

BLOCK 671 LOT 8 QUALIFICATION CODE ADDRESS (SITE) 56 Chambersbridge Rd PERMIT NO. 07-2482



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 44 BRICK PLAZA, BRICK NY 08723
2. Name of Owner in Fee: BARNES AND NOBLE #2803 FREDERICK
Tel. (732) 255-6600 e-mail REDACTED
Address 44 BRICK PLAZA BRICK 08723
street municipality
3. Ownership in Fee: Public ☐ Private ☐
4. Principal Contractor: Complete Project Repair Tel. (201) 635-1614
Address 280 RANDOLPH AVE e-mail _____
License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. 203606676 FAX: (201) 635-1614
5. Architect or Engineer DWM Contact JIM MEARS
Address 2 NORTHWAY LANE CATHAM NY 12110 e-mail _____
Tel. (888) 396 9111 FAX: () _____
6. Responsible Person in Charge once Work has Begun Tose Perce
Tel. (201) 927-4788 FAX: (201) 635-1614

V. FEE SUMMARY (for office use only)

1. Building	\$ <u>220</u>	<u>40</u>	<u>47</u>
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$ <u>40</u>	<u>4</u>	<u>7</u>
8. Subtotal			
9. State Permit Surcharge Fee			
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>760</u>	<u>44</u>	<u>47</u>

VI. BUILDING/SITE CHARACTERISTICS

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 _____

(office use only)

IIa. PROPOSED WORK

- ☐ Minor Work ☐ New Building ☐ Addition ☒ Demolition (Trench)
☐ 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
<u>30,000</u>	<u>SL</u>	<u>7/26/07</u>		<u>8-2-07</u>	<u>JP</u>	<u>1-14-09</u>		
			<u>9/10/07</u>	<u>9/10/07</u>	<u>JP</u>	<u>9-14-07</u>		
						<u>9-14-07</u>		

TOTAL COSTS

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

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

4. No. of dwelling units: All units Income-restricted
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL (primary use)

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

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 01/30/2009
Control Number C-07-003815
Permit Number 07-2482
Permit Issue Date 08/09/2007
Certificate Number 07-2482

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 56 CHAMBERS BRIDGE RD. 44 BRICK PLAZA Block: 671 Lot: 8 Qual:
Brick Township, NJ

Owner in Fee: FEDERAL REALTY INVESTMENT TRUST

Owner Address: 1626 EAST JEFFERSON ST ROCKVILLE MD 20852

Telephone: (732) 255-6600

Contractor COMPLETE PROJECT REPAIR

Address 280 FANDOLPH AVENUE EAST RUTHERFORD NJ 07073

Telephone: (201) 635-1614 Fax: (201) 635-1614

License Number or Builders Registration Number: Federal Emp. Number: 20-3606676

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: INTERIOR ALTERATION(S) CAFE ARE WILL BE RENOVATED. EXISTING CABINETS WILL BE REPLACED W/ NEW, NEW WALLS WILL BE INSTALLED, LOW SWING DOORS WILL BE RELOCATED, PAINTING.

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:

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.

X Agent Name JOSE PEREZ / Complete Project & Repair LLC

Address 280 RANDOLPH AVE

EAST RUTHERFORD NJ 07073

Telephone (201) 635-1614

Signature [Signature]

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



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 07 Lot 8 Qualification Code

Work Site Location

Owner in Fee 44 Baile Plaza, Suite 200

Address 44 Baile Plaza, Suite 200
Rockville, MD 20852

Tel. (202) 255-6600

Contractor Contractors of Repair LLC

Address 280 Randolph Ave
Wash DC 20005

Tel. (202) 635-1616 FAX (202) 635-1616

Contractor License No. or Builder Registration No. 239-04

Federal Emp. No. 2036 06676

JOB SUMMARY (Office Use Only) ANY NEW WORK MUST MEET ADA

PLAN REVIEW Date 8-20-94 Initial INSPECTIONS Dates (Month/Day)

☒ No Plans Required 8-20-94 Type: Failure Failure Approval Initial

☐ All Footing Footing Bonding

☐ Foundation Foundation

☐ Frame Slab

☐ Other Truss Sys./Bracing

Joint Plan Review Required: Barrier-Free

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator

SUBCODE APPROVAL Insulation

☐ CO ☐ CCO Finishes -Base Layer

Date: 8/20/94 Energy

Approved by: Mechanical

 TCO

 Other

 Final

 Barrier-Free

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

CAFE AREA WILL BE RENOVATED.
EXISTING CABINETRY WILL BE DISPOSED.
NEW CABINETS WILL BE INSTALLED.
REPLACE CIG TILES. NEW CABINET WILL
BE RELOCATED REQUIRING NEW ELECTRICITY
& PLUMBING.
NEW WALLS WILL BE INSTALLED IN
REAR AREA
LOW SWING DOORS WILL BE RELOCATED.
PAINTING

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)

\$

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Date Received 8/9/07
Control # 07-2482
Date Issued
Permit #

COMMERCIAL

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$

Turn
over
page



Dates Revised:



**ELECTRICAL
SUBCODE
TECHNICAL SECTION**



Date Received 9/5/07
Date Issued 9/11/07
Control # 07-2482-B-C-04405
Permit # 07-2482-B-C-04405

