BLOCK 671 LOT C15-8 QUALIFICATION CODE ______ ADDRESS (SITE) #30 GRAND JUMBO BUFFET INC. 74 BRICK PLAZA PERMIT NO. 98-1072

RECEIVED APR 1 5 1998 DIV. OF INSPECTION

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

ZOK

I. IDENTIFICATION

1. Propsed Work Site at: 74 BRICK PLAZA, BRICK, N.J. 08723
2. Name of Owner in Fee: FEDERAL REALTY INVESTMENT TRUST Tel. (215) 657-8740
   Address 122-C PARK AVE, WILLOW GROVE, PA, 19090. (street, municipality, zip code)
3. Ownership in Fee: Public ✓ Private ______
4. Principal Contractor: HENG XING CONSTRUCTION INC CORP. Tel. (908) 806-4468
   Address 8 READING RD SUITE 104 FLEMINGTON, NJ. 08822
   License No. OR, if ne[redacted] Exp. Date ______
   Federal Employee No. [redacted] FAX: ( ) ______
5. Architect or Engineer WCL ASSOCIATES, INC. Tel. (212) 966-1132
   Address 153 CENTRE ST. #108, NYC. 10013
6. Responsible Person in Charge of Work PATRICK DING
   Tel. (717) 350-1229. FAX (717) 476-7356.

tenant fit up

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 605.-	TA	313
2.	Electrical			
3.	Plumbing	590.-	92	242
4.	Fire Protection	1104.		
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	34.-		
10.	Subtotal		4	
11.	Cert. of Occupancy			
12.	Other ZPA	30.-		
13.	TOTAL	$ 2363	96	

(Margin handwriting: 1 K #003; TC 48.-; 100.-; 3.-; 151.)

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

1. Number of Stories 1
2. Height of Structure 18' ft.
3. Area — Largest Floor 250 sq. ft.
4. New Building Area ______ sq. ft.
5. Volume of New Structure ______ cu. ft.
6. Construction Classification ALTERATION
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 328

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					4-29-98	TA	6/29/98		
3. ☐ Addition									
4. ☒ Alteration	$23,800.00								
5. ☒ Fire Protection					4/24/98		6/29/98		
6. ☒ Plumbing	$18,800.00				4-29-98		7/1/98		
7. ☒ Electrical	$3,000.00						7/1/98		
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition		JP	4/17/98		4/17/98	JP			
TOTAL COSTS									

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: BUFFET RESTAURANT.
2. Use Group: RESTAURANT.
3. Change in Use Group, Indicate Former:

IMPORTANT APPROVAL ASBT FINAL APPROVAL FEE COLLECTED

LDS BR 10208695

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.

( ) Check if contractor.

Agent Name PATRICK DING

Address 506 N. COURTLAND ST, E. STROUDSBURG, PA, 18301.

Telephone (717) 350-1229.

Signature _____

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

OFFICE DATE RECEIVED: _____

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

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

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

X. CERTIFICATES ISSUED (office use only)

		DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____	_____
☑ Certificate of Occupancy	No. 1072	7/6/98	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

CERTIFICATE

Date Issued 7/6/98
Control #
Permit # 98-1072

IDENTIFICATION

Block 671 Lot 8
Work Site Location 74 Brick Plaza

Owner in Fee Federal Realty Investment Trust
Address 1220 Park Avenue
Willow Grove, Pa. 19090
Tele. ( )
Contractor Heng Xing Construction Inc.
Address 8 Reading Rd., Suite 104
Flemington, NJ 08822
Tele. ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No.
or Social Security No.

Home Warranty No. N/A
Use Group A-3
Maximum Live Load
Description of Work/Use:

Tenant fit-up "GRAND JUMBO BUFFET"

Type of Warranty Plan: [ ] State [ ] Private
Construction Classification
Maximum Occupancy Load

CERTIFICATE OF OCCUPANCY/APPROVAL

XXX☑ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL

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

☐ 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 OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than _____, 19____ or the owner will be subject to a fine or order to vacate:

A Cuciazza
CONSTRUCTION OFFICIAL

Fee $
Paid [ ] Check No.
Collected by:

U.C.C. Form F-260A

1 WHITE—APPLICANT 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

4-30-98
Date Issued ~~04/22/~~98
Control #
Permit # 98-1072

UCC NEW JERSEY
CONSTRUCTION PERMIT

IDENTIFICATION Block 671 Lot 8

Work Site Location 74 BRICK PLAZA
TENANT FIT UP
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Telephone (215)657-8740

Contractor HENG XING CONSTRUCTION INC
Address 8 READING RD STE 104
FLEMINGTON, NJ 08822-
Telephone (908)806-4468
Lic. No. or Bldrs. Reg. No. _____ Exp. Date 1 1
Federal Emp. No. 16-07257[redacted]
or Social Security No. _____

Is hereby granted permission to perform the following work:
[X] BUILDING [X] PLUMBING [ ] OTHER _____
[ ] ELECTRICAL [X] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:
TENANT FIT UP

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 $ 42,610

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building	605
Electrical	0
Plumbing	590
Fire Protection	1,104
Elevator Devices	0
Other	
DCA Training Fee	34
Cert. of Occ.	0
Other ZPED	30
Total	2363 ~~2,333~~
Check No.	0199
Cash	
Collected By:	CS

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 05/06/98
Control #
Permit # 98-1072+A
Permit Issued 04/30/98

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 671 Lot 8

Work Site Location 74 BRICK PLAZA
INSTALL 2 KITCHEN HOOD
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Telephone (215)657-8740

Contractor HENG XING CONSTRUCTION INC
Address 8 READING RD STE 104
FLEMINGTON, NJ 08822-
Telephone (908)806-4468
Lic. No. or Bldrs. Reg. No. Exp. Date / /
Federal Emp. No. 16-072576[redacted]
or Social Security No. [redacted]

Is hereby granted permission to perform the following work:
[ ] BUILDING [ ] PLUMBING [ ] OTHER
[ ] ELECTRICAL [X] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	92
Elevator Devices	0
Other	
DCA Training Fee	4
Cert. of Occ.	0
Other	
Total	96
Check No.	5
Cash	
Collected By:	TL

Estimated Cost of Work $ 5,000

CONSTRUCTION OFFICIAL

1072*# 0.00
BLOCK 671 # 0.00
LOT 8 # 1242.13
FIRE # 92.00
FIRE # 4.00
D.C.A. 2.00
B.C.A. 1340.00
TOTAL 1340.00
CHECK 0.00
CHANGE
0028A005 14:07
05/06/98

TOWNSHIP OF BRICK
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 05/06/98
Update Issued 05/06/98
Control #
Permit No 98-1072+B
Permit Issued 04/30/98

UCC NEW JERSEY

PERMIT UPDATE

IDENTIFICATION Block 671 Lot 8

Work Site Location 74 BRICK PLAZA
FIRE SUPPRESSION
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Telephone (215)657-8740

Contractor KAMP FIRE EQUIP
Address 17 BLOOMFIELD AVE
DENVILLE, NJ
Telephone ( )
Lic. No. or Bldrs. Reg. No. Exp. Date / /
Federal Emp. No. 22-2423435
or Social Security No.

Is hereby granted permission to perform the following work:
[ ] BUILDING [ ] PLUMBING [ ] OTHER
[ ] ELECTRICAL [X] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:

Estimated Cost of Work $ 2,000

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

Building	0
Electrical	0
Plumbing	0
Fire Protection	1,242
Elevator Devices	0
Other	
DCA Training Fee	2
Cert. of Occ.	0
Other	
Total	1,244
Check No.	5
Cash	
Collected By:	TL

#30 Jum Bo Chinese Buffet.

PERMIT UPDATE

Date Update Issued 5/6/98
Control #
Permit # 98-1072 +A
Date Permit Issued

IDENTIFICATION Block 671 Lot 8
Work Site Location 74 BRICK PLAZA, BRICK, NJ 08723
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
Address 122-C WILLOW GROVE, PA, 19090.
Tele. (215) 657-6000 8240.

Contractor HENG XING CONSTRUCTION INC.
Address SPENDING RD #104 FLEMINGTON, NJ. 08822
Tele. (908) 806-4468.
Lic. No. or Bldrs. Reg. No. [redacted]
Federal Emp. No.
or Social Security No.

is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER
[ ] ELECTRICAL [✓] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK:
INSTALL TWO KITCHEN EXHAUST HOOD SYS.

Estimated Cost of Work $ 5000

J. Cavazza #5
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	
Electrical	
Plumbing	
Fire Protection	92-
Elevator Devices	~~50.~~
Other	
DCA Training Fee	4
Cert. of Occ.	
Other	
Total	96-
Check No.	# 5
Cash	
Collected By:	

U.C.C. Form F-190B

1 WHITE – INSPECTOR COPY 2 CANARY – OFFICE COPY 3 PINK – OFFICE COPY 4 GOLD – APPLICANT COPY

#32 JUMBO CHINA BUFFET.

PERMIT UPDATE

UNIFORM CONSTRUCTION CODE

Date Update Issued 5/6/98
Control #
Permit # 98-1072-B
Date Permit Issued

IDENTIFICATION Block 671 Lot 8
Work Site Location 74 BRICK PLAZA, BRICK NJ 08723
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
Address 122-C WILLOW GROVE, PA. 19090.
Tele. (215) 657-8740

Contractor Kamp Fire Equipment
Address 1 Bloomfield Ave Denville NJ
Tele. (973) 586-6800
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2423455
or Social Security No.

