

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.

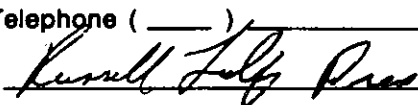
I understand that if any of the above statements are willfully false, I am subject to punishment.

() Check if contractor.

Agent Name _____

Address _____

Telephone (_____) _____

Signature  _____ Date _____

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. Initial	Final Date	
☐ 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 Protect.									
☐ Utility Dig No.									
☐ Other									
☐									
☐									

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 EXPIRED
☐ Temporary Certificate of Occupancy	No. _____
☐ Temporary Certificate of Occupancy	No. _____
☐ Continued Certificate of Occupancy	No. _____
☐ Certificate of Occupancy	No. _____
☐ Certificate of Approval	No. _____
☐ None	



CONSTRUCTION PERMIT

Date Issued 8-26-92
Control #
Permit # 1797-92

IDENTIFICATION Block 671 Lot 8

Work Site Location Brid. Plaza Contractor R. S. Sanchez Contr
Address 2679 Heather St #70

Owner in Fee Federal Realty Corp
Address 4810 Woodward Ave. Suite 500 Tele. ()

Richmond, Maryland 21819 Lic. No. or Bldrs. Reg. No. Exp. Date
Tele. () Federal Emp. No.
or Social Security No.

is hereby granted permission to perform the following work:

☒ BUILDING [] PLUMBING [] OTHER
[] ELECTRICAL [] FIRE PROTECTION

DESCRIPTION OF WORK:

Dem.

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 \$ 9500-

124 Clear

PAYMENTS (Office Use Only)	
Building	<u>50 -</u>
Plumbing	
Electrical	
Fire Protection	
Other	
Other	<u>179798</u>
DCA Training Fee	
Cert. of Occ.	<u>BLDR</u>
Other	<u>UTI #</u>
Total	<u>50 -</u>
Check No.	<u>#12385</u>
Cash	<u>BUILDING</u>
Collected By:	<u>TOTAL</u>



Date Received
Date Issued
Control #
Permit #

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

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.

Block C71 Build Playa Vista (Old P&S Area)

Signature

Owner in Fee 70000 Realty Group Planned Development

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Address 2679 Hwy 70 20814

Contractor MAUSGUTH

Tele. (908) 548-8555

Lic. No. or Bids. Reg. No. _____

Federal Emp. No. _____ or Social Security No. _____

Demolition of Port of Bldg.

JOB SUMMARY (Office Use Only)

PLAN/REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☒ No Plans Req.	<u>8/19/92</u>	<u>PK</u>	Type: <u>Roofing</u>	Failure	Approval
☒ All			Foundation		
☐ Footing			Slab		
☐ Foundation			Frame		
☐ Frame			Insulation		
☐ Other			Finishes:		
Joint Plan Review Required:			Energy		
☐ Elec. ☐ Plumb. ☐ Fire			Mechanical		
SUBCODE APPROVAL			TCO		
☐ CO ☐ CCO ☐ TCA			Other		
Date: <u>1/20/98</u>			Final		
Approved By: <u>PK</u>					

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____

Constr. Class Present _____ Proposed _____

No. of Stories _____

Height of Structure _____ Ft.

Area—Largest Floor _____ Sq. Ft.

Total Bldg. Area/All Floors _____ Sq. Ft.

Volume of Structure _____ Cu. Ft.

Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

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

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration
 - ☐ Roofing
 - ☐ Siding
 - ☐ Other _____
- ☐ Demolition
- ☐ Miscellaneous
 - ☐ Fence _____ Height _____
 - ☐ Sign _____ Sq. Ft. _____
 - ☐ Pool _____
 - ☐ Elevator _____
 - ☐ Asbestos Abatement _____
 - ☐ Other _____

(Office Use Only)

FEE

Paid ☐ Check # _____	Administrative Surcharge \$ _____
Collected by: _____	Minimum Fee \$ _____
	TOTAL FEE \$ _____

The Brick Township Municipal Utilities Authority

COMMISSIONERS

JOHN C. EKARIUS
CHAIRMAN

THOMAS G. MAIORINE
VICE-CHAIRMAN

MICHAEL THULEN
SECRETARY

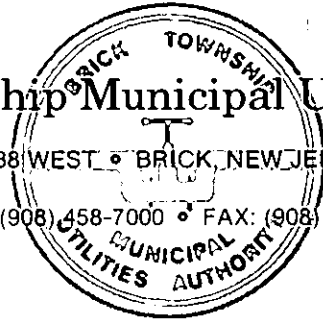
WILLIAM MILLER
TREASURER

ALAN COHEN
ASS'T. SEC/TREAS

1551 HIGHWAY 88 WEST • BRICK, NEW JERSEY 08724-2399

PHONE: (908) 458-7000 • FAX: (908) 458-7725

KEVIN F. DONALD
Executive Director



August 13, 1992

R & S Sewer Contractors
2679 Highway 70
Manasquan, NJ 08736

Subject: Account No.: J960927
Service Location: Brick Plaza (old R & S Store)
Block: 671 Lot: 8
Building to be Demolished

Dear Russell:

This is to certify that the water service at the subject property has been terminated and the water metering system has been removed.

Please note that it is the responsibility of the homeowner to insure that the sewer line is properly capped so that debris from the demolition procedure does not enter the sewer system.

Very truly yours,

Patti Evan, Supervisor
Customer Accounts Division



Jersey Central Power & Light Company
55 River Avenue
Lakewood, New Jersey 08701

7/21/92

R & S Sewer Contractors, Inc.
2679 Highway 70
Manasquan, N.J. 08736

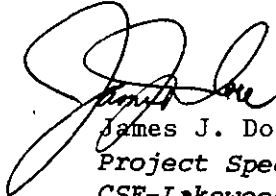
Dear Sir:

This letter confirms that Jersey Central Power & Light Company has performed a field inspection of the building at the location listed below and determined that our electric service cables and meters have been removed.

Brick Plaza Shopping Center
Bldg. #27
Chambersbridge Road
Brick, N.J.
Meter #s 64436426G & 42181810W
Acct. #s 636216292525 & 636216292020

This notification is effective as of the above date, and certifies that the referenced building is now electrically safe for demolition.

Sincerely yours,



James J. Dore
Project Specialist
CSE-Lakewood

Removed Meter Only* 7/6/92

GENTLEMEN:

#321567

FORM 233 Rev. 7/84

YOUR REQUEST TO LOCATE NJNG PIPELINE FACILITIES AT THE LOCATION SHOWN BELOW HAS BEEN INVESTIGATED AND WE ARE REPORTING THE STATUS WITH AN "X" IN THE APPROPRIATE BLOCK(S).

Brick Plz, Brick Blvd.

STREET LOCATION

Brick

MUNICIPALITY

metropolitian acct #02-4529-5418-68

MARK OUT NUMBER 90

NO NJNG FACILITIES WITHIN 200'

☐

MARK OUT METHOD --- PAINT

☒

LOCATION IS NOT IN NJNG SERVICE AREA

☐

--- STAKES

☐

OTHER COMPANIES MAY SERVICE THIS AREA

☐

7-8-92

DATE

NEW JERSEY NATURAL GAS COMPANY

PS

SHOULD ANY DAMAGE TO NJNG FACILITIES OCCUR,
PLEASE TELEPHONE NJNG AT ONCE - - - 800-392-6865

* FOR MARK OUT QUESTIONS PLEASE TELEPHONE - 800-221-0051

Service Serves 2 more Stores Cannot be retired

Sherry
ext
4317