



Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

***This File Contains Personal Identifiable
Information of Private Citizen(s).***

Certain information contained in this file is ***Exempt from Release*** under the Open Public Records Act (OPRA) (Public Law 2001, CHAPTER 404 (N.J.S.A. 47:1A-1 et seq.)) and Executive Orders issued by the Governor of New Jersey. The following information ***MUST*** be redacted prior to release:

- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson", is written over a horizontal line.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020

BLOCK 671 LOT 1.01 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 19-2149


CONSTRUCTION PERMIT APPLICATION

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

C19-000989

I. IDENTIFICATION

1. Proposed Work Site at: 56 CHAMBERS BRIDGE RD - SPACE #41

2. Name of Owner in Fee: BEACH ROCKS, LLC P/B/A THE GRAVITY VAULT

Tel. (732) 308-0335 e-mail SAM.WRIGHT@GRAVITYVAULT.COM

Address 35 EDGEWOOD AVE., LITTLE SILVER, NJ 07739

3. Ownership in Fee: Public _____ Private X

4. Principal Contractor: PJR CONSTRUCTION GROUP, INC. Tel. (732) 308-0335

Address 200 DANIELS WAY FREEHOLD, NJ 07728 e-mail MSHELTON@PJRGROUP.COM

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. 47-5424815 FAX: (732) 308-0996

5. Architect or Engineer KELVENI JOHNSON WALNOR Contact ERIC WAGNER

Address 21 PETERS PLACE RED BANK, NJ e-mail EWAGNER@KJW.COM

Tel. (732) 741-5270 FAX: (732) 741-8439

6. Responsible Person in Charge once Work has Begun MARTIN SHELTON

Tel. (732) 308-0335 FAX: (732) 308-0996
732-995-2194

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	<u>1</u>
2. Height of Structure	<u>40</u> ft.
3. Area — Largest Floor	<u>13,282</u> sq. ft.
4. New Building Area	<u>13,282</u> sq. ft.
5. Volume of New Structure	<u>531,280</u> cu. ft.
6. Max. Live Load	
7. Max. Occupancy Load	<u>287</u>
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 _____	

IIa. PROPOSED WORK

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

IIb. SUBCODES

(Check all that apply)

- ☒ Building
☒ Electrical
☒ Plumbing
☐ Fire Protection
☐ Elevator

FOR OFFICE USE ONLY (Optional)									
Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer	
<u>150.00</u>									
<u>74.00</u>									
<u>5000</u>									
<u>2200</u>									

TOTAL COST 251,000

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

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: INDOOR ROCK CLIMBING
2. Use Group, Proposed: A3

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

- D. Construct. Classification: Present ZB
Proposed ZB



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: Chambersbridge Road & Route 70 (Space 41 - Gravity Vault)

2. Name of Owner in Fee: Federal Realty Investment Trust

Tel. (484) 419-1208

e-mail NCain@federalrealty.com

Address 50 E Wynnewood Road, Wynnewood, PA. 19096

zip code

3. Ownership in Fee: ☒ Public ☐ Private ☒

4. Principal Contractor: TBD Tel. CO 312/19

Address CO 312/19 e-mail CO 312/19

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

5. Architect or Engineer: Kellenyi Johnson Wagner

Contact: Eric Wagner

Address 21 Peters Place, Red Bank, NJ

e-mail ewaner@kjw.com

Tel. (732) 741-5270

FAX: (732) 741-8439

6. Responsible Person in Charge once Work has Begun: TBD

FAX: _____

IIa. PROPOSED WORK

☐ Minor Work

☐ Repair

☐ Asbestos Abat. -Suboh.

☐ New Building

☒ Alteration

☐ Lead Hazard Abatement

☐ Addition

☐ Renovation

☐ Radon Remediation

☐ Demolition

☐ Reconstruction

☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

☒ Building

☒ Electrical

☒ Plumbing

☒ Fire Protection

☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
85,000	<u>CO</u>	<u>6-5-19</u>	<u>4-22-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>
55,000	<u>CO</u>	<u>3-19-19</u>	<u>7-23-19</u>	<u>4-22-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>
7,500	<u>CO</u>	<u>3-19-19</u>	<u>7-23-19</u>	<u>4-22-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>
7,500	<u>CO</u>	<u>3-19-19</u>	<u>7-23-19</u>	<u>4-22-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>
	<u>CO</u>	<u>3-19-19</u>	<u>7-23-19</u>	<u>4-22-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>	<u>8-12-19</u>

TOTAL COST \$155,000

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

V. FEE SUMMARY (for office use only)

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

	Update	Update
1. Building	<u>6250</u>	<u>150</u>
2. Electrical	<u>365</u>	<u>150</u>
3. Plumbing	<u>834</u>	<u>175</u>
4. Fire Protection	<u>116</u>	<u>175</u>
5. Elevator Devices		
6. Subtotal	<u>444</u>	<u>30</u>
7. Less 20% for State Plan Review	<u>23</u>	<u>45</u>
8. Subtotal	<u>152</u>	
9. State Permit Surcharge Fee	<u>7634</u>	<u>186</u>
10. Subtotal	<u>186</u>	<u>255</u>
11. Cert. of Occupancy		
12. Other		
13. TOTAL	<u>7634</u>	<u>186</u>

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories 1
2. Height of Structure 40 ft.
3. Area - Largest Floor 13,282 sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Max. Live Load 100
7. Max. Occupancy Load 287
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 _____

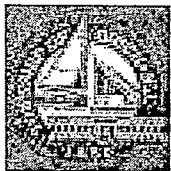
VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____
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: Exercise
2. Use Group, Proposed: A-3 Select Group _____
3. Change in Use Group, Indicate Present _____
- C. MIXED USE -List secondary use(s): B
- D. Construct. Classification: Present IIB
- Proposed IIB



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Certificate

Construction Code Division
(Certificate of Occupancy)

Date Issued 12/18/2020
Control Number C-19-000989
Permit Number 19-2149
Permit Issue Date 08/14/2019
Certificate Number 19-2149

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. Brick Township, Block: 671 Lot: 1.01 Qual:
Owner in Fee: FEDERAL REALTY INVESTMENT TRUST %
Owner Address: PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX 76092)
Telephone: _____
Contractor: PJR CONSTRUCTION GROUP LLC
Address: 200 DANIELS WAY FREEHOLD NJ 07728
Telephone: (732) 308-0335 Fax: (732) 308-0996 Federal Emp. Number: _____
License Number or Builders Registration Number: _____
Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private
Use Group: A-3 Construction Classification: Type II
Maximum Live Load: 0 Maximum Occupancy Load: 287
Description of Work/Use: TENANT FIT UP - - GRAVITY VAULT

Certificate Comments:

☒ **Certificate of Occupancy**

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

☐ **Certificate of Approval**

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

☐ **Certificate of Continued Occupancy**

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

☐ **Temporary Certificate of Compliance**

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

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

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

☐ **Certificate of Compliance**

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

☐ **Temporary Certificate of Occupancy**

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

Construction Official

Date Printed: 12/18/2020

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

Fee: \$150.00

Check Number: 109

Collected By: Christopher Winters

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, 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.

(X) Check if contractor.

Agent Name Eric L. Wagner AIA, Kellenyi Johnson Wagner

Address 21 Peters Place

Red Bank, NJ 07701

Telephone (732) 741-5270

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.



Gravity Vault

ELECTRICAL SUBCODE TECHNICAL SECTION

Change of Contractor
All Existing

Date Received
Control #
Date Issued
Permit #

11/26/19
19-2149

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 _____
Work Site Location 56 Chambers Bridge Road
Brick Town, NJ
Owner in Fee: Federal Realty Investment Trust
Tel. _____ e-mail _____
Address _____

Contractor: Tenney Shore Electrical Tel. 732 552-1537
Address 521-A Trenton Ave e-mail _____
Point Pleasant
Contractor License No. 84920 Exp. Date 3-31-21
Home Improvement Contractor Registration No. or Exemption Reason _____
Federal Emp. ID No. 46-164-1449 FAX: _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 74,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
[] No Plans Required		Type: <u>Complete</u>	Failure	Approval	Initial
[] Partial Underslab Utilities Approved		Rough		<u>12-5-19</u>	<u>MM</u>
Date: _____ Approved by: _____		Barrier-Free			
[] Electric Plans Approved		Trench			
Date: _____ Approved by: _____		Temp. Serv.			
Joint Plan Review Required:		Constr. Serv.			
[] Bldg. [] Plumb. [] Fire [] Elev.		TCO			
SUBCODE APPROVAL for PERMIT		Other			
Date: _____		Service		<u>2/1/20</u>	<u>MM</u>
Approved by: _____		Final			
		Barrier-Free			
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-In-Card Date Issued			
[] CO [] CCG [] CA		Final Cut-in-Card Date Issued			
Date: <u>11-23-2019</u>		Annual Pool Inspection			
Approved by: <u>MM</u>		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: Joe Lianowski

Print name here: Joe Lianowski

☒ Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr [] Exempt Applicant

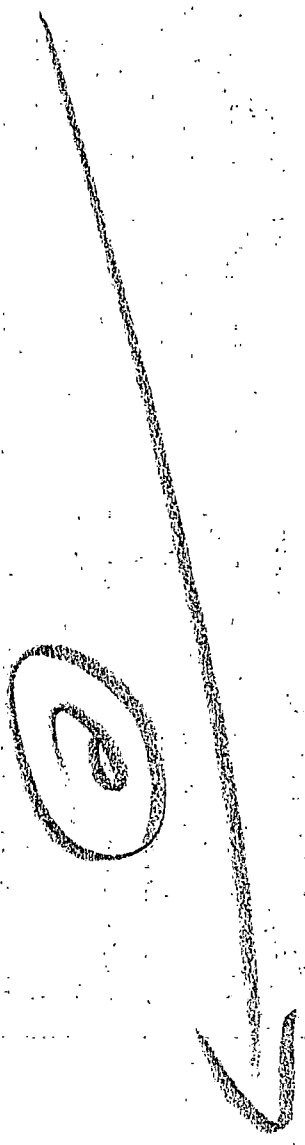
D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Tenant F.T up

QTY.	SIZE	ITEMS	FEE (Office Use Only)
<u>86</u>		Lighting Fixtures	
<u>42</u>		Receptacles	
<u>15</u>		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
<u>18</u>		Emergency & Exit Lights	
<u>11</u>		Communications Points	
<u>23</u>		Alarm Devices/F.A.C. Panel	
<u>191</u>		TOTAL NUMBERS	
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
<u>1</u>	<u>5</u>	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 \$

Handwritten: } Followed



Handwritten: Tech
change of center

Albion early 02-24-20 PMS

Gravity Vault

BUILDING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

NOTIFICATION—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 Chambersbridge Road & Route 70 (Space 41 - Gravity Vault)

Brick, NJ 08723 Tenant Fitout for Gravity Vault Climbing Gym

Owner in Fee: Federal Realty Investment Trust

Tel. (484) 419-1208 e-mail NCain@federalrealty.com

Address 50 E Wynnewood Road, Wynnewood, PA. 19096

Contractor: TBD street municipality zip code

Address _____ e-mail _____

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

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Failure	Approval	Initial
☐ No Plans Required			Type:				
☐ All			Footings				
☐ Footings/Foundations			Footings Bonding				
☐ Structural/Framework			Foundation				
☐ Exterior			Slab				
☐ Interior			Frame				
Joint Plan Review Required:			Truss Sys./Bracing				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Barrier-Free				
SUBCODE APPROVAL for PERMIT			Insulation				
Date: _____			Finishes -Base Layer				
Approved by: _____			Finishes -Final				
SUBCODE APPROVAL for CERTIFICATE			Energy				
☐ CO ☐ CCO ☐ CA			Mechanical				
Date: _____			TCO				
Approved by: _____			Other				
			Final				
			Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present A2 Proposed A3

No. of Stories 1

Height of Structure 40 ft.

Area — Largest Floor 13,095 sq. ft.

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

Volume of New Structure _____ cu. ft.

Max. Live Load 100

Max. Occupancy Load 262

Constr. Class Present IIB Proposed IIB

If Industrialized Building:

State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. \$ 85,000
2. Rehabilitation \$ 85,000
3. Total (1+ 2) \$ 85,000

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

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: Eric L Wagner AIA

Print name here: Eric L Wagner AIA

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Tenant fitout for a rockwall climbing gym - Gravity Vault

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 \$ _____

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

Gravity Vault

ELECTRICAL SUBCODE

TECHNICAL SECTION



Date Received
Control #
Date Issued
Permit #

CERTIFICATION—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 Chambersbridge Road & Route 70 (Space 41 - Gravity Vault)
Brick Plaza, Brick, NJ 08723 Tenant Fitout Gravity Vault Gym

Owner in Fee: Federal Realty Investment Trust

Tel. (484) 419-1208 e-mail ncain@fedrealrealty.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 A2 Proposed A3

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

Building Occupied as Climbing Gym Utility Co. JCP&L

Est. Cost of Elec. Work \$ 55,000

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)		
PLAN REVIEW		Type	Failure	Failure	Approval	Initial
[] No Plans Required		Rough				
[] Partial Underslab Utilities Approved		Barrier-Free				
Date _____ Approved by _____		Trench				
[X] Electric Plans Approved		Temp. Serv.				
Date <u>4/22/19</u> Approved by <u>PJC</u>		Constr. Serv.				
Joint Plan Review Required:		TCO				
[] Bldg. [] Plumb. [] Fire [] Elev.		Other				
SUBCODE APPROVAL for PERMIT		Service				
Date <u>4/23/19</u>		Final				
Approved by _____		Barrier-Free				
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card				
[] CO [] CCO [] CA		Final Cut-in-Card				
Date _____		Annual Pool Inspection				
Approved by _____		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: [Signature]

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:
Gravity Vault Climbing Gym Tenant fitout

QTY.	SIZE	ITEMS	FEE (Office Use Only)
<u>102</u>		Lighting Fixtures	
<u>42</u>		Receptacles	
<u>17</u>		Switches	
<u>21</u>		Detectors	
<u>0</u>		Light Poles	
<u>0</u>		Motors—Fract. HP	
<u>22</u>		Emergency & Exit Lights	
<u>0</u>		Communications Points	
<u>21</u>		Alarm Devices/F.A.C. Panel	
<u>0</u>			
<u>225</u>		TOTAL NUMBERS	\$
<u>0</u>		Pool Permit/with UW Lights	
<u>0</u>		Storable Pool/Spa/Hot Tub	
<u>0</u>	<u>0</u>	KW Elec. Range/Receptacle	
<u>0</u>	<u>0</u>	KW Oven/Surface Unit	
<u>0</u>	<u>0</u>	KW Elec. Water Heater	
<u>0</u>	<u>0</u>	KW Elec. Dryer/Receptacle	
<u>0</u>	<u>0</u>	KW Dishwasher	
<u>0</u>	<u>0</u>	HP Garbage Disposal	
<u>0</u>	<u>0</u>	KW Central A/C Unit	
<u>0</u>	<u>0</u>	HP/KW Space Heater/Air Handler	
<u>0</u>	<u>0</u>	KW Baseboard Heat	
<u>0</u>	<u>0</u>	HP Motors 1/+ HP	
<u>0</u>	<u>0</u>	KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
<u>0</u>	<u>0</u>	AMP Motor Control Center	
<u>0</u>	<u>0</u>	KW Elec. Sign/Outline Light	

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

PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

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 41 - Gravity Vault)
Brick, NJ 08723 Tenant Fitout for Gravity Vault Climbing Gym
Owner in Fee: Federal Realty Investment Trust
Tel. (484) 419-1208 e-mail NCain@federalrealty.com

Address 50 E Wynnewood Road, Wynnewood, PA. 19096
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: _____

B. PLUMBING CHARACTERISTICS

Use Group Present A2 Proposed A3
Building Sewer Size _____ Public Sewer ☒ Private Septic _____
Water Service Size _____ Public Water ☒ Private Well _____
Est. Cost of Plumbing Work \$ 7,500

JOB SUMMARY (Office Use Only)		Dates (Month/Day)			
PLAN REVIEW		INSPECTIONS			
[] No Plans Required		Type	Failure	Approval	Initial
[] Partial Underslab Utilities Approved		Slab			
Date: _____ Approved by: _____		Rough			
[] Plumbing Plans Approved		Water			
Date: _____ Approved by: _____		Sewer			
Joint Plan Review Required:		Fixtures			
[] Bldg. [] Elec. [] Fire. [] Elev.		Gas Equipment			
SUBCODE APPROVAL for PERMIT		Gas Piping			
Date: _____ Approved by: _____		LPGas Tank			
SUBCODE APPROVAL for CERTIFICATE		Fuel Oil Piping			
[] CO [] CCO [] CA		Solar			
Date: _____ Approved by: _____		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 L. Wagner AIA

[] Licensed Plumbing Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Tenant fitout for rockwall climbing gym, Gravity Vault

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
_____	Water Closet	\$ _____
_____	Urinal/Bidet	\$ _____
_____	Bath Tub	\$ _____
<u>2</u>	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



Space 41
A-3
13,282 sq ft.

Date Received
Control #

Date Issued
Permit #

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 Chambersbridge Road & Route 70 (Space 41 - Gravity Vault)
Brick, NJ 08723 Tenant Fitout - Gravity Vault Climbing Gym

Owner in Fee: Federal Realty Investment Trust

Tel. (484) 419-1208 e-mail NCain@federalrealty.com

Address 50 E Wynnewood Road, Wynnewood, PA. 19096

Contractor: TBD street municipality Tel. zip code

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 A2 Proposed A3

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: Eric L Wagner AIA

Print name here: Eric L Wagner AIA

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)	<u>21</u>	
Supervisory Devices (i.e., tampers, low/high air)	<u>21</u>	
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL	<u>42</u>	
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

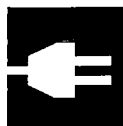
JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Failure	Approval Initial
☐ No Plans Required		Alarm System			
☐ Partial - Underslab Utilities Approved		Suppression Sys			
Date _____ Approved by: _____		Standpipe			
☐ Fire Protection Plans Approved		Fire Pump			
Date _____ Approved by: _____		Pre-Eng. System			
Joint Plan Review Required:		Mechanical			
☐ Bldg. ☐ Elec. ☐ Plumb. ☐ Elev.		Smoke Control			
SUBCODE APPROVAL for PERMIT		TCO			
Date _____		Flam/Combust. Tanks			
Approved by: _____		Fireplace Venting			
SUBCODE APPROVAL for CERTIFICATE		Final			
☐ CO ☐ CCO ☐ CA		Other			
Date _____					
Approved by: _____					

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



Gravity Vault

ELECTRICAL SUBCODE TECHNICAL SECTION



7/22/19 (M)
GRAVITY VAULT

Date Received
Control #

8/14/19

Date Issued
Permit #

19-2149

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. #41

Owner in Fee: BEACH ROCKS, LLC B/B/A THE GRAVITY VAULT

Tel. (732) 856-9579 e-mail SAM.WRIGHT@GRAVITYVAULT.COM

Address 35 EDGEMOOD AVE. LITTLE SILVER, NJ 07739

Contractor: OCEAN COAST ELECTRIC LLC Tel. (732) 338-8732

Address 176 OLD FORGE ROAD, MONROE, NJ 08831 e-mail office@oceancoastelectric.com

Contractor License No. 16956 Exp. Date 03/21

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

Federal Emp. ID No. 81-258-4404 FAX: (732) 308-0996

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed A3

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 74000

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Approval	Initial
[] No Plans Required					
[] Partial -Underslab Utilities Approved		Rough			
Date: _____ Approved by: _____		Barrier-Free			
[] Electric Plans Approved		Trench			
Date: <u>8/1/19</u> Approved by: <u>PJC</u>		Temp. Serv.			
[] Joint Plan Review Required:		Constr. Serv.			
[] Bldg. [] Plumb. [] Fire. [] Elev.		TCO			
SUBCODE APPROVAL TO PERMIT		Other			
Date: <u>8/1/19</u>		Service			
Approved by: <u>PJC</u>		Final			
SUBCODE APPROVAL FOR CERTIFICATE		Barrier-Free			
[] CO [] CCO [] CA		Temp. Out in Card Date Issued			
Date: _____		Final Out in Card Date Issued			
Approved by: _____		Annual Pool Inspection			
		Date of Grounding and Bonding			
		Certification			

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Renovate existing space

QTY.

SIZE

ITEMS

FEE (Office Use Only)

86
42
15

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

18
4
23

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

195

1

18

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$

8/14/13



TOTAL FEE \$



Gravity Vault

ELECTRICAL 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 B-671 Lot 2-101 Qualification Code _____

Work Site Location 56 Chamber Bridge Road Unit 41
Brick, NJ 08624

Owner in Fee: Federal Realty Investment Trust

Tel. (732) 856-9599 e-mail _____

Address 50 East Wynnewood Road Wynnewood, PA 19096

Contractor: Coviello Electric Tel. (201) 843-6566

Address 162 South Main Street e-mail _____

Lodi, NJ

Contractor License No. 9101 Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason 34E100910100

Federal Emp. ID No. 223224481 FAX: (201) 843-0828

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 250

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Failure	Approval Initial
[] No Plans Required		Rough			
[] Partial Underslab Utilities Approved		Barrier-Free			
Date:	Approved by:	Trench			
		Temp. Serv.			
Date:	Approved by:	Constr. Serv.			
		TCO			
Joint Plan Review Required:		Other			
[] Bldg. [] Plumb [] Fire [] Elev.		Service			
SUBCODE APPROVAL for PERMIT		Final			
Date:	Approved by:	Barrier-Free			
		Temp. Cut-in-Card Date Issued			
SUBCODE APPROVAL for CERTIFICATE		Final Cut-in-Card Date Issued			
[] CO [] CCO [] CA		Annual Pool Inspection			
Date:	Approved by:	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: Joe Coviello

[] Licensed Elec. Contractor [] Certified Landscape Irrigation Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Tie (1) New Sign into Existing Electrical Circuit

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 \$ _____



Gravity Vault

PLUMBING SUBCODE

TECHNICAL SECTION



7/22/19 *on*

Date Received
Control #

8/14/19

Date Issued
Permit #

19-2149

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. - SPACE #41

Owner in Fee: BEACH ROCKS, LLC D/B/A THE GRAVITY VAULT

Tel. 732 856-9599 e-mail SAM.WRILLY@GRAVITYVAULT.COM

Address 35 EDGEWOOD AVE., LITTLE SILVER, NJ 07739

Contractor: Tony Annacharico Tel. 732 239-8365

Address 38 Clark Dr e-mail _____

Howell NJ 07731

Contractor License No. 10803 Exp. Date 6-30-19

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 149624764 FAX: 732 308-0996

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed A3

Building Sewer Size _____ Public Sewer X Private Septic _____

Water Service Size _____ Public Water X Private Well _____

Est. Cost of Plumbing Work \$ 5000

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	
☐ No Plans Required	
☐ Partial - Underslab Utilities Approved	
Date: _____	Approved by: _____
☒ Plumbing Plans Approved	
Date: <u>8-2-19</u>	Approved by: <u>[Signature]</u>
Joint Plan Review Required:	
☐ Bldg. ☐ Elec. ☐ Fire. ☐ Elev.	
SUBCODE APPROVAL for PERMIT	
Date: <u>8-2-19</u>	Approved by: <u>[Signature]</u>
SUBCODE APPROVAL for CERTIFICATE	
☐ CO ☐ CCO ☐ MI-CA	
Date: <u>8-17-19</u>	Approved by: <u>[Signature]</u>

INSPECTIONS	Dates (Month/Day)			
	Failure	Failure	Approval	Initial
Type:				
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: Tony Annacharico
[] Licensed Plumbing Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK TENANT FIT-OUT. ADD FOUR(4) FIBERGLASS UTILITY SINK AND ONE(1) ELECTRIC HOT WATER HEATER

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 <u>on shell permit</u>	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrapp	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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



Gravity Vault

FIRE PROTECTION SUBCODE
TECHNICAL SECTION



7/22/19

Occup 287

NW

Date Received
Control #

Date Issued
Permit #

8/14/19

19-2149

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

Block 071 Lot 1.01 Qualification Code _____
Work Site Location 56 CHAMBERS BRIDGE RD #41

Owner in Fee: BEACH ROCKS LLC d/b/a GRAVITY VAULT

Tel. 732 308-0335 e-mail MSHELTON@PFCGROUP.COM

Address 200 DANIELS WAY 35 FRIENWOOD LITTLE SILVER NJ

Contractor: PFC CONSTRUCTION GROUP, INC. Tel. 732-308-0335

Address 200 DANIELS WAY FREEHOLD, NJ 07728 e-mail MSHELTON@PFCGROUP.COM

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 \$ 4000

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 or) owner of record and am authorized to make this application.

Applicant/Contractor
sign here:

Print name Here: MARSHAL STELTON

D. TECHNICAL SITE DATA

☐ Certified Contractor ☐ Exempt Applicant

DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

EXIT LIGHTS

	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., horns/strobes, bells)	_____	_____
Other Devices <u>Exit Sign</u>	<u>18</u>	_____
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 _____	_____	_____

see
with

JOB SUMMARY (Office Use Only)	INSPECTIONS	Dates (Month/Day)
PLAN REVIEW	Type: _____	Failure Failure Approval Initial
☐ No Plans Required	Alarm System	_____
☐ Partial - Underslab Utilities Approved	Suppression Sys.	_____
Date: _____ Approved by: _____	Standpipe	_____
☐ Fire Protection Plans Approved	Fire Pump	_____
Date: _____ Approved by: _____	Pre-Eng. System	_____
Joint Plan Review Required:	Mechanical	_____
☐ Bldg. ☐ Elec. ☐ Plumb. ☐ Elev.	Smoke Control	_____
SUBCODE APPROVAL for PERMIT	TCO	_____
Date: <u>7/22/19</u>	Flam/Combust Tanks	_____
Approved by: <u>MS</u>	Fireplace Venting	_____
SUBCODE APPROVAL for CERTIFICATE	Final	_____
☐ CO ☐ GCO ☐ CA	Other	_____
Date: <u>7/22/19</u>		_____
Approved by: <u>MS</u>		_____

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

Bus - 848-241-3523

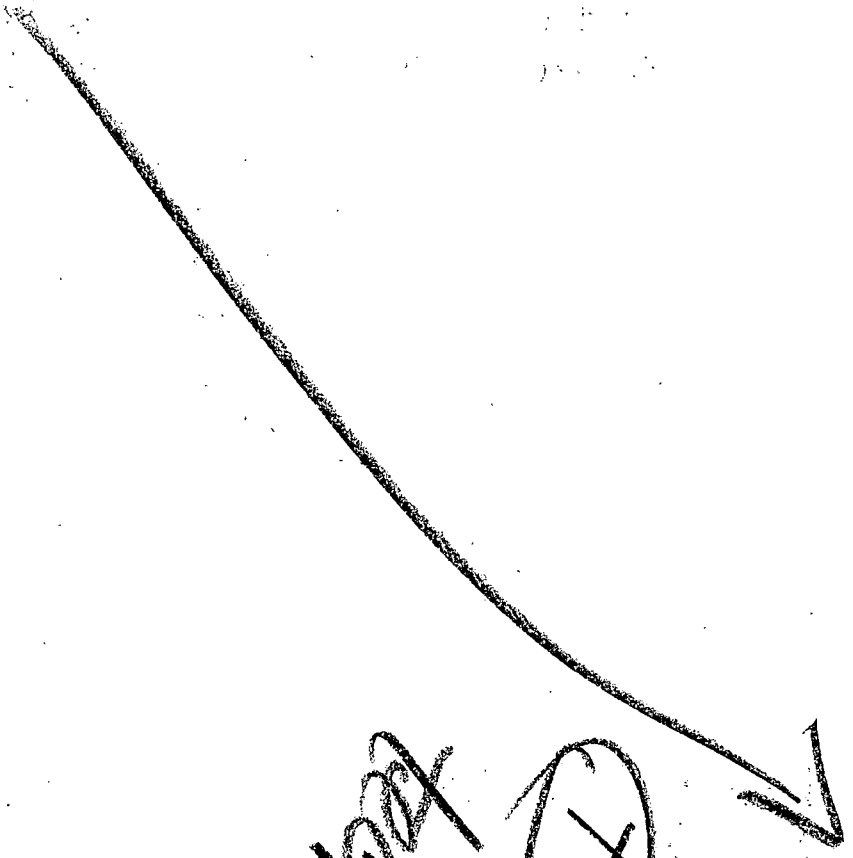
2/22
3/22

Owner: Sam Wright
801-693-7691

Truck: Joe Coval
732-884-5253

Stacy Johnson

ⓧ
Tech.