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] OTHER
[ ] ELECTRICAL [X] FIRE PROTECTION
[ ] ELEVATOR DEVICES

DESCRIPTION OF WORK: Install (3) Fire Suppression Systems

Estimated Cost of Work $ 2,000.00

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)	
Building	
Electrical	
Plumbing	
Fire Protection	1242
Elevator Devices	
Other	
DCA Training Fee	2
Cert. of Occ.	
Other	
Total	1244
Check No.	115
Cash	
Collected By:	

U.C.C. Form F-190B

1 WHITE – INSPECTOR COPY 2 CANARY – OFFICE COPY 3 PINK – OFFICE COPY 4 GOLD – APPLICANT COPY

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 04/24/98
Date Issued 5/18/98
Control # C27-8
Permit # 98-1420

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
Work Site Location 74 BRICK PLAZA CHINA BUFFET SIGN
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Tele.(800)688-8980
Contractor AMERICAN ADVERTISING
Address 10 DELANCEY ST
N. YORK, NY 10002-
Tele.(212)228-9828
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 13-3920896
or Social Security No. [redacted]

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

SIGN

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	5-18-98	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire [ ] Elev

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 6-24-98
Approved By: FM

INSPECTIONS	Dates (Month/Day)			
Type	Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			6-29-98	FM

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	0
[ ] Roofing	
[ ] Siding	
[ ] Fence 0 Height (6' or over)	0
[X] Sign 210 Sq. Ft.	210
[ ] Pool	0
[ ] Asbestos Abatement	0
[ ] Other	0
Other	0
[ ] Demolition	0

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 $ 2,000
3. Total (1+2)$ 2,000

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 210
DCA Training Fee	$ 2

Paid [ ] Check #
Collected by:

U.C.C. Form F-110B

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 04/13/98
Date Issued [redacted]
Control # C15-8
Permit # [redacted]

98-1072
4/30/98

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
Work Site Location 74 BRICK PLAZA
TENANT FIT UP
Owner in Fee FEDERAL REALTY INVESTMENT
Address 1220 PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor MENG XING CONSTRUCTION INC
Address 8 READING RD STE 104
FLEMINGTON, NJ 08822-
Tele.(908)806-4468
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 16-0725761
or Social Security No. [redacted]

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

TENANT FIT UP

MAX OCCUPANCY 328

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	4-27-98	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire [ ] Elev

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date:
Approved By:

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

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	605
[ ] Roofing	
[ ] Siding	
[ ] Fence 0 Height (6' or over)	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present Proposed A-3
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 $ 23,800
3. Total (1+2) $ 23,800

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 605
DCA Training Fee	$ 19

Paid [ ] Check #
Collected by:

U.C.C. Form F-1108

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 05/18/98
Date Issued 01/01/54
Control # 5/22/98
Permit # 98-1072-C

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
Work Site Location 74 BRICK PLAZA GRAND BUFFET
UPDATE ALTERATIONS
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor HENG XING CONSTRUCTION INC
Address 8 READING RD STE 104
FLEMINGTON, NJ 08822-
Tele.(908)806-4468
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 16-0725
or Social Security No. [redacted]

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

ALTERATIONS TO ORIGINAL PLAN
ADDITIONAL PLUMBING

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	5-20-98	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date: 6-29-98
Approved By: FM

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type				
Footing				
Foundation				
Slab				
Frame			5/27/98	
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			6-29-98	FM

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed A-3
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 $ 1,500
3. Total (1+2)$ 1,500

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	48
[ ] Roofing	
[ ] Siding	
[ ] Fence 0 Height (6' or over)	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement	0
[ ] Other	0
Other	0
[ ] Demolition	0

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 48
DCA Training Fee	$ 1

Paid [ ] Check # _____
Collected by: _____

U.C.C. Form F-110B

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 05/18/98
Date Issued 01/01/54
Control # 5/22/98
Permit # 98-1072+C

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
Work Site Location 74 BRICK PLAZA GRAND BUFFET
UPDATE ALTERATIONS
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor HENG XING CONSTRUCTION INC
Address 8 READING RD STE 104
FLEMINGTON, NJ 08822-
Tele.(908)806-4468
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 16-072[redacted]
or Social Security No

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

ALTERATIONS TO ORIGINAL PLAN
ADDITIONAL PLUMBING

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	5/20/98	FM
[ ] 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				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				

TYPE OF WORK		FEE (Office Use Only)
[ ] New Building		$ 0
[ ] Addition		0
[X] Alteration		48
[ ] Roofing		
[ ] Siding		
[ ] Fence 0	Height (6' or over)	0
[ ] Sign 0	Sq. Ft.	0
[ ] Pool		0
[ ] Asbestos Abatement		0
[ ] Other		0
Other		0
[ ] Demolition		0

B. BUILDING CHARACTERISTICS

Use Group Present Proposed A-3
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 $ 1,500
3. Total (1+2)$ 1,500

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 48
DCA Training Fee	$ 1

U.C.C. Form F-110B

#30 JUMBO GRAND BUFFET.

Brick

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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

Work Site Location 74 Brick Blvd
Brick, NJ 08723

Owner in Fee/Occupant FEDERAL REALTY INVESTMENT FEE

Address Willow Grove Shopping Center 122-C PARK AVE
Willow Grove, PA, 19090

Tele. (215) 657-8740

Contractor Unity Electrical Contracting Corp.

Address 54 Canal Street
New York, NY 10002

Tele. (212) 925-3631 Fax (212) 925-3288

Lic. No. 8136

Federal Emp. No. 223160960

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ 200.

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date: _____

Approved by: _____

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough			6/19/98	SE
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			980701	MM6455

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

SUBCODE APPROVAL

[X] CO [ ] CCO [ ] CA

Date: 980701

Approved by: MM6455

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.

Joe Yuk Lee
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [ ] 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 UW Lights
		Storable Pool/Spa/Hot Tub
		KW Elec. Range/Receptacle
		KW Oven/Surface Unit
		KW Elec. Water Heater
		KW Elec. Dryer/Receptacle
		KW Dishwasher
		HP Garbage Disposal
		KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
		HP Motors 1/+ HP
		KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
5	1	KW Elec. Sign/Outline Light
		.....
		.....

FEE (Office Use Only)

JUN 17 98 005128

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

pd cash

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$ 45.—

m

U.C.C. F120 (rev. 3/96)

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

#30 GRAND JUMBO BUFFET — JUMBO CHINA BUFFET
Brick INC.

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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
Work Site Location 74 BRICK PLAZA, BRICK, NJ. 08723

Owner in Fee/Occupant FEDERAL REALTY INVESTMENT TRUST
Address WILLOW GROVE SHOPPING CENTER, 122-C PARK AVENUE, WILLOW GROVE, PA, 19090.
Tele. (215) 657-8740
Contractor Unity Electrical Contracting Corp.
Address 54 Canal Street
N.Y. N.Y. 10002
Tele. (212) 925 3631 Fax (212) 925 3288
Lic. No. 8136
Federal Emp. No. 223160960

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 9,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: _____
Approved by: _____

SUBCODE APPROVAL
[X] CO [ ] CCO [ ] CA
Date: 990701
Approved by: MM6455

INSPECTIONS Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough	I 4/16/98	5493	5/19/98	5493
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			990701	MM6455

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

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.

Joel Lee
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
30		Lighting Fixtures
20		Receptacles
6		Switches
0		Detectors
0		Light Poles
0		Motors—Fract. HP
0		Emergency & Exit Lights
0		Communications Points
0		Alarm Devices/F.A.C. Panel
56		.....
0		TOTAL NUMBERS
0		Pool Permit/with UW Lights
0		Storable Pool/Spa/Hot Tub
0	___	KW Elec. Range/Receptacle
0	___	KW Oven/Surface Unit
0	___	KW Elec. Water Heater
0	___	KW Elec. Dryer/Receptacle
0	___	KW Dishwasher
0	___	HP Garbage Disposal
0	___	KW Central A/C Unit
0	___	HP/KW Space Heater/Air Handler
0	___	KW Baseboard Heat
4	5	HP Motors 1/+ HP
0	___	KW Transformer/Generator
0	___	AMP Service
0	___	AMP Subpanels
0	___	AMP Motor Control Center
0	___	KW Elec. Sign/Outline Light
___	___	.....
___	___	.....

APR 14 98 0 0 2 9 8 9

FEE (Office Use Only)	
	$ 45
	36
Administrative Surcharge	$
Minimum Fee	$ 81.—
DCA Training Fee	$ 2.—
TOTAL FEE	$ 83.—

RF

paid cash

U.C.C. F120 (rev. 3/96)

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

#35 GRAND JUNIBO BUFFET
Brick INC.

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit #

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
Work Site Location 34 BRICK PLAZA, BRICK, NJ. 08723

Owner in Fee/Occupant FEDERAL REALTY INVESTMENT TRUST
Address WILLOW GROVE SHOPPING CENTER, 122-C PARK AVENUE, WILLOW GROVE, PA. 19090.
Tele. (215) 657-8740
Contractor Unity Electrical Contracting Corp.
Address 954 Canal Street
N.Y. N.Y. 10002
Tele. (212) 925 3631 Fax (212) 925 3288
Lic. No. 8136
Federal Emp. No. 223160960

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[ ] Pole/Pad # _____ [ ] Temporary [ ] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work $ 3,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved
Date: _____
Approved by: _____

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____

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.

Joel Yudewitz
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
30		Lighting Fixtures	
20		Receptacles	
6		Switches	
6		Detectors	
0		Light Poles	
0		Motors—Fract. HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
56		.....	
0		TOTAL NUMBERS	$ 45
0		Pool Permit/with UW Lights	
0		Storable Pool/Spa/Hot Tub	
0	___	KW Elec. Range/Receptacle	
0	___	KW Oven/Surface Unit	
0	___	KW Elec. Water Heater	
0	___	KW Elec. Dryer/Receptacle	
11	___	KW Dishwasher	
0	___	HP Garbage Disposal	
0	___	KW Central A/C Unit	
0	___	HP/KW Space Heater/Air Handler	
0	___	KW Baseboard Heat	
4	5	HP Motors 1/+ HP	36
0	___	KW Transformer/Generator	
0	___	AMP Service	
0	___	AMP Subpanels	
0	___	AMP Motor Control Center	
0	___	KW Elec. Sign/Outline Light	
___	___	.....	
___	___	.....	

Administrative Surcharge	$
Minimum Fee	$ 84
DCA Training Fee	$ 4
TOTAL FEE	$ 133

pd. cash

U.C.C. F120
(rev. 3/96)

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 05/06/98
Date Issued 05/06/98
Control #
Permit # 98-1072+A

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
Work Site Location 74 BRICK PLAZA
INSTALL 2 KITCHEN HOOD
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor HENG XING CONSTRUCTION INC
Address 8 READING RD STE 104
FLEMINGTON, NJ 08822-
Tele.(908)806-4468
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 16-0725761
or Social Security No. 160-72-5761

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed A-3
Construction Class Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot. Work $ 5,000 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 6/29/98
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppr Test				
F-Alarm Tst				
Smoke Test				
Mechanical			6/29/98	
TCO				
Other 6/29/98	NOT	Ready	Leaks	
Other				
Other				

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of record and an authorized to make this application.

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks	( ) Capacity	0	Fuel	
Combustible Liquid Storage Tanks	( ) Capacity	0	Fuel	
L.P.G. Storage Tanks	( ) Capacity	0	Fuel	
L.N.G. Storage Tanks	( ) Capacity	0	Fuel	

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	0	
Dry Sprinkler Heads	0	
TOTAL	0	0
Smoke Detectors	0	
Heat Detectors	0	
TOTAL	0	0
Stand Pipes	0	0
Kitchen Hood Exhaust Systems	2	92
Pre-Engineered Systems		
CO2 Suppression	0	0
Halon Suppression	0	0
Foam Suppression	0	0
Dry Chemical	0	0
Wet Chemical	0	0
Gas or Oil Fired Appliance	0	0
Other		0
Other		0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	92
DCA Training Fee	$	4

Paid [X] Check # 5
Collected by: TL

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 05/06/98
Date Issued 05/06/98
Control #
Permit # 98-1072+A

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
Work Site Location 74 BRICK PLAZA
INSTALL 2 KITCHEN HOOD
Owner in Fee FEDERAL REALTY INVESTMENT
Address 1220 PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor HENG XING CONSTRUCTION INC
Address 8 READING RD STE 104
FLEMINGTON, NJ 08822-
Tele.(908)806-4468
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 16-0725761
or Social Security No. [redacted]

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed A-3
Construction Class Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot. Work $ 5,000 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved By:

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

INSPECTIONS Type	Failure	Dates (Month/Day) Failure	Approval	Initial
Suppr Test				
F-Alarm Tst				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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.

