

BLOCK 693 LOT 8 QUALIFICATION CODE C10-738 ADDRESS (SITE) PERMIT NO. 99-3256



CONSTRUCTION PERMIT APPLICATION

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

ZNA

I. IDENTIFICATION

1. Proposed Work Site at: Brick mall building "B" store #5 Bricktown.
2. Name of Owner in Fee: Dante Tuxedo Tel. (908) 486-2829
- Address _____
3. Ownership in Fee: ☒ Public ☒ Private
4. Principal Contractor: _____ Tel. (_____)
- Address _____
- License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
- Federal Employee No. _____ FAX: (_____)
5. Architect or Engineer _____ Tel. (_____)
- Address _____
6. Responsible Person in Charge of Work _____
- Tel. (_____) FAX (_____)

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>35</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection	<u>35</u> ✓		
5. Elevator Devices			
6. Subtotal	\$ _____		
7. Less 20% for State Plan Review			
8. Subtotal	\$ _____		
9. OCA Training Fee			
10. Subtotal	\$ _____		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>70</u>		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories _____
2. Height of Structure _____
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 ☐ no
11. Max. Live Load _____
12. Max. Occupancy Load _____

II. PROPOSED WORK

1. ☐ Minor Work
2. ☐ New Building
3. ☐ Addition
4. ☐ Alteration
5. ☐ Fire Protection
6. ☐ Plumbing
7. ☐ Electrical
8. ☐ Elevator Devices
9. ☐ Asbestos Abat. Subch. 8
10. ☐ Lead Hazard Abatement
11. ☐ Demolition

TOTAL COSTS

Est. Cost

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>as</u>	<u>8/4/99</u>		<u>8/24/99</u>	<u>EM</u>			
			<u>8/30/99</u>	<u>EM</u>			
<u>EMC</u>	<u>8/11/99</u>		<u>EMC</u>	<u>EMC</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: B

3. Change in Use Group, Indicate Former: _____

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 Michael D. Ant 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 Dante Tuxedo

Address _____

Telephone (_____) _____

Signature Mike D. Ant

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

0010
3256**

BLOCK	0.00
LOT	0.00
BUILDING	35.00
FIRE	35.00
TOTAL	70.00
CHECK	70.00
CHANGE	0.00

08/26/99 NO. 5 0022A005 11:04

Date Issued 08/26/99
Control #
Permit # 99-3256

IDENTIFICATION Block 673 Lot 8 Qual

Work Site Location 27961 HOOPER AVE BLDG B UNIT 5

TENANT FIT UP

Owner in Fee DANTE TUXEDOS BRICK MALL

Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Telephone (908)486-2829

Contractor DANTE
Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Telephone (908)486-2829

Lic. No. on Bldgs. Reg. No.

Federal Emp. No.

I hereby granted permission to perform the following work:

- ☒ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☒ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

TENANT FIT UP - FROM CLOTHING STORE TO TUXEDO RENTALS & SALES
COSMETIC TYPE WORK - PAINT, CARPET, MIRRORS

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 \$ 750

Construction Official

08/26/99
Date

U.C.C. #170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building	35
Electrical	0
Plumbing	0
Fire Protection	35
Elevator Devices	0
Other	
DCA Training Fee	0
Cert. of Occupancy	0
Total	70
Check No.	6081
Cash	
Collected By	LRT

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/09/99
Date Issued 8/12/99
Control # C10-738
Permit # 99-3250

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION
CONTRACTORS. NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-2-11000

Block 673 Lot 8 Qual
Work Site Location 27964 HOOPER AVE BLDG B UNIT 5

TENANT FIT UP

Owner in Fee DANTE TUXEDOS BRICK MALL

Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Tele.(908)486-2829 Fax ()

Contractor DANTE

Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Tele.(908)486-2829

Lic. No. or Bldgs. Reg. No.

Federal Emp. No.

