

BLOCK 671 LOT 1.01 QUALIFICATION CODE VIOLATION ADDRESS (SITE) 56 Chambers Bridge Rd. 100 Cedar bridge Ave No 9 PERMIT NO. 14-0548



CONSTRUCTION PERMIT APPLICATION

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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$	15	15.75
2. Electrical	\$	40	40
3. Plumbing	\$	20	
4. Fire Protection	\$	65	
5. Elevator Devices	\$		
6. Subtotal	\$		
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee	\$		
10. Subtotal	\$	1	2
11. Cert. of Occupancy	\$	50	
12. Other	\$		
13. TOTAL	\$	50	117

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories	1
2. Height of Structure	
3. Area - Largest Floor	10,098 sq. ft.
4. New Building Area	0 sq. ft.
5. Volume of New Structure	0 cu. ft.
6. Max. Live Load	
7. Max. Occupancy Load	
8. If Industrialized Building: State Approval	HUD
9. Total Land Area Disturbed	
10. Flood Hazard Zone	
11. Base Flood Elevation	
12. Wetlands	yes no

(office use only)

I. IDENTIFICATION

1. Proposed Work Site at: 100 Cedar Bridge Ave No. 9 Brick pbzo
2. Name of Owner in Fee: Glow Golf Ventures, LLC
Tel. (316) 648-2003 e-mail jbern1973@gmail.com
Address 7570 W. 215 Street Bldg 1026 Wichita, KS 67205
3. Ownership in Fee: Public Jeff Bernat Private Jeff Bernat
4. Principal Contractor: no construction required Tel. ()
Address e-mail

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

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

Federal Emp. ID No. FAX: ()

5. Architect or Engineer WALTER J. HESSBERGER Contact GMAIL.COM
Address 2715 HOOPER AVE ST 2C, BRICK e-mail WJHESBERGER@
Tel. (732) 262-7444 FAX: (732) 262-1312

6. Responsible Person in Charge once Work has Begun Jeff Bernat
Tel. (316) 648-2003 FAX: ()

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
				03/03/14	WEX			
				3-5-14	TR			
				3-11-14	WEX			
				3-11-14	WEX			
				2/16/14	WEX			

TOTAL COST

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use:
2. Use Group, Proposed:
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: Total Units Income-restricted
Gained, Sale
Gained, Rental
Lost, Sale
Lost, Rental

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: Mini Golf Course
2. Use Group, Proposed: Mini A-3
3. Change in Use Group, Indicate Present: M

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

- D. Construct. Classification: Present IIB Detail
IIB Proposed Detail

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 07/08/2014
Control Number C-14-001315
Permit Number 14-0548+A
Permit Issue Date 04/11/2014
Certificate Number 14-0548

Certificate

Construction Code Division
(Certificate of Occupancy)

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. Unit 9 Former Block: 671 Lot: 1.01 Qual:
nine west shoes/to Mini Golf Brick
Township, NJ

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Owner Address: 1626 EAST JEFFERSON ST ROCKVILLE NJ 20852

Telephone:

Contractor Glow Golf Ventures, LLC

Address 7570 W. 21st Street Wichata KS 67205

Telephone: (316) 648-2003 Fax:

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

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: A-3 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 75

Description of Work/Use: TENANT FIT UP - INDOOR MINIATURE GOLF

Certificate Comments:

☒ **Certificate of Occupancy**

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

☐ **Certificate of Approval**

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

☐ **Certificate of Continued Occupancy**

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

☐ **Temporary Certificate of Compliance**

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

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

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

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

☐ **Certificate of Clearance - Asbestos Abatement**

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

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

☐ **Certificate of Compliance**

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

☐ **Temporary Certificate of Occupancy**

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

David Newman Jr

Construction Official

Fee: \$50.00

Check Number:

Collected By: Mary Jane Rinaldi

Date Printed: 07/08/2014

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

Page 1



BUILDING SUBCODE TECHNICAL SECTION



Index Unit 9
Miniature Golf

50 Chambers Buckle Rd.

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

Block 6071 Lot 1.01 Qualification Code _____
 Work Site Location 100 Cedar Bridge Ave. #9 Brick Plaza
Brick Township, NJ 08223
 Owner in Fee: Glen Golf Ventures, LLC Unit 9
 Tel. (316) 648 2003 e-mail JBen@1973@gmail.com
 Address 7570 W. 21st St Bldg 1026 Wichita, KS 67205
 Contractor: None CNO CONSTRUCTION Municipality _____ Zip code _____
 Address _____ e-mail _____

Contractor License No. or Builder Registration No. _____ Exp. Date _____
 Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
 Federal Emp. ID No. _____ FAX: () _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Dates (Month/Day)	Approval	Initial
☒ No Plans Required	<u>03/03/14</u>	<u>WJ</u>	Footing				
☒ All			Footing Bonding				
☐ Footings/Foundations			Foundation				
☐ Structural/Framework			Slab				
☐ Exterior			Frame				
☐ Interior			Truss Sys./Bracing				
Joint Plan Review Required:			Barrier-Free				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation				
Subcode Approval for PERM	<u>03/03/14</u>		Finishes—Base Layer				
Date:			Finishes—Final				
Approved by:			Energy				
Subcode Approval for CERTIFICATE			Mechanical				
☒ CO ☐ CCO	<u>06/13/14</u>	<u>CA</u>	TCO	<u>30 Days</u>	<u>*4-11-14 W</u>		
Date:			Other	<u>*5-29-14 W</u>	<u>6/12/14 W</u>		
Approved by:			Final	<u>*4-10-14 W</u>			

B. BUILDING CHARACTERISTICS
 Use Group Present M-1 Retail Proposed M-1A Light
 No. of Stories 1 Constr. Class Present UB Proposed New

Height of Structure _____ ft. State Approved _____ HUD _____
 Area — Largest Floor 10,098 sq. ft. Est. Cost of Bldg. Work: _____
 New Bldg. Area/All Floors _____ sq. ft. 1. New Bldg. \$ _____
 Volume of New Structure _____ cu. ft. 2. Rehabilitation \$ _____
 Max. Live Load _____ 3. Total (1+2) \$ _____
 Max. Occupancy Load _____ U.C.C. F-110 (rev. 11/09)

45 = e Attached

C. CERTIFICATION IN LIEU OF OATH

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

Sign here: _____

Print name here: Sean Tomlinson

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Rebuild Tenant

TENANT FIT-UP

Assembling Temporary Mini Golf Course in existing space.

See Attached

TYPE OF WORK:

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

COMMERCIAL

FEE (Office Use Only)

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

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

Date Received 3/11/14
 Control # _____
 Date Issued _____
 Permit # 14-0548



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 4/15/2014
Control Number C-14-000286
Permit Number 14-0548
Permit Issue Date 3/11/2014
Certificate Number 14-0548

Certificate

Construction Code Division
(Temporary Certificate of Occupancy)

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. Unit 9 Glow Golf Block: 671 Lot: 1.01 Qual: _____
Brick Township, NJ
Owner in Fee: FEDERAL REALTY INVESTMENT TRUST
Owner Address: 1626 EAST JEFFERSON ST ROCKVILLE NJ 20852
Telephone: _____
Contractor Glow Golf Ventures, LLC
Address 7570 W. 21st Street Wichata KS 67205
Telephone: (316) 648-2003 Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: A-3 Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 75

Description of Work/Use: TENANT FIT UP ...INDOOR MINIATURE GOLF

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: 5/15/2014
or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of: 5/15/2014

Conditions to be met:

Final Building inspection

Daniel Newman Jr

Construction Official

Fee: \$0.00

Check Number: _____

Collected By: _____



FIRE PROTECTION SUBCODE TECHNICAL SECTION



6100 Golf

Sto Charbels Bridge Rd.

