BLOCK 671 LOT 6 QUALIF /CODE 1.01 ADDRESS (SITE) Brick Plaza PERMIT NO. 12-2242

# CONSTRUCTION PERMIT APPLICATION

C12-002605

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

## I. IDENTIFICATION

1. Proposed Work Site at: Chambers Bridge Rd & Route 70
2. Name of Owner in Fee: Federal Realty
   Tel. (301) 998 9100 e-mail
   Address: 1626 E Jefferson St Rockville MD 20852
   street municipality zip code
3. Ownership in Fee: Public Private
4. Principal Contractor: J A Wig Const & Electrical Tel. (609) 758 1844
   Address 124 Bobbin Terrace e-mail jawigllc@comcast.net
   License No. OR, if new home, Builder Reg. No. 14815 Exp. Date 3/31/15
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
   Federal Emp. ID No. 16-1644430 Fax (609) 758 4629
5. Architect or Engineer Innovative Engineering Contact
   Address 147 Route 34 Wall Township e-mail
   Tel. (732) 449-0099 FAX (732) 449 3131
6. Responsible Person in Charge once Work has Begun Jake Wig
   Tel (609) 758 1844 FAX (609) 758 4629

Date

## V. FEE SUMMARY (for office use only)

| | | | Update | Update |
|---|---|---|---|---|
| 1. | Building | $ 975-/486 | | |
| 2. | Electrical | | | |
| 3. | Plumbing | | | |
| 4. | Fire Protection | | | |
| 5. | Elevator Devices | | | |
| 6. | Subtotal | | | |
| 7. | Less 20% for State Plan Review | $ | | |
| 8. | Subtotal | $ | | |
| 9. | State Permit Surcharge Fee | 74- | | |
| 10. | Subtotal | $ | | |
| 11. | Cert. of Occupancy | | | |
| 12. | Other | | | |
| 13. | TOTAL | $ 1135- | | |

## VI. BUILDING/SITE CHARACTERISTICS

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

## IIa. PROPOSED WORK:

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

COMMERCIAL

## IIb. SUBCODES:

(Check all that apply)

FOR OFFICE USE ONLY (Optional)

| | Est. Cost | Plans Rec'd by | Date Rec'd | Rejection Date | Approval Date | Re-viewer | Resubmission Dates Approval | Resubmission Dates Rejection | Re-viewer |
|---|---|---|---|---|---|---|---|---|---|
| ☑ Building | 1500 | CR | 7/13/12 | | 8/7/12 | | | | |
| ☑ Electrical | 42,000 | | | | 7/24/12 | JV | | | |
| ☐ Plumbing | | | | | | | | | |
| ☐ Fire Protection | | | | | | | | | |
| ☐ Elevator | | Eng Exempt | | | 9/25/12 | ECC | | | |
| TOTAL COSTS | 43,500 | | | | | | | | |

## VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

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

B. NON-RESIDENTIAL *(primary use)*

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

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

D. Construct. Classification: Present Proposed

## III. DO YOU WANT: (optional)

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Undergroound Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LP Gas Tanks

FOLD

**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(e)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 J A Wig Const & Electric LLC

Address 124 Bibbs Ter West Egg NJ 08533

Telephone 609 ) 758 1844

Signature _____

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

**UCC/F-100**
**Professional Printing**
**(856) 468-7933**

FOLD

OFFICE DATE RECEIVED: _____

| VIII. PRIOR APPROVALS CHECKLIST (office use only) | LOCAL APPROVAL | | COUNTY APPROVAL | | REGIONAL APPROVAL | | STATE APPROVAL | | COMMENTS |
|---|---|---|---|---|---|---|---|---|---|
| | Prelimin. Initial | Final Date | Prelimin. Initial | Final Date | Prelimin. Initial | Final Date | Prelimin. Initial | Final Date | |
| ☒ Zoning Officer | SC | 7/20/12 | | | | | | | ZA-12-00771 |
| ☐ Planning Board | | | | | | | | | |
| ☐ Zoning Board | | | | | | | | | |
| ☐ Sewer Authority | | | | | | | | | |
| ☐ Water Authority | | | | | | | | | |
| ☐ Police Department | | | | | | | | | |
| ☐ Health Department | | | | | | | | | |
| ☐ Soil Conservation | | | | | | | | | |
| ☐ N.J. Department of Community Affairs | | | | | | | | | |
| ☐ N.J. Department of Transportation | | | | | | | | | |
| ☐ N.J. Department of Environmental Protection | | | | | | | | | |
| ☐ Utility Dig No. | | | | | | | | | |
| ☐ | | | | | | | | | |
| ☐ | | | | | | | | | |