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 44 Back Plaza

Work Site Location Back Plaza, N.J. 56 Chambers Bridge

Owner in Fee: Federal Realty

Tel () e-mail

Address

Contractor: SABRON ELECTRIC INC Tel. (732) 362-7470

Address 371 Jagers Ave e-mail

Contractor License No. 5489

Federal Emp. ID No. 222287753 Exp. Date 12/31/07 FAX: (732) 362-6617

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Store Utility Co. TEPL

Est. Cost of Electrical Work \$ 5,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required			Type: <u>WALL</u>	Failure Approval Initial
Joint Plan Review Required:			Rough	<u>9/12/07</u> <u>TO</u>
☐ Building ☐ Plumbing			Barrier-Free	
☐ Fire ☐ Elevator			Trench	<u>9/12/07</u> <u>TO</u>
☒ Elec. Plans Approved			Temp. Serv.	
Date: <u>9/11/07</u>			Const. Serv.	
Approved by: <u>[Signature]</u>			TCO	
			Other	
			Service	
			Final	
			Barrier-Free	<u>9-14-07</u> <u>TO</u>
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued	
☐ CO ☐ CCO ☒ CA			Final Cut-in-Card Date Issued	
Date: <u>9/14/07</u>			Annual Pool Inspection	
Approved by: <u>[Signature]</u>			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 execute this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

☒ Licensed Elec. Contractor ☐ Certifd. 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

18

TOTAL NUMBERS

Pool Permit/with UW Lights	
Storable Pool/Spa/Hot Tub	
KW Elec. Range/Receptacle	
KW Oven/Surface Unit	
KW Elec. Water Heater	
KW Elec. Dryer/Receptacle	
KW Dishwasher	
HP Garbage Disposal	
KW Central A/C Unit	
HP/KW Space Heater/Air Handler	
KW Baseboard Heat	
HP Motors 1/4 HP	
KW Transformer/Generator	
AMP Service	
AMP Subpanels	
AMP Motor Control Center	
KW Elec. Sign/Outline Light	

COMMERCIAL

FEE (Office Use Only)

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



PLUMBING 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 61 Lot 8 Qualification Code 2803
Work Site Location 8080 2803
Brief Description REPAIR
Owner in Fee FEDERAL REALTY
Address 1626 Jefferson
ROCKVILLE, MD 20852
Tel (732) 255-1600
Contractor Lobasco Plumbing
Address 1038 Highway 33 East Unit 8

Tel (732) 919-3988 FAX (732) 919-7778
Contractor License No. # 2550
Federal Emp. No. 222-341-994-000

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work \$ 13,000.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Approval	Initial
☐ No Plans Required		Slab			
☐ Building ☐ Electric		Rough			
☐ Fire ☐ Elevator		Water			
☒ Plumbing Plans Approved		Sewer			
Date: <u>7/14/07</u>		Fixtures			
Approved by: <u>[Signature]</u>		Gas Equipment			
SUBCODE APPROVAL		Gas Piping			
☐ CO ☐ CCO ☒ CA		LP Gas Tank			
Date: <u>7-14-07</u>		Fuel Oil Piping			
Approved by: <u>[Signature]</u>		Solar			
		TCO			

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 Plumbing Contractor ☐ Exempt Applicant

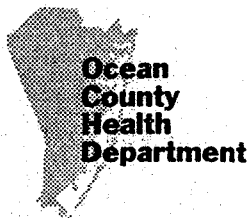
D. TECHNICAL SITE DATA (List of all fixtures.)

NO. 1
FIXTURE/EQUIPMENT
Water Closet
Urinal/Bidet
Bath Tub
Lavatory
Shower
Floor Drain
Sink
Dishwasher
Drinking Fountain
Washing Machine
Hose Bibb
Water Heater
Fuel Oil Piping
Gas Piping
LP Gas Tank
Steam Boiler
Hot Water Boiler
Sewer Pump
Interceptor/Separator
Backflow Preventer
Greasetrap
Sewer Connection
Water Service Connection
Stacks
Other
Other

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

067-00 4344
Date Received 8/31/07
Control # 915107
Date Issued 07-24-07
Permit # 24824A

COMMERCIAL

611 8 07-2482
REC'D SEP 12 2007 ✓

OCEAN COUNTY HEALTH DEPARTMENT

No: 12178

SANITARY INSPECTION REPORT

ESTABLISHMENT INFORMATION

PHONE # (732) 255-6600		ESTABLISHMENT CODE 39	GOODS ☐ DESTROYED ☐ EMBARGOED
ESTABLISHMENT TRADING NAME Barnes & Noble		EVALUATION ☒ SATISFACTORY ☐ CONDITIONALLY SATISFACTORY ☐ UNSATISFACTORY	
NUMBER AND STREET 44 Chambers Bridge Rd Buckl Plaza		WATER SUPPLY ☒ Public - Community ☐ Individual (Public - Non-Community)	
CITY OR MUNICIPALITY Buckl	ZIP CODE 08723		
ESTABLISHMENT LICENSE NO. -	COMMUN. CODE 1506	RISK I	

OWNER INFORMATION

(Complete this section only if different from establishment information)

NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT
Barnes & NobleNUMBER AND STREET
44 Chambers Bridge RdCITY OR MUNICIPALITY
BucklSTATE
NJZIP CODE
08723COMMUN. CODE
1506

