiene Ct Bldg 21 e-mail
Hillsborough NJ 08844

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P00647
Fire Protection Equipment, NJ Div of Fire Safety Installer No.
Fire Alarm Contractor No. Exp. Date 4/19
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Emp. ID No. 223828273 FAX: 732 262 1780

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed
Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement
Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other
Location:
Total Cost of Fire Protection Work $ 8,000.-

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [~~]~~ Existing
Location of Panel:
Fire Suppression/Standpipe System:
[ ] New OR [~~]~~ Existing
Location of Main Control Valve:
8,000.- Interior Rm

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.

Applicant/Contractor sign here:
Print name here: Mike Kelly

D. TECHNICAL SITE DATA [ ] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK: Turn heads up.
Water Supply Source
Method of Alarm/Suppression System Supervision Existing

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		$
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	0	
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)	98	
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		
Administrative Surcharge		$
Minimum Fee		$
State Permit Surcharge Fee		$
TOTAL FEE		$

OBSERVED Fire Alarm - Loose Mounted

SUBCODE SUMMARY (Office use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: Approved by:
Spirit Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] COO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

C.C. F140 (rev. 02/11) Internet version

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

PREMIER FIRE SYSTEMS, LLC.

2 Ilene Court
Hillsborough, NJ 08844
(908) 874-4414
FAX (908) 874-4484

Date: 11/18/18
Re: Ethan Allen-Brick Plaza
Brick, NJ

Gentlemen

In reference to the above, we have been hired to address the concerns with the Fire Sprinkler System that is to remain in service for the above. The ceilings for the above are being removed and we will be removing the Pendant sprinklers in the ceiling line and returning them to Upright position keeping the same 130 Square foot maximum coverage area as per NFPA-13 for Storage/Mercantile as the pendant system has currently.

Please feel free to call me direct at 848-448-5512 if you have concerns or questions.

Sincerely
Mike Kelly, PM/PFS

5/22/15

(1) 200 – 2hr Esther Allen
Hydro

43A

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Vinous Box

Date Received 4/9/19
Control #
Date Issued
Permit # 18-3471 +D

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

Block 677 Lot 1.01 Qualification Code

Work Site Location ~~Trader Joes~~ Vanilla Box - Brick Plaza Space 43 Former Ethan ALLEN

110 Brick Plaza Brick, PA

Owner in Fee: Federal Reality

Tel. e-mail

Address 50 E. Wynnewood ave. Wynnewood, PA
(street) (municipality)

Contractor: Electronic Security Solutions Tel. (215) 277-5248
(zip code)

Address 5115 Campus Drive e-mail tcapie@essfiresys.com

Plymouth Meeting, PA 19462

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P01299

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. 34BF000377 Exp. Date 10/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 25-189772 FAX: (215) 277-5263

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present M Proposed M

Constr. Class: Present 11B Proposed 11B

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 4,500

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible

Capacity

Fire Alarm System: [X] New OR [ ] Existing

Location of Panel: Sprinkler Room

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve:

2/19/19

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[X] Fire Protection Plans Approved

Date: 3/8/19 Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 3-7-19

Approved by: (CR)

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS	Dates (Month/Day)			
Type:	Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
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.

Applicant/Contractor sign here:

Print name here: Tom Capie

[X] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[X] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	5	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)	3	
Other Devices facp/ann	2	
TOTAL	10	
Suppression Systems		
Fire Pump ___ GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		

COMMERCIAL

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

U.C.C. F140 (rev. 02/11) Internet version

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

DR 342725812

Date Received 2/19/19
Control #
Date Issued
Permit # 18-3471 +A

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

Block 601 Lot 1.01 Qualification Code

Work Site Location 56 CHAMBERS BRIDGE ROAD, BRICK NJ 08723

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Tel. (301) 998-8173 e-mail

Address P.O. BOX 92129 (street) SOUTHLAKE (municipality) 76092 (zip code)

Contractor: M.J.M. ELECTRIC INC Tel. (732) 223-9732

Address 7 SOUTH TAMARACK DRIVE e-mail mike@mjmelectricnj.com

BRIELLE, NJ 08730

Contractor License No. 12715B Exp. Date 3/21

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 22-3485744 FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present M Proposed M

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co. SEP

Est. Cost of Elec. Work $ 15,000

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 sign/Contractor sign and seal here:

Print name here: Michael J McKeever

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicar

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Interior shell cores

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
0		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	
		KW Transformer/Generator	
1	600	AMP Service	
1	600	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	200	AMP Service	

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[✓] Electric Plans Approved

Date: 1/24/19 Approved by: PJC

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 1/24/19

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [X] CA

Date: 9/12/19

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			5-15-19	MM
Final			9/12/19	PJC
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued			5-15-19	MM
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

TRADER JOES

Date Received: 6/27/19
Control #:
Date Issued:
Permit #: 18-3471+F

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

Block 601 Lot 1.01 Qualification Code

Work Site Location Space 43
Ste Chamberlain Bridge Rd Brick NJ

Owner in Fee: Federal Realty

Tel. (973) 467-0967 e-mail

Address 50 E Wynnewood Wynnewood Pa
street municipality zip code

Contractor: MJM Electric Inc Tel. (732) 859-0314

Address 7 South Tamarack Dr. e-mail
Brielle NJ 08730

Contractor License No. 12715B Exp. Date 3/21

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. 22-3485744 FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 119,000 —

MJF 6/19/19

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 sign/Contractor sign and seal here:

Print name here: Michael J McKeever

[x] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Electric DIST, HAC Conc / shell

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
4		Receptacles	
4		Switches	
		Detectors	
		Light Poles	
1		Motors—Fract. HP	
8		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	
4	2-7.5TON	KW Central A/C Unit 1-15TON 1-10TON	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
2	1-75 1-225	KW Transformer~~/Generator~~	
		AMP Service	
1	600	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[✓] Electric Plans Approved
Date: 7/3/19 Approved by: PJC
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 7/3/19
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 9/12/19
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			9/12/19	PJC
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

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

Kraftwood Shell

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #
Date Issued
Permit # 18-3471+A

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

Block 671 Lot 1.01 Qualification Code ____

Work Site Location Chambers Bridge Rd & Rt 70 (Forme-Ethan Allen) Brick Plaza, Brick NJ

Owner in Fee: Federal Realty Investment Trust

Tel. 484 419-1208 e-mail ncain@federalrealty.com

Address 50 E. Wynnewood Rd (street) Wynnewood (municipality) PA (zip code) 19096

Contractor: TBD Tel. ____

Address ____ e-mail ____

Fire Protection Equipment, NJ Div of Fire Safety Permit No. ____

Fire Protection Equipment, NJ Div of Fire Safety Installer No. ____

Fire Alarm Contractor No. ____ Exp. Date ____

Home Improvement Contractor Registration No. or Exemption Reason ____

Federal Emp. ID No. ____ FAX: ____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present M Proposed M

Constr. Class: Present IIB Proposed IIB

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other ____

Location: ____

Total Cost of Fire Protection Work $ —

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity ____

Fire Alarm System: [ ] New OR [X] Existing
Location of Panel: ____

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve: ____

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.

Applicant/Contractor sign here: [signature]

Print name Here: Eric Wagner AIA

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Exstg systems to remain

Water Supply Source

Method of Alarm/Suppression System Supervision ____

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks	____	____
Alarm Systems		
[ ] System	letters in file	
[ ] 110v Interconnected	attached	
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	____	____
Supervisory Devices (i.e., tampers, low/high air)	____	____
Signaling Devices (i.e., horn/strobes, bells)	____	____
Other Devices ____	____	____
TOTAL	____	____
Suppression Systems		
Fire Pump ____ GPM Type ____	COMMERCIAL	____
Dry Pipe/Alarm Valves	____	____
Pre-action Valves	____	____
Sprinkler Heads (Dry and Wet)	____	____
Standpipes	____	____
Pre-engineered Systems		
Wet Chemical	____	____
Dry Chemical	____	____
CO_2 Suppression	____	____
Foam Suppression	____	____
FM200 Suppression	____	____
Other ____	____	____
Other Systems		
Kitchen Hood Exhaust System	____	____
Smoke Control System	____	____
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid	____	____
Fireplace Venting/Metal Chimney	____	____
Other ____	____	____

Administrative Surcharge $ ____
Minimum Fee $ ____
State Permit Surcharge Fee $ ____
TOTAL FEE $ ____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial - Underslab Utilities Approved
Date: ____ Approved by: ____
[X] Fire Protection Plans Approved
Date: 2.1.19 Approved by: JW
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 2-19
Approved by: CR

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: ____
Approved by: ____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System	____	____	____	____
Suppression Sys.	____	____	____	____
Standpipe	____	____	____	____
Fire Pump	____	____	____	____
Pre-Eng. System	____	____	____	____
Mechanical	____	____	____	____
Smoke Control	____	____	____	____
TCO	____	____	____	____
Flam/Combust Tanks	____	____	____	____
Fireplace Venting	____	____	____	____
Final	____	____	____	____
Other ____	____	____	____	____

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 12/12/18
Date Issued / Permit # 18-3471

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

Block 607 Lot 1.01 Qualification Code

Work Site Location 56 Chambers Bridge RD

Owner in Fee: Federal Realty

Tel. (484) 419-1208 e-mail

Address
street municipality zip code

Contractor: MJM Electric Inc Tel. (732) 854-0314

Address 7 South Tamarack Dr e-mail mike@mjmelectricnj.com
Brick NJ 08730

Contractor License No. 12765B Exp. Date 3/21

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. 22-3485799 FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 300,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[✓] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 11/26/18
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 2/5/19
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			2-14-19	MK
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

I hereby 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 sign/Contractor sign and seal here:

Print name here: Michael J McKeever

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Electric / Safe Off

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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/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	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

COMMERCIAL

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

U.C.C. F120 (rev. 11/09) 1 White = Inspector Copy 2,Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

SHELL

Date Received 2/19/19
Control #
Date Issued
Permit # 18-3471

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

Block 671 Lot 1.01 Qualification Code [redacted]

Work Site Location 56 CHAMBERS BRIDGE ROAD, BRICK NJ 08723

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Tel. (301) 998-8173 e-mail

Address P.O. BOX 92129 (street) SOUTHLAKE (municipality) 76092 (zip code)

Contractor: NATIONAL MAINTENANCE & BUILD OUT CO Tel. (215) 442-5380

Address 1044 PULINSKI ROAD Lou e-mail jkornsey@nmboc.com Joe

IVYLAND, PA 18974

Contractor License No. or Builder Registration No. 13VH07302100 Exp. Date 03/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 300020638 FAX:

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.

Sign here:

Print name here: JOE KORNSEY

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Landlord Shell

[redacted]

JOB SUMMARY (Office Use Only) Ethan Allen Frame 5/20/19

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	01/25/19	WCK
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 01/25/19
Approved by: WCK

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 09/11/19
Approved by: WCK

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing Rear loading dock 62'			4/25/19	
Footing Bonding				
Foundation				
Slab 10'x42' footer & footing common area			4/10/19	
Frame Partial			4/24/19	
Insulation column line D-10-10			5/7/19	
Frame column line D-12 to 10			5/7/19	
balance insulation			8/2/19	
~~Energy~~ Slab rear loading dock			5/7/19	
Mechanical				
~~ICO~~ Frame 2 walls market plans			5/22/19	
Rear canopy frame/sheathing 7/18/19				
Final vanilla box Spec 43			9/10/19	

B. BUILDING CHARACTERISTICS

Use Group Present M Proposed M

No. of Stories 1

Height of Structure 22 ft.

Area — Largest Floor 2520 sq. ft.

New Bldg. Area/All Floors sq. ft.

Volume of New Structure cu. ft.

Max. Live Load 120

Max. Occupancy Load 42

Constr. Class Present II B Proposed II B

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Rehabilitation $ 30,000
3. Total (1+ 2) $ 30,000 0

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence ______ Height (exceeds 6')
- [ ] Sign ______ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall ______ Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other
- [ ] Demolition

FEE (Office Use Only)
$

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

U.C.C. F110 (rev. 11/09)

Applicant: When submitting this form to your Local Construction Code Enforcement

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 671 Lot 1.01 Qualification Code

Work Site Location 56 Chambers Bridge Ave (Space 43A)

Owner in Fee: Federal Realty

Tel. 610·715·0342 e-mail NCAIN@federalrealty.com

Address 11626 E. Jefferson St Rockville MD 20852
street municipality zip code

Contractor: TBD Tel.

TBD

Address e-mail

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. FAX:

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required
[ ] All
[ ] Footings/Foundations
[ ] Structural/Framework
[ ] Exterior
[ ] Interior

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed

No. of Stories

Height of Structure ft.

Area — Largest Floor sq. ft.

New Bldg. Area/All Floors sq. ft.

Volume of New Structure cu. ft.

Max. Live Load

Max. Occupancy Load

Constr. Class Present Proposed

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $ 30,000
3. Total (1+ 2) $

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.

Sign here:

Print name here: Eric Wagner

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Interior Demo
(former Ethan Allen Space)

COMMERCIAL

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence Height (exceeds 6')
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Retaining Wall Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other
[ ] Demolition

FEE (Office Use Only)
$

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #
Date Issued
Permit #

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

Block 671 Lot 1.01 Qualification Code

Work Site Location 56 Chambers Bridge (Space 43A)

Owner in Fee: Federal Realty

Tel. 610 715.0342 e-mail NCAIN@federalrealty.com

Address 11626 E. Jefferson St Rockville MD 20852
street municipality zip code

Contractor: TBD Tel.

Address e-mail

Contractor License No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

TBD

B. ELECTRICAL CHARACTERISTICS

Use Group Present M Proposed M

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as VACANT Utility Co.

Est. Cost of Elec. Work $ 5,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

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

C. CERTIFICATION IN LIEU OF OATH

I hereby 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 sign/Contractor sign and seal here:

Print name here: Eric Wagner

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Selective Interior Demo

COMMERCIAL

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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/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	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #

Date Issued
Permit #

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

Block 671 Lot 1.01 Qualification Code

Work Site Location 56 Chambers Bridge Ave (SPACE 434)

Owner in Fee: Federal Realty

Tel. 610 715-0342 e-mail ncain@federalrealty.com

Address 1626 Jefferson St. Rockville MD 20852
street municipality zip code

Contractor: TBD Tel.

TBD

Address e-mail

Contractor License No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. PLUMBING CHARACTERISTICS

Use Group Present M Proposed M

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 5,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

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 sign/Contractor sign and seal here:

Print name here: Eric Wagner

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Interior Demolition

COMMERCIAL

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #

Date Issued
Permit #

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

Block 671 Lot 1.01 Qualification Code _____

Work Site Location 56 CHAMBERS BRIDGE Rd. (SPACES 434)

Owner in Fee: FEDERAL REALTY

Tel. 610 715-0342 e-mail NCAIN@FEDERALREALTY.com

Address 1626 E. JEFFERSON ST, Rockville, MD 20852
street municipality zip code

Contractor: TBD Tel. _____

Address _____ e-mail _____

TBD

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____

Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____

Fire Alarm Contractor No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present M Proposed M

Constr. Class: Present _____ Proposed _____

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other _____

Location: _____

Total Cost of Fire Protection Work $ 7,500

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity _____

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel: _____

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve: _____

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.

Applicant/Contractor sign here: _____

Print name here: Eric Wagner

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision _____

COMMERCIAL

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices _____		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other _____		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other _____		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: _____ Approved by: _____
[ ] Fire Protection Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other _____				

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #
Date Issued
Permit # 18-3471+A

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

Block 671 Lot 1.01 Qualification Code

Work Site Location Chambers Bridge Road & Route 70 (Space 43A) Former Ethan Allen Brick Plaza, Brick, NJ 08723

Owner in Fee: Federal Realty Investment Trust

Tel. (484) 419-1208 e-mail ncain@fedealrealty.com

Address TBD
street municipality zip code

Contractor: Tel.

Address e-mail

Contractor License No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present M Proposed M

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Unoccupied Utility Co. JCP&L

Est. Cost of Elec. Work $ 15,000

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 sign/Contractor sign and seal here:

Print name here: Eric L Wagner AIA

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Landlord Shell Work incldg Elec Service relocation

QTY.	SIZE	ITEMS
0		Lighting Fixtures
0		Receptacles
0		Switches
0		Detectors
0		Light Poles
0		Motors—Fract. HP
0		Emergency & Exit Lights
0		Communications Points
0		Alarm Devices/F.A.C. Panel
0		
0		TOTAL NUMBERS
0		Pool Permit/with UW Lights
0		Storable Pool/Spa/Hot Tub
0	0	KW Elec. Range/Receptacle
0	0	KW Oven/Surface Unit
0	0	KW Elec. Water Heater
0	0	KW Elec. Dryer/Receptacle
0	0	KW Dishwasher
0	0	HP Garbage Disposal
0	0	KW Central A/C Unit
0	0	HP/KW Space Heater/Air Handler
0	0	KW Baseboard Heat
0	0	HP Motors 1/+ HP
0	0	KW Transformer/Generator
1	600	AMP Service
1	600	AMP Subpanels
0	0	AMP Motor Control Center
0	0	KW Elec. Sign/Outline Light
1	200	AMP Service

COMMERCIAL

FEE (Office Use Only)

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial Underslab Utilities Approved
Date: Approved by:
[✓] Electric Plans Approved
Date: 1/15/19 Approved by: AJC
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 1/15/19
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

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

U.C.C. F120 (rev. 11/09)
Internet version

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received Control # 12/21/18

Date Issued Permit # 18-3471

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

Block 6711 Lot 1.01 Qualification Code

Work Site Location 58 Chamber Bridge RD

Owner in Fee: Federal Realty

Tel. 484-419-1208 e-mail

Address

street municipality zip code

Contractor: National Maintenance + Build out Tel. 215-442-5380

Address 484 Vicent CR. e-mail

Ivyland PA. 18974

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. FAX:

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	12/19/18	KEM
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 12/19/18
Approved by: KEM

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

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

B. BUILDING CHARACTERISTICS

Use Group Present Proposed

No. of Stories

Height of Structure ft.

Area — Largest Floor sq. ft.

New Bldg. Area/All Floors sq. ft.

Volume of New Structure cu. ft.

Max. Live Load

Max. Occupancy Load

Constr. Class Present Proposed

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $ 30,000.00
2. Rehabilitation $
3. Total (1+ 2) $

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.

Sign here:

Print name here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

national clean out
for Finn Allen

COMMERCIAL

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence Height (exceeds 6')
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Retaining Wall Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other
[ ] Demolition

FEE (Office Use Only)
$

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 12/12/18
Date Issued / Permit # 18-3471

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

Block 671 Lot 1.01 Qualification Code _____

Work Site Location 56 Chambers Bridge RD

Owner in Fee: Federal Realty

Tel. (484) 419-1208 e-mail _____

Address _____ (street) _____ (municipality) _____ (zip code)

Contractor: MJM Electric Inc Tel. (732) 859-0314

Address 7 South Tamarack Dr e-mail mike@mjmelectricnj.com
Brielle NJ 08730

Contractor License No. 12715-B Exp. Date 3/21

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. 22-3485744 FAX: (_____) _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ Does, cw

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[✓] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: _____ Approved by: _____
[ ] Electric Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 12/26/18
Approved by: _____
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

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

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____
Annual Pool Inspection _____ _____ _____ _____
Date of Grounding and Bonding Certification _____

C. CERTIFICATION IN LIEU OF OATH

I hereby 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 sign/Contractor sign and seal here: _____

Print name here: Michael J McKeever

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Electric / SAFE OFF

COMMERCIAL

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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/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	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
		_____	

Administrative Surcharge $ _____
Minimum Fee $ _____
State Permit Surcharge Fee $ _____
TOTAL FEE $ _____

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 12/21/18

Date Issued / Permit # 18-3471

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

Block 6711 Lot 1.01 Qualification Code

Work Site Location Ethan Allen
56 Chambersbridge Rd. Brick

Owner in Fee: National Maintenance & Build out LLC

Tel. (215) 442-5380 e-mail

Address 48 Vincent Circle, Ivyland, PA 18974
(street, municipality, zip code)

Contractor: Pinnacle Plumbing and Heating Tel. (732) 818-0508

Address 915 Rt.9 N Unit 2 e-mail info@pinnacle1plumbing.co
Bayville, NJ 08721

Contractor License No. 10508 Exp. Date 06/30/2019

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. 810591940 FAX: (732) 504-7428

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer X Private Septic

Water Service Size Public Water X Private Well

Est. Cost of Plumbing Work $ 1,750

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 12-27-18
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type:				
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LP Gas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

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 sign/Contractor sign and seal here: Shawn Forlenza

Print name here: Shawn Forlenza

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Cut and Cap of Sewer and Water

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
X	Sewer Connection	
X	Water Service Connection	
	Stacks	
1	Other Cut & Cap.	

COMMERCIAL

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 2/19/19
Control #
Date Issued
Permit # 18-3471+B

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

Block 6071 Lot 1.01 Qualification Code

Work Site Location Ethan Allen/Halloween Store - Brick Plaza
110 Brick Plaza Brick, NJ

Owner in Fee: Federal Realty Investment Trust

Tel. (301) 580-0116 e-mail

Address 1626 East Jefferson Street (street) Rockville, MD (municipality) 20852 (zip code)

Contractor: ELECTRONIC SECURITY SOLUTIONS Tel. (215) 277-5248

Address 5115 Campus Drive e-mail tcapie@essfiresys.com
Plymouth Meeting, PA 19462

Contractor License No. 34BF000377 Exp. Date 10/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 25-189772 FAX: (215) 277-5263

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1,000

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 sign/Contractor sign and seal here:

Print name here: Keith Freeman

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
WIRELESS DIALER

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
1		DAILER	
1		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	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

RECEIVED
JAN 22 2019

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Electric Plans Approved 3 SETS
Date: 2/19/19 Approved by: DSC
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 2/19/19
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

Dates (Month/Day)

U.C.C. F120 (rev. 11/09)
Internet version

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 2/19/19
Control #
Date Issued
Permit # 18-3471+B

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

Block 671 Lot 1.01 Qualification Code

Work Site Location Ethan Allen/Halloween Store - Brick Plaza
110 Brick Plaza Brick, NJ

Owner in Fee: Federal Realty Investment Trust

Tel. (301) 580-0116 e-mail

Address 1626 East Jefferson Street (street) Rockville, MD (municipality) 20852 (zip code)

Contractor: ELECTRONIC SECURITY SOLUTIONS Tel. (215) 277-5248

Address 5115 Campus Drive e-mail tcapie@essfiresys.com
Plymouth Meeting, PA 19462

Contractor License No. 34BF000377 Exp. Date 10/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 25-189772 FAX: (215) 277-5263

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1,000

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 sign/Contractor sign and seal here:

Print name here: Keith Freeman

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
WIRELESS DIALER

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
1		DAILER	
1		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	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

RECEIVED
JAN 22 2019

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Electric Plans Approved SPECS,
Date: 2/19/19 Approved by: ASC
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 2/13/19
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

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

U.C.C. F120 (rev. 11/09)
Internet version

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 2/19/19

Date Issued / Permit # 18-3471+C

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

Block 671 Lot 1.01 Qualification Code

Work Site Location Chambers Bridge Rd & Rt 70
Brick Plaza Space 43A (Former Ethan Allen)

Owner in Fee: Federal Realty Investment Trust

Tel. Neil Cain 267-96-5239 e-mail ncain@federalrealty.com

Address

Contractor: NMBOC Jerkonsey Tel. 267-926-5239
(street / municipality / zip code)

Address 1044 Pulaski Rd. e-mail JKornseyenmboc.com
Ivyland, PA 18974

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. FAX:

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.

Sign here:

Print name here: Eric Wagner

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Submit supplemental plans to revise scope of current permit #18-3471
Sheets Added: A-3 & A-4

JOB SUMMARY (Office Use Only)

MFF 2/19/19

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[X] All	02/20/19	MAH
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator		
SUBCODE APPROVAL for PERMIT		
Date:	02/12/19	
Approved by:	MAH	
SUBCODE APPROVAL for CERTIFICATE		
[ ] CO [ ] CCO [X] CA		
Date:	09/11/19	
Approved by:	MAH	

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation Demising wall insulation			9/13/19	MH
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final Manual Box Stair 43			9/18/19	MH
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____

No. of Stories _____

Height of Structure _____ ft.

Area — Largest Floor _____ sq. ft.

New Bldg. Area/All Floors _____ sq. ft.

Volume of New Structure _____ cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $ _____
2. Rehabilitation $ 20,000
3. Total (1+ 2) $ _____

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [X] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$

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

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 6/26/19

Date Issued / Permit # 18-3471 +F

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

Block 671 Lot 1.01 Qualification Code

Work Site Location [illegible] - SPACE 43 - Former Ethan Allen
56 Chambersbridge Road Brick NJ

Owner in Fee: Federal Realty

Tel. 973-967-0967 e-mail

Address 50 E Wynnewood Pa
street municipality zip code

Contractor: National Maintenance and buildout Tel.

Address 1044 Pulaski Rd e-mail
Ivyland Pa 18974

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. FAX:

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.

Sign here:

Print name here: Joe Konsey

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
SPACE 43 Former Ethan Allen MEP Update And Structural

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

- [ ] No Plans Required
- [x] All 05/29/19 [illegible]
- [ ] Footings/Foundations
- [ ] Structural/Framework
- [ ] Exterior
- [ ] Interior

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 05/29/19
Approved by: [illegible]

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [x] CA
Date: 09/19/19
Approved by: [illegible]

MFF 4/19/19

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final Ethan Allen Space 43			9/6/19	[illegible]
Barrier-Free				

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)
$

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

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ ft.
Area — Largest Floor _____ sq. ft.
New Bldg. Area/All Floors _____ sq. ft.
Volume of New Structure _____ cu. ft.
Max. Live Load _____
Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $ _____
2. Rehabilitation $ _____
3. Total (1+ 2) $ ~~80,000~~ 81,000

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 12/21/18

Date Issued / Permit # 18-3471

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

Block 671 Lot 1.01 Qualification Code

Work Site Location 58 Chamber Bridge Rd

Owner in Fee: Federal Realty

Tel. 484-419-1208 e-mail

Address

Contractor: National Maintenance + Build out (street / municipality) Tel. 215-442-5380 (zip code)

Address 484 Vacant CR. e-mail

Wyland PA. 19974

Contractor License No. or Builder Registration No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. FAX:

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date / Initial

- [ ] No Plans Required
- [✓] All — 12/19/18 TEK
- [ ] Footings/Foundations
- [ ] Structural/Framework
- [ ] Exterior
- [ ] Interior

Joint Plan Review Required:

[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT

Date: 12/19/18

Approved by: TEK

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [✓] CA

Date: 09/16/19

Approved by: WBM

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final Vanilla Box Shell 43			9/16/19	PM
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____

No. of Stories

Height of Structure ft.

Area — Largest Floor sq. ft.

New Bldg. Area/All Floors sq. ft.

Volume of New Structure cu. ft.

Max. Live Load

Max. Occupancy Load

Constr. Class Present _____ Proposed _____

If Industrialized Building:

State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $ 30,000.00
2. Rehabilitation $
3. Total (1+ 2) $

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.

Sign here:

Print name here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK LANDLORD SHELL

Interior clean out — Partial Release

from Tina Allen

COMMERCIAL

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

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

BUILDING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 2/19/19

Date Issued / Permit # 18-3471

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

Block 671 Lot 1.01 Qualification Code

Work Site Location 56 CHAMBERS BRIDGE ROAD, BRICK NJ 08723

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Tel. (301) 998-8173 e-mail

Address P.O. BOX 92129 SOUTHLAKE 76092
(street) (municipality) (zip code)

Contractor: NATIONAL MAINTENANCE & BUILD OUT CO Tel. (215) 442-5380

Address 1044 PULINSKI ROAD e-mail jkornsey@nmboc.com

IVYLAND, PA 18974

Contractor License No. or Builder Registration No. 13VH07302100 Exp. Date 03/31/2019

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 300020638 FAX:

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.

Sign here:

Print name here: JOE KORNSEY

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Landlord Shell

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required
[✓] All — 01/25/19 KEH
[ ] Footings/Foundations
[ ] Structural/Framework
[ ] Exterior
[ ] Interior

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 01/25/19
Approved by: KEH

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

TYPE OF WORK:
[ ] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence _____ Height (exceeds 6')
[ ] Sign _____ Sq. Ft.
[ ] Pool
[ ] Retaining Wall _____ Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other _____
[ ] Demolition

FEE (Office Use Only)
$

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

B. BUILDING CHARACTERISTICS

Use Group Present M Proposed M

No. of Stories 1

Height of Structure 22 ft.

Area — Largest Floor 9520 sq. ft.

New Bldg. Area/All Floors sq. ft.

Volume of New Structure cu. ft.

Max. Live Load 120

Max. Occupancy Load 57

Constr. Class Present IIB Proposed IIB

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $
2. Rehabilitation $ 30,000
3. Total (1+ 2) $ 30,000

Applicant: When submitting this form to your Local Construction Code Enforcement

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control #: 2/19/19
Date Issued / Permit #: 18-3471 +A

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

Block 671 Lot 1.01 Qualification Code

Work Site Location 56 CHAMBERS BRIDGE ROAD, BRICK NJ 08723

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Tel. (301) 998-8173 e-mail

Address P.O. BOX 92129 (street) SOUTHLAKE (municipality) 76092 (zip code)

Contractor: M.J.M. ELECTRIC INC Tel. (732) 223-9732

Address 7 SOUTH TAMARACK DRIVE e-mail mike@mjmelectricnj.com

BRIELLE, NJ 08730

Contractor License No. 12715B Exp. Date 3/21

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 22-3485744 FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present M Proposed M

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co. PSE&G

Est. Cost of Elec. Work $ 15,000

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 sign/Contractor sign and seal here:

Print name here: Michael J McGeever

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicar

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Interior shell work

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
0		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	
		KW Transformer/Generator	
1	600	AMP Service	
1	600	AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	200	Amp Service	

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[✓] Electric Plans Approved
Date: 1/24/19 Approved by: RJC
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 1/24/19
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

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

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $

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

Interior cleanout only for former Ethan Allen

NEW JERSEY UNIFORM CONSTRUCTION CODE

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 12/21/18
Control #
Date Issued
Permit # 18-3471

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

Block 671 Lot 1.01 Qualification Code ______

Work Site Location 56 Chamber Bridge RD

Owner in Fee: Federal Realty

Tel. 484 419-1268 e-mail ______

Address ______

Contractor: Premier Fire Systems Tel. 848 448 5572

Address 2 Tlene Ct B1/U21 e-mail ______

Hillsborough NJ 08844

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P00647

Fire Protection Equipment, NJ Div of Fire Safety Installer No. ______

Fire Alarm Contractor No. ______ Exp. Date 4/19

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): ______

Federal Emp. ID No. 223828273 FAX: 732 2621780

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present ______ Proposed ______

Constr. Class: Present ______ Proposed ______

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other ______

Location: ______

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity ______

Fire Alarm System: [ ] New OR [✓] Existing

Location of Panel: ______

Fire Suppression/Standpipe System:
[ ] New OR [✓] Existing

Location of Main Control Valve: ~~8,000~~ Riser Rm

Total Cost of Fire Protection Work $ 8,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial - Underslab Utilities Approved
Date ______ Approved by: ______
[X] Fire Protection Plans Approved
Date ______ Approved by: ______
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: ______
Approved by: ______
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: ______
Approved by: ______

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust. Tanks				
Fireplace Venting				
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.

Applicant/Contractor sign here: [signature]

Print name here: Mike Kelly

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: turn heads up
Water Supply Source
Method of Alarm/Suppression System Supervision Existing

COMMERCIAL

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	0	
Suppression Systems		
Fire Pump ___ GPM Type ___		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)	98	
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		

Fire alarm to be maintained

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

U.C.C. F140 (rev. 02/11) Internet version

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

BLOCK 671 LOT 1.01 QUALIFICATION CODE _____ ADDRESS (SITE) 56 Chambers Bridge SPACE 43A PERMIT NO. _____

CONSTRUCTION PERMIT APPLICATION

C18-004058

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

I. IDENTIFICATION

1. Proposed Work Site at: 56 Chambers Bridge Ave, Space 43A
2. Name of Owner in Fee: Federal Realty
   Tel. (610) 416-1042 e-mail ncaine@federalRealty.com
   Address 1626 E. Jefferson St. (street) Rockville (municipality) MD 20852 (zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: TBD Tel. ( ) _____
   Address _____ e-mail _____
   TBD
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. _____ FAX: ( ) _____
5. Architect or Engineer: Kellenyi Johnson Wagner Contact Eric Wagner
   Address 21 Peters Place e-mail ewagner@kjw.com
   Tel. (732) 741-5270 FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun _____
   GC
   Tel. ( ) _____ FAX: ( ) _____

V. FEE SUMMARY (for office use only)

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

VI. BUILDING/SITE CHARACTERISTICS (office use only)

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area — Largest Floor _____ sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Max. Live Load _____
7. Max. Occupancy Load _____
8. If Industrialized Building: State Approved ____ HUD ____
9. Total Land Area Disturbed _____ sq. ft.
10. Flood Hazard Zone _____
11. Base Flood Elevation _____ ft.
12. Wetlands yes ____ no ____

COMMERCIAL

IIa. PROPOSED WORK

- ☐ Minor Work
- ☐ Repair
- ☐ Asbestos Abat. -Subch. 8
- ☐ New Building
- ☐ Alteration
- ☐ Lead Hazard Abatement
- ☐ Addition
- ☐ Renovation
- ☐ Radon Remediation
- ☒ Demolition
- ☐ Reconstruction
- ☐ Annual Permit

Int. Cleanout

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building		MFF	10/24/18						
☐ Electrical									
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____ ____
   Gained, Rental ____ ____
   Lost, Sale ____ ____
   Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____
Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

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(f)1.ix:

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. 5:23-2.15(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 Eric Wagner KJW Architects

Address 21 Peters Place
Red Bank NJ 07701

Telephone (732) 741-9270

Signature

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

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.

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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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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. 5:23-2.15(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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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.

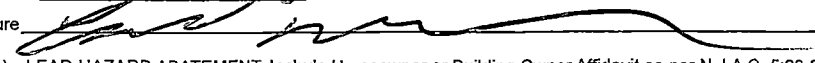
I understand that if any of the above statements are willfully false, I am subject to punishment.

(✓ Check if contractor.

Agent Name Joe Kearney

Address 484 Vincent Ct.

Telephone 215-442-5380

Signature 

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

PREMIER FIRE SYSTEMS, LLC.

2 Ilene Court
Hillsborough, NJ 08844
(908) 874-4414
FAX (908) 874-4484

Date: 11/18/18
Re: Ethan Allen-Brick Plaza
Brick, NJ

Gentlemen

In reference to the above, we have been hired to address the concerns with the Fire Sprinkler System that is to remain in service for the above. The ceilings for the above are being removed and we will be removing the Pendant sprinklers in the ceiling line and returning them to Upright position keeping the same 130 Square foot maximum coverage area as per NFPA-13 for Storage/Mercantile as the pendant system has currently.

Please feel free to call me direct at 848-448-5512 if you have concerns or questions.

Sincerely
Mike Kelly, PM PFS

Electronic Security Solutions

Thomas Capie, SET CFPS
5115 Campus Drive
Plymouth Meeting, PA 19462
T 215-277-5248
F 215-277-5263
C 267-838-1753
tcapie@essfiresys.com

Richard Orlando
Fire Subcode Official
Brick Township
401 Chambers Bridge Road
Brick, NJ 08723

Re: Fire Subcode Review for Block 671 Lot 1.01 (Ethan Allen space)

Janaury 29, 2019

Dear Mr. Orlando,

This letter serves as documentation that the fire alarm control panel in the aforementioned space will remain active during cleanout. Please note that the function of the control panel in this space is to monitor the Fire Sprinkler System only. If the Fire Sprinkler System is disconnected or disabled, the fire alarm control panel will be useless.

Should you have any questions, please feel free to contact me directly.

Sincerely,

Electronic Security Solutions

Thomas Capie,
SET, CFPS

Thomas Capie, SET, CFPS
Vice President of Operations

PERMIT UPDATE

Date Update Issued 9/27/2019
Control # C-18-004058+H
Permit # 18-3471+H

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier

Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN)
Brick Township, NJ

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092

Telephone:

Contractor: National Maintenance & Buildout
Address: 1044 PULINSKI RD Ivyland PA 18974

Telephone: (215) 442-2538
Lic. No. or Bldrs. Reg. No. 13vh07302100
Federal Employee. No. 300020638

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:

ALTERATION - COMMERCIAL - FORMER ETHAN ALLEN - SPACE 43 ...UPDATE +H - BACKFLOW PREVENTER

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 $1,000

Construction Official — Date 9/27/19

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE **3 PINK - TAX ASSESSOR** 4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$150
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$2
CO Fee	
Other	$0
Total	$152
Check No.	007301
Cash	$0
Credit	$0
Collected By	Nichol Ponsi

REQUIRED INSPECTIONS

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

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

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

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

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

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

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

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

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

Permit 18-3471.14

ECS Mid-Atlantic, LLC
2 Executive Drive
Suite 11
Moorestown, NJ 08057
(609) 832-3910 [Phone]
(484) 840-5586 [Fax]

FIELD REPORT

Project No.	44:1160-D
Report No.	1
Day & Date	Thursday 08/15/2019
Weather	72°/ Cloudy
On-Site Time	2.75
Lab Time	0.00
Travel Time*	1.25
Total	4.00
Re Obs.Time	0.00

Project **Brick Plaza - Space 43**
Location **Brick, NJ**
Client **Federal Realty Investment Trust - Neil Cain**
Contractor **National Maintenance Build Out Company - Joe**

Remarks

Trip Charges* **45.00** Tolls/Parking* **$7.30** Mileage*

Chargeable Items

Time of Arrival **09:00A** Departure **11:45A**

* Travel time and mileage will be billed in accordance with the contract.

