



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 09/27/2013
Control Number C-13-003966
Permit Number 13-3571
Permit Issue Date 08/22/2013
Certificate Number 13-3571

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. Block: 671 Lot: 1.01 Qual: _____
Flooring/Carpet/Mattress Store Brick
Township, NJ

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Owner Address: 1626 EAST JEFFERSON ST ROCKVILLE NJ 20852

Telephone: _____

Contractor Trademarck Sign LLC

Address 1525 PROSPECT ST LAKEWOOD NJ 08701

Telephone: (848) 223-4548 Fax: _____

License Number or Builders Registration Number: _____ Federal Emp. Number: 45-2779494

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: SIGN INSTALLATION

Certificate Comments:

☐ **Certificate of Occupancy**

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

☒ **Certificate of Approval**

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

☐ **Certificate of Continued Occupancy**

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

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

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

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

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

☐ **Certificate of Clearance - Asbestos Abatement**

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

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

☐ **Certificate of Compliance**

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

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

Construction Official

Date Printed: 09/27/2013

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

Fee: \$0.00

Check Number: _____

Collected By: _____



CONSTRUCTION PERMIT

Date Issued 8/22/13
Control # C-13-003966
Permit # 13-3571

IDENTIFICATION Block: 671 Lot: 1.01 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. Brick Township, NJ Contractor: Trademarck Sign LLC
Owner in Fee: FEDERAL REALTY INVESTMENT TRUST Address: 1525 PROSPECT ST LAKEWOOD NJ 08701
1626 EAST JEFFERSON ST ROCKVILLE NJ Telephone: (848) 223-4548
20852 Lic. No. or Bldrs. Reg. No. _____
Telephone: _____ Federal Employee No. 45-2779494

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:

SIGN INSTALLATION

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 \$1,350

Daniel Newman Jr.
Construction Official

7/25/13
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	\$40
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$2
CO Fee	
Other	\$0
Total	\$117
Check No. <u>356</u>	
Cash	\$0
Credit	\$0
Collected By	

150
167

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. \$175.00
2. Foundations and all walls up to grade level prior to back filling. \$40.00
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. \$2.00
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment. \$50.00

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.



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 161 Lot 161 Qualification Code 08723

Work Site Location Se Chambers Bn dge Brick, NJ 08723

Owner in Fee: Federal Realty

Tel. (610) 896-5870 e-mail _____

Address SE bymwood Rd Aspenwood, PA 19046 zip code

Contractor: Teddemat Sgn LLC Tel. (610) 283-4538 e-mail

Address 1585 Wapack St Unit 604 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. 45-2979494 FAX: () _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Failure	Approval	Initial
☐ No Plans Required	<u>07/24/13</u>	<u>WJ</u>	☐ All	☐ Footing	☐ Footing	☐ Footing	☐ Footing
☐ All			☐ Footing	☐ Footing	☐ Footing	☐ Footing	☐ Footing
☐ Foundation			☐ Foundation	☐ Foundation	☐ Foundation	☐ Foundation	☐ Foundation
☐ Frame			☐ Frame	☐ Frame	☐ Frame	☐ Frame	☐ Frame
☐ Other			☐ Truss Sys./Bracing	☐ Truss Sys./Bracing	☐ Truss Sys./Bracing	☐ Truss Sys./Bracing	☐ Truss Sys./Bracing
Joint Plan Review Required:			☐ Barrier-Free	☐ Barrier-Free	☐ Barrier-Free	☐ Barrier-Free	☐ Barrier-Free
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			☐ Insulation	☐ Insulation	☐ Insulation	☐ Insulation	☐ Insulation
☐ Subcode Approval			☐ Finishes -Base Layer	☐ Finishes -Base Layer	☐ Finishes -Base Layer	☐ Finishes -Base Layer	☐ Finishes -Base Layer
☐ CO ☐ CCO			☐ Energy	☐ Energy	☐ Energy	☐ Energy	☐ Energy
Date: <u>09/24/13</u>			☐ Mechanical	☐ Mechanical	☐ Mechanical	☐ Mechanical	☐ Mechanical
Approved by: <u>WJ</u>			☐ TCO	☐ TCO	☐ TCO	☐ TCO	☐ TCO
			☐ Other	☐ Other	☐ Other	☐ Other	☐ Other
			☐ Final	☐ Final	☐ Final	☐ Final	☐ Final
			☐ Barrier-Free	☐ Barrier-Free	☐ Barrier-Free	☐ Barrier-Free	☐ Barrier-Free

B. BUILDING CHARACTERISTICS

Use Group Present Proposed Est. Cost of Bldg. Work:

Constr. Class Present Proposed 1. New Bldg. \$

No. of Stories 1 2. Rehabilitation \$ 1100

Height of Structure 11 3. Total (1+2) \$ 1100

Area — Largest Floor Sq. Ft.

New Bldg. Area/All Floors Sq. Ft.

Volume of New Structure Cu. Ft.

Total Land Area Disturbed Sq. Ft.

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

Install New Sign per supplied Drawing.

Carpet Flooring mattresses

COMMERCIAL

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 _____

☐ Demolition

FEE (Office Use Only)

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Date Received

Control # 8/22/13

Date Issued

Permit # 13-3571



ELECTRICAL SUBCODE



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

Block 611 Lot 1/87 Qualification Code _____

Work Site Location Beck, MS 08223

Owner in Fee: Federal Realty

Tel. (610) 896-5870 e-mail _____

Address 50 E. Lynnwood Rd Lynnwood PA 19096

Contractor: Asst. Electric Tel. (732) 920-3532

Address 17 Seville Dr Beck, NJ e-mail _____

Contractor License No. 4558 Exp. Date 3/31/15

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

Federal Emp. ID No. 203459912 FAX: (732) 920-7657

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as Retail Utility Co. _____

Est. Cost of Elec. Work \$ 250

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial _____

[X] No Plans Required 9/25/11 JS Type: _____

Joint Plan Review Required: _____

[] Building [] Plumbing _____

[] Fire [] Elevator _____

[] Elec. Plans Approved _____

Date: _____

Approved by: _____

INSPECTIONS Dates (Month/Day)

Other _____

Service _____

Final _____

Barrier-Free _____

Temp. Cut-in Card Date Issued _____

Date: 9/14/13 Temp. Cut-in Card Date Issued _____

Approved by: JS Date of Grounding and Bonding _____

C. CERTIFICATION IN LIEU OF OATH

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

Applicant: _____

[X] Licensed Elec. Contractor [] Certified Electrician [] Exempt Applicant

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Connect sign to existing circuit

Date Received 8/22/13

Control # _____

Date Issued _____

Permit # _____

13-3571

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

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

COMMERCIAL

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

RECEIVING CLERK
DATE REC'D 7-13-13

ZONING PERMIT APPLICATION

PERMIT # 2P-13-00911
DATE ISSUED 8/22/13

BLOCK: 671 LOT: 1.01 QUALIFIER: --- SITE ADDRESS: 50 Chambers Bridge Rd
2255 St Plaza, Bruck, NJ 08763

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Federal Realty
COMPLETE ADDRESS: 50 E Lyndwood Rd St 200
Lyndwood, NJ 19091
PHONE # 610-896-5870 EMAIL: ---

2. NAME OF APPLICANT: Trademark Sign LLC
APPLICANT ADDRESS: 1525 Prospect St Unit 604
Lakewood, NJ 08701
PHONE # 848-223-4548 EMAIL: ---

3. RESPONSIBLE PERSON FOR WORK: Tom Marshak
PHONE # 848-223-4548 FAX# ---

4. SIGNATURE OF APPLICANT: [Signature]

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 50.00
OTHER: \$ ---
TOTAL: \$ ---

COMPLETED BY APPLICANT

RESIDENTIAL: ---
COMMERCIAL: ---
EXISTING USE: Carpet Flooring Store
PROPOSED USE: ---

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

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

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

POOL: ABOVE GROUND --- IN GROUND --- FENCE: HEIGHT --- TYPE ---

HEIGHT: --- (*APPLICABLE)

OTHER New Sign

DESCRIPTION: Raceway wanted changed letters 68sq' Total See attached drawings.

ZONING REVIEW: 7/13/13 DATE REVIEWED: --- DATE DENIED: --- DATE APPROVED: 7-13-13 INTLS: 26, 28 (SEE BACK PAGE)