Gravity Vault

FIRE PROTECTION SUBCODE TECHNICAL SECTION



7/22/19 Update

Date Received
Control #

8/14/19

Date Issued
Permit #

19-2149 +H

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 - SPACE #41

Owner in Fee: BEACH ROCKS, LLC D/B/A THE GRAVITY VAULT

Tel. 732 308-0335 e-mail SAM.WRIGHT@GRAVITYVAULT.COM

Address 35 EDGEWOOD AVE, LITTLE SILVER, NJ 07739

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 10/22

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 223828273 FAX: 7322621780

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed A3

Constr. Class: Present _____ Proposed 2B

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 \$ 6,000.00

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: _____

Landlord 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:
Water Supply Source Tenant Fitout
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	<u>0</u>	_____
Suppression Systems	_____	_____
Fire Pump _____ GPM Type _____	_____	_____
Dry Pipe/Alarm Valves	_____	_____
Pre-action Valves	_____	_____
Sprinkler Heads (Dry and Wet)	<u>25</u>	_____
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)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type	Failure	Approval	Initial
☐ No Plans Required		Alarm System	_____	_____	_____
☐ Partial Underlab Utilities Approved		Suppression Sys.	_____	_____	_____
Date _____ Approved by: _____		Standpipe	_____	_____	_____
☐ Fire Protection Plans Approved		Fire Pump	_____	_____	_____
Date _____ Approved by: _____		Pre-Eng. System	_____	_____	_____
Joint Plan Review Required		Mechanical	_____	_____	_____
☐ Bldg ☐ Elec ☐ Plumb ☐ Elev.		Smoke Control	_____	_____	_____
SUBCODE APPROVAL FOR PERMIT		TCD	_____	_____	_____
Date _____ Approved by: _____		Flam/Combust. Tanks	_____	_____	_____
SUBCODE APPROVAL FOR CERTIFICATE		Fireplace Venting	_____	_____	_____
☐ CD ☐ CO ☐ CA		Final	_____	_____	_____
Date _____ Approved by: _____		Other	_____	_____	_____

Gravity Vault

Update 7/22/19

8/14/19



FIRE PROTECTION SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

19-2149 TB

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 Gravity Vault
Space 41, Brick Plaza, 56 Chambers Bridge Road

Owner in Fee: Federal Realty

Tel. _____ e-mail _____

Address 50 E. Wynnewood ave. Wynnewood, PA

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

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 A3 Proposed A3

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 \$ 8,000

Fuel Storage Tank:

Fuel Type: ☐ Flammable OR ☐ Combustible
Capacity _____

Fire Alarm System: ☐ 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

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)	<u>14</u>	
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)	<u>11</u>	
Other Devices		
TOTAL	<u>25</u>	
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 _____		

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Approval	Initial
☐ No Plans Required		Alarm System	_____	_____	_____
☐ Partial -Underslab Utilities Approved		Suppression Sys.	_____	_____	_____
Date: _____ Approved by: _____		Standpipe	_____	_____	_____
☐ Fire Protection Plans Approved		Fire Pump	_____	_____	_____
Date: _____ Approved by: _____		Pre-Eng. System	_____	_____	_____
Joint Plan Review Required:		Mechanical	_____	_____	_____
☐ Bldg. ☐ Elec. ☐ Plumb. ☐ Elev.		Smoke Control	_____	_____	_____
SUBCODE APPROVAL for PERMIT		TCO	_____	_____	_____
Date: <u>7/20/19</u>		Flam/Combust Tanks	_____	_____	_____
Approved by: <u>[Signature]</u>		Fireplace Venting	_____	_____	_____
SUBCODE APPROVAL for CERTIFICATE		Final	_____	_____	_____
☐ CO ☐ GCO ☒ CA		Other	_____	_____	_____
Date: <u>8/15/20</u>					
Approved by: <u>[Signature]</u>					

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



Gravity Vault

ELECTRICAL SUBCODE TECHNICAL SECTION



7/22/19 ^{MD}
GRAVITY VAULT

Date Received
Control #

8/14/19

Date Issued
Permit #

19-2149

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

Block 671 Lot 1.81 Qualification Code _____

Work Site Location 56 Chambersbridge rd. #41

Owner in Fee: BEACH ROCKS, LLC B/B/A THE GRAVITY VAULT

Tel. (732) 856-9599 e-mail SAM.WRIGHT@GRAVITYVAULT.COM

Address 35 EDGEWOOD AVE. LITTLE SILVER, NJ 07739
street municipality zip code

Contractor: OCEAN COAST ELECTRIC LLC Tel. (732) 338-8732

Address 176 OLD FORGE ROAD, MONROE, NJ 08831 e-mail office@oceancoastelectric.com

Contractor License No. 16956 Exp. Date 03/21

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

Federal Emp. ID No. 81-258-4404 FAX: (732) 308-0996

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed A3

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 77,000

JOB SUMMARY (Office Use Only)					
PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
[] No Plans Required		Type:	Failure	Failure	Approval
[] Partial -Underslab Utilities Approved		Rough			
Date: _____ Approved by: _____		Barrier-Free			
[] Electric Plans Approved		Trench			
Date: <u>8/1/19</u> Approved by: <u>PJE</u>		Temp. Serv.			
Joint Plan Review Required:		Constr. Serv.			
[] Bldg. [] Plumb. [] Fire. [] Elev.		TCO			
SUBCODE APPROVAL for PERMIT		Other			
Date: <u>8/1/19</u>		Service			
Approved by: <u>PJE</u>		Final			
SUBCODE APPROVAL for CERTIFICATE		Barrier-Free			
[] CO [] CCO [] CA		Temp. Cut-in-Card Date Issued			
Date: _____		Final Cut-in-Card Date Issued			
Approved by: _____		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's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Renovate existing space

QTY.
86
72
15

SIZE

ITEMS

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

18
4
23

195

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

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

Height Variance & Preliminary
& Final Site Plan Approval
Federal Realty Investment Trust
Brick Plaza -56 Chambers Bridge Road
Block 671, Lot 1.01
Zone: B-3 (Commercial) Zone
Application No. BA-3089-D-3/18
Resolution No.: R-36-18

RESOLUTION OF APPROVAL
BRICK TOWNSHIP ZONING BOARD OF ADJUSTMENT
APPLICATION NO. BA-3089-D-3/18
JUNE 20, 2018

WHEREAS, Federal Realty Investment Trust, (the "Applicant") has applied to the Brick Township Zoning Board of Adjustment (the "Board") for height variance relief, pursuant to N.J.S.A. 40:55D-70d(6), and preliminary and final site plan approval, pursuant to N.J.S.A. 40:55D-46 and 50, respectively, for lands known and designated as Block 671, Lot 1.01 on the official Tax Map of the Township of Brick and more specifically known as Brick Plaza -56 Chambers Bridge Road, Brick, NJ 08723 (the "Property"); and

WHEREAS, a complete application has been filed, the fees as required by Township Ordinance have been paid, proof of service and publication of notice as required by law has been furnished and determined to be in proper order, and it otherwise appears that the jurisdiction and powers of the Board have been properly invoked and exercised; and

WHEREAS, a public hearing was held on June 6, 2018, in the municipal building, at which time testimony and exhibits were presented on behalf of the Applicant and all interested parties having an opportunity to be heard.

NOW, THEREFORE, the Board makes the following findings of fact based on evidence presented at its public hearing at which a record was made:

File
App.
Jackson
Call
Time
We need
Dennis

Assessor, ENS.

connected. 6/26/18 re-mailed 10/25/18 D

June 20, 2018

1. The Applicant is seeking height variance relief to construct a 60 foot by 90 foot rock climbing tower to expand the height of a portion of commercial lease space number 41 in a shopping center as part of a proposed rock climbing recreational use.

2. The subject lease space number 41 is located in the shopping center commonly known as "Brick Plaza" and has a frontage of 90 feet along an internal service road and is situated in the B-3 (Commercial) Zone as are all adjacent properties. The subject property is bounded by commercial shopping center properties.

3. The Applicant is seeking "d(6)" variance (height variance) relief to permit the construction of a 60 foot by 90 foot tower to contain rock climbing walls because the building peak height exceeds the permitted height in the B-3 Zone by 10 feet or by more ten percent (10%). The respective "d(6)" variance relief sought by the Applicant is set forth in the table below:

	<u>Permitted</u>	<u>Existing</u>	<u>Proposed</u>
Maximum Building Peak Height	35.0 feet	30.0 feet	40.0 feet

4. The Applicant was represented by John J. Jackson, III, Esq.

5. The Board heard testimony from the Applicant's Engineer and Planner, Jeffrey J. Carr, P.E., P.P., who testified that the Applicant seeks to raise a small portion of the leased space to a height of 40 feet to accommodate a rock climbing wall tower for the proposed Gravity Vault rock climbing use. Mr. Carr added that the 40 foot high tower is setback 60 feet from the front of the building. He testified that the façade and parapet proposed for the use will block the majority of the 40 foot high tower from sight from Cedar Bridge Avenue.

June 20, 2018

6. Mr. Carr stated that the d(6) relief is consistent with other commercial uses within the Brick Plaza and other adjacent shopping centers. He opined that the bulk and d(6) variance relief sought by the Applicant is not out of character with the surrounding commercial properties. Mr. Carr stated that the proposed rock climbing tower will have adequate air and light and, therefore, satisfies the positive criteria. He explained that the proposed tower will have little effect on the density of the Brick Plaza Shopping Center.

7. Mr. Carr testified that the proposed rock climbing facility satisfies the purposes of the Municipal Land Use Law stated at N.J.S.A. 40:55D-2(a) because the rock climbing facility will be constructed to meet all current building codes and FEMA requirements. Mr. Carr stated that the proposed tower satisfies the purpose of the Municipal Land Use Law stated at N.J.S.A. 40:55D-2(i) because the rock climbing facility has a visually attractive design. He further stated that there would be no detriment to the public good because the leased space number 41 is part of a sprawling 48-acre shopping center. He explained that the majority of the rock climbing tower would not be visible from Cedar Bridge Avenue nor State Highway Route 70, due to the façade and parapet to be installed on the site. He further testified there would not be a negative impact on the Zone Plan as this use is a permitted use that is particularly suited for the Shopping Center site which replaces a vacant storefront.

8. Mr. Carr testified that the benefits of the application outweigh the detriments because the Property will have adequate parking, the rock climbing recreational use will replace an existing vacant store within Brick Plaza and that there would be no detriment to the Zone Plan.

June 20, 2018

9. The Board heard testimony from Chris Cole, Applicant's representative, who stated that the 40 foot high rock climbing walls are common in the rock climbing recreational facility business. He added that it was common for other rock climbing facilities to have towers with greater heights. He testified the proposed tower is consistent with other renovations which are currently being made to Brick Plaza.

10. There were no members of the public expressing an interest in or objected to the application.

NOW, THEREFORE, the Board makes the following conclusions of law based upon the foregoing findings of fact:

1. This application before the Board requests d(6) height variance relief to construct a 60 foot by 90 foot by 40 foot (height) rock climbing tower to expand the height of a portion of commercial rental unit number 41 in the Brick Plaza Shopping Center as part of a proposed rock climbing recreational use.

2. The Municipal Land Use Law, at N.J.S.A. 40:55D-70d(6) provides Boards with the power to grant a height variance when the Applicant satisfies certain specific proofs which are enunciated in the Statute and Grasso v. Borough of Spring Lake Heights, 375 N.J. Super. 41 (App. Div. 2004). Specifically, an Applicant may be entitled to relief if it provides sufficient special reasons to grant the height variance, that the height of the structure would not be out of place in the neighborhood or degrade the appearance of the neighborhood and that the application meets the negative criteria for granting the use variance, that relief can be granted without substantial detriment to the public good and will not substantially impair the intent and purpose of the zone plan and zoning ordinance.

June 20, 2018

3. The Board finds the purpose of the height restriction is to prevent unduly large structures in the Zone. The Board finds that the height violations exist at only discreet areas and will not frustrate the purposes of the ordinance. The Board therefore concludes the positive criteria has been satisfied.

4. The proposed use is located within a leased space of Brick Plaza, portions of which are currently being renovated, and is consistent with the prevailing commercial scheme. The majority of the proposed tower, which is proposed to be located 60 feet behind the storefront, will be blocked from view by the proposed façade and parapet proposed on the site. The Board concludes, therefore, that the proposed tower will not create a substantial detriment to the intent and purpose of the zone plan and zoning ordinance. The Board further concludes that the Applicant has satisfied the negative criteria. The Board therefore determines that height variance relief pursuant to N.J.S.A. 40:55D-70d(6) may be granted.

5. Aside from the above referenced relief, the Applicant complies with all other requirements of the Township's site plan, zoning and design standard ordinances. Preliminary and final site plan approval may therefore be granted pursuant to N.J.S.A. 40:55D-46 and 50.

NOW, THEREFORE, BE IT RESOLVED, by the Brick Township Zoning Board of Adjustment on this 20th day of June, 2018, that the action of the Board taken on June 6, 2018 granting Application No. BA-3089-D-3/18 of Federal Realty Investment Trust for d(6) variance relief pursuant to N.J.S.A. 40:55D-70d(6) and preliminary and final site plan approval, pursuant to N.J.S.A. 40:55D-46 and 50 is hereby memorialized, subject to the following conditions:

1. Applicant shall comply with standard Zoning Board of Adjustment conditions as set forth in attached Schedule "A".

2. The development of this site shall take place in strict conformance with the testimony, plans and drawings which have been submitted to the Board with this application, as revised by the terms hereof.
3. Except where specifically modified by the terms of this Resolution, the Applicant shall comply with the recommendations contained in the reports of the Board's professionals.

1388113_1 BRICKZB-263E Federal Realty Investment Trust Resolution Granting Height and Bulk Variances 6.20.18

BA-3089-D 3/18
FEDERAL REALTY INVESTMENT TRUST

June 20, 2018

VOTE ON MEMORIALIZATION

MOVED BY: Ms. White

SECONDED BY: Mr. Jamnik

VOTING IN THE AFFIRMATIVE: Mr. Sorrentino, Ms. White, Mr. Jamnik, Mr. Leitner,
Mr. Langer, Mr. Anderson, Mr. Chadwick

VOTING IN THE NEGATIVE:

INELIGIBLE:

IN-CONFLICT:

ABSTAINING:

ABSENT: Mr. Mizer

PRESENT BUT NOT VOTING: Ms. Strassheim

CERTIFICATION

I, PAMELA O'NEILL, Clerk/Secretary to the Board of Adjustment of the Township of Brick, County of Ocean, State of New Jersey, do hereby certify that I am duly authorized to certify Resolutions. I certify that the foregoing Resolution was adopted by the Planning Board of the Township of Brick at a regular meeting held on the 20th of June.


PAMELA O'NEILL, Clerk/Secretary
Planning Board/Zoning Board

BRICK TOWNSHIP ZONING BOARD OF ADJUSTMENT

SCHEDULE "A"

1. Applicant shall provide the Board with documentation that all real property taxes have been paid through the calendar quarter of the date of the resolution of approval.
2. Applicant shall obtain signed documentation from the Code Enforcement Officer, Construction Official and Township Engineer certifying compliance with all terms and conditions of this resolution.
3. Applicant shall apply for and obtain all necessary permits and approvals from the Township Building Department prior to commencing and construction or renovation work.
4. No construction permit shall be issued by the Township until all application, escrow and Professional fees (required fees) have been paid to the Board, and confirmation has been obtained from the Board Secretary that the required fees have been paid. In the event a construction permit is issued when any fees remain due to the Board, the permit shall be automatically suspended, and all work shall cease and terminate until the required fees have been paid.
5. Applicant shall post, file or pay all required performance bonds, maintenance guaranties, engineering fees and inspection fees.
6. Applicant shall apply for and obtain approvals from all other municipal, county, state and federal agencies having regulatory jurisdiction over this application.
7. If applicant has asserted that the improvements referred to in this resolution are the subject of a Permit by Rule or waiver of the Department of Environmental Protection of the State of New Jersey (NJDEP), then applicant shall provide the Board with documentation demonstrating compliance with NJDEP rules and regulations.
8. In the event there is an existing violation of any municipal rule, regulation or ordinance, applicant shall have 30 days from the date of the resolution of approval to correct the violation. Failure to correct the violation within this time period shall constitute reasonable cause for the issuance of a summons and complaint to the applicant or other responsible parties.

9. All testimony, stipulations of the applicant, stipulations of the applicant's representatives, exhibits marked into evidence and deliberations of the Board are incorporated in this resolution by reference, and to the extent that the foregoing impose additional or more detailed conditions of approval than those contained elsewhere in this resolution, such conditions of approval are adopted as if set forth at length herein and are incorporated in this resolution by reference.
10. This development approval shall be null and void unless applicant's obtain a construction permit from the municipality and commence work under the permit within two years from the date of this resolution.
11. Applicant shall comply with all ordinances, rules, regulations, statutes and other provisions concerning the provision of Affordable Housing Units in the Municipality and/or the payment of fees imposed by the Township or the state of New Jersey.
12. Applicant shall provide proof of application for Title NJSA 39:5 A-1 to the Zoning Board of Adjustment.

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



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



Hereby Issues To

PREMIER FIRE SYSTEMS

Fire Protection Equipment Contractor Business Permit

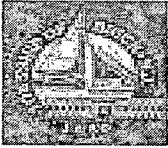
In The Following Fire Protection Areas:

Fire Sprinkler System

<u>P00647</u>	<u>05/13/2019 to 10/31/2022</u>	
Permit ID	Date Issued	Lapse Date

A handwritten signature in cursive script, reading 'Sheila Y. Oliver'.

Sheila Y. Oliver
Commissioner



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

6/5/19
Emailed
Ewans
CW

Subcode Official Review

Date: Wednesday, April 24, 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: Control Number: C-19-000989
Last Submit Date: Monday, April 22, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

Your request is hereby denied based upon the following infractions. The architectural drawings do not show the location of the sinks in the room they are going in and the water heater is not on the tech sheet.

Sincerely,

Bernie Reilly, Subcode Official

CC:

RESUBMIT 2m
SUBCODES B, P, F, E
DATES 2m



**KELLENYI
JOHNSON
WAGNER**

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

June 26, 2019

Bernie Reilly, Plumbing Subcode Official
Brick Township Construction Department
401 Chambers Bridge Rd
Brick, NJ 08723

Re: Block 671, Lot 1.01
Permit Control #C-19-000989
Brick Plaza Shopping Center
56 Chambers Bridge Road (KJW #2715.3b)

Dear Mr Reilly:

I am in receipt of your Plumbing Plan Review Comments dated 4/24/19 for the Gravity Vault climbing gym. Your comments noted that the water heater was not included on the plumber's tech sheet. This will be corrected by the licensed plumber.

Secondly you note that architectural plans do not show the location of sinks in the room they are going in.

Sinks in the Mens and Womens rooms and the Family Lav. Were permitted under the Landlord's work. This project includes the installation of two utility tub sinks in Equipment Storage Room 133. Please note that this was originally show as a single trough sink with two wall mounted faucets, but we have now revised plans to show a two separate utility tub sinks with the wall mounted faucets.

Plans also called for a utility tub sink in Party Room 126. We would now like to add an additional utility tub sink in Multi Purpose Room 115. Revised plans have also been provided to include this revision.

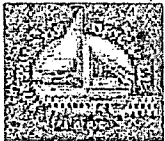
Attached are two full sets of signed and sealed plans for this project. We have marked all revised sheets on the sheet index on the Cover Sheet for clarification. Please feel free to contact me with any additional concerns regard this matter.

Very Truly Yours

Eric L. Wagner AIA
NJ License #AI-10366

J Robert Johnson
Eric L Wagner
Richard R Kane





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

Subcode Official Review

Date: Wednesday, April 24, 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: Control Number: C-19-000989
Last Submit Date: Monday, April 22, 2019

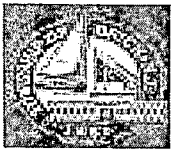
Dear FEDERAL REALTY INVESTMENT TRUST %,

Your request is hereby denied based upon the following infractions. The architectural drawings do not show the location of the sinks in the room they are going in and the water heater is not on the tech sheet.

Sincerely,

Bernie Reilly, Subcode Official

CC:



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

Subcode Official Review

Date: Thursday, April 25, 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: Control Number: C-19-000989
Last Submit Date: Wednesday, April 24, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

Your request is hereby denied based upon the following infractions.

1. Need permit update, plan, and specifications including hydraulic calculations for the fire sprinkler system. Please include copy of NJ fire suppression license. Plan is architectural rendering.
2. Need permit update, plan, and specifications for the fire alarm system. Please include copy of NJ Fire Alarm installer license. Plan is architectural rendering.
3. A front door annunciator panel for fire alarm is required as well as an exterior horn strobe.
4. All/any RTU duct detectors shall be connected to the fire alarm system and shall report as SUPERVISORY only. Remote key resets required due to ceiling height.
5. A fire department knox box is required.
6. Please provide specification sheets as to construction of rock walls with regard to flammability.

Sincerely,

Richard Orlando, Subcode Official

CC:

RESUBMIT 7/22/19
SUBCODES B, P, F, E
DATES 7/22/19



**KELLENYI
JOHNSON
WAGNER**

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

July 23, 2019

Nichol Ponsi
Brick Township Construction Department
401 Chambers Bridge Road
Brick, NJ 08723

RECEIVED
JUL 24 2019
BUILDING

Re: Gravity Vault Tenant Fit-out
Block 671, Lot 1.01
Permit Control #C-19-000989
Brick Plaza Shopping Center
56 Chambers Bridge Road (KJW #2715.3b)

The Contractor for the Gravity Vault Tenant Fit-out project recently submitted an updated permit package including our revised plans. Our cover sheet in this set includes a sheet index listing plans that comprise the permit application set.

This index inadvertently lists an Electrical Sheet E-300. This is an error. There is no sheet E-300 that is part of this set. I apologize for this mistake.

Very Truly Yours


Eric L. Wagner AIA
NJ License #AI-10366

J Robert Johnson
Eric L. Wagner
Richard R Kane



**KELLENY
JOHNSON
WAGNER**

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

July 23, 2019

Nichol Ponsi
Brick Township Construction Department
401 Chambers Bridge Road
Brick, NJ 08723

Re: Gravity Vault Tenant Fit-out
Block 671, Lot 1.01
Permit Control #C-19-000989
Brick Plaza Shopping Center
56 Chambers Bridge Road (KJW #2715.3b)

The Contractor for the Gravity Vault Tenant Fit-out project recently submitted an updated permit package including our revised plans. Our cover sheet in this set includes a sheet index listing plans that comprise the permit application set.

This index inadvertently lists an Electrical Sheet E-300. This is an error. There is no sheet E-300 that is part of this set. I apologize for this mistake.

Very Truly Yours

Eric L. Wagner AIA
NJ License #AI-10366

J Robert Johnson
Eric L Wagner
Richard R Kane



**KELLENYI
JOHNSON
WAGNER**

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

June 26, 2019

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

Re: Block 671, Lot 1.01
Permit Control #C-19-000989
Brick Plaza Shopping Center
56 Chambers Bridge Road (KJW #2715.3b)

We have prepared two signed and sealed sets of letters and revised plans for the Gravity Vault Tenant Fitout at Brick Plaza. In addition to specifically responding to the plan review comments we have incorporated some Owner requested revisions. All revisions are clouded / dated.

Attached are two **full** sets of signed and sealed plans for this project. We have marked all revised sheets on the sheet index on the Cover Sheet for clarification. Please feel free to contact me with any additional concerns regard this matter.

Very Truly Yours

Eric L. Wagner AIA
NJ License #AI-10366

J Robert Johnson
Eric L Wagner
Richard R Kane



ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 671 LOT: 1.01 ADDRESS: Chambers Bridge Rd. & Rt. 70 (Brick Plaza)

IDENTIFICATION: Brick Plaza Space 41- Tenant Fitout

1. WORK SITE ADDRESS: for Gravity Vault Climbing Gym.
Chambers Bridge Rd. & Route 70

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 PHONE: # (732) 741-5270
DJ 07701

5. RESPONSIBLE PERSON FOR WORK: GCTBD

ADDRESS: _____

PHONE #: () _____ FAX #: () _____ E-MAIL: _____

FEE SUMMARY:

APPLICATION FEE: \$ _____

REVIEW FEE: \$ _____

INSPECTION FEE: \$ _____

OTHER _____: \$ _____

BOND(S): \$ _____

TOTAL: \$ _____

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: _____

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL

☒ OTHER Interior Tenant Fitout for a Climbing Gym.

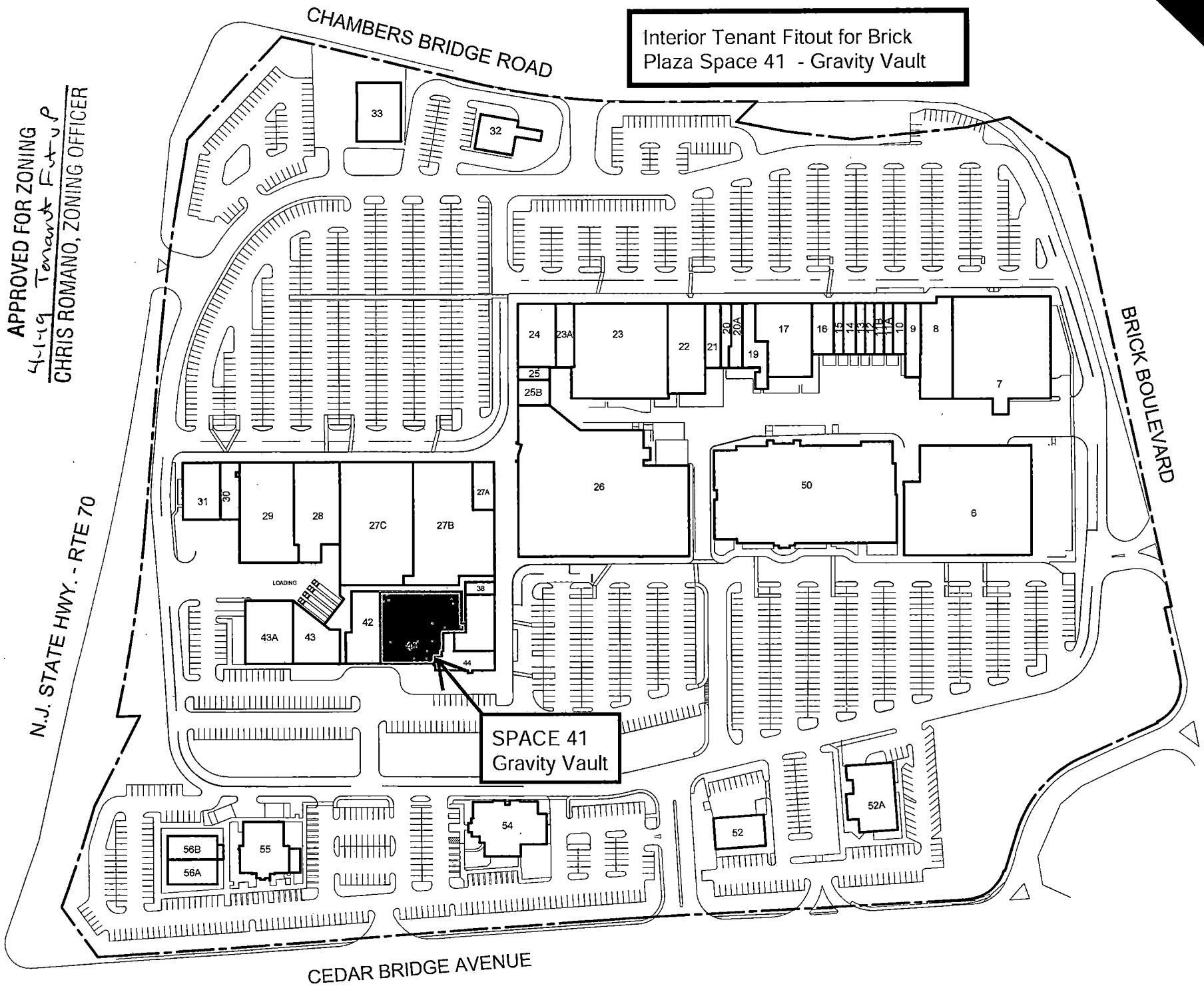
LENGTH: _____ WIDTH: _____ HEIGHT: _____

ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE REJECTED: _____ DATE APPROVED: _____ INITIALS: _____

Interior Tenant Fitout for Brick
Plaza Space 41 - Gravity Vault

APPROVED FOR ZONING
4-1-19 Tenant Fitout
CHRIS ROMANO, ZONING OFFICER



SPACE 41
Gravity Vault

CEDAR BRIDGE AVENUE

N.J. STATE HWY. - RTE 70

BRICK BOULEVARD

CHAMBERS BRIDGE ROAD

HYDRAULIC CALCULATIONS

for:
Proposed Renovations for:

Gravity Vault
Space 41 - Brick Plaza
56 Chambers Bridge Road
Brick, New Jersey 08723

FILE COPY

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: 1563 Sq. Ft.
No. Sprinklers Calculated: 14
Area Per Sprinkler: 130 Sq. Ft. Max.
Hose Demand: 250.000 gpm
Total Water Required: 638.271 gpm
Total Pressure Required: 60.879 psi
Safety Margin: 10.90 psi

DESIGN DATA: CALCULATION #2

Area Calculated: Most Demanding Pendants
System 1 - Wet - Pendants
Hazard: OHG2 - Mercantile
Density: 0.20 gpm/ft
Minimum Pressure Per Head: 7 psi
Area: 900 Sq. Ft.
No. Sprinklers Calculated: 12
Area Per Sprinkler: 120 Sq. Ft. Max.
Hose Demand: 250.000 gpm
Total Water Required: 551.432 gpm
Total Pressure Required: 65.390 psi
Safety Margin: 7.15 psi

TOWNSHIP OF BRICK

RELEASED FOR PERMIT INITIAL DATE
Building Subcode _____
Plumbing Subcode _____
Fire Subcode _____
Electrical Subcode _____
Plan Reviewer _____
Plans Released _____
Construction Official _____

JOB: # 302

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	07/12/2019
2	Released for Submittal	07/16/2019
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



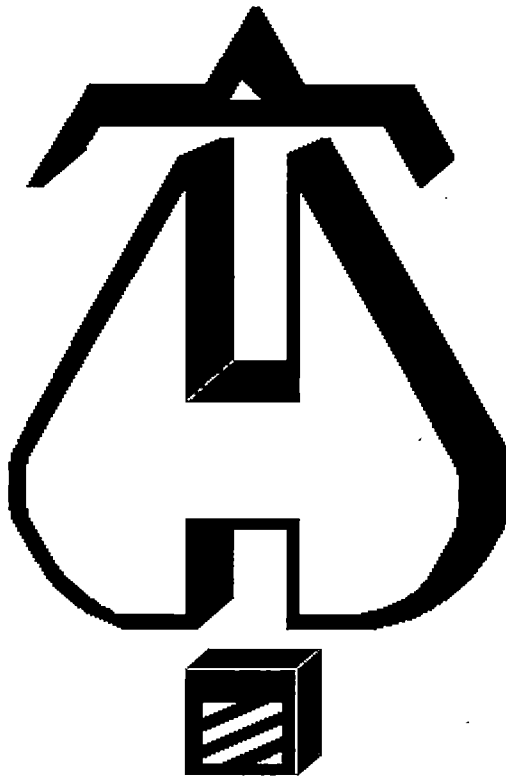
CARL A. MOENKE, P.E.
PROFESSIONAL ENGINEER

811 Royal Lane
TOMS RIVER, NJ 08753
(732) 240-3556
FAX: (732) 240-3463

N.J. LICENSE NUMBER 39052

FEA LICENSE NUMBER 42005

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 : Gravity Vault
Building : SPK100
Location : 56 Chambers Bridge Road, Brick, NJ 08723
System : 1
Contract : 302
Data File : 302 Gravity Vault Submittal 02-18-2019 AREA 1.wxf287 Gravity