COMMERCIAL

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 \$ 250

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Plumb [] Elevator

[] Fire Plans Approved

Date: 8/5/99

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CCO

Date: 8/30/99

Approved By: [Signature]

INSPECTIONS

Type

Alarm Sys

Suppr Test

Standpipe

Fire Pump

Prengng Sys

Mechanical

Smoke Ctl

TCO

Final

Other

Dates (Month/Day)

Failure Failure Approval Initial

TECHNICAL SITE DATA

Description of Work:

Water Supply Source

Method of Alarm/Suppr Sys Superv

Storage Tanks

Type: [] Flammable Liquid [] Combust Liquid

[] LPG [] LNG Capacity 0 Fuel

Alarm Systems [] 110V Interconnected NUMBER

[] System

Alarm Devices(smoke,heat,pulls,water/flow)

Supervisory Devices (tamper,low/high air)

Signalling Devices (horn/strobes, bells)

Other Devices

TOTAL

Suppression Systems

Fire Pump 0 GPM Type

Dry Pipe/Alarm Valves

Pre-action Valves

Sprinkler Heads (Dry and Wet)

Standpipes

Pre-Engineered Systems

Wet Chemical

Dry Chemical

CO2 Suppression

Foam Suppression

Halon Suppression

Other

Kitchen Hood Exhaust System

Smoke Control System

Gas [] or Oil [] Fired Appliances

Other EXIT SIGN/PLAST

Other

FEE (Office Use Only)

Administrative Surcharge \$ 0

Paid [] Check # Minimum Fee \$ 0

Collected by: TOTAL FEE \$ 35

DCA Training Fee \$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/09/99
Date Issued 8/12/99
Control # C10-738
Permit # 99-3250

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 27961 HOOVER AVE BLDG B UNIT 5

TENANT FIT UP

Owner in Fee DANTE TUXEDOS BRICK MALL

Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Tele. (908) 486-2829 Fax ()

Contractor DANTE

Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Tele. (908) 486-2829

Lic. No. or Bldgs. Reg. No.

Federal Emp. No.

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: Fire Alarm System

Total Est Cost of Fire Prot Work \$ 250

JOB SUMMARY (Office Use Only)

PLAN REVIEW

Joint Plan Review Required: [] No Plans Required

INSPECTIONS

Alarm Sys

Suppr Test

Standpipe

Fire Pump

PreEng Sys

Mechanical

Smoke Ctl

TCO

Final

Other

Approved By: [Signature]

DATE: [Signature]

Approved By: [Signature]

D. TECHNICAL SITE DATA

Description of Work:

Water Supply Source

Method of Alarm/Suppr Sys Superv

Storage Tanks

Type: [] Flammable Liquid [] Combust Liquid

[] LPG [] LNG Capacity 0 Fuel

Alarm Systems [] 110V Interconnected

[] System

Alarm Devices (Smoke, heat, pull, water/flow)

Supervisory Devices (tamper, low/high air)

Stigmating Devices (horns, strobes, bells)

Other Devices

TOTAL

Suppression Systems

Fire Pump 0 GPM Type

Dry Pipe/Alarm Valves

Pre-action Valves

Sprinkler Heads (Dry and Wet)

Standpipes

Pre-Engineered Systems

Wet Chemical

Dry Chemical

CO2 Suppression

Foam Suppression

Halon Suppression

Other

Kitchen Hood Exhaust System

Smoke Control System

Gas [] or Oil [] Fired Appliances

Other EXIT SIGN/PLAST

Other

Administrative Surcharge

Paid [] Check #

Minimum Fee

Collected by: TOTAL FEE

DCA Training Fee

FEE (Office Use Only)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 08/09/99
Date Issued 8/13/09
Control # C10-738
Permit # 96-3250

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 27361 HOOVER AVE BLDG B UNIT 5

TEENANT FIT UP

Owner in Fee DANIE TUXEDOS BRICK MALL

Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Tele. (908) 486-2829 Fax ()

Contractor DANIE

Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Tele. (908) 486-2829

Lic. No. or Bldg. Reg. No.

