

06-2969



COG-104124

1. Proposed Work Site at 18 Brick L Plaza Brick N.J. 08723

2. Name of Owner in Fee: MARTIN PAL Bagels+Lox

Tel. [REDACTED] e-mail [REDACTED]

Address [REDACTED] street municipality zip code

3. Ownership in Fee: Public [REDACTED] Private [REDACTED]

4. Principal Contractor: JERSEY SHORE SLIT METAL Tel. (732) 849-9475

Address 8 OREGON DR WHITING N.J. e-mail [REDACTED]

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

Federal Employee No. [REDACTED] FAX: ([REDACTED]) [REDACTED]

5. Architect or Engineer [REDACTED] Contact [REDACTED]

Address [REDACTED] e-mail [REDACTED]

Tel. ([REDACTED]) [REDACTED] FAX: ([REDACTED]) [REDACTED]

6. Responsible Person in Charge once Work has Begun [REDACTED]

Tel. ([REDACTED]) [REDACTED] FAX: ([REDACTED]) [REDACTED]

1.	Building	\$	40		40
2.	Electrical				
3.	Plumbing				
4.	Fire Protection		45		45
5.	Elevator Devices				
6.	Subtotal	\$			
7.	Less 20% for State Plan Review				
8.	Subtotal	\$			
9.	State Permit Surcharge Fee		10		2
10.	Subtotal	\$			
11.	Cert. of Occupancy				
12.	Other				
13.	TOTAL	\$	95		42

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. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____
 no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

TOTAL COSTS

[illegible]

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:

	<u>All Units</u>	<u>Income-restricted</u>
Before Construction	_____	_____
After Construction	_____	_____
Net Gain or Loss	_____	_____

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

- ☐ Partial Releases
- ☐ Prototype Processing

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. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs



FIRE PROTECTION SUBCODE TECHNICAL SECTION

Bagels
ayay

Date Received
Control #

06-2969
9-8-06

Date Issued
Permit #



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's Signature Contractor's Signature

[] Certified Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[] System		
[] 110v Interconnected		
[] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO ₂ Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [] Gas or [] Oil		
Fireplace Venting/Metal Chimney		
Other <i>NEW EXHAUST HOOD</i>		

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

Block *1105* Lot *1105* Qualification Code

Work Site Location *18 BRICK PLAZA*

BRICK N.J. 08723

Owner in Fee *MARTIN PAL*

Address

Contractor *JENSELY SHORE SHEET METAL*

Address *8 OREGON DR*

WHITING N.J. 08759

Tel *(732) 849-9475* FAX *(732) 849-9468*

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No.

Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed Fire Alarm System: [] New OR [] Existing

Constr. Class: Present Proposed Location of Panel:

Heating System: [] New OR [] Existing [] HVAC Fire Suppression/Standpipe System:

Type: [] Gas [] Oil [] Electric [] Solar [] New OR [] Existing

[] Other Location of Main Control Valve:

Location:

Fuel Storage Tank:

Fuel Type: [] Flammable OR [] Combustible Capacity

Total Cost of Fire Protection Work \$ *7200*

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Building [] Plumbing

[] Electric [] Elevator

[] Fire Plans Approved

Date: *8-20-06*

Approved by: *OS*

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: *10-16-06*

Approved by: *OS*

INSPECTIONS

Type: Failure Failure Approval Initial

Alarm System *10/16/06* *10/16/06* *OS*

Suppression Sys.

Standpipe

Fire Pump

Pre-Eng. System

Mechanical *10/16/06* *OS*

Smoke Control

TCO

Flam/Combust Tanks

Fireplace Venting *10/16/06* *OS*

Final

Other

U.C.C. F140
(rev. 1/04)

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

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 10/15/2008
Control Number C-06-104124
Permit Number 06-2969
Permit Issue Date 9/8/2006
Certificate Number 06-2969

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. BAGELS & LOX Block: 671 Lot: 8 Qual: _____
Brick Township, NJ
Owner in Fee: FEDERAL REALTY INVESTMENT TRUST
Owner Address: 1626 EAST JEFFERSON ST ROCKVILLE NY 20852
Telephone: _____
Contractor JERSEY SHORE SHEET METAL
Address 8 OREGON DRIVE WHITING NJ 08759
Telephone: _____ Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: _____
Home Warranty Number: _____
Type of Warranty Plan: ☐ State ☐ Private
Use Group: B Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: EXHAUST HOOD