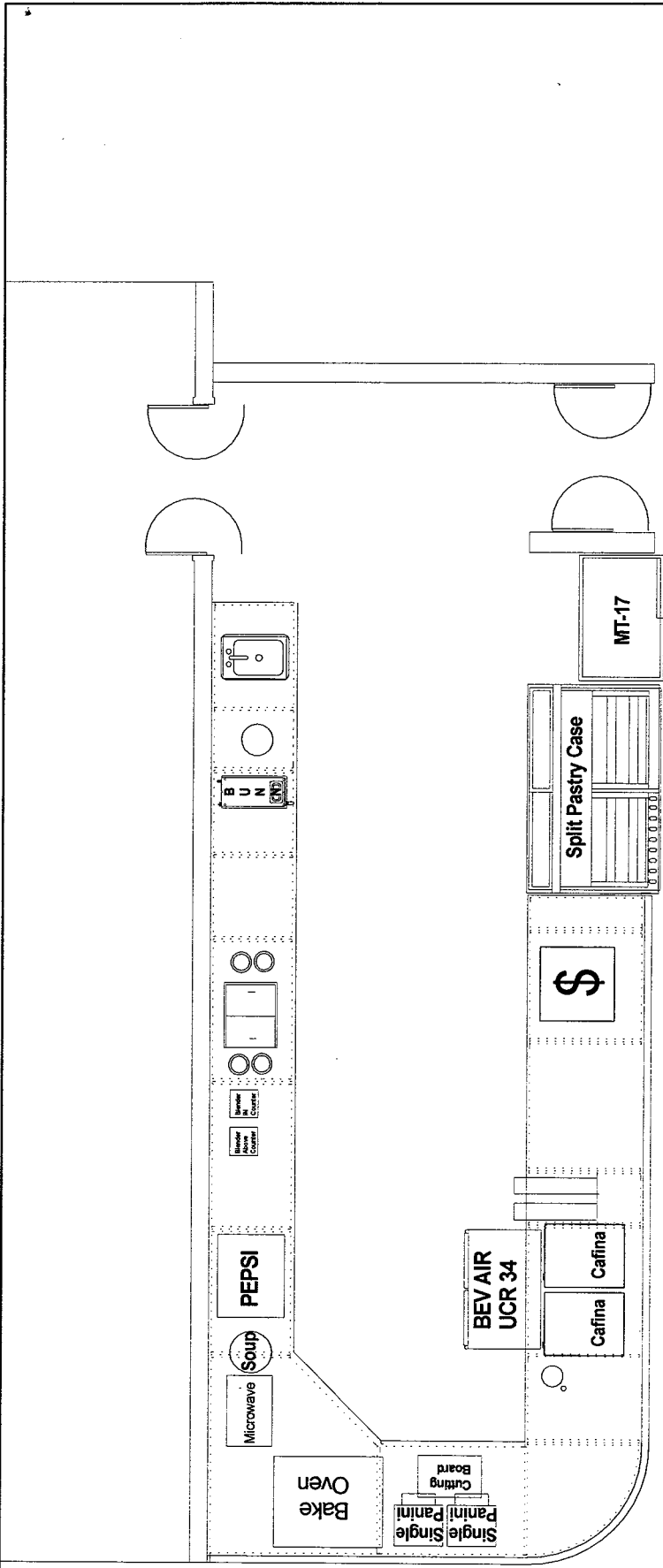
TIME (2400 HOURS)

DATE
9/10/07BEGIN
1415END
1500COMPLAINT NO.
None

COMPLAINT REC.

COMPLAINT INSPECTED

INSPECTION TYPE ☐ COMPLAINT ☐ INITIAL INSPECTION ☐ REINSPECTION ☒ PLAN REVIEW ☐ CONFERENCE	TYPE OF ESTABLISHMENT ☒ RETAIL ☐ WHOLESALE ☐ VENDING MACHINE NO. OF MACHINES ☐ FROZEN DESSERTS ☐ OTHER	Joseph J. Przywara Health Officer Sunset Avenue P.O. Box 2191 Toms River, N.J. 08754-2191 Telephone No. 732-341-9700 609-978-9715	Tobacco O, V, NA. (NA circled)
		NAME OF INSPECTING OFFICIAL (Print) Kenneth Shent	
		SIGNATURE OF INSPECTING OFFICIAL (Signature)	PERMANENT REG. NO. B-1118

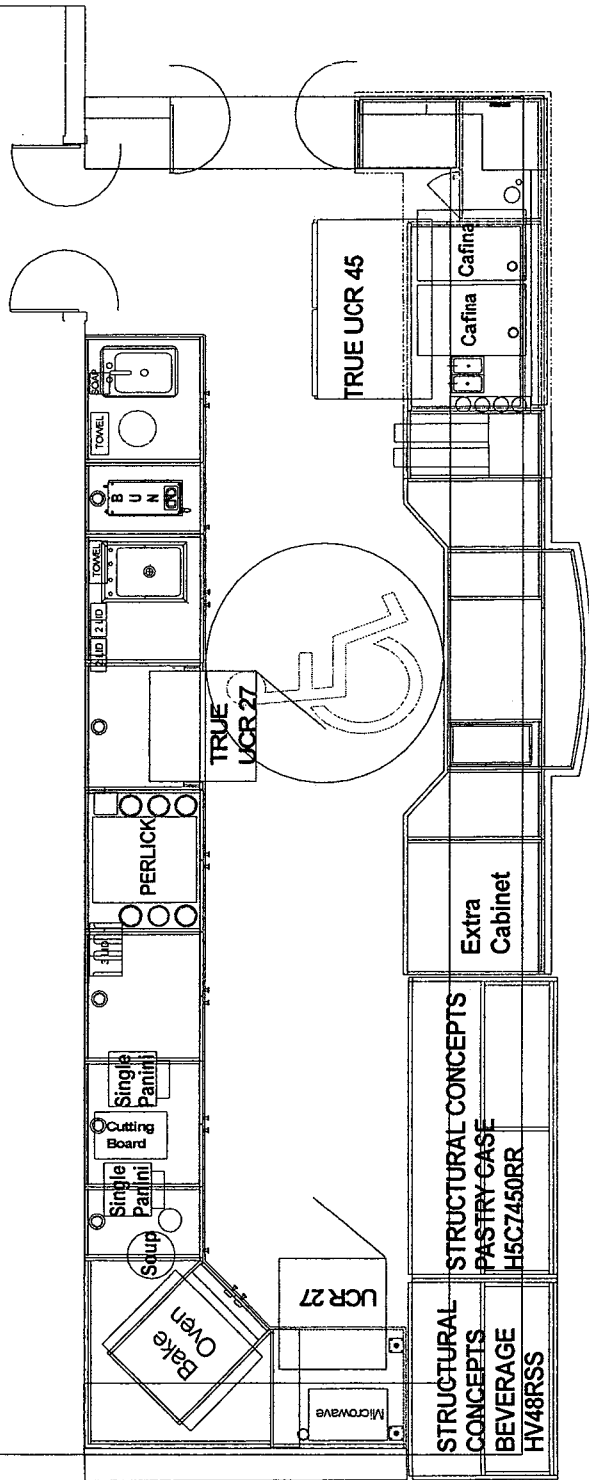


Designed by Jim Meeks	Checked by	Scale: 1/4"=1"	File name: Brick, NJ	Date: 05.27.07
Barnes & Noble 2803 Brick, NJ				
2 Northway Lane Latham, NY 12110 Toll Free: 1.888.396.9111 www.dwminc.com			Current Cafe Layout	
			Dates Revised:	

