



CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-13-001645**I. IDENTIFICATION**

1. Proposed Work Site at: 1048 Cedar Bridge Rd. Township of Brick 08724

2. Name of Owner in Fee: Federal Realty Investment Trust
Tel. 484-419-1215 e-mail djoss@federalrealty.com
Address 50 E. Wyomewood Rd Wyomewood, PA. 19096
street municipality zip code

3. Ownership in Fee: Public _____ Private ☒

4. Principal Contractor: Mulvey Construction Inc. Tel. 716-434-1401
Address 5583 Davison Rd Lockport, NY 14094 e-mail jstella@mulveyconstruction.com
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____ FAX: _____

5. Architect or Engineer John W. Wister Contact CHAD BROOK
Address 115 Westtown Rd West Chester, PA. e-mail cbrook@westerly.com
Tel. 610-429-4470 FAX: 610-429-4470

6. Responsible Person in Charge once Work has Begun John W. Wister
Tel. 716-359-4220 FAX: 716-359-9029

V. FEE SUMMARY (for office use only)

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

VI. BUILDING CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure	<u>18</u> ft.
3. Area — Largest Floor	<u>6000</u> sq. ft.
4. New Building Area	sq. ft.
5. Volume of New Structure	cu. ft.
6. Max. Live Load	
7. Max. Occupancy Load	
8. If Industrialized Building: State Approved _____ HUD _____	
9. Total Land Area Disturbed	sq. ft.
10. Flood Hazard Zone	
11. Base Flood Elevation	ft.
12. Wetlands yes _____ no <u>X</u>	

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

TOTAL COST \$0

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. ☐ LPG Gas Tanks
12. ☐ Fire Alarm

VII. DESCRIPTION OF BUILDING USE**A. RESIDENTIAL (primary use)**

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

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: _____
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present: _____

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

- D. Construct. Classification: Present _____ Proposed _____



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 1.01 Qualification Code _____
 Work Site Location 1048 Cedar Bridge Rd
Levuship of Brick, 05 08424
 Owner in Fee: Federal Realty Investment Trust
 Tel. 484-419-1215 e-mail djess@federalrealty.com
 Address 50 E. Woodward Rd Wyvernwood PA 19096
 Contractor: Mulvey Construction Steel municipality Tel. 716-434-1404 zip code _____
 Address 5583 Danvers Rd e-mail jstehler@mulveyconstruction.com

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	Dates (Month/Day)			
						Type:	Failure	Failure	Approval	Initial
☐	No Plans Required					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 PERMIT						Finishes -Base Layer				
Date: _____						Finishes -Final				
Approved by: _____						Energy				
SUBCODE APPROVAL for CERTIFICATE						Mechanical				
☐ CO ☐ CCO ☐ CA						TCO				
Date: _____						Other				
Approved by: _____						Final				
						Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present M 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 2C Proposed _____

If Industrialized Building: _____

State Approved _____ HUD _____

Est. Cost of Bldg. Work: _____

1. New Bldg. \$ 26,500 Demolition

2. Rehabilitation \$ _____

3. Total (1+2) \$ 0

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: Jeff Stehle

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Demolition & Disposal of existing single story building.

FEE (Office Use Only)

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

Date Received 13-12-15
 Control # 3-20-13
 Date Issued _____
 Permit # _____

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 Mulvey Construction

Address 5583 Davison Rd Lockport, NY 14094

Telephone 716-359-4220

Signature [Signature]

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



CONSTRUCTION PERMIT

Date Issued _____
Control # C-13-001645
Permit # _____

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. Joe's Crab Shack Contractor Mulvey Construction, Inc.
Brick Township, NJ Address 5583 Davidson Road Lockport NY 14046
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
1626 EAST JEFFERSON ST ROCKVILLE NJ Telephone: (716) 434-1404
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:

DEMOLITION OF COMERCIAL STRUCTURE

Note: If constuction 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 \$26,500

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	_____	\$75
Electrical	_____	\$0
Plumbing	_____	\$0
Fire Protection	_____	\$0
Elevator Devices	_____	\$0
Other	_____	\$0.00
DCA Training Fee	_____	\$0
CO Fee	_____	
Other	_____	\$0
Total	_____	\$75
Check No.	_____	
Cash	_____	\$75
Credit	_____	\$0
Collected By	_____	Christopher Romano

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.