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity 0 Fuel
Combustible Liquid Storage Tanks ( ) Capacity 0 Fuel
L.P.G. Storage Tanks ( ) Capacity 0 Fuel
L.N.G. Storage Tanks ( ) Capacity 0 Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	0	
Dry Sprinkler Heads	0	
TOTAL	0	0
Smoke Detectors	0	
Heat Detectors	0	
TOTAL	0	0
Stand Pipes	0	0
Kitchen Hood Exhaust Systems	2	92
Pre-Engineered Systems		
CO2 Suppression	0	0
Halon Suppression	0	0
Foam Suppression	0	0
Dry Chemical	0	0
Wet Chemical	0	0
Gas or Oil Fired Appliance	0	0
Other		0
Other		0

	Administrative Surcharge	$ 0
Paid [X] Check # 5	Minimum Fee	$ 0
Collected by: TL	TOTAL FEE	$ 92
	DCA Training Fee	$ 4

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 05/06/98
Date Issued 05/06/98
Control #
Permit # 98-1072+B

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
Work Site Location 74 BRICK PLAZA
FIRE SUPPRESSION
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor KAMP FIRE EQUIP
Address 17 BLOOMFIELD AVE
DENVILLE, NJ
Tele.( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2423435
or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed A-3
Construction Class Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot. Work $ 2,000 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppr Test				
F-Alarm Tst				
Smoke Test				
Mechanical			6/29/98	
TCO				
Other				
Other				
Other				

C. CERTIFICATION IN LIEU OF OATH

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

SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks	( ) Capacity	0	Fuel	
Combustible Liquid Storage Tanks	( ) Capacity	0	Fuel	
L.P.G. Storage Tanks	( ) Capacity	0	Fuel	
L.N.G. Storage Tanks	( ) Capacity	0	Fuel	

	Number		FEE (Office Use Only)
Wet Sprinkler Heads	0		
Dry Sprinkler Heads	0		
TOTAL	0		0
Smoke Detectors	0		
Heat Detectors	0		
TOTAL	0		0
Stand Pipes	0		0
Kitchen Hood Exhaust Systems	0		0
Pre-Engineered Systems			
CO2 Suppression	0		0
Halon Suppression	0		0
Foam Suppression	0		0
Dry Chemical	0		0
Wet Chemical	3		276
Gas or Oil Fired Appliance	21	x 46	966
Other			0
Other			0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	1,242
DCA Training Fee	$	2

Paid [X] Check # 5
Collected by: TL

U.C.C. Form F-140B

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 05/06/98
Date Issued 05/06/98
Control #
Permit # 98-1072+B

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
Work Site Location 74 BRICK PLAZA
FIRE SUPPRESSION
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor KAMP FIRE EQUIP
Address 17 BLOOMFIELD AVE
DENVILLE, NJ
Tele.( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-2423435
or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed A-3
Construction Class Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot. Work $ 2,000 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppr Test				
F-Alarm Tst				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks	( ) Capacity	0	Fuel	
Combustible Liquid Storage Tanks	( ) Capacity	0	Fuel	
L.P.G. Storage Tanks	( ) Capacity	0	Fuel	
L.N.G. Storage Tanks	( ) Capacity	0	Fuel	

	Number		FEE (Office Use Only)
Wet Sprinkler Heads	0		
Dry Sprinkler Heads	0		
TOTAL	0		0
Smoke Detectors	0		
Heat Detectors	0		
TOTAL	0		0
Stand Pipes	0		0
Kitchen Hood Exhaust Systems	0		0
Pre-Engineered Systems			
CO2 Suppression	0		0
Halon Suppression	0		0
Foam Suppression	0		0
Dry Chemical	0		0
Wet Chemical	3		276
Gas or Oil Fired Appliance	21	x 46	966
Other			0
Other			0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	1,242
CCA Training Fee	$	2

Paid [X] Check # 5
Collected by: TL

U.C.C. Form F-140B

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 04/13/98
Date Issued [redacted]
Control # C15-8
Permit # [redacted]
4-30-98
98-1072

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
Work Site Location 74 BRICK PLAZA
TENANT FIT UP
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor THOMAS ARNONE
Address 128 NEPTUNE AVE
NEPTUNE CITY, NJ 07753-
Tele.(732)774-8323
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 14-2323[redacted]
or Social Security No. [redacted]

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed A-3
Construction Class Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot. Work $ 10 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 4/29/98
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 6/29/98
Approved By:

INSPECTIONS Type	Failure	Failure	Approval	Initial
Suppr Test				
F-Alarm Tst				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks	( ) Capacity 0	Fuel	
Combustible Liquid Storage Tanks	( ) Capacity 0	Fuel	
L.P.G. Storage Tanks	( ) Capacity 0	Fuel	
L.N.G. Storage Tanks	( ) Capacity 0	Fuel	

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	0	
Dry Sprinkler Heads	0	
TOTAL	0	0
Smoke Detectors	0	
Heat Detectors	0	
TOTAL	0	0
Stand Pipes	0	0
Kitchen Hood Exhaust Systems	1	46
Pre-Engineered Systems		
CO2 Suppression	0	0
Halon Suppression	0	0
Foam Suppression	0	0
Dry Chemical	1	92
Wet Chemical	0	
Gas or Oil Fired Appliance	21	966
Other		0
Other		0

SJB 9242=484

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	1,104
DCA Training Fee	$	0

Paid [ ] Check # Collected by:

U.C.C. Form F-140B

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 04/13/98
Date Issued [redacted]
Control # C15-8
Permit # [redacted]
4-30-98
98-1072

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
Work Site Location 74 BRICK PLAZA
TENANT FIT UP
Owner in Fee FEDERAL REALTY INVESTMENT
Address 1220 PARK AVE
MILLON GROVE, PA 19090-
Tele.(215)657-8740
Contractor THOMAS ARNONE
Address 128 NEPTUNE AVE
NEPTUNE CITY, NJ 07753-
Tele.(732)774-8323
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 14-232[illegible]
or Social Security No [redacted]

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed A-3
Construction Class Present Proposed
Heating Systems [ ] New [ ] Existing
Type: [ ] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot. Work $ 10 [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 4/29/96
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppr Test				
F-Alarm Tst				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks	( ) Capacity 0	Fuel	
Combustible Liquid Storage Tanks	( ) Capacity 0	Fuel	
L.P.G. Storage Tanks	( ) Capacity 0	Fuel	
L.N.G. Storage Tanks	( ) Capacity 0	Fuel	

	Number	FEE (Office Use Only)
Wet Sprinkler Heads	0	
Dry Sprinkler Heads	0	
TOTAL	0	0
Smoke Detectors	0	
Heat Detectors	0	
TOTAL	0	0
Stand Pipes	0	0
Kitchen Hood Exhaust Systems	1	46
Pre-Engineered Systems		
CO2 Suppression	0	0
Halon Suppression	0	0
Foam Suppression	0	0
Dry Chemical	1	92
Wet Chemical	0	
Gas or Oil Fired Appliance	21	966
Other		0
Other		0

5 lb 22x2 = $184

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	1,104
DCA Training Fee	$	0

Paid [ ] Check # Collected by:

U.C.C. Form F-1408

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

BCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 05/18/98
Date Issued 01/01/54
Control # 5/22/98
Permit # 98-1072+C

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
Work Site Location 74 BRICK PLAZA GRAND BUFFET 262 9993
UPDATE ALTERATIONS
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor MICHAEL LO CASCIO JR
Address 87 WOODVIEW DR
BRICK, NJ 08723- 591-
Tele.(732)679-4034
Lic. No. or Bldrs. Reg. No. 5566 7784
Federal Emp. No. 08-9342576
or Social Security No. [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed A-3
Building Sewer Size _____ [ ] Public Sewer [ ] Private Septic
Water Sewer Size _____ [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[✓] Plumb. Plans Approved
Date: 5-21-98
Approved By: [signature]

SUBCODE APPROVAL
[✓] CO [ ] CCO [ ] CA
Approved By: [signature]
Date: 7-2-98

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures			7-2-98	[signature]
Gas Equip.				
Gas Piping			6-17-98	[signature]
Solar				
TCO				

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
0	Shower	0
8	Floor Drain	80
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Grease Trap	0
0	Water Cooled A/C or Refrigeration Unit	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Active Solar System	0
	Other _____	0
	Other _____	0

Administrative Surcharge $ 0
Paid [ ] Check # _____ Minimum Fee $ 0
Collected by: _____ TOTAL FEE $ 100
DCA Training Fee $ 2

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. _____
Signature-Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

U.C.C. Form F-130B

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 05/18/98
Date Issued 01/01/54
Control # 5/22/98
Permit # 98-1072+C

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
Work Site Location 74 BRICK PLAZA GRAND BUFFET
UPDATE ALTERATIONS
Owner in Fee FEDERAL REALTY INVESTMENT
Address 122C PARK AVE
WILLOW GROVE, PA 19090-
Tele.(215)657-8740
Contractor MICHAEL LO CASCIO JR
Address 87 WOODVIEW DR
BRICK, NJ 08723-
Tele.(732)679-4034
Lic. No. or Bldrs. Reg. No. 5566
Federal Emp. No. 08-934[redacted]
or Social Security No [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present ____ Proposed A-3
Building Sewer Size ____ [ ] Public Sewer [ ] Private Septic
Water Sewer Size ____ [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 2,500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[✓] Plumb. Plans Approved
Date: 5 21 98
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By: ____
Date: ____

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
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. ____
Signature-Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Closet	10
0	Urinal / Bidet	0
0	Bath Tub	0
1	Lavatory	10
0	Shower	0
8	Floor Drain	80
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Grease Trap	0
0	Water Cooled A/C or Refrigeration Unit	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Active Solar System	0
	Other ____	0
	Other ____	0

Administrative Surcharge $ 0
Paid [ ] Check # ____ Minimum Fee $ 0
Collected by: ____ TOTAL FEE $ 100
DCA Training Fee $ 2

U.C.C. Form F-130B

#30 - Grand Jumbo Buffet Fix

PLUMBING SUBCODE TECHNICAL SECTION

Existing lines

Date Received 4/30/98
Date Issued
Control #
Permit # 98-1072

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
Work Site Location 74 BRICK PLAZA, BRICK, N.J. 08723

Owner in Fee FEDERAL REALTY INVESTMENT TRUST
Address WILLOW GROVE SHOPPING CENTER, 122-C PARK AVENUE, WILLOW GROVE PA, 19090.
Tele. (215) 657-8740.
Contractor THOMAS ARNONE
Address 128 N. OCEAN AVE. NEPTUNE CITY N.J. 07753
Tele. (732) 774-8323
Lic. No. 2128
Federal Emp. No. _____ or Social Security [redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Estimated Cost of Plumbing Work $ 18,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 4-29-98
Approved by:

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initials
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping			6-17-98	
Solar				
TCO				

COMMERCIAL

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.

Thomas Arnone
Signature—Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
5	Water Closet	
1	Urinal/Bidet	
	Bath Tub	
4	Lavatory	
	Shower	
2	Floor Drain	
2	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
2	Water Heater	
	Fuel Oil Piping	
~~16~~ 1	Gas Piping CONNECTIONS	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
3	Backflow Preventer	
1	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Active Solar System	
4	Other BUFFET TABLE INDIRECT WASTES 10 LF.	40

Administrative Surcharge $ _____
Paid [ ] Check # _____ Minimum Fee $ _____
DCA Training Fee $ _____
Collected by: _____ TOTAL $ _____

U.C.C. Form F-1308 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

+30 - ... Buffet Fix.

PLUMBING SUBCODE TECHNICAL SECTION

Date Received 4/31/97
Date Issued
Control #
Permit # 98-1093

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

Block 671 Lot 2
Work Site Location 74 BRICK PLAZA, BRICK, N.J. 08723
Owner in Fee FEDERAL REALTY INVESTMENT TRUST
Address WILLOW GROVE SHOPPING CENTER, 122-C PARK AVENUE, WILLOW GROVE PA, 19090.
Tele. (215) 657-8740.
Contractor THOMAS LALIQUE
Address 128 LIGHTHOUSE AVE. VENTNOR CITY N.J. 07753
Tele. (732) 776-5523
Lic. No. 2138
Federal Emp. No. ______ or Social Security N[redacted]

B. PLUMBING CHARACTERISTICS

Use Group Present ______ Proposed ______
Building Sewer Size ______ Public Sewer ______ Private Septic ______
Water Service Size ______ Public Water ______ Private Well ______
Estimated Cost of Plumbing Work $ 18,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Elec.
[ ] Fire [ ] Elevator
[✓] Plumb. Plans Approved
Date: 4-29-97
Approved by: ...

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Approved By: ______
Date: ______

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				

Dates (Month/Day)

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.

Signature—Contractor Seal

[✓] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
6	Water Closet	
1	Urinal/Bidet	
	Bath Tub	
4	Lavatory	
	Shower	
2	Floor Drain	
2	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
2	Water Heater	
	Fuel Oil Piping	
35	Gas Piping connections	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
3	Backflow Preventer	
1	Greasetrap	
	Water Cooled A/C or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Active Solar System	
4	Other Buffet Tables	40

Administrative Surcharge $ ______
Paid [ ] Check # ______ Minimum Fee $ ______
DCA Training Fee $ ______
Collected by: ______ TOTAL $ ______

U.C.C. Form F-130B

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

COMMERCIAL

TOWNSHIP OF BRICK

ZONING PERMIT APPLICATION
(Please type or print NEATLY)

Property Address: 74, BRICK PLAZA #30, BRICK, NJ. 08723

Block: 671 **Lot:** 8

Name of Property Owner: FEDERAL REALTY INVESTMENT TRUST.

Name of person making application: SAU WONG

Company Name: GRAND JUMBO BUFFET INC.

Mailing Address: 24 EAGLE GLEN MALL, E. STROUDSBURG, PA. 18301. (TEMP)

Telephone Number: (717) 476-7658 or (717) 350-1229 (cell phone).

Present or Most recent use property (Check One):

____ **Vacant Lot** ____ **Single Family Dwelling** ____ **Residential Condominium Unit or Apt.**

____ **Commercial (please describe)** _____

__X__ **Other (please describe)** Existing Restaurant. (STACEY BUFFET)

Proposed Use: ____ **Single-Family Dwelling** ____ **Residential Condo or Apt.**

____ **Commercial (please describe)** _____

__X__ **Other (please describe)** CHINESE Restaurant

Proposed construction (include height and other dimensions of proposed structure or addition; if proposed fence, include type as well as height): TENANT FIT-UP.

Please submit with application two (2) accurate plot plans either drawn by a surveyor or engineer, or hand-drawn on an 8 1/2" by 11" sheet of paper by the owner of applicant, neatly and to scale. The plot plan must show all existing and proposed structures, all setbacks from property lines, all dimensions of the lot and structures, and all streets and waterways.

If approval was granted by the Zoning Board of Adjustment or Planning Board, include a copy of the Resolution.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other municipal approvals and ordinances, and all county, state and federal regulations.

This application will not be accepted unless it is COMPLETELY filled out.

Signature of Applicant Sau Wong **Date** 4/12/98

Received by Zoning Officer: **Date** 4/15/98 **Complete** ✓ **Incomplete** _____

SAMPLE FORM ONLY !! - DO NOT SUBMIT OR ACCEPT !!

TOWNSHIP OF BRICK
ZONING PERMIT APPLICATION
(Please type or print NEATLY)

Property Address: (number, street) _____

Block: (number) _____ **Lot:** (number) _____

Name of Property Owner: (first name, last name or Corporation) _____

Name of person making application: (first name, last name) _____

Company Name: (name or "n/a") _____

Mailing Address: (number, street or P.O. box, town, state, zip code) _____

Telephone Number: (area code, number, extension) _____

Present or Most recent use property (Check One):

_____ **Vacant Lot** _____ **Single Family Dwelling** _____ **Residential Condominium Unit or Apt.**

_____ **Commercial (please describe)** _____

_____ **Other (please describe)** _____

Proposed Use: _____ **Single-Family Dwelling** _____ **Residential Condo or Apt.**

_____ **Commercial (please describe)** _____

_____ **Other (please describe)** _____

Proposed construction (include height and other dimensions of proposed structure or addition; if proposed fence, include type as well as height): _____

(height, width, length, number of stories) _____

_____

Please submit with application two (2) accurate plot plans either drawn by a surveyor or engineer, or hand-drawn on an 8 1/2" by 11" sheet of paper by the owner of applicant, neatly and to scale. The plot plan must show all existing and proposed structures, all setbacks from property lines, all dimensions of the lot and structures, and all streets and waterways.

If approval was granted by the Zoning Board of Adjustment or Planning Board, include a copy of the Resolution.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other municipal approvals and ordinances, and all county, state and federal regulations.

This application will not be accepted unless it is COMPLETELY filled out.

Signature of Applicant (first name, last name) _____ **Date** (month, date, year) _____

Received by Zoning Officer: **Date** _____ **Complete** _____ **Incomplete** _____

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 671 LOT 8 SITE ADDRESS 74 Brick Plaza
TYPE OF SITE Residential / (Commercial) TYPE OF BUSINESS S.[illegible]
717-750-1229
APPLICANT Federal Realty Investment PHONE NUMBER 1-800-[illegible]-4180
APPLICANT ADDRESS 1222 C Park Ave CITY & STATE [illegible] Pa
PERMIT # ______ NAME OF BUSINESS Jumbo China Buffet

INCLUSIONARY DEVELOPMENT

◊ Affordable — Fee Required ______ Date ______
Down Payment ______ Date ______
Balance ______ Date ______
Paid In Full ______ Date ______

◊ Market Rate — No Fee Required

MANDATORY DEVELOPER FEES

◊ Residential is .005 %

X Commercial is .01 %

Estimated Assessment $ 1000.00 Date 5-6-98

Estimated Required Fee $ 10.00

Required Deposit on Estimate $ 5.00 Date 5-11-98

Check # 1001 Receipt # 1414

* Actual Assessment $ 1000.00 Date 7-6-98

Actual Required Fee $ 10.00

Minus Deposit of Estimate $ 5.00

Balance Due $ 5.00 Date 7-6-98

Check # 1020 Receipt # 1479

Amount Paid In Full $ 10.00

Fees Imposed To Date ______
Fees Reached $15,000 ______ Date

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.

______

Carol A. Wolfe
Affordable Housing Administrator

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

Ocean County Health Department

RECEIVED
APR 23 1998
DT. OF INSPECTION

671
BLK ~~669~~ LOT ~~99~~ 8

OCEAN COUNTY HEALTH DEPARTMENT

No: _____

SANITARY INSPECTION REPORT

ESTABLISHMENT INFORMATION

PHONE # TEMPORARY
717-350-1229

ESTABLISHMENT TRADING NAME
CHINA BUFFET

NUMBER AND STREET
30 CHAMBERSBRIDGE Road

CITY OR MUNICIPALITY
BRICK

ZIP CODE
08723

ESTABLISHMENT LICENSE NO.
TO BE OBTAINED

COMMUN. CODE
1506

RISK
II

ESTABLISHMENT CODE
22

GOODS
☐ DESTROYED
☐ EMBARGOED

EVALUATION
☒ SATISFACTORY
☐ CONDITIONALLY SATISFACTORY
☐ UNSATISFACTORY

WATER SUPPLY
☒ Public - Community
☐ Individual (Public - Non-Community)

OWNER INFORMATION
(Complete this section only if different from establishment information)

NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT
PATRICK DING

NUMBER AND STREET
24 EAGLE GLEN

CITY OR MUNICIPALITY
EAST STROUDSBURG

STATE
PA

ZIP CODE
18301

COMMUN. CODE
—

TIME (2400 HOURS)

DATE	BEGIN	END
3-19-98	1035	1100

COMPLAINT NO. _____
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.

NAME OF INSPECTING OFFICIAL (Print)
Steve Klarecki

SIGNATURE OF INSPECTING OFFICIAL
Steve Klarecki

PERMANENT REG. NO.
B-1463

H.D.64

OCEAN COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DETAILED DATA SHEET

CONTINUATION SHEET

Establishment Trading Name	Establishment License No.	Date
CHINA BUFFET	TO BE OBTAINED	3-19-98
Signature of Inspecting Official	**Municipality**	**Time - (2400 Hours)**
Steve Klamut	BRICK	Begin 1035

REG. NO.	REMARKS (Please specify area)
	THE ATTACHED PLANS HAVE BEEN FOUND TO IN SATISFACTORY COMPLIANCE WITH CHAPTER XII, THE STATE SANITARY CODE.
	NOTE THIS DEPARTMENT IS TO BE NOTIFIED AT LEAST 48 HOURS PRIOR TO INTENDED OPENING FOR A PRE-OPERATIONAL INSPECTION.

(Attach additional sheets if necessary)

H.D. 67

TOWNSHIP OF BRICK

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

Department of Administration & Finance
Office of Land Use Management
Michael P. Fowler, AICP/PP
Municipal Planner
(908) 262-1042
Fax: (908) 920-4850

FAX CORRESPONDENCE

(908) 262-8954

DATE: 4-30-98

To Fax Number: 908-806-4468 Pages to Follow: 01

Attention: Patrick Ding

From: Allison - Brick Bldg Dept.

Message: The Bldg permit for #30 Grand Jumbo Buffet Inc. is ready for pick-up.

TOWNSHIP OF BRICK

☐ NOTICE OF VIOLATION AND ORDER TO TERMINATE

☐ NOTICE AND ORDER TO PAY PENALTY

PERMIT NO. 98-1072
DATE ISSUED 4-30-98
Block 671 Lot 8
Subdivision
Notice No.

IDENTIFICATION

OWNER:
Name Federal Realty Investment
Address 122 C Park Ave
Town/State/Zip Willow Grove Pa. 19090
Work Site Address 74 Brick Plaza

AGENT:
Name Patrick Dury
Address 526 N Courtland St.
Town/State/Zip E. Stroudsburg, Pa. 18301
717 350 1229

ACTION

DATE OF NOTICE: 5-14-98 COMPLIANCE DUE DATE: 5-27-98 DATE OF INSPECTION: 5-12-98

TAKE NOTICE that you have been found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder (N.J.A.C. 5:23-2.30 and 2.31) in that:

You are hereby ordered to terminate the said violations on or before _____. The owner and agent/contractor bear joint responsibility for bringing about compliance. No Certificate of Occupancy or Approval will be issued unless the said violations are corrected.

☐ Failure to comply with this Order will subject you to a penalty of $ _____ per _____.

☑ You are hereby ordered to pay a penalty in the amount of $ 500 for each violation for a total penalty of $ 500. **. Each Day that any of the said violations remain outstanding after 5-27-98 shall result in an additional penalty of $ 100 per day.

If you wish to contest the validity of the above action, in accord with N.J.A.C. 5:23-2.35 et. seq., you may request a hearing before the Construction Board of Appeals of the County of Ocean, within 20 business days of receipt of these Orders. The Application to the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your address and name, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of your reliance on the Regulations and, if neccessary, a brief statement setting forth your position and the nature of the relief sought by you. You may also append any documents that you consider useful.

The fee for an appeal is $ _____ to be forwarded with your application to the Board of Appeals office at _____.

If you have questions concerning this matter, please call: _____

NOTICE OF VIOLATION AND ORDER TO TERMINATE: _____ DATE: _____
SCO

NOTICE AND ORDER OF PENALTY: _____ DATE: _____
CO

U.C.C. Form F-210 (8/83)

266-8754
ATT: Bernie

Thomas Arnone
Plumbing & Heating

128 Neptune Avenue, Neptune City, New Jersey 07753
908-774-8323

Lic. #2128

Date 5-14-98

M Plumbing inspector office
Brick Town
To - Tuntoshiva Buffet

This Letter is To inform the Plumbing inspector that I Thomas Arnone and Anyone connected with me or my company have nothing to do with Any Plumbing being done At the Brick Plaza Tuntoshiva Buffet - I have done NO Plumbing At All on this site

Thomas Arnone

TOTAL P.01

FIRE SUPPRESSION CERTIFICATE OF INSPECTION

TESTING CONTRACTOR (Name & Address) Joseph Stong, Inc., 742 West Front Street, Chester, PA 19013 LICENSE # LO2654

LOCATION OF TEST (Address) 74 Brick Plaza site # 30 Brick, N.J. 08723

OWNER/TENANT (Name & Address) TENANT Jumbo China Buffet owner Federal Realty Investment Trust

CERTIFICATE HOLDER Joseph Stong, Jr. # 1-90-160 Date: 6-9-98

A. OWNER'S SECTION *(To be answered by owner or occupant)* DATE OF LAST CERTIFICATION: _____

	Y	NA	N		Y	NA	N
1. Is the building occupied?	X			5. Have there been any modifications to the system since the last certification? (If yes, explain)	X		
2. Has the building occupancy/hazard changed since the last inspectiopn? (If yes, explain)	X			6. Was there any action of device or alarm since last certification? (If yes, explain)			X
3. Are all systems in service?	X			OWNER/OCCUPANT SIGNATURE: [signature] 6/8/98			
4. Are test results kept on file?	X						

CALL 922-6000 BEFORE TESTS - OUT OF SERVICE OPER. # _____ IN-SERVICE OPER. # _____

B. INSPECTOR'S SECTION *(All responses refer to current inspection)*: SPRINKLER SYSTEMS

	Y	NA	N		Y	NA	N
1. Are sprinklers in good condition and free of obstruction?	X			19. Are valves protected from damage, accessible, operable and operating freely?	X		
2. Are spare sprinklers and wrenches available?	X			20. Are valves in proper open or closed position, and properly supervised?	X		
3. In spray coating areas, are sprinklers free of accumulation?		X		21. Are dry pipe valve rooms properly heated?		X	
4. Are hydraulic nameplates in place and securely attached?	X			22. Are dry pipe system low point drains properly drained?		X	
5. Are alarm devices provided and in good condition?	X			23. Is air pressure on dry pipe systems adequate?		X	
6. Do any sprinklers need to be tested or replaced? (If yes, explain)			X	24. Were dry pipe valve tests conducted with quick-operating devices (QOD)?		X	
7. Is all sprinkler piping in cood condition? Are fittings in good condition?	X			25. Were tests of QOD's satisfactory?		X	
8. Are areas protected by wet systems properly heated?	X			26. Were dry valves trip tested, results recorded and left at site?		X	
9. Are gauges on all systems in good condition and indicating proper pressure?	X			27. Were low air pressure alarms on dry systems tested satisfactorily?		X	
10. Were main drains tested on all systems, results recorded and left at site?	X			28. Were air maintenance devices on dry systems tested satisfactorily?		X	
11. Were there any changes in drain tests from last year? (If yes, explain)		X		29. Were antifreeze system specific gravities tested, proper, and recorded at the site?		X	
12. Were all waterflow alarm devices tested satisfactorily?	X			30. Were preaction system supervisory air pressures correct?		X	
13. Are hangers in good condition and securely attached to structure and piping?	X			31. Were deluge/preaction valves trip tested by detector satisfactorily and results left at site?		X	
14. Were downstream pressures on pressure regulating valves satisfactory?		X		32. Were strainers checked and cleaned?		X	
15. Were flow tests conducted on pressure regulating valves?		X		33. Were check valves given their 5 year maintenance?		X	
16. Were PRV flow tests satisfactory?		X		34. Were backflow preventers operational?		X	
17. Were results of flow tests on pressure regulating valves recorded and left at site?		X		35. Were backflow preventers tested per Plumbing Code?		X	
18. Do pressure relief valves have proper rating?		X					

Y - Yes, N - No, NA - Not Applicable *(EXPLAIN ALL NO ANSWERS - Except as noted)*

TEST PIPE		PRESSURE			TEST PIPE		PRESSURE		
LOCATED	SIZE	BEFORE	FLOW	AFTER	LOCATED	SIZE	BEFORE	FLOW	AFTER
MAIN	2"	75	60	80					
DRAIN									

WATER PRESSURE	CITY 75 PSI	TANK PSI	FIRE PUMP PSI

C. INSPECTOR'S SECTION (*All responses refer to current inspection*): FIRE DEPT. CONNECTIONS

	Y	NA	N		Y	NA	N
1. Were fire dept. connections visible, accessible & in good condition?	X			1. Were automatic drain valves operating freely?		X	
2. Were caps & plugs in place?	X			2. Were systems back-flushed?		X	

D. INSPECTOR'S SECTION (*All responses refer to current inspection*): STANDPIPES - CLASS - I - II - III N/A

	Y	NA	N		Y	NA	N
1. Were fittings and piping in good condition?		X		9. Are hose threads correct to national standards?		X	
2. Were supports and hangers in good condition and well secured to piping and structure?		X		10. Are hose cabinet doors, glazing and latches in good condition?		X	
3. Are hose valve outlets free of damage and obstructions?		X		11. Are hose cabinets identified, free of obstructions and accessible?		X	
4. Are valve handles in place?		X		12. Are hoses in good condition, connected and properly racked?		X	
5. Are outlet caps and gaskets in place?		X		13. Were hoses removed, inspected and re-racked?		X	
6. Are restricting devices in proper locations?		X		14. Were hose test dates current?		X	
7. Are pressure regulating valves properly set?		X		15. Are hose nozzles and gaskets in place?		X	
8. Was flow test conducted and results recorded? (5 year test only)		X		16. Are hose nozzles operable and free of obstructions?		X	

E. INSPECTOR'S SECTION (*All responses refer to current inspection*): FIRE PUMPS N/A

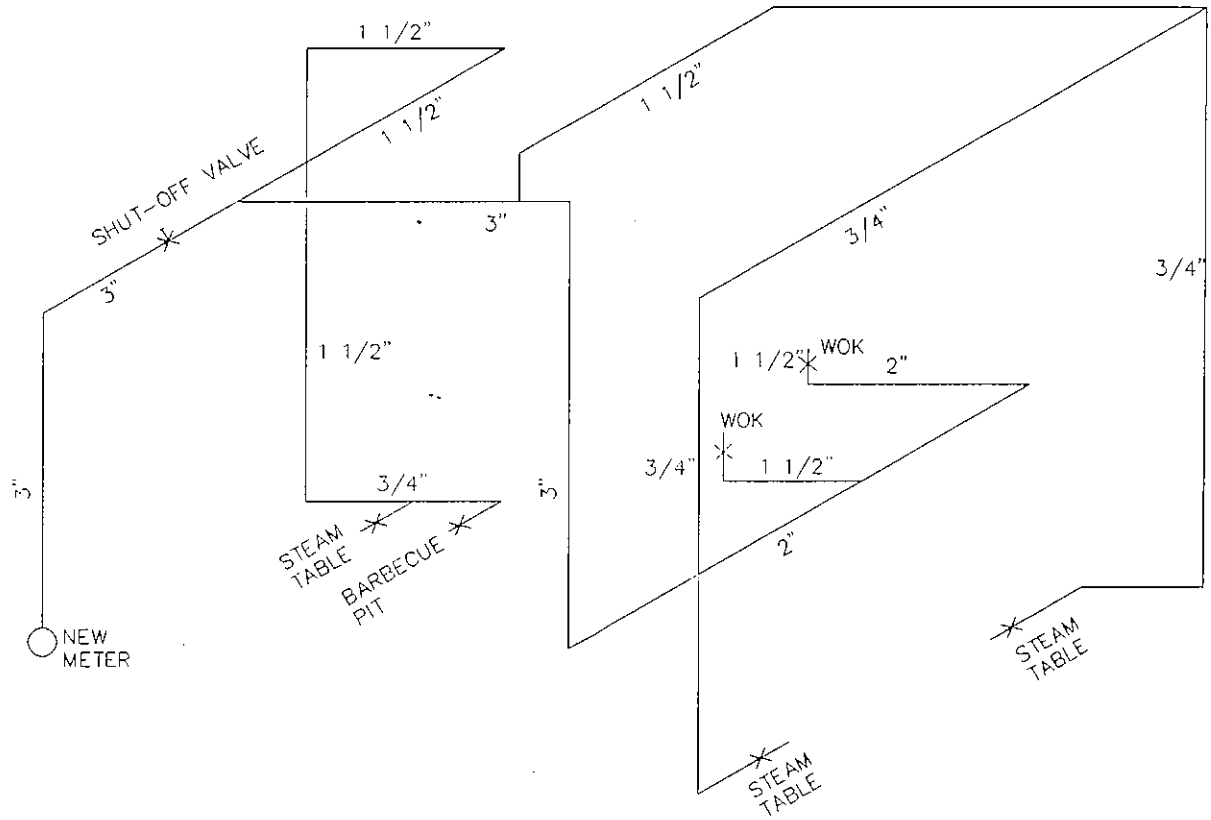
	Y	NA	N		Y	NA	N
1. Were fire pumps flow tested and results recorded and left at site?		X		7. Were pump alarms functioning properly?		X	
2. Did fire pumps operate per specifications at churn, 100% flow and 150% flow?		X		8. Were pump controllers functioning properly and left in automatic mode?		X	
3. Were all starting means tested satisfactorily?		X		9. Were engine coolant systems operating satisfactorily?		X	
4. Were all relief valves functioning properly?		X		10. Were batteries/cables in good condition?		X	
5. Were packing glands adjusted?		X		11. Were fuel tanks full?		X	
6. Were motor and pump bearings lubricated?		X		12. Was pump room ventilation operating properly?		X	
				13. Were exhaust systems in good condition?		X	

Wet Systems: No. - 1	**Dry Systems: No. -** N/A
Make & Model -	**Make & Model -**
4" STAR (MODEL B) w/ Flow switch	

EXPLANATIONS (*Add additional sheets as necessary*):

Limited Certification for Jumbo China Buffett

INSPECTOR'S SIGNATURE J. Bushey **DATE** 6-9-98



NEW 3" GAS MAIN

WCL ASSOCIATES, INC. 153 CENTRE STREET, RM. 108, NYC 10013 TELEPHONE: (212) 966-1132		
PROJECT: BRICK PLAZA SHOPPING CENTER, SPACE 30 BRICK TOWNSHIP, NEW JERSEY		
GAS RISER DIAGRAM		
SCALE: NONE	DRAWN BY	A-1
6-22-98	BRICK	98005 NJ

UNITY ELECTRICAL CONTRACTING CORP.
Licensed Electrical Contractors N.J.
54 Canal Street
NEW YORK, NEW YORK 10002
(212) 925-3631

LIC.#8136

June 16, 1998
Re: Grand Jumbo Buffet
74 Brick Blvd
Brick, NJ 08723

Ocean County
Construction Inspection Department
Att: Mr. Paul Grosko
2 Mott Place Complex
239 Washington Street, P.O.Box 2191
Toms River, NJ 08754-2191

Dear Mr. Grosko:

New electrical wiring for Grand Jumbo Buffet as stated referred above as followings:

2 power outlets in cashier area
2 new exhaust fans
8 recessed high head lighting fixtures
3 lighted picture boxes
2 new signs(use existing power wires)
300' new neon lights in ceilings

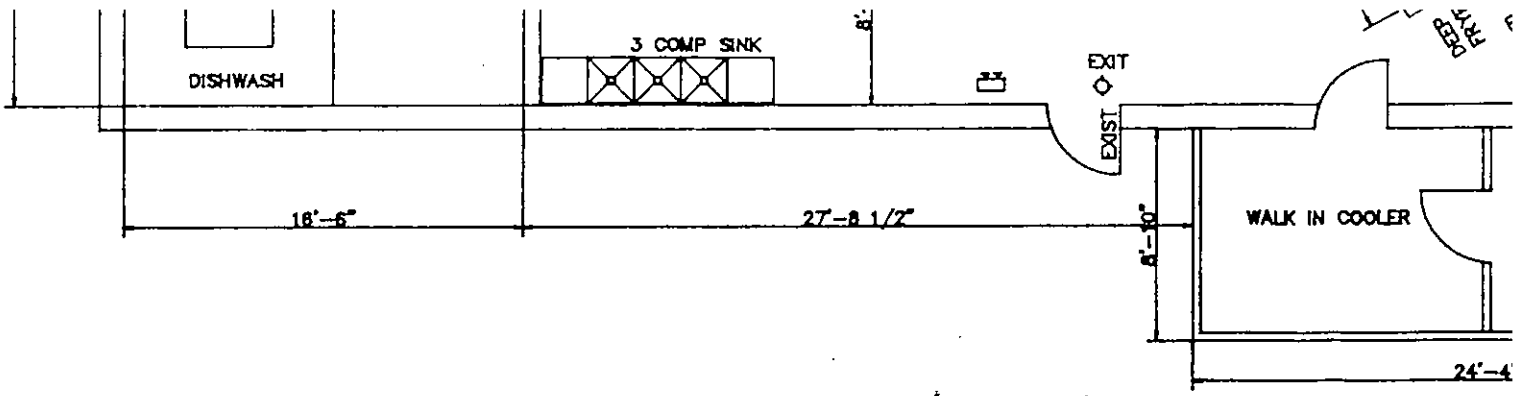
As on the drawing, all new kitchen equipment (see attachment) are powered by gas.

If there is any question, please contact us. Thank you very much!!

Sincerely,

Joe Yuk Lee

Joe Yuk Lee
Electrician



All of these new kitchen equipment are powered by gas.

FIRST FLOOR

NEW KITCHEN EQUIPMENT LIST

ALL NEW KITCHEN EQUIPMENT ARE NSF APPROVED.

DESCRIPTION	MANUFACTURER	MODEL NO.
WOKS	GRAND	WR090
STEAM TABLE	GARLAND	ST-5
DEEP FRYER	PITCO	#14
SMOKE HOUSE	WIN	WSH-100
GREASE FILTER	MARATHON	25X20X2
BAIN MARIE	GZG	R60-BM
RICE COOKER	PALOMA	PR-8-CK
SALAMANDER	GARLAND	IR36-280

FINISH SCHEDULE

LOCATION	FLOOR	BASE	WALLS	CEILING
DINING AREA	CARPET	VINYL	WALL PAPER	2'X2' CEILING TILE
KITCHEN	QUARRY TILE	QUARRY	S.S./ALUM.	WASHABLE TILE
TOILET	QUARRY TILE	QUARRY	QUARRY TILE	2'X4' CEILING TILE

TOWNSHIP OF BRICK

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

Joseph C. Scarpelli, Mayor

Township Council:
Michael A. Thulen, President
Stephen C. Acropolis
Martin J. Anton
Victor Cantillo
Helen Fayad
Lee Hartman
Mary Lou Powner

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 4-17-08

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 671 LOT 8 SITE ADDRESS Brick Plaza

TYPE OF SITE Commercial (Residential/Commercial) TYPE OF BUSINESS Tenant Fit Up

APPLICANT Federal Realty Inv. CITY & STATE Willow Grove Pa

☑ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

$ _____

_____
Frederick R. Millman, CTA, Tax Assessor

_____
Date

☐ Please review the attached application for a final assessed value for the construction at the above referenced site:

$ _____

_____
Frederick R. Millman, CTA, Tax Assessor

_____
Date

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048
FAX (732) 262-8954 or (732) 920-1456
http://www.twp.brick.nj.us

April 21, 1998

Federal Realty Investment
122 C Park Avenue
Willow Grove, PA 19090

RE: Mandatory Development Fee
Block 671, Lot 8; Grand Jumbo Buffet, Brick Plaza

To Whom It May Concern:

The Township of Brick has enacted Ordinance 354-2C-93 in conjunction with our Fair Share Plan, which was certified by the New Jersey Council on Affordable Housing on February 3, 1993.

This Ordinance requires that commercial development applicants pay a fee in the amountof one percent of the assessed value per project. The municipal Tax Assessor has estimated the value of the work to be completed under the construction permit application received on April 13, 1998, for the above block and lot at $24,000.00, resulting in an estimated fee of $240.00.

Therefore, it is required that one half of the estimated fee ($120.00) be submitted in the form of a check payable to the Township of Brick for deposit into the Affordable Housing Trust Fund. The balance is to be collected prior to issuance of the Certificate of Occupancy.

May I suggest that you contact this office approximately two weeks prior to your request for a C.O. to allow adequate time for the Assessor to conduct a final evaluation of the site.

If you have any questions, please contact me.

Sincerely,

Carol A Wolfe (CA)

Carol A. Wolfe
Affordable Housing Administrator

CAW/da

TOWNSHIP OF BRICK

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

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 4-17-98

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 671 LOT 8 SITE ADDRESS Brick Plaza

TYPE OF SITE Commercial (Residential/Commercial) TYPE OF BUSINESS Tenant F.T.U.P

APPLICANT Federal Realty Inv. CITY & STATE Willow Grove, Pa.

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

$ 24,000

_____
Frederick R. Millman, CTA, Tax Assessor

4/21/98
Date

☒ Please review the attached application for a final assessed value for the construction at the above referenced site:

$ 24,000

_____
Frederick R. Millman, CTA, Tax Assessor

7/6/98
Date

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

TOWNSHIP OF BRICK

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

Office of Affordable Housing
Carol A. Wolfe
Affordable Housing Administrator
(732) 262-1048

CASE # _____

APPROVAL DATE: _____
(Planning Board/BOA)

DATE: 5-6-98

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 671 LOT 8 SITE ADDRESS 74 Brick Plaza

TYPE OF SITE Commercial (Residential/Commercial) TYPE OF BUSINESS Jumbo Sign - China Buffet

APPLICANT Federal Realty In. CITY & STATE Willow Grove, Pa

☒ Please review the attached application for an **estimated** assessed value for the proposed construction.

The **estimated** assessed value for the construction at the above referenced site is:

$ 1,000

Frederick R. Millman, CTA, Tax Assessor

5/6/98
Date

☒ Please review the attached application for a final assessed value for the construction at the above referenced site:

$ 1,000

Frederick R. Millman, CTA, Tax Assessor

7/6/98
Date

Affordable Housing-White Affordable Housing-Blue Engineering-Green Tax Assessor-Yellow Engineering-Pink Tax Assessor-Gold

BLOCK 671 LOT 8 SITE LOCATION #30 GRAND JUMBO BUFFET. 14 BRICK PLAZA, BRICK

BUILDING INSPECTION

Contractor HENG XING CONSTRUTION INC
Address 8 READING RD. SUITE 104 Phone (908) 806-6668
Town FLEMINGTON State NJ Zip 08822
LIC # _____ FEDERAL EMP. NO.(or SSN#) [redacted]

ESTIMATED COST OF BUILDING WORK

NEW BUILDING (1) $ _____ ALTERATION (2) $ 23,800.00
ADDITION (3) $ _____ TOTAL (1+2+3) $ 23,800.00

BUILDING CHARACTERISTICS

ADDITION or SINGLE FAMILY DWELLING

USE GROUP	PRESENT	PROPOSED
CONSTRUCTION CLASS	PRESENT	PROPOSED
NO. OF STORIES 1	HT. OF STRUCTURE 18	FT.
AREA: LARGEST FLOOR	250	SQ. FT.
TOTAL BLDG. AREA: ALL FLOORS	9,250	SQ. FT.
VOLUME OF STRUCTURE		CU. FT.
TOTAL LAND AREA DISTURBED		SQ. FT.