DETAILED DATA SHEET

Date _____

(Attach additional sheets if necessary)



Designed by Jim Meeks	Checked by	Scale: 1/4"=1"	File name: Brick, NJ	Date: 05.27.07
DWM Facilities Maintenance		Barnes & Noble 2803 Brick, NJ		
2 Northway Lane Latham, NY 12110 Toll Free: 1.888.396.9111 www.dwminc.com		Proposed Cafe Layout		
		Dates Revised:		



PERMIT UPDATE

Date Update Issued 09/11/2007
Control # C-07-004405
Permit # 07-2482+B

IDENTIFICATION Block: 671 Lot: 8 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. 44 BRICK PLAZA Contractor COMPLETE PROJECT REPAIR
Brick Township, NJ Address 280 FANDOLPH AVENUE EAST RUTHERFORD NJ
Owner in Fee FEDERAL REALTY INVESTMENT TRUST 07073
1626 EAST JEFFERSON ST ROCKVILLE MD Telephone: (201) 635-1614
20852 Lic. No. or Bldrs. Reg. No.
Telephone: (732) 255-6600 Federal Employee No. 20-3606676

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 CAFE ARE WILL BE RENOVATED. EXISTING CABINETS WILL BE REPLACED W/ NEW, NEW WALLS WILL BE INSTALLED, LOW SWING DOORS WILL BE RELOCATED, PAINTING.

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

Estimated Cost of Work \$5,000

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	\$7
CO Fee	
Other	\$0
Total	\$47
Check No.	
Cash	\$47
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.

Bldg

Elect

Fire

Plumbing

(Please mark subcode)

CONTROL NUMBER 4405

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION:

44 Back Blvd

DATE REVIEWED:

9/20/07

REVIEWED BY:

MR

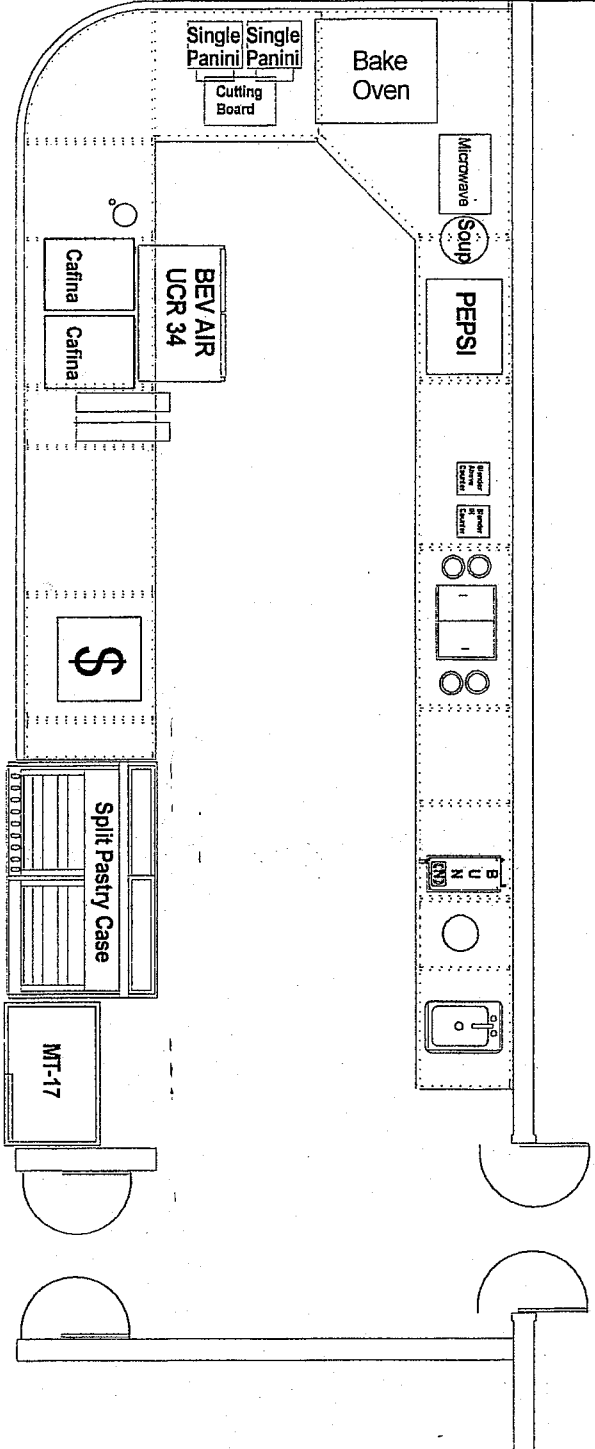
CONTACT CALLED/FAXED:

Unsupervised Plans

Sanon Best 732 382 7470

St Charles Rd
St Charles

Submitt
9/10/07
(Signature)



9/1/07 *W*

Sanron Electric Inc.

