BLOCK 671 LOT 8 QUALIFICATION CODE _____ ADDRESS (SITE) 28 BRICK PLAZA PERMIT NO. 01-3859

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 28 BRICK PLAZA / BRICK PLAZA
2. Name of Owner in Fee: CHUCK E. CHEESE Tel. (732) 262-9202
   Address 28 BRICK PLAZA SHOPPING CENTER
   street municipality zip code
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: _____ Tel. (972) 221-1974
   Address PARKWAY CONSTRUCTION & ASSOC.
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 13-2623548 FAX: (_____) _____
5. Architect or Engineer _____ Tel. (_____) _____
   Address _____
6. Responsible Person in Charge of Work MARK DAVIS / SUPT.
   Tel. (732) 262 9202 FAX (732) 262-9203

Interior Clean Out ✓

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 35		
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee			
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 35		

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.	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	

II. PROPOSED WORK

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work									
2.	☐ New Building									
3.	☐ Addition									
4.	☐ Alteration									
5.	☐ Fire Protection									
6.	☐ Plumbing									
7.	☐ Electrical									
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☑ Demolition									
	TOTAL COSTS	✓ 6000								

OPTIONAL (for office use only)

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. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:

Before Construction _____

After Construction _____

Net Gain or Loss _____

B. NON-RESIDENTIAL

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 10/17/2001
Control #
Permit # 01-3859

UCC NEW JERSEY

CONSTRUCTION PERMIT

IDENTIFICATION Block 427 Lot 5 Qual

Work Site Location 95 CHAMBERS BRIDGE ROAD
CHUCK E. CHEESE

Owner in Fee FEDERAL REALTY INVESTMENT TRUS

Address 1626 E JEFFERSON ST
ROCKVILLE, MD 20852-

Telephone ( ) -

Contractor PARKWAY CONSTRUCTION

Address 1504 CIVIC CIRCLE
LOUISVILLE, TN

Telephone ( )

Lic. No. or Cons. Reg. No.

Federal Cap. No. 18-2023548

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 5 only)

DESCRIPTION OF WORK:
ACTUAL COST OF INTERIOR CLEAN OUT FOR CHUCK E. CHEESE ($5,000)

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 $ 500

Construction Official

10/17/2001
Date

C.C.C. Fire (rev. 2/96)

PAYMENTS (Office Use Only)

Building	35
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Other	
Total	35
Check No.	
Cash	1
Collected By	MJR

10/17/01 1:38PM 0000006?546
XX02 SERV.002
#3859
BUILDING $35.00
XXXTOTAL $35.00
CASH $35.00
CHANGE $0.00
10/17/01 1:38PM 0000006?546 XX02
XXXTOTAL $35.00

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 10/17/2001
Date Issued 10/17/2001
Control #
Permit # 01-3859

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 Qual

Work Site Location 55 CHAMBERS BRIDGE ROAD
CHUCK E. CHEESE

Owner in Fee FEDERAL REALTY INVESTMENT TRUS

Address 1626 E JEFFERSON ST
ROCKVILLE, MD 20852-

Tele.( ) -

Contractor PARKWAY CONSTRUCTION

Address 1000 CIVIC CIRCLE
LOUISVILLE, TX

Tele.( ) Fax ( )

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 13-2625485

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

ACTUAL COST OF INTERIOR CLEAN OUT FOR CHUCK E. CHEESE ($6,000)

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type				
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
VCO				
Other				
Final				
BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 500
3. Total (1+2)$ 500

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	0
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[X] Other INTERIOR CLNOUT	35
Other	0
[ ] Demolition	0

	Administrative Surcharge	$ 0
Paid [X] Check # Cash	Minimum Fee	$ 0
Collected by: MJR	TOTAL FEE	$ 35
	DCA Training Fee	$ 0

U.C.C. F110 (rev. 3/96)

Township of Brick

Counter Form

(PLEASE PRINT)