Certificate Comments:

☐ **Certificate of Occupancy**

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

☒ **Certificate of Approval**

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

☐ **Certificate of Continued Occupancy**

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

☐ **Temporary Certificate of Compliance**

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

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

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

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

☐ **Certificate of Clearance - Asbestos Abatement**

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

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

☐ **Certificate of Compliance**

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

☐ **Temporary Certificate of Occupancy**

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

Construction Official

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



FIRE PROTECTION 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 2071 Lot 58 Qualification Code 100

Owner in Fee 100 Address 100

Tel 100 Fax 100

Contractor 100 Address 100

Tel 100 Fax 100

Fire Protection Equipment, NJ Div of Fire Safety Permit No. 100

Fire Alarm Contractor No. 100

Federal Emp. No. 100

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present 100 Proposed 100

Constr. Class: Present 100 Proposed 100

Heating System: 100 New or 100 Existing 100 HVAC 100

Type: 100 Gas 100 Oil 100 Electric 100 Solar 100

Location: 100 Other 100

Fuel Storage Tank: 100 Flammable or 100 Combustible 100

Total Cost of Fire Protection Work \$ 100

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Signature 100

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: 100

Water Supply Source 100

Method of Alarm/Suppression System Supervision 100

Flammable/Combustible Tanks 100

Alarm Systems 100

100 System 100

100 110v Interconnected 100

100 CO Detectors/110v 100

Alarm Devices (i.e., smoke, heat, pulls, water/flow) 100

Supervisory Devices (i.e., tamper, low/high air) 100

Signaling Devices (i.e., horn/strobes, bells) 100

Other Devices 100

TOTAL 100

Suppression Systems 100

Fire Pump 100 GPM Type 100

Dry Pipe/Alarm Valves 100

Pre-action Valves 100

Sprinkler Heads (Dry and Wet) 100

Standpipes 100

Pre-engineered Systems 100

Wet Chemical 100

Dry Chemical 100

CO₂ Suppression 100

Foam Suppression 100

FM200 Suppression 100

Other 100

Other Systems 100

Kitchen Hood Exhaust System 100

Smoke Control System 100

Fired Appliances 100 Gas or 100 Oil 100

Fireplace Venting/Metal Chimney 100

Other 100

Administrative Surcharge \$ 100

Minimum Fee \$ 100

State Permit Surcharge Fee \$ 100

TOTAL FEE \$ 100

1 White = Inspector Copy

2 Canary = Office Copy

3 Pink = Office Copy

4 Gold = Applicant Copy

U.C.C. F-140 (rev. 1/04)



BUILDING SUBCODE TECHNICAL SECTION



A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION WHEN CHANGING CONTRACTORS. NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-472-1000.

Block 18 Lot 1 Qualification Code 1000

Work Site Location 18 Bldg. Plan 20

Owner in Fee MACTIE PAL

Address Boegels & Cox Store

Tel. () 849-9468

Contractor JENSEY SHANE SHIRT METAL

Address 8 ONEGON DR. WHITEHALL N.J. 08759

Tel. () 849-9468 FAX () 849-9468

Contractor License No. or Builder Registration No. 732

Federal Emp. No. 849-9468

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date 10-6-06 Initial WJ INSPECTIONS

☒ No Plans Required 8-30-04 Type: Footings Failure Initial

☐ All Footings Failure Initial

☐ Footing Footings Failure Initial

☐ Foundation Foundation Failure Initial

☐ Frame Slab Failure Initial

☐ Other Truss Sys./Bracing Failure Initial

Joint Plan Review Required: Barrier-Free Failure Initial

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator Insulation Failure Initial