371 Jaques Ave

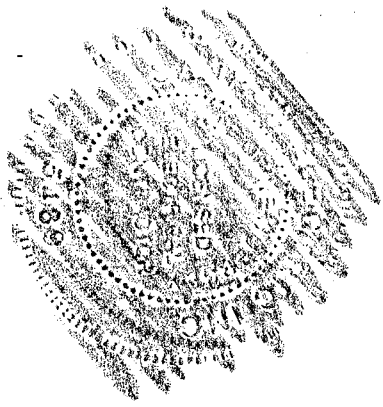
Rahway, NJ 07065

732 382-7470

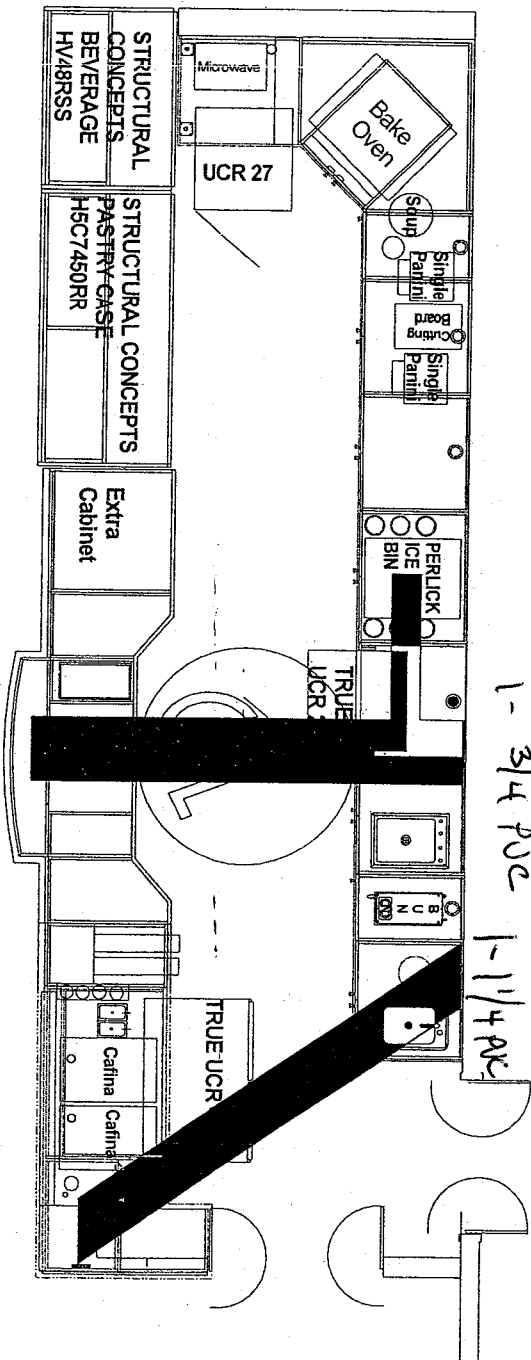
5489

22-2287753

732 382-6617



Designed by Jim Weeks	Checked by	Scale: 1/4"=1"	File name: Brick, NJ	Date: 05.27.07
DWM Facilities Maintenance 2 Northway Lane Latham, NY 12110 Toll Free: 1.888.396.9111 www.dwminc.com		Barnes & Noble 2803 Brick, NJ Current Cafe Layout Dates Revised:		



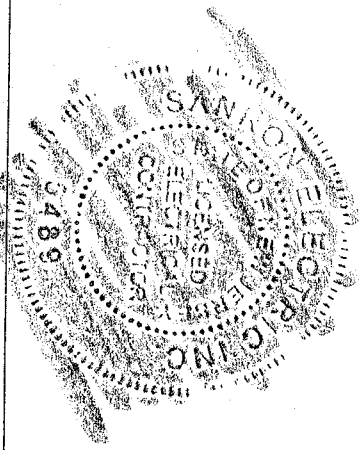
1-1 1/4 PUC
1-3/4 PUC

1-1 1/4 PUC

Sanron Electric Inc.
371 Jaques Ave
Rahway, NJ 07065
732 382-7470
5489
22-2287753

