

RECEIVED

Page 1
SEP 12 1989

CONSTRUCTION PERMIT APPLICATION

DIV. OF INSPECTION

TOWNSHIP OF BRICK

I. IDENTIFICATION

☒ Proposed Work at: Brick Plaza Shopping Center Store #17
☒ Owner Name: Brick Plaza Inc. Tel. ()
 Address _____
 3. Principal Contractor: _____ Tel. ()
 Address _____
 Lic. No. or Builder Reg. No. _____ Federal Emp. No. _____
 4. Architect or Engineer: _____ Tel. ()
 Address _____
☒ Responsible Person in Charge of Work Ray Gunther Tel. (201) 477-0858

II. PROPOSED WORK

A. TYPE OF WORK		B. CATEGORIES OF WORK		D. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?	
1. ☐ Minor Work (Single Trade)	Complete only II.B., III and IV.A. and Page 2	Permit/Category	Estimated	1. ☐ Elevators/Dumbwaiters	
2. ☐ Small Job (\$5,000 and no Prior Approvals)		1. ☐ Building/Structural	\$ _____	2. ☐ High-Pressure Boilers	
3. ☐ New Building		2. ☐ Plumbing	_____	3. ☐ Refrigeration Systems	
4. ☐ Addition		3. ☐ Electrical	_____	4. ☐ Pressure Vessels	
5. ☐ Alteration		4. ☐ Fire Protection	_____	5. ☐ Hazardous Uses/Places of Assembly	
6. ☐ Repair, Replacement	5. ☐ Other _____	_____	6. ☐ Cross-connections/Backflow Preventors		
7. ☐ Demolition	6. ☐ Other _____	_____	7. ☐ Sprinklers		
8. ☒ Other: <u>Sign Repair</u>	TOTAL COST <u>\$ 250</u>		8. ☐ Smoke Control Systems in Open Wells		
C. DO YOU WANT:					
1. ☐ Partial Releases		2. ☐ Prototype Processing			

III. DESCRIPTION OF BUILDING USE (USE GROUPS)

A. RESIDENTIAL

1. ☐ Hotels (R-1)
 2. ☐ Multi-Family (R-2)
 HMD Reg. No.: _____
 3. ☐ Two Family (R-3b)
 4. ☐ One-Family (R-3a)
- If new construction, enter no. of dwelling units _____
 If other than new construction, enter no. of dwelling units: _____
 Before Construction: _____
 After Construction: _____
 Net Gain (or loss): _____

B. NON-RESIDENTIAL

- | | |
|---|---|
| 5. ☐ Theatres with Stage (A-1-A) | 18. ☐ Institutional Detention Center (I-1) |
| 6. ☐ Movie Theatres (A-1-B) | 17. ☐ Hospitals, Infirmarys (I-2) |
| 7. ☐ Night Clubs (A-2) | 18. ☐ Group Homes (I-3) |
| 8. ☐ Restaurants, Libraries, Museums (A-3) | 19. ☐ Mercantile (M) |
| 9. ☐ Religious Assembly (A-4) | 20. ☐ Moderate-Hazard Warehouse (S-1) |
| 10. ☐ Outdoor Assembly (A-5) | 21. ☐ Low-Hazard Warehouse (S-2) |
| 11. ☐ Business (B) | 22. ☐ Temporary, Misc. (U) |
| 12. ☐ Educational (E) | 23. ☐ Other _____ |
| 13. ☐ Moderate-Hazard Factory (F-1) | |
| 14. ☐ Low-Hazard Factory (F-2) | |
| 15. ☐ High-Hazard (H) | |

State Specific Use: _____

If Change in Use Group, Indicate Former: _____

IV. BUILDING CHARACTERISTICS

A. OWNERSHIP

1. ☐ Private (Individual, Corp., Non-profit Inst., Etc.)
 2. ☐ Public (State, County or Local Govt.)

B. HEATING FUEL

- | Principal | Secondary | Type |
|-----------------------------|--------------------------|--------------------------|
| 3. ☐ | ☐ | Gas |
| 4. ☐ | ☐ | Oil |
| 5. ☐ | ☐ | Electric |
| 6. ☐ | ☐ | Solid (Wood, Coal, Etc.) |
| 7. ☐ | ☐ | Propane |
| 8. ☐ | ☐ | Solar |
| 9. ☐ | ☐ | Other _____ |

C. TYPE OF SEWAGE DISPOSAL

10. ☐ Public or Private Company
 11. ☐ Private (Septic Tank, Etc.)

D. TYPE OF WATER SUPPLY

12. ☐ Public or Private Company
 13. ☐ Private (Well, Etc.)