HYDRAULIC CALCULATIONS
for

Project name: Gravity Vault Black Box
Location: 56 Chambers Bridge Road, Brick, NJ 08723
Drawing no: SPK100
Date: 02-18-2018

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: 1563 - SqFt
Coverage per sprinkler: 130 - SqFt
Type of sprinklers calculated: Globe SIN#GL8118 Uprights 8.1K
No. of sprinklers calculated: 14
In-rack demand: N/A - GPM
Hose streams: 250 - GPM
Total water required (including hose streams): 638.271 - GPM @ 60.879 - Psi
Type of system: New Wet Tree 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.) Safety Factor: 10.90 psi

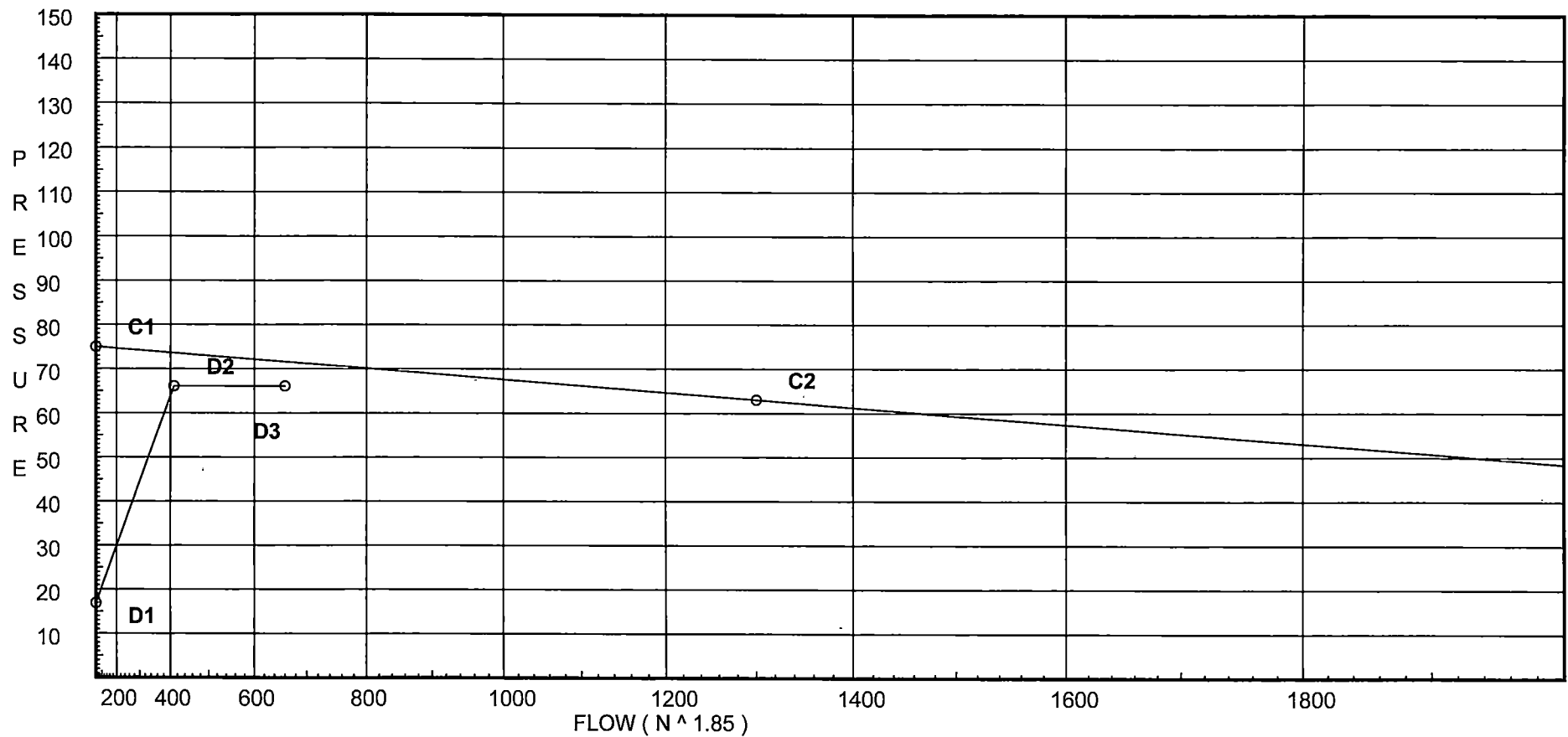
Water Supply Curve C

Premier Fire Systems, Inc.
Gravity Vault

Page 2
Date 02-18-2019

City Water Supply:
C1 - Static Pressure : 75
C2 - Residual Pressure: 63
C2 - Residual Flow : 1300

Demand:
D1 - Elevation : 16.891
D2 - System Flow : 409.935
D2 - System Pressure : 66.068
Hose (Demand) : 250
D3 - System Demand : 659.935
Safety Margin : 5.508



Flow Diagram

Premier Fire Systems, Inc.
Gravity Vault

Page 3
Date 02-18-2019

23
~~SP01~~ EQ01

23
~~SP02~~ EQ02

91 144.4 409.9 409.9 409.9
1 ← 2 ← 3 ← 4 ← 5 ← ~~TORG BORG SPQ~~ ELL ← TEST
| | 116.4 210.3 409.9 409.9
| 67.5 91
↓ 67.5
6 ← 1

0 66
7 ← 8 ← 9 ← 4
32.9

51.4 104.3
10 ← 11 ← 12 ← 13 ← 5
77.2 ↑ 133.4
| 133.4
0 66.2
14 → 15 ← 16 ← 5
33

Fittings Used Summary

Premier Fire Systems, Inc.
Gravity Vault

Page 4
Date 02-18-2019

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
Zst	Wilkins 375ASTDA	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.
Gravity Vault

Page 5
Date 02-18-2019

Node No.	Elevation	K-Fact	Pt Actual	Pn	Flow Actual	Density	Area	Press Req.
SP01	40.0	8.1	8.06	na	23.0	0.2	115	7.0
EQ01	39.0		9.51	na				
SP02	40.0	8.1	8.06	na	23.0	0.2	115	7.0
EQ02	39.0		9.0	na				
SP03	40.0	8.1	7.0	na	21.43	0.2	64	7.0
EQ03	39.0		7.88	na				
1	39.0	K = K @ EQ01	9.93	na	23.51			
2	39.0	K = K @ EQ01	11.55	na	25.35			
3	39.0	K = K @ EQ01	14.09	na	28.0			
4	39.0		21.25	na				
5	39.0		21.41	na				
TORG	18.0		41.03	na				
BORG	2.0		53.25	na				
SPQ	2.0		64.85	na				
ELL	-5.0		67.92	na				
TEST	0.0		66.07	na	250.0			
100	39.0	K = K @ EQ03	8.36	na	22.08			
101	39.0		8.66	na				
6	39.0	K = K @ EQ02	9.0	na	23.0			
7	39.0		19.43	na				
8	39.0	K = K @ EQ01	19.43	na	32.88			
9	39.0	K = K @ EQ01	19.68	na	33.09			
10	39.0	K = K @ EQ02	11.4	na	25.88			
11	39.0	K = K @ EQ01	11.96	na	25.8			
12	39.0	K = K @ EQ01	13.15	na	27.05			
13	39.0	K = K @ EQ01	15.23	na	29.11			
14	39.0		19.58	na				
15	39.0	K = K @ EQ01	19.58	na	33.01			
16	39.0	K = K @ EQ01	19.83	na	33.22			
102	39.0	K = K @ EQ03	8.62	na	22.42			
103	39.0	K = K @ EQ03	11.19	na	25.54			
104	39.0		11.28	na				

The maximum velocity is 20.84 and it occurs in the pipe between nodes 3 and 4

Final Calculations - Hazen-Williams - 2007

Premier Fire Systems, Inc.
Gravity Vault

Page 6
Date 02-18-2019

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 to EQ01	23.00 23.0	1.049 120.0 0.1685	1T	5.0 0.0 0.0	1.000 5.000 6.000	8.063 0.433 1.011		K Factor = 8.10 Vel = 8.54	
	0.0 23.00					9.507		K Factor = 7.46	
SP02 to EQ02	23.00 23.0	1.049 120.0 0.1683	1E	2.0 0.0 0.0	1.000 2.000 3.000	8.063 0.433 0.505		K Factor = 8.10 Vel = 8.54	
	0.0 23.00					9.001		K Factor = 7.67	
SP03 to EQ03	21.43 21.43	1.049 120.0 0.1480	1E	2.0 0.0 0.0	1.000 2.000 3.000	7.000 0.433 0.444		K Factor = 8.10 Vel = 7.96	
	0.0 21.43					7.877		K Factor = 7.64	
1 to 2	91.01 91.01	1.682 120.0 0.2153		0.0 0.0 0.0	7.500 0.0 7.500	9.931 0.0 1.615		K Factor @ node EQ01 Vel = 13.14	
2 to 3	25.35 116.36	1.682 120.0 0.3393		0.0 0.0 0.0	7.500 0.0 7.500	11.546 0.0 2.545		K Factor @ node EQ01 Vel = 16.80	
3 to 4	28.00 144.36	1.682 120.0 0.5057	1T	9.9 0.0 0.0	4.250 9.900 14.150	14.091 0.0 7.155		K Factor @ node EQ01 Vel = 20.84	
4 to 5	65.97 210.33	4.26 120.0 0.0110		0.0 0.0 0.0	15.000 0.0 15.000	21.246 0.0 0.165		Vel = 4.73	
5 to TORG	199.61 409.94	4.26 120.0 0.0378	6E 1T	79.002 26.334 0.0	173.380 105.336 278.716	21.411 9.095 10.523		Vel = 9.23	
TORG to BORG	0.0 409.94	4.26 120.0 0.0377	1B 1Fsp 1S	15.8 0.0 28.968	16.000 44.768 60.768	41.029 9.930 2.293		** Fixed Loss = 3 Vel = 9.23	
BORG to SPQ	0.0 409.94	4.026 120.0 0.0497	2E 2B 1Zst	20.0 24.0 0.0	8.320 44.000 52.320	53.252 9.000 2.601		** Fixed Loss = 9 Vel = 10.33	
SPQ to ELL	0.0 409.94	8.27 140.0 0.0011	1E	28.468 0.0 0.0	7.000 28.468 35.468	64.853 3.032 0.040		Vel = 2.45	
ELL to TEST	0.0 409.94	8.27 140.0 0.0011	4E 1G 1T	113.872 6.326 55.354	100.000 175.552 275.552	67.925 -2.166 0.309		Vel = 2.45	
	250.00 659.94					66.068		Qa = 250.00 K Factor = 81.19	
100 to 101	22.08 22.08	1.682 120.0 0.0157	1T	9.9 0.0 0.0	8.750 9.900 18.650	8.365 0.0 0.292		K Factor @ node EQ03 Vel = 3.19	
101 to 6	22.43 44.51	1.682 120.0 0.0573		0.0 0.0 0.0	6.000 0.0 6.000	8.657 0.0 0.344		Vel = 6.43	

Final Calculations - Hazen-Williams

Premier Fire Systems, Inc.
Gravity Vault

Page 7
Date 02-18-2019

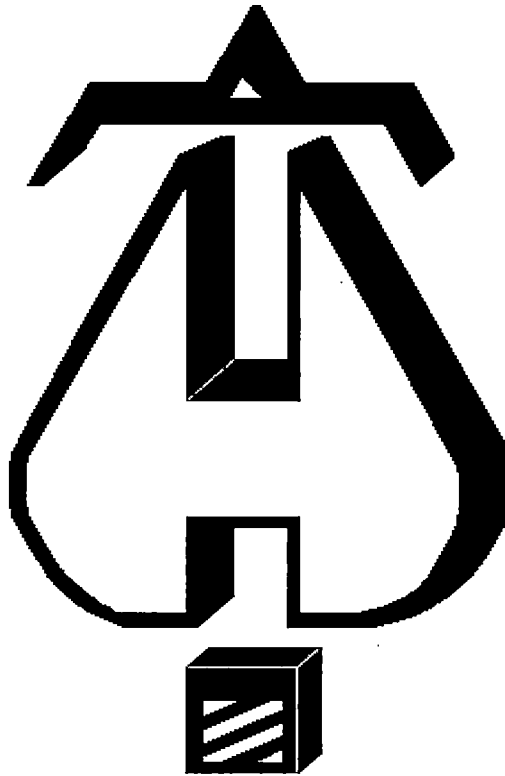
Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	*****	Notes	*****
6 to 1	23.00 67.51	1.682 120.0 0.1240		0.0 0.0 0.0	7.500 0.0 7.500	9.001 0.0 0.930			K Factor @ node EQ02 Vel = 9.75	
	0.0 67.51					9.931			K Factor = 21.42	
7 to 8	0.0 0.0	1.682 120.0 0.0		0.0 0.0 0.0	7.540 0.0 7.540	19.428 0.0 0.0			Vel = 0	
8 to 9	32.88 32.88	1.682 120.0 0.0328		0.0 0.0 0.0	7.540 0.0 7.540	19.428 0.0 0.247			K Factor @ node EQ01 Vel = 4.75	
9 to 4	33.09 65.97	1.682 120.0 0.1187	1T	9.9 0.0 0.0	3.330 9.900 13.230	19.675 0.0 1.571			K Factor @ node EQ01 Vel = 9.53	
	0.0 65.97					21.246			K Factor = 14.31	
10 to 11	51.42 51.42	1.682 120.0 0.0748		0.0 0.0 0.0	7.500 0.0 7.500	11.399 0.0 0.561			K Factor @ node EQ02 Vel = 7.42	
11 to 12	25.80 77.22	1.682 120.0 0.1589		0.0 0.0 0.0	7.500 0.0 7.500	11.960 0.0 1.192			K Factor @ node EQ01 Vel = 11.15	
12 to 13	27.05 104.27	1.682 120.0 0.2771		0.0 0.0 0.0	7.500 0.0 7.500	13.152 0.0 2.078			K Factor @ node EQ01 Vel = 15.06	
13 to 5	29.11 133.38	1.682 120.0 0.4368	1T	9.9 0.0 0.0	4.250 9.900 14.150	15.230 0.0 6.181			K Factor @ node EQ01 Vel = 19.26	
	0.0 133.38					21.411			K Factor = 28.83	
14 to 15	0.0 0.0	1.682 120.0 0.0		0.0 0.0 0.0	7.540 0.0 7.540	19.580 0.0 0.0			Vel = 0	
15 to 16	33.01 33.01	1.682 120.0 0.0330		0.0 0.0 0.0	7.540 0.0 7.540	19.580 0.0 0.249			K Factor @ node EQ01 Vel = 4.77	
16 to 5	33.21 66.22	1.682 120.0 0.1196	1T	9.9 0.0 0.0	3.330 9.900 13.230	19.829 0.0 1.582			K Factor @ node EQ01 Vel = 9.56	
	0.0 66.22					21.411			K Factor = 14.31	
102 to 101	22.42 22.42	1.682 120.0 0.0160		0.0 0.0 0.0	2.250 0.0 2.250	8.621 0.0 0.036			K Factor @ node EQ03 Vel = 3.24	
	0.0 22.42					8.657			K Factor = 7.62	
103 to 104	25.54 25.54	1.682 120.0 0.0205		0.0 0.0 0.0	4.250 0.0 4.250	11.188 0.0 0.087			K Factor @ node EQ03 Vel = 3.69	

Final Calculations - Hazen-Williams

Premier Fire Systems, Inc.
Gravity Vault

Page 8
Date 02-18-2019

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv. Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	*****	Notes	*****
104 to 10	0.0 25.54	1.682 120.0 0.0207	0.0 0.0 0.0	6.000 0.0 6.000	11.275 0.0 0.124				
	0.0 25.54						Vel =	3.69	
					11.399		K Factor =	7.56	



. . . Fire Protection by Computer Design

Tsunami Fire Suppression, LLC
N.C.Lic#32253/S.C.Lic#FSC.1771
1110 Yardley Lane
Wilmington, N.C. 28412
732-597-6357

Job Name : Gravity Vault
Building : SPK100
Location : 56 Chambers Bridge Road, Brick, NJ 08723
System : 2
Contract : 302
Data File : 302 Gravity Vault Submittal 07-12-2019 AREA 2.wxf302 Gravity

HYDRAULIC CALCULATIONS
for

Project name: Gravity Vault Black Box
Location: 56 Chambers Bridge Road, Brick, NJ 08723
Drawing no: SPK100
Date: 02-18-2018

Design

Remote area number: 2
Remote area location: Most Demanding Remote Party Room
Occupancy classification: OHG2 - Temporary Storage - Mercantile
Density: 0.20 - Gpm/SqFt
Area of application: 900 - SqFt
Coverage per sprinkler: 120 - SqFt
Type of sprinklers calculated: Globe SIN#GL5601 Pendants 5.6K
No. of sprinklers calculated: 12
In-rack demand: N/A - GPM
Hose streams: 250 - GPM
Total water required (including hose streams): 551.432 - GPM @ 65.390 - Psi
Type of system: New Wet Tree 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.) Safety Factor: 7.15 psi

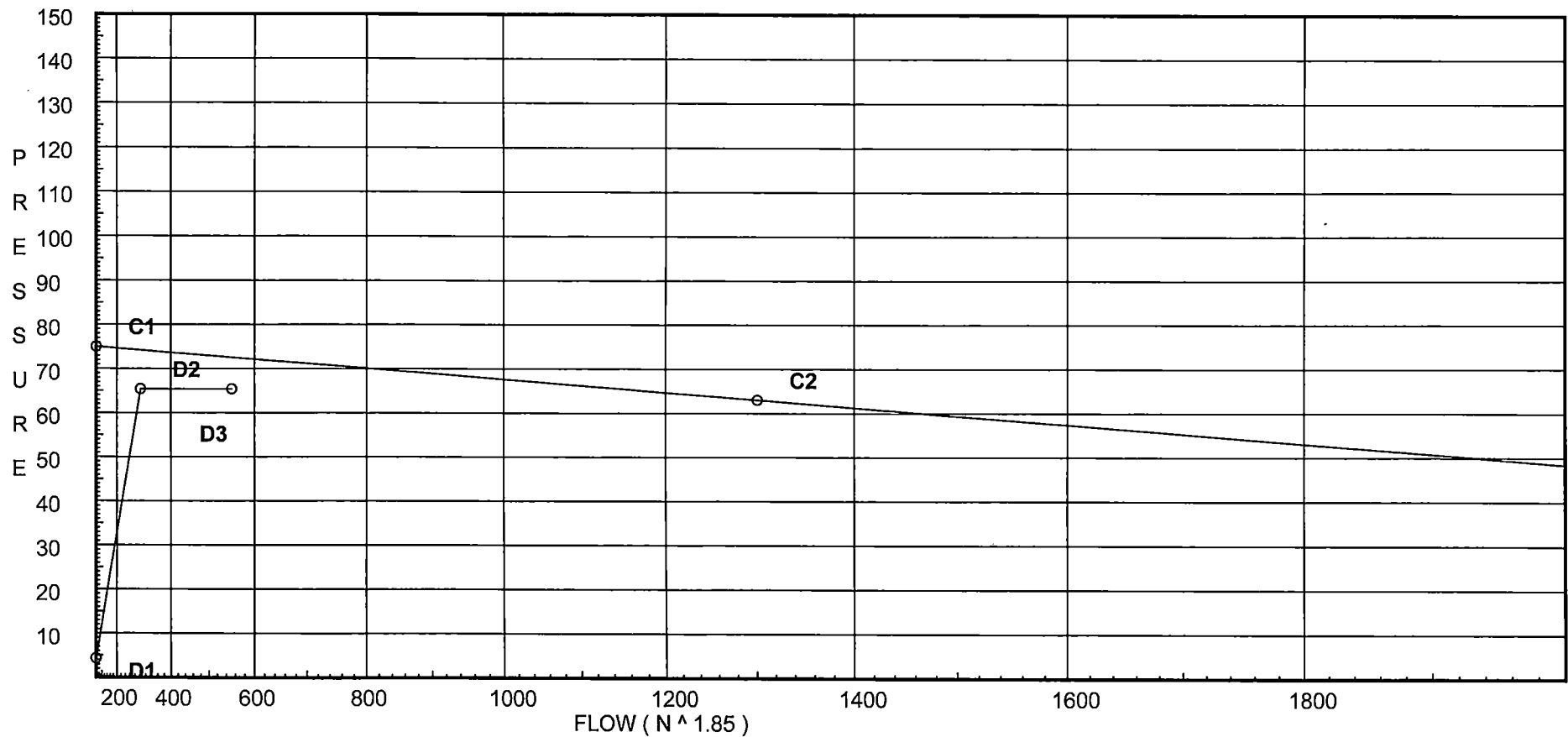
Water Supply Curve C

Tsunami Fire Suppression, LLC
Gravity Vault

Page 2
Date 07-12-2019

City Water Supply:
C1 - Static Pressure : 75
C2 - Residual Pressure: 63
C2 - Residual Flow : 1300

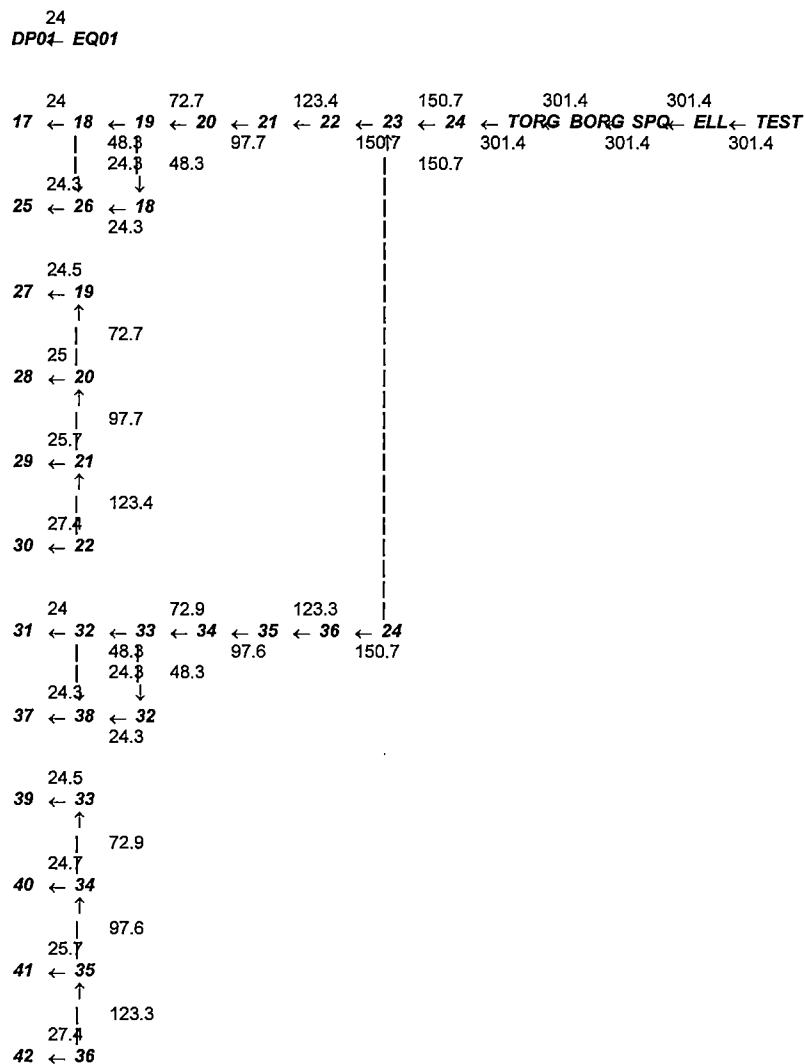
Demand:
D1 - Elevation : 4.331
D2 - System Flow : 301.432
D2 - System Pressure : 65.390
Hose (Demand) : 250
D3 - System Demand : 551.432
Safety Margin : 7.155



Flow Diagram

Tsunami Fire Suppression, LLC
Gravity Vault

Page 3
Date 07-12-2019



Fittings Used Summary

Tsunami Fire Suppression, LLC
Gravity Vault

Page 4
Date 07-12-2019

Fitting Legend		½	¾	1	1¼	1½	2	2½	3	3½	4	5	6	8	10	12	14	16	18	20	24
Abbrev.	Name																				
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
Zst	Wilkins 375ASTDA	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

Tsunami Fire Suppression, LLC
Gravity Vault

Page 5
Date 07-12-2019

Node No.	Elevation	K-Fact	Pt Actual	Pn	Flow Actual	Density	Area	Press Req.
DP01	9.0	5.6	18.37	na	24.0	0.2	120	7.0
EQ01	10.0		18.48	na				
17	10.0	K = K @ EQ01	18.48	na	24.0			
18	10.0		19.53	na				
19	10.0		20.33	na				
20	10.0		21.06	na				
21	10.0		22.31	na				
22	10.0		25.34	na				
23	18.0		42.67	na				
24	18.0		42.74	na				
TORG	18.0		43.22	na				
BORG	2.0		55.02	na				
SPQ	2.0		64.33	na				
ELL	-5.0		67.38	na				
TEST	0.0		65.39	na	250.0			
25	10.0	K = K @ EQ01	18.87	na	24.25			
26	10.0		19.38	na				
27	10.0	K = K @ EQ01	19.24	na	24.49			
28	10.0	K = K @ EQ01	20.02	na	24.98			
29	10.0	K = K @ EQ01	21.12	na	25.66			
30	10.0	K = K @ EQ01	24.0	na	27.35			
31	10.0	K = K @ EQ01	18.55	na	24.05			
32	10.0		19.6	na				
33	10.0		20.4	na				
34	10.0		21.13	na				
35	10.0		22.39	na				
36	10.0		25.41	na				
37	10.0	K = K @ EQ01	18.94	na	24.3			
38	10.0		19.45	na				
39	10.0	K = K @ EQ01	19.31	na	24.53			
40	10.0	K = K @ EQ01	19.63	na	24.74			
41	10.0	K = K @ EQ01	21.2	na	25.7			
42	10.0	K = K @ EQ01	24.07	na	27.39			

The maximum velocity is 21.76 and it occurs in the pipe between nodes 22 and 23

Final Calculations - Hazen-Williams - 2007

Tsunami Fire Suppression, LLC
Gravity Vault

Page 6
Date 07-12-2019

Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or Eqv.	Ln.	Pipe Ftng's Total	Pt Pe Pf	Pt Pv Pn	*****	Notes	*****
DP01 to EQ01	24.00 24.0	1.049 120.0 0.1823	1E	2.0 0.0 0.0	1.000 2.000 3.000	18.367 -0.433 0.547			K Factor = 5.60	
	0.0 24.00									
						18.481			K Factor = 5.58	
17 to 18	24.00 24.0	1.049 120.0 0.1824	1T	5.0 0.0 0.0	0.750 5.000 5.750	18.481 0.0 1.049			K Factor @ node EQ01	
									Vel = 8.91	
18 to 19	24.25 48.25	1.682 120.0 0.0666		0.0 0.0 0.0	12.000 0.0 12.000	19.530 0.0 0.799				Vel = 6.97
19 to 20	24.49 72.74	1.682 120.0 0.1423		0.0 0.0 0.0	5.110 0.0 5.110	20.329 0.0 0.727				Vel = 10.50
20 to 21	24.98 97.72	1.682 120.0 0.2456		0.0 0.0 0.0	5.110 0.0 5.110	21.056 0.0 1.255				Vel = 14.11
21 to 22	25.66 123.38	1.682 120.0 0.3781		0.0 0.0 0.0	8.000 0.0 8.000	22.311 0.0 3.025				Vel = 17.81
22 to 23	27.35 150.73	1.682 120.0 0.5477	1E 1T	4.95 9.9 0.0	23.130 14.850 37.980	25.336 -3.465 20.801				Vel = 21.76
23 to 24	0.0 150.73	4.26 120.0 0.0060		0.0 0.0 0.0	11.500 0.0 11.500	42.672 0.0 0.069				Vel = 3.39
24 to TORG	150.70 301.43	4.26 120.0 0.0214	1E	13.167 0.0 0.0	9.440 13.167 22.607	42.741 0.0 0.483				Vel = 6.79
TORG to BORG	0.0 301.43	4.26 120.0 0.0214	1T 1B 1Fsp 1S	26.334 15.8 0.0 28.968	16.000 71.102 87.102	43.224 9.930 1.861			** Fixed Loss = 3 Vel = 6.79	
BORG to SPQ	0.0 301.43	4.26 120.0 0.0214	2E 2B 1Zst	26.334 31.601 0.0	3.360 57.935 61.295	55.015 8.000 1.311			** Fixed Loss = 8 Vel = 6.79	
SPQ to ELL	0.0 301.43	8.27 140.0 0.0006	1E	28.468 0.0 0.0	7.000 28.468 35.468	64.326 3.032 0.022				Vel = 1.80
ELL to TEST	0.0 301.43	8.27 140.0 0.0006	4E 1G 1T	113.872 6.326 55.354	100.000 175.552 275.552	67.380 -2.166 0.176				Vel = 1.80
	250.00 551.43								Qa = 250.00 K Factor = 68.19	
						65.390				
25 to 26	24.25 24.25	1.049 120.0 0.1858	1E	2.0 0.0 0.0	0.750 2.000 2.750	18.869 0.0 0.511			K Factor @ node EQ01	
									Vel = 9.00	
26 to 18	0.0 24.25	1.682 120.0 0.0188		0.0 0.0 0.0	8.000 0.0 8.000	19.380 0.0 0.150				Vel = 3.50

Final Calculations - Hazen-Williams

Tsunami Fire Suppression, LLC
Gravity Vault

Page 7
Date 07-12-2019

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 24.25					19.530			K Factor = 5.49	
27 to 19	24.49	1.049 120.0	1T	5.0 0.0	0.750 5.000	19.240 0.0			K Factor @ node EQ01	
	24.49	0.1894		0.0	5.750	1.089			Vel = 9.09	
	0.0 24.49					20.329			K Factor = 5.43	
28 to 20	24.98	1.049 120.0	1T	5.0 0.0	0.280 5.000	20.019 0.0			K Factor @ node EQ01	
	24.98	0.1964		0.0	5.280	1.037			Vel = 9.27	
	0.0 24.98					21.056			K Factor = 5.44	
29 to 21	25.66	1.049 120.0	1T	5.0 0.0	0.750 5.000	21.125 0.0			K Factor @ node EQ01	
	25.66	0.2063		0.0	5.750	1.186			Vel = 9.53	
	0.0 25.66					22.311			K Factor = 5.43	
30 to 22	27.35	1.049 120.0	1T	5.0 0.0	0.750 5.000	24.001 0.0			K Factor @ node EQ01	
	27.35	0.2322		0.0	5.750	1.335			Vel = 10.15	
	0.0 27.35					25.336			K Factor = 5.43	
31 to 32	24.05	1.049 120.0	1T	5.0 0.0	0.750 5.000	18.551 0.0			K Factor @ node EQ01	
	24.05	0.1830		0.0	5.750	1.052			Vel = 8.93	
32 to 33	24.29	1.682 120.0		0.0 0.0	12.000 0.0	19.603 0.0				
	48.34	0.0668		0.0	12.000	0.802			Vel = 6.98	
33 to 34	24.54	1.682 120.0		0.0 0.0	5.110 0.0	20.405 0.0				
	72.88	0.1427		0.0	5.110	0.729			Vel = 10.52	
34 to 35	24.73	1.682 120.0		0.0 0.0	5.110 0.0	21.134 0.0				
	97.61	0.2452		0.0	5.110	1.253			Vel = 14.09	
35 to 36	25.71	1.682 120.0		0.0 0.0	8.000 0.0	22.387 0.0				
	123.32	0.3779		0.0	8.000	3.023			Vel = 17.81	
36 to 24	27.39	1.682 120.0	1E 1T	4.95 9.9	23.130 14.850	25.410 -3.465				
	150.71	0.5476		0.0	37.980	20.796			Vel = 21.76	
	0.0 150.71					42.741			K Factor = 23.05	
37 to 38	24.30	1.049 120.0	1E	2.0 0.0	0.750 2.000	18.940 0.0			K Factor @ node EQ01	
	24.3	0.1865		0.0	2.750	0.513			Vel = 9.02	
38 to 32	0.0	1.682 120.0		0.0 0.0	8.000 0.0	19.453 0.0				
	24.3	0.0188		0.0	8.000	0.150			Vel = 3.51	

Final Calculations - Hazen-Williams

Tsunami Fire Suppression, LLC
Gravity Vault

Page 8
Date 07-12-2019

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 24.30					19.603			K Factor = 5.49	
39 to 33	24.53	1.049 120.0 0.1899	1T	5.0 0.0 0.0	0.750 5.000 5.750	19.313 0.0 1.092			K Factor @ node EQ01 Vel = 9.11	
	0.0 24.53					20.405			K Factor = 5.43	
40 to 34	24.74	1.049 120.0 0.1928	1T	5.0 0.0 0.0	2.780 5.000 7.780	19.634 0.0 1.500			K Factor @ node EQ01 Vel = 9.18	
	0.0 24.74					21.134			K Factor = 5.38	
41 to 35	25.70	1.049 120.0 0.2070	1T	5.0 0.0 0.0	0.750 5.000 5.750	21.197 0.0 1.190			K Factor @ node EQ01 Vel = 9.54	
	0.0 25.70					22.387			K Factor = 5.43	
42 to 36	27.39	1.049 120.0 0.2329	1T	5.0 0.0 0.0	0.750 5.000 5.750	24.071 0.0 1.339			K Factor @ node EQ01 Vel = 10.17	
	0.0 27.39					25.410			K Factor = 5.43	

THESE TWO METHODS ARE
THE ONLY ONES WHICH ARE
APPLICABLE TO THE STUDY
OF THE PROBLEM OF THE
RELATIONSHIP BETWEEN THE
PHYSICAL AND THE MENTAL
ASPECTS OF THE HUMAN
MIND.