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

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

**X. CERTIFICATES ISSUED** (office use only)

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

# BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 8-9-12
Date Issued
Control #
Permit # 12-2242

**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 Brick Plaza
Chambers Bridge Rd & Route 70 Brick Twp Shop Rd

Owner in Fee Federal Realty

Address 1626 E Jefferson St
Rockville MD 20852

Tel. ( )

Contractor J. A. WIG CONSTRUCTION & ELECTRIC, LLC

Address 124 BOBBIS TERRACE
NEW EGYPT, NEW JERSEY 08533

Tel. ( 609 ) 758-1844 FAX ( 609 ) 758-4629

Contractor License No. or Builder Registration No. 14815

Federal Emp. No 16-1644430

**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.

Signature

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

Concrete Bollards
Install 2 Bollards to protect
Electrical Equipment

**JOB SUMMARY (Office Use Only)**

| PLAN REVIEW | Date | Initial |
|---|---|---|
| [ ] No Plans Required | | |
| [ ] All | | |
| [ ] Footing | | |
| [ ] Foundation | | |
| [ ] Frame | | |
| [ ] Other | 8/7/12 | |

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

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

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

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

FEE (Office Use Only) $

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

**B. BUILDING CHARACTERISTICS**

Use Group Present Proposed
Constr. Class 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.
Total Land Area Disturbed Sq. Ft.

**Est. Cost of Bldg. Work:**
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 1500.00

**UCC/F-110 (REV. 7/03)**
**Professional Printing**
**(856) 468-7933**

1. White-Inspector copy 2. Canary-Applicant copy
3. Pink-Office copy 4. White Tag- Office copy

P# 12-2242 671/8 1.01

Electric Cut-in Cards

Had same DR# and same address for both, But there were 2 different addresses + DR#'s.