Summary of Services Performed (field test data, locations, elevations & depths are estimates) & Individuals Contacted.

The undersigned arrived on site, as requested, to observe:

1. Structural steel framing, field welded connections, and column base plate anchor bolt connections at the loading dock canopy behind space 43 (Trader Joes with Permit Number 18-3471). Please see the attached sketch. Prior to today's observations approved project drawings were reviewed and appeared to be in order.

Reference Documents:
-For construction plan set titled "Landlord Shell Fill-Out at Space #43 (Former Ethan Allen)," drawn by Kellenyi Johnson Wagner, dated 12/17/2018

Steel members were observed for size, shape, and plumbness. Structural HSS column to W-beam, and W-beam to bearing plate weld connections were observed on this date. Field welded fillet connections were visually observed for weld size, configuration, and weld quality compliance with AWS D1.1 SMAW weld quality requirements. Field welds and structural steel framing observed on this date appeared to be in general accordance with approved project plans and specifications.

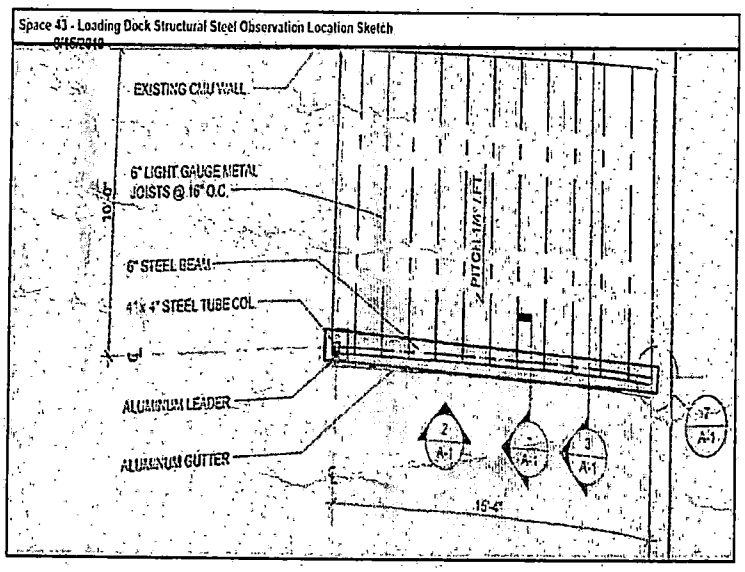
ok 8/26/19

By **Stephen Gulas, — Material Testing Staff Project Manager** 7101

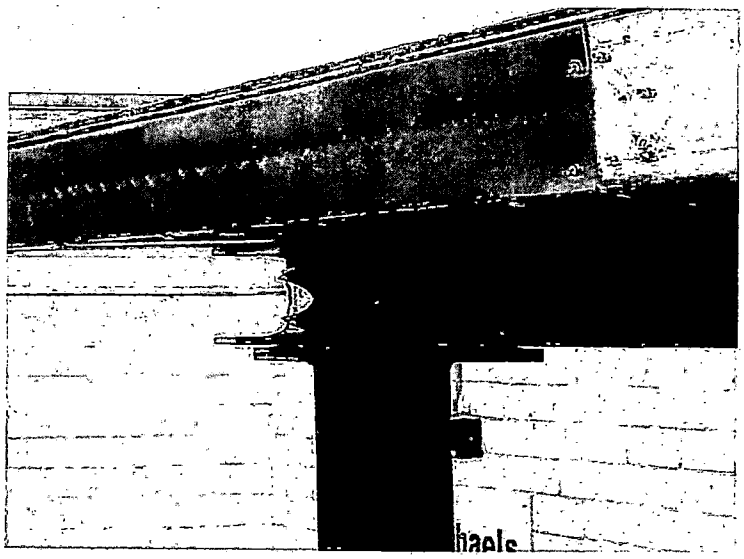
FILE COPY

25551

ATTACHMENTS

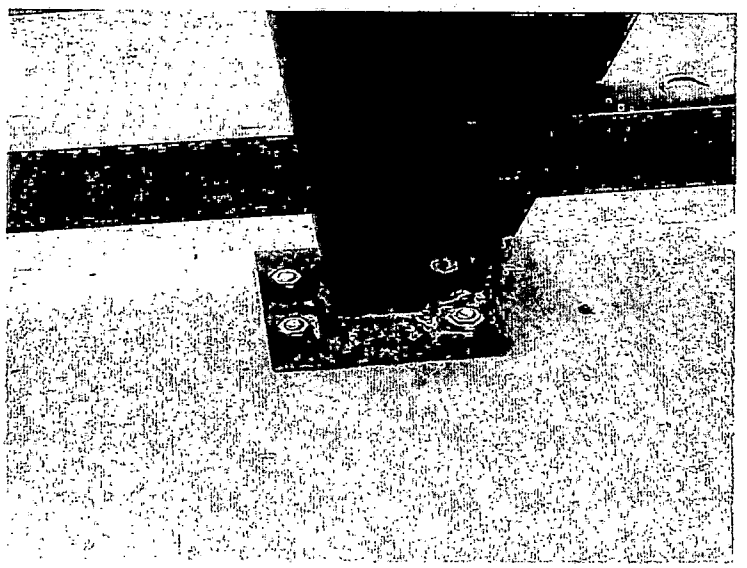


Attachment No. 1
Space 43 - Structural Steel Observation Location Sketch 8.15.19

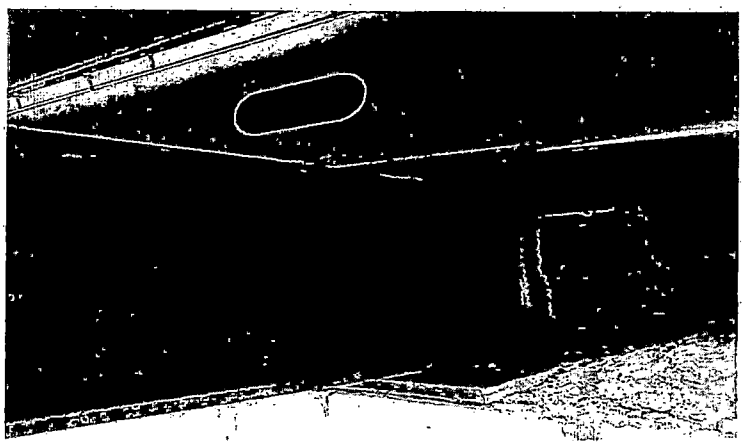


Attachment No. 2
Space 43 - Trader Joes Beam to Column Welded Connection 8.15.19

ATTACHMENTS



Attachment No. 3
Space 43 - Trader Joes Bolted Column Connection at Loading Dock Canopy



Attachment No. 4
Space 43 - Trader Joes Structural Beam to Bearing Plate Weld Connection 8.15.19

PERMIT UPDATE

Date Update Issued 8/6/2019
Control # C-18-004058+G
Permit # 18-3471+G

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN)
Brick Township, NJ
Owner in Fee: FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092
Telephone:

Contractor: National Maintenance & Buildout
Address: 1044 PULINSKI RD Ivyland PA 18974
Telephone: (215) 442-2538
Lic. No. or Bldrs. Reg. No. 13vh07302100
Federal Employee. No. 300020638

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
- FORMER ETHAN ALLEN ... UPDATE +G - WATER SERVICE

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 $3,000

Construction Official Date 8/5/19

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$200
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$6
CO Fee	
Other	$0
Total	$206
Check No.	007266
Cash	$0
Credit	$0
Collected By	Nichol Ponsi

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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

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

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

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

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

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

architects

KELLENYI JOHNSON WAGNER

21 Peters Place
Red Bank, NJ
07701-1792
732-741-5270
Fax:741-8439
www.kjw.com

April 23, 2019

Brick Township Construction Official
Brick Township Construction Department
401 Chambers Bridge Rd
Brick, NJ 08723

Re: Space 43 Landlord Shell Fitout
Brick Plaza Shopping Center
Chambers Bridge Road & Route 70, Brick, NJ (KJW #2715.5)

To Whom It May Concern:

All documents prepared by people other than the design professional shall be reviewed by the design professional and submitted with a letter indicating that they have been reviewed and found to be in conformance with the regulations for the design of the building.

I have completed this review for the above referenced project and can state all documents have been found to be in conformance with the regulations for the design of the building.

Very Truly Yours

Eric L. Wagner AIA
NJ License #AI-10366

RECEIVED
APR 23 2019 MFF
BUILDING

architects

KELLENYI JOHNSON WAGNER

21 Peters Place
Red Bank, NJ
07701-1792
732-741-5270
Fax:741-8439
www.kjw.com

April 23, 2019

Brick Township Construction Official
Brick Township Construction Department
401 Chambers Bridge Rd
Brick, NJ 08723

Re: Space 43 Landlord Shell Fitout
Brick Plaza Shopping Center
Chambers Bridge Road & Route 70, Brick, NJ (KJW #2715.5)

To Whom It May Concern:

All documents prepared by people other than the design professional shall be reviewed by the design professional and submitted with a letter indicating that they have been reviewed and found to be in conformance with the regulations for the design of the building.

I have completed this review for the above referenced project and can state all documents have been found to be in conformance with the regulations for the design of the building.

Very Truly Yours,

Eric L. Wagner AIA
NJ License #AI-10366

RECEIVED
APR 23 2019 MF
BUILDING

architects

KELLENYI JOHNSON WAGNER

21 Peters Place
Red Bank, NJ
07701-1792
732-741-5270
Fax:741-8439
www.kjw.com

May 21, 2019

Brick Township Construction Official
Brick Township Construction Department
401 Chambers Bridge Rd
Brick, NJ 08723

Re: Space 43 Landlord Shell Fitout
Permit #18-3471+F
Control #C-18-004058+F
Brick Plaza Shopping Center
Chambers Bridge Road & Route 70, Brick, NJ (KJW #2715.5)

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Very Truly Yours,

Eric L. Wagner AIA
NJ License #AI-10366

BRICK TOWNSHIP BUILDING DEPARTMENT
RECEIVED
MAY 22 2019

J Robert Johnson
Eric L Wagner
Richard R Kane

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, April 30, 2019

To: FEDERAL REALTY INVESTMENT TRUST
%
PO BOX 92129 (ALTUS GROUP
SOUTHLAKE, TX 76092

RE: Plumbing Subcode
Block: 671 Lot: 1.01 Qual:
56 CHAMBERS BRIDGE RD.
Permit Number: 18-3471+F Control Number: C-18-004058+F
Last Submit Date: Monday, April 29, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

Your request is hereby denied based upon the following infractions.The gas line from the tee at RTU 3 and the run to RTU 1 needs to be increased to 1 1/2" to carry the load of the last 2 units.

Sincerely,

Bernie Reilly, Subcode Official

CC: Shell Tradee Jots

architects

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May 21, 2019

Brick Township Construction Official
Brick Township Construction Department
401 Chambers Bridge Rd
Brick, NJ 08723

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Chambers Bridge Road & Route 70, Brick, NJ (KJW #2715.5)

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Eric L. Wagner, AIA
NJ License #AI-10366

BRICK TOWNSHIP BUILDING DEPARTMENT RECEIVED MAY 22 2019

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

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Fax:741-8439
www.kjw.com

May 20, 2019

Joe Kornsey
National Maintenance & Build Out Company (NMBOC)
1044 Pulinski Rd
Ivyland, PA 18974

Re: Block 671, Lot 1.01
Permit #18-3471-a
Space 43A (Former Ethan Allen space) Landlord Fit Out
Brick Plaza Shopping Center
56 Chambers Bridge Road, Brick, NJ (KJW #2715.11)

Dear Joe:

I spoke with you and Pete, the Building inspector this morning while he was onsite making an inspection on the above referenced project at Brick Plaza shopping center.

As we discussed, the spacing of the clip angles that tie the stud furring wall back to the existing CMU wall differs from what we have called out on the plans. Where we call for clips at 6' oc vertically to be installed at every stud (16" oc) NMBOC has provided the clips at every other stud, or 32" oc.

Clips spaced at 6' oc vertically and installed at every other stud (32" oc) are acceptable to us and will still provide more than enough stiffness to the furring wall.

Please let me know if you have any additional questions or comments regarding this matter.

Very Truly Yours

Eric L. Wagner AIA
NJ License #AI-10366

Received 5/21/19 pm ok Framing

architects

KELLENYI JOHNSON WAGNER

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732-741-5270
Fax:741-8439
www.kjw.com

April 24, 2019

Brick Township Construction Official
Brick Township Construction Department
401 Chambers Bridge Rd
Brick, NJ 08723

Re: Space 43 Landlord Shell Fitout
Brick Plaza Shopping Center
Chambers Bridge Road & Route 70, Brick, NJ (KJW #2715.5)

To Whom It May Concern:

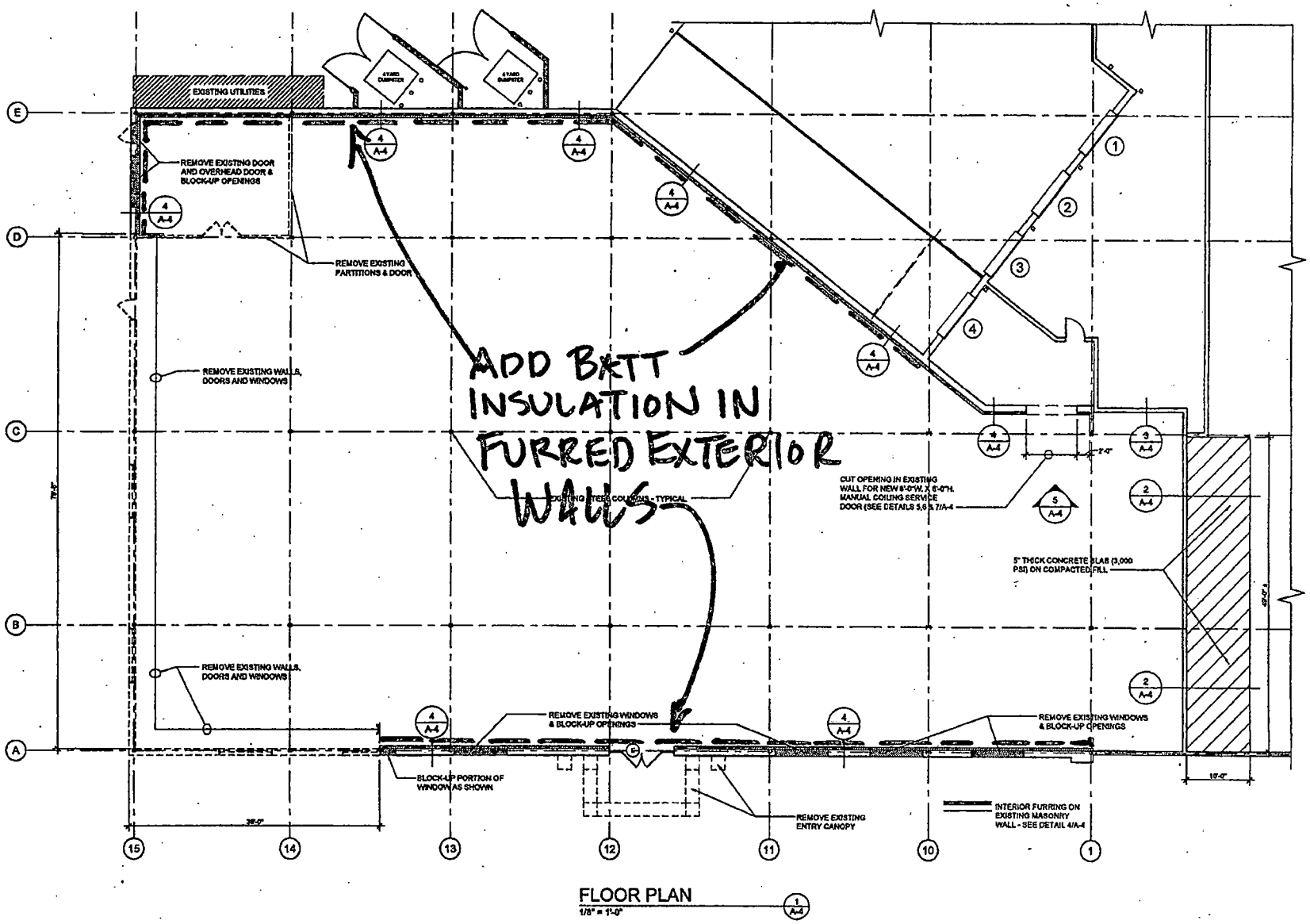
I met with the building inspector while on site this morning at Space 43. He noted that we had steel stud furring indicated at exterior CMU walls that did not call for insulation. This should have been included on our original permit application plans.

Please accept this letter and attachments as an amendment to our plans, showing where we would like to add R13 Kraft Faced fiberglass batt insulation at exterior walls. Kkraft facing is to be on the interior side of the wall.

Attached key plan shows the extent of the added insulation and the revised section 4/A4 shows the insulation added between the steel studs.

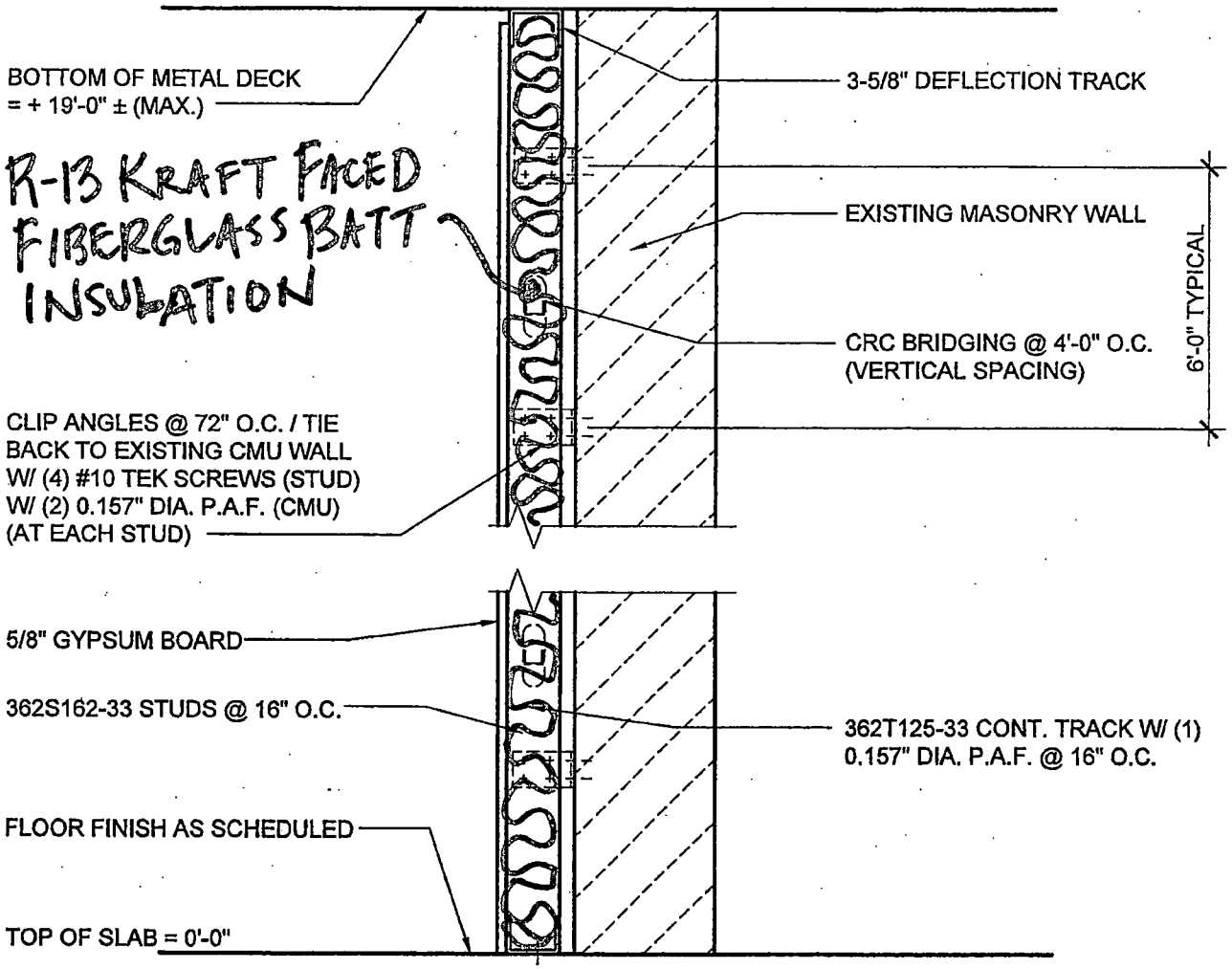
Very Truly Yours

Eric L. Wagner AIA
NJ License #AI-10366



FLOOR PLAN
1/8" = 1'-0"

KEY PLAN



WALL SECTION

4
A-4

1" = 1'-0"

DETAIL EDITED TO ADD R-13 FIBERGLASS BATT INSULATION

Eric L. Wagner AIA NJ Lic #AI-10366 Date 4/24/19

PERMIT UPDATE

Date Update Issued 1/26/19
Control # C-18-004058+F
Permit # 18-3471+F

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN)
Brick Township, NJ
Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092
Telephone:

Contractor National Maintenance & Buildout
Address 1044 PULINSKI RD Ivyland PA 18974
Telephone: (215) 442-2538
Lic. No. or Bldrs. Reg. No. 13vh07302100
Federal Employee. No. 300020638

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ALTERATION - COMMERCIAL - FORMER ETHAN ALLEN ...UPDATE +F - STRUCTURAL REVISIONS; ELECTRIC, PLUMBING & FIRE

PAYMENTS (Office Use Only)

Building	$3,740
Electrical	$1,315
Plumbing	$722
Fire Protection	$616
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$401
CO Fee	
Other	$0
Total	$6,794
Check No.	1774
Cash	$0
Credit	$0
Collected By	

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 $210,800

D. Illuminati 1/26/19
Construction Official Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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

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

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

- [x] A complete copy of released plans must be kept on the job site.

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, April 30, 2019

To: FEDERAL REALTY INVESTMENT TRUST
%
PO BOX 92129 (ALTUS GROUP
SOUTHLAKE, TX 76092

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Sincerely,

Bernie Reilly, Subcode Official

CC:

~~Resubmit 5/16/19~~
Resubmit 5/22/19
new page P-2
+ Letter
* Plans Rolled *

architects

KELLENYI
JOHNSON
WAGNER

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April 24, 2019

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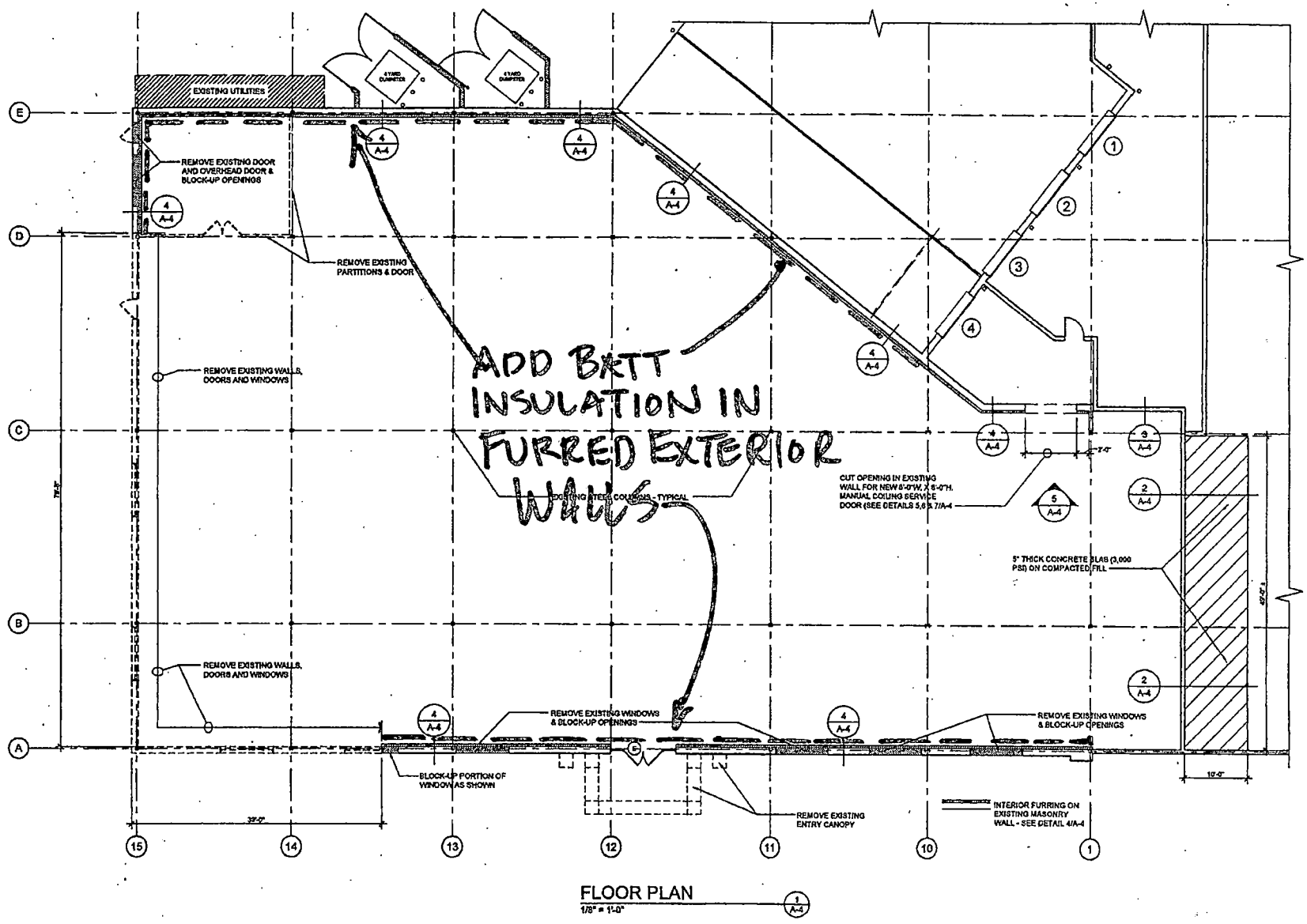
Very Truly Yours

Eric L. Wagner AIA
NJ License #AI-10366

ok - 5-7-19 PG

J Robert Johnson
Eric L Wagner
Richard R Kane



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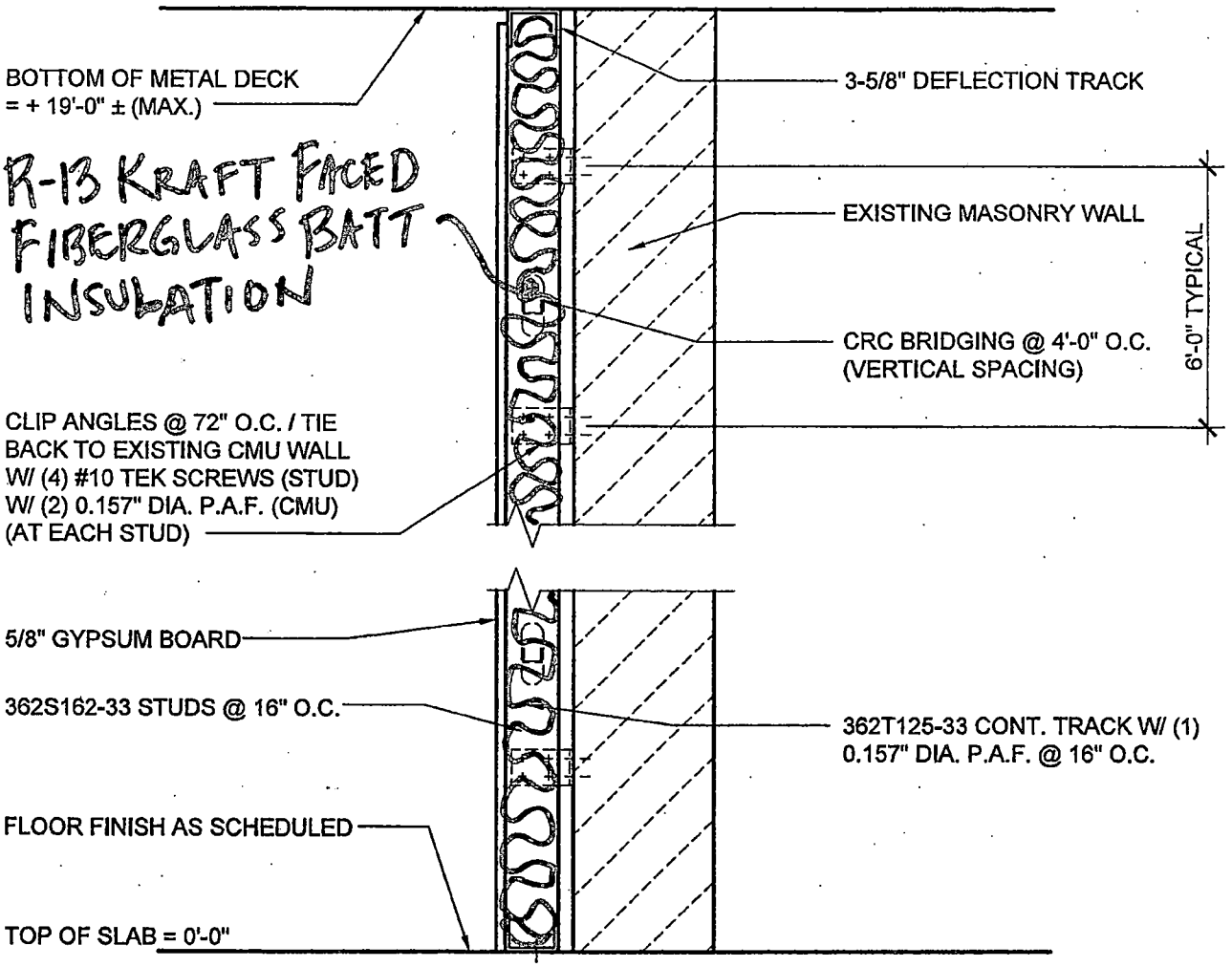
1/8" = 1'-0"

KEY PLAN



WALL SECTION

4
A-4

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DETAIL EDITED TO ADD R-13 FIBERGLASS BATT INSULATION

Eric L. Wagner AIA NC Lic #AI-10366 — 4/24/19 Date

architects

KELLENYI JOHNSON WAGNER

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May 20, 2019

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NJ License #AI-10366

Received 5/21/19 am ok
Regards to wall frame - Ethan Allen Area.

J Robert Johnson
Eric L Wagner
Richard R Kane

Thomas Capie, SET CFPS
5115 Campus Drive
Plymouth Meeting, PA 19462
T 215-277-5248
F 215-277-5263
C 267-838-1753
tcapie@essfiresys.com

Richard Orlando
Fire Subcode Official
Brick Township
401 Chambers Bridge Road
Brick, NJ 08723

Re: Fire Subcode Review for Block 671 Lot 1.01 (Ethan Allen space)

Janaury 29, 2019

Dear Mr. Orlando,

This letter serves as documentation that the fire alarm control panel in the aforementioned space will remain active during cleanout. Please note that the function of the control panel in this space is to monitor the Fire Sprinkler System only. If the Fire Sprinkler System is disconnected or disabled, the fire alarm control panel will be useless.

Should you have any questions, please feel free to contact me directly.

Sincerely,

Thomas Capie,
SET, CFPS

Thomas Capie, SET, CFPS
Vice President of Operations

StarLink™ COMMERCIAL FIRE

Commercial Fire Alarm Communicators: Sole & Dual Path Cellular &/or IP

- **Universal full event sole path cellular & dual path cellular &/or IP commercial fire alarm reporting from any panel brand, virtually anywhere**
- **For use as primary or backup communications on all 12V-24V control panels and FACPs** that communicate using Contact ID and 4/2 (such as on legacy panels)
- **Reports to any Central Station nationwide**, with your choice of cellular networks: Verizon Network Certified CDMA or GSM 3/4G on AT&T
- **Easy, flexible installation, activation & online account management**
- **Cost-saving models and plans for any code requirement.** Substantial savings over monthly dedicated landline charges. And, $100 saving incentive with any 2G Communicator upgrade (unlimited).

UL and NFPA 72 Fire Code-Compliant, the StarLink Series Wireless Commercial Fire Alarm Sole Path & Dual Path Communicators provide universal support for any brand 12V to 24V fire alarm control panel, reporting in Contact ID and 4/2. With broadest coverage footprint available in Verizon Network Certified ™ CDMA or GSM 3/4G models on the AT&T network, as well as mercantile models, all provide the most economical solution and for easy, versatile installation.

Safeguard Accounts & Reliability. For applications currently relying upon quickly-disappearing traditional phone lines, StarLink wireless communicators can be used for primary or backup communications, and will not only safeguard the fire alarm reporting transmissions for the future, but provide the end-user monthly savings for each costly FACP-dedicated landline they replace. And, for upgrading older wireless fire alarm communicators on 2G and other phased-out cellular networks, all StarLink Fire radios, offer a $100 tradeup incentive to help defray the cost of the hardware replacement to the advanced state-of-the-art StarLink model of choice.

Flexible Performance & Reporting Options. StarLink Fire provides full data reporting, in sole and dual path, as a primary or backup, to any central station of your choice, without requiring any special equipment on premises. Ultra-affordable plans are available to meet various codes and requirements, with supervisory check-ins from 200 seconds, to 5-minutes, to an hour. The units are very easily activated, plans and options are selected, and 24/7 account management is provided all through www.napcocomnet.com. And, StarLink Fire Communicators are easily connected to any panel or Fire Alarm Control Panel (FACP) standardly operating between 12V and 24V. Flexible in any application, StarLink Fire also comes in standard, or Mercantile Models in metal housings, with code-compliant supervision, with or without using conduit; and choice of power options, powered by the panel or using its own 120V Power Supply.

Code-compliant standard or mercantile metal models (right and left, respectively)

Napco StarLink3 Universal Fire Alarm Communicators

- **Sole Path Cellular and Dual Path** Cellular &/or IP Models
- **Choice of plans** (varies by model) - check-ins from 200 seconds, to 5-minutes to 1 hour, Verizon or AT&T
- **Patented Signal Boost™** signal amplification circuit and high-gain performance antenna for longer range and reliability nationwide
- **Money-saving 2G Tradeup incentive credit**
- **Bonus: Full High-Speed Napco Panel remote uploading/ downloading**
- **COMPLIANCES:** NFPA72 Editions: 2013, 2010, 2007; UL 864, 9th Ed., UL1610, UL985, UL1023, NYFD (as back-up); CSFM

NAPCO COMMERCIAL GRADE

verizon NETWORK CERTIFIED

StarLink Fire Specifications

STANDARD MODELS:

- Durable ABS plastic housing includes three keyhole slots for mounting (for commercial application, aligns with triple gang boxes.)
- Dimensions: 5-3/8"x 7-7/8"x 1-7/8" (HxWxD)
- Weight: 13.5 oz
- 3 LED Indicators - Green, Signal Strength; Amber- Busy/ Activation; Red-Trouble
- Patented Signal Boost™ signal amplification circuit and high-gain performance antenna
- Operating Environment: 0 to 49° C (32-120°F), up to 93% humidity (non-condensing)
- 12V - 24V Universal FACP Support, auto-current sensing. Support all brands communicating in Contact ID and 4/2
- Powered by Panel, Low current draw, 71mA standby, 200mA transmit

MERCANTILE MODELS (similar to above, with):

- Locking Metal Enclosure with Hinged door & 2 key-slots for wall mounting (LED indicators, inside).
- Dimensions: 9-5/8"x 11-3/4" x 3-3/8"D (HxWxD)
- Weight: 8 lbs (max., power supply models)
- **Electrical Ratings for 120VAC, 60Hz**
- **For Models with Power Supply:**
  - Input Voltage: 120VAC Nominal
  - Input Current: 400mA maximum
  - Maximum Charging Current: 200mA
- **Electrical Ratings for +12V**
- **For Models without Power Supply:**
  - Input Voltage: 11-15VDC (power-limited output from listed control panel)
  - Input Current: 71mA with peak RF transmission current of 200mA.
- **Electrical Ratings for the IN 1 Burg/Fire Input:**
  - Input Voltage: 9-15VDC
  - Maximum Input Current: Up to 2mA from FACP NAC circuit
- **Electrical Ratings for IN 2 and IN 3:**
  - Maximum Loop Voltage: 15VDC
  - Maximum Loop Current: 1.2mA
- **Electrical Ratings for 3 PGM Outputs:**
  - Open Collector Outputs: Maximum voltage 3V when active; 15V maximum when not active
  - Maximum PGM Sink Current: 50mA mount.
- Operating Environment 0 to 49° C (32-120°F), up to 93% humidity (non-condensing)
- 12V - 24V Universal FACP Support, auto-current sensing. Support all brands communicating in Contact ID and 4/2.