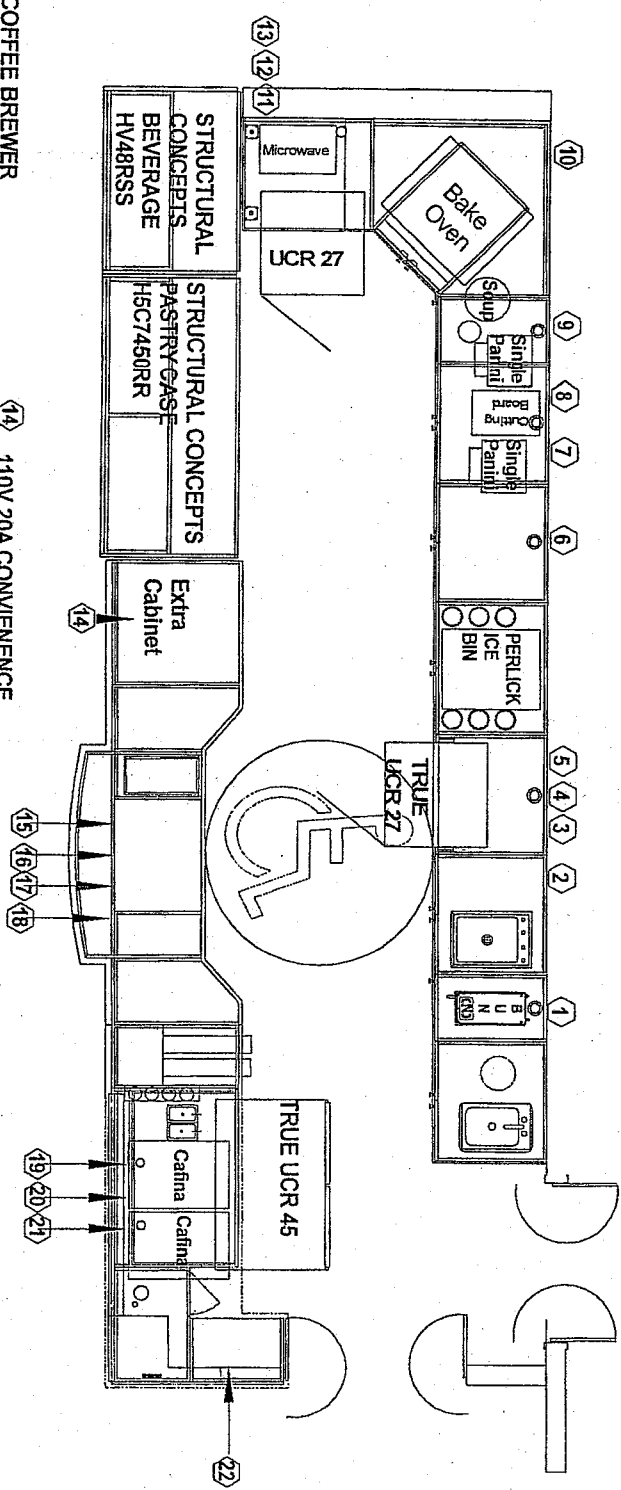
732 382-6617

9 1107 W



Designed by Jim Meeks	Checked by	Scale: 1/4"=1"	File name: Brick, NJ	Date: 07.23.07
2 Northway Lane Latham, NY 12110 Toll Free: 1.888.396.9111 www.dwmninc.com		Barnes & Noble 2803 Brick, NJ Proposed Cafe Trenching Minimum		
				Dates Revised:

EXISTING
200A 3P Panel



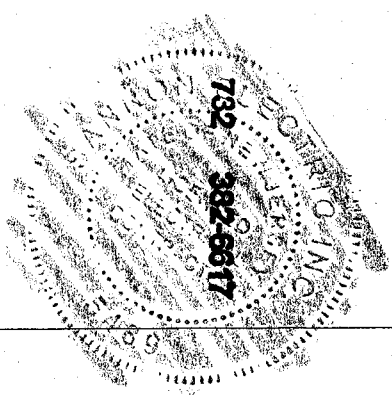
- ① 220V 30A COFFEE BREWER
- ② 110V 20A BLENDER
- ③ 110V 20A BLENDER
- ④ 110V 20A UNDERCOUNTER REFRIGERATOR
- ⑤ 110V 20A FUTURE FRAP DISPENSER
- ⑥ 110V 20A CONVENIENCE
- ⑦ 110V 20A PANINI GRILL
- ⑧ 110V 20A PANINI GRILL
- ⑨ 110V 20A SOUP WARMER
- ⑩ 220V 30A 3P BAKE OVEN
- ⑪ 110V 20A UNDERCOUNTER REFRIGERATOR
- ⑫ 110V 20A BEVERAGE COOLER NEMA L6-15P
- ⑬ 220V 20A PASTRY CASE NEMA L14-20P
- 3 WIRE + GROUND

- ⑭ 110V 20A CONVENIENCE
- ⑮ DATA
- ⑯ 110V 20A DEDICATED CASH REGISTER
- ⑰ 110V 20A DEDICATED CASH REGISTER
- ⑱ SPARE CONDUIT FOR FUTURE
- ⑲ 110V 20A UNDERCOUNTER REFRIGERATOR
- ⑳ 220V 30A ESPRESSO L6-30
- ㉑ 220V 30A ESPRESSO L6-30
- ㉒ 110V 20A CONVENIENCE

Sanron Electric Inc.
371 Jaques Ave
Rahway, NJ 07065
732 382-7470
5489

22-2287753

91102W



24 Track Lite

Designed by Jim Meeks	Checked by	Scale: 1/4"=1"	File name: Brick, NJ	Date: 07.23.07
2 Northway Lane Latham, NY 12110 Toll Free: 1.888.396.9111 www.dwmrinc.com		Barnes & Noble 2803 Brick, NJ		
Proposed Cafe Electrical Layout		Dates Revised:		



PERMIT UPDATE

Date Update Issued 09/05/2007
Control # C-07-004344
Permit # 07-2482+A

IDENTIFICATION Block: 671 Lot: 8 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. 44 BRICK PLAZA Contractor COMPLETE PROJECT REPAIR
Brick Township, NJ Address 280 FANDOLPH AVENUE EAST RUTHERFORD NJ
Owner in Fee FEDERAL REALTY INVESTMENT TRUST 07073
1626 EAST JEFFERSON ST. ROCKVILLE MD Telephone: (201) 635-1614
20852 Lic. No. or Bldrs. Reg. No.
Telephone: (732) 255-6600 Federal Employee No. 20-3606676

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:

PLUMBING ALTERATIONS CAFE ARE WILL BE RENOVATED. EXISTING CABINETS WILL BE REPLACED W/ NEW, NEW WALLS WILL BE INSTALLED, LOW SWING DOORS WILL BE RELOCATED, PAINTING.

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

Estimated Cost of Work \$3,000

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$0
Plumbing	\$40
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$4
CO Fee	
Other	\$0
Total	\$44
Check No.	999
Cash	\$0
Credit	\$0
Collected By	Stephanie Capozzi

Construction Official

Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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

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

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

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.



CONSTRUCTION PERMIT

Date Issued 08/09/2007
Control # C-07-003815
Permit # 07-2482

IDENTIFICATION Block: 671 Lot: 8 Qualifier
Work Site Location: 56 CHAMBERS BRIDGE RD. 44 BRICK PLAZA Contractor COMPLETE PROJECT REPAIR
Brick Township, NJ Address 280 FANDOLPH AVENUE EAST RUTHERFORD NJ
Owner in Fee FEDERAL REALTY INVESTMENT TRUST 07073
1626 EAST JEFFERSON ST ROCKVILLE MD Telephone: (201) 635-1614
20852 Lic. No. or Bldrs. Reg. No.
Telephone: (732) 255-6600 Federal Employee No. 20-3606676

Is hereby granted permission to perform the following work:

- ☒ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

INTERIOR ALTERATION(S) CAFE ARE WILL BE RENOVATED. EXISTING CABINETS WILL BE
REPLACED W/ NEW, NEW WALLS WILL BE INSTALLED, LOW SWING DOORS WILL BE
RELOCATED, PAINTING.

