BLOCK 673 LOT 8 QUALIFICATION CODE _____ ADDRESS (SITE) 2791 Hooper Ave PERMIT NO. 15-2036

ECC

CONSTRUCTION PERMIT APPLICATION

C15-003340

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

I. IDENTIFICATION

1. Proposed Work Site at: 2791 Hooper Ave.
2. Name of Owner in Fee: Trahanas Realty LLC
   Tel. (732) 597-6819 e-mail _____
   Address 4 Manhattan Ave (street) Rye (municipality) N.Y. 10580 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: JK construction Tel. (732) 597-6819
   Address 970 Road Ave e-mail _____
   Brick, NJ 08723
   License No. OR, if new home, Builder Reg. No. 45743 Exp. Date 3/16
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 7874800
   Federal Emp. ID No. _____ FAX: ( ) _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun Ken Trawinski
   Tel. (732) 597-6819 FAX: ( ) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 225 TOO ✓		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee	13-		
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 338-		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ft.	
3. Area — Largest Floor sq. ft.	
4. New Building Area sq. ft.	
5. Volume of New Structure cu. ft.	
6. Max. Live Load	
7. Max. Occupancy Load	
8. If Industrialized Building: State Approved ____ HUD ____	
9. Total Land Area Disturbed sq. ft.	
10. Flood Hazard Zone	
11. Base Flood Elevation ft.	
12. Wetlands yes ____ no ____	

IIa. PROPOSED WORK

- ☐ Minor Work ☐ New Building ☐ Addition ☐ Demolition
- ☐ Repair ☐ Alteration ☐ Renovation ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☑ Building	5000	WP			08/21/15	MEK			
☑ Electrical	1500	7/1/15			7/20/15	TO			
☐ Plumbing									
☐ Fire Protection									
☐ Elevator		Eng	Exempt		7/13/15	ECC			
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____ ____
   Gained, Rental ____ ____
   Lost, Sale ____ ____
   Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:

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

D. Construct. Classification: Present _____ Proposed _____

COMMERCIAL

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

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(f)1.ix:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

✓ Check if contractor.

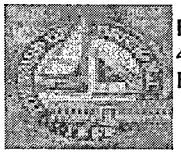
Agent Name JK construction

Address 970 Route Ave
Point, N.J 08723

Telephone (732) 597-6819

Signature _____

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 12/6/2018
Control Number C-15-003340
Permit Number 15-2836
Permit Issue Date 8/26/2015
Certificate Number 15-2836

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 2791 HOOPER AVE VAPOR STORE Brick Township, NJ Block: 673 Lot: 8 Qual:

Owner in Fee: TRAHANAS REALTY LLC

Owner Address: 4 MANHATTAN AVE RYE NJ 10580

Telephone: (732) 597-6819

Contractor JK CONSTRUCTION

Address 970 ROUND AVE BRICK NJ 08723

Telephone: (732) 597-6819 Fax:

License Number or Builders Registration Number: Federal Emp. Number:

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: TENANT FIT UP - - VAPE DOJO

Certificate Comments:

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

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

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

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

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

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

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Jim (732)575-6961

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued 9-26-15
Permit # 15-2836

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

Block 673 Lot 8 Qualification Code

Work Site Location 2791 Hooper Ave
Brick, NJ.

Owner in Fee: ~~Dafna Realty~~ Trahanas Realty LLC.

Tel. 732 597-6819 e-mail

Address ~~970 Road Ave~~ 4 manhattan Ave Rye, NY 10580
street municipality zip code

Contractor: J K construction Tel. 732-597-6819

Address 970 Road Ave. e-mail
Brick NJ

Contractor License No. or Builder Registration No. 45743 Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 7074800

Federal Emp. ID No. FAX:

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

- [ ] No Plans Required
- [X] All — 08/21/15 KRW
- [ ] Footings/Foundations
- [ ] Structural/Framework
- [ ] Exterior
- [ ] Interior

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 08/21/15
Approved by: KRW

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 12/04/18
Approved by: KRW

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame			*9-15-15 MW	
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO 30 Days			*10/16/15 MW	
~~Other~~ 5/6 Stuck Rock			9/28/15 MW	
Final 10/6/15 AM			10/19/15 AM	
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present ____ Proposed ____
No. of Stories ____
Height of Structure ____ ft.
Area — Largest Floor ____ sq. ft.
New Bldg. Area/All Floors ____ sq. ft.
Volume of New Structure ____ cu. ft.
Max. Live Load ____
Max. Occupancy Load ____

Constr. Class Present ____ Proposed ____
If Industrialized Building:
State Approved ____ HUD ____

Est. Cost of Bldg. Work:
1. New Bldg. $ 5000
2. Rehabilitation $ ____
3. Total (1+ 2) $ 5000 0

U.C.C. F110 (rev. 11/09)
Internet version

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.

Sign here: [signature]

Print name here: Kenneth Trahanas

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK TENANT FIT UP
VAPE DOJO
Minor.
Add two metal stud walls
Sheetrocked. Appox. 25 feet.
NOTE: Retail Store for SALE of e-cigarettes, etc. ONLY
NO SMOKING OF ANY TYPE ALLOWED ON PREMISES.

TYPE OF WORK:
- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence ____ Height (exceeds 6')
- [ ] Sign ____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall ____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other ____
- [ ] Demolition

FEE (Office Use Only)
$

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #
Date Issued 8-26-15
Permit # 15-2936

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

Block 673 Lot 8 Qualification Code

Work Site Location 2291 Hooper Ave Unit , NJ.

Owner in Fee: [redacted] Trahanas Realty Corp LLC.

Tel. (732) 597-6819 e-mail

Address [redacted] 4 Manhattan Ave, Rye, N.Y 10580

Contractor: Adam Ricany Electrical LLC (street / municipality) Tel. (732) 773-5714 (zip code)

Address 328 Steacmaker Rd. e-mail
Brick NJ 08723

Contractor License No. 16474 Exp. Date 3/31/18

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

Federal Emp. ID No. 264-149-974 FAX: ( )

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[✓] Electric Plans Approved
Date: 7/20/15 Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 7/20/15
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [Y] CA
Date: 10/16/15
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough PAN			9/01/15	CO
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			10/16/15	PSC
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here:

Print name here: Adam Ricany

[✓] Licensed Elec. Contractor [ ] Certified Landscape Irrigation Cont'r. [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Minor Electrical

QTY.	SIZE	ITEMS	FEE (Office Use Only)
5		Lighting Fixtures	
5		Receptacles	
1		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	
		KW Elec. Sign/Outline Light	

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

9 10 15 RLW walls need sandblasted or coat at final

e tech.