card (1) DR# 326091513
100 Chambers Bridge Rd

card (2) DR# 326091511
56 Chambers Bridge Rd

Totals of 80.184 kw system - 576 -

4 - inverters - 160

6 - disconnects - 240

2 - meters - 10

Geoff -
See me
thanks
MJ

# ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 8-9-12
Date Issued
Control #
Permit # 12-2242

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

Block 671 Lot 8 Qualification Code

Work Site Location Brick Plaza Chambers Bridge Rd & Route 70 Brick Township

Owner in Fee Federal Realty Trust

Address 1626 E Jefferson ST Rockville MD 20852

Tel (301) 998 8100

Contractor J. A. WIG CONSTRUCTION & ELECTRIC, LLC

Address 124 BOBBIS TERRACE NEW EGYPT, NEW JERSEY 08533

Tel (609) 758-1844 FAX (609) 758-4629

Contractor License No. 14815

Federal Emp. No. 16-1644430

**B. ELECTRICAL CHARACTERISTICS**

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 42,000

**C. CERTIFICATION IN LIEU OF OATH**

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

Applicant's Signature/Contractor's Seal and Signature

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

**D. TECHNICAL SITE DATA**

| QTY. | SIZE | ITEMS | FEE (Office Use Only) |
|---|---|---|---|
| | | Lighting Fixtures | |
| | | Receptacles | |
| | | Switches | |
| | | Detectors | |
| | | Light Poles | |
| | | Motors—Fract. HP | |
| | | Emergency & Exit Lights | |
| | | Communications Points | |
| | | Alarm Devices/F.A.C. Panel | |
| | | | |
| | | TOTAL NUMBERS | $ |
| | | Pool Permit/with UW Lights | |
| | | Storable Pool/Spa/Hot Tub | |
| | | KW Elec. Range/Receptacle | |
| | | KW Oven/Surface Unit | |
| | | KW Elec. Water Heater | |
| | | KW Elec. Dryer/Receptacle | |
| | | KW Dishwasher | |
| | | HP Garbage Disposal | |
| | | KW Central A/C Unit | |
| | | HP/KW Space Heater/Air Handler | |
| | | KW Baseboard Heat | |
| | | HP Motors 1/+ HP | |
| 1 | 600 | KW Transformer/Generator | |
| 1 | 300 | AMP Service | |
| | | AMP Subpanels | |
| | | AMP Motor Control Center | |
| | | KW Elec. Sign/Outline Light | |
| 22 | | RT Outlets | |
| 2 | 100/60 | Disconnects | |

COMMERCIAL

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

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW Date Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[✓] Elec. Plans Approved

Date: 8-26-12

Approved by: JD

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 9-18-12

Approved by: JD

INSPECTIONS — Dates (Month/Day)

| Type: | Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Rough | | | | |
| Barrier-Free | | | | |
| Trench | | | | |
| Temp. Serv. | | | | |
| Constr. Serv. | | | | |
| TCO | | | | |
| Other | | | | |
| Service | | | | |
| Final | | | 9/11/12 | JK |
| Barrier-Free | | | | |

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

1. White-Inspector copy 2. Canary- Applicant copy

3. Pink- Office Copy 4. White Tag- Office copy

**UCC/F-120 (REV. 7/03)**
**Professional Printing**
**(856) 468-7933**

**Brick Township**
Building Department (732) 262-1030

DR\UR # 326091513

# CUT-IN-CARD

MUNICIPALITY Brick Township

LOCATION 56 CHAMBERS BRIDGE RD. UTILITY CO

Brick Township, NJ BLK 671 LOT 1.01

OWNER FEDERAL REALTY INVESTMENT TRUST OCCUPANT FEDERAL REALTY INVESTMENT TRUST

"Installation in the above premises has been inspected and is in accordance with N.E.C. and DCA requirements."

☑ FINAL ☐ TEMPORARY This approval void after ___ days

DESCRIPTION OF SERVICE

INSTALLED BY J A WIG CONSTRUCTION & ELECTRIC, LLC LICENSE NO 14815

DATE 9/13/2012 PERMIT # 12-2242 INSPECTOR James Kiepers

☑ FAXED IN 9/13/2012 Lic. No: 006356

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR

**Brick Township**
Building Department (732) 262-1030

DR\UR # 326091511

# CUT-IN-CARD

MUNICIPALITY Brick Township

LOCATION 56 CHAMBERS BRIDGE RD. UTILITY CO

Brick Township, NJ BLK 671 LOT 1.01

OWNER FEDERAL REALTY INVESTMENT TRUST OCCUPANT FEDERAL REALTY INVESTMENT TRUST

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DATE 9/13/2012 PERMIT # 12-2242 INSPECTOR James Kiepers

☑ FAXED IN 9/13/2012 Lic. No: 006356

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR

**********
*** FAX TX REPORT ***
**********

TRANSMISSION OK

| | |
|---|---|
| JOB NO. | 1684 |
| DESTINATION ADDRESS | 918889149140 |
| PSWD/SUBADDRESS | |
| DESTINATION ID | |
| ST. TIME | 09/13 13:11 |
| USAGE T | 00'52 |
| PGS. | 2 |
| RESULT | OK |

Brick Township
Building Department (732) 262-1030

DRUR # 326091513

# CUT-IN-CARD

MUNICIPALITY Brick Township LOCATION 56 CHAMBERS BRIDGE RD. UTILITY CO _____

Brick Township, NJ BLK 671 LOT 1.01

OWNER FEDERAL REALTY INVESTMENT TRUST OCCUPANT FEDERAL REALTY INVESTMENT TRUST

"Installation in the above premises has been inspected and is in accordance with N.E.C. and DCA requirements."

☑ FINAL ☐ TEMPORARY This approval void after ___ days

DESCRIPTION OF SERVICE _____

INSTALLED BY J.A.WIG CONSTRUCTION & ELECTRIC, LLC LICENSE NO 14815

DATE 9/13/2012 PERMIT # 12-2242 INSPECTOR James Klepers

☑ FAXED IN 9/13/2012 Lic. No: 006356

U.C.C. Form F3508 equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR

M.J.