3/11/14 14-05-46

Date Received
Control #
Date Issued
Permit #
75 per
Plan

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 100 Cedarbridge Ave No. 9 Brick Plaza
Beck Township, NJ 08723
Owner in Fee: Beck Township, NJ 08723 UNIT 9
Tel. (316) 648 2003 e-mail Beck1973@gmail.com
Address 2570 W. 21st St Bldg 1026 WILMINGTON, DE 67205
Contractor: None (no construction) 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 (if applicable):
Federal Emp. ID No. FAX: ()

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present retail Proposed retail Fuel Storage Tank:
Constr. Class: Present retail Proposed retail Fuel Type: [] Gas [] Oil [] Electric [] Solar
Heating System: [] New OR [] Modification to Existing Fire Alarm System: [] New OR [] Existing
Location: [] Conversion OR [] Replacement Location of Panel:
Fuel Type: [] Gas [] Oil [] Electric [] Solar Fire Suppression/Standpipe System:
Other [] New OR [] Existing
Location of Main Control Valve:

Total Cost of Fire Protection Work \$ 0

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
	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>3-11-14</u>	Flam/Combust Tanks	
Approved by: <u>[Signature]</u>	Fireplace Venting	
SUBCODE APPROVAL for CERTIFICATE	Final	
Date: <u>3-11-14</u>	Other	
Approved by: <u>[Signature]</u>		

C. CERTIFICATION IN LIEU OF OATH

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

Applicant/Contractor sign here: [Signature] SPR System
Print name here: Sean Tomlinson N.J. Charbels

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Water Supply Source None [] Certified Contractor [] Exempt Applicant
Method of Alarm/Suppression System Supervision None

Flammable/Combustible Tanks
Alarm Systems
[] System
[] 110v Interconnected
[] CO Detectors/110v
Alarm Devices (i.e., smoke, heat, pulls, water/flow)
Supervisory Devices (i.e., lamps, low/high air)
Signaling Devices (i.e., horns/strobes, bells)
Other Devices

TOTAL
Suppression Systems
Fire Pump GM
Dry Pipe/Alarm Valves
Pre-action Valves
Sprinkler Heads (Dry and Wet)
Standpipes
Pre-engineered Systems
Wet Chemical
Dry Chemical
CO₂ Suppression
Foam Suppression
FM200 Suppression
Other

Other Systems
Kitchen Hood Exhaust System
Smoke Control System
Fuel-Fired Appliances [] Gas [] Oil [] Solid
Fireplace Venting/Metal Chimney
Other

COMMERCIAL

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



APPLICATION FOR CERTIFICATE

Date Received 04/10/2014
Date Permit Issued 04/11/2014
Control # C-14-001315
Permit # 14-0548+A
Date Issued 07/08/2014

IDENTIFICATION

Block 671 Lot 1.01 Qualifier _____
Work Site Location 56 CHAMBERS BRIDGE RD. Unit 9 Former nine Contractor Glow Golf Ventures, LLC
west shoes/to Mini Golf Brick Township, NJ Address 7570 W. 21st Street Wichata KS 67205
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
1626 EAST JEFFERSON ST ROCKVILLE NJ Telephone (316) 648-2003
20852 Lic. No. or Bldrs. Reg. No. _____
Telephone _____ Federal Employee. No. _____

ACTION

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

USE GROUP M Previous A-3 Current

FINAL COST OF CONSTRUCTION: \$ 1

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

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

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

DESCRIPTION OF WORK/USE:

Alteration TENANT FIT UP - INDOOR MINIATURE GOLF ...UPDATE +A - CO FEE

I hereby attest that to the best of my knowledge, the completed project meets the conditions of 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 complete by the date on the

SIGNED: Barthany M. Beier
Owner/Agent

☐ OWNER

☒ AGENT

Brick Township401 Chambersbridge Rd
Brick, NJ 08723

(732) 262-1030

**Receipt**

Payment Date 6/30/2014

Transaction # PMT-14-04867

Receipt #

Issued To Glowgolf Ventures, LLC

Description Violation # 14-00107
Glow Golf
56 Chambers Bridge Rd.
Brick, NJ 08723

Date Printed 6/30/2014

Check Number 1034

Cash \$0.00

Check \$500.00

Charge \$0.00

Total Paid \$500.00

BRICK
TOWNSHIP
OCEAN COUNTY NJ06/30/14 12:21PM
00155813582 **06
SERV.006404867
PENALTY \$500.00

CHECK \$500.00

THANK YOU!

06/30/14 12:21 PM 00155813582
**06 SERV.006PENALTY \$500.00
CHECK \$500.00



NOTICE AND ORDER OF PENALTY

Permit/Control #:

Date Issued: 4/15/2014

Violation #: V-14-00107

IDENTIFICATION

Work Site Location: 56 CHAMBERS BRIDGE RD. Glow Golf Ventures, LLC Brick Township, NJ

Block: 671 Lot: 1.01 Qualification Code: _____

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Owner Address: 1626 EAST JEFFERSON ST ROCKVILLE MD 20852

Agent/Contractor: Glow Golf Ventures, LLC

Address: 7570 W. 21 St. Street Wichata KS 67205 *See idalec*

To: ☒ Owner

☐ Other:

☒ 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:

Following an investigation, it is found that you have been occupying the space: prior to the issuance of a Certificate of Occupancy

- ☒ On 4/15/2014, 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 4/29/2014 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:

4-15-14



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Construction Violation

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. Glow Golf Ventures, LLC Brick Township, NJ
Block: 671
Lot: 1.01
Owner: FEDERAL REALTY INVESTMENT TRUST
Owner Address: 1626 EAST JEFFERSON ST ROCKVILLE MD 20852
Telephone:
Agent: Glow Golf Ventures, LLC
Agent Address: 7570 W. 21 St. Street Wichata KS 67205
Telephone: (313) 648-2003

Infraction Details

Subcode: Administrative
Issuing Officer: Daniel F Newman Jr Telephone: (732) 262-1030
Issue Date: 4/15/2014
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: prior to the issuance of a Certificate of Occupancy
Certified Mail Number: 7013 2630 0001 5900 6535

Enforcement Details

Inspection Date: 4/15/2014
Notice Date: 4/15/2014
Compliance Date: 4/29/2014
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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 4/15/2014
Control Number C-14-000286
Permit Number 14-0548
Permit Issue Date 3/11/2014
Certificate Number 14-0548

Certificate

Construction Code Division
(Temporary Certificate of Occupancy)

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. Unit 9 Glow Golf Block: 671 Lot: 1.01 Qual: _____
Brick Township, NJ

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Owner Address: 1626 EAST JEFFERSON ST. ROCKVILLE NJ 20852

Telephone: _____

Contractor Glow Golf Ventures, LLC

Address 7570 W. 21st Street Wichata KS 67205

Telephone: (316) 648-2003 Fax: _____

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

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: A-3 Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 75

Description of Work/Use: TENANT FIT UP ...INDOOR MINIATURE GOLF

Certificate Comments:

TCO issued after Violation

☐ **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: 5/15/2014 or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: 5/15/2014
Conditions to be met:

Final Building inspection

Daniel Newman Jr

Construction Official

Fee: \$0.00
Check Number: _____
Collected By: _____



NOTICE AND ORDER OF PENALTY

Permit/Control #:

Date Issued: 4/15/2014

Violation #: V-14-00107

IDENTIFICATION

Work Site Location: 56 CHAMBERS BRIDGE RD. Glow Golf Ventures, LLC Brick Township, NJ

Block: 671 Lot: 1.01 Qualification Code: _____

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Owner Address: 1626 EAST JEFFERSON ST. ROCKVILLE MD 20852

Agent/Contractor: Glow Golf Ventures, LLC

Address: 7570 W. 21 St. Street Wichata KS 67205

To: ☒ Owner

☐ Other:

☒ 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:

Following an investigation, it is found that you have been occupying the space: prior to the issuance of a Certificate of Occupancy

- ☒ On 4/15/2014, 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 4/29/2014 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.

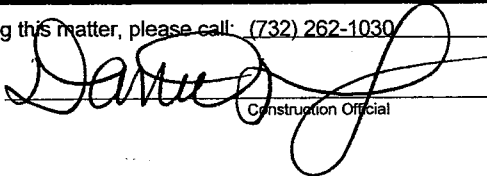
Your application for appeal must be in writing, setting forth your name and address, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of your reliance on them. You may include a brief statement setting 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:


Construction Official

Date:

4-15-14



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Construction Violation

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. Glow Golf Ventures, LLC Brick Township, NJ
Block: 671
Lot: 1.01
Owner: FEDERAL REALTY INVESTMENT TRUST
Owner Address: 1626 EAST JEFFERSON ST ROCKVILLE MD 20852
Telephone:
Agent: Glow Golf Ventures, LLC
Agent Address: 7570 W. 21 St. Street Wichata KS 67205
Telephone: (313) 648-2003

Infraction Details

Subcode: Administrative
Issuing Officer: Daniel F Newman Jr Telephone: (732) 262-1030
Issue Date: 4/15/2014
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:
prior to the issuance of a Certificate of Occupancy
Certified Mail Number: 7013 2630 0001 5900 6535

Enforcement Details

Inspection Date: 4/15/2014
Notice Date: 4/15/2014
Compliance Date: 4/29/2014
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

Peg Mullen

From: Peg Mullen
Sent: Tuesday, April 15, 2014 2:26 PM
To: 'Mary Jane Rinaldi'
Subject: RE: 56 Chambers Bridge - unit 9

Hi Mary Jane,

56 Chambers Bridge is good to go-we were out to check today. Thank you for your condolences.

Respectfully,

Peg Mullen
Customer Accounts

732-701-4222
pmullen@brickmua.com

From: Mary Jane Rinaldi [<mailto:mrinaldi@twp.brick.nj.us>]
Sent: Thursday, April 10, 2014 10:20 AM
To: Peg Mullen
Subject: 56 Chambers Bridge - unit 9

Block 671 lot 1.01 – used to be Nine West shoes, now Glow Golf, getting ready to co, contact is Jeff, phone number 316-648-2003.