CONSTRUCTION PERMIT

Date Issued 8-26-15
Control # C-15-003340
Permit # 15-2036

IDENTIFICATION Block: 673 Lot: 8 Qualifier
Work Site Location: 2791 HOOPER AVE VAPOR STORE Brick Township, NJ
Owner in Fee TRAHANAS REALTY LLC
4 MANHATTAN AVE RYE NJ 10580
Telephone: (732) 597-6819

Contractor JK CONSTRUCTION
Address 970 ROUND AVE BRICK NJ 08723
Telephone: (732) 597-6819
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

- [x] BUILDING
- [ ] PLUMBING
- [ ] LEAD HAZARD ABATEMENT
- [x] ELECTRICAL
- [ ] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
TENANT FIT UP - VAPE DOJO

Note: If constuction 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 $6,500

David J. Newman Jr. 8/24/15
Construction Official Date

PAYMENTS (Office Use Only)

Building	$225
Electrical	$100
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$13
CO Fee	
Other	$0
Total	$338
Check No.	1471
Cash	$0
Credit	$0
Collected By	G4R

150
338

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

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

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

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

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

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

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

- [x] A complete copy of released plans must be kept on the job site.

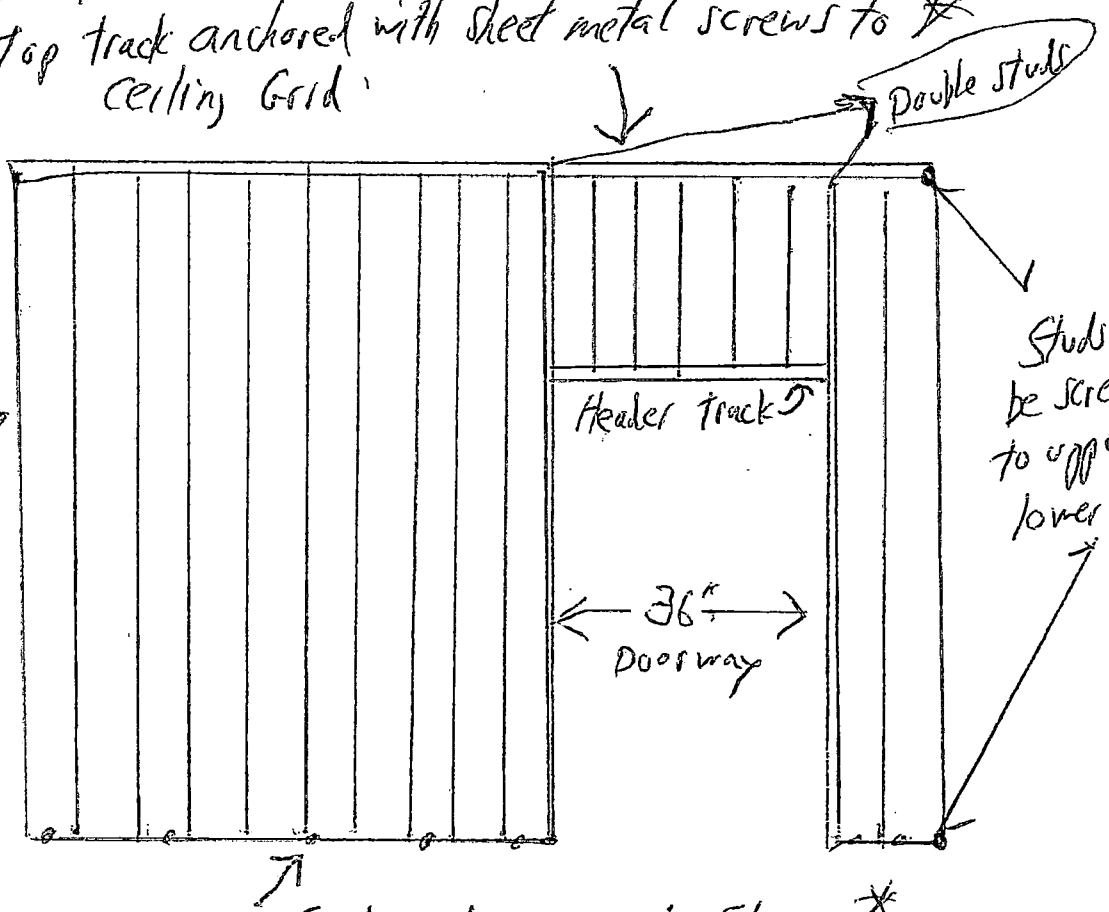
If you do not understand any of this information, please ask.

* Interior NON-Bearing metal Stud wall Construction *

Block - 673
Lot - 8
Unit - 130

TENANT FIT UP
VAPE DOJO

* Top track anchored with sheet metal screws to Ceiling Grid *



* Hilti Power driven Fastners to Concrete Floor *

* ½" Sheetrock Both Sides

* 25 Gauge Steel Studs

FILE COPY

NOTE: Retail Store for SALE of e-cigarettes, etc. ONLY

NO SMOKING OF ANY TYPE ALLOWED ON PREMISES

TOWNSHIP OF BRICK

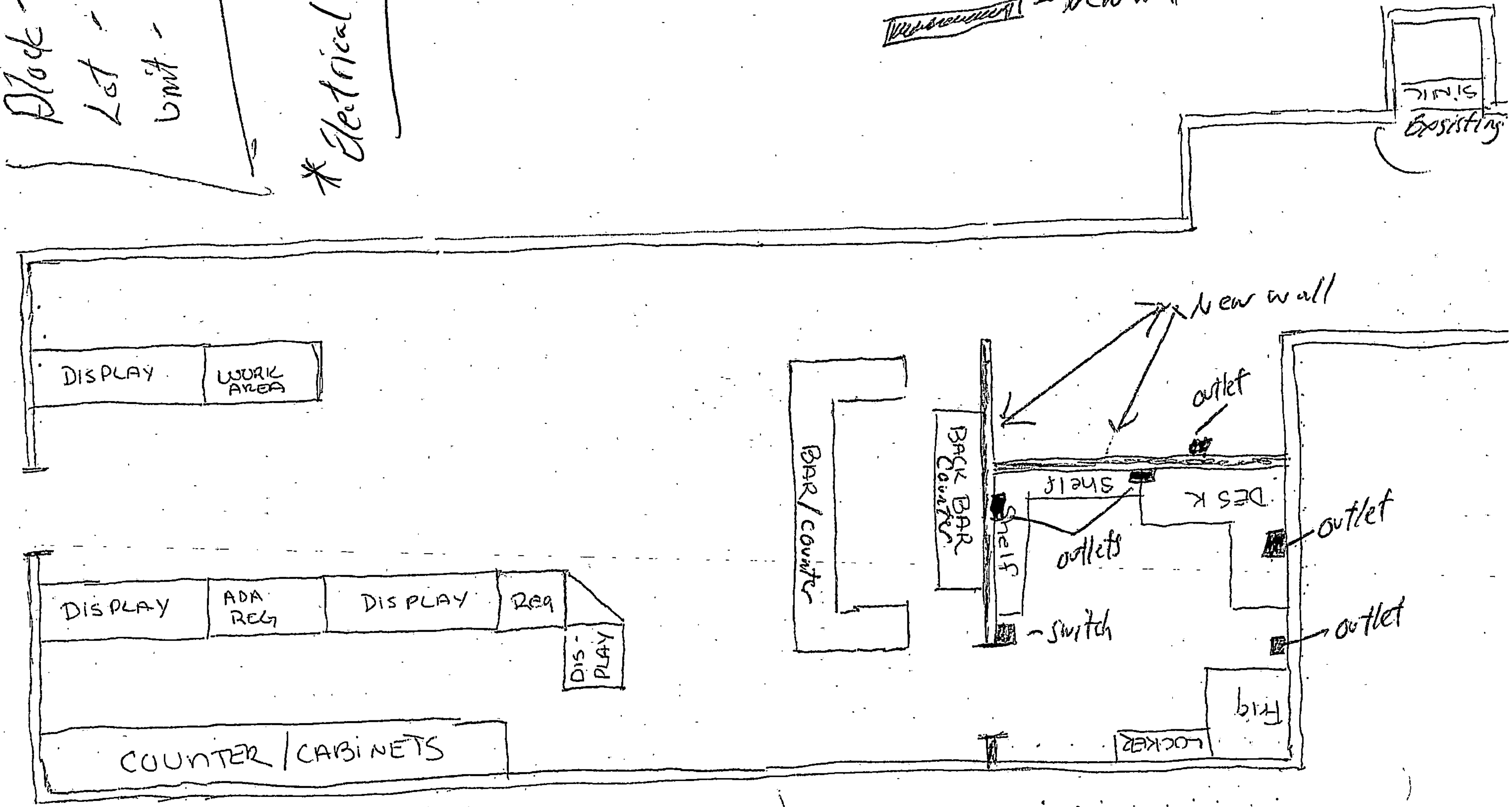
RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode	MK	08/21/15
Plumbing Subcode		
Fire Subcode		
Electrical Subcode	TO	7/20/15
Plan Reviewer		
Plans Released		
Construction Official		

2 New Non Bearing interior stud walls' *

Block - 673
Lot - 8
Unit - 130

* Electrical Locations

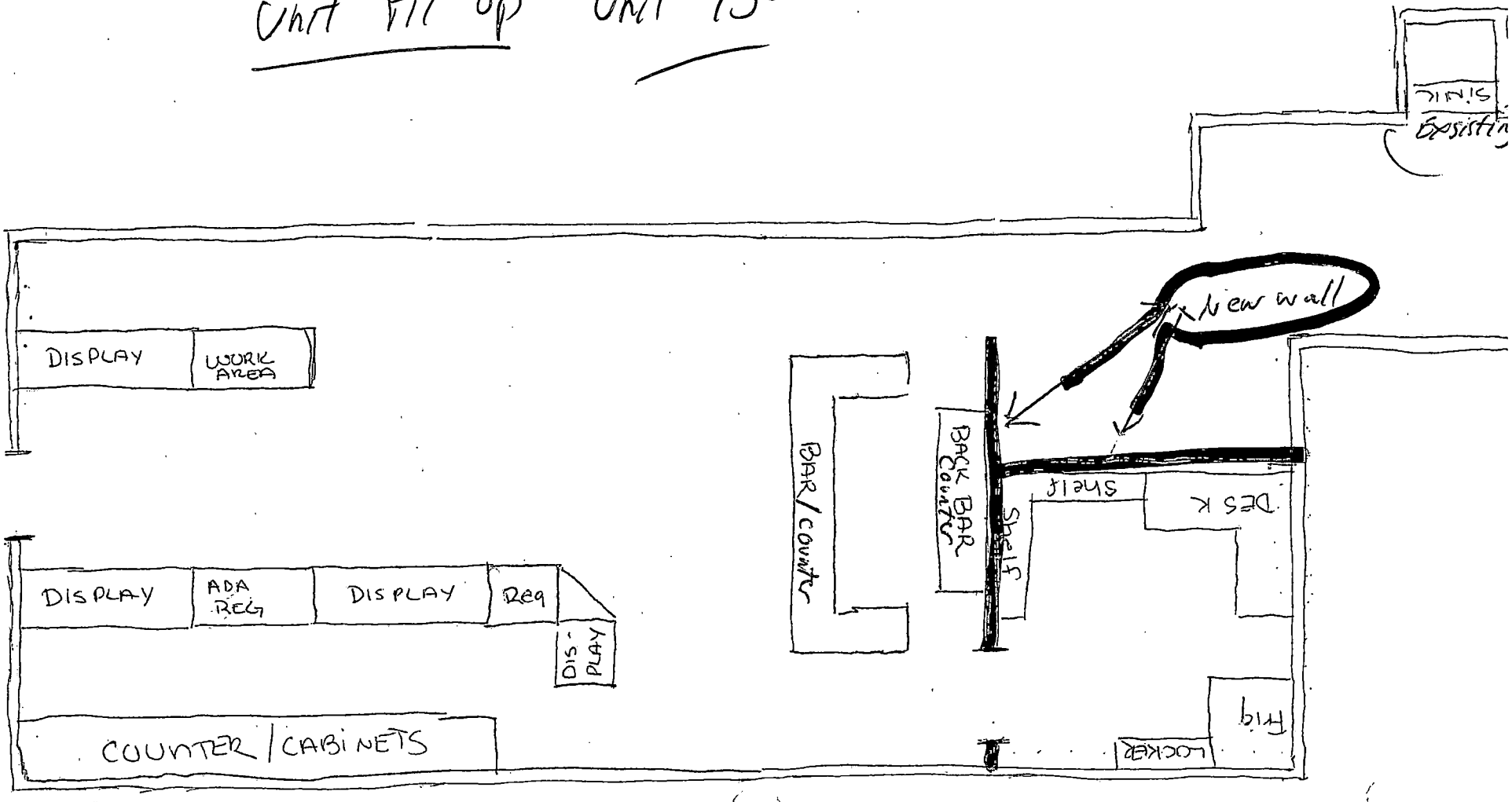
5 - Electrical outlets -
1 - switch -
- New wall