I SPOKE TO JCPL ON THESE
WE HAVE IT ALL WORKED OUT.
THANK YOU FOR ALL YOUR HELP
J.K.

# FAX TRANSMISSION

JERSEY CENTRAL POWER & LIGHT
NNJ METER SERVICES
90 Ridgedale Ave
Morristown, NJ 07960

Office (973) 644-5834 or
(973) 644-5805
Fax (888) 914-9140 or (973) 644-5157

To: Brick Twp Date: 9-13-12

Fax #: 732-262-0941 Pages (including cover): 3

From: JCP&L Inspection Card Dept

Subject: 56 Chambersbridge Rd

Comments: (1) Please supply amps

(2) DR 326091513 - shows address as 100 Chambers bridge

Please advise

Thank you

**Brick Township**
Building Department (732) 262-1030

DR\UR # 326091513

# CUT-IN-CARD

MUNICIPALITY Brick Township

LOCATION 56 CHAMBERS BRIDGE RD. UTILITY CO

Brick Township, NJ BLK 671 LOT 1.01

OWNER FEDERAL REALTY INVESTMENT TRUST OCCUPANT FEDERAL REALTY INVESTMENT TRUST

"Installation in the above premises has been inspected and is in accordance with N.E.C. and DCA requirements."

☑ FINAL ☐ TEMPORARY This approval void after ___ days

DESCRIPTION OF SERVICE

INSTALLED BY J A WIG CONSTRUCTION & ELECTRIC, LLC LICENSE NO 14815

DATE 9/13/2012 PERMIT # 12-2242 INSPECTOR James Klepers

☑ FAXED IN 9/13/2012 Lic. No: 006356

U.C.C. Form F360B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR

**Brick Township**
Building Department (732) 262-1030

DR\UR # 326091511

# CUT-IN-CARD

MUNICIPALITY Brick Township

LOCATION 56 CHAMBERS BRIDGE RD. UTILITY CO

Brick Township, NJ BLK 671 LOT 1.01

OWNER FEDERAL REALTY INVESTMENT TRUST OCCUPANT FEDERAL REALTY INVESTMENT TRUST

"Installation in the above premises has been inspected and is in accordance with N.E.C. and DCA requirements."

☑ FINAL ☐ TEMPORARY This approval void after ___ days

DESCRIPTION OF SERVICE

INSTALLED BY J A WIG CONSTRUCTION & ELECTRIC, LLC LICENSE NO 14815

DATE 9/13/2012 PERMIT # 12-2242 INSPECTOR James Klepers

☑ FAXED IN 9/13/2012 Lic. No: 006356

U.C.C. Form F350B equiv. 1 WHITE-UTILITY 2 CANARY-OFFICE/FILE 3 PINK-OFFICE/CONTRACTOR

# ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued
Control #
Permit #

X-9-12
12-2742

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

Block 671 Lot 8 Qualification Code

Work Site Location Brick Ave 29 Chambers Bridge Rd & Route 70 Brick Township

Owner in Fee Federal Realty Trust

Address 1626 E Jefferson St Rockville MD 20852

Tel (301) 998 8100

Contractor J. A. WIG CONSTRUCTION & ELECTRIC, LLC

Address 124 BOBBIS TERRACE NEW EGYPT, NEW JERSEY 08533

Tel (609) 758-1844 FAX (609) 758-4629

Contractor License No. 14815

Federal Emp. No. 16-1644430

**B. ELECTRICAL CHARACTERISTICS**

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 12,000

**C. CERTIFICATION IN LIEU OF OATH**

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

Applicant's Signature/Contractor's Seal and Signature

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

**D. TECHNICAL SITE DATA**

| QTY | SIZE | ITEMS | FEE (Office Use Only) |
|---|---|---|---|
| | | Lighting Fixtures | |
| | | Receptacles | |
| | | Switches | |
| | | Detectors | |
| | | Light Poles | |
| | | Motors—Fract. HP | |
| | | Emergency & Exit Lights | |
| | | Communications Points | |
| | | Alarm Devices/F.A.C. Panel | |
| | | | |
| | | TOTAL NUMBERS | $ |
| | | Pool Permit/with UW Lights | |
| | | Storable Pool/Spa/Hot Tub | |
| | | KW Elec. Range/Receptacle | |
| | | KW Oven/Surface Unit | |
| | | KW Elec. Water Heater | |
| | | KW Elec. Dryer/Receptacle | |
| | | KW Dishwasher | |
| | | HP Garbage Disposal | |
| | | KW Central A/C Unit | |
| | | HP/KW Space Heater/Air Handler | |
| | | KW Baseboard Heat | |
| | | HP Motors 1/+ HP | |
| | | KW Transformer/Generator | |
| 1 | 600 | AMP Service | |
| 1 | 300 | AMP Subpanels | |
| | | AMP Motor Control Center | |
| | | KW Elec. Sign/Outline Light | |
| 2 | | GFI outlets | |
| 2 | 60A/3P | Disconnects | |

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW

| | Date | Initial |
|---|---|---|
| [ ] No Plans Required | | |
| Joint Plan Review Required: | | |
| [ ] Building [ ] Plumbing | | |
| [ ] Fire [ ] Elevator | | |
| [✓] Elec. Plans Approved | | |
| Date: 8-26-12 | | |
| Approved by: SF | | |

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS

| Type: | Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Rough | | | | |
| Barrier-Free | | | | |
| Trench | | | | |
| Temp. Serv. | | | | |
| Constr. Serv. | | | | |
| TCO | | | | |
| Other | | | | |
| Service | | | | |
| Final | | | | |
| Barrier-Free | | | | |

Dates (Month/Day)

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

1. White-Inspector copy 2. Canary- Applicant copy

3. Pink- Office Copy 4. White Tag- Office copy

**UCC/F-120 (REV. 7/03)**
**Professional Printing**
**(856) 468-7933**

# ELECTRICAL SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Date Issued
Control #
Permit #

X-9-12

12-2742

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

Block 671 Lot 8 Qualification Code

Work Site Location Brick Rd 29 & Point 70 Rock Township
Chambers Bridge Rd

Owner in Fee Bond Realty Trust

Address 1626 Wilkinson St
Rockville MD 20852

Tel (301) 999 8100

Contractor J. A. WIG CONSTRUCTION & ELECTRIC, LLC

Address 124 BOBBIS TERRACE
NEW EGYPT, NEW JERSEY 08533

Tel (609) 758-1844 FAX (609) 758-4629

Contractor License No. 14935

Federal Emp. No. 16-1644430

**B. ELECTRICAL CHARACTERISTICS**

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ 12,000

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW Date Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[✓] Elec. Plans Approved

Date: 7-24-12

Approved by: _____

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS — Dates (Month/Day)

| Type: | Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Rough | | | | |
| Barrier-Free | | | | |
| Trench | | | | |
| Temp. Serv. | | | | |
| Constr. Serv. | | | | |
| TCO | | | | |
| Other | | | | |
| Service | | | | |
| Final | | | | |
| Barrier-Free | | | | |

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

Annual Pool Inspection _____

Date of Grounding and Bonding Certification _____

**C. CERTIFICATION IN LIEU OF OATH**

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

_____
Applicant's Signature/Contractor's Seal and Signature

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

**D. TECHNICAL SITE DATA**

| QTY | SIZE | ITEMS | FEE (Office Use Only) |
|---|---|---|---|
| | | Lighting Fixtures | |
| | | Receptacles | |
| | | Switches | |
| | | Detectors | |
| | | Light Poles | |
| | | Motors—Fract. HP | |
| | | Emergency & Exit Lights | |
| | | Communications Points | |
| | | Alarm Devices/F.A.C. Panel | |
| | | _____ | |
| | | TOTAL NUMBERS | $ _____ |
| | | Pool Permit/with UW Lights | |
| | | Storable Pool/Spa/Hot Tub | |
| | | KW Elec. Range/Receptacle | |
| | | KW Oven/Surface Unit | |
| | | KW Elec. Water Heater | |
| | | KW Elec. Dryer/Receptacle | |
| | | KW Dishwasher | |
| | | HP Garbage Disposal | |
| | | KW Central A/C Unit | |
| | | HP/KW Space Heater/Air Handler | |
| | | KW Baseboard Heat | |
| | | HP Motors 1/+ HP | |
| 1 | 200 | KW Transformer/Generator | |
| 1 | 300 | AMP Service | |
| 1 | | AMP Subpanels | |
| | | AMP Motor Control Center | |
| | | KW Elec. Sign/Outline Light | |
| 2 | | GFCI Outlets | |
| 2 | 2400 | Disconnects | |