Federal Emp. No.

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 \$ 250

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Plumb [] Elevator

[] Fire Plans Approved

Date: 8/5/99

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date:

Approved By:

INSPECTIONS

Type

Alarm Sys

Suppr Test

Standpipe

Fire Pump

PreEng Sys

Mechanical

Smoke Ctl

TCO

Final

Other

Dates (Month/Day)

Failure Failure Approval Initial

D. TECHNICAL SITE DATA

Description of Work:

Water Supply Source

Method of Alarm/Suppr Sys Superv

Storage Tanks

Type: [] Flammable Liquid [] Combust Liquid

[] LPG [] LNG Capacity 0 Fuel

Alarm Systems [] 110V Interconnected NUMBER

[] System

Alarm Devices (Smoke, heat, pulls, water/flow) 0

Supervisory Devices (tamper, low/high air) 0

Signalling Devices (horn/strobes, bells) 0

Other Devices 0

TOTAL 0

Suppression Systems

Fire Pump 0 GPM Type

Dry Pipe/Alarm Valves 0

Pre-action Valves 0

Sprinkler Heads (Dry and Wet) 0

Standpipes 0

Pre-Engineered Systems

Wet Chemical 0

Dry Chemical 0

CO2 Suppression 0

Foam Suppression 0

Halon Suppression 0

Other 0

Kitchen Hood Exhaust System

Smoke Control System

Gas [] or Oil [] Fired Appliances

Other EXIT SIGN/PLAST

Other

FEE (Office Use Only)

Administrative Surcharge \$ 0

Minimum Fee \$ 0

TOTAL FEE \$ 35

DCA Training Fee \$ 0

Signature

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/09/99
Date Issued 8/20/99
Control # C10-738
Permit # 99-3254

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 27961 HOOVER AVE BLDG B UNIT 5

TENANT FIT UP

Owner in Fee DANTE TUXEDOS BRICK MALL

Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Tele. (908) 486-2829

Contractor DANTE

Address 241 W ST GEORGE AVE

LINDEN, NJ 07036-

Tele. (908) 486-2829 Fax ()

Lic. No. of Bldrs. Reg. No.

Federal Emp. No.

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plans Req.

☒ All

☐ Footing

☐ Foundation

☐ Frame

☐ Other

Joint Plan Review Required:

☐ Elect ☐ Plumb ☐ Fire

SUBCODE APPROVAL ☐ Elev

☐ CO ☐ CCO ☐ CA

Date:

Approved By:

INSPECTIONS

Failure Failure Approval Initial

Type

Footing

Foundation

Slab

Frame

Barrierfree

Insulation

Finishes

Energy

Mechanical

TCO

Other

Final

Barrierfree

Dates (Month/Day)

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

Initial

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 \$ 500
3. Total (1+2) \$ 500
Industrialized Building:
[] State Approved
[] HUD
Paid [] Check \$
Collected by: Administrative Surcharge \$
Minimum Fee \$
TOTAL FEE \$
DCA Training Fee \$
U.C.C. F110 (rev. 3/96)

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 - FROM CLOTHING STORE TO TUXEDO RENTALS & SALES
COSMETIC TYPE WORK - PAINT, CARPET, MIRRORS

SEE NOTES ON DRAWING REGARDING ADA
REQUIREMENTS FOR FITTING ROOMS

TYPE OF WORK

☐ New Building

☐ Addition

☒ Alteration

☐ Roofing

☐ Siding

☐ Fence 0 Height (exceeds 6')

☐ Sign 0 Sq. Ft.