Site Location: Chuck E Cheese REST. 28 BRICK PLAZA, BRICK ✓

Block: _____ Lot: _____

Owner's Name: Chuck E. Cheese E.J. & M. Allen Truhan

Owner's Mailing Address: 4441 W. AIRPORT FRWY.
IRVING, TX. 75062

Phone: (732) 262-9202

BUILDING

Contractor: PARK WAY CONSTRUCTION ✓

Address: 1060 Civic Circle
LEWISVILLE, TEXAS

Phone#: (972) 221-1979 75067

Lis #: _____

Federal Emp # or SSN 15-262548

Technical Data

Description of Work:

Interior Clean Out

Fee $35.00

Type of Work

___ New Building	___ Siding
___ Addition	___ Fence
✓ Alteration	___ Pool
___ Roofing	✓ Demolition
___ Asbestos Abatement	___ Sign _____ sq ft

Building Characteristics

Use Group Present: _____ Proposed: _____

No of Stories: _____

Height of Structure: _____

Area of the largest floor: _____

Area of New Building: _____

Volume of Structure: _____

Total Land Disturbed: _____

Cost of Alteration: _____

Cost of New Building: _____

Total Cost of Building Work: $ 6,000

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

Signature: Mark Davis / AGENT

Please Print Name MARK DAVIS

ELECTRICAL

Contractor: _____

Address: _____

_____

Phone#: _____

Lis #: _____

Federal Emp # or SSN _____

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	
Switches	
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	
Pool	
Spa/Hot Tub/Storable Pool	
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit –Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: _____

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

Signature: _____

Please Print Name _____

CONTRACTOR'S SEAL

Applicable to Ordinance 728-92
This form must be Handed in with permit application or a permit will not be issued.

TOWNSHIP OF BRICK

28 BECK PLAZA · BRICK, NJ. 08723
Work Site Address Block Lot

CEC ENTERTAINMENT, INC. 4441 W. AIRPORT FREEWAY
Owner's Name, Address, Phone IRVING, TX. 75062
(972) 258-5476 JEFF WOHEAD

PARKWAY CONSTRUCTION 1000 Civic Circle Lewisville,
Contractor's Name, Address, Phone TX. 75067

Construction DEMOLITION / Remodel - Commercial
Describe type (Single -family home, etc.)

Demolition INTERIOR Clean Out.
Describe type (Structure, roof, siding, etc.)

Describe type and estimated quantity of material 60YDS, wood, drywall paneling, old TABLES, and Booths and some carpeting

Name, address and phone of party responsible for removal of debris
ENV. WASTE SOLUTIONS / Christina / 888-841-4481 EXT. 210

Size of dumpster: 30 YD

Destination of discarded debris:

Hauler's DEP Permit No.:

**Note: Any recyclable material, including, but not limited to: corrugated cardboard, vegetative waste, concrete, asphalt, clean wood, etc., must be delivered to an approved recycling center, and receipts provided to the Township of Brick along with tipping receipts for non-recyclable material.

Generator's Certification: Under penalty of criminal and civil prosecution, for the making or submissin 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 or recycled in accordance with all applicable State and Federal laws and regulations, and that I have been authorized, in writing, to make such declarations by the person in charge of the generator's operation.

MARK DAVIS Mark Davis 10-16-01
Printed/Typed Name Signature Date

****

FOR OFFICE USE ONLY

MUST BE COMPLETED BEFORE CERTIFICATE OF OCCUPANCY OR CERTIFICATION OF APPROVAL IS ISS

Recycling tonnage receipts attached?

Certified tipping receipts attached?

**Note: Receipts must show certified weights, date of disposal and name and address of disposal center.

DISTRIBUTION LIST:
1. Original to Code Enforcement Officer
2. Construction Code Office
3. Applicant

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.vii:

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. 5:32-2.15(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.

(X) Check if contractor.

Agent Name MARK DAVIS / PARKWAY CONSTRUCTION

Address 1000 Civic Circle

LEWISVILLE, TX. 75067

Telephone (972) 221-1979

Signature Mark Davis

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