Tenant fit-ups / Commercial Renovations

Certificate requirements

[print](#)
[reset defaults](#)
[check all](#)
[complete](#)

Tenant fit-ups / Commercial Renovations**UCC Requirements**

Approved Final Building Inspection	comment	☒	☐
Approved Final Electrical Inspection	comment	☒	☐
Approved Final Plumbing Inspection	comment	☒	☐
Approved Final Fire Inspection	comment	☒	☐
Approved Final Elevator Inspection (If Applicable)	comment	☐	☒

Prior Approvals

Approval from the BTMUA (732) 458-7000	comment	☒	☐
--	-------------------------	-------------------------------------	--------------------------

ok Per MUA

Approval from the Division of Engineering (If Applicable)	comment	☒	☐
---	-------------------------	-------------------------------------	--------------------------

Passed 11/10/2020 rec'd in bldg. 11/12/2020 MFF

Final Ocean County Soil Conservation 714 Lacey Rd. Forked River (609) 971-7002 (If Applicable)	comment	☒	☐
--	-------------------------	-------------------------------------	--------------------------

OK'd with Trader Joe's

Affordable Housing Approval (If Applicable)	comment	☐	☒
---	-------------------------	--------------------------	-------------------------------------

Signed Certificate of Occupancy Application	comment	☒	☐
---	-------------------------	-------------------------------------	--------------------------

All Updates Have Been Approved	comment	☒	☐
--------------------------------	-------------------------	-------------------------------------	--------------------------

VIOLATION - Paid 12/18/2020This checklist has been given to: [\(edit\)](#)

Brick Township

401 Chambers Bridge Road
Brick, NJ 08723
732-262-1030

CORRECTION NOTICE

ADDRESS 56 Chambers Road
PERMIT NUMBER 19-2149 BLOCK 671 LOT 1.01
OWNER Final

Upon inspection, violations of the ☒ Building ☐ Plumbing ☐ Electric ☐ Fire Code
were in evidence and the following orders are hereby issued for their correction:

- 1) NEED Reliance Plans on site VB
- 2) Patch all Perforation thru Raster Wall OK
- 3) Exit spot light not working cleaning alarm OK

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND
APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED.

DATE 10.2.20 INSPECTOR JS

PJR

CONSTRUCTION GROUP, INC.

Phone: (732) 308-0335 Fax: (732) 308-0996 Web: www.PJRgroup.com

TO: Township of Brick
401 Chamberbridge Road
Brick, NJ 08723

ATTN: Building Department

DATE: September 29, 2020
Project Name: Gravity Vault Indoor Rock Gym

TRANSMITTAL

We are Sending

✓ **ATTACHED**

✓ Original
Prints
Sepias
Information

UNDER SEPARATE COVER

Shop Drawings
Specifications
Test Reports
Survey
Change Order

Letter
Photocopies
Samples
Cut Sheets
Requisition

FOR:

✓ Approval
Review and Comment
Your Information

Distribution
Estimating
Construction

Reference
Per Your Request

THE FOLLOWING ACTION APPLIES:

✓ Approval
Approved As Noted
No Action Taken

Revise and Resubmit
Disapproved

Resubmit Copies for Approval
Submit Copies for Distribution

SENT VIA:

Express Mail
✓ Hand Delivered
Pick-Up

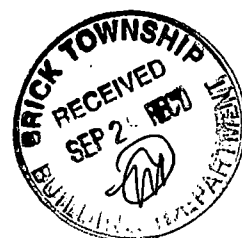
Parcel Post
First Class Mail
Fedex

Our Messenger
FTP Site

Sent by: Martin Shelton, Executive Director of Construction

Prepared by: Jennifer Raffo

Number of Copies	Latest Revision	Sheet Number	Description	Original Date
			The Gravity Vault 56 Chambers Bridge Road Unit #41 Permit #19-2149	
2			Seaman Corporation CPSIA Compliance Letter	
2			Seaman Corporation Shelter-Rite Tarp Fabrics Specs	
2			Penn Foam Corporation 1444 White Foam Specs	





Seaman Corporation

Innovative Customer Solutions through Fiber and Polymer Technology

1000 VENTURE BLVD. • WOOSTER, OHIO 44691
PHONE: (330) 262-1111 • FAX: (330) 263-6950 • www.seamancorp.com

2 September 2014

Resilite Sports Products, Inc.
PO Box 764
Sunbury, PA 17801

RE: CPSIA compliance

This letter is to confirm that the Shelter-Rite® 3818 fabrics listed below are formulated to meet the requirements of the Consumer Product Safety Act of 2008, Sections 101 and 108:

38180140A61B (DC7 Black)
38180170A61B (DC542 Yellow)
38180207A61B (DC570 Orange)
38180614A61B (DC932 Athl. Gr)
38181610A61B (DC928 Res. Blue)
38181615A61B (DC929 Res. Gray)
38181620A61B (DC933 Res. Red)
38181625A61B (DC930 R. Navy)
38181655A61B (DC931 R. Tan)
38187925A61B (DC520 R. Pink)
38188010A61B (DC640 R. Purple)

These products do not contain lead compounds, nor do they contain any of the six phthalate compounds listed in the Act (BBP, DBP, DEHP, DnOP, DINP, DIDP) in excess of 0.1%.

If you have any questions, please contact me at (330) 202-4470, or e-mail me at ashimko@seamancorp.com.

Regards,

Andrew J. Shimko, P.E.
Manager, Quality & Technical Services



Seaman Corporation

Article Information Sheet

SHELTER-RITE® TARP FABRICS

NOTE: This product meets the definition of "article" under the OSHA Hazard Communication Regulations in 29 CFR 1910.1200(c) and is exempt from the requirement to provide a Safety Data Sheet per 29 CFR 1910.1200(b)(6)(v). This Article Information Sheet is provided on a voluntary basis to provide additional information to customers.

Rev. Date: 30 Nov 2016

SECTION 1. IDENTIFICATION

Product Name: SHELTER-RITE® TARP FABRICS

Trade Names: Styles and coatings types as follows:
Styles: 21xx, 30xx, 3213, 35xx, 38xx, 58xx, 84xx (xx=2-digit finished weight target)
Coatings: MFRLTC, MFRLTA, FRLTC, FRLTA, MFRTRT, GALT

Recommended Use: tarps and covers

Manufacturer: SEAMAN CORPORATION
1000 Venture Blvd.
Wooster, OH 44691 USA

PHONE: (330) 262-1111
INTERNET: www.seamancorp.com
24-HR EMERGENCY: (800) 424-9300 (Chemtrec)

SECTION 2. HAZARDS IDENTIFICATION

This material does not meet any hazard classification under the HCS.

Under normal use and handling, the product is not expected to create any physical or health hazards.

Excessive heating may result in the generation of smoke or fumes containing hydrogen chloride, carbon dioxide, carbon monoxide, and trace amounts of organic compounds due to decomposition of the components. These fumes may be irritating to respiratory tract and eyes.

Certain colors (see Section 3) may contain lead chromate based pigments. Recommend washing of hands after prolonged handling, or wearing of appropriate gloves.

SECTION 3. COMPOSITION/INFORMATION ON INGREDIENTS

Exposure to individual components is not expected under normal conditions of use. Listing of major components and exposure limits are given for reference only.

Major Components

Nylon fabric (Styles 21, 30, 32) or Polyester fabric (Styles 35, 38, 58, 84)
PVC Resin
Alkyl phthalate plasticizers

CAS No.

Not applicable
9002-86-2
**

Other Regulated Components

Folpet
Diisodecyl phthalate (DIDP)***
Pigments (certain colors - see below)

133-07-3
26761-40-0

% wt

<0.4%
0-5%

FRLTC/FRLTA Products only:

Antimony Trioxide

1309-64-4

0-10%

** Specific chemical identity is withheld as a trade secret under 29 CFR 1910.1200(i).

*** Not present in products marked CPSIA compliant

Seaman Corporation Article Information Sheet
SHELTER-RITE® TARP FABRICS

Rev Date: 30 Nov 2016

Where "CPSIA" appears in product description, product contains no components regulated under the U.S. Consumer Products Safety Improvement Act.

The following colors may also contain Lead Chromate (CAS 7758-97-6) as a color pigment:

DC2 Red	DC513 JD Green	DC934 Green
DC24 Green	DC516 Orange	DC936 Philly Green
DC42 Yellow	DC737 Yellow	DC943 Yellow
DC70 Orange	DC843 Green	DC983 Lt. Blue
DC156 I. Orange	DC869 Yellow	DC986 Navy
DC245 Grape	DC896 Gray	

SECTION 4. FIRST AID MEASURES

Inhalation:	If exposed to fumes from overheating or combustion, move to fresh air. Seek medical attention if symptoms persist.
Skin Contact:	Wash exposed skin with soap and water. If irritation develops or persists, seek medical attention.
Eye Contact:	Flush eyes with plenty of water for at least 15 minutes. Seek medical attention.
Ingestion:	Not applicable

SECTION 5. FIRE FIGHTING MEASURES

Flammable Properties:	Material will burn if exposed to an external combustion source and yield hydrogen chloride, carbon monoxide, carbon dioxide, and small amounts of aliphatic and aromatic hydrocarbons.
Suitable Extinguishing Media:	Water fog, CO ₂ , foam or dry chemical (CAUTION: CO ₂ will displace air in confined spaces and may cause an oxygen deficient atmosphere.)
Products of Combustion:	Hydrogen chloride, carbon dioxide, carbon monoxide, trace amounts of aliphatic and aromatic organics
Protection of Firefighters:	Firefighters should wear self-contained breathing apparatus and full fire-fighting turnout gear. No special procedures are expected to be necessary for this product.

SECTION 6. ACCIDENTAL RELEASE MEASURES

Personal Precautions:	Use personal protection recommended in Section 8.
Environmental Precautions:	No special procedures necessary
Methods for Containment:	No special procedures necessary
Methods for Clean-up:	No special procedures necessary

SECTION 7. HANDLING AND STORAGE

Handling:	Use protective equipment recommended in Section 8. Wash hands after repeated handling. When hot air or wedge welding, insure adequate local ventilation to prevent the buildup of fumes. Unwinding, winding, and passage of the fabric through and over rollers can generate a strong electrostatic charge on the surface of the fabric. Static discharge devices should be used when handling in this way.
Storage:	Rolled goods should be kept dry and protected from moisture.

SECTION 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

PERSONAL PROTECTIVE EQUIPMENT

Seaman Corporation Article Information Sheet
SHELTER-RITE® TARP FABRICS

Rev Date: 30 Nov 2016

Engineering Controls: Provide local exhaust ventilation for any thermal processing operations.
Eye/Face: Wear safety glasses during processing
Skin: Wear general purpose gloves during prolonged handling
Respiratory: Provide adequate local ventilation. If exposure limits are exceeded, NIOSH approved respiratory protection must be provided.
General Hygiene: Wash hands with soap and water after handling material.

EXPOSURE GUIDELINES

COMPONENT	OSHA (PEL)	ACGIH (TLV)	NIOSH (REL)	COMMENTS
PVC Resin (9002-86-2)	-	-	-	None established
Diisodecyl phthalate (26761-40-0)	-	-	-	None established
Folpet (133-07-3)	-	-	-	None established
*Antimony Trioxide (1309-64-4)	0.5 mg/m ³ TWA as Sb	0.5 mg/m ³ TWA as Sb	0.5 mg/m ³ TWA as Sb	
**Lead chromate (7758-97-6)	0.005 mg/m ³ as Cr(VI)	0.05 mg/m ³ as Pb 0.012 mg/m ³ as Cr	0.0002 mg/m ³ as Cr	OSHA and NIOSH see Chromium (VI) Compounds, inorganic, insoluble

NOTE: Due to product form, exposure to dust or fume is not expected to occur; exposure limits are given for reference only.

* Used only in FRLTC or FRLTA products

** May be used only in those colors cited in Section 3

Potential byproducts from thermal processing/overheating:

	OSHA (PEL)	ACGIH (TLV)	NIOSH (REL)	COMMENTS
Hydrogen Chloride (7647-01-0)	5 ppm (7 mg/m ³) Ceiling	2 ppm (2.98 mg/m ³) Ceiling	5 ppm (7 mg/m ³) Ceiling	The odor threshold for HCl is 0.25 ppm
Carbon Monoxide (630-08-0)	50 ppm (55 mg/m ³) TWA	25 ppm (29 mg/m ³) TWA	35 ppm (40 mg/m ³) TWA; 200 ppm (229 mg/m ³) Ceiling	

SECTION 9. PHYSICAL AND CHEMICAL PROPERTIES

Appearance:	Polymeric sheeting	Odor:	Characteristic
Odor threshold:	NA	pH:	NA
Melting/Freezing Point:	NA	Boiling Point:	NA
Flash Point:	NA	Evaporation Rate:	NA
Flammability:	NA	LFL/UFL:	NA
Vapor Pressure:	NA	Vapor Density:	NA
Relative Density:	NA	Solubility:	none
Partition Coefficient K_{ow}:	NA	Auto-Ignition Temp.:	Not determined
Decomposition Temp.:	Not determined	Viscosity:	NA

SECTION 10. STABILITY AND REACTIVITY

Reactivity: Not reactive
Chemical Stability: Stable at normal temperatures
Hazardous Reactions: Will not occur
Conditions to Avoid: Prolonged excessive heating
Incompatible Materials: None known.
Hazardous Decomposition: Thermal decomposition products: Hydrogen chloride, carbon dioxide, carbon monoxide, trace amounts of aliphatic and aromatic organics

SECTION 11. TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS:

Summary: Smoke generated from heating or burning the product is the primary health effect.
Inhalation: Irritation of the upper respiratory tract may occur from fumes and smoke generated during heating
Skin Contact: Prolonged handling may cause mechanical irritation
Eye Contact: Fumes from heating may cause irritation, redness, and burning
Ingestion: Not an expected route of entry
Target Organs: Lungs/respiratory tract, eyes

ACUTE TOXICITY

General Information: No data available for this product as a whole. Adverse health effects would not be anticipated with normal use. However, thermal processing can emit fumes which may cause eye and respiratory irritation.

Component Analysis: Due to the physical form of the product, exposure to the chemical components of the fabric and coating is not expected. Contact manufacturer (contact information in Section 16) to obtain detailed information regarding component toxicity.

CARCINOGENICITY

General Information: This product has not been evaluated by OSHA, NTP, ACGIH, or IARC. No specific data available.

Component Analysis:

- PVC Resin (9002-86-2):
 - IARC: Group 3 – Not Classifiable (Vol. 19, Suppl. 7, 1987)
- Folpet (133-07-3):
 - EPA: B2 – Probable Human Carcinogen (sufficient evidence from animal studies; inadequate evidence or no data from epidemiologic studies)
- IF USED: Antimony Trioxide (1309-64-4):
 - IARC: Group 2B – Possibly Carcinogenic to Humans (Vol. 47, 1989)
 - ACGIH: A2 – Suspected Human Carcinogen
- IF USED: Lead Chromate (7758-97-6):
 - IARC: Group 1 – Carcinogenic to Humans (for Cr(VI) inhalation) (Vol. 49, 1990); Group 2A – Probably Carcinogenic to Humans (for Pb) (Vol. 87, 2006)
 - ACGIH: A2 – Suspected human carcinogen
 - NTP: Known Carcinogen (for Cr(VI))

CHRONIC TOXICITY

No data is available on mutagenicity, reproductive effects, or developmental effects.

SECTION 12. ECOLOGICAL INFORMATION

No data is available on the adverse effects of this product on the environment. Toxicity is expected to be low based on insolubility in water.

SECTION 13. DISPOSAL CONSIDERATIONS

Dispose of waste in accordance with Federal, State, and local environmental control regulations. This material is not hazardous in its manufactured form under the Resource Conservation and Recovery Act. (40 CFR 261)

SECTION 14. TRANSPORTATION INFORMATION

This product is not classified as hazardous for transportation.

SECTION 15. REGULATORY INFORMATION

SARA Title III:	Health:	Acute <u>NO</u>	Chronic <u>NO</u>	EHS <u>NO</u>
	Physical:	Fire <u>NO</u>	Reactivity <u>NO</u>	Pressure <u>NO</u>

SARA 313 (TRI):	This product is considered an "article" under SARA Title III Section 313 and is not subject to reporting under normal conditions of use.
CPSIA:	Where "CPSIA" appears in product description, product contains no components regulated under the U.S. Consumer Products Safety Improvement Act
California Proposition 65:	WARNING: This material contains chemicals known to the State of California to cause cancer, birth defects, or other reproductive harm. FOR CPSIA COMPLIANT PRODUCTS ONLY: WARNING: This material contains chemicals known to the State of California to cause cancer.

SECTION 16. OTHER INFORMATION

The data in this Article Information Sheet relates only to the specific material designated herein and does not relate to use in combination with any other material or in any process. No warranty of merchantability or any other warranty, expressed or implied, is given. In no case shall the information provided herein be considered a part of the terms and conditions of sale. Seaman Corporation assumes no obligation or liability for the information given or results obtained. All materials may present unknown hazards and should be used with caution. Final determination of suitability of any material is the sole responsibility of the user.

For questions related to the safety of this product, e-mail msds@seamancorp.com or call (330) 262-1111.



Seaman Corporation

Innovative Customer Solutions through Fiber and Polymer Technology

1000 VENTURE BLVD. ▪ WOOSTER, OHIO 44691

PHONE: (330) 262-1111 ▪ FAX: (330) 263-6950 ▪ www.seamancorp.com



Penn Foam Corporation

2625 Mitchell Avenue, Allentown, PA 18103

voice 610-797-7500 fax 610-797-5020

www.pennfoam.com

TECHNICAL DATA SHEET

Foam Type: 1444 White

Performance Properties

Tolerances

Test Methods

density, lbs./ cubic foot

1.25 - 1.45

ASTM 3574

indentation force deflection
@25% deflection, lbs.

41 - 47

ASTM 3574

support factor

1.85

ASTM 3574

compression set @ 90% deflection

10% max.

ASTM 3574

tensile strength

16.0 psi min.

ASTM 3574

tear strength

1.50 pli min.

ASTM 3574

elongation

150% min.

ASTM 3574

resilience (rebound)

45% min.

ASTM 3574



Seaman Corporation

Innovative Customer Solutions through Fiber and Polymer Technology

1000 VENTURE BLVD. • WOOSTER, OHIO 44691
PHONE: (330) 262-1111 • FAX: (330) 263-6950 • www.seamancorp.com

2 September 2014

Resilite Sports Products, Inc.
PO Box 764
Sunbury, PA 17801

RE: CPSIA compliance

This letter is to confirm that the Shelter-Rite® 3818 fabrics listed below are formulated to meet the requirements of the Consumer Product Safety Act of 2008, Sections 101 and 108:

38180140A61B (DC7 Black)
38180170A61B (DC542 Yellow)
38180207A61B (DC570 Orange)
38180614A61B (DC932 Athl. Gr)
38181610A61B (DC928 Res. Blue)
38181615A61B (DC929 Res. Gray)
38181620A61B (DC933 Res. Red)
38181625A61B (DC930 R. Navy)
38181655A61B (DC931 R. Tan)
38187925A61B (DC520 R. Pink)
38188010A61B (DC640 R. Purple)

These products do not contain lead compounds, nor do they contain any of the six phthalate compounds listed in the Act (BBP, DBP, DEHP, DnOP, DINP, DIDP) in excess of 0.1%.

If you have any questions, please contact me at (330) 202-4470, or e-mail me at ashimko@seamancorp.com.

Regards,

Andrew J. Shimko, P.E.
Manager, Quality & Technical Services



Seaman Corporation

Article Information Sheet

SHELTER-RITE® TARP FABRICS

NOTE: This product meets the definition of "article" under the OSHA Hazard Communication Regulations in 29 CFR 1910.1200(c) and is exempt from the requirement to provide a Safety Data Sheet per 29 CFR 1910.1200(b)(6)(v). This Article Information Sheet is provided on a voluntary basis to provide additional information to customers.

Rev. Date: 30 Nov 2016

SECTION 1. IDENTIFICATION

Product Name: SHELTER-RITE® TARP FABRICS

Trade Names: Styles and coatings types as follows:
Styles: 21xx, 30xx, 3213, 35xx, 38xx, 58xx, 84xx (xx=2-digit finished weight target)
Coatings: MFRLTC, MFRLTA, FRLTC, FRLTA, MFRTRT, GALT C

Recommended Use: tarps and covers

Manufacturer: SEAMAN CORPORATION
1000 Venture Blvd.
Wooster, OH 44691 USA

PHONE: (330) 262-1111
INTERNET: www.seamancorp.com
24-HR EMERGENCY: (800) 424-9300 (Chemtrec)

SECTION 2. HAZARDS IDENTIFICATION

This material does not meet any hazard classification under the HCS.

Under normal use and handling, the product is not expected to create any physical or health hazards.

Excessive heating may result in the generation of smoke or fumes containing hydrogen chloride, carbon dioxide, carbon monoxide, and trace amounts of organic compounds due to decomposition of the components. These fumes may be irritating to respiratory tract and eyes.

Certain colors (see Section 3) may contain lead chromate based pigments. Recommend washing of hands after prolonged handling, or wearing of appropriate gloves.

SECTION 3. COMPOSITION/INFORMATION ON INGREDIENTS

Exposure to individual components is not expected under normal conditions of use. Listing of major components and exposure limits are given for reference only.

Major Components

Nylon fabric (Styles 21, 30, 32) or Polyester fabric (Styles 35, 38, 58, 84)
PVC Resin
Alkyl phthalate plasticizers

CAS No.

Not applicable
9002-86-2
**

Other Regulated Components

Folpet
Diisodecyl phthalate (DIDP)***
Pigments (certain colors - see below)

133-07-3
26761-40-0

% wt

<0.4%
0-5%

FRLTC/FRLTA Products only:

Antimony Trioxide

1309-64-4

0-10%

** Specific chemical identity is withheld as a trade secret under 29 CFR 1910.1200(i).

*** Not present in products marked CPSIA compliant

Where "CPSIA" appears in product description, product contains no components regulated under the U.S. Consumer Products Safety Improvement Act.

The following colors may also contain Lead Chromate (CAS 7758-97-6) as a color pigment:

DC2 Red	DC513 JD Green	DC934 Green
DC24 Green	DC516 Orange	DC936 Philly Green
DC42 Yellow	DC737 Yellow	DC943 Yellow
DC70 Orange	DC843 Green	DC983 Lt. Blue
DC156 I. Orange	DC869 Yellow	DC986 Navy
DC245 Grape	DC896 Gray	

SECTION 4. FIRST AID MEASURES

Inhalation:	If exposed to fumes from overheating or combustion, move to fresh air. Seek medical attention if symptoms persist.
Skin Contact:	Wash exposed skin with soap and water. If irritation develops or persists, seek medical attention.
Eye Contact:	Flush eyes with plenty of water for at least 15 minutes. Seek medical attention.
Ingestion:	Not applicable

SECTION 5. FIRE FIGHTING MEASURES

Flammable Properties:	Material will burn if exposed to an external combustion source and yield hydrogen chloride, carbon monoxide, carbon dioxide, and small amounts of aliphatic and aromatic hydrocarbons.
Suitable Extinguishing Media:	Water fog, CO ₂ , foam or dry chemical (CAUTION: CO ₂ will displace air in confined spaces and may cause an oxygen deficient atmosphere.)
Products of Combustion:	Hydrogen chloride, carbon dioxide, carbon monoxide, trace amounts of aliphatic and aromatic organics
Protection of Firefighters:	Firefighters should wear self-contained breathing apparatus and full fire-fighting turnout gear. No special procedures are expected to be necessary for this product.

SECTION 6. ACCIDENTAL RELEASE MEASURES

Personal Precautions:	Use personal protection recommended in Section 8.
Environmental Precautions:	No special procedures necessary
Methods for Containment:	No special procedures necessary
Methods for Clean-up:	No special procedures necessary

SECTION 7. HANDLING AND STORAGE

Handling:	Use protective equipment recommended in Section 8. Wash hands after repeated handling. When hot air or wedge welding, insure adequate local ventilation to prevent the buildup of fumes. Unwinding, winding, and passage of the fabric through and over rollers can generate a strong electrostatic charge on the surface of the fabric. Static discharge devices should be used when handling in this way.
Storage:	Rolled goods should be kept dry and protected from moisture.

SECTION 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

PERSONAL PROTECTIVE EQUIPMENT

Seaman Corporation Article Information Sheet
SHELTER-RITE® TARP FABRICS

Rev Date: 30 Nov 2016

Engineering Controls: Provide local exhaust ventilation for any thermal processing operations.
Eye/Face: Wear safety glasses during processing
Skin: Wear general purpose gloves during prolonged handling
Respiratory: Provide adequate local ventilation. If exposure limits are exceeded, NIOSH approved respiratory protection must be provided.
General Hygiene: Wash hands with soap and water after handling material.

EXPOSURE GUIDELINES

COMPONENT	OSHA (PEL)	ACGIH (TLV)	NIOSH (REL)	COMMENTS
PVC Resin (9002-86-2)	-	-	-	None established
Diisodecyl phthalate (26761-40-0)	-	-	-	None established
Folpet (133-07-3)	-	-	-	None established
*Antimony Trioxide (1309-64-4)	0.5 mg/m ³ TWA as Sb	0.5 mg/m ³ TWA as Sb	0.5 mg/m ³ TWA as Sb	
**Lead chromate (7758-97-6)	0.005 mg/m ³ as Cr(VI)	0.05 mg/m ³ as Pb 0.012 mg/m ³ as Cr	0.0002 mg/m ³ as Cr	OSHA and NIOSH see Chromium (VI) Compounds, inorganic, insoluble

NOTE: Due to product form, exposure to dust or fume is not expected to occur; exposure limits are given for reference only.