This form must be handed in with permit application or a permit will not be issued

ATTN: Jeff STEHLER

Phone 716-434-1404 fax 716-434-9029 1/21/2013

TOWNSHIP OF BRICK
Debris Form

Work Site Address: 1048 CEDAR BRIDGE AVE

Block: _____ Lot: _____

Sub/ Contractor: TOTAL SITE IMPROVEMENTS LLC

Contractor's Address: 1529 RT 206 SUITE K - TABERNASCO NJ 08088

Type of Construction (minor, new home): WOOD BRICK CONC + ROOFING REMOVAL

Type of Debris (shingles, siding, wood, etc.): WOOD BRICK CONC + ROOFING

Party responsible for removal: SEE ATTACHED SHEET

Dumpster size: 10 20 & 30 yds.

Destination of debris: SEE ATTACHED SHEET

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclable.

Generator's Certification: Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation.

Charles E. Laci
Signature

1/25/2013
Date

CHARLES E LACI
Print Name

COMPANY NAME	DEMO COMPANY	CITY	STATE	ZIP	PHONE
J & D TRUCKING INC.	326 NW BLVD	VINELAND	NJ	8360	8566915145
J CIPAS CONTAINER SERVICE	183 BEACON HILL ROAD	MORGANVILLE	NJ	7751	8779700279
J COSENTINO SERVICES LLC	699 BOONTON AVE	BOONTON	NJ	7005	9733343170
J F A CONTRACTORS	61 DONATO DRIVE	LITTLE FALLS	NJ	7424	9737859590
J F MORENA CO	PO BOX 696/408 WHITTON ST	LODI	NJ	7644	2013353566
J S INDUSTRIAL SERV CO	PO BOX 318	JAMESBURG	NJ	8831	7325210910
J K CARTING LLC	522 EAST 3RD STREET	PATERSON	NJ	7504	9733578081
J L DAVIS JOB MANAGEMENT INC	PO BOX 524	OCEAN VIEW	NJ	8230	6098610002
J M G SERVICES INC	303 MYRTLE AVENUE	GARWOOD	NJ	7027	9082332699
J P FIDLER TRUCKING LLC	2101 DERBY DRIVE	CINNAMINSON	NJ	8077	6093523332
J PYSKATY DISPOSAL INC	800 CASTLE RD	SECAUCUS	NJ	7094	2018670660
J R DE BASTOS ENT INC.	43 WEST OHIO AVENUE	BEACH HAVEN	NJ	8008	6094923888
J V BULK PICK UPS	150 DECKERTOWN TPKE	MONTAGUE	NJ	7827	9739192019
J VINCH & SONS INC	PO BOX 5465	TRENTON	NJ	8638	6098833644
J P MASCARO & SONS	269 AUDUBON ROAD	AUDUBON	PA	19403	4843986500
J L SEPTIC OF SOUTH JERSEY IN	PO BOX 422/2265 COLLS MILL RD	FRANKLINVILLE	NJ	8322	8566944848
J V E INC	221 MECHANIC STREET	CAMDEN	NJ	8104	8564562000
JACK ROBINSON WA. DIS. SER. IN	444 OAKLAND AVENUE	BELLMAWR	NJ	8031	8569313133
JACOBS DEMOLITION	521 TAYLOR AVE E	MANASQUAN	NJ	8736	7325283800
JANUARY TRANSPORT INC	2701 S PROSPECT	OKLAHOMA CITY	OK	73129	4056702030
JAZZ HAULING	PO BOX 272	KEASBEY	NJ	8832	7324424552
JEFFS HAULING & CLEANING	PO BOX 287	OLDWICK	NJ	8838	9084399888
JEG INC	992 EAST 28TH ST	PATERSON	NJ	7513	9733571111
JEM SANITATION	PO BOX 708	LYNDHURST	NJ	7071	201931717
JER CAR INC	41 COMO DR	SOMERSET	NJ	8873	7325681250
JERRY'S EXCAVATING	274 INDIAN TRAIL RD	CAPE MAY COURT HOUSE	NJ	8210	6094652715
JERSEY CENTRAL CONTRACTING INC	236 N 2ND STREET	SURE CITY	NJ	8008	6092098815
JERSEY CENTRAL LANDSCAPING CO	320 LANCES MILL RD	HOWELL	NJ	7731	8884582500
JERSEY MATERIAL RECYCLING CORP	PO BOX 95	SEVAREN	NJ	7077	7326362155
JERZEE CARTING INC	687 WILLOW AVE	GARWOOD	NJ	7027	9086545565
JERZEE CONTAINER CORP.	133 C BARTLETT AVE	WEST CREEK	NJ	8092	6096531222
JESSE BARO INC	157 QUARRY ROAD	DOUGLASVILLE	PA	19518	6103238783
JESUS M ACEVEDO TRUCKING	971 LINDEN AVE	KEARNY	NJ	7032	2014106710
JIMMY BYRNE TRUCKING	1199 RANDALL AVENUE	BRONX	NY	10474	7186170771
JLD TRUCKING	328 54TH ST APT 2	WEST NEW YORK	NJ	7093	2018324851

* DESTROYED - OCEAN CO LANDFILL.



Vertex Environmental Services, Inc.
Vertex Environmental Insurance Services, Inc.
Vertex Construction Services, Inc.
Vertex International Services
Vertex Air Quality Services, LLC
Vertex Ingenieros Consultores, S. de R.L. de C.V.

700 Turner Way
Suite #105
Aston, PA 19014
www.vertexeng.com
p: 610.558.8902
f: 610.558.8904

December 20, 2012

John W. Lister Architects
115 Westtown Road, Suite 21
West Chester, PA 19382
Attn: Ms. Colleen Brogan

Reference: **Pre-Demolition Asbestos Inspection**
Brick Plaza – Pad M

Dear Ms Brogan:

In November 2012, John W. Lister Architects retained VERTEX Air Quality Services, LLC (VERTEX) to perform a pre-demolition asbestos inspection of a designated space at Brick Plaza located at 1048 Cedar Bridge Road in Brick, New Jersey.

Specifically, a pre-demolition asbestos inspection was performed throughout Pad M on December 14, 2012 by EPA AHERA Certified Asbestos Building Inspector, David S. Brown.

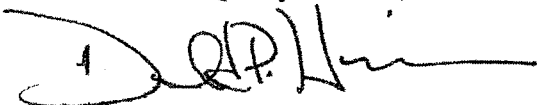
Suspect materials were evaluated, sampled and submitted under chain of custody to EMSL Analytical, Inc. of Cinnaminson, New Jersey.

Results indicate that **no** asbestos was detected within the suspect materials evaluated and sampled.

Sample analysis was performed by Polarized Light Microscopy (PLM) in accordance with EPA Method 600/R-93/116 in EMSL Analytical, Inc.'s laboratory located in Cinnaminson, New Jersey. The analytical detection limit of this method is 1% by weight. Note: Polarized Light Microscopy (PLM) is not consistently reliable in detecting asbestos in floor coverings and similar non-friable organically bound (NOB) materials. Fiber size (both length & diameter) of NOBs is frequently very small limiting fiber detection by PLM optics. Fibers are also tightly bound in the matrix of NOBs obscuring their detection. The New Jersey Department of Health requires confirmatory analysis via Transmission Electron Microscopy (TEM) methodology of NOB samples with negative asbestos content by PLM. TEM analysis was performed on samples yielding negative PLM results by EMSL Analytical, Inc.

If you should have any questions or require further information, please feel do not hesitate to contact me.

Sincerely,
VERTEX Air Quality Services, LLC


Donald P. Heim
Sr. Vice President



Environmental



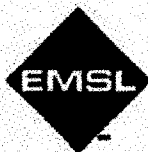
Construction



Air Quality



Energy



EMSL Analytical, Inc.

200 Route 130 North Cinnaminson, NJ 08077
Phone/Fax: (800) 220-3675 / (856) 786-5974
<http://www.emsl.com> / cinnasbiab@EMSL.com

EMSL Order ID: 041232140
Customer ID: VRTX78
Customer PO:
Project ID:

Attn: Don Heim
Vertex Environmental Services
700 Turner Way, Suite 105
Aston, PA 19014

Phone: (610) 558-8902
Fax: (610) 558-8904
Collected:
Received: 12/14/2012
Analyzed: 12/18/2012

Proj: PA 578

Summary Test Report for Asbestos Analysis in Accordance with N.J.A.C. 8:60 and 12:120 via EPA 600/R-93/116

Client Sample ID: F-1 Lab Sample ID: 041232140-0001
Sample Description: Drywall/JC