*Mary Jane Rinaldi,
Senior Permit Clerk
Department of Land Use
Township of Brick*



ELECTRICAL SUBCODE TECHNICAL SECTION



Sto Chambers Budget Rd.

Date Received
Control #

3/11/14

Date Issued
Permit #

14-0548

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 UN14-9
Work Site Location 100 Cedarbridge Ave No 9 Brick Plaza

Owner In Fee: Globe Ventures, LLC

Tel (316) 648-2003 e-mail JBen1973@gmail.com

Address 7520 W. 21st St Bldg 1026 Wichita, KS 67205

Contractor: NWMC (no changes) Tel. () Zip code

Address e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ()

B. ELECTRICAL CHARACTERISTICS

Use Group Present My retail (choc store) Proposed retail (mini golf/pub) A-3

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as retail Utility Co.

Est. Cost of Elec. Work \$

JOB SUMMARY (Office Use Only)

PLAN REVIEW ☐ No Plans Required

☐ Partial Under-slab Utilities Approved

Date 3/5/14 Approved by: [Signature]

☐ Electric Plans Approved

Date: Approved by:

Joint Plan Review Required: ☐ Bldg. ☐ Plumb. ☐ Fire ☐ Elev.

SUBCODE APPROVAL FOR PERMIT

Date: 3/5/14 [Signature]

Approved by: [Signature]

SUBCODE APPROVAL FOR CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date: 3/20/14

Approved by: [Signature]

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here: [Signature]

Print name here: Sen Tomlinson

☐ Licensed Elec. Contractor ☐ Certifd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: NO changes

QTY. SIZE ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C.

TOTAL NON-RESIDENTIAL

Pool/Permit with UW Lights

Storage 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 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$



PLUMBING SUBCODE TECHNICAL SECTION



50 Chambers Bridge Rd.

Date Received 3/11/14

Control #

Date Issued 14-0548

Permit #

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

Block

671

Lot

1-01

Qualification Code

Work Site Location

100 Cedar Bridge Ave N09 Brk Plazo

Brick Township, NJ 08732

Owner in Fee:

Glow Golf Ventures LLC UNIT 9

Tel. (316) 648-2003

e-mail JBen1973@gmail.com

Address

2570 W. 21st St Bldg 1026 Wichita, KS 67205

Contractor:

None (no construction)

Address

None (no construction)

Contractor License No.

Exp. Date

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

Federal Emp. ID No.

FAX: ()

B. PLUMBING CHARACTERISTICS

Use Group Present retail (shoe store) Proposed retail (mini-grocery) 4-3

Building Sewer Size

Public Sewer

Water Service Size

Public Water

Est. Cost of Plumbing Work \$ 0

Private Septic

Private Well

Job Summary (Office Use Only)

PLAN REVIEW

1) Plans Required

1) Partial - Underslab Utilities Approved

Date: 3-11-14 Approved by: [Signature]

1) Plumbing Plans Approved

Date: Approved by:

Joint Plan Review Required:

1) Bldg. 1) Elec. 1) Fire. 1) Elev.

SUBCODE APPROVAL for PERMIT

Date: 3-11-14

Approved by: [Signature]

INSPECTIONS

Dates (Month/Day)

Type:

Slab

Rough

Water

Sewer

Fixtures

Gas Equipment

Gas Piping

LPG Gas Tank

Fuel Oil Piping

Solar

TCO

Final

Failure

Failure

Approval

Initial

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: Scott Robinson
D. TECHNICAL SITE DATA
1) Licensed Plumbing Contractor 1) Exempt Applicant

DESCRIPTION OF WORK

ND changes

QTY

FIXTURE/EQUIPMENT

Water Closet

Urinal/Bidet

Bath Tub

Lavatory

Shower

Floor Drain

Sink

Dishwasher

Drinking Fountain

Washing Machine

Hose Bibb

Water Heater

Fuel Oil Piping

Gas Piping

LPG Gas Tank

Steam Boiler

Hot Water Boiler

Sewer Pump

Interceptor/Separator

Backflow Preventer

Greasetrap

Sewer Connection

Water Service Connection

Stacks

Other

FEE (Office Use Only)

\$

COMMERCIAL

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$



PERMIT UPDATE

Date Update Issued 4-11-14
Control # C-14-001315
Permit # 14-0548+A

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. Unit 9 Former nine Contractor Glow Golf Ventures, LLC
west shoes/to Mini Golf Brick Township, NJ Address 7570 W. 21st Street Wichata KS 67205
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
1626 EAST JEFFERSON ST ROCKVILLE NJ Telephone: (316) 648-2003
20852 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:

CO fee

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$1

Daniel Newman Jr 4/10/14
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	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	\$50.00
Other	\$0
Total	\$50
Check No.	
Cash	\$0
Credit	\$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.

Clow Golf

update



BUILDING SUBCODE
TECHNICAL SECTION



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

Block 671 Lot 101 Qualification Code _____

Work Site Location 56 Chamberbridge Rd

Owner in Fee: Federal Realty Investment Trust

Tel. () e-mail _____

Address 1626 E Jefferson Roadville Maryland 20852

Contractor: Robert Lambusta Elec. L.L.C. Tel. (301) 263-2110

Address 291 Huppert Dr. Orlin e-mail _____

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

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

Federal Emp. ID No. 723232280 FAX: () _____

CONTRACTOR REVIEW (Office Use Only)

PLAN REVIEW Initial _____

No Plans Required 04/24/14 Initial _____

INSPECTIONS

TYPE: _____ Failure _____ Dates (Month/Day) _____

Initial _____

C. CERTIFICATION IN LIEU OF OATH

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

Sign here: _____

Print name here: Robert Lambusta

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Emergency Light

Remote Emergency Light & Hand

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Rehabilitation

☐ Roofing

☐ Siding

☐ Fence _____ Height (exceeds 6') _____

☐ Sign _____ Sq. Ft. _____

☐ Pool _____

Date Received _____

Control # _____

Date Issued 14-0548+13

Permit # _____

5-23-14

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____

No. of Stories _____

Height of Structure _____ ft.

Area — Largest Floor _____ sq. ft.

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

Volume of New Structure _____ cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building: _____

State Approved _____ HUD _____

Est. Cost of Bldg. Work: _____

1. New Bldg. \$ _____

2. Rehabilitation \$ 500.00

3. Total (1+2) \$ _____

Retaining Wall _____ Sq. Ft. _____

Asbestos Abatement Subchapter 8 _____

Lead Haz. Abatement NJAC 5:17 _____

Radon Remediation _____

Other _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

1 White = Inspector Copy

2 Canary = Office Copy

3 Pink = Office Copy

4 Gold = Applicant Copy

1072

FIELD CORRECTION NOTICE

PERMIT # 14-0548

BLOCK	LOT
-------	-----

NOTICE DELIVERED TO

Upon inspection, violations of the _____ Sec. _____ were in evidence.

The following orders are hereby issued for their correction:

- ① Update plans - show floor plan indicate location of fixtures and their clearances - (Remove Smoke/Laser or update plans)
- ② Outline all platforms with white paint and Stripe all steps to prevent trip hazards -
- ③ Steps Req'd (No step larger than 7" rise with a min tread depth of 11")
- ④ Unable to test emergency lights. (Remote heads req (2) bulbs)

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED. ALL CORRECTIONS MUST BE MADE ON OR BEFORE,

- ⑤ Flame spread + Smoke Develop rating for Plastic Poster board, and

BY

INSPECTOR

Yellow - Field Copy

FIELD CORRECTION NOTICE

Yellow - Field Copy

FIELD CORRECTION NOTICE

LOCATION Indoor Miniature Golf PERMIT # 14-0548

ISSUED TO _____ BLOCK _____ LOT _____
PERMIT HOLDER AND/OR ALL RESPONSIBLE PARTIES

NOTICE DELIVERED TO Recommend TCO

Upon inspection, violations of the _____ Sec. _____ were in evidence.

The following orders are hereby issued for their correction: _____

- ~~1~~ ☒ ~~1~~ Affidavit for Flame Retardancy must be site specific 4/11/14 MW OK
- ☒ 2 Provide Paint "Which Glows" to the base floor at all entry points
- ☒ 3 Remove head at rear door does not work and requires (2) light heads -
- ☒ 4 Architect to include Rear Racking "Partitions" by

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED. ALL CORRECTIONS MUST BE MADE ON OR BEFORE.

electrical Panels on plans

DATE 4-10-14 / 4-11-14 MW BY MW

INSPECTOR

White - Original

Yellow - Field Copy

- ☒ 5 Provide an additional emergency light at electrical Panels -

BLACK MUSLIN ART WORK ON WALLS



County of Hudson
State of New Jersey

NEW YORK CITY AFFIDAVIT OF FLAME RETARDANCY

We, the undersigned, being duly sworn, depose and say that we are in business in New York, New York, with headquarters in Secaucus, New Jersey and offices also in California.