*Used only in FRLTC or FRLTA products

** May be used only in those colors cited in Section 3

Potential byproducts from thermal processing/overheating:

	OSHA (PEL)	ACGIH (TLV)	NIOSH (REL)	COMMENTS
Hydrogen Chloride (7647-01-0)	5 ppm (7 mg/m ³) Ceiling	2 ppm (2.98 mg/m ³) Ceiling	5 ppm (7 mg/m ³) Ceiling	The odor threshold for HCl is 0.25 ppm
Carbon Monoxide (630-08-0)	50 ppm (55 mg/m ³) TWA	25 ppm (29 mg/m ³) TWA	35 ppm (40 mg/m ³) TWA; 200 ppm (229 mg/m ³) Ceiling	

SECTION 9. PHYSICAL AND CHEMICAL PROPERTIES

Appearance:	Polymeric sheeting	Odor:	Characteristic
Odor threshold:	NA	pH:	NA
Melting/Freezing Point:	NA	Boiling Point:	NA
Flash Point:	NA	Evaporation Rate:	NA
Flammability:	NA	LFL/UFL:	NA
Vapor Pressure:	NA	Vapor Density:	NA
Relative Density:	NA	Solubility:	none
Partition Coefficient K_{ow}:	NA	Auto-Ignition Temp.:	Not determined
Decomposition Temp.:	Not determined	Viscosity:	NA

SECTION 10. STABILITY AND REACTIVITY

Reactivity: Not reactive
Chemical Stability: Stable at normal temperatures
Hazardous Reactions: Will not occur
Conditions to Avoid: Prolonged excessive heating
Incompatible Materials: None known.
Hazardous Decomposition: Thermal decomposition products: Hydrogen chloride, carbon dioxide, carbon monoxide, trace amounts of aliphatic and aromatic organics

SECTION 11. TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS:

Summary: Smoke generated from heating or burning the product is the primary health effect.
Inhalation: Irritation of the upper respiratory tract may occur from fumes and smoke generated during heating
Skin Contact: Prolonged handling may cause mechanical irritation
Eye Contact: Fumes from heating may cause irritation, redness, and burning
Ingestion: Not an expected route of entry
Target Organs: Lungs/respiratory tract, eyes

ACUTE TOXICITY

General Information: No data available for this product as a whole. Adverse health effects would not be anticipated with normal use. However, thermal processing can emit fumes which may cause eye and respiratory irritation.

Component Analysis: Due to the physical form of the product, exposure to the chemical components of the fabric and coating is not expected. Contact manufacturer (contact information in Section 16) to obtain detailed information regarding component toxicity.

CARCINOGENICITY

General Information: This product has not been evaluated by OSHA, NTP, ACGIH, or IARC. No specific data available.

Component Analysis:

- PVC Resin (9002-86-2):
 - IARC: Group 3 – Not Classifiable (Vol. 19, Suppl. 7, 1987)
- Folpet (133-07-3):
 - EPA: B2 – Probable Human Carcinogen (sufficient evidence from animal studies; inadequate evidence or no data from epidemiologic studies)
- IF USED: Antimony Trioxide (1309-64-4):
 - IARC: Group 2B – Possibly Carcinogenic to Humans (Vol. 47, 1989)
 - ACGIH: A2 – Suspected Human Carcinogen
- IF USED: Lead Chromate (7758-97-6):
 - IARC: Group 1 – Carcinogenic to Humans (for Cr(VI) inhalation) (Vol. 49, 1990); Group 2A – Probably Carcinogenic to Humans (for Pb) (Vol. 87, 2006)
 - ACGIH: A2 – Suspected human carcinogen
 - NTP: Known Carcinogen (for Cr(VI))

CHRONIC TOXICITY

No data is available on mutagenicity, reproductive effects, or developmental effects.

SECTION 12. ECOLOGICAL INFORMATION

No data is available on the adverse effects of this product on the environment. Toxicity is expected to be low based on insolubility in water.

SECTION 13. DISPOSAL CONSIDERATIONS

Dispose of waste in accordance with Federal, State, and local environmental control regulations. This material is not hazardous in its manufactured form under the Resource Conservation and Recovery Act. (40 CFR 261)

SECTION 14. TRANSPORTATION INFORMATION

This product is not classified as hazardous for transportation.

SECTION 15. REGULATORY INFORMATION

SARA Title III:	Health:	Acute <u>NO</u>	Chronic <u>NO</u>	EHS <u>NO</u>
	Physical:	Fire <u>NO</u>	Reactivity <u>NO</u>	Pressure <u>NO</u>

SARA 313 (TRI):	This product is considered an "article" under SARA Title III Section 313 and is not subject to reporting under normal conditions of use.
CPSIA:	Where "CPSIA" appears in product description, product contains no components regulated under the U.S. Consumer Products Safety Improvement Act
California Proposition 65:	WARNING: This material contains chemicals known to the State of California to cause cancer, birth defects, or other reproductive harm. FOR CPSIA COMPLIANT PRODUCTS ONLY: WARNING: This material contains chemicals known to the State of California to cause cancer.

SECTION 16. OTHER INFORMATION

The data in this Article Information Sheet relates only to the specific material designated herein and does not relate to use in combination with any other material or in any process. No warranty of merchantability or any other warranty, expressed or implied, is given. In no case shall the information provided herein be considered a part of the terms and conditions of sale. Seaman Corporation assumes no obligation or liability for the information given or results obtained. All materials may present unknown hazards and should be used with caution. Final determination of suitability of any material is the sole responsibility of the user.

For questions related to the safety of this product, e-mail msds@seamancorp.com or call (330) 262-1111.



Innovative Customer Solutions through Fiber and Polymer Technology

1000 VENTURE BLVD. • WOOSTER, OHIO 44691
PHONE: (330) 262-1111 • FAX: (330) 263-6950 • www.seamancorp.com



Penn Foam Corporation

2625 Mitchell Avenue, Allentown, PA 18103

voice 610-797-7500 fax 610-797-5020

www.pennfoam.com

TECHNICAL DATA SHEET

Foam Type: 1444 White

<u>Performance Properties</u>	<u>Tolerances</u>	<u>Test Methods</u>
density, lbs./ cubic foot	1.25 - 1.45	ASTM 3574
indentation force deflection @25% deflection, lbs.	41 - 47	ASTM 3574
support factor	1.85	ASTM 3574
compression set @ 90% deflection	10% max.	ASTM 3574
tensile strength	16.0 psi min.	ASTM 3574
tear strength	1.50 pli min.	ASTM 3574
elongation	150% min.	ASTM 3574
resilience (rebound)	45% min.	ASTM 3574



PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

New Jersey Office of the Attorney General

Division of Consumer Affairs
Board of Examiners of Electrical Contractors
124 Halsey Street, 6th Floor, Newark NJ 07102



GURBIR S. GREWAL
Attorney General

PAUL R. RODRIGUEZ
Acting Director

July 24, 2019

Mailing Address:
P.O. Box 45006
Newark, NJ 07101
(973) 504-6410
(973) 504-6534

TO WHOM IT MAY CONCERN

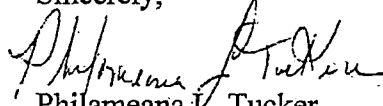
Our records indicate that the holder of License and Business Permit No. 34EB00849200 has applied to the Board of Electrical Contractors for a pressure seal which has not yet been issued to him/her by the vendor.

Please accept this sealed letter as an interim device pending the furnishing of a seal to:

JOSEPH LAWROSKI
JERSEY SHORE ELECTRICAL LLC
704 Atlantic Avenue
Point Pleasant Beach NJ 08742

This letter will be rendered invalid **300 days** after the date of its issuance.

Sincerely,


Philameana L. Tucker
Executive Director

PLT:gkb



2020 Fire Alarm Test Report

For

Federal Realty

Brick Shopping Center ~ Gravity Vault

56 Chambers Bridge Road

Brick NJ, 08723

INSPECTION DATE:

2/7/2020

INSPECTED BY:

Steve Nice



Electronic Security Solutions

5115 Campus Drive

Plymouth Meeting, PA 19462

Telephone 215-277-5248

Fax 215-277-5263

tcapie@essfiresys.com

[illegible]

DEVICE	FLOOR	LOCATION	PASS	ADDRESS	NOTES
--------	-------	----------	------	---------	-------

27		TOTAL DEVICES	27	0	
1		TOTAL SMOKE DETECTORS	1	0	100.00%
2		TOTAL MANUAL PULL STATIONS	2	0	100.00%
5		TOTAL DUCT SMOKE DETECTORS	5	0	100.00%
0		TOTAL HEAT DETECTORS	0	0	NA
4		TOTAL WATERFLOWS	4	0	100.00%
6		TOTAL TAMPER VALVES	6	0	100.00%
0		TOTAL PRESSURE SWITCHES	0	0	NA
0		TOTAL LOW AIR	0	0	NA
0		TOTAL PRE ACTION ALARMS	0	0	NA
0		TOTAL PRE ACTION TROUBLES	0	0	NA
0		TOTAL PRE ACTION SUPERVISORIES	0	0	NA
0		TOTAL FIRE PUMP POWER	0	0	NA
0		TOTAL FIRE PUMP RUN	0	0	NA
0		TOTAL FIRE PUMP TROUBLE	0	0	NA
0		TOTAL FIRE PUMP NOT IN AUTO	0	0	NA
0		TOTAL SMOKE/CO DETECTORS	0	0	NA
0		TOTAL HEAT/CO DETECTORS	0	0	NA
0		TOTAL PRIMARY ELEVATOR RECALL	0	0	NA
0		TOTAL ALTERNATE ELEVATOR RECALL	0	0	NA
0		TOTAL ELEVATOR CAB WARNING	0	0	NA
0		TOTAL SHUNT TRIP BREAKER	0	0	NA
0		TOTAL DOOR HOLDER	0	0	NA
0		TOTAL HVAC SHUTDOWN	0	0	NA
0		TOTAL DAMPER CONTROLS	0	0	NA
0		TOTAL FIRE PHONE JACKS	0	0	NA
0		TOTAL PRINTER	0	0	NA
0		TOTAL POWER SUPPLY	0	0	NA
0		TOTAL FACP	0	0	NA
1		TOTAL ANNUNCIATOR	1	0	100.00%
1		TOTAL NAC PANEL	1	0	100.00%
2		TOTAL MISCELLANEOUS	2	0	100.00%
5		TOTAL CARBON MONOXIDE DETECTORS	5	0	100.00%

[illegible]

FAILURES, RECOMMENDATIONS/CONCERNS & NOTES ENCOUNTERED DURING TESTING

FAILURES:

1

2

3

4

5

6

7

8

9

10

RECOMMENDATIONS/CONCERNS:

1

2

3

4

5

6

7

8

9

10

VERIFICATION OF SYSTEM TEST

The fire life safety system has been placed in operation and as the owner's representative, I have been instructed in the operation of the system.

Date _____ Name _____ Title _____

The undersigned ESS representative certifies that the fire alarm has been tested in accordance with NFPA 72 (2013 Edition) and local fire codes.

Date 2/7/20 ESS Steve Nice



INSPECTION AND TESTING FORM

DATE: 2/7/2020
TIME: 14:00

Service Organization

NAME: Electronic Security Solutions
ADDRESS: 5115 Campus Drive
Plymouth Meeting, PA 19462
REPRESENTATIVE: Steve Nice
LICENSE NO: P01299
TELEPHONE: 215-277-5248

Property Name (User)

NAME: Brick Shopping Center ~ Gravity Vault
ADDRESS: 56 Chambers Bridge Road
Brick, NJ 08723
OWNER CONTACT: Kerry Dolan
TELEPHONE: 732-822-1977

MONITORING AGENCY

CONTACT: Rapid Response
TELEPHONE: 800-932-3822

APPROVING AGENCY

CONTACT: Brick Township Fire Department
TELEPHONE: _____

MONITORING ACCOUNT REF NO: Z931093

TYPE TRANSMISSION

☐	- Mc Cullogh
☐	- Multiplex
☒	- Digital
☐	- Reverse Priority
☐	- RF
☐	- Other (Specify)

SERVICE

☐	- Weekly
☐	- Monthly
☐	- Quarterly
☐	- Semi Annually
☒	- Annually
☐	- Other (Specify)

PANEL MANUFACTURER: Edwards MODEL NO: IO64

CIRCUIT CLASS: B

OF CIRCUITS: 7

SOFTWARE REV: 4.11

LAST DATE THAT SYSTEM HAD ANY SERVICE PERFORMED: On File

LAST DATE THAT ANY SOFTWARE OR CONFIGURATION WAS REVISED: On File

ALARM INITIATING DEVICES AND CIRCUIT INFORMATION

QTY OF	CIRCUIT CLASS	
<u>2</u>	<u>B</u>	MANUAL STATIONS
<u>1</u>	<u>B</u>	PHOTO DETECTORS
<u>5</u>	<u>B</u>	CO DETECTORS
<u>5</u>		DUCT DETECTORS
<u>0</u>		HEAT DETECTORS
<u>4</u>	<u>B</u>	WATERFLOW SWITCHES
<u>6</u>	<u>B</u>	SUPERVISORY SWITCHES
		OTHER (SPECIFY) _____



NOTIFICATION APPLIANCES AND CIRCUIT INFORMATION

QTY OF	CIRCUIT CLASS	
<u>10</u>	<u>B</u>	SPEAKER/STROBES
		HORN/STROBES
		CHIMES
<u>3</u>	<u>B</u>	STROBES
		SPEAKERS
		OTHER (SPECIFY): _____

NOTIFICATION APPLIANCE CIRCUITS: 2

ARE ALL CIRCUITS SUPERVISED: ☒ YES ☐ NO

SUPERVISORY SIGNAL INITIATING DEVICES AND CIRCUIT INFORMATION

QTY OF	CIRCUIT CLASS	
<u>N/A</u>		BUILDING TEMPERATURE
<u>N/A</u>		SITE WATER TEMPERATURE
<u>N/A</u>		SITE WATER LEVEL
<u>N/A</u>		FIRE PUMP POWER
<u>N/A</u>		FIRE PUMP RUNNING
<u>N/A</u>		FIRE PUMP AUTO
<u>N/A</u>		FIRE PUMP OR FIRE PUMP CONTROLLER IN TROUBLE
<u>N/A</u>		FIRE PUMP PHASE REVERSAL
<u>N/A</u>		GENERATOR IN AUTO
<u>N/A</u>		GENERATOR OR CONTROLLER TROUBLE
<u>N/A</u>		SWITCH TRANSFER
<u>N/A</u>		GENERATOR RUNNING
<u>N/A</u>		OTHER (SPECIFY): _____

SIGNALING LINE CIRCUITS

Quantity and class (see NFPA 72, Table 3-6.1) for signaling line circuits connected to system:

QUANTITY: 1 CLASS: B

POWER SUPPLIES

a. Primary(Main) Nominal Voltage 120, Amps 6
Overcurrent Protection: Type Breaker, Amps 20
Location (Panel Number): Electric Room House Panel
Disconnecting Means Location: #2
b. Secondary (Standby):
12VDC x 2 Storage Battery Amp Hour Rating 7
Calculated capacity to operate system, in hours: 24
N/A Engine driven generator dedicated to the fire alarm system
Location of Fuel Storage N/A

TYPE BATTERY

☐	Dry Cell
☐	Nickel Cadmium
☒	Sealed Lead-Acid
☐	Other (Specify) _____

c. Emergency or standby system used as a backup to primary power supply, instead of using a secondary power supply:

N/A Emergency system describe in NFPA 70, Article 700
N/A Legally required standby described in NFPA, Article 701
N/A Optional standby system described in NFPA 70, Article 702, which also meets the performance requirements of Article 700 or 701.

PRIOR TO ANY TESTING			
NOTIFICATIONS ARE MADE:	YES	NO	WHO
MONITORING ENTITY	☒		
BUILDING OCCUPANTS	☒		
BUILDING MANAGEMENT	☒		
OTHER (SPECIFY)			
AHJ NOTIFIED OF ANY IMPAIRMENTS			

SYSTEM TESTS AND INSPECTIONS			
TYPE	VISUAL	FUNCTIONAL	COMMENTS
CONTROL PANEL	☒	☒	
INTERFACE EQ	☒	☒	
LAMPS/LED	☒	☒	
FUSES	☒	☒	
PRIMARY POWER SUPPLY	☒	☒	
TROUBLE SIGNALS	☒	☒	
DISCONNECT SWITCHES	☒	☒	
GROUND FAULT MONITORING	☒	☒	

SECONDARY POWER			
TYPE	VISUAL	FUNCTIONAL	COMMENTS
BATTERY CONDITION	☒		
LOAD VOLTAGE		☒	
DISCHARGE TEST		☒	
CHARGER TEST		☒	
TRANSIENT SUPPRESSORS	☒		
REMOTE ANNUNCIATORS	☒	☒	

NOTIFICATION APPLIANCES			
	VISUAL	FUNCTIONAL	COMMENTS
AUDIBLE	☒	☒	
VISUAL	☒	☒	
SPEAKERS			N/A
VOICE CLARITY			N/A

COMMENTS: _____

EMERGENCY COMMUNICATION EQUIP			
	VISUAL	FUNCTIONAL	COMMENTS
PHONE SET			N/A
PHONE JACKS			N/A
OFF-HOOK INDICATOR			N/A
AMPLIFIER(S)			N/A
TONE GENERATOR(S)			N/A
CALL IN SIGNAL			N/A
SYSTEM PERFORMANCE			N/A

INTERFACE EQUIPMENT			
	VISUAL	DEVICE OPERATION	SIMULATED OPERATION
(SPECIFY) _____			
(SPECIFY) _____			
(SPECIFY) _____			
(SPECIFY) _____			

SPECIAL HAZARD SYSTEMS			
	VISUAL	DEVICE OPERATION	SIMULATED OPERATION
(SPECIFY) _____			
(SPECIFY) _____			



(SPECIFY) _____

SPECIAL PROCEDURES: _____

COMMENTS: _____

ON/OFF PREMISIS MONITORING

	YES	NO	COMMENTS
ALARM SIGNAL	X		
ALARM RESTORAL	X		
TROUBLE SIGNAL	X		
TROUBLE RESTORAL	X		
SUPERVISORY SIGNAL	X		
SUPERVISORY RESTORAL	X		

NOTIFICATIONS THAT TESTING IS COMPLETE

	YES	NO	COMMENTS
BUILDING MANAGEMENT	X		
MONITORING AGENCY	X		
BUILDING OCCUPANTS	X		
OTHER (SPECIFY)			

THE FOLLOWING DID NOT OPERATE CORRECTLY: _____

SYSTEM RETURNED TO NORMAL OPERATION DATE: _____ TIME: _____

THIS TESTING WAS PERFORMED IN ACCORDANCE WITH APPLICABLE NFPA72 STANDARDS

NAME OF INSPECTOR: _____ Steve Nice

DATE: 2/7/2020

SIGNATURE: _____



Thomas Capie, SET, CFPS

NAME OF OWNER REPRESENTATIVE: _____ Kerry Dolan

DATE: 2/7/2020

SIGNATURE: _____



2020 Fire Alarm Test Report

For

Federal Realty

Brick Shopping Center ~ Gravity Vault

56 Chambers Bridge Road

Brick NJ, 08723

INSPECTION DATE:

2/7/2020

INSPECTED BY:

Steve Nice



Electronic Security Solutions

5115 Campus Drive

Plymouth Meeting, PA 19462

Telephone 215-277-5248

Fax 215-277-5263

tcapie@essfiresys.com

[illegible]

DEVICE	FLOOR	LOCATION	PASS	ADDRESS	NOTES
27		TOTAL DEVICES	27	0	
1		TOTAL SMOKE DETECTORS	1	0	100.00%
2		TOTAL MANUAL PULL STATIONS	2	0	100.00%
5		TOTAL DUCT SMOKE DETECTORS	5	0	100.00%
0		TOTAL HEAT DETECTORS	0	0	NA
4		TOTAL WATERFLOWS	4	0	100.00%
6		TOTAL TAMPER VALVES	6	0	100.00%
0		TOTAL PRESSURE SWITCHES	0	0	NA
0		TOTAL LOW AIR	0	0	NA
0		TOTAL PRE ACTION ALARMS	0	0	NA
0		TOTAL PRE ACTION TROUBLES	0	0	NA
0		TOTAL PRE ACTION SUPERVISORIES	0	0	NA
0		TOTAL FIRE PUMP POWER	0	0	NA
0		TOTAL FIRE PUMP RUN	0	0	NA
0		TOTAL FIRE PUMP TROUBLE	0	0	NA
0		TOTAL FIRE PUMP NOT IN AUTO	0	0	NA
0		TOTAL SMOKE/CO DETECTORS	0	0	NA
0		TOTAL HEAT/CO DETECTORS	0	0	NA
0		TOTAL PRIMARY ELEVATOR RECALL	0	0	NA
0		TOTAL ALTERNATE ELEVATOR RECALL	0	0	NA
0		TOTAL ELEVATOR CAB WARNING	0	0	NA
0		TOTAL SHUNT TRIP BREAKER	0	0	NA
0		TOTAL DOOR HOLDER	0	0	NA
0		TOTAL HVAC SHUTDOWN	0	0	NA
0		TOTAL DAMPER CONTROLS	0	0	NA
0		TOTAL FIRE PHONE JACKS	0	0	NA
0		TOTAL PRINTER	0	0	NA
0		TOTAL POWER SUPPLY	0	0	NA
0		TOTAL FACP	0	0	NA
1		TOTAL ANNUNCIATOR	1	0	100.00%
1		TOTAL NAC PANEL	1	0	100.00%
2		TOTAL MISCELLANEOUS	2	0	100.00%
5		TOTAL CARBON MONOXIDE DETECTORS	5	0	100.00%

1

[illegible]

FAILURES, RECOMMENDATIONS/CONCERNS & NOTES ENCOUNTERED DURING TESTING

FAILURES:

1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

RECOMMENDATIONS/CONCERNS:

1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

VERIFICATION OF SYSTEM TEST

The fire life safety system has been placed in operation and as the owner's representative, I have been instructed in the operation of the system.

Date _____ Name _____ Title _____

The undersigned ESS representative certifies that the fire alarm has been tested in accordance with NFPA 72 (2013 Edition) and local fire codes.

Date 2/7/20

ESS Steve Nice



INSPECTION AND TESTING FORM

DATE: 2/7/2020
TIME: 14:00

Service Organization

NAME: Electronic Security Solutions
ADDRESS: 5115 Campus Drive
Plymouth Meeting, PA 19462
REPRESENTATIVE: Steve Nice
LICENSE NO: P01299
TELEPHONE: 215-277-5248

Property Name (User)

NAME: Brick Shopping Center ~ Gravity Vault
ADDRESS: 56 Chambers Bridge Road
Brick, NJ 08723
OWNER CONTACT: Kerry Dolan
TELEPHONE: 732-822-1977

MONITORING AGENCY

CONTACT: Rapid Response
TELEPHONE: 800-932-3822
MONITORING ACCOUNT REF NO: Z931093

APPROVING AGENCY

CONTACT: Brick Township Fire Department
TELEPHONE: _____

TYPE TRANSMISSION

- | | |
|-------------------------------------|--------------------|
| ☐ | - Mc Cullogh |
| ☐ | - Multiplex |
| ☒ | - Digital |
| ☐ | - Reverse Priority |
| ☐ | - RF |
| ☐ | - Other (Specify) |

SERVICE

- | | |
|-------------------------------------|-------------------|
| ☐ | - Weekly |
| ☐ | - Monthly |
| ☐ | - Quarterly |
| ☐ | - Semi Annually |
| ☒ | - Annually |
| ☐ | - Other (Specify) |

PANEL MANUFACTURER: Edwards MODEL NO: IO64
CIRCUIT CLASS: B
OF CIRCUITS: 7
SOFTWARE REV: 4.11
LAST DATE THAT SYSTEM HAD ANY SERVICE PERFORMED: On File

LAST DATE THAT ANY SOFTWARE OR CONFIGURATION WAS REVISED: On File

ALARM INITIATING DEVICES AND CIRCUIT INFORMATION

QTY OF	CIRCUIT CLASS	
<u>2</u>	<u>B</u>	MANUAL STATIONS
<u>1</u>	<u>B</u>	PHOTO DETECTORS
<u>5</u>	<u>B</u>	CO DETECTORS
<u>5</u>	<u></u>	DUCT DETECTORS
<u>0</u>	<u></u>	HEAT DETECTORS
<u>4</u>	<u>B</u>	WATERFLOW SWITCHES
<u>6</u>	<u>B</u>	SUPERVISORY SWITCHES
<u></u>	<u></u>	OTHER (SPECIFY) _____



NOTIFICATION APPLIANCES AND CIRCUIT INFORMATION

QTY OF	CIRCUIT CLASS	
<u>10</u>	<u>B</u>	SPEAKER/STROBES
		HORN/STROBES
		CHIMES
<u>3</u>	<u>B</u>	STROBES
		SPEAKERS
		OTHER (SPECIFY): _____

NOTIFICATION APPLIANCE CIRCUITS: 2

ARE ALL CIRCUITS SUPERVISED: ☒ YES ☐ NO

SUPERVISORY SIGNAL INITIATING DEVICES AND CIRCUIT INFORMATION

QTY OF	CIRCUIT CLASS	
<u>N/A</u>		BUILDING TEMPERATURE
<u>N/A</u>		SITE WATER TEMPERATURE
<u>N/A</u>		SITE WATER LEVEL
<u>N/A</u>		FIRE PUMP POWER
<u>N/A</u>		FIRE PUMP RUNNING
<u>N/A</u>		FIRE PUMP AUTO
<u>N/A</u>		FIRE PUMP OR FIRE PUMP CONTROLLER IN TROUBLE
<u>N/A</u>		FIRE PUMP PHASE REVERSAL
<u>N/A</u>		GENERATOR IN AUTO
<u>N/A</u>		GENERATOR OR CONTROLLER TROUBLE
<u>N/A</u>		SWITCH TRANSFER
<u>N/A</u>		GENERATOR RUNNING
<u>N/A</u>		OTHER (SPECIFY): _____

SIGNALING LINE CIRCUITS

Quantity and class (see NFPA 72, Table 3-6.1) for signaling line circuits connected to system:

QUANTITY: 1 CLASS: B

POWER SUPPLIES

a. Primary(Main) Nominal Voltage 120, Amps 6

Overcurrent Protection: Type Breaker, Amps 20

Location (Panel Number): Electric Room House Panel

Disconnecting Means Location: #2

b. Secondary (Standby):

12VDC x 2 Storage Battery Amp Hour Rating 7

Calculated capacity to operate system, in hours: 24

N/A Engine driven generator dedicated to the fire alarm system

Location of Fuel Storage N/A

TYPE BATTERY

☐	Dry Cell
☐	Nickel Cadmium
☒	Sealed Lead-Acid
☐	Other (Specify) _____

c. Emergency or standby system used as a backup to primary power supply, instead of using a secondary power supply:

N/A Emergency system describe in NFPA 70, Article 700

N/A Legally required standby described in NFPA, Article 701

N/A Optional standby system described in NFPA 70, Article 702, which also meets the performance requirements of Article 700 or 701.

PRIOR TO ANY TESTING

NOTIFICATIONS ARE MADE:

MONITORING ENTITY
BUILDING OCCUPANTS
BUILDING MANAGEMENT
OTHER (SPECIFY)
AHJ NOTIFIED OF ANY IMPAIRMENTS

YES	NO	WHO	TIME
☒			
☒			
☒			

SYSTEM TESTS AND INSPECTIONS

TYPE	VISUAL	FUNCTIONAL	COMMENTS
CONTROL PANEL	☒	☒	
INTERFACE EQ	☒	☒	
LAMPS/LED	☒	☒	
FUSES	☒	☒	
PRIMARY POWER SUPPLY	☒	☒	
TROUBLE SIGNALS	☒	☒	
DISCONNECT SWITCHES	☒	☒	
GROUND FAULT MONITORING	☒	☒	

SECONDARY POWER

TYPE	VISUAL	FUNCTIONAL	COMMENTS
BATTERY CONDITION	☒		
LOAD VOLTAGE		☒	
DISCHARGE TEST		☒	
CHARGER TEST		☒	
TRANSIENT SUPPRESSORS	☒		
REMOTE ANNUNCIATORS	☒	☒	

NOTIFICATION APPLIANCES

	VISUAL	FUNCTIONAL	COMMENTS
AUDIBLE	☒	☒	
VISUAL	☒	☒	
SPEAKERS			N/A
VOICE CLARITY			N/A
COMMENTS:			

EMERGENCY COMMUNICATION EQUIP

	VISUAL	FUNCTIONAL	COMMENTS
PHONE SET			N/A
PHONE JACKS			N/A
OFF-HOOK INDICATOR			N/A
AMPLIFIER(S)			N/A
TONE GENERATOR(S)			N/A
CALL IN SIGNAL			N/A
SYSTEM PERFORMANCE			N/A

INTERFACE EQUIPMENT

(SPECIFY) _____
(SPECIFY) _____
(SPECIFY) _____
(SPECIFY) _____

VISUAL	DEVICE OPERATION	SIMULATED OPERATION

SPECIAL HAZARD SYSTEMS

(SPECIFY) _____
(SPECIFY) _____

VISUAL	DEVICE OPERATION	SIMULATED OPERATION



(SPECIFY) _____

SPECIAL PROCEDURES: _____

COMMENTS: _____

ON/OFF PREMISIS MONITORING

	YES	NO	COMMENTS
ALARM SIGNAL	X		
ALARM RESTORAL	X		
TROUBLE SIGNAL	X		
TROUBLE RESTORAL	X		
SUPERVISORY SIGNAL	X		
SUPERVISORY RESTORAL	X		

NOTIFICATIONS THAT TESTING IS COMPLETE

	YES	NO	COMMENTS
BUILDING MANAGEMENT	X		
MONITORING AGENCY	X		
BUILDING OCCUPANTS	X		
OTHER (SPECIFY)			

THE FOLLOWING DID NOT OPERATE CORRECTLY: _____

SYSTEM RETURNED TO NORMAL OPERATION DATE: _____ TIME: _____

THIS TESTING WAS PERFORMED IN ACCORDANCE WITH APPLICABLE NFPA72 STANDARDS

NAME OF INSPECTOR: _____ Steve Nice

DATE: 2/7/2020

SIGNATURE: _____ Thomas Capie, SET, CFPS

NAME OF OWNER REPRESENTATIVE: _____ Kerry Dolan

DATE: 2/7/2020

SIGNATURE: _____

INSPECTOR: Russell Harris
JOB: Brick Plaza SECTION: Phase 1
TYPE OF WORK: Gravity Vault PERMIT #: PE-2102
WEATHER / TEMP: clear / 50's

DATE: Tues. 11/06/00
INSPECTION: Final C.O. (Gravity Vault)
LOCATION: 56 Chambers Edge Rd.
BLOCK: 468 & 671 LOT: 1-9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 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, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

**ENGINEERING RECOMMENDATIONS FOR
CERTIFICATION OF OCCUPANCY
INSPECTION CHECK LIST**

ITEMS TO BE COMPLETED	COMPLETED	DEFICIENT
1. Driveway	✓	
2. Grading	✓	
3. Sidewalk	✓	
4. Road Pavement	✓	
5. Landscaping & Sodding	✓	
6. Clean-up Procedures	✓	
7. Note on-going construction in immediate area	✓	
8. Safety	✓	
9. As Built Survey / Elevation Certificate	✓	

COMMENTS REFERENCING ITEM NUMBER:

RECOMMENDATIONS:

- ☐ TEMP. C.O.
☒ FINAL C.O.
☐ DETAILED REINSPECTION
☐ HOLD INSPECTION UNTIL LOT ELEVATION FIELD VERIFIED
☐ REQUIRES PERMIT UPDATE / ADDITIONAL PERMITS
☐ \$50.00 REINSPECTION FEE

Clifford C. Carrington
MUNICIPAL ENGINEER

Matthew Fagen

From: Susan Stanisz <sstanisz@brickmua.com>
Sent: Monday, November 16, 2020 2:30 PM
To: Matthew Fagen
Cc: Susan Stanisz
Subject: GRAVITY VAULT/BRICK PLAZA

Hi Matt. This account was already an Existing service. There are no Fees involved or permits needing a CC.

SUSAN M. STANISZ
CUSTOMER ACCOUNTS SENIOR CLERK
Brick Utilities
1551 HIGHWAY 88 WEST
BRICK, NJ 08724
732-458-7000 EXT.4284
732-458-5378 FAX
sstanisz@brickmua.com



APPLICATION FOR CERTIFICATE

Permit # 19-2149
Date Issued _____
Control # _____
Certificate Application Received: _____
Certificate Issued: _____

IDENTIFICATION

Work Site Location 56 CHAMBERS BRIDGE RD. SPACE #41 Block 671 Lot 1.01 Qualification Code _____
Owner in Fee GRAVITY VAULT
BEACH ROCKS, LLC Contractor PJR CONSTRUCTION GROUP, INC.
Address 35 EDGEWOOD AVE. Address 200 DANIELS WAY
LITTLE SILVER, NJ 07739 License No. _____ Tel. (732) 308-0335
Tel. (732) 856-9599 Federal Employee No. 47-5424815

ACTION

- ☒ CERTIFICATE OF OCCUPANCY
☐ CERTIFICATE OF CONTINUED OCCUPANCY
☐ LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
☐ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP _____ Previous A3 Current _____

FINAL COST OF CONSTRUCTION: \$ 255,000

(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

Describe below any substantive deviation in dimension, lay out or appearance of the building or structure from the released plans and specifications filed with the construction permit application. Please note, a set of amended drawings may be required.

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE: TENANT FIT-OUT FOR GRAVITY VAULT

I hereby attest that to the best of my knowledge, the completed project meets the conditions of the construction permit and all prior approvals, and all work has been completed substantially in accordance with the code and with those portions of the plans and specifications controlled by the code, with any substantial deviations noted. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: _____

OWNER/AGENT

☐ OWNER

☒ AGENT



NOTICE AND ORDER OF PENALTY

Permit/Control #: 19-2149
Date Issued: 11/6/2020
Violation #: V-20-00265

IDENTIFICATION

Work Site Location: 56 CHAMBERS BRIDGE RD. Brick Township, NJ

Block: 671 Lot: 1.01 Qualification Code: _____

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST %

Owner Address: PO BOX 92129 (ALTUS GROUP SOUTH LAKE TX 76092)

Agent/Contractor: PJR CONSTRUCTION GROUP LLC

Address: 200 DANIELS WAY FREEHOLD NJ 07728

To: ☒ Owner

☒ Other: FEDERAL REALTY INVESTMENT TRUST

☒ Agent/Contractor

ACTION

- ☐ On _____, you were found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder. A ☐ **Notice of Violation and Order to Terminate**, ☐ **Notice of Unsafe Structure**, ☐ **Notice of Imminent Hazard** was issued. Reinspection of the work site on _____ revealed the following violation(s) remain:

NJAC 5:23-2.23(a) Occupying a Structure Without a Certificate of Occupancy
Following an investigation, it is found that you have been occupying the space: 56 CHAMBERS BRIDGE RD prior to the issuance of a Certificate of Occupancy

- ☒ On 11/6/2020, you were found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder, in that you ☐ **made a false or misleading written statement, or omitted required required information in an application or request for approval; or** ☐ **failed to obtain a construction permit; or** ☐ **failed to request required inspections; or** ☒ **allowed occupancy prior to receiving a certificate of occupancy.**

- ☐ On _____, you were found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder. A **Stop Construction Order** was issued. Reinspection of the work site on _____ revealed a failure to comply with that **Stop Construction Order**.

PENALTY

Therefore, you are hereby **ORDERED** to pay a penalty in the amount of \$2,000.00 for each violation for a total penalty of \$2,000.00.

Further, take **NOTICE** that for each ☒ week ☐ day that any of the said violations remain outstanding after 11/20/2020 an additional penalty of \$2,000.00 per ☒ week ☐ day shall result

If you wish to contest this **ORDER**, you may request a hearing before the Construction Board of Appeals of the County of Ocean within 15 days of receipt of this **ORDER** as provided by N.J.A.C. 5:23 A-2.1. The Application of the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your name and address, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of your reliance on them. You may include a brief statement setting forth your position and the nature of the relief sought by you. You may also append any documents that you consider useful

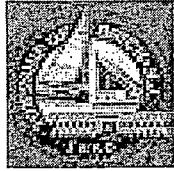
The fee for an appeal is \$100.00 and should be forwarded with your application to the Construction

Board of Appeals Office at: **CONSTRUCTION BOARD OF APPEALS**
PO Box 2191 #5 Mott Place
Toms River, NJ 08754-2191

If you have any questions concerning this matter, please call: (732) 262-1030

NOTICE and ORDER of PENALTY:

Daniel F. [Signature] Date: 11/6/20
Construction Official



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Construction Violation

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. GRAVITY VAULT Brick Township, NJ
Block: 671
Lot: 1.01
Owner: FEDERAL REALTY INVESTMENT TRUST %
Owner Address: 909 ROSE AVE SUITE 200 NORTH BETHESDA MD 20852
Telephone:
Agent: PJR CONSTRUCTION GROUP LLC
Agent Address: 200 DANIELS WAY FREEHOLD NJ 07728
Telephone: (732) 308-0335

Infraction Details

Tracking: V-20-00265
Subcode: Administrative
Issuing Officer: Daniel F Newman Jr Telephone: (732) 262-1030
Issue Date: 11/6/2020
Infraction: Notice and Order of Penalty
Statute: N.J.A.C. 5:23 Uniform Construction Code Regulations NJAC 5:23-2.23(a) Occupying a Structure Without a Certificate of Occupancy
Infraction Summary: Following an investigation, it is found that you have been occupying the space: 56 CHAMBERS BRIDGE RD prior to the issuance of a Certificate of Occupancy
Certified Mail Number: 7018 1130 0002 1073 7166

Enforcement Details

Inspection Date: 11/6/2020
Notice Date: 11/6/2020
Compliance Date: 11/20/2020
Compliance Inspection Date:
Compliance Summary: Must obtain all required inspections, all prior approvals, and must receive a final Certificate of Occupancy for new dwelling. Failure to comply will lead to additional enforcement action. Additional enforcement could include additional penalties or subpoenas to appear in Municipal Court.

Fines Details

Total Due:	\$2,000.00
Total Paid:	\$0.00
Total Owed:	\$2,000.00



NOTICE AND ORDER OF PENALTY

Permit/Control #: 19-2149
Date Issued: 11/6/2020
Violation #: V-20-00265

IDENTIFICATION

Work Site Location: 56 CHAMBERS BRIDGE RD. Brick Township, NJ

Block: 671 Lot: 1.01 Qualification Code: _____

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST %

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

Agent/Contractor: PJR CONSTRUCTION GROUP LLC

Address: 200 DANIELS WAY FREEHOLD NJ 07728

*mailed also to
Security Vault*

To: ☒ Owner

☒ Other: FEDERAL REALTY INVESTMENT TRUST

☒ Agent/Contractor

*909 Rose Ave Ste 200
N. Bethesda, MD 20852*

ACTION

☐ On _____, you were found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder. A ☐ **Notice of Violation and Order to Terminate**, ☐ **Notice of Unsafe Structure**, ☐ **Notice of Imminent Hazard** was issued. Reinspection of the work site on _____ revealed the following violation(s) remain:

NJAC 5:23-2.23(a) Occupying a Structure Without a Certificate of Occupancy
Following an investigation, it is found that you have been occupying the space: 56 CHAMBERS BRIDGE RD
prior to the issuance of a Certificate of Occupancy

☒ On 11/6/2020, you were found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder, in that you ☐ **made a false or misleading written statement, or omitted required required information in an application or request for approval; or** ☐ **failed to obtain a construction permit; or** ☐ **failed to request required inspections; or** ☒ **allowed occupancy prior to receiving a certificate of occupancy.**

☐ On _____, you were found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder. A **Stop Construction Order** was issued. Reinspection of the work site on _____ revealed a failure to comply with that **Stop Construction Order**.

PENALTY

Therefore, you are hereby **ORDERED** to pay a penalty in the amount of \$2,000.00 for each violation for a total penalty of \$2,000.00.

Further, take **NOTICE** that for each ☒ week ☐ day that any of the said violations remain outstanding after 11/20/2020 an additional penalty of \$2,000.00 per ☒ week ☐ day shall result

If you wish to contest this **ORDER**, you may request a hearing before the Construction Board of Appeals of the County of Ocean within 15 days of receipt of this **ORDER** as provided by N.J.A.C. 5:23 A-2.1. The Application of the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your name and address, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of your reliance on them. You may include a brief statement setting forth your position and the nature of the relief sought by you. You may also append any documents that you consider useful

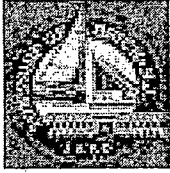
The fee for an appeal is \$100.00 and should be forwarded with your application to the Construction

Board of Appeals Office at: **CONSTRUCTION BOARD OF APPEALS**
PO Box 2191 #5 Mott Place
Toms River, NJ 08754-2191

If you have any questions concerning this matter, please call: (732) 262-1030

NOTICE and ORDER of PENALTY:

[Signature]
Construction Official Date: 11/6/20



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Construction Violation

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. GRAVITY VAULT Brick Township, NJ
Block: 671
Lot: 1.01
Owner: FEDERAL REALTY INVESTMENT-TRUST %
Owner Address: 909 ROSE AVE SUITE 200 NORTH BETHESDA MD 20852
Telephone:
Agent: PJR CONSTRUCTION GROUP LLC
Agent Address: 200 DANIELS WAY FREEHOLD NJ 07728
Telephone: (732) 308-0335

Infraction Details

Tracking: V-20-00265
Subcode: Administrative
Issuing Officer: Daniel F Newman Jr Telephone: (732) 262-1030
Issue Date: 11/6/2020
Infraction: Notice and Order of Penalty
Statute: N.J.A.C. 5:23 Uniform Construction Code Regulations NJAC 5:23-2.23(a) Occupying a Structure Without a Certificate of Occupancy
Infraction Summary: Following an investigation, it is found that you have been occupying the space: 56 CHAMBERS BRIDGE RD prior to the issuance of a Certificate of Occupancy
Certified Mail Number: 7018 1130 0002 1073 7166

Enforcement Details

Inspection Date: 11/6/2020
Notice Date: 11/6/2020
Compliance Date: 11/20/2020
Compliance Inspection Date:
Compliance Summary: Must obtain all required inspections, all prior approvals, and must receive a final Certificate of Occupancy for new dwelling. Failure to comply will lead to additional enforcement action. Additional enforcement could include additional penalties or subpoenas to appear in Municipal Court.

Fines Details

Total Due:	\$2,000.00
Total Paid:	\$0.00
Total Owed:	\$2,000.00

PJR

CONSTRUCTION GROUP, INC.

Phone: (732) 308-0335 Fax: (732) 308-0996 Web: www.PJRgroup.com

TO: Township of Brick
401 Chamberbridge Road
Brick, NJ 08723

ATTN: Building Department

DATE: August 8, 2019
Project Name: Gravity Vault Indoor Rock Gym

TRANSMITTAL

We are Sending

☒ **ATTACHED**

☒ Original
Prints
Seals
Information

UNDER SEPARATE COVER

Shop Drawings
Specifications
Test Reports
Survey
Change Order

Letter
Photocopies
Samples
Cut Sheets
Requisition

FOR:

☒ Approval
Review and Comment
Your Information

Distribution
Estimating
Construction

Reference
Per Your Request

THE FOLLOWING ACTION APPLIES:

☒ Approval
Approved As Noted
No Action Taken

Revise and Resubmit
Disapproved

Resubmit Copies for Approval
Submit Copies for Distribution

SENT VIA:

☒ Express Mail
☒ Hand Delivered
Pick-Up

Parcel Post
First Class Mail
Fedex

Our Messenger
FTP Site

Sent by: Martin Shelton, Executive Director of Construction

Prepared by: Jennifer Raffo

Number of Copies	Latest Revision	Sheet Number	Description	Original Date
			The Gravity Vault 56 Chambers Bridge Road Unit #41 Permit #19-2149	
1	1/9/2020		HVAC Balance Report	1/9/2020

FILE COPY

Received 8-21-20 JCK

Precision Balancing

395 Circle of Progress
Pottstown, PA 19464

Test, Adjust and Balance Report

Project:

GRAVITY VAULT
56 CHAMBERS BRIDGE RD.
BRICK, NJ

Date:

1.9.2020

ARCHITECT: KELLENYI JOHNSON
WAGNER

ENGINEER: DLB ASSOCIATES
CONTRACTOR: ALL AROUND MECH.

FILE COPY

REPORT CERTIFICATION

TEST, ADJUST AND BALANCE REPORT

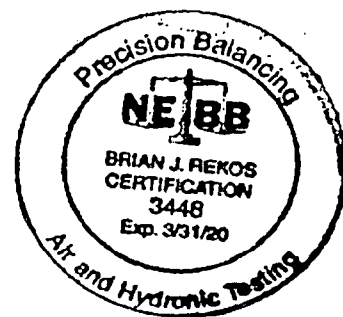
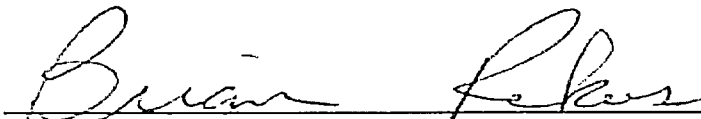
Date: 1.9.2020

Project: GRAVITY VAULT
56 CHAMBERS BRIDGE RD.
BRICK, NJ.

NEBB Supervisor: Brian Rekos
Certified Firm: Precision Balancing, Inc.
Certification #: 3448
Expiration Date: 3/31/2020, 12:00:00AM

"The data represented in this report is a record of system measurements and final adjustments that have been obtained in accordance with the current edition of the NEBB Procedural Standards For Testing, Adjusting and Balancing of Environmental Systems. Any variances from design quantities, which exceed NEBB tolerances, are noted in the Test-Adjust-Balance report project summary."

Signed:



Precision Balancing, Inc.

395 Circle of Progress
Pottstown, PA 19464

Intstruments used in this project

All Instruments were calibrated on 10/30/2019

1. Manotometer (electronic-digial).
2. Pitot tubes.
3. Surface mount thermometer (electronic-digital).
4. Insertion thermometers (electronic-digital).
5. Hot wire aenometer (electronic-digital).
6. Rotating vane anemometer (electronic-digital).
7. Clamp-on volt ammeter (electronic-digital).
8. Tachometers and tips (electronic-digital).
9. Hygrometer (electronic-digital).
10. Hydronic pressure gauge (Electric).
11. Taps, tubing, valves, cocks, rubber tubing and misc. items.
12. Flow hood-measure in direct CFM (electronic-digital).

Summary

1. All equipment was tested in normal operating conditions.
2. Not all return values add up to the duct layout due to Outside Air.

PRECISION BALANCING

301 CIRCLE OF PROGRESS
POTTSTOWN, PA 19464

SUPPLY AIR SYSTEMS

Air Moving Test Data Sheet, Three Phase Motors

Project: GRAVITY VAULT

Date: 1.9.2020

System: RTU-1

Fan Number	RTU-1			Location	ROOF TOP		
Serving	OPEN SPACE 100			Manufacturer	TRANE		
Model Number	YHD150G4RVB3GMW			Serial Number	191310979D		
	Design	Actual			Design	Actual	
Supply CFM	5000	5036		Fan RPM	N/A	N/A	
Return CFM	3500	3468		Motor RPM	1725	1721	
Outdoor Air CFM	1500	1568					
(Total) Static Press. In. WG	N/A	N/A		Measured Motor Amps And Volts			
Ext. Static Pressure In. WG	N/A	.4382				Nameplate	Actual
Ext. Suction Static Pressure In. WG	N/A	.1613		Voltage		460	486
Fan Suction Static Pressure In. WG	N/A	N/A		Amperage		4.6	3.0
Disch. Static Pressure In. WG	N/A	.2769		Voltage	484	L1	Amperage 3.2
Supply Airflow In Econ. Mode	N/A	N/A		Voltage	486	L2	Amperage 2.9
				Voltage	489	L3	Amperage 3.0
Motor Data From Nameplate and Motor Sheave Information				Unit Fan Data And Fan Sheave Information			
Motor Manufacturer		MARATHON		Fan Type/Size		CENTRIFUGAL	
Horsepower		3		Arrangement/Class		D.W. / D. I.	
Motor RPM		1725		Discharge		SIDE	
Frame Size		56HZ.		Fan Sheave Manufacturer		N/A	
Phase/Hertz		3/60		Sheave Part Number		N/A	
Nameplate Motor Voltage		460		Sheave Operating DIA		10-1/2"	
Nameplate Full Load Amps		4.6		Bore Size		1-1/8"	
Service Factor		1.15		Belt Manufacturer		CONTINENTAL	
Motor Sheave Manufacturer		N/A		Number of Belts		1	
Sheave Part Number		N/A		Belt Size		N/A	
Sheave Operating DIA		3-3/4"		Shaft To Shaft Centerline		17-1/2"	
Bore Size		7/8"		Min. Adjustment/Max. Adjustment		2 MIN 2 MAX	

Remarks:
Unit set up running at 60 hz.

Readings By: BRIAN REKOS

AIR OUTLET/INLET TEST SHEET

PROJECT: GRAVITY VAULT

INSTRUMENT USED: FLOW HOOD

DATE: 1.9.2020

TOTAL DESIGN AIRFLOW: 5000

SYSTEM DESIGNATION: RTU-1

SUPPLY

[illegible]

Comments:

Readings By: BRIAN REKOS

Air Moving Test Data Sheet, Three Phase Motors

Project: GRAVITY VAULT

Date: 1.9.2020

System: RTU-2

Fan Number	RTU-2		Location	ROOF TOP	
Serving	OPEN SPACE 100		Manufacturer	TRANE	
Model Number	YHD150G4RVB3GMW		Serial Number	191310978D	
	Design	Actual		Design	Actual
Supply CFM	5000	5235	Fan RPM	N/A	N/A
Return CFM	3500	3718	Motor RPM	1725	1717
Outdoor Air CFM	1500	1517			
(Total) Static Press. In. WG	N/A	N/A	Measured Motor Amps And Volts		
Ext. Static Pressure In. WG	N/A	.4195		Nameplate	Actual
Ext. Suction Static Pressure In. WG	N/A	.1537	Voltage		460 486
Fan Suction Static Pressure In. WG	N/A	N/A	Amperage		4.6 2.9
Disch. Static Pressure In. WG	N/A	.2658	Voltage	487	L1 Amperage 2.6
Supply Airflow In Econ. Mode	N/A	N/A	Voltage	486	L2 Amperage 2.9
			Voltage	486	L3 Amperage 3.1
Motor Data From Nameplate and Motor Sheave Information			Unit Fan Data And Fan Sheave Information		
Motor Manufacturer	MARATHON		Fan Type/Size	CENTRIFUGAL	
Horsepower	3		Arrangement/Class	D.W. / D. I.	
Motor RPM	1725		Discharge	SIDE	
Frame Size	56HZ.		Fan Sheave Manufacturer	N/A	
Phase/Hertz	3/60		Sheave Part Number	N/A	
Nameplate Motor Voltage	460		Sheave Operating DIA	10-1/2"	
Nameplate Full Load Amps	4.6		Bore Size	1-1/8"	
Service Factor	1.15		Belt Manufacturer	CONTINENTAL	
Motor Sheave Manufacturer	N/A		Number of Belts	1	
Sheave Part Number	N/A		Belt Size	N/A	
Sheave Operating DIA	3-3/4"		Shaft To Shaft Centerline	17-1/2"	
Bore Size	7/8"		Min. Adjustment/Max. Adjustment	2 MIN 2 MAX	
Remarks: Unit set up running at 60 hz.					
Readings By:			BRIAN REKOS		

AIR OUTLET/INLET TEST SHEET

PROJECT: GRAVITY VAULT

INSTRUMENT USED: FLOW HOOD

DATE: 1.9.2020

TOTAL DESIGN AIRFLOW: 5000

SYSTEM DESIGNATION: RTU-2

SUPPLY

[illegible]

Comments:

Readings By: BRIAN REKOS

Air Moving Test Data Sheet, Three Phase Motors

Project: GRAVITY VAULT

Date: 1.9.2020

System: RTU-3

Fan Number	RTU-3		Location	ROOF TOP	
Serving	OPEN SPACE 100		Manufacturer	TRANE	
Model Number	YHD150G4RVB3GMW		Serial Number	191310977D	
	Design	Actual		Design	Actual
Supply CFM	5000	4966	Fan RPM	N/A	N/A
Return CFM	3500	3492	Motor RPM	1725	1738
Outdoor Air CFM	1500	1474			
(Total) Static Press. In. WG	N/A	N/A	Measured Motor Amps And Volts		
Ext. Static Pressure In. WG	N/A	.3896		Nameplate	Actual
Ext. Suction Static Pressure In. WG	N/A	.1355	Voltage		460 482
Fan Suction Static Pressure In. WG	N/A	N/A	Amperage		4.6 3.0
Disch. Static Pressure In. WG	N/A	.2541	Voltage	482	L1 Amperage 2.8
Supply Airflow In Econ. Mode	N/A	N/A	Voltage	482	L2 Amperage 3.1
			Voltage	484	L3 Amperage 3.0
Motor Data From Nameplate and Motor Sheave Information			Unit Fan Data And Fan Sheave Information		
Motor Manufacturer	MARATHON		Fan Type/Size	CENTRIFUGAL	
Horsepower	3		Arrangement/Class	D.W. / D. I.	
Motor RPM	1725		Discharge	SIDE	
Frame Size	56HZ.		Fan Sheave Manufacturer	N/A	
Phase/Hertz	3/60		Sheave Part Number	N/A	
Nameplate Motor Voltage	460		Sheave Operating DIA	10-1/2"	
Nameplate Full Load Amps	4.6		Bore Size	1-1/8"	
Service Factor	1.15		Belt Manufacturer	CONTINENTAL	
Motor Sheave Manufacturer	N/A		Number of Belts	1	
Sheave Part Number	N/A		Belt Size	N/A	
Sheave Operating DIA	3-3/4"		Shaft To Shaft Centerline	17-1/2"	
Bore Size	7/8"		Min. Adjustment/Max. Adjustment	2 MIN 2 MAX	
Remarks: Unit set up running at 60 hz.					
Readings By:			BRIAN REKOS		

AIR OUTLET/INLET TEST SHEET

PROJECT: GRAVITY VAULT

INSTRUMENT USED: FLOW HOOD

DATE: 1.9.2020

TOTAL DESIGN AIRFLOW: 5000

SYSTEM DESIGNATION: RTU-3

SUPPLY

[illegible]

Comments:

Readings By: BRIAN REKOS

Air Moving Test Data Sheet, Three Phase Motors

Project: GRAVITY VAULT

Date: 1.10.2020

System: RTU-4

Fan Number	RTU-4			Location	ROOF TOP		
Serving	ENTRY / RECEPTION			Manufacturer	TRANE		
Model Number	YHC092F4RMA3GMV			Serial Number	191214502L		
	Design	Actual			Design	Actual	
Supply CFM	3000	3016		Fan RPM	N/A	N/A	
Return CFM	2100	2079		Motor RPM	N/A	N/A	
Outdoor Air CFM	900	937					
(Total) Static Press. In. WG	N/A	N/A		Measured Motor Amps And Volts			
Ext. Static Pressure In. WG	N/A	.5951				Nameplate	Actual
Ext. Suction Static Pressure In. WG	N/A	.2589		Voltage		460	481
Fan Suction Static Pressure In. WG	N/A	N/A		Amperage		3.6	2.5
Disch. Static Pressure In. WG	N/A	.3362		Volts	481	L1	Amps 2.5
Supply Airflow In Econ. Mode	N/A	N/A		Volts	482	L2	Amps 2.5
				Volts	479	L3	Amps 2.7
Motor Data From Nameplate							
Motor Manufacturer		RJ					
Horsepower		2.75					
Motor RPM		N/A					
Phase/Hertz		3/60					
Service Factor		1.15					
Remarks:							
Readings By:				Brian Rekos			

AIR OUTLET/INLET TEST SHEET

PROJECT: GRAVITY VAULT

INSTRUMENT USED: FLOW HOOD

DATE: 1.10.2020

TOTAL DESIGN AIRFLOW: 3000

SYSTEM DESIGNATION: RTU-4

SUPPLY

[illegible]

Comments:

Readings By: BRIAN REKOS

Air Moving Test Data Sheet, Three Phase Motors

Project: GRAVITY VAULT

Date: 1.10.2020

System: RTU-5

Fan Number	RTU-5			Location		ROOF TOP		
Serving	PARTY / MULTI PURPOSE			Manufacturer		TRANE		
Model Number	YHC092F4RMA3GMV			Serial Number		191214504L		
	Design	Actual				Design	Actual	
Supply CFM	3000	2958		Fan RPM		N/A	N/A	
Return CFM	2100	2073		Motor RPM		N/A	N/A	
Outdoor Air CFM	900	885						
(Total) Static Press. In. WG	N/A	N/A		Measured Motor Amps And Volts				
Ext. Static Pressure In. WG	N/A	.5872				Nameplate	Actual	
Ext. Suction Static Pressure In. WG	N/A	.2324		Voltage		460	484	
Fan Suction Static Pressure In. WG	N/A	N/A		Amperage		3.6	2.3	
Disch. Static Pressure In. WG	N/A	.3548		Volts	486	L1	Amps	2.5
Supply Airflow In Econ. Mode	N/A	N/A		Volts	484	L2	Amps	2.1
				Volts	479	L3	Amps	2.3
Motor Data From Nameplate								
Motor Manufacturer		RJ						
Horsepower		2.75						
Motor RPM		N/A						
Phase/Hertz		3/60						
Service Factor		1.15						
Remarks:								
Readings By:				Brian Rekos				

AIR OUTLET/INLET TEST SHEET

PROJECT: GRAVITY VAULT

INSTRUMENT USED: FLOW HOOD

DATE: 1.10.2020

TOTAL DESIGN AIRFLOW: 3000

SYSTEM DESIGNATION: RTU-5

SUPPLY

AREA SERVED	OUTLET NO.			CFM			AK	VELOCITY
		SIZE	TYPE	DESIGN	ACTUAL	PRELIM		
TRAINING 132	1	12X8	REG	225	231	154		
TRAINING 132	2	12X8	REG	250	226	187		
TRAINING 132	3	12X8	REG	225	210	121		
MULTI PURPOSE 130	4	24X24	DIFF	300	284	143		
MULTI PURPOSE 130	5	24X24	DIFF	200	208	165		
MULTI PURPOSE 130	6	24X24	DIFF	200	213	116		
MULTI PURPOSE 130	7	24X24	DIFF	200	187	106		
PARTY ROOM 128	8	24X24	DIFF	300	294	132		
PARTY ROOM 128	9	24X24	DIFF	300	276	176		
PARTY ROOM 128	10	24X24	DIFF	400	408	137		
PARTY ROOM 128	11	24X24	DIFF	400	421	172		
				3000	2958	1609		
RETURN								
TRAINING 132	1	24X24	REG	700	658	452		
MULTI PURPOSE 130	2	24X24	REG	900	862	176		
PARTY ROOM 128	3	24X24	REG	1400	553	853		
				3000	2073	1481		

Comments:

Readings By: BRIAN REKOS

PRECISION BALANCING

301 CIRCLE OF PROGRESS
POTTSTOWN, PA 19464

EXHAUST AIR SYSTEMS

Air Moving Test Data Sheet Single Phase Motors

Project: GRAVITY VAULT

Date: 1.10.2020

System: EF-1

Fan Number	EF-1			Location	CEILING		
Serving	TOILETS			Manufacturer	GREENHECK		
Model Number	G-095-VG-6-X			Serial Number	15852304		
	Design	Actual			Design	Actual	
Exhaust CFM	450	461		Fan RPM	NA	N/A	
				Number Of Speeds	VARI	MED.HI	
(Total)Static Press. In. WG	N/A	N/A		Measured Motor Amps And Volts			
Ext. Static Pressure In. WG	N/A	N/A			Nameplate	Actual	
Ext. Suction Static Pressure In. WG	N/A	N/A		Voltage	120	121.3	
Fan Suction Static Pressure In. WG	N/A	N/A		Amperage	2.2	1.4	
Disch. Static Pressure In. WG	N/A	N/A					
Motor Data From Nameplate							
Motor Manufacturer		GREENHECK					
Horsepower		1/6					
Motor RPM		1750					
Phase/Hertz		1/60					
Service Factor		1.15					
Remarks:							
				Readings By:		Brian Rekos	

AIR OUTLET/INLET TEST SHEET (FLOW HOOD)

PROJECT: GRAVITY VAULT

INSTRUMENT USED: FLOW HOOD

DATE: 1.10.2020

TOTAL DESIGN AIRFLOW: 450

SYSTEM DESIGNATION: EF-1

EXHAUST

[illegible]

Comments:

Readings By: BRIAN REKOS

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

THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors

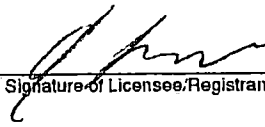
HAS LICENSED

JERSEY SHORE ELECTRICAL LLC
JOSEPH LAWROSKI
704 Atlantic Avenue
Point Pleasant Beach NJ 08742

FOR PRACTICE IN NEW JERSEY AS A(N): Electrical Business Permit

07/24/2019 TO 03/31/2021
VALID

34EB00849200
LICENSE/REGISTRATION/CERTIFICATION #


Signature of Licensee/Registrant/Certificate Holder


ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors
HAS LICENSED
JERSEY SHORE ELECTRICAL LLC
Electrical Business Permit

07/24/2019 TO 03/31/2021
VALID

34EB00849200
License/Registration/Certificate #

SIGNATURE

ACTING DIRECTOR

PLEASE DETACH HERE
IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Board of Examiners of Electrical Con-
P.O. Box 45006
Newark, NJ 07101

PLEASE DETACH HERE



PERMIT UPDATE

Date Update Issued 8/14/19
Control # C-19-000989+B
Permit # +B

19.2149

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. Brick Township, NJ Contractor PJR CONSTRUCTION GROUP LLC
Owner in Fee FEDERAL REALTY INVESTMENT TRUST % Address 200 DANIELS WAY FREEHOLD NJ 07728
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX Telephone: (732) 308-0335
76092 Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ Federal Employee No. _____

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:

TENANT FIT UP - GRAVITY VAULT UPDATE +B - FIRE ALARM DEVICES

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 \$16,000

Construction Official

Date

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	\$150
Plumbing	\$0
Fire Protection	\$175
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$30
CO Fee	
Other	\$0
Total	<u>109</u> \$355
Check No.	
Cash	\$0
Credit	<u>CW</u> \$0
Collected By	

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 UPDATE

Date Update Issued 8/14/19
 Control # C-19-000989+A
 Permit # +A
19-2149

IDENTIFICATION: Block: 671 Lot: 1.01 Qualifier _____
 Work Site Location: 56 CHAMBERS BRIDGE RD. Brick Township, NJ Contractor PJR CONSTRUCTION GROUP LLC
 Address 200 DANIELS WAY FREEHOLD NJ 07728
 Owner in Fee FEDERAL REALTY INVESTMENT TRUST %
PO BOX 92129 (ALTUS GROUP SOUTH LAKE TX
76092 Telephone: (732) 308-0335
 Lic. No. or Bldrs. Reg. No. _____
 Federal Employee No. _____

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:

TENANT FIT UP - GRAVITY VAULT ... UPDATE +A - 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 \$6,000

D. Neumann
 Construction Official

8/12/19
 Date

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	\$0
Fire Protection	\$175
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$11
CO Fee	
Other	\$0
Total	<u>109</u> \$186
Check No.	
Cash	\$0
Credit	\$0
Collected By	<u>CW</u>

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.



CONSTRUCTION PERMIT

Date Issued 8/14/19
Control # C-19-000989
Permit # 19-2149

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. Brick Township, NJ Contractor PJR CONSTRUCTION GROUP LLC
Owner in Fee FEDERAL REALTY INVESTMENT TRUST % Address 200 DANIELS WAY FREEHOLD NJ 07728
PO BOX 92129 (ALTUS GROUP SOUTHLAKE TX Telephone: (732) 308-0335
76092 Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ Federal Employee No. _____

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:

TENANT FIT UP - GRAVITY VAULT

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 \$233,000

D. Dorman Jr.
Construction Official

8/12/19
Date

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	\$6,250
Electrical	\$365
Plumbing	\$234
Fire Protection	\$116
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$444
CO Fee	\$150.00
Other	\$0
Total	\$7,559
Check No.	<u>109</u>
Cash	\$0
Credit	\$0
Collected By	<u>CW</u>

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.

RECEIVING CLERK WPPDATE REC'D 8/14/19

ZONING PERMIT APPLICATION

PERMIT # 2P-9-00898DATE ISSUED 8/14/19BLOCK: 671 LOT: 1.01 QUALIFIER: — SITE ADDRESS: Chambers Bridge Rd & Route 70Brick Plaza

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 75-OTHER: \$ —TOTAL: \$ 75-

REQUIRED BY APPLICANT

RESIDENTIAL: —COMMERCIAL: XEXISTING USE: COMMERCIALPROPOSED USE: A3BOARD APPROVAL: — PB — ZBRESOLUTION#: —APPROVAL DATE: —IDENTIFICATION: Brick Plaza Space 41-Tenant Fitout for Gravity Vault Climbing Gym1. NAME OF OWNER IN FEE: Federal Realty Investment TrustCOMPLETE ADDRESS: 50 E. Wynnewood RdWynnewood, PA 19096PHONE # 484-419-1208 EMAIL: ncain@federalrealty.com2. NAME OF APPLICANT: The Gravity VaultAPPLICANT ADDRESS: 107 Pleasant Ave.Upper Saddle River, NJ 07548PHONE # 732-856-9599 EMAIL: Sam.wright@gravityvault.com3. RESPONSIBLE PERSON FOR WORK: GC TBD Architect: Eric WagnerPHONE # 732-741-5270 FAX # 732-741-8439ewagner@kfw.com4. SIGNATURE OF APPLICANT: W22

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: —DESCRIPTION: Interior Tenant Fitout of landlord's shell for a Climbing Gym

ZONING REVIEW:

DATE REVIEWED: 8-14-19 DATE DENIED: — DATE APPROVED: 8-14-19 INTLS: cu

(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.

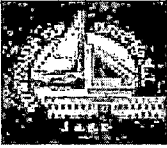
2) Two copies of the plans with dimensions and heights noted:

- 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



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1041

Date Issued:

Application Number: 8/14/19
ZA-19-00333

Application Date: 3/28/2019

Project Number:

Permit Number:

Fee:

ZP-19-00898

\$75.00

Zoning Permit

Worksite **56 CHAMBERS BRIDGE RD.**
Location: **Brick Township, NJ 08723**

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

Applicant: **The Gravity Vault**
Address: **107 Pleasant Avenue**
Upper Saddle River, NJ 07548

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: Nightclub

☐ Non Conforming Use

☐ Non Conforming Structure

Proposed Use: Commercial Recreation (Gravity Vault)

Work Description:

Rehabilitation, Tenant Fit-Up - Interior alterations for new tenant. Changing from The Mansion to "Gravity Vault."

Resolution of Approval by the Brick Twp. Zoning Board of Adjustment. BA-3089-D-3/18 / R-36-18
June 20, 2018 (Height Variance Relief for Space 41)

Additional Zoning Permit is required for additional work and signage.

Application Approved Date: 4/1/2019

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

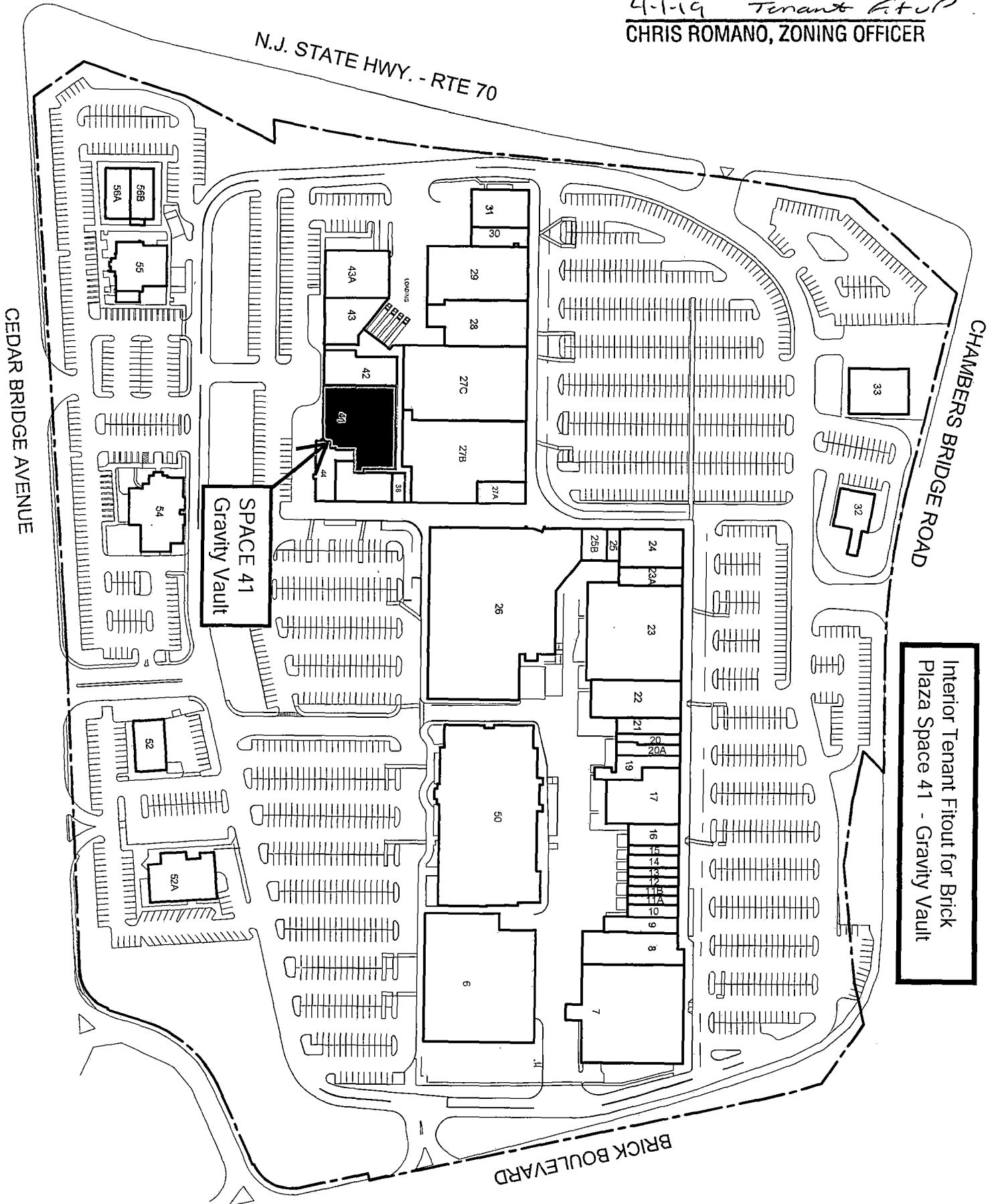
☐ Zoning Officer

Christopher J. Romano, Zoning Officer

4/1/2019

Date

APPROVED FOR ZONING
4-1-19 *Tenant Fitout*
CHRIS ROMANO, ZONING OFFICER





QUICK RESPONSE AUTOMATIC SPRINKLERS GL SERIES RECESSED PENDENT RECESSED HORIZONTAL SIDEWALL

DESCRIPTION AND OPERATION

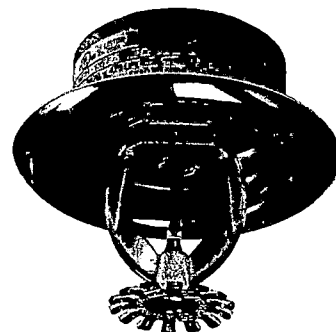
The Globe Quick Response Series GL-QR Sprinkler is a low profile yet durable design which utilizes a 3mm frangible glass ampule as the thermosensitive element. This provides sprinkler operation approximately six times faster than ordinary sprinklers. While the Quick Response Sprinkler provides an aesthetically pleasing appearance, it can be installed wherever standard spray sprinklers are specified but offers the additional feature of greatly increased safety to life. 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.

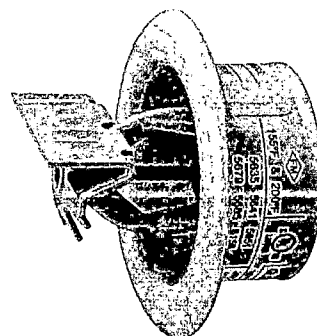
The sprinkler and escutcheon are not factory assembled. Assembly is done in the field.

TECHNICAL DATA

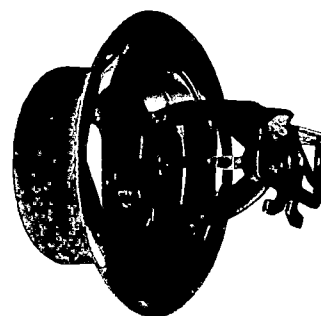
- See reverse side for Approvals and Specifications.
- Temperature Ratings - 135°F (57°C), 155°F (68°C), 175°F (79°C), 200°F (93°C), 286°F (141°C)
- Water Working Pressure Rating - 175 psi (12 Bars)
- Factory tested hydrostatically to 500 psi (34 Bars)
- Maximum low temperature glass bulb rating is -67°F (-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
- Escutcheon Assembly - steel



**SERIES GL-QR
RECESSED PENDENT**



**SERIES GL-QR/SW
RECESSED
HORIZONTAL SIDEWALL**



**SERIES GL-QR/SW
LPCB/CE RECESSED
HORIZONTAL SIDEWALL**

•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 GL SERIES RECESSED PENDENT RECESSED HORIZONTAL SIDEWALL 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.

¹HORIZONTAL SIDEWALL IS 2 9/16".

²FINISHES AVAILABLE ON SPECIAL ORDER.

³AVAILABLE 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	MIN. DISTANCE BETWEEN SPRINKLERS Feet (Meters)
				135°F (57°C)	155°F (68°C)	175°F (79°C)	200°F (93°C)	**286°F (141°C)						
RECESSED PENDENT	GL2801	2.8	LH	X	X	X	X	X	X	---	---	---	X	6 (1.8)
	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* (1/2" 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	
RECESSED 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	
	GL5627#	5.6	LH/OH	X	X	X	X	X	---	---	X	X	---	
	GL8127§	8.0	LH/OH	X	X	X	X	X	X	---	---	---	---	

¹SPRINKLERS SHALL BE LIMITED AS PER THE REQUIREMENTS OF NFPA13 AND ANY OTHER RELATED DOCUMENTS.

²HORIZONTAL SIDEWALL cULus LISTED FOR DEFLECTOR 4" TO 12" BELOW THE CEILING, FM APPROVED 4" TO 6" BELOW THE CEILING.

³INSTALL IN ACCORDANCE TO BS5306 AND ANY OTHER RELATED DOCUMENTS.

⁴1/2" ADJUSTABLE RECESSED ESCUTCHEONS ARE REQUIRED FOR FM APPROVED SPRINKLERS.

⁵LPCB REF. NO. 147c/05

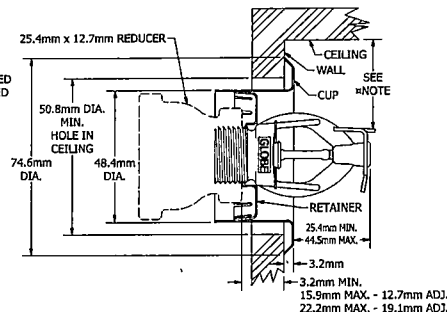
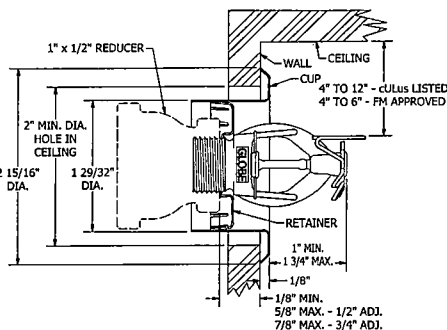
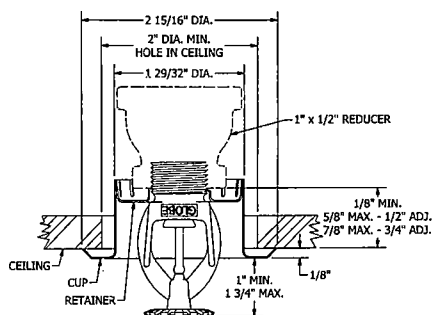
⁶**286°F (141°C) LPCB & cULus LISTED ONLY

⁷BRASS FINISH ONLY

OH: ORDINARY HAZARD

LH: LIGHT HAZARD

⁸1/2" NPT FOR RETROFIT ONLY



FRICTION FIT RECESSED ESCUTCHEON PART NUMBERS				
	WHITE 1/2" ADJUSTABLE	CHROME 1/2" ADJUSTABLE	WHITE 3/4" ADJUSTABLE	CHROME 3/4" ADJUSTABLE
1/2"NPT	332073W	332071	325426W	325422
3/4"NPT	326042W	326040	325427W	325423

ORDERING INFORMATION

- SPECIFY
- Quantity • SIN • Style • Orifice
 - Thread Size • Temperature • Finishes desired
 - Quantity - Wrenches - P/N 325391 (1/2"); P/N 325401 (3/4")
 - Quantity - Protective Caps - P/N 327109-CAP (Friction Fit Recessed)

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
MAR 2018

PRINTED U.S.A.

4077 AIRPARK DRIVE, STANDISH, MICHIGAN 48658
989-846-4583 FAX 989-846-9231
1-800-248-0278 www.globesprinkler.com
GFS-100e (Formerly A-24)



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.

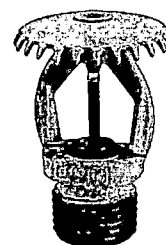
The heart of Globe's Series GL-QR sprinkler proven actuating assembly is a hermetically sealed frangible glass ampule that contains a precisely measured amount of fluid. When heat is absorbed, the liquid within the bulb expands increasing the internal pressure. At the prescribed temperature the internal 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.

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

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
SERIES GL-QR
UPRIGHT**



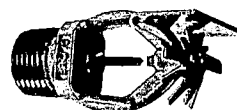
**QUICK RESPONSE
SERIES GL-QR/CNV
CONVENTIONAL**



**QUICK RESPONSE
SERIES GL-QR
PENDENT**



**QUICK RESPONSE
SERIES GL-QR/SW
VERTICAL
SIDEWALL**



**QUICK RESPONSE
HORIZONTAL
SIDEWALL
SERIES GL-QR/SW**



**QUICK RESPONSE
LPCB/CE
HORIZONTAL
SIDEWALL
SERIES GL-QR/SW**

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.

¹HORIZONTAL SIDEWALL IS 2 9/16".

²FINISHES AVAILABLE ON SPECIAL ORDER.

³AVAILABLE 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* (1/2" 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* (1/2" 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	---

¹SPRINKLERS 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).



PRINTED U.S.A.

4077 AIRPARK DRIVE, STANDISH, MICHIGAN 48658
989-846-4583 FAX 989-846-9231
1-800-248-0278 www.globesprinkler.com

GFS-100a (Formerly A-20)



QUICK RESPONSE AUTOMATIC SPRINKLERS GL SERIES RECESSED PENDENT RECESSED HORIZONTAL SIDEWALL

DESCRIPTION AND OPERATION

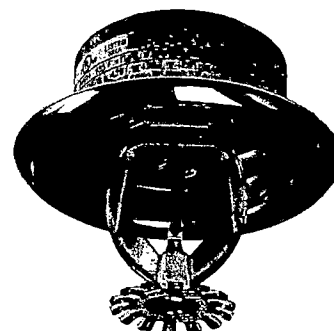
The Globe Quick Response Series GL-QR Sprinkler is a low profile yet durable design which utilizes a 3mm frangible glass ampule as the thermosensitive element. This provides sprinkler operation approximately six times faster than ordinary sprinklers. While the Quick Response Sprinkler provides an aesthetically pleasing appearance, it can be installed wherever standard spray sprinklers are specified but offers the additional feature of greatly increased safety to life. 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.

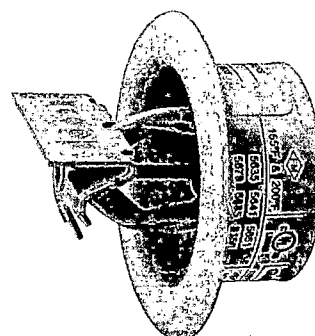
The sprinkler and escutcheon are not factory assembled. Assembly is done in the field.

TECHNICAL DATA

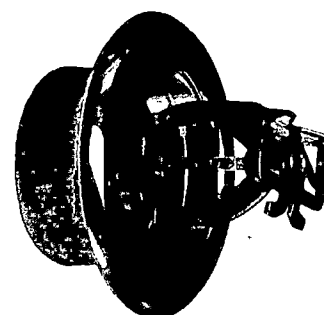
- See reverse side for Approvals and Specifications.
- Temperature Ratings - 135°F (57°C), 155°F (68°C), 175°F (79°C), 200°F (93°C), 286°F (141°C)
- Water Working Pressure Rating - 175 psi (12 Bars)
- Factory tested hydrostatically to 500 psi (34 Bars)
- Maximum low temperature glass bulb rating is -67°F (-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
- Escutcheon Assembly - steel



**SERIES GL-QR
RECESSED PENDENT**



**SERIES GL-QR/SW
RECESSED
HORIZONTAL SIDEWALL**



**SERIES GL-QR/SW
LPCB/CE RECESSED
HORIZONTAL SIDEWALL**

•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 GL SERIES RECESSED PENDENT RECESSED HORIZONTAL SIDEWALL SPECIFICATIONS

NOMINAL "K" FACTOR	THREAD SIZE	LENGTH ¹	FINISHES
2.8 (40 metric)	1/2"NPT (15mm)	2 1/4" (5.7cm)	Factory Bronze
4.2 (60 metric)	1/2"NPT (15mm)	2 1/4" (5.7cm)	Chrome
5.6 (80 metric)	1/2"NPT (15mm)	2 1/4" (5.7cm)	White Polyester ³
8.0 (115 metric)	1/2"NPT (15mm)	2 1/4" (5.7cm)	Black Polyester ^{2,3}
8.0 (115 metric)	3/4"NPT (20mm)	2 7/16" (6.2cm)	

NOTE: METRIC CONVERSIONS ARE APPROXIMATE.

¹HORIZONTAL SIDEWALL IS 2 9/16".

²FINISHES AVAILABLE ON SPECIAL ORDER.

³AVAILABLE 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	MIN. DISTANCE BETWEEN SPRINKLERS Feet (Meters)
				135°F (57°C)	155°F (68°C)	175°F (79°C)	200°F (93°C)	**286°F (141°C)						
RECESSED PENDENT	GL2801	2.8	LH	X	X	X	X	X	X	---	---	---	X	6 (1.8)
	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* (1/2" 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	
RECESSED 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	
	GL5627¶	5.6	LH/OH	X	X	X	X	X	---	---	X	X	---	
	GL8127§	8.0	LH/OH	X	X	X	X	X	X	---	---	---	---	

¹SPRINKLERS SHALL BE LIMITED AS PER THE REQUIREMENTS OF NFPA13 AND ANY OTHER RELATED DOCUMENTS.

²HORIZONTAL SIDEWALL cULus LISTED FOR DEFLECTOR 4" TO 12" BELOW THE CEILING, FM APPROVED 4" TO 6" BELOW THE CEILING.

³INSTALL IN ACCORDANCE TO BS5306 AND ANY OTHER RELATED DOCUMENTS.

^{††}1/2" ADJUSTABLE RECESSED ESCUTCHEONS ARE REQUIRED FOR FM APPROVED SPRINKLERS.

²LPCB REF. NO. 147c/05

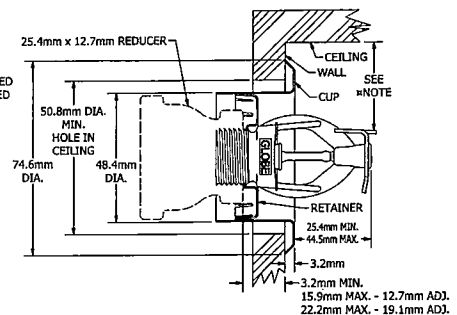
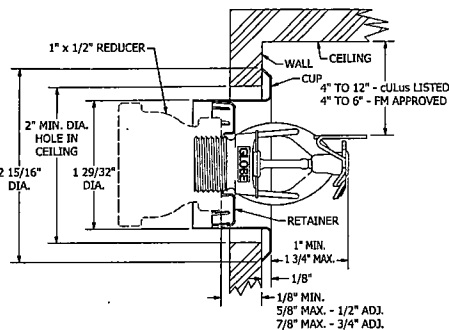
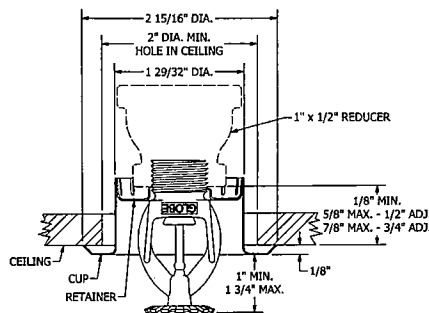
^{**}286°F (141°C) LPCB & cULus LISTED ONLY

[§]BRASS FINISH ONLY

OH: ORDINARY HAZARD

LH: LIGHT HAZARD

[¶]1/2" NPT FOR RETROFIT ONLY



FRICTION FIT RECESSED ESCUTCHEON PART NUMBERS				
	WHITE 1/2" ADJUSTABLE	CHROME 1/2" ADJUSTABLE	WHITE 3/4" ADJUSTABLE	CHROME 3/4" ADJUSTABLE
1/2"NPT	332073W	332071	325426W	325422
3/4"NPT	326042W	326040	325427W	325423

ORDERING INFORMATION

- SPECIFY**
- Quantity • SIN • Style • Orifice
 - Thread Size • Temperature • Finishes desired
 - Quantity - Wrenches - P/N 325391 (1/2"); P/N 325401 (3/4")
 - Quantity - Protective Caps - P/N 327109-CAP (Friction Fit Recessed)

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
MAR 2018

PRINTED U.S.A.

4077 AIRPARK DRIVE, STANDISH, MICHIGAN 48658
989-846-4583 FAX 989-846-9231
1-800-248-0278 www.globesprinkler.com
GFS-100e (Formerly A-24)



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.

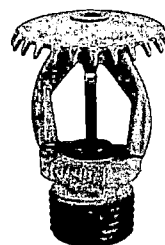
The heart of Globe's Series GL-QR sprinkler proven actuating assembly is a hermetically sealed frangible glass ampule that contains a precisely measured amount of fluid. When heat is absorbed, the liquid within the bulb expands increasing the internal pressure. At the prescribed temperature the internal 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.

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

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
SERIES GL-QR
UPRIGHT**



**QUICK RESPONSE
SERIES GL-QR/CNV
CONVENTIONAL**



**QUICK RESPONSE
SERIES GL-QR
PENDENT**



**QUICK RESPONSE
SERIES GL-QR/SW
VERTICAL
SIDEWALL**



**QUICK RESPONSE
HORIZONTAL
SIDEWALL
SERIES GL-QR/SW**



**QUICK RESPONSE
LPCB/CE
HORIZONTAL
SIDEWALL
SERIES GL-QR/SW**

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.

¹HORIZONTAL SIDEWALL IS 2 9/16".

²FINISHES AVAILABLE ON SPECIAL ORDER.

³AVAILABLE 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* (1/2" 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* (1/2" 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	---

¹SPRINKLERS 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).



MAR 2018

PRINTED U.S.A.

4077 AIRPARK DRIVE, STANDISH, MICHIGAN 48658
989-846-4583 FAX 989-846-9231
1-800-248-0278 www.globesprinkler.com

GFS-100a (Formerly A-20)

TEST REPORT

FOR

Rockwerx, Inc.

15 Dana Road
Barre, MA 01005

**Standard Test Method for
Surface Burning Characteristics of Building Materials
ASTM E84-16**

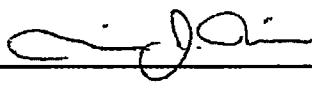
Test Report No: FH-2746

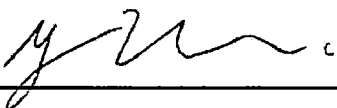
Assignment No: H-1307

Test Date: 04/24/2017

Report Date: 04/27/2017

Subject Material: Rockwerx GRL

Prepared by: 
Michael J. Rizzo
Senior Test Engineer

Reviewed by: 
Robert J. Menchetti
Director, Laboratory Facilities and Testing Services

The results reported in this document apply to specific samples submitted for measurement. No responsibility is assumed for the performance of any other specimen. The laboratory's test report in no way constitutes or implies product certification, approval or endorsement by this laboratory. This report may not be reproduced, except in full, without the written approval of the laboratory.

TEST REPORT REVISION HISTORY:

DATE	SUMMARY
April 27, 2017	Original issue date. Original NGCTS report FH-2746.

INTRODUCTION:

This report presents the results of a specimen tested in accordance with the requirements of ASTM E84-16 Standard Test Method for Surface Burning Characteristics of Building Materials. This test method is also published under the designations UL 723 and NFPA 255.

The purpose of this test method is to determine the relative behavior of the material by observing the flame spread along the specimen. Flame spread and smoke developed indexes are reported. However, there is not necessarily a relationship between these two measurements.

This standard is used to measure and describe the response of materials, products, or assemblies to heat and flame under controlled laboratory conditions. It should not alone be used for fire hazard or fire risk assessment of the materials, products, or assemblies under actual fire conditions.

TEST SPECIMEN:

The test specimen was submitted directly to NGC Testing Services (NGCTS) for testing by the client. The test specimen, which was received in good condition by NGCTS on April 18, 2017, was identified by the client as:

Rockwerx GRL

The test specimen was submitted by the client as eight (8) panels, each consisting of a coated/painted, textured surface covering a plywood base. Each panel measured nominally 3/4 in. thick by 24 in. wide by 48 in. long.

Upon receipt, the test specimen panels were placed in a conditioning room where they remained in an atmosphere of $73.4 \pm 5^{\circ}\text{F}$ and $50 \pm 5\%$ relative humidity for 6 days to condition to constant weight prior to testing.

Immediately prior to testing, NGCTS personnel randomly selected six (6) of the eight (8) submitted test specimen panels for testing, fulfilling the test specimen size requirement of the standard.