E. BUILDING CHARACTERISTICS

14. No. of Stories _____
 15. Height of Structure _____ Ft.
 16. Area—Largest Floor _____ Sq. Ft.
 17. Bldg. Area—All Fls. _____ Sq. Ft.
 18. Volume of Structure _____ Cu. Ft.
 19. Total Land Area Disturbed _____ Sq. Ft.

LDS BR 10310947

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION

I hereby certify that I am the owner of the property listed on Page 1. This dwelling is to be occupied by myself and is not to be used for any purpose, other than single family residential use.

- A. ☐ I further certify that I prepared the plans submitted. This statement is made in accordance with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)vii.
- B. ☐ I further certify that I will perform the work below.
- B1. ☐ Building B2. ☐ Electrical B3. ☐ Plumbing
- C. ☐ I further certify that a new home will be constructed on this property, for my use and occupancy. I attest that all design, construction, plumbing, or electrical work will be done by me or by subcontractors under my supervision, in accordance with all applicable laws; and further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.A.C. 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.
- 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 understand that if any of the above statements are willfully false, I am subject to punishment.

X SIGNATURE _____ DATE _____

II. AGENT SECTION

I hereby certify that the work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

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

RAY GUNTHER

TEL. (201) 477-0854

ADDRESS

807 MANTOLONG RD.

BRICK, N.J.

SIGNATURE

Ray Gunther

PERMIT CONTROL

I. PLAN REVIEW STATUS

Updated at time of receipt of drawings and when plans are approved.

☐ PARTIAL RELEASES

☐ PROTOTYPE PLAN - FILE LOCATION AND NO. _____

Plan Review Required	Type of Work	Plans Received By Date Receiver	Approval Date	Reviewer	Comments
☐	BUILDING				
	Footings/Foundations				
	Framing				
	Architectural				
	Other <i>Founding</i>		<i>9/10/89</i>	<i>MC</i>	<i>B-3 190-102.3</i>
☐	PLUMBING				
☐	ELECTRICAL				<i>Buss</i>
☐	FIRE PROTECTION				<i>PROFESS OFF</i>
☐	OTHER _____				

II. PERMIT/INSPECTION STATUS

Updated at time of permit and after final approvals.

Issue Date	Category	Revisions	Final Inspection	Comments
	ALL CONSTRUCTION		<i>3/4/90</i>	<i>PK</i>
	BUILDING			
	Footings/Foundations			
	Framing			
	Architectural			
	Other _____			
	PLUMBING			
	ELECTRICAL			
	FIRE PROTECTION			
	OTHER _____			

III. CERTIFICATES ISSUED

CERTIFICATES TO BE ISSUED:

Date Issued

- ☐ Temporary Certificate of Occupancy
Date Expired _____
- ☐ Temporary Certificate of Occupancy
Date Expired _____
- ☐ Certificate of Occupancy
No. _____
- ☐ Certificate of Continued Occupancy
No. _____
- ☐ Certificate of Approval
No. _____
- ☐ None

IV. ON-GOING INSPECTIONS

On-going Inspections Required
(See Page 1, II.D.)

Date Posted to
Log and Tickler

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

V. FEE SUMMARY

Initial fee collection recorded in A; all others in section B.

A. COLLECTED AT TIME OF CONSTRUCTION PERMIT ISSUANCE

	AMOUNT
BUILDING	\$ _____
PLUMBING	\$ _____
ELECTRICAL	\$ _____
FIRE PROTECTION	\$ _____
OTHER <i>Sign</i>	<i>384.00</i>
SUBTOTAL	\$ _____
- LESS: 20% of subtotal (when plan review performed by state agency).	
D.C.A. TRAINING FEE .0006 x _____	\$ _____
CERTIFICATE OF OCCUPANCY	\$ _____
OTHER _____	\$ _____
OTHER _____	\$ _____
TOTAL COLLECTED WHEN PERMIT ISSUED	\$ <i>384.00</i>
DATE <i>9/12/89</i> Collected By <i>MC</i>	

B. COLLECTED AFTER CONSTRUCTION PERMIT ISSUANCE

Date	Collected By	AMOUNT
CERTIFICATE OF OCCUPANCY	_____	\$ _____
OTHER	_____	\$ _____
OTHER	_____	\$ _____
- LESS: Refunds		(\$ _____)
TOTAL COLLECTED AFTER PERMIT ISSUED		\$ _____