This document is to certify that, in accordance with the *Rules of the Fire Department of the City of New York* (as specified by Title 3 of the Rules of the City of New York), section §805-01, sub-section (d), the material listed below was treated with a fire retardant chemical to meet or exceed the requirements of the NFPA 701 test standard.

The warranted period of effectiveness is three (3) year from the date of application. This certificate is valid for a period of three (3) years in accordance §805-01 (d)(2)(C) and may be renewed for three more years only by appropriate re-testing of the fabric.

Any washing of the treated materials will wash the treatment away. Any washing, cleaning or alteration of this material will void this certificate. Accumulations of air-borne dust and oils may also reduce the effectiveness of the flame-retardant treatment.

As an employee of Rose Brand, I have field-tested these fabrics described below. The fabrics were field-tested using standard methods as set forth in §805-01(c).

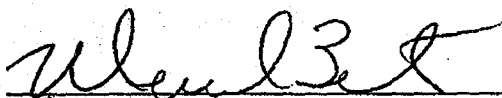
Purchaser's Name & Location: GLOW GOLF 7570 WEST 21 ST ST WICHITA, KS. 67205

 **For Use At:** GREECE RIDGE MALL 271 GREECE CENTER DRIVE ROCHESTER NY. 14626

Location of Test: 4 Emerson Lane, Secaucus, NJ 07094

Date of Test and Affidavit: 1/31/2013 Rose Brand order #: 874144

Materials: 100 yards of 108" wide, 100% cotton, Black heavy weight Muslin



For Rose Brand Wipers, Inc.

Mercedes Betances

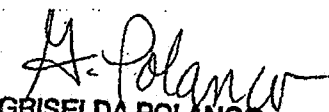
Certificate of Fitness # 84843408

Expiration Date: December 22, 2015

Type C-15 for Supervisor of Flameproofing

New York City Fire Department

Sworn before me this 1st day of May 2013


GRISELDA POLANCO
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires August 28, 2013



CERTIFICATE OF FLAME RESISTANCE

Rose Brand is in business in New York, New York, with headquarters in Secaucus, New Jersey and offices also in California.

The FR fabric described below has been treated with a flame retardant chemical such that the fabric meets the minimum requirements of flame resistance established by the following test:

- NFPA 701 (1989 ed.), small scale
- NFPA 701 (2004 ed.), test method #1
- California Administrative Code Title 19, Section 1237
- CAN/ULS-S109-03 Canadian flame test for fabrics
- BS 5867- test 2 (part B)-1980 British Standard Specifications for Fabrics for Curtains and Draperies



The Fire Marshal of the State of California has registered this fabric as **#F-48901**.

The flame retardancy has an expected lifetime of at least three (3) years, but is likely to be effective for much longer. The flame retardancy will withstand up to three (3) dry cleanings or non-water washing processes. The flame retardant chemical WILL be removed by water washing. Wide fluctuations in atmospheric humidity as well as accumulations of airborne dust and oils will diminish the endurance and effectiveness of the flame retardant

chemical.

Rose Brand recommends annual testing of this fabric using the NFPA 705 (1997 or later) Field Test Method for Textiles.

Purchaser's Name: GLOW GOLF

Rose Brand Order #: 874144

Dated: 1/31/2013

Fabric used: 100 yards of 108" wide, 100% cotton, Black heavy weight Muslin

For Rose Brand Textile Fabrics
Customer Service Representative

**SPECIAL NEW YORK CITY CERTIFICATE
AVAILABLE UPON REQUEST**



ROSE BRAND

ROSE BRAND'S 17' Flame Retardant White Muslin

TECHNICAL SPECIFICATIONS

Construction

Content:	100% bleached cotton	FR chemical:	Flammentin HM
Width (+/- 2%)	17'-0" (5.18 meters)	Warp:	NE 17/1
Weight/Square Meter	6 oz. (454 gm)	Weft:	NE 10/1
Threads warp per cm	56	Threads weft per cm:	44
Finish:	Loom State	Harmonized Code:	5209.31.0000

Manufactured to meet the following FR requirements:

N.F.P.A. 701, 1989, Small Scale Test

New York Port Authority

Rules for Tests of Fire Resistive, Flameproofed Materials, City of New York Board of Standards and Appeals, Calendar No. 294-40 S.R.

California Administrative Code Title 19, Paragraph 1237.1, GA 358 01, C 141 01

Manufactured under a ISO 9001 program of quality assurance.

Theatrical Fabrics, Fabrication & Supplies

75 Ninth Avenue
New York, NY 10011
800-223-1624
212-242-7554
212-242-7565 Fax

www.rosebrand.com info@rosebrand.com

10856 Vanowen Street
No. Hollywood, CA 91605
800-360-5056
818-505-6290
Fax 818-505-6293

**Material Safety Data Sheet**

According to 2001/58/EC

1 Identification of substance

- **Product details**
- **Trade name:** FLAMENTIN HM
- **Application of the substance / the preparation** Flame retardant for textile application
- **Manufacturer/Supplier:**
THOR GmbH
Landwehrstraße 1
67346 Speyer
Germany

THOR SPECIALTIES (UK) LTD.
Wincham Avenue
Wincham
Cheshire CW9 8GB
England
- **Informing department:**
Product Management Textile Auxiliaries
Tel.:(UK) +44 1606 818800
Fax :(UK) +44 1606 818801
Email: info@thor.uk.com
- **Emergency information:** Emergency phone number (24 h service): +49 6 21 60-4 33 33

2 Composition/Data on components

- **Chemical characterization**
- **Description:** Flame retardant based on ammonium salts of inorganic acids
- **Dangerous components:** None

3 Hazards Identification

- **Hazard designation:** void
- **Information pertaining to particular dangers for man and environment** void
- **Classification system**
The product does not have to be classified and labelled due to the calculation procedure of the "General Classification guideline for preparations of the EU" in the latest valid version.

4 First aid measures

- **General information** No special measures required.
- **After inhalation** Supply fresh air; consult doctor in case of symptoms.
- **After skin contact** Wash immediately with plenty of water and soap and rinse thoroughly.
- **After eye contact** Rinse opened eye for several minutes under running water.
- **After swallowing** in case of persistent symptoms consult doctor.

5 Fire fighting measures

- **Suitable extinguishing agents**
Product is non combustible. Use fire fighting measures that suit the environment.
- **Unsuitable extinguishing agents for reasons of safety:** None
- **Special hazards caused by the material, its products of combustion or fume gases:**
Can be released in case of fire:
Nitrogen oxides (NOx)

(Contd. on page 2)

R11

Material Safety Data Sheet

According to 2001/58/EC

Trade name: FLAMENTIN HM

Phosphoric oxides (PxOy)

(Contd. of page 1)

- **Protective equipment:** Wear self-contained breathing apparatus.

6 Accidental release measures

- **Personal safety precautions:** Wear personal protective equipment.
- **Measures for environmental protection:**
Product may have a strong fertilising effect in waste water.
- **Measures for cleaning/collecting:**
Send for recovery or disposal in suitable containers.
Dispose of contaminated material as waste according to item 13.

7 Handling and storage

- **Handling**
- **Information for safe handling:** No special measures required.
- **Information about protection against explosion and fire:** No special measures required.
- **Storage**
- **Requirements to be met by storerooms and containers:** No special requirements.
- **Information about storage in a common storage facility:**
Do not store together with alkalis (caustic solutions).
- **Further information about storage conditions:**
Store in cool, dry conditions in well sealed containers.

8 Exposure controls and personal protection:

- **Additional information about design of technical systems:** No further data; see item 7.
- **Components with critical values that require monitoring at the workplace:** ?
- **Additional information:** Information valid at the time of review of safety data sheet.
- **Personal protective equipment**
- **General protective and hygienic measures** Use skin cream for skin protection.
- **Respiratory protection:**
Put on breathing equipment if dust develops.



Filter P1.

- **Protection of hands:**



Chemical protective gloves with CE-labelling.

- **After use of gloves** apply skin-cleaning agents and skin cosmetics.
- **Material of gloves** Nitrile rubber, NBR

(Contd. on page 3)

08

Material Safety Data Sheet

According to 2001/58/EC

Page 3/5

Trade name: FLAMENTIN HM

(Contd. of page 2)

• Eye protection:



Hoder / temple spectacles with side protection.

• Body protection: Protective clothing.

9 Physical and chemical properties:

• General information

Form:	Solid
Colour:	White
Odour:	Odourless

• Change in condition

Melting point/Melting range:	not applicable
Boiling point/Boiling range:	not applicable

• Flash point: Not applicable

• Self-inflammability: Product is not self-igniting.

• Danger of explosion: Product is not explosive.