Block 673
Lot 8

2791 Hooper Ave

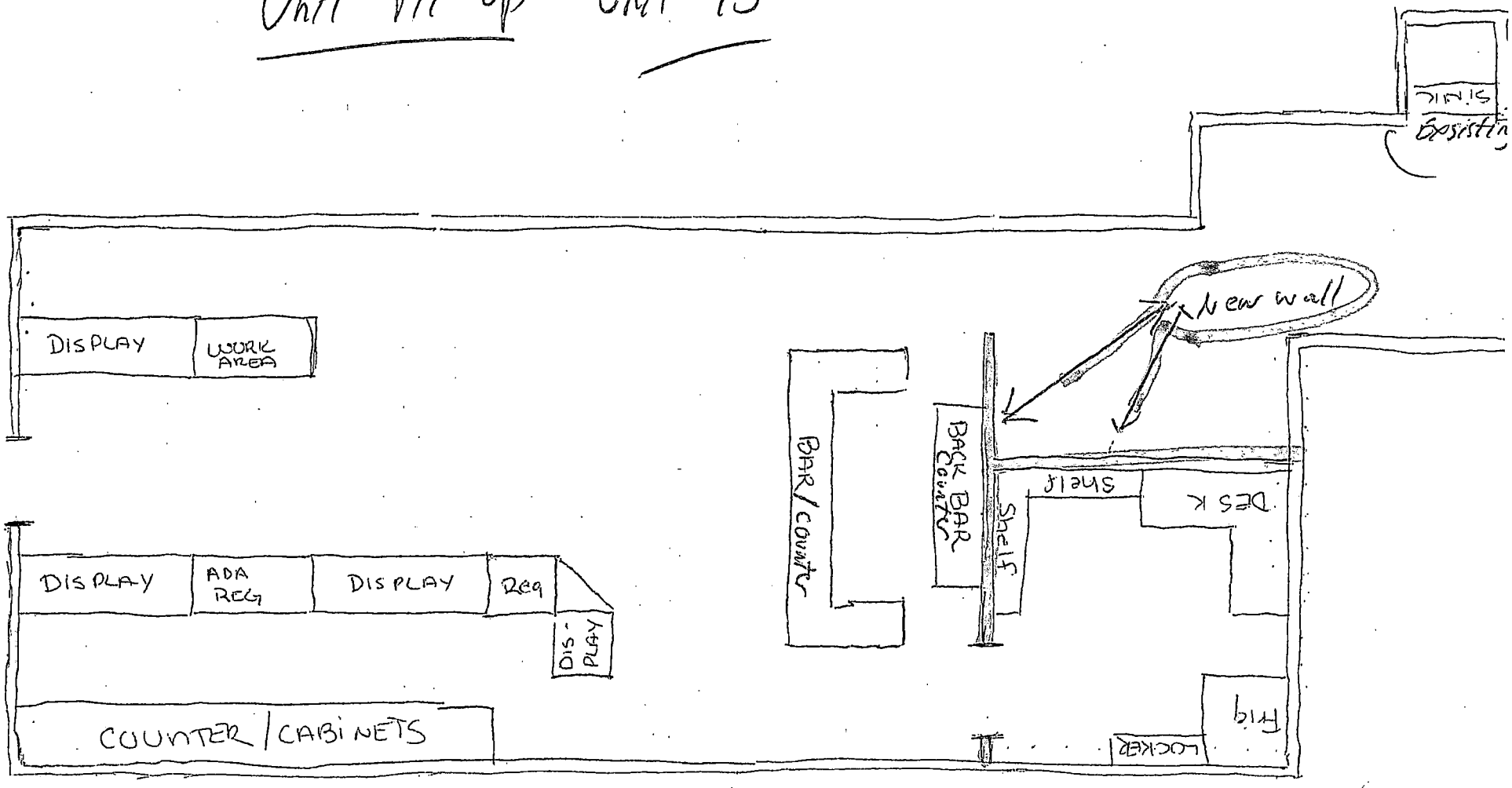
Unit Fit up Unit # 130



Block 673
Lot 8

2791 Hooper Ave

Unit Fit up Unit # 130



RECEIVING CLERK _____
DATE REC'D 8/7/15

ZONING PERMIT APPLICATION

PERMIT # ZP-15-01054
DATE ISSUED 8-26-15

BLOCK: 673 LOT: 8 QUALIFIER: _____ SITE ADDRESS: 2791 Hooper Ave.

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Trahanas Realty LLC
   COMPLETE ADDRESS: 4 Manhatten Ave
   Rye - N.Y. 10580
   PHONE # 732-597-6819 EMAIL: _____

2. NAME OF APPLICANT: JK Construction
   APPLICANT ADDRESS: 920 Round Ave.
   Brick, N.J.
   PHONE # 732-597-6819 EMAIL: _____

3. RESPONSIBLE PERSON FOR WORK: Ken Trawinski
   PHONE# 732-597-6819 FAX# 732-451-2793

4. SIGNATURE OF APPLICANT: [signature]

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 50-
OTHER: $ _____
TOTAL: $ 50-

REQUIRED BY APPLICANT

~~RESIDENTIAL:~~ _____
COMMERCIAL: ✓
EXISTING USE: Smoke Shop
PROPOSED USE: Vape Store

BOARD APPROVAL: ___ PB ___ ZB
RESOLUTION#: _____
APPROVAL DATE: _____

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)
*NEW BUILDING: _____ *ADDITION _____ *ALTERATION _____ *PORCH _____ *DECK _____

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____ MATERIAL _____

HEIGHT: _____ (*IF APPLICABLE)

OTHER _____

DESCRIPTION: Add 2 interior walls- Fit up for new Vape Store.

ZONING REVIEW:
DATE REVIEWED: 2-8-16 DATE DENIED: DATE APPROVED: 2-8-16 INIT.S: CLe

(SEE BACK PAGE)

OFFICE USE ONLY

APPROVED FOR ZONING ONLY
SEAN KINNEY, ZONING OFFICER
JUL 08 2015

ZONING REVIEW:

DATE REVIEWED: 7/8/15 DATE DENIED: — DATE APPROVED: 7/8/15 INTLS: SKS

DATE:	COMMENTS:	INITIALS:
7/8/15	SENT TO ECC FOR QR	SKS

245 Attachment 5

Township of Brick

SCHEDULE OF AREA, YARD AND BUILDING REQUIREMENTS
Township of Brick
Ocean County, New Jersey

[Amended 6-26-1979 by Ord. No. 354-2B-79; 4-22-1980 by Ord. No. 354-2H-80; 10-14-1980 by Ord. No. 354-2N-80; 9-23-1980 by Ord. No. 354-1B-80; 8-25-83 by Ord. No. 354-2SS-83; 11-5-1984 by Ord. No. 354-2-AAA-84; 11-5-1984 by Ord. No. 354-2CCC-84; 6-24-1986 by Ord. No. 354-2WWW-86; 9-13-1988 by Ord. No. 354-2TTTT-88; 9-27-1988 by Ord. No. 354-2XXXX-88; 9-12-2000 by Ord. No. 354-2EE-00; 5-9-2000 by Ord. No. 354-2Z-00; 3-26-2002 by Ord. No. 354-2C-02; 11-26-2002 by Ord. No. 354-2L-02; 3-25-2003 by Ord. No. 354-2D-03; 6-13-2006 by Ord. No. 19-06]

Zone	Minimum Lot Size						Minimum Required Yard Depth						Maximum Lot Coverage by Building	Maximum Building Height				Minimum Floor/ Building Area (square feet) 2 stories/1 story	Maximum Allowable Impervious Coverage
	Interior Lots			Corner Lots			Principal Building				Accessory Building								
	Area (square feet)	Width (feet)	Depth (feet)	Area (square feet)	Width (feet)	Depth (feet)	Front Yard (feet)	Side Yard, Each (feet)	Both Sides Combined (feet)	Rear Yard (feet)	Side Yard (feet)	Rear Yard[3] (feet)		Stories	Eaves (feet)	Feet	Ridge (feet)		
R-R	40,000	150	150	40,000	150	150	50	25		50	25	25	25%	–	25			–	
RR-2	See § 245-90.																		
RR-3	See § 245-103.																		
R-20	20,000	100	125	25,000	100	125	40	15	–	40	10	10	25%	–	25	35	38.5	–	
R-15	15,000	100	115	17,250	100	115	35	12	–	35	10	10	25%	–	25	35	38.5	–	
R-10	10,000	90	100	10,500	100	100	30	6	20	20	5	5	30%	–	25	35	38.5	–	
R-7.5	7,500	75	90	9,000	75	90	25	6	15	15	5	5	30%	–	25	35	38.5	–	
R-5	5,000	50	75	6,000	50	75	20	5	12	15	5	5	35%	–	25	35	38.5	–	
O-P	15,000	100	150	15,000	100	150	50	10	–	50	20	50	35%[2]	2	–	35	38.5	1,500	70%
B-1	10,000	100	90	12,500	100	125	30	10	–	20	10	20	30%[2]	2	–	35	38.5	1,000	60%
B-2	20,000	125	125	20,000	125	125	50	10	–	50	10	50	30%[2]	2	–	35	38.5	2,000	65%
B-3	2 acres	200	200	2 acres	200	200	75	30	–	50	20	50	25%[2]	–	–	35	38.5	2,000	65%
B-4	5 acres	300	300	–	–	–	100	50(150[1])	–	100(150[1])	20	50	25%	3	–	35	38.5	30,000	70%
M-1	5 acres	300	300	5 acres	300	300	100	50	–	150	75	150	30%[2]	–	–	35	38.5	5,000	65%
R-M	25 acres	350	200	–	–	–	50	50	–	30	30	30	20%	–	25	35	38.5	–	65%
O-P-T	40,000	150	150	40,000	150	150	50	20	–	50	20	50	25%[2]	2	–	35	38.5	2,000	50%
H-S	See § 245-261.													–	–	–	–		70%

NOTES:
1. If adjacent to residential zone or use.
2. The maximum lot coverage shall refer only to that percentage of an affected lot which is suitable for building.
3. For rear yard setback requirements for accessory buildings on waterfront property, see § 245-10D.

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1336

Date Issued: 8-26-15
Application Number: ZA-15-00915
Application Date: 07/07/2015
Project Number:
Permit Number: ZP-15-01054
Fee: $50

Zoning Permit

Worksite Location: **2791 HOOPER AVE**
Brick Township, NJ

Block: **673**
Lot: **8**
Qualifier:
Zone: **B-3**

Owner: **TRAHANAS REALTY LLC**
Address: **4 MANHATTAN AVE**
RYE, NJ 10580

Applicant: **JK Construction**
Address: **970 Round Avenue**
Brick, NJ

Application Approved Date: 07/08/2015

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Retail Store (Vapor Store)
Nonconforming Use is:

Work Description:
Rehabilitation, Tenant Fit-Up - Interior alterations to create vapor store. Permitted use in the B-3 zone.

Additional Zoning Permit is required for additional work or signage.

Upon review it was determined that the Zoning Permit:

- ☑ Permitted by Ordinance
- ☐ Permitted by Variance approved on: _____
- ☐ Valid Nonconforming Use is established by
  - ☐ Zoning Board of Adjustment
  - ☐ Zoning Officer

Christopher J. Romano, Office of Zoning — 07/08/2015 Date

Sean Kinnevy, Zoning Officer — 7/8/15 **Date**

401 Chambers Bridge Road
Brick, NJ 08723
732-262-1030

Brick Township

CORRECTION NOTICE

5/8 flx X

ADDRESS 2791 Hooper Ave

PERMIT NUMBER 15-2836 BLOCK _____ LOT _____

~~OWNER~~ Frame Rejected (Clarification for insp of 9-15-15)

Upon inspection, violations of the ____ Building ___ Plumbing ___ Electric ___ Fire Code were in evidence and the following orders are hereby issued for their correction:

Options:

① Metal Studs and ½" drywall – as on Released Plans
② Wood Studs and 5/8 typeX drywall at all sides –
③ NJ Design professional to call out/certify the construction type as III-B and then combustable materials will be allowed –

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED.

DATE 9-24-15 INSPECTOR IW

ATTN: Building Department

I HEREBY AUTHORIZE **JK Construction Services t/a Locals Surf LLC (HIC# 13VH07074800 & Home Builder Registration #45743) of 970 Round Ave, Brick NJ 08723** and any of its authorized agents to act on my behalf in all areas with the

Brick Township Building Department (township name)

building department for the purposes of construction at my property located at:

370 Hooper Ave Brick NJ 08723 (address, lot & block).

This authorization is set to expire automatically upon project completion or

Sept 30, 2015 (date, typically 6 months from start),

whichever is first. I understand that I remain fully responsible and liable for all acts performed under any permit. Under penalties of perjury, I declare that I have read the forgoing authorization letter the facts stated are true.