Finishes -Base Layer Failure Initial

Finishes -Final Failure Initial

Energy Failure Initial

Mechanical Failure Initial

TCO Failure Initial

Other Failure Initial

Final Failure Initial

Barrier-Free Failure Initial

B. BUILDING CHARACTERISTICS

Use Group Present Proposed 10/6/06

Constr. Class Present Proposed 10/6/06

No. of Stories 1 Proposed 10/6/06

Height of Structure 10 Ft. 10/6/06

Area — Largest Floor 10 Sq. Ft. 10/6/06

New Bldg. Area/All Floors 10 Sq. Ft. 10/6/06

Volume of New Structure 10 Cu. Ft. 10/6/06

Total Land Area Disturbed 10 Sq. Ft. 10/6/06

Est. Cost of Bldg. Work:

1. New Bldg. \$ 7200.00

2. Rehabilitation \$ 7200.00

3. Total (1+2) \$ 14400.00

C. CERTIFICATION IN LIEU OF OATH

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

Signature WJ

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Exhaust hood

Hood must be supported properly

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 NEW EXHAUST HOOD

☐ Demolition

FEE (Office Use Only)

\$ 14400.00

Administrative Surcharge \$ 14400.00

Minimum Fee \$ 14400.00

State Permit Surcharge Fee \$ 14400.00

TOTAL FEE \$ 14400.00

1 White = Inspector Copy

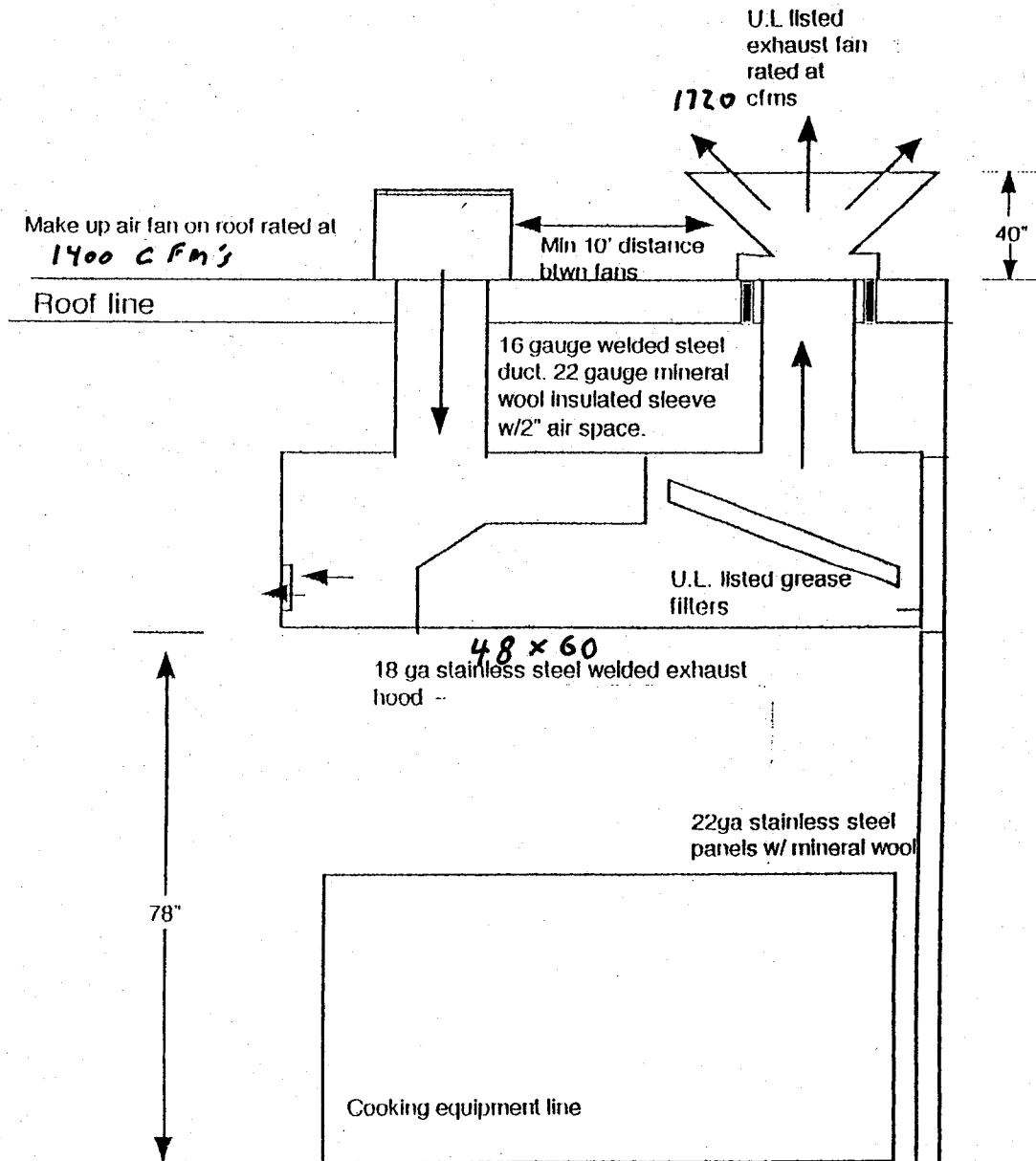
2 Canary = Office Copy

3 Tag = Office / Other

U.C.C. F110HB3

(rev. 07/03)

Date Received 06-29-09
Control # 9-8-09
Date Issued
Permit #



Customer:

BAGEL'S A-D Lox

18 BRICK PLAZA MALL

BRICK N.J. 08723

Contractor:

Jersey Shore Sheet Metal

195 Stevens Road

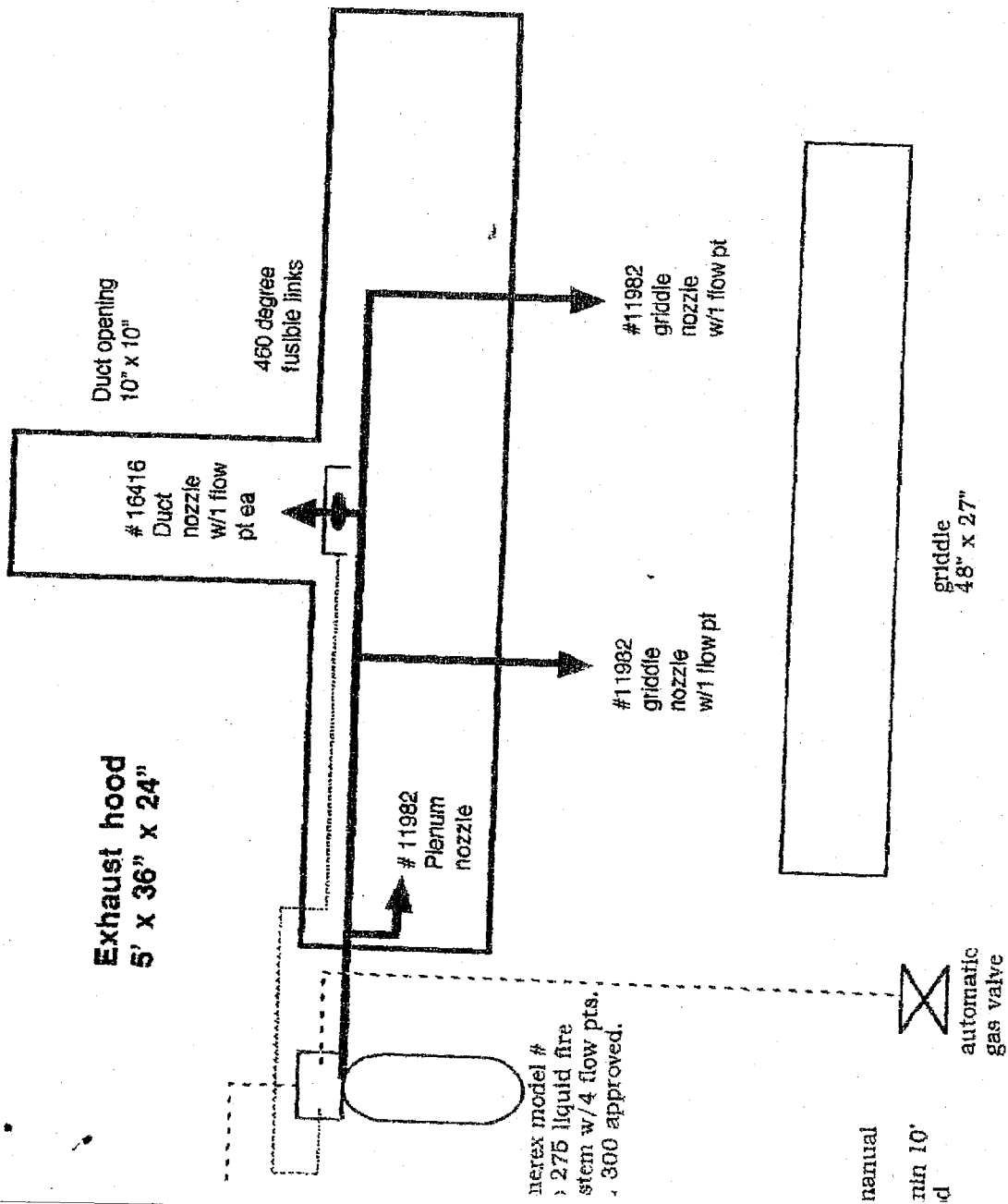
Toms River, NJ 08753

(732) 240-0098

BIK: 1

LOT: 468

8-30-06 06



Customer:
 Bagels And Lox
 18 Brick Plaza Mall
 Brick, NJ 08723
 Block: J
 Lot: 468
 Drawn: 7/25/06 J.R.

Contractor:
 Jersey Coast Fire Equipment
 377 Asbury Road
 Farmingdale, N.J. 07727
 (732) 935-2020
 NJ License # P00206



ELECTRICAL 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 408 Lot 2 Qualification Code 2

Work Site Location Bagsels & Lox

Owner in Fee Federal Realty

Address 18 Brick Plaza

City Brick State 08753

Tel (732) 477 9020

Contractor PENICO

Address 1614 Middlesex St

City Brick State 08757

Tel (732) 341-8014 FAX (732) 818-0554

Contractor License No. 11358

Federal Emp. No. 223347998

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[] Pole/Pad # 1 [] Temporary [] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work \$ 1500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required

Joint Plan Review Required:

[] Building [] Plumbing

[] Fire [] Elevator

[] Elec. Plans Approved

Date: 10/18/08

Approved by: [Signature]

SUBCODE APPROVAL

[] CO [] CCO ☒ CA

Date: 4-2-08

Approved by: [Signature]

INSPECTIONS

Type: 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, contractor 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 [] Certified Landscape Irrigation Contr. [] Exempt Applicant

D. TECHNICAL SITE DATA