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

Estimated Cost of Work \$30,000

PAYMENTS (Office Use Only)

Building	\$720
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$40
CO Fee	
Other	\$0
Total	\$760
Check No.	2131
Cash	\$0
Credit	\$0
Collected By	Stephanie Capozzi

Construction Official

Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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 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.
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- ☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

Applicable to Ordinance 720-92

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

TOWNSHIP OF BRICK
Debris Form

Work Site Address: 44 BRICK PLAZA

Block: _____ Lot: _____

Contractor: Complete Protect & Repair LLC

Contractor's Address: 280 RANDOLPH AVE, EAST ROCKFORD NJ 07023

Type of Construction (minor, new home): MINOR

Type of Debris (shingles, siding, wood, etc.): WOOD CABINETS

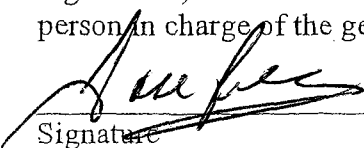
Party responsible for removal: Contractor (Local)

Dumpster size: 30 Yd.

Destination of debris: _____

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.

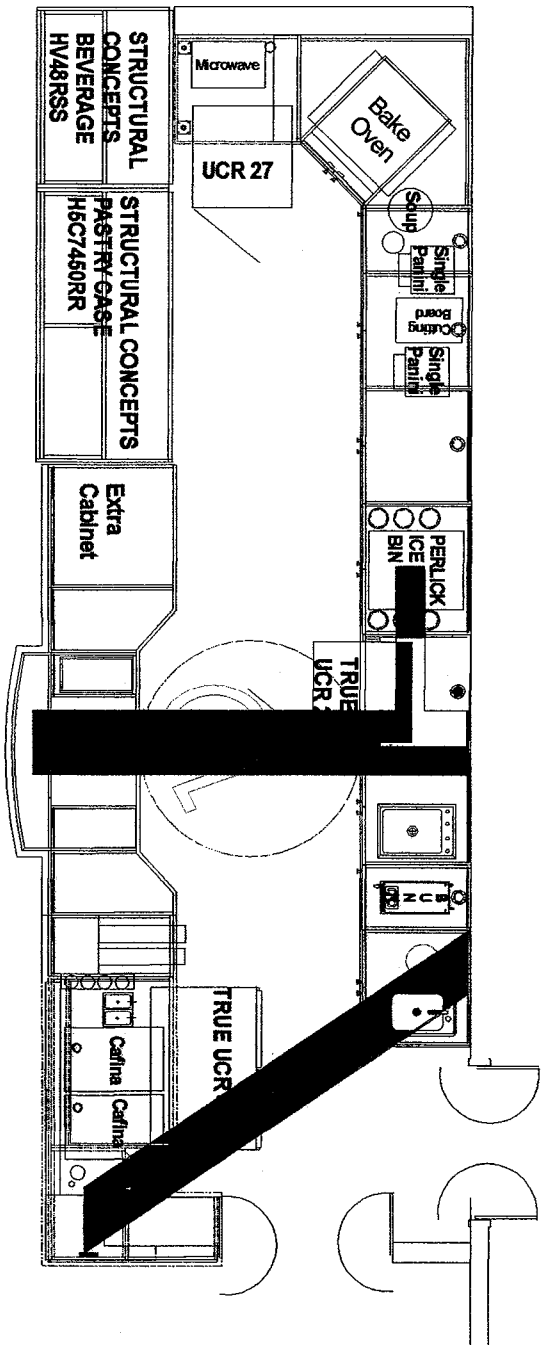

Signature

7/26/07
Date

Jose Perez
Print Name



DAVE



Designed by
Jim Meeks

Checked by

Scale: 1/4"=1"

