

BLOCK 671 LOT 8 ADDRESS (SITE) Rt 70 + Chamberbridge PERMIT NO. 1668-96

RECEIVED

JUN 27 1996

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: Rt 70 + Chamberbridge
2. Name of Owner in Fee: Barnes & Noble - Bright Place Tel. (215) 657-8740
Address 122 C Park Ave, Willow Grove, Pa
street municipality zip code
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Cost Cost Sign Tel. (215) 781-8500
Address 5058 Rt 13 N, Bristol Pa 19007
- License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
- Federal Emp. No. 23 3180296 Social Security No. _____
5. Architect or Engineer _____ Tel. () _____
Address _____
6. Responsible Person in Charge of Work Denny Kueffer Tel. (610) 2725953 Call

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>215-</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$ <u>215-</u>		
7. Less 20% for State Plan Review			
8. Subtotal	\$ _____		
9. DCA Training Fee	<u>3-</u>		
10. Subtotal	\$ _____		
11. Cert. of Occupancy			
12. Other <u>ZPA</u>	\$ <u>15</u>		
13. TOTAL	\$ <u>233.90</u>		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area—Largest Floor _____ sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Structure _____ cu. ft.
6. Construction Classification _____
7. Total Land Area Disturbed _____ sq. ft.
8. Flood Hazard Zone _____
9. Base Flood Elevation _____ ft.
10. Wetlands yes _____ sq. ft.
no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

II. PROPOSED WORK

1. ☐ Minor work (single trade)
2. ☐ Small Job (\$5,000 and no prior approvals)
3. ☐ New Building
4. ☐ Addition
5. ☐ Alteration
6. ☐ Fire Protection
7. ☐ Plumbing
8. ☐ Electrical
9. ☐ Elevator Devices
10. ☐ Asbestos Abatement
11. ☐ Demolition
- TOTAL COSTS

Est. Cost

4100

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>WP</u>	<u>6/8/96</u>		<u>7/11/96</u>	<u>MR</u>			
<u>EWG</u>	<u>7/11/96</u>		<u>CWA</u>	<u>MR</u>			

III. DO YOU WANT: (optional) 1 ☐ Partial Releases 2 ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No of dwelling units:

Before Construction _____

After Construction _____

Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group: Barnes & Noble

3. Change in Use Group, Indicate Former:

LDS BR 10404691

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 New Jersey 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 Virginia Bkeffe Cast Coast Sign

Address 306 Hazelton St

Norristown Pa 19401

Telephone (610) 272-5953

Signature Virginia Bkeffe Date 6-27-96

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			X		X		X		IMPORTANT A.H.B.T. - EXEMPT
☐ Planning Board			X		X		X		
☐ Zoning Board			X		X		X		
☐ Sewer Authority			X		X		X		
☐ Water Authority			X		X		X		
☐ Fire Department			X		X		X		
☐ Police Department			X		X		X		
☐ Health Department			X		X		X		
☐ Soil Conservation			X		X		X		
☐ N.J. Dept. of Community Affairs			X		X		X		
☐ N.J. Department of Transportation			X		X		X		
☐ N.J. Dept. of Environmental Protection			X		X		X		
☐ Utility Dig No.			X		X		X		
☐			X		X		X		
☐			X		X		X		

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. _____ | _____ | _____ | _____ |
| ☐ Certificate of Approval | No. _____ | _____ | _____ | _____ |



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

7/8/96

1668-96

IDENTIFICATION Block

Lot

Work Site Location

Contractor

Owner in Fee

Address

Tele. ()

Lic. No. or Bldrs. Reg. No.

Exp. Date

Tele. ()

Federal Emp. No.

or Social Security No.

is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER
☒ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

Sign

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 \$

4100.00

Pan Korkowski
CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

PAYMENTS (Office Use Only)

Building	215 - D.C.A.	5.00
Plumbing	70MTH ST	5.00
Electrical	TOTAL	207.00
Fire Protection	CHUCK	207.00
Other	CHUCK	0.00
Other		
DCA Training Fee	35 000/0000	1000
Cert. of Occ.		
Other	214-15-	
Total	233-	
Check No.	#1093	
Cash		
Collected By:	J	



Brick Township

**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

7/8/96
16668-96

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 At 76 + Chamberlayne Rd
Owner in Fee Banner & Noble - Brick Plaza
Address 122 "C" Park Ave
Tele. (215) 457-8740
Contractor Hot Coat Sign Co.
Address 5058 N 1st St, 13
Tele. (215) 281-8500
Lic. No. or Bids. Reg. No. 23-2180296 or Social Security No. _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☐ No Plans Req.			Type:	Failure	Approval
☒ All	7/2/96		Footings		
☐ Footing			Foundation		
☐ Foundation			Skb		
☐ Frame			Frame		
☐ Other			Insulation		
Joint Plan Review Required:			Finishes:		
☐ Elec. ☐ Plumb. ☐ Fire			Energy		
SUBCODE APPROVAL			Mechanical		
☐ CO ☐ CCO ☐ CA			TCO		
Date:			Other		
Approved By:			Final		

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class 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.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$ 900-
2. Alteration \$ 41.00-
3. Total (1+2) \$ 941.00-

C. CERTIFICATION IN LIEU OF OATH

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Install 42" x 61 1/2" channel letters.
215.25 ft

TYPE OF WORK:

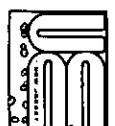
- ☐ New Building
- ☐ Addition
- ☐ Alteration
- ☐ Roofing
- ☐ Siding
- ☐ Fence
- ☒ Sign 215.25 Sq. Ft.
- ☐ Pool
- ☐ Asbestos Abatement
- ☐ Other
- ☐ Other
- ☐ Demolition

(Office Use Only)
FEE

Administrative Surcharge	\$
Minimum Fee	\$
DCA TRAINING FEE	\$
TOTAL FEE	\$

Paid ☐ Check # _____
Collected by: _____
TOTAL FEE \$ _____

Buck Township - Main County Electrical Bureau



ELECTRICAL
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

SEP 9 96 00 8268

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 4770 + Chamber Buckle Rd
Owner in Fee Barbara & Noble - Buck Plaza
Address 1325 "C" Park Ave
Wilmington, Pa
Tele. (215) 657-8740
Contractor Quot Count Sign Adm
Address 5058 N Rt 13
Bristol, Pa 19007
Tele. (215) 781-8500
Lic. No. 5035 or Social Security No. 23-2180396
Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility 800
Est. Cost of Elec. Work \$ New the 400.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)
[] No Plans Required	Type:	Failure Failure Approval Initial
Joint Plan Review Required:	Rough	
[] Bldg. [] Plumb.	Temporary	
[] Fire [] Elevator	Constr. Serv.	
[] Elec. Plans Approved	TCO	
Date: _____	Other	
Approved by: _____	Service	
	Final	
SUBCODE APPROVAL	Temp. Cut-in-Card Date Issued	
[] CO [] CCO [] CA	Final Cut-in-Card Date Issued	
Date: _____		
Approved By: _____		

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
		Fixtures (1)
		Receptacles (2)
		Switches (3)
		Total 1 + 2 + 3
		Kw Range
		Kw Oven(s)
		Kw Surface Unit
		hp Dishwasher
		hp Garbage Disposal
		Kw Dryer
		Kw A/C Unit
		Burglar Alarms
		Intercoms Panels
		Smoke Detectors
		hp Whirlpool/spa
		Pool Bonding
		hp Pool Filter Motor
		Pool Lights
		Kw Water Heater(s)
		Kw Central heat:
		oil, gas or elec.
		Kw Baseboard Heat Units
		Thermostats
		hp Heat Pump
		hp Pump(s)
		Amp Motor Control Center/Sub Panels
		Signs
		Light Standards
		hp Motors—Fractional H.P.
		hp Motors—All Others
		Kw Transformers
		Kw Generators
		Amp Service Entrance
		Other

Uninstalled signs on front of
Uninstalled signs on front of
Uninstalled signs on front of

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.

[] Licensed Electrical Contractor [] Exempt Applicant

Signature of Contractor Seal

Paid [] Check # 1116 Administrative Surcharge \$
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$ 35.-

TOWNSHIP OF BRICK
ZONING PERMIT

Date of Issue: June 28, 1996 1996 - 0908
Block 671 Lot 8 Zone B-3, H.D.
Property Address: Brick Plaza
Owner: Federal Realty (Phone): 215-657-8740
Applicant: Virginia Kieffer, East Coast Sign (Phone): 610-272-5953
Use: Single Family Residential
Proposed Construction (if any): 42" x 61'6" channel-lttr wall sign,
215.25 sq. ft., "Barnes and Noble Booksellers"

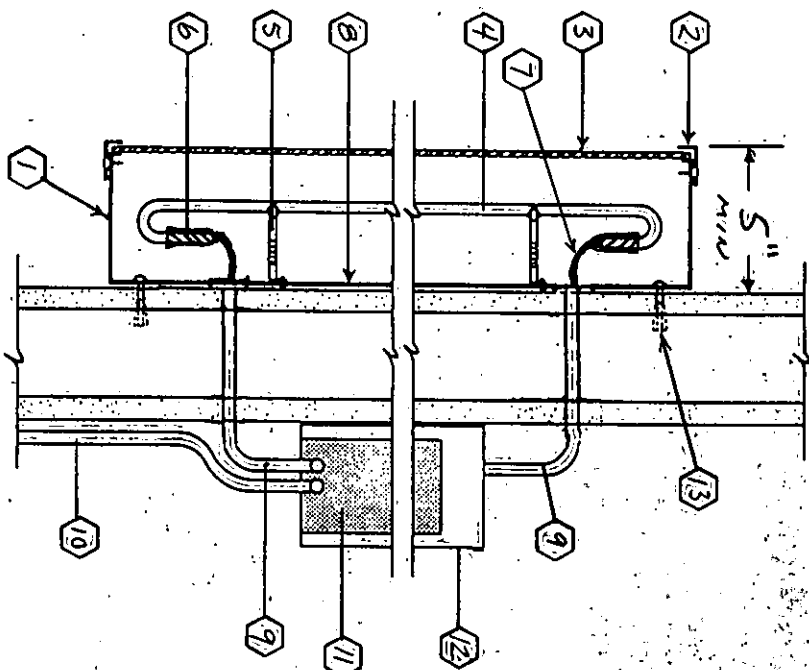
Conditions: _____

Please note that a Construction Permit, as well as a Zoning Permit, must be obtained prior to any construction. You will be notified by the Division of Inspections to pick up and pay for your entire Construction Permit.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis of which this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.


Michael P. Fowler, AICP/PP
Administrative Officer


Sean Kinnevy
Zoning Officer



INTERNALLY ILLUMINATED CHANNEL LETTER CROSS SECTION DETAIL / N.T.S.

SPECIFICATIONS :

1. .060" ALUMINUM SIDE RETURNS.
2. FACE RETAINER, 1/2" SILVA TRIM.
3. 1/8" ACRYLIC LETTER FACE.
4. 15mm. NEON DISCHARGE TUBES.
5. TUBE SUPPORTS, TYPICAL.
6. ELECTRODE INSULATORS.
7. GTO WIRE SECONDARY LEADS.
8. .080" ALUM. LETTER BACKS.
9. SEAL TITE FLEXIBLE CONDUIT.
10. PRIMARY CONDUIT. (SEE NOTE "A").
11. 60 MA NEON TRANSFORMERS.
12. METAL WEATHER TIGHT TRANSFORMER BOXES.
13. WALL ANCHORS, NON-CORROSIVE 3/8" HILTI QUICK ANCHORS, MINIMUM 4 PER LETTER, AS REQUIRED BY EXISTING WALL CONSTRUCTION.

NOTES :

- A. ELECTRICAL REQUIREMENTS, ONE 20 AMP./120 VOLT CIRCUITS BROUGHT TO SITE BY OTHERS.
- B. ALL LETTERS TO DISPLAY UNDERWRITERS LABORATORIES, AND MANUFACTURES LABELS.
- C. CAPITOL SIGN SYSTEMS UL LICENSE # E-7889.