MOUNTING METHOD:

The (6) selected test specimen panels were placed end-to-end, directly on the tunnel ledges (coated/painted, textured surfaces exposed to the burner flames), and butted tightly together to achieve the required specimen length. No additional support was required.

Non-combustible, fiber-reinforced cement board (1/4 in. thick) was placed over the "back" side of the test specimen panels as lid protection.

TEST RESULTS:

The test results, computed on the basis of observed flame front advance and electronic smoke density measurements are presented in the following table.

The reported flame spread and smoke developed indices, as presented in the table below, are the computed comparison to the standard calibration materials – mineral fiber-reinforced cement board and select grade red oak flooring. The cement board is used to establish relative 0 values for flame spread and smoke developed; the red oak flooring is used to establish relative 100 values for flame spread and smoke developed.

<u>TEST NO.</u>	<u>MATERIAL TESTED</u>	<u>SIDE EXPOSED</u>	<u>SUPPORT</u>	<u>CALCULATED FLAME SPREAD</u>	<u>CALCULATED SMOKE DEVELOPED</u>	
1	Rockwerx GRL	Coated/Painted	Self-Supporting	192.08	66.65	
<u>MATERIAL TESTED</u>			<u>SIDE EXPOSED</u>	<u>SUPPORT</u>	<u>FLAME SPREAD INDEX (FSI) *</u>	<u>SMOKE DEVELOPED INDEX (SDI) *</u>
RED OAK FLOORING		Finished	Self-Supporting	100	100	
REINFORCED CEMENT BOARD		Symmetrical	Self-Supporting	0	0	
1	Rockwerx GRL	Coated/Painted	Self-Supporting	190	65	
			<u>CLASSIFICATION</u>	<u>FSI</u>	<u>SDI</u>	
* Flame Spread / Smoke Developed Index is the result (or the average of the results of multiple tests), rounded to the nearest multiple of 5. Smoke developed results in excess of 200 are rounded to the nearest multiple of 50.			CLASS A or I	0 - 25	0 - 450	
			CLASS B or II	26 - 75	0 - 450	
			CLASS C or III	76 - 200	0 - 450	

Fire Testing Laboratory

ADC DRAFT (IN. H₂O) 0.080
GAS PRESS. (IN. H₂O) 0.285
GAS VOL (CF) 49.83
BTU/cf 1017
SHUTTER (IN.) 3.00
TEMP. 13' BURIED 106 F

Flame Spread: 192.08
Area under Flame Curve (ft-min): 169.49

TEST#: FH-2746

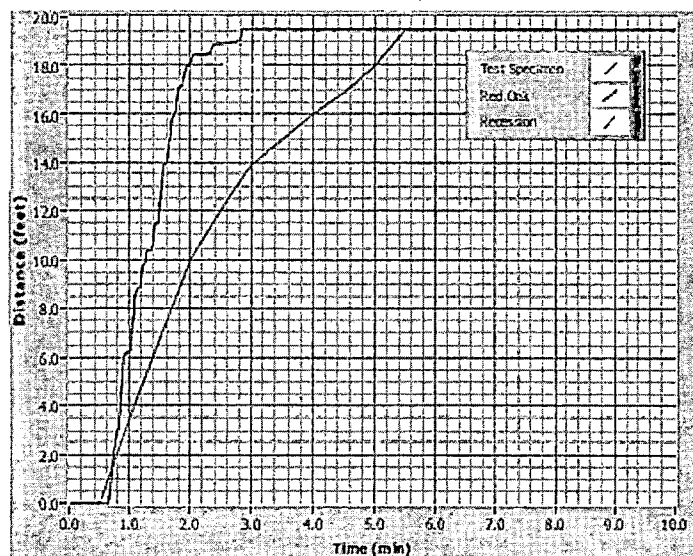
DATE: 4/24/2017

TEST METHOD: ASTM E84-16

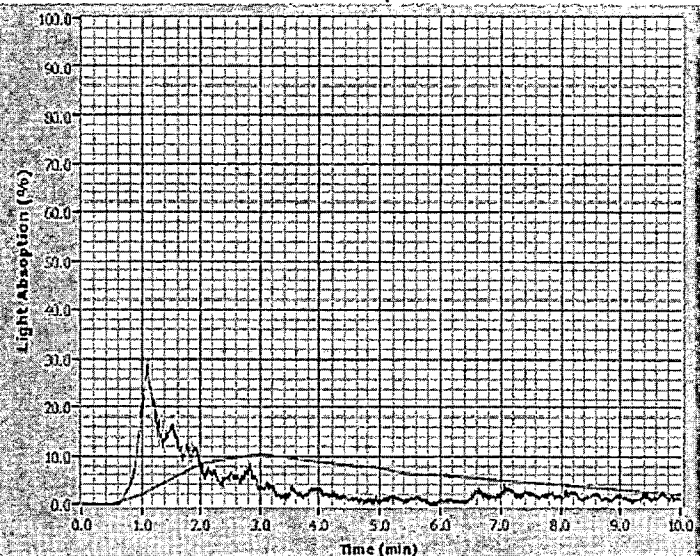
CLIENT: Rockwerx
PROJECT#: H-1307
SAMPLE: Rockwerx GRL
MATERIAL: (6) 3/4" x 24" x 48"
SUPPORT: Self-Supporting
REMARKS: Ignition Time: 0:33
Max Flame Front: 19.50 FT. @ 2:50

Smoke Developed: 66.65
Area under Smoke Curve (%A-min): 34.25

Flame Spread



Smoke Developed



The following data sheet is an actual printout of the computerized data system which monitors the tunnel furnace. The sheet contains all calibration and specimen data needed to calculate the test results.



**KELLENYI
JOHNSON
WAGNER**

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

June 26, 2019

Richard Orlando, Fire Subcode Official
Brick Township Construction Department
401 Chambers Bridge Rd
Brick, NJ 08723

Re: Block 671, Lot 1.01
Permit Control #C-19-000989
Brick Plaza Shopping Center
56 Chambers Bridge Road (KJW #2715.3b)

Dear Mr Orlando:

I am in receipt of your Fire Subcode Plan Review Comments dated 4/25/19 for the Gravity Vault climbing gym. I offer the following item by item responses:

1- Need permit update with plans, specs and hydraulic calculations for fire suppression system.

Response: Signed and sealed fire suppression plans will be submitted by the fire sprinkler company – Premier Fire Systems.

2. Need permit update with plans and specs for the fire alarm system.

Response: Signed and sealed fire alarm system plans and specifications will be submitted by the fire alarm company – ESS Fire Systems.

3. a) A front door annunciator panel for the fire alarm is required b) as well as an exterior horn & strobe.

Response: a) Signed and sealed fire alarm system plans and specifications will be submitted by the fire alarm company – ESS Fire Systems. These comments will address the annunciator panel.

b) Engineer has added an exterior horn & strobe – refer to revised sheet E102, attached.

4. All RTU duct Detectors shall be connected to the fire alarm system...

Response: The fire Alarm Matrix has been revised to show that activation of RTU duct detectors will report a SUPERVISORY signal, see attached revised E001. The requirement for RTU duct detectors to have a remote test / reset is noted in the Fire Alarm General Notes on Sheet G-001, and the Fire Alarm Riser Diagram on Sheet E-001. The location of remote test / reset stations (keyed) shall be determined by the fire alarm contractor and be provided on signed & sealed shop drawing submittals for your review and approval.

5. A fire department knox box is required.

Response: Owner agrees to install a know box. At the appropriate time during construction the contractor will meet with the appropriate Brick Township officials to select the desired location for this know box.

J Robert Johnson
Eric L Wagner
Richard R Kane

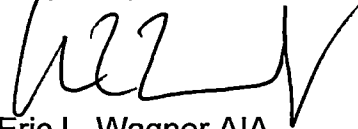


6. Please provide specification sheets as to construction of rock walls with regard to flammability.

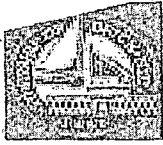
Response: The climbing wall supplier has submitted a flammability test report for the climbing walls – see attached.

Attached are two full sets of signed and sealed plans for this project. We have marked all revised sheets on the sheet index on the Cover Sheet for clarification. Please feel free to contact me with any additional concerns regard this matter.

Very Truly Yours

A handwritten signature in black ink, appearing to read 'ELW', followed by a long horizontal line and a checkmark-like flourish.

Eric L. Wagner AIA
NJ License #AI-10366



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

Subcode Official Review

Date: Thursday, April 25, 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: Control Number: C-19-000989
Last Submit Date: Wednesday, April 24, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

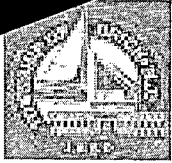
Your request is hereby denied based upon the following infractions.

1. Need permit update, plan, and specifications including hydraulic calculations for the fire sprinkler system. Please include copy of NJ fire suppression license. Plan is architectural rendering.
2. Need permit update, plan, and specifications for the fire alarm system. Please include copy of NJ Fire Alarm installer license. Plan is architectural rendering.
3. A front door annunciator panel for fire alarm is required as well as an exterior horn strobe.
4. All any RTU duct detectors shall be connected to the fire alarm system and shall report as SUPERVISORY only. Remote key resets required due to ceiling height.
5. A fire department knox box is required.
6. Please provide specification sheets as to construction of rock walls with regard to flammability.

Sincerely,

Richard Orlando, Subcode Official

CC:



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

Subcode Official Review

Date: Thursday, August 1, 2019

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

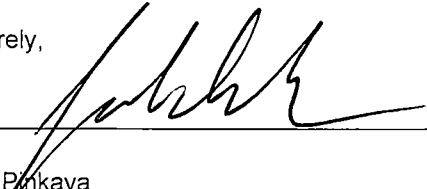
RE: Building Subcode
Block: 671 Lot: 1-01 Qual:
56 CHAMBERS BRIDGE RD.
Permit Number: Control Number: C-19-000989
Last Submit Date: Wednesday, July 31, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

Your request is hereby denied based upon the following infractions.

- 1) As per IBC 2015 New Jersey Edition section 1017.3. Please submit a new revised egress plan showing travel distance from the most remote point at all egress routes.
- 2) As per IBC 2015 New Jersey Edition section 1704.2.5 and 1704.2.5.1 Special inspections will be required if all requirements of the code are not met. Please supply the proper documents prior to release of plans.

Sincerely,



John Pinkava

CC:

Resubmit 8/19/19 (Mr)

* * * Communication Result Report (Aug. 2. 2019 2:25PM) * * *

13
2}

Date/Time: Aug. 2. 2019 2:25PM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
5296 Memory TX	97327418439	P. 1	OK	

Reason for error

E. 1) Hang up or line fail
 E. 3) No answer
 E. 5) Exceeded max. E-mail size

E. 2) Busy
 E. 4) No facsimile connection
 E. 6) Destination does not support IP-Fax



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

Subcode Official Review

Date: Thursday, August 1, 2019

To: FEDERAL REALTY INVESTMENT TRUST
 %
 PO BOX 82129 (ALTUS GROUP
 SOUTHLAKE, TX 76092

RE: Building Subcode
 Block: 571 Lot: 1.01 Quat:
 55 CHAMBERS BRIDGE RD.
 Permit Number: Control Number: C-19-000989
 Last Submit Date: Wednesday, July 31, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

Your request is hereby denied based upon the following infractions.

1) As per IBC 2015 New Jersey Edition section 1017.3, Please submit a new revised egress plan showing travel distance from the most remote point at all egress routes.

2) As per IBC 2015 New Jersey Edition section 1704.2.5 and 1704.2.5.1 Special inspections will be required if all requirements of the code are not met. Please supply the proper documents prior to release of plans.

Sincerely,

John Pothava

CC:

approved fabricator in accordance with Section 1704.2.5.1.

2. *Certificates of compliance* for the seismic qualification of nonstructural components, supports and attachments in accordance with Section 1705.13.2.
3. *Certificates of compliance* for *designated seismic systems* in accordance with Section 1705.13.3.
4. Reports of preconstruction tests for shotcrete in accordance with Section 1908.5.
5. *Certificates of compliance* for open web steel joists and joist girders in accordance with Section 2207.5.
6. Reports of material properties verifying compliance with the requirements of AWS D1.4 for weldability as specified in Section 26.5.4 of ACI 318 for reinforcing bars in concrete complying with a standard other than ASTM A706 that are to be welded; and
7. Reports of mill tests in accordance with Section 20.2.2.5 of ACI 318 for reinforcing bars complying with ASTM A615 and used to resist earthquake-induced flexural or axial forces in the special moment frames, special structural walls or coupling beams connecting special structural walls of *seismic force-resisting systems* in structures assigned to *Seismic Design Category D, E or F*.

1704.6 Structural observations. Deleted.

SECTION 1705

REQUIRED SPECIAL INSPECTIONS AND TESTS

1705.1 General. *Special inspections* and tests of elements and nonstructural components of buildings and structures shall meet the applicable requirements of this section.

1705.1.1 Special cases. *Special inspections* and tests shall be required for proposed work that is, in the opinion of the building official, unusual in its nature, such as, but not limited to, the following examples:

1. Construction materials and systems that are alternatives to materials and systems prescribed by this code.
2. Unusual design applications of materials described in this code.
3. Materials and systems required to be installed in accordance with additional manufacturer's instructions that prescribe requirements not contained in this code or in standards referenced by this code.

1705.2 Steel construction. The *special inspections* and non-destructive testing of the on-site erection of steel construction in buildings, structures, and portions thereof shall be in accordance with this section.

Exception: *Special inspections* of the steel fabrication process shall not be required where the fabricator does not perform any welding, thermal cutting or heating operation of any kind as part of the fabrication process. In such cases, the fabricator shall be required to submit a detailed procedure for material control that demonstrates the fabri-

cator's ability to maintain suitable records and procedures such that, at any time during the fabrication process, the material specification and grade for the main stress-carrying elements are capable of being determined. Mill test reports shall be identifiable to the main stress-carrying elements when required by the *approved construction documents*.

1705.2.1 Structural steel. *Special inspections* and nondestructive testing of *structural steel elements* in buildings, structures and portions thereof shall be in accordance with the quality assurance inspection requirements of AISI 360.

Exception: *Special inspection* of railing systems composed of *structural steel elements* shall be limited to welding inspection of welds at the base of cantilevered rail posts.

1705.2.2 Cold-formed steel deck. *Special inspections* and qualification of welding special inspectors for cold-formed steel floor and roof deck shall be in accordance with the quality assurance inspection requirements of SDI QA/QC.

1705.2.3 Open-web steel joists and joist girders. *Special inspections* of open-web steel joists and joist girders in buildings, structures and portions thereof shall be in accordance with Table 1705.2.3.

1705.2.4 Cold-formed steel trusses spanning 60 feet or greater. Where a cold-formed steel truss clear span is 60 feet (18 288 mm) or greater, the special inspector shall verify that the temporary installation restraint/bracing and the permanent individual truss member restraint/bracing are installed in accordance with the *approved* truss submittal package.

1705.3 Concrete construction. *Special inspections* and tests of concrete construction shall be performed in accordance with this section and Table 1705.3.

Exception: *Special inspections* and tests shall not be required for:

1. Isolated spread concrete footings of buildings three stories or less above *grade plane* that are fully supported on earth or rock.
2. Continuous concrete footings supporting walls of buildings three stories or less above *grade plane* that are fully supported on earth or rock where:
 - 2.1. The footings support walls of light-frame construction.
 - 2.2. The footings are designed in accordance with Table 1809.7.
 - 2.3. The structural design of the footing is based on a specified compressive strength, f'_c , not more than 2,500 pounds per square inch (psi) (17.2 MPa), regardless of the compressive strength specified in the *approved construction documents* or used in the footing construction.
3. Nonstructural concrete slabs supported directly on the ground, including prestressed slabs on grade,

these provisions shall be paid by the owner or the owner's authorized agent.

1703.4.2 Research reports. Supporting data, where necessary to assist in the approval of products, materials or assemblies not specifically provided for in this code, shall consist of valid research reports from *approved* sources.

1703.5 Labeling. Products, materials or assemblies required to be *labeled* shall be *labeled* in accordance with the procedures set forth in Sections 1703.5.1 through 1703.5.4.

1703.5.1 Testing. An *approved agency* shall test a representative sample of the product, material or assembly being *labeled* to the relevant standard or standards. The *approved agency* shall maintain a record of the tests performed. The record shall provide sufficient detail to verify compliance with the test standard.

1703.5.2 Inspection and identification. The *approved agency* shall periodically perform an inspection, which shall be in-plant if necessary, of the product or material that is to be *labeled*. The inspection shall verify that the labeled product, material or assembly is representative of the product, material or assembly tested.

1703.5.3 Label information. The *label* shall contain the manufacturer's identification, model number, serial number or definitive information describing the performance characteristics of the product, material or assembly and the *approved agency's* identification.

1703.5.4 Method of labeling. Information required to be permanently identified on the product, material or assembly shall be acid etched, sand blasted, ceramic fired, laser etched, embossed or of a type that, once applied, cannot be removed without being destroyed.

1703.6 Evaluation and follow-up inspection services. Where structural components or other items regulated by this code are not visible for inspection after completion of a prefabricated assembly, the owner or the owner's authorized agent shall submit a report of each prefabricated assembly in accordance with N.J.A.C. 5:23-4.26. The report shall indicate the complete details of the assembly, including a description of the assembly and its components, the basis upon which the assembly is being evaluated, test results and similar information and other data as necessary for the construction official to determine conformance to this code. Such a report shall be *approved* by the construction official.

1703.6.1 Follow-up inspection. The owner or the owner's authorized agent shall provide for *special inspections* of fabricated items in accordance with Section 1704.2.5.

1703.6.2 Test and inspection records. Copies of necessary test and *special inspection* records shall be filed with the construction official.

SECTION 1704 SPECIAL INSPECTIONS AND TESTS, CONTRACTOR RESPONSIBILITY AND STRUCTURAL OBSERVATION

1704.1 General. Special inspections and tests, statements of special inspections, responsibilities of contractors, submittals

to the *building official* and structural observations shall meet the applicable requirements of this section.

1704.2 Special inspections and tests. Where application is made to the *building official* for construction of Class 1 buildings only or any building containing a smoke control system, the owner or the owner's authorized agent, other than the contractor, shall employ one or more *approved agencies* to provide *special inspections* and tests during construction on the types of work specified in Section 1705 and identify the *approved agencies* to the *building official*. These *special inspections* and tests are in addition to the inspections by the *building official* that are identified in Section 110.

Exceptions:

1. *Special inspections* and tests are not required for construction of a minor nature or as warranted by conditions in the jurisdiction as *approved* by the construction official.
2. Unless otherwise required by the construction official, *special inspections* and tests are not required for Group U occupancies that are accessory to a residential occupancy including, but not limited to, those listed in Section 312.1.
3. *Special inspections* and tests are not required for portions of structures designed and constructed in accordance with the cold-formed steel light-frame construction provisions of Section 2211.7 or the conventional light-frame construction provisions of Section 2308.
4. The contractor is permitted to employ the *approved agencies* where the contractor is also the owner.

1704.2.1 Special inspector qualifications. Prior to the start of the construction, the *approved agencies* shall provide written documentation to the *building official* demonstrating the competence and relevant experience or training of the *special inspectors* who will perform the *special inspections* and tests during construction. Experience or training shall be considered relevant where the documented experience or training is related in complexity to the same type of *special inspection* or testing activities for projects of similar complexity and material qualities. These qualifications are in addition to qualifications specified in other sections of this code.

The *registered design professional in responsible charge* and engineers of record involved in the design of the project are permitted to act as the *approved agency* and their personnel are permitted to act as special inspectors for the work designed by them, provided they qualify as special inspectors.

1704.2.2 Access for special inspection. The construction or work for which *special inspection* or testing is required shall remain accessible and exposed for *special inspection* or testing purposes until completion of the required *special inspections* or tests.

1704.2.3 Statement of special inspections. The applicant shall submit a statement of *special inspections* as a condi-

CHAPTER 17

SPECIAL INSPECTIONS AND TESTS

User note: Code change proposals to sections preceded by the designation [BF] will be considered by the IBC — Fire Safety Code Development Committee during the 2015 (Group A) Code Development Cycle. Sections preceded by the designation [F] will be considered by the International Fire Code Development Committee during the 2016 (Group B) Code Development Cycle. All other code change proposals will be considered by the IBC — Structural Code Development Committee during the Group B cycle. See explanation on page iv.

SECTION 1701 GENERAL

1701.1 Scope. The provisions of this chapter shall apply to Class 1 buildings and smoke control systems in all buildings and shall govern the quality, workmanship and requirements for materials covered. Materials of construction and tests shall conform to the applicable standards listed in this code.

1701.2 New materials. New building materials, equipment, appliances, systems or methods of construction not provided for in this code, and any material of questioned suitability proposed for use in the construction of a building or structure, shall be subjected to the tests prescribed in this chapter and in the *approved* rules to determine character, quality and limitations of use.

SECTION 1702 DEFINITIONS

1702.1 Definitions. The following terms are defined in Chapter 2:

APPROVED AGENCY.

APPROVED FABRICATOR.

CERTIFICATE OF COMPLIANCE.

DESIGNATED SEISMIC SYSTEM.

FABRICATED ITEM.

INTUMESCENT FIRE-RESISTANT COATINGS.

MAIN WINDFORCE-RESISTING SYSTEM.

MASTIC FIRE-RESISTANT COATINGS.

SPECIAL INSPECTION.

Continuous special inspection.

Periodic special inspection.

SPECIAL INSPECTOR.

SPRAYED FIRE-RESISTANT MATERIALS.

STRUCTURAL OBSERVATION.

SECTION 1703 APPROVALS

1703.1 Approved agency. Upon the request of the construction official an approved agency shall provide all information

as necessary for the construction official to determine that the agency meets the following requirements specified in Sections 1703.1.1 through 1703.1.3.

1703.1.1 Independence. An *approved agency* shall be objective, competent and independent from the contractor responsible for the work being inspected. The agency shall also disclose to the construction official and the *registered design professional in responsible charge* possible conflicts of interest so that objectivity can be confirmed.

1703.1.2 Equipment. An *approved agency* shall have adequate equipment to perform required tests. The equipment shall be periodically calibrated.

1703.1.3 Personnel. An *approved agency* shall employ experienced personnel educated in conducting, supervising and evaluating tests and *special inspections*.

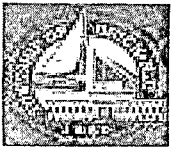
1703.1.4 Certification. An approved agency shall employ personnel certified in accordance with the administrative provisions of the Uniform Construction Code, to conduct, supervise and evaluate tests or inspections.

1703.2 Written approval. Any material, appliance, equipment, system or method of construction meeting the requirements of this code shall be *approved* in writing after satisfactory completion of the required tests and submission of required test reports.

1703.3 Record of approval. For any material, appliance, equipment, system or method of construction that has been *approved*, a record of such approval, including the conditions and limitations of the approval, shall be kept on file in the construction official's office and shall be available for public review at appropriate times.

1703.4 Performance. Specific information consisting of test reports conducted by an *approved agency* in accordance with the appropriate referenced standards, or other such information as necessary, shall be provided for the construction official to determine that the product, material or assembly meets the applicable code requirements.

1703.4.1 Research and investigation. Sufficient technical data shall be submitted to the construction official to substantiate the proposed use of any product, material or assembly. If it is determined that the evidence submitted is satisfactory proof of performance for the use intended, the construction official shall approve the use of the product, material or assembly subject to the requirements of this code. The costs, reports and investigations required under



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

Subcode Official Review

Date: Wednesday, June 5, 2019

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

RE: Building Subcode
Block: 671 Lot: 1.01 Qual:
56 CHAMBERS BRIDGE RD.
Permit Number: Control Number: C-19-000989
Last Submit Date: Friday, April 26, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

Your request is hereby denied based upon the following infractions.

1) As per N.J.A.C. 5:23-4.26 Provide certification of building elements for fabrication and installation of climbing equipment with all of the required sections of the IBC 2015 sections 1704 and 1705

Sincerely,

John Pinkava

CC:

RESUBMIT tm
SUBCODES B, P, F, E
DATES 7/22/19



**KELLENYI
JOHNSON
WAGNER**

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

June 26, 2019

John Pinkava, Building Subcode Official
Brick Township Construction Department
401 Chambers Bridge Rd
Brick, NJ 08723

Re: Block 671, Lot 1.01
Permit Control #C-19-000989
Brick Plaza Shopping Center
56 Chambers Bridge Road (KJW #2715.3b)

Dear Mr Pinkava:

I am in receipt of your Building Plan Review Comments dated 6/5/19 for the Gravity Vault climbing gym where you request certification that the fabrication and installation of the climbing equipment are in compliance with sections 1704 & 1705 of the IBC 2015 NJ Edition.

Attached are two signed and sealed sets of plans for the climbing equipment which should hopefully address your comment.

Additionally, since originally submitting plans for this project, the Owner has requested a change to the reflected ceiling plan to add an open grid suspended ceiling element in the Entry Retail 121 area. We have shown this new ceiling element on the reflected ceiling plan (sheet A3) and have asked our consultant to coordinate their electrical plan as well.

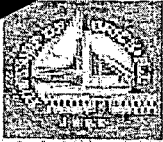
Attached are two full sets of signed and sealed plans for this project. We have marked all revised sheets on the sheet index on the Cover Sheet for clarification. Please feel free to contact me with any additional concerns regard this matter.

Very Truly Yours

Eric L. Wagner AIA
NJ License #AI-10366

J Robert Johnson
Eric L Wagner
Richard R Kane





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

Subcode Official Review

Date: Wednesday, June 5, 2019

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

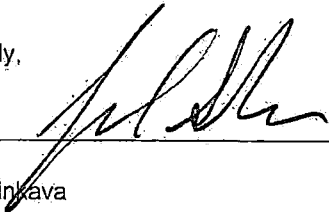
RE: Building Subcode
Block: 671 Lot: 1.01 Qual:
56 CHAMBERS BRIDGE RD.
Permit Number: Control Number: C-19-000989
Last Submit Date: Friday, April 26, 2019

Dear FEDERAL REALTY INVESTMENT TRUST %,

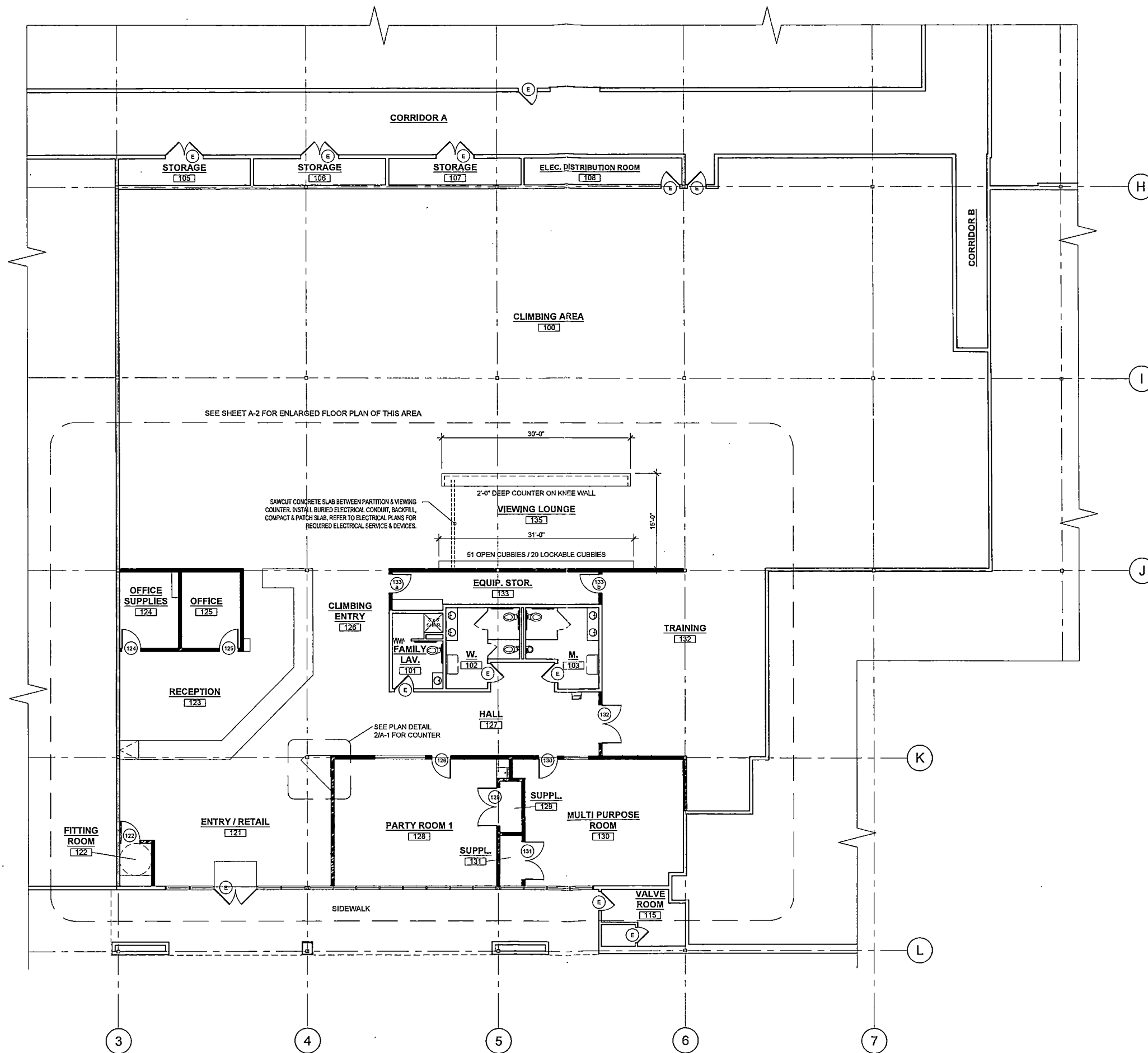
Your request is hereby denied based upon the following infractions.

1) As per N.J.A.C. 5:23-4.26 Provide certification of building elements for fabrication and installation of climbing equipment with all of the required sections of the IBC 2015 sections 1704 and 1705

Sincerely,


John Pinkava

CC:



FLOOR PLAN

1/8" = 1'-0"