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Various	10%	90%	None Detected	

Client Sample ID: F-2 Lab Sample ID: 041232140-0002
Sample Description: Drywall/JC

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Various	15%	85%	None Detected	

Client Sample ID: F-3 Lab Sample ID: 041232140-0003
Sample Description: Drywall/JC

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/16/2012	Various	15%	85%	None Detected	

Client Sample ID: F-4 Lab Sample ID: 041232140-0004
Sample Description: 2x2 Fissure CT

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Gray/White	80%	20%	None Detected	

Client Sample ID: F-5 Lab Sample ID: 041232140-0005
Sample Description: 2x2 Fissure CT

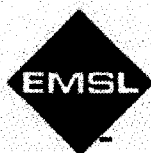
TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Gray/White	80%	20%	None Detected	

Client Sample ID: F-6 Lab Sample ID: 041232140-0006
Sample Description: 2x2 Fissure CT

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/16/2012	Gray/White	75%	25%	None Detected	

Client Sample ID: F-7-Floor Tile Lab Sample ID: 041232140-0007
Sample Description: 12" Tan marble FT/M

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Tan	0%	100%	None Detected	
TEM Grav. Reduction	12/18/2012	Gray	0.0%	100%	None Detected	



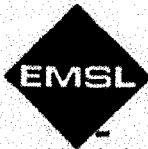
EMSL Analytical, Inc.

200 Route 130 North Cinnaminson, NJ 08077
Phone/Fax: (800) 220-3675 / (856) 786-5974
<http://www.emsl.com> / cinnaslab@EMSL.com

EMSL Order ID: 041232140
Customer ID: VRTX78
Customer PO:
Project ID:

Summary Test Report for Asbestos Analysis in Accordance with N.J.A.C. 8:60 and 12:120 via EPA 600/R-93/116

Client Sample ID: F-7-Mastic		Lab Sample ID: 041232140-0007A				
Sample Description: 12" Tan marble FT/M						
TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Yellow	0%	100%	None Detected	
TEM Grav. Reduction	12/18/2012				Insufficient Material	
Client Sample ID: F-8-Floor Tile		Lab Sample ID: 041232140-0008				
Sample Description: 12" Tan marble FT/M						
TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Tan	0%	100%	None Detected	
Client Sample ID: F-8-Mastic		Lab Sample ID: 041232140-0008A				
Sample Description: 12" Tan marble FT/M						
TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Yellow	0%	100%	None Detected	
Client Sample ID: F-9-Floor Tile		Lab Sample ID: 041232140-0009				
Sample Description: 12" Tan marble FT/M						
TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/16/2012	Gray	0%	100%	None Detected	
Client Sample ID: F-9-Mastic		Lab Sample ID: 041232140-0009A				
Sample Description: 12" Tan marble FT/M						
TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/16/2012	Black	0%	100%	None Detected	
Client Sample ID: F-10-Brick		Lab Sample ID: 041232140-0010				
Sample Description: Brick & Mortar						
TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Red	0%	100%	None Detected	
Client Sample ID: F-10-Mortar		Lab Sample ID: 041232140-0010A				
Sample Description: Brick & Mortar						
TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Red	0%	100%	None Detected	
Client Sample ID: F-11-Brick		Lab Sample ID: 041232140-0011				
Sample Description: Brick & Mortar						
TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/16/2012	Red	0%	100%	None Detected	



EMSL Analytical, Inc.

200 Route 130 North Cinnaminson, NJ 08077
Phone/Fax: (800) 220-3675 / (856) 786-5974
<http://www.emsl.com> / cinnasblab@EMSL.com

EMSL Order ID: 041232140
Customer ID: VRTX78
Customer PO:
Project ID:

Summary Test Report for Asbestos Analysis in Accordance with N.J.A.C. 8:60 and 12:120 via EPA 600/R-93/116

Client Sample ID: F-11-Mortar

Lab Sample ID: 041232140-0011A

Sample Description: Brick & Mortar

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/16/2012	Red	0%	100%	None Detected	

Client Sample ID: F-12

Lab Sample ID: 041232140-0012

Sample Description: Expansion joint caulk

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/16/2012	Red	0%	100%	None Detected	
TEM Grav. Reduction	12/18/2012	Red	0.0%	100%	None Detected	

Client Sample ID: F-13

Lab Sample ID: 041232140-0013

Sample Description: Tar sealer a/w rubber membrane

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/15/2012	Black	0%	100%	None Detected	

Client Sample ID: F-14

Lab Sample ID: 041232140-0014

Sample Description: Tar sealer a/w rubber membrane

TEST	Analyzed Date	Color	Non-Asbestos		Asbestos	Comment
			Fibrous	Non-Fibrous		
PLM	12/16/2012	Black	0%	100%	None Detected	Recommend TEM
TEM Grav. Reduction	12/18/2012	Black	0.0%	100%	None Detected	

Analyst(s)

Chris Little	TEM Grav. Reduction	(3)
Naadira Carter	PLM	(11)
Samantha Rundstorm	PLM	(8)

Stephen Siegel, CIH, Laboratory Manager
or other Approved Signatory

Any questions please contact Steve Siegel.

EMSL maintains liability limited to cost of analysis. This report relates only to the samples reported above and may not be reproduced, except in full, without written approval by EMSL. This test report must not be used to claim product endorsement by NVLAP or any agency of the U.S. Government. EMSL bears no responsibility for sample collection activities or analytical method limitations. The laboratory is not responsible for the accuracy of results when requested to physically separate and analyze layered samples. PLM alone is not consistently reliable in detecting asbestos in floor coverings and similar NOBs.

Samples analyzed by EMSL Analytical, Inc. Cinnaminson, NJ NVLAP Lab Code 101048-0, AIHA-LAP, LLC-IHLAP Lab 100194, NYS ELAP 10872, NJ DEP 03036

Initial report from: 12/17/2012 06:47:00



March 19, 2013

Muldevy Construction
6583 Davison Road
Lockport, NY 10494

RE: 1048 Cedar Bridge Road-Brick

Dear

Per your request, New Jersey Natural Gas Company has investigated the above referenced property for the presence of natural gas facilities. The facilities (if any) have been permanently retired at the main, which may be in the road or behind the curb.

*****IMPORTANT*****

PLEASE READ CAREFULLY

SHOULD YOU REQUIRE GAS SERVICE RESTORED, PLEASE FOLLOW THE DIRECTIONS BELOW:

1. Call 1-800-221-0051, a minimum of 6 weeks prior to the estimated reconnection date. This is necessary for us to obtain permits required to restore your service.
2. When you call, ask to speak to a **MARKETING REPRESENTATIVE**, who will assist you to have a new gas service line run.
3. Please be advised that the new service line must be installed according to the current company installation standards.

NEW JERSEY NATURAL GAS COMPANY
1420 Wyckoff Road
Wall, New Jersey 07719

c. NBPT
File

March 7, 2013

Rick Sabilia
sibco@optonline.net

Ref: DR #328398639

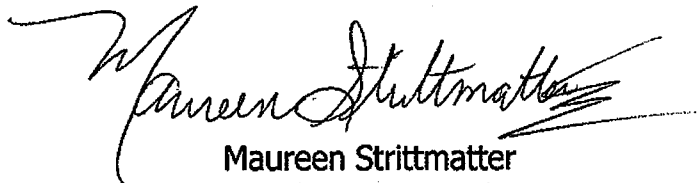
Dear Customer:

This letter confirms that Jersey Central Power & Light Company has performed a field inspection of the building listed below and determined that our electric service cables and meters have been removed.

1048 Cedarbridge Rd
Brick NJ 08723

This notification is effective as of the above date, and certifies the referenced building is now electrically safe for demolition.

Sincerely,



Maureen Strittmatter
Distribution Specialist

MS/bmc



1551 Highway 88 West * Brick, New Jersey 08724-2399
(732) 458-7000 * FAX (732) 458-5378
www.brickmua.com

JAMES F. LACEY, C.P.W.M.
Executive Director

March 06, 2013

FEDERAL RLTY INVESTMENT TRUST
PO BOX 182601
ATT:MS#7 SITE#5001047
COLUMBUS OH 43218-2601

Account: 3592814-49
Service Location: 1048 CEDARBRIDGE AVE #38 BROKE
Block: 671_1.01
Subject: Building to Be Demolished and Reconstructed

Dear Customer,

This is to certify that the water and sewer service at the subject property has been terminated and the water metering system has been removed.

If further information is required, please contact the undersigned.

Respectfully yours,

BEVERLY
Customer accounts representative

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