TYPE OF WORK

TYPE OF WORK		COST	MISC.		COST
NEW BLDG.			FENCE Ht.		
ADDITION			SIGN Sq. Ft.		
ALTERATION	X	$23,800.00	POOL		
ROOFING			ASBESTOS ABATEMENT		
SIDING			DCA		
DEMOLITION			TOTAL		

DESCRIPTION OF WORK

COMMENTS TENANT FIT-UP.

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.
SEAL &
SIGNATURE XIU XIANG DONG

PLUMBING INSPECTION

Contractor _____
Address _____ Phone ( ) _____
Town _____ State _____ Zip _____
LIC # _____ FEDERAL EMP. NO. (or SSN#) _____

ESTIMATED COST OF PLUMBING WORK: $ _____

Sewer Size _____ Water Size _____

TECHNICAL SITE DATA (List all Fixtures)

NO.	FIXTURE/EQUIPMENT	NO.	FIXTURE/EQUIPMENT
	Water Closet		Steam Boiler
	Urinal / Bidet		Hot Water Boiler
	Bath Tub		Sewer Pump
	Lavatory		Interceptor/Separator
	Shower		Backflow Preventer
	Floor Drain		Grease Trap
	Sink		Water Cooled A/C
	Dishwasher		or Refrigeration Unit
	Drinking Fountain		Sewer Connection
	Washing Machine		Water Service Connection
	Hose Bibb		Active Solar System
	Water Heater		Other
	Fuel Oil Piping		Other
	Gas Piping		Other

See other application

DESCRIPTION OF WORK

COMMENTS _____

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.
SEAL &
SIGNATURE (Contractor's Seal) _____

FIRE INSPECTION

Contractor Thomas Urrone
Address 128 Neptune Ave Phone ( ) 774-8[illegible]
Town Neptune City State NJ 07753
LIC # 142-32-3394 FEDERAL EMP. NO. (or SSN#) _____

ESTIMATED COST OF FIRE PROT. WORK: $ _____
Heating Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar
Heating System: ☐ New ☐ Existing
Location of Furnace / Boiler _____

TECHNICAL SITE DATA (Description of Work)

WATER SUPPLY SOURCE
METHOD OF VALVE SUPERVISION
LOCAL ALARM SUPERVISION
CENTRAL SUPERVISION
PROPRIETARY SUPERVISION
Flammable Liquid Storage Tanks ☐ Capacity
Combustible Liquid Storage Tanks ☐ Capacity
L.P.G. Storage Tanks ☐ Capacity
L.N.G. Storage Tanks ☐ Capacity

NO.	ITEM	NO.	ITEM
	Wet Sprinkler Heads 1/300	X	92.00 Pre-Engineered
	Dry Sprinkler Heads		CO_2 Suppressi
	TOTAL		Halon Suppres
			Foam Suppress
	Smoke Detectors		Dry Chemical
	Heat Detectors		Wet Chemical
	TOTAL	21	Gas or Oil Fir
			Other
	Stand Pipes 35.		
1	Kitchen Hood Exhaust System	B	

DESCRIPTION OF WORK

COMMENTS 4/29/98 JE.

CERTIFICATION IN LIEU OF OATH

I HEREBY CERTIFY THAT I AM THE (AGENT OF) OWNER OF REC[illegible]
AUTHORIZED TO MAKE THIS APPLICATION AND PERFORM THE
ON THIS APPLICATION.
SEAL &
SIGNATURE (Contractor's Seal) _____

BLOCK 671 LOT 8 SITE LOCATION 74 BRICK PLAZA, BRICK, NJ. 08723. #80 JUMBO CHINA BUFFET.

OWNER IN FEE: FEDERAL REALTY INVESTMENT TRUST ADDRESS: 122-C WILLOW GROVE PIA, 19090.

98-1072A

BUILDING INSPECTION

Contractor _____

Address _____ Phone (____) _____

Town _____ State _____ Zip _____

LIC # _____ FEDERAL EMP. NO.(or SSN#) _____

ESTIMATED COST OF BUILDING WORK

NEW BUILDING (1) $_____ ALTERATION (2) $_____

ADDITION (3) $_____ TOTAL (1+2+3) $_____

BUILDING CHARACTERISTICS

ADDITION or SINGLE FAMILY DWELLING

USE GROUP	PRESENT	PROPOSED
CONSTRUCTION CLASS	PRESENT	PROPOSED
NO. OF STORIES	HT. OF STRUCTURE	FT.
AREA: LARGEST FLOOR		SQ. FT.
TOTAL BLDG. AREA: ALL FLOORS		SQ. FT.
VOLUME OF STRUCTURE		CU. FT.
TOTAL LAND AREA DISTURBED		SQ. FT.

TYPE OF WORK

TYPE OF WORK		COST	MISC.		COST
NEW BLDG.			FENCE Ht.		
ADDITION			SIGN Sq. Ft.		
ALTERATION			POOL		
ROOFING			ASBESTOS ABATEMENT		
SIDING			DCA		
DEMOLITION			TOTAL		

DESCRIPTION OF WORK

COMMENTS _____

Plan Review:

Date: _____ Approved By: _____

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.

SEAL &

SIGNATURE _____

PLUMBING INSPECTION

Contractor _____

Address _____ Phone (____) _____

Town _____ State _____ Zip _____

LIC # _____ FEDERAL EMP. NO. (or SSN#) _____

ESTIMATED COST OF PLUMBING WORK: $_____

Sewer Size _____ Water Size _____

TECHNICAL SITE DATA (List all Fixtures)

NO.	FIXTURE/EQUIPMENT	NO.	FIXTURE/EQUIPMENT
	Water Closet		Steam Boiler
	Urinal / Bidet		Hot Water Boiler
	Bath Tub		Sewer Pump
	Lavatory		Interceptor/Separator
	Shower		Backflow Preventer
	Floor Drain		Grease Trap
	Sink		Water Cooled A/C or Refrigeration Unit
	Dishwasher		
	Drinking Fountain		Sewer Connection
	Washing Machine		Water Service Connection
	Hose Bibb		Active Solar System
	Water Heater		Other
	Fuel Oil Piping		Other
	Gas Piping		Other

DESCRIPTION OF WORK

COMMENTS _____

Plan Review:

Date: _____ Approved by: _____

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.

SEAL &

SIGNATURE (Contractor's Seal) _____

FIRE INSPECTION

Contractor HENG XING CONSTRUCTIONS.

Address 3 READING RD #104 Phone (908) 806-4468

Town FLEMINGTON. State NJ, 08822 Zip

LIC # 160-72-5761 FEDERAL EMP. NO. (or SSN#) _____

ESTIMATED COST OF FIRE PROT. WORK: $ 5000

Heating Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar

Heating System: ☐ New ☐ Existing

Location of Furnace / Boiler _____

TECHNICAL SITE DATA (Description of Work)

WATER SUPPLY SOURCE

METHOD OF VALVE SUPERVISION

LOCAL ALARM SUPERVISION

CENTRAL SUPERVISION

PROPRIETARY SUPERVISION

Flammable Liquid Storage Tanks	☐ Capacity _____		Fue
Combustible Liquid Storage Tanks	☐ Capacity _____		Fue
L.P.G. Storage Tanks	☐ Capacity _____		Fue
L.N.G. Storage Tanks	☐ Capacity _____		Fue

NO.	ITEM	NO.	ITEM
	Wet Sprinkler Heads		Pre-Engineered Sys
	Dry Sprinkler Heads		CO_2 Suppression
	TOTAL		Halon Suppressior
			Foam Suppression
	Smoke Detectors		Dry Chemical
	Heat Detectors		Wet Chemical
	TOTAL		Gas or Oil Fired A
			Other
	Stand Pipes		
2	Kitchen Hood Exhaust System		

DESCRIPTION OF WORK

COMMENTS 5/6/98. two new Hoods one Fighty

Plan Review:

Date: 5/6/98 Approved by: _____

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 WOI ON THIS APPLICATION.

SEAL &

SIGNATURE (Contractor's Seal) _____

✓ BLOCK 671 LOT 8 SITE LOCATION 74 BRICK PLAZA, BRICK NJ 08723 #30 JUMBO CHINA BUFFET.

OWNER IN FEE: FEDERAL REALTY INVESTMENT TRUST ADDRESS: 122-C WILLOW GROVE. PA, 19090.

BUILDING INSPECTION

Contractor _____

Address _____ Phone (____) _____

Town _____ State _____ Zip _____

LIC # _____ FEDERAL EMP. NO.(or SSN#) _____

ESTIMATED COST OF BUILDING WORK

NEW BUILDING (1) $_____ ALTERATION (2) $_____

ADDITION (3) $_____ TOTAL (1+2+3) $_____

BUILDING CHARACTERISTICS

ADDITION or SINGLE FAMILY DWELLING

USE GROUP	PRESENT	PROPOSED
CONSTRUCTION CLASS	PRESENT	PROPOSED
NO. OF STORIES	HT. OF STRUCTURE	FT.
AREA: LARGEST FLOOR		SQ. FT.
TOTAL BLDG. AREA: ALL FLOORS		SQ. FT.
VOLUME OF STRUCTURE		CU. FT.
TOTAL LAND AREA DISTURBED		SQ. FT.

TYPE OF WORK

TYPE OF WORK		COST	MISC.		COST
NEW BLDG.			FENCE Ht.		
ADDITION			SIGN Sq. Ft.		
ALTERATION			POOL		
ROOFING			ASBESTOS ABATEMENT		
SIDING			DCA		
DEMOLITION			TOTAL		

DESCRIPTION OF WORK

COMMENTS _____

Plan Review:
Date: _____ Approved By: _____

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.

