BLOCK 673 LOT 8 C19-83 QUALIFICATION CODE _____ ADDRESS (SITE) Brick Mall 3791 Hooper Ave. Store # 208 addition PERMIT NO. 99-1393

RECEIVED
APR 15 1999

CONSTRUCTION PERMIT APPLICATION Shoke Community Loan Office

DIV. OF CONSTRUCTION

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

I. IDENTIFICATION

1. Propsed Work Site at: Brick Mall - 3791 Hooper Ave.
2. Name of Owner in Fee: Pete Tranhavas Tel. (914) 961-8957
   Address 4 Manhattan Ave (street) Rye (municipality) N.Y. 10580 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Richard Zarrilli Tel. (____) 920-0716
   Address 13 Tilton Rd Brick N.J.
   License No. OR, if new home, Builder Reg. No. 02208 Exp. Date 1-00
   Federal Employee No. _____ FAX: (____) _____
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person in Charge of Work Richard Zarrilli
   Tel. (732) 920-0756 FAX (____) _____

Fit up -

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 73		
2. Electrical			
3. Plumbing			
4. Fire Protection	35		
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee	2		
10. Subtotal			
11. Cert. of Occupancy			
12. Other	30		
13. TOTAL	$ 140		

PAID IN FULL

PRELIMINARY APPROVAL

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

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

FINAL APPROVAL

II. PROPOSED WORK

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☐ ~~Alteration~~									
5. ☑ ~~Fire Protection~~					5-4-99	FM	5/27/99		
6. ☐ Plumbing									
7. ☐ ~~Electrical~~					5-4-99	(illegible)	5/28/99		
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8					5/19/99	MM	5/24/99		
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	2500	Elev	4/26/99		4/26/99				

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/ Dumbwalters/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-3) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-3) CABO

No. of dwelling units:
Before Construction
After Construction
Net Gain or Loss

B. NON-RESIDENTIAL

1. State Specific Use: Retail Stores
2. Use Group: Loans Center
3. Change in Use Group, Indicate Former:

COMMERCIAL

LDS BR 10408332

U.C.C. F100-1 (rev 3/96)

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 Richard Zarrilli

Address 13 Telford Rd

Brick NJ 08723

Telephone (732) 920-0716

Signature Richard Zarrilli

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. _____	_____	_____		
☐ Certificate of Approval	No. _____	_____	_____		
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____	_____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 06/01/99
Control #
Permit # 99-1343

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 673 Lot 8 Qual
Work Site Location 2791 HOOPER AVE UNIT 208
TENANT FIT UP
Owner in Fee/Occupant TRANNAUAS, PETE BRICK MALL
Address 4 MANHATTAN AVE
RYE, NY 10580-
Telephone (914)967-8957
Contractor RICHARD ZARRILLI
Address 13 TILTON RD
BRICK, NJ 08723-
Telephone (732)920-0756 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 92-00756

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group B
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

TENANT FIT UP UNIT #208 SHORE COMMUNITY LOAN CENT

[ ] 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.

[X] 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.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE
If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ___ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17
This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

[ ] 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 _____, ___.

J. Cinquanta
CONSTRUCTION OFFICIAL
U.C.C. P260 (rev. 3/96)

Fee $ 0
Paid [X] Check No. 1180
Collected by: CS

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 05/04/99
Control #
Permit # 99-1343

UCC NEW JERSEY

CONSTRUCTION PERMIT

IDENTIFICATION Block 673 Lot 8 Qual

Work Site Location 2791 HOOPER AVE UNIT 208
TENANT FIT UP
Owner in Fee TRANNAUAS, PETE BRICK MALL
Address 4 MANHATTAN AVE
RYE, NY 10580-
Telephone (914)967-8957

Contractor RICHARD TARRILLI
Address 13 TILTON RD
BRICK, NJ 08723-
Telephone (732)920-0756
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 92-00756

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
TENANT FIT UP UNIT #208 SHORE COMMUNITY LOAN CENTER

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 $ 2,525

Construction Official

05/04/99
Date

U.C.C. P170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	73
Electrical	0
Plumbing	0
Fire Protection	35
Elevator Devices	0
Other	
DCA Training Fee	2
Cert. of Occupancy	0
Other ZPEP	30
Total 140 -	~~110~~
Check No.	1180
Cash	
Collected By	CS

Commercial

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 05/13/99
Control #
Permit # 99-1343+A
Permit Issued 05/04/99