Property Owner Name (PRINTED): Deborah Leahy

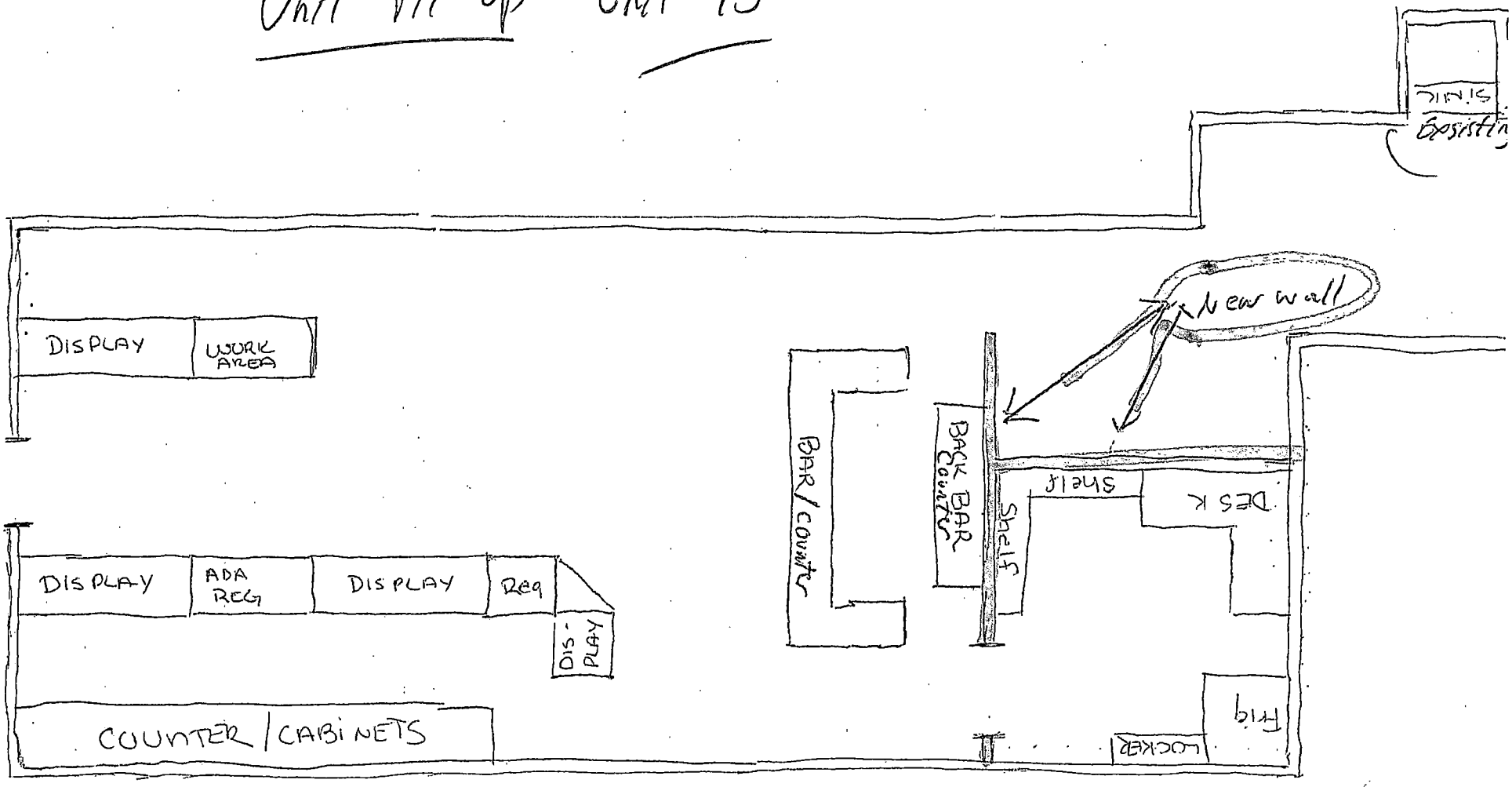
Property Owner Name (SIGNITURE): Deborah Leahy

Date Signed: 6/18/15

Block 673
Lot 8

2791 Hooper Ave

Unit Fit up Unit # 130



THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

LOCALS SURF LLC DBA JK CONSTRUCTION SERVICES
James Carlock
39 Nejecho Dr
Brick NJ 08723

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

03/26/2015 TO 03/31/2016
VALID

13VH07074800
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

PLEASE DETACH HERE

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Division of Consumer Affairs
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Home Improvement Contractor

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03/26/2015 TO 03/31/2016
VALID

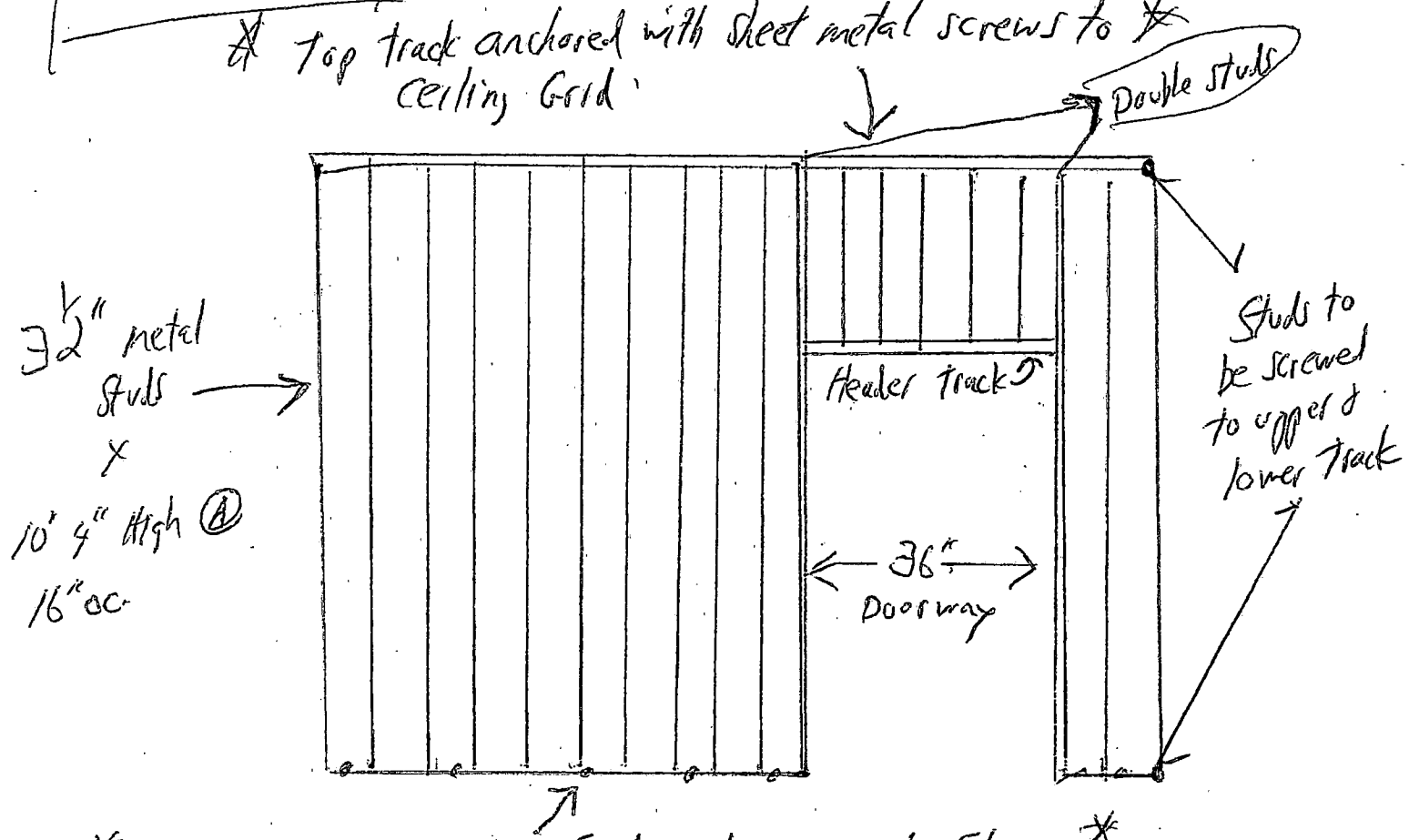
SIGNATURE

13VH07074800
License/Registration/Certificate #

ACTING DIRECTOR

* Interior Non-Bearing metal Stud wall Construction *

Blade - 673
Lot - 8
Unit - 130



* Hilti Power driven Fastners to Concrete Floor *

* 1/2" Sheetrock Both Sides

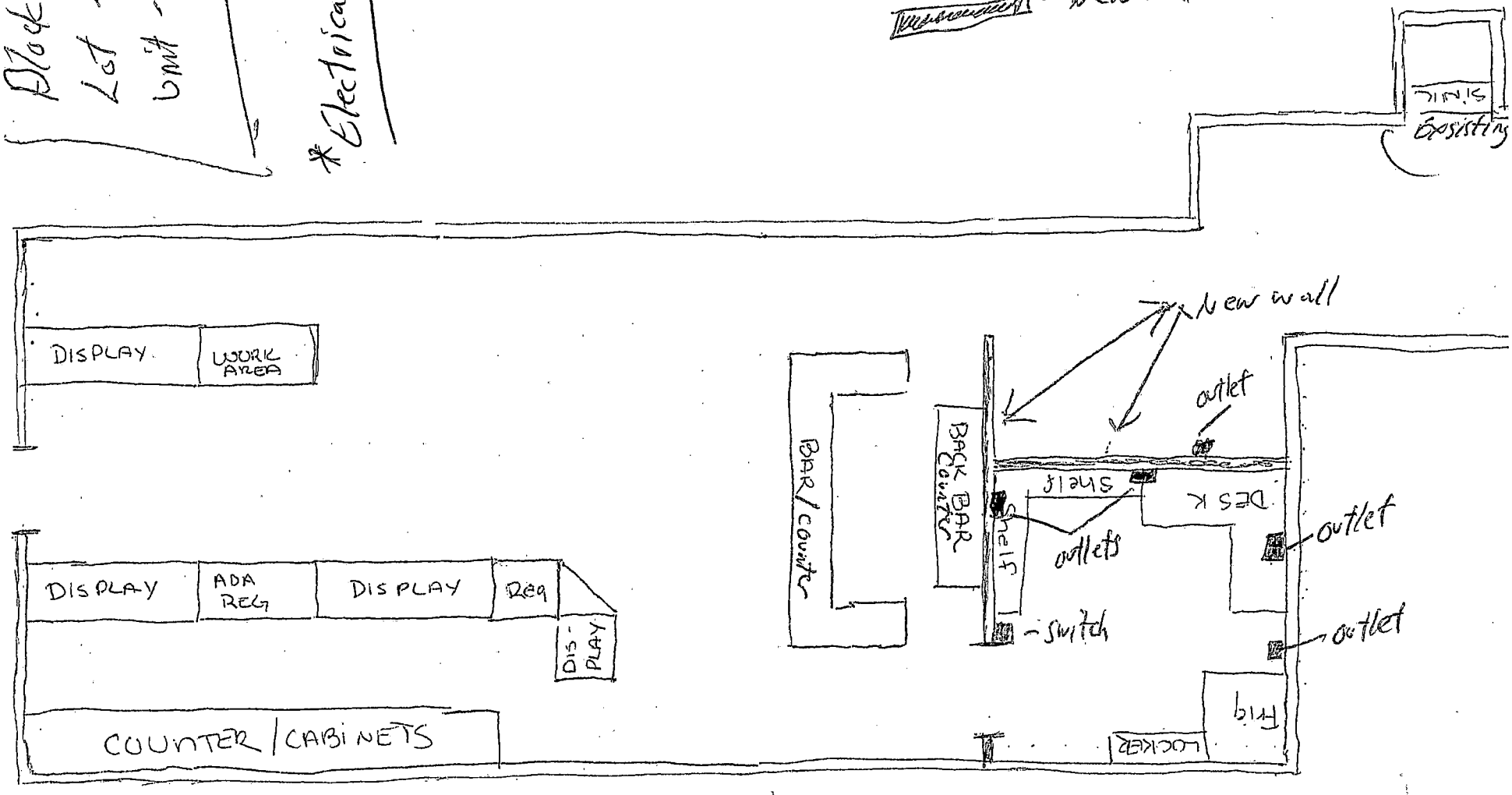
* 25 Gauge Steel Studs

#2 New Non Bearing interior stud walls

Block - 673
Lot - 8
Unit - 130

*Electrical Locations

5 - Electrical outlets -
1 - switch -
- New wall



ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 673 LOT: 8 ADDRESS: 2791 Hooper Ave

IDENTIFICATION:

1. WORK SITE ADDRESS: 2791 Hooper Ave
2. NAME OF OWNER IN FEE: Trahanas Realty LLC

   ADDRESS: 4 Manhattan Ave PHONE #: (__) _____

   Rye, NY 10580 FAX #: (__) _____
3. PRINCIPAL CONTRACTOR: SK construction

   ADDRESS: 970 Round Ave PHONE #: (732) 597-6819

   _____ FAX #: (732) 415-2773
4. ARCHITECT OR ENGINEER: _____

   ADDRESS: _____ PHONE: # (__) _____
5. RESPONSIBLE PERSON FOR WORK: Ken Trawinski

   ADDRESS: 970 Round Ave. Brick N.J.

PHONE #: (732) 597-6819 FAX #: (732) 415-2773 E-MAIL: _____

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☒ OTHER 2 Interior walls in existing store location

LENGTH: _____ WIDTH: _____ HEIGHT: _____

FEE SUMMARY:

APPLICATION FEE: $ _____

REVIEW FEE: $ _____

INSPECTION FEE: $ _____

OTHER _____: $ _____

BOND(S): $ _____

TOTAL: $ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE REJECTED: _____ DATE APPROVED: _____ INITIALS: _____

TOWNSHIP OF BRICK

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

Division of Engineering

Elissa C. Commins, PE, PP, CME, CPWM, CFM
Township Engineer & Floodplain Manger
Ecommins@twp.brick.nj.us

732-262-1040
Fax: 732-262-2941
www.twp.brick.nj.us

Date: 7/1/15

ENGINEERING
PLOT PLAN EXEMPT FORM
(ONLY IF NOT IN A FLOOD ZONE)

Block: 673 Lot: 8

Property Address: 2791 Hooper Ave Brick NJ. 08723

I, James Carlock (name) of JK Construction Services (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Township Code, Chapter 245, Section 245-29.

Applicant's Signature

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the addition should be included.

2. **Proof that the property is not located in a Flood Hazard Area.**

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

FOR OFFICE USE ONLY

Approved on: _____ Signed: _____

Rejected on: _____ Signed: _____

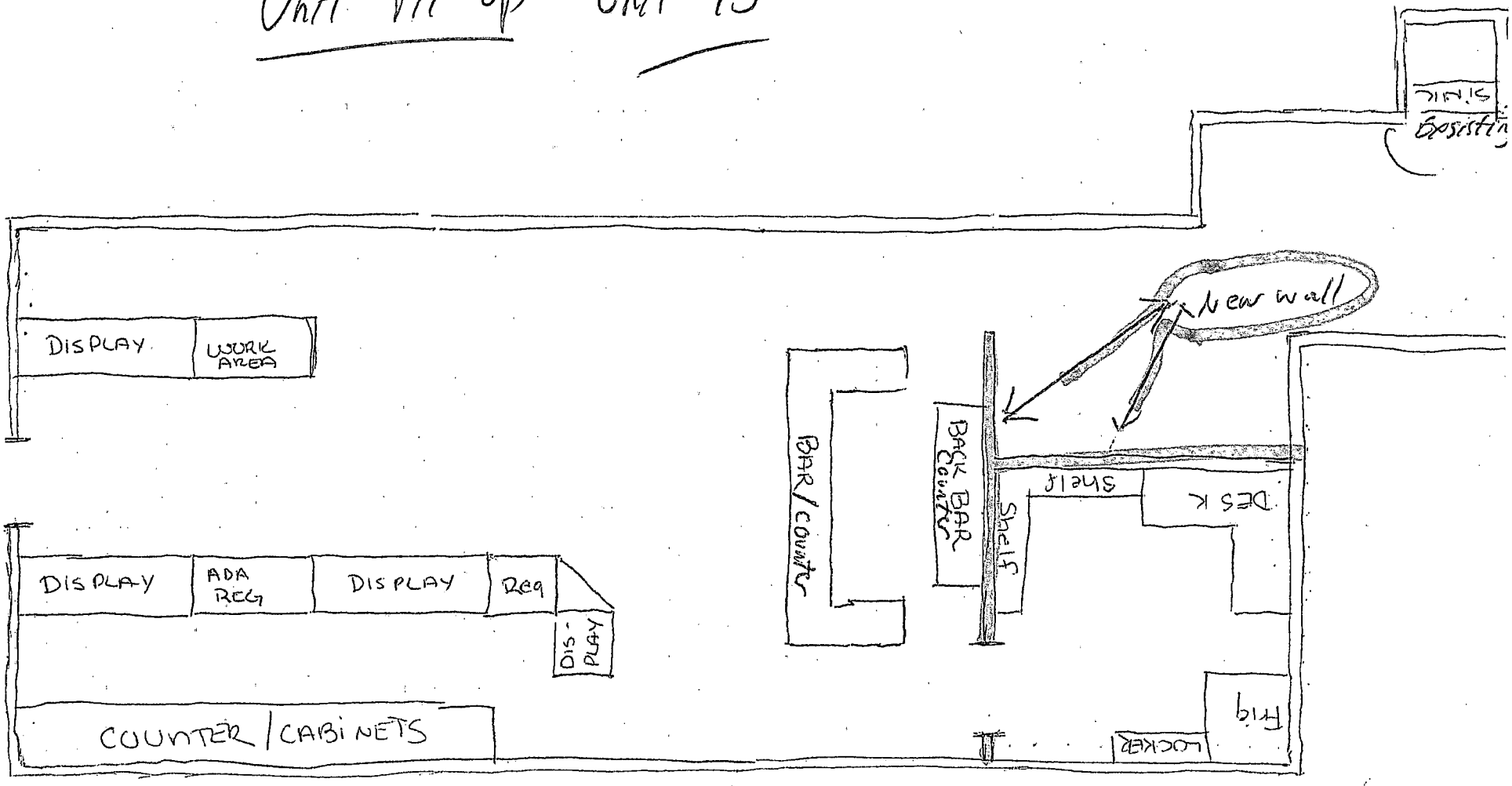
Comments:

311 ACCESS BRICK TOWNSHIP

Block 673
Lot 8

2791 Hooper Ave

Unit Fit up Unit # 130



Sign Permit will be taken by Sign Company.

↓

Sign
channel letters
67" by 96"
overall size

Rave Signs
533 Birmingham Ave
Toms River

ATTN: Building Department

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03/26/2015 TO 03/31/2016
VALID

SIGNATURE

13VH07074800
License/Registration/Certificate #

ACTING DIRECTOR

PLEASE DETACH HERE