• Density

• Settled apparent density at 20°C ca. 1 000 kg/m³

• Solubility in / Miscibility with
Water:

Soluble

• pH-value (100 g/l) at 20°C: 5.0 - 5.5

• Solids content: 100.0 %

10 Stability and reactivity

• Conditions to be avoided: No decomposition if used and stored according to specifications.

• Minimum shelf life:

24 months from production date, if stored dry and at a temperature of about 20 °C

• Materials to be avoided:

Strong oxidising agents
Alkalis

• Dangerous reactions Contact with alkali releases irritant gases

• Dangerous products of decomposition:

Irritant gases/vapours
Ammonia

11 Toxicological information

• Acute toxicity:

• LD/LC50 values that are relevant for classification: Product, oral: > 2000 mg/kg rat (calculated)

• Primary irritant effect:

• on the skin: No irritant effect

• on the eye: No irritant effect

(Contd. on page 4)

Material Safety Data Sheet

According to 2001/58/EC

Trade name: FLAMENTIN HM

(Contd. of page 3)

- **Sensitization:** No sensitising effect known

12 Ecological information:

- **Information about elimination (persistence and degradability):**

- **Method OECD 303**

- **Degree of elimination:**

> 90 %

The product ingredients can be readily eliminated from the sewage.

- **Other information:**

The components contained are eliminated in biological waste water purification plants by biological means (nitrification/de-nitrification) and chemically (precipitation of phosphorus)

- **Behaviour in environmental systems:**

- **Components:** May lead to excess fertilising in water courses.

- **Ecotoxicological effects:**

- **Behaviour in sewage processing plants:**

EC50 > 100 mg/l (Activated Sludge)

- **Remark:**

If contaminated effluent water is properly entered into the sewage system, any interference with the degrading activity of the activated sludge organisms is not expected.

- **Additional ecological information:**

- **nitrogen content:** 27.9 %, established as N

- **phosphorus content:** 2.5 %, established as P

- **AOX-indication:**

The product does not contain substances, which can influence the AOX of waste water.

- **The formulation contains the following heavy metals and compounds according to EC guideline NO. 76/464 EC:**

Due to its formulation, the product does not contain any heavy metals.

13 Disposal considerations

- **Product:**

- **Recommendation**

Contact manufacturer for recycling information.

Smaller quantities can be disposed of with household garbage.

- **Contaminated packaging:**

- **Recommendation:** Packaging can be reused or recycled after cleaning.

- **Recommended cleaning agent:** Water, if necessary with cleaning agent.

14 Transport information:

- **Land transport ADR/RID (cross-border/domestic):**

- **ADR/RID/ADG (Australia) Class:** -

- **Maritime transport IMDG/GGVSea:**

- **IMDG Class:** -

- **Air transport ICAO-TI and IATA-DGR:**

- **ICAO/IATA Class:** -

- **Transport/Additional information:** Not hazardous for transport according to a.m. regulations.

(Contd. on page 5)

Material Safety Data Sheet

According to 2001/58/EC

Trade name: FLAMMENTIN HM

(Contd. of page 4)

15 Regulatory Information

- **Designation according to EC guidelines:**
The product is not subject to classification according to the calculation methods of the "General Classification Guideline for Preparations of the EC" 1899/45/EC.
- **National regulations**
- **Regulations which may apply in event of accident:**
Control of Major Accident Hazards (COMAH)
Not listed in the COMAH.
- **Water hazard class:** Water hazard class 1 (Self-assessment): slightly hazardous for water.

16 Other Information:

This data is based on our present knowledge. However, it shall not constitute a guarantee for any specific product features and shall not establish a legally valid contractual relationship.

- **Training hints**
Further information under the regulations of use can be taken from the Product Data Sheet. Should you require any information regarding classification and registration of preparations containing this product please contact our Regulatory Affairs Department, Tel: +44(0)1606 818 800.
- **Department issuing data specification sheet:** Technical Department
- **Contact:** Albert Barber
- *** Data compared to the previous version altered.**

GB



CERTIFICATE OF FLAME RESISTANCE

Rose Brand is in business in New York, New York, with headquarters in Secaucus, New Jersey and offices also in California.

The FR fabric described below has been treated with a flame retardant chemical such that the fabric meets the minimum requirements of flame resistance established by the following test:

- NFPA 701 (1989 ed.), small scale
- NFPA 701 (2004 ed.), test method #1
- California Administrative Code Title 19, Section 1237
- CAN/ULS-S109-03 Canadian flame test for fabrics
- BS 5867- test 2 (part B)-1980 British Standard Specifications for Fabrics for Curtains and Draperies



The Fire Marshal of the State of California has registered this fabric as #F-48901.

The flame retardancy has an expected lifetime of at least three (3) years, but is likely to be effective for much longer. The flame retardancy will withstand up to three (3) dry cleanings or non-water washing processes. The flame retardant chemical WILL be removed by water washing. Wide fluctuations in atmospheric humidity as well as accumulations of airborne dust and oils will diminish the endurance and effectiveness of the flame retardant chemical.

Rose Brand recommends annual testing of this fabric using the NFPA 705 (1997 or later) Field Test Method for Textiles.

Purchaser's Name: GLOW GOLF 7570 W 21ST WICHITA KS 67205

For Use At: BRICK PLAZA 56 CHAMBERBRIDGE BRICK NJ 08723

Rose Brand Order #: 874144

Dated: 1/31/2013

Fabric used: 100 yards of 108" wide, 100% cotton, Black heavy weight Muslin

For Rose Brand Textile Fabrics
Customer Service Representative

**SPECIAL NEW YORK CITY CERTIFICATE
AVAILABLE UPON REQUEST**

For
Append
use
4-11-14 M



CERTIFICATE OF FLAME RESISTANCE

Rose Brand is in business in New York, New York, with headquarters in Secaucus, New Jersey and offices also in California.

The FR fabric described below has been treated with a flame retardant chemical such that the fabric meets the minimum requirements of flame resistance established by the following test:

- NFPA 701 (1989 ed.), small scale
- NFPA 701 (2004 ed.), test method #1
- California Administrative Code Title 19, Section 1237
- CAN/ULS-S109-03 Canadian flame test for fabrics
- BS 5867- test 2 (part B)-1980 British Standard Specifications for Fabrics for Curtains and Draperies



The Fire Marshal of the State of California has registered this fabric as **#F-48901**.

The flame retardancy has an expected lifetime of at least three (3) years, but is likely to be effective for much longer. The flame retardancy will withstand up to three (3) dry cleanings or non-water washing processes. The flame retardant chemical WILL be removed by water washing. Wide fluctuations in atmospheric humidity as well as accumulations of airborne dust and oils will diminish the endurance and effectiveness of the flame retardant

chemical.

Rose Brand recommends annual testing of this fabric using the NFPA 705 (1997 or later) Field Test Method for Textiles.

Purchaser's Name: GLOW GOLF

Rose Brand Order #: 874144

Dated: 1/31/2013

Fabric used: 100 yards of 108" wide, 100% cotton, Black heavy weight Muslin

For Rose Brand Textile Fabrics
Customer Service Representative

**SPECIAL NEW YORK CITY CERTIFICATE
AVAILABLE UPON REQUEST**



ROSE BRAND

ROSE BRAND'S 17' Flame Retardant White Muslin

TECHNICAL SPECIFICATIONS

Construction

Content:	100% bleached cotton	FR chemical:	Flammentin HM
Width (+/- 2%)	17'-0" (5.18 meters)	Warp:	NE 17/1
Weight/Square Meter	6 oz. (454 gm)	Weft:	NE 10/1
Threads warp per cm	56	Threads weft per cm:	44
Finish:	Loom State	Harmonized Code:	5209.31.0000

Manufactured to meet the following FR requirements:

N.F.P.A. 701, 1989, Small Scale Test

New York Port Authority

Rules for Tests of Fire Resistive, Flameproofed Materials, City of New York Board of Standards and Appeals, Calendar No. 294-40 S.R.

California Administrative Code Title 19, Paragraph 1237.1, GA 358 01, C 141 01

Manufactured under a ISO 9001 program of quality assurance.

Theatrical Fabrics, Fabrication & Supplies

75 Ninth Avenue
New York, NY 10011
800•223•1624
212•242•7554
212•242•7565 Fax

www.rosebrand.com info@rosebrand.com

10856 Vanowen Street
No. Hollywood, CA 91605
800•360•5056
818•505•6290
Fax 818•505•6293



Material Safety Data Sheet

According to 2001/58/EC

Page 1/5

1 Identification of substance

- Product details
- Trade name: **FLAMENTIN HM**
- Application of the substance / the preparation Flame retardant for textile application
- Manufacturer/Supplier:
THOR GmbH
Landwehrstraße 1
67346 Speyer
Germany

THOR SPECIALITIES (UK) LTD.
Wincham Avenue
Wincham
Cheshire CW9 6GB
England
- Informing department:
Product Management Textile Auxiliaries
Tel.:(UK) +44 1606 818800
Fax :(UK) +44 1606 818801
Email: info@thor.uk.com
- Emergency information: Emergency phone number (24 h service): +49 6 21 60-4 33 33

2 Composition/Data on components

- Chemical characterization
- Description: Flame retardant based on ammonium salts of inorganic acids
- Dangerous components: None

3 Hazards Identification

- Hazard designation: void
- Information pertaining to particular dangers for man and environment void
- Classification system
The product does not have to be classified and labelled due to the calculation procedure of the "General Classification guideline for preparations of the EU" in the latest valid version.