File name:
Brick, NJ

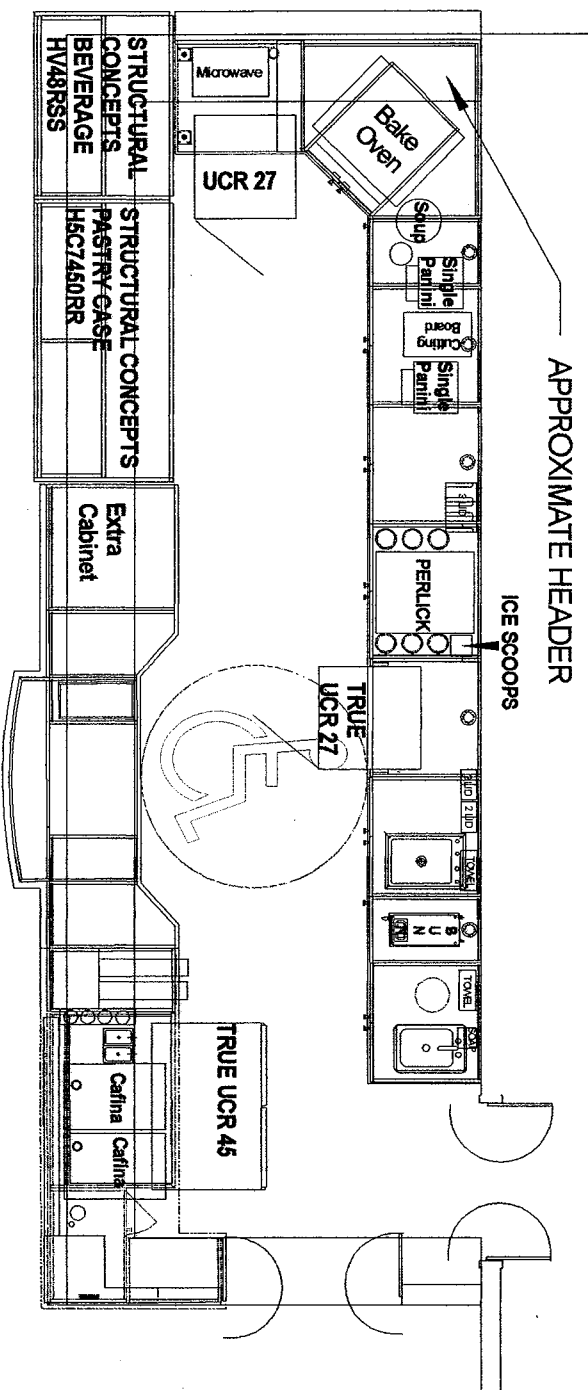
Date:
07.23.07

2 Northway Lane
Latham, NY 12110
Toll Free: 1.888.396.9111
www.dwmrinc.com

Barnes & Noble 2803 Brick, NJ

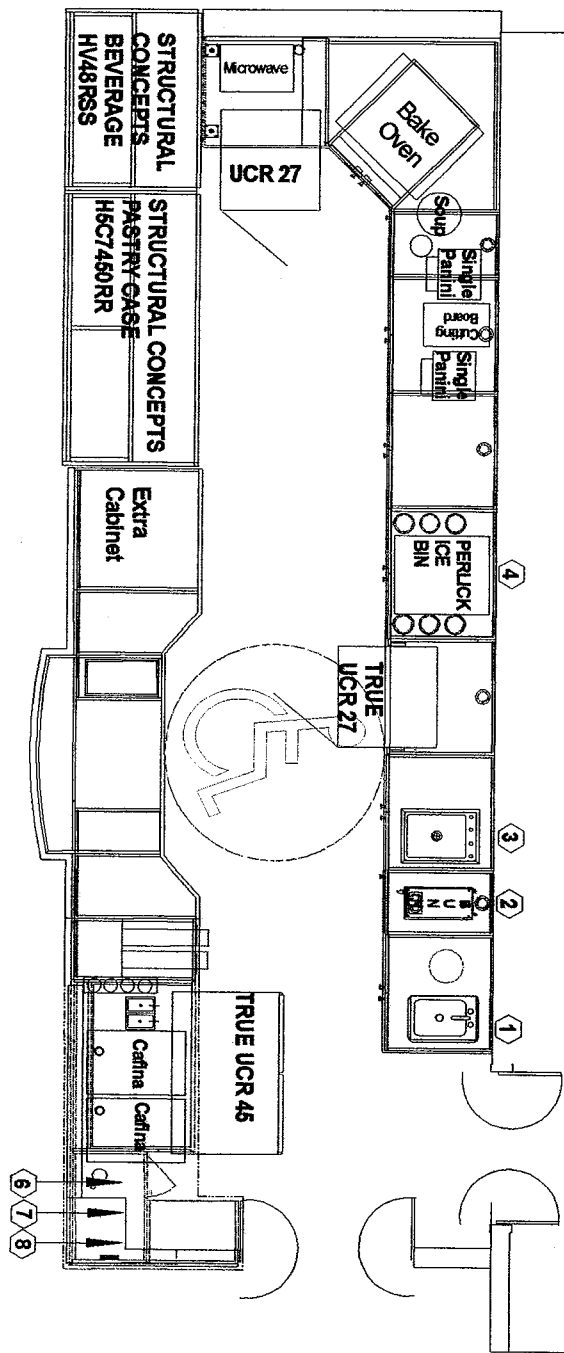
Proposed Cafe Trenching
Minimum

Dates Revised:



ALL CABINETS DF STANDARD ON BACK LINE
 CUSTOM CABINET ON FRONT LINE
 MODIFY EXISTING SIDE LINE LOW WALL FOR ELIASON DOORS

Designed by Jim Weeks	Checked by	Scale: 1/4"=1"	File name: Brick, NJ	Date: 05.27.07
 2 Northway Lane Latham, NY 12110 Toll Free: 1.888.396.9111 www.dwmllnc.com		Barnes & Noble 2803 Brick, NJ Proposed Cafe Layout Dates Revised:		



- ① UNFILTERED HOT/COLD DRAIN
- ② HAND SINK
- ③ FILTERED COLD COFFEE BREWER
- ④ FILTERED COLD WATER FOR PITCHER FILLER
- ⑤ UNFILTERED COLD FOR JAR WASHER
- ⑥ UNFILTERED HOT/COLD DRAIN
- ⑦ FLOOR DRAIN
- ⑧ FILTERED COLD WATER
- ⑨ FILTERED COLD WATER FOR ESPRESSO
- ⑩ UNFILTERED WATER FOR DIPPER WELL
- ⑪ FLOOR DRAIN

Designed by Jim Meeks	Checked by	Scale: 1/4"=1"	File name: Brick, NJ	Date: 07.23.07
2 Northway Lane Latham, NY 12110 Toll Free: 1.888.396.9111 www.dwmrlinc.com		Barnes & Noble 2803 Brick, NJ		
Proposed Cafe Plumbing Layout			Dates Revised:	

- ① 220V 30A COF
- ② 110V 20A BLE
- ③ 110V 20A BLE
- ④ 110V 20A UND
- ⑤ 110V 20A FUT
- ⑥ 110V 20A CON
- ⑦ 110V 20A PAN
- ⑧ 110V 20A PAN
- ⑨ 110V 20A SOU
- ⑩ 220V 30A 3P B
- ⑪ 110V 20A UND
- ⑫ 110V 20A BEV
- ⑬ 220V 20A PAS
3 WIRE + GRO

