

Super CVTS



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

1. Proposed Work-site at: Orchard 1920 Rt 571 & 2nd St

2. Name of Owner in Fee: Federal Realty Tel. 215, 657-8740

Address Willangione 3/C 122c Perth coe.
street municipality zip code

3. Ownership in Fee: Public _____ Private X

4. Principal Contractor: East Coast Sign Tel. 215, 781-8500

Address 5056 Rt 13 N

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Federal Emp. No. 232180296 Social Security No. _____

5. Architect or Engineer _____ Tel. (____) _____

Address _____

6. Responsible Person Jason Shifstein Tel. 215, 781-8500
in Charge of Work

	\$	Update	Update
1. Building	\$ 24 -		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$ 24 -		
7. Less 20% for State Plan Review	2 -		
8. Subtotal	\$		
9. DCA Training Fee	3 -		
10. Subtotal	\$		
11. Cert. of Occupancy	20 -		
12. Other <i>2PA</i>	<i>1190</i>		
13. TOTAL	\$ 64 -	<i>PA</i>	

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 _____

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

\$3500

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re- viewer	Resubmission Dates Approval Rejection	Re- viewe
JP	5/15/95		8-16-95	[Signature]	2/23/96	
In	et al.		one file			

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

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

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

No of dwelling units:

Before Construction

After Construction

Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change in Use Group,
Indicate Former:

RECEIVED

AUG 15 1995

DIV. OF INSPECTION

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 East Coast Sign

Address 5058 Rt 13

Bristol Pa 19007

Telephone (215) 781-8500

Signature Jason Sharfstein Date 8/14/95

BLOCK 1071 LOT 8 ADDRESS (SITE) _____ PERMIT NO. 2312-95

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									IMPORTANT APPLY - EXEM.
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. 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 _____
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. _____	_____	_____	_____

Supercuts



CONSTRUCTION PERMIT

Date Issued

Control #

Permit #

9/12/95

2312-95

IDENTIFICATION Block 671 Lot 8

Work Site Location 5494 Buck Blvd

Contractor

East Coast Sign

Address

Owner in Fee

Federal Realty

Address

Tele. ()

Lic. No. or Bldrs. Reg. No.

Exp. Date

3/1/98

Tele. ()

Federal Emp. No.

BLOCK

0.00

or Social Security No.

671 #

0.00

is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☒ OTHER Sign

☐ ELECTRICAL ☐ FIRE PROTECTION

☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

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 \$

4000 -

CONSTRUCTION OFFICIAL

U.C.C. Form F-170C

1 WHITE - OFFICE

2 CANARY - TAX ASSESSOR

3 PINK - JACKET

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building 24 - 8 #

Plumbing BUILDING

Electrical PLAN RW

Fire Protection D.C.A.

Other R/R 2 510

Other ZONEPLOT

DCA Training Fee 3 TOTAL

Cert. of Occ. 20 CHECK

Other 20 1 CHANGE

Total 64

Check No. 0912/95 NOV 5 0013A005

Cash

Collected By: JK

24.00

2.00

3.00

20.00

15.00

64.00

64.00

0.00

09:12

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: August 15, 1995

1995 Z 1253

Block 671

Lot 8

Zone B-3, H.D.

Property Address: Brick Plaza

Owner: Federal Realty

(Phone): (215) 657-8740

Applicant: East Coast Sign Co.

(Phone): (215) 781-8500

Use: Brick Plaza Unit

Proposed Construction (if any): Wall sign, 24 square feet.

"Supercuts"

Conditions: _____

Please note that Building Permits, as well as Zoning Permits, must be obtained prior to any construction.

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.


Sean Kinnevy

Land Use Officer

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: August 15, 1995 1995 Z 1253

Block 671 Lot 8 Zone B-3, H.D.

Property Address: Brick Plaza

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Sean Kinnevy
Sean Kinnevy Land Use Officer

TOWNSHIP OF BRICK

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Sean Kinnevy
Sean Kinnevy Land Use Officer

DEPARTMENT OF
Housing & Economic Development
Office of the Construction Official
Michael J. Regan, Construction Official
30 Montgomery Street, 4th Floor, Jersey City, N.J. 07302
(201) 549-5055



BUILDING
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

9/12/95
23/2-95

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 Brick 17429

Owner in Fee Federal Realty
Address 1220 122nd Ave.
W. 115th St. Ave. 19070

Tele. 215-657-6740
Contractor East 5.5N
Address 5058 Rt 13N
615701 PG 19009

Tele. (215) 781-8500
Lic. No. or Bids. Reg. No. 232180296
Federal Emp. No. 232180296 or Social Security No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initials	INSPECTIONS	Dates (Month/Day)
☒ No Plans Req.	<u>6-16-95</u>	<u>[Signature]</u>	☒ Foundation	<u>12-27-95</u>
☐ All			☐ Footing	
☐ Footing			☐ Foundation	
☐ Foundation			☐ Slab	
☐ Frame			☐ Frame	
☐ Other			☐ Insulation	
Joint Plan Review Required:			Finishes:	
☐ Elec. ☐ Plumb. ☐ Fire			Energy	
SUBCODE APPROVAL			Mechanical	
☐ CO ☐ CCO ☐ CA			TCO	
Date: <u>9-13-95</u>			Other	
Approved By: <u>[Signature]</u>			Final	

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed
Constr. Class		
No. of Stories		
Height of Structure		
Area—Largest Floor		
Total Bldg. Area/All Floors		
Volume of Structure		
Total Land Area Disturbed		

Est. Cost of Bldg. Work:

1. New Bldg. \$ 3500
2. Alteration \$ 3500
3. Total (1+2) \$ 7000

C. CERTIFICATION IN LIEU OF OATH

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

Signature

TECHNICAL SITE DATA
DESCRIPTION OF WORK

11
SIGNS

TYPE OF WORK:

☐ New Building	
☐ Addition	
☐ Alteration	
☐ Roofing	
☐ Siding	
☐ Other	
☐ Demolition	
☐ Miscellaneous	
☒ Fence	Height <u>24</u>
☐ Sign	Sq. Ft. <u></u>
☐ Pool	
☐ Elevator	
☐ Asbestos Abatement	
☐ Other	

(Office Use Only)

Paid ☐ Check # <u></u>	Administrative Surcharge \$ <u></u>
Collected by: <u></u>	Minimum Fee \$ <u></u>
	TOTAL FEE \$ <u></u>