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 UV 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

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$



FIRE PROTECTION SUBCODE TECHNICAL SECTION

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

Block 291 Lot 58 Chambers Road Qualified Code

Owner in Fee 1601 East Jefferson St.

Address 1601 East Jefferson St.

Tel (732) 207-9343 Fax ()

Contractor 8 Chambers Rd

Address 8 Chambers Rd

Tel (732) 849-6455 Fax ()

Fire Protection Equipment, NJ Div of Fire Safety Permit No. 0875-9

Fire Protection Equipment, NJ Div of Fire Safety Installer No. 0875-9

Fire Alarm Contractor No. 0875-9

Federal Emp. No. 0875-9

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed Fire Alarm System: 1 New or 1 Existing

Constr. Class: Present Proposed Location of Panel: 0875-9

Heating System: 1 New or 1 Existing 1 HVAC Fire Suppression/Standpipe System: 0875-9

Type: 1 Gas 1 Oil 1 Electric 1 Solar 1 New or 1 Existing

Location: 1 Other 0875-9 Location of Main Control Valve: 0875-9

Fuel Storage Tank: 1 Flammable or 1 Combustible Capacity 0875-9

Total Cost of Fire Protection Work \$ 0875-9

JOB SUMMARY (Office Use Only)

PLAN REVIEW

1 No Plans Required

Joint Plan Review Required: 1 Building 1 Plumbing

1 Electric 1 Elevator

Fire Plans Approved Date: 8-30-86

Approved by: 0875-9

SUBCODE APPROVAL

1 CO 1 CCO 1 CA

Date: 3-31-88

Approved by: 0875-9



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's Signature/Contractor's Signature