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 673 Lot 8 Qual

Work Site Location 2791 HOOPER AVE UNIT 208
ELECTRICAL WORK
Owner in Fee TRANNAUAS, PETE BRICK MALL
Address 4 MANHATTAN AVE
RYE, NY 10580-
Telephone (914)967-8957

Contractor EDWARD LYNCH
Address 1878 GREENWOOD RD
TOMS RIVER, NJ 08753-
Telephone (732)255-3203
Lic. No. or Bldrs. Reg. No. 5159B
Federal Emp. No. 22-2074769

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
UPDATE

PAYMENTS (Office Use Only)

Building	0
Electrical	35
Plumbing	0
Fire Protection	0
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Other	
Total	35
Check No.	1184
Cash	
Collected By	AJP

Estimated Cost of Work $ 600

Construction Official

05/13/99
Date

U.C.C. F190 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 04/20/99
Date Issued 5/14/99
Control # C19-83
Permit # 99-1343

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 Qual
Work Site Location 2791 HOOPER AVE UNIT 208
TENANT FIT UP
Owner in Fee TRANNAUAS, PETE BRICK MALL
Address 4 MANHATTAN AVE
RYE, NY 10580-
Tele.(914)967-8957
Contractor RICHARD TARRILLI
Address 13 TILTON RD
BRICK, NJ 08723-
Tele.(732)920-0736 Fax ( )
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 92-00756

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 UNIT #208 SHORE COMMUNITY LOAN CENTER

See enclosed ok By C.O. Concerning Lack OF Architects Drawing

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Req.		
[X] All	5-4-99	FM
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elect [ ] Plumb [ ] Fire		
SUBCODE APPROVAL [ ] Elev		
[ ] CO [ ] CCO [ ] CA		
Date:		
Approved By:		

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame			5/19/99	JC
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final	5/26/99		5/27/99	
BarrierFree				

B. BUILDING CHARACTERISTICS

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

Industrialized Building:
[ ] State Approved
[ ] HUD

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	73
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
[ ] Other	0
[ ] Demolition	0
Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 0
Collected by: TOTAL FEE	$ 73
DCA Training Fee	$ 2

U.C.C. F110 (rev. 5/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received 05/12/99
Date Issued 05/13/99
Control #
Permit # 99-1343+A

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

Block 673 Lot 6 Qual
Work Site Location 2791 HOOPER AVE UNIT 208
ELECTRICAL WORK
Owner in Fee TRANHAUAS, PETE BRICK MALL
Address 4 MANHATTAN AVE
RYE, NY 10580-
Tele.(732)255-3203 Fax ( )
Contractor EDWARD LYNCH
Address 1878 GREENWOOD RD
TOMS RIVER, NJ 08753-
Tele.(732)255-3203
Lic. No. or Bldrs. Reg. No. 51598
Federal Emp. No. 22-2074769

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed B
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 600

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 5 12 99
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] ~~OA~~
Date: 5-24-99
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough			51999	
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final			5-24-99	

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.

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
3		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
1		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
4		TOTAL NUMBERS	35
0		Pool Permit/With UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

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

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 04/20/99
Date Issued 5 14 199
Control # C19-83
Permit # 99-1343

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

Block 673 Lot 8 Qual
Work Site Location 2791 HOOPER AVE UNIT 208
TENANT FIT UP
Owner in Fee TRANWAGAS, PETE BRICK MALL
Address 4 MANHATTAN AVE
RYE, NY 10580-
Tele.(732)920-0756 Fax ( )
Contractor RICHARD TARRILLI
Address 13 TILTON RD
BRICK, NJ 08723-
Tele.(732)920-0756
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 92-00756

Interior work only

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed B
Constr Class Present Proposed
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location:
Total Est Cost of Fire Prot Work $ 25

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb. [ ] Elevator
[ ] Fire Plans Approved
Date: 5-4-99 KER
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date: 5-28-99
Approved By: KWB

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final	5-25-99		5-28-99	KWB
Other				

C. CERTIFICATION IN LIEU OF OATH

See Back

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 Alarm/Suppr Sys Superv

Storage Tanks		FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid		
[ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System	NUMBER	
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other EXIT LIGHTS		35
Other		0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	35
DCA Training Fee	$	0

Paid [ ] Check #
Collected by:

U.C.C. F:40 (rev. 3/96)

- Need Number to check penetrations above ceiling.

* Check if DCA - NOT REQUIRED. BASED ON Table 6 3 CONSTTYPE

~~FIRE~~ Partition

TOWNSHIP OF BRICK
ZONING PERMIT

Permit Approved: April 20, 1999 No. 1999-0502

Block 673 Lot 8 Zone: B-3, H.D.

Property Address: 2791 Hooper Avenue, Brick Mall

Owner: Peter Trahanas Phone: 914-967-8957

Applicant: Richard Zarrilli Phone: 920-0756

Existing Use: Vacant retail unit, #208

Proposed Use: Shore Community Loan Office

Proposed Construction: Interior alterations for tenant fix up for loan office with conference room and lunch room.

Conditions: Interior work only.

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis 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
Municipal Planner

Sean P. Kinnevy
Zoning Officer

TOWNSHIP OF BRICK

Zoning Permit Application

(Please Type or Print Neatly)

BLOCK 673 2791 LOT 8

PROPERTY ADDRESS ~~Brick Mall Cor.~~ Hooper + ~~Brick Blvd.~~ 087

NAME OF OWNER Pete Tsahanas OWNER'S PHONE (914) 961-8957

NAME OF APPLICANT Richard Zarrilli

APPLICANT'S COMPLETE ADDRESS 13 Tilton Rd Brick NJ 08723

APPLICANT'S PHONE NUMBER (732) 920-0758 APPLICANT'S BUSINESS NAME _____

PRESENT USE OF PROPERTY (check one)

- ☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment
- ☐ Commercial (please describe) Strip Mall #208 (VACANT)
- ☐ Other (please describe) _____

PROPOSED USE OF PROPERTY (check one)

- ☐ Vacant Lot ☐ Single Family Dwelling ☐ Condo or Apartment
- ☐ Commercial (please describe) Tenant Fit-up Loan Office
- ☐ Other (please describe) _____

PROPOSED CONSTRUCTION Party wall for Conference Room + Lunch

All Dimensions _____ W _____ L _____ Ht

Deck or Garage ☐ Attached ☐ Detached

Fence Type _____ Ht _____

CHECKLIST:

- ☐ All information completed above
- ☐ Two (2) accurate Survey / Plot Plans containing:
  - ☐ all existing and proposed structures
  - ☐ all dimensions of lot and structures
  - ☐ set backs to all property lines
  - ☐ all streets and waterways shown
- ☐ If approved by Planning Board or Board of Adjustments, include copy of resolution

COMMERCIAL

The applicant certifies that all statements and information made and provided as part of this application a 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 Federa Regulations.

Signature of Applicant Richard Zarrilli Date 4-12-99

Reviewed by Zoning Officer Date 4/20/99 ☒ Approved ☐ Rejected

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

April 27, 1999

Mr. Richard Zarrilli
13 Tilton Road
Brick, NJ 08723

RE: Mandatory Development Fee
Block 673, Lot 8~ Brick Mall Tenant Fit-up

Dear Mr. Zarrilli:

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 amount ofone 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 15, 1999, for the above block and lot at $4,000.00, resulting in an estimated fee of $40.00.

Therefore, you are required to submit one half of the estimated fee ($20.00) in the form of a check made payable to the Township of Brick for deposit into the Affordable Housing Trust Fund. Upon your request for a final Certificate of Occupancy/Approval, your permit application will again be processed. If the assessed value is adjusted at that time, the balance due on your account will be adjusted accordingly. All remaining fees will 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. so as 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 (da)

Carol A. Wolfe
Affordable Housing Administrator

CAW/da

MandDevCommLtr2/99

OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 673 LOT 8 SITE ADDRESS Brick Mall
TYPE OF SITE Residential / Commercial TYPE OF BUSINESS Retail

APPLICANT Richard Zamecnik PHONE NUMBER 732-0756
APPLICANT ADDRESS 15 Tennyson Rd CITY & STATE Brick NJ
PERMIT # 619-699 NAME OF BUSINESS Brick Community Lanes

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 %

◊ Commercial is .01 %

Estimated Assessment $ 41,000.00 Date 4-27-99

Estimated Required Fee $ 410.00

Required Deposit on Estimate $ 30.00 Date 4-27-99

Check # 1199 Receipt # 5109

Actual Assessment $ _____ Date _____

Actual Required Fee $ _____

Minus Deposit of Estimate $ _____

Balance Due $ _____ Date _____

Check # _____ Receipt # _____

Amount Paid In Full $ _____

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

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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

Department of Administration & Finance

Division of Inspections
Joseph Curiazza
Construction Official
(732) 262-1030
Fax (732) 262-8954
http://www.gbshost.com/brick
http://www.twp.brick.nj.us

COMMERCIAL

Date: 4-21-99

Municipal Engineer
401 Chambers Bridge Rd
Brick, N.J. 08723

RE: Block: 673 Lot: 8

I, Pete Trahanas (name) of 4 Manhattan Dr - Rye N.Y. (address)

CONTRACTOR Richard Zarucci

request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book, Chapter 190-31, part B. The property (please circle one) is / is not located in a flood zone.

Respectfully yours,

Richard Zarucci
applicant's signature

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.

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

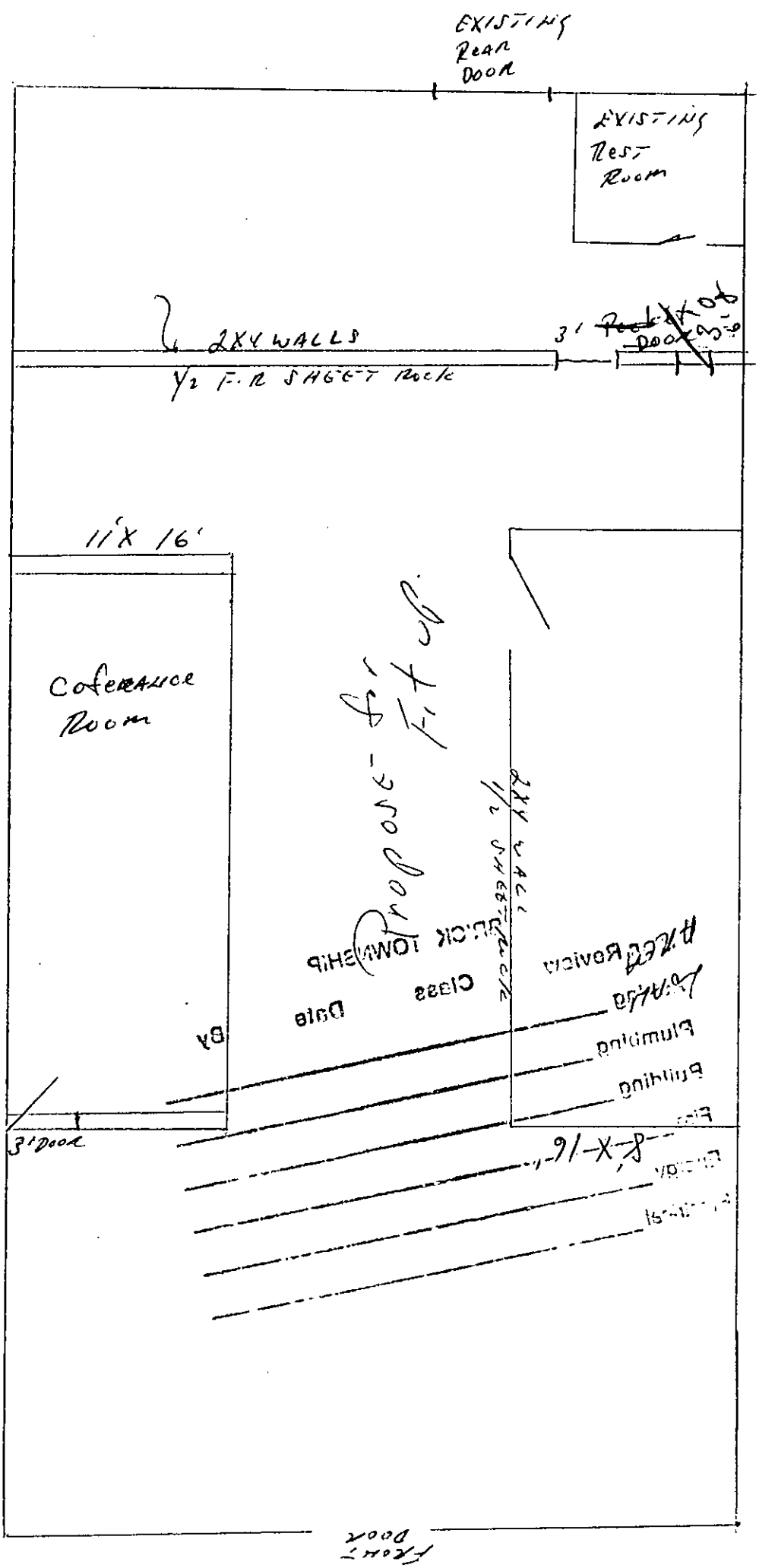
Note: Any excavations to be removed from the Township requires a mining permit.

OFFICE USE

Approved X Date: 4/26/99 By: [signature]

Rejected Date: _____ By: _____

Remarks: Interior Only & No Site Work!


EXISTING
REAR
DOOR
EXISTING
REST
ROOM
2X4 WALLS
1/2 F.R SHEET ROCK
3' DOOR
11' X 16'
COFFEE ROOM
3' DOOR

BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Plumbing			
Building		5-4-99	FM
Fire			
Energy			
Electrical			

TOWNSHIP OF BRICK

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

Department of Administration & Finance

Division of Inspections
Joseph Curiazza
Construction Official
(732) 262-1030
Fax (732) 262-8954
http://www.gbshost.com/brick
http://www.twp.brick.nj.us

Shore Community Bank

U N I F O R M C O N S T R U C T I O N C O D E

Construction Permits Application
5:23-2.15(e) (viii) (1x)

Owner/Agent: Richard Zannicci
Address: Blk 67J- Lot 8 Brick Mall # 208

Town: Brick Zip: NJ

Block: 67J- Lot: 8

[X] Waive architecturals for commercial interior work

[ ] Other _____

OWNER/AGENT PROCEED AT OWN RISK [X]

Signature:

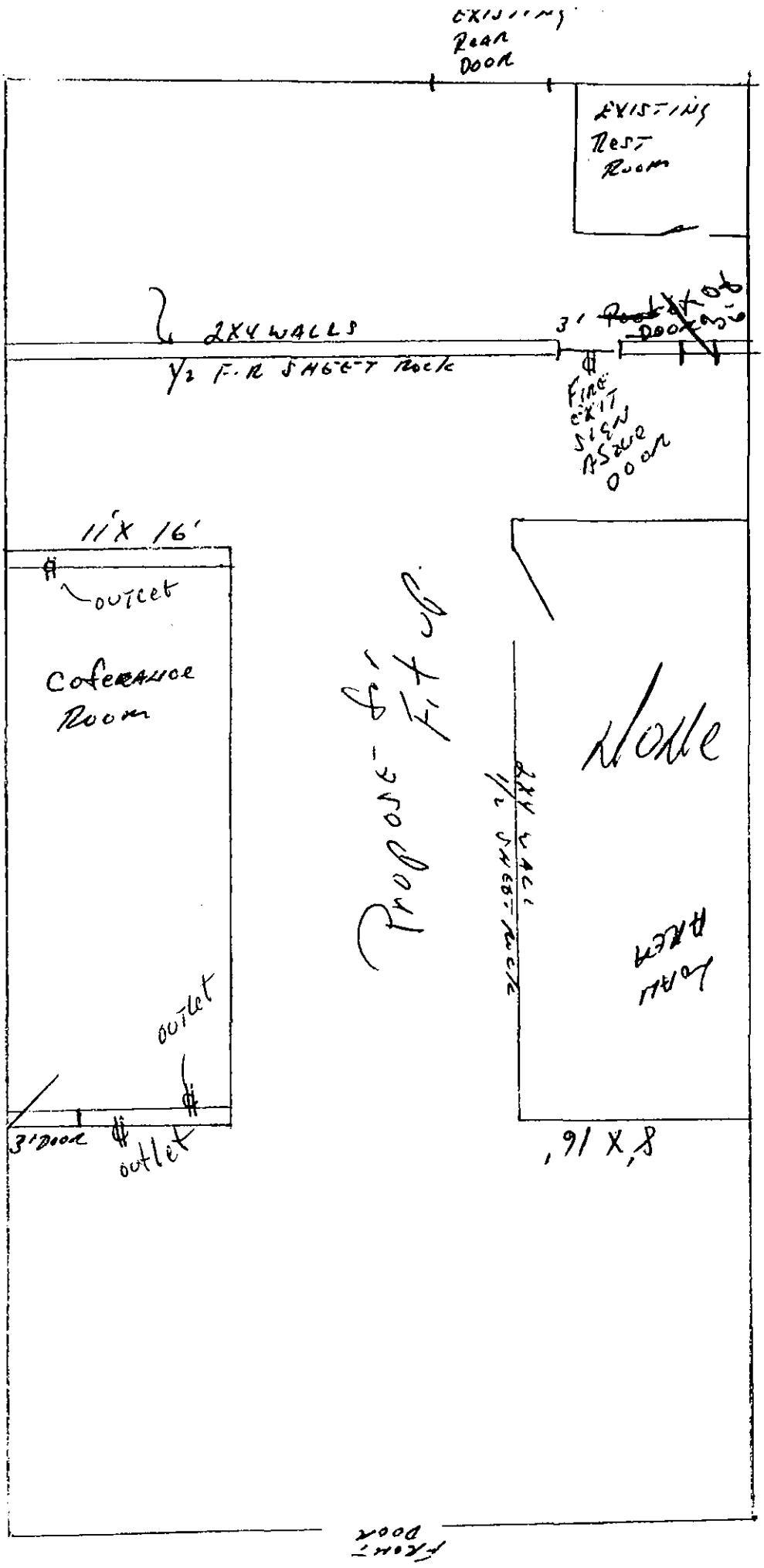
Owner/Agent: Richard Zannicci

Building Sub-code Official: Frank Mizer for J/C

Frank Mizer

Construction Official: J Curiazza

Joseph Curiazza



OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE

BLOCK 673 LOT 8 SITE ADDRESS Brick Mall
TYPE OF SITE Residential / (Commercial) TYPE OF BUSINESS Fit-up

APPLICANT Richard Zarrilli PHONE NUMBER 920-0756
APPLICANT ADDRESS 13 Tiltan Rd CITY & STATE Brick NJ
PERMIT # C19-83 NAME OF BUSINESS Shore Community Law Off.

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 $ 4000.00 Date 4.27.99
Estimated Required Fee $ 40 00
Required Deposit on Estimate $ 20 00 Date 4-29-99
Check # 1179 Receipt # 8109
Actual Assessment $ 4000.00 Date 5.25.99
Actual Required Fee $ 40 00
Minus Deposit of Estimate $ 20.00
Balance Due $ 20.00 Date 5 28.99
Check # 1199 Receipt # 8159
Amount Paid In Full $ 40 00

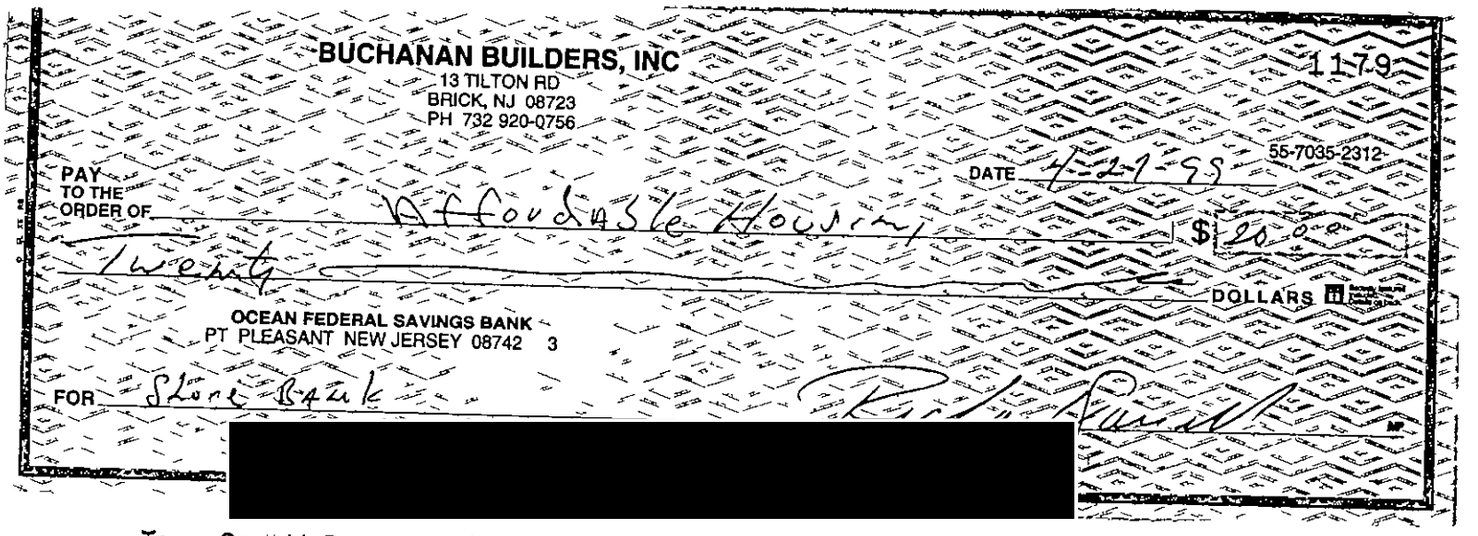
Fees Imposed To Date _____
Fees Reached $15,000 _____ Date

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



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

Date 4-29 99

Business/Development Shore Community Loan Office

Owner/Applicant Buchanan Builders, Inc.

Property Address Brick Mall

Block 673 Lot 8

DEPOSIT RECEIVED

Mandatory Development Fee
(Commercial)
Residential

Inclusionary Development Fee

Check Number 1179

Estimated Fee $ 40 00

Deposit Amount $ 20 00

FINAL PAYMENT PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY

Mandatory Development Fee
~~(Commercial)~~
Residential

Inclusionary Development Fee

Check Number ~~1179~~

Final Fee $

Less Deposit $

Final Payment $

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

Signature

4-29-99
Date

COUNTER FORM
PLEASE PRINT

Shore Community Library Office
unit # 208

WNSHIP OF BRICK
Chambers Bridge Road
k, New Jersey 08723
732-262-1027

Site Location: Brick MALL - Date Rec'd.:
Block: 673 Lot: 8 Date Issued:
Owner in Fee: Pete TRAHANAS Control #:
Address: 4 MANHATTAN AVE - Permit #:
Rye, NY
State: Zip: Phone: ( )
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

ONTRACTOR:
DDRESS:
HONE:
C #:
C. EXPIRATION DATE:
EDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

stimated Cost of Plumbing Work: $
gnature:

wner ☐ Contractor ☐
BCODE APPROVAL:
ANS: Required ☐ Approved ☐
proved by:
te:
ONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR: RICHARD ZARRILLI
ADDRESS: 13 Tilton Rd
Brick NJ 08723
PHONE: 920-0726
LIC #: 02208
LIC. EXPIRATION DATE: 1-00
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Fit up loan office

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More)
☒ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories:
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature: Richard Zarrilli

Estimated Cost of Building Work: 2500.00
New Building (1): $
Aleration (2): $
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐

Approved by:

Date:

COUNTER FORM
PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. #: (or S.S. #):

TECHNICAL DATA (LIST ALL FIXTURES)

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

Estimated Cost of Electrical Work: $
Signature (print name):
Estimated Cost of Electrical Work: $
Signature (print name):
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE SUBCODE

CONTRACTOR:
ADDRESS: Richard Farella

PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WOR

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

Water Supply Source	
Method of Valve Supervision	
Local Alarm Supervision	
Central Supervsion	
Proprietary Supervision	
Flammable Liquip Storage Tanks	Capacity: Fue
Combustable Liquid Storage Tanks	Capacity: Fue
L.G.P. Storage Tanks	Capacity: Fue

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust Systems	
Pre-Engineered Systems	
Co2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance	
Other	
Other	

1 existing emergency exit lights

Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

EXISTING ROOM
EXISTING BATH Rm.
EXISTING
G/ASS FRONT
3'-0"
FRONT DOOR
G/ASS FRONT
20' X 40'

BRICK TOWNSHIP

	Class	Date	By
Plan Review			
Zoning			
Plumbing			
Building		5-4-99	KM
Fire			
Energy			
Electrical		5 11 99	VV

99-1848
Brick Mall

1199

BUCHANAN BUILDERS, INC.
13 TILTON RD.
BRICK, NJ 08723
PH. 732-920-0756

55-7035-2312

DATE 5-28-98

PAY TO THE ORDER OF Affordable Housing $ 20.00

Twenty DOLLARS

OCEAN FEDERAL SAVINGS BANK
PT. PLEASANT, NEW JERSEY 08742 3

FOR [redacted]

Richard James

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

Date: 5-28-98

Business/Development: Shore Community Loan Office

Owner/Applicant: Buchanan Builders, Inc.

Property Address: Brick Mall

Block: 673 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 1199

Final Fee $ 40.00

Less Deposit $ 20.00

Final Payment $ 20.00

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:

Signature

5/28/98
Date

Shop Community Loan

COUNTER FORM
PLEASE PRINT

Update Electric

Store #208

99-1343

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723
Tel: 732-262-1027

Office

RECEIVED

MAY 06 1999

DIV. OF INSPECTION

Site Location: Brick mall — Date Rec'd:
Block: 613 Lot: 8 — Date Issued:
Owner in Fee: — Control #:
Address: — Permit #: 99-1343

State: Zip: Phone: ( )
SS #: Provide only if Applicant is owner

PLUMBING SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA (LIST ALL FIXTURES)

NO.	FIXTURE/EQUIPMENT
	Water Closet
	Urinal / Bidet
	Bath Tub
	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
	Gas Piping
	Fuel Oil Piping
	Water Heater
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor / Separator
	Backflow Preventer
	Greasetrap
	Water Cooled AC or Refrig. Unit
	Sewer Connection
	Septic (Disposal System) Closure
	Water Service Connection
	Gas Service Connection
	Active Solar System
	Vent Through Roof
	Other

Estimated Cost of Plumbing Work: $
Signature:

Owner ☐ Contractor ☐
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:
CONTRACTOR AFFIX SEAL:

BUILDING SUBCODE

CONTRACTOR:
ADDRESS:

PHONE:
LIC #:
LIC. EXPIRATION DATE:
FEDERAL EMP. # (or S.S. #):

TECHNICAL SITE DATA

DESCRIPTION OF WORK:

TYPE OF WORK

☐ New Building
☐ Addition ☐ Fence: Height (6' or More)
☐ Alteration ☐ Sign: Sq. Ft.
☐ Roofing ☐ Pool (In Ground)
☐ Siding ☐ Pool (Above Ground)
☐ Other: ☐ Asbestos Abatement
☐ Other: ☐ Demolition

BUILDING CHARACTERISTICS

USE GROUP Present: Proposed:
CONSTR. CLASS Present: Proposed:
No. of Stories:
Height of Structure:
Area - Largest Floor:
New Building Area / All Floors:
Volume of Structure: Total Land Disturbed:
Signature:

Estimated Cost of Building Work:
New Building (1): $
Alteration (2): $
TOTAL (1+2): $
SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

COUNTER FORM
PLEASE PRINT

ELECTRICAL SUBCODE

CONTRACTOR: Edward M Lynch
ADDRESS: 1878 Greenwood Rd
Toms River NJ
PHONE: 255-3203
LIC. #: 51593 EXP. DATE:
FEDERAL EMPL. #: (or S.S. #): 222074769

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles	3	
Switches		
Detectors		
Light Poles		
Motors - Fract. HP		
Emergency & Exit Lights	1	
Communications Points		
Alarm Devices/F.A.C. Panel		
TOTAL NUMBERS	4	
Pool Permit w/UW Lights		
Storable Pool/Spa/Hot Tub		
KW Elec. Range / Receptacle	KW	
KW Oven / Surface Unit	KW	
KW Elec. Water Heater	KW	
KW Elec. Dryer / Receptacle	KW	
KW Dishwasher	KW	
HP Garbage Disposal	HP	
KW Central A/C Unit	KW	
HP/KW Space Heater/Air Handler	HP/KW	
KW Baseboard Heat	KW	
HP Motors 1/+ HP	HP	
KW Transformer/Generator	KW	
AMP Service	AMP	
AMP Subpanels	AMP	
AMP Motor Control Center	AMP	
AMP Elec. Sign/Outline Light	KW	
Other		
Other		
Other		
Other		

Estimated Cost of Electrical Work: $
Signature (print name): Edward M Lynch
Estimated Cost of Electrical Work: $ 600.00
Signature (print name): Edward M Lynch
Owner ☐ Contractor ☐

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date:

CONTRACTOR AFFIX SEAL:

FIRE PROTECTION SUBCODE

CONTRACTOR:
ADDRESS:
PHONE:
LIC. #: EXP. DATE:
FEDERAL EMPL. # (or S.S. #):

TECHNICAL DATA (DESCRIPTION OF WORK)

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
Heating Sys: ☐ New ☐ Existing
Location of Furnace / Boiler

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

Flammable Liquip Storage Tanks Capacity: Fuel:
Combustable Liquid Storage Tanks Capacity: Fuel:
L.G.P. Storage Tanks Capacity: Fuel:

DESCRIPTION	NUMBER
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	
Smoke Detectors	
Heat Detectors	
Total	
Stand Pipes	
Kitchen Hood Exhaust Systems	
Pre-Engineered Systems	
Co2 Suppression	
Halon Suppression	
Foam Suppression	
Dry Chemical	
Wet Chemical	
Gas or Oil Fired Appliance	
Other	
Other:	

Estimated Cost of Fire Protection Work: $
Signature:
Owner ☐ Contractor ☐

SUBCODE APPROVAL:
PLANS: Required ☐ Approved ☐
Approved by:
Date: