BLOCK 671 LOT 1.01 QUALIFICATION CODE ____ ADDRESS (SITE) ____ PERMIT NO. 16-0985

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-16-000904

I. IDENTIFICATION

1. Proposed Work Site at: Chambers Bridge Road & Route 70 (Space 12)
2. Name of Owner in Fee: Federal Reakty Investment Trust
   Tel. (240) 478-9791 e-mail JFMiller@federalrealty.com
   Address 50 E Wynnewood Road, Wynnewood, PA. 19096
   (street / municipality / zip code)
3. Ownership in Fee: Public ____ Private X
4. Principal Contractor: Kane Builders S&D, Inc. Tel. (215) 517-5511
   Address 145 Willow Grove Avenue e-mail PLunny@KAneBuilders.
   Glenside, PA. 19038
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Home Improvement Contractor Registration No. or Exemption Reason ____
   Federal Emp. ID No. 800472851 FAX: (215) 517-7787
5. Architect or Engineer Brown Craig Turner Contact Pedro SAles
   Address 100 North Charles Street e-mail Pedro@bctarchitects.com
   Tel. (410) 837-2727 FAX: ____
6. Responsible Person in Charge once Work has Begun Peter Lunny-Kane Builders
   Tel. (215) 517-5511 FAX: (215) 517-7787

V. FEE SUMMARY (for office use only)

		Update 1	Update
1. Building	$	3,900	
2. Electrical		230	
3. Plumbing		318	150
4. Fire Protection		116	
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee		262	7
10. Subtotal	$		
11. Cert. of Occupancy		100	
12. Other			
13. TOTAL	$	$4986	-157

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories	1	
2. Height of Structure	____ ft.	
3. Area — Largest Floor	1,170 sq. ft.	
4. New Building Area	____ sq. ft.	
5. Volume of New Structure	____ cu. ft.	
6. Max. Live Load	____	
7. Max. Occupancy Load	____	
8. If Industrialized Building: State Approved ____ HUD ____		
9. Total Land Area Disturbed	____ sq. ft.	
10. Flood Hazard Zone	____	
11. Base Flood Elevation	____ ft.	
12. Wetlands yes ____ no ____		

COMMERCIAL

IIa. PROPOSED WORK

- ☐ Minor Work
- ☐ 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)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☒ Building	85,000	MFF	3/2/16		03/22/16	ICC			
☒ Electrical	38000				3/11/16	PJC			
☒ Plumbing	14,600				3-14-16				
☐ Fire Protection				3/23/16		NJ	3/25/16		NJ
☐ Elevator		Eng	Exempt		3/9/16				
TOTAL COST	137,600 $0								

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:
2. Use Group, Proposed: Select Group
3. Change in Use Group, Indicate Presen Select Group

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

D. Construct. Classification: Present ____ Proposed ____

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☒ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 8/4/2016
Control Number C-16-000904
Permit Number 16-0985
Permit Issue Date 3/30/2016
Certificate Number 16-0985

Certificate

Construction Code Division

(Certificate of Occupancy)

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. BRICK NAILS (FORMER YOGURT STORE) Brick Township, NJ Block: 671 Lot: 1.01 Qual:

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Owner Address: 1626 EAST JEFFERSON ST WYNNEWOOD PA 19096

Telephone: (240) 478-9791

Contractor KANE BUILDERS S&D INC

Address 145 WILLOW GROVE AVE GLENSIDE PA 19038

Telephone: (215) 517-5511 Fax: (215) 517-7787

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

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0 35

Description of Work/Use: TENANT FIT UP - BRICK NAIL SALON (UNIT 12)

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

Fee: $100.00
Check Number: 25244
Collected By: Betty Baptista

Date Printed: 8/4/2016

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 8/4/2016
Control Number C-16-000904
Permit Number 16-0985
Permit Issue Date 3/30/2016
Certificate Number 16-0985

Certificate

Construction Code Division

(Certificate of Occupancy)

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Telephone: (240) 478-9791

Contractor KANE BUILDERS S&D INC

Address 145 WILLOW GROVE AVE GLENSIDE PA 19038

Telephone: (215) 517-5511 Fax: (215) 517-7787

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

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: TENANT FIT UP - BRICK NAIL SALON (UNIT 12)

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This certificate has an expiration date of:
Conditions to be met:

Construction Official

Fee: $100.00
Check Number: 25244
Collected By: Betty Baptista

Date Printed: 8/4/2016

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 3/30/16

Date Issued / Permit # 16-0985

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 56

Work Site Location Chambers Bridge Road & Route 70 (space 12)
Brick, NJ 08723

Owner in Fee: Federal Realty Invwestment Trust

Tel. (240) 478-9791 e-mail JFMiller@federalrealty.com

Address 50 E Wynnewood Road, Wynnewood, PA. 19096
(street / municipality / zip code)

Contractor: Kane Builders S&D, Inc. Tel. (215) 517-5511

Address 145 Willow Grove Avenue e-mail PLunny@KaneBuilders.com
Glenside, PA. 19038

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

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 800472851 FAX: (215) 517-7787

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[✓] All	03/22/16	KEK
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date: 03/22/16
Approved by: KEK

SUBCODE APPROVAL for CERTIFICATE
[✓] CO [ ] CCO [ ] CA
Date: 08/03/16
Approved by: KEK

INSPECTIONS

Type:	Failure	Failure Date (Month/Day)	Approval Date (Month/Day)	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame			*5-16-16	CW
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
~~Other~~ ABOVE CEILING	6-24-16	JW	7-7-16	JW
Final	8-2-16	SW	8-3-16	SW
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present M Proposed M

No. of Stories 1

Height of Structure _____ ft.

Area — Largest Floor 1,170 sq. ft.

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

Volume of New Structure _____ cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $ _____
2. Rehabilitation $ 85,000
3. Total (1+ 2) $ 85,000 00

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: Peter Lunny

Print name here: Peter Lunny

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK INTERIOR Fit out FOR Nail Salon - Includes Drywall, Acoustical, Flooring, Painting, Millwork, Plumbing, HVAC, Electrical

NOTE: AIR TEST + BALANCE REPORT REQ'D

COMMERCIAL

PRIOR TO FINAL INSPECTION

TYPE OF WORK:

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

FEE (Office Use Only)

$ _____

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

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

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

NEED Approved Plans on site INEED to check on Fire separation

5-16-16 MT Frame Appvd on Condition of Elect. to be appvd today

7-7-16 Previous Items corrected JR

open ceiling / above ceiling

7-8-16 Final Fail Need Air test Balance Report

8-3-16 Final pass Recievers Reports.

(B) tech

PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 16-0985

Date Issued
Permit # 03/30/16

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

Block 671 Lot 1.01 Qualification Code

Work Site Location Chambers Bridge Road & Route 70 (Space 12)
Brick, NJ 08723

Owner in Fee: Federal Realty Investment Trust

Tel. (240) 478-9791 e-mail JFMiller@federalrealty.com

Address 50 E Wynnewood Road, Wynnewood, PA. 19096
street municipality zip code

Contractor: Hugh Gibbons P&H, Inc Tel. (610) 500-0177

Address 28 Timber Lane e-mail
Thornton, PA. 19373

Contractor License No. B10501 Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 282677262 FAX:

B. PLUMBING CHARACTERISTICS

Use Group Present M Proposed M

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 14,600

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: Hugh Gibbons

Print name here: Hugh Gibbons

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Tenant Fit up - Brick Nails

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date: 3-14-16
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 7-11-16
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab			4-20-16	
Rough			4-20-16	
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final	6-1-16		7-8-16	

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
1	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
4	Sink	
	Dishwasher	
	Drinking Fountain	
1	Washing Machine	
	Hose Bibb	
1	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	
2	Other Floor Sink/mop	