1 Certified Contractor 1 Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: New Put in

Water Supply Source System

Method of Alarm/Suppression System Supervision 0875-9

Flammable/Combustible Tanks

Alarm Systems 1 System

1 110v Interconnected 1 CO Detectors/110v

Alarm Devices (i.e., smoke, heat, pulls, water/flow)

Supervisory Devices (i.e., tamper, low/high air)

Signaling Devices (i.e., horn/strobes, bells)

Other Devices 0875-9

TOTAL

Suppression Systems

Fire Pump GPM Type

Dry Pipe/Alarm Valves

Pre-action Valves

Sprinkler Heads (Dry and Wet)

Standpipes

Pre-engineered Systems

Wet Chemical 1

Dry Chemical

CO₂ Suppression

Foam Suppression

FM200 Suppression

Other

Other Systems

Kitchen Hood Exhaust System

Smoke Control System

Fired Appliances 1 Gas or 1 Oil

Fireplace Venting/Metal Chimney

Other

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$ 45

Date Received

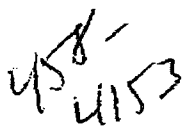
Control #

Date Issued

Permit #

326108

06-296948



Jersey Coast Fire Equipment Inc.

377 Asbury Road

Farmingdale, NY 07727

(732) 938-2020

CUSTOMER BAGELS AND LOX - BRICK

ADDRESS 18 BRICK PLAZA MALL

BRICK NJ 08723

PHONE 732-267-9363

CONTACT MARTIN

ROUTE SOUTH

TERMS COD

LAST INSPECTION January 4, 2008

NEXT INSPECTION January 4, 2008

SCHEDULED APPOINTMENT

ENTERED

NOTES

SYSTEM TYPE/SIZE KP275-SYSI

KP275 AMEREX WET CHEMICAL FIRE SUPPRESSION SYSTEM INSPECTION

HOOD SIZE 5' X 48"

ALARM ON ☒

DUCT SIZE 10" X 10"

ALARM COMPANY INSIDE HORN/STROBE ONLY

LINK QTY/DEGREES 2 @450

ACCOUNT NUMBER

NOZZLES

<u>01</u>	DUCT	<u>01</u>	PLENUM
<u> </u>	SALAMANDER	<u> </u>	HOTTOP
<u> </u>	CANDY POT STOVE	<u>01</u>	GRILL
<u> </u>	2 BURNER STOVE	<u> </u>	4 BURNER STOVE

_____ WOKS	_____ FRYER
_____ CHEESE MELTER	_____ UPRIGHT BROILER
_____ CHARBROILER	_____ 8 BURNER STOVE
_____ 6 BURNER STOVE	_____ 10 BURNER STOVE

1. All appliances properly covered w/correct nozzles
2. Check for correct duct & plenum nozzles
3. Check for correct piping size and limitations
4. Hood / duct penetrations sealed w/weld or U.I. device
5. Piping & conduit securely bracketed
6. Proper separation between fryers and flame
7. Check if seals intact, evidence of tampering
8. If system has been discharged, report same
9. Pressure gauge in proper range (if gauged)
10. Check cartridge WT (if applicable)
11. Hydrostatic test date
12. 6 year maintenance date
13. Inspect cylinder & mount
14. Check fuse links
15. Replace fuse links 08 code (OT. on links)
16. System installed in accordance w/mfg U.L. listing

17. Test for proper operation from remote
18. Check operation of micro switch
19. Check operation of gas valve
20. Clean nozzles
21. Proper nozzle covers in place
22. All filters replaced
23. Fuel shut-off in on position
24. Replace system covers
25. Check exhaust fan in operating order
26. System operational & seals in place
27. Fan warning sign on hood
28. Proper hand portable extinguishers
29. Portable extinguishers properly serviced
30. Service & certification tag on system
31. Hood condition: clean
32. Hood condition: greasy - needs cleaning

annual inspection \$95.00
2 links @ \$7.95 each 15.90

$$\begin{array}{r}
 \$110.90 \\
 \text{Tax} \quad + 7.76 \\
 \hline
 \$118.66
 \end{array}$$

This system (is / is not) in compliance with applicable fires codes and regulations.

EXPLANATION AND COMMENTS

Technician - VAILLENCOURT.

Permit Number:

Date: _____

Time:

Customer:



PERMIT UPDATE

Date Update Issued 03/26/2008
Control # C-06-104858
Permit # 06-2969+B

IDENTIFICATION Block: 671 Lot: 8 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. BAGELS & LOX Brick Contractor JERSEY SHORE SHEET METAL
Township, NJ Address 8 OREGON DRIVE WHITING NJ 08759
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
1626 EAST JEFFERSON ST ROCKVILLE NY Telephone:
20852 Lic. No. or Bldrs. Reg. No.
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:

WET/DRY SPRINKLER HEADS

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 \$100

Construction Official

Date

U.C.C. F170
equiv (rev 8/03)

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	\$45
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$45
Check No.	
Cash	\$45
Credit	\$0
Collected By	Stephanie Capozzi

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.



PERMIT UPDATE

Date Update Issued 03/26/2008
Control # C-06-104857
Permit # 06-2969+A

IDENTIFICATION Block: 671 Lot: 8 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. BAGELS & LOX Brick Contractor JERSEY SHORE SHEET METAL
Township, NJ Address 8 OREGON DRIVE WHITING NJ 08759
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
1626 EAST JEFFERSON ST ROCKVILLE NJ Telephone:
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:

ELECTRICAL ALTERATIONS

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 \$1,500

Construction Official

Date

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$40
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$2
CO Fee	
Other	\$0
Total	\$42
Check No.	
Cash	\$42
Credit	\$0
Collected By	Stephanie Capozzi

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.

671/8

TOWNSHIP OF BRICK

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

Daniel J. Kelly, Mayor

Township Council:

Stephen C. Acropolis - President
Ruthanne Scaturro - Vice President
Anthony Matthews
Kathy M. Russell
Joseph Sangiovanni
Michael A. Thulen, Sr.
Dan Toth



Department of Administration & Finance

Division of Inspections
Daniel F. Newman Jr.
Construction Official
732-262-1027
Fax: 732-262-8954
www.twp.brick.nj.us

November 1, 2007

**FINAL NOTICE
SUMMONS TO FOLLOW**

3/21/08

Bagels & Lox
56 Chambers Bridge Road
Brick, NJ 08723

RE: Outstanding Permits

Dear Sir/Madam:

Please be advised that there are two (2) permit applications still outstanding for work you did under Permit 06-2969. The outstanding permit applications as follows:

Permit #06-2969+A - Electrical alterations (PEMCO, contractor) \$42.00 due
Permit #06-2969+B - Fire/Sprinklers (Jersey Shore Sheetmetal, contractor) \$45.00

It is necessary for you to come in and pay for these permits and then get the required inspections as I am aware that the work has been done and you are occupying this space.

Please contact this office as soon as possible to rectify this matter.

Sincerely,

Daniel F. Newman, Jr.
Construction Official

DFN/b

c: File/permit06-2969





CONSTRUCTION PERMIT

Date Issued 9/8/2006
Control # C-06-104124
Permit # 06-2969

IDENTIFICATION Block: 671 Lot: 8 Qualifier _____
Work Site Location: 56 CHAMBERS BRIDGE RD. BAGELS & LOX Brick Contractor JERSEY SHORE SHEET METAL
Township, NJ Address 8 OREGON DRIVE WHITING NJ 08759
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
Address 1626 EAST JEFFERSON ST ROCKVILLE NJ Telephone: _____
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:

EXHAUST HOOD

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 \$7,200

Construction Official _____

Date _____

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$40
Electrical	\$0
Plumbing	\$0
Fire Protection	\$45
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$10
CO Fee	
Other	\$0
Total	\$95
Check No.	
Cash	\$95
Credit	\$0
Collected By	Mary Jane Rinaldi

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.

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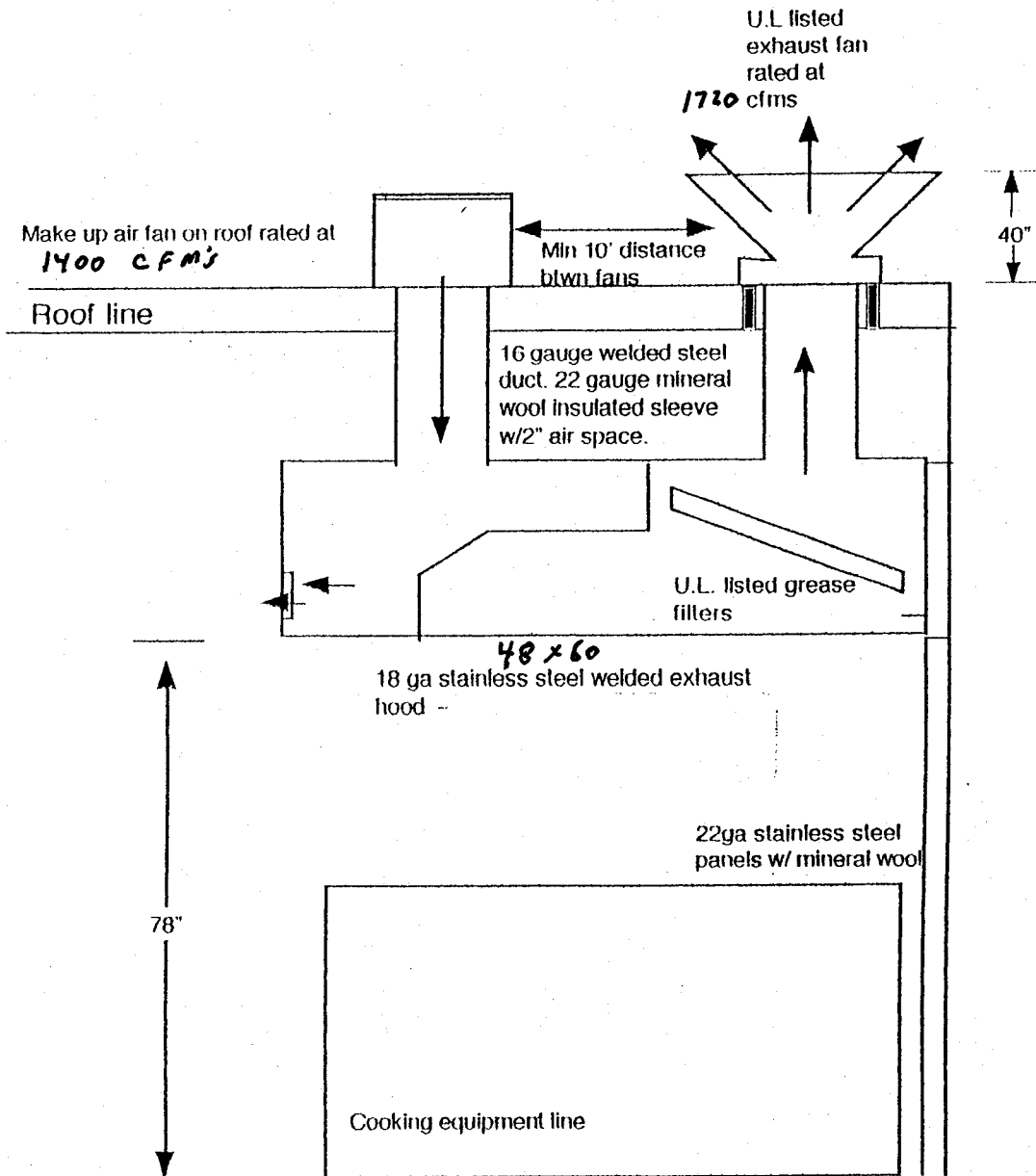
- ☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; 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.

Contractor:
Jersey Coast Fire Equipment
377 Asbury Road
Farmingdale, N.J. 07727
(732) 938-2020

Ms. A. 9.2. 10. 11. 12.



Customer:

BAGELS AND LOX
18 BRICK PLAZA MALL
BRICK N.J. 08723

Contractor:

Jersey Shore Sheet Metal
195 Stevens Road
Toms River, NJ 08753
(732) 240-0098

BLK: 1 LOT: 468

5-10-06 JG

10/10/06
10/11/06
Not ready

(F) tech