SEAL &
SIGNATURE _____

PLUMBING INSPECTION

Contractor _____

Address _____ Phone (____) _____

Town _____ State _____ Zip _____

LIC # _____ FEDERAL EMP. NO. (or SSN#) _____

ESTIMATED COST OF PLUMBING WORK: $_____

Sewer Size _____ Water Size _____

TECHNICAL SITE DATA (List all Fixtures)

NO.	FIXTURE/EQUIPMENT		NO.	FIXTURE/EQUIPMENT	
	Water Closet			Steam Boiler	
	Urinal / Bidet			Hot Water Boiler	
	Bath Tub			Sewer Pump	
	Lavatory			Interceptor/Separator	
	Shower			Backflow Preventer	
	Floor Drain			Grease Trap	
	Sink			Water Cooled A/C or Refrigeration Unit	
	Dishwasher			Sewer Connection	
	Drinking Fountain			Water Service Connection	
	Washing Machine			Active Solar System	
	Hose Bibb			Other	
	Water Heater			Other	
	Fuel Oil Piping			Other	
	Gas Piping				

DESCRIPTION OF WORK

COMMENTS _____

Plan Review:
Date: _____ Approved by: _____

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.

SEAL &
SIGNATURE (Contractor's Seal) _____

FIRE INSPECTION

Contractor Kamp Fire Equipment

✓ Address 17 Bboonfield Ave Phone (973) 586-680

Town Danville State NJ Zip

LIC # 22423435 FEDERAL EMP. NO. (or SSN#) _____

ESTIMATED COST OF FIRE PROT. WORK: $ 2000 aa

Heating Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar

Heating System: ☐ New ☐ Existing

Location of Furnace / Boiler _____

TECHNICAL SITE DATA (Description of Work)

WATER SUPPLY SOURCE

METHOD OF VALVE SUPERVISION

LOCAL ALARM SUPERVISION

CENTRAL SUPERVISION

PROPRIETARY SUPERVISION

Flammable Liquid Storage Tanks	☐ Capacity _____	Fue
Combustible Liquid Storage Tanks	☐ Capacity _____	Fue
L.P.G. Storage Tanks	☐ Capacity _____	Fue
L.N.G. Storage Tanks	☐ Capacity _____	Fue

NO.	ITEM	NO.	ITEM
	Wet Sprinkler Heads		Pre-Engineered Sys
	Dry Sprinkler Heads		CO_2 Suppression
	TOTAL		Halon Suppressior
			Foam Suppression
	Smoke Detectors		Dry Chemical
	Heat Detectors		Wet Chemical
	TOTAL		Gas or Oil Fired A
			Other _____
	Stand Pipes		
	Kitchen Hood Exhaust System		

UL 300

DESCRIPTION OF WORK

COMMENTS 5/5/98 Suppression Syst. for appl. only.

Plan Review:
Date: 5/6/98 Approved by: _____

CERTIFICATION IN LIEU OF OATH

I HEREBY CERTIFY THAT I AM THE (AGENT OF) OWNER OF RECORD AUTHORIZED TO MAKE THIS APPLICATION AND PERFORM THE WOI ON THIS APPLICATION.

SEAL &
SIGNATURE (Contractor's Seal) Ernest Kalb

OWNER IN FEE: FEDERAL REALTY INVESTMENT TRUST. #30 GRAND Jumbo Buffet.

BLOCK 671 LOT 8 SITE LOCATION 74 BRICK PLAZA, BRICK, NJ. 08723

Update 98-1072FC

BUILDING INSPECTION

Contractor HENG XING CONSTRUCTION INC.

Address 8 Reading RD #104. Phone (908) 806-4468

Town Flemington State NJ Zip 08822

LIC # _____ FEDERAL EMP. NO.(or SSN [redacted]

ESTIMATED COST OF BUILDING WORK

NEW BUILDING (1) $_____ ALTERATION (2) $ 1500.

ADDITION (3) $_____ TOTAL (1+2+3) $ 1500.

BUILDING CHARACTERISTICS

ADDITION or SINGLE FAMILY DWELLING

	PRESENT	PROPOSED
USE GROUP		
CONSTRUCTION CLASS	PRESENT	PROPOSED
NO. OF STORIES	HT. OF STRUCTURE	FT.
AREA: LARGEST FLOOR		SQ. FT.
TOTAL BLDG. AREA: ALL FLOORS		SQ. FT.
VOLUME OF STRUCTURE		CU. FT.
TOTAL LAND AREA DISTURBED		SQ. FT.

TYPE OF WORK

TYPE OF WORK	COST	MISC.	COST
NEW BLDG.		FENCE Ht.	
ADDITION		SIGN Sq. Ft.	
ALTERATION		POOL	
ROOFING		ASBESTOS ABATEMENT	
SIDING		DCA	
DEMOLITION		TOTAL	

DESCRIPTION OF WORK

COMMENTS See highlighted Markings of changes

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.

SEAL & SIGNATURE Yun Xing Dong

PLUMBING INSPECTION

Contractor Michael LoCascio Jr.

Address 87 Woodview Dr Phone (732) 679-4034

Town Old Bridge State N.J. Zip 08857

LIC # 6566 FEDERAL EMP. NO [redacted]

ESTIMATED COST OF PLUMBING WORK:

Sewer Size _____ Water Size _____

TECHNICAL SITE DATA (List all Fixtures)

NO.	FIXTURE/EQUIPMENT	NO.	FIXTURE/EQUIPMENT
1	Water Closet		Steam Boiler
	Urinal / Bidet		Hot Water Boiler
	Bath Tub		Sewer Pump
1	Lavatory		Interceptor/Separator
	Shower		Backflow Preventer
8	Floor Drain		Grease Trap
	Sink		Water Cooled A/C or Refrigeration Unit
	Dishwasher		
	Drinking Fountain		Sewer Connection
	Washing Machine		Water Service Connection
	Hose Bibb		Active Solar System
	Water Heater		Other
	Fuel Oil Piping		Other
	Gas Piping		Other

DESCRIPTION OF WORK

COMMENTS 5-21-99 PBB

PBB

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.

SEAL & SIGNATURE (Contractor's Seal) Michael LoCascio Jr

FIRE INSPECTION

Contractor _____

Address _____ Phone (_____) _____

Town _____ State _____ Zip _____

LIC # _____ FEDERAL EMP. NO. (or SSN#) _____

ESTIMATED COST OF FIRE PROT. WORK: $ _____

Heating Type: ☐ Gas ☐ Oil ☐ Electrical ☐ Solar

Heating System: ☐ New ☐ Existing

Location of Furnace / Boiler _____

TECHNICAL SITE DATA (Description of Work)

WATER SUPPLY SOURCE _____

METHOD OF VALVE SUPERVISION _____

LOCAL ALARM SUPERVISION _____

CENTRAL SUPERVISION _____

PROPRIETARY SUPERVISION _____

Flammable Liquid Storage Tanks ☐ Capacity _____ Fuel _____

Combustible Liquid Storage Tanks ☐ Capacity _____ Fuel _____

L.P.G. Storage Tanks ☐ Capacity _____ Fuel _____

L.N.G. Storage Tanks ☐ Capacity _____ Fuel _____

NO.	ITEM	NO.	ITEM
_____	Wet Sprinkler Heads	_____	Pre-Engineered Syste
_____	Dry Sprinkler Heads	_____	CO_2 Suppression
_____	TOTAL	_____	Halon Suppression
		_____	Foam Suppression
_____	Smoke Detectors	_____	Dry Chemical
_____	Heat Detectors	_____	Wet Chemical
_____	TOTAL	_____	Gas or Oil Fired Apj
		_____	Other _____
_____	Stand Pipes		
_____	Kitchen Hood Exhaust System		

DESCRIPTION OF WORK

COMMENTS _____

CERTIFICATION IN LIEU OF OATH

I HEREBY CERTIFY THAT I AM THE (AGENT OF) OWNER OF RECORD A AUTHORIZED TO MAKE THIS APPLICATION AND PERFORM THE WORK ON THIS APPLICATION.

SEAL & SIGNATURE (Contractor's Seal) _____

PATRICK G. DING
106 S. COURTLAND ST, APT 5
EAST STROUDSBURG, PA 18301

0198

4/21/ 98
19

60-1/313 200

PAY TO THE ORDER OF BRICK TOWNSHIP $ 120.00

ONE HUNDRED TWENTY ONLY—

DOLLARS Security features included. Details on back.

PNCBANK®
PNC Bank, N.A.
Northeast PA 030

FOR Affordable Housing

[redacted]

Joseph C. Scarpelli, |

Township Council:
Victor Cantillo – Pr
Martin J. Anton
Helen Fayad
Gregory S. Kavanagh
Mary Lou Powner
Kathy M. Russell
Frederick J. Underwood, Sr.

http://www.twp.brick.nj.us

To: Scott M. Pezarras, Chief Financial Officer

From: Carol A. Wolfe, Affordable Housing Administrator

Re: Affordable Housing Fees

Date: 4-21-98

Business/Development: Grand Jumbo Buffet

Owner/Applicant: Patrick G. Ding

Property Address: Brick Plaza

Block: 671 Lot: 8

DEPOSIT RECEIVED

Mandatory Development Fee
(Commercial)
Residential
Inclusionary Development Fee

Check Number 0198
Estimated Fee $ 240.00

Deposit Amount $ 120.00

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number: _____
Final Fee: $_____
Less Deposit: $_____

Final Payment $_____

FOR DEPOSIT ONLY-AFFORDABLE HOUSING TRUST ACCOUNT # 4880071456

Collection of said fees as authorized by Township Ordinance 354-2C-93, is pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C. 5:92-18 et seq.

Received in Treasurer's Office by:

Signature

4-22-98
Date

GRAND JUMBO BUFFET INC
STORE 30
74 BRICK PLAZA
BRICK, NJ 08723

1020
55-760/312 731

07/06/ 19 98.

PAY TO THE ORDER OF Township of Brick $ 125.00.

One Hundred Twenty Five only- DOLLARS

Security features included. Details on back.

PNCBANK
PNC Bank, N.A. 060
New Jersey

FOR Signoff final Assessment on building

[redacted]

Mary Lou Powell
Kathy M. Russell
Frederick J. Underwood, Sr.

To: Scott M. Pezarras, Chief Financial Officer
From: Carol A. Wolfe, Affordable Housing Administrator
Re: Affordable Housing Fees

Date: July 6, 1998

Business/Development: Grand Jumbo Buffet (Tenant Fit up & Sign)

Owner/Applicant: Grand Jumbo Buffet

Property Address: Brick Plaza

Block: 671 Lot: 8

DEPOSIT RECEIVED

Mandatory Development Fee
Commercial
Residential
Inclusionary Development Fee

Check Number _____

Estimated Fee $ _____

Deposit Amount $_____

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee
(Commercial)
Residential
Inclusionary Development Fee

Check Number ~~[illegible]~~ 1020

Final Fee $ 250.00

Less Deposit $ 125.00

Final Payment $ 125.00

FOR DEPOSIT ONLY - AFFORDABLE HOUSING TRUST ACCOUNT 36 367087

Collection of said fees as authorized by Township Ordinance
354-2C-93, is pursuant to N.J.S.A. 52:27D-301 et seq. And N.J.A.C. 5:92-18 et seq.

Received in Treasurer's Office by:

K Schwartz
Signature

7/6/98
Date