COMMERCIAL

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

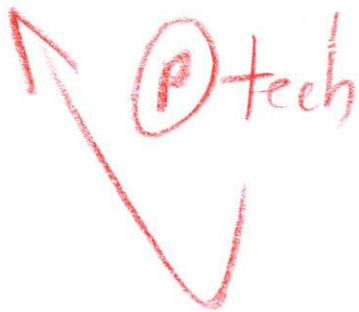
update permit ⊘ Fixtures 2 NAIL SINKS

HUGH G. GIBBONS STATE OF NEW JERSEY LICENSED MASTER PLUMBER 20701

U.C.C. F130 (rev. 11/09)
Internet version

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

7-1-16
permit update
TMV valve for pedicure sinks
grab bars



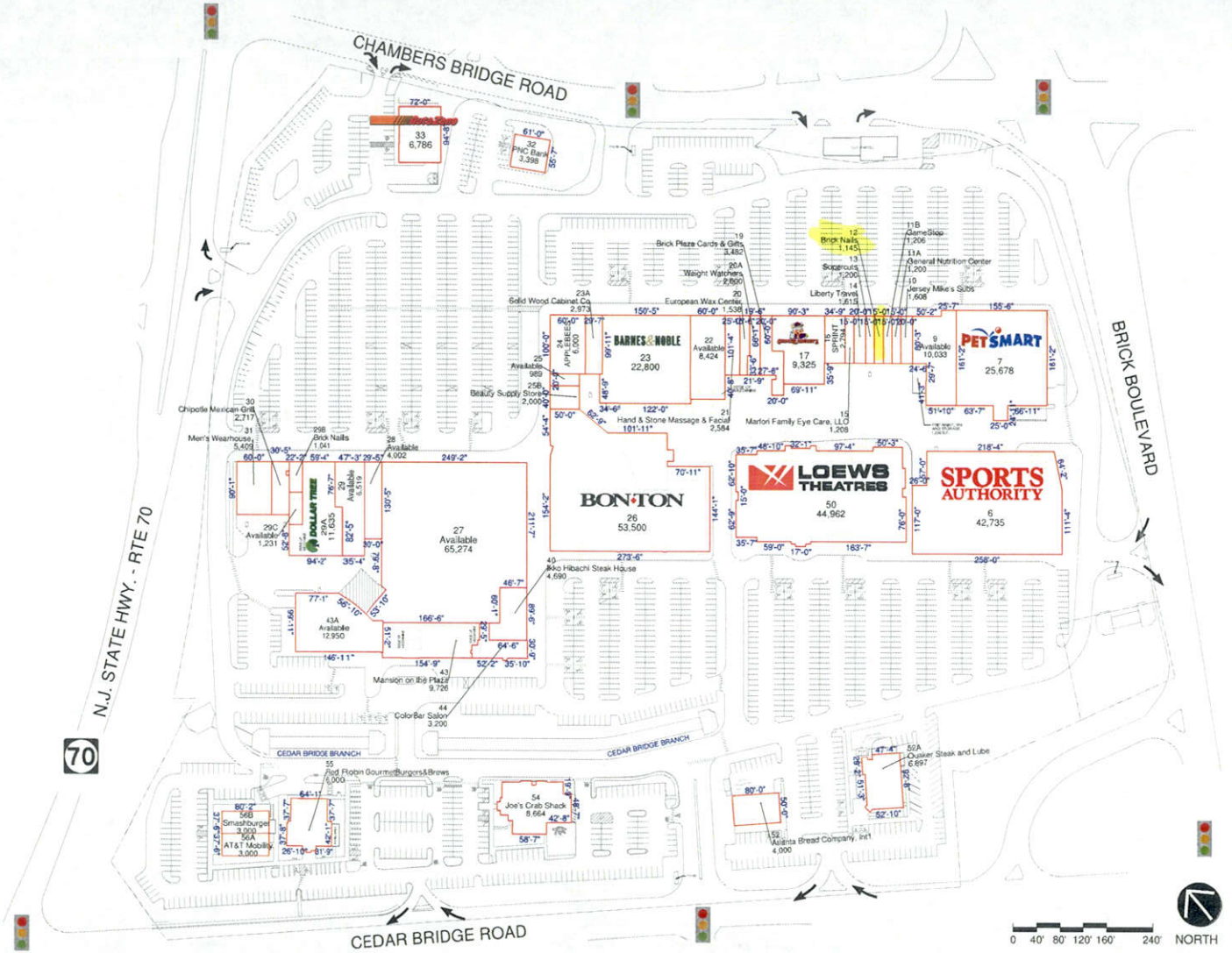
BRICK PLAZA

Brick, NJ

GLA 422,000 SF

Federal Realty INVESTMENT TRUST

Zoning Review Approval
By: Tenant Fitup
Date: 3-8-12



Corporate Headquarters | 1626 East Jefferson Street, Rockville, MD 20852 | PH 301.998.8100 | FX 800.658.8980 | www.federalrealty.com
Regional Office | 50 East Wynnewood Road, Suite 200, Wynnewood, PA 19096 | PH 610.896.5870 | FX 610.896.5876

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☒ Zoning Officer	MC	3/9/16							ZA-16-00303
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

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

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

X. CERTIFICATES ISSUED (office use only)

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

OFFICE USE ONLY

DATE:	COMMENTS:	INITIALS:
3/30	Called contractor Ready for p/u	
5/6/16	Called contractor. Ready for p/u	