C. TOTAL CONSTRUCTION FEES COLLECTED

	AMOUNT
COLLECTED WITH PERMIT (VA)	\$ _____
COLLECTED AFTER PERMIT (VB)	\$ _____
TOTAL	\$ _____



CONSTRUCTION PERMIT

Date Issued 9-12-89
Control #
Permit # 5368

IDENTIFICATION Block 671 Lot 8

Work Site Location Buck Plaza Contractor Same
Shopping Center Off 17 Address _____

Owner in Fee _____
Address _____

Tele. (____) _____
Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____
Federal Emp. No. _____
or Social Security No. _____

is hereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER _____
☐ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

Sign

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$ 250

[Signature]
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)		5368#
Building	BLOCK	0.00
Plumbing	671 #	
Electrical	LOT	0.00
Fire Protection	8 #	
Other	<u>Sign</u> 384	384.00
Other	TOTAL	384.00
DCA Training Fee	CHECK	384.00
Cert. of Occ.	CHANGE	0.00
Other	0	
Total	09/12/89 NO. 53680017A005	11:26
Check No.	<u>7297</u>	
Cash		
Collected By:	<u>[Signature]</u>	

BUILDING **SUBCODE** TECHNICAL SECTION



PERMIT NO. 53645
 DATE ISSUED 9-12-89
 REVISION DATE _____
 Block 671 Lot 8
 Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only When changing contractors, notify this office
 Owner BRICK PLAZA INC Contractor SAPE
 Address BRICK PLAZA Shopping Center
BRICK, N.J. 08723
 Tel. (201) 477-5300 Tel. () _____
 Work Site Address STORE #17 Lic. No. _____
 Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
 (Complete for Minor Work and Small Job Only)
 I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

AGENT SIGNATURE _____

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK
 Give detail description including materials used, dimensions, etc.

REPAIR EXISTING SIGN.

The NEUMANN TEAM

☐ See Plans

TYPE OF WORK:
☐ New Building
☐ Addition
☐ Alteration/Renovation
☐ Roofing
☐ Siding
☐ Other _____
☐ Demolition
☐ Miscellaneous
☐ Fence
☐ Sign
☐ Pool
☐ Elevator
☐ Other _____

Fee Basis	Fee
Minimum Building Fee (if applicable)	\$ _____
Total Building Fee (Greater of Minimum or Subtotal)	\$ _____
SUBTOTAL	\$ _____

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____
 No. of Stories _____ Total Building Area-All Floors _____ Sq. Ft.
 Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.
 Area-Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.
 Estimated Cost of Building Work: \$ 250-

D. COMMENTS

B-3
 Business - Professional Office
 B-3 190-102, 3

☐ Partial Releases ☐ Prototype Processing

BUILDING **SUBCODE** TECHNICAL SECTION



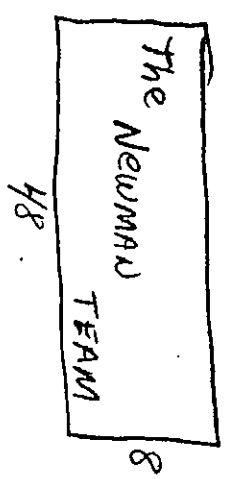
PERMIT NO. 344
 DATE ISSUED 9-12-79
 REVISION DATE _____
 Block 671 Lot 8
 Subdivision _____

A. IDENTIFICATION

APPLICANT - Complete unshaded areas only When changing contractors, notify this office
 Owner BRICK PLAZA INC Contractor SAPE
 Address BRICK PLAZA Shopping Center
BRICK, N.J. 08723
 Tel. (201) 477-5300 Tel. () _____
 Work Site Address STORE # 17 Lic. No. _____
 Federal Emp. No. _____

CERTIFICATION IN LIEU OF OATH:
 (Complete for Minor Work and Small Job Only)
 I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.
 AGENT SIGNATURE _____

B. TECHNICAL SITE DATA

DESCRIPTION OF WORK
 Give detail description including materials used, dimensions, etc.
Repair EXISTING SIGN.


TYPE OF WORK:	Fee Basis	Fee
☐ New Building		
☐ Addition		
☐ Alteration/Renovation		
☐ Roofing		
☐ Siding		
☐ Other		
☐ Demolition		
☐ Miscellaneous		
☐ Fence		
☐ Sign		
☐ Pool		
☐ Elevator		
☐ Other		
SUBTOTAL		
Minimum Building Fee (if applicable)		
Total Building Fee (Greater of Minimum or Subtotal)		

☐ See Plans

C. BUILDING CHARACTERISTICS

USE GROUP: _____ Present _____ Proposed _____
 No. of Stories _____ Total Building Area-All Floors _____ Sq. Ft.
 Height of Structure _____ Ft. Volume of Structure _____ Cu. Ft.
 Area-Largest Floor _____ Sq. Ft. Total Land Area Disturbed _____ Sq. Ft.
 Estimated Cost of Building Work: \$ 250-

D. COMMENTS

B-3
 Business - Professional Office
 B-3 190-102.3
☐ Partial Releases ☐ Prototype Processing

JOB CONDITION/COMMENTS

DATE _____

[illegible]

Fire Grading:

Maximum Live Load:

Maximum Occupancy Load:

JOB SUMMARY

PLAN REVIEW		Date	Initials
☐	No Plans Required	_____	_____
☐	All	_____	_____
☐	Footings/Foundation	_____	_____
☐	Frame	_____	_____
☐	Architectural	_____	_____
☐	Other _____	_____	_____

INSPECTIONS

	Date	Initials
☐ No Plans Required	_____	_____
☐ All	_____	_____
☐ Footing/Foundation	_____	_____
☐ Frame	_____	_____
☐ Architectural	_____	_____
☐ Other _____	_____	_____

Type	Failure Dates		Approval Date
☐ Footing/Foundation			
☐ Slab			
☐ Frame			
☐ Architectural			
☒ Insulation			
☐ Finishes			
☐ Energy			
☐ Mechanical			
☐ TCO			
☐ Other			

INSPECTIONS FINAL

☐ CO ☐ CCO ☒ CA

Date: 3/4/96

Entered By: DL



**ELECTRICAL
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

RUG 29 95 0 0 7 8 9 7

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

Block 471 Lot 8
Work Site Location BRICK PLAZA
Owner in Fee CHARLES A. BIGGS
Address 4800 HANCOCK RD. (THE WIZ)
Address BRICK PLAZA MO.
Tele. (215) 657-8740
Contractor ITS ELECTRIC
Address 544 NICHOLS PL.
Address BRICK AVE 08743
Tele. (908) 477-1725
Lic. No. 11930
Federal Emp. No. _____ or Social Security No. 157-30-1631

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [A] Other Please see notes for details
Building Occupied as _____ Utility Co. BRICK PLAZA
Est. Cost of Elec. Work \$ 23,500. Includes DPA BPG 2PI PP
only

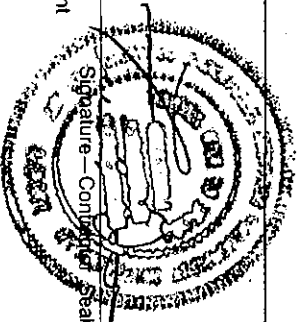
JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)
	Type:	Failure Failure Approval Initial
[] No Plans Required	Rough	
Joint Plan Review Required:	Temporary	
[] Bldg. [] Plumb.	Constr. Serv.	
[] Fire [] Elevator	TCO	
[] Elec. Plans Approved	Other	
Date: <u>4-5-08</u>	Service	
Approved by: <u>144.23</u>	Final	
SUBCODE APPROVAL	Temp. Cut-in-Card Date Issued	
[] CO [] CCO [] CA	Final Cut-in-Card Date Issued	
Date: _____		
Approved By: _____		

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

☒ Licensed Electrical Contractor [] Exempt Applicant



D. TECHNICAL SITE DATA

NO. SIZE ITEM

9	Fixtures (1)	
2	Receptacles (2)	
	Switches (3)	
	Total 1 + 2 + 3	40
	Kw Range	
	Kw Oven(s)	
	Kw Surface Unit	
	Kw Dishwasher	
	hp Garbage Disposal	
	Kw Dryer	
	Kw A/C Unit	
	Burglar Alarms	
	Intercoms Panels	
	Smoke Detectors	
	hp Whirlpool/Spa	
	Pool Bonding	
	hp Pool Filter Motor	
	Pool Lights	
	Kw Water Heater(s)	
	Kw Central heat:	
	oil, gas or elec.	
	Kw Baseboard Heat Units	
	Thermostats	
	hp Heat Pump	
	hp Pump(s)	
2	225 Amp Motor-Center/Sub Panels	150
2	Signs 600 amp OP panels	150
	Light Standards	
	hp Motors—Fractional H.P.	
	hp Motors—All Others	
	Kw Transformers	
	Kw Generators	
	Amp Service Entrance	
1	Other	375
	1200 Amp Panel	

FEE (Office Use Only)

Paid / Check # 3733 Administrative Surcharge \$ 715
Collected by: DPF Minimum Fee \$ 19.00
DCA Training Fee \$ 134.00
TOTAL FEE \$ 924.00

U.C.C. Form F-120B

1 White = Inspector Copy
3 Pink = Office Copy
2 Canary = Office Copy
4 Gold = Applicant Copy



929-4733
Municipality Pick New Jersey



ELECTRICAL
SUBCODE
TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

AUG 28 95 00 7 8 3 9

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

Block 1071 Lot 8
Work Site Location Super-Cats / Pick Plaza Sp #13
Waste 544 / Pick Rd.