Administrative Surcharge $ _____

Minimum Fee $ _____

State Permit Surcharge Fee $ _____

TOTAL FEE $ _____

1. White-Inspector copy 2. Canary- Applicant copy

3. Pink- Office Copy 4. White Tag- Office copy

**UCC/F-120 (REV. 7/03)**
**Professional Printing**
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PROFESSIONAL PRINTING (856) 468-7933

# BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 8-9-11
Date Issued
Control #
Permit # 12-2242

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

Block 671 Lot 9 Qualification Code

Work Site Location Brick Plaza Chambers Bridge Rd & Rte 70 Brick Township NJ

Owner in Fee Federal Realty

Address 1626 E Jefferson St Rockville MD 20852

Tel. ( )

Contractor J. A. WIG CONSTRUCTION & ELECTRIC, LLC

Address 124 BORRIS TERRACE
NEW EGYPT, NEW JERSEY 08533

Tel. ( 609 ) 758-1844 FAX ( 609 ) 758-4629

Contractor License No. or Builder Registration No. 14815

Federal Emp. No 16-1644430

**JOB SUMMARY (Office Use Only)**

| PLAN REVIEW | Date | Initial |
|---|---|---|
| [ ] No Plans Required | | |
| [ ] All | | |
| [ ] Footing | | |
| [ ] Foundation | | |
| [ ] Frame | | |
| [X] Other | 8/11/11 | |

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

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

CK

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

**B. BUILDING CHARACTERISTICS**

Use Group Present Proposed
Constr. Class 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.
Total Land Area Disturbed Sq. Ft.

**Est. Cost of Bldg. Work:**
1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 1,500 +/-

**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.

Signature

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

Concrete Bollards
Install 2 Bollards to protect Electrical Equipment

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

FEE (Office Use Only)
$

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

**UCC/F-110 (REV. 7/03)**
**Professional Printing**
**(856) 468-7933**

1. White-Inspector copy 2. Canary-Applicant copy
3. Pink-Office copy 4. White Tag- Office copy

# BUILDING SUBCODE TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 8-9-04
Date Issued
Control #
Permit # 12-2342

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

Block 671 Lot 9 Qualification Code

Work Site Location Brick Plaza
Chatham Rd. & Route 70 Brick, NJ

Owner in Fee Todd Realty

Address 1024 E. Jellerson Ave
Brick NJ 08723

Tel. ( )

Contractor J. A. WIG CONSTRUCTION & ELECTRIC, LLC

Address 124 ROBBIS TERRACE
NEW EGYPT, NEW JERSEY 08533

Tel. ( 609 ) 758-1844 FAX ( 609 ) 758-4629

Contractor License No. or Builder Registration No. 14815

Federal Emp. No 16-1644430

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW — Date — Initial

- [ ] No Plans Required
- [ ] All
- [ ] Footing
- [ ] Foundation
- [ ] Frame
- [X] Other 7-14-04

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

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

CC

INSPECTIONS — Dates (Month/Day)

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

**B. BUILDING CHARACTERISTICS**

Use Group Present Proposed
Constr. Class 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.
Total Land Area Disturbed Sq. Ft.

**Est. Cost of Bldg. Work:**

1. New Bldg. $
2. Rehabilitation $
3. Total (1+ 2) $ 1,500 JL

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Signature

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Concrete Bollards
Install 2 Bollards to protect
Electrical Equipment

TYPE OF WORK:

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

FEE (Office Use Only)

$

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

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3. Pink-Office copy 4. White Tag- Office copy

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