Ordering Information

COMMERCIAL FIRE SOLE PATH CELLULAR & DUAL PATH CELLULAR &/OR IP ("I" MODELS):*

SLE-CDMA-FIRE Standard ABS (Red) Fire Sole Path Alarm Communicator, Cellular CDMA, Verizon-Network Certified

SLE-CDMAI-FIRE as above, Dual Path Alarm Communicator, Cellular &/or IP (primary or backup, selectable)

SLECDMA-CFB-PS Commercial Fire Mercantile model in red metal housing, CDMA, Verizon-Network Certified. Direct 120VAC Powered (w/ provisions for backup battery/charger). Or, Optional TRF20 plug-in transformer may be used, where codes permit

SLECDMA-CFB Commercial Fire Mercantile model in red metal housing on CDMA, Verizon-Network Certified Powered directly from control panel

Note: Substitute prefix "SLE3/4G-" on any models above for AT&T 3/4G Network

ACCESSORIES:

SLE-DLEXT Optional, as above, for downloading, extends distance to Napco panel up to 100'

TRF20 Optional Plug in AC Transformer, 16.5V / 20VA (use is subject to local code compliance)

SLE-DLCBL Optional High-Speed Napco Panel Up/download cable

Also Available: StarLink Intrusion Radios in standard and mercantile versions

SLE-GSM-3/4G Standard Burglary Radio (Black), GSM 3/4G on AT&T Network powered by panel.

SLE-CDMA as above, but CDMA communications, Verizon-Network Certified.

SLECDMA-CB Commercial Burglary CDMA Radio, Verizon Certified, in white metal housing. Powered directly from control panel.

SLE3/4G-CB as above, but GSM 3/4G on AT&T Network.

SLE3/4G-CB-TF Commercial Burglary CDMA, Verizon Certified in white metal housing with power supply powered by plug-in 16.5V / 20VA transformer & provision for battery.

NAPCO SECURITY TECHNOLOGIES, INC.
333 Bayview Ave., Amityville, NY 11701 USA
1-800-645-9445 • Fax: 1-631-789-9292
www.napcosecurity.com

NETWORK CERTIFIED

COMPLIANCES: NFPA 72 Editions: 2013, 2010, 2007; **UL** 864, 9th Ed., UL1610, UL985, UL1023; **NYFD** (as back-up); **CSFM**

*StarLink Fire are also rated to support Intrusion/Burglary alarm reports where applicable. StarLink™ and Signal Boost are trademarks of NAPCO. Pats. Pending. Specifications subject to change.

* Verizon and Verizon Network Certified, UL, AT&T and other trademarks, are trademarks of their respective companies, and are unaffiliated with NAPCO.

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

Department Of DCA Community Affairs

State of New Jersey
Department of Community Affairs
Division of Fire Safety

Hereby Issues To

PREMIER FIRE SYSTEMS

Fire Protection Equipment Contractor Business Permit

In The Following Fire Protection Areas:

Fire Sprinkler System

P00647	04/30/2016 to 04/30/2019	
Permit ID	Date Issued	Lapse Date

Charles A. Richman
Commissioner

PREMIER FIRE SYSTEMS

Fire Protection Equipment Contractor Business Permit

Commissioner

tyco®

Worldwide Contacts | www.tyco-fire.com

Series DS-3 Dry-Type Sprinklers 11.2K Horizontal Sidewall Standard Response, Extended Coverage

General Description

TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) are decorative glass bulb automatic sprinklers. They are intended for use in applications where the sprinklers and/or a portion of the connecting piping may be exposed to freezing temperatures; for example, horizontal piping extensions through a wall to protect an unheated area of a building.

Series DS-3 Extended Coverage Ordinary Hazard Horizontal Sidewall, Dry-Type Sprinklers are designed for extended coverage use in ordinary hazard occupancies (ECOH) per NFPA 13.

Series DS-3 Dry-Type Sprinklers provide protection of coverage areas up to 16 ft x 20 ft (320 ft^2) as compared to standard coverage horizontal sidewall sprinklers having a maximum coverage area of 10 ft x 10 ft (100 ft^2) for ordinary hazard occupancies.

NOTICE

Series DS-3 Dry-Type Sprinklers described herein must be installed and maintained in compliance with this document, as well as with the applicable standards of the NATIONAL FIRE PROTECTION ASSOCIATION (NFPA), in addition to the standards of any other authorities having jurisdiction. Failure to do so may impair the performance of these devices.

The owner is responsible for maintaining their fire protection system and devices in proper operating condition. Contact the installing contractor or product manufacturer with any questions.

Series DS-3 Dry-Type Sprinklers must only be installed in fittings that meet the requirements of the Design Criteria section. Installation of Series DS-3 Dry-Type Sprinklers in a recessed installation will void all sprinkler warranties, as well as void the sprinkler's laboratory Approvals.

IMPORTANT

Refer to Technical Data Sheet TFP2300 for warnings pertaining to regulatory and health information.

Always refer to Technical Data Sheet TFP700 for the "INSTALLER WARNING" that provides cautions with respect to handling and installation of sprinkler systems and components. Improper handling and installation can permanently damage a sprinkler system or its components and cause the sprinkler to fail to operate in a fire situation or cause it to operate prematurely.

Sprinkler Identification Number (SIN)

TY5339

Technical Data

Approvals
UL and C-UL Listed

Refer to Table A and the Design Criteria section

Maximum Working Pressure
175 psi (12,1 bar)

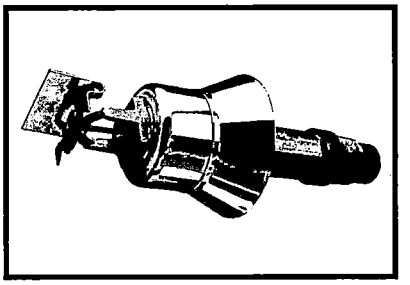
Inlet Thread Connections
1 Inch NPT
ISO 7-R 1

Discharge Coefficient
Refer to Table B

Temperature Ratings
155°F (68°C) and 200°F (93°C)

Finishes
Sprinkler: Refer to Table E

Escutcheon: Refer to Table E



Physical Characteristics

Inlet	Copper
Plug	Copper
Yoke	Stainless Steel
Casing	Galvanized Carbon Steel
Insert	Bronze
Bulb Seat	Bronze
Bulb	Glass (3 mm)
Compression Screw	Bronze
Deflector	Bronze
Frame	Bronze
Guide Tube	Stainless Steel
Water Tube	Stainless Steel
Spring	Stainless Steel
Sealing Assembly	Beryllium Nickel w/TEFLON
Pin	Stainless Steel
Button Spring	Stainless Steel
Helper Spring	Stainless Steel
Escutcheon	Carbon Steel

Operation

When TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) are in service, water is prevented from entering the assembly by the Plug with Sealing Assembly (Ref. Figure 1) in the Inlet of the sprinkler.

The glass bulb contains a fluid that expands when exposed to heat. When the rated temperature is reached, the fluid expands sufficiently to shatter the glass bulb, and the Bulb Seat is released.

The compressed Spring is then able to expand and push the Water Tube as well as the Guide Tube outward. This action simultaneously pulls inward on the Yoke, withdrawing the Plug with Sealing Assembly from the Inlet allowing the sprinkler to activate and flow water.

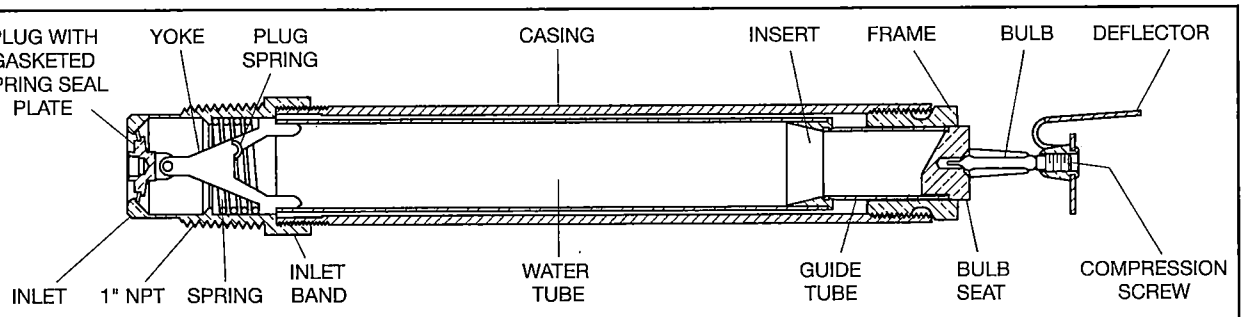


FIGURE 1
SERIES DS-3 HORIZONTAL SIDEWALL DRY-TYPE SPRINKLER TY5339 (ECOH) ASSEMBLY

Temperature Rating	Bulb Color Code	SPRINKLER FINISH		
		Natural Brass	Chrome Plated	White Polyester
155°F (68°C)	Red	1, 2		
200°F (93°C)	Green			

Notes:
1. Listed by Underwriters Laboratories, Inc. (maximum order length of 48 inches)
2. Listed by Underwriters Laboratories for use in Canada (maximum order length of 48 inches).

TABLE A
SERIES DS-3 HORIZONTAL SIDEWALL DRY-TYPE SPRINKLERS EXTENDED COVERAGE, ORDINARY HAZARD (TY5339) LABORATORY LISTINGS AND APPROVALS

Length, Inches (mm)	K-factor, gpm/psi$^{1/2}$ (lpm/bar$^{1/2}$)
2-1/2 to 14-3/4 (63 mm to 375 mm)	11.2 (161,3)
15 to 18-3/4 (381 mm to 476 mm)	10.9 (157,0)
19 to 23 (483 mm to 584 mm)	10.8 (155,5)
23-1/4 to 26-3/4 (591 mm to 679 mm)	10.7 (154,1)
27-1/4 to 31-1/4 (692 mm to 794 mm)	10.6 (152,6)
31-1/2 to 35-1/4 (800 mm to 895 mm)	10.5 (151,2)
35-1/2 to 39-1/2 (902 mm to 1003 mm)	10.4 (149,8)
39-3/4 to 43-1/2 (1010 mm to 1105 mm)	10.3 (148,3)
43-3/4 to 48 (111 mm to 1219 mm)	10.2 (146,9)

Notes:
- K-factor Length is determined as follows:
- Flush: Order Length from Figure 2 plus 1/2 in. (12,7 mm)
- Deep: Order Length from Figure 4 plus 3-1/4 in. (82,6 mm)
- Without Escutcheon: Order Length from Figure 5 minus 2-1/4 in. (57,2 mm)

TABLE B
DISCHARGE COEFFICIENTS

Design Criteria

The TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) are for use in ordinary hazard occupancies with noncombustible unobstructed construction and with a ceiling slope not exceeding 2 inches per foot (9.2°), using the design criteria provided in Table C, as well as any additional requirements specified in NFPA 13 for Extended Coverage Sidewall Spray Sprinklers.

A 36 in. (914 mm) clearance must be maintained between the top of the sprinkler deflector and any miscellaneous storage.

Series DS-3 Dry-Type Sprinklers may be installed on sloped ceilings in loading docks with a maximum roof slope of 4 inches per foot (18.4°) as shown in Figure 8 and using the design criteria provided in Table C.

Sprinkler Fittings
Install 1 inch NPT Series DS-3 Dry-Type Sprinklers in the 1 inch NPT outlet or run of the following fittings:

- malleable or ductile iron threaded tee fittings that meet the dimensional requirements of ANSI B16.3 (Class 150)
- cast iron threaded tee fittings that meet the dimensional requirements of ANSI B16.4 (Class 125)

Do not install Series DS-3 Dry-Type Sprinklers into elbow fittings. The Inlet of the sprinkler can contact the interior of the elbow.

The unused outlet of the threaded tee is plugged as shown in Figure 6.

Series DS-3 Dry-Type Sprinklers can also be installed in the 1 inch NPT outlet of a GRINNELL Figure 730 Mechanical Tee. However, the use of the Figure 730 Tee for this arrangement is limited to wet pipe systems.

Application	Coverage Area[1] W x L, ft x ft (m x m)	Minimum Flow[2], gpm (lpm)	Minimum Pressure[2], psi (bar)	Top of Deflector-to-Ceiling Distance[3], Inches (mm)	Temperature Rating	Minimum Spacing[4], ft (m)
Series DS-3 (TY5339) Horizontal Sidewall Dry-Type Sprinkler (ECOH) OH Group 1 (0.15 gpm/sq.ft) Standard Response	16 x 16 (4,9 x 4,4)	38 (144)	11.5 (0,79)	6 to 12 (150 to 300)	155°F, 200°F (68°C, 93°C)	8 (2,4)
	16 x 18 (4,9 x 5,5)	43 (163)	14.7 (1,01)			
	16 x 20 (4,9 x 6,1)	48 (182)	18.4 (1,27)			
Series DS-3 (TY5339) Horizontal Sidewall Dry-Type Sprinkler (ECOH) OH Group 2 (0.20 gpm/sq.ft) Standard Response	16 x 16 (4,9 x 4,4)	51 (193)	20.7 (1,43)			
	16 x 18 (4,9 x 5,5)	58 (220)	26.8 (1,85)			
	16 x 20 (4,9 x 6,1)	64 (242)	32.7 (2,25)			

Notes:
1. Backwall (where sprinkler is located) by sidewall (length of throw).
2. Requirement is based on minimum flow in GPM from each sprinkler. The indicated residual pressures are based on the nominal K-factor of 11.2.
3. The centerline of the sprinkler waterway is located below the deflector as shown in Figures 2, 3, and 4.
4. Minimum spacing is for lateral distance between sprinklers located along a single wall. Otherwise adjacent sprinklers (that is, sidewall sprinklers on an adjacent wall, on an opposite wall, or pendent sprinklers) must be located outside of the maximum listed protection area of the extended coverage sidewall sprinkler being utilized.

TABLE C
SERIES DS-3 EXTENDED COVERAGE HORIZONTAL SIDEWALL DRY-TYPE SPRINKLERS
UL AND C-UL LISTING COVERAGE AND FLOW RATE CRITERIA

Ambient Temperature Exposed to Discharge End of Sprinkler	Temperatures for Heated Area[1]		
	40°F (4°C)	50°F (10°C)	60°F (16°C)
	Minimum Exposed Barrel Length[2], Inches (mm)		
40°F (4°C)	0	0	0
30°F (-1°C)	0	0	0
20°F (-7°C)	4 (100)	0	0
10°F (-12°C)	8 (200)	1 (25)	0
0°F (-18°C)	12 (305)	3 (75)	0
-10°F (-23°C)	14 (355)	4 (100)	1 (25)
-20°F (-29°C)	14 (355)	6 (150)	3 (75)
-30°F (-34°C)	16 (405)	8 (200)	4 (100)
-40°F (-40°C)	18 (455)	8 (200)	4 (100)
-50°F (-46°C)	20 (510)	10 (255)	6 (150)
-60°F (-51°C)	20 (510)	10 (255)	6 (150)

Notes:
1. For protected area temperatures that occur between values listed above, use the next cooler temperature.
2. These lengths are inclusive of wind velocities up to 30 mph (18,6 kph).

TABLE D
EXPOSED SPRINKLER BARRELS IN WET PIPE SYSTEMS
MINIMUM RECOMMENDED LENGTHS

The configuration shown in Figure 7 is only applicable for wet pipe systems where the sprinkler fitting and water-filled pipe above the sprinkler fitting are not subject to freezing and where the length of the Dry-Type Sprinkler has the minimum exposure length depicted in Figure 10. Refer to the Exposure Length section.

For wet pipe system installations of 1 inch NPT Series DS-3 Dry-Type Sprinklers connected to CPVC piping, use only the following TYCO CPVC fittings:

- 1 in. x 1 in. NPT Female Adapter (P/N 80145)
- 1 in. x 1 in. x 1 in. NPT Sprinkler Head Adapter Tee (P/N 80249)

For dry pipe system installations, use only the side outlet of maximum 2-1/2 inch reducing tee when locating Series DS-3 Dry-Type Sprinklers directly below the branch line. Otherwise, use the configuration shown in Figure 6 to assure complete water drainage from above Series DS-3 Dry-Type Sprinklers and the branch line. Failure to do so may result in pipe freezing and water damage.

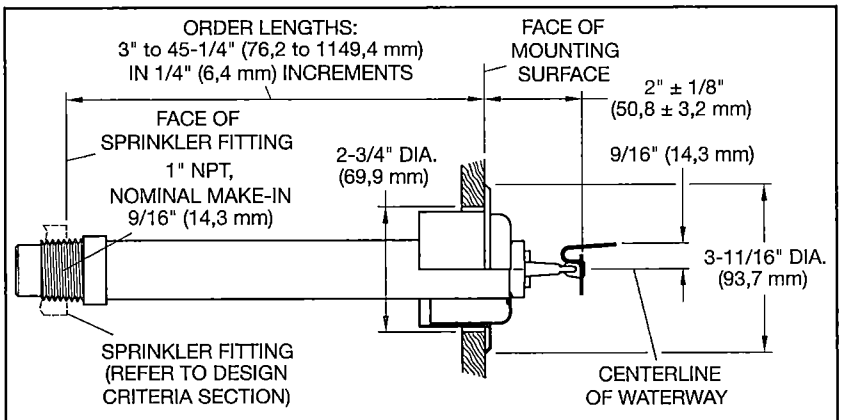


FIGURE 2
SERIES DS-3 ECOH HORIZONTAL SIDEWALL DRY-TYPE SPRINKLER WITH FLUSH ESCUTCHEON (TY5339)

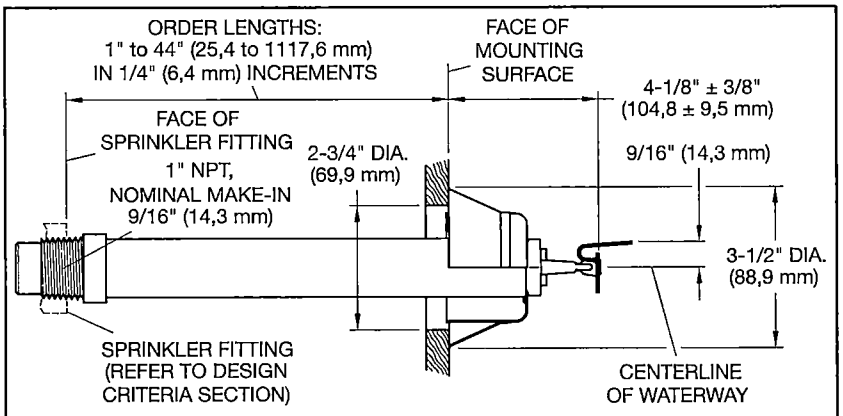


FIGURE 3
SERIES DS-3 ECOH HORIZONTAL SIDEWALL DRY-TYPE SPRINKLER WITH DEEP ESCUTCHEON (TY5339)

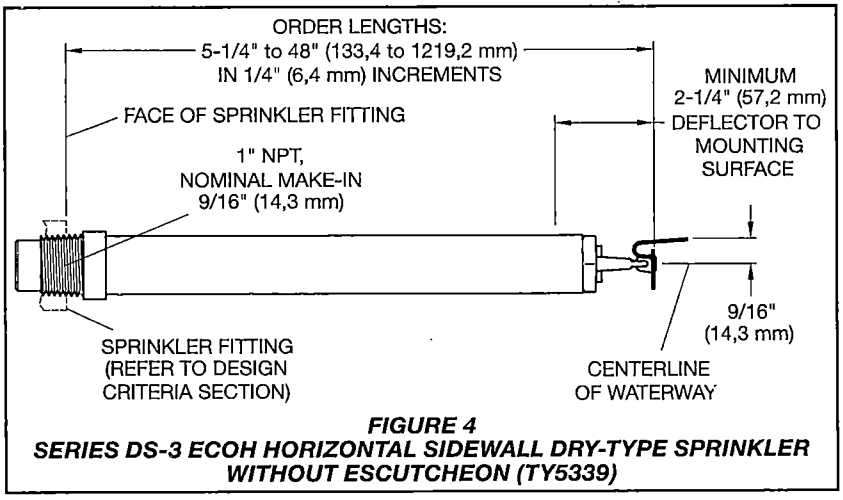


FIGURE 4
SERIES DS-3 ECOH HORIZONTAL SIDEWALL DRY-TYPE SPRINKLER WITHOUT ESCUTCHEON (TY5339)

NOTICE

Do not install Series DS-3 Dry-Type Sprinklers into any other type fitting without first consulting the Technical Services Department. Failure to use the appropriate fitting may result in one of the following:

- *failure of the sprinkler to operate properly due to formation of ice over the Inlet Plug or binding of the Inlet Plug*
- *insufficient engagement of the Inlet pipe-threads with consequent leakage*

Drainage

In accordance with the minimum requirements of the NATIONAL FIRE PROTECTION ASSOCIATION for dry pipe sprinkler systems, branch, cross, and feed-main piping connected to Dry Sprinklers and subject to freezing temperatures must be pitched for proper drainage.

Exposure Length

When using Dry Sprinklers in wet pipe sprinkler systems to protect areas subject to freezing temperatures, use Table D to determine a sprinkler's appropriate exposed barrel length to prevent water from freezing in the connecting pipes due to conduction. The exposed barrel length measurement must be taken from the face of the sprinkler fitting to the surface of the structure or insulation that is exposed to the heated area. Refer to Figure 7 for an example.

For protected area temperatures between those given above, the minimum recommended length from the face of the fitting to the outside of the protected area may be determined by interpolating between the indicated values.

Clearance Space

In accordance with NFPA 13, when connecting an area subject to freezing and an area containing a wet pipe sprinkler system, the clearance space around the sprinkler barrel of Dry-Type Sprinklers must be sealed. Due to temperature differences between two areas, the potential for the formation of condensation in the sprinkler and subsequent ice build-up is increased. If this condensation is not controlled, ice build-up can occur that might damage the Dry-Type Sprinkler and/or prevent proper operation in a fire situation.

Use of the Model DSB-2 Dry Sprinkler Boot, described in Technical Data Sheet TFP591 and shown in Figure 9, can provide the recommended seal.

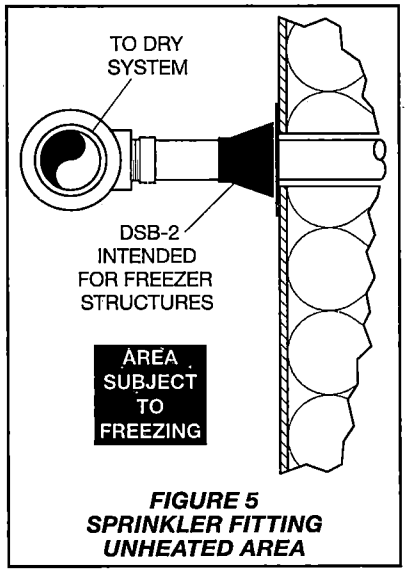


FIGURE 5
SPRINKLER FITTING
UNHEATED AREA

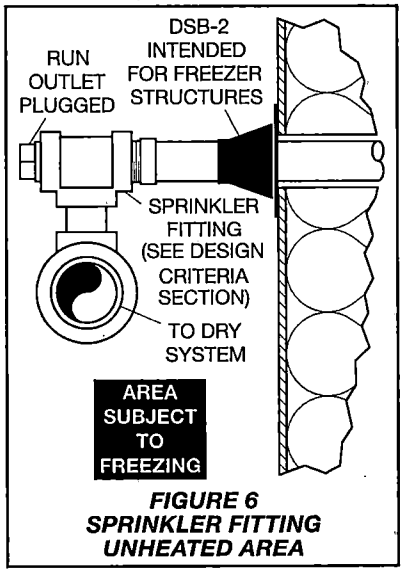


FIGURE 6
SPRINKLER FITTING
UNHEATED AREA

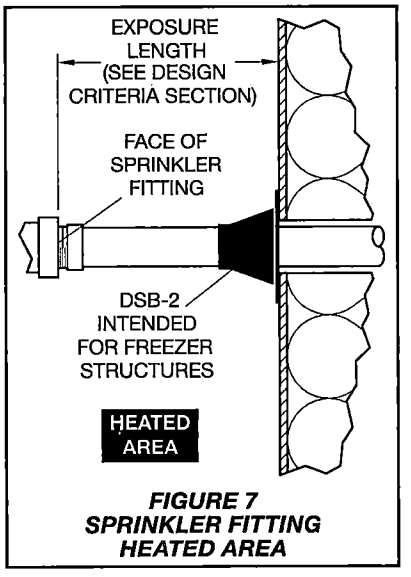


FIGURE 7
SPRINKLER FITTING
HEATED AREA

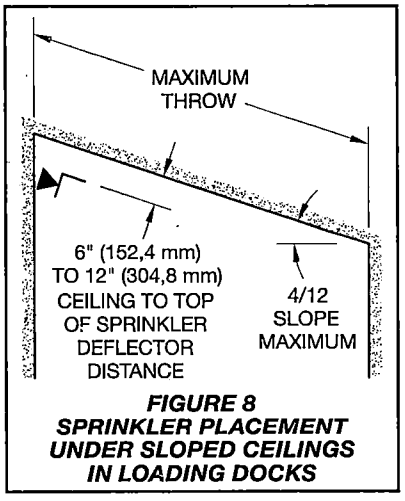


FIGURE 8
SPRINKLER PLACEMENT
UNDER SLOPED CEILINGS
IN LOADING DOCKS

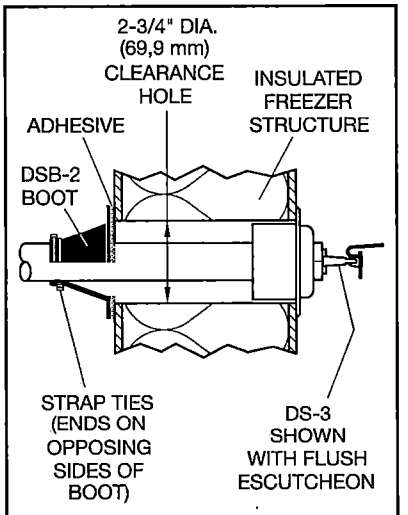


FIGURE 9
MODEL DSB-2 DRY SPRINKLER
BOOT WITH SERIES DS-3
DRY-TYPE PENDENT SPRINKLER

Installation

TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) must be installed in accordance with this section.

General Instructions
Series DS-3 Dry-Type Sprinklers must only be installed in fittings that meet the requirements of the Design Criteria section. Refer to the Design Criteria section for other important requirements regarding piping design and sealing of the clearance space around the Sprinkler Casing. With reference to Figure 10, do not grasp the sprinkler by the deflector. Failure to follow this instruction may impair performance of the device.

Do not install any bulb-type sprinkler if the bulb is cracked or there is a loss of liquid from the bulb. With the sprinkler held horizontally, a small air bubble should be present. The diameter of the air bubble is approximately 1/16 in. (1,6 mm) for the 135°F (57°C) rating to 1/8 in. (3,2 mm) for the 360°F (182°C) rating.

A leak-tight 1 inch NPT sprinkler joint should be obtained by applying a minimum-to-maximum torque of 20 to 30 lb-ft (26,8 to 40,2 N·m). Higher levels of torque may distort the sprinkler Inlet with consequent leakage or impairment of the sprinkler.

Do not attempt to compensate for insufficient adjustment in an escutcheon plate by under or over-tightening the Sprinkler. Re-adjust the position of the sprinkler fitting to suit.

Step 1. Install horizontal sidewall sprinklers with the center line of waterway parallel to the ceiling and perpendicular to the back wall surface. The word "TOP" on the deflector must face upwards toward the ceiling.

Step 2. With a non-hardening pipe-thread sealant such as TEFLON applied to the Inlet threads, hand-tighten the sprinkler into the sprinkler fitting. Do not grasp the sprinkler by the deflector (Ref. Figure 10).

Step 3. Wrench-tighten the sprinkler using either:

- a pipe wrench on the Inlet Band or the Casing (Ref. Figure 1)
- the W-Type 8 Sprinkler Wrench on the Wrench Flat (Ref. Figure 11)

Apply the Wrench Recess of the W-Type 8 Sprinkler Wrench to the Wrench Flat.

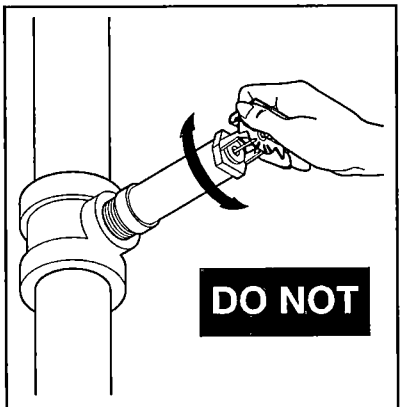


FIGURE 10
DO NOT GRASP DEFLECTOR

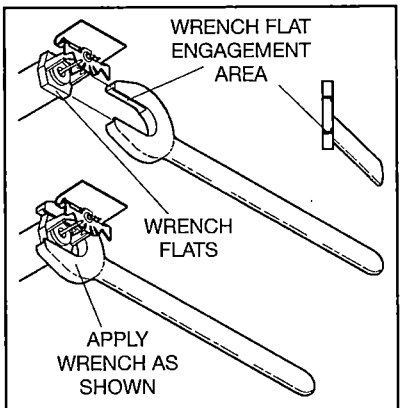


FIGURE 11
W-TYPE 8 SPRINKLER WRENCH

Note: If sprinkler removal becomes necessary, remove the sprinkler using the same wrenching method noted above. Sprinkler removal is easier when a non-hardening sealant was used and torque guidelines were followed. After removal, inspect the sprinkler for damage.

Step 4. After applying a wall finish, slide on the outer piece of the escutcheon until it comes in contact with the mounting surface.

For Deep Escutcheons, slide the outer skirt over the inner cup to make firm contact with the mounting surface.

Care and Maintenance

TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) must be maintained and serviced in accordance with this section.

Before closing a fire protection system main control valve for maintenance work on the fire protection system that it controls, obtain permission to shut down the affected fire protection systems from the proper authorities and notify all personnel who may be affected by this action.

Absence of the outer piece of an escutcheon, which is used to cover a clearance hole, may delay the time to sprinkler operation in a fire situation.

A Vent Hole is provided in the Bulb Seat (Figure 1) to indicate if the Dry Sprinkler is remaining dry. Evidence of leakage from the Vent Hole indicates potential leakage past the Inlet seal and the need to remove the sprinkler to determine the cause of leakage; for example, an improper installation or an ice plug. Close the fire protection system control valve and drain the system before removing the sprinkler.

Sprinklers which are found to be leaking or exhibiting visible signs of corrosion must be replaced.

Automatic sprinklers must never be painted, plated, coated, or otherwise altered after leaving the factory. Modified sprinklers must be replaced. Sprinklers that have been exposed to corrosive products of combustion, but have not operated, should be replaced if they cannot be completely cleaned by wiping the sprinkler with a cloth or by brushing it with a soft bristle brush.

Care must be exercised to avoid damage to the sprinklers – before, during, and after installation. Sprinklers damaged by dropping, striking, wrench twist/slippage, or the like, must be replaced. Also, replace any sprinkler that has a cracked bulb or that has lost liquid from its bulb. (Refer to Installation Section.)

The owner is responsible for the inspection, testing, and maintenance of their fire protection system and devices in compliance with this document, as well as with the applicable standards of the NATIONAL FIRE PROTECTION ASSOCIATION (e.g., NFPA 25), in addition to the standards of any other authorities having jurisdiction. Contact the installing contractor or product manufacturer with any questions.

Automatic sprinkler systems are recommended to be inspected, tested, and maintained by a qualified Inspection Service in accordance with local requirements and/or national codes.

P/N* 61 — XXX — X — XXX

ESCUTCHEON TYPE	
161	Flush Escutcheon (1 in. NPT), 155°F (68°C)
163	Flush Escutcheon (1 in. NPT), 200°F (93°C)
171	Deep Escutcheon (1 in. NPT), 155°F (68°C)
173	Deep Escutcheon (1 in. NPT), 200°F (93°C)
151	Without Escutcheon (1 in. NPT), 155°F (68°C)
153	Without Escutcheon (1 in. NPT), 200°F (93°C)

SPRINKLER FINISH		ESCUTCHEON FINISH[1]
1	NATURAL BRASS	BRASS PLATED
4	SIGNAL WHITE (RAL9003) POLYESTER	SIGNAL WHITE (RAL9003) POLYESTER
9	CHROME PLATED	CHROME PLATED
0	CHROME PLATED	SIGNAL WHITE (RAL9003) POLYESTER

ORDER LENGTH[2]	
055	5.50 in.
082	8.25 in.
180	18.00 in.
187	18.75 in.
372	37.25 in.
480	48.00 in.

Notes:
1. Does not apply to assemblies without escutcheon.
2. Dry-Type Sprinklers are furnished based upon "Order Length" as measured per Figures 2, 3 & 4.
3. After the measurement is taken, round it to the nearest 1/4 inch increment.

* Use Prefix "I" for ISO 7-R1 Connection (e.g., I-61-161-1-055).

TABLE E
SERIES DS-3 HORIZONTAL SIDEWALL, DRY-TYPE SPRINKLERS (ECOH)
PART NUMBER SELECTION

Limited Warranty

For warranty terms and conditions, visit www.tyco-fire.com.

Ordering Procedure

Contact your local distributor for availability. When placing an order, indicate the full product name, including description and Part Number (P/N).

Dry-Type Sprinklers
When ordering Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH), specify the following information:

- SIN TY5339
- Order Length:
  Dry-Type Sprinklers are furnished based upon Order Length as measured from the face of the wall to the face of the sprinkler fitting (Ref. Figures 2, 3 & 4). After the measurement is taken, round it to the nearest 1/4 inch increment.
- Inlet Thread Connections:
  1 Inch NPT
  (Standard)

  ISO 7-R 1
  (For information on ISO Inlet Thread Connections, contact your Johnson Controls Sales Representative.)
- Temperature Rating
- Sprinkler Finish
- Escutcheon Type and Finish, as applicable
- Part Number from Table E

Sprinkler Wrench
Specify W-Type 8 Sprinkler Wrench, P/N 56-892-1-001

Sprinkler Boot
Specify Model DSB-2 Dry Sprinkler Boot, P/N 63-000-0-002

This Part Number includes one (1) Boot, two (2) Strap Ties, and 1/3 oz of Adhesive (a sufficient quantity for installing one boot).

1400 Pennbrook Parkway, Lansdale, PA 19446 | Telephone +1-215-362-0700

Johnson Controls

Control # 18-004058

M.J.M. ELECTRIC INC.
LIC./BUS. PERMIT #12715B

7 SOUTH TAMARACK DRIVE
BRIELLE, NJ 08730
732-223-9732
732-223-9733 - Fax

November 13, 2018

Mr. Patrick J. Callahan
Electrical Subcode Official
Township of Brick NJ
410 Chambers bridge Rd
Brick , NJ 08732
732-246-2122

RE: Brick Plaza
56 Chambers Bridge RD
Brick NJ
Ethan Allen Space
Electrical Safe Off and Demo

Dear Mr.Callahan,

Hello ,MJM Electric Inc. is to provide complete safe off and removal of all existing branch ,lighting and power distribution circuitry to be removed from the space.

MJM Electric Inc. to provide temporary light and GFI protected construction power to the space..

Sincerely,

Michael J. McKiever

MJM:le
7049

PREMIER FIRE SYSTEMS, LLC.

2 Ilene Court
Hillsborough, NJ 08844
(908) 874-4414
FAX (908) 874-4484

Date: 11/18/18
Re: Ethan Allen-Brick Plaza
Brick, NJ

Gentlemen

In reference to the above, we have been hired to address the concerns with the Fire Sprinkler System that is to remain in service for the above. The ceilings for the above are being removed and we will be removing the Pendant sprinklers in the ceiling line and returning them to Upright position keeping the same 130 Square foot maximum coverage area as per NFPA-13 for Storage/Mercantile as the pendant system has currently.

Please feel free to call me direct at 848-448-5512 if you have concerns or questions.

Sincerely
Mike Kelly, PM PFS

Old Starbucks Space

Vanilla Bean

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 4/19/19

Date Issued / Permit # 18-3471 + E

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

Block 671 Lot 1.01 Qualification Code

Work Site Location Space 43
516 Chambers bridge Rd Brick NJ

Owner in Fee: Federal Realty

Tel. 9484-419-1200 e-mail

Address 50 E Wynnewood (street) Wynnewood (municipality) PA (zip code)

Contractor: Premier Fire Systems Tel. 8484485512

Address 2 Ilene Ct. e-mail

Hillsborough, NJ 08844

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P00647

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date 4/19

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223828273 FAX: 7322621780

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 1,200.-

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve: Tenant space

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.