4 First aid measures

- General information No special measures required.
- After inhalation Supply fresh air; consult doctor in case of symptoms.
- After skin contact Wash immediately with plenty of water and soap and rinse thoroughly.
- After eye contact Rinse opened eye for several minutes under running water.
- After swallowing in case of persistent symptoms consult doctor.

5 Fire fighting measures

- Suitable extinguishing agents
Product is non combustible. Use fire fighting measures that suit the environment.
- Unsuitable extinguishing agents for reasons of safety: None
- Special hazards caused by the material, its products of combustion or fume gases:
Can be released in case of fire:
Nitrogen oxides (NOx)

(Contd. on page 2)

RIC

Material Safety Data Sheet

According to 2001/58/EC

Trade name: FLAMENTIN HM

Phosphoric oxides (PxOy)

(Contd. of page 1)

- **Protective equipment:** Wear self-contained breathing apparatus.

6 Accidental release measures

- **Personal safety precautions:** Wear personal protective equipment.
- **Measures for environmental protection:**
Product may have a strong fertilising effect in waste water.
- **Measures for cleaning/collecting:**
Send for recovery or disposal in suitable containers.
Dispose of contaminated material as waste according to item 13.

7 Handling and storage

- **Handling**
- **Information for safe handling:** No special measures required.
- **Information about protection against explosion and fire:** No special measures required.
- **Storage**
- **Requirements to be met by storerooms and containers:** No special requirements.
- **Information about storage in a common storage facility:**
Do not store together with alkalis (caustic solutions).
- **Further information about storage conditions:**
Store in cool, dry conditions in well sealed containers.

8 Exposure controls and personal protection:

- **Additional information about design of technical systems:** No further data; see item 7.
- **Components with critical values that require monitoring at the workplace: ?**
- **Additional information:** Information valid at the time of review of safety data sheet.
- **Personal protective equipment**
- **General protective and hygienic measures** Use skin cream for skin protection.
- **Respiratory protection:**
Put on breathing equipment if dust develops.



Filter P1.

- **Protection of hands:**



Chemical protective gloves with CE-labelling.

After use of gloves apply skin-cleaning agents and skin cosmetics.

- **Material of gloves** Nitrile rubber, NBR

(Contd. on page 3)

Material Safety Data Sheet

According to 2001/58/EC

Trade name: FLAMMENTIN HM

(Contd. of page 2)

- Eye protection:



Hoder / temple spectacles with side protection.

- Body protection: Protective clothing.

9 Physical and chemical properties:

- General information

Form:	Solid
Colour:	White
Odour:	Odourless

- Change in condition

Melting point/Melting range:	not applicable
Boiling point/Boiling range:	not applicable

- Flash point:

Not applicable

- Self-inflammability:

Product is not self-igniting.

- Danger of explosion:

Product is not explosive.

- Density

- Settled apparent density at 20°C ca. 1 000 kg/m³

- Solubility in / Miscibility with Water:

Soluble

- pH-value (100 g/l) at 20°C:

5.0 - 5.5

- Solids content:

100.0 %

10 Stability and reactivity

- Conditions to be avoided: No decomposition if used and stored according to specifications.

- Minimum shelf life:

24 months from production date, if stored dry and at a temperature of about 20°C

- Materials to be avoided:

Strong oxidising agents
Alkalis

- Dangerous reactions Contact with alkali releases irritant gases

- Dangerous products of decomposition:

Irritant gases/vapours
Ammonia

11 Toxicological information

- Acute toxicity:

- LD/LC50 values that are relevant for classification: Product, oral: > 2000 mg/kg rat (calculated)

- Primary irritant effect:

- on the skin: No irritant effect

- on the eye: No irritant effect

(Contd. on page 4)

Material Safety Data Sheet

According to 2001/58/EC

Trade name: FLAMENTIN HM

(Contd. of page 3)

- Sensitization: No sensitising effect known

12 Ecological information:

- Information about elimination (persistence and degradability):

- Method OECD 303

- Degree of elimination:

> 90 %

The product ingredients can be readily eliminated from the sewage.

- Other information:

The components contained are eliminated in biological waste water purification plants by biological means (nitrification/de-nitrification) and chemically (precipitation of phosphorus)

- Behaviour in environmental systems:

- Components: May lead to excess fertilising in water courses.

- Ecotoxicological effects:

- Behaviour in sewage processing plants:

EC50 > 100 mg/l (Activated Sludge)

- Remark:

If contaminated effluent water is properly entered into the sewage system, any interference with the degrading activity of the activated sludge organisms is not expected.

- Additional ecological information:

- nitrogen content: 27.9 %, established as N

- phosphorus content: 2.5 %, established as P

- AOX-indication:

The product does not contain substances, which can influence the AOX of waste water.

- The formulation contains the following heavy metals and compounds according to EC guideline NO. 76/464 EC:

Due to its formulation, the product does not contain any heavy metals.

13 Disposal considerations

- Product:

- Recommendation

Contact manufacturer for recycling information.

Smaller quantities can be disposed of with household garbage.

- Contaminated packaging:

- Recommendation: Packaging can be reused or recycled after cleaning.

- Recommended cleaning agent: Water, if necessary with cleaning agent.

14 Transport information:

- Land transport ADR/RID (cross-border/domestic):

- ADR/RID/ADG (Australia) Class: -

- Maritime transport IMDG/GGVSee:

- IMDG Class: -

- Air transport ICAO-TI and IATA-DGR:

- ICAO/IATA Class: -

- Transport/Additional information: Not hazardous for transport according to a.m. regulations.

(Contd. on page 5)

Material Safety Data Sheet

According to 2001/58/EC

Trade name: FLAMMENTIN HM

(Contd. of page 4)

15 Regulatory Information

- **Designation according to EC guidelines:**
The product is not subject to classification according to the calculation methods of the "General Classification Guideline for Preparations of the EC" 1989/45/EC.
- **National regulations**
- **Regulations which may apply in event of accident:**
Control of Major Accident Hazards (COMAH)
Not listed in the COMAH.
- **Water hazard class:** Water hazard class 1 (Self-assessment): slightly hazardous for water.

16 Other Information:

This data is based on our present knowledge. However, it shall not constitute a guarantee for any specific product features and shall not establish a legally valid contractual relationship.

- **Training hints**
Further information under the regulations of use can be taken from the Product Data Sheet. Should you require any information regarding classification and registration of preparations containing this product please contact our Regulatory Affairs Department, Tel: +44(0)1606 818 800.
- **Department issuing data specification sheet:** Technical Department
- **Contact:** Albert Barber
- *** Data compared to the previous version altered.**

GB



ELECTRICAL SUBCODE TECHNICAL SECTION



Glow Golf

update

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 55 Chamber Bridges Rd.

Owner in Fee: Federal Realty Investment Trust

Tel. () _____ e-mail _____

Address 636 E Jefferson Ave Rockville, Maryland 20852

Contractor: Robert Lombusta Elec. LLC 332, 262-2710

Address 636 E Jefferson Ave Rockville, Maryland 20852

Contractor License No. 13562 Exp. Date 03/15

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

Federal Emp. ID No. 2237222550 FAX: () _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

Building Occupied as _____ [] Pole/Pad # _____ [] Temporary [] Other _____

Est. Cost of Elec. Work \$ 500.00 Utility Co. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[] Partial - Under-slab Utilities Approved

Date: _____ Approved by: _____

[] Electric Plans Approved

Date: _____ Approved by: _____

Joint Plan Review Required:

[] Bidg. [] Plumb. [] Fire. [] Elev.

SUBCODE APPROVAL FOR PERMIT

Date: 5/29/14

Approved by: _____

SUBCODE APPROVAL FOR CERTIFICATE

[] CO [] CPO

Date: 5/30/14

Approved by: _____

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here:

Print name here: Robert Lombusta

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Emergency light, Remote Emeg. lts

QTY. SIZE ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/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 1/4 HP

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$



PERMIT UPDATE

Date Update Issued 5-13-14
Control # C-14-001517
Permit # 14-0548+B

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. Unit 9 Glow Golf Contractor Glow Golf Ventures, LLC
Brick Township, NJ Address 7570 W. 21st Street Wichata KS 67205
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
1626 EAST JEFFERSON ST ROCKVILLE NJ Telephone: (316) 648-2003
20852 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 - INDOOR MINIATURE GOLF ... UPDATE +B - EMERGENCY/EXIT LIGHTS

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$1,100

Daniel Newman Jr
Construction Official

4/30/14
Date

PAYMENTS (Office Use Only)

Building	\$75
Electrical	\$40
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$2
CO Fee	
Other	\$0
Total	\$117
Check No.	
Cash	<u>117.00</u>
Credit	\$0
Collected By	

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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

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

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

☒ 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.

Remote Head's
Ø

Electrical panel Ø 2 Head
↑ Emergency light

Front Door

04-22-14A08:57 RCVD

TOWNSHIP OF BRICK

RELEASED FOR PERMIT

INITIAL

DATE

Building Subcode _____

Fire Subcode _____

Electrical Subcode _____

Plan Reviewer _____

Plans Released _____

Construction Official _____

20 9/20/14

Glow Golf
56 Chambers Bridge
B 671 C 1.01



APPLICATION FOR CERTIFICATE

Date Received 1/29/2014
Date Permit Issued 3/11/2014
Control # C-14-000286
Permit # 14-0548
Date Issued 4/15/2014

IDENTIFICATION

Block 671 Lot 1.01 Qualifier _____
Work Site Location 56 CHAMBERS BRIDGE RD. Unit 9 Former nine Contractor Glow Golf Ventures, LLC
west shoes/to Mini Golf Brick Township, NJ Address 7570 W. 21st Street Wichata KS 67205
Owner in Fee FEDERAL REALTY INVESTMENT TRUST Telephone (316) 648-2003
1626 EAST JEFFERSON ST ROCKVILLE NJ Lic. No. or Bldrs. Reg. No. _____
20852 Federal Employee No. _____
Telephone _____

ACTION

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

USE GROUP M Previous A-3 Current

FINAL COST OF CONSTRUCTION: \$ 4

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

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

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

DESCRIPTION OF WORK/USE:

Alteration TENANT FIT UP ...INDOOR MINIATURE GOLF

I hereby attest that to the best of my knowledge, the completed project meets the conditions of 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 complete by the date on the

SIGNED: _____

Owner/Agent

☐ OWNER

☒ AGENT



CONSTRUCTION PERMIT

Date Issued 3/11/14
Control # C-14-000286
Permit # 14-0548

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. Unit 9 Former nine Contractor Glow Golf Ventures, LLC
west shoes/to Mini Golf Brick Township, NJ Address 7570 W. 21st Street Wichata KS 67205
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
1626 EAST JEFFERSON ST. ROCKVILLE NJ Telephone: (316) 648-2003
20852 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 INDOOR MINIATURE GOLF

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 \$4

David J. Newman Jr.
Construction Official

Date 3/11/14

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	\$75
Electrical	\$40
Plumbing	\$50
Fire Protection	\$65
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$231
Check No. <u>669</u>	
Cash	\$0
Credit	\$0
Collected By	

150
281

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:

03/11/14 12:17PM 001550H0506
BUILDING \$75.00
ELECTRIC \$40.00
PLUMBING \$50.00
FIRE \$65.00
DCA \$1.00
ZFA \$50.00
TOTAL \$281.00

- ☒ 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 AL
DATE REC'D 1-28-14

ZONING PERMIT APPLICATION

PERMIT # 2014-00145
DATE ISSUED 3/11/14

BLOCK: 671 LOT: 1.01 QUALIFIER: — SITE ADDRESS: 56 Chambers Bridge Rd
100 Chambers Bridge Ave, UNIT 9

1201+9

IDENTIFICATION:

56 Chambers Bridge Rd.

1. NAME OF OWNER IN FEE: Glow Golf Ventures, LLC
COMPLETE ADDRESS: 7570 W 21ST BLVD 1026

WICHITA, KS 67205

PHONE # 316-648-2003 EMAIL: BENNY1973@CMTL.COM

2. NAME OF APPLICANT: ~~SAINT AS APPLICANT~~

APPLICANT ADDRESS: WATSON HESSBLEN

PHONE # 732-262-7444 EMAIL: wdhessbllen@CMTL.COM

3. RESPONSIBLE PERSON FOR WORK: JEFF BENNET
PHONE # 316-648-2003 FAX# —

4. SIGNATURE OF APPLICANT: Jeff Bennett

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: — *ADDITION — *ALTERATION — *PORCH — *DECK —

POOL: ABOVE GROUND — IN GROUND — FENCE: HEIGHT — TYPE — MATERIAL —

HEIGHT: — (*IF APPLICABLE)

OTHER: —

DESCRIPTION: TENNANT FIT-UP

ZONING REVIEW: — DATE REVIEWED: — DATE DENIED: — DATE APPROVED: — INTLS: — (SEE BACK PAGE)

FOR OFFICE USE ONLY

FEE SUMMARY:

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

REQUIRED BY APPLICANT

RESIDENTIAL: —
COMMERCIAL: ✓
EXISTING USE: Shore store
PROPOSED USE: Miniature Golf

BOARD APPROVAL: — PB — ZB —
RESOLUTION#: —
APPROVAL DATE: —

OFFICE USE ONLY

ZONING REVIEW:

DATE REVIEWED: 2/6/14 DATE DENIED: DATE APPROVED: 2/6/14 INTLS: SKZ

[illegible]



Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued: _____
Application Number: ZA-14-00093
Application Date: 02/05/2014
Project Number: _____
Permit Number: _____
Fee: \$50

Zoning Permit

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

Block: 671
Lot: 1.01
Qualifier: _____
Zone: B-3

Owner: **Glow Golf Ventures, LLC**
Address: **7570 w 21st St. Bldg. 1026**
Wichita, KS 67205

Applicant: **Glow Golf Ventures, LLC**
Address: **7570 w 21st St. Bldg. 1026**
Wichita, NJ 67205

Application Approved Date: 02/05/2014

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Commercial Recreation Shoe Store to Miniature Golf

Nonconforming Use is: _____

Work Description:

**Rehabilitation, Tenant fit up -
Shoe Store to Miniature Golf Tenant Fit-Up**

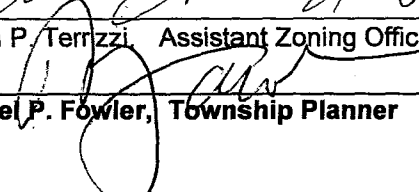
Additional Zoning permit is required for additional work.

Upon review it was determined that the Development Application:

- ☒ Permitted by Ordinance
☐ Permitted by Variance approved on: _____
☐ Valid Nonconforming Use is established by
☐ Zoning Board of Adjustment
☐ Zoning Officer



Darren P. Terrizzi, Assistant Zoning Officer

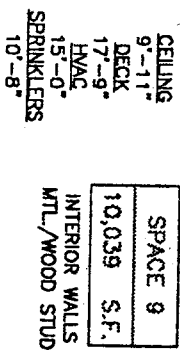


Michael P. Fowler, Township Planner

02/05/2014

Date


Date

[illegible]

NOTES

- 1) ALL EXISTING CONDITIONS AND DIMENSIONS SHOWN TO BE FIELD VERIFIED BY TENANT.
- 2) ALL UTILITY LOCATIONS SHOWN ARE APPROXIMATE. FIELD VERIFY EXACT LOCATIONS AND SIZES.
- 3) FOR THE PURPOSE OF CALCULATING SQUARE FOOTAGE, ALL MEASUREMENTS SHALL BE MADE FROM THE EXTERIOR FACE OF EXTERIOR WALLS AND COMMON AREA WALLS AND THE CENTERLINE OF DEMISING PARTITIONS.

SPACE

SPACE

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____
PERMIT #: _____

BLOCK: 671

LOT: 1.01 ADDRESS: 56 Chambers Bridge Rd. Unit 9

IDENTIFICATION:

1. WORK SITE ADDRESS: 56 Chambers Bridge Rd. Unit 9

2. NAME OF OWNER IN FEE: Glow Golf LLC

ADDRESS: 7570 W 28th St PHONE #: 316 648-2003

316-1026, Wichita, KS FAX #: () _____

3. PRINCIPAL CONTRACTOR: N/A

ADDRESS: _____ PHONE #: () _____

FAX #: () _____

4. ARCHITECT OR ENGINEER: WATSON J. HESSBENLICH

ADDRESS: 2765 Heydon Ave, Belle PHONE: # (733) 262-7444

5. RESPONSIBLE PERSON FOR WORK: W. HESSBENLICH

ADDRESS: Same

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

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☐ OTHER _____

LENGTH: _____ WIDTH: _____ HEIGHT: _____

ENGINEERING REVIEW:

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: _____

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

TOWNSHIP OF BRICK

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

John G. Ducey, Mayor

Township Council:

Susan Lydecker - President
Jim Fozman - Vice President
Heather deJong
Bob Moore
Paul Mummolo
Marianna Pontoriero



Department of Community Development & Land Use

732-262-1027

Fax: 732-262-2941
www.twp.brick.nj.us

Date: 1-28-14

ENGINEERING PLOT PLAN EXEMPT FORM (ONLY IF NOT IN A FLOOD ZONE)

Block: 671 Lot: 1201

Property Address: 56 CHAMBERS BRIDGE RD.

I, WALTER HESSBERGER of 2715 Hooper Ave, Suite 2C, BRICK NJ
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Township Code, Chapter 245, Section 245-29.

Walter H. Berger
Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.
2. **Proof that the property is not located in a Flood Hazard Area.**

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

FOR OFFICE USE ONLY

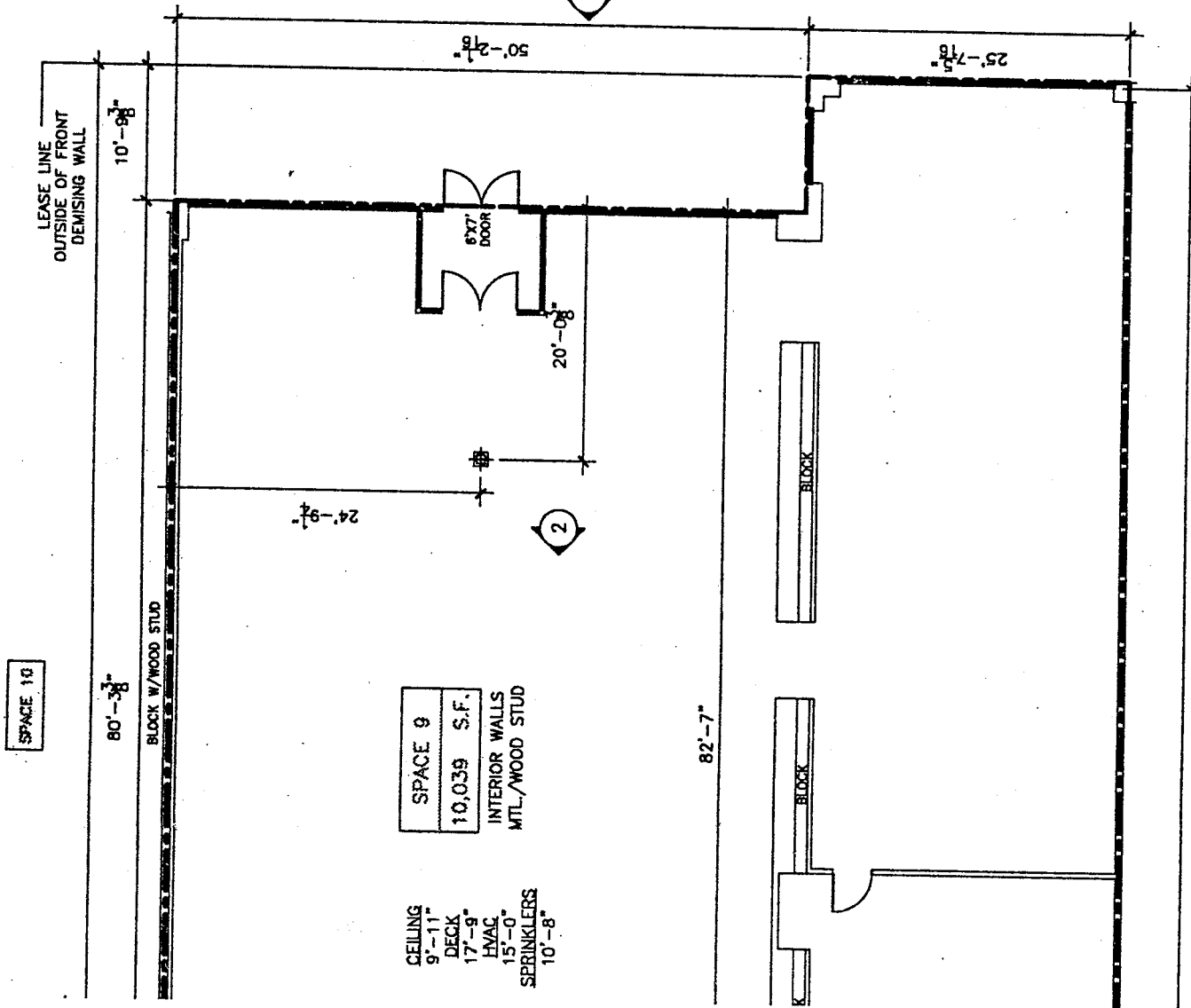
Approved on: _____ Signed: _____

Rejected on: _____ Signed: _____

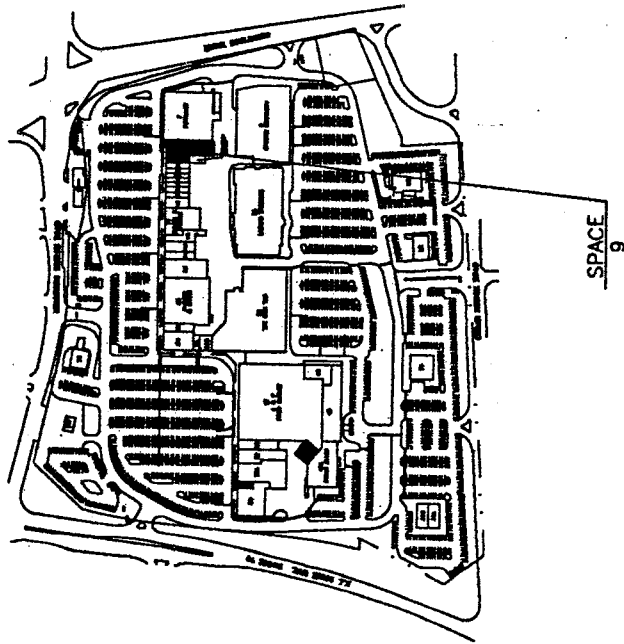
Comments:



2 INTERIOR ELEVATION



KEY PLAN



TENANT DATA		LEGEND	
LEASEABLE AREA:	10,039 SF	FL TO JOIST CLEAR HT:	10'-4"
SPRINKLERED:	YES	NO. OF EXITS:	2
CONSTRUCTION CLASS:	N/A	STOREFRONT:	BLOCK/ALUMINUM
FINISHED FL DATUM:	0'-0" AFF	TYPE:	0'-0"
ELEC. CAPACITY:	PANEL PP1A: 225A PANEL PP1B: 225A	SILL HT:	10'-5 11/16"
HMAC TYPE:	SPLIT - GAS/ELEC	HEAD HT:	10'-5 11/16"
WATER SUPPLY:	YES	V.C.T. = VINYL COATED TILE	
WATER METER:	YES	A.C.T. = ACoustical CEILING	
		TILE M.H. = MOUNTING HT.	
		U.S. = UTILITY SINK	
		A.F.F. = ABOVE FINISHED FLOOR	
		B.F.F. = BELOW FINISHED FLOOR	

NOTES

- 1) ALL EXISTING CONDITIONS AND DIMENSIONS SHOWN TO BE FIELD VERIFIED BY TENANT.
- 2) ALL UTILITY LOCATIONS SHOWN ARE APPROXIMATE. FIELD VERIFY EXACT LOCATIONS AND SIZES.
- 3) FOR THE PURPOSE OF CALCULATING SQUARE FOOTAGE, ALL MEASUREMENTS SHALL BE MADE FROM THE EXTERIOR FACE OF EXTERIOR WALLS AND COMMON AREA WALLS AND THE CENTERLINE OF DEMISING PARTITIONS.

PROJECT NAME:

BRICK PLAZA

ISSUE DATE:

04-10-12

SPACE

5559 0065 1000 0692 ET02

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

V-14-00107

Sent To: Glow Golf Ventures LLC
Street, Apt. No. or P.O. Box No. 7570 W. 21st Street
City, State, ZIP+4 Wichita, KS 67205

PS Form 3800, August 2006 See Reverse for Instructions

V-14-00107 LU

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature <u>[Signature]</u> ☐ Agent ☐ Addressee B. Received by (Printed Name) <u>[Signature]</u> C. Date of Delivery <u>7-21</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to: <u>Glow Golf Ventures</u> <u>7570 W. 21st Street</u> <u>Wichita, KS 67205</u>	3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	

7013 2630 0001 5900 6535

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

- C. ☐ I further certify that I will perform or supervise the following work:

C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☒ Electrical C.4. ☐ Plumbing

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

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

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

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

☐ Check if contractor.

Agent Name Sean Yamberson

Address 238 Shawellton Ave Abscon, NJ 08201

Telephone (609) 839-2907

Signature [Signature]

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

*5/29/14W - Final 12-

1) Need Ark to provide As Burt's
To reflect feeding - ball by
Eled Panel

1) (B) feeds

Ext

(4) 6/2013

Fire rating on curtains
Lazer machine

- Needs sprinklers installed
- Need specs
- Need to remove to open
- Know box key

Jeff Bennett owner

(C) 316-648-2003

Shawn Tomlinson

(C) 809-838-2907

↑ (F) Feb