Owner in Fee Super-Cats
Address 45 Smith
2, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 105, 110, 115, 120, 125, 130, 135, 140, 145, 150, 155, 160, 165, 170, 175, 180, 185, 190, 195, 200, 205, 210, 215, 220, 225, 230, 235, 240, 245, 250, 255, 260, 265, 270, 275, 280, 285, 290, 295, 300, 305, 310, 315, 320, 325, 330, 335, 340, 345, 350, 355, 360, 365, 370, 375, 380, 385, 390, 395, 400, 405, 410, 415, 420, 425, 430, 435, 440, 445, 450, 455, 460, 465, 470, 475, 480, 485, 490, 495, 500, 505, 510, 515, 520, 525, 530, 535, 540, 545, 550, 555, 560, 565, 570, 575, 580, 585, 590, 595, 600, 605, 610, 615, 620, 625, 630, 635, 640, 645, 650, 655, 660, 665, 670, 675, 680, 685, 690, 695, 700, 705, 710, 715, 720, 725, 730, 735, 740, 745, 750, 755, 760, 765, 770, 775, 780, 785, 790, 795, 800, 805, 810, 815, 820, 825, 830, 835, 840, 845, 850, 855, 860, 865, 870, 875, 880, 885, 890, 895, 900, 905, 910, 915, 920, 925, 930, 935, 940, 945, 950, 955, 960, 965, 970, 975, 980, 985, 990, 995, 1000

Tele. (301) 569-7008

Contractor SAC ELECTRICAL

Address 198 MAIN ST
LITTLE ROCK NJ 07643

Tele. (201) 440-3826

Lic. No. 11768

Federal Emp. No. 22-322-8761 or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

☐ Reinspection ☐ Resale ☐ Meter Set

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 2,200.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:

☐ No Plans Required

Joint Plan Review Required:

☐ Bldg. ☐ Plumb. ☐ Fire

☒ Elec. Plans Approved

Date: 5/5/83

Approved by: [Signature]

SUBCODE APPROVAL:

☐ CO ☐ CCO ☐ CA

Date: _____

Approved by: _____

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. Robert Z Smith

D. TECHNICAL SITE DATA

NO. 16

SIZE 26

ITEM 10

1 52

Fixtures (1)

Receptacles (2)

Switches (3)

Total 1 + 2 + 3

Range

Oven(s)

Surface Unit

Dishwasher

Garbage Disposal

Dryer

A/C Unit

Burglar Alarms

Intercoms Panels

Smoke Detectors

Whirlpool/spa

Pool Bonding

Pool Filter Motor

Pool Lights

1 45K

Water Heater(s)

Central heat:

oil, gas or elec.

Baseboard Heat Units

Thermostats

Heat Pump

Pump(s)

Motor Control Center/Sub Panels

Signs

Light Standards

Motors—Fractional H.P.

Motors—All Others

Transformers

Generators

Service Entrance

Other

Other

Other

Other

Other

Other

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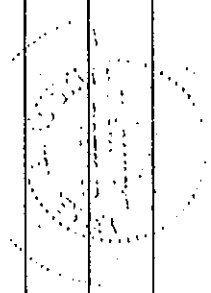
Other

Other

Other



MIDDLE DEPARTMENT INSPECTION AGENCY





Township of Brick

401 Chambers Bridge Road, Brick, N.J. 08723 (201) 477-3000

Office of Zoning, ext 269
Division of Inspections

SIGN CONSTRUCTION PERMITS

1. A construction permit is required before a sign or advertising structure may be erected or replaced.
2. Zoning approval is required before a sign construction permit may be issued. All requirements of ~~Section 44A-74~~ of the Township Code must be met. *Chapter 190*
3. A plot plan or survey map must be submitted with the sign permit application and must show the proposed location of the sign and the setbacks from all property lines.
4. A drawing must be submitted with the sign permit application showing the following:
 - a. Dimensions of the sign
 - b. Square footage of the sign
 - c. Total height of the sign
 - d. Distance above ground level
 - e. Wording of the sign
5. The fee for a sign construction permit shall be one dollar (\$1.) per square foot of the surface area of the sign, provided that the minimum fee shall be seven dollars and fifty cents (\$7.50). In the case of double-faced signs, the area of the surface of only one (1) side of the sign shall be used for purposes of the fee computation.

John Kinnevy
John Kinnevy
Zoning Officer

7-9-85
4-19-89