Applicant/Contractor sign here:

Print name here: Mike Kelly

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Canopy

Water Supply Source

Method of Alarm/Suppression System Supervision Everfire

COMMERCIAL

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System	/	
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	/	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	0	
Suppression Systems		
Fire Pump GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)	4	
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date Approved by:
[ ] Fire Protection Plans Approved
Date Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date 4-15-19
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

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

State of New Jersey
Department of Community Affairs
Division of Fire Safety

Hereby Issues To

PREMIER FIRE SYSTEMS

Fire Protection Equipment Contractor Business Permit

In The Following Fire Protection Areas:

Fire Sprinkler System

P00647	04/30/2016 to 04/30/2019	
Permit ID	Date Issued	Lapse Date

Charles A. Richman
Commissioner

HYDRAULIC CALCULATIONS

for:

Proposed Renovations for:

Space 43 Shell Black Box - Brick Plaza
Future Trader Joes
56 Chambers Bridge Road
Brick, New Jersey 08723

DESIGN DATA: CALCULATION #1
Area Calculated: Most Demanding/Remote
System 1 - Wet - Uprights
Hazard: OHG2 - Temporary Storage
Density: 0.20 gpm/ft
Minimum Pressure Per Head: 7 psi
Area: 1715 Sq. Ft.
No. Sprinklers Calculated: 16
Area Per Sprinkler: 130 Sq. Ft. Max.
Hose Demand: 250.000 gpm
Total Water Required: 667.674 gpm
Total Pressure Required: 45.548 psi
Safety Margin: 25.95 psi

DESIGN DATA: CALCULATION #2
Area Calculated: Most Demanding/Remote
System 1 - Wet - Sidewalls
Hazard: OHG2 - Storage
Density: 0.20 gpm/ft
Minimum Pressure Per Head: 20.7 psi
Area: 855 Sq. Ft. - Entire Area
No. Sprinklers Calculated: 4
Area Per Sprinkler: 16' x 16' Max.
Hose Demand: 250.000 gpm
Total Water Required: 454.872 gpm
Total Pressure Required: 50.038 psi
Safety Margin: 23.24 psi

JOB: # 283

Installing Contractor:
Premier Fire Systems
License # P00647
2 Ilene Court #21
Hillsborough, N.J. 08844
TEL: (908) 874-4414

No.	Revision/Issue	Date
1	Preliminary Design	02/07/2019
2	Released for Submittal	02/11/2019
3	Updated Pipe Direction	02/22/2019
4	Added Sidewalls	03/28/2019
5		
6		
7		
8		
9		

FIRE SPRINKLER DESIGN BY:
Tsunami Fire Suppression, L.L.C.

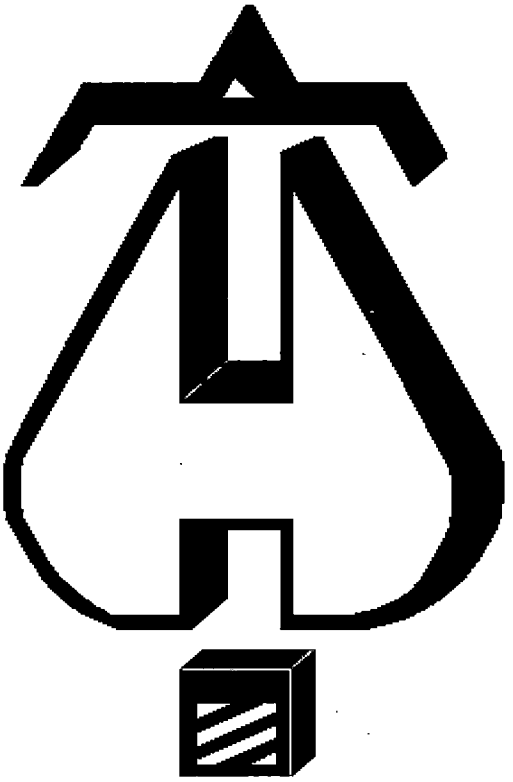
A new wave in fire protection.
3770 N.C. State Highway 134, Asheboro, North Carolina 27205
TEL: (732) 597-6357/E-MAIL: Trevor@TsunamiFireSprinkler.com
Trevor A. Silvers, CET
NICET LIC. #128017
Automatic Sprinkler System Layout, Level III
Inspection & Testing of Water Based, Level III

CARL A. MOENKE, P.E.
PROFESSIONAL ENGINEER
411 Royal Lane, TOMS RIVER, N.J. 08753
(732) 240 - 5680
N.J. LICENSE NUMBER 39052
FLA. LICENSE NUMBER 42005
FAX: (732) 240 - 3463

STATE OF NEW JERSEY
CARL A. MOENKE
GE39052
PROFESSIONAL ENGINEER

Signature

3-29-19
Date:



. . . Fire Protection by Computer Design

Premier Fire Systems, Inc.
Lic. # P00647
2 Ilene Court #21
Hillsborough, N.J. 08844
908-874-4144

Job Name	:	Trader Joes
Building	:	SPK100
Location	:	56 Chambers Bridge Road, Brick, NJ 08723
System	:	1
Contract	:	283
Data File	:	283 Trader Joes Submittal 02-07-19 Rev3 AREA 9.wxf283 Trader

HYDRAULIC CALCULATIONS
for

Project name: Trader Joes Vanilla Box
Location: 56 Chambers Bridge Road, Brick, NJ 08723
Drawing no: SPK100
Date: 02-07-2018

Design

Remote area number: 1
Remote area location: Most Demanding Remote Sales Floor
Occupancy classification: OHG2 - Temporary Storage - Mercantile
Density: 0.20 - Gpm/SqFt
Area of application: 1715 - SqFt
Coverage per sprinkler: 130 - SqFt
Type of sprinklers calculated: Globe SIN#GL5615 Uprights 5.6K
No. of sprinklers calculated: 16
In-rack demand: N/A - GPM
Hose streams: 250 - GPM
Total water required (including hose streams): 667.674 - GPM @ 45.548 - Psi
Type of system: New Wet Grid System
Volume of dry or preaction system: N/A - Gal

Water supply information

Date: 05-06-2014
Location: Hydrant on Site
Source: MAC Sprinkler

Name of contractor: Premier Fire Systems, Inc.
Address: Lic. # P00647 / 2 Ilene Court #21 / Hillsborough, N.J. 08844
Phone number: 908-874-4144
Name of designer: Tsunami FireSuppression
Authority having jurisdiction: Local Fire Marshal
Notes: (Include peaking information or gridded systems here.) Saftey Factor: 25.95 psi
Electronically Peaked

Water Supply Curve C

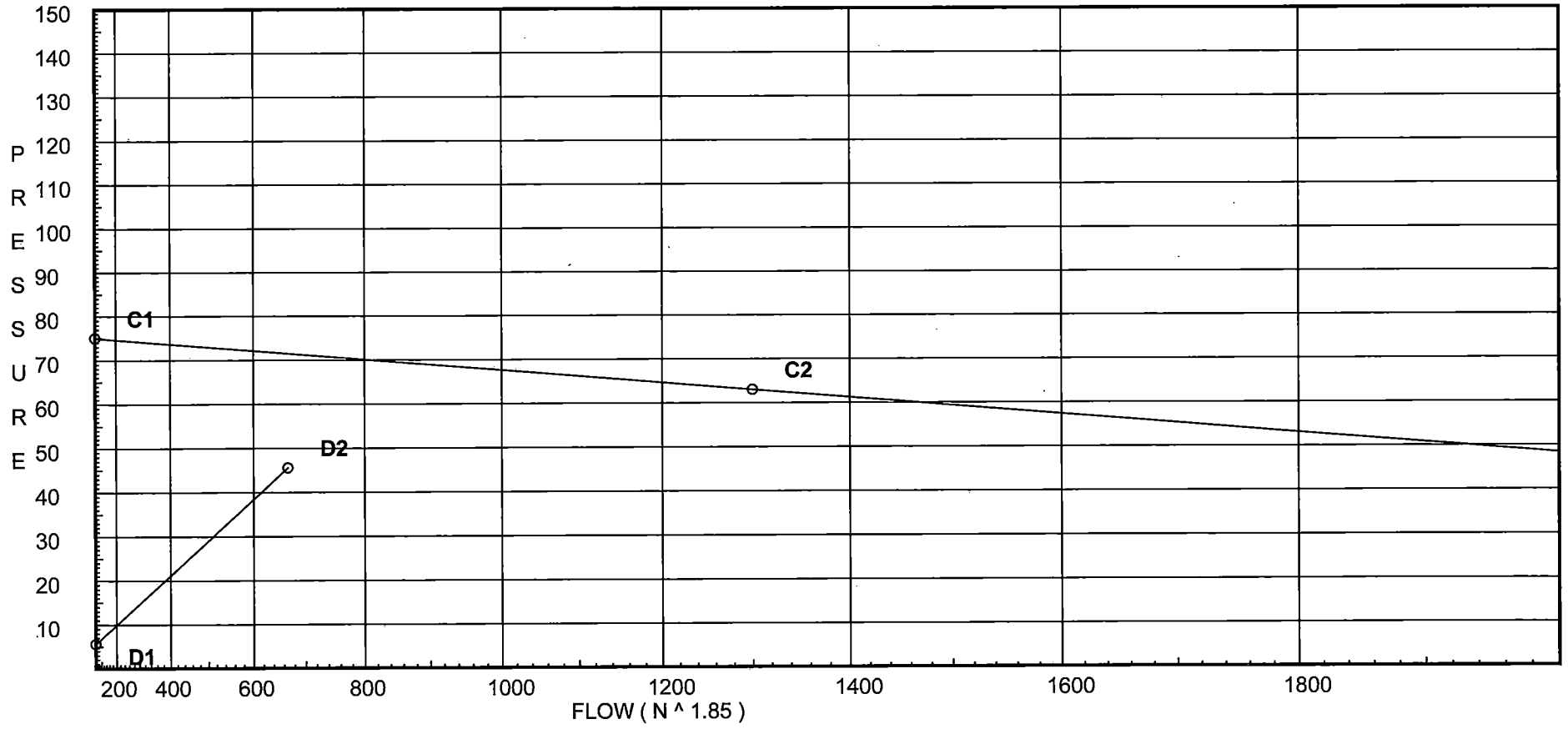
Premier Fire Systems, Inc.
Trader Joes

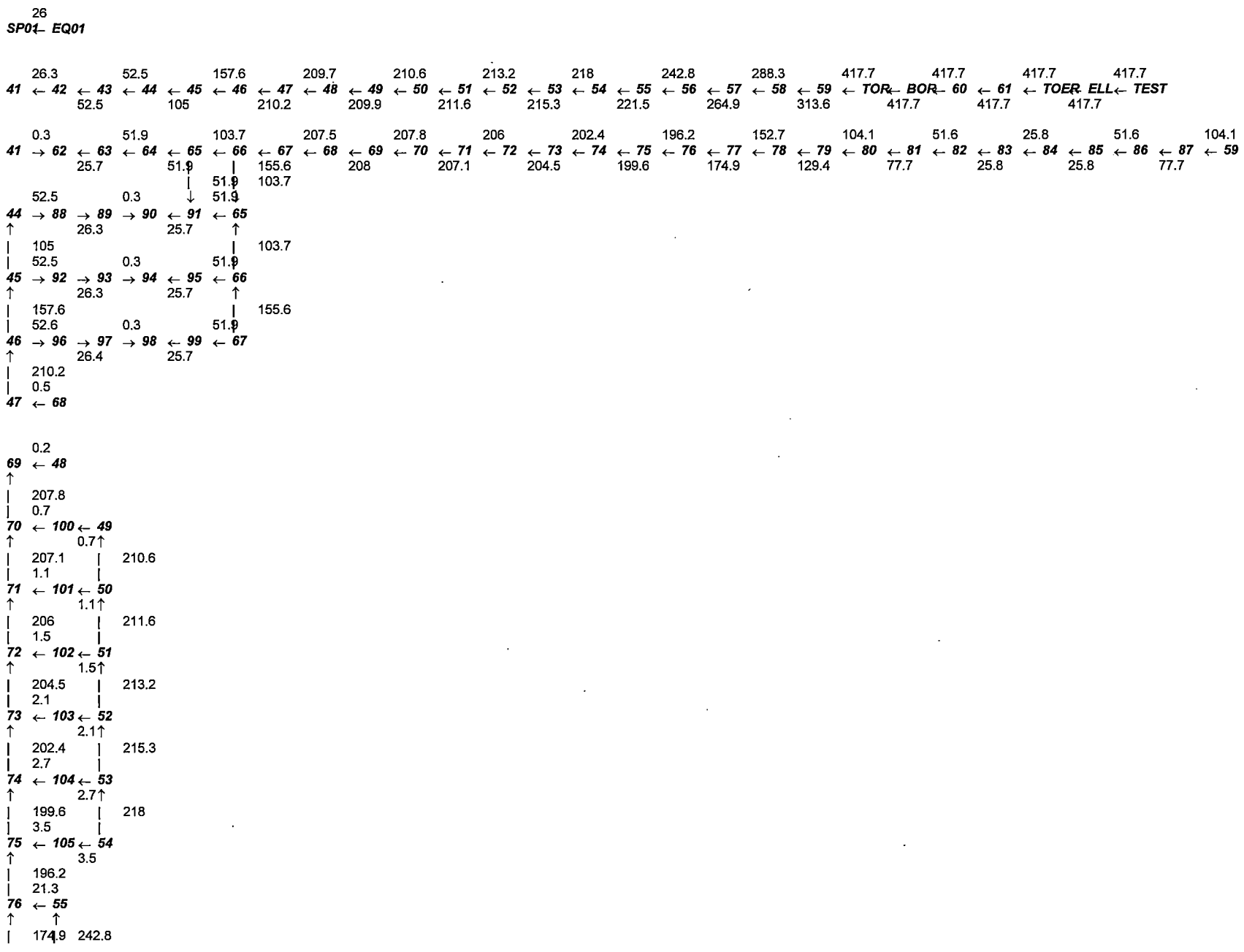
Date 02-07-2019

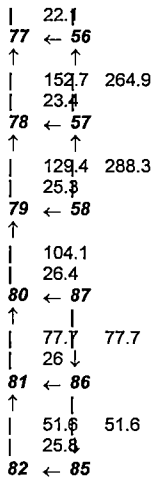
City Water Supply:
- C1 - Static Pressure : 75
- C2 - Residual Pressure: 63
- C2 - Residual Flow : 1300

Demand:

D1 - Elevation	: 5.630
D2 - System Flow	: 667.674
D2 - System Pressure	: 45.548
Hose (Demand)	:
D3 - System Demand	: 667.674
Safety Margin	: 25.954




26
SP01 ← EQ01
26.3 52.5 157.6 209.7 210.6 213.2 218 242.8 288.3 417.7 417.7 417.7 417.7
41 ← 42 ← 43 ← 44 ← 45 ← 46 ← 47 ← 48 ← 49 ← 50 ← 51 ← 52 ← 53 ← 54 ← 55 ← 56 ← 57 ← 58 ← 59 ← TOR ← BOR ← 60 ← 61 ← TOER ELL ← TEST
52.5 105 210.2 209.9 211.6 215.3 221.5 264.9 313.6 417.7 417.7 417.7
0.3 51.9 103.7 207.5 207.8 206 202.4 196.2 152.7 104.1 51.6 25.8 51.6 104.1
41 → 62 ← 63 ← 64 ← 65 ← 66 ← 67 ← 68 ← 69 ← 70 ← 71 ← 72 ← 73 ← 74 ← 75 ← 76 ← 77 ← 78 ← 79 ← 80 ← 81 ← 82 ← 83 ← 84 ← 85 ← 86 ← 87 ← 59
25.7 51.9 155.6 208 207.1 204.5 199.6 174.9 129.4 77.7 25.8 25.8 77.7
51.9 103.7
52.5 0.3 51.9
44 → 88 → 89 → 90 ← 91 ← 65
26.3 25.7
105 103.7
52.5 0.3 51.9
45 → 92 → 93 → 94 ← 95 ← 66
26.3 25.7
157.6 155.6
52.6 0.3 51.9
46 → 96 → 97 → 98 ← 99 ← 67
26.4 25.7
210.2
0.5
47 ← 68
0.2
69 ← 48
207.8
0.7
70 ← 100 ← 49
0.7
207.1 210.6
1.1
71 ← 101 ← 50
1.1
206 211.6
1.5
72 ← 102 ← 51
1.5
204.5 213.2
2.1
73 ← 103 ← 52
2.1
202.4 215.3
2.7
74 ← 104 ← 53
2.7
199.6 218
3.5
75 ← 105 ← 54
3.5
196.2
21.3
76 ← 55
174.9 242.8


22.1
77 ← 56
152.7 264.9
23.4
78 ← 57
129.4 288.3
25.8
79 ← 58
104.1
26.4
80 ← 87
77.7 77.7
26
81 ← 86
51.6 51.6
25.8
82 ← 85

Fittings Used Summary

Premier Fire Systems, Inc.
Trader Joes

Fitting Legend

Abbrev.	Name	½	¾	1	1¼	1½	2	2½	3	3½	4	5	6	8	10	12	14	16	18	20	24
B	NFPA 13 Butterfly Valve	0	0	0	0	0	6	7	10	0	12	9	10	12	19	21	0	0	0	0	0
E	NFPA 13 90' Standard Elbow	1	2	2	3	4	5	6	7	8	10	12	14	18	22	27	35	40	45	50	61
Fsp	Flow Switch Potter VSR	Fitting generates a Fixed Loss Based on Flow																			
G	NFPA 13 Gate Valve	0	0	0	0	0	1	1	1	1	2	2	3	4	5	6	7	8	10	11	13
S	NFPA 13 Swing Check	0	0	5	7	9	11	14	16	19	22	27	32	45	55	65					
T	NFPA 13 90' Flow thru Tee	3	4	5	6	8	10	12	15	17	20	25	30	35	50	60	71	81	91	101	121
Zss	Wilkins 350ASTDA	Fitting generates a Fixed Loss Based on Flow																			

Units Summary

Diameter Units	Inches
Length Units	Feet
Flow Units	US Gallons per Minute
Pressure Units	Pounds per Square Inch

Note: Fitting Legend provides equivalent pipe lengths for fittings types of various diameters. Equivalent lengths shown are standard for actual diameters of Sched 40 pipe and CFactors of 120 except as noted with *. The fittings marked with a * show equivalent lengths values supplied by manufacturers based on specific pipe diameters and CFactors and they require no adjustment. All values for fittings not marked with a * will be adjusted in the calculation for CFactors of other than 120 and diameters other than Sched 40 per NFPA.

Pressure / Flow Summary - STANDARD

Premier Fire Systems, Inc.
Trader Joes

Date 02-07-2019

Node No.	Elevation	K-Fact	Pt Actual	Pn	Flow Actual	Density	Area	Press Req.
SP01	14.0	5.6	21.56	na	26.0	0.2	130	7.0
EQ01	13.0		23.26	na				
41	13.0	K = K @ EQ01	23.26	na	26.0			
42	13.0	K = K @ EQ01	23.58	na	26.18			
43	13.0		24.91	na				
44	13.0		24.92	na				
45	13.0		24.94	na				
46	13.0		25.0	na				
47	13.0		25.09	na				
48	13.0		25.17	na				
49	13.0		25.27	na				
50	13.0		25.36	na				
51	13.0		25.45	na				
52	13.0		25.55	na				
53	13.0		25.64	na				
54	13.0		25.74	na				
55	13.0		26.52	na				
56	13.0		26.64	na				
57	13.0		26.77	na				
58	13.0		26.95	na				
59	13.0		27.06	na				
TOR	13.0		28.7	na				
BOR	2.0		39.78	na				
60	2.0		42.08	na				
61	12.67		37.71	na				
TOER	12.67		38.95	na				
ELL	-5.0		46.6	na				
TEST	0.0		45.55	na				
62	13.0	K = K @ EQ01	23.26	na	26.0			
63	13.0	K = K @ EQ01	23.57	na	26.17			
64	13.0		24.92	na				
65	13.0		24.93	na				
66	13.0		24.95	na				
67	13.0		25.0	na				
68	13.0		25.09	na				
69	13.0		25.17	na				
70	13.0		25.27	na				
71	13.0		25.36	na				
72	13.0		25.44	na				
73	13.0		25.53	na				
74	13.0		25.62	na				
75	13.0		25.7	na				
76	13.0		25.78	na				
77	13.0		25.85	na				
78	13.0		25.89	na				
79	13.0		25.93	na				
80	13.0		25.96	na				
81	13.0		25.97	na				
82	13.0		25.98	na				
83	13.0		25.98	na				
84	13.0		27.03	na				
85	13.0		27.03	na				
86	13.0		27.04	na				
87	13.0		27.05	na				
88	13.0	K = K @ EQ01	23.59	na	26.18			
89	13.0	K = K @ EQ01	23.26	na	26.0			
90	13.0	K = K @ EQ01	23.26	na	26.0			
91	13.0	K = K @ EQ01	23.58	na	26.18			
92	13.0	K = K @ EQ01	23.61	na	26.2			
93	13.0	K = K @ EQ01	23.29	na	26.02			
94	13.0	K = K @ EQ01	23.29	na	26.02			

Node No.	Elevation	K-Fact	Pt Actual	Pn	Flow Actual	Density	Area	Press Req.
95	13.0	K = K @ EQ01	23.6	na	26.19			
96	13.0	K = K @ EQ01	23.66	na	26.23			
97	13.0	K = K @ EQ01	23.34	na	26.04			
98	13.0	K = K @ EQ01	23.34	na	26.04			
99	13.0	K = K @ EQ01	23.65	na	26.22			
100	13.0		25.27	na				
101	13.0		25.36	na				
102	13.0		25.44	na				
103	13.0		25.54	na				
104	13.0		25.62	na				
105	13.0		25.71	na				

The maximum velocity is 9.65 and it occurs in the pipe between nodes SP01 and EQ01

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
SP01	26.00	1.049	1T	5.0	1.000	21.556		K Factor = 5.60
to		120.0		0.0	5.000	0.433		
EQ01	26.0	0.2115		0.0	6.000	1.269		Vel = 9.65
	0.0							
	26.00					23.258		K Factor = 5.39
41	26.32	1.682		0.0	15.000	23.258		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
42	26.32	0.0217		0.0	15.000	0.325		Vel = 3.80
42	26.18	1.682	1T	9.9	7.190	23.583		K Factor @ node EQ01
to		120.0		0.0	9.900	0.0		
43	52.5	0.0779		0.0	17.090	1.331		Vel = 7.58
43	0.0	4.26		0.0	8.000	24.914		
to		120.0		0.0	0.0	0.0		
44	52.5	0.0008		0.0	8.000	0.006		Vel = 1.18
44	52.52	4.26		0.0	8.000	24.920		
to		120.0		0.0	0.0	0.0		
45	105.02	0.0031		0.0	8.000	0.025		Vel = 2.36
45	52.54	4.26		0.0	8.480	24.945		
to		120.0		0.0	0.0	0.0		
46	157.56	0.0064		0.0	8.480	0.054		Vel = 3.55
46	52.60	4.26		0.0	8.000	24.999		
to		120.0		0.0	0.0	0.0		
47	210.16	0.0110		0.0	8.000	0.088		Vel = 4.73
47	-0.48	4.26		0.0	8.000	25.087		
to		120.0		0.0	0.0	0.0		
48	209.68	0.0109		0.0	8.000	0.087		Vel = 4.72
48	0.20	4.26		0.0	9.080	25.174		
to		120.0		0.0	0.0	0.0		
49	209.88	0.0110		0.0	9.080	0.100		Vel = 4.72
49	0.69	4.26		0.0	8.000	25.274		
to		120.0		0.0	0.0	0.0		
50	210.57	0.0110		0.0	8.000	0.088		Vel = 4.74
50	1.07	4.26		0.0	8.000	25.362		
to		120.0		0.0	0.0	0.0		
51	211.64	0.0111		0.0	8.000	0.089		Vel = 4.76
51	1.54	4.26		0.0	8.920	25.451		
to		120.0		0.0	0.0	0.0		
52	213.18	0.0112		0.0	8.920	0.100		Vel = 4.80
52	2.12	4.26		0.0	8.000	25.551		
to		120.0		0.0	0.0	0.0		
53	215.3	0.0115		0.0	8.000	0.092		Vel = 4.85
53	2.74	4.26		0.0	8.000	25.643		
to		120.0		0.0	0.0	0.0		
54	218.04	0.0118		0.0	8.000	0.094		Vel = 4.91
54	3.46	4.26	2E	26.334	38.580	25.737		
to		120.0		0.0	26.334	0.0		
55	221.5	0.0121		0.0	64.914	0.785		Vel = 4.99
55	21.31	4.26		0.0	8.000	26.522		
to		120.0		0.0	0.0	0.0		
56	242.81	0.0142		0.0	8.000	0.114		Vel = 5.47

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
56	22.12	4.26		0.0	8.000	26.636		
to		120.0		0.0	0.0	0.0		
57	264.93	0.0169		0.0	8.000	0.135		Vel = 5.96
57	23.39	4.26		0.0	9.000	26.771		
to		120.0		0.0	0.0	0.0		
58	288.32	0.0197		0.0	9.000	0.177		Vel = 6.49
58	25.29	4.26		0.0	5.020	26.948		
to		120.0		0.0	0.0	0.0		
59	313.61	0.0231		0.0	5.020	0.116		Vel = 7.06
59	104.06	4.26	1T	26.334	2.400	27.064		
to		120.0	1E	13.167	39.501	0.0		
TOR	417.67	0.0391		0.0	41.901	1.637		Vel = 9.40
TOR	0.0	4.26	1E	13.167	11.000	28.701		
to		120.0	2B	31.601	73.736	7.764		* * Fixed Loss = 3
BOR	417.67	0.0391	1Fsp	0.0	84.736	3.312		Vel = 9.40
			1S	28.968				
BOR	0.0	6.357	1Zss	0.0	1.410	39.777		
to		120.0		0.0	0.0	2.295		* * Fixed Loss = 2.295
60	417.67	0.0057		0.0	1.410	0.008		Vel = 4.22
60	0.0	6.357	2E	35.205	10.670	42.080		
to		120.0		0.0	35.205	-4.621		
61	417.67	0.0056		0.0	45.875	0.255		Vel = 4.22
61	0.0	6.357	3E	52.808	168.940	37.714		
to		120.0		0.0	52.808	0.0		
TOER	417.67	0.0056		0.0	221.748	1.234		Vel = 4.22
TOER	0.0	6.357		0.0	0.420	38.948		
to		120.0		0.0	0.0	7.653		
ELL	417.67	0.0048		0.0	0.420	0.002		Vel = 4.22
ELL	0.0	6.16	4E	80.336	100.000	46.603		
to		140.0	1G	4.304	127.677	-2.166		
TEST	417.67	0.0049	1T	43.037	227.677	1.111		Vel = 4.50
	0.0							
	417.67					45.548		K Factor = 61.89
41	-0.32	1.682		0.0	15.000	23.258		
to		120.0		0.0	0.0	0.0		
62	-0.32	0.0		0.0	15.000	0.0		Vel = 0.05
62	26.00	1.682		0.0	15.000	23.258		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
63	25.68	0.0207		0.0	15.000	0.311		Vel = 3.71
63	26.17	1.682	1T	9.9	7.850	23.569		K Factor @ node EQ01
to		120.0		0.0	9.900	0.0		
64	51.85	0.0761		0.0	17.750	1.350		Vel = 7.49
64	0.0	4.26		0.0	8.000	24.919		
to		120.0		0.0	0.0	0.0		
65	51.85	0.0008		0.0	8.000	0.006		Vel = 1.17
65	51.86	4.26		0.0	8.000	24.925		
to		120.0		0.0	0.0	0.0		
66	103.71	0.0030		0.0	8.000	0.024		Vel = 2.33

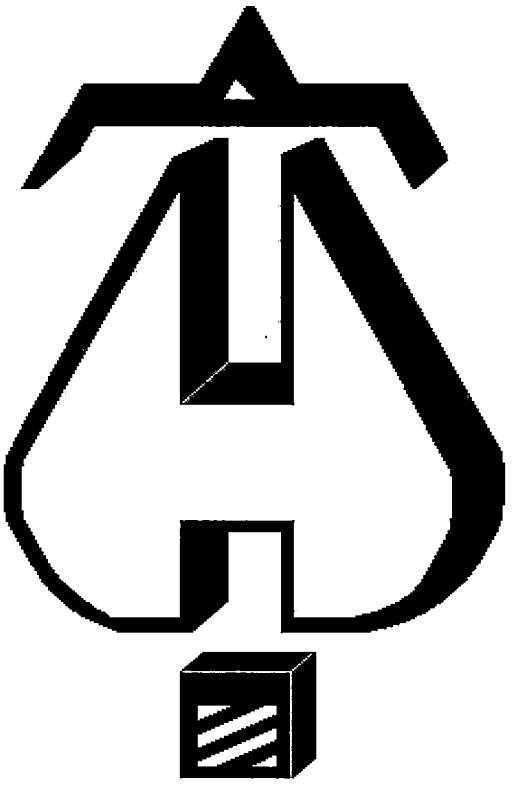
Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	*******	Notes	******
66	51.87	4.26	0.0		8.480	24.949				
to		120.0	0.0		0.0	0.0				
67	155.58	0.0062	0.0		8.480	0.053		Vel = 3.50		
67	51.93	4.26	0.0		8.000	25.002				
to		120.0	0.0		0.0	0.0				
68	207.51	0.0107	0.0		8.000	0.086		Vel = 4.67		
68	0.49	4.26	0.0		8.000	25.088				
to		120.0	0.0		0.0	0.0				
69	208.0	0.0107	0.0		8.000	0.086		Vel = 4.68		
69	-0.21	4.26	0.0		9.080	25.174				
to		120.0	0.0		0.0	0.0				
70	207.79	0.0108	0.0		9.080	0.098		Vel = 4.68		
70	-0.68	4.26	0.0		8.000	25.272				
to		120.0	0.0		0.0	0.0				
71	207.11	0.0106	0.0		8.000	0.085		Vel = 4.66		
71	-1.08	4.26	0.0		8.000	25.357				
to		120.0	0.0		0.0	0.0				
72	206.03	0.0106	0.0		8.000	0.085		Vel = 4.64		
72	-1.53	4.26	0.0		8.920	25.442				
to		120.0	0.0		0.0	0.0				
73	204.5	0.0104	0.0		8.920	0.093		Vel = 4.60		
73	-2.13	4.26	0.0		8.000	25.535				
to		120.0	0.0		0.0	0.0				
74	202.37	0.0102	0.0		8.000	0.082		Vel = 4.56		
74	-2.74	4.26	0.0		8.000	25.617				
to		120.0	0.0		0.0	0.0				
75	199.63	0.0099	0.0		8.000	0.079		Vel = 4.49		
75	-3.45	4.26	0.0		9.000	25.696				
to		120.0	0.0		0.0	0.0				
76	196.18	0.0097	0.0		9.000	0.087		Vel = 4.42		
76	-21.32	4.26	0.0		8.000	25.783				
to		120.0	0.0		0.0	0.0				
77	174.86	0.0079	0.0		8.000	0.063		Vel = 3.94		
77	-22.11	4.26	0.0		8.000	25.846				
to		120.0	0.0		0.0	0.0				
78	152.75	0.0060	0.0		8.000	0.048		Vel = 3.44		
78	-23.39	4.26	0.0		9.000	25.894				
to		120.0	0.0		0.0	0.0				
79	129.36	0.0046	0.0		9.000	0.041		Vel = 2.91		
79	-25.30	4.26	0.0		8.000	25.935				
to		120.0	0.0		0.0	0.0				
80	104.06	0.0029	0.0		8.000	0.023		Vel = 2.34		
80	-26.39	4.26	0.0		8.000	25.958				
to		120.0	0.0		0.0	0.0				
81	77.67	0.0018	0.0		8.000	0.014		Vel = 1.75		
81	-26.02	4.26	0.0		8.300	25.972				
to		120.0	0.0		0.0	0.0				
82	51.65	0.0008	0.0		8.300	0.007		Vel = 1.16		

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
82	-25.85	4.26		0.0	8.000	25.979		
to		120.0		0.0	0.0	0.0		
83	25.8	0.0002		0.0	8.000	0.002		Vel = 0.58
83	0.0	1.682	2T	19.799	30.470	25.981		
to		120.0		0.0	19.799	0.0		
84	25.8	0.0209		0.0	50.269	1.051		Vel = 3.73
84	0.0	4.26		0.0	8.000	27.032		
to		120.0		0.0	0.0	0.0		
85	25.8	0.0002		0.0	8.000	0.002		Vel = 0.58
85	25.85	4.26		0.0	8.290	27.034		
to		120.0		0.0	0.0	0.0		
86	51.65	0.0008		0.0	8.290	0.007		Vel = 1.16
86	26.02	4.26		0.0	8.000	27.041		
to		120.0		0.0	0.0	0.0		
87	77.67	0.0018		0.0	8.000	0.014		Vel = 1.75
87	26.39	4.26		0.0	2.980	27.055		
to		120.0		0.0	0.0	0.0		
59	104.06	0.0030		0.0	2.980	0.009		Vel = 2.34
	0.0							
	104.06					27.064		K Factor = 20.00
44	-52.51	1.682	1T	9.9	7.190	24.920		
to		120.0		0.0	9.900	0.0		
88	-52.51	-0.0778		0.0	17.090	-1.330		Vel = 7.58
88	26.18	1.682		0.0	15.000	23.590		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
89	-26.33	-0.0217		0.0	15.000	-0.326		Vel = 3.80
89	26.01	1.682		0.0	15.000	23.264		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
90	-0.32	0.0		0.0	15.000	0.0		Vel = 0.05
90	26.00	1.682		0.0	15.000	23.264		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
91	25.68	0.0207		0.0	15.000	0.311		Vel = 3.71
91	26.18	1.682	1T	9.9	7.850	23.575		K Factor @ node EQ01
to		120.0		0.0	9.900	0.0		
65	51.86	0.0761		0.0	17.750	1.350		Vel = 7.49
	0.0							
	51.86					24.925		K Factor = 10.39
45	-52.54	1.682	1T	9.9	7.190	24.945		
to		120.0		0.0	9.900	0.0		
92	-52.54	-0.0779		0.0	17.090	-1.332		Vel = 7.59
92	26.20	1.682		0.0	15.000	23.613		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
93	-26.34	-0.0217		0.0	15.000	-0.326		Vel = 3.80
93	26.01	1.682		0.0	15.000	23.287		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
94	-0.33	-0.0001		0.0	15.000	-0.001		Vel = 0.05
94	26.02	1.682		0.0	15.000	23.286		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
95	25.69	0.0208		0.0	15.000	0.312		Vel = 3.71

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
95	26.19	1.682	1T	9.9	7.850	23.598		K Factor @ node EQ01
to		120.0		0.0	9.900	0.0		
66	51.88	0.0761		0.0	17.750	1.351		Vel = 7.49
	0.0							
	51.88					24.949		K Factor = 10.39
46	-52.61	1.682	1T	9.9	7.190	24.999		
to		120.0		0.0	9.900	0.0		
96	-52.61	-0.0781		0.0	17.090	-1.335		Vel = 7.60
96	26.23	1.682		0.0	15.000	23.664		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
97	-26.38	-0.0218		0.0	15.000	-0.327		Vel = 3.81
97	26.04	1.682		0.0	15.000	23.337		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
98	-0.34	0.0		0.0	15.000	0.0		Vel = 0.05
98	26.05	1.682		0.0	15.000	23.337		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
99	25.71	0.0208		0.0	15.000	0.312		Vel = 3.71
99	26.22	1.682	1T	9.9	7.850	23.649		K Factor @ node EQ01
to		120.0		0.0	9.900	0.0		
67	51.93	0.0762		0.0	17.750	1.353		Vel = 7.50
	0.0							
	51.93					25.002		K Factor = 10.39
47	0.49	1.682	2T	19.799	60.040	25.087		
to		120.0		0.0	19.799	0.0		
68	0.49	0.0		0.0	79.839	0.001		Vel = 0.07
	0.0							
	0.49					25.088		K Factor = 0.10
69	0.20	1.682	2T	19.799	60.040	25.174		
to		120.0		0.0	19.799	0.0		
48	0.2	0.0		0.0	79.839	0.0		Vel = 0.03
	0.0							
	0.20					25.174		K Factor = 0.04
70	0.69	1.682	1T	9.9	7.850	25.272		
to		120.0		0.0	9.900	0.0		
100	0.69	0.0		0.0	17.750	0.0		Vel = 0.10
100	0.0	1.682	1T	9.9	52.190	25.272		
to		120.0		0.0	9.900	0.0		
49	0.69	0.0		0.0	62.090	0.002		Vel = 0.10
	0.0							
	0.69					25.274		K Factor = 0.14
71	1.08	1.682	1T	9.9	7.850	25.357		
to		120.0		0.0	9.900	0.0		
101	1.08	0.0001		0.0	17.750	0.001		Vel = 0.16
101	0.0	1.682	1T	9.9	52.190	25.358		
to		120.0		0.0	9.900	0.0		
50	1.08	0.0001		0.0	62.090	0.004		Vel = 0.16
	0.0							
	1.08					25.362		K Factor = 0.21