☐ Pool

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☐ Other

☐ Other

☐ Demolition

FEE (Office Use Only)

\$ 0

\$ 0

\$ 18

\$ 0

\$ 0

\$ 0

\$ 0

\$ 0

\$ 0

\$ 0

\$ 0

\$ 0

\$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/09/99
Date Issued 8/20/99
Control # 910-738
Permit # 99-3250

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 Qua1
Work Site Location 27961 HOOPER AVE BLDG B UNIT 5

TENANT FIT UP

Owner in Fee DANTE TUXEDOS BRICK MALL
Address 241 W ST GEORGE AVE
LINDEN, NJ 07036-
Tel: (908) 486-2829
Contractor DANTE
Address 241 W ST GEORGE AVE
LINDEN, NJ 07036-
Tel: (908) 486-2829 Fax ()
Lic. No. of Bldgs. Reg. No.
Federal Emp. No.

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 - FROM CLOTHING STORE TO TUXEDO RENTALS & SALES
COSMETIC TYPE WORK - PAINT, CARPET, MIRRORS

SEE NOTES ON DRAWING REGARDING ADA
REQUIREMENTS FOR FITTING ROOMS

JOB SUMMARY (Office Use Only)
PLAN REVIEW Date Initial

☒ No Plans Req. 6-24-99 EM

☐ All
☐ 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	Approval
Footing			
Foundation			
Slab			
Frame			
Barrierfree			
Insulation			
Finishes			
Energy			
Mechanical			
TCO			
Other			
Final			
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 \$ 500
3. Total (1+2) \$ 500

Industrialized Building:
☐ State Approved
☐ HUD

TYPE OF WORK
☐ New Building
☐ Addition
☒ Alteration

	FEE (Office Use Only)
☐ New Building	0
☐ Addition	0
☒ Alteration	18
☐ Roofing	0
☐ Siding	0
☐ Fence	0
☐ Sign	0
☐ Pool	0
☐ Asbestos Abatement Subchapter 3	0
☐ Lead Haz. Abatement NJAC 5:17	0
☐ Other	0
☐ Demolition	0

Administrative Surcharge \$ 0
Minimum Fee \$ 17
TOTAL FEE \$ 35
DCA Training Fee \$ 0

BRICK MALL

28'

Mirror



work counter

work counter

meat stock

Ratalls



window

20'

EXIT

window

3'

6'

show case

sale sorts

vests

shoes

mirror

mirror

mirror

DR 5'x4'

DR 5'x4'

Note: Bath ADA
fitting ADA
must meet handicapped
Am

Fire extinguisher

EXIT

5'x4'

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

105 yds

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

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



Joseph C. Scarpelli, Mayor

Township Council:

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

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>

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: Dante Tuxedo / Mike D'Amato.

Property Address: 2796 Hooper Ave.

Town: Brick town. Zip: _____

Block: 673 Lot: 8



Waive architecturals for commercial interior work



Other _____

OWNER/AGENT PROCEED AT OWN RISK ☐

Signature: Mike D'Amato

Owner/Agent: Dante Tuxedo / Mike D'Amato

Building Sub-code Official: _____

Frank Mizer

Construction Official: _____

Joseph Curiazza

(e) Plans, plan review, plan approval:

1. Plans and specifications: The application for the permit shall be accompanied by no fewer than two copies of specifications and of plans drawn to scale, with sufficient clarity and detail dimensions to show the nature and character of the work to be performed. Plans submitted shall only be required to show such detail and include such information as shall be reasonably necessary to assure compliance with the requirements of the code and these regulations. When quality of materials is essential for conformity to the regulations, specific information shall be given to establish such quality; and this code shall not be cited, or the term "legal" or its equivalent be used, as a substitute for specific information.

i. Site diagram: There shall also be filed a site plan showing to scale the size and location of all the new construction and all existing structures on the site, distances from lot lines and the established street grades; accessible route(s) for buildings required by N.J.A.C. 5:23-7.1 to be accessible; and it shall be drawn in accordance with an accurate boundary line survey. In the case of demolition, the site plan shall show all construction to be demolished and the location and size of all existing structures and construction that are to remain on the site or plot.