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
72	1.53	1.682	1T	9.9	7.850	25.442		
to		120.0		0.0	9.900	0.0		
102	1.53	0.0001		0.0	17.750	0.002		Vel = 0.22
102	0.0	1.682	1T	9.9	52.190	25.444		
to		120.0		0.0	9.900	0.0		
51	1.53	0.0001		0.0	62.090	0.007		Vel = 0.22
	0.0							
	1.53					25.451		K Factor = 0.30
73	2.12	1.682	1T	9.9	7.850	25.535		
to		120.0		0.0	9.900	0.0		
103	2.12	0.0002		0.0	17.750	0.003		Vel = 0.31
103	0.0	1.682	1T	9.9	52.190	25.538		
to		120.0		0.0	9.900	0.0		
52	2.12	0.0002		0.0	62.090	0.013		Vel = 0.31
	0.0							
	2.12					25.551		K Factor = 0.42
74	2.74	1.682	1T	9.9	7.850	25.617		
to		120.0		0.0	9.900	0.0		
104	2.74	0.0003		0.0	17.750	0.005		Vel = 0.40
104	0.0	1.682	1T	9.9	52.190	25.622		
to		120.0		0.0	9.900	0.0		
53	2.74	0.0003		0.0	62.090	0.021		Vel = 0.40
	0.0							
	2.74					25.643		K Factor = 0.54
75	3.46	1.682	1T	9.9	7.850	25.696		
to		120.0		0.0	9.900	0.0		
105	3.46	0.0005		0.0	17.750	0.009		Vel = 0.50
105	0.0	1.682	1T	9.9	52.190	25.705		
to		120.0		0.0	9.900	0.0		
54	3.46	0.0005		0.0	62.090	0.032		Vel = 0.50
	0.0							
	3.46					25.737		K Factor = 0.68
76	21.31	1.682	2T	19.799	30.470	25.783		
to		120.0		0.0	19.799	0.0		
55	21.31	0.0147		0.0	50.269	0.739		Vel = 3.08
	0.0							
	21.31					26.522		K Factor = 4.14
77	22.12	1.682	2T	19.799	30.470	25.846		
to		120.0		0.0	19.799	0.0		
56	22.12	0.0157		0.0	50.269	0.790		Vel = 3.19
	0.0							
	22.12					26.636		K Factor = 4.29
78	23.39	1.682	2T	19.799	30.470	25.894		
to		120.0		0.0	19.799	0.0		
57	23.39	0.0174		0.0	50.269	0.877		Vel = 3.38
	0.0							
	23.39					26.771		K Factor = 4.52
79	25.30	1.682	2T	19.799	30.470	25.935		
to		120.0		0.0	19.799	0.0		
58	25.3	0.0202		0.0	50.269	1.013		Vel = 3.65

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
	0.0							
	25.30					26.948		K Factor = 4.87
80	26.39	1.682	2T	19.799	30.470	25.958		
to		120.0		0.0	19.799	0.0		
87	26.39	0.0218		0.0	50.269	1.097		Vel = 3.81
	0.0							
	26.39					27.055		K Factor = 5.07
81	26.03	1.682	2T	19.799	30.470	25.972		
to		120.0		0.0	19.799	0.0		
86	26.03	0.0213		0.0	50.269	1.069		Vel = 3.76
	0.0							
	26.03					27.041		K Factor = 5.01
82	25.85	1.682	2T	19.799	30.470	25.979		
to		120.0		0.0	19.799	0.0		
85	25.85	0.0210		0.0	50.269	1.055		Vel = 3.73
	0.0							
	25.85					27.034		K Factor = 4.97



. . . Fire Protection by Computer Design

Premier Fire Systems, Inc.
Lic. # P00647
2 Ilene Court #21
Hillsborough, N.J. 08844
908-874-4144

Job Name	:	Trader Joes
Building	:	SPK100
Location	:	56 Chambers Bridge Road, Brick, NJ 08723
System	:	2
Contract	:	283
Data File	:	283 Trader Joes Submittal 02-07-19 Rev3 AREA 9.wxf283 Trader

HYDRAULIC CALCULATIONS
for

Project name: Trader Joes Vanilla Box
Location: 56 Chambers Bridge Road, Brick, NJ 08723
Drawing no: SPK100
Date: 02-07-2018

Design

Remote area number: 2
Remote area location: Most Demanding Remote Overhang
Occupancy classification: OHG2 - Temporary Storage - Mercantile
Density: 0.20 - Gpm/SqFt
Area of application: 855 Entire - SqFt
Coverage per sprinkler: 16' x 16' - SqFt
Type of sprinklers calculated: TYCO SIN#TY5339 Uprights 11.2K
No. of sprinklers calculated: 4
In-rack demand: N/A - GPM
Hose streams: 250 - GPM
Total water required (including hose streams): 454.872 - GPM @ 50.038 - Psi
Type of system: New Wet Grid System
Volume of dry or preaction system: N/A - Gal

Water supply information

Date: 05-06-2014
Location: Hydrant on Site
Source: MAC Sprinkler

Name of contractor: Premier Fire Systems, Inc.
Address: Lic. # P00647 / 2 Ilene Court #21 / Hillsborough, N.J. 08844
Phone number: 908-874-4144
Name of designer: Tsunami FireSuppression
Authority having jurisdiction: Local Fire Marshal
Notes: (Include peaking information or gridded systems here.) Saftey Factor: 23.24 psi
Electronically Peaked

Water Supply Curve C

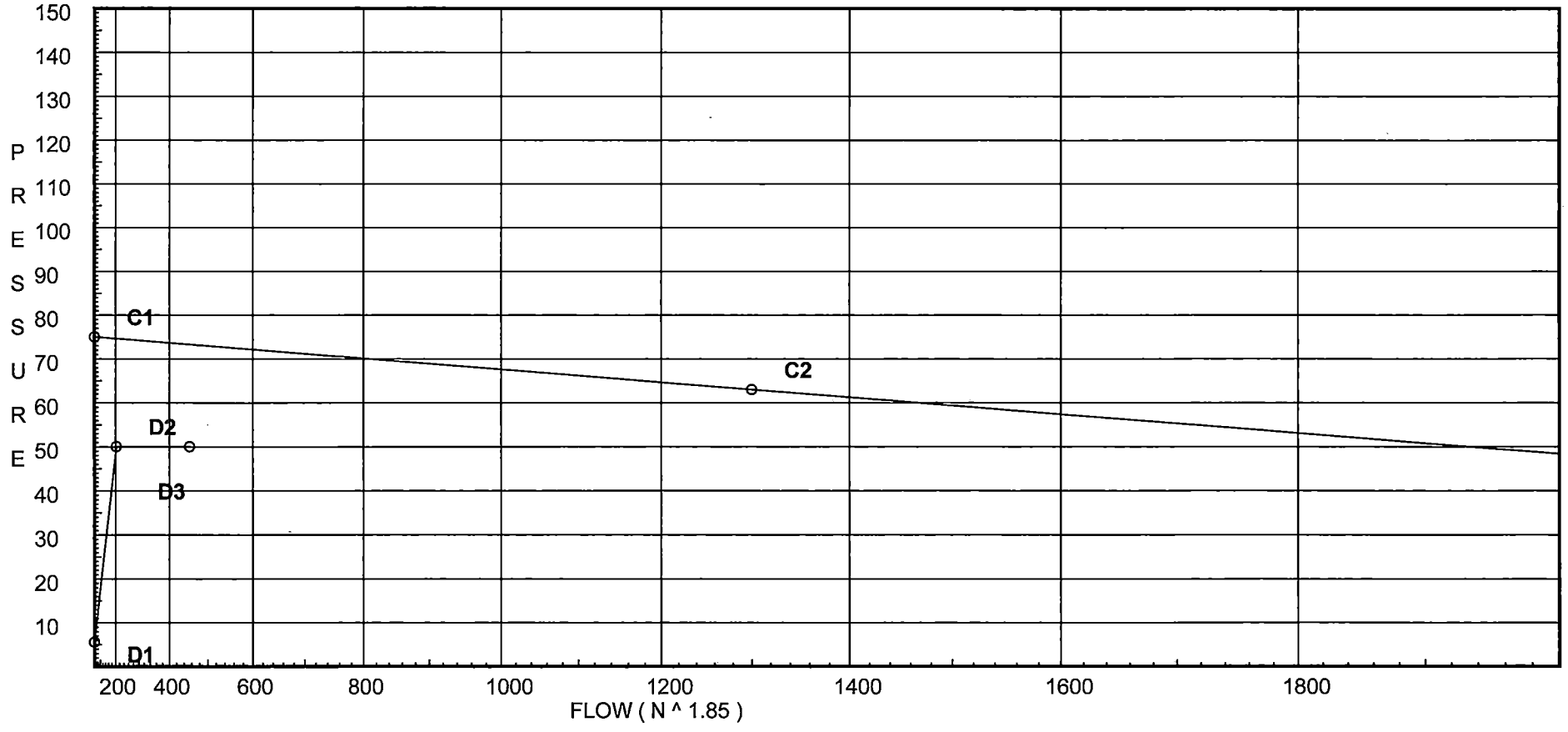
Premier Fire Systems, Inc.
Trader Joes

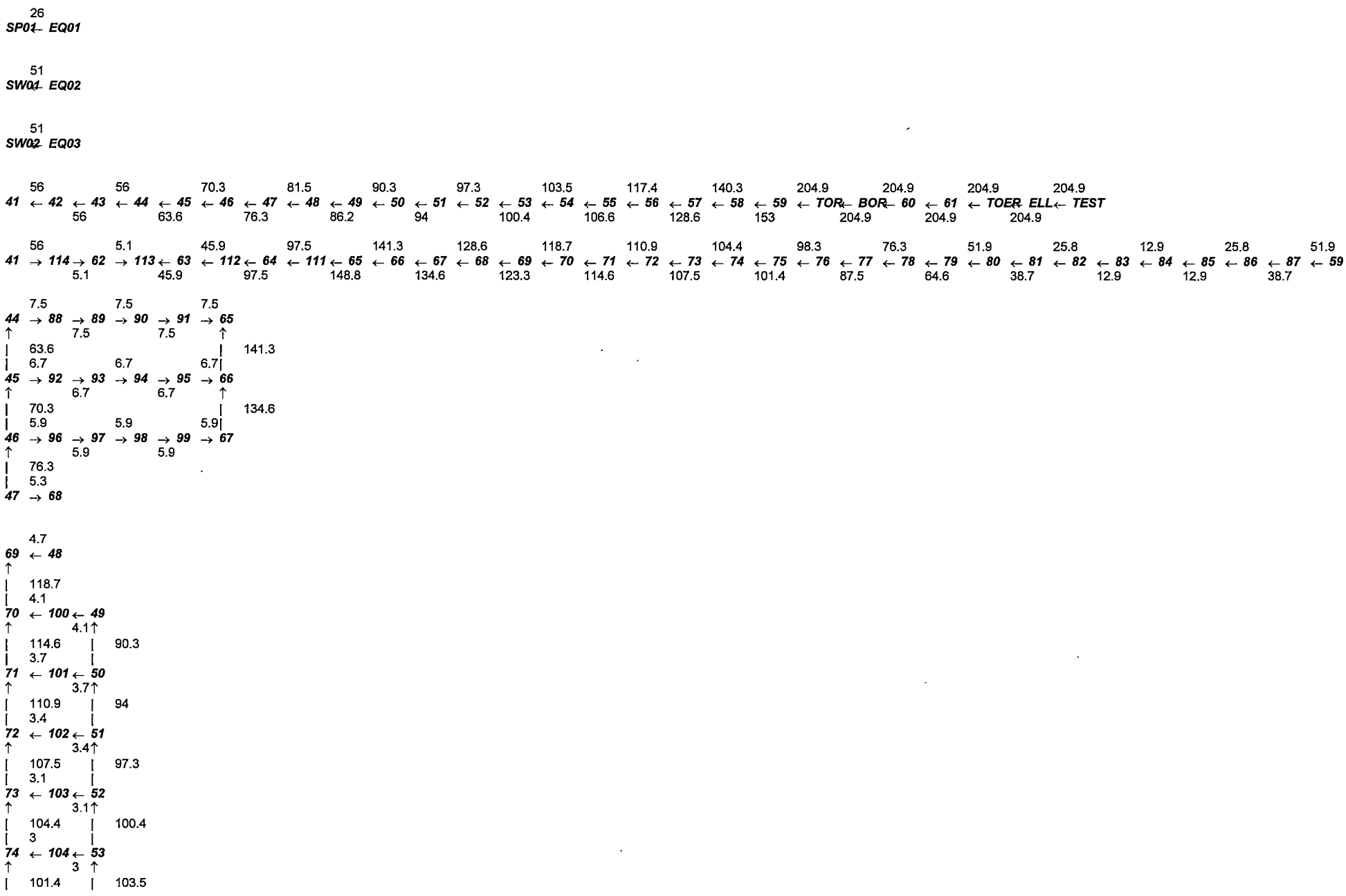
Date 02-07-2019

City Water Supply:
- C1 - Static Pressure : 75
- C2 - Residual Pressure: 63
- C2 - Residual Flow : 1300

Demand:

D1 - Elevation	: 5.630
D2 - System Flow	: 204.872
D2 - System Pressure	: 50.038
Hose (Demand)	: 250
D3 - System Demand	: 454.872
Safety Margin	: 23.242

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SP01 ← EQ01
51
SW01 ← EQ02
51
SW02 ← EQ03
56 56 70.3 81.5 90.3 97.3 103.5 117.4 140.3 204.9 204.9 204.9 204.9
41 ← 42 ← 43 ← 44 ← 45 ← 46 ← 47 ← 48 ← 49 ← 50 ← 51 ← 52 ← 53 ← 54 ← 55 ← 56 ← 57 ← 58 ← 59 ← TOR ← BOR ← 60 ← 61 ← TOER ELL ← TEST
56 63.6 76.3 86.2 94 100.4 106.6 128.6 153 204.9 204.9 204.9
56 5.1 45.9 97.5 141.3 128.6 118.7 110.9 104.4 98.3 76.3 51.9 25.8 12.9 25.8 51.9
41 → 114 → 62 → 113 ← 63 ← 112 ← 64 ← 111 ← 65 ← 66 ← 67 ← 68 ← 69 ← 70 ← 71 ← 72 ← 73 ← 74 ← 75 ← 76 ← 77 ← 78 ← 79 ← 80 ← 81 ← 82 ← 83 ← 84 ← 85 ← 86 ← 87 ← 59
5.1 45.9 97.5 148.8 134.6 123.3 114.6 107.5 101.4 87.5 64.6 38.7 12.9 12.9 38.7
7.5 7.5 7.5
44 → 88 → 89 → 90 → 91 → 65
7.5 7.5
63.6 141.3
6.7 6.7 6.7
45 → 92 → 93 → 94 → 95 → 66
6.7 6.7
70.3 134.6
5.9 5.9 5.9
46 → 96 → 97 → 98 → 99 → 67
5.9 5.9
76.3
5.3
47 → 68
4.7
69 ← 48
118.7
4.1
70 ← 100 ← 49
4.1
114.6 90.3
3.7
71 ← 101 ← 50
3.7
110.9 94
3.4
72 ← 102 ← 51
3.4
107.5 97.3
3.1
73 ← 103 ← 52
3.1
104.4 100.4
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74 ← 104 ← 53
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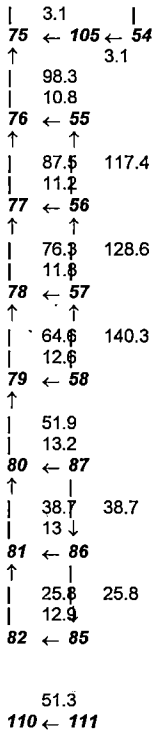
101.4 103.5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75 ← 105 ← 54
3.1
98.3
10.8
76 ← 55
87.5 117.4
11.2
77 ← 56
76.3 128.6
11.8
78 ← 57
64.6 140.3
12.6
79 ← 58
51.9
13.2
80 ← 87
38.7 38.7
13
81 ← 86
25.8 25.8
12.9
82 ← 85
51.3
110 ← 111

Fittings Used Summary

Fitting Legend

Abbrev.	Name	½	¾	1	1¼	1½	2	2½	3	3½	4	5	6	8	10	12	14	16	18	20	24
B	NFPA 13 Butterfly Valve	0	0	0	0	0	6	7	10	0	12	9	10	12	19	21	0	0	0	0	0
E	NFPA 13 90' Standard Elbow	1	2	2	3	4	5	6	7	8	10	12	14	18	22	27	35	40	45	50	61
Fsp	Flow Switch Potter VSR	Fitting generates a Fixed Loss Based on Flow																			
G	NFPA 13 Gate Valve	0	0	0	0	0	1	1	1	1	2	2	3	4	5	6	7	8	10	11	13
S	NFPA 13 Swing Check	0	0	5	7	9	11	14	16	19	22	27	32	45	55	65					
T	NFPA 13 90' Flow thru Tee	3	4	5	6	8	10	12	15	17	20	25	30	35	50	60	71	81	91	101	121
Zss	Wilkins 350ASTDA	Fitting generates a Fixed Loss Based on Flow																			

Units Summary

Diameter Units	Inches
Length Units	Feet
Flow Units	US Gallons per Minute
Pressure Units	Pounds per Square Inch

Note: Fitting Legend provides equivalent pipe lengths for fittings types of various diameters. Equivalent lengths shown are standard for actual diameters of Sched 40 pipe and CFactors of 120 except as noted with *. The fittings marked with a * show equivalent lengths values supplied by manufacturers based on specific pipe diameters and CFactors and they require no adjustment. All values for fittings not marked with a * will be adjusted in the calculation for CFactors of other than 120 and diameters other than Sched 40 per NFPA.

Pressure / Flow Summary - STANDARD

Premier Fire Systems, Inc.
Trader Joes

Date 02-07-2019

Node No.	Elevation	K-Fact	Pt Actual	Pn	Flow Actual	Density	Area	Press Req.
SP01	14.0	5.6	21.56	na	26.0	0.2	130	7.0
EQ01	13.0		23.26	na				
SW01	14.0	11.2	20.7	na	50.96	0.2	0.001	20.7
EQ02	13.0		32.15	na				
SW02	14.0	11.2	20.7	na	50.96	0.2	0.001	20.7
EQ03	13.0		33.43	na				
41	13.0		32.99	na				
42	13.0		34.31	na				
43	13.0		35.81	na				
44	13.0		35.82	na				
45	13.0		35.83	na				
46	13.0		35.84	na				
47	13.0		35.86	na				
48	13.0		35.87	na				
49	13.0		35.89	na				
50	13.0		35.91	na				
51	13.0		35.93	na				
52	13.0		35.95	na				
53	13.0		35.98	na				
54	13.0		36.0	na				
55	13.0		36.2	na				
56	13.0		36.23	na				
57	13.0		36.27	na				
58	13.0		36.31	na				
59	13.0		36.34	na				
TOR	13.0		36.78	na				
BOR	2.0		45.43	na				
60	2.0		48.48	na				
61	12.67		43.92	na				
TOER	12.67		44.25	na				
ELL	-5.0		51.91	na				
TEST	0.0		50.04	na	250.0			
114	13.0	K = K @ EQ02	32.16	na	50.97			
62	13.0		32.15	na				
113	13.0	K = K @ EQ02	32.15	na	50.96			
63	13.0		32.56	na				
112	13.0	K = K @ EQ02	32.98	na	51.61			
64	13.0		35.61	na				
111	13.0		35.61	na				
65	13.0		35.65	na				
66	13.0		35.69	na				
67	13.0		35.73	na				
68	13.0		35.77	na				
69	13.0		35.8	na				
70	13.0		35.84	na				
71	13.0		35.86	na				
72	13.0		35.89	na				
73	13.0		35.92	na				
74	13.0		35.94	na				
75	13.0		35.97	na				
76	13.0		35.99	na				
77	13.0		36.01	na				
78	13.0		36.02	na				
79	13.0		36.03	na				
80	13.0		36.04	na				
81	13.0		36.04	na				
82	13.0		36.04	na				
83	13.0		36.05	na				
84	13.0		36.34	na				
85	13.0		36.34	na				
86	13.0		36.34	na				

Node No.	Elevation	K-Fact	Pt Actual	Pn	Flow Actual	Density	Area	Press Req.
87	13.0		36.34	na				
88	13.0		35.78	na				
89	13.0		35.75	na				
90	13.0		35.72	na				
91	13.0		35.69	na				
92	13.0		35.8	na				
93	13.0		35.78	na				
94	13.0		35.75	na				
95	13.0		35.72	na				
96	13.0		35.82	na				
97	13.0		35.8	na				
98	13.0		35.78	na				
99	13.0		35.76	na				
100	13.0		35.85	na				
101	13.0		35.87	na				
102	13.0		35.9	na				
103	13.0		35.93	na				
104	13.0		35.95	na				
105	13.0		35.97	na				
110	13.0	K = K @ EQ03	33.93	na	51.33			

The maximum velocity is 18.92 and it occurs in the pipe between nodes SW01 and EQ02

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
SP01	26.00	1.049	1T	5.0	1.000	21.556		K Factor = 5.60
to		120.0		0.0	5.000	0.433		
EQ01	26.0	0.2115		0.0	6.000	1.269		Vel = 9.65
	0.0							
	26.00					23.258		K Factor = 5.39
SW01	50.96	1.049	2T	10.0	5.000	20.700		K Factor = 11.20
to		120.0		0.0	10.000	0.433		
EQ02	50.96	0.7342		0.0	15.000	11.013		Vel = 18.92
	0.0							
	50.96					32.146		K Factor = 8.99
SW02	50.96	1.049	2T	10.0	6.750	20.700		K Factor = 11.20
to		120.0		0.0	10.000	0.433		
EQ03	50.96	0.7342		0.0	16.750	12.298		Vel = 18.92
	0.0							
	50.96					33.431		K Factor = 8.81
41	56.05	1.682		0.0	15.000	32.995		
to		120.0		0.0	0.0	0.0		
42	56.05	0.0878		0.0	15.000	1.317		Vel = 8.09
42	0.0	1.682	1T	9.9	7.190	34.312		
to		120.0		0.0	9.900	0.0		
43	56.05	0.0879		0.0	17.090	1.502		Vel = 8.09
43	0.0	4.26		0.0	8.000	35.814		
to		120.0		0.0	0.0	0.0		
44	56.05	0.0009		0.0	8.000	0.007		Vel = 1.26
44	7.54	4.26		0.0	8.000	35.821		
to		120.0		0.0	0.0	0.0		
45	63.59	0.0012		0.0	8.000	0.010		Vel = 1.43
45	6.72	4.26		0.0	8.480	35.831		
to		120.0		0.0	0.0	0.0		
46	70.31	0.0014		0.0	8.480	0.012		Vel = 1.58
46	5.95	4.26		0.0	8.000	35.843		
to		120.0		0.0	0.0	0.0		
47	76.26	0.0018		0.0	8.000	0.014		Vel = 1.72
47	5.27	4.26		0.0	8.000	35.857		
to		120.0		0.0	0.0	0.0		
48	81.53	0.0019		0.0	8.000	0.015		Vel = 1.84
48	4.68	4.26		0.0	9.080	35.872		
to		120.0		0.0	0.0	0.0		
49	86.21	0.0021		0.0	9.080	0.019		Vel = 1.94
49	4.09	4.26		0.0	8.000	35.891		
to		120.0		0.0	0.0	0.0		
50	90.3	0.0022		0.0	8.000	0.018		Vel = 2.03
50	3.68	4.26		0.0	8.000	35.909		
to		120.0		0.0	0.0	0.0		
51	93.98	0.0025		0.0	8.000	0.020		Vel = 2.12
51	3.35	4.26		0.0	8.920	35.929		
to		120.0		0.0	0.0	0.0		
52	97.33	0.0027		0.0	8.920	0.024		Vel = 2.19

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
52	3.11	4.26		0.0	8.000	35.953		
to		120.0		0.0	0.0	0.0		
53	100.44	0.0028		0.0	8.000	0.022		Vel = 2.26
53	3.04	4.26		0.0	8.000	35.975		
to		120.0		0.0	0.0	0.0		
54	103.48	0.0030		0.0	8.000	0.024		Vel = 2.33
54	3.07	4.26	2E	26.334	38.580	35.999		
to		120.0		0.0	26.334	0.0		
55	106.55	0.0031		0.0	64.914	0.203		Vel = 2.40
55	10.84	4.26		0.0	8.000	36.202		
to		120.0		0.0	0.0	0.0		
56	117.39	0.0036		0.0	8.000	0.029		Vel = 2.64
56	11.17	4.26		0.0	8.000	36.231		
to		120.0		0.0	0.0	0.0		
57	128.56	0.0045		0.0	8.000	0.036		Vel = 2.89
57	11.76	4.26		0.0	9.000	36.267		
to		120.0		0.0	0.0	0.0		
58	140.32	0.0052		0.0	9.000	0.047		Vel = 3.16
58	12.65	4.26		0.0	5.020	36.314		
to		120.0		0.0	0.0	0.0		
59	152.97	0.0060		0.0	5.020	0.030		Vel = 3.44
59	51.90	4.26	1T	26.334	2.400	36.344		
to		120.0	1E	13.167	39.501	0.0		
TOR	204.87	0.0105		0.0	41.901	0.438		Vel = 4.61
TOR	0.0	4.26	1E	13.167	11.000	36.782		
to		120.0	2B	31.601	73.736	7.764		* * Fixed Loss = 3
BOR	204.87	0.0105	1Fsp	0.0	84.736	0.887		Vel = 4.61
			1S	28.968				
BOR	0.0	6.357	1Zss	0.0	1.410	45.433		
to		120.0		0.0	0.0	3.040		* * Fixed Loss = 3.04
60	204.87	0.0014		0.0	1.410	0.002		Vel = 2.07
60	0.0	6.357	2E	35.205	10.670	48.475		
to		120.0		0.0	35.205	-4.621		
61	204.87	0.0015		0.0	45.875	0.068		Vel = 2.07
61	0.0	6.357	3E	52.808	168.940	43.922		
to		120.0		0.0	52.808	0.0		
TOER	204.87	0.0015		0.0	221.748	0.331		Vel = 2.07
TOER	0.0	6.357		0.0	0.420	44.253		
to		120.0		0.0	0.0	7.653		
ELL	204.87	0.0		0.0	0.420	0.0		Vel = 2.07
ELL	0.0	6.16	4E	80.336	100.000	51.906		
to		140.0	1G	4.304	127.677	-2.166		
TEST	204.87	0.0013	1T	43.037	227.677	0.298		Vel = 2.21
	250.00							Qa = 250.00
	454.87					50.038		K Factor = 64.30
41	-56.05	1.682		0.0	9.500	32.995		
to		120.0		0.0	0.0	0.0		
114	-56.05	-0.0879		0.0	9.500	-0.835		Vel = 8.09

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
114	50.97	1.682		0.0	5.500	32.160		K Factor @ node EQ02
to		120.0		0.0	0.0	0.0		
62	-5.08	-0.0011		0.0	5.500	-0.006		Vel = 0.73
62	0.0	1.682		0.0	8.330	32.154		
to		120.0		0.0	0.0	0.0		
113	-5.08	-0.0010		0.0	8.330	-0.008		Vel = 0.73
113	50.96	1.682		0.0	6.750	32.146		K Factor @ node EQ02
to		120.0		0.0	0.0	0.0		
63	45.88	0.0606		0.0	6.750	0.409		Vel = 6.62
63	0.0	1.682		0.0	7.000	32.555		
to		120.0		0.0	0.0	0.0		
112	45.88	0.0607		0.0	7.000	0.425		Vel = 6.62
112	51.61	1.682	1T	9.9	0.850	32.980		K Factor @ node EQ02
to		120.0		0.0	9.900	0.0		
64	97.49	0.2446		0.0	10.750	2.629		Vel = 14.08
64	0.0	4.26		0.0	1.750	35.609		
to		120.0		0.0	0.0	0.0		
111	97.49	0.0029		0.0	1.750	0.005		Vel = 2.19
111	51.33	4.26		0.0	6.250	35.614		
to		120.0		0.0	0.0	0.0		
65	148.82	0.0058		0.0	6.250	0.036		Vel = 3.35
65	-7.53	4.26		0.0	8.000	35.650		
to		120.0		0.0	0.0	0.0		
66	141.29	0.0052		0.0	8.000	0.042		Vel = 3.18
66	-6.73	4.26		0.0	8.480	35.692		
to		120.0		0.0	0.0	0.0		
67	134.56	0.0048		0.0	8.480	0.041		Vel = 3.03
67	-5.94	4.26		0.0	8.000	35.733		
to		120.0		0.0	0.0	0.0		
68	128.62	0.0044		0.0	8.000	0.035		Vel = 2.90
68	-5.28	4.26		0.0	8.000	35.768		
to		120.0		0.0	0.0	0.0		
69	123.34	0.0041		0.0	8.000	0.033		Vel = 2.78
69	-4.68	4.26		0.0	9.080	35.801		
to		120.0		0.0	0.0	0.0		
70	118.66	0.0039		0.0	9.080	0.035		Vel = 2.67
70	-4.09	4.26		0.0	8.000	35.836		
to		120.0		0.0	0.0	0.0		
71	114.57	0.0035		0.0	8.000	0.028		Vel = 2.58
71	-3.68	4.26		0.0	8.000	35.864		
to		120.0		0.0	0.0	0.0		
72	110.89	0.0034		0.0	8.000	0.027		Vel = 2.50
72	-3.35	4.26		0.0	8.920	35.891		
to		120.0		0.0	0.0	0.0		
73	107.54	0.0031		0.0	8.920	0.028		Vel = 2.42
73	-3.11	4.26		0.0	8.000	35.919		
to		120.0		0.0	0.0	0.0		
74	104.43	0.0030		0.0	8.000	0.024		Vel = 2.35

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
74	-3.03	4.26		0.0	8.000	35.943		
to		120.0		0.0	0.0	0.0		
75	101.4	0.0029		0.0	8.000	0.023		Vel = 2.28
75	-3.08	4.26		0.0	9.000	35.966		
to		120.0		0.0	0.0	0.0		
76	98.32	0.0027		0.0	9.000	0.024		Vel = 2.21
76	-10.83	4.26		0.0	8.000	35.990		
to		120.0		0.0	0.0	0.0		
77	87.49	0.0022		0.0	8.000	0.018		Vel = 1.97
77	-11.18	4.26		0.0	8.000	36.008		
to		120.0		0.0	0.0	0.0		
78	76.31	0.0016		0.0	8.000	0.013		Vel = 1.72
78	-11.76	4.26		0.0	9.000	36.021		
to		120.0		0.0	0.0	0.0		
79	64.55	0.0012		0.0	9.000	0.011		Vel = 1.45
79	-12.64	4.26		0.0	8.000	36.032		
to		120.0		0.0	0.0	0.0		
80	51.91	0.0009		0.0	8.000	0.007		Vel = 1.17
80	-13.17	4.26		0.0	8.000	36.039		
to		120.0		0.0	0.0	0.0		
81	38.74	0.0005		0.0	8.000	0.004		Vel = 0.87
81	-12.98	4.26		0.0	8.300	36.043		
to		120.0		0.0	0.0	0.0		
82	25.76	0.0002		0.0	8.300	0.002		Vel = 0.58
82	-12.89	4.26		0.0	8.000	36.045		
to		120.0		0.0	0.0	0.0		
83	12.87	0.0		0.0	8.000	0.0		Vel = 0.29
83	0.0	1.682	2T	19.799	30.470	36.045		
to		120.0		0.0	19.799	0.0		
84	12.87	0.0058		0.0	50.269	0.290		Vel = 1.86
84	0.0	4.26		0.0	8.000	36.335		
to		120.0		0.0	0.0	0.0		
85	12.87	0.0001		0.0	8.000	0.001		Vel = 0.29
85	12.89	4.26		0.0	8.290	36.336		
to		120.0		0.0	0.0	0.0		
86	25.76	0.0002		0.0	8.290	0.002		Vel = 0.58
86	12.98	4.26		0.0	8.000	36.338		
to		120.0		0.0	0.0	0.0		
87	38.74	0.0005		0.0	8.000	0.004		Vel = 0.87
87	13.17	4.26		0.0	2.980	36.342		
to		120.0		0.0	0.0	0.0		
59	51.91	0.0007		0.0	2.980	0.002		Vel = 1.17
	0.0							
	51.91					36.344		K Factor = 8.61
44	-7.54	1.682	1T	9.9	7.190	35.821		
to		120.0		0.0	9.900	0.0		
88	-7.54	-0.0021		0.0	17.090	-0.036		Vel = 1.09
88	0.0	1.682		0.0	15.000	35.785		
to		120.0		0.0	0.0	0.0		
89	-7.54	-0.0022		0.0	15.000	-0.033		Vel = 1.09

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
89	0.0	1.682		0.0	15.000	35.752		
to		120.0		0.0	0.0	0.0		
90	-7.54	-0.0021		0.0	15.000	-0.032		Vel = 1.09
90	0.0	1.682		0.0	15.000	35.720		
to		120.0		0.0	0.0	0.0		
91	-7.54	-0.0021		0.0	15.000	-0.032		Vel = 1.09
91	0.0	1.682	1T	9.9	7.850	35.688		
to		120.0		0.0	9.900	0.0		
65	-7.54	-0.0021		0.0	17.750	-0.038		Vel = 1.09
	0.0							
	-7.54					35.650		K Factor = -1.26
45	-6.73	1.682	1T	9.9	7.190	35.831		
to		120.0		0.0	9.900	0.0		
92	-6.73	-0.0018		0.0	17.090	-0.030		Vel = 0.97
92	0.0	1.682		0.0	15.000	35.801		
to		120.0		0.0	0.0	0.0		
93	-6.73	-0.0017		0.0	15.000	-0.026		Vel = 0.97
93	0.0	1.682		0.0	15.000	35.775		
to		120.0		0.0	0.0	0.0		
94	-6.73	-0.0017		0.0	15.000	-0.026		Vel = 0.97
94	0.0	1.682		0.0	15.000	35.749		
to		120.0		0.0	0.0	0.0		
95	-6.73	-0.0017		0.0	15.000	-0.026		Vel = 0.97
95	0.0	1.682	1T	9.9	7.850	35.723		
to		120.0		0.0	9.900	0.0		
66	-6.73	-0.0017		0.0	17.750	-0.031		Vel = 0.97
	0.0							
	-6.73					35.692		K Factor = -1.13
46	-5.94	1.682	1T	9.9	7.190	35.843		
to		120.0		0.0	9.900	0.0		
96	-5.94	-0.0013		0.0	17.090	-0.023		Vel = 0.86
96	0.0	1.682		0.0	15.000	35.820		
to		120.0		0.0	0.0	0.0		
97	-5.94	-0.0014		0.0	15.000	-0.021		Vel = 0.86
97	0.0	1.682		0.0	15.000	35.799		
to		120.0		0.0	0.0	0.0		
98	-5.94	-0.0014		0.0	15.000	-0.021		Vel = 0.86
98	0.0	1.682		0.0	15.000	35.778		
to		120.0		0.0	0.0	0.0		
99	-5.94	-0.0014		0.0	15.000	-0.021		Vel = 0.86
99	0.0	1.682	1T	9.9	7.850	35.757		
to		120.0		0.0	9.900	0.0		
67	-5.94	-0.0014		0.0	17.750	-0.024		Vel = 0.86
	0.0							
	-5.94					35.733		K Factor = -0.99
47	-5.27	1.682	2T	19.799	60.040	35.857		
to		120.0		0.0	19.799	0.0		
68	-5.27	-0.0011		0.0	79.839	-0.089		Vel = 0.76

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
	0.0							
	-5.27					35.768		K Factor = -0.88
69	4.68	1.682	2T	19.799	60.040	35.801		
to		120.0		0.0	19.799	0.0		
48	4.68	0.0009		0.0	79.839	0.071		Vel = 0.68
	0.0							
	4.68					35.872		K Factor = 0.78
70	4.10	1.682	1T	9.9	7.850	35.836		
to		120.0		0.0	9.900	0.0		
100	4.1	0.0007		0.0	17.750	0.012		Vel = 0.59
100	0.0	1.682	1T	9.9	52.190	35.848		
to		120.0		0.0	9.900	0.0		
49	4.1	0.0007		0.0	62.090	0.043		Vel = 0.59
	0.0							
	4.10					35.891		K Factor = 0.68
71	3.67	1.682	1T	9.9	7.850	35.864		
to		120.0		0.0	9.900	0.0		
101	3.67	0.0006		0.0	17.750	0.010		Vel = 0.53
101	0.0	1.682	1T	9.9	52.190	35.874		
to		120.0		0.0	9.900	0.0		
50	3.67	0.0006		0.0	62.090	0.035		Vel = 0.53
	0.0							
	3.67					35.909		K Factor = 0.61
72	3.35	1.682	1T	9.9	7.850	35.891		
to		120.0		0.0	9.900	0.0		
102	3.35	0.0005		0.0	17.750	0.009		Vel = 0.48
102	0.0	1.682	1T	9.9	52.190	35.900		
to		120.0		0.0	9.900	0.0		
51	3.35	0.0005		0.0	62.090	0.029		Vel = 0.48
	0.0							
	3.35					35.929		K Factor = 0.56
73	3.12	1.682	1T	9.9	7.850	35.919		
to		120.0		0.0	9.900	0.0		
103	3.12	0.0005		0.0	17.750	0.008		Vel = 0.45
103	0.0	1.682	1T	9.9	52.190	35.927		
to		120.0		0.0	9.900	0.0		
52	3.12	0.0004		0.0	62.090	0.026		Vel = 0.45
	0.0							
	3.12					35.953		K Factor = 0.52
74	3.03	1.682	1T	9.9	7.850	35.943		
to		120.0		0.0	9.900	0.0		
104	3.03	0.0004		0.0	17.750	0.007		Vel = 0.44
104	0.0	1.682	1T	9.9	52.190	35.950		
to		120.0		0.0	9.900	0.0		
53	3.03	0.0004		0.0	62.090	0.025		Vel = 0.44
	0.0							
	3.03					35.975		K Factor = 0.51
75	3.08	1.682	1T	9.9	7.850	35.966		
to		120.0		0.0	9.900	0.0		
105	3.08	0.0004		0.0	17.750	0.007		Vel = 0.44

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
105	0.0	1.682	1T	9.9	52.190	35.973		
to		120.0		0.0	9.900	0.0		
54	3.08	0.0004		0.0	62.090	0.026		Vel = 0.44
	0.0							
	3.08					35.999		K Factor = 0.51
76	10.83	1.682	2T	19.799	30.470	35.990		
to		120.0		0.0	19.799	0.0		
55	10.83	0.0042		0.0	50.269	0.212		Vel = 1.56
	0.0							
	10.83					36.202		K Factor = 1.80
77	11.18	1.682	2T	19.799	30.470	36.008		
to		120.0		0.0	19.799	0.0		
56	11.18	0.0044		0.0	50.269	0.223		Vel = 1.61
	0.0							
	11.18					36.231		K Factor = 1.86
78	11.76	1.682	2T	19.799	30.470	36.021		
to		120.0		0.0	19.799	0.0		
57	11.76	0.0049		0.0	50.269	0.246		Vel = 1.70
	0.0							
	11.76					36.267		K Factor = 1.95
79	12.65	1.682	2T	19.799	30.470	36.032		
to		120.0		0.0	19.799	0.0		
58	12.65	0.0056		0.0	50.269	0.282		Vel = 1.83
	0.0							
	12.65					36.314		K Factor = 2.10
80	13.16	1.682	2T	19.799	30.470	36.039		
to		120.0		0.0	19.799	0.0		
87	13.16	0.0060		0.0	50.269	0.303		Vel = 1.90
	0.0							
	13.16					36.342		K Factor = 2.18
81	12.98	1.682	2T	19.799	30.470	36.043		
to		120.0		0.0	19.799	0.0		
86	12.98	0.0059		0.0	50.269	0.295		Vel = 1.87
	0.0							
	12.98					36.338		K Factor = 2.15
82	12.89	1.682	2T	19.799	30.470	36.045		
to		120.0		0.0	19.799	0.0		
85	12.89	0.0058		0.0	50.269	0.291		Vel = 1.86
	0.0							
	12.89					36.336		K Factor = 2.14
110	51.33	1.682	1T	9.9	12.700	33.926		K Factor @ node EQ03
to		120.0		0.0	9.900	0.0		
111	51.33	0.0747		0.0	22.600	1.688		Vel = 7.41
	0.0							
	51.33					35.614		K Factor = 8.60

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Series DS-3 Dry-Type Sprinklers 11.2K Horizontal Sidewall Standard Response, Extended Coverage

General Description

TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) are decorative glass bulb automatic sprinklers. They are intended for use in applications where the sprinklers and/or a portion of the connecting piping may be exposed to freezing temperatures; for example, horizontal piping extensions through a wall to protect an unheated area of a building.

Series DS-3 Extended Coverage Ordinary Hazard Horizontal Sidewall, Dry-Type Sprinklers are designed for extended coverage use in ordinary hazard occupancies (ECOH) per NFPA 13.

Series DS-3 Dry-Type Sprinklers provide protection of coverage areas up to 16 ft x 20 ft (320 ft²) as compared to standard coverage horizontal sidewall sprinklers having a maximum coverage area of 10 ft x 10 ft (100 ft²) for ordinary hazard occupancies.

NOTICE

Series DS-3 Dry-Type Sprinklers described herein must be installed and maintained in compliance with this document, as well as with the applicable standards of the NATIONAL FIRE PROTECTION ASSOCIATION (NFPA), in addition to the standards of any other authorities having jurisdiction. Failure to do so may impair the performance of these devices.

The owner is responsible for maintaining their fire protection system and devices in proper operating condition. Contact the installing contractor or product manufacturer with any questions.

Series DS-3 Dry-Type Sprinklers must only be installed in fittings that meet the requirements of the Design Criteria section. Installation of Series DS-3 Dry-Type Sprinklers in a recessed installation will void all sprinkler warranties, as well as void the sprinkler's laboratory Approvals.

IMPORTANT

Refer to Technical Data Sheet TFP2300 for warnings pertaining to regulatory and health information.

Always refer to Technical Data Sheet TFP700 for the "INSTALLER WARNING" that provides cautions with respect to handling and installation of sprinkler systems and components. Improper handling and installation can permanently damage a sprinkler system or its components and cause the sprinkler to fail to operate in a fire situation or cause it to operate prematurely.

Sprinkler Identification Number (SIN)

TY5339

Technical Data

Approvals
UL and C-UL Listed

Refer to Table A and the Design Criteria section

Maximum Working Pressure
175 psi (12,1 bar)

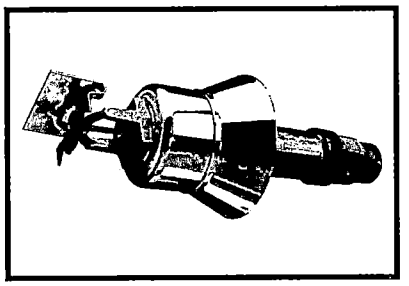
Inlet Thread Connections
1 Inch NPT
ISO 7-R 1

Discharge Coefficient
Refer to Table B

Temperature Ratings
155°F (68°C) and 200°F (93°C)

Finishes
Sprinkler: Refer to Table E

Escutcheon: Refer to Table E



Physical Characteristics

Inlet	Copper
Plug	Copper
Yoke	Stainless Steel
Casing	Galvanized Carbon Steel
Insert	Bronze
Bulb Seat	Bronze
Bulb	Glass (3 mm)
Compression Screw	Bronze
Deflector	Bronze
Frame	Bronze
Guide Tube	Stainless Steel
Water Tube	Stainless Steel
Spring	Stainless Steel
Sealing Assembly	Beryllium Nickel w/TEFLON
Pin	Stainless Steel
Button Spring	Stainless Steel
Helper Spring	Stainless Steel
Escutcheon	Carbon Steel

Operation

When TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) are in service, water is prevented from entering the assembly by the Plug with Sealing Assembly (Ref. Figure 1) in the Inlet of the sprinkler.

The glass bulb contains a fluid that expands when exposed to heat. When the rated temperature is reached, the fluid expands sufficiently to shatter the glass bulb, and the Bulb Seat is released.

The compressed Spring is then able to expand and push the Water Tube as well as the Guide Tube outward. This action simultaneously pulls inward on the Yoke, withdrawing the Plug with Sealing Assembly from the Inlet allowing the sprinkler to activate and flow water.

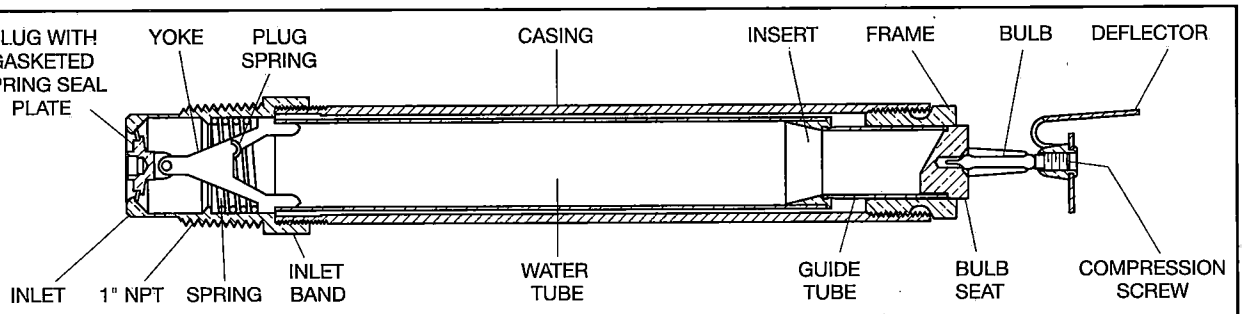


FIGURE 1
SERIES DS-3 HORIZONTAL SIDEWALL DRY-TYPE SPRINKLER TY5339 (ECOH) ASSEMBLY

Temperature Rating	Bulb Color Code	SPRINKLER FINISH		
		Natural Brass	Chrome Plated	White Polyester
155°F (68°C)	Red	1, 2		
200°F (93°C)	Green			

Notes:
1. Listed by Underwriters Laboratories, Inc. (maximum order length of 48 inches)
2. Listed by Underwriters Laboratories for use in Canada (maximum order length of 48 inches).

TABLE A
SERIES DS-3 HORIZONTAL SIDEWALL DRY-TYPE SPRINKLERS EXTENDED COVERAGE, ORDINARY HAZARD (TY5339) LABORATORY LISTINGS AND APPROVALS

Length, Inches (mm)	K-factor, gpm/psi$^{1/2}$ (lpm/bar$^{1/2}$)
2-1/2 to 14-3/4 (63 mm to 375 mm)	11.2 (161,3)
15 to 18-3/4 (381 mm to 476 mm)	10.9 (157,0)
19 to 23 (483 mm to 584 mm)	10.8 (155,5)
23-1/4 to 26-3/4 (591 mm to 679 mm)	10.7 (154,1)
27-1/4 to 31-1/4 (692 mm to 794 mm)	10.6 (152,6)
31-1/2 to 35-1/4 (800 mm to 895 mm)	10.5 (151,2)
35-1/2 to 39-1/2 (902 mm to 1003 mm)	10.4 (149,8)
39-3/4 to 43-1/2 (1010 mm to 1105 mm)	10.3 (148,3)
43-3/4 to 48 (111 mm to 1219 mm)	10.2 (146,9)

Notes:
- K-factor Length is determined as follows:
- Flush: Order Length from Figure 2 plus 1/2 in. (12,7 mm)
- Deep: Order Length from Figure 4 plus 3-1/4 in. (82,6 mm)
- Without Escutcheon: Order Length from Figure 5 minus 2-1/4 in. (57,2 mm)

TABLE B
DISCHARGE COEFFICIENTS

Design Criteria

The TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) are for use in ordinary hazard occupancies with noncombustible unobstructed construction and with a ceiling slope not exceeding 2 inches per foot (9.2°), using the design criteria provided in Table C, as well as any additional requirements specified in NFPA 13 for Extended Coverage Sidewall Spray Sprinklers.

A 36 in. (914 mm) clearance must be maintained between the top of the sprinkler deflector and any miscellaneous storage.

Series DS-3 Dry-Type Sprinklers may be installed on sloped ceilings in loading docks with a maximum roof slope of 4 inches per foot (18.4°) as shown in Figure 8 and using the design criteria provided in Table C.

Sprinkler Fittings
Install 1 inch NPT Series DS-3 Dry-Type Sprinklers in the 1 inch NPT outlet or run of the following fittings:

- malleable or ductile iron threaded tee fittings that meet the dimensional requirements of ANSI B16.3 (Class 150)
- cast iron threaded tee fittings that meet the dimensional requirements of ANSI B16.4 (Class 125)

Do not install Series DS-3 Dry-Type Sprinklers into elbow fittings. The Inlet of the sprinkler can contact the interior of the elbow.

The unused outlet of the threaded tee is plugged as shown in Figure 6.

Series DS-3 Dry-Type Sprinklers can also be installed in the 1 inch NPT outlet of a GRINNELL Figure 730 Mechanical Tee. However, the use of the Figure 730 Tee for this arrangement is limited to wet pipe systems.

Application	Coverage Area[1] W x L, ft x ft (m x m)	Minimum Flow[2], gpm (lpm)	Minimum Pressure[2], psi (bar)	Top of Deflector-to-Ceiling Distance[3], Inches (mm)	Temperature Rating	Minimum Spacing[4], ft (m)
Series DS-3 (TY5339) Horizontal Sidewall Dry-Type Sprinkler (ECOH) OH Group 1 (0.15 gpm/sq.ft) Standard Response	16 x 16 (4,9 x 4,4)	38 (144)	11.5 (0,79)	6 to 12 (150 to 300)	155°F, 200°F (68°C, 93°C)	8 (2,4)
	16 x 18 (4,9 x 5,5)	43 (163)	14.7 (1,01)			
	16 x 20 (4,9 x 6,1)	48 (182)	18.4 (1,27)			
Series DS-3 (TY5339) Horizontal Sidewall Dry-Type Sprinkler (ECOH) OH Group 2 (0.20 gpm/sq.ft) Standard Response	16 x 16 (4,9 x 4,4)	51 (193)	20.7 (1,43)			
	16 x 18 (4,9 x 5,5)	58 (220)	26.8 (1,85)			
	16 x 20 (4,9 x 6,1)	64 (242)	32.7 (2,25)			

Notes:
1. Backwall (where sprinkler is located) by sidewall (length of throw).
2. Requirement is based on minimum flow in GPM from each sprinkler. The indicated residual pressures are based on the nominal K-factor of 11.2.
3. The centerline of the sprinkler waterway is located below the deflector as shown in Figures 2, 3, and 4.
4. Minimum spacing is for lateral distance between sprinklers located along a single wall. Otherwise adjacent sprinklers (that is, sidewall sprinklers on an adjacent wall, on an opposite wall, or pendent sprinklers) must be located outside of the maximum listed protection area of the extended coverage sidewall sprinkler being utilized.

TABLE C
SERIES DS-3 EXTENDED COVERAGE HORIZONTAL SIDEWALL DRY-TYPE SPRINKLERS
UL AND C-UL LISTING COVERAGE AND FLOW RATE CRITERIA

Ambient Temperature Exposed to Discharge End of Sprinkler	Temperatures for Heated Area[1]		
	40°F (4°C)	50°F (10°C)	60°F (16°C)
	Minimum Exposed Barrel Length[2], Inches (mm)		
40°F (4°C)	0	0	0
30°F (-1°C)	0	0	0
20°F (-7°C)	4 (100)	0	0
10°F (-12°C)	8 (200)	1 (25)	0
0°F (-18°C)	12 (305)	3 (75)	0
-10°F (-23°C)	14 (355)	4 (100)	1 (25)
-20°F (-29°C)	14 (355)	6 (150)	3 (75)
-30°F (-34°C)	16 (405)	8 (200)	4 (100)
-40°F (-40°C)	18 (455)	8 (200)	4 (100)
-50°F (-46°C)	20 (510)	10 (255)	6 (150)
-60°F (-51°C)	20 (510)	10 (255)	6 (150)

Notes:
1. For protected area temperatures that occur between values listed above, use the next cooler temperature.
2. These lengths are inclusive of wind velocities up to 30 mph (18,6 kph).

TABLE D
EXPOSED SPRINKLER BARRELS IN WET PIPE SYSTEMS
MINIMUM RECOMMENDED LENGTHS

The configuration shown in Figure 7 is only applicable for wet pipe systems where the sprinkler fitting and water-filled pipe above the sprinkler fitting are not subject to freezing and where the length of the Dry-Type Sprinkler has the minimum exposure length depicted in Figure 10. Refer to the Exposure Length section.

For wet pipe system installations of 1 inch NPT Series DS-3 Dry-Type Sprinklers connected to CPVC piping, use only the following TYCO CPVC fittings:

- 1 in. x 1 in. NPT Female Adapter (P/N 80145)
- 1 in. x 1 in. x 1 in. NPT Sprinkler Head Adapter Tee (P/N 80249)

For dry pipe system installations, use only the side outlet of maximum 2-1/2 inch reducing tee when locating Series DS-3 Dry-Type Sprinklers directly below the branch line. Otherwise, use the configuration shown in Figure 6 to assure complete water drainage from above Series DS-3 Dry-Type Sprinklers and the branch line. Failure to do so may result in pipe freezing and water damage.

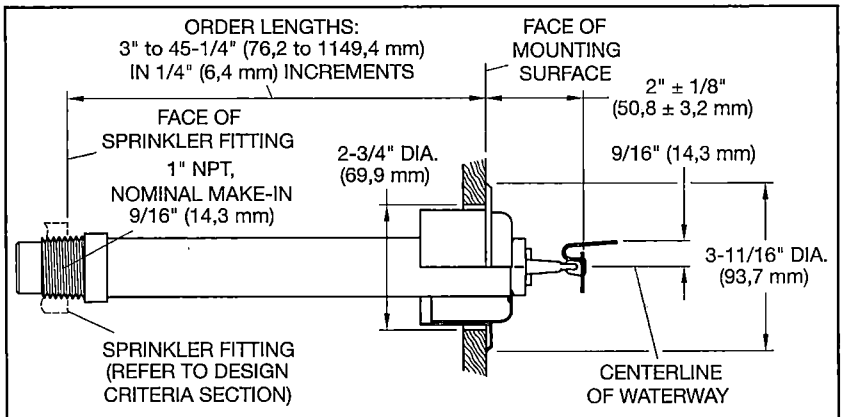


FIGURE 2
SERIES DS-3 ECOH HORIZONTAL SIDEWALL DRY-TYPE SPRINKLER WITH FLUSH ESCUTCHEON (TY5339)

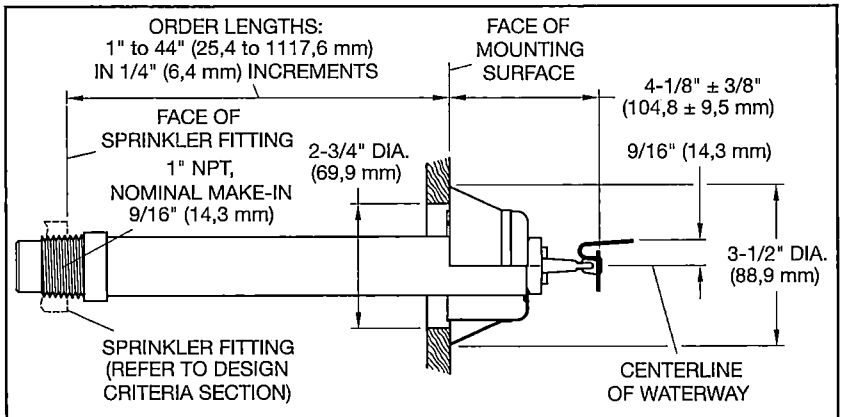


FIGURE 3
SERIES DS-3 ECOH HORIZONTAL SIDEWALL DRY-TYPE SPRINKLER WITH DEEP ESCUTCHEON (TY5339)

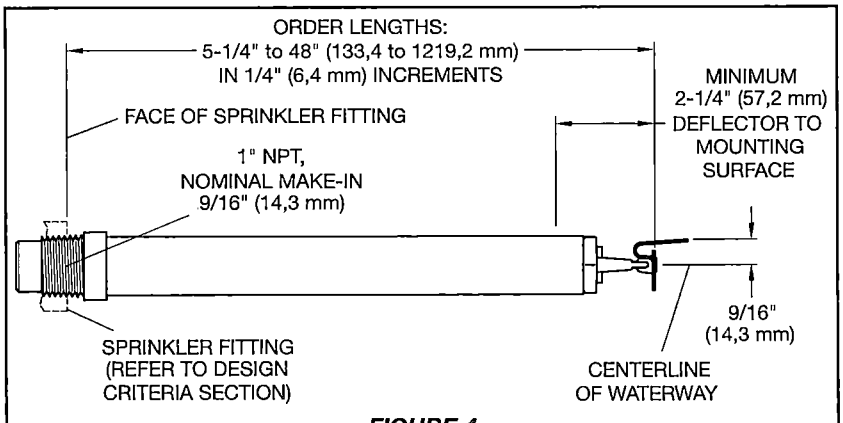


FIGURE 4
SERIES DS-3 ECOH HORIZONTAL SIDEWALL DRY-TYPE SPRINKLER WITHOUT ESCUTCHEON (TY5339)

NOTICE

Do not install Series DS-3 Dry-Type Sprinklers into any other type fitting without first consulting the Technical Services Department. Failure to use the appropriate fitting may result in one of the following:

- *failure of the sprinkler to operate properly due to formation of ice over the Inlet Plug or binding of the Inlet Plug*
- *insufficient engagement of the Inlet pipe-threads with consequent leakage*

Drainage
In accordance with the minimum requirements of the NATIONAL FIRE PROTECTION ASSOCIATION for dry pipe sprinkler systems, branch, cross, and feed-main piping connected to Dry Sprinklers and subject to freezing temperatures must be pitched for proper drainage.

Exposure Length
When using Dry Sprinklers in wet pipe sprinkler systems to protect areas subject to freezing temperatures, use Table D to determine a sprinkler's appropriate exposed barrel length to prevent water from freezing in the connecting pipes due to conduction. The exposed barrel length measurement must be taken from the face of the sprinkler fitting to the surface of the structure or insulation that is exposed to the heated area. Refer to Figure 7 for an example.

For protected area temperatures between those given above, the minimum recommended length from the face of the fitting to the outside of the protected area may be determined by interpolating between the indicated values.

Clearance Space
In accordance with NFPA 13, when connecting an area subject to freezing and an area containing a wet pipe sprinkler system, the clearance space around the sprinkler barrel of Dry-Type Sprinklers must be sealed. Due to temperature differences between two areas, the potential for the formation of condensation in the sprinkler and subsequent ice build-up is increased. If this condensation is not controlled, ice build-up can occur that might damage the Dry-Type Sprinkler and/or prevent proper operation in a fire situation.

Use of the Model DSB-2 Dry Sprinkler Boot, described in Technical Data Sheet TFP591 and shown in Figure 9, can provide the recommended seal.

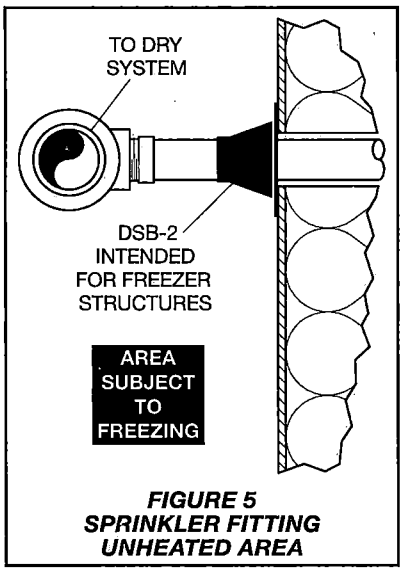


FIGURE 5
SPRINKLER FITTING
UNHEATED AREA

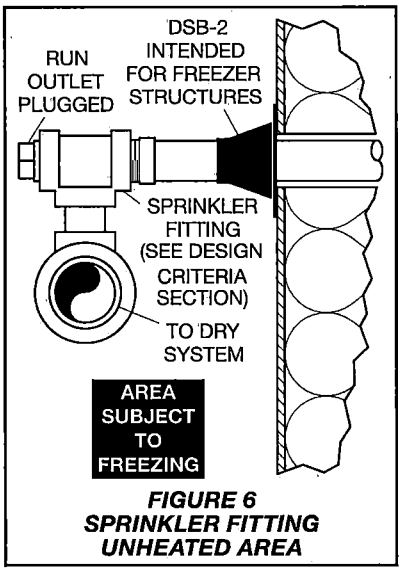


FIGURE 6
SPRINKLER FITTING
UNHEATED AREA

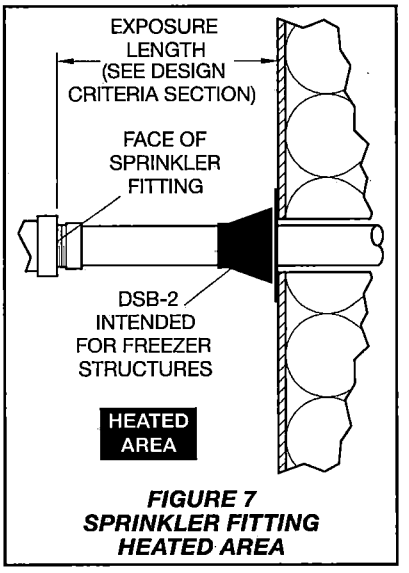


FIGURE 7
SPRINKLER FITTING
HEATED AREA

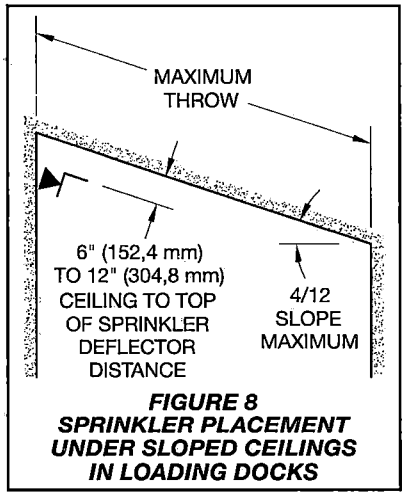


FIGURE 8
SPRINKLER PLACEMENT
UNDER SLOPED CEILINGS
IN LOADING DOCKS

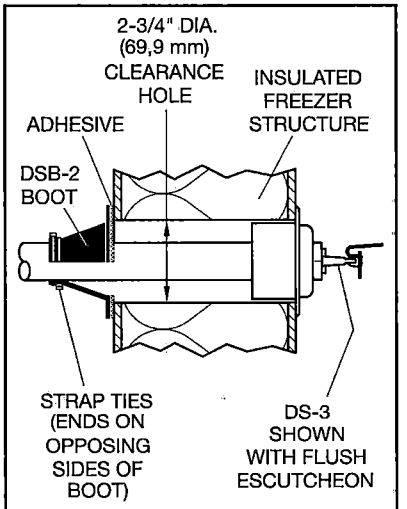


FIGURE 9
MODEL DSB-2 DRY SPRINKLER
BOOT WITH SERIES DS-3
DRY-TYPE PENDENT SPRINKLER

Installation

TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) must be installed in accordance with this section.

General Instructions
Series DS-3 Dry-Type Sprinklers must only be installed in fittings that meet the requirements of the Design Criteria section. Refer to the Design Criteria section for other important requirements regarding piping design and sealing of the clearance space around the Sprinkler Casing. With reference to Figure 10, do not grasp the sprinkler by the deflector. Failure to follow this instruction may impair performance of the device.

Do not install any bulb-type sprinkler if the bulb is cracked or there is a loss of liquid from the bulb. With the sprinkler held horizontally, a small air bubble should be present. The diameter of the air bubble is approximately 1/16 in. (1,6 mm) for the 135°F (57°C) rating to 1/8 in. (3,2 mm) for the 360°F (182°C) rating.

A leak-tight 1 inch NPT sprinkler joint should be obtained by applying a minimum-to-maximum torque of 20 to 30 lb-ft (26,8 to 40,2 N·m). Higher levels of torque may distort the sprinkler Inlet with consequent leakage or impairment of the sprinkler.

Do not attempt to compensate for insufficient adjustment in an escutcheon plate by under or over-tightening the Sprinkler. Re-adjust the position of the sprinkler fitting to suit.

Step 1. Install horizontal sidewall sprinklers with the center line of waterway parallel to the ceiling and perpendicular to the back wall surface. The word "TOP" on the deflector must face upwards toward the ceiling.

Step 2. With a non-hardening pipe-thread sealant such as TEFLON applied to the Inlet threads, hand-tighten the sprinkler into the sprinkler fitting. Do not grasp the sprinkler by the deflector (Ref. Figure 10).

Step 3. Wrench-tighten the sprinkler using either:

- a pipe wrench on the Inlet Band or the Casing (Ref. Figure 1)
- the W-Type 8 Sprinkler Wrench on the Wrench Flat (Ref. Figure 11)

Apply the Wrench Recess of the W-Type 8 Sprinkler Wrench to the Wrench Flat.

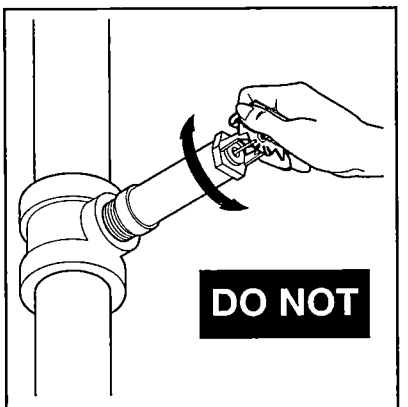


FIGURE 10
DO NOT GRASP DEFLECTOR

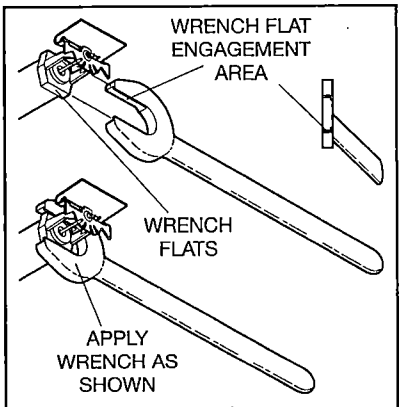


FIGURE 11
W-TYPE 8 SPRINKLER WRENCH

Note: If sprinkler removal becomes necessary, remove the sprinkler using the same wrenching method noted above. Sprinkler removal is easier when a non-hardening sealant was used and torque guidelines were followed. After removal, inspect the sprinkler for damage.

Step 4. After applying a wall finish, slide on the outer piece of the escutcheon until it comes in contact with the mounting surface.

For Deep Escutcheons, slide the outer skirt over the inner cup to make firm contact with the mounting surface.

Care and Maintenance

TYCO Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH) must be maintained and serviced in accordance with this section.

Before closing a fire protection system main control valve for maintenance work on the fire protection system that it controls, obtain permission to shut down the affected fire protection systems from the proper authorities and notify all personnel who may be affected by this action.

Absence of the outer piece of an escutcheon, which is used to cover a clearance hole, may delay the time to sprinkler operation in a fire situation.

A Vent Hole is provided in the Bulb Seat (Figure 1) to indicate if the Dry Sprinkler is remaining dry. Evidence of leakage from the Vent Hole indicates potential leakage past the Inlet seal and the need to remove the sprinkler to determine the cause of leakage; for example, an improper installation or an ice plug. Close the fire protection system control valve and drain the system before removing the sprinkler.

Sprinklers which are found to be leaking or exhibiting visible signs of corrosion must be replaced.

Automatic sprinklers must never be painted, plated, coated, or otherwise altered after leaving the factory. Modified sprinklers must be replaced. Sprinklers that have been exposed to corrosive products of combustion, but have not operated, should be replaced if they cannot be completely cleaned by wiping the sprinkler with a cloth or by brushing it with a soft bristle brush.

Care must be exercised to avoid damage to the sprinklers – before, during, and after installation. Sprinklers damaged by dropping, striking, wrench twist/slippage, or the like, must be replaced. Also, replace any sprinkler that has a cracked bulb or that has lost liquid from its bulb. (Refer to Installation Section.)

The owner is responsible for the inspection, testing, and maintenance of their fire protection system and devices in compliance with this document, as well as with the applicable standards of the NATIONAL FIRE PROTECTION ASSOCIATION (e.g., NFPA 25), in addition to the standards of any other authorities having jurisdiction. Contact the installing contractor or product manufacturer with any questions.

Automatic sprinkler systems are recommended to be inspected, tested, and maintained by a qualified Inspection Service in accordance with local requirements and/or national codes.

P/N* 61 — XXX — X — XXX

ESCUTCHEON TYPE	
161	Flush Escutcheon (1 in. NPT), 155°F (68°C)
163	Flush Escutcheon (1 in. NPT), 200°F (93°C)
171	Deep Escutcheon (1 in. NPT), 155°F (68°C)
173	Deep Escutcheon (1 in. NPT), 200°F (93°C)
151	Without Escutcheon (1 in. NPT), 155°F (68°C)
153	Without Escutcheon (1 in. NPT), 200°F (93°C)

SPRINKLER FINISH		ESCUTCHEON FINISH[1]
1	NATURAL BRASS	BRASS PLATED
4	SIGNAL WHITE (RAL9003) POLYESTER	SIGNAL WHITE (RAL9003) POLYESTER
9	CHROME PLATED	CHROME PLATED
0	CHROME PLATED	SIGNAL WHITE (RAL9003) POLYESTER

ORDER LENGTH[2]	
055	5.50 in.
082	8.25 in.
180	18.00 in.
187	18.75 in.
372	37.25 in.
480	48.00 in.

Notes:
1. Does not apply to assemblies without escutcheon.
2. Dry-Type Sprinklers are furnished based upon "Order Length" as measured per Figures 2, 3 & 4.
3. After the measurement is taken, round it to the nearest 1/4 inch increment.

* Use Prefix "I" for ISO 7-R1 Connection (e.g., I-61-161-1-055).

TABLE E
SERIES DS-3 HORIZONTAL SIDEWALL, DRY-TYPE SPRINKLERS (ECOH)
PART NUMBER SELECTION

Limited Warranty

For warranty terms and conditions, visit www.tyco-fire.com.

Ordering Procedure

Contact your local distributor for availability. When placing an order, indicate the full product name, including description and Part Number (P/N).

Dry-Type Sprinklers
When ordering Series DS-3 Dry-Type Sprinklers, 11.2K Horizontal Sidewall, Standard Response, Extended Coverage, Ordinary Hazard (ECOH), specify the following information:

- SIN TY5339
- Order Length:
  Dry-Type Sprinklers are furnished based upon Order Length as measured from the face of the wall to the face of the sprinkler fitting (Ref. Figures 2, 3 & 4). After the measurement is taken, round it to the nearest 1/4 inch increment.
- Inlet Thread Connections:
  1 Inch NPT
  (Standard)

  ISO 7-R 1
  (For information on ISO Inlet Thread Connections, contact your Johnson Controls Sales Representative.)
- Temperature Rating
- Sprinkler Finish
- Escutcheon Type and Finish, as applicable
- Part Number from Table E

Sprinkler Wrench
Specify W-Type 8 Sprinkler Wrench, P/N 56-892-1-001

Sprinkler Boot
Specify Model DSB-2 Dry Sprinkler Boot, P/N 63-000-0-002

This Part Number includes one (1) Boot, two (2) Strap Ties, and 1/3 oz of Adhesive (a sufficient quantity for installing one boot).

1400 Pennbrook Parkway, Lansdale, PA 19446 | Telephone +1-215-362-0700

Johnson Controls

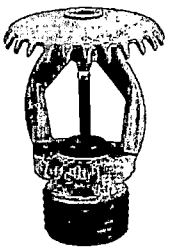
GLOBE
FIRE SPRINKLER CORPORATION

QUICK RESPONSE AUTOMATIC SPRINKLERS GL SERIES UPRIGHT • PENDENT VERTICAL SIDEWALL HORIZONTAL SIDEWALL CONVENTIONAL (OLD STYLE)

DESCRIPTION AND OPERATION

The Globe Quick Response Series GL-QR Sprinklers are a low profile yet durable design which utilizes a 3mm frangible glass ampule as the thermosensitive element. This provides sprinkler operation approximately six times faster than ordinary sprinklers. While the Quick Response Sprinkler provides an aesthetically pleasing appearance, it can be installed wherever standard spray sprinklers are specified when allowed by the applicable standards. It offers the additional feature of greatly increased safety to life and is available in various styles, orifices, temperature ratings and finishes to meet many varying design requirements. Quick Response Sprinklers should be used advisedly and under the direction of approving authorities having jurisdiction.

The heart of Globe's Series GL-QR sprinkler proven actuating assembly is a hermetically sealed frangible glass ampule that contains a precisely measured amount of fluid. When heat is absorbed, the liquid within the bulb expands increasing the internal pressure. At the prescribed temperature the internal pressure within the ampule exceeds the strength of the glass causing the glass to shatter. This results in water discharge which is distributed in an approved pattern depending upon the deflector style used.

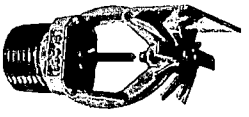


QUICK RESPONSE
SERIES GL-QR UPRIGHT — SERIES GL-QR/CNV CONVENTIONAL

QUICK RESPONSE
SERIES GL-QR PENDENT — SERIES GL-QR/SW VERTICAL SIDEWALL

TECHNICAL DATA

- See reverse side for Approvals and Specifications.
- Temperature Ratings - 135°F (57°C), 155°F (68°C), 175°F (79°C), 200°F (93°C), 286°F (141°C)
- Water Working Pressure Rating - 175 psi (12 Bars)
- Factory tested hydrostatically to 500 psi (34 Bars)
- Maximum low temperature glass bulb rating is -67°F (-55°C)
- Frame - bronze • Deflector - brass • Screw - brass
- Lodgement Wire - stainless steel • Bulb seat - copper
- Spring - nickel alloy • Seal - teflon
- Bulb - glass with alcohol based solution, 3mm size



QUICK RESPONSE
HORIZONTAL SIDEWALL SERIES GL-QR/SW — LPCB/CE HORIZONTAL SIDEWALL SERIES GL-QR/SW

SPRINKLER TEMPERATURE RATING/CLASSIFICATION and COLOR CODING

CLASSIFICATION	AVAILABLE SPRINKLER TEMPERATURES	BULB COLOR	N.F.P.A. MAXIMUM CEILING TEMPERATURE
ORDINARY INTERMEDIATE HIGH		ORANGE/RED YELLOW/GREEN BLUE	

QUICK RESPONSE AUTOMATIC SPRINKLERS UPRIGHT PENDENT VERTICAL SIDEWALL HORIZONTAL SIDEWALL CONVENTIONAL (OLD STYLE)

SPECIFICATIONS

NOMINAL "K" FACTOR	THREAD SIZE	LENGTH[1]	FINISHES
2.8 (40 metric)	1/2"NPT (15mm)	2 1/4" (5.7cm)	Factory Bronze Chrome White Polyester[3] Black Polyester[2,3]
4.2 (60 metric)	1/2"NPT (15mm)	2 1/4" (5.7cm)	
5.6 (80 metric)	1/2"NPT (15mm)	2 1/4" (5.7cm)	
8.0 (115 metric)	1/2"NPT (15mm)	2 1/4" (5.7cm)	
8.0 (115 metric)	3/4"NPT (20mm)	2 7/16" (6.2cm)	

NOTE: METRIC CONVERSIONS ARE APPROXIMATE.
[1]HORIZONTAL SIDEWALL IS 2 9/16".
[2]FINISHES AVAILABLE ON SPECIAL ORDER.
[3]AVAILABLE AS cULus LISTED CORROSION RESISTANT WHEN SPECIFIED ON ORDER.

LISTINGS/APPROVALS

STYLE	SIN	K FACTOR	HAZARD[1]	TEMPERATURE					cULus	FM	LPCB[2]	CE	NYC - DOB MEA 101-92-E
				135°F (57°C)	155°F (68°C)	175°F (79°C)	200°F (93°C)	286°F (141°C)					
UPRIGHT	GL2815	2.8	LH	X	X	X	X	X	X	---	---	---	X
	GL4215	4.2	LH	X	X	X	X	X	X	---	---	---	X
	GL5615	5.6	LH/OH	X	X	X	X	X	X	X	X	X	X
	GL8115*	8.0* (½" NPT)	LH/OH	X	X	X	X	X	X	---	---	---	X
	GL8118	8.0	LH/OH	X	X	X	X	X	X	X	X	X	X
PENDENT	GL2801	2.8	LH	X	X	X	X	X	X	---	---	---	X
	GL4201	4.2	LH	X	X	X	X	X	X	---	---	---	X
	GL5601	5.6	LH/OH	X	X	X	X	X	X	X	X	X	X
	GL8101*	8.0* (½" NPT)	LH/OH	X	X	X	X	X	X	---	---	---	X
	GL8106	8.0	LH/OH	X	X	X	X	X	X	X	X	X	X
VERTICAL SIDEWALL†	GL5632	5.6	LH	X	X	X	X	X	X	X	---	---	---
	GL8133	8.0	LH	X	X	X	X	X	X	---	---	---	---
HORIZONTAL SIDEWALL	GL2826§	2.8	LH	X	X	X	X	X	X	---	---	---	X
	GL4226§	4.2	LH	X	X	X	X	X	X	---	---	---	X
	GL5626§	5.6	LH/OH	X	X	X	X	X	X	X	---	---	X
	GL5627¤	5.6	LH/OH	X	X	X	X	X	---	---	X	X	---
	GL8127§	8.0	LH/OH	X	X	X	X	X	X	---	---	---	---
CONVENTIONAL (OLD STYLE)	GL5624	5.6	LH/OH	X	X	X	X	X	---	---	X	X	---
	GL8125	8.0	LH/OH	X	X	X	X	X	---	---	---	X	---

[1]SPRINKLERS SHALL BE LIMITED AS PER THE REQUIREMENTS OF NFPA13 AND ANY OTHER RELATED DOCUMENTS.
§HORIZONTAL SIDEWALL cULus LISTED FOR DEFLECTOR 4" TO 12" BELOW THE CEILING, FM APPROVED 4" TO 6" BELOW THE CEILING.
¤INSTALL IN ACCORDANCE TO BS5306 AND ANY OTHER RELATED DOCUMENTS.
†PENDENT VERTICAL SIDEWALL cULus LISTED FOR 6' MIN. SPACING.
†UPRIGHT VERTICAL SIDEWALL cULus LISTED FOR 9' MIN. SPACING.
OH: ORDINARY HAZARD
LH: LIGHT HAZARD
*1/2" NPT, FOR RETROFIT ONLY
[2] LPCB REF. NO. 147c/05

ORDERING INFORMATION

SPECIFY

- Quantity • SIN • Style • Orifice
- Thread Size • Temperature • Finishes desired
- Quantity - Wrenches - P/N 325390 (1/2"); P/N 312366 (L.O.)

GLOBE® PRODUCT WARRANTY

Globe agrees to repair or replace any of its own manufactured products found to be defective in material or workmanship for a period of one year from date of shipment.

For specific details of our warranty please refer to Price List Terms and Conditions of Sale (Our Price List).

GLOBE FIRE SPRINKLER CORPORATION
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1-800-248-0278 www.globesprinkler.com

MAR 2018 PRINTED U.S.A. GFS-100a (Formerly A-20)

Series ELO-231FRB – 11.2 K-factor Upright and Pendent Sprinklers Quick Response, Standard Coverage

General Description

TYCO Series ELO-231FRB 11.2K Quick Response, Standard Coverage, Upright and Pendent Sprinklers (Ref. Figure 1) are automatic sprinklers of the frangible bulb type. They are quick response spray sprinklers that produce a hemispherical water distribution pattern below the deflector.

The 11.2K ELO-231FRB Upright and Pendent Sprinklers were subjected to full scale, high-piled storage fire tests to qualify their use in lieu of 5.6 or 8.0 K-factor standard spray sprinklers for the protection of high-piled storage.

Higher flow rates can be achieved at much lower pressures with the 11.2K ELO-231FRB Sprinklers, making their use highly advantageous in high density applications, such as the protection of high-piled storage.

For in-rack applications, an upright intermediate level version of the Series ELO-231FRB Sprinklers can be obtained by utilizing the Series ELO-231FRB Upright Sprinkler with the WSG-2 Guard & Shield, and a pendent intermediate level version of the Series ELO-231FRB Sprinklers can be obtained by utilizing the Series ELO-231FRB Pendent Sprinkler with the WS-2 Shield. If there is a possibility of the pendent intermediate level version being exposed to mechanical damage, a G-2 Guard can be added.

IMPORTANT

Refer to Technical Data Sheet TFP2300 for warnings pertaining to regulatory and health information.

Always refer to Technical Data Sheet TFP700 for the "INSTALLER WARNING" that provides cautions with respect to handling and installation of sprinkler systems and components. Improper handling and installation can permanently damage a sprinkler system or its components and cause the sprinkler to fail to operate in a fire situation or cause it to operate prematurely.

NOTICE

The Series ELO-231FRB Sprinklers described herein must be installed and maintained in compliance with this document, as well as with the applicable standards of the National Fire Protection Association (NFPA), in addition to the standards of any other authorities having jurisdiction. Failure to do so may impair the performance of these devices.

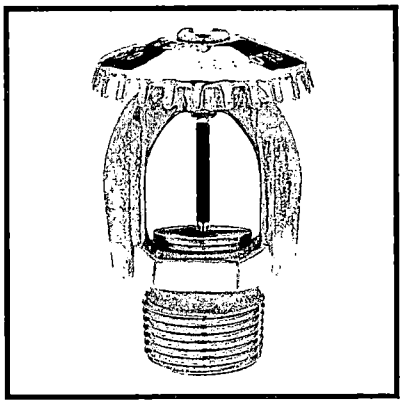
The owner is responsible for maintaining their fire protection system and devices in proper operating condition. Contact the installing contractor or product manufacturer with any questions.

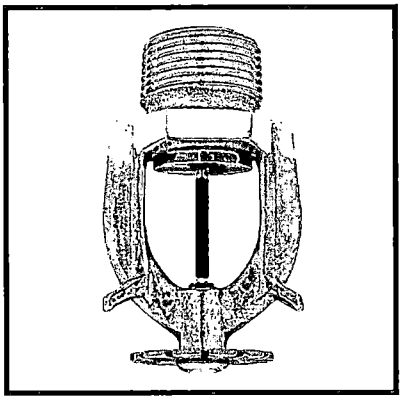
Installation of Series ELO-231FRB Pendent Sprinklers in recessed escutcheons will void all sprinkler warranties, as well as possibly void the sprinkler's Approvals and/or Listings.

NFPA 13 prohibits the installation of 1/2 in. NPT sprinklers with a K-factor greater than 5.6K in new installations. They are intended for use in retrofit applications only.

Sprinkler Identification Numbers (SINs)

Refer to Table A for sprinkler identification numbers.





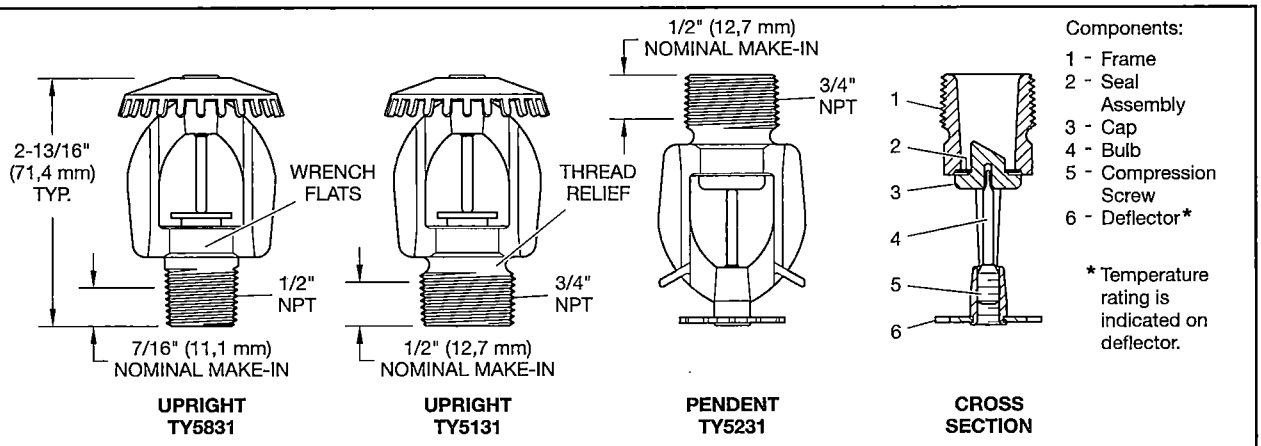


FIGURE 1
SERIES ELO-231FRB 11.2K UPRIGHT - 3/4 IN. NPT (TY5131), UPRIGHT - 1/2 IN. NPT (TY5831), AND PENDENT - 3/4 IN. NPT (TY5231) SPRINKLERS

Technical Data

Approvals
UL and C-UL Listed
FM Approved
NYC Approved
VdS Approved
LPCB Approved

Refer to Table A for complete approval information.

UL and C-UL Listings and FM Approval apply to the service conditions described in the Design Criteria section.

Finishes
Sprinkler: Refer to Table C

Physical Characteristics

Frame	Bronze
Cap	Bronze
Sealing Assembly	Beryllium Nickel w/TEFLON
Bulb (3mm dia.)	Glass
Compression Screw	Bronze
Deflector	Bronze

Additional Technical Data
Refer to Table A for additional technical data.

Item	Description
Sprinkler Identification Number (SIN)	TY5131 – Upright 3/4 in. NPT TY5231 – Pendent 3/4 in. NPT TY5831 - Upright 1/2 in. NPT TY5131 is a re-designation for Central SIN C5131. TY5231 is a re-designation for Central SIN C5231, G1870, and S2551.
K-factor, (gpm/psi) (lpm/bar)	K=11.2 GPM/psi½ (161,4 LPM/bar½)
Temperature Rating °F (°C)[1]	155°F (68°C)[1] 200°F (93°C) 286°F (141°C)
Thread Size	3/4 in. NPT or 1/2 in. NPT
Sprinkler Orientation	Upright/Pendent
Maximum Working Pressure, psi (bar)	175 psi (12,1 bar)

Notes:
1. Refer to Table C for laboratory listings and approvals.

TABLE A
SERIES ELO-231FRB 11.2K UPRIGHT AND PENDENT SPRINKLERS TECHNICAL DATA

Operation

The glass bulb contains a fluid that expands when exposed to heat. When the rated temperature is reached, the fluid expands sufficiently to shatter the glass bulb, allowing the sprinkler to activate and water to flow.

Design Criteria

UL and C-UL Listings Requirements
The 11.2K Model ELO-231FRB (TY5131, TY5231, and TY5831) Sprinklers are to be installed in accordance with NFPA 13 standard sprinkler position and area/density flow calculation requirements for light or ordinary occupancies, as well as high-piled storage occupancies (solid-piled, palletized, rack storage, bin box, and shelf storage including but not limited to Class I-IV and Group A plastics) with a minimum residual (flowing) pressure of 7 psi (0,5 bar) for wet pipe systems only. Refer to Table B for additional information

FM Approval Requirements
The 11.2K Model ELO-231FRB (TY5131 & TY5231) Sprinklers are to be installed in accordance with the applicable control mode density/area guidelines provided by FM Approvals for wet systems only.

Note: *FM Approvals guidelines may differ from UL and C-UL Listings criteria.*

Storage Type	NFPA	FM Global
Sprinkler Type	Standard Coverage	Storage
Response Type	QR	QR
System Type	Wet	Wet
Temperature Rating °F (°C)[1]	155°F (68°C)[1] 200°F (93°C) 286°F (141°C)	155°F (68°C)[1] 200°F (93°C) 286°F (141°C)
Open Frame (i.e., no solid shelves) Single, Double, Multiple-Row, or Portable Rack Storage of Class I-IV and Group A or B Plastics	Refer to NFPA 13	Refer to FM 2-0 and 8-9
Solid Pile or Palletized Storage of Class I-IV and Group A or B Plastics	Refer to NFPA 13	Refer to FM 2-0 and 8-9
Idle Pallet Storage	Refer to NFPA 13	Refer to FM 2-0, 8-9, and 8-24
Rubber Tire Storage	Refer to NFPA 13	Refer to FM 2-0 and 8-3
Roll Paper Storage (Refer to the Standard)	Refer to NFPA 13	Refer to FM 8-21
Flammable/Ignitable Liquid Storage (Refer to the Standard)	Refer to NFPA 30	Refer to FM 7-29
Aerosol Storage (Refer to the Standard)	Refer to NFPA 30B	Refer to FM 7-31
Automotive Components in Portable Racks (Control mode only; refer to the Standard)	Refer to NFPA 13	N/A

Notes:
1. Refer to Table C for laboratory listings and approvals.

N/A – Not Applicable

TABLE B
SERIES ELO-231FRB 11.2K UPRIGHT AND PENDENT SPRINKLERS
COMMODITY SELECTION AND DESIGN CRITERIA OVERVIEW

SPRINKLER TYPE	TEMPERATURE RATING	BULB LIQUID COLOR	SPRINKLER FINISH	
			NATURAL BRASS	CHROME PLATED
UPRIGHT (TY5131) & PENDENT (TY5231)	155°F (68°C)	Red	1, 2, 3, 4, 5, 6	1, 2, 3, 4, 5, 6
	200°F (93°C)	Green		
	286°F (141°C)	Blue		
UPRIGHT (TY5831)	155°F (68°C)	Red	1	N/A
	200°F (93°C)	Green		

Notes:
1. UL Listed
2. C-UL Listed
3. FM Approved
4. NYC Approved under MEA 291-04-E
5. VdS Approved, TY5131 Ref. No. G410022 and TY5231 Ref. No. G410023
6. LPCB Approved, TY5131 Ref. No. 094c/01 and TY5231 Ref. No. 094c/02

N/A - Not Available

TABLE C
SERIES ELO-231FRB UPRIGHT AND PENDENT 11.2K SPRINKLERS, QUICK RESPONSE
LABORATORY LISTINGS AND APPROVALS
(Refer to the Design Criteria Section)

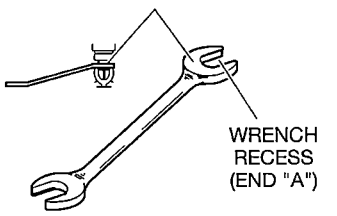


FIGURE 2
W-TYPE 3
SPRINKLER WRENCH

Installation

TYCO Series ELO-231FRB 11.2K Quick Response, Standard Coverage, Upright and Pendent Sprinklers must be installed in accordance with this section.

General Instructions

NOTICE

Do not install any bulb-type sprinkler if the bulb is cracked or there is a loss of liquid from the bulb. With the sprinkler held horizontally, a small air bubble should be present. The diameter of the air bubble is approximately 1/16 in. (1,6 mm) for the 155°F (68°C) to 3/32 in. (2,4 mm) for the 286°F (141°C) temperature ratings.

A leak tight 1/2 in. NPT sprinkler joint should be obtained by applying a minimum-to-maximum torque of 7 to 14 lb-ft (9,5 to 19,0 N·m). A leak-tight 3/4 in. NPT sprinkler joint should be obtained by applying a minimum-to-maximum torque of 10 to 20 lb-ft (13,4 to 26,8 N·m). Higher levels of torque can distort the sprinkler inlet with consequent leakage or impairment of the sprinkler.

Do not attempt to make up for insufficient adjustment in the escutcheon plate by under- or over-tightening the sprinkler. Readjust the position of the sprinkler fitting to suit.

The Series ELO-231FRB Upright and Pendent Sprinklers must be installed in accordance with the following instructions:

Step 1. Upright sprinklers are to be installed in the upright position; pendent sprinklers are to be installed in the pendent position.

Step 2. With pipe thread sealant applied to the pipe threads, hand-tighten the sprinkler into the sprinkler fitting.

Step 3. Tighten the sprinkler into the sprinkler fitting using only the W-Type 3 Sprinkler Wrench (Ref. Figure 2). With reference to Figure 1, the W-Type 3 Sprinkler Wrench is to be applied to the wrench flats.

Care and Maintenance

TYCO Series ELO-231FRB 11.2K Quick Response, Standard Coverage, Upright and Pendent Sprinklers must be maintained and serviced in accordance with this section.

Before closing a fire protection system control valve for maintenance work on the fire protection system that it controls, permission to shut down the affected fire protection system must be obtained from the proper authorities and all personnel who may be affected by this action must be notified.

Sprinklers that are found to be leaking or exhibiting visible signs of corrosion must be replaced.

Automatic sprinklers must never be painted, plated, coated or otherwise altered after leaving the factory. Modified sprinklers must be replaced. Sprinklers that have been exposed to corrosive products of combustion, but have not operated, should be replaced if they cannot be completely cleaned by wiping the sprinkler with a cloth or by brushing it with a soft bristle brush.

Care must be exercised to avoid damage to the sprinklers before, during, and after installation. Sprinklers damaged by dropping, striking, wrench twist/slippage, or the like, must be replaced. Also, replace any sprinkler that has a cracked bulb or that has lost liquid from its bulb. For additional information, refer to the Installation section.

The owner is responsible for the inspection, testing, and maintenance of their fire protection system and devices in compliance with this document, as well as with the applicable standards of the National Fire Protection Association (e.g., NFPA 25), in addition to the standards of any other authorities having jurisdiction. Contact the installing contractor or product manufacturer with any questions.

It is recommended that automatic sprinkler systems be inspected, tested, and maintained by a qualified Inspection Service in accordance with local requirements and/or national codes.

P/N 50 – XXX – X – XXX

		SIN
500	11.2K UPRIGHT (3/4 in. NPT)	TY5131
502	11.2K PENDENT (3/4 in. NPT)	TY5231
503	11.2K UPRIGHT (1/2 in. NPT)	TY5831[b]

	SPRINKLER FINISH
1	NATURAL BRASS
9	CHROME PLATED[a]

	TEMPERATURE RATING
155	155°F (68°C)
200	200°F (93°C)
286	286°F (141°C)[a]

a. For TY5131 and TY5231 sprinklers only.
b. For retrofit applications only.

TABLE D
SERIES ELO-231FRB UPRIGHT & PENDENT 11.2K SPRINKLERS, QUICK RESPONSE PART NUMBER SELECTION

Limited Warranty

For warranty terms and conditions, visit www.tyco-fire.com.

Ordering Procedure

Contact your local distributor for availability. When placing an order, indicate the full product name and Part Number (P/N).

Sprinkler
Specify: Series ELO-231FRB 11.2K Quick Response (specify Pendent or Upright) Sprinkler, (specify SIN), (specify) temperature rating, (specify) finish, P/N (specify from Table D)

Sprinkler Wrench
Specify: W-Type 3 Sprinkler Wrench, P/N 56-895-1-001

1400 Pennbrook Parkway, Lansdale, PA 19446 | Telephone +1-215-362-0700

Johnson Controls

State of New Jersey
Department of Community Affairs
Division of Fire Safety

Hereby Issues To

PREMIER FIRE SYSTEMS

Fire Protection Equipment Contractor Business Permit

In The Following Fire Protection Areas:

Fire Sprinkler System

P00647	04/30/2016 to 04/30/2019	
Permit ID	Date Issued	Lapse Date

Charles A. Richman
Commissioner

FILE COPY

HYDRAULIC CALCULATIONS

for:

Proposed Renovations for:

Space 43 Shell Black Box - Brick Plaza
Future Trader Joes
56 Chambers Bridge Road
Brick, New Jersey 08723

DESIGN DATA: CALCULATION #1
Area Calculated: Most Demanding Uprights
System 1 - Wet - Uprights
Hazard: OHG2 - Temporary Storage
Density: 0.20 gpm/ft
Minimum Pressure Per Head: 7 psi
Area: 1715 Sq. Ft.
No. Sprinklers Calculated: 14
Area Per Sprinkler: 130 Sq. Ft. Max.
Hose Demand: 250.000 gpm
Total Water Required: 635.077 gpm
Total Pressure Required: 65.139 psi
Safety Margin: 6.67 psi

JOB: # 283

Installing Contractor:
Premier Fire Systems
License # P00647
2 Ilene Court #21
Hillsborough, N.J. 08844
TEL: (908) 874-4414

No.	Revision/Issue	Date
1	Preliminary Design	02/07/2019
2	Released for Submittal	02/11/2019
3		
4		
5		
6		
7		
8		
9		

FIRE SPRINKLER DESIGN BY:
Tsunami Fire Suppression, L.L.C.

A new wave in fire protection.
3770 N.C. State Highway 134, Asheboro, North Carolina 27205
TEL: (732) 597-6357/E-MAIL: Trevor@TsunamiFireSprinkler.com
Trevor A. Silvers, CET
NICET LIC. #128017
Automatic Sprinkler System Layout, Level III
Inspection & Testing of Water Based, Level III

CARL A. MOENKE, P.E.
PROFESSIONAL ENGINEER

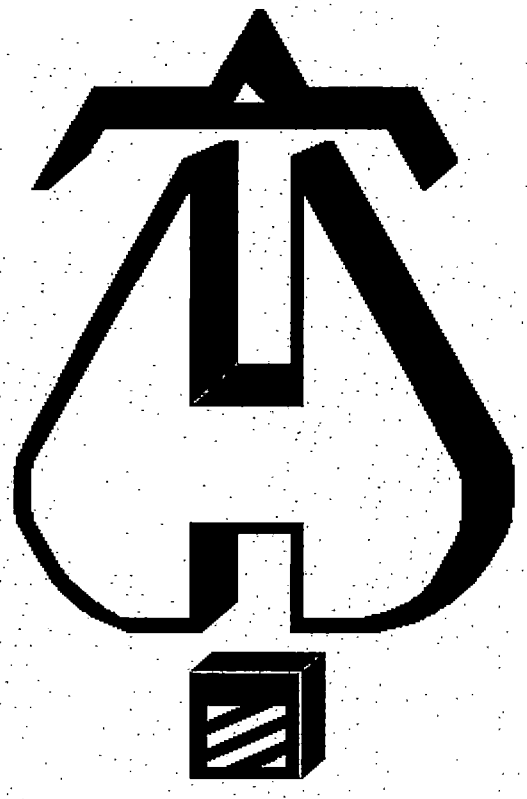
811 Royal Lane
TOMS RIVER, N.J. 08753
(732) 240 - 5630

N.J. LICENSE NUMBER 39052
FLA. LICENSE NUMBER 42005
FAX: (732) 240 - 3463

Signature

2-12-19
Date:

FILE COPY



. . . Fire Protection by Computer Design

Premier Fire Systems, Inc.
Lic. # P00647
2 Ilene Court #21
Hillsborough, N.J. 08844
908-874-4144

Job Name	:	Trader Joes Vanilla Box
Building	:	SPK100
Location	:	56 Chambers Bridge Road, Brick, NJ 08723
System	:	1
Contract	:	283
Data File	:	283 Trader Joes Submittal 02-07-19 AREA 1.wxf283 Trader Joes

HYDRAULIC CALCULATIONS
for

Project name: Trader Joes Vanilla Box
Location: 56 Chambers Bridge Road, Brick, NJ 08723
Drawing no: SPK100
Date: 02-07-2018

Design

Remote area number: 1
Remote area location: Most Demanding Remote Sales Floor
Occupancy classification: OHG2 - Temporary Storage - Mercantile
Density: 0.20 - Gpm/SqFt
Area of application: 1715 - SqFt
Coverage per sprinkler: 130 - SqFt
Type of sprinklers calculated: Globe SIN#GL5615 Uprights 5.6K
No. of sprinklers calculated: 14
In-rack demand: N/A - GPM
Hose streams: 250 - GPM
Total water required (including hose streams): 635.077 - GPM @ 65.1395 - Psi
Type of system: New Wet Grid System
Volume of dry or preaction system: N/A - Gal

Water supply information

Date: 05-06-2014
Location: Hydrant on Site
Source: MAC Sprinkler

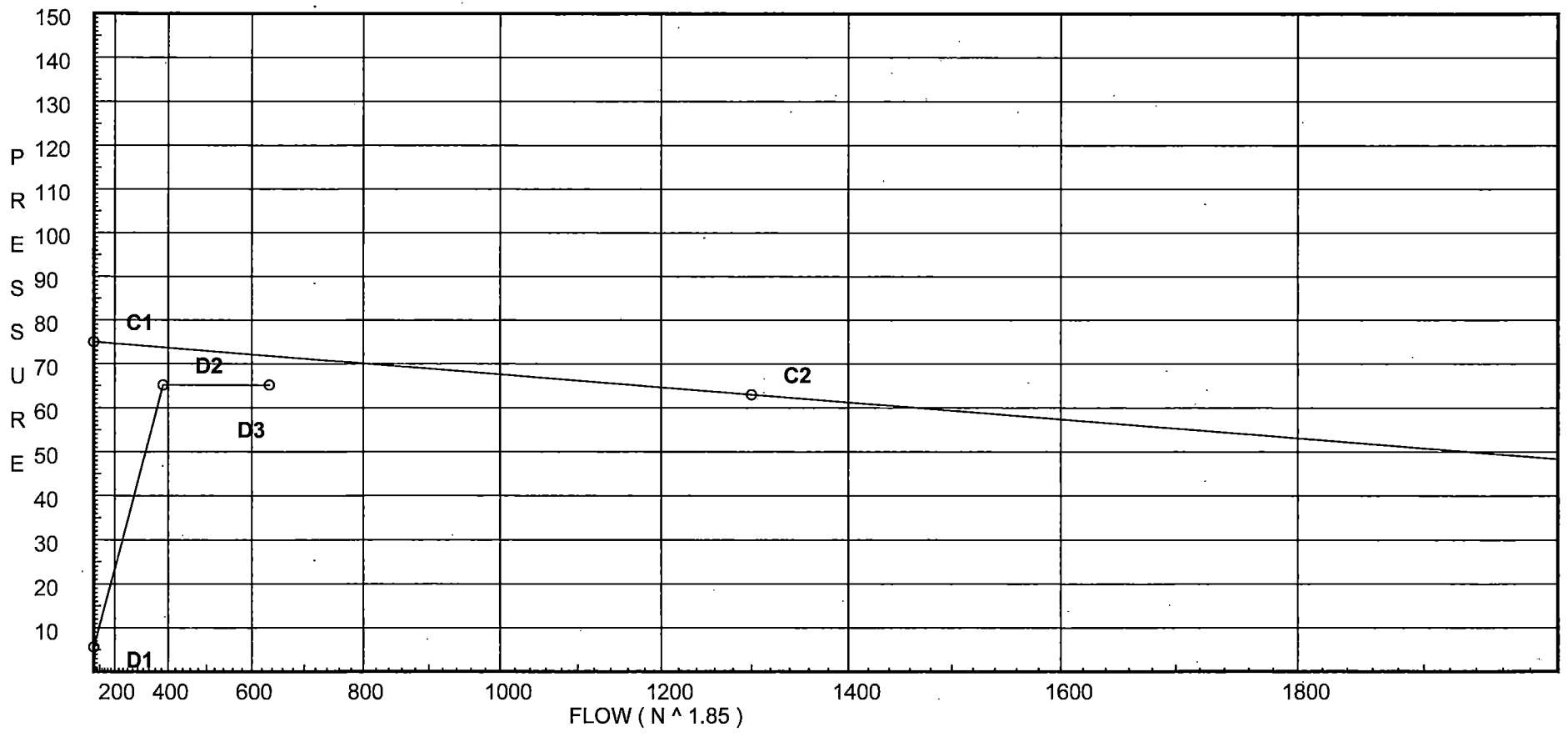
Name of contractor: Premier Fire Systems, Inc.
Address: Lic. # P00647 / 2 Ilene Court #21 / Hillsborough, N.J. 08844
Phone number: 908-874-4144
Name of designer: Tsunami FireSuppression
Authority having jurisdiction: Local Fire Marshal
Notes: (Include peaking information or gridded systems here.) Saftey Factor: 6.67 psi
Electronically Peaked

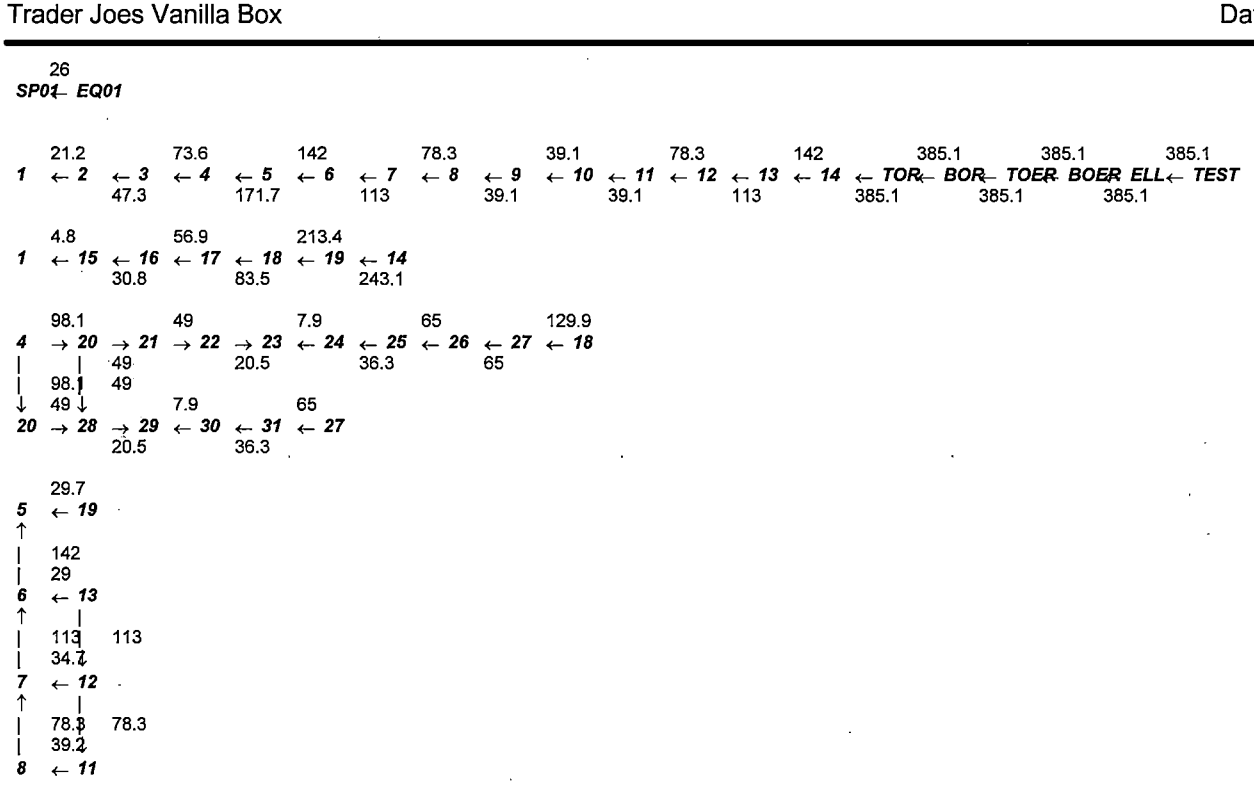
Water Supply Curve C

Premier Fire Systems, Inc.
Trader Joes Vanilla Box

City Water Supply:
- C1 - Static Pressure : 75
- C2 - Residual Pressure: 63
- C2 - Residual Flow : 1300

Demand:
- D1 - Elevation : 5.630
- D2 - System Flow : 385.077
- D2 - System Pressure : 65.140
- Hose (Demand) : 250
- D3 - System Demand : 635.077
- Safety Margin : 6.672




26
SP01 EQ01
21.2 73.6 142 78.3 39.1 78.3 142 385.1 385.1 385.1
1 2 3 4 5 6 7 8 9 10 11 12 13 14 TOR BOR TOER BOER ELL TEST
47.3 171.7 113 39.1 39.1 113 385.1 385.1 385.1
4.8 56.9 213.4
1 15 16 17 18 19 14
30.8 83.5 243.1
98.1 49 7.9 65 129.9
4 20 21 22 23 24 25 26 27 18
49 20.5 36.3 65
98.1 49
49 7.9 65
20 28 29 30 31 27
20.5 36.3
29.7
5 19
142
29
6 13
113 113
34.7
7 12
78.3 78.3
39.2
8 11

Fittings Used Summary

Fitting Legend

Abbrev.	Name	½	¾	1	1¼	1½	2	2½	3	3½	4	5	6	8	10	12	14	16	18	20	24
B	NFPA 13 Butterfly Valve	0	0	0	0	0	6	7	10	0	12	9	10	12	19	21	0	0	0	0	0
E	NFPA 13 90' Standard Elbow	1	2	2	3	4	5	6	7	8	10	12	14	18	22	27	35	40	45	50	61
F	NFPA 13 45' Elbow	1	1	1	1	2	2	3	3	3	4	5	7	9	11	13	17	19	21	24	28
Fsp	Flow Switch Potter VSR	Fitting generates a Fixed Loss Based on Flow																			
G	NFPA 13 Gate Valve	0	0	0	0	0	1	1	1	1	2	2	3	4	5	6	7	8	10	11	13
S	NFPA 13 Swing Check	0	0	5	7	9	11	14	16	19	22	27	32	45	55	65					
T	NFPA 13 90' Flow thru Tee	3	4	5	6	8	10	12	15	17	20	25	30	35	50	60	71	81	91	101	121
Zss	Wilkins 350ASTDA	Fitting generates a Fixed Loss Based on Flow																			

Units Summary

Diameter Units	Inches
Length Units	Feet
Flow Units	US Gallons per Minute
Pressure Units	Pounds per Square Inch

Note: Fitting Legend provides equivalent pipe lengths for fittings types of various diameters. Equivalent lengths shown are standard for actual diameters of Sched 40 pipe and CFactors of 120 except as noted with *. The fittings marked with a * show equivalent lengths values supplied by manufacturers based on specific pipe diameters and CFactors and they require no adjustment. All values for fittings not marked with a * will be adjusted in the calculation for CFactors of other than 120 and diameters other than Sched 40 per NFPA.

Pressure / Flow Summary - STANDARD

Premier Fire Systems, Inc.
Trader Joes Vanilla Box

Date 02-07-2018

Node No.	Elevation	K-Fact	Pt Actual	Pn	Flow Actual	Density	Area	Press Req.
SP01	14.0	5.6	21.56	na	26.0	0.2	130	7.0
EQ01	13.0		23.26	na				
1	13.0	K = K @ EQ01	23.26	na	26.0			
2	13.0	K = K @ EQ01	23.37	na	26.07			
3	13.0	K = K @ EQ01	23.89	na	26.35			
4	13.0		31.8	na				
5	13.0		31.91	na				
6	13.0		31.99	na				
7	13.0		32.04	na				
8	13.0		32.07	na				
9	13.0		32.07	na				
10	13.0		35.88	na				
11	13.0		35.89	na				
12	13.0		36.0	na				
13	13.0		36.34	na				
14	13.0		36.35	na				
TOR	13.0		38.74	na				
BOR	2.0		48.91	na				
TOER	12.67		57.67	na				
BOER	2.0		63.1	na				
ELL	-5.0		66.35	na				
TEST	0.0		65.14	na	250.0			
15	13.0	K = K @ EQ01	23.27	na	26.0			
16	13.0	K = K @ EQ01	23.5	na	26.13			
17	13.0	K = K @ EQ01	24.22	na	26.53			
18	13.0		36.08	na				
19	13.0		36.25	na				
20	13.0		31.77	na				
21	13.0		31.76	na				
22	13.0	K = K @ EQ01	27.93	na	28.49			
23	13.0	K = K @ EQ01	27.76	na	28.41			
24	13.0	K = K @ EQ01	27.79	na	28.42			
25	13.0	K = K @ EQ01	28.27	na	28.66			
26	13.0		36.01	na				
27	13.0		36.02	na				
28	13.0	K = K @ EQ01	27.94	na	28.5			
29	13.0	K = K @ EQ01	27.77	na	28.41			
30	13.0	K = K @ EQ01	27.8	na	28.43			
31	13.0	K = K @ EQ01	28.28	na	28.67			

The maximum velocity is 12.05 and it occurs in the pipe between nodes 17 and 18

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
SP01	26.00	1.049	1T	5.0	1.000	21.556		K Factor = 5.60
to		120.0		0.0	5.000	0.433		
EQ01	26.0	0.2115		0.0	6.000	1.269		Vel = 9.65
	0.0							
	26.00					23.258		K Factor = 5.39
1	21.21	1.682		0.0	8.000	23.258		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
2	21.21	0.0145		0.0	8.000	0.116		Vel = 3.06
2	26.07	1.682		0.0	8.000	23.374		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
3	47.28	0.0641		0.0	8.000	0.513		Vel = 6.83
3	26.35	1.682	1T	9.9	44.480	23.887		K Factor @ node EQ01
to		120.0		0.0	9.900	0.0		
4	73.63	0.1455		0.0	54.380	7.913		Vel = 10.63
4	98.06	4.26		0.0	15.000	31.800		
to		120.0		0.0	0.0	0.0		
5	171.69	0.0075		0.0	15.000	0.113		Vel = 3.86
5	-29.68	4.26		0.0	15.000	31.913		
to		120.0		0.0	0.0	0.0		
6	142.01	0.0053		0.0	15.000	0.080		Vel = 3.20
6	-29.02	4.26		0.0	15.000	31.993		
to		120.0		0.0	0.0	0.0		
7	112.99	0.0035		0.0	15.000	0.052		Vel = 2.54
7	-34.69	4.26		0.0	12.330	32.045		
to		120.0		0.0	0.0	0.0		
8	78.3	0.0018		0.0	12.330	0.022		Vel = 1.76
8	-39.17	4.26		0.0	9.670	32.067		
to		120.0		0.0	0.0	0.0		
9	39.13	0.0005		0.0	9.670	0.005		Vel = 0.88
9	0.0	1.682	2T	19.799	64.510	32.072		
to		120.0		0.0	19.799	0.0		
10	39.13	0.0452		0.0	84.309	3.809		Vel = 5.65
10	0.0	4.26		0.0	9.670	35.881		
to		120.0		0.0	0.0	0.0		
11	39.13	0.0004		0.0	9.670	0.004		Vel = 0.88
11	39.17	4.26	2E	26.334	37.340	35.885		
to		120.0		0.0	26.334	0.0		
12	78.3	0.0018		0.0	63.674	0.113		Vel = 1.76
12	34.69	4.26	2E	26.334	71.080	35.998		
to		120.0		0.0	26.334	0.0		
13	112.99	0.0035		0.0	97.414	0.339		Vel = 2.54
13	29.02	4.26		0.0	2.330	36.337		
to		120.0		0.0	0.0	0.0		
14	142.01	0.0052		0.0	2.330	0.012		Vel = 3.20
14	243.07	4.26	1T	26.334	18.520	36.349		
to		120.0	2E	26.334	52.668	0.0		
TOR	385.08	0.0336		0.0	71.188	2.394		Vel = 8.67
TOR	0.0	4.26	2B	31.601	11.000	38.743		
to		120.0	1Fsp	0.0	60.569	7.764		* * Fixed Loss = 3
BOR	385.08	0.0336	1S	28.968	71.569	2.407		Vel = 8.67

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
BOR	0.0	4.26	7E	92.17	181.440	48.914		
to		120.0	1Zss	0.0	92.170	-0.441		* * Fixed Loss = 4.18
TOER	385.08	0.0336		0.0	273.610	9.200		Vel = 8.67
TOER	0.0	4.26	1E	13.167	10.670	57.673		
to		120.0		0.0	13.167	4.621		
BOER	385.08	0.0336		0.0	23.837	0.802		Vel = 8.67
BOER	0.0	6.16	1S	45.906	7.000	63.096		
to		140.0		0.0	45.906	3.032		
ELL	385.08	0.0042		0.0	52.906	0.222		Vel = 4.15
ELL	0.0	6.16	4E	80.336	100.000	66.350		
to		140.0	1G	4.304	127.677	-2.166		
TEST	385.08	0.0042	1T	43.037	227.677	0.956		Vel = 4.15
	250.00							Qa = 250.00
	635.08					65.140		K Factor = 78.69
1	4.79	1.682		0.0	8.920	23.258		
to		120.0		0.0	0.0	0.0		
15	4.79	0.0009		0.0	8.920	0.008		Vel = 0.69
15	26.00	1.682		0.0	8.000	23.266		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
16	30.79	0.0290		0.0	8.000	0.232		Vel = 4.45
16	26.14	1.682		0.0	8.000	23.498		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
17	56.93	0.0905		0.0	8.000	0.724		Vel = 8.22
17	26.53	1.682	1T	9.9	54.710	24.222		K Factor @ node EQ01
to		120.0		0.0	9.900	0.0		
18	83.46	0.1835		0.0	64.610	11.855		Vel = 12.05
18	129.93	4.26		0.0	15.000	36.077		
to		120.0		0.0	0.0	0.0		
19	213.39	0.0113		0.0	15.000	0.169		Vel = 4.80
19	29.68	4.26		0.0	7.170	36.246		
to		120.0		0.0	0.0	0.0		
14	243.07	0.0144		0.0	7.170	0.103		Vel = 5.47
	0.0							
	243.07					36.349		K Factor = 40.32
4	-98.06	4.26		0.0	12.330	31.800		
to		120.0		0.0	0.0	0.0		
20	-98.06	-0.0027		0.0	12.330	-0.033		Vel = 2.21
20	49.03	4.26		0.0	9.670	31.767		
to		120.0		0.0	0.0	0.0		
21	-49.03	-0.0007		0.0	9.670	-0.007		Vel = 1.10
21	0.0	1.682	1T	9.9	45.930	31.760		
to		120.0		0.0	9.900	0.0		
22	-49.03	-0.0686		0.0	55.830	-3.830		Vel = 7.08
22	28.49	1.682		0.0	12.080	27.930		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
23	-20.54	-0.0137		0.0	12.080	-0.165		Vel = 2.97
23	28.41	1.682		0.0	12.830	27.765		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
24	7.87	0.0023		0.0	12.830	0.029		Vel = 1.14

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	******* Notes ******
24	28.42	1.682		0.0	12.080	27.794		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
25	36.29	0.0393		0.0	12.080	0.475		Vel = 5.24
25	28.67	1.682	1T	9.9	57.170	28.269		K Factor @ node EQ01
to		120.0		0.0	9.900	0.0		
26	64.96	0.1154		0.0	67.070	7.740		Vel = 9.38
26	0.0	4.26		0.0	9.670	36.009		
to		120.0		0.0	0.0	0.0		
27	64.96	0.0012		0.0	9.670	0.012		Vel = 1.46
27	64.97	4.26		0.0	12.330	36.021		
to		120.0		0.0	0.0	0.0		
18	129.93	0.0045		0.0	12.330	0.056		Vel = 2.92
	0.0							
	129.93					36.077		K Factor = 21.63
20	-49.03	1.682	1T	9.9	45.930	31.767		
to		120.0		0.0	9.900	0.0		
28	-49.03	-0.0686		0.0	55.830	-3.829		Vel = 7.08
28	28.50	1.682		0.0	12.080	27.938		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
29	-20.53	-0.0137		0.0	12.080	-0.166		Vel = 2.96
29	28.41	1.682		0.0	12.830	27.772		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
30	7.88	0.0023		0.0	12.830	0.030		Vel = 1.14
30	28.42	1.682		0.0	12.080	27.802		K Factor @ node EQ01
to		120.0		0.0	0.0	0.0		
31	36.3	0.0393		0.0	12.080	0.475		Vel = 5.24
31	28.67	1.682	1T	9.9	57.170	28.277		K Factor @ node EQ01
to		120.0		0.0	9.900	0.0		
27	64.97	0.1155		0.0	67.070	7.744		Vel = 9.38
	0.0							
	64.97					36.021		K Factor = 10.83
5	29.68	1.682	2T	19.799	140.110	31.913		
to		120.0		0.0	19.799	0.0		
19	29.68	0.0271		0.0	159.909	4.333		Vel = 4.29
	0.0							
	29.68					36.246		K Factor = 4.93
6	29.02	1.682	2T	19.799	142.390	31.993		
to		120.0	2F	4.95	24.749	0.0		
13	29.02	0.0260		0.0	167.139	4.344		Vel = 4.19
	0.0							
	29.02					36.337		K Factor = 4.81
7	34.69	1.682	2T	19.799	89.530	32.045		
to		120.0		0.0	19.799	0.0		
12	34.69	0.0362		0.0	109.329	3.953		Vel = 5.01
	0.0							
	34.69					35.998		K Factor = 5.78
8	39.18	1.682	2T	19.799	64.510	32.067		
to		120.0		0.0	19.799	0.0		
11	39.18	0.0453		0.0	84.309	3.818		Vel = 5.66

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv. Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	*******	Notes	******
	0.0								
	39.18				35.885		K Factor =	6.54	

Auto Peaking Summary - List of Pipes for Area Calculated

Left Side			Right Side		
From	To	Length	From	To	Length
3	4	44.480	17	18	54.710
3	4	44.480	17	18	54.710

		Flow Required	Safety Margin	Pressure Differential
Left	8.000	634.545	6.761	-0.089
Area Calculated		635.077	6.672	0.000
Right	8.000	634.945	6.847	-0.175

Typical Distance Between Heads = 8.000

Split Point Used in Worst Area Peaked = 1

Split Point Used in Area Calculated = 1

PERMIT UPDATE

Date Update Issued 4/19/19
Control # C-18-004058+E
Permit # 18-3471+E

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN)
Brick Township, NJ
Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092
Telephone:

Contractor National Maintenance & Buildout
Address 48A Vincent Circle Ivyland PA 18974
Telephone: (215) 442-2538
Lic. No. or Bldrs. Reg. No. 13vh07302100
Federal Employee. No. 300020638

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☑ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
- FORMER ETHAN ALLEN ...UPDATE +E - 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 $1,200

D. Newman Jr. 16
Construction Official

4/15/19
Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$0
Fire Protection	$116
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$2
CO Fee	
Other	$0
Total	$118
Check No.	24755
Cash	$0
Credit	$0
Collected By	M. Vega

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE **3 PINK - TAX ASSESSOR** 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

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

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

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

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

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

PERMIT UPDATE

Date Update Issued 2/19/19
Control # C-18-004058+A
Permit # 18-3471+A

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN)
Brick Township, NJ
Owner in Fee: FEDERAL REALTY INVESTMENT TRUST % PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092
Telephone:

Contractor: National Maintenance & Buildout
Address: 48A Vincent Circle Ivyland PA 18974
Telephone: (215) 442-2538
Lic. No. or Bldrs. Reg. No. 13vh07302100
Federal Employee. No. 300020638

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 (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
ALTERATION - COMMERCIAL, VANILLA BOX - FORMER ETHAN ALLEN ...UPDATE +A

PAYMENTS (Office Use Only)

Building	$1,500
Electrical	$730
Plumbing	$0
Fire Protection	$406
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$127
CO Fee	
Other	$200
Total	$2,963
Check No.	
Cash	$0
Credit	$0
Collected By	

+175

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 $67,000

Construction Official

Date 2/15/19

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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  3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
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  Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

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

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- [x] A complete copy of released plans must be kept on the job site.

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

PERMIT UPDATE

Date Update Issued 2/19/19
Control # C-18-004058+B
Permit # 18-3471+B

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier

Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN)
Brick Township, NJ

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092

Telephone:

Contractor: National Maintenance & Buildout
Address: 48A Vincent Circle Ivyland PA 18974

Telephone: (215) 442-2538
Lic. No. or Bldrs. Reg. No. 13vh07302100
Federal Employee. No. 300020638

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☑ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:

ALTERATION - COMMERCIAL, VANILLA BOX - FORMER ETHAN ALLEN ...UPDATE +B - ALARMS

PAYMENTS (Office Use Only)

Building	$0
Electrical	$150
Plumbing	$0
Fire Protection	$116
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$4
CO Fee	
Other	$0
Total	$270
Check No.	3915
Cash	$0
Credit	$0
Collected By	

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 $2,000

D. Nauman Jr

Construction Official

2/19/19

Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

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

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

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

PERMIT UPDATE

Date Update Issued
Control # C-18-004058+C
Permit # 18-3471+C

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN)
Brick Township, NJ
Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092
Telephone:

Contractor National Maintenance & Buildout
Address 48A Vincent Circle Ivyland PA 18974
Telephone: (215) 442-2538
Lic. No. or Bldrs. Reg. No. 13vh07302100
Federal Employee. No. 300020638

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ALTERATION - COMMERCIAL, VANILLA BOX - FORMER ETHAN ALLEN ...UPDATE +C - DEMISING WALL TO ENCLOSE LOADING DOCK

PAYMENTS (Office Use Only)

Building	$1,000
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$38
CO Fee	
Other	$0
Total	$1,038
Check No.	2484
Cash	$0
Credit	$0
Collected By	

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 $20,000

Construction Official — Date 2/15/19

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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

- [x] A complete copy of released plans must be kept on the job site.

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

PERMIT UPDATE

Date Update Issued 4/9/19
Control # C-18-004058+D
Permit # 18-3471+D

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN)
Brick Township, NJ
Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX
76092
Telephone:

Contractor National Maintenance & Buildout
Address 48A Vincent Circle Ivyland PA 18974
Telephone: (215) 442-2538
Lic. No. or Bldrs. Reg. No. 13vh07302100
Federal Employee. No. 300020638

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☑ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:

- FORMER ETHAN ALLEN ...UPDATE +D - ALARM RECONFIGURATION

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 $9,000

D Murray Jr 3/8/19
Construction Official Date

U.C.C. F170
equiv (rev 1/04)

PAYMENTS (Office Use Only)

Building	$0
Electrical	$150
Plumbing	$0
Fire Protection	$116
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$18
CO Fee	
Other	$0
Total	$284
Check No.	24620
Cash	$0
Credit	$0
Collected By	

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

architects

KELLENYI JOHNSON WAGNER

21 Peters Place
Red Bank, NJ
07701-1792
732-741-5270
Fax:741-8439
www.kjw.com

February 7, 2019

Brick Township Building Department
401 Chambers Bridge Road
Brick, NJ 08723

Re: Permit #18-3471
Landlords Shell Fitout Space 43A
Brick Plaza Shopping Center
Chambers Bridge Road & Route 70, Brick, NJ (KJW #2715.5)

Attached please find two signed and sealed sets of revised architectural plans, sheets A-3 & A-4. These are submitted as amendments to the existing above referenced project, Permit #18-3471.

These two new sheets detail an expanded scope of work to include a demising wall (at Space 42), furring and sheetrock at exterior walls, construction of partitions to create an enclosed loading dock bay and a new opening between space 43A and this loading dock bay.

Please feel free to contact me with any questions regarding these amendments.

Very Truly Yours

Eric L. Wagner AIA
NJ License #AI-10366

PC: Neil Cain – Federal Realty
Joe Kornsey – National Maintenance and Build Out Corp.

J Robert Johnson
Eric L Wagner
Richard R Kane

4H

RECEIVING CLERK _____
DATE REC'D _____

ZONING PERMIT APPLICATION

PERMIT # ZP19-00147
DATE ISSUED 2/19/19

BLOCK: 671 LOT: 1.01 QUALIFIER: — SITE ADDRESS: Chambers Bridge Rd & Rt 70 Brick Plaza Former Ethan Allen

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Federal Realty Investment Trust
   COMPLETE ADDRESS: 50 E. Wynnewood Rd, Wynnewood PA 19096
   PHONE # 484-419-1208 EMAIL: ncaine federal realty
2. NAME OF APPLICANT: Same as 1 Above
   APPLICANT ADDRESS: _____
   PHONE # _____ EMAIL: _____
3. RESPONSIBLE PERSON FOR WORK: TBD
   PHONE# _____ FAX# _____
4. SIGNATURE OF APPLICANT: [signature]

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 75-
OTHER: $ _____
TOTAL: $ 75-

REQUIRED BY APPLICANT

RESIDENTIAL: —
COMMERCIAL: COMMERCIAL
EXISTING USE: Ethan Allen
PROPOSED USE: Trader Joe's

BOARD APPROVAL: ___ PB ___ ZB
RESOLUTION#: _____
APPROVAL DATE: _____

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)
*NEW BUILDING: _____ *ADDITION _____ *ALTERATION X *PORCH _____ *DECK _____

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____ MATERIAL _____

HEIGHT: _____ (*IF APPLICABLE)

OTHER & infill at loading dock.

DESCRIPTION: Landlord Work at Brick Plaza Space 434 Including 2 dumpster enclosures

ZONING REVIEW:
DATE REVIEWED: 1-24-19 DATE DENIED: _____ DATE APPROVED: 1-24-19 INTLS: [signature]

(SEE BACK PAGE)

TOWNSHIP OF BRICK ZONING CHECKLIST

1) **Four (4) copies of plot plan containing:**

- All existing and proposed structures
- All dimensions of the lot and structures
- All setbacks from the structures to the property lines
- All adjacent streets and waterways
- If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

2) **Two copies of the plans with dimensions and heights noted:**

- Floor plans and elevations
- Signed site plans
- Property map
- Survey map

Choose which is applicable for submission

3) **Plot plans and building plans must match for complete review**

NOTE: NO PARTIAL, TAPED, FAXED, REDUCED OR ENLARGED COPIES CAN BE ACCEPTED

01/2010

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1336

Date Issued: 2/19/19
Application Number: ZA-19-00005
Application Date: 1/2/2019
Project Number:
Permit Number: ZP-19-00147
Fee: $75.00

Zoning Permit

Worksite **56 CHAMBERS BRIDGE RD.**
Location: **Brick Township, NJ 08723**

Owner: **FEDERAL REALTY INVESTMENT TRUST %**
Address: **PO BOX 92129 (ALTUS GROUP SOUTHLAKE, TX 76092**

Applicant: **FEDERAL REALTY INVESTMENT TRUST %**
Address: **PO BOX 92129 (ALTUS GROUP SOUTHLAKE, NJ 76092**

Block: **671** Lot: **1.01** Qualifier: _____ Zone: **B-3**

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Present Use: **Shopping Center**

☐ Non Conforming Use ☐ Non Conforming Structure

Proposed Use: **Shopping Center (Future Tenant) Formerly Ethan Allen**

Work Description:

Rehabilitation - Landlord Shell Fit-Out for existing unoccupied space 43A.

(2) Dumpster Enclosures and work to the existing loading dock.

A separate tenant fit up application must be submitted and approved before space can be occupied.

Additional Zoning Permit is required for additional work and signage.

Application Approved Date: 1/2/2019

Upon review it was determined that the Zoning Permit:

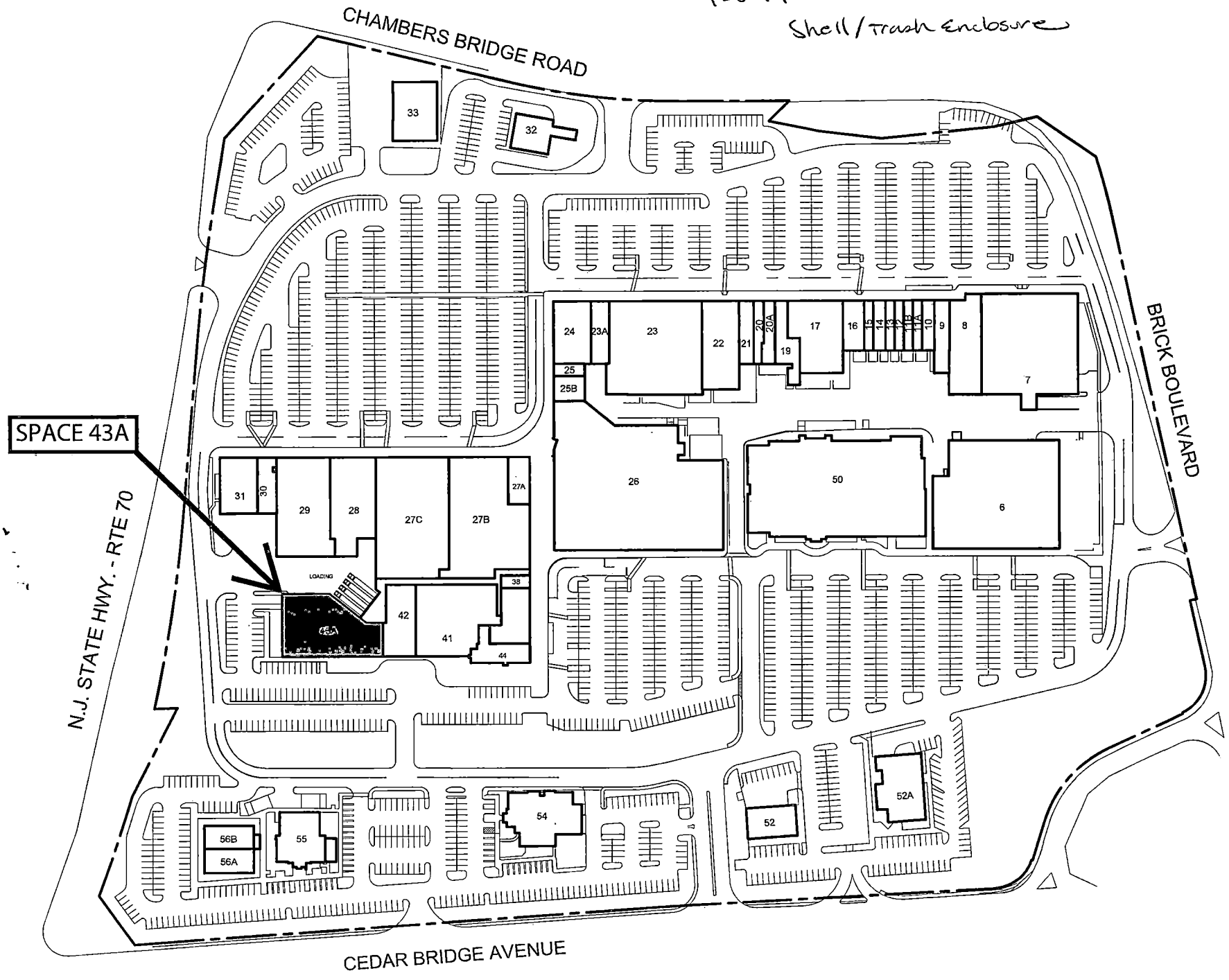
☑ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Approved with Conditions
☐ Valid Nonconforming Use/Structure is established by
☐ Zoning Board of Adjustment ☐ Zoning Officer

Christopher J. Romano, Assistant Zoning Officer — 1/2/2019 Date

Sean Kinnevy, Zoning Officer — 1/3/19 **Date**

Approved For Zoning
1-2-19 CW

Shell / Trash Enclosure



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1336

Date Issued: 2/19/19
Application Number: ZA-19-00005
Application Date: 1/2/2019
Project Number:
Permit Number: ZP19-00147
Fee: $75.00

Zoning Permit

Worksite **56 CHAMBERS BRIDGE RD.**
Location: **Brick Township, NJ 08723**

Owner: **FEDERAL REALTY INVESTMENT TRUST %**
Address: **PO BOX 92129 (ALTUS GROUP SOUTHLAKE, TX 76092**

Applicant: **FEDERAL REALTY INVESTMENT TRUST %**
Address: **PO BOX 92129 (ALTUS GROUP SOUTHLAKE, NJ 76092**

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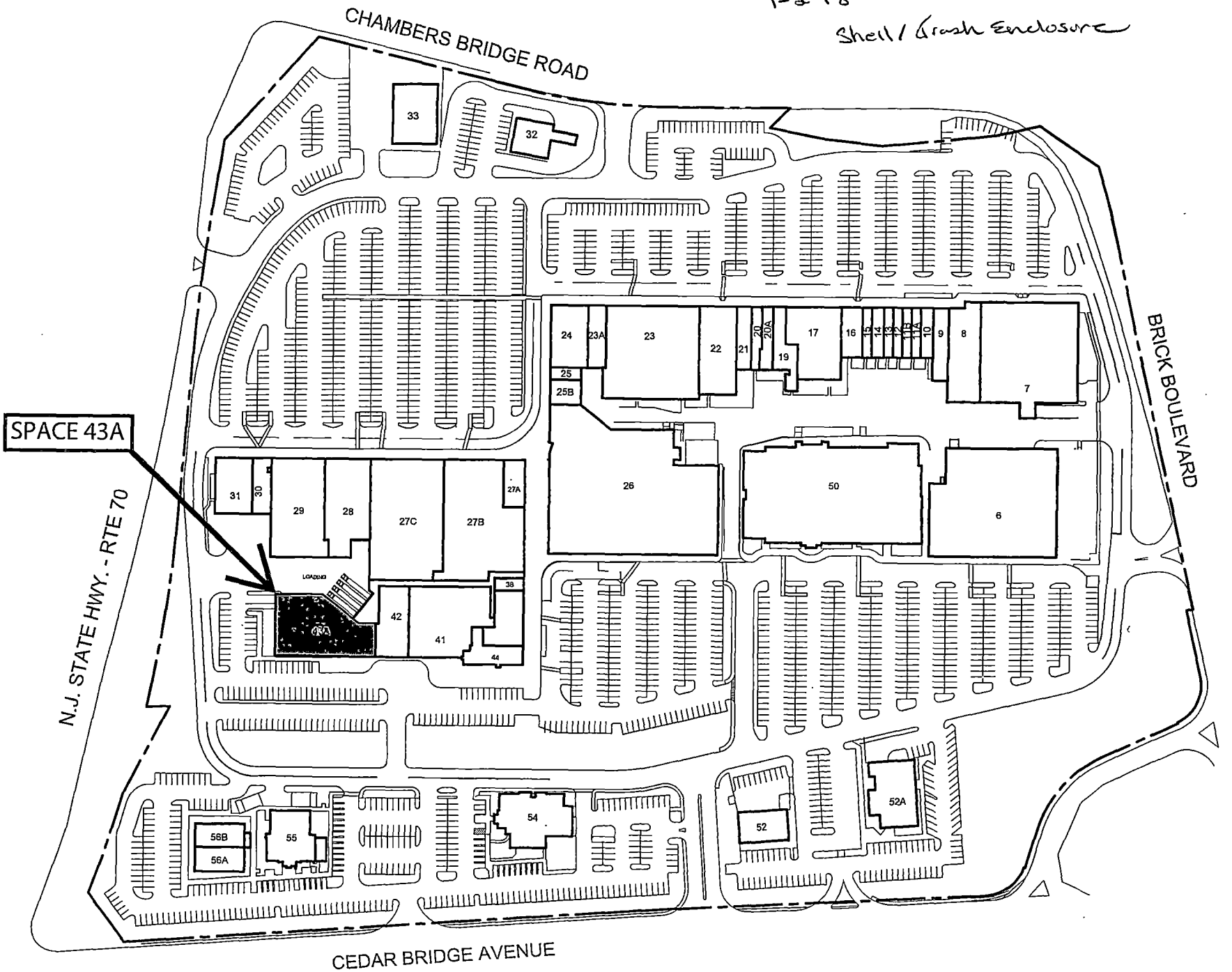
☑ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Approved with Conditions
☐ Valid Nonconforming Use/Structure is established by
☐ Zoning Board of Adjustment ☐ Zoning Officer

Christopher J. Romano, Assistant Zoning Officer — 1/2/2019 Date

Sean Kinnevy, Zoning Officer — 1/3/19 **Date**

Approved For Zoning
1-2-18
on
Shell / Trash Enclosure



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, January 29, 2019

To: FEDERAL REALTY INVESTMENT TRUST
%
PO BOX 92129 (ALTUS GROUP
SOUTHLAKE, TX 76092

RE: Fire Subcode
Block: 671 Lot: 1.01 Qual:
56 CHAMBERS BRIDGE RD.
Permit Number: 18-3471+B Control Number: C-18-004058+B
Last Submit Date: Tuesday, January 29, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

Your request is hereby denied based upon the following infractions.

Please provide specifications on dialer being installed

Sincerely,

Richard Orlando, Subcode Official

CC:

RESUBMIT MFP
SUBCODES Elec i Fire
DATES 1/30/19

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, January 29, 2019

To: FEDERAL REALTY INVESTMENT TRUST
%
PO BOX 92129 (ALTUS GROUP
SOUTHLAKE, TX 76092

RE: Electrical Subcode
Block: 671 Lot: 1.01 Qual:
56 CHAMBERS BRIDGE RD.
Permit Number: 18-3471+B Control Number: C-18-004058+B
Last Submit Date: Monday, January 28, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

Your request is hereby denied based upon the following infractions.

Provide specifications for wireless dialer.

Sincerely,

Patrick Callahan, Subcode Official

CC:

RESUBMIT ~~PAT~~

SUBCODES Elec. & Fire

DATES ~~1/30/19~~ 2/12/19

CONSTRUCTION PERMIT

Date Issued
Control # C-18-004058
Permit # B-3471

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier

Work Site Location: 56 CHAMBERS BRIDGE RD. (ETHAN ALLEN)
Brick Township, NJ

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092

Telephone:

Contractor: National Maintenance & Buildout
Address: 48A Vincent Circle Ivyland PA 18974

Telephone: (215) 442-2538
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 300020638

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

ALTERATION - COMMERCIAL - FORMER ETHAN ALLEN ..INTERIOR CLEANOUT

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 $47,500

D. Nuzman 12/18/18
Construction Official Date

PAYMENTS (Office Use Only)

Building	$1,500
Electrical	$150
Plumbing	$150
Fire Protection	$116
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$91
CO Fee	
Other	$0
Total	$2,007
Check No.	
Cash	$0
Credit	$0
Collected By	

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE **3 PINK - TAX ASSESSOR** 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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

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

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

- [x] A complete copy of released plans must be kept on the job site.

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

TOWNSHIP OF BRICK

DEBRIS FORM

WORK SITE ADDRESS: 56 Chambers Bridge Rd. Space #43A

BLOCK: 671 **LOT:** 1.01

CONTRACTOR:

CONTRACTOR'S ADDRESS:

Type of Construction(minor, new home): Commercial Interior Demo.

Type of Debris (shingles, siding, wood, etc.): Drywall, Carpet, Ceiling Tiles/Grids Light Fixtures

Party responsible for removal:

Dumpster Size: TBD

Destination of Debris:

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclables.

Generator's Certification: "Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and I have been authorized in writing, to make such declaration by the person in charge of the generator's operation."

Signature ___/___/___

Date

Eric Wagner

Print Name

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: ECC
PERMIT #: Rev-19-00012

BLOCK: 671 LOT: 1.01 ADDRESS: Chambers Bridge Rd & Rt 70 (former Ethan Allen) Brick Plaza

IDENTIFICATION:

1. WORK SITE ADDRESS: Chambers Bridge Rd & Rt 70 Space 43A Brick, Plaza
2. NAME OF OWNER IN FEE: Federal Realty Investment Trust
   ADDRESS: 50 E Wynnewood Rd PHONE #: (484-419-1208
   Wynnewood, PA 19096 FAX #: (__) _____
3. PRINCIPAL CONTRACTOR: TBD
   ADDRESS: _____ PHONE #: (__) _____
   _____ FAX #: (__) _____
4. ARCHITECT OR ENGINEER: Kellenyi Johnson Wagner
   ADDRESS: 21 Peters Pl. Red Bank NJ 07701 PHONE: # 732-741-5270
5. RESPONSIBLE PERSON FOR WORK: TBD
   ADDRESS: _____

PHONE #: (__) _____ FAX #: (__) _____ E-MAIL: _____

FEE SUMMARY:

APPLICATION FEE:	$ 200.00
REVIEW FEE:	$
INSPECTION FEE:	$
OTHER _____ :	$
BOND(S):	$
TOTAL:	$ 200.00

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING
☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL
☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____
☑ OTHER Construct 2 dumpster enclosures & infill 1 loading dock.
LENGTH: _____ WIDTH: _____ HEIGHT: _____

SPECIAL CONDITIONS:

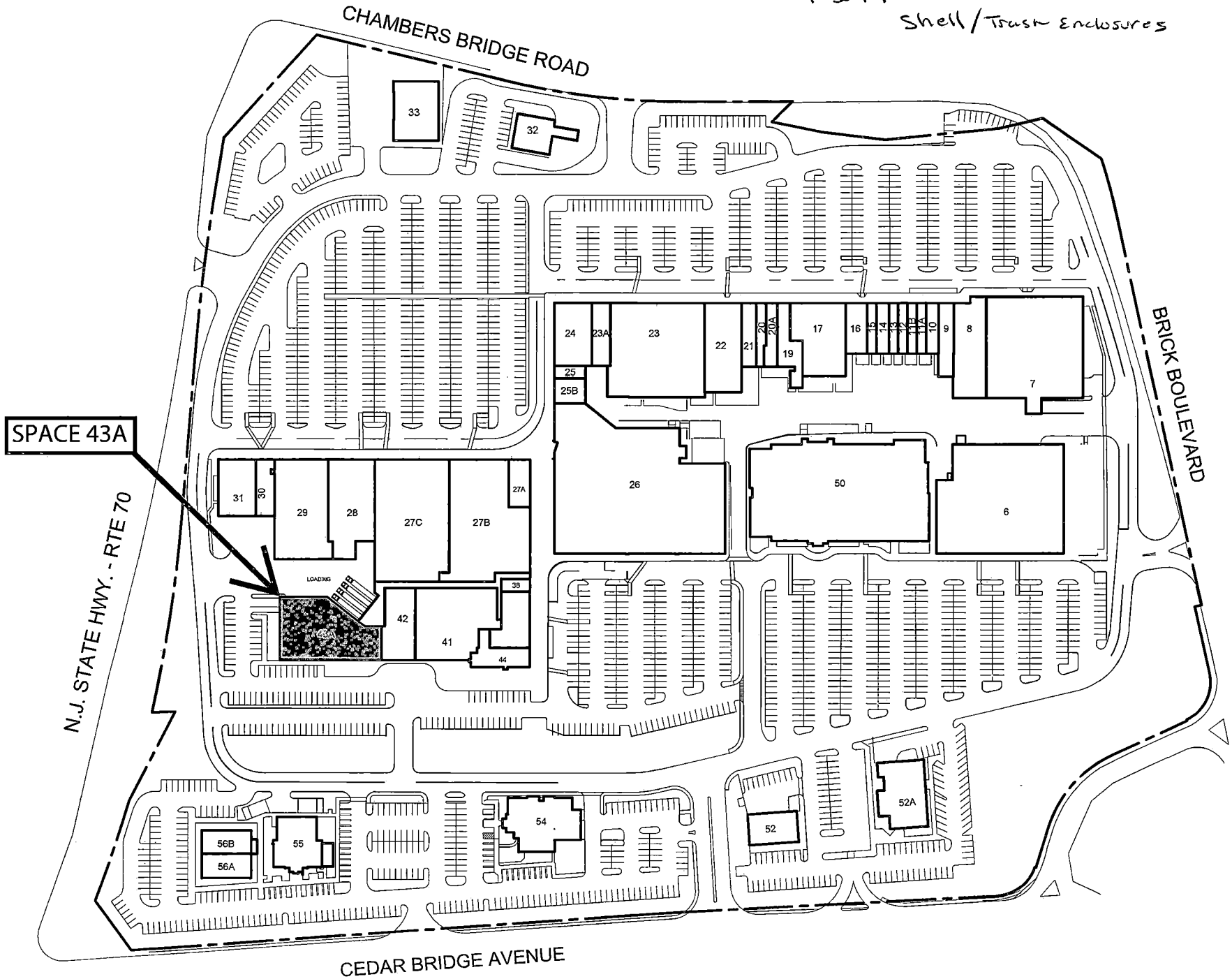
OCEAN COUNTY SOILS: _____
DRAINAGE EASEMENTS: _____
UTILITY EASEMENTS: _____
CONSERVATION EASEMENTS: _____
FEMA REQUIREMENTS: _____
D.E.P. PERMITS: _____
BOARD APPROVAL: ☐ PB ☐ ZB
APPLICATION NUMBER: _____
APPROVED DATE: _____

COMMERCIAL

ENGINEERING REVIEW:

DATE RECEIVED: 1/14/19 DATE REJECTED: _____ DATE APPROVED: 1/14/19 INITIALS: ECC

Approved For Zoning
1-2-19
on
Shell / Trash Enclosures



Approved For Zoning
1-2-19

Shell / Trash Enclosure