ii. Building plans and specifications shall contain: Foundation, floor, roof and structural plans; door, window and finish schedules; sections, details, connections and material designations.

iii. Electrical plans and specifications shall contain: Floor and ceiling plans; lighting, receptacles, motors and equipment; service entry location, line diagram and wire, conduit and breaker sizes.

iv. Plumbing plans and specifications shall contain: Floor plan; fixtures, pipe sizes and other equipment and materials; isometric with pipe sizes, fixture schedule and sewage disposal.

v. Mechanical plans and specifications shall contain: Floor or ceiling plans; equipment, distribution location, size and flow; location of dampers and safeguards; and all materials.

vi. Engineering details and specifications: The construction official and appropriate subcode official may require adequate details of structural, mechanical, plumbing and electrical work, including computations, stress diagrams and other essential technical data to be filed. All engineering plans and computations shall bear the seal and signature of the licensed engineer or registered architect responsible for the design. Plans for buildings shall indicate how required structural and fire-resistance rating will be maintained for penetrations made for electrical, mechanical, plumbing and communication conduits, pipes and systems.

(1) Plumbing plans for class III structures may be prepared by persons licensed pursuant to "The Mas-

ter Plumber Licensing Act", N.J.S.A. 45:14C-1 et seq. Electrical plans for class III structures may be prepared by persons licensed pursuant to "The Electrical Contractors Licensing Act", N.J.S.A. 45:5A-1 et seq.;

(2) Whenever the licensing board pursuant to either of the above Acts shall provide for a seal evidencing that the holder is licensed, such shall be acceptable to the enforcing agency in lieu of affidavit;

(3) Mechanical plans for class III structures may be prepared by mechanical contractors.

vii. Work area: For reconstruction work in an existing structure, the work area shall be clearly delineated on the plans.

viii. Architect's or engineer's seal: The seal and signature of the registered architect or licensed engineer who prepared the plans shall be affixed to each sheet of each copy of the plans submitted and on the first or title sheet of the specifications and any additional supportive information submitted. The construction official shall waive the requirement for sealed plans in the case of a single family home owner who had prepared his own plans for the construction, alteration or repair of a structure used or intended to be used exclusively as his private residence, and to be constructed by himself, providing that the owner shall submit an affidavit attesting to the fact that he has prepared the plans and provided further that said plans are in the opinion of the construction official, and appropriate subcode official, legible and complete for purposes of ensuring compliance with the regulations.

ix. The construction official upon the advice of the appropriate subcode official may waive the requirement for plans when the work is of a minor nature.

x. Building, electrical, plumbing and mechanical work required to be shown may be shown on a single set of plans or a single drawing so long as the drawings are clear and legible.

2. Examination of plans: All plans submitted and any amendments thereto accompanied by the required documentation and application, and upon payment of the fee established by the enforcing agency, shall be numbered, docketed and examined promptly after their submission for compliance with the provisions of the regulations.

3. Plan review:

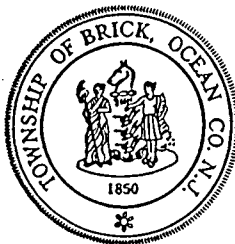
i. Department or other State agency review: When a review and release of plans by the Department or other State agency designated by the Department pursuant to N.J.A.C. 5:23-3 is required, the owner or agent of the owner shall file an application for construction plan release for each project, along with three sets of plans, specifications and such other supporting information as the Department or other designated reviewing agency may require on forms obtained from the Department or such reviewing agency. The plans, specifications and other supporting information shall conform to the requirements of (e) above.

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

Joseph C. Scarpelli, Mayor

Township Council:

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



Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
<http://www.gbshost.com/brick>
<http://www.twp.brick.nj.us>

Date: 8/9/99

Township Engineer
401 Chambers Bridge Road
Brick, NJ 08723

RE: Block: 673 Lot: 8

Property Address: 2796 Houser Ave.

I, Michael D'Amato of 241 W. St George Ave.
(name) (address)

Request to be exempted from the plot plan requirement for an addition as outlined in the Brick Land Use Book, Chapter 190.31, part B.

Michael D'Amato
Applicant's Signature

The following shall be submitted with this request:

1. Submit survey locating existing dwelling and proposed addition. Dimensions of 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.

OFFICE USE

Approved: 8/11/99

Signed: [Signature]

Rejected: _____

Signed: _____

Comments: _____

COMMERCIAL

Dante Tuxedos.

2796 Hooper Ave.

Block ~~673~~ 673

lot 8.

3 display platforms. → ② 1' high.

materials used

6' long.

1 - 2" x 4"s

3' wide.

2 - sheet rock.

① 2' high

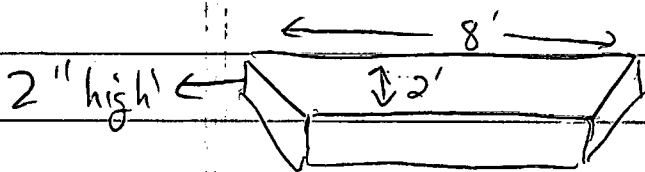
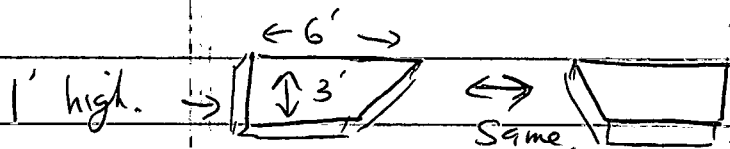
8' long.

by

the

2'

wide.



BRICK TOWNSHIP

Plan Review	Class	Date	By
Zoning			
Planning			
Building			
Health			
Fire			
Police			
Public Works			
Other			

B673
L-8 -

205 Brick Mall

LEASE

THIS AGREEMENT, made as of the 20 day of May, 1999,

between:

PETER TRAHANAS AND FREDERICKA TRAHANAS
of 4 Manhattan Avenue, Rye, New York, 10580, hereinafter
referred to as "Landlord";

and

DANIC ASSOCIATES, L.L.C.,
c/o Dante Tuxedo, 277 West St. Georges Avenue,
Linden, New Jersey 07035, hereinafter referred to as "Tenant";

WITNESSETH:

WHEREAS, the Landlord is the owner of certain lands and buildings which are devoted
to use as a shopping center commonly known as Brick Mall, and located at 2796 Hooper Avenue, Brick
Town, Ocean County, New Jersey, also known as 205 Brick Mall; and

WHEREAS, Tenant desires to rent space in the unit designated and specified as Building
"B", Store #5, in the shopping center, being a building of approximately 800 square feet; and

WHEREAS, the Landlord and Tenant are desirous of entering into a lease;

NOW, THEREFORE, in consideration of the aforesaid and for the further consideration
hereinafter set forth, it is agreed by and between the Landlord and Tenant as follows:

FIRST: Landlord shall lease to the Tenant the aforesaid store space for a term of five
(5) years, commencing May 16, 1999. During the term of the lease the rent shall be paid as follows:

First Year of Term: FIFTEEN THOUSAND SIX HUNDRED DOLLARS (\$15,600.00)

POSTAL SERVICE		POSTAL MONEY ORDER		15-800
83664426666		990818 087230		**40*00
SERIAL NUMBER	YEAR, MONTH, DAY	POST OFFICE	U.S. DOLLARS AND CENTS	
PAY TO: Township of Brick		CHECKWRITER IMPRINT AREA	55994 01000	
ADDRESS		FROM: Dante Tuxedo's		
C.O.D. NO. OR USED FOR		ADDRESS		
NEGOTIABLE ONLY IN THE U.S. AND POSSESSIONS				
000008002		83664426666		

Joseph
Township
Vic
Man
Hale
Gre
Mar
Kath
Fred

ousing
ministrator
(2) 920-1456
nj.us

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

Date: 8-18-99

Business/Development: Dante Tuxedo's
Owner/Applicant: Dante Tuxedo's
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 83664426666 990818 087230

Final Fee \$ 40.00
Less Deposit \$ 0

Final Payment \$ 40.00

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:

Arline J. Smith
Signature

8-18-99
Date

AHBT FINAL APPROVAL

**OFFICE OF AFFORDABLE HOUSING
CERTIFICATE OF COMPLIANCE**

BLOCK _____ LOT _____ SITE ADDRESS _____
TYPE OF SITE Residential / Commercial TYPE OF BUSINESS _____
APPLICANT _____ PHONE NUMBER _____
APPLICANT ADDRESS _____ CITY & STATE _____
PERMIT # _____ NAME OF BUSINESS _____

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 \$ _____ Date _____
Estimated Required Fee \$ _____
Required Deposit on Estimate \$ _____ Date _____
Check # _____ Receipt # _____
Actual Assessment \$ _____ Date _____
Actual Required Fee \$ _____
Minus Deposit of Estimate \$ _____
Balance Due \$ _____ Date _____
Check # _____ Receipt # _____
Amount Paid In Full \$ _____

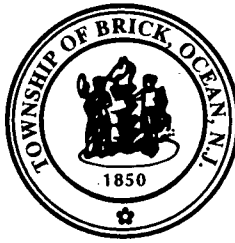
Fees Imposed To Date _____
Fees Reached \$15,000 _____ Date _____

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

TOWNSHIP OF BRICK

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



Joseph C. Scarpelli, Mayor

Township Council:

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

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

CASE # _____

APPROVAL DATE: _____

(Planning Board/BOA)

DATE: 8-11-99

TO: Frederick R. Millman, CTA
Tax Assessor

FROM: Carol A. Wolfe
Affordable Housing Administrator

RE: BLOCK 673 LOT 3 SITE ADDRESS Route 1, Mill

TYPE OF SITE Commercial TYPE OF BUSINESS Restaurant

(Residential/Commercial)

APPLICANT Dante Taxidermy CITY & STATE Madison NJ

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

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

\$ 60,000.00

Frederick R. Millman, CTA, Tax Assessor

Date

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

\$ 42,000.00

Frederick R. Millman, CTA, Tax Assessor

Date

Site Location: Brick Mall 2796 Hopper Ave. Date Rec'd: _____
Block: 673 Lot: 8 Date Issued: _____
Owner id Fee: _____ Control #: _____
Address: _____ Permit #: _____
State: _____ Zip: _____ Phone: () _____
SS #: _____ Provide only if Applicant is owner

TOWNSHIP OF BRICK
401 Chambers Bridge Road
Brick, New Jersey 08723

COUNTER FORM
PLEASE PRINT

BUILDING

CONTRACTOR: Date _____
ADDRESS: 241 W. St. George Ave.
Linden NJ 07036
PHONE: (908) 486-2829

C.E. _____
C. 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: _____

ELECTRICAL

CONTRACTOR: _____
ADDRESS: _____
PHONE: _____
EXP. DATE: _____
FEDERAL EMP. #. (or S.S. #): _____

TECHNICAL DATA (LIST ALL FIXTURES)

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Exact HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/E.A.C. Panel		

TOTAL NUMBERS

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

COUNTER FORM
PLEASE PRINT

PLUMBING

CONTRACTOR:
ADDRESS:
PHONE:
LIC #:
LIC EXPIRATION DATE:
FEDERAL EMPL # (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:

FIRE

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

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 Liquid Storage Tanks	Capacity	Fuel
Combustible 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 Existing Exit Signs
Other Existing Signs, changing plastic.
Estimated Cost of Fire Protection Work: \$
Signature: Mike D. Smith

Owner ☐ Contractor ☐

SUBCODE APPROVAL:

PLANS: Required ☐ Approved ☐

Approved by: